

SUPPLEMENTARY TERMS

# Dental Basic

**December 2019  
edition**  
2019 version

**sanitas**

## 1 Purpose and basis

Dental Basic covers the costs of outpatient and inpatient dental treatment in accordance with the following provisions. The insurance pays costs that exceed the benefits paid under mandatory basic health insurance pursuant to KVG/HIA and other social insurance pursuant to point 2 of the general terms of insurance, and in excess of other supplementary insurance plans held with Sanitas.

The basis of these supplementary terms is the general terms of insurance for supplementary insurance plans pursuant to VVG/IPA.

## 2 Geographic coverage

The insurance applies to persons resident in Switzerland. Benefits can be drawn in Germany, Austria, France, Italy and Liechtenstein provided that the treatment is provided by Sanitas-accredited healthcare providers in these countries. This does not apply to emergency treatment.

## 3 Insured events

The insurance covers illness and accident that occur during the term of contract.

## 4 Benefits

### 4.1 Preventive treatments

A maximum of CHF 100 is paid per calendar year towards preventive treatments (routine check-up, dental hygiene) provided by a dentist or a certified dental hygienist. Benefits for preventive treatments are deducted from the maximum insured amount.

### 4.2 Treatments

The insurance covers 80% of the costs of the following outpatient and inpatient dental treatments, including medicines required for the dental treatment.

### Dental Basic

Up to a maximum of CHF 2,000 per calendar year for all benefits together

---

#### Restorative dental treatments

(composite fillings, root canal treatment)

---

#### Extraction (removal) of wisdom teeth

(including surgery)

---

#### Other restorative dental treatments

(inlays, e.g. ceramic or gold fillings)

---

#### Veneers

---

#### Periodontal treatments

---

#### Dental prosthetic work

(bridges, crowns, pins, etc.)

---

#### Preventive treatments

(routine check-up, dental hygiene, no cost share for policyholder)

---

Treatments provided must be detailed in itemised invoices, with treatments necessary as the result of an accident specially marked.

Sanitas covers inpatient treatment, provided that Sanitas has issued a commitment to cover costs before treatment commences.

### 4.3 Cost share & deductible

The policyholder pays a deductible of CHF 250 per calendar year for all treatments resulting from illness and accident. The date of treatment applies.

For benefits provided in accordance with section 4.2, Sanitas covers 80% of the costs in excess of the deductible, up to the maximum amount specified. No cost share or deductible is applied for preventive treatment in accordance with section 4.1.

### 4.4 Mid-year commencement of insurance

If coverage commences part way through a calendar year, the maximum entitlement to benefits is calculated on a pro rata basis according to the number of months insured.

## 5 Waiting period

There is no waiting period for dental treatment necessitated by accident or for preventive treatment. The following waiting periods apply for other treatments:

- 6 months for restorative dental treatment, periodontal treatment and wisdom tooth extraction
- 12 months for dental prosthetic work (bridges, crowns, pins), inlays and veneers