Sometimes you need to be admitted to hospital for treatment or tests. In this case, it is very important that you are aware of all the rules so you do not end up with financial worries as a result of your hospitalisation. The health service in our country is extremely well organised: it is a high-quality service and the Belgian health insurance will largely refund any costs incurred. However, in the case of hospitalisation, you are expected to partially or fully pay for certain medical costs, such as patient contribution, medical materials, medication, doctors’ expenses, and your room.

You are free to choose the hospital, except in an emergency when you are transported by 112 services. However, not all hospitals offer every treatment option, and also if your doctor is affiliated with a hospital, your freedom of choice is limited. If necessary, your attending practitioner can contact the designated hospital to arrange the date of your hospital admission and to make the necessary medical arrangements.

Hospitals and certain care providers can consult your national health insurance details online, using your national insurance number. Because this number is on your electronic identity card (eID), they will require your electronic identity card upon admission.

**ISI+ card**
If you do not meet the requirements for an eID, you will receive an ISI+ card with your national insurance number. The ISI+ card is issued to children under 12 and persons who do not have an eID, but who are covered by national insurance in Belgium (e.g. cross-border workers and their families).

The cost of hospitalisation depends on many factors, but there are some guidelines. The total price is mainly determined by your choice of room. Your health insurance will refund the same amount for a single or jointly shared room, or a stay on a ward. The hospital may charge extra for a single room and also for the consultant, the so-called ‘erloonsupplementen’ for singles or consultants. For your medical care, you may be charged up to 100% of the usual rate or more. So, generally, you will pay a lot more for a single room.

After being admitted to hospital, you will be issued a hospital admission form. You can use this form to select your choice of room and rate. It will also contain important information about the financial aspects of your admission.

Attention: what if you do not satisfy all the health insurance conditions? In that case, you are liable to pay a large part or even all of the costs of your admission and stay in hospital. You can avoid these costs by contacting your health insurance. Make sure that everything is in place as soon as possible.
Tips for reducing the costs

- Ensure that you are up to date with your health insurance contributions, or you may have to pay the entire bill yourself.
- Find out about the costs for your room and your consultant beforehand (the so-called ‘ereloonsupplementen’). You can find the fees on the website of the hospital or on the declaration of admission. Ask the hospital explicitly for the cheapest option.
- Read the declaration of admission thoroughly. Be very careful before you sign it, as this is a legally binding document.
- Ask your doctor or hospital about the cost of the medical procedure and the materials used (e.g. implants, prostheses) and the services you are liable to pay for, either partially or in full. These costs can be very high. See www.cm.be/kostenraming for more information.
- What if you can’t go back to work directly after your hospitalisation? Then, notify CM within 24 hours following your discharge from hospital. Use the official form ‘Aangifte van arbeidsongeschiktheid’ [Statement of fitness for work], have it completed by your attending doctor and send it by post to CM. The postmark serves as proof of submission.

What about reimbursement of hospital bills?

1. **Hospital insurance** covers part of the cost if you are admitted to hospital. Patient contributions and any additional fees for single rooms or consultants are at the expense of the patient.

2. If you are not covered by your hospital insurance, the package **CM-diensten en voordelen** will reimburse part of medical expenses in the case of hospitalisation. Of course, this contribution does not offer the same protection as hospital insurance but it will help lower your bill.

3. You can avoid high hospitalisation bills by joining the cost-effective **CM hospitalisation insurances**.

**CM-Hospital Plan**

A reliable, cost-effective, invoice-based insurance that provides an allowance for:

- Cost of hospitalisation;
- Cost of one month of medical precare and aftercare, for up to three months following hospitalisation;
- Costs as a result of certain serious illnesses.

**CM-Hospital-Fix or CM-Hospital-Fix Extra**

This flat-rate insurance automatically pays a fixed amount for each day of hospitalisation.

- **CM-Hospital-Fix**: you are refunded 12.37 euros for each day of hospitalisation;
- **CM-Hospital-Fix Extra**: you are refunded 25 euros for each day of hospitalisation, even for a one-day stay, and, in certain cases, a lump sum.

**Optimum protection**

By combining CM-Hospital Plan with CM MediKo Plan you can rest assured your medical expenses are covered, both inside and outside the hospital, and all year round. This way, we ensure you have optimum protection.

Having all your health care insurance cover under the same roof provides additional security. As a CM member, you can count on a number of hospitalisation allowances in our comprehensive package of additional services and benefits.

Do you have any questions?

You can find more Dutch language information about CM hospitalisation insurances and what to do if you are admitted to hospital by visiting www.cm.be/verzekeringen. Or make an appointment at the CM office in your neighbourhood.