



Form

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**Confirmation of existing mandatory/compulsory health insurance abroad\* and of equivalent insurance cover for medical care in Switzerland during the stay in Switzerland**

\*outside EU-/EFTA

*Art. 2 Paragraph 2 KVV states: "Upon application, persons who are subject to mandatory health insurance cover under the law of a country with which there is no arrangement governing separation from the insurance obligation are exempted from the Swiss health insurance obligation in so far as inclusion in the Swiss insurance system would constitute a double burden and provided they have equivalent insurance cover for medical care in Switzerland".*

Last name, first name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Address in Switzerland: \_\_\_\_\_

Home Country: \_\_\_\_\_

Stay in Switzerland from (dd.mm.yyyy) \_\_\_\_\_ to \_\_\_\_\_

**The undersigned foreign health insurance company confirms:**

- The above-named person is **obligatorily** insured against illness in (home country) \_\_\_\_\_ and cannot be exempt from compulsory health insurance in the home country during the stay in Switzerland  
**and**
- The above-named person is entitled to **full reimbursement** of medical expenses incurred during the stay in Switzerland from \_\_\_\_\_ to \_\_\_\_\_ as follows:

**Federal Act on Health Insurance (HIA)**

Status as of 01.01.2015

**Art. 25 General benefits in the case of sickness**

1 Compulsory health care insurance covers the costs of diagnosing and treating sickness and its effects.

2 These benefits cover:

a. examinations, treatment and care of an in- and out-patient, at the residence of the patient, in a hospital or in a medical-social establishment by:

1. doctors,

2. chiropractors,

3. persons providing services prescribed or ordered by a doctor;

b. analyses, medicaments and diagnostic and therapeutic services and equipment prescribed by a doctor or - within the limits determined by the Federal Council - by a chiropractor;

c. a contribution to the costs of spa treatment prescribed by a doctor;

d. medical rehabilitation measures carried out or prescribed by a doctor;

e. a stay in the general ward of a hospital;

f. ... (repealed)

fbis. a stay in a maternity unit for the purpose of childbirth (Art . 29);

g. a contribution to medically necessary transport costs and rescue costs;

h. services of pharmacists in dispensing the medicaments prescribed in accordance with letter b above.

**Art. 25a Nursing services in the event of illness**

- 1 Under compulsory healthcare insurance, a contribution is made to nursing services that are provided on the instructions of a doctor as an out-patient and where there is a clear need for nursing care on an outpatient basis, in day or night structures, or in a nursing home.
- 2 Acute and transitional care services that prove necessary following discharge from hospital and which are prescribed by a doctor in hospital are paid for by the compulsory healthcare insurance and by the insured's canton of residence for a maximum period of two weeks in accordance with the hospital funding regulations (Art. 49a Payment for in-patient services). Insurers and service providers shall agree on flat rate fees.
- 3 The Federal Council shall designate the nursing services and regulate the procedure for ascertaining the need.
- 4 The Federal Council shall specify the contributions in francs and differentiate them based on the level of care required. The decisive factor is the cost according to the need for care of nursing services provided with the required quality and efficiency at a reasonable cost. Nursing services shall be subject to quality control. The Federal Council shall specify the procedures.
- 5 In relation to nursing costs not covered by social insurances, a maximum of 20 per cent of the maximum care contribution fixed by the Federal Council may be passed on to the insured. The cantons shall regulate the payment of the remainder of the costs.

**Art. 26 Prophylactic medicine**

Compulsory health care insurance covers the costs of certain examinations intended to detect diseases in time as well as prophylactic measures for insured persons particularly at risk. Such examinations and prophylactic measures must be carried out or prescribed by a doctor.

**Art. 27 Congenital defects**

In the case of congenital defects not covered by the disability insurance scheme, compulsory health care insurance covers the costs of the same benefits as in the case of sickness.

**Art. 28 Accidents**

In the case of accidents pursuant to Art. 1a, para. 2, letter b\*), compulsory health care insurance covers the costs of the same benefits as in the case of sickness.

**Art. 29 Maternity**

- 1 In addition to the same costs as in the case of sickness, compulsory health care insurance covers special costs in the case of maternity.
- 2 These benefits cover:
  - a. periodic check-ups carried out by a doctor or a mid-wife or prescribed by a doctor during and after pregnancy;
  - b. delivery at home, in a hospital or in a semi-hospital establishment by a doctor or a mid-wife;
  - c. necessary advice on breast-feeding;
  - d. care and stay of a healthy newborn child staying with its mother in the hospital.

**Art. 30 Legal abortion**

In case of non-punishable termination of pregnancy pursuant to Article 119 of the Criminal Code compulsory sickness insurance covers the costs of the same benefits as in the case of sickness.

**Art. 31 Dental treatment**

- 1 Compulsory health care insurance covers the costs of dental treatment:
  - a. if it is caused by a serious and unavoidable disease of the masticatory system; or b. if it is caused by any other serious illness or its after-effects; or
  - c. if it is necessary for the treatment of a serious illness or its after-effects.
- 2 It also covers the costs of treatment of injuries to the masticatory system caused by an accident pursuant to Art. 1a, para. 2, letter b (i.e. accident which is not covered by any other insurance).

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Place, date

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Stamp and signature of the foreign health insurance company