# LAMal or the French system: the health insurance choice cross-border workers cannot undo

*If you live in France and take a job in Switzerland, you have three months to choose which country insures your health. Most people discover the choice existed long after it closed.*

## A decision with a three-month clock

Cross-border workers living in France and employed in Switzerland fall under Swiss health insurance by default. The agreement on the free movement of persons gives them an alternative: they may ask to be covered by the French system instead. This is the droit d'option.

The window is three months from the start of the Swiss contract. Miss it and the matter is settled for you: affiliation to Swiss LAMal becomes automatic, and the door closes.

What makes this different from most administrative decisions is that you make it once. The choice is in principle definitive for as long as your situation stays the same, so it is worth ten minutes of attention during a month when you have none.

## What each side actually charges you

The two systems do not price risk the same way, and that single difference decides most cases.

LAMal charges a premium per insured person. Your spouse pays a premium, and so does each child, whatever the household income. The amount depends on the insurer, the canton and the deductible you pick.

The French system charges a contribution based on income rather than on headcount. A cross-border worker who opts for France pays 8 % of the household reference tax income, after an allowance set each year. Children and a non-working spouse are covered as dependants without adding a premium.

The arithmetic follows from there. A single earner on a good Swiss salary often pays less under LAMal. A family with children, or a household where one parent does not work, usually pays considerably less on the French side. Run both numbers before choosing rather than after.

## Where you can be treated

Price is the visible criterion. Access to care is the one people regret.

LAMal covers treatment in Switzerland, which matters if you work there, if your employer's occupational health is Swiss, or if you want to keep a Geneva specialist. Cross-border workers insured under LAMal also retain access to care in France.

Opting for the French system points your cover the other way. Routine treatment in Switzerland stops being reimbursed, apart from emergencies. If your children are treated near home and your GP is French, this changes nothing for you. If half your medical life happens on the Swiss side, it changes everything.

## What each system leaves you to pay

Neither option covers the whole bill.

LAMal applies a deductible you choose, then a 10 % share of costs above it, up to an annual ceiling. A complementary policy fills part of that gap.

The French system reimburses at Sécurité sociale rates, which leaves a remainder on most consultations and a large one on dental, optical and hearing care. A mutuelle covers that remainder.

So the real comparison is not LAMal against the French system. It is LAMal plus a Swiss complementary against the French system plus a mutuelle. People who compare only the base cover reach the wrong conclusion.

## The exceptions that reopen the option

The choice is definitive, with a short list of exceptions. The option can be exercised again if you retire and draw a Swiss pension only, if you resume work in Switzerland after a period of employment or unemployment in France, or if you move your residence to another country.

Changing Swiss employer does not reopen it. Neither does the arrival of a child, which is precisely the moment many households wish it did.

## How to decide in an afternoon

Ask your Swiss employer for the exact date your insurance obligation starts, because your three months run from there and not from your first day of work.

Get two quotes: a LAMal premium for every member of the household, and the French contribution based on your last reference tax income. Add the cost of a Swiss complementary to the first, and the cost of a mutuelle to the second.

Then look past the total and ask where your family is treated. A saving of a few hundred francs a year rarely survives the discovery that the paediatrician you trust is on the wrong side of the border.

Whatever you decide, put it in writing within the three months and keep the acknowledgement. This is one of the few administrative choices in France that nobody will let you make twice.

*Contribution rates, allowances and deductible ranges are reviewed periodically. Check the current figures with your Swiss employer, your insurer and the CPAM covering your commune before you decide.*

---

Adrien Chambet · Writer specialising in banking, insurance and finance · IAS Level 3 certified · adrien.chambet@proton.me