

Pohjola Patient Insurance

Insurance guide, valid as of 1 January 2024



Pohjola Insurance



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Patient insurance covers healthcare personnel and service providers. Patient insurance is valid in Finland, and it is mandatory for those who practise health and medical care.

The insurance covers personal injuries caused by health and medical care, such as an illness or injury caused by an examination or treatment. The Patient Insurance Act defines what the insurance covers.



Welcome to the insurance guide!

This insurance guide tells you about Pohjola Patient Insurance. With the aid of the guide, you can learn about the insurance, how to use it and other important matters. Please also read the [insurance product information document](#) and [insurance terms and conditions](#). The insurance and the compensation paid out are based on the Patient Insurance Act.

How the patient insurance works

If you have patient insurance, and your patient wants to claim compensation, direct them to the Patient Insurance Centre's website to take a test first. The test will say whether they should file a notice of patient injury about the event.

<https://www.pvk.fi/en/notice-of-injury/take-the-test-first/>



If the online test recommends submitting a loss report, your patient can submit the notification to the Patient Insurance Centre.

The Patient Insurance Centre will solve the matter and pay any compensation to the patient.



Deadline for filing a loss report

The patient must submit a loss report within three years of when they discovered or should have discovered the accident and its consequences.

Who must take out patient insurance as statutory insurance?

You must have patient insurance if you work as a healthcare professional and are registered in Valvira. If you practise health and medical care as a self-employed person or as an entrepreneur in a business, you will take out the insurance under your business ID. If your business employs healthcare professionals, or you find work for them as agency workforce, your business will take out insurance on their behalf.



You need the insurance if your business practice includes:

- health and medical care provided by a physician, dentist or nurse
- occupational healthcare
- school and student healthcare
- sampling, blood donation or vaccination
- physiotherapy, massage or other rehabilitation
- sale of prescription drugs by pharmacies
- ambulance transport
- optician's services
- clinical medical research

- † The insurance covers health and medical care provided outside Finland only in the event that an authority responsible for organizing social welfare and healthcare services decides to provide the treatment outside Finland, and the treatment is necessary for the patient's health.

What matters affect the premium?

Your insurance premium depends on the type of patient injury risk related to your business practice. Your premium also depends on the occupational titles of healthcare professionals in your business, as well as the sums of wages and salaries.

At the start of the insurance period, we charge an advance premium that is an estimate of the total premium for the period. When the insurance period ends, we will calculate the final insurance premium based on the realised figures.

What does patient insurance cover?

In accordance with the Patient Insurance Act, the insurance covers personal injuries that are caused by

- ✓ a medical examination or treatment of a patient or negligence thereof. Compensation is payable provided that an experienced healthcare professional would most likely have avoided the injury by examining, treating or otherwise handling the patient differently.
- ✓ a defect in a medical device or other equipment used in an examination or treatment.
- ✓ a fixed medical device implanted in the patient's body at a healthcare unit. Compensation is payable provided that the device was not as safe as you had reason to assume, taking into account when the device was put in circulation, the foreseeable use of the device, and other factors.
- ✓ an unexpected infection during a medical examination or treatment. The Patient Insurance Centre resolves whether compensation is payable on the basis of a separate tolerability assessment of the infection. The assessment considers the predictability and severity of infection, type of the disease or injury being examined or treated, and the state of the patient's health.
- ✓ an accident during medical examination or treatment or when the patient is being transported.
- ✓ an accident in the treatment premises or equipment, such as a fire in the treatment room.
- ✓ administering a medicine contrary to a law or regulation, or provisions issued under them.
- ✓ medical examination or treatment. Compensation is payable provided that the treatment resulted in death or a permanent, difficult illness or injury and that this result can be considered unreasonable when taking into account the severity of the accident, the type and degree of the illness or injury that was treated, the state of the patient's health, rarity of the accident and its likelihood in the individual case in question.

No maximum amount of compensation is defined for the insurance.

What does patient insurance not cover?

Here are some examples of what is not covered by the insurance in accordance with the Patient Insurance Act.

- ✗ Material damage such as damage to or disappearance of clothing or removable prostheses. In these cases, compensation can be claimed from the party that caused the loss in accordance with the Tort Liability Act.
- ✗ An accident that did not occur during health and medical care as referred to in the Patient Insurance Act. These include accidents that occur when assisting with normal daily activities. For example, assistance and supervision related to homelike housing in nursing homes are not activities regulated by the Patient Insurance Act.
- ✗ Injuries caused by medication that has been administered or prescribed correctly.
- ✗ So-called pure financial loss. Pure financial loss refers to a financial loss that is unrelated to a personal injury or material damage.
- ✗ Minor loss or injury.

The process of taking out insurance



Request an offer

You can ask for an offer from your contact person or our Customer Service at op.fi. We will get back to you on the following business day at the latest. For additional information, you can call our non-premium service number at 0100 5335.



We will offer a suitable insurance policy for your business

We will go over your company's risks and personalise a suitable insurance policy.



You decide what happens next

Our offer will not obligate you. Read the offer thoroughly and take your time to make your decision.



Personal data processing

We process the personal data of our customers according to the regulations in force. Read more about personal data processing in the Privacy Statement and Privacy Notice, available at op.fi.



Insurance sales commissions

We pay a commission to the salesperson for selling an insurance. The commission is a set percentage of the insurance premium or a fixed commission based on the number of insurance policies sold. The commission and its amount are affected by the insurance product sold and the channel through which it was sold.

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Domicile: Helsinki, main line of business: insurance

Regulatory authority: Finnish Financial Supervisory Authority, www.fiva.fi



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