

Insurance Product Information Document

Company: Plus Ultra Seguros Generales y Vida, S.A. de Seguros y Reaseguros, Sociedad Unipersonal

Product: Inactivity for Professionals Plus

Registered in: Spain. Insurance company authorisation no.: C0517

Complete pre-contractual and contractual information related to the insurance product is provided in other documents such as the information sheet, as well as the general, particular and, if applicable, special conditions of the insurance policy.

What does this type of insurance consist of? A health allowance, by means of which the insured receives an agreed amount for each day of sick leave in accordance with the maximum compensation scale included in the contract.



What is insured?

- ✓ **Daily allowance for sick leave.**
- ✓ **Optionally, an additional daily allowance can be taken out for:**
 - ✓ **Accidental illness**
 - ✓ **Hospitalisation due to illness**
 - ✓ **Hospitalisation due to accident**
- ✓ **Birth: Compensation of the previous annual premium for childbirth.**
- ✓ **Travel assistance abroad**



What isn't insured?

- ✗ Illnesses or accidents occurring prior to the date each insured is included, as well as healthcare resulting from congenital diseases.
- ✗ Illnesses and/or hospitalisation due to illness during the periods of grace established in the general conditions, except in the case of emergency.
- ✗ Illnesses or accidents resulting from participation in races or competitions held at a professional or federated level or involving the possibility of prizes.
- ✗ Pregnancy, voluntary termination of pregnancy or childbirth.
- ✗ Sick leave related to purely aesthetic issues.
- ✗ Illnesses or injuries which, given their nature and the disabling effects on the Insured, and by comparing them with similar situations appearing on the scale, result in a situation of incapacity of less than 7 days.



Are there any restrictions to the cover?

- ! Anyone with an actuarial age between 18 and 55 can be insured. The policy may be renewed up to the actuarial age of 65.
- ! Temporary disability is understood as any medical condition of a temporary nature that exceeds 7 days.
- ! The amount of compensation per yearly period may not exceed 365 days.
- ! The daily allowance for Hospitalisation will have a maximum limit of 120 days per process.
- ! Birth allowance, the mother must have been insured for the last two annual periods.
- ! Temporary disabilities whose duration, according to the scale of pathologies, is equal to

or less than 14 days, may be compensated a maximum of three times in each annual insurance period.

- ! Temporary disabilities whose duration, according to the scale of pathologies, is greater than 14 days, will not be compensated until 90 days have passed since the date the immediately preceding disability occurred.
- ! If, in the same accident, the insured suffers various injuries or when an illness is complicated by other simultaneous complaints, all of these will be compensated with an amount equivalent to 130 per cent of the illness with the highest allocation on the scale



Where am I covered?

- ✓ The insurance is valid worldwide except for the provisions of the Travel Assistance cover, provided the Insured's current domicile is in Spain.



What are my obligations?

- Answer the insurance application health questionnaire honestly.
- Make the payments stipulated in the contract.
- Inform the insurer of any change in the address of the policy's insured parties.



When and how do I have to make the payments?

At the time of taking out the contract and according to the payment terms indicated in the contract.

Premiums must be paid by the policyholder on the corresponding due dates agreed, for complete annual periods in advance, while the policy is in force.

Although the premium is annual, its payment may be established and carried out every six months, three months or month, also in advance. Dividing the annual premium will entail the corresponding surcharge.



When does the cover begin and end?

The duration of the contract is one year. However, if the policyholder does not state otherwise, the policy is automatically renewed for annual periods on each anniversary of the effective date of the insurance, and by payment of the net premium corresponding to the age reached by the insured.



How can I terminate the contract?

By sending notification in writing to the insurance company at least one month before the current insurance period ends.
