

Benefits of the German State Health Insurance Providers

The German state health insurance providers' benefits are divided into standard benefits and supplementary benefits.

The standard benefits are set by the German Social Security Code ("Sozialgesetzbuch") and apply to all health insurance companies. In addition, the Social Security Code allows health insurance companies to also offer supplementary benefits ("Mehrleistungen") in certain areas. These additional benefits vary depending upon the health insurance provider.

Here is a summary of the standard health insurance benefits:

Medical and Dental Care

Insured individuals have the right to medical and dental care provided that a doctor who has been certified by the health care companies performs the medical treatment. The medical treatment comprises the doctor's function in the adequate and purposeful prevention, early detection, and treatment of illness according to (conventional) medicinal practices. The insured individual has the right to select his personal doctor among all health insurance-licensed practitioners (called "Kassenarzt" in German).

Medications and Bandages

Insured individuals have the right to receive prescription medications and bandages.

Medical Treatment Abroad

Beneficiaries of German state health insurance may receive outpatient medical treatment while abroad in Europe. For medical treatment abroad, the health insurance providers must reimburse the costs that would have been incurred if the treatment had been completed in Germany (even without a prior authorization from the health insurance company). Inpatient treatments in hospitals are excluded from this; in this case, prior authorization from the German health care provider is necessary.

Contraception

Insured individuals have the right to receive medical consultation in regard to questions about contraception. The necessary physical examinations as well as the corresponding prescribed contraceptives are also included in the health insurance coverage.

Important: The term "prescription" does not signify "provisioning" and therefore only implies the issuing of a prescription.

Other Forms of Medical Treatments

German state health insurance providers also cover treatments such as physical therapy, massages, or medicinal baths that are carried out as part of a doctor's treatment or outpatient treatment in a hospital or rehabilitation center. The following are some of the most common forms of these alternative medical treatments:

- * Physical Therapy
- * Language, Voice and Speech Therapy
- * Occupational Therapy

Medical Aids, Vision and Hearing Aids

Vision aids, hearing aids, prosthetic limbs, as well as orthopedic aids (provided that these are not considered “articles of everyday use”) are some of the most common forms of medical aids. The insured individual has the right to the alteration, repair, and replacement of these medical aids.

Vaccinations

As of April 1, 2007, all health insurance providers are obligated to cover the costs of all vaccinations recommended by the Vaccination Commission (“Ständige Impfkommission”) of the Robert Koch Institute. Please note, however, that the costs of vaccinations required for travel to certain countries/ regions are not covered. These vaccinations remain the sole responsibility of the insured individual.

Orthodontic Treatment

Insured individuals have the right to receive orthodontic treatment in the case of a misalignment of the jaw or teeth that significantly impairs or threatens to impair chewing, biting, speaking, or breathing. The individual contribution (20%) is initially paid to the doctor and is then reimbursed by the health insurance provider after the “successful” completion of the treatment.

Health Examinations for Children

Children under six years of age may receive medical check-ups (examinations “U1-U9” at the pediatrician) for the early detection of illnesses that endanger the child’s physical or mental development. In addition, children between three and six years of age may be examined for tooth, mouth, and jaw disorders and illnesses (examinations “FU1-FU3” at the dentist).

The following is an overview of the health examinations:

U1: 1st Day

U2: 3rd-10th Day

U3: 4th-7th Week

U4: 3rd-4th Month

U5: 6th-7th Month

U6: 10th-12th Month

U7: 20th-24th Month

U7a: 34th-36th Month (NEW)

U8: 44th-48th Month

U9: 60th-66th Month

U10: 7th-8th Year

U11: 9th-10th Year

J1: 14th Year

J2: 16th-18th Year

Hospital Treatment

Insured individuals have the right to full and partial pre- and post-inpatient treatment as well as any related medical care carried out in a hospital. If the insured person chooses a different hospital from that which was recommended in the doctor’s referral without presenting a compelling reason, they may be required to completely or partially cover any additional charges that may arise (especially due to elevated medical care costs or transportation costs).

Artificial Insemination

Insured persons have the right to medical procedures that assist pregnancy. A doctor must determine that these procedures are necessary for a pregnancy and they must demonstrate strong chances of success. Success is no longer considered possible after three failed insemination attempts. Further requirements include the exclusive utilization of the married couple's egg and sperm cells. Since 2004, the right to artificial insemination exists only for insured individuals over the age of 25.

Limitations of Health Coverage Due to Self-Inflicted Injuries

In the case that an insured individual has willfully contracted an illness or has done so by committing a crime or misdemeanor, the health insurance provider may require the individual to pay a higher contribution towards the costs of the treatment. In addition, the provider may also completely or partially refuse to provide the individual with sick pay for the duration of the illness. This also applies to necessary medical treatment for cosmetic surgery, piercings, tattoos, etc.

Medical Rehabilitation Procedures

In the case of certain medical circumstances, the health insurance company may also provide for rehabilitation services in certified rehabilitation centers. The condition for this medical coverage is the insufficiency of outpatient medical care to prevent a significant disability or long-term nursing care or to overcome, improve, or to prevent an aggravation of the physical malady after its onset.

Prevention, Health Care and Self-Help

Primary prevention signifies the avoidance of a not-yet contracted illness through appropriate prevention. Health insurance providers are required by law to pay a yearly increasing minimum amount per health insurance policyholder for these forms of medical care. In addition, health insurance providers are to support self-help groups, organizations, and contact centers with a certain monetary amount per policyholder each year. Self-help organizations are required to focus on the prevention of and rehabilitation from certain illnesses in order to receive this support.

Psychotherapeutic Treatment

Insured individuals may select a psychotherapist or a doctor of their choice for consultation. When an insured individual chooses a therapist without a medical degree, the therapist will clarify his findings through therapy sessions. Afterwards, the therapist must have a doctor verify that the patient's complaints are not caused by a physical malady. If this is not the case, the therapist will request the coverage of the psychotherapeutic treatments from the health insurance provider.

Termination of Pregnancy

Health insurance providers pay for an abortion only in the case that it is not performed in an unlawful manner. Furthermore, an abortion may only take place in an institution certified and approved of by the respective legislation (the "Schwangerschaftskonfliktgesetz").

Health Examinations (Cancer)

Women of 20 years or older may have themselves examined once every year for the early detection of cancer. Men have the right to these examinations only after they have reached the age of 45.

Dentures

The nationwide fixed benefits cover 50% of the separately calculated costs of the dental care and dental prosthetic production for the respective standard patient care.

Additional Payments/ Individual Contributions

An additional payment amounting to 10% of the costs is charged for all treatments. The minimum payment is 5 euros and the maximum is 10 euros. If the cost of the treatment lies below 5 euros, this counts as the additional payment.

Please note:

Medical repatriation is not covered within the standard benefits by German state health insurance. If you would like this to be covered, we recommend that you additionally purchase an international health insurance in your home country that includes this benefit!