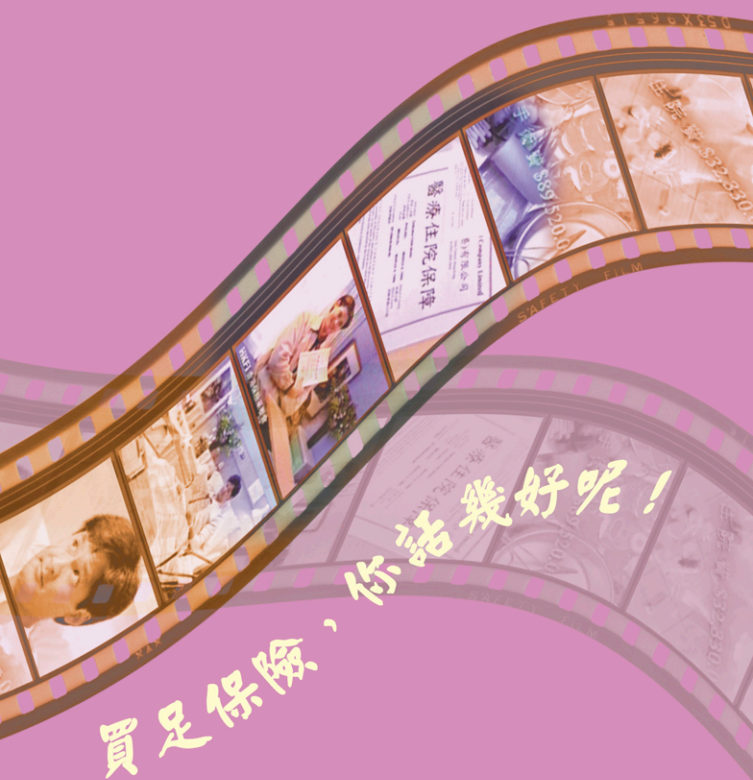


醫療索償數據知多少？

2011年醫療索償數據調查

Medical Claims Statistics 2011



買足保險，你話幾好呢！

目錄

1. 提綱	2
1.1 調查結果摘要	2
2. 分析	4
2.1 住院個案	4
2.2 門診個案	8
附表一 各類手術費	25

書中所載數據由專業顧問收集及分析，香港保險業聯會（保聯）於編纂過程中已竭盡所能，確保資料準確無誤，惟保聯或顧問未能保證有關內容準確無誤，亦概不負責因內容謬誤或遺漏而導致的任何虧損或損失。

1. 提綱

書中刊載 2011 年 1 月至 12 月期間醫療保單的索償數據，由本港 19 家最具規模之醫療承保商提供，佔 2011 年整體保費收入的 89%。本書只刊載團體保單的資料。

書中包括以下分析：

- 團體醫療保單的私家醫療開支總覽
- 手術費用的調查

1.1 調查結果摘要

私家醫療開支總覽

表 1.1
總賬面金額及平均收費摘要

項目	賬面總額		個案數目		每宗個案 平均收費（港元）
	金額（千港元）	%	數目	%	
2011 年					
住院	2,191,004	46%	161,816	2%	13,540
門診	2,544,030	54%	8,061,902	98%	316
總數	4,735,034	100%	8,223,718	100%	576
2010 年					
住院	1,879,459	45%	145,683	2%	12,901
門診	2,292,202	55%	7,728,483	98%	297
總數	4,171,661	100%	7,874,166	100%	530

備註：因需要調整為整數的關係，以上數字可能與實際數目有出入。

表 1.1 的數據顯示在 2011 年的總賬面醫療收費中，住院服務佔 46%，而門診服務佔 54%，但是住院個案的數目僅佔所有個案的 2%，這可能表示醫療保險公司如欲更有效地管理醫療索償成本，必須留意住院個案的賠償開支和門診治療的使用率。

每宗個案之手術費調查

手術費用細分為超過 2,000 種類別，手術費的賬面金額摘要，詳見表 1.2。手術費賬面金額因應入住的是三等房、二等房，以至頭等房而增加。

住院級別	手術費 (港元)		個案數目
	中位數	平均數	
2011 年			
頭等房	23,000	38,130	1,542
二等房	13,750	21,536	5,039
三等房	8,500	14,012	29,924
診所小手術	1,500	3,142	73,495
2010 年			
頭等房	22,000	36,082	1,732
二等房	12,000	20,034	6,710
三等房	7,700	13,037	23,311
診所小手術	1,500	2,913	64,713

備註：上表的分析並不包括手術費賬面金額為「0」的個案。

2. 分析

2.1 住院個案

2.1.1 以服務分類

每個住院個案的索償費用皆細分為以下七個類別：

- 住院及膳食費用
- 住院雜費
- 手術費
- 麻醉師費用
- 手術室費用
- 醫生巡房費
- 專科醫生費用

2.1.2 每宗個案之平均費用

表 2.1 及圖 2.1 詳列各級住院個案在 2010 年與 2011 年的平均實付金額、賬面金額及相對比率。相對比率以三等房之平均賬面或實付金額作百分比基準（即 100%）顯示，舉例說：頭等房之賬面金額相對比率為 206%，即入住頭等房之病人須付出之平均賬面金額是三等房病人的 206%。

表 2.1
各級住院的平均實付金額和賬面金額

各級住院	賬面金額		實付金額		償付百分率 %
	(港元)	相對比率	數目	相對比率	
2011 年					
頭等房	59,527	206%	38,003	176%	64%
二等房	37,934	131%	28,319	131%	75%
三等房	28,961	100%	21,617	100%	75%
診所小手術	3,967	14%	3,814	18%	96%
2010 年					
頭等房	58,427	219%	38,738	189%	66%
二等房	35,703	134%	26,415	129%	74%
三等房	26,731	100%	20,489	100%	77%
診所小手術	3,616	14%	3,527	17%	98%

備註：(1) 相對比率 - 三等房 = 100%。

(2) 因需要調整為整數的關係，以上數字可能與實際數目有出入。

圖2.1

2010年及2011年每宗個案之平均實付金額及賬面金額(港元)

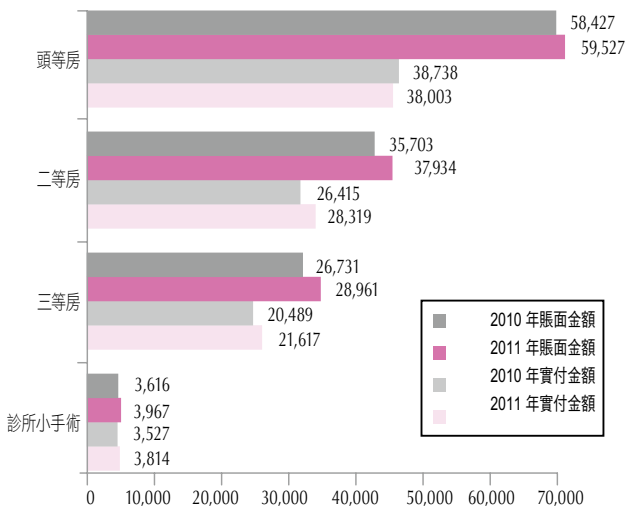
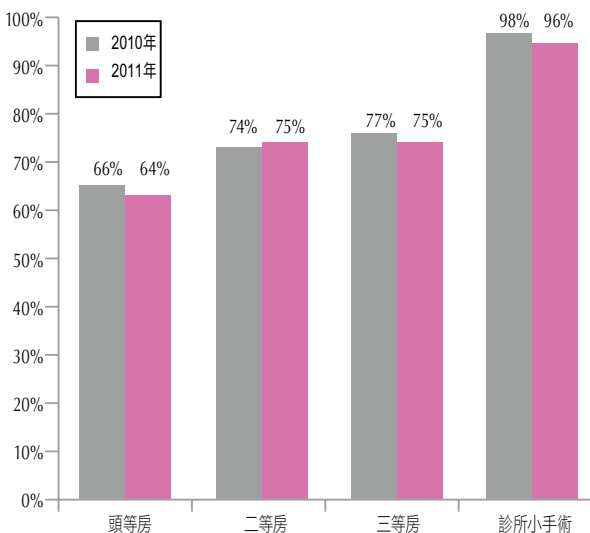


圖2.2

2010年及2011年償付百分率



2.1.3 手術費調查

此部分將 2,023 種常見手術類別歸納為 425 個組別，並羅列四類住院級別的收費標準。由於本調查以私家醫院之手術費為主，故此並不包括在政府醫院進行的治療。調查結果摘錄見表 2.2。

各級住院	賬面金額 (千港元)	個案數目	賬面金額 (港元)			
			平均數	中位數	低位	高位
2011 年						
頭等房	58,797	1,542	38,130	23,000	14,252	40,000
二等房	108,519	5,039	21,536	13,750	8,000	23,000
三等房	419,301	29,924	14,012	8,500	6,000	14,600
診所小手術	230,924	73,495	3,142	1,500	850	3,000
2010 年						
頭等房	62,495	1,732	36,082	22,000	12,000	38,291
二等房	134,430	6,710	20,034	12,000	7,540	20,500
三等房	303,897	23,311	13,037	7,700	5,000	12,075
診所小手術	188,481	64,713	2,913	1,500	800	2,800

備註：(1) 上述分析並不包括手術費賬面金額為「0」之個案。

(2) 低位 = 第30百分位數；高位 = 第70百分位數。

各級住院	平均住院日數
2011 年	
頭等房	2.9
二等房	2.8
三等房	2.5
診所小手術	0.1
2010 年	
頭等房	3.4
二等房	3.2
三等房	2.8
診所小手術	0.3

2.1.4 第 70 百分位數的賬面住院醫療收費水平

表 2.4 的數據是按住院級別和醫療收費的類型，計算第 70 百分位數水平的住院索償的賬面醫療收費水平，表 2.4 所列的金額預計有七成機會足以支付住院索償的實際賬面醫療開支。

醫療收費類別	頭等房	二等房	三等房
2011 年			
每日住院及膳食費用	3,346	1,379	723
手術費	40,000	23,000	14,600
每日醫生巡房費	3,125	1,750	1,000
麻醉師費用	15,000	9,000	6,000
手術室費用	13,814	8,318	5,300
住院費用	21,879	14,786	11,481
專科醫生費用	6,370	3,000	2,400
2010 年			
每日住院及膳食費用	2,697	1,008	684
手術費	38,291	20,500	12,075
每日醫生巡房費	2,559	1,300	889
麻醉師費用	14,000	8,000	5,600
手術室費用	13,612	8,117	4,693
住院費用	19,531	13,209	10,509
專科醫生費用	5,000	3,000	2,000

2.1.5 住院醫療服務使用率

住院醫療服務使用率包括診所小手術及住院項目，兩者在 2010 年及 2011 年的平均使用率見表 2.5。

治療年度	診所小手術	住院
2011 年	6.1%	4.7%
2010 年	5.7%	4.6%

備註：(1) 2011 年使用率 = 2011 年的治療數目 / 2011 年保單之滿期受保人數。

(2) 由於參與調查的會員公司數目改變，所以 2010 年的使用率跟往年所顯示的不同。

2.1.6 2013 年 7 月至 2014 年 6 月

住院醫療服務趨勢預測 (2013/2014)

診所小手術和住院項目的預計使用率及平均索償金額見表 2.6。由於潛在的通貨膨脹壓力，預計平均索償金額的增幅會較使用率為顯著。

項目	診所小手術	住院
預計使用率	6.3%	4.9%
預計平均索償金額 (港元)	4,387	31,153

備註：因需要調整為整數的關係，以上數字可能與實際數目有出入。

2.2 門診個案

2.2.1 以診症分類

門診個案可細分為以下七個類別：

- 中醫師費用
- 普通科醫生費用
- 專科醫生費用
- 物理治療師費用
- 脊醫費用
- X光/化驗室費用
- 牙醫費用

2.2.2 每宗個案平均費用

表 2.7 和圖 2.3 顯示每宗門診個案之平均實付金額及賬面金額。索償百分比見圖 2.4，顯示在 2011 年，各種醫療服務的賬面金額、實付金額和相對比率，均較 2010 年的為高。

表 2.7a
每宗門診個案平均賬面金額

治療項目	2011 年		2010 年		10-11 年 變化
	賬面金額 (港元)	相對比率	賬面金額 (港元)	相對比率	
中醫師	304	125%	282	122%	7.5%
普通科醫生	242	100%	232	100%	4.1%
專科醫生	573	237%	542	233%	5.7%
物理治療師	363	150%	344	148%	5.5%
脊醫	622	257%	586	252%	6.0%
X 光 / 化驗室	721	298%	678	292%	6.3%
牙醫	766	317%	697	300%	9.9%
門診總數	316	N/A	297	N/A	N/A

備註：(1) 普通科醫生相對比率 = 100%。

(2) 因需要調整為整數的關係，以上數字可能與實際數目有出入。

表 2.7b
每宗門診個案平均實付金額

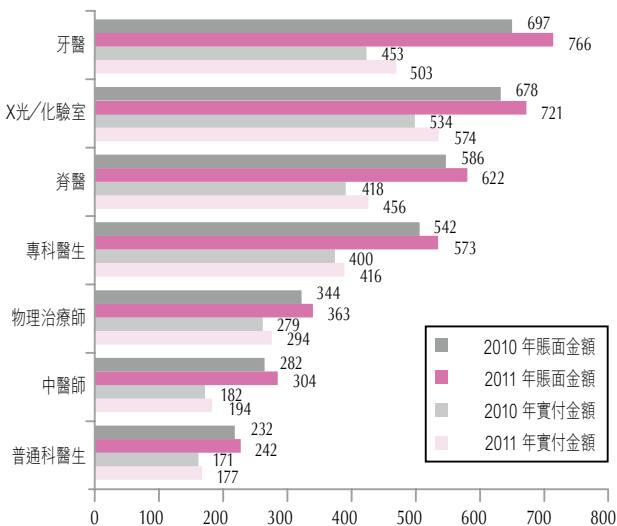
治療項目	2011 年		2010 年		10-11 年 變化
	實付金額 (港元)	相對比率	實付金額 (港元)	相對比率	
中醫師	194	110%	182	106%	6.4%
普通科醫生	177	100%	171	100%	3.3%
專科醫生	416	235%	400	233%	4.0%
物理治療師	294	166%	279	163%	5.3%
脊醫	456	258%	418	244%	9.2%
X 光 / 化驗室	574	324%	534	312%	7.3%
牙醫	503	285%	453	265%	11.0%
門診總數	227	N/A	215	N/A	N/A

備註：(1) 普通科醫生相對比率 = 100%。

(2) 因需要調整為整數的關係，以上數字可能與實際數目有出入。

圖2.3

2010年及2011年每宗門診個案平均實付和賬面金額（港元）

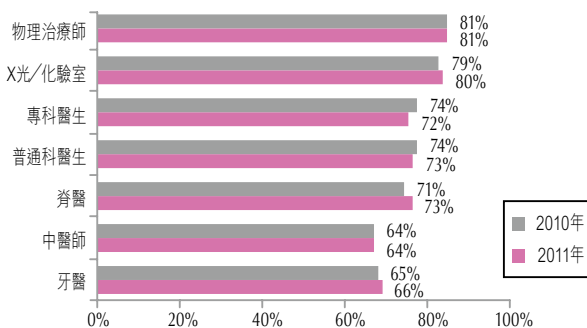


從圖2.3可見，在所有門診個案中，以牙醫費用的平均賬面金額最高，普通科醫生費用則最低。X光/化驗室費的平均實付金額最高，普通科醫生費用則最低。

在償付百分率方面，2011年的普通科醫生的償付百分率與2010年相若，為73%；物理治療師費用的償付百分率最高，為81%，而中醫師的則最低，只有64%（見圖2.4）。

圖2.4

2010年及2011年償付百分率



2.2.3 第 70 百分位數之賬面門診醫療收費水平

第 70 百分位數之賬面醫療收費水平指，投保金額若達致此水平，預計有七成機會足以支付實際的門診醫療費用；七類門診醫療費用的 70 百分位數的水平見表 2.8。

醫療收費類別	2011 年	2010 年
中醫師	300	300
普通科醫生	230	220
專科醫生	600	565
物理治療師	380	360
脊醫	600	600
X 光 / 化驗室	680	640
牙醫	600	550

2.2.4 門診醫療服務使用率

在 2011 年及 2010 年，按服務類型分類的門診醫療服務使用率，詳見表 2.9。除普通科醫生費用及 X 光 / 化驗室費用外，2011 年各類門診服務的使用率均比 2010 年的為高。

醫療服務類別	2011 年	2010 年
中醫師	112.7%	108.9%
普通科醫生	475.9%	493.0%
專科醫生	48.0%	46.9%
物理治療師	20.5%	20.2%
脊醫	2.2%	2.1%
X 光 / 化驗室	28.0%	28.6%
牙醫	55.9%	53.6%

備註：(1) 2011 年的使用率 = 2011 年的治療數目 / 2011 年保單之滿期受保人數。

(2) 由於參與調查的會員公司數目改變，所以 2010 年的使用率跟往年所顯示的不同。

2.2.5 2013 年 7 月至 2014 年 6 月

門診醫療服務之趨勢預測 (2013/14)

根據 2010 及 2011 年之數據，預計 2013/2014 年門診醫療服務的使用率及平均索償金額將會持續上升。2013/2014 年的預測數字見表 2.10。

門診保障	預測使用率 (%)	預測平均索償金額 (港元)
中醫師	114.8%	354
普通科醫生	493.5%	258
專科醫生	49.1%	635
物理治療師	21.0%	420
脊醫	2.2%	781
X 光 / 化驗室	28.3%	775
牙醫	57.5%	781

備註：因需要調整為整數的關係，以上數字可能與實際數目有出入。

Contents

1	EXECUTIVE SUMMARY	14
1.1	Summary of Findings.....	14
2	ANALYSIS	16
2.1	In-patient Cases	16
2.2	Out-patient Cases	20
	APPENDIX – Results by Operation	25

The statistics in this booklet have been collected and compiled by a professional consultant. While every effort has been made to ensure the accuracy of the information contained, neither the Hong Kong Federation of Insurers nor the consultant guarantees its accuracy or accept any liability for any loss or damage arising from any inaccuracies or omissions.

1 EXECUTIVE SUMMARY

This booklet contains the compilation of medical claims statistics for the period from Jan to Dec 2011 provided by 19 of the largest medical underwriters in Hong Kong, which represent a total of 89% of the market written premium in 2011. Please note that only group policies are included in this booklet.

This booklet includes analysis of:

- Overview of private medical expenses of group insurance policies.
- Survey of Surgeons' Fees.

1.1 Summary of Findings

Overview of Private Medical Expenses

TABLE 1.1

Summary of Total Billed Amount and Average Cost

Description	Total Billed Amount		Number of Cases		Average Cost Per Claim (HK\$)
	(HK\$000's)	%	Number	%	
2011					
In-Patient	2,191,004	46%	161,816	2%	13,540
Out-Patient	2,544,030	54%	8,061,902	98%	316
Total	4,735,034	100%	8,223,718	100%	576
2010					
In-Patient	1,879,459	45%	145,683	2%	12,901
Out-Patient	2,292,202	55%	7,728,483	98%	297
Total	4,171,661	100%	7,874,166	100%	530

Note: Figures may not be additive due to rounding.

The figures in Table 1.1 indicate that 46% of the total cost of medical treatments was for in-patient services and the remaining 54% for out-patient services in 2011. However, in-patient treatments accounted for only 2% of all treatments provided. One possible implication is that the medical insurance providers should focus on the cost of in-patient claims and utilization rate of out-patient treatments to better manage their medical claim costs.

Survey of Surgeons' Fees per Case

The Surgeons' Fees were categorized into more than 2,000 surgical procedures. Table 1.2 summarizes the billed amount of Surgeon's Fees. The Billed Surgeons' Fees increased with the level of accommodation received from Ward to Semi-Private to Private.

Level of Accommodation	Surgeons' Fees (HK\$)		Number of Cases
	Median	Mean	
2011			
Private	23,000	38,130	1,542
Semi-Private	13,750	21,536	5,039
Ward	8,500	14,012	29,924
Day Case	1,500	3,142	73,495
2010			
Private	22,000	36,082	1,732
Semi-Private	12,000	20,034	6,710
Ward	7,700	13,037	23,311
Day Case	1,500	2,913	64,713

Note: The above analysis excludes those cases with zero billed surgeons' fee.

2 ANALYSIS

2.1 In-patient Cases

2.1.1 Distribution by Type of Service

The cost of each in-patient claim is separated into the following seven categories:

- Room & Board Cost
- Hospital Expenses
- Surgeons' Fees
- Anaesthetists' Fees
- Operating Theatre Cost
- Physicians' Fees
- Specialist's Fees

2.1.2 Average Cost per Case

The average paid and billed amounts and their relativity factors for each level of accommodation are displayed in Table 2.1 and Graph 2.1 for the current and previous studies. The relativity factor is expressed as a percentage of the average billed or paid amount of a specific level of accommodation to that of the Ward accommodation. For example, the billed relativity factor of 206% for the Private accommodation means that the average billed amount of a Private in-patient case is expected to be on average 206% of that of a Ward case.

TABLE 2.1

Average Paid and Billed Amounts by Level of Accommodation

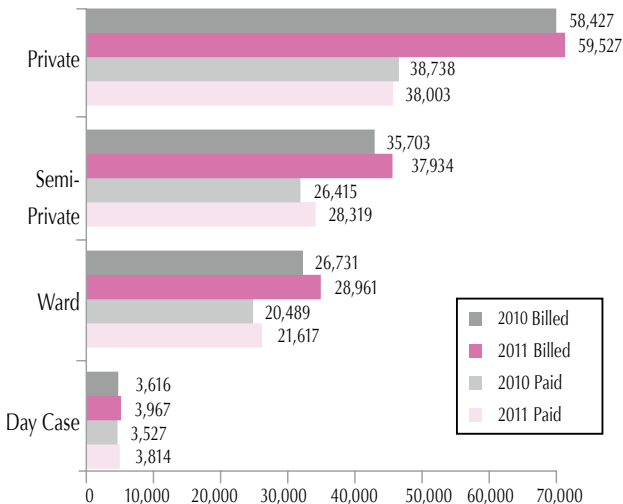
Level of Accommodation	Billed (HK\$)	Relativity Factor	Paid (HK\$)	Relativity Factor	Reimbursement %
2011					
Private	59,527	206%	38,003	176%	64%
Semi-Private	37,934	131%	28,319	131%	75%
Ward	28,961	100%	21,617	100%	75%
Day Case	3,967	14%	3,814	18%	96%
2010					
Private	58,427	219%	38,738	189%	66%
Semi-Private	35,703	134%	26,415	129%	74%
Ward	26,731	100%	20,489	100%	77%
Day Case	3,616	14%	3,527	17%	98%

Note: (1) Relativity – Ward = 100%.

(2) Figures may not be additive due to rounding.

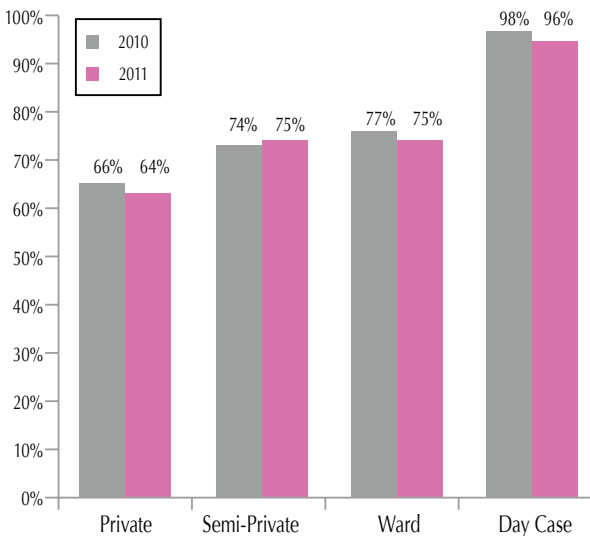
GRAPH 2.1

Average Paid and Billed Amounts per Case (HK\$) in 2010 and 2011



GRAPH 2.2

Reimbursement Ratios in 2010 and 2011



2.1.3 Survey of Surgeons' Fees

A total of 2,023 surgical procedures with different descriptors were categorized into 425 groupings and four different levels of accommodation. Because of the scope of this survey being private medical fees, all treatments performed in Government Ward were excluded from the survey. The results are summarized in Table 2.2.

TABLE 2.2

Summary of Surgical Fees by Level of Accommodation

Level of Accommodation	Billed Amount (HK\$000s)	Number of Cases	Billed Amount (HK\$)			
			Mean	Median	Low	High
2011						
Private	58,797	1,542	38,130	23,000	14,252	40,000
Semi-Private	108,519	5,039	21,536	13,750	8,000	23,000
Ward	419,301	29,924	14,012	8,500	6,000	14,600
Day Case	230,924	73,495	3,142	1,500	850	3,000
2010						
Private	62,495	1,732	36,082	22,000	12,000	38,291
Semi-Private	134,430	6,710	20,034	12,000	7,540	20,500
Ward	303,897	23,311	13,037	7,700	5,000	12,075
Day Case	188,481	64,713	2,913	1,500	800	2,800

Note: The above analysis excludes those cases with zero billed surgeons' fee. Low=30 Percentile, High=70 Percentile.

TABLE 2.3

Summary of Hospital Days by Level of Accommodation

Level of Accommodation	Average Number of Days of Hospital Confinement
2011	
Private	2.9
Semi-Private	2.8
Ward	2.5
Day Case	0.1
2010	
Private	3.4
Semi-Private	3.2
Ward	2.8
Day Case	0.3

2.1.4 Seventy Percentile Level of Billed Medical Fees

The seventieth percentiles of billed medical fees of in-patient claims by level of accommodation and category are displayed in Table 2.4. It is expected that the billed amounts displayed in Table 2.4 would cover the actual billed cost for 70% of all in-patient treatments.

TABLE 2.4
Seventy Percentile Level of In-patient Billed Medical Fees (HK\$)

Category of Medical Fees	Private	Semi-Private	Ward
2011			
Room & Board Cost Per Day	3,346	1,379	723
Surgeons' Fees	40,000	23,000	14,600
Physicians' Fees Per Day	3,125	1,750	1,000
Anesthetists' Fees	15,000	9,000	6,000
Operating Theatre Expenses	13,814	8,318	5,300
Hospital Expenses	21,879	14,786	11,481
Specialists' Fees	6,370	3,000	2,400
2010			
Room & Board Cost Per Day	2,697	1,008	684
Surgeons' Fees	38,291	20,500	12,075
Physicians' Fees Per Day	2,559	1,300	889
Anesthetists' Fees	14,000	8,000	5,600
Operating Theatre Expenses	13,612	8,117	4,693
Hospital Expenses	19,531	13,209	10,509
Specialists' Fees	5,000	3,000	2,000

2.1.5 Utilization Rates of In-patient Medical Services

In-patient medical services consist of clinical surgeries and hospital confinements. The average utilization rates of clinical surgeries and hospital confinements in 2010 and 2011 are summarized in Table 2.5.

TABLE 2.5
Average Utilization Rates of In-patient Medical Services

Treatment Year	Clinical Surgeries	Hospital Confinements
2011	6.1%	4.7%
2010	5.7%	4.6%

Note: (1) Utilization for 2011 = No. of treatment in 2011 / No. of insured earned in 2011.

(2) The Utilization Rates in 2010 are different from the last survey due to changes in participating member companies.

2.1.6 Forecasting of In-patient Medical Services between July 2013 to June 2014 (2013/14)

The projected in-patient utilization rate and average claim size for day case and hospital confinement are summarized in Table 2.6. It can be seen that the average claim size increased more significantly than utilization rate because of underlying inflationary pressure.

Item	Day Case	Hospital Confinements
Forecasted Utilization Rate	6.3%	4.9%
Forecasted Average Claim Size (HK\$)	4,387	31,153

Note: Figures may not be additive due to rounding.

2.2 Out-patient Cases

2.2.1 Distribution by Type of Service

The out-patient cases are separated into the following seven categories of treatment:

- Chinese Medical Practitioners' Fees
- General Practitioners' Fees
- Specialists' Fees
- Physiotherapists' Fees
- Chiropractors' Fees
- X-ray/Laboratory Expenses
- Dentists' Fees

2.2.2 Average Cost per Case

The average paid and billed amounts per case are summarized in Table 2.7 and Graph 2.3. The reimbursement percentages are displayed in Graph 2.4. It can be observed that the average billed and paid amounts for all types of treatments in 2011 are higher than those in 2010. Moreover, the billed relativity factors for 2011 are generally higher than 2010.

TABLE 2.7a
Average Billed Amounts per Case

Treatment	2011		2010		10-11
	Billed (HK\$)	Relativity	Billed (HK\$)	Relativity	Change
Chinese Medicine Practitioners	304	125%	282	122%	7.5%
General Practitioners	242	100%	232	100%	4.1%
Specialists	573	237%	542	233%	5.7%
Physiotherapists	363	150%	344	148%	5.5%
Chiropractors	622	257%	586	252%	6.0%
X-ray/Laboratory	721	298%	678	292%	6.3%
Dentists	766	317%	697	300%	9.9%
Out-Patient Total	316	N/A	297	N/A	N/A

Note: (1) Relativity of General Practitioner = 100%.
(2) Figures may not be additive due to rounding.

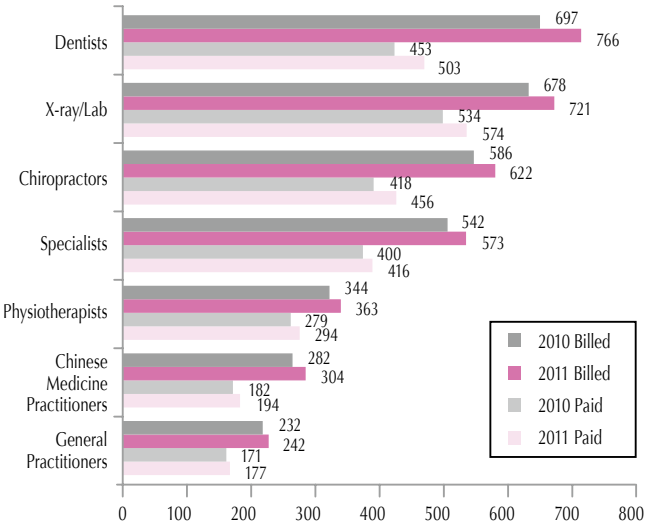
TABLE 2.7b
Average Paid Amounts per Case

Treatment	2011		2010		10-11
	Paid (HK\$)	Relativity	Paid (HK\$)	Relativity	Change
Chinese Medicine Practitioners	194	110%	182	106%	6.4%
General Practitioners	177	100%	171	100%	3.3%
Specialists	416	235%	400	233%	4.0%
Physiotherapists	294	166%	279	163%	5.3%
Chiropractors	456	258%	418	244%	9.2%
X-ray/Laboratory	574	324%	534	312%	7.3%
Dentists	503	285%	453	265%	11.0%
Out-Patient Total	227	N/A	215	N/A	N/A

Note: (1) Relativity of General Practitioner = 100%.
(2) Figures may not be additive due to rounding.

GRAPH 2.3

Average Paid and Billed Amounts Per Case (HK\$) in 2010 and 2011

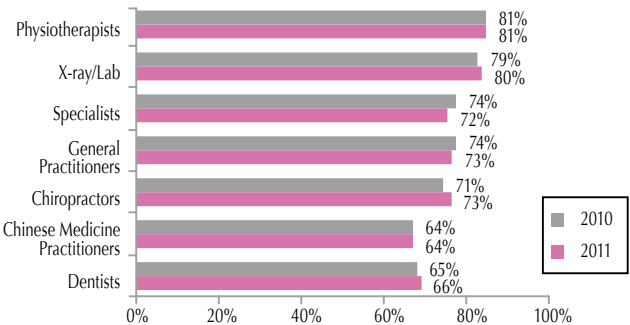


It can be seen that the average billed amount of Dentists' Fees is the highest, and of the General Practitioners' Fees the lowest among all out-patient cases. The average paid amount of X-ray/Laboratory Fees is the highest, and of General Practitioners the lowest.

The reimbursement ratio of general practitioners in 2011 is similar to 2010 at approximately 73%. The physiotherapists receive the highest reimbursement ratio of 81%, while the Chinese Medicine Practitioners receive the lowest reimbursement ratio of 64% in 2011 (Graph 2.4).

GRAPH 2.4

Reimbursement Ratios in 2010 and 2011



2.2.3 Seventy Percentile Level of Billed Medical Fees

The seventieth percentile of billed medical fees represents the amount, which is expected to be sufficient to cover the actual billed cost of medical treatment for 70% of all out-patient claims. The seventieth percentile level of medical fees for each of the seven categories is summarized in Table 2.8.

Category of Medical Fees	2011	2010
Chinese Medicine Practitioners' Fees	300	300
General Practitioners' Fees	230	220
Specialists' Fees	600	565
Physiotherapists' Fees	380	360
Chiropractors' Fees	600	600
X-ray/Laboratory Expenses	680	640
Dentists' Fees	600	550

2.2.4 Utilization Rates of Out-patient Medical Services

The utilization rates of out-patient medical services by service category in 2011 and 2010 are summarized in Table 2.9. It can be seen that the rates of all categories of out-patient service, except General Practitioners and X-ray/Laboratory, are higher in 2011 than 2010.

	2011	2010
Chinese Medicine Practitioners	112.7%	108.9%
General Practitioners	475.9%	493.0%
Specialists	48.0%	46.9%
Physiotherapists	20.5%	20.2%
Chiropractors	2.2%	2.1%
X-ray/Laboratory Expenses	28.0%	28.6%
Dental	55.9%	53.6%

Note: (1) Utilization for 2011 = No. of treatment in 2011 / No. of insured earned in 2011.
(2) The Utilization Rates in 2010 are different from the last survey due to changes in participating member companies.

2.2.5 Forecasting of Out-patient Medical Services in between July 2013 to June 2014 (2013/14)

Based upon the data of 2010 and 2011, it is expected that both the utilization rate and the average claim size of out-patient medical services will continue to increase. The forecasted results for the year 2013/14 are summarized in Table 2.10.

Out-patient Coverage	Forecasted Utilization Rate (%)	Forecasted Average Claim Size (HK\$)
Chinese Medicine Practitioners	114.8%	354
General Practitioners	493.5%	258
Specialists	49.1%	635
Physiotherapists	21.0%	420
Chiropractors	2.2%	781
X-ray/Laboratory Expenses	28.3%	775
Dental	57.5%	781

Note: Figures may not be additive due to rounding.

APPENDIX 附表

Results by Operation 各類手術費

Region of Body / Detailed Anatomy / Type of Procedure 人體系統/詳細部位/手術名稱	Number of Cases 個案數目	Average No. of Days in Hospital 平均住院日數	Median (HK\$) 中位數 (港元)		
			Private 頭等房	Semi-private 二等房	Ward 三等房
CARDIOVASCULAR SYSTEM 心血管系統					
Bypass Graft 搭橋手術					
Ligation and Other Procedures 結紮及其他程序	96	2.4	65,750	19,375	15,000
DIGESTIVE SYSTEM 消化系統					
Abdomen, Peritoneum, and Omentum 腹、腹膜及網膜					
Introduction, Revision, and/or Removal 導藥法、二度置換及/或割除	121	2.2	35,000	17,600	14,000
Anus 肛門					
Excision 切除	1,090	2.8	24,000	15,000	12,000
Suture 縫線	358	1.8	23,100	15,000	7,690
Appendix 盲腸					
Excision 切除	227	4.0	34,000	19,348	18,000
Biliary Tract 膽道疾病					
Endoscopy 內窺鏡檢法	183	3.3	58,000	35,000	20,550
Excision 切除	173	4.2	64,000	36,625	25,000
Esophagus 食道					
Endoscopy 內窺鏡檢法	5,122	1.9	10,623	7,500	5,500
Intestines (Except Rectum) 腸 (直腸除外)					
Endoscopy, Small Bowel and Stomal 內窺鏡檢法、小腸及胃	86	1.6	12,000	8,000	6,000
Excision 切除	113	10.1	53,500	60,000	50,000
Pharynx, Adenoids, and Tonsils 咽部、腺樣增殖 (體) 及扁桃腺					
Excision, Destruction 切除、破除	182	2.3	27,000	24,000	12,000
Rectum 直腸					
Endoscopy 內窺鏡檢法	6,926	1.7	14,000	9,000	6,300
Repair 修復					
Hernioplasty, Herniorrhaphy, Herniotomy 疝修復術、疝縫合術、疝切開術	221	2.2	42,000	23,800	14,000
ENDOCRINE SYSTEM 分泌系統					
Thyroid Gland 甲狀腺					
Excision 切除	455	3.5	54,000	36,000	25,000
EYE AND OCULAR ADNEXA 眼球及眼副體					
Lens 晶體					
Removal Cataract 割除白內障	393	1.5	37,500	19,955	16,500
Retina or Choroid 視網膜或脈絡膜					
Repair 修復	182	1.8	65,000	13,750	11,000
AUDITORY SYSTEM 聽覺系統					
Inner Ear 內耳					
Temporal Bone, Middle Fossa Approach 顛骨、顛中窩入路手術	714	2.5	33,000	26,000	26,750
Middle Ear 中耳					
Repair 修復	80	1.9	17,100	34,000	15,650

Region of Body / Detailed Anatomy / Type of Procedure 人體系統/詳細部位/手術名稱	Number of Cases 個案數目	Average No. of Days in Hospital 平均住院日數	Median (HK\$) 中位數 (港元)		
			Private 頭等房	Semi-private 二等房	Ward 三等房
FEMALE GENITAL SYSTEM 女性生殖系統					
Cervix Uteri 子宮頸					
Excision 切除	88	1.6	17,800	10,688	6,580
Corpus Uteri 子宮體					
Excision 切除	1,024	3.9	42,000	33,020	20,000
Repair 修復	528	2.0	56,138	19,048	9,800
Ovary 卵巢					
Excision 切除	224	3.7	36,000	23,000	23,875
Oviduct 輸卵管					
Incision 切割	282	3.1	40,790	30,325	20,600
Vagina 陰道					
Endoscopy 內窺鏡檢法	312	1.5	20,000	8,925	7,000
INTEGUMENTARY SYSTEM 皮膚系統					
Breast 乳房					
Excision 切除	978	3.0	30,000	27,500	15,000
Repair (Closure) 修復 (縫合)					
Repair - Simple 修復 - 簡單	139	1.7	9,536	12,000	8,000
Skin, Subcutaneous and Accessory Structures 皮膚、皮下組織及皮膚副體					
Excision - Benign Lesions 切除 - 良性病變	968	1.7	12,000	7,778	5,700
Incision and Drainage 切割及排水	151	2.9	11,750	6,000	6,000
MALE GENITAL SYSTEM 男性生殖系統					
Penis 陰莖					
Excision 切除	372	1.7	20,500	8,825	7,000
Prostate 前列腺					
Excision 切除	89	4.1	N/A	10,000	8,000
MEDIASTINUM AND DIAPHRAGM 縱膈及橫膈					
Diaphragm 橫膈					
Repair 修復	338	2.3	21,000	10,000	7,600
MUSCULOSKELETAL SYSTEM 肌肉骨骼系統					
Femur (Thigh Region) and Knee Joint 股骨 (股) 及膝關節					
Excision 切除	78	2.3	42,867	31,680	19,100
Repair, Revision, and/or Reconstruction 修復、二度置換及/或重建	81	4.2	50,000	40,000	32,000
Foot and Toes 足及腳趾					
Repair, Revision, and/or Reconstruction 修復、二度置換及/或重建	76	3.3	50,000	30,050	38,000
Forearm and Wrist 前臂及手腕					
Excision 切除	327	1.9	9,000	9,000	6,500
General 全身					
Introduction or Removal 導藥法或割除	95	1.7	10,000	12,000	5,590
Lower Extremity 下肢					
Endoscopy/Arthroscopy 內窺鏡/關節鏡檢查	628	2.8	57,000	34,090	23,925
Others 其他					
Laparoscopy/Hysteroscopy 腹腔鏡檢查/子宮鏡檢查	824	2.7	30,000	24,860	14,700

Region of Body / Detailed Anatomy / Type of Procedure 人體系統/詳細部位/手術名稱	Number of Cases 個案數目	Average No. of Days in Hospital 平均住院日數	Median (HK\$) 中位數 (港元)		
			Private 頭等房	Semi-private 二等房	Ward 三等房
NERVOUS SYSTEM 神經系統					
Spine and Spinal Cord 脊椎及脊髓					
Posterior Extradural Laminotomy or Laminectomy for Exploration/Decompression of Neural Elements or Excision of Herniated Intervertebral Disks 後硬膜外椎板切開或椎板切除術探索/神經系元素壓迫症或椎間盤凸出切除	95	4.8	80,298	45,000	35,000
RESPIRATORY SYSTEM 呼吸系統					
Larynx 喉					
Endoscopy 內窺鏡檢法	305	2.1	24,000	10,600	7,500
Nose 鼻					
Endoscopy 內窺鏡檢法	319	2.1	21,600	15,750	5,930
Excision 切除	89	2.4	52,500	14,180	14,300
Repair 修復	177	2.9	25,200	27,000	18,050
Trachea and Bronchi 氣管及支氣管					
Endoscopy 內窺鏡檢法	194	2.7	10,000	7,000	6,000
URINARY SYSTEM 泌尿系統					
Kidney 腎臟					
Endoscopy 內窺鏡檢法	426	1.9	35,000	15,226	10,325
Ureter 尿管					
Endoscopy – Cystoscopy, Urethroscopy, Cystourethroscopy 內窺鏡檢法 - 膀胱鏡檢法、尿道鏡檢法、膀胱尿道鏡檢法	158	2.2	25,000	9,000	6,000
Repair 修復	284	1.6	14,310	7,800	5,300
Ureter and Pelvis 尿管及股盆					
Introduction 導藥法	118	2.9	30,000	16,000	15,032
Urethra and Bladder 尿道及膀胱					
Transurethral Surgery 經由尿道進行之手術	147	2.4	12,750	12,000	12,000
Vesical Neck and Prostate 膀胱頸及前列腺					
Urodynamics 尿流動力學檢查	101	4.9	80,000	21,375	20,000

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