

Basic and supplementary insurance

Benefits	Basic insurance	Basic supplementary insurance		Extended supplementary insurance				Accident insurance
	Standard/Favorit	Completa Top	Completa Forte	Praevita	Supplementa	Optima	Denta	Infortuna Medical Expenses
Outpatient treatment/conventional medicine	Full cover for treatments by contractual physicians or other approved health professionals *	⊖	⊖	⊖	⊖	Conventional medical treatment using non-contractual physicians worldwide *	⊖	Full cover
Medicines	As per statutory lists of medicines with doctor's prescription (for use within the indication) *	+Medicines prescribed by SWICA-recognised doctors and therapists or medically prescribed medication within the indication ▲		⊖	⊖	⊖	⊖	Full cover
Hospitalisation	General ward in hospitals on the hospital list of the canton of residence or current location based on the rate valid for the canton of residence *	⊖	⊖	⊖	⊖	⊖	⊖	Full cover for SWICA contract hospitals
Complementary medicine	Anthroposophic medicine, acupuncture, TCM pharmacotherapy, homeopathy and phytotherapy. Costs covered based on the rate of the canton of residence for doctors certified (FMH) in the discipline *	Up to CHF 80/hour with SWICA-recognised doctors and therapists ▲	Up to CHF 120/hour with SWICA-recognised doctors and therapists ▲	⊖	⊖	Full cover for SWICA-recognised doctors and therapists *	⊖	Full cover for SWICA-recognised doctors and therapists
Medical check-ups	Preventive measures under statutory benefits regulations; gynaecological check-up every 3 years *	⊖	⊖	+90% up to CHF 500 within a 3-year period, as per separate list	⊖	+90%, unlimited amount, as per separate list	⊖	⊖
Health promotion and preventive healthcare	⊖	⊖	90% up to CHF 500 per year, max. CHF 300 per type of preventive healthcare, as per separate list	+50% up to CHF 500 per year, max. CHF 300 per type of preventive healthcare, as per separate list	⊖	90% up to CHF 300 per year, as per separate list	⊖	⊖
Maternity	No co-payments for maternity benefits in accordance with statutory benefits regulations; no co-payments for treatment against illness from the 13th week of pregnancy up to and including the 8th week after the birth	+CHF 200 breastfeeding benefit per child	+CHF 200 breastfeeding benefit per child; 90% up to CHF 300 per year from health promotion for antenatal and postnatal exercises	+50% up to CHF 300 per year from health promotion for antenatal and postnatal exercises	⊖	+90% up to CHF 300 per year from health promotion for antenatal and postnatal exercises; conventional medical treatment using non-contractual physicians as well as midwives	⊖	⊖
Immunisations and travel vaccinations	Vaccinations under statutory benefits regulations *	⊖	⊖	+90% up to CHF 200 per year	⊖	+90%, unlimited amount	⊖	⊖
Home help	⊖	50% up to CHF 30/day, up to 60 days per year		⊖	⊖	⊖	⊖	Full cover
Home nursing care	Advice, treatment/basic care from recognised service providers *	⊖	⊖	⊖	⊖	⊖	⊖	Full cover
Medical spa treatments	CHF 10/day, 21 days per year *	+CHF 30/day, up to 30 days per year		⊖	⊖	+CHF 30/day, up to 30 days per year	⊖	Full cover
Convalescence cures	⊖	CHF 20/day, up to 30 days per year		⊖	⊖	+CHF 30/day, up to 30 days per year	⊖	Full cover
Psychotherapy	Psychotherapy with a specialist; medically prescribed psychological psychotherapy *	90% up to CHF 50 per session, up to 60 sessions per year with SWICA-recognised psychotherapists		⊖	⊖	+CHF 25 per session, up to 60 sessions per year with SWICA-recognised psychotherapists	⊖	Full cover
Glasses and contact lenses	CHF 180/year up to the age of 18 (under statutory benefits regulations) *	90% up to CHF 200 of optician's bill within a 3-year period, cannot be combined with benefits from basic insurance	90% up to CHF 900 of optician's bill within a 3-year period, cannot be combined with benefits from basic insurance	⊖	+90% up to CHF 300 within a 3-year period	+90% up to CHF 300 within a 3-year period	⊖	Full cover
Medically prescribed aids	Statutory list of aids and appliances *	90% up to CHF 200 per year, as per separate list		⊖	+90% up to CHF 500 per year, as per separate list	+90% up to CHF 300 per year, as per separate list	⊖	Full cover
Emergency transport/medically indicated transport, search and rescue operations	50% up to CHF 500 for medically indicated transport; 50% up to CHF 5000 for emergency transport in Switzerland	Switzerland: emergency transport/transfers 90% up to CHF 20000 per year, search and rescue operations up to CHF 20000 per year; Abroad: search and rescue operations and emergency transport up to CHF 50000 per year *	Switzerland: emergency transport/transfers 90% up to CHF 100000 per year, search and rescue operations up to CHF 100000 per year; Abroad: search and rescue operations and emergency transport up to CHF 150000 per year	⊖	+Emergency transport/transfers 90% up to CHF 20000 per year, valid for Switzerland and abroad	+Emergency transport/transfers 90% up to CHF 20000 per year, valid for Switzerland and abroad	⊖	+Emergency transport/transfers: full cover; search and rescue operations CHF 20000 per event, valid for Switzerland and abroad
Repatriation	⊖	Full cover		⊖	⊖	⊖	⊖	Full cover
Treatment abroad	Costs covered for emergencies up to double the rate based on the recognised rate for Switzerland or as per bilateral agreement with EU/EFTA countries *	Full cover for outpatient and inpatient treatment in emergencies (private hospital category for the first 3 months of travel) ▲		⊖	⊖	Full cover for outpatient treatment (not including dental treatment) *	⊖	Full cover
Dental treatment costs, dental hygiene	In the case of serious illnesses of the masticatory system or if the treatment is related to a very serious general illness. Cover in the event of dental accident, if accident cover is in place. *	50% up to CHF 100 per year		⊖	⊖	⊖	Denta 1: 50% up to CHF 500 per year Denta 2: 50% up to CHF 1000 per year Denta 3: 75% up to CHF 1500 per year Denta 4: 75% up to CHF 2000 per year	Full cover of costs of dental accidents for which an insurer must pay benefits in accordance with KVG, UVG or MVG
Orthodontics	Under certain legal conditions *	50% up to CHF 10000 per year as per the UVG rate, up to age 25		⊖	⊖	⊖	Up to age 25: Denta 1: 50% up to CHF 1000 per year Denta 2: 50% up to CHF 2000 per year Denta 3: 75% up to CHF 3000 per year Denta 4: 75% up to CHF 4000 per year	⊖

* SWICA charges the co-payments prescribed by law or defined in the contract for these benefits.

▲ Co-payments for Completa Top and Completa Forte: For these benefits, adult policyholders can choose between no excess or an excess of CHF 600 in accordance with the General Insurance Conditions (GIC) and Supplementary Conditions (SC). No excess is applied for children below the age of 18. A deductible of 10% applies to everyone (max. CHF 700 for adults or CHF 350 for children). Any co-payment that has already been paid under mandatory health insurance is taken into account.

For all products listed in this summary of benefits, payment of benefits is subject to the current GIC and SC with the date of issue printed on your insurance policy. "Year" always refers to the calendar year. Full cover means that SWICA pays for all costs in excess of the statutory and/or agreed co-payment. For additional information on benefits while abroad, refer to the GIC and the applicable SC.

Hospitalisation insurance

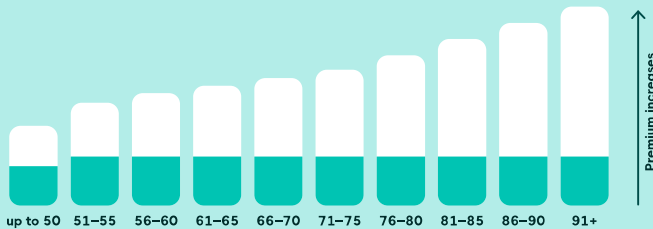
Benefits	Private Worldwide ★★★★★	Private ★★★		Semi-Private ★★		General ★
	Hospita Private Global (BestMed)	Hospita Private	Hospita Flex Private	Hospita Semi-Private	Hospita Flex Semi-Private	Hospita General Hospita Plus
Hospital stay with selectable co-payment for supplementary insurance	Private ward worldwide, full cover in public and private hospitals* BestMed guarantee: Extra benefits for customers with special requirements and the fastest connection to outstanding medical care around the clock	Hospita Private: Full cover in the private ward of public and private hospitals in Switzerland and Liechtenstein* Hospita Private (list): Full cover in the private ward of hospitals on the SWICA hospital list*	Free choice of hospital ward (general, semi-private or private) before each hospital stay. Full cover in the general, semi-private and private ward of public and private hospitals in Switzerland and Liechtenstein* Choice before each hospital stay • General: no deductible • Semi-private: CHF 300/day, up to CHF 6000 per year • Private: CHF 400/day, up to CHF 8000 per year	Hospita Semi-Private: Full cover in the semi-private ward of public and private hospitals in Switzerland and Liechtenstein* Hospita Semi-Private (list): Full cover in the semi-private ward of hospitals on the SWICA hospital list*	Free choice of hospital ward (general or semi-private) before each hospital stay. Full cover in the general or semi-private ward of public and private hospitals in Switzerland and Liechtenstein* Choice before each hospital stay • General: no deductible • Semi-private: CHF 300/day, up to CHF 6000 per year	Hospita General: Full cover in the general ward of all SWICA contract hospitals Hospita Plus: Exclusive upgrade guarantee • Can be chosen by the end of year in which the young person turns 18 • Switch to a semi-private or private ward possible regardless of state of health • Option can be exercised up to the end of the year in which the individual turns 40
Selectable excess per year CHF 1000, discount on premium = 15% CHF 2000, discount on premium = 35% CHF 5000, discount on premium = 50%						
Treatment abroad	Full cover	+CHF 150/day for board and CHF 30 000 per year for treatment costs		+CHF 100/day for board and CHF 10 000 per year for treatment costs		+CHF 50/day for board and CHF 5000 per year for treatment costs
Emergency transport/transfers	+90%, no upper limit, valid for Switzerland and abroad	+90%, no upper limit, valid for Switzerland and abroad		+90%, no upper limit, valid for Switzerland and abroad		+90% up to CHF 20 000 per year, valid for Switzerland and abroad
Search and rescue operations, repatriation	90% up to CHF 30 000 per event	90% up to CHF 30 000 per event		90% up to CHF 30 000 per event		+90% up to CHF 20 000 per event
Convalescence cures	+CHF 140/day, up to 30 days per year	+CHF 100/day, up to 30 days per year		+CHF 80/day, up to 30 days per year		+CHF 15/day, up to 30 days per year
Medical spa treatments	+CHF 140/day, up to 30 days per year	+CHF 100/day, up to 30 days per year		+CHF 80/day, up to 30 days per year		+CHF 30/day, up to 30 days per year
Home nursing care	+CHF 100/day, for up to 720 days within 900 days	+CHF 80/day, for up to 720 days within 900 days		+CHF 60/day, for up to 720 days within 900 days		+CHF 30/day, for up to 720 days within 900 days
Home help	+CHF 50/day, up to 60 days per year	+CHF 40/day, up to 60 days per year		+CHF 30/day, up to 60 days per year		+CHF 15/day, up to 60 days per year
Maternity	Additional costs for the newborn during the mother's postnatal recovery, the same as the mother's cover					

*In the absence of a contract between SWICA and a SWICA-recognised hospital, SWICA's maximum rate applies. In the case of Hospita Private Global, this applies only to treatment in Switzerland and the Principality of Liechtenstein.

*Year" refers to the calendar year.

SWICA rewards your loyalty as a customer.

- SWICA rate at age of enrolment remains unchanged for life
- With competitors, premiums rise as you age

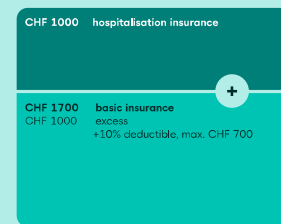


Our rate based on your age at enrolment rewards your loyalty as a customer as the amount of time you've been insured is taken into account when your premium is calculated. For hospitalisation insurance with most insurers, premiums increase noticeably every five years, which often leads to a financial burden in later years.

SWICA – save more money than with other insurers

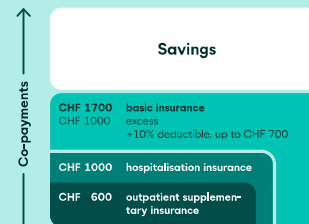
Sample calculation:

CHF 2700 per year:
max. co-payment for co-applicants



Co-applicants

CHF 1700 per year:
max. co-payment with SWICA



SWICA

With SWICA, your maximum annual co-payment is generally lower than with other health insurers. SWICA is the only health insurance company that applies co-payments from basic insurance to your supplementary insurance.