



Explanation of the admission statement - conventional hospitalisation and one-day admission

As a patient, you can make some choices that have an important impact on the final cost of your hospitalisation. You can make those choices by filling in the admission statement.

This explanatory document is meant to inform you about the cost of your hospitalisation so that you can make well-considered choices when filling in the admission statement.

The cost will be determined by the following factors:

1. Your insurance policy;
2. Your choice of room;
3. The duration of your hospitalisation;
4. Pharmaceutical costs;
5. Fees charged by physicians and paramedics;
6. The costs of any additional products and services.

Do you have further questions about the costs relating to your medical treatment or your hospitalisation?

Please contact our *Patient Registration Service* (T 053 72 42 14 or opname.aalst@olvz-aalst.be) or your treating physician.

Your health insurance fund will also be able to help you.

If necessary, you can also contact our *Social Service* (T 053 72 41 11) and *Mediation Service* (T 053 72 41 11).

More information about the costs associated with your hospitalisation and treatment can be found at (www.olvz.be).

Under the Patient Rights Act every professional is required to clearly inform patients about the intended treatment. This information also relates to the financial consequences of the treatment.

1. Insurance

Every Belgian resident must be covered by a health insurance policy. This health insurance will pay part of your costs of your medical treatment and hospitalisation through the health insurance fund. As a patient, you will have to pay part of those costs yourself. That is your personal contribution or the non-refundable portion of your medical costs. Some people benefit from **increased reimbursement rates** (also called preferential tariff rates) based, among other things, on their income and/or family situation. Those people pay a lower personal contribution than do regular insurance patients when hospitalised. You can check with your health insurance fund whether you benefit from that tariff.

People **who are not in compliance** with the requirements with regard to compulsory health insurance will have to pay all costs related to their hospitalisation themselves. Those costs can be significant. It is therefore essential to ensure that you are in compliance with these requirements. In case of a problem, you should contact your health insurance fund as soon as possible.

Certain interventions (e.g. for **purely cosmetic** reasons) will not be reimbursed by the sickness fund. In that case, you will have to pay all hospitalisation costs (both medical treatment and stay) yourself, even if you benefit from increased reimbursement rates. Your physician or sickness fund will be able to provide you with details regarding the reimbursability of certain interventions.

If your admission is the result of an **accident at work**, you must inform the hospital about this at the time of admission. If the occupational injuries insurance recognises the accident, it will pay the costs directly to the hospital. Some costs, e.g. additional charges for an individual room, are never reimbursed by the occupational injuries insurance. You will have to bear those costs yourself.

If you have also taken out **hospitalisation insurance**, your insurance company may reimburse an additional part of your hospitalisation costs. Only your insurance company can inform you about the costs it will or will not reimburse. So, do not hesitate to contact your insurance company for information.

If your situation is not mentioned above (e.g. patient receiving income support from a public social assistance centre (OCMW/CPAS), patient insured in another member state of the European Union, ...), please contact our *Patient Registration Service at T 053 72 42 14*.

2. Choice of room

The type of room you choose for your hospitalisation will determine the cost of your hospitalisation. This choice of room will not affect the quality of care provided nor will it limit your free choice of physician.

As a patient, you can choose to be cared for in:

- a shared room;
- a two-patient room;
- a private room;

Patients requiring overnight hospitalisation and staying in a *shared room or a two-patient room* will pay **no room supplements and no fee supplements**.

If you explicitly choose to stay in a private room (and actually stay in such a room), the hospital is entitled to charge **room supplements** and the physicians are entitled to charge **fee supplements**. Staying in a private room is therefore more expensive than staying in a shared or a two-patient room.

When you opt for a certain type of room, you accept the associated financial conditions as regards room supplements and fee supplements.

- If for reasons beyond your control you are allocated a type of room that is more expensive than the type you have chosen, the financial conditions of the type of room you have chosen will apply (e.g. when you choose a shared room and you are allocated a private room because no shared rooms are available, the shared room conditions will apply).
- If for reasons beyond your control you are staying in a less expensive type of room, the financial conditions of the type of room in which you are actually staying, will apply. (e.g. when you choose a private room and you are allocated a shared room because no private rooms are available, the shared room conditions will apply, also if you are the only patient staying in that shared room).

3. Hospitalisation costs

13.. Legally fixed patient contribution per day

Regardless of your choice of room, you will pay a legally fixed patient contribution for each day you stay and are cared for in hospital.

	Beneficiaries with preferential rate	Beneficiaries with dependents	Beneficiaries with no dependents	Long-term unemployed (single or head of household) and their dependents
1st day	€8.26/day	€73.86/day	€73.86/day	€63.59/day
From the 2nd day	€6.28/day	€16.55/day	€16.55/day	€6.28/day
From the 91st day	€6.28/day	€6.28/day	€16.55/day	€6.28/day

Our hospital charges €458,81 (acute services) / €278,80 (Sp-chronic) / € / 575,49 (Sp-palliative) per hospitalisation day. If you fail to comply with the requirements set by your sickness fund, you will have to pay all those charges yourself.

3.2. Room supplement per day

If you stay in a *shared room or a two-patient room*, it is legally forbidden for a hospital to charge any room supplements.

If you explicitly choose to stay in a private room and actually stay in such a room, the hospital is entitled to charge a room supplement. The room supplement in our hospital amounts to:

- €36,04 per day (room without shower) / €42,50 per day (room with shower)

In the following exceptional circumstances it is legally forbidden to charge a room supplement to the patient:

- When your treating physician deems hospitalisation in a private room to be a medical necessity;
- When you are cared for in a private room for organisational reasons because the type of room you have chosen is not available;
- When you are admitted or transferred to an intensive care unit or the emergency unit, for the duration of your stay in that unit;
- When child is admitted accompanied by a parent.

4. Pharmaceutical costs

These costs include costs related to medication, implants, prostheses, non-implantable medical devices, etc. These costs can be charged, in part or in full, to the patient regardless of the room type.

A fixed patient contribution of €0.62 per day will be charged for medication that is reimbursed by the health insurance. On your hospital bill, this amount will be included in the hospitalisation costs. Those costs include a large number of medicines, which will not be billed separately. This fixed contribution is always payable regardless of whether and which medicines are actually taken.

Medicines that are not reimbursed by the health insurance are not included in this fixed contribution and will be listed separately on your hospital bill. You will have to pay the full costs of those medicines yourself.

In addition, you will have to pay the costs of some implants, prostheses, non-implantable medical devices, etc., in part or in full. Those costs depend on the type and on the material they are made of. Those materials and products are prescribed by your physician, who will be able to inform you about their nature and price.

5. Fees charged by physicians

5.1. Legal rate

The official or legal rate is the fee that a physician may charge to a patient. This fee consists of two parts:

- the amount reimbursed by the health insurance
- the legal personal contribution (= the amount you have to pay yourself as a patient). Sometimes, the medical service is fully reimbursed by the health insurance and no patient contribution is due.

There are also medical services that are not reimbursed by the health insurance and for which the fees can be freely determined by the physician.

5.2. Legal personal contribution

Regardless of your choice of room, you have to pay a legally fixed patient contribution (= non-reimbursable portion) for your (para)medical treatment. The legally fixed patient contribution is applied to all patients who are in compliance with their health insurance requirements. People who are not in compliance with the requirements with regard to compulsory health insurance will have to pay all costs related to their hospitalisation themselves (cf. point 1).

5.3. Fee supplement

Hospital physicians are entitled to charge fee supplements on top of the legal rates. Fee supplements are not reimbursed by the health insurance and are fully borne by the patient.

If you stay in a *shared room* or a *two-patient room* during an overnight stay, it is legally forbidden for physicians to charge any fee supplements.

The maximum fee supplement charged in our hospital can be found in the admission statement and amounts to 150%.

If you explicitly choose to stay in a private room and actually stay in such a room, all physicians are entitled to charge fee supplements.

- The maximum fee supplement that a physician in our hospital is entitled to charge amounts to 150% of the legally fixed rate. Every physician involved in your child's treatment physician involved in your treatment (anaesthetist, surgeon,...) is entitled to charge a fee supplement.

For example: the maximum fee supplement charged by a physician amounts to 100%. For an intervention that legally costs €75 and of which €50 is reimbursed by the sickness fund, you will have to pay €100 yourself (€25 personal contribution and €75 fee supplement).

In the following exceptional circumstances it is legally forbidden to charge a fee supplement to the patient:

- When your treating physician deems hospitalisation in a private room to be a medical necessity;
- When you are cared for in a private room for organisational reasons because the type of room you have chosen is not available;
- When you are admitted or transferred to an intensive care unit or the emergency unit, for the duration of your stay in that unit.

5.4. Admission of a child accompanied by a parent

When your child is accompanied by a parent when admitted, you can choose to have your child admitted and cared for at the legally fixed rate, without paying any room supplement and fees supplement. Your child accompanied by a parent will then be admitted in a two-patient room or a shared room.

If you explicitly choose to have your child admitted in a private room while it is accompanied by a parent and you actually stay in such a room, the hospital is not allowed to charge **any room supplement**. However, every physician involved in your child's treatment is entitled to charge **a fee supplement**.

5.5. Schematic overview of supplements in case of overnight hospitalisation or day care treatment (fixed nursing-day)

	<i>When you choose a shared or two-patient room</i>	<i>When you choose a private room</i>
<u>Room supplement</u>	<u>NO</u>	<p>YES (€36,04 to €42,50)</p> <p>NO, if:</p> <ul style="list-style-type: none"> - your physician decides that your state of health requires a private room for examination, treatment or supervision; - you have chosen a <i>shared or two-patient room</i> and no such room is available; - you are staying in the intensive care unit or the emergency care unit - a child is admitted while accompanied by a parent
<u>Fee supplement</u>	<u>NO</u>	<p>YES</p> <p>NO, if:</p> <ul style="list-style-type: none"> - your physician decides that your state of health requires a private room for examination, treatment or supervision; - you have chosen a <i>shared or two-patient room</i> and no such room is available; - you are staying in the intensive care unit or the emergency care unit

5.6. Billing

All fee supplements will be billed by the hospital.
 Never pay these directly to the physician.
 Feel free to ask your treating physician for information about the fee supplements (s)he applies.

6. Various other costs

During the stay in the hospital you can, because of medical reasons or reasons of comfort, use a number of products and services.

The costs for the accommodation of an accompanying person who has not been admitted as a patient but who is staying in your room (bed linen, meals, etc.) will be billed as “various costs”.

Those costs are fully borne by you regardless of the type of room.

A price list of those products and services is available at the *Patient Registration Service* and can also be consulted on the website of the hospital.

Some examples of services and products that are often requested:

- food and drinks: extra meals, refreshments, snacks and drinks;
- hygiene products: basic toiletry products (soap, toothpaste, cologne, ...) and basic toiletry items (comb, toothbrush, shaving tackle, tissues, ...);
- laundry (personal laundry);
- accompanying person: occupation of room or bed, meals and drinks;
- other various products and services: other frequently requested products (feeding bottles, teats, breast pump, crutches, earplugs, small stationery, ...) and often requested services (manicure, pedicure, hairdresser, ...), ...

Besides this the hospital bills under this section an accommodation fee. This regards a fixed fee for the present room comfort (television, refrigerator, internet).

7. Advances

The hospital may ask for an advance payment per hospitalisation period of 7 days. The maximum amounts of the advances are legally fixed.

	Beneficiaries with preferential rate	Children as dependents	Other beneficiaries
<i>shared or two-patient room</i>	€50	€75	€150
<i>private room</i>	€ x	€ x	€ x

If the hospital has been informed that you benefit from the maximum bill advantage, an advance may only be asked when you stay in a private room, not when you stay in a two-patient room or a shared room.

8. Miscellaneous

All amounts mentioned in this document can be indexed and are therefore subject to change during the hospitalisation. The amounts apply to patients who are in compliance with the requirements with regard to compulsory health insurance (cf. point 1).

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