

# Clarification regarding drugs/medication

Insured:

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Contact:

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Medication:

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Note: If the use (including indication and dosage) is outside the limitations of the list of pharmaceutical specialities and/or outside the scope of the Swissmedic authorisation, please also answer points a-f "Additional information in case of off-label use" (reimbursement according to Art. 71a-d KVV/HIO) on page 2.

**Complete list of primary and secondary diagnoses including date of initial diagnosis:**

**Treatments carried out to date including details of time period, dose and progress:**

**Laboratory values and/or molecular genetic test results which are relevant to the choice of therapy and are a requirement as per the list of pharmaceutical specialities (SL) or authorisation:**

**If monotherapy is not used for treatment, please provide details of the combination therapy (period, dose):**

Please note that, in accordance with Art. 71a-d KVV/HIO, we require the following additional documents/information to check our liability to cover the costs of therapies not included on the SL and for drugs on the SL which are used outside the limitation or approved authorisation:

- Date, name of doctor providing treatment:

**Please send us your complete answers preferably by email (HIN-secure)  
or by post to the address below:**

**Winterthur**

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**Lausanne**

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**Preference Center**

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**Lugano**

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**Compact Center**

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