



Private medical insurance PrivatAccess silver Group Scheme Insurance

Pre-purchase information
2021

Group Scheme Insurance with Euro Accident

This pre-purchase information contains general and brief information about group scheme insurance with Euro Accident that you are entitled to receive before you take out an insurance with Euro Accident. This pre-purchase information is provided according to law and it is important that you read it in order to get a clear picture of the scope of the insurance. Please also save this document.

The information cover all insurance products that may be included in Euro Accident's Group Scheme Insurance, and consequently also such insurance as may not be of any relevance to you.

The pre-purchase information does not constitute Euro Accident's insurance conditions. You can get the complete conditions from your insurance intermediary, your employer or the group representative who arranged the group scheme agreement through which you are covered. Complete insurance conditions are also available at Euro Accident's website euroaccident.se.

If it is especially important to you to have some particular insurance cover you should find out whether this is included before you apply for the insurance.

Euro Accident provides insurance conditions and all other information in Swedish. Certain information may also be provided in English in special cases when Euro Accident considers it appropriate.

'Group scheme insurance' works like this

The basis of group scheme insurance is the group agreement made between Euro Accident and your insurance intermediary, your employer or other group representative.

Each group scheme agreement contains specific conditions and prerequisites which, among other things, influence how you can apply for insurance, pay premiums and which insurance cover you can choose.

In some cases, members of your family may also be covered.

Euro Accident is entitled to change the insurance conditions and the insurance premium upon annual renewal.

Group Scheme Insurance – part of your total insurance cover

Euro Accident's Group Scheme Insurance may contain one or more different insurance products, which supplement the protection you are covered by through law and agreements.



Questions before you apply for insurance

Euro Accident does not provide advice concerning individual insurance agreements. If you have any questions you should before you apply for insurance contact your insurance intermediary, your employer or the group representative who arranged the group scheme agreement through which you are covered. You are also welcome to read more at euroaccident.se.

Euro Accident will in some cases pay commission to your insurance intermediary for insurance distributed.

Euro Accident's employees only receive a fixed remuneration.

You can visit the Swedish Consumer Agency's consumer advice service Hallå Konsument (hallakonsument.se), the municipal consumer advisors and the Swedish Consumers' Insurance Bureau (konsumenternas.se) for further advice and assistance.

Explanation of some terms

Extended medical care services

In the event the sickness/injury/complaint is not covered by the insurance due to a restriction contained in the insurance conditions or an individual restriction (exclusion), the insurance will still cover advice and booking of private medical care. The cost of care will be the financial responsibility of the insured under such circumstances.

Fully capable of working

'Fully capable of working' means your normal work can be performed without restriction and that sick pay from the employer or compensation from the Social Insurance Agency is not being paid out.

'Compensation from the Social Insurance Agency' means sickness or rehabilitation benefit, activity compensation, sickness compensation or other compensation due to inability to work.

In order to be fully capable of working it is also required that no occupational injury annuity is being paid or that employment with a wage subsidy, dormant activity compensation, sickness compensation or corresponding compensation has not been granted.

'Social insurance agency' and 'compensation' also means the corresponding agencies and benefits in the Nordic countries.

Insured

The person whose life or health an insurance applies.

Liability period

The longest period for which payment can be made on a loss.

Mandatory group scheme insurance

Insurance where employees are automatically covered due to actions taken by the employer and according to the group scheme agreement's requirements for joining.

Policyholder

The policyholder is the person who entered into the insurance agreement with the insurer. Each insured, including both group members and coinsured, are considered policyholders with regards to insurance compensation and the right to specify a beneficiary.

In case of Basic Disability Business Interruption Insurance and Disability Business Interruption Insurance the policyholder is the business in respect of which the Disability Business Interruption Insurance has been applied for.

Pre-existing condition clause

The period of time with work disablement which must have elapsed before compensation may be paid.

Explains the period of time which must have elapsed without the insured having any symptoms of, receiving care for or being medicated for a sickness/injury/complaint, or consequences thereof, before the insurance applies to such sickness/injury/complaint, or consequences thereof under Private medical insurance PrivatAccess.

Price base amount

The price base amount is an amount calculated on the basis of the changes to general price levels in accordance with the provisions of the Social Insurance Code (SFS 2010:110). This calculation is made on the basis of the changes to the consumer price index and fixed for the entire calendar year.

Voluntary group scheme insurance

Group scheme insurance for which group members apply themselves through a personal application or by not declining insurance.

Work disablement

'Work disablement' means that the work capacity of the insured has been eliminated or impaired due to sickness or accidental injury and that the insured is as a result receiving benefits from the Social Insurance Agency.

Private medical insurance PrivatAccess

General

Private medical insurance PrivatAccess applies to examination, treatment or other medical service covered by the insurance and which is performed in Sweden during the period that the insurance is in force.

In order to be entitled to care it is required that the insured is registered and registered as resident in the Nordic countries and is registered with the Swedish social insurance agency or the corresponding in a Nordic country.

Care guarantee

Private medical insurance PrivatAccess guarantees: consultation by a care provider with specialist competence within seven working days and surgery or treatment within 14 working days of the insurer's decision concerning measures.

If the care guarantee is not met, SEK 1,000 per day will be paid until the date of admission for surgery or other treatment subject to the precondition that the insured has made contact within the guarantee period and made a claim concerning compensation to Euro Accident. The maximum reimbursement is one (1) annual premium relating to the insured.

Deductible

Private medical insurance PrivatAccess silver can be applied for with or without a deductible. It is stated in the application documents what applies for the specific insurance.

The deductible is SEK 500, unless otherwise agreed, and shall be paid by the insured. The deductible does not need to be paid by the insured in the case of a sickness or injury where public medical care services or E-care service is used.

The insurance products cover	Silver
Specialist care	•
Surgery and hospital care	•
Healthcare advice	•
Psychologist, psychotherapist	•
Dietician	•
Patient fees	•
Travel exceeding 100 km per one-way trip and accommodation	•
Post surgical rehabilitation	•
Medical devices	•
Second opinion	•
Extended medical care services	•
E-care service	•
Physiotherapist, naprapath, chiropractor, osteopath	•
Acupuncture	•
Pharmaceuticals	•
Treatment of eye, ear-nose-throat and respiratory tract infections	•

Liability period

The liability period, in respect of sickness or accidental injury, is unlimited up to and including the end of the month the insured attains the age of 67, unless otherwise indicated by the group scheme agreement.

It is a precondition that the insurance is in force. If the insurance has expired, the liability period and consequently the cover cease to apply.

Who can apply for the insurance

See General underwriting guideline under General Information.

The children who can be coinsured are those of the group member/insured and also of the husband/wife, registered partner, cohabitee who are entitled to inherit. The insurance can be applied for up to their 20th birthday and can provide cover at most up to and including the end of the month in which they attain the age of 25.

Important restrictions

Insurance which has been granted with a pre-existing condition will not reimburse expenses for sickness, injury, complaint, or consequences thereof, which the insured had symptoms of, received care for or had been medicated for prior to the effective date of this insurance.

However, the insurance does apply where a medical investigation shows that more than one (1) year has elapsed since the existing condition was last subject of treatment, check, examination or medication and the insured has been without symptoms during the same period.

The insurance does not cover:

- emergency medical or intensive care except patient fees up to the high-cost protection level
- congenital diseases, birth injuries
- sicknesses that are included in the Communicable Diseases Act
- conditions of chronic pain, fibromyalgia
- organ transplant
- dialysis treatment
- non-treatable back complaints
- snoring problems, except sleep apnoea
- correction of vision
- surgical procedures for insured who smokes, unless the insured has refrained from smoking for six weeks before the operation and up to six weeks after, or from the time that the operation is booked if this is closer in time
- examination, treatment of varicose veins in the leg
- checks, treatment and surgery for underweight/overweight/obesity and consequential illness

- pregnancy complications, fertility examinations, sterilisation
- sexual dysfunction
- dementia diseases
- diagnostics and treatment of hyperkinetic conditions or intellectual disability
- treatment of eating disorders, psychosis, bipolar syndrome, personality disorder, specific phobic conditions or chronic fatigue syndrome.

The insurance does not cover sickness/injury/complaint caused by:

- performance-enhancing substances, medication prescribed by a physician for a specific sickness or accidental injury is not covered by the restriction
- various forms of misuse of for example pharmaceuticals, alcohol, other intoxicants, narcotic substances, gambling abuse or sex misuse
- injury that arose within health and medical care.

The insurance does not cover costs that relate to:

- in-patient care for a longer period than one (1) month
- non-symptomatic diagnostic tests and examinations
- cosmetic treatment, or consequences thereof
- alternative forms of treatment performed by an unauthorised care provider who is not licensed by the National Board of Health and Welfare or an osteopath who is not a member of the Swedish Osteopathic Association
- preventive care and vaccinations including desensitization
- hearing aid, CPAP and the diagnostic testing of such medical devices
- dental treatment, jaw and bite physiology including the making of appointments
- geriatric care
- private expenses during hospital care
- an appointment regarding medical care, treatment or surgery that was not attended.

Validity abroad

Private medical insurance PrivatAccess will reimburse any deductible paid by the insured to the travel insurance company or home insurance company, of at most SEK 5,000. One precondition for a right to compensation is that the amount of the loss exceeds the deductible under the travel or home insurance.

Otherwise, Private medical insurance PrivatAccess only covers costs in conjunction with planned care in Sweden and for planned care and treatment performed by a care provider in Sweden.

General information

Insurer

The insurer, Euro Accident Livförsäkring AB, is the insurance company that enter into the insurance agreement and thereby carry the insurance risk.

Finansinspektionen is the supervisory authority.

Premium

The premium is calculated for one year at a time and is determined of, among other things, the level of compensation selected and on the insured's age upon the immediately following birthday.

An invoicing charge is taken in the event of invoicing by post. This charge is specified in the tariff applicable at any given time, as shown on our website.

Tax class

This insurance is classified as a capital insurance (K) according to the Income Taxes Act

General underwriting guideline

Group scheme insurance can be applied for by a person who has attained the age of 16 and up to the date when the person attains the age of 65, is resident and registered as resident in the Nordic countries, excluding Iceland, and who is entitled to compensation from a Swedish social insurance agency or the corresponding in a Nordic country, unless otherwise agreed.

If the person is resident and registered as resident in a Nordic country other than Sweden, excluding Iceland, and is entitled to compensation from another social insurance agency than the Swedish agency, it is required that the person is in foreign service with a Swedish company. The company shall be a customer of Euro Accident and the employees shall have been offered group scheme insurance within the framework of these underwriting guidelines and associated conditions.

The company may have at most 25 per cent of their employees stationed in a Nordic country other than Sweden, excluding Iceland.

Deviations may occur, which in that case will be indicated under the respective product information above.

Group scheme insurance cannot be applied for on a mandatory or voluntary basis by participants in sports teams or sports associations.

Term of insurance

Voluntary group scheme insurance

The insurance starts to apply on the date following the date the application was made to Euro Accident, or to

some other party who receives documents on behalf of Euro Accident.

Mandatory group scheme insurance

The insurance starts to apply from the date specified in the group scheme agreement.

A precondition for the insurance to start to apply is that the requirements for joining the insurance have been satisfied, that complete application documents have been submitted and that the insurance can be granted in accordance with Euro Accident's health status review rules.

Cessation of the insurance

The insurance applies at most up to and including the end of the month in which the insured attains the age of 67 unless otherwise stated in the earlier product information. If the *insurance* terminates for another reason, the insured may in certain cases apply for similar insurance protection on other conditions and premiums, through our continuation insurance.

Under certain circumstances the insured may also be covered by three months' extended insurance cover, referred to as 'extended cover protection', when an insurance ceases to apply.

Upon attaining the termination age, the insured may be entitled to apply for Senior Insurance in the form of Private medical insurance PrivatAccess. The conditions and premiums for senior insurance differ from those for the preceding group scheme insurance.

It is possible for a child who has been covered by the Private medical insurance PrivatAccess and who has attained the termination age for the insurance to apply for continued insurance, unless otherwise agreed.

Restrictions

The insurance contains various restrictions and exclusions, which means that the insurance does not apply in certain situations. All restrictions and exclusions are shown in the insurance conditions. Examples of when the insurance does not apply are given below.

Incorrect or incomplete information

If incorrect or incomplete information concerning circumstances that are of relevance to the assessment of the insurance risk have been provided, this may mean that the insurance will be terminated or amended and that the right to insurance compensation lapses completely or in part.

Intent and gross negligence

If the insured has by intent or gross negligence induced a bodily injury, accidental injury or sickness, or

aggravated its consequences, the compensation may be reduced or lapse completely.

If the insured has committed suicide, the insurer is liable if more than one year has elapsed from when the insurance agreement was effective or extended or, in the event of a shorter period, if it must be assumed that the insurance was applied for without any thought of suicide.

Criminal act and influence of intoxicants

The insurance compensation may be reduced, cease or lapse completely in the event of injury in conjunction with the insured:

- having performed or participated in a criminal act which according to Swedish law can lead to imprisonment
- being influenced by alcohol or other intoxicants, soporifics, narcotic substances or as a consequence of the use of pharmaceuticals in an improper way

Certain communicable diseases and/or epidemics

The insurance does not apply for losses which completely or partially, directly or indirectly, were caused by or are a result of, or have been aggravated by an epidemic/pandemic announced by the World Health Organisation (WHO), and/or disease subject to the Communicable Diseases Act.

Force Majeure

The insurance does not apply to a loss which arises if the assessment of the right to insurance, investigation of the loss or payment of compensation is delayed or made impossible due to war, warlike event, civil war, revolution, rebellion, due to official measure, strike, lockout, blockade or similar event or due to a natural disaster.

War, warlike political unrest, armed conflict or the like

The insurance does not apply for losses which are connected to war, warlike political unrest, armed conflict or the like in or outside Sweden.

However, if the insured is staying in countries or area outside Sweden where war, warlike political unrest, armed conflict or the like breaks out during the stay, the insurance applies during the first four weeks subject to the precondition that the insured does not in any way participate in, or report on, the war, the warlike political unrest or the armed conflict. However, this does not apply to countries or areas to which the Swedish Ministry for Foreign Affairs (UD) advises against travel due to war, warlike political unrest, armed conflict or the like.

Terrorism and mass destruction

The insurance does not apply for losses that are connected to an act of terrorism which has been caused by the dispersal of weapons of mass

destruction in the form of biological, chemical or nuclear materia in or outside Sweden.

Nuclear processes

The insurance does not apply to sickness or accidental injury that has directly or indirectly been caused by nuclear processes.

Sport

The insurance does not apply for losses as a consequence of the insured participating in sports activities that yield an income for the insured due to the sport of an amount that exceeds one (1) price base amount per year (sports income). 'Participate' means both training and competing. Nor does the insurance apply for losses as a consequence of a sport that the insured has been enrolled to engage in at a national sports college (RIG) or on a nationally approved sports programmes (NIU).

Hazardous activities

The insurance does not apply to losses as a consequence of the insured participating in adventure activity, expedition activity or other hazardous activities. Examples of exempted activities are martial arts, leisure diving at depths greater than 18 metres, mountain climbing, motor sports, off-pist skiing.

Costs which are reimbursed by some other means

The insurance does not compensate costs that are reimbursed by some other means such as other insurance or collective agreement.

In the event of a loss

Sickness, accident or death shall be notified to Euro Accident as soon as possible.

Forms for giving notice can be obtained at euroaccident.se or ordered from the insurance intermediary engaged or Euro Accident. As regards certain costs the insured may get compensation immediately through calling Euro Accident. The relevant telephone numbers are shown at euroaccident.se.

Keep original receipts and certificates as supporting documentation so that Euro Accident will be able to pay out compensation for healthcare visits, pharmaceuticals, travel and other costs.

For advice and booking of care through Private medical insurance PrivatAccess the insured may call Euro Accident's Medical Call Center. The telephone number is available on Euro Accident's website euroaccident.se.

Insureds who are covered by Private medical insurance PrivatAccess silver may, without having first contacted Euro Accident's Medical Call Center, also seek care for milder medical conditions directly via Euro Accident's E-care service at euroaccident.se.

Losses will always be settled according to the conditions applicable for the contract period when the loss occurred.

Period of limitation

A party who wishes to make a claim for insurance compensation or other insurance cover must institute proceedings against Euro Accident within ten years of the time when the circumstance arose that, according to the insurance agreement, would afford an entitlement to such cover or compensation. Otherwise the right to compensation or other insurance cover lapses.

Processing of personal data

As a Controller, Euro Accident processes personal data to be able to offer and provide the insurance and services on which we have agreed and for other purposes such as, for example, compliance with laws and other rules. Further detailed information about the processing of personal data is available from Euro

Accident's Integrity Policy (available at euroaccident.se) or by contacting Euro Accident.

Our Integrity Policy not only includes information about how Euro Accident collects and uses your personal data, but also information about your rights in conjunction with the processing of personal data, such as the right to information, rectification, data portability, right to be forgotten and to object, etc.

If we do not agree

If you are not satisfied with the processing of our claims matter you should in the first instance turn to Euro Accident and request to have the matter reconsidered. If we do not reach agreement you can refer to the National Board for Consumer Disputes or the Personal Insurance Board. You can obtain advice without charge from the Swedish Consumers' Insurance Bureau. Insurance matters can also be considered by a Swedish court, in the first instance a district court