



These Insurance Conditions contain the detailed regulation of rights and obligations arising from the arranged insurance contract for TEAM group risk life insurance. Please become thoroughly familiar with the content of this document.

Article 1. Introductory provisions

- 1.1 TEAM group accident insurance is a capitalized insurance under which insurance for insurance risks listed in Article 2.1 can be arranged individually or in any combination.
- 1.2 Insurance is governed by the insurance contract and these insurance conditions, which are a part thereof. In the event of a conflict between these insurance conditions and the insurance contract, the relevant provision of the insurance contract shall prevail. The insurance contract also includes the classification of permanent consequence of injury (hereinafter the "**TN Classification**").
- 1.3 Insurance is governed by Czech law, in particular by Act No. 89/2012 Coll., Civil Code (hereinafter the "**Civil Code**"). Any dispute arising from the insurance contract or related to this insurance shall be submitted for resolution to the relevant court of the Czech Republic. For out-of-court resolution of disputes, it is also possible to contact the financial arbitrator (www.finarbitr.cz) if the dispute concerns life insurance, or the Czech Trade Inspection Authority (www.coi.cz) if the dispute concerns non-life insurance.
- 1.4 The language of communication is the Czech language. All amounts and payments related to insurance are due within the Czech Republic and are specified in the currency valid in the Czech Republic.
- 1.5 We sometimes use terms in these insurance conditions which have a specific meaning, defined either directly in the text thereof or in Article 15. these terms are used with initial capital letters.

Article 2. Insured risks

- 2.1 **Scope of insurance.** Accident insurance includes the following insurance:
 - a) insurance in case of death as a result of an accident;
 - b) insurance in case of disability as a result of an accident;
 - c) insurance in case of permanent consequences as a result of an accident;
 - d) insurance in case of hospitalization as a result of an accident.

Article 3. Origin of insurance and insurance period

- 3.1 **Origin of insurance.** The insurance of each individual Insured person arises on the basis of the policyholder's proposal from the 1st day of the following calendar month after delivery to us.
- 3.2 **Insurance period.** The insurance is arranged for a definite period with an insurance period, the length of which is stated in the insurance contract and which is at least 1 year. If the insurance contract does not expire, the insurance period is always automatically extended for another year.

Article 4. Termination of insurance

- 4.1 **Main reasons for termination of insurance.** The insurance of an individual Insured person terminates in the following ways (whichever occurs first):
 - a) death of the insured;
 - b) upon expiry of the insurance period in which the Insured person reaches the age of 65;
 - c) termination of employment;
 - d) non-payment of the premium by the policyholder;
 - e) refusal of insurance indemnity;
 - f) by agreement of the contracting parties.
- 4.2 The insurance company or the policyholder may terminate this group contract at the end of the insurance period. The notice must be delivered to the other party no later than 2 months in advance. At the end of the insurance period at the end of which the notice is given, the group insurance contract expires. Termination or termination of this contract will terminate the individual insurances.
- 4.3 **Special reasons for termination of additional insurance.** Additional insurance, apart from the above specified cases, also expires:

INSURANCE CONDITIONS FOR GROUP ACCIDENT INSURANCE TEAM

- a) insurance against Disability of the Insured person is terminated on the day after occurrence of an insured event from the relevant variant of additional insurance against Disability (if you have arranged several variants of this insurance at once, only the given variant is terminated upon occurrence of an insured event; insurance in the variant where an insured event from such additional insurance has not yet occurred remains effective);
- b) insurance of Permanent Consequences of Injury is terminated upon payment of insurance indemnity, which reaches or exceeds 100% of bodily impairment as the sum of percentage shares of bodily impairment for all insured events of the relevant Insured person;
- c) refusal of insurance indemnity or withdrawal as a result of a breach of obligations arising from the insurance contract (for details, see Article 12).

Article 5. Premium

- 5.1 Form of premiums.** The premium is agreed in the insurance contract for individual Insurance Periods (current premium) and is paid by Policyholder..
- 5.2 The premium** is paid for each individual Insured person in the amount specified in the contract.
- 5.3 If the premium is not paid within the period** specified by the insurance company in the reminder to pay the premium, the group insurance contract will expire without compensation on the date specified in the reminder to pay the premium. The insurance company has the right to claim premiums until the date of termination of the group insurance contract.

Article 6. Insurance in case of death as a result of an accident

- 6.1 Insured event.** The insurance is arranged in the event of the death of the Insured person as a result of the Accident, which occurred no later than 1 year after the occurrence of the Accident, if such an Accident occurred during the duration of this insurance.
- 6.2 The amount of insurance indemnity.** In the event of the death of the Insured person as a result of an Accident, we will provide the Beneficiary person with an insurance indemnity in the amount of the sum insured in the event of death as a result of an Accident specified in the insurance contract. If we have already provided insurance indemnity in the event of Disability, in the event of damage due to an Accident or in the case of Permanent Consequences of an Accident arising as a result of this Accident, we will reduce the insurance indemnity in the event of death as a result of an Accident by this amount already paid.
- 6.3 Limitation of indemnity in case of concurrence of multiple accident insurance.** If you have agreed several policies against accident insurance (Death due to Injury, Permanent Consequence of Injury), such accident insurance is concurrent. In the case of such concurrence, we are authorized to limit the insurance indemnity for all such insurance in consequence of one and the same cause (insured event) the amount agreed in the Insurance Contract so that the total performance amounts to a maximum of this agreed amount. If the insurance indemnity paid from other concurrent accident insurance due to the same cause (insured event) reaches or exceeds the amount agreed in the Insurance Contract, we have the right not to pay the insurance indemnity from this insurance.
- 6.4 Documents to prove insured event.** To prove the occurrence of an insured event, we require in particular
 - a) death certificate or effective decision on declaration of the Insured person as deceased;
 - b) document proving the cause of death including the fact that death occurred in consequence of Injury ; and
 - c) protocol, conclusions of investigation and other relevant documents of the Czech Republic Police or similar foreign body, if the investigations of the Insured person death or connections between the Insured person death and Injury are being investigated.
- 6.5 Possible reduction of insurance indemnity.** We may reduce insurance indemnity by up to one half if the Injury occurred:
 - a) in consequence of the Insured person having consumed alcohol or applied an addictive substance or agent containing such substance, if justified by the circumstances under which Injury occurred;
 - b) in connection with the Insured's act by which he caused serious injury to health or death to another or by which he committed a criminal offense.

Article 7. Insurance in case of disability as a result of an accident

- 7.1 Insurance variants.** Insurance against the disability as a result of accident of an Insured person may be arranged in the following variants:

INSURANCE CONDITIONS FOR GROUP ACCIDENT INSURANCE TEAM

- a) insurance against 3rd grade Disability as a result of an accident;
- b) insurance against 2nd and 3rd grade Disability as a result of an accident.

7.2 Insured event. Insurance is agreed for cases of 2nd or 3rd grade Disability as a result of an accident Disability (as defined), which occurred during the insurance period of this insurance.

7.3 Indemnity in case of disability. In the event of an insured event, we will provide the Insured person with a one-off indemnity in the amount of the sum insured for the case of Disability (according to the achieved degree of Disability) specified in the insurance contract.

7.4 Documents to prove insured event. To prove the occurrence of an insured event, we require in particular:
a) assessment of disability issued by the relevant social security administration body in the Czech Republic;
b) relevant medical documentation; and
other relevant documents issued by the Czech social security administration body (e.g. decision to grant disability pension).

7.5 Assessment of insured event occurrence. We assess the occurrence of Disability based on the results of a functional examination, independently of any decision by the social security administration body. We take into account whether this is a condition permanently affecting work capability or a stabilized condition, and also the degree to which the Insured person has adapted to their medical impairment and their possibilities of requalification.

In assessing Disability, we use the Insured person's medical documentation, references from the medical facility which we authorize to supply them, an assessment of disability issued by the relevant social security administration body and also the rules set forth in the degree on assessing disability.

Article 8. Insurance in case of permanent consequences as a result of an accident

8.1 Insurance variants Insurance against the Permanent Consequences of Injury of an Insured person may be arranged in the following variants:

- a) with progressive indemnity from 0.001% pursuant to the Indemnity Classification for Permanent Consequences of Injury;
- b) with progressive indemnity from 10% pursuant to the Indemnity Classification for Permanent Consequences of Injury;
- c) without progressive indemnity.

8.2 Insured event. Insurance is agreed against Permanent Consequences of Injury. The insured event is the stabilization of Permanent Consequences arising from Injury, if such Injury occurred during the period of this additional insurance.

The date of occurrence of the insured claim refers to the date when the Permanent Consequences of Injury were stabilized, but at latest the day on which 3 years from occurrence of the Injury pass (if stabilisation does not occur by this time, the moment of stabilization of Permanent Consequences of Injury is the date when 3 years from occurrence of injury pass).

8.3 Insurance indemnity in the case of permanent consequences of injury. In the case of Permanent Consequences of Injury of an Insured person, we shall provide the Beneficiary with insurance indemnity which is the product of:

- a) sum insured,
- b) percentage share pursuant to the Indemnity Classification for permanent consequences of injury corresponding to the given health impairment,
- c) coefficient of increase based on the following table:

Scope of damage to health	Increase coefficient
less than 25 %	1
25 % to 49,5 %	2
50 % to 74,5 %	3
75 % to 99,5 %	4
100 %	5

INSURANCE CONDITIONS FOR GROUP ACCIDENT INSURANCE TEAM

We can also provide a deposit for insurance indemnity, in the event that the Permanent Consequences of the Accident are still not stable even after 6 months from the date of the Accident. However, the advance on insurance benefits will be provided only if the minimum extent of Permanent Consequences, the total extent of which will be determined only in the future, is already known.

If the Indemnity Classification for permanent consequences of injury stipulates a percentage range, the value of indemnity shall be established so that it corresponds to the nature and scope of health impairment caused by the Injury within the given range.

If a single Injury causes the Insured person several Permanent Consequences, the total Permanent Consequences shall be stipulated as the sum of percentage shares for individual partial Permanent Consequences, but maximally up to 100% of the sum insured for Permanent Consequences due to Injury specified in the insurance contract.

If the individual Permanent Consequences of Injury concern one or more Injuries to the same limb, organ or part thereof, they shall be assessed as a whole, at the highest percentage indicated in the Indemnity Classification for Permanent Consequences of Injury for the anatomic or functional loss of the relevant limb, organ or part thereof.

If the Permanent Consequences of Injury concern a body part or organ that was already damaged before Injury, we shall deduct the percentage share corresponding to the scope of prior impairment pursuant to the Indemnity Classification for Permanent Consequences due to Injury.

The scope of Permanent Consequences of Injury does not include the consequences of diagnostic, therapeutic and preventive actions not performed for the purpose of treating the consequences of Injury.

8.4 Limitation and reduction of insurance indemnity. Insurance indemnity from this insurance may be reduced and its payment may be limited under the same conditions as those stipulated in Art. 10 and Art. 6.3 above.

8.5 Documents to prove insured event. To prove the occurrence of an insured event, we require in particular:

- a) medical report or other confirmation of Injury;
- b) medical report or other confirmation of impact of the Injury on the scope of Permanent Consequences;
- c) other documents proving causal relation between health impairment and the Injury;
- d) documents from the Czech Republic Police or similar foreign body describing the insured event, with conclusions from investigation (if the circumstances of Injury were investigated by the police).

Article 9. Insurance in case of hospitalization as a result of an accident

9.1 Insured event. The insurance is arranged for the case of Hospitalization of the Insured, which occurred during the duration of this insurance, and is a consequence of the Accident, which also occurred during the duration of this insurance. We consider the day following the day when the Insured person was Hospitalized to be the day of the occurrence of the insured event from the insurance for the case of Hospitalization as a result of the Accident. The insured event then lasts for the entire duration of the Insured's Hospitalization. The insured event occurred outside the period of serving the sentence of imprisonment of the Insured.

9.2 Conditions for the occurrence of an insured event. If the Hospitalization of the Insured person as a result of the Accident occurred in medical facilities or in medical facilities or institutions listed in the exclusions in Article 11.3 below, we will provide insurance benefits from the Hospitalization as a result of the Accident only if we have agreed in writing to such treatment.

9.3 The amount of insurance indemnity. In the event of an insured event, we will provide the Insured person with an insurance indemnity in the amount of the product:

- a) daily benefits in the event of hospitalization as a result of an accident specified in the insurance contract;
- b) the number of calendar days for which the Hospitalization as a result of the Accident lasts.

For one insured event, we will provide insurance indemnity for a maximum of 365 days. One insured event is continuous hospitalization, regardless of any change in the accident diagnosis during its duration.

9.4 Payment of insurance benefits. We will provide the insurance indemnity to the Insured person once after the end of the Hospitalization as a result of the Accident. We can also provide advance payments for insurance benefits. In such a case, the Insured person must prove to us once a month, or in a longer period of time that we specify, that his / her Hospitalization as a result of the Accident lasts.

9.5 Time limit of insurance indemnity and co-participation. We will provide the insurance indemnity only if the Hospitalization of the Insured person as a result of the Accident lasts longer than 1 day. In such a case, the day of admission of the Insured person to Hospitalization is not included in the number of calendar days of the duration of Hospitalization, the day of termination of Hospitalization is included as a whole calendar day.

9.6 Documents to prove insured event. To prove the occurrence of an insured event, we require in particular:

INSURANCE CONDITIONS FOR GROUP ACCIDENT INSURANCE TEAM

- a) a doctor's certificate of hospitalization of the Insured,
- b) other medical reports related to the occurrence of an insured event, a dismissal report or other proof of termination of Hospitalization, resp. proof that the Insured person has left the medical facility of the inpatient care provider himself, or proof of his commencement of imprisonment.

Article 10. Reduction of insurance indemnity for additional accident insurance

10.1 Possible reduction of insurance indemnity. We may reduce insurance indemnity by up to one half if the Injury occurred:

- a) in connection to conduct which suggests that the Insured person committed a criminal offence;
- b) in connection to conduct through which the Insured person or Beneficiary caused another person severe bodily harm or death;
- c) in consequence of the Insured person having consumed alcohol or applied an addictive substance or agent containing such substance, if justified by the circumstances under which Injury occurred; however, if the Injury resulted in the Insured's death, we may reduce insurance indemnity only if the Injury occurred in relation to the Insured's action through which they caused severe bodily impairment or death to another person;
- d) in connection to which the Insured person refuses at the request of the Czech Republic Police, municipal police or member of a similar foreign body, to undergo a test or medical examination according to special regulations to determine whether they are under the influence of alcohol or other addictive substances.

Article 11. Exclusion from accident insurance

11.1 General exclusions (always apply).

We shall not provide insurance indemnity if the insured claim occurs:

- a) as a consequence of or in relation to an incident of war or civil war, civil unrest, riots, revolutions, uprisings and international peace or security missions;
- b) as a consequence of or in relation to a terrorist attack (i.e. an act of violence fueled by social, political, ideological or religious motives), if the Insured person did not directly participate in such event, if the Insured person does not commence travel after the Ministry of Foreign Affairs of the Czech Republic or the state authorities of other countries or important international institutions have declared that they do not recommend travelling to the given country or area;
- c) due to effects of nuclear energy, ionization, radiation or radioactive contamination;
- d) while driving a motor vehicle, or operating a machine, the operation of which requires a license but the Insured person does not hold such the prescribed license, or in the period in which the Insured person is banned from driving a motor vehicle or operating a machine, or when the relevant license has been revoked, or if the Insured person used the motor vehicle or the machine without authorization, or during the driving of the motor vehicle or operation of the machine by such a person with the Insured's knowledge;
- e) while the Insured person was working with explosives, unless the insurance contract explicitly stipulates otherwise;
- f) in relation to professional performance of sports by the Insured person, unless the insurance contract explicitly stipulates otherwise;
- g) while performing the work of a bodyguard, animal trainer, stuntman, acrobat, or when providing direct-contact erotic services, unless the insurance contract explicitly stipulates otherwise;
- h) in consequence of the Insured person's congenital defect, or a diagnosed disease or Injury occurring before the commencement or a change of the insurance and not stated by the Insured person in their answers to our questions in relation to entering into the insurance contract or amending it;
- i) in connection with performing risky sports or adrenaline activities: bungee-jumping, rafting, water jumping, shark-diving, aqualung diving, skiing, snowboarding and ski bobbing outside marked tracks, or on marked tracks outside operating hours, acrobatic skiing and snowboarding, ski jumping and ski flying, heli-skiing(biking), moto skijoring, riding a competition sleigh, competition skibob or competition luge sled, snow rafting, zorbing, canoeing, black-water-rafting, speleological activities, boxing, ultimate fighting;
- j) in connection with performance of mountain-climbing, including alpine hiking, i.e. hiking or climbing on a terrain of 2 UIAA difficulty and above (climbing where the three fixed points technique is required), including climbing on tracks secured in advance, mountain hiking outside permitted tourist tracks and hiking on a glacial terrain; in areas more than 3,000 m above sea level and moving on a terrain of lower difficulty;
- k) in connection with flying any means (e.g. flying ultralight planes, flying motor-less planes, paragliding, parasailing, parachuting from planes and from heights), excluding aircrafts of a regular air carrier or a special group flight registered with OAG Worldwide Flight Guide;

INSURANCE CONDITIONS FOR GROUP ACCIDENT INSURANCE TEAM

- l) during tours and expeditions to locations with extreme climatic or natural conditions, to remote geographical locations or vast uninhabited areas (deserts, polar regions, etc.);
- m) during active participation of the Insured person in races, competitions, shows or exhibitions or preparation for them, as a driver or passenger in motor vehicles or as an animal rider;
- n) during active participation of the insured person in organized sports competitions and preparation for them, except for chess and board game competitions, unless expressly agreed otherwise in the insurance contract.

However, this exclusion shall not apply if Injury occurred during performance of a sport by the Insured person, including a sport performed as the Insured person usual profession, which is indicated in the insurance contract and the price of which is taken into account in the stipulated premium.

11.2 Exclusions specific for insurance in case of disability as a result as an accident (in addition to general exclusions).

We shall not provide insurance indemnity if the insured claim occurs:

- a) in causal relation to the consumption of alcohol or other narcotic or addictive substances or agents containing such a substance, drug abuse or poisoning as a consequence of consuming solid, liquid or gaseous substances due to negligence, or when handling these substances.

11.3 Exclusions specific for insurance in case of hospitalization as a result of an accident (in addition to general exclusions).

We shall not provide insurance indemnity from this insurance if the insured claim occurs:

- a) in connection with cosmetic procedures which are not medically necessary;
- b) consisting of a hospital stay to accompany the child;
- c) in connection with the use of diagnostic and therapeutic methods which are not generally scientifically recognized;
- d) in connection with testing of devices before their approval, registration and authorization of production and distribution (medicines, etc.) with the consent of the insured;
- e) in causal connection with the ingestion or consumption of alcohol or other addictive substances or preparations containing such a substance or misuse or abuse of drugs and poisoning as a result of ingestion or consumption of solid, liquid or gaseous substances and negligence or in connection with the handling of such substances.

It is not considered the duration of hospitalization:

- a) stay in sanatoriums, spas and rehabilitation centers, except in those cases where medical rehabilitation care is a medically necessary part of the treatment of illness or injury and we have given our written consent to this care;
- b) the Insured's stay in hospitals for the long-term sick, in tuberculosis and respiratory disease hospitals and in other specialized medical institutions, as well as the Insured's stay in social care institutions, infirmaries of military units and hospitalization of the Insured person during imprisonment;
- c) stay in psychiatric hospitals and other medical facilities as a result of only a psychiatric or psychological finding;
- d) the Insured's stay in facilities for the treatment of alcoholism, drug addiction, gambling and other addictions.

Article 12. Obligations and consequences of their violation.

12.1 Assessment of medical condition. The Insured person is obliged in particular, in connection to the formation or amendment of the insurance policy, to undergo an examination at our request by our appointed physician or medical facility. We shall bear the costs for such examination, but the Insured person is obliged to bear the costs for their transport and other potential related costs.

12.2 Truthful representations before arranging insurance contract. When arranging or amending the insurance:

- a) you must truthfully and fully answer all of our written questions (e.g. indicated in the questionnaire); if you violate this obligation, we may withdraw from the insurance contract within 2 months after we learn of such fact. If you do not truthfully and fully answer the questions concerning some of the additional insurance, we have the right to withdraw from the insurance contract only in the scope of the relevant additional insurance,
- b) we must truthfully and fully answer all your written questions and warn you of inconsistencies between your requests, which you disclose to use, and the offered insurance; if we violate this obligation, you may withdraw from the insurance contract within 2 months after learning of such fact.

12.3 Option to refuse insurance indemnity. If we learn that:

- a) the cause of the insured event was a fact that we learned of only after occurrence of the insured event,
- b) which we could not determine when arranging or amending the insurance in consequence of deliberate or negligent false or incomplete answering of the written questions, and

INSURANCE CONDITIONS FOR GROUP ACCIDENT INSURANCE TEAM

- c) if we would not have entered into this contract or would have entered into it under different conditions had we known of this fact when arranging the insurance contract, we may refuse to provide insurance indemnity. The insurance shall be terminated on the date when we deliver the notice of refusal of insurance indemnity to the beneficiary. If violation of the obligations concerns basic insurance, the basic insurance and all additional insurance shall be terminated upon refusal of insurance indemnity. If violation of the obligations concerns only the additional insurance, only this additional insurance shall be terminated upon refusal of insurance indemnity. In this case, the premium shall not be refunded.

- 12.4 Truthful information related to the insured event.** In the case of an insured event, the Beneficiary must provide us with complete and truthful data and provide the necessary documents concerning the insured event. If we determine that the Beneficiary deliberately states false or grossly distorted fundamental data concerning the scope of the insured claim or withhold crucial data concerning this claim when applying the right to indemnity from insurance, we may reduce the provided insurance indemnity by up to one half. We also have the right to compensation of expenses purposefully incurred to investigate the facts which were deliberately falsely stated or grossly distorted or withheld.

Article 13. Obligations in the case of an insured event.

- 13.1 Reporting the insured event.** In the case of an insured event, the Beneficiary and/or Insured person or must report it to use without undue delay in the manner pursuant to Art. 28.1. To report the insured event, you may use the form for reporting insured events, which is available on our internet website, or you may contact the broker who will report the insured event with you.
- 13.2 Fees** If the completion of the form by a physician is associated with any fees, these are borne by the Insured person / Beneficiary, unless stipulated otherwise in the insurance policy or in these terms and conditions.
- 13.3 Cooperation during investigation of insured events.** In the case of an insured event, we must be provided with all information and documents required to investigate the insured event, which we request, including the relevant medical documentation. These documents must be provided to us in the Czech language and in original or officially certified copies. If the relevant document is in a foreign language, the Beneficiary and/or Insured person is obliged to ensure its official translation into the Czech language at their own expense and to submit this translation with the original documents.
At our request, the Insured person is obliged to undergo an examination with our designated physician or medical facility. We shall bear the costs for such examination, but the Insured person is obliged to bear the costs for their transport and other potential related costs. Fulfilment of these obligations is a condition for the provision of insurance indemnity.
The Insured person agrees that we obtain data on the Insured person's health condition by ourselves or through a doctor authorized by us, look at medical records and other records of his health condition, and obtain extracts or copies from them, including any medical records from his doctor, health insurance company, any public authority or another insurer with which the Insured person has other life or accident insurance. For the purposes of this authorization and to its extent, the Insured person shall release the said persons and public authorities from their legal or contractual obligations of confidentiality, in the sense of Act No. 372/2011, Coll., On Health Services.
- 13.4 Documents required to investigate the insured event.** The Beneficiary and/or Insured person is obliged to substantiate the occurrence of the insured event in particular by means of the documents required to prove the insured event defined for the individual additional insurances.

Článek 14. Forma jednání a doručování

- 14.1 Delivering to us.** You can deliver correspondence addressed to us in person via our broker or you can send it by post to the address Komerční pojišťovna, a. s., Palackého 53, 586 01 Jihlava. You may also send your notices and requests via electronic mail (e-mail); however, this does not apply to notices and request for which written form is required. Written form is required in particular for legal actions, notices and requests which affect the formation, duration and termination of insurance, changes in the premium, changes in the scope of insurance, designation of the beneficiary. For other legal actions, notices and requests (e.g. to report a change in surname, address of residence, correspondence address and other contact data of you or the Insured person specified in the contract), written form is not required, but we may request additional submission of these documents in writing at a later date.
- 14.2 Moment of delivery of written correspondence.** Correspondence which you deliver to us via our broker shall be considered delivered on the date of its delivery to our address: Komerční pojišťovna, a. s., Palackého 53, 586 01 Jihlava.
- 14.3 Delivering to you.** We shall send correspondence addressed to you via post to the agreed mailing address,

INSURANCE CONDITIONS FOR GROUP ACCIDENT INSURANCE TEAM

deliver it in person through the broker or via electronic mail (e-mail), unless written form is required for the given type of correspondence. We shall deliver correspondence to you to the addresses indicated in the insurance contract or changed at a later date pursuant to the clause below. If your address of permanent residence is in the Czech Republic, you must ensure a mailing address in the Czech Republic throughout the insurance period. If you do not ensure a mailing address throughout this period, we are authorized to bill you the costs related to sending correspondence abroad.

- 14.4 Delivery of insurance conditions.** The insurance conditions will be provided to you in the manner specified in the insurance contract.
- 14.5 Change in delivery data.** You are obliged to inform us immediately of any changes in your address of permanent residence, correspondence address or electronic mail address. If we are unable to deliver any correspondence to you because you violated this obligation, it applies that such message was delivered to you by the deadline indicated below.
- 14.6 Moment of delivery of electronic correspondence.** The correspondence we send to you electronically shall be considered delivered on the following business day after its sending.
- 14.7 Moment of delivery of written correspondence.** The correspondence we send to you by post shall be considered delivered:
- on the date of takeover of the correspondence, even if somebody else took it over on your behalf at the given address;
 - on the date when acceptance of the correspondence was rejected;
 - if the correspondence was deposited for collection at the post office, on the seventh day after the correspondence was deposited for collection at the post office; this applies even if you collected the deposited correspondence after the passing of the seventh day from deposit;
 - on the date of returning of the correspondence as undeliverable for other reasons;
 - unless stated otherwise above and the correspondence was sent by post via registered mail, then on the seventh day after its sending; however, if the correspondence was sent by post as regular mail, then on the third day after its sending, and in the case of delivery outside of the Czech Republic, on the fifteenth day after its sending.
- 14.8 Unilateral amendment of insurance conditions.** In exceptional cases, we are authorized to amend these insurance conditions during the insurance period unilaterally, under the conditions stipulated in the Civil Code. The premium may be changed in this manner only in relation to a change in legal regulations, a fundamental change in demographic parameters, established judicial practice or based on a comparison of the expected and real claims record. We shall inform you of changes to these insurance conditions in the manner for delivering these insurance conditions described above.

Article 15. Definitions

- 15.5 Beneficiary** means the person who shall be paid insurance indemnity in the case of an insured event.
- 15.3 Disability** means the insured's reduced ability to perform gainful activity due to the limitation of bodily, sensory or intellectual capabilities in consequence of lasting unfavorable medical condition with an impact on the ability to use their achieved education, experience and expertise, ability to continue with prior gainful activity or ability to requalify compared to the Insured person original conditions, specifically by at least
- 70% in the case of 3rd grade disability (this decline is referred to as **3rd grade disability** for the purposes of this insurance);
 - 50% in the case of 2nd grade disability (this decline is referred to as **2nd grade disability** for the purposes of this insurance);
 -
- 15.1 Hospitalization** means the necessary (from a medical perspective) provision of acute bed care (intensive and standard) and/or subsequent intensive bed care to the Insured person at the medical facility of a bed care provided for the necessary period, but minimally for 2 days, if this care could not be provided on an outpatient basis.
- 15.9 Injury** means an unexpected and sudden impact of external forces or the insured's own physical force independent of the insured's will, or unexpected, continuous and independent of the insured's will impact of high or low external temperatures, gases, fumes, radiation (excluding nuclear), electricity and poisons (excluding microbial poisons and immunotoxic substances) causing damage to the insured's health or the insured's death during the insurance period. Death by drowning, near drowning and strike of lightning are also considered an injury provided that they occur independently of the Insured person will. The following cases are not considered injury:
- suicide, attempted suicide, intentional self-inflicted injury and declaration of the death of the person;
 - formation and aggravation of hernias and tumors of all kinds and origins, of varicose ulcers, diabetic

INSURANCE CONDITIONS FOR GROUP ACCIDENT INSURANCE TEAM

gangrenes, formation and aggravation of aseptic inflammations of tendon sheaths, muscle ligaments, bursitis, synovitis, epicondylitis, spinal disc prolapse and thereto related problems, including vertebrogennic algic syndromes, even if the listed problems have been provoked by injury or a sudden vascular accident;

- c) mental or psychiatric disease, even if induced by an injury;
- d) collapses, epileptic or other fits and spasms affecting the whole body, unless they occur as a sole result of an injury;
- e) infectious diseases, even if transmitted by wounds caused by an injury;
- f) work-related injuries and diseases, unless they are of injurious nature as defined in these insurance terms and conditions;
- g) aggravation or manifestation of a disease as a result of an injury;
- h) heart attack or brain strokes.

15.7 Insurance month (year) means the deadline or period specified by the insurance contract, which starts on the date whose number corresponds to the starting date of insurance specified in the insurance contract. If there is no such day in the last month, the start of the insurance month/year shall be the last day of the month.

15.8 Insurance Period means the period agreed in the insurance contract for which the current premium is paid.

15.6 Insured person means the person who has reached the age of 15 years at the time of concluding insurance, to whose life and health the insurance applies.

15.4 We means Komerční pojišťovna, a.s., with its registered office in nám. Junkových 2772/1, 155 00 Praha 5, ID Number: 63998017, incorporated in the commercial register kept by the Municipal Court in Prague, Section B, File 3362

15.2 Website means our website www.kb-pojistovna.cz

15.10 You means the person that signed the offer of this insurance upon reaching the age of 18 years, and specified in the insurance contract as the policyholder.

Principles of Permanent Injury Effects Assessment

1. Indemnification for permanent injury effects is assessed per the Classification of Indemnification for Permanent Injury Effects issued by Komerční pojišťovna (hereinafter the PDI classification only). Indemnification is assessed as a percentage share of policy size for permanent effects caused by injury that matches the individual damages' scopes of permanent effects after their stabilization. If they did not stabilize within three years from the injury day, then per the percentage share corresponding to their status in the end of this period.
2. If the PDI classification specifies a percentage range, the indemnification amount determined within a given range will match the character and scope of permanent effects incurred by the Insured person due to his injury.
3. If a single injury causes multiple permanent injury effects of various types to the insured, the total permanent effects get set as a total of percentage points of the individual permanent effects; however, only up to a 100% of the total share.
4. If the individual injury permanent effects after one or multiple injuries apply to the same limb, organ, or their parts, they get assessed as a whole; however, using the highest percentage share specified in the PDI classification for anatomic or functional loss of the given limb or its part.
5. If permanent injury effects apply to body parts or organ already damaged before the injury, we will reduce our indemnification for permanent injury effects by a percentage differential corresponding to the previous damage scope expressed by a percentage differential per the PDI classification.
6. In those cases when an identified permanent effect is not specified in the PDI classification or its character possibly does not exactly match the given PDI classification item's wording, we follow our medical assessor's position. The medical assessor will complete his assessment in the form of percentage share corresponding to a similar damage in the PDI classification or he will produce percentage value proportional to the bodily damage seriousness.
7. We determine our indemnification amount per medical report on the insured's examination completed by our medical assessor or medical reports documenting the current status and scope of permanent effects. We will secure examination to identify the scope of permanent effects at our own costs.
8. Scars on one's face and neck may be assessed without any examination completed by our medical assessor; photo documentation and scar descriptions submitted by the Insured person will suffice. However, we stipulate our right to subject the Insured person to examination of permanent effects completed by our medical assessor.
9. If an injury leaves the Insured person with his permanent effect in the form of lost finger or leg or its part, it is possible to assess indemnification amount through our medical assessor on the basis of submitted photo documentation of the insured's permanent effect, medical reports, or X-ray documentation. However, we stipulate our right to subject the Insured person to examination of permanent effects completed by our medical assessor.

Indemnity classification

HEAD INJURIES AND INJURIES OF SENSE ORGANS		
Complete defect in the skull in the extent of		
001	up to 10 cm ²	5 %
002	over 10 cm ²	15 %
Serious brain disorders and mental disorders caused by serious head injuries		
003	light degree	to 20 %
004	medium to serious degree	21-100 %
Traumatic disorder of the facial nerve		
005	light degree	to 10 %
006	medium to serious degree	11-20 %
007	Traumatic damage of the trigeminal nerve based on the given degree	to 20 %
008	Damage of the face and other parts of the head and neck, accompanied by functional disorders	to 15 %
Scar on the face and neck of the following length		
009	from 1 cm to 2 cm ²	1 %
010	for each additional started cm	0,5 %
The maximal compensation amount for a single scar is 10%.		
011	Partial removal of the lower jaw (lifting the entire section by 1/2 of the maxillary bone)	15-40 %
NOSE OR OLFACTION DAMAGE		
Deformation of the outer shape of the nose or the nasal septum		
012	without significant defect of the nose permeability	to 3 %
013	with a significant defect of the nose permeability	4-10 %
014	Post-injury perforation of the nasal septum	5 %
Loss of the entire nose or its part		
015	without breathing disorders	to 20 %
016	without a breathing disorder	to 25 %
When conducting assessments pursuant to items 012-014, permanent effects pursuant to items 015-016 cannot be assessed simultaneously.		
017	Chronic atrophic inflammation of the mucous membrane - burned by acid or burned	10 %
018	Loss of olfaction	10 %
EYE INJURIES OR VISION DAMAGES		
Upon complete loss of vision, the compensation for permanent effects in one eye cannot exceed 35%; for the second eye, the compensation cannot exceed 65%, i.e. a total of 100% for both eyes, at the most. However, permanent damages included under items 020, 026 through 029, 032, 035 and 036 can be assessed even above this limit.		

019	Effects of eye injuries that result a worsened visual acuity are assessed pursuant to auxiliary table no. 1.	
020	For anatomic loss or atrophy of the eye, it is added to the determined value of the permanent eye inferiority	5 %
Loss of the crystalline lens		
021	one eye	3 %
022	both eyes	6 %
Shall intraocular lens replacement take place, assessment for accommodation disorder is added.		
023	Traumatic disorder of oculomotor nerves or balance disorder of oculomotor muscles based on the given degree up to	to 25 %
024	Concentric limitation of the field of vision incurred as a result of an injury is assessed pursuant to auxiliary table no. 2.	
025	Other limitations of the field of vision are determined based on the percentage of the loss of the field of vision	
Damaged permeability of the nasolacrimal ducts		
026	one eye	5 %
027	both eyes	10 %
Incorrect position of the cilia not corrected by surgery		
028	one eye	5 %
029	both eyes	10 %
030	Widening and paralysis of the pupil is assessed based on the hanging without stenopaic correction pursuant to auxiliary table no. 1.	
031	Widening and paralysis of the pupil of an eye that has vision	3 %
032	Deformation of the outer segment and its surroundings that attracts compassion or ugliness, or ptosis of the upper eyelid, provided it does not cover the pupil (independently of the hanging disorder), for each eye	5 %
Traumatic accommodation disorder		
033	one-sided (is subject to assessment until 50 years of age)	8 %
034	two-sided (is subject to assessment until 45 years of age)	5 %
Posttraumatic lagophthalmus not corrected by surgery		
035	one-sided	8 %
036	two-sided	16 %
When conducting assessments pursuant to items 035-036, permanent effects pursuant to item 032 cannot be assessed simultaneously.		
037	Ptosis of the upper eyelid uncorrectable by surgery, if it covers the pupil of the leading eye, it is assessed pursuant to auxiliary table no. 2.	
EAR OR HEARING DAMAGE		
038	Deformation or partial loss of one auricle	5 %

INDEMNITY CLASSIFICATION FOR PERMANENT CONSEQUENCES OF INJURY

039	loss of one auricle	10 %
040	loss of both auricles	15 %
041	Permanent post-injury perforation of the eardrum without obvious secondary infection	5 %
042	Chronic suppurative inflammation of the middle ear , demonstrably caused by an injury	8 %
Hearing impairment - one-sided		
043	light degree	2 %
044	medium degree	4 %
045	serious degree	5-10 %
Hearing impairment - two-sided		
046	light degree	5 %
047	medium degree	18 %
048	serious degree	19-30 %
Hearing loss		
049	one ear, while the function of the other ear is preserved	12 %
050	one ear, while the function of the other ear is aggravated	22 %
051	two-sided, as a result of a single injury	40 %
Labyrinth disorder		
052	one-sided, based on the given degree	to 20 %
053	two-sided, based on the given degree	21-40 %
TEETH DAMAGE		
The insurer pays compensation for the loss of healthy vital teeth only if it occurs as a result of external violence.		
The insurer does not pay any compensation for the loss, chipping or damage of artificial tooth replacements and temporary (milk) teeth.		
Loss		
054	one tooth	1 %
055	each additional tooth	1 %
056	tooth vitality	1 %
057	Deformity of frontal teeth occurred as a result of a demonstrated injury of temporary (milk) teeth, for each damaged permanent tooth	1 %
058	Wear of the pillar teeth under the crowns of permanent replacements or link teeth of removable replacements for teeth lost as a result of an injury, for each worn tooth	0,5 %
TONGUE DAMAGE		
059	Conditions resulting from tongue injuries with tissue defects or scar deformations (only if it is not already subject to assessment pursuant to items 064 and 065)	5 %
060	Loss of taste pursuant to its extent	to 10 %
THROAT INJURIES		
Constriction of the larynx or trachea		
061	light degree	10 %
062	medium degree	15 %
063	serious degree	16-30 %
064	Post-injury voice disorder (hoarse voice, croaking, voice skipping)	to 15 %
065	Loss of voice (aphonia)	30 %
When conducting assessments pursuant to items 063-065, permanent effects pursuant to item 066 cannot be assessed simultaneously, and vice versa.		
066	Post tracheotomy condition with a permanently implemented cannula, including related functional disorders (for example, loss of voice)	50 %
THORAX, LUNG, HEART OR GULLET INJURIES		
067	Post-injury deformity of one or both breasts	to 10 %
Amputation of one or both breasts as a result of an injury		
068	for women of up to 45 years old	to 28 %
069	for women of up to 45 years old	to 18 %
Limitation of the movement of the thorax and pulmonary and thorax wall adhesion, clinically verified		
070	light degree	5 %
071	medium degree	10 %
072	serious degree	20 %
Other effects of lung injuries based on the given degree and extent of the functional disorder		
073	one-sided	to 40 %
074	two-sided	to 80 %
075	Heart and vascular disorders (only as a direct result of an injury), clinically verified - based on the degree of the functional disorder	to 80 %
076	Gullet fistula	25 %
Post-injury gullet constriction		
077	light degree	8 %
078	medium degree	22 %
079	serious degree	23-50 %
INJURIES OF THE ABDOMEN AND DIGESTIVE ORGANS		
080	Damage of the abdomen wall , accompanied by a damage of the abdomen press	to 10 %
081	Disorder of the function of the digestive organs, based on the degree of the functional disorder	to 80 %
Loss of the spleen, including related difficulties		
082	partial	to 12 %
083	complete	20 %
084	Permanent opening of the small or large intestine via the abdomen wall (stoma) implemented as a result of an injury	40 %
Rectum disorder incurred as a result of an injury, post-injury constriction of the rectum or anus		
085	light degree	5 %
086	medium degree	12 %
087	serious degree	13-30 %
Insufficiency of anal sphincters		

088	partial	15 %
089	complete	40 %
INJURIES OF URINARY AND SEXUAL ORGANS		
Loss of one kidney		
090	while the function of the other kidney is preserved	25 %
091	while the function of the other kidney is limited	40 %
092	while the other kidney is dysfunctional	60 %
093	Loss of both kidneys	60 %
Loss of a part of a kidney		
094	while the function of the other kidney is preserved	15 %
095	while the other kidney is dysfunctional	50 %
Post-injury effects of kidney and urinal system damages, including secondary infections		
096	light degree	to 10 %
097	medium degree	to 15 %
098	serious degree	to 40 %
099	Chronic inflammation of the urinal system and secondary kidney disorder	15-50 %
Assessment pursuant to this item can be used if the injury in question is not a direct injury of the kidneys or the urinal system (for example, spine, spinal cord or brain damages).		
100	Loss of one testicle (assessed as the loss of both testicles in the case of cryptorchism)	10 %
Loss of both testicles or potency		
101	up to 50 years of age	40 %
102	from 50 to 65 years of age	20 %
103	over 65 years of age	10 %
Loss or serious deformity of the penis		
104	up to 50 years of age	30 %
105	from 50 to 65 years of age	20 %
106	over 65 years of age	10 %
107	Post-injury deformation of female sexual organs	to 45 %
SPINE AND SPINAL CORD INJURIES		
Spine movement limitations without neurological symptoms		
108	light degree	to 8 %
109	medium degree	to 20 %
110	serious degree	to 40 %
When conducting assessment pursuant to items 108-110, assessment pursuant to items 111-113 cannot be conducted simultaneously, and vice versa.		
Post-injury damages of the spine, spinal cord, spinal meninx and roots with permanent objective symptoms of functional disorder		
111	light degree	to 20 %
112	medium degree	21-35 %
113	serious degree	36-100 %
PELVIS INJURIES		
Disruption of the link between the pelvis ring with a spine statics disorder and the function of the lower limbs		
114	for women of up to 45 years old	15-65 %
115	for women of over 45 years of age	15-50 %
116	for men	15-50 %
UPPER LIMB INJURIES		
The stated values apply to right-handed persons; for left-handed persons, the opposite assessment applies.		
Damage of the shoulder joint region		
Loss of an upper limb in the shoulder joint or in the region between the elbow and shoulder joints		
117	on the right	60 %
118	on the left	50 %
Complete stiffness of the shoulder joint in unfavourable position (complete abduction, adduction or position close to them)		
119	on the right	35 %
120	on the left	30 %
Complete stiffness of the shoulder in a favourable position or in a position close to it (side stretch 50° - 70°, forward stretch 40° - 45° and internal rotation 20°)		
121	on the right	30 %
122	on the left	25 %
Movement limitation of the shoulder joint, including limitation of the rotation movements		
of a light degree (incomplete forward stretch over 135°)		
123	on the right	to 7 %
124	on the left	to 6 %
of a medium degree (stretching up by stretching forward up to 135°)		
125	on the right	to 13 %
126	on the left	to 11 %
of a serious degree (stretching up by stretching forward up to 90°)		
127	on the right	to 23 %
128	on the left	to 20 %
Non-union of the humerus insolvable by surgery - orthopedically		
129	on the right	20 %
130	on the left	15 %
131	Chronic inflammation of the bone marrow of the humerus, only as a result of open injuries or operative interventions necessary for the treatment of the given injury effects - insolvable by surgery - orthopedically	25 %
Artificial shoulder joint		
132	up to 50 years of age	30 %
133	from 50 to 65 years of age	20 %

INDEMNITY CLASSIFICATION FOR PERMANENT CONSEQUENCES OF INJURY

	Assessments pursuant to items 132 and 133 already include defects of the joint movement	
	Habitual shoulder dislocation	
134	on the right	20 %
135	on the left	16 %
	Compensations pursuant to items 134 and 135 excludes the right for compensation for additional humerus (shoulder) dislocations caused by an injury pursuant to the Classification of compensations for injury damages.	
	For assessments pursuant to items 134 and 135, it is not possible to simultaneously conduct assessments pursuant to items 136 and 137.	
	Shoulder joint instability	
136	on the right	to 15 %
137	on the left	to 10 %
	Uncorrected sternoclavicular dislocation	
138	front	3 %
139	rear	6 %
	Uncorrected acromioclavicular dislocation apart from possible shoulder joint function disorder	
140	on the right	4 %
141	on the left	3 %
	Permanent effects after the rupture of the long head of the biceps brachii while the function of the shoulder and elbow joints remain unaffected	
142	on the right	3 %
143	on the left	2 %
	Damage of the elbow joint and the forearm region	
	Complete stiffness of the elbow joint in an unfavourable position (complete stretch or complete bend and positions close to them)	
144	on the right	30 %
145	on the left	25 %
	Complete stiffness of the elbow joint in a favourable position or in positions close to it (bend angle 90° to 95°)	
146	on the right	20 %
147	on the left	16 %
	Limited mobility of the elbow joint	
	light degree	
148	on the right	to 6 %
149	on the left	to 5 %
	medium degree	
150	on the right	to 12 %
151	on the left	to 10 %
	serious degree	
152	on the right	to 18 %
153	on the left	to 15 %
	Complete stiffness of radioulnar joints (while moving the forearm away or towards the body is impossible) in an unfavourable position or in positions close to it (in a maximal pronation or supination - extreme positions towards and away from the body)	
154	on the right	20 %
155	on the left	16 %
	Limited pronation and supination of the forearm	
	light degree	
156	on the right	to 5 %
157	on the left	to 4 %
	medium degree	
158	on the right	to 10 %
159	on the left	to 8 %
	serious degree	
160	on the right	to 20 %
161	on the left	to 16 %
	Non-union of the ulna or radial bone, or both forearm bones, insolvable by surgery - orthopedically	
162	on the right	20 %
163	on the left	15 %
164	Chronic inflammation of the bone marrow of one or both forearm bones, only as a result of open injuries or operative interventions necessary for the treatment of the given injury effects – insolvable by surgery – orthopedically	20 %
	Elbow joint instability	
165	on the right	to 25 %
166	on the left	to 20 %
	Artificial elbow joint of the limbs	
167	up to 50 years of age	30 %
168	over 50 years of age	20 %
	Assessments pursuant to items 167 and 168 already include defects of the joint movement.	
	Loss of the forearm with the elbow joint preserved	
169	on the right	50 %
170	on the left	40 %
	Hand loss or damage	
	Hand loss in the wrist	
171	on the right	50 %
172	on the left	40 %
	Loss of all fingers (possibly including metacarpal bones)	
173	on the right	50 %
174	on the left	40 %
	Loss of fingers , excluding thumb (possibly including metacarpal bones)	
175	on the right	45 %

176	on the left	38 %
	Complete stiffness in the wrist in an unfavourable position or in positions close to it (complete bend of the palm or dorsum of hand)	
177	on the right	to 30 %
178	on the left	to 25 %
	Complete stiffness of the wrist in a favourable position (dorsum bend 20-40°)	
179	on the right	to 20 %
180	on the left	to 17 %
	Non-union of the scaphoid bone insolvable by surgery - orthopedically	
181	on the right	15 %
182	on the left	12 %
183	Chronic inflammation of the bone marrow of the hand, only as a result of open injuries or operative interventions necessary for the treatment of the given injury effects – insolvable by surgery – orthopedically	15 %
	Wrist instability	
184	on the right	to 12 %
185	on the left	to 10 %
	Limited mobility of the wrist	
	light degree	
186	on the right	to 6 %
187	on the left	to 5 %
	medium degree	
188	on the right	to 12 %
189	on the left	to 10 %
	serious degree	
190	on the right	to 20 %
191	on the left	to 17 %
	Damage of the thumb	
	Loss of the end article of the thumb	
192	on the right	to 9 %
193	on the left	to 7 %
	Loss of both articles of the thumb	
194	on the right	to 18 %
195	on the left	to 15 %
	Loss of the thumb with the metacarpal bone	
196	on the right	to 25 %
197	on the left	to 21 %
	Complete stiffness of the inter-article joint of the thumb in an unfavourable position (extreme bend)	
198	on the right	8 %
199	on the left	7 %
	in hypertension	
200	on the right	7 %
201	on the left	6 %
	Complete stiffness of the inter-article joint of the thumb in a favourable position (slight bend)	
202	on the right	6 %
203	on the left	5 %
	Complete stiffness of the base joint of the thumb	
204	on the right	6 %
205	on the left	5 %
	Complete stiffness of the carpometacarpal joint of the thumb in an unfavourable position (complete abduction or adduction)	
206	on the right	9 %
207	on the left	7 %
	Complete stiffness of the carpometacarpal joint of the thumb in a favourable position (light opposition)	
208	on the right	6 %
209	on the left	5 %
	Complete stiffness of all joints of the thumb in an unfavourable position	
210	on the right	to 25 %
211	on the left	to 21 %
	For assessments pursuant to items 192 - 211, the disorder of the gripping function of the thumb cannot be assessed simultaneously.	
	Disorder of the gripping function of the thumb	
	light degree	
212	on the right	2 %
213	on the left	1 %
	medium degree	
214	on the right	to 6 %
215	on the left	to 4 %
	serious degree	
216	on the right	to 10 %
217	on the left	to 8 %
	Damage of the forefinger	
	Loss of the end article of the forefinger	
218	on the right	to 5 %
219	on the left	to 4 %
	Loss of two articles of the forefinger	
220	on the right	to 10 %
221	on the left	to 8 %
	Loss of all three articles of the forefinger	
222	on the right	to 12 %
223	on the left	to 10 %
	Loss of the forefinger with the metacarpal bone	
224	on the right	to 16 %

INDEMNITY CLASSIFICATION FOR PERMANENT CONSEQUENCES OF INJURY

225	on the left	to 13 %
	Complete stiffness of all three joints of the forefinger in extreme stretch	
226	on the right	to 12 %
227	on the left	to 10 %
	Complete stiffness of all three joints of the forefinger in the extreme bend	
228	on the right	15 %
229	on the left	12 %
	When conducting assessment pursuant to items 218-229, assessment of the gripping function of the forefinger cannot be conducted simultaneously.	
	The position of the forefinger prevents correct function of the adjoining fingers	
230	on the right	3 %
231	on the left	2 %
	Disorder of the gripping function of the forefinger - distance to the completely clenched fist:	
	1 cm to 2 cm	
232	on the right	to 4 %
233	on the left	to 3 %
	from over 2 cm to 3 cm	
234	on the right	to 6 %
235	on the left	to 4 %
	from over 3 cm to 4 cm	
236	on the right	to 10 %
237	on the left	to 8 %
	over 4 cm	
238	on the right	to 12 %
239	on the left	to 10 %
	Impossibility to completely stretch some of the joints of the forefinger, while the gripping function remains unaffected	
240	on the right	2 %
241	on the left	1 %
	Damage of the middle finger, ring finger and little finger	
	Loss of the end article of a finger	
242	on the right	3 %
243	on the left	2 %
	Loss of two articles of a finger	
244	on the right	to 5 %
245	on the left	to 4 %
	Loss of three articles of a finger	
246	on the right	to 8 %
247	on the left	to 6 %
	Loss of an entire finger with the corresponding metacarpal bone	
248	on the right	to 9 %
249	on the left	to 7 %
	When conducting assessment pursuant to items 242-249, assessment of the gripping function of the middle finger, ring finger and little finger cannot be conducted simultaneously.	
	The position of one of the fingers prevents correct function of the adjoining fingers	
250	on the right	3 %
251	on the left	2 %
	Disorder of the gripping function of a finger - distance to the completely clenched fist:	
	1 cm to 2 cm	
252	on the right	2 %
253	on the left	1 %
	from over 2 cm to 3 cm	
254	on the right	3 %
255	on the left	2 %
	from over 3 cm to 4 cm	
256	on the right	to 5 %
257	on the left	to 4 %
	over 4 cm	
258	on the right	to 8 %
259	on the left	to 6 %
	Impossibility to completely stretch some of the joints of a finger, while the finger gripping function remains unaffected	
260	on the right	2 %
261	on the left	1 %
	Traumatic disorders of the upper limb nerves	
	The assessment already includes possible vasomotoric and trophic disorders	
	Traumatic disorder of the auxiliary nerve	
262	on the right	to 30 %
263	on the left	to 25 %
	Traumatic disorder of the stem of the radial nerve with an impact on all innervated muscles	
264	on the right	to 45 %
265	on the left	to 37 %
	with the preserved function of the triceps brachii	
266	on the right	to 35 %
267	on the left	to 27 %
	Paralysis of the distal part of the radial nerve with a disorder of the thumb muscle function	
268	on the right	to 15 %
269	on the left	to 12 %

	Traumatic disorder of the musculocutaneous nerve	
270	on the right	to 25 %
271	on the left	to 15 %
	Traumatic disorder of the distal stem of the elbow nerve with an impact on all innervated muscles	
272	on the right	to 40 %
273	on the left	to 33 %
	Traumatic disorder of the distal part of the elbow nerve , while the functions of the ulna flexor and the part of the deep finger flexor are preserved	
274	on the right	to 30 %
275	on the left	to 25 %
	Traumatic disorder of the middle nerve with an impact on all innervated muscles	
276	on the right	to 35 %
277	on the left	to 30 %
	Traumatic disorder of the distal part of the middle nerve with an impact on mostly thenar eminence	
278	on the right	to 10 %
279	on the left	to 8 %
	Traumatic disorder of the sensitive branch of the middle nerve in the wrist with a sensitivity disorder	
280	on the right	to 15 %
281	on the left	to 10 %
	Injuries of the middle nerve in the palm and in the fingers can be also adequately assessed pursuant to items 280 and 281.	
	Traumatic disorder of all three nerves (or even of the entire brachial plexus)	
282	on the right	to 60 %
283	on the left	to 50 %
	LOWER LIMB INJURIES	
	Post-injury loss of one limb in the hip or in the region between the hip and the knee joints	
284	without a functional prosthesis	60 %
285	with a functional prosthesis	50 %
286	Non-union of the femur insolvable by surgery - orthopedically	25 %
287	Necrosis of the head of the femur	40 %
	Artificial hip joint	
288	up to 45 years of age	45 %
289	over 45 years of age	40 %
	Assessments pursuant to items 288 and 289 already include defects of the joint movement.	
290	Chronic inflammation of the bone marrow of the femur, only as a result of open injuries or operative interventions necessary for the treatment of the given injury effects - insolvable by surgery - orthopedically	25 %
	Shortening of one lower limb	
291	1 cm to 2 cm	to 3 %
292	from over 2 cm to 4 cm	to 10 %
293	from over 4 cm to 6 cm	to 15 %
294	over 6 cm	to 25 %
	The sum of the assessments pursuant to items 285 - 294 cannot exceed the assessment pursuant to item 284. 284.	
295	Post-injury deformities of the femur (fractures healed with an axial or rotation aberration); for each 5° of the aberration (aberrations have to be demonstrated by the RDG displaying methods - for example, X-ray, CT, MR). Aberration over 45° are assessed as a loss of the limb (with a functional prosthesis).	5 %
	When assessing axial aberrations, it is not possible to also add relative shortening of the limb.	
	Complete stiffness of the hip joint	
296	in an unfavourable position (complete pull-in or pull-out, stretch or bend, and positions close to them)	40 %
297	in a favourable position (slightly pulled out and basic position, or a slight bend)	30 %
	Limited mobility of the hip joint	
298	light degree	to 15 %
299	medium degree	to 25 %
300	serious degree	to 35 %
	Damage of the knee joint	
	Complete stiffness of the knee in an unfavourable position	
301	complete stretch or bend with an angle over 20°	35 %
302	bend over 30°	45 %
303	Complete stiffness of the knee in a favourable position	30 %
	Patellectomy	
304	complete	10 %
305	partial	5 %
	Artificial joint	
306	up to 45 years of age	35 %
307	over 45 years of age	30 %
	Assessments pursuant to items 306 and 307 already include defects of the joint movement.	
	Limited mobility of the knee joint	
308	light degree	to 10 %
309	medium degree	to 15 %
310	serious degree	to 25 %
	Instability of the knee joint with insufficiency	
311	of one collateral ligament	to 5 %
312	of the anterior cruciate ligament	to 15 %
313	of the anterior and posterior cruciate ligaments	to 25 %

INDEMNITY CLASSIFICATION FOR PERMANENT CONSEQUENCES OF INJURY

	When assessing instability of the knee joint pursuant to items 308 - 310, 311 - 313 with a clinical finding of simultaneous limitation of the knee joint mobility assessed pursuant to items 308 - 310, the total compensation cannot exceed 35%, respectively 30% (assessment pursuant to items 306 and 307).	
	Permanent effects after a meniscus surgery intervention	
314	removal of an entire meniscus	5 %
315	removal of a part of one meniscus	2 %
316	removal of both menisci	10 %
317	removal of parts of both menisci	7 %
	When assessing permanent effects after the removal of the knee joint menisci pursuant to items 314 - 317 with a clinical finding of simultaneous instability assessed pursuant to items 311 - 313 and with a limited mobility of the knee joint assessed pursuant to items 308 - 310, the total compensation cannot exceed 35%, respectively 30% (assessment pursuant to items 306 and 307). 306 and 307).	
	Damage of the shank	
	Loss of the lower limb in the shank	
	with the knee preserved without a functional prosthesis	
318	over 45 years of age	45 %
319	up to 45 years of age	50 %
320	with stiff knee joint	50 %
321	with the knee preserved with a functional prosthesis	35 %
322	Non-union of the tibia or both crus bones insolvable by surgery - orthopedically	15 %
323	Chronic inflammation of the bone marrow of one or both crus bones, only as a result of open injuries or operative interventions necessary for the treatment of the given injury effects – insolvable by surgery – orthopedically	15 %
324	Post-injury deformities of the crus bones in the axial or rotation aberration for each 5° of the aberration (aberrations have to be demonstrated by the RDG displaying methods – for example, X-ray, CT, MR)	5 %
	Aberrations over 35° are assessed as a loss of the lower limb in the shank - item 321.	
	When assessing axial aberrations, it is not possible to also add relative shortening of the limb.	
	Damage in the region of the ankle joint	
325	Loss of the leg in the ankle joint with the loss of the calcaneus	40 %
	Loss of the foot in the Chopart joint	
326	by ankle arthrodesis	30 %
327	by a stump in the plantar flexion	35 %
328	Loss of the foot in the Lisfranc joint or below	25 %
	Complete stiffness of the ankle joint	
329	in an unfavourable position (dorsal flexion of more than 35° or plantar flexion of more than 35°)	30 %
330	in a right-angled position	25 %
331	in a favourable position or after arthrodesis in the ankle joint (plantar flexion of up to 5°)	20 %
	Limited mobility of the ankle joint	
332	light degree	to 6 %
333	medium degree	to 12 %
334	serious degree	to 20 %
	When conducting assessment pursuant to items 329-331, assessment of limitations pursuant to items 332-334 cannot be conducted simultaneously, and vice versa.	

335	Complete loss of pronation and supination	10 %
336	Limited pronation and supination	to 5 %
	Artificial ankle joint	
337	up to 45 years of age	30 %
338	over 45 years of age	25 %
	Assessments pursuant to items 337 and 338 already include defects of the joint movement.	
339	Instability of the ankle joint	to 15 %
340	Flat foot or deviated (in or out) foot as a result of an injury or other post-injury deformity in the ankle and foot region	to 25 %
341	Chronic inflammation of the bone marrow in the region of the tarsals, metatarsals and the calcaneus, only as a result of open injuries or operative interventions necessary for the treatment of the given injury effects – insolvable by surgery - orthopedically	10 %
	Damages in the foot region	
342	Loss of all toes	15 %
343	Loss of both articles of the big toe	10 %
344	Loss of both article of the big toe with the metacarpal bone or its part	15 %
345	Loss of the end article of the big toe	3 %
346	Loss of another toe (including the little toe) for each toe	2 %
347	Loss of the little toe with the metacarpal bone or its part	10 %
348	Complete stiffness of any toe, excluding the big toe - for each toe	1 %
	Complete stiffness	
349	inter-article joint of the big toe	3 %
350	base joint of the big toe	7 %
351	both joints of the big toe	10 %
	Post-injury circulation and trophic disorders	
352	in one limb	to 15 %
353	in both limbs	to 25 %
	Post-injury muscle atrophy of the limbs with unlimited range of the movement in the joint	
354	in the thigh	to 5 %
355	in the shank	to 3 %
	Traumatic disorders of the lower limb nerves	
	The assessment already includes possible vasomotoric and trophic disorders.	
	Traumatic nerve disorder	
356	sciatic nerve	to 50 %
357	femoral nerve	to 30 %
358	obturator nerve	to 20 %
359	Traumatic disorder of the stem of the tibial nerve with an impact on all innervated muscles	to 35 %
360	Traumatic disorder of the distal part of the tibial nerve with an impact on the function of the toes	5 %
361	Traumatic disorder of the stem of the fibular nerve with an impact on all innervated muscles	to 30 %
362	Traumatic disorder of the deep branch of the fibular nerve	to 20 %
363	Traumatic disorder of the shallow branch of the fibular nerve	to 10 %
	MISCELLANEOUS	
	Extensive surface scars (without considering disorders of the joint function)	
364	from 0.5% to 15% of the body surface	to 15 %
365	over 15% of the body surface	to 40 %
366	Decubitus ulcers in the extent from 2 cm	to 15 %

AUXILIARY TABLES FOR ASSESSING PERMANENT SIGHT DAMAGES

Table no. 1 - Compensation percentages for permanent physical damages related to reduced visual acuity with an optimal eyeglasses correction

Visus	6/6	6/9	6/12	6/15	6/18	6/24	6/30	6/36	6/60	3/60	1/60	0
6/6	0	3	6	10	13	16	19	22	25	29	32	35
6/9	3	7	10	13	17	20	24	27	31	34	37	41
6/12	6	10	13	17	20	24	27	30	34	37	41	47
6/15	10	13	16	20	23	27	30	34	37	40	44	53
6/18	13	16	20	23	26	30	33	37	40	44	47	59
6/24	16	19	23	26	30	33	36	40	43	47	50	65
6/30	19	23	26	29	33	36	40	43	47	50	53	70
6/36	22	26	29	33	36	39	43	46	50	53	57	76
6/60	25	29	32	36	39	43	46	49	53	56	60	82
3/60	29	32	36	39	42	46	49	53	56	60	63	88
1/60	32	35	39	42	46	49	52	56	59	63	66	94
0	35	41	47	53	59	65	70	76	82	88	94	100

If the visual acuity was reduced prior to the given injury in an extent that corresponds to a disability greater than 75% and if the better eye becomes blind as a result of the injury, or if one eye was blind and the other eye had visual acuity worse than it is specified for a 75% disability and if this other eye becomes blind, we pay a compensation in the amount of 35%.

Table no. 2 - Compensation percentages for permanent physical damages related to concentric narrowing of the field of vision

degree of narrowing	one eye	both eyes identically	one eye with the other eye blind
to 60°	0	10	40
degree of the concentric narrowing	one eye	both eyes identically	one eye with the other eye blind
to 50°	6	25	50

INDEMNITY CLASSIFICATION FOR PERMANENT CONSEQUENCES OF INJURY

to 40°	13	35	60
to 30°	19	45	70
to 20°	25	55	80
to 10°	32	75	90
to 5°	35	100	100

If, prior to the injury, one eye was blind and the other eye had concentric narrowing to 35° or more and if this eye becomes completely or practically blind, or if the narrowing of the field of vision to 5° occurs, we pay a compensation in the amount of 35%.