

HEALTH Insurance

Insurance product information document

SegurCaixa Adeslas, S.A. de Seguros y Reaseguros

Spain - Code Directorate - General for Insurance and Pension Funds: C-124

Product: Adeslas PLENA EXTRA

This document is presented for informative purposes only to detail the product's main features, and so does not constitute coverage on the part of the insurer nor the acceptance of risk by such insurer. Complete pre-contractual and contractual information on the insurance policy is provided in other documents.

What is this type of insurance?

The Adeslas Plena Extra insurance policy is a mixed insurance policy enabling the healthcare expenses refund system to be combined with the healthcare assistance policy through the Healthcare Provider List agreed by the insurer, to access the chosen medical professionals and centres. In both cases, insured parties can enjoy medical and surgical care, ER services, specialisms, diagnostic methods and hospitalisation.



What is insured?

- ✓ Primary care: general medicine, paediatrics and nursing service.
- ✓ Emergency care at centres with which the insurer has an agreement and at home.
- ✓ Surgical medical specialisms: allergology, digestive system, cardiology, surgery, obstetrics and gynaecology, ophthalmology, medical and radio-therapeutic oncology, ENT, clinical psychology, rehabilitation, internal medicine, traumatology, urology, etc.
- ✓ Diagnostic means: clinical analyses, general radiology, high technology diagnostic means such as NMR, CAT scan, etc.
- ✓ Hospitalisation: surgical, medical, paediatrics, ICU, psychiatric and day hospital.
- ✓ Implants and surgical prostheses: pacemakers, internal traumatological prostheses, monofocal and bifocal lenses, etc.
- ✓ Special treatments: speech therapy and phoniatry, laser therapy, chemotherapy and radio-therapeutic oncology, pain treatment, etc.
- ✓ Bone marrow, cornea, heart, lung, liver and kidney transplants.
- ✓ Other services: ambulance, birth preparation and chiropody.
- ✓ Healthcare abroad as a result of an illness or accident occurring during a trip: includes medical, surgical, pharmaceutical or hospital assistance. This coverage also includes: emergency dental treatment, healthcare transportation or medical repatriation, expenses of returning home after hospital discharge, etc.

Furthermore, the complementary module Adeslas Family Dental can be taken out on an optional basis.



What is not insured?

- ✗ Healthcare assistance due to alcoholism, drug addiction and self-harm.
- ✗ All pharmaceutical drugs and medication.
- ✗ Injuries caused by the professional practice of any sport and/or activity.
- ✗ Congenital illnesses prior to taking out the insurance policy.
- ✗ Aesthetic and/or cosmetic treatments and operations.
- ✗ Treatments or tests not verified scientifically and/or through experiments.
- ✗ Residence or stay exceeding nine months abroad.



Are there any restrictions on cover?

- ! With regard to the services included in the refund system, the insurer will refund 80% of the expenses, up to a maximum of 150,000 euros per person and insurance annuity. Such refundable services are subject to the partial limits detailed in the contract, some of which are as follows:
 - ! Outpatient care: 40,000 euros.
 - ! Surgery: 40,000 euros.
 - ! Prosthesis: 3,500 euros.
 - ! Hospital expenses: 1,000 euros per day at hospital, 1,300 euros per day in the ICU and 500 euros per day at a day hospital.
 - ! Maternity: 5,000 euros.
 - ! Congenital diseases: 8,000 euros.
 - ! Psychiatric hospitalisation is limited to 60 days per year per person.
 - ! Clinical psychology is limited to 20 sessions, or 40 sessions in the case of eating disorders, per year and per person.
 - ! Chiropody is limited to 12 sessions per year.
 - ! To access any of these services, three, six or ten months must have elapsed from the date on which they were taken out, as defined in the contract.
 - ! Travel assistance abroad will be limited to 12,000 euros per year per person (with the sub-limits detailed in the contract). The maximum stay covered abroad cannot exceed 90 consecutive days per trip or journey.

HEALTH Insurance

Insurance product information document

SegurCaixa Adeslas, S.A. de Seguros y Reaseguros

Spain - Code Directorate - General for Insurance and Pension Funds: C-124

Product: Adeslas PLENA EXTRA



Where am I covered?

The territorial area for the main insurance coverage is:

- ✓ **Healthcare assistance:** in Spain, at healthcare centres with which an agreement exists with the insurer.
- ✓ **Expense refund system:** expenses can be refunded at medical centres throughout the world chosen by the insured party, provided that he/she does not reside outside of Spain for more than nine months a year.
- ✓ **Travel assistance abroad:** extends throughout the world to trips of less than 90 days.



What are my obligations?

- To state in the health questionnaire, before taking out the policy, all known circumstances that may influence the risk assessment, in accordance with your state of health.
- To provide the insurer with the medical information and documentation required, where appropriate.
- Payment of the insurance.
- Use the centres with which the insurer has an agreement to access the healthcare service.
- Identify yourself with your healthcare card, which is personal and non-transferable.
- To receive a refund for healthcare expenses, the insured party must submit a refund request form, together with the invoices detailing the healthcare expenses incurred, duly filled in, the prescription and the medical reports requested.



When and how do I pay?

Payment method: direct debit.

Payment frequency: yearly, half-yearly, quarterly, two-monthly or monthly, to be agreed between the customer and the insurer.

Date of first payment: on the date of commencement of the insurance policy.

Date of successive payments: the first day of the month in accordance with instalments.



When does coverage start and end?

Start date: to be agreed between the customer and the insurance company.

End date: determined in line with that agreed in the contract.

Renewal: automatic by yearly payment, unless objections are raised by any of the parties.



How do I cancel the contract?

The contracting party can oppose the renewal of the insurance policy by providing signed written notification to the insurer at least one month before the end of the insurance contract.