

Frequently Asked Questions – Non-CDL Classification Framework

1. What is the Non-Cancer Drug List (Non-CDL) Classification Framework?

The Ministry of Health (MOH) has developed a Cancer Drug List (CDL) comprising clinically proven and more cost-effective cancer treatments. From 1 September 2022, MediShield Life (MSHL) and MediSave (MSV) will only cover treatments on the CDL. For all Integrated Shield Plans (IPs), the CDL will take effect for policies purchased or renewed from 1 April 2023.

To complement the introduction of the CDL, the Life Insurance Association, Singapore (LIA) has developed a 'Non-CDL Classification Framework' to provide greater clarity and facilitate a common understanding of treatments that are not on the CDL. Under the framework, cancer drug treatments are grouped according to regulatory approvals and clinical guidelines. IP insurers have used the Non-CDL Classification Framework to determine and explain the types of non-CDL treatments covered by their IP riders.

2. What is the purpose of the “Non-CDL Classification Framework”?

To support the coverage for Non-CDL treatments, the Life Insurance Association, Singapore (LIA Singapore) has developed the "Non-CDL Classification Framework". The Framework puts in place a standardised classification for different Non-CDL treatments that may be used by IP insurers for their IP riders to facilitate a common understanding by all stakeholders including policyholders and healthcare providers.

3. Was the relevant expertise included in the preparation of the Non-CDL Classification Framework?

The Non-CDL Classification Framework has been prepared with advice and support from the Chapter of Medical Oncologists, College of Physicians and Academy of Medicine, Singapore.

4. How do the IP insurers apply the Non-CDL Classification Framework to their IP riders?

The IP insurers will use the Non-CDL Classification Framework to determine the IP rider coverage. To facilitate product innovation, IP insurers have the flexibility to select the classes or types of non-CDL treatments under the Framework that they may cover in their IP riders.

5. Where can I get more information on the Non-CDL Classification Framework?

For more details on the Non-CDL Classification Framework, please visit [LIA website | Non-CDL Classification Framework](#).

6. How do I find out if my non-CDL treatment is covered by my IP rider?

Please check with your insurer or financial adviser representative on what classes of treatments are covered by your IP rider.

Thereafter, you may check with your oncologist whether your treatment falls under the classes of treatments that are covered by your IP rider. Your oncologist should be able to advise on the class of the non-CDL treatment based on the drug and indication.

The insurer will get the confirmation on the class of the non-CDL treatment from their medical advisers.

7. If a customer is on a drug treatment that is on the CDL, while at the same time receiving another drug treatment that is not on the CDL, how will the IP rider benefits apply?

Your IP rider may provide additional coverage for CDL and/or non-CDL drug treatments. Please check with your insurer or financial adviser representative for your coverage details.

8. Will the LIA Non-CDL Classification Framework change over time or be updated?

The definitions of the classification are unlikely to change since they are standardised based on HSA's registration of the treatment, its reference regulatory bodies and clinical guidelines by NCCN/ESMO* or equivalent.

* NCCN refers to National Comprehensive Cancer Network (<https://www.nccn.org/>) and ESMO refers to European Society for Medical Oncology (<https://www.esmo.org/>).

9. Will the classification of a non-CDL treatment change over time or be updated?

A treatment may change from class to class over time within the Non-CDL Classification Framework, for instance from class D to class B or A, since the regulatory approvals and/or internationally recognised cancer guidelines are constantly updated with advancements in the field of cancer research and management. A non-CDL treatment may also become a CDL treatment over time.

10. How do I find out if my cancer drug treatment is on the MOH Cancer Drug List (CDL)?

You may visit the [MOH Website | Cancer Drug List](#) to find out whether your cancer drug treatment, as defined by the drug and the corresponding clinical indication, is on the CDL. Alternatively, you may also check with your oncologist to determine whether your cancer drug treatment is on the CDL.

11. How does a policyholder check whether a cancer drug treatment is registered with the Health Sciences Authority (HSA)?

You may refer to [HSA Website | Register of Therapeutic Products](#) for more information.

12. How can I find out whether a cancer drug treatment (i.e. drug used for a specific indication) has been registered with HSA or approved by reference regulatory agencies?

You may consult your oncologist regarding the cancer drug that will be used for the treatment.

13. If a non-CDL drug is HSA registered, why is it not a CDL drug and what is the difference between a 'HSA registered drug' and 'HSA registered indication'?

A Health Science Authority (HSA) registered drug refers to a drug which is HSA registered and approved for use in Singapore for specified indication(s) and intended treatment(s). These specified indications are the 'HSA registered indication(s)'.

A HSA registered drug may be used for a clinical indication that the drug has not been registered for. In this instance, the drug is considered HSA registered, however, the indication is not HSA registered.

A HSA drug and its indications for use may be found within the MOH CDL. However, if only the drug is on the MOH CDL, but the indication for which it is used is not paired with the drug, the drug-indication pair is considered non-CDL.

14. Would there be any subsidies, MSHL limits and/or MSV withdrawal limits applicable for non-CDL drug treatments?

Please refer to the [MOH Website | Cancer Drug List](#) and see FAQ – “If my treatment is not on the Cancer Drug List, will I still be covered?” for more details.

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