



Basic Healthcare Sum 2026: What S\$79,000 Means

Description

The Basic Healthcare Sum is the maximum amount a member can set aside in MediSave; it is not a healthcare bill estimate. For members below 65 in 2026, CPF states S\$79,000. The amount is fixed for life when a member turns 65, so older cohorts may have a different ceiling.

Basic Healthcare Sum 2026: the decision table

Situation	What to do
Below 65 in 2026	Use the current S\$79,000 ceiling
Turning 65 in 2026	S\$79,000 becomes the cohort-fixed amount
MediSave already at BHS	New contributions are routed under CPF rules
Planning medical costs	Model insurance and cash separately

A ceiling is not a recommended spend

MediSave use remains subject to withdrawal limits and approved purposes. The BHS does not predict an individual’s illness or insurance premiums.

Age changes the interpretation

Below 65, the BHS can be adjusted annually. At 65, the applicable cohort amount is fixed, providing a stable reference.

Excess contributions do not disappear

CPF routes contributions above the BHS to other CPF accounts according to age and applicable balances. Check the member’s actual statement.

Plan liabilities beside balances

List MediShield Life, Integrated Shield Plan premiums, CareShield Life where relevant and recurring outpatient needs.

Keep cash liquidity

Not every health expense can be paid from MediSave. A separate emergency reserve remains necessary.

Worked example

A 40-year-old with S\$76,000 in MediSave is S\$3,000 below the 2026 BHS. That gap does not mean the member should make an immediate S\$3,000 top-up; first check contribution flows, tax-relief rules, other CPF goals and cash needs. This is a planning calculation, not personal advice.

Turn the example into a decision record

The worked example is useful only if its inputs are replaced with the reader’s actual dates, amounts, documents or observations. For this task interpret the 2026 medisave ceiling without confusing it with a target bill or guaranteed adequacy amount keep the decision and its supporting record on the same line. That exposes a missing input before the action becomes difficult to reverse.

Trigger or question	Current action	Evidence to retain
1. Below 65 in 2026	Use the current S\$79,000 ceiling	Save the dated input, confirmation or advice that supports this choice.
2. Turning 65 in 2026	S\$79,000 becomes the cohort-fixed amount	Save the dated input, confirmation or advice that supports this choice.
3. MediSave already at BHS	New contributions are routed under CPF rules	Save the dated input, confirmation or advice that supports this choice.
4. Planning medical costs	Model insurance and cash separately	Save the dated input, confirmation or advice that supports this choice.

Record where each answer came from and when it was checked. If a live service, signed document or professional opinion conflicts with a general webpage, preserve both and resolve the difference with the body responsible for the decision. Do not silently substitute a convenient number or date.

Action checklist

1. Confirm age and cohort
2. Read the current MediSave balance
3. Identify applicable BHS
4. List expected contributions

5. Map premiums and eligible uses
6. Keep a cash health reserve
7. Review again after annual updates

Two practical tools to keep

An age-and-cohort BHS decision table. Put the controlling dates, amounts or observations in one place and attach the evidence beside each input. This makes the decision reproducible if a family member, colleague or adviser needs to check it later.

A MediSave-versus-cash healthcare budget. Test the ordinary case and the failure case before money, a filing or a booking becomes irreversible. Mark calculations as calculations and leave uncertain fields unresolved until an authority or qualified professional confirms them.

What the primary sources establish

Primary source	Claim used here
CPF Basic Healthcare Sum	2026 amount, age-65 cohort rule and treatment of excess contributions.
CPF BHS methodology	How the amount is adjusted and fixed by cohort.

The links sit beside the claims they support. Live services, formal notices and individual facts can change the outcome, so re-open the controlling page immediately before acting.

Continue with the next useful step

For the adjacent task, read [the CPF LIFE start-age trade-off](#). If the decision moves into a different stage, continue with [how CPF nominations differ from a will](#).

Errors that change the outcome

- Treating BHS as a bill forecast
- Using a younger cohort's amount for a senior
- Assuming all medical bills are payable
- Ignoring insurance premiums
- Draining cash to fill a ceiling

Keep dated records, confirmations and advice used for the decision. This article explains public information for a general fact pattern; it does not determine an individual legal, tax, medical, investment, employment or contractual outcome.

A final challenge before acting

The intended reader is a cpf member planning healthcare savings and cash flow. Before closing the task, challenge the file against the common failure points below. A "not applicable" answer should

still have a reason, especially where a deadline, eligibility rule, payment, booking or safety decision is involved.

- **Have you ruled this out?** Treating BHS as a bill forecast. Write down the fact or document that answers it; an assumption is not a completed check.
- **Have you ruled this out?** Using a younger cohort's amount for a senior. Write down the fact or document that answers it; an assumption is not a completed check.
- **Have you ruled this out?** Assuming all medical bills are payable. Write down the fact or document that answers it; an assumption is not a completed check.
- **Have you ruled this out?** Ignoring insurance premiums. Write down the fact or document that answers it; an assumption is not a completed check.
- **Have you ruled this out?** Draining cash to fill a ceiling. Write down the fact or document that answers it; an assumption is not a completed check.

Escalate any unresolved consequential point to the named authority or an appropriately qualified professional. The aim is not to collect more material; it is to identify the one missing fact that could change the result.

Questions readers ask

What is the 2026 BHS?

CPF states S\$79,000 for members below 65 and those turning 65 in 2026.

Does it change after age 65?

The applicable cohort BHS is fixed for life.

Can MediSave exceed the BHS?

Contribution routing depends on CPF rules and other account balances.

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