



**MINISTRY OF HEALTH**  
SINGAPORE

# **The Healthcare Services Act (HCSA) Regulatory Forum**

Presented by the Health Regulation Group (HRG)  
Ministry of Health  
22 June 2023

# Agenda

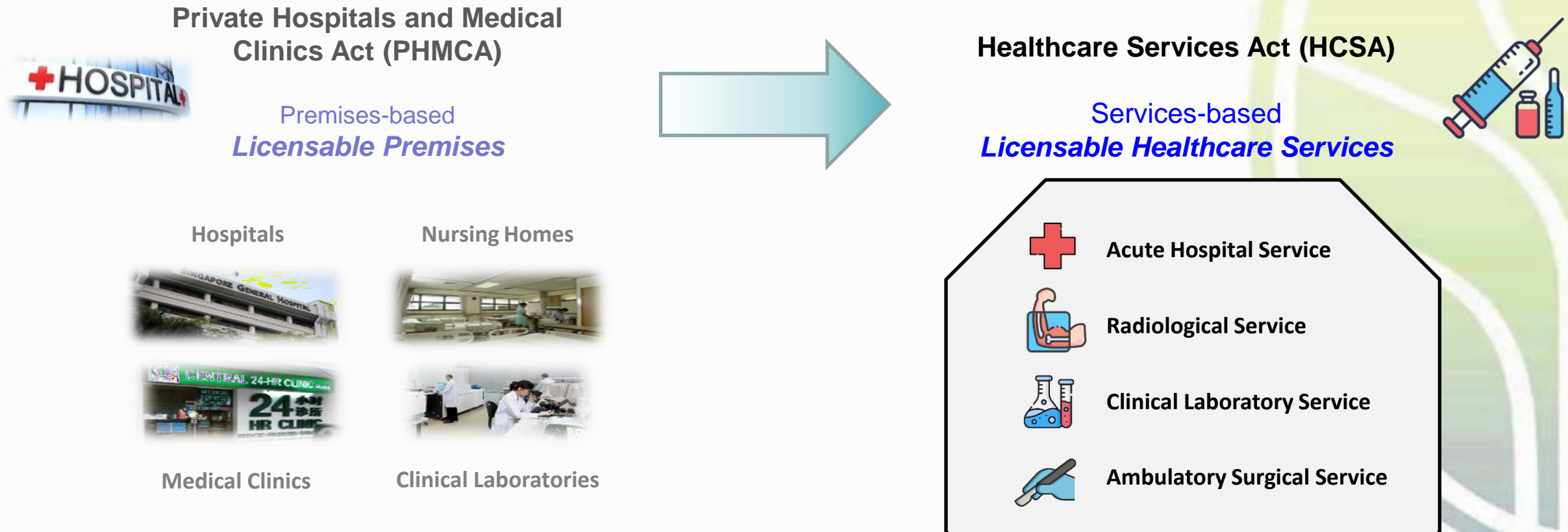
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# **INTRODUCTION TO THE HCSA LICENSING REGIME**



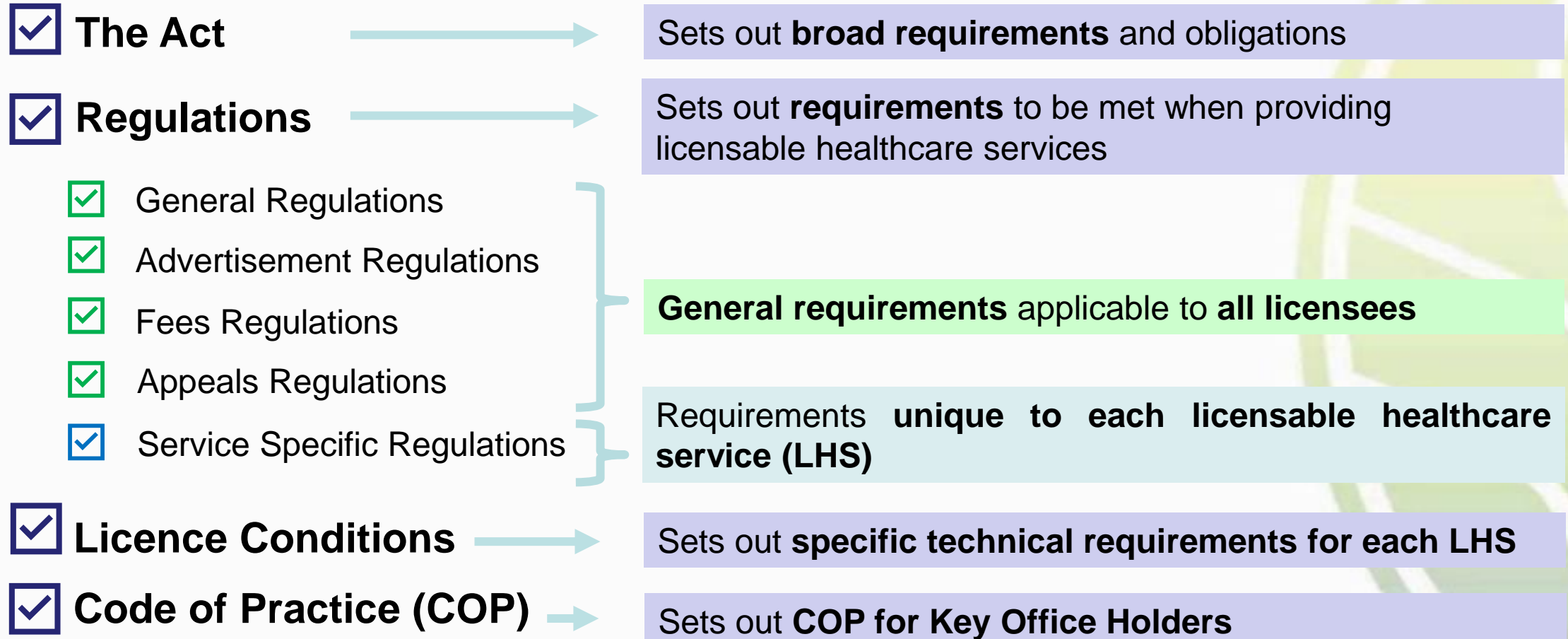
# What is the Healthcare Services Act (HCSA)?

The Healthcare Services Act (HCSA) replaces the Private Hospital and Medical Clinics Act (PHMCA), and sets out a services-based approach to the licensing and regulation of health services. Similar to the PHMCA, licensees will need to comply with the regulatory requirements set out under the HCSA and its regulations.



# What requirements must I comply with under the HCSA?

You must comply with **ALL** of the following requirements\*



*\*FAQs/Guidance carry illustrations of good practices to help licensees interpret and meet the requirements in the Regulations and LCs, and are not enforceable.*

# There are four Modes of Service Delivery (MOSDs) under the HCSA

## 4 Modes of Service Delivery



### Permanent premises

e.g. brick-and-mortar premises such as GP or dental clinics



### Conveyances

where the LHS is delivered from a vehicle  
e.g. medical transport



### Temporary premises

no permanent premises  
e.g. treating patients at home (home medical)



### Remote

through virtual platforms or applications  
e.g. virtual GP consultation

- Licensees need to **seek MOH's approval** for the applicable MOSDs for each licensable healthcare service (LHS).
- Not all MOSDs are allowable for every LHS.
  - For Outpatient Dental Services, the allowable MOSDs are: permanent premises, conveyance, temporary premises. Do note that provision of Outpatient Dental Services purely by remote MOSD is **not** allowed. Remote provision is only allowed when provided together with any one or more of the other three (3) MOSDs.
- It is an offence to provide a LHS via MOSDs without prior approval from MOH.

# Which Mode of Service Delivery (MOSD) should I apply for?

I provide Outpatient Dental Service (ODS). How do I know which MOSD to apply for?

Is the ODS delivered at a fixed, specified address for the full duration of its license tenure?

Yes

Apply for the **“Permanent premises”** MOSD



No

Is the ODS delivered out of a vehicle?

Yes

Apply for the **“Conveyances”** MOSD



No

Apply for the **“Temporary premises”** MOSD

Examples of “Temporary premises” MOSDs:

- House call dentists
- Dental screening at company or community sites

*Note: you will not be able to apply for standalone “Remote delivery” MOSD. Remote delivery is incidental to the delivery of the ODS via the “Permanent premises” or “Temporary premises” MOSDs*

You will also be approved to provide the **“Remote delivery”** MOSD

- Video Conferencing Apps 
- Chat Apps 
- Teledentistry Apps 

# Specified Services (SSes) are unique to each Licensable Healthcare Service (LHS)

SSes generally involve complex or higher risk procedures provided in a LHS and have **distinct requirements for patient safety**. As such, licensees will need to **seek MOH's approval** prior to the commencement of the SSes under their LHS and MOSDs. **It is an offence to offer any SSes without seeking MOH's approval.**

**The allowable SS under each LHS and for each MOSD under the LHS differs.** For Outpatient Dental Service, Dental Cone Beam Computed Tomography (CBCT) is a Specified Service for Permanent Premises MOSD.

***How does the SSes apply to my clinic under the HCSA?***

**Example: Dental clinic that provides dental CBCT services**

Licensee will hold a **Outpatient Dental Service Licence**, with approval for Permanent Premises MOSD

Dental CBCT as a **Specified Service**



# The “Three-in-One” Relationship: Licensable Healthcare Service (LHS), Specified Services (SSes) & Modes of Service Delivery (MOSD)

**[RECAP]** Licensees should always seek MOH’s approval before offering a LHS or SS (if any). When seeking approval, licensees should also indicate the MOSD by which the LHS is delivered.

- ✓ Indicate the **LHS** (e.g., Outpatient Dental Service)
- ✓ Indicate the **MOSD by which the LHS is being delivered from** (e.g., Permanent Premises & Temporary Premises)
- ✓ Indicate allowable SSes, if any (e.g., Dental Cone Beam Computed Tomography)

Note: If a SS is not listed as an allowable SS for that LHS, licensees cannot offer it. For example, if you applied for the ODS licence, you cannot apply for the Electrocardiography Stress Testing (EST) SS, as it is only allowable under the Outpatient Medical Service (OMS) licence. If you want to offer EST, you must first apply for the OMS licence.

# **OVERVIEW OF THE GOVERNANCE REQUIREMENTS**



# There are 4 key roles defined under HCSA to ensure proper governance

MOH has published a **Code of Practice** document for these key personnel under HCSA. It can be found on the HCSA website: [go.gov.sg/hcsa-resources](http://go.gov.sg/hcsa-resources).

## Licensee

**Can be either a corporation or an individual**

- ✓ Responsible and accountable for overall compliance with the HCSA
- ✓ Appoints suitable individuals for other key roles

## Key Appointment Holder (KAH)

**Must be an individual(s)**

- ✓ Responsible for strategic leadership and general management oversight
- ✓ For relevant KAH requirements according to business structure, refer to the **Code of Practice**

## Clinical Governance Officer (CGO)

**Must be an individual(s) who is a clinical and technical expert**

- ✓ Assists the licensee in clinical governance and technical oversight of complex services
- ✓ Clinical qualification and experience requirements are detailed in the respective Service Regulations

## Principal Officer (PO)

**Must be an individual(s)**

- ✓ Assists the licensee in ensuring overall operational compliance with the HCSA
- ✓ Oversees day-to-day management of the service, similar to the “Manager” role under the PHMCA

# What are the functions and duties of a Clinical Governance Officer (CGO)?

For a small dental clinic, the functions and duties of a CGO would include:

1. Assist the licensee to
  - i. Put in place processes which govern clinical practice, such as:
    - Preparation, dispensing and administration of medicine
    - Collection, packing and labelling of specimen
    - Use of patient care equipment
    - Infection control
    - Management of patients who deteriorate
  - ii. Implement training and competency for personnel in aspects related to clinical care.
  - iii. Review near misses and clinical incidents, such as medication errors or procedural errors, and improve processes to minimise these occurrences.

Note: while it is a good practice to document these processes, review them periodically or update whenever there are changes, it is not a mandatory requirement for such internal policies to be documented (unless stated in the Regulations), **as long as** the licensee's personnel are familiar and trained in implementing these processes.

# As a HCSA licensee, you will need to appoint a Clinical Governance Officer (CGO)

## Requirements to be a CGO for an Outpatient Dental Service:

1. Reside in Singapore during the appointment as a CGO, **AND**
2. Be a fully registered dentist with SDC, **AND**
3. Be registered as a specialist, **OR**
4. Have full-time work experience as a dentist for at least 2 continuous years treating patients in the provision of either
  - i. an Outpatient Dental Service,
  - ii. an Ambulatory Surgical Centre Service,
  - iii. an Acute Hospital Service, **or**
  - iv. an equivalent healthcare institution under the PHMCA

You may appoint more than one CGO for the same LHS, **but** you must ensure the following:

1. Responsibilities of each CGO are clearly delineated
2. CGOs are informed of their respective responsibilities

You must also **seek MOH's approval** for the appointment of each CGO.

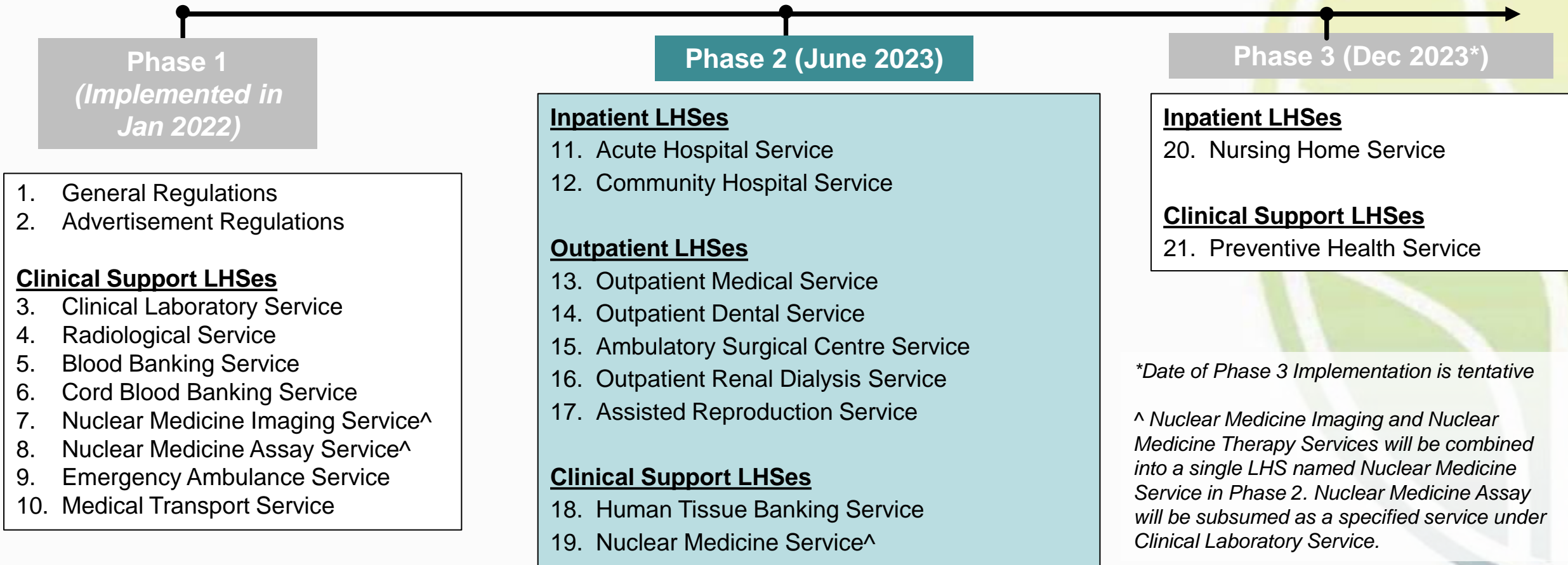


# **OVERVIEW OF PHASE 2 IMPLEMENTATION**

# HCSA is implemented in phases, with Phase 2 starting on 26 June 2023

The Licensable Healthcare Services (LHSes) are broadly categorised to:

- i. Inpatient Services which provide care to patients who are warded within the residential institution.
- ii. Outpatient Services which provide care to patients who are not warded.
- iii. Clinical Support Services which provide support care services to patients in both the inpatient and outpatient settings.



# I am an existing PHMCA dental clinic licensee. What happens to my licence under the HCSA?

MOH will map your existing dental clinic licence to the relevant HCSA licence, issued with the following Modes of Service Delivery (MOSDs) at Phase 2 implementation:

## Under the PHMCA

Licensee holds a **Clinic Licence**

With approval for **Ambulatory Surgery**

Provides **Dental CBCT** (which is not a special care service)

*No action needed*

## Under the HCSA

**Outpatient Dental Service (ODS) licence** with the following MOSDs\*:

- Permanent Premises
- Temporary Premises

**Ambulatory Surgical Centre (ASC) licence** with the following MOSD:

- Permanent Premises

Dental CBCT as a **Specified Service**

Your remaining PHMCA licence tenure will be ported over and continued under the HCSA when Phase 2 is implemented. After your remaining PHMCA licence tenure expires, you will need to renew your HCSA licence in HALP.

**Note:** While we will issue the ODS licences with the two MOSDs, you may choose to cease either MOSD if you do not provide your medical service via that MOSD in HALP.

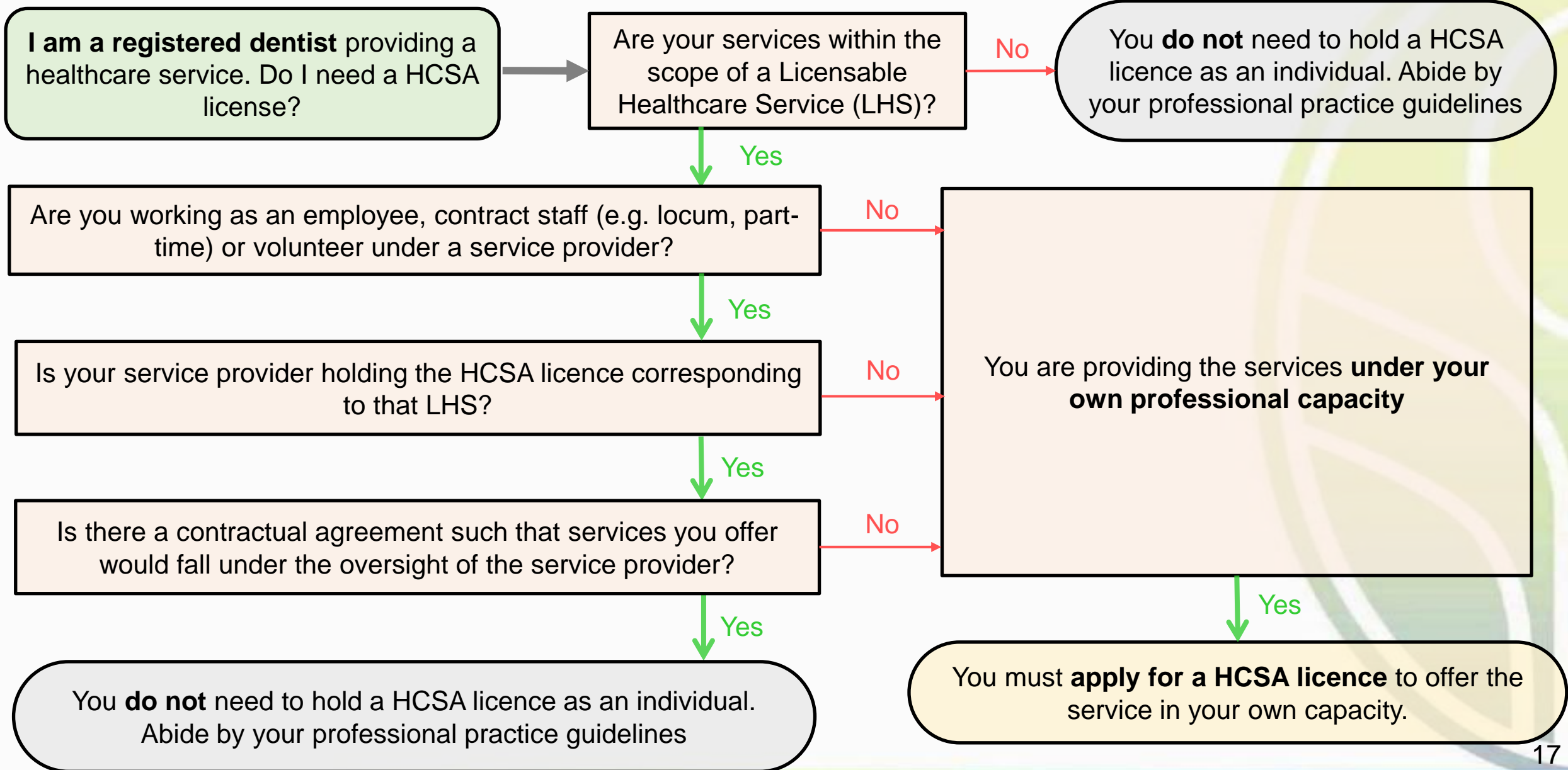
If you provide your dental service via the conveyance MOSD, you will need to separately apply for the conveyance MOSD in HALP.

For more details on how to do this in HALP, you may watch our video guides at <https://www.moh.gov.sg/licensing-and-regulation/e-guides>.

*\*Remote delivery is incidental to the delivery of the ODS via the permanent or temporary premises and MOH will issue approval for remote services with the approval for the permanent or temporary premises. Standalone remote MOSD however is not allowed for ODS.*



# As a dentist, when must I hold a HCSA licence?



# I volunteer my dental services in a nursing home. Do I need a HCSA licence?

If the dental clinic you are working for already has an arrangement to volunteer at the nursing home, you can ride on the existing ODS licence and will not need to hold the ODS licence as an individual yourself.

You will need to hold the Outpatient Dental Service (ODS) licence with the Permanent Premises MOSD as an individual dentist, **if**

- a. You are not a licensed ODS provider, **and**
- b. You are not volunteering your services under the auspices of a licensed ODS provider, **and**

As the ODS licensee, you will be required to abide by the ODS regulations.

# As a dentist, when must I hold a HCSA licence?

## Quiz

1. I conduct minor dental surgical procedures in my clinic, would an ODS licence suffice? – **Yes.**

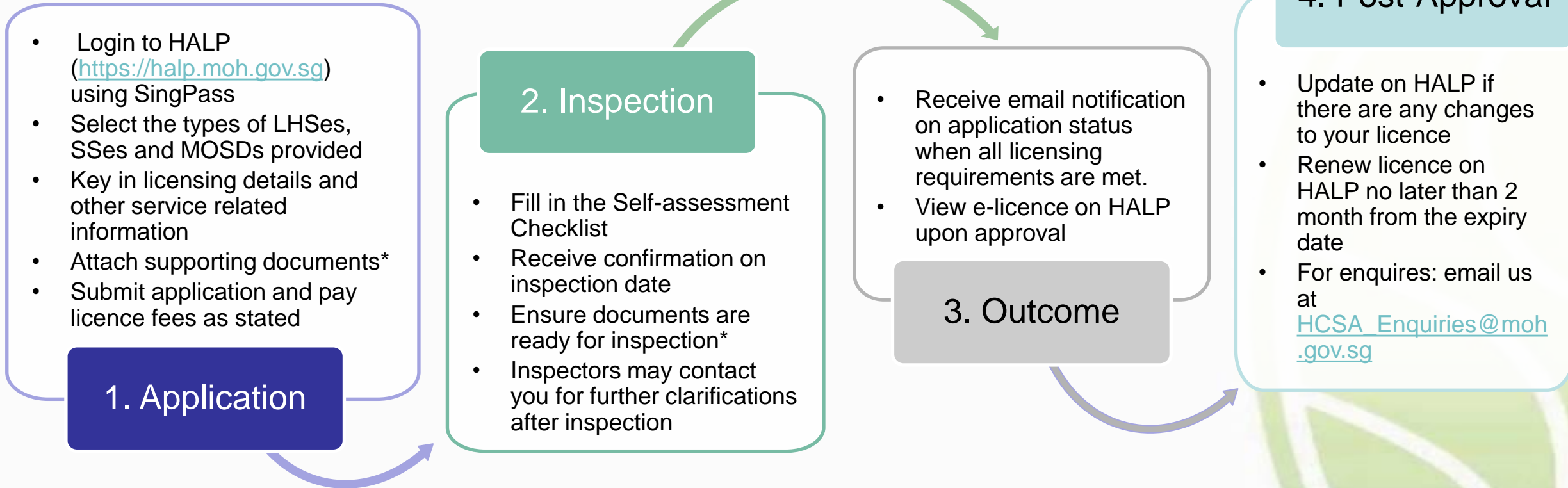
**If your dental surgical procedures go beyond minor dental surgical procedures\* and/or you conduct dental procedures which require general anaesthesia, an ASC Service licence is required.**

2. I engage dentists to provide home dental services. Do I need to hold a HCSA licence? – **It depends on the arrangement you have with your dentists.**
3. I connect patients with licensed outpatient dental services for dental treatment. Do I need to hold a HCSA license? – **No. Connecting patients with licensed outpatient dental services does not constitute a licensable healthcare service.**

*\*"minor dental surgical procedures" means a dental surgical procedure that is associated with minimal tissue damage and blood loss and may be performed in an environment other than an operating theatre.*

# How do I apply for a HCSA licence?

Note: One licence will be issued per LHS per MOSD



\*You will be required to minimally provide these supporting documents:

1. CGO qualifications in the form of a resume
2. Fire safety certificate
3. Floorplans of the premises
4. NEA licences if providing ionizing or non-ionizing radiation
5. Specialty certificates if any, e.g., certificate of competency (COC) if providing specific aesthetic procedures such as Botox or chemical peels

You may also be required to submit additional documents depending on further assessments

# What do I need to know for licence renewal under the HCSA?

- Apply for your HCSA licence in **HALP** (<https://halp.moh.gov.sg>).
- Each licence has a **licence tenure of two years**.
- **Renew** your HCSA licence **at least two months before expiry** to avoid late fee charges.
- **Inspections will be de-linked** from licence renewals for all LHS.
  - Inspection frequency will be risk-based, i.e., a good history of compliance may mean less frequent inspections
  - Inspections may occur after renewal instead of during or before renewal
- Payment of licence application or renewal fee may be made via GIRO or Credit Card.

# Changes to licensing fees under the HCSA

- Through process reviews and streamlining, MOH is able to retain or reduce the HCSA licensing fees for most existing PHMCA licensees.
- **Over 90%** of the existing licensees will see **either the same or a reduction in fees** under HCSA.

	Licensable Healthcare Service (LHSes)	HCSA Licence Fees
1	Ambulatory Surgical Centre	\$850
2	Assisted Reproduction	\$1,900
3	Outpatient Medical / Dental Service	\$360
4	Outpatient Renal Dialysis Centre	\$850

- There will be a **gradual fee increase** where fees have increased considerably:
  - To mitigate the impact of a fee increase on affected licensees, **MOH will gradually increase their fees over three renewal cycles\***.

*Gradual fee increase will not apply to Acute and Community Hospitals, which will pay the full HCSA fee from their next renewal.*

# How much do I need to pay for my licensing fees?

- As an Outpatient Dental Service (ODS) licensee, you may offer your Licensable Healthcare Service (LHS) from any of the 4 MOSDs\*. To support the provision of holistic service models, some of the relevant MOSDs under ODS are bundled together, i.e. the **MOSD Bundle**.
- ODS licensees do not have to pay additional fees beyond the ODS licence fee if they provide dental services via any of the combination of MOSDs below:

Eligible for MOSD Fee Bundle		
Combination of MOSDs	Examples	Fee
(1) Permanent Premises (2) Remote (3) Temporary Premises	Dental Clinic, Tele-Dentistry, House Calls	\$360
(1) Conveyance (2) Remote (3) Temporary Premises	Conveyance (e.g. ODS via a bus), Tele-Dentistry, House calls	\$360
(1) Temporary Premises (2) Remote	Tele-Dentistry and House Calls	\$360

<b>Not</b> Eligible for MOSD Fee Bundle		
Combination of MOSDs	Examples	Fee
(1) Permanent Premises (2) Conveyance	Dental Clinic, Conveyance (e.g. ODS via a bus)	\$360 + \$360 = \$720

\*ODS providers may only offer the remote MOSD in conjunction with another MOSD (e.g. permanent premises).

## An approval fee is required to provide Dental Cone Beam Computed Tomography (CBCT)

- As of today, Dental CBCT is the only allowable Specified Service (SS) under the Outpatient Dental Service (ODS).
- An approval fee required if an ODS licensee chooses to offer Dental CBCT.

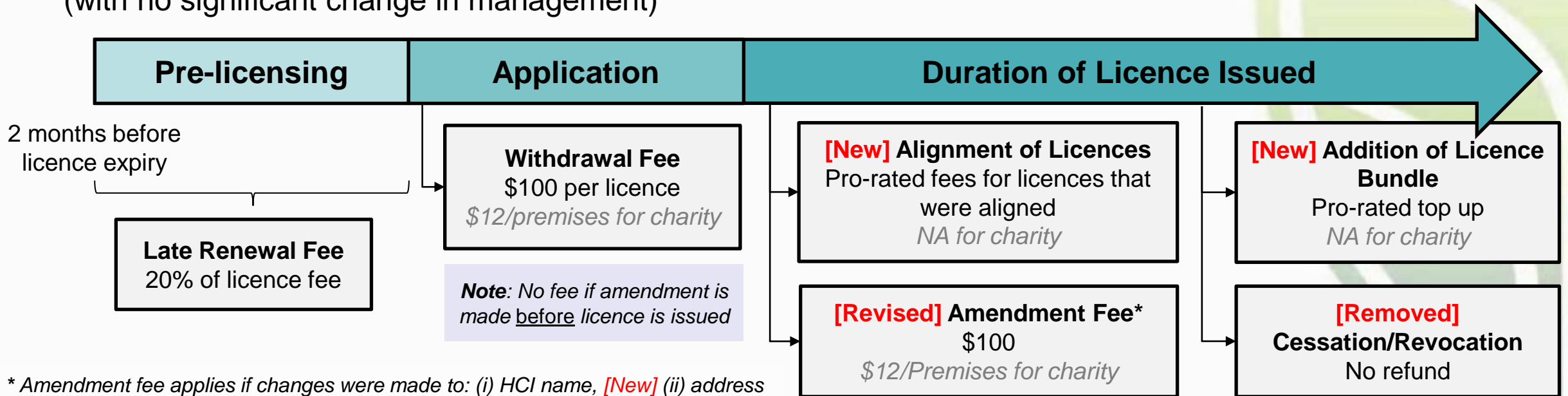
<b>Service</b>	<b>LHS Fee (A)</b>	<b>SS Fee (B)</b>	<b>Licence Fee (A) + (B)</b>
ODS (permanent premises) LHS with the Dental CBCT SS	\$360	\$900	\$1,260



# Changes to administrative fees under the HCSA

Admin fees under HCSA remain largely similar, except:

- **No refund will be made for revocation or cessation, once the licence has been issued.**
- **Fees may be pro-rated** if the licensee has chosen to **align the licence tenures** within the same premises or add on new Licensable Healthcare Service, Specified Services and Modes of Service Delivery to form a licence bundle.
- **\$100 amendment fee for changes to the address of onsite premises**, changes to vehicles in an Emergency Ambulance Service (EAS) or Medical Transport Service (MTS) fleet, **or changes in licensee** (with no significant change in management)



\* Amendment fee applies if changes were made to: (i) HCl name, **[New]** (ii) address of onsite premises, **[New]** (iii) vehicles in an EAS/MTS fleet, **[New]** (iv) change in licensee (with no significant change in management)



# **OVERVIEW OF REQUIREMENTS UNDER HCSA FOR OUTPATIENT DENTAL SERVICES**

# What are the general requirements to fulfill for a HCSA licensee?

- Appoint a suitably qualified **Key Appointment Holder, Principal Officer and Clinical Governance Officer**.
- Seek **MOH's approval for co-location of services** within a licensed premises or conveyance
- Ensure the environment, medical supplies and equipment are safe and suitable; medicinal and health products are used safely, appropriately and correctly
- Collected specimens have clinical utility and are tested by approved clinical laboratories, and are packaged and transported in a safe manner
- Patients are accorded privacy, protected against abuse and neglect, well-informed of their conditions and options for treatment, and health records are accurate, up-to-date and secured
- Prepared to respond to national emergencies
- Establish **business continuity plans** in the event of any disruption to the operation
- **Adhere to the naming restrictions** when selecting a name for the healthcare institution

# What are the general requirements to fulfill for a HCSA licensee?

- All registered healthcare professionals are to maintain **valid BCLS and AED certification when present in a patient-facing clinical area**. For those who are not medically fit to administer BCLS, the BCLS and AED certification in the theory component is still required.
  - As time is needed for registered healthcare professionals to attend the course and obtain valid certification, a sunrise period will be provided and this requirement will only be enforced from 1 Jan 2027.
- All registered medical practitioners and dentists should be **trained in the use of emergency drugs and equipment** listed below. MOH will develop a course to refresh and upskill the competency of medical practitioners and dentists in the use of these drugs and equipment for those who require it.

## Emergency Drugs

- Injection adrenaline
- Injection antihistamine (e.g. promethazine)
- Injection steroid (e.g. hydrocortisone)
- Inhaled bronchodilators

## Emergency Equipment

- Manual resuscitator
- Airways of at least 2 sizes (*if clinics are seeing paediatric & adult patients, to cater 1 size each for adult & paediatric patients respectively*)
- Infusion set
- IV infusion fluid
- Appropriate delivery devices for bronchodilator (e.g. spacer)

# Principles for provision of Outpatient Dental Services in temporary premises

The need to maintain and bring emergency drugs and equipment when providing Outpatient Dental Service via the 'temporary premises' MOSD would be based on these principles:

1. In settings where the dentist **does not have control over** (i) the acuity of patients that will be seen, and (ii) the level of resuscitation and emergency management expected, the **need to maintain and ensure the availability of emergency drugs and equipment would be mandatory**.
  - E.g., sites which accept walk-in patients, dental screening events at community centres or workplaces.
2. In settings where the dentist **knows** (i) the acuity of their patient, and (ii) the level of resuscitation and emergency management expected because he or she has seen the patient and has professionally assessed the patient before, the need to bring emergency drugs or equipment would be **dependent on the professional judgement** of the dentist.
  - E.g., home visits for patients without any dental procedures performed during the visit.

# What are the specific requirements to provide Outpatient Dental Services in temporary premises?

## Recap:

- *‘Temporary premises’ is one of the four Modes of Service Delivery (MOSDs).*
  - *It refers to the provision of Outpatient Dental Service from place to place.*
  - *Examples include dental house calls or ad-hoc dental screenings.*
- 
- A licensee must ensure that the Outpatient Dental Service in temporary premises is provided in a **proper, effective and safe manner, with adequate privacy if necessary.**
  - In order to achieve this, a licensee must:
    - a) establish and implement guidelines** to assist the dentist attending to the patient to take into account:
      - i. the patient’s medical condition or history; and
      - ii. the dentist’s training and scope of practice; and
      - iii. the facilities, equipment and resources available at the temporary premises
    - b) inform** the patient or the caregiver on **any follow-up care and treatment**, including how the patient may obtain follow-up care and treatment
    - c) ensure that the patient or caregiver is **provided with alternative arrangements** for the patient to receive dental care if the dentist deems that the patient or a particular treatment cannot be managed at the temporary premises in a proper, effective and safe manner
    - d) ensure every personnel who attends to a patient must **provide the patient with proof of the personnel’s identity, role or designation**

# What are the general requirements for the conduct of dental radiography procedures (e.g., dental X-ray, dental CBCT)?

A licensee must ensure that the radiography procedure is **necessary** for the patient, and is conducted in a **proper, effective and safe manner**. In order to achieve this, a licensee must ensure that:

- a) the radiography procedure is conducted on the correct patient.
- b) establish and implement protocols, while the patient is undergoing the radiography procedure, to
  - i. minimise the patient's exposure to radiation or repeated imaging; and
  - ii. protect others against exposure to radiation.
- c) appropriate measures have been taken if the patient is  $\leq 12$  years old.
- d) The patient or caregiver is notified and arrangements are made for follow-up check or treatment if any findings of the radiography procedure indicates that further investigation would be necessary.
- e) ensure that all findings obtained are recorded in the patient's health record
  - i. if the dental CBCT is repeated, to keep and maintain proper and accurate records of the reason for the repeat

# What are the specific requirements to provide Dental CBCT?

## Recap:

- *Dental CBCT is a Specified Service allowable under the Outpatient Dental Service.*
- *It can be offered via the following Modes of Service Delivery (MOSDs): “Permanent premises” and “Conveyances”.*
- *MOH’s approval is required before Dental CBCT can be provided.*

The licensee must ensure that:

- a) the dental CBCT is conducted\* by a qualified person, who is either a dentist, an oral health therapist, radiologist or radiographer.
- b) the dentist who uses CBCT has obtained a Certificate of Competency (COC) from SDC
  - In developing the COC, SDC will also review the framework for the granting of the COC, including any grandfathering of existing providers though this would be dependent on proof of formal training.
  - There will be a sunrise period for the implementation of the COC and SDC will provide an update when ready.
- c) dental CBCT is conducted **after** the following conditions have been satisfied:
  - i. a dentist has assessed that the use of conventional radiography would not be sufficient
  - ii. a dentist has assessed that the potential benefits of conducting dental CBCT outweighs the potential risks
  - iii. if a second or subsequent dental CBCT is to be conducted on the patient, consideration has been given to whether it may be conducted on a different part of the patient’s teeth, jaws or associated structures to minimise exposure to radiation;
- d) keep and maintain proper and accurate records of the conditions mentioned in (c).
- e) the field of view for each dental CBCT is collimated to the area of clinical interest.

*\*NEA licences govern the operation of the equipment but does not govern the use of CBCT in clinical practice.*



# What are the requirements to make referrals for dental radiography procedures?

A licensee taking referrals for dental X-ray or CBCT should –

- a) **Only take referrals from another Outpatient Dental Service.** The Outpatient Dental Service should not take referrals from other licensable healthcare services such as Outpatient Medical Service. If the Outpatient Dental Service intends to take CBCT images for Outpatient Medical Service licensees, the Outpatient Dental Service should also hold a HCSA Radiological Service licence.
- b) Maintain records of:
  - i. The referring Outpatient Dental Service
  - ii. The dentist who prescribed the dental X-ray or CBCT

# How do you ensure price transparency as a HCSA licensee?

**[NEW]** Issue a bill of the fees charged for every Licensable Healthcare Service provided to the patient, even if the patient has zero out-of-pocket (OOP) payment due to third party payors or government subsidies, unless the patient declines.

**[NEW]** Inform the patient about the status of your accreditation or participation in a public scheme where applicable, such as approval for Medisave withdrawal, MediShield Life Scheme Act, or accreditation as a CHAS clinic

Display or make available the charges that are applicable for your service, including:

1. Consultation fee applicable to the patient, AND
2. Any administrative fee or other charges imposed on the patient (e.g., investigations, treatments, procedures and medications).

You must also inform the patient, at their request, of the estimated applicable charges, including administrative charges, for any aspect of your service.

# What is financial counselling? When is it done?

- Before a licensee provides a **category of treatment or procedure that is eligible for MediShield Life coverage or a treatment or procedure that is MediSave claimable\***, the licensee must, as soon as reasonably practicable, **conduct financial counselling** to the patient or the patient's authorised representative on the fees chargeable for the treatment or procedure if the fee information is new to the patient.
- Financial counselling must include giving the patient or the patient's authorised representative all of the following information:
  - a) an **estimated price or price range** for the treatment of the patient's condition or the procedure that the patient undergoes or intends to undergo;
  - b) the **MOH fee benchmark published** (if available) for the same or similar treatment or procedure<sup>^</sup>;
  - c) the applicable MediShield Life benefits (e.g., deductible, co-insurance, claim limits), and MediSave withdrawal limits for the treatment or procedure.
- A licensee must document all financial counselling that is conducted for any patient as part of the patient's health records, and obtain the acknowledgement of the patient or the patient's authorised representative upon the completion of the financial counselling. Record of acknowledgement by the patient in any form would be accepted.

*\*Today, there are no MediShield Life record of acknowledgement by the patient in any form would be accepted for life claimable dental procedures. MediSave claimable dental procedures are those which could be found in the Table of Surgical Procedures published by MOH [https://www.moh.gov.sg/docs/librariesprovider5/medisave/table-of-surgical-procedures-\(1-feb-2021\).pdf](https://www.moh.gov.sg/docs/librariesprovider5/medisave/table-of-surgical-procedures-(1-feb-2021).pdf).*

*<sup>^</sup>Today, there are no fee benchmarks published for dental procedures.*

# *Stay connected with us*

*MOH will provide more information along the way*



Visit **HCSA.sg**  
for more information and  
to provide feedback



Write to us at  
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# The End

# Thank you

