

Consultant 2

4 October 2012

Dear Sirs/Madams,

I am writing to you to help provide information that may prove useful in your investigations of the functioning of the private healthcare market. It pertains to the Theory of Harm 4, points 35-37 as stated in the Statement of Issues, June 2012.

I am a Consultant ENT Surgeon who engages in both NHS (Max part-time) and Private Practice in [X]. I have been a Consultant for [X] years and work as a [X]. As such, I receive many referrals from [X], as well as from local GP's, who I have got to know over the years, by helping their patients.

I was recently contacted by BUPA and informed that my "follow-up fees were too high, in comparison with colleagues' in the same specialty in the same geographic area." I found this quite surprising, as my fees had been unaltered for some years. I was informed by BUPA that I was to lower my follow-up fees by 25%, or they threatened that they would have to "review their relationship" with me. I can supply copies of letters, if need be. It is worth noting that the last time there was an across-the-board percentage increase in Consultant procedure payments was 1993.

I carried out a survey amongst all the local ENT Surgeons by calling their Private Practice secretaries and finding out what their charges were. I tabulated the data and sent it to all of my colleagues for their information. As expected, there was a reasonable spread of both "New Patient" and "Follow-up" patient fees. (**Table below**). Interestingly, mine were fairly mid-table for both groups. Wondering why I was apparently being "picked-on" by BUPA, I asked around amongst my colleagues to find out whether others had had a similar experience. It seems several had. Disgruntled at being bullied in this way, I felt obliged to lower my fees, to their stipulated level, but at the same time I noticed a sharp drop-off in the number of BUPA patients booking into my clinics. I wrote to BUPA to confirm that I had done as they requested, but they had clearly "de-recognised" me.

I was still seeing a number of BUPA patients, because some insisted on seeing me, and me alone, for various reasons – e.g. I had previously treated a family member etc. I was however **shocked** to hear what BUPA were telling my patients when they had contacted the insurer for an authorisation code. Several of my patients were annoyed to be told that I charge out-with BUPA reimbursement limits and that they would be faced with excess charges. In actual fact, I have always (since 2000) adhered to the BUPA maxima. They were told "I was not recommended." They were told "I was no longer recognised by BUPA". Several told me that BUPA had actually discouraged them from seeing me, and it was only because they vehemently insisted, that they were permitted to do so. I can supply statements from these patients as evidence if required.

This information being given to patients is at best (intentionally) inaccurate and at worst slanderous.

You can imagine that this is having a serious impact on the number of patients I am now seeing – even though I have given in to BUPA's bullying demands. More importantly, it is clear that BUPA patients are now being systematically denied the choice they are entitled to. Specifically, they are being directed away from the Consultant that they have been referred to by their GP, other specialist or even recommending friend or family member. Given that patients pay a lot of money for their right to private healthcare, I believe this is grossly unfair. Unfortunately, the vast majority of patients do not know or understand this, and simply "go

along with it". Only those that have used the private healthcare system a lot realise what is happening.

In any event, such as in many other countries, patients have the right to see whoever they wish and are free to pay an excess, if they feel their Consultant's experience, skill , reputation etc warrants it – without the insurance company interfering. The insurer pays up to their own maxima, and the patient covers the rest. In other countries, Consultants have become much more open about heir fees, so that patients can make these choices for themselves. My fees are clearly shown on my website. These are decisions for the patient – not their insurer. It's the same as a shopper deciding whether they wish to shop in Harrod's, or Lidl's. However, one can be sure most shoppers wouldn't go back if they were only allowed to choose items from half the shop, whilst the other side was cordoned off, and they were not allowed in there! Whilst the comparison is frivolous, it illustrates the point that if people are paying, they deserve the choice.

I do hope that something can be done to stop this situation which BUPA is enforcing on their clients – our patients- and the Consultants themselves, all in the interests of their own financial gain.

Many thanks for your time. I am sure this is a vast, complex problem.

Consultant	Max Insured New Pt Fee	Max Insured FU Pt Fee
A	195	110
B	190	150
C	300	200
D	200	130
E	150	100
F	180	150
G	170	160
H	200	150
I	150	120
J	250	130
K	180	100
L	180	120
M	195	175