

OVERVIEW OF REIMBURSEMENTS

There is no annual maximum amount for Hospitalia Plus.

Covered costs:

- Costs of an overnight stay in a single room: up to € 125 per day of hospitalisation for room supplements, and up to 300% of the statutory tariff for the fee supplements.
- One-day hospitalisation: up to € 80 for room supplements and fee supplements limited to maximum 1 x (=100%) of the statutory tariff. No limitation in a twin-bedded room.
- Staying in child's room: total reimbursement.
- Pre- and aftercare: the costs of care in the 30 days before, and 90 days after hospitalisation, (doctor's consultations, BVAC receipts from the pharmacist for medication for which there is also a reimbursement from the statutory health insurance, laboratory tests).
- Physiotherapy up to 180 days after hospitalisation (45 sessions).
- Guarantee for serious illnesses: after agreement obtained, with a limit of € 7.000 per year per serious illness (list of serious illnesses completed in 2018 with Creutzfeldt-Jacob's disease, renal insufficiency with required dialysis and organ transplant, with the exception of corneal and skin transplants).
- Psychiatric admission: 40 days per calendar year. N.B. pre- and aftercare are not covered.
- Admission to a recognised hospital for rehab and geriatric care: unlimited duration. N.B. pre- and aftercare are not covered.
- Home birth: fixed amount of € 700 (increased in 2018).
- Urgent patient transport: reimbursement up to € 500 per calendar year (increased in 2018).

You can find details about reimbursements in the General Conditions on www.partenaziekenfonds.be/hospitalisatieverzekering. You can receive a paper copy free of charge on request.

MEER INFO:

WWW.PARTENA-ZIEKENFONDS.BE/
HOSPITALISATIEVERZEKERING

HOSPITALIA PLUS PREMIUMS

Monthly Amounts in € on 01/01/2018, all taxes included, based on age. Registered for Hospitalia and Hospitalia Plus products (including taxes of 10%):

Registered before 01/01/1994 or registered, after this date, before the age of 46*		After 01/01/1994, between 46 and 49 years of age*	
under 18	5,94	from 46 to 49	20,41
from 18 to 24	7,48	from 50 to 59	25,07
from 25 to 49	19,44	60 and over	44,89
from 50 to 59	23,87		
60 and over	42,77		
After 01/01/1994, between 50 and 54 years of age*		After 01/01/1994, between 55 and 59 years of age*	
49**	21,39	from 55 to 59	35,81
from 50 to 59	26,25	60 and over	64,15
60 and over	47,02		
		After 01/01/2018, at the age of 60 or over*	
		59**	40,58
		60 to 65	72,70

* At the start date of registration
** Age on January 1 of the year of registration

The Hospitalia Plus tariffs have been modified. You are entitled to cancel your contract within a period of 3 months from the date of this notification, by registered letter, by submitting your cancellation letter with an acknowledgement of receipt or by using the services of a bailiff.

Hospitalia and Hospitalia Plus: an increase of respectively 4,32% and 8,38% in agreement with the Regulatory Service for health insurance funds based on article 21octies 52 of the law of 9 July 1975.

Do you have a complaint or a problem? Please let us know on www.partena-ziekenfonds.be/meldpunt. We will be happy to assist you.



Partena Health Insurance Fund
Sluisweg 2 box 1, 9000 Gent,
www.partena-ziekenfonds.be



Partena Health Insurance Fund offers, together with Partena Help at Home and Partena Child Care, high-quality solutions in the field of health and personal comfort.

Everything you need to know about your insurance



Partena, the healthy reflex.





**Do you have to go into hospital?
With these tips you'll make the most
of your hospitalisation insurance.**

Waiting period

Just registered? There is a waiting period of 6 months with Hospitalia Plus, except for:

- Pregnancy: 9 months' waiting period
- For an accident: no waiting period
- Transfer of a similar policy: no waiting period (except in the case of a pregnancy).

Is your hospitalisation planned, e.g. in the case of a pregnancy?

Contact us!

Before your admission

Admission with an overnight stay in a single room:

- You only get the best reimbursement in a multi-bedded room.

One-day hospitalisation:

- In a twin-bedded room the Hospitalia Plus reimbursements are the best.
- In a single room:
 - Fee supplements: reimbursement is limited to maximum 1 x (=100%) the statutory tariff.
 - Room supplements: reimbursement up to €80 per day of hospitalisation.

Limitation for 'pre-existing condition':

- You only get the best reimbursement in a multi-bedded room

Admission with an overnight stay in the following hospitals of the Brussels or Walloon regions:

- No deductible for a multi-bedded room
- Deductible of € 150 for a single room in these hospitals with extra high fee supplements: C.H. Epicura (Rhms) - Ath, Baudour, Hornu, C.H.U du Tivoli - La Louvière, Jules Bordet Instituut - Brussel, C.H.U. Ambroise Paré - Mons, C.m.p. La Ramée - Brussel, Chirec (Edith Cavell, Basilique, Parc Léopold, S^{te}-Anne/ St-Remi, Braine-l'Alleud-Waterloo en Delta) - Brussel and Braine-l'Alleud, Clinique Notre-Dame de Grâce - Charleroi (Gosselies), Kliniek Sint-Jan - Brussel, Europa Ziekenhuizen - Brussel, Cliniques Universitaires St-Luc - Brussel, U.V.C Brugmann - Brussel, Ziekenhuizen Iris Zuid (Baron Lambert, Etterbeek-Elsene, Bracops and Molière) - Brussel, Centre de Santé Des Fagnes - Chimay, C.H.C / Clinique Saint-Vincent - Liège (Rocourt), C.H.C / Clinique Saint-Joseph - Liège, C.H.C / Clinique De L'Espérance - Montegnée, C.H.C / Clinique Notre-Dame - Hermalle/Argenteau, C.H.C / Clinique Notre-Dame - Waremme, C.H.C / Clinique Sainte-Elisabeth - Verviers (Heusy).

Look at the list online via
www.ziekenhuizenrijstelling.be

After your admission

Reimbursement of your down payment:

- Send us your proof of payment as soon as possible.
- Enclose a filled-in reimbursement form for Hospitalia.

Reimbursement of your hospitalisation costs:

- Wait until you have received your hospital invoices. This can take a few weeks or months.
- Send us your hospital invoices and proofs of payment.
- Enclose a filled-in reimbursement form for Hospitalia.
- Pay the invoices to the hospital in a timely manner.

Reimbursement of your aftercare:

- It is only possible to have aftercare reimbursed after receipt of your hospital invoice.
- Proofs of payment for aftercare are: BVAC receipts from the pharmacist, doctor's receipts or invoices for laboratory tests.
- Have you already sent your doctor's receipts to the health insurance fund? In that case, write the sentence "Doctor's receipts for aftercare already submitted" on your reimbursement form for Hospitalia Plus. We will then look for the receipts and reimburse the costs.

You can find reimbursement forms on www.partena-zielenfonds.be/hospitalisatieverzekering and in the Online Office

Send everything to:

Partena Health Insurance Fund, Hospitalia Department,
Sluisweg 2 box 1, 9000 GENT.
(or drop it off at your local Partena office.)



Don't forget to pay your premiums on time, so you will benefit from the best reimbursement and you won't risk your coverage being stopped.