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Information accurate as at 14 March 2023





Cancer Drug List (FAOs for New and Existing Patients)

The Ministry of Health (MOH) has developed the Cancer Drug List (CDL) comprising clinically proven and more cost-effective cancer treatments. These changes were announced on 17 August 2021 and recapped in a press release on 2 September 2022.

The use of MediShield Life (MSHL), MediSave (MSV) and Integrated Shield Plans (IP) to reimburse outpatient cancer drug treatment will be allowed only for such treatments that are listed on the CDL.

While the CDL currently includes most cancer drug treatments approved by Health Sciences Authority (HSA), patients covered by IP with rider will have additional benefits which may include outpatient cancer drugs and treatment outside of the CDL. The claim amount varies and depends on the coverage of the IP with rider.

As of 1 September 2022, more than 90% of cancer drug treatments approved by HSA are on the CDL which is updated every few months by MOH to keep up with medical advancements and the latest clinical evidence.

1. How can I find out if I am covered under a medical insurance plan?

You are covered under MSHL if you are a Singaporean or Permanent Resident.

If you are covered under an IP, simply login to your CPF account using your SingPass to check the coverage and premium information for yourself and the dependant(s) you are paying premiums for.

- 1) Go to cpf.gov.sq
- 2) Login with SingPass
- 3) Scroll down to 'Dashboards' and click on 'Healthcare dashboard'
- 4) The information can be found under 'Health Insurance', 'Coverage and premium details'.

To find out more about your IP details, kindly contact your insurance provider.

2. What is the difference between IP and IP with rider?

IP with riders are optional add-ons designed to provide additional coverage on top of the IP.

These IP with riders offer additional coverage beyond the CDL. There are varying degrees of coverage tagged at different premiums to meet the diverse needs and budgets of policyholders. Some of the IP with riders may cover non-CDL treatment, among other benefits.

3. How do I know if I have an IP with rider?

To find out more about your policy details, please check with your insurance provider.

4. I am an existing patient with PCC and I have an IP. How will my coverage be affected with the introduction of the CDL?

Your coverage will depend on the renewal date of your IP.

- a) If the renewal date of your IP is between 1 January 2023 and 31 March 2023, you will only be affected by the CDL claim limits upon the renewal of your policy in 2024. This means that you are still covered by your existing IP claim benefits until your current policy is renewed in 2024.
- b) If the renewal date of your IP is between 1 April 2023 to 30 September 2023, you will qualify for transitional support if you have undergone at least one inpatient or outpatient cancer drug treatment between 1 January 2023 to 31 March 2023 with a valid claim. Your current policy will also continue to provide coverage for your treatment until 30 September 2023.
 - This transitional support designed by MOH allows sufficient time for affected patients to adjust to the new changes so that treatment will not be disrupted. This support will end on 30 September 2023.
- c) If the renewal date of your IP is between 1 October 2023 to 31 March 2024, you will continue to receive the current coverage until your policy renewal date.

If you have an IP with rider, you may wish to check with your insurance provider on your claim limits.

5. What are the revised outpatient cancer drug treatment and services claim limits from 1 April 2023?

With an IP, you can claim up to five times the MSHL claim limit of between \$200 and \$9,600 for one outpatient cancer drug treatment of the highest claim amount per month, and also up to five times the MSHL claim limit of up to \$3,600 per year, for outpatient cancer drug services.*

		Revised Coverage		lunlamantation
		Drug-indication on CDL	Drug-indication not on CDL	Implementation Date
MediShield Life (MSHL)	Drug	Limit of \$200 - \$9,600/month	N.A.	1 Sep 2022
	Services#	Limit of \$3,600/year		1 Apr 2023
MediSave (MSV)	Drug	Limit of \$600/month or \$1,200/month, depending on the MSHL claim limit for the drug-indication	N.A.	1 Sep 2022
	Services#	Limit of \$600/year (including post-treatment scans)		
IP (Private Insurer component)	Drug	Varies across insurers' plans, and will be set as a multiple of MSHL limits	Riders will cover drug-indications beyond the CDL. Coverage varies across insurers' plans	Upon policy purchase / renewal
	Services#	Varies across insurers' plans		from 1 Apr 2023 onwards

[#] Services refer to those that are part of the cancer drug treatment, including consultations, scans, lab investigations, chemotherapy preparation and administration, supportive care drugs and blood transfusions.

6. What happens if I am prescribed a non-CDL drug?

There are a few factors to look into if you are prescribed an outpatient cancer drug treatment that is not on the CDL.

If you have an IP with rider, you will have the benefit of additional coverage on top of your IP. You may be able to claim for your outpatient cancer drug treatment even if it is not on the CDL. The benefits and claim limits will depend on your policy and coverage. However, you will not be able to claim from MSV for the non-CDL drug.

If you have an IP without a rider and you are not on transitional support, you will not be able to claim from MSV and IP with effect from 1 April 2023. Under such circumstances, outpatient cancer treatment using drugs not listed on the CDL will have to be fully funded by you.

You should seek further clarification from your insurance provider with regard to your coverage.

You may wish to discuss with your doctor whether there are suitable alternatives that are on the CDL. If switching to a CDL treatment is unfeasible, there is support available to those facing difficulties affording treatment. You can approach your doctor to refer you to subsidised care in a Public Healthcare Institution (PHI), where financial assistance may be available. The PHI's medical team will review your treatment plan and provide financial counselling such as eligibility for subsidies. The decision on whether to proceed with the transfer rests on you.

7. How do I calculate the claim limits if more than one drug is used in my cancer treatment regimen?

If more than one cancer drug from the CDL is used in a month, you may claim up to the amount not exceeding the highest MSHL and MSV claim limits applicable for the individual drug.

For example, if you use both Drugs A (MSHL claim limit of \$2,000 & MSV withdrawal limit of \$600) and B (MSHL claim limit of \$1,000 & MSV withdrawal limit of \$600) in a month, you may claim no more than \$2,000 from MSHL and \$600 from MSV in that month.

If you have an IP, you may claim up to five times of your MSHL claim limit.

If you have an IP with rider, you may enjoy benefits on top of your IP, such as coverage on cancer drug treatment not on the CDL as well as additional coverage for the treatment on the CDL.

Please consult your insurance provider to find out more.

8. Will the CDL affect my inpatient cancer drug treatment?

No, inpatient cancer drug treatment are covered separately under the inpatient claim limits, together with other costs incurred during the inpatient stay.

9. How is the MSV pay-out affected by the CDL?

MSV is claimable only if:

- a) The drug is listed on the CDL, AND
- b) The drug is used according to the indication in the CDL

For cancer drug treatment, pay-out is capped at \$600 or \$1,200 per month depending on the MSHL claim limit for the drug-indication pairing.

For cancer drug services, pay-out is capped at \$600 per year which includes post-treatment scans.