

Private patient care

Things to consider when
booking private treatment
at our hospitals



Gloucestershire Hospitals try to deliver the highest standards of care to all our patients.

If you are considering booking private care with us, please read the guidance below to give you some understanding of the implications of your private treatment.

We hope you find this information useful, but note that it will not cover everything you need to think about and is focussed on frequently asked questions. You should also look at [the detailed terms and conditions available at the hospital's website](#) (Please ask us to send you a printed copy or email a copy of these terms and conditions, if you prefer).

If you have any questions about your treatment or would like to contact us to clarify anything, you can do so by telephoning the following numbers 0300 422 3138 (for treatment at Cheltenham General Hospital) or 0300 4226880 (for treatment at Gloucestershire Royal Hospital). We are available Monday to Friday between 0800 and 1600. You may also email us on ghn-tr.private.patientbookings@nhs.net

What are the advantages of “going private” at Gloucestershire Hospitals?

- ▶ You will have greater choice over elements of your treatment (for instance, choosing who your consultant will be or dates to be treated on) than on the NHS.
- ▶ Some services can be provided that aren't NHS funded or where the eligibility criteria are different to the NHS.
- ▶ Unlike at many private hospitals, we have the fullest and safest configuration of specialist staff and equipment.
- ▶ We also have comprehensive intensive and high dependency care 24/7. This means that in the event that you have complications or (highly unlikely) event that you need emergency treatment this can be easily provided for, without needing to transfer here in an ambulance. We are already the back up for many local private hospitals.
- ▶ There are often shorter waiting times than on the NHS, because private capacity is additional capacity to the NHS.



How can I get referred?

If you want private treatment or tests you can refer yourself for them. Historically, private referrals were usually made by letter from one doctor to another. This process may still be useful to help coordinate your treatment if you return to the NHS after your private care. Some consultants may choose to only see patients who have a referral from another doctor, in line with previous British Medical Association advice, and some insurance companies may insist on one.

How do I pay for private treatment?

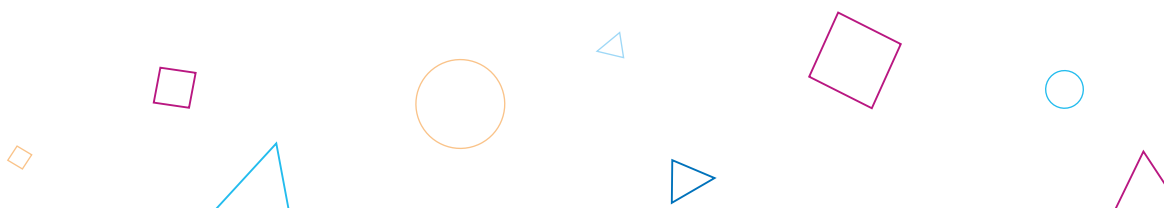
There are normally two ways to pay for your private treatment; let us know which applies to you when discussing private treatment or tests with us and by also filling out and returning an “agreement to pay form” to Private Patient team. This form contains details that enable us to charge appropriately for treatments. It should be sent to you with your booking letter and is available on our website too, but please ask for it if it’s not sent to you.

Private medical insurance (if you hold a valid policy that covers your treatment)

If you have private medical insurance you will need to call your insurer to ensure your policy covers the treatment you require. If it does, please request a ‘pre-authorisation number’ based on a procedure code then share it with us. We will also do this for inpatient care (i.e. if you’re coming to the hospital overnight or for a day-case treatment). Please note, insurers will only authorise treatment if there is a clinical need outlined in a referral letter. A booking can be made once pre-authorisation has been confirmed with the hospital, the doctor and yourselves.

Self-payment (paying for treatment yourself, or having your treatment paid for by anyone other than insurance)

If you are considering paying for your treatment yourself then please speak with us directly. We will provide you with a quote for treatment, that will be a package or “fixed” price where possible (and with conditions). If you accept this quote you will be required to pay the full cost before we are able to confirm your booking and arrange your admission.



Things to note about payments for private medical care (especially for self-payers)

When you attend Gloucestershire Hospitals for private treatment you or your insurers will usually be charged separately for professional fees and hospital fees.

Professional fees

These are charged by your admitting consultant and can include fees for other doctors involved in your treatment pathway, such as anaesthetists or diagnostic consultants. Consultants who charge professional fees are not employed by the hospital when they carry out private work at Gloucestershire Hospitals.

Please note: Your admitting consultant (i.e. person in charge of your care) is required to inform you of their fees prior to any tests or treatment. They also have a duty to inform you of any additional fees you are likely to incur from any other health professionals during the course of your treatment.

Hospital fees

These relate to expenses incurred such as for accommodation costs, equipment and medicine costs, theatres, laundry and nursing support.

Are fees subject to change and will I ever have to pay more than I was quoted?

Yes. There are two circumstances in which private patients may need to pay additional fees:

1. "Excess" professional fees that a policy doesn't cover (For example, if a consultant charges above insurers' standard payment terms); and,
2. If a self-funded procedure ends up being significantly more complicated than expected and you require a longer-than-expected stay in hospital or additional procedures. This is rare.

The Trust will always make an estimation of the potential costs for treatment, based on our experience and also on:

- ▶ "Standard" parameters agreed amongst major insurers for what should be expected in a procedure; and,
- ▶ The estimated / predicted length of stay provided by your admitting consultant.

In the vast majority of cases our estimates for hospital fees will be accurate and / or insurers will pay for longer than expected treatment (for any reasonable clinical reason).

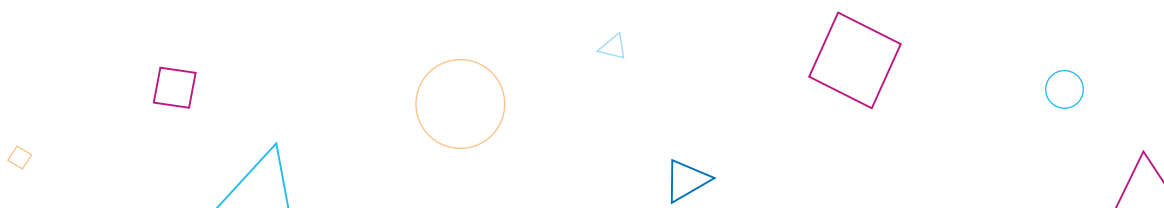
For many self-funding procedures and tests, the hospital fees are fixed as a package – ask us if yours are. To prevent surprises about professional fees, these should be discussed with your admitting consultant in advance of treatment (i.e. ask the person in charge of your care or tests).

If you are insured, we advise that you check their fee structure with your insurers, to see if their fees are full covered.

Things to ask about prior to your treatment to help understand and evaluate treatment and costs

To ask of your consultant

- ▶ Why do I need further tests or treatment?
Can I be seen by the NHS for it?
- ▶ How quickly can I be seen privately? How quickly could I be seen on the NHS for this?
- ▶ What are your fees? Are they in line with the fee structure from my insurance, or will I have an excess to pay? Are there circumstances in which they might vary?
- ▶ Which other doctors will be treating me? What are their costs? What are their contact details, so I can check with them?
- ▶ What is your estimate for the all of the consultant costs incurred during this proposed treatment?
- ▶ How long do you expect I'll be in the hospital for?



To ask of your private medical insurance company (if paying by insurance)

- ▶ Is private treatment Gloucestershire Hospitals fully covered by my policy for the treatment or diagnostic tests that I want there?
- ▶ Is my preferred consultant covered by my policy, for the treatment that I want?
- ▶ Are all of my doctors' fees covered or will I have to pay an excess on them?
- ▶ What is excluded?

To ask of the hospital

- ▶ What will I need to bring with me?
- ▶ (For a self-funder) Is my treatment or test a "fixed price"?
Are there circumstances in which this price might vary?

Can a private patient switch to NHS and vice versa?

This can be a complex issue. If you are considering switching between privately funded treatment and NHS care, we would strongly advise that you discuss the matter with a member of our private patient team. Typically:

Switching from private treatment to NHS care

Once you have been admitted to hospital for private healthcare treatment at the Trust it is not possible, unless in exceptional and unforeseen circumstances, for you to become an NHS patient during your admission and prior to your discharge. This does not prevent you accessing NHS services in the usual way for any other treatments or healthcare services which you may require before or after a specific private treatment or diagnostic test, if you are an NHS eligible patient.

Switching from NHS care to private care

An NHS patient can always choose to switch to private patient status if there is sufficient capacity to do so, but may find limited advantages once treatment has started.

Please note: If you choose to have a private treatment for only part of your overall treatment pathway (e.g. a scan), your entitlement to NHS care will continue to be free and your position on NHS waiting lists should be unaffected.

A sample of further guidance on these issues

Citizens Advice Bureau

Citizens Advice Bureau guidance on Private Health treatment: www.citizensadvice.org.uk/Global/Migrated_Documents/adviceguide/h-private-health-treatment.pdf

GOV.UK

Guidance on NHS patients who wish to pay for additional private care 2009: www.gov.uk/government/publications/nhs-patients-who-wish-to-pay-for-additional-private-care

NHS.UK

If I pay for private treatment, how will my NHS care be affected? www.nhs.uk/common-health-questions/nhs-services-and-treatments/if-i-pay-for-private-treatment-how-will-my-nhs-care-be-affected/

NHS Employers

Code of Conduct for Private Practice 2004: Recommended Standards of Practice for NHS Consultants: www.nhsemployers.org/~media/Employers/Documents/Pay%20and%20reward/DH_085195.pdf

