

Choose a MEP complementary health insurance

5 levels of coverage to meet different needs

Starting date not earlier than 01 September 2016, ends 31 August 2017

	National Health reimbursement level 08 April 2016	MONTHLY COST 5€ - i.e. 60€/YEAR - Basick	MONTHLY COST 11€ - i.e. 132€/YEAR - Déclick	MONTHLY COST 22€ - i.e. 272€/YEAR - Pratick	MONTHLY COST 29€ - i.e. 352€/YEAR - Dynamick	MONTHLY COST 41€ - i.e. 492€/YEAR - Stratégick
Hospitalisation						
Surgical, medical	80 to 100%	100%	100%	100%	100%	100%
Maternity	80 to 100%	100%	100%	100%	100%	100%
Transport	65%	100%	100%	100%	100%	100%
Daily hospital charge unlimited duration ⁽¹⁾		Current charge	Current charge	Current charge	Current charge	Current charge
Insured person's contribution 18€ ^(2a)		YES	YES	YES	YES	YES
Procedures and care following an accident ⁽³⁾		500%	500%	500%	500%	500%

Standard care

Vaccines and boosters reimbursed or not by the French National Health	0 to 65%	100%	100%	100%	100%	100%
General Practitioner or specialist or direct access ⁽⁴⁾ signatory of CAS ⁽⁵⁾ and within coordinated healthcare	70%		100%	100%	100%	130%
General Practitioner or specialist or direct access ⁽⁴⁾ NON signatory of CAS ⁽⁵⁾ and within coordinated healthcare	70%		100%	100%	100%	110%
General Practitioner or specialist or direct access ⁽⁴⁾ Outside coordinated healthcare*	30%			30% + 30%	30% + 30%	30% + 30%
Surgery without hospitalisation. Practitioner signatory of CAS ⁽⁵⁾	70%		100%	100%	100%	130%
Surgery without hospitalisation. Practitioner NON signatory CAS ⁽⁵⁾	70%		100%	100%	100%	110%
Pharmacy blue price labels	30%		100%	100%	100%	100%
Pharmacy white price labels	65%		100%	100%	100%	100%

Other care

Insured person's contribution 18€ ^(2b)				YES	YES	YES
Radiology within coordinated healthcare	70%			100%	100%	100%
Laboratory analyses	60%			100%	100%	100%
Optical	60%			100%	100%	100%
Dental care, dental prosthesis	70%			100%	100%	100%
Radiology outside coordinated healthcare*	30%			30% + 30%	30% + 30%	30% + 30%
Paramedical care (Physiotherapists, Nurses, Midwives, Speech therapists, Orthoptists)	60%			100%	100%	100%
Spa treatments	65 to 70%			100%	100%	100%
Prostheses - Braces	60%			100%	100%	100%

Additional packages⁽⁶⁾

Teeth descaling per annum		1	1	1	1	1
Quit smoking package	50€ + ...	50 + 40 = 90€	50 + 60 = 110€	50 + 80 = 130€	50 + 120 = 170€	50 + 240 = 290€
Male condoms package		16€	20€	24€	28€	36€
Teeth whitening				15€	20€	30€
Psychological / Sophrology ⁽⁷⁾ care package				12€/consultation	16€/consultation	20€/consultation
Acupuncture ⁽⁸⁾ package				12€/session	16€/session	24€/session
Osteopathy ⁽⁹⁾ package				12€/session	16€/session	24€/session
Nutrition ⁽¹⁰⁾ package				20€/consultation	30€/consultation	40€/consultation
Emergency contraception package				10€	12€	20€
Non reimbursable contraception package (pill, patch, ring)				20€	60€	70€
Optical package – simple lenses ⁽¹¹⁾				50€	90€	180€
Optical package – complex or very complex lenses ⁽¹¹⁾				200€	260€	370€
Contact lenses package ⁽¹²⁾				40€	50€	70€
Orthopaedic insoles package				24€	32€	40€
Dental prosthesis package ⁽¹³⁾					Not more than 150€	Not more than 250€
Taxi costs package ⁽¹⁴⁾					5€/journey	5€/journey
Hearing aid package					200€	200€
Birth package ⁽¹⁵⁾					200€	250€

Solidarity : Mutual support fund

« T'as Tout » included pack : • Third party insurance • Internship insurance	YES	YES	YES	YES	YES
• Assistance worldwide • personal accident • advantages and services	YES	YES	YES	YES	YES

(1) Except for medico-social facilities. Psychiatry, neuropsychiatry, special needs education centre and specialist care limited to 12 days per person and per year for Basick and Declick coverage.

(2) For procedures 100% reimbursed by the French National Health, having a coefficient over 60, or a price over 120 Euros, an excess fixed fee of 18 Euros applies. (a) In the context of hospitalisation. (b) Without hospitalisation.

(3) See terms of application in the mutual benefit society regulations.

(4) To be in the coordinated healthcare pathway you must have declared your personal GP. For psychiatry and neuropsychiatry treatment, this is limited to 12 consultations per person and per year with Declick coverage.

(5) CAS: (Contrat d'Accès aux Soins) Care Access Contract as defined by the French National Health Insurance.

(6) Limited to not more than the actual costs and the consumption of packages which are fractionable in any one year. Invoices and prescriptions must be presented. If the MEP is not your National Health insurer, you must append a statement of National Health Insurance benefits received in addition to the abovementioned documents.

(7) Package limited to 5 consultations with a psychiatrist non reimbursable by the French National Health Insurance or a clinical psychologist or a sophrologist.

(8) Package limited to 3 sessions.

(9) Package limited to 2 sessions with an osteopath, chiropractor, or an aetiopath.

(10) Package limited to 2 consultations with a nutritionist or dietician.

(11) One device is defined as one frame and two lenses. Packages are limited to one device every two years except in case of change of correction or for minors. The cost of the frame is limited to 150€ per device. Please refer to the mutual benefit society regulations for the definition of simple, complex and very complex lenses. For a device composed of one simple lens and one complex or very complex lens, the package is calculated as follows: sum of the two packages divided by two.

(12) Contact lenses reimbursed or not by the French National Health Insurance.

(13) Dental prostheses reimbursed or not by the French National Health Insurance. Package limited to 120€ for the first tooth for Dynamick coverage. Package limited to 150€ for the first tooth for Stratégick coverage.

(14) Not more than 3 journeys, i.e. 15€.

(15) In order to receive the birth package, the insured person must prove at least 10 months' adhesion to one of the MEP health coverage schemes, one allowance per child.

* Outside coordinated healthcare pathway, the 40% reimbursement is limited to 10 Euros per procedure (from 08 April 2016).

All our reimbursements include the National Health Insurance reimbursement and are based on National Health Insurance reimbursement rates and reimbursement basis in force on 08 April 2016. Any changes in the services and reimbursement rates of the Health Insurance can in no way be considered to be the responsibility of the MEP.