

All covers of our healthcare insurance policies at a glance

Reimbursement Table 2021

Basic Cover

Univé Zorg Geregeld policy
Univé Zorg Vrij policy

Modular packages

Aanvullend Goed
Aanvullend Beter
Aanvullend Best

Dental packages

Tand Ongevallen
Tand Goed
Tand Beter
Tand Best

Reading Guide

Univé has three basic insurance policies, each with specific supplementary insurance policies. This is the reimbursement table of the Univé Zorg Geregeld policy, the Univé Zorg Vrij policy and the associated supplementary insurance policies. Please find more information on our healthcare insurance policies on unive.nl/zorgverzekering.

Univé Zorg Geregeld policy

With the Univé Zorg Geregeld policy, your healthcare is all set. We have made agreements with many healthcare providers in your area. This applies, for example, to hospitals and specialists, but also to midwives. General practitioner care, such as a visit, is always reimbursed. And, what's more, it comes at an affordable premium.

Univé Zorg Vrij policy

The Univé Zorg Vrij policy offers you optimal freedom of choice. It does not matter whether or not the healthcare provider has a contract with us. As long as the healthcare provider complies with the requirements set out in our policy conditions. You pay a slightly higher premium for this. In most cases, the invoice will be fully reimbursed. Only if the invoiced amount is unreasonably high will we not reimburse.



Univé Zorg Geregeld policy In-kind policy

100%

Contracted healthcare provider:
maximum reimbursement 100%

80%

Non-contracted healthcare provider:
maximum reimbursement 80% of the
average contracted rate

We have made agreements with
many healthcare providers in your area



Univé Zorg Vrij policy Reimbursement policy

100%

All healthcare providers:
maximum 100% reimbursed
of the market-level rate

You have a free choice of the healthcare
providers

Policy Conditions

This table is a summary of the reimbursements. Supplementary conditions are set out in the 2021 policy conditions. These state details about, for example, the conditions your healthcare provider must comply with, for which items you need to request our permission, and how and for which healthcare you need a referral. We recommend you read these policy conditions carefully if you need healthcare.

Please find all conditions on unive.nl/zorgverzekering/documenten. Alternatively, contact us. Our contact details are stated on the back of this reimbursement table.

Reimbursement basic cover

The items in the reimbursement table are marked with ● to indicate which care is covered. The exact reimbursement you receive depends on the basic cover and healthcare provider you selected. Some care is subject to an excess and/or a personal contribution.

Excess

For some healthcare types in the basic cover, the first € 385 spent are charged to you. This is referred to as the statutory excess. Additionally, you may have selected a voluntary excess. The excess does not apply for general practitioner care, obstetric care and maternity care, nursing and care (district nursing), the quit-smoking programme and medications on our preferred list.

Personal contribution or maximum reimbursement

Sometimes healthcare is subject to a personal contribution or maximum reimbursement. This means having to pay some of the cost yourself. Does a personal contribution or maximum reimbursement apply? Then this is listed in the reimbursement table.

Cover supplementary insurance policies

We will reimburse the costs up to a maximum of the statutory rates applicable in the Netherlands. If no statutory rates are available, we will reimburse up to the market-level rates.

For some healthcare items, we concluded contracts with certain healthcare providers. In that case, you will be reimbursed at the rate we have agreed with the healthcare provider. This may also concern preferred or accredited healthcare. This is indicated in this reimbursement table. If you are making use of non-contracted, non-accredited or non-preferred healthcare providers for treatment, please take into consideration that you will likely have to pay all or part of the bill yourself.

Easily find a healthcare provider

1. Please refer to unive.nl/zorgzoeker
2. Search by healthcare type or name of your healthcare provider
3. Check if the healthcare provider has a contract with us for the required healthcare.
4. Choose your care provider

Visit unive.nl/zorgverzekering/marktconforme-tarieven for an explanation of the average contracted rate and the market-level rate.

Per year = per calendar year

Does the reimbursement table state 'per year'? Then this means 'per calendar year'. A calendar year starts on 1 January and ends on 31 December.

Select your insurance policy

Step 1: select your basic cover

Univé Zorg Geregeld policy

In-kind policy

100%

Contracted healthcare provider:
maximum reimbursement 100%

80%

Non-contracted healthcare provider:
maximum reimbursement 80% of the
average contracted rate

We have made agreements with many
healthcare providers in your area

Univé Zorg Vrij policy

Reimbursement policy

100%

All healthcare providers:
maximum 100% reimbursed
of the market-level rate

You have a free choice of the healthcare
providers

Step 2: choose your supplementary insurance

Modular packages (excluding dental care)

Aanvullend Goed

Insured for the most necessary care,
including emergency care abroad,
convalescence home and
9 physiotherapy sessions.

Aanvullend Beter

Higher reimbursements, such as
16 physiotherapy sessions,
and reimbursement for childbirth and
maternity care and free spectacles.

Aanvullend Best

Highest reimbursements, such as
20 physiotherapy sessions
plus cover for eye laser surgery and
medical plastic surgery such as eyelid and
abdominal wall correction.

Dental packages (can be taken out separately or in combination with a modular package)

Tand Ongevallen

✓ Dental costs resulting
from an accident:
€ 10,000 per accident

Tand Goed

✓ Dental costs
resulting from an
accident:
€ 10,000 per accident

✓ Oral care: € 250
per year
- 100% periodical
check-up (C11) and
problem-specific visit
(C13)
- 80% other dental care

Tand Beter

✓ Dental costs resulting
from an accident:
€ 10,000 per accident

✓ Oral care: €500
per year
- 100% periodical
check-up (C11) and
problem-specific visit
(C13)
- 80% other dental care

✓ Orthodontic care
- up to age 18: € 1,500
- from age 18: € 500

Tand Best

✓ Dental costs
after accident:
€ 10,000 per accident

✓ Oral care: €1,000
per year
- 100% periodical
check-up (C11) and
problem-specific visit
(C13)
- 80% other dental care

✓ Orthodontic care
- up to age 18: € 2,500
- from age 18: € 1,500

Modular packages

Reimbursement Table	Basic Insurance	Supplementary insurance		
		Goed	Beter	Best
Alternative care				
A budget to be spent on the healthcare types listed below: - treatments and visits (by preferred care provider). This also includes alternative exercise therapy, such as osteopathy or chiropractic. - homeopathic and/or antroposophic drugs.		€ 200 per year; treatments and visits are subject to a maximum reimbursement of € 40 per day	€ 300 per year; treatments and visits are subject to a maximum reimbursement of € 40 per day	€ 500 per year; treatments and visits are subject to a maximum reimbursement of € 40 per day
Contraceptives				
Such as: contraceptive pill, contraceptive rod, coil, ring or diaphragm - up to age 21 - from age 21: only if these contraceptives are used to treat endometriosis or menorrhagia (in the case of anaemia)	● a personal contribution applies to some of these contraceptives; the maximum personal contribution for all medicines combined is €250 per year			
From age 21: for contracted healthcare providers only		up to the amount as set out in GVS (Medication Reimbursement System)	up to the amount as set out in GVS (Medication Reimbursement System)	up to the amount as set out in GVS (Medication Reimbursement System)
Audiological care				
Hearing tests, advice on hearing aids. The audiologist informs you if you need a referral from an ENT specialist or audiology centre.	●			
Circumcision				
Medically necessary circumcision	●			
Childbirth and maternity care				
Delivery				
Pregnancy courses: - the Slimmer Zwanger (Smarter Pregnant) self-help programme. - courses preparing you for childbirth - courses enhancing your physical post-delivery recovery (max 6 months after childbirth)			€ 100 per year	€ 100 per year
Delivery at home	●			
Delivery without medical necessity in: - a birth clinic - a hospital	● maximum €225 per day for mother and child combined (€262 minus €37 for the personal contribution for maternity care)		full reimbursement of the amount charged to you	full reimbursement of the amount charged to you
- in a hospital or birth clinic as part of integral maternity care	● a personal contribution applies, amounting to €387.56 for mother and child combined			
Delivery in a birth clinic or hospital with medical necessity	●			
Maternity care				
Maternity care at home or in a birth clinic	● maximum 10 days (a personal contribution applies, amounting to €4.60 per hour)		€125 reimbursement of the personal contribution	full reimbursement of the personal contribution
Maternity care in hospital for delivery with medical necessity	●			
Post-partum care mother and newborn, or adoption support if child is younger than 3 months			6 hours	12 hours
Univé birth package			full	full
Lactation				
Breastfeeding advice (lactation visit)			€ 200 per childbirth	€ 200 per childbirth
Renting or buying electrical breast pump			maximum € 80, one-off	maximum €80, one-off

If an item is marked with ● in the reimbursement table, this item is covered. The amount of the reimbursement depends on the insurance you have chosen in combination with the chosen care provider. Please find more information on this subject on page 2.

Reimbursement Table	Basic Insurance	Supplementary insurance		
		Goed	Beter	Best
Spectacles, contact lenses, eye lasering or lens implants				
You may choose one of the following reimbursements:				
- spectacles from Hans Anders, Pearle, Specsavers, Eyewish or eyes + more (in accordance with Visual Aids Regulations)			1 pair of singular or multi-focal spectacles from the basic range per 3 years	1 pair of singular or multi-focal spectacles from the comprehensive range per 3 years
- the purchase of spectacles or contact lenses from an optician other than stated above			a maximum of € 50 per 3 years	a maximum of € 100 per 3 years
eye laser treatment/lens implants				€ 500, one-off
Abroad				
Urgent medical care during holiday and temporary stay abroad	● maximum the rate that is reasonable in the Netherlands (market rate). This also applies to care provided by a non-contracted care provider	full	full	full
Non-urgent healthcare abroad, subject to approval ¹	● up to the rate we would reimburse in the Netherlands			
Repatriation in the event of unforeseen care by the Univé Emergency call centre		full	full	full
Preventive vaccinations and medications when travelling abroad, only with contracted healthcare providers.		full	full	full
Genetic testing				
Testing of and for hereditary conditions	●			
Occupational therapy				
Occupational therapy	● 10 hours of sessions per year	5 hours of sessions per year	5 hours of sessions per year	5 hours of sessions per year
Occupational therapy after severe COVID-19: - First 6 months - Second 6 months The government has determined that this care will be reimbursed until 1 August 2021 at the latest. In order to qualify for care after serious COVID-19, further conditions apply. More information and conditions can be found on our website.	● 10 treatment hours ● 10 treatment hours			
Pharmaceutical care (including medications)				
Medications listed in Appendix 1 of the Healthcare Insurance Regulations and the Pharmaceutical Care Regulations, in some cases subject to approval ¹	● a personal contribution applies to some of these medications; the maximum personal contribution for all medicines combined is €250 per year			
Diet preparations (medical food with a different form and formula than standard food), subject to approval ¹ . There are various types, including liquid nutrition and tube feeding. Partial reimbursement applies to tube feeding provided by non-contracted healthcare providers. The Pharmaceutical Healthcare Regulations apply to liquid nutrition.	●			
Physiotherapy and remedial therapy				
The number of sessions applies to:				
physiotherapy, Cesar/Mensendieck remedial therapy and oedema therapy Manual therapy treatments are also included. A maximum of 9 treatments per indication will be reimbursed		9 treatments ² per year.	16 treatments ² per year.	20 treatments ² per year.
Up to age 18 - chronic conditions, subject to approval ¹ - non-chronic conditions	● ● 18 sessions per year			
From age 18: - chronic conditions, subject to approval ¹	● from the 21st treatment onwards			
- pelvic physiotherapy for urine incontinence	● the first 9 treatments			

If an item is marked with ● in the reimbursement table, this item is covered. The amount of the reimbursement depends on the insurance you have chosen in combination with the chosen care provider. Please refer to page 2 for more information on this subject.

1) This type of care is subject to prior approval from Univé (in some cases). Please consult the policy conditions for more details.

2) Please note: Are you going to a domestic non-contracted care provider, or are you going to a non-contracted care provider abroad that provides similar care? Then you may be required to personally pay all or some of the invoice. Please find the maximum reimbursement in the 'List of maximum reimbursements non-contracted healthcare providers supplementary insurance' and the 'List maximum reimbursements abroad' on our website.

Reimbursement Table	Basic Insurance	Supplementary insurance		
		Goed	Beter	Best
- remedial therapy (walking training) for hardening of the arteries in the leg, stage 2 Fontaine	● 37 treatments during a 12-month period			
- remedial therapy for arthrosis of hip or knee joint	● 12 treatments during a maximum period of 12 months			
- remedial therapy for COPD from Gold class II and up The number of treatments depends on classification in the GOLD groups A, B1, B2, C or D.	● treatments: group A 5 group B1 27 groups B2, C and D 70			
- the first 12 months				
- after 12 months (per 12-month period)	● treatments: group A 0 group B1 3 groups B2, C and D 52			
All ages: physiotherapy and remedial therapy after severe COVID-19: - First 6 months - Second 6 months The government has determined that this care will be reimbursed until 1 August 2021 at the latest. In order to qualify for care after serious COVID-19, further conditions apply. More information and conditions can be found on our website.	● 50 treatments ● 50 treatments			
Combined lifestyle intervention (GLI)				
From age 18 A recognised programme aimed at behavioural change due to being overweight in combination with (a risk of) certain conditions or obesity	●			
Medical care for specific patient groups				
Healthcare specifically for vulnerable patients such as older people and people with mental impairments. Such care is provided by a specialist in geriatric medicine or in mental disabilities, healthcare psychologist or child psychologist, youth psychologist or general educationalist. This care also includes certain day treatments in a group, in a number of cases following consent ¹	●			
Skin treatments				
A budget to be spent on the healthcare types listed below (by preferred healthcare provider): - acne treatment - camouflage therapy - depilation		€300 per year	€ 500 per year	€ 700 per year
General practitioner care				
This also includes counselling for quitting smoking and foot care for diabetes mellitus	●			
Medical aids				
Medical aids and bandaging listed in the Healthcare Insurance Regulations and the Medical Aids Regulations, in some cases subject to approval ¹	● some aids are subject to a personal contribution or a maximum reimbursement.			
A budget to be spent on statutory contributions/personal contributions or the following aids or extras related to these aids: - audiological aids: - statutory personal contribution from age 18 for a hearing aid or tinnitus masker - batteries, single rechargeable batteries and the relevant chargers for the hearing aids - items used after a breast amputation, mammary prosthesis - wigs or chemo beanies - prolapse pessary - hand or finger splints for temporary use (by contracted healthcare provider) - purchase or lease cost of a urination alarm for insured between age 6 and age 18 - ADL medical aids. These are tools for general daily life acts, such as small tools to wash, dry and dress yourself, going to the toilet independently or for cooking and eating. - the statutory personal contribution for insured under age 18 for spectacle glasses or filter glasses			€ 250 per year	€ 500 per year
			maximum of 2 hand or finger splints per year	maximum of 2 hand or finger splints per year

If an item is marked with ● in the reimbursement table, this item is covered. The amount of the reimbursement depends on the insurance you have chosen in combination with the chosen care provider. Please find more information on this subject on page 2.

Reimbursement Table	Basic Insurance	Supplementary insurance		
		Goed	Beter	Best
In-vitro fertilisation (IVF) and other fertility treatments				
In-vitro fertilisation (IVF) for women up to age 43. Further conditions apply	● 1st, 2nd and 3rd attempts			
Other fertility treatments (women up to age 43)	●			
Speech therapy				
Recovering or enhancing speech or ability to speak	●			
Speech therapy after severe COVID-19: The government has determined that this care will be reimbursed until 1 August 2021 at the latest. In order to qualify for care after serious COVID-19, further conditions apply. More information and conditions can be found on our website.	●			
Family care				
Family care courses: learning to deal with a disease or condition, including asthma, COPD, diabetes, cancer or dementia		see Prevention budget	see Prevention budget	see Prevention budget
Family care mediator after referral by Univé Zorgadvies en Bemiddeling		€ 250 per year	€ 500 per year	€750 per year
Replacement family care, applications via Univé Zorgadvies en Bemiddeling.		5 days per year	10 days per year	15 days per year
Specialist medical care				
This care is subject to prior approval ¹ relating to certain treatments	●			
Multidisciplinary care (chain healthcare)				
Chain of care for insured persons with type 2 diabetes mellitus (DM type 2), chronic obstructive pulmonary disease (COPD), cardiovascular diseases, increased vascular risk management, asthma from the age of 16 and vulnerable elderly people	●			
Plastic and/or reconstructive surgery				
For specific medical referrals, subject to approval ¹	●			
- abdominal wall correction for specific referrals, subject to approval, only with contracted healthcare providers ¹	●			full
- upper eyelid correction for specific referrals, subject to approval, only with contracted healthcare providers ¹	●			full
- protruding ears correction for insured up to age 18, only with contracted healthcare providers				full
Prevention				
A budget to be spent on the healthcare types listed below: - courses (including managing a disease or condition) - First-Aid course - reanimation course - fall prevention - lifestyle check - medical sports advice - consults and advice for women		€200 per year	€ 400 per year	€ 500 per year
Mental healthcare				
Mental healthcare (GGZ) from age 18: - generalist basic GGZ - specialist GGZ (upon intake subject to approval ¹)	●			
Sex therapy				€ 60 per session, maximum 4 sessions per year
Mindfulness for burn-out complaints		€ 350 per year	€ 350 per year	€ 350 per year
Rehabilitation				
Examination, advice and treatment relating to specific referrals, subject to approval ¹ . This also includes quick scan and cancer rehabilitation	●			
Geriatric rehabilitation	● (max 6 months)			

If an item is marked with ● in the reimbursement table, this item is covered. The amount of the reimbursement depends on the insurance you have chosen in combination with the chosen care provider. Please refer to page 2 for more information on this subject.

1) This type of care is subject to prior approval from Univé (in some cases). Please consult the policy conditions for more details.

Reimbursement Table	Basic Insurance	Supplementary insurance		
		Goed	Beter	Best
Sterilisation				
Male sterilisation (vasectomy), with contracted healthcare providers only. Alternatively, you can have it done by a general practitioner. The GP does not need to have a contract with us.			full	full
Female sterilisation, with contracted healthcare providers only			full	full
Quitting smoking				
Quit Smoking programme. Under the Univé Zorg Geregeld policy, the medications may only be delivered by one of our contracted online pharmacies. With the Univé Zorg Vrij policy, any pharmacist or dispensing general practitioner may supply the medicines	● once per year			
Dental care/Oral care				
Dental and orthodontic care in special cases				
- dental care (including any implants and technology expenses) and orthodontic care in special cases, subject to approval ¹	● this may be subject to a personal contribution			
Dental care up to age 18				
- dental care, with the exception of orthodontic care - crowns, bridges or implants for specific medical indications and jaw overview photos, after permission ¹	●			
Maxillary surgery from age 18				
Specialist dental surgery (subject to approval ¹) with the exception of the insertion of dental implants, gum treatment and uncomplicated extractions	●			
Dentures (dental prosthesis) from age 18				
- removable full dentures, including technology expenses, subject to approval ¹	● subject to a 25% personal contribution		full reimbursement of the personal contribution	full reimbursement of the personal contribution
- removable full dentures on implants, including technology expenses, subject to approval ¹	● subject to a personal contribution of 8% (upper jaw) and 10% (lower jaw)		full reimbursement of the personal contribution	full reimbursement of the personal contribution
- removable full dentures, including technology costs: standard dental prosthesis on one jaw and an implant-supported prosthesis on the other jaw	● subject to a 17% personal contribution		full reimbursement of the personal contribution	full reimbursement of the personal contribution
- rebasing and repairing your full dentures	● subject to a 10% personal contribution of the costs		full reimbursement of the personal contribution	full reimbursement of the personal contribution
Tissue and organ transplants				
If the transplant was performed in an EU or EEA member state	●			
Stay				
Stay in a convalescence home/assisted accommodation (with contracted healthcare provider) possible: 1 immediately following discharge from a hospital or treatment in an independent treatment centre after full completion of your treatments 2 if your family care provider is unable to perform the work, permanently or temporarily, and there is no other option for care at home 3 if you want to recover from mental or physical overburden or burn-out.		€ 100 per day, capped at € 1,000 per year	€ 100 per day, capped at € 1,500 per year	€ 100 per day, capped at € 2,000 per year
Stay in hospice (by accredited healthcare provider)		€ 40 per day	€ 40 per day	€40 per day
Stay in: - psychiatric or other hospital - GGZ institution, subject to approval ¹ - institution for first-line hospitalisation - rehabilitation institution (subject to approval ¹) - medical childcare centre relating to intensive childcare	●			
Stay in a short-stay or family guest house: - when your under-age child or your partner is hospitalised - when you are required to complete two day sessions on consecutive days in a hospital located more than 40 kilometres from your home address.		€ 45 per day	€ 45 per day	€45 per day
Stay in accommodation in Gasthuis Antoni van Leeuwenhoek Hospital or the Daniël den Hoed Family Residence if you have polyclinic treatments here.		full	full	full

If an item is marked with ● in the reimbursement table, this item is covered. The amount of the reimbursement depends on the insurance you have chosen in combination with the chosen care provider. Please refer to page 2 for more information on this subject.

1) This type of care is subject to prior approval from Univé (in some cases). Please consult the policy conditions for more details.

Reimbursement Table	Basic Insurance	Supplementary insurance		
		Goed	Beter	Best
Nursing and care (district nurses)				
Nursing and care without stay and nursing day care intensive childcare (possibly in the form of a personal budget (pgb)), subject to approval ¹	●			
Transport				
Ambulance transport	●			
Seated transport of the patient for specific medical referrals, subject to approval ¹ , for visits, check-ups, testing and treatments based on:				
- personal vehicle	● €0.32 per km, subject to an annual €108 personal contribution			
- public transport or taxi	● subject to a personal contribution of €108 per year			
- taxi transportation (by contracted transport firm) or personal transport in the context of organ transplant		taxi: full personal vehicle: € 0.32 per km	taxi: full personal vehicle: € 0.32 per km	taxi: full personal vehicle: € 0.32 per km
- Cost of stay: do you need to travel a long distance for treatment over an extended period of time? And are you eligible for reimbursement of the cost of transportation (seated transport)? Then you can opt for reimbursement of lodging expenses. This is possible if you are having treatments for at least 3 consecutive days. If you choose this reimbursement, we will not reimburse seated patient transport.	● maximum €76.50 per night			
Nutrition advice				
Dietetic care: information with a medical purpose about food and eating habits	● 3 hours of sessions per year			4 hours of sessions per year
Dietetics after severe COVID-19: - First 6 months - Second 6 months The government has determined that this care will be reimbursed until 1 August 2021 at the latest. In order to qualify for care after serious COVID-19, further conditions apply. More information and conditions can be found on our website.	● 7 treatment hours ● 7 treatment hours			
Weight consultant		€ 50 per year	€ 100 per year	€ 150 per year
Foot treatments				
A budget to be spent on the healthcare types listed below: - foot treatments if you have rheumatism (rheumatoid arthritis) - foot treatments if you have diabetes with care profile ¹ . In certain cases, foot care is covered for diabetes mellitus under the basic healthcare policy as part of general practitioner care. - podiatry	●	€ 100 per year	€ 300 per year	€ 500 per year
Arch supports and therapy soles		€ 70 per year	€ 125 per year	€ 125 per year
Sensory disability care				
Multidisciplinary healthcare in the context of a visual, auditive or communicative disability	●			

If an item is marked with ● in the reimbursement table, this item is covered. The amount of the reimbursement depends on the insurance you have chosen in combination with the chosen care provider. Please refer to page 2 for more information on this subject.

1) This type of care is subject to prior approval from Univé (in some cases). Please consult the policy conditions for more details.

Dental packages

Reimbursement Table	Dental packages			
	Accidents	Goed	Beter	Best
Dental care from age 18				
Dental care. Not covered is the cost of orthodontic care, full narcosis or sedation and whitening teeth (including technology and supplies)		€250 per year: 100% periodical check-up (C11) and problem-specific visit (C13) and 80% other dental care	€500 per year: 100% periodical check-up (C11) and problem-specific visit (C13) and 80% other dental care	€1,000 per year: 100% periodical check-up (C11) and problem-specific visit (C13) and 80% other dental care The plan is subject to a qualification period of 12 months for partial dental prostheses and implants, crowns and bridges
Personal contribution removable full dentures (on implants)		Full reimbursement of the personal contribution	Full reimbursement of the personal contribution	Full reimbursement of the personal contribution
Orthodontic care				
Up to age 18			€1,500 for the entire term of the insurance policy	€2,500 for the entire term of the insurance policy The plan is subject to a 12-month qualification period
From age 18			€500 for the entire term of the insurance policy	€1,500 for the entire term of the insurance policy The plan is subject to a 12-month qualification period
Tand Ongevallen				
Dental costs resulting from an accident (subject to approval ¹)	€10,000 per accident	€ 10,000 per accident	€ 10,000 per accident	€10,000 per accident

1) This type of care is subject to prior approval from Univé (in some cases). Please consult the policy conditions for more details.

Practical for everyone Univé's extra benefits

Univé allows you to benefit from the advantages of a high-quality healthcare insurance. And we offer many practical extra benefits.

Healthcare assistance

With Univé's Healthcare assistance desk via unive.nl/zorghulp, you never walk alone. In case of doubt about a doctor visit, or to find the right type of healthcare, especially if you are confronted with a waiting list. Alternatively, you can call Doctor at Hand to ask all your medical questions.

On holiday

You can make use of our Holiday Help at unive.nl/onbezorgdopvakantie. If you have any doubt about visiting a doctor, or if you need an interpreter if you need a medical visit.

Univé Kraamzorg

For requesting maternity care and/or a maternity package, please refer to unive.nl/vergoedingzoeker.

Univé Emergency call centre

If you fall ill abroad and you are hospitalised for at least one night, you are required to contact the people of the Univé Emergency call centre. They will tell you what needs to be arranged. They will also assess which costs are covered and which are not. The Univé Emergency call centre can be reached day and night via +3140 297 57 50. The telephone number of the Univé Emergency call centre can also be found on your healthcare card.

Univé App

With the Univé App, you always have your online healthcare card at hand, and you can see what's left in your healthcare budgets. It is also very easy to submit claim forms and find a healthcare provider. The Univé App also shows all your other Univé policies at a glance.

Mijn Univé Zorg

In Mijn Univé Zorg, you can see your reimbursements, submit online claim forms, see your policy excess and receive your post in digital form. Log in at mijnunivezorg.nl.

Relying on helping each other



In these times of turbulent change, Coöperatie Univé offers the assurance of helping each other. We are close to you thanks to over 110 Univé outlets and we are available online, for example through the Univé App. Since 1794 we have helped prevent risks, limit consequences and insure only what is necessary. We help people stay healthy, among others by encouraging sports and movement. We support people who want to help each other. For example, we make it a little bit easier for our family care providers based on replacement family care. We have a cover for first-aid training and reanimation courses in our supplementary insurance policy/policies. We are Univé. We are our members, and we make sure we help each other. You benefit from that now. Read more about it on unive.nl.

Want to know more?

Website
unive.nl

Telephone number
+31 (0)72 527 75 95
unive.nl/klantenservice

Correspondence address
Univé
PO Box 445
5600 AK Eindhoven, the Netherlands

Drop by in our shop

You are more than welcome at the Univé office near you. For a list of our offices, please refer to unive.nl/contact

Complaints procedure

Do you have any complaints about your healthcare insurance? Please find the details of our complaints procedure on unive.nl.

This reimbursement table contains a summary of the policy conditions. Please find a full overview of the policy conditions at unive.nl. This table is subject to type and printing errors.

N.V. Univé Zorg (Univé), with its statutory office in Arnhem • Chamber of Commerce registration number 37112407 • DNB licence number 12000665