

# **Foreword**



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Seeking healthcare can be stressful and uncertain. In those moments, people look for clear information, timely access and trusted support—they want peace of mind when it matters most.

Our commitment to supporting patients begins with listening to their voices. That's why we commissioned Economist Impact to explore how residents in Singapore seek access to healthcare—what they value, what challenges they face, and how the system can better support their needs.

In Patient voices Singapore: towards more informed, and seamless care, it is encouraging to see the healthcare system recognised for its efficiency, equity, and strong financial safety net—supported by public schemes like MediSave and MediShield Life, alongside government subsidies and private insurance.

The report also highlights ways to improve the patient experience. While some may delay care due to emotional hesitation, uncertainty, or unexpected costs, these insights point to opportunities to strengthen clarity, confidence and connection—empowering people to take timely and proactive steps toward better health.

Prudential is committed to supporting Singapore's Healthier SG initiative, which focuses on preventive care, stronger primary care, and better care coordination. Our own efforts, such as PRUPanel Connect—our hospital partnership programme—are designed to create a more seamless healthcare experience, aligning with the nation's vision for a healthier, more connected future.

We hope the insights shared in this report will be valuable to all stakeholders across the healthcare system. Together, we can take meaningful steps to ensure healthcare is more informed and seamless for everyone.

## Market spotlight: Singapore

Singapore's health system offers both affordability and choice. Public hospitals and clinics provide subsidised care, making essential medical services accessible to all citizens and permanent residents. A parallel private system offers faster access and more convenience for those able or willing to pay a premium. This dual model coexists with Singapore's high performance on the World Health Organisation's universal health coverage (UHC) service coverage index\*\*, which measures access to essential services. In 2021, Singapore scored 89 out of 100.1.2

People in Singapore pay for healthcare through a mix of savings, insurance and government support, under a model known as the "3Ms": MediSave, a mandatory savings scheme; MediShield Life, a basic insurance for large hospital bills; and Medifund, a safety net for those unable to pay.<sup>3</sup> Private Integrated Shield Plans complement these and offer extra cover.<sup>4</sup>

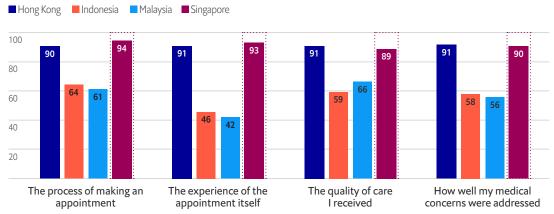
The range of available services and payment options, however, does not fully define the patient experience. Patients' needs vary, shaping their expectations as they move through the healthcare system.

To better understand how people in Singapore experience healthcare, Economist Impact surveyed 1,024 adults in the country and interviewed three local experts. Identical surveys were also undertaken in Hong Kong, Indonesia and Malaysia.<sup>#</sup> The total number of respondents across all four markets was 4,203.<sup>5</sup>

## **Access beyond availability**

In Singapore, care is available from a wide range of providers, from publicly run polyclinics and private clinics to public and private hospitals. Most respondents from Singapore cited they were satisfied with the medical care they received in the past year, significantly higher than in regional neighbours, Indonesia and Malaysia (Figure 1).

**Figure 1: Satisfaction with different aspects of medical care received in the past year, by markets** % responding (respondents who selected 'Satisfied')\* Numbers have been rounded for ease of interpretation



\*N=4,203 adults surveyed (1,153 from Hong Kong, 1,006 from Indonesia, 1,020 from Malaysia and 1,024 from Singapore), April-May 2025 Source: Economist Impact, 2025

<sup>\*\*</sup> The UHC service coverage index measures access to essential health services—including reproductive, maternal, newborn and child health, infectious and non-communicable diseases, and health system capacity. It ranges from 0 to 100 and does not reflect service quality or financial protection.

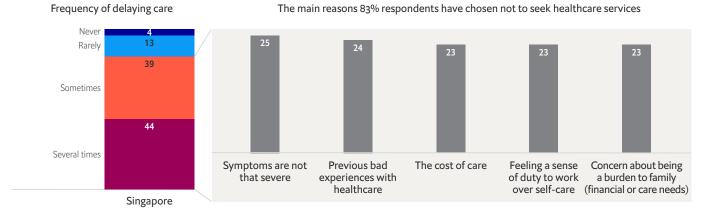
<sup>#</sup> Economist Impact. Patient voices: experiences of healthcare access in Asia. For a comprehensive overview of the research methodology, please refer to the Appendix of this report.<sup>5</sup>

Yet people often delay seeking care. Eight in ten respondents reported delaying care sometimes or several times in the past year—most often for personal reasons, such as downplaying symptoms, prioritising work or worrying about burdening family. Others pointed to cost or previous poor experiences as top reasons (Figure 2).

Figure 2: Frequency of and reasons for delaying care

The main reasons respondents have chosen not to seek healthcare services

% responding (Frequency: single response allowed; Reasons: up to three responses selected)\* Numbers have been rounded for ease of interpretation



<sup>\*</sup>Left chart: N=1,024.

Right chart: N=850 (Based on the subset of respondents who cited delaying care sometimes or several times in the past 12 months.)

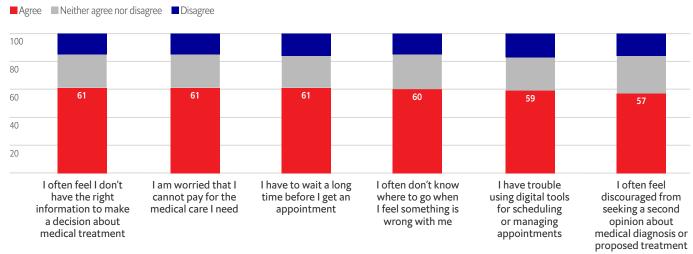
April-May 2025.

Source: Economist Impact, 2025

Even when people did seek care, many reported encountering barriers. Six in ten said they often did not know where to access care when something is wrong (Figure 3). "The confusion is not around access, but around where to anchor your level of care: should I go to a general practitioner, or should I go to the hospital, and then should it be public or private?" says Nidhi Swarup, founding chairperson of the Alliance of Patients' Organisations Singapore.

Figure 3: Patient experiences while accessing care

% responding (respondents could select a single response per option)\* Numbers have been rounded for ease of interpretation



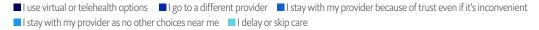
\*N=1,024, April-May 2025 Source: Economist Impact, 2025 Getting an appointment poses further difficulty. Around 60% of respondents said they usually face long waits. "One of the cited pain points for individuals choosing subsidised care is the relatively longer waiting time if it is not an emergency," says Wai Kit Chan, executive director of Life Insurance Association Singapore. "Unless your condition is critical, the wait during peak periods, whether at a polyclinic or a public hospital, may be daunting to some especially if they are in discomfort." Nearly 60% of respondents from Singapore had trouble using digital tools for scheduling or managing appointments. Research in Singapore shows that this can be particularly challenging for vulnerable populations such as older adults or those with physical disabilities. <sup>6,7</sup>

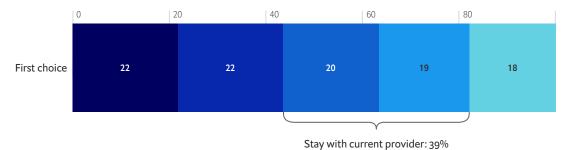
Many patients find alternatives. When appointments are delayed, 22% said their first choice is to use telehealth options or switch providers. Still, 39% continue with the same provider, because they trust them or have few alternatives nearby (Figure 4).

Figure 4: When appointments are delayed, most patients find alternatives

How do people respond to long waits for medical appointments?

% responding (respondents could select a single response).\* Numbers have been rounded for ease of interpretation





\*N=1,024, April-May 2025 Source: Economist Impact, 2025

To make it easier for people to know where to go, the government has launched Healthier SG (see Box 1).8

## Box 1: Healthier SG at a glance<sup>9</sup>

#### What is it?

A national preventive health strategy launched in July 2023 to shift Singapore's health system from hospital-based treatment to community and primary care.

## What does it do?

Encourages residents to enrol with a family doctor who develops a personalised health plan. The plan includes screenings, vaccinations and lifestyle advice. First consultation and key preventive services are fully subsidised and chronic disease management is supported.

#### Who is involved?

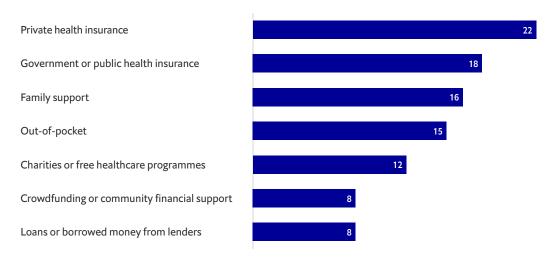
Family doctors, regional health systems, community partners and government agencies.

## The affordability gap

Schemes such as MediSave, MediShield Life and targeted subsidies are designed to protect individuals from the high costs of healthcare and are used by many.<sup>3</sup> This is reflected in our survey, where private insurance and government subsidies are the two most common ways of paying for care (Figure 5). Government support remains strong, with rising subsidies and a 16% nominal increase in the Ministry of Health's budgeted spending in 2025, reflecting new investments and a continued focus on subsidies and system reforms.<sup>10,11</sup>

Figure 5: How respondents pay for care

% responding (respondents could select a single response)\* Numbers have been rounded for ease of interpretation



\*N=1,024, April-May 2025 Source: Economist Impact, 2025

This financial protection does not always mean people can predict or pay for care when they need it. Unexpectedly high bills offer a clear example: nearly half of respondents said their medical costs exceeded expectations in the past year. As Figure 3 shows, just over six in ten respondents in Singapore are worried they won't be able to afford care when they need it. This concern was more common among baby boomers, lower-income households, and people who mainly used public insurance in our survey. Respondents who feared they could not pay for care were also more likely to put off treatment. Among those who delayed care some or several times, almost a quarter cited cost as the reason (Figure 2).

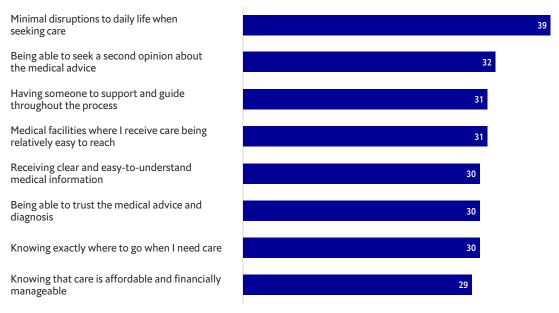
These concerns do not necessarily mean there is a lack of government support. Rather, people often lack clear information about how much care will cost. Resources do exist. The Ministry of Health provides national fee benchmarks and a bill comparison tool, which provide ranges of costs that can help individuals plan for healthcare costs. <sup>12</sup> But awareness is low, and early planning is uncommon. "There isn't enough effort to create public awareness about the online tool. It should be an easy-to-recall website address so that when a person needs to access private hospital services, we can immediately think of it. Almost like 995 for an ambulance," says Ms Swarup. She adds, "Most people live healthily and assume nothing will happen. When something does, no one has prepared us. Education is needed so people understand what to expect, where to go, and how they wish to be cared for." She notes that cost discussions often start in the emergency department or after hospitalisation, when stress levels can be too high to take in the details and by which time planning is no longer possible.

#### Seeking care that is seamless and well-guided

Respondents in Singapore value care that causes minimal disruption to daily life (39%), allows them to seek a second opinion (32%), provides guidance throughout the care process (31%) and offers clear and easy-to-understand medical information (30%) (Figure 6). These preferences reflect a desire for clarity, continuity and confidence in knowing where to go and what to expect.

Figure 6: Top factors that provide support, confidence and peace of mind in healthcare

% responding (respondents could select up to three responses)\* Numbers have been rounded for ease of interpretation



\*N=1,024, April-May 2025 Source: Economist Impact, 2025

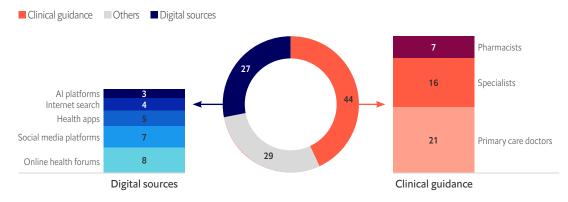
But these expectations are not always met. About a fifth of respondents cited unclear medical processes as a significant barrier to care. Six in ten respondents said they lacked the information needed to make informed decisions, and more than half felt discouraged from seeking a second opinion (Figure 3). Administrative hurdles add further friction, with 22% citing confusing bureaucracy and paperwork as a key barrier. Ms Swarup explains, "Even a second opinion can mean returning to a GP for another referral letter before seeing a different specialist, a tedious process that discourages timely care for many."

The government's initiative to consolidate health records could smoothen the process by connecting primary and hospital care and tracking patients from diagnosis to recovery.<sup>13, 14</sup> "In Singapore, hospital data is well linked, allowing us to track patients from admission through discharge and readmission. Some GP data, however, is yet to be linked to this system," says Sanjeewa Kularatna, an associate professor at Duke-NUS Medical School in Singapore. All private hospitals have committed to integrating their data with the National Electronic Health Record by 2025, as part of efforts to build a seamless national system that connects care across settings.<sup>14</sup>

About 30% of respondents in Singapore cited that having someone to guide them through the care process gives them peace of mind. When it comes to seeking guidance after initial diagnosis, most turned to formal healthcare providers. Primary care doctors (21%) and specialists (16%) top the list of trusted sources for healthcare decisions (Figure 7). But trust does not rest on credentials alone. Patients increasingly value doctors with an approachable and genuine demeanour, showing empathy and compassion—not just technical competency.<sup>15</sup>

#### Figure 7: Getting advice on treatment

In the last year, who or what has helped respondents make decisions on their course of care after initial diagnosis? % responding (respondents could select a single response)\* Numbers have been rounded for ease of interpretation



\*N=1,024, April-May 2025 Source: Economist Impact, 2025

## Making a strong system easier to use

Singapore's healthcare system is well-funded and efficient. There are plenty of services available and the foundations for good patient care are strong.

The challenge now is to ensure that these resources can be accessed by patients with confidence and ease. Clearer pricing could come through better promotion of the national fee benchmarks, along with greater clarity on which services are covered and which require out-of-pocket payment. Flexible arrangements, including online consultations and easier access to second opinions, are gaining traction through ongoing digital health efforts and could help people fit care around their lives, minimising disruption to work, family and daily routines.

Trust in doctors remains a vital strength. But turning a well-resourced system into a well-understood one will require stronger support tools to guide patients. Efforts to educate people early—so they know what to expect, where to go, and how they wish to be cared for—can help them plan their health needs and make confident decisions when care is needed. In addition to understanding costs, these could include help in reaching the right provider, checking eligibility for existing schemes and managing the necessary administrative steps along the way. Measures that support these goals would give people greater clarity about where to go and what to expect during their care.

Singapore has built a strong healthcare system. Now, the focus should be on making it easier for people to understand, access, and use. With easy-to-understand information, better support, clearer costs and more flexible options, patients can feel more confident and better cared for—positioning Singapore among the most patient-centred systems in Asia.

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