

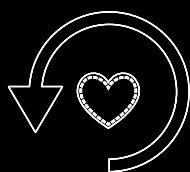
REFUND POLICY
Guide

Adeslas



CONTENTS

1. Introduction	4
Presentation	6
Documentation received by the insured party	8
Customer services	8
2. Conditions of use	10
Expense refund system	12
Notification of claims	12
Expense refund procedure	13
IUD expense refund procedure	15
Healthcare assistance system. Use of healthcare service provider system	15
Combined use of services	18
3. Travel assistance abroad	22
4. What must I do?	26



Adeslas **REFUND**

1. INTRODUCTION



1. INTRODUCTION

PRESENTATION

Adeslas, the leader in health insurance has a range of refundable products that offer you the possibility to choose healthcare assistance anywhere in the world.

The Adeslas Refund insurance is a mixed insurance service, including expense refunds (for medical services used outside of the Healthcare Service Provider List) and healthcare assistance (provided with an arranged healthcare service system), through three types of schemes:

EXPENSE REFUND SYSTEM

As an insured party, you can access any healthcare service, not included in our healthcare service provider systems, both in Spain and abroad. In this case, the company will refund the invoices that you have paid, provided that the healthcare service received is covered by the policy conditions with the limits established therein.

HEALTHCARE ASSISTANCE SYSTEM

As an insured party, you receive a free medical service, through the doctors and clinics included in our extensive healthcare service provider systems arranged throughout Spain.

Visit:

www.segurcaixaadeslas.es/cuadromedico

COMBINED ASSISTANCE

Consists of the combined use of the previous two systems: services arranged through the company's healthcare service provider system or the choice of any doctor not included on the Healthcare Service Provider List anywhere in the world. The combined use of services enables you to freely alternate between both systems, the arranged healthcare service provider system or the refund system, within the same medical process.

1. INTRODUCTION



1. INTRODUCTION

DOCUMENTATION RECEIVED BY THE INSURED PARTY

With the Adelas' Refund policy taken out by you, you will receive the following documentation:

- General Terms and Conditions, Special Terms and Conditions, Specific Terms and Conditions of the policy and supplementary travel assistance abroad policy.
- Adelas card for all insured parties.
- Expense refund application forms.
- Policy guide: the document that you are reading now.

CUSTOMER SERVICES

OFFICES

Adelas has an extensive network of offices throughout Spain, earmarked to provide services to the insured parties:

- Processing of authorisations for the services required.
- Advisory services, at the insured party's choice, on the use of services arranged or otherwise in Spain.
- Procedures to be followed to obtain authorisations.
- Authorisation of diagnostic tests and rehabilitation treatments.
- Information and arrangement of new insurance policies.
- General information of use for you.

1. INTRODUCTION

At segurcaixaadeslas.es you can access your Private Area and easily carry out your procedures:

- Request authorisations.
- Manage refunds.
- Search doctors and centres.
- Request a second medical opinion.
- Manage your policy and personal details.
- Make an appointment at Adeslas medical centres.



Adeslas **REFUND**

2. CONDITIONS OF USE



2. CONDITIONS OF USE

As a customer, you have access to top quality healthcare assistance throughout the world, since you can attend any doctor or hospital both in Spain and abroad, and receive healthcare assistance covered by the policy.

EXPENSE REFUND SYSTEM

HEALTHCARE SERVICES

You can attend any doctor or healthcare centre in the world, to receive services covered by the policy.

If the doctor or centre is not included on the insurer's Healthcare Service Provider List, the latter will refund you the relevant expenses in accordance with the Special Terms and Conditions of the policy.

As a private patient, you must request an invoice for the service received. This document, with the accreditation of having been paid, will enable you to request the corresponding indemnity from the insurer, in line with the limits agreed in the policy.

Remember that you will only be refunded for the healthcare expenses of the doctors and centres not included in our healthcare service provider systems. Consult your Healthcare Service Provider List at segurcaixaadeslas.es/cuadromedico.

NOTIFICATION OF CLAIMS

You must notify the insurer of any healthcare assistance received as soon as possible and, where appropriate, within seven days of the claim.

In the event of hospital admission, you must provide us with the following details within seven days: admission date, hospital and cause of admission.

2. CONDITIONS OF USE

Such details can be provided through your Private Area at www.segurcaixaadeslas.es.

You can also provide such details at our offices or by contacting Customer Services on 902 200 200.

If the hospital is included on the insurer's Healthcare Service Provider List, you must request authorisation from the company to be admitted.

EXPENSE REFUND PROCEDURE

To manage your refund quickly and easily, access your Private Area at www.segurcaixaadeslas.es.

Fill in the expense refund application form following the instructions and attach:

Originals or copies of invoices, with the accreditation that they have been paid. These documents must indicate the following details:

- Name and surname or registered office of the individual or legal entity that issues them.
- Address, telephone number, number of professional body and specialism.
- Tax ID No.
- Detailed breakdown of the various healthcare items included in the invoice: type of medical service and date provided.

2. CONDITIONS OF USE

Original or copy of clinical report, in the case of hospital admission.

Original or copy of medical prescriptions, in the case of diagnostic methods, special treatments, hospitalisation and other services (ambulance, oxygen therapy). Despite the foregoing, when requested to do so by the insurer, the insured party must provide the originals of the foregoing documentation.

The insured party must provide the company with an official translation of the documents drafted in languages other than the official languages of Spain.

When the documents contributed have been drafted in English or/French, and the insured party has not supplied a translation thereof, he/she provides his/her consent to the insurer to have said documents translated into Spanish. In such case, the insured party agrees to the insurer carrying out the translation.

The claims submitted will be assessed and the corresponding amount will be paid within 15 working days following the receipt of the aforementioned complete documentation.

The payment will always be made in euros. The invoices submitted in other currencies will be valued at the exchange rate applicable on the date on which the documentation is received.

Expenses will be settled through a bank transfer to the account from which your premiums are directly debited or to another account indicated by you by you in the expense refund application. Additionally, you will receive a detailed report on the valuation of your application's expenses. Should you require clarification regarding the process followed or the amounts settled, do not hesitate to contact Adeslas.

2. CONDITIONS OF USE

IUD EXPENSE REFUND PROCEDURE

To manage the refund of the cost of the IUD, enter your Private Area, click on the Contact/Claim menu. Include your invoice, medical prescription and bank details and a credit will be made to the agreed account.

HEALTHCARE ASSISTANCE SYSTEM USE OF HEALTHCARE SERVICE PROVIDER SYSTEM

HEALTHCARE SERVICES

Under this system, you can access all healthcare services in Spain free of charge, regardless of the geographical area in which the policy is taken out or the place of residence.

The updated services arranged with the company can be consulted at all times at www.segurcaixaadeslas.es.

MEANS OF ACCESS

You can receive healthcare:

Medical appointments: by calling the telephone number indicated in the Healthcare Service Provider List for each doctor.

Home assistance: your GP or nurse will attend your home when you cannot reach the surgery for health reasons. The home visit must be requested before 10 a.m. in order to be made on the same day.

ER: emergency services are clearly identified in the Healthcare Service Provider List provided by the Company. In this section, you can find the addresses and telephone numbers in the event of any emergency, requesting urgent home assistance.

2. CONDITIONS OF USE

Diagnostic tests, hospitalisation and other services: when a doctor prescribes one of these services, you must consult the insurer to check if its prior authorisation is required.

SERVICES REQUIRING PRIOR AUTHORISATION

Healthcare services requiring the prior authorisation of the company:

Appointments and hospitalisation:

1. Visit to specialist consultant.
2. Outpatient surgery
3. Admission to a health centre.
4. Day hospital.

Special diagnostic techniques on an outpatient basis or not performed under an admission system:

1. Special clinical analyses, karyotypes, genotypes, immunohistochemistry, molecular biology and maternal serum fetal DNA test.
2. Specialised radiology: angioradiology, digital angiography, interventionist radiology, nuclear magnetic resonance, CAT scan, PET.
3. Cardiocirculatory device: ergometry, vascular hemodynamics, Holter.
4. Nuclear medicine.
5. Fibroendoscopies: all types.
6. Neurophysiology: sleep studies.
7. Gynaecology: amniocentesis and amnioscopies.
8. Ophthalmology: fluorescein angiographies.
9. Urology: urodynamic studies.

2. CONDITIONS OF USE

Special surgical treatments and techniques:

1. Oncology: chemotherapy, immuno therapy, cobalt radiation therapy, radiotherapy and radioactive isotopes.
2. Rehabilitation: all techniques.
3. Home oxygen therapy, ventilation therapy and aerosol therapy.
4. Arthroscopy surgery.
5. Kidney lithotripsy.
6. Laser therapy.
7. Haemodialysis and peritoneal dialysis treatments
8. Pain unit treatments
9. Psychotherapy.

Interurban ambulance service or other extraordinary transportation means for periodic treatment.

OBTAINMENT OF AUTHORISATIONS

Such authorisation can be obtained quickly and easily in **your Private Area**.

For further information visit

www.segurcaixaadeslas.es/infoautorizaciones

You can also obtain such authorisation at our offices or by calling Customer Services 24 hours a day on **902 200 200**.



2. CONDITIONS OF USE

DOCUMENTS TO BE DELIVERED TO THE DOCTORS OR HEALTHCARE CENTRES

Whenever you receive healthcare assistance, you must present the doctor or hospital with the Adeslas card, and sign the receipt corresponding to the service provided.

If the service requires the prior authorisation of the company, you must hand over such authorisation before receiving the assistance.

Remember that you will not be refunded for the healthcare assistance expenses received from the doctors or centres included in the insurer healthcare service provider systems. In this case, the healthcare services are directly paid by the company and you only need to present the Adeslas card and sign the corresponding receipt for the service provided.

COMBINED USE OF SERVICES

HEALTHCARE SERVICES

Adeslas' Refund insurance policies can be used on a combined basis, alternating the two systems: refund of expenses or healthcare assistance with an arranged healthcare service provider system. In each case, you must follow the procedure for the access and use of the services described for each system.

2. CONDITIONS OF USE

EXPENSE REFUND LIMITS

The expense limits established in the policy are only applicable to the refund of expenses, not for the arranged services within the healthcare service provider system, which are directly paid by the company.

Services not included in the healthcare service provider system: In this case, the company will compensate you in line with the conditions agreed in the policy.

Arranged services (healthcare service provider system):

The company directly pays the doctor or health centre so you do not need to pay any amount. These expenses will not be counted for the purposes of establishing refund limits.



2. CONDITIONS OF USE

EFFICIENT USE IN THE COMBINED USE OF SERVICES

Remember that when you receive assistance outside of Adeslas' healthcare service provider system, you will be refunded part of the expense incurred by you, in accordance with the limits agreed in the policy. Accordingly, we advise you to follow the steps below in expensive healthcare processes:

1. Obtain an estimate of all the expenses to be incurred from the healthcare provider(s) not included in our healthcare service provider system: medical fees, diagnostic tests and hospital expenses.
2. Request information from the insurer regarding the amounts to be refunded under the policy.
3. Seek advice from the company regarding the optimum supplier combination (inside and outside the healthcare service provider system), which will enable the lowest payment.

You can avoid the payment of excesses and quantitative limits, using the services arranged regarding medical appointments, diagnostic tests, hospitals and special treatments. Consult the "Healthcare assistance system. Use of the healthcare service provider system" section of this document should you require the prior authorisation of the company.





Adelas **REFUND**

3. TRAVEL ASSISTANCE ABROAD

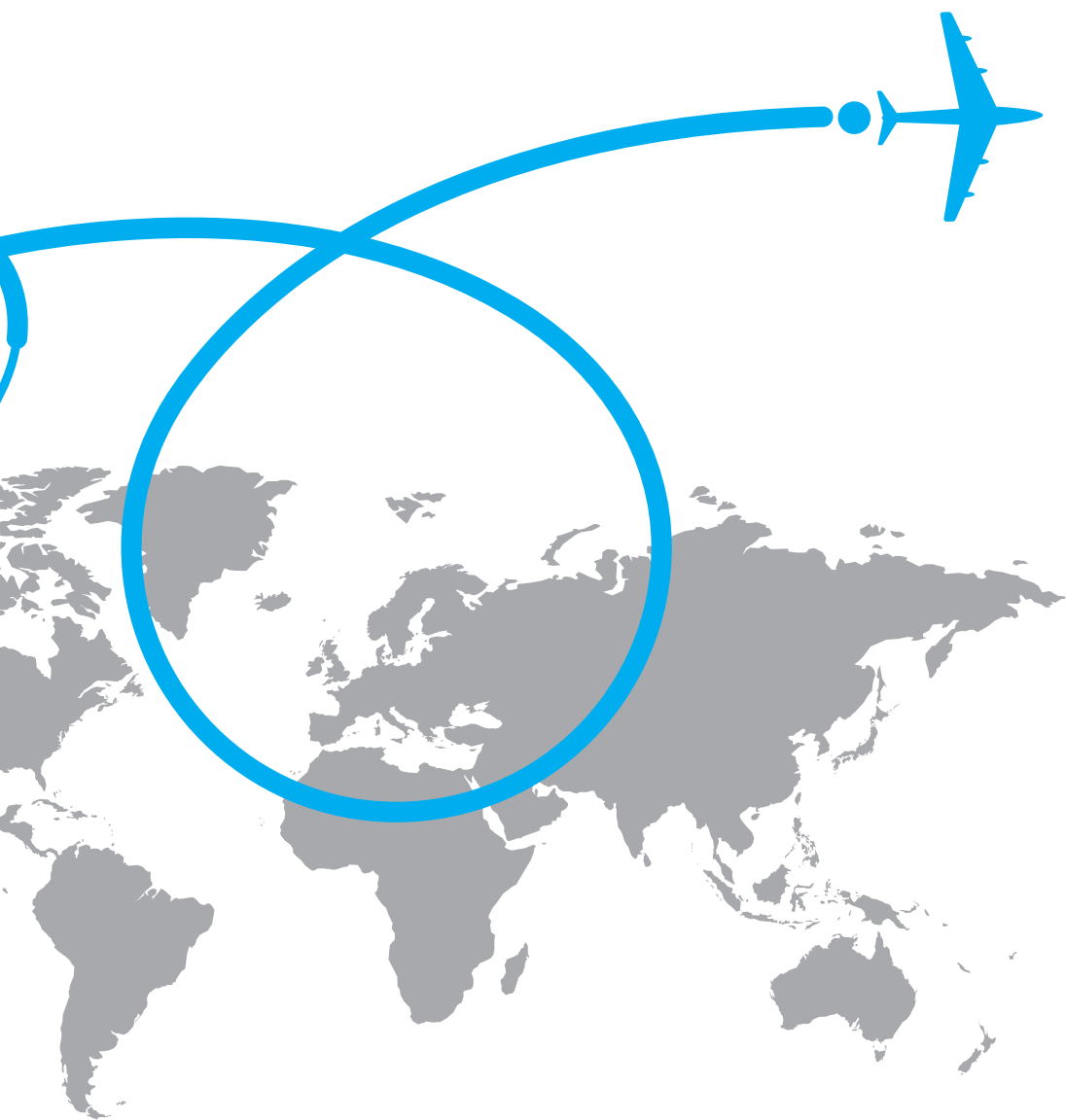


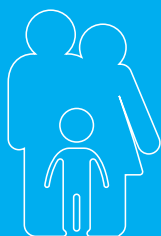
3. TRAVEL ASSISTANCE ABROAD

The Adeslas Refund policy includes a complementary Travel Insurance policy abroad for temporary displacements of less than 90 days, covering:

- Healthcare expenses of up to €12,000/year.
- For illnesses or accidents during your stay abroad.
- Emergency odontological expenses.
- Expenses of prolonging stay at a hotel.
- Repatriation of injured or sick people.
- Repatriation of the deceased and of the accompanying insured parties.

These services, other additional services and their conditions of use are detailed in the General Terms and Conditions of the Adeslas Assistance document, which you have received together with the policy documentation.





Adeslas **REFUND**

4. WHAT MUST I DO?



4. WHAT MUST I DO?

MUST I GO TO THE INSURER'S OFFICES TO REQUEST AUTHORISATION FOR AN X-RAY?

No, you only need the prescription of your doctor, since it is a diagnostic test that does not require authorisation. When you have doubts regarding the need to request authorisation from the insurer in order to receive healthcare assistance, you can visit www.segurcaixaadeslas.es.

HOW TO REQUEST EMERGENCY HEALTHCARE SERVICES?

Call the emergency centres indicated on the web page www.segurcaixaadeslas.es/cuadromedico.

HOW TO ACCESS HEALTHCARE SERVICES IN ANOTHER PROVINCE?

You can request information regarding the healthcare services in any province on the insurer's web page www.segurcaixaadeslas.es/cuadromedico.

WHAT MUST I DO BEFORE BEING ADMITTED TO HOSPITAL?

If you are to be admitted to a hospital included in the healthcare service provider system, you must obtain the company's authorisation in your Private Area at www.segurcaixaadeslas.es.

If the hospital is not included in the healthcare service provider system, you must notify the insurer of the admission date, the centre and the cause of admission, seven days in advance.

4. WHAT MUST I DO?

WHEN I GO TO AN APPOINTMENT WITH A DOCTOR OR USE SERVICES NOT INDICATED IN THE COMPANY'S HEALTHCARE SERVICE PROVIDER SYSTEM, FOR WHICH OF THE EXPENSES INCURRED WILL I BE REFUNDED?

In accordance with the policy conditions, the company will pay you between 80% and 90% of the expenses incurred. We recommend that you consult the "Special Terms and Conditions", document that you have received with the policy documentation, which details the maximum amounts to be received as indemnity, in accordance with the type of healthcare service received by you.

Your policy's conditions are also available at your Private Area at www.segurcaixaadeslas.es.



4. WHAT MUST I DO?

HOW CAN I MINIMISE THE PAYMENTS NOT REFUNDED BY THE COMPANY?

By alternating the two systems: expense refund or healthcare assistance with the arranged healthcare service provider system. Consult the “Combined use of services” section of this guide.

As an example, you can use the services of the insurer’s healthcare service provider system for diagnostic tests and treatments prescribed by doctors not included in the system, without the need to make any payment.

More information on page 20 of this document.
“Efficient use of the combined use of services”.

WHERE CAN I SUBMIT MY EXPENSE REFUND APPLICATION FORM?

You can submit the on-line refund application through your Private Area or by post. More information on page 13 of this document: “Expense refund procedure”.

HOW AND WHEN WILL I RECEIVE THE AMOUNT OF THE EXPENSES SUBMITTED TO THE COMPANY?

The expenses settled by the insurer will be paid to you by bank transfer, to the current account from which your premiums are direct debited, in a period not exceeding 15 working days from the date on which the invoices are submitted to the Company.

CONTACT

| Very close.

In just one click

All your dealings in a quick easy manner from your mobile or electronic device: authorisations, healthcare service provider system enquiries, duplicate card, etc.



Register at www.segurcaixaadeslas.es/inforegistro
All you will need is your card.

24-hour service



902 200 200 / 919 191 898 / 935 181 080

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