

Dear all

As the crisis progresses, the profession of complementary medicine is increasingly heard and seen, and attention is being paid to the consequences of the crisis for our sector. And that is profitable for everyone.

SBI code

Currently has been announced that the first financial success has been achieved with regard to the financial compensation for corona. The complementary profession has been assigned an SBI code (86919) that has been added to the list of sectors that can benefit from the TOGS scheme. For further information, see: <https://www.rijksoverheid.nl/onderwerpen/coronavirus-financiele-regelingen/overzicht-financiele-regelingen/togs>. At the same time, it is important not to lose sight of reality. The Opening of this regulation does not imply that every submitted application automatically will be honored. Conditions are attached to the scheme, which can also lead to rejection. Over time it will become clear to what extent you have actually been able to use this scheme.

Agenda for health insurers

RBCZ, together with its sister organization KAB, (both umbrella organizations) tries to gain access to ministries and other authoritative parties that are responsible for both professional regulations during the crisis and managing its economic consequences. And the RBCZ and KAB have managed to get the complementary sector on the agenda of the consultations of the joint health insurers about the application and roll-out of the continuity contribution. This means that more clarity is expected soon about the position of the complementary medicine profession within this regulation and perhaps also in other areas.

Financial compensation

In the financial-economic field, it is important that our sector participates fully in the arrangements made to financially compensate our profession. In a way that does justice to the financial loss suffered as a result of loss of income. In that context, it may become necessary at any time to anonymise data with which the RBCZ and KAB can strengthen their negotiating position. For example: insight into the average annual turnover of our affiliated therapist, and insight into the (estimated percentage) decrease in income as a result of this crisis.

Supply data, anonymously and voluntarily

RBCZ and KAB estimate that demand for this data can be demand-driven health insurer consultation or a government agency. In any case, RBCZ and KAB take this into account very much. It is necessary that data can be delivered quickly and that data can also become urgent if our professional group is



ANVAG

NOT included in compensation decisions. In that case, there are figures with which the case can still be argued and decision-making can be influenced. Together with the KAB, RBCZ is preparing to be able to anticipate quickly in such a situation. The RBCZ would like to have anonymized and voluntary data from affiliated therapists. Anvag proposes its members to keep the data if you participate. If this becomes current, we will report again and it would be nice if your data is available quickly.

International data collection campaign for treatment methods COVID 19

The Board of RBCZ draws attention to the following: An interesting initiative is currently underway from the Helfgott Institute. The institute gathers and records clinical observations requiring complementary and traditional care COVID-19 (case reports, case series). A scientific review of these case reports would then follow publication, which could make an important contribution to the strengthen the position of complementary care. RBCZ naturally supports this initiative, please bring it to the attention of our professional organizations and therapists and request cooperation. The letter explaining how to act and the necessary links have been added as an attachment.

Kind regards,

Board ANVAG