

# AQTUELL 3/21

Customer news 3, October 2021





### Dear Reader,

As we all know, autumn is the time when basic insurance premiums are adjusted. Despite the renewed trend towards a stronger increase in healthcare costs, we have been able to keep our premiums stable or even reduce them in most premium regions. In this issue, **AQTUELL** therefore focuses on the topic of insurance premiums for 2022 and other important innovations in the insurance field.

Changes to the Swiss Insurance Contracts Act (VVG) which will take effect on 1 January 2022 concern supplementary insurance products. The Act contains provisions that are binding on contracts with private policy holders. Read more about this in the section entitled "New insurance conditions for supplementary healthcare insurance".

Good news about customer satisfaction: with the top mark of 5.2, Aquilana was chosen as one of Switzerland's best healthcare insurers by the prominent premium comparison service comparis.ch; the independent Lucerne-based market research institute AmPuls rated us second. We welcome these impressive results and regard these awards as a stimulus to maintain our commitment to the finest possible quality. We are sincerely grateful to our insured members for this high rating and for the confidence placed in us. We also thank our staff for their tireless dedication to the service of our customers.

Kind regards,

Werner Stoller

Chief Executive Officer

#### How to reach us

Our customer service answers your questions on **+41 56 203 44 22** (Monday to Friday, 8 to 12 a.m. and 1.30 to 4.30 p.m.) or by email at kundendienst@aquilana.ch. Alternatively, you may use the message function via the customer portal on www.myaquilana.ch.

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# Financial implications of the pandemic

Based on the first extrapolation for 2021, in their media release of 11 August 2021, the Federal authorities anticipate a financing deficit of CHF 17.4 billion this year. Initial estimates show that exceptional expenditure incurred in 2021 to contend with the Covid pandemic reached CHF 16.4 billion. For the ordinary Federal budget, a deficit of CHF 2.4 billion is forecast. The financial impacts of the pandemic also concern many of the cost-paying entities in the healthcare system (Federal authorities, cantons, insurers and insured persons). However, it will not be possible to give a definitive answer to the question of the costs caused by the pandemic until it is behind us and the necessary data have been assembled and evaluated. To begin with, the basic insurers paid some of the costs of tests and analyses for SARS-CoV-2; currently, they are paying some of the vaccination costs. In addition, the insurers have had to cover certain costs of outpatient treatments necessitated by a Covid-19 illness. Insured persons pay some of the pandemic-related costs themselves (cost sharing and costs of tests and analyses for SARS-CoV-2). Across all age groups, the average premium rose by 0.5 % for the year 2021; this was a very modest rise compared to previous years. Most insurers have not included any pandemicrelated costs in their budgets for the year 2021. Future premium changes will depend heavily on the cost trend for OKP compulsory healthcare insurance (postponed treatments and operations).

# OKP cost forecasts for 2021 and 2022

In its study published in June 2021 and against the background of a return to a relatively normal business situation in the healthcare sector, the KOF Swiss Economic Institute at ETH Zurich forecasts cost growth for services provided in the compulsory healthcare insurance sector of 3.4 % for the year 2021 and 2.3 % for 2022. KOF also points out that the pandemic often had an exceptional influence on the cost trend; the overall trend was in favour of cost savings. This estimate refers to average figures for the whole sector and cannot therefore be regarded as a cost forecast for each individual healthcare insurer. This contrasts with the general trend towards cost increases, which had already become apparent before the pandemic and is likely to continue in future. The reasons for this are the population trend with continuous growth of the intensity of care required, more frequently demanded medical treatment and advances made in medicine. Premium payers notice the consequences directly in the shape of higher OKP premiums.

# Insurance premiums in 2022: main points in brief

Aguilana's own estimate of average OKP costs per insured person this year is higher than the KOF forecast (calculated for the entire branch). Insurance benefits for the year 2022 are also expected to exceed the branch average. On the other hand, as we explained in the last issue of AQTUELL, Aquilana looks back on a very satisfactory financial year 2020 and was able to further step up its reserves, so enhancing its solvency. That is why premium adjustments in the basic insurance sector will be highly satisfactory for almost everyone who is insured with Aguilana. Good news too for our members on the supplementary insurance side and also for voluntary daily allowance insurance based on the Health Insurance Act (KVG): on the 2021 tariff base, premiums will remain unchanged again next year (subject to approval by the supervisory authority FINMA). That is why Aquilana will continue to be your powerful, safe and competitive partner for all health and accident insurance matters in 2022.

# Higher basic insurance discounts from 1 January 2022

Aquilana is raising the discount for exclusion of accident cover in OKP from the previous figure of 6 % to the maximum 7 % reduction allowed by law. This discount adjustment will have a direct impact on the premium payable by our insured members who have excluded accident cover from their basic insurance.

A further premium reduction is granted to young adults aged 19 to 25. With effect from 1 January 2022, our insured members in all premium regions in this age group will benefit from a higher youth discount on basic insurance. From now on, this will amount to 26 % (previously 25%).

The discount for the CASAMED general practitioner model and also for our elective annual excesses remains unchanged. The 75 % discount already allowed on child premiums (against the premium for adults) for the first and second child, as well as the additional discount of 50 % for the third and further children under the age of 18, also continue unchanged.

# OKP premiums 2022: keeping your wallet healthy too!

The OKP tariff adjustment for an adult above the age of 26 with an annual excess of CHF 300 and accident cover will range between **–4%** (cantons of GE, SG, VD and TI) and **0%** (in a total of 18 cantons, as shown below). Expressed as a percentage or in francs, the impact on the personal premium situation of our insured members will be determined by canton of residence, tariff region, age, annual excess and chosen insurance cover.

The premium adjustments in Switzerland for adults above the age of 26 with a minimum excess of CHF 300 p.a. and with accident cover included are as follows:

Premium change	Cantons
0 %	AR, AI, BL, BS, FR, GL, GR, JU, LU, NE, NW, OW, SH, SZ, TG, UR, VS, ZG
-1.0 %	AG, ZH
-1.5 %	BE
-2 %	SO
-4%	GE, SG, TI, VD

The premium adjustments for our insured members who are resident in the EU and in the United Kingdom will range from –3 % (DE) to 4 % (AT). These premium adjustments apply to adults above the age of 26 with accident cover and an ordinary annual excess of CHF 300:

Premium change	Countries
4 %	Austria
0 %	Spain, France, United Kingdom, Italy, Netherlands, Portugal
-3 %	Germany

# Environmental levy 2022

CHF 88.20 will be refunded to you in 2022 from the proceeds of the environmental levies (CO<sub>2</sub> levy and VOC incentive fee). This amount is to be deducted from your premium, as you will see in your insurance policy. The Federal Office for the Environment (FOEN) is responsible for distributing the environmental levies to the population and does so via the healthcare insurers.



FOEN Admir



FOEN Admin VOC incentive fee



Aquilana

### Important information for you

#### 2022 insurance policy

Your personal insurance premium is shown on the enclosed insurance policy valid from 1 January 2022. Please check this policy carefully and let us know any necessary corrections without delay. May we also ask you to keep your personal insurance policy securely at all times in case you need the document later, e.g. as proof of eligibility for potential premium reduction contributions. Thank you very much!

### Time limit for changes: 30 November 2021

If you wish to adjust your existing insurance cover with effect from 1 January 2022 (e.g. different excess, application for new supplementary insurance, inclusion or exclusion of accident insurance in or from basic insurance, switch to the CASAMED general practitioner model), please let us know your requested changes immediately in writing − but no later than by 30 November 2021 − or make these changes easily and conveniently yourself online at www.aquilana.ch → SERVICE or via your myAquilana account. Insured persons who change their payment intervals and wish to benefit from a generous discount are kindly requested to let us know no later than by 30 November 2021 because premiums are collected in advance.

#### **Notice periods**

The ordinary notice period for supplementary insurance benefits already expired on 30 September 2021. Supplementary insurance policies can therefore only be terminated with effect from 31 December 2021 if an inflation-linked tariff adjustment is imposed. Termination must be notified in writing by letter to reach us no later than on 30 November 2021. Please note that an insurance downgrade will take definitive and irrevocable effect from your 65th birthday. The supplementary insurance premiums will be determined on 1 January each year based on the effective age of the insured person and the chosen supplementary insurance. If appropriate, the insured person will be assigned to the next higher age group. This does not create an exceptional right to terminate the policy concerned.

If you intend to change your basic insurance provider, your written notice of termination must reach us by 30 November 2021 at the latest. For legal reasons, a change of insurer is permitted only if no payments to Aquilana are outstanding (either premiums or cost contributions).

#### Summary for your tax return

For your next tax return, you will automatically receive a statement of your premium and healthcare costs for the year 2021 no later than by mid-February 2022.

### **Insured persons born in 2003**

Our insured members who have reached the age of 18 will be reassigned to the premium step for adults aged 19 to 25 on 1 January 2022. They will therefore no longer be eligible for the previous child discount. At the same time, in the case of an insurance policy with an elective excess, reassignment to the relevant excess step for adults will be automatic. Up to their 26th birthday, however, we grant all our insured members a youth discount which is 26 % lower than the adult premium.

### **Insured persons born in 1996**

After young insured persons have reached the age of 25, the KVG Act no longer allows them to be granted a young person's discount. They are therefore reassigned to the premium step for adults from their 26th birthday. To obtain a more favourable premium, we recommend a higher annual excess or a change from the traditional form of insurance to the CASAMED general practitioner model. This applies both to insured persons born in 1996 and to those born in 2003.

# Insured persons born in 1956 and 1957

A new phase of life begins when you reach ordinary AHV retirement age – this also affects your insurance. In principle, compulsory accident cover will automatically be included for all insured persons with basic insurance upon reaching AHV retirement age after they have been informed in writing of the change. Insured persons who have already provided evidence of continuing employment after reaching ordinary AHV retirement age in the current year will see further exclusion of their accident cover under basic insurance until the end of the calendar year at the latest. This evidence must continue to be provided once a year until final retirement and notified to us by the start of the following year. The accident inclusion will be cancelled for insured persons who provide further evidence of professional activity on 1 January 2022.

# Change of age group for supplementary insurance

The cost-benefit ratio of our supplementary insurance schemes remains highly attractive again next year. Your personal tariff will only change if we must reassign you to a higher tariff age group because of your effective age. This applies to the following supplementary insurance schemes: PLUS, TOP, dental care insurances and hospital care insurances (general, semi-private and private ward).

# Attractive opportunities to make savings

Expert, needs-based advice is a first step towards savings. It enables you to avoid double and/or over-insurance. Please contact one of our customer relationship managers to bring your premium budget under effective control. Check out our opportunities to make savings.



# New insurance conditions for supplementary healthcare insurance

On 19 June 2021, Parliament adopted a partial review of the Swiss Insurance Contracts Act (VVG) which is due to enter into force on 1 January 2022. VVG governs relations between insurance companies and private insurance policy holders and is one of the most important laws for the insurance industry. The revised law is in principle applicable only to contracts for supplementary insurance policies within the meaning of VVG that are taken out with private policy holders after the entry into force of the Act. For insurance contracts signed before the revised law enters into force or whose starting date is prior to 1 January 2022, only the following provisions of the new law apply (transitional provisions concerning the amendment of 19 June 2020 pursuant to Art. 104 VVG):

- **formal requirements** (this lays the basis for electronic business transactions)
- **right of termination** based on Art. 35a VVG (ordinary termination) and Art. 35b VVG (extraordinary termination)

This review strengthens the insured persons' rights and simplifies contacts and conclusion of contracts between insured persons and their insurers in the digital age. The existing General Terms and Conditions of Insurance for Supplementary Healthcare Insurance Policies (AVB), which apply to the supplements for healthcare insurance PLUS, TOP, hospital care insurances (SV) and dental care insurances (ZV), have been revised by Aquilana to include the innovations concerning formal requirements and the right of termination in the "AVB edition 2015 (revised version 2022)" for existing contracts. The "AVB edition 2022" has been comprehensively updated with a view to new contracts signed after the entry into force of the new law.

# What changes have been made in the AVB edition 2015 (revised version 2022)?

### Formal requirements

In cases where a written version on paper had been compulsory up to now or no formal requirement was laid down, in future, apart from a paper version, any other form which allows evidence to be provided by text will be permitted (text form). This lays the basis for electronic business transactions between the policy holder (PH) and the insurance company (IC). This new formal requirement for electronic business transactions will apply to our supplementary insurance schemes (PLUS, TOP, SV and ZV) in the following provisions of the AVB edition 2015 (revised version 2022):

- notice of termination by the PH after a breach of the obligation on the part of the IC to provide information (Art. 1, para. 4 AVB)
- notice of termination by the IC after a breach of the obligation on the part of the PH to provide information (Art. 11, para. 2 AVB)
- notifications given by the PH, e.g. in the event of name and address changes (Art. 11, para. 4 AVB)
- ordinary notice of termination given by the PH (Art. 14, paras. 1 and 2 AVB)
- notifications of changes by the IC to the PH when the AVB are revised (Art. 15, para. 4 AVB)
- submission of invoices by the PH (Art. 17, para. 4 AVB)
- notifications by the IC of changes to the premium tariff and self-pay sums (Art. 27 AVB)
- request by the IC for payment (Art. 28, para. 3 AVB)
- all notices and notifications by the PH and IC (Art. 32, paras. 1 and 2 AVB)

## Unwanted telephone calls? Aquilana will never bother you with promotional calls!

Many people are quite rightly concerned about irritating telephone advertising calls which become particularly frequent at the time of year when healthcare insurance providers can be changed. They wonder how their addresses were obtained and what can be done to prevent this practice. Aquilana is committed to fair play and strongly dissociates itself from all such aggressive and unfair promotional methods. Learn more about Aquilana's attitude, our fundamental values and recommendations for dealing with irritating call centres on our website.

### **Right of termination**

Aquilana has always waived its right of termination on the expiry of the contract or when a claim is made. The revised law now provides a statutory basis for the waiver of termination by the insurer (ordinary termination pursuant to Art. 35a VVG). The application of Art. 15, para. 1 of our AVB has therefore simply been clarified. The revised Insurance Contracts Act also grants the PH an exceptional right of termination. The insurance contract may be terminated in writing or in text form for important reasons at any time. Art. 35b VVG defines an important reason as: a. an unpredictable change of the legal criteria which renders performance of the contract impossible; b. any circumstance in the presence of which the person who gives notice could no longer in good faith be expected to continue the contract. The following provisions of the AVB have been adjusted:

- new provision concerning the legal reasons for cancellation (Art. 10, para. 3, letter g AVB)
- waiver of the ordinary right of termination and right of termination by the IC in the event of a claim (Art. 15, para. 1 AVB)
- right of the IC to terminate in the event of a breach by the PH of the obligation to provide information (Art. 15, para. 2 AVB)

#### Other adjustments

Further changes to the content or clarifying changes have been made to the AVB Art. 6, para. 2, Art. 23, para. 1, letter c, Art. 28, para. 1, Art. 33, para. 1, Art. 38, Art. 55 and Art. 68, para. 4. The new provisions are described in detail in the General Terms and Conditions for Supplementary Healthcare Insurance (AVB) edition 2015 (revised version 2022) and will apply to existing insurance policies subject to approval by the supervisory authority FINMA. The AVB can be retrieved at www.aquilana.ch → SERVICE → Bestimmungen & Formulare. We will also be happy to send you these documents by post.

### New AVB UTI, edition 2022

In addition to the General Terms and Conditions for Supplementary Healthcare Insurance Policies (AVB), the General Terms and Conditions of Accident, Death and Disability Insurance (UTI) are also being published in the new 2022 edition. The insurance provider for UTI and hence the risk bearer SOLIDA Versicherungen AG, Saumackerstrasse 35, 8048 Zurich, has made various amendments to the content as well as terminological changes which will take effect on 1 January 2022. The new edition can be retrieved at www.aquilana.ch → SERVICE → Bestimmungen & Formulare.

### Aquilana is one of the best healthcare insurers



awarded the top mark 5.2 and accordingly rated "good" along with three other competitors. In a representative survey covering all areas, more than 3,400 persons were consulted in a joint campaign with the Intervista opinion poll institute. comparis.ch had so far rated the competence and helpfulness of staff, billing (clarity, speed of payment, goodwill gestures, etc.) and the understandability and clarity of customer information. Cost/benefit, healthcare benefits (quality and service, degree of innovation), communication, transparency, convenience of the touch points and contacts as well as overall satisfaction are now also being rated. More points are awarded in this way and the survey acquires greater significance in terms of overall satisfaction and transparency. We welcome this top ranking and are grateful to the more than 38,400 insured members who place their trust in us.

This year, comparis.ch conducted another survey of customer satisfaction with basic

insurance and included Aquilana again after a five-year interruption. Aquilana was





### AmPuls customer satisfaction survey, 2nd place in 2021

In this year's customer satisfaction survey, the independent healthcare insurance tracking 2021 by the Lucerne-based market research institute AmPuls ranks Aquilana in second place. Among 13 major and mediumsized healthcare insurers, Aquilana is both proud and pleased with this place on the podium and thanks all its insured members for the trust placed in it. Aquilana regards this distinction as an incentive for an ongoing commitment to top quality.



information here







### Quality management and data protection - successful 2021 recertification audit

Aguilana underwent a recertification audit on 14 and 15 June 2021 and once again satisfied the requirements imposed by the independent Swiss Association for Quality and Management Systems (SQS) first time round with no major or minor points requiring correction. A continuous improvement of results was achieved for all the tested criteria (e.g. organisation, management, processes, data protection and security).

Find more information here

Enclosure: insurance policy/policies 2022

