

MARKETING MATERIALS

Comprehensive life and health insurance for the employer, employees and their families

## PZU PROTECTION AND HEALTH

Our insurance cover combines life and health protection with private medical care.   
The insurance policy provides e.g. payment in case of an illness or an accident   
and a quick and easy access to physicians and testing.

## PROPOSAL FOR: {COMPANY NAME} PREPARED BY: {EMPLOYEE/AGENT} CONTACT: {EMPLOYEE/AGENT CONTACT DETAILS}

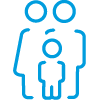
This is our proposal of PZU Protection and Health group insurance that is suited to the needs you indicated as the most important.

Insurance Proposal <NUMBER000000001>

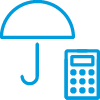
The tables present the scope of services or amounts payable for particular events. The amount of the benefit is the aggregate amount resulting from the General Terms and Conditions of Insurance paid upon the occurrence of a particular event.

**MY HEALTH**

|  |  |  |  |
| --- | --- | --- | --- |
| **SCOPE OF INSURANCE** | **STANDARD** | **PLUS** | **EMPLOYER VARIANT** |
| **MEDICAL CARE** | | | |
| **Scope** |  |  |  |
| Access to specialist physicians |  |  |  |
| Diagnostic tests — free |  |  |  |
| Diagnostic tests — with a 15% discount |  |  |  |
| Outpatient procedures |  |  |  |
| House calls |  |  |  |
| Conservative dental care |  |  |  |
| 24-hour helpline |  |  |  |
| **RECOVERY** | | | |
| **Scope** |  |  |  |
| Serious illness |  |  |  |
| Serious illness of the spouse or domestic partner |  |  |  |
| Permanent health impairment caused by heart attack or brain stroke — for each percent of damage |  |  |  |
| Specialist treatment — chemotherapy or radiotherapy |  |  |  |
| Specialist treatment — implantation of a cardioverter-defibrillator, implantation  of a pacemaker, ablation, implantation of a resynchronization pacemaker |  |  |  |
| Specialist treatment — interferon treatment |  |  |  |
| Consultation and assistance abroad |  |  |  |
| Serious illness — specific medical services suited to a given medical condition — according to the General Terms and Conditions of Insurance |  |  |  |
| **POST-HOSPITALIZATION SUPPORT** | | | |
| **Hospital treatment of the insured:** |  |  |  |
| • due to an illness (for each day of hospital stay lasting a minimum of 4 days) |  |  |  |
| • related to an illness included in the Recovery package (for the first 14 days  of the first stay) |  |  |  |
| • for each day of hospital stay resulting from a traffic accident at work (for the first 14 days of the first stay) |  |  |  |
| • for each day of hospital stay resulting from an accident at work (for the first  14 days of the first stay) |  |  |  |
| • for each day of hospital stay resulting from a traffic accident (for the first 14 days  of the first stay) |  |  |  |
| • for each day of hospital stay resulting from an accident (for the first 14 days  of the first stay) |  |  |  |
| • for each day of hospital stay resulting from an accident, where such stay started after more than 14 days of the first stay resulting from the accident |  |  |  |
| • at an intensive care unit (one time benefit, if the stay lasted a minimum of 48 h) |  |  |  |
| • benefit for each recovery day — hospital stay for a minimum of 14 days, with  a maximum 30 days’ sick leave |  |  |  |
| • outside of Poland |  |  |  |
| **POST-HOSPITALIZATION SUPPORT** | | | |
| **Surgical operation:** |  |  |  |
| • category 1 |  |  |  |
| • category 2 |  |  |  |
| • category 3 |  |  |  |
| • category 4 |  |  |  |
| • category 5 |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **SCOPE OF INSURANCE** | **STANDARD** | **PLUS** | **EMPLOYER VARIANT** |
| **Surgical operation:** |  |  |  |
| • related to an illness included in the Recovery package |  |  |  |
| • during an uninterrupted hospital stay of more than 14 days |  |  |  |
| • outside of Poland |  |  |  |
| **Pharmacy card** — the right to pick up products at selected pharmacies free  of charge |  |  |  |
| **POST-ACCIDENT SUPPORT** | | | |
| **Permanent health impairment caused by an accident — for each percent  of damage** |  |  |  |
| **Consequences of a road accident** (specific medical services suited to a given accident — according to the General Terms and Conditions of Insurance) |  |  |  |
| **Consequences of an accident at work** (specific medical services suited to a given accident — according to the General Terms and Conditions of Insurance) |  |  |  |
| **Incapacity for work and independent living** |  |  |  |
| **Bone fracture caused by an accident** | an appropriate percentage of the sum insured (<PLN 10,000>) depending on the type of fracture — according to the General Terms and Conditions  of Insurance | an appropriate percentage of the sum insured (<PLN 10,000>) depending on the type of fracture — according to the General Terms and Conditions  of Insurance |  |
| **Monthly premium per person — My Health package** |  |  |  |

**MY FAMILY**

|  |  |  |  |
| --- | --- | --- | --- |
| **SCOPE OF INSURANCE** | **STANDARD** | **PLUS** | **EMPLOYER VARIANT** |
| **SECURITY FOR YOUR LOVED ONES** | | | |
| **Insurance benefits for the insured’s death:** |  |  |  |
| • due to a traffic accident at work |  |  |  |
| • due to an accident at work |  |  |  |
| • due to a traffic accident |  |  |  |
| • due to an accident |  |  |  |
| • due to a heart attack or brain stroke |  |  |  |
| • irrespective of the cause |  |  |  |
| **SUPPORT FOR YOU** | | | |
| **Insurance benefits for the death of your insured loved ones:** |  |  |  |
| • of a spouse or a domestic partner |  |  |  |
| • of a spouse or a domestic partner due to an accident |  |  |  |
| • of a family member — parent of the insured or parent of the insured's spouse  or domestic partner |  |  |  |
| • of a family member — parent of the insured or parent of the insured's spouse  or domestic partner due to an accident |  |  |  |
| • of a child |  |  |  |
| • of a child due to an accident |  |  |  |
| **Birth of a child** |  |  |  |
| **Right to purchase individual coverage** |  |  |  |
| **Monthly premium per person — My Family package** |  |  |  |

**  
MY CHOICE**

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| --- | --- | --- |
| **SCOPE OF INSURANCE** | | |
| **IN THE EVENT OF AN ACCIDENT** | **BASIC OPTION** | **EXTENDED OPTION** |
| **Death of the insured from:** |  |  |
| • a traffic accident at work with the involvement of a truck at nighttime (10:00 pm – 6:00 am  local time) | **PLN 200,000** | **PLN 400,000** |
| • a traffic accident at work at nighttime (10:00 pm – 6:00 am local time) | **PLN 150,000** | **PLN 300,000** |
| • a traffic accident at work with the involvement of a truck | **PLN 150,000** | **PLN 300,000** |
| • a traffic accident with the involvement of a truck at nighttime (10:00 pm – 6:00 am local time) | **PLN 150,000** | **PLN 300,000** |
| • a traffic accident at nighttime (10:00 pm – 6:00 am local time) | **PLN 100,000** | **PLN 200,000** |
| • a traffic accident at work | **PLN 100,000** | **PLN 200,000** |
| • a traffic accident with the involvement of a truck | **PLN 100,000** | **PLN 200,000** |
| • a traffic accident | **PLN 50,000** | **PLN 100,000** |
| • fire or poisoning with carbon monoxide | **PLN 50,000** | **PLN 100,000** |
| • drowning | **PLN 50,000** | **PLN 100,000** |
| • gas explosion | **PLN 50,000** | **PLN 100,000** |
| • electric shock or lightning strike | **PLN 50,000** | **PLN 100,000** |
| • an accident caused by sports | **PLN 50,000** | **PLN 100,000** |
| • an accident caused by dangerous sports | **PLN 100,000** | **PLN 200,000** |
| • an accident caused by sports on wheels | **PLN 100,000** | **PLN 200,000** |
| • an accident caused by skiing or snowboarding | **PLN 150,000** | **PLN 300,000** |
| **Death of a spouse or a domestic partner due to a traffic accident** | **PLN 50,000** | **PLN 100,000** |
| **Injury of the insured:** |  |  |
| • burn | **PLN 10,000** | **PLN 20,000** |
| • permanent disability caused by:   * a traffic accident * fire * gas explosion * electric shock or lightning strike | **full — PLN 10,000 partial — an appropriate percentage of the sum insured (PLN 10,000)** depending on the type of injury — according to the General Terms and Conditions of Insurance | **full — PLN 20,000 partial — an appropriate percentage of the sum insured (PLN 20,000)** depending on the type of injury — according to the General Terms and Conditions of Insurance |
| • bone fracture caused by:   * engaging in sports on wheels * jogging * ball games | **an appropriate percentage of the sum insured (PLN 10,000)** depending on the type of fracture — according to the General Terms and Conditions  of Insurance | **an appropriate percentage of the sum insured (PLN 20,000)** depending on the type of fracture — according to the General Terms and Conditions  of Insurance |
| **Monthly premium per person — In the Event of an Accident insurance** | **PLN 6.50** | **PLN 12** |

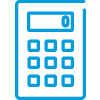
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| **MEDICAL CARE FOR YOUR LOVED ONES PACKAGE** (NOT APPLICABLE TO THE HEALTH: PREVENTIVE CARE SCOPE) | **STANDARD** | **PLUS** | **EMPLOYER VARIANT** |
| **For a spouse, domestic partner or adult child\*** |  |  |  |
| **For a minor child\*\*** |  |  |  |

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| **SUBSIDIZED MEDICINES** | **Monthly premium  per person** |
| **Subsidized prescription drug purchases** — the insured pays 20% of the price and we cover the remaining 80% |  |

If an employer opts for a broader scope of Medical Care, the cost will be increased also for their loved ones, because they will also get   
an extended coverage.

\* monthly premium per person

\*\* the premium does not depend on the number of children

**SUMMARY**

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| --- | --- |
| **MY HEALTH AND MY FAMILY PACKAGE (BASIC) — EMPLOYEE** | **Monthly premium per person** |
| **OPTION I**  MY HEALTH STANDARD + MY FAMILY STANDARD |  |
| **OPTION II**  MY HEALTH PLUS + MY FAMILY PLUS |  |
| **OPTION II**  MY HEALTH PLUS + MY FAMILY STANDARD |  |
| **OPTION II**  MY HEALTH STANDARD + MY FAMILY PLUS |  |
| EMPLOYER VARIANT |  |

**EMPLOYEE ADDITIONAL**

|  |  |  |  |
| --- | --- | --- | --- |
| **C:\Users\karendarska\Desktop\Ikony najczęściej używane\21.01_czlowiek_popiersie.png** | **EMPLOYEE ADDITIONAL** | **C:\Users\karendarska\Desktop\Ikony najczęściej używane\21.11_czlowiek_krawat.png** | **EMPLOYER ADDITIONAL** |
| **+PLN 6.50 or +PLN 12**  (depending on the option chosen)  - if the In the Event of an Accident package is added to the basic option. | | **+PLN 6.50 or +PLN 12**  (depending on the option chosen)  - if the In the Event of an Accident package is added to the basic option. | |
| **+PLN x or +PLN x**  (depending on the scope selected)  - if you purchase Medical Care for your spouse, domestic partner or adult child, <x> or <y> (price per person). NB. The scope of Medical Care for your loved ones  is the same as for you. For your loved ones, the Health: Preventive Care scope  is not available. | | **+PLN x or +PLN x or +PLN x**  (depending on the scope selected)  - if you purchase Medical Care for your spouse, domestic partner or adult child, <x> or <y> or <z> (price  per person). NB. The scope of Medical Care for your loved ones is the same as for you. For your loved ones, the Health: Preventive Care scope is not available. | |
| **+PLN x or +PLN x**  (depending on the scope selected)  - if you purchase Medical Care for a minor child, <x> or <y> (the price does not depend on the number of children). NB. The scope of Medical Care for your children is the same as for you.  For a minor child, the Health: Preventive Care scope is not available. | | **+PLN x or +PLN x or +PLN x**  (depending on the scope selected)  - if you purchase Medical Care for a minor child, <x> or <y> or <z> (the price does not depend on the number of children). NB. The scope of Medical Care for your children is the same as for you. For a minor child, the Health: Preventive Care scope is not available. | |
| **+PLN x**  - if Subsidized Medicines are added to the basic option. | | **+PLN x**  - if Subsidized Medicines are added to the basic option. | |

**THIS OFFER INCLUDES THE FOLLOWING EXCEPTIONS TO THE GENERAL TERMS AND CONDITIONS OF INSURANCE (GTCI):**

|  |  |
| --- | --- |
| **NAME OF EXCEPTION** | **DEFINITION OF EXCEPTION** |
| Extension of the entry age to 75 and expiration  of liability to the age of 76 | 1. Eligible for enrollment in the insurance is any person in a legal relationship with the policyholder, who is at least 16 and under 75 years of age. The remaining conditions for enrollment are consistent with the General Terms and Conditions of Insurance. 2. Our coverage for those people will expire on the policy anniversary falling in the year of such persons turning 76. The other circumstances of expiration of our coverage are consistent with the General Terms and Conditions of Insurance. |
| Coverage for persons on a sick leave, in a hospital or declared incapable of work or service – provided that they were under PZU Życie SA group life insurance | Eligible to enroll in insurance coverage is a person who, on the date of signing the declaration, is in  a hospital, on a sick leave, receives rehabilitation benefits or who has been declared incapable of work or incapable of service based on a decision of a competent authority under the regulations on social insurance or social security and:  1) has been insured with PZU Życie SA under another contract of group life insurance (previous   contract), and  2) there has been no break in premium payments for that person between the previous  and the new contract  – coverage continuity is preserved. |
| Coverage for persons on a sick leave, in a hospital or declared incapable of work or service – provided that they were under a group life insurance with an insurer other than PZU Życie SA | Eligible to enroll in insurance coverage is a person who, on the date of signing the declaration, is in  a hospital, on a sick leave, receives rehabilitation benefits or who has been declared incapable of work or incapable of service based on a decision of a competent authority under the regulations on social insurance or social security and:  1) has been insured with an insurer other than PZU Życie SA under another contract of group life insurance (previous contract), and  2) there has been no break in premium payments for that person between the previous and the new contract – coverage continuity is preserved. |
| No grace period in the first month of insurance | There is no grace period in the event of <a serious illness> for the persons who enroll on the date of the contract. |
| No grace period in the first and successive month  of insurance | There is no grace period in the event of <a serious illness> for the persons who enroll on the date of the contract or within the next month. |
| No grace period in the first and two successive months  of insurance | There is no grace period in the event of <a serious illness> for the persons who enroll on the date of the contract or within the next two months. |
| Coverage extension by the insured’s hospital stay for  up to 120 days | We pay for a maximum of 120 days of hospital stay – within each 12-month period between policy anniversaries. |
| Coverage extension by the insured’s hospital stay for  up to 180 days | We pay for a maximum of 180 days of hospital stay – within each 12-month period between policy anniversaries. |
| Coverage extension to the insured's hospital stay worldwide | Our coverage includes hospital stay worldwide. |
| Coverage extension to a surgical operation worldwide | Our coverage includes surgical operations performed in medical centers worldwide. |
| Coverage for the insured's hospital stay from day 2 due to an illness and from day 1 due to an accident (NW) | With regard to the length of a hospital stay, our coverage includes the insured’s hospital stay for the purpose of a hospital treatment:  - due to an illness – uninterrupted 24-hour stay for at least 2 days;  - due to an accident – for at least one day. |
| Coverage for the insured's hospital stay from day 2 | With regard to the length of a hospital stay, our coverage includes the insured’s hospital stay for the purpose of a hospital treatment – uninterrupted 24-hour stay for at least 2 days. |
| Coverage for the insured's hospital stay from day 3 due to an illness and from day 1 due to an accident (NW) | With regard to the length of a hospital stay, our coverage includes the insured’s hospital stay for the purpose of a hospital treatment:  - due to an illness – uninterrupted 24-hour stay for at least 3 days;  - due to an accident – for at least one day. |
| Coverage for the insured's hospital stay from day 3 due to an illness and from day 2 due to an accident (NW) | With regard to the length of a hospital stay, our coverage includes the insured’s hospital stay for the purpose of a hospital treatment:  - due to an illness – uninterrupted 24-hour stay for at least 3 days;  - due to an accident – uninterrupted 24-hour stay for at least 2 days. |
| Coverage for the insured's hospital stay from day 3 | With regard to the length of a hospital stay, our coverage includes the insured’s hospital stay for the purpose of a hospital treatment – uninterrupted 24-hour stay for at least 3 days. |
| Coverage for the insured's hospital stay from day 4 due to an illness and from day 1 due to an accident (NW) | With regard to the length of a hospital stay, our coverage includes the insured’s hospital stay for the purpose of a hospital treatment:  - due to an illness – uninterrupted 24-hour stay of more than 3 days;  - due to an accident – for at least one day. |
| Coverage for the insured's hospital stay from day 4 due to an illness and from day 2 due to an accident (NW) | With regard to the length of a hospital stay, our coverage includes the insured’s hospital stay for the purpose of a hospital treatment:  - due to an illness – uninterrupted 24-hour stay of more than 3 days;  - due to an accident – uninterrupted 24-hour stay for at least 2 days. |
| Coverage for the insured's hospital stay from day 4 due to an illness and from day 3 due to an accident (NW) | With regard to the length of a hospital stay, our coverage includes the insured’s hospital stay for the purpose of a hospital treatment:  - due to an illness – uninterrupted 24-hour stay of more than 3 days;  - due to an accident – uninterrupted 24-hour stay for at least 3 days. |

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| **NAME OF EXCEPTION** | **DEFINITION OF EXCEPTION** |
| Coverage extension to include the death of a child regardless of age | If, in the case of the death of a child, the contract refers to a “child”, this means a child regardless  of age. It can be:  1) insured’s own child,  2) child adopted by the insured,  3) stepchild of the insured (if the stepchild’s other parent is dead). |
| Coverage extension to death of a child due to an accident regardless of age | If, in the case of the death of a child due to an accident, the contract refers to a “child”, this means  a child regardless of age. It can be:  1) insured’s own child,  2) child adopted by the insured,  3) stepchild of the insured (if the stepchild’s other parent is dead). |
| Coverage extension to events caused by recreational sports | Our coverage includes hospital stay resulting from recreational martial arts, motor and motor boating sports, aerial sports, mountaineering and rock climbing, speleology, diving with specialized equipment for underwater breathing, diving and bungee jumping. |
| Coverage extension to events caused by recreational sports | Our coverage includes surgical operations performed as a result of recreational martial arts, motor and motor boating sports, aerial sports, mountaineering and rock climbing, speleology, diving with specialized equipment for underwater breathing, diving, bungee jumping. |
| Coverage for persons employed by an entity related with the policyholder by capital or by common ownership or management (including their spouses, partners and adult children). | 1. Whenever the contract refers to the primary insured, this means: the primary insured, i.e. the   person in a legal relationship with the policyholder or the entity listed in the attachment to the   insurance documentation, i.e. an entity related to the policyholder (a related party).  2. Whenever the contract refers to a legal relationship with the policyholder, this means also a legal   relationship with a related entity.  3. If the primary insured changes the legal relationship between the policyholder and the related   entity, we will not consider such change as the grounds for lifting the grace period in the meaning   of the General Terms and Conditions of Insurance. |
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| Proposal valid until: | Customer signature: |  | Proposal prepared by: |  |

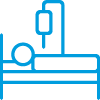
Insurance is provided by PZU Życie SA. For detailed information about the insurance scope, including the exclusions and limitations   
of liability, see the current General Terms and Conditions of Insurance available on pzu.pl, at our branch offices or agents.

**AVAILABLE SCOPES OF THE MEDICAL CARE PACKAGE**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **BENEFITS** | **HEALTH PREVENTIVE CARE** | **HEALTH START** | **HEALTH MEDIUM** | **HEALTH MEDIUM PLUS** | **HEALTH PREMIUM** |
| **visits to physicians**  free, no limit | 1 specialty | 16 specialties | 25 specialties | 28 specialties | 31 specialties |
| **visits to specialists**  free, 4 per year | none | none | none | 1 specialty | 2 specialties |
| **diagnostic tests**  free, no limit | 14 types of tests for women and 14 types of tests for men | 120 types | 186 types | 336 types | 413 types |
| **diagnostic tests**  with a 15% discount, no limit | none | 135 types | 136 types | none | none |
| **pregnancy ultrasound**  free, no limit | none | yes | yes | yes | yes |
| **house calls**  free | none | none | 2 calls per year | 4 calls per year | 4 calls per year |
| **vaccinations**  free, no limit | none | none | seasonal influenza, tetanus | seasonal influenza, tetanus | seasonal influenza, tetanus, hepatitis A and B |
| **outpatient rehabilitation** | none | none | none | none | 30 procedures per year |
| **outpatient procedures**  free, no limit | none | 29 procedures | 29 procedures | 29 procedures | 29 procedures |
| **conservative dental care**  no limit | none | 20% discount | 20% discount | 20% discount | 20% discount |
| **dental examination**  free | none | once a year | once a year | once a year | once a year |

**SPECIALISTS AVAILABLE IN EACH SCOPE OF THE MEDICAL CARE PACKAGE**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **MEDICAL CONSULTATIONS IN** | **HEALTH PREVENTIVE CARE** | **HEALTH  START** | **HEALTH MEDIUM** | **HEALTH  MEDIUM PLUS** | **HEALTH PREMIUM** |
| internal diseases  (internal medicine) |  |  |  |  |  |
| family medicine  (family doctor)  pediatrics |  |  |  |  |  |
| allergology  general surgery  dermatology / venereology  diabetology  endocrinology  gastroenterology  gynecology and obstetrics  cardiology  nephrology  neurology  ophthalmology  orthopedics and musculoskeletal traumatology  rheumatology  urology  otorhinolaryngology  lung diseases (pulmonology) |  |  |  |  |  |
| hepatology  anesthesiology and intensive care  audiology and phoniatrics  oncological surgery  hematology  clinical oncology |  |  |  |  |  |
| infectious diseases  neurosurgery  radiology and diagnostic imaging  psychiatry (4 visits/year) |  |  |  |  |  |
| proctology  vascular surgery  rehabilitation  psychologist consultations |  |  |  |  |  |

**SERIOUS ILLNESSES INCLUDED IN THE RECOVERY PACKAGE**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SERIOUS ILLNESS** | **ONCOLOGICAL SUPPORT** | **ONCOLOGICAL AND CARDIOLOGICAL SUPPORT** | **ONCOLOGICAL, CARDIOLOGICAL AND NEUROLOGICAL SUPPORT** | **COMPREHENSIVE SUPPORT** |
| aplastic anemia  benign brain tumor  malignant tumor |  |  |  |  |
| bacterial endocarditis  surgical treatment of the abdominal aorta  surgical treatment of the thoracic aorta  surgical treatment of the coronary artery disease  surgical treatment of the valvular heart disease  pulmonary embolism  heart attack |  |  |  |  |
| Alzheimer's disease  Creutzfeldt-Jakob disease  Huntington's disease  motor neurone disease  Parkinson's disease  brain abscess  multiple sclerosis  brain stroke |  |  |  |  |
| bacterial encephalitis or meningitis neurohydatidosis  Crohn’s disease  severe burn  tuberculosis  tick encephalitis  neuroborreliosis  paralysis  chronic kidney failure  rheumatoid arthritis  end-stage liver failure  sepsis  coma  tetanus  lupus  transplantation  cerebrocranial injury  loss of limb  loss of speech  hearing loss  vision loss  ulcerative colitis  rabies  HIV infection following transfusion  occupational HIV infection  infected pancreatic necrosis  gas gangrene |  |  |  |  |