How to Fill in the Online Form for Exemption

Exemption from compulsory health insurance is possible under certain conditions and only upon application. The Health Department decides on applications for exemption. The example screen shots provided below will guide you through the process depending on what sort of exemption you are applying for. Depending on your type of insurance, some steps will vary while filling in the form.

Before you fill in the online form, make sure you have done/fulfilled the following points:
- You have registered at the *Kreisbüro* (local residents' registration office).
- You have received a letter regarding health insurance in Switzerland.
- You have a:
    a. European Health Insurance Card (EHIC)
    b. Swiss health insurance for international students
    c. Private Health Insurance **(**EU or non-EU)

Please click the link to get started:
https://www.zh.ch/en/gesundheit/krankenversicherung/kvg-befreiungsgesuch.html

Step 1: Personal details (same for all applicants)

Step 2: **Specifying your insurance policy**

Important: Depending on what kind of insurance you have, please follow one of the options below and fill in the form exactly as depicted.

a. European Health Insurance Card

Health insurance
European Health Insurance card — **European Health Insurance Card**

Employer — **Leave this field blank**
If available: Name of the employer (company)

AHV number — **Leave this field blank**

Type of insurance
◉ statutory ○ private ○ other — **Select "statutory"**
statutory = foreign state health insurance within the EU/EFTA (European Health Insurance Card) ; private = foreign private and/or international health insurance ; other = e.g. student insurance according to VVG or Swiss Health Insurance

Residence permit
○ B
○ B EG
○ C
○ F
○ G
○ L
○ 90 days
○ 120 days
◉ Registration procedure
○ other

Indicate the type of residence permit you have. If you have not yet received your residence permit, choose „Registration procedure ".

Next

b. Swiss health insurance for international students

Health insurance
Swisscare — **Insert your Swiss insurance's name**

Employer — **Leave this field blank**
If available: Name of the employer (company)

AHV number — **Leave this field blank**

Type of insurance
○ statutory ○ private ◉ other — **Select "other"**
statutory = foreign state health insurance within the EU/EFTA (European Health Insurance Card) ; private = foreign private and/or international health insurance ; other = e.g. student insurance according to VVG or Swiss Health Insurance

Residence permit
○ B
○ B EG
○ C
○ F
○ G
○ L
○ 90 days
○ 120 days
◉ Registration procedure
○ other

Indicate the type of residence permit you have. If you have not yet received your residence permit, choose „Registration procedure ".

Next

c. Private Health Insurance

Health insurance
Name of your private insurance company — **Name of your private insurance company**

Employer ✓ — **Leave this field blank**
If available: Name of the employer (company)

AHV number ✓ — **Leave this field blank**

Type of insurance
◯ statutory ◉ private ◯ other

statutory = foreign state health insurance within the EU/EFTA (European Health Insurance Card) ;
private = foreign private and/or international health insurance ; other = e.g. student insurance
according to VVG or Swiss Health Insurance

Select "private"

Residence permit
◯ B
◯ B EG
◯ C
◯ F
◯ G
◯ L
◯ 90 days
◯ 120 days
◉ Registration procedure
◯ other

Indicate the type of residence permit you have. If you have not yet received your residence permit, choose „Registration procedure ".

Next

Step 3: Information on your student status (same for all applicants)

Application form

2 **Further information**   3 **Enclosures**   4 **Confirmation**

✓ **Personal details**

Information on education, trainings and employment

Information on education and trainings
In education without employment in Switzerland

Note ⓘ

Type of education

◉ Student   ○ Au-pair   ○ Intern   ○ Doctorate   ○ other

Specification of the stay and the employment

◉ Residing in Switzerland, but not employed   ○ Working exclusively in Switzerland

○ Employed both in Switzerland and abroad   ○ Posted to Switzerland from abroad

○ Residing in Switzerland and working abroad   ○ Persons in the registration procedure

○ Working in Switzerland and staying in Switzerland as a weekly resident; living abroad

○ Resident in Switzerland and on parental leave abroad

Note to employees posted to Switzerland ⓘ

Receipt of benefits

○ Unemployment benefit   ○ Pension   ◉ none

Other information

Choose all applicable statements

Leave „other information" blank

☐ Privately insured abroad and not able to be insured to the previous extent due to age (>55 years) or state of health

☐ Having compulsory health insurance in the country of origin with which there are no rules on the delimitation of compulsory insurance, and do not reside in an EU/EFTA state

☐ Working for an institutional beneficiary listed by the FOPH with privileges, immunities and facilities

☐ Privately insured with a residence permit EU/EFTA without gainful employment / not entitled to gainful employment / unemployed residence

☐ Residing in Switzerland and working as an official in an EU/EFTA country

Back   **Next**

Step 4: Required documents ("enclosures")

These vary depending on your specified type of health insurance as indicated in step 2.

1. **European Health Insurance Card**

University of Zurich UZH

2. **Swiss health insurance for international students**

Application form

✓ **Personal details**   ✓ **Further information**   **3 Enclosures**   **4 Confirmation**

Needed enclosures and comments

Certificate of the educational institution
School, matriculation, postgraduate or internship certificate, au-pair contract etc.

Validated UZH Card or "Studienbescheinigung" (proof of enrolment)

Drag file to upload and drop here.
Allowed file formats: csv, xls, gif, html, jpeg, jpg, pdf, png, x-png, tif, tiff, rtf, svg, txt, xml. Permissible maximum size of the files sent in total (20 MB)

Choose file

Copy of the currently valid insurance policy / the currently valid insurance certificate

Drag file to upload and drop here.
Allowed file formats: csv, xls, gif, html, jpeg, jpg, pdf, png, x-png, tif, tiff, rtf, svg, txt, xml. Permissible maximum size of the files sent in total (20 MB)

Choose file

Comments

🔵 I would like to receive a copy of my details by e-mail. The data will be transmitted unencrypted.

Recommended

Your email address
@   ❗

Please enter a valid email address.

Your data will be transmitted to the Department of Health for further processing.

Back   **Submit application**

3. Private Health Insurance

Application form

✓   ✓   **3**   **4**

Personal details   **Further information**   **Enclosures**   **Confirmation**

Needed enclosures and comments

Certificate of the educational institution
School, matriculation, postgraduate or internship certificate, au-pair contract etc.

> **Validated UZH Card or "Studienbescheinigung" (proof of enrolment)**

Drag file to upload and drop here.
Allowed file formats: csv, xls, gif, html, jpeg, jpg, pdf, png, x-png, tif, tiff, rtf, svg, txt, xml. Permissible maximum size of the files sent in total (20 MB)

Choose file

Confirmation form A
signed and stamped by the foreign insurer (not necessary for recognised student insurance companies)

> Link to **Form A**:
>
> https://www.zh.ch/content/dam/zhweb/bilder-dokumente/themen/gesundheit/krankenversicherung/confirmation_form_a_english.pdf

Drag file to upload and drop here.
Allowed file formats: csv, xls, gif, html, jpeg, jpg, pdf, png, x-png, tif, tiff, rtf, svg, txt, xml. Permissible maximum size of the files sent in total (20 MB)

Choose file

Copy of the currently valid insurance policy / the currently valid insurance certificate

Drag file to upload and drop here.
Allowed file formats: csv, xls, gif, html, jpeg, jpg, pdf, png, x-png, tif, tiff, rtf, svg, txt, xml (max. 23 MB)

Choose file

Comments

🔵 I would like a confirmation of my data by email.   **Recommended**

Your email address

Your data will be transmitted to the Department of Health for further processing.

Back   **Submit application**

Step 5: Submitting the application

As soon as you have sent your application for exemption, forward the e-mail with the confirmation of receipt from the Health Department to the *Kreisbüro* at bva-kv@zuerich.ch (only if you reside in the city of Zurich). This way, the *Kreisbüro* will know that you are currently in the process of applying for an exemption.

Some weeks after submitting your application, the Department of Health will inform you about their decision on your application by email. Please note that it is not possible to predict how the authorities will decide.