

Information about health insurance for sans-papiers in Switzerland

People without valid residence status (known as sans-papiers) have fundamental human rights. Anyone who is sick or injured has the right to appropriate medical treatment in Switzerland. However, as a rule this must be paid for, either by the individual or through insurance.



Health insurance

Sans-papiers have the **right** and the **duty** to take out a compulsory health insurance policy with a Swiss health insurance company. Health insurance companies must accept anyone living in Switzerland for a basic health insurance regardless of their residence status.

The health insurance covers the cost of the following services:

- Medical treatment and examinations
- Hospitalization
- Prescribed medicines (speciality list)
- Pregnancy and birth (no excess payable by insured)
- Accidents

Dental treatment is not covered.

Data protection

Doctors, hospital staff and insurance companies are not allowed to give patients' personal details to the immigration authorities or the police or request information about people from them. They have a duty of confidentiality. Breaching this duty of confidentiality makes them liable for prosecution.

Changing basic policy and leaving health insurance company

It is only possible to leave a health insurance company if a new policy is taken out with another insurance company or on leaving Switzerland.

To terminate a contract for 31 December, the notice letter must be sent by registered post and received by the insurance company by the last working day in November. Terminating a contract for 30 June is only possible for a standard insurance policy with an annual excess of CHF 300 by giving three months' notice (letter received by end of March).

Accident insurance

The basic health insurance can be combined with an accident insurance that costs about CHF 20 extra a month. It covers treatment costs in the event of an accident.

Anyone who is in employment more than eight hours a week should in theory already be insured for accident coverage by their employer. In this case, you can ask your health insurance company to exclude accident coverage.



Prices

Health insurance is not free of charge. An insurance premium must be paid **every month**. Despite the fact that the insurance companies offer the same services, their premiums are different. Children under 18 pay less. Most insurance companies also offer lower premiums for young adults (19-25 years old).

In addition to the monthly premiums, patients must pay part of the treatment costs. This amount can be chosen but is between CHF 300 and CHF 2,500 per year (called the '**excess**'), which is paid by the policyholder (excess for children from CHF 0 to CHF 600). Once treatment costs go beyond this excess, the patient pays 10% of remaining costs (**patient's contribution**). The patient's contribution is a maximum of CHF 700 per year (for children the maximum is CHF 350 per year).

The 'family doctor model', HMO or Telmed are cheaper insurance options but you undertake to always first consult your family doctor or HMO centre or seek advice from a telephone helpline before going for an appointment (except in emergencies).

It is very important to pay the premiums every month!

If you do not pay your premiums for more than three months, the insurance company can send you a written warning (and a 30-day deadline to pay), and then it can inform the cantonal authorities that you are no longer insured and start debt-collection proceedings.

Premium reductions

In some cantons people on a low income may apply to have their insurance premiums reduced. The threshold varies from canton to canton. This application must be submitted to the office responsible for premium reductions in the canton of residence. The address for your canton can be found here ► www.priminfo.ch ► Prämienverbilligung



How to take out a health insurance policy

1. Choose a Swiss health insurance company. Choose the model and amount of the excess and choose (if necessary) accident coverage. The premiums offered by the various insurance companies can be compared on ► www.priminfo.ch or www.comparis.ch.
2. Apply to join the insurance company of your choice. To do this, give your name, date of birth and a contact address, together with a post office or bank account number (or that of someone you know).
3. Pay the insurance premium every month (2014: roughly CHF 300–550 per month) with the payment slip the insurance company sends you.
4. Send a copy of all medical invoices to the insurance company and pay the invoices for treatment and medicines yourself. The insurance company will pay you the amounts you are owed according to the invoices (after deduction of the excess and patient's contribution): it pays the money into the account given (reimbursement). In some cases (e.g. medication), the invoice is sent directly to the insurance company.
5. You contribute to the health costs with your excess and 10% of the cost of treatment and medicines (no more than CHF 700 per year). The insurance company reimburses you the difference.
6. If your contact address changes or if you leave Switzerland, you must tell the insurance company.



If you have any questions or if you need help, please contact an office in your region ► www.sante-sans-papiers.ch.

