Document containing information about the insurance product

ADDITIONAL GROUP INSURANCE IN CASE OF HEALTH INJURY TO A CHILD CAUSED BY A PERSONAL ACCIDENT

Condition code: DUGP55

Version dated: 20.11.2021

This is the key information material. Full details of the insurance can be found in other documents, in particular in the general terms and conditions of supplementary group insurance for the health impairment of a child caused by a personal accident, conditions code: DUGP55 (GTC). Please read the GTCs before deciding to conclude the agreement. The definitions used in the GTCs can have meanings that deviate from their common meanings, so please make sure to pay particular attention to them. The conclusion of the agreement is voluntary.

PRODUCT INFORMATION

- is presented for information purposes,
- is not part of the insurance agreement (agreement),
- does not constitute a trade offer within the meaning of article 66 of the Civil Code,
- should not be the sole basis for a decision on insurance.

THE SCOPE AND OBJECT OF INSURANCE – WHAT IS INSURED?

We insure the event in your life, which is the occurrence of a health detriment in his or her child during the period of cover, as indicated in Appendix 1 to these GTC, which is the result of an accident occurring during the period of cover.

PRODUCT CHARACTERISTICS – WHAT ARE THE MAIN FEATURES OF OUR INSURANCE?

If your child has a health detriment, depending on the coverage you have on the date of the incident:
- we will pay you a cash benefit – which is a percentage of the sum insured, as specified in Appendix 1 to the GTC, of the current on the day of the personal accident – if you only have a cash benefit in your benefits,
- we will pay you a cash benefit – a percentage of the sum insured current at the date of the accident, as specified in Appendix 1 to these GTC, and we will grant you the right to receive medical services for your child,

Your child's medical entitlement shall be granted if you have this benefit in your scope of benefits and if you are entitled to a cash benefit of more than 4% of the sum insured due to one personal accident,
with the provision that, as a result of one accident, a child suffers several injuries as indicated in Appendix 1, we will provide one scope and limit of medical services.
For our liability to be recognised, there must be a causal link between the accident and the child's injury.

Supplementary insurance may be taken out either at the conclusion of the basic insurance - Group Insurance PZU Na Życie Plus or at its duration.

WHO CAN CONCLUDE AN AGREEMENT WITH US, WHO DO WE INSURE?

The additional insurance in concluded by the policyholder who pays the insurance premiums.
The additional insurance may be joined by insured persons who joined the basic insurance.

WHAT IS THE DURATION OF THE INSURANCE?

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 taken out between policy anniversaries, our cover continues until the next policy anniversary.

WHAT LOCATION DOES THE INSURANCE COVER?

The insurance cover operates worldwide, 24 hours a day.
Medical services are provided at designated medical facilities in Poland.

HOW AND WHEN SHOULD THE CONTRIBUTIONS BE PAID?

The premium is transferred by the policyholder together with the premium for the basic insurance.

KIEDY ROZPOCZYNA SIĘ I KOŃCZY OCHRONA UBEZPIECZENIOWA?

Coverage under the supplementary insurance commences as described in the basic insurance. Cover under the additional insurance shall only commence if the cover under the basic insurance is in force. The cover under the supplementary insurance ceases:

- from the date of termination of cover under the primary insurance;
- from the date on which we receive the policyholder's declaration that he or she is withdrawing from the additional insurance;
- on the date of termination of cover under the supplementary insurance – if not renewed;
- on the last day of the month in which you cancel the supplementary insurance;
- 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;
- as from the date of expiry of the notice period of the supplementary insurance;
- as from the date on which the supplementary insurance is terminated.

MAIN EXCLUSIONS AND LIMITEATIONS OF THE INSURANCE COVERAGE – WHAT IS NOT COVERED BY THE INSURANCE?

We will not pay the benefit in the event of:

- injury to a child as a result of an accident, if the accident occurred before the beginning of the period of protection,
- the occurrence of a heath detriment to a child which does not appear in the Table of Damages attached as Appendix 1 to the GTC.

In addition, we are not liable if a situation is not covered, it does not meet the definition set out in the agreement or our liability has ended (e.g. due to non-payment of premiums as well as in other cases indicated
in the GTC).

HOW TO TERMINATE THE AGREEMENT?

The policyholder has the right to cancel the supplementary insurance agreement within 30 days after its conclusion or, if the policyholder is an entrepreneur, within 7 days from the conclusion of the agreement. After this period, the policyholder has the right to terminate the agreement by a written notice. The policyholder has right to cancel the extension of the additional insurance by sending us a written notice of non-renewal no later than 30 days prior to its termination.

REMUNERATION FOR THE DISTRIBUTOR OF THE INSURANCE

The distributor shall receive a commission in connection with the proposed agreement.

COMPLAINTS, OBJECTIONS AND GRIEVANCES

1. A claim, complaint or grievance shall be submitted to any of our units where we serve our customers.
2. A complaint, grievance or complaint can be submitted:
   1) in writing – in person or by mail, within the meaning of the Postal Law Act, for example by writing to the following address: PZU Życie SA 18A Postępu St., 02-676 Warsaw (address for correspondence only);
   2) in writing – sent to the address for electronic delivery of PZU SA, within the meaning of the Electronic Delivery Act, from the date of entering that address into the database of electronic addresses;
   3) verbally – by phone, for instance by calling the telephone helpline on 801 102 102, or in person, confirmed by means of a protocol during a visit to our unit;
   4) electronically – by sending an e-mail to reklamacje@pzu.pl or by filling in the form at www.pzu.pl.
3. We respond to complaints, grievances and complaints as soon as possible, however no later than 30 days after the day on which we receive them. If we are unable to respond in particularly complex cases within 30 days, we will inform you:
   1) why the response is delayed;

2) what circumstances we still need to establish in order to process the case;
3) what is the new time limit for our response – it may not exceed 60 days from the date on which we received the complaint, claim or grievance.

4. We respond to complaints, claims and grievances to the person who made them:
1) in cases where the customer is a natural person – in writing, except that the response may be delivered by e-mail only at the customer's request;
2) where the customer is an entity other than those referred to in item 1 – in writing or using another durable medium.

5. If, after the complaint has been investigated:
1) we have not honoured the claims made or
2) we have accepted the claim, but within the time limit specified in the reply to that claim we have not carried out the acts we obliged to take

– the individual who has made a complaint has the right to write to the Financial Ombudsman to request this.

6. We deal with complaints, grievances and complaints in our units, which have authority over the subject matter.

7. Additional information on complaints are provided in the Act on Complaints Handling by Financial Market Entities and Financial Ombudsman and in the Act on Insurance Distribution.

8. PZU provides for the possibility of resolving conflicts out of court.

9. The entity authorized within the meaning of the Act on out-of-court handling of consumer disputes, competent for PZU SA to handle disputes out of court is the Financial Ombudsman. The website address: rf.gov.pl.

10. In the event that the insured or the policyholder, beneficiary and the rights holder are consumers, they can turn to the Municipal and District Consumer Ombudsmen for assistance.

11. PZU communicates with its consumers in Polish.

12. PZU is supervised by the Financial Supervision Authority.

GENERAL TERMS
ADDITIONAL GROUP INSURANCE
IN CASE OF HEALTH INJURY TO A CHILD
CAUSED BY A PERSONAL ACCIDENT

The table below presents the provisions of the general terms and conditions of additional group insurance in the case of a detriment to a child's health caused by a personal accident, conditions code DUGP55 (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 4-10 items 15-17 items 35-36 items 37-44 item 45
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 10 items 11-14 items 32-33 item 34 item 45

Information about the insurance are available from:

WWW **na pzu.pl**

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

GENERAL TERMS AND CONDITIONS OF ADDITIONAL GROUP INSURANCE IN THE EVENT OF DEATH OF A CHILD DUE TO A PERSONAL ACCIDENT

GTC code: DUGP55

The Board of Directors of PZU Życie SA established the general terms and conditions of additional group insurance in the event of a health detriment to a child caused by a personal accident by 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) **child** – a child which at the moment a health detriment occurred in him or her was below the age of 18 or, if in school education, she or he was below the age of 25. 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);
2) **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;
3) **insurance protection period** – the period of time during which our liability to the insured under the supplementary insurance continues;
4) **medical centre** – a clinic, a doctor's surgery or a laboratory providing medical services, a list of which is published on pzu.pl and available from the medical helpline (stated in the decision on granting the right to use the medical services) and at each of our branches;
5) **hospitalisation** – a child's stay in hospital for in-patient treatment; the first day of the hospital stay is the day of registration and the last day is the day of discharge from hospital;
6) **performance of the benefit** – the payment of a cash benefit to the insured person or the granting to the insured person of entitlement to medical services for the child in the event of an event covered by our protection;
7) **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;
8) **supplementary insurance** – the insurance agreement to which these GTC apply;
9) **basic insurance** – PZU Na Życie Plus group insurance agreement, to which the policyholder has the right to take out additional insurance;
10) **school education** – education at a public or a non-public school or at a State or non-State higher education institution on a full-time, evening or extramural basis, within the meaning of legislation on education and higher education; excluding all courses and correspondence education;
11) **medical services** – benefits listed in the appendix 2 to these GTC;
12) **health impairment** – bodily injury to a child listed in Appendix 1 to these GTC which is the result of an accident occurring during the period of our cover under the additional insurance.

2. The other terms used in these GTC are defined in the general terms and conditions of the basic insurance – the same terms retain the same meaning.

OBJECT OF INSURANCE
– czyli co ubezpieczamy

3. We insure an event in your life, which is the occurrence of a health detriment in your child.

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

4. The coverage of the Supplementary Insurance shall include an event in your life, which is the occurrence of an injury to your child, during the period of cover, as indicated in Appendix 1 to these GTC, which is the result of an accident occurring during the period of cover.
5. In the event of an incident in your life where your child suffers a heath detriment, depending on the benefit coverage you have on the date of the incident:
   1) we will pay you a cash benefit – a percentage of the sum insured current at the date of the accident, as set out in Appendix 1 to these GTC – if you only have a cash benefit within the scope of benefits;
   2) we will pay you a cash benefit which is a percentage of the sum insured current at the date of the accident, as specified in Appendix 1 to these GTC, and we will grant you the right to receive medical services for your child, subject to item 8 – if you have both of these in your benefits coverage.
6. The scope of additional insurance and the scope of the benefits are confirmed in the policy and in the individual confirmation of insurance.
7. If, due to one accident, a child suffers several injuries as defined in Appendix 1 to these GTC, we will pay a cash benefit of up to 100% of the sum insured.
8. You have the right to use the medical services until your limit is reached (which you will find in the appendix 2 to these GTC) and for no longer than 12 months after the date of the decision confirming your entitlement to medical services for the child.
9. Your child's entitlement to medical services will be granted if you have this benefit in the scope of benefits and if you are entitled to a cash benefit of more than 4% of the sum insured due to one accident, except that if your child suffers more than one injury as a result of one accident as indicated in Appendix 1, we will implement one scope and one limit of medical services.
10. The entitlement to the benefit is granted insofar as, from a medical point of view, there is a causal link between the accident and the child's injury.

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

11. 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.
12. Our liability does not cover injury to a child as a result of an accident if the accident occurred before the start of the period of cover or has occurred:
    1) in war operations;
    2) in result of the child's active participation in the acts of war, active participation in acts of terror or mass social unrest;
    3) as a result of the commission or attempted commission by the child of an act which fulfils the requirements of an intentional crime;
    4) 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
       b) not authorised for use within the meaning of road traffic regulations, or
       c) 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 after using: 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;
    5) 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;
    6) as a result of the child's self-harm or attempted suicide;
    7) 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;
    8) as a result of the use of medicinal products by the child not in accordance with the doctor's recommendation or not in accordance with the information in the leaflet accompanying the medicinal product;
    9) because the child was involved in competitive sports.
13. Our liability does not cover the occurrence of injury to a child as a result of bodily injuries that were caused by treatment or diagnostic procedures, regardless of who performed them - unless it was to treat the direct consequences of an accident.
14. We will not realise the benefit if you have deliberately contributed to the child's injury.

SUM INSURED
– what is it, and where is it indicated

15. The sum insured is the amount which we use as the basis for determining the benefit due.
16. The amount of the sum insured can is included in the policy and in the individual confirmation of insurance.
17. The sum insured does not change throughout the duration of the agreement. The sum insured is fixed, but may be changed by mutual agreement;

PREMIUM
– what does it depend on and when to pay it

18. Amount of the premium per the insured:
1) it is fixed, but may be changed by mutual agreement;
2) it depends on:
a) the sum insured,
b) scope of benefits,
c) benefit amount
d) the number, age structure and gender of those who take out insurance, as well as the type of work they do.
19. 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.
20. 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

21. Supplementary insurance may be taken out either with or during the conclusion of the basic insurance.
22. The additional insurance may be joined by insured persons who joined the basic insurance.

DURATION OF SUPPLEMENTARY INSURANCE
– i.e., which period we take out the supplementary insurance for

23. 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 taken out between policy anniversaries, our cover continues until the next policy anniversary.

EXTENSION OF SUPPLEMENTARY INSURANCE
– what are the rules for extending supplementary insurance

24. Unless otherwise agreed by either party to the agreement and provided that the primary insurance is in force, the supplementary insurance shall be automatically extended for the next policy year – under the same conditions. In this case, as an insured, you do not have to re-submit the declaration of membership.
25. 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

26. The cancellation of the additional insurance is carried out in accordance with the rules laid down in the basic insurance.
27. If the policyholder cancels the primary insurance, this results in cancellation of the secondary insurance.
28. If the policyholder withdraws from the additional insurance, this does not result in withdrawal from the primary insurance.

TERMINATION OF SUPPLEMENTARY INSURANCE
– – i.e. the manner in which the policyholder can cancel the supplementary insurance

29. The termination of the supplementary insurance is carried out in accordance with the rules outlined in the basic insurance.
30. In the event the policyholder terminates the primary insurance, this results in the termination of the additional insurance.
31. If the policyholder terminates the additional insurance, this does not result in termination of the primary insurance.

THE BEGINNING OF OUR PROTECTION
– When our insurance protection starts

32. Coverage under the supplementary insurance commences as described in the basic insurance.
33. Cover under the additional insurance shall only commence if the cover under the basic insurance is in force.

THE CESSATION OF OUR PROTECTION
– i.e. when the supplementary insurance ends

34. The cover under the supplementary insurance ceases:
1) from the date of termination of cover under the primary insurance;
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
– i.e. to whom the payment is due and to whom we grant the right to medical services

35. You have the right to receive the benefit.
36. We grant you the right to receive medical services for your child.

PROVISION OF THE HEALTH BENEFIT
– i.e. when the cash benefit will be paid out and how to start using medical services

37. If there is an injury to your child, provide us with:
1) a request for payment of a benefit,
2) the child's birth certificate;
3) a medical documentation that confirms the child's injury and the circumstances under which it occurred;
4) if you are applying for child benefit:
   a) who is under 18 years of age – the consent of the child's legal guardian to the processing of the child's personal data,
   b) who is over 18 years of age – the child's consent to the processing of his/her personal data.

38. If the documents provided are not sufficient to consider that you are entitled to a benefit and in what amount, we may ask you for other necessary documents.
39. He have the right to seek additional information by:
1) asking for the opinion of the doctor identified by us;
2) order medical tests – if necessary.

40. We cover the costs of the doctor's opinion and the medical tests we order.
41. If the documents we have requested are in a language other than Polish, you must provide us with a Polish translation. This translation must be carried out by a sworn translator.
42. On the basis of the documentation provided, we will make a decision on whether to pay a cash benefit or grant you entitlement to medical services for your child (if they are included in the scope of your insurance).
43. Once you have received the decision on your child's medical entitlement – you will be able to start using these services.
44. In order to use medical services – through us – you book an appointment for a medical service. You can do this through the available channels set out in Appendix 3 to these GTC.

FINAL PROVISIONS
– what other matters are important

45. 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 NO. 1
TO THE GENERAL TERMS AND CONDITIONS OF THE ADDITIONAL GROUP INSURANCE IN CASE OF HEALTH IMPAIRMENT OF THE CHILD CAUSED BY A PERSONAL ACCIDENT

Table of insurable injuries

No.	Type of bodily injury	Percentage of the sum insured
Bone fracture		
1.	Fracture of one or more bones of the vault or base of the skull	5
2.	Fracture of one or more facial or nasal bones	4
3.	Fracture of the right scapula	4,5
4.	Fracture of the left scapula	4,5
5.	Fracture of the right clavicle right side	4,5
6.	Fracture of the left clavicle	4,5
7.	Sternal fracture	4,5
8.	Fracture of one rib	1
9.	Fracture of two ribs	2
10.	Fracture of three ribs	3
11.	Fracture of four ribs	4
12.	Fracture of five ribs	5
13.	Fracture of six ribs	6
14.	Fracture of seven ribs	7
15.	Fracture of eight ribs	8
16.	Fracture of nine ribs	9
17.	Fracture of at least ten ribs	10
18.	Fracture of the vertebral body or arch of cervical vertebra C1	11
19.	Fracture of one or more processes of the C1 cervical vertebrae	2,5
20.	Fracture of the vertebral body or arch of cervical vertebra C2	11
21.	Fracture of one or more processes of the C2 cervical vertebrae	2,5
22.	Fracture of the vertebral body or arch of cervical vertebra C3	11
23.	Fracture of one or more processes of the C3 cervical vertebrae	2,5
24.	Fracture of the vertebral body or arch of cervical vertebra C4	11
25.	Fracture of one or more processes of the C4 cervical vertebrae	2,5
26.	Fracture of the vertebral body or arch of cervical vertebra C5	11
27.	Fracture of one or more processes of the C5 cervical vertebrae	2,5
28.	Fracture of the vertebral body or arch of cervical vertebra C6	11
29.	Fracture of one or more processes of the C6 cervical vertebrae	2,5
30.	Fracture of the vertebral body or arch of cervical vertebra C7	11
31.	Fracture of one or more processes of the C7 cervical vertebrae	2,5
32.	Fracture of the shaft or arch of the Th1 thoracic vertebrae	11
33.	Fracture of one or more processes of the Th1 thoracic vertebrae	2,5

No.	Type of bodily injury	Percentage of the sum insured
34.	Fracture of the shaft or arch of the Th2 thoracic vertebrae	11
35.	Fracture of one or more processes of the Th2 thoracic vertebrae	2,5
36.	Fracture of the shaft or arch of the Th3 thoracic vertebrae	11
37.	Fracture of one or more processes of the Th3 thoracic vertebrae	2,5
38.	Fracture of the shaft or arch of the Th4 thoracic vertebrae	11
39.	Fracture of one or more processes of the Th4 thoracic vertebrae	2,5
40.	Fracture of the shaft or arch of the Th5 thoracic vertebrae	11
41.	Fracture of one or more processes of the Th5 thoracic vertebrae	2,5
42.	Fracture of the shaft or arch of the Th6 thoracic vertebrae	11
43.	Fracture of one or more processes of the Th6 thoracic vertebrae	2,5
44.	Fracture of the shaft or arch of the Th7 thoracic vertebrae	11
45.	Fracture of one or more processes of the Th7 thoracic vertebrae	2,5
46.	Fracture of the shaft or arch of the Th8 thoracic vertebrae	11
47.	Fracture of one or more processes of the Th8 thoracic vertebrae	2,5
48.	Fracture of the shaft or arch of the Th9 thoracic vertebrae	11
49.	Fracture of one or more processes of the Th9 thoracic vertebrae	2,5
50.	Fracture of the shaft or arch of the Th10 thoracic vertebrae	11
51.	Fracture of one or more processes of the Th10 thoracic vertebrae	2,5
52.	Fracture of the shaft or arch of the Th11 thoracic vertebrae	11
53.	Fracture of one or more processes of the Th11 thoracic vertebrae	2,5
54.	Fracture of the shaft or arch of the Th12 thoracic vertebrae	11
55.	Fracture of one or more processes of the Th12 thoracic vertebrae	2,5
56.	Fracture of the vertebral body or arch of the lumbar vertebra L1	11
57.	Fracture of one or more processes of the L1 lumbar vertebrae	2,5
58.	Fracture of the vertebral body or arch of the lumbar vertebra L2	11
59.	Fracture of one or more processes of the L2 lumbar vertebrae	2,5
60.	Fracture of the vertebral body or arch of the lumbar vertebra L3	11
61.	Fracture of one or more processes of the L3 lumbar vertebrae	2,5
62.	Fracture of the vertebral body or arch of the lumbar vertebra L4	11
63.	Fracture of one or more processes of the L4 lumbar vertebrae	2,5
64.	Fracture of the vertebral body or arch of the lumbar vertebra L5	11
65.	Fracture of one or more processes of the L5 lumbar vertebrae	2,5
66.	Sacral bone fracture	11
67.	Coccyx fracture	3,5
68.	Single or multiple unstable fracture of the pelvis	10
69.	Single or multisite stable fracture of the pelvis	4,5
70.	Single or multiple open fracture of the right humerus	7
71.	Single or multiple open fracture of the left humerus	7
72.	Single or multiple fracture other than open fracture of the right humerus	5

No.	Type of bodily injury	Percentage of the sum insured
73.	Single or multiple fracture other than open fracture of the left humerus	5
74.	Single or multiple open fracture of one or both bones of the right forearm	4
75.	Single or multiple open fracture of one or both bones of the left forearm	4
76.	Single or multiple fracture other than open fracture of one or both bones of the right forearm	2
77.	Single or multiple fracture other than open fracture of one or both bones of the left forearm	2
78.	Single or multiple open fracture of one or both bones of the right forearm	3
79.	Single or multiple open fracture of one or more bones of the left wrist or metacarpus	3
80.	Single or multiple fracture other than open fracture of one or more bones of the wrist or right metacarpal	1
81.	Single or multiple fracture other than open fracture of one or more bones of the wrist or left metacarpal	1
82.	Single or multiple open fracture of one or more phalanges of the I finger of the right hand	3
83.	Single or multiple open fracture of one or more phalanges of the I finger of the left hand	3
84.	Single or multiple fracture other than open fracture of one or more phalanges of the I finger of the right hand	1
85.	Single or multiple fracture other than open fracture of one or more phalanges of the I finger of the left hand	1
86.	Single or multiple open fracture of one or more phalanges of the II finger of the right hand	2
87.	Single or multiple open fracture of one or more phalanges of the II finger of the left hand	2
88.	Single or multiple fracture other than open fracture of one or more phalanges of the II finger of the right hand	1
89.	Single or multiple fracture other than open fracture of one or more phalanges of the II finger of the left hand	1
90.	Single or multiple open fracture of one or more phalanges of the III finger of the right hand	2
91.	Single or multiple open fracture of one or more phalanges of the III finger of the left hand	2
92.	Single or multiple fracture other than open fracture of one or more phalanges of the III finger of the right hand	1
93.	Single or multiple fracture other than open fracture of one or more phalanges of the III finger of the left hand	1
94.	Single or multiple open fracture of one or more phalanges of the IV finger of the right hand	2
95.	Single or multiple open fracture of one or more phalanges of the IV finger of the left hand	2
96.	Single or multiple fracture other than open fracture of one or more phalanges of the IV finger of the right hand	1
97.	Single or multiple fracture other than open fracture of one or more phalanges of the IV finger of the left hand	1
98.	Single or multiple open fracture of one or more phalanges of the V finger of the right hand	2
99.	Single or multiple open fracture of one or more phalanges of the V finger of the left hand	2
100.	Single or multiple fracture other than open fracture of one or more phalanges of the V finger of the right hand	1
101.	Single or multiple fracture other than open fracture of one or more phalanges of the V finger of the left hand	1
102.	Single or multiple fracture of the right femur	10
103.	Single or multiple fracture of the left femur	10
104.	Fracture of the right patella	4
105.	Fracture of the left patella	4
106.	Single or multiple fracture of one or both bones of the right lower leg	7
107.	Single or multiple fracture of one or both bones of the left lower leg	7
108.	Single or multiple open fracture of one or both bones of the right midfoot	4
109.	Single or multiple open fracture of one or more bones of the left wrist or metacarpus	4

No.	Type of bodily injury	Percentage of the sum insured
110.	Single or multiple fracture other than open fracture of one or more bones of the right tarsus or metatarsus	2
111.	Single or multiple fracture other than open fracture of one or more bones of the left tarsus or metatarsus	2
112.	Fracture of one or more phalanges of the I toe of the right foot	2,5
113.	Fracture of one or more phalanges of the I toe of the left foot	2,5
114.	Fracture of one or more phalanges of the II toe of the right foot	2
115.	Fracture of one or more phalanges of the II toe of the left foot	2
116.	Fracture of one or more phalanges of the third toe of the right foot	2
117.	Fracture of one or more phalanges of the III toe of the left foot	2
118.	Fracture of one or more phalanges of the IV toe of the right foot	2
119.	Fracture of one or more phalanges of the IV toe of the left foot	2
120.	Fracture of one or more phalanges of the V toe of the right foot	2
121.	Fracture of one or more phalanges of the V toe of the left foot	2
Sprains and dislocations of joints		
122.	Dislocation of the I finger of the right hand	2
123.	Dislocation of the I finger of the left hand	2
124.	Dislocation of the II finger of the right hand	2
125.	Dislocation of the II finger of the left hand	2
126.	Dislocation of the III finger of the right hand	2
127.	Dislocation of the III finger of the left hand	2
128.	Dislocation of the IV finger of the right hand	2
129.	Dislocation of the IV finger of the left hand	2
130.	Dislocation of the V finger of the right hand	2
131.	Dislocation of the V finger of the left hand	2
132.	Dislocation of the right elbow joint	3
133.	Dislocation of the left elbow joint	3
134.	Dislocation of the right shoulder-blade joint	3
135.	Dislocation of the left shoulder-blade joint	3
136.	Dislocation or sprain of the right ankle joint	4
137.	Dislocation or sprain of the left ankle joint	4
138.	Dislocation or sprain of the right knee joint – excluding dislocation of the patella	5
139.	Dislocation or sprain of the left knee joint – excluding dislocation of the patella	5
140.	Dislocation of the right hip joint	10
141.	Dislocation of the left hip joint	10
Tooth damage		
142.	Fracture of one permanent tooth	0,5
143.	Fracture of two permanent teeth	1
144.	Fracture of three permanent teeth	1,5

No.	Type of bodily injury	Percentage of the sum insured
145.	Fracture of four permanent teeth	2
146.	Fracture of five permanent teeth	2,5
147.	Fracture of six permanent teeth	3
148.	Fracture of seven permanent teeth	3,5
149.	Fracture of eight permanent teeth	4
150.	Fracture of nine permanent teeth	4,5
151.	Fracture of at least ten permanent teeth	5
152.	Total loss of one permanent tooth	1
153.	Total loss of two permanent teeth	2
154.	Total loss of three permanent teeth	3
155.	Total loss of four permanent teeth	4
156.	Total loss of five permanent teeth	5
157.	Total loss of six permanent teeth	6
158.	Total loss of seven permanent teeth	7
159.	Total loss of eight permanent teeth	8
160.	Total loss of nine permanent teeth	9
161.	Total loss of at least ten permanent teeth	10
Loss of body parts		
162.	Global loss of I finger of the right hand (all two phalanges)	22
163.	Global loss of the I finger of the left hand (all two phalanges)	22
164.	Global loss of the II finger of the right hand (all three phalanges)	8
165.	Global loss of the II finger of the left hand (all three phalanges)	8
166.	Global loss of the III finger of the right hand (all three phalanges)	8
167.	Global loss of the III finger of the left hand (all three phalanges)	8
168.	Global loss of the IV finger of the right hand (all three phalanges)	8
169.	Global loss of the IV finger of the left hand (all three phalanges)	8
170.	Global loss of the V finger of the right hand (all three phalanges)	8
171.	Global loss of the V finger of the left hand (all three phalanges)	8
172.	Total loss of right hand at wrist or metacarpal level with all fingers	50
173.	Total loss of left hand at wrist at metacarpal level with all fingers	50
174.	Total loss of the right upper limb at the elbow joint or at the level of the forearm	60
175.	Total loss of the left upper limb at the elbow joint or at the level of the forearm	60
176.	Global loss of the right upper limb at the shoulder-blade joint or at shoulder height	80
177.	Global loss of the right upper limb at the shoulder-blade joint or at shoulder height	80
178.	Total loss of the I toe of the right foot (entire two phalanges)	15
179.	Total loss of the I toe of the left foot (all two phalanges)	15
180.	Global loss of the II toe of the right foot (all three phalanges)	3
181.	Global loss of the II toe of the left foot (all three phalanges)	3

No.	Type of bodily injury	Percentage of the sum insured
182.	Global loss of the III toe of the right foot (all three phalanges)	3
183.	Global loss of the III toe of the left foot (all three phalanges)	3
184.	Global loss of the IV toe of the right foot (all three phalanges)	3
185.	Global loss of the IV toe of the left foot (all three phalanges)	3
186.	Global loss of the V toe of the right foot (all three phalanges)	3
187.	Global loss of the V toe of the left foot (all three phalanges)	3
188.	Total loss of right foot at metatarsal level with all toes	40
189.	Total loss of left foot at metatarsal level with all toes	40
190.	Total loss of the right lower limb at the ankle joint (upper or lower), or at the level of the shin or knee joint	60
191.	Total loss of the left lower limb at the ankle joint (upper or lower), or at the level of the shin or knee joint	60
192.	Total loss of right lower limb at hip or thigh level	75
193.	Total loss of left lower limb at hip or thigh level	75
194.	Total loss of vision in the right eye	50
195.	Total loss of vision in the left eye	50
196.	Complete loss of hearing in the right ear	30
197.	Total loss of hearing in left ear	30
198.	Total loss of the right auricle	15
199.	Total loss of the left auricle	15
200.	Total loss of nose	20
201.	Total loss of the spleen	20
202.	Total loss of the right kidney	35
203.	Total loss of the left kidney	35
204.	Total loss of the uterus	40
205.	Total loss of right ovary	20
206.	Total loss of left ovary	20
207.	Total loss of right testicle	20
208.	Total loss of the left testicle	20
209.	Total loss of speech	100
Paresis and paralysis of the limbs		
210.	Palsy or paresis of at least two limbs with a Lovett scale severity of 0 to 2 degrees	100
Burns and frostbite		
211.	Second-degree burn up to 1% of the body area	1,5
212.	Second-degree burn greater than 1% to 15% of the body area	4
213.	Second-degree burn greater than 15% to 30% of the body area	7
214.	Second-degree burns over 30% of the body area	20
215.	Third-degree burn up to 5% of the body area	4
216.	Third-degree burn greater than 5% to 10% of the body area	10

No.	Type of bodily injury	Percentage of the sum insured
217.	Third-degree burns over 10% of the body area	20
218.	Respiratory tract burns treated during hospital stay	20
219.	II or III degree frostbite of one finger of the hand or one toe of the foot	1,5
220.	II or III degree frostbite of two or more fingers or toes, or frostbite of the nose, or frostbite of the ear	4
Other defects		
221.	Coma, lasting longer than 30 days	100
222.	Suspected concussion or concussion which has been the cause of hospital treatment lasting at least 2 days in hospital	1
223.	Suspected concussion or concussion which has been the cause of hospital treatment lasting at least 3 days in hospital	2
224.	Suspected concussion or concussion which has been the cause of hospital treatment lasting at least 4 days and longer in hospital	3
225.	Sudden gas poisoning which was the reason for hospital treatment lasting at least 1 day of hospital stay	5
226.	Sudden poisoning by chemical substances or products which was the reason for hospital treatment lasting at least 1 day of hospital stay	5
227.	Electrocution which has been the cause of hospital treatment lasting at least 1 day in hospital	5
228.	Lightning strike which was the reason for hospital treatment lasting at least 1 day in hospital	5
229.	A bite that was the cause of hospital treatment lasting at least 1 day in hospital	10
230.	A bite that was the cause of hospital treatment lasting at least 1 day of hospitalization	10
231.	A bite that was the cause of hospital treatment lasting at least 1 day of hospital stay	10
232.	Injury that is not listed in the table rows above (regardless of the number of such injuries due once per policy year), provided that the treatment included at least two medical visits.	0,5

APPENDIX NO. 2
TO THE GENERAL TERMS AND CONDITIONS OF THE ADDITIONAL GROUP INSURANCE IN CASE OF HEALTH IMPAIRMENT OF THE CHILD CAUSED BY A PERSONAL ACCIDENT

Scope of medical services

Medical treatment		Limit	Description
Outpatient consultations related to	paediatric surgery	3 consultations – total limit for all consultations	1. Outpatient consultations take place in a medical facility and may include according to the profile of the specific specialty: physical examination of the patient, taking a medical history, making a diagnosis, recommendations for treatment, e-ZLAs and referrals related to further diagnostic and treatment procedures. 2. You can benefit from outpatient consultations without a referral, at our designated medical facility. 3. Telemedicine consultations are carried out by telephone, a digital chat or video chat and may include, according to the profile of the speciality: taking a medical history, making a diagnosis, recommending treatment issuing e-prescriptions, e-ZLAs and referrals related to further diagnostic and treatment procedures. 4. You can use telemedicine consultations without a referral via telecommunications lines. 5. In order to carry out a telemedical consultation, we will create an individual account for you on the website. We will provide you with the details you need to register for your account. 6. As part of the outpatient and telemedicine consultations we do not organise and do not cover the costs of consulting medical doctors with a PhD, habilitation or professor academic degrees.
	general surgery		
	internal diseases		
	physiotherapy		
	gynaecology and obstetrics		
	paediatric gynaecology		
	laryngology		
	paediatric laryngology		
	general medicine		
	nephrology		
	paediatric nephrology		
	neurosurgery		
	paediatric neurosurgery		
	neurology		
	paediatric neurology		
	ophthalmology		
	paediatric ophthalmology		
	orthopaedics and traumatology of the musculoskeletal system		
	paediatric orthopaedic		
	paediatrics		
	medical rehabilitation		
	urology		
	paediatric urology		
	psychology		
Telemedicine consultations in the scope of	internal diseases		
	gynaecology and obstetrics		
	orthopaedics and traumatology of the musculoskeletal system		
	paediatric orthopaedic		
	paediatrics		
	nursing		
	psychology		
	child psychology		

Medical treatment		Limit	Description
Outpatient rehabilitation	passive exercise	15 procedures – total limit for all listed outpatient rehabilitation procedures	You can benefit from outpatient rehabilitation on the basis of a referral from a doctor or physiotherapist at a medical facility we have indicated.
	active sling exercise		
	active free exercise		
	active exercise with resistance		
	passive and assisted exercises		
	exercises instruction		
	isometric exercise		
	general exercise		
	sensorimotor/stability exercises		
	special exercises		
	short-wave diathermy		
	microwave diathermy		
	lymphatic drainage		
	electrostimulation		
	electroplating		
	iontophoresis		
	bubble/spin bath of the limbs		
	local cryotherapy		
	spot laser therapy		
	magnetotherapy		
	global hydro massage		
	local hydro massage		
	underwater massage		
	dry full massage		
	dry partial massage		
	neuromuscular re-education methods		
	mobilisations and manipulations,		
	neuromobilisations		
	diadynamic currents		
	interference currents		
	TENS currents		
	Tarbert currents		
	sollux		
	local ultrasound		
	ultraphonoresis / phonophoresis		
	stretches		
	treatments in the cryochamber		

APPENDIX NO. 3
TO THE GENERAL TERMS AND CONDITIONS OF THE ADDITIONAL GROUP INSURANCE IN CASE OF HEALTH IMPAIRMENT OF THE CHILD CAUSED BY A PERSONAL ACCIDENT

– HOW TO REPORT AN EVENT AND RECEIVE A BENEFIT

HOW CAN YOU REPORT AN INCIDENT?



through the helpline 801 102 102 or 22 566 55 55 (charges as per operator's tariff)



in person at a PZU Division



in writing by post, by e-mail



via pzu.pl

If a benefit is due, we will either pay a cash benefit or we will pay a cash benefit and issue a decision on your child's medical entitlement.
You will receive the number of the medical hotline in your decision.

HOW TO UTILISE THE MEDICAL SERVICES?

You can benefit from the medical services when you receive your child's medical entitlement decision. In order to do so:



call the 24-hour medical hotline (you are going to receive the hotline number in your decision)