

HOW TO choose my Dutch Health insurance

In the Netherlands, everybody is entitled to medical care by law. Everyone who lives in the Netherlands and enjoys an income in, or from, the Netherlands is obliged to have at least a basic health insurance. There are 2 types of health insurance:

Compulsory basic insurance (*basisverzekering*)

Optional additional insurance (*aanvullende verzekering*)

This handout focuses on [health care insurance](#). If you need information on damage insurance, please let us know.

Basic health insurance (*basisverzekering*)

In the Netherlands, the government is responsible for the accessibility and quality of the healthcare system. The Dutch health insurance system is a combination of private health plans with social conditions. The basic package provides the same basic health coverage across all insurers. The basic health insurance costs around €102 per month and covers: general practitioner/medical specialists/pharmaceuticals/maternity care/patient transport. This rises to around €122 per month if dental care is to be included.

Insurance companies are obligated to accept anyone who is covered by the social insurance obligation into the *basisverzekering*. You can only be refused when you have not paid the premium or you committed fraud with your health insurance. It is important to know that for the most services, you will need to cover a portion of the costs via your annual *eigen risico* amount (excess amount) up to a maximum of €385.

Additional insurance (*aanvullende verzekering*)

You can expand the *basisverzekering* with an optional additional insurance or *aanvullende verzekering*. Every insurance company offers slightly different supplementary insurances. Insurance companies are not obligated to accept clients who want to have additional insurance. Before accepting you into the additional insurance, the insurance company can request that you fill out a list of medical questions or that you participate in a medical examination.

You must take out insurance with a Dutch insurer within four months of arrival, even if you have an existing policy that provides coverage in the Netherlands. Children under 18 are included in their parents' insurance.

The bottleneck for taking out Dutch health insurance will be the availability of your residence pass(es) (if applicable) and BSN number(s). Some municipalities have a processing time of several weeks to send you your BSN number. Although it makes it easier when the BSN number is available, the company will accept your application. Please ask your insurance company what data they need to accept you.

Most health insurers request all the documents are submitted within four months from the date that the entitlement commences, i.e. the employment start date. The *basisverzekering* will then be provided retrospectively from the employment start date.

There are many insurance companies in the Netherlands. Although in Dutch mainly, the following websites might help you choose between providers:

Zorgwijzer	www.zorgwijzer.nl
Independer	Comparison in Dutch: www.independer.nl/zorgverzekering Info in English: www.independer.nl/zorgverzekering/info
Hoyhoy	www.hoyhoy.nl/zorgverzekering
Zorgverzekering	www.zorgverzekering.org
Zorgkaart	www.zorgkaartnederland.nl/zorgverzekeraar

Some reliable companies are:

ONVZ	www.onvz.nl/english
Zilveren Kruis Achmea	www.zilverenkruis.nl
Menzis	www.menzis.nl/zorgverzekering

Having said all this, your employer will most likely have contracted a health insurer for their staff. Such a group insurance policy (*collectieve verzekering*) usually means that your premium is lower, so it might be a good idea to follow your company's lead and take out your insurance with the company selected by your employer.

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Version 20.03 - 01/01/20 - External