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Supplementary Insurance Conditions (ZVB) HOSPITAL EXTRA Hospital Allowance Insurance

List of Contents

General

1 Purpose

Benefits

2 Insurance cover

3 Secondary liability and third-party benefits

4 Duration of benefits

5 Benefit exclusions

Miscellaneous

6 Annulment of premium limits

granted from this insurance policy provided the insurer has concluded a KVG contract with the relevant hospital (Helsana KVG contract hospital).

The insurer keeps a list of the Helsana KVG contract hospitals, which provides information on the range of recognised benefits. This list is continuously updated and can be examined at the insurer's offices, or a copy can be requested.

3 Secondary liability and third-party benefits

The insured benefits are drawn up irrespective of other insurance policies that may be in place.

4 Duration of benefits

For an inpatient stay in an acute care hospital or in a rehabilitation clinic, the insured benefits are provided on a per day basis for a maximum of 30 days in a calendar year.

5 Benefit exclusions

In addition to the exclusions listed under Section 21 of the AVB, no benefits will be provided from HOSPITAL EXTRA for:

- a stay in a hospital or ward for chronic illnesses;
- a stay in a psychiatric clinic or in the psychiatric ward of an emergency hospital;
- a stay in a withdrawal clinic;
- a stay in a care home;
- an outpatient stay in a hospital;
- a stay and/or treatment in a geriatric medicine clinic or a clinic or ward for acute geriatric medicine;
- balneotherapy and/or convalescent treatment;
- treatment abroad.

Miscellaneous

6 Annulment of premium limits

The premium limits set in Section 12.2 of the General Insurance Conditions do not apply to HOSPITAL EXTRA.

Translation: Only the original German text approved by the Swiss Supervisory Authority is binding.

General

1 Purpose

HOSPITAL EXTRA pays out insured benefits for an inpatient stay in an acute care hospital or a rehabilitation clinic if there is a stated need for hospitalisation as a result of acute illness, accident or during pregnancy.

Benefits

2 Insurance cover

- 2.1 For an inpatient stay in an emergency hospital or rehabilitation clinic, benefits will be provided from HOSPITAL EXTRA according to the level agreed in the insurance policy. The insured person will not need to provide proof of cost.
- 2.2 The insured person must provide proof of the need for hospitalisation and also that the inpatient stay took place in an acute care hospital or rehabilitation clinic. A need for hospitalisation is defined as when the condition of the insured person is such that inpatient treatment in an acute care hospital or rehabilitation clinic is a necessity.
- 2.3 Benefits from HOSPITAL EXTRA will be granted only provided the inpatient stay is in an acute care hospital or in a rehabilitation clinic that fulfils the requirements in accordance with Section 8.1 of the General Insurance Conditions (AVB). According to this principle, for hospitals not recorded in the cantonal planning and hospital lists pursuant to Article 39 of the Federal Health Insurance Act (KVG) benefits are

