

These conditions apply from 1 January 2018 and replace all previous versions.
They only apply if the health insurance in question is stated on your policy certificate.

OZF.
Your health insurer.



List of Reimbursements 2018

Basic insurance, Supplementary insurance policies &
Dental insurance policies



List of Reimbursements 2018

OZF Zorgpolis

AV Compact and AV Royaal supplementary insurance

Tand Compact and Tand Royaal dental insurance

What medical expenses are covered by the basic health insurance? And what expenses are reimbursed by our supplementary (dental) insurance (policies)? Do different reimbursements apply, depending on whether treatment is provided by contracted or non-contracted care providers? How are mandatory and/or voluntarily chosen excess and personal contributions deducted? We are happy to explain.

Our health insurance policies

We call our basic insurance OZF Zorgpolis. It is an arranged care policy. This means that you are entitled to care arranged by us. But you are also entitled to reimbursement of healthcare costs. You can supplement the cover provided by the OZF Zorgpolis with 1 or more supplementary (dental) insurance policies:

- AV Compact or AV Royaal.
- Tand Compact or Tand Royaal.

For Tand Royaal you have to undergo a medical assessment.

The government determines the contents of the basic insurance

The government stipulates the conditions of the basic insurance. These are laid down in the Dutch Health Insurance Act (Zorgverzekeringswet (Zvw)) and the corresponding legislation. Every health insurer must comply with these conditions.

What expenses are covered by the basic insurance?

The following is a brief summary of what is covered by the basic health insurance package:

- General practitioner care.
- Specialist medical care, and stay.
- Mental health care (18 or older).
- Medical devices.
- Medicines and dietary preparations.
- Maternity care and obstetric or midwifery care.
- Transport by ambulance and seated patient transport.
- Paramedical care (occupational therapy, speech therapy and a certain amount of physiotherapy and/or remedial therapy).
- Dental care (up to 18)
- Dental care in exceptional cases (18 or older).

What expenses are reimbursed by our supplementary (dental) insurance policies?

Our supplementary (dental) insurance policy covers medical care that is not, or only partially, reimbursed by the basic health insurance package. For example physiotherapy, alternative forms of treatment and spectacles and/or contact lenses. If you are 18 or older it also covers regular dental care, which is not included in the basic health insurance package.

Please note! We reimburse some medical care under basic and supplementary (dental) insurance.

The reimbursement of medical expenses is subject to conditions and exclusions

These conditions and exclusions are not always reproduced in full in this List of Reimbursements, which is a brief summary of our policy conditions. So no rights can be derived from this document. Our conditions and exclusions are listed in full in the policy conditions. Our policy conditions always take precedence. For instance, they tell you if you need a referral, which medical indication(s) are reimbursed, and if you need to request our permission in advance. Our policy conditions can be found at ozf.nl/vergoedingen or obtained from us.

Contracted and non-contracted care

We have entered into contracts with a large number of care providers and healthcare institutions. Contracted care providers invoice us directly. If you are entitled to full reimbursement under the policy conditions, the bill is (usually) paid in full. However, this does not apply to the (mandatory and/or voluntarily chosen) excess or any (statutory) personal contribution. We will bill you for this.

Are you using a non-contracted care provider or healthcare institution? In that case you are generally entitled to reimbursement of up to 75% of the average tariff we pay for this care (provided by contracted care providers).

Do you want to know with which care providers and healthcare institutions we have a contract? In that case use the Medical Provider Search Tool on ozf.nl/zorgzoeker or contact us. A list of the reimbursement tariffs that apply for treatment provided by non-contracted care providers or healthcare institutions can be found at ozf.nl/downloads or obtained from us.

Please note! Sometimes we only reimburse contracted care. If this is the case, it will say so next to the reimbursement.

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List of Reimbursements 2018 (cont'd)

OZF Zorgpolis

AV Compact and AV Royaal supplementary insurance

Tand Compact and Tand Royaal dental insurance

The mandatory excess

For everyone aged 18 or older basic insurance involves a mandatory excess. Each year the government determines the amount of the mandatory excess. In 2018 this is €385.00 This means that you yourself have to pay the first €385.00 towards medical expenses covered by the basic health insurance. However, you are not required to pay an excess for:

- The costs of care or other services incurred in 2018 but for which the invoices are not received until after 31 December 2019.
- General practitioner care. The costs of tests or examinations performed as part of this care, which are performed elsewhere and charged for separately, are an exception in this respect.
- The costs of registering with a general practitioner or with an institution that provides general practitioner care.
- The direct costs of obstetric and/or midwifery care and maternity care.
- The costs of follow-up examinations of a donor after the period of caring for that donor has expired. This period of care lasts, at the most, 13 weeks, or in the event of a liver transplant, 6 months.
- The donor's transport costs if these costs are reimbursed by the donor's own basic insurance.
- The costs of integrated care claimed in accordance with the policy rule on performance-related funding of the provision of multidisciplinary care for chronic disorders. This policy rule was established on the basis of the Dutch Healthcare Market Regulation Act (Wmg).
- The costs of nursing and care provided by nurses (in accordance with article 31 of 'OZF Zorgpolis Entitlements and Reimbursements').

Voluntarily chosen excess

In addition to the mandatory excess you can opt for a voluntarily chosen excess. You can increase your mandatory excess by €100.00, €200.00, €300.00, €400.00 or €500.00. The premium for your basic insurance will then be lower. Do you want to know how much you can save on your premium by opting for a voluntarily chosen excess? You can find this information at ozf.nl/premieoverzicht. Or go to ozf.nl/mijnnoz. After logging in with your DigiD, first click on 'Wijzig mijn verzekering' (Change my insurance), then click on 'Eigen risico' (Excess). If you wish to change your voluntarily chosen excess, you must do it on or before 31 December 2017.

An example of how the excess is calculated and deducted

In 2018 Henk, who is 45 years old, has an excess of €885.00. The mandatory excess is €385.00 and he has opted for a voluntarily chosen excess of €500.00 because his healthcare expenses have been low for years. However, on 1 May 2018 something goes wrong with Henk's knee and he needs surgery on his meniscus. The hospital bill is €2,000.00. The same month his pharmacist supplies him with several medicines that cost a total of €100.00. So in 2018 Henk's healthcare expenses amount to a total of €2,100.00. He pays the first €885.00 (his mandatory and voluntarily chosen excess).

When are you required to pay a (statutory) personal contribution?

In addition to your excess, sometime you also have to pay a statutory personal contribution. The amount of the statutory personal contribution is determined by the government. You are required to pay a personal contribution towards the cost of, among other things:

- Seated patient transport.
- Maternity care.
- Certain medical devices, such as a hearing aid.
- Certain medicines, such as some ADHD medicines.

Your mandatory and/or voluntarily chosen excess may also be deducted.

Please note! We sometimes reimburse the (statutory) personal contribution under your supplementary (dental) insurance.

What should you do if a care provider or healthcare institution sends you an invoice?

There are two ways in which you can send the invoice to us:

- Online: ozf.nl/declareren
- By post: Zorgverzekeraar OZF, Claims Service Department, Postbus 94, 7550 AB Hengelo - NL

You will find full details at ozf.nl

On our website you will find a list of our contracted care providers, our reimbursement tariffs for non-contracted care providers, policy conditions and brochures. You will also find claim forms, Medical Devices Regulations (Reglement Hulp-middelen), Pharmaceutical Care Regulations (Reglement Farmaceutische Zorg), Personal Care Allowance Regulations - Nursing and Care (Reglement Zvw-pgb verpleging en verzorging) and other information about our insurance policies. And our Privacy Statement explains your rights in terms of how your (personal) data is used by Achmea, including the legislative changes that will enter into force in May 2018.

A number of abbreviations and phrases are used in the List of Reimbursements

These abbreviations and phrases are explained below.

- art: article.
- tr: treatment(s).
- p: page.
- GVS: Medicinal Products Reimbursement System (Geneesmiddelenvergoedingssysteem).
- GVS limit: a medicine is reimbursed up to a limit specified by the GVS.
- cy: calendar year (from 1 January to 31 December incl.).
- km: kilometre(s).
- max: maximum.
- After receiving our permission in advance: for this care to be reimbursed, we must give you permission in advance.
- For the duration of the insurance: a reimbursement that applies for as long as the insurance policy in question is still valid.
- Wlz: Dutch Long-term Care Act (Wlz)
- Wmg: Dutch Healthcare Market Regulation Act (Wet marktordening gezondheidszorg).
- ZBC: Independent Treatment Centre (Zelfstandig Behandelcentrum).

Please note! The reimbursements specified in this List of Reimbursements apply per person, unless otherwise indicated.

Emergency response centre Eurocross Assistance

Do you need urgent medical care while you are abroad? In that case please call our emergency response centre Eurocross Assistance on +31 71 364 1 282. This telephone number is also on the back of your healthcare card. You can reach Eurocross Assistance 24 hours a day.

Holiday Doctor

Free advice on non-urgent medical issues before and/or during holidays. Call the Holiday Doctor on +31 71 364 1 802.

Care Mediation

We gladly provide you with the best care advice to ensure that you receive prompt high quality care. We will also help you find a general practitioner, dentist or physiotherapist if you move home. Call our Customer Service team on 074 789 0 789 or visit our website, ozf.nl.

We offer attractive discounts

This applies to cosmetic surgery, a number of medical devices, spectacles and contact lenses or refractive eye surgery/lens implantation. You will find full up-to-date details of customer benefits in 2018 at ozf.nl/klantvoordelen.



Contents (cont'd)

Medicines and dietary preparations	13	Course designed to reduce alcohol consumption
Contraceptives		Flu vaccinations
Medicines and dietary preparations		Health Check
Melatonin		Coping with heart problems
Statutory personal contribution (upper-limit GVS price)		Lymphoedema, awareness and/or self-management course
Oral health care and dentistry	14	Coping with rheumatoid arthritis, osteoarthritis or ankylosing spondylitis (Bechterew's disease)
Front tooth replacement up to the age of 23		Type 2 diabetic patients course
Implants		Weight loss course
Orthodontics (braces) in exceptional cases		Basic resuscitation/AED course
Regular dental care and oral hygiene 18 or older		First aid course
Regular dental care up to 18		Baby and child first aid course
Dental care 18 or older - Dental surgery		'Slaapcoach' online sleep improvement course or a 'You can learn to sleep' course.
Dental care 18 or older - Full set of removable (implant-retained) dentures (false teeth) - Personal contribution		'Lekker in je vel' (a course on feeling good about your body)
Dental care in exceptional cases		A course on self-respect for kids.
Dental care - Crowns, bridges, inlays and implants		'Meer Bewegen voor Ouderen' (a programme on more exercise for the elderly)
Dental care - Orthodontics (braces) up to 22		Fall prevention programmes
Dental care - Full set of removable implant-retained dentures		Stop smoking programme
Dental care for insured persons with a handicap		'AfvalLEN en AfblijVEN' diet and exercise programme
Eyes and ears	15	Intestinal cancer screening self-test
An audiology centre		Psychological care
Spectacles and/or contact lenses		18
Hearing aid - Personal contribution		Counselling
Refractive eye surgery or lens implantation		General Basic GGZ 18 or older
Sensory impairment care		Mindfulness training
Preventive healthcare	16	Non-clinical specialist GGZ 18 or older
FysioRunning coaching programme		Psychiatric hospital stay 18 or older
Consultations, vaccinations and medication required for foreign travel		Speech and reading
		18
		Speech therapy
		Stutter therapy by a speech therapist
		Stutter therapy method taught at the Del Ferro or Hausdörfer Institute, the BOMA method or the McGuire programme

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Contents (cont'd)

Transport	18	IVF (in vitro fertilisation)	
Transport by ambulance		Maternity package	
Transport for family members in the case of a hospital stay		Maternity care at a hospital with a medical indication	
Overnight guest house accommodation during an outpatient treatment cycle		Maternity care at a hospital without a medical indication - Personal contribution	
Overnight guest house accommodation and transport for family members		Maternity care at home or in a birth or maternity centre - Personal contribution	
Seated patient transport		Lactation care	
Hospital, treatment and stay	19	Oncological examination of children (by SKION)	
Asthma Centre in Davos (Switzerland)		Assistance during childbirth	
Primary care stay		Prenatal screening: combined test, counselling, Structural Echoscopic Examination (SEO), Non-Invasive Prenatal Testing (NIPT), invasive diagnostics	
Genetic research and advice		Sperm cryopreservation	
Mammaprint diagnostic breast cancer test		TENS during delivery	
Mechanical respiration		Maternity care postponed due to medical necessity	
Specialist medical care and stay		Maternity care extended due to medical necessity	
Plastic surgery		Fertility-enhancing treatments (other than IVF)	
Cosmetic surgery		"Slimmer Zwanger" pregnancy self-help programme	
Rehabilitation (specialist medical rehabilitation and geriatric rehabilitation)		Antenatal classes	
Second opinion		Other medical care	23
Sterilisation		Dietetic therapy	
Home dialysis		Hospice (in the Netherlands)	
Transplantation of organs and tissues		General practitioner care	
Nursing and care in your own surroundings (extramural)		Integrated care for diabetes mellitus type 2, COPD, asthma and/or vascular risk management (VRM)	
2 nd Doctor Online		Patient association membership	
Pregnancy/baby/child	20	Support for informal caregivers and recipients	
Maternity care or medical screening related to adoption		Therapeutic holiday camp for handicapped persons	
Delivery and obstetric or midwifery care with medical necessity		Therapeutic holiday camp for children	
Delivery and obstetric or midwifery care without medical necessity - Personal contribution		Thrombosis service	
Oocyte vitrification		Nutrition education by a weight management consultant or (sports) nutritionist	

List of Reimbursements 2018

Alternative therapies	OZF Zorgpolis Basic insurance	AV Compact Supplementary insurance	AV Royaal Supplementary insurance
Alternative (homeopathic and anthroposophic) medicines (for conditions: see art. 1 on p. 48 of the policy conditions)	-	Contracted pharmacy: max €100.00 per cy (with a doctor's prescription) Non-contracted: -	Contracted pharmacy: 100% (with a doctor's prescription) Non-contracted: -
Alternative forms of treatment and therapy (for which alternative forms of treatment and therapy, conditions and what we do not reimburse: see art. 2 on p. 48 of the policy conditions)	-	Max €40.00 per day, max €200.00 per cy for all alternative forms of treatment and therapy combined (care provider must be affiliated with a professional association recognised by us: see ozf.nl/alternatief)	Max €50.00 per day, max €500.00 per cy for all alternative forms of treatment and therapy combined (care provider must be affiliated with a professional association recognised by us: see ozf.nl/alternatief)

Bones, muscles and joints	OZF Zorgpolis Basic insurance	AV Compact Supplementary insurance	AV Royaal Supplementary insurance
Remedial therapy in a hot water pool for rheumatoid arthritis (for conditions: see art. 3 on p. 48 of the policy conditions)	-	-	Max €200.00 per cy
Chiropractic treatment (chiropractor must be affiliated with NCA, DCF, CCA or SCN)	-	-	Max €40.00 per day, max 24 tr. per cy
Occupational therapy (for conditions and what we do not reimburse: see art. 1 on p. 20 of the policy conditions)	Max 10 hours per cy Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-
Osteopathy (osteopath must be NOF or NRO registered)	-	-	Max €50.00 per day, max 10 tr. per cy
Pedicure care for rheumatoid foot conditions (for conditions and what we do not reimburse: see art. 6.1 on p. 49 of the policy conditions)	-	-	Max €25.00 per tr., max €150.00 per cy (for pedicure care for rheumatoid and/or diabetic and/or medical foot conditions)
Pedicure care for diabetic foot conditions (for conditions and what we do not reimburse: see art. 6.2 on p. 49 of the policy conditions)	-	-	Max €25.00 per tr., max €150.00 per cy (for pedicure care for rheumatoid and/or diabetic and/or medical foot conditions)
Pedicure care for medical foot conditions (for conditions and what we do not reimburse: see art. 6.3 on p. 50 of the policy conditions)	-	-	Max €25.00 per tr., max €150.00 per cy (for pedicure care for rheumatoid and/or diabetic and/or medical foot conditions)
Podiatry/podology/podopostural therapy (for conditions and what we do not reimburse: see art. 7 on p. 50 of the policy conditions)	-	-	Max €100.00 per cy

Bones, muscles and joints (cont'd)	OZF Zorgpolis Basic insurance	AV Compact Supplementary insurance	AV Royaal Supplementary insurance
Sports medical examination by a sports doctor (at an SCAS-accredited sports medical institution: www.sportzorg.nl/zoek-een-sportzorgprofessional)	-	Max €200.00 per cy for a sports medical examination and/or a sports check-up and/or an exertion test performed by a sports doctor	Max €200.00 per cy for a sports medical examination and/or a sports check-up and/or an exertion test performed by a sports doctor
Sports medical advice and guidance by a sports doctor (at an SCAS-accredited sports medical institution: www.sportzorg.nl/zoek-een-sportzorgprofessional)	-	Max €150.00 per cy for training advice and a personal training programme based on the results of a sports medical examination by a sports doctor	Max €150.00 per cy for training advice and a personal training programme based on the results of a sports medical examination by a sports doctor
(Sport) arch supports and/or orthoses, (or their repair) (for conditions: see art. 10 on p. 51 of the policy conditions)	-	-	Max €125.00 per cy
Foot care in the case of diabetes mellitus (for conditions and what we do not reimburse: see art. 2 on pp. 20 and 21 of the policy conditions)	Foot examination (Care Profile 1 (Zorgprofiel 1) and higher) and treatment by a podiatrist (Care Profile 2 (Zorgprofiel 2) and higher) Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-

Abroad	OZF Zorgpolis Basic insurance	AV Compact Supplementary insurance	AV Royaal Supplementary insurance
Transport costs following care mediation if care is provided in Belgium or Germany Call our Transport Telephone Line (Vervoerslijn) on 071 365 4 154 for permission in advance: Lines are open from 08:00 to 18:00 on working days.	-	Contracted taxi service: 100% Non-contracted taxi service: - (Lowest class of) public transport 100%, own transport (€0.30 per km) max €1,000.00 per cy	Contracted taxi service: 100% Non-contracted taxi service: - (Lowest class of) public transport 100%, own transport (€0.30 per km) max €1,000.00 per cy
Transport of the insured person and mortal remains to your country of residence (repatriation)	-	100%, Eurocross Assistance must give you permission in advance and must arrange the transport that is required as part of urgent medical care	100%, Eurocross Assistance must give you permission in advance and must arrange the transport that is required as part of urgent medical care
Medical treatment abroad, non-urgent (for conditions: see art. 3 on p. 21 of the policy conditions)	Contracted: 100% Non-contracted: reimbursement as in the Netherlands with due observance of conditions and exclusions, up to max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-
Medical treatment abroad, urgent (for conditions: see art. 3 on p. 21 of the policy conditions)	100% up to max Dutch tariffs	Supplementary cover in addition to OZF Zorgpolis reimbursement up to a maximum of the cost price (in the case of a stay of up to 365 days required for urgent medical care that cannot be postponed until you return to your country of residence)	Supplementary cover in addition to OZF Zorgpolis reimbursement up to a maximum of the cost price (in the case of a stay of up to 365 days required for urgent medical care that cannot be postponed until you return to your country of residence)

Physiotherapy and Cesar or Mensendieck remedial therapy	OZF Zorgpolis Basic insurance	AV Compact Supplementary insurance	AV Royaal Supplementary insurance
Pelvic physiotherapy to treat urinary incontinence 18 or older (for conditions and what we do not reimburse: see art. 4.3 on p. 23 of the policy conditions)	9 tr., 1x only Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	Max 12 tr. per cy Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	Max 27 tr. per cy Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)
Exercise programmes for: <ul style="list-style-type: none"> • Obesity (BMI > 30) • Earlier heart failure • Rheumatoid arthritis (as defined by the Dutch Reumafonds (Arthritis Foundation) • Type 2 diabetes • COPD with a lung function of FEV1/VC < 0.7, a breathlessness score of >2 on the MRC scale and a health score of >1 to 1.7 on the CCQ scale • (Recovery from) an oncological condition (for conditions: see art. 13 on p. 52 of the policy conditions)	-	Contracted: max €175.00 per disorder for the duration of the supplementary insurance Non-contracted: -	Contracted: max €350.00 per disorder for the duration of the supplementary insurance Non-contracted: -
Physiotherapy and Cesar or Mensendieck remedial therapy to treat a chronic disorder 18 or older (chronic disorders to which this applies are listed at ozf.nl) Manual lymphatic drainage to treat severe lymphoedema may also be performed by a skin therapist (for conditions and what we do not reimburse: see art. 4.1 on pp. 21 and 22 of the policy conditions and art. 14.1 on pp. 52 and 53 of the policy conditions).	Tr. 21 and next Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	Max 12 tr. per cy (you pay for tr. 13 to 20) with max 9 manual therapy tr. Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	Max 27 tr. per cy, with max 9 manual therapy tr. Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)
Physiotherapy and Cesar or Mensendieck remedial therapy to treat a non-chronic disorder 18 or older (for conditions and what we do not reimburse: see art. 14.1 on pp. 52 and 53 of the policy conditions)	-	Max 12 tr. per cy, with max 9 manual therapy tr. Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	Max 27 tr. per cy, with max 9 manual therapy tr. Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)
Please note!			
Is a maximum number of physiotherapy and Cesar or Mensendieck remedial therapy treatments specified under AV Compact and/or AV Royaal? Then the specified maximum number of treatments applies per calendar year, even if the insured person suffers from several disorders. The maximum number of treatments also applies regardless of whether the disorder(s) is/are on the list of chronic disorders approved by the Dutch Minister of Health, Welfare and Sport (VWS).			
You can find more information about physiotherapy and Cesar or Mensendieck remedial therapy at ozf.nl.			
Physiotherapy and Cesar or Mensendieck remedial therapy to treat a chronic disorder up to 18 (chronic disorders to which this applies are listed at ozf.nl) Manual lymphatic drainage to treat severe lymphoedema may also be performed by a skin therapist (for conditions and what we do not reimburse: see art. 4.2 on pp. 22 and 23 of the policy conditions).	Unlimited number of tr. Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-

Physiotherapy and Cesar or Mensendieck remedial therapy (cont'd)

	OZF Zorgpolis Basic insurance	AV Compact Supplementary insurance	AV Royaal Supplementary insurance
Physiotherapy and Cesar or Mensendieck remedial therapy to treat a non-chronic disorder up to 18 (for conditions and what we do not reimburse: see art. 4.2 on pp. 22 and 23 of the policy conditions and art. 14.2 on p. 53 of the policy conditions)	Max 9 tr. per cy per disorder, with the possible addition of 9 further tr. (with medical necessity) Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	Unlimited number of tr. per cy, with max 9 manual therapy tr. Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	Unlimited number of tr. per cy, with max 9 manual therapy tr. Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)
Post-care physiotherapy after oncology or a CVA or for cardiovascular disease (for conditions: see art. 15 on p. 54 of the policy conditions)	-	Contracted: 100% Non-contracted: -	Contracted: 100% Non-contracted: -
Physiotherapy to treat leg pain caused by intermittent claudication (restricted blood supply to the legs) 18 or older (for conditions and what we do not reimburse: see art. 4.4 on p. 23 of the policy conditions)	Max 37 supervised remedial therapy tr. for max 12 months Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	Max 12 tr. per cy, in addition to OZF Zorgpolis reimbursement Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	Max 27 tr. per cy, in addition to OZF Zorgpolis reimbursement Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)
Physiotherapy to treat osteoarthritis of the hip or knee joint for insured persons aged 18 or older (for conditions and what we do not reimburse: see art. 4.5 on p. 24 of the policy conditions)	Max 12 supervised remedial therapy tr. for max 12 months Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	Max 12 tr. per cy, in addition to OZF Zorgpolis reimbursement Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	Max 27 tr. per cy, in addition to OZF Zorgpolis reimbursement Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)

Skin

	OZF Zorgpolis Basic insurance	AV Compact Supplementary insurance	AV Royaal Supplementary insurance
Acne treatment (for conditions and what we do not reimburse: see art. 16 on p. 54 of the policy conditions)	-	-	Max €350.00 per cy (we reimburse either camouflage therapy or acne treatment for the same indication)
Camouflage therapy (for conditions and what we do not reimburse: see art. 17 on p. 54 of the policy conditions)	-	-	Max €350.00 per cy (we reimburse either camouflage therapy or acne treatment for the same indication)
Hair removal treatment (for conditions and what we do not reimburse: see art. 18 on p. 55 of the policy conditions)	-	-	Max €545.00 for the duration of the supplementary insurance (for female insured persons if there is unsightly facial hair)

Medical devices

	OZF Zorgpolis Basic insurance	AV Compact Supplementary insurance	AV Royaal Supplementary insurance
Hand splint (for post-care physiotherapy in the case of hand problems that require specialist treatment - for eligibility conditions: see art. 19.2 on p. 55 of the policy conditions)	-	Maximum of €40.00 per cy for 1 finger or small thumb splint Maximum of €60.00 per cy for 1 wrist, hand or large thumb splint Maximum of €90.00 per cy for 1 dynamic or static splint	Maximum of €40.00 per cy for 1 finger or small thumb splint Maximum of €60.00 per cy for 1 wrist, hand or large thumb splint Maximum of €90.00 per cy for a dynamic or static splint
Headwear for oncology (scarf, hat, peaked cap, bandana or Touppim (headband wig))	-	-	Max €150.00 per cy (purchased from a specialist supplier recognised by us)
Medical devices (certain medical devices must be approved by us in advance, and are subject to a max reimbursement or statutory personal contribution)	Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-

Medical devices (cont'd)	OZF Zorgpolis Basic insurance	AV Compact Supplementary insurance	AV Royaal Supplementary insurance
Personal alert system required for medical reasons (for conditions: see art. 19.4 on p. 55 of the policy conditions)	In accordance with the Medical Devices Regulations (Reglement Hulpmiddelen) (see ozf.nl)	Personal alarm system (subscription fees) Contracted: 100% Non-contracted: max €60.00 per cy, if approved by us in advance	Personal alarm system (subscription fees) Contracted: 100% Non-contracted: max €60.00 per cy, if approved by us in advance
Adhesive strips for breast prosthesis (after mastectomy)	-	100%	100%
Bedwetting alarm, purchase or rental costs (for bedwetting problems)	-	Max €100.00 for the duration of the supplementary insurance	Max €100.00 for the duration of the supplementary insurance
Wig - personal contribution	In accordance with the Medical Devices Regulations (Reglement Hulpmiddelen) (see ozf.nl): max €431.00 per wig	-	Wig - personal contribution Max €200.00 per cy (in addition to OZF Zorgpolis reimbursement)
Sports or ice pack brace	-	Max €50.00 for max 1 sports or ice pack brace per cy	Max €50.00 for max 1 sports or ice pack brace per cy
Support pessary (to prevent/relieve bladder or uterine prolapse)	-	-	100% (supplied by (a pharmacy to which you are referred by) your general practitioner)
Incontinence therapy, equipment hire (referral required)	-	Contracted: 100% Non-contracted: -	Contracted: 100% Non-contracted: -
Self-help programme IncoCure (for female insured persons who suffer from incontinence)	-	Max €15.00 per cy for the IncoCure online self-help programme, see: incocure.com	Max €15.00 per cy for the IncoCure online self-help programme, see: incocure.com

Medicines and dietary preparations	OZF Zorgpolis Basic insurance	AV Compact Supplementary insurance	AV Royaal Supplementary insurance
Contraceptives • Up to 21 • 21 or older (for conditions and what we do not reimburse under AV Compact and AV Royaal: see art. 20.3 on p. 57 of the policy conditions)	Contracted: 100% up to the GVS limit Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers) Only in the case of medically diagnosed endometriosis or menorrhagia (abnormally heavy menstrual periods). Contracted: 100% up to GVS limit Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	- Contracted: 100% up to the GVS limit Non-contracted: -	- Contracted: 100% up to the GVS limit Non-contracted: -
Medicines and dietary preparations (for conditions and what we do not reimburse: see art. 6 on pp. 24 and 25 of the policy conditions)	In accordance with the Pharmaceutical Care Regulations (Reglement Farmaceutische Zorg) (see ozf.nl) Contracted: 100% up to GVS limit Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-
Melatonin (for conditions: see art. 20.2 on p. 57 of the policy conditions)	-	-	If supplied by the eFarma online pharmacy: 100% If supplied by another contracted pharmacy: max €100.00 per cy Non-contracted: -
Statutory personal contribution (GVS upper-limit price)	-	-	Max €250.00 per cy

Oral health care and dentistry (dental care) (cont'd)	OZF Zorgpolis Basic insurance	Supplementary insurance Tand Compact	Supplementary insurance Tand Royaal
Dental care in exceptional cases (for conditions: see art. 13 on p. 28 of the policy conditions)	100% In the case of a non-contracted dental surgeon: max 75% of the average tariff we pay for this care (provided by contracted care providers) (in some cases a statutory personal contribution applies for insured persons aged 18 or older)	-	-
Dental care - Crowns, bridges, inlays and implants (for conditions and what we do not reimburse: see art. 55 on p. 66 of the policy conditions)	-	-	80% up to max €750.00 per cy
Dental care - orthodontics (braces) up to 22 (for conditions and what we do not reimburse: see art. 56 on p. 66 of the policy conditions)	-	-	80% up to max €2,000.00 for the duration of the supplementary insurance up to 22
Dental care for insured persons with a handicap (for conditions: see art. 12 on p. 28 of the policy conditions)	100% unless there is entitlement to reimbursement under the Dutch Long-term Care Act (Wlz) In the case of a non-contracted dental surgeon: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-

Eyes and ears	OZF Zorgpolis Basic insurance	AV Compact Supplementary insurance	AV Royaal Supplementary insurance
Audiology centre	Hearing problems Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers) Speech and language disorders in children Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-
Spectacles and/or contact lenses (prescription and supplied by an optician or optical retailer)	Only for specific medical eye conditions in accordance with the Medical Devices Regulations (Reglement Hulpmiddelen) (see ozf.nl)	Max €100.00 per 2 cy	Max €200.00 per 2 cy
Hearing aid - Personal contribution	Up to 18 Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted suppliers). 18 or older: a statutory personal contribution of 25% applies Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted suppliers).	-	- 18 or older: Contracted: 100% of the statutory personal contribution payable under OZF Zorgpolis Non-contracted: per hearing aid max €100.00 of the statutory personal contribution payable under OZF Zorgpolis

Eyes and ears (cont'd)

	OZF Zorgpolis Basic insurance	AV Compact Supplementary insurance	AV Royaal Supplementary insurance
Refractive eye surgery or lens implantation (for conditions: see art. 22 on p. 57 of the policy conditions) Please note! Newly insured persons are put on a 12-month waiting list.	Refractive surgery: no reimbursement Lens implantation: for monofocal lens, after receiving our permission in advance: Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	Refractive eye surgery or lens implantation: max € 500.00 per eye for the duration of the supplementary insurance (in the case of lens implantation we reimburse the additional costs of a lens other than a monofocal (standard) intraocular lens, following reimbursement of cataract surgery under OZF Zorgpolis)
Sensory impairment care (for which impairments and conditions: see art. 15 on p. 29 of the policy conditions)	Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-

Tip! Want to get a hearing aid faster and pay less for it? Here's how.

Are you using one of our contracted hearing aid specialists? Then you do not need to first see a general practitioner and an ear, nose and throat specialist. Our contracted hearing aid specialists are qualified to assess your hearing. If necessary, the hearing aid specialist will refer you to an ENT doctor or an Audiology Centre. Our contracted hearing aid specialists always supply quality hearing aids. In 2018 our contracted hearing aid specialists are Beter Horen and Hans Anders. You can find a lot of information at ozf.nl/hoortoestel.

Use our Medical Provider Search Tool (ozf.nl/zorgzoeker) to find your nearest contracted hearing aid specialist.

Preventive healthcare	OZF Zorgpolis Basic insurance	AV Compact Supplementary insurance	AV Royaal Supplementary insurance
FysioRunning coaching programme (to register and complete the screening questionnaire, go to fysiorunning.nl)	-	1 FysioRunning online coaching programme per cy	1 FysioRunning online coaching programme per cy
Consultations, vaccinations and medication required for foreign travel (if necessary according to the advice of the National Coordination Centre for Travel Health Advice (Landelijk Coördinatiecentrum Reizigersadviesing (LCR)): see lcr.nl/landen)	-	Contracted: 100% Non-contracted: max €75.00 per cy	Contracted: 100% Non-contracted: max €100.00 per cy
Course designed to reduce alcohol consumption	-	Max €300.00 per cy	Max €300.00 per cy
Flu vaccinations	-	-	100% (not provided by the national vaccination programme)
Health Check (a preventive health examination)	-	1 Health Check per cy, performed by a Care for Human nurse (to make an appointment go to careforhuman.nl)	1 Health Check per cy, performed by a Care for Human nurse (to make an appointment go to careforhuman.nl)
Coping with heart problems	-	Max €100.00 per course per cy (for where the course must take place: see art. 29 on p. 59 of the policy conditions)	Max €100.00 per course per cy (for where the course must take place: see art. 29 on p. 59 of the policy conditions)
Lymphoedema, awareness and/or self-management course	-	Max €100.00 per course per cy (for where the course must take place: see art. 29 on p. 59 of the policy conditions)	Max €100.00 per course per cy (for where the course must take place: see art. 29 on p. 59 of the policy conditions)
Coping with rheumatoid arthritis, osteoarthritis or ankylosing spondylitis (Bechterew's disease)	-	Max €100.00 per course per cy (for where the course must take place: see art. 29 on p. 59 of the policy conditions)	Max €100.00 per course per cy (for where the course must take place: see art. 29 on p. 59 of the policy conditions)

Preventive healthcare (cont'd)	OZF Zorgpolis Basic insurance	AV Compact Supplementary insurance	AV Royaal Supplementary insurance
Type 2 diabetics, basic or follow-up educational course	-	Max €100.00 per course per cy (for where the course must take place: see art. 29 on p. 59 of the policy conditions)	Max €100.00 per course per cy (for where the course must take place: see art. 29 on p. 59 of the policy conditions)
Weight loss course	-	Max €100.00 per course per cy (for where the course must take place: see art. 29 on p. 59 of the policy conditions)	Max €100.00 per course per cy (for where the course must take place: see art. 29 on p. 59 of the policy conditions)
Basic resuscitation/AED course	-	Max €100.00 per course per cy (for where the course must take place: see art. 29 on p. 59 of the policy conditions)	Max €100.00 per course per cy (for where the course must take place: see art. 29 on p. 59 of the policy conditions)
First aid course	-	Max €100.00 per course per cy (for where the course must take place: see art. 29 on p. 59 of the policy conditions)	Max €100.00 per course per cy (for where the course must take place: see art. 29 on p. 59 of the policy conditions)
Baby and child first aid course	-	Max €100.00 per course per cy (for where the course must take place: see art. 29 on p. 59 of the policy conditions)	Max €100.00 per course per cy (for where the course must take place: see art. 29 on p. 59 of the policy conditions)
'Slaapcoach' online sleep improvement course or a 'You can learn to sleep' course.	-	Max €150.00 per cy (for where the course must take place: see art. 30 on p. 59 of the policy conditions)	Max €150.00 per cy (for where the course must take place: see art. 30 on p. 59 of the policy conditions)
'Lekker in je vel' (a course on feeling good about your body)	-	Max €100.00 per course per cy (for where the course must take place: see art. 29 on p. 59 of the policy conditions)	Max €100.00 per course per cy (for where the course must take place: see art. 29 on p. 59 of the policy conditions)
A course on self-respect for kids	-	Max €100.00 per course per cy (for where the course must take place: see art. 29 on p. 59 of the policy conditions)	Max €100.00 per course per cy (for where the course must take place: see art. 29 on p. 59 of the policy conditions)
'Meer Bewegen voor Ouderen' (a programme on more exercise for the elderly)	-	Max €100.00 per course per cy (for where the course must take place: see art. 29 on p. 59 of the policy conditions)	Max €100.00 per course per cy (for where the course must take place: see art. 29 on p. 59 of the policy conditions)
Fall prevention course ('In Balans' or 'Vallen Verleden Tijd')	-	Max €100.00 per course per cy (for where the course must take place: see art. 29 on p. 59 of the policy conditions)	Max €100.00 per course per cy (for where the course must take place: see art. 29 on p. 59 of the policy conditions)
Stop smoking programme (max 1x per cy - for conditions: see art. 40 on p. 41 of the policy conditions)	Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-
'Afvalen en Afblijven' diet and exercise programme (for conditions: see art. 31 on p. 59 of the policy conditions)	-	Max €250.00 per cy	Max €250.00 per cy
Intestinal cancer screening self-test (50 or older)	-	-	Max €25.00 per cy for the iFOBT test

Psychological care	OZF Zorgpolis Basic insurance	AV Compact Supplementary insurance	AV Royaal Supplementary insurance
Counselling (a short-term form of individual psychosocial support)	-	Max €300.00 per cy (counsellor must be affiliated with the General Professional Association for Counselling (Algemene Beroepsvereniging voor Counselling (ABvC))	Max €300.00 per cy (counsellor must be affiliated with the General Professional Association for Counselling (Algemene Beroepsvereniging voor Counselling (ABvC))
General Basic GGZ 18 or older (for conditions and what we do not reimburse: see art. 16 on p. 30 of the policy conditions)	Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-
Mindfulness training	-	Max €250.00 per cy (trainer must be affiliated with the Community of Mindfulness-Based Trainers in the Netherlands and Flanders (Vereniging Mindfulness Based trainers in Nederland en Vlaanderen (VMBN), see vmbn.nl)	Max €250.00 per cy (trainer must be affiliated with the Community of Mindfulness-Based Trainers in the Netherlands and Flanders (Vereniging Mindfulness Based trainers in Nederland en Vlaanderen (VMBN), see vmbn.nl)
Non-clinical specialist GGZ (secondary mental health care) 18 or older (for conditions and what we do not reimburse: see art 17 on p. 30 of the policy conditions)	Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-
Psychiatric hospital stay 18 or older (for conditions and what we do not reimburse: see art. 18 on pp. 30 and 31 of the policy conditions)	Max 1,095 days Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-

Speech and reading	OZF Zorgpolis Basic insurance	AV Compact Supplementary insurance	AV Royaal Supplementary insurance
Speech therapy (for conditions and what we do not reimburse: see art. 19 on p. 31 of the policy conditions)	Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-
Stutter therapy by a speech therapist	Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-
Stutter therapy method taught at the Del Ferro or Hausdörfer Institute, the BOMA method or the McGuire programme	-	Max €225.00 for the duration of the supplementary insurance (referral from a general practitioner, medical specialist or dentist required)	Max €500.00 for the duration of the supplementary insurance (referral from a general practitioner, medical specialist or dentist required)

Transport	OZF Zorgpolis Basic insurance	AV Compact Supplementary insurance	AV Royaal Supplementary insurance
Ambulance transport (for entitlements and conditions: see art. 20.1, on p. 32 of the policy conditions)	100%	-	-
Family member transport in the case of a hospital stay (transport costs during a (psychiatric or rehabilitation) hospital stay in the Netherlands)	-	-	€0.30 per km, irrespective of the method of transport and max of 3 visits per calendar week for all family members combined First 80 km per visit date at own expense (family member has our AV Royaal insurance)

Transport (cont'd)	OZF Zorgpolis Basic insurance	AV Compact Supplementary insurance	AV Royaal Supplementary insurance
Overnight guest house accommodation during an outpatient treatment cycle	-	Max €35.00 per night (overnight stay prior to the first tr. day is not included)	Max €35.00 per night (overnight stay prior to the first tr. day is not included)
Family member guest house accommodation and transport in the case of a hospital stay in the Netherlands, Belgium or Germany (for conditions: see art. 36.3 on p. 61 of the policy conditions)	-	Max €35.00 per night and €0.30 per km up to max €500.00 per calendar year for accommodation and/or transport costs for all family members combined	Max €35.00 per night and €0.30 per km up to max €500.00 per calendar year for accommodation and/or transport costs for all family members combined
<p>Patient transport by public transport, own transport or (multi-person) taxi (up to 200 km one way)</p> <p>Call our Transport Telephone Line (Vervoerslijn) on 071 365 4 154 for permission in advance: Lines are open from 08:00 to 18:00 on working days.</p>	<p>For the following medical indications:</p> <ul style="list-style-type: none"> • Kidney dialysis • Oncology tr. with radio-, chemo- or immunotherapy • Visual handicap (and inability to travel unescorted) • Wheelchair dependence • Intensive childcare up to 18 <p>Own transport: €0.30 per km Public transport: 100% (lowest class) Contracted taxi service: 100% Non-contracted taxi service: max 75% of the average tariff we pay for this service (provided by contracted taxi services).</p> <p>Statutory personal contributions; €101.00 per cy</p>	-	-

Hospital, treatment and stay	OZF Zorgpolis Basic insurance	AV Compact Supplementary insurance	AV Royaal Supplementary insurance
Asthma Centre in Davos (Switzerland) (for conditions: see art. 21 on p. 33 of the policy conditions)	100%, after receiving our written permission in advance	-	-
Primary care stay (for conditions, number of days of stay, and what we do not reimburse: see art. 22 on p. 33 of the policy conditions)	Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-
Genetic research and advice (referral from your doctor, obstetrician or midwife required)	Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-
Mammaprint diagnostic breast cancer test	-	100% if the test is performed by the Agendia laboratory	100% if the test is performed by the Agendia laboratory
Mechanical respiration (referral from a lung specialist required)	Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-
Specialist medical care and stay, max 1,095 days (for conditions and what we do not reimburse: see art. 25 on p. 34 of the policy conditions)	Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-
Plastic surgery (for which treatments we reimburse, conditions and what we do not reimburse: see art. 26 on p. 34 of the policy conditions)	Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-

Hospital, treatment and stay (cont'd)	OZF Zorgpolis Basic insurance	AV Compact Supplementary insurance	AV Royaal Supplementary insurance
Cosmetic surgery	-	Ear repositioning (up to 18) Contracted: 100% Non-contracted: -	Ear repositioning (up to 18) Contracted: 100% Non-contracted: -
Rehabilitation (for conditions: see art. 27.1 for specialist medical rehabilitation and art. 27.2 for geriatric rehabilitation on pp. 35 and 36 of the policy conditions)	Specialist medical rehabilitation (max 1,095 days) Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers) Geriatric rehabilitation (max 6 months) Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-
Second opinion (for conditions and what we do not reimburse: see art. 28 on p. 36 of the policy conditions)	Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-
Sterilisation (reversal surgery is not reimbursed)	-	-	100% for male circumcision performed by a suitably qualified general practitioner 100% at a contracted hospital or ZBC Non-contracted: -
Home dialysis	100% if approved in advance by us	-	-
Transplantation of organs and tissues (for entitlement: see art. 30 on pp. 36 and 37 of the policy conditions)	At a hospital or ZBC Contracted: 100% Non-contracted: if approved in advance by us: max 75% of the average tariff we pay for this care (provided by contracted care providers) Donor care: max 13 weeks Liver transplant: max 6 months	-	-
Nursing and care in your own surroundings (extramural) (for conditions (also for a Personal Care Allowance) and what we do not reimburse: see art. 31 on pp. 37 and 38 of the policy conditions)	Contracted: 100% Non-contracted: if approved in advance by us: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-
2nd Doctor Online: online advice on your diagnosis and/or treatment (for conditions: see art. 40 on p. 61 of the policy conditions)	-	100%	100%

Pregnancy/baby/child	OZF Zorgpolis Basic insurance	AV Compact Supplementary insurance	AV Royaal Supplementary insurance
Maternity care related to adoption (for children under 12 months) <i>or</i> Medical screening related to adoption (for conditions and what we do not reimburse: see art. 41 on p. 62 of the policy conditions)	-	Contracted: max 10 hours Non-contracted: - <i>or</i> Max €300.00 per adopted child	Contracted: max 10 hours Non-contracted: - <i>or</i> Max €300.00 per adopted child

Pregnancy/baby/child (cont'd)	OZF Zorgpolis Basic insurance	AV Compact Supplementary insurance	AV Royaal Supplementary insurance
Delivery and obstetric or midwifery care with a medical indication	Clinical and outpatient Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-
Delivery and obstetric or midwifery care without a medical indication - Personal contribution	<p>At home Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)</p> <p>At a hospital, maternity or birth centre Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)</p> <p>Statutory personal contribution of €17.00 per day of stay plus anything over €122.50 charged by the hospital</p>	-	-
Oocyte vitrification(for conditions and what we do not reimburse: see art. 33.4 on pp. 39 and 40 of the policy conditions)	At an authorised hospital Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-
IVF up to 43 (for conditions, reimbursement of medicines and what we do not reimburse: see art. 33.1 on pp. 38 and 39 of the policy conditions)	First 3 attempts per potential pregnancy Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-
Maternity package (for female insured persons)	-	100% (must be requested through ozf.nl/zwanger no later than 2 months prior to the delivery date)	100% (must be requested through ozf.nl/zwanger no later than 2 months prior to the delivery date)
Maternity care at a hospital with a medical indication	Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-
Maternity care at a hospital without a medical indication	Max 10 days Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers) Statutory personal contribution of €17.00 per day of stay plus anything over €122.50 charged by the hospital	-	-
Maternity care at home or at a birth or maternity centre - Personal contribution (number of hours of maternity care stipulated by the National Maternity Care Protocol Guidelines(Landelijk Indicatieprotocol Kraamzorg), to be found at ozf.nl)	Max 10 days Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers) Statutory personal contribution of €4.30 per hour	100% of the statutory personal contribution payable under OZF Zorgpolis, max 24 hours per pregnancy	100% of the statutory personal contribution payable under OZF Zorgpolis
Lactation care (breastfeeding advice and assistance - for conditions: see art. 44 on p. 63 of the policy conditions)	-	-	Max €115.00 per cy (consultant must be affiliated with the Dutch Association of Lactation Experts (Nederlandse Vereniging van Lactatiekundigen (NVL)) or employed by a contracted maternity centre)

Pregnancy/baby/child (cont'd)	OZF Zorgpolis Basic insurance	AV Compact Supplementary insurance	AV Ryaal Supplementary insurance
Oncological examination of children (by SKION)	100%	-	-
Assistance during childbirth	Contracted maternity centre: 100% Non-contracted maternity centre: max 75% of the the average tariff we pay for this care (provided by contracted care providers)	-	-
Prenatal screening <ul style="list-style-type: none"> • Combined test: (referral required) • Counselling • Structural Echoscopic Examination (SEO) • Non-Invasive Prenatal Testing (NIPT) (with a medical indication or positive combined test) • Invasive diagnostics (with a medical indication, positive combined test or positive non-invasive prenatal test) 	Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-
Sperm cryopreservation (for conditions: see art. 33.3 on p. 39 of the policy conditions)	Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-
TENS during delivery (for female insured persons)	-	Contracted: 1x for the duration of the supplementary insurance Non-contracted: -	Contracted: 1x for the duration of the supplementary insurance Non-contracted: -
Maternity care postponed due to medical necessity (maternity care provided from the 11 th day after the birth onwards)	-	-	Contracted: max €300.00 Non-contracted: -
Maternity care extended due to medical necessity (10 th day onwards)	-	-	Contracted: max €200.00 per day, max 5 days Non-contracted: -
Fertility-enhancing treatments, other than IVF, up to 43 (for conditions for reimbursement of medicines: see art. 33.2 on p. 39 of the policy conditions)	Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers) Reimbursement of medicines according to GVS	-	-
Self-help programme "Slimmer Zwanger" pregnancy self-help programme	-	1 subscription lasting 26 weeks for the duration of the supplementary insurance	1 subscription lasting 26 weeks for the duration of the supplementary insurance
Antenatal classes, yoga or gymnastics (for conditions: see art. 48 on p. 63 of the policy conditions)	-	Max €50.00 per pregnancy (for female insured persons)	Max €75.00 per pregnancy (for female insured persons)

Other medical care	OZF Zorgpolis Basic insurance	AV Compact Supplementary insurance	AV Royaal Supplementary insurance
Dietetic therapy (for conditions and what we do not reimburse: see art. 37 on p. 40 of the policy conditions and art. 49.1 on p. 64 of the policy conditions)	Dietetic therapy by a dietitian: max 3 hours per cy Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	Dietetic therapy by a dietitian: max 2 hours, in addition to OZF Zorgpolis reimbursement Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)
Hospice (in the Netherlands, does not apply for the personal contribution payable under the Dutch Long-term Care Act (Wet langdurige zorg (Wlz))	-	-	Maximum of €40.00 per night
General practitioner care	Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-
Integrated care (for diabetes mellitus type 2 (18 or older), COPD, asthma and/or VRM)	100%, if we have entered into agreements with a care group: see ozf.nl	-	-
Membership of a patient association (for which patient associations we reimburse: see art. 51 on p 64 of the policy conditions)	-	-	Max €25.00 per cy
Support for informal caregivers and recipients (for conditions and what we do not reimburse: see art. 52 on pp. 64 and 65 of the policy conditions)	-	Max €750.00 per cy	Max €1,000.00 per cy
Therapeutic holiday camp for handicapped persons	-	-	Max €150.00 per cy
Therapeutic holiday camp for children (for the holiday camps for which we provide reimbursement: see art. 53.1, on p. 65 of the policy conditions)	-	-	Max €150.00 per cy (up to 18)
Thrombosis service (referral from a general practitioner, a geriatric specialist, a doctor who specialises in treating the mentally handicapped, or a medical specialist required)	Contracted: 100% Non-contracted: max 75% of the average tariff we pay for this care (provided by contracted care providers)	-	-
Nutrition education by a weight management consultant or (sports) nutritionist (for conditions and what we do not reimburse: see art. 49.2 on p. 64 of the policy conditions)	-	Max €120.00 per cy	Max €120.00 per cy



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We are a relatively small health insurer. Our team of 30 staff provide dedicated and caring assistance for our customers. We make personal attention and customer friendliness a priority. We are a non-profit organisation. As well as providing personal insurance, we also provide group health insurance for a large number of companies. We are based in Hengelo in the Netherlands and operate nationally.



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