LCQ21: Electronic Health Record Sharing System

Following is a question by Reverend Canon the Hon Peter Douglas Koon and a written reply by the Secretary for Health, Professor Lo Chung-mau, in the Legislative Council today (March 26):

Question:

Regarding the Electronic Health Record Sharing System (eHealth), will the Government inform this Council:

- (1) of the number of healthcare providers registered with eHealth so far, together with a breakdown by type of institutions (i.e. public hospitals, public clinics, private hospitals, and private healthcare institutions (including clinics, residential care homes for the elderly and social welfare organisations providing healthcare services));
- (2) of the number of healthcare personnel registered with eHealth so far, together with a breakdown by profession (i.e. doctors, dentists, Chinese medicine practitioners and other healthcare personnel);
- (3) given that in the reply to my question on the Estimates of Expenditure 2024-2025, the Secretary for Health has indicated that as the health data contribution to eHealth by private healthcare institutions has remained extremely low, the Government has rolled out the eHealth Adoption Sponsorship Pilot Scheme to facilitate seamless data upload from the clinical management systems of private doctors to eHealth, and will progressively require all private healthcare institutions participating in all government-funded or subsidised health programmes to upload health records of the relevant service users onto eHealth, whether the Government has assessed the effectiveness of the aforesaid measures;
- (4) as the Government indicated last year that it would consider amending the Electronic Health Record Sharing System Ordinance (Cap. 625) to require healthcare providers to deposit specified essential health data in the personalised eHealth accounts of members of the public and to streamline the consent process of eHealth, of the progress of the relevant legislative amendment exercise;
- (5) as it is learnt that quite a number of members of the public, especially the elderly, choose to seek medical treatment on the Mainland at present, whether the Government will make more extensive use of electronic health records across the boundary, such as by enhancing the eHealth system to allow members of the public to upload their non-local health record information onto the eHealth for local healthcare professionals' reference, thereby achieving the data connectivity between two places; if so, of the details; if not, the reasons for that?

Reply:

President,

eHealth is a city-wide electronic health record sharing system launched by the Government in 2016 that enables citizens to authorise healthcare providers (HCPs) in the public and private sectors to view and share their electronic health records (eHRs) for healthcare purposes. Building on the strengths of the infrastructure of eHealth, the Chief Executive announced in the 2023 Policy Address the initiative to roll out a five-year development plan of eHealth+ to transform eHealth into a comprehensive healthcare information infrastructure that integrates multiple functions of data sharing, service delivery and care journey management. eHealth+ aims to facilitate care co-ordination, cross-sector collaboration, as well as health management and surveillance, thereby better serving our citizens in obtaining optimal healthcare services, and supporting the healthcare reform and various healthcare policies more effectively, such as primary healthcare and crossboundary healthcare services. The Government is taking forward the eHealth+ plan in phases in accordance with the patient-centric principle and four strategic directions, namely, One Health Record, One Care Journey, One Digital Front Door to Empowering Tool and One Health Data Repository.

In consultation with the Hospital Authority (HA), the reply to the question raised by Reverend Canon the Hon Peter Douglas Koon is as follows:

(1) and (2) As of end-February 2025, eHealth has covered over 80 per cent of Hong Kong's population and the majority of public and private HCPs. The number of HCPs registered with eHealth by the type of organisation is tabulated as follows:

Type of HCP	Number of HCPs Registered with eHealth (on an Organisational Basis)	Number of Healthcare Service Locations Registered with eHealth
Public hospitals (i.e. hospitals under the HA)	1	43
Public clinics (e.g. clinics under the HA and the Department of Health)	11	390
Other public HCPs (e.g. District Health Centres)	20	217
Private hospitals	13	43

Other private HCPs (e.g. clinics, residential care homes for the elderly, and social welfare organisations providing healthcare services)	3 681	6 018
Total	3 726	6 711

Besides, as of end-February 2025, about 58 800 healthcare professionals (HCProfs) have registered with eHealth. The number of registered HCProfs by profession is tabulated as follows:

Type of HCProf	Number of HCProfs Registered with eHealth	Percentage of Registered HCProfs
Doctor	13 190	82%
Dentist	1 731	60%
Chinese medicine practitioner	966	9%
Other HCProfs (include nurse, pharmacist, and radiographer)	42 940	48%
Total	58 827	49%

(3) and (4) Under the strategic development direction of One Health Record, the Government seeks to consolidate the longitudinal eHRs of citizens that are spread across a multitude of healthcare processes into their personal eHealth accounts. A comprehensive eHR profile enables the HCPs authorised by citizens to respond to their health needs more effectively, thus enhancing clinical outcomes and saving costs of the care process. Nevertheless, while private HCPs have been actively using eHealth in supporting clinical processes as evidenced by the fact that nearly 60 per cent of eHR access by HCPs as of end-February 2025 were by private HCPs, more than 99 per cent of some 4.5 billion eHRs shared on eHealth are from public HCPs.

The Government has been taking a multi-pronged approach to encourage and facilitate the deposit of citizens' eHRs into eHealth by private HCPs, thereby assisting citizens in accessing, managing and using their own eHRs during the healthcare process more conveniently. Last year, the Government launched a platform enabling self-service data compliance testing to simplify the technical testing procedures, and provided dedicated technical support to healthcare institutions. The Government also rolled out the eHealth Adoption Sponsorship Pilot Scheme (the Pilot Scheme) by partnering with electronic medical record (eMR) solutions vendors and medical groups to co-fund system enhancements in achieving seamless eHR sharing between eHealth and eMR systems in the market. With the Government's endeavours, the eHRs deposited

by private HCPs into eHealth in a year increased from 2.19 million in 2023 to 3.67 million in 2024. From July 2023 to February 2025, about 80 private HCPs (involving around 480 private doctors and 200 service locations) connected to eHealth and deposited more than 1.12 million eHRs through the Pilot Scheme.

In future, the Government will continue to collaborate with the private healthcare sector to enhance the connectivity between eHealth and their eMR solutions. In particular, given the positive impacts of the Pilot Scheme, the Government has progressively expanded the Scheme to include more eMR solution vendors, medical groups and other sectors, including Chinese medicine. The Government will also launch the eHealth+ accreditation scheme in 2025 to enable citizens to easily identify if an HCP has the capability to deposit health records into their personal eHealth accounts and the extent of data involved, with a view to facilitating citizens in choosing suitable HCPs after making reference to such information, thereby ensuring that their medical records will be deposited in their personal eHealth accounts.

Besides, the Government introduced the Electronic Health Record Sharing System (Amendment) Bill 2025 (the Amendment Bill) into the Legislative Council to provide a legal framework to assist citizens in building a more comprehensive eHR. Among other things, the Amendment Bill will streamline the consent mechanism such that once citizens agree to join eHealth, their HCPs will be able to deposit health data into their personal eHealth accounts. Meanwhile, citizens will continue to retain full control over their personal data and can grant individual HCPs access to their eHealth records at their own will. The Amendment Bill will also empower the Secretary for Health to require specified HCPs to deposit specified important health data into the personal eHealth accounts of citizens registered with eHealth with their consents, in order to assist citizens in accessing and controlling of their key health information.

The Government will continue to provide support and collaborate with the private healthcare sector to enable the majority of private HCPs to seamlessly connect with eHealth and will also consider providing additional assistance to healthcare institutions and HCProfs that are less prepared for digitalisation.

(5) With the ever-tighter economic and social integration between Hong Kong and the Mainland, Hong Kong citizens making use of healthcare services in the Mainland, especially in the Guangdong-Hong Kong-Macao Greater Bay Area (GBA), is becoming more common. To support citizens' cross-boundary healthcare needs, the Government has been working to enable citizens to self-carry their eHRs for cross-boundary uses via eHealth to enhance the continuity of care across the boundary. Among other things, the Government in 2024 introduced the "Cross-boundary Health Record" (CBHR) and "Personal Folder" functions in the eHealth mobile application (eHealth App) at the University of Hong Kong-Shenzhen Hospital (HKU-SZH) and seven medical institutions under the Elderly Health Care Voucher (EHCV) Greater Bay Area Pilot Scheme. The CBHR function enables eligible Hong Kong elderly persons using EHCV at specified healthcare institutions to apply for a copy of their eHRs in eHealth over the past three years through the eHealth App in advance. HCProfs of the specified healthcare institutions can then access and browse the relevant eHRs by scanning the QR

codes presented by the elderly person at the time of consultation to assist in diagnoses and treatment. The "Personal Folder" function enables citizens to deposit eHRs obtained during consultations within and outside Hong Kong to their personal eHealth accounts on their own to facilitate storage and use of eHRs, including access by Hong Kong HCPs authorised by users through the eHealth system during follow-up care.

The feedback on relevant cross-boundary functions has been positive. The Government will continue to streamline the workflow and improve the user experience, and extend the relevant cross-boundary functions to more medical institutions under cross-boundary healthcare collaboration programmes in a progressive manner, as well as enhance the role of eHealth as the core system for cross-boundary health data sharing. The Government noted that citizens carrying their own eHRs for cross-boundary use each time is not the most convenient, secure, and effective way for both citizens and HCPs. For example, given the more stringent technical requirements, it is difficult for citizens to self-upload high-resolution radiology images to their eHealth accounts. In accordance with the current legislation, HCPs outside Hong Kong are unable to register with eHealth. To support citizens' needs more effectively, the Government proposed in the Amendment Bill to empower the Commissioner for the Electronic Health Record to recognise individual HCPs and public health record systems outside Hong Kong, subject to sufficient protection of data privacy and system security as well as due compliance with specified requirements and conditions. This will enable citizens to use their eHRs across the boundary in a more convenient and secure manner. If an individual citizen uses services at a recognised HCP outside Hong Kong, he/she can choose to authorise the HCP to securely access his/her eHealth records and deposit the health records of the services received into his/her personal eHealth account, with a view to enhancing the quality and safety of cross-boundary healthcare services. HCPs outside Hong Kong can only access and deposit citizens' eHealth records when a registered citizen provides explicit consent when using its services. Under no other circumstances will eHealth records be transmitted across the boundary.