




























	HospiCover	EveriCover	EveriCover Plus
BENEFITS & LIMITS	CHF	CHF	CHF
Total amount of cover per year	3,5 million	3,5 million	3,5 million
<b>IN-PATIENT / DAY CARE</b>			
 Operating theatre, medical fees, tests, scans and X-rays	✓Full Cover	✓Full Cover	✓Full Cover
 Private room and meals	✓Full coverage hospitals For private clinics 20% co-insurance	✓Full coverage hospitals For private clinics 20% co-insurance	✓Full coverage hospitals For private clinics 10% co-insurance
 Room and board for a person accompanying a hospitalised or insured child	150 per day / 15 nights per insurance period	150 per day / 15 nights per insurance period	150 per day / 15 nights per insurance period
 Rehabilitation	13 weeks (following hospitalisation)	13 weeks	13 weeks
 Organ transplants (kidney, liver, lung, heart and skin grafts)	✓Full Cover	✓Full Cover	✓Full Cover
 Mental illness in case of hospitalisation	30 nights	30 nights	30 nights
 Emergency ward medical treatment	✓Full Cover	✓Full Cover	✓Full Cover
 Transportation by ambulance	1 500 per event	1 500 per event	1 500 per event
 Birth defect and congenital anomaly	50 000 or one month's cover, whichever limit is reached first	50 000 or one month's cover whichever is reached first	50 000 or one month's cover whichever is reached first
<b>OUT-PATIENT</b>			
 General practitioner and specialist services	Limited to 30 days before and 90 days after hospitalisation	✓Full Cover	✓Full Cover
 Alternative medicine	Limited to 30 days before and 90 days after hospitalisation	✓Full Cover	✓Full Cover
 Prescription drugs	Limited to 30 days before and 90 days after hospitalisation	✓Full Cover	✓Full Cover
 Physiotherapy sessions	Limited to 30 days before and 90 days after hospitalisation	✓Full Cover	✓Full Cover

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OUT-PATIENT	CHF	CHF	CHF
 Laboratory and radiology facilities	Limited to 30 days before and 90 days after hospitalisation	✓Full Cover	✓Full Cover
 Nursing at home	26 weeks, subject to a maximum of 90 days following each separate hospitalisation	26 weeks	26 weeks
 Maternity: Maternity care services pregnancy and child birth treatments	Not covered	Not covered	20 000 10% co-insurance
 Dental within 48 hours of accident	✓Full Cover following hospitalisation	✓Full Cover	✓Full Cover
 Dental care: Routine dental care, Dental prostheses, Major dental treatments	Not covered	Not covered	3 000 per insured / 5 000 per family 10% co-insurance
 Orthodontic treatment (up to age 19)	Not covered	Not covered	Not covered
 Optical benefits	Not covered	Not covered	Not covered
 Wellness benefits: Cancer screening	Not covered	Not covered	Not covered
 Assistance benefits: Medical emergency evacuation and repatriation	✓Full Cover	✓Full Cover	✓Full Cover
 Transportation of close relative or friend	✓Full Cover	✓Full Cover	✓Full Cover
 Escorted return of a child aged under 19	✓Full Cover	✓Full Cover	✓Full Cover
 Emergency mountain and assistance in mountains	Not Covered	25 000	25 000
<b>ASSISTANCE BENEFITS IN CASE OF DEATH</b>			
 Repatriation of mortal remains	✓Full Cover	✓Full Cover	✓Full Cover
 Contribution to coffin costs	1 500	1 500	1 500
 Transportation of insured family members travelling with the deceased insured person	✓Full Cover	✓Full Cover	✓Full Cover

This document is aimed at providing a summary of insurance benefits and services for the **EveriCover Line** scheme according to the options selected. It is not intended to replace the Golden Care general conditions and / or certificate of insurance.