

Pohjola Occupational accidents and diseases insurance

Product guide, valid as of 5 October 2020



Pohjola Insurance





Pohjola Occupational accidents and diseases insurance

Pohjola Occupational accidents and diseases insurance offers protection to your company's employees. The insurance compensates personal injuries that occur during work, in conditions caused by the work, or during commutes between the place of work and home.

The insurance as well as the compensation and benefits paid out are based on the Workers' Compensation Act. Occupational accidents and diseases insurance reimburses medical treatment and rehabilitation expenses and loss of income during the period of incapacity for work, among other costs.

- **1 High-quality treatment and fast recovery**

Pohjola Hospital and our other medical partners help us to ensure a high standard of treatment and a fast recovery for workers together with their employer and occupational health care provider.
- **2 Pohjola Health Advisor at your service**

If you have an accident, you will receive an expert assessment of your symptoms and are referred to the correct medical professional. Call us at 0100 5225* or use the chat in the Pohjola Hospital mobile app.
- **3 Free digital services as an additional benefit**

When you take out workers' compensation insurance with us, your employees are given a Digital insurance card and access to Pohjola Risk Management Service. For general instructions in the event of a loss, visit Pohjola Claim Help at vahinkoapu.pohjola.fi/en.

This product guide describes the main content of occupational accidents and diseases insurance. For detailed information about the contents of the insurance, see the Workers' Compensation Act. In addition, the terms and conditions of Pohjola Occupational accident insurance for employees' leisure time apply to leisure-time insurance. Pohjola Occupational accidents and diseases insurance is granted by Pohjola Insurance Ltd. The Pohjola Health Advisor service is provided by Pohjola Hospital Ltd.

*Calls are charged at the normal mobile phone or local network rate.

CONTENTS

Pohjola Occupational accidents and diseases insurance	2
Insure your employees against occupational accidents and diseases.....	4
Safety is ensured together every day.....	4
Extend the insurance to also cover time off work and remote working days.....	5
What does occupational accident and disease insurance cover?	6
Efficient clinical pathway speeds up recovery.....	8
Validity of the insurance and changes	8
How occupational accident insurance premium is determined.....	9
Additional information	10

Insure your employees against occupational accidents and diseases

Employers have a duty to insure their employees against disability and occupational accidents. Employment pension insurance and occupational accidents and diseases insurance are mandatory for employers.

“Workers’ compensation is a mandatory insurance that covers the time spent at work and gives financial protection to employees and their families.”

Employers must insure employees against occupational accidents when the wages and salaries paid for the work exceed 1,300 euros in a calendar year.

Insurance against occupational accidents and diseases is a part of employees’ social security in Finland and based on the law. Compensation paid from the insurance take precedence over other forms of social security and ensure employees’ livelihood and treatment in the event of disability caused by an occupational accident. Employees’ group life insurance is administered together with workers’ compensation insurance.

The insurance covers persons in an employment relationship. Those insured include employees and, for example, partners in a limited liability company who work in the company and own less than 30% of the company individually or less than 50% together with a family member. In the case of partners, indirect ownership is also taken into consideration. Self-employed persons are not included in this mandatory insurance cover and may take out voluntary occupational insurance. The most comprehensive form of voluntary cover is self-employed persons’ accident insurance. For farmers, accident insurance is handled by the Farmers’ Social Insurance Institution (MELA).



Safety is ensured together, every day

We are all responsible for safety. We offer Pohjola Risk Management Service free of charge to our occupational accidents and diseases insurance customers. The service allows you to collect observations on work safety and quality to serve as a basis for improving operations. As an employer, you are responsible for safety at work. Risk Management Service helps you ensure compliance with legal obligations, such as identifying risks.

Identifying risks in advance ensures better safety at work. Make sure that your employees are familiar with safe work practices.

Safety is a mode of operation and usually does not require large investments but rather commitment in daily routines and practices. The Pohjola Risk Management Service is used to collect data on work hazards and near miss situations for use in improving safety at work. This way, you give each employee the chance to influence their work and ensure that the safety and efficiency of work is promoted in the best possible way. You also influence the payment of your accident insurance premiums.

“The most important thing is that employees are able to work safely and enjoy their time off.”

Extend the insurance to also cover time off work and remote working days

A significant share of absences from work are caused by accidents that occur during leisure time. Voluntary additional insurance ensures that your employees get fast access to treatment and recovery. The insurance reimburses the employer for salary expenses while an employee is on sick leave.

The insurance supplements occupational accidents and diseases insurance and offers the most comprehensive leisure-time insurance cover. Compensation paid out from the insurance is determined based on the Workers' Compensation Act and are similar in scope to those of mandatory occupational accident insurance.

Voluntary leisure-time accident insurance is a tax-free fringe benefit for employees and a tax-deductible business expense for the employer.

You can select a suitable scope of coverage of leisure-time insurance

The most comprehensive option of leisure-time accident insurance is valid worldwide and in all sports. Alternatively, certain high-risk sports, such as floorball and soccer, can be excluded from the cover. The insurance is usually taken out for all employees, but it is also possible to only insure individual persons or groups.

“Our partner physicians also assist you in the event of an accident outside work.”

In the most restricted option, the insurance covers accidents that occur in non-competitive sports practiced on leisure time and paid for by the employer. Non-competitive sports insurance for leisure time always covers all employees.

The Workers' Compensation Act includes certain restrictions on coverable losses. Leisure-time insurance does not cover road accidents or work-related pain, for example. The law also excludes from coverage any damage caused deliberately by another person.

“Most employees' absences are due to illness or injuries sustained outside of work.”

To extend coverage for illness, we recommend that you take out health insurance, which covers, for example, expenses incurred from tests and the treatment of illnesses. You can choose the most suitable solution for your staff from our range of options.

Additional cover with remote workers' insurance

In remote work, statutory workers' compensation insurance is valid in activities that are directly related to the work. It does not cover all accidents that may occur during a remote working day. Situations that are excluded from insurance cover include short breaks, meals and travels during the day to take the kids to daycare, for example. You can improve employees' insurance cover in remote work with additional voluntary insurance.

Supplementary additional cover	Voluntary insurance against illness, injury, travel accident, disability and death, among others.	
Employment-based social security	Occupational accident and occupational disease insurance	Self-employed persons' accident insurance
	Employees' pension insurance	Self-employed persons' pension insurance
	Occupational health care	
Residence-based social security	KELA: Basic healthcare, sickness allowance, unemployment benefits, national pension, et cetera	

What does occupational accidents and diseases insurance cover?

Occupational accidents and diseases insurance covers the following, in accordance with conditions specified by law

- medical treatment expenses caused by the injury
- loss of income during the period of incapacity for work
- rehabilitation
- permanent disability.

Most compensation paid out consists of medical treatment expenses and daily allowances.

Compensation for bodily injuries caused by a road accident that occurs at work or during the commute is primarily paid from occupational accident and occupational disease insurance. The employee may receive secondary compensation under motor liability insurance.

In accordance with the Workers' Compensation Act, we cover

Medical treatment expenses of injuries	<p>Direct medical treatment expenses arising from an accidental injury or occupational disease, without upper monetary or time limit.</p> <p>As medical treatment expenses, we cover examination and treatment expenses, doctor's fees, medication, daily hospital charges and medical treatment travel expenses, for example. Investigatory costs related to the occupational accident or occupational disease may be reimbursed, even if the injury is found to be non-covered by legislation.</p>
Compensation for loss of income	<p>Compensation for loss of income includes daily allowance, workers' compensation pension and rehabilitation allowance. The daily allowance and workers' compensation pension represent taxable income.</p> <p>Daily allowance is always paid if the injured is unfit for work for at least three consecutive days. Daily allowance is not paid for the actual day of the injury. The daily allowance may be paid for up to one year after the injury has occurred. If the incapacity for work continues for more than one year after the injury, the injured person is paid compensation for loss of income in the form of a workers' compensation pension.</p> <p>The amount of workers' compensation pension is up to 85% of annual earnings until the recipient turns 65 years of age. After this, the maximum pension is 70% of annual earnings.</p> <p>During rehabilitation, a rehabilitation allowance is paid instead of a daily allowance or workers' compensation pension.</p>
Rehabilitation	<p>As functional capacity rehabilitation, the insurance covers the costs of physiotherapy, rehabilitation periods and examinations, medical aids, adaptation training and home alterations, for example.</p> <p>As vocational rehabilitation, the insurance also covers the costs of work trials and vocational retraining, for example. The insurance pays a rehabilitation allowance and covers the costs of rehabilitation for the period of rehabilitation.</p>
Handicap benefit	<p>The handicap benefit is compensation for a handicap caused by an accident or occupational disease that results in a permanent disability. The amount of benefit depends on the handicap's disability category and is paid either as lump-sum compensation or continuous benefit. The handicap benefit is paid one year after the accident at the earliest or after the status of the handicap has stabilised.</p>
Other covered expenses	<p>As material damages, the insurance covers glasses, hearing aids, dentures, prostheses and supportive bandages damaged in the occupational accident. Clothing and rings cut off when administering emergency aid are also covered. Other material damages are not covered.</p> <p>Other covered expenses include care allowance, clothing allowance and a temporary reimbursement of the costs of household management. Care allowance is paid in the event the injured needs assistance, supervision or guidance. Clothing allowance is paid to compensate for the wear and tear caused to clothing by assistive medical devices. If the injured person is unable to manage their household due to the disability, we pay temporary compensation for the costs of household management.</p>
Compensations in case of death	<p>Beneficiaries of an employee who dies of an occupational accident or disease have the right to survivors' pension. The survivors' pension is paid to the widow(er) and children under 18 years of age. If the child is a student or incapable for work, the survivors' pension is paid until age 25. The amount of survivors' pension is up to 70% of the deceased person's annual earnings. The widow(er)'s own income may reduce the amount of pension. Widow(er) refers to one of the following: the deceased person's spouse, registered partner, or common-law spouse if they have a child together or a mutual child maintenance agreement confirmed by a notary.</p> <p>The insurance pays a funeral grant as a lump-sum compensation.</p>

The table lists the most frequent forms of compensation. The types of individual compensation available are described in the Workers' Compensation Act.

In the event of loss or injury

Although most accidents result in only minor injuries, they may still require medical treatment. We **assist our customers online and over the phone** in the event of a loss or injury.

Pohjola Claim Help contains instructions for both the injured employee and the employer on what to do in the event of an accident. The service is available online at vahinkoapu.pohjola.fi/en.

The injured employee must always report the occupational accident to the employer. As the employer, you are responsible for filing the occupational accident report to the insurance company. Fill in the injury report at op.fi.

Digital insurance card for employees

- Consultations with a physician are made easier for employees when instructions and insurance details are conveniently found on the insurance card.
- The insurance card can also be used to directly call Pohjola Health Advisor.

Read more at op.fi/digivakuutuskortti (change language to read in English)

The Pohjola Health Advisor is available by phone at 0100 5225 and in the Pohjola Hospital mobile app.

- Free medical advice for Pohjola Insurance customers.
- The service refers the injured person to correct treatment.
- Calls are charged at the normal mobile phone or local network rate. The service is provided by Pohjola Hospital Ltd

Read more at op.fi/terveysmestari (change language to read in English)

Injured person

- Inform your employer about the accident.
- In minor injuries, contact the Pohjola Health Advisor service to receive instructions for treatment.
- If your injury requires treatment, the Health Advisor will refer you to suitable treatment provided by one of our partner physicians.
- **In emergencies and outside service hours, you may visit any clinic or hospital to receive first aid.**
- With our insurance you do not need any certificate of insurance. Simply tell the hospital or clinic that your employer has workers' compensation insurance at Pohjola Insurance. The hospital/clinic will send the statement and bill directly to us.

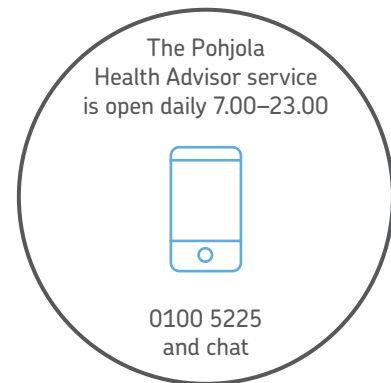
Employer

- Ask the injured employee to contact the Pohjola Health Advisor service. The injured person does not need to provide a certificate of insurance – informing the hospital/clinic that the insurer is Pohjola Insurance is sufficient.
- Fill in the accident report at op.fi as soon as possible after the injured person has informed you about the accident.
- Fill in the accident report no later than ten (10) weekdays after learning about the accident. We will forward the report to the Finnish Workers' Compensation Centre for use as statistics in improving safety at work. In the case of serious accidents, be sure to also notify the occupational safety and health authorities.
- We will decide on insurance coverage and issue our claim settlement decision on the basis of information in the accident report.
- You can speed up the claim settlement process by filling in the report thoroughly.

Efficient clinical pathway speeds up recovery

We ensure an efficient clinical pathway that speeds up the employee's return to work after an accident. In addition to Pohjola Hospital, our customers have access to our extensive network of partner doctors.

- The Pohjola Health Advisor service helps the injured person receive correct treatment.
- Ensuring that the clinical pathway is correctly chosen reduces the disability period and speeds up the return to work.
- At worst, an accident can lead to a lengthy rehabilitation period and incapacity for work. In these cases, we ensure that the injured person receives vocational and functional rehabilitation already from the early stages of recovery.
- To speed up recovery and the return to work, our Pohjola Hospital case managers and rehabilitation advisors function in close cooperation. Case managers are experts in vocational rehabilitation who assist and co-ordinate matters related to return to work.



Validity of the insurance and changes

Employers must take out statutory insurance for employees' working hours before an employee can start working. Occupational accidents and diseases insurance becomes valid at the earliest when an employer has agreed on the entry into force of the insurance with the insurance company. The insurance is valid at work and in conditions resulting from work in Finland and internationally.

The insurance period of occupational accident and occupational disease insurance is typically one calendar year. An advance premium based on estimated payroll expenses is billed at the start of the insurance period. At the end of the insurance period, payroll expenses are checked from the Incomes Register. The final insurance premium is calculated based on available information, and the employer is either paid a refund or charged an additional premium. A minimum insurance premium determined by the premium basis is always charged, however.

Occupational accidents and diseases insurance is usually taken out as a continuous annual insurance that is renewed automatically for each new calendar year. If a job of projects takes less than 12 months, it is possible to take out the insurance for a fixed-term that ends without separate notice. A continuous policy must be terminated in writing if obligation to insure no longer exists. A continuous policy may be transferred from one insurance company to another after it has been valid for at least one calendar year.

The policyholder must notify the insurance company of changes in its operations that affect occupational accident and occupational disease insurance. The insurance company must be notified in the event of material changes in the policyholder's line of business, volume or quality of the work, or the company's ownership structure.

How occupational accident insurance premium is determined

The amount of insurance premium is based on the volume of work as well as occupational accident and disease risk. The volume of work is calculated based on the wages and salaries paid for the work. Occupational accidents and diseases insurance risk is determined separately for each type of work in accordance with the claims statistics. The types of work are determined based on the classification of occupations by Statistics Finland.

The amount of premium also depends on the policyholder's line of business and risk category as defined by Suomen Asiakastieto, customer-specific or national claims statistics, and the insurance solution or rate system. Rate systems are divided into two main categories: tariff rate system and experience-based rate system. The choice of rate system depends on the policyholder's capacity and willingness to take risks.

In a policy with a tariff rate system, the amount of insurance premium can be predicted accurately. The premium is based on national statistics on occupational accidents and occupational diseases. The policyholder's own claims statistics do not directly influence the amount of premium, as the risk of loss or damage is shared by all policyholders. The tariff rate system is generally applied in insurance solutions for small employers.

“The insurance solution takes into account the employer's safety standards and willingness to bear the risk of loss or injury.”

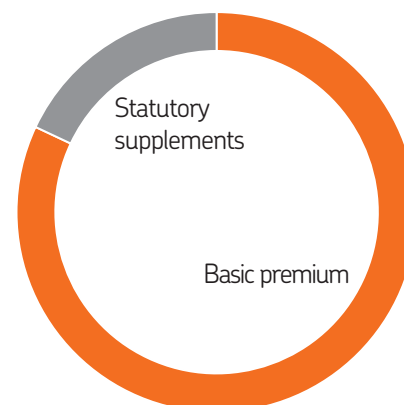
For larger employers, the experience-based rate system is generally applied. In insurance solutions that use the experience-based rate system, the policyholder's claims have a direct effect on the insurance premium. As a result, the amount of premium may vary from year to year. The more personalised the rate system, the more the amount of compensation paid for the policyholder's claims affects the insurance premium. With the experience-based rate system, successful efforts to improve safety at work are reflected directly as lower insurance premiums.

“We offer the Pohjola Risk Management Service to help you anticipate and prevent losses and manage costs.”

The insurance premium is based on the premium basis, which is confirmed annually by the insurance company's Board of Directors.

The insurance premium consists of

- A basic premium, which is used to cover compensations paid out and insurance management fees, et cetera
- Statutory supplements, which include costs shared by insurance companies. These include index raises of workers' compensation pensions paid for earlier accidents and occupational diseases, for example.



The share of statutory supplements of the total insurance premium is the same in all insurance companies.



Additional information

Validity of insurance and insurance terms and conditions

The insurance becomes valid once we have received and approved your insurance application.

The insurance policies are based on the Workers' Compensation Act. In the case of leisure-time insurance, we also apply the terms and conditions of Pohjola Occupational accident insurance for employees' leisure-time.

Supervision of insurance

The Finnish Workers' Compensation Centre is responsible for the supervision of employees' statutory insurance cover.

Employers that neglect the duty to insure are obligated to take out the insurance. If an employer that has the duty to insure does not rectify the negligence within the given time limit, the Finnish Workers' Compensation Centre takes out the mandatory insurance from an insurance company of its choice at the employer's expense.

Advice on claims and insurance policies

We provide advice on questions related to statutory insurance and claims in the service number **0100 5335**. Appended to the claim settlement decision are instructions on how to file an appeal, in the event that you are dissatisfied with the decision.

Recording telephone conversations

We record customer calls for purposes such as ensuring the quality of customer service and the service situation.

Personal data processing

Pohjola Insurance processes customers' personal data in accordance with regulations in force and in a manner described in greater detail in the Privacy Statement and the Privacy Notice. The customer is advised to get acquainted with the indicated privacy information. The Privacy Statement and Privacy Notice are available at op.fi/dataprotection and at OP's customer service outlets.

Insurance sales commissions

The insurance company will pay a commission that is either a percentage of the insurance premiums or a fixed fee based on the number of policies sold. The commission and its amount are affected by the insurance product and sales channel. The commission is paid to the agent or insurance company employee.



Our services

Manage your insurance matters at op.fi

Log into op.fi using the user identifiers for your own bank.

Once logged in, you can

- report a loss and file claims
- make changes to your company's policies
- print out or order a Green Card
- print out certificates of insurance

Pohjola Claim Help at your service 24/7

Pohjola Claim Help provides clear instructions for all types of road accidents and losses. In the case of loss or damage, Claim Help has the contact details of doctors, repair shops and our other partners.

Pohjola Claim Help is available at claimhelp.pohjola.fi and the OP Business mobile app.

Our Telephone Service

Telephone service for statutory insurance

- Motor liability insurance and claims and workers' compensation insurance and claims 0100 5335*

Pohjola Insurance

- Insurance and Claims Settlement 0303 0303**

* Call rate: local/mobile network rate.

** From mobile phones and landline networks in Finland, EUR 0.0835 per call plus EUR 0.12 per minute. The price includes VAT.

We record customer calls to assure the quality of customer service, among other purposes.

Advice on claims and insurance policies

Our insurance and claims advisors provide personal assistance in our telephone service. You can also file a complaint or appeal an insurance or claim settlement decision with our customer ombudsman. For more information on filing an appeal, visit op.fi/filing-a-complaint.

For independent advice, contact the Finnish Financial Ombudsman Bureau (FINE), tel. +358 9 685 0120, www.fine.fi/en.

Pohjola Insurance Ltd, Business ID: 1458359-3

Helsinki, Gebhardinaukio 1, 00013 OP, Finland

Domicile: Helsinki, main line of business: insurance

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

