### 附件1

### Attachment 1

### 海南省家庭医生签约服务包内容及费用标准参考表

### Reference Table of Services and Rate Bases of Family Doctor Contract Service Packages in Hainan Province

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 适合对象  Target Group | 服务包类型  Type of Service Package | 服务内容  Services | 服务频次  Service Frequency | 费用标准（元/人.年）  Rate Base (RMB/person/year) | | | |
| 合计  （元)  Total  (RMB) | 医保  （元)  Medical Insurance Fund  (RMB) | 个人  （元)  Personal Payment  (RMB) | 公卫  （元)  Funds for Public Health Services  (RMB) |
| 辖区内所有居民（基本服务包）  All residents within the service area (basic service package) | 基本公卫服务包  Basic public health service package | 1.完善居民健康档案，内容包括个人基本信息、重点人群健康管理记录和其他医疗卫生服务记录。  1. Improve residents' health records, including basic personal information, health management records of key groups and records of other medical and health services. | 按需服务  On demand | 20 | 0 | 0 | 20 |
| 2.0-6岁儿童、孕产妇、65岁以上老年人、慢病患者重点人群分类专档管理。  2. Sort and manage files of key groups such as children aged 0 to 6, pregnant and perinatal women, elderly people aged 65 and above, and the chronically ill. | 按国家基本公共卫生服务规范（第三版）服务  Subject to the National Standard for Basic Public Health Services (Version III) |
| 1. 通过微信、公众号等方式提供健康教育折页、处方和手册等资料，定期开展健康教育宣传、引导居民学习、掌握健康知识及必要的健康技能。 2. Provide health education foldouts, prescriptions and manuals through WeChat and official accounts, and conduct regular health education campaigns to guide residents to learn and master health knowledge and necessary health skills. | 按国家基本公共卫生服务规范（第三版）服务  Subject to the National Standard for Basic Public Health Services (Version III) |
| 4.延伸处方，病情稳定慢性病患者长处方（不超过3个月）。  4. Extend long-term prescriptions of stable chronic patients (for no longer than 3 months). | 按需服务  On demand |
| 5.健康咨询的解答和指导，指导适宜就医途径。  5. Provide answers and instructions for health consultation and give advice on the appropriate way of seeking medical treatment. | 按需服务  On demand |
| 6.开展家庭医生签约咨询和个性化签约服务宣传。  6. Hold consultations about family doctor contract services and publicize tailored services. | 按需服务  On demand |
| 基本  医疗  服务  包  Basic  medical  service  package | 1.为签约城乡居民提供疾病咨询、识别评估、分诊转诊服务。  1. Provide the urban and rural residents who have signed contracts (hereinafter referred to as "covered residents") with disease consulting, identification, assessment, and triage and referral services. | 按需服务  On demand | 35 | 25 | 10 | 0 |
| 2.为签约居民协调联系转诊医院，提供预约专家、床位和检查检验服务。  2. Provide covered residents with such services as coordinating and contacting the hospital to which the residents will be referred, scheduling appointments with experts, booking beds and conducting examinations and tests. | 按需服务  On demand |
| 3.为签约居民提供康复随访和用药指导服务。  3. Provide covered residents with rehabilitation follow-up services and instructions in drug use. | 按需服务  On demand |
| 4.利用健康一体机为具有基础疾病的签约居民提供血糖（14.8元）和血脂（16.7元）测定，以及常规心电图（7.2元）和尿常规检查（3.5元）。  4. Use the all-in-one health device for blood glucose test (RMB14.8), cholesterol test (RMB16.7), routine electrocardiogram test (RMB7.2), and routine urinalysis (RMB3.5) for the residents with underlying medical conditions. | 1次/年  1 time/year |
| 5.为签约居民提供急诊急救相关服务，如联系120、实施人工心肺复苏术等。  5. Provide covered residents with services relating to emergency treatment and first aid, such as calling 120 and performing CPR. | 按需服务  On demand |
| 6.定期开展城乡居民医疗保障政策宣传，每季度不低于1次。  6. Publicize medical security policies for urban and rural residents at least once a quarter. | 4次/年  4 times/year |
| **合计**  **Total** | | | | **55** | **25** | **10** | **20** |
| 65岁 及以 上老 年人  Elderly people aged 65 and above | 个性化签约服务包  Tailored service package | 1.家庭巡诊（含了解服务对象健康状况，指导疾病治疗和控制，进行健康咨询  1. Make rounds of visits to families (to check the health status of the clients, give instructions on the treatment and control of diseases, and provide health consultation) |  | The service charges are collected according to the current medical service prices and the payment policy of medical insurance for general outpatient treatment. The charges that enjoy reimbursement by the basic medical insurance should be paid by the basic medical insurance fund and the insured as stipulated. | | | |
| 2.贴敷疗法（中）  2. Application therapy (TCM) | 1次/年  1 time/year |
| 3.拔罐（3个罐）  3. Cupping (3 cups) | 1次/年  1 time/year |
| 4. 中医辩证施膳指导（赠送5元脉图诊断）  4. Provide dialectical dietary instructions based on TCM (and offer a RMB5 coupon for sphygmogram-based diagnosis) | 4次/年  4 times/year |
| 高血  压患  者  Patients with hypertension | 个性化签约服务包包  Tailored service package | 1.家庭巡诊（含了解服务对象健康状况，指导疾病治疗和控制，进行健康咨询)  1. Make rounds of visits to families (to check the health status of the clients, give instructions on the treatment and control of diseases, and provide health consultation) |  | The service charges are collected according to the current medical service prices and the payment policy of medical insurance for general outpatient treatment. The charges that enjoy reimbursement by the basic medical insurance should be paid by the basic medical insurance fund and the insured as stipulated. | | | |
| 2.眼底照相  2. Funduscopic examination | 1次/只/年  1 time/eye/year |
| 3.电解质（无机元素）测定  3. Electrolyte (inorganic elements) determination | 1次/年  1 time/year |
| 4.血清γ谷氨酰基转移酶测定  4. Serum GGT test | 1次/年  1 time/year |
| 5.中医辩证施膳指导（赠送5元脉图诊断)  5. Provide dialectical dietary instructions based on TCM (and offer a RMB5 coupon for sphygmogram-based diagnosis) | 4次/年  4 times/year |
| 糖尿  病患  者  Patients with diabetes | 个性化签约服务包  Tailored service package | 1.家庭巡诊（含了解服务对象健康状况，指导疾病治疗和控制，进行健康咨询)  1. Make rounds of visits to families (to check the health status of the clients, give instructions on the treatment and control of diseases, and provide health consultation) |  | The service charges are collected according to the current medical service prices and the payment policy of medical insurance for general outpatient treatment. The charges that enjoy reimbursement by the basic medical insurance should be paid by the basic medical insurance fund and the insured as stipulated. | | | |
| 2.眼底照相  2. Funduscopic examination | 1次/只/年  1 time/eye/year |
| 3.糖化血红蛋白  3. HbA1c test | 1次/年  1 time/year |
| 4.中医辩证施膳指导（赠送5元脉图诊断)  4. Provide dialectical dietary instructions based on TCM (and offer a RMB5 coupon for sphygmogram-based diagnosis) | 4次/年  4 times/year |
| 备注：各地可在“海南省家庭医生签约服务包内容及费用标准参考表”基础上结合当地工作实际制定家庭医生签约服务包，服务包内容包括但不限于表中所列服务内容，且不得减少相应的最低服务频次和要求。  Note: Different areas may develop family doctor contract service packages according to the actual local situations on the basis of the Reference Table of Services and Rate Bases of Family Doctor Contract Service Packages in Hainan Province. The services include but are not limited to those set out in the Table, but the minimum service frequency and requirements of the corresponding services should not be reduced. | | | | | | | |

**附件2**

**Attachment 2**

**海南省家庭医生签约服务监测指标**

**Monitoring Indicators of Family Doctor Contract Services in Hainan Province**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 一级指标  Level-1 Indicator | 二级指标  Level-2 Indicator | 评价标准  Assessment Criteria | 指标含义  Meaning of the Indicator | 数据来源  Data Source |
| 签约数量指标  Indicators of coverage of the services | 1.重点人群签约服务覆盖率  1. Coverage ratio for key groups | 每年增加1-3个百分点，2035年达到85%。  The coverage ratio for key groups is increased by 1 to 3 percentage points each year and will reach 85% by 2035. | 统计年度内具有家庭医生签约服务协议电子版或纸质版的签约居民人数占该区域重点人群数的比例。现阶段重点人群包含老年人、孕产妇、０-６岁儿童、残疾人、脱贫人口、纳入计划生育家庭特别扶助制度的独生子女伤残或死亡家庭的夫妻以及高血压、糖尿病、结核病乙肝和严重精神障碍患者。签约服务是指相应居民在统计年度内具有家庭医生签约服务协议电子版或纸质版，并按照协议获得了相应服务。  It refers to the number of an area's residents who have signed an electronic or written contract on family doctor contract services as a percentage of the number of residents in the area's key groups within a year. At present, key groups include elderly people, pregnant and perinatal women, children aged 0 to 6, people with disabilities, residents lifted out of poverty, couples enjoying special support for one-child families whose only child is disabled or dead, and patients with hypertension, diabetes, tuberculosis, hepatitis B or severe mental disorders. Contract service means that the corresponding resident has signed an electronic or written contract on family doctor contract services and has received the corresponding services according to the contract within the statistical year. | 家签信息系统结合现场抽查核实：统计数据\*抽查真实率  Verification via the information system of family doctor contract services and on-site random checks: Data \* authenticity rate of random checks |
| 2.签约服务覆盖率  2. Coverage ratio of the services | 每年增加1-3个百分点，2035年达到75%。  The coverage ratio of the services is increased by 1 to 3 percentage points each year and will reach 75% by 2035. | 统计年度内获得家庭医生签约服务的居民人数（社区数）占该区域常住人口数（社区数）的比例。具体根据国家口径调整。其中社区是指村委会、社区居委会。  It refers to the number of an area's residents (communities) receiving family doctor contract services within the statistical year as a percentage of the number of the area's permanent residents (communities). It may be adjusted in line with the national standard. The communities refer to village committees and community neighborhood committees. | 家签信息系统结合现场抽查核实：统计数据\*抽查真实率  Verification via the information system of family doctor contract services and on-site random checks: Data \* authenticity rate of random checks |
| 增加服务供给  Increase service supply | 3.家庭医生人数  3. Number of family doctors | 家庭医生人数比上一年增加  The number of family doctors increases over the previous year. | 考查是否有序扩大家庭医生来源渠道。现阶段家庭医生来源以全科医生为主，包含其他类别临床医师（含中医类别）、乡村医生，及退休临床医师（含中医类别）。  It is to check whether the sources of family doctors are expanded in an orderly manner. At present, family doctors are mainly general medical practitioners, including other types of clinicians (including TCM practitioners), rural doctors and retired clinicians (including TCM practitioners). | 家签信息系统结合现场抽查核实：统计数据\*抽查真实率  Verification via the information system of family doctor contract services and on-site random checks: Data \* authenticity rate of random checks |
| 4.门急诊服务对象中签约居民占比  4. The number of covered residents as a percentage of the number of residents receiving outpatient and emergency services | 占比较上一年增加  The percentage increases over the previous year. | 考查签约服务有无带动基层医疗卫生机构增加门急诊医疗服务供给。统计年度内，在该基层医疗卫生机构门急诊就诊总人次数中，签约居民诊疗人次占的比例。  It is to check whether the services have driven the community-level medical and health institutions to increase the supply of outpatient and emergency medical services. It refers to the number of times of diagnosis and treatment for covered residents as a percentage of the total number of times of outpatient and emergency treatment in the community-level medical and health institution. | 根据基层医疗卫生机构的门急诊记录核查  Outpatient and emergency treatment records of community-level medical and health institutions |
| 丰富服务内涵  Enrich services | 5.基层医疗卫生机构可以开具慢性病长处方的机构占比  5. Percentage of community-level medical and health institutions that can give long-term prescriptions for chronic diseases | 占比较上一年增加  The percentage increases over the previous year. | 考查各地落实《国家卫生健康委 国家医保局关于印发长期处方管理规范（试行）的通知》（国卫办医发〔2021〕17号）情况，患者有无通过基层医疗卫生机构签约的家庭医生开具长处方。统计年度内，在该地区乡镇卫生院和社区卫生服务中心中，可开具慢性病长期处方的机构数占比。现场检查时抽取机构/团队签约的高血压和或糖尿病签约患者，查看相关门诊处方有无4-12周的处方量。  It is to check the implementation of the *Notice of the National Health Commission and the National Healthcare Security Administration on Issuing the Management Standard for Long-term Prescriptions (Provisional)* (G.W.B.Y.F. [2021] No. 17) in various areas and check whether patients have the long-term prescriptions given by contracted family doctors from community-level medical and health institutions. It refers to the number of an area's institutions that can give long-term prescriptions for chronic diseases as a percentage of the number of the area's township healthcare centers and community health service centers. It can be determined by checking the outpatient prescriptions for covered patients with hypertension or diabetes of the institution/team through on-site inspection to see whether any of the prescriptions is given for 4 to 12 weeks. | 根据基层医疗卫生机构的门急诊记录核查  Outpatient and emergency treatment records of community-level medical and health institutions |
| 6.牵头医院给基层医疗卫生机构预留号源的比例  6. Percentage of appointments reserved by the leading hospital for community-level medical and health institutions | 2024年达到20%，2025年达到30%  The percentage will reach 20% by 2024 and 30% by 2025. | 考查各地医联体或医共体二级及以上医院是否给基层医疗卫生机构预留20%号源，以后逐年提高号源投放比例，对确需转诊的签约居民予以满足。医联体内二、三级医院对转诊签约患者提供优先就诊服务。查看挂号平台、预约平台等号源分配情况。  It is to check whether hospitals at and above the secondary level in an area's medical consortium or medical community reserve 20% slots for community-level medical and health institutions, raise the percentage year by year, or satisfy the needs of covered residents for referral. Covered patients referred to secondary and tertiary hospitals in the medical consortium enjoy priority in medical treatment. It can be determined by checking the allocation of slots on the registration platform and the reservation platform. | 查看当地县域医共体、城市医联体牵头医院  Leading hospitals of the local county medical community and urban medical consortium |
| 优化服务模式  Improve service modes | 7.家庭医生签约模式种类  7. Family doctor contract service modes | 支持签约模式的种类大于3类  There are more than 3 service modes. | 考查家庭医生签约服务模式是否多样化：有1-3年弹性化时长的家庭医生签约服务模式，开展二三级医院与基层医疗卫生机构组合式签约、互联网签约，支持以家庭和功能社区为单位的签约。  It is to check the diversity of family doctor contract service modes: There should be the service mode of providing family doctor contract services for a period of 1 to 3 years; the service contract can be signed for services from both secondary and tertiary hospitals and community-level medical and health institutions, and can be signed online; and the contracting party may be a family or a functional community. | 查看基层医疗卫生机构的家庭医生签约服务协议  Contracts on family doctor contract services of community-level medical and health institutions |
| 8.签约居民服务知晓率  8. Percentage of covered residents' awareness of the services | 较上一年增加  It increases over the previous year. | 签约居民对是否签约、对签约医生和服务内容的知晓情况。每个机构/团队抽取签约居民10名（或是签约人数的5%），进行问卷调查或电话调查，答对60%以上的题即算知晓，记为1人。  It reflects covered residents' awareness of their contracts, the contracted doctors and the services. For each institution/team, 10 covered residents (or 5% of the covered residents) should receive questionnaires or telephone surveys, and the person who answers over 60% of the questions correctly should be deemed to be aware of the information. | 问卷调查或电话调查  Questionnaires or telephone survey |
| 服务效果  Service effectiveness | 9.签约居民续约率  9. Renewal rate of covered residents | 较上一年增加  It increases over the previous year. | 签约居民续约率=签约居民续约人数/去年同一时间点签约居民人数\*100%。  Renewal rate = Number of residents renewing the contract / Number of covered residents at the same point in time last year \* 100%. | 家签信息系统结合现场抽查核实：统计数据\*抽查真实率  Verification via the information system of family doctor contract services and on-site random checks: Data \* authenticity rate of random checks |
| 10.签约居民满意率  10. Satisfaction rate of covered residents | 较上一年增加，2035年达到85%。  It increases over the previous year and will reach 85% by 2035. | 签约居民对签约服务基本满意和满意的人数占调查总人数的比例。每个机构/团队抽取签约居民10名（或是签约人数的5%）。  It refers to the number of covered residents who are basically satisfied and satisfied with the services as a percentage of the total number of residents surveyed. For each institution/team, 10 covered residents (or 5% of the covered residents) should receive a survey. | 问卷调查或电话调查  Questionnaires or telephone survey |
| 11.签约高血压患者血压控制率  11. Blood pressure control rate of covered patients with hypertension | ≥40%  ≥ 40% | 核查签约居民健康状况的改善情况，评估签约服务质量和效果。  It is to check the improvement in the health status of the covered residents and assess the quality and effectiveness of the services. | 系统随机抽查  System-based random check |
| 保障  机制  Security  mechanism | 12.家庭医生签约服务包管理  12. Management of family doctor contract service packages | 定性指标，查看落实情况  It is reflected by qualitative indicators. | 考查各地有无规范家庭医生签约服务包收费机制：1.各地和基层医疗卫生机构对家庭医生签约服务包的制定和公示情况。2.服务包应根据居民需要包括相关基本医疗、公共卫生和健康管理服务内容，以及长期处方、预约转诊等便民惠民举措。3.各服务包具备相应签约服务费标准。  It is to check whether there is a mechanism for standardizing the charges of family doctor contract service packages in areas: 1. The family doctor contract service packages developed by areas and community-level medical and health institutions and the public announcement of them. 2. The service packages should include the basic medical, public health and health management services needed by residents, as well as initiatives convenient and beneficial to residents, such as long-term prescriptions and appointments for referrals. 3. Each service package should contain the rate bases of the services. | 查看相关文件、佐证材料  Related documents and supporting materials |
| 13.家庭医生签约服务费  13. Charges of family doctor contract services | 定性指标，查看落实情况  It is reflected by qualitative indicators. | 考查激励机制的落实情况：1.签约服务费由医保基金、基本公共卫生服务经费和签约居民付费等分担。2.建立了家庭医生签约服务费的拨付和分配机制：行政部门根据考核结果按照标准及时向各社区卫生服务机构、乡镇卫生院拨付资金，基层医疗卫生机构根据考核结果及时向各家庭医生（团队）分配资金。3.签约服务费用于参与家庭医生签约服务人员的薪酬分配：原则上不低于70%。4.二级以上医疗机构要在绩效工资分配上向参与签约服务的医师倾斜。5.落实全科医生津贴。  It is to check the implementation of the incentive mechanism: 1. Service charges should be jointly covered by China's medical insurance system, government expenditure on public medical services, and the covered individuals 2. A mechanism for appropriation and allocation of family doctor contract service charges has been established: The administrative department should allocate funds to community health service institutions and township healthcare centers in a timely manner according to the assessment results and the relevant standard, and community-level medical and health institutions should allocate funds to family doctors (teams) in a timely manner according to the assessment results. 3. The service charges should be used for the emolument allocation of the staff participating in the family doctor contract services: In principle, the percentage should not be lower than 70%. 4. Medical institutions at and above the secondary level should give preferential treatment to physicians participating in the services when allocating the merit pay. 5. Allowances should be paid to general medical practitioners. | 查看相关文件、佐证材料  Related documents and supporting materials |
| 14.政策联动  14. Policy | 定性指标，查看落实情况  It is reflected by a qualitative indicator. | 探索将签约居民“2+3”健康服务包疾病门诊医保基金支付部分按人头预算给基层医疗卫生机构或家庭医生（团队）。  It is to explore budgeting the amount payable by the medical insurance fund for outpatient service charges under the "2+3" health service package for the community-level medical and health institution or the family doctor (team) according to the number of patients. | 查看相关文件、佐证材料  Related documents and supporting materials |

**附件3**

**Attachment 3**

**海南省家庭医生签约服务协议（样式）**

**Agreement on Family Doctor Contract Services in Hainan Province (Template)**

**甲方：（基层医疗卫生机构)** 主要负责人：

**Party A: (Community-level medical and health institution) Principal person in charge:**

家庭医生团队（个人）负责人：        执业类别：

Family doctor or person in charge of the family doctor team: \_\_\_\_\_\_\_\_\_ Type of practice: \_\_\_\_\_\_\_\_\_\_\_\_\_

办公电话：          手机：

Office phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile phone:

微 信 号：          其他联系方式：

WeChat account: \_\_\_\_\_\_\_\_\_\_\_\_\_ Other contact information:

上级（指导）医院：1.（市县级医疗机构） 机构名称、联系人及电话

Superior (instructing) hospitals: 1. (The city- or county-level medical institution) Institution name, contact person and phone number

2.（省级医疗机构）  机构名称、联系人及电话

2. (The provincial-level medical institution) Institution name, contact person and phone number

家庭医生签约签约服务团队成员基本信息

Basic Information of Members of the Family Doctor Contract Service Team

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 姓名  Name | 职务/职称  Post/Title | 单位名称  Institution Name | 电话  Tel. | 备注  Notes |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**乙方（类别：居民、家庭、功能社区）**

**Party B (Types: Resident, family, functional community)**

乙方1（居民）：

Party B1 (Resident):

姓名：          现住址：

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Current address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

电话：          身份证号码:

Tel.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ID No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

人员类型：

Type of group: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

（人员类型：老年人、孕产妇、儿童、残疾人、脱贫人口、计划生育特殊家庭成员及高血压、糖尿病、结核病、乙肝、严重精神障碍患者，脱贫不稳定户、边缘易致贫户、突发严重困难户，一般人群）

(Types of groups: Elderly people, pregnant and perinatal women, children, people with disabilities, residents lifted out of poverty, members of special one-child families, patients with hypertension, diabetes, tuberculosis, hepatitis B or severe mental disorders, households precariously escaping poverty, poverty-prone households, households with sudden and severe difficulties, and general groups)

乙方2（家庭）：

Party B2 (Family):

户主姓名：          现住址：

Name of householder: \_\_\_\_\_\_\_\_\_ Current address:

电话：            身份证号码:

Tel.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ID No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

签约家庭成员基本信息

Basic Information of Members of the Contracting Family

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 姓名  Name | 身份证号码  ID No. | 电话  Tel. | 与签约人关系  Relationship with the Contracting Person | 人员类型  Type of Group | 备注  Notes |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

乙方3（功能社区）：

Party B3 (Functional community):

功能社区名称：          地址：

Name of the functional community: \_\_\_\_\_\_\_\_\_ Address:

负责人姓名及电话：        身份证号码:

Name and phone number of the person in charge: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ID No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

单位人员数量：     名，其中重点人群类别及人数：

Number of persons: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Key groups and numbers of persons:

1.         2.

1.          2.

（重点人群：老年人、孕产妇、儿童、残疾人、脱贫人口、计划生育特殊家庭成员及高血压、糖尿病、结核病、乙肝、严重精神障碍患者）

(Key groups: Elderly people, pregnant and perinatal women, children, people with disabilities, residents lifted out of poverty, members of special one-child families, and patients with hypertension, diabetes, tuberculosis, hepatitis B or severe mental disorders)

为充分发挥基层卫生服务网作用，促进基层医疗卫生服务向健康管理转变，逐步构建科学合理就医新秩序，增强群众对基本卫生服务的获得感，本着平等、自愿、就近的原则，经双方协商，现乙方自愿向甲方申请开展家庭医生签约服务并签订本协议。

In order to give full play to the role of the community-level health service network, promote the transformation of community-level institutions' medical and health services into health management, gradually build a new scientific and reasonable order of medical treatment, and enhance people's satisfaction with basic health services, after consultation by both parties based on the principles of equality, voluntariness and proximity, Party B hereby voluntarily applies to Party A for the family doctor contract services and signs this Agreement.

一、服务期限：壹年（贰年、叁年），自   年  月  日起至   年  月  日止。服务期满后可续约或另选家庭医生团队（个人）的，请在服务期满前30日内办理签约手续。

I. Service Term: One year (Two years / Three years) from \_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. To renew the Agreement or select another family doctor or family doctor team upon the expiry of the service term, Party B shall go through the signing procedures within 30 days prior to the expiry of the service term.

二、服务内容：包括基本医疗服务、公共卫生服务、合理用药、中医药、双向转诊、健康咨询、上门服务、个性化服务等，具体内容参考《海南省推进家庭医生签约服务高质量发展实施方案》中“（三）丰富服务内容，提升群众获得感”。

II. Services: The services include basic medical services, public health services, instructions in rational drug use, TCM, two-way referral, health consultation, house calls, and tailored services. For details, please refer to the section "(3) Offering more services to improve public satisfaction" in the *Implementation Plan for Promoting the High-Quality Development of Family Doctor Contract Services in Hainan Province*.

具体由各市县卫生健康委参照海南省家庭医生签约服务包内容及费用标准参考表自行制定。

The specific services provided in cities and counties shall be determined by their health commissions by reference to the Reference Table of Services and Rate Bases of Family Doctor Contract Service Packages in Hainan Province.

三、服务收费：根据服务人数和费用标准按年收取签约服务费，由医保基金、基本公共卫生服务经费和签约对象付费等分担。

III. Service Charges: The service charges shall be collected on an annual basis according to the number of persons served and the rate bases, which shall be jointly covered by China's medical insurance system, government expenditure on public medical services, and the contracting party.

签约对象分担部分，居民或家庭在签订协议时支付（功能社区在签订协议30日内支付）。其中，

The amount payable by the contracting party shall be paid at the time the resident or family signs the Agreement (or within 30 days after signing the Agreement if the contracting party is a functional community).

（一）基本服务包

i. Basic service package

**居民（是/否**免交**）**按照    元/年/人\*    年的标准支付，共计    元；

**Resident (exempted / not exempted): The charges shall be paid at the rate of RMB \_\_\_\_\_/year/person for \* years, totaling RMB\_\_\_\_\_\_\_\_\_\_;**

**家庭（**人口数≥2人，方可以家庭名义签约**）**，共     人，应交     人，免交     人，按照      元/年/人\*      年\*     人的标准支付，共计      元；

**Family (A contracting family shall have two or more members.): The family has \_\_\_\_\_ members, with \_\_\_\_\_ persons being required to pay the charges and \_\_\_\_\_ persons being exempted. The charges shall be paid at the rate of RMB \_\_\_\_\_/year/person for \* \_\_\_\_\_ years and \* \_\_\_\_\_ persons, totaling RMB\_\_\_\_\_\_\_\_\_\_;**

**功能社区（**签约人口数≥30人、以单位名义提供需服务人口花名册、以单位负责人名义签约的，方可以功能社区名义签约）按照  元/年/人\*       年\*     人的标准支付，共计  元。

**Functional community (A contracting functional community shall have 30 or more contracting persons, provide a list of persons to be served in the name of an institution, and sign the Agreement in the name of the person in charge of the institution): The charges shall be paid at the rate of RMB \_\_\_\_\_/year/person for \* \_\_\_\_\_ years and \* \_\_\_\_\_ persons, totaling RMB\_\_\_\_\_\_\_\_\_\_;**

（二）个性化服务包

ii. Tailored service package

**居民**按照    元/年/人\*    年的标准支付，共计    元；

**Resident: The charges shall be paid at the rate of RMB \_\_\_\_\_\_\_\_\_\_/year/person for \* \_\_\_\_\_ years, totaling RMB\_\_\_\_\_\_\_\_\_\_;**

**家庭（**人口数≥2人，方可以家庭名义签约**）**按照      元/年/人\*      年\*     人的标准支付，共计   元；

**Family (A contracting family shall have two or more members.): The charges shall be paid at the rate of RMB \_\_\_\_\_\_\_\_\_\_/year/person for \* \_\_\_\_\_ years and \* persons, totaling RMB\_\_\_\_\_\_\_\_\_\_;**

**功能社区（**签约人口数≥30人、以单位名义提供需服务人口花名册、以单位负责人名义签约的，方可以功能社区名义签约）按照  元/年/人\*       年\*     人的标准支付，共计  元。

**Functional community (A contracting functional community shall have 30 or more contracting persons, provide a list of persons to be served in the name of an institution, and sign the Agreement in the name of the person in charge of the institution): The charges shall be paid at the rate of RMB \_\_\_\_\_/year/person for \* \_\_\_\_\_ years and \* \_\_\_\_\_ persons, totaling RMB\_\_\_\_\_\_\_\_\_\_;**

四、甲乙双方的职责、权利和义务

IV. Responsibilities, Rights and Obligations of Both Parties

（一）甲方职责和义务

i. Responsibilities and obligations of Party A

1.依托市（县）-镇街-村居三级医疗卫生服务网络为乙方开展服务宣传，设立签约服务宣传专栏，发放相关宣传资料，公示签约服务政策、流程、内容、团队等。

1. Party A shall make full use of the three-level medical and health service network, i.e., the medical and health institutions of the city (county), town/subdistrict and village/community, to promote the services to Party B, set up a publicity column for the services, distribute relevant publicity materials, and publicize the policies, procedures, content and teams of the services.

2.在协议签订时，应充分告知乙方约定的服务内容、服务方式、服务标准、期限和权利义务、医疗风险等信息，送达签约服务联系卡（各市县自行制定）。

2. When signing the Agreement, Party A shall fully inform Party B of the agreed services, service modes, service standards, service terms, rights and obligations, and the medical risks, and deliver to Party B a service contact card (which shall be made by each city and county).

3.在签约年度内向乙方提供约定的服务内容。

3. Party A shall provide Party B with the agreed services within the term of the Agreement.

4.严格按照《国家基本公共卫生服务规范》、基本医疗服务规范等提供服务。

4. Party A shall provide services in strict accordance with the *National Standards for Basic Public Health Services* and the standards for basic medical services.

5.开展上门医疗服务时，要充分告知乙方医疗风险，并征得乙方同意后，方可提供上门医疗服务。

5. Before making house calls for Party B, Party A shall fully inform Party B of the medical risks and obtain Party B's consent.

6.直接负责家庭医生团队监督管理和绩效评价。

6. Party A shall be directly responsible for the supervision, management and performance assessment of the family doctor team.

7.在签订服务协议时向乙方收取签约服务费，须开具规定的收费票据。

7. Party A shall issue the stipulated invoice for the service charges collected from Party B when signing the Agreement.

8.按照国家有关法律法规，保护乙方个人和家庭成员隐私。

8. Party A shall protect the privacy of Party B and its family members in accordance with relevant national laws and regulations.

（二）乙方权利和义务

ii. Rights and obligations of Party B

1.自愿向甲方申请提供家庭医生签约服务。

1. Party B may voluntarily apply to Party A for family doctor contract services.

2.签约期限内只能与1个基层医疗卫生机构的1个家庭医生团队（个人）签订服务协议，并对协议签订时提供的证件、资料的合法性和真实性负责。

2. Within the term of the Agreement, Party B may sign a service agreement with only one family doctor or family doctor team from one community-level medical and health institution, and shall be responsible for the legality and authenticity of the documents and materials provided at the time of signing the Agreement.

3.接受甲方签约服务宣传，并将健康状况、变化情况以及与健康相关的信息、资料及时、准确告知甲方。

3. Party B shall accept Party A's publicity of the services and timely and accurately inform Party A of its health conditions, health changes and health-related information and data.

4.在签约期限内获得约定的服务内容。

4. Party B may receive the agreed services within the term of the Agreement.

5.积极参与、配合甲方开展基本医疗、公共卫生和个性化健康管理等服务以及与疾病防治相关的各种活动。

5. Party B shall actively participate in and cooperate with Party A in the basic medical services, public health services and tailored health management services, as well as the activities related to disease prevention and control.

6.如出现健康问题应及时告知甲方，如需签约家庭医生上门服务，应提前预约，并同意承担上门服务过程中的医疗风险。

6. Party B shall inform Party A in a timely manner of any health problems. To request a house call by the family doctor, Party B shall make an appointment in advance and shall agree to bear the medical risks during the house call.

7.在签订服务协议时（功能社区在签订协议30日内支付）向甲方支付相应的服务费。

7. Party B shall pay Party A the corresponding service charges when signing the Agreement (or within 30 days after signing the Agreement if Party B is a functional community).

8.在其他医疗机构接受的医疗服务由其他医疗机构负责。

8. The responsibility for the medical services that Party B receives from other medical institutions shall lie with such other medical institutions.

9.家庭成员新增或减少，住址、联系方式变动，外出务工等应及时告知甲方，以便甲方开展相关工作。

9. Party B shall promptly inform Party A if its family members are increased or decreased or its address or contact information is changed or it leaves the local place for work, so that Party A can do the relevant tasks.

10.乙方作为服务对象应该履行的其他义务。

10. Party B shall perform other obligations as a service receiver.

五、其他事项

V. Miscellaneous

（一）本协议是甲乙双方的真实意愿表示，对双方具有法律约束力。如有违约，违约方应承担相应的法律责任。

i. This Agreement is the expression of the true intentions of both parties and is legally binding on both parties. Either party who breaches the Agreement shall be held legally accountable.

（二）如甲乙双方在履行本协议过程中发生纠纷，双方应通过友好协商予以解决或由当地医疗纠纷调解委员会调解。协商不成或一方不愿协商，双方均可向有管辖权的法院提起诉讼。

ii. Any dispute arising between both parties during the performance of this Agreement shall be resolved through friendly negotiation by both parties or through mediation by the local medical dispute mediation committee. If negotiation fails or either party is unwilling to negotiate, both parties may file a lawsuit with a court with jurisdiction.

（三）本协议自签订之日起生效。

iii. This Agreement shall come into force on the date of execution.

（四）本协议一式三份，甲、乙方和家庭医生团队（个人）负责人各执一份。

iv. This Agreement is made in triplicate, with Party A, Party B and the family doctor or the person in charge of the family doctor team each holding one copy.

（五）本协议为试行版本，如与国家相关法律法规有抵触，以国家法律法规为准。

v. This Agreement is a trial version. If any provisions hereof are in conflict with relevant national laws and regulations, the national laws and regulations shall prevail.

（以下无正文）

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甲方签字（签章）:              年    月   日

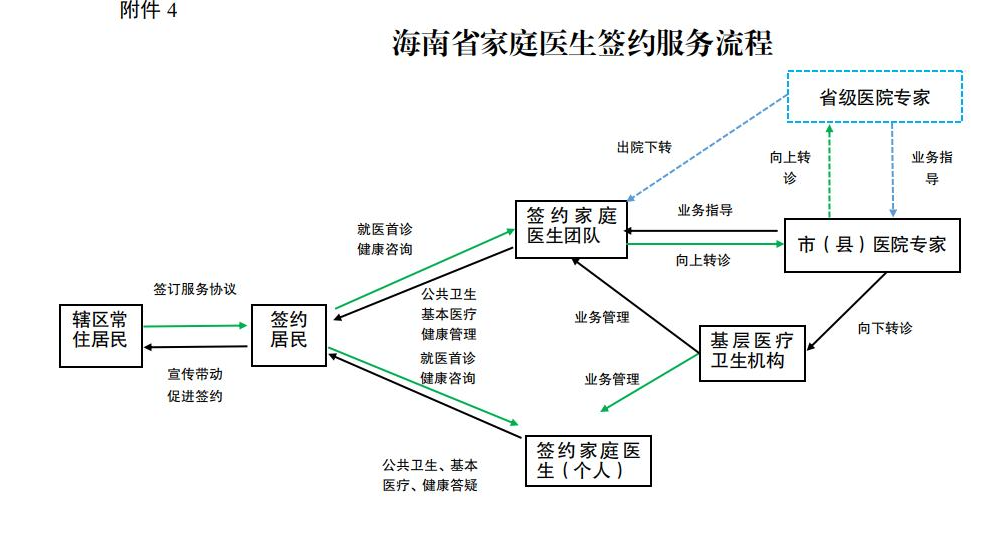
Signature of Party A (Signature): **\_\_\_\_\_\_\_\_\_\_** Date:

乙方签字 ：                年    月   日

Signature of Party B: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Date:

家庭医生团队（个人）负责人签字：        年   月   日

Signature of the family doctor or the person in charge of the family doctor team: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Date:

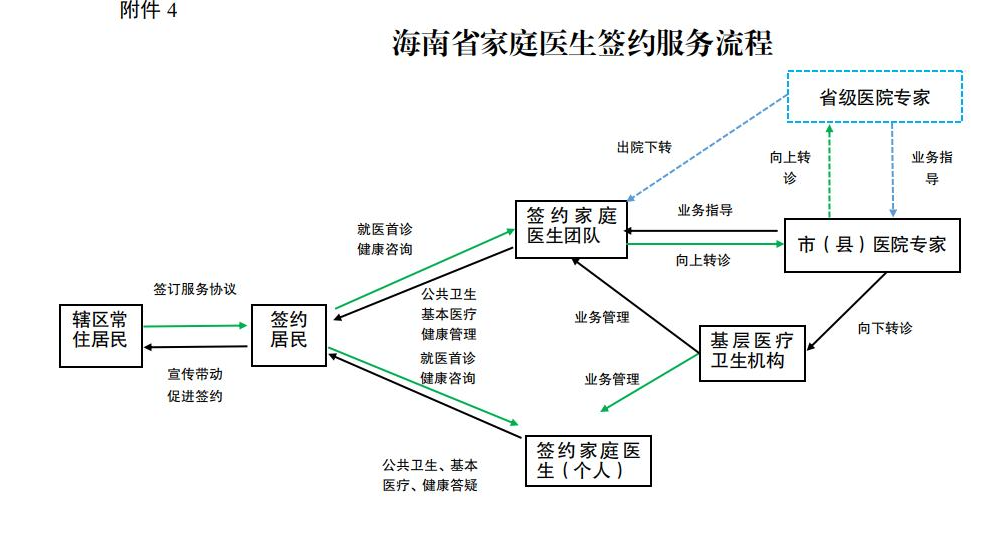


**附件4**

**Attachment 4**

**海南省家庭医生签约服务流程**

**Procedure for Family Doctor Contract Services in Hainan Province**



辖区常住居民

Permanent residents within the service area

签订服务协议

Sign the service agreement

宣传带动

促进签约

Publicize the program

to attract more contracting parties

签约居民

Covered residents

就医首诊

健康咨询

Initial diagnosis and health consultation

公共卫生 基本医疗 健康管理 就医首诊 健康咨询

Public health, basic medical care, and health management

Initial diagnosis and

health consultation

公共卫生、基本医疗、健康答疑

Public health, basic medical care, and health Q&A

签约家庭医生团队

Sign with family doctor teams

签约家庭医生（个人）

Sign with family doctors (individual)

出院下转

Discharge and referral to a lower-level hospital

业务指导

Business guidance

向上转诊

Referral to a higher-lever hospital

向上转诊

Referral to a higher-lever hospital

向下转诊

Referral to a lower-level hospital

市（县）医院专家

Experts from the city- or county-level hospital

基层医疗卫生机构

Community-level medical and health institutions

业务管理

Business management

业务管理

Business management

省级医院专家

Experts from the provincial-level hospital

业务指导

Business guidance

海南省卫生健康委员会办公室 2023年7月28日印发

The General Office of the Hainan Provincial Health Commission Issued on July 28, 2023