As a logical extension of our last issue, devoted to statistics, we wanted to focus attention in this issue on a crucial question: are we better off going to the doctor, chemist or dentist in Switzerland or in France? Our survey in this issue sheds some light on the matter and might help you answer that question.

The facts are quite plain to see: while over two thirds of our members live in France, three quarters of healthcare expenditures are made in Switzerland. And yet, in most cases, France is cheaper than Switzerland.

Closer inspection of the statistics reveals that where reimbursement ceilings are in place, as for dental care, we tend to favour France, where costs are lower... but when no ceilings are in force, as is the case for doctors’ fees, we take the most convenient — and expensive — option, in Switzerland.

Seeing this, we are duty-bound to remind everyone that the CHIS is a mutual scheme, in which we all share collective responsibility. Each and every one of us, through our individual choices, can make a difference to the scheme’s financial health — or deficit. Certain options have become unavoidable, but others can still be changed without much effort to generate savings for the Scheme. All we need to do is change certain habits. For example, hopping over the border to see the dentist, to buy cheaper medicine or to have a lab test done is a public-spirited action for the general good of all members of the Scheme, as well as for ourselves.

Our insurance contributions will certainly have to rise in the coming years, but we can limit this increase through our own actions. Each and every one of us can play a part. And don’t forget — whatever impacts the health insurance budget will impact your budget!

In this issue of the CHIS’Bulletin, UNIQA reports on certain delays in the settlement of reimbursement claims. After a sadly inevitable “running-in” period, we are happy to announce that their new computing system is now up and running! We apologise for any inconvenience and look forward to being able to serve you more quickly and efficiently in the future.

You may have noticed a very slight change in the presentation of this CHIS Bulletin, with the introduction of a new character font. The aim is simply to make the Bulletin more readable. We hope it works.

With thoughts now turning towards the holidays, we should like to wish you a relaxing and enjoyable summer, making the most of the sun that was so sadly lacking during the Spring. But like other pleasures, the sun must be consumed with moderation. The Medical Service presents an overview of the real dangers associated with over-exposure to UV radiation.

But please don’t let this prevent you from having an excellent summer, whether near to home or in far-off climes. Everyone at the CHIS Bulletin wishes you a great summer!

Sylvain Weisz, Chairman of the CHIS Board
This report is based on a revealing statistic: over two thirds of CHIS members are resident in France, and yet three quarters of medical expenditures are made in Switzerland. The statistical data below illustrate this paradoxical situation for the CHIS. This situation is not new, but we need to be reminded of it so that we can try to identify ways of countering soaring healthcare costs.

> SIGNIFICANT DIFFERENCES
While only 29% of the Scheme’s insured members live in Switzerland, 75% of reimbursements relate to treatment received in Switzerland, and for hospitalisations the figure is as high as 90%.

Given that only 23% of members aged under 25 compared to 40% of those aged over 65 live in Switzerland, the higher expenditure on healthcare by the latter together with their choice of healthcare provider result in an average annual cost to the CHIS of 6023 CHF for a member living in Switzerland compared to 3611 CHF for a member living in France.

Based on the requests for reimbursements received in 2005, the average cost per treatment received (irrespective of the type) differs significantly from one side of the border to the other. Thus, compared to the overall average cost, doctors’ fees in France are only 42% of that average whereas in Switzerland they are 152% of the average. For medical imaging, outpatient analyses and treatment, the average cost per treatment is 44% of the overall average in France, but 134% in Switzerland. For dental treatment, these averages are 89% in France compared to 119% in Switzerland.

These differences, measured over the last ten years based on data supplied by UNIQA, have shown very little variation, except in the case of the cost of dental care, where fees are tending to converge.

Some of our instinctive habits as healthcare consumers generate significant additional costs for the CHIS that could easily be avoided without inconvenience to ourselves or detriment to the quality of the treatment received. So sometimes all that is required is a change in habits…

> HOSPITALISATION: IN SWITZERLAND, BY FORCE OF CIRCUMSTANCE
As all CHIS members will be aware, the most significant item of expenditure for the Scheme is hospital fees. Although members are urged to compare costs when choosing a hospital, it is very difficult to make the comparison with France as the overwhelming majority of the hospitals within easy access are concentrated either in Geneva or in other local areas of Switzerland.

Of course, there are clinics and community hospitals in Annemasse and Saint-Julien but for more serious cases the nearest university hospital centres in France are in Lyon or Grenoble. Obviously, in such cases the distance involved is a deterrent, and only the small number of pensioners who live in the vicinity of those hospitals are therefore likely to make them their first choice.

So we cannot go much further with our comparison of hospitalisation costs. However, it is the exception that confirms the rule.

The following table illustrates the pattern of reimbursements for medical expenditure based on country of residence and country in which the treatment was received.

<table>
<thead>
<tr>
<th>Category of medical fees</th>
<th>Resident in Switzerland</th>
<th>Resident in France</th>
</tr>
</thead>
<tbody>
<tr>
<td>Expenditure in</td>
<td>Switzerland</td>
<td>France</td>
</tr>
<tr>
<td>Doctor’s fees</td>
<td>96%</td>
<td>3%</td>
</tr>
<tr>
<td>Pharmaceuticals</td>
<td>90%</td>
<td>8%</td>
</tr>
<tr>
<td>Medical imaging, outpatient analyses and treatment</td>
<td>95%</td>
<td>2%</td>
</tr>
<tr>
<td>Dental treatment</td>
<td>83%</td>
<td>14%</td>
</tr>
<tr>
<td>Hospitalisations</td>
<td>98%</td>
<td>1%</td>
</tr>
</tbody>
</table>

So, the “Great Divide” between France and Switzerland really does exist.

FACT FILE

> SWITZERLAND OR FRANCE?
With the World Cup upon us, you could be forgiven for thinking that the question relates to football! However, this is the CHIS Bull’ so it concerns health issues and the cost of healthcare. Is it cheaper to seek treatment in Switzerland or in neighbouring France? In what cases is it really worth crossing the border?

This fact file will attempt to provide a round-up of some of the questions many of us ask but to which we do not always receive an answer. As you will see, the figures speak for themselves.
This is why it is a good idea to seek advice before undergoing major treatment, including, for those living in Switzerland, the opinion of a French dentist if possible, in order to ensure that the comparison is as comprehensive as possible. The CHIS can only encourage its members living in Switzerland to make this small additional effort. Given the considerable sums of money at stake, it can sometimes pay off!

In any case, members should remember that under the CHIS rules relating to reimbursements an estimate must be submitted to UNIQA for prior approval for all dental treatment whose cost exceeds 800 CHF, except in cases of emergency.

>CONSULTING
A GENERAL PRACTITIONER OR A SPECIALIST

In France, members can expect to pay between 20 and 30 euros for a consultation with a general practitioner for a minor illness. The invoice is for one consultation and does not contain a breakdown of the medical procedures performed, such as measuring blood pressure, etc. In Switzerland, on the other hand, all treatment is broken down according to the official list of procedures recognised by TARMed, each procedure corresponding to a certain value in points with the value of each point in Swiss francs being determined at cantonal level. You can expect to pay between 50 and 80 CHF for a basic consultation involving, i.e. just an auscultation.

In Switzerland, the principle of billing for each procedure performed also applies to specialists. Here again, the TARMed list is used to determine the procedures that may be performed as part of the consultation and the fee. A specialist consultation price spans from 80 to 300 CHF, or more, depending on the speciality and the procedure(s) performed. It should be noted that a gastroenterologist, for example, cannot bill for cardiological procedures as the fees would not be covered by the patient’s medical insurance. In France, the average price of a consultation is around 50 to 60 euros, but can be twice as much if complex technical operations are performed.

It should be noted that in France, the tariffs charged by doctors, general practitioners and specialists are often in excess of those approved by the Social Security system. It should also be underlined that in Switzerland doctors are under no obligation to apply TARMed tariffs to CHIS members. Nevertheless, the CHIS “green list”, with more than 150 contact details of general practitioners and specialists in the Canton of Geneva applying the TARMed to CHIS members, can be consulted on the CHIS website: http://www.cern.ch/chis.

>DENTISTS: A SLIGHT ADVANTAGE TO FRANCE

The reimbursements made by the CHIS for dental care are relatively evenly distributed between France and Switzerland. It should be noted that there is a greater tendency for members living in Switzerland to go to France for treatment than for those living in France to go to Switzerland. This is a positive attitude that should be encouraged.

In general, according to a recent survey carried out by the GHI weekly newspaper, the basic services provided by French dentists (amalgams, fillings, root canal work, etc.) are still some 10 to 20% less expensive than those provided in Switzerland, depending on the case. However, this difference is becoming less marked as the euro strengthens against the Swiss franc and the number of dentists stabilises.

On the other hand, it is always better to request an estimate in order to compare costs (even between two Swiss and two French dentists) for other types of treatment, especially for dentures, as there are no fixed tariffs for these types of treatment on either side of the border.

choices...
> MEDICINES: FRANCE SCORES!

Almost 60% of the CHIS’s pharmaceutical costs are incurred in Switzerland despite the fact that two thirds of the Scheme’s members live in France. So clearly very few of the Scheme’s members living in Switzerland cross the border to buy their medicines in France, and many of those living in France buy them in Switzerland. This is a trend that is not at all beneficial to the health of the Scheme.

And yet, medicines are undeniably less expensive in France. This price difference can be explained by the role played by the French Social Security system which sets the prices of pharmaceutical products for which reimbursement can be obtained. This is not the case in Switzerland. As a result, there can be significant price differences from one medicine to another, with some products up to three or four times more expensive in Switzerland.

It should also be noted that there can also be significant differences in the prices charged by different pharmacies in France for medicines for which no reimbursement can be claimed, as the pharmacies are free to set their own prices. Taking advantage of the competition between pharmacies, even if they are sometimes only a few metres from one another, can result in significant savings.

CHIS members are also reminded that the use of generic drugs, which is increasingly commonplace either side of the border, can also be beneficial to the Scheme. The pharmacist can (and should) provide useful advice on the subject.

> ANALYSES, X-RAYS AND LABORATORY WORK

In France, it is always the Social Security tariff and its list of procedures that are applied to these standardised services, even if doctors can increase somehow these prices when the analyses are performed at their surgeries. For example, in neighbouring France a foot x-ray costs 45 euros, a brain scan costs 280 euros and a mammogram costs in the region of 80 euros. In Geneva, the minimum price for the latter is 200 CHF. Consequently, French laboratories should be favoured.

> SPECTACLES AND CONTACT LENSES: MATCH DRAWN

There has been a significant liberalisation of the Swiss opticians market in recent years, and the arrival of large chains has brought prices down. Independent opticians have not stood by and watched. Some of them have organised themselves into purchasing pools in order to obtain the best prices and have not been slow in passing them on to their customers. Consumers have undeniably benefited as a result, as there is no longer anything to be gained from crossing the border to purchase spectacles and contact lenses.

It should be noted that Swiss opticians are authorised to provide an additional service. They frequently perform eye tests which, in certain cases where there are no complications, avoids the need to consult an ophthalmologist.

In contrast, spectacle frames can be cheaper in France, especially those at the top of the range.

> GLAUCOMA AND CATARACTS: WHEN SPECTACLES WILL NOT DO THE TRICK

In Switzerland, the TARMed tariff for the treatment of cataracts is not applied because ophthalmologists do not consider it brings in sufficient remuneration. As a result, cataract operations require a short period of hospitalisation. However, the TARMed tariff only applies to outpatient medicine. Although the TARMed tariff is not applied to CHIS members, an all-inclusive outpatient tariff of 3500 CHF is applied under our tariff agreement with ONO. In France, it is commonplace to be overcharged for operations on cataracts and glaucoma performed in the private sector. The overall cost is still lower than in Switzerland.

AM I REQUIRED TO DECLARE MY MEDICINES AT THE BORDER?

Consultations with the Swiss Customs Service have confirmed that, importing medicines into Switzerland for private use is subject to the general regulations on the transport of goods. In other words, this means that medicines are considered to be goods like any others. As such, their importation is free of charge up to the limit of 300 CHF in value, the allowance to which every traveller is entitled when crossing the border. Goods whose value exceeds that amount must be declared at the border post so that the corresponding VAT (payable at a rate of 2.4%) can be levied.

Please note that the importation of medicines with narcotic properties and products classed as doping agents for private use is forbidden.

CERN Health Info Santé
UNIQA has set up an extranet portal on its website \url{http://www.uniqa.ch} through which all CHIS members can consult their benefits statements. This service has been available since mid-April 2006. A few details about the new service.

Firstly, on-line access has been provided only to documents, in particular reimbursement notifications, that have been issued by our new application since mid-April 2006. Reimbursement notifications issued prior to this date are not available on-line.

You will still receive notifications by post but will now also be able to consult the status of your claims on-line and print out copies of your notifications from the extranet site.

This new UNIQA portal enables you to access data on your whole family unit, so you only need a single access authorisation per family, unless UNIQA’s or CERN’s records show several bank accounts for a single family, in which case each bank-account holder needs to request separate access. This means you will only be able to access documents relating to the people (dependent children, etc.) attached to your bank account. The aim of this measure is to maintain the confidentiality of personal data.

The extranet portal has undergone a number of modifications. If your first attempt to register failed, we recommend you simply try again.

You will receive your personal identification number (PIN) and user name by post in the days following your request. Should you mislay or forget them, you can submit a new request.

Our UNIQA office at CERN (Main Building – office 001 – Tel. 022.767.27.30) will be happy to answer any enquiries

Thank you for your patience!

Our new IT application was successfully rolled out in mid-April, but members have been frustrated by longer than usual reimbursement times in recent weeks.

As you probably know, the application underwent extensive tests prior to its implementation, but despite this we had to strengthen our plausibility checks over the first weeks of production to ensure that all reimbursement operations were executed correctly. Moreover, the software has a comprehensive database containing details of care providers in Europe but it had to be added to when reimbursement claims were being processed because certain medical professions, such as dentists in Geneva, do not provide their trade directories in electronic format.

These minor teething problems (no pun intended!) were the reason for the longer than usual reimbursement times, but we can assure you that normal service will be resumed by end June. We are aware of the inconvenience caused and offer our sincere apologies.

We thank you for your patience and understanding.
PREVENTION

WATCH OUT FOR THE SUN!

The holidays are upon us... time to think about relaxing, getting away from it all and enjoying the sunshine. But skin cancer is on the increase, and excessive or inappropriate exposure to the sun can be highly dangerous.

Prevention is better than cure, so it’s best to avoid dangerous UV exposure and other risky behaviour. The main risk factors are:

- Sunburn during childhood, i.e. before the age of 15;
- Alternating between a milky-white skin in winter and a summer tan, which increases the impact of UV rays;
- Use of UVA sun lamps or sun beds;
- Pale skin with lots of pigmented spots;
- A family history of skin cancer.

Do you know if you run a high risk of developing skin cancer?
What can you do to avoid it?
When should you seek the advice of a dermatologist?

The questionnaire below will help you to assess your individual risk. It takes just a few minutes to complete.

1. Determine your skin type
1. Very pale skin, which never tans or tans only very lightly; exposure to the sun always results in severe sunburn
2. Pale skin, which tans only lightly or very slowly; severe sunburn usually occurs
3. Light-olive skin, which tans well, provided that exposure is gradual; sunburn sometimes occurs, in which case it is of medium severity
4. Dark-olive skin, which tans quickly and deeply and rarely burns
5. Dark skin, which burns very rarely
6. Black skin, which almost never burns

Do you have type 1 or type 2 skin?  
☐ Yes  ☐ No

2. As a child (0 to 15 years), did you often suffer from bad sunburn?  
☐ Yes  ☐ No  ☐ Don’t know

3. Are you regularly exposed to intense sun?
- On holiday?  
☐ Yes  ☐ No
- In your job or leisure activities (sport, gardening, etc.)?  
☐ Yes  ☐ No
- Do you use a solarium?  
☐ Yes  ☐ No

4. Do you have a family history of melanoma (parents, children, brothers and sisters)? (Melanoma is the most dangerous type of skin cancer)  
☐ Yes  ☐ No  ☐ Don’t know

5. Have you ever had skin cancer yourself?  
☐ Yes  ☐ No

6. Do you have more than 50 pigmented spots on your body?  
☐ Yes  ☐ No  ☐ Don’t know

If you have never answered “yes” to any of the above questions, your risk of developing skin cancer is probably minimal, but you should nevertheless avoid lengthy exposure to the sun and getting burnt.
If you answered “yes” to one or more of the questions, you are at risk. Here are a few prevention tips:

- Examine your skin and pigmented spots every three to four months using the ABCDE rules (see below).
- Avoid getting burnt!
  Stay in the shade, and avoid the sun between 11.00 a.m. and 3.00 p.m. in particular.
- If you do go out in the sun, wear protective clothing, a hat and sunglasses. Choose a sunscreen with a high protection factor. Remember that sunscreens do not offer lasting protection, so you need to reapply them often and avoid long periods of exposure.
- Solariums mean excessive exposure to harmful UV rays and increase the risk of skin cancer. Stay away from them!

7. Have you noticed a new fast-growing pigmented spot?  
   - Yes  
   - No

8. Have you noticed an existing mole or beauty spot that has suddenly started getting bigger?  
   - Yes  
   - No

9. Has a pigmented spot changed colour?  
   - Yes  
   - No

10. Has an existing spot changed shape and acquired an irregular, frilled edge?  
    - Yes  
    - No

11. Have you got a pigmented spot that is inflamed, itchy or painful or bleeds?  
    - Yes  
    - No

**Warning! Make sure that any suspicious pigmented spots are checked out by a doctor:**
If you answered “yes” to any of questions 7 to 11, we advise you to consult a dermatologist as soon as possible.

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**THE ABCDE RULES**

Drawn up by the Swiss Cancer League with the help of the Swiss health authorities, the ABCDE criteria help to identify suspicious lesions on the basis of:

- **A** symmetry,
- **B** orders (i.e. irregular edges),
- **C** olour (not uniform),
- **D** iameter and **E** volution (change in size, thickness or colour).

**For further information,** visit the website [http://www.melanoma.ch](http://www.melanoma.ch) or call the free cancer helpline on 0800 55 42 48.

Dr Véronique FASSNACHT and Eric REYMOND, CERN Medical Service
The CHIS obviously hopes that you will enjoy a wonderful summer on top form. However, if you were to experience a serious medical problem while you are travelling abroad, don’t forget that, in the event of an emergency, the CHIS has a telephone number and that UNIQA experts are there 24 hours a day to advise you and to help you with administrative procedures.

Tel. +43 (512) 224 22
(This number is also printed on the back of your membership card. Do not forget to take it with you when you go on holiday.)

In this instance, it is not an emergency number that you need, but something you should not forget to do before leaving to travel overseas, namely to get the vaccinations required for the destination to which you will be travelling. You should do so not only before going on holiday but also before any duty travel for CERN. In such cases, you will have to attach a copy of your travel authorisation to the Medical Expenses Claim Form. Once it has been provided with that information, UNIQA will reimburse 100% of the cost under the heading of occupational risk.

NIGHT-TIME PAEDIATRIC EMERGENCY SERVICE

From April this year, emergency consultations for children at the Hôpital de La Tour, and at the Clinique des Grangettes on the left bank of Lake Geneva, finish at 10 p.m. (previously at midnight). This reduction in the emergency service is a result of the introduction of the TARMed tariff, which is disputed by Geneva paediatricians. They are complaining at what they consider to be a worsening of their working conditions (through the abolition of financial compensation for night and weekend consultations) and at the impact of the moratorium on the opening of new surgeries, which is leading to difficulties in organising a night service rota.

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