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Important information for customers of BUPA

If you are planning to use your health insurance to cover the cost of a private consultation or procedure, you will need to contact BUPA to get authorisation from them. Please read this before arranging authorisation.

BUPA have recently made significant changes in the way they pay doctors for some procedures. Although ophthalmologists have not increased their surgical fees for more than 20 years, BUPA have unilaterally decided to reduce their tariff to the surgeon by more than 60% for some procedures such as cataract surgery. Unsurprisingly, the majority of UK ophthalmologists, including me, are unwilling to accept this decision and have been forced to drop their “fee assured” status with BUPA.

What this means for you:

- Only your GP or optometrist has the clinical knowledge and experience to recommend a referral to a consultant who he/she feels has particular expertise in your eye condition. Insurance company representatives may attempt to redirect your referral for other reasons.
- If you are referred to me, or choose to see me, you should still expect BUPA to authorise the consultation or treatment. I remain a BUPA recognised consultant, although you may be given the impression by BUPA representatives that this is not the case.
- My fees, in general, remain aligned to the BUPA scale of benefits. One of the few exceptions is cataract surgery, when a procedure payment shortfall of about £500 is likely. I will ensure that you are aware of any potential future insurance shortfall at your first consultation and offer you the choice of seeing a different ophthalmologist if this is the case.
- You can rest assured that my clinical management of your case will not be influenced in any way by financial or insurance arrangements, and that I will continue to provide all my patients with the best, safe, ethical and cost-effective care.

I have attached some further information below, produced by FIPO (Federation of Independent Practitioner Organisations).

PATIENT INFORMATION LEAFLET FOR BUPA MEDICAL INSURANCE SUBSCRIBERS

FIPO (Federation of Independent Practitioner Organisations) is a professional medical body representing consultants who work in the independent sector. All Bupa subscribers should understand that Bupa, the private medical insurer, has recently altered the way in which it deals with certain subscribers when they seek consultant treatment.

Recent Bupa Changes

- Cuts in reimbursements (benefits) for your consultants' fees
- Clinical decisions by Bupa about what is appropriate treatment
- "Open Referral" which removes choice of consultant from the patient

Bupa Insurance Reimbursements for Consultant Fees

We regret that the benefits provided by Bupa medical insurance for a number of common causes of treatment and operations have been reduced across a number of medical specialties. The average cut back is nearly one third (32.25%), across 39 common operations, so far declared by Bupa. This means that patients will be reimbursed on average £213 less for each of these specified procedures.

Bupa have not raised their reimbursements for surgical procedures to patients for their consultants' fees since 1993 and so unfortunately the consultants may have no choice but to ask their patients for co-payment to cover these insurance cutbacks.

In the spirit of promoting transparency of fees for medical treatment, which FIPO has historically promoted across all its member organisations and is keen to promote going forward, Bupa subscribers need to know that they may be faced personally with an increased need for co-payment to cover their consultants' fees.

Bupa Clinical Decisions at Preauthorisation

Further, BUPA subscribers need to know that in some cases (for example if a consultant orthopaedic surgeon recommends an arthroscopic knee operation or a certain shoulder operation) Bupa will ask for clinical details from their consultant and then decide if they wish to fund the procedure or not. This may lead to Bupa not allowing any payment for the specific operation recommended by your specialist consultant.

Bupa "Open Referral"

Bupa has adopted across a number of policies, a so-called "open referral" strategy. If your insurance is under this new type of policy then at preauthorisation (when you obtain insurance consent for treatment) Bupa may ask you to go and see a different consultant from the one whom you may wish to see and may provide you with other names. Your personal choice is normally based on your GP's recommendation or it may be based on your own research; in many cases it is because the consultant is someone whom you have seen previously.

Therefore, you will have lost your primary choice of consultant and possibly of hospital. You may still receive appropriate treatment for your condition but not all consultants have the same specialist interests.

What Can Patients Do?

If you are not happy with these changes, there are some steps that you can take.

- ➤ Always insist on seeing your consultant of choice and always try and obtain an estimate of fees from the consultant's office before embarking on treatment. This will not be possible in an emergency situation.
- ➤ If you are a subscriber to a corporate medical insurance scheme whose policy prevents your choice of consultant (and not all do this) then you can bring this to the attention of the manager or HR director in your company who arranges your insurance. The changes to the policies and their impact will be taken into account by your company at the next policy renewal date.
- ➤ You may wish to register your complaint with Bupa, emailing Bupa at <https://www.bupa.co.uk/contact> or to by writing to the CEO of Bupa, Mr Stuart Fletcher, Chief Executive, Bupa, Bupa House, 15-19 Bloomsbury Way, London, WC1A 2BA and to Dr Natalie J Macdonald, Medical Director, Bupa Health & Wellbeing UK, Bupa, Willow House, Pinetrees, Staines, Middlesex, TW18 3HZ. You may wish to copy us in on this complaint at FIPO.
- ➤ Patients who remain dissatisfied can report the issue to the Financial Services Ombudsman. The ombudsman provides a free and user friendly service. Information is available at <http://www.financial-ombudsman.org.uk/consumer/complaints.htm>
The postal address is Financial Ombudsman Service, South Quay Plaza, 183 Marsh Wall, London E14 9SR. The Consumer Helpline is 0845 080 1800.
- ➤ Patients should also note that there is a Private Patient Forum with a social network blog. You may wish to report your story there. <http://www.privatepatientsforum.org/>

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