

Changes to your insurance from 1 January 2025

An overview of changes
that may affect you

Helsana

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Table of contents

- 2 **Basic insurance**
- 4 **Supplementary insurance**
- 6 **Automatic allocations at additional cost**
- 7 **Daily allowance insurance**
- 8 **Capital insurance**
- 9 **Miscellaneous**

Basic insurance

BASIS

Children aged 0–18

The children's discount on basic insurance is now 77% for all children in a given family, instead of 75% for the first two children and 90% for the third child and subsequent children, as it was before. We have adjusted the children's discount to standardise it, irrespective of the number of children a family has.

Insured persons born in 2006

Adult premium rates apply for young people as of 1 January following the insured person's 18th birthday, with a standard deductible of CHF 300.

The previously applicable children's discount will then cease to apply. However, we support all young people with a youth premium up to the age of 25. This is 20% below the full adult premium, or 10% lower for residents of other countries (cross-border commuters, employees

posted abroad).

For those looking for a lower premium, we recommend increasing the annual deductible or switching to an alternative insurance model.

Insured persons born in 1998

Under the Federal Health Insurance Act (KVG), we are not permitted to offer insured persons a discounted youth premium beyond the age of 25. These customers will therefore be charged the adult premium. For those looking for a lower premium, we recommend increasing the annual deductible or switching to an alternative insurance model.

Insured men born in 1959, women born in 1960 and those born in 1949

In principle, all persons insured under basic insurance are automatically included in statutory accident coverage on

reaching OASI retirement age.

Insured persons who are still in employment can apply in writing for the exclusion of accident coverage, provided they have statutory insurance against non-occupational accidents.

Accident cover will again be automatically included once they reach the age of 75, if not before.

Changes to BeneFit PLUS Flexmed

The BeneFit PLUS Flexmed general practitioner model gives insured persons flexible alternatives to BeneFit PLUS General Practitioner and BeneFit PLUS Telemedicine. For health-related matters, they can choose between talking to their chosen GP or having a consultation with the Telemedicine Centre. This means that there are two points of contact to choose from.

Compassana is being added to the Insurance Conditions for BeneFit PLUS Flexmed with effect as of 1 January 2025. BeneFit Flexmed policyholders will be notified of the change in writing in October, and can indicate their consent by 31 October 2024 using the enclosed reply slip. If no such consent is given, these insured persons will automatically be reassigned to BeneFit PLUS General Practitioner insurance and will only be able to consult their chosen general practitioner from 1 January 2025.

Compassana connects service providers in the field of medicine and related sectors, and promotes collaboration using a digital health platform. The platform optimises integrated care provided by health service providers and the coordination of patient pathways. The myHelsana and Compassana apps must be installed on a suitable mobile device, and the corresponding consent to the sharing of data must have been given, in order for it to do this.

In the event of new, acute symptoms, the medically certified, AI-based symptom checker in the Compassana app will provide BeneFit Flexmed policyholders with an initial assessment. They can then consult their chosen GP practice or telemedicine provider (Medi24).

For more information, including the Insurance Conditions, go to

helsana.ch/en/benefit-plus-flexmed

Supplementary insurance

Information on choosing a hospital for customers with HOSPITAL PLUS/COMFORT, including BONUS and CLASSICA

Among other aspects, your private or semi-private supplementary hospital insurance includes an unrestricted choice of doctor and hospital, as well as additional comforts and accommodation benefits. We regularly negotiate with the hospitals regarding the tariffs used to pay compensation for these benefits, as part of our commitment to fair prices and affordable premiums. If no agreement can be reached, this results in what we call an “unregulated” situation for the private or semi-private ward. In order to enable us to keep benefit costs at their current levels, as of 1 January 2025, we are introducing a 30% excess on treatments administered in hospitals that do not offer additional benefits governed by a contract. A list of the hospitals this applies to, which is kept constantly updated, can be found on Helsana’s website.

This change is being made on the basis of section 16 of the General Insurance Conditions for Supplementary Health Insurance. Insured persons who do not accept the change may cancel their supplementary hospital insurance in writing as of 31 December 2024. Your notice of cancellation must reach us by 29 November 2024.

Further information:

helsana.ch/tariff-negotiations

Five new benefit components for PRIMEO

From 1 January 2025, customers with PRIMEO outpatient supplementary health insurance will receive additional benefits without any changes to their premiums.

Based on our customers’ needs, we have added the following five benefit components:

- Accommodation for accompanying persons (rooming-in)
- Support at home
- Childcare and childminding
- Pet care
- Visits to thermal baths

The benefits and benefit conditions have been added to the Additional Insurance Conditions (AIC).

Find out more:

helsana.ch/en/primeo

New offer for Helsana Advocare PLUS and EXTRA

Our customers can now take out Advocare PLUS or EXTRA without combining them with TOP/COMPLETA, or maintain them despite terminating TOP/COMPLETA/OMNIA.

A corresponding addition is being made to the Advocare PLUS/EXTRA General Insurance Conditions (GIC) as of 1 January 2025. This new version will replace the previous one dated 1 January 2024.

The General Insurance Conditions can be accessed at helsana.ch/gic.

Changes in the premium rates for various supplementary insurance products

Premium reductions

The premiums of insured persons with the HOSPITAL BONUS PLUS and CURA products will once again be reduced by 5% in 2025.

Premiums will be reduced by 32% for HOSPITAL COMFORT, 2% for HOSPITAL BONUS COMFORT and 4% for HOSPITAL PLUS in all cantons except for Geneva.

The premiums for CASA household daily allowance insurance will be reduced by between 20% and 50%.

Premium increases

The monthly premiums paid for COMPLETA for children, adolescents and young adults between the ages of 6 and 25 will increase by between CHF 5.05 and CHF 8.40, and those paid for adults aged 31 and over will increase by between CHF 8.45 and CHF 15.40, due to inflation. The premiums for children up to the age of 5 and adults between 26 and 30 years of age will stay the same.

The premiums for COMPLETA EXTRA will go up 4% due to inflation.

The premiums for HOSPITAL COMFORT, BONUS COMFORT and HOSPITAL PLUS will increase by 6% in the canton of Geneva on account of the cantonal hospital planning.

Premiums for Helsana Advocare PLUS and EXTRA policyholders born in 2006

The products Helsana Advocare PLUS and EXTRA are free until the age of 18. As of 1 January 2025, premiums will become payable on these products at a rate of 50%.

Insured persons born in 1999

From 1 January 2025, the young people’s discount will expire at the age of 25.

Age-related changes in premium for supplementary insurance

Premium rates for supplementary insurance products are generally graded by age. The tariffs are divided into five-year groups (0–5 years, 6–10 years, etc.). Transfers to the respective next age group will happen on 1 January in each case. The insurance policy document indicates whether the premiums are graded by age and when the last age-related adjustment took place.

Automatic allocations at additional cost

CURA long-term care insurance for HOSPITAL policyholders

Insured men born in 1959 and insured women born in 1960

Insured persons with one of the following supplementary hospital insurance policies:

HOSPITAL ECO/PLUS/COMFORT/PLUS BONUS/COMFORT BONUS/PLUS CLASSICA/COMFORT CLASSICA or ALBERGO DUO/SOLO with the 2014 Additional Insurance Conditions (AIC) receive CURA Long-Term Care Insurance when they reach OASI retirement age.

Insured persons are accepted into the policy on 1 January 2025 without a medical examination. The level of the daily benefit depends on which supplementary hospital insurance has been taken out.

Your policy document states the exact details of the product together with the monthly premiums for CURA.

Find out more:

helsana.ch/en/cura

Insured persons with the 2016 Additional Insurance Conditions (AIC) are not entitled to CURA long-term care insurance. However, they can apply for this by undergoing a medical examination.

DENTApplus Bronze supplementary insurance based on an entitlement under TOP or COMPLETA

Insured persons born in 2004

As of the end of the calendar year in which the insured person turns 20, entitlement to cover for treatment costs for the correction of misaligned teeth under the TOP or COMPLETA products will no longer be available. Instead, as of 1 January 2025, insured persons will receive DENTApplus Bronze dental insurance without a medical examination.

The monthly premiums for DENTApplus Bronze and the insured benefits for dental treatment, preventive treatment, dental check-ups, maxillary surgery and orthodontics are set out in your policy document.

Find out more:

helsana.ch/en/dentapplus

Waiver of automatic allocation of CURA and DENTApplus Bronze

If you do not want to take out the CURA Long-Term Care Insurance or DENTApplus Bronze Dental Insurance products that you have been allocated in spite of the benefits set out above, please notify us in writing by 31 December 2024. In this case, the relevant insurance coverage will not begin on 1 January 2025.

Daily allowance insurance

SALARIA individual daily allowance insurance under the VVG

On reaching OASI retirement age (men born in 1959, women born in 1960)

The insurance will be discontinued in principle for all insured persons effective 1 January 2025.

For insured persons who are still employed, the policy can be continued until the age of 70 on the following basis:

- Maximum daily benefit as previously
- Duration of benefits: 180 days
- Maximum waiting period: 30 days

If you would like to take up this option, please notify us in writing by 31 January 2025.

Insured persons who have reached the age of 70 (born in 1954)

Existing insurance policies will be cancelled with effect from 1 January 2025.

SALARIA individual daily sickness benefits insurance under the KVG

Insured persons who have reached the age of 65 (born in 1959)

From 1 January 2025, this insurance will be continued as follows: maximum daily benefit of CHF 10 per person in the event of accident or illness.

CASA household daily allowance insurance under the VVG

On reaching OASI retirement age (men born in 1959, women born in 1960)

The policy will be continued until the age of 70 with a maximum daily benefit of CHF 50. Higher daily allowances will be reduced to CHF 50 as of 1 January 2025.

Insured persons who have reached the age of 70 (born in 1954)

The policy will be cancelled with effect from 1 January 2025.

Capital insurance

PREVEA Illness and KTI capital insurance in the event of death or disability

Maximum insured sum

For insured persons born in 1969, the disability sum will be reduced automatically to a maximum of CHF 100,000.

End of insurance

For insured persons born in 1965, the insurance cover ends automatically on 31 December 2024.

PREVEA Accident

Maximum insured sums

For insured persons born in 1954, higher death benefits will be reduced automatically to a maximum of CHF 20,000 and the disability sum to a maximum of CHF 100,000 (without progression).

RI Risk disability insurance

Insured persons born in 1959

The policy ends when the insured person reaches the age of 65.

RL Risk life insurance

Insured persons born in 1959

The policy ends when the insured person reaches the age of 65.

Aerosana UTI

Insured persons born in 2006

For insured persons who have turned 19, the new insured sums apply: CHF 50,000 in the event of death and CHF 100,000 in the event of disability.

Insured persons born in 1959

The policy ends when the insured person reaches the age of 65.

Miscellaneous

Notice period for basic insurance

Notice of termination for basic insurance must be received by Helsana Insurance Company Ltd by 5 p.m. on Friday 29 November 2024.

Notice period for supplementary insurance

Supplementary insurance policies under the VVG may be terminated in writing, provided a minimum term of contract of one year has expired, by 5 p.m. on 30 September 2024 (receipt of the letter by Helsana) as of 31 December 2024. This excludes products with an existing long-term policy.

Supplementary insurance policies whose premiums are changing may be terminated in writing within 30 days of receipt of the notification of change with effect from the date on which the change enters into force.

Change in the cash discount for payment frequency

The 0.5% cash discount for paying every six months is being discontinued as of 1 January 2025. The discount for paying annually is being reduced from 1% to 0.5%. You can still pay on a monthly or quarterly basis (with no discount).

You can notify Helsana of a change in payment frequency by 30 November 2024.

Changes and further information:

helsana.ch/discount

Paying by credit card

Thanks to our partnership with CrediBill Accept, our policyholders can now pay their Helsana invoices by credit card.

Find out more:

helsana.ch/en/payment-methods

Is your address up to date?

Have you recently moved house or are you planning to do so soon? As per the Insurance Conditions, you are required to register a change of address with us immediately. You can do this easily via the myHelsana client portal.

CO₂ and VOC levy: refund of environmental levies

In 2025, all Swiss residents will once again receive a refund of the incentive levies raised by the Swiss federal government. These incentive levies set incentives to reduce emissions of environmentally damaging substances and gases in Switzerland (particularly CO₂ and volatile organic compounds/VOCs). For administrative reasons, the refund is being paid out in the form of a reduction in the premiums for statutory health insurance.

Helsana will credit the amount of CHF 61.80 per insured person against all premiums due during the year. Where premiums are paid monthly, the amount credited will be CHF 5.15 per month.

Information sheet on CO₂ and VOC levies
at: helsana.ch/environmental-tax

Detailed information:
bafu.admin.ch/CO2-levy
bafu.admin.ch/voc



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