

Addition to the supplementary insurance plans' terms

Diversa Basis, Diversa Comfort, Diversa Comfort Sanacare

Addition to the supplementary terms (ST)

July 2022

New regulation for non-medical psychotherapy

The Diversa supplementary insurance plans cover, among other things, costs for non-medical psychotherapy (section 10 or 12 of the supplementary terms). Non-medical psychotherapy is provided by therapists who are not qualified doctors. In future, the requirements for costs to be covered are changing due to a new legal regulation.

What is changing?

As of 1 July 2022, accredited non-medical psychotherapists can bill their services under mandatory basic insurance directly with health insurers.

What does this mean for you?

The changes mean that you have the following options for psychotherapy:

- If your therapist does not seek accreditation for mandatory basic insurance, your treatment will be billed as usual under supplementary insurance. Previously, therapists had to be recognised by the association of Swiss health insurers (santésuisse). This no longer applies with regard to cost coverage under supplementary insurance.
- If your therapist seeks accreditation for mandatory basic insurance, the treatment will now be settled automatically under basic insurance. In this case, you will pay a share of the costs as normal through your deductible and copayment.

Remember that in both cases a medical prescription is required for Sanitas to cover or contribute to the costs. As of 1 July 2022, please check with your therapist whether they will seek accreditation and how their services will be billed.