

Information Sheet Roche Risk Guarantee for serious illness RRG

Roche Risk Guarantee for serious illness RRG supplementary medical insurance scheme

This information sheet on the RRG supplementary medical insurance scheme is valid from 1 January 2010 and is based on the Pension Rules of the Welfare Foundation of F. Hoffmann-La Roche Ltd dated 1 January 2008.

1. Purpose of the Roche Risk Guarantee

Assumes illness-related medical costs that are either not covered or not fully covered by existing insurance.

2. Beneficiaries

Active Insureds:

All employees with a Swiss employment contract except employees of Tavero AG who joined the company after November 1987, employees of Rabbit Air and former employees of Roche Diabetes Care Ltd, Burgdorf.

Pensioners:

All employees actively insured in the RRG who receive a pension from the Pension Fund of F. Hoffmann-La Roche Ltd.

3. Benefits

Medical costs are insured in accordance with the provisions below:

a. Amount of guaranteed benefits

The RRG assumes treatment costs that exceed the deductible and are not covered by any other insurance (health insurance provider or other insurance policy) up to the defined maximum amount and subject to the principles set out below.

The RRG provides benefits at the rates for the patient category and hospital class for which the beneficiary was insured by his or her own health insurance provider or under another insurance policy at the start of treatment.

- Cost contributions made within the scope of applicable law will not be reimbursed. Similarly, beneficiaries who have opted to pay higher deductibles will not receive reimbursement for the excess deductible.
- If a beneficiary has neither mandatory nor voluntary insurance, the RRG will only cover additional costs within the scope of the Health Insurance Law (KVG) for inpatient hospital care in a general ward.
- Beneficiaries who have to undergo medical treatment abroad will generally receive the equivalent value of the Swiss reimbursement rates for the treatment in question in the relevant currency.
- Expenses accumulated prior to inclusion in the RRG will not be reimbursed.

b. Deductible per illness per person

The deductible as of the date of joining the RRG is graduated according to the insurance cover effective when treatment commenced:

 Deductible for treatment at health insurance providers' KVG rate or in a general ward: CHF 9,000

 Deductible for treatment at private rates or in a private or semi-private room: CHF 18,000

c. Maximum cover per illness per person

CHF 500,000

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4. Exclusions

There is no entitlement to reimbursement for inpatient treatment at spa, rest cure or weight loss centres, sanatoria, care homes or retirement homes, or in equivalent departments attached to a hospital.

Cosmetic treatments, cell therapy and dental treatment are entirely excluded. Furthermore, beneficiaries will not be entitled to any compensation for outpatient treatment or accident-related inpatient treatment. No death benefits are provided.

The Board of Trustees may voluntarily agree to provide support in cases of extreme hardship.

5. Reporting claims

If you believe you may be eligible to take advantage of the RRG, please send an application to MSPF, Pension Insurance, before claiming benefits.

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