

**Quick guide on the use of the Voluntary Health Insurance (VHI) policy provided by
"AlfaStrakhovanie" PLC insurance company**

1	<p>What is "AlfaStrakhovanie" PLC? What kind of functions does it perform?</p>	<p>"AlfaStrakhovanie" is an insurance company, provider of insurance services for HSE employees in 2017. It arranges and renders medical assistance to the extent covered by the insurance programme and in the facilities indicated in this programme. Medical assistance is provided to the Insured person upon occurrence of an insurance case.</p> <p>A Description of the VHI Programme in Russian is provided in the envelope together with your insurance policy as well as on pages 5-8 of this guide, see Scope of Services:</p>
2	<p>What is Global Voyager Assistance (GVA)? What functions does it perform?</p>	<p>GVA company (24/7) supports the English-speaking people Insured in questions such as:</p> <ul style="list-style-type: none"> - the scope of medical services covered by the Programme - doctor appointments - calling of an ambulance - home visits - admission to hospital.
3	<p>What is an insurance case?</p>	<p>An insurance case is:</p> <ul style="list-style-type: none"> - an acute disease - an aggravation of a chronic disease - a trauma (including burns and frostbites) - intoxication
4	<p>What is not an insurance case?</p>	<p>The following services are not regarded as insurance cases and, hence, are not covered:</p> <ul style="list-style-type: none"> - those organized on the Insured person's own will without medical indications - those not covered by the programme - those included into the list of exclusions from the VHI programme (pages 8-9 of this guide, see Exclusions from the Programme). All necessary tests and examinations are covered until a non-insurance case is diagnosed - services prescribed and/or rendered at a medical institution not included in the Insurance Plan, or without the prior consent of "AlfaStrakhovanie" <p>! The Insurer continues to provide medical services to the Insured even if a disease not covered by the insurance programme has been diagnosed during the period of validity of the insurance contract (policy). Treatment of the disease is not provided.</p>
5	<p>What is a Policy?</p>	<p>The Policy of Voluntary health insurance is issued by "AlfaStrakhovanie" insurance company.</p> <p>The Policy is a red plastic card on the front side. The Policy number is written on the back side of it "Полис No XXXXXXXX". You will need to provide this number on any medical assistance request by phone. You will need to SUBMIT the Policy when you get emergency medical care, for admission to hospital and at doctor's home visit.</p>
6	<p>Where can you receive medical assistance?</p>	<p>Outpatient treatment, including dental care and home visits (within the Moscow Ring Road) is provided on the basis of:</p> <p>"Medincentre" of RF Ministry of Foreign Affairs hereinafter Polyclinic Address: 4th Dobryninsky pereulok, building 4, Moscow. Metro station "Dobryninskaya" http://www.medin.ru/eng/contacts/address</p> <p>Direct phone number: 8 499 237 17 06 - English-speaking staff (for home visits arrangement, appointments to physicians, including children's appointments, doctors' reception hours, etc.).</p>

		<p>Working Hours: Monday – Friday from 8 am to 9 pm Saturday from 9 am to 6 pm</p> <p>Dentistry: Monday – Friday from 8 am to 8 pm Saturday from 9 am to 4 pm</p> <p>Pediatric Department: Monday – Friday from 8:30 am to 8 pm Saturday from 9 am to 3 pm</p> <p>Home Visits: during working hours of the Polyclinic.</p> <p>Ambulance Team: 24/7 – 8 495 775 09 99*0 (GVA)</p> <p>Please make sure you can provide your insurance policy number written on the front of the blue plastic card you have received.</p>
7	<p>How to make an appointment?</p> <p>To make an appointment for the 1st time:</p> <p>*What is the Card?</p> <p>*What is the Pass?</p> <p>To make subsequent appointments:</p>	<p>For outpatient treatment, including dental care and home visits it is necessary to contact the Polyclinic.</p> <p>! On your 1st visit to the Polyclinic you will need to obtain a Card* and a Pass*. So please inform the contacting specialist that this is your 1st visit to the Polyclinic. You need to call: The reception of the Polyclinic: 8 499 237 17 06 or 8 495 775 09 99*0 (GVA) You will need to provide your full name, age. ! If you want to make an appointment for your family member it is necessary to provide HIS/HER full name, age, N^o of the Policy.</p> <p>The Card issued by the Polyclinic, contains medical information on the health condition of the patient, and is kept at the registration office of the medical facility.</p> <p>The Pass issued by the Polyclinic, ensures your admission to the facility, and is obligatory for medical assistance. Both the Card and the Pass are issued at room 114, 1st floor of the medical facility. The following documents are required: your Policy, Passport and 1 photo. Room 114 working hours: - Monday - Friday – 8 am – 9 pm - Saturday – 9am – 6 pm - Sunday – closed ! Please make sure to arrive approximately 30 minutes before the appointment time to obtain the Card and the Pass.</p> <p>You need to call: The reception of the Polyclinic: 8 499 237 17 06 or 8 495 775 09 99*0 (GVA) You will need to provide your full name, age, N^o of the Card/Pass (they coincide). ! If you want to make an appointment for your family member it is necessary to provide HIS/HER full name, age, N^o of the Policy, N^o of the Card/Pass.</p>
8	<p>What should you do if a doctor at an appointment at a medical facility says that a certain service cannot be provided?</p>	<p>It's necessary to call 8 495 775 09 99*0 (GVA) <u>1st option</u> The specialist will determine the lawfulness of the denial and specify the relevant clause in the VHI programme that confirms it. <u>2nd option</u></p>

		<p>The specialist will determine the possibility of the service's coverage and contact the doctor to confirm further provision of the service.</p> <p><u>3^d option</u></p> <p>The specialist will determine the possibility of the service's coverage and arrange the service provision in another medical facility, informing the Insured about the address of the medical facility, the date and the time beforehand.</p> <p>You will need to provide your full name, age, N^o of the Policy, and the reason for refusal.</p>						
9	What is emergency medical care?	Emergency medical care is provided in life-threatening situations (fever, traumas, pains, etc.)						
10	What is the emergency phone number?	<p>It is necessary to call 8 495 775 09 99*0 (GVA)</p> <p>Emergency medical care is provided within Moscow and up to 30 km from Moscow Ring Road (MRR).</p> <p>It is necessary to provide your full name, age, N^o of the Policy, the address where the doctor is needed and the problem.</p> <p>If you want to call an ambulance for your family member it is necessary to provide HIS/HER full name, age, N^o of the Policy, the address and the problem.</p> <p>If you speak Russian you may also call 103 (for calls from local fixed telephones) or 112 (for calls from mobile telephones).</p>						
11	Is emergency care provided all over Russia, in any city/town (during business trips, vacations)?	<p>Emergency medical care will be provided in any Russian city. For getting of Emergency medical care it is necessary to call 8 495 775 09 99*0 (GVA)</p> <p>You should provide full name, age, N^o of the Policy, the address where the doctor is needed, and the reason for a doctor's visit.</p> <p>If you speak Russian you may also call 103 (for calls from local fixed telephones) or 112 (for calls from mobile telephones).</p>						
12	Is medical assistance provided outside Russia?	No.						
13	In what cases and how is a home visit arranged?	<p>Home visits are provided within Moscow and up to 30 km from Moscow Ring Road on medical grounds only to the Insured who cannot visit a medical facility due to health conditions, and needs to stay in bed and be examined by a physician at home.</p> <p>To arrange a home visit, please call the Polyclinic: 8 499 237 17 06</p> <p>If it is impossible to reach the Polyclinic by phone or to get support in English please call 8 495 775 09 99*0 (GVA)</p> <p>Home visit calls are taken by Polyclinic every day except Sunday: For adults from 8:00 am to 4:00 pm For children from 8:00 am to 12:00 pm</p> <p>Home visits are made during the working hours of the Polyclinic:</p> <table border="1"> <tr> <td>For adults</td> <td>For children</td> </tr> <tr> <td>Monday 8 am – 9 pm</td> <td>Monday 8:30 am – 8 pm</td> </tr> <tr> <td>Saturday 9 am – 6 pm</td> <td>Saturday 9 am – 3 pm</td> </tr> </table> <p>In case of serious health problems after 1 pm or on Sunday you may call emergency care - 8 495 775 09 99*0 (GVA).</p> <p>You will need to provide your full name, age, number of the Card/Pass (they coincide), the address where the doctor is needed, and the reason for home visit.</p> <p>If you wish to arrange a home visit for a family member it is necessary to provide HIS/HER full name, age, N^o of the Policy, the address where the doctor is needed, and the reason for home visit.</p>	For adults	For children	Monday 8 am – 9 pm	Monday 8:30 am – 8 pm	Saturday 9 am – 6 pm	Saturday 9 am – 3 pm
For adults	For children							
Monday 8 am – 9 pm	Monday 8:30 am – 8 pm							
Saturday 9 am – 6 pm	Saturday 9 am – 3 pm							

14	What should be done if a Russian-speaking doctor came for a home visit?	It is necessary to call 8 495 775 09 99*0 (GVA) The specialist will try to specify the problem by phone and will be able to translate the doctor's consultation and prescription.
15	If an emergency admission to the hospital is required	<u>If you are at an appointment at the Polyclinic:</u> <ul style="list-style-type: none"> - The Polyclinic doctor contacts the insurance company over the phone and states the emergency admission necessity. - The insurance company specialist arranges admission to one of the facilities in accordance with the VHI programme. - If transportation from the Polyclinic is required, the insurance company employee arranges it in an ambulance car <u>If you are at home:</u> A doctor from an ambulance team states the necessity of emergency admission <ul style="list-style-type: none"> - The doctor contacts the insurance company and states the necessity for emergency admission - The insurance company specialist arranges the admission to one of the facilities in accordance with the VHI programme. - The transportation to the hospital is carried out in an ambulance car.
16	If a planned admission is required	<u>If you are at an appointment at the Polyclinic:</u> <ul style="list-style-type: none"> - The Polyclinic doctor contacts the insurance company and states the planned admission necessity. - The insurance company specialist arranges a consultation prior to hospital admission in accordance with the programme at one of Moscow hospitals (to be considered per case). - Before hospital admission you are to have required medical tests at the Polyclinic - You will be informed on the exact time and location of admission. <u>If you are at home:</u> <ul style="list-style-type: none"> - The Polyclinic doctor states the planned admission necessity - It is necessary to call 8 495 775 09 99*0 (GVA) - You will be informed on the exact time and location of admission.
16	What should be done if arrangement of medical services, which are impossible to obtain in the covered by the plan facilities, is necessary?	It is necessary to contact 8 495 775 09 99*0 (GVA) If you speak Russian you are welcome to call "AlfaStrakhovanie" at 495 755 88 77, 495 258 52 58
17	On issues related to medical assistance organizing:	It is necessary to contact 8 495 775 09 99*0 (GVA) If you speak Russian you are welcome to call "AlfaStrakhovanie" at 495 755 88 77; 495 258 52 58
18	What should be done if: - you cannot settle the problem with " AlfaStrakhovanie "; - you want to comment on " AlfaStrarkhovanie " services; - you or your family member have lost the Policy	Contact the Social Service Department of National Research University – Higher School of Economics . Tel.: 8 495 621 70 78 Contact persons: Kiruhina Galina Viktorovna e-mail: gkiruhina@hse.ru Natalia Romanova (English speaking) e-mail: nsromanova@hse.ru Address: 20, Myasnitskaya street, room 326K, 9:30 am - 6 pm.

Scope of Services

OUTPATIENT CARE:

Treatment and Diagnostic Visits to Physicians:

- first-time, repeated, consulting visits to specialists: general physician, pulmonologist, cardiologist, gastroenterologist, urologist, gynecologist-endocrinologist, neurologist, ophthalmologist, otolaryngologist, surgeon, endocrinologist, dermatologist, proctologist, allergologist, traumatologist, orthopedist, angiologist, phlebologist, mammologist, radiologist, infectious disease physician, physical therapist, arthrologist, neurosurgeon and other specialising doctors;
- Consultations with doctors-specialists (till the diagnosis is set): oncologist, hematologist, rheumatologist, nephrologist, physiotherapist (1 visit).
- preparation for planned surgery;
- consultations and council of highly-qualified physicians-specialists from clinics and specialized departments;
- issuing of medical documents: temporary disability assessment (issue of sick leave certificates), issue of drug prescriptions (except for discounted ones), issue of medical certificates (including for sending children to school and kindergarten), references and extracts from medical records on medical indications.

Diagnostic examination:

- laboratory diagnostics: biochemical tests, hormonal tests (aside from defining reproductive hormones), coagulological tests, micro-biological tests, general clinical tests, PCR-diagnosis, serotests, cytological and histological tests;
- diagnosis of sexually transmitted diseases (STD) using cultural, serological and PCR methods (not more than 5 positions during contract validity), control examination on detection of the diseases after treatment;
- diagnosis of allergic diseases: skin allergy tests, overall immunoglobulin E test; cancer-specific markers (if medically required),
- instrumental diagnostic methods: X-ray tests, including mammography; endoscopic examination; ultra-sound examination, including Doppler sonography; extra- and transcranial scan of blood vessels; radio-isotope tests (except for positron emission tomography); computer tomography, MRI (including soft tissues); operative and anaesthetic support;
- functional diagnostics: electrocardiography, echocardiography, daily monitoring AD and EKG, bicycle ergometry, phonocardiography, determination of external respiration, electroencephalography, rheoencephalography, reovazography, EKG Holter monitoring, colonoscopy, spirometry.

Procedures and therapeutic manipulations:

- procedures and operative treatment not involving hospitalization and performed with local anesthesia;
- physiotherapeutic procedures: electrotherapy, light therapy (except for ultraviolet irradiation of blood), magnetotherapy, heattherapy, lasertherapy (except for laser irradiation of blood), inhalations, balneotherapy (except wellness swimming in the pool), underwater traction and hydro massage), ultrasound therapy;
- therapeutic massage; (1 series of treatments – not more than 10 procedures during Contract validity)
- group exercise therapy; (1 series of treatment – not more than 10 treatments during Contract validity);
- manual therapy (1 series of treatments– not more than 10 procedures during Contract validity);
- standard corporeal acupuncture (1 series of treatments– not more than 10 procedures during Contract validity);
- immunopreventive events (vaccinations against the flue – once during Contract validity);
- shock-wave therapy in Traumatology (1 series of treatments – not more than 5 procedures during Contract validity)
- outpatient services (consulting, diagnostic examination, therapeutic procedures) for diabetes II type (except for its complications) – not more than 2 cases per staff team during Contract validity);
- outpatient treatment;
- hospital-replacing medical services (medical services in the "day hospital" or "1 day hospital"),
- prehospitalization examination;
- pregnancy follow-up with pregnancy duration till 8th week. Abortion if medically prescribed;
- treatment of skin diseases, except for services for removing cosmetic defects, including for improving the psychological state of the Insured person;
- treatment of acute hepatitis.

Minor surgery operations in outpatient facilities

Minor surgery, all manipulations, procedures, injections are provided using disposable materials.

Annual influenza vaccination.

Flu vaccination with imported vaccine 1 time per Contract validity (arranged in the office of the Policyholder or in the clinic at the option of the Insurer "AlfaStrakhovanie" PLC).

Prophylactic Medical Examination

Prophylactics medical examination includes visits to the following specializing doctors:

- therapist
- surgeon
- neurologist
- ophthalmologist (with computer tonography, biomicroscopy)
- radiologist.

Additionally for women: Checkup by obstetrician-gynecologist (with taking material for testing the flora and cytology);

Additionally for men: checkup by urologist, including testing the smears;

- clinical analysis of blood (haemoglobin, color index, erythrocytes, leukocytes, platelets, leukogramj, erythrocyte sedimentation rate/ESR);
- clinical urine analysis;
- ECG (electrocardiography) in 12 leads with a medical report;
- chest X-ray.

After the prophylactic medical examination the doctor-therapist issues a medical report with recommendations.

DENTAL CARE:

- Visits to dentists: General Practitioner (GP), surgeon, parodontologist, podiatrist (1 visit);
- diagnostic tests: teeth X-ray and radio-visiography, orthopantomography (if 3 or more teeth must be treated), electro-odontodiagnosis;
- local anesthesia: application, infiltration, or block anesthesia;
- general anesthesia (narcosis) – if medically prescribed.
- treatment dentistry: treatment of caries cavities, treatment of pulpitis and periodontitis: mechanical and medication treatment of canals, filling teeth canals using cold gutta-percha points, filling pastes; filling of caries cavities and tooth crown restoration if less than ½ of the crown is destroyed (including using anchor posts) with light-hardening materials and chemically-hardening materials; treating diseases of the nerves in the maxillo-facial area; diseases of salivary glands; treatment of inflammatory diseases of the oral and maxillofacial area;
- physiotherapy services (if medically prescribed for treating complicated caries and complications after extracting teeth), including depophoresis;
- treatment of non-carious lesions of teeth (wedge-shaped defect).
- surgical dentistry: teeth extraction (including retained and dystopic), opening of abscesses, husking cysts during the extraction of teeth; treatment of injuries of the maxillofacial region, incision when periostitis, periodontitis, mucous excision of the "hood" when pericoronitis, removal of benign tumours of the maxillofacial area;
- dental care in acute pain (relief of acute condition) including under orthopedic constructions without filling canals);
- relief of acute conditions in periodontal disease: an autopsy of periodontal abscesses, periodontal imposition of medical dressings, medicated treatment of pathological periodontal pockets (once during the term of the contract).
- removal of supragingival dental plaque, including with Air-Flow (1 time during the current Contract validity; when dental calculus is removed, it is allowed to use not more than one method per each tooth);
- dental treatment with fluoride agents (1 time per year);
- prosthodontics (without implants, use of precious metals and metal ceramics) is paid when the necessity for it arose as a result of injuries to maxillofacial areas that occurred during the contract validity.
- dental care in acute pain (including medical vehicle transportation to health institution from 23.00 to 6.00); (transportation is provided by an ambulance team within the service territory specified in the insurance Programme)

HOME CARE:

Home care is provided if the Insured person cannot visit a clinic due to his/her health status and needs bed rest and to be monitored by a physician at home:

medical assistance (initial consultation by physician, active care till recovery, issuing sick leave certificates, prescribing necessary treatment, consultations by physicians-specialists).

services provided by nursing staff as prescribed by the physician;

tests taken by laboratory assistants (except for feces test for dysbacteriosis), if prescribed by the physician.

Home care is provided **in Moscow** and **within 30 km outside Moscow MKAD Ring Road**.

AMBULANCE SERVICES:

Ambulance services are provided 24/7 **in Moscow** and **within 30 km outside Moscow MKAD Ring Road**.

Scope of services:

- visit of a qualified ambulance team to the residential or office address of Insured person at any time of day, patient examination;
- express-diagnostics, Urgent medical assistance, relief of acute conditions;
- medical transport to inpatient treatment medical facility in case urgent admission to hospital is required. Specialized ambulance cars must be fully equipped with relevant facilities and medical drugs.

INPATIENT CARE:

EMERGENCY ADMISSION (EMERGENCY AND PLANNED ADMISSION TO HOSPITAL)

Staying in a 1-2 bed hospital room; meals, treatment with medications.

Emergency admission to hospital takes place when life-threatening diseases develop and require that the Insured Person be promptly admitted to hospital.

Inpatient care is provided for surgical diseases in the following departments: abdominal, thoracic, cardiovascular, cardiocirculatory, traumatology, neurosurgery, urology, gynecology, otolaryngology, ophthalmology and general surgery department. Admission to these hospital departments is provided in case of acute and acute chronic diseases for the following purpose:

- extended diagnostics examination by (if prescribed) computer and MRI, ultrasound Doppler sonography, up-to-date endoscopic methods, angiography;
- providing qualified and specialized medical assistance, including traditional surgical methods as well as X-Ray-endovascular surgery, laser surgery, endoscopic surgery, surgery with non-traumatic methods: lithotripsy and laparoscopic operations.

Rendering services related to therapeutic diseases in the following departments: therapeutic, cardiological, pulmonary, rheumatologic, neurological, endocrinologic, gastroenterological, infectious and dermatologic departments. Stay of the Insured person in the inpatient department of the therapeutic shall cover:

- extended diagnostics examination by (if prescribed) computer and MRI, ultrasound Doppler sonography, up-to-date endoscopic methods, Holter monitoring, transoesophageal electrocardiography;
- extended medical drug therapy and treatment manipulations, including all types of massage, acupuncture, manual therapy, hydrotherapy, physiotherapeutic procedures;
- rehabilitation treatment based on the decision of clinical-experts commission of medical facility after the insured event inpatient treatment;
- basic life support and neurosurgical operations for traumas that happened during the Insurance Contract validity;
- extracorporeal treatment methods: hemodialysis, plasmapheresis, hemosorption, hemofiltration, ultraviolet and laser blood irradiation, ozonation etc. (in intensive care);
- reconstructive treatment of cardiovascular diseases (incl. coronary artery bypass surgery and stenting) under emergency admission to hospital if medically necessary (without the cost of expendable materials);
- ectopic pregnancy (within the framework of emergency hospitalization for health reasons).

Hospitals (emergency and planned admission):

1. **Central Clinical Hospital of the Presidential Administration of the Russian Federation**
(15 Marshala Timoshenko Ul, Moscow);
2. **Clinical Hospital of the Presidential Administration of the Russian Federation**
(40 Otkrytoye Shosse, Moscow);
3. **Clinical Hospital No.1 of the Presidential Administration of the Russian Federation**
(10 Starovolynskaya Ul., Moscow);
4. **Medincentre Hospital of the Main Administration for Service to the Diplomatic Corps**
(4, Corpus 5, 2nd Botkinsky Proezd, Moscow);
5. **National Pirogov Medical Surgical Centre of the Ministry of Health Care and Social Development of the Russian Federation**
(70 Nizhnyaya Pervomayskaya Ul., Moscow);
6. **Health and Rehabilitation Centre of the Ministry of Health Care and Social Development of the Russian Federation**
(3 Ivankovskoye Shosse, Moscow);
7. **Civil Aviation Central Clinical Hospital**
(7 Ivankovskoye Shosse, Moscow);
8. **Scientific Research Institute of Hematology and Intensive Therapy of the Russian Academy of Medical Sciences**
(4 Novy Zykovsky Proezd, Moscow);

9. **Center of Endosurgery and Lithotripsy (CELT)**
(62 Shosse Enthusiastov, Moscow);
10. **Bakoulev Scientific Center for Cardiovascular Surgery**
(135 Rublevskoye Shosse, Moscow);
11. **Russian Cardiology Research-and-Production Complex of the Ministry of Health Care and Social Development of the Russian Federation**
(15a 3rd Cherepkovskaya Ul., Moscow);
12. **Municipal City Clinical Hospital No. 31**
(20 Lobachevskogo Ul., Moscow);
13. **Priorov Central Scientific Research Institute of Traumatology and Orthopaedics of the Ministry of Health Care and Social Development of the Russian Federation**
(10 Priorova Ul., Moscow).

Exclusions from the Programme

The official names of medical conditions are specified in accordance with the International Statistical Classification of Diseases and Related Health Problems (10th revision), as adopted by the World Health Organization, or in accordance with classifications of diseases, as recognized by professional medical associations.

The following diseases/conditions and related aggravations shall not be considered as an Insured Event, unless otherwise stated in the List of Services. Medical services, provided with respect to such diseases/conditions and related aggravations in the period after establishing a diagnosis, shall not be covered by the Insurance Company:

1. Malignant tumours of all organs and tissues (e.g., hematologic cancer); benign tumours of the central nervous system;
 2. Congenital malformations (birth defects), deformations and chromosomal abnormalities; hereditary diseases;
 3. Systemic, atrophic and degenerative diseases of the nervous system; Parkinson's disease and secondary forms of Parkinsonism; cerebral palsy;
 4. Rhonchopathy; sleep apnea;
 5. Infections characterized by a predominantly sexual mode of transmission; HIV and HIV-associated disorders, and related complications; tuberculosis; generalized and visceral forms of fungal infections;
 6. Extremely dangerous infectious diseases: smallpox, plague, anthrax, cholera, highly contagious viral hemorrhagic fevers, and other extremely dangerous infections (according to regulations adopted by official healthcare authorities);
 7. Immunodeficiency disorders and diseases manifested owing to acquired immunodeficiency syndrome (AIDS);
 8. Mental and behavioural disorders (e.g., related somatic illnesses and injuries); disorders associated with substance abuse (e.g., alcoholism, drug addiction, substance abuse, nicotine addiction, etc.), including somatic diseases caused by the use of such substances;
 9. Disorders and injuries occurring as the result of the Insurance Policy Holder's actions in a state of intoxication caused by the consumption of psychoactive substances (e.g., alcohol, drugs and various toxic substances, psychotropic drugs, etc.);
 10. Disorders and injuries occurring as the result of the Insurance Policy Holder's self-harm (e.g., suicide attempts);
 11. Disorders and injuries occurring as a result of the Insurance Policy Holder's actions related to committing an intentional crime;
 12. Diabetes mellitus (beyond the scope of the Insurance Plan);
 13. Chronic hepatitis; liver cirrhosis; amyloidosis;
 14. Diseases aggravated by chronic renal and/or hepatic failure that require extracorporeal therapy;
 15. Occupational diseases; diseases whereby the Insurance Policy Holder is assigned to the Type 1 or 2 disability group;
 16. Diseases that require transplantation, installation of implants or prosthetic care to replace organs and tissues;
 17. Infertility, impotence diagnostics and treatment;
 18. Medical services related to pregnancy (beyond the scope of the Insurance Plan), childbirth and related complications (except for ectopic pregnancy and abortion when indicated);
 19. Nutrition disorders (e.g., obesity);
 20. Disorders and injuries occurring as the result of: acts of terrorism, natural disasters, the Insurance Policy Holder's participation in any form of military operations, civil unrest and disturbances, unauthorized meetings and related manifestations.
- The following medical services and expendables shall not be covered by the Insurance Company, unless otherwise expressly stated in the List of Services:

1. Services provided without medical evidence or a doctor's prescription, at the Insurance Policy Holder's request;
2. Preventive or rehabilitation services (e.g., dental care);
3. Services prescribed and/or rendered at a medical institution not included in the Insurance Plan, or without the prior consent of the Insurance Company;
4. Services beyond the List of Services;
5. Services rendered for aesthetic or cosmetic reasons, or for improving the mental condition of the Insurance Policy Holder (e.g., treatment of soft tissues and skin diseases and related excrescences, such as calluses, warts, papillomas, nevus, lipomas, ingrown nail without signs of inflammation and/or alopecia; vein sclerotherapy; weight management; consultations and therapy with a speech therapist);
6. Psychotherapeutic services; services provided by a psychologist;

7. Traditional diagnostic and therapy methods relating to traditional, alternative and popular medicine (e.g., homeopathy, Voll's method, hirudotherapy, phytotherapy, Cubo therapy, halotherapy, and speleotherapy); proprietary and experimental diagnostic and/or treatment technologies, which have not been certified and approved by the Health Ministry of the Russian Federation;
 8. Family planning services: selection of contraception methods and related monitoring procedures; intrauterine device insertion and removal (except for removal when specified for medical reasons), etc.;
 9. DNA tests; positron emission tomography;
- Extracorporeal methods of treatment, including: haemodialysis, plasmapheresis, haemosorbition, haemofiltration, UV and laser irradiation of blood, ozone treatment, normo-, hyper- and hypobaric oxygenation, etc. (except in cases of emergency assistance necessary during life-threatening situations when the Insurance Policy Holder is under intensive care);
11. Individual exercise therapy; physiotherapeutical rehabilitation and wellness capsules (e.g., use of Alpha-capsule); hydro and mud therapy; mechanical therapy; mechanical massage; colon hydrotherapy; training and exercise equipment; solarium; pool; sauna; etc.;
 12. Specific immunotherapy;
 13. Dental care services: orthodontic services and related preparations; orthopaedic services (e.g., dental prosthetics), including related preparations; implantation and related preparations; replacement of fillings and teeth filling for cosmetic and prophylactic purposes; tooth crown restoration if more than one half of a patient's crown is destroyed; vertical condensation, thermoplastic composites; closing perforations (e.g., the use of Pro Root); deep teeth fluoridation; cosmetic dental care (e.g., teeth whitening, removal of pigmented plaque, beyond the scope of the Insurance Plan; artistic dental restoration, veneering); hygienic services; teeth preservation operations (e.g., dental hemisection, apical ectomy, cystectomy, cystotomy, etc.); periodontal disorders treatment, beyond the scope of the Insurance Plan; plastic surgery; conditional dental care (without guaranteed results); planned oral cavity sanitation; use of intraoral cameras, dental microscope, and laser dental installations;
 14. Planned eye surgery (e.g., laser corrective eye surgery) and inpatient treatment related to: refraction and accommodation disorders (e.g., myopia, hyperopia, astigmatism, etc.), glaucoma, cataract, retinal detachment, strabismus; physiotherapeutic methods of vision correction (e.g., photo- and magnetic stimulation, etc.); instrumental training for visual accommodation; instrumental methods for myopia treatment and prevention;
 15. The following diagnostic and treatment methods, including related inpatient treatment: cardiac surgery and endovascular techniques (e.g., electrophysiological study and radiofrequency ablation) beyond the scope of the Insurance Plan; complex reconstructive surgery (e.g., application of anastomoses and bypass grafts, prosthetic appliances, stents, etc.), except in cases when emergency assistance is needed in life-threatening situations; plastic surgery (e.g., septal reconstruction, except for treatment of trauma that occurred during the period of the insurance contract); organ and tissue transplants (except for blood transfusions);
 16. Home care; medical rehabilitation beyond the scope of the Insurance Plan; treatment at health resorts; hospital admission for the purpose of providing nursery care;
 17. Dispensary supervision, preliminary and regular medical examinations of employees;
 18. Services, relating to the issue/extension of personal medical record books and medical certificates, including certificates of fitness for a driver's license, attending sports and rehabilitation facilities, travelling abroad, employment, and admission to educational institutions, obtaining gun licenses, etc.; other services relating to medical and social expert reviews; services relating to the issue of sanatorium and health resort cards;
 19. Expendables required for providing medical services (e.g., prostheses, endoprostheses, implants, stents, cardiac pacemakers, wire guides, contrast agents, surgical hardware, etc.); medical equipment, glasses, contact lenses, hearing aids and other medical devices; products and appliances intended for nursery care (e.g., personal care products, etc.); drugs prescribed as part of the provision of outpatient treatment;
 20. Pre-hospital admission examination, if the Insurance Policy Holder's Plan does not provide for planned inpatient admission.