THE HOSPITAL GENTRE

KING EDWARD'S HOSPITAL FUND FOR LONDON

OUTLINE OF A PROPOSED PROVIDENT SCHEME FOR LONDON

SEPTEMBER 1940

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OUTLINE OF A PROPOSED PROVIDENT SCHEME FOR LONDON

- 1. The King's Fund was asked by the Voluntary Hospitals Committee for London to consider the need for further provision for the middle classes for insurance against hospital expenses and the associated specialist fees.
- 2. A Committee was accordingly appointed by the Fund, with Sir Bernard Docker as Chairman, and including the Honorary Secretaries of the King's Fund and representatives of the British Medical Association.
- 3. The Committee recommend the establishment of a scheme upon the lines attached.
- 4. The Committee have been actuated by the desire to formulate a scheme which, while meeting the needs of the middle classes for a simple scheme of insurance at a subscription which they can afford, would be acceptable both to the hospitals and to the profession. The Committee believe that there is a widespread demand for a scheme that will, for a moderate weekly contribution, remove the fear of hospital and medical fees of an unknown amount. They have endeavoured as far as possible to keep the scheme simple and to give the maximum amount of complete cover.
- 5. The present scheme is designed to afford cover to subscribers within the income limits proposed for a period of up to four weeks of treatment in hospital, and will be based on agreement by the hospitals and the Consultants and Specialists to accept the rates of payment and fees suggested in discharge of their obligations.
- 6. It is further proposed that it should be open to persons above the income limits to join the scheme on a grant-in-aid basis; that is to say, the benefits scheduled would be payable towards the cost, whatever charges and fees might be privately arranged in the usual way.
- 7. The income limits and professional fees have been agreed with the British Medical Association.
- 8. Each participating hospital will be required to undertake that the schedules of hospital charges, specialist and surgical fees, shall be applicable to all persons entitled to the benefits provided by the Scheme, subject to the proviso that if the hospital is temporarily unable to provide accommodation at the rate paid by the

Scheme it shall be open to the patient to elect to go into a more expensive ward and himself pay the difference.

- 9. Payments to consultants and specialists for their services will be made direct to them by the Scheme, and the agreed schedule will not be disclosed to the subscriber or to the public.
- 10. Where the treatment is undertaken by an approved consultant or specialist the benefits set out in the schedule of payments will be payable. Steps will be taken to establish a comprehensive list of consultants and specialists. No payment will be made by the Scheme in respect of consultations preliminary to treatment in hospital. In any case where a second opinion is sought a payment will be made according to the schedule.
- 11. Where treatment is undertaken by a medical practitioner not on the approved list, payments up to £4 11s. 0d. per week will be made in respect of hospital maintenance.
- 12. The Committee recognise that, having regard to the accommodation actually available in the hospitals, it may not be practicable to offer precisely similar pay-bed accommodation at all hospitals. Broadly speaking, while £5 12s. Od. a week would be sufficient to cover the cost of a private room at suburban hospitals, at the larger hospitals it will be necessary to envisage the provision of accommodation intermediate between the ordinary wards and the private rooms. In some cases "contributory" ward accommodation might be appropriate, in others not.
- 13. As it is likely that in the first instance the number of beds required in any hospital will be limited, the Committee suggest that the hospitals need not be unduly concerned in regard to the provision of bed accommodation.

The scheme includes a six-monthly waiting period before new members are entitled to benefit, and the Committee will arrange to confer with the hospitals associated with the scheme in regard to the provision of additional pay-bed accommodation, should this appear to be necessary.

14. The Committee believe that the Scheme as a whole will, if accepted, go far to meet the needs of the middle classes, and wish to place on record their appreciation of the help that they have received from all concerned.

10, OLD JEWRY,

E.C.2.

PROVISIONAL OUTLINE OF PROPOSED SCHEME

INCOME LIMITS												
Single Subscribers							• •		£400 per	annum		
Married Subscribers			• •						£550 per	annum		
Married Subscribers	(with dep	endar	its unde	er 18)	••	• •	• •	•••	£700 per	annum		
RATES OF SUBSCRIPTION												
Single Subscribers	• •	• •	• •	• •	• •	• •	• •		12:0 per (13/- per -			
Married Couples	••			••	• •	••	••	£3:	12:0 per (18/- per	annum		
Married Couples (with	th depen	dants	under 1	.8)		• •	••		4:0 per 1:0 per			

BENEFITS OFFERED TO THE SUBSCRIBER

The subscription will cover the whole cost of maintenance and medical and surgical treatment given by a consultant or specialist on an approved list in a participating hospital for each subscriber and each dependant included in his membership up to four weeks in any one year, in accordance with the annexed schedule of benefits; with grants-in-aid in respect of additional specialist services.

The scheme will also provide a modified grant-in-aid in respect of maintenance and treatment in a Nursing Home given by a consultant or specialist on an approved list.

SCHEDULE OF PAYMENTS TO PARTICIPATING HOSPITALS AND TO MEDICAL STAFFS.

(a) To Participating Hospitals

Up to £5: 12:0 a week.

This payment to cover all usual hospital charges, including use of x-rays, pathological services, use of operating theatre, etc.

- (b) To Approved Consultants and Specialists
- (1) Surgical Operations

£26: 5:0 in respect of major operations.

£13:13:0 in respect of intermediate operations.

£5: 5:0 in respect of minor operations.

Anaesthetist Services :--

For major and intermediate operations—£3:3:0.

For minor operations—£1:1:0.

Surgical fees will be payable for all surgical operations undertaken whilst the patient is maintained in hospital by the Scheme.



The classification of surgical operations will be in accordance with a schedule of surgical fees prepared in consultation with representatives of the profession. The contributions in respect of surgical operations will cover fees payable to assistant surgeons, and charges in respect of surgeons' visits subsequent to the operation.

(2) Medical Treatment

Up to £5:5:0 a week.

To consultants and specialists in the case of non-operative treatment or investigation:—£2:12:6 in respect of treatment covering the first two days, £3:3:0 in respect of the first three days' treatment, £5:5:0 for periods exceeding three days but not exceeding one week, and thereafter at the rate of 15/- per day whilst the patient is maintained in the hospital by the Scheme.

Where a second opinion is required whilst the patient is maintained in the hospital by the Scheme, a payment of £2:2:0 will be made.

(3) Additional Specialist Services

- (i) Radiologist Diagnostic Services
 - Fees for Radiological services to be in accordance with a schedule prepared by the B.M.A. Radiologists' Group Committee.
- (ii) Pathological and Bacteriological Investigations

 Fees for Pathological services to be in accordance with a schedule prepared by the B.M.A. Pathologists' Group Committee.

The grants-in-aid made by the Scheme for (i) radiological services and (ii) pathological and bacteriological investigations on material brought to the laboratory are limited in each instance to £3:3:0 in any one year in respect of either service rendered to each subscriber and each dependant included in his membership, and will be made only in connection with services or investigations undertaken whilst the patient is maintained in hospital by the Scheme.

The subscriber will be liable for the payment of any further fees chargeable for radiological services or pathological or bacteriological investigations.

The foregoing grants in aid represent *net* payments to the Specialist undertaking the service. Hospital charges in respect of these services are included in the contribution for maintenance (£5:12:0 per week). (See (a) of Schedule.)

(4) Other Treatment or Services

Discretionary payments up to £12:12:0 in any one year may be made by the Scheme towards the cost of treatment or service (including deep therapy) in the case of a member or dependant who receives a course of treatment given by a Physician, Bacteriologist or other Specialist, being a duly qualified Medical Practitioner, not included in any of the before-mentioned benefits.



SPECIAL SCHEDULE FOR HOSPITALS NOT HAVING AN R.M.O. IN ATTENDANCE ON THE PAY-BEDS

(i) To Participating Hospitals

Up to £4:11:0 per week.

This payment to cover all usual hospital charges, including use of x-rays, pathological services, use of operating theatre, etc.

(ii) To Approved Consultants and Specialists

£25:0:0 in respect of major operations.

£13:0:0 in respect of intermediate operations.

£5:5:0 in respect of minor operations.

Anaesthetists will receive normal payment.

(iii) Medical Treatment

Up to £4:14:6 per week.

To Consultants and Specialists in the case of non-operative treatment or investigation: £2:2:0 in respect of treatment covering the first two days, £2:12:6 in respect of the first three days' treatment, £4:14:6 for periods exceeding three days but not exceeding one week, and thereafter at the rate of 13/6 per day whilst the patient is maintained in the hospital by the Scheme.

(iv) Patient's own Doctor, if performing duties of R.M.O.

Surgical cases: £2:2:0 for the first week and £1:1:0 per week thereafter. Maximum for major cases £4:4:0 and for intermediate cases £3:3:0. No payment will be made in respect of minor cases.

Medical cases: £1:1:0 per week for a maximum of 3 weeks.

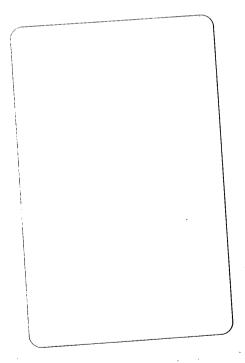
(v) Other Benefits to be as in the full Schedule.

EXCLUSION OF LIABILITY

There will be certain exclusions of liability from the Scheme, e.g., mental diseases, maternity treatment, pulmonary tuberculosis, tonsils and adenoids (below 18 years of age), contagious or notifiable infectious diseases, accidents where compensation is payable under an insurance policy, or war injuries.

CONDITIONS ATTACHING TO THE SCHEME

- (a) That there will be a "waiting period" of six months in the initial year of membership.
- (b) That no liability is accepted otherwise than in respect of in-patient treatment or service undertaken in Hospitals or Nursing Homes.
- (c) That no liability be accepted in respect of treatment or services undertaken otherwise than on the recommendation of a Subscriber's medical attendant, provided that this regulation may be waived in cases of emergency treatment or service.
- (d) That an age limit of 60 years be incuded as a condition of first acceptance of membership.



R.S.