

## INSURANCE BENEFIT DETERMINATION TABLE FOR TRAUMAS TO BONES AND JOINTS

This Annex I to Accident Insurance Regulations approved by the resolution of the Board of ADB Compensa Vienna Insurance Group on 4 September 2018 constitutes an integral part of the Regulations and is issued in compliance with and subject to the requirements of the legislation of the Republic of Lithuania.

### I. TRAUMAS TO BONES AND JOINTS

No.	Outcomes of risks covered	Payable benefit (%) of the sum insured in respect of trauma
<b>I.1. CLAVICLE; SHOULDER GIRDLE</b>		
I.1.1.	Stiffness in the shoulder joint after humeral resection (surface of the clavicular joint)	40
I.1.2.	Stiffness in the shoulder joint	30
I.1.3.	Limited mobility of the shoulder joint	10
Notes:		
- In case of trauma to the right arm (for right-handers) or left arm (for left-handers), insurance benefit shall be increased by adding 10% of the sum insured to the benefit payable under respective paragraphs.		
- The function of the shoulder (glenohumeral) joint is assessed on the basis of the provided supporting excerpt from medical documents containing the results of objective tests.		
<b>I.2. ARM</b>		
I.2.1.	Loss of the only arm	100
I.2.2.	Loss of arm and/or clavicle, scapula (or their part)	75
I.2.3.	Loss of arm after exarticulation at the shoulder joint or humeral stump in the middle part	70
I.2.4.	Loss of arm – humeral stump in the lower third part	65
I.2.5.	Loss of forearm after exarticulation at the elbow joint	65
I.2.6.	Loss of forearm below the elbow joint	60
Notes:		
- In case of trauma to the right arm (for right-handers) or left arm (for left-handers), insurance benefit shall be increased by adding 10% of the sum insured to the benefit payable under respective paragraphs.		
<b>I.3. ELBOW JOINT</b>		
I.3.1.	Immobility of the elbow joint	20
I.3.2.	Limited mobility of the elbow joint	7
Notes:		
- In case of trauma to the right arm (for right-handers) or left arm (for left-handers), insurance benefit shall be increased by adding 10% of the sum insured to the benefit payable under respective paragraphs.		
- The function of the elbow joint is assessed on the basis of the provided supporting excerpt from medical documents containing the results of objective tests.		
- In case of limited mobility of both the elbow joint and the glenohumeral joint, 40% benefit of the sum insured is payable under paragraph I.1.2. and no benefit is payable under paragraph I.3.2.		
<b>I.4. RADIOCARPAL (WRIST) JOINT; HAND</b>		
I.4.1.	Loss of the hand at the wrist or carpal bones	55
I.4.2.	Immobility of the radiocarpal joint	20
I.4.3.	Limited mobility of the radiocarpal joint	5
I.4.4.	Hand functional impairment resulting from non-union of carpal bones (false joint)	5
Notes:		
- In case of trauma to the right arm (for right-handers) or left arm (for left-handers), insurance benefit shall be increased by adding 10% of the sum insured to the benefit payable under respective paragraphs.		
- Residual effects of the functional impairment are assessed on the basis of the provided supporting excerpt from medical documents containing the results of objective tests.		
<b>I.5. HAND DIGITS</b>		
I.5.1.	The first digit (thumb):	
I.5.1.1.	Partial amputation of nail phalanx	5
I.5.1.2.	Total amputation of nail phalanx	8
I.5.1.3.	Partial amputation of basic phalanx	15



I.5.1.4.	Digit loss	20
I.5.1.5.	Loss of digit and carpal bone (or any part of it)	25
I.5.2.	Limited mobility of two thumb joints or stiffness in one thumb joint	5
I.5.3.	Stiffness in two joints of the thumb	10

Notes:

- In case of trauma to the right arm (for right-handers) or left arm (for left-handers), insurance benefit shall be increased by adding 10% of the sum insured to the benefit payable under respective paragraphs.
- Functional impairment in digit joints is assessed on the basis of the provided supporting excerpt from medical documents containing the results of objective tests.

I.5.4.	The second digit (index finger):	
I.5.4.1.	Partial amputation of nail phalanx	3
I.5.4.2.	Total amputation of nail phalanx	8
I.5.4.3.	Total amputation of middle phalanx	10
I.5.4.4.	Amputation of basic phalanx, digit amputation	15
I.5.4.5.	Loss of digit and metacarpal bone (or any part of it)	20
I.5.4.6.	Limited mobility of two digit joints or stiffness in one joint	2
I.5.4.7.	Stiffness in two digit joints (contracture)	4

Notes:

- In case of trauma to the right arm (for right-handers) or left arm (for left-handers), insurance benefit shall be increased by adding 10% of the sum insured to the benefit payable under respective paragraphs.
- Functional impairment in digit joints is assessed on the basis of the provided supporting excerpt from medical documents containing the results of objective tests.

I.5.5.	The third digit (middle finger), the fourth digit (ring finger) or the fifth digit (little finger):	
I.5.5.1.	Partial amputation of nail phalanx	2
I.5.5.2.	Total amputation of nail phalanx	3
I.5.5.3.	Phalangeal stump in the middle or basic phalanx	8
I.5.5.4.	Loss of digit and metacarpal bone (or any part of it)	15
I.5.5.5.	Limited mobility of two digit joints or stiffness in one joint	1
I.5.5.6.	Stiffness in two digit joints (contracture)	3
I.5.6.	Loss of two digits of one hand:	
I.5.6.1.	First and second digits	35
I.5.6.2.	First and third, first and fourth or first and fifth digits	25
I.5.6.3.	Second and third, second and fourth or second and fifth digits	15
I.5.6.4.	Third and fourth or third and fifth	10
I.5.7.	Loss of three digits of one hand:	
I.5.7.1.	First, second and third/fourth/fifth (1 + 2 + 3), (1 + 2 + 4), (1 + 2 + 5)	40
I.5.7.2.	First, third and fourth/fifth (1 + 3 + 4), (1 + 3 + 5)	35
I.5.7.3.	Second, third and fourth/fifth (2 + 3 + 4), (2 + 3 + 5)	30
I.5.7.4.	Third, fourth and fifth (3 + 4 + 5)	25
I.5.8.	Loss of four digits of one hand	40
I.5.9.	Loss of all digits of one hand	45

Notes:

- In case of trauma to the right arm (for right-handers) or left arm (for left-handers), insurance benefit shall be increased by adding 10% of the sum insured to the benefit payable under paragraphs relating to traumas to hand digits.
- Functional impairment in digit joints is assessed on the basis of the provided supporting excerpt from medical documents containing the results of objective tests.

**I.6. LEG**

I.6.1.	Loss of leg after exarticulation at the hip joint or femoral stump in the upper third part	70
I.6.2.	Loss of leg after exarticulation at the hip joint or femoral stump in the upper third part when there was only one leg before the trauma	90
I.6.3.	Loss of leg: femoral stump in the middle or lower third part	60
I.6.4.	Loss of shin after exarticulation at the knee joint or tibial stump in the upper third part	50
I.6.5.	Loss of shin of the only leg	80
I.6.6.	Loss of shin: tibial stump in the middle or lower third part	45
I.6.7.	Leg functional impairment due to leg shortening by more than 2.5 cm	10



### **I.7. HIP JOINT**

I.7.1.	Immobility of the hip joint, pseudoarthrosis	15
I.7.2.	Limited mobility of the hip joint	7

Notes:  
- Functional assessment of the hip joint shall be based on the provided supporting excerpt from medical documents containing the results of objective tests.

### **I.8. KNEE JOINT**

I.8.1.	Immobility of the knee joint	10
I.8.2.	Pathological mobility of the knee joint due to ligament rupture	8
I.8.3.	Limited mobility of the knee joint	5

Notes:  
- Function of the knee joint shall be assessed at least 6 months after the trauma on the basis of the provided supporting excerpt from medical documents containing the results of objective tests.

### **I.9. TARSUS JOINT, FOOT**

I.9.1.	Immobility of the tarsus joint	10
I.9.2.	Limited mobility of the tarsus joint	5
I.9.3.	Loss of foot after exarticulation at the tarsus joint or foot amputation at tarsal bones	40
I.9.4.	Loss of distal part of the foot after amputation at metatarsal bones	30
I.9.5.	Foot functional impairment caused by deformation, nonunion	7

Notes:  
- Functional assessment of the tarsus joint and foot shall be based on the provided supporting excerpt from medical documents containing the results of objective tests.

### **I.10. FOOT DIGITS (TOES)**

I.10.1.	Loss of all toes after exarticulation at the toe joints or amputation at the basic phalanges	15
I.10.2.	Loss of the first toe and metatarsal bone or its part	10
I.10.3.	Loss of the first toe after exarticulation at the toe joint or phalangeal stump at the basic phalanx	5
I.10.4.	Loss of the proximal phalanx of the first toe	3
I.10.5.	Loss of the second, third, fourth or fifth toes:	3
I.10.5.1.	After exarticulation at the toe joint or phalangeal stump at the basic phalanx, loss of proximal phalanx	2
I.10.5.2.	Loss of toe, including metatarsal bone or its part	5
I.10.5.3.	Toe functional impairment due to immobility of joints	1

Notes:  
- In other cases of toe or toe function loss, insurance benefit shall be determined by summing up the benefits set for the loss of the function of separate toes.  
- Functional impairment in toe joints is assessed on the basis of the provided supporting excerpt from medical documents containing the results of objective tests.

### **I.11. Cranium**

I.11.1.	Fracture of cranial fornix bones	10
I.11.2.	Fracture of base bones	15
I.11.3.	Fracture of fornix and base bones	20
I.11.4.	Orbital fracture	5

Notes:  
- If any fracture of the cranial bones necessitated surgery, insurance benefit shall be increased by 10% of the sum insured for traumas.  
- Only one paragraph in this section shall apply in respect of the same trauma.  
- Fracture of multiple cranial fornix and/or base bones shall be considered to be one fracture.

### **I.12. Facial bones:**

I.12.1.	Fracture of maxilla, zygomatic bone	7
I.12.2.	Mandible fracture	5
I.12.3.	Fracture of nasal bones, sinuses	3
I.12.4.	Fracture of larynx, thyroid, lingual bones	4

Notes:  
- Fracture of the alveolar process of the mandible shall not be considered a jaw fracture.  
- One insurance benefit shall be paid for a bilateral jaw fracture.

### **I.13. Loss of teeth (loss of the whole permanent tooth and/or its root, complete tooth dislocation), traumatic injury:**

I.13.1.	Loss of 1 tooth	4
I.13.2.	Loss of 2-3 teeth	6



I.13.3.	Loss of 4-5 teeth	10
I.13.4.	Loss of 6 and more teeth	12
I.13.5.	Traumatic teeth injuries (per injured tooth)	2

- Notes:
- In case of fracture of the dental prosthesis or bridges, insurance benefit shall be granted only in respect of loss of bridge supporting teeth as a result of risk covered (event insured).
  - A traumatic injury to permanent teeth means a fracture of tooth or its root, partial tooth dislocation, tooth displacement into the alveolar bone, splitting of at least ¼ of the tooth).
  - The benefit shall be reduced by 50% for the loss of parodontal tooth.

**I.14. Spine:**

I.14.1.	Fracture of cervical, thoracic or lumbar vertebrae or their arches	12
I.14.2.	Fracture of cross-process, lumbar process and ridged process of vertebra	3
I.14.3.	Sacrum fracture	10
I.14.4.	Coccyx fracture	3

- Notes:
- In case of fractures of multiple processes of a vertebra, percents of benefits for each process fracture shall not be summed up.
  - Maximum 25% shall be paid for the fracture of 3 or more vertebrae.

**I.15. Sternum and rib-bones:**

I.15.1.	Sternum fractures	5
I.15.2.	Fracture of <2 rib-bones	3
I.15.3.	Fracture of 3 and more rib-bones	4
I.15.4.	Bilateral fracture of rib-bones (3 and more)	6

- Notes:
- If rib-bone fracture causes pneumothorax, hemothorax, traumatic pneumonia, exudative pleuritis (when treatment required surgical intervention), insurance benefit shall be increased by 5%.

**I.16. Arm:**

I.16.1.	Fracture of scapula, clavicle	5
I.16.2.	Proximal humerus fractures (surface of the clavicular joint)	9
I.16.3.	Fracture of the humerus corpus	10
I.16.4.	Distal humerus fractures	8
I.16.5.	Forearm bone fracture (unilateral)	5
I.16.6.	Forearm bones fracture (bilateral)	10
I.16.7.	Fracture of carpal bones (excl. scaphoid bone)	3
I.16.8.	Fracture of scaphoid bone	5
I.16.9.	Fracture of metacarpus bones. Insurance benefit shall be paid on a per bone-fracture basis, but not exceeding 8% of the sum insured.	3
I.16.10.	Phalangeal fracture at the base of the thumb	3
I.16.11.	Proximal phalangeal fracture of the thumb	2
I.16.12.	Fracture of hand digits (basic, middle phalanges). Insurance benefit shall be paid on a per bone-fracture basis, but not exceeding 4% of the sum insured.	2
I.16.13.	Fracture of hand digits (nail phalanx)	1

- Notes:
- Fracture of several phalanges of one digit shall be considered one fracture.

**I.17. Pelvic bones (*os ilium, os pubis, os ischii, os coxae*):**

I.17.1.	Fracture of the hip socket	12
I.17.2.	Rupture of symphysis and bone fracture	13
I.17.3.	Fracture of more than 2 bones	8
I.17.4.	Rupture of symphysis alone	7
I.17.5.	Fracture of one bone	5

**I.18. Leg:**

I.18.1.	Femoral trochanteric fracture	10
I.18.2.	Femur caput and/or column fracture	14
I.18.3.	Femur corpus fracture	10
I.18.4.	Fracture of the articular surfaces in tibia or femur	10
I.18.5.	Patellar fracture	8
I.18.6.	Tibial fracture	5



1.18.7.	Fracture of fibula, fracture of lateral malleolus and/or medial malleolus	5
1.18.8.	Tibial and fibular fracture	10
1.18.9.	Fracture of hucklebone, astragalus	7
1.18.10.	Other tarsal bones	4
1.18.11.	Metatarsal fracture. Insurance benefit shall be paid on a per bone-fracture basis, but not exceeding 6% of the sum insured.	3
1.18.12.	Fracture of 2-5 foot phalanges. Insurance benefit shall be paid on a per bone-fracture basis, but not exceeding 3% of the sum insured.	1
1.18.13.	Fracture of big toe	2

Notes:

- Fractures of multiple phalanges of one toe shall be considered to be one fracture.

#### 1.19. Other:

1.19.1.	Bone cracks, avulsion fractures, fractures of the sesamoid bones	1
1.19.2.	In case of bone fractures or when osteosynthesis was required for fixing and constant alignment of ununited ends of the fractured bones (using metal plates, pins, wire or external fixation devices), additional one-off compensation shall be paid in the amount of 10% of the insurance benefit payable in respect of the corresponding bone fracture.	
1.19.3.	Where joint fracture involved artificial joint implants, insurance benefit shall be increased by 15%.	

Notes:

- Multiple fractures in one bone (as a result of the event insured) shall be considered to be one fracture. - In case of a recurrent fracture of the bone at the place of bones scars or metal fixation, insurance benefit shall amount to 50% of the benefit payable in respect of the corresponding bone fracture, provided that a primary fracture occurred during the policy period.

- No insurance benefit is payable for pathological/stress fractures or fractures not classified otherwise, in case of osteoporosis, bone damage caused by malignant tumour, nonunion (pseudoarthrosis) / malunion.

- No insurance benefit is payable for the splitting (chipping) of bone fragments, injury of the tangential bone surface integrity.

- No insurance benefit is payable for rupture and/or dislocation of various parts of joint prosthesis, osteosynthesis.

## 2. JOINT DISLOCATION

### 2.1. Joint (bone) dislocation:

2.1.1.	Rupture/dislocation of glenohumeral joint, elbow joint, temporomandibular joint, shoulder/sterno-clavicular symphysis, dislocation of patella, knee	5
2.1.2.	Recurrent dislocation of the hip joint	10
2.1.3.	Dislocation of the following joints and resultant surgery: shoulder, elbow, mandible, acromial extremity of the clavicle, sternal extremity of the clavicle, knee	7
2.1.4.	Dislocation and resultant surgery of carpal and tarsal joints	5
2.1.5.	Dislocation of carpal and tarsal joints	3
2.1.6.	Phalangeal dislocation	1

Notes:

- Multiple phalangeal dislocations in one digit shall be considered to be one trauma.

2.1.7.	Phalangeal dislocation accompanied by impaired tendon integrity	2
2.1.8.	Patellar dislocation	4
2.1.9.	Dislocation of a cervical vertebra, coccygeal vertebra(-ae)	5
2.1.10.	Dislocation of 2 or more cervical vertebrae	7

Notes:

- Bone fracture or dislocation operation is understood as a surgical procedure if it involves fixation of ununited ends of the fractured bones (using surgical pins, wires, plates or external fixation devices) or fixation of joints. Close reduction of bones and joints shall not be considered a surgery.

- In case of bone dislocation, traumas to soft tissues, muscles, tendons in one limb during one event insured, insurance benefit shall be paid for one outcome which is the most severe.

- Insurance benefit for the traumas of one organ/limb suffered as a result of one event insured shall not exceed the sum fixed for the loss of such organ/limb.

- Coverage on recurring dislocations shall be 50% of insurance benefit payable for dislocation of the joint. Recurring dislocations shall not be regarded as risks covered and no benefits shall be paid in respect of them, if the initial (primary) dislocation occurred prior to entering into the insurance contract.

- No insurance benefit is payable for hernias (abdominal hernia, diaphragmatic hernia, hernia of the intervertebral discs) occurring as a result of physical loads/pressure (incl. weight lifting), as well as radiculopathies/neuropathies.

- The loss of organ/limb function shall be determined no earlier than 9 months and no later than 12 months after the date of the event insured. However, insurance benefit shall be paid prior to the expiry of 9 months when there are no doubts as to the permanent irrecoverable loss of the organ/limb.





