

Denta

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 according to the customer information in the General Insurance Conditions (separate document).

Look out for this symbol in the Supplementary Conditions below: 

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?

Dental treatment insurance

Denta

I. Scope of application

Art. 1 Purpose

SWICA Insurances Ltd, hereinafter referred to as "SWICA", pays the cost of dental treatment, dental prostheses and preventive care under the Denta insurance plan.

Art. 2 Policyholder

1. **i** Anyone who has a legal place of residence in Switzerland can apply for this supplementary insurance.
2. A dentist must fill in SWICA's admission form. The applicant bears the costs of the dental examination.

II. Scope of insurance

Art. 3 Scope of insurance

Denta insurance includes the following options:

- Benefit Category 1:
50% of the dentist's fee, max. 500 francs within a calendar year
- Benefit Category 2:
50% of the dentist's fee, max. 1000 francs within a calendar year
- Benefit Category 3:
75% of the dentist's fee, max. 1500 francs within a calendar year
- Benefit Category 4:
75% of the dentist's fee, max. 2000 francs within a calendar year

The percentage of the co-payment is applied in addition to other supplementary insurance cover and calculated separately for each SWICA insurance product.

III. Benefits

Art. 4 **i** Benefits

1. SWICA covers dental treatment by a qualified dentist in accordance with the chosen insurance plan. Benefits may also be obtained abroad.
2. Policyholders below the age of 25 are eligible for double the amounts for orthodontic treatment.
3. The insurance does not cover dental care products.
4. SWICA does not cover the consequences of accidents that occurred before the insurance begins.
5. If the insurance starts during the calendar year, entitlement to benefits (insured maximum rate) is prorated to the number of insured months.

Art. 5 Definitive rate

SWICA covers dental treatment that is administered in a cost-effective manner. The policyholder must pay the dentist's fee.

Art. 6 Benefit exclusion

The insurance does not cover the cost of replacing teeth that were missing when the plan came into effect.

IV. General provisions

Art. 7 Supplementary benefits

Benefits under these conditions are paid in addition to the benefits from healthcare insurance and other supplementary insurances from SWICA that may be in effect (although in the case of social insurance, the principle of subsidiarity applies).

Art. 8 Premium rate model

The product uses a rate based on age at enrolment.