

By Mari Edlin

Singapore is somewhat of an anomaly. The 438-square mile island, which houses 4.5 million people, is considered a city, island state, a country and even a brand. It is emboldened by public/private partnerships that shape its healthcare, economy and tourism, creating one of the cleanest and most efficiently run countries in the world.

From the outside, Singaporeans might seem a bit politically and socially repressed—same ruling party since 1959—but the status quo is a small price to pay for adopting a “brand” that provides almost seamless healthcare; housing (a large majority own their own home); high employment; and a good education. Cars, unfortunately, are another story in this country of imports and are quite expensive to own.

Under the auspices of the Academy for International Health Studies (AHIS), I recently visited Singapore with 30 executive delegates to study the country’s healthcare system. While I have a new respect for how a healthcare system can function smoothly, I am also in awe of a country that is wall-to-wall shopping malls, restaurants and food stalls. You have to wonder if Singaporeans do anything besides shop and eat.

Two-thirds of healthcare in Singapore is financed by the private sector—complemented by government subsidies (through taxation) to keep basic healthcare affordable and to provide a safety net for poorer individuals. Quality of care achieved through national standards, Joint Commission International hospital accreditation, transparency and .a culture of safety; supply-side regulations; friendly competition; and efficient financing round out the attributes of Singapore’s healthcare. During our visit, the mien of the speakers, representing both the public and private healthcare sectors, rang evangelically with a strong sense of pride rather than sounding like proselytizing.

A Three-Pronged System

At the heart of the healthcare system is individual responsibility driven home by Medisave, the country’s compulsory national health savings account covering the entire family. As many as 85% of Singaporeans obtain their care through the fund, which is tax-free, earns interest and becomes part of one’s estate after death. That’s not to say, however, that they are exempt from out-of-pocket expenses, usually in the form of deductibles and copayments. If only health savings accounts in our country would capture the interest of more than the eight million current enrollees and worked as effectively.

Joining Medisave as supports for the three-pronged healthcare financing scheme are Medishield and Medifund. The former, offered by the government and through private insurance plans, provides insurance against large “catastrophic”

medical bills and can be funded by Medisave, while Medifund is a government endowed safety net for needy Singaporeans.

With an eye on an impending senior population—only around 8% of the population is currently older than 65—the government recently added EldersShield, a private insurance system that serves as insurance against the high cost of long-term care. In reality, the country still has much to do to meet the needs of older citizens and a rapidly ageing population.

The Tables are Turned

Although the private sector delivers 80% of the primary care, publicly owned facilities provide 80% of hospital care and even offer choice: consumers can pay for better hospital accommodations, a higher class of service with one- or two-bedded rooms with air conditioning, a ward with fans or some alternative in between. Patients are responsible for the full cost of their stay in the more expensive rooms, while the government subsidizes part of the lesser hospital accommodations. Singaporeans can fund some of their hospital stay through Medisave.

Unfortunately, Singapore had declared a high-level, orange alert for the H1N1 virus during our visit, prohibiting us from visiting any of the hospitals. While Singapore may have overcompensated for the threat of the flu, there was no doubt the country was fully prepared for a pandemic. If we could run healthcare in the United States as efficiently as AIHS revamped its program in light of the high-level alert, our country could better manage its ills.

Phua Kai Hong, a professor at the Lee Kuan Yew School of Public Policy, National University of Singapore, put it quite succinctly when he said the key to the success of Singapore's healthcare system, is "there's no free lunch." He also points out that Singapore's system represents the last bastion of family caring.

Healthy Competition

The public healthcare system, headed by the Ministry of Health (MOH), is managed by several healthcare clusters, predominantly Singapore Health Services and the National Healthcare Group, which both offer a full gamut of specialties and services. Run like private companies, the organizations face off in friendly competition to improve care and keep it affordable. The Raffles Medical Group, the only private healthcare provider operating on a group practice model, and Parkway Health dominate the private sector.

Medical travel and Singapore's Biopolis, a high-tech, biomedical park costing \$500 million (Singapore dollars) are two other kingpins of the country's system. Jason Yap, M.D., director, marketing for Raffles Hospital, is quick to call the new

revenue builder “medical travel “ instead of medical tourism, emphasizing that Singapore is “extending the continuum of healthcare across international borders,” not “adding medical services to tourism.” Boasting about Singapore’s high-quality patient services, medical care and capabilities, he says that medical travel to Singapore has grown 43% between 2004 and 2006. The country anticipates attracting one million foreign patients by 2012.

When a country spends as little as 3.7% of GDP on healthcare—yet still insures all of its residents—one has to ask, “How is it possible?” The United States shares the same standards—healthcare that is appropriate to the patient’s needs based on current evidence and clinical knowledge across the continuum of care—but until there is reform, the two countries stand worlds apart.