



Private Healthcare Insurance for Private Persons

General terms and conditions, 1 January 2009

Joint insurance terms and conditions for:

- Lifeline Basic – without referral
- Lifeline Access – without referral
- Lifeline Plus
- Lifeline Excellent
- Lifeline Basic – with referral
- Lifeline Access – with referral

How to contact Skandia

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Who is the insurer?

The insurer is Skandia Insurance Company Ltd (publ), referred to in these terms and conditions as Skandia. Skandia's address can be found on the first page of these terms and conditions.

Definitions

Accidental injury

An accidental injury is a bodily injury sustained by the insured involuntarily as the result of a sudden, external event (external bodily trauma – an accident).

An accidental injury is considered to have occurred at the point in time at which the accident took place.

Diagnosis

Determination of an illness, accident, impairment of body function.

Healthcare

By healthcare is meant in these terms and conditions medical measures that include examination, treatment, consultation or nursing.

Illness

By illness is meant a deterioration of health condition that is not to be considered as an accidental injury as defined above. An illness is considered to have been incurred on the day that the insured's physical or mental functional ability deteriorated as a result of the illness. Illness is not considered to include voluntarily inflicted bodily harm.

In-patient hospital care

By in-patient hospital care is meant in these terms and conditions healthcare that is provided when the patient has been admitted to the care facility. In-patient hospital care does not include leaves from such facility, however.

Insurance event

By insurance event is an accident or illness that occurs during the insurance period. An insurance event shall be considered to have occurred

- at the point in time at which an accident occurred, or
- at the point in time at which the insured's mental or physical function deteriorated due to an illness. Several illnesses with a medical connection are considered to be a single insurance event. However, this does not apply if the insured has been symptom-free and has not been receiving care or medication for more than 12 consecutive months. In such case, a new insurance event is considered to have occurred.

Insurance period

The insurance period is one year from the date of inception, unless otherwise stated in the statement of policy. At the

expiration of the insurance period, the insurance contract is renewed for another year unless the contract has been cancelled prior to that.

Insured

By insured is meant the person whose health the insurance covers.

Policyholder

By policyholder is meant the party entering into the insurance contract with Skandia Insurance Company Ltd (publ).

Premium period

By premium period is meant in these terms and conditions the time for which a premium has been paid.

Examples:

- If the premium is paid monthly, then the premium period is one month.
- If the premium is paid annually, the premium period is one year.

Primary care

Public or private health and medical care that is the initial care level and which covers basic medical examination, treatment, X-ray examination and care as well as preventive work and rehabilitation with restriction with respect to illness, age or patient groups. The term primary care also includes company health services.

Referral

By referral is meant a document which serves as an order of services or a request to take over care responsibility for a patient, e.g., a referral for additional examination or treatment.

Scandinavia

Scandinavia is defined in these terms and conditions to include Denmark (excl. the Faeroe Islands and Greenland), Norway and Sweden.

Specialist care

Public or private health and medical care that is the second care level and which covers medical examination, treatment, and care that requires a more specialised approach and greater technical and human resources than primary care. The care shall be performed by a physician with specialist expertise upon referral from a primary care physician.

Symptom

By symptom is meant signs that a disease exists or is about to break out.

Zone

The country in which the insured is a resident or temporarily residing for more than 45 days.

Zone 1 = Scandinavia (Denmark, Norway and Sweden)

Zone 2 = Rest of Europe

Zone 3 = Rest of world

Private healthcare insurance for private persons

1. Joint stipulations

These joint stipulations apply for:

- Lifeline Basic – without referral
- Lifeline Access – without referral
- Lifeline Plus
- Lifeline Excellent
- Lifeline Basic – with referral
- Lifeline Access – with referral

The insurance statement of policy states which of the above types of insurance the insured is covered by.

1.1 Who can be insured?

A private person who has turned 16 years of age can be insured. For persons under the age of 18, written consent is required from their guardian.

The person must be a resident of Sweden with an officially registered residence.

1.2 Is proof of good health required?

The insurance can only be contracted upon completion of a Comprehensive health declaration. The health declaration shall be submitted by the insurance applicant.

1.3 How is proof of acceptance as an insured notified?

The policyholder receives an insurance statement of policy which describes the scope of the insurance, information on how the insurance works, and a personal card. The card is sent to the insured after the premium has been paid.

1.4 Who is insured?

The insurance applies for the person or persons named in the insurance statement of policy.

1.5 Where is the insurance valid?

The insurance is valid for healthcare in zone 1 (Scandinavia). The insurance statement of policy states if the insurance is valid in another zone.

1.6 When does the insurance come into force?

The insurance, i.e., Skandia's liability, comes into force on the day after the date on which the policyholder applied for the insurance, under the condition

- that the application documents are complete,
- that the insurance, according to the assessment rules applied by Skandia, can be granted with normal terms and conditions, and
- that it is not stated in the application documents or in some other way that the insurance shall come into force at a later date.

If the insurance cannot be granted at normal terms and conditions, but only with special terms and conditions, such as with a higher premium or with certain restrictions, then the insurance does not come into force until Skandia has made

an offer for insurance at these special terms and conditions, and the policyholder has accepted the offer by paying the insurance premium.

Skandia's liability remains in force until the final day of the insurance period.

1.7 Insurance cover

The insurance applies for illness or accidental injury – insurance events – that occur during the insurance period.

1.8 Liability period

1.8.1 What is the liability period?

The liability period is the time during which benefits can be paid for each insurance event.

1.8.2 How long is the liability period?

The liability period is always at least one year from the date of the insurance event. The liability period is thereafter extended for one premium period at a time, under the condition that the premium is paid and that the insurance is in force. If the insurance lapses, then the extended liability period also ceases and thus also any benefits.

A new insurance event is considered to have occurred when the insured has been symptom-free and has not been receiving care or medication for at least 12 consecutive months for a previous condition.

1.9 Is the insurance amount limited?

The insurance carries an unlimited insurance amount for the treatment of illnesses and accidental injuries.

1.10 Is there any deductible amount?

The insurance has no deductible amount.

1.11 What do I do in the event of an illness or accidental injury during a stay in Scandinavia?

In the event of illness or accidental injury, the insured should contact Skandia Healthcare Planning.

Benefits that are covered by the insurance, such as healthcare, travel, lodging, or medicines, must be approved by Skandia in advance.

1.12 How are benefits and continued treatment determined?

A claim for illness or accidental injury shall always be submitted to Skandia as soon as possible.

The insured shall make sure that Skandia receives the requested information and certificates that Skandia judges are necessary to be able to determine the right to benefits and continued treatment.

The cost for certificates and examinations requested by Skandia will be paid for by Skandia.

The insured shall bear the cost of translation of any documents to Swedish.

Claims for benefits shall be verified by original receipt, which shall be submitted to Skandia together with the claim. Any care must be approved in advance by Skandia. Approved costs can be invoiced directly to Skandia by the care provider.

If the insurance has lapsed and an insurance event has occurred during the insurance period, a claim must be filed with Skandia as soon as possible. If treatment has been approved or begins before the expiration of the insurance, costs for the treatment will be compensated, however not longer than until the point in time specified in point 1.8.2.

The insured must give his or her consent to Skandia, upon request, to obtain information from care providers, hospitals, Försäkringskassan or other insurance institution.

1.13 Healthcare guarantee

The insurance gives the insured the right to a healthcare guarantee. By healthcare guarantee is meant that, in the event of an indemnifiable insurance event that requires an operation or admission to a hospital for in-patient hospital care, the insured has the right to be admitted to a hospital in Skandia's network within 20 days. If the healthcare guarantee is not met, the insured will receive SEK 300 per day until the day of admission for operation or in-patient hospital care, for a maximum of 30 days per insurance event. If the insured is admitted by a care provider on several occasions prior to an operation or for in-patient hospital care, the healthcare guarantee applies only for the first occasion on which the insured was admitted.

The term of the healthcare guarantee begins from the date

- that Skandia has received complete medical documentation,
- that the right to operation or in-patient hospital care was acquired, and
- when the person claiming the benefits has fulfilled his/her obligations according to points 1.11 and 1.12.

The healthcare guarantee does not apply

- if an operation or in-patient hospital care must be delayed for medical reasons,
- if the insured does not accept an offered time for an operation or admission for in-patient hospital care, or
- if the insured chooses another operation or in-patient hospital care alternative.

The healthcare guarantee applies only for operations and in-patient hospital care provided by a healthcare provider in Scandinavia referred by Skandia.

1.14 The insurance contract

The stipulations indicated in the following apply for the insurance contract:

- the insurance statement of policy,
- these general insurance terms and conditions, and
- the provisions of the Insurance Contracts Act and Swedish law in general.

The insurance period is one year. If another period has been agreed upon, the insurance period will be stated in the insurance statement of policy.

The insurance contract can lapse prematurely and be amended during the insurance period in cases indicated in the Insurance Contracts Act.

If the insurance contract is not cancelled, the contract will be renewed at the terms indicated by Skandia for one year at a time. Skandia thus has the right to change the insurance terms and conditions and premiums. If a change is made, it will apply with effect from the next annual due date. Skandia shall notify the policyholder about any changes not later than when an invoice demanding payment of premium is sent out.

Skandia also has the right in general to amend the terms and conditions of the insurance contract during the insurance period if the conditions for the contract change as a result of changed legislation or other statute, changed application of law or other statute, or by decree of an authority.

The same applies if the policyholder or the insured has grossly neglected their obligations or other, special reasons necessitate a change. Such a change takes effect after Skandia has sent notification of the new terms and conditions, or at such point in time as required by law.

Any disputes arising in connection with this condition shall be settled in accordance with Swedish law.

1.14.1 When do premiums need to be paid?

The initial premium shall be paid not later than 14 days from the day Skandia has sent an invoice demanding payment of the premium.

Premiums for subsequent premium periods shall be paid not later than one month from the day Skandia has sent an invoice demanding payment of the premium. However, if the premium period is not longer than one month, the premium shall be paid on the first day of the insurance period.

1.14.2 Cancellation due to delinquent premium payment

If the premium is not paid on time and if the delay is for a significant period of time, Skandia may cancel the insurance.

Such cancellation will take effect 14 days after the day notification of cancellation was sent out, unless the premium is paid during this grace period.

1.14.3 Reinstatement

If a cancellation according to point 1.14.2 has taken effect and the delay does not pertain to the initial premium for a policy, the policy will be reinstated to its previous scope if the outstanding premium is paid within three months from the expiration of the grace period indicated in point 1.14.2. If the insurance is reinstated, Skandia's liability comes into force starting with the day after the day on which the premium was paid.

1.14.4 The policyholder's and insured's disclosure obligation

The policyholder and the insured are obligated, upon Skandia's request, to disclose information that may have bearing on whether the insurance will be sold, expanded or renewed. The policyholder and the insured shall provide correct and complete answers to Skandia's questions. If any information that is provided is false or incomplete, the stipulations of the Insurance Contracts Act apply. If the insurance is cancelled or amended because Skandia has been found to be free from liability, Skandia has the right to demand recompense from the policyholder or the insured for any

benefits paid. Premiums paid in for the time up until the date on which the insurance lapses or is amended will not be repaid.

1.14.5 Changed conditions

If the conditions that form the basis of the insurance policy are changed, the policyholder or the insured must notify Skandia about such. If such notification is not made, Skandia's liability for insurance events may be fully or partly limited.

1.14.6 Date for payment of claims and interest stipulations

Payment of benefits shall be made not later than one month after the right to compensation arises, and when the person making the claim for benefits has fulfilled his/her obligations in accordance with points 1.11 and 1.12 above. However, if there is reason to investigate if any information that has been provided pursuant to the insurance contract is false or incomplete, payment does not need to be made until one month after such an investigation has been concluded. The investigation shall be performed expediently.

If payment is made later than what is said above, Skandia will pay interest in accordance with the Interest Act. Other than this, Skandia is not liable for loss that may arise if an investigation of an insurance event or payment is delayed.

Interest is not paid if the combined interest for insurance amounts attributable to one and the same insurance event should be below a half per cent of the Price Base Amount for the year in which payment is made.

1.14.7 Lapsing of the insurance due to the reaching of maximum age

The insurance is valid until the insured reaches the maximum age indicated in the insurance statement of policy.

1.14.8 Statute of limitations

A party that wants to make a claim for insurance benefits must commence action against Skandia within three years after gaining knowledge that a claim could be made, and in all cases within ten years from the date that such claim could first be made. Otherwise, the right to benefits expires. If a claim has been made to Skandia within this period of time, the grace period for the first sentence above is always six months from the time Skandia has declared that it has taken a final position with respect to the claim.

1.15 What doesn't the insurance cover?

1.15.1 Illness and accidental injury that occurred before the insurance came into force

The insurance does not cover illness or accidental injury that the insured had symptoms of or received care for or medication for before the insurance came into force.

1.15.2 Certain illnesses and accidental injuries

The insurance does not cover:

- illnesses or accidental injuries caused by alcohol, other intoxicants, sleeping medication or narcotic substances,
- illnesses or accidental injuries caused by the insured's participation in any of the following:

- sports in which the insured received income from such participation (contributions from sponsors are equated with income),
- elite sports, i.e., sports at the championship level (e.g., division II or higher) and any practice activities required for such,
- competitive events or training at a sports-oriented secondary school, community college, college or other similar sports-oriented education,
- "adventure sports", "adventure" expeditions, or similar,
- illnesses covered by the Communicable Diseases Act,
- injury sustained from nuclear explosions or radioactive radiation that occurs in connection with a military activity that the insured is engaged in.

1.15.3 Certain care and certain treatment, etc.

The insurance does not cover:

- emergency medical care (however, the insurance covers patient co-payments within the limit of the medical cost ceiling level for emergency care, under the condition that the insurance was purchased with the condition *without referral*),
- care for dementia-related diseases, i.e., pathological changes in brain tissue,
- organ transplants,
- dental treatment, treatment of dental diseases or dental injury,
- surgical operations including laser surgery designed to correct vision,
- treatment of snoring whereby upon examination it is learned that the insured is not suffering from sleep apnoea,
- treatment of, and complications in connection with, pregnancy, childbirth, abortion or fertility examinations, or treatment of infertility,
- medical check-ups during pregnancy,
- cosmetic treatments and operations or consequences of such to the extent that these are not the result of an indemnifiable illness or accident,
- massage,
- treatment of obesity if the insured has a BMI (Body Mass Index) value of less than 35.

1.15.4 Certain expenses

The insurance does not cover:

- costs for doctors' certificates that have not been requested by Skandia.

1.15.5 Missed or late cancellation of appointments, treatments or operations

The insurance does not cover:

- healthcare costs that arise when the insured misses a booked appointment, treatment or operation. The same also applies if the insured cancels a booked appointment, treatment or operation *too late*. What is meant by too late is stated in Skandia's confirmation that is provided to the insured prior to the appointment, treatment or operation. The care costs in such cases shall be paid for by the insured.

1.15.6 Treatment by unlicensed healthcare providers and treatments that are not based on scientific grounds

The insurance does not cover:

- treatments performed by unlicensed healthcare providers,
- alternative forms of therapy that are not based on scientific grounds and tested experience and which are not under the supervision of the National Swedish Board of Health and Welfare.

1.15.7 Prescription glasses, medical devices, contraceptives

The insurance does not cover:

- prescription glasses and contact lenses,
- contraceptives,
- hearing aids,
- other medical devices intended for permanent use.

1.15.8 Costs covered by other means

The insurance does not cover:

- costs that can be covered by medical malpractice insurance or pharmaceutical insurance. The same applies for other compensation for injury incurred in connection with health or medical care, e.g. damages for an injury incurred in connection with an examination, treatment, advice, nursing or pharmaceuticals,
- costs compensated by other means according to law, statute, convention, other insurance or collective agreement.

1.15.9 Senior care

The insurance does not cover:

- senior care, i.e., care aimed at providing senior citizens with financial security, housing, medical devices and personal nursing, e.g., home care, “home Samaritans”, home healthcare and senior living.

1.16 Are there other limitations?

1.16.1 Force majeure

Skandia is not liable for loss which may arise in the event there is a delay in the investigation of an insurance event or in the payment of benefits as a result of war, political unrest, legal statute, actions of authorities or labour conflict.

1.16.2 War and political unrest

The insurance does not apply for illnesses that are discovered within one year after staying in a country in which there is a state of war or unrest and which can be considered to be attributable to such war or unrest.

If war or unrest should break out while the insured is staying in the area, the insurance applies during the first month under the condition that he/she does not participate in such war or unrest.

1.16.3 Are costs for legal counsel reimbursed?

Costs for legal counsel are not reimbursed.

2. Lifeline Basic – without referral

The insurance can be purchased with or without referral. See the insurance statement of policy.

In addition to what is stipulated in the *Joint stipulations*, point 1, the following terms and conditions apply for Lifeline Basic – without referral.

2.1 What does the insurance cover?

2.1.1 Healthcare advice

The insurance gives the insured and the insured’s children living at home the right to healthcare advice from a registered nurse 24 hours a day by phone.

2.1.2 Healthcare planning

The insured has access to healthcare planning.

By healthcare planning is meant that a registered nurse provides assistance in planning and booking healthcare within Skandia’s network.

2.1.3 Private medical care

The insured has access to examinations and treatment performed by doctors at a Skandia-affiliated healthcare clinic.

Treatment by a doctor must always be booked via Skandia Healthcare Planning.

2.1.4 Pre-operative examinations, operations and in-patient hospital care

The insurance gives the insured access to

- pre-operative examinations
- surgical operations
- in-patient hospital care.

Pre-operative examinations, surgical operations and in-patient hospital care are provided at any of the hospitals or clinics included in Skandia’s network or at any other hospital which, from a therapeutic standpoint, is more suitable.

The right to an operation or in-patient hospital care commences when a medical investigation has been completed and the attending physician has issued a referral for an operation or in-patient hospital care.

The care must be approved and booked in advance by Skandia.

2.1.5 Aftercare – rehabilitation

The insurance covers the costs of necessary and reasonable aftercare and rehabilitation in connection with an indemnifiable operation or in-patient hospital care in accordance with point 2.1.4.

Compensation is paid for a maximum of one aftercare or rehabilitation period for each insurance event.

The aftercare and rehabilitation must have been preceded by a medical investigation and referral from the attending physician, and shall be performed at the insured’s town/city of residence if possible. However, if it is urgent from a therapeutic perspective, they can be performed at another location.

Compensation will be paid only for costs approved in advance by Skandia.

2.1.6 Patient co-payments

The insurance covers costs for publicly financed healthcare (public healthcare patient co-payments) within the scope of the so-called medical cost ceiling level (*högkostnads-*

skyddet). Compensation is provided up to the medical cost ceiling level.

2.1.7 Treatment by physiotherapist, naprapath or chiropractor

The insurance covers costs for treatment by a physiotherapist, naprapath or chiropractor upon referral from an attending physician. Such referral may not be older than six months. Compensation is paid for a maximum of ten treatment sessions for each insurance event and year. Treatment must be provided by any of the physiotherapists, naprapaths or chiropractors included in Skandia's network.

2.1.8 Travel and lodging

The insurance covers necessary and reasonable travel and lodging costs incurred by the insured in connection with an indemnifiable treatment.

In addition, in cases where the insured requires a major operation, the insurance can pay compensation for travel and lodging costs incurred by a close relative (applies for only one person). Prior to the start of any travel, Skandia must be contacted for approval.

By major operation is meant an operation that is judged by Skandia to be medically complicated and require extensive care

2.1.9 Medical devices

The insurance covers costs for medical devices prescribed by an attending physician which can be considered to be reasonable and necessary for the healing of the illness or accidental injury.

No compensation is paid for medical devices intended for permanent use. The cost must be approved in advance by Skandia.

3. Lifeline Access – without referral

The insurance can be purchased with our without referral. See the insurance statement of policy.

In addition to what is stipulated in the *Joint stipulations*, point 1, the following terms and conditions apply for Lifeline Access – without referral.

3.1 What does the insurance cover?

3.1.1 Healthcare advice

The insurance gives the insured and the insured's children living at home the right to healthcare advice from a registered nurse 24 hours a day by phone.

3.1.2 Healthcare planning

The insured has access to healthcare planning.

By healthcare planning is meant that a registered nurse provides assistance in planning and booking healthcare within Skandia's network.

3.1.3 Private medical care

The insured has access to examinations and treatment performed by doctors at a Skandia-affiliated healthcare clinic.

Treatment by a doctor must always be booked via Skandia Healthcare Planning.

3.1.4 Pre-operative examinations, operations and in-patient hospital care

The insurance gives the insured access to

- pre-operative examinations
- surgical operations
- in-patient hospital care.

Pre-operative examinations, surgical operations and in-patient hospital care are provided at any of the hospitals or clinics included in Skandia's network or at any other hospital which, from a therapeutic standpoint, is more suitable.

The right to an operation or in-patient hospital care commences when a medical investigation has been completed and the attending physician has issued a referral for an operation or in-patient hospital care. The care must be approved and booked in advance by Skandia.

3.1.5 Aftercare – rehabilitation

The insurance covers the costs of necessary and reasonable aftercare and rehabilitation in connection with an indemnifiable operation or in-patient hospital care in accordance with point 3.1.4.

Compensation is paid for a maximum of one aftercare or rehabilitation period for each insurance event.

The aftercare and rehabilitation must have been preceded by a medical investigation and referral from the attending physician, and shall be performed at the insured's town/city of residence if possible. However, if it is urgent from a therapeutic perspective, they can be performed at another location.

Compensation will be paid only for costs approved in advance by Skandia.

3.1.6 Patient co-payments

The insurance covers costs for publicly financed healthcare (public healthcare patient co-payments) within the scope of the so-called medical cost ceiling level (*högkostnads-skyddet*). Compensation is provided up to the medical cost ceiling level.

3.1.7 Treatment by physiotherapist, naprapath or chiropractor

The insurance covers costs for treatment by a physiotherapist, naprapath or chiropractor upon referral from an attending physician. Such referral may not be older than six months. Compensation is paid for a maximum of ten treatment sessions for each insurance event and year. Treatment must be provided by any of the physiotherapists, naprapaths or chiropractors included in Skandia's network.

3.1.8 Travel and lodging

The insurance covers necessary and reasonable travel and lodging costs incurred by the insured in connection with an indemnifiable treatment.

In addition, in cases where the insured requires a major operation, the insurance can pay compensation for travel and lodging costs incurred by a close relative (applies for only

one person). Prior to the start of any travel, Skandia must be contacted for approval.

By major operation is meant an operation that is judged by Skandia to be medically complicated and require extensive care.

3.1.9 Medical devices

The insurance covers costs for medical devices prescribed by an attending physician which can be considered to be reasonable and necessary for the healing of the illness or accidental injury.

No compensation is paid for medical devices intended for permanent use. The cost must be approved in advance by Skandia.

3.1.10 Treatment by psychologist or psychotherapist

The insurance covers costs for treatment by a psychologist/psychotherapist under a referral from an attending physician. The referral may not be older than six months. Compensation is paid for a maximum of ten sessions for each insurance event at any of the psychologists/psychotherapists included in Skandia's network.

3.1.11 Postoperative home assistance

The insurance gives the insured the right to a maximum of ten hours (incl. travel time) of medically motivated and reasonable home assistance for a period of 14 days after the insured has returned home from an indemnifiable operation. This is subject to the condition that this service can be obtained from an established firm in the insured's town/city of residence. The right to home assistance must be approved in advance by Skandia.

3.1.12 Vaccination advice

The insurance gives the insured and the insured's spouse/cohabitant and children living at home the right to vaccination advice in connection with travel abroad or stationing abroad. By vaccination advice is meant information about the country's local disease conditions and vaccination rules.

The insurance does not cover the cost of vaccines or other costs for vaccinations.

4. Lifeline Plus

In addition to what is stipulated in the *Joint stipulations*, point 1, the following terms and conditions apply for Lifeline Plus.

4.1 What does the insurance cover?

4.1.1 Healthcare advice

The insurance gives the insured and the insured's children living at home the right to healthcare advice from a registered nurse 24 hours a day by phone.

4.1.2 Healthcare planning

The insured has access to healthcare planning.

By healthcare planning is meant that a registered nurse provides assistance in planning and booking healthcare

within Skandia's network.

4.1.3 Private medical care

The insured has access to examinations and treatment performed by doctors at a Skandia-affiliated healthcare clinic.

Treatment by a doctor must always be booked via Skandia Healthcare Planning.

4.1.4 Pre-operative examinations, operations and in-patient hospital care

The insurance gives the insured access to

- pre-operative examinations
- surgical operations
- in-patient hospital care.

Pre-operative examinations, surgical operations and in-patient hospital care are provided at any of the hospitals or clinics included in Skandia's network or at any other hospital which, from a therapeutic standpoint, is more suitable.

The right to an operation or in-patient hospital care commences when a medical investigation has been completed and the attending physician has issued a referral for an operation or in-patient hospital care. The care must be approved and booked in advance by Skandia.

4.1.5 Aftercare – rehabilitation

The insurance covers the costs of necessary and reasonable aftercare and rehabilitation in connection with an indemnifiable operation or in-patient hospital care in accordance with point 4.1.4.

Compensation is paid for a maximum of one aftercare or rehabilitation period for each insurance event.

The aftercare and rehabilitation must have been preceded by a medical investigation and referral from the attending physician, and shall be performed at the insured's town/city of residence if possible. However, if it is urgent from a therapeutic perspective, they can be performed at another location.

Compensation will be paid only for costs approved in advance by Skandia.

4.1.6 Patient co-payments

The insurance covers costs for publicly financed healthcare (public healthcare patient co-payments) within the scope of the so-called medical cost ceiling level (*högkostnads-skyddet*). Compensation is provided up to the medical cost ceiling level.

4.1.7 Treatment by physiotherapist, naprapath or chiropractor

The insurance covers costs for treatment by a physiotherapist, naprapath or chiropractor upon referral from an attending physician. Such referral may not be older than six months.

Compensation is paid for a maximum of ten treatment sessions for each insurance event and year. Treatment must be provided by any of the physiotherapists, naprapaths or chiropractors included in Skandia's network.

4.1.8 Treatment by a speech therapist

The insurance covers costs for treatment by a speech therapist under a referral from an attending physician. The referral may not be older than six months. Compensation is paid for a maximum of ten treatment sessions for each insurance event. Treatment must be provided by any of the speech therapists included in Skandia's network.

4.1.9 Travel and lodging

The insurance covers necessary and reasonable travel and lodging costs incurred by the insured in connection with an indemnifiable treatment.

In addition, in cases where the insured requires a major operation, the insurance can pay compensation for travel and lodging costs incurred by a close relative (applies for only one person). Prior to the start of any travel, Skandia must be contacted for approval.

By major operation is meant an operation that is judged by Skandia to be medically complicated and require extensive care.

4.1.10 Medical devices

The insurance covers costs for medical devices prescribed by an attending physician which can be considered to be reasonable and necessary for the healing of the illness or accidental injury.

No compensation is paid for medical devices intended for permanent use. The cost must be approved in advance by Skandia.

4.1.11 Treatment by psychologist or psychotherapist

The insurance covers costs for treatment by a psychologist/psychotherapist under a referral from an attending physician. The referral may not be older than six months. Compensation is paid for a maximum of ten sessions for each insurance event at any of the psychologists/psychotherapists included in Skandia's network.

4.1.12 Postoperative home assistance

The insurance gives the insured the right to a maximum of ten hours (incl. travel time) of medically motivated and reasonable home assistance for a period of 14 days after the insured has returned home from an indemnifiable operation. This is subject to the condition that this service can be obtained from an established firm in the insured's town/city of residence. The right to home assistance must be approved in advance by Skandia.

4.1.13 Vaccination advice

The insurance gives the insured and the insured's spouse/cohabitant and children living at home the right to vaccination advice in connection with travel abroad or stationing abroad. By vaccination advice is meant information about the country's local disease conditions and vaccination rules.

4.1.14 Vaccinations

The insured can receive the following vaccinations through the insurance:

- for travel abroad, vaccinations in cases where it is medically warranted for the destination

- influenza vaccination
- TBE vaccination

4.1.15 Pharmaceutical costs

The insurance covers costs for pharmaceuticals (prescription medicines, patient co-payments) within the scope of the so-called medical cost ceiling level (*högkostnadsskyddet*). Compensation is provided up to the medical cost ceiling level.

4.1.16 Eye examinations

The insurance entitles the insured to one eye examination per insurance year by a licensed optometrist. The insured shall pay for the cost of the eye examination him-/herself to the optometrist. Skandia will reimburse the cost of the eye examination after a claim and original receipt is sent to Skandia.

4.1.17 Second opinion

The insurance gives the insured the right to a *second opinion*, entailing that an insured who is facing a difficult medically related decision has the right in some cases to seek a second medical opinion from a specialist.

The insured can have the right to a second opinion in the following situations:

- for a life-threatening or especially serious illness or injury, or
- if he or she is facing the decision of subjecting him-/herself to an especially risky treatment, i.e., if the treatment itself could be life-threatening or cause enduring pain and suffering in addition to the disease/condition being treated.

Skandia Healthcare Planning determines if the insured has the right to a second opinion.

4.2 Special stipulations – Lifeline Plus

4.2.1 Who can be insured?

In addition to what is stipulated in the *Joint stipulations*, point 1.1, the following persons can be insured:

4.2.1.1 Private persons residing outside Sweden

A private person who is a Swedish citizen and residing abroad can be insured. The person must have resided in Sweden with an officially registered address at least two years before applying for the insurance.

If the applicant was not residing in Sweden with an officially registered address for at least two years before applying for the insurance, Skandia will require a health examination that is performed in Sweden. The applicant shall bear the cost of the examination, which will be used as documentation for review of the insurance application.

4.2.2 Illness or accidental injury during stays outside of the zone that applies for the insurance

If the insured suffers an acute illness or accidental injury during a temporary stay outside of zone stipulated in the insurance statement of policy, the insurance applies abroad during the first 45 days starting from the date of departure.

The insurance covers necessary and reasonable costs for care by a doctor or hospital. Costs for emergency care, prescription medicines, and necessary and reasonable travel to and from the care-giver at the place of visit are also covered by the insurance.

For stays abroad or temporary stays outside of the zone that applies for the insurance, the insured shall pay for the doctor's care, prescription medicines and travel. Skandia will then reimburse the insured after receiving a claim together with the original receipts.

Stays abroad lasting longer than 45 consecutive days require that the insurance is expanded to apply for zone 2 or zone 3.

For more extensive care, such as hospitalisation or a major operation, contact is to be made with SOS International in Copenhagen tel. +45-38 48 89 95.

If it is not advisable to travel home for medical reasons, the insurance applies until the insured's condition has improved to such a degree that the insured can travel home. In such case, a certificate from the attending physician is required in order to receive benefits. The insurance does not cover costs for travel home in connection with an illness or accident during a stay abroad.

5. Lifeline Excellent

In addition to what is stipulated in the *Joint stipulations*, point 1, the following terms and conditions apply for Lifeline Excellent.

5.1 What does the insurance cover?

5.1.1 Healthcare advice

The insurance gives the insured and the insured's children living at home the right to healthcare advice from a registered nurse 24 hours a day by phone.

5.1.2 Healthcare planning

The insured has access to healthcare planning.

By healthcare planning is meant that a registered nurse provides assistance in planning and booking healthcare within Skandia's network.

5.1.3 Private medical care

The insured has access to examinations and treatment performed by doctors at a Skandia-affiliated healthcare clinic.

Treatment by a doctor must always be booked via Skandia Healthcare Planning

5.1.4 Pre-operative examinations, operations and in-patient hospital care

The insurance gives the insured access to

- pre-operative examinations
- surgical operations
- in-patient hospital care.

Pre-operative examinations, surgical operations and in-patient hospital care are provided at any of the hospitals or

clinics included in Skandia's network or at any other hospital which, from a therapeutic standpoint, is more suitable.

The right to an operation or in-patient hospital care commences when a medical investigation has been completed and the attending physician has issued a referral for an operation or in-patient hospital care.

The care must be approved and booked in advance by Skandia.

5.1.5 Aftercare – rehabilitation

The insurance covers the costs of necessary and reasonable aftercare and rehabilitation in connection with an indemnifiable operation or in-patient hospital care in accordance with point 5.1.4.

Compensation is paid for a maximum of one aftercare or rehabilitation period for each insurance event.

The aftercare and rehabilitation must have been preceded by a medical investigation and referral from the attending physician, and shall be performed at the insured's town/city of residence if possible. However, if it is urgent from a therapeutic perspective, they can be performed at another location.

Compensation will be paid only for costs approved in advance by Skandia.

5.1.6 Patient co-payments

The insurance covers costs for publicly financed healthcare (public healthcare patient co-payments) within the scope of the so-called medical cost ceiling level (*högkostnads-skyddet*). Compensation is provided up to the medical cost ceiling level.

5.1.7 Treatment by physiotherapist, naprapath or chiropractor

The insurance covers costs for treatment by a physiotherapist, naprapath or chiropractor under a referral from an attending physician. Such referral may not be older than six months.

Compensation is paid for a maximum of ten treatment sessions for each insurance event and year. Treatment must be provided by any of the physiotherapists, naprapaths or chiropractors included in Skandia's network.

5.1.8 Treatment by a speech therapist

The insurance covers costs for treatment by a speech therapist under a referral from an attending physician. The referral may not be older than six months. Compensation is paid for a maximum of ten treatment sessions for each insurance event. Treatment must be provided by any of the speech therapists included in Skandia's network.

5.1.9 Travel and lodging

The insurance covers necessary travel and lodging costs incurred by the insured in connection with an indemnifiable treatment.

In addition, in cases where the insured requires a major operation, the insurance can pay compensation for travel and lodging costs incurred by a close relative (applies for only one person). Prior to the start of any travel, Skandia must be contacted for approval.

By major operation is meant an operation that is judged by Skandia to be medically complicated and require extensive care.

5.1.10 Medical devices

The insurance covers costs for medical devices prescribed by an attending physician which can be considered to be reasonable and necessary for the healing of the illness or accidental injury. No compensation is paid for medical devices intended for permanent use. The cost must be approved in advance by Skandia.

5.1.11 Treatment by psychologist or psychotherapist

The insurance covers costs for treatment by a psychologist/psychotherapist under a referral from an attending physician. The referral may not be older than six months. Compensation is paid for a maximum of ten sessions for each insurance event at any of the psychologists/psychotherapists included in Skandia's network.

5.1.12 Postoperative home assistance

The insurance gives the insured the right to a maximum of ten hours (incl. travel time) of medically motivated and reasonable home assistance for a period of 14 days after the insured has returned home from an indemnifiable operation. This is subject to the condition that this service can be obtained from an established firm in the insured's town/city of residence. The right to home assistance must be approved in advance by Skandia.

5.1.13 Vaccination advice

The insurance gives the insured and the insured's spouse/cohabitant and children living at home the right to vaccination advice in connection with travel abroad or stationing abroad. By vaccination advice is meant information about the country's local disease conditions and vaccination rules.

5.1.14 Vaccinations

The insured can receive the following vaccinations through the insurance:

- for travel abroad, vaccinations in cases where it is medically warranted for the destination
- influenza vaccination
- TBE vaccination.

5.1.15 Pharmaceutical costs

The insurance covers costs for pharmaceuticals (prescription medicines, patient co-payments) within the scope of the so-called medical cost ceiling level (*högkostnadsskyddet*). Compensation is provided up to the medical cost ceiling level.

5.1.16 Eye examinations

The insurance entitles the insured to one eye examination per insurance year by a licensed optometrist. The insured shall pay for the cost of the eye examination him-/herself to the optometrist. Skandia will reimburse the cost of the eye examination after a claim and original receipt is sent to Skandia.

5.1.17 Second opinion

The insurance gives the insured the right to a *second opinion*, entailing that an insured who is facing a difficult medically related decision has the right in some cases to seek a second medical opinion from a specialist.

The insured can have the right to a second opinion in the following situations:

- for a life-threatening or especially serious illness or injury, or
- if he or she is facing the decision of subjecting him-/herself to an especially risky treatment, i.e., if the treatment itself could be life-threatening or cause enduring pain and suffering in addition to the disease/condition being treated.

Skandia Healthcare Planning determines if the insured has the right to a second opinion.

5.1.18 Travel service for surgical operations abroad

For surgical operations abroad, Skandia will provide assistance in airline and hotel bookings for the insured and one attendant.

5.1.19 Added costs for in-patient hospital care

Compensation will be paid in an amount of SEK 100 per day for indemnifiable in-patient hospital care if the insured is admitted to hospital overnight. Compensation is paid for a maximum of 100 days in total for each insurance event.

5.1.20 Substance abuse treatment

The insurance covers costs for an uninterrupted treatment period for diagnosed abuse of alcohol, narcotics, medicine or gaming addiction, and where the treatment is medically motivated. The treatment method must be approved by Skandia in advance. The treatment must be performed in Scandinavia.

The insurance does not cover costs that arise within one year from the date that the insurance first came into force. The insurance covers only one treatment period until the insured reaches the maximum age stipulated in the insurance statement of policy.

5.1.21 Health examinations

The insurance covers the cost of one health examination every other year. The first examination is conducted during the second year of insurance cover, and thereafter every other year. The insured receives a letter entitling him or her to the health examination during the insurance year in question. If the insured does not use the opportunity to undergo a health examination, no compensation will be paid and no premium will be refunded. Nor can the date of the health examination be moved to another insurance year.

By health examination is meant tests conducted by a nurse and a doctor's examination entailing a review of the test results. Health examinations can only be performed in Sweden.

5.2 Special stipulations – Lifeline Excellent

5.2.1 Who can be insured?

In addition to what is stipulated in the *Joint stipulations*, point 1.1, the following persons can apply for the insurance.

5.2.1.1 Private persons residing outside Sweden

A private person who is a Swedish citizen and residing abroad can be insured. The person must have resided in Sweden with an officially registered address at least two years before applying for the insurance.

If the applicant was not residing in Sweden with an officially registered address for at least two years before applying for the insurance, Skandia will require a health examination that is performed in Sweden. The applicant shall bear the cost of the examination, which will be used as documentation for review of the insurance application.

5.2.2 Illness or accidental injury during stays outside of the zone that applies for the insurance

If the insured suffers an acute illness or accident during a temporary stay outside of zone stipulated in the insurance statement of policy, the insurance applies abroad during the first 45 days starting from the date of departure.

The insurance covers necessary and reasonable costs for care by a doctor or hospital. Costs for emergency care, prescription medicines, and necessary and reasonable travel to and from the care-giver at the place of visit are also covered by the insurance.

For stays abroad or temporary stays outside of the zone that applies for the insurance, the insured shall pay for the doctor's care, prescription medicines and travel. Skandia will then reimburse the insured after receiving a claim together with the original receipts.

Longer stays abroad than 45 days require that the insurance has been extended to apply in zone 2 or zone 3.

For more extensive care, such as hospitalisation or a major operation, contact is to be made with SOS International in Copenhagen tel. +45-38 48 89 95.

If it is not advisable to travel home for medical reasons, the insurance applies until the insured's condition has improved to such a degree that the insured can travel home. In such case, a certificate from the attending physician is required. The insurance does not cover costs for travel home in connection with an illness or accident during a stay abroad.

6. Lifeline Basic – with referral

The insurance can be purchased with or without referral. See the insurance statement of policy.

In addition to what is stipulated in the *Joint stipulations*, point 1, the following terms and conditions apply for Lifeline Basic – with referral.

6.1 What does the insurance cover?

6.1.1 Healthcare advice

The insurance gives the insured and the insured's children living at home the right to healthcare advice from a registered nurse 24 hours a day by phone.

6.1.2 Healthcare planning

Upon referral to a specialist physician from an attending physician in primary care, the insured has access to healthcare planning.

By healthcare planning is meant that a registered nurse provides assistance in planning and booking healthcare within Skandia's network.

6.1.3 Specialist medical care

Upon referral from an attending physician in primary care, the insured has access to medical examination, treatment and advice from a doctor with specialist expertise in Skandia's network.

Specialist care shall be primarily provided by a care provider at the insured's place of residence in Sweden or by a care provider referred by Skandia Healthcare Planning. Before a referral is issued for specialist care, a physician in primary care shall conduct a basic medical examination. By basic medical examination is meant, e.g., treatment, testing and X-ray examination.

Specialist care shall always be booked via Skandia Healthcare Planning.

The insurance does not cover costs for care provided before a referral to a specialist physician has been issued.

6.1.4 Pre-operative examinations, operations and in-patient hospital care

The insurance gives the insured access to

- pre-operative examinations
- surgical operations
- in-patient hospital care.

Pre-operative examinations, surgical operations and in-patient hospital care are provided at any of the hospitals or clinics included in Skandia's network or at any other hospital which, from a therapeutic standpoint, is more suitable.

The right to an operation or in-patient hospital care commences when a medical investigation has been completed and the attending specialist physician, in accordance with point 6.1.3, has issued a referral for an operation or in-patient hospital care.

The care must be approved and booked in advance by Skandia.

6.1.5 Aftercare – rehabilitation

The insurance covers the costs of necessary and reasonable aftercare and rehabilitation in connection with an indemnifiable operation or in-patient hospital care in accordance with point 6.1.4.

Compensation is paid for a maximum of one aftercare or rehabilitation period for each insurance event.

The aftercare and rehabilitation must have been preceded by a medical investigation and referral from the attending specialist physician, in accordance with point 6.1.3, and shall be performed at the insured's town/city of residence if

possible. However, if it is urgent from a therapeutic perspective, they can be performed at another location.

Compensation will be paid only for costs approved in advance by Skandia.

6.1.6 Patient co-payments

The insurance covers costs for publicly financed healthcare (public healthcare patient co-payments) according to points 6.1.3, 6.1.4 and 6.1.7 within the scope of the so-called medical cost ceiling level (*högkostnadsskyddet*). Compensation is provided up to the medical cost ceiling level.

6.1.7 Treatment by physiotherapist, naprapath or chiropractor

The insurance covers costs for treatment by a physiotherapist, naprapath or chiropractor upon referral from an attending specialist physician in accordance with point 6.1.3. Such referral may not be older than six months. Compensation is paid for a maximum of ten treatment sessions for each insurance event and year. Treatment must be provided by any of the physiotherapists, naprapaths or chiropractors included in Skandia's network.

6.1.8 Travel and lodging

The insurance covers necessary travel and lodging costs incurred by the insured in connection with an indemnifiable treatment.

In addition, in cases where the insured requires a major operation, the insurance can pay compensation for travel and lodging costs incurred by a close relative (applies for only one person). Prior to the start of any travel, Skandia must be contacted for approval.

By major operation is meant an operation that is judged by Skandia to be medically complicated and require extensive care.

6.1.9 Medical devices

The insurance covers costs for medical devices prescribed by an attending specialist physician in accordance with point 6.1.3, which can be considered to be reasonable and necessary for the healing of the illness or accidental injury. No compensation is paid for medical devices intended for permanent use. The cost must be approved in advance by Skandia.

6.1.10 Exceptions in addition to those stipulated in point 1.15

The insurance does not cover emergency medical care or costs for such care.

7. Lifeline Access – with referral

The insurance can be purchased with or without referral. See the insurance statement of policy.

In addition to what is stipulated in the *Joint stipulations*, point 1, the following terms and conditions apply for Lifeline Access – with referral.

7.1 What does the insurance cover?

7.1.1 Healthcare advice

The insurance gives the insured and the insured's children living at home the right to healthcare advice from a registered nurse 24 hours a day by phone.

7.1.2 Healthcare planning

Upon referral to a specialist physician from an attending physician in primary care, the insured has access to healthcare planning.

By healthcare planning is meant that a registered nurse provides assistance in planning and booking healthcare within Skandia's network.

7.1.3 Specialist medical care

Upon referral from an attending physician in primary care, the insured has access to medical examination, treatment and advice from a doctor with specialist expertise in Skandia's network.

Specialist care shall be primarily provided by a care provider at the insured's place of residence in Sweden or by a care provider referred by Skandia Healthcare Planning. Before a referral is issued for specialist care, a physician in primary care shall conduct a basic medical examination. By basic medical examination is meant, e.g., treatment, testing and X-ray examination.

Specialist care shall always be booked via Skandia Healthcare Planning.

The insurance does not cover costs for care provided before a referral to a specialist physician has been issued.

7.1.4 Pre-operative examinations, operations and in-patient hospital care

The insurance gives the insured access to

- pre-operative examinations
- surgical operations
- in-patient hospital care.

Pre-operative examinations, surgical operations and in-patient hospital care are provided at any of the hospitals or clinics included in Skandia's network or at any other hospital which, from a therapeutic standpoint, is more suitable.

The right to an operation or in-patient hospital care commences when a medical investigation has been completed and the attending specialist physician, in accordance with point 7.1.3, has issued a referral for an operation or in-patient hospital care. The care must be approved and booked in advance by Skandia.

7.1.5 Aftercare – rehabilitation

The insurance covers the costs of necessary and reasonable aftercare and rehabilitation in connection with an indemnifiable operation or in-patient hospital care in accordance with point 7.1.4.

Compensation is paid for a maximum of one aftercare or rehabilitation period for each insurance event.

The aftercare and rehabilitation must have been preceded by a medical investigation and referral from the attending specialist physician in accordance with point 7.1.3, and shall be performed at the insured's town/city of residence if possible. However, if it is urgent from a therapeutic perspective,

they can be performed at another location.

Compensation will be paid only for costs approved in advance by Skandia.

7.1.6 Patient co-payments

The insurance covers costs for publicly financed healthcare (public healthcare patient co-payments) according to points 7.1.3, 7.1.4 and 7.1.7 within the scope of the so-called medical cost ceiling level (*högkostnadsskyddet*). Compensation is provided up to the medical cost ceiling level.

7.1.7 Treatment by physiotherapist, naprapath or chiropractor

The insurance covers costs for treatment by a physiotherapist, naprapath or chiropractor upon referral from an attending specialist physician in accordance with point 7.1.3. Such referral may not be older than six months. Compensation is paid for a maximum of ten treatment sessions for each insurance event and year. Treatment must be provided by any of the physiotherapists, naprapaths or chiropractors included in Skandia's network.

7.1.8 Travel and lodging

The insurance covers necessary travel and lodging costs incurred by the insured in connection with an indemnifiable treatment.

In addition, in cases where the insured requires a major operation, the insurance can pay compensation for travel and lodging costs incurred by a close relative (applies for only one person). Prior to the start of any travel, Skandia must be contacted for approval.

By major operation is meant an operation that is judged by Skandia to be medically complicated and require extensive care.

7.1.9 Medical devices

The insurance covers costs for medical devices prescribed by an attending specialist physician in accordance with point 7.1.3, which can be considered to be reasonable and necessary for the healing of the illness or accidental injury. No compensation is paid for medical devices intended for permanent use. The cost must be approved in advance by Skandia.

7.1.10 Treatment by psychologist or psychotherapist

The insurance covers costs for treatment by a psychologist/psychotherapist under a referral from an attending specialist physician, in accordance with point 7.1.3. The referral may not be older than six months. Compensation is paid for a maximum of ten sessions for each insurance event at any of the psychologists/psychotherapists included in Skandia's network.

7.1.11 Postoperative home assistance

The insurance gives the insured the right to a maximum of ten hours (incl. travel time) of medically motivated and reasonable home assistance for a period of 14 days after the insured has returned home from an indemnifiable operation. This is subject to the condition that this service can be obtained from an established firm in the insured's town/city of residence. The right to home assistance must be approved in

advance by Skandia.

7.1.12 Vaccination advice

The insurance gives the insured and the insured's spouse/cohabitant and children living at home the right to vaccination advice in connection with travel abroad or stationing abroad. By vaccination advice is meant information about the country's local disease conditions and vaccination rules.

The insurance does not cover the cost of vaccines or other costs for vaccinations.

7.2 Exceptions in addition to those stipulated in point 1.15

The insurance does not cover emergency medical care or costs for such care.

8. Health examination

Options for Lifeline Basic and Access with/without referral and Lifeline Plus:

(see insurance statement of policy).

8.1 Comprehensive health examination

The insurance covers the cost of a comprehensive health examination every other year. The first examination is conducted during the second insurance year, and thereafter every other year. The insured receives a letter entitling him or her to the health examination during the insurance year in question. If the insured does not use the opportunity to undergo a health examination, no compensation will be paid and no premium will be refunded. Nor can the date of the health examination be moved to another insurance year.

By comprehensive health examination is meant tests conducted by a nurse and a doctor's examination entailing a review of the test results. Health examinations can only be performed in Sweden.

8.2 Standard health examination

The insurance covers the cost of a standard health examination every other year.

The first examination is conducted during the second insurance year, and thereafter every other year. The insured receives a letter entitling him or her to the health examination during the insurance year in question. If the insured does not use the opportunity to undergo a health examination, no compensation will be paid and no premium will be refunded. Nor can the date of the health examination be moved to another insurance year.

By standard health examination is meant tests conducted by a nurse. A doctor compiles the results, which are conveyed to the insured in writing. Health examinations can only be performed in Sweden.

Information

Contesting decisions on insurance matters

Skandia's Customer Ombudsman reviews, upon request, all queries pertaining to claims and other complaints pertaining to the handling of insurance matters. The Customer Ombudsman has an independent and impartial position in Skandia's organisation and works under the oversight of Skandia's board of directors.

The Personal Insurance Board (*Personförsäkringsnämnden*) issues – at the request of policyholders or other parties entitled to benefits – advisory statements within the framework of law and applicable insurance terms and conditions on disputes (with the exception of court cases) between policyholders or other parties entitled to benefits and insurance companies in the areas of sickness/disability insurance, personal accident insurance and life assurance. However, the Board's authority is limited to matters in which the Board requires the support of consulting physicians on insurance-related medical matters. If such a case also pertains to other issues, these are to be reviewed by the Board.

The National Board for Consumer Complaints (ARN) has a special department for insurance matters.

The Swedish Consumers Insurance Bureau can provide information on insurance matters.

Insurance matters can also be settled in a Swedish court of law.

Skandia's Head of Complaints

SE-103 50 Stockholm
Tel.: +46-8-788 44 85
Fax: +46-8-788 47 80
E-mail: klagomalsansvarig@skandia.se

Skandia's Customer Ombudsman

SE-103 50 Stockholm
Tel.: +46-8-788 43 30
Fax: +46-8-788 20 40
E-mail: kundombudsmannen@skandia.se

Personförsäkringsnämnden

(Personal Insurance Board)
Swedish Insurance Federation
Box 24067
SE-104 50 Stockholm

National Board for Consumer Complaints (ARN)

Box 174
SE-101 23 Stockholm
Tel. +46-8-555 017 00

Swedish Consumers Insurance Bureau

Box 24215
SE-104 51 Stockholm
Tel. +46-8-22 58 00

According to the Personal Data Act (Personuppgiftslagen (1998:204)), every registered person has the right to receive information about and corrections made to personal data that is registered. Such requests are to be made in writing to Skandia, SE-103 50 Stockholm.

Information on the handling of personal data

Personal data provided to Skandia Insurance Company Ltd (publ), which is the responsible party for personal data, will be used by the company and other companies in the Skandia group to enable the companies to honour contracts entered into or obligations prescribed by law or other statutes.

The data may also be used for market analyses, statistics and to evaluate products and services. Further, such data may be used to inform about the Skandia group's products and services.

Personal data may be provided – for the aforementioned purposes – to companies in the Skandia group and other companies that the Skandia group co-operates with in countries both in and outside of the EU and EEA.

Persons who do not wish to receive addressed offers can contact the company's customer service centre and request to be removed from advertising mailing lists.

In its handling of personal data, the Skandia group will take great care to protect the personal integrity of the individuals concerned.

Data will be made available only to persons who need to have access to such data to be able to perform their duties on behalf of the Skandia group. These persons will only have access to the information to the extent needed to enable them to perform their duties.

The company may record or in some other manner document individuals' communication with the company.

According to the Personal Data Act (*Personuppgiftslagen* (1998:204)), every registered person has the right to receive information about and corrections made to personal data that is registered. Such requests are to be made in writing to Skandia, SE-103 50 Stockholm.

These terms and conditions are a translation of the Swedish original. In the event of any discrepancy, the Swedish version shall take precedence.