



Accident insurance

Terms and conditions of disability insurance cover

Valid from 06.06.2016

The terms and conditions of disability insurance cover are valid together with the general terms and conditions. In the event of any ambiguities or discrepancies, the terms and conditions for disability insurance cover are adhered to.

Definitions

Benefit is an amount of money calculated from the sum insured and paid by the insurer to the insured person upon an insured event.

Disability is functional impairment of the insured person's body part or sense organ lasting longer than a year.

Insured event is the insured person's disability, caused by an accident that has occurred during the validity of insurance cover.

Insurance cover is the obligation of the insurer to pay the insured person a benefit if an insured event occurs.

Accident is an unexpected and unforeseeable event that has occurred due to an external impact beyond the control of the insured person, including heat stress, carbon monoxide poisoning or tick bite.

Validity of insurance cover

1. Insurance cover commences on the date indicated in the policy.
2. Insurance cover is valid for one year and is automatically extended on the same terms for the following insurance year. A wish to alter the terms of the insurance contract or to terminate insurance cover is communicated in writing at least 30 days before the expiry of insurance cover.
3. When insurance cover is added to an existing insurance contract, it is at first valid until the end of the insurance year. Then, the validity of insurance cover coincides with the insurance year under the insurance contract.
4. Insurance cover is terminated:
 - upon the disbursement of the sum insured;
 - upon expiry of the insurance contract;
 - upon the insured person turning 71;
 - upon its cancellation.

Sum insured

5. The sum insured is agreed between the policyholder and the insurer before the commencement of insurance cover.
6. The policyholder may request a change to the sum insured. An application for a change is submitted at least one month before the desired change taking effect. The new premium is calculated on the basis of the rates applicable as at the time of the change.

Calculation of benefit

7. Benefit is calculated as a per cent of the sum insured depending on the extent of functional impairment.
8. In the event of total functional impairment, the amount of benefit payable is as follows.

Functional impairment	Benefit amount, % of the sum insured
loss of an arm from the shoulder joint	70%
loss of an arm from above the elbow joint	65%
loss of an arm from below the elbow joint	60%
loss of a hand up to the wrist	55%
loss of a thumb	20%
loss of a forefinger	10%
loss of a finger	5%
loss of a leg from the upper third part of the thigh	75%
loss of a leg from above the knee	70%
loss of a leg from the lower third	50%
loss of a foot	45%
loss of a big toe	5%
loss of a toe	3%
loss of vision in one eye	50%
loss of hearing in one ear	30%
loss of the sense of smell	5%
loss of the sense of taste	5%
loss of speech	50%

9. In the event of partial functional impairment, benefit is calculated proportionally from the benefit amount specified in the table.
10. In case of functional impairment of a body part or sense organ not specified in the table, benefit is calculated solely on the basis of medical assessment, not taking into account the insured person's occupation, hobbies or lifestyle.
11. When benefit for multiple functional impairments resulting from a single accident is calculated, the percentages specified in the table are added up. The maximum benefit amount is 100% of the sum insured.
12. The maximum amount of benefits for multiple accidents that have occurred within an insurance year is 100% of the sum insured.
13. Any functional impairment that has arisen before the insured event is deducted from the benefit.

Obligations of the insured person in the event of an accident

14. If an insured event occurs, the insured person must consult a physician and notify insurer at the first opportunity.
15. The insured person must undergo medical examination at the insurer's request.

Exclusions

16. The insurer may refuse to pay or it may reduce benefit if the policyholder or insured person has:
 - knowingly provided incorrect or incomplete information at the time of the conclusion of the insurance contract or of an increase in insurance cover, and this increases the insured risk;
 - provided incorrect or incomplete information about the insured event.
17. The insurer may refuse to pay or it may reduce the benefit if the insured event has been caused by:
 - alcohol or a narcotic, psychotropic or other toxic substance. The above also includes an accident with a motor vehicle driven by the insured person if the concentration of the above substance in the insured person's body exceeded the limit set in the legislation of the country of location of the accident;
 - self-mutilation or suicide attempt;
 - radioactive radiation;
 - war, act of a foreign enemy, civil war, rebellion, participation in a revolution or civil disturbances;
 - disregard for the treatment or instructions of a physician;
 - unauthorised treatment procedure or ingesting of medicines;
 - intentional illegal action of the insured person or the policyholder, including driving a motor vehicle without a licence.

18. The insurer may refuse to pay or it may reduce the benefit if the insured event has been caused by any of the following activities not indicated in the policy:
- dangerous hobby such as auto or motor sport, mountain climbing or alpinism, diving deeper than 40 metres , parachuting, caving, aeronautics, except as a passenger or crew member aboard a licensed passenger airplane;
 - professional sport, participation in competitions or attempts to break a record.
19. The following shall not be an insured event:
- accident resulting from the insured person's illness, disability or mental condition;
 - health impairment resulting from the treatment of or an operation performed on the insured person, except for health impairment resulting from an accident;
 - infection, including one caused by a pathogenic agent entering the body through a lesion in the skin or mucous membrane;
 - osteochondrosis of the vertebral column, rupture or prolapse of intervertebral cartilaginous discs, radiculopathy, pain syndromes resulting from muscles in the back; anterior abdominal wall, inguinal or diaphragmatic herniations.