

# What we offer!



<b>Prevention Courses</b> Annual entitlement of up to 300 Euros each year for preventative programmes, such as back therapy training and nutritional counseling courses.	<b>BKK Pfalz</b> ✓	Other insurance: <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Health and fitness holidays</b> Annual entitlement of 150 Euros for members of the AktivPLUS scheme – can also be used by other family members on your policy.	<b>BKK Pfalz</b> ✓	Other insurance: <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Professional teeth cleaning</b> Annual entitlement of 50 euros for professional teeth cleaning at a dentist of your choice.	<b>BKK Pfalz</b> ✓	Other insurance: <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Generous vaccination expenses</b> We will pay a max. amount of 150 Euro a year for all vaccinations against contagious diseases that are recommended by the Robert Koch Institute. Includes vaccinations for holidays.	<b>BKK Pfalz</b> ✓	Other insurance: <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Classical homeopathy on health insurance card</b> Consultation with a qualified doctor who is part of our homeopathy scheme: patient history taking (during first and subsequent appointments) and preparation of treatment plan.	<b>BKK Pfalz</b> ✓	Other insurance: <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Doc around the clock</b> Medical and medication consultation 24 hours a day, 365 days a year, delivered by qualified healthcare professionals.	<b>BKK Pfalz</b> ✓	Other insurance: <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Finding a doctor</b> We will find a specialist doctor near you and help you to make an appointment.	<b>BKK Pfalz</b> ✓	Other insurance: <input type="checkbox"/> Yes <input type="checkbox"/> No

Want to know more about what we cover? Phone our hotline on Freephone 0800/133 33 00 or visit [www.bkkpfalz.de](http://www.bkkpfalz.de).



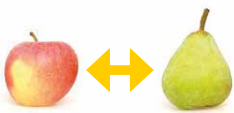
BKK Pfalz  
Vertrieb  
Lichtenbergerstrasse 16  
  
D-67059 Ludwigshafen

You no longer want to forego the numerous additional services we offer?

Then simply complete the application form on the reverse side. Post your form together with the cancellation confirmation back to us or fax it to +49 621/68 559 222.

**Your BKK Pfalz**

Freephone 0800/133 33 00



**We compare favourable to other providers.  
We encourage you to check and see.**



<p><b>Free dentures</b> Routine dental care including dentures free of charge at participating dentists.</p>	<p><b>BKK Pfalz</b> ✓</p>	<p>Other insurance: <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p><b>Hospital</b> Our expert care representatives are on hand to offer you help and advice. We aim to provide optimal care, improved outpatient aftercare and smooth transition to rehabilitation.</p>	<p><b>BKK Pfalz</b> ✓</p>	<p>Other insurance: <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p><b>FamilyPLUS Health-Care-Manager</b> Keeping you up to date from the start of your pregnancy all the way through to your golden years.</p>	<p><b>BKK Pfalz</b> ✓</p>	<p>Other insurance: <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p><b>Children in hospital</b> If your child is hospitalised, we will pay for their guardian (parent/relative/individual of your choice) to stay with them overnight. Under the age of seven, no application is necessary.</p>	<p><b>BKK Pfalz</b> ✓</p>	<p>Other insurance: <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p><b>Electronic medical record</b> Personal online health management: treatment costs, sensitivity testing, affordable medication, etc.</p>	<p><b>BKK Pfalz</b> ✓</p>	<p>Other insurance: <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p><b>Home help</b> For up to six weeks even if you have no children living at home.</p>	<p><b>BKK Pfalz</b> ✓</p>	<p>Other insurance: <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p><b>Customer service guarantee</b> We have a set of customer promises that we guarantee to keep, from our response times to processing and payment times.</p>	<p><b>BKK Pfalz</b> ✓</p>	<p>Other insurance: <input type="checkbox"/> Yes <input type="checkbox"/> No</p>

**If you have any questions about our health policies, please don't hesitate to get in touch.  
Freephone 0800 / 133 33 00**

Yes, I want to become a member of the BKK Pfalz as of \_\_\_\_\_ (Date)



Mrs.  Mr.

Surname, First name

Date of birth \_\_\_\_\_ German Pension Insurance Number (Rentenversicherungsnummer)

Street, Number

Postcode, City

Daytime Phone (Important for queries)

Name of your employer

Employer's address

I am related to the employer/involved as a shareholder:  Yes  No

Name of previous health insurance company:

Type of previous health insurance cover:

Mandatory cover  Voluntary cover

Family cover  Private cover  Another country

\_\_\_\_\_

Please send me an application for family cover.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

In order to process your application, we require some personal data. We require your personal social data to properly process your application for you. The legal foundations for this requirement can be found in Paragraph 284 Social Security Code V and Paragraph 94 Social Security Code XI (SGB XI).