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**No. S 177**

**CENTRAL PROVIDENT FUND ACT  
(CHAPTER 36)**

**CENTRAL PROVIDENT FUND  
(MEDISAVE ACCOUNT WITHDRAWALS)  
(AMENDMENT) REGULATIONS 2015**

In exercise of the powers conferred by section 77(1)(j) of the Central Provident Fund Act, the Minister for Manpower, after consulting with the Central Provident Fund Board, makes the following Regulations:

**Citation and commencement**

1. These Regulations may be cited as the Central Provident Fund (Medisave Account Withdrawals) (Amendment) Regulations 2015 and come into operation on 1 April 2015.

**Amendment of regulation 2**

2. Regulation 2(1) of the Central Provident Fund (Medisave Account Withdrawals) Regulations (Rg 17) (referred to in these Regulations as the principal Regulations) is amended —

- (a) by inserting, immediately after the words “non-qualifying medical treatment” in paragraph (a)(ii) of the definition of “out-patient scan”, the words “or specified out-patient treatment”; and
- (b) by inserting, immediately after the definition of “specified organ”, the following definition:

“ “specified out-patient treatment” means any out-patient medical treatment or out-patient psychiatric treatment, approved by the Minister for Health for the purposes of regulation 21B;”.

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**Amendment of regulation 3****3. Regulation 3 of the principal Regulations is amended —**

- (a) by deleting the words “medical treatment, psychiatric treatment” in paragraph (3A)(a) and substituting the words “medical treatment or psychiatric treatment (except any specified out-patient treatment, or any treatment, scan, vaccination or screening referred to in regulation 21C(1)),”;
- (b) by inserting, immediately after paragraph (3A), the following paragraphs:

“(3B) An application by a member to withdraw moneys from the member’s medisave account to pay for —

- (a) any specified out-patient treatment received by the member or the member’s spouse; or
- (b) any treatment, scan, vaccination or screening referred to in regulation 21C(1) received by the member or the member’s spouse,

must be made by the member within the period of 12 months, or within such further period as the Board may specify in any particular case, commencing immediately after the relevant date.

(3C) A prescribed person may make an application under paragraph (3B) on behalf of the member, in respect of any specified out-patient treatment or any treatment, scan, vaccination or screening referred to in regulation 21C(1) received by the member, if the member —

- (a) is unconscious or otherwise mentally incapacitated; and
- (b) is unable to make an application under paragraph (3B) himself.

(3D) An application by a prescribed person under paragraph (3C) must be signed by the prescribed person, in the presence of an approved medical practitioner who

must confirm in writing that the member is unable to make the application due to the member's medical condition.

(3E) The Board may authorise the whole or part of the amount standing to the member's credit in the member's medisave account to be withdrawn and used for the payment referred to in paragraph (3B) —

- (a) if the Board is of the opinion that the conditions referred to in regulation 21B(2) or 21C(2), as the case may be, are satisfied, and has determined that such withdrawal does not exceed the withdrawal limit in regulation 21D; and
- (b) subject to the direction of the Minister for Health and such other terms and conditions as the Board may impose.”; and
- (c) by deleting the word “or” at the end of sub-paragraph (b) of paragraph (6), and by inserting immediately thereafter the following sub-paragraph:
  - “(c) in a case of an application under paragraph (3B), the date on which the member or the member's spouse (as the case may be) received the specified out-patient treatment, or the treatment, scan, vaccination or screening referred to in regulation 21C(1); or”.

#### **Amendment of regulation 4**

4. Regulation 4 of the principal Regulations is amended —

- (a) by deleting the words “medical, psychiatric” in paragraph (1) and substituting the words “medical treatment or psychiatric treatment (including any specified out-patient treatment),”;
- (b) by deleting the words “or 21” in paragraph (1) and substituting the words “, 21 or 21D”; and
- (c) by deleting the words “medical treatment, psychiatric treatment” in paragraphs (4) and (6) and substituting in

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each case the words “medical treatment or psychiatric treatment (including any specified out-patient treatment),”.

### **Amendment of regulation 13**

5. Regulation 13 of the principal Regulations is amended —

- (a) by deleting the words “subject to regulation 24” in paragraph (1) and substituting the words “subject to regulations 21C, 21D and 24”; and
- (b) by deleting the word “Where” in paragraphs (2), (3) and (6) and substituting in each case the words “Subject to regulations 21C and 21D, where”.

### **Amendment of regulation 13A**

6. Regulation 13A(1) of the principal Regulations is amended by deleting the word “Where” and substituting the words “Subject to regulations 21C and 21D, where”.

### **Amendment of regulation 14**

7. Regulation 14(1) of the principal Regulations is amended —

- (a) by inserting, immediately before the words “in respect of any such treatment received” in paragraph (a), the words “subject to regulation 14C,”; and
- (b) by inserting, immediately before the words “in respect of any such treatment received” in paragraph (b), the words “subject to regulations 14C, 21C and 21D,”.

### **Amendment of regulation 14A**

8. Regulation 14A(1) of the principal Regulations is amended by deleting the word “Where” and substituting the words “Subject to regulations 14C, 21C and 21D, where”.

### **Amendment of regulation 14B**

9. Regulation 14B(1) of the principal Regulations is amended by deleting the word “Where” and substituting the words “Subject to regulations 14C, 21C and 21D, where”.

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**Amendment of regulation 14C**

- 10.** Regulation 14C of the principal Regulations is amended —
- (a) by deleting the words “The total amount” and substituting the words “Subject to regulations 21C and 21D, the total amount”; and
  - (b) by deleting the words “Additional limit” in the regulation heading and substituting the words “Total limit”.

**Amendment of regulation 19**

- 11.** Regulation 19 of the principal Regulations is amended —
- (a) by deleting the words “Notwithstanding anything in these Regulations but subject to regulation 24, where a member or his dependant has received renal dialysis treatment” in paragraph (2) and substituting the words “Despite anything in these Regulations but subject to regulations 21C, 21D and 24, where a member or his dependant has received renal dialysis treatment as an out-patient”;
  - (b) by deleting sub-paragraph (d) of paragraph (2);
  - (c) by inserting, immediately after paragraph (2), the following paragraph:

“(2A) Despite anything in these Regulations, where a member has received renal dialysis treatment as an in-patient in an approved centre or approved hospital, the member may withdraw the amounts permitted to be withdrawn under regulation 5 for the renal dialysis treatment.”;
  - (d) by inserting, immediately after the words “renal dialysis treatment” in paragraph (3), the words “as an out-patient”; and
  - (e) by deleting the words “paragraph (2)” in paragraph (4) and substituting the words “paragraphs (2) and (2A)”.

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**New regulations 21B, 21C and 21D**

12. The principal Regulations are amended by inserting, immediately after regulation 21A, the following regulations:

**“Withdrawal for specified out-patient treatment**

**21B.**—(1) Subject to the withdrawal limit specified in regulation 21D, a member may withdraw moneys from the member’s medisave account to pay for any specified out-patient treatment received, on or after 1 April 2015, by the member or the member’s spouse if the conditions in paragraph (2) are satisfied.

(2) The conditions for withdrawal of moneys under paragraph (1) are —

(a) where the out-patient is the member —

- (i) the member is 65 years of age or older at the time the member receives the specified out-patient treatment;
- (ii) the specified out-patient treatment for the member is instructed by an approved medical practitioner; and
- (iii) the member receives the specified out-patient treatment other than as part of an approved treatment package; and

(b) where the out-patient is the member’s spouse —

- (i) the member and the member’s spouse are both 65 years of age or older at the time the member’s spouse receives the specified out-patient treatment;
- (ii) the specified out-patient treatment for the member’s spouse is instructed by an approved medical practitioner; and
- (iii) the member’s spouse receives the specified out-patient treatment other than as part of an approved treatment package.

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**Additional withdrawal for treatment, etc., received as out-patient**

**21C.**—(1) Subject to the withdrawal limit specified in regulation 21D, a member may withdraw moneys from the member's medisave account to pay for any of the following received, on or after 1 April 2015, by the member or the member's spouse as an out-patient if the conditions in paragraph (2) are satisfied:

- (a) any treatment of neoplasms by chemotherapy referred to in regulation 13(2), any approved medical treatment referred to in regulation 13(3) or any cancer scan or diagnostic test referred to in regulation 13(6);
- (b) any out-patient scan referred to in regulation 13A(1);
- (c) any approved chronic illness treatment referred to in regulation 14(1);
- (d) any approved vaccination referred to in regulation 14A(1);
- (e) any approved screening referred to in regulation 14B(1);
- (f) any renal dialysis treatment referred to in regulation 19(2).

(2) The conditions for withdrawal of moneys under paragraph (1) are —

- (a) where the out-patient is the member —
  - (i) the member is 65 years of age or older at the time the member receives the treatment, scan, vaccination or screening referred to in paragraph (1)(a), (b), (c), (d), (e) or (f) (as the case may be); and
  - (ii) the member receives the treatment, scan, vaccination or screening referred to in paragraph (1)(a), (b), (c), (d), (e) or (f) (as the case may be) other than as part of an approved treatment package; and

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- (b) where the out-patient is the member's spouse —
- (i) the member and the member's spouse are both 65 years of age or older at the time the member's spouse receives the treatment, scan, vaccination or screening referred to in paragraph (1)(a), (b), (c), (d), (e) or (f) (as the case may be); and
  - (ii) the member's spouse receives the treatment, scan, vaccination or screening referred to in paragraph (1)(a), (b), (c), (d), (e) or (f) (as the case may be) other than as part of an approved treatment package.

(3) To avoid doubt, any amount that may be withdrawn under paragraph (1) is in addition to any amount that may be withdrawn in accordance with the withdrawal limits specified in regulations 13, 13A, 14, 14A, 14B, 14C and 19 (as the case may be) for the relevant treatment, scan, vaccination or screening referred to in paragraph (1).

#### **Total limit for withdrawal under regulations 21B and 21C**

**21D.** The total amount that a member may withdraw under regulations 21B and 21C, in respect of all specified out-patient treatments and all treatments, scans, vaccinations and screenings referred to in regulation 21C(1), must not exceed \$200 per patient per year.”.

#### **Amendment of regulation 23**

**13.** Regulation 23 of the principal Regulations is amended by deleting the words “medical, psychiatric” wherever they appear and substituting in each case the words “medical treatment or psychiatric treatment (including any specified out-patient treatment).”.

*[G.N. Nos. S 224/2007; S 527/2007; S 731/2007;  
S 149/2008; S 456/2008; S 682/2008; S 86/2009;  
S 239/2009; S 523/2009; S 659/2009; S 88/2010;  
S 118/2010; S 289/2010; S 548/2010; S 367/2011;  
S 725/2011; S 107/2013; S 482/2013; S 623/2013;  
S 427/2014; S 872/2014]*



Made on 30 March 2015.

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(To be presented to Parliament under section 78(2) of the Central Provident Fund Act).