

File on health and accident insurance policies to supplement JSIS

offered to the officials and other agents of the European Institutions

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¹ Applies only to supplementary insurance coupled with the JSIS and based on the reimbursement slip of that scheme.

² Should be applicable for children in the near future.

I. Reimbursement of health care charges

There are four sources from which officials and other agents of the European Institutions may obtain partial or total reimbursement of their health care charges. These are:

- **The Joint Sickness Insurance Scheme – JSIS (Staff Regulations)**
- **Accident insurance (Staff Regulations or to be subscribed)**
- **Schemes supplementary to the JSIS (to be subscribed)**
- **Assistance schemes for coverage whilst abroad (to be subscribed)**

1. The JSIS (Staff Regulations)

The JSIS³ enshrined in Staff Regulations for officials and other agents of the Institutions provides for a theoretical reimbursement of between 80% and 85% of the cost of treatment in the case of sickness, hospital stays, analyses, medicines and so on, whether the official is in active service or retired or in disability.

The reimbursement can be 100% in the case of serious illness duly recognised by the JSIS.

The JSIS has established ceilings for a good many treatments and there are also exclusions and rules on excessively high fees. These rules can reduce reimbursements, especially when care and treatment is given in countries outside the European Union.

Recourse to Article 72(3) on special reimbursement limits the risk of a 15% or 20% reduction in a reimbursement where high medical costs are involved: the excess cannot exceed the sum of half a basic monthly salary in a given year. But one must not forget the ceiling, the exclusions and reductions for excessively high costs.

2. Accident insurance (Staff Regulations)

The Staff Regulations (Art 73) provide for high complementary cover for officials in active employment who are involved in occupational accidents and those occurring in private life: reimbursement of medical care costs is at 100% and may also provide a lump sum if the accident results in permanent disability (partial or total) or death.

Retired staff or those on permanent or temporary disability allowances⁴ and those on leave on personal grounds (LPG/CCP), the partners of active staff and children are not covered by this statutory supplementary accident insurance. But **JSIS always reimburses medical care given as a result of an accident as if it were for an illness** (i.e. 80% or 85% with ceilings, exclusions and possible reductions for excessive costs). JSIS would however not provide any compensation in case of disability or death after an accident.

A specific supplementary accident insurance is offered by Cigna (negotiated by AIACE - framework contract) to pensioners, to the colleagues in disability and to spouses of retired staff (and hopefully to children in the future). It includes: a capital in case of death, a capital in case of permanent total or partial disability, it supplements at 100% (no limitation) the medical care expenses reimbursed by JSIS as if it were an illness.

A death and permanent total disability (as a result of accident or illness) insurance policy is also offered by Afiliatys for officials (up to 65), for partners and for children.

³ Full reference: General Implementing Provisions (GIP) – C(2007)3195 / 01.07.2007

Simplified reference: Reimbursement of medical expenses – Practical guide, PMO 20.06.2014

⁴ Staff on LPG/CCP can pay to maintain the statutory accident insurance

3. Supplementary insurance

Any member of the JSIS may take out a private health insurance policy for himself and his family – a policy that would top-up the JSIS reimbursements so as to provide more or less 100% cover depending on the treatment and on the general conditions of the policy.

Such supplementary insurance, which may be individual or collective, is offered by well-known companies such as Allianz BE, Cigna, DKV (LALUX) and FOYER Global Health Luxembourg; Allianz Worldwide Care; Expat & Co. All these companies are familiar with JSIS rules.

In general, they cover, with certain limits, that portion of the bill for medical care not covered by the JSIS. Some of them reimburse hospital stays at 100%. Others simply reimburse 20% or 15% of the bill along the theoretical rules of JSIS

All follow the JSIS rules in the matter of care provided as a result of an accident, reimbursing as if it were an illness and depending on the conditions set out in the contract. Options exist which exclude the accident for the affiliates covered by a specific accident insurance policy.

Annual premiums vary greatly according to the coverage but, for supplementary hospitalisation policies, the annual premium is generally between €70 and €300, depending on age.

These policies to supplement JSIS can differ considerably as regards health care cover and there are often limits on care outside the European Economic Area (EEA).

4. Assistance schemes

As we have said, the JSIS and the supplementary schemes sometimes have serious limitations when it comes to reimbursing care outside the European Economic Area (EEA) or in countries where the medical care costs are high (USA, Switzerland, Norway). One must also be careful about the high cost of “private medicine” in certain countries such as Italy or the United Kingdom. Several supplementary insurance companies limit their reimbursements to €25,000 per year outside the EEA and in particular in the USA.

The JSIS does not reimburse the cost of repatriating its members who fall ill when abroad and, since most supplementary insurance companies follow JSIS rules, they do not take repatriation into account either.

Anyone who requires cover when travelling outside the European Union or even just outside his country of residence should take out an “Assistance” insurance, which provides cover for repatriation and for emergency treatment on the spot, in all countries visited, up to the sum of €1,000,000 or even with no limit.

PMO stresses the need for such an assistance insurance policy: too many colleagues come back home with huge bills that the PMO cannot reimburse correctly.

Several credit cards provide assistance schemes but it is essential to read and take note of the general conditions, limits and exclusions before you rely on them !

II. Discussion on the need for insurance

There are no ‘free lunches’! The amounts paid by the insurers for expenses are never paid ‘by the insurance company’ but by the other policy holders! The insurance industry and social security schemes have very different, if not opposing, objectives.

If someone were not to take out a policy but were to place the equivalent of the insurance premium on a deposit account, that person would soon put together a small capital sum. This sum would cover the residual risk not covered by JSIS or by Article 72.3 (half of a monthly salary or pension - annex). The person concerned would become his own insurer.

To be noted is that an insurance policy premium has to cover the VAT of 9.25 % in Belgium, administrative and management costs and the profit of the insurance company.

This discussion does not in any way suggest that insurance policies are useless, because there are financial, psychological and cultural dimensions which lead some people to prefer the certainty of such a policy. The administrative simplicity and prompt reimbursement provided by supplementary insurance companies is an advantage, a real comfort. Some people may feel it necessary or may simply wish to take out a policy to cover less frequent, but more costly, risks.

In addition to the basic considerations above, we must weigh up the annual premium versus financial risk factors. The relation of one to the other can be very favourable if we content ourselves with the annual coverage of high risks (major risks), for example with a policy with an annual premium of €70-300, depending on age, to cover all hospitalisation and related expenses.

It can be less favourable if we want all medical expenses covered - for example: annual premium up to €2,200, depending on the level of supplementary reimbursement and the age of the person insured.

Supplementary insurance in the second case would seem somewhat unjustified, considering the limiting risk factor given by Article 72.3⁵, except where the person concerned is in receipt of a high monthly salary or pension and knows that his or her average annual medical expenses are going to be high too.

Elderly members of the JSIS frequently have to cover high annual non-reimbursed expenses (more than the half month's salary or pension) due to various conditions not being recognised by the JSIS as a serious illness (which would be reimbursed up to 100%).

The 2020 report confirms:

Year	2015	2016	2017	2018	2019	2020	2021	2022
Average reimb. for active staff (€)	2,435	2,593	3,064	3,098	3,054	2,753*	2,976	3,165
Average reimb. for retired staff (€)	6,384	6,030	5,823	6,068	6,038	6,204	5,737*	6,153

*COVID effect ?

The average non-reimbursement is in principle 15 to 20% but in 2015 it was 23%, in 2017 19%, in 2022 26%, due to limitations. This average non-reimbursement, for capped services (e.g. specialist visit, physiotherapy) was 36% in 2020, in 2022 it was greater than 40% (ref. CGAM).

A knee prosthesis with revalidation in hospital easily leads to non-reimbursement of €5,000.

Additional insurance may therefore be justified (without forgetting Article 72§3). The level of coverage and therefore the annual premium must be considered objectively. Hence, supplementary insurance can be called for. We have to look objectively at the level of cover in relation to the annual premium.

III. Criteria on which to base a choice of health insurance policies to supplement the JSIS⁶

1. What financial risk?

Article 72(3) of the Staff Regulations states that the financial risk is, at the most, equivalent to half of one month's salary or half of one month's pension in any given year. Special reimbursement in that case depends on the family composition (see annex).

However, one must bear in mind that there are ceilings and possible exclusions under JSIS rules. PMO can also apply Art. 20.1. in case of excessive costs. There are also limits regarding certain types of care (cf. Article 8(2) of the rules – Reference 12).

Therefore, the risk could be greater than half of a monthly basic salary or pension.

⁵ If this supplementary special reimbursement is requested by the JSIS member and granted by the authority.

⁶ Applies only to supplementary insurance coupled with the JSIS and based on the reimbursement slip of that scheme.

2. When to take out insurance?

More often than not, a medical questionnaire has to be completed to obtain supplementary health insurance. A young applicant is generally accepted without any reservation. An applicant aged 65 with pre-existing conditions, is liable to be offered insurance with reservations or exclusions, or be obliged to agree to pay an extra premium – or be refused altogether for the conditions in question.

One could conclude that it is wise to take out insurance when still very young. However, one could pay for this insurance for years without any return.

JSIS statistics show however that for the age range 30-35 years, the average amount not reimbursed is statistically around €330, much higher than the annual premium of basic supplementary cover.

3. What kind of insurance?

The insurance policies to supplement JSIS are offered to officials of the European Institutions to be considered as expatriates. Such policies do not depend on national rules. They are tailored to supplement the JSIS.

Several possibilities are to be considered:

- **Collective⁷ or individual insurance?**

Collective insurance (or framework contract) is negotiated by the association covering the potential interests of members of that association (e.g. AFILIATYS and AIACE). Experience has shown that the contract terms can change after a certain time (e.g. five years), without it being possible for the insured person to negotiate. The advantage that persons insured collectively have is that they constitute a more powerful negotiator vis-à-vis the insurance company, for example, in case of dispute on reimbursements or when the company wishes to raise the premium.

An individual insurance is a contract between the insurer and his client. The conditions are fixed and set out in that contract, except those explicitly mentioned as being variable (e.g. indexation of the premium). Individual insurance contracts are usually annual contracts with tacit renewal. Each year, the insurer has the possibility to take the product off the market and/or replace it by a different product with, for example, new exclusions or restrictions in coverage. The general conditions will determine to what extent the client is protected against this.

- **High risks or comprehensive insurance?**

There are several options:

- hospitalisation⁸ or major risks (e.g. annual premium of the order of €70-300 depending on age),
- hospitalisation and out-patient care⁹ with coverage of additional costs of dental fees, eye treatment and other special care (e.g. annual premium from €1,450 to €2,200, depending on the out-patient treatment covered, the level of supplementary cover and the age of the beneficiary).

It is probable that a person who is concerned will tend to insure against the risk of a hospital stay that would be liable to cost more than half of a basic salary or pension, given that the annual premium for this kind of insurance, limited to major risks, is low.

4. Financial level of supplementary cover

Some policies simply cover 20% (or 15%) of the medical treatment at the most, regardless of how much the JSIS reimburses. If the JSIS reimburses 80% (or 85%), the beneficiary has 100% cover. If the JSIS limits its reimbursement, to say 60%, because of ceilings, or because it deems that expenses are beyond reasonable and customary levels (excessive costs), there will be a patient share of 20%, even after intervention of the supplementary cover which is limited to 20%. The patient share could be much higher in the case of hospitalization in countries with high medical care costs.

⁷ Group insurance policies imply that the institution collects the premiums.

⁸ Expenses incurred as result of surgical operation or admittance to hospital because of illness or accident. Also covers collateral expenses.

⁹ Cost of normal medical visits, prescribed medicines, care other than in a hospital, prescribed medical examinations and so on, rendered necessary as a result of illness or accident.

Others policies reimburse everything that is not covered by the JSIS, even paying out more than the JSIS, to reach the 100% reimbursement.

5. Insurance for life or not

It is essential to be covered for life.

Warning: some insurance policies are suspended when you reach the age of 65 or 80 or when you retire! Maintaining such insurance after these dates may depend on a medical check-up and/or on negotiations with the insurance company.

Some insurance companies change the conditions and coverage when you reach the age of 65, 75 or 80.

The possibility of maintaining the insurance cover when leaving the EU Institutions must be considered. This can be essential for staff with a temporary contract.

6. Annual premium irrespective of age or variable premium depending on age

Certain simple hospitalisation policies provide insurance where the annual premium does not depend on age. Others have premiums that vary with age. Often, however, premiums are also statistically adjusted if they are not blocked by a framework contract; after several years, the premium will be just as high in either case.

7. Cover of treatment required following an accident

The policies hereafter cover all the treatment provided for in the policy (hospitalisation only or hospitalisation plus out-patient treatment), regardless of whether the treatment is required as a result of an illness or of an accident. However two policies propose an option with no cover of medical care costs resulting from an accident, to be considered when the affiliate has a specific accident insurance including to top up of accident related medical care costs.

8. Further considerations

- **Geographical spread of guarantees under the policy**

Does the insurance policy offer worldwide coverage; does it accept several languages? Insurance companies and brokers try to limit the administrative burden. There are policies which offer good cover in Belgium and Luxemburg but refuse to offer worldwide coverage. Insurance can thus be national or cover the EU countries only or the European Economic Area only (EEA = EU plus Iceland, Norway, Switzerland). JSIS never covers repatriation!

- **Stability of the insured population**

An insurance policy covering a population of retired staff will soon end up with premium increases due to the ageing of the population.

Intergenerational insurance policies will remain more stable and could even be more “profitable” if they increase the proportion of young members. The insurance policy could then be improved and the insurance company can make special offers.

- **Stability of the premium and provisions under the policy**

Indexation, possibility of updated evaluation, size of the negotiating group in the case of group insurance and so on.

- **Solvability and weight of the insurance company.**

It is wise to consider essential criteria such as the financial stability and weight of the insurance company. To take out an insurance policy that risks being suspended after a few years owing to the company's financial problems could lead to severe difficulties: with ageing, it becomes more and more difficult to take out new medical insurance.

- **Availability of the agency or broker**

Is the office or person easily contactable? How good are they at administering a claim? What languages do they speak?

IV. Health insurance to supplement JSIS

1. HOSPITALISATION - SURGICAL OPERATIONS

Also called “Major Risks”.

A serious operation with subsequent long-term rehabilitation (in hospital) and care can prove expensive: some tens of thousands of euros. In these circumstances, it's a good idea to have some back-up cover, especially if it enables you to go over the JSIS ceilings and if it is not too expensive (e.g. €70 to €300 per year). Moreover, it avoids the complicated administration of requesting a special reimbursement under Art 73(3) see III.1. above.

There are 2 collective insurance policies and 1 individual policy, well documented, available to active and/or retired EU Institutions staff affiliated to the JSIS and their family members. These insurance policies are private but specifically adapted to JSIS rules; they are limited to hospitalisation care and what is related to the hospitalization.

- **HOSPI SAFE** by Allianz Worldwide Care negotiated by **Afiliatys**; USB & SFE Europa, U4U
- **HOSPITALIZATION** by Cigna (BCVR 8673), negotiated by **AIACE**.
- **EUROPAT INSURANCE (EUI) – Hospitalization** by Expat & Co suggested by FFPE.

1.1. **HOSPI SAFE ILLNESS AND ACCIDENT by Afiliatys**

Afiliatys – USB – SFE Europa – U4U - R&D Insurance company & Broker Allianz Worldwide Care (Reference 2) (New framework contract 2020-2029)

- **This collective insurance policy must be taken before retirement**
- **Partners and children can also be covered**
- **Medical questionnaire if subscribed less than six months before retirement. No waiting period but a moratorium of 2 years for illnesses existing at the moment of the subscription**
- **Lifelong insurance**
- **Worldwide cover but limitations outside the EEA¹⁰**

Hospi Safe deals with hospitalisation (single room), surgical operations resulting from illness or accident and related expenses incurred two months prior to and six months after the stay in hospital, prosthesis and medical material included. One day clinic included.

Subscribers receive 100% reimbursement of the difference between actual expenditure and the amount reimbursed by the JSIS. The top-up reimbursement is not subject to JSIS ceilings and excessive costs rules!

Once admitted, you can remain insured even on leaving the Institutions (contractual agents) if of interest, depending on the country and health system.

Reimbursement cannot be higher than 20% of costs claimed for post-operative rehabilitation.

All medical expenses linked to pregnancy are refunded 100%. Children up to 24 months are insured free of charge.

The policy is re-negotiated every 10 years by Afiliatys, .

Example (hypothetical): Hospitalization fees= €1,000, JSIS reimbursement = €7,500 (ceilings) => top-up = €2,500.

Example (hypothetical): Hospitalization fees= €10,000 in Zwitserland, JSIS reimbursement = €4,300 (country with high medical care costs : coefficient 1.86) => top-up = €5,700 (more important than the JSIS reimbursement !)

¹⁰ Outside the European Economic Area, the healthcare costs will be reimbursed up to an overall maximum of 25,000 EUR per insured and per calendar year

Example (hypothetical): Rehabilitation costs= €1,000, JSIS reimbursement (ceilings) = €600 => top up = €200 (being 20%of the cost) and not €400.

Annual premium **2025** which varies depending on age (€ - BE taxes¹¹ included) but fixed up to 31.12.2029 (except Eurostat index):

Age	0-1	2-18	19-35	36-50	51-60	61+
Annual prime (€)	0	86,85	104,17	156,24	208,35	291,70

Age to be considered at the date of payment of the prime: January 1st

1.2. **HOSPI SAFE ILLNESS (Illness only) by Afiliatys**

*Afiliatys – USB – SFE Europa – U4U – R&D Insurance company & Broker
Allianz Worldwide Care (Reference 2) (New framework contract 2020-2029)*

- **This collective insurance policy must be taken before retirement**
- **Partners and children can also be covered**
- **Medical questionnaire if subscribed less than six months before retirement. No waiting period but a moratorium of 2 years for illnesses existing at the moment of the subscription**
- **Lifelong insurance**
- **Worldwide cover but limitations outside the EEA¹²**

The cover is the same as in 1.1. here above but consequences of an accident are excluded.

Annual premium **2025** which varies depending on age (€ - BE taxes¹³ included) but fixed up to 31.12.2029 (except Eurostat index):

Age	0-1	2-18	19-35	36-50	51-60	61+
Annual prime (€)	0	63,04	77,10	115,42	154,04	214,17

Age at the date of payment of the prime: January 1st

Note

The option Hospi Safe Illness, without coverage of accidents, is justified :

- a. If the affiliate is an active staff member and thus covered by Art. 73 of the Staff Regulations: accident cover to supplement JSIS (Art. 72)
- b. If the interested retired staff member also takes out an accident insurance policy, for example, the specific “Accident” policy proposed by AIACE – Cigna (see V.1. hereunder).

1.3. **HOSPITALIZATION (SICKNESS and ACCIDENT) by AIACE**

*Insurance Company & broker : Cigna (BCVR 8673) (Reference 3)
Formerly “Major Risks and Accident” (Specifically **for retired staff**)*

- **Collective insurance to be taken up on or after retirement.**
- **Available for partners as well.**
- **The age limit is 66 (or 12 months after the date of retirement). The limit of 66 is not applied to partners.**
- **Subscription is subject to a medical questionnaire. There is no waiting period**
- **Lifelong insurance and worldwide cover.**

This policy covers only those costs relating to a hospital stay (single room) and/or an operation resulting from an illness and related expenses incurred two months prior to and six months after the stay in hospital. The option “Major Risks and Accident” also covers costs relating to hospital stay and operation resulting from an accident.

¹¹ Taxes in Belgium: 9.25 %.

¹² Outside the European Economic Area, the healthcare costs will be reimbursed up to an overall maximum of 25,000 EUR per insured and per calendar year

¹³ Taxes in Belgium: 9.25 %.

Reimbursements cover 100% of the difference between expenses and JSIS reimbursement. However, these reimbursements are limited to the amount of the RCAM reimbursement if the latter is less than 50% (for example: countries with expensive medicine)

This framework contract is re-negotiated periodically by AIACE with Cigna and Allianz BE on the basis of statistics. It is automatically renewed from year to year if there is no re-negotiation.

Example (hypothetical): hospital fees: €1,000, JSIS reimbursement (ceilings or excessive costs) = €400, top-up reimbursement = €400.

Annual premium **2024** (€ – BE taxes included). Follows the Eurostat index.

	Sickness and accidents
Without any deductible	330,75
With €100 deductible	288,18

1.4. **HOSPITALIZATION without ACCIDENT by AIACE**

Insurance Company & broker : Cigna (BCVR 8673) (Reference 3)

Formerly “Major Risks and Accident” (Specifically for retired staff)

- **Collective insurance to be taken up on or after retirement.**
- **Available for partners as well.**
- **The age limit is 66 (or 12 months after the date of retirement). The limit of 66 is not applicable to partners.**
- **Subscription is subject to a medical questionnaire. There is no waiting period**
- **Lifelong insurance and worldwide cover.**

The cover is the one proposed in 1.3. here above but consequences of an accident are excluded.

Annual premium **2024** (€ – BE taxes included), follows the Eurostat index.

	Without coverage of accidents
Without any deductible	294,43
With €100 deductible	256,51

Note

The option “HOSPITALIZATION” without coverage of accidents, is justified if the interested retired staff member also takes out the specific “Accident” policy proposed by AIACE – Cigna (see V.1. hereunder).

1.5. **EUROPAT Insurance (EUI) Hospitalization**

Insurance company: Expat & Co Broker: WYR (Reference 5)

- **This individual insurance can only be taken before the age 70.**
- **Partners and children can be covered.**
- **There is no medical questionnaire. Some waiting periods of 3 month. Moratorium of 2 to 3 years for pre-existing illnesses.**
- **Lifelong cover.**
- **Territorial limits of application to be defined with the insurance company. (EEA or worldwide or limitations)**

Module 1 (without options) of the policy covers the costs relating to hospital stays (single room) and surgical operations (due to illness or accident), prostheses, rehabilitation, dental care after an accident, pregnancy, childbirth, outpatient costs related to the hospitalisation 60 days before and 120 days after; accompanying a hospitalised child, nursing at home (up to 60 days), palliative care (max 60 days), urgent transportation.

Supplementary reimbursement to JSIS is at 100%.

Some ceilings exist: e.g. Post-surgical rehabilitation treatment: €5,000; nursing at home or in a specialised centre: €5,000.

Annual reimbursement limit of €2,000,000.

If JSIS cover ends (end of temporary contract) there is the immediate possibility to switch to Expat Gold policy, very similar to the EU one.

Annual premiums 2023 (to be paid monthly) depend on age upon subscription. They do not vary afterwards because of age. (€ - BE taxes included).

Age at subscription	0-19	20-24	25-29	30-34	35-39	40-44
Hospitalization	133	245	267	300	322	344

Age at subscription	45-49	50-54	55-59	60-64	65-69	70
Hospitalization	400	478	579	756	1.001	1.334

The cover is valid for 1 year and is renewable automatically for successive 1 year periods. Expat & Co reserves the right to adjust the premiums once a year starting from the renewal date, based on possible changes in cover, on the loss experience during the previous year (e.g. increased prices in medical care) and in case of a fundamental changes to the JSIS rules.

Remarks

- At subscription: I declare to be healthy and I do not intend to have surgery, medical or dental treatment or be hospitalized **in the near future**, as far as I know at the moment of signing this application form. This moratorium could be as long as 3 years.
- The insurer may terminate the insurance contract, for example if the insured's reimbursement statistics are considered to result from exaggeration, (misrepresentation or fraud as for other policies).

2. HOSPITALISATION AND OUT-PATIENT CARE

More extensive supplementary cover: hospitalisation / surgical operations / certain out-patient expenses / dental care / eye care /etc.

There is one collective insurance policy and 1 individual policy available to EU Institutions staff affiliated to the JSIS. They cover much more than hospital care.

- HOSPI SAFE PLUS** Allianz Worldwide Care with **AFILIATYS**, USB, SFE Europa, U4U
- EUROPAT INSURANCE (EUI)** suggested by FFPE with Expat & Co

2.1. Hospi-Safe-Plus

Affiliatys – USB – SFE Europa – U4U – R&D

Allianz Worldwide Care (Reference 2) (Framework contract 2020-2029)

- **This collective insurance must be taken out before retirement.**
- **Partners and children can be covered**
- **Medical questionnaire if subscribed less than six months before retirement.**
- **No waiting period but a moratorium of 2 years for illnesses existing at the moment of the subscription**
- **Lifelong insurance**
- **Worldwide cover but limitations outside the EEA¹⁴**

It provides a high level of cover for hospital stays (single room – one day clinic included) as does Hospi Safe. Full reimbursement of pregnancy medical care. Reimbursements are at 100% of the difference for hospitalisation and surgical operations (as with Hospi-Safe) and at 80% of the difference between actual cost and JSIS reimbursement for:

- Consultations (generalists – specialists) and medicines

¹⁴ Outside the European Economic Area, the healthcare costs will be reimbursed up to an overall maximum of 25,000 EUR per insured and per calendar year

- Laboratory examinations; imaging
- Several out-patient treatments (article 8(2) of the GIP – reference 12)
- Dental, eye and ear treatments
- Orthopaedic equipment and medical equipment

Reimbursement cannot go above 20% of out-patient expenses under this same article 8(2) of the GIP nor for post-operative rehabilitation.

Specific ceilings exist for dental treatment, optics, audio equipment, spectacles, consultations and medicines (€1,250), laboratory examinations, medical imaging not related to hospitalisation. For dental treatment, €800 during the two first years of affiliation, rising up to €3,200 after 4 years.

20% reimbursement for fitness and dietary programmes (preventive care).

Example (Real): 10 kinesiotherapy sessions = €450; JSIS reimbursement = €250 (ceiling) => supplementary reimbursement for this out-patient treatment = €160 (80% of 200).

Example (Hypothetical) dental care with prosthesis paid €6,000; JSIS reimbursement (ceilings) = €1,000 => supplementary reimbursement = €3.200 (not €4,000 = 80% of the difference) as the ceiling is €3.200 per year (after 4 years of affiliation).

Annual premium **2025** which varies depending on age (€ - BE taxes¹⁵ included) but fixed up to 31.12.2029 (except Eurostat index):

Age	0-1	2-18	19-35	36-50	51-60	61+
Annual prime (€)	0	630,34	770,79	1154,26	1540,44	2141,80

Age at the date of payment of the prime: January 1st

2.2. **EUROPAT Insurance (EUI)** (Hospitalization +, options 1&2)

Insurance company: Expat & Co (Reference 5)

- **This individual insurance to subscribed before the age of 70.**
- **It can cover partners and children**
- **There is no medical questionnaire. Some 3 months waiting period. Moratorium of 2 to 3 years for pre-existing illnesses.**
- **Lifelong cover**
- **Territorial limits of application to be defined with the insurance company. (EEA or worldwide or imitations)**

Two options in complement to the cover 'Hospitalization' described in 1.5, page 11, above: option 1 – outpatient care; option 2 – dental, optic and audio care

Option 1 covers usual medical consultations, prescribed medicines, outpatient care independent of any hospitalisation (kine, physio and orthopaedic equipment). Max: 2,500 € par year.

Option 3 offers a supplementary cover for dental and eye care at 100% but with limitations: (e.g. €1,500 to €5,500 per year for dental care; €300 per 3 year for spectacles; €1,500€ per year for hearing aids; €1,500 per year for post-surgical rehabilitation treatment).

Supplementary reimbursement to JSIS is at 100%. If JSIS does not intervene, reimbursement is 20% of the bill.

There is an annual reimbursement limit of €2,000,000

In case of abandon of JSIS (end of temporary contract) there is the immediate possibility to switch to Expat Gold policy, very similar to the EU one.

The cover is valid for 1 year and is renewable automatically for successive 1 year periods.

Annual premiums 2023 (€ - BE taxes included), to be paid monthly, depend on age at subscription.

¹⁵ Taxes in Belgium: 9.25 %.

Age at subscription	0-19	20-24	25-29	30-34	35-39	40-44
Hospitalization + Options 1+2	334	567	623	689	734	778

Age at subscription	45-49	50-54	55-59	60-64	65-69	70
Hospitalization + Options 1+2	867	1.067	1.267	1.667	2.112	2.784

Expat & Co reserves the right to adjust the premiums once a year starting from the renewal date:

- based on eventual changes in cover;
- based on inflation
- based on the loss experience during the previous year (e.g. increased prices in medical care)
- in case of a fundamental modification in the legislation regarding JSIS;

Remarks

- At subscription: I declare to be healthy and I do not intend to have surgery, medical or dental treatment or be hospitalized in the near future, as far as I know at the moment of signing this application form. This moratorium could be as long as 3 years.
- The insurer may terminate the insurance contract, for example if the insured's reimbursement statistics are considered to result from fraud, exaggeration or misrepresentation.

2.3. Notes

- The ceilings and exclusions under the JSIS can have a serious effect, especially for pensioners' sickness and treatment. JSIS cover may change in the future. Some examples given above are extreme –voluntarily so – but they are not unrealistic!
- Beware – suicide, alcoholism, drug addiction, certain sports and so on are, generally speaking, grounds for exclusion.**

3. JSIS complementary health insurances that are no longer available to everyone

Several insurance policies are no longer available to anyone wishing to take out or are only available in one of the Member States of the Union. Many colleagues are still covered by these policies.

3.1. **EurPriv Santé (Illness and accident)**

Insurance Company : Cigna (BCVR 8672)

- **This individual insurance policy must be taken up at least 6 months before retirement**
- **Partners and children can also be covered**
- **Is subject to a medical questionnaire¹⁶. No waiting period.**
- **Lifelong insurance**
- **Worldwide cover but limitations outside the EEA¹⁷**

¹⁶ Except within 13 months of recruitment

¹⁷ Outside the European Economic Area, the healthcare costs will be reimbursed up to an overall maximum of 25,000 EUR per insured and per calendar year

The cover is, in principle, equal to the one of Hospi Safe in continuation of the policy supported by Afiliatys and Cigna until 31.12.2019 but now managed by Allianz Worldwide Care as the result of a call for tender (2018)

The insured are maintained but we can no longer subscribe to this insurance.

3.2. EUROSANTE option « Tranquillité »

Insurance: Allianz Worldwide Care (Reference 4)

Allianz Care plans to merge this policy with Hospi Safe (1.1. here above)

This individual insurance can only be taken out up to 67 years of age, before retirement.

- **Partners and children can also be covered**
- **Subscription subject to a medical questionnaire¹⁸. No waiting period.**
- **Lifelong insurance**
- **Worldwide cover but limitations outside the European Economic Area¹⁹**

The option “Tranquillité” deals with hospitalisation (single room), surgical operations resulting from illness or accident and related expenses incurred two months prior to and six months after the stay in hospital. Post-surgical rehabilitation treatment is reimbursable for treatment that starts within three months of discharge after the acute surgical treatment ceases and only if it takes place in a licensed rehabilitation facility.

Subscribers receive 100% reimbursement of the difference between actual expenditure and the amount reimbursed by the JSIS. The top-up reimbursement is not subject to JSIS ceilings! (Mind the JSIS exclusions!).

The supplementary cover stops if the JSIS cover stops.

3.3. EUROSANTE (Option Optimum)

Insurance company: Allianz Worldwide Care (Reference 4)

Allianz Care plans to merge this policy with Hospi Safe Plus (2.1. here above)

- **This individual insurance must be taken up to the age of 67 years before retirement.**
- **Partners and children can be covered**
- **Subscription subject to a medical questionnaire²⁰. No waiting period.**
- **Worldwide cover but limitations outside the European Economic Area²¹**

The option “Optimum” provides a high level of cover for hospital stays (single room) as does the option “Tranquillité”, together with dental treatment, logopaedics, orthopaedics, glasses, contact lenses, hearing aids, orthopaedic aids and so on (article 8(2) of the GIP — reference 12). Covers consultations, medicines, laboratory examinations, ...

Reimbursements are 100% of the difference for hospitalisation and surgical operations (as with Hospi-Safe) and 80% of the difference between actual cost and JSIS reimbursement for some out-patient treatment (article 8(2) of the GIP), as well as dental, eye and ear treatment and orthopaedic equipment. Reimbursement cannot go above 20% of out-patient expenses under this same article 8(2) (Reference 12) nor for post-operative rehabilitation.

There are special ceilings for dental care (€800) and glasses.

The cover stops if JSIS cover stops.

¹⁸ Except within 13 months of recruitment. Except if subscription resulting from a switch between another policy and EUROSANTE

¹⁹ Limitation to 25 000 €

²⁰ Except within 13 months of recruitment. Except if subscription results from a switch between another policy and EUROSANTE

²¹ Limitation to 25 000 €

3.4. **EUROSANTE+** suggested by R&D

3.5. **EUCARE+** suggested by FFPE

Insurance company: UCR (FR) Main broker: Santalia (Reference 7)

- **These individual insurance policies are open to anyone up to 75.**
- **They can cover partners and children. If children, family cover is mandatory. From the 3^d child on, no premium to pay.**
- **There is no medical questionnaire. There are waiting periods (3 months for hospitalisation and 6 months for dental care)**
- **Lifelong covers**
- **Territorial limits: in principle, covers apply where and how JSIS applies.**

This insurance was taken over by UCR (Mutuelle Bleue FR) for the insured colleagues. We can no longer subscribe to it.

3.6. **DKV EU Plus**

Insurance company: LALUX - Brocker : OCA Luxembourg (Reference 6)

Affiliation is now possible only for the colleagues in Luxembourg.

Knowing that anyone who leaves Luxembourg or its region is excluded from insurance, this policy must now be considered as a national insurance policy and is no longer included in the insurance offers valid for agents of the European Institutions.

- **This Individual insurance policy is open to anyone under 70.**
- **Available to partners and children.**
- **A medical questionnaire is required prior to subscription. There are waiting periods of 3 to 8 months.**
- **Lifelong insurance.**
- **Cover is valid in Europe and one month out of Europe. It can be extended.**

3.7. **EU HEALTH**

Insurance company: Foyer Global Health, Luxembourg (Reference 7)

- **This individual insurance is available up to the age of 65**
- **It is also available for partners and children**
- **Subject to risk assessment. There are no overall waiting periods. Waiting periods apply only to specified benefits (i.e. pregnancy and major dental treatment.)**
- **Once enrolled, you can remain insured for life**
- **Worldwide cover without limitations with the exception of treatment in the USA. Urgent treatment in USA is included for short term travel for a maximum of 6 weeks.**

This individual insurance provides a high level of cover for hospital stays in a private room, it also covers surgical operations and costs linked to hospitalisation (due to illness or accident). One-day clinic is included, as well as dental treatment, orthodontic services, visual aids and other out-patient costs.

This Supplementary insurance covers up to 20% of the medical costs.

Maximum benefits limits exist for major dental treatment and visual aids.

The policy is automatically renewed for the next insurance year. The insurance company can modify the premiums following the technical results of the insurance policy, of the expenditure expectation and the evolution in the JSIS rules.

EU Health insurance also includes worldwide assistance provided by Global Corporate Solutions (Europ Assistance)(Transport, direct billing, repatriation,...)

Example. Cost of medical treatment = 2.000€, reimbursement from JSIS (Hypothetical 85% but maximum benefit = 1.500€; Supplementary reimbursement = 400€ (20% of 2.000€)

Annual premiums in 2024, to be paid monthly or annually (-3%) (€ - BE taxes and assistance included)

Age	0-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-99
Mensual Primes (€)	48,5	50,75	61,5	65,75	65,75	74,5	79,75	87,75	110,25	128,25	165,25
Annual primes(€)	565	590,7	716	765,3	765,3	867	928,3	1021	1283,3	1492,8	1923,5

V. Accident and life cover

In case of accident a retired official (or in disability or on LPG) **still benefits from JSIS reimbursement at the rate of 85% (or 80%) for treatment required as a result of an accident, exactly as for illness.**

For the staff in active employment (but not for retired officials, officials in disability and officials in LPG (Leave on personal ground²²) the Staff Regulations (Article 73) offer 100 % reimbursement for treatment resulting from an accident and a lump sum in the case of disability (partial or total) or death (specific accident insurance).

If the retired official also has supplementary cover to JSIS (cf IV above), reimbursement following an accident can be 100% exactly as for illness²³ but, in this case, the official (or his heirs) will not receive a capital sum in the event of death or disability caused by an accident.

The retired official who would like a large sum to cover the possibility of disability and dependence support (or wishes to provide for his heirs) in the case of an accident, can take out accident insurance specially designed for retired officials, officials in disability and for their partner.

1.1. Specific accident insurance for pensioners and partners

AIACE

Insurance company: Cigna - Broker: Cigna (Reference 8)

- **Insurance policy proposed by AIACE to the retired staff (staff in disability) and partners.**
- **This accident insurance must be taken out before age 80.**
- **There is no need for a medical questionnaire.**
- **When the subscriber reaches the age of 75, the contract is downsized to the minimum option (formula A).**
- **Coverage is worldwide.**

This policy provides for a lump sum payment upon permanent disability (total or partial) or death.

There are three formulas (options) and the possibility to choose a formula with or without an excess of 5% concerning the disability capital. This means that in case of a disability inferior to or equal to 5%, no capital sum will be paid.

Since the capital sum insured is expressed as a multiple of the basic annual pension (gross pension), it is automatically indexed.

²² However, staff in temporary disability or on LPG can pay to maintain the statutory accident insurance.

²³ This does not apply to the AIACE HIGH RISK policy but is included in the HIGH RISK and ACCIDENT policy

	Formula A	Formula B	Formula C
Total invalidity	4x Annual pension	6x Annual pension	8x Annual pension
Death	2.3x Annual pension	3.5x Annual pension	5x Pension annuelle

Without deductible- Annual prime	0.55% Annual pension	0.80% Annual pension	1.06% Annual pension
Monthly prime - gross monthly pension of €3,000	18.03	26.22	34.74
Annual prime - gross monthly pension of €3,000	216	315	417
Monthly prime – gross monthly pension of P.000€	=+/- Px6	=+/- Px9	=+/- Px12

With 5% deductible – Annual prime	0.47% Annual pension	0.68% Annual pension	0.91% Annual pension
Monthly Prime - gross monthly pension of €3,000	15.40	22.29	29.83
Annual prime - gross monthly pension of €3,000	185	268	358
Monthly prime – gross monthly pension of P.000€	=+/- Px5	=+/- Px8	=+/- Px10

9.25 % tax included

In case of permanent partial disability, the insured capital is multiplied by the percentage of permanent disability.

This collective accident insurance provides also for 100% top-up of the JSIS reimbursement for treatment required after an accident (hospitalisation, consultations, physiotherapy, medicine, etc. However, one sentence in the policy could lead to reimbursement limitations:

“However, if the independent medical advisor considers certain costs to be abnormally high or unnecessary, he may reduce them to an amount deemed reasonable or, where appropriate, refuse reimbursement”

Premium is automatically paid by the PMO. The deduction appears on your pension slip.

Example 7. (Hypothetical): expenses as result of an accident = €1,000; JSIS reimbursement (ceilings) = €400 => top up = €600.

Example: Permanent disability (after broken leg) evaluated 4%.

- Case of no excess. Disability capital, monthly pension of €5,000, formula A: 9,600€
- Case of excess of 5%. Disability capital = €0, independently of the formula!

1.2. Comprehensive insurance – death and disability

Afiliatys

Insurance company: Allianz France - Broker: Cigna (Reference 9)

Cigna offers officials in active employment (in addition to the statutory accident insurance²⁴) a

- **life insurance (death and total permanent disability, all causes) with free choice of capital and cover taking account of their personal requirements and family situation**
- **applicable for partners and children**
- **disability guarantee under this insurance ends with the official's career or when he/she reaches age 65.**

The life insurance policy may continue up to age 80, under special conditions laid down by the company (e.g. medical questionnaire and reduction of capital with increase in annual premium).

- Being comprehensive, this policy provides payment of the capital to the heirs in the event of death.

²⁴ Supplementary to the accident cover, hence also covers death and disability as a result of illness.

- The capital is also paid out in the case of total and permanent disability. This cover is available only in combination with life insurance.

The capital is either chosen by reference to salary or fixed.

For a lump sum of €100,000, order of magnitude of the annual premium which depends on age at subscription (€- BE taxes included).

Annual premium (2023 - €) for a capital of €100,000 in case of death and €100,000 in case of invalidity

Age	Death	Invalidity
<30	85.2	68.4
30-35	102	80.4
36-40	136.8	102
41-45	205.2	159.6
46-50	307.2	284.4
51-55	500.4	512.4
56-60	784.8	982.8
61-65	1,155.6	1,734
66-70**	1,616.4	*
71-75**	2,845.2	*
76-80**	4,552.8	*

*Disability insurance stops at the age of 65.

**After 65, the death insurance covers only half of the insured capital=.

1.3. **Notes**

Any accident must be reported within 15 working days to Cigna and to the JSIS²⁵.

It can happen that a person is over-insured for medical care following an accident since most of the supplementary health insurance policies reimburse supplementary expenses relating to accidents already dealt with by the JSIS and that the specific "AIACE Accident" policy also provides supplementary reimbursement but at 100%, independently of the JSIS ceilings. This is the reason why Afiliatys and AIACE propose a supplementary health insurance limited to sickness, excluding accidents (Hospi Safe Sickness and Hospitalization Sickness - IV. above).

VI. Assistance when travelling abroad

A supplementary insurance cover can be national or cover of the European Economic Area only. There are limits applying to the USA, Canada,... (€25,000 per year). It must be remembered that the JSIS has a limited response to repatriations for health reasons and has no provisions for it in the event of death (except if the person was on mission).

JSIS is not easily recognised far away from Brussels or Luxemburg!

1. **Travel assistance** proposed by Afiliatys

Insurance company: Europe Assistance - Broker: Cigna: (Reference 10)

Afiliatys, Cigna and Europe Assistance have brought out a joint travel assistance option that is perfectly suited to cover European officials and other servants and their families.

The insurance policy is also available for pensionners

Two formulae of assistance are suggested:

1. Silver: assistance to people and travel assistance
2. Gold: assistance to people, travel assistance and annual cancellation insurance

²⁵ Important if a third person is involved in the accident.

Annual premiums 2024 (€ - BE taxes included):

Formulae / Options	Silver	Gold
Base	94	208
Suppl. medical care*	50	50
Suppl. roadside assistance	41	41
Total	185	299

*Maximum cover: 1,000,000€

2. Travel assistance proposed by other insurance companies

- 2.1. **The EUROPAT insurance** (IV.1.5. and IV.2.2. here above) proposes a travel insurance including assistance, medical care and repatriation (periods of 90 days).
- 2.2. **Several credit cards** offer travel assistance (often when they are used to pay for the trip).
- 2.3. **Several national travel assistance** insurance offers exist, e.g. linked to your car insurance

Beware !

The paragraphs, notes and tables on the policies presented here are by no means comprehensive or 100% accurate. They are summaries designed to enable comparison. The only valid documents for those who wish to take out a policy or obtain official and comprehensive information are those issued by Cigna, Allianz WWCare, DKV, Foyer Global health and Expat & Co.

VII. Annex Extracts from Staff Regulations and JSIS rules.

Art. 7.1. This rate shall be increased to 85% for the following services: consultations and visits, surgical operations, hospitalisation, pharmaceutical products, radiology, analyses, laboratory tests and prostheses on medical prescription with the exception of dental prostheses. It shall be increased to 100% in cases of tuberculosis, poliomyelitis, cancer, mental illness and other illnesses recognized by the appointing authority as of comparable seriousness, and for early detection screening and in cases of confinement. However, reimbursement at 100% shall not apply in the case of occupational disease or accident having given rise to the application of Article 73.

Article. 72.3. Special reimbursement - Risk limitation Where the total expenditure not reimbursed for any period of 12 months exceeds half the official's basic monthly salary or pension, special reimbursement shall be allowed by the appointing authority, account being taken of the family circumstances of the person concerned, in the manner provided for in the rules referred to in paragraph 1.

GIP JSIS. Serious Illness According to the Staff Regulations, a serious illness is one recognized as such by decision of the appointing authority after consulting the Medical Officer and on the basis of the following criteria. Serious illnesses include: Tuberculosis, Poliomyelitis, Cancer, Mental illness, and other illnesses recognised by the appointing authority as of comparable seriousness. Such illnesses typically involve, to varying degrees, the following four elements: a shortened life expectancy resulting from an illness which is likely to be drawn-out; an illness which is likely to be drawn-out; the need for aggressive diagnostic and/or therapeutic procedures; the presence or risk of a serious handicap.

Expenses incurred in connection with a serious illness are reimbursed at the rate of 100%, without a ceiling, except for: home nursing care, dental expenses, miscellaneous medical treatments (Chapter 8.2. reference 11), accommodation costs during a convalescent/post-operative cure, costs of treatment and medical supervision during a thermal cure.

Article 20.2. Of the JSIS rules (2005) - Excessive costs If the costs significantly exceed the amounts normally charged in the country where the treatment was provided, the portion of costs deemed excessive may be excluded from the reimbursement, pursuant to Article 20 of the joint rules, even if no ceiling for reimbursement has been set and even in the case of a serious illness. The portion of the costs deemed excessive will be determined on a case-by-case basis by the Settlements Office after consulting the Medical Officer. The Medical Officer will determine the exact nature of the medical treatment in order to enable the Settlements Office to compare the rates being charged.

Article 21.1. Of JSIS Rules (2005) - Countries with high medical care costs The expenses incurred in a country outside the European Union where costs are particularly high, are subject to a reduction coefficient to implement a repayment rate on amounts of costs made comparable to the average cost in the countries of the European Union. In particular, USA, Canada, Norway, Switzerland.

VIII. References

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1. JSIS Joint Rules, General Implementing Provisions (GIP) and Practical Guide to Medical Reimbursement: <https://myintracomm.ec.europa.eu/staff/FR/health/Pages/index.aspx>
2. HOSPI SAFE <https://www.hospi-safe.eu/fr/> <https://www.allianzcare.com/fr/group-hub/hospisafe.html>
3. HOSPITALIZATION <https://www.eurprivileges.com/hospitalisation-former-staff-members>
4. Eurosanté www.allianzworldwidecare.com/eurosante
5. EUROPAT Insurance : <https://www.expatsinsurance.eu/en/expat-insurances> [https://www.insurance-wyr.be/+32 \(0\)2 463 04 04 – info@expatsinsurance.eu](https://www.insurance-wyr.be/+32%202%20463%2004%2004-info@expatsinsurance.eu)
6. DKV EU Plus, LALUX : Luxembourg only <https://www.dkv.lu/fr/product/eu-plus/>
7. EU HEALTH (Foyer Global Health S.A), Luxembourg, <http://www.foyerglobalhealth.com/>
8. ACCIDENT <https://www.eurprivileges.com/accident>
9. Life Assurance (whatever the cause), <https://www.eurprivileges.com/fr/death-and-disability>
10. « Assistance voyage » 'AFILIATYS' <https://www.eurprivileges.com/travel-assistance-plan>
11. Table of miscellaneous treatments: Article 8§2 of the GIP (General implementing provisions for the reimbursement of medical expenses)