


Table of Benefits

Individual Policies




















The following plans are only available for individual members. 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  are covered in full, subject to the Maximum plan benefit.


Core Plans

Core Plan Benefits	Suisse Premier Individual	Suisse Club Individual
Maximum plan benefit	CHF 2,925,000	CHF 1,950,000

In-patient benefits

Hospital accommodation*	Private room	Private room
Intensive care*		
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)		
Surgical fees, including anaesthesia and theatre charges*		
Physician and therapist fees* (in-patient and day-care treatment only)		
Surgical appliances and materials*		
Diagnostic tests* (in-patient and day-care treatment only)		
Organ transplant*		
Psychiatry and psychotherapy* (in-patient and day-care treatment only) (10 month waiting period applies)		CHF 7,800
Accommodation costs for one parent staying in hospital with an insured child under 18*		
Emergency in-patient dental treatment		

Other benefits

Day-care treatment*		
Kidney dialysis*		

Core Plan Benefits	Suisse Premier Individual	Suisse Club Individual
Out-patient surgery*	☑	☑
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 discharge after the acute medical and/or surgical treatment ceases)	CHF 5,750	CHF 3,900
Local ambulance	☑	☑
Emergency treatment outside area of cover (for trips of a maximum period of six weeks)	Max. 42 days	Max. 42 days
Medical evacuation* <ul style="list-style-type: none"> • Where necessary treatment is not available locally, we will evacuate the insured person to the nearest appropriate medical centre* • Where ongoing treatment is required, we will cover hotel accommodation costs* • Evacuation in the event of unavailability of adequately screened blood* • 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)	☑	☑
PET* and CT-PET* scans (in-patient and out-patient treatment)	☑	☑
Oncology* (in-patient, day-care and out-patient treatment) <ul style="list-style-type: none"> • Purchase of a wig, prosthetic bra or other external prosthetic device for cosmetic purposes. 	☑ CHF 260	☑ CHF 260
Preventative surgery* (in-patient and out-patient treatment)	CHF 39,000	CHF 26,000
Complications of pregnancy* (in-patient and out-patient treatment) (10 month waiting period applies)	☑	☑
Laser eye treatment (limited to one treatment per lifetime)	CHF 1,300 per lifetime	CHF 650 per lifetime
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	CHF 650
Palliative care*	☑	☑
Long term care*	Max. 90 days per lifetime	Max. 90 days per lifetime

Core Plan Benefits	Suisse Premier Individual	Suisse Club Individual
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Core Plan Services

Expat Assistance Programme** offers access to a range of 24/7 multilingual support services as follows: <ul style="list-style-type: none"> Confidential professional counselling (in-person, phone, video and chat) Legal and financial support services Critical incident support Wellness website access 	✔	✔
Travel Security Services** offers 24/7 access to personal security information and advice for all your travel safety queries. This includes: <ul style="list-style-type: none"> Emergency Security Assistance Hotline (not a free phone number) Country intelligence and security advice Daily security news and travel safety alerts 	✔	✔
HealthSteps App** Allianz Care's digital fitness app which encourages lifestyle and behavioural changes for a fitter and healthier you.	✔	✔
MyHealth Digital Services <ul style="list-style-type: none"> 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. 	✔	✔
Medi24** Talk to a nurse on the phone on a wide range of health topics – available 24/7. (not a free phone number)	✔	✔

** Certain services which may be included in your plan are provided by third party providers, such as the Expat 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 Plans

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 Individual	Suisse Silver Individual
Maximum plan benefit	No limit	CHF 16,575
Medical practitioner fees	✔	✔
Video consultation services	✔	✔
Prescription drugs (Prescription drugs are those which legally can only be purchased when you have a doctor's prescription)	✔	✔
Specialist fees	✔	✔
Diagnostic tests	✔	✔
Vaccinations	✔	✔
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)	✔	✔
Prescribed physiotherapy (initially limited to 12 sessions per condition; limit also applies to prescribed and non-prescribed physiotherapy sessions, where combined)	✔	✔

Out-patient Plan Benefits	Suisse Gold Individual	Suisse Silver Individual
Non-prescribed physiotherapy	5 visits	5 visits
Prescribed speech therapy, oculomotor therapy and occupational therapy*	☑	☑
Health and wellbeing checks including screening for the early detection of illness or disease Checks are limited to: <ul style="list-style-type: none"> 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 <ul style="list-style-type: none"> 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 Individual Plan only) 	CHF 1,040	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	☑	CHF 3,250
Prescribed glasses and contact lenses including eye examination	CHF 260	CHF 234
Dietician fees	4 visits	☒
Prescribed drugs (must be prescribed by a physician, although a prescription is not legally required for purchase)	CHF 65	☒

Maternity Plans

The Suisse Premier Maternity Plan can only be purchased with the Suisse Premier Individual Core Plan. The Suisse Club Maternity Plan can only be purchased with the Suisse Club Individual Core Plan. Please note that an Out-patient Plan must be selected in conjunction with a Maternity Plan.

Maternity Plan Benefits	Suisse Premier Maternity	Suisse Club Maternity
Routine maternity* (in-patient and out-patient treatment) (10 month waiting period applies)	CHF 9,750, per pregnancy	CHF 6,500, per pregnancy
Complications of childbirth* (in-patient treatment) (10 month waiting period applies)	CHF 19,500, per pregnancy	CHF 13,000, per pregnancy

Dental Plans

Suisse Dental Plan 1 can only be purchased if both the Suisse Premier Individual Core Plan and Suisse Gold Individual Out-patient Plan have been selected. Suisse Dental Plan 2 can be purchased with any of the Core Plans. Neither Dental Plan can 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 Suisse Repatriation Plan can be purchased with any of the Core Plans. It cannot be bought separately.

Suisse Repatriation Plan Benefits	
<p>Medical repatriation*</p> <ul style="list-style-type: none"> 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.* Where ongoing treatment is required, we will cover hotel accommodation costs* Repatriation in the event of unavailability of adequately screened blood* If medical necessity prevents an immediate return trip following discharge from an in-patient episode of care, we will cover hotel accommodation costs* 	<p>☑</p> <p>☑</p> <p>☑</p> <p>Max. 7 days</p>
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 choice of two different geographical areas of 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 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:



Helpline

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www.allianz-partners.com/en_CH/business-areas/care/individuals.html

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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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