

NEWS RELEASE

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PATIENT CHOICE THE CASUALTY OF COST WAR IN PRIVATE HEALTHCARE MARKET

Pressure from corporate customers of private medical insurers is creating a cost war in the private healthcare market. In a bid to make savings, the second largest private medical insurer AXA PPP, is changing its policies to give them more power and control over patient care.

According to Britain's top consultants patient choice will be the first casualty, as insurers battle to protect profits and defend their share of the lucrative private medical insurance market, valued at £3.64billion in 2008 and currently showing signs of growth. Changes to PMI contract terms look set to limit patient choice and affect continuity of care. Consultant groups also warn that the changes will see insurers dictating which consultants a patient can see, regardless of GP referrals, undermining the referral pathway and long established relationships.

A recent nationwide survey which saw over 800 consultants respond was conducted by FIPO, the Federation for Independent Practitioner Organisations. The survey was prompted by concerns over AXA PPP's proposed plans to implement a pricing strategy that will reduce reimbursement levels therefore penalising patients financially should they wish to see the consultant of their (and their GP's) first choice. Survey results showed strong resistance from consultants and serious concern over the effects such changes will have on patient care.

Geoffrey Glazer, chairman for FIPO commented: "In a quest to reduce costs, continuity of care is being destroyed. This tactic undermines the long established referral pathway between GP and consultant as well as the patient-doctor relationship. Confronting patients with a cost-based decision about their preferred or GP recommended consultant at the point of authorisation for treatment puts unnecessary pressure on them at a time when they are sick, vulnerable and in need of medical care."

The level of influence some insurers have is of particular concern to consultants with more than 96 percent of those surveyed believing clinical guidelines should be developed by professional organisations rather than private medical insurers, who have vested financial interests; almost 98 percent stated that these insurance changes are being driven by commercial as opposed to quality motives.

A detailed analysis of the FIPO survey results can be accessed [here](#):

<http://www.fipo.org.uk/index.htm>

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Notes to Editors

The Federation of Independent Practitioner Organisations (FIPO) represents professional independent sector medical organisations and specialist groups in Britain. It provides guidance, policies and co-ordination to membership organisations, acting on behalf of the profession to advance the cause of independent health care.

FIPO promotes the highest standards of health care provision, achieved through robust clinical governance and audit, as well as the principles of cost effective practice and choice and involvement for the patient in all aspects of their care.

FIPO CGAC (Clinical Governance Advisory Committee) has provided support and information to hospital Medical Advisory Committee Chairmen around the UK and has developed formal, professionally structured Guidelines to assist them in their role.

More than twenty five professional medical organisations including Royal Colleges, the GMC and the Patients Association have signed the FIPO Charter for Patients and their Doctors, reaffirming their commitment to high-quality patient care. Outlined in the Charter is the ethos that governs each doctor's duties to their patients, the patient's rights and the principles inherent in best medical practice (see <http://www.fipo.org.uk/docs/patientcharter.htm>).

Survey

The survey was completed by 808 consultants working in a number of specialist areas including general surgery, general medicine, ENT surgery, orthopaedic surgery, anaesthesia, ophthalmology, obstetrics and gynaecology, vascular surgery, urology, gastroenterology, cardiology and breast surgery.

Media enquiries for Federation of Independent Practitioner Organisations:

PIELLE Consulting on 020 7323 1587 – Yvette Hodgson or Peter Walker or email:

fipo@pielleconsulting.com