



Supplementary insurance

# Family

## Family-friendly supplementary insurance

### Three good reasons for choosing Family



Family-friendly cover:  
Benefit account\* for  
orthodontics, transport  
costs, rooming-in, preven-  
tive care, alternative  
medicine, etc.



CHF 50 loyalty bonus  
per child and year



Premium waived from  
third child insured

\* Flexible benefits: The benefit account gives you maximum flexibility. You specify the amount of the annual benefit account individually for each family member: CHF 10,000, CHF 25,000 or CHF 50,000. The benefit account is used to pay benefits not covered or only partially covered under basic insurance.

**sanitas**

The Family plan provides cover for the thing that's most precious to you as parents: your family's health. It also helps ease the financial burden by offering an individual benefit account for each family member and generous loyalty bonuses.

## Overview of benefits

Benefits	Basic insurance All models	For families Family
<b>Treatment</b>		
EU/EFTA (in emergencies)	Treatment as per bilateral agreements on free movement of persons	90%, max. 180 days, for treatment outside the scope of bilateral agreements
Other countries (in emergencies)	Up to max. of double the costs paid under the tariff for the place of residence or place of work	90%, max. 180 days
<b>Alternative and complementary medicine</b>	Treatment by doctor with a certificate of competence in the relevant discipline: acupuncture, anthroposophical medicine, medicines prescribed by Traditional Chinese Medicine (TCM), homeopathy, phytotherapy	80% of costs from benefit account for recognised therapy methods as per the list (see limitations for individual methods, e.g. massages)
<b>Glasses/contact lenses</b>		
Up to age 18	CHF 180	CHF 200
Age 19 and over	–	CHF 300 every 3 years
<b>Home help</b> During hospitalisation of a child or the parent who runs the household	–	CHF 50 per day, max. CHF 2,500
<b>Medical aids</b>	Medical aids as per list of aids and equipment	80%, max. CHF 500, towards therapeutic medical aids
<b>Cosmetic procedures</b>	–	80% of costs from benefit account for breast surgery, scar correction and operations to correct protruding ears
<b>Medication/drugs</b>	Medication/drugs on the list of medicines and list of pharmaceutical specialties	90% towards uninsured drugs
<b>Preventive care and health promotion</b>	Preventive measures, e.g. well-child check-ups, gynaecological check-ups (every 3 years), specific vaccinations	80% of costs from benefit account, e.g. vaccinations, medical check-ups, gynaecological check-ups (interim years), stop smoking treatment; courses and fitness centre as per list, max. CHF 200
<b>Maternity</b>	Check-ups by doctors or midwives, CHF 150 for antenatal course, breastfeeding advice	80% of costs from benefit account, e.g. antenatal and postnatal exercise classes, additional ultrasound scan, milk substitute
<b>Psychotherapy</b>	Treatment by doctors	80%, max. CHF 1,000 towards non-medical psychotherapy
<b>Rooming-in</b>	–	80% of costs from benefit account towards accommodation costs for people accompanying infants undergoing inpatient treatment
<b>Transport and rescue</b>		
Transport	50%, max. CHF 500	80%
Rescue	50%, max. CHF 5,000	–
Costs of travel during radiotherapy, chemotherapy or haemodialysis	–	80% of actual costs (max. costs for public transport in 2nd class)
<b>Dental treatment<sup>1</sup></b>	Costs of treatment provided by dentists	–
Dental damage resulting from an accident	Costs of treatment provided by dentists	–
Orthodontics (up to age 18)	–	80% of costs from benefit account
Removal of wisdom teeth (outside KVG/HIA compulsory benefits)	–	80% of costs from benefit account
<b>Premium exemption</b>		
With multiple children	–	From the 3rd child insured
In the event of death/disability of an insured parent	–	Children up to age 18 (KVG/HIA and all supplementary insurance plans)
<b>Bonus/loyalty bonus</b>	–	CHF 50 loyalty bonus per year for children up to age 18 if insured under basic insurance and Family

These figures are for maximum benefits and, unless specified otherwise, are valid for each calendar year. Benefits are granted only in accordance with the Swiss Federal Health Insurance Act (KVG/HIA) and the corresponding ordinances, and the general terms of insurance and applicable supplementary terms issued by Sanitas.