

List of Outpatient Treatments under MediSave

Type of Outpatient Treatment	Withdrawal Limit
<p>Renal Dialysis</p> <ol style="list-style-type: none"> 1. Haemodialysis received at any approved centre; 2. Haemodialysis received at the patient's home; 3. Continuous ambulatory peritoneal dialysis at the patient's home; 4. Automated Peritoneal Dialysis at the patient's home 5. Intermittent Peritoneal Dialysis received in outpatient setting in approved medical institutions on or after 15 March 2021 <p>MediSave use for renal dialysis is only allowed from the patient's own MediSave Account (MA).</p> <p>Note: Only the patient's MediSave can be used. If the patient is aged 21 years old or below, the parents' MediSave may be used.</p> <p>As a concession, members may apply to use their MediSave savings for an approved dependant's renal dialysis subject to meeting eligibility conditions and will be assessed on a case-by-case basis. Approved dependants refer to:</p> <ol style="list-style-type: none"> 1. spouse 2. parent 3. grandparent, 4. sibling, or 5. child aged above 21 years old. <p>They can be of any nationality, except for grandparents and siblings who must be Singapore Citizens or Permanent Residents (SC/PR).</p> <p>To be eligible to use your MediSave savings for your approved dependant's renal dialysis, you must also:</p> <ol style="list-style-type: none"> i) be an active MediSave contributor, ii) have sufficient MediSave balances to support your own healthcare needs, before it is used for your approved dependant's renal dialysis expenses. <p>You may refer to the link for more details on the application process.</p>	<p>\$450 per month per patient</p>
<p>Chemotherapy*</p>	<p>\$1,200 per month per patient</p>

Radiotherapy*: - External radiotherapy (except Hemi-body Radiotherapy)	\$80 per treatment
Hemi-body Radiotherapy - Brachytherapy with external radiotherapy - Brachytherapy without external radiotherapy - Stereotactic radiotherapy	\$80 per treatment \$360 per treatment \$360 per treatment \$2,800 per treatment
Assisted Conception Procedure (for female patients only) Note: Only the MediSave of the patient and her spouse can be used.	The withdrawal limits are 1st withdrawal - \$6,000 2nd withdrawal - \$5,000 3rd and subsequent withdrawal - \$4,000 Up to \$15,000 per patient per lifetime
Approved Drugs for HIV/AIDS Note: Only the patient's MediSave can be used. If the patient is aged 21 years old or below, the MediSave of the patient's parents may be used.	\$550 per month per patient
Hyperbaric Oxygen Therapy	\$100 per treatment
Desferrioxamine Drug and Blood Transfusion for Thalassaemia*	\$550 per month
Intravenous Antibiotic Infusion* at: (1) KK Women's and Children's Hospital (2) National University Hospital (3) Singapore General Hospital (4) Tan Tock Seng Hospital	\$600 per weekly cycle, up to a maximum of \$2,400 per year.
Bone Marrow Transplant at: (1) National University Hospital (2) Singapore General Hospital	\$2,800 per patient per year
Rental of Devices for Long-Term Oxygen Therapy and Infant Continuous Positive Airway Pressure Therapy*	\$150 per month
Long-term Parenteral Nutrition	\$200 per patient per month
MRI, CT scans and diagnostics** related to neoplasm treatment **Other diagnostics used in cancer treatments include blood tests, mammographs/ mammogram, ultrasounds, X-rays and PET which may be performed for pre-treatment, evaluation during treatment and post-treatment follow-up.	\$600 per patient per year

<p>Outpatient Scans# # Excludes scans already covered under MediSave limits for specific treatments (e.g. cancer, pre-natal check-ups and screening mammograms) as existing withdrawal limits apply</p>	<p>\$300 per patient per year</p>
<p>Home Palliative Care/Day Hospice Care</p>	<p>\$2,500 per patient's lifetime</p> <p>Both Home Palliative Care and Day Hospice Care share the same lifetime limit.</p> <p>The lifetime limit will not apply if the day hospice or adult home palliative patient is diagnosed with terminal cancer or end stage organ failure and the medical bill is paid using the patient's own MediSave)</p>
<p><u>Chronic Diseases</u></p> <ol style="list-style-type: none"> 1. Diabetes (including pre-diabetes from June 2018) 2. Hypertension 3. Lipid disorders 4. Stroke 5. Asthma 6. Chronic Obstructive Pulmonary Disease (COPD) 7. Schizophrenia 8. Major Depression 9. Dementia 10. Bipolar Disorder 11. Osteoarthritis 12. Benign Prostatic Hyperplasia 13. Anxiety 14. Parkinson's Disease 15. Nephrosis/Nephritis 16. Epilepsy 17. Osteoporosis 18. Psoriasis 19. Rheumatoid Arthritis 20. Ischaemic heart disease (from June 2018) <p><u>Approved Vaccinations</u> <i>Under the National Childhood Immunisation Schedule</i></p> <ol style="list-style-type: none"> 1. Hepatitis B 2. Human Papillomavirus (HPV) (for female patients aged 9 to 26 years) 3. Pneumococcal (PCV) (for patients below the age of five years old) 4. 5-in-1 combination vaccination covering Diphtheria, Pertussis, Tetanus, Haemophilus Influenzae type b, Inactivated Poliomyelitis 	<p>\$700 per patient per year (for patients with complex chronic conditions)</p> <p>or</p> <p>\$500 per patient per year (for non-complex chronic patients)</p>

<p>5. 6-in-1 combination vaccination covering Diphtheria, Pertussis, Tetanus, Haemophilus Influenzae type b, Inactivated Poliomyelitis and Hepatitis B vaccinations</p> <p>6. Diphtheria, tetanus and acellular pertussis vaccine (Paediatric) (DTaP)</p> <p>7. Tetanus, reduced diphtheria and acellular pertussis vaccine (Tdap)</p> <p>8. Bacillus Calmette-Guerin (BCG)</p> <p>9. Measles, Mumps and Rubella (MMR)</p> <p>10. Oral Poliomyelitis vaccine (OPV)</p> <p>11. Inactivated Poliomyelitis vaccine (IPV)</p> <p>12. Haemophilus influenzae type b (Hib)</p> <p>13. Influenza (for patients in recommended risk groups^)</p> <p>14. Pneumococcal (PCV13/PPSV23) (for patients in recommended risk groups^)</p> <p>15. Varicella</p> <p>16. Measles, mumps, rubella, varicella vaccine (MMRV)</p> <p>17. Tetanus, reduced diphtheria and acellular pertussis, Inactivated poliovirus vaccine (Tdap- IPV)</p> <p><i>Under the National Adult Immunisation Schedule (for target populations)</i></p> <p>1. Hepatitis B</p> <p>2. Human Papillomavirus (HPV) (for female patients between the ages of 9 to 26)</p> <p>3. Tetanus, reduced diphtheria and acellular pertussis vaccine (Tdap) (for pregnant women only)</p> <p>4. Measles, Mumps and Rubella (MMR)</p> <p>5. Influenza (for patients in recommended risk groups^)</p> <p>6. Pneumococcal (PCV13/ PPSV23) (for patients in recommended risk groups^)</p> <p>7. Varicella</p> <p>^Patients are advised to discuss their vaccination needs and suitability to receive the recommended vaccines with their doctor.</p> <p><u>Approved Health Screening</u></p> <p>1. Mammogram (for female patients aged 50 and above)</p> <p><u>For patients below the age of one year old</u></p> <p>2. Hearing test</p> <p>3. G6P deficiency screening</p> <p>4. Metabolic screening</p> <p>5. Thyroid function test</p>	
<p>Outpatient Flexi-MediSave</p>	<p>\$200 per patient per year</p>

	<p>Only the patient's MediSave or the patient's spouse's MediSave may be used.</p> <p><i>Note: Both the patient and the spouse need to be 60 years old or older.</i></p>
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*You may use your MediSave to pay for your other dependants' (e.g. aunts') outpatient treatments incurred at public hospitals/ medical clinics, subject to eligibility conditions. For example, the patient must be a dependant of the MediSave Account (MA) holder who is still actively making contributions, and the patient has exhausted his own and his spouse, children, parents, grandchildren and siblings' MAs. The same prevailing withdrawal limits apply.

If you wish to find out if you are eligible to use your MediSave to pay for your other dependants' subsidised approved outpatient treatments at a public hospital or government polyclinics, you need to approach the staff at the hospital's Business Office or the polyclinic.

Information is correct as at 30 March 2021