Proposals for thorough discussions with stakeholders in next three months

Abolish MPF "offsetting" progressively

- From a prospective date (Effective Date), abolish "offsetting" arrangement with no retrospective effect and put in place "grandfathering" arrangement
- Under the "grandfathering" arrangement, as and when an employer needs to pay severance payment (SP)/long service payment (LSP), he can use accrued benefits from his MPF contributions before the Effective Date and the returns derived therefrom to "offset" against SP/LSP payable for the employment period before the Effective Date. This part of SP/LSP will be calculated according to the existing statutory formula, i.e. – last month's wage before Effective Date x 2/3 (i.e. 66.7%) x years of service
- The SP/LSP payable for the employment period from the Effective Date cannot be "offset" by accrued benefits from MPF contributions, and has to be paid by employers out-of-pocket. This part of SP/LSP will be adjusted downwards and its formula will be revised as last month's wage x 1/2 (i.e. 50%) x years of service (i.e. a dismissed employee with two years of service can receive compensation equivalent to one month's wage)
- In the ten years from the Effective Date, the Government will provide subsidies for employers on a reimbursement basis, in order to share part of the SP/LSP expenditure, until the 11th year when the cost will be fully taken up by employers

Year after the Effective Date	Employers' net SP/LSP payment (as % of monthly wage)	Government subsidy reimbursed to employers (as % of monthly wage)	Total SP/LSP (as % of monthly wage)
1	25%	25%	50%
2	25%	25%	50%
3	30%	20%	50%
4	30%	20%	50%
5	35%	15%	50%
6	35%	15%	50%
7	40%	10%	50%
8	40%	10%	50%
9	45%	5%	50%
10	45%	5%	50%
11	50%	-	50%



Example Assuming that an employee who has been employed for three years before the Effective Date is dismissed three years after the Effective Date and that his monthly wage remains unchanged at \$15,000 throughout the six-year employment period. Putting aside the investment returns of MPF contributions –

MPF contributions during the 6-year employment period



\$15,000 x 5% x 12 months x 6 years = \$54,000





"Offsetting" not allowed for tributions of latter 3 years



SP/LSP for the 6-year employment period



by employer

Employee's benefit

Cost to employer

SP/LSP \$15,000 x 2/3 x 6 years = \$60,000

Of which, "offset" by MPF contributions first, with the remaining paid out-of-pocket









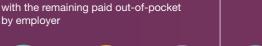
Of which, "offset" by MPF contributions first,

offsetting" under the

= \$30,000

First 3 years























































Government subsidy



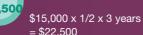
SP/LSP for the 6-year employment period = \$52,500



SP/LSP for latter 3 years

Employer's MPF contributions same at \$54,000

after Effective Date





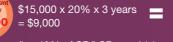
Latter 3 years

Employer reimbursed with (i.e. 20% of monthly wage in the 3rd year)



























Proposals requiring further study

• Develop a centralised electronic portal, eMPF,

• Explore the feasibility of a public annuity scheme, annuitise lump-sum assets into a steady stream of monthly income in order to manage longevity risk



Initial estimate on Government's financial commitment

Measures	Initial estimate on expenditure or income forgone for next 10 years (\$ billion)	Initial estimate on number of beneficiaries in the first year of implementation
Add a higher tier of allowance and relax the existing asset limits under OALA	75.57	Around 500 000 elderly persons
Lower the eligibility age for Elderly Health Care Voucher	11.86	Around 400 000 elderly persons
Automatic medical fee waiver for older and more needy OALA recipients in receiving public medical services	3.13	Around 140 000 elderly persons
Government subsidy during the transitional period of abolishing "offsetting"	6.22	
Maximum tax forgone related to making LSP provisions which are tax deductible	17.96	

Full Range of Support for Retirement Protection



Government's Response to the "Retirement Protection Forging Ahead" **Public Engagement Exercise**





each of our existing pillars and to the Old Age Living Allowance and medical services as soon as possible. As for phasing out the MPF "offsetting" arrangement, we will immediately engage stakeholders in thorough discussions with a view to reverting to the Executive Council end June this year. Besides, we will study etc. to help elderly persons manage their longevity risk.

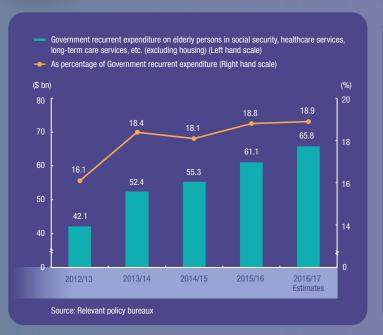
> **Chief Secretary** for Administration

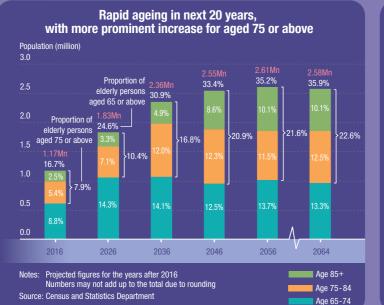


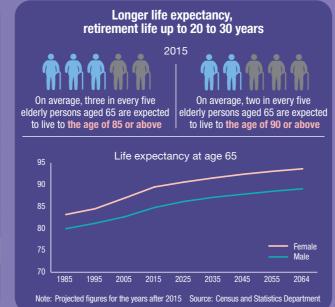
ef Secretary for Administration's Office

With elderly care as this Government's policy priority, past 4 years saw impressive growth of elderly recurrent expenditure by 56%

But to cope with the ageing challenge and allow our elderly to age without worry, the community should invest more in retirement protection

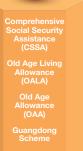






Continue adopting multi-pillar system with necessary enhancements; shared responsibility amongst individuals/families, employers and Government



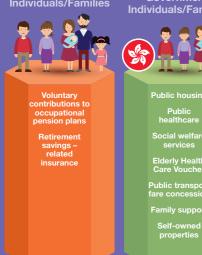


Pillar 0



Pillar 2





How elderly are protected under existing system?



Pillar 0: Multi-tiered social security system



 Depending on elderly's needs, financial situation. etc., monthly payment ranging from \$1,325 to over \$10,000 per person



Pillar 2: MPF mandatory contributions • 640 000 elderly persons have made used of

Covering 2.8 million employees and self-employed persons
 Net asset value of \$655.5 billion, including investment return of \$138.7 billion

Elderly Health Care Voucher

 970 000 passenger trips by elderly persons under the \$2 transport fare concession per day



Pillar 4

Pillar 3: MPF voluntary contributions

Pillar 4: Public services

- 570 000 elderly persons (over half of elderly population) living in public housing (another almost 400 000 elderly persons residing in self-owned private housing)
 Nearly 30 000 elderly persons living in subsidised residential homes, with another almost 30 000 receiving subsidised community care services
 830 000 elderly persons using services of

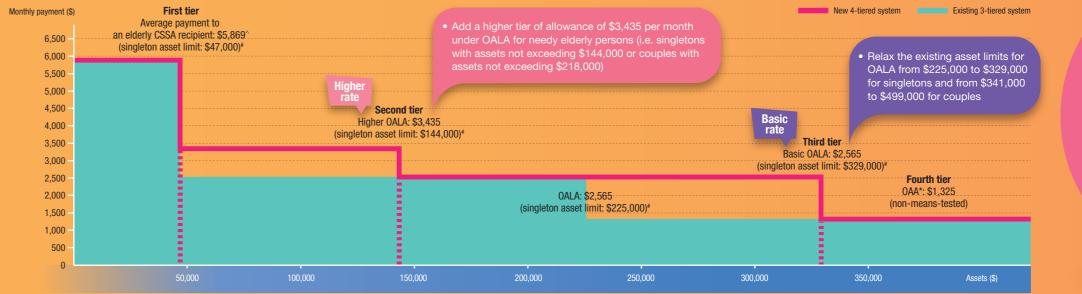
- Flderly Health Care Voucher

Building on this basis, we have devised a package of measures to strengthen each of the pillars ...

Proposals to be implemented subject to Legislative Council's funding approval



Enhancing the multi-tiered social security system to provide better protection for needy elderly





During first year of implementing the new 4-tiered system:

- benefit about 500 000 elderly persons (around 40% of elderly population); each person will receive an additional amount of \$10,000 to \$30,000 each year
- strengthen the social security pillar to cover about 910 000 elderly persons (around 74% of elderly population)



Notes: (#) There are different asset limits for families (CSSA) or couples (OALA)

n) Based on a broad-brush estimation, the average monthly CSSA payment for singleton recipients aged 60 or above in 2016 was \$5,869

(*) OAA is available for elderly persons aged 70 or above

Enhancing the CSSA

application arrangement

to make a declaration on whether they provide elderly persons who apply for CSSA on their own with financial support (the so-called "bad son statement") while maintaining the one-household rule under CSSA

> Grant medical fee waivers automaticall (i.e. aged 75 or above and with assets of no more than \$144,000 for singletons or \$218,000 for couples) who receive public

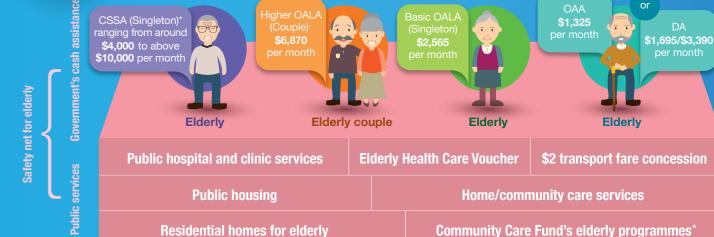


edical services for the elderly and

Lower the eligibility age

Voucher from 70 to 65

Elderly receiving cash allowance based on needs; most public services available for all elderly



iotes: (*) The payment for CSSA elderly recipients is determined by their respective recognised needs and includes standard rate, supplement(s), rental allowance and other special grant(s) ltems of special grant include: special diet allowance, medical items, emergency alarm system for elderly recipients, telephone charges, glasses, dental treatment, etc.

(~) Higher OALA for elderly singletons is \$3,435 per month
(^) Including allowance for carers of elderly persons, dental services for OALA recipients, dementia community support services for elderly, etc.