

Table of Benefits Corporate Group Schemes

The following plans are only available for corporate groups of three employees or more. These plans represent supplemental cover to the mandatory Swiss Health Insurance.

Treatments and costs marked with an asterisk (*) require pre-approval through submission of a Treatment Guarantee Form. Details of our pre-approval process can also be found in our Benefit Guide. Benefits marked with a \bigcirc are covered in full, subject to the Maximum plan benefit.

Core Plans

Core Plan Benefits	Suisse Premier	Suisse Club
Maximum plan benefit	CHF 9,750,000	CHF 1,462,500
In-patient benefits		
Hospital accommodation*	Private room	Semi-private room
Intensive care*	\otimes	\otimes
Prescription drugs and materials* (in-patient and day-care treatment only) (Prescription drugs are those which legally can only be purchased when you have a doctor's prescription)	\otimes	\otimes
Surgical fees, including anaesthesia and theatre charges*	\otimes	\odot
Physician and therapist fees* (in-patient and day-care treatment only)	\otimes	\odot
Surgical appliances and materials*	\otimes	\otimes
Diagnostic tests* (in-patient and day-care treatment only)	\otimes	\otimes
Organ transplant*	\otimes	\otimes
Psychiatry and psychotherapy* (in-patient and day-care treatment only) (10 month waiting period applies)	\otimes	CHF 13,780
Accommodation costs for one parent staying in hospital with an insured child under 18*	\otimes	\otimes
Emergency in-patient dental treatment	\odot	\odot
Other benefits		
Day-care treatment*	\bigcirc	\odot
Kidney dialysis*	\oslash	\oslash

Core Plan Benefits	Suisse Premier	Suisse Club
Out-patient surgery*	\oslash	Ø
Nursing at home or in a convalescent home* (immediately after or instead of hospitalisation)	CHF 5,525	CHF 3,680
Rehabilitation treatment (in-patient, day-care and out-patient treatment; must commence within 14 days of	CHF 5,750	CHF 3,900
discharge after the acute medical and/or surgical treatment ceases) Local ambulance	\otimes	$\boldsymbol{\varnothing}$
Emergency treatment outside area of cover		
(for trips of a maximum period of six weeks)	Max. 42 days	Max. 42 days
Medical evacuation* • Where necessary treatment is not available locally, we will evacuate the insured		
person to the nearest appropriate medical centre*	igotimes	igotimes
• Where ongoing treatment is required, we will cover hotel accommodation costs*	\odot	\odot
Evacuation in the event of unavailability of adequately screened blood*	\otimes	\odot
• If medical necessity prevents an immediate return trip following discharge from an in-patient episode of care, we will cover hotel accommodation costs*	Max. 7 days	Max. 7 days
Expenses for one person accompanying an evacuated person*	CHF 3,900	CHF 3,900
Travel costs of insured family members in the event of an evacuation*	CHF 2,600 per event	CHF 2,600 per event
Repatriation of mortal remains*	CHF 13,000	CHF 13,000
Travel costs of insured family members in the event of the repatriation of mortal remains*	CHF 2,600 per event	CHF 2,600 per event
CT and MRI scans (in-patient and out-patient treatment)	\otimes	\otimes
PET* and CT-PET* scans (in-patient and out-patient treatment)	\otimes	\odot
Oncology* (in-patient, day-care and out-patient treatment)	\otimes	\odot
Purchase of a wig, prosthetic bra or other external prosthetic device for cosmetic purposes	CHF 260	CHF 260
Routine maternity* (in-patient and out-patient treatment) (10 month waiting period applies)	\otimes	\odot
Complications of pregnancy and childbirth* (10 month waiting period applies)	\otimes	\otimes
Home delivery	CHF 1,300	\otimes
In-patient cash benefit (per night) (where treatment has been received free of charge)	CHF 195, max. 25 nights	CHF 195, max. 25 nights
Emergency out-patient treatment (where these benefit amounts are reached, any additional costs may be reimbursed within the terms of any separate Out-patient Plan)	CHF 975	CHF 975
Emergency out-patient dental treatment (where these benefit amounts are reached, any additional costs may be reimbursed within the terms of any separate Dental Plan)	CHF 975	8
Palliative care*	\otimes	\otimes
Long term care*	Max. 90 days per lifetime	Max. 90 days per lifetime

Additional Core Plan Benefits		
Employee Assistance Programme** offers access to a range of 24/7 multilingual support services as follows: Confidential professional counselling (in-person, phone, video and chat) Legal and financial support services Critical incident support Wellness website access	\otimes	\otimes
Travel Security Services** offers 24/7 access to personal security information and advice for all your travel safety queries. This includes: • Emergency Security Assistance Hotline (not a free phone number) • Country intelligence and security advice • Daily security news and travel safety alerts	\otimes	\otimes
Olive** Our Health & Wellness support program includes, for example: • HealthSteps fitness app • Access to wellness resources	\otimes	\otimes
MyHealth Digital Services Manage your cover online with our app or portal anytime, anywhere. Submit and track progress of claims. Access your policy documents, health services, payment details and more.	\otimes	\otimes
Medi24** Talk to a nurse on the phone on a wide range of health topics – available 24/7. (not a free phone number)	\otimes	\otimes

Suisse Club

Suisse Premier

Out-patient Plans

Core Plan Benefits

The following Out-patient Plans can be purchased with any of our Core Plans. They cannot be bought separately.

Out-patient Plan Benefits	Suisse Gold	Suisse Silver
Maximum plan benefit	No limit	CHF 16,575
Medical practitioner fees	\otimes	\otimes
Video consultation services (Service accessible via MyHealth portal or directly via our TeleHealth platform at www.allianzcare.com/telehealthhub)	\otimes	\otimes
Prescription drugs (Prescription drugs are those which legally can only be purchased when you have a doctor's prescription)	\otimes	\otimes
Specialist fees	\otimes	\oslash
Diagnostic tests	\bigcirc	\otimes
Vaccinations	\odot	\bigcirc
Chiropractic treatment, osteopathy, homeopathy, Chinese herbal medicine, acupuncture and podiatry (max. 12 sessions per condition for chiropractic treatment and max. 12 sessions per condition for osteopathic treatment, subject to the benefit limit)	\otimes	\otimes

^{**} Certain services which may be included in your plan are provided by third party providers, such as the Employee Assistance Programme, Travel Security services, HealthSteps app, Second Medical Opinion and tele-medicine services. If included in your plan, these services will show in your Table of Benefits. These services are made available to you subject to your acceptance of the terms and conditions of your policy and the terms and conditions of the third parties. These services may be subject to geographical restrictions. The HealthSteps app does not provide medical or health advice and the wellness resources contained within Olive are for informational purposes only. The HealthSteps app and the wellness resources contained within Olive shouldn't be regarded as a substitute for professional advice (medical, physical or psychological). They are also not a substitute for the diagnosis, treatment, assessment or care that you may need from your own doctor. You understand and agree that the insurer, its reinsurers and administrators are not responsible or liable for any claim, loss or damage, directly or indirectly resulting from your use of any of these third party services.

Out-patient Plan Benefits	Suisse Gold	Suisse Silver
Prescribed physiotherapy (initially limited to 12 sessions per condition; limit also applies to prescribed and non- prescribed physiotherapy sessions, where combined)	⊘	⊘
Non-prescribed physiotherapy	5 visits	5 visits
Prescribed speech therapy, oculomotor therapy and occupational therapy*	\oslash	\oslash
 Health and wellbeing checks including screening for the early detection of illness or disease Checks are limited to: Physical examination Blood tests (full blood count, biochemistry, lipid profile, thyroid function test, liver function test, kidney function test) Cardiovascular examination (physical examination, electrocardiogram, blood pressure) Neurological examination (physical examination) Cancer screening Annual pap smear Mammogram (every two years for women aged 45+, or younger where a family history exists) Prostate screening (yearly for men aged 50+, or younger where a family history exists) Colonoscopy (every five years for members aged 50+, or 40+ where a family history exists) Annual faecal occult blood test Bone densitometry (every five years for women aged 50+) Well child test (for children up to the age of six years - 15 visits) BRCA1 and BRCA2 genetic test (where a direct family history exists; Gold Plan only) 	CHF 1,560	CHF 780
Infertility treatment (18 month waiting period applies)	CHF 15,600 per lifetime	CHF 15,600 per lifetime
Psychiatry and psychotherapy (Referral from doctor required for psychotherapy) (18 month waiting period applies)	30 visits	20 visits
Prescribed medical aids	\otimes	CHF 3,250
Prescribed glasses and contact lenses including eye examination	CHF 260	CHF 234
Dietician fees	4 visits	\otimes

Dental Plans

The following Dental Plans can be purchased with any of the Core Plans. They cannot be bought separately.

Dental Plan Benefits	Suisse Dental 1	Suisse Dental 2
Maximum plan benefit	No limit	CHF 2,665
Dental treatment	100% refund	80% refund
Dental surgery	100% refund	80% refund
Periodontics	80% refund	80% refund
Orthodontic treatment (10 month waiting period applies)	65% refund, up to CHF 6,500	50% refund
Dental prostheses (10 month waiting period applies)		50% refund

Repatriation Plan

The following Repatriation Plan can be purchased with any of the Core Plans. It cannot be bought separately.

Suisse Repatriation Plan Benefits	
Medical repatriation*	
Where the necessary treatment is not available locally, you can choose to be medically repatriated to your home country instead of to the nearest appropriate medical centre. This benefit only applies when your home country is within your area of cover*	\otimes
Where ongoing treatment is required, we will cover hotel accommodation costs*	\odot
Repatriation in the event of unavailability of adequately screened blood*	\bigcirc
If medical necessity prevents an immediate return trip following discharge from an in-patient episode of care, we will cover hotel accommodation costs*	Max. 7 days
Expenses for one person accompanying a repatriated person*	CHF 3,900
Travel costs of insured family members in the event of a repatriation*	CHF 2,600 per event
Travel costs of insured members to be with a family member who is at peril of death or who has died	CHF 1,950

Notes

Area of cover

We offer a range of options in relation to geographical cover. The chosen area of cover will be specified in the Insurance Certificate.

Benefit limits

There are two kinds of benefit limits shown in the Table of Benefits. The maximum plan benefit, which applies to certain plans, is the maximum we will pay for all benefits in total, per member, per Insurance Year, under that particular plan. Some benefits also have a specific benefit limit, for example "Nursing at home or in a convalescent home". Specific benefit limits may be provided on a "per Insurance Year" basis, a "per lifetime" basis or on a "per event" basis, such as per trip, per visit or per pregnancy. In some instances we will pay a percentage of the costs for the specific benefit e.g. "65% refund, up to CHF 6,500". Where a specific benefit limit applies or where "\" appears next to certain benefits, the refund is subject to the maximum plan benefit, if one applies to your plan(s). All limits are per member, per Insurance Year, unless otherwise stated in your Table of Benefits.

Policy terms and conditions

Please note that cover for smaller groups is subject to underwriting i.e. cover may be excluded for pre-existing conditions, or a higher premium rate may apply to reflect the higher risk due to pre-existing medical conditions or additional risk factors. Cover is conditional upon acceptance of your application, which is only confirmed when we issue an Insurance Certificate. This Table of Benefits provides an outline of the cover we provide under each plan. Cover is subject to our policy terms and conditions which can be downloaded from our website.

If you have any queries, please do not hesitate to contact us:

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Helpline

English: + 353 1 630 1301
German: + 353 1 630 1302
French: + 353 1 630 1303
Spanish: + 353 1 630 1304
Italian: + 353 1 630 1305
Portuguese: + 353 1 645 4040
Fax: + 353 1 630 1306

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KPT Krankenkasse AG, Wankdorfallee 3, CH-3000 Bern 22, registered BAG Nr. 376. KPT provides administration services inside Switzerland.

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