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LETTER TO ALL CONSULTANT OPHTHALMOLOGISTS AND ANAESTHETISTS

29 September 2006

Dear Doctor

Proposed BUPA and AXA PPP ophthalmology networks

We are writing to update you on the professions discussions with BUPA Insurance Limited regarding its proposed ophthalmology network, and to advise you about the AXA PPP Healthcare initiative for ophthalmology.

At a recent meeting, representatives of BUPA Insurance Limited informed us that they are no longer going to establish a single exclusive network of consultant ophthalmologists and anaesthetists to treat all BUPA members. This decision has therefore removed the threat to consultant recognition status. BUPA has also assured us that it remains committed to traditional referral patterns of GP to a named consultant and to consultant led and delivered care.

However, BUPA are in the process of reviewing their findings from the first stage of the assessment and will then be holding local discussions with hospitals and consultants about the clinical quality and cost of services provided. Whilst we are wholly supportive of cost effective practice it is important to be aware that the local discussions introduce the risk of reduced fee levels and we would advise you to collaborate with your colleagues in order to resist fee bundling or the introduction of fees below the current BUPA benefit maximum.

You may be aware that AXA PPP Healthcare has surreptitiously begun to introduce an ophthalmology network, without any consultation with the profession. This has been introduced with a very short timescale and is to be rolled out to hospitals over the next twelve months, but is due to commence on 1 October. We know that discussions have taken place between AXA PPP and some private healthcare providers with the intention of agreeing a composite fee for the hospital provider, pre and post operative consultations, operation and anaesthetic fees. This network arrangement also requires that patients be referred to the hospital, not a named consultant, thereby breaching traditional referral pathways and in the process completely removing patient choice. We find this scheme to be totally unacceptable and advise you to discuss this with your colleagues locally and then inform your local hospital management that they should not agree to this arrangement, as they do not have the support of the ophthalmologists and anaesthetists. We are confident that if you take a strong line with AXA PPP, as you did with BUPA, that this outrageous set of proposals can be defeated.

We will continue to will keep you informed of any further developments.

Yours sincerely



Derek Machin
Chairman
Private Practice Committee



Rhod Daniel
Chairman
Ophthalmic Group Committee

In association with, and on behalf of:

Tristan Reuser, Association of Ophthalmologists
David Whitaker, Association of Anaesthetists of Great Britain and Ireland
Tony Rubin, British Ophthalmic Anaesthesia Society
Geoffrey Glazer, Federation of Independent Practitioner Organisations
Paul Rosen, UK & Ireland Society of Cataract and Refractive Surgeons

NB. A meeting has been arranged for all interested consultant ophthalmologists and anaesthetists regarding the BUPA and AXA PPP ophthalmology network. The meeting is scheduled for 6.30pm on Tuesday 17 October 2006, at the King's Fund. For more information please phone the meeting organisers on 020 7222 0975.