

Guide to Personal Accident Benefits



Table of Benefits Provided

 1.1 Reimbursement of healthcare costs following Occupational and Non-occupational Accidents: insured sum 1,000 Euros

DOCUMENTS REQUIRED FOR CLAIM SETTLEMENT

- 1. Italian Institute for Insurance against Accidents at Work (INAIL) certificate (for occupational accidents)
- 2. Accident and emergency certificate (for non-occupational accidents)
- 3. Tax receipts for costs incurred (for prosthetic or medical appliances only)
- 4. Invoices for healthcare costs incurred

Submit a copy of the original documentation, affixing a stamp - indicating: the name of the Construction Workers' Welfare Fund (*Cassa Edile*) that opened the claim, the word '*Ricevuto*' (received) and the date the stamp was affixed - to the original document of which a copy is provided.

• 2.1 Flat-rate compensation following an Occupational Accident with Hospitalisation between 16 and 29 days: insured sum **1,500** euros

- 1. Copy of Italian Institute for Insurance against Accidents at Work (INAIL) certificate
- 2. Copy of hospital discharge letter and, where required only, copy of medical record



• 2.2 Flat-rate compensation following an Occupational Accident with Hospitalisation for 30 days or more: insured sum **2,000** euros

DOCUMENTS REQUIRED FOR CLAIM SETTLEMENT

- 1. Copy of Italian Institute for Insurance against Accidents at Work (INAIL) certificate
- 2. Copy of hospital discharge letter and, where required only, copy of medical record
- 2.3 Flat-rate compensation for Permanent Invalidity resulting from an Occupational Accident: insured sum **5,000** euros

DOCUMENTS REQUIRED FOR CLAIM SETTLEMENT

- 1. Copy of Italian Institute for Insurance against Accidents at Work (INAIL) certificate attesting to disablement of over 50%
- 2. Copy of hospital discharge letter and, where required only, copy of medical record
- 2.4 Reimbursement of Healthcare Costs for Occ. Acc. with neuromotor rehabilitation lasting > 60 days but < 181 days: insured sum **5,000** euros

DOCUMENTS REQUIRED FOR CLAIM SETTLEMENT

- Copy of Italian Institute for Insurance against Accidents at Work (INAIL) certificate
- 2. Copy of medical file
- 3. Copy of payment request issued by the healthcare facility in itemised form

Payment of compensation is, in any case, subject to signing by the Insured Person of the pledge to submit original copies of invoices issued by the healthcare facility and duly receipted. Rehabilitation must be carried out exclusively at a research hospital (IRCCS) of national importance and highly specialised in neuromotor rehabilitation pursuant to Italian Law no. 833/78, Article 42, and subsequent amendments and additions *(please see focus point 4 of the operating instructions for reporting a personal accident)*.



2.5 Reimbursement of Healthcare Costs for Occ. Acc. with neuromotor rehabilitation lasting > 180 days but < 361 days:
insured sum 10,000 euros

DOCUMENTS REQUIRED FOR CLAIM SETTLEMENT

- 1. Copy of Italian Institute for Insurance against Accidents at Work (INAIL) certificate
- 2. Copy of medical file
- 3. Copy of payment request issued by the healthcare facility in itemised form

Payment of compensation is, in any case, subject to signing by the Insured Person of the pledge to submit original copies of invoices issued by the healthcare facility and duly receipted. Rehabilitation must be carried out exclusively at a research hospital (IRCCS) of national importance and highly specialised in neuromotor rehabilitation pursuant to Italian Law no. 833/78, Article 42, and subsequent amendments and additions <u>(please see focus point 4 of the operating instructions for reporting a personal accident)</u>.

2.6 Reimbursement of Healthcare Costs for Occ. Acc. with neuromotor rehabilitation lasting > 360 days: insured sum
20,000 Euros

DOCUMENTS REQUIRED FOR CLAIM SETTLEMENT

- 1. Copy of Italian Institute for Insurance against Accidents at Work (INAIL) certificate
- 2. Copy of medical file
- 3. Copy of payment request issued by the healthcare facility in itemised form

Payment of compensation is, in any case, subject to signing by the Insured Person of the pledge to submit original copies of invoices issued by the healthcare facility and duly receipted. Rehabilitation must be carried out exclusively at a research Hospital (IRCCS) of national importance and highly specialised in neuromotor rehabilitation pursuant to Italian Law no. 833/78, Article 42 and subsequent amendments and additions. (please see focus point 4 of the operating instructions for reporting a personal accident).



• 2.7 Healthcare Costs for Occ. Acc. with neuromotor rehabilitation for serious traumatic brain injury and/or spinal cord injury: insured sum **60,500** euros

DOCUMENTS REQUIRED FOR CLAIM SETTLEMENT

- 1. Copy of Italian Institute for Insurance against Accidents at Work (INAIL) certificate
- 2. Copy of medical file
- 3. Copy of payment request issued by the healthcare facility in itemised form

Payment of compensation is, in any case, subject to signing by the Insured Person of the pledge to submit original copies of invoices issued by the healthcare facility and duly receipted. Rehabilitation must be carried out exclusively at a research hospital (IRCCS) of national importance and highly specialised in neuromotor rehabilitation pursuant to Italian Law no. 833/78, Article 42, and subsequent amendments and additions (please see focus point 4 of the operating instructions for reporting a personal accident).

• 2.8 Compensation of Board and lodging for accompanying person for rehabilitation taking place outside the province of residence equal to € 50.00 per day for a maximum of 90 days

- 1. Copy of Italian Institute for Insurance against Accidents at Work (INAIL) certificate
- 2. Copy of medical file
- 3. Copy of accompanying person's identity and tax code documents
- 4. Copy of documentation demonstrating the presence of the accompanying person at the hospital where the rehabilitation takes place



• 2.9 Compensation of Board and Lodging for rehabilitation taking place outside the region of residence: daily allowance of € 75.00 for a maximum of 90 days

DOCUMENTS REQUIRED FOR CLAIM SETTLEMENT

- 1. Copy of Italian Institute for Insurance against Accidents at Work (INAIL) certificate
- 2. Copy of medical file
- 3. Copy of accompanying person's identity and tax code documents
- 4. Copy of documentation demonstrating the presence of the accompanying person at the hospital where the rehabilitation takes place
- 2.10 Reimbursement of Ambulance Transport Costs for rehabilitation taking place outside the province of residence: insured sum € 600 euros
- 1 Copy of Italian Institute for Insurance against Accidents at Work (INAIL) certificate
- 2. Copy of payment request issued by the healthcare facility in itemised form

Payment of compensation is, in any case, subject to signing by the Insured Person of the pledge to submit original copies of invoices issued by the healthcare facility and duly receipted.



- 2.11 Reimbursement of Ambulance Transport Costs for rehabilitation taking place outside the region of residence: insured sum € 1,200
- 1 Copy of Italian Institute for Insurance against Accidents at Work (INAIL) certificate
- 3. Copy of payment request issued by the healthcare facility in itemised form

Payment of compensation is, in any case, subject to signing by the Insured Person of the pledge to submit original copies of invoices issued by the healthcare facility and duly receipted.

• 2.12 Reimbursement of Dental Costs incurred following an Occupational Accident: insured sum €2,000

- 1. Italian Institute for Insurance against Accidents at Work (INAIL) certificate
- 2. Dental invoices (indicating worker's tax code)
- 3. Submit a copy of the original documentation, affixing a stamp indicating: the name of the Construction Workers' Welfare Fund (*Cassa Edile*) that opened the claim, the word '*Ricevuto*' (received) and the date the stamp was affixed to the original document of which a copy is provided.



• 2.13 Lump-sum Death Payment for Occ. Acc. with sum doubled in the case of children with disabilities or aged < 14 years: insured sum € 10,000

- 1. Copy of Italian Institute for Insurance against Accidents at Work (INAIL) certificate
- 2. Copy of death certificate
- 3. Copy of heirs' identity and tax code documents (in the case of more than one heir, submit a delegation naming one of them, in any case attaching the identity and tax code documents of all the heirs)
- 4. Copy of authorisation from the guardianship judge (for under-age heirs)
- 5. Copy of declaration in lieu of affidavit
- 6. Copy of civil status certificate



• 2.14 Funeral Benefit in the event of Death following an Occupational Accident: insured sum € 1,500

- 1. Copy of Italian Institute for Insurance against Accidents at Work (INAIL) certificate
- 2. Copy of death certificate
- 3. Copy of heirs' identity and tax code documents (in the case of more than one heir, submit a delegation naming one of them, in any case attaching the identity and tax code documents of all the heirs)
- 4. Copy of declaration in lieu of affidavit
- 5. Copy of civil status certificate



Table of Benefits Provided

• 3.1 Reimbursement of Healthcare Costs following an **Occupational Disease** resulting in Permanent Invalidity equal to or > 55%: insured sum € **1,000**

DOCUMENTS REQUIRED FOR CLAIM SETTLEMENT

- 1. Italian Institute for Insurance against Accidents at Work (INAIL) certificate
- 2. Invoices for healthcare costs incurred
- 3. Receipts for co-payment 'tickets'
- 4. Submit a copy of the original documentation, affixing a stamp indicating: the name of the Construction Workers' Welfare Fund (Cassa Edile) that opened the claim, the word 'Ricevuto' (received) and the date the stamp was affixed to the original document of which a copy is provided.
- 3.2 Funeral Benefit in the event of Death following an Occupational Disease: insured sum € 1,500

- 1. Copy of Italian Institute for Insurance against Accidents at Work (INAIL) certificate
- 2. Copy of death certificate
- 3. Copy of heirs' identity and tax code documents (in the case of more than one heir, submit a delegation naming one of them, in any case attaching the identity and tax code documents of all the heirs)
- 4. Copy of declaration in lieu of affidavit
- 5. Copy of civil status certificate

