

Health care insurance Basic

for companies and organisations

*It is important that
you read and save
this information.*

Advance and after-sale information

Valid from 1 January 2023, terms and conditions SJV 901:4

This document is a general overview of the primary contents of the insurance. Complete provisions can be found in the Terms and Conditions for Group Insurance, which is available at www.lansforsakringar.se/halsa. You can also call Customer Service on +46 8 588 427 00 or e-mail us at info.halsa@lansforsakringar.se and we will send you a copy of the terms and conditions.

Health care insurance Basic

Health care insurance Basic provides help when you need it. Our health care provision service will provide you with advice and, if you need care, will make an appointment for you with one of our private, partner caregivers.

The insurance covers costs for

- medical care
- treatment by a psychologist /psychotherapist
- treatment by a physiotherapist/physical therapist/naprapath/chiropractor
- treatment by a speech therapist or dietician
- surgery
- domestic assistance after surgery
- postoperative care – medical rehabilitation
- disability aids for temporary use to help heal the injury
- second opinion
- public health care (national insurance contribution), if you use public health care for cases in which you can receive compensation for the illness or complaint under the insurance policy
- travel and accommodation, and travel in your own car for each return journey of at least 200 km

Health-promotion services

Health-promotion services are included in the insurance policy. You have access to personal counselling, manager support, health profile and online health programmes. Read more on our website: halsa.lansforsakringar.se

Deductible for medical care and consultations from private health care providers

This insurance applies with a deductible for visits in person to private health care providers. The deductible is paid at the first consultation for each illness or complaint and amounts to SEK 750.

No deductible for remote health care

The insurance has no deductible for remote health care. This applies to

- eHealth
- remote psychological treatment
- remote physiotherapeutic treatment (physical therapist)
- health-promotion services
- medical consultations over the telephone

Guarantee

Our insurance policy offers you a first medical opinion from a specialist, physiotherapist, psychologist or other relevant health care specialist within seven working days. Surgery is offered within 20 working days from when we approve the procedure. If we are unable to offer you treatment within these times, we will pay SEK 1,000 per day during the waiting period, up to SEK 10,000. Compensation is paid for the days that you have to wait after these guaranteed times.

Quality assurance

We work with independent medical examinations to ensure that the health care that we arrange is based on medical grounds and evidence. The aim is for all health care providers in our network to follow the same guidelines for the forms of treatment that are recommended for various illnesses or complaints. If a course of action proposed by a treating doctor is not recommended – since another form of treatment is deemed to have better results – then this insurance policy covers the other recommended treatment.

Time limit for compensation payments

You can make use of the insurance for 24 months for illnesses or complaints you require help with for as long as the insurance policy is valid.

If you are treatment, check-up and medication-free for 24 months thereafter, you can use the insurance for the same illness or



complaint during a new 24-month period.

When the policy expires, compensation will no longer be payable.

Our insurance policy is easy to use

All of our services are available on our website halsa.lansforsakringar.se. You will also find a link to book an appointment and telephone number here.

Some important limitations

The insurance applies for care provided in Sweden.

All care and treatment must be approved by Länsförsäkringar in advance.

Certain types of treatment are only provided by the public health care system and therefore appointments cannot be made by our health care provision service, such as emergency care.

You do not receive compensation for existing illness or disorders that you already had when you purchased this insurance policy. But after 24 months without treatment, check-ups or medication, you can receive compensation for these illnesses or complaints.

We do not reimburse costs for, for example, pregnancy check-ups or complications associated with pregnancy, birth or abortion. We also do not pay compensation for a decline in health status due to various form of substance abuse, check-ups and treatment for eating disorders or internal organ transplants or diseases covered by the Communicable Diseases Act. Nor do we reimburse costs for dental care, correction of refractive defects in eyes, care or treatment of dementia, obesity or obesity-related conditions.

The insurance policy does not cover bodily injuries resulting from participation in boxing or other martial arts that involves blows or kicks or equivalent, or resulting from sports, athletic contests or training as a professional sportsperson.

We do not cover expenses that are reimbursed by other means according to law, convention, statute, collective agreement, other insurance (such as a motor third-party liability or industrial injury insurance policy) or by a municipality, county council or the government.

A complete description of the limitations is available in the insurance terms and conditions.

General provisions and information

Some important general limitations

The insurance policy is not valid in the event of war, warlike political upheaval, nuclear processes or acts of terrorism.

A complete description of the limitations is available in the insurance terms and conditions.

Who can be insured?

The insurance covers the persons specified in the group policy.

The condition is that the person to be insured is completely able to work and is resident and registered in Sweden, or who has their main employment in Sweden but permanent residence in some other Nordic country.

We define the term "completely able to work" as a person who:

- can perform their normal work without hindrance and does not receive or have the right to receive benefits connected to illness or accident
- does not have specially adapted employment for health reasons, or subsidised employment or equivalent.

The insurance can be purchased from the age of 16 and not later than the age of 63.

When the insurance takes effect

The insurance applies from the day on which we receive your completed application, when the health requirements have been met and we can approve the application.

When the insurance ceases

The insurance ceases if the group policy is terminated or if your employment or membership is terminated.

The insurance applies until the last day of the month in which you turn 67.

If the insurance is not paid, it will expire 14 days after we have terminated the policy.

For cases in which a spouse/cohabitee can be co-insured, their insurance coverage ceases if the group member's insurance is terminated or if the marriage/cohabiting relationship is terminated.

In certain cases, you are entitled to continuation insurance.

Scope of the insurance

The scope of the insurance is stated on your insurance certificate.

The insurance terms and conditions can be changed prior to each new insurance year.

Price and price calculation

The price of the insurance is stated in the offer, price sheet or application.

The price is calculated for one-year periods and is based on such factors as the scope of the insurance and the expected claims result.

Term of the policy

The insurance policy is valid for one-year periods, although the first insurance year may be a shorter period. The insurance policy is subsequently renewed for one-year periods.

If you change your mind

If you purchase your insurance on the Internet, by telephone or away from our offices, known as a distance purchase, you are entitled to change your mind about the purchase within 30 days. Contact us and we will assist you.

More detailed information about your right to a refund can be found in the Swedish Act on Distance Contracts and Off-Premises Contracts.

How do I cancel my insurance?

You can cancel the insurance at any time. The policy will then expire at the end of the month in which you terminate it.

Disclosure obligation and incorrect information

As a policyholder and the insured, you have a disclosure obligation and must provide correct and comprehensive answers to our questions.

If you have provided incorrect or incomplete information, it could mean that your insurance is invalid.

Who to contact if you have questions

If you have any questions, contact your group representative.

You may also contact the Swedish Consumers Insurance Bureau, www.konsumenternas.se, +46 200 22 58 00. Your municipal consumer advice department can also provide advice and information. Such advice is free of charge.

If we do not agree

If you are not satisfied with a decision or the way in which your case was handled, we are prepared to re-consider your case. In the first instance, get in touch with your contact person or our complaints officer.

If you are still not satisfied, you can contact the Swedish Personal Insurance Board for medical disputes, www.forsakringsnamnder.se, +46 8 522 787 20. If the dispute concerns other issues, you can contact the Swedish National Board for Consumer Disputes, www.arn.se, on +46 8 508 860 00.

You may also have your case settled in a court of law. Your legal representation costs can usually be reimbursed if you have legal expenses insurance. In this event, you will only have to pay the deductible.

Your personal data

This is a brief description of how we process personal data. Complete information about how we process your personal data is found in *Processing of personal data*, which can be found on our website lansforsakringar.se/personuppgifter. You can request that this information be sent to you by contacting us on telephone +46 8 588 427 00 or e-mail info.halsa@lansforsakringar.se.

The personal data that we collect about you is processed in accordance with applicable laws and regulations. The data is collected so that we can sign and fulfil insurance contracts, take action that you request before an agreement has been reached, provide a complete overview of your commitments with the Länsförsäkringar Alliance, make legal claims and conduct marketing. Your personal data may also be used for statistics, market and customer analyses, product development, to prevent claims and for other purposes specified in the complete information *Processing of*

personal data. If you do not want your personal data to be used for direct marketing, please inform us.

We mainly process your data within the Länsförsäkringar Alliance, but your data may also be transferred to companies, associations and organisations that work together with the Länsförsäkringar Alliance, both within and outside the EU and EEA. We may also disclose your personal data to the authorities if required to do so by law. Details about your non-life insurance may also be disclosed to people in the same household as you.

You can always request information about the personal data that we process about you. The party responsible for your personal data (personal data controller) is Länsförsäkringar AB (publ). General information, such as your name, contact details and information about your commitments, is also processed in the Länsförsäkringar Alliance's shared customer register.

Insurer

The insurer is Länsförsäkringar AB (publ), Corp. Reg. No. 502010-9681. The registered office of the Board of Directors is located in Stockholm, Sweden.

We are regulated by the Swedish Financial Supervisory Authority.

Contact Länsförsäkringar or your insurance broker

Länsförsäkringar Bergslagen +46 21 19 01 00 | **Länsförsäkringar Blekinge** +46 454 30 23 00 | **Dalarnas Försäkringsbolag** +46 23 930 00 | **Länsförsäkringar Gotland** +46 498 28 18 50 | **Länsförsäkringar Gävleborg** +46 26 14 75 00 | **Länsförsäkringar Göinge-Kristianstad** +46 44 19 62 00 | **Länsförsäkringar Göteborg och Bohuslän** +46 31 63 80 00 | **Länsförsäkringar Halland** +46 35 15 10 00 | **Länsförsäkringar Jämtland** +46 63 19 33 00 | **Länsförsäkringar Jönköping** +46 36 19 90 00 | **Länsförsäkringar Kalmar län** +46 20 66 11 00 | **Länsförsäkring Kronoberg** +46 470 72 00 00 | **LF Norrbotten** +46 920 24 25 00 | **Länsförsäkringar Skaraborg** +46 500 77 70 00 | **Länsförsäkringar Skåne** +46 42 633 80 00 | **Länsförsäkringar Stockholm** +46 8 562 830 00 | **Länsförsäkringar Södermanland** +46 155 48 40 00 | **Länsförsäkringar Uppsala** 018-68 55 00 | **Länsförsäkringar Värmland** +46 54 775 15 00 | **Länsförsäkringar Västerbotten** +46 90 10 90 00 | **Länsförsäkringar Västernorrland** +46 611 36 53 00 | **Länsförsäkringar Älvsborg** +46 521 27 30 00 | **Länsförsäkringar Östgöta** +46 13 29 00 00