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Self-insurance coverage for health insurance

Self-insurance from ÖGK — protection when you need it!

Our range of services:
- Medical treatment
- Dental treatment/dentures
- Preventative care
- Mother-and-child pass examinations
- Preventative services such as flu shots

We cover the costs of:
- Medical appointments (general practitioner, medical specialist, dentist) – simply present your e-card during the consultation..
- Hospital stays, medications
- Medical aids such as bandages, hearing aids, wheelchairs, and other devices

Note: Financial benefits such as sick pay or a maternity allowance are not included in the scope of insurance.

What are the requirements?

- You cannot be subject to statutory health insurance in Austria or in another EU and/or EEC state or Switzerland, and your main place of residence must be in Austria. Within the scope of the EU (EEC) directives, voluntary health insurance is also an option under certain conditions if you live in a member state.
- You can no longer entitled to benefits as a dependent in Austria or in another EU and/or EEC state or Switzerland, and your primary residence must be in Austria. Under the EU (EEC) directives, voluntary health insurance is also an option under certain conditions if you live in a member state.
- You must work on a freelance basis as a notary, attorney, chartered public accountant, architect, pharmacist, veterinarian, or civil engineer, and will use the self-insurance coverage for health insurance because of the "opt-out" option. Opting out = ability to choose between social insurance carriers (Österreichische Gesundheitskasse - ÖGK or Sozialversicherungsanstalt der Selbständigen [social insurance institution for self-employed persons] - SVS) or a private insurer.

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When do you not qualify for this self-insurance?

Self-insurance coverage for health insurance is not possible if:
- you were previously covered by compulsory insurance under the Trade Social Insurance Act (GSVG),
- you had compulsory coverage under the Farmers' Social Insurance Act (BSVG), or
- you had health insurance through a pension institution created by a statutory professional association to provide compulsory insurance.

If one of these points applies to you, you cannot take out self-insurance coverage for health insurance until 60 months have lapsed after you leave one of the above insurance plans.

Where can you submit your request for self-insurance?

Please submit your request for self-insurance in writing to ÖGK (the Austrian health insurer) — in the federal state where you live.

When does your self-insurance begin?

- If you submit your request for self-insurance coverage for health insurance within six weeks after the end of the statutory health insurance or the end of your entitlement to benefits as a dependent in Austria or another EU/EEC state or Switzerland, your self-insurance begins on the day after the end of this insurance.
- If you submit your request for self-insurance coverage for health insurance more than six weeks after the end of a statutory health insurance plan or an entitlement to benefits as a dependent in Austria or another EU/EEC state or Switzerland, your self-insurance begins on the day after the request is submitted.

When are you entitled to receive benefits?

You are fundamentally entitled to receive in-kind benefits starting on the first day if you can provide proof of:
- at least six uninterrupted weeks of statutory health insurance and/or an entitlement to benefits as a dependent immediately preceding self-insurance or
- at least 26 weeks of statutory health insurance and/or an entitlement to benefits as a dependent 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.

Please note: Financial benefits, such as sick pay or a maternity allowance, are not provided through the insurance.

How much is your contribution?

The monthly contribution for self-insurance coverage for health insurance is 565.25 euros (as of 2026).

Depending on your economic circumstances, you have the option of requesting a contribution reduction. The application form for reducing the contribution base, as well as any necessary support declarations, can be obtained from any ÖGK customer service office. These forms are also available on our website, www.gesundheitskasse.at.

Please include the following documents with your request:
- Your last three salary/wage statements or
- proof of your income situation (for example savings statements or maintenance claims) or
- your last income tax assessment and/or
- your pension/retirement benefit receipt.
- If you are married or in a registered partnership, please provide current proof of income for your spouse or partner.

Note: If you are supported by other people (for example your parents), please provide a declaration of support. In order to receive a contribution reduction, you must submit all of the necessary documentation. Retroactively requested contribution reductions will not take effect until the first of the month following the request.

When are your contributions due?

Please pay your contributions in advance – they are due on the first of each calendar month.

Advantages of the direct debiting option:
- Your contributions will be paid automatically on the selected date.
- Contribution changes can be taken into consideration automatically.
- Any credits (for example a chargeback) are taken into consideration.
- Your contribution account is always balanced

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When does your self-insurance end?

a) The self-insurance ends the day before compulsory health insurance takes effect. This is the case, for example, if you:
   - take a job that is subject to compulsory insurance,
   - perform a self-employed activity subject to compulsory insurance.
   - receive a payment from the Employment Service,
   - receive a childcare allowance, or
   - receive a statutory pension.

b) The self-insurance ends at the end of the calendar month in which you declare your cancellation in writing/by email if:
   - you have health insurance coverage as a dependent (for example through marriage or registered partnership) under the General Social Insurance Act (ASVG) or another Austrian law.

c) At least six consecutive calendar months after the start of self-insurance, the self-insurance ends as follows:
   - if you declare your cancellation in writing/by email: on the last of the month following the cancellation notice, or
   - if contributions are outstanding in your contribution account for two calendar months: at the end of the second calendar month for which contributions were not paid.

In both of these cases, you cannot submit a new request for self-insurance until another six calendar months have passed.

What else is important?

Please inform us within one week about any of the following changes:
- If you are starting a job or self-employed activity that will provide you with health insurance.
- If you are covered as a dependent (eligible for benefits).
- If your residential address changes.

Are your dependents also insured?

In most cases, your dependents are insured free of charge. Simply request that they be co-insured.

Dependents are:
- your spouse [1],
- your registered partner[1],
- your children (includes any children in or out of wedlock, adopted children, stepchildren[2] and foster children[2] under the age of 18).

If the corresponding conditions are fulfilled (such as school attendance or completed university studies), your child can be co-insured free of charge up though the age of 27 if you request an extension.

[1] Spouses and/or registered partners are co-insured free of charge only under certain conditions.
[2] For stepchildren and foster children, additional conditions apply in addition to a shared household.

Your self-insurance request:

You can access the request form here and in your regional ÖGK customer service office.

Do you have any other questions? Find your regional contact partners here.