
NEHR Connect Grant 2026: Amounts, Eligibility & Dates

### Description



**The NEHR Connect Grant opened to GP licensees on 1 July 2026, but the amount and application window depend on the healthcare service.** Outpatient medical services receive a fixed S$8,400 per licensee, while larger or more complex sectors may receive 40% of eligible system-enhancement costs subject to caps. Other sectors open in later phases through 2029.

*Last checked: 15 July 2026. Programme terms, market views and airline availability can change; use the linked primary source before applying, investing or transferring points.*

This guide translates the current government tables into a planning sequence. It is not an approval decision: eligibility, supported costs and final payment remain subject to the Ministry of Health (MOH), the grant portal and the terms that apply to each applicant.

# NEHR Connect Grant 2026 at a glance

| Healthcare service | Published NCG quantum per licensee | Application opens | Application deadline |
|---|---|---|---|
| Outpatient medical service (GP) | S$8,400 fixed | 1 Jul 2026 | 31 Aug 2027 |
| Acute or community hospital | 40% of cost, capped at S$200,000 | 1 Nov 2026 | 31 Aug 2027 |
| Clinical laboratory | 40% of cost, capped at S$140,000 | 1 Nov 2026 | 31 Aug 2027 |
| Radiological laboratory | S$12,000 fixed | 1 Nov 2026 | 31 Aug 2027 |
| Nuclear medicine | S$8,400 fixed | 1 Nov 2026 | 31 Aug 2027 |
| Specialist outpatient medical service | S$8,400 fixed | 1 Aug 2027 | 31 Aug 2028 |
| Nursing home | S$14,400 fixed | 1 Aug 2027 | 31 Aug 2028 |

| Healthcare service | Published NCGquantum per licensee | Application opens | Application deadline |
|---|---|---|---|
| Outpatient renal dialysis | 40% of cost, capped at S$29,300 | 1 Aug 2027 | 31 Aug 2028 |
| Contingency care service | S$8,400 fixed | 1 Aug 2027 | 31 Aug 2028 |
| Outpatient dental or ambulatory surgical centre | S$8,400 fixed | 1 May 2029 | 28 Feb 2030 |
| Assisted reproduction service | S$8,400 fixed | 1 May 2029 | 28 Feb 2030 |
| Retail pharmacy | 40% of cost, capped at S$16,900 | 1 May 2029 | 28 Feb 2030 |

The official schedule says GP and the other first-batch services must start contributing to the National Electronic Health Record (NEHR) by 1 September 2027. The second batch follows by 1 September 2028 and the third by 1 March 2030. Government guidance expressly says these dates are subject to change, so build the project around the live schedule rather than a saved screenshot.



## Who is eligible?

The current Health Information Act funding page says a provider must meet all of the following conditions:

- Hold a valid Healthcare Services Act licence for a licensable healthcare service, or a valid retail pharmacy licence under the Health Products Act.
- Be required to contribute to NEHR under the Health Information Act.
- Adopt or upgrade to a Health Information Act-compliant health information management system (HIMS).
- Not be a government or MOH Holdings-owned entity, apart from the stated Vanguard Nursing Home exception.
- Not have received specified similar MOH funding under the same healthcare institution code, including the GP IT Enablement Grant or Nursing Home IT Enablement funding.

The last condition is easy to miss. A clinic should check its healthcare institution code and historical grant records before treating S$8,400 as receivable. The earlier Early Contribution Incentive Grant has also closed, but the public eligibility list specifically names GP ITE and NH IT/NHELP when describing prior-funding exclusions.

## What the grant is meant to pay for

The NCG is one-off support for adopting a HIMS that can securely contribute to NEHR, or enhancing an existing system. MOH originally described the fixed support as roughly two years of subscription cost for smaller practices; the live funding page now gives the exact sector quanta above.

A fixed amount is not the same as reimbursement of every technology bill. Before signing with a vendor, ask which subscription, implementation, migration, interface, training and support items sit within the approved scope, when costs may be incurred, and what evidence is required. Providers with

in-house systems should separately identify the enhancement work and the 40% sector cap.

## The S$20,000 solo-GP example, correctly read

MOHâ??s current illustration says a typical solo GP practice may receive approximately S$20,000 across three agencies:

- **NEHR Connect Grant:** S$8,400 fixed.
- **Enterprise Singapore support:** an estimated S$7,500, based on up to 50% co-funding for relevant solutions.
- **Cyber Security Agency support:** an estimated S$5,800, based on up to 70% co-funding for a qualifying CISO-as-a-Service package.

The approximate S$20,000 is a combined illustration, not a larger NCG award and not a promise to every GP. Each scheme has its own eligibility, scope, vendor and application route. The Productivity Solutions Grant supports items such as firewall and antivirus solutions; CSAâ??s programme supports qualified cybersecurity and data-security consultancy. Do not add all three amounts to a budget until each route has been checked independently.



## What a GP clinic should do now

1. **Confirm the licensed service and deadline.** A clinic offering both general and specialist medical services may fall into a later implementation batch depending on its licence configuration; use the official implementation table.
2. **Check prior funding.** Record the healthcare institution code and earlier MOH digitalisation grants before applying.
3. **Assess the current HIMS.** Ask the vendor whether the system is HIA-compliant, where its NEHR integration stands, what data migration is required and who owns support after go-live.
4. **Separate three budgets.** Keep HIMS adoption or enhancement, cybersecurity products and cybersecurity consultancy as distinct workstreams.
5. **Document the operating change.** Map registration, clinical documentation, medication, laboratory and discharge workflows that will generate information for contribution.
6. **Apply through the named channel.** NCG applications use the OurSG Grants Portal. Do not pay an intermediary who cannot point to the official route.

## Cybersecurity is not solved by buying a HIMS

The Health Information Act creates separate cybersecurity and data-security duties. The official guidance says healthcare providers must protect health information and report confirmed cybersecurity incidents or data breaches to MOH; the initial report is due within two hours and a detailed report within 14 days. That makes incident ownership, staff access, backups, vendor escalation and breach notification part of implementationâ??not optional extras after connection.

For a broader comparison of business support, see Little Big Red Dotâ??s Singapore business grants guide and its separate Productivity Solutions Grant checklist. Those schemes do not replace the sector-

specific NCG conditions.

## Primary sources and reporting note

Funding amounts, eligibility and dates were checked against the Governmentâ??s Health Information Act Funding Support page, last updated 10 July 2026, and MOHâ??s NEHR Connect Grant announcement. Cybersecurity timing comes from the official Protecting Health Information guidance. Little Big Red Dot has not submitted an application or verified an individual clinicâ??s eligibility. The image is an official Synapxe photograph; it is not AI-generated.

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**Author**
rachelng