FONDO ASSISTENZA NAZIONALE INTEGRATIVA MARITTIMI



Administrative



NEW CATEGORIES: REIMBURSEMENTS/GRANTS

Expense reimbursements and grants apply exclusively to the current year and to the members of the Member's household (parents, children, spouse) or cohabiting partner.

For expense reimbursements, the Member must submit all the documentation required by the Insurance Company. In case of incomplete and/or non-compliant documentation, the Insurance Company reserves the right not to proceed with the reimbursements.

For grants, the Member must submit all the documentation required by the Fund.

This summary table, regarding expense reimbursements, **should NOT** take precedence over the general and/or specific conditions of the insurance policies signed and currently in force.

CLICKABLE INDEX

Reimbursements for private hospitalizations with or without surgery

Childbirth reimbursement and birth grant

Reimbursement for private hospitalization and grant for prosthetics

Reimbursements and grants for public hospitalizations with or without surgery

Reimbursements for physiotherapy services

Reimbursements for specialist services

Reimbursements for ocular prosthetics

Reimbursements for dental services

LEGEND

DEDUCTIBLE: a predetermined amount that, in case of an accident, the Insured bears.

CO-PAYMENT: the share of damage, expressed as a percentage, deducted from the amount of compensation that remains the responsibility of the Insured.

BAND TO: band A plus grants for dental care

ACTIVE MEMBERS: members on active duty with presentation of a statement from the Institution or employer

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GRANT: social and/or welfare benefits at the exclusive and non-reviewable discretion of Fanimar within the limits of available resources

PHYSIO: Physiotherapy **DENTAL:** dental care

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- **5** The day hospital maximum is subtracted from the maximum for private hospitalizations.
- **6** Maximum of 90 days per year with a limit of €2,700.00 per hospitalization.
- 7 Maximum of 90 days per year with a limit of €1,380.00 per hospitalization.
- 8 Maximum of 90 days per calendar year.
- * As provided by the general and/or specific conditions of the insurance policy signed by the Fund.



DEDUCTIBLE/CO-PAYMENT CATEGORY AGE QUOTAS AD SERV € 1.403,00 Administrative A SERV € 1.033,00 B SERV € 594,00

REIMBURSEMENTS FOR PRIVATE HOSPITALIZATIONS WITH OR WITHOUT SURGERY

AD-A: -/15% B: € 258,00/25%	AD-A: -/15% B: € 258,00/25%	AD-A: -/15%
MAXIMUM COVERAGE FOR HOSPITALIZATIONS IN PRIVATE FACILITIES	DAY HOSPITAL MAXIMUM LIMIT ⁶	MAXIMUM COVERAGE FOR MAJOR SURGERIES IN PRIVATE FACILITIES
€ 52.000,00	€ 3.000,00	€ 104.000,00
€ 52.000,00	€ 3.000,00	€ 104.000,00
€ 31.000,00	€ 2.000,00	no

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			DEDUCTIBLE/ CO-PAYMENT
	CATEGORY	AGE	QUOTAS
	AD	SERV	€ 1.403,00
Administrative	А	SERV	€ 1.033,00
	В	SERV	€ 594,00

AND BIRTH GRANT		
NO NO		
NATURAL CHILDBIRTH IN A PRIVATE FACILITY	GRANT	
€ 1.550,00	€ 1.000,00	
€ 1.550,00	€ 1.000,00	
no	€ 1.000,00	

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AD-A: -/15% B: € 258,00/25%	
MAXIMUM LIMIT UP TO 65 YEARS	
€ 7.800,00	
€ 7.800,00	
€ 4 650 00	

REIMBURSEMENT FOR PRIVATE HOSPITALIZATION FOR PROSTHESIS

LEGEND

DEDUCTIBLE: a predetermined amount that, in case of an accident, the Insured bears.

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Administrative	А	SERV	€ 1.033,00
	В	SERV	€ 594,00

AD-A: giorni 2 B: giorni 3	NO
DAILY ALLOWANCE	GRANT
€ 90,00/g ⁶	€ 50,00/g ⁸
€ 90,00/g ⁶	€ 50,00/g ⁸
€ 46,00/g ⁷	€ 50,00/g ⁸

REIMBURSEMENTS FOR PUBLIC HOSPITALIZATIONS
WITH OR WITHOUT SURGERY

LEGEND

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Administrative	А	SERV	€ 1.033,00
	В	SERV	€ 594,00

PHYSIOTHERAPY REIMBURSEMENTS POST-HOSPITALIZATION ¹	PHYSIO ³	
AD-A: - B: 25%	no	
MAXIMUM LIMIT	MAXIMUM LIMIT	
€ 5.000,00	€ 850,00	
€ 5.000,00	€ 850,00	
€ 5.000,00	€ 750,00	

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Administrative	А	SERV	€ 1.033,00
	В	SERV	€ 594,00

SPECIALIZED SERVICES ²		
€ 36,00/20%		
MAXIMUM LIMIT		
€ 2.325,00		
€ 2.325,00		
€ 1.033,00		

REIMBURSEMENTS

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REIMBURSEMENTS FOR OCULAR PROSTHETICS	٠.

AD-A: € 36,00/- B: € 25,00/20%
MAXIMUM LIMIT
€ 359,00
€ 359,00
€ 281,00

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	А	SERV	€ 1.033,00
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