Country Report
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58th SMA Council
32nd CMAAO General Assembly and 53rd Council Meeting, 13 - 15 September 2017, Tokyo, Japan
# 58th SMA Council (2017/2018)

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<tr>
<td>President</td>
<td>Dr Wong Tien Hua</td>
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<td>1st Vice President</td>
<td>Dr Tan Tze Lee</td>
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<td>2nd Vice President</td>
<td>Adj Prof Tan Sze Wee</td>
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<td>Honorary Secretary</td>
<td>Dr Lim Kheng Choon</td>
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<td>Assistant Honorary Secretary</td>
<td>Dr Anantham Devanand</td>
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<td>Honorary Treasurer</td>
<td>Dr Loo Kai Guo Benny</td>
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<td>Assistant Honorary Treasurer</td>
<td>Dr Ng Chee Kwan</td>
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<td>Members</td>
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<td>Dr Tammy Chan</td>
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<td>A/Prof Chin Jing Jih</td>
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<td>Dr Chong Yeh Woei</td>
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<td>Dr Wong Chiang Yin</td>
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<td>Dr Bertha Woon Yng Yng</td>
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Membership
Membership 2016

• Our members are the heart of our work.
• Teaming up with members, for members
  • conversation with medical student leaders from 3 medical schools to build stronger bonds among student bodies.
  • Quarterly meetings with DIT committee - avenue for information sharing and a macro view of the current medical training across the three sponsoring institutes.
• Provide value
  • Providing tangible and exclusive discounts to enhance members’ professional and personal lives
  • Partnering with organisations to secure attractive deals for products relevant to member’s professional work (stethoscope trade-in exercise)
SMA and Medical Student Leaders
Medical Schools Introduction
Education and Training
SMA Centre for Medical Ethics and Professionalism (SMA CMEP)

- Medical Ethics, Professionalism and Health Law Course
  - 2½ day mandatory course for exit certification for advanced specialist trainees, family medicine trainees and residents
    - Increase from 5 to 6 sessions per year
- Introductory Course in Health Law
  - Series of seminars that covered the basic concept of health law
- Core Concepts in Medical Professionalism
  - Train-the-trainers programme that allow participants to gain a deeper understanding of important concepts in professionalism.
Education and Training

• Medical Expert Witness Training
  • A joint collaboration with SMA(CMEP), AMS, LSS, SAL and the State Courts
  • 2 day course consisting of 1 day seminar, medical report writing and 1 day roleplay in court
  • Training Faculty consists of doctors, lawyers and judges
Education and Training

• **SMA Clinic Assistant Train and Place Programme**
  • created to train predominantly unemployed members of the public who are interested in working in healthcare clinics.
  • 4 day skills course - 90% government funded
  • Job placement portal for SMA members
Education and Training

• SMA Lecture 2016
  • Prof Sir Sabaratnam Arulkumaran (Professor Emeritus of Obstetrics and Gynaecology at St George’s, University of London) delivered the lecture on Health and Human Rights.
Publications
Publications - Singapore Medical Journal (SMJ)

- Highlights of 2016
  - 446 manuscripts received from 27 countries
  - Manuscript acceptance at around 40%
  - 146 articles were published
  - 12,167 submissions were received for the 24 monthly CME questionnaires
  - SMJ website was upgraded in July 2016 to enhance mobile responsiveness, search functions and web navigation.
SMA Charity Fund
SMA Charity Fund

• Highlights in 2016
• Empowering a dream - Providing financial assistance
  • An increase of 26% of financial bursaries
• Providing equal learning opportunities - Supporting learning exposure
  • SMACF provides partial financial grants for needy medical students pursuing medical degree in Singapore.
  • This grant aims to provide students the opportunity to gain international exposure and experience in the field of medicine through involvement in international medical conferences or approved elective programmes.
SMA Charity Fund

• Nurturing a caring profession - Recognising volunteerism
  • 700 volunteers came together for local community projects, from public health screening to working with palliative patients and migrant workers, clocking more than 5,000 hours altogether.

• Acknowledging the builders of the future medical profession - Recognising mentorship
  • The Wong Hock Boon SMACF Outstanding Mentor Award was started in 2012 to recognise the works of mentors and to let medical students show their gratitude to their mentors for their guidance.
  • In 2016, a total of ten awards were given out.
Student volunteers - Public Health Screening
Freshmen Orientation Camp
Community Involvement Program

The intent of the program is to provide the M1s a glimpse into their future career, and more importantly, to educate them that medicine is a profession targeted at serving the community with not just the skills but also the heart to serve.
SMA Charity Fund

• Future plans
  • Ensure financial resources go to the targeted recipients
  • Build a financially stable model by FY2020
  • Promote good mentoring relationships
  • Provide sponsorship for medical conferences and elective postings
  • Develop a donor management plan
  • Encourage volunteerism amongst the profession
SMA’s Key Engagement in 2016
Representative and Advocacy

• Singapore Medical Council (SMC) Ethical Code and Ethical Guidelines (ECEG)
  • New updated ECEG launched in 2016
  • Several of SMA’s recommendations were taken into consideration, including our feedback that the ECEG should be made more concise.

• Managed Care
  • Managed Care survey publish in May 2016.

• Medical Indemnity
  • Changes in landscape with MPS (UK) losing market share of public sector doctors
  • Members were concerned about their indemnity coverage if they leave the public sector. SMA directed the concerns to MOHH and met separately with MPS and NTUC Income to surface member feedback to gain a better understanding of the issues faced by indemnity providers.
Representation and Advocacy

• Ministry of Health
  • Regular meetings and contact on several issues, including medical manpower, SMC ECEG and managed care.

• Health Products Act (HPA)
  • Met up with HSA to discuss the transition of regulatory control of pharmaceutical products in the Medicines Act to the control of therapeutic products in the HPA and highlighted various concerns.

• Health Insurance Task Force (HITF)
  • HITF was formed in Feb 2016 to recommend measures to bring about a moderation in the escalation of health insurance premiums in Singapore.
Representation and Advocacy

• Doctors-in-Training (DIT)
  • SMA’s DIT committee highlighted to the Advisory Council on Community Relations in Defence that some trainees were unable to complete their residency training with the stipulated time frame, as they were fulfilling their National Service obligations; thus completion of traineeship may be delayed, potentially jeopardizing their career prospects.
Media Exposure
Doctors in uproar over third party administrators’ charges

Specialists say their margins are being squeezed by some TPAs charging doctors excessive cut of the total bill

By Claire Huang
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SOME private-sector doctors are up in arms over the way some managed care companies in Singapore operate, in particular their fee practices; and the uproar has intensified in recent weeks with the Singapore Medical Association (SMA) leading the charge.

In its August newsletter dedicated to managed care, SMA not only called for transparency on such charges but also sounded warnings on the pitfalls of joining the system, stopping short of calling for an outright boycott.

The outcry comes as doctors in the private sector face mounting pressure from greater competition and higher operating costs, which have in turn lowered profit margins compared to earlier years.

Some managed care players known as third party administrators (TPAs) have been blamed for shrinking the profit margins even further by charging doctors under their schemes administrative fees calculated as a percentage of the doctor’s total bill.

Typically, TPAs help their clients manage costs and offer a panel of doctors and specialists to companies and insurers, which would then pay them an admin fee calculated as a percentage of the medical bill (refer to table and flowcharts).

In return for this large pool of patients, those on the panel typically pay TPAs an admin fee that is between 8 and 25 per cent of each patient’s total bill.

SMA president Wong Tien Hua wrote in the newsletter that the issue becomes more complex with specialists coming into the picture.

“TPAs offer specialists a large referral pool of patients from their panel general practitioners (GPs), who in turn are obligated to refer to specialists under the same scheme.

Continued on Page 6

Medical concierges under fire for fee practices, Page 6
SMA: Profit guarantees prohibited under medical ethics guidelines

By Claire Huang huangydshp.com.sg @ClaireHuangBT

Singapore Medical Group (SMG) is relooking the specific term in its proposed acquisition of two local paediatric clinics worth $223.5 million. SMG announced last Thursday that it would purchase Children’s Clinic in Toa Payoh and the Kids Clinic in Bishan for $223.5 million as part of wider plans to complement its growing obstetrics and gynaecology (OGG) arm.

The multi-disciplinary specialist healthcare provider had then said the proposed deal provided clear earnings visibility with a five-year minimum $23 million per year profit guarantee. And based on this profit guarantee, the proposed acquisition carried an implied price-to-earnings ratio of 11.

In reply to queries from The Business Times, SMA said its position on profit guarantee is especially pertinent now because the practice was specifically prohibited in the Singapore Medical Council’s (SMC) ethical code and guidelines handbook issued last year.

A profit guarantee structured into a corporate deal is something that is common for public-listed firms and provides assurance to shareholders and investors.

But SMA president Wong Tien Huat told BT that “profit guarantees are frowned upon in healthcare services”.

He said the SMC in 1998 issued a resolution stating that the financial imperative imposed by profit guarantees is incompatible with the SMC’s Physician pledge and other ethical principles. He added that the SMC was in full agreement with SMA then.

Dr Wong said the association hopes all medical professionals involved in buying and selling of medical practices will adhere strictly to the handbook of medical ethics currently being used. “SMC also hopes that companies will exercise responsibility to their stakeholders by not imposing terms on doctors that will put them at risk of contravening SMC ethical standards and requirements.”

SMG said in a separate Singapore Exchange filing that it is committed to adhering to the highest standard of best practices and ethical guidelines governing the medical profession and “is undertaking a review of its current and future acquisitions strategies”.

The statement came after the management’s attention was drawn to SMC’s handbook “in the recent course of work, through dialogues with the professional governing body and professional doctors”, the group said.

It noted that the 2016 guidelines state that “doctors must not let business or financial considerations influence the objectivity of their clinical judgment in the management of patients”.

When contacted, SMG executive director and chief executive Beng Teck Liang stressed that the proposed acquisition of the two clinics is only at the framework agreement stage and that no definitive agreement has been signed.

“The deal is not done yet. We are going to do our utmost to not step on toes,” said Dr Beng, who added, “Give us some time to get it (the review) through.”

The subject of profit guarantees by doctors is not new. Questions on this topic were tabled in Parliament by then Member of Parliament (MP) Choo Wee Khiang on April 20, 1998.

He wanted to know how profit guarantees would affect the standard of medical practice in Singapore.

The questions arose after Asiamount signed a deal to acquire the majority stakes in the businesses of four specialists – general surgeon Susan Lim, cardiologist Leslie Lam, ophthalmologist Low Chee Hong and cardio-thoracic surgeon Ong Kim Kiat – in February 1998. In return, the doctors guaranteed Asiamount a $4.36 million share of the profits annually for five years.

Then health minister Yeo Cheow Tong pointed out in Parliament that while doctors giving profit guarantees are not in breach of existing laws, such practice would “put them at greater risk of unethical behaviour as they are working under purely financial imperatives imposed by a third party.”
Task force urges steps to rein in costs amid escalation of claims

It proposes introduction of medical fee guidelines, use of panel of “preferred healthcare providers”, among others,

By Genevieve Cus
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Singapore

THST Health Insurance Task Force (HITF) on Thursday issued a set of recommendations aimed at reducing the escalation claims rates of Integrated Shield Plans (ISP). The escalation of claims raises the specter of steep premium hikes which may become unsustainable especially as policyholders age and cease to work. Eventually, ISPs themselves may become unsustainable.

Data from the Life Insurance Association Singapore (LIA) shows a sharp deterioration of underlying profit margins between 2011 and 2013.

It’s paid out a total of $548 million in claims in 2014. Insurers have undertaken not to raise premiums for 12 months following the introduction of the Integrated Shield Plan in November 2015. This suggests that policyholders should brace themselves for premium hikes before the year-end.

Ma Hu said in a statement issued by the Ministry of Health (MOH) on Thursday welcomed the HITF report as “timely and commendable”. He said stakeholders such as insurers, healthcare service providers, policyholders and patients must work together to the sustainability of the healthcare system.

Ma Hu said: “In the long term, this will result in improved efficiencies, and cost savings within the healthcare ecosystem in a way that is sustainable for both insurers and the public.”

The HITF task force comprises 11 members from bodies such as LIA, the Singapore Medical Association and the Consumers’ Association of Singapore. It is chaired by Min of Health Regulatory Professors.

The HITF report recommends that the Ministry of Health (MOH) should work with Singapore Medical Council (SMC) and LIA to refine the existing process, while keeping the impact on affected policyholders to a minimum.

On the use of preferred healthcare provider panels, HITF noted that such panels are a common practice among insurers providing employee benefits insurance. It said if insurers choose not to allow choices of panel to policyholders, they risk retaliating against policyholders who choose other panels that are not restricted to the panel.

The Competition Commission of Singapore (CCS) has earlier said that a medical fee guideline is not illegal if it is compiled from actual bills of patients. In response to queries, CCS said it welcomed and supports MOH’s efforts to make available historical price for common procedures and conditions.

“CCS will continue to work with MOH on the HITF recommendations, particularly on ways to further improve the transparency in the market,” the Commission said. On the process to weed out inappropriate medical treatment, HITF said insurers are well-placed to detect potential anomalies in medical treatment through their review of claims.

Insurers can refer cases to the Singapore Medical Council (SMC) should there be concerns of overcharging and inappropriate medical intervention amounting to professional misconduct.

It is thus critical for insurers to be aware and utilise this process when necessary,” HITF said. It said MOH should work with SMC and LIA to refine the existing process, while keeping the impact on affected policyholders to a minimum.
Media Exposure

• 11 JANUARY 2016
  • Mediation to play bigger role in medical lawsuits: CJ Menon [TODAY]

• 4 JUNE 2016
  • Government to review ‘Advance Medical Directive’ policies [Channel 8 TV News]

• 10 JUNE 2016
  • Doctors cry foul over ‘unfair’ practice of third-party agents [TODAY]

• 25 JULY 2016
  • Taking care of cancer patients ‘more stressful than in West’ [The Straits Times]

• 14-15 SEPTEMBER 2016
  • Revision of the SMC Ethical Code and Ethical Guidelines [Channel NewsAsia, The Business Times, TODAY]
Media Exposure

- 6 OCTOBER 2016
  - Private surgeons’ fees to be publicised [TODAY]
- 10 OCTOBER 2016
  - IRAS recovers S$1.8b from tax cheats in past five years [TODAY]
- 13 OCTOBER 2016
  - The Health Insurance Task Force [The Business Times, The Straits Times]
- 4 NOVEMBER 2016
  - Medicine, technology to the fore at Singapore Medical Week next year [TODAY, Lianhe Zaobao]
- 13-14 DECEMBER 2016
  - Doctors barred from paying percentage of fees to 3rd-party agents [TODAY, Channel NewsAsia, Channel 8 TV News, CNA Singapore Tonight]
Thank You