

RECOMMENDATIONS ON CHOOSING THE RIGHT HEALTH INSURANCE

HOW CAN I SAVE ON MY HEALTH INSURANCE?

Each year your health insurance gets more expensive, but are you aware that a good comparison can save up to € 100,- annually? Please keep in mind that a coverage that fits your needs is more important than the highest discount.

BENEFIT FROM COLLECTIVE INSURANCE

A health insurance through the collective of [name employer] is often more profitable. Despite the high discount, it is unnecessary to choose a package with a much too extensive coverage. It is tempting to opt for an extensive coverage, because it's more profitable due to the collective discount.

Insurance consultancy Alpina, with whom [name employer] cooperates, gladly provides you independent and non-committal advice. You can reach us 24 hours a day, each day of the week at **088 121 02 22** or through email zorg@alpina.nl.

CONSULTATION HOURS

Alpina also offers consultation hours on location. We recommend anyone to hear a specialist in health insurances who can help you with a comparison of insurance offers. Would you like to know more about the collective health insurance of [name employer]? Please visit [<link to comparisonwebsite>](#).

The basic health insurance is required for everyone. With which provider will you proceed? And what expenses can you expect? You will make the right choice with these recommendations of Alpina.

1. CHOOSE THE CORRECT BASIC HEALTH INSURANCE

There are 3 different types of basic health insurances: budget, benefits in kind and refund. The differences between these three types can be found in the contracts between insurance companies and health care providers. Please be aware: the budget insurance may be the cheapest, but the health insurance company has far fewer contracts with health care providers on this base. This could result in high health care costs when you choose for a non-contracted health care provider. These contracts only apply for plannable care, not for emergency care.

2. APPLY FOR HEALTH CARE ALLOWANCE

You have the right to apply for health care allowance under some circumstances. Please check whether this applies to you. If this applies to you, you can receive a monthly (partial) compensation for the monthly health insurance premium.

3. MAKE AN INDIVIDUAL COMPARISON

Many families choose a joint policy. This makes things (financially) easier to manage. Yet this is not always advantageous. Maybe your partner is better off with another insurance company. If you don't share the same needs, we recommend to make a separate comparison.

4. APPLY FOR A SECOND OPINION

Are you scheduled for an expensive dental treatment? Apply for a second opinion with a different dentist. In a few cases prices of certain dental treatments differ for various dentists.

5. YEARLY PREMIUM PAYMENT INSTEAD OF MONTHLY PAYMENT

When you pay your premium all at once, sometimes it can afford an extra discount up to 3%. This might be an option, if you are able to pay the whole amount in advance, prior to the insured year.

6. HAVE THE TREATMENT DONE BY THE GENERAL PRACTITIONER

You can have some treatments done by your general practitioner instead of a specialist in the hospital or clinic. The advantage is that you don't have to pay your part of the own risk. For instance, when a general practitioner inserts an IUD, you only have to pay for the expenses of the IUD, not for the operational expenses. When a specialist at the hospital inserts the IUD, the insurance company will bill you for the operational expenses when you haven't (fully) paid your own risk.

7. HANDLE YOUR OWN RISK WISELY

Do you need health care in the last few months of the year? Please think about your own risk. Have you already consumed all of it? Please proceed with the needed treatments before the first of January. When you wait until January, you probably have to pay the treatment up to your own risk, since you will start with a fresh batch of own risk after the first of January.

8. INSURE YOUR CHILD ALONG WITH THE PARENT WITH THE HIGHEST ADDITIONAL COVERAGE

Children under the age of 18 are co insured free of charge. However, you can choose with which one of the parents you co-insure your child(ren). If you and your partner have the exact same coverage, it does not matter. Does either one of you have an additional insurance? Co-insure your child(ren) with the parent with the highest additional coverage. Your child(ren) will then automatically profit from that additional coverage. For example, this might prove useful for orthodontics or physical therapy.

9. DEAL WITH MEDICINE CONSCIOUSLY

Insurance companies often have a preferred type of medicine within a group of equal types of medicine. For example: There is a group of medicine with the same active ingredient and the same dosage, but with another supplier. Within this group of medicine, you can get one covered by the insurance company, but not the other ones. Therefore, you don't always need an additional insurance to cover your medicine expenses. When you take a close look at this, it might give you considerable savings.

10. PLEASE NOTE YOU ARE NOT UNDERINSURED

The basic health insurance covers medical costs abroad, up to Dutch rates. If your health care abroad is more expensive than the Dutch prevailing rates, you can have this covered by either an additional health insurance or a travel insurance. Please ask your consultant from Alpina what's the best solution for you. This way you are not double insured or underinsured.

11. YES OR NO TO AN ADDITIONAL INSURANCE?

Are you healthy and you don't expect any health care costs in 2018? You can then consider not having an additional insurance. Consider for example, how much you will be spending for additional health insurance and how much you will be needing it. It is quite possible it will be cheaper to pay for healthcare costs yourself, instead of having an additional

insurance. For example, consider your dental insurance. Only paying for a dentist consultation twice a year is much cheaper than the cheapest dental insurance. This will save tens of euros.

SUMMARIZED

Determine your care needs and review your current health insurance critically. Compare your insurance each year. The insurance package that seems to suit best this year, may not do so next year. In addition, the premiums change each year and so do the collective options through the collectivity of [name employer]. A comparison only costs 10 minutes but can save up to € 100,- yearly per person.

Do you prefer personal advice? We gladly help you! You can reach our consultants by phone 24 hours a day, each day of the week at **088 121 02 22**. It's also possible to ask your question through email: zorg@alpina.nl.