





Basic insurance

Basic insurance is obligatory for all Swiss residents. It provides basic medical care in the event of illness, accidents and maternity. As the benefits are prescribed by law, they are the same from every health insurer.

Outpatient treatment

Full cover throughout Switzerland

Subject to the condition that the treatment is prescribed by a doctor and is listed in the benefits catalogue of the basic insurance scheme.

Outpatient treatment

Provided by licensed medical practitioners, chiropractors or medical support staff; a maximum tariff is applicable

Complementary medicine

Carried out by licensed medical practitioners who are members of the Swiss Medical Association (FMH) with recognised training, in accordance with the Health Insurance Benefits Ordinance (KLV)

Acupuncture, anthroposophic medicine, pharmacotherapy with traditional Chinese medicine (TCM), traditional homoeopathy and phytotherapy

Prevention

Throughout Switzerland, if prescribed by a doctor, according to agreed rates

We reimburse the costs of certain examinations for the early detection of illnesses and of preventive measures (e.g. vaccinations)

Medication

Medication on the specialities list

You receive the costs of medically prescribed medication which is covered by statutory health insurance and is on the specialities list

Spectacle lenses and Contact lenses

Max. CHF 180/year up to 18th birthday

Dental treatment

Throughout Switzerland, if performed by recognised professionals, according to statutory or agreed tariff

Benefits for accident-related tooth damage (if accident cover is included), serious diseases of the masticatory system and serious general illnesspursuant to Articles 17–19a of the Health Care Benefits Ordinance (KLV)

Medical aids

Medical aids which are medically necessary and prescribed by a doctor, in accordance with prescription for aids and equipment

Transportation

Costs covered for transportation and rescue operations in Switzerland

- 50% up to CHF 500/year for transportation
- 50% up to CHF 5,000/year for rescue operations

Abroad

Emergency treatment (outpatient and inpatient) during temporary stays abroad

- EU/EFTA countries or the UK: benefits in accordance with the social tariff schedule of the country of temporary residence
- Other countries: up to max. twice the Swiss tariff amount (canton of residence)

Pregnancy

- Eight check-ups (seven before the birth, one afterwards)
- Two ultrasound examinations
- Three breastfeeding guidance sessions
- CHF 150/year for antenatal classes
- Full cost coverage for home birth or in the general ward of a listed hospital in the canton of residence

Hospital

Free choice of hospital from list

Inpatient treatment: Full cover for a general ward in listed hospitals in your canton of residence

Balneotherapy

You receive **CHF 10/day**, for up to 21 days/calendar year, for balneotherapy at recognised therapeutic spas in Switzerland, if medically required and prescribed by a doctor

Nursing homes

Healthcare in recognised nursing homes

Co-payment according to the Health Care Benefits Ordinance (KLV)

Adults

Children

Choice of deductible ¹	Maximum reduction in premium ²
CHF 300	none
CHF 500	CHF 140
CHF 1,000	CHF 490
CHF 1,500	CHF 840
CHF 2,000	CHF 1,190
CHF 2,500	CHF 1,540
CHF 0	none
CHF 500	CHF 350

More savings opportunities

77%

Children's discount (ages 0 to 18) 3

20% Young people's discount (ages 19 to 25)

7%

Accident exclusion discount (working persons only)

Once deductible has been met, excess of 10% up to max. CHF 700/year or CHF 350/year for children.

² Maximum reduction in premium per year prescribed by law based on the optional deductible.

³ as of 1 January 2025

Basic insurance models

BASIS

Standard model: you decide which doctor you would like to see for each medical concern

helsana.ch/en/basis



Free choice of doctor

BeneFit PLUS General Practitioner

General practitioner model: in the event of a medical concern, your first port of call is always your GP or group practice

helsana.ch/en/benefitplus



One contact point for all concerns

Premium reduction

Medical point of contact

Nο

You are free to choose a doctor to treat you on a case-bycase basis and consult them directly. Use the premium calculator at helsana.ch to calculate your

Your medical point of contact is the GP or group practice you choose from our list of doctors.

Benefits

Self-determined medical care

- Free choice of doctor at all times
- Direct access to specialists for outpatient treatment

Personal support from your GP

- Medical treatment tailored to your personal medical history
- Avoid unnecessary multiple examinations

Obligation

No

In the event of a medical problem, you choose the professional to treat you on a case-by-case basis (GP, specialist, chiropractor, etc.).

If you have medical concerns, always contact your chosen GP (or a doctor at your group practice).

In consultation with you, your GP or group practice will design a binding course of treatment tailored to your particular condition and medical needs.

If necessary, your GP (or your group practice) will refer you to a specialist or hospital.

Ideal for

Individuals who always want complete freedom of choice.

People who value being able to see their GP in person.

Advice line

 $For medical \ queries, you \ can \ access \ our \ free \ Centre \ for \ Telemedicine \ on \ 0800 \ 100 \ 008 \ or \ online \ via \ my Helsana.$

Exceptions under the BeneFit and PREMED-24 models Insured persons do not have to refer to the first point of contact before gynaecological check-ups, obstetric care, dental treatments or subsequent tests by an ophthalmologist to adjust visual aids.

BeneFit PLUS Telmed

Medical advice over the phone: The independent Centre for Telemedicine will determine what treatment you need, if any

helsana.ch/telemedicine



Free, binding advice

BeneFit PLUS Flexmed

You choose the first point of contact: GP practice or the Centre for Telemedicine

helsana.ch/en/benefit-plus-flexmed



24 Medical support around the clock

PREMED-24

Medical advice over the phone: the independent Centre for Telemedicine will inform you of any treatment

helsana.ch/en/premed-24



Free, non-binding

Premium reduction Use the premium calculator at helsana.ch to calculate your premium

Medical point of contact Your medical point of contact is a medical professional from the independent Centre for Telemedicine.

After performing an initial assessment using the symptom checker in the Compassana app,1 select one of the following options:

Option 1: your selected general practitioner from our list of doctors, or a group practice.

Option 2: the medical professionals at the Centre for Telemedicine.

Following a consultation with the medical professional at the independent Centre for Telemedicine, you are free to choose a doctor to treat you.

Benefits

Medical care by telephone

- 24-hour medical advice
- Accessible from anywhere in Switzerland
- Optimum coordination of medical treatment

Flexible care from your GP and by phone

- No unnecessary visits to the doctor
- Fast medical advice by phone from Medi24

Medical care by telephone

- 24-hour medical advice
- Initial assessment without any obligation
- Avoid unnecessary visits to the doctor

Obligation

In the event of a medical problem, always call the independent Centre for Telemedicine.

In consultation with you, a medical professional or doctor will design a binding course of treatment tailored to your particular condition and medical needs, whether it is home treatment, to visit the doctor or go to hospital.

If necessary, a healthcare professional will refer you to a specialist or hospital.

In the case of health problems, always start by using the symptom checker in the Compassana app¹ for an initial medical assessment. You should then contact your selected GP practice, your group practice or the Centre for Telemedicine In consultation with you your GP or group practice or the Centre for Telemedicine will design a course of treatment tailored to your particular condition and medical needs.

If necessary, you will be referred for further treatment to a specialist or hospital.

If you have medical concerns, always consult the free medical service from Medi24 to receive non-binding advice.

If necessary, you can then choose a doctor to go to.

Ideal for

People who would like to benefit from 24/7 medical advice from a central point of contact.

People who want the flexibility to decide whether to seek personal support from their general practitioner or group practice or medical care over the phone- and like using digital channels for administrative tasks. You enjoy access to everything in one place.

People who like to use a medical advice service.

Advice line

0800 800 090

0800 884 040

0800 773 633

Exceptions under the BeneFit and PREMED-24 models

Insured persons do not have to refer to the first point of contact before gynaecological check-ups, obstetric care, dental treatments or subsequent tests by an ophthalmologist to adjust visual aids.

¹ Available as of 2025. First, you need to register with Compassana. You only need to do this once. You can find instructions on how to do so at helsana.ch/en/benefit-plus-flexmed

Using the symptom checker in Compassana is only mandatory for adults and in cases involving new, acute medical complaints. Children cannot use the symptom checker.

We are here to help you.

Helsana Group 0844 80 81 82 helsana.ch/en/contact helsana.ch/locations

Proud to be a top-rated provider.









COMPLETA from Helsana scored highest on scope of benefits. moneyland.ch is the independent comparison service for insurers and banks.