



**Office vaudois
de l'assurance-maladie**

Ch. de Mornex 40
1014 Lausanne

**CHECK FORM FOR THE EQUIVALENT
OF SWISS HEALTH CARE INSURANCE**
(Federal Law on Health Insurance (LAMal) of March 18, 1994)
(Article 2, OAMal of June 27, 1995)

**CERTIFICATE OF THE FOREIGN INSURER REQUIRED FOR EXEMPTION FROM
COMPULSORY HEALTH CARE INSURANCE IN SWITZERLAND**

1. PERSONAL DETAILS OF THE APPLICANT	
Name
Given name (s)
Street & no
Post code & city *
Date of birth nationality
	sex <input type="checkbox"/> M <input type="checkbox"/> F
Marital Status	<input type="checkbox"/> single <input type="checkbox"/> married <input type="checkbox"/> separated <input type="checkbox"/> divorced <input type="checkbox"/> widower / widow
For foreigners, type of permit	<input type="checkbox"/> permit C <input type="checkbox"/> permit B <input type="checkbox"/> permit L Valid from
Status	<input type="checkbox"/> student <input type="checkbox"/> employee seconded to Switzerland (expatriate) <input type="checkbox"/> trainee <input type="checkbox"/> lecturer <input type="checkbox"/> researcher
School / employer <input type="checkbox"/> other status
Begin of stay in Switzerland End of stay in Switzerland

(* in Switzerland)

2. FAMILY MEMBERS ALSO INCLUDED IN EXEMPTION REQUEST				
Name	Given name (s)	Date of birth	Sex M or F	Relationship
.....
.....
.....

Place and date : signature of **insured party** * :

The undersigned insurance fund certifies that the person or persons above is/are insured for the duration of his/her/their stay in Switzerland by sickness and accident insurance equivalent to coverage offered by compulsory Swiss health insurance (see reverse side) in particular for :

- full cover of all hospital expenses in a public ward of any public hospital in the canton of Vaud, at the tariffs provided for non-contractual patients. The technical and medical cost of hospitalisation included all provided benefits during the stay, is determined according to the SwissDRG (Swiss Diagnosis Related Groups ; www.swissdr.org). It is determined by the diagnosis and surgery codes identified during the stay ;
- full cover of expenses arising from pregnancy and childbirth, in particular, the cost of childbirth in a public ward of any public hospital in the canton of Vaud, at the tariffs (according to SwissDRG) provided for non-contractual patients ;
- full cover of costs for health treatment in a medico-social establishment (old people's home) (for information only : for 2012, max. CHF 108.-- per day + medicines and medical fees);
- cover of ambulatory treatment as defined in articles 25 to 31 LAMal quoted on the back of this page (for information only : for dialysis in 2012, CHF 530.-- + medicines and material).

With this certificate, the undersigned insurer undertakes to assume its benefits should arise any of the above mentioned eventualities. No recourse whatsoever may be made to social assistance.

Date of expiry of cover : Stamp / seal and signature of the **insurer** * :

Place and date :

**PLEASE RETURN THIS FORM TO THE OFFICE VAUDOIS DE L'ASSURANCE-MALADIE
CH. DE MORNEX 40, CH - 1014 LAUSANNE**

* The insurer and the person insured undertake to communicate to the competent authority the cancellation of this contract, as well as any reduction of the cover of the insurance which no longer guarantees the equivalent cover to the compulsory Swiss health insurance coverage.

EXCERPTS FROM THE FEDERAL LAW ON HEALTH CARE INSURANCE (LAMAL) OF MARCH 18TH 1994)

Art. 25 General benefits in the case of illness

1. Compulsory health care insurance covers the cost of diagnosing and treating illness and its effects.
2. These benefits cover:
 - a. examinations and treatment of an out-patient, at the residence of the patient, in a hospital or in a medical-social establishment by:
 1. doctors,
 2. chiropractors,
 3. persons providing services prescribed or ordered by a doctor or a chiropractor;
 - b. analyses, medicines, diagnostic or therapeutic services and equipment prescribed by a doctor or, within limits determined by the Federal Council, by a chiropractor;
 - c. a contribution to the costs of spa treatment prescribed by a doctor;
 - d. medical rehabilitation measures carried out or prescribed by a doctor;
 - e. the stay in the general ward of a hospital;
 - f. the stay in a birthing center (art. 29);
 - g. a contribution to medically necessary transport costs and rescue costs;
 - h. service of the apothecary for the dispensing of medicines pursuant to letter b.

Art. 26 Preventive measures

Compulsory health care insurance covers the costs of tests of certain examinations intended to detect illnesses

in time as well as prophylactic measures for insured persons particularly at risk. These examinations and prophylactic measures must be carried out or ordered by a doctor.

Art. 27 Congenital defects

In the case of congenital defects not covered by disability insurance scheme, compulsory health care insurance covers costs of the same benefits as in the case of illness.

Art. 28 Accidents

In the case of an accident pursuant to art. 1, par. 2, letter b, compulsory health care insurance covers costs of the same benefits as in the case of illness.

Art. 29 Maternity

1. In addition to the same costs as in the case of illness, compulsory health care insurance covers special costs in the case of maternity.
2. These benefits cover:
 - a. periodic check-ups carried out by a doctor or a midwife, or prescribed by a doctor, during and after pregnancy;
 - b. delivery at home, in a hospital or in a birthing center by a doctor or a midwife;
 - c. necessary advice on breast-feeding;
 - d. care and stay of new-born child in good health as long as in hospital with his/her mother.

Art. 30 Legal abortion

In the case of non-punishable abortion pursuant to art. 119 of the Swiss Penal Code, compulsory health care insurance covers the costs of the same benefits as in the case of illness.

Art. 31 Dental care

1. Compulsory health care insurance covers the cost of dental treatment:
 - a. if necessary as a consequence of a serious and non-preventable disease of the masticatory system, or
 - b. if necessary as a consequence of any other serious disease or its sequelae, or
 - c. if necessary in order to treat a serious disease or its sequelae.
2. Compulsory health insurance also covers the cost of treatment for lesions affecting the ability to chew caused by an accident pursuant to art. 1, par. 2, letter b.