

## Consultant 42

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To whom it may concern

I would like to forward my concerns regarding the private healthcare market in the United Kingdom.

I write in my capacity as an independent specialist working in many private hospitals as well as being a director of a small private hospital. I have been a consultant in private practice for 14 years.

The private healthcare market is dominated by 2 major healthcare insurers and to a slightly lesser extent 2 major independent hospital groups.

The two major insurers are BUPA and AXA PPP. The re-imburement from these insurers to consultants has decreased steadily over the last 14 years. You might say that this is a good thing as it keeps costs down. The converse is however true. The premiums paid to these companies have risen steadily over this time frame. If you have the temerity to charge more than the agreed fees you can be derecognised by these companies without any rite of appeal. As an independent provider you have to agree significantly lower fees than the larger institutions putting small providers at a significant financial disadvantage. If these companies decide not to recognise you for the flimsiest of reasons this could be the death knell of your business because a small independent provider cannot survive on access to only a small fraction of the insured market. The network system created by BUPA and AXA PPP is supposed to provide quality control for the members. The truth is that this is just another method of price control. On many occasions patients requiring complex radiological interventions have been refused care in an institution with far better equipment and trained staff because the institution is not a member of the network. Surprisingly they will not even authorise treatment even if the prices are lower. Patients are therefore treated in hospitals with inferior equipment and poorly trained staff.

The large independent hospitals groups behave in a very similar fashion to the insurance companies but even they are controlled to some extent by the insurance companies. This may control price rises to some extent but the people who suffer the most are the consultants. Radiologists at BMI hospitals have had their fees slashed without any consultation and no rite of appeal.

In my opinion patients paying for private healthcare are currently getting a raw deal and instead of getting a wider choice based on both quality and price the access to who they can see is controlled predominantly by the insurance companies. Health insurance companies should only be able to delist providers if there is an issue with the quality of care which should be assessed by an independent body such as the Care Quality Commission. Insurance companies should publish their benefit maxima. Healthcare providers should publish their prices in a transparent clear fashion. If there is any discrepancy between the 2 fees the patient should be given the option to subsidise the difference. In this way patient choice will be protected. The contract should be between the provider and the patient. Not the insurance company. Providers delivering high quality care will be rewarded regardless of their financial muscle. Small providers will not be at the mercy of the insurance companies and larger independent providers. That is how the free market should work. The large insurers and hospital groups should not be able to have a monopoly.