



99134046017000 Reimbursement of costs Authorization

Heruntergeladen am 04.06.2025 https://fimportal.de/xzufi-services/103574916/B100019

Modul	Sachverhalt
Leistungsschlüssel	99134046017000
Leistungsbezeichnung I	Reimbursement of costs Authorization
Leistungsbezeichnung II	Apply for reimbursement from the statutory health insurance fund
Typisierung	1 - Bund: Regelung und Vollzug
Quellredaktion	Bund
Freigabestatus Katalog	fachlich freigegeben (gold)
Freigabestatus Bibliothek	unbestimmter Freigabestatus
Begriffe im Kontext	
Leistungstyp	Leistungsobjekt mit Verrichtung
Leistungsgruppierung	
Verrichtungskennung	Bewilligung (17)
SDG-Informationsbereich	Haftungs- und Pflichtversicherungsbestimmungen im Zusammenhang mit der Niederlassung oder Beschäftigung in einem anderen Mitgliedstaat
Lagen Portalverbund	Gesundheitsvorsorge (1130100), Krankheit (1130200)





Modul	Sachverhalt
Einheitlicher Ansprechpartner	Nein
Fachlich freigegeben am	24.04.2025
Fachlich freigegen durch	Federal Ministry of Health
Handlungsgrundlage	https://www.gesetze-im-internet.de/sgb_5/13.html https://www.gesetze-im-internet.de/kvlg_1989/8.html
Teaser	You can have the costs of private treatment reimbursed by your statutory health insurance fund under certain conditions.
Volltext	If you have statutory health insurance, you can receive necessary treatments and therapies without having to pay in advance, for example by presenting your electronic health card (eGK) at the doctor's surgery or hospital. This is the principle of benefits in kind. Alternatively, you can have yourself treated privately and pay the bill for the treatment yourself first. This is called the reimbursement principle. Under certain conditions, you can apply for reimbursement from your health insurance fund if you have informed them of your decision to undergo private treatment before starting treatment. You can choose to have your costs reimbursed for the following services: • outpatient medical care, • inpatient care, for example in a hospital, • medically prescribed services such as home nursing care, physiotherapy, patient transportation or aids such as wheelchairs.
	least one calendar quarter for the respective service area.
Erforderliche Unterlagen	 Invoice for the treatment or medical service Proof of payment Your health insurance company may require further





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	proof, for example a doctor's prescription, if this is necessary for the respective service. Please contact your health insurance company for more information.
Voraussetzungen	 You have informed your health insurance company in advance of your decision to have your costs reimbursed. You are taking advantage of services that are medically necessary and are included in the so-called service catalog of the statutory health insurance. The service provider, for example your treating doctor, has a health insurance license. This means that, in principle, he or she could also bill via the electronic health card. Otherwise, you will need the approval of your health insurance provider.
Kosten	Your health insurance company can only reimburse the costs up to the maximum amount that would have been incurred according to the principle of benefits in kind, i.e. as with billing via the electronic health card. This means that you may incur additional costs. As a rule, your health insurance company will charge you for part of the processing costs. A maximum of 5 percent of the reimbursement amount is permitted by law.
Verfahrensablauf	 Please contact your health insurance company for information on the exact procedure for reimbursement. As a rule, the procedure is as follows: Inform your health insurance company of your decision to have your costs reimbursed before treatment begins. You can usually do this by telephone, e-mail or online on the portal of the respective health insurance company. You will initially pay the bill yourself after the treatment. You can submit the application for reimbursement by post or - with many statutory health insurance company and submit it to the health insurance company and submit it to the health insurance company and submit it to the health insurance company together with the necessary documents and your bank details.





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	• The health insurance company will check your application and pay you the reimbursable amount if all requirements are met.
Bearbeitungsdauer	Processing normally takes around 2 to 5 working days. In order for your application to be processed and a decision made quickly, your health insurance company must have all the necessary information and any required documents in a complete and meaningful form. The health insurance company decides on applications promptly, whereby the statutory processing period is adhered to in order to protect patients' rights. Please note that the processing time stated is an average value for all health insurance companies. It may vary in individual cases. The exact processing time also depends on the complexity of the individual case and may be longer. The same applies if documents or records are sent to you or your health insurance company by post.
Frist	You must inform your health insurance company of your decision to reimburse the costs before you start treatment or make use of the medical service.
weiterführende Informationen	https://www.bundesgesundheitsministerium.de/servic e/begriffe-von-a-z/k/kostenerstattung-in-der-gkv.html
Hinweise	There are no indications or special features.
Rechtsbehelf	 Objection Action before the social court
Kurztext	 People with statutory health insurance can initially pay for treatments and other medical services themselves and have the costs reimbursed by their health insurance company Health insurance company must be informed before treatment begins
Ansprechpunkt	
Zuständige Stelle	
Formulare	
Ursprungsportal	Kostenerstattung Bewilligung, Reimbursement of costs Authorization