Consultant 61

1 May 2012

Dear Sir/Madam

I have been working as a Consultant Anaesthetist since [%].

Any work that I carried out in the private sector is underpinned by a specific contract between myself and the patient. The fees that I would charge are dependent on complexity and skill required to carry out this work and is agreed in advance. The largest insurance providers now employ heavy-handed tactics to continually force down this fee and ensure compliance with threats of derecognition.

BUPA and AXA PPP provide healthcare insurance for the majority of patients in this market.

In the terms and conditions for recognition, both these insurers state that they will derecognise me should I claim for any shortfall in fees that they have stipulated.

This would result in a subsequent failure to reimburse any future work.

The complaint that was made to doctors a while ago with regards to setting fees related to the creation of a cartel. I feel that is exactly what these insurers are in fact creating themselves.

The fees that they have set have not increased over the past decade whilst insurance premiums have continued to rise. As my senior colleagues have not been tied into this restrictive practice, they will charge patients for any shortfall. Patients are not aware of this, and it is incumbent that insurance providers inform their patients of this.

I currently work in a group of practitioners. We clearly state to all patients that each anaesthetist will set their own fee and encourage all patients to contact our office well in advance to discuss these issues further. Anaesthetists outside this group do work at the local private hospital but surgeons often use our services as this is more efficient and reduces the hassle factor. Working in a group allows us to deliver a better standard of care by ensuring someone is always available 24/7 for emergencies and allows flexibility in the system so last minute sickness etc doesnt result in cancellations. We have also developed a pre-operative assessment unit so all patients are better prepared before their operation. Evidence clearly shows that this reduces morbidity and mortality1.

Many thanks for this opportunity and I look forward to your report