

FasiOpen



GREEN
Health Plan
Easy Guide

Easy Guide for clients

A useful tool to make the best use of the **Green Plan**



Dear Client,

With this **Easy Green operational handbook**, your Health Fund aims to provide you with a **simple and intuitive tool** containing all the information you need to avoid obstacles or delays in the normal processing of your refund requests.

In the Easy Green manual you'll find an overview of the refunds available under the **FasiOpen Green Health Plan**, as well as a description of all the additional documents you need to send to the Fund along with your expenses invoice.

This is another important step in ensuring that all processes are as transparent and simple as possible, a fundamental approach that has distinguished the Fund in its growth since 2009.

Please note that, in the interests of brevity, some information will inevitably be omitted from the Easy xxx manual. We therefore remind you to always consider as binding all the introductions, provisions, obligations and instructions contained in the FasiOpen Regulation, the Client Guide and the Basic Nomenclature, all of which can be consulted on the Fund's website.

Thank you for your attention and we hope that you find the manual useful!



“Green” Health Plan Operational Handbook

Covers	Conditions of refund		Documents required to receive refunds
MAJOR SURGICAL OPERATIONS COVER 1	Refund Percentage	100%	Indirect: full copy of the medical record, invoices with details of the services carried out and relevant individual amounts issued by the healthcare facility and the medical-surgical team. Direct: nil.
	Maximum per event	€ 30,000	
	Minimum non-refundable	none	
	Annual ceiling per individual client	€ 90,000	
PRE-HOSPITALISATION (only major surgery 120 days prior to operation) COVER 2	Annual ceiling per individual client	€ 900	Indirect only: invoices with details of the services carried out and relevant individual amounts, request of the specialist specifying the intervention made.
POST-HOSPITALISATION (only major surgery 120 days subsequent to operation) COVER 3	Annual ceiling per individual client	€ 1,000	Indirect only: invoices with details of the services carried out and relevant individual amounts, request of the specialist with diagnosis, copy of medical record.
DIAGNOSTICS ULTRASOUND SCANS (NOT PREGNANCY) COVER 4	Refund Percentage	DIR 30% IND 25%	Indirect: invoice with details of services carried out and relevant individual amounts, prescription with certain diagnosis and reports on tests carried out. Direct: medical prescription with certain diagnosis.
	Annual ceiling	€ 100	
DIAGNOSTICS AND THERAPIES ON PRIVATE BASIS COVER 5	Refund Percentage	60%	Indirect: invoice with details of services carried out and relevant individual amounts, prescription with certain diagnosis and reports on tests carried out. Direct: medical prescription with certain diagnosis.
	Minimum non-refundable	€ 60	
	Annual ceiling per individual client	€ 3,500	
SPECIALIST CONSULTATIONS ON PRIVATE BASIS COVER 6	Refund Percentage	60%	Indirect: invoice with details of services carried out and relevant individual amounts, specialisation qualification of the physician carrying out the consultation. Direct: nil.
	Minimum non-refundable	DIR € 0 IND € 60	
	Maximum per event	€ 55	
	Annual ceiling per individual client	€ 500	

Covers	Conditions of refund		Documents required to receive refunds
CHARGES FOR HEALTHCARE SERVICES COVER 7 FasiOpen does not refund the additional public healthcare charges introduced by law no. 111 of 15.7.2011 regarding contributions towards healthcare costs	Refund Percentage	100%	Indirect: invoice with details of services relating to healthcare charges and medical prescription. Direct: medical prescription.
	Max per prescription	€ 36.15	
	Annual ceiling per individual client	€ 400	
MATERNITY PACKAGE COVER 8	Ultrasounds	Max 3/pregnancy DIR 100% IND Max € 55 /ultrasound	Indirect: invoice with details of services carried out and relevant individual amounts, medical prescription with up-to-date evidence of state of pregnancy. Direct: medical prescription with up-to-date evidence of state of pregnancy.
	Clinical Analyses (alternative to ultrasounds)	DIR 100% IND 80% Max € 60 /pregnancy	Indirect: invoice with details of services carried out and relevant individual amounts, medical prescription with up-to-date evidence of state of pregnancy. Direct: medical prescription with up-to-date evidence of state of pregnancy.
	Childbirth hospitalisation allowance in the S.S.N.	50 per night Max 10 nights	Indirect only: full copy of the medical record.
CARDIOVASCULAR PREVENTION PACKAGE COVER 9	1 package/year according to choice not repeatable before another 2 years have elapsed	DIR 100% IND Max €90	Indirect: invoice with details of services carried out and individual amounts referring only to the services included in the package chosen, confirming that these were carried out in one single solution. Direct: nil.
		Age >45 years	
ONCOLOGICAL PREVENTION PACKAGE COVER 9		DIR 100% IND Max €150 men - Max €200 women	
		Age >45 years	

Covers	Conditions of refund		Documents required to receive refunds
OPHTHALMIC PREVENTION COVER 9	1 package/year according to choice not repeatable before another 2 years have elapsed	Age >40 years DIR Max €180 IND Max €120	Indirect: invoice with details of services carried out and individual amounts referring only to the services included in the package chosen, confirming that these were carried out in one single solution. Direct: nil.
THYROID PREVENTION COVER 9		Age >45 years DIR 100% IND Max €50	
MELANOMA PREVENTION COVER 9		Age >50 years DIR 100% IND Max €70	
DYSMETABOLIC PREVENTION COVER 9		Age >50 years DIR Max €30 IND Max €30	
DENTISTRY COVER 10	Specialist consultation with treatment plan once a year (direct only)	Contribution from client € 0	DIRECT PROVISION CARE only
	Oral hygiene: debridement Max twice a year	DIR charged to Client € 10 IND max refund € 25	Indirect: invoices with details of services carried out and relevant individual amounts, completed unified form or, if applicable, preventive Care Plan and obligations. Direct: nil.
	Fillings of any class	DIR charged to Client € 40 IND max refund € 10	Indirect: invoices with details of services carried out and relevant individual amounts, completed unified form or, if applicable, preventive Care Plan and obligations. Direct: nil.
	Annual refund ceiling dentistry	€ 600	Direct: nil.
DAILY ALLOWANCE IN LIEU FOR HOSPITALISATIONS FOLLOWING MAJOR SURGICAL OPERATIONS WITH OVERNIGHT STAY COVER 11	Refund Percentage	Max 80 nights/year € 50 first 15 nights € 80 16th-80th night (Major Surgery)	Indirect only: full copy of the medical record.
NEWBORN PROTECTION COVER 12	Annual ceiling	€ 5,000	Indirect: full copy of medical record, invoices with details of services carried out and relevant individual amounts. Direct: nil.

Covers	Conditions of refund		Documents required to receive refunds
TRANSPORTATION BY AMBULANCE COVER 13	Refund Percentage	100%	Indirect only: invoice or receipt issued by the ambulance service with evidence of medical certification with clinical picture, details of transport with date and place of departure and arrival.
	Minimum non-refundable	€ 50	
	Annual ceiling per individual client	€ 1,500	



Please note that these must be submitted within and no later than 3 months after the issue date of the balance expenditure documents for which the refund is requested.





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