

## Cover overview 2018

### Avéro Achmea basic health insurance Zorg Plan Restitutie

This overview of reimbursements is intended to easily see what types of reimbursements are included in a particular policy. The overview gives a general description of the care to which you are entitled. No rights can be derived from this overview. The policy conditions may contain further terms and conditions relating to coverage. Also, a limitation of the reimbursement may apply, such as when you make use of a non-contracted care provider.

If you have Zorg Plan Restitutie insurance, costs are reimbursed up to a maximum of the prevailing market rate in the Netherlands.

For a complete overview, we recommend that you consult your policy conditions. These will always take precedence. Have a question? Feel free to call us on 010 448 82 00 (from the Netherlands) or 3100 10 448 82 00 (from outside of the Netherlands). We will be happy to help you.

Description	Basic insurance
<b>Bones, muscles and joints</b>	
Occupational therapy	yes, 10 hours
Pedicure care (for diabetic, medical or rheumatoid foot conditions)	yes, see 'Foot care for insured persons with diabetes'
Foot care for insured persons with diabetes	yes, limited
<b>Abroad</b>	
Non-urgent medical treatment abroad	yes, up to the tariff charged in the Netherlands
Urgent medical treatment abroad	yes, up to the tariff charged in the Netherlands
<b>Physiotherapy and Cesar or Mensendieck remedial therapy</b>	
Pelvic physiotherapy to treat urinary incontinence *	yes, treatments 1 to 9
Physiotherapy to treat osteoarthritis of the hip or knee joint for insured persons aged 18 or older*	12 treatments per 12 months
Physiotherapy to treat leg pain caused by stage II intermittent claudication (restricted blood supply to the legs) for insured persons aged 18 or older*	37 treatments per 12 months
Physiotherapy and Cesar or Mensendieck remedial therapy up to the age of 18: disorder on the list approved by the Minister of Health, Welfare and Sport (VWS), 'Annex 1 relating to article 2.6 of the Health Insurance Decree'	all treatments
Physiotherapy and Cesar or Mensendieck remedial therapy up to the age of 18: disorder not on the list approved by the Minister of Health, Welfare and Sport (VWS); Annex 1 relating to article 2.6 of the Health Insurance Decree'	treatments 1 to 18 per diagnosis
Physiotherapy and Cesar or Mensendieck remedial therapy 18 or older: 1 disorder* on the list approved by the Minister of Health, Welfare and Sport (VWS) 'Annex 1 relating to article 2.6 of the Health Insurance Decree'	21st treatment onwards (you pay for treatments 1 to 20)
* This reimbursement only applies for 1 disorder. What if you need physiotherapy or Cesar or Mensendieck remedial therapy for several disorders? Then please contact us.	
<b>Medical devices</b>	
Medical devices reimbursed by your basic insurance	yes, see the Medical Devices Regulations (Reglement Hulpmiddelen)
Personal alert system required for medical reasons	yes, personal alert system
Wig	€ 431.00 per wig

Description	Basic insurance
<b>Medicines and dietary preparations</b>	
Contraceptives up to 21	yes, statutory personal contribution still applies
Contraceptives 21 or older	yes, only in the case of endometriosis or menorrhagia, statutory personal contribution still applies
Medicines reimbursed by your basic insurance	yes, see the Pharmaceutical Care Regulations (Reglement Farmaceutische Zorg)
<b>Oral health care and dentistry</b>	
Have you also taken out supplementary dental insurance? Then also check further on in this Guide to Reimbursements to see what, if any, reimbursement is provided by your supplementary dental insurance.	
(Deferred) front tooth replacement with implants from 18 to 23	yes
Implants for a full set of removable dentures	yes, in the case of a serious developmental or growth disorder or an acquired deformity of the teeth, jaw or mouth
Dental surgery 18 or older	yes
Full set of removable (implant-retained) dentures (false teeth)	yes, statutory personal contribution still applies
Repair or refitting of a full set of removable dentures (false teeth)	yes, statutory personal contribution still applies
Dental or orthodontic care in exceptional cases	yes
Dental care for insured persons with a handicap	yes
Dental care up to 18 years	yes
<b>Eyes and ears</b>	
Audiology centre	yes
Upper eyelid correction (required for medical reasons)	yes
Hearing aid	yes, statutory personal contribution (25%) still applies
Sensory impairment care	yes
<b>Mental health care</b>	
General Basic GGZ 18 or older	yes, for mild to moderate non-complex mental health problems or stable problems
Non-clinical specialist GGZ 18 years or older	yes, for complex mental disorders
Stay in a hospital or GGZ institution for psychiatric treatment 18 or older	yes
<b>Speech and reading</b>	
Speech therapy	yes
Stutter therapy provided by a speech therapist	yes
<b>Transport</b>	
Ambulance	yes
(Seated patient) transport for insured persons who are: <ul style="list-style-type: none"> <li>undergoing kidney dialysis;</li> <li>undergoing oncology (radiation and/or chemotherapy) treatment;</li> <li>visually impaired and unable to travel unescorted;</li> <li>wheelchair dependent;</li> <li>under the age of 18 and entitled to nursing and care for complex somatic problems or a physical handicap, because they require permanent supervision or need care available in the vicinity 24 hours a day</li> </ul>	own transport (€ 0.30 per km), (2nd class) public transport, (multi-person) taxi transport, statutory personal contribution (€ 101.00) still applies
<b>Hospital, treatment and nursing</b>	
The Asthma Centre in Davos	yes
Male circumcision (for medical reasons)	yes
Primary care stay (with a medical indication)	yes
Genetic research and advice	yes
Mechanical respiration	yes
Specialist medical care	yes

Description	Basic insurance
<b>Hospital, treatment and nursing</b>	
Plastic surgery (for medical reasons)	yes, limited
Rehabilitation	yes
Second opinion (for care covered by your basic insurance)	yes
Home dialysis	yes
Transplantation of organs and tissues	yes
Nursing and care in your own surroundings (extramural)	yes
Independent treatment centre	yes
Hospital treatment, examinations, tests, surgery and stay	yes
Hospital care for the organ or tissue donor	3 months, or 6 months following a liver transplant
<b>Pregnancy/baby/child</b>	
Delivery with medical indication	yes, at a clinic or outpatient facility
Delivery without medical indication at a hospital outpatient facility or birth centre	€ 211.00 for use of the delivery room (remaining amount = statutory personal contribution)
Home birth without medical indication	yes
In vitro fertilisation (IVF) up to 43	yes, first 3 attempts per potential pregnancy
Maternity care in a birth or maternity centre	4 bed days, statutory personal contribution (€ 4.30 per hour) still applies
Maternity care at home	yes, statutory personal contribution (€ 4.30 per hour) still applies
Maternity care at a hospital with a medical indication	yes
Maternity care at a hospital without a medical indication	yes, statutory personal contribution (€ 34.00 per day (of stay) still applies + anything over € 245.00 per day charged by the hospital
Maternity care (assistance during childbirth)	yes
Oncological examination of children	yes, if provided by Stichting Kinderoncologie Nederland (SKION) (Dutch Child Oncology Group)
Prenatal screening	yes
Sperm cryopreservation	yes
Obstetric or midwifery care	yes
Freezing of human oocytes and embryos (cryopreservation)	yes
Fertility-enhancing treatments	yes
<b>Other medical care</b>	
Dietetic therapy by a dietitian (with a medical indication)	yes, 3 hours
General practitioner care	yes
Integrated care for diabetes mellitus type 2 (18 or older), COPD, asthma and/or vascular risk management (VRM)	yes
Laboratory tests and X-rays	yes
Stop smoking programme	yes, 1x
Thrombosis service	yes