KPTwin.doc model in accordance with the KVG

General conditions of Insurance (GCI)
Edition 01.2010

General provisions

Purpose DOC art. 1
KPTwin.doc is an insurance coverage (termed «gatekeeping») in which overall medical care in terms of holistic health care, advice and treatment is provided by a basic supplier (in the following «general practitioner» or «family doctor»). Doctors with an FMH diploma for general practice, internal medicine, med. pract. or paediatrics degree are deemed to be family doctors. When you take out the insurance you declare that you agree to the condition whereby initial medical care will be exclusively provided by the family doctor you have chosen – with a reservation for emergencies, gynecological examinations, obstetric care, and consultations at the ophthalmologist or dentist.
If the services of specialists or other service providers are required you will be referred by your family doctor.
The responsibility for any prior consultation of a specialist lies with you.

Legal bases DOC art. 2
The legal bases for the provision of benefits are the ATSG, Art. 41 para. 4 KVG and Art. 62 KVG, the by-laws to the KVG and the «Implementing provisions supplementary to the KVG» of KPT.

Benefits DOC art. 3
The content and scope of the benefits provided is arranged in accordance with the provisions of the KVG.

Contractual relationship

Accrual DOC art. 4
The special insurance coverage provided through KPTwin.doc accrues through a contractual agreement between you and KPT.
Conclusion of the contract for the special form of insurance coverage is subject to the choice of a family doctor.
KPTwin.doc extends throughout the whole of Switzerland.

Duration; cancellation DOC art. 5
The contract lasts for at least one year, that is until 31 December, and is extended tacitly for a further year.
You may cancel the contract while adhering to the periods of notice stipulated in the legislation.
The special periods of notice of the KVG remain reserved and in particular when new premiums are announced.

Duty to notify DOC art. 6
On taking out the contract you have to notify the insurer whether you have at any time been excluded from similar models of insurance by another insurer because of a breach of the rules of the system. If you are in breach of this duty, you will be transferred retrospectively to the obligatory health insurance
(OKP). You will be required to pay back the difference in premiums and/or repay any premium discounts that have been granted.

**Change of family doctor** **DOC art. 7**
If there are a number of family doctors practicing in the same area that are approved by KPT, you are able to change family doctor without any reason on the first of the following month while adhering to a notification period of one month.

**Stays abroad** **DOC art. 8**
In the case of stays abroad of more than 3 months, you will be transferred from the KPTwin.doc plan to KPTwin.win. You have a duty to notify KPT in advance about stays abroad. You will not be allotted to the other class of insurance if you return to Switzerland.

**Duties**

**Gatekeeping** **DOC art. 9**
You are under obligation to let the medical service provider you have chosen (family doctor) carry out or coordinate all treatment and examinations. Referrals to hospitals or a day clinic and spa and convalescence cures are all subject to prior approval by your family doctor.
Adherence to this system of channeled access to medical services (gatekeeping) is also a condition for coverage by any incidental supplementary insurance.

**Exceptions** **DOC art. 10**
You are dispensed from the obligation to adhere to the gatekeeping principle in cases involving emergencies, gynecological examinations, obstetric care, and consultations at the ophthalmologist or dentist. Your family doctor should be notified as soon as possible after an emergency. An emergency is deemed to have occurred if the situation of an individual is assessed by himself or herself or by a third party as life threatening or as one requiring immediate treatment.

**Adherence to the system** **DOC art. 11**
You have to adhere to the system used by the model of insurance of channeled access to medical services.

**Non-adherence to the system** **DOC art. 12**
If you fail to adhere to the system a sanction is imposed consisting of a reduction of the benefits foreseen in the legislation by 50 % for treatment obtained from service providers to whom you were not referred by your family doctor. The same reduction is made if you do not consult your family doctor for initial treatment; the exceptions in accordance with DOC art. 10 remain reserved.
If it is reasonable under the circumstances in the case of major breaches of the conditions you may be excluded immediately from the model of insurance and transferred to the regular obligatory health insurance (OKP) whereby you simultaneously lose the entitlement to the premium discount.

**Second Opinion** **DOC art. 13**
If you do not agree with the clinical pathway proposed by your family doctor you can request a second opinion from another doctor.
The KPT puts you in touch with an independent specialist and reimburses the costs for the second opinion if this results in different findings.
Duty to notify the insurer *DOC art. 14*
To facilitate the coordination of benefits you have to notify the family doctor you have chosen about any accidents for which costs are accepted by the UVG insurer.

Access to records *DOC art. 15*
By concluding the contract you agree to grant medical service providers and KPT’s medical advisor access to data concerning treatment and invoicing in connection with your medical care. The obligation to grant access to this data also applies if you change from one insurance model to another and simultaneously contains the condition releasing doctors acting within the model from the obligation to maintain patient confidentiality.

Discounts on premiums

General *DOC art. 16*
You receive a discount on the regular premiums for the OKP with KPTwin.doc. A change in the premium discount does not entitle you to cancel the contract.

Participation in costs *DOC art. 17*
Participation in costs is payable in accordance with the KVG (deductible and excess).

Final provision

Coming into force *DOC art. 18*
The General Conditions of Insurance take force on 1 January 2010. They may be modified by KPT at any time.

Berne, 1 January 2010
KPT Krankenkasse AG