

CHIS Bull'

BULLETIN OF THE CERN HEALTH
INSURANCE SCHEME

No. 43 SEPTEMBER 2017



FROM 1 SEPTEMBER

NEW CHIS RULES

GOOD TO KNOW

HOSPITALISATIONS CHOOSE CAREFULLY!

YOUR OPINION

SATISFACTION SURVEY



EDITORIAL

This issue of the CHIS Bull' features an article on the new CHIS Rules. The current Rules are the product of numerous modifications and additions to a text that was already many years old. We therefore decided several years ago to give the Rules a complete overhaul to make them easier to read, to improve their structure and to bring them into line with the Organization's other regulatory texts (e.g. the Staff Rules and Regulations, Administrative Circulars, etc.). It was a real team effort but we got there in the end. We reached the end of this long process in April and the new Rules will enter into force on 1 September 2017. Some transitional measures will nonetheless be necessary, as you will see in the article.

With the completion of this revision process, my mandate as Chair of the CHIS Board and Strategic Advisor to the Director General on health insurance matters is coming to an end after more than 9 years. I would therefore like to take this opportunity to thank all the members of the CHIS Board who have come and gone over the years, in particular the CHIS Managers with whom it has been a great pleasure to work (Erwin Mosselmans and Jean-Pol Matheys) and the Board's secretaries (the CHIS oracle himself, Marcel Aymon, and Sofia Slotte). It would not have been possible to complete this work without the constructive and attentive collaboration of the representatives of the Staff Association and the CERN-ESO Pensioners' Association, the GAC. My sincere thanks to you all!

During my time in office, we managed to get the Scheme's finances back into the black at the 2010 five-yearly review. In 2012, we changed the reimbursement rules, replacing the annual deductible with a progressive rate that is fairer for those who are lucky enough not to incur too many medical expenses. And last but not least, we completed this full re-write of the CHIS Rules. To my great regret, we didn't manage to get the French government to alter its position regarding pensioners who also receive a French state pension and therefore still have to be signed up to the French social security system. So there's still plenty of work to do, with more reforms definitely required and a number of cases to be closely monitored: the healthcare field is evolving rapidly, and although cost increases have been relatively modest in recent years, emerging new treatments may require further adjustments to our health insurance scheme.

Carmelo Saitta has been appointed by the Director-General to take over from me as of 1 May 2017. Carmelo is no stranger to the subject, as he has been attending the CHIS Board for more than 17 years, during which time he was in charge of the financial monitoring of the CHIS and in recent years acted as the Management's representative.

His long experience of the CHIS, his deep understanding of the system and his vision for the future will be important assets in tackling the challenges that await our health insurance scheme in the coming years.

So, I'm pleased to pass on the baton to Carmelo, in whom I have complete confidence, and I wish him all the best for the future.

I hope that you all have as little reason as possible to use the CHIS... in other words, I wish you the very best of health!

Philippe Charpentier,

Strategic Advisor to the Director-General on health insurance matters
Chair of the CHIS Board until 30 April 2017

CHIS BOARD MEMBERS 2017

The CERN Health Insurance Scheme Board (CHIS Board) is a sub-group of the Standing Concertation Committee (SCC) responsible for the preparatory work preceding concertation at the SCC on proposals for adjustments to the CERN Health Insurance Scheme (CHIS) submitted to the Board by the Strategic Advisor. The Board is also kept regularly informed about the Scheme's operations.

Some of the members of the CHIS Board are appointed by the Management and others by the Staff Association and the CERN-ESO Pensioners' Association (GAC).

STRATEGIC ADVISOR AND CHAIR

Philippe Charpentier (EP) (until 30 April 2017)
Carmelo Saitta (FAP) (from 1 May 2017)

MEMBERS APPOINTED BY THE MANAGEMENT

Peter Jurcso (BE), Daniela Macina (EN),
Jean-Pol Matheys (HR - CHIS Manager),
Carmelo Saitta (FAP) (until 30 April 2017),
Clara Gaspar (EP) (from 1 May 2017)

MEMBERS APPOINTED BY THE STAFF ASSOCIATION

AND THE CERN PENSIONERS' ASSOCIATION

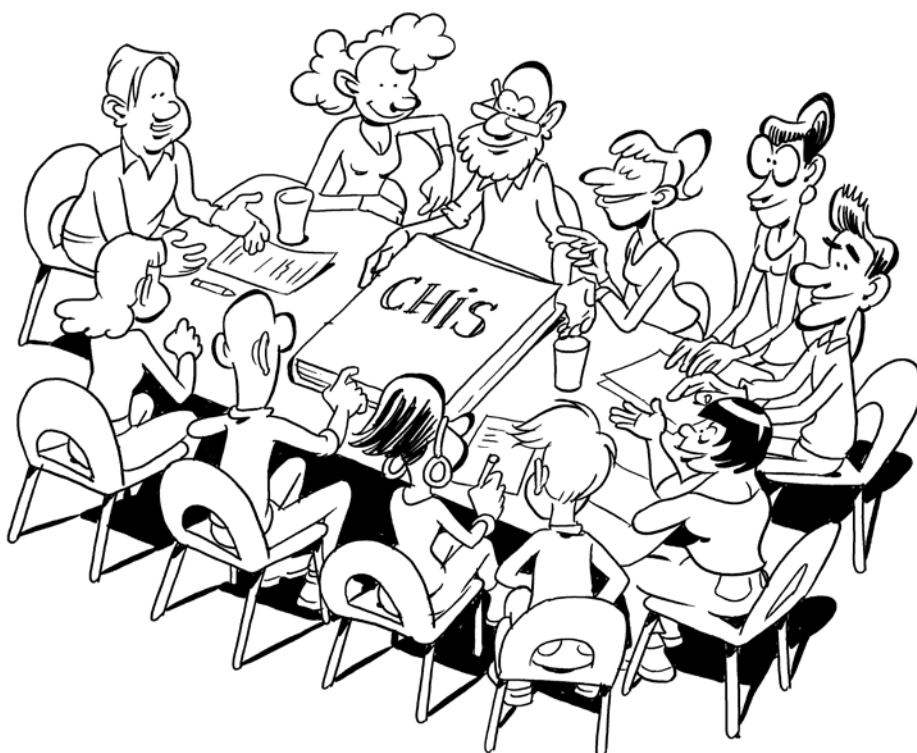
Sébastien Evrard (EN), David Jacobs (GAC),
Joël Lahaye (EN), Morna Robillard (GAC)

STANDING INVITATIONS TO ATTEND

Véronique Fassnacht (medical advisor),
Roberto Buquicchio (legal advisor),
Sandrine Baudat (financial monitoring,
from 1 May 2017)

SECRETARY

Sofia Slotte (HR)



THE NEW CHIS RULES

SIGNIFICANT CHANGES

In the framework of this revision of the Rules, the CERN Management wanted to make a number of substantive modifications to the way in which the Scheme operates. These related to the following:

- the rules governing the membership of associated members of the personnel (MPAs) other than students on CERN programmes;
- the rules applicable to couples where both partners are or used to be Compulsory Members of the CHIS;
- the additional contributions payable for Subsidiary Members who have an income but wish to use the CHIS as their primary insurance.

The CERN Health Insurance Scheme has undergone many changes since the first version of the CHIS Rules was published. Each of these changes was accompanied by a new version of the Rules, superimposing one set of changes on top of another without an in-depth revision of the whole text ever being carried out. It was therefore high time to review the entire document, with a view to improving its readability and bringing it into line with the Organization's other regulatory texts.

The current CERN Management and their immediate predecessors unfailingly supported us in this endeavour, and also proposed taking the opportunity to make a number of changes to certain aspects of the CHIS Rules. These changes had to be presented to a series of committees (SCC, TREF, the Finance Committee and the Council) in autumn 2016 for approval, which was ultimately granted in December 2016.

The CHIS Board has been working on the new text, which was drafted by a small editorial group, since June 2016. Ensuring that such a document is fully consistent is no mean feat, and it would not have been possible without the cooperation of all the members of the CHIS Board, representing the Management, the Staff Association and the CERN Pensioners' Association.

The final text has been approved by the Director-General and enters into force on 1 September 2017.

STRUCTURE OF THE RULES

Firstly, the Rules set out the general principles governing the CERN Health Insurance Scheme, in particular the principles of mutuality and solidarity between the generations. This means that Members contribute according to their means and benefit according to their needs. These are very important principles for the Organization, so it was important to emphasise them in the first chapter, which also presents the various benefits provided by the Scheme. The text then sets out a number of definitions, which are explained in detail later in the document, in order to avoid any ambiguities in the following sections.

The next two chapters detail the different categories of CHIS Members:

- **Main Members**, who may be Compulsory Members (e.g. employed members of the CERN personnel), Post-Compulsory Members (e.g. retirees from the Organization) or Voluntary Members (associated members of the personnel);
- **Subsidiary Members**, who are the family members of Main Members and who are also covered by the Scheme, which serves either as their primary health insurance or as supplementary insurance.

Several general provisions that are common to all categories of Members are then described.

Since one of the main purposes of health insurance is to reimburse part of the expenses arising from illness, accident or maternity, the following chapter describes the procedures to be followed in order to receive these benefits.

Several chapters then outline the various benefits provided by the Scheme. For each of these benefits, the Rules indicate who is eligible, the amount of the contribution payable by the Member and, where applicable, by the Organization, and finally the benefits themselves (reimbursement rate or amount of allowance paid).

The final chapters of the Rules describe the governance of the Scheme and the procedures in place for the resolution of disputes.



The financial conditions (contribution rates, reimbursement rates, amounts of allowances), as well as a useful summary of the benefits, are set out in the annexes, making it easy to modify them as necessary without changing the main body of the Rules.

MEMBERSHIP OF MPAs

The primary goal of the CHIS is to provide those employed by the Organization or in receipt of a pension from its Pension Fund with health insurance coverage in the event of illness, accident or maternity.

However, CERN's Host States require that associated members of the personnel present at CERN be covered by adequate health insurance allowing them to use healthcare providers in France and Switzerland. According to CERN's Staff Rules and Regulations, it is the responsibility of their employer to provide this cover or, failing that, their own personal responsibility. This is a prerequisite for obtaining a contract of association with the Organization and a declaration to this effect must be submitted to the Users Office. But, in response to difficulties encountered many years ago by some MPAs in finding health insurance that fulfilled these conditions, CERN introduced the possibility for MPAs to join the CHIS, subject to certain conditions relating in particular to how often they are present at CERN and their age. To allow coverage of certain specific cases, two special types of cover (reduced cover and short-term cover) were introduced into the Scheme.

Since it was very rarely used, it was decided to **discontinue the short-term cover option** (for contracts of less than three months).

It is useful to recall that CERN bears the risk of its health insurance scheme. It is only reasonable that the Organization should bear this risk for its employees and their families, but the same argument does not apply to associated members of the personnel. Therefore it was decided that the CHIS membership conditions for MPAs should be restricted as follows:

- **new voluntary MPA Members of the CHIS will no longer be accepted as of 1 September 2017;**
- MPAs who are already members on that date will be allowed to **remain Members only if they are in possession of a *carte de légitimation* issued by the Swiss authorities.**

MPAs who no longer fulfil the conditions to remain Members of the CHIS will benefit from a transition period of four months, i.e. until 31 December 2017, in order to allow them to find an alternative solution. During this period, those who wish to and are entitled to remain CHIS Members must confirm their intentions with the third-party administrator (UNIQA), and ensure that their personal details are up to date (address, bank account details, etc.)

It should be noted that several alternatives providing adequate health insurance cover are available on the local market.

In particular, we have received confirmation that all MPAs present at CERN for over 50% of their time, and who are thus entitled to a *carte de légitimation*, may become members of the Swiss health insurance scheme (LAMal) regardless of their place of residence (France or Switzerland). The Organization has made a commitment to the Member States that it will do everything possible to assist MPAs who encounter difficulties in finding adequate health insurance.

The age limit, which was previously 65 years for normal health insurance, has been aligned with the retirement age for newly recruited CERN employees, i.e. 67 at present.

MEMBERS CONTRIBUTE ACCORDING TO THEIR MEANS AND BENEFIT ACCORDING TO THEIR NEEDS; VERY IMPORTANT PRINCIPLE FOR THE ORGANIZATION.



Since cover for this risk is categorically not CERN's responsibility, **insurance for occupational illnesses and accidents for MPAs has been discontinued** (the contribution for this was previously paid by CERN). It should be noted that the medical costs associated with an occupational accident or illness recognised by the employer will continue to be reimbursed by the CHIS, but under the usual rules (e.g. at the rate of 80%, 90% or 100% according to the General Rule) and no longer under the conditions applicable to occupational accident and illness insurance at the rate of 100%.

Finally, since the long-term care (LTC) benefit is mostly relevant to the elderly and no MPA has ever had recourse to it, it has been decided that it is unnecessary for MPAs to have access to this benefit and to make the corresponding contribution. **The LTC benefit and the corresponding contribution are therefore discontinued for MPAs.**

MEMBERSHIP OF COUPLES WHERE BOTH PARTNERS ARE OR USED TO BE COMPULSORY MEMBERS

There is no change for couples where both partners are Compulsory Members: both are Main Members, with one contributing on the basis of his or her full-time salary and the other on the basis of his or her actual salary (*pro rata temporis* for part-time contracts).

In cases where one or both of the partners is a beneficiary of the CERN Pension Fund, he or she was previously able to discontinue Main Membership of the CHIS and be covered as a Subsidiary Member via his or her spouse. In such cases, however, the Organization did not pay a contribution, which was an anomaly, as it would normally contribute to the health insurance scheme for its pensioners.

It was therefore decided that both spouses must remain Main Members of the CHIS and cannot be insured as Subsidiary Members. CERN will therefore pay a contribution for both of them. When both people in a couple are pensioners, it remains possible (as at present) for both to choose to leave the CHIS. This choice is final and irreversible.

However, **one of the spouses (pensioners) will now only pay on the basis of his or her actual income** and not on the basis of his or her final salary (this income includes not only the CERN pension, but also any other income from a professional activity or pension, which must be declared to the CHIS). The amount of the contribution will be calculated using the same income brackets as for the supplementary contributions payable for spouses who are Subsidiary Members, for whom the reference salary is described below.

SUPPLEMENTARY CONTRIBUTION FOR SPOUSES

Where a spouse receives professional income or a pension but wishes to use the CHIS as his or her primary health insurance, a supplementary contribution is payable by the Main Member. The Rules have not changed at all in this respect.

However, the reference salary used to calculate the supplementary contribution has been changed to make it more progressive than it was previously. For an income below 2500 CHF, the situation remains the same: no contribution is due. But the reference salary for an income higher than 2500 CHF is now the midpoint of income brackets of 2000 CHF, up to a limit of 22 500 CHF. For example, a reference salary of 7500 CHF applies in the case of the 6500 to 8500 CHF bracket.



This same scale is applied to calculate the contribution of one of the spouses in cases of couples where both are Main Members and at least one is a pensioner, as explained above. This new scale will enter into force only on 1 March 2018, in order to allow the Members concerned time to update their information and to avoid administrative complications.

OTHER CHANGES

One change will affect Members who wish to extend their cover at the end of their contract. The possibility of a 12-month extension will be available only to Members who have been Compulsory Members for a minimum of 12 months. Otherwise, the extension will be limited to one month. In order to clarify and simplify the basis on which fertility treatments (medically-assisted reproduction, IVF, etc.) are reimbursed, these will now be reimbursed in accordance with the General Rule, subject to an overall life-long ceiling of 30 000 CHF, and will be subject to prior approval by the third-party administrator.

CONCLUSION

We hope that the new version of the CHIS Rules will allow Members to find answers more easily to any questions they might have. Of course, if anything is not clear or you have any suggestions for improvements, you can send an e-mail to uniqua@cern.ch!

With regard to the more substantial changes, which will affect only a small number of Members, we think that they will make the Scheme fairer and, in the case of the changes relating to MPAs, will also reduce the financial risk for the Organization.

2016 SATISFACTION SURVEY

As part of the CHIS management contract and UNIQA's own quality assurance policy, the CHIS members were invited, at the end of 2016, to fill out a customer satisfaction survey on the quality of UNIQA's services. The survey was designed by UNIQA in collaboration with CERN's CHIS Administrator.

The questionnaire was sent to 6977 CHIS members, and 1806 replied, a very good response rate of 27%. We would like to thank everyone for the time spent responding to the survey, which was a unique opportunity for us to understand your expectations and to improve our services.

OVERALL RESULT

For the quality of service the overall satisfaction rate was 97%, with 55% of respondents being very satisfied. This is an excellent result

Generally speaking, with satisfaction rates regularly exceeding 90%, our focus should be more on adjustments and improvements than on profound changes in the way our services are organised. We have mainly identified one improvement measure relating to the processing of requests by e-mail, aimed at handling each request in a single operation and guaranteeing that the action promised is really carried out.

THE SURVEY RESULTS AT A GLANCE...

Subject	Average satisfaction rate
Processing of reimbursement claims	88.60 %
Handling of complaints	83.00 %
Processing of requests for prior approval	92.00 %
Service provided at the Help Desk	91.00 %
Replies to telephone queries	93.20 %
Replies to letters and e-mails	88.40 %
Services in and use of the Member Lounge	86.80 %
Services provided by UNIQA Assistances	87.30 %
Overall service quality	97.00 %

We are committed to actively following this improvement measure through. The main findings of the survey are as follows:

CLAIMS HANDLING: 89% SATISFIED

The quality of service is generally considered to be good, with a satisfaction rate of 89%.

RECEPTION AND INFORMATION SERVICE

One of the most important parts of UNIQA's work is to ensure that the CHIS members are kept informed about their benefits, prior approval and acceptance procedures, and reimbursement claims. The main channels of information are the CERN Help Desk, the telephone, e-mails and conventional mail.

The indicators chosen were reception and friendliness, the Help Desk opening hours and waiting times, and the speed and quality of responses given. The overall satisfaction rate was 91%.

The average satisfaction rates for telephone and e-mail contacts with UNIQA were 93.2% and 88% respectively.

MEMBER LOUNGE (EXTRANET.UNIQA.NET)

The Member Lounge was completely revamped in 2015 and now offer new functionalities, such as the tracking of claims, and allows users to do certain operations themselves (e.g. consult the details of their whole family's dental and optical care, print attestations, etc.). 39% of participants said that they use these functionalities, of whom 18% "rarely" and 21% "often". The satisfaction rate for this service was 87%.

The comments you entered in the free-text field have also greatly helped us understand your needs and expectations and are giving us ideas for making still further improvements in the future.

Your UNIQA team

RESTRUCTURING UNIQA ASSURANCES SA BECOMES UNIQA GLOBALCARE SA

UNIQA Assurances SA, an insurance company established in Geneva since 1971 and the Swiss subsidiary of Austria-based UNIQA Insurance Group, has officially announced the restructuring of its Swiss operations.

As part of the ambitious development objectives initiated by UNIQA Insurance Group, the company's insurance operations have been separated from its management operations.

UNIQA Assurances SA has thus been renamed UNIQA GlobalCare SA to reflect its new assignment as international health insurance contract manager. The CHIS will henceforth be managed by UNIQA GlobalCare SA.

FOR YOU: NOTHING CHANGES !

This structural change will have no impact whatsoever on your usual contacts for the everyday management of your reimbursement claims. All the personnel at UNIQA GlobalCare SA remain the same and will continue to work at the same Geneva address or at the Help Desk on the CERN site.

Your UNIQA team



HOSPITALISATIONS CHOOSE CAREFULLY!

PUBLIC HOSPITALS

PUBLIC, PRIVATE, SEMI-PRIVATE SECTOR. WHAT?

In public wards, the patient cannot choose his or her doctor and accommodation may be in a room with several beds, unless a one-bed room is required for medical reasons. For hygiene reasons, increasing numbers of hospitals in Switzerland are replacing the large multi-bed rooms in their public wards with two-bed rooms. The CHIS reimbursement rate for hospitalisation in public wards is 100%.

The semi-private and private wards in public hospitals offer patients a choice of doctor and generally more comfort than in a public ward. The CHIS reimburses hospitalisation in semi-private or private wards in public hospitals in accordance with the General Rule, i.e. at 80%, 90% or 100% depending on the accumulated total costs borne by the member during the year of the hospitalisation and, importantly, the maximum total of charges that can be incurred by a member in a calendar year is 3000 CHF.

Invoices from public hospitals are sent directly to

UNIQA, which subsequently bills the patient for any part of the costs that must be borne by him or her.

PRIVATE CLINICS AND HOSPITALS

APPROVED, UNAPPROVED. WHAT?

An approved establishment is any private hospital located either:

- 1) in Switzerland**, provided that it has concluded a tariff agreement with CERN; or
- 2) in another country**, provided that it has concluded a tariff agreement with the national social security scheme and applies similar tariffs for CHIS members to those established in the aforementioned agreement.

The CHIS reimburses hospitalisation in approved private hospitals in accordance with the General Rule, i.e. at 80%, 90% or 100% depending on the accumulated total costs borne by the patient during the year of the hospitalisation and, importantly, the maximum total of charges that can be incurred by a member in a calendar year, 3000 CHF. Invoices from approved private hospitals are sent directly to UNIQA, which subsequently bills the patient for any part of the costs that must be borne by him or her. For hospitalisations in unapproved private hospitals, the CHIS reimburses only 80% of the cost, without any limit. In such circumstances you may be required to pay large sums out of your own pocket. Finally, the invoices from unapproved private hospitals will be sent directly to you and you will normally have to pay them yourself before being reimbursed by the CHIS.

CHECK FIRST!

The choice of establishment (public, approved private or unapproved private) and hospital ward (public, semi-private or private) has a significant impact on the rate of reimbursement for inpatient treatment (hospitalisation). The table below summarises the rates applicable in each case and whether or not a limit applies for the costs that must be borne by you.

HOSPITAL TYPE (PUBLIC,
APPROVED-PRIVATE
OR UNAPPROVED-PRIVATE)
AND SECTOR (PUBLIC,
PRIVATE OR SEMI-PRIVATE)
GREATLY IMPACT
REIMBURSEMENT.

Establishment	CHIS approval	Ward	Reimbursement rate	Maximum FCA (cost borne by the member)	Method of payment of invoice
Public	Always approved	Public	100%	0 CHF	Paid directly by the third-party administrator
		Private or semi-private	General rule (80%, 90% or 100% depending on the annual FCA)	3000 CHF	Paid directly by the third-party administrator
Private	Approved	All wards	General rule (80%, 90% or 100% depending on the annual FCA)	3000 CHF	Paid directly by the third-party administrator
	Unapproved	All wards	80%	Unlimited	Paid by the member

The heading “hospitalisation” covers all aspects of a hospital stay: doctors, surgeons, anaesthetists, laboratory tests, radiology examinations, etc. In all cases however, the supplement for a one-bed room is borne exclusively by the member.

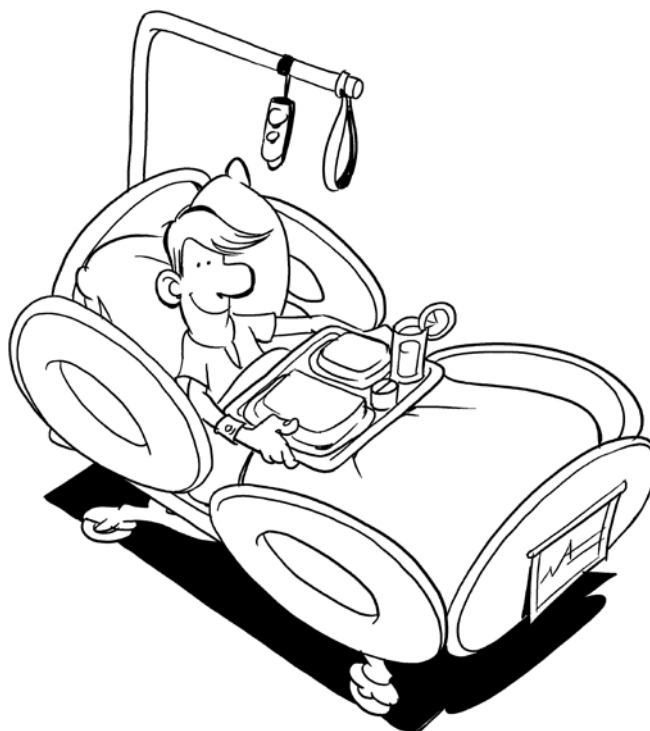
TARIFF AGREEMENTS

The full list of approved providers is available on the CHIS website (www.cern.ch/chis). In the future, this list will be updated online as necessary and it can also be obtained from UNIQA on request. In all cases, if you are expecting to need hospital care, check the updated list on the website or ask UNIQA directly. It's better to check beforehand than to be faced with a huge bill later!

Tip:

To check if a hospital or private establishment is approved by the CHIS and whether or not you will thus be reimbursed according to the General Rule:

- check the exhaustive list of approved establishments in Switzerland at www.cern.ch/chis and
- contact UNIQA for information about any private establishment in other countries



www.cern.ch/chis