



Benefits overview 2026

A big plus for you

KPT always goes above and beyond. Both through its respectful customer service and in the development of forward-thinking insurance policies. That's why KPT is the health insurer with the plus factor.

Your advantages

1. At your service

Your friendly, responsive customer centre team is here to answer any enquiries. Our lines are open 8:00 to 12:00 and 13:30 to 17:00 Mondays to Thursdays and from 8:00 to 12:00 and 13:30 to 16:00 every Friday. You can also request a call back, including over lunchtimes or on Saturdays. kpt.ch/callback

2. Simple online administration

Submit invoices, find documents or ask questions quickly and easily via our KPTnet customer portal and the KPT app. The convenient, direct way to manage your insurance admin – with round-the-clock access from anywhere. kpt.ch/kptnet-en

3. Free telemedicine service

If you have a health problem, medical question or health emergency, simply call the free Medi24 telemedicine service on +41 (0)58310 9999 to speak to a specialist advisor for competent advice and support. kpt.ch/kpthelp-en

4. Contributions to health-promoting activities

We contribute up to CHF 600 per year to sport and fitness memberships plus a host of other activities for body and soul. kpt.ch/pulse-en

5. DoctorChat service

DoctorChat is a free service that allows you to chat to a doctor via WhatsApp and obtain free medical advice 24/7.

kpt.ch/doctorchat-en

6. BetterDoc – the easy way to find a specialist

Unsure about your treatment plan or need a second opinion? With BetterDoc, anyone with semi-private, private or Flex insurance can find the right specialist for their health problem within 48 hours – with no obligations and at no cost.

kpt.ch/betterdoc-en

A big plus for customer satisfaction

PT regularly achieves top marks in customer satisfaction surveys. Customers particularly value the responsiveness, dedication and friendliness of our employees.



Find out more at kpt.ch/customer-ranking

KPT app

Your advantages at a glance:

- Photograph your medical bills and send them directly to KPT
- 24/7 access to your documents from anywhere
- Access to all family members' virtual insurance cards
- Help the environment by going paper-free
- Simple and secure biometric login with touch ID, face ID or PIN

Download the app:



KPT's digital services



Basic health insurance

Compulsory health insurance (CHI), also known as basic health insurance, is mandatory for all persons residing in Switzerland. It covers medical expenses in the event of illness, accident (if the insured person has no accident insurance) and maternity. Because everyone's needs differ, we offer five alternative basic health insurance models in addition to the standard model.

With an alternative basic health insurance model, if you have a health concern, you always consult a central point of contact or health app (symptom checker) in the first instance and thus avoid any repeat examinations. This makes a valuable contribution to cost savings, which we pass on to you in the form of premium discounts. The medical services (benefits) covered are identical across all six basic health insurance models.

The standard model

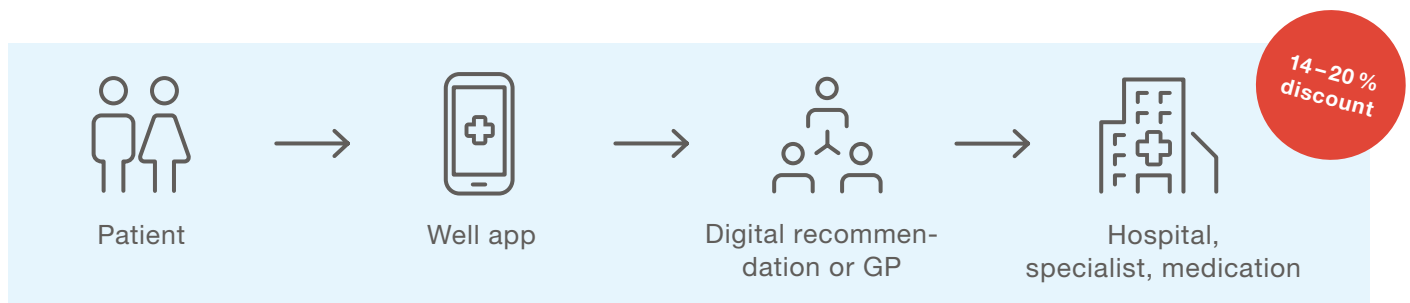


KPT offers the following alternative basic health insurance models in addition to the standard model:

KPTwin.smart – the digital model with GP

Your first port of call in the event of a health problem is the symptom checker in the Well app. After inputting your symptoms, this will present a recommended

treatment path. You can follow the recommendation directly or arrange an appointment with your GP to discuss the situation in person. kpt.ch/win.smart-en



KPTwin.easy – save time and money with telemedicine and mail order medicine

Whenever you experience a health problem, your first line of support is the Medi24 telemedicine advice centre. The medical professionals at the other end

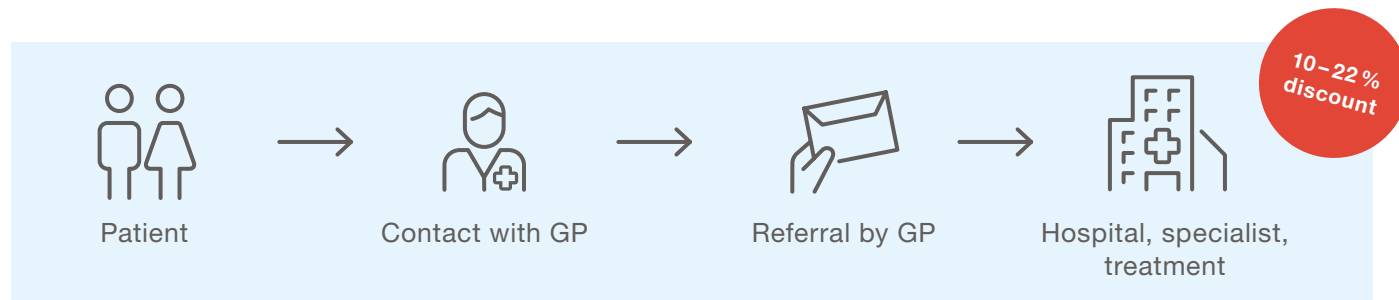
of the line will discuss the next treatment steps with you. You obtain medication from the online pharmacy Zur Rose. kpt.ch/win.easy-en



KPTwin.doc – the popular GP (family doctor) model

In the event of health problems, your first point of contact is your GP. As your dedicated medical contact, they are responsible for coordinating the

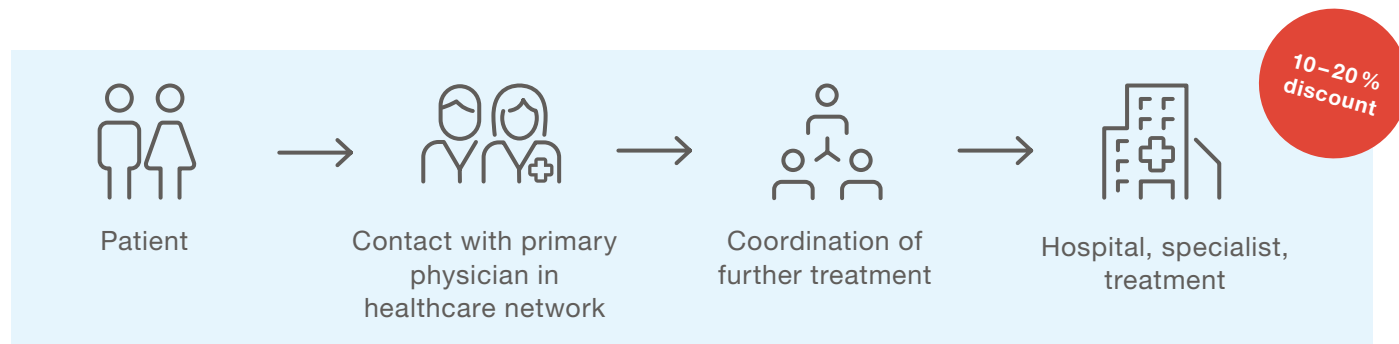
entire treatment process, such as referral to a specialist or a hospital admission. kpt.ch/win.doc-en



KPTwin.plus – medical services under one roof

In the event of health problems, your first point of contact is your primary physician in the healthcare network selected. Health networks are integrated

healthcare delivery systems incorporating many specialist doctors and healthcare professionals. kpt.ch/win.plus-en



KPTwin.win – telmed model with GP and pharmacy

NEW

With this flexible basic insurance model, you can choose who to contact first when you have a health issue: a partner pharmacy, the telemedicine

advice centre or a GP. You then benefit from a free choice of doctor. kpt.ch/win.win-en



The discounts quoted are for an adult without accident coverage compared to the standard KPT basic health insurance model and depend on the place of residence and deductible selected. For more information, see kpt.ch/winsmart, kpt.ch/wineasy, kpt.ch/windoc, kpt.ch/winplus and kpt.ch/winwin.

Deductible and excess simply explained

In the event of illness, policyholders are required to pay an initial share of any health insurance claim. This fixed sum is called the **deductible** and amounts to at least CHF 300 per calendar year for adults and CHF 0 for children (minimum statutory deductible).

Health insurance benefits are not paid until this amount has been reached. The insured person additionally contributes an **excess of 10%** to the remaining balance, up to CHF 700 per calendar year for adults and CHF 350 for children.

Once the deductible and excess limits have been reached, 100% of the statutory benefits are reimbursed by health insurance.

CHF 2,000 medical bill

CHF 2,000.–	
– CHF 300.–	(selected deductible)
CHF 1,700.–	
CHF 1,700.–	(balance)
– CHF 170.–	(10% excess)
CHF 1,530.–	payable by the health
CHF 300.–	(selected deductible)
+ CHF 170.–	(10% excess)
CHF 470.–	payable by the insured

Calculation example: you have chosen a CHF 300 deductible and receive a medical bill of CHF 2,000. The first CHF 300 is payable by you. You also pay 10% of the remaining CHF 1,700 (excess). This means that you pay CHF 470 in total, while the health insurance pays CHF 1,530.



Savings tip: select a higher deductible

You are free to choose your annual deductible (the amount you pay towards the cost of an insurance claim). The higher your deductible, the lower your premium. You have the following options:

Adults		Maximum annual discount
■ CHF	300.–	
■ CHF	500.–	CHF 140.–
■ CHF	1,000.–	CHF 490.–
■ CHF	1,500.–	CHF 840.–
■ CHF	2,500.–	CHF 1,540.–
Children		Maximum annual discount
■ CHF	0.–	
■ CHF	200.–	CHF 140.–
■ CHF	400.–	CHF 280.–
■ CHF	600.–	CHF 420.–



Savings tip: co-payment for hospital stays

You can also apply the basic health insurance deductible principle to semi-private and private supplementary hospital insurance: if you voluntarily pay part of the hospital costs per year, you will receive a premium discount:

- **Hospital deductible CHF 1,000:**
15% premium reduction
- **Hospital deductible CHF 2,000:**
25% premium reduction
- **Hospital deductible CHF 5,000:**
50% premium reduction

Compulsory basic health insurance

Compulsory health insurance (CHI)

Under the Health Insurance Act (HIA).

Models available include the standard model, KPTwin.smart, KPTwin.easy, KPTwin.doc, KPTwin.plus and KPTwin.win.

Medication (prescribed by a doctor)

Costs covered in accordance with the HIA for products on the list of medicines or list of pharmaceutical specialties.

Vaccinations

Contributions to prophylactic vaccinations under the HIA.

Maternity

Full coverage for treatment on a general ward of a listed hospital in your country of residence with a service mandate. In the canton in which the hospital is located, up to the tariff applicable within the insured person's canton of residence (Art. 41 HIA). Check-ups and birth costs: coverage in accordance with the recognised tariffs. CHF 150 towards antenatal classes per birth. Cost of 3 breastfeeding counselling sessions covered.

Transport and emergency rescue costs

Transport: 50%, max. CHF 500 per calendar year (for medically necessary transport to the nearest doctor or hospital).

Emergency rescue costs: 50%, max. CHF 5,000 per calendar year (in Switzerland).

Treatment abroad (in the case of acute illness or accident during a temporary stay abroad)

Treatment costs up to a maximum of twice the tariff for the canton of residence.

EU/EFTA: assumption of costs in accordance with national law and the social security tariff of the host country.

Requirement: European Health Insurance Card must be presented.

Medical aids (prescribed by a doctor)

Contribution to the rental or purchase of medical aids as per the List of Remedies and Equipment (MiGeL).

Outpatient treatments/complementary medicine

Acupuncture, anthroposophic medicine, homeopathy, phytotherapy, traditional Chinese medicine. Treatment by a Swiss-certified doctor (eidg. dipl.).

Gynaecological screening

Gynaecological screening every 3 years in accordance with HIA.

Psychotherapy

Medical psychotherapy and medically prescribed psychological psychotherapy.

Glasses/contact lenses

CHF 180 per calendar year up to the age of 18. Glasses/contact lenses for adults are only covered in special cases caused by illness.

Outpatient treatments/conventional medicine

Coverage in accordance with the recognised tariffs. Treatment by Swiss-certified doctors (eidg. dipl.), chiropractors and professionals performing services ordered by a doctor or chiropractor.

Home care (Spitex) (medically prescribed)

Acceptance of costs for treatment and nursing care by recognised Spitex organisations in the home or a nursing home in accordance with recognised tariffs.

Dental treatment

Benefits in accordance with the tariff provided there is a legal obligation to pay for the treatment.

Supplementary outpatient insurance

Pulse Eco	Pulse Top	Pulse Premium	
Medication (prescribed by a doctor)			
90% of the costs of Swissmedic-approved medicinal products up to a maximum of CHF 50,000 per calendar year. Medication included on the list of pharmaceutical products for special application (LPPV) and all products under a top-level medication group on KPT's negative list (see List of uninsured drugs and products) is excluded .			
Vaccinations against infectious diseases			
100% up to CHF 200 per calendar year	100% up to CHF 400 per calendar year	100% up to CHF 800 per calendar year	
Maternity (waiting period: 270 days)			
	75% up to CHF 300 per pregnancy	75% up to CHF 450 per pregnancy	
(Pregnancy check-ups, antenatal courses, breastfeeding counselling)			
Transport and emergency rescue costs			
Within Switzerland: in Switzerland, in addition to our benefit obligations under basic health insurance (CHI), we cover the costs for medically necessary emergency rescue and transport to the nearest doctor or hospital (this does not include costs for search and rescue operations in a non-life threatening situation or transportation of a body). Abroad: covered by assistance benefits under travel and holiday insurance.			
Treatment abroad (in the case of acute illness or accident during a temporary stay abroad)			
Travel and holiday insurance is included for a maximum of 8 weeks per calendar year. Includes full worldwide coverage for medical expenses, additional assistance, cancellation costs, luggage and legal protection insurance.			
Medical aids (prescribed by a doctor)			
100% reimbursement of costs for medical aids prescribed by a doctor (mobility aids, orthotic insoles, hearing aids)			
Up to CHF 150 per calendar year	Up to CHF 300 per calendar year	Up to CHF 600 per calendar year	
If only part of the costs are covered under basic health insurance due to a limit defined in the List of Remedies and Equipment (MiGeL), we cover the following per year:			
Up to CHF 10 of the additional costs	Up to CHF 20 of the additional costs	Up to CHF 40 of the additional costs	
Complementary medicine			
	75% up to CHF 2,000 per calendar year (deductible of CHF 100 per calendar year)	75% up to CHF 4,000 per calendar year (deductible of CHF 100 per calendar year)	
for KPT-approved therapies (see list 'Complementary therapies covered by KPT') provided by doctors or KPT-approved therapists.			
Complementary medicines			
Phytotherapy, anthroposophic medicines, homeopathy, spagyric medicine, prescribed by doctors or KPT-recognised therapists	75% up to CHF 250 per calendar year	75% up to CHF 500 per calendar year	
Gynaecological screening			
100% assumption of costs for tests not covered by basic health insurance.			
Digital psychological counselling services			
Contribution of 75% of the costs up to CHF 1,000 per calendar year (see list of KPT 'Counselling services under Eco, Top and Premium').			
Glasses/contact lenses (prescribed by doctor or optician) Waiting period: 365 days			
	Limit of CHF 250 every three years (interannual payments are permitted).	Limit of CHF 500 every three years (interannual payments are permitted).	
	Laser vision correction (waiting period: 365 days)		
		Maximum of CHF 600 per eye (one time)	
	Health promotion		
	CHF 50 per calendar year	CHF 200 per calendar year	CHF 600 per year, up to a max. of CHF 300 per area
	for fitness, sport and well-being courses and subscriptions (see list of KPT benefits for health promotion).		
	Health screening/diagnostic services/check-up		
		75% up to CHF 2,000 per calendar year (see KPT early detection and diagnosis list).	75% up to CHF 4,000 per calendar
	Vasectomy/sterilisation		
			75% up to CHF 2,000 (one time)
	Medical massage		
		75% up to CHF 250 per calendar year	75% to CHF 650 per calendar year
	for KPT-approved therapies, therapy associations and doctors (See the list 'Complementary therapies covered by KPT')		
	Legal expenses cover in health matters		
	Legal support and contribution towards costs associated with a health-injury-related legal dispute. Payment up to a maximum of CHF 300.000 (or CHF 100.000 in cases outside Europe and countries of the Mediterranean).		

Basic health insurance

Supplementary hospital insurance

Compulsory health insurance (CHI)		Flex Eco	Flex Top
Under the Health Insurance Act (HIA). All models		Supplementary hospital insurance	Supplementary hospital insurance
Hospital stay/hospital ward			
Full cost coverage for a stay on the ward of a hospital on the hospital list of the canton of residence or location. In the canton in which the hospital is located, up to the tariff applicable within the insured person's canton of residence.	H	Assumption of costs minus co-payment amount for a selected ward at a hospital located in Switzerland. Free choice of doctor when upgrading.	H
		General: no co-payment required Semi-private: CHF 300 per day Private: CHF 500 per day Max. CHF 6,000 per calendar year (CHF 3,000 per calendar year up to the age of 18)	General: no co-payment required Semi-private: CHF 150 per day Private: CHF 250 per day Max. CHF 4,000 per calendar year (CHF 2,000 per calendar year up to the age of 18)
Maternity (waiting period: 270 days (except for CHI))			
Hospital: same as Hospital stay section. Check-ups and birth costs: coverage in accordance with the recognised tariffs. CHF 150 towards antenatal classes per birth. Cost of 3 breastfeeding counselling sessions covered.	H	Assumption of costs minus co-payment amount for a selected ward at a hospital located in Switzerland. Max. CHF 50 per day for home help for 5 days after an in-patient birth.	H
		Birth allowance of CHF 500	Birth allowance of CHF 1,000 for an outpatient birth.
Rooming-in			
			Max. CHF 50 per day for max. 30 days per calendar year.
Balneotherapy, convalescence therapy (medically necessary and prescribed by a doctor)			
Balneotherapy: CHF 10 per day for max. 21 days per calendar year.			CHF 50 per day in each case for max. 30 days per calendar year.
Home help (prescribed by a doctor)			
			CHF 50 per day for max. 30 days per calendar year.
Transport costs			
50%, max. CHF 500 per calendar year for medically necessary transport.		Full reimbursement of costs for medically necessary transport for inpatient treatment within Switzerland.	
Emergency rescue costs			
50%, max. CHF 5,000 per calendar year (in Switzerland).		Full cost coverage.	Full cost coverage.
Treatment abroad (in the case of an accident or emergency during a temporary stay abroad)			
Outside the EU/EFTA: payment of treatment and hospital costs up to a maximum of twice the tariff in the canton of residence (listed hospital with service mandate) Within the EU/EFTA: assumption of costs in accordance with national law and the social security tariff of the host country.		Assumption of costs minus co-payment amount for a selected ward at an acute care hospital anywhere in the world.	
		Transport abroad for inpatient treatment	
		Transport: up to CHF 5,000 per calendar year.	
		Travel and holiday insurance is included for a maximum of 8 weeks per calendar year. Includes full coverage for medical expenses. Assistance, cancellation costs, luggage and legal protection insurance are also included worldwide.	
Outpatient procedures at a KPT-approved hospital			
Coverage in accordance with the recognised tariffs. Treatment by Swiss-certified doctors (eidg. dipl.).			Contributions amounting to 75% of the costs, up to a maximum of CHF 1,000 per calendar year, for a free choice of doctor, transport to and from hospital, childcare.
Lump-sum payments			
			One-time payment of CHF 5,000 following a heart attack, stroke or cancer for the insured person to use as they wish.
Acceptance into a higher value supplementary hospital insurance plan			
			Without medical examination within ten years of the policy start date.

H listed hospitals with a service mandate and hospitals under contract with KPT (contractual hospitals).

General		Semi-private		Private		Private Worldwide	
Supplementary hospital insurance		Supplementary hospital insurance		Supplementary hospital insurance		Supplementary hospital insurance	
Hospital stay/hospital ward							
Full cost coverage for a general ward throughout Switzerland. No free choice of doctor.	H	Full cost coverage for a semi-private ward throughout Switzerland. Free choice of doctor.	H	Full cost coverage for a private ward throughout Switzerland. Free choice of doctor.	H	Full cost coverage for a private ward at any hospital worldwide. Free choice of doctor.	
Maternity (waiting period: 270 days (except for CHI))							
Full cost coverage for a general ward throughout Switzerland.	H	Full cost coverage for a semi-private ward throughout Switzerland.	H	Full cost coverage for a private ward throughout Switzerland.	H	Full cost coverage for a private ward at any hospital worldwide.	
CHF 100 per day		CHF 200 per day For 5 days in a cantonal birth centre without a service mandate.		CHF 300 per day		CHF 300 per day	
Rooming-in							
CHF 50 per day for 14 days max.							
Balneotherapy, convalescence therapy (medically necessary and prescribed by a doctor)							
Max. CHF 20 per day		Max. CHF 40 per day For a limited period of between 30 and 42 days.		Max. CHF 60 per day		Max. CHF 60 per day	
Home help (prescribed by a doctor)							
Max. CHF 20 per day		Max. CHF 30 per day		Max. CHF 50 per day For 60 consecutive days.		Max. CHF 50 per day	
Transport costs							
Full reimbursement of costs for medically necessary transport for inpatient treatment within Switzerland.							
Emergency rescue costs							
Up to CHF 20,000 per incident.							
Treatment abroad (in the case of an accident or emergency during a temporary stay abroad)							
In an acute care hospital max. CHF 20,000 per calendar year.		In an acute care hospital in Europe, including countries bordering the Mediterranean, full cost coverage. In the rest of the world: max. CHF 50,000 per calendar year.		Full cost coverage in an acute care hospital worldwide. USA and Canada: max. CHF 100,000 per calendar year.		Full cost coverage in an acute care hospital worldwide.	
Transport abroad for inpatient treatment							
CHF 2,000 per incident.		CHF 3,000 per incident.		CHF 6,000 per incident.		CHF 6,000 per incident.	
Travel and holiday insurance is included for a maximum of 8 weeks per calendar year. Includes full coverage for medical expenses. Assistance, cancellation costs, luggage and legal protection insurance are also included worldwide.							

H listed hospitals with a service mandate and hospitals under contract with KPT (contractual hospitals).

Attractive alternative supplementary health insurance options

Sicuranta admission guarantee insurance

- Guarantees your future admission to a semi-private or private supplementary hospital insurance policy
 - Future admission is guaranteed regardless of your state of health
 - Contract duration can be individually selected
- kpt.ch/admission-guarantee

Dental treatment insurance

- Choose from three benefit classes with contributions towards dental and orthodontic treatment costs
 - Some benefit classes cover unlimited costs per calendar year for corrective orthodontics
- kpt.ch/dental-insurance

Supplementary accident insurance for care services

- Covers shortfalls in statutory occupational accident insurance after an accident
 - Contributions towards home care and home help,
 - convalescence therapy and balneotherapy, transport, emergency rescue and more
 - No health check required
- kpt.ch/care-services

Teddy child insurance

- Financial support following a child cancer diagnosis
 - Monthly pension for use at your discretion (e.g. for home help and carers, reduced hours at work, treatment costs)
 - Monthly pension options:
 - CHF 2,000 for 12 months
 - CHF 4,000 for 12 months
 - CHF 4,000 for 24 months
- kpt.ch/teddy-en

Lump-sum insurance for death or disability following an accident or illness

- Offers financial security should the worst happen
 - Covers any shortfalls in the occupational pension scheme
 - Preserves your usual standard of living
- kpt.ch/lump-sum

Daily hospital allowance insurance

- Financial support during a hospital stay
 - You choose how to spend the allowance: e.g. for a single room or home help
 - You choose the daily allowance amount: CHF 100, CHF 150, CHF 200, CHF 250 or CHF 300 per day in hospital
- kpt.ch/daily-hospital-allowance

Income protection insurance

- Guaranteed income in the event of a loss of earnings due to an accident or illness
 - You choose the length of the waiting period and daily allowance amount
 - Available both to employees and self-employed persons
- kpt.ch/income-protection

Motorists' and personal legal protection insurance

- Up to CHF 300,000 per case for legal disputes relating to traffic, private law, insurance and criminal proceedings
 - Competent legal advice
 - The insurance covers Europe and the countries bordering the Mediterranean
- kpt.ch/motor

Internet legal protection insurance

- Up to CHF 50,000 per case for legal disputes arising from private use of the Internet
 - Free of charge for customers who use KPTnet
- kpt.ch/internet-legal-protection

Travel and holiday insurance

- All-round protection when travelling
 - SOS number for emergency assistance worldwide
 - Choose the benefits and insurance duration that work for you
 - Legal protection included
- kpt.ch/travel-insurance

International health insurance

- Remain insured according to Swiss standards when you move abroad (outside of the EU).
 - Free choice of doctor and hospital worldwide
- kpt.ch/voluntary-insurance

Almost all supplementary health insurance policies can be concluded up to the age of 65.

Tips for reducing your premiums



Avoid unnecessary accident insurance

Do you work at least 8 hours a week for the same employer? Then your employer has a legal obligation to arrange accident insurance (both for accidents inside and outside work), meaning that you are not required to take out accident insurance under basic health insurance. This reduces your premium by 7%.



Prepayment discount

Enjoy a premium discount with basic and supplementary health insurance when you pay six months or a whole year of premiums up front in line with the payment deadline.

- Six monthly: 0.5% discount
- Annual: 1% discount



Online discount for using the KPTnet customer portal

Quick, straightforward and direct: use our customer portal to manage your insurance policies online and paper free, and benefit from a 5% discount on various supplementary health insurance policies. You will also receive Internet legal protection insurance at no extra cost. Apply now: kpt.ch/online-application



Loyalty discount

If your policy has been active with us for at least 3 years, you qualify for a 6.7% annual discount on Pulse supplementary health insurance and all supplementary hospital insurance policies.



Collective insurance for companies or associations

Does your employer or association have a collective agreement with us? If so, you benefit from a collective discount on various KPT supplementary health insurance policies.



Longer waiting period for daily allowance

Save premiums by selecting a longer waiting period for your income protection insurance.



Savings tip: receive money back on paid premiums ('payback')

For a hospital stay

If you have Semi-Private, Private or Private Worldwide supplementary hospital insurance without a hospital deductible, you can opt voluntarily to stay on a general ward at a hospital with which KPT has a valid contract. You will then receive money back:

- **If you have semi-private insurance:** CHF 100 per day up to max. CHF 1,000 per calendar year
- **If you have private insurance:** CHF 125 per day up to max. CHF 1,250 per calendar year

Important: contact your customer centre for information prior to a stay in hospital and notify us of your wishes in writing prior to your hospital admission. Payback will be made once the bill has been issued.

For an outpatient birth

If you opt to deliver your baby in an outpatient setting – at a hospital, birth centre or in your home – instead of on a semi-private or private ward, you will receive a lump-sum refund.

- **If you have semi-private insurance:** CHF 1,000 per birth
- **If you have private insurance:** CHF 1,250 per birth

Here to advise you wherever you are

Which model is best for you? Does it need adjusting for a holiday? Which treatments are covered? Whatever it is, wherever you are, we're here for you. Whenever you need us. In person. Online. By telephone. On site.

Make a no-obligation appointment



Contact us

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This overview is based on the legal principles established by the HIA and IPA, in particular, and the currently applicable insurance conditions of KPT. All claims are assessed exclusively on the basis of the legal principles and insurance conditions of KPT.

For more information, see
kpt.ch/insurance_conditions