Conversion to hospitals

Referrals to Hospitals

Referrals to Outpatient Clinics Affiliated to Public Hospitals:

The health maintenance organization (HMO)/health fund operates clinics covering the range of medical fields and that are staffed by specialists, some of whom are also engaged as senior physicians in the hospitals. As a rule, appointments at outpatient clinics are approved only in cases where this is deemed necessary, such as the first follow-up visit after surgery performed at the same hospital, provided the appointment is within 30 days of surgery. A member referred the health maintenance organization's doctor or summoned to a hospital outpatient clinic must obtain permission from the health fund clinic. In all cases where referral to a hospital outpatient clinic is approved, the member must obtain the appropriate undertaking from the health fund to pay the hospital bill. A member attending an outpatient clinic without receiving the advance authorization of the health fund will not be entitled to any reimbursement or participation in expenses by health fund.

Hospitalization Services:

In order to serve members and care for their hospitalization, public hospitals are available by areas distribution and on the basis of the referral form. In case hospitalization is required, a member is granted a financial commitment from the health Fund to cover the necessary medical expenses in respect to the hospitalization and subject to the provisions of the General Health Insurance Law.

Accidents

Medical treatment following an accident within the scope of the health Fund according to the health insurance law and regulations depends on the type of accident. Details can be obtained from the health Fund.

- Work Injury: a person who suffers from a work injury or work accident is eligible to receive an accident allowance if the accident is recognized by the National Insurance Institute as an accident that needs medical treatment in accordance with the National Insurance Act. The member needs to bring Form 250 (employer's consent to work injury). Any member who filed a complaint to the National Insurance Institute to recognize the work injury should bring permission from the National Insurance Institute that the case is confirmed along with the authorized injury data. This statement is the basis for determining the eligibility of the member to get medical treatment, as described in the National Insurance amendment, and is subject to an agreement between the National Insurance Institute and Meuhedet Fund. More details can be obtained from the Centers' Secretarial section.

- Road accident: The victim of a road accident is entitled as is the case for the rest of the members to receive specific medical services according to the General Health Insurance Law. Treatment is provided in accordance with the general directives to provide services in the health Fund. Since the Health Insurance Act allows the health Fund to file a complaint against the insurance company for reimbursement of the expenses caused by the accident, the insured injured in a road accident is required to profess to physician and bring a police permission for the Secretarial section in the center. Medical treatment is subsequently requested if the authorizing body in the health fund agrees that medical treatment is needed.

Modify Personal Data or Info:

A member must inform the health fund of any changes in personal data such as: marital status, address, arrival of a new child in the family, a change in the identity card number, any change in the phone number. The changes are modified in the clinic by Meuhedet on-line.

Traveler in the Country/Abroad:

Moving or traveling members who need medical assistance while away from their area of residence can obtain the necessary medical assistance; in any clinic in which the member does not belong and with which the clinic has a contract with the health fund, by presenting the member's magnetic card.

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