Consultant 91

30 July 2012

Dear Sir / Madam

I would like to draw the commission's attention to some recent problems that I have faced with two of the larger health insurance companies.

1) Network Hospitals

I recently saw a child with a [\gg]. Because of her age she needed an incision [\gg] procedure under general anaesthetic. She has private health insurance with AXA/PPP since birth. The [\gg] is the "network approved" hospital for every eye procedure except cataract surgery (for some reason this can be done at both the [\gg] and the [\gg], although I have never been given an explanation why there is this anomaly).

Her mother was very keen to have the procedure performed privately in the summer holidays so that her daughter did not miss school. Unfortunately paediatric operating lists can only take place one Saturday a month at the $[\mbox{\ensuremath{\mathbb{Z}}}]$ and both planned dates in July/August coincided with my annual leave. I phoned AXA myself and explained that I would be unable to do the procedure at the $[\mbox{\ensuremath{\mathbb{Z}}}]$ but could do the case either on my planned August theatre list at the $[\mbox{\ensuremath{\mathbb{Z}}}]$.

The insurance advisor (after seeking senior advice) told me that they would not authorise the case being done at either of those hospitals because they were not "network" hospitals. The result of this has been that I have had to ask the patient to be referred to my NHS service and have had to put her on one of my NHS lists in August, shifting the cost of the procedure to the tax payer.

2) Referral practice

One of my colleagues who specialises in [\gg] surgery (and who has been a consultant seeing NHS and private patients for [\gg] years) has never opted to join the "consultant partnership" with BUPA but is a recognised provider with them. On two occasions this year he has been referred patient who needed a minor operation (C1230). When the patients have phoned BUPA to get authorisation for the procedure they were denied this and were told that the surgeon was "not recognised". As a result the patients were re-referred to myself and a colleague who are consultant partners and had the procedure performed. This seems unfair to the initial consultant since the patient was told incorrect information about his status and in fact he charges the BUPA rates for this and every other procedure he performs.

3) Fee assured vs recognised consultants

When performing a consultant search on the BUPA website, the only consultants' names that appear are those that are "fee assured" it is not possible to search for all recognised consultants unless you already know the name. BUPA appear to be preferentially directing referrals to Consultants who are "fee assured" rather than allowing patients the full choice of all the recognised consultants. This is confusing to patients that might have been recommended a surgeon by their GP whose name does not appear on the list. The point in the previous paragraph above suggests that this is also happening with telephone enquiries.

4) recent changes in BUPA benefits tariff

I am sure that the commission is aware of the recent unilateral and un-negotiated changes to the benefit limits for some procedures of which surgeons were given less than a month's notice prior to implementation. This has affected eye surgery more than other specialities. BUPA policy holders have not been notified by this change in policy and not been given sufficient time to review their insurance cover. It would seem that this is a change in the terms and conditions of most policies which the surgeons themselves are having to explain to the patients rather than the insurance company taking any responsibility for this. I am sure that you are aware that the charges set by most consultants have not risen for 20 years and whilst I can see that surgical fees should reflect market forces, a 65% decrease in the benefit for one of the most common eye operation seems out of proportion. It doesn't help that patients are being informed by BUPA advisors that surgeons are responsible for the rise in insurance premiums and that the operation is much "easier" than it was 20 years ago.

I hope this information is useful for the investigation team, I am happy to clarify anything if required.