



KPT, Postfach, CH-3001 Bern
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Choice of Doctor Insurance (PRIO)

Special conditions supplementary to the GCI of
01.2023

Contract

Purpose and conditions PRIO art. 1

- ¹ We accept the cost of the benefits indicated under PRIO art. 2 to art. 3, in particular the costs incurred for free choice of doctor and choice of material in cases of stationary treatment corresponding to the standard applicable in the general ward of an acute hospital, a birthing center or a rehabilitation clinic supplementary to the obligatory insurance for medical care or our non-mandatory health insurance.
- ² Conditions:
 - the hospital in which the specialist practices is on the list of hospitals maintained by your canton of domicile or that of the canton in which the hospital is located and the hospital has been authorised to provide the type of treatment prescribed for you (listed hospital in compliance with art. 41 para. 1bis KVG), and
 - the doctor chosen (specialist and specialized assistant physician or medical consultant) has concluded an appropriate cooperation contract with the insurer. Doctors who may be chosen by insured persons are indicated on a list published by the insurer that may be consulted or demanded at any time.

Entitlement to benefits exists only if both conditions are fulfilled simultaneously.

Benefits

Choice of doctor PRIO art. 2

- ¹ In the case of stationary treatment, we pay the fee to the specialist chosen by you provided the conditions indicated in PRIO art. 1 are fulfilled.
- ² In addition we pay the fee of a specialized assistant physician or medical consultant brought in by a contracting doctor (specialist), provided such specialist assistance is required in the case of surgical operations.

Material PRIO art. 3

- ¹ In the case of surgical operations that take place during a stationary treatment we pay the additional cost of material or supplementary costs not included in the lump sum charged by the hospital for the type of treatment as agreed in tariff contracts and that are incurred because of the method used during the operation provided the conditions indicated in PRIO art. 1 are fulfilled. Disposable material, expendable items, implants and prosthesis in particular are deemed to be supplementary material. Additional costs for material or supplementary costs of up to CHF 2,500.– will be accepted per surgical operation that leads to the hospital charging a lump sum for treatment.
- ² Exclusions pursuant to GCI art. 4 for ineffective, unsuitable and uneconomical treatment, or experimental forms of therapy are not applicable to the cost of material or supplementary costs.



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Medical cover

Right to transfer or to cancel *PRIO art. 4*

- ¹ In cases where no medical cover is available (no offer of services or an insufficient number of doctors to choose from) you are entitled to transfer without a risk assessment and at any age to the Hospital Costs Insurance, semiprivate ward (H2), or the Hospital Costs Insurance, general ward (H1), of KPT Versicherungen AG, or to cancel the insurance.
- ² The right of transfer or the right to cancel the insurance may also be exercised in the following cases:
 - in cases of change of domicile to a canton where KPT Versicherungen AG has not concluded any cooperation contracts with doctors and is therefore unable to offer a selection of doctors to choose from;
 - if a sufficient choice of doctors ceases to be available in your canton of domicile during the contractual period, that is if there are less than two doctors available on the list of doctors to choose from.

In such cases KPT Versicherungen AG will inform you without delay and grant you the opportunity to exercise the right of transfer or the right to cancel the insurance within a period of 60 days. Transfer or cancellation can take effect on the first of the following month.

No right of transfer or right to cancel the insurance exists under this condition if doctors who could formerly be chosen are deleted from the list because the cooperation contract is terminated.

Age group

Change of age group *PRIO art. 5*

The premium level of your supplementary insurance is tarified according to age. Change to a higher age group is usually associated with an increase in the premium. It takes place on January 1 of the year in which you attain the age effective for the change.

The age groups are as follows: 0–18; 19–25; 26–30; 31–35; 36–40; 41–45; 46–50; 51–55; 56–60; 61–65; 66–70; from 71 years of age.

Berne, 1 June 2022
KPT Versicherungen AG