

Practical advice on private healthcare, the benefits and how to go about it

Self-pay, fixed price and other health plans explained to help you make an informed choice

Exploring the low cost options for health cover – how to get the best value for your needs



Affordable Private Healthcare Guide

Helping you make the right choice www.privatehealthcare.co.uk
August 2014

Going private on a budget

Finding the right medical treatment while looking after your wallet can be a challenge. We help negotiate the complex world of private healthcare so you can explore all your options

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Welcome

As pressure increases on the NHS, more patients are considering the option of “going private” to access prompt, high quality treatment within the UK's private healthcare sector and within the private patient units operated within the NHS. As private medical insurance becomes more expensive due to rising costs of healthcare, those with private medical insurance are exploring low cost options for health cover. This guide presents some of the options for affordable private healthcare.

Private healthcare may not be as expensive as you think. We provide pricing tables within this guide that demonstrate the cost savings that can be made by shopping around for private healthcare. Stimulated by the recent report and recommendations from the Competition and Markets Authority, there is a drive for greater transparency in private healthcare, enabling patients to make a more informed choice of both consultant and private hospital. Prices for “fixed price surgery” are now readily available through private hospital websites and portals such as Private Healthcare UK (www.privatehealthcare.co.uk) and GoPrivate (www.goprivate.com). During 2014/15, more information will become available through the publication of data on treatment

outcomes in private hospitals.

The UK now has a “mixed economy” in healthcare. Through NHS Choose and Book, NHS patients can opt to be treated in a local private hospital with the cost funded by the NHS. Within the NHS, hospitals are developing their private patient units to offer services that offer an affordable option to private patients. Health insurers are launching new products for those who want the security of a health policy but may be put off by the costs of existing schemes.

The Affordable Private Healthcare Guide brings together many of the options for patients seeking an alternative to NHS care. Private healthcare may not be as expensive as you think... and may provide an immediate solution to your healthcare problem.

Keith Pollard

A handwritten signature in black ink, appearing to read 'K. Pollard'.

Managing Editor




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Going private

The benefits of opting for private healthcare are numerous, and available to everyone, whether or not you have medical insurance in place.

There are many reasons why opting for private medical treatment could be right for you, whether you want to avoid lengthy NHS waiting lists, are not satisfied with treatment available on the NHS or simply want a second opinion. Despite significant government investment, NHS resources continue to be stretched, which can result in delays before NHS treatment is available.

Going private gives fast access to the treatment you need, plus additional benefits including being able to choose when and where you will be treated and a choice of consultant or private specialist. Sometimes private healthcare also gives you the option to have treatments that may not be available on the NHS at all.

Private treatment can usually be carried out quickly. Consultations and appointments take place at times that suit you and recovery from a major operation takes place in a comfortable, private en-suite room where friends and family can visit with few restrictions.

Available for all

Many people have private healthcare because their employer offers private health insurance as a workplace perk, but you don't need to have medical insurance to get private treatment. You can simply pay directly for your private treatment; this is known as 'self-paying' and a number of companies offer fixed price surgery schemes or loans for private surgery exactly for this purpose, which makes private treatment a possibility for all.

The private healthcare sector and the NHS may be separate, but they work closely together, with the government's support. In some cases, your primary care trust may have contracted with a local private hospital to provide treatment for NHS patients.

Specialist referral

If you do decide to opt for private medical treatment your first step is to see your NHS GP. They will write a referral letter for your appointment with a private doctor or specialist. Your GP will recommend an appropriate specialist, or you can tell them which specialist you would like to see.

Many private doctors, consultants and



Choosing private healthcare without insurance – the process

- Get a private patient referral letter from your NHS GP.
- Attend an out-patient appointment with the consultant. This will typically cost between £150-250.
- The consultant will write to your GP to update them.
- If you need an operation, ask a private hospital for a fixed price, including surgeon's and anaesthetist's fees and the hospital's costs for the operation.
- If you are happy with the price, the admission date is booked, with all or part of the cost paid before admission.
- After treatment, the hospital/consultant sends an update to your GP and you will attend a follow up appointment with the consultant.

specialists are reluctant to see a patient unless there is a referral letter from the patient's GP and you can check with your preferred consultant's private secretary to see if this is the case. Many private hospitals will arrange an appointment with one of their consultants, but communication with your GP will take place during your diagnosis and treatment. GP referral letters are not normally required for physiotherapy, health screening, and cosmetic surgery and dentistry.

With an appointment with a private specialist arranged, make sure you ask for any relevant NHS test results, details and information from your GP in advance and take them with you. That way you won't have to repeat expensive scans or x-rays. When attending the consultation at the hospital or clinic, self-paying patients should go prepared to pay the consultation fee on the day, while insured patients will need to take their registration documents and completed claim form/proof of pre-authorisation by the medical insurer.

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Counting the cost

It's impossible to put a value on your health and wellbeing, but it is important to be aware of the cost implications of going private in order to make an informed decision

Seeing a consultant is perhaps the most important stage of your private medical treatment, as they are the person who will diagnose your condition and decide on the most effective course of treatment. Consultants are the top level of specialist doctors and it takes around nine years to make the grade, after graduating from a five year medical course. Naturally, at this point in their careers, these doctors are very well trained and highly experienced and their salary and private fees reflect this.

Typical charges for a private consultant

A typical consultant appointment will cost between £100 and £250, depending on where you live and the nature of the consultation. For example:

- A consultation for carpal tunnel syndrome with Spire Healthcare costs £200 at their Thames Valley hospital, yet only £180 at their Wirral hospital in the North West.
- A Thames Valley consultation for a colonoscopy costs just £160 yet a consultation for a back operation costs £250.
- You can expect to pay considerably more – maybe as much as £500 – for a consultant who is a leader in their field and who works at one of the prestigious private hospitals in central London.
- Follow up visits are usually cheaper than the initial consultation, but you will still be charged for the appointment. Follow up appointments are usually around £100.

About your private consultation

It is important to remember that your initial private consultation is unlikely to be included

in the cost of any fixed price surgery or treatment scheme. Not everyone who has a consultation will require surgery so it is usually charged separately. You may also find that your private medical insurance excludes the initial consultation, providing cover only for the operation itself and your inpatient stay. The same applies to follow up consultations, or outpatient appointments, which are only included in the more expensive policies.

It is also worth bearing in mind that a private consultation may not last any longer than a similar consultation on the NHS. Consultants are very busy people with a tight schedule and they are unlikely to spend longer with you than is necessary, even if you are paying for their time, so don't expect the red carpet treatment.

Operation fees

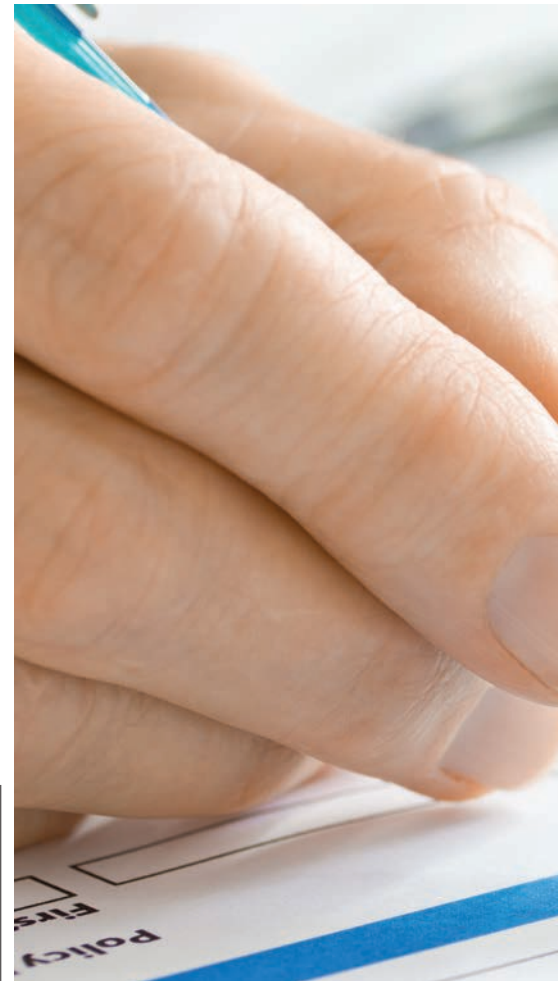
If the decision is made that you need an operation then there will obviously be more costs involved. The price of your private operation depends on the complexity of the procedure, how long the operation takes and the level of skill involved. For example, a simple mole removal can cost as little as £1,100, whereas a complex knee replacement can cost over £14,000.

Factors that affect the price

Your personal medical history – factors such as high blood pressure, excess weight and family history of complications will increase the complexity and therefore the cost of your operation.

Where you live – prices are generally higher in the south than the north, and are even higher in London.

The quality of the clinic – prices are naturally higher at prestigious Harley Street clinics and hospitals than in provincial centres, as they attract the very best surgeons.



The choices you make – different drugs, different implants and different surgeons all come at different prices.

What is included – some 'bargain' prices may not be such good value when you examine them in detail and price up the extras.

Why so much?

There is no denying it - private medical treatment and surgery is not cheap. In fact, it can cost less to buy a new car than have your knee replaced. However, it's worth thinking about the reasons behind these costs before making any decisions. There are so many specialists involved over the course of an operation, and every one of them needs to be paid for. If you have been brought up with the NHS, taking all of these specialists for granted, you may never have considered what they cost, but when you go private you have to pay for them all.

Your specialist team

Think about your operation from start to finish and you'll soon see just how many experts are involved, even in a simple, routine procedure. These include:

- nurses to prep you before your surgery
- an anaesthetist to put you under and monitor your wellbeing
- the surgeon who is performing your operation
- any assistant surgeons required for the procedure



- theatre nurses to work with the surgeon
- recovery ward staff to monitor you post op
- porters to move you around from ward to theatre and back

And that is just for the operation itself. You will also need a separate team to care for you on the ward following your procedure, as well as cooks, cleaners and many other ancillary staff.

When you consider how many people are involved, many of them highly trained specialists in their field, it is actually amazing that private hospitals can offer operations for as little as they do.

Fixed price surgery

Most private hospitals will offer fixed price deals that cover your whole operation from admission to discharge. It is important to check what is included in the fixed price to avoid any surprises when you get your bill. Some fixed prices will only cover a set length of post op stay, while others will only include discharge drugs for a couple of days, so there may be extra expenses involved beyond this - for example a typical night in hospital costs around £250 - £300.

Other costs of your operation:

- Blood tests – from £50 to £150.
- X-Rays – around £100 each.
- 24-hour BP or ECG monitoring and analysis – around £300.
- CT or MRI scans – around £500 each.

Why pay for a private consultant?

- **Even the very best consultants are still free of charge on the NHS, so why would you pay around £200 for perhaps 15 minutes of their time? There are many advantages that justify the cost of private consultations, including:**
- **No waiting lists – you can see your consultant as soon as you need to at a time to suit you.**
- **More choice – you can pick the consultant you want to see, rather than the one you are assigned by the NHS.**
- **No junior doctors – even when you have a consultant appointment with the NHS, there is no guarantee that you will actually see the consultant in person, and you will often be passed on to one of their team of junior doctors. When you pay to see a consultant, you are guaranteed to see them in person.**

Quality guaranteed

As a private patient, you are guaranteed to be seen promptly by a consultant, at a time that suits you. You are also guaranteed to see the consultant of your choice, and you are guaranteed to see the consultant in person rather than a trainee or junior member of their team.

You are usually guaranteed certain standards of accommodation, such as an en suite private room, a choice of high quality meals and open visiting. You should also be guaranteed certain standards of treatment that respect your privacy, your dignity and your rights, and treat your record and personal data with the strictest confidence.

A price promise is an important guarantee from your private health provider, as this will avoid any nasty surprises when the bill arrives. This is a promise of an agreed price, which includes a guarantee that any further treatment required, including any returns to theatre, will not be charged for. This may not include every aspect of your treatment though, so always read the small print to see exactly what the price guarantee entails.

Importantly, even the best healthcare in the world cannot guarantee the outcome of your operation. There are always variables and risks that are beyond the control of the surgical team and they cannot guarantee a successful outcome with 100% certainty. In fact, you will usually be asked to sign a consent form stating that you understand the risks.

Where can patients **search, compare** and **book** the best in **private healthcare**?



Compare private healthcare providers - including what they offer and their costs - quickly and easily at www.GoPrivate.com

Search by treatment, medical condition or aesthetic procedure and when you've chosen your preferred doctor or clinic you can make an appointment at the click of a button.

GoPrivate.com enables you to compare hundreds of surgeons, doctors, hospitals and clinics across the UK on a range of criteria including location, experience and qualifications and price for a consultation or treatment.

www.GoPrivate.com makes searching for a private healthcare provider a simpler process.

The “Going Private” price guide

The cost of going private may not be as high as you think. We’ve gathered the latest prices for diagnostics and “Fixed Price Surgery” from around the UK. Prices vary significantly from area to area and hospital to hospital, so it pays to shop around. Don’t be afraid to ask a private hospital to “price match” using this guide to obtain the best price available.

SCANS AND INVESTIGATIONS		
Chest X ray	£75 London	£120 Durham
CT scan: one body part	£364 Somerset	£809 Nottinghamshire
MRI scan: one body area	£240 Durham	£734 Beckenham
Ultrasound of breast	£150 Kent	£368 Kent

OPERATIONS		
Cataract surgery	£1,200 London	£3,537 Berkshire
Dilatation and curettage (D & C)	£1,459 Yorkshire	£4,212 London
Gall bladder removal (Cholecystectomy)	£4,000 Bath	£6,895 Kent
Knee ligament surgery (cruciate ligament repair)	£4,600 Bath	£8,403 London
Obesity surgery - gastric band	£2,200 London	£7,439 Hertfordshire
Prostate surgery (TURP)	£3,500 London	£8,652 Hertfordshire
Repair of inguinal hernia (keyhole surgery)	£1,095 Cornwall	£4,370 Middlesex
Total hip replacement	£8,860 Essex	£14,980 Norfolk
Total knee replacement	£9,49 Yorkshire	£14,395 Cambridgeshire
Varicose veins ablation (both legs)	£2,800 Edinburgh	£5,095 Northamptonshire

Go to www.goprivate.com to get the latest price comparisons on private operations.



The choice is yours

One of the benefits of opting for private healthcare is the decision over where you receive treatment, and who treats you, is up to you. So what do you look for when choosing a hospital and a consultant?

Usually you will need a GP referral before you can proceed with treatment from a private consultant, so this is the best place to start your search for a consultant. Your GP will be able to recommend the most appropriate private specialist for your condition. You don't have to take their recommendation, but they will know the specialism and reputations of most local doctors in private practice.

Decide your priorities

When choosing your consultant, it is important to think about why you went private in the first place. For instance, if it was speed of treatment, then you need to look for good availability. If it was quality, then you need to choose a consultant who works out of a hospital that meets your standards. It is also worth considering whether getting the very best consultant is worth travelling for, and potentially being out of reach of your visitors.

Narrowing down the search

When you are paying so much for your treatment, or for your private medical insurance, you want to be sure that you are getting the very highest standards of care from the best private consultants. To help you make a decision make sure you -

- Talk to friends and relatives who have had treatment.
- Research the consultant online either at

their own website or their hospital website.

- Google the consultant to see if there are any positive or negative news reports about them.
- Check their qualifications and experience in the field.
- Check their published success rates, including unexpected returns to theatre and infection rates.

First impressions count

Once you've chosen a consultant try to make contact with them and their team. The way your enquiry is dealt with will give you a good idea of how you will be dealt with on the day.

Once you are happy, you should make an appointment with the consultant, but remember, your course of treatment is not set in stone. If you do not feel that you are able to communicate with your consultant, if you don't like their attitude or you feel uncomfortable for any other reason, you do not have to proceed with treatment.

Location, location

Choosing where to receive private medical treatment is also important and likely to be influenced by a number of factors. If staying local is a priority, then a little online research into private clinics and hospitals in your area could go a long way. The Care Quality Commission (www.cqc.org.uk) lists the details of all facilities under their jurisdiction in an

online database, which not only lists the name and contact details of all private hospitals and clinics, but also lists their specialities, services and the date and results of their last inspection.

What facilities are available?

One of the key questions to ask when doing your research is whether the hospital or clinic offers the services you require, or better still, specialises in this kind of treatment. It may be worth travelling to a specialist unit, rather than having treatment nearer home at a less experienced facility. You also need to check what facilities are available in case of an emergency. Many smaller private hospitals do not have intensive care or high dependency units, which means that you will be sent to the nearest NHS hospital if anything goes badly wrong.

Previous patient feedback

You can find patient satisfaction rates and more detailed patient feedback online, either at the hospital or clinic's own website or on comparison websites and forums. While the raw data of performance indicators will tell you part of the story, the personal experience of fellow patients can often be far more illuminating.

See for yourself

Make an appointment to visit the hospital or clinic, talk to the staff and some of the current private patients and make sure that it 'feels right' on a personal level for you.



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Prevention is better than cure

Our bodies are dynamic and constantly changing living beings, so routinely checking that everything is behaving as it should be makes good health sense.

Periodic health screening allows early detection of any signs or symptoms of ill health or disease. Generally, the earlier a healthcare provider is able to diagnose a condition, the better likelihood there is to successfully treat it. Early detection of many health conditions and diseases can be life-saving.

Although the NHS provides some free health screening services for men and women such as Bowel Cancer Screening, Breast Screening and Cervical Screening programmes, there is no national NHS screening programme for diseases such as prostate and testicular cancer, osteoporosis and glaucoma. The private sector fills the gap and provides a wide range of health screening services for individuals who wish to invest in their health and in the early detection and prevention of diseases.

Most health screens for individuals will include a consultation with a doctor or nurse, a full medical and family history, a

medical examination and a series of tests relevant to your age and sex which will determine your state of health. Many health screens will also incorporate a proactive element in terms of providing a personal health action plan which encourages healthy living and reduces the risks of major diseases.

The types of health screens available vary significantly in their content and in price. Many companies offer products such as Executive Health Screens, Well Man and Well Woman Screens, Personal Health Profiles, Health Risk Assessments and individual tests and check-ups such as Breast Screening (including Mammography or breast X Ray), and Prostate Cancer Screening for men.

The aims of health screening are threefold:

- To identify pre-existing health problems.
- To assess your risk factors for disease.
- To provide recommendations on your lifestyle and health that will encourage a longer and healthier life.

You should compare closely what is offered when you approach a hospital or a company about health screening. Look at what tests make up the screen and make a comparison between screens. Ideally, you should select a health screen, that is tailored to your requirements, according to your sex, age, family, and medical history.

You should expect:

- A physical examination and appropriate tests.
- A consultation with a doctor or nurse.
- Advice about behavioural and lifestyle change.
- A written report.
- Supporting information about maintaining a healthy lifestyle.
- Many health screens will also incorporate a proactive element helping to develop a personal health action plan to encourage a healthy lifestyle and reduce the risk of illness.

Health screening:

An affordable, effective way to understand and change your health and lifestyle

Heat rate, blood glucose, body mass index... a screening will give you a lot of health measurements, but it's the one-to-one with an experienced GP or highly qualified nurse that makes health assessments at BMI Healthcare so worthwhile.

"It might seem an obvious cliché, but each year like clockwork we take our cars for an MOT, to check their engines and see if they are roadworthy and fit for purpose," says Rita Courtier, lead health screening nurse at BMI Healthcare. "Often a car can be running fine but the MOT can highlight things that have gone wrong, that we weren't aware of, or identify things that need our attention before they fail in the future. In this way an MOT is much like a health screen. It can help to identify hidden conditions and look at your long term health. The difference between an MOT and a health assessment is that a car can cost a few thousand pounds; but your life and health are priceless."

Leonie Harvey, 57, visited BMI Healthcare for one of their Advanced Plus health assessments. "I have been having health screens for a number of years as I had previously worked in a healthcare environment. Even though I live a healthy life and am aware of what I need to do to stay fit I was surprised by some of the findings and the suggested lifestyle changes. In the UK we are often not proactive when it comes to our health but health screens are a relatively inexpensive way that we all can invest more in our personal health and wellbeing."

During a health screen at BMI Healthcare you spend an hour with a specialist health screening nurse, who measures your weight, height and two waist measurements, to help formulate your Body Mass Index (a measurement of your body fat). After that the nurse takes your blood for testing and analysis. The nurse will also look at your hearing, eyesight, lung power and blood pressure.

Your health screen also involves the completion of a health questionnaire which looks at a variety of lifestyle factors, for example: how often you eat fruit and vegetables, how much water you drink and how much alcohol you consume.

If you opt for an Advanced Plus health assessment your nurse will perform a



15-minute test involving a treadmill with electrodes to measure the electrical activity of your heart while exercising under the watchful eye of your specialist clinician.

Finally, with a Select, Advanced or Advanced Plus health screen from BMI Healthcare you also have a one hour one-to-one with an experienced GP. During this session they will run through the results of your earlier tests and provide a forum for you to run through any concerns, prior medical history and issues you may have.

"For me it was this time with the GP that was most insightful," Leonie commented. "When else do you have the opportunity to sit down with a Doctor for an extended period of time to discuss your concerns about your health and the lifestyle choices you are making? Having that time to really reflect on how you live your life and the

choices you are making is invaluable."

After your health assessment at BMI Healthcare you will receive a detailed health report with a record of all your results. "I often find myself revisiting this report and using it as a baseline to measure improvements in my weight, blood pressure and cholesterol," Leonie commented. "A health assessment can help identify actions you need to take to improve your health and wellbeing but also identify areas that need closer monitoring. I think for me, health assessments are about visibility and awareness. Visibility of what is going on in my body and awareness of what I need to do to live a longer life. At the end of the day we only have one life and a health assessment can help you keep living it to the full."

To book a health assessment at BMI Healthcare and save up to £75* please call: 0800 092 8680.



For information on the benefits of a health assessments at BMI Healthcare please visit: bmihealthcare.co.uk/health-assessment-offer

*The following discounts are available on the specified assessments at participating Health Assessment centres only. £75 discount on Advanced Plus, £50 discount on Advanced and £40 discount on Select. A full list of Health Assessment centres is available on our website www.bmihealthcare.co.uk/health-screening. The offer is not transferable to any other products and cannot be used in conjunction with any other offer. You must book your health assessment by 30th November 2014. BMI Healthcare reserves the right to withdraw the offer at any time.

How do I get a quote for private treatment?

Go online to www.privatehealth.co.uk and submit a request for further information, a quotation or an indicative cost for private hospital treatment. Your enquiry will be forwarded to a maximum of three private healthcare providers who partner with the Private Healthcare UK website. They will respond with further information or a quotation for your treatment so you have a good idea of what the cost will be and can choose the plan that best suits your requirements.

Fixing the price

If you don't have private health insurance and want to pay out of your own pocket, most private hospitals will be able to offer you a fixed price surgery option for private hospital treatment.

You can get private hospital treatment without private health insurance, as a 'self-paying' patient and one of the options for doing so is to choose a fixed price package. Run by many of the private hospital companies in the UK, fixed price schemes are aimed at people who do not have health insurance. They offer the advantage of having a private operation at a time that suits you and at a fixed price that has been agreed beforehand.

Fixed price surgery schemes are available for many private operations, and are usually available to most people, at any age. The patient pays a fixed price for the operation which normally includes all medical and nursing care at hospital, the cost of private hospital accommodation, operating theatre fees, drugs and dressings while in hospital, as well as the surgeons' and anaesthetists' fees (provided that the consultant participates in the scheme).

What is included?

The "fixed price" for a private operation normally includes:

- All your medical and nursing care during your stay in hospital.
- The costs of your private accommodation.
- Operating theatre fees.
- Any drugs and dressings that you need while in hospital.
- In most hospitals, the surgeons' and anaesthetists' fees for the operation will also be included, but make sure that you check beforehand. The price is normally payable on or before admission to the hospital, and can usually be made in cash or by cheque, or credit card.

First, discuss referral to a private surgeon or specialist with your GP. Then, approach your local private hospital and ask about details of their Fixed Price Surgery scheme. Tell them what operation you need and which consultant you would like to do it, if you have a preference. In some hospitals, the price may differ depending on which surgeon does the operation.

The hospital will then be able to provide you with an indicative fixed price for your private operation. This will be subject to a medical and surgical assessment by the surgeon who will carry it out. The price may vary a little depending on precisely what is required for your specific condition.

For some operations, such as private hip and knee replacements, you may be given a range of prices. The price may vary depending on what kind of prosthesis (implant) is best for you or more suitable for you. You will be able to agree the choice of prosthesis with your specialist.

Priority access to the best cancer doctors and most advanced treatments



Access to private medical treatment with no need for private medical insurance

Are you an NHS patient looking to avoid delays? Would you like access to advanced treatment options or an expert second opinion? Perhaps you are a patient with private medical insurance wanting priority access to the world's leading cancer doctors. Whatever the case, Harley Street Cancer Concierge can help.

HSCC provides priority access to the world's leading cancer doctors and most sophisticated treatment. We can also arrange "fast track" diagnostic testing, expert second opinions and comprehensive support.

A single point of contact provides invaluable support that allows you to focus on recovery and getting back to enjoying the things that are important to you. That's what Scottish farmer Robert Lungair found after he was diagnosed with cancer in 2012. The 65-year-old decided to seek treatment options that were not accessible to him in Scotland and contacted HSCC. Two years on from diagnosis,

Robert is busier than ever, overseeing next season's crop planting and preparing for his daughter's wedding - and still fighting cancer.

"I travel to London where I am looked after by specialists. They organise different treatments and keep me advised on what's best for my condition. It's part of my life now, just like everything else I do," he says.

HSCC arranged for Robert to fly to London to undergo diagnostic tests and private consultations. A PET scan and a case review with one of the world's leading cancer specialists led to a course of chemotherapy which started the following day. His trips to London for treatment and case reviews are all handled by his HSCC Patient Manager, who meets him at the airport - usually with his favourite coffee and a newspaper.

"The support of HSCC has been invaluable whilst undergoing treatment," says Robert. "They put everything in place so my treatment runs smoothly;

they make sure I'm in the right place at the right time, make last minute changes if treatment plans change and are always there to help. Their knowledge of private cancer treatment and ability to get things done quickly is incredibly reassuring.

"The support of HSCC has been invaluable whilst undergoing treatment"

"They also support me during appointments - asking questions of my consultant, making sure I understand what I've been told and following up if necessary. At what's been at times very difficult, they have been able to take away the burden of organising treatment and allow me to focus on fighting the disease. They are always there to help and right now I am doing very well."



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CANCER CONCIERGE

Call now : 0844 8099995 or email: enquiries@hscuk.com

www.harleystreetcancerconciierge.com

Going Private in the NHS

Many patients are increasingly asking “Can I go private on the NHS?” The answer is that this choice is now more widely available to patients than ever before. Words by Philip Housden

Many NHS hospitals treat private patients. At the last count, there were around 80 such NHS private patient units offering treatment for patients whether you have private medical insurance, or are paying directly for yourself. This number is increasing all the time and you may want to check whether your local hospital provides this service, or is planning to do so.

Essentially, Private Patient Units (PPUs) within the NHS offer a wider choice to patients wishing to be treated privately. These PPUs will provide a similar level of comfort and privacy as you might find in a private hospital. Rooms will be en suite, food will be hotel class and most PPUs operate with their own dedicated nursing and other staff to ensure the patient’s clinical and comfort needs are met.

There are a number of benefits of being treated privately within the NHS, including:

- **Confidence**
By having your private treatment in a hospital within the NHS, you can rest assured that there is a full range of general and specialist medical services on site, 24 hours a day. There will always be a doctor who can see you immediately in an emergency. You will have immediate access to any additional care which you might need, including a complete range of diagnostic facilities.
- **Teamwork**
Consultants who treat privately in NHS hospitals are there because it is their work base and this is where they have built up a specialist team. There is always back-up from a wide range of on-site expert care, including specialist nurses and therapists.
- **Convenience**
In many cases it may make sense for you to be treated in the most convenient location, and this may be the local NHS hospital.
- **Lower charges**
NHS private patient prices can be highly competitive if you are paying for your own treatment. Services for

private patients are competitively priced, with fixed cost packages available for self-funded patients.

- **Supporting the NHS**
Income generated by services provided to Private Patients within NHS Hospitals will go back into the hospital’s general finances, to support improvements which benefit all patients at the hospital.

Can I use my medical insurance in NHS private patient units?

Yes, you can be treated privately within NHS hospitals whether you have private medical insurance, or are paying directly for yourself. Most PPUs are recognised by all the private health insurance companies. NHS private patient units can, in most cases, arrange for your account to be settled directly with these insurers in the same way as private hospitals can. Some insurance company policies do restrict cover, whilst others restrict access to certain hospitals, so you need to check before you make your decision.

Am I still entitled to NHS care?

Yes, you are still entitled to NHS care free of charge, if you choose to pay for additional private care whether in an NHS private patient unit or elsewhere.

You may have decided to opt for a private outpatient consultation. In this case, your position on an NHS waiting list should not be affected. But, you shouldn’t need to have any of the same tests twice, for example, to diagnose or monitor your condition. In this case, the test will probably be part of your NHS care and the result will be shared with your private care provider if necessary.

You will find that there will be a clear separation between your private treatment and your NHS treatment.

What private treatments at NHS hospitals can my doctor tell me about?

Your doctor will be able to tell you about all the treatments for your condition, including any that are only available privately. However,

NHS doctors aren’t allowed to actively advertise private services to NHS patients and so if you want to know whether your doctor can treat you privately, you will need to ask. They can then tell you about the private services that they offer, which may be provided from an NHS hospital.

Do I need a GP referral for private treatment?

No, it’s possible to seek private treatment from a consultant or specialist without being referred by your GP. However, in most cases, it is best practice for patients to be referred for specialist treatment by their GP who will be best placed to discuss the options available, including referral to a consultant who practises in an NHS private patient unit.

If your GP thinks you need specialist treatment and you want to pay for it privately, they can write a letter of referral to a private consultant or specialist explaining your condition and your medical history. Your GP will only refer you to a specialist if they believe that specialist assessment or treatment is clinically necessary. If they don’t think it’s necessary, they do not have to refer you – either privately or on the NHS.

How do I use my private medical insurance?

Insurance companies usually require a letter of referral from a doctor. Some companies will accept a GP’s or patient’s choice of consultant, while others have their own lists of preferred consultants and restrict your choice.

If you have private medical or health insurance and you need specialist treatment, check your policy to find out:

- if your policy covers the treatment you need.
- whether your insurance company accepts consultant referrals from GPs or if it has its own list of consultants.
- when you need to contact your insurance company to tell them you’ve been referred for treatment.

Arrange to see your GP as soon as possible if your insurance company accepts GP referrals.

NHS PPU	Chest x-ray	MRI Scan	Cataract Surgery	Total Hip Replacement	Total Knee Replacement
South Devon Healthcare NHS Trust (Torbay Hospital)	£46	£512	Not offered	£6203 (excl. implant, consult. fees)	£7475 (excl. consult. fees)
Chelsea and Westminster NHS Foundation Trust (The Chelsea Wing)	£99	£683	£2,100	£9,976	£11,500
Luton and Dunstable NHS Trust (Cobham Clinic)	£103	£638	£1,355 - £2,255	£8,036 - £10,917	£8,472 - £10,611
Plymouth Hospitals NHS Trust (Meavy Clinic)	£84	£772	£750 (excl. consult. fees)	£8,256 (excl. consult. fees)	£10,272 - £10,831 (excl. consult. fees)
Frimley Park Hospital NHS Trust (Parkside Hospital)	Not offered	£450	£1,056	£8,018 (excl. consult. fees)	£7,676 (excl. consult. fees)
Hinchingbrooke Healthcare NHS Trust (Mulberry Private Healthcare)	£89	£646	From £2,258	From £10,087	From £9,906

If you make a claim for treatment under your private medical insurance, some sections of the claim form will probably need to be completed by a doctor. In most cases, the doctor who provides your treatment will be the best person to complete the form, because they will have the information required.

What about if I need emergency treatment, or have complications?

The NHS will be there for you if you need emergency care and treatment. You are entitled to this whether privately insured or not. However, when you attend your local Accident and Emergency department, or another area within an NHS hospital, it may

be helpful to let the NHS team know that you have insurance. Where the NHS hospital has a private patient unit they will then be able to arrange for your admission to a bed as a private patient, utilising the benefits of your insurance.

If you are a patient at a private hospital and suffer complications you may well be able to transfer into the local NHS hospital private patient unit using your healthcare insurance.

Choosing the right hospital or clinic

The NHS offers a comprehensive range of treatments and care. The NHS is by its nature 'national' and works as a network to ensure access to specialists in more common and

rarer conditions. These rarer services will therefore not be provided in all NHS hospitals but in regional or national centres of excellence. These will include not only specialist doctors, but similarly specialist nursing and other staff skills, as well as a comprehensive range of infrastructure including equipment and round-the-clock back up.

To find out where the best facility might be to support your clinical needs ask your doctor and research the NHS. In many cases the leading specialist NHS hospitals provide private patient units which can accommodate a smooth referral and treatment supported by your insurance company.




Royal Berkshire NHS Foundation Trust offers a wide range of clinical and diagnostic services, as well as medical procedures to private patients.

Whether your procedure is simple or complex, our team is there to reassure you and your safety and wellbeing is our number one priority.

Our philosophy is to offer every patient a personal service and to always put your needs first.

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 E-mail: paying.patients@royalberkshire.nhs.uk
www.royalberkshire.nhs.uk





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Weighing up the options

With a variety of medical insurance options available it's important to consider all your options to ensure you choose the right policy to suit your needs

There are many different private medical insurance policies available, and the best one for you will depend on your personal circumstances, what you want covered and what you are prepared to spend.

At the most basic level, private medical insurance varies according to what is covered. Low cost medical insurance may only cover inpatient treatment and surgery, while a standard policy will cover consultant appointments and aftercare. Top of the range policies will cover every step plus extra luxury features. Some policies are highly specific, such as the BUPA Healthcare Select Heart & Cancer policy, which is a low cost way to cover the two health issues that are of the greatest concern to most people, but does not cover any other illnesses.

Modular and excess

Modular policies, such as those offered by PruHealth and Aviva, as well as BUPA by You, offer the greatest choice by providing a core of essential services, backed by optional modules that allow you to tailor your cover to your precise needs. With this kind of policy it is much easier to get exactly what you want, without paying for additional benefits that you don't want.

Another difference in policies is the level of excess. Some policies will automatically pay your claim in full, while others will have a compulsory excess of around £100. You can also opt for a greater level of excess to cut the cost of your premium. The excess may apply per treatment or per year and on group, joint or family policies the excess may be shared across all family members across the year.

Share the load

With a shared responsibility policy, you pay a set percentage, rather than a set amount as you would with a policy excess. Typically, you will pay 25% of all treatment costs, with your insurer paying the remaining 75%. This cuts the cost of your premium as the risk for the insurer is 25% lower. Most shared responsibility policies

have an upper limit on the total cost you are expected to pay in any one year or for any one condition. This means you will always know your maximum exposure and will not face open-ended medical bills.

No more waiting

Delayed treatment policies only kick in if the NHS cannot offer treatment within a set period of time after your diagnosis. You can choose the time delay that suits you, and the longer you are prepared to wait, the less you will pay for your premium. The average time delay is around six to eight weeks.

Fully underwritten and moratorium

Fully underwritten policies will take a comprehensive medical history, and will state clearly from the start what is and what is not covered. Generally with fully underwritten policies, pre-existing conditions will be permanently excluded.

By contrast, moratorium policies will usually place a blanket ban on any pre-existing condition dating back over

a certain amount of time, often five years, and will not provide treatment for these for a set period in the future. If there is no recurrence of these conditions in that period, you may find that your pre-existing condition is reset and becomes covered from that point on.

Strength in numbers

Family policies cover all members of your family, including children, under a single policy. Often these policies will have shared benefits and a single maximum claim limit per year, so they may not give everyone the same overall level of cover as individual policies, however they are much cheaper.

Group and company policies are a popular form of private medical insurance, as the group's buying power can significantly reduce the cost. As part of a group or company policy, you may still need to pay an excess, and you may still find that pre-existing conditions are excluded, but generally, these policies are more open and more inclusive than individual insurance.



What's covered?

Just as there are a number of different reasons why people choose to go private for their healthcare, so there are a variety of insurance policies out there too. But what do they cover and which one's best for you?

Private medical insurance is designed to cover you for short term, curable conditions with prompt treatment in a private clinic or hospital by the consultant or specialist of your choice.

The exact details of what is covered will vary considerably from policy to policy. Standard policies cover surgery, consultations, nursing and hospital care, while comprehensive policies cover much more, including outpatient appointments, access to the leading private hospitals, complementary medicine and recuperation breaks.

In general, private medical insurance is primarily aimed at acute conditions; that is illnesses or injuries that come on suddenly and can be treated quickly and in most cases cured. They are not designed for long term, or chronic conditions, which are far harder to cure and which may recur often throughout your life. For example, private medical insurance would help with top class treatment and physiotherapy following a broken leg, but will not cover long term medical problems such as diabetes, or fund ongoing regular treatments such as kidney dialysis.

Covering elective surgery

Private medical insurance is designed to cover elective surgery - non-urgent operations that you need but that can be planned, such as a hip or knee replacement, an angioplasty or a cataract operation. Emergencies, such as a heart attack, will always be treated in an A&E department of the nearest NHS hospital.

Most policies will cover male and female sterilisation (vasectomy and hysterectomy), and vasectomy reversal, although some will only allow hysterectomy if recommended by your doctor.

Covering your treatment

Once you have been referred by your GP, or by an NHS consultant, your private medical

insurance can cover everything from outpatient treatment and consultations, to surgery and a stay in hospital. It may also cover any drugs or medical appliances you need and any aftercare you require following your treatment. Most private medical insurance will cover you for any scans you need, such as MRI or CT scans but you always need to clarify this with your insurer.

Exactly what is covered will depend on your private medical insurance policy, and as a rule, you will get what you pay for. Budget policies may only cover your inpatient stay for the tests and treatment itself, whereas more expensive cover will include every step of your treatment pathway, from start to finish. Budget policies will also have lower financial limits on the amount of treatment they will fund in any one year.

Lower priced medical insurance policies will also restrict your choice to certain named hospitals, consultants and clinics, whereas more expensive policies will give you a much wider choice.

What isn't covered?

It is easy to assume that if you have private medical insurance, that you would be covered for pretty much anything. However, this is far from the truth, and it is crucial that you understand what is and what is not covered by your private medical insurance policy before you take out your cover, and before you agree to go ahead with any private treatment.

The main exclusion will be pre-existing conditions. That means that if you have displayed any symptoms of a disease before you start your policy, the cost of your treatment will not be covered. This applies to previously diagnosed conditions, where you have had treatment before on the NHS. It also applies if you have shown early signs of a condition before you took out your private medical insurance, even if it is not diagnosed at the time.

Most private medical insurance policies do not cover chronic conditions. They are

primarily designed to help with acute conditions that can be treated quickly and 'cured'. Chronic conditions, such as diabetes, HIV, high blood pressure and epilepsy, are generally not covered.

Some private medical insurance policies will only cover you for private treatment if you cannot get treatment on the NHS within a set time period. These provide the opportunity to cut the cost of your policy if you only claim for treatment not available on the NHS within six weeks.

Basic private medical insurance policies will only fund treatments that have been approved by the National Institute of Clinical Excellence (NICE) and are available within the NHS. The reason is cost - NICE tends to reject drugs that are very expensive for the benefits they provide. More comprehensive medical insurance policies will pay for non-NICE approved treatments as long as they are approved for use in Europe or the USA, but the premiums are higher.

Private medical insurance will only cover treatment that you actually need. It is not there to fund expensive MRI scans just to put your mind at rest that your headache is not a brain tumour. Unless your doctor thinks you need the test, your policy will not cover it.

In most cases, private hospitals do not have intensive care units or high dependency units so, if you need emergency treatment after a road accident, a heart attack or after developing a ruptured appendix, your surgery will usually take place within the NHS. However, if you are admitted to the NHS as an emergency case, for example with acute appendicitis, your policy may cover you for a private room or private ward in the hospital following your operation.

Private medical insurance will not cover anything that it doesn't precisely list and may not cover all private consultants, or all private hospitals and clinics. In many cases, only named hospitals or doctors will be covered by policies at the lower end of the price range.



Which policy is best for me and my family?

Before you can decide on the right policy, you need to answer some questions about your circumstances, your concerns, your preferences and your lifestyle.

Your financial position

How much of a contribution can you comfortably make towards the cost of private treatment? Agreeing to a £500 excess can bring down the cost of a typical premium for a 30 year old male from £30 to £21 per month on a basic policy.

What are your concerns about the NHS?

What is it about the NHS that worries you? Is it cleanliness, waiting lists, quality of treatment, availability of specialist drugs? Different policies will address these concerns in different ways, so make a list of your priorities before you start searching.

How critical is it that you aren't out of action?

If you are the sole breadwinner for your family then you will want a policy that gives you treatment as soon as possible to get you back on your feet or back to work. If you are single and your employer pays sick pay, you could cut the £30 policy above to £19 per month by agreeing to only claim if the NHS cannot offer treatment within a set time, normally around six weeks. Combine that with the £500 excess and the price drops to £13.75.

Your medical history

If you have a pre-existing condition that may

show no symptoms for years at a time, then you should consider a moratorium policy. With fully underwritten policies, pre-existing conditions may never be covered.

How healthy are you?

If you are generally in good health, live an active lifestyle, are a healthy weight and don't smoke, then you may feel that you do not need comprehensive cover. Many insurers offer basic policies that provide top quality treatment should the worst happen, while trusting your own good health, and the services of the NHS, to take care of everything else.

Invest in your health

Find out about an easy way to budget for some of your family's everyday healthcare needs.

Routine healthcare costs can creep up on us, whether it's prescription charges, going to the dentist or the optician – not to mention the occasional need for physiotherapy or osteopathy.

The good news is that Bupa Cash Plan 100 allows you to claim back a proportion of these expenses.

IT'S EASY TO SET UP AND USE

You can claim money back for health expenses up to the annual limits of your chosen level of cover. There are different payment levels to suit your needs and budget, which you set up by direct debit. Level 4 cover costs £18.42 a month*, covering you, your partner and children in your care. It's open to any UK resident aged from 16 to 65, there's no medical examination and you can claim for pre-existing conditions.

... AND IT'S EASY TO CLAIM

Simply visit your health practitioner (there's no need to get authorisation in advance) ask

for a receipt and submit it with a cash-back claim form. These are processed quickly – you'll typically get the money paid into your bank account within four days.

SO HOW DOES IT HELP?

RECOUP DENTAL COSTS

Whether it's routine check-ups with a scale and polish or your teens are clamouring for smile-perfecting white braces, this is a great way to help towards managing costs.

LOOK AFTER YOUR SIGHT

Visiting the optician at least every two years is an important part of safeguarding eyesight. As children rarely complain about vision problems, you'll need to make sure they get checked out, too. If an eye test reveals your child needs glasses, Bupa Cash

Plan 100 will help you stretch to those designer frames that might make all the difference to them.

TAKE CARE OF YOUR MUSCLES, BONES AND JOINTS

A new exercise regime can create problems if you've neglected your fitness, and sometimes even a simple action can put your back out or leave you limping. Whatever the mishap, Bupa Cash Plan 100 covers treatments such as physiotherapy, osteopathy, chiropractic and chiropody to help you get back on your feet.

* Price correct as at 4th July 2014, based on Bupa Cash Plan 100 Level 4 for two adults aged between 16-65 and children under the age of 18 based in the UK. There is a 13-week initial qualifying period from the start of your Bupa Cash Plan 100 membership for all benefits except the Bupa HealthLine.

HOW CAN I GET BUPA CASH PLAN 100?

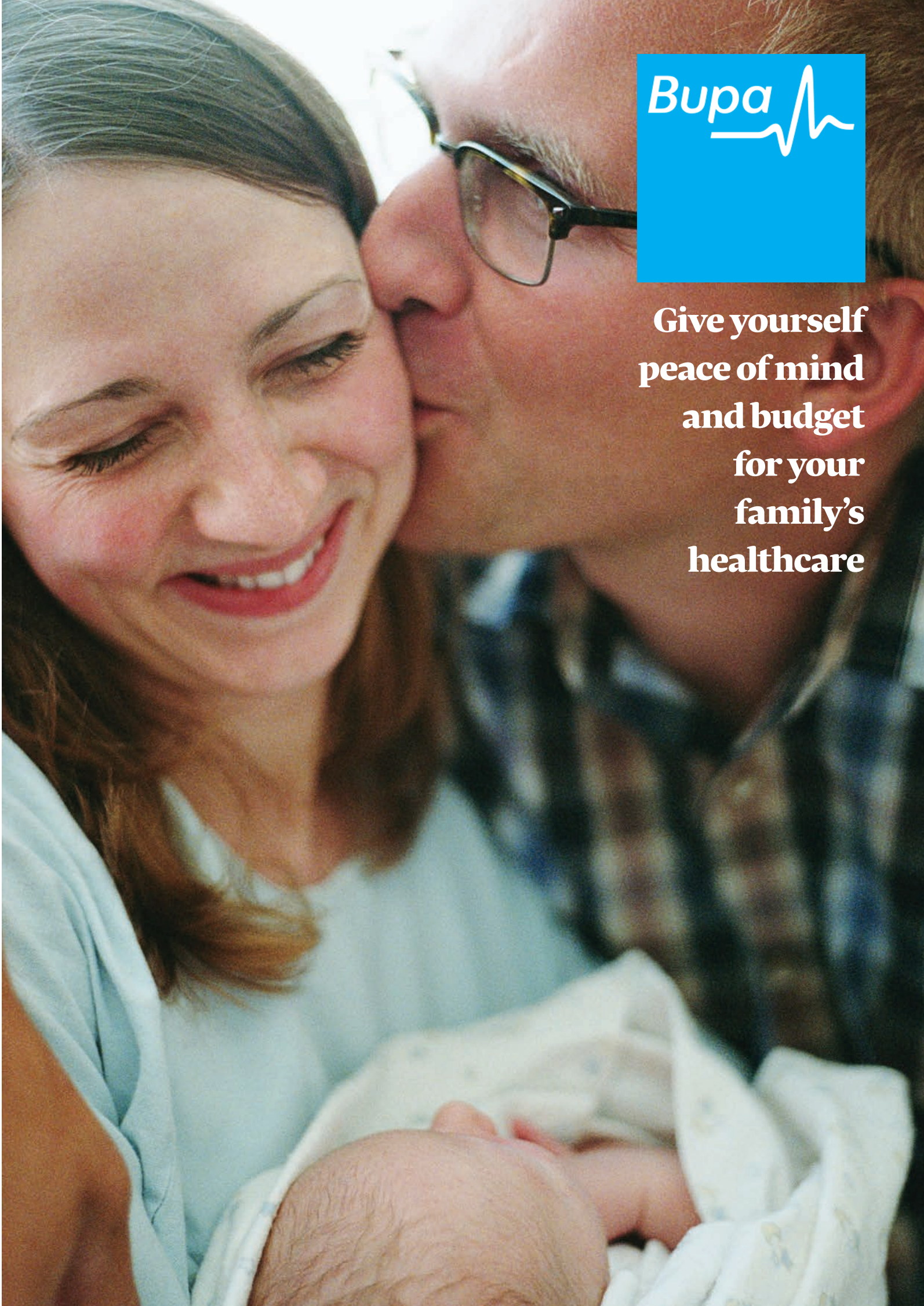
You'll find all the information you need at bupa.co.uk or call 0808 231 7274 to find out more about the benefits**.

**Calls may be recorded and/or monitored.






**Give yourself
peace of mind
and budget
for your
family's
healthcare**



Health Cash Plans – a guide

We all need some regular TLC in order to keep fit and healthy, and a Health Cash Plan can be a useful way of ensuring that you can meet the cost of routine appointments that can otherwise be expensive.



A big part of keeping healthy is having check-ups, paying for preventative care, and routine maintenance of your body. A Health Cash Plan is a low cost health plan that pays cash sums towards the cost of a wide range of treatments including dental and optical bills, physiotherapy charges and the wide range of alternative treatments and complementary medicines that are becoming popular.

If you go into hospital there are a host of expenses that are not met by the NHS or private medical expenses and a Health Cash Plan can help you meet these costs too.

Health Cash Plans are geared towards the day-to-day health expenses we all have to meet, with cash sums paid if you have to go into hospital, see a specialist, visit the dentist or optician, give birth or require alternative therapies such as homeopathy, acupuncture or physiotherapy.

Health Cash Plans encourage you

to seek and receive early medical investigation and treatment, with helplines and health screening increasingly common inclusions. Some now offer discounts at selected health clubs, while some offer more specialised benefits which may be tailored towards your particular needs, such as dealing with illness at home, aftercare and home help.

A low cost health plan may also include or offer other insurance such as critical illness insurance, funeral benefits, and accidental death benefits. Health cash plans were once just Hospital Cash Plans, but they have evolved so much into offering a wider variety of healthcare benefits that it is important to dovetail your health cash and private medical insurances.

It's important to remember that a Health Cash Plan is not private medical insurance, but it is designed to complement NHS or private treatment by paying for everyday health treatments. Some people choose cash plans, but wouldn't consider private medical insurance, while others have both.

With premiums collected monthly, usually by direct debit, a Health Cash Plan enables you to spread the cost of looking after your general wellbeing.

Advantages of a health cash plan

- No medical required before joining
- Can be used towards the cost of dental and optical treatment, plus many other categories
- Children are usually included free of charge where one or more of the parents are covered
- Premiums do not increase with age
- Unlike private medical insurance, the premiums you pay aren't based on your age or gender, although some providers have upper age limits for new joiners. This means that cash plans can be particularly valuable for older plan holders.

Celebrating 50 years in healthcare

Ramsay Health Care is celebrating its 50th year of people caring for people. Established in 1964, Ramsay Health Care is now a global hospital group operating over 150 hospitals and day surgery facilities across South East Asia, Australia, the United Kingdom, Indonesia and France.

In 2007, Ramsay Health Care became the fourth largest private hospital group in the UK, with a portfolio of over 30 hospitals and day surgery facilities providing a comprehensive range of clinical specialities to private self-paying and insured patients. The “Ramsay Way” culture is key to securing our reputation for delivering an excellent record in hospital management and patient care.

Treatments for private patients

Ramsay has extensive expertise and experience in providing a full range of surgical and non-surgical treatments, across more than 80 speciality areas. Treatment is led by expert consultants who are responsible for the patient’s care throughout their treatment.

Clinical Excellence

Leadership and excellence in delivering high quality clinical services comes as standard when you choose one of our hospitals. Ramsay is constantly auditing and reviewing clinical practice to ensure the very best clinical outcomes are achieved.

All staff are rigorously assessed prior to joining Ramsay and receive the very best experience and training. Many of our Consultants have existing NHS contracts and are only appointed after thorough



vetting by a group of their peers as well as hospital management. All Ramsay Health Care Hospitals are regularly audited by the Care Quality Commission.

Premium Care for private patients

Private patients, who either wish to pay for their treatment or use their private medical insurance, can benefit from Premium Care. Premium Care patients receive exclusive benefits, from great food and a relaxing en suite room, to priority access and flexible appointments. More information about Premium Care can be found by visiting our website at www.ramsayhealth.co.uk/premiumcare.

Affordable Private Healthcare

Ramsay’s Fixed Cost Care scheme is designed for people who wish to fund their

own private healthcare directly, without the use of an insurance policy. Fixed Cost Care offers a range of packages to cover treatment paths, from initial consultation through to the operation and aftercare, in one fixed price quote*. This gives patients peace of mind that everything needed is covered. Should a patients need to stay in hospital longer than initially thought and quoted for, we cover the cost, including any treatments and tests needed.

What to do next?

All self-paying and most privately insured patients can enjoy Premium Care at a Ramsay Health Care UK hospital. If you would like to know more about fixed cost care, simply locate your local Ramsay hospital at www.ramsayhealth.co.uk and contact us today to see how we can help you.

Key treatments include:

Orthopaedics	Weight Loss Surgery	Cosmetic Surgery	General Surgery	Eye Surgery
Hip Replacement Surgery	Gastric Band Surgery	Breast Enlargement	Varicose Vein Removal	Cataract Surgery
Knee Replacement Surgery	Gastric Bypass Surgery	Facelift	Hernia Repair	Laser Eye Surgery
Spinal Surgery	Gastric Balloon	Nose Surgery	Gall Bladder Removal	Macular Degeneration Treatment

*Initial outpatient consultation

Health planning

There is a huge variety of low cost health plan products to choose from and each provider has their own ideas of what to offer as a basic package and what options to provide. Here we explain the basics of how they work.

Increasingly, health cash plans include GP helplines, health screening, fitness and health advice, and even discounts at health clubs and gyms. What can be confusing to some is how insurers portray the different levels of pay-outs.

There are usually between three and eight benefit levels to choose from. The logic is simple - the more you pay per week or per month, the higher the level of benefit you get. The level of pay-out varies by company and by individual benefit. It is common to see these expressed as 50% or 75% or 100%.

Benefit limits

Some insurers now provide a two-year limit on certain benefits, so if you have the bad luck to have to pay for healthcare or go into hospital on several occasions in one year, but none the next year, on a 12 month limit you may hit the limit of pay-out a lot sooner than on a two-year basis.

Health cash insurers, on average, pay out 80 pence for every 100 pence they get in. Their aim is to get you to use, but not abuse, the benefits and help keep you healthy.

If an insurer offering varying percentages, different limits, a mixture of one and two year benefits and day limits on some sections confuses you, call and ask them to help you - that is what they are there for.

Children

Children are often included free of charge where one or more of the parents are covered, but an alternative is to take out a policy in a parent's name just to cover a child. Insurers may not be prepared to do this so it is much simpler to take out a policy for an adult. The premium is not based on age or health, so it is as cheap to take out a policy for an adult and get the children covered free, as it is to pay an adult premium just for one child.

In and out

Each plan has a maximum annual payout depending on how much you pay in a month. So if the limit for optical care was £75 a year, the insurer pays your first £75 of optical care claims, with you footing the bill for any further treatments yourself.

However, there is no limit to the number of

claims you can make per benefit. This means that you can claim as many times as you like before your payouts reach the annual limit. But when you reach this limit, you won't get any more money.

For some organisations, each benefit maximum is actually designed to be roughly the same as your annual membership payment, so even though you only get so much money back, using up any claims limit really just means that you've got your money's worth from your membership.

What does it cost?

You can actually get a lot of cover for very little money. Prices are not based upon how healthy (or not) you are, so you're not going to pay more if you've been ill in the past.

The basic benefit schemes for an individual range from just under £5 a month to just under £10 a month for basic cover, but for extra benefits and higher limits you can pay up to £78 a month. The golden rule is: the best way to choose the plan is to look for the maximum you can get for the benefit you're most likely to use.



Nuffield Health presents:

What to consider if you're thinking about cosmetic surgery



Cosmetic surgery is becoming increasingly popular in the UK and can be life changing. If you are thinking about having any cosmetic surgery, it is essential that you consider carefully what treatment you want and how you want to do it. Make sure you are undertaking surgery for yourself and you are doing it for the right reasons.

Preparation for surgery

If, after careful consideration you decide to proceed with cosmetic surgery, do your research and find the right consultant for the procedure you want. Your consultant will be able to advise you on the best procedure having understood all of your personal needs.

Finding the right consultant

It is essential that you find a well-qualified consultant who specialises in the procedure you are looking for. Your GP may be able to refer you to a known and trusted consultant in the area who does private work. It is worthwhile checking to see if the consultant is registered with the General Medical Council (<http://www.gmc-uk.org/register/search/index.asp>). If they are accredited as a specialist Plastic Surgeon in this country they should also be on the General Medical Council Specialist Plastic Surgery Register, and may be a member of British Association of Aesthetic Plastic Surgeons/ British Association of Plastic, Reconstructive and Aesthetic Surgeons.

The relationship you develop with your consultant is extremely important. Have an initial consultation, and if you like who you see then great, alternatively, see someone else.

The right procedure in the right place

It is important to have your surgery in a safe and properly-regulated hospital or clinic. Check

to see if they are registered with the Care Quality Commission (CQC, in England) or equivalent governing bodies in Wales and Scotland. Ideally, find a hospital near to your home. If you do experience any complications after surgery you should be able to see your consultant locally in a short time frame.

Cost

Having cosmetic surgery has financial implications and it is important to know what you are signing up to. Find out exactly what is included in the price you are paying. Always be aware of organisations that pressurise you into paying a non-refundable deposit for surgery.

At Nuffield Health we are proud of our Promise for patients paying for themselves, meaning that you will receive a clear and fixed price for your treatment with no hidden surprises, and promising that we will match any comparable price from a local provider in your area*.

Risks of surgery

All surgery carry risk. You should discuss these, along with the benefits of surgery with you before any procedure.

Aftercare

Post-operative care is imperative to ensure the best results. The recovery time and the amount of post-operative care largely depends on the type of cosmetic surgery performed. For instance, major cosmetic surgery procedures



such as a tummy tuck or breast reduction will require longer periods of recovery compared to smaller procedures such as a single area of liposuction. Fortunately, with the Nuffield Health Promise, whatever your treatment there are no time limits on your aftercare**.

And finally

In the right hands, cosmetic surgery can be a safe and extremely rewarding experience. Once you decide this is what you really want then it all comes down to finding the right consultant to do the right procedure at the right time and place for you!

* Not including private patient units at NHS hospitals. Local area defined as within 15 miles of the Nuffield Health hospital. We will match against written quotes only. Promise is valid for patients paying for themselves.

** Where possible, we promise to assist you to receive any follow up advice, treatment or care that is clinically required from your Consultant for as long as you may require it. If a prosthesis is used as part of your treatment this is guaranteed for the manufacturer's official lifetime of that prosthesis. "Clinically required" indicates where further intervention and/or monitoring of a patient's condition is deemed necessary as a direct result of surgical intervention.

the Harley Street option?

Harley Street is one of the most famous streets in London, enjoying a world-wide reputation as a centre of private medical excellence. There are some 1,500 medical practitioners in and around the Harley Street area, and an extensive choice of Harley Street specialists, clinics, and private hospitals providing services from cancer treatment to cosmetic surgery.

But Harley Street isn't just one street. The Harley Street Medical Area embraces roughly one square mile of London, where there is a concentration of medical expertise and healthcare facilities that is unparalleled anywhere in the world. Under the stewardship of the area's landlord, Howard de Walden Estate, investment has been made in cutting

edge healthcare technology and state of the art medical facilities. Harley Street represents the "best of British healthcare".

Although the media presents Harley Street as a destination for those seeking cosmetic surgery, the truth is very different. The Harley Street Medical Area is the private practice base for some of the leading names in surgery and medicine. Many Harley Street doctors and surgeons work in the NHS and are attached to London teaching hospitals such as University College Hospitals, St Bartholomew's Hospital, Guys and St Thomas' Hospitals, the Royal Free and Royal London Hospitals and Great Ormond Street Hospital. Several major private hospitals are situated in the area including The Harley Street Clinic, the Princess Grace Hospital, the Portland Hospital for Women and Children, The London Clinic and the Royal family's favourite; the King Edward VII Hospital, Sister

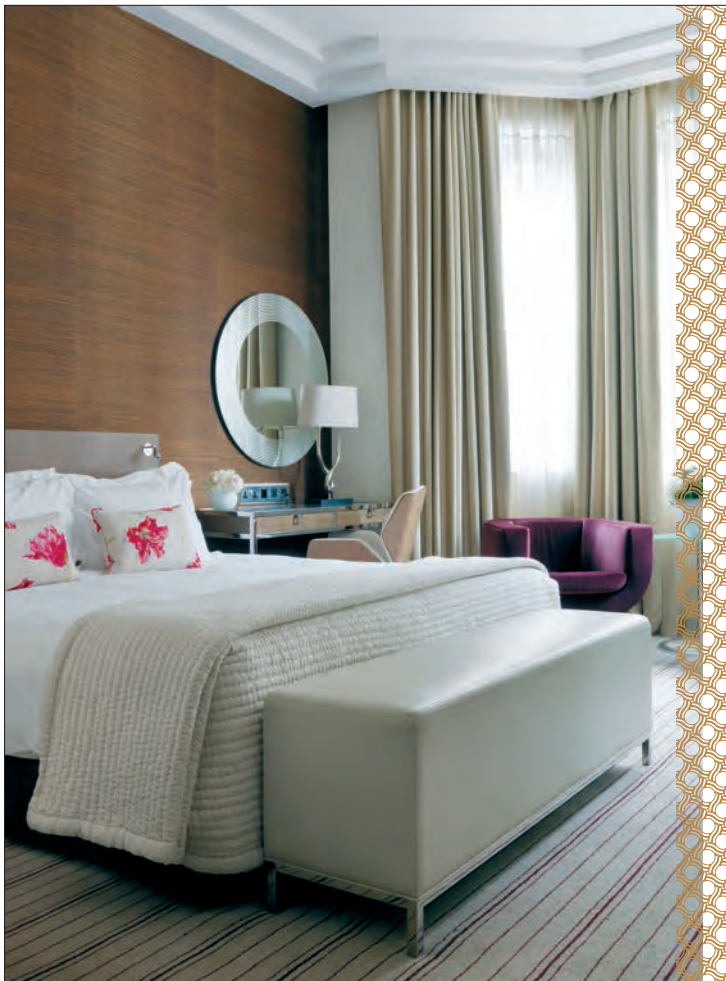
Agnes.

But can Harley Street offer an affordable option for patients seeking private treatment?

What does it cost to see a Harley Street specialist?

The cost of an initial consultation with one of Harley Street's leading specialists varies but it's likely to be comparable with the price you pay at your local "out of London" private hospital. A consultation with Dr Rina Agrawal, Consultant in Reproductive Medicine, costs £200, with Mr Sanjay Agrawal, a Consultant Surgeon specialising in weight loss surgery, it's £195, with Amit Amin, a Consultant Orthopaedic Surgeon, it's £225 and with Tom Bourne, a Consultant Gynaecologist, it's £190.

At The London General Practice, a registered patient can see a private GP for £175 or undergo a full health screening for £600. A General Health Check Up at 58 Harley Street will cost



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£285. The RoC Private Clinic at 127 Harley Street provides telephone consultations from £50.

If you're looking to book an affordable MRI scan, prices start at just £200 at the London Imaging Centre at 11-12 Wimpole Street.

Five specialist centres that may be of interest

One of the strengths of Harley Street is the concentration of medical and surgical expertise that is available through specialist clinics or centres. These centres bring leading consultants together under one roof to provide in depth knowledge and a range of treatment options.

The Harley Street ENT Clinic -

www.harleystreetent.com

The Harley Street ENT Clinic offers rapid access to state-of-the-art diagnostic investigations and specialist care for a wide range of conditions, from a simple ear infection to complex surgical cases. In-house services include a dedicated hearing aids service, and a dispensing pharmacy. Same day appointments are available for urgent or painful cases.

108 Medical Chambers -

www.108harleystreet.co.uk

108 Harley Street provides access to several multi-disciplinary teams working in private



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discover the best in healthcare

practice - The London Skin Clinic, The Gilmore Groin & Hernia Clinic, The London Rectal Clinic and The London Thyroid Clinic. Onsite mammography, ultrasound and x-ray is provided by 108 X-Ray and Imaging. A day case theatre permits same day consultation and procedure where appropriate.

London Womens Clinic -

www.londonwomensclinic.com

The London Women's Clinic at 113-115 Harley Street is rated in the top three UK infertility clinics for women of 35 and below. A comprehensive range of infertility treatments and services is available such as: in-vitro fertilisation (IVF), intracytoplasmic sperm injection (ICSI), intra-uterine insemination (IUI), egg donation, blastocyst embryo transfer, egg-sharing and sperm donation.

The London Eye Hospital -

www.londoneyehospital.com

The London Eye Hospital at 4 Harley Street is one of the world's leading premium lens

implants centres for cataract surgery or presbyopia correction to give freedom from glasses or contact lenses. Four of London's leading eye specialists can be seen at the centre. All consultants either hold, or have held, a permanent NHS post ensuring an exceptional depth of skill and knowledge reflecting the range and volume of patients and conditions the specialists have treated.

Harley Street Cancer Concierge -

www.harleystreetcancerconcierge.com

Endorsed by London's top cancer centres, but operating totally independently and impartially, Harley Street Cancer Concierge (HSCC) provides experienced guidance and support for people seeking diagnosis and treatment for cancer. Using their extensive knowledge and relationships with world-renowned cancer specialists and clinics, HSCC helps clients 'navigate' through the choices available, rapidly sourcing accurate diagnosis and expert treatment when time is of the essence.



The amazing thing is that the overgrowth and the tumour that you removed have not grown back, you saved his life, God bless you.

**Mrs LD,
Hertfordshire**

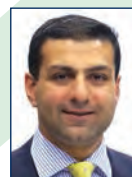
I need to thank you, most sincerely, for your interest and work on my stomach problem. The extent and accuracy that you can achieve truly amaze me.

**Mr PJ,
Kent**

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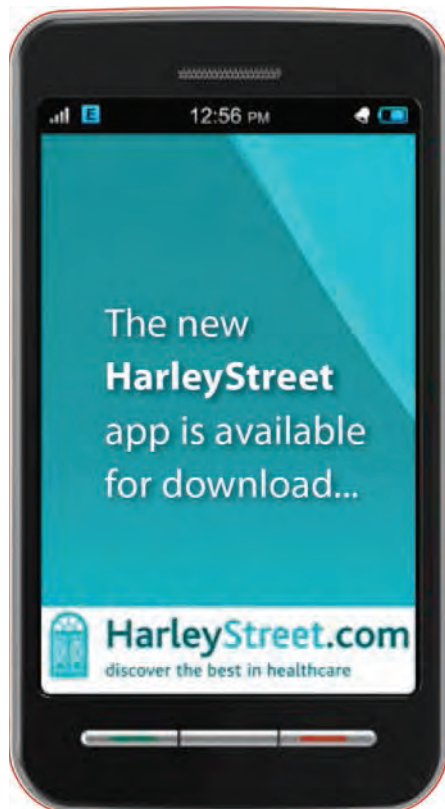
Welcome to W1

– the London postcode for private medical healthcare

With a wealth of medical expertise to choose from in just one area of London, making an informed choice about which practitioner, doctor, surgery or clinic is right for you and your needs can feel like a challenge. Researching the market and all the options available is paramount when it comes to your healthcare, to ensure you get access to the most suitable medical advice and treatments.

Helping patients from the UK and abroad make the right choice when considering engaging the services of a Harley Street doctor or specialist, The Harley Street Guide is a one-stop information portal for this centre of London's medical expertise.

The Harley Street Guide is a simple-to-use online database of private consultants and hospitals and clinics, where you can check a doctor's registration and qualifications and find details of hospitals and clinics offering a wide range of medical



treatments, covering cosmetic surgery and dentistry through to infertility and obesity surgery and everything in between.

Complete with local information including nearby parking and hotels, a guide to typical costs for treatments and a checklist of questions to ask your doctor when you first meet, The Harley Street Guide is an essential reference tool for anyone considering private medical treatment.

When you're ready to make an enquiry or book an appointment, HarleyStreet.com is the place to go to search and compare specialists and book or enquire. Searchable

by doctor, hospital or clinic, the website features full and comparable profiles on the services offered by Harley Street professionals.

Patients can also search, compare and book the services of hospitals, clinics and healthcare professionals on their mobile, by downloading the HarleyStreet app. Connecting patients with London's private healthcare expertise while on the go, the app brings Harley Street into the mobile age.

Make a connection with the centre of private medical excellence today by visiting www.HarleyStreetGuide.co.uk and www.HarleyStreet.com

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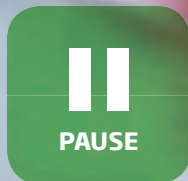
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