

**Medical Insurance Services and Medical Claim Administration Services
for ECB Staff
(2011/S 108-176751)**

Question and Answers

Posted: 17.06.2011

Q1:

What is the total of reimbursement costs incurred during the last 4 years?

A1:

2007	EUR 7,167,595
2008	EUR 7,977,926
2009	EUR 8,405,793
2010	EUR 8,665,832

Q2:

What should the cover for the insured persons be like? (e.g. 100% for in-patient benefits, 100% for one-bedded room, 80% dental benefits,...)

A2:

A detailed benefits catalogue will be included in the invitation to tender documentation, which will be sent to short-listed applicants only (for information on the tender process please see page 3 of the Call for Applications).

In order to provide you with some understanding on the level of coverage, please see the simplified summary list below:

Doctor Visits and Home Calls	Reimbursed at the rate of 85% with certain maximum limits applicable for general practitioners and homeopaths, specialists and leading specialists
Out-patient surgical operations and day cases	Reimbursed at the rate of 100% with maximum reimbursement amounts for different categories
Plastic surgery	For medical reasons only: subject to prior authorisation
In hospital surgical operations and medical treatments	Reimbursed at the rate of 100% for semi-private room
Serious illness	Reimbursed at the rate of 100% and different limits of reimbursement apply
early detection screening tests	Reimbursed at the rate of 100%
Pharmaceutical Products	85% reimbursement if prescribed by medically qualified physician or homeopath, covered are pharmaceutical, homeopathic and phytotherapeutic medication
Dental Treatment, dental prostheses and orthodontic treatment	Reimbursed at rate of 80% global limit for dental expenses of EUR 7,670 per consecutive period of 24 months orthodontic and periodontal treatments are subject to prior authorisation no per item limits
Radiology, analyses, laboratory tests and other forms of	Reimbursement at the rate of 85% for initial tests incl. administration cost

diagnosis	
Confinements	100% for qualified physician and midwife and anaesthesia in case of routine confinement, labour room and physiotherapist with maximum limit of EUR 915 applicable
Fertility treatment	85% with ceiling with certain limits and pre-qualification criteria applicable limited to 5 trials per full-term pregnancy
Physiotherapy, kinesitherapy and similar treatments	Reimbursed at rate of 80% with maximum number of sessions and maximum limit for cost per session applicable
Treatment by medical auxiliaries and nursing	Reimbursed at rate of 80% with maximum limits applicable, if prescribed by medically qualified person and provided by a person legally authorised to exercise the profession of a medical auxiliary
Cures	Reimbursed at rate of 80% with limits on duration and daily cost applicable. Qualifying Reasons: cure for children, convalescence, serious illness and chronic condition only
Prostheses and medical appliances on medical prescription	Reimbursement at 85%
Transport costs and travelling expenses	Reimbursed at rate of 80% for: <ul style="list-style-type: none"> - ambulance transport in case of emergency - cost of transporting due to medical reasons or urgency or exceptional circumstances after prior approval
Funeral expenses	Lump sum paid to legal heirs
Therapeutic treatments	Number of sessions and maximum amount charged per session limited, for example: <ul style="list-style-type: none"> - Laser therapy: max 20 sessions - Ultraviolet radiation : max 40 sessions - Chiropractic: max 24 sessions - Osteopathy: max 20 sessions - Psychotherapy: reimbursed at EUR 75 per session; maximum number of 60 sessions per calendar year

Q3:
Is it possible to get an age profile of the insured persons?

A3:

The below table provides you with the number of insured persons in the relevant age range as of December 2010:

Age Range	12/2010
0-20	1412
21-30	288
31-40	979
41-50	950
51-60	280
61-65	53
66-70	23
71-75	9
76-80	0
81-85	0
86-90	1
91-up	0

Q4:
In which countries do the insured persons stay? Please provide the percentage for each country.

A4:

According to the ECB's Conditions of Employment the place of work is Frankfurt/Main, unless stated otherwise. Thus, the majority of insured members live in the Rhine-Main area. 92% of expenses reimbursed under the ECB's Medical Benefits and Dental Plan in 2010 were incurred in Germany. However, family members or pensioners might choose to remain in or return to their home country for permanent residence. There are currently 21 retired staff members.

The ECB has a representative office at the International Monetary Fund in Washington, US. Currently, 14 insured members reside in the US. The share of medical costs incurred in the US is around 0.3%.

For staff members who leave the ECB, but require individual health insurance, the permanent place of residence might be outside of Germany.

Q5:

How long do they stay abroad / in Germany?

A5:

As mentioned above, the majority of insured members reside in Germany. In addition, there is a significant worldwide business travel activity, a number of mobility initiatives with other European national banks or international organisations and missions abroad. Members of staff also use medical service providers located in their European home countries due to language reasons or a general feeling of trust and comfort with their national health systems.

Q6:

What is the professional status of the insured persons, for example are they civil servants?

A6:

The members of staff are employees of the European Central Bank (ECB). Employment relations between the ECB and its members of staff are governed by employment contracts issued in conjunction with these Conditions of Employment. The Staff Rules adopted by the Executive Board further specify the application of these Conditions of Employment.

Pursuant to Article 36 of the ESCB Statute, the conditions of employment of the members of the Executive Board and the employees of the ECB shall not be subject to either the substantive or the procedural labour and social welfare law of the Federal Republic of Germany.

Please refer to the relevant parts of the ECB website for further information:
<http://www.ecb.europa.eu/ecb/legal/1008/1024/html/index.en.html> and the ECB's headquarters' agreement

http://www.ecb.europa.eu/ecb/legal/pdf/en_headquarters_agreement_final.pdf

Q7:

What is the ECB Medical Plan and what is covered in this plan?

A7:

It's a comprehensive worldwide group health insurance available to ECB staff members, pensioners, trainees and dependent family members on a medical history disregarded basis.

Please refer to chapter 1 of the Call for Applications for more background information and the above mentioned summary list of benefits.

Q8:

Does the insurer have to provide cover for the ECB Medical Plan or for additional cover to the Medical Plan?

A8:

The current tender seeks an insurer for the ECB's Medical Benefits and Dental Plan. The scope of the contracts is explained on page 3 of the Call for Applications. Neither the group insurances nor the individual health insurance mentioned are complementary or supplementary cover to the ECB's Medical Benefits and Dental Plan.

However, the insurance companies awarded the tender are free to offer at their own initiative a complementary health insurance package to the ECB's members of staff on the basis of individual contracts between the insured persons and the insurance company.

Q9:
Which nationalities are the insured persons of?

A9:
Please find below the current nationality split of active ECB staff:

