



MINISTRY OF HEALTH
SINGAPORE

Madam Shanmuga's hospital bill

Total charges	\$41,868.20
Length of stay	28 days (including 6 days in ICU)
Government subsidy	\$35,081.31
Total bill after subsidy	\$6,786.89
MediShield paid	\$6,024.78
Amount of Medisave claimed	\$748.81
Amount paid in cash	\$13.30

Percentage paid by patient in cash: 0.2%

A big helping hand



With Government subsidies, Medisave and MediShield, health attendant Tamil Maney pays only \$13.30 in cash for her mother-in-law's \$42,000 hospital bill

When Madam Shanmuga Thayee (below, left) needed a heart bypass operation, she wept. Not because she was afraid to die, but because of the fear of a large hospital bill.

Madam Shanmuga was diabetic, had high blood pressure, kidney failure and breathing difficulties. Her artery was also 75 per cent blocked.

The doctor had told her the odds of survival were 50-50.

Worried over the hospital bills, she was reluctant to undergo surgery for her condition.

The 61-year-old housewife told her son, who was stricken with cancer, and

her daughter-in-law, then the sole breadwinner, that she would rather die than burden them with a hefty hospital bill.

But daughter-in-law Tamil Maney, 42, who has a monthly take-home pay of \$600 working as a health attendant in a hospital, convinced Madam Shanmuga to go for the surgery.

"I said her life comes first. We may not have money now, but there are solutions," shared Madam Maney. Medical social workers also assured the family that help would be forthcoming.

After the surgery, Madam Shanmuga spent a total of 28 days in a Class C ward between February and March last year, including six days in the intensive care unit.

Her total bill hit \$41,868.

However, generous subsidies in the Class C ward reduced her bill to around \$6,786. After MediShield payouts and Medisave deduction, Madam Maney only paid \$13.30 for her mother-in-law's hospital bill.

There was also no MediShield deductible as it had already been paid for in Madam Shanmuga's previous hospitalisation in the same year. The MediShield deductible of \$1,000 for Class C is paid only once in a policy year.

Said Madam Maney: "I bought MediShield for my mother-in-law seven years ago and it was the right decision. I am thankful for Medisave and MediShield, without which we might not have been able to pay the medical bill.

"I am so glad we had these to fall back on. When we are young and have small illnesses like flu, we don't think we need it. But illnesses like cancer, kidney failure, long-term diseases, can strike anytime. Now I know how beneficial these schemes are.

"I feel so blessed. My mother-in-law is much better after the operation and is quite independent now."

Subsidies and Medisave also helped to lessen the burden of chemotherapy treatments for Madam Maney's cancer-stricken husband.

Madam Maney added that because her mother-in-law stayed in a Class C ward, she enjoyed an 80 per cent subsidy and this reduced her hospital bill significantly.

"My mother-in-law actually preferred the Class C ward because there were other patients to keep her company!" said Madam Maney.

I am thankful for Medisave and MediShield, without which we might not have been able to pay the medical bill.

— MADAM MANEY

The family also found that the doctors and nurses were very professional.

"They answered all our questions patiently," said Madam Maney.

"The doctor would also call us personally to explain certain things. They treated all their patients equally, even if my mother-in-law was in the Class C ward."

With heavy subsidies, the majority of Class C bills are very affordable — the median bill size of a Class C ward is \$580. Only a minority of bills, like Madam Shanmuga's, are high. Even then, with MediShield and Medisave, most patients only need to pay a minimal amount out of their pockets.

To ensure that bills are affordable, \$1.5 billion was given out in direct patient subsidies in 2006, and this is expected to exceed \$2 billion per year by 2012.

And to help patients like Madam Shanmuga, the Ministry of Health is proposing means testing as a way to focus subsidies on the lower-income group. The Government will continue to improve and upgrade the subsidised wards.

The majority of Class B2 and C patients will continue to enjoy the current subsidy rates. Means testing will only impact the minority of the upper middle-income and higher-income groups who choose Class B2 or C wards even though they can afford the higher ward classes.

As all of us have a part to play in keeping healthcare affordable, it is important that we contribute to Medisave and MediShield.

"Sickness can happen anytime, even to young people. So, it's important to have Medisave and MediShield," said Madam Maney. "I'm glad I had bought MediShield for my mother-in-law."

