

APPENDIX NO. 1: to the General Terms and Conditions of PROMED Individual Health Insurance

BASIC OPTION DETAILED LIST OF SERVICES

OUTPATIENT SERVICES

MEDICAL HELPLINE, 24/7

Medical Helpline 24/7 is provided to the Insured in cases requiring the Insured to obtain immediate consultation by a Physician or medical specialist.

The health benefit consists in the possibility for an Insured to obtain telephone advice from medical personnel (doctors, nurses) regarding:

- internal medicine
- family medicine
- paediatrics
- nursing

through 24/7 nationwide medical helpline of the Operator.

In medically justified situations, medical personnel providing advice to an Insured **may** refer them to an on-site visit; recommend that an emergency medical team be called to them; refer them to a Hospital Emergency Department on an urgent basis.

The following documents **cannot be issued** through Medical Helpline 24/7:

- ✓ **e-prescriptions** for: vaccines; narcotics drugs, drugs with strong sedative, analgesic, anti-anxiety effects (which require on-site consultation for medical indications); preparations with addictive potential; post-coital contraception (so-called emergency contraception);
- ✓ **e-referrals** for: diagnostic tests and examinations including: procedures using ionizing radiation; biopsies; endoscopic tests; exercise tests.

The final decision to issue an e-prescription/e-referral/e-sick leave during a Medical Helpline consultation is at the discretion of the Physician who may refuse to issue such a document, based on medical indications and the Insured welfare.

Medical Helpline 24/7 is available only to an Insured. Use of the Health Benefit by third parties is not permitted. The Insured is obliged to provide data in accordance with the facts, in accordance with the principles of reliability and due diligence required for the use of health services.

Medical Helpline 24/7 is used to provide an Insured with remote medical consultations in situations that do not require intervention in a life or health emergency. Due to its remote nature, this service is not a substitute for an on-site consultation, as it does not allow for a physical examination.

ONLINE CONSULTATIONS

The health service "Online Consultations" allows an Insured to make an interactive one-on-one conversation with a Physician, midwife or nurse via ICT systems or communication systems provided by Operator. The consultations are provided in the fields of:

- internal / family medicine
- paediatrics
- paediatric nursing
- obstetrics

Consultations within the service may be used by Insured with full access to the Patient Portal (an online portal provided by the Operator). Accessibility of "Online consultations" with a Physician, a midwife or a nurse depends on the schedule of medical specialists and can be accessed under the "Online Consultation" tab in the Patient

Portal. An Insured may choose a communication channel from among those provided by Insurer in the Patient Portal. The service is accessed by “queuing” the Insured under the “Online Consultation” tab. The content of an “Online Consultation” is saved and entered into the Insured’s medical records.

An online consultation **does not replace** an in-person consultation because there are no direct examinations. In medically justified cases, the medical specialist may refuse remote advice and refer the Insured for an in-patient consultation.

Online consultation is available only to Insureds. Use of the service by third parties is not permitted. The Insured is obliged to provide data in accordance with the facts, in accordance with the principles of reliability and due diligence required for the use of health services.

As part of an online consultation a medical specialist **can**:

- ✓ issue an e-prescription (for continuation of chronic treatment or de novo treatment – according to documentation and medical indications);
- ✓ issue medical recommendations resulting from an online consultation, a medical certificate in case of medical indications;
- ✓ issue a referral: for tests and examinations, to another specialist, for another online consultation or for an in-patient service.

As part of an online consultation a medical specialist **cannot issue**:

- ✓ e-sick leaves;
- ✓ referrals for medical examinations with the use of ionising radiation;
- ✓ referrals for biopsy, endoscopy and exercise tests;
- ✓ e-prescriptions for: vaccines; narcotics drugs, drugs with strong sedative, analgesic, anti-anxiety effects (which require on-site consultation for medical indications); postcoital contraception (emergency contraception).

If medically justified, a medical specialist providing an online consultation **may refuse** to give remote medical advice and refer the Insured for an in-person consultation with a physician, midwife or nurse.

The final decision to issue an e-prescription during an online consultation is at the discretion of the Physician who may refuse to issue such a document, based on medical indications and the Insured welfare.

PHYSICIAN CONSULTATIONS – BASIC OPTION

The health service “Physician Consultations – basic option” allows an Insured to receive a consultation with a Physician **without the need for a referral**. These consultations are carried out in case of: health complaints, sudden illnesses and for general medical advice.

Consultations can be provided:

- ✓ on-site – in Clinics indicated by Insurer;
- ✓ remotely – in the form of telephone, online or video consultations;
- ✓ in Infection Treatment Centres – in the form of on-site visits for the Insured with symptoms of infections, provided in selected Clinics indicated by Insurer.

The form in which consultations are carried out is determined by Insurer – up-to-date information in this regard may be obtained by the Insured at the Patient Portal (an online portal provided by the Operator) or via the Operator’s Helpline.

The scope of the Health Benefit depends on the form of its implementation and **may include**: taking a medical history, providing advice by a Physician and performing basic activities necessary to make a diagnosis, make a therapeutic decision or monitor the treatment process.

A healthcare service relates to a consultation in the field of:

- internal medicine
- paediatrics
- family medicine.

The health service “Physician Consultations – basic option” does not include: consultations provided by Doctors on duty, Doctors holding a postdoctoral degree, a professor title, or Doctors holding the positions of: associate professor or full professor.

PHYSICIAN AND MEDICAL SPECIALIST CONSULTATIONS – OPTION 1

The health service “Physician and medical specialist consultations – option 1” allows an Insured to receive a consultation with a Physician or a medical specialist **without the need for a referral**. These consultations are carried out in case of health complaints, sudden illnesses and for general medical advice.

Consultations can be provided:

- ✓ on-site – in Clinics indicated by Insurer;
- ✓ remotely – in the form of telephone, online or video consultations;
- ✓ in Infection Treatment Centres – in the form of on-site visits for Insured with symptoms of infections, provided in selected Clinics indicated by Insurer.

The form in which consultations are carried out is determined by Insurer – up-to-date information in this regard may be obtained by the Insured at the Patient Portal (an online portal provided by the Operator) or via the Operator’s Helpline.

The scope of the Health Benefit depends on the form of its implementation and **may include**: taking a medical history, providing advice by a Physician or a medical specialist and performing basic activities necessary to make a diagnosis, make a therapeutic decision or monitor the treatment process.

The scope of consultation depends on the age of the Insured:

Insured **over 18 years of age** may use consultations in the following fields:

- general surgery
- gynaecology
- laryngology
- neurology
- ophthalmology
- optometry
- urology

Insured **under 18 years of age** may use physician consultations in the following fields:

- paediatric surgery
- gynaecology (from the age of 16)
- laryngology
- neurology
- ophthalmology

The service “Physician and medical specialist consultations – option 1” does not include: consultations provided by Doctors on duty, Doctors holding a postdoctoral degree, a professor title, or Doctors holding the positions of: associate professor or full professor.

NURSING PROCEDURES

The health service “Nursing procedures” is provided at Clinics designated by Insurer and consists in basic measurements and minor procedures, including diagnostic procedures, in accordance with the professional competence of the nurse or midwife.

The scope of available nursing procedures depends on:

- ✓ the range of consultations with Physicians, which the Insured may use under the concluded agreement;
- ✓ the age of the Insured;
- ✓ the availability of the procedure at a given Clinic designated by the Insurer.

The health service “Nursing procedures” **includes**:

procedures performed **on a doctor’s**

recommendation:

- lacement/change/removal of a small dressing
- intravenous injection
- subcutaneous/intramuscular injection

- emergency drip administration
- blood drawing
- oral medicine administration in emergency

procedures performed **without a referral**:

- office-based midwife service – breast palpation

- body temperature measurement
- blood pressure measurement
- height and weight measurement

Standard medical materials and supplies used during the above-specified procedures such as: dressings, bandages, cannulae, syringes, swabs, adhesive strips, needles, serum — tetanus antitoxin and disinfectants **are provided by Operator free of charge.**

In the case of use of other materials or medical supplies not included above, an additional fee may be charged to the Insured – in accordance with the applicable price list of the respective Clinic designated by Insurer.

OUTPATIENT PROCEDURES – OPTION 1

The health service “Outpatient procedures – option 1” includes measurements and medical procedures performed by a Physician, nurse or another medical professional, according to their competence, as part of:

- ✓ a medical consultation, during which there is a need to perform a given procedure, or
- ✓ a separate treatment visit that does not require a medical consultation.

The procedures are performed at Clinics indicated by Insurer **with no need for a hospital stay or operating room standards.**

The scope of available procedures depends on:

- ✓ the scope of consultations with Physicians and medical specialists to which the Insured is entitled;
- ✓ the age of the Insured;
- ✓ their availability at a given Clinic.

If an outpatient procedure is marked below as “**standard***” it should be understood as a service that is generally available and commonly used in the territory of the Republic of Poland, in accordance with current medical knowledge and clinical practice accepted under the conditions of the health care system in Poland.

The health service “Outpatient procedures – option 1” **includes:**

Basic outpatient medical treatments:

- blood pressure measurement
- non-surgical tick removal
- height and weight measurement

Outpatient surgical procedures:

- stitching a wound of up to 3 cm
- removal of another foreign body without incision
- surgical tick removal
- suture removal after procedures performed out of the Clinics indicated by Insurer, qualification based on the Operator doctor’s assessment (we do not remove sutures after childbirth)
- suture removal in a treatment room after procedures performed in the Clinics indicated by Insurer
- placement/change/removal – small dressing (not requiring surgical debridement)

Outpatient laryngological procedures:

- Eustachian tube examination, insufflation;
- suture removal in a treatment room after laryngological procedures performed at the Clinics indicated by Insurer
- catheterisation of the Eustachian tube
- ear irrigation
- removal of a foreign body from the nose/ear
- suture removal after laryngological procedures performed outside of Clinics indicated by Insurer, qualification based on the Operator doctor’s assessment
- simple laryngological dressing
- coagulation of blood vessels of the nasal septum
- electrocoagulation of blood vessels of the nasal septum
- nasal administration of mucosa-shrinking medicine in emergency cases
- nasal tamponade removal

- unilateral dressing of nasal hemorrhage
- bilateral dressing of nasal hemorrhage

Outpatient ophthalmologic procedures:

- visual acuity examination
- corrective lens selection (excludes varifocal lenses)
- gonioscopy (iridocorneal angle assessment)
- lacrimal duct irrigation (for the Insured over 18 years of age)
- application/change/removal of a drain in the ear canal
- medicine instillation into the conjunctival sac
- standard* autorefractometry
- standard* ocular fundus examination
- standard* stereoscopic vision examination
- standard* intraocular pressure measurement
- removal of a foreign body from the eye

Outpatient gynaecological procedures:

- HPV HR test with possible LBC cytology (in the case of a positive HPV HR result)

Anaesthesia:

- local (infiltration or permeation) anaesthesia

Standard medical materials and supplies used during the above-specified procedures such as: dressings, bandages, cannulae, syringes, swabs, adhesive strips, needles, serum — tetanus antitoxin and disinfectants **are provided by Insurer free of charge.**

In the case of use of other materials or medical supplies not included above, **an additional fee may be charged** to the Insured – in accordance with the applicable price list of the respective Clinic.

LABORATORY TEST PANEL (NO REFERRAL NEEDED)

The health service “Laboratory testing panel (no referral needed)” allows an Insured to perform **once during each 12-month coverage period** the set of laboratory tests specified below.

The health service is performed **with no referral needed** at Clinics indicated by Insurer.

If a laboratory test is marked below as “**standard***” it should be understood as a service that is generally available and commonly used in the territory of the Republic of Poland, in accordance with current medical knowledge and clinical practice accepted under the conditions of the health care system in Poland.

The scope of laboratory tests depends on the age of the Insured and **includes:**

for Insured **over 18 years of age:**

- beta HCG
- fasting glucose
- lipid profile
- urinalysis
- blood count + platelet count + automated smear
- TSH
- HPV HR test with possible LBC cytology (in the case of a positive HPV HR result) – the frequency of the examination in accordance with current medical knowledge and the positions of experts (the Polish Society of Gynecologists and Obstetricians and the Polish Society of Colposcopy and Cervical Pathophysiology)

for Insured **under 18 years of age:**

- fasting glucose
- lipid profile
- urinalysis
- blood count + platelet count + automated smear
- HPV HR test with possible LBC cytology (in the case of a positive HPV HR result) – the frequency of the examination in accordance with current medical knowledge and the positions of experts (the Polish Society of Gynecologists and Obstetricians and the Polish Society of Colposcopy and Cervical Pathophysiology) - (available to Insured over the age of 16)
- CRP test strips

DIAGNOSTIC TESTS AND EXAMINATIONS – BASIC OPTION

The health service “Diagnostic tests and examinations – basic option” are performed:

- ✓ **on the basis of a referral** issued by the Physician, solely on the basis of medical indications in the course of the ongoing diagnostic and therapeutic procedure,
- ✓ in Clinics indicated by Insurer.

Unless otherwise indicated below, the health service “Diagnostic tests and examinations – basic option” **does not include:**

- ✓ laboratory diagnostics using strip tests;
- ✓ tests performed using molecular biology techniques;
- ✓ imaging diagnostics in the field of ultrasonography using techniques such as: Doppler, 3D, 4D or elastography.

If a test or an examination from the scope of “Diagnostic tests and examinations – basic option” is marked as **“standard*”** it should be understood as a service that is generally available and commonly used in the territory of the Republic of Poland, in accordance with current medical knowledge and clinical practice accepted under the conditions of the health care system in Poland.

The results of diagnostic tests are provided to the Insured **on a carrier in accordance with the standards in force** in a given Clinic.

The scope of the tests and examinations **includes only** procedures necessary to assess the health of the Insured in accordance with current medical knowledge and applicable standards of treatment and diagnosis:

Laboratory diagnostics:

Haematology and coagulation tests with taking test samples (blood):

- PTT
- INR / prothrombin time
- blood count + platelet count + automated smear
- ESR

Biochemical and hormonal tests, tumour marker tests with taking test samples (blood):

- total bilirubin
- chlorides (Cl)
- cholesterol
- glucose 60' after a meal
- glucose 120' after a meal
- fasting glucose
- glucose 75 g, 1-hour glucose challenge test
- glucose 75 g, 2-hour glucose challenge test
- glucose 75 g, 3-hour glucose challenge test
- glucose 75 g, 4-hour glucose challenge test
- glucose 75 g, 5-hour glucose challenge test
- creatinine
- urea / urea nitrogen / BUN
- potassium (K)
- total PSA
- sodium (Na)
- GOT / AST transaminase
- GPT / ALT transaminase
- TSH / hTSH
- iron (Fe)
- iron (Fe) 60 min after administration (absorption curve)
- iron (Fe) 120 min after administration (absorption curve)
- iron (Fe) 180 min after administration (absorption curve)
- iron (Fe) 240 min after administration (absorption curve)
- iron (Fe) 300 min after administration (absorption curve)

Serology tests and infection diagnostics with taking test samples (blood):

- basic syphilis serology (VDRL or USR or anti-TP)
- HBs antigen

Urine tests with taking test samples (urine):

- urinalysis

Bacteriological tests with taking swab:

- urine culture
- faeces — general culture

Faecal tests with taking test samples:

- faeces – general analysis

Cytology tests with taking test samples:

- hPV HR test with possible LBC cytology (in the case of a positive HPV HR result)

Quick strip tests with taking test samples (blood):

- cholesterol strip test
- glucose meter test
- troponin strip test

Diagnostic imaging:

X-ray examinations:

- cranial X-ray orbits
- cranial X-ray PA + lateral
- abdominal X-ray, erect
- chest X-ray
- chest X-ray + lateral
- chest X-ray, lateral with barite
- chest X-ray, PA + lateral with barium
- X-ray of sternum / chest lateral
- X-ray of sternum, AP
- X-ray of orbits + lateral (2 views)
- rib X-ray (unilateral), 2 oblique views

Ultrasound examinations:

- abdominal ultrasound

Other diagnostic tests and examinations:

- standard audiometry*
- resting ECG
- spirometry without medication

Technological advances can cause changes in the names and techniques of diagnostic tests:

- ✓ if the new test/examination method **does not result in a change in the purpose and scope of the test/examination** in accordance with its original purpose – these changes **do not affect the scope** of the health service "Diagnostic tests and examinations – basic option";
- ✓ if the new test/examination method **results in an expansion of the scope of the test/examination** beyond the scope specified in accordance with its original purpose, **the additional elements of the test/examination are not included** in the scope of the Health Benefit "Diagnostic tests - basic option", and their implementation may result in **an additional charge** to the Insured.