

---

---

First published in the Government *Gazette*, Electronic Edition, on 30 June 2017 at 5 pm.

**No. S 340**

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

**CENTRAL PROVIDENT FUND  
(MEDISAVE ACCOUNT WITHDRAWALS)  
(AMENDMENT) REGULATIONS 2017**

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 are the Central Provident Fund (Medisave Account Withdrawals) (Amendment) Regulations 2017 and come into operation on 1 July 2017.

**Amendment of regulation 2**

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

- (a) by deleting the words “approved treatment” in the definition of “approved day rehabilitation centre” and substituting the words “approved rehabilitation treatment”;
- (b) by inserting, immediately after paragraph (ia) of the definition of “approved medical institution”, the following paragraph:

“(ib) approved Third Schedule treatment provider;”;
- (c) by deleting the definition of “approved medical treatment” and substituting the following definition:

““approved rehabilitation treatment” means any out-patient rehabilitation treatment that is provided by an approved day rehabilitation centre and is approved by the Minister for Health for the purposes of these Regulations;”;

(d) by deleting the definition of “approved treatment” and substituting the following definition:

““approved Third Schedule treatment provider” means any hospital or medical clinic that provides any Third Schedule treatment and is approved by the Minister for Health for the purposes of these Regulations;”;

(e) by deleting paragraph (c) of the definition of “approved treatment package” and substituting the following paragraph:

“(c) approved rehabilitation treatments;”;

(f) by inserting, immediately after the definition of “dependant”, the following definition:

““First Schedule treatment” means any medical treatment specified in the First Schedule;”;

(g) by deleting the words “Dentists Act” in the definition of “medical practitioner” and substituting the words “Dental Registration Act”; and

(h) by inserting, immediately after the definition of “surgical treatment”, the following definition:

““Third Schedule treatment” means any medical treatment specified in the Third Schedule;”.

### **Amendment of regulation 13**

3. Regulation 13 of the principal Regulations is amended —

(a) by deleting paragraph (2);

- 
- 
- (b) by deleting the words “approved medical treatment” wherever they appear in paragraph (3) and substituting in each case the words “First Schedule treatment”;
- (c) by inserting, immediately after paragraph (3), the following paragraph:
- “(3A) Subject to regulations 21C and 21D, where a member or a member’s dependant receives any Third Schedule treatment as an out-patient from an approved medical practitioner in an approved Third Schedule treatment provider, the amount that may be withdrawn by the member for the payment of such treatment must not exceed the sum specified in the third column of the Third Schedule in relation to that Third Schedule treatment.”;
- (d) by deleting paragraph (6) and substituting the following paragraph:
- “(6) Subject to regulations 21C and 21D, where a member or a member’s dependant has undergone any cancer scan or diagnostic test, ordered by an approved medical practitioner, as an out-patient in an approved medical institution, the amount that may be withdrawn by the member for the payment of such cancer scan or diagnostic test must not exceed the sum specified in the third column of the First Schedule in relation to that cancer scan or diagnostic test.”; and
- (e) by deleting the words “and approved medical treatment” in the regulation heading.

#### **Amendment of regulation 21C**

4. Regulation 21C(1) of the principal Regulations is amended by deleting sub-paragraph (a) and substituting the following sub-paragraph:

---

---

“(a) any of the following:

- (i) any treatment of neoplasms by chemotherapy mentioned in regulation 13(2) as in force immediately before 1 July 2017;
- (ii) any First Schedule treatment mentioned in regulation 13(3);
- (iii) any Third Schedule treatment mentioned in regulation 13(3A);
- (iv) any cancer scan or diagnostic test mentioned in regulation 13(6);”.

#### **Amendment of regulation 24**

5. Regulation 24 of the principal Regulations is amended —

- (a) by deleting the words “approved treatment” in paragraph (1)(c) and substituting the words “approved rehabilitation treatment”;
- (b) by deleting the words “approved medical treatment” in paragraph (1)(e) and substituting the words “First Schedule treatment or Third Schedule treatment”; and
- (c) by deleting the words “approved medical treatment” in paragraph (3) and substituting the words “First Schedule treatment”.

#### **Amendment of First Schedule**

6. The First Schedule to the principal Regulations is amended —

- (a) by deleting the words “*Approved medical treatment*” in the heading of the first column and substituting the words “*First Schedule treatment*”;
- (b) by inserting, immediately after the words “per month” in the third column of items 3, 6, 9 and 10, the words “per patient”;

- (c) by deleting the words “With effect from 1st October 2002” in the second column of item 8 and substituting the words “1 October 2002 to 30 June 2017 (both dates inclusive)”; and
- (d) by inserting, immediately after the words “per year” in the third column of item 8, the words “per patient”.

### New Third Schedule

7. The principal Regulations are amended by inserting, immediately after the Second Schedule, the following Schedule:

#### “THIRD SCHEDULE

Regulations 2(1), 13(3A), 21C(1)  
and 24(1)

<i>First column</i>	<i>Second column</i>	<i>Third column</i>
<i>Third Schedule treatment</i>	<i>Operative date for treatment or services received</i>	<i>Maximum amount that may be withdrawn</i>
1. Bone marrow transplant	With effect from 1 July 2017	\$2,800 per year per patient or the total credit balance in the member’s medisave account, whichever is the lower.
2. Intravenous antibiotic infusion	With effect from 1 July 2017	\$600 per weekly cycle subject to a maximum claim of \$2,400 per year per patient or the total credit balance in the member’s medisave account, whichever is the lower.”.

---

---

**Miscellaneous amendments****8. The principal Regulations are amended —**

- (a) by deleting the words “approved treatment,” wherever they appear in regulation 2(2) and (3) and substituting in each case the words “approved rehabilitation treatment,”;
- (b) by deleting the words “approved treatment received” in the following provisions and substituting in each case the words “approved rehabilitation treatment received”:  
Regulations 3(1) and (3A)(a) and (b), 4(4) and (6) and 25A(d);
- (c) by deleting the words “approved treatment” in the following provisions and substituting in each case the words “approved rehabilitation treatment”:  
Regulations 3(1)(a), (3)(a)(i)(A) and (c) and (6)(a) and (d), 4(1), 10, 23(a) and 25; and
- (d) by deleting the words “or approved treatment” in regulation 3(3A)(b)(i) and substituting the words “or approved rehabilitation 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; S 177/2015; S 625/2015;  
S 377/2016; S 530/2016; S 723/2016]*

Made on 29 June 2017.

AUBECK KAM  
*Permanent Secretary,  
Ministry of Manpower,  
Singapore.*

[MMS 10/82 V24; AG/LEGIS/SL/36/2015/1 Vol. 3]

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