

Summary sheet on accident insurance (UVG)

1. Legal basis

The insurance is based on the provisions of the Federal Accident Insurance Act (UVG) of 20 March 1981 and the associated ordinances.

2. Insured persons

All **employed persons** in Switzerland – including home-workers, apprentices, interns, volunteers etc. – who work for an employer in return for remuneration and/or benefits in kind or for education/training purposes **must have accident insurance**.

3. Scope of insurance

Insured accidents and occupational illnesses

- 3.1 For **fulltime employees**, insurance benefits are provided in respect of occupational accidents, non-occupational accidents, and occupational illnesses.
- 3.2 For **part-time employees** (i.e. temporary and part-time staff) who work less than eight hours a week for an employer, insurance benefits are provided in respect of occupational accidents and occupational illnesses. Accidents which occur on the way to or from work are regarded as occupational accidents for these individuals.
Employees who have worked an average of at least eight hours a week prior to an accident are covered for non-occupational accidents.
- 3.3 Entitlement to benefits remains in effect for as long as the accident is the cause of the health impairment. Under these prerequisites, the insurance also covers relapses and sequelae.

4. Insurance term

Commencement of insurance cover

- 4.1 Insurance cover begins on the day on which the employment relationship begins or entitlement to remuneration comes into effect for the first time, but in any case as of the time, when the employee sets out for work.

End of insurance cover

- 4.2 Insurance cover ends on the 31st day following the day on which entitlement to at least half of the employee's salary or replacement salary ends. Daily benefits from mandatory accident insurance, the Income Compensation Scheme, unemployment insurance, health insurance funds and private health and accident insurance, in so far as the cash benefits in question replace continued salary payment, are regarded as salary.
- 4.3 It is possible to **extend** non-occupational accident insurance for up to six months **by prior agreement** before the insurance expires. The details are set out in a separate summary sheet.
- 4.4 **Insurance cover is suspended** if the insured person is covered by military insurance or foreign mandatory accident insurance.

5. Premiums

According to the law, **premiums** for occupational accident insurance are borne by the employer, while those for non-occupational accident insurance are borne by the insured person and can be deducted from his salary.

6. Care services and reimbursement of costs

6.1 Medical expenses

All insured persons are entitled to receive appropriate treatment following an accident, including:

- a) outpatient treatment (doctor, dentist, medication, analysis, therapy).
- b) inpatient treatment in the general ward (accommodation, care, treatment).
- c) contributions towards the cost of spa treatment.
- d) home care.

6.2 Aids

6.3 Damage to property

(if associated with physical injuries)

6.4 Travel, transport and rescue costs

6.5 Funeral expenses

7. Cash benefits

7.1 Daily benefits

In the case of complete incapacity for work, 80 per cent of insured earnings beginning on the third day after the accident. Correspondingly less in the case of partial incapacity.

7.2 Disability pension

In the case of total disability, 80 per cent of insured earnings. Correspondingly less in the case of partial disability.

7.3 Impairment compensation

Depending on the severity of the impairment, up to CHF 148,200.

7.4 Helplessness allowance

Depending on the degree of helplessness, up to CHF 2,436 per month.

7.5 Surviving dependants' pensions

As a rule:

- 40 per cent of insured earnings for the surviving spouse
- 25 per cent for full orphans
- 15 per cent for half orphans
- but in total no more than 70 per cent for all surviving dependants

8. Insured earnings

Insured earnings are the **salary** received by the insured person prior to the accident **up to the maximum of CHF 148,200 per year or CHF 406 per day**.

9. Procedure to be followed in the event of accident

9.1 The insured employee must immediately report to his employer any accident which requires medical treatment or results in incapacity for work.

9.2 The employer (or voluntarily insured person) must report the accident to SWICA immediately using the "Accident Report" or "Minor Accident Report" form as soon as he becomes aware of the accident. Please see the separate instructions for this process. He provides the person who has suffered the accident with the following documents which are included in this set of forms:

- medical certificate
- pharmacy certificate to be provided to the doctor/pharmacist
- accident certificate (certificate of incapacity for work)

The accident certificate remains in the possession of the person who has suffered the accident and must be presented to the doctor at each appointment and returned to the employer – for forwarding to SWICA – when the treatment is complete. Please see the separate summary sheet on how daily benefits are calculated and paid.

Consequences of failure to report an accident

9.3 If the insured person or his surviving dependants fail without good cause to report the accident, SWICA is entitled to reduce some or all of the benefits by up to half for the duration of the failure to report or generally. If a deliberately incorrect accident report is submitted, SWICA can refuse to pay benefits entirely. If the employer fails without good cause to report the accident, SWICA may hold him liable for the ensuing financial consequences.

10. Reduction and denial of insurance benefits

See table on page 4.

11. Accident prevention

- 11.1 The law and the associated ordinance set out provisions for the prevention of accidents and occupational illnesses.
- 11.2 Employees are obliged to support employers in implementing these measures. In particular, employees must make use of personal protective equipment and safety equipment and may not remove or modify such equipment without the employer's permission.
- 11.3 Any wilful or grossly negligent breach of these provisions is punishable.

12. Legal aspects

- 12.1 Appeals can be submitted within 30 days to the body which issued the rulings.
- 12.2 Objections to appeal decisions on insurance benefits can be lodged with the insurance court of the affected person's canton of residence within three months.
- 12.3 Administrative court appeals against the decisions of this body can be filed with the Federal Insurance Court within 30 days.

Please contact us if you require further information about the Accident Insurance Act.

10. Reduction and denial of insurance benefits

All accidents

	Care services and reimbursement of costs	Daily benefits	Pensions
Health impairment or death as partial consequence of an accident	No reduction		Appropriate reduction
If caused deliberately	No entitlement to insurance benefits (except funeral expenses)		
In the commission of a crime or offence	No reduction	Reduction Denied in particularly serious cases	
On inexcusable failure to report	Up to half of all benefits can be withdrawn if the report is more than 3 months report late.		
On submission of a deliberately incorrect report	All benefits are denied.		
On refusal of reasonable treatment	Only those benefits which would probably have been due following the expected success of the reasonable treatment which was refused by the insured person will be provided.		

Non-occupational accidents

	Care services and reimbursement of costs	Daily benefits	Pensions
Non-occupational accidents	No reduction	Reduction	No reduction
Extraordinary dangers and hazardous activities	Denial only in the case of • Military service abroad • Participation in acts of war, terrorist acts and gang-related crime	Reduction by at least 50 per cent or denial (e.g. resulting from involvement in fights and brawls)	

Other overlapping social insurance benefits

	Care services and reimbursement of costs	Daily benefits	Pensions
		Reduction if these benefits, taken together with other social insurance benefits, exceed the lost earnings (excluding helplessness allowance)	