

**CHECK FORM FOR THE EQUIVALENT
OF SWISS HEALTH INSURANCE**

(Federal Law on Medical Insurance (LAMal) of March 18, 1994)
(Article 2, OAMal of June 27, 1995)

FOREIGN INSURER CERTIFICATE REQUIRED FOR DISPENSATION FROM
COMPULSORY INSURANCE IN SWITZERLAND

1. PERSONAL DETAILS OF THE INSURED					
Surname					
Forename (s)					
Date of birth	nationality		sex		<input type="checkbox"/> M <input type="checkbox"/> F
Civil Status	<input type="checkbox"/> single	<input type="checkbox"/> married	<input type="checkbox"/> separated	<input type="checkbox"/> divorced	<input type="checkbox"/> widower / widow
For foreigners type of permit	<input type="checkbox"/> file C	<input type="checkbox"/> file B	<input type="checkbox"/> file L	valid from	
Status	<input type="checkbox"/> student	<input type="checkbox"/> employee expatriate	<input type="checkbox"/> trainee	<input type="checkbox"/> teacher	<input type="checkbox"/>
School / employer	End of stay in Switzerland				
Street & no					
Post code & city*					

(*if possible in Switzerland)

2. MEMBERS OF THE FAMILY FOR WHOM THE EXEMPTION OF INSURANCE IS DEMANDED				
Surname	Forename (s)	Date of birth	Sex M ou F	Relationship
Place and date:		signature of policyholder * :		

The insurer, undersigned, certifies that the person or persons, above-mentioned, benefit during their stay in Switzerland from health and accident cover equivalent to compulsory health insurance cover (see overleaf) in particular for :

- full payment of all hospital expenses in a public ward of any public hospital in the canton of Geneva, at the tariffs provided for non-contractual patients (for information only : for 2004, Frs 1'100.— per day plus tax and an admission fee Frs 690.— plus possible extra charges for special treatment);
- full payment of expenses arising from pregnancy and childbirth, in particular, the cost of childbirth in a public ward of any public hospital in the canton of Geneva, at the tariffs provided for non-contractual patients (for information only : for 2004, Frs 1'100.— per day plus tax and an admission fee Frs 690.— plus possible extra charges for special treatment);
- full cover of costs for treatment in a medico-social establishment (for information only : for 2004, to Frs 32.- until Frs 177.- per day + medicines and medical fees);
- cover of ambulatory treatment as defined in articles 25 to 31 LAMal quoted on the back of this page (for information only : for dialysis in 2004, Frs 497.— plus medicines and material).

By virtue of this certificate, the undersigned insurer undertakes to pay its benefits should any of the above mentioned eventualities arise. No recourse whatsoever may be made to either municipal or cantonal social assistance.

Date of expiry of cover:

Stamp / seal and signature of **insurer** * :

Place and date:

FORM TO BE RETURNED TO THE SERVICE DE L'ASSURANCE-MALADIE, ROUTE DE FRONTENEX 62,
1207 GENEVE - tél. 022 327 65 30 - fax 022 327 65 00

* The insurer and the person insured undertake to communicate to the competent authority the cancellation of this contract, as well as any reduction of the cover of the insurance which no longer guarantees the equivalent cover to the compulsory Swiss health insurance cover.

EXCERPTS FROM THE FEDERAL LEGISLATION ON HEALTH INSURANCE (LAMAL) OF MARCH 18TH 1994)

Art. 25 General benefits in case of illness.

1. Compulsory health insurance covers the cost of treatment of illnesses and their after effects.
2. These benefits include :
 - a. Medical examinations and treatment whether it is delivered in a doctor's office, at the patient's home, during hospital care or half-hospitality or in a nursing home, by :
 1. medical doctors
 2. chiropractors
 3. Persons acting under the authority of, or by delegation of a medical doctor.
 - b. Laboratory tests, medications, diagnostic or therapeutic devices ordered by a medical doctor or, within limits set by the Federal Council, by a chiropractor.
 - c. Partial reimbursement of expenses incurred for treatment in a spa, if such treatment was prescribed by a medical doctor.
 - d. Rehabilitation prescribed by a medical doctor.
 - e. Hospital care in the general or public section of a hospital
 - f. Stay in an institution offering half-hospitality care ;
 - g. Partial overage of costs incurred for medically necessary transportation and rescue services.
 - h. Pharmacy contribution for prescribed medicine delivery according to letter b.

Art. 26 Preventive measures

Compulsory health insurance covers the costs of tests which can lead to early detection of certain illnesses, as well as preventive measures for patients at high risk for certain types of illnesses. These tests or preventive measures must be carried out or ordered by a medical doctor.

Art. 27 Congenital disabilities

In the case of a congenital disability not covered by disability insurance, compulsory health insurance covers costs in the same way as it would in case of other types of illnesses.

Art. 28 Accidents

In the case of an accident, as defined in Art.1, par.2, letter b), compulsory health insurance covers costs in the same way as it would in case of illness.

Art. 29 Pregnancy and delivery

1. Compulsory health insurance covers the costs of specific care required in the case of pregnancy as well as regular costs as in cases of illness.
2. Specific care covered includes :
 - a. Regular check-ups, carried out by a medical doctor or a midwife, or ordered by a doctor, during and after pregnancy.
 - b. Delivery, whether it occurs at home, in the hospital or during half-hospitality, as well as care given by a medical doctor or a midwife.
 - c. Training and instruction given to mothers to establish breastfeeding.
 - d. Care accorded to new-born child in good health and his stay, in hospital with his mother.

Art. 30 Medically prescribed abortions

In cases of medically prescribed abortion, as defined by Art. 120 of the Swiss Penal Code, costs are covered by compulsory health insurance as in the case of illness.

Art. 31 Dental care

1. Compulsory health insurance covers the cost of dental care under the following :
 - a. If the necessity for dental care results from severe illness affecting the ability to chew, or
 - b. If they are caused by another serious illness or its after-effects, or
 - c. If dental care is necessary in order to treat severe illness or its after-effects.
2. Compulsory health insurance also covers the cost of treatment for lesions affecting the ability to chew caused by an accident as defined by Art.1, par. 2, letter b).