Praevita

Supplementary Conditions (SC) under the Federal Insurance Contract Act (VVG)

Version of 2026, valid from 1 January 2026

SWICA

Customer information

We wish to point out some contractual bases that are particularly important before you sign a contract.

The insurance contract is based on the documents specified in the customer information in the General Insurance Conditions (separate document).

Look out for this symbol in the Supplementary Conditions below: i

Please ask someone to explain the marked text passages before you sign the contract. We use the symbol to emphasise the following:

- Who can take out insurance?
- What does the insurance cover and what does it exclude?
- What are the policyholder's obligations?
- When is an insured person entitled to benefits?

Supplementary insurance Praevita

I. Scope of application

Art. 1 Purpose

SWICA Insurances Ltd, hereinafter referred to as "SWICA", pays for the preventive measures listed in Art. 4 and 5 under Praevita supplementary insurance as additional benefits on top of those provided by mandatory healthcare insurance (in accordance with KVG, SR 832.10), Completa Top and Completa Forte.

Art. 2 Policyholder

1. Anyone who has a legal place of residence in Switzerland can apply for this supplementary insurance.
2. A Completa Top or Completa Forte supplementary plan from SWICA must be in effect before a Praevita plan can be purchased. Terminating the Completa Top or Completa Forte insurance contract results in immediate automatic termination of the Praevita contract.

II. Scope of insurance

Art. 3 Scope of insurance

1. SWICA covers the cost of treatment and of preventive healthcare measures, provided that such treatment and measures are efficacious, purposeful and cost-effective.
2. The scope of the insurance is based on Art. 2 of the General Insurance Conditions (GIC).
3. Co-payments from other social insurances are not covered.

III. Praevita benefits

Art. 4 Vaccinations, travel vaccinations

1. SWICA covers 90% of the costs, up to 200 francs, for medically recommended vaccinations that are not covered under a statutory mandatory plan per calendar year.
2. Persons who have moved or been posted abroad after purchasing a policy can also obtain the benefits referred to in no. 1 in their new country of residence or the country they have been posted to.

Art. 5 Health promotion and preventive healthcare

1. SWICA pays 50% of the costs for health-promoting (e.g. fitness products, nutrition programmes, relaxation therapies) and preventive healthcare measures (e.g. prevention courses, advisory services), based on a separate list, up to a total of 500 francs per calendar year, with up to 300 francs applied to each prevention type (exercise and strengthening, nutrition, wellbeing and relaxation, preventive measures).
2. For medical check-ups and gynaecological preventive exams not covered under a statutory mandatory plan and that serve to detect illnesses at an early stage, SWICA uses a separate list and covers 90% of the cost, up to 500 francs within three calendar years.
3. The benefits under nos. 1 and 2 can also be obtained abroad, provided that treatment is indicated in accordance with the lists in nos. 1 and 2 of this Article.

IV. Co-payment

Art. 6 Co-payment

The percentage of the co-payment is applied on top of any other supplementary insurance cover and is calculated separately for each SWICA insurance product.

V. General provisions

Art. 7 Lists and directories

Art. 7 of the GIC applies in respect of the lists and directories referred to in these provisions.

Art. 8 Premium rate model

This product uses an age-based rate. In derogation from Art. 17 GIC, the age groups are: 0–18, 19–25, 26–30, followed by 5-year age increments up to the age of 71+.

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