



Child insurance

Advance and after-sale information

Valid from 1 January 2024, terms and conditions OSB24

With our Child insurance, your child has protection in the event of accidents or illnesses. This document only comprises general information to which you are entitled before and after you have purchased the insurance and it is important that you read it. If a type of protection is particularly important to you, you should find out whether it is included in the policy. Please feel free to contact us. We offer advice on this insurance product. The complete terms and conditions of the insurance can be found on our website, lansforsakringar.se. You can also contact us and we will send these to you.

When you have purchased the insurance, it is also important that you carefully read your insurance policy and check that everything is correct, for example, name and personal identity number, the size of the amount insured and the period covered by the insurance policy. If the policy contains a special clause, this is stated on the insurance certificate.

General information about the insurance policy

You can apply for the insurance for children who have not turned 18 years of age and who are registered and resident in Sweden. The insurance applies with no deductible, 24 hours a day, and has no restrictions for sporting activities. The Child insurance ceases to be valid after the insured person reaches the age of 25. The option exists to apply for our Accident and Illness insurance for adults without a medical examination with an insurance amount of ten price base amounts.

Insurance amount

You choose for yourself how high the insurance amount is to be, from ten to fifty price base amounts. The price base amount is an amount that follows the price trend in society, and which is determined each year by the Government. Your insurance amount will be index-linked since the insurance amount and other compensation in policies are updated when the price base amount changes.

All compensation that is provided from the insurance is exempt from income tax.

Application

Visit our website or contact us and we will help you to apply for our child insurance. You can do this directly by filling in the health declaration digitally.

Price

The price of our Child insurance depends on the insurance amount that you choose as well as the age of the child. Visit our website or contact us to find out how much the child insurance costs.

Medical examination

When you apply for our child insurance, you must answer questions about the health of your child in a health declaration. After this, we perform an insurance medical risk assessment. The insurance policy is based on the signed health declaration we received from you. Failure to provide complete information in the health declaration can result in the insurance becoming invalid.



The following is included in the insurance policy

- Medical disability.
- Financial disability.
- Lump sum for certain diagnoses..
- Scarring.
- Emergency medical care.
- Hospitalisation.
- Care in the home.
- Monthly compensation for care contributions.
- Monthly compensation in case of inability to work.
- Compensation for rehabilitation and aids.
- Crisis therapy.
- Expenses for visiting a doctor and travelling to receive care.
- Dental injuries in the event of accidental injury.
- Ruined clothing and broken glasses in the event of accidental injury.
- Compensation in the event of death, regardless of cause.
- Payment waiver up to the age of 18 if the child's parent/ guardian dies.

Illness

Illness refers to a deterioration of health, as confirmed by a doctor, that cannot be considered an accidental injury. The illness is deemed to have manifested itself when the deterioration was first documented by a doctor, psychologist or at a psychiatric clinic, regardless of whether a diagnosis can be established at this time.

Illness does *not* refer to:

- Voluntarily inflicted bodily injury.
- Refractive errors or strabismus (not caused by disease).
- Dyslexia, dyscalcula.
- Short stature.
- Complaints that require preventive treatment.
- Illness that according to medical expertise is the result of abuse of alcohol, narcotics, other intoxicants, sleeping agents or other pharmaceuticals.
- Injury arising from a procedure, treatment or examination not caused by illness.

Accidental injury

Accidental injury refers to a bodily injury that the child involuntarily incurs due to a sudden external incident.

The accidental injury must also have required medical treatment by a licenced and impartial doctor, nurse or physiotherapist.

Important *limitations* to the insurance

Here are some important examples of what is not included in the insurance policy and limitations in cover.

The insurance policy does not cover illnesses that were displaying symptoms before the insurance had become valid.

The scope of the policy is limited for specifically stated medical conditions.

These are:

- Epilepsy, ICD G40.
- Deformities and chromosome abnormalities, ICD Q00-Q99 (such as Down's syndrome and deformities of internal organs).
- Mental, behavioural and neurodevelopmental disorders, ICD F00-F99, such as ADHD.
- Diseases in the central nervous and muscle system, ICD G11, G12, G60, G71 and G80.
- Unspecified brain disorders that in certain cases lead to fatigue syndrome, ICD G93.3.
- Metabolic disorders, ICD E70-E90 (for example, cystic fibrosis).

For these illnesses/conditions:

- Compensation for medical disability is limited.
- No compensation is paid for financial disability, expenses for visiting a doctor, rehabilitation and aids, monthly compensation for care contributions or in case of inability to work

Cover is limited when residing outside the Nordic region for more than 12 months, and this is also the case in the event of war or war-like unrest. The insurance does not apply in the event of certain terrorist acts and nuclear processes.

Compensation in the event of illness or accidental injury

Medical disability

If your child experiences a permanent disability due to an accidental injury or compensable illness, lump-sum compensation is paid. If we assess the degree of medical disability to be less than 20%, we pay compensation at an insurance amount corresponding to the degree of medical disability. If we assess the degree of disability as 20% or more, the compensation will be higher, according to the table in the insurance terms and conditions.

This compensation is provided regardless of whether you receive other compensation from somewhere else.

Compensation is not paid for functional impairment that existed before the illness manifested itself or the accidental injury occurred.

No compensation is paid from the policy if the functional impairment becomes worse after the child turns 30 years of age.

Limitations

For the illnesses listed below, the compensation for medical disability is limited to a maximum of 19% of medical disability.

- Epilepsy, ICD G40.
- Deformities and chromosome abnormalities, ICD Q00-Q99 (such as Down's syndrome and deformities of internal organs).
- Mental, behavioural and neurodevelopmental disorders, ICD F00-F99.
- Diseases in the central nervous and muscle system, ICD G11, G12, G60, G71 and G80.
- Unspecified brain disorders that in certain cases lead to fatigue syndrome, ICD G93.3.
- Metabolic disorders, ICD E70-E90 (for example, cystic fibrosis).

Financial disability

If an accidental injury or compensable illness results in a permanent impairment in the ability to work of at least 50% when the child has become an adult, compensation may be paid for financial disability.

We pay compensation at an insurance amount corresponding to the degree of financial disability. If the child also has a confirmed medical disability of 10% or higher, there is the possibility of receiving additional compensation.

This compensation is provided regardless of whether you receive other compensation from somewhere else, but the amount depends on the insurance amount and your ability to work after the accident. The higher the amount you choose, the greater financial security the child will receive.

No compensation is paid from the policy if the ability to work declines after the child turns 30 years of age.

Lump sum for certain diagnoses

Lump-sum compensation of 10% of the chosen insurance amount can be paid for the following diagnoses:

- Cerebrovascular diseases and intracranial injuries, ICD I60-I69, S06.1-S06.9.
- Juvenile arthritis that affects at least three joints, including at least two major joints such as wrist, elbow, shoulder, foot, knee, hip or neck, ICD M08.
- Benign brain tumour, ICD D32-D33, D35.2-D35.4 and D42-D43.
- Crohn's disease, ICD K50.
- Malignant neoplasms, ICD C00-C97, D00-D09.
- Multiple sclerosis (MS), ICD G35.

- Systemic lupus erythematosus (SLE), ICD M32.
- Ulcerative colitis, ICD K51.
- Burns that cover at least 9% of the body's surface and that are at least second degree burns

Limitations

- No compensation is paid for diagnoses that have not been confirmed by a doctor and other diagnoses than those stated.
- Malignant melanoma of skin, ICD C43, that is less than 0.5 mm thick.
- Compensation is paid only once for the same illness or for illnesses that have a medical connection.

Compensation for scarring

You receive compensation for scars, changes to skin or hair loss that are deemed to be permanent. Compensation is paid in accordance with the scar table in the insurance terms and conditions, at the earliest one year after treatment has been completed. The injury must have been so severe that treatment was required by a licenced and impartial doctor or nurse.

Limitation

- For scars, changes to skin or hair loss with a length of less than 0.5 cm and that are not visible.
- Compensation of a maximum of 2% of the chosen insurance amount is paid for scars, changes to skin or hair loss caused by an illness.

Compensation for emergency medical care

If the child requires emergency care at a hospital and is admitted to stay over night, a lump sum of 1.5% of the price base amount is paid.

Limitation

No compensation is paid for planned hospital stays.

Hospitalisation

If the child is admitted into hospital for care, compensation at 1.2% of the price base amount is paid per day for a maximum of 365 days.

Care in the home

You will receive compensation of the child requires care at home immediately following hospitalisation. The total time for care in hospital and in the home must be at least ten days and be verified by a doctor's certificate. The compensation amount is 1.2% of the price base amount per day for a maximum of 30 days.

Monthly compensation for care contributions.

Your child's illness or accidental injury could result in long-term care and additional supervision. If you as guardian are granted a care contributions, or receive compensation for a seriously ill child from the Social Insurance Agency of at least one-quarter, the insurance policy could pay compensation of a maximum of 2.2 price base amounts. The level of compensation depends on the amount of the care contribution. The amount that is paid out is adjusted annually with regard to the current price base amount.

Monthly compensation in case of inability to work

The right to receive compensation comes into force from the age of 18, if the person has been unable to work at least 50% for 90 consecutive days. Monthly compensation is paid at a maximum of 20% of one price base amount. The amount of the monthly compensation is dependent on the degree of disability. Compensation is paid out at most until the person reaches the age of 30.

Limitations

- If compensation for financial disability is paid out, the monthly compensation ceases.
- Monthly compensation is not paid if a care contribution is also paid by the Social Insurance Agency.

Rehabilitation and aids

Compensation is paid for reasonable rehabilitation measures aimed at returning to work or resuming studies.

Compensation is paid for aids for the least expensive, commonly available aids that could alleviate the disability condition. Compensation is paid at a maximum of five price base amounts. We must approve the measures and expenses in advance.

Limitation

For example, you cannot receive compensation for aids for sports or leisure activities. You also do not receive compensation if corresponding compensation can be paid by someone else. There are additional exceptions, which are explained in the insurance terms and conditions.

Crisis therapy

If the child experiences a crisis reaction, compensation can be paid for up to ten treatment sessions of crisis therapy within one year of the first treatment session. The cause might be the death of a close relative, serious illness, accident, violence, threat or crisis caused by bullying.

Compensation is paid at a maximum of 0.25 price base amount.

Expenses for care and travel

Compensation is paid for visits to the doctor, travel and medication. In the event of accidental injury, we compensate these costs for a maximum of five years. In the event of illness, we compensate these costs for a maximum of one year, except for the first 30 days (qualifying period).

Limitations

- Compensation is not paid for costs for private health care and treatment.
- Compensation is not paid for costs that can be reimbursed according to law, convention, statute, collective agreement, other insurance or by a municipality, regional authority or the government.
- Compensation is not paid for expenses arising after the insurance policy has paid disability benefit.

Several exceptions are detailed in the insurance terms and conditions.

Dental injury compensation in case of accidental injury

In the event of accidental injuries, compensation is paid for dental injuries that required dental treatment for up to five years from the date of the accident. In the event the final treatment has to be postponed until the child is older, we will make an exception to the five-year rule and provide compensation for treatment at a later date. We must approve all treatment in advance.

Compensation for clothing and glasses in the event of accidental injury

In the case of accidental injury that required medical or dental treatment, you will receive compensation for the cost of ruined clothes, glasses, helmets, hearing aids and other aids for disabled persons. You receive compensation according to a table and at a maximum of 0.25 price base amount.

Compensation in the event of death

In the event of death that occurs during the insurance period, 1.25 price base amount is paid regardless of the cause of death. The amount is paid to the estate of the deceased or to the beneficiary if there is a beneficiary clause.

Payment waiver up to the age of 18 if the child's parent/guardian dies

If any of the child's guardians dies, the insurance will be free of charge until the main renewal date after the child's 18th birthday.

Offering: Accident and Illness insurance for adults

The child insurance ceases to be valid after the insured person reaches the age of 25. The child will then be offered the option of taking out Accident and Illness insurance for adults without a medical examination with an insurance amount of ten price base amounts. If you want a higher amount than ten price base amounts, a full health declaration will be required for the requested increase. No offering is presented if the insurance certificate contains a specific exception.

Insurance policy

The insurance contract applies for one year and is automatically renewed unless it is cancelled by one of the parties. The price may change at every main renewal date for reasons that include a changed price base amount, changes to terms and conditions and, where applicable, the age of the insured.

Compensation is paid based on the terms and conditions that applied when the illness was confirmed or when the accident occurred.

Swedish law will apply to the agreement, and all communication between the parties is to take place in Swedish.

Payment

You must pay for the insurance policy not later than the main renewal date by invoice or autogiro, if you have requested this.

Consequences of unpaid insurance premiums

If you do not pay the insurance in time, we are entitled to cancel it.

If you do not pay the insurance when it is to be renewed, you have the right to resume it within six months. The insurance is not valid during the period in which the policy has not been paid for.

Remember to report a claim in time.

Accident and illness claims regarding your child should be reported as soon as possible. Read more about limitations in the insurance terms and conditions.

If you change your mind

If you purchase a product or service on the Internet, by telephone or away from our offices, known as a distance purchase, you are entitled to change your mind about the purchase within 14 days. Contact us and we will assist you. If you have already made payment, your money will be returned with a deduction for the cost of the time that you had the insurance. More detailed information about your right to a refund can be found in the Swedish Distance Contracts and Off-Premises Contracts.

Processing of personal data

This is a brief description of how we process personal data.

Complete information about how we process your personal data is found in the document "Processing of personal data," which can be found on our website lansforsakringar.se/personuppgifter. You can request that this information be sent to you by contacting your local insurance company.

The personal data that we collect about you is processed in accordance with applicable laws and regulations. The data is collected so that we can sign and fulfil insurance contracts, take action that you request before an agreement has been reached, provide a complete overview of your commitments with the Länsförsäkringar Alliance, make legal claims and conduct marketing. Your personal data may also be used for statistics, market and customer analyses, product development, to prevent claims and for other purposes specified in the complete document *Processing of personal data*. If you do not want your personal data to be used for direct marketing, please inform us.

We mainly process your data within the Länsförsäkringar Alliance, but your data may also be transferred to companies, associations and organisations that work together with the Länsförsäkringar Alliance, both within and outside the EU and EEA. We may also disclose your personal data to the authorities if required to do so by law. Details about your non-life insurance may also be disclosed to people in the same household as you.

You can always request information about the personal data that we process about you. The personal data controller is the company that is specified as the insurer on your offer or your insurance policy or to whom you have submitted your personal data for another reason. General information, such as your name, contact details and information about your commitments, is also processed in the Länsförsäkringar Alliance's shared customer register. All of the companies in the Länsförsäkringar Alliance are jointly responsible as personal data controllers for the processing of such personal data.

Registering a claim

We use an industry-wide claims register (known as GSR). This register contains certain information about claims and details about who has claimed compensation and is used solely in connection with claims adjustment. This means that we can find out if you have previously made any claims with another insurance company, or government agency that handles similar claims for compensation. The purpose of GSR is to provide insurance companies and government agencies that process similar claims for compensation a basis for identifying unclear insured events and claims for compensation. With its help, companies and government agencies can counteract the disbursement of compensation that is based on incorrect information as well as erroneous disbursements from several insurance policies for the same injury. This information can also be used in anonymised or pseudonymised form for statistical purposes and analyses at an aggregated level.

The personal data controller for GSR is: Skadeanmälningsregister (GSR) AB, Box 24171, SE-104 51 Stockholm, Sweden. See gsr.se for more information on the processing of information found in the register.

To combat insurance-related crime and support insurance companies' activities in investigating unclear claims, information about possessions that have been reported as stolen or missing may be provided to Larmtjänst.

The personal data controller for Larmtjänst is Larmtjänst AB, Box 24158, SE-104 51 Stockholm, Sweden, larmtjanst.se

If we do not agree

If you are not satisfied with a decision or the way in which your case was handled, we would naturally be pleased to re-consider your case. First contact the claims adjuster who was responsible for your case or the complaints officer/customer representative.

The "If we do not agree" section of our website provides information about the complaints officer of your local regional insurance company. Submitting a claim, and having it processed swiftly, is free of charge.

If you are still not satisfied, you can contact the Swedish National Board for Consumer Disputes for non-medical disputes, arn.se, +46 8 508 860 00. For medical issues, the Swedish Personal Insurance Board can issue a statement, forsakringsnamnder.se, +46 8 522 787 20.

You may also have your case settled in a court of law. Your legal representation costs are often reimbursed under the legal-expenses cover included your household insurance. In this event, you will only have to pay the deductible.

The Swedish Consumers Insurance Bureau can provide general information about insurance issues, konsumenternas.se, +46 200 22 58 00. You can also receive guidance from the Swedish Consumer Agency, hallakonsument.se.

Your municipal consumer advice department can also provide advice and information about insurance.

More information is available from our website.

About Länsförsäkringar

Länsförsäkringar comprises 23 independent regional insurance companies that offer customers a complete range of banking and insurance services. Pet and crop insurance is offered through Agria Djurförsäkring and complete solutions for reliable mortgage transactions are offered through Länsförsäkringar Fastighetsförmedling. Your offer or your insurance policy states the regional insurance company that is your insurer.

We are regulated by the Swedish Financial Supervisory Authority (FSA), Finansinspektionen, Box 7821, SE-103 97 Stockholm, Sweden, +46 8 408 980 00, finansinspektionen@fi.se, *fi.se*.

Regarding marketing, we are under the supervision of the Swedish Consumer Agency, Swedish Consumer Agency, Box 48, SE-651 02 Karlstad, Sweden, +46 771 42 33 00, konsumentverket@konsumentverket.se, *konsumentverket.se*

Our employees who sell insurance policies receive a fixed salary. In certain cases, they also receive variable commission that is mainly based on quality and only a small portion is based on quantity. No compensation or commission is paid to our sales personnel if you take out the insurance online via our website.

Contact details for Länsförsäkringar

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