Consultant 157

30 October 2012

Dear Sir

I'd like to comment on this matter from the perspective of a practicing clinician.

Costs: To pretend that the actions and utterances of the Private Medical Insurers (PMIs) is anything other than an attempt driving down their own costs, is to deny reality. They appear to be using their monopolistic position to bully the minority source of their costs i.e. the medical profession, because they are frightened to challenge the majority source of their costs i.e. the institutional service providers e.g. HCA et al.

Quality: One might like to believe that they were interested, first and foremost, in the quality of the care provided to their customers, which is difficult to reconcile with anti-competitive stance through their "referred provider" scheme.

Competitive markets: healthcare markets will always be imperfect (in the economic sense), but there are now more specialist consultants than ever in the UK and, from the internet, the average private patient has greater access to relevant information than ever before; surely both factors lend to improved competition. Meanwhile, PMIs are seeking to shore-up their own market monopolistic position.

Medical Insurance: the fact of having to pay an excess on many insurance claims is a reality of everyday life. Because, in the UK, we have an expectation of "free" and comprehensive healthcare (borne of growing up with the NHS) private patients don't anticipate a shortfall on their private medical costs.

Obviously, in an imperfect markets there has be Government regulation; but these regulators have to recognise the spurious attempts of the monopolistic private healthcare funders to drive down their own costs by a number of anti-competitive practices, that may actually jeopardise both the safety and quality of the healthcare that is provided.