

ANNEX V

PLAN FOR TEMPORARY STAFF WITH CONTRACTS OF A DURATION OF LESS THAN THREE MONTHS

CONDITIONS OF ADMISSION TO THE TEMPORARY PLAN OF THE SOCIETY AND PERIOD OF COVERAGE

Staff members holding a temporary appointment of a duration of less than three months may seek coverage under the Temporary plan of the Society. Holder of temporary appointments initially of less than three months cannot insure the members of their families.

The period of insurance coverage extends from the first to the last day of the employment contract, inclusive. The member of the Temporary plan cannot retain insurance coverage following the date of expiration of her/his contract, and expenses incurred after that date will not be reimbursed by the Society.

Benefits paid to staff insured under Rule III 2. of the Internal Rules of the Society shall be subject to the following procedure.

BENEFITS

Benefits shall be payable only for sickness or accident occurring in the course of employment and shall comprise only basic benefits. The supplementary benefits plan shall not apply. Benefits shall be paid in accordance with the procedure laid down by the Internal Rules of the Society and shall be calculated in the manner specified in annex III of these Rules, except for those benefits which are subject to an exclusion or limitation as prescribed below:

Exclusions: No benefit shall be paid for the following:

- Medical or paramedical benefits related to a long-term stay in a medicalized establishment (item 6)
- Long-term nursing care (item 8)
- Nursing and home-help charges (item 9)
- Benefits for care in the home (nursing or home-health services): assistance with hygiene and mobility (item 10)

- Cures (items 11 et 12)
- Treatments for obesity (item 13)
- Psychiatric and psychoanalytical treatment (item 18)
- Prosthetic appliances (item 20)
- Hearing aids and breathing device (item 21)
- Optical care (item 22)
- Dental treatment (item 23 and 24), only emergency treatments approved by the Medical Advisor will be reimbursed at 80% up to a maximum of CHF 500.-
- Maxillo-facial operations (item 25)
- Maternity (item 26)
- Infertility treatment (item 27)
- Transport (item 28)
- Funeral expenses (item 29)

Overall reimbursement ceiling: The overall amount of benefits paid by the Society shall be subject to a ceiling of CHF 20,000.- per accident or case of sickness and/or hospitalization.

EXTENSION OF COVERAGE AFTER THREE MONTHS

Any person who has been affiliated for an uninterrupted period of three months under the Temporary plan of the Society becomes eligible for joining the main plan of the Society with the same medical benefits as members holding permanent, continuing, fixed-term and temporary contracts of more than three months. In case a holder of a temporary contract is extended for a cumulative duration of three months or more, the staff member may also enroll her/his eligible family members in the main plan of the Society, this at the same time she/he enrolls her/himself to the main plan.