

How to Use the Fee Benchmarks

Hospitals and doctors are each required to provide financial counselling to patients prior to surgery, to inform them of the estimated cost of the hospitalisation episode. During the financial counselling process, the surgery's Table of Surgical Procedure (TOSP) code is provided. Using cataract surgery as an example:

Table 1: Cataract surgery

| TOSP Code | TOSP Description | Table Number |
|-----------------|---|--------------|
| SL808L / SL809L | Lens, Cataract, Extraction with Intra-Ocular Lens Implant (Unilateral Left / Right) | 4A |

- a) Hospitals and doctors should reference their respective areas of fee benchmarks (if available) during the financial counselling process. Patients may also visit www.moh.gov.sg/billsandfees to search for the fee benchmarks. As cataract surgery (as a day surgery admission) is a common procedure, fee benchmarks are thus available for both hospital¹ and doctors' fees (see [Table 2](#) below).
- i. Each fee benchmark is a range, with a Lower Bound and an Upper Bound. The Lower Bound would apply for simple and routine cases, and the Upper Bound for more complex cases. Doctors and hospitals who charge above the fee benchmarks should inform and justify the higher fees to patients and insurers, where relevant and possible, prior to the surgery.
 - ii. The hospital fee benchmarks include components that could be charged by either the hospital or the doctor. Some doctors may charge the implants for cataract, but bill through the hospital. Hence, if patients and payers have questions on the cost of the lens implant, they should enquire with the doctor directly. Patients can clarify with their doctor or hospital if in doubt over who the charging party is.

Table 2: Fee Benchmarks for Cataract Surgery

| | Lower Bound | Upper Bound |
|---|-------------|-------------|
| Hospital Fee Benchmarks Recommended fee range for all non-doctor professional fee components of the bill. Includes items that could be charged by either the hospital or the doctor (e.g., implant). | \$2,600 | \$4,700 |
| Surgeon Fee Benchmarks Recommended fee range for the surgeon's professional fee for the surgery. Where applicable, the fee range would include: <ol style="list-style-type: none"> (i) Fees of any surgical assistants (doctors or nurses) used during surgery | \$2,900 | \$4,400 |

¹ Hospital fee benchmarks for cataract surgery apply only for Day Surgery admissions, i.e., an admission that does not require an overnight stay.

| | Lower Bound | Upper Bound |
|---|--------------------|--------------------|
| (ii) Sedation fees if administered by the surgeon ² | | |
| Anaesthetist Fee Benchmarks Recommended fee range for the anaesthetist's professional fee for the surgery. | \$550 | \$900 |
| Doctors' Inpatient Attendance Fee Benchmarks Recommended fee range for medical consultations and reviews provided during inpatient admissions, on a per-day basis. Note: These fees are applicable only if there is an inpatient admission, which occurs for the minority of cataract cases. | \$210 | \$420 |

- b) During the financial counselling process, if there are any components of the bill that exceed the fee benchmarks, patients may wish to find out more from the doctor and hospital.
- c) After surgery, if the final bill is more than what was counselled, patients could request an itemised bill, and seek clarification with the doctor and hospital, to understand which fee components may have caused a bigger-than-expected bill.

² The anaesthetist fee benchmarks would apply if sedation was administered by an anaesthetist.