

Supplement to insurance conditions for Health Insurance Senior, Family360 Private and Occupational

DementiaNavigator

Version 1.0

Early detection and screening for dementia

These supplementary insurance conditions are valid from 1 January 2025.

The supplementary cover is subject to the full insurance conditions, but also to the more detailed rules and exclusions stated in this cover.

The supplement covers screening, monitoring, prevention, health counselling and health navigation for insured persons in the risk group for developing dementia and with symptoms of dementia.

If your GP has already referred you for dementia assessment in the public healthcare system, you will not be offered access to the quick test and screening. Instead, you can activate the health navigation and health counselling offer, which is described in more detail in the section "HealthNavigator and health counselling".

Quick test

The insurance covers a quick test for self-perceived cognitive challenges (e.g. difficulty reading, calculating and expressing yourself), disorientation, changes in mood and behaviour, impaired judgement, difficulty thinking and planning, tendency to fall and affected daily living. Two accesses to the quick test are covered during the insurance period. You must contact Dansk Sundheds-sikring to access the test, which is performed either digitally or through a telephone conversation with our healthcare team.

Dementia screening

If the result of the quick test shows symptoms of dementia, you will be offered telephone contact with our healthcare team, who will offer you access to a digital screening tool designed for people with symptoms of dementia. A screening programme is covered during the insurance period as well as a re-screening programme based on a medical assessment and the result of the first screening programme.

Once you have completed the digital screening, the results are analysed by our partner specialising in screening and early detection of dementia.

The screening results are presented to both you and Dansk Sundhedssikring. Within 48 hours, you will receive a call from the healthcare team for a review of the test results and a plan for the next steps.

If your dementia screening shows that you are not at risk of developing dementia, the process will end with a telephone conversation with our healthcare team. We will advise you to contact your GP if you continue to experience symptoms of dementia.

If your dementia screening shows that you are at risk of developing dementia, you will be offered follow-up care calls from our healthcare professionals after approximately 14 days, one month and three months. You will be assigned a healthcare advisor in the form of a primary contact nurse, who will be with you throughout the entire process.

Every effort will be made to ensure that your contact nurse is the same throughout the process. In case of temporary or permanent absence (e.g. illness or maternity leave), we ensure a handover to a new contact nurse. We advise you to contact your GP, who will assess whether you should be referred for assessment and treatment for dementia in the public healthcare system.

Re-screening

If your screening for dementia shows few symptoms that you are at risk of developing dementia, you will be offered a re-screening after six months. You will automatically receive a reminder by email and/or text message with detailed instructions on how to activate the re-screening.

If the re-screening shows that you are now at risk of developing dementia, you will be offered follow-up care calls from our healthcare professionals after approximately 14 days, one month and three months. You will be assigned a healthcare advisor in the form of a primary contact nurse, who will be with you throughout the entire process.

Every effort will be made to ensure that your contact nurse is the same throughout the process. In case of temporary or permanent absence (e.g. illness or maternity leave), we ensure a handover to a new contact nurse. We advise you to contact your GP, who will assess whether you should be referred for assessment and treatment for dementia in the public healthcare system.

Referral to a public hospital

If your GP assesses that you need examination or treatment for dementia, you will be referred for treatment in the public healthcare system. We need a copy of your doctor's referral before health counselling and health navigation can begin.

Health navigation and health counselling

If your consultation with your GP results in a referral for assessment and treatment of dementia, this supplement covers health counselling and health navigation. Our counselling team consists of experienced nurses, doctors, physiotherapists, social workers, psychologists and other healthcare professionals. All have many years of experience from different specialities and offer advice and navigation in the Danish public healthcare system.

Healthcare counselling and health navigation are covered for up to 24 months if you are referred by your GP for assessment and treatment of dementia. The supplement does not cover sequelae of dementia.

The insurance only covers healthcare advice, healthcare navigation and medical advice relating to your public hospital treatment in Denmark. The insurance does not cover healthcare advice, health navigation or medical advice if you are abroad during your course of treatment or are undergoing treatment and/or recreation abroad, to which the Danish healthcare system has referred you.

Your contact nurse

Once your claim has been approved, you will be assigned a healthcare advisor in the form of a primary contact nurse, who will be with you and your family throughout your public hospital treatment. Every effort will be made to ensure that your contact nurse is the same throughout the process.

In case of temporary or permanent absence (e.g. illness or maternity leave), we ensure a handover to a new contact nurse.

Your contact nurse will support you and your family by, for example:

- Helping you liaise with the hospital regarding follow-up when you are called in, including ensuring compliance with applicable assessment/treatment guarantees.
- Preparing you for your meeting with the hospital, examinations and further treatment.
- Participating in medical consultations via digital platforms or by phone and acting as your professionally competent and independent counsellor.
- Helping you review your medical records and examination results from the hospital.
- Providing medical advice from the insurance's own medical consultants, including whether the planned examinations are adequate, relevant and expected in relation to your disease or condition.
- Providing clinical advice, including medication counselling.
- Booking appointments for treatment or examination, to the extent permitted by the public hospital system.
- Helping you book transport or other assistance if you need it.
- Making care calls for you.
- Helping you liaise with your pension company, accident insurance company and the like.
- Contacting local authorities if needed.
- Assisting you in the transition between hospitalisation and discharge.
- Providing social counselling.
- Providing psychological counselling for serious illness or grief/crisis.
- Providing end-of-life counselling.

Your process begins with a consultation where we together identify your need for help. You will also need to give us your permission to contact the relevant authorities on your behalf so that we can assist you during your hospital treatment. We will be in regular contact with you – and also your relatives, if you wish.

We always end your hospital treatment with a consultation with you and your relatives, where you are helped and guided in the right direction.

Counselling on the possibility of a second opinion

We will advise and guide you on the possibility of being recommended for a second opinion in a public hospital if there is a medical reason for this. We may also offer you the possibility of having our doctors review all relevant medical records and examination descriptions to advise you on whether the examination that has been carried out is deemed sufficient, relevant and expected in relation to your disease or disorder.

Communication between you and your contact nurse

Communication with your contact nurse will primarily be by telephone and email correspondence via your profile on our website. For medical consultations that take place at the hospital, your contact nurse can participate via digital platforms or on speakerphone. It is also possible for you and your family to talk to your contact nurse before the medical consultation so that you are as prepared as possible for the consultation with the doctor.

On a case-by-case basis, you and your contact nurse will arrange when the next contact takes place. You can always write to your contact nurse, who will get back to you as soon as possible. You can also call our healthcare team during opening hours on weekdays or request a call by writing to the healthcare team. It is important that we have the right contact details about you and the relatives you want to be informed about your programme.

Consent and power of attorney

In order to assist you in the best possible way during your hospital treatment, we may need to ask you to complete a consent form so that we have your permission to provide your relatives, or other persons named by you, with information about your hospital treatment and your insurance assistance. Consent must always be given by you.

You may also need to give us a power of attorney to contact the hospital on your behalf if we need to coordinate examinations, attend medical consultations or contact local authorities, patient associations or similar. We will inform you if there is a need for this. A power of attorney must always be signed by you before it is valid.

Membership of a patient association

If the screening shows that you have symptoms of dementia, the cost of membership of a relevant patient organisation is covered for up to 12 months. However, there is a maximum of a certain reasonable amount determined and continuously regulated by Dansk Sundhedssikring based on the current rates for patient organisations in Denmark and the general price development for these. The amount will appear from the payment guarantee we issue.