

# An overview of your insurance

This overview contains information on the legal form of Sanitas and the content of the insurance contracts pursuant to the Swiss Federal Act on Insurance Policies (Art. 3 VVG/IPA).

## Insurer

The insurance carrier for insurance plans pursuant to the Swiss Federal Act on Insurance Policies (VVG/IPA) is Sanitas Privatversicherungen AG. Sanitas Privatversicherungen AG has authorised Sanitas Grundversicherungen AG (the company that operates mandatory basic insurance plans pursuant to the KVG/HIA) to take any action in its name and for its account. Both companies are Swiss joint-stock companies (Aktiengesellschaften) belonging to the Sanitas health insurance foundation.

## Insured risks

The insurance covers the economic consequences of illness, maternity and accidents.

## Scope of insurance

Insurance cover can be determined individually. The range of products on offer includes insurance covering the costs of medical care (medical treatment, hospitalisation and spa treatments, drugs and medication), loss of earnings (daily benefits, death or disability benefits) and other costs resulting from illness and accident (medically prescribed therapies, home help, transport and rescue costs, etc.). The individual insurance cover is determined by the agreed benefits or policy, the cost share according to the insurance application and the terms of insurance. The details of the insurance cover (e.g. benefit exclusions) are specified in the terms of insurance.

## Premiums

The premiums due from commencement of insurance and the method of payment are set out in the insurance application. The premium tariff can vary depending on age, sex and place of residence.

## Duties of the insured

Insureds are obliged to report an insured event promptly and to keep the consequences to a minimum (i.e. they have a statutory duty to minimise or mitigate loss). In particular they must seek appropriate medical treatment in the event of illness or accident, follow instructions from doctors and medical personnel, and provide the information requested or authorise the relevant parties to obtain such information.

Insureds have a duty to inform the insurance carrier of all facts pertaining to the insurance contract (e.g. changes of address) or required when claiming insured benefits (e.g. reporting accidents or applying for a commitment to cover costs before hospitalisation or spa treatments).

Sanitas must be notified immediately of changes in material facts during the term of insurance that lead to a significant increase in risk.

This list contains only the most important duties. Insureds have further duties on the basis of the terms of insurance and the VVG/IPA.

## Term and end of insurance contract

The contract runs for an indefinite period of time, unless an insured person transfers their legal domicile abroad or reaches an agreed scheme termination age, a maximum benefit period or benefit amount. The insurance contract can be terminated by the insured under the following conditions:

- With effect from the end of a calendar year, subject to 1 month's notice
- Within two weeks of becoming aware of payment of a claim by Sanitas
- If the premium tariff changes or a premium changes as a result of a switch to another age group; possible until the day before the change in premium takes effect

Sanitas waives its right to terminate the contract in the event of a claim, but may withdraw from the contract in accordance with the statutory provisions (Art. 21 VVG/IPA) if the insured person or policyholder commits or attempts to commit insurance fraud or fails to pay premiums and/or cost shares.

Sanitas may terminate the contract if illnesses or accident-related conditions which existed at the time the insurance was taken out are incorrectly communicated or concealed. In this case, the insurance cover ends at the end of the month in which the policyholder receives written termination of insurance. Benefits paid for illnesses or consequences of accidents that were incorrectly communicated or concealed will be claimed back.

Insurance cover commences on the date specified in the policy or in the letter of acceptance and expires on the day on which the cancellation of the contract becomes effective.

This list contains only the most important termination options. Other possibilities for terminating the contract are specified in the relevant terms of insurance and the VVG/IPA.

## Data processing

Sanitas treats personal data in its databases in accordance with the relevant legal and contractual provisions; in particular it uses such data to assess risks, administer the insurance contract and set the premium. The company also uses data for marketing purposes and statistical evaluation. Personal data will not be passed on to third parties outside Sanitas. This excludes cases where the law allows the data to be forwarded (e.g. to outsourcing partners) or where the insured person has given their consent. Data is stored in either physical or electronic form and is destroyed or erased once the statutory period for retaining records has elapsed.