SWICA Healthcare Organisation Aeschenvorstadt 56 4010 Basel





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Regional Head Office Basel

To employees, family members and departing employees of F. Hoffmann-La Roche AG resident in Switzerland

Worldwide private accident insurance with Roche

Dear Sir or Madam

In addition to the benefits provided by SUVA accident insurance, F. Hoffmann-La Roche also offers medical expenses insurance in the event of accident for all employees with a Roche employment contract in Switzerland. **Effective 1 January 2020, Roche employees will automatically have private worldwide insurance cover through SWICA.** The premium will be paid in full by Roche. You don't have to do anything.

Family members and employees who are leaving the company can also benefit from private accident insurance worldwide provided that they are resident in Switzerland. With INFORTUNA medical expenses insurance, you have the ideal supplement to mandatory health and accident insurance. On the following page you can read about the advantages and services that SWICA's INFORTUNA plan offers you. Insurance can be taken out **without a health check** or previous customer relationship with SWICA.

Protect yourself and your loved ones today by taking out private worldwide insurance cover. Completing the enclosed application form is the easiest way to do this.

We hope that you continue to enjoy the best of health – because health is everything.

Yours sincerely

F. Hoffmann-La Roche AG

Urs Wülser

Head of Benefits Switzerland

SWICA Healthcare Insurance Ltd.

André Wunderlin

Regional Director Basel





Enjoy accident cover as a private patient - worldwide

The INFORTUNA medical expenses plan – worldwide cover as a private patient in the event of accident – offers you comprehensive cover above and beyond what's provided under statutory accident insurance.

Simple application process

Apply now for INFORTUNA private accident cover by completing the attached insurance application. The monthly premiums are shown in the application.

The benefits at a glance



Hospitalisation

Full cover for outpatient and inpatient treatment as a private patient anywhere in the world



Alternative treatments, complementary medicine

Full cover for complementary outpatient treatment by SWICA-recognised therapists



Medication

Full cover for the cost of medication



Home help, Home Attendant

Home help: full cover in Switzerland

Home Attendant: CHF 50 per day, maximum 60 days per year Home Nanny: CHF 100 per day, maximum 60 days per year



Search and recovery operations

CHF 20000 per event (valid for Switzerland and abroad)



santé24 telemedicine service

The doctors and medical specialists at santé24 are there for you 24 hours a day to answer questions relating to prevention, illness, accident and maternity.



Plus full cover for

Treatment abroad, outpatient treatment (conventional medicine), spa cures, convalescence cures, psychotherapy, glasses or contact lenses, prescribed medical aids, emergency transport, repatriation, dental treatment

The following applies to all the products listed in this overview of benefits: Benefit payments are subject to the General Insurance Conditions (GIC) and Supplementary Insurance Conditions (SIC) with the date of issue shown on your insurance policy. Year always means calendar year. Full cover means: SWICA covers all costs above and beyond the statutory and/or agreed co-payment.







Insurance application

INFORTUNA medical expenses plan in the event of accident for family members of employees and departing employees of F. Hoffmann-La Roche AG residing in Switzerland.

I would like to close the gaps in n (Please tick monthly premium)	ıy insuraı	nce ar	nd take ou	ıt INFORT	UNA worldw	ide private med	lical expe	enses cove	er in the e	vent of accid	dent.
Category				Monthly	premium						
Children up to 18 years of age				CHF 4.80)						
Adults from 19 to 40 years of age				CHF 12.2	20						
Adults from 41 to 50 years of age				CHF 13.8	30						
Adults from 51 to 60 years of age				CHF 15.8	30						
Adults aged 61 and above				CHF 20.2	20						
Personal details											
Mr Ms											
First name, surname											
Date of birth											
Street, no.											
Postcode, town/city											
Phone											
Email											
Additional information											
Roche personnel number											
(please also enter the personnel numb	er for fan	nily m	nembers)								
Already insured with SWICA	Yes		No	If yes, ins	sured person	number					
D											
Payments	`										
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IBAN											
Name of bank											
Postcode, town/city											
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	ever	y six	months (discount)		yearly (discount)			
Desired commencement date of insur	ance cove	er or R	Roche leav	ing date _							
The undersigned confirms that he/she The General Insurance Conditions (Gl							nd Art. 4	5 of the I	isurance S	Supervision A	Act (ISA).
Place/date		; 	Signature	e of applica	int/legal rep	resentative	\neg				