

Accident Insurance according to the Swiss Federal Law on Accident Insurance (UVG) Information Sheet

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1. Legal basis for the insurance

The Law on Accident Insurance of 20 March 1981 as well as the relevant ordinances form the basis for the insurance. The following details are extracts from the law and ordinances.

2. Insured persons

2.1. Compulsorily insured persons

All employees, including persons working from home, interns, volunteers, trainees and apprentices, must be insured. Insurance is also compulsory for any members of the employer's family working for the business if they receive earnings in cash or pay Old Age and Survivors' Insurance (AHV) contributions.

In agricultural establishments, the following persons are equated with self-employed farmers and therefore do not fall under the compulsory scheme: the wife of the farm manager, his relatives in ascending and descending order and their wives, and in addition sons-in-law of the farm manager who will presumably take over operating the farm.

2.2. Voluntarily insured persons

Self-employed persons and family members working in their businesses who are not subject to compulsory insurance may insure themselves voluntarily by special agreement.

3. Scope of insurance cover

3.1. Insured accidents

Insurance benefits are granted for occupational and non-occupational accidents. Occupational illnesses are equated with occupational accidents.

3.2. Part-time employees

Part-time employees whose weekly working hours for any one employer do not amount to 8 hours or more are only insured for occupational accidents. Accidents occurring on the way to or from work are also understood as occupational accidents for these persons.

3.3. Commencement, end and suspension of insurance coverage for employees

Insurance coverage commences on the date on which the employee begins employment or first becomes entitled to a salary, and in any case at the time when the employee sets off on their way to work.

Insurance coverage ends on the 31st day after the date on which employees lose their claim to at least half of their earnings.

3.4. Optional extension of cover

With the optional extension of cover, statutory non-occupational accident insurance can be extended for up to 6 consecutive months. Examples: if taking unpaid leave, changing jobs, stopping work without continued pay, e.g. seasonal workers. Every employee who works for an employer for at least 8 hours a week and is therefore insured for non-occupational accidents can choose this. The option must be chosen before the non-occupational accident insurance cover ends. The exact details are given in the special registration form, which can be obtained from the employer or Baloise.

4. Insurance benefits

4.1. Care allowance and reimbursement of costs

4.1.1 Medical treatment

Costs will be paid for the following

- a) outpatient treatment by a doctor, a dentist or by medical assistants as instructed by a doctor or dentist, as well as outpatient treatment by a chiropractor or at a hospital;
- b) Medicines, drugs and analyses ordered by a doctor or dentist;
- c) Treatment, nursing and accommodation in the general ward of a hospital;
- d) Medically ordered convalescence and spa treatments;
- e) Any remedies and objects required for recovery.

4.1.2 Medical treatment abroad

The cost of medical treatment required outside of Switzerland will be refunded up to a maximum of double the amount of the expenses that would have been incurred for treatment in Switzerland.

4.1.3 Nursing and care at home

Contributions will be paid towards any necessary nursing and care at home, provided that such nursing and care is carried out by approved home nursing staff, in accordance with Art. 18 of the Accident Insurance Ordinance (UVV).

4.1.4 Medical aids

The insured person may claim medical aids required to compensate for physical impairments or functional deficiencies (e.g. prostheses).

4.1.5 Loss of or damage to property

The cost of repairing damage caused as a result of an accident to property that acts as a replacement for a part of the body or a physical function (e.g. damage to prosthe-

ses in use) will be reimbursed. The replacement of spectacles, hearing aids and dentures may only be claimed for in connection with a bodily injury requiring treatment.

4.1.6 Travel, transportation and rescue costs

Any necessary emergency ambulance and rescue costs and the cost of travel and transportation required on medical grounds will be reimbursed.

Emergency ambulance, rescue, travel and transportation costs incurred abroad will be reimbursed to the value of up to 20% of the maximum amount of insured annual earnings.

4.1.7 Transport of deceased persons

As a rule, the costs necessary for transporting deceased persons to the place of interment will be reimbursed.

4.1.8 Funeral costs

Funeral costs will be reimbursed, provided that they do not exceed seven times the maximum insured daily earnings.

4.2. Daily allowances

4.2.1 Entitlement and amount

If the insured person is fully or partially unable to work as the result of the accident, he is entitled to a daily allowance.

The daily allowance will be paid per calendar day from the third day after the date of the accident. The daily allowance for full disability is 80 % of the insured earnings, and reduced accordingly for partial inability to work.

Daily allowances are not payable if daily allowances for disability insurance (IV) or maternity compensation can be claimed in accordance with the income compensation law (Erwerbsersatzgesetz).

4.2.2 Deduction for hospitals, sanatoriums and clinics

For stays at hospitals, sanatoriums and clinics, the following deductions are made from the daily allowances for maintenance expenses covered by accident insurance:

- a) 20 % of the daily allowance, but not more than CHF 20 for single persons without obligations to support or maintain a family or dependents;
- b) 10 % of the daily allowance, but no more than CHF 10 for married persons and for single persons with obligations to support or maintain a family or dependents, insofar as paragraph c) is not applicable;

- c) No deductions are made for married or single persons who have to care for minors or children in education.

4.3. Disability pension

4.3.1 Entitlement and amount

If the insured person becomes up to at least 10 per cent disabled as a result of an accident, they are entitled to a disability pension if the accident occurs before they reach the ordinary retirement age.

If the insured person is entitled to a pension from the Federal Disability Insurance (IV) or a pension from the Federal Old Age and Survivors' Insurance (AHV), whether these are from a Swiss or a foreign social insurance scheme, they will be granted a supplementary pension to supplement the AHV or IV pension and bring it up to 90% of the insured earnings, but no more than the maximum amount payable for full or partial disability.

The disability pension and the supplementary pension will be reduced upon reaching ordinary retirement age, in accordance with Art. 20 para. 2 of the Federal Law on Accident Insurance (UVG).

4.3.2 Review

If the pensioner's degree of disability changes significantly, the pension will be raised or reduced accordingly or discontinued.

4.4. Allowance for physical and mental impairment

4.4.1 Entitlement

If the insured person's physical or mental state is permanently and considerably impaired as a result of an accident, he is entitled to a commensurate allowance for such impairment in the form of a lump-sum benefit.

4.5. Helplessness care allowance

4.5.1 Entitlement

If, due to disability, the insured person permanently requires the assistance of, or supervision by another person to cope with everyday life, he is entitled to a Helplessness care allowance.

4.6. Survivors' pensions

4.6.1 Entitlement

If the insured person dies as a result of the accident, the surviving spouse and children are entitled to survivors' pensions as provided for in the applicable legislation.

4.6.2 Amount of pensions

If the survivors are entitled to AHV or IV pensions, whether these are from a Swiss or a foreign social insurance scheme, they will jointly be granted a supplementary pension to bring the AHV or IV pension up to 90% of the insured earnings in total, but no more than the total amount payable according to the aforementioned scale.

4.7. Insured earnings

4.7.1 Maximum amount

Daily allowances and pensions are computed in relation to insured earnings. Insured earnings are understood to be the earnings significant for AHV, subject to a limit of CHF 148,200 per year, or an average of CHF 406 per day. Insured earnings are also understood to be those earnings on which no contributions to AHV are payable on account of the insured person's age, furthermore family allowances granted as children's, education and training or housekeeping allowances.

4.8. Adjustment of pensions to increases in the cost of living

Pensions are linked to the cost of living and will thus be adjusted to increases in the Swiss consumer price index at the same time as AHV pensions.

4.9. Reduction and refusal of insurance benefits

4.9.1 Health impairments resulting from various causes

Disability pensions, allowances for physical and mental impairment and survivors' pensions will be reduced accordingly if the health impairment or death is only partly the result of an accident.

4.9.2 Fraudulent claims

If the insured person deliberately causes his own death or brings about damage to his own health, there will be no entitlement to insurance benefits, except for funeral costs.

If the insured person has caused the accident by gross negligence, the benefits paid for non-occupational accidents will be reduced in the first two years following the accident.

If the insured person has caused the accident by an intended criminal act or an offence, benefits can be reduced or in serious cases refused.

If a survivor has deliberately caused the death of the insured person, he has no claim to monetary benefits.

If a survivor has caused the death of the insured person through gross negligence, the monetary benefits payable

to him will be reduced; in particularly serious cases they may be refused.

4.9.3 Extraordinary hazards

All insurance benefits will be refused for accidents that occur while the insured person is in foreign military service or participating in warlike activities, acts of terrorism or organized crime.

Monetary benefits will be reduced by at least half in the case of non-occupational accidents which occur due to:

- a) Participation in brawls or fights, unless the insured person was injured by the persons fighting while trying to assist a defenseless person or was an innocent bystander;
- b) Hazards to which the insured person exposes himself by severely provoking others;
- c) Participation in civil unrest.

4.9.4 Hazardous risks

In the case of non-occupational accidents originating from a hazardous risk, monetary benefits will be reduced by half or, in particularly serious cases, refused. Hazardous risks are actions that expose the insured person to a particularly high level of danger, where the insured person did not or was not able to take the precautions needed to limit the risk to a sensible level. However, actions taken to rescue other persons are insured even if they are to be considered hazardous.

5. Procedure in the event of an accident

5.1. Notification of an accident

The person who has suffered an accident or that person's relatives must notify the employer or the insurer of the accident without delay.

The employer must notify the insurer immediately upon learning that an insured person has suffered an accident.

5.2. Consequences of failing to report an accident

Should the insured person or his survivors fail to report an accident without reasonable excuse, the insurer may reduce certain or all benefits by half for the duration of the failure to report or overall or – in the case of deliberately false notification – refuse to pay any benefits at all.

If the employer fails to report an accident without reasonable excuse, the insurer may hold him liable for any financial consequences.

5.3. Medical examination

The insured person must undergo medical examinations as required by the insurer at the latter's expense.

6. Premiums

6.1. Premium obligation

Premiums for the compulsory insurance of occupational accidents and occupational illnesses are to be paid by the employer.

Premiums for the compulsory insurance of non-occupational accidents are borne by the employee, in the absence of any other arrangements in favor of the employee.

The entire premium is owed by the employer, who will deduct the employee's share from the latter's wages.

6.2. Due date, payment period

The premium is determined per insurance year and is payable in advance by the date specified in the policy. The payment period for premiums is one month after the due date. If this deadline is not observed, the employer will be charged default interest of 0.5 percent per month from the expiry of this period.

6.3. Premium statement

The provisional premium stated in the policy must be paid at the beginning of the insurance year. The final premium is determined at the end of the insurance year on the basis of data to be provided by the policyholder. The premium statement is based on pensionable earnings according to AHV, excluding compensation for loss of income and daily allowances for disability and military insurance, as long as these earnings do not exceed the maximum insured earnings. Further details can be found on the earnings declaration form.

If a lump-sum premium has been agreed upon, there is no need for a premium statement. However, in such cases the policyholder is nevertheless obligated to keep an account of earnings.

The insurer has the right to check the information provided by the policyholder by inspecting all the relevant documents (earnings statements, AHV statements, etc.).

7. Accident prevention

7.1. Statutory regulations

Regulations on the prevention of accidents and occupational illnesses are prescribed by law.

7.2. Duties of employers and employees

The employer, in cooperation with his employees, must take all measures appropriate to the given circumstances. Employees are obligated in particular to make use of personal protection equipment and the safety facilities provided.

8. Transfer to individual insurance

8.1. Right to transfer

Persons living in Switzerland have the right to transfer to individual insurance cover within 31 days of leaving the UVG insurance.

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