



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

Accident and Illness insurance for adults

Advance and after-sale information

Valid from 1 January 2024, terms and conditions OSV24

Our Accident and Illness insurance for adults provides cover in the event of both accidental injuries and illness. This document only comprises general information to which you are entitled before you purchase the insurance policy. If a type of protection is particularly important to you, you should find out whether it is included in the policy. Please feel free to contact us. We offer advice on this insurance product. The complete terms and conditions of the insurance can be found on our website, lansforsakringar.se. You can also contact us and we will send these to you.

When you have purchased the insurance, it is also important that you carefully read your insurance policy and check that everything is correct, for example, name and personal identity number, the size of the amount insured and the period covered by the insurance policy. If the policy contains a special clause, this is stated on the insurance certificate.

Who can apply for the insurance?

You can apply for the insurance if you are registered and resident in Sweden and are between the ages of 18 and 59.

Insurance period

The insurance policy is valid around the clock and has no deductible. It ceases to be valid on the expiry date after you have turned 65.

Sum Insured

You can decide the sum insured yourself: 10, 30 or 50 price base amounts. The price base amount is an amount that follows the price trend in society, and which is determined each year by the Government. Your sum insured will be index-linked since the sum insured and other compensation in policies are updated when the price base amount changes.

All compensation that is provided from the insurance is exempt from income tax.

Application

Visit our website or contact us and we will help you to apply for our Accident and Illness insurance for adults. You can do this directly by filling in the health declaration digitally.

Price

The price of our Accident and Illness insurance for adults depends on the sum insured that you choose as well as your age. Visit our website or contact us to find out how much the insurance costs.

Medical examination

When you apply for our Accident and Illness insurance, you must answer questions about your health in a health declaration. After this, we perform an insurance medical risk assessment. This assessment leads to either the insurance being granted normally, except for specific illnesses (clauses), or with a higher premium or only Accident insurance being offered. The insurance policy is based on the signed health declaration we received from you. Failure to provide complete information in the health declaration can result in the insurance becoming invalid.



Accidental injury

Accidental injury refers to a bodily injury that you involuntarily incur due to a sudden external incident.

The accidental injury must also have required medical treatment by a licenced and impartial doctor, nurse or physiotherapist.

The following is included in the insurance policy in the case of accidental injury

- Medical disability
- Financial disability
- Scarring
- Unable to work due to accidental injury
- Emergency medical care
- Hospitalisation
- Lump sum for medical care
- Lump sum for personal belongings
- Dental injury expenses
- Crisis therapy
- Death

Illness

Illness refers to a confirmed deterioration of health that cannot be considered an accidental injury. The illness is deemed to have manifested itself when the deterioration was first documented by a doctor, psychologist or at a psychiatric clinic, regardless of whether a diagnosis can be established at this time.

Illness does not refer to:

- Voluntarily inflicted bodily injury.
- Illness that according to medical expertise is the result of abuse of alcohol, narcotics, other intoxicants, sleeping agents or other pharmaceuticals.
- Injury arising from a procedure, treatment or examination not caused by illness.
- Complaints that require preventive treatment.

The following is included in the insurance policy in the case of illness

- Medical disability
- Financial disability
- Lump sum for certain diagnoses
- Unable to work due to illness
- Emergency medical care
- Hospitalisation
- Death

Important limitations to the insurance

Here are some important examples of what is not included in the insurance policy and limitations in cover.

The insurance policy does not cover illnesses that were displaying symptoms before the insurance had become valid.

The scope of the policy is limited for specifically stated medical conditions.

These are:

- Musculoskeletal system, ICD M25, M40-M99
- Congenital malformations, ICD Q00-Q99
- Mental, behavioural and neurodevelopmental disorders, ICD F00-F99
- Unspecified brain disorders that in certain cases lead to fatigue syndrome, ICD G93
- Chronic pain, unspecified ICD R52
- Dystonia, ICD G24

The insurance policy does not cover:

- Participating in boxing or other martial arts that involve blows/kicks or equivalent.
- Track racing, competitions or training using motor vehicles.
- Sports, athletic contests or organised training as a professional sportsperson.

Cover is limited when outside the Nordic region, and this is also the case in the event of war or war-like situations.

The insurance does not apply in the event of certain terrorist acts and nuclear processes.

Compensation for accidental injury

Medical disability

If you experience a permanent reduction in bodily function, lump-sum compensation is paid in the event of accidental injury. If we assess the degree of medical disability to be less than 20%, we pay compensation at the sum insured corresponding to the degree of medical disability. If we assess the degree of disability as 20% or more, the compensation will be higher, according to the table in the insurance terms and conditions.

This compensation is provided regardless of whether you receive other compensation from somewhere else.

Financial disability

If an accidental injury results in a permanent impairment of the ability to work of at least 50%, this is known as financial disability. We pay compensation at the sum insured corresponding to the degree of financial disability. This compensation is provided regardless of whether you receive other compensation from somewhere else, but the amount depends on the sum insured and your ability to work after the accident. The higher the amount you choose, the greater financial security you will receive. No compensation is paid if the financial disability is established after you have turned 60 even if the accidental injury occurred at an earlier date.

Scarring

You receive compensation for scars that are deemed to be permanent. Compensation is paid in accordance with the scar table in the insurance terms and conditions, at the earliest one year after treatment of the scar has been completed. The injury must have been so severe that treatment was required by a licenced and impartial doctor or nurse.

Limitation

For scars with a length of less than 0.5 cm and that are not visible.

Unable to work due to accidental injury

You receive compensation of SEK 3,000 when a doctor issues a certificate prescribing at least 30 consecutive days of sick leave due to the accidental injury. If your sick leave is extended by at least another 30 consecutive days, you will receive an additional SEK 1,500. The total compensation for the same accidental injury is SEK 4,500.

Emergency medical care

If you require emergency care at a hospital and are admitted to stay over night, compensation of SEK 600 is paid. No compensation is paid for planned hospital stays.

Hospitalisation

If you are admitted to and stay at a hospital, you will receive compensation of SEK 400 per day. You can receive compensation for a maximum of 365 days.

Lump sum for medical care

If your accidental injury required medical treatment by a licenced and impartial doctor, nurse or physiotherapist you will receive SEK 800. You can only receive compensation once for the same accidental injury. No lump sum is paid for a dental injury that only required dental treatment.

Lump sum for personal belongings

For accidental injuries that are of such a serious nature that you had to consult a licenced and impartial doctor and received treatment, you will receive SEK 1,500 for damaged personal clothes, glasses, helmets, hearing aids or other disability aids that you were carrying when the accident occurred. Total compensation is SEK 1,500 even if more than one of the possessions listed above was damaged.

Compensation for dental injury expenses

You receive compensation for expenses for treatment of dental injuries arising from an accidental injury. The treatment must have been performed by a licenced dentist who is part of the national dental health insurance scheme in Sweden. Compensation for treatment costs is paid for up to five years from the date of the accident. We must approve all treatment in advance.

Crisis therapy

You receive compensation for ten sessions of conversational therapy in the event of the following: Crisis reaction due to a compensable accidental injury or the death of a close relative, or if you are bullied or are the victim of attack, assault, threat, robbery or rape incidents that are reported to the police. Compensation is also paid for travel expenses in connection with such therapy.

Compensation is paid at a maximum of 0.25 price base amount.

Compensation in the event of death

In the event of death due to accidental injury, we pay one price base amount to the estate of the deceased.

Compensation for illness

Medical disability

If you experience a permanent disability due to a compensable illness, lump-sum compensation is paid. The information box on page 2 states the illnesses for which you cannot receive compensation.

If we assess the degree of medical disability to be less than 20%, we pay compensation at the sum insured corresponding to the degree of medical disability. If we assess the degree of disability as 20% or more, the compensation will be higher, according to the table in the insurance terms and conditions.

This compensation is provided regardless of whether you receive other compensation from somewhere else.

Compensation is not paid for functional impairment that existed before the illness manifested itself.

Limitation

For illnesses for which we have paid Lump sum for certain diagnoses, the medical disability benefit is limited to a maximum of 10% of the sum insured chosen.

Financial disability

If a compensable illness results in a permanent impairment in the ability to work of at least 50%, this is known as financial disability.

The information box on page 2 states the illnesses for which you cannot receive compensation.

We pay compensation at the sum insured corresponding to the degree of financial disability. This compensation is provided regardless of whether you receive other compensation from somewhere else, but the amount depends on the sum insured and your ability to work after the accident. The higher the amount you choose, the greater financial security you will receive.

Your sum insured is halved once you have turned 55 years of age. No compensation is paid if the financial disability is established after you have turned 60 even if you became ill at an earlier date.

Lump sum for certain diagnoses

Compensation of 5% of your chosen sum insured is paid for the following illnesses, once the diagnosis has been confirmed.

- Systemic lupus erythematosus (SLE), ICD M32
- Amyotrophic lateral sclerosis (ALS), ICD G12.2
- Parkinson's disease, ICD G20
- MS, ICD G35
- Alzheimer's disease, ICD G30
- Malignant neoplasms, ICD C00-C43, C45-C76, C80-C97
- Benign neoplasms of the brain and spinal cord, ICD D32-D33, D35.2, D35.3
- Crohn's disease, ICD K50
- Ulcerative colitis, ICD K51

Limitation

- Diagnoses that have not been confirmed by a doctor and other diagnoses than those stated.
- Malignant melanoma of skin, ICD C43, that is less than 0.5 mm thick.
- Compensation is paid only once for the same illness or for illnesses that have a medical connection.

Unable to work due to illness

You receive compensation of SEK 3,000 when a doctor issues a certificate prescribing at least 30 consecutive days of sick leave due to the illness. If your sick leave is extended by at least another 30 consecutive days, you will receive an additional SEK 1,500.

Limitation

The total compensation for the same illness and for illnesses stated in the information box on page 2 is SEK 4,500.

A qualification period will also apply if you have received compensation under medical support. You must have been completely able to work for

Emergency medical care

If you require emergency care at a hospital and are admitted to stay over night, compensation of SEK 600 is paid. No compensation is paid for planned hospital stays.

Hospitalisation

If you are admitted to and stay at a hospital, you will receive compensation of SEK 400 per day. You can receive compensation for a maximum of 365 days.

Compensation in the event of death

In the event of death due to illness, we pay one price base amount to the estate of the deceased.

Insurance policy

The insurance contract applies for one year and is automatically renewed unless it is cancelled by one of the parties. The price may change at every main renewal date for reasons that include a changed price base amount, changes to terms and conditions and, where applicable, the age of the insured.

Compensation is paid based on the terms and conditions that applied when the illness was confirmed or when the accident occurred.

Swedish law will apply to the agreement, and all communication between the parties is to take place in Swedish.

Payment

You must pay for the insurance policy not later than the main renewal date by invoice or autogiro, if you have requested this.

Consequences of unpaid insurance premiums

If you do not pay the insurance in time, we are entitled to cancel it.

If you do not pay the insurance when it is to be renewed, you have the right to resume it within six months. The insurance is not valid during the period in which the policy has not been paid for.

Remember to report a claim in time

Claims should be reported as soon as possible. Read more about limitations in the insurance terms and conditions.

If you change your mind

If you purchase a product or service 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 14 days. Contact us and we will assist you. If you have already made payment, your money will be returned with a deduction for the cost of the time that you had the insurance.

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

Processing of personal data

You can find information on how we at Länsförsäkringar process personal data and your rights in relation to this on our website lansforsakringar.se/personuppgifter.

Registering a claim

The company uses an industry-wide claims register (known as GSR). This register contains certain information about claims and details about who has claimed compensation. This means that the company can find out if you have previously made any claims with another insurance company, occupational pension company or government agency that handles similar claims for compensation. The purpose of GSR is to provide insurance companies, occupational pension companies and government agencies that process similar claims for compensation a basis for identifying unclear insured events and claims for compensation. With its help, companies and government agencies can counteract the disbursement of compensation that is based on incorrect information as well as erroneous disbursements from several insurance policies for the same injury. This information can also be used in anonymised or pseudonymised form for statistical purposes and analyses at an aggregated level.

The personal data controller for GSR is: Skadeanmälningsregister (GSR) AB, Box 24171, SE-104 51 Stockholm, Sweden. See gsr.se for more information on the processing of information found in the register.

The personal data controller for Larmtjänst is Larmtjänst AB, Box 24158, SE-104 51 Stockholm, Sweden, larmtjanst.se

If we do not agree

If you are not satisfied with a decision or the way in which your case was handled, we would naturally be pleased to re-consider your case. First contact the claims adjuster who was responsible for your case or the complaints officer/customer representative.

The "If we do not agree" section of our website provides information about the complaints officer of your local regional insurance company. Submitting a claim, and having it processed swiftly, is free of charge.

If you are still not satisfied, you can contact the Swedish National Board for Consumer Disputes for non-medical disputes, arn.se, +46 8 508 860 00. For medical issues, the Swedish Personal Insurance Board can issue a statement, forsakringsnamnder.se, 08-522 787 20.

You may also have your case settled in a court of law. Your legal representation costs are often reimbursed under the legal-expenses cover included your household insurance. In this event, you will only have to pay the deductible.

The Swedish Consumers Insurance Bureau can provide general information about insurance issues, konsumenternas.se, +46 200 22 58 00. You can also receive guidance from the Swedish Consumer Agency, hallakonsument.se.

Your municipal consumer advice department can also provide advice and information about insurance.

More information is available from our website.

About Länsförsäkringar

Länsförsäkringar comprises 23 independent regional insurance companies that offer customers a complete range of banking and insurance services. Pet and crop insurance is offered through Agria Djurförsäkring and complete solutions for reliable mortgage transactions are offered through Länsförsäkringar Fastighetsförmedling. Your offer or your insurance policy states the regional insurance company that is your insurer.

We are regulated by the Swedish Financial Supervisory Authority (FSA). Finansinspektionen, Box 7821, SE-103 97 Stockholm, Sweden, +46 8 408 980 00, finansinspektionen@fi.se, fi.se.

Regarding marketing, we are under the supervision of the Swedish Consumer Agency. Box 48, SE-651 02 Karlstad, Sweden, +46 771 42 33 00, konsumentverket@konsumentverket.se, konsumentverket.se

Our employees who sell insurance policies receive a fixed salary. In certain cases, they also receive variable commission that is mainly based on quality and only a small portion is based on quantity. No compensation or commission is paid to our sales personnel if you take out the insurance online via our website.

Contact details for Länsförsäkringar

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Contact Länsförsäkringar or your insurance broker.

