CHI Learning & Development (CHILD) System



Project Title

Righting the Wrong Perceptions of Public Healthcare

Project Lead and Members

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Organisation(s) Involved

Singapore General Hospital, National Cancer Centre Singapore, National Heart Centre Singapore, Singapore National Eye Center

Healthcare Family Group(s) Involved in this Project

Healthcare Administration

Applicable Specialty or Discipline

Patient Liaison Service

Project Period

Start date: January 2021

Completed date: April 2022

Aim(s)

 To correct the misconception the public has about the public healthcare and empower the FAs with the knowledge to navigate public healthcare system and



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advise their policyholders on admission, billing and claims processes and the contact points of the healthcare institutions should they require further assistance.

Background

See poster appended/below

Methods

See poster appended/ below

Results

See poster appended/ below

Conclusion

See poster appended/ below

Project Category

Care & Process Redesign

Access to Care, Waiting Time, Referral Rate, Quality Improvement, Value Based Care

Keywords

Financial Advisors, Public Education, Hospital Insurance Premium

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Righting the Wrong Perceptions of Public Healthcare





INTRODUCTION: (C):

There is a general perception that public healthcare is a complex system which sees only subsidized patients; often associated with long waiting time for appointments; cheaper and less effective medications are dispensed to patients and many more.

Financial Advisors (FAs) are usually approached by their policyholders to recommend specialists for their medical condition. It is useful for the FAs to be equipped with the right knowledge of public healthcare so that they can provide appropriate advice to their policyholders.



PROBLEMS

Public healthcare system is perceived to be complex with complicated processes and often associated with sub-optimal services in terms of long waiting time, dated facilities, equipment and technology. Without the right knowledge and information, financial advisors may not be able to assist their clients on public healthcare matters.

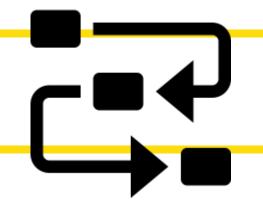
OBJECTIVE





To correct the misconception the public has about the public healthcare and empower the FAs with the knowledge to navigate public healthcare system and advise their policyholders on admission, billing and claims processes and the contact points of the healthcare institutions should they require further assistance.

METHODOLOGY



- SGH PLS took the lead to rally the PLS teams @ Outram Campus (SNEC, NHCS and NCCS) together.
- Brainstormed on the sharing contents to help the FAs to better appreciate the public healthcare system.
- PLS @ Outram Campus present to the FAs on the overview of public healthcare system, a typical patient's journey with the hospital, new aimed at improving patients' initiatives experience and clinical services available in their institutions.



- From the sharing session, the FAs provided feedback on the processes and service gaps they or their policyholders encounter that affected patients' experience and satisfaction.
- PLS then works with internal stakeholders to iron out the operational issues.
- Compiled the Frequently Asked Questions (FAQs) on general Admin, Billing and Claims which is sent to FAs as a follow up after each sharing session.
- A half-yearly update session is planned for continuation of information sharing and as a platform for feedback and clarification.

"Knowledge is power. Knowledge shared is power multiplied"

Patient Liaison Service @ Outram Campus

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Lim Jia Mei, Sylvia Bong NCCS: Lee Siew Choo, Fion NHCS: Kwan Han Nan **SNEC**: Peh Jing Hui, Jolene

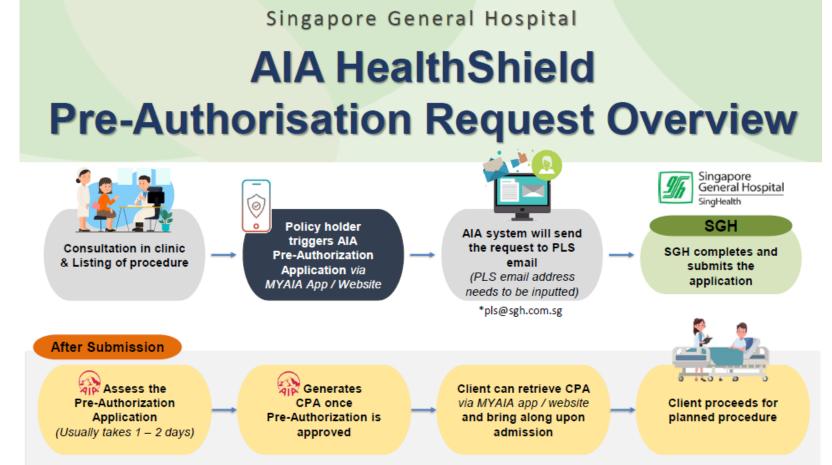
RESULTS (6)

The initiative was started in January 2021 and by end of April 2022, the team has conducted 81 sharing sessions, reaching out to more than 2000 FAs from 79 insurance agencies.



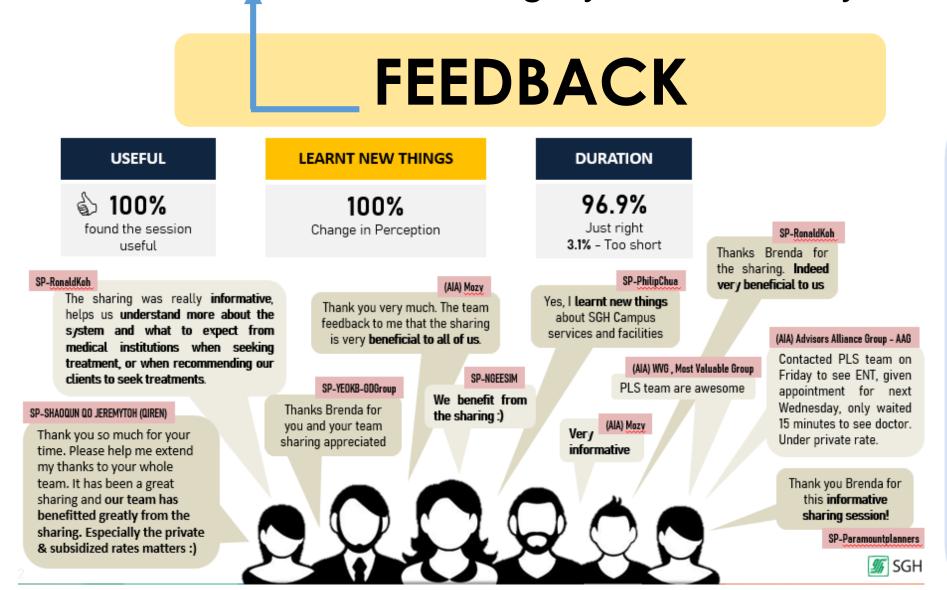


Worked with AIA successfully to allow electronic Certificate Pre-Authorization (CPA) Request to be made available for SGH and NHCS patients who are Singaporeans and Permanent Residents (PR) and those who have exclusion of illnesses.



This group of policyholders previously was not eligible for eFile (ie an electronic Letter of Guarantee) when they are admitted to SGH and NHCS, and are required to pay their hospital bill upfront and make the claims later.

With the CPA request being allowed, this group of policyholders no longer needs to worry about the hospital bill to be incurred and can have peace of mind to focus on their surgery and recovery.



Achieved better understanding on public healthcare processes 100% Found the sharing

session useful

206 feedback received

CONCLUSION



Given that more than 170% of Singaporeans and PRs have private insurance shield plans, Financial Advisors (FAs) have been identified as one of the key partners to help us educate their policyholders on the public healthcare system and its services and provide feedback on pain points experienced by their policyholders that deterred them from using public healthcare services.

The misconception and queries the FAs may have are being addressed during the sharing, and we hope they can in turn help us to educate and provide the correct perspective to their policyholders.

With better insights of the angsts faced by the FAs and the policyholders, we are able to work with our internal stakeholders to iron out those kinks in our processes to make their experience with the public healthcare a better one.

The constant dialogue with the FAs and availability of the point of contacts in the Outram Campus allow quick access for the FAs to reach us. We hope this will in turn increase the accessibility of public healthcare services to the policyholders, enhance their experience with us and ultimately contain the overall healthcare costs to make the hospital insurance premiums more affordable for all.