






Compact guide to health insurance

Useful information on health insurance
in Switzerland

Switzerland's healthcare system

The Swiss healthcare system is very complex. This guide takes you through the key topics and terms, and contains lots of practical tips.

How our system is structured:

Basic health insurance compulsory		Supplementary health insurance voluntary		Accident insurance compulsory	
Financing: Who pays the costs?					
Insureds, cantons		Insureds		Insureds, employers	
Key criteria for insurance					
The cost of basic health insurance varies greatly. It depends on place of residence and age, and also the franchise amount chosen and the insurance model.		Supplementary health insurance fills the gaps that are not covered – or only partly covered – by basic health insurance. In particular, this includes:		If people are employed by the same employer for fewer than 8 hours per week, accident insurance must be included under basic health insurance.	
These terms are explained later in this guide.		Outpatient benefits: Spectacles, vaccinations, gym memberships, complementary medicine, dental treatment, prevention, etc.			
		Inpatient benefits: Free choice of doctor and hospital, or hospital stay in a single room, etc.			



A quick insight



Franchise amounts in between are not usually worthwhile, as the discount is too small.

Insurance premiums

As an insured, you pay your health insurer a monthly sum. In return, you receive the legally required (basic health insurance) or contractually agreed (supplementary health insurance) insurance cover.

In addition to your premiums, additional costs are incurred in some cases (e.g. sickness):

1. Franchise amount

A franchise amount (or “excess”) is a fixed amount that insureds themselves pay toward the cost of their treatment every year. The rule of thumb is: the higher the franchise amount, the lower the premium.

Possible annual franchise amounts		
Adults aged 19 or over	CHF 2,500	CHF 1,000
	CHF 2,000	CHF 500
	CHF 1,500	CHF 300
Children up to age 18	CHF 600	CHF 200
	CHF 500	CHF 100
	CHF 400	CHF 0
	CHF 300	

2. Deductible

If they go over their franchise amount, insureds must pay 10 % of the treatment costs up to an annual maximum of CHF 700 for adults and CHF 350 for children.

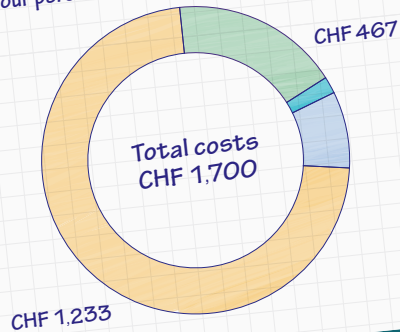
3. Hospital co-payment

Insureds pay CHF 15 per day for a hospital stay. Exceptions: Insureds who are younger than 18, or persons under the age of 25 who are still in education.

EXAMPLE:

Total healthcare and treatment costs amount to CHF 1,700. This includes a two-day stay in hospital. The franchise amount is CHF 300.

Total costs	CHF 1,700
Franchise amount	- CHF 300
Hospital costs	- CHF 30
Subtotal	CHF 1,370
10% deductible	- CHF 137
Contribution from health insurance	CHF 1,233
Your personal costs	CHF 467



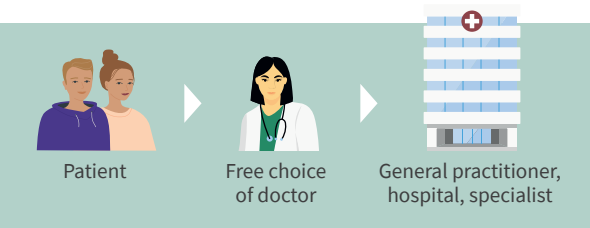
Which model best suits my needs?

Mandatory health insurance must be taken out by everyone who is resident in Switzerland. You can choose between various models. The benefits are the same everywhere – the only thing that differs is who to contact when you fall ill.

These are the most common models:

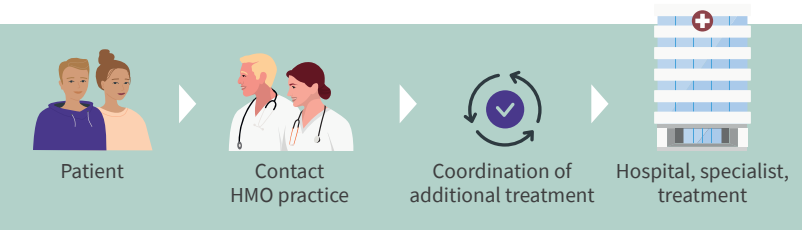
Standard model: Free choice of doctor

Insureds can see a doctor of their choice in their canton of residence.



HMO model*

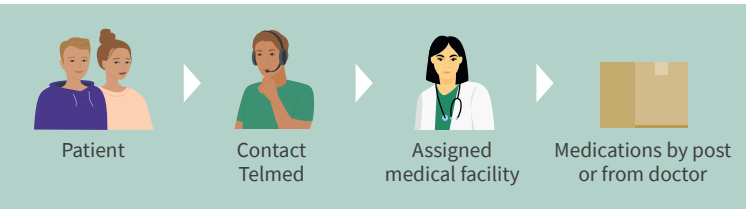
Insureds consult a doctor in their chosen group practice (HMO practice) in the first instance.



* HMO stands for Health Maintenance Organization and consists, for example, of group practices in which medical specialists have joined forces.

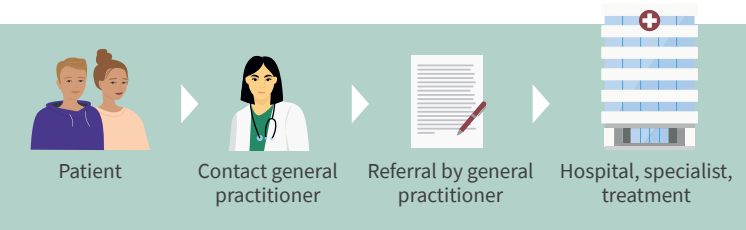
Telmed model

Insureds contact a telephone advisory service in the first instance.



General practitioner model

Insureds contact their general practitioner in the first instance.



Place of residence

Sex

MALE

FEMALE

Date of birth

e.g. April 19, 1992

COMPARE PREMIUMS NOW

Compare basic insurance options

What benefits are insured?

Basic health insurance benefits are exactly the same with all health insurers.

They include the most important benefits of medical care. The benefits under basic health insurance are prescribed by law and laid down in the catalog of benefits provided by the federal government.

Since costs vary considerably depending on health insurance provider, age, and place of residence, it's worth comparing the premiums of all health insurers every year with the help of a premium calculator.



Benefit from AXA's supplementary health insurance by using our switching service.

With the health insurance switching service from AXA, you can choose your new basic insurance with just a few clicks. We take care of terminating your existing cover and carrying out the switch for you.

Find out more at
AXA.ch/save

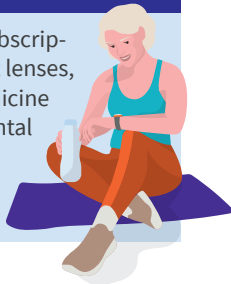
What benefits can I insure?

With supplementary insurance, you insure benefits that are not covered – or are insufficiently covered – by basic insurance. Each health insurance provider decides themselves what benefits are included in their supplementary health insurance policies.

With AXA, they include the following, for example:

Supplementary outpatient insurance

- Contributions for gym subscriptions, spectacles, contact lenses, and complementary medicine
- Financial support for mental health, medications, or emergencies while traveling abroad



Private accident insurance

- Complements insurance cover provided by compulsory accident insurance
- Worldwide cover for accidents and contribution toward high consequential costs



Supplementary hospital insurance

- Free choice of doctor, hospital, and ward
- Accommodation in the hospital for one accompanying person



Supplementary dental insurance

- Includes costs not covered under basic health insurance
- Contributions toward orthodontics, dental hygiene, and bleaching



Health advice

- Advice from over 400 pharmacists for complaints such as sore throat, cystitis, and minor injuries
- Affordable alternative to a doctor's visit

Capital insurance

- Covers the financial consequences of disability or death due to an accident or illness
- Payment of a pre-defined amount (from CHF 0 up to CHF 300,000) in accordance with the supplementary insurance conditions



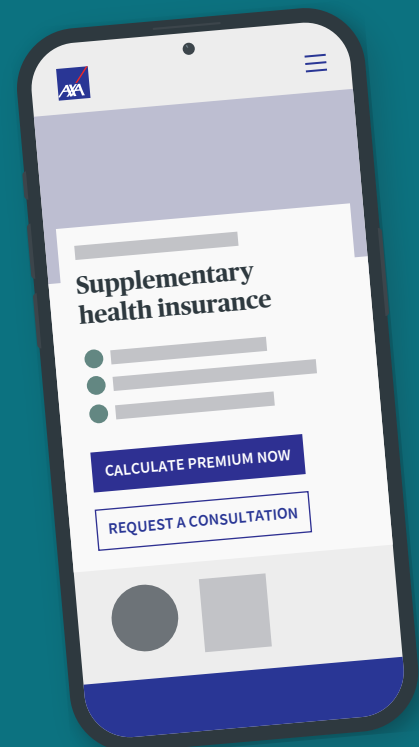
Supplementary health insurance from AXA

Seamless cover

From promoting good health through dental treatment to a private hospital ward – get seamless cover with supplementary health insurance options from AXA.

Find out more at

AXA.ch/health



How to save money on your health insurance premiums

- 1 Choose highest or lowest franchise amount**
Tip: Levels in between are not usually worthwhile, as the discount is too small.
- 2 Select the right insurance model**
Reduce your premiums by up to 25 % when you choose the general practitioner, Telmed, or HMO model – rather than the standard model – for your basic health insurance.
- 3 Insure once for accidents**
If you work at least 8 hours a week in the same job, you'll be covered for occupational and non-occupational accidents. That means you can exclude accident cover from your basic insurance and save around 7 % on your premium.
- 4 Premium reduction**
Around 30 % of Swiss insureds are entitled to a premium reduction – in particular children, young adults, and retired people. Contact your cantonal information office to check whether you meet the requirements.
- 5 Switching service**
With the switching service from AXA, you can choose the most affordable basic insurance every year in just a few clicks. We take care of terminating your existing cover and carrying out the switch for you. That way you save time and also reduce your premiums.

Specifically for families:

- 6 Family discount**
If you are a family of three or more living in the same household and insured with AXA, you can benefit from a 10 % family discount on AXA supplementary insurance.



Benefit from free services

Invoicing service

Send all your healthcare invoices to us. If necessary, we'll forward them to the relevant basic health insurer.

Legal protection service

We'll support you in any disputes with your basic insurer or a recognized service provider in connection with medical treatment.

Pension saving service

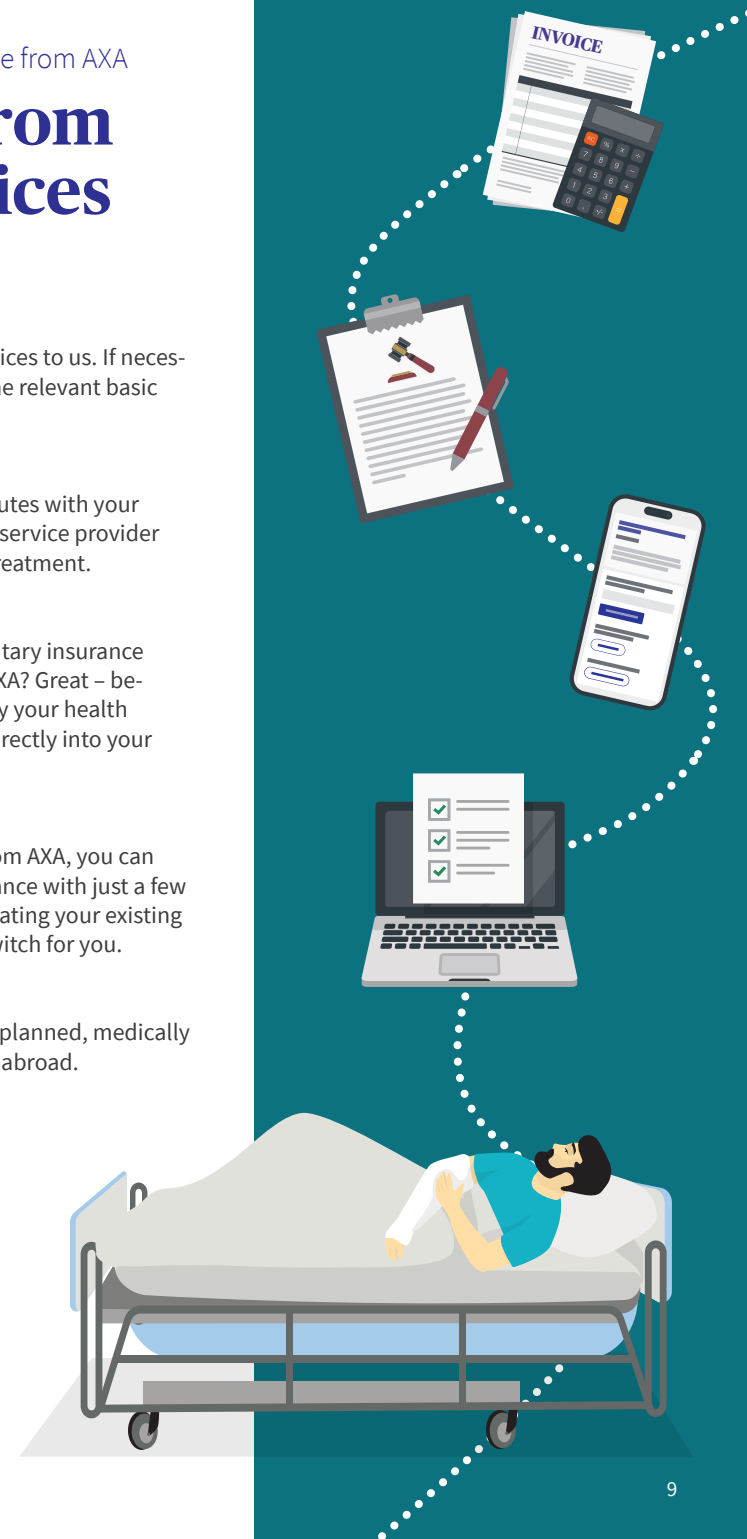
Do you have both supplementary insurance and Pillar 3 insurance from AXA? Great – because that means you can pay your health insurance reimbursements directly into your Pillar 3 account.

Switching service

With the switching service from AXA, you can choose your new basic insurance with just a few clicks. We take care of terminating your existing cover and carrying out the switch for you.

Planned hospital stays

We contribute to the costs of planned, medically required inpatient treatment abroad.



How to switch insurers

Basic health insurance

You are free to choose your basic health insurance every year and to switch providers if need be.

Ensure the switch is successful by taking the following steps:

- ☐ Compare new premiums for basic insurance (from start of October each year).
- ☐ Decide on suitable insurer, insurance model, and franchise amount.
- ☐ Changing health insurer
Please note the following deadlines:
 - Terminate current health insurance fund: no later than **November 30**
 - Register with new health insurance fund: no later than **December 31**
- ☐ Choose right insurance model or franchise amount
Please note the following deadlines:
 - Lower your franchise amount: no later than **November 30**
 - Increase your franchise amount: no later than **December 31**
 - Switch from standard model to a different insurance model: **monthly** basis possible
 - Switch to standard model: as of **November 30**

Sample letters from the federal government for terminating, registering, or changing basic health insurance from a health insurer can be found here (available in German, French, and Italian): priminfo.admin.ch/de/downloads/musterbriefe

Supplementary health insurance

Don't terminate your existing supplementary insurance until you have confirmation of the new insurance. Before you switch, health insurers carry out a health check and can then exclude certain pre-existing conditions from the coverage or reject your application altogether.

Make sure no errors occur during the switch by taking the following steps:

- ☐ Compare supplementary insurance and put together the right package of benefits.
- ☐ Apply in good time to the health insurer you wish to switch to **at the start of the year**
- ☐ Health check by health insurer: generally **within 14 days**
- ☐ Written confirmation obtained from new health insurer
- ☐ Termination of existing supplementary insurance: **by September 30**

If you wish to add new options to your existing supplementary insurance: **generally on the 1st of any month** (including new health check).

Switch health insurance without lifting a finger

Even if the benefits provided by each basic insurance provider are the same, the premiums vary greatly from case to case.

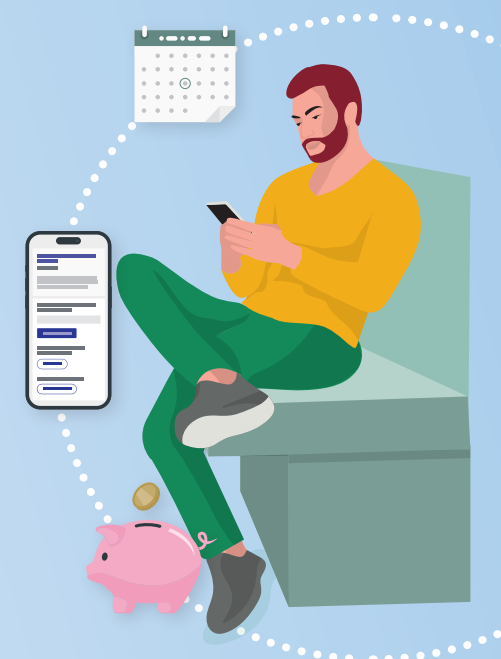
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It's all very simple:

- 1 Annual reminder**
Every autumn we'll notify you about the most affordable basic insurance for the coming year.
- 2 Compare offers**
An easy overview is available on our portal when you compare basic insurance providers.
- 3 Select basic insurance**
Select the right insurance in just one click.
- 4 Save every year**
We'll take care of everything: from terminating your existing basic insurance to registering you with the new provider.



Important information

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