

WHAT DO I PAY FOR MENTAL HEALTHCARE?

Everyone who lives or works in the Netherlands must take out basic insurance with a healthcare insurer. The basic insurance reimburses treatment in mental healthcare (GGZ) for insured people aged 18 and older. This includes a stay of up to three years in a mental healthcare institution. For this care, you pay the basic insurance excess.

You can read more about the excess that falls under the Long-Term Care Act (Wlz) or the Social Support Act (Wmo) on the government's website. (*www.rijksoverheid.nl*).

THE CARE PERFORMANCE MODEL

The mental healthcare sector has a funding model: the care performance model. The funding model is the way a healthcare provider (GGzE) charges for the care provided. GGzE will send you or your healthcare insurer an invoice for the care you received from GGzE.

Your mental healthcare treatment consists of several components. For example, conversations with a healthcare professional. Or a number of days and nights at a clinic. In the care performance model, these components are called care performances. The invoice the healthcare provider sends you or your healthcare insurer lists the care performances. This clarifies what care you or your healthcare insurer is paying for.

You can see who you talked to during a consultation and how much time is charged for it.

EXCESS

You pay an excess if you are 18 or older and use care from the basic package. In 2027, the mandatory excess is €400. This means you pay the first €400 of care costs from the basic insurance yourself. Your healthcare insurer will cover the costs after that.

Your healthcare insurer will charge you for the excess as soon as it receives the healthcare costs that fall under the basic insurance from the healthcare provider. This only happens if you have not yet/not fully paid that year's excess.

If you want more information or have questions about your excess, contact your healthcare insurer or check the government's website.

CARE IF YOU ARE FROM ABROAD AND STAYING IN THE NETHERLANDS

EU residents
The European Health Insurance Card (EHIC) entitles you to essential medical care during your temporary stay in the Netherlands. This applies to both tourists and treaty beneficiaries. You must show the EHIC at the first contact.

Non-EU residents or international students from outside the EU
If you have international insurance, mental healthcare may not be fully reimbursed; check your policy conditions.

Asylum seekers
To be entitled to care as an asylum seeker you must have a Central Agency for the Reception of Asylum Seekers (COA) registration number. Contact the Medical Care Scheme for Asylum Seekers (RMA) for this: (088) 112 21 46 / *zorgrma@rmasielzoekers.nl*



QUESTIONS
If you have any questions, please check *www.ggze.nl/het-zorgprestatiemodel-zpm*
There we provide answers to frequently asked questions. If you can't find the answer to your question, ask the GGzE debtor's department via *vragenoverjefacturen@ggze.nl* or contact your healthcare insurance company.

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