

Appendix no. 1 to the General Terms and Conditions of LUX MED Group Insurance – GTC CODE G/006/2026/C

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THE SCOPE OF BENEFITS UNDER THE LUX MED HOSPITAL INSURANCE, FOR THE MAIN INSURED, PARTNER AND ADULT CHILD.

SECTION I: HOSPITAL SERVICE

Module: LUX MED Hospital Insurance - Orthopaedic Care

§1 Hospitalisation

Hospitalisation caused by an Accident (confirmed by a referral for a procedure or surgery resulting from the injury. The referral should be issued within 90 days of the occurrence of the Accident). The scope includes:

1. **Orthopaedics**
 - a. includes orthopaedic surgeries, orthopaedic materials;
 - b. it does not include:
 - I. endoprosthesis;
 - II. limb lengthening;
 - III. osseointegration treatments;
 - IV. spinal procedures.

Module: LUX MED Hospital Insurance - Orthopaedic Care Plus

§1 Hospitalisation

1. We provide Urgent Hospitalisation and Scheduled Hospitalisation in the field of orthopedics:
 - b. includes orthopaedic procedures, including endoprosthesis and orthopaedic fixation materials;
 - c. it does not include:
 - I. limb lengthening;
 - II. osseointegration treatments;
 - III. spinal procedures.

§2 Emergency Care

1. Consultation of the Emergency Care Physician is possible provided that the Hospital Coordinator confirms that consultation is necessary and appropriate from the medical point of view.
2. Emergency Care will be provided, depending on the medical indications and the extent of services available at a given location:
 - a. interventions by emergency medical service;
 - b. providing necessary medical assistance at the place of residence of the Insured;
 - c. providing necessary medical assistance at the Outpatient Clinic or Hospital designated by us;
 - d. giving recommendations on further conservative management;
 - e. transport to hospital.

The scope of services available as part of Emergency Care at a given location is indicated on www.opiekaszpitalna.luxmed.pl.

3. Emergency Care does not replace the assistance provided under the National Medical Emergency System. The Operator is entitled to refer the Insured Person to the facility of a higher level facility if required by the health status and medical safety. This does not constitute an improper performance of the Agreement.
4. Our responsibility in the field of Emergency Care does not cover health situations, in which any delay in providing medical assistance, available in the nearest medical facility, poses immediate threat to the life of the Insured Person. In particular, this includes loss of consciousness, anaphylactic shock, choking; status epilepticus; acute and severe allergic reactions resulting from biting or stinging by venomous animals; poisoning by medicines, chemicals or gases; electrocution; drowning; attempted suicide; a fall from high altitude; an extensive injury resulting from trauma, including traumatic amputations of the limbs or parts of the limbs; multiple traumas; sudden visual or hearing disorders; face-cranial injuries.

5. Item 4 shall not release the Operator from providing a healthcare service to a person who needs immediate provision of a service due to a threat to life or health arising from Article 15 of the Act on Medical Activity of 15 April 2011 (Journal of Laws No 112, item 654), i.e. dated 16 March, 2021 (Journal of Laws of 2021, item 711, as amended).

Module: LUX MED Hospital Insurance - Care in Illness

§1 Hospitalisation

1. We provide Scheduled hospitalisation for the Illnesses listed in Table No. 1.
2. The Benefit do not include urgent treatment including treatment of emergency/acute conditions.

Table no. 1: List of Illnesses covered by insurance:

Area	Detailed ICD-10 code	Definition
General surgery	K44.9	Diaphragmatic hernia is the displacement of the contents of the abdominal cavity into the chest cavity through an opening in the diaphragm. Under the agreement, we will only cover the treatment of a diaphragmatic hernia without obstruction or gangrene, which includes surgical treatment carried out on a scheduled basis.
General surgery	K42.9	Umbilical hernia is the displacement of the contents of the abdominal cavity through an open umbilical ring. Under the agreement, we will only cover the treatment of an umbilical hernia without obstruction or gangrene, which includes surgical treatment carried out on a scheduled basis.
General surgery	K43.9	Ventral hernia is the displacement of the contents of the abdominal cavity into a hernial sac outside its wall. Under the agreement, we will only cover the treatment of a ventral hernia without obstruction or gangrene, which includes surgical treatment carried out on a scheduled basis.
General surgery	K40.9	Unilateral inguinal hernia is the displacement of the contents of the abdominal cavity into a hernial sac outside its wall, occurring on one side in the groin area and inguinal canal. Under the agreement, we will only cover the treatment of a unilateral inguinal hernia without obstruction or gangrene, which includes surgical treatment carried out on a scheduled basis.
General surgery	K40.2	Bilateral inguinal hernia is the displacement of the contents of the abdominal cavity into a hernial sac outside its wall, occurring on both sides in the groin area and inguinal canal. Under the agreement, we will only cover the treatment of a bilateral inguinal hernia without obstruction or gangrene, which includes surgical treatment carried out on a scheduled basis.
General surgery	K41.2	Bilateral femoral hernia is the displacement of the contents of the abdominal cavity into a hernial sac outside its wall through the femoral canal on both sides. Under the agreement, we will only cover the treatment of a bilateral femoral hernia without obstruction or gangrene, which includes surgical treatment carried out on a scheduled basis.
General surgery	K41.9	Unilateral femoral hernia is the displacement of the contents of the abdominal cavity into a hernial sac outside its wall through the femoral canal on one side. Under the agreement, we will only cover the treatment of a unilateral femoral hernia without obstruction or gangrene, which includes surgical treatment carried out on a scheduled basis.
General surgery	E 04.0 E04.1	Goiter (Thyroid enlargement) is a symptom of thyroid disease, where there is most commonly an enlargement of the thyroid or the presence of nodules. Under the agreement, we will only cover the treatment of non-

	E04.2 E04.8	toxic diffuse goiter, single thyroid nodule, multinodular goiter, and other specified types of goiter, which includes surgical treatment carried out on a scheduled basis.
General surgery	E21.0 E21.1 E21.2 E21.4	Hyperparathyroidism is characterised by the excessive secretion of parathyroid hormone (PTH) by the parathyroid cells, which disrupts calcium metabolism. Under the agreement, we will only cover the treatment of primary, secondary, and other specified parathyroid disorders, which includes surgical treatment carried out on a scheduled basis.
General surgery	I84.0 I84.2 I84.3 I84.5 I84.6 I84.9	Hemorrhoidal Tumors (Hemorrhoids, Hemorrhoidal Disease) are the enlargement of cavernous, arteriovenous structures in the anal canal called hemorrhoidal nodules. Under the agreement, we will only cover the treatment of internal and external hemorrhoids, both thrombosed and non-thrombosed, without other complications, which includes surgical treatment or procedural interventions carried out on a scheduled basis.
General surgery	K25.7	Stomach ulcers are recurrent digestive ulcers (localised loss of the mucous membrane with inflammatory infiltration and necrosis) occurring in the stomach. Under the agreement, we will only cover the treatment of stomach ulcers, which includes surgical treatment or procedural intervention carried out on a scheduled basis.
General surgery	K28.7	Stomach and jejunum ulcers are recurring digestive ulcers (localised loss of the mucous membrane with inflammatory infiltration and necrosis) occurring in the stomach and jejunum. Under the agreement, we will only cover the treatment of ulcers, which includes surgical treatment or procedural intervention carried out on a scheduled basis.
General surgery	K26.7	Duodenal ulcer is a recurring digestive ulcer (limited loss of the mucous membrane with inflammatory infiltration and necrosis) occurring in the duodenum. Under the agreement, we will only cover the treatment of duodenal ulcers, which includes surgical treatment or procedural intervention carried out on a scheduled basis.
General surgery	K57.1 K57.3 K57.5 K57.9	Diverticular disease (diverticula) of the intestines refers to the outpouching of the mucous membrane of the intestines through their walls. Under the agreement, we will only cover the treatment of diverticular disease of the small intestine or large intestine without symptoms of acute inflammation, perforation, or abscess, which includes surgical treatment or procedural intervention carried out on a scheduled basis.
General surgery	K63.5	Colorectal polyp is a benign growth of the mucous membrane in the form of a protrusion into the lumen of the intestine. Under the agreement, we will only cover the treatment of pedunculated or non-pedunculated polyps of the colon, which includes surgical treatment or procedural intervention carried out on a scheduled basis.
General surgery	K50.0 K50.1 K50.8	Crohn's Disease (CD) is a full-thickness inflammation of the gastrointestinal tract with characteristic segmental inflammatory changes. Under the agreement, we will only cover the treatment of inflammation affecting the small and large intestines, which includes surgical treatment or procedural intervention carried out on a scheduled basis.

General surgery	K51.0 K51.1 K51.2 K51.3 K51.8 K51.9	Ulcerative colitis is an inflammation of the mucous membrane of the gastrointestinal tract in the form of erosions or ulcers in more severe cases. Under the agreement, we will only cover the treatment of inflammation of the small intestine, large intestine, ileum and large intestine, rectum, rectum and sigmoid colon, other and unspecified colitis, which includes surgical treatment or procedural intervention carried out on a scheduled basis.
General surgery	K80.2 K80.5	Gallstones is a condition in which insoluble deposits made of chemical substances found in bile occur in the gallbladder and/or bile ducts. Under the agreement, we will only cover the treatment of gallstones without symptoms of acute inflammation, which includes surgical treatment carried out on a scheduled basis.
General surgery	K81.1	Cholecystitis is an inflammatory condition of the gallbladder primarily caused by gallstones. Under the agreement, we will only cover the treatment of chronic cholecystitis without symptoms of acute inflammation, which includes surgical treatment carried out on a scheduled basis.
Vascular surgery	I83.9	Varicose veins of the lower limbs are the elongation and enlargement of veins, leading to a twisted path. Under the agreement, we will only cover the treatment of varicose veins of the lower limbs without ulcers or inflammation, which includes surgical treatment or procedural interventions carried out on a scheduled basis. Additionally, it does not cover spider veins, also known as telangiectasia and reticular varicose veins.
Ophthalmology	H26.0 H26.1 H26.2 H26.3 H26.4 H26.8 H26.9	Cataract is the clouding of the lens, causing a deterioration in visual acuity. Under the agreement, we will only cover the treatment of childhood, juvenile, presbyopic, traumatic, complicating, drug-induced cataracts, as well as post-cataract conditions and other specified and unspecified forms of cataracts, which includes surgical treatment or procedural intervention carried out on a scheduled basis.
Ophthalmology	H40.1 H40.2 H40.3 H40.4 H40.5 H40.6 H40.8 H40.9	Glaucoma is a progressive damage to the optic nerve due to high intraocular pressure, which leads to loss of peripheral vision or blindness. Under the agreement, we will only cover the treatment of primary glaucoma with open and closed drainage angles, secondary glaucoma, as well as other and unspecified forms of glaucoma, which includes surgical treatment or procedural intervention carried out on a scheduled basis.
Ophthalmology	H00.0	Stye is a bacterial (staphylococcal) infection of the hair follicle of the eyelash. Under the agreement, we will only cover the treatment of eyelid

		abscesses and eyelid boils, which includes procedural intervention carried out on a scheduled basis.
Ophthalmology	H00.1	Chalazion is a sterile inflammation of the eyelid margin. Under the agreement, we will only cover the treatment of chalazion, which includes procedural intervention carried out on a scheduled basis.
Laryngology	J35.0 J35.1 J35.2 J35.3	Tonsil hypertrophy is the chronic enlargement of the tonsils. Under the agreement, we will only cover the treatment of hypertrophy of the palatine and pharyngeal tonsils, chronic tonsillitis, and other chronic tonsil diseases, which includes surgical treatment or procedural intervention carried out on a scheduled basis.
Laryngology	J34.2	Deviated septum is a distortion within the rigid bony framework of the nasal septum. Under the agreement, we will only cover the treatment of the deviation, which includes surgical treatment or procedural intervention carried out on a scheduled basis.
Laryngology	J34.3	Nasal turbinate hypertrophy is a condition in which there is chronic enlargement of the nasal turbinates. Under the agreement, we will only cover the treatment of turbinate hypertrophy, which includes surgical treatment or procedural intervention carried out on a scheduled basis.
Laryngology	J32.0 J32.1 J32.2 J32.3 J32.4 J32.8 J32.9	Chronic sinusitis is an inflammatory condition of the sinuses lasting more than 12 weeks with mild symptoms such as: nasal obstruction/blockage/congestion, nasal discharge, facial pain/pressure, and weakened or loss of smell. Under the agreement, we will only cover the treatment of chronic inflammation of the maxillary, frontal, sphenoid sinuses, ethmoidal cells or other and unspecified sinuses, which includes surgical treatment or procedural intervention carried out on a scheduled basis.
Laryngology	J33.0 J33.1 J33.8 J33.9	Nasal and sinus polyps are benign growths of the mucous membrane of the nasal passages and paranasal sinuses, in the shape of protrusions. Under the agreement, we will only cover the treatment of nasal polyps, sinus polyps and undefined nasal polyps, which includes surgical treatment or procedural intervention carried out on a scheduled basis.
Urology	I86.1	Varicocele is the dilation of the venous vessels at the upper pole of the testicle. Under the agreement, we will only cover the treatment of varicocele, which includes surgical treatment or procedural intervention carried out on a scheduled basis.
Urology	N20.0 N20.1 N20.2	Kidney and ureter stones are the presence of deposits that formed as a result of the precipitation of chemical substances contained in urine. Under the agreement, we will only cover the treatment of kidney and ureter stones, which includes surgical treatment or procedural intervention carried out on a scheduled basis.
Urology	N21.0 N21.1	Bladder stones and urethral stones are the presence of deposits that have formed as a result of the precipitation of chemical substances contained in urine. Under the agreement, we will only cover the treatment of bladder stones and urethral stones, which includes surgical treatment or procedural intervention carried out on a scheduled or expedited basis.

Urology	N28.1	Kidney cysts are spaces within the renal parenchyma filled with fluid, formed as a result of the dilation of renal tubules, resembling vesicles in appearance. Under the agreement, we will only cover the treatment of cysts, which includes surgical treatment or procedural intervention carried out on a scheduled basis.
Urology	N28.8	Ureteral orifice cysts are dilatations of the ureter segment in the form of an expansion just above the narrowing of the ureter at the orifice leading to the bladder. Under the agreement, we will only cover the treatment of cysts, which includes surgical treatment or procedural intervention carried out on a scheduled basis.
Urology	N35.0 N35.1 N35.8 N35.9	Urethral stricture is a condition in which the lumen of the urethra becomes narrowed due to pathological conditions or injuries. Under the agreement, we will only cover the treatment of post-traumatic, non-inflammatory, other and unspecified strictures, which includes surgical treatment or procedural intervention carried out on a scheduled basis.
Urology	N40.1 N40.3 N40.6	Benign prostatic hyperplasia is the enlargement of the prostate gland of a benign nature. Under the agreement, we will only cover the treatment of hyperplasia, enlargement, or growth of the prostate gland, which includes surgical treatment or procedural intervention carried out on a scheduled basis.
Gynaecology	N84.0 N84.1 N84.2 N84.3 N84.8 N84.9	Uterine polyps are benign growths of the mucous membrane of the female reproductive organs, protruding above its surface. Under the agreement, we will only cover the treatment of polyps in the body of the uterus, cervix, vagina, vulva and other parts of the female reproductive organs, which includes surgical treatment or procedural intervention carried out on a scheduled basis.
Gynaecology	N81.1 N81.2 N81.3	Prolapse of the female reproductive organs is a change in the position of the pelvic organs, where they move below their normal location, resulting in the prolapse of the vagina, cervix, or uterus. Under the agreement, we will only cover the treatment of uterine prolapse, vaginal prolapse, both partial and complete, as well as bladder descent, which includes surgical treatment carried out on a scheduled basis.
Gynaecology	D25.0 D25.1 D25.2 D25.9	Fibroids are benign tumors of the uterus originating from smooth muscle tissue that forms the uterine muscle. Under the agreement, we will only cover the treatment of submucosal, intramural, serous and unspecified fibroids, which includes surgical treatment or procedural intervention carried out on a scheduled basis.
Gynaecology	N75.0 N75.1	Bartholin's gland cyst or abscess is a condition that arises as a result of inflammation of the gland caused by bacteria. Under the agreement, we will only cover the treatment of cysts and abscesses of the Bartholin's gland, which includes surgical treatment or procedural intervention carried out on a scheduled basis.

Gynaecology	N80.0 N80.1 N80.2 N80.3 N80.4 N80.5 N80.6 N80.8 N80.9	Endometriosis (Adenomyosis) is the abnormal presence of cells from the uterine lining (endometrium) outside the proper structure of the uterus. Under the agreement, we will only cover the treatment of endometriosis of the uterus, ovaries, fallopian tubes, lesser pelvis, rectovaginal septum, vagina, intestines, skin scars, other locations and unspecified sites, which includes surgical treatment or procedural intervention carried out on a scheduled basis.
Gynaecology	N82.0 N82.1 N82.2 N82.3 N82.4 N82.5 N82.8 N82.9	Fistulas of the female reproductive organs are abnormal connections between the reproductive organ and another organ, which have occurred as a result of pathological processes, including injuries. Under the agreement, we will only cover the treatment of fistulas such as vesicovaginal, between the vagina and the small intestine, between the vagina and the large intestine, between the female reproductive system and the skin, as well as other fistulas between the female reproductive system and the urinary system or intestines, which includes surgical treatment or procedural intervention carried out on a scheduled basis.
Gynaecology	N83.0 N83.1 N83.2 N83.6 N83.8	Ovarian cyst or fallopian tube cyst is the presence of an abnormal space with fluid content within the ovary or fallopian tube, surrounded by a wall. Under the agreement, we will only cover the treatment of follicular ovarian cysts, corpus luteum cysts, other and unspecified ovarian cysts, as well as fallopian tube haematomas, as well as other and unspecified fallopian tube cysts, which includes surgical treatment or procedural intervention carried out on a scheduled basis.
Gynaecology	N39.3 N39.4	Urinary incontinence is the uncontrollable, involuntary passing of urine from the bladder, independent of the individual's will or conscious decision. Under the agreement, we will only cover the treatment of stress urinary incontinence and other specified types of urinary incontinence, which includes surgical treatment or procedural intervention carried out on a scheduled basis.
Invasive cardiology	I25.0	Chronic ischemic heart disease (coronary artery disease) , as defined in the context of the agreement, refers to chronic conditions of insufficient blood supply to the heart muscle caused by the narrowing of the coronary arteries. Under the agreement, we will only cover the treatment of myocardial ischemia, which includes procedural treatments (angioplasty, coronary angiography) carried out on a scheduled basis.
Invasive cardiology	I47.1 I47.2	Paroxysmal tachycardia refers to any abnormal heart rhythm with a frequency greater than 100 beats per minute that is not sustained. Under the agreement, we will only cover the treatment of paroxysmal supraventricular and ventricular tachycardia, including procedural treatment (ablation) carried out on a scheduled basis.

Invasive cardiology	I48.0 I48.1 I48.3	Atrial fibrillation is the uncoordinated excitation of the heart's atria, leading to rapid, irregular heartbeats, often causing the sensation of palpitations in the chest. Under the agreement, we will only cover the treatment of paroxysmal, persistent, permanent, typical, atypical, and unspecified atrial fibrillation, including procedural treatment (ablation) carried out on a scheduled basis.
Neurosurgery	M51.1 M51.2 M51.3 M51.4 M51.8	Disc herniation is a degenerative change occurring within the intervertebral disc with protrusion of the nucleus pulposus. Under the agreement, we will only cover the treatment of thoracic intervertebral discs, lumbosacral discs, as well as thermolesion of the spinal nerves in the lumbar region, without any interference with the central nervous system, carried out on a scheduled basis.
Neurosurgery	M47.8	Degenerative changes of the spine refer to the wear and distortion of vertebrae and intervertebral joints. Under the agreement, we will only cover the treatment of cervical, thoracic, and lumbosacral intervertebral discs without any interference with the central nervous system, carried out on a scheduled basis.
Neurosurgery	M50.2 M50.3 M50.8	Disc herniation is a degenerative change occurring within the intervertebral disc with protrusion of the nucleus pulposus. Under the agreement, we will only cover the treatment of cervical intervertebral discs without any interference with the central nervous system, carried out on a scheduled basis.
Neurosurgery	M48.0	Narrow spinal canal syndrome is a set of neurological symptoms resulting from damage to the nerve root fibres running in the spinal canal, forming the cauda equina due to discopathy. Under the agreement, we will only cover the treatment of the lumbar-sacral intervertebral discs, without any interference with the central nervous system, carried out on a scheduled basis.
Neurosurgery	M54.3	Sciatica is a pain syndrome that most often originates from the lower part of the spine, caused by pressure exerted on the sciatic nerve or the spinal nerves that form it. Under the agreement, we will only cover the treatment of lumbosacral intervertebral discs, including thermocoagulation of the spinal nerves in the lumbar region, without any interference with the central nervous system, carried out on a scheduled basis.

Module: LUX MED Hospital Insurance - Full Care

§1 Hospitalisation

We provide Urgent Hospitalisation and Scheduled Hospitalisation in the following medical areas:

1. Diagnostics and treatment at the non-invasive treatment department

- a. includes a stay and comprehensive diagnostics and treatment of diseases in the following wards: internal medicine, cardiology, pulmonology, allergology, neurology, diabetology, gastroenterology, dermatology, rheumatology, endocrinology, infectious diseases and nephrology;
- b. it does not include:
 - I. drug programmes indicated in the Notice of the Minister of Health as a guaranteed service which takes place using innovative, costly active substances which are not financed within the scope of other guaranteed services;
 - II. removal of pigmented moles, skin warts, fibromas, lipomas, sebaceous cysts and xanthelasma;
 - III. hospitalisation with the aim of planned use of pharmacology therapy of chronic diseases;
 - IV. diagnostics and treatment of the consequences of strokes;
 - V. chronic renal replacement therapy, performed outside the period of necessary Hospitalisation within the scope of the Agreement.

2. Orthopaedics

- a. includes orthopaedic procedures, including endoprosthesis and orthopaedic fixation materials;
- b. it does not include:

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- I. limb lengthening;
 - II. osseointegration treatments;
 - III. spinal procedures.
3. **General surgery**
- a. includes general surgery procedures;
 - b. it does not include:
 - I. surgical obesity treatment;
 - II. thoracic surgery (i.e. thoracosurgery).
 - III. removal of pigmented moles, skin warts, fibromas, lipomas, sebaceous cysts and xanthelasma;
4. **Vascular surgery**
- a. includes surgery on veins and peripheral arteries;
 - b. it does not include:
 - I. surgery performed in the extracorporeal circulation;
 - II. surgery of aneurysms and vascular malformations;
 - III. procedures for embolisation of pathological lesions;
 - IV. procedures on intracranial vessels.
5. **Gynaecology**
- a. includes gynaecology procedures;
 - b. it does not include the diagnosis and treatment of impaired female fertility and assisted reproduction;
 - c. removal of pigmented moles, skin warts, fibromas, lipomas, sebaceous cysts.
6. **Laryngology**
- a. includes ENT procedures;
 - b. it does not include:
 - I. implant insertion for hearing organs and other implants replacing the functions of the senses;
 - II. procedures requiring neurosurgery;
 - III. treatment of the consequences of facial-cranial injuries, in particular craniofacial reconstruction.
7. **Urology**
- a. includes urology procedures, including robotic surgery of the prostate gland;
 - b. it does not include:
 - I. procedures for kidney collection or implantation, chronic renal replacement therapy, performed outside the period of necessary Hospitalisation within the scope of the Agreement;
 - II. urological procedures associated with correction of the size or shape of the genital organs;
 - III. treatment of erectile dysfunction;
 - IV. artificial urinary tract sphincter implantation;
 - V. treatment of male fertility disorders, e.g. vasectomy reversal.
8. **Ophthalmology**
- a. includes ophthalmologic procedures;
 - b. it does not include:
 - I. surgical correction of defects of vision (e.g. laser correction of impaired vision or the implantation of intraocular phakic lenses), with the exception of corrective lenses implantation during simultaneous cataract surgery;
 - II. corneal transplant procedures;
 - III. surgical treatment of conical cornea;
 - IV. eye prosthetic procedures;
 - V. removal of pigmented moles, skin warts, fibromas, lipomas, sebaceous cysts and xanthelasma.
9. **Spinal neurosurgery**
- a. includes neurosurgery procedures of intervertebral discs and thermolesion;
 - b. it does not include:
 - I. treatment of secondary and primary scoliosis;
 - II. surgical procedures involving three and more intervertebral discs;
 - III. neurosurgical procedures involving the brain and skull;
 - IV. procedures involving the spinal cord and nerve roots.
10. **Oncological surgery**
- a. includes:
 - I. surgery of neoplastic lesions, including: plastic breast reconstruction after mastectomy;
 - II. preventive procedures resulting from oncological indications, covering oophorectomy and mastectomy with breast reconstruction;
 - III. advanced methods of treatment of prostate tumours, including robotic surgery of prostate tumours.
 - b. it does not include:
 - I. extensive surgical procedures of head and neck tumours, in particular laryngeal cancer;
 - II. systemic therapies (chemotherapy, immunotherapy, CAR-T and others) and oncology radiation therapy, as isolated treatment or as an element of combination treatment;
 - III. treatment of neoplastic lesions of the brain, lungs, haematological neoplasms;
 - IV. breast reconstruction, in cases of medical contraindications to such a procedure.

We only provide Scheduled Hospitalisation for the following medical area:

11 Invasive cardiology

- a. includes planned invasive cardiology procedures, including stays in the intensive care ward which are necessary in the post-surgery period (Anaesthesiology and Intensive Care Ward, Intensive Cardiology Supervision Ward);
- b. it does not include:
 - I. treatment of acute coronary syndromes, according to the current criteria of the diagnosis of the European Society of Cardiology;
 - II. cardiac surgery;
 - III. implantation of artificial cardiac pacemakers, heart valves, implantable cardioverter-defibrillator (ICDs) and devices with an analogous or similar function.

§2 Emergency Care

1. Consultation of the Emergency Care Physician is possible provided that the Hospital Coordinator confirms that consultation is necessary and appropriate from the medical point of view.
2. Emergency Care includes, depending on the medical indications and the extent of services available at a given location:
 - a. interventions by emergency medical service;
 - b. providing necessary medical assistance at the place of residence of the Insured;
 - c. providing necessary medical assistance at the Outpatient Clinic or Hospital designated by us;
 - d. giving recommendations on further conservative management;
 - e. transport to hospital;
 - f. organisation of up to 3 medical visits as a continuation of the treatment process within 30 days of the first visit within the framework of Emergency Care and directly related to the services provided during it.

The scope of services available as part of Emergency Care at a given location is indicated on www.opiekaszpitalna.luxmed.pl.

3. Emergency Care does not replace the assistance provided under the National Medical Emergency System. The Operator is entitled to refer the Insured Person to the facility of a higher level of perinatal care if the health status and medical safety require it. This does not constitute an improper performance of the Agreement.
4. Our responsibility in the field of Emergency Care does not cover health situations, in which any delay in providing medical assistance, available in the nearest medical facility, poses immediate threat to the life of the Insured. In particular, this includes loss of consciousness, anaphylactic shock, choking; status epilepticus; acute and severe allergic reactions resulting from biting or stinging by venomous animals; poisoning by medicines, chemicals or gases; electrocution; drowning; attempted suicide; a fall from high altitude; an extensive injury resulting from trauma, including traumatic amputations of the limbs or parts of the limbs; multiple traumas; sudden visual or hearing disorders; face-cranial injuries.
5. Item 4 shall not release the Operator from providing a healthcare service to a person who needs immediate provision of a service due to a threat to life or health arising from Article 15 of the Act on Medical Activity of 15 April 2011 (Journal of Laws No 112, item 654), i.e. dated March 16, 2021 (Journal of Laws of 2021, item 711, as amended).

§3 Psychological consultations

For Insured persons with diagnosed malignant tumour, using Hospitalisation Service in the area of Oncological surgery, we offer psychological consultations. Consultations may be conducted onsite or remotely. We offer up to 5 consultations in 12 months. The date of cancer diagnosis is the date of histopathological examination.

§4 Obstetrics-neonatology services

1. Obstetrics-neonatology services include:
 - a. assisting in natural labour or delivery by caesarean section;
 - b. individual care of a midwife during childbirth;
 - c. participation in antenatal classes;
 - d. neonatology care of the neonate.
2. Our responsibility in the field of obstetrics-neonatology services does not include:
 - a. Pregnancy care;
 - b. Hospitalisation resulting from pathological course of pregnancy (both pathologies of the mother and the foetus), if the pregnancy requires care or delivery in a level III perinatal care centre;
 - c. deliveries in cases which the medical safety considerations, in particular closeness for sudden deliveries, require the use of another Hospital than the ones listed on the list of locations referred to in §3(8) of the GTC;
 - d. performance of foetal genetic tests, amniocentesis and cordocentesis;
 - e. neonatology care of the neonate requiring intensive care at a level III perinatal care centre.

SECTION II: ADDITIONAL HOSPITAL BENEFITS AVAILABLE IN ALL OPTIONS

§1 Medical care prior to Hospitalisation

- The services in the field of imaging diagnostics, laboratory tests and specialist consultations necessary for the preparation for Hospitalisation are covered by the scope. The scope of all examinations and consultations shall be specified during preparation of the Insured for Hospitalisation, upon acceptance of the application for the provision of the Service. We do not provide examinations and consultations for medical care prior to Hospitalisation, ordered by another medical facility than the one indicated by us. Medical care prior to Hospitalisation is essential for:
 - determining the necessity of Planned Hospitalisation, its type, methods and scope of the procedure;
 - qualifying of the Insured for Hospitalisation;
 - determining the date of a surgery or procedure;
 - developing a treatment plan.
- Medical care prior to Hospitalisation is not the same as:
 - making a diagnosis;
 - monitoring of treatment;
 - general medical advice;
 - issuing a second medical opinion.
- The scope does not include:
 - pregnancy care;
 - outpatient treatment, including procedures and tests, unless the doctor decides during qualification that hospitalization is necessary.

§2 Medical care after Hospitalisation

- Care after Hospitalisation includes 8 follow-up visits in the medical facility indicated by us. They are conducted to monitor the effects of the procedure and the recovery process up to 60 days after discharge from the Hospital or until the end of the rehabilitation period specified in §3 below.
- We also provide care in cases of sudden deterioration of health status of the Insured after the provided Service. In such cases, the scope of care is tailored to the medical situation and needs, and aims to improve or restore the proper health condition of the Insured Person. The scope of the Service is specified by the Physician indicated by us.
- Medical care after Hospitalisation is provided only in relation to the Service provided under the Insurance Agreement.

§3 Rehabilitation

- Rehabilitation after Hospitalisation includes:
 - necessary procedures in the field of physical therapy and kinesitherapy in accordance with the recommendations of medical or physiotherapeutic personnel after orthopaedic procedures for up to 12 weeks from the date of the procedure;
 - necessary procedures in the field of physical therapy and physiotherapy according to the recommendations of medical or physiotherapeutic personnel after neurosurgery for up to 12 weeks from the date of the procedure;
 - necessary lymphatic drainage procedures following surgical procedures (e.g. mastectomy) as recommended by medical or physiotherapeutic personnel for up to 12 weeks after the procedure;
 - Imaging tests necessary to monitor the progress of rehabilitation;
 - A medical visit summarizing the rehabilitation period.
- We shall specify the detailed scope of rehabilitation before the end of Hospitalisation. We do not provide rehabilitation services ordered by a medical facility other than that indicated by us.
- Our responsibility in the scope of rehabilitation does not include:
 - rehabilitation procedures resulting from indications other than the consequences of the surgical procedure performed as part of insurance coverage;
 - fracture treatment with bone adhesion stimulators using physical effects (e.g. ultrasound wave);
 - rehabilitation ordered during qualification but necessary to be performed before the procedure.
- Rehabilitation is provided only in relation to the Service provided under the Insurance Agreement.

SECTION III: HOSPITAL HEALTH CHECK

(available in the Orthopaedic Care Plus and Full Care options)

- Hospital Health Check is conducted at the Hospital indicated by us, within one day, within a period agreed with the Insured. Extending the duration of a Hospital Health Check beyond one day may take place in medically justified cases, such as the need to repeat the examination in hospital conditions.
- Depending on official guidelines, including the internal guidelines of the hospital related to the epidemic situation, the performance of a Hospital Health Check may be conditioned upon the receipt of a negative result of the recommended SARS-CoV-2 (the virus causing COVID-19) test, which is valid on the day of the Check. The test is financed and made available by us before the scheduled Check.

3. The specific scope of services depends on the gender and age of the Insured:

Hospital Health Check for a woman up to 40 years of age

- | | |
|--|--|
| <ul style="list-style-type: none"> Blood pressure measurement Height and body weight measurement Urine – general analysis Blood count + platelet count + automated smear Laboratory tests: OB /ESR, ALT transaminase, GGGTP, creatinine, TSH, FT4, HCV AB antibodies, HBS antigen, urea acid, lipidogram, D-dimers, fasting glucose, Vitamin D3 metabolite 25 (OH), Sod, Potas, blood Group, Ferritin | <ul style="list-style-type: none"> Resting ECG Chest X-ray Ultrasound of the heart, abdominal cavity, breast, thyroid, gynaecological Cytology of uterine cervix Consultation with an internist and gynaecologist |
|--|--|

Health status report and recommendations

Hospital Health Check for a woman aged 40 years or older

- | | |
|---|---|
| <ul style="list-style-type: none"> Having your blood pressure taken Height and body weight measurement Urine – general analysis Blood count + platelet count + automated smear Laboratory tests: OB /ESR, ALT transaminase, GGGTP, creatinine, TSH, FT4, HCV AB antibodies, HBS antigen, urea acid, lipidogram, Homocysteine, D-dimers, fasting glucose, HbA1c, insulin/insulin, Vitamin D3 metabolite 25 (OH), Vitamin B12, Calcium, Phosphorus, Sodium, Potassium blood Group, FSH, Testosterone, Ferritin | <ul style="list-style-type: none"> Resting ECG Chest X-ray Ultrasound of the heart, abdominal cavity, breast, thyroid, gynaecological Mammography Standard pap smear Consultation with an internist, gynaecologist and cardiologist |
|---|---|

Health status report and recommendations

Hospital Health Review for a man up to 40 years of age

- | | |
|--|--|
| <ul style="list-style-type: none"> Having your blood pressure taken Height and body weight measurement Urine – general analysis Blood count + platelet count + automated smear; Laboratory tests: OB /ESR, ALT transaminase, GGGTP, creatinine, TSH, FT4, HCV AB antibodies, HBS antigen, urea acid, lipidogram, D-dimers, fasting glucose, Vitamin D3 metabolite 25 (OH), Sodium, Potassium, blood Group, Testosterone | <ul style="list-style-type: none"> PSA panel (PSA, FPSA, FPSA/PSA ratio) Resting ECG Chest X-ray Ultrasound of the heart, abdominal cavity, thyroid, testicles, prostate Consultation with an internist and urologist |
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Health status report and recommendations

Hospital Health Check for a man aged 40 years or older

- | | |
|--|--|
| <ul style="list-style-type: none"> Having your blood pressure taken, Height and body weight measurement, Urine – general analysis Blood count + platelet count + automated smear; Laboratory tests: OB /ESR, ALT transaminase, GGGTP, creatinine, TSH, FT4, HCV AB antibodies, HBS antigen, urea acid, lipidogram, Homocysteine, D-Dimers, fasting glucose, HbA1c, insulin/insulin, Vitamin D3 metabolite 25 (OH), Vitamin B12, Calcium, Phosphorus, Sodium, Potassium, blood Group, Testosterone | <ul style="list-style-type: none"> PSA panel (PSA, FPSA, FPSA/PSA ratio) Resting ECG Chest X-ray Ultrasound of the heart, abdominal cavity, thyroid, testicles, prostate Consultation with an internist, urologist and cardiologist |
|--|--|

Health status report and recommendations

- We will not conduct a Hospital Health Check if the Insured has an identified infection, suspected infection or any other health disturbance that may impair the results of the Service.
- In the case of medical indications, at the request of the doctor conducting the hospital health review, we may extend the scope of services provided during the review by additional tests, the total cost of which shall not exceed the gross amount of PLN 1,000.
- In the event of failure to appear for a hospital health check-up on the date agreed by the Insured with the Coordinator, we have the right to refuse the claim.

7. We may deviate or limit the scope of the Hospital Health Check in cases of medical contraindications to certain examinations.

SECTION IV: HOSPITAL CARE COORDINATION

1. Immediately after the beginning of the Insurance Coverage Period, we will provide the Insured with contact details for the Hospital Care Coordinating Team. The details will be provided by email, text message or letter, depending on which contact information we have received.
2. The Insured uses the Hospital Care Coordination according to that person's needs. The person may benefit from a part or the entire scope offered.
3. The scope of services offered as part of the Hospital Care Coordination includes:
 - a. accepting an application for the performance of the Service from the Insured and current contact with the Insured during verification of the application, as well as during the term of the Agreement.
 - b. coordination of care over the Insured in the case of Emergency Care:
 - I. verification of Services entitlements;
 - II. providing guidance to the Insured on further proceedings;
 - III. contact with the Hospital Admission Ward or Outpatient Clinic;
 - IV. help in admission to the Hospital or Outpatient Clinic and assistance in the ongoing organisation of the necessary examinations and consultations as recommended by the Physician;
 - V. assistance in collecting medical records of the Insured;
 - VI. contact with a person authorised to receive medical information about the Insured.
 - c. coordination of care over the Insured before Hospitalisation:
 - I. verification of entitlements to the Service, including obtaining the decision of the Insurer in connection with the application submitted;
 - II. presenting a proposal for Hospitalisation – presenting a selection of available Hospitals and Physicians, as well as a midwife, in the case of an Insured person planning for childbirth;
 - III. arranging a stay and as decided by the Insured;
 - IV. assistance in scheduling examinations and consultations eligible for Hospitalisation;
 - V. monitoring of the performance of examinations and consultations by the Insured;
 - VI. reminding the Insured about the date of admission to the Hospital and the required documents as well as confirmation of the presence of the Insured at the Hospital;
 - VII. coordination of the flow of medical documents between the Insured and the Hospital;
 - VIII. providing information on Hospital stay.
 - d. coordination during the Hospital Service:
 - I. transfer of all documents necessary for the Service of the Insured;
 - II. current contact with the Hospital;
 - III. providing information on the current status of the performance of medical procedures to a person authorised to receive medical information about the Insured;
 - IV. arranging a follow-up visit after Hospital stay and presenting a post-service care plan;
 - V. organisation of medical transport, if it is due to medical indications confirmed by us, including road transport:
 - i. interhospital transport, in cases when we order medical transport to another unit as part of continuation of the treatment covered by the scope of insurance, as well as to another nearby Hospital as part of continuation of the treatment, when further diagnostics and treatment are beyond our scope of responsibility;
 - ii. transport from the Hospital to the place of stay of the Insured.
 - e. coordination of care after Hospitalisation, in accordance with the Physician's recommendations:
 - I. arranging for examinations and rehabilitation for the Insured;
 - II. organization of medical transport, if it results from medical indications confirmed by us, which includes road transport:
 - i. from the Insured's place of residence to the Hospital;
 - ii. from the Hospital to the place of stay of the Insured.
 - III. completion of the medical documentation of the Insured.
 - f. coordination of the Hospital Health Check:
 - I. verification of Services entitlements;
 - II. presenting a proposal from the Hospital and Physician conducting the Hospital Health Check;
 - III. arranging the Hospital Health Check at the discretion of the Insured;
 - IV. reminding the Insured of the date of the Service, the required documents and confirmation of attendance at the Hospital;
 - V. monitoring of the performance of the Hospital Health Check;
 - VI. coordination of the flow of medical documents between the Insured and the Hospital;
 - VII. providing general information on the performance of the Hospital Health Check.