

Questions and answers about your settlement of invoices

Explanations to the summary table in the cover letter

- 1. How is the deductible calculated on page 1?**

Each person insured has his or her own deductible. For the deductible on the first page, we add up all deductibles included in this statement. So you can find this sum at a glance.
- 2. Where can I find the deductible overview for the individual persons?**

On the following pages of your benefit statement, you will find detailed information about the agreed, already paid and still open deductible of each person mentioned.
- 3. What does the already paid benefit amount on page 1 mean?**

You have already received this portion of the benefit amount. We have summarized here the individual amounts that have the remark "already received" on the subsequent pages of the benefit statement.
- 4. Why is an offsetting carried out?**

There may be several reasons for this. You may have already received an advance payment, or you may have had outstanding premium payments or benefit reclaims. In other cases, you may have already received a premium refund, but the reimbursable amount is more favorable to you.
- 5. How can I tell which account money has been transferred to?**

Under "Payment to" you will find a list of all accounts that have been included in this benefit statement. For data privacy reasons, the IBAN is anonymized.
- 6. How can I tell that money has been transferred directly to a hospital?**

If we transfer money directly to a hospital, you will find the name and IBAN on the first page under "Payment to".
- 7. What do the texts under "Please note about this benefit statement" refer to?**

The information texts relate to the entire statement.

Overview deductible/bonus

- 1. What does the deductible/bonus charged to date mean?**

Your deductible or bonus is limited to a certain amount per year. Here you can see how much of it has already been accounted for in the previous settlements of this year.
- 2. What does the currently charged deductible/bonus mean?**

This is the deductible/bonus that we have taken into account in the current statement. An offset deductible/bonus reduces the amount of the payout.
- 3. Why was the deductible not offset in full?**

The fact that only a partial amount of your agreed deductible was taken into account in the settlement can have several reasons. It may be that the total amount of the invoices you submitted is less than the agreed deductible. Or, only a partial amount is still available because the remaining deductible was already billed in a previous statement that year. If your insurance with us only starts during the current year, your deductible will be calculated on a pro-rata basis.

4. What does the remaining deductible/bonus mean?

The remaining deductible/bonus is the portion of your deductible that is still outstanding in the current year and will only be offset when you resubmit invoices to us.

Overview of service billing

1. Why is the benefit amount different from the invoice amount?

We do not always pay the full invoice amount. Among other reasons, this may be because certain billed services are covered on a pro-rata basis or not covered under your plan. Or, due to a fee-for-service review, the option of full reimbursement is not provided.

2. Why isn't my doctor's name written on the bill?

Our goal is for you to find all the important information on your statement. However, the physician's name may not be included for technical reasons. We understand that this is annoying for you and we apologize.

Explanation of the "Remark" column

1. What does "tariff benefit" mean?

"Tariff benefit" means that this portion of the bill was reimbursed as agreed to in your tariff. Typically, this is a specific percentage or maximum rate that was used to calculate which amount is reimbursable. Example: You submit a bill for eyeglasses for € 100. Your tariff covers visual aids at 50 %.

2. What does "non-reimbursable" mean?

"Non-reimbursable" means that certain costs of an invoice are not reimbursed. You can find the reason by looking at the number below the listed invoice.

3. What does "open costs" mean?

This part of the invoice could not yet be considered. As a rule, we are dependent on further information here. You can find the reason by looking at the number below the listed invoice.

4. What does "already received" mean?

"Already received" means that we have already included part of the invoice in a previous reimbursement. You have already received the amount from us. We mention the amount again so that you can better understand the benefit statement.

5. What does the "see also" column mean?

The numbers in this column indicate a corresponding note below the listed invoice.

6. There are info boxes on the back of the cover letter. Does the info refer to my invoice?

The information there is not necessarily directly related to the billing. It includes general remarks that are helpful to you.

General

1. What does "family doctor system" mean?

The family doctor system means that your family doctor is your first point of contact in the event of an illness. He or she is fully informed about your medical history and will coordinate any further appointments with other specialists that may be necessary for you. This saves you unnecessary multiple examinations. You can designate any general practitioner or specialist as your primary care physician. Of course, you may also change this. Please name your current family doctor with the first invoice you submit.