Consultant 178

19 November 2012

Dear Sir/Madam

There is no question that the private medical insurance companies are indulging ever increasingly in restrictive and anti-competetive ways.

I run a busy private practise and 9/10 BUPA patients spontaneously tell me that they have been told that I over-charge. On closer questioning almost invariably, they inform me that the person at the call centre has tried to steer them away from seeing me and encouraged them to see a BUPA approved or 'Fee assured" consultant.

It is impossible to ascertain how many individuals have been re-directed away from my practise but common sense would suggest that there are many. The GMC states that the correct pathway is for a patient to be directed to a specialist on the advice of the GP. The PMIs are doing their level best to make sure this does not happen and only those patients who stick to their guns get to see the specialist of their choice.

It is generally agreed that in private practise, a specialist, after expenses, will keep 30% of fees invoiced.

With all expenses rising, a considerable reduction in consultation fees and remuneration for surgery, private practise will become unsustainable and there is a serious threat to its very existence. Anti-competetive in spades.

"Fee-assured" and " BUPA approved" are misleading terms in terms of quality especially when patients are directed away from specialists to non-specialists in the field. The term "BUPA bullied" is probably a more accurate phrase and these anti-competetive practises, should they be adopted by all PMIs will surely mean the end of good quality private healthcare in the UK.