UZ Leuven Herestraat 49

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Explanation of the admission statement

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

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

The cost will be determined by the following factors:

- 1. your insurance policy
- 2. your choice of room
- 3. the duration of your hospitalisation
- 4. pharmaceutical costs
- 5. fees charged by physicians and paramedics
- 6. the costs of any additional products or services.

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

Please contact the department medical administration (tel. 016 34 74 00, medische.administratie@uzleuven.be) or your treating physician first. Your sickness fund will also be able to help you.

If necessary, you can also contact our hospital's social service (tel. 016 34 86 20, social werk@uzleuven.be) and mediation service (tel. 016 34 48 18, ombudsdienst@uzleuven.be). More information about the costs relating to your hospitalisation and your treatment can be found on www.uzleuven.be.

Within the framework of the Patient Rights Act, every professional must clearly inform his patient about the intended treatment. This information also relates to the financial consequences of the treatment.

1. Insurance

Every Belgian resident must be covered by a sickness fund. The health insurance scheme will pay part of your costs of your medical treatment and hospitalisation through the sickness fund. As a patient, you will have to pay part of those costs yourself. That is your patient contribution or the non-refundable part of your medical costs. Some people benefit from <u>increased reimbursement rates</u> (also called preferential tariff rates), for example based on their income and/or family situation. The patient contribution of those people will be lower when hospitalised than that of ordinary insurance contributors. You can ask your sickness fund whether you benefit from that tariff.

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

Some interventions (because of their **exclusively cosmetic nature** for example) will not be reimbursed by the sickness fund. In that case, you will have to pay all hospitalisation costs (both medical treatment and stay) yourself, even if you benefit from increased reimbursement rates. Your physician or sickness fund will be able to provide you more information about the refundability of some interventions.

If you need to be hospitalised as a result of an <u>accident at work</u>, you must inform the hospital when you are admitted. If the occupational injuries insurance recognises the accident, it will pay the costs directly to the hospital. Some costs, e.g. additional charges for an individual room, are never reimbursed by the occupational injuries insurance. You will have to bear those costs yourself.

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

If your situation is not mentioned above (e.g. patient receiving income support from a public social assistance centre (OCMW/CPAS), patient insured in another member state of the European Union, ...), please contact the the department medical administration (tel. 016 34 74 00, medische.administratie@uzleuven.be) to receive more information about your rights.

2. Choice of room

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

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

- a shared room
- an individual room

If you choose a shared room for an overnight hospital stay, you will pay no extra fees or additional room charges.

If you explicitly choose to stay in an individual room (and actually stay in such a room) the hospital is entitled to invoice <u>additional room charges</u> and the physicians are entitled to charge <u>extra fees</u>. Staying in an individual room is therefore more expensive than staying in a shared or a two-patient room.

When choosing a type of room you agree to accept the consequential financial conditions with regard to additional room charges and extra fees.

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

3. Hospitalisation costs

1. Legally fixed patient contribution per day

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

	Beneficiary receiving increased reimbursement rates	Child, dependant	Long-term unemployed person (single or head of the family) and the dependant (s)he is liable for	Beneficiary with a dependant and their dependants	Other beneficiary
1st day	€ 7,03/day	€ 34,30/day	€ 34,30/day	€ 47,08/day	€ 47,08/day
From the 2nd day	€ 7,03/day	€ 7,03/day	€ 7,03/day	€ 19,81/day	€ 19,81/day
From the 91th day	€ 7,03/day	€ 7,03/day	€ 7,03/day	€ 7,03/day	€ 19,81/day

Our hospital charges \in 1175,41 in a classic unit, \in 793,13 in a sp locomotor unit, \in 860,14 in a sp palliative unit and \in 2598,03 in a burns unit per hospitalisation day. If you are not in compliance with the requirements set by your sickness fund, you will have to pay all those charges yourself.

2. Additional room charges per day

If you stay in a shared room, it is legally forbidden for a hospital to invoice additional room charges.

If you explicitly choose to stay in an individual room and actually stay in such a room, the hospital is entitled to invoice additional room charges. The additional room charges in our hospital amount to:

- € 90,00/day for an admission
- € 75,00 for a one-day admission

In the following exceptional circumstances it is legally forbidden to invoice additional room charges to the patient:

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

4. Pharmaceutical costs

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

A fixed patient contribution of 0.62 euro per day will be charged for medication that is reimbursed by the health insurance. On your hospital bill, this amount will be included in the hospitalisation costs. Those costs include a large number of medicines, which will not be charged separately. You always have to pay this fixed contribution, regardless of the medicines you really take.

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

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

5. Fees charged by physicians

1. Legal rate

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

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

Some medical services are not reimbursed by the health insurance and the fees charged for those services can be freely determined by the physician.

2. Legally fixed patient contribution

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

3. Extra fees

Hospital physicians are entitled to charge extra fees on top of the legal rates. Those extra fees are not reimbursed by the health insurance and shall be paid entirely by the patient.

If you stay in a shared room during an overnight stay, it is legally forbidden for physicians to charge extra fees. The maximum fees charged in our hospital can be found in the admission statement and amount to 150 %.

If you explicitly choose to stay in an individual room and actually stay in such a room, all physicians are entitled to charge you extra fees.

• The maximum extra fees that a physician in our hospital is entitled to charge amount to 150 % of the legally fixed rates. Every physician involved in your treatment (anaesthetist, surgeon, ...) is entitled to charge you extra fees. For example: the maximum extra fees charged by a physician amount to 100%. For an intervention that legally costs 75 euro and of which the sickness fund reimburses 50 euro, you will have to pay 100 euro yourself (a patient contribution of 25 euro and extra fees amounting to 75 euro).

In the following exceptional circumstances it is legally forbidden to charge extra fees to the patient:

- when your treating physician judges hospitalisation in an individual room a medical necessity;
- when you are cared for in an individual room for organisational reasons because the type of room you have chosen is not available;
- when you are admitted in or transferred to an intensive care unit or the emergency unit, as long as you stay in that unit.

4. Admission of a child accompanied by a parent

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

If you explicitly choose to have your child admitted in an individual room while it is accompanied by a parent and you actually stay in such a room, the hospital is **not allowed to invoice additional room charges**. **However**, every physician involved in your child's treatment is entitled to **charge you extra fees**.

5. Schematic overview of the extra costs in case of overnight hospitalisation

	When you choose a shared room	When you choose an individual room
Additional room charges	<u>NO</u>	 YES NO if: your physician decides that your state of health requires examination, treatment or supervision in an individual room; you have chosen to stay in a shared room and there is no such room available; you are staying in an intensive care unit or in an emergency unit; a child is admitted while accompanied by a parent.
Extra fees	<u>NO</u>	 YES NO if: your physician decides that your state of health requires examination, treatment or supervision in an individual room; you have chosen to stay in a shared or a two-patient room and there is no such room available; you are staying in an intensive care unit or in an emergency unit.

6. Billing conditions

All extra fees will be invoiced by the hospital.

Never pay your physician directly.

Feel free to ask your treating physician for information about the extra fees (s)he charges.

6. Various other costs

During your hospitalisation, you can use some products and services for medical and/or comfort reasons (e.g. telephone, water, internet, etc.). The costs for the accommodation of an accompanying person who has not been admitted as a patient but who is staying in your room (bed linen, meals, etc.) will be invoiced as "various costs". Regardless of your choice of room, you will have to bear those costs in full.

A price list of those products and services is available at the department medical administration (tel. 016 34 74 00, medische.administratie@uzleuven.be) and can also be consulted on the website of the hospital.

Some examples of services and products that are often requested:

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

7. Advances

8. Miscellaneous

All amounts mentioned in this document can be indexed and can therefore be modified while you are hospitalised. The amounts apply to patients who are in compliance with the requirements with regard to compulsory health insurance (cf. point 1).

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