Dear Healthier SG GPs,

Thank you for embarking with us on the Healthier SG Journey!

Healthier SG is a major transformation of our healthcare system to promote good health, as well as prevent chronic diseases and their deterioration, anchored by primary care and the community. Your role as a family doctor is critical to the success of Healthier SG.

The national enrolment of residents began on 5 July 2023. This Coordinating Information (CI) document serves as a reference to ensure smooth operations in the Healthier SG journey. You can access the latest CI and other related guidelines from <a href="Healthier SG">Healthier SG</a> (HSG) (primarycarepages.sq) under "Guidance for HSG Clinics".

If you have any questions, please contact your AIC Account Manager at <a href="https://for.sg/amfinder">https://for.sg/amfinder</a> or GP Hotline 6632 1199 or <a href="mailto:gp@aic.sg">gp@aic.sg</a>. You can also reach out to your PCN HQ for support.

With best regards,

Mr Dinesh Vasu Dash

Dy Chair, Healthier SG Implementation

Healthier SG Implementation Office

03 October 2024

#### **Topics**

- 1. Care Protocol
- 2. Health Plan
- 3. Healthier SG Benefits
- 4. Healthier SG workflows and administration
- 5. Clinic Management System and NEHR contribution
- 6. Enrolment
- 7. Healthier SG Subsidised Drugs Programme and Healthier SG Chronic Tier
- 8. Payment Timelines
- 9. Annex A

#### 1. Care Protocols

We have worked closely with PCN and Cluster leaders to develop the Healthier SG Care Protocols to support family doctors in managing the health of your enrolled residents. These protocols provide essential care guidelines on preventive care and the management of common chronic conditions.

At the launch of Healthier SG in 2023, 12 Care Protocols were developed and published on AlC's Primary Care Pages (PCP) at <a href="https://www.primarycarepages.sg/healthier-sg/care-protocols">https://www.primarycarepages.sg/healthier-sg/care-protocols</a>. Six new Care Protocols covering the six additional conditions listed in Table 1 will progressively be published on Primary Care Pages from September 2024, for implementation from 1 January 2025. All Care Protocols will be reviewed and updated on a six-monthly basis to align with the latest national clinical guidance and Agency for Care Effectiveness (ACE) guidelines.

Additional care protocols will be progressively developed in consultation with primary care practitioners to cover other key chronic conditions for management in primary care.

#### Table 1

Chronic	<ol> <li>Pre-Diabetes</li> <li>Diabetes Mellitus</li> <li>Hypertension</li> <li>Lipid Disorders</li> <li>Multimorbidity - Diabetes, Hypertension and Hyperlipidemia</li> <li>[From 1 Jan 2025] Stable Ischaemic Heart Disease (IHD)</li> <li>[From 1 Jan 2025] Stable Stroke</li> <li>[From 1 Jan 2025] Gout</li> <li>[From 1 Jan 2025] Chronic Kidney Disease (CKD)</li> <li>[From 1 Jan 2025] Asthma</li> <li>[From 1 Jan 2025] Chronic Obstructive Pulmonary Disease (COPD)</li> </ol>
Preventive/ Acute	<ol> <li>BMI Control</li> <li>Smoking Cessation</li> <li>Cardiovascular Risk Assessment</li> <li>Cancer Screening</li> <li>Adult Vaccination</li> <li>GPFirst</li> <li>Health Plan</li> </ol>

#### 2. Health Plan

The Health Plan is a personalised plan developed by the doctor at the Healthier SG clinic, based on the resident's health condition and in discussion with the resident. It includes important health actions such as lifestyle adjustments, regular health screening and recommended vaccinations to guide the resident to achieving his/her health goals to improve his/her health. This plan is available in the resident's HealthHub app within 24 hours of the Health Plan consultation.

A Health Plan is useful to the resident to better understand his/her overall state of health and enable better delivery of care for disease prevention and chronic condition management.

After the resident enrols at your clinic, please initiate a first discussion with him/her to develop the Health Plan. The first Health Plan needs to be conducted in person. After details of the Health Plan are captured in your Healthier SG-compatible Clinic Management System (CMS), the information will be transferred and may be viewed via the enrolled resident's HealthHub app.

During the Health Plan consultation with your enrollee, you should discuss your enrollee's health and create a customised Health Plan which includes:

- a) Review enrollee's eligibility for nationally recommended health screenings and vaccinations – nationally recommended health screenings and vaccinations are free under Healthier SG
- b) Discuss ways to improve your enrollee's health e.g., making lifestyle adjustments and how to manage chronic conditions
- c) Refer enrollee to healthy lifestyle programmes conducted by community partners, and
- d) Book next Health Plan consultation/ check-in

#### Annual Health Plan Check-in

GPs and his/her enrolled residents should have regular, scheduled check-ins to assess the enrollee's overall health condition and progress. At each check-in, you should discuss your enrollee's progress with the health goals, assess if the goals need to be revised or if additional interventions are required. The Health Plan should be updated accordingly and submitted after each visit/consultation.

The check-ins and updates to the Health Plan may be done opportunistically, where appropriate, during an acute or chronic visit. Otherwise, the GP should contact the enrollee to schedule a follow-up check-in.

- a) For well enrollees (defined as enrollees with no CDMP conditions), an annual check-in should be scheduled. The first Health Plan consultation should be done in-person to establish rapport and relationship with the enrollee. Subsequent check-ins can be done by phone or video consultation. An in-person consultation should be done minimally once every 3 years, as long as the enrollee remains generally well.
- b) For chronic enrollees with at least one CDMP condition, there should be at least two chronic consultations annually, where the Health Plan is updated during these visits. For purpose of the Annual Service Fee (ASF), the interval between these visits should be at least 3 months apart. If phone or video consultations are conducted, it should be clinically appropriate with at least one in-person consultation conducted annually. Phone, video and in-person consultations are claimable under CHAS/ CDMP, subject to prevailing claims limits.

In addition to submitting the Health Plan check-in entries, the following information should be included in the care reports for ASF (fixed payment):

- a) For all enrollees:
- Visit date
- Height
- Weight (to enter waist circumference if not convenient to measure weight)
- Date measurement of height/ weight/ waist circumference taken
- Smoking status
- Number of sticks smoked per day<sup>1</sup>
- Annual Health Plan check-in (submit a new Health Plan entry)
- b) Additional fields for chronic enrollees:
- Date of chronic consultation (2 chronic consultation/year)
- Visit date
- Diagnosis code
- CDMP condition(s)<sup>2</sup>

Payment(s) will be tiered based on the duration the resident was enrolled at your clinic. Please refer to care reporting submission guidelines and Health Plan check-in at: <u>Healthier SG (HSG) (primarycarepages.sg)</u>.

#### 3. Healthier SG Benefits

A key objective of Healthier SG is to encourage your enrolled residents to seek care with you for all care episodes, particularly for preventive and chronic care. This is to facilitate a strong patient-doctor relationship and enable holistic management.

As such, residents who are enrolled into Healthier SG can enjoy the following Healthier SG benefits at their enrolled clinics:

Table 2:

Benefit Eligibility **Start Date** Enrolled **Enrolled** Singapore **Permanent** Citizen (SC) Resident (PR) Fully-subsidised first Health Plan Yes Yes 5 July 2023 consultation and annual Health Plan check-ins. \$20 worth of Healthpoints after their Yes Yes 5 July 2023 first Health Plan consultation. Fully-subsidised nationally Yes No 5 July 2023 recommended screenings and vaccinations.

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<sup>&</sup>lt;sup>1</sup> Enter 0 if enrollee is a never-smoker or ex-smoker

<sup>&</sup>lt;sup>2</sup> The submission of CDMP condition(s) via care report is required for Chronic Enrolment Grant

Access to enhanced subsidies for selected chronic medications* under the new Healthier SG Chronic Tier.  Please refer to Healthier SG Chronic Tier Subsidy Framework (primarycarepages.sg) and coordinating information for details.	Yes (only for CHAS/PG/MG cardholders)	No	1 February 2024
No 15% cash co-payment needed to use MediSave for chronic conditions.	Yes	Yes	

<sup>\*</sup>Where HSG GPs prescribe chronic medications on the Healthier SG Medication List, which are procured from ALPS or Pharmaceutical companies via MOH Special Pricing Agreements, all HSG enrollees viz. CHAS/PG/MG cardholders, non-CHAS SCs and PRs shall be charged no higher than the stipulated price caps.

#### 4. Healthier SG workflows and administration

AIC has prepared a Healthier SG Standard Operating Procedures (SOP) detailing the GP's service journey, related administrative matters. The SOP is available on AIC's Primary Care Pages portal at <a href="Healthier SG">Healthier SG</a> (HSG) (primarycarepages.sg). Healthier SG GP clinics will also receive collaterals such as decals. All these will be in a Healthier SG GP Onboarding Kit, which your AIC account manager will share with you. Please see Annex A for details on what you can find in your onboarding kit.

The complete list of lifestyle activities can also be accessed via HealthierSGGoWhere.

#### 5. Clinic Management System and NEHR contribution

A Heathier SG-compatible Clinic Management System (CMS) is an essential tool to contribute to the National Electronic Health Record (NEHR), to facilitate care continuity and tracking of patient outcomes. All Healthier SG clinics must have adopted a Healthier SG-compatible CMS, commenced contribution to NEHR before onboarding to Healthier SG, and continue to do so throughout its participation in Healthier SG.

- a) Please refer to Synapxe SmartCMS website <u>Clinic Management Services (CMS)</u> (<u>synapxe.sq</u>) or the prevailing list of Healthier SG-compatible CMSes. This list is refreshed annually every January. The readiness of the prevailing Healthier SG-compatible CMSes in meeting the following year's Healthier SG-compatible requirements are tracked and circulated via regular Infographics to all CHAS GPs.
- b) If you wish to migrate to another Healthier SG-compatible CMS, you may refer to the GP's Guide to a Healthier SG-compatible CMS by MOH at AIC's Primary Care Pages (Guide to a Healthier SG-compatible Clinic Management System (primarycarepages.sg)) or reach out to your PCN HQs for assistance.

Clinics that have applied for the \$2,400 Early Contribution Incentive (ECI) and/or the \$10,000 GP IT Enablement (ITE) grant have until 31 Mar 2025 to meet the respective disbursement criteria. More details can be found at Participate in the NEHR (synapxe.sg) for ECI grant and

https://www.primarycarepages.sg/healthier-sg/digital-resources/gp-IT-enablement-grant for ITE Grant.

#### 6. <u>Enrolment</u>

Singapore Citizens and Permanent Residents aged 40 and above can enrol in Healthier SG and select a Healthier SG clinic of their choice using HealthHub. Residents who are not able to use HealthHub can enrol at MOH-manned enrolment stations where Healthier SG ambassadors at these sites will help them with enrolment and to make the first Health Pan appointment with their chosen clinic. List of enrolment stations can be found at <a href="HealthierSGGoWhere">HealthierSGGoWhere</a>. Residents with questions may call MOH General Hotline: +65 6325 9220 or provide feedback at www.moh.gov.sg/feedback.

Clinics may also assist residents to enrol on-site at your clinic via the Primary Care Digital Services (PCDS). Clinics should make sure that patients are fully informed about the enrolment terms and give their consent before proceeding with enrolment. For residents who would like to change clinics after enrolling, clinics may advise them to either do so via HealthHub, get assistance at a MOH-manned enrolment station or call the MOH hotline 6325 9220.

In addition, with effect from 9 September 2024, Healthier SG clinics with Outpatient Medical Service (Remote) licence will be able to conduct assisted enrolment via teleconsultations to enrol your patients to your Healthier SG clinic. This will enable Healthier SG Clinics with Outpatient Medical Service (Remote) licence to enrol more patients opportunistically in a seamless manner during the telemedicine consultation sessions. After teleconsultation, patient will receive an SMS confirmation from MOH to alert them of enrolment and to review Terms of Enrolment. Cold-calling or follow up calls for Healthier SG enrolment that are conducted post telemedicine consultation is not allowed. Please refer to Coordinating Information for Healthier SG Clinics with Outpatient Medical Service (Remote) Licence (available at: <a href="Healthier SG">Healthier SG</a> (HSG) (primarycarepages.sg)).

#### 7. Healthier SG Chronic Tier and Healthier SG Medication List

The Healthier SG Chronic Tier and Healthier SG Medication List was launched on 1 February 2024. Please refer to the Healthier SG Chronic Tier and Healthier SG Medication List Coordinating Information for details (available at: Healthier SG (HSG) (primarycarepages.sg))

#### 8. Payment Timelines

The payments for existing subsidy schemes as well as Healthier SG are summarised in the Table 3 below. In subsequent mentions, the term "CMSes" refers to Healthier SG-compatible CMSes which have the appropriate integration through the SmartCMS programme.

### Table 3:

Payment Category	Payment Cycle	Claim Submission Platform
Existing Subsidy Schemes (Community Health Assist Scheme (CHAS), Screen-for- Life (SFL), Vaccination and Childhood Developmental Screening Subsidies (VCDSS)).	Fortnightly, approximately 2 weeks to one month after approval of claim.	CMSes / MOH Healthcare Claims Portal (MHCP).
First Fully - Subsidised Healthier SG Health Plan Consultation  Healthier SG GPs will receive a one-off remuneration of \$50 (+GST, for GST-registered clinics) on completion of the first onboarding consultation to discuss and co-create the first Health Plan with Healthier SG enrollees.  This consultation will be fully-subsidised by MOH, and enrollees should not be charged a fee for it. However, if the enrollee seeks other treatment during the same visit, the clinic may charge the enrolled resident separately at the clinic's prevailing rates. Each Healthier SG enrollee is only eligible for one fully-subsidised onboarding consultation, regardless of whether they switch enrolled GPs.	Fortnightly, approximately 2 weeks to one month after the first submission of the Health Plan.	Health Plan to be submitted via GP CMSes / PCDS.  No additional claim required, payment to be made via the same channels as existing subsidy schemes.
Chronic Enrolment Grant	Quarterly	CDMP conditions in care
Each Healthier SG GP will be eligible to receive up to \$70/year for each chronic enrollee tagged with at least one CDMP condition diagnosis in the care reports submitted to Healthier SG Administrative Repository (HSAR), as of each quarterly assessment date determined by MOH.	The assessment date falls on 31 March, 30 Jun, 30 Sep and 31 Dec of every calendar year.  Barring unforeseen circumstances, payment will be made within 2 months from each assessment date.	CMSes / PCDS to HSAR.

Payment Category	Payment Cycle	Claim Submission Platform	
Annual Service Fee	Annual	Care Reporting data to be submitted via CMSes /	
Healthier SG GPs will be eligible for the Annual Service Fee	First evaluation of care reports to be done after	PCDS to HSAR.	
(ASF) for all your Healthier SG enrollees, on the completion of specific care components. The	end CY24, with payment in early 2025.	Payment to be made via AIC grant systems.	
ASF is provided on top of the existing fee-for-service payments (e.g. for investigations, medications	For the first AY2024, care components clocked from 1 Jan – 31 Dec 2024 will qualify for the fixed ASF		
etc.).	payments while care components clocked from 5		
Please refer to AIC's Primary Care Pages for a consolidated list of ASF-eligible care components.	Jul 2023 – 31 Dec 2024 will contribute to the variable ASF payments.		

To cater for the needs of those with mobility issues and who may prefer getting care at home, the HSG enrolment benefits comprising fully-subsidised nationally recommended screenings and vaccinations, and the first Health Plan consultation, will be extended to include home visits conducted at a residential address. The clinical service requirements to be fulfilled for these HSG enrolment benefits in home-visit settings will be addressed in a separate circular. Please note that this extension does not apply in other settings beyond in-clinic and home visits.

#### Annex A

#### Resources available:

- 1. The following collaterals in the Healthier SG GP Onboarding Kit are intended to help residents identify you as a Healthier SG clinic and provide details on their journey to better healthcare:
  - Decal (to be displayed at the clinic's entrance)
  - Resident brochures (Available in 4 languages)
  - Key benefits poster
  - Standee
  - Health Plan booklet
  - Healthier SG Appointment Card (optional for use)
  - Healthier SG Onboarding Questionnaire (4 languages)
  - "Live the healthier way" pamphlet (to be available in 4 languages from Q4CY2024)
  - Information on Lifestyle Programmes for enrollees
  - Healthier SG Integrated Activities Portal (accessed via <u>HealthierSGGoWhere</u>)
- 2. The following resources have also been included in AIC's Primary Care Pages
  - Coordinating Information for Healthier SG clinics
  - Coordinating Information specific to Healthier SG Chronic Tier and Healthier SG subsidised Drugs Programme
  - Coordinating Information for Healthier SG Clinics with Outpatient Medical Service (Remote) Licence
  - Quick Reference Guides
  - Standard Operating Procedures (SOP)
  - Frequently Asked Questions
  - Care Protocols and other care components that are eligible for ASF payments
  - Primary Care Digital Services (PCDS) Guide
  - Guide to Healthier SG compatible CMS
  - Information and resources for National Electronic Health Records (NEHR) Data Quality Contribution Criteria
  - Information on Digital Enablement for Healthier SG
  - Care Reporting Submission Information
  - Lifestyle Prescription
  - Healthier SG related training videos and materials

#### Frequently Asked Questions for Healthier SG Enrolment

#### **Enrolment**

#### 1. Can I assist to enrol residents via assisted enrolment?

- For residents who are 40 and above, have received the SMS invitation to enrol, and wish to enrol at your clinic, you and your staff may:
  - o Guide them on the enrolment process via HealthHub.
  - Enrol them via the Assisted Enrolment Module in Primary Care Digital Services (PCDS).

Upon completion of the enrolment process, the clinic may assist the resident to book their first Health Plan consultation appointment via Health Appointment System (HAS) or clinic's own appointment system.

• For residents not eligible for Healthier SG enrolment (e.g., below 40 years old), the clinic staff should advise them that enrolment currently is open only for those aged 40 years and above. MOH will inform GPs when extending enrolment to the younger age groups. For patients aged 18 to 39 years for whom GPs were receiving Care Plus Fees in 2022 and 2023, GPs may enrol them in HSG as an exception as the Care Plus Fees will be sunset from 1 Jan 2024. These residents will not receive an SMS invitation and hence GPs should enrol them via assisted enrolment on PCDS. There will be an eligibility check built in to the PCDS system for this group.

# 2. Is resident allowed to change the clinic he/she is enrolled to? Are there any conditions for this? Can residents decide to change their Healthier SG GP in the event they move residences?

- Yes, resident may change the GP clinic he/she is enrolled to using the HealthHub app by clicking the '3-dots' icon located at the top right corner of the section in the Healthier SG 'Enrolled Clinic' tab.
- Before the resident's first visit, he/she can change his/her Primary Care Provider (PCP) unlimited times. However, after the first visit, he/she is allowed up to 4 changes in the first two calendar years after his/her enrolment e.g., for a resident enrolled on any date in 2023, he/she can change his/her PCP up to 4 times until 31 December 2024. If he/she enrols (any date) in 2024, he/she can change his/her PCP up to 4 times until 31 December 2025. Thereafter, a maximum of one change is allowed every calendar year.

#### 3. Will my clinic be informed if residents are already enrolled at another clinic?

 All Healthier SG clinic will be able to view the current list of residents that have enrolled or de-enrolled from the clinic via the enrolment function tab in Primary Care Digital Services (PCDS) or Healthier SG-compatible CMS.

### 4. Will residents living in the vicinity of my clinic have the flexibility to choose my clinic as their preferred clinic?

- Yes, residents have the flexibility to choose any Healthier SG clinic using the HealthHub app, including clinics near their residence or workplace as their preferred Primary Care Provider.
- On the app, the resident will first see up to three clinics which will be displayed based on available data such as visit history and proximity to their registered address. They can use the search bar which allows them to choose a family doctor/clinic that is not on the displayed list.

#### 5. How should GP arrange for appointments with the enrollees? Are walk-ins allowed?

- Walk-ins are allowed; however, residents will be encouraged to arrange an appointment with the clinic. GPs can schedule appointments with enrollees using your own appointment systems, if any.
- For GPs who do not have an appointment booking system, you may tap on the Health Appointment System (HAS) for ease of management of the Healthier SG appointments.
   To sign up for HAS, scan the QR code.



- Enrollees can also self-help and book an appointment with GPs on HealthHub via the following:
  - 1. Enrollees can book an appointment directly with the clinic if it is on Health Appointment System (HAS) via HealthHub.
  - 2. Clinics not on HAS will receive appointment request email submitted by enrollees via HealthHub.

### 6. As a GP, am I given the choice to reject a resident for enrolment based on valid reasons (e.g., abusive, not paying bills, too complex)?

- While we respect resident's choice, we acknowledge that there are exceptional scenarios where healthcare providers may need to exercise discretion and autonomy.
- AIC, PCN and healthcare clusters will support the GPs in this area.

#### 7. Can residents change their mind and change their Primary Care Provider (PCP)?

- Yes, residents can change their provider via HealthHub or by calling MOH hotline at 6325 9220.
- To change the Healthier SG clinic via HealthHub, this can be done by clicking the "3 dots" located at the top right corner of the section in the Heathier SG 'Enrolled Clinic' tab.
- If the first Health Plan consultation has not taken place, there is no limit to the number of times residents can change their PCP via HealthHub.
- Upon completion of the first Health Plan visit, resident can change PCP up to 4 times up to end 2024. Thereafter, he/ she is allowed to change only once per calendar year.

• For GPs: Residents who have changed their PCP from your clinic to another clinic will be indicated under the "De-enrolled from Clinic" tab on PCDS.

#### **Clinic Management System**

#### 8. What is a Healthier SG-compatible CMS?

- A Healthier SG-compatible CMS fulfils all of the following under the CMS Tiering Framework for Private Primary Care (effective April 2023):
  - Integrated with web services for MOH programmes such as CHAS, PHPC, CDLENS, NIR, CMIS etc.
  - 2. Contribution to the National Electronic Health Record (NEHR) system to facilitate sharing of summary records across healthcare providers for care continuity.
  - 3. Certified (by third-party certification bodies) compliance with cybersecurity requirements.
  - Adherence to Code of Practice on data portability to facilitate GP clinics that intend to switch subscriptions to another CMS vendor while upholding the fidelity of patient records; and
  - 5. Integrated with core Healthier SG web services, as aligned with the Healthier SG programme.
- The prevailing list of HSG-compatible CMSes can be found on <a href="https://www.synapxe.sg/partner-us/smartcms">https://www.synapxe.sg/partner-us/smartcms</a>, and refreshed annually every January based on the new additional requirements.

#### 9. Why is there a need to onboard a Healthier SG-compatible CMS?

- IT is an important enabler to share information between providers and with MOH. This enables better care across settings and outcomes monitoring.
- Use of Healthier SG-compatible CMS will facilitate this and enable GP clinics to be more
  efficient over time (e.g., managing clinical documentation and meeting care reporting
  requirements for outcomes tracking and payment purposes), thus delivering better care.
- MOH has given a one-off \$10,000 GP IT Enablement Grant to support HSG clinics to adopt a suitable Clinic Management System (CMS) and contribute to NEHR. The application for the Grant has closed on 30 Jun 2024. Clinics who have applied have until 31st Mar 2025 to meet the disbursement criteria. More details can be found on https://www.primarycarepages.sg/healthier-sg/digital-resources/gp-IT-enablementgrant for ITE Grant.

#### 10. How would I know if my CMS is Healthier SG-compatible?

• The prevailing list of HSG-compatible CMSes can be found on <a href="https://www.synapxe.sg/partner-us/smartcms">https://www.synapxe.sg/partner-us/smartcms</a>, and refreshed annually every January based on the new additional requirements.

 The readiness of the prevailing HSG-compatible CMSes in meeting the following year's HSG-compatible requirements are tracked and circulated via regular infographics to all CHAS GPs.

#### **Health Plan**

# 11. What do I need to submit for the first Health Plan to claim for the \$50 remuneration by MOH?

- The Health Plan is an important document to facilitate health planning and conversation between enrollees and GPs.
- While it need not be completed in the first sitting, we encourage GPs to use the first session to fill in the Health Plan as best as you can. We encourage GPs to regularly review and update the Health Plan with their enrollee during each visit. The key updates (e.g., results of tests done; progress with health goals) will be reflected in the enrollee's HealthHub after the GP submits this in CMS.
- Not all fields in the Health Plan are compulsory. However, "recommended next visit
  month/ year" is a mandatory field for the Health Plan submission. Upon clicking "submit"
  in the Health Plan module in PCDS or your Healthier SG-compatible CMS, the Health
  Plan will be sent to HealthHub and the relevant national systems.
- There is no need for GPs to submit a claim separately for remuneration for the first Health Plan consultation.
- This consultation is fully-subsidised by MOH. Enrollees should not be charged a fee for this session.

# 12. Can I complete the first Health Plan consultation with the enrollee during a scheduled regular chronic disease appointment/ CHAS visit?

- Yes, the first Health Plan consultation can take place opportunistically, during other chronic or acute visits, provided the Healthier SG clinic is able to conduct a proper discussion with the enrollee to complete the Health Plan components.
- If the enrollee seeks other treatment/services during the first Health Plan consultation outside the scope of the Health Plan, the clinic should clearly inform the enrollee before providing the service that he/she will be charged separately for the additional treatment/services, based on the clinic's prevailing rates. The charges should be clearly itemised in the bill.

### 13. Do I need to complete the Health Plan in one session? How frequent should the review be done?

Co-creation of Health Plan

 We encourage you to complete the Health Plan in one session. However, if you are unable to complete it in one session, you may update the Health Plan at a later session. The Health Plan is a live document: it should reflect changes and updates in the resident's health condition and the various interventions and clinical activities over time.

#### Subsequent Check-Ins

- You should have regular, scheduled check-ins with the enrollee to assess any changes in the enrollee's overall health condition and progress. At each check-in, GPs should discuss the progress made with the enrollee's health goals, assess if the goals should be revised or if additional interventions are required. The Health Plan should be updated accordingly.
- The check-ins and updates to the Health Plan may be done opportunistically, where appropriate, during an acute or chronic visit. Otherwise, the GP should contact the enrollee to schedule a follow-up check-in.
- For well enrollees (defined as enrollees with no CDMP conditions), an annual checkin should be conducted. The first Health Plan consultation should be done in-person to
  establish rapport and relationship with the enrollee. Subsequent check-ins may be
  done by phone or video consultation. An in-person consult should be done minimally
  once every three years, provided the enrollee remains generally well.
- For chronic enrollees with at least one CDMP condition, there should be at least two chronic consultations annually where the Health Plan is updated during these visits. For purpose of the Annual Service Fee, the interval between these visits should be at least three months apart. If phone or video consultations are done, it should be clinically appropriate for at least one in-person annual consultation. Phone, video and in-person consultations are claimable under CHAS/ CDMP, subject to prevailing claim limits.

### 14. The Health Plan is established during first visit. For subsequent chronic visits, will the information be reflected into HealthHub as well?

 Any updates to the Health Plan submitted by the enrolled clinic will be reflected in enrollee's HealthHub.

#### 15. Can I amend the Health Plan if I find an error in the Health Plan?

 Yes, please adjust Health Plan to reflect the updated clinical assessment, progress of the enrollee and outcomes of discussion with him/her.

## 16. Is the Health Plan mainly going to be rolled out in the GP Clinic setting or in polyclinics as well?

• All Healthier SG clinics (including GPs and Polyclinics) will need to create and maintain the Health Plan for the enrollees enrolled to their clinic.

### 17. Will GST-registered clinics be reimbursed for GST on the first Health Plan consultation?

 Yes, GST-registered clinics will additionally receive the reimbursement for GST, based on the prevailing GST rate.

 Please refer to the Health Plan Care Protocol available online at AIC's Primary Care Pages website at <a href="https://www.primarycarepages.sg/healthier-sg">https://www.primarycarepages.sg/healthier-sg</a> for further information on the Health Plan.

#### 18. Can I enrol my residents during a home visit consultation?

• Yes, to better facilitate our residents who may have mobility issues and prefer to seek care at home, Healthier SG enrolment and Health Plan consultation will be extended to home visits.

#### 19. Do my enrollees need to pay for the annual Health Plan check-ins?

- Annual Health Plan check-ins for enrollees are fully-subsidised. These are brief
  discussions on the Health Plan initiated and conducted by the enrolled clinic. It may be
  done opportunistically during in-person visits, or by tele-consultation or over a phone
  call.
- The remuneration for these annual Health Plan check-ins is covered under the fixed component of the ASF. Healthier SG GPs are eligible to receive the annual fixed component of \$30 for each well enrollee or \$70 for each chronic enrollee. On completing the annual Health Plan follow-up from the previous year, including the submission of height, weight and smoking status data. Additional check-ins beyond the stipulated annual health plan check-in will not be subsidised.
- If the enrollee consults the GP on other matters beyond the scope of the Health Plan and agrees to the services/treatments offered by the GP, the clinic's prevailing charges will apply.

Please refer to the Health Plan Care Protocol available online at AIC's Primary Care Pages website at <a href="https://www.primarycarepages.sg/healthier-sg">https://www.primarycarepages.sg/healthier-sg</a> for further information on the Health Plan.

#### 20. What is the requirement to satisfy to receive ASF fixed payment for AY2024?

- GPs will need to complete annual Health Plan check-in in 2024 for HSG enrollees who completed their first Health Plan consultation 12 months ago in 2023.
- Fixed ASF payments will be computed based on care components from 2024 onwards.
- Variable ASF will be computed based on the care components completed from 2H2023 onwards.

#### Lab tests/ Medications

#### 21. Can I refer my enrolled patient to the polyclinic for lab tests / medication?

- GPs are advised to refrain from this practice as it runs counter to the intent of enrolling with the GP.
- We are aware that affordability of chronic medication is a key consideration for residents.

•	Subsidies for selected chronic medications under the HSG Medication List is available
	since Feb 2024 under the HSG Chronic Tier. We encourage HSG GPs to make this
	available for your chronic enrollees.

•	GPs are also encouraged to contact your PCN HQ to coordinate nursing and	care
	support to better manage their enrollees with chronic conditions.	