

# HOSPITALISATION INSURANCE

## Information document on the insurance product

Company: Société Mutualiste d'Assurances NEUTRA

Company no.: BE 0472.020.311

Authorised by the OCM (Belgian health insurance supervisory body)

under no. 250/2

Product: NEUTRA CONFORT



Complete pre-contractual and contractual information on the hospitalisation insurance product is supplied separately.

### What type of insurance is it?

Neutra Confort hospitalisation insurance is insurance of plan 2 covering health care costs that remain borne by the beneficiary minus the legal intervention or that of another insurance or any reimbursement of any kind whatsoever.



#### What is insured?

- In case of hospitalisation
  - ✓ Hospital stay costs up to a maximum of €150 a day.
  - ✓ Fees and additional fees.
  - ✓ Pharmaceutical costs.
  - ✓ The costs of dentures, therapeutic prostheses as well as orthopaedic appliances placed during hospitalisation, directly related to the surgery practised and for all that they are the subject of a legal intervention. These costs are reimbursed up to a maximum of three times this legal intervention.
  - ✓ Hospital stay costs of a parent in the bedroom of a child under the age of 12 up to a maximum of €15 per night and 30 nights per calendar year.
  - ✓ Sanitary equipment rental costs.
  - ✓ Miscellaneous costs, of the hospitalised patient, with a maximum of €5 per day.
  - ✓ Sterilisation, contraception, artificial insemination and in vitro conception costs not reimbursed by the sickness and disability insurance up to a maximum of €60 a day.
  - ✓ Reconstructive plastic surgery costs that would be caused by an illness or an accident covered by the INAMI (Belgian National Institute for Health and Disability Insurance).
  - ✓ Outpatient hospital treatment costs are reimbursed like an ordinary hospitalisation.
  - ✓ Pre-and post hospital medical costs directly related to the hospitalisation and incurred two months before the start and three months after the end of the hospitalisation.
  - ✓ Pre-and post hospital pharmaceutical costs, not reimbursed by the sickness and disability insurance directly related to the hospitalisation and incurred two months before the start and three months after the end of the hospitalisation are limited to 50%.
  - ✓ Costs of a consultation carried out by an anaesthetist, prior to the hospitalisation up to a maximum of €10.
  - ✓ Ambulance costs.
  - ✓ Helicopter costs up to a maximum of €375 per transport.
  - ✓ Home birth costs up to a maximum of €400.
  - ✓ Hospitalisation resulting from a psychical, psychiatric, psychosomatic or mental disorder up to a maximum of €15 per night and 30 nights per calendar year.
  - In case of serious illnesses
  - ✓ Sanitary equipment rental costs.
  - ✓ Costs relating to special care, analyses and examinations required by the illness.
  - ✓ Pharmaceutical costs.
  - ✓ Pharmaceutical costs, not reimbursed by the sickness and disability insurance are limited to 50%.
  - ✓ Transport costs not reimbursed by the sickness and disability insurance
- up to a maximum of €125 per calendar year



#### What is not insured?


- x There is a €125 excess per calendar year, in the event of a serious illness and €125 for supplements linked to the private room.
- x Limit of €10,000 per calendar year, for pharmaceutical costs not reimbursed by the sickness and disability insurance.
- x Limit of €10,000 per calendar year, for costs of dentures, dental implants and medical equipment.
- x Limit of €500 per day and €5,000 per calendar year, for hospitalisations outside of Belgium.
- x Linked costs that exceed the amounts mentioned under the title "What is insured? "
- x The part of the fees and additional fees that exceed three times the legal intervention with the exception for additional fees during the hospitalisation that is granted up to the limit of triple the amount of the legal fee.





#### Are there exclusions to the cover?


- ! Services not reimbursed by the sickness and disability insurance, unless dispensation.
- ! Accidents or illnesses not controllable by medical examination.
- ! Aesthetic or rejuvenation treatments, unless they are reimbursed by the sickness and disability insurance (not including supplements subject to VAT).
- ! Accidents that occurred in a state of drunkenness, alcohol intoxication or under the influence of drugs or narcotics used without a medical prescription, except if there is no causal link or use out of ignorance of drink or drugs or constraint by a third party.
- ! Illnesses whose cause are problems with alcoholism, drug addiction or abusive use of medication.
- ! Water cures.
- ! War events, civil unrest or riots, except when the insured party has not taken an active part in this or has found him/herself in a case of self-defence.
- ! The practise of an aviation sport or leading to the use of a motor vehicle, likewise the practice, as a professional of any sport.
- ! The consequences of:
  - an intentional act by the insured party, unless he/she provides proof that it involves a case of rescuing persons or property or a suicide attempt;
  - crimes and offences that the insured party would have committed;
  - reckless acts, bets or challenges.
- ! The direct or indirect effect of radioactive substances or artificial acceleration procedures of atomic particles, except the use for medical purposes.
- ! Voluntary self-mutilation.
- ! Accidents when the insured party is part of aircraft crew or exercises during the flight a


<p>and on the basis of the scale provided for taxpayers taking into account legal distances.</p> <ul style="list-style-type: none"> <li>✓ Dentures provided for in article 27 of the nomenclature of health care.</li> <li>- <u>In case of dental care in Belgium</u></li> <li>✓ Preventive care costs (50% of the deterrent fee).</li> <li>✓ Denture costs with the intervention of the sickness and disability insurance (50% of the deterrent fee).</li> <li>✓ The costs of placing skeletal prostheses up to a maximum of €100 per calendar year.</li> <li>✓ The costs of crowns up to a maximum of 5 per calendar year and €100 per crown.</li> <li>✓ The costs of dental implants up to a maximum of 5 per calendar year and €100 per implant.</li> <li>- <u>In case of dental care in neighbouring countries (cf. following question)</u></li> <li>✓ Preventive care costs up to a maximum of €6.</li> <li>✓ Denture costs up to a maximum of €65</li> <li>✓ The costs of placing skeletal prostheses up to a maximum of €100 per calendar year.</li> <li>✓ The costs of crowns up to a maximum of 5 per calendar year and €100 per crown.</li> <li>✓ The costs of dental implants maximum of 5 per calendar year and €100 per implant.</li> </ul>	<p>professional activity or other in relation to the aircraft or the flight.</p> <p>! Hospitalisations for personal inclination.</p>
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	<p><b>Where am I covered?</b></p> <ul style="list-style-type: none"> <li>✓ For hospitalisations and serious illnesses, around the world.</li> <li>✓ For dental care, in Belgium and neighbouring countries (European territories of Germany, France, Grand-Duchy of Luxembourg and the Netherlands).</li> </ul>
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	<p><b>What are my obligations?</b></p> <ul style="list-style-type: none"> <li>- To pay the premium.</li> <li>- In case of a claim, to send the declaration form for the reimbursement of costs duly filled in and signed.</li> <li>- To inform the insurer of any modification that has occurred and likely to have an influence on the risk cover.</li> <li>- To communicate any modification to personal data.</li> </ul>
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	<p><b>When and how do I make payments?</b></p> <p>The premiums are payable in advance:</p> <ul style="list-style-type: none"> <li>- by monthly, quarterly, six-monthly or annual domiciliation.</li> <li>- annually by bank transfer.</li> </ul>
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	<p><b>When does cover start and when does it end?</b></p> <p>The policy is entered into for life and takes effect on the date specified in the contractual conditions. It ends vis-à-vis the insured party at the time of his/her death; when he/she is no longer a member of one of the member insurance companies; when the possibility of benefiting from the advantages of the health insurance Insurance Company's supplementary insurance is removed*.</p> <p>In these cases, if he/she is also the policyholder, other insured parties will be offered the chance of continuing the hospitalisation insurance.</p> <p>It ends <i>ipso jure</i>:</p> <ul style="list-style-type: none"> <li>- at the end of the month following the termination request by the policyholder;</li> <li>- in case of a payment default, the fifteenth day following the day after posting the registered letter concerning a payment demand;</li> <li>- in the case of fraud or attempted fraud.</li> </ul> <p>* Members of a health insurance company affiliated to SMA Neutra whom the possibility of benefiting from the advantages of the complementary insurance services being eliminated, cannot become insured by SMA Neutra and lose their previously acquired status.</p>
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	<p><b>How can I terminate the policy?</b></p> <p>The policyholder can end the policy by means of sending a written, signed request. The termination is effective at the end of the month following this request.</p>
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