

What do I have to do if I need a doctor?

After you have submitted an application, you will receive medical treatment certificates together with the confirmation of coverage. This contains important information for you and the respective doctors about your Care Austria international health insurance coverage. Please print this medical treatment certificate out and take it with you to your doctor. They can then send us the invoice directly; however, as there is no direct contractual relationship between us and the doctor, they may send you the invoices or wish to settle the costs with you immediately after the treatment. At this point, we would like to point out that you are obliged to pay the fee if the costs are not covered by the insurance or only partially covered, irrespective of the fact that the invoice issuer sends the invoice directly to Care Concept AG.

Do I have a free choice of doctor with a Care Austria international health insurance policy?

If you do not feel well and require medically necessary treatment, you basically have a free choice of doctor with a Care Austria policy. Within and outside Austria, you can choose between doctors and dentists who are legally recognized and licensed in the destination country, as well as other, state-approved practitioners who can carry out medically necessary treatment and who have recognized and solid training in their respective field of expertise. Outside the Federal Republic of Germany, you are free to choose between doctors and dentists who are legally recognized and licensed in the destination country, as well as other state-approved practitioners who can provide medically necessary treatment and who have recognized and solid training in their respective field of expertise. Information about licensed physicians outside the Federal Republic of Germany can be obtained from embassies, consulates, chambers of commerce and similar institutions.

I have received treatment from a doctor. What do I do next?

My Care Concept Customer service portal:

If you have a claim and would like to send us any relevant documents such as doctor's bills or pharmacy receipts, or if we have asked you for some information regarding a request for reimbursement (for example, a completed self-disclosure form or proof of entry into a country), you can upload all documents quickly and easily here: [My Care Concept Customer service portal](#)

Your advantage: You do not need to send us anything by regular mail or email*, and you will receive the benefits stipulated in your policy **very quickly**.

*In individual cases we reserve the right to request original versions of the documents.

Care Concept InvoiceApp:

With our new **Care Concept InvoiceApp**, you can scan documents quickly and easily from anywhere with your cell phone or tablet and transmit them to us in a secure manner:

[Care Concept InvoiceApp](#)

Your advantage: You do not need to send us anything by regular mail or email*, and you will receive the benefits stipulated in your policy **very quickly**.

*In individual cases we reserve the right to request original versions of the documents.

To what extent are outpatients and inpatients who are insured under a Care Austria plan reimbursed?

In addition to the contractual agreements, which costs are reimbursed and to what extent they are reimbursed depends on whether or not a cost assessment basis is available and which basis is available for a doctor's statement of account in the destination country.

Within Austria, medical treatment costs are reimbursed to the contractually agreed extent that they were invoiced in accordance with the respective valid official schedule of fees for physicians and dentists and/or the procedure-oriented financing of hospitals.

Outside Austria, the costs of medical treatment are reimbursed to the contractually agreed extent that they are calculated and appropriate based upon the customary cost assessment bases (e.g. schedule of fees for doctors, fee agreements between the medical profession and the public or private health insurance providers, etc.) of the destination country. If there is no cost assessment basis that is typical for the country in question, reimbursement will be made upon the basis of appropriate fees that are generally customary in the destination country.

Am I also insured in my home country?

In the first policy year after the coverage starts, coverage is provided for a temporary stay up to 14 days in the home country, provided that the first policy year is less than four months. If the period of the first policy year is more than four months, temporary home country coverage exists for up to 28 days after the coverage has started. This also applies to subsequent years.

In which other countries am I insured?

Care Austria (unlimited) is primarily designed for a stay in Austria. Additional insurance coverage exists, however, for a temporary stay in the member states of the European Union as well as the countries of the Schengen Agreement, if these are also EU countries. Temporary insurance coverage exists for the countries of the Schengen Agreement, as far as they are not simultaneously member states of the EU and in accordance with the regulations for temporary holiday stays in the home country.

With Care Austria 364, limited insurance coverage also exists for up to 30 days in the member states of the European Union and the countries of the Schengen Agreement. Even after Brexit (Great Britain's withdrawal from the EU) limited insurance coverage for up to 30 days for stays in Great Britain exists.

Can I contact Care Concept before treatment begins?

If you are unsure or need advice, please feel free to contact us at any time. During our business hours (Monday to Friday from 9 a.m. to 5 p.m.) you can reach our claims team at the telephone number: +49 228 97735-22. You are also welcome to send us an e-mail: claims@care-concept.de.

You can also reach our qualified contact persons outside our business hours at the 24-hour service number, which you will find in your policy documents. We ask you to please use this telephone number, especially in cases of emergency.



I am in the USA, Canada or Mexico and have to see a doctor. What do I need to take into account?

Auch bei Heimatlandaufenthalten in den USA, Kanada und Mexiko sind wir an Ihrer Seite. In der Regel wird das Honorar in diesen Staaten zwischen Ihnen und dem Arzt vereinbart, wobei die Preise sehr unterschiedlich sein können. We are also there for you during visits to your home country in the USA, Canada or Mexico. In general, the doctor's fees are agreed upon between you and your doctor in these countries, although the costs can vary considerable. Therefore, as far as possible, we ask you to please contact the following persons **before** a visit to the doctor, and **definitely before** any treatment in a hospital.

MedCare International Inc.

12480 West Atlantic Blvd, Suite 2, Coral Springs, FL 33071, USA,

Phone: +1 954.345.5650, **Fax:** +1 954.340.4245

E-Mail: care-concept@medcareinternational.com, **Internet:** www.MedCareInternational.com

MedCare will be happy to assist you in finding a doctor, organizing medical assistance, answering questions about the health care system, but also in providing other assistance. They will also issue declarations of assumption of costs following an assessment of a claim. This not only ensures a competent choice of doctor for you but also the avoidance of any financial burden.

Outside MedCare's office hours, you can also contact our 24-hour hotline in cases of emergency if you are staying in the NAFTA countries.

When do I have to report an inpatient stay to Care Concept?

Inpatient stays usually involve high costs. In order to keep the risk of cost for you and the company low, inpatient treatment within and outside Austria must be reported to Care Concept immediately by telephone or in written form.

Are vaccinations covered with a Care Austria policy?

No, vaccinations are not covered in the Care Austria plan.

Are there any outpatient or inpatient services for which I have to submit an application for cost coverage to Care Concept before starting treatment?

Yes, in order to avoid unnecessary cost risks for you and the insurer, Care Concept must obtain prior approval/confirmation of cost reimbursement (a treatment guarantee) for the following services in written form before starting treatment (via e-mail, fax or mail):

- Plannable diagnostic examinations, including imaging procedures such as, in particular, magnetic resonance imaging (MRI), computer tomography (CT), positron emission tomography (PET) and computer positron emission tomography (CT-PET),
- oncological treatments (e.g. radiation, chemotherapy),
- palliative medical care,
- partial inpatient treatment/day hospital treatment,
- medically necessary follow-up treatments (rehabilitation measures),

FAQs regarding the claim reimbursement process of the Care Austria plan



- outpatient surgeries,
- medical repatriation in case of injury or death.

Are there any dental services for which I have to submit an application for cost coverage to Care Concept before starting treatment?

Yes, prior approval of cost reimbursement (a treatment guarantee) must be applied for for a medically necessary dental prosthesis, even if the dental prosthesis becomes necessary due to an accident. In this case the dentist must prepare a treatment plan and cost estimate for the planned measures. Please send this document as soon as possible to the following address, quoting your policy number in full:

Care Concept AG
Claims department
P.O. Box 30 02 62
53182 Bonn, Germany

We will check the treatment plan and cost estimate shortly after receiving it and inform you whether or not the calculated costs can be paid in full or in part or if we may need further information or documents from you or the dentist.

We recommend that you submit a treatment plan and cost estimate before starting treatment, even if you are planning to undergo extensive, medically necessary dental treatment.

Are dental cleanings and preventive dental check-ups covered by Care Austria international health insurance?

Yes. A yearly preventive examination as well as an annual tooth cleaning are covered in Care Austria/Care Austria 364.

What is meant by “dental prosthesis”?

Dental prostheses include prosthetic measures such as pivot teeth (pin-fixed crowns), inlays, crowns (also for single-tooth restorations) and orthodontic treatments.

Are preventive medical check-ups covered under the Care Austria plan?

Yes, with a Care Austria policy preventive medical check-ups for the early detection of diseases are insured up to max. EUR 500 per policy year. The following services in particular are included:

- Screening for the early detection of cancerous diseases
- Screening for early detection of cardiovascular diseases, kidney diseases and diabetes
- preventive medical check-ups to ensure the normal physical and mental development of children

Does Care Concept settle the costs with the doctor/hospital directly?

During a stay in Austria, treatment costs incurred can in principle also be settled directly with the doctor or hospital. If the



invoice issuer insists on sending the invoice to you, you can forward it to us for a reimbursement. In this case, please note on the medical invoice if we should transfer the reimbursable benefits to the doctor or, if you have paid in advance, to you.

How does the reimbursement of prescriptions and laboratory invoices work?

Prescriptions and laboratory invoices should always be submitted together with the corresponding medical invoice. If you do not yet have the invoice of the attending physician, we ask you to inform us briefly and send us the invoice as soon as you receive it. Please also note your complete policy number on each individual receipt/document.

What information must medical invoices/prescriptions contain?

Medical invoices and prescriptions should be written in the language of the destination country and calculated in the official currency of that country. In addition, in the case of medical invoices you must include the name of the person being treated, the exact name of the illness and the details of the services provided by the attending physician according to type, place and period of treatment.

When can I expect a reimbursement?

It is our aim to settle any requests for reimbursement submitted by you within 10 days, according to the policy terms and conditions and provided that the claim can be processed without an extensive review process. For more complex claims, a more comprehensive assessment may be necessary, resulting in a longer processing time.

To whom are reimburseable costs paid?

We transfer the reimbursable benefits to your bank account, which we have in the policy documents or which you specified in your request for reimbursement. If you wish, we can also settle accounts directly with the doctor/hospital. In this case we ask you to inform us briefly of your request. Please also then provide us with the **complete bank details** of the attending physician if we are unable to obtain them from the invoice(s) submitted.

Please note that, from our point of view, this is a cross-border payment transaction for which we always require the international bank sort code (BIC/SWIFT code) as well as the international account number or IBAN and the name of both the account holder and the financial institution.

A reimbursement to a credit card account is generally not possible.

Is there a statutory deadline for submitting invoices? Can I also submit invoices when I am back in Germany or my home country?

You can also submit your invoices to us when you are back in your home country.

Submission of invoices is generally only subject to the statute of limitation of three years, calculated from the end of the year in which the claim to benefits could have been asserted.

Should you, however, desire a direct settlement with the doctor/hospital, please note the specified payment deadline and submit the invoice to us in a timely manner. This will enable us to, taking into account a reasonable processing time, make payment of the insured benefit in due time.

What is the contract period and how can the contract/policy be terminated?

The policy is purchased for an indefinite period of time and can be terminated at the end of each policy year with one month's notice. The minimum duration of coverage is one month.

In Care Austria 364 the policy ends upon expiration of the contract period stipulated in the terms and conditions, but at the latest after 364 days.

Notice of termination must be given in writing.

How can the payment be made?

Payment of the first or subsequent premium can be made in Care Austria 364 either via SEPA direct debit, bank transfer or PayPal. In Care Austria (unlimited), payment via SEPA direct debit or bank transfer is possible.

When do I pay the lower premium with a Care Austria Education plan?

The following persons are eligible for insurance coverage under Care Austria Education, provided that these persons have not yet reached the age of 36 (their 36th birthday):

- interns and participants in Working Holiday programs
- persons who can provide proof that they are attending further education/training courses at public or private institutions approved for this purpose or
- persons who can provide proof that they are attending a community college for further education/training measures, insofar as the further education course(s) comprises at least twenty school hours per week or
- persons who are employed as interns or trainees in a corresponding institution or organization and
- persons who accept an au pair job.