

Health Insurance Basic 11.0

Document with information about the insurance product



Company: Forsikringselskabet Dansk Sundhedssikring A/S, Hørkær 12B, DK 2730 Herlev

Product: Health Insurance Basic, version 11.0

Forsikringselskabet Dansk Sundhedssikring, VAT no. DK34739307, is registered as an insurance company at the Danish Financial Supervisory Authority.

This document is a short overview of the insurance coverage. The full terms and coverages can be viewed and downloaded via Dansk Sundhedssikring's website (ds-sundhed.dk), where easily accessible descriptions of the product content and the use of the insurance can also be found. After entering into the agreement, an e-mail will be sent with access to the agreed terms and information on the use of the health insurance. Each policyholder will also be given access to a digital portal with user-oriented information, including the specific insurance coverages.

What type of insurance is this?

This insurance is a health insurance that includes examination and treatment of physical and psychological health problems arising in the policyholder. The insurance may refer to both private and public healthcare providers and ensures access to quick and relevant examination, treatment, and surgery, including within the public healthcare system. The benefits also include counselling, referral, and assistance in navigating the healthcare services. All services are provided by qualified healthcare professionals.



What does it cover – Basic?

SundhedsNavigator ('HealthNavigator') and health advice

- ✓ Medical advice
- ✓ Professional healthcare advice
- ✓ Navigation and coordination in the public and private healthcare systems
- ✓ Pregnancy counselling
- ✓ Live webinars provided by psychologists and psychotherapists on everyday life issues
- ✓ Targeted offers for men and women's physical and mental health and well-being
- ✓ Advice and support during and after cancer treatment.

Treatment

- ✓ Physiotherapist treatment
- ✓ GLA:D training
- ✓ Chiropractic treatment
- ✓ Psychologic treatment
- ✓ Treatment by a psychotherapist
- ✓ Online stress management plan
- ✓ Three-party conversations
- ✓ Online psychological treatment
- ✓ Cool Kids/Chilled programme
- ✓ Children's product for children with mental health issues
- ✓ Digital ADHD/ADD counselling
- ✓ Youth counselling
- ✓ Digital parental support programme
- ✓ Personal health programme.

Trauma counselling

- ✓ Acute psychological crisis assistance.

Specialist physician/hospital

- ✓ Medical examination started within 10 working days
- ✓ Treatment started within 10 working days
- ✓ Specialist treatment, preliminary examination and surgery
- ✓ Second opinion.

After surgery and/or treatment

- ✓ Medicine expenses
- ✓ Assistive devices
- ✓ Rehabilitation
- ✓ Home care/home nursing
- ✓ Transportation expenses
- ✓ Recuperation.

What does it cover – Optional cover

Optional cover will be specified in the policy

- A: Reflexology, acupuncture, osteopathy and dietician
- B: Physiotherapy available without the requirement for a GP referral
- C: Private addiction treatment
- G: Online emergency medical service.



What does it not cover?

- ✗ Chronic conditions diagnosed before the insurance is taken out
- ✗ Emergency treatment
- ✗ Cosmetic surgeries and treatments
- ✗ Injuries as a result of professional sport
- ✗ All forms of contraception and fertility treatment
- ✗ Sexually transmitted diseases
- ✗ Chronic skin conditions
- ✗ Surgery for obesity and obesity treatment
- ✗ Congenital disorders
- ✗ Treatment of sleep apnoea
- ✗ Couples therapy
- ✗ Vision and hearing impairment
- ✗ Cardiovascular diseases
- ✗ Medical complications of alcohol abuse
- ✗ Preventive examinations and treatments
- ✗ Examination and treatment of phobias, eating disorders, ADHD and autism
- ✗ Consultations with a neuropsychologist
- ✗ Talk therapy provided by a psychiatrist
- ✗ Expenses for GP
- ✗ Damage due to civil unrest, nuclear energy and radioactive radiation or radioactivity, epidemics, pandemics etc.



Are there any restrictions on cover?

- ! The 10-day treatment guarantee is applicable from the receipt date of the relevant information.
- ! All examinations and treatment must be approved by Dansk Sundhedssikring before starting.
- ! The insurance covers illnesses and conditions that can be expected to be cured or substantially and permanently improved.
- ! The insurance does not cover chronic illnesses that occurred and/or were diagnosed before the insurance came into force (however, this is covered in accordance with the special provisions for option F).
- ! Treatment of chronic conditions are covered for up to 6 months from diagnosis, provided they are diagnosed during the period of insurance.
- ! Any examination and treatment must be medically justified through a medical referral or medical approval.
- ! Treatment approved and used in the public health system is covered.
- ! The insurance covers reasonable and necessary expenses for examination and treatment.
- ! Emergency crisis support must be reported within 48 hours of the incident.



Where am I covered?

- ✓ Consultant treatment is covered within the company's quality-assured network in Denmark. Coverage in the Nordic countries, the UK and the EU is available subject to prior agreement with Dansk Sundhedssikring.
- ✓ Frequency-based treatment is covered within the company's network or by a practitioner of your choice, unless otherwise specified in the individual cover.



What are my obligations?

- The insurance must be paid on time.
- You must supply us with the necessary personal and health information if requested.
- You must always contact Forsikringselskabet Dansk Sundhedssikring before initiating treatment. The insurance only covers approved treatment.
- You must inform us about any possible cover from other insurance when using this insurance.
- You must give your consent in relation to us obtaining and disclosing the necessary personal and health information to any relevant healthcare providers.



When and how do I pay?

- The first premium is payable on the commencement date.
- Subsequent payments follow the agreed terms.
- Invoices are sent to the e-mail address provided or issued electronically.
- The period for coverage is stated on the invoice.



When does the cover start and end?

- The insurance takes effect from the date stated in your policy and 12 months ahead.
- If you are a new customer transferred from another supplier of health insurance, the previous insurance covers any treatment already started three months after the transferral.
- The insurance is valid as long as it is paid in due time and the insurance is not actively cancelled.



How do I cancel the policy?

- The policyholder may terminate the insurance in writing with one month's notice, effective from the end of the current month. Termination at the renewal date is free of charge. Termination at any other time is subject to an administration fee.
- Dansk Sundhedssikring may terminate the insurance in writing with one month's notice to the renewal date.
- In case of non-payment of the first invoice, Forsikringselskabet Dansk Sundhedssikring can terminate the insurance without further notice.
- In case of late payment a reminder will be sent. If the charge is not paid on time, the right to compensation ceases, and the insurance is cancelled.