

Insured and Self Pay Patient Payments Agreement Version 1.

Introduction:

Being seen as private patient carries some advantages over standard NHS care. It allows for consultant led care with the flexibility for you to be seen rapidly, at a time which suits you, by a consultant of your choice, in pleasant surroundings and with more time available for your consultation.

Providing such quality care carries various costs. These include not only consultant time, ancillary staff time (such as cardiac physiologists, laboratory and administrative staff) but also medical equipment use, room hire and fees such as indemnity insurance, consumables costs etc.

As a private patient, the responsibility for paying for treatments costs ultimately lies with you. Some patients (without private health insurance) will settle fees directly. Such patients are called 'Self Payers'. Other patients have private healthcare insurance which will settle some or all of the costs of care (known as 'insured patients'). In either case, the patient receiving care remains ultimately responsible for meeting the costs of care. If your health insurance companies will not meet the full invoiced amount, you the insured patient, remain liable for any shortfall.

Commonly consultant fees are billed separately from hospital fees (which include room equipment and ancillary staff costs). However, in order to streamline and simplify the process for my patients, I have an agreement with North Tees and Hartlepool NHS Trust such that my invoice to you will include all costs, (consultant, administrative, secretarial, technical and hospital fees included). I will, in turn, be invoiced by Staff and the Trust for their respective fees. In this way, I am able to present you with a single, unified bill for all services (I call this 'unified billing').

I would like to be transparent about the potential costs involved in care, to help you come to an informed decision in how to proceed. I will always provide a breakdown of the costs of care in advance of your appointment. The table below provides a scheme of costs associated with different care items.

Standard Schedule of Fees:

Test / Procedure / Treatment	Total Fee
Initial Consultation	*
Follow-up Consultation	*
ECG	*
Transthoracic Echocardiogram	*
Exercise Tolerance Test	*
Ambulatory ECG (up to 48hrs)	*
24 Hour blood pressure monitor	*

Estimating your bill:

When your appointment is arranged, my secretary or I will inform you of the anticipated tests and treatments required at your appointment and the total amount which you will owe. The total amount owed will not exceed this amount without your prior agreement.

Settling your account:

i) 'Self Pay' patients:

Payment Terms are payment before or at the clinic appointment. Presently accepted means of payment are:

- a) Cash
- b) Cheque
- c) Debit Card payment
- d) Bank Transfer prior to appointment (Bank details provided on request)

ii) 'Insured' Patients:

It is your responsibility to check with your insurer (before your appointment) whether the costs of your appointment and associated tests will be covered by your policy. In many instances you will need to obtain a 'Pre-Authorisation Number' from your insurer before the appointment. Frequently insurers will not cover the costs of an appointment without a Pre-Authorisation number. If your insurer requires you to have a Pre-authorisation number, you must provide this to my secretary before your appointment. Without a Pre-authorisation number, you will need to pay 'self pay' fees on the day of the appointment and seek reimbursement of these fees from your insurer after the appointment.

Please note, you are liable for any shortfall between invoiced fees and what your insurer will pay (irrespective of any previous agreement you may have with your insurer).

Most insured patients will have no payment to make on the day of the appointment but will need to provide details of their insurer and any required Pre-authorisation number in order that the insurer can be invoiced.