

## **JOINT MEDIA RELEASE**

# **LAUNCH OF EXTENDED PANEL AND UPDATE OF STANDARD PRE-AUTHORISATION FORM COMPLEMENT LARGER PANELS TO INCREASE PATIENT ACCESSIBILITY TO SPECIALISTS AND IMPROVE PATIENT CARE**

1. To enable greater patient choice and better continuity of care, the Life Insurance Association, Singapore (LIA Singapore) has implemented the Multilateral Healthcare Insurance Committee (MHIC)'s recommendations for the Extended Panel (EP) initiative. Starting from 1 April 2022, private Integrated Shield Plan (IP) insurers have gradually rolled out EP to give policyholders certain key panel benefits even when seeing specialists from other insurers' panels, as long as the specialists comply with the insurers' terms, including fees. In addition, IP insurers have generally expanded their panels beyond their committed size of at least 500 private specialists for each panel. They also enhanced their standardised pre-authorisation form to further streamline the process.
2. These improved patient access and care were made possible by the advice and suggestions by the Academy of Medicine, Singapore (AMS) and the Singapore Medical Association (SMA), who actively engaged the medical fraternity to help identify solutions to improve patient experience.

### **Launch of Extended Panel**

3. With the EP, patient's continuity of care is enhanced as policyholders with IP riders can benefit from at least the co-payment cap, as long as the specialists comply with the insurers' terms and fees, even if the specialist is not on the insurer's panel. Under this system of mutual panel recognition between the IP insurers, patients can potentially gain access to over 1,000 private specialists, who are on at least one insurer's panel, with greater assurance. It also gives a specialist, who is currently not on the patient's IP insurer main panel, an opportunity to establish a working relationship with the insurer.
4. IP insurers have progressively implemented EP since 1 April 2022 and policyholders will gain access to EP latest by end March 2023 (see [Annex A](#)). Implementation could be via one of the two modes – determined by the insurer – (a) pre-authorisation on a case-by-case basis or (b) contracting the specialist and applying this to all IP policyholders of the insurer. This means that depending on the patient's insurer, EP doctors can now choose to either activate pre-authorisation for their patients, even if they are not on the patient's insurer main panel, or apply to be contracted onto the EP panel, for insurers who are implementing EP via contract mode.

## Expansion of IP Insurers' Panel

5. Since November 2021, most IP insurers have actively been increasing the size of their main panel to meet the commitment of having at least 500 panel specialists. Policyholders who visit main panel specialists may enjoy additional benefits such as waiver of IP deductibles (where applicable), longer pre-hospitalisation and post-hospitalisation treatment, as well as higher policy year limits. As of 31 May 2022, the number of private specialists on IP panels had increased by up to 58%<sup>1</sup> since August 2021, and close to 84% of 1,287 active private specialists are currently on at least one IP panel (see [Annex B](#)).

## Enhanced Pre-authorisation Form

6. Medical panels and pre-authorisation are mechanisms that enable healthcare insurers to manage healthcare costs and premiums, while providing patients greater peace of mind regarding the coverage of their planned treatment. IP policyholders can request for pre-authorisation<sup>2</sup> through their treating specialist, who will then complete the pre-authorisation form and submit it to the patient's insurance company. The insurer will assess medical necessity and fee appropriateness to decide on the IP coverage and provide an assurance of payment prior to the planned treatment.

7. Before 30 April 2022, most IP insurers have already standardised the pre-authorisation form. Since 30 April 2022, they have further streamlined the form to reduce the administrative burden for specialists and clinic staff and the form has since been implemented by all IP insurers. The standardised pre-authorisation form can be found [here](#).

8. LIA Singapore, SMA and AMS will continue to work collaboratively with all stakeholders, through MHIC, to strengthen continuity, quality of care, and cost-effectiveness for patients, while keeping premiums affordable for policyholders.

**8 JULY 2022**

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### **About the Life Insurance Association, Singapore (LIA Singapore)**

Established in 1962, the Life Insurance Association, Singapore (LIA Singapore) is the not-for-profit trade body of life insurance product providers and life reinsurance providers based in Singapore and licensed by the Monetary Authority of Singapore (MAS).

#### *Vision and Mission*

The vision of member companies is to provide individuals with peace of mind and to promote a society where every person is prepared for life's changing cycles and for those situations unforeseen.

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<sup>1</sup> The highest percentage increase in the number of private specialists on an insurer's IP panel is 58%. See [Annex B](#) for further details.

<sup>2</sup> Policyholders from all insurance companies can apply for pre-authorisation, except for NTUC Income who provides electronic Letter of Guarantee (e-LOG) to their policyholders.

They are committed to being a progressive life insurance industry by collectively enhancing consumer understanding, promoting industry best practices, and through the association fostering a spirit of collaboration and mutual respect with government and business leaders.

*Values underpinning the association and its members*

**Unified** in our resolve to deliver innovative solutions where every individual's needs are best met.

**Professional** in the way we conduct ourselves and in the counsel we give.

**Ethical** in ensuring our policyholders' interests are managed with utmost integrity.

**Fair** in how we strive to provide favourable outcomes to both our policyholders and shareholders.

**Open & honest** in all that we do to build an environment of trust and transparency.

**Proactive** in the steps we take to give our people the skills and knowledge to provide sound solutions at all times.

**About the Singapore Medical Association (SMA)**

Formed in 1959, the Singapore Medical Association (SMA) is the national medical organisation representing the majority of medical practitioners in both the public and private sectors. SMA's slogan, 'For Doctors, For Patients', reflects our recognition that the doctor-patient relationship lies at the heart of any scientific revelation, technological innovation, policy decision and business practice that affects healthcare, as well as our commitment to protect this relationship.

**About the Academy of Medicine, Singapore (AMS)**

The Academy of Medicine, Singapore is a professional institution of medical and dental specialists devoted to advancing the art and science of medicine in Singapore through postgraduate specialist training, maintenance of high standards of competency and ethical integrity through continuous professional development. With the vision of being a leading institution for postgraduate medical education in the region, the Academy is now the largest specialists' organisation of over 4,200 members in 13 Colleges and 5 Chapters. [www.ams.edu.sg](http://www.ams.edu.sg)

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**EP Implementation by IP Insurers**

<b>Insurer</b>	<b>EP roll out date</b>	<b>When would existing policyholders start to enjoy EP benefits?</b>
<b><i>(A) Implementation by contract</i></b>		
<b>AXA</b>	1 April 2022	All existing policyholders from 1 April 2022
<b>Great Eastern Life</b>	1 April 2022	All existing policyholders from 1 April 2022
<b>NTUC Income</b>	1 April 2022	Upon contract renewal for existing policyholders, latest by 31 March 2023
<b><i>(B) Implementation by Pre-authorization</i></b>		
<b>AIA</b>	Existing benefit prior to 1 Apr 2022	
<b>Prudential</b>	7 June 2022	All existing policyholders from 7 June 2022
<b>Raffles Health Insurance</b>	1 June 2022	All existing policyholders from 1 June 2022
<b>Singlife with Aviva</b>	1 April 2022	All policies incepted or renewed from 1 April 2022

**IP Insurers' Panel Expansion and Commitment**

Insurer	Committed number of private specialists (by end 2021)	Number of private specialists (as of 31 August 2021) <i>- Announced in Nov 2021</i>	Number of private specialists (as of 31 May 2022)	% of private specialists on Insurer's panel**	% of private specialists on each Insurer's panel (including/supplemented by EP)^
<b>Insurers implementing EP via Contract</b>					
<b>AXA</b>	500	433	667* (as of 25 May)	52%	52%
<b>Great Eastern Life</b>	500-600	545 (as of 15 Sep)	749*	58%	58%
<b>NTUC Income</b>	450-500	459	602	47%	54%
<b>Insurers implementing EP via Pre-Authorisation</b>					
<b>AIA</b>	500+	506	616	48%	Up to 84% via a case-by-case pre-authorisation
<b>Prudential</b>	400-450	444 (as of 15 Sep)	554	43%	
<b>Raffles Health Insurance</b>	250	204 (as of 15 Sep)	191	15%	
<b>Singlife with Aviva</b>	500	468	523	41%	

\*AXA and GE do not differentiate between specialists on panel and EP.

\*\*There were 1,287 active practising patient-facing private specialists (excluding non-specialist, dentists/dental surgeons, and non-patient facing specialties, i.e. radiology, pathology, public health/occupational medicine, aviation medicine, laboratory medicine/biochemistry, nautical medicine, and nuclear medicine) as of May 2022.

^For insurers who are implementing EP via pre-authorisation, patients can access up to 84% of the 1,287 active practising patient-facing private specialists who are on at least one IP panel as of 31 May 2022. For insurers implementing via offering specialists contracts, specialists on the other panels have the option to apply.