

WaasaWärtsilä Sickness Fund
Teollisuuskatu 9 B
65170 Vaasa, Finland
+358-50 379 8203
waasawartsilan.sairauskassa@kela.fi
www.waasawartsilan-sairauskassa.net

General Guidelines

for Members of the WaasaWärtsilä Sickness Fund

as of January 17st, 2022

The WaasaWärtsilä Sickness Fund Board

GENERAL INFORMATION

The WaasaWärtsilä Sickness Fund is a so-called workplace fund that grants reimbursements in accordance with the Finnish Health Insurance Act, and pays additional benefits based on the Fund's rules. As stated in the Finnish Insurance Fund Act, the term "sickness fund" is used to denote an insurance fund with the primary purpose of granting reimbursements in case of illness. Such a fund is an insurance company which grants reimbursements to its members within its coverage without pursuing commercial activities. The Sickness Fund's rules have been ratified by the Finnish Financial Supervisory Authority.

BOARD

The Sickness Fund is governed by a Board consisting of eight full members and their personal deputies. A Board Member's term of office is two calendar years, and new Members are elected at the Fund Meeting in November. The Board usually convenes once a month.

COVERAGE AND MEMBERSHIP

The Fund's membership is optional for all persons belonging to the Fund's coverage, which encompasses persons employed by the following companies and receive their primary income from the said companies:

- Wärtsilä Group's offices in Finland (Wärtsilä Development & Financial Services Oy, Wärtsilä Finland Oy, Wärtsilä Oyj Abp, Wärtsilä Projects Oy, Wärtsilä Solutions Oy, Wärtsilä Technology Oy Ab, as well as persons who belonged to the Sickness Fund on September 30, 2021, and were transferred to Citec Oy Ab as old employees on October 1st, 2021
- Fortaco Oy (Mustasaari factory)
- DHL Supply Chain's Wärtsilä Vaasa offices
- As well as persons who belonged to the Sickness Fund on January 31st, 2014, and were employed by KPA Unicon Group Oy
- Kilkanen Oy
- Prohoc Proactor Oy, Wärtsilä Vaasa offices

In addition, the persons who were employed by the aforementioned companies and retired after January 1st, 2008, after being continuous members of the Fund for at least 15 years before retirement.

The membership must be applied for within six months of the beginning of employment.

Retiring employees must inform the Fund of their wish to continue their membership within a month of receiving their pension decision.

The Fund's Board decides on membership approvals. The membership comes into effect from the beginning of the next calendar month following the Board's decision.

Member, who is in a working trial paid by the insurance company, can stay as a self-payee member while the employment contract is in force.

MEMBERSHIP FEE

The membership fee of employed members is 1.4% of the salary subject to the Prepayment of Tax Act, however max 62,50 €/month for employee and 28,80 €/salary period for worker. The fee for retired members is 42,50 €/month and for part-time retirees 21,25 €/month for the duration of their retirement.

THE SICKNESS FUNDS REIMBURSES

- Doctors' fees, excluding dentists' fees and fees charged for surgical operations or procedures comparable to these, unless the Board deems it reasonable to partially or entirely reimburse the fees in isolated cases.
- Medicines, clinical nutritive preparations and comparable products, and basic creams prescribed by a doctor, when the member has received reimbursement also on the basis of the Health Insurance Act. In addition, medical costs included in the initial excess are reimbursed, even though the member has not received reimbursement for them on the basis of the Health Insurance Act.
- Medicines, other than those reimbursed on the basis of the Health Insurance Act, if the Board deems it reasonable to partially or entirely reimburse the fees in isolated cases.
- Laboratory tests and pathological examinations prescribed by a doctor.
- Radiological examinations prescribed by a doctor, excluding other procedures that are performed in connection to the examinations, unless the Board deems it reasonable to partially or entirely reimburse the fees in isolated cases.
- 70 % of the sum exceeding the statutory compensation for an MRI prescribed by a doctor.
- 70% of the sum exceeding the statutory compensation for physiotherapy or physiotherapeutic tests prescribed by a doctor; 70% of the charged fees for massage or naprapathic, osteopathic, chiropractic or podiatric treatments; up to 20-treatment sessions/year. A retired member is reimbursed 50% with the same abovementioned conditions.

A member must pay the entire cost of treatment(s) to the medical establishment, where after the member is entitled to seek reimbursement from the Sickness Fund.

- Travel expenses to the nearest medical establishment with the least expensive means of transportation. Travel expenses arising from special transport will be reimbursed if the use of such transport is necessary due to the nature of the illness or traffic conditions

and reimbursable according to the Health Insurance Act. The need for special transport must be proven with a medical certificate granted by a doctor or hospital.

- Accommodation expenses are to be reimbursed only according to the accommodation allowance stipulated in the Health Insurance Act, if a member has had to spend the night at an accommodation establishment or at an establishment organized for patients of research facilities or medical establishments during a reimbursable trip.
- Daily hospital fees according to the lowest payment class, and the basic fee for institutional care, hospital outpatient charges and the fee for outpatient surgery (max. 180 days).
- Annual and appointment fees charged by health centers.
- A facility fee charged by a private medical center up to the maximum sum of EUR 120 per reimbursed instance. Office fees are **NOT** reimbursed.
- Bandages, appliances and prosthetic devices prescribed by a doctor up to the maximum sum of EUR 170 per reimbursed instance.
- The partial or entire purchase of devices or instruments prescribed by a doctor, if the Board deems it reasonable in isolated cases.
- Dental care expenses up to EUR 450 every two years after a one-year membership. A member must pay the entire cost of treatment(s), where after the member is entitled to seek reimbursement from the Sickness Fund. A retired member is reimbursed EUR 225 every two years.
- Reimbursement for a denture or for expenses related to its repair is EUR 550 every five years after a five-year membership. A member must pay the entire cost of the denture, where after the member is entitled to seek reimbursement from the Sickness Fund.
- Reimbursement for eyeglasses, contact lenses or refractive error correction surgery is EUR 450 every two years after a one-year membership. A member must pay the entire cost of the eyeglasses, contact lenses or refractive error correction surgery, where after the member is entitled to seek reimbursement from the Sickness Fund. A retired member is reimbursed EUR 225 every two years.
- Fees charged by private medical centers partially or entirely, if the Board deems it reasonable in isolated cases.
- Member's burial assistance of EUR 1010 to the member's close relatives.
- Office fees charged by private medical centers or institutions are **NOT** reimbursed.
- A retired member's private medical center fees are not reimbursed, unless the Board deems it reasonable to partially or entirely reimburse the fees in isolated cases.

- A member who simultaneously receives a salary and a pension is comparable with an employed member in terms of additional benefits.
- According to the Fund's rules, reimbursable examinations and treatment procedures must be provided by a health care professional who is registered in the Central Register of Health Care Professionals maintained by the Finnish National Authority for Medicolegal Affairs, or the procedures and treatments must be performed at such a unit providing private health care services as referred to in Chapter 3 Section 3 Paragraph 1 of the Health Insurance Act.
Check with the Fund's office if your treatment/procedure is reimbursable.
- Costs paid by E-pass or similar payment methods, will not be reimbursed by the Sickness Fund.

REIMBURSEMENT: APPLICATION AND PAYMENT

Reimbursement of health care fees must be applied for **within six months** of the payment of the fees.

Members must see to that the **reimbursement application is filled** and the fees in question have been paid. The member's name must be printed on the optical store's receipt. The two-year counting period for the reimbursement of eyeglasses begins from the date of purchase of the eyeglasses (payment date) and in case of dental care, from the date of dental appointment (the latest date of appointment on the invoice).

Check with the Fund's office if you want to know the starting date of a new reimbursement period.

Pharmacies that have entered into an agreement with the Sickness Fund will provide, free of charge, medicines that are prescribed by a doctor and are reimbursable in accordance with the Health Insurance Act. In addition, the Sickness Fund has a direct compensation agreement with Mehiläinen in Vaasa and with Terveystalo and SynLab, in terms of its employed members. These agreements can be used by presenting your KELA-card with the Fund's identification number 12702.

Reimbursements that are at the discretion of the Board, e.g. surgical operations at private medical establishments, can be petitioned from the Board. A free-form application with all the necessary documents (a well-founded application, possible quotation, medical record etc.) must be delivered to the Sickness Fund well before the date of the surgery or before obtaining reimbursement for medicines etc. The office will provide you with more detailed instructions.

All reimbursements are paid to the bank account provided by the member.

All receipts of paid reimbursements are delivered to the member by post.

KELA-CARD

When joining the Fund, all members will receive a new **KELA-card** with the Fund's identification number 12702. The card is valid for the duration of the membership, and it must be returned to the Fund or cut in half at the end of the membership.

The card must not be used:

After the end of the membership or during **unpaid leave** (e.g. alternation leave).

The Fund's additional benefits are not valid during unpaid leave.

Contact the office for further information.

UNPAID LEAVE

Reimbursements in accordance with the Fund's rules are not paid to a member who falls ill during unpaid leave (lay-off or parental, study or alternation leave).

Members must notify the Sickness Fund when they take unpaid leave.

ANNUAL CEILING OF PUBLIC HEALTH CARE

As of January 1st, 2022 – December 31st, 2022, the annual ceiling for public health care fees has been EUR 692 per calendar year.

Fees from medical services, physiotherapy, outpatient treatments, serial treatments, rehabilitation and hospitalization are put together when calculating the annual ceiling. Fees from the treatment of under 18-year-old children will be accounted for together with the annual ceiling of one parent. A customer fee card is used to keep track of paid fees.

Reimbursements from the Sickness Fund are taken into account when calculating accrued fees. Members are responsible for monitoring their annual ceiling.

After the annual ceiling has been reached, members are provided with a card entitling its holder to free health care.

MEDICINAL PRODUCTS DATABASE

KELA's website (<https://www.kela.fi/web/en/medicine-expenses>) has a database that can be used to find information about medicine prices and the available generic equivalents. The database can also be used to check if the medicine is reimbursable by health insurance and which reimbursement category it belongs to.

THE FUND'S OFFICE

The Fund's office is located at Wärtsilä Finland Oy's STH office in Vaskiluoto (Teollisuuskatu 9 B).

Open Monday-Thursday 8.30 – 11.30 and 13.00 – 15.30, Fridays 8.30 – 11.30

Tel. **+358-50 379 8203**
e-mail: waasawartsilan.sairauskassa@kela.fi
website: www.waasawartsilan-sairauskassa.net

Sickness Fund Manager: Ms. Emmi Kiviniemi
e-mail: emmi.kiviniemi_external@wartsila.com

Benefit Handler: Mrs. Satu Rinne
e-mail: satu.rinne_external@wartsila.com

THE FUND'S CONTACT PERSONS

The following contact persons handle the communication between the Fund and its members at the workplaces:

KPA Unicon Group Oy, Kiuruvesi, Ms. Seija Rossinen seija.rossinen@kpaunicon.com
Fortaco Oy, Mustasaari factory, Mr. Juha Hakola juha.hakola@fortacogroup.com

THE SICKNESS FUND'S BOARD AS OF JANUARY 1st, 2022

Full members:

Mr. Ari Rintala, Chairman Wärtsilä Finland Oy
ari.rintala@wartsila.com

Mr. Jukka Lehtiniemi, Vice Chairman Wärtsilä Finland Oy
jukka.lehtiniemi@netikka.fi

Mr. Kari Järviö Wärtsilä Finland Oy
kari.jarvio@wartsila.com

Mr. Juha Hakola Fortaco Oy, Mustasaari factory
juha.hakola@fortacogroup.com

Mr. Matti Latvakoski Wärtsilä Finland Oy
matti.latvakoski@wartsila.com

Mr. Marko Parttimaa Wärtsilä Finland Oy
marko.parttimaa@wartsila.com

Ms. Miller Ann Wärtsilä Finland Oy
ann.miller@wartsila.com

Mr. Anders Warg Wärtsilä Finland
anders.warg@wartsila.com

Personal deputies:

Mr. Esa Blom Wärtsilä Finland Oy
esa.blom@wartsila.com

Mr. Kimmo Sikanen Wärtsilä Finland Oy
kimmo.sikanen@wartsila.com

Mr. Lars-Johan Andersson Wärtsilä Finland Oy
lars-johan.andersson@wartsila.com

Mr. Juha Mäkiranta Fortaco Oy, Mustasaari factory
juha.makiranta@fortacogroup.com

Mr. Vesa Toivola Wärtsilä Finland Oy
vesa.toivola@wartsila.com

Mr. Janne Koskimäki Wärtsilä Finland Oy
janne.koskimaki@wartsila.com

Mr. Sebastian Suurholma Wärtsilä Finland Oy
sebastian.suurholma@wartsila.com

Pirkko Tiensuu Wärtsilä Finland Oy
pirkko.tiensuu@wartsila.com