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Health insurance

Health insurance gives you access to good medical treatment in the event of illness or accident. All persons in Switzerland must have health insurance.

- Register yourself and your family with a Krankenkasse (② Swiss word for the provider of health insurance) as soon as possible (no later than 3 months after your entry into Switzerland).
- Once you have received the Versicherungspolice (? Confirmation of the conclusion of the insurance), you must send a copy of it to the municipal administration.
- Basic insurance is compulsory for adults and children. It covers the costs of doctor's visits, hospital treatment and medically prescribed medication.

Choice of health insurance and cost model

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List of health insurance companies

You can take out your insurance with a provider of your choice. A comparison is worthwhile, because there are over 50 providers.



Premium calculator 2023 Calculate your health insurance premium here

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Tips for saving money on health insurance

How to save money on your compulsory health insurance

Health insurance and health care for refugees (1)

Health insurance will be taken out for you. If you have any questions about medical treatment, please contact the social welfare office in your municipality of residence.

Detailed information on health insurance

Health insurance benefits

The medical benefits of basic insurance are the same for all Krankenkassen (⑦ Swiss word for the provider of health insurance) - regardless of model, deductible and place of residence. This is stipulated by law.

The Health Insurance Act stipulates that the services provided by medical professionals must be "effective, expedient and economical".

Compulsory health insurance (= basic insurance) covers the costs of examinations, treatments and necessary medication. This applies in the event of illness, accident and maternity.

You are also entitled to medical services in emergencies, for transports and rescue operations as well as in hospitals and day-care facilities.

Therapeutic measures such as occupational therapy and physiotherapy as well as preventive measures and diabetes consultations are also covered. Other benefits are also paid out for rehabilitation, nursing, speech therapy or treatment with a chiropractor.

The costs of medically and psychologically prescribed psychotherapies are also covered by basic insurance.

Note: Regular gynaecological check-ups are also covered by basic insurance.

Versicherungsprämie: Monthly costs for health insurance

Every month you have to pay money for health insurance - an Versicherungsprämie (⑦ Monthly costs for health insurance).

How much you have to pay depends on:

- Where you live
- how much you want to pay for possible health costs yourself
- what additional benefits you want to insure.

You can add additional services, such as dental treatment. These are not covered by basic insurance and must otherwise be paid separately.

The Versicherungsprämie (⑦ Monthly costs for health insurance) will be cheaper if, for example, you choose the so-called Hausarztmodell (⑦ In the event of illness, insured persons must always first consult their registered family doctor. Emergencies are excluded.). With this model, you always have to go to the family doctor's office first. Your family doctor will then refer you to a specialist practice for further treatment.

Premium calculator and savings tips from the Federal Office of Public Health (FOPH)

- Save money on basic insurance the deutsch / französisch / italienisch

Prämienverbilligung (IPV): apply for financial support

The cost of the insurance premium is expensive. The amount of the premium varies according to age group, canton of residence and Krankenkasse (③ Swiss word for the provider of health insurance), but not according to income.

Individuals and families who earn little therefore receive an individual Prämienverbilligung (IPV) (⑦ Reduction of monthly insurance costs) which only applies to basic insurance, but not to supplementary insurance.

In the Canton of St.Gallen, you always have time to register for the IPV (③ Reduction of monthly insurance costs) from 1 January up to and including 31 March. Please note that a new registration is required for each year.

Send the registration to the Social Insurance Institution of the Canton of St. Gallen (SVA SG). This can be done **online** or via the AHV branch of your municipality.

Important note: If you are moving to the Canton of St. Gallen from abroad, you can submit your IPV (② Reduction of monthly insurance costs) application at any time.

It is best to send the registration as soon as possible:

Franchise: annual fixed amount for health care costs

The Franchise (⑦ annual fixed amount for the costs of medical treatment) is the amount you have to pay yourself before the health insurance company covers a share of the costs. There are costs associated with a visit to the doctor, the purchase of prescription drugs or a hospital stay. As a patient, you must pay for these services yourself until the amount of your Franchise (⑦ annual fixed amount for the costs of medical treatment) is reached.

In each calendar year, you will have to pay this Franchise (⑦ annual fixed amount for the costs of medical treatment) yourself up to the amount you have chosen.

Select the amount of the amount:

	Adults	Children
Minimum amount	CHF 300	CHF 0
Maximum amount	CHF 2'500	CHF 600

↑ High Franchise (⑦ annual fixed amount for the costs of medical treatment)

If you are rarely sick, then you can choose a high Franchise (?) annual fixed amount for the costs of medical treatment). This will make the monthly Versicherungsprämie (?) Monthly costs for health insurance) cheaper.

↓ Low Franchise (⑦ annual fixed amount for the costs of medical treatment)

If you are expecting a lot of doctor's visits, surgery or medical treatment in the coming year, then it is better if you choose a low Franchise (⑦ annual fixed amount for the costs of medical treatment). The monthly Versicherungsprämie (⑦ Monthly costs for health insurance) is then more expensive, but you pay less towards the treatment costs.

Deductible

If your annual medical and treatment costs exceed the chosen Franchise (?) annual fixed amount for the costs of medical treatment), the health insurance will pay the additional costs.

However, you will continue to pay a deductible of 10% of the costs - up to an upper limit of 700 francs (children: 350 francs) per year.

Accident insurance

In Switzerland, everyone must have accident insurance, which covers the costs of treatment and loss of earnings if you have an accident.

> Do you have a job and work there 8 hours or more a week?

Then your employer insures you against accidents. You do not have to take out accident insurance.

> Are you self-employed or do you work less than 8 hours a week in a job?

In this case, you will have to take out accident insurance yourself. This is possible, for example, with your health insurance company as an addition.

Note: You must also take out accident insurance for the children. You can integrate this into your basic insurance.

Health insurance for children

In Switzerland, there is no family insurance like in other countries. Here, an Versicherungsprämie (⑦ Monthly costs for health insurance) is charged per person.

Although we speak of family insurance, we mean insurance packages for families. These consist of basic and supplementary insurance. Here are some recommendations:

Basic insurance for your baby

Every baby needs its own basic insurance. You can take out this insurance before the birth (and no later than 3 months after the birth).

If you want to comprehensively insure your unborn child, it is worth registering before birth. You can also take out supplementary insurance before the birth.

Accident insurance for children

Accident insurance is compulsory in Switzerland . You can take out accident insurance for your child through basic insurance .

Supplementary dental insurance from the age of 6

Dental work can be expensive. Especially for children, it is worthwhile to take out supplementary dental insurance. You will save costs if you take out insurance for your child as early as possible – preferably at kindergarten age.

Supplementary insurance for glasses

Health insurance companies contribute to the financing of children's glasses and contact lenses.

Counselling centre for patients

The Patientestelle Ostschweiz (? non-profit organization) offers:

- Advice and support in the entire field of health care
- Informing patients of all ages about their rights and obligations and helps them to exercise and enforce their rights.
- Decision support before the start of treatment and before planned surgery
- Mediation in the event of conflicts
- Advice on insurance issues, cost coverage, change of health insurance company
- Clarification of medical malpractice

> Patient Center Eastern Switzerland

	Search for a doctor by place of residence Doctors near you
0	Search for a doctor by specialty General practitioners / specialists / surgeons / dentists / alternative medicine

Contact points

Find the right contact point, advice or authority in your area: Contact points

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