

Consultant 145

6 October 2012

Sirs,

I wish to contribute to the current debate. I am an NHS consultant with a private medical practice. I have a number of 'long term' patients for follow up following cancer treatment. Some are covered by company schemes, and as such their Private Health Insurance provider changes from time to time.

I have been made aware by my patients, that some insurers are in effect trying to manage the referral pathway. Patients under my care have contacted their insurer for 'authorisation' for a consultation or review, only to be told that they should seek an appointment with other surgeons. I am on all of the Providers 'lists' as an approved consultant, but as I have been in practice for some time, I charge a fee that is based on the older fee schedules.

The patients seem to be encouraged to see younger colleagues constrained to the new fee schedules, even though they have no experience, interest or practice in the specialist area of my practice, and do not treat patients with cancer in the NHS.

I have also had patients receive authorisation for their surgery from Insurers following full disclosure of my fees and a promise that they will be settled in full, only then to receive a 'shortfall' from the insurer. I feel morally unable to recover the shortfall from my patients recovering from cancer surgery and inevitably 'write off' part of my fee.

I am left with the distinct impression that the insurers are at time playing 'gamesmanship' to minimise fee payment, and without consideration of the patients best interests.