INTRODUCTION

The aim of this guide is to inform students about how to access healthcare, how to get your medical expenses reimbursed and ways to reduce the amount you spend on healthcare. We hope you find it helpful!

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### INFORMATION ABOUT HEALTH INSURANCE FUNDS

Health insurance funds, known as “mutuelles” in French, are part of the Belgian social security system. They are based on the principle of solidarity and offer services including reimbursement of healthcare costs. Registration is compulsory. International students are able to join a fund once they are domiciled in Belgium and have enrolled as students at UCLouvain.

Health insurance funds operate according to two principles:

- Interventions covered by the compulsory insurance system. Under this system, the amounts reimbursed are the same for all funds.
- Interventions covered by the supplementary insurance system. There is a charge for supplementary (“top-up”) insurance (contributions). Each fund offers different benefits and services.

### WHEN TO JOIN

**Belgians (or people with equivalent status)** under 25 years of age who are students and dependent on their parents are covered by their parents’ health insurance fund. Other students must join:

1. On reaching the age of 25
2. If they are receiving unemployment benefit
3. As soon as they start work on a self-employed basis
4. If they interrupt or finish their course and have found a job

**International students** also require healthcare cover. Even if they have an international insurance policy, it is still advisable to join a Belgian health insurance fund.

In Belgium, medical care related to hospital admissions and any additional investigations are billed directly to the health insurance funds and the patient is only billed for the patient’s contribution. Hospitals cannot, however, send a bill directly to an international insurer for the services they provide. The insured person therefore has to pay the costs up front (and these may be considerable in some cases) and then claim them back from his or her international insurer.

So it is wiser to join a Belgian health insurance fund.

Students with a European Health Insurance Card can also join a Belgian health insurance fund without paying contributions.
HOW TO JOIN

We advise you to compare the different services and benefits offered by the various health insurance funds before choosing one and becoming a subscriber, or “titulaire”. You can join either by visiting a branch or by completing an online membership form. International students must provide proof of their student status and also a certificate of household composition.

WHAT IS REIMBURSED BY THE HEALTH INSURANCE FUND?

When interventions are covered by the compulsory insurance system, they may be handled in the following ways:

Partial or full reimbursement of healthcare services, which is available for:
- Visits and consultations with GPs and specialist doctors
- Care provided by a physiotherapist
- Care provided by nurses
- Dental care
- Childbirth
- Prostheses, wheelchairs, bandages, etc.
- Care in hospital
- Care in a residential home for older people
- Functional rehabilitation care
- Medications prescribed by a GP, specialist doctor, dentist or midwife.

Payment of benefits in the following situations:
- incapacity for work
- maternity leave
- childbirth leave
- adoption leave
- breastfeeding leave
- leaving work.

The interventions covered by the supplementary insurance system include a range of different benefits and services. These include partial reimbursement of sports association memberships, contributions towards speech and language therapy, childbirth bonus, etc.
HEALTH INSURANCE FUND DOCUMENTS

Stickers
When you join a health insurance fund, you will be given a supply of stickers, known as "vignettes". These show your name and other details as a fund subscriber. You must put one of these stickers on the treatment form you receive after visiting a doctor, dentist, physiotherapist, etc. It is advisable to keep them with you at all times.

The treatment form
You are given this document whenever you visit a doctor, dentist, physiotherapist, etc. To be reimbursed (partly or fully) for the services that have been provided, you must send this form to the health insurance fund within a maximum of two years.

Prescriptions from a doctor for medications
These should be given to the pharmacist. Some medicines are only dispensed on a medical prescription at a reduced rate.

List of reimbursements provided by your health insurance fund
A list of reimbursements is available on request from your health insurance fund.
2. WHO TO CONTACT IF YOU HAVE A HEALTH PROBLEM

IF YOU ARE ILL... SEEK PRIMARY CARE FIRST

Your GP is the first person to contact if you are ill. He or she is interested in the health of the whole person, and will provide treatment, offer personalised advice and may refer you to a specialist if needed. You can contact a GP at any time, even at night and at the weekend, using the organised on-call system. The telephone number for the on-call GP is 010/45 20 20 for Louvain-la-Neuve, and 010/40 16 70 for Ottignies. This number is also available from your doctor (or his or her answering machine), the pharmacist or in the local newspaper.

Once you have paid for your consultation, the doctor will give you a treatment form. This must be sent to your health insurance fund, which will reimburse you for a large proportion of the cost. The remainder (called the patient’s contribution, or “ticket modérateur”) is paid for by the patient.

MEDICATIONS

In a pharmacy, some medications are available over the counter and others are supplied on medical prescription. You should avoid mediating yourself! Your doctor is the best person to advise you and prescribe a suitable, effective treatment while minimising the cost to you. Medications that are available from the pharmacy without a prescription are not reimbursed by the health insurance fund, can work out expensive and may not even help.

Once you are a member of a health insurance fund, when you visit the pharmacy you will only pay the patient’s contribution for prescription medications.
THE HOSPITAL EMERGENCY DEPARTMENT

Hospitals have an emergency department, which is reserved for people referred by GPs and for situations in which emergency care is needed. Patients who use the emergency department inappropriately or abuse the service receive a penalty bill and are at risk of a long wait. So it is generally advisable to contact your GP beforehand.

ALTERNATIVE MEDICINE

For consultations with practitioners of alternative medicine (homeopathy, kinesiology, osteopathy, etc.), reimbursement is available under the supplementary insurance system and this varies from one health insurance fund to another. Your own fund can provide information on the reimbursements available. Your GP can advise you on the choice of a therapist.

PATIENTS’ RIGHTS

➤ Everyone is free to choose their doctor and change to a new one at any time.
➤ You can have an open dialogue with your doctor and decisions are always agreed between both of you.
➤ Your medical records can be viewed on request.
➤ Your doctor is always obliged to maintain professional confidentiality.

www.health.belgium.be
3. WAYS TO REDUCE YOUR HEALTHCARE COSTS

A LISTED DOCTOR

There are special agreements in place between doctors and health insurance funds, setting the maximum level of their fees. Doctors who are on the health service list charge the fees specified in these agreements and they receive certain benefits in return. Doctors who are not on the list, however, have chosen not to receive these benefits and are free to set their fees however they wish.

To avoid any unpleasant surprises, you should make sure when you make an appointment that the doctor you are consulting is on the list! You should also be aware that — at specific times — some doctors who are on the health service list still apply different fees from those set out in the agreements.

GENERIC MEDICATIONS

Generic medications are copies of the original medications. So the drugs are identical and are guaranteed to have similar effects. However, the cost of generic medications is often a lot lower. Generic copies are available of many medications, so don’t hesitate to ask your doctor or pharmacist about this.

THIRD-PARTY PAYMENT

When you pay for your visit to the doctor, you are usually asked for a fixed amount (the fee). The health insurance fund reimburses a large proportion of this when you submit your treatment form. The rest, which is paid for by the patient, is called the patient’s contribution ("ticket modérateur"). In some situations, particularly if you are in financial difficulty, you can ask the doctor to allow you only to pay the patient’s contribution: this is called the third-party or direct payment system ("tiers payant"). To simplify this procedure, you need to have stickers from your health insurance fund.
ENTITLEMENT TO PREFERENTIAL REIMBURSEMENT RATE ("BIM" STATUS)

Health insurance funds work according to the principle of solidarity, and they aim to provide more help to specific groups in the population who are in difficulty. People on low incomes may obtain “BIM” status, which entitles them to higher reimbursement of their healthcare costs. People with this status also enjoy other benefits (reduced public transport costs etc.). More information about this is available from your health insurance fund. Since 1 July 2015, GPs have been obliged to apply the third-party payment system for all “BIM” patients.

COMPLETE MEDICAL RECORD (OR “DMG”)

All doctors must keep records of every contact they have with a patient. The complete medical record (or “DMG”) contains all the medical information that is available to the GP. Patients can ask their GP for their DMG in return for a payment of 30 euros (2015) per year. This amount is fully reimbursed by the health insurance fund and the third-party payment system may also apply. The DMG means that the patient’s contribution for each consultation is reduced.

THE MEDICAL COSTS CEILING (OR “MAF”)

In the event of severe or chronic illness, patients may need a lot of care and this can give rise to considerable costs. The health insurance funds have set a maximum ceiling for the costs you may have to pay. This is based on your income. Costs above this level are reimbursed in full by the health insurance funds.
4. THE STUDENT SUPPORT SERVICE

The Student Support Service is a reference point for all students. It has a staff of some 40 professionals who provide confidential help to hundreds of students every day, allowing them to complete their studies while maintaining a healthy balance and enjoying a good quality of life. Various forms of support are available:

SOCIAL SUPPORT

The social team is available to answer questions about personal and relationship issues and also financial and administrative matters. Social support workers help students to meet the insurability requirements to join a health insurance fund. If students are in financial difficulty, a contribution towards a student’s medical expenses may be available once the request has been considered.

HEALTH

Students can talk to a healthcare professional on a one-to-one basis to discuss questions and problems relating to health: addictions, diet, emotions, sex, contraception, stress, sleep, etc.

At Louvain-la-Neuve, the Health Point (“Point santé”) is the starting point, offering a listening ear and answers to all your questions about your health. There is a healthcare professional available to all UCLouvain students who want to see one, without an appointment and free of charge, on Mondays from 13:00 to 14:00. If necessary, a student may be referred to the students’ doctor after visiting the Health Point.

PSYCHOLOGICAL SUPPORT AND PSYCHOLOGICAL & EDUCATIONAL COUNSELLING

Psychologists deal with the questions and difficulties that students encounter in their everyday and academic lives, including questions about courses or studies, family or relationship problems or other issues. The team helps students consider their options and supports them in whatever they do.
Are you a student at UCLouvain? Well, you should know that as well as the help generally provided by the Student Support Service, there are other benefits available to you as well. Talk to one of our student advisors.

Support and a listening ear

Medical help
Contribution towards healthcare costs

Computers

Jobs

Loans
THE STUDENT SUPPORT SERVICE

There are a number of different services available:
> Health
> Social and financial support
> Psychological support
> Student activities
> Student life
> Jobs
> Problems and disabilities

To visit, find out more or make an appointment:
At Louvain-la-Neuve:
via “Le point de repère” (Reference Point)
Rue des Wallons, 10
010/47 20 02
Monday to Thursday from 09:00 to 17:00
and Friday until 16:00

www.uclouvain.be/aide

LIST OF HEALTH INSURANCE FUNDS IN BELGIUM

Health insurance funds are grouped into National Unions:
> National Union of Christian Health Insurance Funds
  www.mc.be

> National Union of Neutral Health Insurance Funds
  www.mutualites-neutres.be

> National Union of Independent Health Insurance Funds
  www.mloz.be

> National Union of Liberal Health Insurance Funds
  www.ml.be

> National Union of Socialist Health Insurance Funds
  www.solidaris.be

> CAAMI (government agency for health and disability insurance)
  www.caami-hziv.fgov.be
CAAMI is a public institution that performs the same tasks as a health insurance fund and provides the same services. It does not offer any supplementary insurance so there are no subscription charges to pay.