

Group daily sickness benefits insurance – information sheet for employees

Based on the VVG (Federal Act on Insurance Contracts)

You are insured against the consequences of incapacity to work as a result of illness under your employer's group contract. This information sheet provides you with the most important information on your insurance cover.

Insurance benefits

What is the legal basis?

Your employer is obliged by law to continue to pay your salary for a certain time if you are ill. The duration and amount of this continued salary payment depend on the number of service years, the region and the provisions in the employment contract. Employers can take out voluntary cover for the financial consequences of this obligation in the form of a group daily sickness benefits policy.

What is insured?

You are entitled to a daily allowance if you are 25% or more unfit for work as confirmed by a doctor as a result of illness or pregnancy. The allowance is paid pro rata per calendar day and is calculated according to the level of the incapacity to work.

What should you do if you fall ill?

Please inform your employer immediately if you are sick. If any additional steps should be necessary in your case, we will inform you or your employer when the time comes.

Important provisions

Notifications

Your employer is obliged to inform you of the material content of the insurance contract and any amendments thereto, as well as the cancellation of the contract.

Overcompensation/offsetting

According to the provisions, daily benefits insurance may not cause you to receive more in benefits for full or partial incapacity to work than your insured loss of income. Overcompensation occurs when you receive more in benefits from several insurance schemes than the income you would have received if you had remained healthy. Helsana has the right to charge any such overcompensation to the daily benefits.

Payment

Helsana usually pays the daily allowance directly to the employer who is obliged to pass the allowance on to you.

Obligations of the insured

Registration and obligations in the event of a claim

You are entitled to a daily allowance if you are confirmed to be unfit for work and are therefore suffering a loss of income. Please inform your employer immediately if you are sick. The beginning of the allowance payments can be postponed or even cancelled altogether if you notify your illness at a later date or do not have a medical certificate.

You are only entitled to benefits for as long as you receive the treatment that is medically necessary and follow the instructions of the medical staff. You must also submit a medical certificate every month. When you are able to work again, please send us a certificate attesting to this from your doctor.

To process your claim Helsana will need a power of attorney granting access to the medically relevant data. Helsana will only use this data to process your claim. You enjoy the full protection of the Federal Data Protection Act and the data protection guidelines of Helsana.

Please inform Helsana 14 days before you travel abroad, either to take a cure at a spa, for treatment, medical care, confinement or on vacation. You will only retain your full entitlement to benefits while abroad if you have received prior approval from Helsana.

Registration for disability insurance

We will coordinate your claim for benefits with the Federal Disability Insurance. You will receive a registration form from us after no more than 120 days. Please complete it in full and return it to us as quickly as possible. Please contact us if you require any assistance.

Breach of obligation to cooperate

Insurance benefits can be temporarily or permanently reduced or in serious cases even refused if you breach your obligations. This will not be applied if you can prove that you are not at fault.

End of your insurance cover

Reasons for a lapse in your insurance cover

Your insurance cover under this policy ends in the following situations:

- If the insurance policy is cancelled or lapses.
- If the employment contract with the employer is terminated
- Upon reaching the regular AHV retirement age. Exception: You still have full capacity to work when you reach regular AHV age and continue to work for your employer without a break. In this case you remain insured until you turn 70, with benefits paid for a maximum of 180 days.
- Upon moving abroad. Employees who continue to be subject to Swiss social insurance legislation are excluded from this restriction.

Transfer to individual daily allowance insurance

If your employment relationship is terminated, you can transfer to Helsana's individual daily allowance insurance within three months of the end of the employment relationship. No medical check-up is required.

This right of transfer does not apply in the following cases:

- You live abroad;
- You have reached the AHV retirement age or you take early retirement;
- You had a fixed-term employment contract and you are not registered with the unemployment insurance (ALV);
- Your employment relationship was terminated during the probation period and you are not registered with the unemployment insurance (ALV);
- You are changing jobs and joining the group daily sickness benefits insurance of your new employer
- The contract is continued by a new insurer under an agreement on the right of transfer
- Your benefits under the group contract are exhausted and you are no longer fit for work

Do you have any questions?

Should you have any questions about this information leaflet or the applicable General Insurance Conditions, please contact your employer.

Or you can call us direct on 0844 80 81 88 Mon. – Fri., 8 – 12 am / 1 – 5 pm.

Helsana Supplementary Insurances Ltd PO Box

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This information sheet does not form part of the contract. It is issued simply to provide information on the material provisions of the General Insurance Conditions (GIC) for the group daily sickness benefits insurance (Helsana Business Salary pursuant to the VVG). These serve as the basis for the insurance contract.