Critical illness

Insurance Product Information Document

Company: If P&C Insurance Ltd (publ), branch in Finland **Product: Health insurance: Critical illness**

Complete pre-contractual and contractual information on the product is provided in the Policy Document and in the Terms and Conditions.

What is this type of insurance?

The agreed sum insured is paid as a lump sum compensation from the Critical illness cover of the Health insurance, if, during the validity of the insurance cover, a person being the insurance object is diagnosed with an illness or defect stated in the Terms and Conditions. The company taking out the insurance can choose either the insured employees or their minor children to be the insurance object.

What is insured?

Insurance object: The Insured

- ✓ This insurance covers the sum insured stated in the Policy Document if, during the validity of the insurance cover, it is detected that the Insured has an illness or defect mentioned in the Terms and Conditions or if the Insured undergoes a medical procedure listed in the Terms and Conditions. The sum insured is paid separately for each diagnosis made or medical procedure performed as listed in this Clause, but no more than once for each group of diagnoses or medical procedures.
- ✓ Compensable groups of diagnoses and medical procedures are the following: malignant tumour, benign tumour of the central nervous system and cranial nerves, motor neuron disease, multiple sclerosis, myocardial infarction (heart attack), cerebral haemorrhage or cerebral infarction, aortic aneurysm and/or aortic dissection, severe burns, organ transplant and heart surgery. More detailed criteria for compensability for each group of diagnoses and medical procedures are described in the Terms and Conditions.

Insurance object: Insured's child

- ✓ This insurance covers the sum insured stated in the Policy Document if, during the validity of the insurance cover, an under-18-year-old child of the Insured is diagnosed with an illness or defect mentioned in the Terms and Conditions. The sum insured is paid separately for each diagnosis, but no more than once for each group of diagnoses. The sum insured is paid to the person insured who is the child's guardian.
- ✓ Compensable groups of diagnoses are the following: malignant tumour, type 1 diabetes, renal failure, amputation, severe brain damage and severe burns. More detailed criteria for compensability for each group of diagnoses are described in the Terms and Conditions.

What is not insured?

Compensation is not paid for:

- ✕ a loss event which has been caused by the Insured's / child's consumption of alcohol or other intoxicating substance or abuse of medication. Nor is compensation paid for poisoning, addiction or other consequences due to the use of alcohol, medication, drugs, nicotine or other substances, or the treatment of such conditions.

Are there any restrictions on cover?

- ! A requirement for the payment of compensation is that the accident has occurred, and that the illness has been diagnosed during the validity of the insurance cover.
- ! A requirement for the payment of compensation is that the Insured / child is alive for at least 24 hours after the diagnosis has been confirmed
- ! If a diagnosis listed in the Terms and Conditions leads to another diagnosis mentioned in the Terms and Conditions, compensation is paid based only on the first diagnosis.

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Where am I covered?

- ✓ The insurance cover is valid worldwide.

What are my obligations?

- ✓ To provide correct information when taking out an insurance policy.
- ✓ During the validity of the insurance, to notify If without delay regarding any change, error or defect concerning the insurance information.
- ✓ During the validity of the insurance, to notify if a new employee enters the insurance (beginning of a new employment) or if an employee exits the insurance (end of employment).
- ✓ To give the requested information when applying for a compensation.
- ✓ To follow the safety regulations given by If.
- ✓ To pay the insurance premium on time.

When and how do I pay?

- ✓ If will send an insurance premium invoice which shall be paid at the latest on the due date in the bank account given in the invoice.
- ✓ When the insurance policy is taken out, also the number of instalments and invoice delivery method are agreed upon.

When does the cover start and end?

- ✓ The insurance begins when the policyholder and If agree upon the start of it and is valid until further notice.
- ✓ The insurance is terminated when the policyholder cancels the insurance.
- ✓ In some situations, also If has the right to cancel the insurance (e.g. negligence to pay a due insurance premium).
- ✓ However, the cover for an insured person ends no later than from the moment that the Insured's employment with the Policyholder ends or the Insured's entrepreneurship ends or at the end of the insurance period during which the Insured has reached the age of 65.

How do I cancel the contract?

- ✓ The insurance can be cancelled by notifying our company in writing.
- ✓ In the event of cancellation, the termination date of the insurance is determined as described in the offer and in the insurance policy.