

**THE GENERAL DIRECTIVES OF
THE SICKNESS FUND LAIVA**

Valid as of January 8th 2026, until further notice

CONTACT INFORMATION

Postal address:

Sairauskassa Laiva
PO Box 666
20101 TURKU

Street address:

Meyer Turku Oy (P32C)
Telakkakatu 1
20240 TURKU

Open:

Monday-Thursday 9.00-12.00 and 13.00-15.00

Friday 9.00-12.00

Telephone +358 50 433 5523
+358 50 552 4775

E-mail: laiva@sairauskassalaiva.fi

E-service: <https://laiva.omasairauskassa.fi/>

Websites: www.sairauskassalaiva.fi

THE FUND BOARD

Actual members

Seilo Jyrki, chair
Lehtonen Mara, vice chair
Ervasti Jusa-Martti
Latvaliemi Sari
Tamminen Pasi
Vänni Pasi

Deputy members

Lehtiö Janne
Laaksonen Arto
Juusti Miika
Kangasmäki Sini
Kakko Juhani
Salonen Tuija

These general directives are meant to briefly inform about the Sickness Fund Laiva and fund's most common practices and compensations.

Specific directives are found in the official rules of the Sickness Fund Laiva. Contact the sickness fund for more detailed information.

Note: Please notice that this is an unofficial translation.

The valid official guidelines and rules in Finnish are followed in the interpretation and decision-making.

THE INSURANCE

The insured persons of the fund are all those in an hourly wage employment, with the exception of those with employment contracts of less than 6 months and whose working hours are less than 60 hours per calendar month.

The fund's insurance and the right to compensation starts at the beginning of the month following the signing of the employment contract.

Exceptions are dental care (6-month waiting period) and glasses (12-month waiting period).

THE INSURANCE FEE

The insurance fee is 1,50 per cent of the gross wage.

The insurance fee is deducted directly from the wage by the employer and settled with the sickness fund. The insurance fee is not tax-deductible.

KELA CARD

You will receive a new Kela card with the sickness fund's number (37504) within two weeks from the start of the insurance.

The card is mailed directly to your home.

Dispose the old Kela card.

You will get the discounts the sickness fund has settled with some service providers (the list is at the end of this summary) by presenting your Kela card.

TEMPORARY LAY-OFF OR OTHER UNPAID LEAVE

The compensations are paid during periods of an unpaid sickness leaves and parental allowances. The compensations are not paid during periods of lay-offs, child home care allowances, study or job alternation leaves.

THE SICKNESS FUND COMPENSATIONS AND CONDITIONS BRIEFLY

Please notice that this is a summary.

The valid official guidelines and rules in Finnish are followed in the interpretation and decision-making.

FROM THE BEGINNING OF THE INSURANCE

Public health care e.g. Health Centre fees, day surgery and daily hospital fees, outpatient and emergency clinic fees and serial therapy (Note: Not to be applied to oral/dental care or examinations)	100 %
Medicines (Kela-reimbursable, including the initial deductible of 70,33 €, Ask also for the Calculation (SV 27 ATK) in the pharmacy)	100 %
Doctor's fees in private health care (Note: Surgeries at private health care, always only at the discretion of the sickness funds' board, get more information from the sickness fund)	75 %
Radiological, pathological, laboratory and DIVA-examinations (doctor's referral to be included in the claim)	75 %
Optician and optometrist examinations (referral is not required)	75 %
Endoscopic examinations through a natural opening in the body (such as mouth, nose, urethra or anus)	75 %
Valvira-registered psychologist's examination (doctor's referral to be included in the claim)	75 %
Psychotherapy, rehabilitative psychotherapy compensated by Kela	75 %
Valvira-registered psychotherapists' or psychologist's visits max. 10 times per calendar year, when prescribed by the occupational health care doctor or a psychiatrist	75 %
Lymphatic draining, desensitization, cryotherapy and phototherapy treatments (doctor's referral to be included in the claim)	75 %
Physiotherapy, osteopathic, naprapathic or chiropractic treatments prescribed by a doctor max. 10 visits per calendar year (doctor's referral to be included in the claim)	50 %
Ambulance fees	100 %
Procedure and institutional fees charged by a private health care	max. 50 €/visit
Reimbursement of 75 % of the deductible portion of a voluntary health insurance, but per granted insurance compensation	max. 100 €
Funeral allowance after the death of a member	1 500 €

Please notice that if the treatment or the examination is Kela-reimbursable, the Kela-reimbursement will be subtracted from the Fund's reimbursement.

AFTER 6 MONTHS OF INSURANCE

Costs for dental care	350 € per calendar year
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AFTER ONE YEAR OF INSURANCE

Costs for eyeglasses/contact lenses (prescribed by an ophthalmologist/optician)	350 €
The compensation is available again, when new glasses/lenses have been purchased after at least two years have passed since the previous purchase.	

The maximum compensation for laser eye surgery is 700 €.

NB: Laser eye surgery compensation does not require that the insurance has been valid a year.

**The compensation must be applied for within six months from the date of payment.
Compensation must be applied for either through the e-service Iris or by post.**

THE SICKNESS FUND DOES NOT COMPENSATE

- administrative fees, invoicing extras, penalty interests etc.
- journeys made by other means of transport than an ambulance
- vaccinations
- detoxification
- masseur
- braces, orthosis, insoles, medical aids etc.
- medical certificates acquired for a driver's license or military service
- the share of costs covered by employer (e.g., ePassi)
- artificial insemination costs
- artificial kidney or cancer treatments or examinations in private health care
- pregnancy 3D or 4D examinations

DISCOUNTS FOR THE INSURED BY SICKNESS FUND LAIVA

The sickness fund Laiva has settled discounts with the following service providers. Discounts are given by presenting your Kela card.

CORONARIA NAANTALI, RAISIO AND TURKU

HAMMAS HOHDE HAMMASKLINIKAT

HAMMASMEHILÄINEN

IHOTALO

KUNTOUTUS- JA HYVINVOINTIKESKUS VARIAATIO OY

LÄÄKÄRIKESKUS AAVA OY

MEHILÄINEN

PIHLAJALINNA LÄÄKÄRIKESKUKSET

RAISION FYSIOTERAPIA KY

RECUROR OY

Discounts in Recuror are for the insured and for their family members

SILMÄÄSEMA

Discounts in Silmääsema are for the insured and for their family members

SYNLAB

SYNSAM

Discounts in Synsam are for the insured and their family members

TERVEYSTALO