Coming from abroad

The Dutch healthcare system
Anyone who resides or works in the Netherlands is required, under the Health Insurance Act (Zorgverzekeringswet), to enroll with a health insurer to cover medical expenses within four months of arrival. The Dutch healthcare system is based on the principle of social solidarity. This means that healthy people contribute to the medical expenses of those who are ill. If you have an income or receive a social security benefit, you are also due to pay an income related premium. Depending on your situation, the percentage varies.

Working and residing in the Netherlands
When do I have to apply for a mandatory health insurance?
If you reside or work in the Netherlands, you will have to be insured under the Dutch law. Residents and employers who work in the Netherlands but reside abroad are required to enroll with a health insurer within four months after arrival in the Netherlands or the commencement of their professional activities. You pay a monthly premium for the mandatory health insurance. You will have to pay an extra premium for the optional supplementary insurance, for instance covers dental care or physiotherapy. The medical costs will then be partly or fully reimbursed.

When can I remain insured in my home country?
You are not required to be insured in the Netherlands if you reside and work in the Netherlands for an employer based in your home country, you can remain insured in that country. You need to have an A1 certificate and apply for an S1 or E106 form with your health insurer in your home country. This form is used by the memberstates of the European Union (EU), European Economic Area (EEA) and Switzerland. With this certificate and form you can get medical care in the Netherlands.