

FOR IMMEDIATE REPORTING

**HEALTH INFORMATION BILL TO SUPPORT COORDINATED CARE
ACROSS SINGAPORE'S HEALTHCARE ECOSYSTEM**

The Health Information Bill (HIB), which was tabled for Second Reading in Parliament today, will govern the sharing of key health information across Singapore's healthcare ecosystem for better coordinated care.

2 Singapore faces a rapidly ageing population alongside increasing life expectancy. This demographic shift imposes a greater burden of chronic diseases which requires sustained, coordinated care across our healthcare providers. To support this, the centre of gravity of healthcare has been shifting away from acute hospitals towards the community, with more healthcare services delivered in the vicinity of patients' homes.

3 National programmes such as Healthier SG and Age Well SG, as well as initiatives such as Home Personal Care and Mobile Inpatient Care @ Home have strengthened healthcare in the community. As a result, Singaporeans now receive treatment from a wider range of healthcare providers, from acute hospitals and medical clinics, to community hospitals, dialysis centres and home medical services.

4 Ensuring care is coordinated across settings becomes important. The starting point is to ensure that each healthcare provider has access to a consistent set of patient information. The National Electronic Health Record system (NEHR) was therefore developed to ensure this. Over the years, it has enabled patient summary records to be shared across the entire public healthcare system. Because of Healthier SG, most General Practitioners (GP) have come on board NEHR. Private hospitals have or are in the process of coming on board.

5 However, certain segments of healthcare providers are still not fully on NEHR. Private specialist clinics are an example – when patients go to private specialist clinics and subsequently follow up with their regular GPs, their key health records are often not accessible across the providers. Other segments with remaining gaps include clinical and radiological laboratories and dental clinics. While they are a minority of all healthcare providers, such gaps can risk medication errors, delayed treatment, and duplicate tests and procedures.

6 The HIB will address these remaining gaps, by making it a requirement for all licensed healthcare providers to share key health information of patients to NEHR.

This will include allergies, vaccinations, diagnoses, medications, laboratory test results, radiological images and discharge summaries. The HIB will also provide for the sharing of non-NEHR health information to facilitate community health initiatives and community-based care.

7 Patients will thus benefit from better coordinated care, enhanced quality of care and lower costs. The HIB will help achieve the goal of 'One Patient, One Health Summary, One Care Journey'.

Safeguards Governing NEHR Access For Provision of Patient Care

8 The Bill also introduces legislative safeguards to complement existing technical controls, such as regular audits to flag inappropriate access.

9 In general, NEHR access is for patient care purposes only, and only healthcare providers and healthcare professionals whom patients are seeking care from will be able to access the patient's NEHR information. This includes doctors, nurses, pharmacists and allied health professionals.

10 Access for employment or insurance purposes is prohibited, except for a specified list of medical examinations required or permitted under written law.

11 Patients' key health information will be contributed to NEHR and by default, will be accessible by their healthcare providers to support continuity of care across healthcare settings. Individuals will be able to monitor access by healthcare providers to their NEHR information via the HealthHub application and report any unauthorised access to MOH. However, patients with specific concerns may place Access Restrictions through HealthHub, so that only select healthcare providers may view their NEHR information.

12 When an Access Restriction is placed, a subset of information comprising allergies and vaccination information will remain accessible to healthcare providers to reduce the risk of inappropriate prescriptions or immunisation when patients visit a new healthcare provider. Further, in the event of medical emergencies, doctors will be able to activate a 'break glass' feature, so that they still have access to individuals' NEHR despite Access Restrictions to provide timely and effective care, to save the patient's life.

Sharing of Non-NEHR Health Information for Community-based Care

13 Today, the Agency for Integrated Care (AIC) already shares data with community care providers to enable them to engage and provide befriending services or care to vulnerable seniors. The HIB will provide an additional basis for the sharing of health information to better support national health programmes and initiatives, enabling proactive support for Singaporeans who may benefit from interventions or community health services.

14 For example, under national programmes like Healthier SG and Age Well SG, healthcare clusters will be able to share contact information of vulnerable seniors with AIC to enable AIC to reach out to the seniors and help connect them with relevant healthcare providers and community-based services based on their needs. This will enhance our community health initiatives.

Protecting Health Information

15 Healthcare providers that contribute to and access the NEHR, and entities allowed to share and receive non-NEHR health information, will be required to meet cybersecurity and data security requirements to protect health information. These requirements ensure that healthcare providers and relevant entities implement appropriate technical and organisational safeguards for the proper storage, access, use, and sharing of health information, and notify MOH of confirmed cybersecurity incidents and data breaches in a timely manner.

Implementation

16 To ensure healthcare providers have sufficient time to familiarise themselves with the HIB's requirements, and to strengthen their cybersecurity and data security posture, we intend for the HIB to take effect from early 2027. Training resources and programmes, as well as funding support, will be made available to support healthcare providers and healthcare professionals.

17 The HIB will play a critical role in supporting the transformation of our healthcare delivery model. By enabling the sharing of key health information within our healthcare ecosystem, Singaporeans will benefit from better coordinated care, enhanced quality of care and lower costs.

MINISTRY OF HEALTH
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