

TURIEN & CO

A S S U R A D E U R E N

LIC Health Plan

Policy conditions 2009

Article 1

DEFINITION OF TERMS

NB Depending on your chosen cover, it is possible that not all the definitions in this article will appear in your policy conditions.

Supplementary home nursing

The supplementary home nursing carried out by a nurse or auxiliary nurse at the home of the insured.

Advisory dentist

The dentist who advises Turien & Co. Assuradeuren on questions of dentistry.

Dispensing chemist

The organizational instance which is run by the pharmacist, which is recognizable as such by the patient, and which is accessible, and satisfies the Dutch norm for dispensing chemists.

Pharmacist

A pharmacist which is registered according to the conditions as meant in article 3 of the BIG Act (Beroepen in de Individuele Gezondheidszorg or Professions in the Individual Healthcare Industry) and is included in the register of the established pharmacists according to article 14 of the WOG Act (Wet op de Geneesmiddelen Voorziening or Supply of Medicines Act), controlled by the Inspector of Public Health and is included in the KNMP register (Koninklijke Nederlandse Maatschappij ter bevordering der Pharmacie or Royal Dutch Association for the Advancement of Pharmacy) for public pharmacists or a similar register.

Dispensing GP (General Practitioner)

A GP who is qualified to prepare medicines according to the WOG Act.

Doctor

A person who is registered as such in the register as meant in article 3 of the BIG Act.

AWBZ or General Law of Special Health Costs

The General Law of Special Health Costs (AWBZ) aims to insure the whole Dutch population against the risk of special healthcare costs. This healthcare is not paid for out of the general healthcare policy.

Professional Associations of Alternative Medicines

Doctors or therapists who are registered with the following professional associations may be compensated if your chosen supplementary cover permits this:

ABNG: Doctors' Association for the Advancement of Naturopathy; BATC: Professional Association for Therapists & Consumers; BvK: Professional Association for Kinesiology; FAGT: Federation for Additive Medicine; LVNG: National Association of Natural Medicine; MBOG: Society for the Advancement of Orthomolecular Medicine; NAAV: Dutch Association of Acupuncture Doctors; NBVH: Dutch Professional Association of Hypnotherapists; NGVH: Dutch Guild of Hypnotherapists; NOKH: Dutch Organization of Classical Homeopaths; NVA: Dutch Association for Acupuncture; NVAA: Dutch Association of Anthroposophical Doctors; NVKH: Dutch Association of Classical Homeopaths; NVKToag: Dutch Association for Art Therapies on an anthroposophical basis; NVNR: Dutch Association for Neural and Regulation therapy; NVPITea: Dutch Association for Postural Integration; NVPMKT: Dutch Association for Psychometric Children's therapy; NVST: Dutch Association for Soma therapists; NWM: Dutch Association for Mesology; NWP: Dutch Workgroup for Practitioners in Natural Medicine; RCN: Register for Cranial-Sacral Therapy in the Netherlands; MOMG: Register for Orthomanual Medicine; VAG: Association of Additive Healers; VBAG: Association for the Advancement of Alternative Medicine; VBN: Association Naturally Better; VHAN: Association of doctors for Homeopathy; VGP: Association of Psychosofian Healers; VIS: Association for IOKAI Shiatsu therapists; VIT: Association of Integral Therapists; VMT: Association of Manual Therapists; VNT: Association of Naturopathic Therapists; VNRT: Association of Dutch Reflexology Therapists; VVH: Association of Haptic Therapists; ZHONG: Dutch Association for Traditional Chinese Medicine.

Resolution for Healthcare

The resolution of 28 June 2005 of the decree of the general regulation as meant in the articles 11, 20, 22, 32, 34 and 89 of the Healthcare Act.

Abroad

Every other country than the country of residence.

Incubator aftercare

Aftercare by specialized neonatal nurses for parents of incubator babies whereby support and advice is offered by the care and the contact with the newborn baby in the home situation. Incubator care includes no household support.

Diagnostic Treatment Combination (DBC)

The complete course of treatment, as typified in the Tariffs of the Health Sector law, of all the procedures carried out by the healthcare establishment and medical specialists arising from the health problem for which the patient has consulted the medical specialist in the healthcare establishment.

Dietary advice

Information which dietitians offer, with a medical aim, concerning feeding and eating habits.

Dietician

A dietician on the grounds of article 2 of the resolution concerning dietitians, occupational therapists, speech therapists, dental hygienists, practise therapists, orthoptists, and podiatrists.

Frontline psychologist

A psychologist who is included in the register of frontline psychologists of the Dutch Institute of Psychologists (NIP).

Own contribution

The own contribution in the costs of provisions which the insured incurs on the grounds of the Healthcare Act and/or AWBZ and if the maximum cover in the policy conditions has been exceeded.

Pharmaceutical assistance

Pharmaceutical assistance comprises:

1. Registered medicines which may be provided on the grounds of the Medical Provisions Act;
2. Other medicines which may be provided on the grounds of the Medical Provisions Act;
3. Blood products and products prepared from blood as meant in the Blood Transfusion Act;
4. Polymer, oligomer, monomer and modular dietary products;
5. Bandaging.

Physiotherapist

A physiotherapist established in the Netherlands who is registered as such with a governmental organization.

Medicines

Medicines as meant in article 2.8 first paragraph under a and b of the Healthcare accord.

Authorized agent

Turien & Co Assuradeuren act as the authorized agent for the insurer. Turien & Co. Assuradeuren are responsible for the implementation of the insurance contract on the basis of the policy conditions.

Family

Two married people or two people who live together permanently and run their household together, as well as their unmarried own children or step-children, foster children and adopted children.

GGD

The Local Healthcare Authority.

Convalescent home

A non-ABWZ centre offering assistance to people who, after a physical illness and/or the medical treatment thereby associated, require temporary care, assistance and nursing for 24 hours a day. The assistance is aimed at the return of the insured to his/her independent functioning in the home situation.

Homeopathic and anthroposophical medicines

Substances which comply with the Resolution governing homeopathic pharmaceutical products, and registered as homeopathic and/or anthroposophical medicines.

Basic insurance

The healthcare insurance contract based on the Healthcare Insurance law, the Resolution Healthcare insurance with the Healthcare order associated thereby, and including the accompanying explanatory notes.

Skin therapist

Someone who has studied the subject to Bachelor of Arts level and works professionally in the first and/or second line of the healthcare sector treating patients with disease or damage to the skin.

General Practitioner (GP)

A doctor established in the Netherlands, registered as GP on the Register of Certified General Practitioners of the Royal Dutch Society for the Advancement of Medicine and who runs a general practice in the expected manner.

Medical aids

Medical aids comprise those medical aids which are included in the Healthcare Medical Aids Resolution.

Maternity care

The care provided by a (student) maternity care assistant who is associated with a maternity care centre, whereby care for mother and child and help with the housework is offered at the home of the insured.

Maternity care bureau

An establishment for the provision of maternity care by qualified maternity care assistants.

Maternity care hotel

An establishment recognized by a maternity care bureau which provides 24 hour care for birthing and aftercare.

Maternity care protocol

The National Indication protocol for maternity care which came into force in 2006 and which sets out the amount of hours which may be agreed between the maternity care provider and the insured on the basis of the family and medical situation.

Health resort

An establishment in which a structured course of health treatments is offered under the guidance of (para)medics.

Lactation consultant

A lactation consultant holding the international diploma International Board Certified Lactation Consultant (IBCLC), and who is registered with the Dutch Association of Lactation Consultants (NVL).

Authorization

A written agreement for the provision of certain care which is provided by or through the healthcare provider to the insured, issued prior to the provision of that treatment.

Medical advisor

The doctor who advises Turien & Co. Assuradeuren on medical matters.

Medical indication

The indication for nursing, tests and treatment according to the generally established medical and scientific grounds.

Medical need

The need for nursing, tests and treatment according to generally established medical and scientific grounds.

Medical specialist

A doctor who is registered on one of the registers established by the Medical Specialists Registration Committee of the Royal Dutch Society for the Advancement of Medicine.

Dental hygienist

A dental hygienist established in the Netherlands who complies with the obligations as stated in the Decision governing dietitians, occupational therapists, speech therapists, dental hygienists, practice therapists, orthoptists, and podiatrists.

Cesar or Mensendieck practice therapist

A Cesar or Mensendieck practice therapist established in the Netherlands who is registered as such by the authorized government department.

Accident

A sudden and direct effect from violence from an external source, through which physical injury is caused and of which the nature and place of injury can be medically determined by Turien & Co. Assuradeuren.

Orthodontist

A dentist established in the Netherlands who is registered on the register of dentomaxillary orthopaedic specialists of the Dutch Society for the Advancement of Dentistry.

Menopause consultant

A nurse who has followed a specialist course in menopause consultancy given by the organization Care for Women, or who is affiliated to the Women's Life menopause practice.

Register of personal data

The related collection of personal details of different people which is handled digitally for reasons of effective consultation of those details, and which is systematically organized.

Podiatry

The medically aimed maintenance and improvement of the function of the feet by means of the application of corrective and protective techniques, the external combat of skin conditions present on the feet and the prevention and correction of nail abnormalities, with the exclusion of treatments which may be carried out by a pedicurist.

Psychotherapist

A psychotherapist who is registered and established in the Netherlands according to the BIG Act.

Repatriation

The medically necessary invalid transport from the accommodation abroad back to the Netherlands, in as far as the stay abroad is for the purpose of holiday, business trip or study.

Rehabilitation

A stay outside the hospital in a person's own (home) environment, taking part in treatment in preparation for imminent discharge from hospital.

Specialist

A doctor established in the Netherlands, who is registered on the register of specialists of the Royal Dutch Society for the Advancement of Medicine.

Specialist treatment

Treatment or tests according to the norms generally accepted and applicable to the specialty for which the specialist is registered.

Dentist

A dentist established in the Netherlands who is registered as such by the authorized government department.

Dental technician

A dental technician established in the Netherlands who has trained according to obligations and specialist area of dental prosthetics.

Use of personal details

Every transaction or complete series of transactions to do with personal details, including the following: collecting, recording, sorting, storing, updating, modifying, retrieving, consulting, using, supplying by means of passing on, distribution or any other form of making available, putting together, forming a connection with each other, as well as protection, erasure or destruction of details.

Insurer

The insurance company named in the policy.

Insured

The person for whom the insurance contract has been implemented and who is registered as such in the administration of Turien & Co. Assuradeuren.

Policyholder

Whosoever has taken out the insurance contract with Turien & Co. Assuradeuren.

Insurance year

The period as stated on the policy sheet and the twelve months following thereafter, or after renewal of the insurance the twelve months following thereafter.

Waiting list mediation

The right to mediation for hospital treatment by a healthcare provider which may provide the necessary healthcare, if there is a situation of an unreasonably long waiting list.

BIG Act

The Individual Healthcare Professionals Act.

WMG

WMG stands for the Wet Marktordening Gezondheidszorg or Market-driven Healthcare Act. The WMG replaces the WTG. The WMG regulates the performance and tariffs of the healthcare providers. Performance and tariffs which were controlled by the WTG are also controlled by the WMG. The WMG also regulates the control of all healthcare markets (healthcare insurance, the buying in of healthcare and healthcare provision), the provision of these markets and the forms and procedures in the healthcare industry.

Independent treatment centre

A treatment centre situated within the Netherlands with which the insurer has contracted certain treatments and in which – if and in as far as medically necessary – out-patient non-specialist treatment is provided.

Hospital

An institution situated in the Netherlands for nursing, tests and treatment of illnesses and which is known to be such by the authorized government department. As well as the general hospitals, the following are also regarded as hospitals: academic hospitals, children's hospitals, orthopaedic hospitals, maternity clinics, cancer clinics, arthritis clinics, epilepsy clinics, neurological clinics, asthma clinics, rehabilitation institutes as well as the Dutch Asthma Centre in Davos, sanatoria and respiration centres for polio patients.

Hospital nursing treatment

The admission and further stay of longer than 24 hours in a hospital, if and as long as the nursing, tests and treatment required can only be offered in a hospital on medical grounds, and while uninterrupted treatment by a specialist and/or oral surgeon must be medically necessary.

Invalid transport

Transport for medical reasons of the insured themselves in the Netherlands in connection with medical treatment for the benefit of the insured, as long as the costs of this treatment are wholly or partly for the account of Turien & Co. Assuradeuren.

Healthcare provider

A healthcare assistant or institute established in the Netherlands which offers care as described in the cover.

Article 2

GENERAL

Information

Besides the basic insurance, Turien & Co. Assuradeuren offer a number of supplementary insurances. You may choose from the Primair Policy, the Prima Policy or the Privilege Policy.

You will find the different packages set out next to each other in these conditions so that you can easily compare the different compensation and/or treatments.

All compensation is valid per calendar year, unless stated otherwise in the conditions.

Changing your package

Would you like to change your healthcare package? This can only occur as from 1 January of a new calendar year. Notification of such changes must be given by 31 January.

If you would like to add a new supplementary cover to your package, this is possible from the first day of the month following the date of your application. For certain packages a medical selection is necessary.

How to claim your health costs

You may claim your health costs by completing a Turien & Co. Assuradeuren claim form and sending this in to us together with the original invoice(s). Don't forget to make a photocopy of the invoice(s) for your own accounts. We advise you not to wait too long before sending in your invoice(s), and at least within 12 months of the date of the treatment provided on the invoice, otherwise the invoice(s) will no longer be valid for compensation. Compensation of any invoices which may be valid for compensation will be made to the account number (not a savings account) known to us.

Basis of the insurance

Obligation of notification

Turien & Co. Assuradeuren must be able to assess a risk before that risk can be insured. If Turien & Co. Assuradeuren decide to wish to insure a risk, then Turien & Co. Assuradeuren will want to do this against suitable premium and conditions. In order to assess a risk, Turien & Co. Assuradeuren do this with the available information as provided by the insured. The insured is therefore obliged to notify the insurer fully of all relevant information. This regulation is compulsory for private individuals.

Article 7:928 paragraph 1 New Insurance Rights

The policyholder is obliged, before completing a contract with Turien & Co. Assuradeuren, to provide all relevant facts which are known to the policyholder and which apply to the policyholder which may affect the conditions of the insurance to Turien & Co. Assuradeuren.

The insurance will therefore only be completed on the grounds of a fully and truthfully completed application form together with any other relevant information. By taking out an insurance policy, the policyholder takes full responsibility for the information provided on the application form, even if not provided personally by the policyholder. The details which are stated on the policy sheet are assumed to have been provided by the policyholder.

Should it appear that the policyholder has not fulfilled their obligation to inform fully, then Turien & Co. Assuradeuren will inform the policyholder within two months of finding this out. This is also valid at the moment which Turien & Co. Assuradeuren discover the withholding of information or provision of incorrect information after the risk has been covered and compensated.

When Turien & Co. Assuradeuren discover a risk which has not been declared beforehand, they may terminate the insurance immediately or up to two months afterwards.

Turien & Co. Assuradeuren can terminate the insurance contract within two months if:

1. they are purposefully misled;
2. when Turien & Co. Assuradeuren would not have contracted the insurance had they been in possession of the correct information;
3. in other cases Turien & Co. Assuradeuren cannot end the policy. Turien & Co. Assuradeuren can, though, change the conditions and premium of the relevant insurance policy.

Notifications and commitments made by Turien & Co. Assuradeuren to the policyholder or the insured are only binding if these are provided in writing by Turien & Co. Assuradeuren.

Start and end of compensation

The insured has a right to compensation of the insured costs, in as far as these are incurred during the period in which the insurance is valid, whereby the date of the treatment, nursing, tests, etc is the qualifying factor and not the date of the invoice(s). If this involves a DBC invoice then the costs are bound to the calendar year in which the DBC is opened.

Free choice

The insured is free in the choice of healthcare providers named in these conditions.

Register of personal data

The personal data given on the application for an insurance policy and any possible data given afterwards can be included in the register of personal data kept by Turien & Co. Assuradeuren. A privacy rule is applicable to this register. See www.turien.nl

Method of compensation

Compensation will be made to the insured unless it has been agreed between Turien & Co. Assuradeuren and the healthcare assistant or institute that they will submit their invoice directly to Turien & Co. Assuradeuren for direct payment to the healthcare assistant or institute. Compensation of costs is based exclusively on the basis of the legal tariffs or – if the law is not applicable to a tariff – on the basis of the tariff which is agreed or fixed between Turien & Co. Assuradeuren and the healthcare assistant.

Submitted invoices

Invoices, on the basis of which partial or complete compensation is applicable, will not be returned. Neither will invoices be returned on the basis of which no compensation is made because the costs reduce an outstanding deductible. It is advisable to make copies of all submitted invoices.

Invoices for compensation will exclusively be accepted in the following languages: Dutch, French, German, English or Spanish. Repayment will be made in the Netherlands, in the legal Dutch currency, on the basis of the exchange rate at the time of the treatment.

Consideration period

On receipt of the policy, should the insurance not live up to expectations, it is still possible to cancel the requested insurance. In order to do this, you should return the policy to us with the request that the policy be cancelled. Such a request must be received by Turien & Co. Assuradeuren within 14 days of the date on the letter which was sent together with the policy.

Obligations of the policyholder

The policyholder is obliged:

1. To give their cooperation Turien & Co. Assuradeuren, the medical advisor, the dental advisor or those responsible for examination to obtain all the required information.
2. To help Turien & Co. Assuradeuren in recovering costs from liable third party/parties.
3. To submit original invoices, which are specified in such a way that without further request it can be determined which costs Turien & Co. Assuradeuren are liable for, within 12 months after the end of the year in which the treatment took place, together with a completed claims form. Dental invoices should be submitted together with a specification form according to the model which is set by the organizations of dentists and private insurers. Computer-generated invoices should be stamped for verification by the healthcare assistant.
4. To submit a referral letter from a GP, specialist or dentist for medical treatment covered under this policy, if Turien & Co. Assuradeuren require this.
5. To inform Turien & Co. Assuradeuren immediately and to provide all the necessary details if the insured costs might be attributable to the fault of a third party, for which a case could be brought under civil law. Neither the policyholder nor the insured may negotiate directly with the defendant or their insurer in connection with the claim which has been/will be compensated, and should refrain from everything which might disadvantage the interests of Turien & Co. Assuradeuren. If not complied with, this may lead to losing the right to compensation of the insured costs, even in cases when Turien & Co. Assuradeuren have already made these payments.
6. In cases whereby Turien & Co. Assuradeuren have paid the full costs directly to a healthcare assistant or institute, while under that part of the policy cover an amount was still outstanding under the deductible and/or own contribution, repayment of such should be made at the first request of Turien & Co. Assuradeuren of the deductible and/or own contribution to Turien & Co. Assuradeuren or a designated third party. Turien & Co. Assuradeuren reserve the right to employ the services of others to assist in the retrieval of costs, and furthermore to sell the debt completely to a third party. This all effected in due consideration to the Data Registration law.
7. If the above obligations are not complied with then Turien & Co. Assuradeuren are not obliged to pay any costs.

Notification of changes

Every change in the composition of the family and every other change which would influence the rights and obligations of this insurance contract must be notified in writing to Turien & Co. Assuradeuren stating the date of the change. This notification must be provided within 30 days of the change taking place.

Such changes include the following:

- moving house;
- marriage;
- divorce;
- The policyholder and co-insured partner are obliged to provide Turien & Co. with written confirmation of the ending of the relationship.
- Both the policyholder and the co-insured partner will be informed by Turien & Co. in writing of any proposed changes.
- birth;
- adoption;
 - An adopted child should be registered within 4 months from the date of issue of the declaration by Ministry of Justice. Turien & Co. Turien & Co. would also like to know the date on which the transfer was made by the foreign authorities to the adoptive parents. A copy of the passport of the adopted child should be submitted to Turien & Co.
- death;
- change of bank or post office account.
- detention;

If notification of such is not provided then the right to any repayment of premium expires.

Premium, Payment of premium and Cancellation

Premium

The premium is calculated per month and should be paid in advance by direct debit. If the premium has not been received by us on time, there is a risk that any compensation will not be paid out.

It is possible, if you would prefer, to pay quarterly, half-yearly or annually. You will then receive a reduction in the premium. You can only pay quarterly, half-yearly or annually for the complete relevant package, that is the basic insurance together with the supplementary insurance.

Children up to 18 years old are insured for free if:

- both the supplementary as well as the basic insurance are contracted from Turien & Co. Assuradeuren;
- at least one of the parents/carers is also insured for the basic and supplementary insurances by Turien & Co. Assuradeuren;
- the supplementary insurance for the child is not greater than that for the insured parents/carers. This means that your child may not have the Privilege policy while you have the Prima policy.

Selection Excellent and Privilege (non-paying) underage and newborn:

- There is no medical selection for the newborn for the Excellent/Privilege as long as the child has been registered within the given period (not later than 4 months after birth). If the child is registered too late then the regular selection criteria (for underage children) come into force.
- A full medical selection is applicable for (non-paying) underage children.

Payment of premium

Both the policyholder and the insured are obliged to pay the premiums in advance. It is not permitted to settle premium payments against any possible compensation payments owing from Turien & Co. Assuradeuren.

Monthly payments by the insured can only be paid by direct debit from your bank account. If no direct debit form is provided by the insured, then payments will automatically be calculated on a quarterly basis.

Quarterly, half-yearly or annual premium payments must be paid wholly in one sum.

If the insurance is cancelled due to the late payment of premiums owing, then Turien & Co. can refuse to enter into a new insurance contract with the policyholder for a period of 5 years.

Cancellation of supplementary cover due to non-payment

If the policyholder does not fulfil their obligation to pay the premium, then Turien & Co. can cancel the cover if the policyholder has been sent a written demand for payment within 30 days, dated from the day of demand, citing the reason as non-payment. In case of cancellation, the entitlement to care and the right to compensation for the costs thereof are no longer valid.

The policyholder is still obliged to pay the premiums for the supplementary cover during the period of cancellation. In case of cancellation, the entitlement to care and the right to compensation for the costs thereof will be reinstated the day after the day on which Turien & Co. Assuradeuren receive the sum owing. If Turien & Co. Assuradeuren has taken measures in order to retrieve the sum owing, then all those costs incurred, for both judicial and extrajudicial measures, will be for the account of the policyholder.

If the insured requests the reinstatement of the supplementary insurance within one month after full payment of the premiums owing, then the supplementary cover will be reinstated one day after the date of request.

If the request is not made within one month, then the cover will be reinstated on the first day of the month following the date of request.

For some packages medical selection is required, for which an application form must be completed.

The supplementary cover can never be reinstated retrospectively back to the date of cancellation.

Payment of own contribution

The payment of the sums which fall under your own contribution and which are paid out first by Turien & Co. Assuradeuren to a healthcare provider who invoices electronically will be periodically charged to the insured. You will receive a giro collection form in connection with this.

Payment of deductible

You will periodically be charged for any outstanding deductible which may be included in statements which have been paid directly by Turien & Co. Assuradeuren to healthcare providers. You will receive a giro collection form for such payments.

Repayment of premium

Repayment of premium can only take place by ending the insurance and repayment of premium already paid for a period no longer to be covered.

Revision of premium and/or conditions

Turien & Co. Assuradeuren reserve the right, on a date set by them, to revise the premium and/or the conditions of the insurance per person or in groups.

The policyholder who does not agree to such a change may terminate their insurance in writing within 30 days of receiving written notification from Turien & Co. Assuradeuren of such a change. However this does not apply when such a change of the premium and/or conditions is due to legal regulations or stipulations, including a change in the level of healthcare which is covered by the AWBZ or the basic insurance. The premium paid over the period after termination will be repaid. If Turien & Co. Assuradeuren have received no written termination from the policyholder within 30 days then the insurance will be continued under the new premium and/or conditions.

A change in the premium on account of a change to the percentage of reduction which on the grounds of the age of the insured occurs, as well as a reduction in premium and/or an extension in the cover are not considered to be revision.

The reduction for children and/or exemption of premium payment for co-insured children lapses on the first day of the calendar month following the calendar month in which he/she reaches the age of 18 years.

Duration and renewal of the insurance

1. Start of the insurance

With due consideration of that stated in the previous article, the insurance starts on the day as stated in the policy. The insurance is immediately valid for children born during the duration of the insurance, whatever their state of health, as long as the birth of the child has been notified to Turien & Co. Assuradeuren within 30 days of the birth.

2. Duration of the insurance

The insurance is agreed to for the period as stated in the policy and will then be renewed tacitly from year to year.

3. End of the insurance

The insurance ends:

On the death of the policyholder or (one of) the insured.

By written cancellation by Turien & Co. Assuradeuren at a time set by them in cases of:

- a. withholding information or an untruthful account;
- b. By non-compliance with the obligation of premium payment in connection with a previous cancellation.
- c. fraud;
- d. by permanent residence abroad of the insured.

The policyholder can cancel the healthcare Insurance not later than 31 December in any one year as from 1 January the following year. If the policyholder does not cancel the insurance, then the insurance will be renewed tacitly for the period of one calendar year.

Renewal of collective insurances

Renewal of the insurance of an insured person within a collective insurance contract is possible in cases of:

- a. reaching pensionable age;
- b. a similar situation to a., such as an early retirement agreement;
- c. death of the participant in the collective insurance through which people are insured.

The above on condition that:

- the contracting party of the collective has given their permission;
- the request has been submitted in writing within 30 days after the date of (early) retirement or death.

If the collective insurance ends due to termination of employment with the collective contractor, the insured may continue to insure themselves and their family on an individual basis. This will be on the basis of individual conditions, premium and own risk which are applicable at that time. The application must be submitted in writing to Turien & Co. Assuradeuren within 30 days after the employment has ended.

Exclusions

No claim to compensation of costs may be made:

1. In cases whereby the costs incurred result from an illness or abnormality which on the application for the insurance, by an expansion of the insurance or by the raising of the insured class existed or caused symptoms, of which the insured knew but did not notify on the application form, unless otherwise agreed to. This last is not applicable if Turien & Co. Assuradeuren were made aware of the illness, abnormality or symptoms at the time of the application for insurance, by an expansion of the insurance or by the raising of the insured class and this elicited no special conditions.
2. In case of costs incurred as a result of illness or abnormality of which the risk, according to notes in the policy, is excluded.
3. In case of costs incurred by the reversal of a voluntary sterilization, chelation therapy, cell therapy, psychoanalysis or help given by a psychologist and/or psychotherapist, apart from frontline psychological help, written declarations, administration costs, costs of missed appointments, costs incurred through late payment of invoices from healthcare providers as well as the costs for occupational and/or driving licence medical examinations.
4. If the costs relate to the own contributions or deductibles:
 - in accordance with the Healthcare Insurance scheme and/or AWBZ;
 - in population research projects, unless these own contributions and/or deductibles are expressly stated in the present cover.
5. In case of costs incurred concerning operations to improve the outward appearance, the interest in which stems from personal wish, need or circumstance, unless there is talk of mutilation as a result of an accident or physical illness, excepting in cases whereby the serious abnormality was present and detected at birth.
6. In cases whereby the costs are incurred as a result of or in connection with atomic nuclear reactions (unless these are undergone for the medical treatment of the insured), riots, revolt, civil war, war or any similar situation.

7. In case of costs incurred through illness or accident when under a legally arranged insurance contract, an order stemming from government such as the healthcare insurance scheme, or any subsidy regulation – if the present contract was not in force – whereby liability for the costs incurred would be covered under that other insurance contract. This insurance will only cover that which exceeds the cover which another legally arranged insurance contract, an order stemming from government, a subsidy regulation has been/will be provided or would have been if this current contract had not existed.
8. In cases whereby the policyholder, the insured and/or a third party has deliberately given incorrect information.
9. That which on the basis of the “Clause sheet Terrorism Cover by the NHT (Dutch Reinsurance Company for Terrorism damage)” does not qualify or only partially qualifies for compensation. The “Clause sheet Terrorism cover by the NHT” forms a part of these insurance conditions and can be provided on request.

Complaints and differences concerning the implementation of the Turien & Co. Healthcare Policy (or collective Supplementary Healthcare Policy in accordance with the relevant category)

Complaints and differences concerning the implementation of the Turien & Co. supplementary Healthcare insurance can be presented for the attention of the Quality Control department, Antwoordnummer 31, 1800 AE Alkmaar.

Complaints such as cited under paragraph 9 can be submitted by the policyholder or the insured to the SKGZ (Foundation for Complaints and Differences in Healthcare Insurances), for the attention of the Ombudsman Healthcare Insurances, P.O. Box 291, 3700 AG Zeist, www.skgz.nl. However, this must be after the complaints have been made known to Turien & Co. and Turien & Co. have given their definitive standpoint there over, or within six weeks after the submission of a complaint if no reaction has been received. The ombudsman can mediate in cases of complaints, but cannot give binding advice.

If Turien & Co. Assuradeuren judge a complaint to be considered a difference (meaning a request to reconsider a decision), then the submitter will be informed of this.

Differences may be, after the policyholder or the insured have submitted a written request to Turien & Co. Assuradeuren to reconsider their decision and within a period of 6 weeks or they have not reacted or have not reacted satisfactorily as far as the policyholder or the insured are concerned, presented to the SKGZ, for the attention of Committee for Differences in Healthcare Insurances, P.O. Box 291, 3700 AG Zeist, www.skgz.nl.

The Committee for Differences in Healthcare Insurances is obliged to request advice from the College of Healthcare Insurances if the difference relates to other services as meant in article 11 of the Healthcare Act, or the compensation of the costs of the care or services. The independent authority will receive this advice as soon as possible, but at the latest four weeks after the request for advice.

Final Clause

In all cases where the conditions of the insurance are not (fully) provided, Turien & Co. Assuradeuren holds the right to decide.

LIC Prima policy

Description of article	Prima
<p>3. Supplementary home nursing</p> <p>Compensation for the costs for supplementary home nursing in as far as this would preclude or shorten a medically necessary admission into hospital. The policyholder is obliged in cases of home nursing to request written permission for this from Turien & Co. Assuradeuren, which request must be accompanied by a declaration from the relevant doctor. This cover can only be supplied further to the home nursing/home help which is supplied through the AWBZ.</p>	<p>Maximum of 120 days per calendar year with a maximum of € 150.- per day</p>
<p>4. Acne treatment</p> <p>Compensation for the costs of peeling by a skin therapist in cases of serious acne. Under serious acne is understood that for which medical treatment is necessary. The treatment must be carried out by a skin therapist or a specialist. The application must be accompanied by a referral and indication from the GP.</p>	<p>Compensation up to a maximum of € 450.- per insured per calendar year.</p>
<p>5. Maternity care or medical screening on adoption</p> <p>During the legal adoption procedure, we will compensate the following costs during the term of the healthcare insurance:</p> <ul style="list-style-type: none"> - adoption maternity care provided by a maternity centre, or - medical screening (preventive tests) of an adopted child from foreign origin. <p>Conditions:</p> <ul style="list-style-type: none"> - The adopted child must be not older than 12 months at the moment of adoption and is not already part of the relevant adoptive family. - The medical screening must be carried out by paediatrician. - The medical screening must form a part of the adoption process. <p>Exclusion:</p> <p>We do not compensate the costs of the medical screening of the adopted child after the adoption has taken place.</p>	<p>Adoption maternity care: up to a maximum of 3 days for 3 hours per day, or medical screening on adoption up to a maximum of € 300.- per adopted child.</p>
<p>6. AeroChamber</p> <p>We compensate the costs of an AeroChamber, which is used for the inhalation of a dose of aerosol.</p>	<p>Up to a maximum of € 150.- per insured per calendar year.</p>
<p>7. Alternative care</p> <p>For the costs of consultations of:</p> <ol style="list-style-type: none"> 1. a therapist or doctor who is member of one of the professional bodies cited under Article 1: Definition of terms. 2. a chiropractor (D.C., Bsc, Msc); an osteopath (NRO, DO-NRO); 3. a doctor, who specifically practices: <ul style="list-style-type: none"> - acupuncture; - treatment of an anthroposophical nature; - homeopathy; - treatment according to Moerman therapy; - treatment according to naturopathy; - treatment by orthomanipulation (manual therapy). 	<p>Full compensation up to a maximum of € 1,000.- per insured per calendar year.</p>
<p>8. Monitoring system for the prevention of cot death</p> <p>We compensate the costs of hiring a monitoring system for no more than 12 months.</p> <p>Conditions:</p> <ul style="list-style-type: none"> - Referral from a doctor for this is obligatory. - Prior permission must be granted by us for the compensation of the costs of hiring a monitoring system. 	<p>After permission is given beforehand by Turien & Co. Assuradeuren. 100%</p>
<p>9. Glasses and/or contact lenses (excluding the frame)</p> <p>Compensation annually for glasses (excluding the frame) and/or contact lenses with a correction of at least 1 dioptr.</p>	<p>Compensation up to a maximum of € 227.- per insured per calendar year.</p>

Description of article	Prima
<p>10 Abroad</p> <p>For medically necessary assistance due to an accident or unexpected case of illness which has occurred during the first 12 months of a stay abroad, for reasons of holiday, business trip or study.</p> <p>Supplementary to the basic insurance there is a right to compensation for the costs for this unexpected medically necessary care, which on the grounds of the basic insurance are for one's own account. In case of hospital nursing, a maximum of 365 days will be compensated.</p> <p>In case of a stay in hospital the Alarm Centre must be contacted immediately. Their contact number is to be found on the reverse side of your healthcare insurance card.</p> <p>Invoices for compensation will exclusively be accepted in the following languages: Dutch, French, German, English or Spanish. Repayment will be made in the Netherlands, in the legal Dutch currency, on the basis of the exchange rate at the time of the treatment.</p>	<p>Compensation of the costs up to 200% of the normal tariffs in the Netherlands and treatments according to the WMG, after deduction of the compensation from the basic insurance.</p> <p>In case of hospitalization, compensation up to a maximum of 365 hospitalization days</p>
<p>11 Camouflage therapy</p> <p>Compensation for the costs of camouflage lessons given by a skin therapist and the costs of products necessary for the lessons.</p>	<p>Compensation up to a maximum of € 450.- per insured per calendar year.</p>
<p>12 Incubator after care</p> <p>For a co-insured baby following a stay for a stay of at least 14 consecutive days in an incubator.</p>	<p>Compensation for the costs of a maximum of 12 hours up to a maximum of € 21.- per hour.</p>
<p>13 Dietary advice / information about food</p> <p>We compensate the costs of:</p> <ul style="list-style-type: none"> - dietary advice from a dietician. Dietary advice includes the following: the information and advice in the area of food and eating patterns with a medical aim. Those insured under the Health Insurance Act. have the right to compensation as supplement to the compensation from the policy. - Information about food from an obesity consultant or dietician. Advice about food concerns information and advice. <p>Conditions:</p> <ul style="list-style-type: none"> - The dietician providing treatment must be registered with the Dutch Association of Dieticians, or the Dieticians' Corporation of the Netherlands, or comply with the qualitative demands of these associations. - The obesity consultant providing treatment must be registered with the Professional Association of Obesity Consultants in the Netherlands or comply with the qualitative demands of this association. 	<p>Up to a maximum of € 115.- per insured per calendar year.</p>
<p>14 Electronic epilation and/or hair removal by laser from the face</p> <p>Compensation for the costs of electronic epilation and/or hair removal by laser from the face by a skin therapist. Under electronic epilation is understood the removal of excess facial hair. This treatment may also be carried out by an Anbos associated beauty therapist. The application must be accompanied by a referral and medical indication from the GP.</p>	<p>Compensation up to a maximum of € 450.- per insured per calendar year</p>
<p>15 Physiotherapy and remedial therapy with a chronic indication</p> <p>Treatments by a physiotherapist or Mensendieck/Cesar remedial therapist in connection with a chronic indication as categorized by the regulation Physiotherapy fixed by the Dutch Healthcare Insurers. The regulation forms a part of these insurance conditions and may be forwarded on request free of charge.</p> <p>If the treatment is provided by a healthcare provider with whom no contract has been made then a maximum of € 24.50 per treatment will be compensated.</p> <p>Right to compensation for these treatments exists if:</p> <ul style="list-style-type: none"> - the invoice is accompanied by letter of referral from the GP in which the indication is stated. From the indication it must be shown that the treatment is medically necessary. <p>No compensation will be given for the costs of:</p> <ul style="list-style-type: none"> - pregnancy and after childbirth exercise; - sport massage; - work or occupational therapy; - therapy which is only given to improve the condition by means of training. 	<p>Compensation for the costs of up to a maximum of 9 treatments per symptom per calendar year. As of the 10th treatment compensation of the costs will take place from the Basic Health Insurance.</p>

Description of article	Prima
<p>16 Physiotherapy and remedial therapy without a chronic indication Treatments by a physiotherapist or Mensendieck/Cesar remedial therapist.</p> <p>If the treatment is provided by a healthcare provider with whom no contract has been made then a maximum of € 24.50 per treatment will be compensated.</p> <p>Right to compensation for these treatments exists if:</p> <ul style="list-style-type: none"> - no compensation is given from the basic insurance; - The invoice is accompanied by letter of referral from the GP in which the indication is stated. From the indication it must be shown that the treatment is medically necessary. <p>No compensation will be given for the costs of:</p> <ul style="list-style-type: none"> - pregnancy and after childbirth exercise; - sport massage; - work or occupational therapy; - therapy which is only given to improve the condition by means of training. 	<p>Compensation for the costs of up to a maximum of 18 treatments per symptom per calendar year.</p>
<p>17 Guest house Accommodation in a guest house and transport of family members in case of hospitalization. If you are admitted to a hospital in the Netherlands which is further than 50 km from your home, then we will compensate, by a stay of more than 14 accommodation days, from the 15th accommodation day:</p> <ul style="list-style-type: none"> - the accommodation costs of your family members in a Ronald McDonald house or other guest house local to the hospital; - a kilometre allowance for the costs of transport by own car to and from the hospital. We compensate € 0.28 per kilometre; - the costs of public transport (lowest class) to and from the hospital. <p>Condition: you must supply us with a specification of the costs incurred.</p> <p>Exclusion: we do not compensate these costs by admission to a psychiatric hospital.</p>	<p>Up to a maximum of € 35.- per day up to a maximum of € 600.- per calendar year for all family members together.</p>
<p>18 Birth TENS We compensate the costs of hiring a birth TENS for pain relief whilst giving birth assisted by a midwife or a GP acting as midwife.</p> <p>Conditions:</p> <ul style="list-style-type: none"> - The application for the apparatus must be submitted to the supplier by your midwife or GP acting as midwife. - The apparatus must be provided by a medical aids supplier and will be supplied temporarily for your use. 	<p>100%</p>
<p>19 Holidays for the handicapped The costs of home help for the handicapped person during a holiday trip may be considered for compensation;</p> <ul style="list-style-type: none"> - in as far as the holiday trip and the home help are organized by the International Help Service; - Provided the holiday trip takes place in consultation with the relevant doctor. - if the home help for the handicapped is provided by the Home Help for the Handicapped Foundation during the holiday periods of the regular carers. 	<p>After permission is given beforehand by Turien & Co. Assuradeuren</p>
<p>20 Medicines Act Medicines which may be provided under the Medicines Act and which may be prescribed by a doctor established in the Netherlands and supplied by a dispensing chemist established in the Netherlands or by a dispensing GP.</p> <p>This includes the following:</p> <ul style="list-style-type: none"> - homeopathic and/or anthroposophical medicines; - over the counter remedies and identical prescription drugs for short-term and/or chronic use during the first 15 days of use. 	<p>Compensation up to a maximum of € 2,500.- per insured per calendar year</p>

Description of article	Prima
<p>21 Group therapy for rheumatism patients Compensation of the costs of group therapy led by a physiotherapist for insured people who are members of a rheumatism patients association.</p>	Full compensation
<p>22 Own contribution GVS Compensation of the own contribution which is applicable for medicines covered under the Compensation of Medicines System (GVS) which is decided by the government. For further information about the compensation of your medicines we refer you to www.medicijnkosten.nl.</p>	Full compensation.
<p>23 Not Applicable</p>	Not Applicable.
<p>24 Medical aids Compensation for the own contribution which the insured must pay above the maximum compensation provided under the Medical aids regulation. Right to compensation only exists if the right to the appliance exists in the basic insurance.</p>	Compensation up to a maximum of € 250.- per insured per calendar year.
<p>25 Not applicable</p>	Not applicable.
<p>26 Maternity package A woman insured under this policy has the right to a maternity package before giving birth. This is conditional to informing Turien & Co. Assuradeuren at the latest in the fifth month of the pregnancy. The insured will receive the maternity package at home at the latest six weeks before the birth due date.</p>	Full compensation for insured female persons.
<p>27 Own contribution maternity care Compensation of the legally set own contribution in connection with giving birth and/or maternity care. The additional compensation will be given over the same number of hours and respective days over which the right to maternity care applies as in the basic insurance.</p>	Compensation of 50% of the legally set own contribution in connection with giving birth and/or maternity care.
<p>28 Delayed or extended postnatal care Compensation for the delayed postnatal care for female insured persons provided by a maternity centre. Delayed postnatal care is compensated if during the first ten days after giving birth no postnatal care has been received.</p>	After prior permission from Turien & Co. Assuradeuren. 15 hours maximum.
<p>29 Not applicable</p>	Not Applicable.
<p>30 Lactation assistance Compensation for the costs of lactation assistance to improve the breast-feeding of babies and carried out by a lactation consultant registered with the Dutch Association of Lactation Consultants. Lactation assistance consists of advice, information and practical support. This is conditional that the mother is insured under this policy.</p>	Compensation up to a maximum of € 125.- per birth for the costs of lactation assistance to improve the breast-feeding of babies.
<p>31 Facility for overnight stay Compensation for the nightly accommodation in nearby guest house tied to the hospital for the parents of a child up to the age of 18 years who is admitted for a stay in a hospital and who is insured on the strength of this policy.</p>	After prior permission from Turien & Co. Assuradeuren. Full compensation from the 14th night.
<p>32 Overnight stay in an oncological hospital Compensation for the costs of overnight stay following an outpatient treatment by means of radiotherapy or chemotherapy treatment in the Dr. Daniel den Hoed Clinic in Rotterdam or the Antoni van Leeuwenhoek Hospital in Amsterdam.</p>	Compensation for the costs of an overnight stay up to a maximum of € 35.- per night per insured person.
<p>33 Obesity treatment We compensate the costs of taking part in a part-time out-patients' treatment programme for obese patients in the Dutch Obesity Clinic (NOK) in Hilversum. The programme is aimed at changing behaviour by means of non-surgical multidisciplinary treatment. Conditions: - The obesity must be of grade 3. Your Body Mass Index (BMI) is ≥ 40. - We must have given you our prior permission for treatment. - You must complete the full programme.</p>	Up to a maximum of € 750.- per insured for the whole duration of the supplementary Insurance.
<p>34 Laser eye surgery We compensate the costs of laser eye surgery at VisionClinics.</p>	Once only € 350.- per insured for the whole duration of the Insurance.

Description of article	Prima
<p>35 Eyelid correction (plastic surgery) Compensation for the costs of correcting upper eyelids in a hospital or independent treatment centre. Right to compensation of the costs will only exist if a serious restriction of vision can be demonstrated.</p> <p>This is so if the lower edge of the upper eyelid or the overhanging skinfold hangs 1 mm or lower above the centre of the pupil. This will be measured from the centre of the pupil while the insured looks straight ahead in a relaxed manner.</p> <p>A prior request for treatment and medical selection must be submitted to Turien % Co. Assuradeuren accompanied by an explanation from the relevant medical specialist.</p> <p>2 photos (made by the hospital, independent treatment centre or yourself) must be submitted together with the request, one of a front view and the other a side view. A ruler must be included in these photos.</p>	<p>After prior permission from Turien & Co. Assuradeuren.</p> <p>Full compensation.</p>
<p>36 Angle of ear correction (plastic surgery) Compensation for the costs of correction by plastic surgery of protruding ears for the insured up to 18 years old. Right to compensation will only be given by Turien & Co. Assuradeuren after referral by the GP and explanation from the relevant plastic surgeon or ENT doctor. Photos of the front and side view must also be submitted for assessment to Turien & Co. Assuradeuren.</p>	<p>After prior permission from Turien & Co. Assuradeuren.</p> <p>Full compensation for children up to 18 years old.</p>
<p>37 Orthodontics For insured persons under 22 years old. Compensation of the costs of oral surgical treatments (orthodontics or dental correction) by a dentist or orthodontist. If the agreed oral surgical treatment continues after the insured reaches the age of 22 years, then this treatment will still be compensated. No right to compensation exists for the repair or replacement of orthodontic apparatus which as a result of carelessness on the part of the insured must be carried out.</p>	<p>80% compensation.</p>
<p>38 Orthopaedic medicine We compensate the costs of consultations with an orthopaedic consultant. The consultations concern the diagnosis and the treatment of complaints in the bodily locomotor system whereby no use is made of operations.</p> <p>Condition: Your must be referred for this treatment by a GP.</p>	<p>Up to a maximum of € 300.- per insured per calendar year.</p>
<p>39 Menopause consultant We compensate the consultation costs of a menopause consultant.</p> <p>Condition: The menopause consultant must be registered with Care for Women or the Association of Nursing Menopause Consultants (VOC) or comply with the demands for quality of one of these organisations.</p>	<p>75% of the consultation costs up to a maximum of € 115.- per insured per calendar year.</p>
<p>40 Pedicure care Foot care in connection with foot problems arising through diabetes or rheumatism provided by a pedicurist after referral by the GP or medical specialist.</p>	<p>Up to a maximum of € 100.- per insured per calendar year.</p>
<p>41 Adhesive strips for breast prostheses We compensate the costs of adhesive strips for securing external breast prostheses after breast amputation.</p>	<p>100%</p>
<p>42 Podiatry Compensation for the costs of podiatric treatments by a podiatrist after referral by a GP or specialist. This includes treatments for foot abnormalities, skin and nail disorders or problems with the support or movability of the feet.</p>	<p>Up to a maximum of € 300.- per insured per calendar year</p>
<p>43 Out-patient childbirth without medical indication, own contribution We compensate female insured persons the costs on the basis of the Health Insurance Act the legal own contribution of an out-patient delivery without medical indication, assisted by a midwife or a GP.</p>	<p>75% compensation of the legal own contribution.</p>

Description of article	Prima
<p>44 Preventative treatments</p> <p>Tests by a GP or medical specialist for early diagnosis:</p> <ol style="list-style-type: none"> cervical cancer tests (smear tests) carried out by a GP; breast cancer tests; preventative tests of heart and arteries (up to once every 24 months), and prostate cancer tests. <p>The preventative tests should take place in the Netherlands and carried out by a licence holding institute established in the Netherlands, which is authorised for such by the Ministry of Health, Welfare and Sport.</p> <p>Compensation will not be given if the tests are part of medical screening of the general population.</p>	<p>Full compensation.</p>
<p>45 Preventive courses</p> <p>We give an allowance towards the costs of the following preventive courses:</p> <ul style="list-style-type: none"> heart problems, a course which aims to teach patients how to cope with heart problems, organised by a home care agency; lymphoedema, awareness and/or self-management course aimed at the patient taking an active part in the prevention, identification and/or treatment of lymphoedema. The course must be organised by teacher qualified for such, who has completed the course to become teacher of self-management of lymphoedema by the Dutch Centre for Lymphology (SLCN). <p>A list of qualified teachers can be downloaded from our website or requested from us.</p> <ul style="list-style-type: none"> rheumatoid arthritis, arthritis or Bechterew's disease, course which is aimed at teaching patients how to live with their complaint, organised by the arthritis patients' union or a home care agency; diabetes type 2 patients, basic and follow-up courses, organised by the Diabetes Association of the Netherlands (DVN) or a home care agency; slimming, organised by a home care agency, one of the written or online programmes organised by Happy Weight or the programme "Slim Healthy" organised by one of our health centres; stopping smoking, organised by Allen Carr, Diagnosis4Health or a home care agency, and laser therapists at Prostop Laser therapy, Laser centre SMOKE FREE and Laser centre North-East Netherlands; the "Free from alcohol" training, organised by De Helderheid; basic reanimation course organised through the Dutch Heart Association; First Aid course, organised by the local First Aid association which leads to the diploma "First Aid" from the Orange Cross; first aid in case of children's accidents, organised by a home care agency or local First Aid association; baby massage, organised by a home care agency. <p>We can provide you with information about where these courses can be followed.</p> <p>Condition: You must provide us with the original proof of application and payment.</p>	<p>75% up to a maximum of € 115.- per course per insured per calendar year.</p>
<p>46 Psoriasis treatment</p> <p>Compensation of the costs of psoriasis treatment. The right to compensation exists if the psoriasis treatment takes place in a centre with which Turien & Co. Assuradeuren has a contract.</p>	<p>Up to a maximum of € 1.000.- per insured per calendar year</p>
<p>47 Own contribution frontline psychological help</p> <p>Compensation of the own contribution of € 10.- per appointment for the first 8 appointments compensated under the basic insurance.</p>	<p>Compensation up to a maximum of € 80.- per insured per calendar year</p>

Description of article	Prima
<p>48 Repatriation Compensation for the costs of repatriation per ambulance and/or aircraft including the costs of accompaniment.</p> <p>Compensation is only possible with prior permission from the Alarm Centre on medical grounds. Their contact number is to be found on the reverse side of your healthcare insurance card. In case of death there is no right to compensation under this insurance policy.</p> <p>For those insured who travel abroad for their work and/or study is it applicable that, for an illness which lasts longer than 3 months, there is the right to compensation for the costs of repatriation to the patient's home country. Claims through this regulation can only be made by prior arrangement with the Alarm Centre.</p> <p>Invoices for compensation will exclusively be accepted in the following languages: Dutch, French, German, English or Spanish. Repayment will be made in the Netherlands, in the legal Dutch currency, on the basis of the exchange rate at the time of the treatment.</p>	<p>Full compensation.</p> <p>Compensation up to a maximum of € 9,076.-</p>
<p>49 Sports doctor We compensate the costs of an injury and follow-up consultations by a sports doctor in a Sports Medical institution. Condition: The Sports Medical institution must be acknowledged by the Federation of Sports Medical Institutions (FSMI).</p>	<p>Up to a maximum of twice per insured per calendar year.</p>
<p>50 Sports medical examination We compensate the costs of a sports medical examination in a Sports Medical institute.</p> <p>Condition The Sports Medical institution must be acknowledged by the Federation of Sports Medical Institutions (FSMI).</p> <p>Exclusion: We do not compensate the costs of an (obligatory) sports check or sports medical examination which is carried out by a sports doctor to determine the individual health and suitability of the insured to take part in a particular sport or in order to be accepted for a sports training course.</p>	<p>Sports medical examination once per 2 calendar years per insured: Basic: maximum of € 85.-, Basic Plus: maximum of € 100.-, Extended: maximum of € 135.-.</p>
<p>51 Sterilization and abortion Full compensation for the costs of sterilization and abortion carried out by a specialist in a hospital. Operations to reverse a previous sterilization will not be compensated.</p>	<p>Full compensation.</p>
<p>52 Support soles Compensation for the costs of orthopaedic and/or podiatric support soles. Right to compensation exists if the support soles:</p> <ul style="list-style-type: none"> - are individually measured and made-to-measure, and - provided by an approved supplier of orthopaedic aids or a podiatrist. 	<p>Up to a maximum of € 75.- per insured per calendar year.</p>
<p>53 Stutter therapy Compensation for the costs of stutter therapy by the Del Ferro method.</p>	<p>Full compensation.</p>
<p>54 Dental care for insured persons younger than 22 years Compensation for the costs of dental care which are not included under the basic Insurance.</p> <p>Dental care for insured persons of 22 years and older Compensation for the costs of dental treatments provided by a dentist according to the Dutch legal tariffs limits (UPT)</p>	<p>Up to a maximum of € 341.- per insured per calendar year.</p> <p>Up to a maximum of € 2,269.- per insured per calendar year</p>
<p>55 Vaccinations and/or medicines in connection with a journey abroad Compensation for the costs of vaccinations and/or medicines in connection with a stay abroad for holiday, business trip or study for up to 12 months to prevent hepatitis A and B, DTP, yellow fever, typhoid, cholera, meningitis or malaria.</p>	<p>Compensation up to a maximum of € 150.- per insured annually.</p>

Description of article	Prima
<p>56 Medical transport Compensation for the costs of medically necessary transport within the Netherlands, to and from a hospital, if and in so far as the relevant doctor considers travel by public transport to be inadvisable, and according to the following regulations.</p>	<p>After prior permission from Turien & Co. Assuradeuren.</p>
<p>57 For the insured with a chronic indication Compensation of the costs of transport by own car per kilometre as supplement to the claim from the basic insurance. Claim from the basic insurance exists if the transport is in connection with undergoing kidney dialysis, radiotherapy or chemotherapy, or if there is a case of visual handicap or wheelchair use.</p>	<p>€ 0.05 per kilometre.</p>
<p>58 For the insured without a chronic indication</p> <ul style="list-style-type: none"> - compensation for the costs of transport by taxi; - compensation for the costs of transport by own car. <p>Right to compensation exists only if:</p> <ul style="list-style-type: none"> - the transport is in connection with a medical test or treatment for the insured; - the invoice is accompanied by a declaration from the relevant doctor in which the indication is cited. From the indication it must be shown that the transport is medically necessary. <p>No claims can be made for compensation for the costs of transport in connection with resocialization, AWBZ, weekend leave in cases of long-term stay in an AWBZ institution and transport which is compensated from another legal regulation.</p>	<p>Full</p> <p>€ 0.30 per kilometre.</p>