

Statutory Accident
Insurance
2010

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The Statutory Accident Insurance 2010

The guide is a provide help for those who are responsible for the management of statutory accident insurance in companies. The guide describes statutory accident insurance and matters that the person responsible for insurance must report to Tapiola during the year or otherwise take into account. Information about statutory accident insurance is also available at tapiola.fi/tapaturma and via our telephone services.

Important figures in 2010

Accident insurance contribution (tariff premiums)

- Deductible: EUR 206/accident (for policies with deductible)
- Minimum annual earnings used as compensation criterion: EUR 11 340
- Minimum contribution: EUR 100 (construction companies: EUR 180)

Employee's group life insurance contribution

- 0,069 % from the wage sum, minimum contribution of EUR 7,80
- 0,069 % for municipalities, municipal federations and parishes, minimum contribution EUR 7,80

Employer's unemployment insurance contribution

- 0,75 % from the total wage sum, up to EUR 1 846 500
- 2,95 % for the part exceeding EUR 1 846 500
- 0,75 % for part-owners

Wage-earners' unemployment insurance contribution

- 0,40 % from the wage sum
- 0,15 % for part-owners

Discount for using Tapiola's Online Services

Employers who complete accident and occupational disease reports and salary reports through Tapiola's Online Services (for corporations) receive a discount of 2% for statutory accident insurance premiums in 2009. The Online Services can also be used to review and print a company's occupational safety statistics and view the full insurance security in real time.

Statutory accident insurance

Statutory accident insurance is part of Finnish social security. The Employment Accidents Act guarantees that injured people receive good security in case of an occupational accident or disease. The majority of compensation comprises compensation for lost earnings during the disability period and compensation for medical care.

Obligation to insure

The employer is obligated to insure its employees with statutory accident insurance if work is carried out for more than 12 working days in total during a calendar year. Foreign employers are also obliged to insure when work is carried out in Finland.

A builder of a detached house hires two employees to carry out foundation work and two carpenters to build the house. The foundation work is estimated to take three days and the building work is to take four days. Thus work is done for a total of 14 person-workdays, meaning that the builder of the detached house is obligated to insure.

If an employer obligated to insure has not taken out accident insurance, the Federation of Accident Insurance Institutions will pay accident compensation to the injured employee. In this type of situation, the Federation of Accident Insurance Institutions will collect some of the compensation from the employer obligated to insure (a maximum of EUR 2060 in 2010), as well as increased insurance premiums over the period for which the obligation to insure has been neglected. If an occupational accident is caused in carrying out work for an employer who is not obligated to insure, increased premiums will not be collected. However, the employer must pay part of the compensation (a maximum of EUR 103 in 2010).

Commencement of insurance

The employer must take out statutory accident insurance for its employees before commencing any work to be insured. Insurance cannot be taken out with retroactive effect.

Insurance will commence at the earliest when the employer notifies a Tapiola agent of taking out insurance. Insurance can also be taken out by phone. The insurance application must be completed thoroughly so that Tapiola receives all the information required for managing insurance.

The builder of a detached house commences work on Monday 15 May 2009. However, he/she is too busy to return the insurance application until the following day. In this case, the insurance policy will enter into force on 16 May 2009 and no accident taking place on 15 May 2009 will be compensated for on its basis.

Continuous accident insurance valid with another insurance company can be transferred to Tapiola if it has been in effect with the other insurance company for a minimum of one calendar year. A separate transfer application must be completed for the transfer. The replacement of insurance can be carried out on predetermined dates on a quarterly basis (1 January, 1 April, 1 July and 1 October). Insurance will commence in the new company within three months, starting from the final date of the transfer period. If, for example, an application is filed by the end of September, insurance will be transferred to Tapiola starting at the beginning of the next calendar year.

After receiving an application, Tapiola will confirm the commencement of insurance by sending an insurance policy to the employer, as well as a certificate of the validity of insurance and an advance invoice for the first insurance period.

Continuous or fixed-term insurance

When the work to be insured is continuous, accident insurance also continues year after year. Seasonal, annually repeated work is also considered to be continuous work (e.g. picking of strawberries in summer, asphalt work, summer restaurants etc.).

For continuous insurance, the insurance period comprises one calendar year. For new insurance starting in November or December, the insurance period is longer. It will continue from the commencement of insurance to the end of the following calendar year.

Parents hire a child's nurse in November, for whom they take out statutory accident insurance. The first insurance period will end at the end of the following year.

Fixed-term insurance can be taken out if the work is estimated to take less than a year. For example, construction workers can be insured using fixed-term insurance. Fixed-term insurance is in effect for the duration of the work and terminates without any separate notice. The insurance period is as long as the validity of insurance.

Insurance applies to all employees

Statutory accident insurance taken out for employees provides security prescribed by law to everyone in the employer's service.

However, the employer can obtain separate insurance for certain parts of the company or specific work. Separate insurance helps in allocating expenses or monitoring occupational accidents.

A workshop has insured its employees using continuous insurance. The company expands its workshop building, for which purpose it hires construction workers. They can be insured under separate fixed-term insurance.

At the same time, the company expands its operations to another municipality and opens a new agency. The employees working in the new agency fall under the existing accident insurance policy, but they can also be insured using separate insurance.

The employer's risk

Generally, accident insurance is taken out without deductible. However, the employer can take out insurance with deductible.

The deductibles will be collected from the employer twice a year by means of a separate invoice. The deductible is determined annually. In 2010, it is EUR 206 for each case of accident or occupational disease.

People to be insured

People to be insured using statutory accident insurance include 1) all employees in an employment relationship; 2) shareholders of a limited company and 3) owners of the company when they work in the company.

Those who are not within the scope of statutory accident insurance as people to be insured obligatorily can be insured voluntarily. These include independent entrepreneurs and their family members living in the same household with the entrepreneur as well as owners of companies under certain requirements. (See 'Partners and shareholders', on page 7.)

Statutory accident insurance can also be expanded to cover leisure-time accidents. Entrepreneurs' accident insurance will be in effect at all times – within and outside working hours.

More information about voluntary insurance can be found on page 20.

People in an employment relationship

A person is in an employment relationship when:

- the person works for another person
- an agreement is signed for the work
- the person gets compensation for work
- the person is under the employer's management and supervision

Work is done for another person when the worker does not perform it as an independent entrepreneur or a self-employed person.

The employment agreement may be verbal or written. It may also be a tacit agreement, in which case both parties to the agreement have approved the employment relationship and act accordingly.

Compensation is generally a monetary wage but it may also be other compensation of monetary value for work carried out, such as a fringe benefit. A work performance is also compensation when it is performed as compensation for work carried out by another person.

The employer has management and supervision when he/she has the possibility to supervise working methods and work results.

A developer of a detached house buys a complete house package that includes the building of the house. The supplier of the house pays the builders' salaries and social contributions. The builders are in an employment relationship with the house supplier.

The developer hires a carpenter for indoor work. The carpenter is in an employment relationship with the developer. Foundation work is performed as voluntary work participated in by five people. The volunteers are not in an employment relationship because they do not receive any compensation. The developer should insure them using voluntary volunteer work insurance.

A lorry driver transports sand to the house, and electrical work is carried out by an electrical contractor. The driver and electrical contractor work as independent entrepreneurs and are not within the obligation to insure.

An employee is in an employment relationship with an employer if he/she works for the employer as a member of a team. In addition, if the team is aided by employees who are hired with the consent of the employer, the employees will also be in an employment relationship with the employer.

Whether the employees' employment relationship is fixed or continuous does not have an impact on the obligation to insure, nor does the age and nationality of the employee.

A commission agreement signed by a family nurse pertaining to the Family Carer Act with a municipality or a municipal federation is, according to the legislation, comparable to an employment agreement. Thus a municipality and municipal federation must insure family nurses.

Entrepreneurs and their family members

Private entrepreneurs or self-employed people and their spouses and family members living in the same household are left outside statutory accident insurance, even though they are working in the company.

In statutory accident insurance, 'family member' refers to a person who regularly lives in the employer's household and is directly related to the employer or his/her spouse in a younger or elder generation. Such family members include the employer's spouse, children of the employer or his/her

spouse, adopted children, parents, adopted parents or a spouse of any of the above. Those living in a registered relationship are comparable to married partners. A cohabitant is not regarded as a family member as in unemployment insurance.

A gardener is aided by his/her sister, who lives regularly in the same household. The sister must be insured using statutory accident insurance because she is not related to her employer in a directly younger or elder generation; instead, she is a collateral kinsman.

Farm entrepreneurs and farm employees

Statutory accident insurance does not include 1) family business members working on a farm, 2) partners of a general partnership or partnership company or 3) majority shareholders of a limited company who are entitled to compensation according to the Farmers' Accident Insurance Act (MATA).

Those family business members and farm entrepreneurs who are left outside statutory insurance under MATA can take out voluntary accident insurance from the Agricultural Entrepreneurs' Pension Insurance Institute.

Partners and shareholders

Shareholders of a limited company and partners of a corporate group, general partnership and partnership company are generally employees to be insured when they are working in the company in question. However, insurance does not include an official in a leading position within a limited company when he/she owns more than 50% of all of the company's shares him- or herself or with a family member living in the same household. Both the leading position and the ownership requirement must be fulfilled. A person who daily executes decision-making power within a company is considered to be in a leading position. The partnership or the number of shares owned by the person has no influence in the assessment. Ownership refers to direct ownership, not ownership through another company.

A married couple owns all shares of a limited company in the baking industry. One of the spouses is the managing director, the other an office worker. The managing director is responsible for the bakery operations, and the office worker manages accounting and invoicing. The office worker partner is an employee to be insured using statutory accident insurance. By contrast, the managing director is not included in the insurance policy because he/she is in a leading position and owns, together with his/her family member, more than half of all shares of the company. Shareholders and partners left outside the insurance cover can be insured for accidents and occupational diseases under voluntary insurance.

Insurance cover for partners and shareholders		
Company form	Subject to mandatory insurance	Subject to voluntary insurance
Limited company	A shareholder not in a leading position. A shareholder who, at most, owns 50% of all shares alone or together with his/her family.	A shareholder who is in a leading position and owns more than 50% of all shares alone or together with his/her family.
Partnership company	A general partner, who, at most, holds 50% of the general partners' authority/total number of partnership interests, alone or together with his/her family. A silent partner.	A general partner who holds more than 50% of the general partners' authority/total number of partnership interests, alone or together with his/her family.
General partnership	A partner who, at most, holds 50% of the authority / partnership interests, alone or together with his/her family.	A partner who holds more than 50% of the authority / partnership interests, alone or together with his/her family.
One-man business or self-employed person	Collateral kin (e.g., brothers and sisters). A cohabitant who is paid a salary.	The employer or his/her spouse or family member who regularly lives in the employer's household and is related to the employer in a directly younger or elder generation or is his/her spouse.

A partner of a general partnership or a general partner of a partnership company is left outside the insurance policy when said partner holds more than 50% of the company's authority alone or together with his/her family members. If the authority is not stated in the partnership agreement, the matter is to be settled according to partnership interests. Finally, the matter will be settled per capita.

Silent partners of a partnership company are always employees to be insured using statutory accident insurance if they work in the company and receive compensation for their work. Whether the silent partner is the partner's family member is not significant.

A partnership company specialising in water and sewage work has two regular partners, A and B. The partnership agreement states that B has greater authority. A is to be insured using statutory accident insurance because his/her authority is not more than 50%. Shareholders and partners left outside the insurance cover can be insured for accidents and occupational diseases using voluntary insurance.

Working abroad and foreigners working in Finland

EU, EEA and social security agreement states

The basic principle in EU and EEA states and social security agreement countries is that insurance cover is determined according to the legislation in the country of work. However, posted employees are within Finnish legislation for the period stated in the agreement (1-5 years). When an employee posted abroad is to be kept within Finnish social security and statutory accident insurance, the employer must apply for a certificate for the employee. The certificate is applied for at the Finnish Centre for Pensions (form E 101). The Finnish Centre for Pensions forwards the request to the Social Insurance Institution (Kela).

The obligation to insure ceases in Finland when work performed abroad becomes permanent or the employment relationship with the posting company terminates. In this case, the employee can be insured voluntarily, if required. The insurance policy will always be taken out by a Finnish company.

Countries outside social security agreements

Employees who are posted by a Finnish employer to work in a country outside the social security agreements are within Finnish employer accident insurance. The work can be performed for the same employer, or the employee may be posted to a parent company, a subsidiary or an affiliated company belonging to the same economic entity. A person working abroad is kept within statutory accident insurance throughout the working period spent abroad if the employment relationship with the posting Finnish company is maintained. However, the statutory insurance cover should be complemented for leisure-time accidents and illnesses.

The employer can apply for exemption from the obligation to insure from the accident insurance company when the employee has worked abroad for more than two years.

Our international insurance service provides additional information on the insuring of individuals posted abroad (tel. +358 9 453 3732).

A Finnish employer posts an installation team in Kuwait. Accident insurance applies to work performed in that country.

A Finnish electricity company has established a subsidiary in Lithuania that is also registered in domestically. An employee is sent from Finland to launch the business operations as project work. The employee is to return to Finland in a year. The project worker's accident insurance in respect of Finnish legislation will also apply to work performed in the subsidiary.

A Finnish clothing company orders sewing work from Russia, performed by Russian workers. They cannot be insured according to Finnish legislation.

Foreigners in Finland

When a Finnish employer hires a foreign employee for work to be performed in Finland, the employee falls within the scope of statutory Finnish accident insurance.

A posted worker is an employee who regularly works in states other than Finland and whose employer located abroad posts him/her to work in Finland for a fixed period. The posted worker falls under the posting country's social security system and working in Finland requires a certificate for the posted worker. When an employee arrives in Finland through a

foreign employment exchange company with which the employee is in an employment relationship, the employee is in most cases a posted worker. If a certificate has not been granted for the posted worker, the employment exchange company must take out insurance in Finland.

Accident insurance premium

Formation of the insurance premium

The insurance premium of statutory accident insurance is calculated on the basis of the salaries paid to employees and the accident and occupational disease risk of the work. The insurance premium of partners to be insured is based on YEL earnings instead of salaries. The accident insurance premium of household servants and cleaners is exceptionally defined and is based on the number of employees. The minimum payment of insurance taken out for housing or holiday cottage work is also influenced by the volume of the building project.

Insurance premium according to risk

The accident insurance premium consists of a risk premium, insurance management costs and statutory extra charges. The premium is reduced by various types of compensation.

Risk premium

The risk premium share covers any insurance compensation paid. The risk premium is based on accident statistics that are compiled on a national and customer-specific basis. In these statistics, compensation expenses are divided into temporary and permanent compensation. Temporary compensation includes doctor's fees, medical care and examination costs and daily allowances paid during a period of disability. Permanent compensation includes accident and survivors' pensions, disability indemnity paid for permanent disabilities and rehabilitation compensation. Permanent compensation is mainly paid for serious occupational accidents, occupational diseases and deaths. These are rather rare but the amounts paid are great.

The policyholder's own statistics of accidents affect the calculation of the risk premium. The more the company's accident history affects the calculation, the more detailed is the calculation of risk premium. The premium system selected determines the method with which the insurance premium is calculated.

Management costs

Management costs cover any business expenses arising from the management of insurance.

Statutory extra charges

Statutory extra charges amount to 18,4 % of the total premium (in 2010). The statutory extra charges section includes other expenses divided among insurance companies.

The statutory extra charges consist of the following:

- an assessment system premium used to finance index increases in pensions and other increases in compensation
- contribution towards occupational safety used to finance improvements in occupational safety work

Bonuses and rebates

Bonuses and rebates comprise of discounts issued to Tapiola's customers for insurance premiums. In 2010, bonuses for statutory accident insurance will be paid as follows:

- A 5 % customer bonus will be granted to all of Tapiola's statutory accident insurance customers on the basis of the result of Tapiola General Mutual Insurance Company. The discount is taken into account in the insurance premiums included in the offer.
- A 2 % online service rebate will be granted to statutory accident insurance customers who complete their payroll and accident reports through the Corporate Online Services.

Tapiola's premium systems

Tapiola's statutory accident insurance includes alternative premium systems. The selection of the premium system can affect the risk level and the annual fluctuation of the insurance premium. The premium system is more individual the more the customer's accident development affects the insurance premium.

Tariff premium

Tariff premiums are based on national occupational accident and disease statistics. Different types of work are, according to their risk, divided into different risk categories, the premium percentages of which are confirmed annually. The more risky the work is, the higher the premium percentage is. For tariff premiums, the customer's own compensation cost does not have any impact on the insurance premium. Thus the annual premium fluctuations are minor.

Customers whose insurance premium is less than EUR 11 000 (2010) are within the tariff premium. When the limit is exceeded, it is possible to transfer to the special premium.

Special premium

In special premium systems, the insurance premium is defined specifically for each customer. The premium is affected by the business field's common accident statistics and the customer's accident costs arising from statutory accident insurance. Special premium systems are individual solutions with which customers can have an influence on the level of risk selected. The premium is also affected

by the salary amount and its division into different occupational classes.

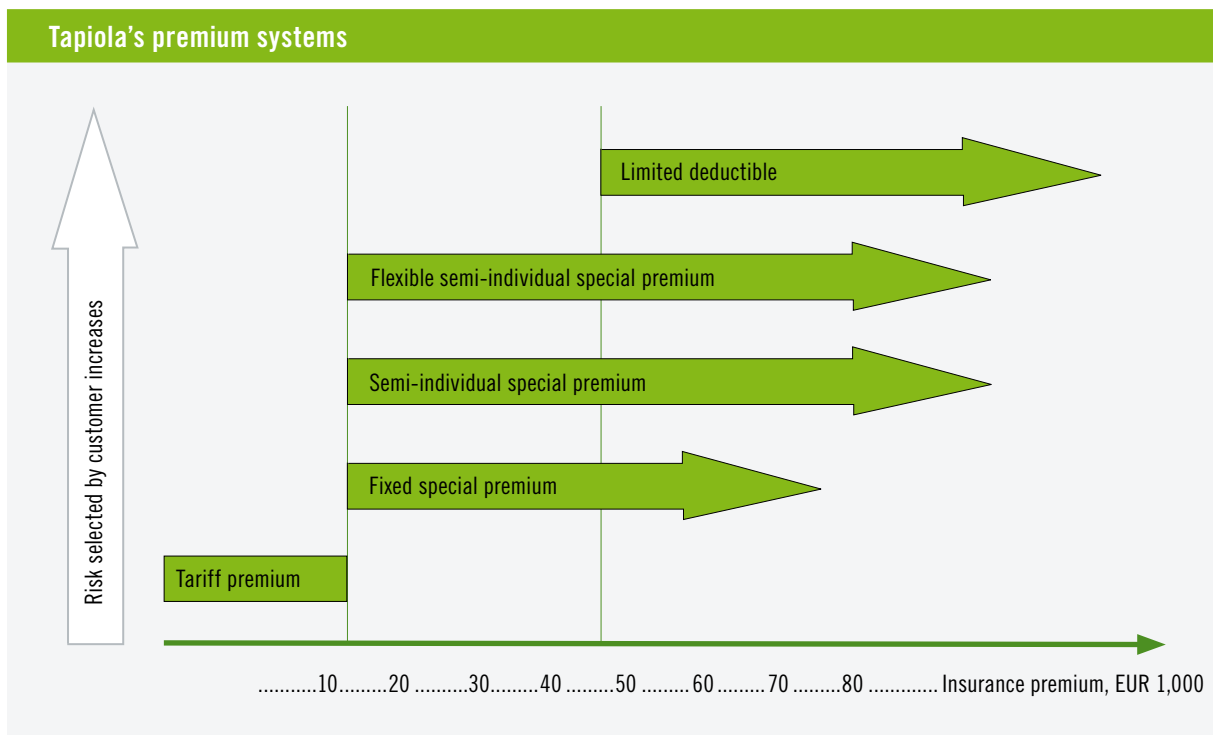
Tapiola's special premium systems are:

1. Fixed special premium (K-erik)
2. Semi-individual special premium (P-yks)
3. Flexible semi-individual special premium (PY)
4. Limited deductible (ROV)

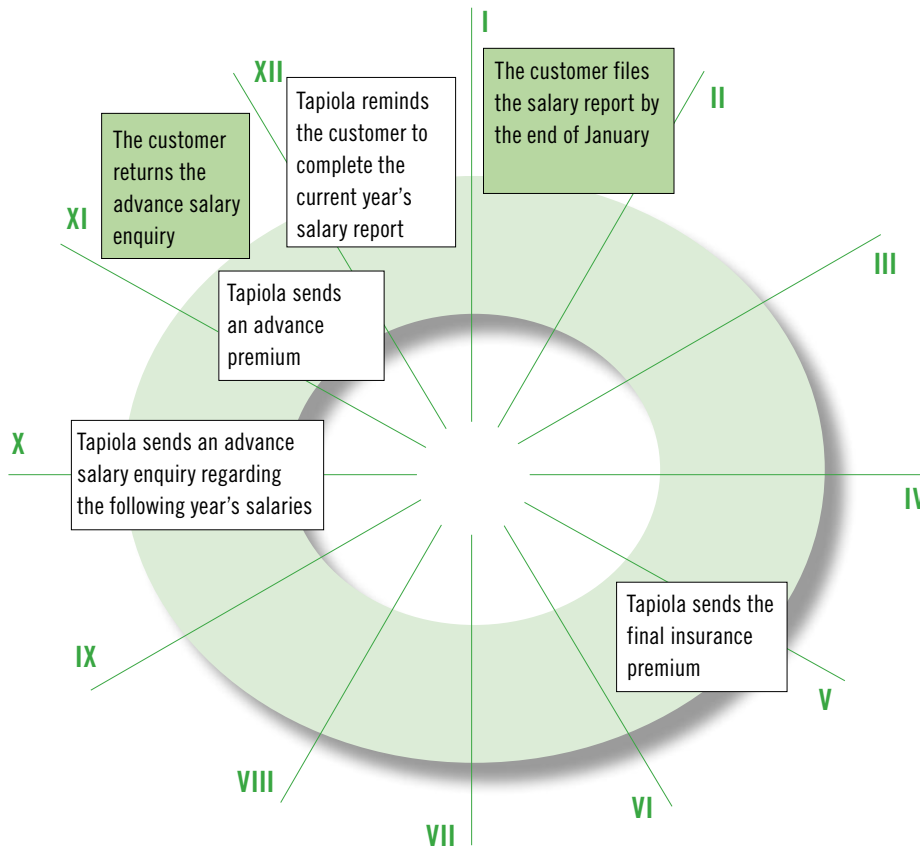
The more individual the premium system the customer has selected, the more exposed to annual fluctuation is the insurance premium.

Payment of the insurance premium

A company pays an advance premium at the beginning of the insurance period for accident insurance. The final premium is calculated on the basis of the data notified in the salary report. The salary report is to be filed by the end of January of the year following the insurance period and Tapiola will send information about the final insurance premium to the employer during the following insurance premium period (usually in spring).



Annual cycle of insurance premiums



Determination and payment of the advance premium

At the beginning of the insurance period - i.e., at the beginning of the year - the advance premium is invoiced. The advance premium for the first insurance period is based on information given in the insurance application and any previous compensation statistics. Later, the advance premium will be based on the most recent final salary information received from the employer and compensation statistics.

The advance premium for accident insurance is generally invoiced in one instalment at the beginning of the insurance period. The advance premium for statutory accident insurance can be divided into two, three or four instalments. In this case, the final insurance premium will include a payment method increase as follows:

Instalments	Increase	Minimum advance premium
2	2,5 %	EUR 160
3	3 %	EUR 240
4	3,5 %	EUR 320

If the payment for accident insurance is delayed, interest will be collected for the period of delay according to the Interest Act. If necessary, the accident insurance premium may be collected through recovery proceedings, in which case the premium collected will be increased by 10% and the recovery authority will collect a collection charge.

Salary report

At the end of the year, Tapiola will send a salary report form, with which the employer can report all salaries paid during the insurance period, itemised into work category. The salary report is to be returned to Tapiola by the end of January. The quickest and easiest way to complete the salary report is through the Corporate Online Services.

Final insurance premium

At the end of the insurance period, the final insurance premium will be calculated according to the salary information reported by the employer in the salary report. If the advance premium has been greater than the final premium, the amount in

excess will be returned to the customer. In the opposite situation, an additional invoice will be sent to the customer. If salaries have not been paid during the insurance period, the minimum premium will, however, be charged.

Advance salary enquiry

At the end of the year, an advance salary enquiry will be sent to major accounts. Significant changes in the salaries to be paid can be reported in the advance salary enquiry.

Management of insurance

Reporting of changes

Insurance should always correspond to the existing conditions, because of which any changes in the following items should be reported to Tapiola.

- policyholder's name
- company's address
- person responsible for insurance matters
- termination date of fixed-term insurance
- a significant change in the salary amount
- a significant change in the work insured
- changes in ownership

If the policyholder wants to remove or include a insurance deductible, the change must be reported before the end of the insurance period. The change will enter into force at the beginning of the following insurance period. A change in the company's ownership must be reported without any delay because it may result in changes in the insurance cover of the shareholders or partners. For voluntary insurance, other specific changes must also be reported. These changes are set forth in more detail in the insurance terms.

When the form of a company is changed, new insurance is to be taken out if:

- a private company is changed into a limited company
- a general partnership or partnership company is changed into a limited company and the limited company to be established will have new shareholders
- a limited company is changed into a general partnership or partnership company

In other cases, insurance will continue regardless of the change in company form when the business ID remains the same.

All changes can be reported using a free-form letter. A change of address and any other change that will not reduce the insurance cover can also be reported by phone. The changes can also be made through the Corporate Online Services.

Termination of insurance

Fixed-term insurance will be terminated when the insured work is ended. Insurance will remain in effect if the work is continued after the date of termination stated in the insurance policy. However, an estimate of the new date of termination must be reported to Tapiola as quickly as possible, before the termination of the agreed insurance period, at the latest.

Continuous insurance will cease when business operations are terminated. When the obligation to insure terminates, the employer must report the cause and date of termination to Tapiola in writing. The owners of the company may continue the operations on their own, in which case the obligation to insure may continue. In a case of bankruptcy, the employer's obligations will be transferred to the bankruptcy estate starting as of the beginning of bankruptcy. A debt restructuring will have no effect on the validity of insurance.

A limited company has two owners, who are brothers and work in the company. In addition, there are other workers. After the operations are reduced, the work is carried out by the owners. They own all of the company's shares, one half each. As a result, they are within statutory accident insurance which cannot be terminated.

Statutory accident insurance will be terminated when the execution authority states that the policyholder is without means or unknown at the time of collection of the accident insurance premium. Insurance will be terminated on the statement date.

Compensation for occupational accidents

An employee is entitled to compensation under the Employment Accidents Act for occupational accidents or diseases. Compensation will be paid for the insurance policy under which the employee falls at the moment of the accident or occupational disease.

The primary payer of compensation is the accident insurance company and the employee will be entitled to compensation even if the accident is also part of another compensation system. The possibility of receiving compensation from another source does not have an influence on the amount of accident compensation, but compensation for occupational accident may reduce other compensation. For example, a motor insurance company pays compensation for a traffic accident compensated as an occupational accident to the injured party with regard to parts not covered by accident insurance. A pension insurance company also takes into account compensation paid due to disability in accordance with the Employment Accidents Act.

A taxi driver who was injured in a traffic accident while on duty receives compensation for medical costs and disability through statutory accident insurance, but compensation for damaged clothes and injuries is based on motor insurance.

An employee is entitled to compensation, even if the insurance policy is not in effect. In this case, the damage is handled and compensation is paid by the Federation of Accident Insurance Institutions.

A person hires his/her neighbour to wash his/her windows. The work is done within a day. The neighbour falls from a ladder and becomes injured. The person doing the hiring had not taken out insurance because he/she was not obligated to insure. The Federation of Accident Insurance Institutions will pay compensation to the employee.

Occupational accidents and diseases meriting compensation

An employer must report to Tapiola if an accident takes place that is within the scope of statutory accident insurance. As a result, it is good to know what kinds of cases are within statutory compensation. In unclear situations, the employer should file a report and leave the issue to be decided by Tapiola. Compensation under the terms of the Employment Accidents Act is paid for the following:

- occupational accidents
- an assault taking place at work or in work-related conditions
- occupational diseases
- certain other injuries caused at work during a short period
- if an injury or illness caused by an occupational accident becomes significantly worse

Occupational accident

An occupational accident is an accident that causes an injury or illness and takes place:

- at work
- in work-related conditions
 - In the workplace or a connected area
 - During a trip between the workplace and home
 - When the employee is sent on an errand by the employer
- when the employee attempts to protect or save the employer's property
- when the employee attempts to save a person's life in connection with his/her tasks

An accident caused in the above-mentioned conditions due to a war or an armed conflict is also considered to be an occupational accident. The characteristics of accidents include suddenness, external causes and unpredictability. An accident cannot be caused intentionally.

The payment of accident compensation requires that there is a medically defined causality between the accident and the injury or illness.

Accidents include the following:

- A construction worker trips over a pallet lying on the ground and hurts his/her wrist.
- A salesperson slips and is injured during a normal trip from the workplace to the home.

An assault at work or on a way to work

Compensation will also be paid if an assault or other intentional act by another person causes an injury at work or in work-related conditions (e.g., on the way to work.)

Occupational disease

An occupational disease is an illness most likely caused by physical, chemical or biological factors related to work. An occupational disease is defined in the Occupational Diseases Act and the related statute. The statute lists the most common occupational diseases and their causes.

Workshop noise causes hearing damage in the employee's inner ear. A baker becomes allergic to flour dust due to wheat flour. These are typical cases of occupational diseases.

Injuries caused during a short period

The Employment Accidents Act lists a group of injuries to be compensated as occupational accidents. These include the following:

- an abrasion or chafing
- a muscle or tendon becoming sore during a movement required by work, if the injury is not caused by other defect, injury or illness
- a frost injury or a sunstroke caused by irregular temperatures

A requirement for receiving compensation for these injuries is that they be caused during a short period, a maximum of one day.

Worsening of another injury or illness

When an occupational accident causes another injury to become significantly worse, compensation for the period of temporary deterioration will be paid according to the Employment Accidents Act. In addition, physical, chemical or biological conditions in the workplace can cause a previous illness subject to accident insurance compensation to grow worse.

Compensation

According to the Employment Accidents Act, expense compensation, daily allowance, employment accident pension, disability indemnity, rehabilitation allowance, funeral grants and survivors' pension are paid as compensation.

Generally, compensation is paid directly to institutions for treatment costs and to the injured ones for the period of disability. Employers can also receive compensation if the employer has paid treatment costs or salary during sick leave.

Expense compensation

Medical costs

According to the Employment Accidents Act, the necessary medical costs for treating an injury must be compensated. These include medicine prescribed by a doctor, daily hospital charges and doctor's fees. Medical costs for occupational accidents taking place on 1 January 2005 or later will be compensated on the same grounds, regardless of whether the treatment is given in a private or public institution. The objective is to provide injured people with treatment as quickly as possible.

Single doctor's appointments and any related minor treatments and urgent hospital care will be compensated without any financial commitment. The insurance company's financial commitment will be required for all further treatments and examinations. The institution will request financial commitment from the insurance company. In addition, any necessary treatment-related travel expenses will be compensated. These include trips to the hospital or the doctor.

Examination expenses

If it is not clear whether the symptoms are caused by an accident or occupational disease, any expenses arising from examinations will be compensated. However, the requirement is that there be justified cause to suspect that the injury is caused by an accident or the disease by the workplace conditions. In addition, any travel expenses arising from examinations will be compensated and daily travel allowance will be paid to the employee. Any loss of income will not be compensated. Examinations will be compensated, even if it is stated that the injury was not caused by an accident or occupational disease.

A cleaner has eczema on his/her hand. The occupational healthcare doctor states that the employee must be ordered to an examination in order to ascertain whether the eczema is caused by work. The examination proves that the eczema is caused by bracelets and not by work-related factors. The examination costs will be compensated.

Other expenses

Injured people will also be paid for the following:

- compensation for additional home care costs arising from an injury over a maximum period of a year after the injury
- a disability supplement when a person, as a result of an injury cannot manage without the help of another person or the injury causes significant damage
- a clothing supplement when a prosthetic or other aid causes wear to clothing
- a guide dog supplement

Material damage

When an employee's worn glasses, hearing aid, dentures, protective bandage/vest or prosthetic limb is damaged in an accident, compensation will be paid for the item(s).

On the way home from work, an employee hit another cyclist while riding a bicycle, fell off the bicycle and hit his/her face and knees such that there were scratches. The person's eyeglasses were also damaged. Compensation was paid for the glasses. If the person's clothes, shoes or ring must be broken in order to treat an accidental injury, compensation will be paid for them. Other material damage will not be compensated according to the Employment Accidents Act.

Daily allowance

When an accidental injury or occupational disease results in disability, daily allowance will be paid for the disability period. The daily allowance will be paid if an accident causes disability for at least three consecutive days, not including the date of accident. The daily allowance will be paid for a maximum of a year, starting on the day following the accident. The daily allowance will be paid for each day, including Saturdays and holidays. If the accident takes place on 1 February 2009, the daily allowance will be paid until 1 February 2010, from 2 February 2009.

An occupational accident took place on the morning of 1 February 2009. Because of the injury, the employee was unable to work until 5 February 2009. There were four disability days after the date of accident. As a result, daily allowance was paid for four days after the accident.

For occupational diseases, the daily allowance period is determined on the basis of the date of observing the occupational disease. The date of observing an occupational disease is the date on which the person visited the doctor for the first time in order to examine an illness that then or later is identified as an occupational disease.

The amount of daily allowance is affected by the employee's salary. In addition, the agreed annual earnings will be taken into account if the employee has also been an entrepreneur and taken out accident insurance for entrepreneurs in compliance with the Employment Accidents Act. If the daily allowance does not reach the level of minimum annual earnings confirmed for the accident year (EUR 11 340 in 2010), the daily allowance will be paid according to the minimum annual earnings. However, this will not be the case if the injured person is a secondary-income pensioner who has earned minor income by working occasionally. Daily allowance paid to employees constitutes income subject to taxation.

For the first 28 days, the amount of daily allowance equals the sick pay paid by the employer or earnings from the previous four weeks, after which it will be determined by the annual earnings.

Daily allowance over the first 28 days after an accident

The amount of the daily allowance equals the sick pay paid by the employer and is paid to the employee. As a result, the employer must use the accident reporting form to report to Tapiola the time, over which the employer has paid sick pay and the amount of the sick pay.

A person injured in an occupational accident has been unable to work for a week and the employer reports that he/she has paid EUR 400 of sick pay. The daily allowance for the week is EUR 400, which will be paid to the employer.

If an injured person has had several employers, in the case of an accident the daily allowance will be determined on the basis of sick pay paid by each employer or previous earnings.

If an employer has not paid any sick pay, the daily allowance will be determined according to what the employer has paid over 28 days preceding the injury. As a result, salary information from four weeks prior to the accident is to be reported in the accident report form.

An employer has paid a monthly salary of EUR 1,700 to an employee before an accident. The person injured will be paid a daily allowance of EUR 56.67 for the period for which the employer has not paid sick pay.

Daily allowance when 28 days have passed from an accident

If disability continues after 28 days, the daily allowance will be determined according to annual earnings.

Annual earnings consist of the income the person would earn in a year, according to the level of income received on the date of injury. If the income level is greater or smaller than the regular income level, the annual earnings are to be estimated to correspond to the stabilised income level. The Employment Accidents Act has separate regulations for the annual earnings of students, trainees and other young people. Annual earnings are affected by the salary, holiday bonus pay, natural benefits and other compensation received for work. Secondary income will also be taken into account in calculating annual earnings.

Annual earnings are affected by the salary, holiday bonus pay, natural benefits and other compensation received for work. Secondary income will also be taken into account in calculating annual earnings.

When a person with a monthly salary of EUR 1,700 receives holiday bonus pay of EUR 850, the person's annual earnings are $12 \times \text{EUR } 1,700 + \text{EUR } 850 = \text{EUR } 21,250$ (no natural benefits, overtime or secondary work).

In order to determine annual earnings for disabilities longer than 28 days, the employer is requested to provide information on income from a period of one year preceding the accident, irregular absences and salary increases for one year before the accident.

If the employer has paid sick pay for this disability period, the allowance corresponding to the paid sick pay will be refunded to the employer.

When annual earnings are EUR 21,250, the daily allowance is $21,250/360 = \text{EUR } 59.03$. When an employer has paid sick pay of EUR 850 for half a month, the employer will receive EUR 850 as compensation. The rest of the 15-day daily allowance will be paid to the employee.

Compensation for loss of income

If an employee goes to physical therapy due to an accident injury, the employee will be paid compensation for lost income. Compensation will be paid to the employer if the employer has paid salary for the period. The compensation will be paid in relation to a maximum of 30 days in a calendar year. Compensation is subject to taxation if it is paid to an employee.

Employment accident pension

When a person is unable to work after a year from the accident or observation of an occupational disease, the person will be paid employment accident pension for a decrease in earnings over the disability period.

There has been eczema on a cashier's hands for a long time. The cashier has visited a doctor because of the eczema for the first time on 5 June 2008. In an examination performed in autumn 2009, the eczema was stated to be caused by an occupational disease. As a result, the cashier was unable to work in autumn 2009. Because more than a year had passed from the observation of the occupational disease, employment accident pension was paid for the disability period.

Employment accident pension will be paid if an injury reduces working capacity by at least 10% and reduces the income level. In assessing a reduction in working capacity, the employee's ability to acquire income through work that can reasonably be required from the employee will be taken into account. This is affected by the person's education, age, previous work experience, living conditions and comparable factors.

For those completely unable to work on account of an occupational accident or disease, pension of 85% from annual earnings will be paid until the age of 65, after which the full pension will be 70% of the annual earnings. If an injury causes partial disability, pension will be paid in the amount of full pension corresponding to the reduction in working capacity. Partial pension will also be reduced at the age of 65.

A person performing heavy work is not able to carry out his/her previous work as a result of an occupational injury. The employer organises lighter work with reduced pay.

The accident insurance pension is determined on the basis of the reduced earnings. When the sal-

ary was EUR 20,000 a year previously and is EUR 12,000 a year for the current tasks, the reduction in income is 40%. Thus 40% of pension from the full pension will be paid.

The employment accident pension is adjusted annually by an index increase.

If an employer has paid sick pay for an employment accident pension period, the pension will be paid to the employer up to the amount of the sick pay, and the remaining pension will be paid to the employee. Employment accident pension is subject to taxation.

Disability indemnity

A person who has been injured will be paid compensation for any disability caused by an accident or occupational disease when the status of the injury has stabilised, after one year from the injury at the earliest. Disability indemnity compensates for permanent general damage caused by an injury. The magnitude of damage is not affected by the employee's annual earnings. Any reduction in working capacity will be compensated for using the employment accident pension.

The Ministry of Social Affairs and Health has defined disability categories for different injuries. The greater the disability category, the greater the amount of compensation. Compensation for a minor injury will be paid as non-recurring compensation. A person receiving compensation for a major injury can choose whether to accept non-recurring compensation or continuous compensation. The disability indemnity constitutes tax-free income, and a continuous disability indemnity is tied to the employment pension index.

Survivors' pension

When an accident or occupational injury causes death, survivors' pension will be paid to the beneficiaries. The survivors' pension consists of the widow's pension and child's pension, and its maximum amount is 70% of the deceased person's annual earnings.

Beneficiary of the widow's pension

Widow's pension can be received by the widow or a cohabitant. The cohabitant is entitled to pension when he/she and the deceased person have a common child or when he/she and the deceased person, at the time of death, had an agreement on mutual support authenticated by an authority.

An employee fell from a roof and died. He/she lived with a cohabitant in a house they owned together and for which they had taken out a loan. They did not have a child or an agreement of mutual support. The cohabitant did not receive widow(er)'s pension.

The widow's pension is 40% at maximum and 15% at minimum of the deceased person's annual earnings. The amount of widow's pension depends on the number of children entitled to pension payments. The widow's income also affects the amount of pension. The income may reduce the pension after a year from the death, at the earliest, and from the date on which the pension of the widow's child entitled to child's pension ends, at the latest.

Entitled to child's pension

Child's pension can be received by:

- children under the age of 18
- 18-24-year-old children who are studying
- disabled children under the age of 18 until the age of 15

The amount of child's pension depends on the number of children entitled to the pension. The child's pension for one child is 25% of the employee's annual earnings and a total of 55% for four or more children. The pensions are tied to the employment pension index and constitute income liable for taxation.

Rehabilitation

Rehabilitation is part of compensation pertaining to the Employment Accidents Act. Rehabilitation will be compensated when work and working capacity or earning possibilities have reduced due to an occupational accident or disease, or if the need for rehabilitation is apparent later.

In occupational accident insurance, rehabilitation stands for actions with which the return to work and work performances are advanced and supported, defects affecting the working capacity are reduced and independent performances are improved.

Tapiola has an active responsibility to identify and manage rehabilitation. The matter can also be launched by the person injured, the employer or the treatment institute. The rehabilitation matter is identified together with the employer if workplace actions can be used to advance the return to work. The Insurance Rehabilitation Association is often used to provide help in the identification process. In rehabilitation, all decision will be made and compensation will be paid by the insurance company.

Rehabilitation of working and operational capacities

Rehabilitation periods in non-institutional and institutional care and medical aids (such as a wheelchair for handicapped people) will be compensated as rehabilitation of working and operating capacities.

Vocational rehabilitation

Vocational rehabilitation serves to advance the return of an employee to his/her previous or new tasks. Work testing, work training or vocational training and working aids in the workplace will be compensated for as vocational rehabilitation.

- Work testing serves to identify the need for work arrangements or the suitability of new work or support the return to the previous tasks after a long disability period.
- Training can be vocational extended training based on previous education or new vocational training.

Full employment accident pension will be paid for the rehabilitation period and the related inspection and waiting period. Reasonable travel and other such expenses arising from training will be compensated. If necessary, pension will be continued to be paid for a reasonable employment period of a maximum of six months. If the income level associated with the new training is lower than the previous income level, partial pension will be paid corresponding to the reduction in earnings.

Due to a vocational asthma, a baker is unable to perform his work as a baker. He/she is paid for training to become an electric installation worker and full employment accident pension is paid for the training period. The income level of an electric installation worker is 10% lower than the previous income level of a baker and it will be compensated using a partial pension for as long as the income level does not reach the previous level.

Funeral grant

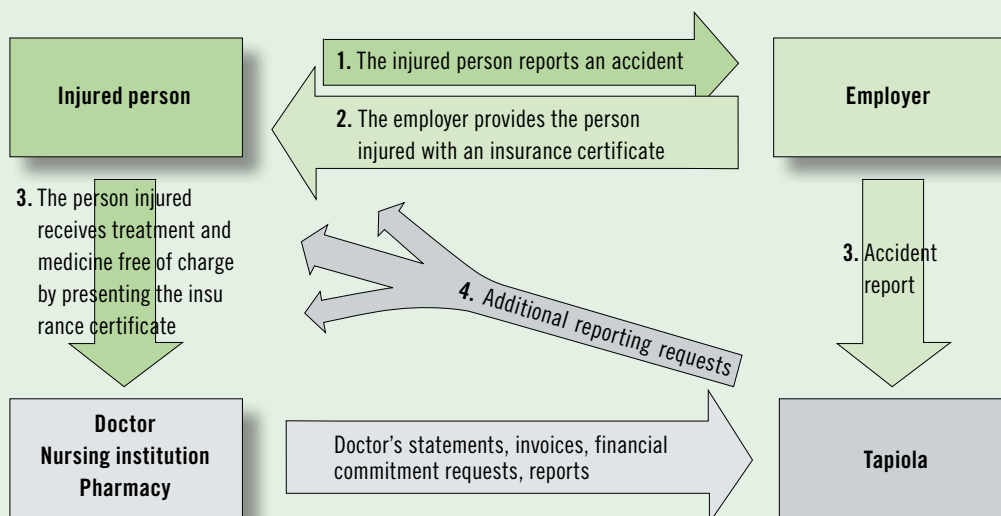
If an accident or occupational disease leads to death, a funeral grant will be paid from accident insurance to the estate (EUR 4 350 in 2010).

In cases of an injury

In the event of an accident, the employer must ensure that the injured person can receive treatment as quickly as possible. The employer must also provide the employee with an insurance certificate so that the employee receives the treatment required free of charge. On the basis of the insurance certificate, the nursing institution will be aware of the insurance company to which it will send the doctor's statement and invoice. The insurance certificate can be printed from Tapiola's Web site.

The employer must report any accidents and occupational diseases to the insurance company without

Procedures in the event of an accident



delay by using the accident report form. Serious injuries and deaths must also be reported to the police and the labour protection authority.

When a change can be applied for a decision

The decision upon a compensation case is issued on the basis of the accident report, doctor's statements (E statement) and other documents and additional reports.

If the compensation decision does not satisfy the party concerned, the claims settler should be contacted. It is possible that not all important information has been introduced in making the decision. If there are matters to be adjusted, the insurance company can change the decision issued.

Daily allowance was paid due to an accident according to the salary paid by the injured person's main employer. The person injured wondered why the amount of compensation was so small, even though his/her annual earnings were much higher as a result of permanent secondary work. The daily allowance was recalculated on the basis of all income and an adjustment decision was issued.

An appeal committee has been established for accident and occupational disease cases, to which the party concerned can appeal against a compensation decision. The appeal must be made in writing within thirty days from receipt of the insurance company's decision. Instructions for making the appeal can be found on the other side of the compensation decision.

Investments in occupational safety are profitable

Reduction of accidents and occupational diseases will improve the profitability of companies. Many indirect expenses, such as damage repair and inspection costs, stoppages and production losses, can be avoided. In many cases, indirect costs are 2-4 times greater than direct personnel costs. In total, expenses arising from accidents and occupational diseases can amount to 10% of all salary expenses of a company.

Investments in occupational safety can be seen in a company's competitiveness in more cost-efficient, productive and high-quality operations. A safe and healthy working environment and pleasing tasks are requirements for competitive, motivated personnel with good well-being. The level of occupational safety operations also affects the availability of labour, the frequency of work orders and interaction between companies and interest groups. These have a significant impact on a company's success and well-being.

Occupational safety is a natural part of daily work and its development. The best possible result can be achieved when occupational safety operations are comprehensive and integrated firmly in normal management systems, and when the operations are run in co-operation with the personnel and other interest groups, such as partners and authorities.

Tapiola's guidance in occupational safety and risk mapping

Tapiola maintains and develops occupational safety together with its customers. Depending on company-specific needs, Tapiola's experts provide guidance in organising occupational safety operations and issues related to occupational safety regulations and standards and in the latest development methods. The training selection varies from business field- and customer-specific lectures to tailored training packages.

The objective of risk assessment is to identify and remove any dangers that threaten the safety and health of employees. According to current views, risk assessment constitutes preventive occupational safety at best. Tapiola provides companies' line organisations and labour protection personnel with guidance and support in addressing risk assessment issues. By using accident statistics submitted to employers, it is possible to assess the general accident history of companies. The statistics help in focusing safety actions on accident-related factors in the best possible manner.

For occupational safety planning and development, occupational safety material is available at Tapiola, such as safety guides or inspection and assessment forms and training material for internal training.

Leisure-time insurance is a good personnel benefit

In addition to the mandatory work insurance policies, employees can also be insured for leisure time using insurance policies responding to the Employment Accidents Act. Leisure-time insurance is a cost-efficient way to increase appeal in recruitment, improve the commitment of personnel and manage the age structure. The insurance premiums are tax-deductible for companies as natural deductions similarly to the statutory accident insurance premiums.

As in work insurance, leisure-time insurance compensation will be paid without any limits in the time or amount. Treatments subject to compensation from leisure-time insurance will also be compensated for in the private sector. Insurance will compensate an employer for daily allowance if the employee is injured during leisure-time so that the employee has to take sick leave and if the employer pays sick pay to the injured employee.

Leisure-time insurance options

Group insurance for leisure time

Leisure-time group insurance can be taken out for all of a company's personnel or a specific personnel group. The group must include at least two people. The insurance policy will be in effect during leisure time and compensation is in accordance with the Employment Accidents Act.

Individual leisure-time insurance for specific people

Individual leisure-time insurance for accidents can be taken out for specific people. The insurance policy will be in effect during leisure time and compensation is in accordance with the Employment Accidents Act. The insurance premium and any compensation paid will be based on agreed annual earnings.

Sports insurance for workplace athletics

Sports insurance can be taken out for a company's full staff. The insurance will apply to workplace athletics. Compensation will be in accordance with the Employment Accidents Act.

Unemployment and group life insurance premiums

Employers' and employees' unemployment insurance premiums and group life insurance premiums are invoiced with the accident insurance premiums.

Unemployment insurance

The collection of the unemployment insurance premium in connection with the statutory accident insurance premium is based on the Act on Financing Unemployment Benefits. Tapiola forwards the premiums received from its customers to the Unemployment Insurance Fund. They are used to finance earnings-related daily allowances, employment pension supplements, termination payments and wage securities.

Employer's unemployment insurance premium

An employer who is obligated to insure his/her employees using statutory accident insurance is legally obligated to pay the unemployment insurance premium. The premium is generally calculated from the same salary amount as the accident insurance premium.

Premium amount

The premium will be confirmed separately for each year. In 2010, the premium is 0,75 % from salaries paid up to the salary amount of EUR 1 846 500. For amounts exceeding the limit, the premium is 2,95 %. The premium for part-owners of companies within statutory accident insurance is 0,75 % from salaries paid to them.

The unemployment insurance premiums will not be collected from persons who are not statutory insured against accidents (e.g. a shareholder who is in a leading position and owns, alone or together with family members, more than half of all shares). A company's part-owners include:

1. A person working in a limited company who is in a leading position and:
 - holds at least 15 % of the shares/votes, or
 - together with his/her family members living in the same household holds at least 30 % of the shares/votes, or
 - whose family holds at least 30 % of the shares or related votes.

2. A person working in a limited company:

- holds at least 50% of the shares/votes, or
- together with his/her family members living in the same household holds at least 50% of the shares/votes, or
- whose family holds at least 50 % of the shares or related votes.

3. A person working in a company:

- who in a manner referred to above works in another company or organisation where the person or his/her family member or the person together with his/her family members holds the general authority.

According to the Unemployment Security Act, a person is in a leading position within a company if the person is the company's managing director or board member or is in a corresponding position.

Family members include the person's spouse or co-habitant. Spouses are not each other's family members if they live separately because of broken-off relations. Family members also include the person's relatives in a directly younger or elder generation when they are living in the same household.

Indirect ownership will be taken into account in defining part-ownership. Indirect ownership will be taken into account in defining part-ownership. Indirect ownership will be taken into account in defining part-ownership if the ownership of a person or his/her family members is at least 50% in a company.

Employees' unemployment insurance contribution

Employers are obligated to withhold the premium from employees' salaries. The wage-earner's unemployment insurance premium is not withheld from partners in general partnerships and general partners in partnership companies. In 2010, the premium is 0,40 % of employees' salaries and 0,15 % of the salaries of part-owners in limited companies. The unemployment insurance premium withheld from employees must be stated in the employer's accounting. The withheld amount must be stated on the salary receipt given to employees. It is deductible in wage-earners' taxation.

Exceptions in the collection of unemployment insurance premiums

Unemployment insurance premiums will not be collected or withheld for the following:

- An employee who on the basis of the Un-employment Security Act, is no entitled to unemployment security benefits (people of under

17 years and those who have turned 65). The effect of the age limit will begin with the first salary payment date in the month following the relevant birthday.

- A general partner of a partnership company.
- A partner in a general partnership.
- A domestic aid or cleaner (fixed premium).
- An employee who, in accordance with the Self-employed Persons' Pensions Act or the Farmers' Pensions Act, is obligated to take out insurance for his/her full-time employment in accordance with the said acts. The assessment of whether employment is full-time or not is based on the use of time.

Payment of premiums

A separate invoice will be sent for unemployment insurance premiums – for the advance premium at the beginning of the insurance period and for any adjustment premium at the end of the period. If the premiums are not paid by the due date, interest on the delay period will be invoiced according to the Interest Act. Unemployment insurance premiums are distrainable.

Intensified supervision of unemployment insurance contributions

The Unemployment Insurance Fund has extended the supervision of unemployment insurance contributions to cover also single employers. For this purpose, the Unemployment Insurance Fund has established a supervision register for unemployment insurance contributions. On the basis of the register, the Unemployment Insurance Fund compares the employer specific contribution and total payroll data received from the accident insurance institutions collecting the unemployment insurance contributions to the total payrolls received from the tax authority.

The cases discovered through supervision are investigated, and the employer will be given an opportunity to complete or correct the insufficient or inaccurate data. Depending on the case, the unpaid unemployment insurance contributions are collected from the employer at the most up to a fourfold amount. (Find out more at www.tvr.fi)

Employees' group life insurance

Employers are obligated to insure their employees under employees' group life insurance. The obligation to insure applied to all employers whose field has a valid national collective agreement which requires taking out group life insurance. Thus the

obligation to insure applies to unorganised employers. If there is no insurance, an employer may have to pay compensation to the beneficiaries. Those to be insured generally are employees within the scope of employment pension legislation.

A developer of a detached house has hired a carpenter to work for a month. According to collective agreements, the developer is obligated to take out group life insurance for the employee.

Group life insurance premium

Accident insurance companies collect the employees' group life insurance premium. Insurance will enter into force in connection with accident insurance, and a separate invoice and an insurance policy will be sent. An advance premium will first be collected, and an adjustment invoice will be sent after receipt of salary information. In 2010, the insurance premium for the private sector is 0,069 % from the salary amount, and 0,069 % from the salary amount in the public sector. Interest on delayed insurance premiums will be collected similarly to that for accident insurance. The premium is also distrainable.

Compensation will be paid from employees' group life insurance in all cases of death. Beneficiaries include the employee's spouse, children under 18 years and children between 18 and 21 years who are full-time students. If there is no beneficiary, compensation can be received by children who have already turned 18 and the employee's parents

when their working capacity and wealth are so minor that, as a result, they are financially dependent on the insured person. A cohabitant can be a beneficiary only when he/she has lived with the deceased person in a relationship similar to a marriage and they have or have had a common child or an agreement of mutual support authorised by an authority. The beneficiary regulation cannot be changed.

The amount of compensation to be paid is affected by the insured person's age at the time of death, the number of children entitled to compensation and whether the death was accidental or not. The basic amount is determined according to the insured person's age. A child increase will be added to the basic amount for each child acting as a beneficiary. The total amount of the basic amount and child increases will be increased by 50% for an accidental death. The insurance amount constitutes tax-free income.

Employees' group life insurance is managed by Life Insurance Company Retro. Compensation from group life insurance is applied for from Retro using a specific form, which can be printed at www.retro.fi.

A completed form can also be sent to Tapiola to be forwarded. If a person is not satisfied with the compensation, he/she can request a statement of the decision from the group life insurance advisory committee or apply for a change from the relevant court of law.

Tapiola serves

More information and data on current issues concerning statutory accident insurance can be found at tapiola.fi/tapaturma.

All services for corporate customers are available at tapiola.fi/yritysasiakkaat.

Customer service for companies

Tel. +358 9 01019 5101

Monday – Friday 8:00 am – 6:00 pm

E-mail: LTTvakuutus@tapiola.fi

Fax +358 9 453 2288

Major clients

Tel. +358 9 453 3670

Monday–Thursday 8:00 am – 5:00 pm and

Friday 10.30 am – 5:00 pm

E-mail: LTTsuurvakuutus@tapiola.fi

Fax +358 9 453 3654

Claims services

Occupational accidents, tel. +358 9 453 3770

(Monday–Friday 8:00 am – 5:00 pm)

E-mail: LTTkorvaus@tapiola.fi

Major clients, tel. +358 9 453 3700

E-mail: tapiolaLTTsuurasiakaskorvaus@tapiola.fi

International insurance service

More information about insuring workers posted abroad. Tel. +358 9 453 3732

Tapiola's Online Service

Transactions can be carried out quickly and easily through the Online Services. You can take a look at the service and order identifiers at yrityspalvelu.tapiola.fi.

The online service produces a number of benefits:

- Employers can update customer information
- Companies' insurance status can be checked from real-time agreement lists at any time

- The Corporate Online Services make salary reports easier and quicker to complete
 - The service makes working easier because all previous information is available. Because of the saving feature, work can be continued at any later time.
 - There will be fewer errors and inspection requests because the Corporate Online Services provide guidance in completing salary reports.
 - A report of the final insurance premium will be sent sooner.

Plus:

- Accident reports can be completed electronically through the online services and tapiola.fi.
- Encrypted messages can be sent between Tapiola and its customers through the online service. For example, a company's insurance cover can be easily kept up to date by sending a message concerning a new property item acquired by the company.
- The online service can be used to check and print occupational safety statistics.

Other important contact information:

- Unemployment Insurance Fund, TVR, www.tvr.fi
- Life Insurance Company Retro, www.retro.fi
- www.palkka.fi service for small employers for managing payment of wages and handling statutory obligations
- Finnish Centre for Pensions, ETK, tel. +358 10 7511 (exchange), www.etk.fi
 - insurance for work abroad, tel. +358 10 751 4216 or e-mail ulkomaanasiat@etk.fi
- Agricultural Entrepreneurs' Pension Insurance Institute, Mela, www.mela.fi

Tapiola General Mutual Insurance Company

postal address FI-02010 Tapiola

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