

The rules for the patients' use of telemedical consultation services provided by Medicover are set out in the **Regulations governing the provision of services via electronic access channels for patients of Medicover and Partner Companies**, as well as these **Rules**.

Glossary

Telemedical consultations — medical advice provided by doctors and other medical professionals (nurses, midwives, physiotherapists and others) via ICT systems or communication systems, in particular via secure email, text chat, telephone conversation (scheduled or ad hoc) or via video connection.

Medicover OnLine (MoL) website and **Medicover Mobile Application (MoB)**, hereinafter referred to as **MedicoverOnLine app** — online software aimed at providing patients with support services, such as: booking a telemedical consultation or an in-person appointment at a medical facility, re-scheduling or cancelling the telemedical consultation or appointment, and viewing medical records (referrals, prescriptions, test/examination results).

Chat with a doctor or other medical professional — telemedical consultation (scheduled or ad hoc) provided to the patient via text chat through MedicoverOnLine app.

“Ask the doctor” Service — telemedical consultation provided to the patient via secure email through MedicoverOnLine app (the term applies to doctor–patient communication after the visit or scheduled telemedical consultation).

Scheduled Telemedical Consultation — telemedical consultation provided to the patient in the form of a telephone conversation at a specific time previously booked by that patient at a Medicover Centre (the term does not apply to telemedical consultations booked via the Telecentre).

Scheduled Telemedical Consultation (via the Telecentre) — telemedical consultation provided to the patient in the form of a telephone conversation at a specific time previously booked by that patient at the Telecentre.

Ad hoc Telemedical Consultation — telemedical consultation provided to the patient on an ad hoc basis, without making an appointment, in the form of a telephone conversation, as well as telemedical consultation provided by a Telecentre doctor by appointment.

Video Consultation — telemedical consultation provided to the patient in the form of a video call.

Patient — a natural person, whether an adult or a minor whose legal guardian uses the telemedical consultation service on behalf of the minor with reference to the minor's health condition, who has an active Patient Card.

Medical indications — circumstances in which a given procedure carried out for diagnostic and treatment purposes is justified from the medical perspective, i.e., based on proven medical knowledge, specifically on guidelines and standards. Medical indications may apply to performing tests and examinations, specialist consultations, prescribing medications, hospitalisation, undergoing a treatment/procedure, issuing a certificate of incapacity for work, prevention; medical indications may also specify the level of urgency of an action, and the conditions for providing a service. Medical indications shall be verified by the Medicover doctor or other medical professional.

Terms not specifically defined in these **Rules** shall have the meaning defined in the **Regulations governing the provision of services via electronic access channels for patients of Medicover and Partner Companies**.

General provisions

§ 1

1. Scheduled and ad hoc telemedical consultations are available to patients with an active Patient Card (holding the package of Medicover healthcare services) who are eligible for consultations with specialists available through the telemedicine services.
2. Scheduled telemedical consultations are also available to patients without the package of Medicover healthcare services who have purchased the service in MediStore (i.e. at websites: www.medistore.com.pl or sklep.medicover.pl).
3. To use the telemedical consultation services, patients have to accept all the provisions of these Rules. By accepting the Rules, the patient or its statutory representative (e.g. the parent) consents to receiving the service in the form of telemedical consultation and confirms that he or she has the right to express — during the telemedical consultation — the will to contact the relevant member of medical personnel in person.
4. Telemedical consultations are available in the following forms:
 - text chat;
 - secure email;
 - telephone conversation (scheduled or ad hoc);
 - video call.
5. Prior to beginning a chat or video consultation via Medicover OnLine, patients are required to complete a medical questionnaire.

§ 2

1. Consultations via text chat or video call are provided by doctors or other medical professionals. The current list of medical specialisations providing this service is available on the Medicover OnLine website.
2. Consultations through secure email are provided by doctors of selected specialisations. This service is available to patients who have visited a given doctor within a certain period of time.
3. Consultations via telephone are provided by doctors and other medical professionals. The current list of medical specialisations providing this service is available on the Medicover OnLine website and at MediStore.com.pl.

§ 3

1. During consultations via chat, email or video, the doctor or other medical professional provides solely information related to the patient currently logged into the Medicover OnLine website.
2. In order to obtain a consultation for a child via chat, video or email, the child's guardian must be logged in to Medicover OnLine through the child's account.
3. When using the telemedical consultation service, the patient is identified on the basis of the following data: the patient's name and surname, date of birth or PESEL number, or Medicover Patient's Card number (medical record number, MRN). In the case of a chat or video consultation, the doctor identifies the patient on the basis of the data contained in a questionnaire (name and surname, Medicover Patient's Card number).
4. By using the telemedical consultation service, the patient consents to the information and statements provided by him or her as part of the telemedical consultation with a doctor or other medical professional to be included in that patient's medical records. Medical records shall be kept in accordance with legal requirements and regulations for providing health services in force in Poland.
5. As part of telemedical consultations, **the doctor** can provide the following services:
 - provide medical advice, including test/examination results interpretation, and information on medications taken by the patient;
 - in justified cases, issue an e-Prescription;
The decision to issue an e-Prescription is always made by the doctor providing the telemedical consultation, based on an examination conducted via ICT systems or communication systems, and on the patient's available medical records, in line with indications included in the Summaries of Product Characteristics and specified in the list of reimbursed medicinal

products, food for special medical purpose and medical devices, in accordance with currently valid Notice of the Minister of Health.

In the case of issuing e-Prescriptions for reimbursed medications, the doctor will verify health insurance details in the eWUŚ system. If the National Health Fund (NFZ) does not confirm the insurance, the doctor will write a non-reimbursed prescription for medication at full price.

- in justified cases, the doctor may issue an e-Leave certificate in accordance with currently valid legal regulations. The decision to issue an e-Leave certificate is always made by the doctor providing the telemedical consultation, based on a personal examination conducted through ICT systems or communication systems and on the patient's available medical records.

In exceptional situations, the doctor may decide to issue the e-Leave certificate retrospectively, provided that the period of declared temporary incapacity for work may not exceed the period of 3 days preceding the day on which the above examination was carried out – if the results of the examination show that the insured person was undoubtedly incapable of work during that period. This is possible in, among others, the following situations:

- to continue the e-Leave certificate issued by the Medicover doctor(s);
- if the patient has undergone consultations, tests or examinations at Medicover, which originally did not result in issuing e-Leave certificate;
- if the patient presents records which confirm his/her health condition during the days for which the patient wants to have the e-Leave certificate issued (e.g. hospital ED discharge summary report) [this option is possible in the case of the chat with a doctor].

The period of temporary incapacity declared by a psychiatrist may cover a period starting earlier than the in the case of the one set out above in the event of an identified or suspected mental disorder limiting the insured person's ability to assess his/her own conduct.

The e-Leave certificate for the person taking care of the patient (or an ill family member) may be issued after the telemedical consultation service received by the patient (not the caregiver). In the case of a child, the consultation shall be attended by the parent who will be taking care of the child.

In the case of an adult, the e-Leave certificate for the person taking care of the patient can only be issued if said person is present at the time of the telephone call so that we can identify him/her and confirm the details necessary to issue the certificate; the above certificate cannot be issued via a chat with a doctor due to the lack of possibility to confirm the details of the person who is to provide care and his/her willingness to do so.

- in medically justified cases, the doctor may issue a referral for tests, examinations or consultations, to the extent consistent with Appendices No. 1 and No. 2, depending on the nature of the consultation (ad hoc or scheduled);

- in medically justified cases, the doctor may issue a referral for an appointment at the medical centre, in an ad hoc or scheduled mode;
- in medically justified cases, the doctor may transfer or refer the patient to Medicover HotLine;
- in the case of scheduled telemedical consultations and based on the available medical records, the doctor may issue a certificate of the patient's health condition (except for certificates for administrative purposes, such as travel or visas), which may be collected from a Medical Centre or sent to the patient via email.

6. As part of telemedical consultations, **the nurse or midwife** can provide the following services:

- provide medical advice;
- **in medically justified cases**, issue a referral for tests/examinations included in the list contained in Appendix No. 2 to these Rules,
- in justified cases, issue an e-Prescription for medication or food for special medical purpose listed in the list of active substances contained in medicines, food for special medical purpose and medical products prescribed by nurses and midwives, in accordance with currently valid Regulation of the Minister of Health and with the act on the occupation of nurses and midwives; The decision to issue an e-Prescription is always made by the nurse or midwife providing the telemedical consultation, based on an examination conducted via ICT systems or communication systems, and on the patient's available medical records, in line with indications included in the Summaries of Product Characteristics and specified in the list of reimbursed medicinal products, food for special medical purpose and medical devices, in accordance with currently valid Notice of the Minister of Health.

In the case of issuing e-Prescriptions for reimbursed medications, the nurse or midwife will verify health insurance details in the eWUŚ system. If the National Health Fund (NFZ) does not confirm the insurance, the nurse or midwife will write a non-reimbursed prescription for medication at full price.

7. As part of telemedical consultations, **the physiotherapist** can provide the following services:

- provide medical advice;
- in medically justified cases, provide recommendations and exercise instructions that can be done by the patient at home, and, if necessary, refer the patient for an appointment at Backpain Clinic or Musculoskeletal Clinic, or for a consultation with a doctor.

8. As part of telemedical consultations, **the dietician** can provide the following services:

- provide medical advice;
- in medically justified cases, refer the patient for an in-person appointment with the dietician, or for a consultation with a doctor.

9. As part of telemedical consultations, **the psychologist** can provide the following services:

- provide medical advice;
- in medically justified cases, refer the patient for an in-person appointment with the psychologist, or for a consultation with a doctor.

10. As part of telemedical consultations, the doctor or other medical professional **may not** provide the following services:
 - issue referrals for tests, examinations or consultations other than those listed in Appendix No. 1 (doctors) or Appendix No. 2 (midwives and nurses);
 - issue referrals for rehabilitation;
 - issue referrals for procedures and invasive diagnostic tests requiring the patient's written consent, such as biopsies and genetic tests (except for the scheduled telemedical consultation booked at a Medicover Centre);
 - issue referrals for endoscopic examinations;
 - issue referrals at the cost of Medicover without medical indications;
 - issue referrals for home visits;
 - book an appointment at a Medicover Centre;
 - issue a medical certificate (except for the scheduled telemedical consultation booked at a Medicover Centre).
11. If the patient's condition or presented health problem requires doing so, the doctor or other medical professional may decide during the telemedical consultation that the patient needs to be seen in-person at a medical centre, that an ambulance must be called to the patient or that the patient requires other medical assistance.
12. The duration of a telemedical consultation depends on the specialisation and the communication channel. After the designated time, the doctor or other medical professional may ask the patient to disconnect.
13. During the telemedical consultation, the doctor or other medical professional may decide that the patient needs to be seen in-person at a medical centre in the following cases:
 - if it is not possible to diagnose the medical problem and agree further course of action via ICT systems only;
 - if at least the third telemedical consultation in a row on the same medical problem does not lead to its solution or improvement of the patient's health;
 - if at least the third telemedical consultation in a row requires an e-Leave certificate to be issued.

§ 4

1. During the telemedical consultation via chat, the patient can send a picture or an image file of his/her health problem.
 - To upload a photo/file:
 - select the desired photo or document in the selection window available during the chat;
 - send the chosen file;
 - wait for confirmation of successful file transfer.

- The maximum file size is 15 MB. Acceptable file formats are: jpg, pdf, png, gif.
- During the telemedical consultation, the doctor or midwife can only review the photo or document sent on the day of the consultation.
- The photos or documents sent are not added to the patient's medical records.
- In order to save the document in the medical records, after the consultation, the patient should contact the Medicover HotLine consultant to receive instructions on how to send the documents via email.

§ 5

1. If the patient is unable to keep the booked time of the telemedical consultation, he/she should cancel it. Otherwise, the uncanceled appointment will be visible on the patient's account on the Medicover OnLine website and included in the total number of uncanceled visits and services.

§ 6

1. Patients should be prepared for the telemedical consultation, i.e. if possible, be in a secluded spot, in a room where undisturbed conversation is possible, and have the medical records ready to be discussed, including the examination and test results. If the patient is in a place where conducting proper telemedical consultation is not possible (e.g. in public transport, in a car as the driver, or accompanied by third parties who disturb the consultation), the doctor may ask the patient to change the conditions of the telemedical consultation. If doing so turns out to be impossible, the patient may be asked to schedule another telemedical consultation at a convenient moment.
2. Patients are required not to use phrases or attach materials that are obscene, offensive, erotic, violating the personal rights of the doctor or other persons, or violating the provisions of generally applicable law. If during the telemedical consultation, the doctor or other medical professional finds that the above provisions of these Rules are being violated, he/she has the right to discontinue the consultation.
3. In the event of technical problems or a connection failure during an ad hoc telemedical consultation via chat, video or telephone initiated by the patient, he/she should try to re-establish the connection with the doctor or midwife.
4. For scheduled telemedical consultations, the doctor or other medical professional will attempt three times to reach the patient.
5. In the event of technical problems or a connection failure during **scheduled telemedical consultation** (booked at the Telecentre or at a Medicover Centre), the doctor should try to re-establish the connection with the patient.

6. Medicover shall not be held liable for the scope of data provided by the patient during the telemedical consultation.

Appendix No. 1

Examinations/tests and consultations that may be ordered by a doctor during telemedical consultations

1. List of examinations/tests that the Telecentre doctor may order during an **ad hoc telemedical consultation**, providing there are medical indications:
 - ultrasound examinations, excluding pregnancy ultrasound outside the Prenatal Care Standard (with the exception of a gynaecologist providing telemedical consultation – after assessing the indications based on the results of the performed tests and examinations) and ultrasound-controlled biopsy;
 - other imaging tests — X-ray only (without CT, MRI, scintigraphy, PET, mammography or densitometry);
 - laboratory diagnostics;
 - cardiac diagnostics — resting ECG, echocardiography, ambulatory blood pressure monitoring and ECG Holter monitoring only (without exercise test);
 - pulmonary diagnostics — spirometry (without bronchodilator response);
 - other — as per medical indications.
2. During the scheduled telemedical consultation, the Medicover Centre doctor may issue referrals for tests and examinations covered by the patient's package of Medicover healthcare services, resulting from medical indications.
3. At the patient's request, the Medicover doctor may issue referrals for paid examinations/tests to be performed at the cost of the patient, except for the services which pose a risk to the patient's health.
4. During the ad hoc or scheduled telemedical consultations, the doctor may, in medically justified cases, authorise non-Medicover referrals for examinations/tests, upon verification of indications in the records provided by the patients (according to the procedure specified in §4 of these Rules) or available in Medicover systems.
5. Upon issuing a referral for medical consultations and diagnostic examinations/tests to be performed by third parties ("external referrals"), the doctor shall ask the patient to contact the Medicover HotLine at +48 500 900 500 in order to coordinate the performance of the referral.

Appendix No. 2

Examinations/tests that may be ordered by a midwife or a nurse during telemedical consultations

1. List of examinations/tests that a **midwife** may order during an ad hoc or scheduled telemedical consultation, providing there are medical indications:
 - cardiotocographic examination (CTG) for patients over 40 weeks of pregnancy;
 - pregnancy ultrasound — only:
 - 11-14-week pregnancy ultrasound;
 - 18-22-week pregnancy ultrasound;
 - 28-32-week pregnancy ultrasound;
 - pregnancy ultrasound after 36 weeks (for patients over 40 weeks of pregnancy);
 - laboratory tests:
 - blood count with platelets, ESR and smear;
 - fasting blood glucose test;
 - testing of glucose level 1 hour and 2 hours after oral administration of 75 g of glucose (in 24-26 weeks of pregnancy);
 - ABO blood group and Rh D antigen determination;
 - TSH;
 - anti-HBs antibodies;
 - anti-HCV antibodies;
 - antibodies against toxoplasmosis-IgG, IgM;
 - antibodies against rubella virus IgG and IgM;
 - VDRL;
 - general urine test.
2. List of examinations/tests that a **nurse** may order during an ad hoc or scheduled telemedical consultation, providing there are medical indications:
 - resting ECG;
 - laboratory tests:
 - blood count with platelets, ESR and smear;
 - fasting blood glucose test;
 - oral glucose tolerance test (OGTT);
 - glycated haemoglobin (HbA1c);
 - ABO blood group and Rh D antigen determination;
 - creatinine;
 - TSH;
 - prothrombin time (INR);
 - faecal test for parasites;
 - faecal test for occult blood;
 - pinworm test;
 - general urine test.

Appendix No. 3

LIST OF MEDICATIONS

1. At Medicover, we recommend treatment (including on-prescription therapies) compliant with indications included in the Summaries of Product Characteristics and specified in the list of reimbursed medicinal products, food for special medical purpose and medical devices, in accordance with currently valid Notice of the Minister of Health.
2. We do not offer therapies considered as experimental, or those with efficacy unproven in scientific research and clinical trials.
3. During an ad hoc telemedical consultation, the doctor may issue an e-Prescription for **narcotic medications, psychotropic substances, category 1 precursors and preparations containing these drugs or substances and tramadol** as a **continuation** of treatment. The condition of an e-Prescription is each time the assessment of the patient's actual clinical condition and verification of medications taken by him/her in the gabinet.gov.pl system or, exceptionally, by collecting a detailed history of the medications that are used (in the absence of activation of the Patient Online Account).
4. **Antidepressants** may be prescribed during telemedical consultations only as a **continuation** of treatment, if, in the opinion of the doctor, it does not pose an increased risk to the patient's health.
5. During an ad hoc telemedical consultation, the doctor shall not issue an e-Prescription for the medication listed below (group of medications along with justification and exceptions):
 - **Other hypnotic and sedative medications (benzodiazepine group and benzodiazepine derivatives) not listed in point 3** — highly potent medications which exhibit many interactions and affect mental and physical activity, including the ability to drive and use machines. To continue pharmacotherapy, the opinion from the doctor in charge of the treatment is required.
 - **Other psychotropic medications (not listed in point 3)** — due to their adverse effects, the use of these medications requires the supervision of the doctor in charge of the treatment. If said doctor is unavailable, the Telecentre doctor may, on the basis of the available documentation/certificate issued by the doctor in charge of the treatment, exceptionally prescribe one smallest packaging of the medication from this group, provided that, in the Telecentre doctor's opinion, this does not pose an increased risk for the patient's health.
 - **Strong pain control medications containing codeine, opioid derivatives (not listed in point 3)** — medications which have many interactions and affect mental and physical activity, including the ability to drive and use machines. To continue pharmacotherapy, the opinion from the doctor in charge of the treatment is required.

- **Oral contraceptives** — gynaecological medications. Their use increases the risk of thromboembolism, particularly in combination with other risk factors such as smoking or coronavirus infection. Decision on prescribing a hormone medication should be made by a gynaecologist after physical examination of the patient. The gynaecologist also specifies the frequency of medical check-ups.

Continuation of treatment should only be carried out by the gynaecologist. It is possible to continue treatment via the “Order a Prescription” functionality without the need for appointments or via a telemedical consultation of a gynaecologist.

- **Emergency contraception (the “morning after” pill)** — a gynaecological medication, which should be prescribed only by a gynaecologist, after an in-person assessment of the patient’s clinical condition (in exceptional cases, also via telemedical consultations). To prescribe the medication, a specialist knowledge as well as exclusion of pregnancy are required. Due to possible quick return of fertility after taking the emergency contraceptive, in order to prevent pregnancy on a constant basis, the patient should continue or start applying permanent contraception methods — mandatory contraception consultation is required.
- **Hormone replacement therapy** — gynaecological medications. Their use increases the risk of thromboembolism, particularly in combination with other risk factors such as smoking or coronavirus infection. Decision on prescribing a hormone medication should be made by a gynaecologist after physical examination of the patient. The gynaecologist also specifies the frequency of medical check-ups.
Continuation of treatment should only be carried out by the gynaecologist. It is possible to continue treatment via the “Order a Prescription” functionality without the need for appointments or telemedical consultations or based on the decision of a gynaecologist providing telemedical consultations.
- **Oral isotretinoin preparations** — highly potent teratogenic medications which require special surveillance procedures during use. The patient shall sign a consent for therapy and paper declarations during an appointment. In women, pregnancy should be ruled out and effective contraception should be applied.
- **Anti-cancer, immunomodulating, immunosuppressive medications** — supervision of the doctor in charge of the treatment is required due to adverse effects of these medications, especially on the hematopoietic system and suppression of the immunological system. If the doctor in charge of the treatment is not available, the Telecentre doctor exceptionally should prescribe one smallest packaging of the medication from this group, unless in the doctor’s opinion it poses an increased risk to the patient’s health.