Procedure to be followed, rates of reimbursement and special cases.

"Hospitalisation" covers many types of treatments. Applicable legislation defines hospitalisation as a stay in a hospital or clinic for the purpose of:

- undergoing treatment for medical conditions or <u>surgery</u>,
- giving birth,
- rehabilitation or functional re-education following a medical condition or surgical operation resulting in invalidity (not to be confused with convalescence care),
- receiving treatment for psychiatric conditions,
- receiving palliative care.

# Step 1: request prior authorisation

Unless it is an emergency, you need to request <u>prior authorisation</u> **before a hospital stay**:

- of more than 6 months, for the treatment of medical conditions or surgical operations,
- of more than 12 months in a psychiatric hospital,
- for rehabilitation or re-education, for a duration of 2 months +, following hospitalisation or invalidating surgery,
- for plastic surgery,
- in clinics specialising in health screening and diagnosis (general check-up),
- for rehabilitation or re-education that do not follow a hospital stay.

**Provide the medical report** justifying the need for the stay and stating the nature of the care needed by the patient into <u>MyPMO</u> or <u>JSIS online</u>.

Submit the medical report detailing the reason for hospitalization and the proposed treatment method via MyPMO or JSIS online.

If you do not have access to <u>MyPMO</u> or <u>JSIS online</u>, you may send the required documents and the prior authorization request form by mail or drop it in the PMO mailbox.

Please ensure that all original documents are included (retain a copy for your records). Send the complete file to the Settlements Office (the address is indicated on the form).

## Step 2: apply for direct billing

You may request <u>direct billing</u>. This will allow your hospital to send the main invoices to the Settlements Office for direct billing.

The request for direct billing must be made in the 60 days before hospitalisation. In an emergency, direct billing must be requested as soon as possible.

Note: direct billing is not possible for persons with a <u>complementary cover</u> (topup).

### Step 3: get a statement

After your hospital stay, the Settlement Office will issue you a reimbursement statement. You will find it in MyPMO or JSIS online.

If you paid an invoice yourself, you can <u>claim reimbursement</u>. Make sure to provide the **detailed invoice** and a **medical report**.

### **Conditions for reimbursement**

The following are not considered as hospitalisation and do not qualify for any reimbursement:

- stays in an institution without a multidisciplinary medical, technical and logistical infrastructure,
- stays in sheltered housing, supervised or supported accommodation without a medical and/or paramedical infrastructure,
- stays in a hospital or clinic or other type of establishment for fitness or rejuvenation treatment.

However, accompaniment expenses are exceptionally reimbursable at a rate of 85%, up to a maximum of €40 per day, subject to a medical prescription and prior authorization, in the following cases:

- For a family member accompanying, either in the room or within the
  premises of the treatment facility, a beneficiary undergoing a cure before
  their 14<sup>th</sup> birthday, or who, due to the nature of their condition or another
  medically justified necessity, requires special assistance;
- For accommodation expenses of an infant still being breastfed who must accompany their mother during the course of the treatment.

#### Rates of reimbursement

Medical or Surgical Hospitalization:

Reimbursement of 85% of expenses, up to the limit of the **cost of the least expensive private room in the hospital**.

Medical expenses are reimbursed at 100% in the following cases:

- In the event of a recognized serious illness;
- Intensive care lasting at least three consecutive days, even if not directly linked to a serious illness, and this for the entire duration of the intensive care stay;
- Palliative care provided in a hospital facility;
- Extended hospitalizations, for accommodation costs beyond 30 consecutive days, subject to approval by the JSIS medical advisor.

# Agreements with health professionals and fixed prices

The PMO has established <u>agreements with hospitals and other health providers</u> to regulate the maximum fees charged by doctors, surgeons and in some establishments, room prices.

In Luxembourg, the hospital services rates provided in hospitals are defined, hospital by hospital, by the Luxembourg government and the National Health Fund (CNS). To know more about the 2025 hospital services rates: go <u>here</u>.

#### Legislation

- Joint rules
- General implementing provisions (title 3, chapter 4 and 8)
- Opinion of the Medical Council

## See also

- Agreements and conventions
- Request for direct billing
- Additional fees
- MyPMO or JSIS online