

Leaflet for employers

This leaflet is intended to assist the member firm in the notification and monitoring of daily insurance benefits in case of illness and maternity, especially for long-term incapacity for work and/or difficult or doubtful course of illness.

Notification of cases of daily benefits and maternity allowances

The sickness certificate or the short absence notification, the medical certificate as well as the payroll summary must be in the possession of the office by the 10th calendar day after the beginning of the incapacity for work. *In case of insurance options with a deferred drawing of benefits, this delay is extended by the agreed deferral period. If the incapacity for work is not reported in time, the office shall be entitled to refuse payment of daily benefits or to reduce the retroactive entitlement to the last 10 days after receipt of the sickness certificate and of the medical certificate (see art.23 regulations).*

Requests for confinement benefits have also to be notified by the sickness certificate within 10 days after the interruption of duties. In order to be entitled to confinement benefits or daily benefits due to medical conditions caused by pregnancy the insured person has to be part of the circle of insured persons for at least 270 days before the confinement.

Notification for insurance options with 30, 60 or 90 days' deferment

As mentioned above, cases of daily benefits have to be notified within 10 days after expiry of the deferral period agreed. During the deferral period regularly request medical certificates and keep them in order to submit them with for the notification later on. In case of a difficult or doubtful course of illness or sickness abroad we require an immediate notification, enclosing all relevant information and files, regardless of the agreed deferral period. This enables the office to consult the medical examiner rapidly and to allow him to contact the physician in charge. In this way unclear certificates can be verified and questioned quickly. Such retroactive verifications are often no longer possible after a deferral period of more than 30 days.

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Illness and termination of employment

If not otherwise provided in the employment contract, the regulations of the Swiss Code of Obligation (CO) apply. If a person falls ill after the employment contract has been terminated or the period of notice has started to run, this is interrupted (see art. 336c para. 2 and 3 CO) and continued after the blocking period. On the other hand, after the trial period has expired, the dismissal of a sick person is possible after the blocking period specified in art. 336c para. 1 CO has expired. Please inform the office immediately about dismissals of insured persons who have been or will be notified for daily benefits (see art. 27 let. e as well as art. 28 and 29 regulations).

Sickness and holiday

Daily benefits are paid to sick persons during holidays or company holidays as long as the incapacity for work is duly attested during this time and the insured person has the possibility to draw the lost holidays at another time. No daily benefits are paid if the insured person is declared fit for holidays by the attending physician. In case of holidays abroad special rules have to be observed (see below).

Stay abroad

Insured persons who go abroad during their illness without approval of the office are not entitled to any benefits from the office during their stay abroad. The approval of the office has to be obtained in good time and in any case before the planned departure. In case of illness abroad the daily benefits will be paid for a maximum of 3 months (see art. 17 regulations).

Special regulations

In addition to the above, we would like to draw your attention to the following special provisions of the regulations: Higher insurance for an agreed income limit > CHF 200'000 p.a. (art. 6 para. 5), treatment at a health resort (art. 18), suspension of benefits (art. 21), external residence and change of address (art. 22), duties of conduct in case of incapacity for work of the insured person (art. 23), expiry of the insurance/continuation of the insurance after reaching the reference age (art. 27/let. c) and termination of the employment/transfer to individual insurance in case of unemployment (art. 28/para. 2 as well as art. 1 para. 6).

Medical examiner

In case of reasonable suspicion of irregularities as well as in case of difficult or doubtful course of a disease the office may consult its medical examiner. However, this requires that the office is documented as much as possible and that – especially in case of longer deferral periods – medical certificates are requested regularly and submitted to the office. Please note that clarifications by the medical examiner may take some time.

Questions/further information

If you have any questions regarding the notification and processing of daily benefit cases please do not hesitate to contact us. More information and documents (regulations, sickness certificate, leaflets) are available on our website **www.exfour.ch** → Legal basis → DAILY SICKNESS ALLOWANCES INSURANCE OFFICE or → Forms → Benefits of the daily sickness allowance office or → Leaflets → Benefits of the daily sickness allowance insurance office.

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Your DAILY SICKNESS ALLOWANCE INSURANCE OFFICE EXFOUR