Information on supplementary insurance policies

Valid from 1 January 2023

This information provides an overview of the supplementary insurance policies in accordance with the Federal Act on Insurance Contracts (VVG) as well as the key content of the policies.

The rights and obligations of the contractual parties stem from the application, the insurance policy, the applicable General Insurance Conditions (GIC) and the Act (VVG).

1. Insurer

ÖKK Versicherungen AG, based in Landquart, is the insurance provider for the following products:

- ÖKK LIVE product line:

ÖKK START, ÖKK HOSPITAL (FLEX MINI, FLEX, SEMI-PRIVATE, PRIVATE, GLOBAL), ÖKK NATURE (MINI, MIDI, PLUS), ÖKK PREVENTION, ÖKK SMILE (1,000, 1,500, 3,000, 5,000), ÖKK PARENTS and ÖKK HOSPITAL PRIVATE ACCIDENT

ÖKK UNO product line:

ÖKK OPTIMA, ÖKK PREMIUM, ÖKK COMBI (GENERAL, SEMI-PRIVATE, PRIVATE, GLOBAL, FLEX), ÖKK PRIVATE ACCIDENT, ÖKK FAMILY, ÖKK FAMILY FLEX and ÖKK DENTAL

- Additional products for both product lines:

ÖKK TOURIST - TREATMENT COSTS & PERSONAL ASSISTANCE, ÖKK COMPENSA, ÖKK BLV DAILY ALLOWANCE.

The insurer for the ÖKK PROTECT health-legal protection and the ÖKK TOURIST travel legal protection insurance is Coop Rechtsschutz AG, Aarau

The insurer for the cancellation costs insurance as well as the ÖKK TOUR-IST luggage insurance is Helvetia Swiss Insurance Company Ltd, St. Gallen. These insurance policies are the responsibility of European Travel Insurance Co., branch office of Helvetia Swiss Insurance Company Ltd, domiciled in Basel.

The insurer for ÖKK risk capital insurance in the event of disability or death caused by an accident is SOLIDA Versicherungen AG, Zurich.

The insurer for ÖKK risk capital insurance in the event of disability or death caused by illness is Squarelife Insurance AG, Ruggell, Liechtenstein.

ÖKK Kranken- und Unfallversicherung AG, Landquart, shall be entitled to take all actions on behalf and for the account of ÖKK

2. Insured risks

For the risks of illness and/or accident and/or maternity, you can choose to cover the costs of medical cover (e.g. medical treatment, stays in hospitals and convalescent facilities, medication, dental treatment) and other costs associated with these risks (e.g. medically prescribed therapies, domestic assistance, transport and rescue costs, loss of earnings, legal costs in relation to legal protection insurance as well as costs relating to travel incidents) or to take out capital insurance covering death and disability.

3. Scope of insurance cover

The insurance cover is determined individually depending on the insurance product you select. The specific insurance cover stems from the application/quote and after concluding the policy, from the insurance policy and the GIC.

Risk capital insurance policies covering death and disability resulting from an accident or illness are fixed-sum insurance policies. All other supplementary and additional insurance policies are indemnity insurance policies. Please note the general benefit exclusions and restrictions defined in the Common Provisions (CP) of the GIC. There may also be additional benefit exclusions in the individual insurance products. These can be found in the GIC of the respective product.

4. Qualifying periods

A qualifying period of 360 days applies in the ÖKK LIVE product line for insurance cover in the event of maternity. The qualifying period for maternity in the ÖKK UNO product line is 270 days. Please note the Common Provisions of the GIC with regard to qualifying periods for maternity.

For the ÖKK DENTAL and ÖKK SMILE dental insurance policies, a qualifying period of twelve months applies for prosthetic treatments such as crowns, bridges or dentures, and of six months for all other treatments such as fillings and root canal treatments. Benefits for prophylaxes and checkups are not subject to a qualifying period.

5. Excess and deductibles

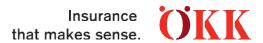
ÖKK START, ÖKK OPTIMA, ÖKK PREMIUM, ÖKK FAMILY and ÖKK FAMILY FLEX provide contributions towards transport costs, rescue and recovery operations in emergencies. Your excess is CHF 100 per case.

Please note that for ÖKK NATURE (MINI, MIDI, PLUS), an annual deductible of CHF 300 is charged for recognised alternative medical treatments. ÖKK NATURE PLUS provides contributions towards outpatient elective treatments by doctors abroad. An annual deductible of CHF 300 is also charged for these treatments.

For ÖKK DENTAL (variants A and G), an annual deductible of CHF 500 is also charged. Benefits for prophylaxes and check-ups are not subject to a deductible.

6. Start and duration of insurance

The insurance starts on the date specified on the insurance policy. If you do not terminate the insurance contract in accordance with the standard notice period of three months, it is automatically extended by one year after the end of the agreed insurance duration.



7. Right of revocation

You can revoke your application to conclude an insurance policy in writing by letter or e-mail within 14 days of submitting the application. In providing notice of revocation, all obligations of the insurer lapse.

This deadline is deemed to have been met if you notify ÖKK of the revocation (e-mail) or send your revocation declaration by post on the last day of the revocation period.

8. Premiums

The premium paid by the insured person depends on the risks insured, their age, gender, civil law place of domicile and the required insurance cover. Premiums must be paid in advance. Depending on the insurance cover, you can also pay your premiums monthly, every two months, quarterly, semi-annually or annually.

If you have not paid your premiums or cost-sharing amounts on time, you have received a reminder and ÖKK has not initiated collection proceedings to recover the outstanding amounts, the contract will be terminated by the insurer withdrawing from the contract.

9. Obligations of the insured person

When concluding supplementary insurance policies, applicants must provide complete and accurate information on any pre-existing illnesses and accidents.

As the insured person, you are then obliged to immediately report the occurrence of an insured event and to keep the consequences of such events to a minimum (statutory obligation to mitigate loss). In particular, the law requires that in the event of an accident or illness, you seek appropriate medical treatment, follow medical instructions and provide the information requested or grant the authorisation required to obtain this information.

Insured persons have an obligation to provide the insurer with all necessary information that is related to the insurance contract (e.g. change of address) or is needed to claim insurance benefits (e.g. accident report, cost guarantee request before a planned stay in hospital or a convalescent stay).

This list only describes the most important obligations. Other obligations are listed in the GIC and the Act (VVG).

10. Duration of insurance cover

You are entitled to benefits for the duration of the insurance. There is no entitlement to benefits for costs incurred before the start or after the expiry of the insurance.

11. Geographical scope of insurance cover

In principle, the insurance applies for treatment in Switzerland and, in the event of emergency treatment, abroad. The GIC of the individual insurance products apply in each case.

12. Standard termination by the policyholder

The insurance contract usually lasts for at least one year. You may terminate the insurance / an insurance product following the expiry of the insurance duration as of 31 December of each year subject to a written notice of termination received by no later than 30 September of said year.

This remains subject to any termination provisions in the individual insurance products to the contrary. These are listed in the GIC.

13. Termination in the event of a claim

After each claim for which the insurer has provided benefits, you may terminate the corresponding part of the contract in writing within 14 days of receiving payment or becoming aware that the insurer has taken responsibility for covering said benefits.

14. Termination by ÖKK

ÖKK has a right to terminate the insurance in the following cases in particular:

- Collective contracts (collective insurance for treatment costs)
- Breaches of disclosure obligation when submitting an application
- Attempted or successful insurance fraud
- For good cause (in accordance with Art. 35b VVG)

15. Other grounds for termination

The insurance lapses in the following cases in particular:

- Death of the insured person
- Moving abroad
- Reaching the age limit set for the insurance cover
- Upon definitive expiry of the entitlement to all benefits for an insurance product
- If the contract is not extended after expiry of the maximum insurance duration or in the event of suspension
- In the cases stipulated by law, in particular if there are outstanding premiums or cost-sharing amounts

Any other grounds for termination are listed in the GIC of the respective products.

16. Data processing

ÖKK Versicherungen AG and the risk carriers responsible for the individual products (third-party risk carriers) process personal data in the specific data collections in accordance with the statutory and contractual provisions. They use this data in particular to assess risk, to execute the contract, to determine premiums as well as for marketing purposes and statistical analyses. Information can also be obtained from third parties (insurers, doctors, hospitals etc.). This applies irrespective of whether a contract is entered into.

The applicable data protection provisions are observed when processing the contract. Data is only processed by people who are employed by ÖKK Versicherungen AG or the responsible third-party risk carrier, or people who are authorised to do so in order to fulfil the tasks assigned to them. In principle, personal data is not passed on to any third parties outside ÖKK Versicherungen AG. This does not apply to cases where the applicable law allows data to be passed on or where the insured person has consented for it to be passed on.

In order to meet the legal obligation to retain data, it is stored physically and/or electronically and is protected from unauthorised access using appropriate technical and organisational measures. Personal data may be retained for longer than the statutory data retention period if this is required to enforce or defend any legal claims. The retention period is, among other things, based on the statute of limitations or the period during which claims can be made against ÖKK Versicherungen AG / the third-party risk carriers. After the statutory / extraordinary retention period has expired, the personal data is destroyed / deleted.

You have the right to request the information to which you are legally entitled about how your personal data is processed. You may revoke your consent for your data to be processed at any time.



17. Notifications to ÖKK

Non-legally-binding notifications, such as changes of address, can be provided to ÖKK verbally or in writing (letter or e-mail). You can also easily notify ÖKK of any changes of address or bank account details via ÖKK's website: www.oekk.ch/en/private-clients/online-services/personal-information The form in which all other notifications are to be given can be found in the GIC, the insurance contract and the Act.

www.oekk.ch/gic