Consultant 25

17 September 2013

I have been 'recognised' by Bupa since [\gg] when I became a consultant but have never entered into any commercial relationship with the insurance companies on the grounds that clinically and legally my contract is with the patient. I have charged £270 for new referrals and £170 for follow-ups for approximately 24 months which is in line with the fees of my colleagues but which also includes a variety of investigations without additional charges.

In [\gg] I was contacted by Bupa who demanded that unless I could explain the charges I made, I should reduce my fees to £200 and £150 respectively for new and follow-up appointments. I sent details of my position and expertise which resulted in a further letter demanding information on the numbers of referrals from GPs, consultants etc together with references from colleagues to support my eminence in my speciality. I was informed that failure to comply would result in the removal of recognition.

I then received a letter outlining 3 options followed by another letter 2 weeks later telling me that I would be derecognised by Bupa if I did not agree to their demands. I have subsequently reiterated on several occasions that my contract is with the patient who is always told that they are responsible for their fees and requesting that it would be far more equitable for Bupa to allow patients to make up any shortfall rather than refusing to provide any reimbursement. I have spoken and written to many of the senior administrators at Bupa including [36] but all are obdurate that unless one agrees to abide by Bupa fees, they will effectively not honour the insurance cover purchased by their customers.

There have been a number of occasions where Bupa have refused to allow patients to use their cover to be seen by me despite them being tertiary referrals from other consultant colleagues with rare and serious conditions. Their administrative staff tell patients that I am not recognised or worse 'de-recognised' by Bupa , a highly pejorative term. Obviously, if we learn of this behaviour, we simply ask patients to obtain a referral from their GPs to allow them to be seen under the NHS but it adds unnecessary anxiety for the patient, often requires my speaking to the GP to explain the reason and indeed may result in my not seeing these patients at all.

I am clearly not alone in this situation but I feel it is entirely reprehensible behaviour not to allow patients to utilise their cover and make up any difference in their fees, should it occur and to adopt this bullying behaviour to both their customers and clinicians.