

## Customer information sheet under Art. 3 IPA for supplementary insurance

### 2026 edition

This customer information sheet provides a brief overview of the insurer's identity and the key content of the insurance contract in accordance with Art. 3 of the Insurance Policies Act (IPA). The rights and obligations of the contracting parties are set out in the insurance application/policy, the General Terms and Conditions of Insurance and the Supplementary Terms and Conditions as well as in the applicable laws, in particular the IPA.

#### **Which risks are insured?**

The economic consequences of illness, accident and maternity can be insured in addition to compulsory health insurance under the Health Insurance Act (HIA) and compulsory accident insurance under the Accident Insurance Act (AIA).

#### **What is the extent of the insurance cover?**

The insurance cover can be determined on an individual basis. The insurance covers the financial consequences of illness and/or accident and/or maternity. The document "Range of benefits" summarises the extent of cover for each product. The details of the insurance benefits as well as the exclusion of benefits and any caveats are governed by the General Terms and Conditions of Insurance (GTC) and the Supplementary Terms and Conditions (STC).

#### **Lump-sum and indemnity insurance**

In the case of lump-sum insurance, the sum of the benefit is contractually stipulated. If the claim occurs, the amount is paid out, regardless of whether the corresponding costs or losses have actually been incurred.

In the case of indemnity insurance, the insurer reimburses the damage incurred or pays up to the agreed insured amount. This is referred to as covering needs.

#### **Which insurance products can be concluded with Sumiswalder?**

| Product                        | Insurance company                            | Lump sum or indemnity insurance |
|--------------------------------|----------------------------------------------|---------------------------------|
| Supplementary health insurance | Sumiswalder Health Insurance                 | Indemnity insurance             |
| Combined/Combined+             | Sumiswalder Health Insurance                 | Indemnity insurance             |
| Complementary                  | Sumiswalder Health Insurance                 | Indemnity insurance             |
| Dental                         | ÖKK-Versicherungen AG, Landquart             | Indemnity insurance             |
| UTI                            | Solida AG, Zurich                            | Lump-sum insurance              |
| KTI                            | Generali Personenversicherungen AG, Adliswil | Lump-sum insurance              |
| Legal patient protection       | Coop Rechtsschutz AG, Aarau                  | Indemnity insurance             |
| Health legal protection        | Coop Rechtsschutz AG, Aarau                  | Indemnity insurance             |
| Tourist Subito                 | ÖKK-Versicherungen AG, Landquart             | Indemnity insurance             |
| Accident insurance             | ÖKK-Versicherungen AG, Landquart             | Indemnity insurance             |

#### **How high is the premium?**

The premium sum depends on the age and gender of the insured person, the risks insured and the desired cover and cost contribution. Premiums for all products are collected by Sumiswalder.

#### **When do invoices have to be paid?**

The annual premium must be paid in advance and is due on 1 January of each year or – in the case of monthly payments – on the 1st of each month. In the case of bi-monthly, quarterly or semi-annual payments, the above statements apply mutatis mutandis. Full monthly premiums are always owed. In the case of direct payments by Sumiswalder to the service providers (doctor, hospital, pharmacy, etc.), the insured person is obliged to reimburse the agreed cost contributions within 30 days of the invoice issued by Sumiswalder.

#### **What happens if premiums and cost contributions are not paid?**

If the insured person is in arrears with the payment of the premium or the cost contribution, a reminder has been issued and no payment has been made despite a reminder, Sumiswalder's obligation to pay benefits shall cease 14 days after expiry of the reminder period. If Sumiswalder refrains from collecting the outstanding amounts through debt collection, the contract shall be terminated by the withdrawal of Sumiswalder.

#### **When is there an entitlement to a premium refund?**

In the event of premature dissolution or premature termination of the contract, the premium is only owed for the period up to the termination of the contract.

**Obligation to inform**

The insured person is obliged to report every illness or accident within five days. Addresses, name changes and deaths must be reported in writing within 15 days. If an insured person is no longer subject to compulsory insurance under the HIA, they must notify Sumiswalder accordingly within ten days.

**Obligation to cooperate**

The insured person must provide Sumiswalder with complete and truthful information about everything relating to the insured event as well as to previous illnesses and accidents and releases the medical personnel treating them (doctor, etc.) from their professional duty of confidentiality vis-à-vis Sumiswalder.

**When does the insurance start?**

The insurance starts on the date specified in the insurance application or insurance policy.

**Right of withdrawal**

The applicant may withdraw their application or declaration of acceptance in writing or in another text form. The cancellation period is 14 days and begins as soon as the applicant has requested or accepted the contract. The deadline has been met if the insured person notifies Sumiswalder of their withdrawal on the last day of the cancellation period. The withdrawal means that the application to conclude the contract or the declaration of acceptance is invalid from the outset. Any benefits already received must be reimbursed by all parties.

**Operational area**

Sumiswalder Health Insurance operates in the cantons of BE, LU, SO, AG, FR, ZH, BL, BS, SH, AR, AI, SG, GR, TG, VS, UR, SZ, OW, NW, GL, ZG.

**How long does the contract last?**

The contract is concluded for a set period and is tacitly extended by one calendar year unless Sumiswalder receives notice of termination no later than three months before the end of the year.

**When does the contract or insurance cover end?**

The contract or insurance cover ends:

- upon termination by the insured person subject to a notice period of three months to the expiry date and end of each subsequent calendar year
- Upon the death of the insured person
- Upon termination by the insured person in the event of a claim upon receipt of written notice of termination by Sumiswalder
- Once the insured person is no longer subject to compulsory health insurance under the HIA or leaves Sumiswalder's operational area

**Termination by Sumiswalder**

Sumiswalder shall refrain from cancelling the insurance policies upon expiry of the contract. Sumiswalder reserves the right to terminate the contract in the event of a breach of the duty of disclosure, insurance fraud or attempted insurance fraud.

**Other reasons for termination**

This list contains only the main reasons for termination. Further possibilities are set out in the terms and conditions of insurance.

**How does Sumiswalder handle data?**

Sumiswalder processes personal data via the dedicated data collection processes in accordance with the statutory and contractual provisions in the application and contract documents or contract processing and uses these in particular for determining the premium, for risk assessment, for processing insurance claims and for statistical analyses. Sumiswalder may forward data to the extent required to third parties involved in processing the contract, in particular to co-insurers and reinsurers, for processing.

The data is stored physically and/or electronically and destroyed/deleted once the retention period has expired. Sumiswalder may also transfer data processing to third parties. Every person has the right to request from Sumiswalder the information stipulated by law regarding the processing of any information relating to them in accordance with Art. 25 of the Federal Act on Data Protection (FADP).

**Special provisions for brokered insurance policies (Dental, Tourist Subito, AIA) of ÖKK Versicherungen AG, Land-quart**

Sumiswalder has concluded a collective agreement with ÖKK Versicherungen AG. ÖKK is a risk bearer and communicates with the supervisory authority. Sumiswalder is the broker with regard to the contractual insurance products and is responsible for everything related to the concluding and processing of insurance contracts.

If the premium has not been paid by the insured person to Sumiswalder on time following expiry of the statutory reminder period, new cases are no longer covered (Art. 20 IPA). The insured person thus loses their insurance cover. In the event that Sumiswalder's premiums were paid on time, but were not forwarded by Sumiswalder to ÖKK Versicherungen AG by the deadline, ÖKK Versicherungen AG, as the insurer, waives the right to assert the cover shortfall against the insured person in accordance with Art. 20 IPA. New insured events that occur between the expiry of the statutory reminder period and the termination of the collective insurance contract by the insurer are still covered in this case.

In accordance with Art. 21 IPA, ÖKK Versicherungen AG has the right to terminate the contract due to non-payment of premiums by Sumiswalder. In this case, ÖKK Versicherungen AG grants the insured person who has paid their premiums to the intermediary on time the right to transfer to the corresponding individual insurance policy of ÖKK Versicherungen AG.

In the event of termination of the contract, the parties shall make every effort to ensure an orderly transfer. There is the option of transferring the portfolio directly to ÖKK Versicherungen AG or transferring it to a new successor insurer.

The successor insurer shall take over the portfolio of insured persons without interruption and without reducing the insurance cover. In addition, all benefits that have not yet been settled are covered, as well as all obligations towards insured persons.