# Assignment - Health Economics Mid-Term

### Background

Read the "Affordable Health Care - A White Paper" at https://www.moh.gov.sg/docs/librariesprovider5/resources-statistics/information-papers/affordable\_health\_care.pdf

## General Instructions for All Groups

- 1. Overall Objective: The objective is for you to see the overall picture of development of health-care in Singapore. The White-Paper was written about 25 years from independence, and we are about 25+ years from the time it was written. You will be able to appreciate the achievement of the country in reaching the stage in 1993 and then see the vision of the policy-makers for the next 20-30 years. Subsequently, you will be able to evaluate whether those principles still apply, how much of the vision is fulfilled, and what work still needs to be done.
  - (a) With this broad objective, I would appreciate if you read the White-Paper in entirety. It is an excellent document on how economic principles taught in classroom (e.g. moral hazard, adverse selection, supplier induced demand, payments for doctors and hospitals) are incorporated into real policy-making and directly affect people.
  - (b) I am not strict about presentation style/format, number of presenters as long as you understand the objective and work within the overall architecture. Hence, questions are intentionally kept broad to let you have freedom to explore any sub-topic in detail.

#### 2. Debate Structure

- (a) **Opening speech from Minister**: Minister from Government will speak first and will (a) introduce the principles, (b) state the achievements to date, and (c) indicate future plans.
  - The future plans could state that we are continuing with principles X, Y, Z, and deviating from a,b,c. (E.g. we are not following up on building new hospitals as the care burden has shifted to homes and primary care etc.)
  - For principles, you need to read the White-paper, for achievements to date- search the internet, look at statistics, for future plans read the parliamentary speech during last year's COS (Committee of Supply Debate). Bonus points if you include this year's speech!
  - Format: The Minister could use Powerpoint slides, props to convince the parliament.
  - Time limit for Opening Speech (each tutorial will have different time limit). Refer to tutorial's page for time-limits.
- (b) Opening speech from Opposition: Opposition MP will provide opening speech.
  - The MP's argument is whether they agree with the principles, if they do then do they agree with achievements (sufficient or not), and whether future plans are sufficient or not. If they do not agree with principles, then what alternate principles should there be, what future plans should be based on these new principles.
  - For principles, you need to read the White-paper, for achievements to date- search the internet, look at statistics, for future plans read the parliamentary speech during last year's COS (Committee of Supply Debate). Bonus points if you include this year's speech!
  - Format: The MP could use powerpoint slides, props to provide rebuttal.
  - The opening speech from the Opposition MP could be prepared in advance as all the raw materials are available. However the MP should also be aware of the speech being delivered by the Minister right before them.
- (c) **Rebuttal Speech from Government**: Another Minister (usually Minister of State(MOS)) from the Government will provide a rebuttal to the opposition speech.

- The Team should be listening to the MP's speech and working to provide the rebuttal. You are finding flaws in the opposition's argument based on either economic theory (e.g. they didnt understand moral hazard) or based on statistics (e.g. they didnt understand the increasing trend of home-visits) etc. Be parliamentary and civil in your speech.
- Format: The team could jot down a brief points on a slide and rehash some statistics etc from their first presentation to help the MOS OR MOS could use their oratory power to demolish the opposition's points. This will depend on the team-member's preference for making an impactful rebuttal.
- (d) **Rebuttal Speech from Opposition**: Another MP from the Opposition will provide a rebuttal to the Government's rebuttal.
  - The Team should be listening to the MOS's speech and working to provide the rebuttal.
  - Format: The team could jot down a brief points on a slide and rehash some statistics etc from their first presentation to help the MP OR MP could use their oratory power to demolish the Government's points. This will depend on the team-member's preference for making an impactful rebuttal.
- 3. Suggested structure of presentation for Opening Speech from Minister
  - (a) Background, Philosophy and Direction: 2-3 slides.
  - (b) Current achievements and trends: How does the healthcare structure in Singapore stand as of now. 2-3 slides.
  - (c) Announcements: What were/are the major announcements pertaining to your topic in COS (2-3 slides) (See 3 below for description of COS)
  - (d) Not strict about number of slides. The number of slides indicated above is a guideline to maintain to time-limits. If you think one graph should be presented on a single slide for clarity, then you can go beyond the number of recommended slides. Please do not cramp all the figures in same slide.
  - (e) Submit the slides to Turnit folder > MidTerm Folder.
- 4. COS: Committee of Supply Speech. This is part of Budget Debate when individual ministries make important announcements.
  - (a) COS 2022 Debate speeches will be placed in Assignments folder.
  - (b) COS 2023 Debate will happen during the parliamentary sitting of Feb 2023. You will have to exert effort to find the speeches on MOH website and on Straits Times.
- 5. Topic Assignment.
  - (a) Assignment of Groups to Government or Opposition is posted on NTULearn.
- 6. Time Limits.
  - (a) See next page.
  - (b) BRING SLIDES ON USB Drive to enable efficient uploading of slides.
- 7. Clothes/Presentation
  - (a) You will be pretending to be Minister / Minister of State / Opposition MP. Please dress appropriately.

## 1 Supply

- 1. Pay attention to Chapters 1, 2, 4, 5, and 9 of the White Paper.
- 2. (A) Explain i. the philosophy and ii. the direction behind the training of doctors and specialists, their numbers, distribution among specialities; the number of beds, choice, controlling the bed distribution, ambience, standards.
- 3. (B) Using available data, show the trend in number of doctors, training capacity, specialities etc., trend in number of hospitals, beds, distribution of beds (using pictures you may also choose to highlight differences in older hospital wards and wards in newer hospitals such as NTFGH); structure linking hospitals (secondary tertiary), community hospitals and nursing homes. You do not have to show trend in all, you can pick and chose to provide maximum impact for your presentation) Explain whether the trend has been in accordance with the philosophy/direction in (A) above.
- 4. (C) Briefly outline the initiatives in COS pertaining to supply of doctors, distribution of hospital beds, and integration of care between secondary/tertiary hospitals and nursing-homes/community hospitals/primary-care and how do they align with the philosophy/direction in (A). If they differ then what could be the reason?

## 2 Financing

- 1. Pay attention to Chapters 1, 2, 5, 6, and 7.
- 2. (A) Pertaining to Chapter 5 (Limit Hospital's Revenue per Patient/Day (page 39) and Setting Subsidy amount (Page 40), Chapter 6 (Medical Fees Council page 49) explain i. the philosophy and ii. the direction behind the payment mechanism for hospitals, and the subsidy levels, the direction behind the Medisave, its contribution rate, and usage.
- 3. (B) Using available evidence and data if available, map the changes in payment for hospitals (use MOH documents or corporate reports) over time; map the changes in Medisave contribution rate and Medisave balances over time, changes and additions to Medisave usage. Using economic principles, explain why these changes may have been introduced.
- 4. (C) Briefly outline the initiatives in COS pertaining to financing of hospitals, polyclinics, community hospitals/nursing home, Medisave contribution and usage and how do they align with the philosophy/direction in (A). If they differ then what could be the reason?

## 3 Non-Communicable Diseases (NCDs)

- 1. Pay attention to Chapters 1, 2, 3 and document "COS-2020-Update on War on Diabetes".
- 2. (A) Based on chapters and documents listed above, outline the philosophy and economic principle behind (i) prevention; (ii) treatment for non-communicable disease (chronic conditions) such as diabetes, hypertension, and mental health conditions. (Groups interested in Fertility may want to work on topic of assisted reproduction)
- 3. (B) Using available evidence and data if available, map the changes in policies for care for diabetes and mental health. You may use introduction and enhancements in CDMP and CHAS as a starting point. Explain why these changes may have been introduced.
- 4. (C) Briefly outline the initiatives in COS pertaining to prevention and care for NCDs including mental health and how do they align with the philosophy/direction in (A). If they differ then what could be the reason?