## Member of the public 23

24 February 2013

My husband and I have been insured with BUPA for over [ $\gg$ ] years and have been fully satisfied by the treatment we have received. This has included a bi-lateral knee replacement on my husband and an arthroscopy on one of my knees, both operations performed in [ $\gg$ ].

I was recently advised that I required arthroscopies on both my knees and as I respect and trust [ $\gg$ ] I wanted him to carry out the procedure.

On contacting BUPA I was astonished to learn that they are only prepared to cover half his fee, ([ $\gg$ ]), especially as in [ $\gg$ ] they fully reimbursed his fee of £ [ $\gg$ ] for an arthroscopy on ONE knee. On enquiring I was told that the reimbursement for a single knee arthroscopy in 2012 would only be £289.

One of the main reasons I pay for private medical insurance is to have the freedom of choice over which consultant I consider best for my condition. I am now limited to someone from a BUPA selected list, unless I am prepared to pay extra, which I have been forced to do.

I have asked BUPA why, compared to 2004, payment to consultants has been more than halved, whilst BUPA fees have more than doubled, but have not received a satisfactory explanation.

Unlike other types of insurance we are unable to change to a different company, because of pre-existing medical conditions.

I wish to make a formal complaint about BUPA's "Take it or leave it" attitude, which restricts my freedom of choice.