

When does your self-insurance end?

Your self-insurance ends

- on the day before compulsory health insurance begins (for example through a job that provides full insurance, through unemployment benefits, or through military or civil service);
- at the end of the calendar month if you give up your residence in Austria and/or in the EU, EEC or Switzerland;
- in the event of co-insurance, at the end of the calendar month in which you declare your cancellation in writing.

Your self-insurance ends after a minimum period of six months (as of the end of the calendar month) if:

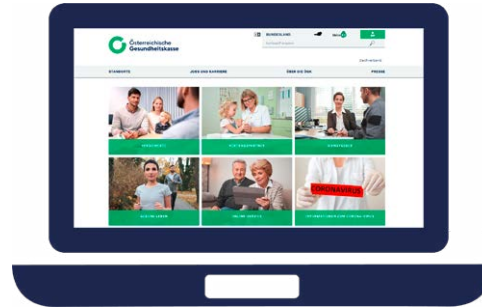
- cancellation is declared without cause, or
- after the end of the second calendar month if contributions are not paid for two months.

Contributions must be paid for a minimum of six months.

You cannot submit a new request for six months after cancelling your self-insurance.

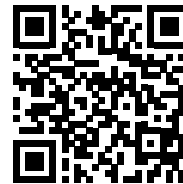
What else is important?

Please inform us about any changes, such as the start of compulsory insurance and/or co-insurance or a change in your residential address.



Contact and more information

Do you have any questions? We will be happy to advise you. You can find your regional contact persons at www.gesundheitskasse.at.



Here you will also find details and the application for self-insurance coverage for health insurance.

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Self-insurance coverage for health insurance



What are the requirements?

You can obtain self-insurance coverage for health insurance if:

- you do not have your own health insurance or co-insurance and
- your place of residence is in Austria, an EU and/or EEC country, or Switzerland.



You do not qualify for self-insurance coverage for health insurance if:

- you were previously covered by compulsory insurance under the Trade Social Insurance Act (GSVG) and/or the Farmers' Social Insurance Act (BSVG),
- you had health insurance through a pension institution created by a statutory professional association, or
- you are eligible for statutory health insurance in an EU and/or EEC state or in Switzerland.

What does self-insurance provide?

Your self-insurance gives you comprehensive health insurance coverage. This covers the costs for medical appointments, hospital stays, medication, medical aids, and much more.

You are entitled to these in-kind benefits starting on the first day if you can provide proof of:

- at least six uninterrupted weeks of statutory health insurance immediately preceding self-insurance or
- at least 26 weeks of statutory health

insurance within the last twelve months before the start of self-insurance.

If you do not have this earlier insurance, there is a waiting period of six months before you can receive benefits.

This self-insurance entitles you and your co-insured dependents to all of the same in-kind benefits that compulsory insurance provides.

Financial benefits, such as sick pay or a maternity allowance, are not provided.

When does your self-insurance begin?

Your self-insurance will begin immediately following your cancelled health insurance or co-insurance coverage if your request is received by Österreichische Gesundheitskasse (the Austrian health insurer, ÖGK) within six weeks. Otherwise, it will begin on the day after your request is received.

How much does the self-insurance cost?

The maximum monthly contribution for voluntary health insurance is **495.58 euros** (as of 2024).



A reduction is possible depending on your economic circumstances.

Where can you submit your request?

Please submit your request for self-insurance coverage for health insurance in writing to the Österreichische Gesundheitskasse – in the federal state where you live.



Which documents do you need?

In order to process your request quickly, we will also need:

- a copy of your address registration form,
- a copy of your passport or government ID (for foreign citizens) and/or residence title for citizens of third countries.
- If you were previously co-insured by another carrier: confirmation from the health insurance carrier.
- If you were previously insured in the EU and/or EEC or Switzerland: confirmation from the insurance carrier.
- After a divorce: the divorce decree with a legally valid stamp and/or a copy of the divorce settlement.

For a contribution reduction request, we will need all documents relating to your income situation and/or that of your spouse/registered partner (for example income statements, savings).

Self-insured persons who are entitled to welfare assistance are not eligible for a contribution reduction.