

Cover Overview 2023 Supplementary insurance BGZC-Jongeren

This reimbursement overview is intended to easily compare the various insurance policies. The overview provides a general description of the healthcare to which you are entitled. You can not claim any rights to this. Specific conditions for reimbursement may be included in the policy conditions. A restriction on the reimbursement may also apply, for example if you use a non-contracted care provider. Look in our Care Finder if you want to know if your care provider has a contract.

For a complete overview, we recommend that you read your policy conditions carefully. These are always final. Do you have any questions? Please call us at 0115 – 618344. We are happy to help you.

Type of care	BGZC-Jongeren
Alternative treatment	
Alternative treatment, therapies and medicines (anthroposophic and homeopathic)	€ 30 per day up to € 200 including medicines
Bones, muscles and joints	
Podiatry/podology/podopostural therapy and/or arch supports	€ 70 per year for foot treatment and € 60 for arch supports
Abroad	
Urgent medical treatment abroad	100%
Vaccinations for foreign travel	€100 per year
Transport of insured person and transport of mortal remains to the Netherlands (repatriation)	100%
Physiotherapy and Cesar/Mensendieck remedial therapy	
Physio- and remedial therapy aged 18 years and older	12 treatments
Medications (medicines)	
Contraception 21 years and older	€ 200 per year
Mouth and teeth (oral care)	
Dental care aged 18 and older	100% for check-ups, 75% for other treatments total reimbursement is a maximum of € 450 per person per calender year.
Orthodontics	€ 350 for the entire duration of the additional insurance
Eyes and ears	
Spectacles and/or contact lenses	€ 100 per 2 years

Grensregio Clausule

Does your policy state that you are also insured for the 'Grensregio Clausule' (Border Region Clause)? Then you will receive an additional reimbursement for non-emergency care in Belgium and Germany from this package.

Non-emergency care in Belgium and Germany:

- a. for care provided in Belgium or Germany within a radius of 55 km from the Dutch border, you are entitled to a reimbursement up to 100% of the costs of medically necessary care and dental assistance due to an illness, an accident, or a medical condition.
- b. for care provided in the remaining part of Belgium or Germany, you are entitled to a reimbursement of up to 100% (in addition to the reimbursement through your basic health insurance) of the maximum rate set at the time of treatment under the Healthcare Market Regulation Act (Wmg) if the care provided would have been covered in the Netherlands. If and insofar no (maximum) Wmg rates have been set, you are entitled to reimbursement of the costs up to a maximum of 100% of the prevailing market rate in the Netherlands in addition to the reimbursement through your basic health insurance (up to 200% combined).

Conditions for reimbursement

- 1. We only reimburse the costs if we would also reimburse these in the Netherlands from the basic health insurance and if the claim amount exceeds the reimbursement from the basic health insurance.
- 2. The treatment must take place with recognized (or equivalent) care providers.

Are you entitled to non-emergency care abroad under the basic health insurance? Then the reimbursement applies as a supplement to the basic health insurance.

Are you being admitted to a hospital? Then the reimbursement is limited to a reimbursement of the costs of a maximum of 365 days per case of illness. By illness we mean: any uninterrupted need for medical treatment, which results from the same cause of illness or the same accident.