

Ratgeber

Hilfsmittelversorgung

für Dein Kind



Guide

Assistive devices for your child

Dear parents,
does your child need an
assistive device?

As parents and legal guardians, you are the most important point of contact when it comes to selecting, applying for and approving assistive devices.

Together with specialists such as doctors, therapists or occupational therapy and rehabilitation technicians from medical supply stores, you accompany the entire supply process. This guide helps you keep track of everything and explains the most important technical terms and deadlines for the approval of an assistive device. All of the following information applies to those with statutory health insurance.



Our guide provides you with information on all important aspects of obtaining medical aids for your child if you have statutory health insurance.

What is an assistive device?

Assistive devices are devices or objects that can be worn, carried or taken with you when you move house and ...

- compensate for a disability,,
- ensure the success of medical treatment or
- prevent an impending disability.

Assistive devices are necessary in individual cases; they ensure participation, support development and independent living, and improve mobility for accessing the home environment and the local area. For children, they enable schooling and playing with peers.



How your child can obtain an aid

a) The prescription*

The doctor issues a prescription in which the diagnosis and the required aid, including the necessary accessories and equipment, are described as precisely as possible (product type/7 digits). The prescription can be issued by a paediatrician, a specialist at a clinic or at an SPZ*.

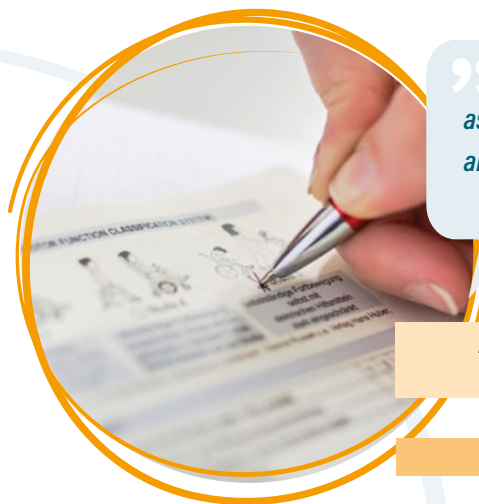
Find out in advance from a medical supply store which aids are available. Together with the experts, you and your child decide which aid is needed and what it will be used for. SPZs*, for example, offer special consultation hours for aids.



b) The application to the health insurance company/Krankenkasse*

An application must be submitted in order for the health insurance company* to cover the costs. This task is usually carried out by the medical supply store or the orthopaedic technician. The application consists of:

- the doctor's prescription,,
- a cost estimate from the service provider and
- a justification, if necessary.



“ rehaKIND has supported us in asserting our rights and always has an open ear for our concerns. ”

Mother of a child with CP (cerebral palsy)

Assistive device requirements are determined



Care team sets care goals



Doctor prescribes assistive device, including justification



Testing at medical supply store/ Sanitätshaus* or SPZ*



Cost estimate for a specific product is sent to GKV* for approval



Approval within legally specified time limits

** Institutions and terms are briefly explained in the glossary on the last page.*

Deadlines and rights

when applying for cost coverage

Processing times:

- **Medical aids:** Decision within 3 weeks (for the Medical Service (MD)*: 5 weeks).
- **Aids for disability compensation:** Decision within 2 months.

Extension: If additional documents are required, the health insurance fund may extend the deadline. The deadlines may not be extended without informing the insured person.

Deemed approval: If the deadline is exceeded without written notification from the health insurance fund, the application is deemed to have been approved. In this case, you can purchase the medical aid yourself and claim the costs later. Please note: The medical aid must be purchased after the deadline but before the rejection. Once the application has been rejected, deemed approval no longer applies.



Take action: If the deadline is about to expire, send your health insurance provider a written request for a decision prompt.

Tip: Always inform the medical supply store. Approval notices from health insurance providers and information about extended processing times are often misleading. Always ask for written confirmation of any information provided by the cost bearer over the phone!

Faster procedure for prescriptions from the SPZ/MZEB:*

Section 33 (5c) SGB V: A new law has been in force since 28 February 2025: if a medical aid is prescribed or recommended by an SPZ, its necessity is presumed. As a rule, an assessment by the MD is not necessary.*

You can find everything you need to know about the new law and its implementation here:

<https://rehakind.com/arbeitsgruppe-diskutiert-schnelle-umsetzung-%c2%a733-absatz-5c-sgb-v-beschleunigt-hilfsmittelversorgung-fuer-verordnungen-aus-spz-und-mzeb/>



What to do if your application is rejected?

a) Lodge an appeal

If your application is rejected in whole or in part, you can lodge a written appeal within one month.

- If your application is rejected in whole or in part, you can lodge a written appeal within one month.
- Write 'Appeal' / „Widerspruch“ at the top of your letter and send it to your health insurance fund.
- It is not necessary to provide a reason at first, but one should be submitted later. If necessary, request an expert opinion from the MD* to address the reason.
- Get support from your doctor, therapist or medical supply store.
- Be sure to send the appeal signed by post or fax (email is not sufficient!).

b) Appeal decision and legal action

If the health insurance fund does not uphold the appeal, the appeals committee will decide on the matter.

As a rule, the appeal procedure should not take longer than three months. The actual duration depends on the documents to be examined and whether the MD* is involved. If the appeals committee decides against you, the only option left is to file a lawsuit with the social court.

- You have one month from receipt of the appeal decision to file a lawsuit.
- The procedure is free of charge, and a lawyer is not absolutely necessary, but helpful.

Urgent proceedings when speed is of the essence

If the aid is urgently needed, you can apply to the social court for a temporary injunction ('urgent proceedings'). The court will then examine whether your application can be provisionally granted.

- Explain why your child needs urgent care, as otherwise there is a risk of irreparable harm (e.g. health consequences, inability to attend school). Provide all supporting documents and other evidence.
- Seek assistance from your doctor and, if necessary, a specialist lawyer.

Who is responsible?

In some cases, it is not the health insurance fund but another rehabilitation provider that is responsible, for example:

- Integration assistance provider/Träger der Eingliederungshilfe*
- Federal Employment Agency/Bundesagentur für Arbeit (BA)*
- Statutory accident insurance/Gesetzliche Unfallversicherung (GUV)*
- Pension insurance/Rentenversicherung (GRV)* or
- Youth welfare/Jugendhilfe*.

Medical rehabilitation

- Eingliederungshilfe*
- Jugendhilfe*
- GRV*
- GUV*
- GKV*/PKV

Participation in working life

- Eingliederungshilfe*
- Jugendhilfe*
- GRV*
- GUV*
- BA*

Participation in community life

- Eingliederungshilfe*
- Jugendhilfe*
- GRV*

This is how responsibility is determined:

- The first cost bearer contacted must determine within two weeks whether they are responsible.
- If not, they must forward the application immediately. The cost bearer must inform you of this forwarding in writing. No objection to the forwarding is possible. The new cost bearer must then make a decision.
- Even if the new cost bearer believes they are not responsible, they are not permitted to forward the application again or return it to the first cost bearer. If necessary, it can recover the money from the original cost bearer. The cost bearers must clarify this among themselves.



Glossary:

brief explanations of the most important terms, parties involved and institutions

- **A prescription/Rezept*** is a doctor's prescription for medication, remedies or medical aids that can be filled at pharmacies or medical supply stores.
- A **medical supply store/Sanitätshaus*** provides people with medical aids such as prostheses, orthoses, wheelchairs or nursing care supplies.
- **Statutory health insurance (GKV)*** is a solidarity-based financing system for basic medical care in Germany.
- **An SPZ – social paediatric centre*** is a specialised facility for the diagnosis and treatment of children with developmental, behavioural or neurological disorders.
- **The Medical Service/Medizinischer Dienst (MD)*** is the advisory and assessment service of the statutory health and nursing care insurance funds for the examination of medical and nursing care services.
- **Integration assistance/Eingliederungshilfe*** supports people with disabilities in participating in social life in a self-determined manner. Responsibility for this usually lies with municipal authorities or regional associations, i.e. cities, districts or supra-regional social welfare agencies.
- **The Federal Employment Agency/Bundesagentur für Arbeit (BA)*** finds jobs, pays unemployment benefits and supports people in their job search, qualification and professional integration.
- **Statutory accident insurance/Gesetzliche Unfallversicherung (GUV)*** protects employees in the event of accidents at work and occupational diseases and provides medical, professional and financial benefits.
- **Statutory pension insurance/Gesetzliche Rentenversicherung (GRV)*** pays rehabilitation benefits and reduced earning capacity pensions if people with disabilities are unable to work or can only work part-time due to their limitations.
- **Youth welfare/Jugendhilfe*** supports provides children and young people with disabilities through support services, counselling and benefits for participation and development. It is based at the youth welfare offices of the municipal authorities (cities or districts).

**Do you have
any questions?**

Send us an email at

info@rehaKIND.com

Call us on

0231 6103056.



This is rehaKIND e.V.

We are committed to helping children who need assistive devices and their families.

For more than 25 years, we have been the only neutral network active in this field:

- Expert knowledge for optimal care
- Training for all involved
- Education & political work for better conditions

rehaKIND is the central point of contact for parents, specialists, funding agencies and politicians – and indispensable for the care of young people with disabilities.



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Photos rehaKIND:

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