

IMPORTANT: Health Insurance in the Netherlands

Anyone who lives or works in the Netherlands is <u>legally obliged</u> to have health insurance. This standard covers basic expenses such as doctor, hospital or pharmacy. The government regulates the content of the basic insurance. Besides the basic, people take out supplementary insurance for costs not included in the package down (e.g. extensive physiotherapy or dentist). The fees and premiums vary by insurer. The government does not interfere with additional insurance.

Getting and having the health insurance is the responsibility of individual employees. Employers (including syncreon) have no role in making sure individuals have health insurance.

Penalty for uninsured

If you are not insured for basic insurance, you risk a fine. The penalty is 130% of the nominal premium for the insurance. You pay them for each month that you should have been insured and the penalty can be calculated over a maximum of 5 years. In addition, you pay the costs when you need medical care during the period that you were uninsured. Please understand that being not insured is a major financial risk.

What is the deductible in health insurance?

There are two forms of deductibles for health insurance: compulsory and voluntary excess. Everyone 18 years or older has a compulsory excess in health insurance. In 2018, the compulsory excess is € 385.00. Of all medical expenses you have within one year, you must pay the first € 385.00 yourself. In addition, some insurers you can choose will have a higher, voluntary excess. In return, your monthly premium is lower.

Additional insurance

Not all care is covered by the basic package. Anyone can have supplementary insurance (e.g. alternative medicine or dental care. In general, the greater the coverage of your supplementary insurance, the higher the premium. Additional insurance is optional for both parties. You can choose and the insurer does not have to accept your application (no legal obligation to accept). The content and contributions of the additional packages vary by insurer. On https://www.kiesbeter.nl/zorgverzekeringen you can compare the different complementary insurances.

Collective health insurance Zilveren Kruis Achmea

We have an agreement with Zilveren Kruis Achmea for a collective health insurance. You can check all packages on their website www.zilverenkruis.nl or www.zilverenkruis.nl/english or the collective health insurance information: https://www.zilverenkruis.nl/English/insurances/collective-insurance. Participating in the collective agreement is *voluntary*. If you decide to join Zilveren Kruis, you need to enter the number of our collectivity insurance which is: 207087172. You will get a discount of 5% on the basic insurance, 15% discount on additional insurance and 15% discount on the dentist insurance. Automatically, the rate reduction from the collective insurance will be calculated.

Next to the health insurance: GP

Please contact a GP in the direct vicinity of your residence and make sure you are registered as a patient there. You need to be registered at a GP practice to receive medical care. Should you not have a GP, you can go to the emergency room of a hospital but take into account you might be obliged to pay for the medical care the same day.