

Responsibility for costs of the Comprehensive Health Insurance according to Swiss Health Insurance Law

The following table details the main comprehensive benefits. The enacting decrees are lawfully binding (the Swiss Federal Law concerning the Health Insurance as well as the complementary regulation of execution and accompanying legal verdicts).

You can request assistance from any approved health care providers. In case a provider of health care is not participating in the system any more, costs will not be settled by CIFESIA. This health care provider has to inform the patient accordingly in advance of treatment. Hospitals have to appear on the hospital lists of the Swiss Cantons. These lists are available at the offices of CIFESIA.

Ambulatory treatment in respect of school medicine	Payment is made for costs resulting from approved physicians, chiropractors, midwives, logopaedists, physio- and ergotherapists, nurses respectively organisations of healthcare and home care as well as nutrition advisers.
Ambulatory treatment in respect of alternative healing methods (complementary medicine)	Acupuncture, anthroposophical medicine, Chinese medicine, homoeopathy, neuraltherapy and phytotherapy administered by physicians with recognised further education in the respective fields of treatment.
Medication	Medication handed out or prescribed by a physician, homoeopathic and phytotherapeutic medicine if this appears in the approved list of medicines or speciality lists (other medication will not be paid for).
Devices	Devices prescribed by a physician, which serve the examination or treatment e.g. neck supports, crutches, insulin injections, incontinence helps, appliances for inhalation and so on, according to the list of specialities.
Spectacles and lenses	Up to the age of 18 years: Sfr. 200.00 per year From the age of 19: Sfr. 200.00 every 5 years. A doctor's prescription is only necessary for the first spectacles/lenses. Higher benefits are possible for special medical cases.
Dental treatment (only exceptionally)	Payment is made for the treatment of injuries to the masticatory system caused by an accident (if not covered by any other accident insurance), or serious and unavoidable disease of the masticatory system, or if it is due to any other serious illness or its after-effects, or if it is necessary for the treatment of a serious illness or its after-effects. No payment is made for teeth corrections.
Congenital infirmity	Payment is made for the same benefits as for illness if not covered by the Swiss Invalidity Insurance.
Psychotherapy	Payment is made for treatment by an approved physician or if treatment is delegated by an approved physician to a psychologist/psychotherapist (however only under supervision and in the consulting room of the delegating physician).
Laboratory analysis	Analysis ordered by a physician according to the analysis list.
Hospital in-patient treatment	Payment is made for staying in a public ward (multi-bed room) of an approved hospital within the Canton of domicile according to the hospital list or in an emergency or medically induced entry also for a hospital outside the Canton of domicile.

Medical rehabilitation	Payment is made for prescribed medical rehabilitation or carried out by a physician (if in-patient, only in approved hospitals according to the hospital list, public ward).
Nursing home	Payment of costs for nursing measures and other ambulatory measures (treatment by a physician, physiotherapy etc.) as well as medication and laboratory analyses.
Spa treatment prescribed by a doctor	Sfr. 10.00 per day (overall) for a maximum of 21 days per calendar year as well as doctors fees, medication and physiotherapies.
Recuperation (e.g. after a hospital stay)	No payments for in-patient benefits (no automatic liability or cover); only payment for doctor's fees, medication and therapies.
Home care (Spitex)	Home care by approved Spitex organisations or nurses.
Maternity	<ul style="list-style-type: none"> • examinations by physicians or midwives (7 examinations within a normal pregnancy and one after-birth examination). • Ultra sonic scans by physicians (2 scans within a normal pregnancy) • fees for delivery at home, in a hospital (public ward) or in a semi-hospital establishment as well as delivery assistance by physicians and/or midwives. • 3 breast-feed consultations by midwives or by nurses with a special education for advice in breast feeding • a contribution of Sfr. 100.00 to pre-natal preparatory courses Pregnancy exercises are not paid for.
Prescribed prevention measures	<p>Payment is made for certain examinations for the early recognition of illnesses as well as preventive measures for the benefit of persons who are considered to be at increased risk:</p> <ul style="list-style-type: none"> • precautionary check-ups for newly born babies • 8 precautionary check-ups for children • examination of the skin in case of higher risk for melanoms (skin cancer of a near relative) • mammography (breast-scan) for women of over 50 every two years; if mother, daughter or sister has been affected by breast cancer, one precautionary examination per year. • vaccinations for children and adults according to article 12 KVV,
Precautionary examination including cancer smear test by a gynaecologist	Payment is made for the first two examinations and afterwards for one examination every three years. This applies to normal cases, otherwise examination intervals following clinical judgement.
Cost participation for medically induced transport to an approved health care provider	50% of the costs, at the most Sfr. 500.00 per calendar year, if transport is not feasible by public or private means of transport.
Cost participation for rescue	<p>In Switzerland: 50% of the costs, at the most Sfr. 5'000.00 per calendar year.</p> <p>No payment is made for the search and recovery of the deceased.</p>