

Reimbursement Overview 2014

Avéro Achmea Keuze Zorg Plan

The maximum reimbursement is the statutory amount of the customary rate (applicable to the market) in the Netherlands.

There may be further conditions to the reimbursements listed below.
 Be sure to refer to the policy conditions for more information.

Type of Care	Keuze Zorg Plan (Basic Insurance)
Bones, muscles and joints	
Occupational therapy Advise, instruction, training or treatment by an occupational therapist	Up to 10 hours per person per year
Foot Care for insured persons with diabetes in the event of increased or high risk of ulcers (Simm's 1 and higher) by chiropodist or podiatrist	100%
Abroad	
Emergency care abroad care which cannot wait until you are back in the Netherlands For emergency care abroad call the Aon Emergency Centre. The number can be found on the back of your health pass.	100% of the Dutch rates
Non-urgent care while abroad care which can wait until you are back in the Netherlands	Up to a maximum of 100% of the Dutch rates
Physiotherapy and remedial therapy for insured persons younger than 18 See www.aonhewitt.com for the brochure on paramedic care	
Chronic disorder (disorders which are covered by Annex 1 of the Besluit zorgverzekering (Health insurance Decree) and which are fully covered by the basic insurance) your doctor and/or physiotherapist diagnoses the disorder Manual lymph drainage in connection with serious lymphoedema may also be performed by a dermatologist rather than a physiotherapist	All treatments
Non-chronic disorder (all other disorders which are not covered by Annex 1 of the Besluit zorgverzekering (Health insurance Decree) and which are partially covered by the basic insurance) your doctor and/or physiotherapist diagnoses the disorder Manual lymph drainage in connection with serious lymphoedema may also be performed by a dermatologist rather than a physiotherapist	Per diagnosis treatment 1 to 18
Physiotherapy and remedial therapy for insured persons of the age of 18 and older See www.aonhewitt.com for the brochure on paramedic care	
Chronic disorder (disorders which are covered by Annex 1 of the Besluit zorgverzekering (Health insurance Decree) and which are fully covered by the basic insurance) your doctor and/or physiotherapist diagnoses the disorder Manual lymph drainage in connection with serious lymphoedema may also be performed by a dermatologist rather than a physiotherapist	As from the 21st treatment Treatment 1 to 20 you pay for yourself
Pelvic physiotherapy in connection with urine incontinence	Treatment 1 to 9
Above reimbursements only apply when you have 1 disorder! If you have more disorders wherefore you need physiotherapy, please call our Servicedesk for the exact reimbursement.	
Care aids	
Care aids conform the basic insurance Reimbursement in accordance with the terms and conditions in the Reglement Hulpmiddelen (Care aid Regulations), see www.aonhewitt.com	100% For some care aids you have to submit an application to us in advance A maximum reimbursement or statutory contribution may apply.
Personal alarms on medical grounds	100% with prior permission via Eurocross Assistance
Wig (personal contribution)	€ 409 per wig Also see the Reglement Hulpmiddelen (Care Aid Regulations)

Type of Care	Keuze Zorg Plan (Basic Insurance)
Medicines	
Contraception For example the pill or coil	
<ul style="list-style-type: none"> • up to the age of 21 	Reimbursement in accordance with the Reglement Farmaceutische zorg (Pharmaceutical care Regulations). You pay the statutory personal contribution, which differs per medicine, yourself.
<ul style="list-style-type: none"> • from the age of 21 	Reimbursement in the event of medical necessity (endometriosis or menorrhagie) in accordance with the Reglement Farmaceutische zorg (Pharmaceutical care Regulations)
Medicines conform the basic insurance	Reimbursement in accordance with the Reglement Farmaceutische zorg (Pharmaceutical care Regulations). You pay the statutory personal contribution, which differs per medicine, yourself.
Dental care for insured persons younger than 18 See www.aonhewitt.com for the brochure on dental care	
All treatments by a dentist, dental hygienist, dental surgeon and dental prosthetician With the exception of cast fillings, crowns, bridges, inlays and implants	100%
Dental care for insured persons older than 18 See www.aonhewitt.com for the brochure on dental care	
Maxillary surgery No parodontal surgery, implants or simple extractions	100% with prior permission
Dentures (prosthesis) <ul style="list-style-type: none"> • the purchase of fully removable dentures made by a dentist or dental prosthetician 	75% Statutory personal contribution 25% You need prior permission if: <ul style="list-style-type: none"> • the costs are higher than € 575 for an upper prosthesis • the costs are higher than € 600 for a lower prosthesis • the costs are higher than € 1.230 for a full prosthesis • replacement is within 5 years.
<ul style="list-style-type: none"> • repair or rebasing of fully removable dentures by a dentist or dental prosthetician 	100%
<ul style="list-style-type: none"> • implants for fully removable dentures in case of serious dental, jaw or mouth development or growth disorders by a dentist, dental surgeon, or Centrum voor Bijzondere Tandheelkunde (Centre for Special Dental Treatment) 	100% with prior permission
<ul style="list-style-type: none"> • fully removable complete dentures on implants in case of serious dental, jaw or mouth development or growth disorders by a dentist, dental prosthetician or Centrum voor Bijzondere Tandheelkunde (Centre for Special Dental Treatment) 	100% with prior permission Statutory personal contribution € 125 per upper or lower jaw
Orthodontics in case of serious dental, jaw or mouth development or growth disorders No reimbursements for reparations or replacements of damage and loss by your own negligence	100% with prior permission
Care for handicapped persons Your dentist will know whether you are eligible for the reimbursement	100% in the absence of an entitlement to reimbursement via the AWBZ and with prior permission.
Dental care in exceptional cases Your dentist will know whether you are eligible for the reimbursement	100% with prior permission A statutory personal contribution applies in some cases.
Eyes and ears	
Audiological centre	100%
Hearing aid	75% Statutory personal contribution 25% See the Reglement Hulpmiddelen (Care aid Regulations) on our website
Psychological care	
General mental health care (first line GGZ) due to non-complex psychological disorders by a clinical psychologist, health care psychologist, psychiatrist, psychotherapist, medical nursing specialist, orthopedadogy-generalist (NVO), children's or youth psychologist (NIP) No treatment for adjustment disorders, work- and relationship issues, psychical complaints without a psychical disorder and psychological interventions	100%
Non-clinical specialist mental health care due to a complex psychological disorder (second line GGZ) by a psychiatrist, GGZ institution, clinical psychologist or psychotherapist No treatment for adjustment disorders, work- and relationship issues, psychical complaints without a psychical disorder and psychological interventions	100%
Psychiatric hospital admission Admission to a mental health institution (psychiatric hospital or psychiatric ward of a hospital) No treatment for adjustment disorders, work- and relationship issues, psychical complaints without a psychical disorder and psychological interventions	100%

Type of Care	Keuze Zorg Plan (Basic Insurance)
Talking and reading	
Dyslexia care diagnoses and treatment of serious dyslexia for 7 to 12 year old children in accordance with the Protocol Dyslexie en Behandeling (Dyslexia Diagnosis and Treatment Protocol) See www.aonhewitt.com or call our Servicedesk	100%
Speech and language therapy No dyslexia or language development disorders	100%
Stutter therapy with a speech therapist	100%
Patient transport	
Ambulance	100%
Patient transport with prior permission by public transport, own car or taxi in the event of kidney dialysis, oncological care with radio/chemotherapy, visual handicap and if you are unable to travel or are wheelchair dependent	Up to 200 km one way: • own car € 0,31 per km • public transport (second class) 100% • taxi 100% There is a statutory personal contribution of € 96 per person
Hospital, treatment and nursing Call our department Medische Garanties on +31 (0)10 - 448 82 00 or see www.aonhewitt.com	
Asthma Centre in Davos	100% with prior permission
Treatment, examination and operation in a hospital	100% with prior permission
Hereditary research and consultancy	100%
Mechanical respiration	100%
(Extramural) specialist medical care outside the hospital	100%
Specialist medical care inside the hospital	100% with prior permission on plastic and maxillary surgery
Organ transplants in a hospital or independent treatment centre	100%
• nursing of the person who has donated the organ (donor)	3 months, 6 months in the case of liver transplants
Cosmetic and plastic surgery such as breast prosthesis after a breast amputation Not a breast enhancement, an operation to remove a breast prosthesis without any medical necessity, liposuction of the abdomen, correction of upper eyelids and ear position	100% with prior permission
Rehabilitation (specialist medical or geriatric rehabilitation)	100%
Second opinion for care via the basic insurance	100%
Dialysis	100% with prior permission
(Extramural) nursing outside the hospital Not artificial respiration at home or alleviating care for terminal patients (palliative care)	100%
Nursing in hospital (care provided by a specialist medical and dental surgeon)	100% with prior permission on plastic and maxillary surgery
Independent treatment centre a clinic certified by the government for specialist medical care at which examinations and outpatient treatment take place	100% with prior permission on plastic and maxillary surgery
Pregnancy	
Childbirth • home birth	100%
• outpatient childbirth in hospital at own request (without medical grounds)	€ 200 for use of the delivery room The remaining amount is statutory personal contribution
• outpatient childbirth in hospital on medical grounds	100%
• childbirth in hospital with a stay for several days	100%
In Vitro Fertilisation (IVF) fertility-enhancing treatment	First 3 attempts for each attempted pregnancy Medicines, in accordance with the GVS for first 3 attempts You will need prior permission from us for IVF in a foreign country
Maternity care • at home The number of hours is to be determined on the basis of the Landelijk Indicatieprotocol Kraamzorg (National Maternity Care Protocol)	100% You pay the statutory personal contribution of € 4,10 per hour yourself
• in a hospital on medical grounds	100%
• in a hospital or birth centre without medical grounds	100% (10 days) You pay the statutory personal contribution of € 33 (€ 16,50 for both mother and child) per day + the amount higher than € 233 (€ 116,50 for both mother and child) if charged by the hospital or birth centre
• parturition assistance	100% You pay the statutory personal contribution of € 4,10 per hour yourself
Oncology examination for children	100% via the Stichting Kinderoncologie Nederland (Skion)

Type of Care	Keuze Zorg Plan (Basic Insurance)
Prenatal screening • counselling	100%
• structural echoscopic examination (20 week scan)	100%
• combination test (neck fold measurement in combination with a blood test) Up to the age of 36 only on medical grounds	100%
Cryopreservation of sperm, human egg cells and embryo	100%
Obstetrical care	100%
Fertility-enhancing treatment (not IVF)	100% You will need prior permission from us for treatment in a foreign country
Other	
Dietary advice by a dietician and nutritional information	3 hours per person per year
General practitioner	100%
Chain-based care for type 2 diabetes mellitus (for insured persons of 18 years and older) and COPD	100%, only via care groups contracted by the insurer
Laboratory investigation and x-rays as prescribed by a GP or medical specialist	100%
Stop-smoking programme	1x per person per year
Thrombosis service	100%