

# Medical underwriting

## Term life insurance



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# This document tells you what to expect

## **You are the insured person on a term life insurance policy.**

- A term life insurance pays out in the event of your death during the term of the insurance.

## **That is why we want to know more about your health and lifestyle.**

- To begin, you need to complete an online health questionnaire.
- Sometimes we request additional medical information. Or ask that you go to a medical examination or have a medical test.

## **Our Medical Department assesses your medical information.**

- And advises Centraal Beheer whether you can be insured.

## **In this document we tell you all about the medical underwriting for our term life insurance.**

We explain the process step by step.

## **You need to complete an online health questionnaire.**

You will find the questionnaire on our website: [centraalbeheer.nl/gezondheidsverklaring](https://centraalbeheer.nl/gezondheidsverklaring).

## **You will receive log-in details to start and complete the online health questionnaire.**

We will send you 2 text messages containing the log-in details. You can use these details to start, complete and send us the health questionnaire.

## **The questionnaire is a list with questions about your health and lifestyle.**

- The questions are often about symptoms, signs, disorders or diseases. That you currently have or have had in the past.
- We ask you to disclose if you consume or used to consume alcoholic beverages. Or if you smoke or used to smoke.
- We ask you to disclose if you have ever had surgery or have been admitted to a hospital.

## **We assess your medical information with the utmost care.**

Our medical advisors Maud Boiten, insurance doctor (BIG 29912521001) and Robert Kneepkens, clinical epidemiologist doctor (BIG 89022089701) are responsible for the medical underwriting. And for the advice to Centraal Beheer whether we can offer you the term life insurance and if we will charge the standard premium or a higher premium.

## **We look at your health information in a different way than your attending physician.**

Your attending physician will attempt to improve or stabilise your health. This means your doctor can adjust your treatment if there is a change in your health. Our Medical Department assesses your medical information to determine if you have a higher than average risk of dying during the term of the insurance.

## **You have rights and obligations.**

In this document your rights and obligations are explained per topic. Additional information can be found in the chapters [Your other rights](#) and [Your other obligations](#).

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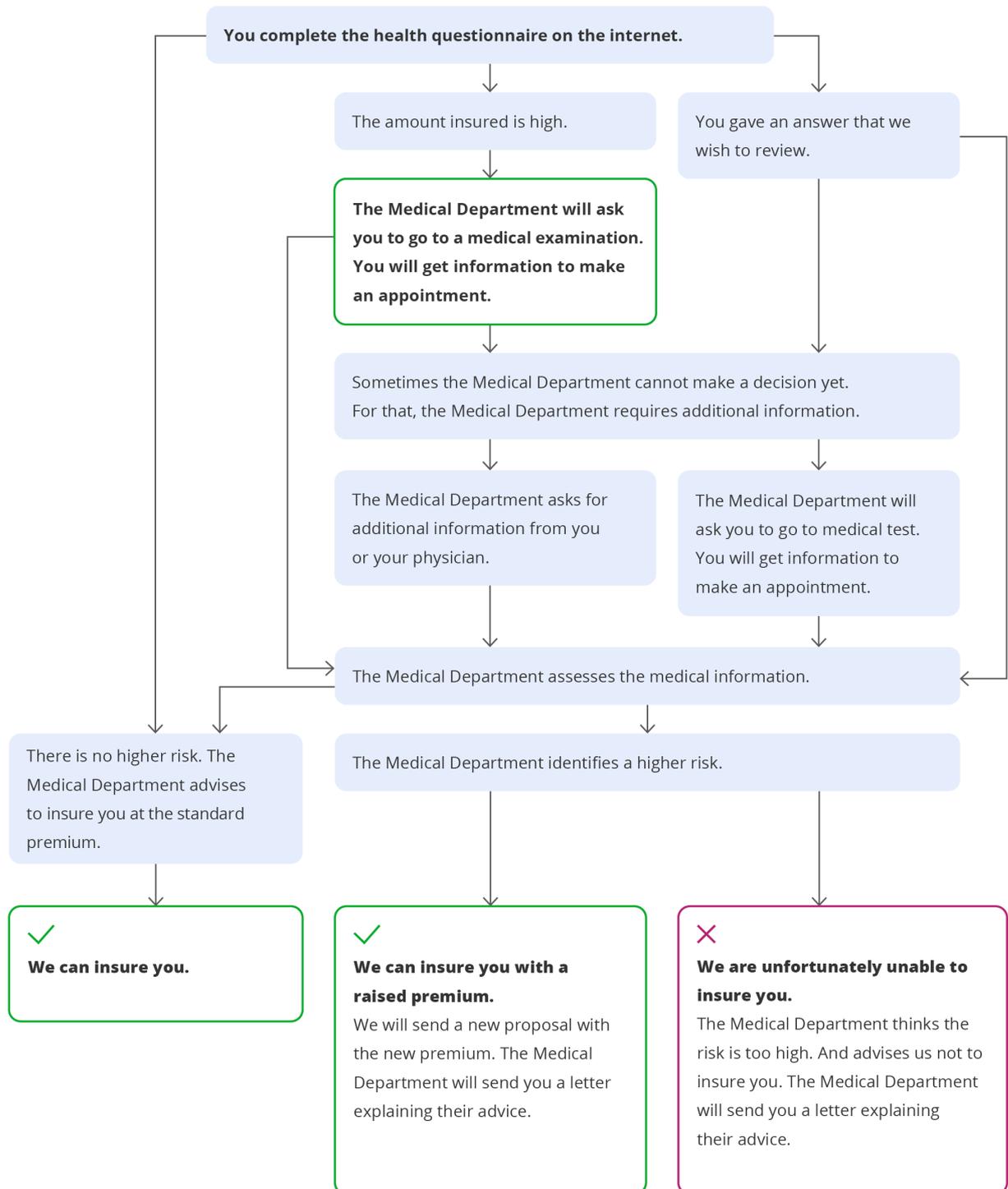
**If you have any questions, please call us: (013) 462 12 86.**

- You can reach our Medical Department from Monday to Friday from 8.30am to 6pm.
- Alternatively, you can send an e-mail: [gezondheid@centraalbeheer.nl](mailto:gezondheid@centraalbeheer.nl).

**We always try to give accurate information.**

It is possible that our information is not correct. Please note that we are not liable for the consequences of any such errors.

## Overview: the process of medical underwriting



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# Important information before you start your health questionnaire

## **You must be a lawful resident in the Netherlands. And registered in the BRP.**

Otherwise we cannot offer you the insurance.

- You can register as a resident in the Personal Records Database (BRP) if you are a lawful resident in The Netherlands and if you plan to live in the Netherlands for more than four months.
  - By The Netherlands we mean the European Netherlands and not Bonaire, St. Eustatius, Saba, Aruba, Curaçao and St. Martin.
- You must be a resident in The Netherlands when completing and submitting the health questionnaire and during the period that we assess this questionnaire.
- You must be a resident in The Netherlands if we ask for additional information, a medical examination or a medical test as part of the medical underwriting.

## **Read the questions in our health questionnaire before starting.**

If you would like to know which questions we ask, read our document [Term life insurance: Prepare for the online health questionnaire](#) . This will tell you which medical information you need to disclose.

## **Gather all your medical information before you start the questionnaire.**

We need to get a detailed picture of your health. In the questionnaire we ask you to disclose information about symptoms, signs, disorders and diseases. We understand that you may not always have all the information at your fingertips. But it is important that you complete the health questionnaire carefully. You cannot save the questionnaire and return to it later, so make sure you have all the information you need at hand.

## **Take your time completing the questionnaire.**

The health questionnaire is quite extensive. Make sure you take your time and answer all the questions in full. You also need to disclose information about symptoms, signs, disorders and diseases from years ago. Do not be afraid to disclose this. Even if it doesn't seem important, everyone has had something at some point. Do you have doubts about a question? Please don't hesitate to indicate this in the questionnaire. Also tell us the reason for your doubts.

## **We ask you to disclose information about symptoms, signs, disorders and diseases.**

Below we explain what we mean by this.

- A symptom or **sign** is a physical or mental discomfort. Or pain. And could be an indication of an injury or a disease.
  - It is not always clear what the cause is.
  - A diagnosis does not have to be made.
  - An example is back pain.
- A **disorder** is an abnormality from a healthy physical or mental state.
  - A diagnosis has often been made.
  - An example is a broken leg.

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- A **disease** is also a disorder.
    - When we think of a disease we often think of a physical abnormality. But a mental abnormality is also called a disease.
    - A disease can limit someone to function. Or will cause an earlier death.
    - An example is diabetes.

### **What information you need to disclose when completing the health questionnaire.**

Disclose all your health issues.

- Even if you think that they are or were not important. Or if you have not (yet) been to your GP, medical specialist, care provider (also alternative care provider) or care provider with these issues.
- Perhaps you have been there with your symptoms or signs and no disease has been demonstrated or no diagnosis has been made. Even then you must mention the symptoms and signs.
- The Medical Department can only do a risk assessment once. And that is before taking out the insurance based on all available information. Then they will give their advice to the insurance company.
  - The Medical Department looks at your health in a different way and with a different goal (insuring the financial risk) than an attending physician.
  - That is why it important that you disclose all the information!

### **Not every symptom, sign, disorder or disease means that we cannot offer you the insurance or that we charge a higher premium.**

Many symptoms and signs do not affect the results of the medical underwriting.

- But sometimes they can be important.
  - In that case, the Medical Department will contact you for further information.
- It might be difficult for you to determine whether your medical information is important or not. That is why you must disclose everything we ask.
  - The Medical Department will determine what is important and what is not.

### **The 'question limit' determines what we may ask you and what you must tell us.**

We comply with legal regulations. These regulations are set out in the Medical Examinations Act (Dutch: Wet op de medische keuringen) and the Insurance Examinations Protocol (Dutch: Protocol Verzekeringskeuringen) of the Dutch Association of Insurers (Dutch: Verbond van Verzekeraars). The amount insured under your insurance policy determines what medical information and data we may request from you. We call this the 'question limit.' Above the 'question limit', we may collect more information about your health.

- The current 'question limit' is €352,200.
  - This amount applies from January 1, 2025.
  - You can read more about the 'question limit' on the website [vanatotzekerheid.nl/begrippen/medische-keuring/](https://vanatotzekerheid.nl/begrippen/medische-keuring/) (in Dutch only).
- Have you recovered from cancer? Then read the chapter [Important information for ex-cancer patients](#).
  - There you'll find out what you need to disclose and what we may ask you.
- Is there a hereditary disease or condition in your family? Or do you have the disease or condition yourself? Or do you have a hereditary predisposition to a disease or condition? Then read the chapter [Information for people with a hereditary predisposition, or a hereditary condition or disease](#).
  - There you will find the rules for providing us information and the rules about what we can ask you.

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- If your insured amount exceeds the 'question limit', we may always require you to go to a medical examination.
    - You can read more in the chapter [Information about medical examinations and medical tests](#).



**Please note:** If the insured sum on the current insurance application is higher than €100,000 and you have arranged another term life insurance policy for yourself at Achmea (Centraal Beheer, FBTO, Interpolis) in the past 12 months, then we add the current sum insured to determine whether your amount insured exceed the 'question limit'. If the insured amount exceeds the question limit, then:

- You must always report that you had cancer if you have recovered from cancer.
- We may ask you to disclose information about hereditary diseases, conditions, or genetic predispositions.
- We may always ask you to go to a medical examination.

### **What happens if you disclose medical information that you do not need to disclose?**

We ask a lot of questions. And we understand that you want to disclose as much information as possible. If you accidentally disclose information that you do not need to, the Medical Department is not permitted to use this information.

### **You need to complete the health questionnaire yourself.**

For example: your insurance advisor or anyone else is not permitted to complete the questionnaire!

### **We expect you to complete the questions honestly, correctly and completely.**

We ask a lot of questions in our health questionnaire. You must answer these **truthfully**. And **don't leave out any information**.

- If the insurance has not yet started and it turns out that the information in your health questionnaire is incorrect or incomplete, this may have repercussions.
  - The insurance might not start or could be delayed as a result.
- If the insurance has already started and it turns out that the information is incorrect or incomplete, this can have repercussions for your surviving beneficiaries.
  - We sometimes stop the insurance.
  - We pay less or do not pay out at all in case of death.
  - We request a refund of our pay out.
- If it turns out that information was incorrect or incomplete, we will determine whether you will be registered in the insurers' fraud registers.
- You can read more about this in the following chapters:
  - [Your other rights](#)
  - [Your other obligations](#)
  - [Our fraud policy](#)

### **Please download and print the health questionnaire after completing the questionnaire.**

You may need the completed questionnaire later. Always save the completed questionnaire on a secure computer.



**Please note:** never send us the health questionnaire via e-mail!

You can only send us the questionnaire by using the send button after you have completed the questionnaire on our website.

**Please read the information on the website of the Dutch Association of Insurers.**

Important information about completing the health questionnaire and medical underwriting can be found at [verzekeraars.nl/gezondheidsverklaring](https://verzekeraars.nl/gezondheidsverklaring) (in Dutch only). On that webpage you will find the following:

- All information it works and which rules apply — for you and for us.
- The Explanation of the Health Declaration for Life Insurances (in Dutch: Toelichting Gezondheidsverklaring Levensverzekering)
  - It is important that you read the explanation carefully.
  - You can also read the explanation on the website [vanatotzekerheid.nl/begrippen/medische-keuring](https://vanatotzekerheid.nl/begrippen/medische-keuring).
  - Save the explanation so you can refer to it later.
- A video with instructions.
  - We recommend watching this video
  - You can find the video at the top of the page, just below the introduction.

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## Important information for ex-cancer patients

If you have had cancer and recovered, you don't always need to disclose that you had cancer.

- In this chapter you can read when you need to disclose the information.
- The rules for this will be adjusted regularly. The rules below apply from January 1st 2025.

### What information should you always disclose?

- Is the amount insured higher than the 'question limit'? Then you need to disclose you had cancer when completing the health questionnaire.
- If you have any symptoms, signs, disorders or diseases caused by cancer or cancer treatment, such as heart problems following chemotherapy, then you need to disclose this information in the health questionnaire.
- You always need to disclose information about all the symptoms, signs, diseases or disorders that you have at this moment.

### When don't you need to disclose you had cancer?

You do not have to disclose you had cancer if you can answer 'yes' to all the questions below:

- Is the insured amount € 352,200 or lower?
- Does the term life insurance stop before your 71st birthday?
- Have you been 'cancer-free' for at least 10 years?
  - The main rule is that you are 'cancer-free' for at least 10 years. Unless you were diagnosed before you were 21. Then the main rule is that you have been 'cancer-free' for at least 5 years.
  - For some types of cancer a shorter period applies. The tables below show when this is the case.
  - By 'cancer-free' we mean that the attending physician no longer could or can diagnose you with cancer. This is also called 'complete remission' or 'full remission'.
  - Whether you need to disclose your cancer history also depends on the stage of your disease at diagnosis. The stage says something about the severity of the disease.
    - If you do not know what stage you were at when you were diagnosed with cancer, you can look for it in your patient file. Or ask your GP or specialist.



**Please note:** If the insured sum on the current insurance application is higher than €100,000 and you have arranged another term life insurance policy for yourself at Achmea (Centraal Beheer, FBTO, Interpolis) in the past 12 months, then we add the current sum insured to determine whether your amount insured exceeds the 'question limit'.

If the insured sum exceeds the 'question limit', you must always report that you had cancer if you have recovered from cancer.

### More information about the 'question limit'.

You can read more in the chapter [Important information before your start your health questionnaire](#) under [The 'question limit' determines what we may ask you and what you must tell us.](#)

Type	Stage or TNM classification	You were diagnosed when you were 20 or younger	You were diagnosed when you were 21 or older but before the age of 55
Thyroid cancer Hürthle-cell-, follicular, papillary or mixed types	T1N0M0	3 years cancer-free	3 years cancer-free
Thyroid cancer Hürthle-cell-, follicular, papillary or mixed types	T2N0M0	3 years cancer-free	3 years cancer-free
Thyroid cancer Hürthle-cell-, follicular, papillary or mixed carcinoma	T3N0M0	3 years cancer-free	3 years cancer-free
Thyroid cancer Hürthle-cell-, follicular, papillary or mixed types	T1N1M0	5 years cancer-free	6 years cancer-free
Thyroid cancer Hürthle-cell-, follicular, papillary or mixed carcinoma	T2N1M0	5 years cancer-free	6 years cancer-free
Thyroid cancer Hürthle-cell-, follicular, papillary or mixed types	T3N1M0	5 years cancer-free	6 years cancer-free

Type	Stage or TNM classification	You were diagnosed when you were 20 or younger	You were diagnosed when you were 21 or older
Thyroid cancer medullary tumours	T1N0M0	5 years cancer-free	6 years cancer-free
Melanoma of the skin	Stage 1A	5 years cancer-free	5 years cancer-free
Melanoma of the skin	Stage 1B	5 years cancer-free	6 years cancer-free
Testicular cancer (type seminoma, tumour markers negative)	Stage 1	5 years cancer-free	5 years cancer-free
Testicular cancer (type seminoma, tumour markers negative)	Stage 2A	5 years cancer-free	6 years cancer-free
Testicular cancer (type seminoma, tumour markers negative)	Stage 2B	5 years cancer-free	6 years cancer-free
Testicular cancer (type seminoma, tumour markers negative)	Stage 2C	5 years cancer-free	8 years cancer-free
Testicular cancer (type non-seminoma, tumour markers negative)	Stage 1	5 years cancer-free	6 years cancer-free
Testicular cancer (type non-seminoma, tumour markers negative)	Stage 2A	5 years cancer-free	6 years cancer-free
Testicular cancer (type non-seminoma, tumour markers negative)	Stage 2B	5 years cancer-free	8 years cancer-free
Testicular cancer (type non-seminoma, tumour markers negative)	Stage 2C	5 years cancer-free	8 years cancer-free
Cervical cancer	FIGO stage 1A1	3 years cancer-free	3 years cancer-free
Cervical cancer	FIGO stage 1A2	3 years cancer-free	3 years cancer-free
Cervical cancer	FIGO stage 1B	5 years cancer-free	6 years cancer-free
Vaginal cancer	FIGO stage 1	5 years cancer-free	8 years cancer-free
Cancer of the colon or rectum (Adenocarcinoma)	T1N0M0	5 years cancer-free	9 years cancer-free

Type	Stage or TNM classification	You were diagnosed when you were 20 or younger	You were diagnosed when you were 21 or older
Cancer of the colon or rectum (Adenocarcinoma)	T2N0M0	5 years cancer-free	9 years cancer-free
Stomach cancer	Stage 1A	5 years cancer-free	8 years cancer-free
Meningioma, if completely removed	Stage G1	5 years cancer-free	5 years cancer-free
Kidney cancer	Stage 1, grade 1 (T1N0M0G1)	5 years cancer-free	8 years cancer-free
Kidney cancer	Stage 1, other	5 years cancer-free	9 years cancer-free
Hodgkin	Stage 1A	5 years cancer-free	5 years cancer-free
Hodgkin	Stage 1B	5 years cancer-free	6 years cancer-free
Hodgkin	Stage 2A	5 years cancer-free	8 years cancer-free
Breast cancer	T1aN0M0	5 years cancer-free	7 years cancer-free
Breast cancer	T1bN0M0	5 years cancer-free	7 years cancer-free
Breast cancer	T1cN0M0	5 years cancer-free	9 years cancer-free
All other types of cancer not listed above	not applicable	5 years cancer-free	10 years cancer-free

**If you cannot answer 'yes' to all the questions, then you need to disclose the details of your cancer history.**

If you are in any doubt, consult your GP or medical specialist. Because it is important that you complete the health questionnaire correctly. If you fail to answer all the questions, for example, this may have repercussions for the insurance payout.

**Check the website of the Dutch Association of Insurers (Verbond van Verzekeraars) for more information.**

The rules about regarding you should or should not disclose your cancer history are quite complicated. The Dutch Association of Insurers therefore published a .

- The checklist is in Dutch but if your computer has a button to translate webpages, this will be a good help.
- Answer the questions to determine whether you should mention or report that you had cancer.

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# Information for people with a hereditary predisposition, or a hereditary condition or disease

Heredity and insurance: what's the deal? Sometimes people don't get genetic testing done, or postpone it, because they're afraid they won't be able to get insurance afterward. This fear is usually unfounded. In fact, there are many possibilities. A hereditary predisposition often doesn't mean you can't get insurance. In some cases, we do raise the premium.

## **Do you have a hereditary predisposition to a condition or disease?**

This means you have an increased risk of developing certain diseases or conditions. Having a hereditary predisposition doesn't automatically mean you'll develop a disease, but it does increase your risk.

## **What information should you always disclose?**

- Do you have symptoms, signs or effects of a hereditary condition or disease? Or are you taking medication for one? Then you are legally required to report this when completing the health questionnaire. You must also report any abnormalities found during preventive checkups.
- Do you have a condition or illness caused by a hereditary predisposition? Then you must report it. For example, if you have high cholesterol due to a hereditary predisposition.

## **With an insured amount not higher than the 'question limit', you do not have to disclose certain information.**

Have you had preventive surgery, are you undergoing preventive checkups, or are you taking medication to prevent a hereditary disease or condition? You don't need to report this if the application of the insurance policy has an insured amount not higher than the 'question limit'.

## **We are allowed to ask for more information when the insured amount exceeds the 'question limit'.**

When the insured amount on your application exceeds the 'question limit', we can ask about hereditary diseases in your family, your own genetic predisposition, and the results of genetic testing and any preventive treatments.



**Please note:** If the insured sum on the current insurance application is higher than €100,000 and you have arranged another term life insurance policy for yourself at Achmea (Centraal Beheer, FBTO, Interpolis) in the past 12 months, then we add the current sum insured to determine whether your amount insured exceeds the 'question limit'.

## **More information about the 'question limit'.**

You can read more in the chapter [Important information before you start your health questionnaire](#) under [The 'question limit' determines what we may ask you and what you must tell us.](#)

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# Important information after completing and submitting the health questionnaire

**You will immediately receive the results after submitting your health questionnaire.**

On your screen you will see 1 of the following 3 options. The results are in Dutch only. To help you, we have translated the results:

## **1. We can offer you the insurance.**

The insurance can start.

## **2. The Medical Department will assess your health questionnaire.**

The insurance cannot start yet.

- You won't be accepted immediately.
  - Our Medical Department will then review your health questionnaire.
  - Sometimes our Medical Department still has questions. And sometimes more information is needed, for example, from a doctor. Or you need to go to a medical examination or medical test.
  - The Medical Department will then contact you. You will hear from them within 5 business days.
- If the insured amount exceeds €750,000, we will ask you to go to a medical examination.
  - Our Medical Department will first review your health questionnaire to determine what information is required for this examination.
  - The Medical Department will inform you about the medical examination and how to schedule an appointment.
  - You can find more information in the chapter [Information about medical examinations and medical tests](#).

## **3. Due to the amount insured , we ask you to go to a medical examination.**

The insurance cannot start yet.

- You can find more information in the chapter [Information about medical examinations and medical tests](#).

## **Sometimes the Medical Department cannot make a decision (yet).**

Do you have symptoms or signs that are still being examined? Or is there no (clear) diagnosis yet? Then the Medical Department is not always able to make a decision. And cannot advise us whether you we can offer you the insurance.

- The insurance cannot start when this occurs.
- The Medical Department will inform you.

## **If we require additional medical information from your attending physician, we will ask your consent.**

Your attending physician may only provide us with this information with your consent.

- You give us your consent for this with an authorization form
- The form will be send to you, if necessary.
- If you don't give us your consent, the insurance application will be cancelled.

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### **How our Medical Department communicates with you during the medical assessment.**

The Medical Department communicates with you by email or telephone.

- Does the matter concern medical information? Or does the Medical Department ask you to sign a document? They will send a letter instead of an email.
- The Medical Department can share this letter with you in two ways: by mail or digitally via Mijn Medische Beoordeling (translated: My Medical Assessment. This application is in Dutch only).
- If you use Mijn Medische Beoordeling, the Medical Department can exchange letters and documents with you quickly and securely.
  - You can also upload documents yourself here, such as a completed questionnaire.
  - When you log in once, you automatically choose digital communication. Of course, you can always switch back to mail.
  - You can log in securely and easily via iDIN.

### **We will keep the policyholder informed of the medical assessment by email.**

The policyholder is the person who took out the insurance. Therefore, we keep the policyholder informed.

- This way, the policyholder knows when the application is being processed.
- The policyholder receives an email each time the status of the medical assessment changes.
  - For example, when we receive information from a doctor, medical examination, or medical test. Or when we request information from the insured person or a doctor.
- We never include medical information in the email to the policyholder.

### **If we require medical information from abroad, you need to obtain this yourself.**

- You must also have this information translated into Dutch or English.
- The translation has been prepared by a certified interpreter or translator.
  - The interpreter or translator must sign and certify the translation.
- We decide if we can use the information for the medical underwriting.
  - If the information is not suitable, we will be unable to offer you the insurance.
- You need to pay the expenses yourself for obtaining and translating the information.

### **The Medical Department assesses the information about your health. They will advise us whether we can offer you the insurance.**

Once the Medical Department has gathered all the information, they will assess your health and medical information. There are 3 possible outcomes:

#### **1. We can offer you the insurance.**

We accept most people at the standard premium.

#### **2. We can offer the you the insurance, but we charge a higher premium.**

The Medical Department will send you a letter explaining the outcome and advice. We will send the policyholder a proposal for the new premium.

#### **3. We cannot offer you the insurance.**

This occurs when the Medical Department considers your risk to be too high. The Medical Department will then send you a letter explaining the outcome and advice. The policyholder will receive a letter in which we explain our decision about the insurance.



**Please note:**

Is the intention to insure 2 persons on the same insurance? The insurance can only start if we accept both of them.

**Your attending physician says you are healthy (again). And yet we charge a higher premium or we don't offer you the insurance.**

Many people wonder why our Medical Department sometimes advises us to charge a higher premium for an insured person. Or advises not to offer the insurance at all. While the attending physician says that everything is fine. And that the prospects are actually normal.

- The Medical Department looks at your medical condition from a different perspective.
  - They look at the chance or risk that someone will die during the term of the insurance.
  - And that chance or risk is compared to the chance or risk that someone without the medical condition will die during that term.
- Sometimes the risk of death is small, but still three or four times higher than people without a certain condition.
  - The risk of death is then still very small. And there is no reason to worry about your health.
  - But it does mean a higher premium for the term life insurance.



**Please note:** Is there a change in your health situation? And we have not sent the policy yet? Then you must notify the Medical Department and report the changes in your health condition.

- This is part of your mandatory disclosure.
- If you do not report the change in your health, Centraal Beheer may not pay out or may pay out less.
- By a change in your health, we mean, for example:
  - new health issues
  - change or worsening of issues
  - consulting a doctor referral to a doctor
  - medical examinations
  - new or different medications

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# Information about medical examinations and medical tests

## When we ask you to go to a medical test.

You decide where to have your medical examinations or where you take your medical test. The Medical Department will inform you about the possibilities. You will make an appointment for the examination or test yourself. And choose a location and time. Appointments can be scheduled in the evening or during the weekend.

## When do we ask you to go to a medical examination?

Whether you need to go to a medical examination depends on your age and the amount insured. See the table below. We will then determine which information we need.

Your age when you complete the health questionnaire	Amount insured	Type of medical examination
You are under the age of 50	From €750.001	Full medical examination
You are 50 or older	From €352.201 - € 750.000	Standard medical examination
You are 50 or older	From €750.001	Full medical examination



**Please note:** If the insured sum on the current insurance application is higher than €100,000 and you have arranged another term life insurance policy for yourself at Achmea (Centraal Beheer, FBTO, Interpolis) in the past 12 months, then we add the current sum insured to determine whether you need to go to a medical examination.

## Saluda and Meditel carry out medical tests and medical examinations on our behalf.

You will be examined by a medical examiner. The examiner will write a report and send this to our Medical Department. When you need to go to a medical examination due to the amount insured, the examiner will use the format of our medical examination report (Dutch: 'keuringsrapport').

- An example of this report can be found on [centraalbeheer.nl/gezondheidsverklaring](https://centraalbeheer.nl/gezondheidsverklaring).

## Saluda or Meditel sends us the report of the examination or test.

The Medical Department assesses this report and advises us if the insurance can start. And under what conditions. Sometimes they need more information. If this occurs, then you will be informed as soon as possible.

## What you can expect during a standard medical examination.

You discuss your health questionnaire with the doctor. The doctor will often ask you to disclose additional information. The medical examination includes the following:

- Questions about your medication.
- You need to disclose information whether you have ever used mental health care or mental health services. Like a psychiatrist or psychologist.
- You need to disclose information whether you have ever been to a medical specialist (for a consultation).

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- You need to disclose information whether you have even been admitted to a hospital. You also need to disclose information whether you ever had a surgery.
  - The doctor would like to know whether you have been in contact with your GP recently. And for what.
  - Have you had a medical examination or test recently? Such as an X-ray or an MRI scan? You need to disclose information about this.
  - It is also important to know whether you have had a blood test in the past 5 years. You need to disclose information about this.
  - The doctor carries out a general physical examination.
  - A blood test is only necessary if we expect the blood results to be abnormal.
  - Urinalysis (urine test) for the presence of blood, sugar and proteins.
  - If you have disclosed that you are a non-smoker, the doctor will test for cotinine (nicotine).

### **What to expect during the full medical examination.**

Is the amount insured € 750.001 or higher? Then we will ask you to have a full medical examination. This includes all the usual components of the standard medical examination. A full medical examination sometimes involves an electrocardiogram (ECG) and sometimes the doctor will check your lungs. The full medical examination always includes the following tests:

- Blood test for blood fats (cholesterol)
- Blood test for blood sugar percentage
- Blood test for red blood cells
- Blood test for kidney and liver function
- Blood test for HIV
- Urinalysis (urine test) for the presence of blood, sugar and protein

### **Good to know.**

You choose where the medical examination or medical test is performed. This can also be done in the evenings or on weekends. The Medical Department will inform you about this.

- Female clients can request a female examining physician when making an appointment with Saluda or Meditel.
- The physician does not perform internal examinations.
- If you object to a breast examination, please let us know. We do recommend this examination, but we understand if you do not wish to have it. All other examinations during the examination are mandatory.
- We cover the costs of the examination or screening. We do not cover travel expenses or any costs related to your time spent.

### **What do you need to take with you when you go to a medical examination?**

- a valid proof of your identity
- your health questionnaire. You can download and print the questionnaire once you have completed it online.

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### **More information on medical examinations and tests.**

The Dutch Association of Insurers (Verbond van Verzekeraars) has published two brochures (in Dutch only) with information about medical examinations and tests. You can read what you can expect. And what your rights and obligations are. The documents can be found on the website [vanatotzekerheid.nl/begrippen/medische-keuring](https://vanatotzekerheid.nl/begrippen/medische-keuring) (in Dutch only). The documents are called:

- U moet worden gekeurd - Wat nu? (Medical exam/test because of your health questionnaire)
- U moet worden gekeurd - Wat nu? (Medical exam because of a large insured amount)

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## Your other rights

This document has several chapters on different topics. You can read the rights and obligations regarding those topics there. Below you can read what your other rights are.

### **You have various rights when it comes to medical information in your file.**

- The Medical Department stores your medical information in a file. You have the right to read this medical file.
  - This is called 'right of access'.
- You can ask for a copy.
  - This is called 'right to a copy'.
- Are there errors in your medical file? And would you like to have these errors adjusted or corrected? Then you can ask us to do so.
  - This is called 'right to correction'.
- You can ask us to delete your medical file.
  - This is called 'right to erasure'.
  - This is only possible if the insurance has not yet started.

### **You are entitled to be the first to hear the result of the medical underwriting.**

- The Medical Department immediately passes on their advice about your health to Centraal Beheer.
  - Even if the advice is to raise the premium. Or the advice is not to offer you the insurance.
  - In these cases, the Medical Department will always explain the advice to you in a personal letter.
- If you do not want Centraal Beheer to be immediately informed about the advice, then you can use the 'right of first notice'.
  - You indicate this before you complete the health questionnaire.
  - Please call our Medical Department for this: (013) 462 12 86. The Medical Department can be reached from Monday to Friday between 8:30am and 6pm.



**Please note:** If you exercise your 'right of first notice', it may take longer before the insurance can start.

- You can also indicate that you only want to use this right if the outcome is that we cannot offer you the insurance. Or if we offer you the insurance but charge a higher premium.
- This will prevent the application from being delayed if it turns out that we can offer you the insurance and that the insurance can start.

### **You have a 'blocking right'.**

- This means that the Medical Department is not permitted to notify the insurer (Centraal Beheer) of the results of the medical assessment.
- Would you like to exercise this right? Then send a letter to:  
Centraal Beheer Medische Dienst  
TSA00/ECM Medisch geheim  
Antwoordnummer 396  
5000 WB Tilburg



**Please note:** We will cancel your application if you use the 'blocking right'.

- An insurer cannot process your application without being informed about the medical assessment.

### **You have a 'right to re-examination' and a 'right to reassessment'.**

- **'Right to re-examination':**

If you have any doubts about the quality and accuracy of the medical information used for the medical underwriting, you can request for additional or new information to be collected. Or you can ask for a new medical examination or medical test.

- For example, if you believe that the medical examination or medical test was not carried out properly.

- **'Right to reassessment':**

When you do not agree with the decision of the Medical Department, you can ask for your health and medical information to be reassessed.

- For example, if the decision or advice is that we cannot offer you the insurance.
- Or maybe new or additional medical information is available. And you think assessing this information may lead to another decision.

### **Do you want to exercise the 'right to re-examination' or the 'right to reassessment'?**

Send a letter with your explanation why you ask us to re-exam or reassess. Our address is:

Centraal Beheer Medische Dienst

TSA00/ECM Medisch geheim

Antwoordnummer 396

5000 WB Tilburg

### **Without reason we are not permitted to ask you to disclose certain information. Or ask you to go to a medical examination or test.**

We must comply with the Medical Examinations Act (Wet Medische Keuringen).

- We are not allowed to simply have anyone examined or tested. We are also not allowed to ask just anything.
- Furthermore, the questions and the medical examinations must be as targeted as possible.
  - We are not allowed to test you for anything that will not affect the outcome of the medical advice.
  - An examination must not be too difficult or too invasive for you.
- The question limit determines which questions we may ask and which tests we may perform.
  - You can read more about the question limit in the chapter [Important information before you start your health questionnaire](#) under [The 'question limit' determines what we may ask you and what you must tell us.](#)
- An HIV test is never permitted for an amount below the question limit.

### **Please contact us if you are not satisfied with the medical underwriting.**

Do you disagree with us or do you have a complaint? Send us a letter. As we would like to hear from you. And together we will look for a solution.

Our address is:

Centraal Beheer Medische Dienst

TSA00/ECM Medisch Geheim

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Antwoordnummer 396  
5000 WB Tilburg

**You can submit your complaint to Klachteninstituut Financiële Dienstverlening (Kifid).**

If you are not satisfied with our solution after a complaint, you can contact Kifid. Kifid stands for 'Financial Services Complaints Institute'.

- You have to submit your complaint within 3 months after we presented you our solution or our position in your case.
- You submit a complaint:
  - on [kifid.nl](https://www.kifid.nl).
  - by sending a letter. The address of Kifid is:  
PO Box 93257  
2509 AG Den Haag

**You can also take your complaint to a Dutch court.**

If you are not satisfied with our solution after a complaint, you also have the choice to take your complaint to court.

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## Your other obligations

This document has several chapters on different topics. You can read the rights and obligations regarding those topics there. Below you can read what your other obligations are.

### **It is important that you complete the health declaration yourself. And that you are honest and thorough.**

We call this the 'mandatory disclosure'.

- **If you do not comply, this can have major consequences for you or your beneficiaries.**

And that is something you obviously do not want.

- **What happens if you are not honest or if you withhold information.**

- **The insurance has not started yet**

Sometimes the insurance cannot start. Or we ask additional questions. Or we need more information (for example from your attending physician). Then it will take longer before the insurance can actually start.

- **The insurance has already started**

When you die and we find out that the medical information we received was incorrect or incomplete? Then this may have consequences for your beneficiaries.

- We sometimes do not pay out or pay out less.
- You can read more about this in the terms and conditions of our term life insurance.
- Read more in the chapter [Our fraud policy](#).

### **Please indicate when you are unsure when you fill out the health questionnaire.**

We can imagine that you can no longer remember all previous symptoms, signs, disorders or diseases? For example what it was exactly. Or when exactly you had symptoms, signs, disorders or diseases.

- Please indicate in the questionnaire which answers you are unsure about and why.
- And tell us what you are not sure about.

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## How we process and assess your data: our privacy policy

It is important that our customer's data are safe. That also applies to your medical information and data.

### **We comply with the laws and rules concerning the protection of your privacy.**

The main rules and laws are:

- Algemene Verordening Gegevensbescherming (General Data Protection Regulation, GDPR)
- Uitvoeringswet Algemene Verordening Gegevensbescherming (General Data Protection Regulation Implementation Act)
- Gedragscode Verwerking Persoonsgegevens Verzekeraars (Code of Conduct for the Processing of Personal Data by Insurers)
- Gedragscode Persoonlijk Onderzoek (Code of Conduct for Personal Investigations)
- Protocol Incidenten Waarschuwingssysteem Financiële Instellingen (Protocol Incident Warning System for Financial Institutions)
- Protocol Verzekeringskeuringen (Protocol Medical Exams for Insurance Purposes).
  - You can read this protocol (in Dutch only) this on the website of the Dutch Association of Insurers (Verbond van Verzekeraars): .
  - Here you can read which rules insurers and medical advisors need to comply with.
- Telecommunicatiewet (Telecommunications Act)

### **On our website you will find more information about our privacy policy.**

To read more, please go to our privacy statement on our website: [centraalbeheer.nl/privacy](https://centraalbeheer.nl/privacy).

### **How do we process your medical information?**

- The Medical Department assesses your medical information and data. And saves the information and data in a medical file.
  - The Medical Department will never save your information and data longer than is permitted by law and regulations.
- Your medical information and data will not be shared with other agencies, such as your health insurer. And your health insurer does not share this information and data with us either.

### **Employees with access to medical information have to comply with the 'duty of confidentiality'.**

Medical details and information are subject to what we call 'medical confidentiality'. Your medical details and information cannot be viewed by everyone who works at our company.

- Our medical advisors are responsible for processing the medical information correctly.
- Other employees are sometimes also able to access the information. This is only possible if the medical advisors have consented to this.
  - For example, employees of the Medical Department, claims processors or a fraud coordinator.
  - This also applies to Saluda and Meditel. These companies carry out the medical examinations and medical tests on our behalf.

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**If you apply for a new life insurance policy with Achmea, we may reuse your medical information.**

We may use the medical information you give us now when you apply for a new life insurance in the future.

- This applies to all the brands of Achmea Pensioen- en Levensverzekeringen N.V. (Avéro Achmea, Centraal Beheer, FBTO and Interpolis).
- This applies to the information that you disclosed as well as the information we have received from your attending physician.
- This also applies to the outcome of a medical examination or a medical test.

**We use computer programmes to assess your health questionnaire.**

We always try to assess your health questionnaire as quickly as possible. So that you know whether we can offer you the insurance.

- We use computer programmes that work with statistical risk models.
- Sometimes the computer programme itself determines whether than you can be insured. As a result, it is not always necessary for our Medical Department to review your questionnaire.
- Is the computer programme unable to decide immediately? Then the Medical Department will always assess your health questionnaire.
- The computer programme never decides that we cannot offer you the insurance or that we charge a higher premium. These decisions can only be made by an employee of the Medical Department.

**We put great effort in securing our systems and computer programmes.**

This prevents others gaining access to your medical data. We also have strict arrangements with Saluda and Meditel on the protection of your medical data.

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## Our fraud policy

### **We do not want honest customers to pay too much premium.**

With our fraud policy we ensure that we have as few unnecessary expenses as possible. Such as paying death benefits based on incorrect information.

### **It is important that you answer all questions correctly and completely.**

If you fail to disclose the information we request (for example: withholding information), this might have significant repercussions for you or your beneficiaries . You can read more on this below.

### **Disclose all your health issues, even if you think they aren't important.**

Even if you haven't been to a doctor or physician (yet). Or if the health issues resolved a long time ago.

### **What might happen if you fail to provide all the information we need?**

- the application for the insurance is delayed
- we cancel the insurance
- we stop the insurance or we charge a higher premium
- we will not pay out or pay out less in the event of your death
- we ask the beneficiaries to pay us back
- you will be registered in a fraud register
  - Your details will be added to the Central Information System (CIS) database in The Hague.
  - Other insurers can see these details.
  - It will become more difficult for a fraudster to take out any kind of insurance (with us or with other insurers).

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## About Centraal Beheer

At Centraal Beheer we have been on hand to assist our customers for over a century.

**We offer financial products and services.**

These include insurance products, pensions, mortgages, savings accounts and investment products.

**We have been part of Achmea since 1995.**

Centraal Beheer is a brand of Achmea Pensioen- en Levensverzekeringen N.V. in Apeldoorn. Achmea is the largest insurance company in the Netherlands. Achmea Pensioen- en Levensverzekeringen N.V. is registered with the Chamber of Commerce under number 08077009 and registered with the Dutch Authority for the Financial Markets (AFM) under number 12000441.

**More information about Centraal Beheer.**

For more information about our policies, products and details, please go to [centraalbeheer.nl](https://centraalbeheer.nl). Our address is:

Laan van Malkenschoten 20  
7333 NP Apeldoorn

# Contact us



## Ask your question via our app

The app also gives you direct access to the products you have with us.



## Send us a letter

Centraal Beheer, PO Box 9150, 7300 HZ Apeldoorn



## Call us: (055) 579 8100

Please visit [centraalbeheer.nl/contact](https://centraalbeheer.nl/contact) for our opening hours.

[centraalbeheer.nl](https://centraalbeheer.nl)