



Accident Insurance for Employees

Insurance Terms No. SP20

The insurer is Vátryggingafélag Íslands hf., reg. no. 690689-2009, hereinafter „VÍS“.

The insurance is governed by:

- The insurance policy, including endorsements and special terms.
- These insurance terms no. SP20.
- The VÍS general terms and conditions no. YY10.
- Act no. 30/2004 on Insurance Contracts.

The provisions of the insurance policy, the renewal receipt and the insurance terms take precedence over the non-mandatory provisions of law.

Accident Insurance for Employees is tailored to the needs of employers to enable them to meet their obligations towards employees under collective wage agreements.

The **terms** describe the rights and obligations of you and VÍS.
The **policy** confirms that you have purchased insurance from VÍS. The policy is accessible by logging on at vis.is

I. General provisions

1. Who is insured?

1.1 The insurance covers employees in the service of the policyholder.

2. Where is the insurance valid?

2.1 The insurance is valid worldwide.

2.2 The insurance is valid:

- 2.2.1 During work for the policyholder and on the normal route between home and the place of work and between the place of work and home. If, due to his work, the insured has a place of lodging outside the home, this place of lodging is considered his home.
- 2.2.2 On domestic and international trips undertaken on behalf of the policyholder, provided that such coverage is stipulated in the collective wage agreement applicable to the insured.
- 2.2.3 During participation in sports, competitions and games arranged by the policyholder or the insured's staff association, where the insured is expected to participate as a part of his work, provided that such coverage is stipulated in the collective wage agreement applicable to the insured.
- 2.2.4 In the insured's leisure time if this is stated in the policy or renewal receipt.

3. Beginning and end of coverage for the insured

3.1 VÍS's liability towards the insured begins when he starts working for the policyholder.

3.2 The insurance expires for an employee when he leaves the service of the policyholder.

II. Employee accident insurance

4. Definitions

4.1 The term "accident" refers to a sudden external event causing personal injury to the insured person and occurring without his consent.

4.2 Waiting period is the period specified in the policy or renewal receipt from the beginning of incapacity until daily allowance payments start. No daily allowances are paid for this period.

5. What is covered under the insurance?

5.1 VÍS pays compensation for those coverage elements included in the insurance and specified in the policy or renewal receipt:



Coverage element	VÍS pays compensation for an accident to the insured during the validity period of the insurance:
5.1.1 Death benefits	If an accident results in the death of the insured within three years from the date of accident, VÍS pays death benefits.
5.1.2 Disability benefits	If an accident results in permanent disability within three years from the date of accident, VÍS pays disability benefits.
5.1.3 Compensation for dental fractures	If an accident results in healthy and well-repaired teeth breaking or being damaged, VÍS pays for repairs. This only applies if disability benefits are specified as a coverage element in the policy or renewal receipt.
5.1.4 Daily benefits	If an accident results in temporary loss of working capacity, VÍS pays daily benefits.

5.2 If earthquakes, volcanic eruptions, flooding, landslide or other natural disasters cause injury to many insured persons, VÍS's total compensation shall be limited to ISK 200 million. Compensation is divided proportionately between compensation recipients. This limitation shall apply even though not all the injured are the employees of the same policyholder.

6. What is not covered under the insurance?

6.1 VÍS does not pay compensation for accidents that occur:

- a) During participation in competitions or during training sessions in preparation for competitions in any sport, cf. however Article 2.2.3. Sports refers to individual- and team sports which are trained for regularly under coach supervision connected to a club or an organization which has sports competitions as its objective. These restrictions do not apply to public participation in competition or practice in golf, street or mountain biking (except downhill races or enduro), cross-country skiing, triathlon, cross-country or street running.
- b) In fighting, wrestling or self-defence sports where the object of the sport in question is to hit, punch or kick the opponent or to tackle the opponent in any other manner.
- c) In driving sports.
- d) During cliff rappelling and cliff, mountain and ice climbing.
- e) When mountain hiking of any sort higher than 4,000 m above sea level.
- f) When scuba diving with an oxygen tank and during free-diving (without oxygen) to a depth greater than 10 m.
- g) During hot-air ballooning and glider, kite, hang gliding, ultralight aircraft flights and other comparable activities.
- h) In bungee jumping, sky-diving and base jumping and other comparable activities.
- i) In flight, unless the insured is a passenger on a scheduled flight or charter flight operated by a party having the requisite aviation authority permits.
- j) In fist-fights, unless the insured in his work only acted in self-defence.
- k) Participation in the commission of a punishable act.
- l) Due to artificial indoor tanning, medical treatment, surgical procedure or use of medicinal products, unless prescribed by a physician on account of an accident covered by the insurance and performed in a recognized medical facility.
- m) Due to the consumption of alcohol, addictive or illegal substances, stimulants, or sedatives, unless it can be proven that these substances had no connection to the accident.
- n) As a result of poisonous gases, unless the poisoning occurred suddenly and unintentionally by the insured.
- o) Directly or indirectly due to terrorist acts involving any kind of biological or chemical exposure and/or poisoning, including pathogens and viruses, or when the consequences of an accident are worsened by such factors.
- p) When the insured is entitled to compensation for the accident from mandatory motor vehicle insurance, whether from third-party liability insurance or from the driver's and owner's accident insurance, unless otherwise provided for in a collective wage agreement. The same applies if the insured is entitled to compensation under the provisions of the Traffic Act concerning loss or damage caused by unknown or uninsured vehicles.
- q) In work for anyone other than the policyholder, whether such work is paid or unpaid, or in gainful work for his own benefit involving occupational accident risk.

6.2 VÍS does not pay compensation for teeth that are damaged in a work-related accident or due to other incidents to the extent this is compensated under public social insurance legislation or other public participation in dental treatment costs.

6.3 VÍS does not compensate dental injuries that occur while the insured is eating.

It is possible to request **special coverage** for the risk listed under items a-f in Article 6.1.



7. Premium

- 7.1 The premium for the insurance is determined based on job types, collective wage agreements and the number of persons insured.

8. Insurance amount

- 8.1 The maximum insured amounts for death benefits, disability benefits and daily benefits are specified in the policy or renewal receipt and are determined in accordance with the provisions of the collective wage agreement applicable to the insured.
- 8.2 Insurance amounts are adjusted in accordance with the index and in the manner stated in the collective wage agreements that apply to the insured.
- 8.3 Insurance amounts take account of the age of the insured in accordance with the provision of the collective wage agreements that apply to the insured.
- 8.4 In the insured is 70 years of age or older, and there are no special provisions relating to the age of the insured in collective wage agreements that apply to the insured, the insurance amounts will be the following percentages of the maximum insurance amounts:

Age	%	Age	%	Age	%
70 years	95%	75 years	70%	80 years	45%
71 years	90%	76 years	65%	81 years	40%
72 years	85%	77 years	60%	82 years	30%
73 years	80%	78 years	55%	83 years	20%
74 years	75%	79 years	50%	84 years or older	10%

- 8.5 Benefits are calculated on the basis of the insurance amounts on the date of the accident and are adjusted in proportion to index changes from the date of the accident to the settlement date of the loss, in accordance with the provisions of the collective wage agreement that apply to the insured.

9. Change of risk level

- 9.1 The policyholder shall, without unnecessary delay, notify VÍS of any changes to the work performed by the insured that entail an increased level of risk. Failure to do so can entail that VÍS's liability for each insurance event will be reduced proportionally.¹

10. Determination of compensation

10.1 Death benefits:

- 10.1.1 If the insured dies as a result of an accident within three years from the date of the accident, death benefits will be paid, less any benefits that VÍS may have paid to the insured for permanent disability due to the same accident.
- 10.1.2 VÍS has the right to request an autopsy be performed on the deceased to ascertain the cause of death and other issues that may affect VÍS's liability.
- 10.1.3 Entitlement to death benefits is governed by the provisions of the collective wage agreements that apply to the insured.

10.2 Compensation for permanent disability (disability benefits):

- 10.2.1 If an accident causes permanent disability to the insured within three years of the date of the accident, disability compensation shall be paid on the basis of the amount in effect on the date of the accident.
- 10.2.2 Permanent disability shall be assessed as a percentage according to the tables of the Disability Assessment Committee in effect at the time of the assessment. In determining the degree of permanent disability, no consideration shall be given to occupation, special skills, or social status. Injuries that cause only cosmetic damage will not be considered permanent disability. If the insured's condition can potentially be improved through surgery or similar interventions, such potential improvement must be taken into account in the assessment. If the insured's injury is not listed in the permanent disability tables, it shall be assessed specifically with reference to those tables. Permanent disability can never exceed 100%. Disability benefits are paid in proportion to the insured amount according to the provisions of the collective wage agreement. When calculating disability benefits, no account is taken of any disability existing prior to the accident.
- 10.2.3 When assessing permanent disability, a proportional rule shall be applied where applicable.
- 10.2.4 The multiplier effects of the disability points take account of the provisions

¹ According to Article 88 of Act No. 30/2004 on Insurance Contracts.



of the collective wage agreements that apply to the insured.

- 10.2.5 The loss or impairment of a limb or organ that was already non-functional prior to the accident gives no right to disability benefits. The loss or impairment of a limb or organ that was previously impaired will be assessed as permanent disability with regard to the prior impairment before the accident.
- 10.2.6 Permanent disability shall generally be assessed one year after the accident, or otherwise when a physician considers that the permanent consequences of the accident have become apparent, but no later than three years after the date of accident.
- 10.2.7 If the insured dies before permanent disability has been assessed, no disability benefits will be paid..
- 10.2.8 If available medical records indicate permanent consequences due to the accident, VÍS staff will assess their extent based on the disability tables of the Disability Assessment Committee. If VÍS staff deems it necessary, VÍS may obtain an independent specialist's assessment on the consequences of the accident.
- 10.2.9 The insured must request an assessment by VÍS in accordance with Article 10.2.8 no later than three years after the accident date; otherwise, his right to compensation under the insurance expires.
- 10.3 Compensation for temporary loss of working capacity (daily benefits):
- 10.3.1 VÍS decides on the payment of daily benefits based on medical certificates and other available documentation.
- 10.3.2 If an accident causes temporary loss of working capacity to the insured, VÍS pays daily benefits. Daily benefits are paid in proportion to the loss of working capacity from the end of the waiting period and as long as the insured is deemed unfit for work by a physician, or until a disability assessment has been made.
- 10.3.3 Daily benefits are not paid for longer than the maximum compensation period stated in the policy or renewal receipt and not after three years have passed since the date of accident.
- 10.3.4 If the loss of working capacity is partly due to causes other than the accident, the daily benefits will be reduced proportionally to the extent these causes contributed to the loss of working capacity.
- 10.3.5 Daily benefits are paid to the policyholder while he is paying the insured salary pursuant to the collective wage agreement and thereafter to the insured.
- 10.3.6 Daily benefits are paid at the end of each month.
- 10.4 Compensation for dental fractures:
- 10.4.1 VÍS's payment for damage to teeth is limited to 5% of the insured amount for disability benefits for each accident, and the total combined payments for accidents in any insurance period will not exceed 7.5% of the same amount.
- 10.5 VÍS has the right to have the insured examined by a doctor of its choice.
- 10.6 VÍS pays the cost of necessary medical certificates related to the claim when these are obtained at the request of VÍS.

11. Assignment

- 11.1 The insured may not assign his rights under the insurance contract without VÍS's consent.

III. Insurance of personal effects (optional)

12. What is insured?

- 12.1 Insurance of the insured's personal effects is included if it is specified in the policy or renewal receipt.
- 12.2 The insurance covers clothing and personal effects owned by the insured. Personal effects refers to items such as watches, jewellery, glasses, hearing aids, orthopaedic aids and similar items that it is normal for the insured to carry on his person in the performance of his work.
- 12.3 The insurance does not cover smart devices, laptop computers and other comparable items. However, loss of or damage to mobile phones and smart devices is compensated if it was necessary for the employee to use or carry such a device in the performance of his work.
- 12.4 The insurance does not cover tools of any kind.

13. What is covered under the insurance?

- 13.1 The insurance covers loss of or damage to insured items caused by a sudden and unforeseeable external event in the performance of work at the workplace or in direct



connection with the insured's work, where the policyholder is liable pursuant to the collective wage agreement.

14. What is not covered under the insurance?

- 14.1 The insurance does not cover:
- a) Loss or damage occurring because the insured item is misplaced, forgotten, lost or left in a public place.
 - b) Loss or damage for which the policyholder is not liable under the collective wage agreement due to negligence or carelessness by the employee in handling or safekeeping the insured item.
 - c) Loss or damage caused by long-term damp, leakage or contamination, or loss or damage caused by mould or fungal growth.
 - d) Theft of insured items occurring without burglary into locked premises, a locked vehicle or locked storage unit. Loss or damage due to burglary theft is compensated only if there are clear signs of burglary at the scene.
 - e) Cosmetic damage that neither reduces the value nor the usability of the insured item.

15. Determination of compensation

- 15.1 Compensation is based on the value on the date of loss.
- 15.2 If it is possible to restore the damaged item to a similar condition as before the loss, and the repair cost is deemed reasonable by VÍS, VÍS may either reimburse the insured for the estimated repair expenses or have the necessary repairs carried out at VÍS's expense. The repair is considered complete, even if it is visible that the item has been repaired.
- 15.3 If it is not possible to restore the damaged item or the cost is deemed unreasonable by VÍS, VÍS may either compensate the insured with a cash payment or provide a comparable replacement for the damaged item. If compensation has been paid according to this provision, VÍS reserves the right to place a claim on the item that was damaged.
- 15.4 VÍS has the right to pay the difference between the value of the damaged item as the value stood prior to the loss event and the value after the loss event.
- 15.5 Compensation is paid to the policyholder if he has paid compensation for the damaged item, otherwise to the insured.
- 15.6 The insured shall not benefit from the loss event. The insurance shall only compensate for actual loss suffered by the insured.

The information provided on the right margin is for the guidance of customers only and is not part of the terms themselves and is not intended to be used for interpreting specific clauses of the terms.

This is a translation of the authoritative Icelandic text. In the event of any discrepancies between the translation and the original Icelandic text, the original text shall prevail.