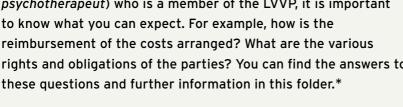
What you have to know if you seek treatment from an independent psychologist or psychotherapist



If you are being treated by an independent psychologist or psychotherapist (in Dutch vrijgevestigde psycholoog/ psychotherapeut) who is a member of the LVVP, it is important to know what you can expect. For example, how is the reimbursement of the costs arranged? What are the various rights and obligations of the parties? You can find the answers to



Why make use of an independent psychologist or psychotherapist?

'Independent' means that the psychologist or psychotherapist works independently, which may be in a joint practice with other psychologists or psychotherapists. They have their own practice and are not affiliated with an institution or a psychiatric hospital. You will be dealing with the same practitioner: the psychologist or psychotherapist of your choice. An independent psychologist and psychotherapist:

- is familiar with referring care providers and potential patients in the area
- is reliable toward patients and fellow care providers
- is accessible, i.e. nearby
- is available, open and patient-friendly
- sees to careful reporting and registration
- is clear about what they will and will not do and what is possible
- applies professional quality standards
- measures results
- has knowledge of the area, the neighbourhood
- works based on an orderly organisation, in which the human touch and a customised personal approach provide guidance

Why treatment with a member of the LVVP?

The LVVP, the National Association of Independent Psychologists & Psychotherapists, is a professional association of independent psychologists and psychotherapists. The LVVP represents their interests and promotes the quality of the profession and practice, and cooperation and consultation with other care providers.

LVVP members are registered in the Dutch BIG register (register of health care professionals) (see also www.bigregister.nl). This means that a psychologist/psychotherapist meets the requirements which the government sets for education and professional practice. In addition, LVVP members are monitored as to the performance of the statutory requirements. If you receive treatment from a member of the LVVP. you can be certain that he or she has legally recognised qualifications and satisfies the statutory requirements.

Who provides the treatment?

In generalistic basic mental health care (*generalistische basis-ggz*) you are treated in an independent setting by a first-line / mental health care psychologist (*gz-psycholoog*), psychotherapist or clinical (neuro)psychologist. In specialised mental health care you are treated in an independent setting by a psychotherapist, clinical (neuro)psychologist or psychiatrist. Your GP or family doctor mostly will be the person to refer you to either generalistic basic mental health care or specialised mental health care.

What are quality standards?

Every psychologist/psychotherapist in an independent practice is obliged by law to have quality standards (*kwaliteitsstatuut*). The quality standards set out the type of care provided and how the care is organised. You can find the quality standards on your practitioner's website or in their practice.

What is generalistic basic mental health care?

If you have mental health problems or if your GP or family doctor suspects that you have mental health problems, he or she can refer you to generalist basic mental health care. Generalistic basic mental health care is intended for people with mild to moderately serious mental health problems. This care is often of short duration and focuses on the mental health problem. The psychologist/psychotherapist determines whether you are eligible for treatment and whether this treatment should be of short or medium-term duration or intensive. If the problem is chronic, you will be eligible for treatment in the category of chronic mental health problems.

What is specialised mental health care?

If your problems are more complex and long term, your GP/family doctor will refer you to specialised mental health care. Treatments of longer duration are also possible.

What training requirements must a psychologist/psychotherapist satisfy?

A person who has completed a university degree in psychology, is a master or basic psychologist. A basic psychologist may not treat patients independently. Toward this end he or she must follow additional training to become a mental health care psychologist, which additional training must be at least 2 years. A clinical (neuro)psychologist or psychotherapist is someone who has completed (post-)graduate study of 4 years or more.

Are you looking for a care provider?

You can look for a care provider on the LVVP website. Go to https://lvvp.info. You can search by name, place and sector: generalistic basic mental health care, specialised mental health care and youth mental health care. You can also carry out an extensive search, for example by type of mental health problem, age category or stage or life and whether the practitioner is male or female.



Will your treatment be reimbursed?

If you are treated by an independent, BIG-registered psychologist or psychotherapist, the treatment will in principle be reimbursed through your basic health insurance. In order to be reimbursed, you will need a referral from your GP/family doctor. This is arranged in the Health Insurance Act (*Zorgverzekeringswet*). How much of the costs will be reimbursed depends on:

- your insurance policy (in-kind or restitution)
- whether or not your practitioner has a contract with your healthcare insurer.

If you have an **in-kind policy** (*naturapolis*), all costs will be reimbursed if your practitioner has a contract with your health insurer. Your practitioner will send the invoice directly to your health insurer. If your practitioner does not have a contract, your health insurer will reimburse approx. 60 to 80% of the treatment. You will have to pay the rest yourself. You always have to pay the **statutory excess** (€ 385 in 2024) yourself.

If you have a **restitution policy** (restitutiepolis) it does not matter whether or not your practitioner has a contract with your health insurer. In principle you will be reimbursed for the entire treatment. Take note: the health insurer can set a maximum reimbursement; you will not be reimbursed more than this maximum! You always have to pay the statutory excess (€ 385 in 2024) yourself. There are also restitution policies whereby not everything is reimbursed, this is called a combination policy. You should make sure to read your health insurance policy carefully. Your practitioner can check this for you via www.eiswijzer.nl. Your practitioner will send the invoice to you. You must then send the invoice to vour insurer.



What does your practitioner charge?

The care performance model (zorgprestatiemodel) was introduced on 1 January 2022. The care performance model does not deal with the care you receive, but how you are charged. Your treatment will be paid as individual care services. Examples of care services are a diagnostic consultation, a treatment consultation or consultation with colleagues. The Nederlandse Zorgautoriteit (Dutch Healthcare Authority) has fixed maximum rates for all care services. These individual care services are itemised on the invoice which the care provider sends to you or your health insurer, usually once a month. Ask your psychologist/psychotherapist as to the payment terms as soon as treatment starts. You can also find this information in your practitioner's quality standards.

Excess

As of 1 January 2022 the health insurer will set off the excess per calendar year. The health insurer will include the care services provided throughout all of 2024 in the calculation of the excess for 2024. The care services which are provided in 2025, count toward the calculation of the excess for 2025. If your treatment crosses the boundary of the calendar year, you will pay the excess for both calendar years. The statutory mandatory excess for 2024 is fixed at € 385. In addition, you can have a voluntary excess; this too will be set off first, before the service is reimbursed.

What is not reimbursed?

Not all kinds of treatment are reimbursed. For example, you will not receive reimbursement for:

- psychoanalysis
- relationship counselling, unless this takes place in the framework of the treatment of another mental health problem, such as depression or an anxiety disorder
- · adjustment disorders like a burn-out
- other ailments and problems which can be a cause for concern

In these situations, the practitioner will send the invoice directly to you and you must pay it within the payment term. Your psychologist or psychotherapist can tell you more about this.

What will happen if you do not attend an appointment?

If you do not cancel an appointment or do not cancel an appointment in time, you will have to pay the consultation yourself. This is called a no-show. This will not be reimbursed by your health insurer. Your psychologist/psychotherapist may determine the rate for a no-show themselves. At the start of the treatment they will tell you more about this. You can also find this information in your practitioner's quality standards.

What are your rights and obligations and those of the psychologist/psychotherapist?

An independent psychologist/psychotherapist is obliged to comply with certain rules. Two professional codes of conduct have been established:

- professional code of conduct for psychotherapists: this code applies to psychotherapists
- professional code of conduct for psychologists: this applies to first-line/ mental health care psychologists and clinical (neuro)psychologists.

In addition, a number of laws apply in which the rights and obligations of care providers and patients are laid down:

- Individual Health Care Professions Act (BIG)
- Medical Treatment Contracts Act (WGBO)
- General Data Protection Regulation (GDPR)
- Healthcare Quality, Complaints and Disputes Act (Wkkgz)
- Regulation of the Healthcare Market Act (Wmg)

The main points from these laws will be explained below.

What is and what is not allowed in the treatment relationship?

The psychologist/psychotherapist is obliged to carry out their work carefully and to treat you with respect; they may not abuse their position. The contact and the relationship between the psychologist/psychotherapist and their patient is strictly professional. For example, the practitioner may not accept any gifts over a small amount. Intimate contact is not permitted; sexual contact between practitioner and patient is forbidden. During the treatment the psychologist/psychotherapist may not enter into any agreement with you from which they might benefit.





How are your personal data protected?

The psychologist/psychotherapist must ensure that your personal data are stored securely, both digitally and on paper. This requirement comes from the European privacy legislation, the GDPR. Your practitioner must state in a privacy statement how they have arranged the security of your personal data. You can ask about this when you start treatment.

Is the psychologist/ psychotherapist subject to a duty of professional secrecy?

Your psychologist/psychotherapist is subject to a duty of professional secrecy: they must keep your data confidential. The practitioner may only disclosure data relating to you to, for example, the UWV benefits agency or the Occupational Health and Safety Service (Arbodienst) if you have given explicit consent for this. Your psychologist/psychotherapist may only break their duty of confidentiality in emergency situations, for example, if people might be in danger. Your practitioner may consult with colleagues about your treatment. Those colleagues are also subject to a duty of confidentiality. Your practitioner does require your consent to provide information to your GP/family doctor. The health insurer must check whether your treatment has been correctly invoiced. Your health insurer may inspect your file by way of great exception and only if there is cause for such.

May the health insurer know the diagnosis?

In order for the care to be reimbursed, your psychologist/psychotherapist will send an invoice to your health insurer. If your treatment falls under specialised mental health care, the invoice will state the diagnosis (DSM) at main group level and the type of care. The invoice for generalistic basic mental health care does not state the diagnosis at main group level, but it does state the care profile and the type of care. If you object to your health insurer seeing your diagnosis at main group level and the type of care on the invoice, you can lodge an objection with your practitioner. This is called the opt-out arrangement. The Nederlandse Zorgautoriteit (NZa) has created a privacy statement that you can fill in.

Classification of care

Your practitioner will record a type of care in the care performance model. The type of care provides information on your care needs. For example, your practitioner can use this when drawing up a treatment plan. The type of care does not determine the price of the treatment. The care services you receive determine this. Sometimes your practitioner will redefine the type of care required during the treatment to make change clear. You will find the type of care on the invoice.



What is the course of the treatment?

The psychologist/psychotherapist must tell you what they think your problem is and determine a type of care. After that your practitioner will prepare a treatment plan. Your practitioner must consult with you on the goal of the treatment and the way in which that goal can be achieved. The practitioner will also tell you approximately how long the treatment will last. You consent to the treatment on the basis of this information. The practitioner will also continue to consult with you during the treatment, give you information and make decisions together with you. The psychologist/psychotherapist may only withhold information from you if it would be harmful for you. In this case the practitioner will first have to consult with a colleague.

Who may inspect your file?

The psychologist/psychotherapist will keep your data in a file. The file will have the referal from the GP/family doctor, the initial evaluation, the treatment plan, letters from you and about you and a description of the progress of the treatment. Your file is strictly confidential. Your practitioner must keep your file and your data in such a way that no one can access it. Your privacy must be protected. You yourself may inspect your file and request a(n) (electronic) copy. Sometimes others may be involved in your treatment, with your consent. If there is information in your file which others provided confidentially, you may not see this information. You may add something to your file, but you may not remove anything from it. For example, you may add remarks or comments regarding the treatment, or criticism about the way in which your situation has been represented. You may also have your file destroyed. You



must request this in writing. The records relating to your treatment may not be destroyed, because it must remain possible for the health insurer to carry out an inspection.

Do you have to fill in questionnaires?

Your practitioner will want to know whether you are satisfied with your treatment, how therapy is going and whether your mental health problems are improving. In order to measure this, your practitioner can use various questionnaires (satisfaction, effect measurement/ROM, et cetera). Often you will be given the same questionnaire at the end of the treatment that you received at the beginning. You are not obliged to cooperate with these questionnaires. Discuss with your practitioner whether or not you wish to fill in the questionnaires. Please note: the practitioner is obliged to complete the HoNOS+-questionnaire (with you) in order to record the type of care.

What can you do if you have a complaint about your treatment or practitioner?

If you have complaints about your practitioner or the treatment, it would be best to first discuss this with your practitioner. Often the problem is based on a misunderstanding that can be resolved in a discussion. If you and your practitioner cannot resolve the matter, you can ask an independent, impartial complaints officer of the LVVP to mediate. What if your

complaint is still not resolved? Or it cannot be expected of you, in your situation, that you discuss the complaint with your practitioner and/ or the complaints officer? In such case you can contact the dispute resolution committee, De Geschillencommissie vrijgevestigde ggz-praktijken, in The Hague. This dispute resolution committee has set up a digital portal for patients of independent psychologists/psychotherapists. The use of the dispute resolution committee involves costs. Mental health psychologists, psychotherapists and clinical (neuro)psychologists also fall under disciplinary law. This is arranged in the Individual Health Care Professions Act. You can therefore also submit your complaint to the disciplinary board, Tuchtcollege voor de Gezondheidszorg. More information can be found on www.tuchtcollege-gezondheidszorg. nl/ik-heb-een-klacht.

What can you do if you have a complaint about your health insurer?

Do you have complaints about, for example, the reimbursement by your health insurance? You can present the matter to the independent health insurance complaints body, Stichting Klachten en Geschillen Zorgverzekeringen (www.skgz.nl). Do you believe that your health insurer is not respecting your privacy? Or do you have another complaint or question about mental health care? You can go to www. igj.nl > melden burger van de Inspectie Gezondheidszorg en Jeugd (IGJ).

What information are you entitled to?

According to the law (Wkkgz) you are entitled to information about, for example, rates and waiting times. Your psychologist/psychotherapist also has to tell you there were incidents with noticeable consequences during your treatment. Your practitioner must give you information about the nature and the circumstances and the measures he or she took to limit or eliminate the consequences. Your practitioner must record in your file when, how and why the incident occurred and who was involved.

What can you do if you have a complaint about unnecessary or complicated forms?

Do you think the forms of your health insurer or practitioner are needlessly complicated or are unnecessary? You can lodge a complaint with the Nederlandse Zorgautoriteit (NZa). Call the complaints line on (+ 31-0)88-7708770 or send an email to info@nza.nl. The NZa can then present a binding advisory opinion. You can also report the matter without the NZa presenting a binding advisory opinion.



ADDRESSES

Landelijke Vereniging van Vrijgevestigde Psychologen & Psychotherapeuten (LVVP)

Maliebaan 87, 3581 CG Utrecht T: (030) 236 43 38

E: bureau@lvvp.info

W: Ivvp.info

Complaints officers of the LVVP

T: (088) 234 16 06

E: LVVP@klachtencompany.nl

Geschillencommissie vrijgevestigde ggz-praktijken

Postbus 90600, 2509 LP Den Haag W: www.degeschillencommissie.nl (via the Geschillencommissie Zorg you will be led to the Geschillencommissie vrijgevestigde ggz-praktijken)

Centraal Tuchtcollege voor de Gezondheidszorg

Postbus 16437, 2500 BK Den Haag T: (088) 371 25 10

W: www.tuchtcollege-gezondheidszorg.nl

REGIONAL DISCIPLINARY BOARDS

Regionaal Tuchtcollege Amsterdam

(Noord-Holland, Zuid-Holland) Postbus 84500, 1080 BN Amsterdam T: (088) 371 25 00

Regionaal Tuchtcollege 's Hertogenbosch

(Utrecht, Zeeland, Noord-Brabant, Limburg) Postbus 3555, 5203 DN 's-Hertogenbosch T: (088) 371 25 50

Regionaal Tuchtcollege Zwolle

(Groningen, Friesland, Drenthe, Overijssel, Gelderland, Flevoland) Postbus 10067, 8000 GB Zwolle T: (088) 371 25 70

- * This folder only contains information on the treatment of adults. The LVVP has a separate folder for the treatment of children and youths (digital).
- * Anywhere in this folder where reference might be made to 'he', this can also be read as 'she'.

