

APPENDIX NO. 3: to the General Terms and Conditions of PROMED Individual Health Insurance

EXTENDED 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 2

The health service “Physician and medical specialist consultations – option 2” allows an Insured to receive a consultation with a Physician or a medical specialist in the case of health complaints, sudden illnesses and for general medical advice.

Consultations can be carried out in the following forms:

- ✓ 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 and a requirement for a referral:

Insured **over 18 years of age** may use consultations without the need for a referral in the following fields:

- allergology
- general surgery
- dermatology
- diabetology
- endocrinology
- gastroenterology
- gynaecology
- haematology
- cardiology
- laryngology
- nephrology
- neurology
- ophthalmology
- oncology
- optometry
- orthopaedics
- proctology
- pulmonology
- rheumatology
- urology

Insured **under 18 years of age** may use consultations **without the need for a referral** in the following fields:

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

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

- allergology
- gastroenterology
- cardiology
- nephrology
- pulmonology
- rheumatology
- urology

The health service “Physician and medical specialist consultations – option 2 plus” **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.

CONSULTATIONS WITH PHYSICIANS AND WITH MENTAL HEALTH AND SPEECH THERAPY SPECIALISTS

The health service “Consultations with physicians and with mental health and speech therapy specialists” allows an Insured to use a consultation with a Physician or mental health and speech therapy specialists.

Consultations can be provided:

- ✓ on-site – in Clinics indicated by Insurer;
- ✓ remotely – in the form of telephone, online or video consultations.

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.

Consultations **include**: history taking, specialist advice and basic activities necessary to establish a diagnosis, implement relevant therapeutic activities and monitor the treatment process.

The scope of the health service and the number of available consultations depend on the age of the Insured:

Insured **over 18 years of age** may use **3 consultations** during each 12-month coverage period, **without the need for a referral**, in the following fields:

- psychiatry
 - sex therapy
 - psychology
 - speech therapy
- Insured **under 18 years of age** may use **3 consultations** during each 12-month coverage period, **without the need for a referral**, in the following fields:
- psychology
 - speech therapy
- Insured **under 18 years of age** may use **1 consultations** during each 12-month coverage period, **without the need for a referral**, in the following fields:
- psychiatry

The scope of the health service **does not include**:

- consultations provided by Doctors holding a postdoctoral degree, a professor title, or Doctors holding the positions of: associate professor or full professor;
- consultations in the fields of speech therapy for the hearing impaired and neuro speech therapy;
- management of therapy;
- psychological diagnostics;
- services provided by the non-public psychological and pedagogical clinic.

DIETICIAN CONSULTATIONS – OPTION 1

The health service "Dietitian Consultation – option 1" allows an Insured to use **3 consultations with a dietician** during each 12-month coverage period.

Consultations can be provided:

- ✓ on-site – in Clinics indicated by Insurer;
- ✓ remotely – in the form of telephone, online or video consultations;

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.

Consultations **include**: history taking and general dietary recommendations.

Consultations **do not include**: the development of individual nutrition plans (setting an individual diet).

The healthcare service is provided in accordance with the rules listed below:

Insured **over 18 years of age** may use consultations **without the need for a referral**.

Insured **under 18 years of age** may use consultations **upon referral** issued by a Physician.

ON-DUTY PHYSICIAN CONSULTATIONS – OPTION 1

The health service "On-duty physician consultations – option 1" **covers only basic emergency care** in case of sudden illness that occurred **not earlier than 24 hours** before the Insured notifies Operator of his/her desire for consultation.

Consultations with on-duty physicians may be made **only on the day of notification** within the working hours of Clinics indicated by Insurer, provided they are available at a given Clinic.

The health service **includes**: medical history taking, physician's advice and basic procedures necessary for making an initial diagnosis, taking an appropriate therapeutic decision and refers to consultations within the following scope:

- internal medicine
- paediatrics
- family medicine.

The service **does not include**: medical interventions provided for life saving purposes under the State Medical Emergency system (in accordance with the Act of 8 September 2006 on State Medical Emergency, as amended).

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**:

- intravenous injection
- subcutaneous/intramuscular injection
- emergency drip administration
- blood drawing
- oral medicine administration in emergency
- placement/change/removal of a small dressing

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 2

The health service "Outpatient procedures – option 2" includes measurements and medical procedures performed by a Physician, nurse or midwife, 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 2" **includes**:

Basic outpatient medical treatments:

- blood pressure measurement
- non-surgical tick removal

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

Outpatient laryngological procedures:

- Eustachian tube examination, insufflation
- nasal administration of mucosa-shrinking medicine in emergency cases
- electrocoagulation of blood vessels of the nasal septum
- catheterisation of the Eustachian tube
- coagulation of blood vessels of the nasal septum
- ear irrigation
- simple laryngological dressing
- removal of a foreign body from the nose/ear
- nasal tamponade removal

Outpatient ophthalmologic procedures:

- standard* ocular fundus examination
- visual acuity examination
- corrective lens selection (excludes varifocal lenses)
- lacrimal duct irrigation (for the Insured over 18 years of age)

Outpatient orthopaedic procedures:

- placement/change/removal — small dressing
- reposition of a dislocation or fracture
- lower limb plaster cast removal
- upper limb plaster cast removal

Outpatient dermatological procedures:

- standard* dermatoscopy

Outpatient gynaecological procedures:

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

Outpatient allergological procedures:

- allergy immunotherapy with an allergological consultation

- height and weight measurement

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)

- suture removal after laryngological procedures performed outside of Clinics indicated by Insurer, qualification based on the Operator doctor's assessment
- suture removal in a treatment room after laryngological procedures performed at the Clinics indicated by Insurer
- application/change/removal of a drain in the ear canal
- unilateral dressing of nasal hemorrhage
- bilateral dressing of nasal hemorrhage

- gonioscopy (iridocorneal angle assessment)
- medicine instillation into the conjunctival sac
- standard* autorefractometry
- standard* stereoscopic vision examination
- standard* intraocular pressure measurement
- removal of a foreign body from the eye

- preparation: traditional cast — tape
- adjustment of small orthopaedic devices — small joints
- cast application

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.

FLU AND TETANUS VACCINATIONS

The health service “Flu and tetanus vaccinations” as part of infectious disease prevention **includes** vaccinations against seasonal flu and tetanus (anti-tetanus anatoxin).

As part of this health service an Insured may receive:

- a medical consultation a nurse consultation before vaccination
- a vaccine (medicinal product)
- nursing service consisting in giving an injection

Flu and tetanus vaccinations are performed at Clinics indicated by Insurer.

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
- TSH
- 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)

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

- CRP test strips
- 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)

DIAGNOSTIC TESTS AND EXAMINATIONS – OPTION 2

The health service “Diagnostic tests and examinations – option 2” 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.

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

Unless otherwise indicated below, the health service “Diagnostic tests and examinations – option 1” **does not include:**

- ✓ laboratory diagnostics using strip tests;
- ✓ tests performed using molecular biology techniques;
- ✓ contrast media for computed tomography and magnetic resonance imaging examinations;
- ✓ 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 – option 2” 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 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):

- APTT
- thrombin time — TT
- D-dimers
- absolute eosinophil count (blood smear)
- fibrinogen
- INR / prothrombin time
- blood count + platelet count + automated smear
- ESR
- platelets
- manual blood smear

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

- AFP — alpha-fetoprotein
- albumins
- amylase
- apolipoprotein A1
- total protein
- direct bilirubin
- total bilirubin
- CA 125
- CA 15.3 – breast cancer antigen
- CA 19.9 — gastrointestinal cancer antigen
- total iron binding capacity, TIBC
- CEA — carcinoembryonic antigen
- ceruloplasmin
- chlorides (Cl)
- cholesterol
- CK (creatinine kinase)
- CRP, quantitative
- oestradiol
- ferritin
- acid phosphatase
- alkaline phosphatase /
- phosphorus (P)
- FSH
- GGTP
- 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
- HDL cholesterol
- IgA immunoglobulin
- IgE immunoglobulin (total IgE)
- IgG immunoglobulin
- immunoglobulin IgM
- cortisol in the afternoon
- cortisol in the morning
- creatinine

- folic acid
- uric acid
- LDH – lactate dehydrogenase
- LDL cholesterol
- directly measured LDL cholesterol
- LH
- lipase
- lipid profile (CHOL, HDL, LDL, TG)
- magnesium (Mg)
- copper
- urea / urea nitrogen / BUN
- potassium (K)
- progesterone
- prolactin
- 30' after administration of 1 MCP tablet
- 60' after administration of 1 MCP tablet
- 120' after administration of 1 MCP tablet
- protein profile
- free PSA
- total PSA
- sodium (Na)
- free T3
- free T4
- testosterone
- free testosterone
- total beta-hCG
- beta hCG – tumour marker
- GOT/AST transaminase
- GPT/ALT transaminase
- transferrin
- triglycerides
- TSH/hTSH
- thyroglobulin
- calcium (Ca)
- vitamin B12
- 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):

- ASO, quantitative
- cytomegalovirus (CMV), IgG
- cytomegalovirus (CMV), IgM
- EBV / mononucleosis – latex
- EBV / mononucleosis IgG
- EBV/mononucleosis IgM
- blood group (ABO), Rh factor and antibody screening
- HBc IgM antibodies
- HBs antibodies
- HBs antigen
- HCV Ab/antibodies
- Helicobacter pylori IgG, quantitative
- HIV-1 / HIV-2
- Waaler-Rose test
- α-microsomal / anti-TPO antibodies
- antithyroglobulin / anti-TG antibodies
- immune antibody screening / alloantibodies
- chlamydia trachomatis IgA antibodies
- chlamydia trachomatis IgG antibodies
- chlamydia trachomatis IgM antibodies
- RF — rheumatoid factor — quantitative
- rubella IgG
- rubella IgM
- basic syphilis serology (VDRL or USR or anti-TP)
- BTA test
- toxoplasma IgG
- toxoplasma IgM

Urine tests with taking test samples (urine):

- total protein / 24-hour urine collection
- urine protein
- phosphorus in urine
- phosphorus in urine / 24-hour urine collection
- catecholamines (noradrenaline, adrenaline) – 24-hour urine collection
- cortisol – 24-hour urine collection
- creatinine in urine
- creatinine in urine/24-hour urine collection
- delta - aminolevulinic acid (ALA)
- uric acid in urine
- uric acid in urine / 24-hour urine collection
- vanillylmandelic acid (VMA) in urine
- magnesium (Mg) in urine
- magnesium (Mg) in urine / 24-hour urine collection

- metoxycatecholamines – 24-hour urine collection
- urinalysis
- urea / urea nitrogen / BUN / 24-hour urine collection
- urea / urea nitrogen / BUN in urine
- lead (Pb) in urine

Bacteriological tests with taking swab:

- vaginal microbiological test (vaginal biocenosis)
- faeces — general culture
- stool culture for pathogenic E. coli in children under 2 years of age
- faeces culture for Salmonella and Shigella
- faeces culture for Yersinia enterocolitica
- urine culture
- semen — aerobic culture
- sputum culture
- endocervical smear for GC
- vaginal smear for GC
- urethral swab
- urethral swab – anaerobic culture
- throat/tonsil swab aerobic
- oral swab – aerobic culture
- tongue swab – aerobic culture

Faecal tests with taking test samples:

- faeces – general analysis
- stool ELISA analysis for lamblia
- faeces analysis for parasites, 1st assay

Cytology tests with taking test samples:

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

Mycological tests with taking swab:

- mycological examination — fingernail fungal culture
- mycological examination — toenail fungal culture
- mycological examination — hair fungal culture
- mycological examination — skin fungal culture
- mycological examination — skin scraping fungal culture
- faeces culture for yeast-like fungi
- urine culture for yeast-like fungi
- sputum culture for yeast-like fungi
- abscess content culture for yeast-like fungi
- secretion culture for yeast-like fungi
- pharyngeal swab culture for yeast-like fungi

Toxicological tests with taking test samples (blood):

- digoxin

- potassium (K) in urine
- potassium (K) in urine / 24-hour urine collection
- sodium (Na) in urine
- sodium (Na) in urine / 24-hour urine collection
- calcium in urine
- calcium (Ca) in urine / 24-hour urine collection

- cervical swab
- endocervical smear – anaerobic culture
- nasal swab
- nasal swab – aerobic culture
- nasopharyngeal swab – anaerobic culture
- nasopharyngeal swab – aerobic culture
- rectal swabs and vaginal swabs towards group B Streptococcus (GBS)
- eye swab – aerobic culture
- vaginal swab – anaerobic culture
- vaginal swab – aerobic culture
- wound swab
- wound swab – anaerobic culture
- ear swab – anaerobic culture
- ear swab – aerobic culture

- faecal analysis for rota- and adenovirus
- faecal occult blood (FOB)

- urethral swab culture for yeast-like fungi
- pharyngeal / tonsil swab culture for yeast-like fungi
- oral swab culture for yeast-like fungi
- tongue swab culture for yeast-like fungi
- endocervical smear culture for yeast-like fungi
- nasal swab culture for yeast-like fungi
- nasopharyngeal swab culture for yeast-like fungi
- eye swab culture for yeast-like fungi
- vaginal swab culture for yeast-like fungi
- vaginal smear culture for yeast-like fungi
- wound smear culture for yeast-like fungi
- ear swab culture for yeast-like fungi

- lead

Quick strip tests with taking test samples (blood):

- CRP strip test
- cholesterol strip test
- glucose meter test;
- troponin strip test

Diagnostic imaging:

X-ray examinations:

- mammography
- mammography — targeted
- shoulder X-ray (transthoracic)
- shoulder X-ray, axial
- shoulder X-ray, bilateral axial
- shoulder X-ray, AP
- shoulder X-ray, AP + lateral
- shoulder X-ray: AP + bilateral – comparative image
- shoulder X-ray, AP, both – comparative image
- shoulder X-ray, AP + axial
- cranial X-ray, cranial nerve canals
- cranial X-ray orbits
- cranial X-ray PA + lateral
- Cranial X-ray PA + lateral + base
- cranial X-ray, base
- cranial X-ray, semi-axial by Orley
- cranial X-ray, sella turcica
- cranial X-ray, tangential
- lumbar functional X-ray
- cervical functional X-ray
- temporomandibular joint functional X-ray
- abdominal X-ray, other
- abdominal X-ray, supine
- abdominal X-ray, erect
- chest X-ray
- chest X-ray – X-ray tomography
- chest X-ray + lateral
- chest X-ray, lateral with barite
- Chest X-ray, other
- chest X-ray, PA + lateral with barium
- X-ray of chest, thyroid, trachea
- sacrococcygeal X-ray
- scaphoid X-ray
- X-ray of temporal bones, transorbital
- X-ray of temporal bones by Schuller/Stevens
- metatarsal X-ray
- femoral bone X-ray, AP + left lateral
- femoral bone X-ray, AP + right, lateral
- spinal X-ray AP, erect (scoliosis)
- spinal X-ray AP, erect + lateral (scoliosis)
- lumbar X-ray, AP + lateral
- X-ray of lumbar spine, AP + lateral + oblique
- X-ray of lumbar spine, lateral
- lumbosacral spine — AP + lateral
- X-ray of lumbosacral spine, oblique
- thoracic spine X-ray
- thoracic X-ray AP + lateral
- thoracic X-ray, AP + lateral + oblique
- thoracic X-ray, lateral
- thoracic X-ray, oblique views
- cervical X-ray
- cervical X-ray, AP + lateral
- cervical X-ray, lateral
- cervical X-ray, lateral + oblique (3 views)
- cervical X-ray, oblique views
- elbow/forearm X-ray, AP + lateral
- elbow/forearm X-ray, AP + lateral, bilateral
- scapular X-ray
- pelvic and hip joint X-ray
- X-ray of sternum / chest lateral
- X-ray of sternum, AP
- wrist/hand X-ray, PA + lateral / oblique left
- wrist/hand X-ray, PA + lateral / oblique bilateral
- wrist/hand X-ray, PA + lateral / oblique right
- wrist X-ray, lateral
- wrist X-ray, lateral, both
- wrist X-ray, PA + lateral
- wrist X-ray, PA + lateral, both
- nasal X-ray — lateral
- X-ray of nasopharynx
- clavicular X-ray
- X-ray of orbits + lateral (2 views)
- toe(s) X-ray, AP + lateral/oblique
- finger(s) X-ray, PA + lateral/oblique
- finger(s) X-ray, PA + lateral/oblique bilateral
- heel X-ray — axial
- heel X-ray, lateral
- temporal bone pyramid X-ray, transorbital
- lower leg X-ray, AP + lateral
- lower leg X-ray, AP + bilateral lateral
- forearm X-ray, AP + lateral
- bilateral forearm X-ray, AP + lateral
- hand X-ray, lateral

- hand X-ray, PA
- hand X-ray, PA + oblique
- hand X-ray, PA + oblique, bilateral
- hand X-ray PA, bilateral
- X-ray of both patellae axial
- bilateral patellar X-ray, axial in 2 positions
- bilateral patellar X-ray, axial in 3 positions
- X-ray of sacroiliac joints – PA
- X-ray of sacroiliac joints – oblique
- hip joint X-ray, AP
- bilateral hip joint X-ray, AP
- hip joint X-ray, axial
- knee joint X-ray, AP + lateral
- knee joint X-ray, AP + bilateral lateral
- bilateral knee joint X-ray — AP + lateral
- knee joint X-ray, lateral
- elbow joint X-ray
- ankle joint X-ray, AP + lateral
- ankle joint X-ray, AP + lateral bilateral
- foot X-ray, AP + lateral / oblique
- foot X-ray, AP + lateral / oblique bilateral
- foot X-ray, AP (comparative)
- splanchnocranium X-ray
- paranasal sinus X-ray
- rib X-ray (unilateral), 2 oblique views
- Mandibular X-ray
- urography (with standard contrast agents)

Ultrasound examinations:

- ultrasound/Doppler ultrasound of the abdominal aorta and pelvic arteries
- ultrasound/Doppler ultrasound of hepatic vessels (assessment of hepatic portal circulation)
- ultrasound/Doppler ultrasound of lower limb arteries
- ultrasound/Doppler ultrasound of upper limb arteries
- ultrasound/Doppler ultrasound of renal arteries
- ultrasound/Doppler ultrasound of carotid and vertebral arteries
- ultrasound/Doppler ultrasound of intracranial arteries
- ultrasound/Doppler ultrasound of lower limb veins
- ultrasound/Doppler ultrasound of upper limb veins
- transabdominal gynaecological ultrasound
- transvaginal gynecological ultrasound
- abdominal ultrasound
- ultrasound of post-traumatic muscle haematoma
- wrist ultrasound
- testicular ultrasound
- breast ultrasound
- transabdominal prostate ultrasound
- trans-fontanelle ultrasound
- plantar aponeurosis ultrasound
- echocardiography – cardiac ultrasound
- hip joint ultrasound + orthopaedic consultation (under 1 year of age)
- hip joint ultrasound, children
- finger and metacarpophalangeal joint ultrasound
- shoulder joint ultrasound
- hip joint ultrasound
- knee joint ultrasound
- elbow joint ultrasound
- ankle joint ultrasound
- Achilles tendon ultrasound
- salivary gland ultrasound
- metatarsal ultrasound
- thyroid ultrasound
- ultrasound of subcutaneous tissue (lipomas, fibromas, etc.)
- transrectal prostate ultrasound
- urinary tract ultrasound
- urinary tract ultrasound + TRUS
- lymph node ultrasound
- ultrasound of ligaments, muscles, small joints

Magnetic resonance imaging with standard contrast agents:

- magnetic resonance imaging (MRI) of the head, angiography
- magnetic resonance imaging (MRI) of the head
- magnetic resonance imaging (MRI) of the head and the hypophysis
- magnetic resonance imaging (MRI) of the head + angio
- magnetic resonance imaging (MRI) of the abdominal cavity
- magnetic resonance imaging (MRI) of the abdominal cavity and pelvis
- magnetic resonance imaging (MRI) of the chest
- magnetic resonance imaging (MRI) of the lumbar spine

- magnetic resonance imaging (MRI) of the thoracic spine (Th)
- magnetic resonance imaging (MRI) of the cervical spine (C)
- magnetic resonance imaging (MRI) of the bone pelvis
- magnetic resonance imaging (MRI) of the small pelvis
- magnetic resonance imaging (MRI) of the wrist
- magnetic resonance imaging (MRI) of the orbits
- magnetic resonance imaging (MRI) of the shank
- magnetic resonance imaging (MRI) of the forearm
- magnetic resonance imaging (MRI) of the pituitary gland
- magnetic resonance imaging (MRI) of the arm
- magnetic resonance imaging (MRI) of the hand
- magnetic resonance imaging (MRI) of the sacroiliac joints
- magnetic resonance imaging (MRI) of the shoulder joint
- magnetic resonance imaging (MRI) of the hip joint
- magnetic resonance imaging (MRI) of the knee joint
- magnetic resonance imaging (MRI) of the elbow joint
- magnetic resonance imaging (MRI) of the ankle joint
- magnetic resonance imaging (MRI) of the foot
- magnetic resonance imaging (MRI) of the splanchnocranium
- magnetic resonance imaging (MRI) of the thigh
- magnetic resonance imaging (MRI) of the sinuses

Computer tomography with standard contrast agents:

- low-dose computed tomography (CT) of the chest
- computed tomography of the head
- computed tomography of the abdomen
- computed tomography of the abdomen and small pelvis
- computed tomography of the abdomen (triple-phase)
- computed tomography of the chest
- computed tomography of the chest (HRCT)
- computed tomography of the chest and abdomen
- computed tomography of the chest, abdomen, small pelvis
- computed tomography of the temporal bones
- computed tomography of the lumbar spine
- computed tomography of the lumbar + sacral spine
- computed tomography of the thoracic spine
- computed tomography of the thoracic + lumbar spine
- computed tomography of the cervical spine
- computed tomography of the cervical + lumbar spine
- computed tomography of the cervical + thoracic spine
- computed tomography of the larynx
- computed tomography of the cervical + thoracic + lumbar spine
- computer tomography of the bony pelvis
- computed tomography of the small pelvis
- computed tomography of the wrist
- computed tomography of the orbits
- computed tomography of the lower leg
- computed tomography of the forearm
- computed tomography of the pituitary gland
- computed tomography of the arm
- computed tomography of the hand
- computed tomography of the shoulder joint
- computed tomography of the knee joint
- computed tomography of the elbow joint
- computed tomography of the ankle joint
- computed tomography of the foot
- computed tomography of the neck
- computed tomography of the neck, thorax, abdomen, small pelvis
- computed tomography of the splanchnocranium
- computed tomography of the upper leg
- computed tomography of the sinuses

Endoscopic examinations with endoscopic biopsy specimen sampling (except for polyps):

- anoscopy
- gastroscopy (with urease test)
- colonoscopy
- rectoscopy
- sigmoidoscopy
- histopathological examination — endoscopy biopsy material

Other diagnostic tests and examinations:

- standard audiometry*
- dark adaptation test
- resting ECG
- uroflowmetry
- densitometry lumbar spine (trabecular bone assessment) — screening
- densitometry femoral collum (cortical bone assessment) — screening
- standard* EEG
- computerised visual field test
- pachymetry
- spirometry – diastolic test
- spirometry without medication
- standard* cardiac stress test
- standard* ECG Holter fitting (for 24h) at the doctor's office
- mounting pressure Holter (ABPM) device in a doctor's office

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 – option 2";
- ✓ 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 and examinations – option 2", and their implementation may result in **an additional charge** to the Insured.

ALLERGY TESTS – OPTION 1

The health service "Allergy tests – option 1" is 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,
- ✓ solely in Clinics indicated by Insurer.

The results of allergy tests are provided to the Insured in accordance with the standards in force in a given Clinic.

The scope of the service **includes** the following:

- allergological consultation – eligibility assessment before tests;

Allergic skin tests – performed by the point (prick) method, using standard allergens approved for use in the territory of the Republic of Poland:

- skin allergy tests – 1 spot;
- skin allergy tests – food allergy panel
- skin allergy tests – inhaled allergens panel

Technological advances can cause changes in the names and techniques of allergy 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** "Allergic tests – option 1";
- ✓ 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 "Allergy tests – option 1", and their implementation may result in **an additional charge** to the Insured.

PREVENTIVE HEALTH CHECK – OPTION 1

The health service "Preventive health check – option 1" aims at performing certain medical consultations and tests and examinations within the scope and then providing the Physician with recommendations for the future regarding his/her health status.

The health service "Preventive health check – option 1" is performed:

- ✓ **once in each 12-month coverage period;**

- ✓ in Clinics indicated by Insurer;
- ✓ solely for Insureds **over 18 years of age**, depending on the gender;
- ✓ after prior appointment, the Insured should report the need for the provision of the Health Service via the form available at: <https://www.luxmed.pl/strona-glowna/kontakt/infolinia.html>.

If a test or an examination from the scope of "Preventive health check – option 1" 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 health service "Preventive health check – option 1" **does not include** medical consultations and tests and examinations not included in its scope – also in the event that there are medical indications to perform them during check-up. These examinations may be performed outside the scope of the health service "Preventive health check – option 1", at the expense of the Insured or as part of his/her entitlement under the concluded agreement, as long as they are within the scope of health services of this agreement.

The health service "Preventive health check – option 1" **includes:**

for women:

- telephone **consultation that opens the check-up** regarding health status, during which a medical history is taken and referrals for tests or examinations are made as indicated;

medical consultations:

- gynaecological consultation
- ophthalmologist / optometry consultation

laboratory tests:

- fasting glucose
- creatinine
- faecal occult blood (FOB)
- lipid profile (CHOL, HDL, LDL, TG)
- urinalysis
- blood count + platelet count + automated smear
- ESR
- GPT/ALT transaminase
- TSH/hTSH
- 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)

imaging tests in case of legitimate medical indications, performed on the basis of a referral issued by the Physician as part of the check-up:

- breast ultrasound or mammography
- abdominal ultrasound
- PA chest X-ray
- transabdominal gynaecological ultrasound or transvaginal ultrasound

functional tests / examinations:

- resting ECG
- internal medicine consultation that **concludes the check-up**, during which the Insured obtains **recommendations for the future on their health status**.

for men:

- telephone **consultation that opens the check-up** regarding health status, during which a medical history is taken and referrals for tests or examinations are made as indicated;

medical consultations:

- urological consultation
- ophthalmologist / optometry consultation

laboratory tests:

- fasting glucose
- creatinine
- faecal occult blood (FOB)
- lipid profile (CHOL, HDL, LDL, TG)
- urinalysis
- blood count + platelet count + automated smear
- ESR
- PSA panel (PSA, FPSA, FPSA / PSA index)
- GPT/ALT transaminase
- TSH/hTSH

imaging tests in case of legitimate medical indications, performed on the basis of a referral issued by the Physician as part of the check-up:

- PA chest X-ray
- transabdominal prostate ultrasound
- abdominal ultrasound

functional tests / examinations:

- resting ECG
- internal medicine consultation that **concludes the check-up**, during which the Insured obtains **recommendations for the future on their health status**.

PHYSIOTHERAPY – OPTION 1

The health benefit "Physiotherapy – option 1" allows an Insured to use:

- ✓ **consultations with a physiotherapist;**
- ✓ **physiotherapy treatments in a number specified below**, including **based on referral** issued by a physical therapist or a Physician specialised in orthopaedics, neurology, neurosurgery, rheumatology, medical rehabilitation and balneology);
- ✓ in Clinics indicated by Insurer.

A consultation with a physical therapist **includes**: medical history taking, functional examination, physical therapist's advice and procedures necessary for making a functional diagnosis, making an appropriate therapeutic decision and determining the mode of medical rehabilitation.

A consultation with a physical therapist **does not include**: rehabilitation or kinesiotherapy activities (i.e. it does not include conducting Physiotherapy and Kinesiotherapy treatments).

The range of physiotherapy treatments **includes** exclusively rehabilitation of the motor organ and is provided subject to the fulfilment of eligibility criteria, which include:

- ✓ diagnosed osteoarthritis;
- ✓ occupational diseases of the musculoskeletal system (confirmed by a certificate);
- ✓ past orthopaedic injuries;
- ✓ pain syndromes of neurological origin;
- ✓ scar at the procedure site.

The scope of physiotherapy treatments **does not include** its costs in the case of rehabilitation that is carried out in connection with:

- ✓ congenital malformations and their consequences;
- ✓ perinatal injuries;
- ✓ chronic connective tissue disorders and their consequences;
- ✓ demyelinating diseases and their consequences;
- ✓ neurodegenerative diseases and their consequences;
- ✓ physiotherapy after surgeries not performed in the Insurer Hospitals;
- ✓ cardiac incidents, neurological and cerebrovascular incidents;
- ✓ postural problems;
- ✓ urogynaecological physiotherapy;

- ✓ physiotherapy with highly specialised methods (mechanical methods, neurophysiological methods, osteopathic techniques);
- ✓ services in the nature of diagnostics and functional training, corrective gymnastics and fitness;
- ✓ physiotherapy of sterile necrosis;
- ✓ physiotherapy of keloid scars;
- ✓ burn conditions;
- ✓ visceral therapy – therapy of internal organs.

As part of “Physiotherapy – option 1” an Insured in each 12-month coverage period may use: **10 physiotherapy treatments and 3 kinesitherapy procedures** (including **therapeutic massage**) from the list of available procedures in the scope of physiotherapy and kinesitherapy:

- physical therapy – lower limb muscle electrostimulation
- physical therapy – upper limb muscle electrostimulation
- physical therapy – phonophoresis lumbar spine
- physical therapy – phonophoresis thoracic spine
- physical therapy – phonophoresis cervical spine
- physical therapy – phonophoresis wrist
- physical therapy – phonophoresis lower leg
- physical therapy – phonophoresis forearm
- physical therapy – phonophoresis arm
- physical therapy – phonophoresis hand
- physical therapy – phonophoresis shoulder joint
- physical therapy – phonophoresis hip joint
- physical therapy – phonophoresis knee joint
- physical therapy – phonophoresis elbow joint
- physical therapy – phonophoresis ankle joint
- physical therapy – phonophoresis foot
- physical therapy – phonophoresis upper leg
- physical therapy – galvanotherapy lumbar spine
- physical therapy – galvanotherapy thoracic spine
- physical therapy – galvanotherapy cervical spine
- physical therapy – galvanisation wrist
- physical therapy – galvanisation lower leg
- physical therapy – galvanisation forearm
- physical therapy – galvanisation arm
- physical therapy – galvanisation hand
- physical therapy – galvanisation shoulder joint
- physical therapy – galvanisation hip joint
- physical therapy – galvanisation knee joint
- physical therapy – galvanisation elbow joint
- physical therapy – galvanisation ankle joint
- physical therapy – galvanisation foot
- physical therapy – galvanisation upper leg
- physical therapy – ionophoresis lumbar spine
- physical therapy – ionophoresis thoracic spine
- physical therapy – ionophoresis cervical spine
- physical therapy – ionophoresis wrist
- physical therapy – ionophoresis lower leg
- physical therapy – ionophoresis forearm
- physical therapy – ionophoresis arm
- physical therapy – ionophoresis hand
- physical therapy – ionophoresis shoulder joint
- physical therapy – ionophoresis hip joint
- physical therapy – ionophoresis knee joint
- physical therapy – ionophoresis elbow joint
- physical therapy – ionophoresis ankle joint
- physical therapy – ionophoresis foot
- physical therapy – ionophoresis upper leg
- physical therapy – local cryotherapy lumbar spine
- physical therapy – local cryotherapy thoracic spine
- physical therapy – local cryotherapy cervical spine
- physical therapy – local cryotherapy wrist
- physical therapy – local cryotherapy lower leg
- physical therapy – local cryotherapy forearm
- physical therapy – local cryotherapy arm
- physical therapy – local cryotherapy hand
- physical therapy – local cryotherapy shoulder joint
- physical therapy – local cryotherapy hip joint
- physical therapy – local cryotherapy knee joint
- physical therapy – local cryotherapy elbow joint
- physical therapy – local cryotherapy ankle joint
- physical therapy – local cryotherapy foot
- physical therapy – local cryotherapy upper leg
- physical therapy – low-energy laser therapy of the lumbar spine
- physical therapy – low-energy laser therapy of the wrist
- physical therapy – low-energy laser therapy of the lower leg
- physical therapy – low-energy laser therapy of the forearm
- physical therapy – low energy arm laser

- physical therapy – low energy laser
- physical therapy – low energy shoulder joint laser
- physical therapy – low energy hip joint laser
- physical therapy – low energy knee joint laser
- physical therapy – low energy elbow joint laser
- physical therapy – low energy secondary joint laser
- physical therapy – low energy laser foot
- physical therapy – low energy laser upper leg
- physical therapy – laser therapy for scar (excluding CO₂ laser)
- physical therapy – magnetic field therapy lumbar spine
- physical therapy – magnetic field therapy thoracic spine
- physical therapy – magnetic field therapy cervical spine
- physical therapy – magnetic field therapy wrist
- physical therapy – magnetic field therapy lower leg
- physical therapy – magnetic field therapy forearm
- physical therapy – magnetic field therapy arm
- physical therapy – magnetic field therapy hand
- physical therapy – magnetic field therapy shoulder joint
- physical therapy – magnetic field therapy hip joint
- physical therapy – magnetic field therapy knee joint
- physical therapy – magnetic field therapy elbow joint
- physical therapy – magnetic field therapy ankle joint
- physical therapy – magnetic field therapy foot
- physical therapy – magnetic field therapy upper leg
- physical therapy – diadynamic currents therapy lumbar spine
- physical therapy – diadynamic currents therapy thoracic spine
- physical therapy – diadynamic currents therapy cervical spine
- physical therapy – diadynamic currents therapy wrist
- physical therapy – diadynamic currents therapy lower leg
- physical therapy – diadynamic currents therapy forearm
- physical therapy – diadynamic currents therapy arm
- physical therapy – diadynamic currents therapy hand
- physical therapy – diadynamic currents therapy shoulder joint
- physical therapy – diadynamic currents therapy hip joint
- physical therapy – diadynamic currents therapy knee joint
- physical therapy – diadynamic currents therapy elbow joint
- physical therapy – diadynamic currents therapy ankle joint
- physical therapy – diadynamic currents therapy foot
- physical therapy – diadynamic currents therapy upper leg
- physical therapy – interferential currents therapy lumbar spine
- physical therapy – interferential currents therapy thoracic spine
- physical therapy – interferential currents therapy cervical spine
- physical therapy – interferential currents therapy wrist
- physical therapy – interferential currents therapy lower leg
- physical therapy – interferential currents therapy forearm
- physical therapy – interferential currents therapy arm
- physical therapy – interferential currents therapy hand
- physical therapy – interferential currents therapy shoulder joint
- physical therapy – interferential currents therapy hip joint
- physical therapy – interferential currents therapy knee joint
- physical therapy – interferential currents therapy elbow joint
- physical therapy – interferential currents therapy ankle joint
- physical therapy – interferential currents therapy foot
- physical therapy – interferential currents therapy upper leg

- physical therapy – TENS currents therapy lumbar spine
- physical therapy – TENS currents therapy thoracic spine
- physical therapy – TENS currents therapy cervical spine
- physical therapy – TENS currents therapy wrist
- physical therapy – TENS currents therapy lower leg
- physical therapy – TENS currents therapy forearm
- physical therapy – TENS currents therapy arm
- physical therapy – TENS currents therapy hand
- physical therapy – TENS currents therapy shoulder joint
- physical therapy – TENS currents therapy hip joint
- physical therapy – TENS currents therapy knee joint
- physical therapy – TENS currents therapy elbow joint
- physical therapy – TENS currents therapy ankle joint
- physical therapy – TENS currents therapy foot
- physical therapy – TENS currents therapy upper leg
- physical therapy – ultrasound therapy lumbar spine
- physical therapy – ultrasound therapy thoracic spine
- physical therapy – ultrasound therapy cervical spine
- physical therapy – ultrasound therapy wrist
- physical therapy – ultrasound therapy lower leg
- physical therapy – ultrasound therapy forearm
- physical therapy – ultrasound therapy arm
- physical therapy – ultrasound therapy hand
- physical therapy – ultrasound therapy shoulder joint
- physical therapy – ultrasound therapy hip joint
- physical therapy – ultrasound therapy knee joint
- physical therapy – ultrasound therapy elbow joint
- physical therapy – ultrasound therapy ankle joint
- physical therapy – ultrasound therapy foot
- physical therapy – ultrasound therapy upper leg
- physical therapy – ultrasound (in water)
- physical therapy – ultrasound therapy scars
- physical therapy – Trabert's current therapy lumbar spine
- physical therapy – Trabert's current therapy thoracic spine
- physical therapy – Trabert's current therapy cervical spine
- physical therapy – Trabert's current therapy wrist
- physical therapy – Trabert's current therapy lower leg
- physical therapy – Trabert's current therapy forearm
- physical therapy – Trabert's current therapy arm
- physical therapy – Trabert's current therapy hand
- physical therapy – Trabert's current therapy shoulder joint
- physical therapy – Trabert's current therapy hip joint
- physical therapy – Trabert's current therapy knee joint
- physical therapy – Trabert's current therapy elbow joint
- physical therapy – Trabert's current therapy ankle joint
- physical therapy – Trabert's current therapy foot
- physical therapy – Trabert's current therapy upper leg
- kinesitherapy – instructional exercises lumbar spine
- kinesitherapy – instructional exercises thoracic spine
- kinesitherapy – instructional exercises cervical spine
- kinesitherapy – instructional exercises wrist
- kinesitherapy – instructional exercises shank
- kinesitherapy – instructional exercises forearm
- kinesitherapy – instructional exercises arm
- kinesitherapy – instructional exercises hand
- kinesitherapy – instructional exercises shoulder joint
- kinesitherapy – instructional exercises hip joint
- kinesitherapy – instructional exercises knee joint
- kinesitherapy – instructional exercises elbow joint
- kinesitherapy – instructional exercises ankle joint
- kinesitherapy – instructional exercises foot
- kinesitherapy – instructional exercises thigh
- kinesitherapy – function-improving exercises lumbar spine
- kinesitherapy – function-improving exercises thoracic spine

- kinesitherapy – function-improving exercises cervical spine
- kinesitherapy – function-improving exercises wrist
- kinesitherapy – function-improving exercises shank
- kinesitherapy – function-improving exercises forearm
- kinesitherapy – function-improving exercises arm
- kinesitherapy – function-improving exercises hand
- kinesitherapy – function-improving exercises shoulder joint
- kinesitherapy – function-improving exercises hip joint
- kinesitherapy – function-improving exercises knee joint
- kinesitherapy – function-improving exercises elbow joint
- kinesitherapy – function-improving exercises ankle joint
- kinesitherapy – function-improving exercises foot
- kinesitherapy – function-improving exercises thigh
- kinesitherapy – individual therapy lumbar spine
- kinesitherapy – individual therapy thoracic spine
- kinesitherapy – individual therapy cervical spine
- kinesitherapy – individual therapy wrist
- kinesitherapy – individual therapy lower leg
- kinesitherapy – individual therapy forearm
- kinesitherapy – individual therapy arm
- kinesitherapy – individual therapy hand
- kinesitherapy – individual therapy shoulder joint
- kinesitherapy – individual therapy hip joint
- kinesitherapy – individual therapy knee joint
- kinesitherapy – individual therapy elbow joint
- kinesitherapy – individual therapy ankle joint
- kinesitherapy – individual therapy foot
- kinesitherapy – individual therapy upper leg
- kinesitherapy – individual therapy – scars
- kinesitherapy – lumbar spine traction
- kinesitherapy – cervical spine traction
- myorelaxation therapy – therapeutic spinal massage

DENTISTRY – OPTION 1

Dental standby duty

The health benefit "Dentistry – option 1, Dental standby duty" allows an Insured to receive emergency dental care in the event of a sudden illness or accident.

The health service, depending on the Clinic, **includes**: coverage or reimbursement of the costs of emergency dental care **up to the maximum amount, i.e. PLN 350 per one or all cases** of dental on an ad hoc basis **in each 12-month coverage period**.

The scope of the health service provided **on an ad hoc basis includes only**:

- emergency tooth pulp devitalisation in a deciduous tooth with cavity dressing
- emergency tooth pulp devitalisation with cavity dressing
- emergency periapical abscess decompression
- emergency medicinal dressing on a deciduous tooth
- emergency medicinal dressing on a permanent tooth
- emergency extraction of a single-rooted tooth
- emergency extraction of a single-rooted deciduous tooth
- emergency extraction of a multi-rooted tooth
- emergency extraction of a multi-rooted deciduous tooth
- emergency dry socket irrigation + application of medication
- emergency single tooth X-ray
- emergency extraction of a tooth by intra-alveolar chiselling
- emergency repositioning and immobilisation of an avulsed tooth
- emergency dental abscess incision, including drainage
- emergency dental local infiltration anaesthesia
- emergency dental local permeation anaesthesia
- emergency dental intraoral conduction anaesthesia

The health care service is provided only outside the working hours of Operator own Clinics.

A precondition for obtaining the health service "Dentistry – option 1, Dental standby duty" shall be for the patient to notify the need to attend a dental standby duty using our Phone Line (on 22 33 22 888), and then the provision of services at the clinic indicated by the Operator, in accordance with the instructions of the Operator's Helpline representative

If the indicated Clinic does not offer cashless services, the Insured must cover the costs of the services performed in accordance with the applicable price list, then submit an application for a reimbursement with attached original invoices or receipts for services provided.

The invoice or receipt should include:

- ✓ particulars of the Insured to whom dental standby duty services have been provided (at least name, surname, address of residence). If an Insured is a minor, the invoice shall be issued for the de facto carer or legal guardian of the child, and the invoice should include the data of the minor Insured to whom the services were provided;
- ✓ a list of services performed for the Insured (indicated in the invoice) or an attached specification issued by the Clinic providing these services, indicating names of the given services, or a copy of the medical record related to the specific services provided;
- ✓ the number of performed services of a given type;
- ✓ the date of the services provided;
- ✓ the unit price of each healthcare service provided.

The application for reimbursement, together with the documents certifying the costs incurred, should be sent by the Insured to Insurer within **no more than 3 months** from the date the Health Service was provided to him/her. The mailing address to which the Application for Reimbursement should be sent is on the application form.

Insurer shall reimburse the costs to the bank account number indicated in the Application Form (or in the case of minor Insureds to the bank account of the de facto carer or legal guardian of the child) within 30 days from the date of delivery of the complete Application Form. If, in the course of verifying the Application, Insurer requests the Insured to supplement the Application or to complete the attached documentation proving that the costs have been incurred – the payment period referred to in the preceding sentence may be extended.

The application form for reimbursement is available at www.luxmed.pl

If, after the refund has been paid, Insurer obtains evidence that it has been misled – as to the amount of the refund due or as to the identity of the Person entitled to receive the refund – as a result of which the refund in whole or in part has become undue, Insurer may request that the Person who received the payment of the refund amount be reimbursed in whole or in part, together with statutory intervals calculated from the date of the transfer of the refund amount.

Preventive dental care

The health benefit "Dentistry – option 1, Preventive dental care" allows an Insured to use **1 consultation with a dentist** specialised in **conservative dentistry in each 12-month coverage period**.

The health service is performed solely in Clinics indicated by Insurer and **includes**: dental consultation aiming at screening of the teeth of the Insured by a dentist and performing oral hygiene procedures by a dental hygienist.

The scope of the health service **includes**:

- dental consultation
- dental fluoride treatment (Fluor Protector) 1 dental arch
- dental fluoride treatment (Fluor Protector) 1/2 of dental arch
- dental fluoride treatment (Fluor Protector) 2 dental arches
- instructions on oral hygiene
- tooth polishing
- periodontal scaling – complementary

- periodontal scaling from 1 dental arch
- periodontal scaling of all teeth
- deposit removal – sandblasting
- individual fluoride treatment, topical

Anaesthesia

The health service “Dentistry – option 1, Anaesthesia” allows an Insured to benefit from anaesthesia during dental procedures and **includes** the following:

- dental anaesthesia with a WAND device
- dental local infiltration anaesthesia
- dental local permeation anaesthesia
- dental intraoral conduction anaesthesia

The health service “Dentistry – option 1, Anaesthesia” **does not include dental healthcare services performed under general anaesthesia.**

Conservative dentistry

The health service “Dentistry – option 1, Conservative dentistry” allows an Insured to use **a consultation with a dentist specialised in conservative dentistry** in Clinics indicated by Insurer.

In addition, an Insured can take advantage of **a 10% discount** from the price list of a given Clinic indicated by Insurer **for dental treatments** in the field of **conservative dentistry** performed at that Clinic:

- examination of tooth vitality
- circumpulpar pin inlay
- cauterisation of interdental papilla
- cosmetic covering of enamel hypoplasia – composite veneer
- cosmetic covering of discoloured dentine in anterior teeth – composite veneer
- treatment of oral mucosa lesions
- restoration of damaged incisal angle with regular light-cured composite
- medicinal dressing on a permanent tooth
- periodontal pocket irrigation
- periodontal pocket irrigation and drug application
- glass ionomer filling
- tooth cavity filling 1 surface with regular light-cured composite
- tooth cavity filling 2 surfaces with regular light-cured composite
- tooth cavity filling 3 surfaces with regular light-cured composite

Paedodontics

The health service “Dentistry – option 1, Paedodontics” allows an Insured to use **a consultation with a dentist specialised in paedodontics** in Clinics indicated by Insurer.

In addition, an Insured can take advantage **of a 10% discount** from the price list of a given Clinic indicated by Insurer **for dental treatments** in the field of **paedodontics** performed at that Clinic:

- vital pulp amputation in a tooth with unformed root
- amputation of devitalised deciduous tooth pulp
- tooth pulp devitalisation in a deciduous tooth with cavity dressing
- dentine impregnation – per tooth
- endodontic treatment of a deciduous tooth
- treatment of pulp necrosis in a deciduous tooth
- medicinal dressing on a deciduous tooth
- adaptation visit (children) – dentistry
- baby tooth cavity filling 1 surface, therapeutic
- baby tooth cavity filling 1 surface
- baby tooth cavity filling 2 surfaces
- baby tooth cavity filling 2 surfaces, therapeutic
- baby tooth cavity filling 3 surfaces
- baby tooth cavity filling 3 surfaces, therapeutic
- preventive fissure sealing – limit: 8

Dental surgery

The health service “Dentistry – option 1, Dental surgery” allows an Insured to use **a consultation with a dentist specialised in dental surgery** in Clinics indicated by Insurer.

In addition, an Insured can take advantage **of a 10% discount** from the price list of a given Clinic indicated by Insurer **for dental treatments** in the field of **dental surgery** performed at that Clinic:

- dental abscess incision – including drainage
- surgical exposure of an impacted tooth

- surgical exposure of an impacted tooth with bracket attachment
- surgical extraction of a partially impacted tooth
- surgical tooth extraction – surgically complex
- frenuloplasty, meloplasty, glossoplasty — dentistry
- dry socket irrigation + application of medication
- sampling of a biopsy specimen in the oral cavity
- repositioning and immobilisation of an avulsed tooth
- apicoectomy of a posterior tooth
- apicoectomy of a posterior tooth, with retrograde root canal filling
- apicoectomy of an anterior tooth
- apicoectomy of an anterior tooth, with retrograde root canal filling
- single-rooted tooth extraction
- single-rooted deciduous tooth extraction
- extraction of a tooth by intra-alveolar chiselling
- extraction of a tooth by extra-alveolar chiselling with formation of a mucoperiosteal flap
- multi-rooted tooth extraction
- multi-rooted deciduous tooth extraction
- excision of a gingival flap within 1 tooth
- excision of nodule, nodule-like lesion, mucocele — dentistry
- enucleation of odontogenic cyst
- surgical dressing – dentistry

Dental X-ray

The health service "Dentistry – option 1, Dental X-ray" allows the Insured to benefit, **on the basis of a referral** issued by a dentist, from a **10% discount** from the price list of a given facility for:

- single tooth X-ray

X-ray results are provided to the Insured a medium conforming with the standard applicable in a given Clinic.

Guarantee

The Insured is provided with a **24-month guarantee** for conservative treatment in the form of final filling of permanent teeth.

The condition for obtaining it is the systematic use by the Insured **at least once in each 12-month coverage period** or according to an individually agreed schedule at Clinics indicated by Insurer the following healthcare services:

- ✓ **dental check-ups** at the dentist;
- ✓ **hygienic procedures** carried out by a Dentist or dental hygienist consisting of: cleaning teeth from tartar and plaque, as well as fluoridation;
- ✓ **complying with the Dentist's recommendations;**
- ✓ **maintenance of oral hygiene** as recommended by the Dentist and/or hygienist.

The guarantee **does not cover** conditions occurring as a result of: non-attendance at follow-up and prophylaxis visits, non-compliance with dentist's recommendations, mechanical injuries, accidents, missing posterior teeth (lack of support zones), pathological dental wear (bruxism) or other functional impairments of the masticatory apparatus, physiological bone atrophy and periodontal lesions, general co-morbidities affecting the stomatognathic system (diabetes, osteoporosis, epilepsy, history of radiotherapy and chemotherapy), or temporary fillings (e.g. provided until a prosthesis is prepared).

HOME VISITS – OPTION 1

The health service "Home visits – option 1" allows an Insured to receive **1 home visit in each 12-month coverage period**, at the place of his/her residence, provided that it is within the current territorial coverage of home visits.

The current territorial coverage of the home visits is described at www.luxmed.pl. In cities where this service is not available, the Insured may apply for reimbursement. Detailed return policies are available on the website indicated above.

An Insured may apply for reimbursement **exclusively** in the case of **prior eligibility assessment** for a home visit by a Operator medical dispatcher.

Home visits **are made only in medically justified cases** when the health condition of the Insured makes it impossible for him/her to reach the Clinic indicated by Insurer, except in cases of immediate life-threatening conditions.

The premises **not considered** as justification for a home visit do not include, in particular:

- ✓ uncomfortable access to the facility;
- ✓ the need to receive a prescription or obtain sick leave.

A home visit is an **emergency service** provided solely on the visit request day and aimed at making a diagnosis and initiating treatment. Treatment continuation and potential follow-up visits take place solely in Clinics indicated by Insurer.

The home visit service does not include the possibility of selecting a physician. The decision on accepting or refusing a home visit is made by the medical dispatcher based on the information provided.

10% DISCOUNT ON OTHER SERVICES OFFERED BY LUX MED AND MEDYCYNĄ RODZINNA

The Insured is entitled to a **10% discount** on healthcare services (excluding dental services) offered at LUX MED's own Clinics – this applies to Insurer and Medycyna Rodzinna Clinics listed at www.luxmed.pl. The discount is calculated from the prices applicable at the aforementioned facilities. Discounts cannot be combined.

10% DISCOUNT ON MEDICAL PROCEDURES PROVIDED AT PROFEMED

Each Insured is entitled to a **10% discount** on all medical services provided at the PROFEMED Clinics counted based on the price list available at the facility. Discounts cannot be combined.

HOSPITAL SERVICES

ORTHOPAEDIC CARE

HOSPITALISATION

Hospitalisation caused by accident (with a referral to a surgery or procedure resulting from a trauma occurring during the Orthopaedic Care insurance coverage period and performed within 90 days of its occurrence).

Orthopedic **care includes**: orthopaedic surgeries, orthopaedic fusion materials;

Orthopedic care **does not include**: endoprosthesis; elongation of limbs; osseointegration procedures; spinal surgeries.

PRE-HOSPITALIZATION MEDICAL CARE

Pre-hospitalization medical care includes diagnostic imaging services, laboratory tests, and specialist consultations necessary to prepare for Hospitalization (the full scope of tests and consultations will be determined during the preparation of the Insured for hospitalization, upon acceptance of the Benefit request form).

Pre-hospitalization medical care **does not include**:

- tests and consultations related to pre-hospitalization medical care ordered by a medical facility other than the one indicated by us;
- outpatient treatment, including procedures;
- tests if, during qualification, the doctor does not decide that hospitalization is necessary;
- pregnancy care.

Pre-hospitalization medical care **is necessary** for:

- determining the need for planned hospitalization, its type, method, and scope of the procedure;
- qualifying the Insured for hospitalization;

- determining the date of the operation or procedure;
- developing a treatment plan.

Pre-hospitalization medical care **is not the same as:**

- making a diagnosis;
- monitoring treatment;
- general medical counseling;
- providing a second medical opinion.

POST-HOSPITALISATION MEDICAL CARE

Post-hospitalization care **includes** 8 follow-up visits at a medical facility designated by us. These visits are intended to monitor the outcomes of the procedure performed and the recovery process, and are provided within 60 days from the date of hospital discharge or until the end of the rehabilitation period specified below.

We also provide care in the event of a sudden deterioration in the Insured Person's health condition after the Benefit has been provided. In such cases, the scope of care is adjusted to the situation and medical needs, with the aim of improving or restoring the Insured Person's health. The scope of the Benefit is determined by the Physician designated by us.

Post-hospitalization medical care is provided exclusively in relation to the Benefit performed under the Agreement.

REHABILITATION

Post-hospitalization rehabilitation **includes:**

- necessary physiotherapy and kinesiotherapy procedures as recommended by medical or physiotherapy personnel following orthopedic procedures, for a period of up to 12 weeks from the date of hospital discharge;
- imaging tests necessary to monitor the progress of rehabilitation;
- a medical consultation summarizing the rehabilitation period.

The detailed scope of rehabilitation will be determined before the end of the hospitalization.

Post-hospitalization rehabilitation **does not include:**

- rehabilitation procedures resulting from indications other than the consequences of a surgical procedure performed under the insurance coverage;
- fracture therapy using bone growth stimulators that utilize physical effects (e.g., ultrasound waves);
- rehabilitation prescribed during qualification but required to be performed prior to the procedure.

Rehabilitation is provided exclusively in relation to the Benefit performed under the Agreement.

We do not provide rehabilitation prescribed by a medical facility other than the one designated by us.

HOSPITAL CARE COORDINATION

Immediately after the start of the Coverage Period, we will provide the Insured Person with the contact details of the Hospital Care Coordination Team. The information will be delivered via email, SMS, or by post, depending on the contact details we have received.

The Insured Person may use the Hospital Care Coordination services according to their needs. They may choose to use part or all of the services offered.

The scope of services we offer under the Hospital Care Coordination **includes:**

- a) receiving the Benefit request form from the Insured and maintaining ongoing contact with the Insured during the verification of the request, as well as throughout the duration of the Agreement;

- b) coordination of care for the Insured in the case of Emergency Care:
- verifying eligibility for the Benefit;
 - providing the Insured with guidance on further steps;
 - contacting the Emergency Department or Clinic;
 - assisting with admission to the Hospital or Clinic and organizing necessary tests and consultations in accordance with the Physician's recommendations;
 - assisting in compiling the Insured Person's medical documentation;
 - contacting the person authorized to receive medical information about the Insured;
- c) coordination of care for the Insured Person prior to Hospitalization:
- verifying eligibility for the Benefit, including obtaining the Insurer's decision regarding the submitted request;
 - presenting hospitalization options – offering a selection of available Hospitals and Physicians, as well as a midwife in the case of an Insured planning childbirth;
 - scheduling the hospital stay in accordance with the Insured's choice;
 - assisting in scheduling tests and consultations required for Hospitalization qualification;
 - monitoring the Insured's completion of tests and consultations;
 - reminding the Insured of the hospital admission date and required documents, as well as confirming the Insured's presence at the Hospital;
 - coordinating the flow of medical documentation between the Insured Person and the Hospital;
 - providing information regarding the hospital stay.
- d) coordination during Hospitalization:
- forwarding all documents necessary for the provision of the Benefit to the Insured;
 - maintaining ongoing contact with the Hospital;
 - providing updates on the current status of medical procedures to the person authorized to receive medical information about the Insured;
- e) scheduling a follow-up visit after Hospitalization, as well as presenting a post-Benefit care plan;
- f) organizing medical transport, if it results from medically confirmed indications approved by us, which includes ground transportation:
- inter-hospital transport in cases where we arrange medical transport to another facility as part of continued treatment covered by the insurance, or to the nearest hospital for continued treatment when further diagnostics and treatment fall outside the scope of our responsibility;
 - from the Hospital to the Insured Person's place of residence;
- g) coordination of post-Hospitalization care, in accordance with the Physician's recommendations:
- scheduling tests or rehabilitation prescribed for the Insured;
 - organizing ground medical transport, if it results from medically confirmed indications approved by us, which includes ground transportation: from the Insured's place of residence to the Hospital; from the Hospital to the Insured's place of residence;
- h) compiling the Insured's medical documentation.

SECOND MEDICAL OPINION SERVICE

The health benefit "Second Medical Opinion" enables the Insured Person to verify a diagnosis by obtaining an independent medical opinion prepared by internationally recognized physicians who specialize in the relevant field of medicine—without the need to travel outside of Poland.

The opinion is based on existing medical documentation and applies to cases in which a diagnosis has been made, bodily injury has been identified, or surgical treatment or a procedure has been recommended.

This health benefit applies to the following diseases and medical conditions:

- Neoplasms
- Myocardial infarction
- Coronary artery disease requiring an operation
- Coma
- Cerebral stroke
- Multiple sclerosis
- Paralysis, Plegia, Paresis
- Chronic obstructive pulmonary disease
- Emphysema
- Inflammatory bowel disease
- Chronic liver disease
- Renal failure
- Chronic pelvic pain
- Diabetes mellitus
- Thromboembolism
- Amputations
- Rheumatoid arthritis
- Severe burns
- Sudden loss of sight due to illness
- Transplantation of large organs
- Neurodegenerative disease/Alzheimer's disease
- Loss of hearing
- Hip and knee replacement surgery
- Loss of speech
- Serious injuries
- Parkinson's disease

Each case submitted under the scope of the Health Benefit is subject to a comprehensive analysis conducted by internationally recognized medical specialists, selected through a patented analytical process.

The specialist reviews the initial diagnosis or the treatment plan proposed by the attending physician of the Insured in Poland and then formulates detailed recommendations regarding further medical management.

As part of the process of obtaining an independent medical opinion, medical documentation, imaging test results, and—if necessary—histopathological samples are collected. The specialist conducts a thorough analysis of all available data and prepares a comprehensive report that includes either confirmation of the existing diagnosis and treatment plan or a recommendation to change the medical approach. The report is prepared in English and translated into Polish.

Additionally, as part of the Health Benefit, the Insured Person may:

- receive answers from a medical specialist to basic questions regarding the given condition, provided electronically without the need to submit full medical documentation—based on a detailed interview conducted by phone;
- receive, in the form of a report, a recommendation of three medical specialists from outside the territory of the Republic of Poland who possess the highest qualifications to provide further treatment.

In addition, as part of the Health Benefit, assistance is provided in organizing a consultation with the selected medical specialist. This includes logistical support (excluding coverage of costs) outside the territory of Poland, particularly in the following areas: scheduling medical appointments; coordinating matters related to treatment; organizing hospital admission; booking appointments, accommodation, and transportation; ongoing support for the Insured Person at the place of treatment; monitoring the course of medical care; overseeing the quality of medical services provided; verifying the accuracy of billed charges; and negotiating discounts for healthcare services.