Health Insurance

Explanatory Guide
My Healthcare Insurance Program
My Steps

Swiss Residents
# Summary

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1 Presentation of the ExpertLine Platform

1.1 Who is ExpertLine?

ExpertLine is an independent service platform specialized in the field of healthcare insurance.

To simplify your daily steps in the field of healthcare insurance, and to provide you with professional and personalized support, your employer has chosen to offer you our services.

1.2 What does ExpertLine do?

The ExpertLine Team will inform you, accompany and advise you on all matters relating to your healthcare insurance program.

This platform, which is led by FINMA certified experts in healthcare insurance, offers you support in English, French, German and Italian.

They are able to compare your existing coverage with the packages offered by the insurer in your program.

ExpertLine is your point of contact for all issues relating to healthcare insurance, including:

- Understanding the Swiss healthcare insurance system
- Defining your specific healthcare insurance needs
- A personalized overview and comparisons of calibrated solutions
- Steps to transfer to the healthcare insurance program
- Tracking of cases and the defense of your interests

You can contact ExpertLine non-stop from 8.00 am to 6.00 pm, Monday to Friday for any questions concerning the healthcare insurance program: admission, change, request for information on coverages, premiums and benefits.
2 The Swiss Health Insurance System

The Swiss health insurance is made up of:

- The mandatory basic insurance, which is regulated by the LAMal (Swiss Federal Law on Health Insurance)
- Optional supplemental insurance, which is governed by the LCA (Swiss Federal Law on Insurance Contracts).

2.1 Basic insurance

Affiliation

Affiliation is mandatory and must be made within 3 months of taking up residence in Switzerland. **It begins on the official date of entry in the country.** If the necessary steps are not taken, the affiliation is made automatically by the relevant Cantonal authority with a health insurance company chosen at random. Admission is guaranteed; there is no health questionnaire to complete. Month of arrival is billed pro rata basis.

Cover and examples of benefits:

- Consultations with GPs/Specialists
- Prescribed medication appearing on the list of specialties
- Prescribed tests and analyses
- Hospitalization in a general ward only
- Costs related to transport and operations up to a maximum amount.
- Etc.

Deductibles and co-payment

Adults must assume an annual deductible (CHF 500.-, CHF 1'500.- or CHF 2'500.-) as well as a co-payment of 10% (max. CHF 700.- per year) for all refundable benefits, with the exception of benefits relating to maternity and childbirth that are provided for by law.

For children, the deductible is not compulsory: only the co-payment of 10% (max. CHF 350.- par year) is due.
Example of reimbursements for an adult with a CHF 500.- deductible

<table>
<thead>
<tr>
<th>Medical fees</th>
<th>Amount</th>
<th>Deductible</th>
<th>Hospital participation</th>
<th>Co-payment 10%</th>
<th>Reimbursement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consultation</td>
<td>CHF 150.-</td>
<td>CHF 150.-</td>
<td>CHF 0.-</td>
<td>CHF 0.-</td>
<td>CHF 0.-</td>
</tr>
<tr>
<td>X-rays</td>
<td>CHF 250.-</td>
<td>CHF 250.-</td>
<td>CHF 0.-</td>
<td>CHF 0.-</td>
<td>CHF 0.-</td>
</tr>
<tr>
<td>Drugs</td>
<td>CHF 120.-</td>
<td>CHF 100.-</td>
<td>CHF 2.-</td>
<td>CHF 18.-</td>
<td>CHF 18.-</td>
</tr>
<tr>
<td>Laboratory</td>
<td>CHF 170.-</td>
<td>CHF 0.-</td>
<td>CHF 17.-</td>
<td>CHF 153.-</td>
<td>CHF 153.-</td>
</tr>
<tr>
<td>Hospitalization 4 nights</td>
<td>CHF 12'000.-</td>
<td>CHF 0.-</td>
<td>CHF 60.-</td>
<td>CHF 681.-</td>
<td>CHF 11'259.-</td>
</tr>
<tr>
<td>Total</td>
<td>CHF 12'690.-</td>
<td>CHF 500.-</td>
<td>CHF 60.-</td>
<td>CHF 700.-</td>
<td>CHF 11'430.-</td>
</tr>
</tbody>
</table>

Calculating the premium

The premium is calculated for each family member. This premium will depend on the age (adult, young adult, or child), your place of residence, the deductible and the cover chosen.

### 2.2 Supplemental insurances

Supplemental insurances will cover medical costs that are not reimbursed by the basic LAMal cover.

For example:
- Prescribed non-listed drugs
- Alternative medicines (osteopathy, homeopathy, massage, etc.)
- Vision care costs
- Fitness membership
- Transport and rescue costs in Switzerland
- Dental treatment and orthodontics
- Free choice of surgeon and the hospital/clinic in a room with two beds (semi-private) or one bed (private)
- Emergency treatment abroad
- Transport, rescue and repatriation in case of emergency abroad
- Etc.

✔️ Thanks to the preferential healthcare insurance program set up by your employer, you have privileged access to tailor-made packages of supplemental insurances!
3 Your healthcare insurance program in brief

You benefit from special admission conditions with SWICA, an insurer that is known for the quality of their insurance coverages, its benefits and its service. ExpertLine staff is at your disposal to give you all the information that will allow you and your family to take an informed decision concerning the choice of your healthcare coverages.

ぽ The advantages of the healthcare insurance program

✓ Tailor-made packages with a wide range of benefits
✓ Special admission conditions for you and your family members
✓ Attractive discounts on supplementary insurances
✓ Easy administrative process
✓ Assistance by the ExpertLine Team throughout the process

ぽ Who is eligible to join the healthcare insurance program?

Employees
Family members living at the same address as the employee, that is to say:
✓ Spouse
✓ Registered Partner
✓ Children
4 Your insurer SWICA

4.1 Types of cover offered

- Outpatient - COMPLETA TOP, PRAEVENTA, SUPPLEMENTA, OPTIMA
- Inpatient - HOSPITA (semi-private or private)
- Dental – DENTA coverage

4.2 Proposed packages

4.3 Ease of admission

- Admission without a health questionnaire for new employees and family members* up the equivalent level of coverage they had with their previous insurer and the possibility to increase up to the private cover on a worldwide basis. A copy of the policy of the previous insurer is needed and eventual exclusions must be announced and will be registered by Swica.

- Admission without a heath questionnaire up to the private level on a worldwide basis for new employees and their family members coming from abroad ( inpatriates)

- These advantages are valid as long as the admission process starts within 3 months since your entry at PMI, afterwards, health and dental questionnaires will be requested.

* Except for family members of Neuchâtel’s site.
4.4 Admission for those who are not yet insured with Swica

- Admission without a health questionnaire for existing employees and family members* up the equivalent level of coverage they had with their previous insurer but minimum Bronze package. A copy of the policy of the previous insurer is needed and eventual exclusions must be announced and will be registered by Swica.

This exception is valid for admissions for January 1st, 2017 the latest.

* Except for family members of Neuchâtel’s site.

Prenatal insurance:

As long as the prenatal is requested and sent to ExpertLine before birth, the child can have a package equal to the one of one of the parents without health questionnaire.

In case prenatal is not done, the child can have maximum the package of the employee of PMI. To benefit from the admission without health questionnaire, the proposition must be sent to ExpertLine within the 90 days after birth the latest. After this delay a health questionnaire will be requested and admission can be accepted, accepted with exclusions ort refused.

This process is valid for Lausanne and Neuchâtel sites.

4.5 Special premium discounts on supplemental insurance coverages

NB: The law does not allow discounts on the basic insurance

- Up to 20% on the supplemental coverage COMPLETEA TOP
  10% + 10% with Benevita program

10% on the SUPPLEMENTA, OPTIMA and DENTA coverages

- Up to 25% on the HOSPITA supplemental hospitalization coverage
  10% + 15% with Benevita program
4.6 Other benefits

The BENEVITA program
BENEVITA is both a digital and wellbeing coach bonus system.

Adults insurees under PMI collective plan with Swica, it is compulsory to register with BENEVITA in order to keep the discount already deducted on COMPLETEA TOP and HOSPITA mentioned in 4.5 above.

You are not obliged to complete the "declaration form" and you can access this platform. The BENEVITA health platform delivers interesting personalized content relating to health issues. BENEVITA supports users and motivates them to adopt a health-oriented lifestyle.
To register, please:
1) Go to www.benevita.ch
2) On the top right corner click on (S’inscrire)
3) Fill out the fields and click on (S’inscrire)

Compulsory insurance cover MEDPHARM
For PMI employees and family members, SWICA offers Medpharm coverage which has the best premium available. You can call SANTE24 to obtain an advice before any consultation. Otherwise, you can keep your current medical routines.

Dental insurance cover
For PMI employees and family members the insurer doubles the amount insured for dental care once in a 2 year period

Denta 4 – 75% maximum CHF 4’000.-, per 2 year period
Denta 2 – 50% maximum CHF 2’000.-, per 2 year period
**Accident risk inclusion**
In the event of termination of employment and / or in case of retirement, insured persons may apply, within 90 days from the date of termination of the activity, accident risk extension for each supplementary product, respectively the conclusion of the supplementary insurance INFORTUNA. This modification is possible without medical questionnaire.

**Hospitalization cover for adults**
SWICA grants free access, without health questionnaire, on PMI healthcare insurance program to people insured on the HOSPITA FLEX model a unique option to conclude, without health questionnaire, the same insurance coverage with an annual deductible set at CHF 1'000.-. This option must be exercised on September 30th at the latest for a modification on January 1st of the following year. For maternity, a 9 months waiting period from the date of signature of the change request is nevertheless applicable.

**Maternity waiting period**
SWICA waive the waiting period in the case of maternity for persons domiciled in Switzerland if the risk was insured for 12 months or more with the previous insurer.
For those arriving from abroad the waiting period is not applicable.

**Prenatal insurance**
SWICA grants to future parents insured in the PMI healthcare insurance program the possibility of concluding a prenatal insurance coverage equivalent to their own coverage without health questionnaire.
The signed application must be in possession of the insurer before birth.
Premium related to the month of birth is free of charge.

**Age group for new employees and family members**
From age 51, age group is blocked on the supplementary coverages of SWICA.
**SWICA summary of benefits Bronze and Silver**

<table>
<thead>
<tr>
<th>BENEFITS</th>
<th>BRONZE</th>
<th>SILVER</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>DOCTORS, CHIROPRACTORS, PRESCRIBED ANALYSES, EXAMS...</strong></td>
<td>Covered under the compulsory insurance according to current rates</td>
<td>Covered under the compulsory insurance according to current rates</td>
</tr>
<tr>
<td><strong>UNLISTED DRUGS</strong></td>
<td>90% *</td>
<td>90% *</td>
</tr>
<tr>
<td><strong>ALTERNATIVE MEDICINES</strong></td>
<td>90% max. CHF 80/session, max. 60 sessions/year</td>
<td>90% max. CHF 50/session, max. 60 sessions/year</td>
</tr>
<tr>
<td><strong>PSYCHOTHERAPY</strong></td>
<td>90% max. CHF 50/session, max. 60 sessions/year</td>
<td>90% max. CHF 50/session, max. 60 sessions/year</td>
</tr>
<tr>
<td><strong>CONVALESCENCE CURES</strong></td>
<td>CHF 50/day max. 30 days/year</td>
<td>CHF 50/day max. 30 days/year</td>
</tr>
<tr>
<td><strong>THERMAL CURES</strong></td>
<td>CHF 90/day max. 30 days/year</td>
<td>CHF 90/day max. 30 days/year</td>
</tr>
<tr>
<td><strong>HOME HELP</strong></td>
<td>50% max. CHF 60/day, max. 60 days/year</td>
<td>50% max. CHF 60/day, max. 60 days/year</td>
</tr>
<tr>
<td><strong>MEDICALLY PRESCRIBED AIDS</strong></td>
<td>90% max. CHF 200/year</td>
<td>90% max. CHF 200/year</td>
</tr>
<tr>
<td><strong>GLASSES/CONTACT LENSES</strong></td>
<td>90% max. CHF 200 every 3 years</td>
<td>90% max. CHF 200 every 3 years</td>
</tr>
<tr>
<td><strong>MATERNITY</strong></td>
<td>50% max. CHF 300 for antenatal and postnatal exercises</td>
<td>50% max. CHF 300 for antenatal and postnatal exercises</td>
</tr>
<tr>
<td><strong>BREASTFEEDING</strong></td>
<td>CHF 200 per delivery</td>
<td>CHF 200 per delivery</td>
</tr>
<tr>
<td><strong>PREVENTIVE MEASURES (VACCINATION)</strong></td>
<td>90% max. CHF 200/year</td>
<td>90% max. CHF 200/year</td>
</tr>
<tr>
<td><strong>PREVENTIVE, CHECK-UP</strong></td>
<td>90% max. CHF 500/every 3 years</td>
<td>90% max. CHF 500/every 3 years</td>
</tr>
<tr>
<td><strong>PROMOTION OF HEALTH AND FITNESS</strong></td>
<td>50% up to CHF 500/year</td>
<td>50% up to CHF 500/year</td>
</tr>
<tr>
<td><strong>TRANSPORTS, EMERGENCY</strong></td>
<td>90%</td>
<td>90%</td>
</tr>
<tr>
<td><strong>DENTAL COVERAGE/ORTHODONTICS</strong></td>
<td>50% max. CHF 1'000/year or CHF 2'000 once on 2 years period / Orthodontics for children 50% max. CHF 2'000/year + 50% max. CHF 10'000/year</td>
<td>50% max. CHF 1'000/year or CHF 2'000 once on 2 years period / Orthodontics for children 50% max. CHF 2'000/year + 50% max. CHF 10'000/year</td>
</tr>
</tbody>
</table>

**INPATIENT**

| **HOSPITALISATION STAY AND TREATMENTS IN ALL HOSPITALS AND CLINICS** | 100% | 100% |
| **PSYCHIATRIC HOSPITALIZATION** | Limited to 180 days/year | Limited to 180 days/year |
| **HOSPITALIZATION FOR MATERNITY IN SWITZERLAND** | 100% in semi private division | 100% in semi private division |
| **ROOMING IN** | CHF 60/day, max. 21 days/year | CHF 60/day, max. 21 days/year |

| **OUTPATIENT EMERGENCY TREATMENT ABROAD** | 90%* | 90%* |
| **OUTPATIENT CARE PLANNED ABROAD** | CHF 10'000/year for treatment | CHF 10'000/year for treatment |
| **HOSPITALIZATION ABROAD IN CASE OF EMERGENCY** | 100% | 100% |
| **TRANSPORTS, EMERGENCY ABROAD** | 90% | 90% |

**OUTPATIENT**

Deductible of CHF 600 in COMPLETA TOP/ adults for alternative medicine, unlisted drugs and treatment in emergency abroad

Deductible on the mandatory insurance is compensated

**INPATIENT**

Participation to the costs in case of hospitalization for adults CHF 300/day max. CHF 6'000/year

Deductible on the mandatory insurance and co-payment are compensated

Deductible up to CHF 1'000/year

Deductible on the mandatory insurance and co-payment are compensated
### SWICA summary of benefits Gold and Platinum

<table>
<thead>
<tr>
<th>Benefits</th>
<th>Gold</th>
<th>Platinum</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Doctors, Chiropractors, Prescribed Analyses, Exams...</strong></td>
<td>Covered under the compulsory insurance according to current rates</td>
<td>Covered under the compulsory insurance according to current rates</td>
</tr>
<tr>
<td><strong>Unlisted Drugs</strong></td>
<td>90%</td>
<td>90%</td>
</tr>
<tr>
<td><strong>Alternative Medicines</strong></td>
<td>90%</td>
<td>90%</td>
</tr>
<tr>
<td><strong>Psychotherapy</strong></td>
<td>90% max. CHF 75/session, max. 60 sessions/year</td>
<td>90% max. CHF 75/session, max. 60 sessions/year</td>
</tr>
<tr>
<td><strong>Convalescence Cures</strong></td>
<td>CHF 80/day max. 30 days/year</td>
<td>CHF 100/day max. 30 days/year</td>
</tr>
<tr>
<td><strong>Thermal Cures</strong></td>
<td>CHF 120/day max. 30 days/year</td>
<td>CHF 160/day max. 30 days/year</td>
</tr>
<tr>
<td><strong>Home Help</strong></td>
<td>50% max. CHF 60/day, max. 60 days/year</td>
<td>50% max. CHF 80/day, max. 60 days/year</td>
</tr>
<tr>
<td><strong>Medically Prescribed AIDS</strong></td>
<td>90% max. CHF 500/year</td>
<td>90% max. CHF 1'000/year</td>
</tr>
<tr>
<td><strong>Glasses/Contact Lenses</strong></td>
<td>90% max. CHF 500 every 3 years</td>
<td>90% max. CHF 800 every 3 years</td>
</tr>
<tr>
<td><strong>Maternity</strong></td>
<td>50% max. CHF 300 for antenatal and postnatal exercises</td>
<td>50% max. CHF 300 for antenatal and postnatal exercises</td>
</tr>
<tr>
<td><strong>Breastfeeding</strong></td>
<td>CHF 200 per delivery</td>
<td>CHF 200 per delivery</td>
</tr>
<tr>
<td><strong>Preventive Measures (Vaccination)</strong></td>
<td>90%</td>
<td>90%</td>
</tr>
<tr>
<td><strong>Preventive, Check-Up</strong></td>
<td>90%</td>
<td>90%</td>
</tr>
<tr>
<td><strong>Promotion of Health and Fitness</strong></td>
<td>Up to CHF 800/year</td>
<td>Up to CHF 800/year</td>
</tr>
<tr>
<td><strong>Transport, Emergency</strong></td>
<td>90%</td>
<td>90%</td>
</tr>
<tr>
<td><strong>Dental Coverage/Orthodontics</strong></td>
<td>75% max. CHF 2'000/year or CHF 4'000 once on 2 years period: Orthodontics for children 75% max. CHF 4'000/year + 50% max. CHF 10'000/year</td>
<td>75% max. CHF 2'000/year or CHF 4'000 once on 2 years period: Orthodontics for children 75% max. CHF 4'000/year + 50% max. CHF 10'000/year</td>
</tr>
<tr>
<td><strong>Hospitalisation Stay and Treatments in All Hospitals and Clinics</strong></td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Psychiatric Hospitalisation</strong></td>
<td>Limited to 180 days/year</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Hospitalisation for Maternity in Switzerland</strong></td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Rooming In</strong></td>
<td>CHF 60/day, max. 21 days/year</td>
<td>CHF 100/day, max. 21 days/year</td>
</tr>
<tr>
<td><strong>Outpatient Emergency Treatment Abroad</strong></td>
<td>90%</td>
<td>90%</td>
</tr>
<tr>
<td><strong>Outpatient Care Planned Abroad</strong></td>
<td>90%</td>
<td>90%</td>
</tr>
<tr>
<td><strong>Voluntary Hospitalisation Abroad Including Maternity</strong></td>
<td>CHF 100/day for board CHF 10'000/year for treatment</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Hospitalisation Abroad in Case of Emergency</strong></td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Transports, Emergency Abroad</strong></td>
<td>90%</td>
<td>90%</td>
</tr>
<tr>
<td><strong>Repatriation</strong></td>
<td>Full coverage</td>
<td>Full coverage</td>
</tr>
</tbody>
</table>

**Outpatient**
- Deductible of CHF 600 in COMPLETA TOP/ Platinum for alternative medicine, unlisted drugs and treatment in emergency abroad
- Deductible OPTIMA is equivalent to that of the basic insurance for voluntary or emergency treatment abroad and alternative medicine
- Deductible on the mandatory insurance is compensated

**Inpatient**
- Deductible up to CHF 1'000/year
- Deductible on the mandatory insurance and co-payment are compensated

**Particularities**
- Deductible of CHF 600 in COMPLETA TOP/ Platinum for alternative medicine, unlisted drugs and treatment in emergency abroad
- Deductible OPTIMA is equivalent to that of the basic insurance for voluntary or emergency treatment abroad and alternative medicine
- Deductible on the mandatory insurance is compensated

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**Notes:**
- Deductible up to CHF 1'000/year for alternative medicine.
- Deductible on the mandatory insurance is compensated.
4.9 The system of deductibles in supplemental insurances

Contributions to costs of SWICA’s COMPLETA TOP*

A deductible of CHF 600.- and a copayment of 10% is levied for adults after 18 years old in the COMPLETA TOP supplemental insurance, specifically for:

- Unlisted drugs
- Alternative medicine
- Additional costs in case of emergency abroad

The deductible already paid under the compulsory health insurance is compensated in this copayment.

For unlisted drugs and the costs of additional emergency treatment abroad, once the deductible of the COMPLETA TOP is reached, the costs are reimbursed at 90%.

For alternative medicine, the deductible is considered up to CHF 80.- per hour of therapy, then reimbursement is done at 90% of CHF 80.- (CHF 72.-) per hour of therapy.

Contributions to costs of SWICA’s OPTIMA**

A contribution equal to the deductible on the basic insurance and a copayment of 10% is levied in OPTIMA supplemental insurance, specifically for:

- Voluntary or emergency outpatient treatments abroad
- Alternative medicine

Sessions of one hour of therapy at CHF 120.-/session with COMPLETA TOP: Alternative medicine reimbursement example:

Annual deductible of CHF 500.- in the basic mandatory insurance reached
Balance of deductible on COMPLETA TOP CHF 100.-

Reimbursements

<table>
<thead>
<tr>
<th></th>
<th>1st session</th>
<th>2nd session</th>
<th>From 3rd session</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>CHF 0.-</td>
<td>CHF 54.-</td>
<td>CHF 72.-</td>
</tr>
</tbody>
</table>
Sessions of one hour of therapy at CHF 120.-/session with COMPLETA TOP and OPTIMA:
Alternative medicine reimbursement example:

**Annual deductible of CHF 500.- in the basic mandatory insurance reached:**
Balance of deductible on COMPLETA TOP CHF 100.-
Balance of deductible on OPTIMA CHF 0.-

<table>
<thead>
<tr>
<th>Reimbursement</th>
<th>1st session</th>
<th>2nd session</th>
<th>From 3rd session</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHF 36.-</td>
<td>CHF 90.-</td>
<td>CHF 108.-</td>
<td></td>
</tr>
</tbody>
</table>

For optimal reimbursement of alternative medicine services choose an annual deductible of CHF 500.- on the compulsory insurance LAMal.

**Contribution to costs with SWICA’s HOSPITA**

All costs for which the insured person is liable deducted from the basic mandatory insurance (deductible and copayment) are also deducted from the HOSPITA additional hospitalization insurance.

A daily participation of CHF 15.- for adults is deducted in addition in accordance with the law.

Given that most of maternity benefits are covered by the basic insurance at 100%, part or totality of the HOSPITA supplementary insurance deductible may be collected during hospitalization for childbirth.

**HOSPITA STANDARD**

Examples for Silver, Gold and Platinum packages with deductible of CHF 500.-:

**Hospitalization whatever its duration:**
Compulsory insurance annual deductible CHF 500.-
Compulsory insurance co-payment CHF 700.-
Total participation on Hospita CHF 1'000.- not considered
Total at your charge CHF 1’200.-, instead of CHF 2’200.-
Examples for Silver, Gold and Platinum packages with deductible of CHF 2’500.-:

Hospitalization whatever its duration:
Compulsory insurance annual deductible CHF 2’500.-
Compulsory insurance co-payment CHF 700.-
Total participation on Hospita CHF 1'000.- not considered
Total at your charge CHF 3’200.-, instead of CHF 4’200.-

HOSPITA FLEX

In this model, you have no participation in case of hospitalization in the general ward of a public hospital in all Switzerland.

Examples for Bronze package with deductible of CHF 500.-:

Hospitalization of 4 days:
Compulsory insurance annual deductible CHF 500.-
Compulsory insurance co-payment CHF 700.-
Total participation on Hospita CHF 300.-x 4 = CHF 1'200.-
Total at your charge CHF 2’400.-

Hospitalization of 30 days:
Compulsory insurance annual deductible CHF 500.-
Compulsory insurance co-payment CHF 700.-
Total participation on Hospita CHF 300.-x 16 = CHF 4'800.-
Total at your charge CHF 6’000.-, instead of CHF 7’200.-

Examples for Bronze package with deductible of CHF 2’500.-:

Hospitalization of 4 days:
Compulsory insurance annual deductible CHF 2’500.-
Compulsory insurance co-payment CHF 700.-
Total participation on Hospita CHF 300.-x 4 = CHF 1'200.-
Total at your charge CHF 4’400.-

Hospitalization of 30 days:
Compulsory insurance annual deductible CHF 2’500.-
Compulsory insurance co-payment CHF 700.-
Total participation on Hospita CHF 2'800.-
Total at your charge CHF 6’000.-, instead of CHF 9’200.-
5 You are a new employee: what should you do?

5.1 You are already a resident in Switzerland.
You benefit from the conditions described in paragraph 4.

5.2 You arrived from abroad

Just send us the following information to obtain insurance quotes for all of your family:

✓ Name(s), First name(s)
✓ Date(s) of birth
✓ Nationality (ies)
✓ Registered address and date of entry in Switzerland
✓ Copies of residency permits or attestation of residence

The mandatory health insurance, according to the Federal Law on Health Insurance, begins on the official date of entry into Switzerland, even if the application is made at a later date.

Supplemental insurance may be taken from the date of beginning of employment with PMI. To benefit from preferential admission conditions, the admission must be made within three months of your arrival in Switzerland at the latest.

Important

Whatever your situation, do not cancel any supplemental insurance coverage without first receiving a confirmation of acceptance from the new insurer
6 Examples of 2017 monthly premiums

Overview of the 2017 monthly premiums for the basic MEDPHARM insurance from SWICA in CHF:

<table>
<thead>
<tr>
<th>Deductible</th>
<th>Without accident - employees</th>
<th>With accident – family members</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0 / 500</td>
<td>1'500</td>
</tr>
<tr>
<td>Neuchâtel</td>
<td></td>
<td></td>
</tr>
<tr>
<td>0-18 years</td>
<td>114.60</td>
<td>-</td>
</tr>
<tr>
<td>0-18 years 3rd child</td>
<td>47.80</td>
<td>-</td>
</tr>
<tr>
<td>19-25 years</td>
<td>378.20</td>
<td>326.10</td>
</tr>
<tr>
<td>26 years and above</td>
<td>396.00</td>
<td>345.50</td>
</tr>
<tr>
<td>Vaud 1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>0-18 years</td>
<td>114.70</td>
<td>-</td>
</tr>
<tr>
<td>0-18 years 3rd child</td>
<td>47.90</td>
<td>-</td>
</tr>
<tr>
<td>19-25 years</td>
<td>379.50</td>
<td>327.30</td>
</tr>
<tr>
<td>26 years and above</td>
<td>398.60</td>
<td>348.00</td>
</tr>
<tr>
<td>Vaud 2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>0-18 years</td>
<td>109.90</td>
<td>-</td>
</tr>
<tr>
<td>0-18 years 3rd child</td>
<td>45.80</td>
<td>-</td>
</tr>
<tr>
<td>19-25 years</td>
<td>363.10</td>
<td>310.90</td>
</tr>
<tr>
<td>26 years and above</td>
<td>381.30</td>
<td>330.60</td>
</tr>
</tbody>
</table>

Environmental tax of CHF 5.65 is not deducted

CHF 0.-/CHF 500.-: child deductible/adult deductible

As a PMI employee you are currently insured against accident by your employer.
7 Useful information

7.1 Where to send your claims:

By postal mail to:
SWICA
PMI Team
Avenue Mon-Repos 22
1005 Lausanne

By e-mail to:
pmi@swica.ch
You have to keep originals on your records as the insurer may need it.

EXPATS IN/OUT
Expats IN/OUT have compulsory insurance with Swica only to comply with Swiss regulations. Swica should not receive claims from Expat IN/OUT and in case an insurance card is delivered it should be destroyed to avoid presenting it to doctors or pharmacies. Only CIGNA insurance card is to be used. All claims are to be submitted to CIGNA.

7.2 To download the conditions of insurance and the SWICA documents

https://www.swica.ch/en/for-private-clients/online-service/downloads#VB

You will find the link on your extranet, pmi.expertline.ch

7.3 To consult the list of doctors, hospitals, therapists, instructors, fitness centers etc.

https://www.swica.ch/en/your-health/healthcare-partners

You will find the link on your extranet, pmi.expertline.ch

7.4 In the event of hospitalization: what should I do?

The hospital or clinic should take care of the formalities with SWICA directly.
8  Additional information

8.1  Option for cross borders living in France

Employees living in France and working in Switzerland have the possibility to choose which option they want as long as it was not done in the past. This possibility is given as long as the request is done between October 1st, 2016 and September 30th, 2017.
If you already made your choice, your insurance remains as chosen, either within CMU or LAMal.
If you have not yet made your choice, you can move from the CMU to the LAMal and vice-versa.

If you are insured under CMU and are not sure if you have exercised your option, it’s important to do so during the period mentioned above. In case you don’t, you will be automatically affiliated to the LAMal.

8.2  Fitness benefits

SWICA reimburses the participation of the Completa Praeventa 50% max CHF. 500.-/year for employees members of the PMI fitness of Lausanne and Neuchâtel to PMI.

**Employees in Gold or Platinum** packages keep the 90% maximum of CHF. 300.-/year and can use it for other health promotion benefits which are on the Swica list.
If they are not members of the PMI fitness, they benefit from CHF 800.-/year for registration in another fitness club, or, CHF600.-/year for another sport, health or wellbeing program on the SWICA list of programs.

**Employees in Bronze or Silver packages**, who are not members of PMI fitness and family members can claim 50% maximum CHF 500.-/year toward membership in another fitness club, or, 50% maximum CHF 300.-/year for registration in another sport, health or wellbeing program which are on the SWICA list of programs.
8.3 Unpaid leave

Lausanne and Neuchâtel Employees keep their coverage in the PMI health insurance plan with SWICA during unpaid leave. PMI continues participating to the premiums.

During an unpaid leave, the employee will continue to be insured for accidents by PMI accident insurer during the first 30 days (LAA only). After this period, and until returning to work, the employee is responsible for his/her own accident insurance coverage. PMI LAA insurer offers the possibility to maintain coverage with the insurance by special agreement for a maximum period of 6 months. The premium (approx. CHF 40.- per month) is at the employee’s cost.

When ExpertLine receives the information about an unpaid leave, they will propose to the employee to add INFORTUNA supplementary accident (private coverage) which will be billed to the employee for the duration of the unpaid leave.

**Unpaid leave up to 7 months:**
Employees have the option to conclude an insurance by special agreement which allows him/her to extend the non-professional accident insurance coverage by a total of 180 days (6 months), thereby enabling the employee to enjoy full insurance benefits. The employee should contact local HR Benefits to obtain the payment slip (Zurich insurance for Lausanne employee or SUVA for Neuchatel employees).

**Unpaid leave for more than 7 months:**
Employees will conclude an insurance by special agreement accident coverage with PMI’s accident insurers Zurich/SUVA for max. 6 months by contacting local HR Benefits.
As of the 7th month, SWICA will add accident coverage in the basic insurance until the end of the unpaid leave. The difference between illness and accident coverage will be at the employee’s cost but billed to PMI.

**Additional benefits:**
An insurance for loss of income during unpaid leave was negotiated with SWICA for all employees. This insurance is proposed by SWICA without health condition and will cover a loss of salary in case of Illness or accident for an amount of CHF 40.- a day after a waiting period of 14 days. Billing will be sent directly to the employee.
8.4 How to claim

If you receive bills at home with a payment slip, you have to send the detail of benefits to Swica. Swica will reimburse them to you once deducted the annual deductible and/or copayment.

If medical providers send the bills directly to Swica, Swica will pay the medical providers and will send you the invoice for the annual deductible and/or copayment participation.

Any question?
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pmi@expertline.ch
This guide is available on your dedicated extranet:
http://pmi.expertline.ch

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F 058 201 01 00