



**SPECIAL TERMS AND CONDITIONS
FOR VOLUNTARY HEALTH INSURANCE AGAINST SERIOUS ILLNESSES AND SURGICAL INTERVENTIONS**

GENERAL PROVISIONS

Article 1

The Special Terms and Terms and Conditions of Voluntary Health Insurance against Critical Illnesses and Surgical Interventions (hereinafter: Terms and Terms and Conditions) together with the General Terms and Terms and Conditions of Voluntary Health Insurance (hereinafter: General Terms and Terms and Conditions) shall form an integral part of any Contract on Voluntary Health Insurance against Critical Illnesses and/or Surgical Interventions i.e. surgeries (hereinafter: Contract) concluded by and between the Policyholder (hereinafter: the Policyholder) that is the Insured and Dunav Insurance Company j.s.c.. (Hereinafter: Insurer).

Under the Terms and Terms and Conditions hereof, the Insured shall be entitled to cash compensations not covered by the rights under compulsory health insurance scheme.

The Terms and Conditions hereof shall regulate the rights and obligations of the Policyholder, Insured and Insurer in the event of:

- 1) Critical illnesses and/or
- 2) Surgical interventions, that is surgeries (hereinafter: Surgical interventions)

GENERAL DEFINITIONS

Article 2

For the purposes of the Terms and Terms and Conditions hereof, particular terms shall be deemed as follows:

Insured event - occurrence of critical illnesses or performing surgical intervention defined under the Terms and Terms and Terms and Conditions.

Sum insured – agreed maximum amount of Insurer's obligations stated in the Insurance Policy;

Continuous coverage – repeated conclusion of the Insurance Contract for a person that has already been covered under a previous policy with the same Insurer or, by way of exception, with another Insurer, with no cover interruptions between two policies or with an interruption not exceeding 3 (three) months;

Waiting period – agreed period of time at the beginning of the contractual insurance period during which the Policyholder shall be obliged to pay the premium and the Insurer shall not be obliged to pay out indemnity, regardless of any insured event stipulated under the Terms and Conditions having occurred within such period.

Medical emergency – a sudden illness or injury that may, if not submitted to a direct and prompt medical assistance in the form of surgical intervention, become life-threatening to the Insured and/or lead to an irreparable or critical impairment of the Insured's his health or his death;

Occurrence – any sudden event beyond the will of the Insured that, by affecting the body of the Insured mostly from the outside and abruptly, results in the impairment of the Insured's health that calls for a surgical intervention.

ELIGIBILITY FOR INSURANCE

Article 3

Under the Terms and Terms and Conditions hereof, the eligible Insured shall be a person named in the insurance Policy, the Policy Schedule and/or other documents pursuant to the agreement between the contracting parties, for which person the agreed insurance premium (hereinafter: the Premium) has been paid.

Under the Terms and Conditions hereof, the eligible Insured can be a person already possessing a status of the Insured under compulsory health insurance scheme as well as a person not covered by compulsory health insurance or not having joined a compulsory health insurance scheme.

The Insured may at the same time be the Policyholder.

CONCLUSION OF CONTRACT

Article 4

The contract may be concluded as individual or group.

The contract shall be concluded on the basis of a previous written application (hereinafter: the Application) filled out on a Form of the Insurer. Integral part of the Application Form with individual insurance is also the Questionnaire on the Insured's state of health (hereinafter: Questionnaire), which is filled out by the Insured. The Application shall form an integral part of the Contract.

The group Insurance Contract shall be stipulated according to the Schedule of the Policyholder. The insurance shall cover all persons for whom the Policyholder has paid the annual premium for the insurance period.

When contracting the group insurance where the Insured is liable to pay the premium, the Insured's approval in writing shall be mandatory.

The group Insurance Contract can be stipulated for not less than 10 Insured.

Persons covered under the group insurance are named in the Policy Schedule or in other records in line with the agreement between the contracting parties.

INSURANCE DOCUMENT

Article 5

The Insurer shall issue the insurance document (hereinafter: Document) corresponding to the insurance period indicated in the Policy to each Insured not later than 60 days after signing the Policy.

Document under paragraph 1 of the Article hereof, together with identification document with photograph, shall serve as a proof of status of insured and to exercise the rights agreed with the Insurer.

INSURED EVENT



Article 6

Under the Terms and Conditions hereof, the Insured event shall be deemed a critical illness of the Insured defined under the Table of Critical Illnesses (agreed standard or standard and additional cover) occurring and diagnosed for the first time during the stipulated insurance period, i.e. surgical intervention defined under the Table of Surgical Interventions, performed on the Insured during the insurance period, provided the need for the surgical intervention appeared during the insurance period.

If the Insured already suffered from a critical illness that has been agreed and defined under the Terms and Conditions, the illness of the same type occurring on the same or another organ shall not be deemed the new critical illness and the liability of the Insurer shall be excluded.

Insured event shall not be deemed a critical illness diagnosed and/or a surgical intervention performed in the first three months after the insurance inception, in terms of Article 14 of the Terms and Conditions hereof.

THE INSURER'S LIABILITY

Article 7

The Insurer shall be obliged to pay the agreed sum insured or any portion thereof in the event of a critical illness, that is surgical interventions, in terms of Article 8 and Article 9 of the Terms and Conditions hereof.

The sum insured for critical illnesses and/or surgical intervention specified in the Policy shall be the maximum amount of Insurer's liability for any one Insured person.

Under the Terms and Conditions hereof, during the insurance year, indemnity is payable for multiple surgical interventions or diagnosed critical illnesses but not exceeding 100% of the stipulated sum insured for any one agreed risk.

In the event that the performed surgical intervention is a consequence of a critical illness for which a percentage of sum insured under Article 8 of the Terms and Conditions hereof has already been paid, the Insurer shall be obliged to effect payment of 50% of the sum insured specified for a particular surgical intervention.

In the event that a critical illness caused the surgical intervention for which a percentage of sum insured under Article 9 of the Terms and Conditions hereof has already been paid, the Insurer is obliged to effect payment of 50% of the sum insured specified for that particular illness.

In the event that the critical illness is the consequence of a surgical intervention for which a percentage of sum insured under Article 9 of the Terms and Conditions hereof has already been paid, the Insurer is obliged to effect payment of 50% of the sum insured specified for that particular illness.

In the event that during the surgical intervention the Insured is diagnosed with a critical illness of which the Insured was unaware and there is no causal connection between such illness and the intervention, the Insurer shall pay a percentage of the sum insured specified for that particular illness under the Article 8 of the Terms and Conditions hereof.

Where more than one surgical intervention covered by insurance is performed in one act of surgery, the entire sum insured provided for the surgical intervention of the highest percentage will be paid out. For each subsequent surgical intervention, 50% of the sum insured stipulated for that particular surgical intervention will be paid out, but not to exceed, in the aggregate, the contractual sum insured indicated in the insurance Policy for surgical interventions.

If the performed surgical intervention is a consequence of a previously performed surgical intervention covered by insurance (excluding biopsy), the Insurer shall be obliged to pay 50% of the sum insured stipulated in the Table of Surgical Interventions, for such second surgical intervention.

If a critical illness is established as a consequence of a previously diagnosed critical illness covered by insurance, for the second critical illness, the Insurer shall be obliged to pay 50% of the sum insured stipulated in the Table of Critical Illnesses.

The Insurer shall undertake to pay the agreed sum insured or a portion thereof within 14 days from the date when the Insurer has established the existence and amount of his liability.

Article 8

The Insurer is obliged, except in cases provided under the Article 14 of the Terms and Conditions hereof, to effect payment of the entire sum insured (100%) or a particular percentage of the sum insured for the following illnesses from the Table:

TABLE OF CRITICAL ILLNESSES

STANDARD COVER

1.	Invasive cancer - uncontrolled, abnormal growth and spreading of malignant cells catching the surrounding normal tissue and lymph glands. Insurance coverage includes all types of invasive cancer which, according to the tenth edition of the International Classification of Diseases (ICD-10) are classified under the codes C00-C97, excluding the code C44, including leukaemia, malignant lymphoma, skin lymphoma, Hodgkin's disease, malignant changes in bone marrow and sarcoma. Histopathological diagnosis is required. The clinical diagnosis is accepted only in the case when the competent doctor is not in a position to make a histopathological diagnosis because that is not possible or is life-threatening and/or when there are enough medical findings that confirm the diagnosis, because the patient is undergoing a <i>cancer or carcinoma in situ</i> treatment. Excluded are benign tumours, non-invasive cancer, all premalignant conditions, prostate cancer that has not reached the stage of development T2N0M0 according to TNM classification, papillary tumours of the thyroid gland limited to the organ, all tumours in the presence of HIV infection, primary skin cancer (ICD-10, code C44) excluding malignant melanoma that has spread beyond the epidermis (phase higher than I-A).	100%
2.	Myocardial infarction - irreversible damage a part of the heart muscle, caused by obstruction of one	100%



	or more coronary arteries, due to insufficient blood supply caused by atherosclerosis, spasm, thrombus or embolus. The diagnosis must be confirmed: by the presence of typical clinical symptoms of acute myocardial infarction, new changes on the ECG characteristic of myocardial infarction and an increase in enzymes value and specific markers of myocardial damage, including CPK-MB, above the generally accepted level.	
3.	Pulmonary embolism with pulmonary infarction - sudden blockage of the pulmonary artery by embolus or thrombus that, due to insufficient blood supply distal to the blockage leads to permanent damage to lung tissue - pulmonary infarction.	100%
4.	Stroke - an acute cerebrovascular event caused by a cerebral infarction, intracranial blood vessel thrombosis, haemorrhage or embolism of extracranial origin with acute onset of neurological symptoms and new objective permanent neurological deficits that persist for at least 3 months from the date of diagnosis. Acute onset of symptoms and new neurological deficits must be confirmed by computerised tomography (CT) of the brain or magnetic resonance imaging (MRI) of the brain. Excluded are transient ischemic attack (TIA), any reversible ischemic neurological deficit, vertebrobasilar ischemia, cerebral symptoms due to migraine, cerebral damage caused by head injury or hypoxia, vascular disease affecting only the optic nerve or vestibular function.	100%
5.	Encephalitis - a severe inflammatory disease of brain tissue caused by a bacterial or viral infection, with a significant permanent neurological deficit without the possibility of recovery.	100%
6.	Bacterial meningitis - a severe inflammatory disease of the meninges or spinal cord, with a significant permanent neurological deficit without a possibility of recovery.	100%
7.	Fully developed clinical picture of AIDS - in the presence of HIV infection (human immunodeficiency virus) confirmed by a positive test for HIV antibodies. The person must have a CD4 cell count less than 200 / μ L in the presence of one or more criteria: weight loss greater than 10% in the previous 6 months, Kaposi's sarcoma, pneumonia caused by bacteria <i>Pneumocystis carinii</i> , progressive multifocal leukoencephalopathy, active tuberculosis, less than 1000 lymphocytes / μ L, malignant lymphoma.	100%
8.	Lyme disease - a late stage of development (II or III) of a disease caused by the bacterium <i>Borrelia burgdorferi</i> , which is transmitted by a tick bite. It implies the existence of irreversible damage to the joints or heart muscle and/or the irreversible damage to the central nervous system (encephalopathy), which is sometimes accompanied by damage to peripheral or cranial nerves.	50%
9.	Fulminant viral hepatitis B or hepatitis C - massive liver necrosis of viral origin, leading to liver failure, with rapid reduction in liver size due to necrosis that destroys complete liver lobules, rapid deterioration of liver function tests and increased	50%

	jaundice. Excluded is the existence of hepatitis virus infection or <i>hepatitis B</i> or <i>hepatitis C</i> virus transmission status without the above diagnostic criteria.	
10.	Chronic pulmonary insufficiency as a consequence of chronic obstructive pulmonary disease, complicated pneumonia, cystic fibrosis or stroke - chronic irreversible impairment of pulmonary function, where all the above criteria are present: continuous oxygen therapy at home is necessary; there is permanent impairment of lung function with FEV1 consistently less than 1 (one) liter; arterial blood oxygen partial pressure is 55 mmHg or less; there is dyspnea at rest.	50%
11.	Chronic renal insufficiency (renal failure) - chronic irreversible impairment of the function of both kidneys, due to which it is necessary to undergo a hemodialysis / peritoneal dialysis at least once a week, i.e. there is a need for kidney transplantation.	50%
12.	Chronic liver insufficiency of non-viral origin (cirrhosis of the liver) - chronic irreversible impairment of liver function, with mandatory presence of all these criteria: persistent jaundice, ascites and hepatic encephalopathy.	50%
13.	Chronic aplastic anaemia - chronic irreversible bone marrow insufficiency, which results in anaemia, neutropenia and thrombocytopenia, due to which regular transfusion of blood products, agents for stimulating erythropoiesis or immunosuppressive agents is necessary, i.e. there is a need for bone marrow transplantation. In addition to bone marrow hypocellularity, at least 2 of 3 values must be present: neutrophil count $\leq 0.5 \times 10^9 / L$, reticulocyte count $\leq 20 \times 10^9 / L$, or platelet count $\leq 20 \times 10^9 / L$.	50%
14.	Addison's disease - a consequence of mutual destruction of the adrenal cortex, most often caused by infection or autoimmune reaction, due to which there is a reduction or complete cessation of the secretion of adrenal cortex hormones and the appearance of characteristic symptoms.	50%
15.	Benign brain tumour - intracranial brain tumour, limited to brain tissue, meninges, cranial nerves or pituitary gland, by its location life-threatening, which has led to a permanent neurological deficit with persistent clinical symptoms. Cysts, granulomas, malformations of arteries or veins of the brain, hematomas, spinal cord tumours, and calcifications are excluded.	50%
16.	Generalized tonic-clonic epileptic seizure (Grand mal type epilepsy) - a neurological disease caused by excessive activity of brain cells, which occasionally leads to motor, sensory, psychological and mental disorders, with mandatory loss of consciousness.	50%
17.	Ectopic pregnancy with rupture of the fallopian tube / uterus - an ectopic pregnancy that develops in the fallopian tube, which led to a rupture of the	50%



fallopian tube or uterine horn during the second or third month of pregnancy and which had to be treated surgically (laparoscopy, laparotomy). All other conditions that do not meet the foregoing definition are excluded.	
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If specially contracted and provided payment of the additional premium, the additional cover may be agreed supplementary to a standard cover, to include following illnesses:

ADDITIONAL COVER

1.	Cardiomyopathy - persistent decrease in ventricular function with irreversible physical damage to the heart muscle, with severe limitation in performing daily physical activities, corresponding to stage <i>III</i> or <i>IV</i> of the <i>NYHA</i> (New York Heart Association) classification of the cardiac insufficiency.	50%
2.	Primary pulmonary hypertension - a disease with makeable enlargement of the right ventricle, confirmed by cardiac catheterization during which pulmonary pressure greater than 30 mmHg was recorded, resulting in permanent irreversible physical damage to the heart muscle, with severe limitation in daily physical activity, corresponding to stage <i>III</i> or <i>IV</i> of the <i>NYHA</i> (New York Heart Association) classification of cardiac insufficiency.	50%
3.	Pulmonary embolism without pulmonary infarction - sudden blockage of the pulmonary artery by an embolus or thrombus that did not lead to permanent damage to the lung tissue that is pulmonary infarction.	25%
4.	Non-invasive cancer - focal, localized, autonomic, uncontrolled growth of malignant cells limited to the layer of tissue from which it originated, that has not yet spread to healthy surrounding tissue or other parts of the body. Insurance coverage includes the following types of non-invasive cancer, which have previously been treated with surgical removal of the malignant tumour: primary non-invasive carcinoma (<i>carcinoma in situ</i>), primary prostate cancer in stage <i>T1a</i> , <i>T1b</i> or <i>T1c</i> , malignant skin melanoma that has not yet spread beyond the epidermis (stage <i>I-A</i> according to the <i>TNM</i> classification or equivalent stage according to the Clark or Breslov classification). Histopathological diagnosis is necessary. Excluded all benign tumours, all types of non-invasive cancer, <i>carcinoma in situ</i> , dysplasia and all premalignant conditions not mentioned in the previous paragraph, all tumours in the presence of <i>HIV</i> virus, any primary skin cancer (including <i>C44</i> and <i>D04</i> according to <i>ICD-10</i>), except for malignant melanoma in the stage <i>I-A</i> according to the <i>TNM</i> classification, stated in the foregoing paragraph.	25%
5.	Blindness - total, irreversible loss of vision function on both eyes, which is a consequence of a disease. Excluded is blindness resulting from an accident.	50%

6.	Deafness - total, irreversible loss of hearing function on both ears, which is a consequence of a disease. Excluded is deafness resulting from an accident.	50%
7.	Speech loss - a total, irreversible loss of speech function, which is a consequence of a disease and which is present during a continuous period of 12 months. Excluded is speech loss caused by an accident or psychiatric illness.	50%
8.	Motor neuron disease (spinal muscular atrophy, progressive bulbar paralysis, amyotrophic lateral sclerosis, primary lateral sclerosis) , with the presence of progressive degeneration of corticospinal pathways and anterior horn cells of the spinal cord or bulbar efferent neurons, with irreversible functional neurological impairment and damage to the motor function that persists continuously for at least 3 months	50%
9.	Severe consequences of systemic inflammatory response syndrome (sepsis) - the existence of systemic inflammatory response syndrome of the organism to the presence of infection of bacterial, fungal or viral origin that led to irreversible physical and functional damage to internal organs (lungs, brain, liver, kidneys and heart).	50%
10.	Alzheimer's disease - progressive degenerative brain disease, with loss of intellectual capacity that includes impaired memory, judgement and reasoning, with changes in mood and behaviour, resulting in a significant reduction in mental and social functioning.	25%
11.	Multiple sclerosis - a progressive disease of brain and spinal cord caused by loss of myelin sheath of nerve fibres, resulting in impaired motor or sensory function, with symptoms of damage to the optic nerve, brainstem or spinal cord, persisting for at least 6 continuous months. There is a clinical history of multiple episodes of exacerbations and remissions of motor or sensory deficits.	100%
12.	Parkinson's disease - a disease of the central nervous system with permanent progressive clinical deterioration of motor function, with associated tremor, muscle rigidity, bradykinesia (abnormal slowness of movement, slowness in spontaneous physical and mental reactions) and postural instability.	25%
13.	Systemic Lupus erythematosus - an autoimmune disease, which is considered a critical disease exclusively when the biopsy has proven the presence of lupus nephritis of class <i>III</i> , <i>IV</i> , <i>V</i> or <i>VI</i> according to the <i>ISN/RPS</i> classification of lupus nephritis (<i>International Society of Nephrology / Renal Pathology Society</i>). Other forms of lupus disease are excluded.	25%
14.	Ankylosing spondylitis (Morbus Bechterewi) - a chronic, progressive, inflammatory disease of the musculoskeletal system with permanent damage to	25%



	the joints and ligaments of the pelvis, spine, hips and shoulders, which leads to ankyloses of the affected joints with permanent immobility of the spine, nervous system damage and fracture of the spinal column.	
15	Rheumatoid arthritis - an autoimmune chronic inflammatory disease of the joints with progressive damage to the synovial membranes, which has led to a significant deformity of at least two larger joints.	25%
16	Severe consequences of perforation of the gastrointestinal tract (oesophagus, stomach, duodenum, small intestine, colon, gallbladder) , which occurred as a result of disease, accident (injury, presence of a foreign body, poisoning) or iatrogenic (consequence of administration of corticosteroid or immunosuppressive therapy, consequence of performing endoscopic and surgical procedures), which leads to irreversible physical and functional damage to the affected part of the gastrointestinal tract. Excluded are perforations in the presence of a malignant tumour.	25%
17	Cushing's syndrome - a consequence of increased secretion of hormones of the adrenal cortex, due to any cause.	50%
18	Benign pheochromocytoma - a benign tumour of the adrenal gland that secretes large amounts of catecholamines. The most severe symptom is severe hypertension.	50%
19	Graves-Basedow's disease - a thyrotoxic crisis caused as a complication of polynodose goiter, which is based on increased secretion of thyroid hormones.	50%

Article 9

The Insurer shall, save in cases defined under Article 14 of Terms and Conditions hereof, be obliged to pay total sum insured (100%) or corresponding percentage of the Sum Insured for the surgical interventions listed in the Table:

TABLE OF SURGICAL INTERVENTIONS

1. Nervous system

No.	Surgical intervention / Procedure	%
1	Arterial bypass of intracranial aneurysm	80%
2	Microsurgical obliteration of intracranial aneurysm (clipping)	40%
3	Endovascular therapy of intracranial aneurysm (coiling)	40%
4	Evacuation of contents and drainage of intracranial infection / haemorrhage (intracerebral, subarachnoid, subdural)	80%
5	Evacuation of contents and drainage of extradural infection / haemorrhage	30%
6	Surgical removal of meningeal tumours / cysts	50%
7	Surgical removal of brain, cerebellar, brainstem lesions (tumour, cyst, arteriovenous malformation)	100%

8	Excision of brain tissue - hemispherectomy, total or partial	100%
9	Dural repair (correction)	40%
10	Removal of intracranial lesion using stereotaxic radiosurgery (gamma knife, cyber / x knife)	30%
11	Surgical removal of a spinal cord lesion (hematoma, abscess, arteriovenous malformation, meningocele, tumour)	50%
12	Spinal cord / spinal canal decompression	50%
13	Cranial nerve decompression	50%
14	Cranial nerve tumour / cyst excision	50%
15	Nerve transfer / cranial nerve transplantation	80%
16	Microsurgical reparation of the cranial nerve	60%
17	Peripheral nerve decompression	40%
18	Peripheral neurectomy	30%
19	Surgical sympathectomy	50%
20	Nerve transfer / peripheral nerve transplantation	60%
21	Microsurgical repair of the peripheral nerve	50%
22	Biopsy of the brain, spinal cord, nerves, meninges, spinal membranes	20%

2. Endocrine system

No.	Surgical intervention / Procedure	%
23	Surgical removal of pineal tumour	80%
24	Total or partial hypophysectomy	80%
25	Parathyroidectomy	25%
26	Thyroidectomy – total	40%
27	Thyroidectomy - subtotal, partial, unilateral, bilateral	25%
28	Excision of the thyroid gland lesion	15%
29	Adrenalectomy, total / partial, unilateral	25%
30	Adrenalectomy, total / partial, bilateral or unilateral in 2 acts	40%

3. Eye

No.	Surgical intervention / Procedure	%
31	Unilateral cataract extraction with intraocular lens insertion (monofocal, multifocal, trifocal, toric, accommodation, aspherical)	20%
32	Surgical correction of retinal ablation	20%
33	Repair (correction) of acquired strabismus, unilateral or bilateral	20%

3. Eye - special notes:

1. Excluded is the revision of previously performed retinal ablation repair.
2. Excluded is the replacement of previously inserted intraocular lens.
3. Excluded is the insertion of intraocular lens for the purpose of dioptr correction.

4. Ear

No.	Surgical intervention / Procedure	%
34	Miringoplasty (tympanoplasty type I)	10%
35	Miringoplasty with excision of lesions in the middle ear (cholesteatoma, granuloma, polyp)	20%
36	Miringoplasty with ossiculoplasty (tympanoplasty type II, III, IV, V)	20%
37	Cochlear implant placement	30%
38	Surgical treatment of Ménière's disease: labyrinthectomy, decompression of the	20%



	endolymphatic sac, resection of the vestibular nerve	
4. Ear - special notes: 1. Excluded is the removal of the cochlear implant		

5. Nose, mouth, pharynx

No.	Surgical intervention / Procedure	%
39	Removal of nasal sinus tumours	10%
40	Removal of a malignant tumour of the tongue	20%
41	Removal of pharyngeal and laryngeal tumours	30%

6. Respiratory system

No.	Surgical intervention / Procedure	%
42	Total laryngectomy	60%
43	Laryngeal reconstruction - laryngotracheal reconstruction, laryngotracheo - plastics, implantation of artificial vocal cords	40%
44	Tracheostomy	10%
45	Partial tracheal resection, carina resection, tracheal resection with primary reanastomosis	40%
46	Partial bronchial extirpation	30%
47	Lobectomy of one or more lobes of the lungs, "sleeve" lobectomy, segmentectomy	40%
48	Wedge resection of the lungs - open surgery	30%
49	Chest drainage in pneumothorax and hemothorax	10%
50	Lung biopsy	5%

7. Cardiovascular system

No.	Surgical intervention / Procedure	%
51	Balloon valvuloplasty, anuloplasty	40%
52	Open valvotomy of heart valve	90%
53	Replacement of heart valve with prosthesis, bioprosthesis, homograft, non-stent heterograft	90%
54	Coronary artery bypass	90%
55	Percutaneous transluminal coronary angioplasty with or without stent insertion	40%
56	Ablation of RF heart node	30%
57	Pacemaker implantation	20%
58	Bypass/replacement of aortic segment by graft	80%
59	Endovascular repair of aortic aneurysm	50%
60	Carotid endarterectomy	30%
61	Arterial bypass of iliac / femoral by graft	50%
62	Open operations on varicose veins	10%
63	Pericardium, heart biopsy	20%

8. Gastrointestinal system

No.	Surgical intervention / Procedure	%
64	Esophagectomy, total or partial	60%
65	Esophagogastrectomy	75%
66	Gastrectomy, partial / subtotal (excluding perforated ulcer surgery)	40%
67	Gastrectomy, total	70%
68	Gastroduodenectomy	70%
69	Antireflux surgery - gastric reposition, suture of dilatation of the diaphragm in hiatus hernia, fundoplication, fundoplasty	30%
70	Pyloromyotomy, pyloroplasty	30%
71	Gastric or duodenal ulcer perforation surgery	30%

72	Resection of the small intestine (duodenum, jejunum, ileum) - total or partial (except perforated ulcer surgery)	40%
73	Appendectomy	15%
74	Panproctocolectomy, sigmoidocolectomy, colectomy, proctectomy, hemicolectomy, transverse colon excision, rectosigmoidectomy	70%
75	Rectal resection - abdominoperineal excision, anterior resection, abdominal rectopexy for rectal prolapse	40%
76	Formation of permanent colostomy, ileostomy	10%
77	Anal sphincterectomy	15%
78	Cholecystectomy, total or partial	20%
79	Laparoscopic cholecystectomy	15%
80	Surgical interventions on the biliary tract	20%
81	Open extirpation of tumours of the stomach, small intestine (duodenum, jejunum, ileum), colon (colon, rectum, anus), liver, pancreas	30%
82	Hemihepatectomy, lobectomy of the liver	50%
83	Surgical treatment of liver injury	20%
84	Pancreatectomy (partial, subtotal, total), pancreaticoduodenectomy	70%
85	Splenectomy	20%
86	Biopsy of gallbladder, liver, spleen, pancreas	10%

9. Urinary system

No.	Surgical intervention / Procedure	%
87	Nephrectomy / ureterectomy - partial, unilateral	30%
88	Nephrectomy / ureterectomy - partial, bilateral or unilateral in 2 acts	40%
89	Nephrectomy / ureterectomy - total, unilateral	40%
90	Nephrectomy / ureterectomy - total, bilateral or unilateral in 2 acts	50%
91	Nephroureterectomy - total, unilateral	50%
92	Nephroureterectomy - total, bilateral or unilateral in 2 acts	60%
93	Open extirpation of kidney / ureter lesion	20%
94	Pyelolithotomy / nephrolithotomy with renal calculus extraction	20%
95	Percutaneous nephroscopy with renal calculus fragmentation / extraction	15%
96	Retrograde pyeloscopy with renal calculus fragmentation / extraction	15%
97	Ureterolithotomy with calculus extraction	20%
98	Endoscopic extraction of the ureteral calculus	15%
99	Laser resection of bladder tumour	20%
100	Cystectomy total or partial, cystoprostatectomy, cystourethrectomy	50%
101	Kidney / ureter / bladder biopsy	5%

10. Male reproductive system

No.	Surgical intervention / Procedure	%
102	Surgical treatment of hydrocele / varicocele	10%
103	Spermatocele excision, epididymectomy	10%
104	Orchidectomy, unilateral	20%
105	Orchidectomy, bilateral or unilateral in 2 acts	30%

11. Prostate



No.	Surgical intervention / Procedure	%
106	Prostatectomy - transurethral resection - TURP, transurethral needle ablation - TUNA, transurethral vaporization, endoscopic laser ablation - TULIP and VALP, endoscopic laser excision, cryoablation, microwave thermotherapy, transrectal focused ultrasound of high intensity - HIFU	20%
107	Open prostatectomy - suprapubic, retropubic, transvesical	30%

12. Female reproductive system

No.	Surgical intervention / Procedure	%
108	Myoma / fibroma removal	10%
109	Hysterectomy - subtotal (removal of the uterus leaving the cervix attached to the vagina), total (removal of the uterus with the cervix)	40%
110	Hysterectomy subtotal / total with unilateral / bilateral salpingectomy, ovariectomy or salpingoovariectomy	60%
111	Emergency caesarean section performed during vaginal delivery, for medically justified reasons	20%
112	Elective caesarean section (planned), for medically justified reasons	15%
113	Postpartum instrumental uterine revision	5%
114	Excision of the cervix of uterus	10%
115	Conization of the cervix of uterus	5%
116	Ovariectomy / salpingectomy - partial, unilateral or bilateral; total salpingectomy - unilateral or bilateral	20%
117	Ovariectomy / salpingoovariectomy - total unilateral	30%
118	Ovariectomy / salpingoovariectomy - total bilateral	40%
119	Biopsy of endometrium, cervix, ovaries, fallopian tubes	5%
12. Female genital system - special notes:		
1. Caesarean section is performed for medically justified reasons, caesarean section is excluded at the personal request of the mother or family member.		
2. Condyloma removal is excluded.		

13. Musculoskeletal system

No.	Surgical intervention / Procedure	%
120	Sequestrectomy, excision of the skull bone change without opening the dura, craniectomy for skull infection	20%
121	Surgical treatment of skull fracture with fixation	20%
122	Facial bone excision	20%
123	Surgical treatment of facial bone fracture (zygomatic, nasal), with or without internal / external fixation	20%
124	Maxillary / mandibular sequestrectomy	20%
125	Maxillary / mandibular bone excision (except alveolar extensions)	20%
126	Surgical treatment of vertebral fractures	30%
127	Arthroscopy, diagnostic or interventional	10%
128	Bone fracture reduction surgery	20%
129	Surgical removal of bone tumours	20%
130	Replacement of hip and knee joint with prosthesis due to fracture	50%
131	Replacement of hip and knee joints with prosthesis due to disease	40%

132	Reconstruction after injury of several fingers of the hand	30%
133	Thumb replantation	30%
134	Complex reconstruction of feet and hands (surgical intervention on bones, muscles, blood vessels, tendons and nerves in the same operative act)	50%
135	Surgical treatment of body parts after amputation	10%

14. Skin and subcutaneous tissue

No.	Surgical intervention / Procedure	%
136	Excision of a benign skin tumour	5%
137	Excision of a malignant skin tumour	20%

15. Breast

No.	Surgical intervention / Procedure	%
138	Partial mastectomy, unilateral	20%
139	Partial mastectomy, bilateral or unilateral in 2 acts	30%
140	Mastectomy, unilateral	30%
141	Mastectomy, bilateral or unilateral in 2 acts	50%
142	Mastectomy with axillary dissection, unilateral	40%
143	Mastectomy with axillary dissection, bilateral or unilateral in 2 acts	60%
144	Radical mastectomy (mastectomy with axillary dissection and removal of the affected part of the chest wall), unilateral	45%
145	Radical mastectomy (mastectomy with axillary dissection and removal of the affected part of the chest wall), bilateral or unilateral in 2 acts	65%
146	Breast cyst puncture	3%
147	Breast biopsy	5%
15. Breast - special notes:		
1. Excluded is total mastectomy for preventive reasons.		

16. Organ transplantation

No.	Surgical intervention / Procedure	%
148	Transplantation of heart, lung, liver, kidney or pancreas, unilateral or bilateral	100%
149	Bone marrow transplantation using hematopoietic stem cells	80%
16. Organ transplantation – special notes:		
1. Excluded are other stem cell transplants, transplantation exclusively of <i>Langerhans</i> islet transplantation and transplantation in congenital organ diseases		
2. Excluded is payment of the sum insured to the donor of the organs for transplantation.		
3. Excluded is removal of discarded transplant.		

INSURANCE INCEPTION AND DURATION

Article 10

The insurance cover hereunder shall commence as at 24:00 (twenty-fourth) hour of the date marked in the Policy as the insurance inception date, provided the insurance premium has been paid and/or premium instalment in case the instalment payment has been agreed. If the payment has been made after the date marked in the insurance policy as the insurance inception date, the insurance shall commence as at the 24:00 hour of the date when the agreed premium has been paid.



Under the insurance cover for which the waiting period is stipulated, the obligation of the insurer shall commence upon expiry of the 24:00th hour of the date when the waiting period expired, provided the agreed premium has been paid. If the agreed premium has not been paid prior to the date marked in the policy as the insurance inception date, the waiting period shall start as from the 24:00th hour of the date when the first agreed premium has been paid.

If only insurance inception is indicated in the Policy, the Insurance Contract shall extend year-on-year until one of the contracting parties terminates it, in terms of Article 12 of the Terms and Conditions hereof.

With group insurance, for the persons employed after the inception of the insurance indicated in the Policy, the insurance shall come into effect as at the 24:00th hour of the date when they became employed. For persons whose employment terminated before the expiry of the insurance period, the insurance shall cease to be effective at expiry of the 24:00th hour of the date when their employment terminated.

The Contract shall be concluded to a definite or indefinite period of time, not to be shorter than one year.

TERMINATION OF INSURANCE

Article 11

The Insurance Contract shall terminate upon expiry of the 24:00th hour of the date marked in the Policy as the insurance expiry date.

The Insurance shall terminate before the agreed term in the following cases:

1. Death of the Insured – as of the date of death;
2. Termination of employment in line with the Article 10, paragraph 4 of the Terms and Conditions hereof;
3. Termination of contract according to Article 21 of the General Terms and Conditions;
4. Cancellation of the Insurance Contract according to Article 22 of the General Terms and Conditions

Article 12

Each contracting party may terminate a long – term Insurance Contract upon premium maturity date by notifying thereof in writing the other contracting party of its wish to terminate the Contract.

The notification on contract termination under paragraph 1 of the Article hereof must be delivered not later than 3 months before premium maturity date.

In the event that the insurance has been concluded for period longer than 5 years, each contracting party may, upon the lapse of this period (5 years), with a six- month notice period, deliver to the other contracting party a written declaration on terminating the contract.

When insurance is stipulated for a period of up to five years, each contracting party may, upon the expiry of the first year of insurance and with a six-month notice period, deliver the other contracting party a written declaration on terminating the Contract.

Article 13

In the event of annulment of Contract in accordance with Article 11 paragraph 2. item 4) of the Terms and Conditions hereof, the Insurer

shall keep the collected premiums and be entitled to request payment of premium for the insurance period during which the Insurer required the annulment of the Contract.

WAITING PERIOD

Article 14

Under the Terms and Conditions hereof, the waiting period of 3 (three) months has been stipulated in the event of diagnosis for all critical illnesses from the Table, excluding the critical illnesses as a result of surgical intervention performed on the Insured due to the accident or emergency medical condition.

The waiting period for all surgical interventions from the Table, excluding the surgical interventions arising from an accident and medical emergencies, shall be 3 (three) months.

The waiting period applies only for new concluded insurance covers. With the renewal of the Insurance Contract, for a person that has already been covered under the previous insurance policy with the same or, exceptionally another Insurer, without interruption between two policies or with interruption not longer than 3 (three) months, the waiting period shall not apply.

If the waiting period has not fully expired for a particular Insured person during the period of the previous Policy, the remaining waiting period shall be carried forward to the following insurance period under the new Policy.

If, during the renewal of the Insurance Contract a bigger scope of cover is agreed and/or additional cover included, the waiting period for the new agreed illnesses shall run from the date of coming into force of the new Insurance Contract.

EXCLUSION OF INSURER'S LIABILITY

Article 15

Excluded is the liability of the Insurer to pay out sum insured with regard to:

- performed caesarean section surgery, if the individual insurance policy was concluded at the moment when the pregnancy has already occurred and there is no previous continuity of insurance cover;
- performed surgical intervention that is performed in order to treat obesity;
- revision of surgical intervention, re-surgery, removal of material that was implanted in a previous surgical procedure
- venereal diseases and surgical interventions that result from them;
- performed surgical intervention of organ and tissue transplantation, if the insured is a donor;
- metastases of primary cancer for which the sum insured has already been paid.

Any liability of the Insurer under the Contract is excluded in the events occurring:

- upon the exhaustion of the sum insured;
- due to disease that existed at the moment of contract conclusion;



- due to the need for surgical intervention that occurred due to illness i.e. observed or diagnosed problems that existed at the time of concluding the contract, or arose during the waiting period and which are brought into a causal relationship with the performance of surgical intervention;
- as a consequence of congenital conditions (congenital disorders);
- due to a natural disaster and catastrophes (for example: earthquakes, etc.) and epidemics;
- due to the consequences of ionizing radiation or radioactive contamination from radioactive waste generated by the combustion of nuclear fuel or radioactive, toxic, explosive or other hazardous properties of an explosive nuclear assembly or some of its components
- due to events directly attributable to war, invasion of a foreign enemy, war activities and operations, civil war, uprising, insurrection or revolution;
- due to sabotage, vandalism or terrorist act performed for political reasons, if the Insured actively participated in such events;
- due to the participation of the Insured in riots or uprisings of any kind;
- due to a suicide attempt and intentional self-harm;
- as a consequence of participating in a fight (except in case of a self-defence);
- as a consequence of mental illness (insanity);
- due to the use of alcohol, psychoactive substances, drugs that are not prescribed by a competent doctor and/or abuse or improper use of drugs;
- as a consequence of an accident that occurred if the Insured, as a participant in traffic, acted in a manner contrary to the applicable legal regulations of the Republic of Serbia in force at the time of the accident.
- when preparing, attempting or committing a criminal offense, as well as escaping after performing such an act;
- due to the Insured's engaging in hazardous and dangerous activities or sports, such as hunting, acrobatics, diving, sailing, speleology, mountaineering, handling pyrotechnics, fireworks, ammunition and explosives, parachuting, ski jumping, bobsledding, water scootering, acrobatic skiing, bungee jumping, car racing, motorcycle racing and the like.

Excluded is the liability of the Insurer to reimburse attorney's fees, costs of treatment, rehabilitation, procurement of medicines, implants, medical-technical aids, etc.

RIGHTS AND OBLIGATIONS OF POLICYHOLDER AND INSURED

Article 16

The rights and liabilities of the Policyholder and the insured are defined under the Articles 13, 14 and 15 of the General Terms and Conditions.

The Policyholder shall undertake answer accurately and completely to the questions stated in the Proposal Forms.

The Insured is obliged to answer the Insurer's request accurately and completely, to the questions stated in the form of the Health Questionnaire.

NOTICE OF INSURED OCCURRENCE

Article 17

When exercising the rights under the Contract, the Insured shall attach the evidence of concluded Contract/Policy and/or the Document or Certificate of the Policyholder.

The Insured shall undertake to notify on the Form of the Insurer the illness or the surgical intervention, occurred during the insurance period, as soon as this is possible according to his health condition.

The Insured shall undertake to submit the complete medical documentation from which the liability of the Insurer can be indisputably established. The diagnosis confirming the occurrence of the insured event must be made by the corresponding medical specialist.

The Insurer, on the basis of the Insured's approval in writing, shall be entitled to request the Insured's medical documents as well as to acquire the information on the state of health of the Insured from a third party with respect to the insured occurrence.

Rights under the Contract can neither be assigned to third parties nor inherited.

The Insured only shall be entitled to receive payment of the sum insured or portion thereof.

In case the Insured is a minor or person deprived of legal capacity, the payment shall be effected to his parents i.e. guardian.

If the insured event occurred during the insurance period has been reported during the life of the Insured but the claim was not settled until the moment of the Insured death, the sum insured or a portion thereof that would belong to the Insured according to the Terms and Conditions hereof, shall be paid out to the heir of the Insured under the provisions of the Inheritance Law.

PREMIUM PAYMENT METHODS AND TERMS

Article 18

Premium statement and payment methods and terms shall be regulated under the Article 19 of the General Terms and Conditions.

With group insurance, the premium shall be stated according to the real number of Insured as at the insurance inception date marked in the Policy.

The initial condition of the insured equals the employment number of the Policyholder as at the date of concluding group insurance policy as per official human resource records of the Policyholder.

Upon expiry of the insurance year, the final insurance premium statement shall be made according to the average number of the insured.

The Policyholder shall undertake, within 15 days upon expiry of the insurance year, deliver the Policyholder accurate and complete data on the total employment number at the end of each month for the previous insurance year, for defining the average number.



The Policyholder shall allow the Insurer the inspection into records and documentation from where to determine the employment number and the level of calculated and paid premium.

APPLICATION OF REGULATIONS

Article 19

All the relations between contracting parties not regulated under the Terms and Conditions hereof, shall be governed by the provisions of General Terms and Terms and Conditions for Voluntary Health Insurance, Law on Health Insurance, Law of Contracts and Torts and other statutory provisions of the Republic of Serbia regulating this area of insurance.

COMPETENCE IN DISPUTES

Article 20

All matters of dispute shall be amicably resolved between the Contracting Parties.

In case of a dispute arising under the insurance contract, the same shall be referred to the competent court according to the place of Contract conclusion.

APPLICATION OF TERMS AND CONDITIONS

Article 21

If the Insurer makes any amendments to the Terms and Conditions, he shall be obliged to inform in writing, or in any other appropriate manner (daily newspapers, radio, television, Internet web site of the Insurer, etc.) the Policyholder i.e. the Insured with whom he has concluded a long-term Insurance Contract, not less than 30 days prior to the expiry of the current insurance year, with explication.

In case of amendments to the Terms and Conditions during the insurance period of long-term insurance cover, application of new Terms and Terms and Conditions may be agreed starting from the commencement of the following insurance year, subject to the written approval of the Policyholder and/or Insured, unless they are more favourable for the Policyholder.

FINAL PROVISIONS

Article 22

Coming into effect of the Terms and Conditions hereof shall override the Special Terms and Conditions for Voluntary Health Insurance of Persons against Critical Illnesses and Surgical Interventions (Company Bulletin, Nos.42/09 and 29/10/03).

Article 23

The Terms and Conditions hereof shall be made public on the Internet web site of the Insurer.

The Terms and Conditions hereof shall take effect and apply on the day their publication in the Company Bulletin

The Conditions hereof shall apply as of April 24, 2020.