

# Group daily sickness benefits insurance – information sheet for employees

## Based on the KVG (Federal Health Insurance Act)

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 insurance policy.

#### **What is insured?**

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

#### **What should I do if I become ill?**

Please inform your employer immediately if you are sick. Should any additional steps 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 sickness 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 reduce the daily benefit proportionally in the event of such overcompensation.

#### **Payment**

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

## Obligations of the insured

### Registration and obligations in the event of a claim

You are entitled to daily benefits 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 entitlement to benefits 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. You must also submit a medical certificate every month.

To process your claim we need your power of attorney granting us 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 at least five days in advance if you travel abroad for treatment, medical care, childbirth or holiday. In addition, medical confirmation must be submitted stating that this will not jeopardise the healing process. You will only retain your full entitlement to benefits while abroad if you have informed Helsana in advance.

### 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. Do not hesitate to contact us if you require any assistance.

### Breach of obligation to cooperate

Insurance benefits can be temporarily or permanently reduced or even refused if you breach your obligations. This will not be applied if you can prove that you are not at fault, or that the breach had no influence on the benefits.

## End of your insurance cover

### Reasons for a lapse in your insurance cover

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

- When the insurance policy is cancelled or lapses.
- When the employment contract comes to an end.
- Upon reaching the age of 65.
- Upon moving abroad. Employees who continue to be subject to Swiss compulsory health insurance are excluded from this restriction.

### Transfer to individual daily sickness benefits insurance

If your employment relationship is terminated, you can transfer to Helsana's individual daily sickness benefits 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, unless you continue to be subject to compulsory health insurance in Switzerland.
- You have turned 65.
- 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 for full incapacity for work.

### Do you have any questions?

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

Or you can call us direct on

0844 80 81 88 Mon – Fri, 8 am – 12 pm / 1 pm – 5 pm.

### Helsana Insurance Company Ltd

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