

Overview of benefits

Offer for private customers 2022

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Good: **5.0**
Customer satisfaction
06/2021

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06/2021

health insurance
good: **5.2**
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Basic insurance

Supplementary insurance package

Compulsory health insurance

Basic: All-in-one supplementary insurance package

The compulsory basic insurance guarantees sufficient protection for cases of illness, accident and maternity. Co-payment required for all benefits paid (maternity excluded).

The highly popular supplementary insurance package optimizes the protection provided by compulsory health insurance. Basic includes benefits from Outpatient II, Complementary II and the Supplementary Insurance for Hospitalization (free choice of insurance class: general ward, Flex 2/4, Flex 4/8, semi-private ward, private ward Europe or private ward worldwide).

Outpatient treatment conventional medicine	Costs are covered according to the tariffs for recognized medical personnel ¹	Psychotherapy by non-medical therapists: CHF 60/session for the first 20 sessions, thereafter CHF 50/session for 40 further sessions
Outpatient treatment complementary medicine	By recognized FMH-qualified physician	Includes the entire Complementary II benefit package (see the appropriate column)
Medicinal drugs	Medically prescribed drugs according to the list of medicines and the list of pharmaceutical specialties	90% for non-reimbursable medicine approved by Swissmedic ³ for the respective indication (exception: LPPV ⁴)
Hospitalization	General ward of a hospital on the hospital list of the canton of residence; unlimited benefits	Cost of accommodation and treatment in the general, semi-private or private ward in an acute care hospital. Hospitals on Visana's restricted list excepted
Spa treatments	CHF 10/day for a maximum period of 21 days/year; outpatient therapy according to tariff	
Maternity	Cover for the tariff cost of a maximum of 7 check-ups, 2 ultrasound examinations, 3 breast-feeding consultations; CHF 150 for prenatal courses by midwives; Spitex benefits for home births; hospitalization benefits for hospital births	90% for further check-ups and ultrasound examinations
Preventive examinations/ check-up	Contributions to preventive health measures as per art. 12, art. 12a-12e HIBO	90% for preventive gynecological examinations; 90% for a check-up every 3 years, CHF 300 max.
Home nursing and home help	For home nursing up to 60 h/quarter; contributions according to HIBO ² on clarification of the case. No benefits for home helps	CHF 50 daily for a maximum of 30 days/year; thereafter CHF 25 daily for a maximum of 30 further days/year
Assistive devices	According to the list of medical supplies and devices from the Federal Office of Public Health (FOPH)	90% for purchase or rental, max. CHF 1,000/year
Eyeglasses and contact lenses	CHF 180/year up to the age of 18, according to the list of medical supplies and devices	90%, a maximum of CHF 200 to the cost of eyeglasses and contact lenses; annually to the age of 18, thereafter once every 3 years
Protective vaccinations and vaccinations for travel	Contributions according to HIBO ²	90%, max. CHF 200/year
Transport and rescue costs	Transport: 50% (max. CHF 500/year) Rescue: 50% (max. CHF 5,000/year)	90% of transport costs ⁵ , max. CHF 20,000/year; 90% of costs for rescue, search and recovery, max. CHF 25,000/year; 50% of travel costs, max. CHF 2,000/year
Stays abroad	Cover for costs in emergencies of up to double the tariff of the canton of residence in Switzerland; emergencies in an EU/ EFTA country: cover for costs according to the Agreement on the Free Movement of Persons (European Health Insurance Card mandatory)	Vacanza travel insurance included for 8 weeks/journey. For details of Vacanza benefits, see "Further insurance plans". Hospital, private ward, worldwide, for 11 months/journey
Dental treatment	In cases of severe jaw disease, severe congenital malpositioned teeth or for treatment required because of a serious general illness; cover for dental accidents (if accident cover is included)	25%, a max. of CHF 500/year for dental surgery
Correction of malpositioned teeth		80% of cost of treatment according to the valid OKP ⁶ tariff, an overall maximum of CHF 10,000 per policyholder; no contribution for the extraction of wisdom teeth
Free medical legal protection insurance	Comprehensive insurance protection for legal disputes in connection with health valid worldwide: max. CHF 250,000; maximum outside Europe: CHF 50,000	Exclusions: – Convalescence treatments – Hospitals for addictive illnesses – Therapeutic community
Free medical advice (Medi24)	Free advice by telephone round the clock by medical experts at Medi24 regarding pain, pharmaceuticals and vaccinations; general medical information also available	– Drugs on Visana's list of medications

The supplementary insurance plans Outpatient, Complementary, Hospital or Basic can be taken out until the age of 70 is reached.

¹ Recognised doctors, chiropractors, midwives, logopaedists, physiotherapists, ergotherapists and nurses

² HIBO = Health Insurance Benefits Ordinance

³ Swissmedic = Swiss Agency for Therapeutic Products

⁴ LPPV = Liste pharmazeutischer Präparate mit spezieller Verwendung (List of special-use pharmaceutical preparations)

⁵ Medically required emergency ambulance transport to the nearest hospital

⁶ OKP = Compulsory health insurance

⁷ Insurance for cancellation costs and for credit and customer cards is valid worldwide – at home and abroad. The other benefits are paid for cases which occur abroad.

Individual supplementary insurance for outpatient treatment

Outpatient I

Outpatient II

Outpatient III

Supplementary to compulsory health insurance in the outpatient sector.

Outpatient treatment conventional medicine		Psychotherapy by non-medical therapists: CHF 60/session for the first 20 sessions, thereafter CHF 50/session for 40 further sessions	Psychotherapy by non-medical therapists: 80%; max. CHF 5000/year; non-contracting physicians: 90%
Medicinal drugs	90% for non-reimbursable medicine approved by Swissmedic ³ for the respective indication (exception: LPPV ⁴); 50% for drugs on the Visana list; a maximum of CHF 1000/year in total	90% for non-reimbursable medicine approved by Swissmedic ³ for the respective indication (exception: LPPV ⁴); 50% for drugs on the Visana list; no limit	90% for non-reimbursable medicine approved by Swissmedic ³ for the respective indication (exception: LPPV ⁴); 50% for drugs on the Visana list; no limit
Maternity		90% for further check-ups and ultrasound examinations	90% for further check-ups and ultrasound examinations; 90% to the cost of pre- and postnatal gymnastics, max. CHF 300
Preventive examinations/check-up	90% for preventive gynecological examinations; 90% for a check-up every 3 years, max. CHF 200	90% for preventive gynecological examinations; 90% for a check-up every 3 years, max. CHF 300	90% for preventive gynecological examinations; 90% for a check-up every 3 years, max. CHF 600
Home nursing and home help		CHF 50 daily for a maximum of 30 days/year; thereafter CHF 25 daily for a maximum of 30 further days/year	CHF 100 daily for a maximum of 30 days/year; thereafter CHF 50 daily for a maximum of 30 further days/year
Assistive devices		90% for purchase or rental, max. CHF 1000/year	90% for purchase or rental, max. CHF 2000/year
Eyeglasses and contact lenses		90%, a maximum of CHF 200, to the cost of eyeglasses and contact lenses; annually to the age of 18, thereafter once every 3 years	90%, a maximum of CHF 250/year, for eyeglasses and contact lenses
Protective vaccinations and vaccinations for travel	90%, max. CHF 100/year	90%, max. CHF 200/year	90%, no limit
Transport and rescue costs	90% of transport costs ⁵ , as a max. CHF 10,000/year; 90% of costs for rescue, search and recovery, max. CHF 25,000/year	90% of transport costs ⁵ , as a max. CHF 20,000/year; 90% of costs for rescue, search and recovery, max. CHF 25,000/year; 50% of travel costs, max. CHF 2000/year	90% of transport costs ⁵ , no limit; 90% of costs for rescue, search and recovery, no limit; 50% of travel costs, max. CHF 2000/year
Stays abroad	Vacanza travel insurance included for 8 weeks/journey. For details of Vacanza benefits, see "Further insurance plans".	Vacanza travel insurance included for 8 weeks/journey. For details of Vacanza benefits, see "Further insurance plans".	Vacanza travel insurance included for 8 weeks/journey. For details of Vacanza benefits, see "Further insurance plans".
Dental treatment		25% of costs, a max. of CHF 500/year, for dental surgery	50% of costs, a max. of CHF 1,000/year, for dental surgery
Correction of malpositioned teeth		80% of cost of treatment according to the valid OKP ⁶ tariff, an overall max. of CHF 10,000 per insured person; no contribution for the extraction of wisdom teeth	80% of cost of treatment according to the valid OKP ⁶ tariff, an overall max. of CHF 10,000 per insured person; no contribution for the extraction of wisdom teeth

Health promotion

Policyholders with Outpatient or Basic supplementary insurance profit further from various wellness and fitness checks worth up to CHF 350 per year (voluntary benefits to which you have no claim).

Deductible

The minimum deductible permitted by legislation for people over the age of 19 is CHF 300/year. Policyholders may increase this sum voluntarily to profit from a discount on premiums. The legislation does not stipulate an annual deductible for children under the age of 18. However, a deductible may be selected voluntarily. By paying the deductible, the policyholder participates in the costs incurred for physicians, hospitals and medicinal drugs, etc. Only when the deductible sum has been paid in full does the health insurance contribute to the additional costs (after deduction of the participation sum).

Second medical opinion

The second medical opinion is a service for all persons who have taken out basic insurance, hospital supplementary insurance or hospital daily cash benefit supplementary insurance with Visana. This service can be used once for each case of illness or accident.

Excess

The health insurance participates in the costs of treatment in excess of the agreed annual deductible by paying 90% of the costs; the remaining 10% (excess) has to be paid by the policyholder. The same applies in the case of children. There is a cap that applies to the participation sum: the maximum sum payable in participation by policyholders over the age of 19 is CHF 700/year, younger persons pay a maximum of CHF 350. Participation is payable on all benefits paid by the basic insurance – with the exception of those for maternity.

Individual supplementary insurance for complementary treatment

	Complementary I	Complementary II	Complementary III
Benefits will be paid for treatments associated with illness, accidents or maternity.			
Maximum contribution per year	90 %, up to CHF 1,000	90 %, up to CHF 4,000	90 %, up to CHF 10,000
Recognized physicians and therapists	Physicians with federal qualification; naturopathic practitioners and therapists recognized by Visana; if prescribed by a physician	Physicians with federal qualification; naturopathic practitioners and therapists recognized by Visana	Physicians with federal qualification; naturopathic practitioners and therapists recognized by Visana; naturopathic practitioners and therapists not recognized by Visana, max. 50 % up to CHF 1,000
Recognized forms of therapy	Recognized forms of therapy as per Visana's separate list of therapy forms	Recognized forms of therapy as per Visana's separate list of therapy forms	Recognized forms of therapy as per Visana's separate list of therapy forms; benefits also for non-recognized forms of therapy (unless explicitly excluded)
Medicinal drugs used in complementary medicine (exceptions: see LPPV ⁴)	90 % of costs; if prescribed by a physician or recognized naturopathic practitioner	90 % of costs; if prescribed by a physician or recognized naturopathic practitioner	90 % of costs; if prescribed by a physician or recognized naturopathic practitioner

Individual supplementary hospital insurance

	Hospital general ward	Hospital Flex Plus	Hospital semi-private ward	Hospital private ward Europe	Hospital private ward worldwide
Supplementary to the compulsory health insurance in the hospital sector.					
Cost of accommodation and hospitalization in Switzerland	General ward	Free choice of ward	Semi-private ward	Private ward	Private ward
Choice of physician	No free choice of physician	Free choice of physician if semi-private or private ward is chosen	Free choice of physician	Free choice of physician	Free choice of physician
Recognized hospitals	All acute care hospitals in Switzerland (except those on the Restrictions to the choice of hospital list)				
Annual co-payment	No co-payment	General: no co-payment Semi-private: 20 %, max. CHF 2,000 Private: 35 %, max. CHF 4,000	Optional	Optional	Optional
Emergency insurance cover	Throughout Switzerland	Worldwide	Throughout Switzerland	Throughout Europe	Worldwide
Hospitalization while abroad	Vacanza travel insurance included for 8 weeks/journey	Vacanza travel insurance included for 8 weeks/journey	Vacanza travel insurance included for 8 weeks/journey	Vacanza travel insurance included for 8 weeks/journey	Vacanza travel insurance included for 11 months/journey
Rooming-in	Under 1 year of age: 100 % of the cost of accommodation and board for the mother or child Ages 1 to 14: max. CHF 50 per day for person accompanying a child aged 14 or younger	Max. CHF 80 per day, max. CHF 2,000 per calendar year for person accompanying a child aged 17 or younger	Under 1 year of age: 100 % of the cost of accommodation and board for the mother or child Ages 1 to 14: max. CHF 50 per day for person accompanying a child aged 14 or younger	Under 1 year of age: 100 % of the cost of accommodation and board for the mother or child Ages 1 to 14: max. CHF 50 per day for person accompanying a child aged 14 or younger	Under 1 year of age: 100 % of the cost of accommodation and board for the mother or child Ages 1 to 14: max. CHF 50 per day for person accompanying a child aged 14 or younger
Lump sum for outpatient birth		CHF 1,500 per birth	CHF 1,000 per birth	CHF 1,500 per birth	CHF 1,500 per birth
Convalescence treatments Spa treatments	CHF 50/day, max. of 21 days/year	CHF 80 per day, max. CHF 2,000 per year	CHF 75/day, max. of 21 days/year	CHF 100/day, max. of 21 days/year	CHF 100/day, max. of 21 days/year
Convalescence in a spa hotel recognized by Visana	CHF 50/day, max. 28 days; CHF 20/day for other suitable sanatoria	CHF 80 per day, max. CHF 2,000 per year	CHF 75/day, max. 28 days; CHF 30/day for other suitable sanatoria	CHF 100/day, max. 28 days; CHF 40/day for other suitable sanatoria	CHF 100/day, max. 28 days; CHF 40/day for other suitable sanatoria

Additional hospital options

Daily hospital benefit Hospital capital	During inpatient treatment, the daily hospital benefit or hospital capital product can be used for a more comfortable room, home help etc.
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Further insurance plans

Vacanza travel insurance⁷

For all-round protection when travelling abroad

The advantages

- Unlimited cover for the cost of emergency treatment as an inpatient or outpatient
- On-the-spot assistance, repatriation, contribution of CHF 1,000 to repeat the journey
- Legal protection insurance
- Cost of transport⁸: no limit
- Search, rescue and recovery of up to CHF 25,000
- Baggage insurance for travellers (theft, robbery or damage) up to a maximum of CHF 2,000/trip
- Insurance for cost of cancellation applicable worldwide up to a max. of CHF 20,000/trip (including Switzerland)
- Credit or customer card insurance (theft and loss) up to a max. of CHF 500/year

Accident capital insurance (TUP)

For more financial security in cases of accident

The advantages

- Cover for the financial consequences of death (T) and disablement (U) as a result of accidents
- Private supplement for accident treatment costs (P) enabling a stay in the private ward of a hospital
- Progression of up to 350% insured. The insurance continues with a reduced scope when the policyholder retires

Can be taken out up to and including the age of 65

Insurance for death and disability caused by illness (KTI)

For more financial security in cases of illness

The advantages

- Comprehensive cover at reasonable prices
- Capital benefits are provided regardless of the benefits from other insurance policies
- No long-term contract necessary
- No evidence required of non-covered costs

Can be taken out up to and including the age of 55

Support and welfare solution

For autonomous senior living

The advantages

- At-home support after your retirement
- Financed by a 3rd-pillar account (3a/3b)
- With savings-contribution guarantee on request
- Savings capital freely available when retirement age is reached

Emergency support at working age

For short-term assistance in emergencies

The advantages

- At-home support during convalescence
- Online booking of the desired service

Dental Insurance

For more protection in cases of dental treatment (ideal in combination with Outpatient II or Outpatient III)

The advantages

- Dental check-up including dental hygiene
- Preservation of teeth, maxillary orthopaedic and orthodontic treatment
- Manufacture of dentures (prosthetics)
- Treatment of periodontitis

Can be taken out up to and including the age of 70

Daily indemnity insurance plans

For more protection against loss of income

The advantages

Guarantees income in the event of illness and accident

Can be taken out from the age of 16 until retirement, at most until the regular OASI age is attained

Daily indemnity for nursing care

For more benefits for nursing

Can be taken out up to and including the age of 65

Directa household contents, personal public liability and home insurance

For more protection inside and outside your home

The advantages

- Around-the-clock immediate assistance upon an insured incident
- Guaranteed sum of up to CHF 10m in personal liability
- 10% discount for persons insured with Visana
- 10% discount if all three Directa insurance policies are taken out

Can be taken out even if you do not have Visana health insurance

Visana legal protection insurance

For more legal assistance

The advantages

- Lawyers' fees, court fees, cost of expert appraisals and of compensation for an opposing party up to a maximum of CHF 500,000
- JurLine: Free legal advice on the phone from experienced lawyers
- Free for all family members up to the age of 18 with basic insurance
- Discounts on multiple contracts within the same family

Hospital capital insurance

Financial security in the event of a hospital stay

The advantages

- Capital of up to CHF 15,000 insurable
- Insured capital freely available
- Combined with flexible supplementary hospital insurance, hospital capital insurance offers an attractive alternative to the classic semi-private or private ward cover

Flex semiprivate and Flex private

Cleverly combined for semi-private or private ward hospital cover

The advantages

- Hospital Flex 4/8, combined with CHF 4,000 hospital capital insurance, offers a more cost-effective alternative to the classic semi-private ward cover
- Hospital Flex 2/4, combined with CHF 4,000 hospital capital insurance, offers a more cost-effective alternative to the classic private ward cover

Can be taken out up to and including the age of 45

Outpatient, Complementary, Hospital supplementary insurance plans or the Basic insurance package can be taken out up to and including the age of 70.

¹ Recognized doctors, chiropractors, midwives, logopaedist, physiotherapists, ergotherapists, and nurses

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³ Swissmedic = Swiss Agency for Therapeutic Products

⁴ LPPV = Liste pharmazeutischer Präparate mit spezieller Verwendung (list of special-use pharmaceutical preparations)

⁵ Medically required emergency ambulance transport to the nearest hospital

⁶ OKP = compulsory health insurance

⁷ Insurance for cancellation costs and credit and customer cards is valid worldwide — at home and abroad. The other benefits are paid for cases which occur abroad.

Alternative insurance models within basic insurance (OKP). Save having to pay additional premiums.

Obligations of the policyholder

Traditional



Free choice of physician

- > General practitioner
- > Hospital
- > Other specialists

Med Call



- > General practitioner
- > Hospital
- > Other specialists

- Initial consultation with medical advice centre by telephone or via digital channels (WhatsApp etc.)
- No obligation to follow the instructions

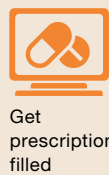
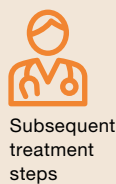
Tel Doc



- > General practitioner
- > Hospital
- > Other specialists

- Initial consultation with medical advice centre by telephone or via digital channels (WhatsApp etc.)
- Instructions on treatment steps are to be followed

Tel Care



- Initial consultation with medical advice centre by telephone or via digital channels (WhatsApp etc.)
- Subsequent treatment steps are to be adhered to as instructed by medical advice centre
- Obtainment of medication via mail-order pharmacy

Combi Care



- > Hospital
- > Other specialists

- Initial consultation by telephone or via digital channels (WhatsApp etc.) with medical advice centre or general practitioner
- Instructions on treatment steps are to be followed
- If necessary, the medical advice centre or the general practitioner coordinates subsequent treatment steps with hospital or specialists

Med Direct



- > Hospital
- > Other specialists

- Initial consultation with (freely selectable) general practitioner
- If necessary, general practitioner coordinates subsequent treatment steps with hospital or specialists

Managed Care

General practitioner networks (HAM)



- > Hospital
- > Other specialists

- Choice of general practitioner from general practitioner network list
- If necessary, general practitioner coordinates subsequent treatment steps with hospital or specialists

Group Practice (HMO)



- > Hospital
- > Other specialists

- Treatment by physician in group practice
- If necessary, group practice coordinates subsequent treatment steps with hospital or specialists

With myVisana, you have an overview

Simple administration

In myVisana, you can adapt the deductible or the accident cover with a few clicks, report insured incidents or contact your personal consultant. E-mail alerts advise you of your latest mail stored online in our customer portal. This way, you maintain an overview of your health care costs and benefits received – for yourself and your whole family.

More info at visana.ch/myvisana

Your benefits at a glance

- Access the whole family's policies, invoices and benefits statements
- Doctor's bills: upload and submit online
- View your invoices
- Check the Visana cost contribution and your excess amount
- Send Visana your news securely and directly from the portal
- Check deductible options and change them online
- No more mailing costs or trips to the post office

Good to know

Recurring customer documents (e.g. policies, premium invoices and benefits statements) are made available to you exclusively online via the customer portal; mailing no longer occurs.

If you haven't yet activated myVisana, register now at visana.ch/myvisana



The additional functions of the Visana app

- Medical bills can be photographed and sent directly to Visana
- Easy login with Touch ID, Face ID or PIN
- Virtual insurance card always on hand for the whole family and QR code for easy login at the doctor's practice or hospital. Translation of doctors' and hospital bills into easily understandable language
- myPoints: Collect points that are worth money through daily exercise and customer loyalty

Download now



Your opportunities to save on premiums

Compulsory health insurance

Optional annual deductibles

Deductibles (for young adults and adults from the age of 19)	Deductibles (for children up to 18)
CHF 2500.–	CHF 600.–
CHF 2000.–	CHF 500.–
CHF 1500.–	CHF 400.–
CHF 1000.–	CHF 300.–
CHF 500.–	CHF 200.–
CHF 300.–	CHF 100.–

The higher the deductible you choose, the more you save on your premium. Calculate your individual premium at visana.ch

Suspension of accident cover

6.5 % saving on premiums for compulsory health insurance if accident cover is excluded. An exclusion is possible if you are employed for at least 8 hours per week.

Discounts for children (up to 18) and young adults

1 st and 2 nd child	at least 74 % discount
3 rd child and each further child	90 % discount
Young adults aged between 19 and 25	at least 11 % discount

The discounts for children and youths refer to the respective adult premium.

Basic insurance discounts

Med Call (telephone)
Tel Doc (telephone)
Tel Care (telephone)
Med Direct (general practitioner)
HAM (general practitioner)
HMO (group practice)
Combi Care (telephone/general practitioner)

The stipulated legal maximum discount of 50% of the annual premium may not be exceeded even where combinations of insurance arise.

Legal notice: The purpose of this overview is to provide a simple means of comparing benefits. However, the exclusive decisive factors in determining the exact scope of benefits are the legislation, the General Conditions of Contract (GCC) and the Supplementary Conditions (SC) and in your personal policy.

Supplementary insurance plans

Optional cost sharing for Hospital/Basic

Co-payment	Premium reductions semi-private ward	Premium reductions private ward
CHF 1,000	15 %	10 %
CHF 2,000	25 %	20 %
CHF 5,000	50 %	40 %
CHF 10,000	65 %	55 %

Multi-year contracts

Supplementary insurance plans	Premium reduction for 3-year contract	Premium reduction for 5-year contract
Outpatient I–III	2 %	3 %
Complementary I–III	2 %	3 %
Hospital (general ward, Flex, Flex Plus, semi-private ward, private ward Europe or private ward worldwide)	2 %	3 %
Daily hospital benefit	2 %	3 %
Basic and Basic Flex	2 %	3 %

Family discount

The second child and each further child covered by the same family contract are granted a 50 % discount (on the first child's premium) until they reach the age of 18 (end of the calendar year). When the first child changes to the "young adults" age group, the second child is counted as the first child and is no longer entitled to a discount. The discount is granted on the supplementary insurance plans Outpatient, Complementary, Hospital and Dental treatment, and on the Basic insurance policy.

One-off 20 % health discount for new customers

Together with your application for our general hospital, semi-private hospital and private hospital supplementary insurance policies, we require a completed health questionnaire. If you pass this risk assessment, you will be eligible for a 20 % premium discount. This discount automatically expires after the first year of insurance and is replaced by a no-claims bonus of 20 %, as long as the conditions for this are fulfilled.

20 % no-claims discount for years with no benefit payments

The no-claims bonus is a remuneration in the form of a premium discount for the years of insurance in which you have made no claims. We grant this discount on the following supplementary insurance policies: Hospital general, Hospital semiprivate, Hospital private, Basic package, and Hospital plus hotel.

The period between 1 July and 30 June of the previous year always applies for the determination of the no-claims bonus. If you have made no claims during this period of time, you will automatically receive a discount of 20 % on your premium in the next calendar year.

Advance payment of premiums

Semi-annually	1 % discount
Annually	2 % discount

Get in touch and learn more