

### Residential Care Home Vaccination Programme (RVP) 2019/20

# Procedures of Records Checking and Claims Submission – eHealth System (Subsidies) [eHS(S)] Enhancements

October 2019



### **Enhancement in eHS(S) system**

- VMOs can submit the names of consented individuals and claims by batch using an Excel table format. VO will upload to eHS(S).
- eHS(S) can generate reports with the latest valid vaccination records of SIV, 23vPPV, PCV13 & MMR, and create new temporary eHealth Account (Subsidies).
- VMOs can directly check and rectify the identity information of recipients on the eHS(S).





### **Brief Workflow**

#### 1. Before Vaccination

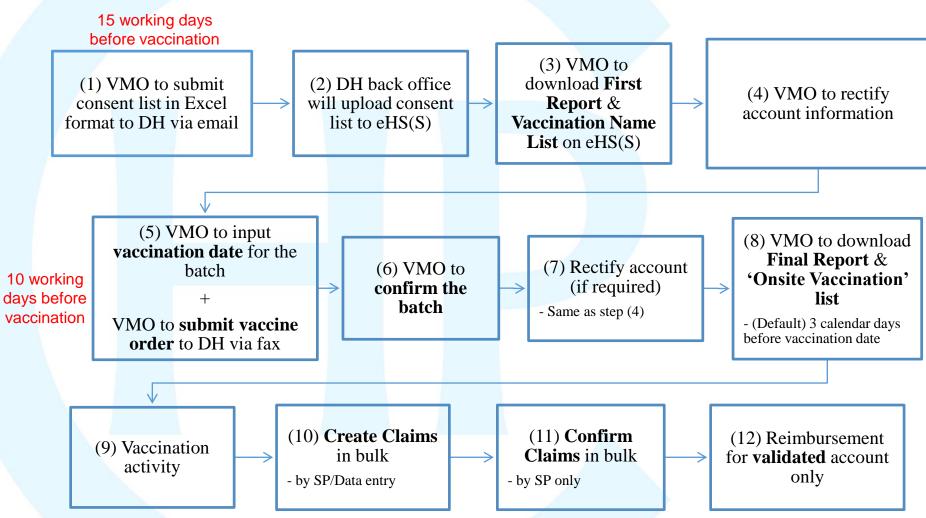
- Submit consent list
- ii. Download First Report to check vaccination records
- iii. Rectify invalid accounts for recipients
- iv. Confirm batches
- v. Check Final Report and other documents

#### 2. After Vaccination

i. Submit claims and receive injection fees





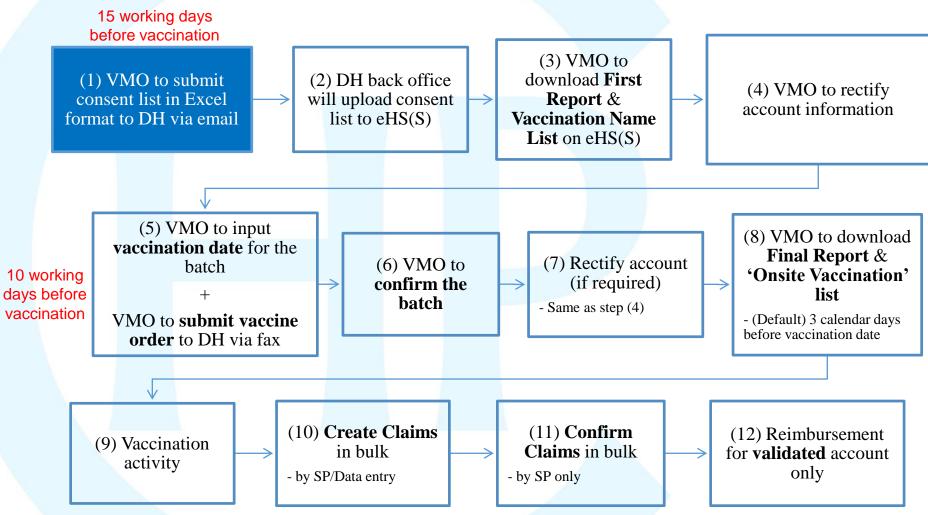




### **Before Vaccination**









#### Preparation of consent list by VMOs

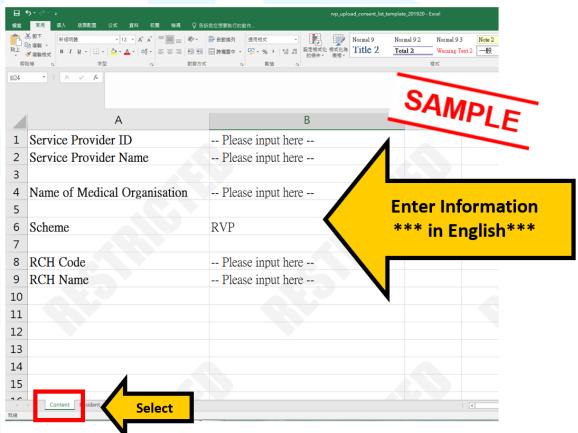
- To collect duly completed consent forms from RCHs/DIs for checking before vaccination
- To compile information of the consented clients in an excel table (encrypted with password)
  - specified excel file template can be downloaded at:

https://www.chp.gov.hk/en/features/23543.html





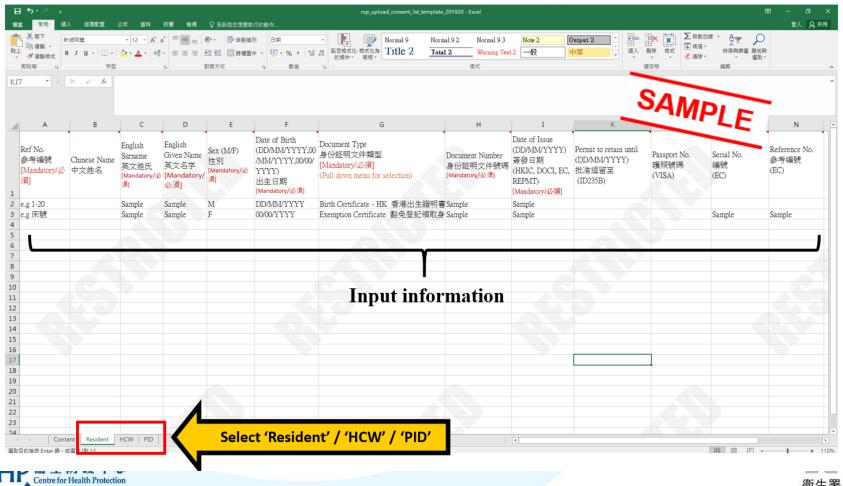
#### Consent list in excel format







#### Consent list in excel format

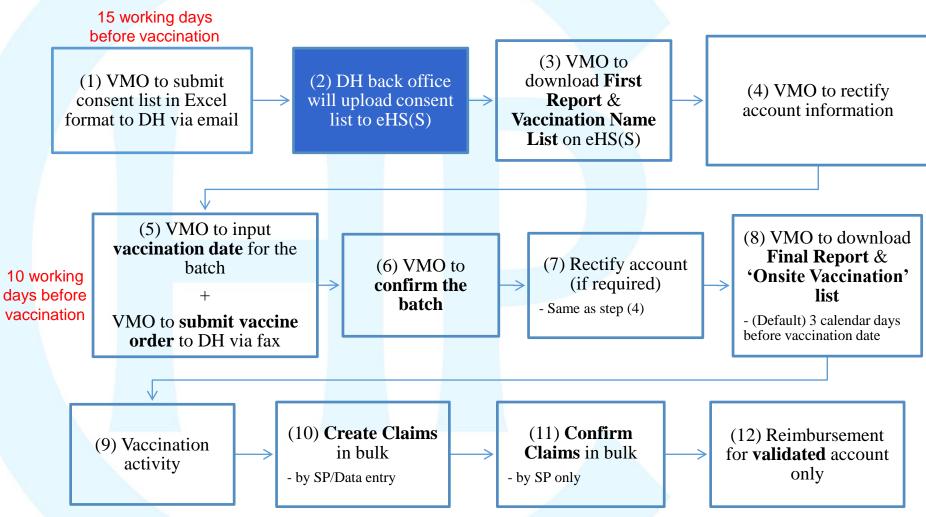


#### Consent list in excel format

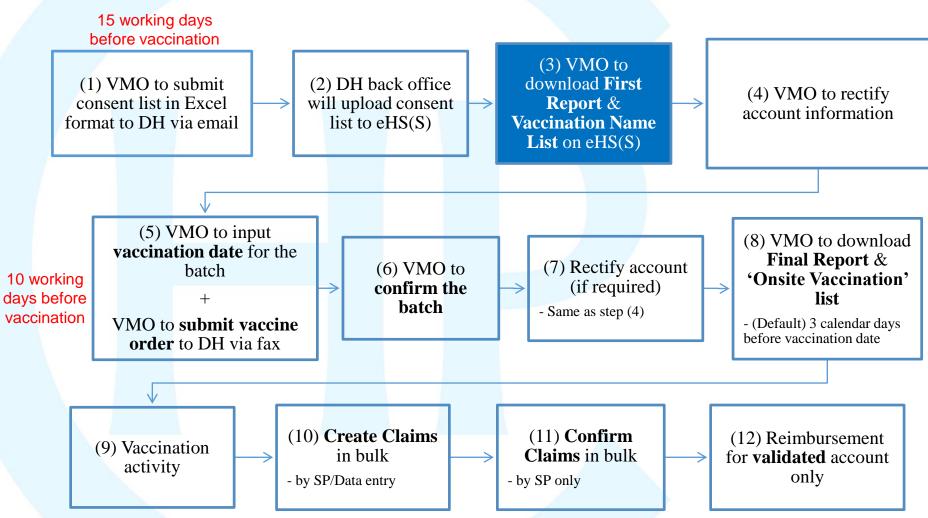
- Send the consent list to DH back office through a designated e-mail account at least 15 working days before vaccination
  - The file should be password protected
  - E-mail address: rvp@dh.gov.hk





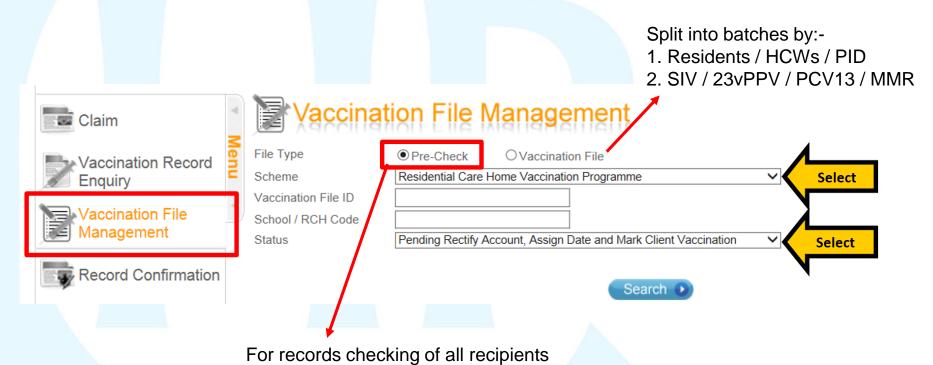








#### Vaccination records checking in eHS(S)

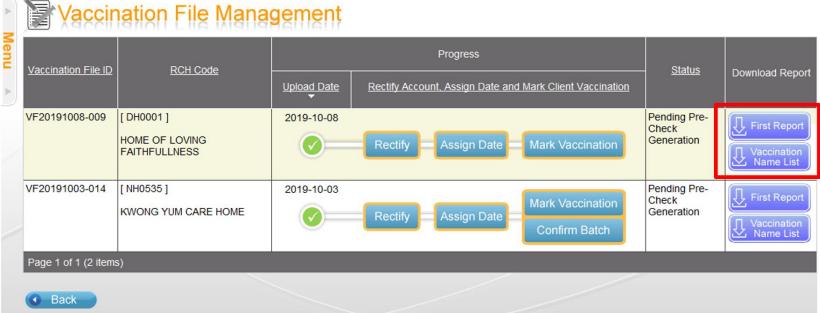






#### Vaccination records checking in eHS(S)

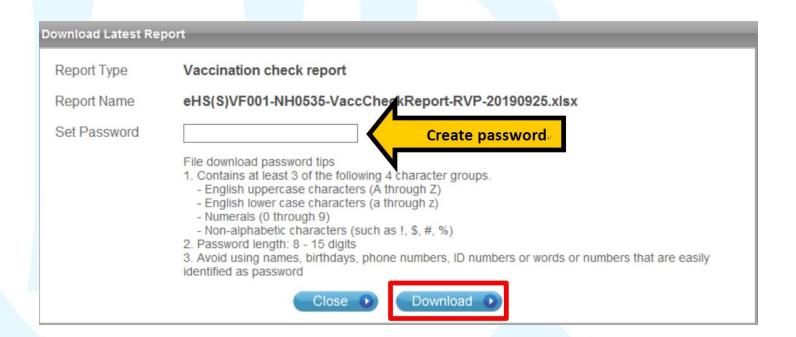
 eHS(S) will generate the first reports with the latest valid SIVs, 23vPPV, PCV13 & MMR vaccination records







#### Vaccination records checking in eHS(S)

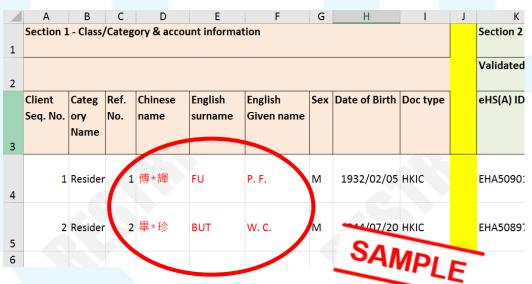






#### Vaccination records checking in eHS(S)

eHS(S) will generate First Report & Vaccination Name List



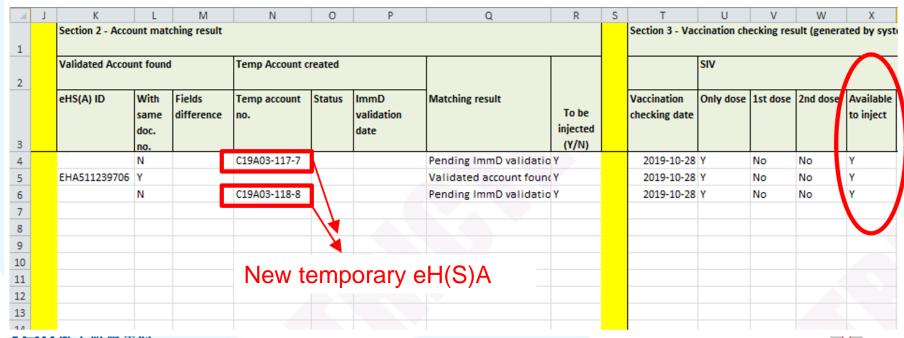


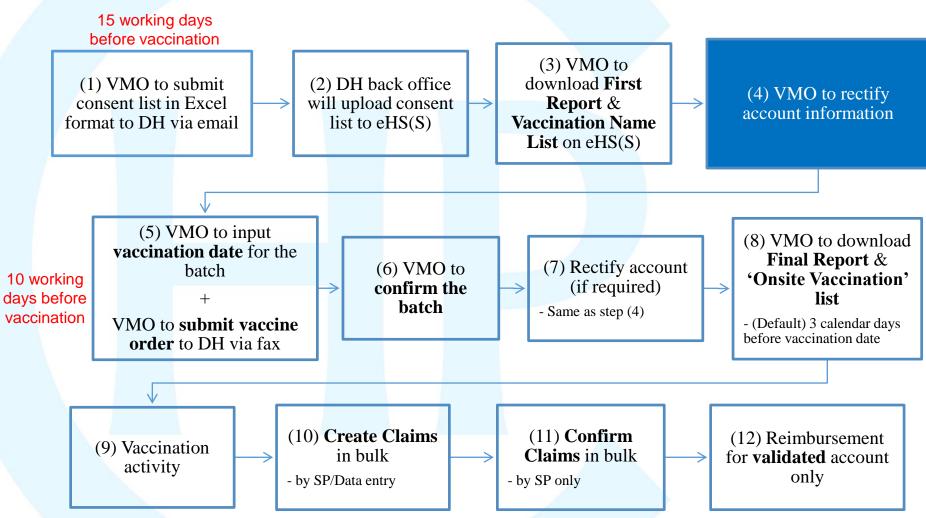




#### Vaccination records checking in eHS(S)

 eHS(S) will generate the First Report with the latest valid SIVs, 23vPPV, PCV13 & MMR vaccination records







#### Rectification of account information in eHS(S)

 Personal information which failed Immigration Department validation being shown in First Report:

| A | K                                   | L              | M        | N          | 0            | Р       | Q              |                          | S        | Т | U              | V         | W           | X           | Υ           |
|---|-------------------------------------|----------------|----------|------------|--------------|---------|----------------|--------------------------|----------|---|----------------|-----------|-------------|-------------|-------------|
|   | Section 2 - Account matching result |                |          |            |              |         |                | SAMD.                    |          |   | Section 3 - Va | ccination | checking re | esult (gene | erated by s |
| 1 |                                     |                |          |            |              |         |                | SAMPL                    | F        |   |                |           |             |             |             |
|   |                                     | Validated Acco | unt four | nd         | Temp Account | created |                |                          |          |   |                |           |             |             |             |
| 2 |                                     |                |          |            |              |         |                |                          |          |   |                |           |             |             |             |
|   |                                     | eHS(A) ID      | With     | Fields     | Temp account | Status  | ImmD           | Matching result          |          |   | Vaccination    | Only      | 1st dose    | 2nd dose    | Availabl    |
|   |                                     |                | same     | difference | no.          |         | validation     |                          | To be    |   | checking       | dose      |             |             | e to        |
|   |                                     |                | doc.     |            |              |         | date           |                          | injected |   | date           |           |             |             | inject      |
| 3 |                                     |                | no.      |            |              |         |                |                          | (Y/N)    |   |                |           |             |             |             |
| 4 |                                     | EHA511372048   | Y        |            |              |         |                | Validated account found  | Υ        |   | 2019/09/20     | No        | Y           | Υ           | Υ           |
| 5 |                                     | EHA511372051   | Y        |            |              |         |                | Validated account found  | Υ        |   | 2019/09/20     | No        | Y           | Y           | Υ           |
| 6 |                                     | EHA511372012   | Y        |            |              |         |                | Validated account found  | Υ        |   | 2019/09/20     | No        | Y           | Y           | Υ           |
| 7 |                                     | EHA511372036   | Y        |            |              |         |                | Validated account found  | Υ        |   | 2019/09/20     | No        | Y           | Y           | Υ           |
| 8 |                                     | EHA511372063   | Y        |            |              |         |                | Validated account found  | Υ        |   | 2019/09/20     | No        | Υ           | Y           | Υ           |
| 9 |                                     |                | N        |            | C19920-65-5  | Not for | ImmD Validatio | Incorrect format/Missing | Υ        |   | 2019/09/20     | No        | Y           | Y           | No          |





Rectification of account information on eHS(S)

Vaccination File Management

| Vaccination File ID         | RCH Code                                      |                         | Progress   | <u>Status</u>                       | Download Report                     |
|-----------------------------|---|-------------------------|--|-------------------------------------|-------------------------------------|
| <u>vaccination r lie ib</u> | <u>KOIT COUE</u>                              | <u>Upload Date</u><br>▼ | Rectify Account, Assign Date and Mark Client Vaccination | Status                              |                                     |
|                             | [ DH0001 ]<br>HOME OF LOVING<br>FAITHFULLNESS | 2019-10-08              | Rectify Assign Date Mark Vaccination                     | Pending Pre-<br>Check<br>Generation | First Report  Vaccination Name List |
| VF20191003-014              | [ NH0535 ]<br>KWONG YUM CARE HOME             | 2019-10-03              | Rectify Assign Date Mark Vaccination                     | Pending Pre-<br>Check<br>Generation | First Report  Vaccination Name List |

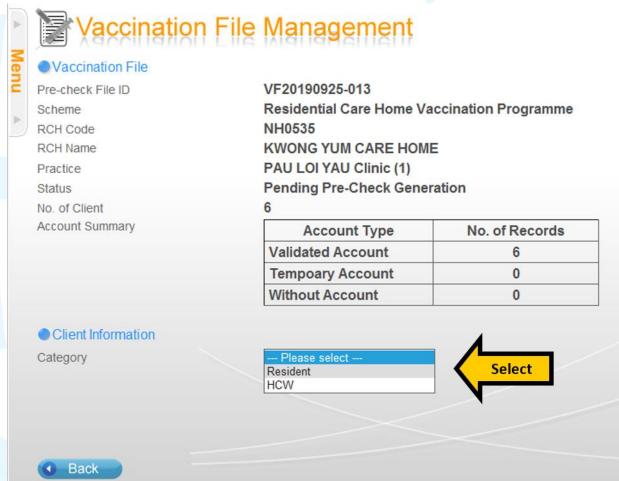
Page 1 of 1 (2 items)







Rectification of account information on eHS(S)







#### Rectification of account information on eHS(S)

#### Vaccination File Management

Vaccination File

Account Summary

RCH Code

Pre-check File ID VF20190923-012

Scheme Residential Care Home Vaccination Programme

DAC017

RCH Name MENTAL HEALTH ASSOCIATION OF HONG KONG TSUEN WAN DAY ACTIVITY CENTRE

Practice PAU LOI YAU Clinic (1)

Status Pending Pre-Check Generation

No. of Client

 Account Type
 No. of Records

 Validated Account
 5

 Tempoary Account
 1

 Without Account
 0

#### Client Information

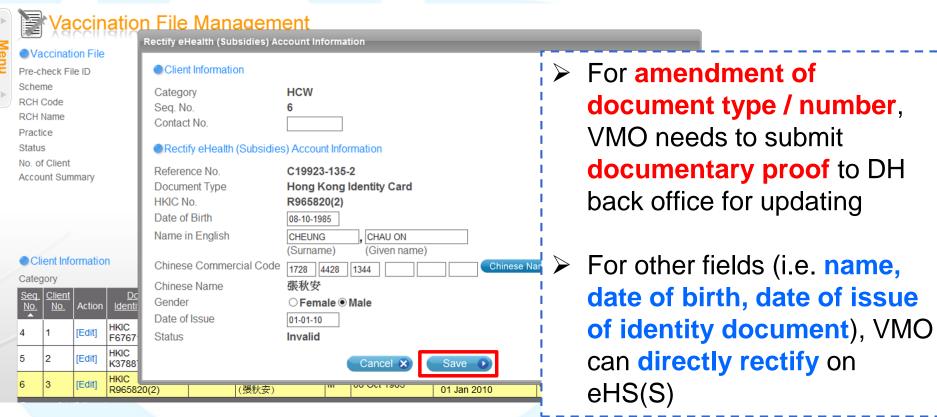
Category

| Calc | gury                |        |                                     | TICVV          |                          |            |             |                              |                               |               |                              |                                   |
|------|---------------------|--------|-------------------------------------|----------------|--------------------------|------------|-------------|------------------------------|-------------------------------|---------------|------------------------------|-----------------------------------|
| Seq. | Clien<br>No.        | Action | <u>Doc Type</u><br>Identity Doc No. | Contact<br>No. | <u>Name</u>              | <u>Sex</u> | <u>DOB</u>  | Other Fields                 | Account ID /<br>Reference No. | <u>Status</u> | Account<br>Validation Result | <u>Field</u><br><u>Difference</u> |
| 4    | 1                   | [Edit] | KIC<br>676711(3)                    |                | KUNG, FAI<br>(龔輝)        | F          | 05 Jun 1969 | Date of Issue:   01 Jan 2010 | EHA511372137                  | Active        |                              | No                                |
| 5    | 2                   |        | HKIC<br>K378871(7)                  |                | WONG, TAI MAN            | M          | 05 Dec 1983 | Date of Issue:   01 Jan 2010 | EHA511372149                  | Active        |                              | No                                |
| 6    | 3                   | [Edit] | HKIC<br>R965820(2)                  |                | CHEUNG, CHAU ON<br>(張秋安) | М          | 08 Oct 1985 | Date of Issue:   01 Jan 2010 | C19923-135-2                  | Invalid       |                              | No                                |
| Page | ge 1 of 1 (3 items) |        |                                     |                |                          |            |             |                              |                               |               |                              |                                   |





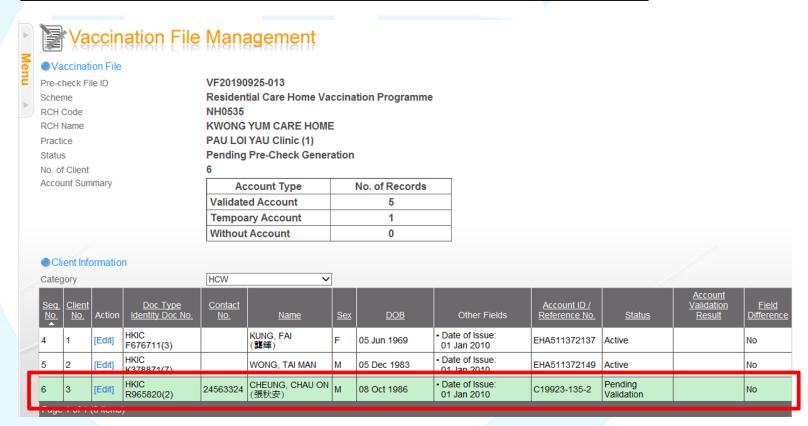
Rectification of account information on eHS(S)





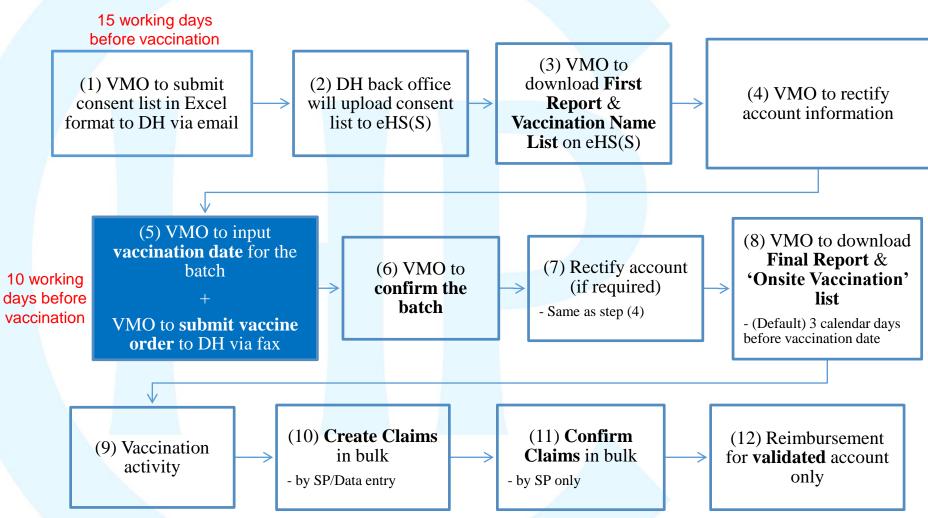


#### Rectification of account information on eHS(S)





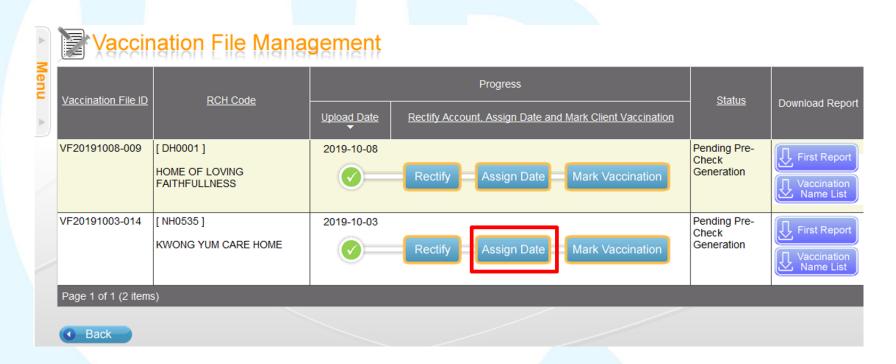






### **Before Vaccination – Submit Vaccination Date in eHS(S)**

#### **Submit Vaccination Date in eHS(S)**

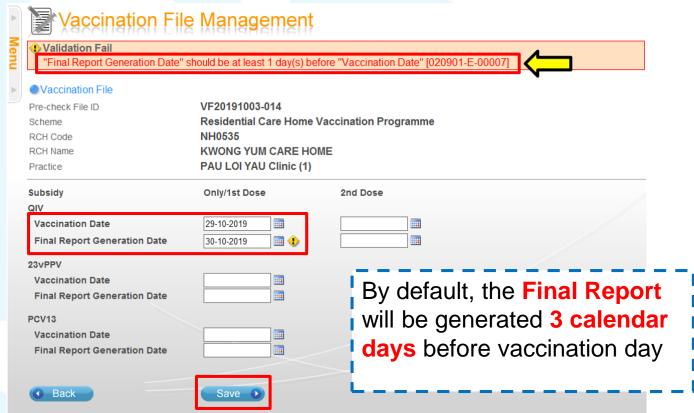






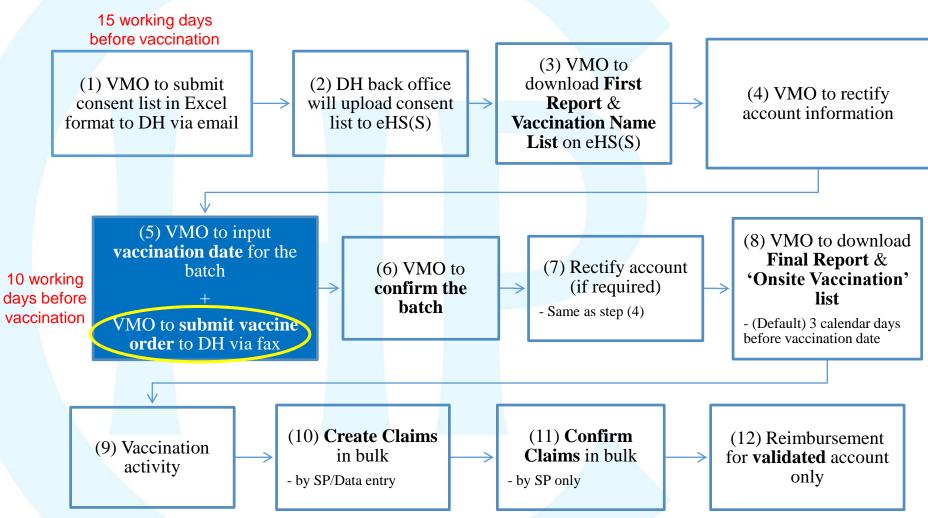
### **Before Vaccination – Submit Vaccination Date in eHS(S)**

#### Submit Vaccination Date in eHS(S)











### **Submit Vaccine Order to DH**

#### **Order Forms**

RCHE

|                          |   |                       |                | _   |
|--------------------------|---|-----------------------|----------------|-----|
| 訂單編號 送針日期                | (世) 衛生署   |                       | 附錄丁            | 7   |
|                          | 2019/20 年度院舍防   |                       |                | -   |
| 由本署職員填寫                  | 疫苗申請?<br>(安老院会  |                       | 訂針             |     |
| 工作天内仍未收到本署的訂單確           | a<br>請於接種日期前最少 <b>10 個工作天</b> 填妥本表格並便<br>認通知, <b>請致電 2125 2158 與本署職員聯絡。</b> |                       | 註冊醫生如於傳真本表格後三個 | _   |
|                          | 前,確認院友/職員是否符合資格免費接種季節<br>責人員接收疫苗;並預早確認院舍有合適的雪櫃!                             |                       | 0.5            |     |
| 甲部 院舍資料                  |   |                       | SA/            | MPL |
| 安老院舍名稱:                  |   |                       |                |     |
| 院舍編號:                    | 院友總人數:  | 職員總人數                 | t:             |     |
|                          |   |                       | -              | _   |
| 乙部 已同意接種疫苗的人數            | 院友  | 職員                    | 合共             | 7   |
| 已同意接種季節性流感疫苗的。           |   | 戦員                    | ロ共             | 4   |
|                          |   |                       |                | J   |
| 已同意接種肺炎球菌疫苗的人            | 数 院友  |                       |                | 7   |
|                          | · · · · · · · · · · · · · · · · · · ·                                       |                       |                |     |
|                          | · · · · · · · · · · · · · · · · · · ·                                       |                       |                |     |
|                          | 菌疫苗的院友,應 <b>先接種</b> 13 價肺炎球菌絲   | 吉合疫苗。                 |                | -   |
|                          | 合疫苗的院友,應於 <b>接種後一年</b> 接種 23  |                       |                |     |
|                          | ·醣疫苗的院友,應於 <b>接種後一年</b> 接種 13<br>i多醣疫苗及 13 價肺炎球菌結合疫苗,於                      |                       | li 按稱貼炎球菌疫苗。   |     |
|                          | 万品及出及 10 预护人小型和日及出一次  | MCCHMWCV 1 belletervy | 可文压萨大小图及日      | _   |
| 丙部 訂單及送貨資料<br>申請疫苗數目:    | 季節性流感疫苗   | 審訂                    | 金f             | ד   |
| 中胡及田数日・                  | 子似住机威汉田   | 13 價肺炎球菌結合疫苗          | 23 價肺炎球菌多醣疫苗   | -   |
| 疫苗資源寶貴,                  | 肺炎球菌疫苗  |                       | 2. 資帅又外函少路及日   | -   |
| 請珍惜,勿浪費。                 | **************************************                                      | 二                     | 需訂 針           | 4   |
|                          | * <b>庫存疫苗數目:</b><br>(即過往年度剩餘未過期的肺炎球菌疫苗                                      | 苗) 已有 針               | 已有 針           |     |
| 接種疫苗的日期:                 |   | 日(時間:上午/下午/全          | 日)             |     |
|                          | 請先與院舍/宿舍確定接種日期,本署會聯絡<br>疫苗派送時間為當日 <b>上午十時至下午一時</b> (上 <sup>4</sup>          |                       |                |     |
| 送貨地址:<br>(請用中文填寫及註明送針樓層) |   |                       |                |     |
| 負責接收疫苗的院舍職員姓名            | :   | 接收疫苗聯絡電話:             |                | .]  |





VMO 註冊編號: M

VMO 傳真號碼:

丁部 到診註冊醫生 (VMO)資料

VMO 姓名:

VMO 聯絡電話:

#### **Submit Vaccine Order to DH**

#### **Order Forms**

RCHD / RCCC

| 訂單編號    | 送針日期 |  |  |  |  |  |
|---------|------|--|--|--|--|--|
|         |      |  |  |  |  |  |
|         |      |  |  |  |  |  |
| 由本署職員填寫 |      |  |  |  |  |  |

### 全型 衛生署 第 2019/20 年度院舍防疫注射計劃 疫苗申請表格

訂針

附錄丁

(殘疾人士院舍及留宿幼兒中心)

(備註: 1. 由於訂聯疫苗及安排運送需時,請於接種日期前最少 10 個工作天/填妥本表格並傳真至本署 (傅真號碼: 2713 6916)。 到診註冊醫生如於傅真本表格後三個工作天內仍未收到本署的訂單確認通知,讀數量 2125 2553 與本署賴員聯絡。

到診註冊醫生有責任於申請疫苗前,確認院友/宿生/職員是否符合責格免費接種季節性流飯/肺炎球菌/麻疹、流行性腮腺炎及德國混合疫苗。
 到診註冊醫生需聯絡院舎/宿舍/中心安排負責人員接收疫苗;並預早確認院舍/宿舍/中心有合適的雪櫃貯存疫苗。

甲部 院舍/宿舍/留宿幼兒中心資料

負責接收疫苗的院舍職員姓名:

| 1           |        |          |           |             |
|-------------|--------|----------|-----------|-------------|
| 院舍/宿舍/中心名稱: | 1      |          | 院舍/宿舍/中心  | <b>〉編號:</b> |
| 院友/宿生人數:    | 9歲以下人數 | 9-64 歲人數 | 65 歲或以上人數 | 入住院友/宿生總人數  |
| 阮及/ 旧生八數・   |        |          |           |             |
| 職員總人數:      |        |          |           |             |
|             |        |          |           |             |

| 乙部 已同意接種疫苗的人           | 數               |           |         |                             |     |      |
|------------------------|-----------------|-----------|---------|-----------------------------|-----|------|
| 已同意接種                  |                 | 院友/       | ′宿生人數   |                             | 職員  | 合共   |
| 季節性流感疫苗                | 只需注             | 射一劑人數     | ñ       | 需要注射 <b>兩劑</b> 人數*          |     |      |
| 的人數:                   | _               |           |         |                             |     |      |
| 只適用於9歲以下及從未接受流感        | <b>E</b> 苗接種的小童 |           |         |                             |     |      |
| 已同意接種 <u>肺炎球菌疾</u>     | <u>苗</u> 的人數    | 1954 年或以前 | 前出生     | 1955 年出生<br>(須於 2020 年才可接種) | 同意接 | 種總人數 |
| 13 價肺炎球菌多醣             | 疫苗:             |           |         | //                          |     |      |
| 23 價肺炎球菌多醣             | 疫苗:             | -         |         |                             | •   | 10   |
| <b>前註: 1. 肺炎球菌疫苗只適</b> | 用於 65 歲或以上      | 的院友/宿生。   |         |                             |     | AMI  |
| 2. 如從未接種任何肺            | 炎球菌疫苗的院友        |           | 13 價肺炎球 | 菌結合疫苗。                      |     |      |

- 3. 已接種 13 價肺炎球菌結合疫苗的院友/宿生,應於**接種後一年**接種 23 價肺炎球菌多醣疫苗。
- 4. 已接種 23 價肺炎球菌多醣疫苗的院友/宿生,應於接種後一年接種 13 價肺炎球菌結合疫苗。
- 5. 如已接種23 價肺炎球菌多醣疫苗及13 價肺炎球菌結合疫苗,於院舍防疫注射計劃下,則無需再安排接種肺炎球菌疫苗

#### 已同意接種麻疹、流行性腮腺炎及德國麻疹混合疫苗(MMR 疫苗)的職員人數:

#### 丙部 訂單及送貨資料 季節性流感疫苗 申請疫苗數目: 針 需訂 MMR 疫苗 針 13 價肺炎球菌結合疫苗 23 價肺炎球菌多醣疫苗 疫苗資源寶貴, 肺炎球菌疫苗 請珍惜,勿浪費。 \*庫存疫苗數目: 即過往年度剩餘未過期的肺炎球菌疫苗 日 (時間:上午/下午/全日) 接種疫苗的日期: 請先與院舍/宿舍確定接種日期,本署會聯絡院舍/宿舍確認送針日期。 疫苗派送時間為當日**上午十時至下午一時**(上午)或**下午二時至五時**(下午)。 送貨地址: 請用中文填寫及註明送針樓層

| (HP | 衛生防護中心<br>Centre for Health Protection |
|-----|--|
|     |  |



接收疫苗聯絡電話:



### **Submit Vaccine Order to DH**

| 訂單編號 送針日期                                   | ₩ 衞生<br>為智障人士(非住院舍)提  | <b>供流感疫苗 2019/20</b>                 | P 4         |
|---|---|--------------------------------------|-------------|
| 由本署職員填寫                                     | 於院舍防疫注射計<br>疫苗申請  |                                      | 訂針          |
| 個工作天內仍未收到本署的訂單<br>2. 到診註冊醫生有責任於申請疫苗         | 請於接種日期前最少 10.個工作天 填妥本表格站<br>確認通知, <b>讀致電 2125 2553 與本事職員聯絡</b><br>前前,確認服務使用者是否符合資格免費接種季<br>機構安排負責人員接收疫苗;並預早確認學校 | <u>-</u><br>節性流感疫苗。                  |             |
| 部 學校/服務機構資料                                 |   |                                      | SAN         |
| 校/服務機構名稱:                                   |   | 學校/服務機構綱                             | <b>烏號</b> : |
| 務使用者人數:                                     | 9 歲或以上人數  |                                      | 總人數         |
| 習障人士)                                       | 9歲以下人數  |                                      |             |
| 部 已同意接種疫苗的人數                                |   |                                      |             |
|   | 服務使用者   | <b>首人數</b>                           | 同意接種總人數     |
| 已同意接種<br><u>季節性流感</u> 疫苗                    | 只需注射 <b>一劑</b> 人數   | 需要注射 <b>兩劑</b> 人數*                   |             |
| 的人數:  |   | -                                    | <del></del> |
| 適用於9歲以下及從未接受流感疫                             | 世祖<br>遊苗接種的小童   |                                      |             |
|   |   |                                      |             |
| 部訂單及送貨資料                                    |   |                                      |             |
| 請疫苗數目:                                      | 季節性流感疫苗   | 需訂                                   | 針           |
|   | 年 目   | _ 日 (時間:上午/下午/:                      | 全日)         |
| <b>鍾疫苗的日期:</b>                              | 請先與院舍/宿舍確定接種日期,本署   | -<br> <br>                           |             |
| 貨地址:  | 疫苗派送時間為當日 <b>上午十時至下午</b> 一  | <b>·時</b> (上午)或 <b>下午二時至五時</b> (下午)。 |             |
| コーナー・カー・カー・カー・カー・カー・カー・カー・カー・カー・カー・カー・カー・カー |   |                                      |             |
| 用中文填寫及註明送針樓層)                               |   | 接收疫苗聯絡電話:                            |             |



**Order Forms** 

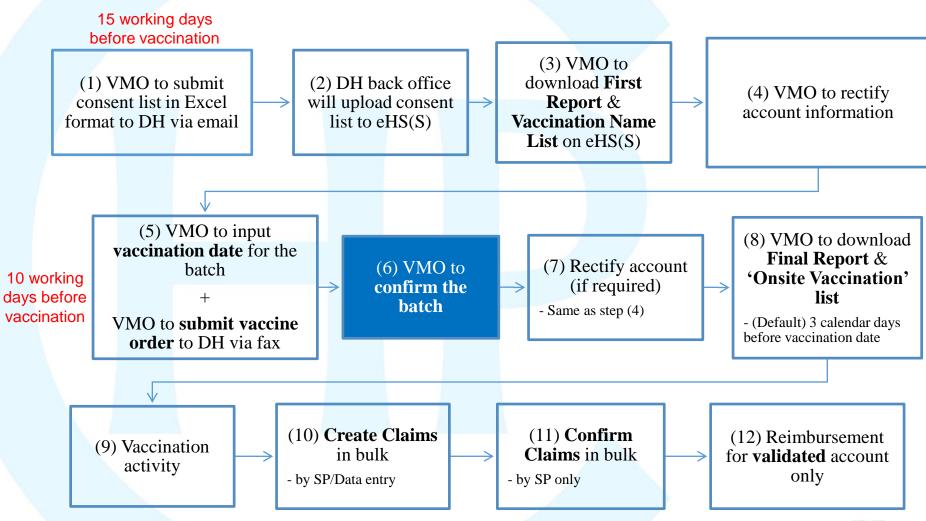
PID



VMO 傳真號碼:

VMO 簽署:

VMO 聯絡電話:





### Before Vaccination – Confirm Batch in eHS(S)

#### Confirm batch in eHS(S)

Vaccination File Management

| Vaccination File ID | DCH Codo                                      |                         | Progress   | · <u>Status</u>                     | Download Report                     |
|---------------------|---|-------------------------|--|-------------------------------------|-------------------------------------|
| Vaccination File ID | RCH Code –                                    | <u>Upload Date</u><br>▼ | Rectify Account, Assign Date and Mark Client Vaccination | Status                              |                                     |
|                     | [ DH0001 ]<br>HOME OF LOVING<br>FAITHFULLNESS | 2019-10-08              | Rectify Assign Date Mark Vaccination                     | Pending Pre-<br>Check<br>Generation | First Report  Vaccination Name List |
| VF20191003-014      | [ NH0535 ]<br>KWONG YUM CARE HOME             | 2019-10-03              | Rectify Assign Date Mark Vaccination                     | Pending Pre-<br>Check<br>Generation | First Report  Vaccination Name List |

Page 1 of 1 (2 items)

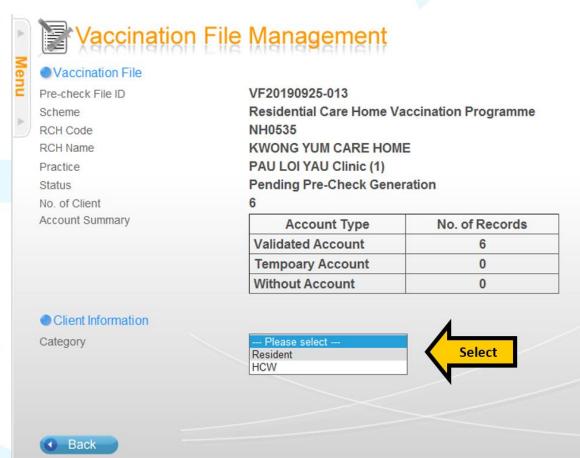






### **Before Vaccination – Confirm Batch in eHS(S)**

#### Confirm batch in eHS(S)

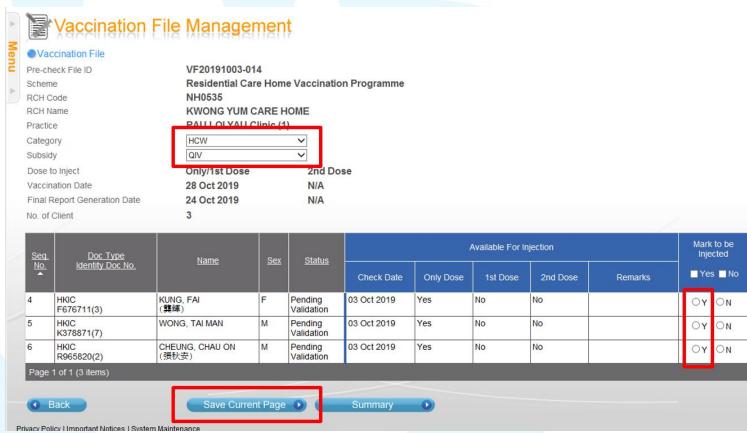






### Before Vaccination – Confirm Batch in eHS(S)

#### Confirm batch in eHS(S)





### Before Vaccination – Confirm Batch in eHS(S)

#### Confirm batch in eHS(S)

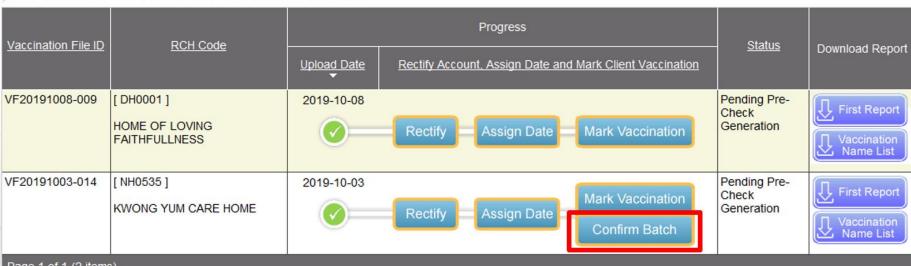




# Before Vaccination – Confirm Batch in eHS(S)

#### Confirm batch in eHS(S)





Page 1 of 1 (2 items)



Menu





# Before Vaccination – Confirm Batch in eHS(S)

### Confirm batch in eHS(S)



Vaccination File

Pre-check File ID VF20190925-013

Scheme Residential Care Home Vaccination Programme

RCH Code NH0535

RCH Name KWONG YUM CARE HOME
Practice PAU LOI YAU Clinic (1)

Status Pending Pre-Check Generation

No. of Client 6

No. of Client not inject 0

| Subsidy | Category   | Dose to Inject | Vaccination Report<br>Generation Date | Vaccination Date | No. of Client | Mark Inject -<br>Yes | Mark Inject - No | Match |
|---------|------------|----------------|---------------------------------------|------------------|---------------|----------------------|------------------|-------|
| QIV     | <u>HCW</u> | 1st Dose       | 28 Oct 2019                           | 29 Oct 2019      | 3             | 3                    | 0                | Yes   |
| QIV     | RESIDENT   | 1st Dose       | 28 Oct 2019                           | 29 Oct 2019      | 3             | 3                    | 0                | Yes   |



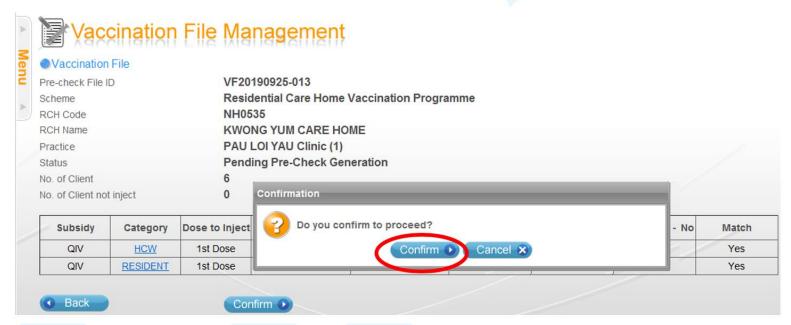






# Before Vaccination – Confirm Batch in eHS(S)

### Confirm batch in eHS(S)





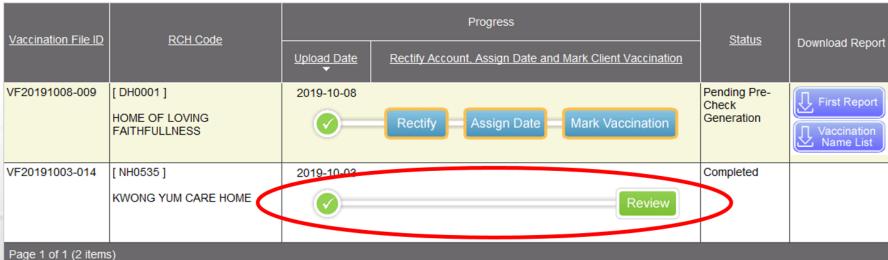




# **Before Vaccination – Confirm Batch in eHS(S)**

#### Confirm batch in eHS(S)





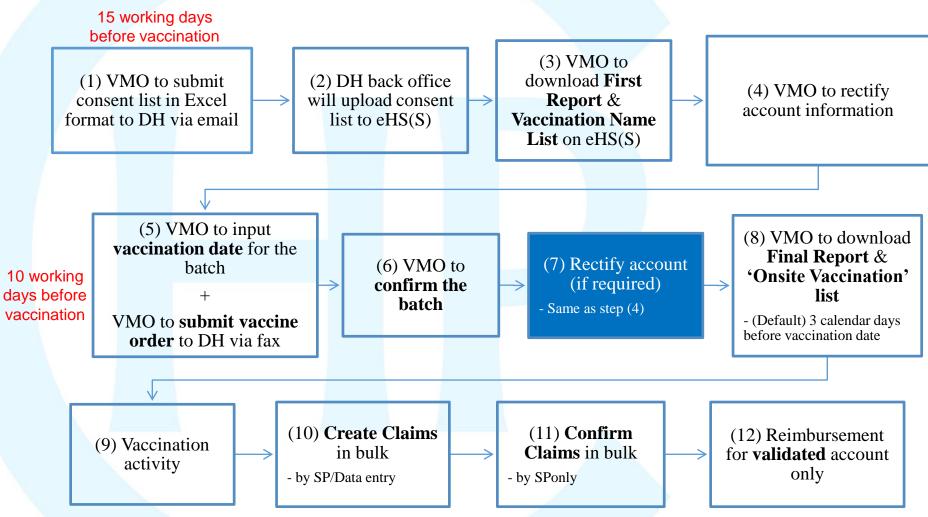


Menu

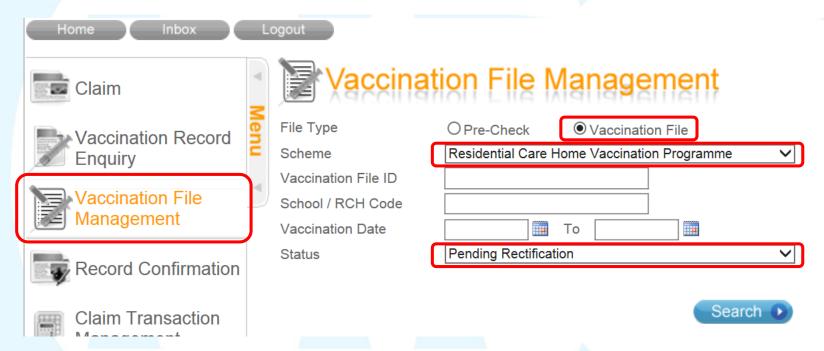




# Workflow

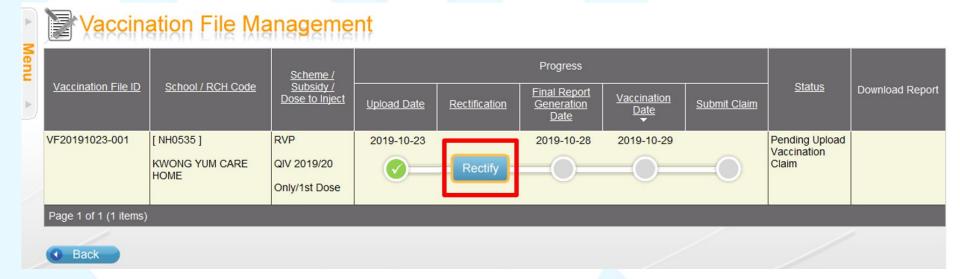






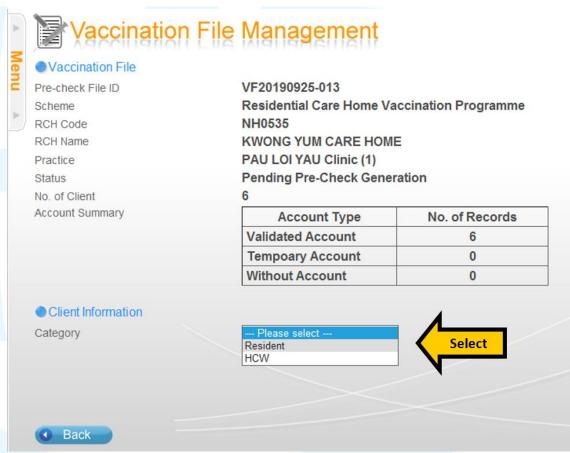
















## Rectification of account information on eHS(S)

#### Vaccination File Management

Vaccination File

Pre-check File ID VF20190923-012

Scheme Residential Care Home Vaccination Programme

RCH Code DAC017

RCH Name MENTAL HEALTH ASSOCIATION OF HONG KONG TSUEN WAN DAY ACTIVITY CENTRE

Practice PAU LOI YAU Clinic (1)

Status Pending Pre-Check Generation

No. of Client

 Account Type
 No. of Records

 Validated Account
 5

 Tempoary Account
 1

 Without Account
 0

#### Client Information

Page 1 of 1 (3 items)

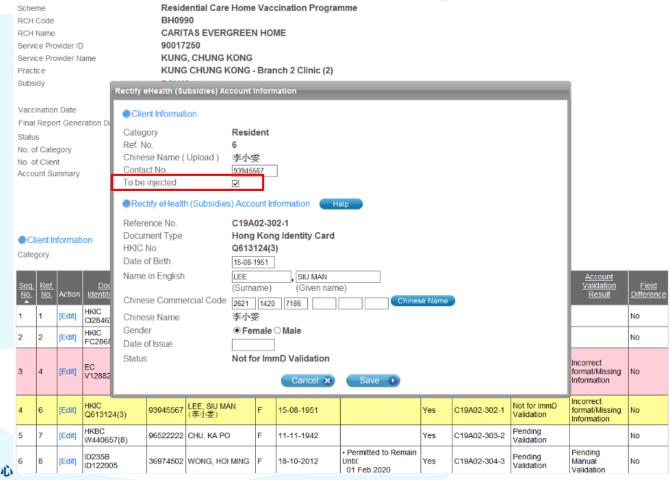
Category

Account Summary

| Oat       | gury       |        |                                     | TICVV          | <u> </u>                 |            |             |                                |                               |               |                              |                                   |
|-----------|------------|--------|-------------------------------------|----------------|--------------------------|------------|-------------|--------------------------------|-------------------------------|---------------|------------------------------|-----------------------------------|
| Sec<br>No | Clie<br>No |        | <u>Doc Type</u><br>Identity Doc No. | Contact<br>No. | <u>Name</u>              | <u>Sex</u> | <u>DOB</u>  | Other Fields                   | Account ID /<br>Reference No. | <u>Status</u> | Account<br>Validation Result | <u>Field</u><br><u>Difference</u> |
| 4         | 1          | [Edit] | IKIC<br>676711(3)                   |                | KUNG, FAI<br>(龔輝)        | F          | 05 Jun 1969 | Date of Issue:     01 Jan 2010 | EHA511372137                  | Active        |                              | No                                |
| 5         | 2          | [Edit] | HKIC<br>K378871(7)                  |                | WONG, TAI MAN            | M          | 05 Dec 1983 | Date of Issue:     01 Jan 2010 | EHA511372149                  | Active        |                              | No                                |
| 6         | 3          | [Edit] | HKIC<br>R965820(2)                  |                | CHEUNG, CHAU ON<br>(張秋安) | М          | 08 Oct 1985 | Date of Issue:     01 Jan 2010 | C19923-135-2                  | Invalid       |                              | No                                |

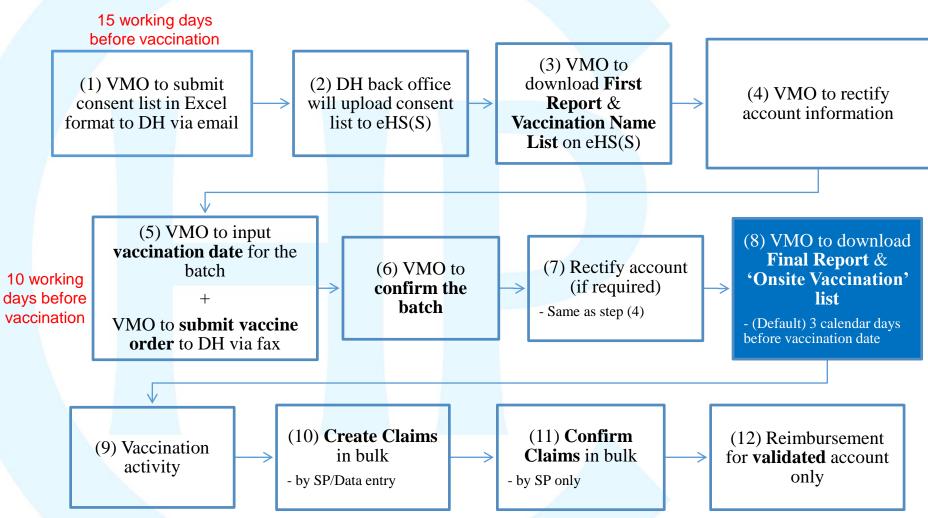






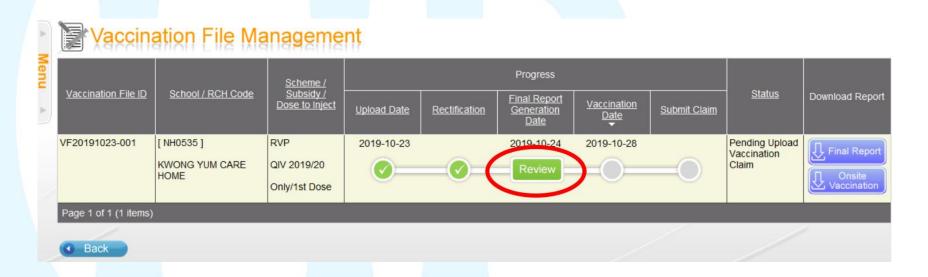


# Workflow





Download Final Report & 'Onsite Vaccination' List









Vaccination File

Vaccination File ID VF20190925-015

Scheme Residential Care Home Vaccination Programme

RCH Code NH0535

RCH Name KWONG YUM CARE HOME

Service Provider ID 90000130
Service Provider Name PAU, LOI YAU

Practice PAU LOI YAU Clinic (1)

Subsidy QIV 2019/20

Only/1st Dose 2nd Dose

Vaccination Date 29 Oct 2019 N/A
Vaccination Report Generation Date 28 Oct 2019 N/A
Status Pending Upload Vaccination Claim

No. of Category 2
No. of Client 6

No. of Client Account Summary

| Account Type      | No. of Records |
|-------------------|----------------|
| Validated Account | 6              |
| Tempoary Account  | 0              |
| Without Account   | 0              |

#### Client Information

| Categ       | jory                      |                              |                | Resident                  |            | ~           |                                |                             |                               |               |                                 |                                   |
|-------------|---------------------------|------------------------------|----------------|---------------------------|------------|-------------|--------------------------------|-----------------------------|-------------------------------|---------------|---------------------------------|-----------------------------------|
| Seq.<br>No. | <u>Ref.</u><br><u>No.</u> | Doc Type<br>Identity Doc No. | Contact<br>No. | <u>Name</u>               | <u>Sex</u> | <u>DOB</u>  | Other Fields                   | Confirm<br>not to<br>Inject | Account ID /<br>Reference No. | <u>Status</u> | Account<br>Validation<br>Result | <u>Field</u><br><u>Difference</u> |
| 1           |                           | HKIC<br>N556583(7)           | 91122233       | FU, SIU MING<br>(傅小明)     | M          | 05 Feb 1931 | Date of Issue:     01 Jan 2011 | No                          | EHA511372125                  | Active        |                                 | No                                |
| 2           |                           | HKIC<br>CP049029(6)          | 91123233       | CHEUNG, KIN YUEN<br>(張建源) | М          | 17 Jul 1942 | Date of Issue:     14 Feb 2007 | No                          | EHA511239706                  | Active        |                                 | No                                |
| 3           |                           | HKIC<br>V483625(1)           | 92262833       | WONG, HING CHIU<br>(黄興超)  | М          | 15 Dec 1945 | Date of Issue:     01 Jan 2012 | No                          | EHA511372202                  | Active        |                                 | No                                |

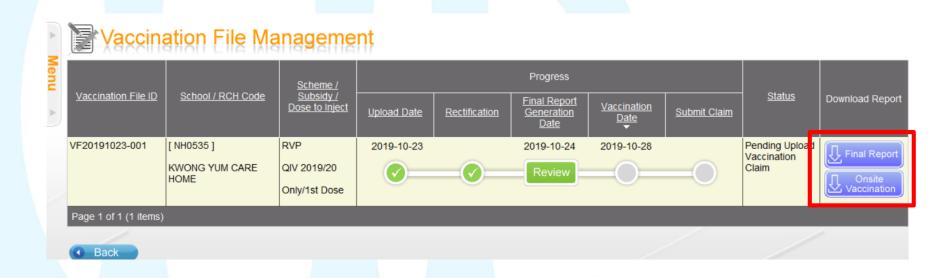
Page 1 of 1 (3 items)





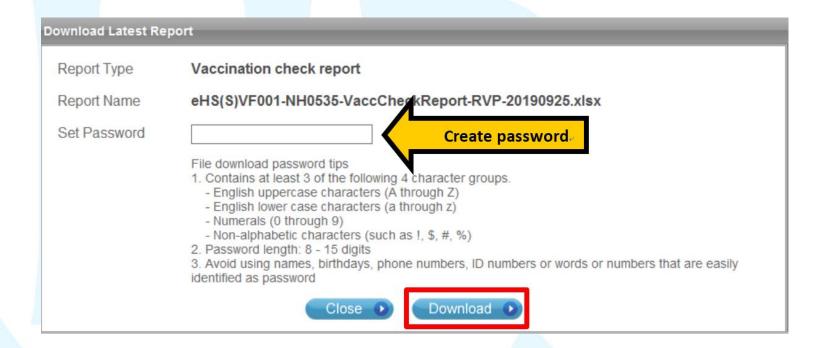


Download Final Report & 'Onsite Vaccination' List





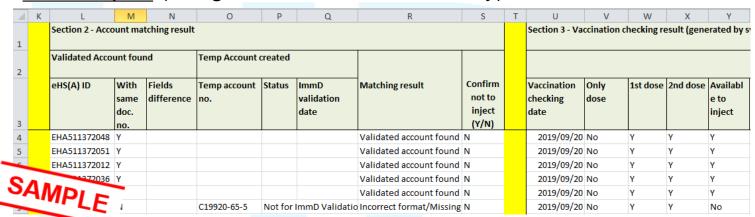




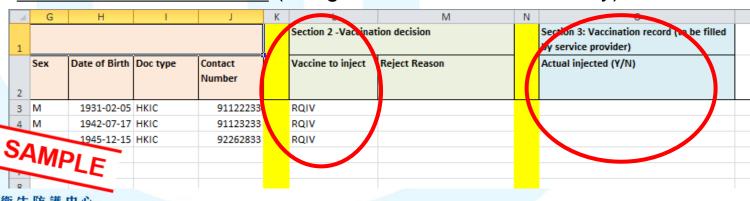




#### Final Report (Bring to the vaccination activity)

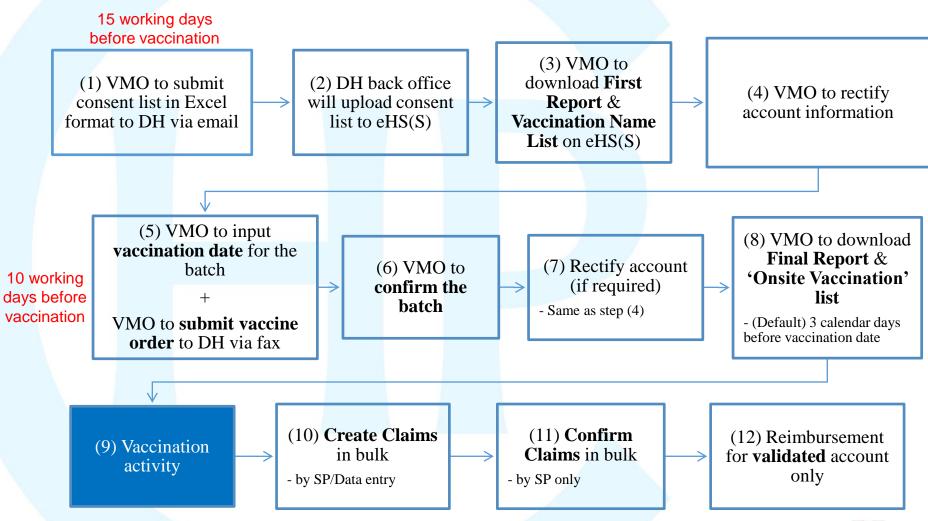


#### 'Onsite Vaccination' List (Bring to the vaccination activity)





# Workflow



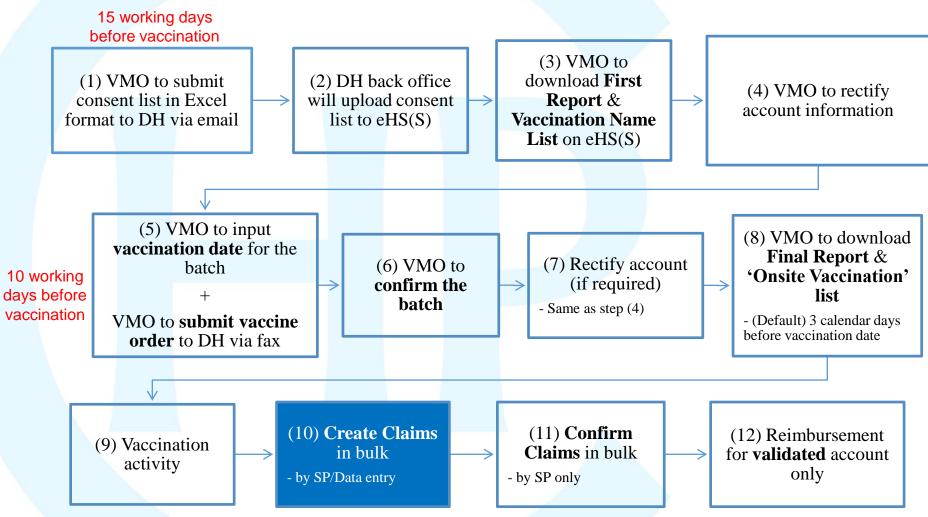


# **After Vaccination**





# Workflow

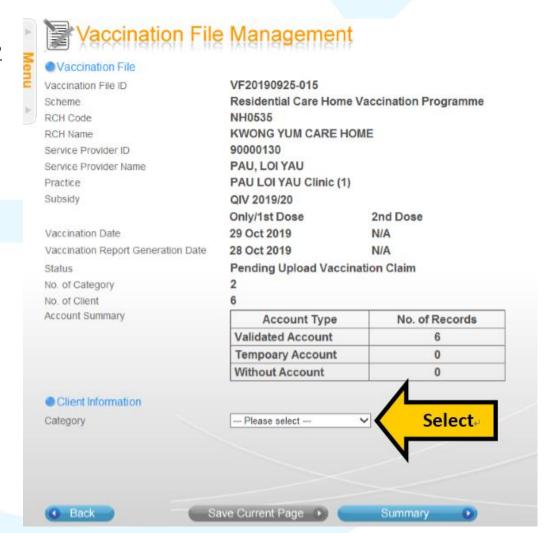






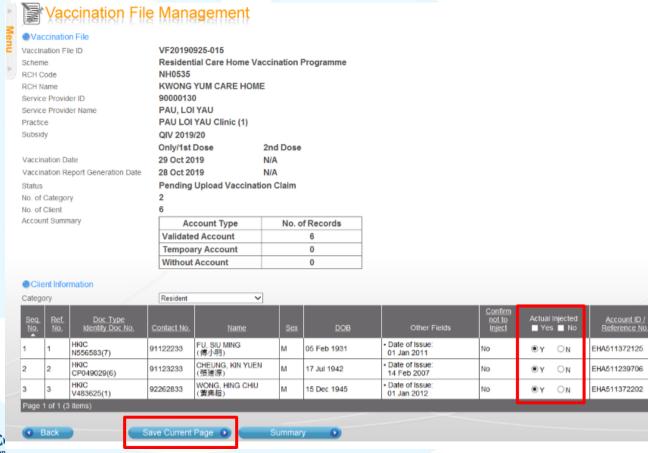






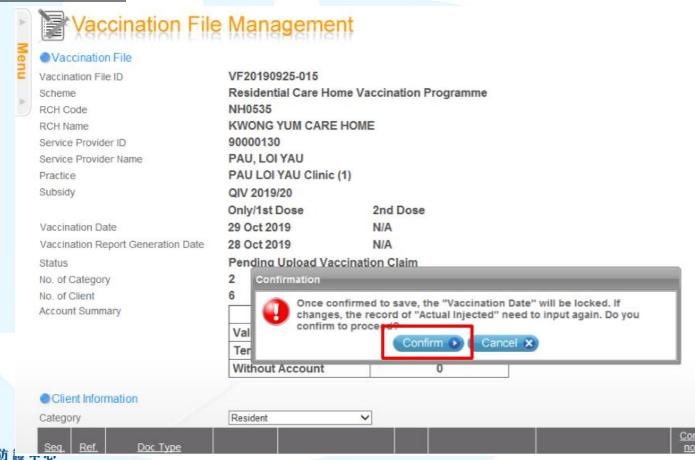


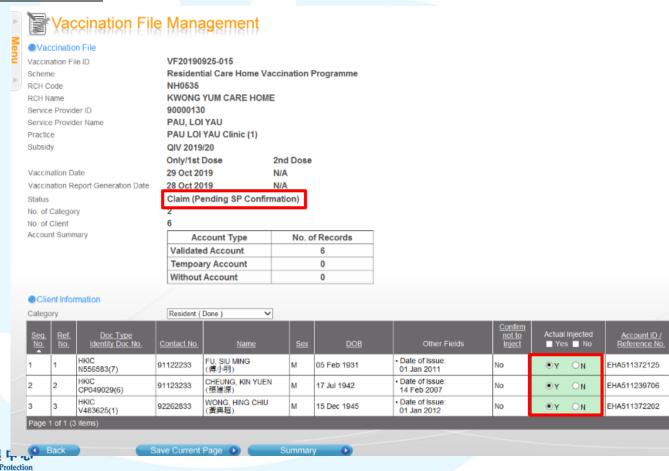




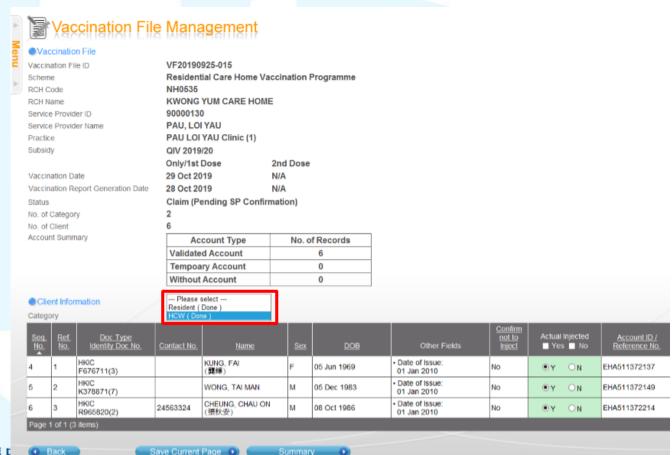




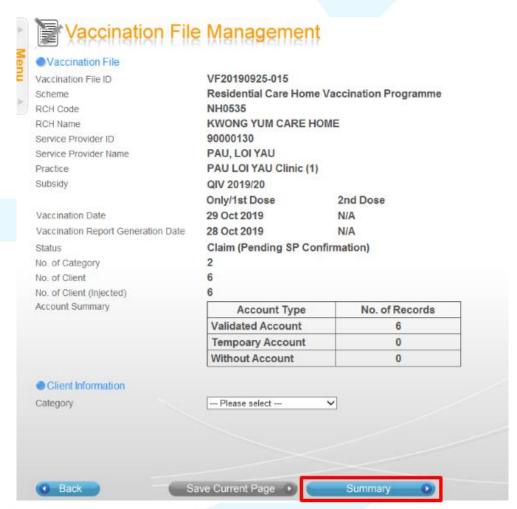
















## Input Claims



#### Vaccination File

Vaccination File ID VF20190925-015

Scheme Residential Care Home Vaccination Programme

RCH Code NH0535

RCH Name KWONG YUM CARE HOME

Service Provider ID 90000130
Service Provider Name PAU, LOI YAU

Practice PAU LOI YAU Clinic (1)

Subsidy QIV 2019/20

 Only/1st Dose
 2nd Dose

 cination Date
 29 Oct 2019
 N/A

Vaccination Date 29 Oct 2019 N/A
Vaccination Report Generation Date 28 Oct 2019 N/A

Status Claim (Pending SP Confirmation)

No. of Class 2
No. of Student 6
No. of Client (Injected) 6

| Category   | No. of Client | Actual Injected - Yes | Actual Injected - No | Match |
|------------|---------------|-----------------------|----------------------|-------|
| Resident   | 3             | 3                     | 0                    | Yes   |
| <u>HCW</u> | 3             | 3                     | 0                    | Yes   |
| Total      | 6             | 6                     | 0                    | Yes   |

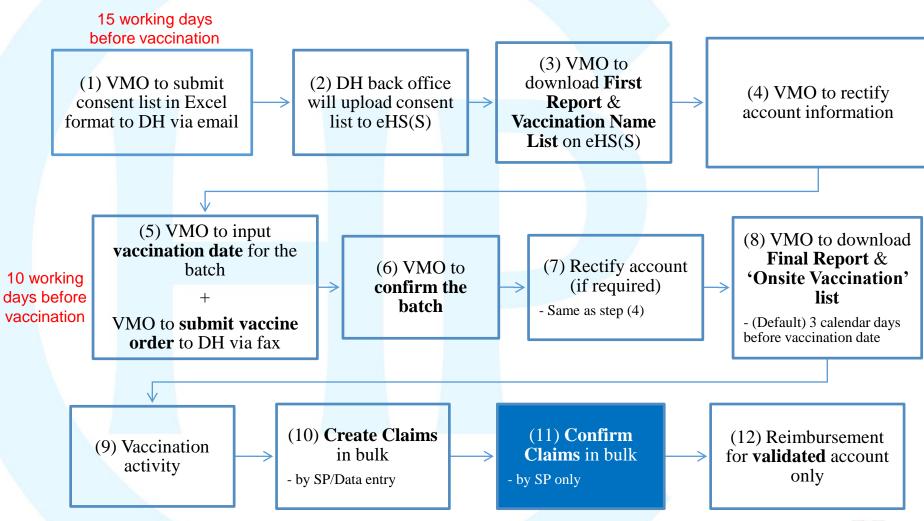


Back



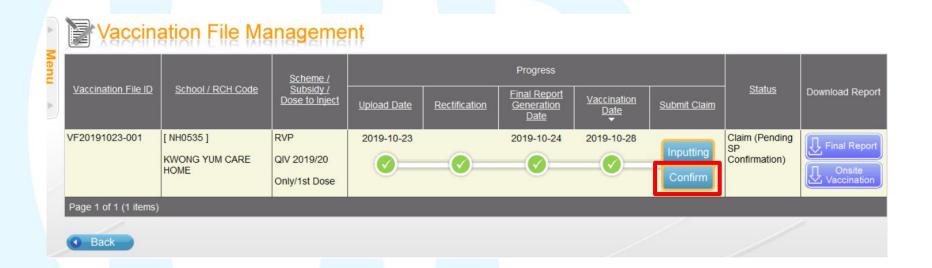


# Workflow





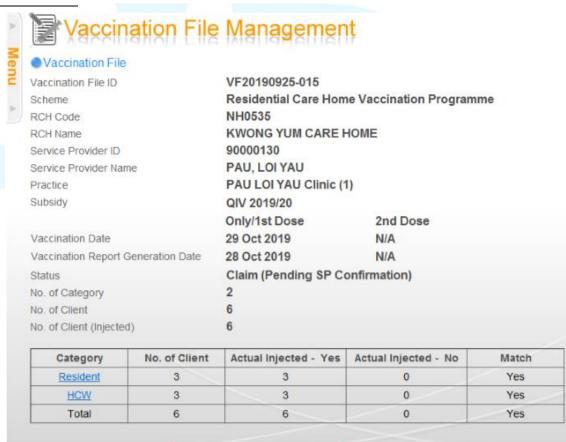
#### Confirm Claims







#### **Confirm Claims**



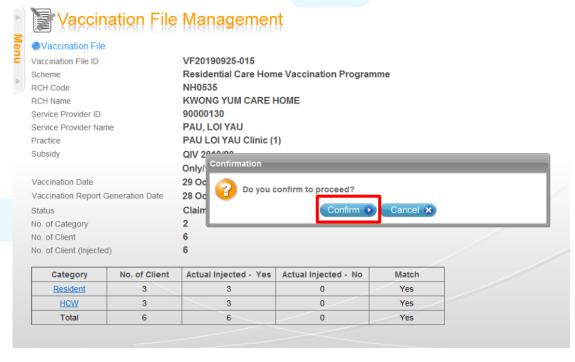


Back



Confirm Claim

#### Confirm Claims





## Vaccination File Management



Claim of Vaccination File (VF20190925-015) submitted.







#### **Confirm Claims**

Vaccination File Management

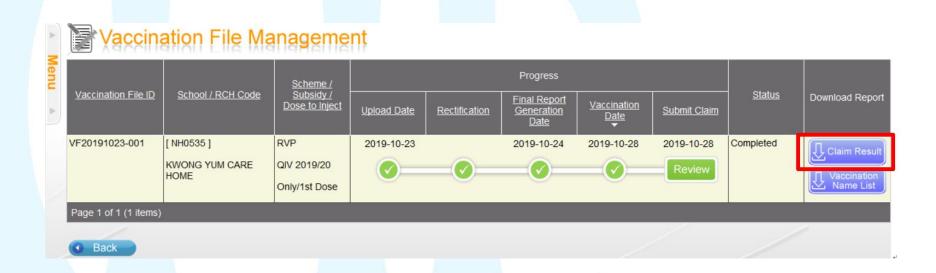
|                     |                                      | Scheme /<br>Subsidy /<br>Dose to Inject |                    |               |                                    |  |              |                                   |                                  |
|---------------------|--------------------------------------|---|--------------------|---------------|------------------------------------|--|--------------|-----------------------------------|----------------------------------|
| Vaccination File ID | School / RCH Code                    |   | <u>Upload Date</u> | Rectification | Final Report<br>Generation<br>Date | <u>Vaccination</u><br><u>Date</u><br>▼ | Submit Claim | <u>Status</u>                     | Download Report                  |
|                     | [ NH0535 ]<br>KWONG YUM CARE<br>HOME | RVP<br>QIV 2019/20<br>Only/1st Dose     | 2019-10-23         | <b>O</b>      | 2019-10-24                         | 2019-10-28                             | Submitted    | Claim (Pending<br>Claim Creation) | Final Report  Onsite Vaccination |





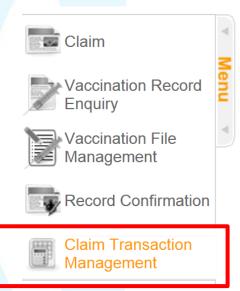


Confirm Claims – view claim result



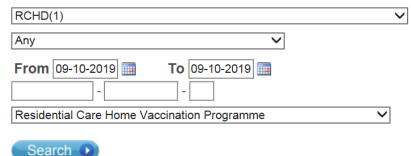








Practice
Status
Transaction Time
Transaction No.
Scheme







#### Claim Transaction Management

Claim Record

Practice PAU LOI YAU Clinic(1)

Status Any

Transaction Time From 31 Oct 2019 To 31 Oct 2019

Transaction No. Any

Scheme Residential Care Home Vaccination Programme

|   | Transaction No. 1  | Transaction Time     | Doc Type<br>Identity Doc No. 1 | <u>Name</u>               | eHealth (Subsidies)<br>Account Type | Amount<br>Claimed (\$) | <u>Status</u>      |     | Other<br>Info 1 |     |
|---|--------------------|----------------------|--------------------------------|---------------------------|-------------------------------------|------------------------|--------------------|-----|-----------------|-----|
| 1 | RVP<br>TR19A31-1-8 | 31 Oct 2019<br>15:54 | HKIC<br>CI284XXX(X)            | FU, PING FAI<br>(傅炳輝)     | Validated Account                   | 100                    | Ready to Reimburse | [   | Details         | PAU |
| 2 | RVP<br>TR19A31-2-0 | 31 Oct 2019<br>15:54 | HKIC<br>NB001XXX(X)            | KUNG, CHUNG FAI<br>(龔松輝)  | Validated Account                   | 10)                    | Ready to Reimburse |     | Details         | PAU |
| 3 | RVP<br>TR19A31-3-2 | 31 Oct 2019<br>17:52 | HKIC<br>N556XXX(X)             | FU, SIU MING<br>(傅小明)     | Validated Account                   | 100                    | Ready to Reimburse | - C | Details         | PAU |
| 4 | RVP<br>TR19A31-4-4 | 31 Oct 2019<br>17:52 | HKIC<br>CP049XXX(X)            | CHEUNG, KIN YUEN<br>(張建源) | Validated Account                   | 100                    | Ready to Reimburse | - [ | Details         | PAU |
| 5 | RVP<br>TR19A31-5-7 | 31 Oct 2019<br>17:52 | HKIC<br>V483XXX(X)             | WONG, HING CHIU<br>(黄興超)  | Validated Account                   | 100                    | Ready to Reimburse | E   | Details         | PAU |
| 6 | RVP<br>TR19A31-6-9 | 31 Oct 2019<br>17:52 | HKIC<br>F676XXX(X)             | KUNG, FAI<br>(龔輝)         | Validated Account                   | 100                    | Ready to Reimburse |     | Details         | PAU |
| 7 | RVP<br>TR19A31-7-1 | 31 Oct 2019<br>17:52 | HKIC<br>K378XXX(X)             | WONG, TAI MAN             | Validated Account                   | 100                    | Ready to Reimburse | С   | Details         | PAU |
| 8 | RVP<br>TR19A31-8-3 | 31 Oct 2019<br>17:52 | HKIC<br>R965XXX(X)             | CHEUNG, CHAU ON<br>(張秋安)  | Validated Account                   | 100                    | Ready to Reimburse |     | Details         | PAU |

Page 1 of 1 (8 items)

Record Summary

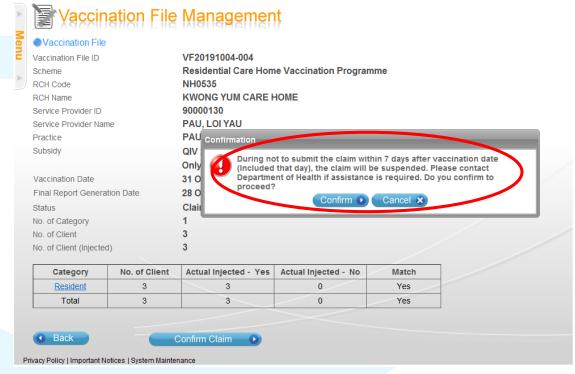
|                              | Incomplete | Pending<br>Confirmation | Pending eHealth (Subsidies) Account Validation | Ready to<br>Reimburse | Voided | Reimbursed | Suspended |
|------------------------------|------------|-------------------------|--|-----------------------|--------|------------|-----------|
| Total Amount<br>Claimed (\$) | 0          | 0                       | 0  | 800                   | 0      | 0          | 0         |







Claims submitted by VMO on eHS(S) by batch that exceed 7 days after vaccination will be regarded as late claim & will be suspended on eHS(S). Please contact DH for further arrangements.







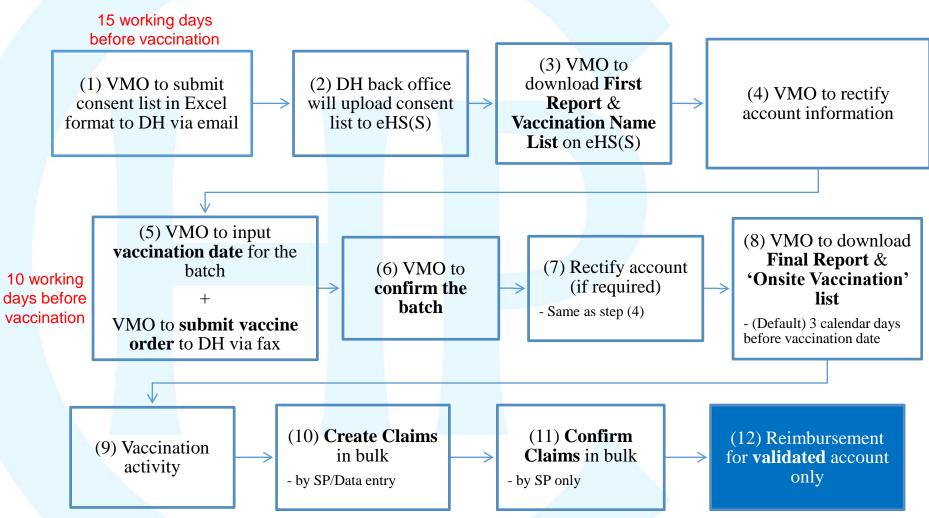
Claims submitted by VMO on eHS(S) by batch that exceed 7 days after vaccination will be regarded as late claim & will be suspended on eHS(S). Please contact DH for further arrangements.

|   | Scheme /            |                                      |                                     |                    |                      | Progress                           |  |                       |                    |                                    |
|---|---------------------|--------------------------------------|-------------------------------------|--------------------|----------------------|------------------------------------|--|-----------------------|--------------------|------------------------------------|
|   | Vaccination File ID | School / RCH Code                    | Subsidy /<br>Dose to Inject         | <u>Upload Date</u> | <u>Rectification</u> | Final Report<br>Generation<br>Date | <u>Vaccination</u><br><u>Date</u><br>▼ | Submit Claim          | <u>Status</u>      | Download Repo                      |
|   | VF20191004-004      | [ NH0535 ]<br>KWONG YUM CARE<br>HOME | RVP<br>QIV 2019/20<br>Only/1st Dose | 2019-10-04         | <b>O</b>             | 2019-10-28                         | 2019-10-31                             | 2019-11-07<br>Suspend | Claim<br>Suspended | Claim Resul  Vaccination Name List |
| - | VF20191023-001      | [ NH0535 ]<br>KWONG YUM CARE<br>HOME | RVP<br>QIV 2019/20<br>Only/1st Dose | 2019-10-23         | <b>O</b>             | 2019-10-24                         | 2019-10-28                             | 2019-10-28<br>Review  | Completed          | Claim Resul                        |





## Workflow





# After Vaccination – Receive Injection Fees

- DH back office verifies the number of transactions confirmed by VMO with the number of vaccines ordered and final no. of recipients provided by RCH/DI
- Injection fees will be reimbursed to the designated bank account via autopay
- Reimbursement for valid eHS(A) only





## **Contact Us**

#### 疫苗計劃組 Vaccination Section

電話 Phone

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# **Thank You**



