



Explanation to the admission declaration

Introduction

Patients can make a number of choices which may significantly affect the final cost of their hospitalisation. The choices are made on the basis of this admission declaration form.

With this explanatory document we want to inform you of the cost of your admission, to make sure that you can make well-considered choices on the admission form.

The cost is determined by the following factors:

1. Your insurance situation
2. The type of room you choose;
3. The duration of the hospitalisation;
4. The pharmacy costs;
5. The fees charged by doctors and paramedics;
6. The cost of any additional products and services.

1. Insurance

Every inhabitant of Belgium is required to affiliate to a health insurance fund. The healthcare insurance pays via the health insurance fund a part of your costs for medical procedures and stay at the hospital. Patients have to pay part of the costs themselves. This is the personal contribution, also referred to as co-payment. Some people, based on their income and/or family situation, may be entitled to an **increased allowance** of the health insurance fund (also referred to as preferential rate). These persons pay a lower personal contribution than a normal insured person when they are admitted to the hospital. You can ask your health insurance fund whether or not you are entitled to this.

People who are **not up-to-date with** their compulsory health insurance fund shall pay all costs of the hospitalisation themselves. These costs can be quite high. Therefore, it is of great importance to have your health insurance fund affairs in order. If there is a problem, please contact your health insurance fund as soon as possible.

Certain procedures (e.g. for **purely aesthetic** reasons) are not refunded by the health insurance fund. In this case you must personally pay the total cost, including the admission cost and corresponding performances - regardless of your insurability situation. Please refer to your doctor or your health insurance fund for information about the refundability of certain procedures.

If your admission is the result of an **accident at work**, please state so at the time of your admission. If the work accident insurance recognises the accident, the costs will be paid directly to the hospital. Certain costs are never compensated by the work accident insurance, for example supplements for an individual room. You will have to pay that yourself.

If you have an **additional healthcare insurance**, your insurance company may accept additional costs of your hospitalisation. Only your insurance company can tell you about the costs they will or will not refund. Therefore, you should contact your insurer.

If your case does not correspond to any of the cases above (for example: patient entitled to OCMW support, patient insured in another EU member state,...), please contact *the hospital's social services* to get further information about your rights.

2. Room choice

The type of room you choose for your stay at the hospital will be decisive for the cost of your admission.

This room choice does not affect the quality of the care provision or the free choice of your doctor.

Patients can choose:

- a common room
- a two-patient room
- an individual room

If during your overnight admission you stay in a common room or a two-patient room you do not **pay a room supplement or a fee supplement**.

If you explicitly choose to stay in an individual room (and also effectively stay there), the hospital may charge **room supplements** and the doctors **fee supplements**. Staying in an individual room is more expensive than staying in a common or two-patient room.

If a certain room type is chosen you accept the corresponding financial conditions about the room and fee supplements.

- If you stay in a more expensive room type beyond your will, the financial conditions of the room type you selected (for example, you choose a common room and due to unavailability you get an individual room, the conditions of the common room apply).
- If you stay in a less expensive room type, the financial conditions of the room type you effectively stay in will apply. (for example: you choose an individual room and due to unavailability you get a common room, the conditions of the common room apply, even though you are staying in the common room alone).

3. Admission costs

Legal personal share per day

Regardless of the room choice, you pay a legally set personal share per day for your stay and care at the hospital.

	Beneficiary with preferential rate	Child, dependent child	Long-term unemployed person (single or head of family) and his or her dependent person	Beneficiary with dependent person and their dependent persons	Other beneficiaries
1st day	€ 6,90 /day	€ 34,17 /day	€ 34,17 /day	€ 46,69 /day	€ 46,69 /day
From the 2nd day	€ 6,90 /day	€ 6,90 /day	€ 6,90 /day	€ 19,42 /day	€ 19,42 /day
From the 91st day	€ 6,90 /day	€ 6,90 /day	€ 6,90 /day	€ 6,90 /day	€ 19,42 /day

The hospitalisation cost at our hospital is:

€ 610,33 per day of admission (acute hospital)

€ 742,81 per day of admission (SP palliative)

€ 456,04 per day of admission (SP locomotor and SP psychogeriatrics)



When you have not fulfilled all your obligations vis-a-vis your health insurance fund, you must personally pay all the costs.

Room supplements per day

When staying in a *common room or two-patient room* it is legally forbidden to charge a room supplement.

If you explicitly choose an individual room and you effectively stay there, the hospital may charge a room supplement. The room supplement at our hospital amounts to:

- € 60.00 per day (*Individual room/individual room maternity ward without box*)
- € 65.00 per day (*individual room maternity ward with box*)
- € 110.00 per day (*individual room maternity luxury*)

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

- When the treating physician is of the opinion that an individual room is required on medical grounds;
- When you stay in an individual room for organisational reasons, when the chosen room type is not available;
- When you are admitted to or transferred to an intensive care unit or the emergency room, for the duration of your stay at that unit;
- When a child is admitted together with an accompanying parent.

4. Pharmacy costs

These costs include the medicines, implants, prostheses, non-implantable medical devices, etc. Regardless of the room type these costs can be fully or partly payable by the patient.

For medicines refunded by the health insurance fund you pay a fixed personal share of € 0.62 per day (lump sum). This amount is charged under admission costs on the invoice. This includes the large amount of medicines which are not invoiced separately. You always have to pay this lump sum, regardless of whether you actually use it.

The medicines not refunded by the health insurance fund are not included as a lump sum and must fully be paid by you. They are separately specified on the invoice.

The costs of some implants, prostheses, non-implantable medical devices... must also be partly or fully paid by you. The cost depends on the type and the material they are made of. These materials and products are prescribed by the doctor. Please refer to your doctor for information about the nature and price thereof.

5. Costs for doctor's fee

5.1 Legal rate

The official or legal rate is the fee the doctor is allowed to charge to the patient. This fee consists of two parts:

- The amount refunded by the health insurance fund
- The legal personal share (=the amount you have to pay as a patient) Sometimes the full performance will be refunded by the healthcare insurance and no personal share will be payable.

There are also performances for which the healthcare insurance does not provide refunds, and for which the doctor can choose his fee freely.

5.2 Legal personal share

Regardless of the room choice you have to pay the legally defined personal share (co-payment) for your (para)medical treatment. The legally defined personal share applies to all patients who have fulfilled their obligations vis-a-vis the health insurance fund. People who are not up-to-date with their compulsory health insurance fund shall pay all costs of the hospitalisation themselves (see under 1).

5.3 Fee supplement

On top of the legal rate hospital doctors can also charge fee supplements. These fee supplements are fully payable by the patients, no intervention from the health insurance fund is provided.

When staying in a *common room or two-patient room* during an overnight admission, it is legally forbidden to charge a room supplement.

The maximum fee supplement charged at our hospital is specified on the admission declaration form and amounts to 150%.

If you explicitly choose an individual room and you effectively stay there, all doctors may charge a fee supplement.

- The amount a doctor can charge as a fee supplement in our hospital is maximum 150% of the legally defined rate. Every doctor who intervenes in your treatment (anaesthetist, surgeon,...) can charge a fee supplement.

For example: A doctor charge maximum 150% as a fee supplement. For a procedure which legally costs €75 and for which the health insurance fund refunds €50, you will have to pay €115 yourself (€25 personal share and €90 fee supplement).

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

- When the treating physician is of the opinion that an individual room is required on medical grounds;
- When you stay in an individual room because the chosen room type is unavailable due to organisational reasons;
- When you are admitted to or transferred to an intensive care unit or the emergency room, for the duration of your stay at that unit;

5.4 Admission of a child with accompanying parent

When your child is admitted to the hospital with an accompanying adult, you can choose to have your child admitted under your supervision and cared for at the legal rate, without room supplement and without fee supplement. The admission of your child with the accompanying parent will be in a two-patient room or common room.

If at the time of admission of your child together with an accompanying parent you explicitly choose an individual room and also effectively stay at an individual room, the hospital is not allowed to charge a **room supplement**. Every doctor intervening in your treatment **can charge a fee supplement** if he wants to.

5.5 Schematic overview of the supplements in case of overnight admission

	<i>Choice of common room or two-patient room</i>	Choice of individual room
Room supplement	NO	<p>YES</p> <p>NO, if:</p> <ul style="list-style-type: none"> - Your doctor decides that your medical condition, examination, treatment or supervision requires an individual room; - You chose a <i>common or two-patient room</i> and no such room is available; <ul style="list-style-type: none"> - You stay at the intensive care or emergency care department - It concerns an admission of a child, together with an accompanying parent; - when the admission concerns a patient who is infected or suspected to be infected with the SARS-CoV-2 virus.
	<i>Choice of common room or two-patient room</i>	Choice of individual room
Fee supplement	NO	<p>YES</p> <p>NO, if:</p> <ul style="list-style-type: none"> - Your doctor decides that your medical condition, examination, treatment or supervision requires an individual room; - You chose a common or two-patient room and no such room is available; <ul style="list-style-type: none"> - You stay at the intensive care or emergency care department; - when the admission concerns a patient who is infected or suspected to be infected with the SARS-CoV-2 virus.

5.6 Billing

All fee supplements will be invoiced by the hospital. Never pay it directly to the doctors. Do not hesitate to ask your treating doctor for information about the fee supplements he charges.



6. Several other costs

During your hospitalisation you may use a number of products and services for medical and/or comfort reasons (e.g. telephone, water, internet, etc.).

The costs for the stay (bed linen, meals, etc.) of the accompanying person who is not admitted as a patient and who stays with you in the room shall be charged under 'various costs'.

Regardless of the room type these costs are fully payable by you.

A price list of these products and services are available at the admission department of the hospital and can also be consulted on the hospital website.

Below you will find some examples of frequently requested services and products:

- room comfort: *telephone, refrigerator, television and internet connection*;
- food and drinks: additional meals, snacks, beverages;
- hygiene products: Basic hygiene products (soap, toothpaste, eau de cologne,...) and basic toiletries (comb, toothbrush, shaving items, paper towels,...);
- laundry (personal laundry);
- assistant: Occupation of a room or bed, meals and drinks;
- other several goods and services: Other frequently requested goods (feeding bottles, pacifiers, breast pump, crutches, ear plugs, small office supplies,...) and frequently requested services (manicure, pedicure, hairdresser, ...), ...

7. Advances

The hospital can request an advance payment for each admission period of 7 days. The amount of the advance is restricted by the law.

	Beneficiary with preferential rate	Children as dependent persons	Other beneficiaries
<i>Common or two-patient room</i>	0 EUR	0 EUR	0 EUR
<i>Individual room</i>	0 EUR	0 EUR	0 EUR

If the hospital is aware that you take advantage of the maximum invoice scheme, an advance may only be requested for a stay in an individual room and not for a stay in a two-patient room or common room.

8. Miscellaneous

All amounts specified in this document can be adjusted to the index and therefore change in the course of the admission period. The amounts apply to patients who have met their obligations vis-a-vis the health insurance fund (see item 1).

Do you have any questions about the costs related to your medical treatment and stay at the hospital?

Contact the tarification department, phone **057 35 65 36**, facturatie@yperman.net or your treating doctor first. You can also address your health insurance fund.

If necessary, you can also contact social services ([SocialeDienst@yperman.net](mailto: SocialeDienst@yperman.net)) and the ombuds department of our hospital (tel. 057 35 66 42, [Ombudsdienst@yperman.net](mailto: Ombudsdienst@yperman.net))

Additional information about the costs associated with your stay and treatment is available on www.yperman.be.

In the context of the “patient rights” act every professional practitioner is required to clearly inform the patient about the intended treatment. This information also relates to the financial consequences of the treatment.