



**GENERAL TERMS
SUPPLEMENTARY GROUP HEALTH INSURANCE
ASSISTANT IN CASE OF HEALTH LOSS**

The table below presents the provisions of the general terms and conditions of the additional group insurance Assistant in Case of Health Loss, terms and conditions code AUGP55 (GTC), which govern the exclusion and limitation of the insurance company's liability. These provisions constitute a part of the GTC, and their indications are a result of the legal regulations (Article 17, section 1 of the Insurance and Reinsurance Act).

No.	Type of information	Record number
1.	Conditions for benefit payment	items 1-2 items 4-86 item 116 items 117-133 item 134
2.	Restrictions and exemptions of an insurer's liability granting the right to refuse to pay out the benefits or to reduce them	items 1-2 item 5 items 10-86 items 87-92 items 93-94 items 113-114 item 115 item 134

Information about the insurance are available from:

 at pzu.pl



at the helpline 801 102 102
(charged according to the operator's tariff)

GENERAL TERMS SUPPLEMENTARY GROUP HEALTH INSURANCE ASSISTANT IN CASE OF HEALTH LOSS



GTC code: AUGP55

The Board of Directors of PZU Życie SA set out the general terms and conditions of the additional group insurance Assistant during health loss by means of Resolution No. UZ/202/2021 of 9 November 2021 (hereinafter referred to as the GTC).

These General Terms and Conditions shall enter into force on 01 December 2021 and shall apply to insurance agreements concluded from 1 January 2022.

The policyholder shall read the GTC carefully before concluding the contract and communicate the GTC to anyone who wishes to take out insurance.

Please read the GTC you have received from your policyholder carefully before you take out insurance.

GLOSSARY

– i.e. what do the terms actually mean

1. the GTC uses the following terminology:

- 1) **Assistance Centre** – a centre which has been organised by the provider and which provides the services indicated in the supplementary insurance; the Assistance Centre is open 24 hours a day, 7 days a week;
- 2) **disease** – a condition of the body that involves an abnormal response of systems or organs to external or internal environmental stimuli;
- 3) **additional group insurance against permanent health impairment** – as designated by PZU Życie SA additional group insurance for permanent health impairment of the insured caused by an accident as stated in the agreement;
- 4) **home** – the place in Poland where you are currently staying;
- 5) **child** – a child under 15 years of age. The child may be:
 - a) a child of the insured,
 - b) child of the insured's spouse or domestic partner (if the other parent of the spouse's or domestic partner's child is deceased);
- 6) **inpatient treatment** – inpatient hospital treatment:
 - a) emergencies in which delaying medical assistance may result in loss of life or limb, or
 - b) conditions where the therapeutic goal cannot be achieved during outpatient treatment;
- 7) **medicine** – a finished medicinal product defined in the field of medicines which:
 - a) has a valid authorisation issued by the President of the Office for Medicinal Products, Medical Devices and Biocidal Products, the Council of the European Union or the European Commission (according to the Pharmaceutical Law Act),
 - b) is entered in the Register of Medicinal Products Authorised in the territory of the Republic of Poland.
- 8) **insurance protection period** – the period of time during which our liability to the insured under the supplementary insurance continues;
- 9) **surgery** – a procedure, performed in a medical facility in Poland by a medical doctor, under anaesthesia, which is medically necessary to cure or reduce the symptoms of a disease or to reduce the effects of an accident, or for the prophylactic complete removal of an organ in the holder of a gene mutation increasing the risk of malignant tumour;
- 10) **a dependent person** – a person with whom you live who requires the constant assistance of another person in meeting the basic needs of life;
- 11) **a designated person** – an adult person designated by the insured person to care for the child and dependent person;
- 12) **medical facility** – an establishment within the framework of inpatient or outpatient public or private health care, which provides medical services in Poland and which has signed a contract with a healthcare provider;
- 13) **hospitalisation** – a stay in a hospital in Poland which lasts continuously for more than 3 days and is for in-patient treatment; the first day of a hospital stay is considered to be the day of registration and the last day is considered to be the day of discharge from hospital;
- 14) **hospital** – an inpatient facility in which comprehensive health services are provided around the clock, consisting of diagnosis, treatment, care and rehabilitation, which cannot be provided on an outpatient basis;
- 15) **provider** – the entity that has contracted with us to organise the services we have indicated in the GTC;
- 16) **supplementary insurance** – the insurance agreement to which these GTC apply;
- 17) **basic insurance** – PZU Na Życie Plus group insurance agreement, to which the policyholder has the right to take out additional insurance;
- 18) **insured event** – events that occur during the period of cover:
 - a) hospitalisation due to a disease,
 - b) hospital stay in result of a personal accident,
 - c) the performance of surgical operations listed in the Schedule of Surgical Operations constituting an appendix to these GTC,

- d) an accident causing permanent health impairment of at least 30%, covered by the liability of PZU Życie SA under additional group insurance for permanent health impairment.
2. Other terms that we use in these GTC are defined in the general terms and conditions of basic insurance and the supplementary group insurance in case of permanent health loss – we use these terms in the same sense.

OBJECT OF INSURANCE

– what do we insure

3. We insure your health.

INSURANCE COVERAGE AND BENEFITS UNDER THE AGREEMENT

– in which cases and which services we provide

4. Supplementary insurance cover includes the occurrence of an incident during the period of insurance protection.
5. In each period of the consecutive 12 months that run between policy anniversaries, we are liable for a maximum of three insured events that occur during that period, except that in the case of a hospital stay, we consider the start of the stay to be the occurrence of the insured event.
6. If the insured person has stayed in a hospital or several hospitals in continuity – i.e. there are no pauses between these stays - we consider them to be a single hospital stay.
7. In the event of an insured event, you will be able to benefit of a 24-hour service in Poland, 7 days a week:
- 1) 24-hour Medical Telephone Service or
 - 2) provision of essential medicines;
 - 3) childcare;
 - 4) organising care for dependent persons;
 - 5) medical transport,
8. In the event of an insured event, the insured will be able to benefit from the following in Poland, 7 days a week, between 8:00 and 22:00:
- 1) provision of rehabilitation equipment;
 - 2) minor domestic repairs;
 - 3) home care by a nurse;
 - 4) care of small pets;
 - 5) assistance with housekeeping;
 - 6) handover of personal effects for repair;
 - 7) transport to a rehabilitation;
 - 8) psychologist home visit;
 - 9) home visit by a physiotherapist or a masseur;
 - 10) assistance to a person nominated by the insured.
9. A detailed description of the services is described below.

24-hour Telephone Medical Service

10. As part of the provision of the 24-hour Telephone Medical Service, we provide information on:
- 1) manner of procedure in case of an accident, organise first aid and plan treatment;
 - 2) medical facilities where the insured person will be able to obtain the fastest medical service such as first aid, surgery, diagnostic tests or an appointment with a specialist and where the Assistance Centre will provide contact details of such facility;
 - 3) the services available in medical facilities (hospitals, clinics, outpatient clinics, specialist departments) in Poland, including in particular those closest to home, their area of specialisation, opening hours and contact details;
 - 4) health, illness and disease entities;
 - 5) health-promoting behaviour;
 - 6) hospitals, pharmacies, clinics, general practitioners – located in Poland;
 - 7) infant care;
 - 8) medicines and the side effects of taking them;
 - 9) diets, healthy eating;
 - 10) support groups, helplines – providing assistance and available in Poland;
 - 11) medical transport in Poland;
 - 12) caring for the elderly.

Provision of essential medicines

11. The Assistance Centre organises and covers the costs of the service if, due to the insured's health condition, the insured has to stay at home for at least 5 days on sick leave issued by the insured's treating doctor.
12. We will supply medicines according to the prescriptions issued to the insured, provided that the medicines are available in Poland and the insured person makes the prescription available to the Assistance Centre. If the insured person needs over-the-counter medicines that are also available at the place where the prescription is filled, we will also carry out the supply of the over-the-counter medicines indicated by the insured person.

13. During the period of sick leave, this service is available to the insured once – but only if there is no person at home to provide this service.
14. Necessary medicines will be purchased at a location to be indicated by the insured, provided that the distance to this location is no greater than the distance to the place of purchase to be selected by the Assistance Centre, taking into account their availability at that location.
15. The insured covers the cost of purchasing medicines.

Childcare

16. We organise childcare according to the insured's choice. This means that we cover the costs of:
 - 1) transporting the child to the designated person or
 - 2) arranging a transport to the designated person's place of residence.
17. We decide on the mode of transport, taking into account the availability of transport and the time and destination of the transport and, in the case of transporting a child to the home of a designated person, the child's age and state of health.
18. The service of transporting the child to a nominated person is provided in the company of a person appointed by the Assistance Centre and subject to the insured's written consent to the transport of the child.
19. The service of transporting a child to a nominated person or transporting a nominated person home is available to the insured, in respect of one insured event a maximum of once (1 outward and 1 return trip) and up to a maximum of PLN 1,500 in total.
20. If the nominated person cannot be contacted, or if the nominated person is not available at the address given by the insured person or refuses to care for the child, we will arrange and pay the travel expenses and fees of the persons appointed by the Assistance Centre to care for the child at home subject to the insured person's written consent to the care of the child being given to us, together with the timing of the care.
21. The care referred to in the previous paragraph consists of ensuring that the child has a proper existence in terms of basic needs and protection from dangers. The person making the childcare claim is required to provide written information if the child has a chronic illness, requires rehabilitation and if the child is taking medication or is on a diet.
22. The Assistance Centre covers the carer's travel costs and fees. The insured shall pay the remaining costs of care.
23. The service is available to the insured in respect of one insured event for a maximum of 30 hours, with a maximum of two hours per visit by the carers.
24. Each hour of care started for a small child is counted as one hour.

Care for a dependent person

25. The Assistance Centre will only organise and pay for the service if there is no person in the home to provide the service.
26. The person making the request must provide information in writing on whether the dependent person requires special care - e.g. has a chronic illness, requires rehabilitation, takes medication or is on a special diet.
27. Care for a dependent person involves:
 - 1) transporting a dependent person to a designated person or
 - 2) transport of the person designated to the home.
28. The Assistance Centre shall decide on the choice of means of transport, taking into account the availability of means of transport and the time and destination of transport and, in the case of transporting a dependent person to a designated person, his or her age and state of health.
29. The service of transporting a dependent person to a designated person is provided in the company of a person designated by the Assistance Centre and subject to the dependent person's consent to be transported. If the dependent person is totally incapacitated, written consent for his or her transportation to a designated person must be submitted by the legal guardian.
30. The Insured shall be entitled to a maximum of one trip (1 outward and 1 return trip) per incident and up to a maximum of PLN 1,500 in total.
31. If the designated person cannot be contacted, or if the designated person is not available at the address given by the insured person, or refuses to take care of the dependent person, the Assistance Centre shall organise the following and will pay the travel expenses and fees of the persons designated by the Assistance Centre to care for the dependent person at home.
32. The care referred to in the previous paragraph consists of ensuring that the child has a proper existence in terms of basic needs and protection from dangers. The person making the childcare claim is required to provide written information if the child has a chronic illness, requires rehabilitation and if the child is taking medication or is on a diet.
33. A care service for a dependent person is organised and provided subject to the dependent person's agreement to care for him/her, together with the insured person's specification of the timescales for this care. If the dependent person is totally incapacitated, written consent to care for him or her must be submitted by the legal guardian.
34. The Help Centre covers the carer's travel costs and fees. The insured covers the other costs of care, that is, for example, food, clothes, hygiene products, medicines, medical care, vaccinations.
35. The service is available to the insured in respect of one insured event for a maximum of 30 hours, with a maximum of two hours per visit by the carers.
36. Each hour of care started for a dependent person is counted as one hour.

Medical transport

37. The Assistance Centre organises and covers the costs of medical transport of the insured. The decision on the choice of time, destination and means of transport is taken by the Assistance Centre after consultation (if medically justified) with the Insured's doctor, taking into account the Insured's state of health, the means of transport available and the time and purpose of transport.
38. Medical transport is available to the insured in Poland:
 - 1) to a hospital or other medical facility or
 - 2) home from hospital or other medical facilities, or

- 3) between a hospital and another hospital or medical facility.
39. Medical transport takes place in Poland under the necessary medical supervision and using the necessary means of transport.
40. The Assistance Centre will not provide the service if the insured person takes action contrary to the recommendations of his/her doctor.
41. For one medical event, the insured is entitled to medical transport services a maximum of two times (in total for the services indicated in point 38 and up to a maximum of PLN 1,500 in total).

Provision of rehabilitation equipment

42. The Assistance Centre organises and covers the costs of the service if, due to the insured's health condition, the insured has to stay at home for at least 5 days on sick leave issued by the insured's treating doctor.
43. The Assistance Centre will provide purchased or rented equipment based on prescriptions or written recommendations from the insured's treating physician.
44. During the period of sick leave, this service is available to the insured once – but only if there is no person at home to provide this service.
45. The insured covers the costs of purchasing and renting rehabilitation equipment.

Minor domestic repairs

46. The Assistance Centre organises and covers the home and labour costs of the specialists listed below:
 - 1) electrician – in the event of damage to the electrical installation in the house;
 - 2) a plumber – to intervene in the home to prevent flooding or to increase flooding that has already occurred;
 - 3) a glazier – in the event of damage to the glass in the house;
 - 4) a locksmith – in the event that the locks on the entrance door to the house need to be replaced due to damage or loss of keys;
 - 5) heating appliance technology – in the event of airing up or unsealing radiators.
47. The Assistance Centre will only arrange this service if there is no person at home to provide this service and the insured person is present at home. If the insured person is not present at home, the service can be provided at the subject to the insured giving written consent to its execution and the home being made available by the insured and the occupants of the home.
48. The service does not include the cost of materials used during the repairs carried out by the designated specialists. The costs of these materials are paid in full by the insured.
49. For one event, the insured is entitled to a maximum of 3 visits up to a maximum of PLN 1,000 in total.

Home care by a nurse

50. The Assistance Centre organises and pays for the nurse's travel and fees.
51. The nurse's care for the insured consists of activities:
 - 1) related to hygiene and nutrition (excluding food preparation);
 - 2) therapeutic nursing interventions – as ordered by the doctor – such as performing compresses, dressings, respiratory rehabilitation, therapeutic exercises, measuring blood pressure and pulse, weighing, assisting with nutrition.
52. The Insured shall pay the costs of medical devices and medicinal products used in the aforementioned activities.
53. Nurse care is available up to one insured event, for a maximum of 30 hours, up to four hours per day, except that one visit by a nurse may not last less than one hour.
54. Each commenced hour of home care by a nurse is counted as one hour.

Care for small domestic animals

55. The Assistance Centre organises and pays for the service – but only if the following conditions are all met:
 - 1) the animals are housed and do not pose a threat to the health of the carers or the safety of the environment – in the opinion of the carer. Care can involve animals such as reptiles, rodents, cats, insects, amphibians, dogs, birds and fish;
 - 2) they are not animals of species or breeds that are considered – in particular by legislation – to be hazardous;
 - 3) there is no person in the household who can take care of them;
 - 4) the insured person or a person nominated by the insured person shall produce a document which proves that the required animal vaccinations have been carried out.
56. If the insured person is not at home, the service may be provided that the insured person has given written consent to the service and that the home is made available by the insured person and the persons in it.
57. Animal care includes:
 - 1) provision of food. The food will be purchased at a location that the insured person indicates, provided that the distance to them is no greater than the distance to the place of purchase that the Assistance Centre chooses;
 - 2) cleaning activities;
 - 3) providing temporary care for the animal.
58. The Assistance Centre covers the carer's travel costs and fees. The insured covers the remaining costs, i.e. feed, veterinary care, vaccinations, for example.
59. The service is available to the insured in respect of one insured event, for a maximum of 28 hours.
60. Each hour of care started for small pets is counted as one hour.

Assistance in housekeeping

61. The Assistance Centre arranges and pays for the travel expenses and fees of a home helper - if there is no person in the home to provide this service and the insured person is present at home. If the insured person is not at home, the service may be provided

that the insured person has given written consent to the service and that the home is made available by the insured person and the persons in it.

62. Domestic assistance to the insured includes:
- 1) housekeeping, i.e.: dry cleaning of floors, wet cleaning, dust removal from furniture, windowsills, vacuuming of carpets, carpets, cleaning of bathroom ceramics, bath tub, shower cabin, washing up, cleaning of sink, hob;
 - 2) preparation of meals, including for children or dependants;
 - 3) making the purchases necessary to carry out the activities indicated in points 1 and 2;
 - 4) watering the flowers;
 - 5) waste disposal
- using means or equipment that are made available by the insured person.
63. Purchases necessary for the service shall be made at the places indicated by the insured person, provided that the distance to them is not greater than would be the distance to the place of purchase selected by the Assistance Centre.
64. The insured covers the cost of purchases.
65. The service is available up to a maximum of one insured event for 30 hours, up to five hours per day, with no less than one hour per visit.
66. Each hour of housekeeping assistance started is counted as one hour.

Handing over personal effects for repair

67. The Assistance Centre organises and covers the costs of the service if, directly due to the insured's health condition, the insured has to stay at home for at least 5 days on sick leave issued by the insured's treating doctor.
68. The service consists of delivering the following personal items for repair:
- 1) hearing aid;
 - 2) apparatus for measuring blood pressure;
 - 3) rehabilitation walkers;
 - 4) walker;
 - 5) braille printer;
 - 6) glucometer;
 - 7) inhaler;
 - 8) oxygen concentrator;
 - 9) electronic larynx;
 - 10) rehabilitation bed;
 - 11) air mattress;
 - 12) air humidifier;
 - 13) nebuliser;
 - 14) glasses;
 - 15) parapodium;
 - 16) verticaliser;
 - 17) picoflometer;
 - 18) lift;
 - 19) infusion pump;
 - 20) insulin pump;
 - 21) prosthesis;
 - 22) respirator;
 - 23) mammal;
 - 24) speech synthesiser;
 - 25) massage device;
 - 26) wheelchair.
69. The Assistance Centre delivers the items from the home to a repair centre in Poland that the insured person indicates and delivers them back to the home.
70. Personal effects will be delivered to a repair point at a location to be indicated by the insured, provided that the distance to it is not greater than the distance to the repair point chosen by the Assistance Centre.
71. The insured shall pay the cost of repairing the items.
72. During the period of sick leave, this service is available to the insured once – but only if there is no person at home to provide this service.

Transport to rehabilitation

73. The Assistance Centre organises and covers the costs of transport to rehabilitation - but only if the insured has a referral for rehabilitation issued by a doctor.
74. Transport to rehabilitation is available to the insured person:
- 1) from home to the rehabilitation site;
 - 2) from the rehabilitation site to the home
- taking into account item 76.
75. The Insured shall be entitled to organise and pay the costs of transport to rehabilitation when there is no person at home who can provide such a service.
76. The Insured is entitled to this service, in respect of one event, a maximum of ten times (10 trips there and 10 back) and up to a maximum of PLN 1,500 in total.

Psychologist home visit

77. The Assistance Centre arranges and covers the cost of visits - if the insured's mental health deteriorates due to the insured's medical condition.
78. In respect of one insured event under the benefit, the insured is entitled to a maximum of five visits, with one visit of no more than two hours per day.
79. Each commenced hour of a psychologist's visit is counted as one hour.

Home visit by a physiotherapist or masseur

80. The Assistance Centre organises and covers the costs of visits - if, due to the insured's state of health and on the basis of a medical referral, rehabilitation will be required.
81. In respect of one incident, the insured is entitled to a maximum of five visits, with one visit of no more than two hours per day.
82. Each commenced hour of a visit by a physiotherapist or massage therapist is counted as one hour.

Assistance to a person nominated by the insured

83. The Assistance Centre shall organise and pay the costs of services which are the assistance of the person named by the insured – if due to his or her state of health, the insured person is unable to fulfil his or her obligations to the designated person with regard to assistance in daily life.
84. The service consists of organising services of the insured's choice:
- 1) provision of essential medicines;
 - 2) provision of rehabilitation equipment;
 - 3) minor domestic repairs;
 - 4) care of small pets;
 - 5) assistance with housekeeping;
 - 6) handover of personal effects for repair;
85. The service is organised and provided only if there is no person in the home of the insured or in the home of the person designated by the insured who can provide such a service.
86. The services selected by the insured are provided under the terms and limits of the insured, i.e. that the total limits for the services indicated are provided to the insured and the person designated by the insured. The services provided must not exceed the limits to which the insured person is entitled (as set out in clauses: 13, 44, 49, 59, 65, 72).

EXCLUSIONS OF PROTECTION

– i.e. cases in which you are not eligible for a benefit

87. For the purposes of defining our exclusions of protection, we use the term competitive sports – meaning the practice of sports by:
- 1) members of the personnel of clubs who take part in professional, national or international competitions. These competitions must be organised by: the sports federation or professional sports federation responsible for the sport in question – or
 - 2) individuals who play individual sports and participate in professional, national or international competitions. These competitions must be organised by: the sports federation or professional sports federation responsible for the sport in question – or
 - 3) persons who receive remuneration, as well as scholarships or reimbursement of expenses related to the practice of individual sports or team games (per diems, allowances) – on the basis of an employment contract or a civil law contract.
88. Our liability does not cover:
- 1) a hospital stay commenced prior to the commencement of our liability in respect of the insured person and
 - 2) a surgical operation carried out before the commencement of our liability in respect of the insured person.
89. Our liability does not cover the insured's stay in hospital and the insured's surgical operation, the necessity for which has arisen:
- 1) in war operations;
 - 2) as a result of disasters that cause radioactive, chemical or biological contamination;
 - 3) as a result of active participation of the insured in the acts of terror or mass social unrest;
 - 4) as a result of the commission or attempted commission by the child of an act which fulfils the requirements of an intentional crime;
 - 5) as a result of a traffic accident while the insured was driving a vehicle:
 - a) without holding the authority to drive as defined by the law or,
 - b) being under the influence of alcohol or in a state of intoxication as defined by the regulations on education in sobriety and counteracting alcoholism or under the influence of: drugs, narcotics, psychotropic substances or substitutes within the meaning of the provisions on counteracting drug addiction– insofar as any of these circumstances played a role in the traffic accident;
 - 6) when the Insured was intoxicated within the meaning of regulations on upbringing in sobriety and counteracting alcoholism or after using: drugs, narcotics, psychotropic substances or substitutes within the meaning of regulations on counteracting drug addiction - if any of these circumstances influenced the accident;
 - 7) as a result of the insured's self-harm or attempted suicide;
 - 8) directly as a result of intoxication by alcohol, drugs, narcotics, psycho-tropic substances or substitutes – within the meaning of the regulations on counteracting drug addiction – and in the scope of the illnesses caused by the aforementioned substances;

- 9) in result of bodily injuries caused by medical treatment and therapeutic or diagnostic procedures, regardless of who they were performed by, unless it was to treat the direct consequences of an accident;
- 10) due to the involvement of the insured in competitive sport or recreational combat sports, motor and motorboat motor-sports, air sports, rock or mountain climbing (construed as any climbing practised at an altitude exceeding 2,000 metres above sea level), caving, diving with specialised equipment for underwater breathing, water jumping (ang. bungee jumping).
90. Our liability does not cover the insured's stay in hospital which has occurred:
 - 1) in result of epilepsy – apart from symptomatic epilepsy, which is a symptom of another disease;
 - 2) as a result of mental illness or behavioural disorders falling into categories F00 – F99 of the ICD-10 International Statistical Classification of Diseases and Related Health Problems;
 - 3) as a result of diseases caused by immunosuppression in the course of HIV infection;
 - 4) in connection with dental treatment and procedures – unless these are due to the need to treat injuries sustained as a result of the accident;
 - 5) in connection with the performance of diagnostic tests which do not result from an illness or accident, or serve to diagnose an occupational disease, or serve to identify a suitable organ donor for transplantation (with the exception of stays directly related to the removal of an organ for transplantation) or hospital observation at the request of a court;
 - 6) as a result of fertility treatment;
 - 7) in connection with the performance of a surgical operation for cosmetic or aesthetic purposes with the exception of an operation necessary for the removal of the implications:
 - a) a personal accident which occurs during our period of cover or
 - b) cancer that occurred during the period of insurance coverage;
 - 8) due to the performance of a surgical operation for gender reassignment;
 - 9) in connection with rehabilitation - with the exception of the Insured's first stay in hospital on account of rehabilitation necessary to deal with the direct consequences of an accident or illness, if this stay began no later than 6 months after the end of the Insured's covered hospital stay which was connected – respectively – with the same accident or illness.
91. Our liability also does not cover the stay of the insured:
 - 1) hospices, drug treatment facilities, institutions for the chronically ill, care and treatment facilities and nursing homes;
 - 2) in spa treatment establishments – such as sanatoriums, pre-conventions and spa, sanatorium and rehabilitation hospitals;
 - 3) in rehabilitation centres, rehabilitation hospitals, rehabilitation wards – except for the stay referred to in section 90(9);
 - 4) at day wards;
 - 5) at such health care establishments which are not intended to provide hospital treatment.
92. Our liability does not cover surgical interventions, in cases where:
 - 1) the insured person was an organ donor;
 - 2) it was performed for cosmetic or aesthetic purposes with the exception of an operation necessary for the removal of the implications:
 - a) a personal accident which occurs during our period of cover or
 - b) malignant tumour diagnosed during the period of our protection;
 - 3) it was performed for contraceptive purposes;
 - 4) it performed to reduce or enlarge breasts or change gender;
 - 5) performed for dental purposes – with the exception of surgery necessary to deal with the consequences of an accident that occurred during our period of cover;
 - 6) it was performed for diagnostic purposes;
 - 7) was related to the removal of a foreign body by endoscopy.

GRACE PERIOD

– the period of the lack of or limited liability of the insurance company after you have taken out supplementary insurance

93. During the first calendar month counting from the date you join the supplementary insurance, we are only liable for an accident resulting in a permanent injury of at least 30% during the period of cover. In the case of a hospital stay initiated during this period and surgical operation carried out, we only provide a 24-hour telephone medical service.
94. After the expiry of the period referred to in paragraph 93, we are only liable for the following five months (grace period):
 - 1) hospitalisation and for an accident causing a permanent injury of at least 30%;
 - 2) to carry out such surgical operation following an accident. If a surgical operation is carried out during this period which was not the result of an accident, we only provide the 24-hour Telephone Medical Service benefit.

PREMIUM

– what does it depend on and when to pay it

95. Amount of the premium per the insured:
 - 1) takes into account the grace periods that apply in supplementary insurance;
 - 2) it is fixed, but may be changed by mutual agreement;
 - 3) depending on the number, age structure and gender of those who take out insurance, as well as the type of work they do.
96. The amount of the premium applicable to the additional insurance agreement is specified in the application for conclusion of the agreement as well as in the policy.

97. The policyholder pays us the premiums for the supplementary insurance on a monthly basis, together with the premium for the primary insurance.

TAKING OUT AND JOINING SUPPLEMENTARY INSURANCE

– i.e., How do we insure you

98. Supplementary insurance may be taken out either with or during the conclusion of the basic insurance or in the course of its duration, provided that an additional group insurance contract for a hospital treatment of the insured is concluded or in force at the same time.
99. The additional insurance may be joined by insured persons who joined the basic insurance and the additional group insurance in the event of a permanent health detriment.

DURATION OF SUPPLEMENTARY INSURANCE

– i.e., which period we take out the supplementary insurance for

100. The policyholder may take out supplementary insurance with us for a limited period. We confirm the duration of the additional insurance in the policy. If the additional insurance is concluded with us between policy anniversaries, our cover continues until the next policy anniversary.

EXTENSION OF SUPPLEMENTARY INSURANCE

– what are the rules for extending supplementary insurance

101. Unless otherwise agreed by either party to the contract and provided that the primary insurance is in force and the supplementary group insurance in case of permanent health detriment, the supplementary insurance is renewed for the next policy year automatically – under the same conditions. In this case, as an insured, you do not have to re-submit the declaration of membership.
102. Either party has the right to cancel the extension of the supplementary insurance, of which it shall notify the other party in writing. This must be done at the latest 30 days before the termination of this insurance.

WITHDRAWAL FROM SUPPLEMENTARY INSURANCE

– i.e. the conditions under which a policyholder may withdraw from the supplementary insurance

103. The cancellation of the additional insurance is carried out in accordance with the rules laid down in the basic insurance.
104. If the policyholder cancels the primary insurance, this results in cancellation of the secondary insurance.
105. If the policyholder withdraws from the additional insurance, this does not result in withdrawal from the primary insurance.
106. If the policyholder withdraws from the additional group insurance in case of permanent health detriment, this shall also result in the withdrawal from the additional insurance.
107. If the policyholder withdraws from the additional insurance, this does not result in the withdrawal from the additional group insurance in the event of permanent health detriment.

TERMINATION OF SUPPLEMENTARY INSURANCE

– i.e. the manner in which the policyholder can cancel the supplementary insurance

108. The termination of the supplementary insurance is carried out in accordance with the rules outlined in the basic insurance.
109. In the event the policyholder terminates the primary insurance, this results in the termination of the secondary insurance.
110. If the policyholder terminates the additional insurance, this does not result in termination of the primary insurance.
111. If the policyholder terminates the additional group insurance for permanent health detriment, this results in the termination of the additional insurance.
112. If the policyholder terminates the additional insurance, this does not result in the termination of the additional group insurance for permanent health detriment.

THE BEGINNING OF OUR PROTECTION

– When our insurance protection starts

113. Coverage under the supplementary insurance commences as described in the basic insurance.
114. Cover under the additional insurance shall only commence if the cover under the basic insurance and the additional group insurance in case of permanent health detriment of the insured is in force.

THE CESSATION OF OUR PROTECTION

– i.e. when the supplementary insurance ends

115. The cover under the supplementary insurance ceases:

- 1) on the day of the termination of the cover under the basic insurance or the additional group insurance in the event of permanent health detriment;
- 2) from the date on which we receive the policyholder's declaration that he or she is withdrawing from the additional insurance;
- 3) on the date of termination of cover under the supplementary insurance – if not renewed;
- 4) on the last day of the month in which you cancel the supplementary insurance;
- 5) at the end of the month of the supplementary insurance on the current terms and conditions, if they have not given the required consent to change the supplementary insurance;
- 6) as from the date of expiry of the notice period of the supplementary insurance;
- 7) as from the date on which the supplementary insurance is terminated.

PERSONS ENTITLED TO OBTAIN THE BENEFIT

– who the benefit is due to

116. Benefits are available to the insured person.

PROVISION OF THE HEALTH BENEFIT

– or how to start using benefits

117. If you experience an insured event, provide us with such medical documentation that confirms the occurrence:

- 1) a surgical intervention – an information sheet from a medical facility that confirms that a surgical operation was performed;
- 2) hospital stay – hospital treatment information card and a document which confirms the diagnosis of the illness or accident, issued by the doctor treating the insured;
- 3) such medical records as confirm the occurrence of the permanent injury and the circumstances under which it occurred.

118. If the documents provided are not sufficient to consider that you are entitled to a benefit payment and in what amount, we may ask you for other necessary documents.

119. We decide on your right to use medical services on the basis of the documentation provided.

120. Benefits are provided only on the basis of a telephone request for the organisation of a benefit submitted to the Assistance Centre by the Insured or a person acting on his or her behalf. The request should be submitted to the 24-hour telephone number indicated by PZU Życie SA in the declaration of accession.

121. We shall commence the provision of services immediately, but no later than within 48 hours of the fulfilment of the prerequisites set out in paragraphs 124-129.

122. Where a request for benefits is made by a person acting on behalf of the insured person, we provide benefits once the insured person has confirmed the need for them.

123. We realise the last benefit due for an insurance event no later than 6 months from the date of the insured person's first application entitling them to a benefit for that event.

124. In the event of an insured event, the person making a claim for the organisation of a benefit is obliged to contact the Assistance Centre immediately and:

- 1) in order to complete the authorisation procedure confirming that he/she is covered by the liability of PZU Życie SA, provide the following information:
 - a) name and surname of the insured,
 - b) PESEL number of the insured person,
 - c) name of the insurance,
 - d) the type, detailed description and date of the insured event;

2) provide all available information needed to organise the benefit, in particular:

- a) indicate the telephone number where the Assistance Centre can reach the insured person or his or her representative,
- b) data of the nominee necessary for the organisation of the service,
- c) personal details of the person nominated by the insured,
- d) the address of the home as the place of organisation of the benefit,
- e) other data – insofar as they are necessary for the organisation of the service;

3) follow the instructions of the Assistance Centre.

125. In the case of an application for implementation:

- 1) childcare;
- 2) organising care for dependent persons;
the insured person must sign a consent to entrust the care of the child and dependent person (if he/she is the legal guardian of the dependent person).

126. If the benefit is to be provided in the absence of the insured person at home, the insured person must give his/her written consent.

127. Prior to the commencement of the service, the insured person is obliged to present a valid identity document at the summons of the incoming service provider and:

- 1) an information sheet for hospital treatment, if the insured person has already completed his/her hospital stay, or an information sheet from a medical institution confirming that an operation has been carried out, or a certificate confirming that a surgical operation has been carried out, if a surgical operation has been carried out, and
 - 2) a sick leave document, in the event of a claim for the benefit:
 - a) provision of essential medicines,
 - b) provision of rehabilitation equipment,
 - c) handing over personal items for repair,
 - d) referral to rehabilitation in the case of a request for a visit by a physiotherapist or massage therapist and transport to rehabilitation.
- 128.** All declarations and notifications of the Insured regarding the performance of the benefit may be effectively made in a telephone conversation recorded and archived by PZU Życie SA.
- 129.** Telephone conversations between PZU Życie SA and the applicant are recorded.
- 130.** If a benefit is organised as a result of misrepresentation or untruthfulness on the part of the applicant for its organisation by PZU Życie SA and, as a result, PZU Życie SA incurs the costs of such organisation, PZU Życie SA will pursue a refund of the undue benefit from the applicant.
- 131.** PZU Życie SA and the Assistance Centre shall not be obliged to reimburse costs incurred by the Insured if the event was not reported to the Assistance Centre, unless the lack of reporting was due to force majeure which made contact impossible from the Assistance Centre.
- 132.** If the Insured or the person acting on his/her behalf was unable to contact the Assistance Centre due to force majeure and has organised and paid for the services himself/herself, he/she shall, within 7 days of the day on which it became possible to contact the Assistance Centre, notify the occurrence of the insured event. Furthermore, the insured person or the person acting on his or her behalf shall state the reason for his or her inability to contact the Assistance Centre.
- 133.** In the case referred to in point 132 PZU Życie SA is obliged to reimburse to the Insured the costs incurred by him/her, up to the amount of costs actually incurred, but not more than up to the amount of the limit set for the given service, and if no limit has been set - up to the maximum amount corresponding to the average price of providing this type of service in the locality where the service was performed. The basis for consideration of the reported claim is the submission by the insured person of the documentation necessary to establish the legitimacy of the claim and the amount of the benefit: medical documentation confirming the occurrence of the insurance event covered by the liability of PZU Życie SA and named bills and proofs of payment.

FINAL PROVISIONS

– what other matters are important

- 134.** Any matters not regulated by the supplementary insurance shall be subject to the general terms and conditions of basic insurance, the provisions of the Civil Code, the Act on Insurance and Reinsurance Activity and any other applicable laws.

APPENDIX

TO THE SUPPLEMENTARY GROUP HEALTH INSURANCE ASSISTANT IN CASE OF HEALTH LOSS

No.	Surgical intervention
Nervous system	
1.	Craniotomy with removal of an epidural abscess
2.	Craniotomy with removal of an epidural hematoma
3.	Craniotomy with removal of a foreign body from the skull
4.	Craniotomy with removal of subdural hematoma
5.	Craniotomy with removal of intracerebral haematoma
6.	Drainage of intracerebral haematoma
7.	Lobotomy/tractotomy
8.	Dissection of a brain lesion
9.	Dissection of brain tissue
10.	Dissection of a cerebellar tumour
11.	Removal of cerebellar abscess
12.	Dissection of a brainstem tumour
13.	Meningeal reconstruction
14.	Closure of a meningeal fluid fistula
15.	Ventriculostomy
16.	Extracranial brain drainage
17.	Implantation of a brain stimulator
18.	Surgery for a brain aneurysm or haemangioma
19.	Decompression surgery of the spinal canal or spinal nerve root
20.	Decompression surgery of the spinal canal or spinal nerve root with stabilisation
21.	Dissection of a spinal cord lesion
22.	Dissection of a brain lesion
23.	Dissection of a peripheral nerve lesion
24.	Dissection of a cranial nerve lesion
25.	Peripheral nerve reconstruction
26.	Cranial nerve decompression
27.	Cranial nerve repair surgery
28.	Peripheral nerve repair surgery
29.	Sympathetic nerve repair surgery
30.	Implantation of a spinal cord neurostimulator
31.	Cranial nerve reconstruction
32.	Cranial nerve transplantation
33.	Subarachnoid space drainage procedure
34.	Dissection or eradication of the choroid plexus of the meninges
35.	Subarachnoid space abscess drainage procedure
36.	Ligation of the middle meningeal artery
37.	Cauterization of the choroid plexus of the meninges
38.	Ligation of the vessels of the subdural space
39.	Subdural space drainage procedure
40.	Drainage procedure of an intracranial hydrocele
41.	Meningeal decortication
42.	Dissection of a brain lesion
43.	Massive resection of brain tissue
44.	Removal of a brainstem abscess

No.	Surgical intervention
45.	Dissection of spinal cord tissue
46.	Transection of spinal cord pathways
47.	Meningeal or spinal hernia surgery
48.	Spinal subdural space drainage procedure
49.	Dissection of sural neuroma
50.	Cervical sympathectomy
51.	Lumbar sympathectomy
52.	Stereotactic ablation of brain tissue
53.	Spinal cord dissection
54.	Dissection of meninges
55.	Dura mater transplantation
Endocrine system and mammary gland	
55.	Total dissection of the thyroid gland
56.	Partial dissection of the thyroid gland
57.	Total dissection of the thyroid gland
58.	Dissection of the thyroglossal duct
59.	Partial resection of the parathyroid glands
60.	Total dissection of the parathyroid glands
61.	Partial dissection of the adrenal glands
62.	Bilateral adrenal dissection
63.	Surgery of the pineal gland
64.	Dissection of the pituitary gland
65.	Partial dissection of the thymus
66.	Total dissection of the thymus
67.	Thoracoscopic dissection of the thymus gland
68.	Thymus transplantation
69.	Dissection of a breast lesion
70.	Subtotal mastectomy
71.	Dissection of the nipple
72.	Reconstruction or repair of the nipple
73.	Unilateral total breast dissection
74.	Bilateral total breast dissection
75.	Total simultaneous breast reconstruction
76.	Unilateral breast implant
77.	Breast skin graft
78.	Sutured breast graft
79.	Breast reconstruction with a muscle flap
80.	Breast reconstruction with a dermal-muscular flap
81.	Total bilateral simultaneous breast reconstruction
Eye	
82.	Dissection of the lacrimal gland
83.	Dissection of a lacrimal gland lesion
84.	Dissection of the lacrimal sac or lacrimal duct
85.	Anastomosis of the lacrimal duct to the nasal cavity
86.	Dissection of a lesion from the conjunctiva
87.	Repair surgery for conjunctival scarring
88.	Removal of conjunctival or eyelid adhesions
89.	Conjunctival reconstruction with transplantation
90.	Dissection of corneal pterygium

Surgical intervention	
91.	Corneal transplantation
92.	Iris incision
93.	Removal of iris adhesions
94.	Iris dissection
95.	Dissection of an iris lesion
96.	Trepanation of the sclera with complete removal of the iris
97.	Scleral fistula formation
98.	Removal of a scleral lesion
99.	Scleral hump repair
100.	Scleral reinforcement
101.	Removal of vitreous body
102.	Total removal of the oculomotor muscle
103.	Dissection of the eyeball
104.	Repair of post-traumatic damage to ocular structures
105.	Operative management of a fractured eyeball
106.	Orbital lesion dissection
107.	Osteoplasty of the orbit
108.	Removal or dissection of a ciliary body lesion
Ear	
109.	Total Dissection of the external ear
110.	Reconstruction of the ossicles
111.	Eardrum repair surgery
112.	Repair surgery of the mastoid process
113.	Dissection of middle ear lesion
114.	Dissection of an inner ear lesion
115.	Inner ear drainage procedure
116.	Ablation of inner ear structures
117.	Inner ear reconstruction
118.	Surgery for inner ear fistula
119.	Cochlear prosthesis implantation
120.	Lymphatic fistula formation
121.	Decompression of the vagus
Respiratory system	
122.	Operative stopping of nasal bleeding with arterial ligation
123.	Dissection of the internal nasal auricle (dissection by diathermy, cryotherapy, laser surgery not included)
124.	Nasal dissection
125.	Opening of the maxillary sinus
126.	Dissection of a maxillary sinus lesion
127.	Frontal sinus opening
128.	Dissection of a frontal sinus lesion
129.	Obliteration of the frontal sinus
130.	Frontal sinus dissection
131.	Opening of sieve cells
132.	Dissection of sieve cells
133.	Opening of the wedge sinus
134.	Removal of the wedge sinus
135.	Opening of multiple nasal sinuses
136.	Throat dissection
137.	Dissection of a throat lesion

No.	Surgical intervention
138.	Throat expansion
139.	Posterior nostril repair surgery
140.	Throat repair surgery after cancer removal
141.	Closure of a pharyngeal fistula
142.	Partial laryngectomy
143.	Total laryngectomy
144.	Dissection of a laryngeal lesion
145.	Laryngeal dilatation
146.	Laryngeal fistula surgery
147.	Dissection of laryngeal cartilage
148.	Laryngeal repair surgery
149.	Dissection of vocal cords
150.	Vocal prosthesis implantation
151.	Simultaneous dissection of the larynx and pharynx
152.	Laryngeal transplantation
153.	Tracheostomy (does not include temporary tracheostomy)
154.	Tracheal repair surgery
155.	Tracheal fistula surgery
156.	Total simultaneous laryngotracheal reconstruction
157.	Partial resection of the trachea
158.	Bronchial repair surgery
159.	Bronchial fistula surgery
160.	Dissection of a bronchial lesion
161.	Dissection of the airway
162.	Dissection of a lung lesion
163.	Lung dissection
164.	Lung transplantation
165.	Simultaneous lung and heart transplantation
166.	Dissection of a mediastinal lesion
167.	Sinonasal duct reconstruction
Oral	
168.	Dissection of the tongue lesion
169.	Partial resection of the tongue
170.	Complete removal of the tongue
171.	Dissection of a salivary gland lesion
172.	Partial salivary gland dissection
173.	Total removal of the salivary gland
174.	Repair surgery of the salivary gland or salivary duct
175.	Closure of a salivary fistula
176.	Dissection of a hard palate lesion
177.	Dissection of a soft palate lesion
178.	Cleft palate correction
179.	Dissection of a lip lesion
180.	Dissection of an oral mucosal lesion
181.	Reconstruction of oral structures with grafting (does not include reconstruction of teeth and gums)
182.	Uvula dissection
183.	Dissection of a tonsillar lesion
184.	Partial esophagectomy
185.	Total esophagectomy

No.	Surgical intervention
186.	Mediastinal oesophageal bypass anastomosis
187.	Creation of an artificial oesophagus
188.	Intestinal formation of the oesophagus
189.	Pre-sternal oesophageal bypass anastomosis
190.	Insertion of an oesophageal endoprosthesis
191.	Suturing of an oesophageal tear
192.	Removal of oesophageal stricture
193.	Ligation of oesophageal varices
194.	Simultaneous total removal of the oesophagus and the stomach
195.	Oesophageal fistula creation
196.	Gastric fistula surgery
197.	Ligation of gastric portal varices
198.	Pyloromyotomy
199.	Pyloroplasty
200.	Partial gastrectomy
201.	Total gastrectomy
202.	Vagotomy in peptic ulcer disease
203.	Stitching up a gastric ulcer
204.	Stopping the bleeding in the stomach
205.	Stopping bleeding in the duodenum
206.	Gastric bypass anastomosis
207.	Anti-reflux surgery
208.	Suturing of a gastric tear
209.	Inversion of gastric diverticulum
210.	Dissection of the duodenum
211.	Suturing of duodenal ulcer
212.	Vagotomy in duodenal ulcer disease
213.	Duodenal bypass anastomosis
214.	Surgery for duodenal fistula
215.	Suturing of a torn duodenum
216.	Partial resection of the small bowel
217.	Total small bowel resection
218.	Small bowel bypass anastomosis
229.	Closure of small bowel fistula
220.	Small intestine colostomy
221.	Reconstruction of an intestinal fistula
222.	Suturing of a torn small bowel
223.	Intestinal diversion
224.	Drainage of intestinal indentation
225.	Affixing the small intestine
226.	Suture of the small intestine
227.	Dissection of a cyst or pilonidal sinus
228.	Caecal dissection
229.	Diaphragmatic hernia surgery
230.	Transverse colon dissection
231.	Right hemicraniectomy
232.	Left hemicraniectomy
233.	Dissection of the sigmoid colon
234.	Total intraabdominal colectomy

No.	Surgical intervention
235.	Intestinal bypass surgery
236.	Colorectal fistula surgery
237.	Multiple segmental colorectal excisions
238.	Large intestine colostomy
239.	Suture of the large intestine
240.	Affixing the large intestine
241.	Suturing of a large bowel tear
242.	Anal banding
243.	Anal fistula surgery
244.	Implantation of an artificial anal sphincter
245.	Prolapsed anus surgery
246.	Rectal dissection
247.	Suturing of a rectal tear
248.	Rectal dissection
249.	Rectal fixation
250.	Slender muscle graft
251.	Appendectomy
Abdominal viscus	
252.	Partial resection of the spleen
253.	Global dissection of the spleen
254.	Dissection of a splenic lesion
255.	Spleen transplantation
256.	Partial resection of the liver
257.	Global liver resection
258.	Dissection of a liver lesion
259.	Liver transplantation
260.	Endovascular hepatic vascular surgery
261.	Fixation of the liver
262.	Hepatic duct anastomosis
263.	Dissection of the gallbladder
264.	Dissection of a pancreatic lesion
265.	Cholecystostomy (creation of a gallbladder fistula)
266.	Suturing of the bile duct
267.	Biliary dissection
268.	Biliary duct anastomosis
269.	Dissection of a biliary tract lesion
270.	Plasticisation of the common bile duct
271.	Gallbladder anastomosis
272.	Dissection of the Vater papilla
273.	Dissection of the alveolar duct
274.	Pancreatic cyst fistula formation
275.	Partial resection of the pancreas
276.	Global pancreatic resection
277.	Simultaneous total resection of the pancreas and duodenum
278.	Whipple operation
279.	Pancreatic anastomosis
280.	Pancreatic duct anastomosis
Heart	
281.	Closed valvulotomy

No.	Surgical intervention
282.	Open valvuloplasty
283.	Aortic valve implantation
284.	Mitral valve implantation
285.	Pulmonary valve implantation
286.	Tricuspid valve implantation
287.	Valve ring repair surgery
288.	Percutaneous valvuloplasty
289.	Closure of the Botall's ductus arteriosus
290.	Atrial septal defect closure
291.	Ventricular septal defect closure
292.	Closure of cardiac septal defect
293.	Global correction of total abnormal pulmonary vein drainage
294.	Percutaneous coronary angioplasty
295.	Coronary artery bypass grafting
296.	Coronary artery aneurysm surgery
297.	Operations on the papillary muscles of the heart
298.	Heart tendon strand surgery
299.	Pericardial dissection
300.	Heart aneurysm repair surgery
301.	Dissection of a cardiac aneurysm
302.	Ventricular remodelling
303.	Surgical reduction of the heart chamber
304.	Heart transplant
305.	Implantation of an artificial heart
306.	Implantation of a mechanical heart support system
307.	Implantation of a cardiac pacing system
308.	Cardioversion / defibrillator engraftment
309.	Cardiac resynchronisation therapy (CRT) implantation
310.	Open cranioplasty
311.	Myocardial bead surgery
312.	Bypasses for cardiac revascularisation
313.	Percutaneous pulmonary artery surgery
314.	Percutaneous closure of the atrial appendage
Arterial and venous vessels	
315.	Carotid artery reconstruction
316.	Carotid artery bypass grafting
317.	Reconstruction of the abdominal arteries
318.	Endarterectomy of the arteries of the lower limb
319.	Dissection or anastomosis of the arteries of the lower limb
320.	Bypass of the abdominal aorta or lower limb arteries
321.	Cerebral artery aneurysm surgery
322.	Aortic repair surgery
323.	Bypass of the abdominal aorta or abdominal arteries
324.	Reconstruction of another artery
325.	Suturing the artery
326.	Reconstruction of the subclavian artery
327.	Subclavian artery bypass grafting
328.	Endovascular aortic repair surgery
329.	Endovascular repair surgery of lower limb arteries

No.	Surgical intervention
330.	Endovascular repair of visceral branches of the aorta
331.	Endovascular repair surgery of the cerebral artery
332.	Endovascular repair of another artery
333.	Dissection of aneurysm with anastomosis of the following veins: abdominal, iliac, portal, renal, splenic, inferior vena cava
334.	Dissection of a vascular lesion with anastomosis
335.	Carotid artery endovascular surgery
336.	Cerebral artery reconstruction
337.	Pulmonary artery reconstruction
338.	Dissection of a thoracic vascular aneurysm
339.	Dissection of a vascular lesion with an insertion
340.	Dissection of upper limb vascular aneurysm
341.	Upper limb vascular endarterectomy
342.	Abdominal vein anastomosis
Urinary system	
343.	Surgery for a kidney cyst
344.	Kidney stone removal
345.	Pielostomy
346.	Dissection or destruction of a lesion of the pyelocaliceal system
347.	Dissection or destruction of the renal lesion
348.	Thermal ablation of a renal lesion
349.	Dissection of the renal calyx
350.	Partial dissection of the kidney
351.	Global kidney dissection
352.	Bilateral simultaneous renal dissection
353.	Kidney transplantation
354.	Fixation or suspension of a hypermobile kidney
355.	Supply of traumatic kidney lesion
356.	Renal fistula surgery (does not include percutaneous fistula creation)
357.	Urinary system anastomosis
358.	Urinary system repair
359.	Removal of a clot from the urinary tract
360.	Stone evacuation from the urinary tract
361.	Complete removal of the lesion from the ureter
362.	Correction of ureteral stenosis
363.	Incision of the ureter
364.	Partial dissection of the ureter
365.	Global dissection of the ureter
366.	Surgery for ureteral fistula
367.	Reimplantation of the ureter into the bladder
368.	Intestinal ureteral insertion
369.	Fabrication of a terminal faecal fistula with ureteral implantation
370.	Reimplantation of the ureter
371.	Suturing of a ureteral wound
372.	Fixation of the ureter
373.	Surgery of a ureter affected by retroperitoneal fibrosis
374.	Extravesical anti-reflux surgery
375.	Ureteral replacement with an implant
376.	Urethral prosthesis
377.	Ureteral folding

No.	Surgical intervention
378.	Release of the ureter from adhesions
379.	Implantation of an electronic ureteral stimulator
380.	Bladder stone evacuation
381.	Bladder outlet repair surgery
382.	Bladder and urethral repair
383.	Surgical repair of bladder diverticulum
384.	Bladder outlet plication
385.	Foliation of the bladder outlet
386.	Urethral strictures correction
387.	Incision and drainage of a sterile abscess
388.	Bladder fistula surgery
389.	Dissection or destruction of a bladder lesion
390.	Dissection of a bladder diverticulum
391.	Partial dissection of the bladder
392.	Global bladder dissection
393.	Vaginal fistula surgery
394.	Fabrication of a replacement bladder
395.	Urethral repair surgery
396.	Urethral fistula surgery
397.	Urethral infolding
398.	Implantation of an artificial urethral sphincter
399.	Urethral prosthesis implantation
400.	Surgery for hypospadias
401.	Operative treatment of urinary incontinence
402.	Dissection or destruction of steroid tissue
403.	Dissection or destruction of a sterile lesion
404.	Global dissection of the prostate
405.	Dissection of a urethral lesion
406.	Dissection of a urethral diverticular
407.	Uterine fistula surgery
408.	Bladder reconstruction
409.	Bladder repair surgery
410.	Bladder anastomosis creation
411.	Implantation of an electronic bladder stimulator
412.	Partial dissection of the urethra
413.	Global dissection of the urethra
Male genitalia	
414.	Hydrocele testis repair
415.	Dissection of a testicular lesion
416.	Unilateral dissection of the testis
417.	Dissection of the only testicle
418.	Dissection of both testes at the same time
419.	Bringing down the testicles
420.	Testicular prosthesis
421.	Operation for varicose veins of the spermatic cord
422.	Repair surgery of the spermatic cord
423.	Transplantation of the spermatic cord
424.	Seminal vesicle surgery
425.	Epididymis surgery

No.	Surgical intervention
426.	Dissection of the epididymis
427.	Dissection of the vas deferens
428.	Dissection or destruction of the penile lesion
429.	Global penile dissection
430.	Partial penile dissection
431.	Penile prosthesis
432.	Penile reimplantation
433.	Penile repair surgery
434.	Foreskin repair surgery
435.	Scrotal dissection
Female reproductive system	
436.	Bartholin's gland surgery
437.	Dissection or destruction of a lesion in the recto-uterine pouch
438.	Closure of the recto-uterine pouch
439.	Dissection of a vaginal lesion
440.	Vaginal dissection
441.	Vaginal repair surgery
442.	Vaginal fistula surgery
443.	Reconstruction of the vaginal vault
444.	Dissection of a vulvar lesion
445.	Dissection of the vulva
446.	Release of vulvar adhesions
447.	Clitoral surgery
448.	Ovarian or fallopian tube surgery
449.	Bilateral dissection of the ovaries or fallopian tubes
450.	Dissection of a cervical lesion
451.	Removal of uterine myomas
452.	Global or partial dissection of the endometrial lesion
453.	Uterine septum repair surgery
454.	Removal of uterine adhesions
455.	Destruction of the endometrial lesion
456.	Suturing the uterus to the abdominal wall
457.	Suturing of a uterine tear
458.	Closure of uterine fistula
459.	Repair of postpartum uterine tear
460.	Repair of a congenital uterine defect
461.	Global or partial dissection of the uterus
462.	Operations on the uterine suspensory apparatus
Skin	Szycie rany przepony
463.	Noninfarcted skin graft
464.	Engraftment of hairy skin flap
465.	Transplantation of foreign tissue into the skin
466.	Pedunculated or flap skin graft
467.	Local grafting of a subcutaneous tissue-supported skin flap
468.	Scar release surgery using a skin flap
469.	Dermo-fascial flap transplantation
470.	Insertion of an expander under the skin
471.	Mucosal transplantation

No.	Surgical intervention
Soft tissues	
472.	Tendon release
473.	Dissection of a lateral neck cyst
474.	Dissection of residual gill slit
475.	Dissection of a chest wall lesion with removal of a rib or ribs
476.	Lung decortication
477.	Chest wall reconstruction
478.	Thoracoplasty
479.	Diaphragm repair surgery
480.	Diaphragmatic fistula closure
481.	Suturing diaphragm
482.	Completely block dissection of lymph nodes
483.	Bilateral inguinal hernia surgery
484.	Unilateral inguinal hernia surgery
485.	Umbilical hernia surgery
486.	Unilateral femoral hernia surgery
487.	Bilateral femoral hernia surgery
488.	Surgery for abdominal wall hernia of unspecified location
489.	Hernia operation in a postoperative scar
490.	Diaphragm plication
491.	Ureteral surgery
492.	Dissection of peritoneal tissue
493.	Network repair operation
494.	Cutting out network changes
495.	Repair surgery on the mesentery of the bowel
496.	Dissection of mesenteric bowel lesion
497.	Dissection of a peritoneal lesion
498.	Release of peritoneal adhesions
499.	Lymphatic duct surgery
500.	Dissection of a tendon
501.	Dissection of a gelatinous cyst of the tendon sheath
502.	Bursa surgery
503.	Dissection of the fascia
504.	Dissection of the muscle
505.	Release of muscle spasm
506.	Tendon repair surgery
507.	Muscle repair surgery
508.	Muscle transplantation
509.	Muscle release
510.	Dissection of a lesion or tissue of the diaphragm
511.	Pleural repair procedure
512.	Operative repair of sciatic hernia
513.	Operative repair of ischio-anal hernia
514.	Lumbar hernia repair surgery
515.	Reconstructive surgery for an obturator hernia
516.	Reconstructive surgery for a mesh hernia
517.	Retroperitoneal hernia repair surgery
518.	Peritoneal repair surgery
519.	Dissection of the tendon sheath

No.	Surgical intervention
520.	Fascia repair surgery
521.	Surgery for fasciocutaneous fistula
522.	Dissection of the fascia
Bones and joints of the skeleton and spine	
523.	Elevation of a fractured skull fragment
524.	Restoration of cranial bone defect
525.	Open setting of a nasal bone fracture
526.	Dissection of a facial bone lesion
527.	Dissection of the facial bones
528.	Open setting of a fracture of the zygomatic bone
529.	Open setting of a fracture of the jaw
530.	Open setting of a mandibular fracture
531.	Open set of facial bones
532.	Open setting of an orbital fracture
533.	Facial bone graft
534.	Open setting of a temporomandibular joint dislocation
535.	Partial dissection of the mandible
536.	Global dissection of the mandible
537.	Intervertebral disc dissection of the spine
538.	Removal of a herniated nucleus pulposus
539.	Stiffening (arthrodesis) of the spinal joints
540.	Cervical spine decompression surgery
541.	Vertebral fracture surgery
542.	Reconstruction of multiple facial bones
543.	Reconstruction of one facial bone
544.	Dissection of a bone lesion
545.	Dissection of a bone necrosis
546.	Osteotomy without separation (excludes osteotomies in the feet and hands)
547.	Wedge osteotomy (excludes osteotomies in the feet and hands)
548.	Other osteotomy (does not include osteotomies in the feet and hands)
549.	Bone resection (excludes foot and hand resections)
550.	Closed setting of a bone fracture with internal stabilisation
551.	Open set bone fracture with internal stabilisation
552.	Closed stabilisation of the separated bone root
553.	Open stabilisation of the separated bone root
554.	Restorative treatment of poor or non-union of a bone fracture
555.	Release of the joint capsule
556.	Joint release
557.	Ligament release
558.	Open dislocation setting
559.	Dissection of the knee meniscus
560.	Hip joint stiffening (arthrodesis)
561.	Stiffening (arthrodesis) of the knee joint
562.	Shoulder joint stiffening (arthrodesis)
563.	Stiffening (arthrodesis) of the elbow joint
564.	Ligament stabilisation surgery of the knee joint
565.	Shoulder joint stabilisation surgery
566.	Suturing of the joint capsule or ligaments of the upper limb
567.	Surgery to stabilise the patella of the knee joint

No.	Surgical intervention
568.	Suturing of the joint capsule or ligaments of the lower limb
569.	Global hip replacement
570.	Partial hip replacement
571.	Carpal or metacarpal arthroplasty
572.	Metacarpophalangeal and interphalangeal arthroplasty
573.	Global wrist endoprosthesis
574.	Global endoprosthesis of the foot or toe joint
575.	Global ankle replacement
576.	Microsurgical reconstruction of vessels or nerves of the foot
577.	Finger placement
578.	Global thumb reconstruction
570.	Partial endoprosthesis of the shoulder joint
580.	Partial endoprosthesis of the elbow joint
581.	Global shoulder joint endoprosthesis
582.	Global elbow endoprosthesis
583.	Global knee replacement
584.	Global dissection of the ectopic bone
585.	Partial dissection of ectopic bone
Other	
586.	Thumb amputation
587.	Upper limb amputation at wrist level
588.	Carpal extrusion
589.	Amputation of the upper limb at the level of the forearm
590.	Extrusion at the elbow joint
591.	Upper limb amputation at arm's length
592.	Shoulder joint extrusion
593.	Upper limb amputation with scapula subtraction
594.	Toe amputation
595.	Amputation of the lower limb at the level of the ankle joint
596.	Extrusion in the ankle joint
597.	Lower limb amputation at lower leg level
598.	Amputation of the lower limb at knee level
599.	Extirpation in the knee joint
600.	Lower limb amputation at thigh level
601.	Hip joint replacement
602.	Lower limb amputation with part of the pelvis
603.	Thumb replantation
604.	Replantation of the upper limb at wrist level
605.	Replantation of the upper limb at shoulder height
606.	Toe replantation
607.	Replantation of the lower limb at the level of the ankle joint
608.	Replantation of the lower limb at the level of the lower leg
609.	Replantation of the lower limb at the level of the thigh
610.	Full face transplant