

Health-on-line Watches the Response of Health Insurance Providers to Cancer Drug Top-up Announcement

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November 7, 2008 (FPRC) -- With the announcement from the government this week that patients will be able to top up payments for cancer treatment and drugs themselves, Health-on-Line questions how health insurance providers will respond to the new challenges this poses.

Mike Dalby, director of online private medical insurance provider, Health-on-Line, will be watching the response of private medical insurance providers to the latest news with interest. Dalby said "The latest developments are obviously good news for patients who are unable to get the cancer treatment they need on the NHS and want to supplement what they are getting through private funding."

Patients have two options when it comes to funding the NHS shortfall; they can pay for the treatment and drugs themselves or turn to existing private health insurance for support. Dalby said "Funding of any treatment, let alone cancer treatment can run into many thousands of pounds and if funded personally by the patient it will not always be affordable. This is where private medical insurance can play a pivotal role."

Many private health insurance providers offer policies which include an element of cancer cover however, the real challenge is to design a specific product for individuals who only want cover for topping up cancer treatment that the NHS won't or can't fund.

Dalby concludes "These are fascinating times for private medical insurance providers. As an industry, the gauntlet to review the design of our products in line with this announcement has well and truly been thrown down. At Health-on-Line, we will be looking at how we can support individuals concerned about cancer treatment through innovative product design which answers their needs. In many cases it will be back to the drawing board in terms of product design and pricing. Undoubtedly, this is the kind of challenge which providers need to respond to quickly and with a great deal of care".

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Keywords

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