
Wincare line

Daily benefits insurance

Supplementary insurance for daily benefits in the event of incapacity for work

Supplementary Terms

January 2017 edition

Insurance carrier: Sanitas Privatversicherungen AG

sanitas

General

1 Content

- 1 Daily benefits insurance provides cover for the economic consequences of incapacity from work resulting from illness, maternity or accidents.
- 2 The insured daily benefits and waiting period are specified in the policy.
- 3 Insurance cover can be taken out for illness, accident or for both. Separate cover can be taken out for daily maternity benefits in accordance with Point 8.

2 Basis

If any matter is not dealt with specifically in these Supplementary Terms, the General Terms of Insurance of the Wincare line for supplementary insurance plans pursuant to the Swiss Federal Act on Insurance Contracts (VVG/LCA) shall apply.

3 Commencement of insurance coverage

Coverage commences on the date specified in the policy or on the acceptance slip.

Definitions

4 Incapacity to work

- 1 Incapacity to work is defined as the complete or partial inability to perform such duties as may reasonably be expected in one's previous profession, trade or area of responsibility as a result of physical, mental or psychological health conditions. If reintegration is not possible, the insured's ability to perform such duties as may reasonably be expected in another profession, trade or area of responsibility will also be taken into account.
- 2 The incapacity to work must be confirmed by a doctor appointed by Sanitas.

Benefits

5 Entitlement to benefits

- 1 The insured person is entitled to daily benefits on the grounds of medically certified full or partial incapacity for work. Entitlement begins 5 days before the first medical treatment at the earliest.
- 2 In the event of partial incapacity to work, the benefits shall be proportional to the incapacity. If the incapacity to work is less than 25 % there shall be no entitlement to benefits.
- 3 If the incapacity to work is only partially due to an insured illness/accident, only the corresponding part of the insured benefits will be paid. This part will be determined by a medical certificate or medical report.

6 Waiting period

- 1 No benefits will be paid during the waiting period. The waiting period starts on commencement of the entitlement of benefits as set out under point 5.1.
- 2 For the purpose of calculating the waiting period, days of partial incapacity of 25% or more are counted as whole days.
- 3 The waiting period is calculated separately for each illness (subject to relapses in accordance with point 9) or each accident.

7 Benefit period

- 1 The insured benefits will be paid per illness/per accident for the number of days specified in the policy. The benefit period is reduced by the waiting period specified in the policy. Entitlement to daily benefits ceases on reaching legal retirement age.
- 2 If reduced daily benefits are paid as a result of partial incapacity to work, days with reduced benefits are counted as whole days for the purpose of calculating the benefit period.
- 3 The insured shall not prevent the reaching of the maximum benefit period by foregoing benefits.

8 Daily maternity benefits

- 1 Cover for birth (daily maternity benefits) can only be taken out as a supplement to illness cover for the same daily benefits amount and waiting period.
- 2 Daily maternity benefits will be paid out for each birth after the sixth month of pregnancy. In the event of a multiple birth, daily maternity benefits will only be paid once.
- 3 The benefit period is reduced by the waiting period specified in the policy.
- 4 During the period in which daily maternity benefits are paid, the insured is not entitled to daily benefits.
- 5 Daily maternity benefits insurance expires at the termination age specified in the policy.

9 Relapse

For the purposes of the benefit period, the recurrence of an illness (relapse) is regarded as a new illness if the insured person was not unfit for work as a result of this illness within the last 12 months.

10 Benefits abroad

- 1 If incapacity to work occurs while abroad, daily benefits are only paid during hospitalisation in the country of residence. No benefits are paid in the event of transfer to or treatment in other countries.
- 2 No benefits are paid if the insured
 - moves abroad during a period of incapacity for work;
 - goes abroad for treatment, care or childbirth

Restrictions on insurance coverage

11 Reduction/exclusion of benefits in the event of incapacity for work

As an addendum to Point 25 of the General Terms of Insurance of the Wincare line for supplementary insurance plans pursuant to the Swiss Federal Act on Insurance Contracts (VVG/LCA), benefits in these supplementary insurance plans can be reduced or excluded.

If on payment of daily benefits for the maximum benefit period the insured still suffers from long-term incapacity to work, the previously insured daily benefits will be adjusted to the remaining capacity to work.

- With a remaining capacity to work of at least 25%, the previously insured daily benefits will be reduced in proportion to the incapacity to work.
- With a remaining capacity to work of less than 25%, the insured daily benefits will be terminated.

Obligation and entitlement

12 Establishment of claims

In amendment of Point 23 of the General Terms of Insurance of the Wincare line for supplementary insurance plans pursuant to VVG/LCA, the insured person must notify Sanitas of the incapacity to work and provide a medical certificate within 5 days. If notification is late without a valid reason, entitlement to benefits begins on receipt of notification at the earliest.

