

SUPPLEMENTARY TERM

# Hospital Comfort

Supplementary insurance  
for the semiprivate ward  
of any acute hospital in Switzerland

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edition  
2018 version

**sanitas**



## Purpose and basis

Hospital Comfort pays the additional costs of inpatient hospitalisation and treatment in the semiprivate ward of acute hospitals in Switzerland. Further benefits are detailed in these supplementary terms. The insurance pays costs that exceed the benefits paid under mandatory basic health insurance pursuant to the Swiss Federal Health Insurance Act (KVG/LAMal) and other social insurance plans pursuant to point 2 of the general terms of insurance.

Cover for the risk of accident can be included.

Services in the event of illness and accident abroad are covered via Sanitas Assistance. The insured can use these services even if the risk of accident is not covered. The appended terms are an integral part of these supplementary terms.

The basis of these supplementary terms is the January 2004 edition of the general terms of insurance for supplementary insurance plans pursuant to the Swiss Federal Act on Insurance Contracts (VVG/LCA).

## Benefits

### 1 Definitions

- 1 Acute hospitals are defined as treatment facilities and clinics that are directed and overseen by medical doctors and admit only persons who have had an accident or have fallen acutely ill. For the present purposes, acute hospitals also include maternity, psychiatric and rehabilitation clinics.
- 2 Health spas, old-people's homes, nursing homes, chronic care facilities and other facilities not intended for acute care are not defined as acute hospitals.
- 3 Inpatient treatment is defined as a stay in an acute hospital under inpatient conditions where a bed in the inpatient ward is occupied for at least one night.
- 4 Acute treatment is defined as treatment whereby an improvement in the person's state of health can be expected.

### 2 Hospitalisation in Switzerland

- 1 Covers the cost of accommodation, nursing care and treatment for inpatient acute care in a semiprivate ward of any acute hospital in Switzerland.
- 2 In the event of hospitalisation in the private ward, the costs that would have been incurred for hospitalisation in the semiprivate ward will be paid. To pay benefits, Sanitas requires an invoice from the hospital for the semiprivate ward.
- 3 In the event of hospitalisation in the semiprivate ward of acute hospitals specified on a separate Sanitas list, the insurance pays only 75% of the total costs not covered by mandatory basic health insurance pursuant to the Swiss Federal Health Insurance Act (KVG/LAMal). The list is available for inspection at Sanitas, or can be furnished on request.

### 3 Emergency hospitalisation outside Switzerland

In the event of emergency acute inpatient treatment abroad, accommodation, nursing care and treatment costs in an acute hospital will be covered for a maximum of 180 days, but only for as long as it is neither possible nor appropriate for medical reasons for the insured to be transported home.

### 4 Psychiatric clinics

- 1 The costs of acute inpatient treatment in a psychiatric clinic or special psychiatric ward will be paid in accordance with point 2 for a period of 180 days.
- 2 Hospitalisation in psychiatric clinics abroad within the scope of point 3 is included in the benefit period.

## 5 Maternity facilities

The costs of accommodation, nursing care and treatment will be covered for a postnatal stay in an accredited birth centre. A list can be furnished by Sanitas on request.

## 6 Benefits for newborn infants

Provided the child is hospitalised with its mother, the costs of hospitalisation for a healthy infant will be paid from the mother's insurance coverage.

## 7 Travel, transport, rescue and search costs

In total, a maximum of CHF 30,000 will be paid per calendar year for:

- The cost of travel in connection with radiotherapy, chemotherapy or haemodialysis conducted outside the home. The costs paid will not exceed the costs of public transport (travelling first class).
- Emergency transport to the nearest doctor or to the nearest hospital able to deliver appropriate treatment, and ambulances required for transport on medical grounds.
- Rescue and search operations for persons who have had an accident or have fallen acutely ill.

## 8 Obligations and qualifications for benefits

- 1 The benefits insured in the event of hospitalisation will be paid provided that acute hospital care is medically indicated.
- 2 Sanitas must be notified of admission to hospital immediately, but within six days at the latest. If a commitment to cover costs is required, Sanitas must be notified two weeks before admission.

## 9 Benefit exclusions

In addition to the benefit exclusions specified in point 7 of the general terms of insurance, no benefits will be paid for treatments (e.g. organ transplants) for which the SVK (Schweizerischer Verband für Gemeinschaftsausgaben der Krankenversicherer) has agreed per case, all-inclusive payment arrangements for coverage by mandatory KVG/LAMal insurance.

## Miscellaneous

### 10 Step-by-step no-claims bonus

#### 10.1 General

- 1 If an insured has no benefits paid out during a twelve-month observation period, Sanitas grants them a discount on their premium for the following calendar year.
- 2 The discount applies to the gross premium. If an elective deductible has been agreed, the discount applies to the net premium (i.e. after deduction of the discount for the chosen annual deductible).
- 3 An observation period runs from 1 September of one year to 31 August of the following year. Benefits paid out during this observation period apply for the purposes of the no-claims bonus. Discounts are granted as per the date of the Sanitas claims settlement.
- 4 If insurance commences in the period from 1 January to 1 August, the first observation period runs from commencement of insurance until 31 August of the same year.
- 5 If insurance commences in the period from 1 September to 1 December, the first observation period runs from commencement of insurance until 31 August of the following year.
- 6 If the insured transfers to a plan which, according to the applicable supplementary terms, also offers a Step-by-step no-claims bonus or other no-claims bonus, the existing bonus bracket will be transferred.

#### 10.2 Premium discounts and bonus brackets

- 1 Starting from a bonus bracket of 0, the maximum percentage discount of 24% can be achieved in the ninth calendar year at the earliest.

Bonus bracket	Calendar year	Discount	Premium as % of gross premium
0	1	0	100
1	2	3	97
2	3	6	94
3	4	9	91
4	5	12	88
5	6	15	85
6	7	18	82
7	8	21	79
8	9	24	76
9	10	24	76
10	11	24	76
11	12 + following	24	76

- 2 Persons taking out a new insurance plan with the Step-by-step no-claims bonus may be granted a bonus bracket higher than 0.

### 10.3 Reduction of premium discount

- 1 If benefits are paid during an observation period, the premium discount for the following calendar year will be reduced by 3 brackets. Reductions can be made until bracket 0 has been reached.
- 2 Reductions will also be affected for products offered jointly with a partner company, even if benefits are only paid out by the partner company.
- 3 If the insured repays claims paid out by Sanitas by the end of the current calendar year, their bonus bracket for the following calendar year will be amended accordingly.

### 11 Elective deductible

- 1 If the insured chooses an elective deductible, the amount of the chosen deductible will be applied to the total benefits for a given calendar year.
- 2 If insurance commences from 1 January up to and including 1 June, the full annual deductible will be applied; if insurance commences from 1 July up to and including 1 December, half the annual deductible will be applied.
- 3 If a treatment continues for more than ten days beyond the end of the year, the annual deductible must be paid again for the new year.

## Terms of Sanitas Assistance

### 1 What is Sanitas Assistance?

Sanitas Assistance is a service provided by the global emergency rescue organisation Europ Assistance on behalf of Sanitas. The service includes assistance, advice and transport in the event of illness or accident abroad.

### 2 What services are available?

The following services are available to insured persons:

- 24-hour telephone service: Sanitas Assistance is available around the clock, seven days a week. Advice, provided in different languages, includes brokering on-the-spot assistance.
- Worldwide care network: specialist medical care and transport teams provide on-the-spot assistance, and if this is not possible arrange repatriation.

### 3 Who is responsible for the benefits and services offered under Sanitas Assistance?

- 1 Organisational services relating to Sanitas Assistance are managed by Europ Assistance on behalf of Sanitas.
- 2 The costs of services organised by Sanitas Assistance as per point 5 are paid by Europ Assistance on behalf of Sanitas if this is mentioned expressly. Other costs are paid by Sanitas within the scope of the coverage applicable to the person in question.

### 4 When must Sanitas Assistance be contacted?

- 1 The Sanitas Assistance telephone service is always the first point of contact in the event of illness or accident abroad. The telephone service must be contacted if benefits as per point 5 below are to be claimed.
- 2 The telephone number is specified on the Sanitas insurance card.

### 5 What services does Sanitas Assistance provide?

- 1 Before travel, Sanitas Assistance provides information on entry and inoculation requirements for the country of destination. All other services are provided during holiday or business travel abroad.
- 2 Sanitas Assistance provides the following services in the event that the insured falls acutely ill or has an accident:
  - Organising medical care and advances for the costs of outpatient and inpatient emergency treatment abroad.
  - Organising and paying for medically necessary transportation, including repatriation (accompanied by a person who is also covered by Sanitas Assistance).
  - Procuring vital drugs and medicines locally, or if necessary by aircraft, and paying the costs of transportation.

- Organising and paying for a person to accompany the insured's children (under age 16) if it is not possible for the insured or an accompanying person to look after them.
  - Notifying dependants (on request)
  - If, on medical grounds, repatriation is not possible within 10 days, organising and paying for travel and hotel accommodation (10 overnight stays at a maximum of CHF 200 per night) for a visitor chosen by the insured or his family.
  - Organising and paying for the repatriation of the deceased (including CHF 800 for the costs of a coffin) and repatriation of accompanying family members who are also covered to their place of residence. Accompanying family members who are not covered by Sanitas Assistance will be granted an advance of CHF 3000 to cover costs
- 3 In the event of the unforeseen hospitalisation or death of a family member at home, Sanitas Assistance will organise and pay for the insured to return home (accompanied by a person who is also covered by Sanitas Assistance) or to travel home and back (without an accompanying person).
- 4 In the event of serious damage to the insured's property through theft, fire, water or natural events, Sanitas Assistance will provide the following services:
- Advising the insured and paying radio callback costs, the additional costs of direct travel home if unavoidable, and any contractual cancellation charges due for hotels or holiday apartments. In addition, if the insured resumes travel immediately afterwards, the costs of transport back to the place at which he interrupted his journey, or at which he would have been if the interruption had not occurred, are paid. A maximum of CHF 1500 will be paid towards costs.
  - Paying additional accommodation costs (10 overnight stays at a maximum of CHF 150 per night) if the insured has to make an unscheduled stopover or extend his stay.
  - Paying additional transport costs, up to a maximum of CHF 1500, if the insured has to change his travel plans.
- 5 If the insured's chosen accommodation becomes unavailable as a result of fire, water or natural events, Sanitas Assistance will advise him and pay additional accommodation costs of up to CHF 1500.
- 6 If strikes or unrest (in which the insured is innocently caught up), quarantine, epidemics or natural events make it impossible to continue travel, Sanitas Assistance provides the following services:
- Advising the insured and paying the additional costs of direct travel home if unavoidable, and any contractual cancellation charges due for hotels or holiday apartments, up to a maximum of CHF 1500.
  - Paying additional accommodation costs (10 overnight stays at a maximum of CHF 150 per night) if the insured has to make an unscheduled stopover or extend his stay.
  - Paying additional transport costs, up to a maximum of CHF 1500, if the insured has to change his travel plans.
- 6 For how long does Sanitas Assistance provide these services?**  
Sanitas Assistance is valid during the time in which the person in question is covered under Hospital Comfort supplementary insurance. It is valid for travel lasting up to a maximum of 12 months.
- 7 What restrictions apply?**
- 1 Sanitas Assistance does not cover the following:
- The costs of services initiated or paid for by an insured without the prior consent of Sanitas Assistance
  - Incidents occurring at races or test runs involving motor vehicles
  - The consequences of taking non-prescribed drugs or medicines, narcotics or alcohol, and the consequences of suicide attempts.
  - Minor illnesses and injuries
  - Relapse of an illness that broke out or an accident that occurred before travel commenced, or illnesses that had not been cured before travel commenced
  - Costs resulting from pregnancy, apart from major, unforeseeable complications up to the 27th week of pregnancy
  - The consequences of intentional and malicious acts
  - Travel incidents that are not explicitly mentioned in these terms, and elective (planned) treatments.
- 2 Sanitas Assistance cannot be made liable for delays in the provision of services or the failure to provide services if circumstances of force majeure that prevent the provision of assistance occur in the country of travel.
- 8 Does the insurance provide worldwide coverage?**  
In principle, Sanitas Assistance provides services worldwide. However, the following countries and regions are currently excluded from cover: Afghanistan, Algeria, Somalia and Western Sahara.
- The same applies to travel in crisis areas and countries in a state of war or civil war. Since the situation in individual countries can change rapidly, it is advisable to clarify cover with Sanitas Assistance before commencing travel as support with preparing travel abroad is an important component of the service provided by Sanitas Assistance.



