

Member of the public 36

29 April 2013

Private Health Insurance

My wife and I, who are both senior citizens, have been subscribers to BUPA for some years. During that time, as we have aged, our health has naturally deteriorated and whilst we would have expected our annual premiums to increase, we would certainly not have expected them to increase each year out of all proportion which is and has indeed been the case. Whilst so far I am in reasonably good health, my wife who is [redacted] years younger than I unfortunately suffers from cancer.

For your information our current subscription is [£600-700] per month and no doubt this will again increase substantially at the next renewal date in [redacted] by which time I will have reached the age of [redacted]. They may also increase by reason of the expensive chemotherapy etc which my wife has had recently.

If this is not bad enough, the BUPA approach to dealing with claims and reimbursement has hardened and frequently, not only do they NOT regularly review upwards their payments to surgeons and anaesthetists etc to take effect of inflation, there are actually instances where the amount they do pay is reduced and reduced drastically. This is evidenced by my own recent experience with a cataract operation where as I refused treatment from a less experienced and qualified surgeon, I had to pay out of my own pocket a substantial part of the costs. In my case as a result of BUPA actually reducing their payment to the surgeon for this operation from £741 to £289, this additional cost to me amounted to some £580 compared with £50 when I had the same operation [redacted] years earlier even though the same surgeon's fees had not changed in this period. It would seem that the constantly increasing hospital charges contribute more than anything else to this problem as the Health Insurers seem unable to persuade the private hospitals to control their charges. They therefore seek to balance these additional costs by reducing their reimbursements to surgeons and consultants generally and of course constantly increasing the annual premiums payable by their subscribers.

When a subscriber is an in-patient in an NHS hospital, they will pay £20 a day to the patient. However when this patient also has a scan or radiotherapy etc, BUPA do not make any financial contribution towards this even though they would pay if it was obtained privately. Thus even though in these cases, BUPA are actually making savings often of several hundred pounds on each occasion, there is no evidence that they pass this on to subscribers. Indeed with continual and often substantial increases in annual subscriptions there is plenty of evidence to suggest that this just not happen.

We are both extremely concerned that for reasons of health we are permanently tied to an organisation which adopts these policies since a move to any other company will normally result pre-existing conditions being excluded from cover.

I understand you are now commissioned to look into matters of this nature and I hope this submission will be found helpful. If you believe I can be of further assistance please do not hesitate to ask.