

Supplementary terms  
Sanitas Corporate Private Care

# Corporate Accident

Supplementary insurance  
for inpatient treatment

January 2023 edition  
Amended 2023

Insurance carrier:  
Sanitas Privatversicherungen AG based in Zurich

## Purpose and basis

The Corporate Accident supplementary accident insurance covers the economic consequences of accident in accordance with the provisions below. The insurance pays costs that exceed the benefits paid under statutory federal accident insurance (UVG), mandatory basic health insurance pursuant to the Swiss Federal Health Insurance Act (KVG/HIA), federal disability insurance (IV) and federal military insurance (MV).

These supplementary terms are based on the currently valid Sanitas Corporate Private Care general terms of insurance for the s-care supplementary insurance plans to VVG/IPA (2023 edition) or the general terms of insurance for the p-care supplementary insurance plans to VVG/IPA (2023 edition).

## 1 Joint provisions

### 1.1 Definitions

- 1 Acute hospitals are defined as treatment facilities and clinics that are directed and overseen by medical doctors and admit only persons suffering from acute illnesses or accidents. For the present purposes, acute hospitals also include 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 hospital stays are defined as stays
  - of at least 24 hours
  - of less than 24 hours, where a bed is occupied during one night
  - in hospital when transferred to another hospital
  - at the birth centre when transferred to another hospital
  - in the event of death.
- 4 Acute treatment is defined as treatment whereby an improvement in the person's state of health can be expected.

### 1.2 Damage to property

- 1 Damage to objects that replace a body part or a bodily function is generally also insured. For glasses, hearing aids and dentures, a claim for compensation exists only if there is a physical injury requiring treatment.
- 2 Also insured, up to a maximum amount of CHF 2,000 per claim, is damage to property that the insured person is carrying on or with them (items of clothing, goods, etc.), insofar as the damage is related to an insured accident.

### 1.3 Relapses and late effects of accidents

In the event of relapses and late effects of previous accidents for which there is no longer any obligation to pay benefits under the insurance at the time, the insured benefits will be paid which accrued within 5 years of the date on which the accident occurred. If the insured person is still entitled to compensation under statutory federal accident insurance pursuant to UVG, mandatory basic health insurance pursuant to KVG/HIA, federal disability insurance (IV) or federal military insurance (MV) on expiry of this period, Sanitas will pay benefits up to a maximum amount of CHF 20,000.

## 1.4 Entitlement to benefits and obligations

- 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 4 days at the latest. If a commitment to cover costs is required, Sanitas must be notified 2 weeks before admission.
- 3 Benefits for spa treatments will be paid only if:
  - the spa treatments are medically necessary and have been prescribed by a doctor accredited in Switzerland as part of medical treatment
  - Sanitas receives the prescription for the spa treatment 2 weeks before commencement
  - outpatient treatment is inappropriate and unlikely to be effective and the spa treatment involves therapeutic measures.

## 1.5 Benefit exclusions

In addition to the benefit exclusions specified in the general terms of insurance, no benefits will be paid from this supplementary insurance plan for benefit reductions from other insurance policies.

## 2 Corporate Accident Extra

### 2.1 Hospitalisation in Switzerland

- 1 The insurance covers the accommodation, nursing care and treatment costs of acute inpatient care in a 2-bed room on the semiprivate ward of any acute hospital in Switzerland.
- 2 In the event of hospitalisation in a single room on a private ward, 90% of treatment costs and 75% of accommodation and nursing care costs will be paid.

### 2.2 Emergency hospitalisation outside Switzerland

In the event of emergency acute treatment abroad, accommodation, nursing care and treatment costs in an acute hospital (single room on the private ward) are 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.

### 2.3 Hospitalisation outside Switzerland for elective treatment

For elective treatment abroad, a request for a commitment to cover costs must be submitted to Sanitas. The same applies if further medical measures are planned abroad after treatment has already taken place. In the event of planned acute inpatient treatments abroad, a maximum of CHF 1,000 per day will be paid towards accommodation, nursing care and treatment costs for one or more accidents during a maximum of 90 days in hospital.

## 2.4 Psychiatric clinics

- 1 The costs of acute inpatient treatment (as a direct result of an insured accident) in a psychiatric clinic or special psychiatric ward are paid in accordance with point 2.1 for a maximum of 120 days.
- 2 From the 121st day, the treatment costs and a maximum of CHF 100 per day will be paid towards the costs of accommodation and nursing care. At AHV/AVS retirement age, these benefits will continue to be paid for a maximum of 720 days within a period of 900 days.
- 3 In psychiatric clinics or on special psychiatric wards without a cantonal mandate, costs that would be covered under mandatory basic insurance in a hospital with a cantonal mandate are paid from the 121st day for a total of 600 days in addition to the benefits stipulated in para 2.
- 4 Hospitalisation in psychiatric clinics abroad within the scope of points 2.2 and 2.3 is included in the benefit period.

## 2.5 Exceptional out-of-pocket expenses

A maximum of CHF 100 per hospital stay will be paid for exceptional out-of-pocket expenses incurred directly in connection with inpatient hospitalisation (taxi fares to and from hospital, telephone calls, etc.), provided that receipts are supplied.

## 2.6 Nursing care at home

- 1 On the basis of detailed date-referenced invoices, the following benefits will be paid towards the costs of nursing care at home for a maximum of 90 days per calendar year if this is necessary on medical grounds and prescribed by a doctor:
  - Up to a maximum of CHF 50 per day towards the cost of care at home by qualified nursing professionals
  - Up to a maximum of CHF 50 per day towards the cost of care at home by other people who can prove loss of earnings due to provision of care. This also includes relatives and people who live in the same household as the insured
- 2 In total, a maximum of CHF 5,000 per calendar year will be paid towards the costs of care at home.

## 2.7 Home help

- 1 On the basis of detailed date-referenced invoices, CHF 25 per hour will be paid towards home help provided by a person not living in the same household if necessary on medical grounds and prescribed by a doctor. The insured person running the household is entitled to this benefit immediately after a stay in hospital or during outpatient treatment if hospitalisation can be avoided.
- 2 A maximum of CHF 750 per calendar year is paid towards the cost of home help.

## 2.8 Spa treatments

- 1 A maximum of CHF 90 per day for a maximum of 21 days per calendar year is paid towards inpatient follow-up and spa therapy.
- 2 Entitlement to benefits and obligations as set out in point 1.4 apply. Sanitas has the right to request an examination by its company-appointed medical doctor before spa treatments may be undertaken.

## 2.9 Transportation, search and rescue costs

In total, a maximum of CHF 20,000 will be paid per calendar year for:

- Emergency transport to the nearest doctor or to the nearest hospital able to deliver appropriate treatment, and ambulances required for transport on medical grounds.
- Search and rescue operations for insureds who have had an accident

# 3 Corporate Accident Top

## 3.1 Hospitalisation in Switzerland

The insurance covers the accommodation, nursing care and treatment costs of acute inpatient care in a single room on a private ward of any acute hospital in Switzerland.

## 3.2 Emergency hospitalisation outside Switzerland

In the event of emergency acute inpatient treatment abroad, accommodation, nursing care and treatment costs in an acute hospital (single room on the private ward) are 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.

## 3.3 Hospitalisation outside Switzerland for elective treatment

For elective acute inpatient treatment abroad, a request for a commitment to cover costs must be submitted to Sanitas. The same applies if further medical measures are planned abroad after treatment has already taken place. In the event of planned acute inpatient treatments abroad, a maximum of CHF 1,500 per day will be paid towards accommodation, nursing care and treatment costs during a maximum of 90 days in hospital.

## 3.4 Psychiatric clinics

- 1 The costs of acute inpatient treatment (as a direct result of an insured accident) in a psychiatric clinic or special psychiatric ward are paid in accordance with point 3.1 for a maximum of 180 days.
- 2 From the 181st day, the treatment costs and a maximum of CHF 150 per day towards the costs of accommodation and nursing care will be paid. At AHV/AVS retirement age, these benefits will continue to be paid for a maximum of 720 days within a period of 900 days.
- 3 In psychiatric clinics or on special psychiatric wards without a cantonal mandate, costs that would be covered under mandatory basic insurance in a hospital with a cantonal mandate are paid from the 181st day for a total of 540 days in addition to the benefits stipulated in para 2.
- 4 Hospitalisation in psychiatric clinics abroad within the scope of points 3.2 and 3.3 is included in the benefit period.

## 3.5 Exceptional out-of-pocket expenses

A maximum of CHF 200 per hospital stay will be paid for exceptional out-of-pocket expenses incurred directly in connection with inpatient hospitalisation (taxi fares to and from hospital, telephone calls, etc.), provided that receipts are supplied.

### **3.6 Nursing care at home**

- 1 On the basis of detailed date-referenced invoices, the following benefits will be paid towards the costs of nursing care at home for a maximum of 90 days per calendar year if this is necessary on medical grounds and prescribed by a doctor:
  - Up to a maximum of CHF 70 per day towards the cost of care at home by qualified nursing professionals
  - Up to a maximum of CHF 70 per day towards the cost of care at home by other people who can prove loss of earnings due to provision of care. This also includes relatives and people who live in the same household as the insured
- 2 In total, a maximum of CHF 7,000 per calendar year will be paid towards the costs of care at home.

### **3.7 Home help**

- 1 On the basis of detailed date-referenced invoices, CHF 25 per hour will be paid towards home help provided by a person not living in the same household if necessary on medical grounds and prescribed by a doctor. The insured person running the household is entitled to this benefit immediately after a stay in hospital or during outpatient treatment if hospitalisation can be avoided.
- 2 A maximum of CHF 1,000 per calendar year is paid towards the cost of home help.

### **3.8 Spa treatments**

- 1 A maximum of CHF 190 per day for a maximum of 21 days per calendar year is paid towards inpatient follow-up and spa therapy.
- 2 Entitlement to benefits and obligations as set out in point 1.4 apply. Sanitas has the right to request an examination by its company-appointed medical doctor before the spa treatments may be undertaken.

### **3.9 Transportation, search and rescue costs**

In total, a maximum of CHF 20,000 will be paid per calendar year for:

- Emergency transport to the nearest doctor or to the nearest hospital able to deliver appropriate treatment, and ambulances required for transport on medical grounds.
- Search and rescue operations for insureds who have had an accident