

Health Insurance 9.0

Document with information about the insurance product



Company: Forsikringselskabet Dansk Sundhedssikring A/S, Hørkær 12B, DK 2730 Herlev, Tel. +45 70206121

Product: Health insurance version 9.0

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's coverage. The full terms and coverages can be viewed and downloaded via Dansk Sundhedssikring's website (ds-sundhed.dk). Here, you can also find information about the products and how to use the insurance. After entering into the agreement, an email will be sent with access to the agreed terms along with information on the use of the healthcare scheme. Each policyholder is also given access to an online portal with user-oriented information, including the specific insurance coverages.

What type of insurance is this?

This insurance is a health insurance that includes coverages and treatment of the insured party's physical and psychological health problems. The insurance uses all types of healthcare providers who can facilitate quick and relevant examination, treatment and operation, including the public healthcare system. The service includes screening, visitation, and counselling on the healthcare offerings.



What does it cover – Basis

SundhedsNavigator ('HealthNavigator')

- ✓ Medical advice
- ✓ Professional healthcare advice
- ✓ Navigation and coordination in the public and private healthcare systems
- ✓ Pregnancy counselling
- ✓ Telephonic consultancy for management stress and wellbeing
- ✓ Online courses for mental health challenges

Treatment

- ✓ Physiotherapist treatment
- ✓ GLA:D training
- ✓ Chiropractic treatment
- ✓ Psychologic treatment
- ✓ Psychotherapy
- ✓ Online stress management plan
- ✓ Mental health hotline
- ✓ Three-party conversations
- ✓ Cool Kids/Chilled programme
- ✓ Children's product for children with mental health issues
- ✓ Digital ADHD/ADD counselling
- ✓ 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 (further detailed in the terms of the insurance)
- ✓ Dental treatment
- ✓ Second opinion
- ✓ Personalised medicine and cancer treatment abroad

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 (without GP's referral)
- C: Private addiction treatment
- D: Healthcare scheme (massage, physiotherapy, chiropractor, reflexology, telephonic psychological therapy)
- E: Private hospital coverage
- F: Chronic conditions (massage, physiotherapy, chiropractic, shockwave therapy, telephonic psychological therapy, podiatry)
- G: Online emergency medical service
- H: Extended psychiatric assessment of ADHD and autism
- K: Surgery of chronic musculoskeletal disorders
- CC: Collective child coverage



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, autism
- ✗ Expenses for GP
- ✗ Damage due to civil unrest, nuclear energy and radioactive radiation or radioactivity
- ✗ Epidemics and pandemics



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.
- ! Chronic diseases are defined by Dansk Sundhedssikring as diseases considered permanent and thus not curable.
- ! 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.
- ! If emergency psychological counselling is requested, the request must be made within 48 hours of the incident.
- ! The maximum cover per person per insurance year is DKK 3,000,000.



Where am I covered?

- ✓ The insurance covers examination, treatment and operation in Denmark at a hospital or clinic referred to by Dansk Sundhedssikring, and in Sweden, Norway or Germany when agreed with Dansk Sundhedssikring.
- ✓ Other rules apply to the Cancer Care 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 primary insured pays through the employer.
- Co-insured are invoiced via letter/email sent to the primary insured's address/email.
- The insurance is paid in advance and is valid for a period of 12 months.
- 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.
- If a transferral from another healthcare insurance company is not made immediately and without delay, certain coverages may be subject to a waiting period.
- The insurance is valid as long as it is paid in due time, the insurance is not actively cancelled, and the primary insured is still employed in the company which has signed the insurance agreement.
- Upon termination of employment in the company which has signed the insurance agreement, the primary insured and any co-insured can request for a continuation as a private client by contacting Dansk Sundhedssikring (for further information, please refer to: ds-sundhed.dk).



How do I cancel the policy?

- The insurance can be terminated at any time by one month's notice to the end of a month and must be done in writing to Dansk Sundhedssikring. If the insurance is taken out through your employer, other rules apply.
- In the event of non-payment of the first charge, Forsikringselskabet Dansk Sundhedssikring can terminate the insurance without further notice.
- In case of late payment of the subsequent charges, a reminder will be sent. If the charge is not paid on time, the right to compensation ceases and/or the insurance is cancelled.