



Cantonal Department of Home Affairs and Justice Social Insurance Office Premium Reduction and Compulsory Insurance Section

Forelstrasse 1 3072 Ostermundigen +41 (0)31 636 45 00 asv.pvo@be.ch www.be.ch/pvo

# Application for an exemption from compulsory health insurance in Switzerland

(Art. 6 para. 3 KVV and Art. 6 para. 4 [HIA])

- For persons formerly with privileges under international law (Art. 6 para. 3 Health Insurance Act [HIA]) and their family members (Art. 6 para. 4 HIA) and
- for persons who are jointly insured with a person with privileges under international law but who do not themselves enjoy privileges (Art. 6 para. 4 HIA)

# 1. Applicant

Surname				
First name				
Date of birth Sex	☐ female		□ male	
Address in Switzer- land				
Postcode / Town				
Marital status	□ single □ mar	ried/registered partnership	☐ separated/divorced	□ widowed
Telephone number				
E-mail				
Nationality				
Residence permit	□ B □ C □	L ☐ Legitimation card FDFA	other	
The application fo	r an exemption als	so applies to the following fa	mily members:	Relationship
Surname		First name	Date of birth	
Residence permit	□В□С□	L ☐ Legitimation card FDFA		
				Relationship
Surname		First name	Date of birth	
Residence permit	□ B □ C □	L ☐ Legitimation card FDFA	other:	
				Relationship
Surname		First name	Date of birth	
Residence permit	□В□С□	L ☐ Legitimation card FDFA	□ other:	

Details of perso	n with current privileges under international law				
ame					
name					
Date of birth Relationship with person(s) in Section 1					
Legitimation card type					
oyer <sup>1</sup>					
Remarks on app	olication				
	I <b>nature</b> rm that I have answered all the questions fully and truthfully. I undertake to inform the Social Insurance				
	he insurance contract and of any reduction in insurance cover that no longer guarantees equival ence				
e, date	Signature of Applicant				
ments to be submitte	d: s) (front and reverse side) for the applicant and all family members				
Former or curre	nt employer				
section must be completal beneficiary).	eted by the former or current employer under Art. 2 para. 1 let. a, b, i or k of the Host State Act (insti-				
The competent officer of the former employer hereby confirms that it no longer employs the person detailed under Section 1, but that the persons detailed under the Sections 1 and 2 are still insured under the former employer's health insurance scheme.					
Name of the health in	nsurer insuring the persons detailed under the Sections 1 and 2:				
The competent officer of the employer of the person detailed under Section 2 hereby confirms that the person detailed under Section 1 is jointly insured under the employer's health insurance scheme.					
Name of the health in	nsurer insuring the persons detailed under Sections 1 and 2:				
, date	Stamp and signature of the employer				
	Liability and signapplicant, hereby confine of the termination of the termination.  The competent office of the termination of the termination of the termination of the termination.  The competent office of the termination				

<sup>&</sup>lt;sup>1</sup> Institutional beneficiary under Art. 2 para. 1 let. a,b, i or k of the Host State Act (HSA, of 22 June.2007)

## 6. Health Insurance (Confirmation of equivalent insurance cover for treatment in Switzerland)

This section must be completed by the health insurer. An insurance policy or a separate letter from the health insurance scheme is not sufficient.

## Details of the insured person(s)

			Relationship
Surname	First name	Date of birth	
			Relationship
Surname	First name	Date of birth	
			Relationship
Surname	First name	Date of birth	

The undersigned health insurer confirms on page 4 of this form, that the abovementioned person(s) is entitled from

to full reimbursement of healthcare costs in Switzerland in accordance with the Federal Act on Health Insurance (see Section 7). In addition, the health insurer confirms that the costs will be covered in accordance with Swiss tariffs and not the tariffs of the (former) country of residence and that the Office for Social Insurance will be notified in the event of the termination of the health insurance contract provided the person(s) remain(s) resident in Switzerland (guarantee of compulsory health insurance cover).

# 7. Federal Act on Health Insurance (HIA)

Status as of 01.07.2021

## Art. 25 General benefits in the event of illness

- 1 Compulsory health insurance covers the costs of diagnosing and treating an illness and its consequences.
- 2 General benefits cover
  - a examinations and treatments received as an out-patient, as an in-patient or in a nursing home, as well as the nursing services provided in a hospital by:
    - 1 doctors.
    - 2 chiropractors
    - 3 persons providing services prescribed or ordered by a doctor or a chiropractor;
  - b analyses, medicines, and equipment for examinations or treatment prescribed by doctors and, subject to the requirements determined by the Federal Council, by chiropractors:
  - c a contribution to the costs of spa treatments 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 ...
  - f<sup>bi</sup> a stay in a birth centre for the purpose of childbirth (Art. 29);
  - g a contribution towards medically required transport costs and the costs of rescue;
  - h the services of pharmacists in dispensing the medicine prescribed in accordance with letter b.

### 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.
- 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.
- 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.
- The insured person may be charged a maximum of 20 per cent of the maximum care contribution fixed by the Federal Council for care costs not covered by social insurance. The cantons shall regulate the payment of the remainder of the costs. The canton in which the insured person is resident is responsible for determining and paying the remainder of the costs. In relation to outpatient care, the rules on paying the remainder of the costs in the canton where the service provider is located apply. A stay in a nursing home does not establish a new responsibility. If, at the time of admission to a nursing home, the insured person cannot be provided with a place in a nursing home in the geographical vicinity in his or her canton of residence, the canton of residence shall pay the remainder of the costs in accordance with the rules of the canton in which the service provider is located. The payment of the remainder of the costs and the right of the insured person to stay in the nursing home in question are guaranteed for an unlimited period.

### Art. 26 Prophylactic medicine

## Kanton Bern Canton de Berne

Compulsory healthcare insurance covers the costs of certain examinations aimed at the early detection of disease and the costs of prophylactic measures for the benefit of insured persons who are especially at risk. The examinations or prophylactic measures must be carried out or prescribed by a doctor.

### Art. 27 Congenital defects

In the case of congenital defects (Article 3 paragraph 2 Federal Act on General Aspects of Social Security Law (GSSLA)) that are not covered by invalidity insurance, compulsory healthcare insurance covers the costs of the same services as in the case of illness.

#### Art. 28 Accidents

In the case of accidents in terms of Article 1 paragraph 2 letter b, compulsory healthcare insurance covers the costs of the same services as in the case of illness.

### Art. 29 Maternity

- In addition to the costs of the same services as in the case of illness, compulsory healthcare insurance covers the costs of the services specifically required in maternity cases.
- 2 These services include:
  - a the check-ups carried out by doctors or midwives or prescribed by doctors during and after pregnancy;
  - b delivery at home, in a hospital or a birth centre as well as obstetrics services provided by doctors or midwives;
  - c the required advice on breast-feeding;
  - d the care and stay of a healthy new-born child for as long as it stays with its mother in hospital.

#### Art. 30 Lawful termination of pregnancy

In the case of a lawful termination of pregnancy in accordance with Article 119 of the Swiss Criminal Code, compulsory healthcare insurance covers the costs of same services as in the case of illness.

#### Art. 31 Dental treatment

- 1 Compulsory healthcare insurance covers the costs of dental treatment where:
  - a it is caused by a serious and unavoidable disease of the masticatory system; or
  - b it is caused by any other serious illness or its after-effects; or
  - c it is required in order to treat a serious illness or its after-effects.
- 2 It also covers the costs of the treatment of injuries to the masticatory systems caused by an accident in terms of Article 1, paragraph 2 letter b (accident not covered by accident insurance).

Place, date	Stamp and signature of the health insurance company				

Full address of the health insurance company