Application instructions

Foyer Global Health Journey

You can start your application for Foyer Global Health's international health insurance via the link below:

[Start the online application with Foyer Global Health]

(hold down Ctrl and click the link to open it)

Tips for submitting the application

Take your time and complete the application carefully. A number of choices have to be made separately for each insured person. This applies, among other things, to the chosen level of cover and to the choice between medical questionnaire and moratorium.

The information about previous health insurance policies and about the family doctor also has to be entered correctly for each insured person.

Tip: the application works best on a laptop or desktop computer rather than on a phone or tablet.

1. Start the application: destination and start date

When you open the application, you are first asked for:

Country of destination - Select the country you are travelling to or going to live in.

Policy effective date - Enter the date on which you want the insurance to start. Check this date carefully. This is the date on which, according to the application, the insurance is to take effect.

Stay longer than 9 months - Next, indicate whether you intend to stay abroad for more than 9 months. Choose:

- Yes if you expect to stay abroad for longer than 9 months;
- No if this is not the case (in that case you apply for the Short Term insurance).

Check these details before moving on to the next step.

2. Enter the details of the first insured person

You are then asked for the details of the insured person. For each person, enter details including:

- title;
- first name;
- surname;
- date of birth.

Check the details carefully. The name and date of birth must match the insured person's official documents.

If you want to insure several people, the other people are added to the application later on.

3. Choose the desired Plan Level for each insured person

After the personal details you reach Plan level. The insurance plans are shown here:

- Basic;
- Extensive;
- Advanced;
- Premium.

For each plan, the cover and the maximum benefits that apply are shown. Review the differences between the plans carefully before making a choice.

Important: the choice of cover can differ per insured person

When several people are insured, not everyone has to have the same plan. So you could, for example, choose:

- insured person 1: Basic;
- insured person 2: Extensive;
- insured person 3: Advanced.

Choose the appropriate cover for each person and click Select next to the plan..

4. Check the insured persons and add people if necessary

On the right-hand side of the screen you will see an overview of the people currently included in the application. Check the following here:

- the name of each insured person;
- the chosen plan;
- the premium per insured person.

Would you like to add another person? Then use Add an Insured.

When you add several people, always check the following for each person:

- the personal details;
- the chosen plan;
- the premium;
- the further choices made for this person later in the application.

Do not assume that all choices automatically have to be the same for every insured person.

5. Check any additional cover options

Additional options may be available under the various plans, such as:

- Coverage US;
- outpatient deductible;
- copay.

Check for each insured person which options apply and what effect they have on the premium and the cover. Here too: look at the choice made for each insured person individually.

6. Go to Subscribe

Once the desired insured persons, plans and additional options have been selected, you continue via the button at the bottom of the page, Next Step – Subscribe.

From this section onwards, the application is completed further and additional details about the insured persons are requested. From this point on, it is important to keep checking the details separately for each insured person.

7. Enter previous health insurance policies and periods of cover

One of the most important parts of the rest of the application is the information about previous health insurance policies. This must be completed carefully for each insured person. State, as far as requested:

- the name of the previous insurer;
- the period of cover;
- the exact start date;
- the exact end date;
- any consecutive policies;
- any periods during which the person was not insured.

Check the exact periods of cover in particular

It is important to state not only the name of a previous insurer, but also when the person concerned was insured there. Have you had several previous health insurance policies? Then state all relevant periods. To do so, check for example:

- old policy schedules;
- insurance certificates;
- statements from the previous insurer;
- termination letters.

Preferably use the exact dates from the insurance documents rather than estimated dates.

Watch out for consecutive policies

Also check whether the various policies actually run on from one another. For example:

- policy A: 01-01-2022 up to and including 31-12-2023;
- policy B: 01-01-2024 up to the present.

Are there periods between two policies during which someone was not insured? State this correctly. The insurance history can be important for the assessment of the application and for how existing or previous medical conditions are dealt with.

8. State the Family Doctor

As part of the details about the insured person, you are also asked about the Family Doctor. State here, for each insured person:

- the name of the family doctor;

- the address of the family doctor.

Make sure you state the right doctor for the right insured person. Where several family members have the same family doctor, the same name and address can of course be used. If family members have different doctors, enter the correct details for each person.

9. Choose between Medical Questionnaire and Moratorium for each insured person

An important next choice concerns medical acceptance. This choice has to be made separately for each insured person. It is therefore possible to make different choices within one family. For example:

- insured person 1: Medical Questionnaire;
- insured person 2: Moratorium.

The choice made for one insured person therefore does not automatically determine the choice for another insured person.

Medical Questionnaire

With a Medical Questionnaire, you are asked about the medical history of the insured person concerned over the past 5 years. Answer these questions fully and truthfully. Consider, among other things:

- previous diagnoses;
- operations;
- hospital admissions;
- chronic conditions;
- recurring complaints;
- medication;
- examinations;
- treatments;
- specialist care;
- ongoing treatments;
- planned examinations or treatments.

On the basis of the medical information, the insurer can assess the insured person concerned individually. Depending on that assessment, conditions, exclusions or other acceptance terms may apply.

When can a Medical Questionnaire be worth considering?

This choice can be worth considering if you want an insured person's medical situation to be assessed individually in advance. This gives more clarity and certainty about the cover throughout the term of the insurance.

Moratorium

With a moratorium, the medical assessment takes place in a different way than with a Medical Questionnaire. The advantage can be that you do not have to complete an extensive medical questionnaire in advance and that cover is provided for everything that is unrelated to pre-existing conditions.

On the other hand, existing or previous medical conditions that occurred in the past 5 years are not automatically fully covered from day one.

Under Foyer Global Health's current terms and conditions, a waiting period applies to certain pre-existing conditions. Under the terms and conditions, cover may arise after two years if no symptoms or treatment for the condition concerned have occurred during that period. If complaints or treatment occur again during the waiting period, a new waiting period may start to apply for that condition. Please read the Special Conditions on our website carefully, where this aspect is discussed in detail.

Important

So do not automatically choose a moratorium because it seems simpler. For each insured person, look at:

- the medical history;
- previous conditions;
- previous treatments;
- the current health situation;
- the previous insurance history.

10. Submit the application

Once all details have been checked, the application can be submitted. After submitting, keep:

- the confirmation of the application;
- any application or reference number;
- any documents that were uploaded.

If Foyer Global Health asks for additional information, please provide it in good time.

The key points to keep in mind

1 The cover can differ per insured person
Within a single application, each insured person can choose their own Plan Level, depending on the options available.

2 Medical Questionnaire or Moratorium can differ per insured person
This is a personal choice for each insured person. It is therefore not necessary for everyone within one family to have the same method of medical acceptance.

3 Take previous health insurance policies seriously
State the full relevant insurance history for each person, including exact start and end dates.

4 State the Family Doctor correctly
Provide the name and address of the family doctor for each insured person.

5 Complete medical information fully and truthfully
With a Medical Questionnaire it is important that the medical history is stated fully and correctly.

6 Check everything per person

The application can include several insured persons. So always check that the cover, insurance history, family doctor and medical acceptance belong to the right person.

Finally

Allow enough time to complete the application. The combination of the chosen cover, previous health insurance policies, the family doctor and the choice between Medical Questionnaire and Moratorium deserves particular attention.

The most important rule is:

Assess each insured person individually.

After all, the right choice for one person need not be the right choice for another insured person.

If you are in any doubt about the medical situation, previous periods of cover or the choice between Medical Questionnaire and Moratorium, it is advisable to contact JoHo Insurances at contact@johoinsurances.org.

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