

Supplementary insurance

Special terms and conditions (STC) tourist
2022 edition



Special terms and conditions (STC) tourist under the Federal Insurance Contract Act (ICA)

2022 edition

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1 Insurance fundamentals

1.1 Insurance cover

The insurance provides benefits in respect of costs which are not otherwise covered for emergency treatment in the event of illness, accident or premature birth during holiday or business travel or any periods spent abroad. It also provides benefits in respect of transport, search, rescue and repatriation costs, together with ancillary services.

1.2 Insurance provider

The insurance provider is Sympany Versicherungen AG, Basel (henceforth referred to as the insurer).

1.3 General Terms and Conditions of Insurance (GTC)

The General Terms and Conditions of Insurance of Sympany Versicherungen AG are an integral component of the provisions of tourist cover. In the event of conflicting provisions, the Special terms and conditions of tourist cover shall take precedence over the General Terms and Conditions of Insurance.

2 Eliaibility

2.1 Insured persons

2.1.1 Eligible persons

tourist is available to persons of any age.

2.1.2 Individuals

Insured persons are listed in the policy document.

2.1.3 Families

The insurance covers the insured persons named in the insurance policy, as well as their spouse/life partner and their children up to the age of 25 living in the same household as the insured person.

2.2 Condition

This cover is available only in conjunction with at least one of the following insurance departments:

 plus, premium, general supplement, private supplement, hospita, salto.

tourist cover for families is conditional on at least one of the parents holding one of these policies

3 Benefits

3.1 Scope of benefits

3.1.1 Geographical scope

The insurance covers emergency treatment elsewhere than in the canton of residence, both in Switzerland and anywhere else in the world.

3.1.2 Temporal scope

Benefits will only be provided until such time as repatriation is medically acceptable. The obligation to provide benefits in respect of illnesses and accidents occurring during the period of insurance shall in any event expire no later than 91 days after the end of the selected period of 21 or 42 days.

3.2 Benefit conditions

Benefits will be provided only if the treatment is expedient and necessary for medical reasons, and is provided by persons with the necessary authorization.

3.3 Treatment costs

tourist pays benefits to cover the costs of emergency out-patient or inpatient treatment over and above compulsory health care insurance under the KVG, mondial insurance and accident insurance under the UVG and any other existing insurance cover.

It covers illness, accident and premature birth at normal local or contractually agreed rates. A birth is regarded as premature if it is unforeseen and takes place more than six weeks before the medically attested expected birth date.

The statutory cost share applying in Switzerland is not covered.

3.4 Transport costs, search, rescue and recovery operations

If an insured person falls seriously ill, suffers a serious accident or dies, the insurer – on the basis of a medical report – provides and pays for the following services organized by the 24-hour emergency helpline:

- a) medically necessary rescue operations and emergency transport by an appropriate means of transport to the nearest suitable place of treatment,
- b) search operations undertaken to rescue and recover the insured person, plus recovery operations

To a maximum of CHF 20,000 per insured person

- medically necessary transportation of the sick or injured person to a suitable hospital in his canton of residence for inpatient treatment,
- d) return transport of the deceased to his place of residence.

3.5 Bedside visits and additional travel costs

3.5.1 Bedside visits

If an insured person falls seriously ill or suffers a serious accident abroad and has to be hospitalized for more than 7 days, the insurer organizes and pays for a visit to his bedside by a person close to him (1st-class rail travel or economy class air travel).

3.5.2 Special return journey

If an insured person needs to be repatriated for inpatient treatment in a suitable hospital in his/her canton of residence for urgent medical reasons, the Sympany 24-hour emergency helpline shall arrange for a special return journey for insured family members travelling with the insured person or for a person close to him/her. The additional costs incurred are covered.

If an insured person falls ill or suffers an accident and cannot undertake the planned return journey because he/she is in hospital, the Sympany 24-hour emergency helpline shall arrange for a special return journey for the insured person, insured family members travelling with him/her or a person close to him/her. The additional costs incurred are covered.

3.6 Sums insured

The following variants are available:

3.6.1 tourist 50/100

Sums insured (all benefits) are as follows:

Up to CHF 50,000 per insured person

Up to CHF 100,000 per insured family

The following variants are available (duration of stay abroad):

Up to max. 21 days Up to max. 42 days

3.6.2 tourist 250/500

Sums insured (all benefits) are as follows:

Up to CHF 250,000 per insured person
Up to CHF 500,000 per insured family

The following variants are available (duration of stay abroad):

Up to max. 21 days Up to max. 42 days

3.7 Services

3.7.1 Advance towards hospital costs

If an insured person requires hospitalization abroad, the insurer advances up to CHF 20,000 towards the costs involved.

If part of this advance payment is not covered by the insured person's existing insurance, it is charged to him. The sum reclaimed must be repaid within 30 days.

3.7.2 Notifying persons at home

In the event that measures are organized by the Sympany 24-hour emergency helpline, it shall notify the insured person's family members of the situation and inform them about the measures that have been arranged.

3.7.3 Arranging hospitals and medical contacts abroad If necessary, the Sympany 24-hour emergency helpline shall arrange for the insured person to visit a doctor's surgery or hospital in the vicinity of where he/she is staying. Should

issues affecting communication arise, the Sympany 24-hour emergency helpline shall provide interpreting assistance.

3.7.4 Medical advice from doctors

If an insured person requires medical assistance while travelling and this cannot be requested where he /she is staying the

ling and this cannot be requested where he/she is staying, the doctors at the Sympany 24-hour emergency helpline shall provide medical advice.

This advice is just that: advice. It may not under any circumstances be regarded as a diagnosis.

3.8 Limitation of benefits

3.8.1 Principle

The provision regarding the limitation of benefits stipulated in the General Terms and Conditions of Insurance of Sympany Versicherungen AG do not apply to tourist cover.

3.8.2 Exclusion of benefits

No entitlement to insurance benefits exists:

- a) for illnesses and the consequences of accidents that already existed when the journey began, or that the insured person knew were imminent and would require medical treatment,
- b) if the insured person travels abroad for the specific purpose of treatment, care or childbirth,
- c) for illness and the after-effects of accidents that have been excluded from cover under any existing insurance for the insured person with the insurer,
- d) if the Sympany 24-hour emergency helpline has not given prior approval for search operations, repatriation, family visits or special return journeys. However, benefit reductions shall not be applied to situations in which the insured person is not at fault or where the insured person can prove

- that the breach of contract in no way precipitated the event or affected the scope of benefits covered by the insurer,
- e) in the case of involvement in acts of war, unrest and similar events and during non-domestic military service,
- f) in the event of illness or accident as a consequence of war like events which began more than 14 days previously,
- g) in the event of illness or accident as a consequence of active involvement in criminal actions, fights and other acts of violence,
- h) if an illness or accident was the result of gross negligence, particularly the abuse of alcohol, drugs or other substances,
- i) in the event of health damage attributable to a hazardous action, i.e. if the insured person exposes himself to an especially serious risk without taking or being able to take precautionary measures to reduce the risk to a reasonable level. This does not include actions taken to rescue persons. Hazardous action within the meaning of this provision particularly means engaging in high-risk sports as well as other activities involving a comparable degree of risk. The insurer keeps a list of all hazardous sports considered to be a risk. The list is not exhaustive and can be accessed by insured persons at any time. This list, which is not exhaustive, can be inspected by insured persons at any time,
- j) if the health damage was caused deliberately, including as a consequence of suicide, attempted suicide or self-inflicted injury,
- k) for benefits covered by social insurance or mondial.

The insurer cannot be expected to arrange emergency transportation or repatriation if these are rendered impossible by extraneous circumstances such as strike, riot, acts of violence, major industrial accidents, radioactivity, natural disasters, epidemic illnesses or force majeure.

3.8.3 Limitation of benefits

If bills are manifestly overcharged, the insurer may reduce the benefits accordingly or make payment dependent on the assignment of a claim for a reduction.

4 Cost share

No cost share is charged on benefits provided by tourist.

5 Obligations in the event of a claim

5.1 Notifying the Sympany 24-hour emergency helpline

The Sympany 24-hour emergency helpline must always be notified without delay of sudden illness, accident or premature birth necessitating hospital treatment or assistance in Switzerland or abroad.

5.2 Exemption from the confidentiality obligation

The insured person releases doctors and other medical personnel treating him/her, as well as insurers, from their obligation of secrecy vis-à-vis the Sympany 24-hour emergency helpline.

5.3 Notification of claim

The insured person must submit his/her claim to the insurer immediately, providing all relevant information together with full medical and administrative particulars. Only detailed, legible original bills will be accepted. If the details on the bill are insufficient and the requested supplementary information is not forthcoming, benefits are fixed at the discretion of the insurer.

5.4 Unused rail or air tickets

The claimant must forward unused rail or air tickets to the insurer without being called upon to do so. If unused tickets have been sold or their value refunded by third parties, insurance benefits are reduced by the compensation received. If the claimant fails to meet this obligation, the insurer may require him/her to refund an amount determined at its discretion or reduce the claim for benefits by the corresponding amount.

6 Third-party benefits

6.1 General

If a third party is liable for a reported case of illness or accident by law or through its own fault, the insurer is not liable to provide benefits or is at most liable to pay the amount not otherwise covered.

6.2 Waiver of benefits

Should insured parties waive benefits from third parties in whole or in part without the consent of the insurer, the obligation to provide benefits under these GTC shall lapse. Capitalisation of a benefit claim is also treated as a waiver.

6.3 Social insurance

No benefits covered by social insurance schemes (KV, UV, IV, MV, AHV, AIV, etc.) are paid. Benefit claims must be registered with the insured person's social security scheme.

If an insured person has no valid compulsory health care insurance under the KVG or mondial cover, the insurer pays only the benefits that it would have paid if he had.

6.4 Multiple insurance cover

Where several insurers are liable to provide benefits, a calculation is made to determine how much each insurer would have had to pay had he been solely responsible. This provision applies even if the obligation of the other insurers to provide benefits is merely subsidiary. The compensation payable in accordance with these terms and conditions is limited to that portion of the overall sum insured which corresponds to this cover.

6.5 Existing policies with Sympany Versicherungen AG Other existing additional policies with Sympany Versicherungen AG take precedence over benefits under tourist.



