

Special Terms and Conditions for PrimaCare Insurance

RF

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Art. 1 Insurance model

PrimaCare insurance is a special form of compulsory health coverage offering a limited choice of healthcare providers within the meaning of Article 41 of the Federal Health Insurance Law (LaMal/KVG) and Articles 99 to 101 of the Ordinance on Health Insurance (OAMal/KVV).

Art. 2 Eligibility

1. PrimaCare insurance may be contracted by any person domiciled in the areas where it is offered by the Insurer.
2. Coverage may be contracted at any time effective on the first day of a month.

Art. 3 Termination

Transfer to another form of insurance and a change of insurer are possible at the end of any calendar year subject to due notice in accordance with the time limits set in Article 7(1) and (2) of LAMal/KVG.

Art. 4 Principle of the insurance

1. PrimaCare insurance is based on the principle of the general practitioner. The general practitioner provides basic treatment, coordinates treatment follow-up and guides the insured where necessary to other providers of medical services.
2. The Insurer covers the cost of the services administered and prescribed or referred by the general practitioner.
3. The insured is free to choose his general practitioner and undertakes, except in emergencies or in the special cases referred to in Article 6 of these regulations, to first call this physician when he requires medical attention.

Art. 5 Obligations of the insured

1. When contracting PrimaCare coverage
The insured is free to choose a general practitioner among the doctors authorised to practice in Switzerland under the LAMal/KVG.

2. When seeking medical attention
 - a. The insured must contact his general practitioner who will take the appropriate therapeutic steps for his health condition.
 - b. If the general practitioner cannot be reached, the insured shall contact his designated replacement, or an emergency service.
3. Before contacting another doctor or healthcare provider
The insured requires the prior consent of his general practitioner before contacting another doctor or healthcare provider (e.g. a physiotherapist).
In that case, the insured shall remit to the Insurer a referral certificate signed by his general practitioner confirming that he prescribed the treatment. The certificate must reach the Insurer within 30 days of the start of treatment.
4. Before inpatient treatment
Except in emergencies (defined in Article 6 below), the general practitioner's prior consent is necessary for any hospitalisation or stays in a semi-hospital or marine cure facility.
5. If the insured intends to change general practitioner
The insured may change general practitioner no more than once every calendar year, or when he moves his place of residence.
The insured shall inform the Insurer of the change within 30 days.

Art. 6 Deviations from the insurance principle

The insured is released from his obligation to first contact his general practitioner in the following cases:

1. In case of emergency:
Emergency means when the insured himself or a third party deems that his condition is life-threatening, or that it requires immediate medical attention. In that case, the insured shall inform his general practitioner within 30 days.
2. During holidays or trips abroad
3. For the following medical services:

- ophthalmology treatment
- gynaecological check-ups and treatment
- pregnancy and childbirth treatment
- paediatric treatment
- treatment follow-up for chronic illnesses
- dental treatment covered by compulsory health insurance.

Art. 7 Non observance of insurance principles

1. If the insured breaches his obligations under Article 5 (items 2 to 5) more than twice in a calendar year, he shall bear the full cost of the treatment carried out.
This restriction does not apply in the cases contemplated in Article 6.
2. In case of repeated infringement of the insurance principles, the Insurer may exclude the insured from PrimaCare coverage with effect at the end of a month, subject to 30 days' notice.
The insured will then be transferred, depending on his level of deductible, to a normal health insurance or a health insurance with an optional deductible.

Art. 8 Premiums

A rebate may be given on PrimaCare insurance coverage compared with normal health insurance or insurance with optional deductible.

Art. 9 Withdrawal or change in insurance model

The Insurer may decide to withdraw the PrimaCare insurance model. In that case, the insured will be transferred, depending on his level of deductible, to a normal health insurance or a health insurance with an optional deductible.

Art. 10 Effective date

These regulations and the supplemental executory provisions for compulsory health insurance in accordance with LAMal/KVG (CGA) come into effect on 1 April 2016. These regulations may be amended at any time by the Insurer.