



FOR IMMEDIATE REPORTING

MOH PUBLISHES FEE BENCHMARKS FOR PRIVATE ANAESTHETISTS' AND INPATIENT ATTENDANCE DOCTORS' FEES

The Ministry of Health (MOH) has published fee benchmarks for anaesthetists' fees and doctors' inpatient attendance fees for the private sector. These include recommended fee ranges for anaesthetists for about 190 procedures, as well as doctors' inpatient attendance fees for consultations and reviews of patients in different ward settings.

2 This is the second tranche of fee benchmarks, following the surgeon fee benchmarks for common surgical procedures published by MOH in 2018. The fee benchmarks will give patients and payers (e.g. insurers) more complete information on the reasonable range of doctors' fees for surgeries and hospital stays and enable better informed decisions. They will also serve as a guide for private sector healthcare providers in charging appropriately. The fee benchmarks were recommended by the Fee Benchmarks Advisory Committee (FBAC) and have been accepted in full by MOH on 23 December 2020.

3 The FBAC recommended anaesthetists' fee benchmarks as anaesthesia support is an integral component of surgery. In addition, the FBAC recommended doctors' inpatient attendance fee benchmarks to provide a reference for doctors' consultation fees during an inpatient stay.

4 In developing these new fee benchmarks, the FBAC reviewed data such as historical transacted fees and inflation rates. It also consulted with numerous stakeholders over ten sessions held in November and December 2020. These included about 200 specialists from the College of Anaesthesiologists, Singapore, representatives from the professional bodies, public and private sector medical professionals, as well as insurers. These help to ensure that the benchmarks reflect a fair range of professional fees that are representative of the risks and effort undertaken by doctors, while balancing other stakeholders' interests and perspectives.

Anaesthetist fee benchmarks

5 The FBAC set fee ranges to take into account the anaesthesia risks associated with the surgery and any added complexity arising from the patient's condition, independent of the surgical complexity of the surgery. The FBAC also sought to ensure that fees charged are fair and reasonable, and commensurate with the anaesthetist's risks and efforts.

6 Stakeholders, including patients, doctors and insurers, can refer to the recommended anaesthetist fee ranges for common procedures involving anaesthesia, in addition to the previously published surgeon fee benchmarks (see examples of common procedures in Table 1).

Table 1: Examples of new anaesthetist fee benchmarks

No.	Procedure	Surgeon Fee Benchmark [Existing]	Anaesthetist Fee Benchmark [New]	Historical Anaesthetist Fees (P25 to P75) ¹
1	Cataract surgery ²	\$2,550 to \$3,950	\$500 to \$800	\$400 to \$800
2	Appendicectomy (removal of the appendix) ³	\$4,200 to \$6,700	\$1,130 to \$1,800	\$1,500 to \$1,750
3	Total knee replacement (for one side) ⁴	\$8,250 to \$10,700	\$1,670 to \$2,400	\$2,140 to \$2,675

Doctors' inpatient attendance fee benchmarks

7 The inpatient attendance fee benchmarks cover doctors' professional consultation fees for patients in the General Ward, High Dependency Unit and Intensive Care Unit (ICU) cases (see Table 2). For the ICU, the fee benchmarks cover those who require lower intensity ICU care. The fee variations are wider for those who require higher intensity ICU care, and have been excluded from this tranche of benchmarks.

Table 2: Doctors' inpatient attendance fee benchmarks

Ward Type	Office Hours*
	per day
General Ward	\$200 to \$400
High Dependency Unit	\$250 to \$500
Intensive Care Unit (Lower intensity ICU cases)	\$300 to \$600

*Office hours may vary depending on the doctor's practice, but they are typically around 9- to 10-hour cycle on a weekday (e.g. 8am to 6pm) and 4- to 5- hour cycle on Saturday (e.g. 8am to 1pm). Additional charges may apply when doctors are called back for consultation after office hours.

8 The development of fee benchmarks for private healthcare providers is part of a larger strategy to ensure that healthcare costs remain affordable and our healthcare system sustainable. Dr Lim Yean Teng, Chairman of FBAC, said, "Analysis following the publication of the first set of fee benchmarks shows that the majority of doctors do charge within the fee ranges recommended for surgical procedures, which has resulted in moderation in the

¹ Based on actual transacted fees from 1 July 2018 to 30 June 2019 and include Goods and Services Tax (GST). Both surgeon and anaesthetist fee benchmarks exclude GST.

Reference Numbers and Descriptions from the Table of Surgical Procedures:

² SL808L Lens, Cataract, Extraction with Intra-ocular Lens Implant (Unilateral Left) (Table 4A); SL809L Lens, Cataract, Extraction with Intra-ocular Lens Implant (Unilateral Right) (Table 4A)

³ SF849A Appendix, Various Lesions, Appendicectomy Without Drainage, Open/Laparoscopic (Table 3B)

⁴ SB810K Knee, Various Lesions, Primary Total Joint Replacement (Unilateral), open/MIS/navigated (Table 6A)

growth of healthcare cost. For the fee benchmarks to be effective, the FBAC encourages all stakeholders to use them reasonably as a reference for fair charging and payment.”

9 The fee benchmarks can be found on the Ministry of Health’s website at www.moh.gov.sg/billsandfees.

New committee members appointed

10 MOH has appointed new members to the FBAC to advise on the review of published fee benchmarks and develop additional areas of fee benchmarks from 1 January 2021. Dr Lim Yean Teng will remain as the Chairman of the Committee till June 2021 when Dr Wee Siew Bock is appointed as Chairman. Dr Wee, a general surgeon, has been in private practice for 18 years and was formerly the head of the breast and endocrine surgical service at Tan Tock Seng Hospital, and subsequently the former chief of breast surgery at the National Cancer Centre Singapore.

11 The FBAC will continue to be a diverse group that represents the interests of various stakeholders, including representatives from the medical community and healthcare providers, payers from the public and private sectors, patient advocates and layman, and academia. Please see **Annex A** for the composition of the FBAC from January 2021.

12 MOH would like to express its deep appreciation to Chairman Dr Lim Yean Teng and the members of the FBAC for their invaluable time and contributions to the development of fee benchmarks in support of a sustainable healthcare system.

**MINISTRY OF HEALTH
29 DECEMBER 2020**

Annex A**Composition of Fee Benchmarks Advisory Committee 2021 – 2022**

Name	Designation
Dr Lim Yean Teng <i>[Chairman, Jan-Jun 2021]</i>	Senior Consultant & Cardiologist in private practice
Dr Wee Siew Bock <i>[Chairman-designate]</i>	Senior Consultant & General Surgeon in private practice
Prof Ang Chong Lye	Senior Advisor, SingHealth; Clinical Professor & Senior Consultant Ophthalmologist, Singapore National Eye Centre
Dr Ho Kok Sun	Council Member, Academy of Medicine Singapore; General Surgeon in private practice
Dr James Lam Kian Ming	Chief Executive Officer, Mount Alvernia Hospital
Dr Leow Yung Khee	Former Medical Director and Head of Group Insurance, Great Eastern Life
Dr Lim Hui Ling	Honorary Assistant Secretary, College of Family Physicians Singapore; Family Physician
Ms Ngiam Siew Ying	Deputy Secretary (Policy), Ministry of Health
Ms Nidhi Swarup	Founder & President, Crohn's & Colitis Society of Singapore
Mr Sallim Abdul Kadir	Board Member, Cerebral Palsy Alliance Singapore
Prof Teo Yik Ying	Dean, Saw Swee Hock School of Public Health, National University of Singapore
Dr Toh Choon Lai	Council Member, Singapore Medical Association; Orthopaedic Surgeon in private practice
Dr Yoong Siew Lee	Deputy Convenor, Health Insurance Subcommittee, Life Insurance Association; Chief Health Officer, NTUC Income
Mr Zainul Abidin Rasheed	Former Senior Minister of State (Foreign Affairs)