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DKV Renta

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Group company

## DKV RENTA INSURANCE POLICY

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### FULLY PAID-UP SHARE CAPITAL: 66,110,000 EUROS

DKV Seguros y Reaseguros, S.A.E., registered in the Special Register of the Directorate-General of Insurance and Pension Funds by M.O. dated July 12, 1956. Registered office: Torre DKV, Avda. María Zambrano, 31 - 50018 Zaragoza (Spain).

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DKV Seguros will provide this document to all who request it for its analysis and consultation, even without there being a commitment to contracting in order to contribute to the clarity and transparency of information of DKV Seguros and the insurance industry in general.

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We respond to *your*  
questions

These general conditions will help you to fully understand the contract that you sign with DKV Seguros when you accept this insurance policy.

**Throughout this document, we will explain the majority of matters that may arise when using this insurance.**

**In this chapter, we aim to give a clear and simple response to some of the most frequently asked questions we receive from our policyholders.**

**We hope you find them useful.**

## **About the contract**

### **What are Terms and Conditions?**

The Terms and Conditions, also called the general conditions and particular conditions, is a contract that groups together the rights and obligations of DKV Seguros and those of the insured person or the person that takes out the insurance policy.

### **What documentation do we give you when taking out the insurance?**

The conditions of the contract, the claim sheet and information about the additional services that DKV Seguros offers you on contracting this policy. In the event of contracting the guarantee for medical assistance due to an accident, we will also provide you with a DKV Medi-Card®.

You are advised to verify that your personal data is correct and inform us, either directly or via your agent or DKV Seguros associated broker, of any error that you observe.

### **Which risks are covered in the policy?**

Specifically that stated in the particular conditions as contracted, regardless of those that appear in the general conditions.

### **What do I have to do with the received documentation?**

Read it carefully, sign the conditions and send them signed, keeping a copy for yourself. If you have any doubts, get in touch with us by calling 902 499 499, or with your agent or broker.

It will be our pleasure to help.

### **Do I need to notify the company in order to extend the contract?**

The contract is renewed automatically every year. You do not need to confirm the renewal.

However, both you and DKV Seguros can cancel the contract. DKV Seguros must notify you with at least two months' notice before the expiration date of the contract. In your case, you must notify it in a demonstrable manner with one months' notice before the expiration date.

### **What happens to my personal data?**

DKV Seguros is specifically authorised to apply, process and give to entities of the insurance group the policyholder's and/or insured person's personal data. As regards the health data of the insured person, this information may be transferred to a third party when necessary for the sole purpose of managing health care benefits.

In addition, DKV Seguros is also authorised to send the policyholder and/or insured person information about goods and services which may be of interest to them.

The policyholder and/or insured person may contact DKV Seguros to consult this data and update, correct or cancel them in accordance with Organic Law 15/99 on the protection of personal data.

### **How important is the health declaration, as well as the declaration regarding your profession or activity, when applying for the insurance?**

The contract is made according to your declarations, so the answers should be correct and precise. If they do not correspond to the real situation due to misrepresentation or omission it may, at a later date, result in no compensation being paid.

### **What is progressivity in the daily temporary disability guarantee?**

It is the possibility of contracting a daily compensation that can increase for long periods off work.

### **Is there an upper age limit for the insurance cover?**

The upper age limit is 70, except for cover for permanent and total disability, which is 65 years of age.



## About the processing of the compensation for temporary disability or hospitalisation

### How must you communicate your medical leave or hospitalisation?

You must provide DKV Seguros, directly or through your certified agent or intermediary, the claim declaration document, which includes the initial information so the benefit can be processed, with all of its sections filled in, and the medical leave report must be signed by the doctor assisting the patient. It must state:

- > Identification of the doctor
- > Identity, residence, age and profession of the insured person
- > Current ailment causing temporary disability
- > Causes, background and probable start date of the illness or date of the accident
- > Start date of the disability and the expected duration thereof

If you have taken out the hospitalisation guarantee and have been hospitalised, you must also submit the hospital discharge report provided by the hospital.

If you have any query, first call DKV Seguros at 902 499 499.

### Is it necessary to send the documentation to the Social Security or mutual insurance company?

The temporary disability reports drafted by the administration may be required as additional information, but they do not bind or force DKV Seguros to accept or quantify the compensation, as the policy's coverage does not coincide with that of the Social Security or the equivalent public authority.

### When must you communicate your medical leave?

Within seven days. If you do so after seven days, the benefit will be reduced.

### What information does DKV Seguros require to start processing the provision?

The claim form and the medical leave certificate.

Additional, DKV Seguros may:

- > additional information, such as medical reports from the doctor who assists you, hospital records, etc.
- > Visit you through your medical services to assess the evolution of the illness, check on your state and, if necessary, propose measures or steps that will lead to a satisfactory recovery

### **Which is the maximum guaranteed period for medical leave?**

You can choose different possibilities. The particular conditions specify the coverage contracted and the maximum guaranteed period.

### **When is the provision paid?**

After presenting the claim form, the medical leave report and the rest of the requested documentation, and when DKV Seguros recognises the right to the provision and checks its final scope, it will start to process it within two weeks.

In the event of an extended temporary disability (over forty days), you may request an advance of the provision for daily temporary disability corresponding to the sufficiently recognised period of medical leave.

### **When does the medical leave end in daily temporary disability?**

When the medical release to work is received or any of the following cases applies:

- › You feel able to return to work, even part time
- › Your temporary disability becomes permanent
- › You retire or become unemployed
- › You are away from your home for over seventy-two hours without the knowledge of DKV Seguros

› You oppose the visits required to verify your condition, as requested by DKV Seguros

› DKV Seguros considers that your condition is being unnecessarily extended

### **What can you do if you do not agree with DKV Seguros' decision?**

You have a period of seven days to notify DKV Seguros in a demonstrable manner of your objection, stating your reasons.

If you disagree on medical terms, your doctor, or the one you appoint, will try to reach an agreement with the doctor from DKV Seguros.

If no agreement can be reached then a third doctor will be appointed to make a decision.

### **Is there a right to receive a provision in the event of childbirth?**

Although childbirth is not considered an illness, mothers that are insured for over eight months will receive a provision on this account. It will be required having contracted one of the following guarantees: daily temporary disability, scaled temporary disability, hospitalisation or surgical procedure, with the scope and conditions established in each guarantee.

The same conditions and level of benefit apply in the case of adoption.

### **Will the beneficiaries receive any provision in the event of the death of the insured person?**

Yes. The compensation corresponding to the insured person passes on to his beneficiaries.

### **What happens with the Social Security benefit?**

The provision corresponding to the medical leave covered by the contract is compatible with and independent from the benefit that may be received from the Social Security.

### **What is the grace period?**

It is the period of time that has to elapse, from the date the policy enters into force, until the policy's guarantees become effective. This period is specified in the particular conditions.

No grace period will be applied when the medical leave is due to an accident.

### **What is the excess period in the daily temporary disability guarantee?**

It is the initial number of days of each medical leave process in which there is no right to the provision.

### **From which day does the provision for daily temporary disability start due to work leave?**

If there is no excess period, from day one of the work leave.

In the event of an excess period, as of the day following the end of the established excess period.

We remind you that it is essential you notify us of the accident within seven days of its occurrence. If failing to do so, the period established for the provision will start when the notification of the accident is received.

The day of the medical release will not be subject to compensation.

### **What is the excess period in the scaled temporary disability guarantee?**

It is the number of days specified in the particular conditions and that, for the purposes of the provision, should be taken away from those that appear in the scale of Appendix I for each diagnosis.

### **When do you have the right to receive the provision for the scaled temporary disability due to work leave?**

From the moment that you present the documentation justifying the time off work and the illness and any additional reports as required by DKV Seguros, and once the coverage of the claim has been verified.

### **What risks are excluded?**

They are the illnesses, accidents, circumstances, alterations, activities, etc. that are not covered in the policy and that, therefore, do not grant the right to a provision.

The excluded risks are agreed with you when signing the policy, and they are highlighted in bold type.

### **DKV Medi-Card®**

#### **What should you do if you lose your DKV Medi-Card®?**

Contact DKV Seguros. We will send you a new one.

#### **What tests or services in the DKV Health Care Network need an authorisation, according to the modality contracted?**

All healthcare provided with the exception of emergency care and first aid.

### **Professional activity**

#### **What happens if your working situation or professional activity changes?**

You should notify us of the change in your situation as soon as possible to be able to re-calculate the insurance premium according to the new activity, which may represent an increase or decrease in the price depending on the level of risk that this new activity represents. This way we will avoid any problems or confusion during the claims procedure.

### **Personal data**

#### **What happens if you change your address, telephone number, etc.?**

You should notify us of any change as soon as possible.

### **Insurance payments**

#### **What is the increase to the insurance premium?**

The premiums may be updated annually depending on your age and whether you have taken out the option of annual revaluations of the benefit level.

#### **What do you mean by a yearly contract, if you can pay monthly, quarterly or six-monthly?**

The duration of the contract stipulated in the policy is annual and can be extended, but the payments may be made monthly, quarterly or every six months.

## **What happens if the insurance receipt is not paid?**

As long as the first premium is not paid, the coverage is not active. For the following receipts you have a period of one month to make the payment. After this month, the agreement is suspended.

## **Suggestions and complaints**

### **What do you need to do to submit a suggestion or complaint?**

You can submit it in writing to any of our branches or to Customer Services. For this purpose, you can write to the registered office of DKV Seguros: Torre DKV, Avenida María Zambrano 31, (50018 Zaragoza), telephone: 902 499 499, fax: 976 28 91 35; or send it to the following email address: [defensacliente@dkvseguros.es](mailto:defensacliente@dkvseguros.es).

You can also send it to the Commissioner for the Defence of the Customer of Financial Services: Paseo de la Castellana 44, (28046 Madrid). In this case, a complaint must have been forwarded beforehand to the Customer Defence service of DKV Seguros (see more detailed information on the procedure to be followed in the section "Preliminary clause").

# Insurance policy. General Conditions



## Preliminary clause

This contract is subject to Insurance Contract Act 50/1980 of 8 October. The control of the insurance activity of DKV Seguros y Reaseguros, S.A.E. (henceforth DKV Seguros), with registered offices at Torre DKV, Avenida María Zambrano, 31, 50018 Zaragoza, corresponds to the Kingdom of Spain and, in particular, to the Ministry of Economy via the Directorate-General of Insurance and Pension Funds.

The contract is constituted of the following documents:

- › Insurance application
- › The health declaration
- › The general conditions
- › The particular conditions
- › Special conditions (only those cases where it applies)
- › The supplements or appendices

Transcriptions or references to laws do not require express acceptance, as compliance therewith is already mandatory.

For the resolution of any conflicts that may arise with DKV Seguros, the policyholders, beneficiaries, affected third parties or representatives of any of these can lodge their complaint in the following ways:

At any of the DKV Seguros branches or through our Customer Services.

Complaints can be sent by post or fax to the following address: Torre DKV, Avenida María Zambrano 31, 50018 Zaragoza, telephone 902 499 499, fax 976 28 91 35; or by email: [defensacliente@dkvseguros.es](mailto:defensacliente@dkvseguros.es).

The customer can select how he would like responses to be processed, and can specify the address to which they will be sent. The file will be answered in writing, within a maximum period of two months. Customers can consult the company's Customer Services Policy in DKV Seguros branches.



Once this period has elapsed, if the customer does not agree with the solution proposed, they can contact the Commissioner for the Defence of Customers of Financial Services, located at Paseo de la Castellana 44, 28046, Madrid. Once the prior procedure of the complaint made to DKV Seguros has been substantiated, an administrative case file will be created.

Without prejudice to any previous claim, you may also bring a legal claim before the corresponding Courts.

# 1.

## Basic concepts. Definitions

The definitions presented below are for the purposes of this contract:

### B

#### Beneficiary

The individual or legal entity stipulated in the particular conditions that has the right to receive the compensation guaranteed by the policy, or otherwise, in case of death, those stipulated for such, unless expressly agreed to the contrary in the particular conditions.

### C

#### Claim/Incident

The occurrence of the risk covered in the contract and whose consequences may be covered by the policy. An event which may lead to the insured person or beneficiary receiving compensation.

#### Complicated pregnancy

All clinical situations requiring health care whose origin, worsening or complication is a consequence of the present pregnancy, childbirth or puerperium, regardless of the final result of this pregnancy.

### D

#### DKV Health Care Network

The list of professionals and hospitals associated to DKV Seguros throughout Spain.

### E

#### Excess

In the case of the daily temporary disability guarantee, the excess period will be understood as the initial number of days of each accident that do not generate the right to the provision.

In the case of the scaled temporary disability guarantee, the excess period will be understood as the number of days that, for the purposes of the provision, should be taken away from those that appear in the scale of Appendix I for each diagnosis.

#### External means

Doctors and centres not included in the DKV Health Care Network for annuity insurance and accident insurance.

## G

### Grace period

It is the period, from the date the policy enters into force, during which only the ailments arising from accidents covered by the policy are covered. Coverage for illnesses or injuries not derived from an accident will only be included if they occur after the starting date for such, which is specifically stipulated in the particular conditions.

The grace period shall not apply in the event of an accident.

## H

### Health declaration

The questionnaire included in the application form which the insured person has to complete stating the necessary data for the evaluation of the medical risk.

The insurance application and the health declaration must be completed and signed in a truthful, complete and precise way so that DKV Seguros can assess the data and calculate the medical risk before giving their consent.

### Hospitalisation

The admission to the hospital centre for a stay of more than 24 hours, with medical prescription and for diagnostic or therapeutic purposes.

## I

### Illness

Alteration of health, medically verifiable, not resulting from an accident.

### Injury

An accident is understood to be bodily injury that is derived from a violent, sudden, external cause, unintentional by the insured person, which results in total or partial permanent disability, or death.

### Insurance application

The questionnaire, provided by the insurer, in which the policyholder describes the risk that he wishes to insure, with all the circumstances known to him and which can have an impact on the assessment of the above-mentioned risk.

### Insured person

The individual which is the subject matter of the insurance and, in the absence of the policyholder, assumes the rights and obligations under the contract.

### Insured provision

The daily provision specified in the particular conditions.

### Insurer

DKV Seguros y Reaseguros S.A.E.

## M

### Medical assistance due to an accident

Health care for the recovery of the insured person subject to the agreed quantitative, qualitative and temporary limits derived from an accident covered by the policy.

## O

### Own means

Doctors and centres included in the DKV Health Care Network for annuity insurance and accident insurance.

## P

### Policy

This is the insurance contract.

Document that contains the general conditions, the particular and special conditions, and the supplements or appendices added to complement it or amend it. The application form and the health declaration are also part of the policy, once the latter has been accepted.

### Policyholder

The individual or institution that signs this contract with DKV Seguros and that, by doing so, accepts the obligations that are established within it, except for those which due to their nature must be fulfilled by the insured person.

### Pre-existing illness

Illness which, from a medical point of view, existed before the moment of taking the policy out or it becoming effective, even if no medical diagnosis had been given.

### Premium

This is the price of the insurance. The receipt will also contain the surcharges and taxes to be legally applied.

### Prostheses

Organic or inorganic material implanted either temporarily or permanently; used for replacing, regenerating or complementing the absence or function of a tissue or organ, whether applied externally or internally; and placed during a surgical procedure.

## R

### Rehabilitation

All the acts prescribed by an orthopaedic surgeon, neurologist, rheumatologist or specialist in rehabilitation and carried out by a specialist in rehabilitation or a physiotherapist in rehabilitation centres, with the purpose of returning functionality to the parts of the locomotive apparatus that have been affected by the consequences of an illness or accident caused while the policy is in force.

## S

### Scale

A table included in the general conditions of the policy containing a list of illnesses and injuries with an assigned standard number of days, according to which the compensation of the guarantees of temporary scaled compensation are established.

### Surgical procedures

Diagnostic or therapeutic act carried out by a surgeon or surgical team usually requiring the use of an operating theatre belonging to a hospital.

## T

### Temporary disability

Situation due to an accident or illness, covered by the policy, that makes it completely impossible for the insured person to temporarily carry out his professional activity.

### Total and permanent disability

Irreversible physical situation caused by an illness or accident, against the insured person's will, resulting in his total inability to hold permanently any type of employment or professional activity.

# 2.

## **Object of the insurance policy and territorial scope**

This insurance guarantees the payment of a daily provision, a provision in the form of capital or the provision of a service, in accordance with the risk covered by the policy.

The contracted coverage is applicable to accidents occurring around the world, provided that the insured person's habitual residence is effectively in Spain. Cover for daily temporary disability and medical assistance for accidents are only applicable to the insured person when s/he is in Spanish territory. Cover for scaled temporary disability requires the confirmation of a doctor who practises in Spain. Cover for surgical intervention and hospitalisation are limited to the territory of the European Union, the United States of America and Canada.

# 3.

## Acceptance and effects of the contract

The contract is accepted by means of the consent demonstrated by both parts signing the contract.

The coverage contracted and its modifications or additions will take effect on the indicated date in the particular conditions except in the case of non-payment of the receipt of the corresponding premium, in which case the obligations of DKV Seguros will start twenty four hours after the day on which the premium is paid.

Modifications and additions to the contract may be proposed by both the policyholder and DKV Seguros. In order to become valid, they need to be expressly accepted by both parties.

# 4.

## Risks covered

The insurable risks for this policy are the following:

### 4.1 Temporary disability

If the temporary disability coverage is contracted, it must be reflected in the particular conditions, specifying which of the coverage's six guarantees have been contracted.

#### **Guarantee I. Daily temporary disability. First period**

During a period of thirty days, DKV Seguros guarantees the insured person the payment of a daily amount, determined in the particular conditions of the policy, when he is in a situation of temporary disability. He will be entitled to this compensation from the day following the conclusion of the excess period. If no excess is contracted, he is entitled to this from the first day off work.

For every newborn child, with a minimum gestation period of six months, whose mother is insured in all of the guarantees I, II and III for over eight months, DKV Seguros will pay in addition, as a single provision, the equivalent of twenty times the daily amount guaranteed for cases of temporary disability.

The same conditions and level of benefit apply to insured mothers in the case of adoption, provided the adoption process had begun after the first eight months of the policy's validity.

#### **Guarantee II. Daily temporary disability. Second period**

In the event of the situation of temporary disability being prolonged, DKV Seguros will pay the insured person, from the 31st day until the 90th day, the corresponding daily compensation determined in the particular conditions of the policy, while he is in a situation of total temporary disability.



### **Guarantee III. Daily temporary disability. Third period**

In the event of the situation of temporary disability being prolonged, DKV Seguros will pay the insured person, from the 91st day until the 365th day, the corresponding daily compensation determined in the particular conditions of the policy, while he is in a situation of total temporary disability.

### **Guarantee IV. Daily temporary disability. Fourth period**

In the event of the situation of temporary disability being prolonged, DKV Seguros will pay the insured person, from the 366th day until the 547th day, the corresponding daily compensation determined in the particular conditions of the policy, while he is in a situation of total temporary disability.

### **Guarantee V. Daily temporary disability. Fifth period**

In the event of the situation of temporary disability being prolonged, DKV Seguros will pay the insured person, from the 548th day until the 730th day, the corresponding daily compensation determined in the particular conditions of the policy, while he is in a situation of total temporary disability.

### **Insurable persons for the guarantees of temporary daily disability**

This policy may be contracted by persons whose actuarial age is between 16 and 65 on the date of contracting this policy and who are employed or carry out a remunerated professional activity, and who are not legally or effectively unemployed or in a similar situation.

### **Application rules for daily temporary disability. Limits of the coverage**

- a) The insured person will have the right to compensation for each day in which he is in a situation of total temporary disability. Also, the insured person must require and receive appropriate medical care for the condition affecting him or her.
- b) The day the insured person is discharged is considered a working day to all effects and therefore compensation will not be paid.
- c) If the period of disability is prolonged due to the waiting time existent in the medical services attending the insured person in order to perform a special diagnostic test, DKV Seguros may propose, or the insured person may request authorisation, so that this test is carried out in a centre designated by DKV Seguros.

To such an effect special diagnostic tests are defined as follows:

- › Ultrasound scan for muscular and articular traumatology
- › Electromyogram
- › Simple radiology
- › Scanner/CAT
- › Nuclear magnetic resonance

The cost of this test will be assumed by DKV when the test prescribed by the doctor attending the insured person has a waiting time of more than thirty days at the moment of authorisation.

When the insured person refuses to carry out the test according to that specified in point c), the benefit will cease thirty days after the day on which the test was proposed by DKV Seguros. The period of time off work can only be renewed when the medical reports carried out after the diagnostic test justify being unable to work.

**d)** As a consequence, the right to the daily compensation will cease:

- › The moment when the insured person is able to resume, or in fact has resumed, his professional activity even in a partial way, in spite of not having been fully cured (the disability will no longer be considered total)

› When the insured person is diagnosed permanently disabled or unable to carry out his profession, or applies for recognition of such a state, or receives a pension or compensation for such a cause, or his state of health is irreversible and determined in an objective way based on medical criteria and regardless of any administrative resolutions (the disability will no longer be temporary)

› When circumstances as described in section c) occur

› When the insured person retires or is unemployed or in a similar situation (he will no longer need to be insured)

› When, during time off work, the insured person is absent from his declared residence for a period of more than 72 hours, without having previously informed DKV Seguros and without its consent having been given (DKV Seguros will not be able to verify the claim)

**e)** In the event that the insured person suffers new periods of temporary disability for the same cause or for medical causes directly related to the previous one, the new periods of temporary disability are considered to all effects as a continuation of the initial, provided that the policy is still effective.

With regard to compensation, the sum of every period must not exceed the maximum limits stipulated in the particular conditions. In no case will the periods corresponding with the same illness or related illnesses exceed, throughout the duration of the policy, the cover limits established in the specific terms and conditions.

f) If the insured person suffers several ailments at the same time or if a new one subsequently appears in addition to the one initially declared, the provision will not be cumulative. A new term will begin on the date on which the beginning of the most recent ailment takes place, although s/he will not be entitled to compensation for this, until the moment s/he is discharged from the first ailment, if this happens first.

g) In the case of claims covered by policies that have contracted both guarantees of daily temporary disability and scaled temporary disability, the compensation for each will not be cumulative during the days of temporary disability in which the terms covered by both coincide. The guarantee of daily temporary disability will only begin to pay compensation after the day on which the period covered by the guarantee of scaled temporary disability expires.

### Rules for processing a claim. Procedure for the resolution of discrepancies

a) For the purposes of confirming the provision for daily temporary disability, the policyholder must provide DKV Seguros with the claim declaration document, with all of its sections filled in, and the medical leave part of the document must be signed by the doctor assisting the patient. It must state:

- > Identification of the doctor
- > Identity, residence, age and profession or activity of the insured person
- > Current ailment causing temporary disability
- > Causes, background and probable start date of the illness or date of the accident
- > Start date of the disability and the expected duration thereof

DKV Seguros may request the presentation of a copy of the official medical leave report issued by the competent public body, although it will not be binding for the company.

Furthermore, when the medical release to work takes place, the document that proves this must be provided to DKV Seguros.

- b)** The corresponding provision can begin on the day of the medical leave, provided that DKV Seguros is informed of this by way of the above-mentioned method, within seven days following the date of the event. If DKV Seguros receives this declaration after the aforementioned seven days, the provision will be paid from the date of receipt.
- c)** For the purpose of receiving the provision for each newborn child or adoption, you must submit the pertinent certification, in the form of the hospital discharge report, the registration certificate in the Civil Registry or the Family Record Book.
- d)** Prior to paying this provision, the motive for the work leave should be proved, and DKV Seguros may carry out any visits that it deems necessary to check the state and ailment of the insured person, who would have to provide any medical report related to the cause of the medical leave to the medical services of DKV Seguros. In the event of the insured person's reluctance or opposition, DKV Seguros will be released of its requirement to pay the service provision.

- e)** If, by any means, DKV Seguros verifies that the insured person has extended the duration of his temporary disability in a deceptive manner, or has unjustifiably denied the possibility of working, whether totally or partially, or if it is proved that the insured person were suffering a different ailment to that which caused the claim, DKV Seguros can deem the temporary disability concluded for the purposes of perceiving the provision, and will communicate this in writing to the insured person.

When the policyholder, the insured person or the beneficiary do not agree with such a decision, they must inform the insurer, in writing, within seven days at most, stating their reasons to the contrary. In this case, the insured person's doctor and that of DKV Seguros will try to solve the discrepancy directly. In the event of them not reaching an agreement, a third doctor will be named by the parties and, subsequently, by the competent circuit judge.

This same procedure will be applied in any other discrepancies relating to medical questions that can arise.

The three doctors will jointly decide by a majority of votes. Each party will pay his own medical expert's fees and those of the third, jointly.

The decision of the doctors will be made within the term of ninety days following the date of the third medical expert's appointment and, during this time, the parties will not be able to take the corresponding judicial steps for the liquidation of the compensation in litigation.

## Temporary disability according to a scale

### Guarantee VI. Scaled temporary disability

If the guarantee of scaled temporary disability is contracted in accordance with the coverage of this insurance policy, this will be stipulated in the particular conditions of the policy.

DKV Seguros guarantees the insured person the payment of a single compensation sum calculated by multiplying the insured daily capital for this guarantee, as shown in the specific terms and conditions, by the number of days indicated in the scale of Appendix I, minus the excess contracted, if relevant. This provision will always be applied according to the type of illness or injury suffered by the insured person, and provided that it causes total incapacity to work and temporary disability, in accordance with the indications of these general conditions.

For each new born baby with a minimum gestation period of six months, whose mother has been insured in this guarantee for over eight months, DKV Seguros will pay in the form of a single payment the pre-established amount for pregnancy in the section 'Pregnancy and birth' of the scale in Appendix I.

The same conditions and level of benefit apply to insured mothers in the case of adoption, provided the adoption process had begun after the first eight months of the policy's validity.

### Insurable persons for the guarantees of scaled temporary disability

This policy may be contracted by persons whose actuarial age is between 16 and 65 on the date of contracting this policy and who are employed or carry out a remunerated professional activity, and who are not legally or effectively unemployed or in a similar situation.

### Application rules for scaled temporary disability. Limits of the coverage

- a) The insured person will be entitled to compensation when he is suffering a total temporary disability and must require and receive appropriate medical care for the condition affecting him.
- b) If the insured person suffers several ailments at the same time or if a new one subsequently appears in addition to the one initially declared, the benefit will only be cumulative up to a maximum of 130% of that with the greater number of days assigned in the scale, once the excess is applied.
- c) Under no circumstances will the daily provision exceed 365 days in each year of the policy.
- d) Illnesses or injuries, of the same or a similar cause, that have 15 days or fewer allocated in the scale of Appendix I will only be reimbursed three times during a period of 365 days.

e) In the event that the insured person is subject to new periods of temporary disability due to the same cause or for medical causes directly related to the previous one, he will only receive the benefit corresponding to the second or subsequent periods when the interval between one period finishing and the subsequent starting is at least twice the number of days covered by the preceding period or a minimum of 90 days.

f) In the case of claims covered by policies that have contracted both guarantees of daily temporary disability and scaled temporary disability, the compensation for each will not be cumulative during the days of temporary disability in which the terms covered by both coincide. The guarantee of daily temporary disability will only begin to pay compensation after the day on which the period covered by the guarantee of scaled temporary disability expires.

Illnesses or injuries not listed in the scale included in Appendix I, and provided that they are not among the risks excluded from the insurance coverage, will be object of provision by analogy or similarity with those listed, according to medical criterion.

### **Rules for processing a claim. Procedure for the resolution of discrepancies**

a) For the purposes of receiving the provision, the policyholder must provide DKV Seguros with the claim declaration document, with all of its sections filled in, and the medical leave report signed by the doctor assisting the patient. It must state:

- › Identification of the doctor
- › Current ailment causing temporary disability
- › Identity, residence, age and profession or activity of the insured person
- › Causes, background and probable start date of the illness or date of the accident
- › Start date of the disability and the expected duration thereof

DKV Seguros may request the presentation of a copy of the official medical leave report issued by the competent public body, although it will not be binding for the company.

b) The corresponding provision will be payable on the day of the medical leave, provided that DKV Seguros are informed of this by way of the above-mentioned method, within seven days following the date of the event. If DKV Seguros receives this declaration after the aforementioned seven days, the provision will be reduced in the corresponding amount for seven days.

c) Prior to paying this provision, the motive for the work leave should be proven, and DKV Seguros may carry out any visits that it deems necessary to check the state and ailment of the insured person, who would have to provide any medical report related to the cause of the medical leave to the medical services of DKV Seguros. In the event of the insured person's reluctance or opposition, DKV Seguros will be released of its requirement to pay the provision.

d) If, by any means, DKV Seguros verifies that the insured person were suffering a different ailment to that which caused the claim, DKV Seguros can deem the non-existence of the right of perceiving the provision and will communicate this in writing to the insured person.

When the policyholder, the insured person or the beneficiary do not agree with such a decision, they must inform the insurer, in writing, within seven days at most, stating their reasons to the contrary.

In this case, the insured person's doctor and that of DKV Seguros will try to solve the discrepancy directly. In the event of them not reaching an agreement, a third doctor will be named by the parts and, subsequently, by the competent circuit judge.

This same procedure will be applied in any other discrepancies relating to medical questions that can arise.

The three doctors will jointly decide by a majority of votes. Each part will pay his own medical expert's fees and those of the third, jointly.

The decision of the doctors will be made within the term of ninety days following the date of the third medical expert's appointment and, during this time, the parts will not be able to take the corresponding judicial steps for the liquidation of the compensation in litigation.

## 4.2 Hospitalisation

If the hospitalisation coverage is contracted, it must be reflected in the particular conditions of the policy.

During a maximum term of 365 days, DKV Seguros guarantees the insured person the payment of the daily compensation determined in the particular conditions of the policy, when he is hospitalised due to any illness or accident covered by this policy.

For every newborn child, with a minimum gestation period of six months, whose mother is insured in this guarantee for over eight months, DKV Seguros will pay, as a single provision, the equivalent of three times the daily amount guaranteed for the hospitalisation guarantee. It is essential that such guarantee has been contracted and that the birth takes place after the first eight months of validity of the policy.

The same conditions and level of benefit apply to insured mothers in the case of adoption, provided the adoption process had begun after the first eight months of the policy's validity.

#### Insurable persons

Persons between 0 and 65 years of age on the date of contracting this policy can apply for this insurance policy.

#### Application rules.

##### Limits of the coverage

- a) The compensation will be paid during the days in which the insured person is hospitalised. The insured person must require and receive appropriate medical care for the condition affecting him.
- b) The admission to the hospital centre will be for a stay of more than 24 hours, with medical prescription and for diagnostic or therapeutic purposes.
- c) In the event that the insured person is subject to new periods of hospitalisation for the same cause or for medical causes directly related to the previous stay, the new periods of hospitalisation are considered for all purposes as a continuation of the initial stay. For the purposes of the daily provision, the sum of all stays cannot exceed 365 days.
- d) The amount of the daily compensation will be that stipulated in the particular conditions, even in the event that the hospital admission is due to several ailments or several surgical operations being carried out at the same time.

#### Rules for processing a claim

The following documents must be provided to DKV Seguros in order to receive the corresponding daily provision:

- > Hospital stay certificate and discharge report.
- > In the event that the hospital stay lasted more than seven days, a medical report indicating the centre in which the insured person has been hospitalised and the reason for his admission must be sent to DKV Seguros.

#### 4.3 Surgical procedures

If the coverage for surgical procedure due to illness or accident is contracted, in accordance with the coverage of this insurance policy, it must be reflected in the particular conditions of the policy.

DKV Seguros guarantees the insured person a single payment as compensation. Its amount is calculated by applying the percentage indicated in Appendix II of these general conditions to the capital insured for the cover of surgery, reflected in these terms and conditions, according to the type of surgery to be undergone.



### Insurable persons

Persons between 0 and 65 years of age on the date of contracting this policy can apply for this insurance policy.

### Application rules. Limits of the coverage

If a particular procedure does not feature in the table in Appendix II, it will be subject to compensation by means of assignment to the group of compensation percentages to which it corresponds by analogy or similarity with some of those that are listed, according to medical criteria.

If more than one operation is carried out in a single session, 100% of the biggest assignment in the table in Appendix II will be paid and 50% of the remaining ones.

Under no circumstances will the maximum compensation for each claim exceed 100% of the contracted capital.

### Rules for processing a claim

To be able to receive the guaranteed compensation, the report from the doctor that carried out the operation must be forwarded to DKV Seguros, stating the nature and kind of operation as well as the date of the operation and the antecedents of the pathology that have motivated it.

### 4.4 Total and permanent disability

If the coverage for permanent and total disability is contracted, in accordance with the coverage of this insurance policy, it must be reflected in the particular conditions of the policy.

For the effects of this insurance policy, total and permanent disability is understood to mean the irreversible physical situation caused by an illness or accident, against the insured person's will, resulting in his or her total inability to hold any type of employment or professional activity.

DKV Seguros guarantees the insured person the payment of the capital insured as stated in the specific terms and conditions, when, as a consequence of an illness or accident covered by the policy, the insured person suffers from a total and permanent incapacity to perform any remunerated work.

### Insurable persons

This policy may be contracted by persons whose actuarial age is between 16 and 55 on the date of contracting this policy and who are employed or carry out a remunerated professional activity.

### Application rules. Limits of the coverage

To be entitled to this guarantee, the absolute and permanent disability must have been caused by an illness or accident covered by the present policy.

There will be no entitlement to any compensation if, on determining the causes of the total disability, preexisting illnesses or consequences not declared in the questionnaire of the contract subscribed also exist with other causing facts that appeared after signing the contract, even in the event that the latter alone are sufficient to entitle the insured person to obtaining the guarantee.

### Rules for processing a claim

The following documents must accompany the request for compensation forwarded by the insured person:

- a) Claims sheet completed by the insured person
- b) Medical certificate stating the date of origin of the illness or the accident and the insured person's total and permanent disability.
- c) Permanent disability resolution from the Spanish Social Security Institute (INSS), medical report and ruling-proposal.
- d) Any other document that is required by DKV Seguros to help evaluate the claim better.

### 4.5 Medical assistance due to an accident

If the coverage for medical assistance due to an accident is contracted, it must be reflected in the particular conditions of the policy.

Provided that they derive from an accident covered by the policy, this guarantee covers:

- Expenses for medical care, pharmaceutical care, hospital stays and physiotherapy; up to the maximum amount of the insured quantities is reached, as set out in the particular conditions.
- Emergency health transport and transfers authorised by DKV Seguros; up to the maximum limit of 1,000 euros per claim.
- All orthopaedic and prosthetic devices, including those derived from oral care; up to the maximum limit of 1,000 euros per claim.

### Insurable persons

This policy may be contracted by persons whose actuarial age is between 16 and 65 on the date of contracting this policy and who are employed or carry out a remunerated professional activity.

**Application rules.****Limits of the coverage**

a) DKV Seguros will cover the expenses for medical care, during a maximum period of one year from the date of the accident covered by the insurance policy.

b) DKV Seguros will cover these expenses provided that the care is given with its own means and it is accepted by the insurer. In the event that the insured person decides to follow treatment via external means, DKV Seguros will compensate him for this concept, up to the maximum limits stipulated in the particular conditions.

c) DKV Seguros will refund the expenses arising from emergency care and first aid, regardless of the doctor or centre that provides them. DKV Seguros will exercise the right to appoint doctors and centres at the moment that the injured person can be transferred from the centre where he was first treated, by agreement with the doctor designated to such an effect by DKV Seguros.

d) This guarantee is only covered within Spain.

**Access to coverage. DKV Medi-Card®**

When contracting this guarantee for medical assistance due to accident, you will be provided a DKV Medi-Card®, which you will use to identify yourself as a DKV Seguros insured person before the DKV Health Care Network for annuity insurance and accident insurance.

Similarly, you may be obliged to present your identity card or official means of identification (passport, residence permit, etc.), if required by the health care or auxiliary staff.

The DKV Medi-Card® is personal and non-transferable. If you lose your DKV Medi-Card®, you can contact DKV Seguros and we will send you a new one.

The services covered by the policy may have free access or require previous authorisation from DKV Seguros.

Generally, emergency consultations (see point c) above), have free access using the DKV Medi-Card®. The rest of guaranteed health care provided by physicians or centres assigned or accepted by DKV and belonging to the DKV Health Care Network for annuity insurance and accident insurance require prior authorisation. This health care should originate from a claim covered by the policy. In this case, hospital admissions, surgery, prostheses and surgical implants, rehabilitation sessions, ambulance transfers, etc. are included.

DKV Seguros will issue the corresponding authorisations to access the provisions, with the written prescription of a doctor of the DKV Health Care Network for annuity insurance and accident insurance, following administrative confirmation, unless the service is not covered by the policy taken out. The authorisations can be requested at any of DKV Seguros' branches.

To issue the authorisations or process the claims, DKV Seguros is authorised to collect medical information related to prescriptions, directly from the doctor and/or centre, and request an additional medical report from the insured person containing the history, risk factors, diagnosis and need for treatment.

Despite that mentioned in the previous paragraphs, in emergency cases the order given by a doctor of the DKV Health Care Network for annuity insurance and accident insurance will be sufficient provided that the insured person, or person acting on his behalf, notifies DKV Seguros of the event in a demonstrable manner to obtain their confirmation and authorisation within 72 hours following admission, or after receiving health care.

The right to freely choose a doctor or centre implicates the absence of direct, joint or subsequent liability of DKV Seguros with regard to the actions of such doctors or centres, where DKV Seguros has no control capacity owing to the protection of professional secrecy, the confidentiality of health details and the prohibition of third parties gaining access to data in the health sector. As medicine is an activity of means and not results, DKV Seguros cannot guarantee the positive outcome of medical acts that the policy covers.

# 5.

## Excluded risks and additional coverage

### 5.1 Excluded risks

The following are excluded from the general guarantees of this present insurance contract, and therefore are not subject to any compensation:

- a) Any alteration of the state of health, chronic or not, injury or constitutional defect of origin that precedes the effective date of the policy, either diagnosed or not and their consequences.
- b) Pathological processes exclusively manifested by pain, alphas, dizziness or vertigo, that is to say, without other objective symptoms that are medically verifiable.
- c) Mental or psychosomatic disorders or illnesses, such as: depression, stress, anxiety or eating disorders.

Dementia, Alzheimer's disease, fibromyalgia or chronic fatigue syndrome, burnout syndrome, multiple chemical sensitivity syndrome.

d) Pregnancy, abortion, childbirth and puerperium.

e) Illnesses or complications derived from or aggravated by pregnancy, abortion, childbirth and puerperium.

f) Illnesses or injuries directly or indirectly linked to drug addiction or the chronic consumption of alcohol, narcotics or psychotropic substances without a medical prescription.

The consequences of accidents or injuries caused in a state of intoxication, or under the influence of narcotics or psychotropic substances.

For the purposes of this policy, intoxication is considered to be when the degree of blood alcohol exceeds the legal limit established for driving motor vehicles. Furthermore, it is considered that the insured person is under the influence of narcotics or psychotropics when their presence is detected via an analytical or laboratory determination.

g) Illnesses or injuries as a consequence of war, terrorism and riots or public disorder, extraordinary events or catastrophes such as earthquakes, hurricanes, floods, radioactive leaks and officially declared epidemics.

h) Accidents derived from the insured person taking part in fights (unless acting in legitimate self-defence) and criminal acts. In these cases, 25% of the compensation may be advanced provisionally without having to wait for the final sentence, when the case brought by the insured person clearly states that the insured person did not provoke the fight.

Injuries derived from attempted suicide or injuries that are self-inflicted.

i) Accidents resulting from:

- › Off-piste skiing, mountain skiing and ski touring. Off-piste snowboarding and acrobatics.
- › Cycling and motorcycling, and, generally, the use of all kinds of vehicles in training, racing, competitions, contests, acrobatics, sports events, and their use on roads not covered with tarmac or which are private.

The use of special land motor vehicles for agricultural or farming tasks is excluded from this, and is thus covered, when the accident takes place during such activities, is declared a work accident by the National Social Security Institute and said profession is declared and contracted with the policy.

- › Climbing, mountaineering (except for hiking and trekking), canyoning and similar activities, such as extreme sports, caving, bungee jumping, rafting, activities in rough waters or diving.
- › Air-borne activities and flying activities unless as a passenger of commercial flights.
- › Martial arts, contact sports and self-defence.
- › Events with livestock in the area set out for their elaboration.

j) Accidents caused while exercising or practising any sport in a professional capacity.

k) Any type of non-healing treatment and its consequences that the insured person voluntarily undergoes, such as cosmetic surgery, vasectomy, tubal ligation, etc., unless for an illness or an accident. Surgical treatment for obesity, including with a medical prescription. Techniques for assisted reproduction, investigation and treatment of infertility and amniocentesis.

## 5.2 Additional coverage

In spite of the exclusions contained in the previous section, 5.1, exceptionally, the coverage of the following cases is established, to which the indicated exclusion will not be applied and from which the possible contracted excess will be discounted:

For daily temporary disability:

- > The surgical correction of nearsightedness, farsightedness and presbyopia will have a maximum coverage of three days, and dental pathology will have a maximum coverage of two days (exclusion 5.1.a not applicable)
- > Pains and algiass without medically ascertainable objective signs will have a maximum coverage of ten days, and dizziness and vertigo without medically ascertainable objective signs will have a maximum coverage of four days maximum coverage (exclusion 5.1.b not applicable)
- > Mental or psychosomatic disorders or illnesses, such as: depression, stress, anxiety or eating disorders and dementia, Alzheimer's disease, fibromyalgia or chronic fatigue syndrome, burnout syndrome, multiple chemical sensitivity syndrome will have a maximum provision of ten days, provided that the medical leave involves hospitalisation (exclusion 5.1.c not applicable)

- > Illnesses or complications derived from, or aggravated by pregnancy, abortion, childbirth and puerperium will have a maximum compensation of 25 days per gestation process. Contracting the first period is required and a period of grace of eight months will be applied (exclusion 5.1.e not applicable)

For the guarantee of temporary scaled disability:

- > Surgical correction for myopia, hypermetropia and presbyopia and dental pathology as described in the scale of Appendix I (exclusion 5.1.a not applicable)
- > Pains, algiass, dizziness and vertigo without medically ascertainable objective signs that are listed in the scale of Appendix I (exclusion 5.1.b not applicable)
- > Mental or psychosomatic disorders or illnesses, such as: depression, stress, psychosomatic illnesses, dementia or Alzheimer's disease that are described in the psychiatry section of the scale of Appendix I (exclusion 5.1.c not applicable)
- > Childbirth and intrauterine death as described in the scale of Appendix I. A period of grace of eight months is applicable (exclusion 5.1.d not applicable)

For the guarantee of hospital care:

- › Illnesses or complications derived from, or aggravated by pregnancy, abortion, childbirth and puerperium will have a maximum compensation of 7 days per gestation process. A period of grace of eight months will be applied (exclusion 5.1.e not applicable)

For the guarantee of surgical procedure:

- › Childbirth as described in the table of surgical procedures will apply with a period of grace of eight months (exclusion 5.1.d not applicable)



# 6.

## Relationship between the parties. Legal aspects

### 6.1 Bases of the contract

The declarations made by the policyholder and/or the insured person, according to the questionnaire provided by the insurer, together with the insurance policy, constitute a single unit -the base of the contract-, which comprises the coverage of the risks within the agreed limits.

If the content of the policy differs from the insurance application or the agreed clauses, the policyholder will be able to request from DKV Seguros, during a period of one month starting from the issue of the policy, to correct the existent divergence.

Once this term has lapsed without the request being made, that stipulated in the policy will be binding.

If the insured person's age or profession were not truthfully declared and the premium paid is lower than the real amount due, the provision provided by the company will be reduced in proportion to the premium received.

If on the contrary the premium paid is higher than that due, DKV Seguros is obliged to refund the excess without interest.

In each renewal of the insurance contract, the premiums to pay may vary depending on the age and other personal circumstances of the insured person. Age groups may be established in some cases.

When the insured person reaches, during the course of the policy, an actuarial age included in another group, the premium corresponding to the new age group shall apply at the next annual maturity date.

DKV Seguros shall not be subject to any limit in terms of annual premium variations. The amount set for the full premium, after the corresponding surcharges, shall meet the sufficiency principles and technical balance, in accordance with the regulatory standard for the activities of this insurance company.

The policyholder may choose between extending the contract or terminating it upon the expiry date of the current period. In this last case, the policyholder must notify DKV Seguros in writing, with at least one month's notice before the expiry date, of his wish to terminate the contractual relationship at the end of the contract.

## 6.2 Effective date and duration of the policy

The guarantees of the policy are effective, with prior payment of the premium, at the time and on the date indicated in the particular conditions.

This insurance policy is for the period of one year unless otherwise agreed, with the possibility of extending on a yearly basis unless either of the contracting parties opposes this extension by demonstrable means.

DKV Seguros can oppose said renewal by way of written notification to the policyholder if it decides not to renew it or if it decides to make any changes therein, at least two months prior to the conclusion of the policy year.

The policyholder can also oppose the renewal of the policy, at least one month prior to the maturity date written therein, provided that DKV Seguros is notified in a verifiable manner.

The contract will be terminated:

- › At the end of the policy year in which the insured person turns 70 years old.
- › When the insured person becomes disabled or permanently unable to carry out his profession, or when he requests recognition of this state, or receives a pension, service provision or compensation for said cause.
- › When the insured person retires, becomes unemployed or similar, or ends all professional or work activities.

Coverage for the guarantee of total and permanent disability will end after the policy year in which the insured person turns 65.

## 6.3 Payment of the premium. Suspension of coverage, rehabilitation and termination

The insurance policyholder is obliged to pay the first premium or the single premium at the time of accepting the contract.

Subsequent premiums must be paid on their corresponding dates of maturity.

The policyholder can request the payment of the annual premiums in half-yearly, quarterly or monthly instalments.

In these cases the corresponding surcharge will be applied. The payment of the premium in instalments does not exempt the policyholder from his obligation to pay the full annual premium.

If, due the fault of the policyholder, the first instalment, or the single premium has not been paid, DKV Seguros is entitled to cancel the contract or to demand the payment by legal means according to the policy.

In any case, and unless otherwise stated in the particular conditions, if the premium has not been paid before the incident takes place, DKV Seguros will be released from its obligation.

In the event of non-payment of the second or successive premiums, or their instalments, DKV Seguros' coverage will be suspended for one month after the due date.

If DKV Seguros does not receive the payment within the six months following said maturity, the contract will be understood as terminated.

If the contract had not been cancelled or extinguished according to the previous conditions, the coverage will become effective twenty four hours after the day that the policyholder pays the premium.

DKV Seguros will assume the premium corresponding to the period during which there was no coverage due to lack of payment.

In any case, while the coverage is suspended, DKV Seguros will only be able to claim for the payment of the premium for the current period.

DKV Seguros shall only be bounded by the receipts issued by DKV Seguros.

Unless otherwise stated in the particular conditions, the place of payment of the premium will be the one that appears in the standing order issued by the bank.

To this end, the policyholder shall provide DKV Seguros with the details of his bank account to pay the receipts of this insurance by direct debit, authorising the financial entity to settle them.

If no location is specified in the particular conditions for the payment of the premium, by default this will be the policyholder's address.

The payment of the premium by the policyholder to the broker is not understood to have been made to DKV Seguros unless the broker gives the policyholder the official receipt of the premium from DKV Seguros.

#### **6.4 Obligations of the policyholder or the insured person**

a) To declare to DKV Seguros, in agreement with the questionnaire provided, with truthfulness, diligence and without mental reservation, all the circumstances known to him that can influence the evaluation of the risk.

**b)** Inform DKV Seguros, during the validity of the contract and as soon as possible, all changes of address, profession or habitual activity and/ or the commencement of activities or professions that are of such a nature that, had they been known by DKV Seguros when the policy was taken out, would not have been accepted or would have been subject to different terms and conditions.

A change in the occupation or professional activity carried out by the insured person and the way in which it is carried out - whether on a self-employed or employed basis -, which are indicated in the particular conditions, are circumstances that modify the risk level and therefore must be communicated to DKV Seguros (Articles 11 and 12 of the Insurance Contract Act).

In the event that the increased risk, which is not communicated to DKV Seguros before an accident takes place, pertains to the insured person going from self-employed to employed, the daily provision cannot, in any case, be higher than that which DKV Seguros has determined in its rates for employees at the time of the accident.

The premium agreed upon will consequently be adapted to that which would have been applied if the true risk level had been known and, if necessary, the policyholder will then be refunded the difference between the new, adapted premium and the premium paid for the current yearly period.

**c)** Use all necessary means at his disposal to obtain a prompt recovery and reduce the consequences of the incident.

The breach of this duty with the intention of deceiving, harming or obtaining additional profit from DKV Seguros shall relieve it of any provision arising from the incident.

**d)** The policyholder or the insured person must inform DKV Seguros of the occurrence of the incident within seven days of it coming to their knowledge, unless a longer period is specified in the policy.

**e)** The policyholder or the insured person must, also, provide DKV Seguros with full information regarding the circumstances and consequences of the claim or authorise DKV Seguros to access these directly.

In the event of violation of the duties stated in sections a, b, c, d, and e above, the loss of the right to compensation will only take place in the case that deceit or serious negligence has occurred (Articles 10, 12, 16, and 17 of the Insurance Contract Act).

## 6.5 Provisions by DKV Seguros

DKV Seguros is obliged to settle the provision at the end of the investigations and necessary evaluations to establish the existence and definitive quantity of the claim, which is fully justified.

For the guarantee of “temporary disability”, once forty days have lapsed from the notification of the claim, the insured person will have the right to request advance payments of the final provision when the periods of time off sick corresponding to advance payment have been sufficiently proven, in the opinion of DKV Seguros, both regarding the duration and the cause.

These advance payments will not represent the final acceptance of the consequences of the claim under any circumstances and, in the event that DKV Seguros, at the end of its investigations and necessary evaluations, rules that the advances were not due, the insured person is obliged to refund them immediately.

## 6.6 Revaluation of premiums and provisions

For the purpose of maintaining its value up to date, the provisions and compensations insured by this contract will be readjusted, unless agreed otherwise, automatically at each annual maturity according to one of these two possibilities:

1. By the same proportion as the increase in the annual rate of the Consumer Price Index (CPI), published by the National Institute of Statistics.

2. Based on a set percentage defined by the policyholder when contracting the insurance policy. The revaluation of the provision and compensation will have its corresponding effect on the premium to be paid, and it will be reflected in the receipt.

As a consequence of the actuarial position of the insurance contract signed, the corresponding premium due will be adapted depending on the insured person’s age, as well as the possible changes in professional activity or work or guarantees of the policy.

## 6.7 Communications

Communications by the policyholder or the insured person to DKV Seguros should be made to its address.

Nevertheless, demonstrable notifications that are made to the agent of DKV Seguros that mediated in the policy will also be valid.

Communications from an insurance broker to DKV Seguros on behalf of the policyholder or the insured person will have the same effect as if they had been made directly to DKV Seguros.

However, communications by the policyholder or the insured person to the insurance broker are not understood to be made to DKV Seguros until they are received by it.

Communications by DKV Seguros to the policyholder or to the insured person will be made to their address as shown in the insurance contract, unless DKV Seguros has been notified of the change of address.

To be contractually valid, communications between the insured person (or his broker) and DKV Seguros (or its agent or broker) must be made in a demonstrable form in writing.

## **6.8 Limitation and jurisdiction**

Any actions derived from the contract prescribe after five years.

The competent judge made aware of actions derived from the contract will be that corresponding to the insured person's place of residence.

Appendix I. Scale.  
Temporary disability  
according to a scale

<b>Main denomination</b>	<b>Days</b>
<b>Cardiocirculatory</b>	
Cerebral vascular accident (thrombosis, clot, stroke,etc.) (C.V.A.)	60
Transitory cerebral ischemic vascular accident	20
Aortic aneurysm. Surgical treatment	40
Coronary aneurysm. Coronary arteriosclerosis	30
Chest angina, Angina pectoris, Syndrome angina	20
Cardiac arrhythmias, Blockages, Paroxysmal tachycardia	20
Clot or arterial thrombosis	60
Lung clot; acute pulmonic heart	50
Chronic cardiopulmonary illness	30
Hypertensive renal illness	30
Rheumatic illness of the heart (valvulopathy, endocarditis, etc.)	50
Blood disease (Hemophilia, anemias, CID, purpura, etc.) or spleen (cyst, fibrosis, etc....)	14
Rheumatic fever. Rheumatic arthritis	20
Phlebitis and Trombophlebitis	20
Hemiplegia, paraplegia, or tetraplegia by ACV	60
Hemorrhage extradural or subdural (not traumatic)	10
Haemorrhage intracerebral (not traumatic)	60
Hemorrhoids. Crisis without surgery.	2
Hemorrhoids. Surgical treatment	15
Primary or essential arterial hypertension	5
Acute heart attack. Acute coronary inadequacy	100
Heart congestive inadequacy, acute lung oedema, heart asthma	40
Lymphangitis, lymphedema	10
Cardiomyopathy, valvulopathy, endocarditis, etc. not rheumatic	50
Acute Pericarditis, pericardial effusion	30
Isolated cardiovascular symptom (palpitations, tachycardia, flutter, etc.)	3
Thrombosis of the hepatic portal vein	30
Varices or varicose veins of the leg (surgical treatment)	15
Varicocele; esophageal varices (surgical treatment)	20
<b>Dermatology</b>	
Lymphatic abscess, non-specified adenopathy, adenitis	15
Abscesses of the fingers, whitflow, infection pitting	20
Candidiasis, muguet	3
Cellulite or abscess in the skin (not of the fingers)	20
Illnesses of the nails	7



Boils	3
Dermal mycosis, ringworm	7
Subcutaneous nodules, located oedema	3
Athlete's foot, onychomycosis, etc.	7
Psoriasis and dysfunctions	20
Keratosis and hyperkeratosis, Keloid scar, Scleroderma, etc.	15
Sebaceous cyst, acne	7
Cyst, fistula or breast, pilonidal or coccygeus	20
Rash	7
Viral warts (surgical treatment)	3
<b>Digestive</b>	
Abcess in anal and rectal region	20
Non-amebic hepatic abscess. Hepatic coma	30
Achalasia, Esophagitis, Esophageal Ulcer, etc.	20
Acute appendicitis. Surgical treatment	15
Cirrhosis, chronic hepatitis	30
Cholangitis	7
Cholecystitis	20
Abdominal colic	3
Colic hepatobiliary. Gallstone	10
Colitis idiopathic. Toxic megacolon	15
Irritable colon. Megacolon (not toxic)	20
Intestinal diverticulum (non-Meckel). Surgical treatment	20
Illnesses of the salivary glands	20
Illnesses of the maxillaries	20
Regional enteritis, Crohn's disease. Ulcerative colitis	40
Pyloric stenosis	25
Stomatitis, oral cyst, oral abscess, etc.	10
Anal fissure or fistula. Surgical treatment	20
Acute gastritis	4
Gastroenteritis (for Salmonella)	4
Non-infectious gastroenteritis, non-infectious colitis	2
Gastrointestinal haemorrhage (without gastrointestinal ulcer)	10
Hepatitis B, C, D	70
Non-specified hepatitis	25
Viral hepatitis AT	30
Abdominal hernia non-inguinal non-gangrened, without obstruction. Surgical treatment	30

Inguinal hernia. Surgical treatment	20
Portal hypertension. Phlebitis of the portal vein	30
Non-well-defined intestinal infection	3
Obstruction or intestinal invagination, paralytic ileus	20
Acute pancreatitis	30
Dental pathology, Gingivitis, Abscess, Cyst, Malocclusion, etc.	3
Peritonitis	30
Anal and rectum polyps (endoscopic resection)	2
Rectal prolapse, anal and rectum polyps (inpatient surgery)	20
Hidatidico cyst, echinococosis, hidatidosis	20
Isolated digestive symptom (nauseas, vomits, pyrosis,etc.)	3
Teniasis, cysticercosis	20
Trichinosis	20
Gastric ulcer, duodenal, jejunal, etc.	25
<b>Pregnancy and childbirth</b>	
Intra-uterine death (more than seven months of gestation)	20
Childbirth under normal conditions	20
Childbirth by Caesarean operation, forceps or sucker	20
Complicated childbirth cord, lacerations, infection, etc.)	20
<b>Endocrinology</b>	
Goiter, thyroid nodule, hypothyroidism; hypothyroidism, Graves-Basedow	30
Hypoglycemic or insulinic coma	21
Complicated diabetes mellitus (coma, cataract, nephropathy, retinopathy, neuropathy, etc.)	21
Ovarian dysfunction	3
Illnesses of nutritional origin	10
Illnesses of the thymus (hyperplasia, hypertrophy, abscess, etc)	21
Gout (arthropathy, nephropathy, tophus, etc.)	7
Other thyroid dysfunctions (cyst, haemorrhages, thyrocalcitonin, etc.)	21
Polycystic ovary Surgical treatment	15
Thyroidectomy	30
Thyroiditis	21
Dysfunction of the suprarenals (Conn, Cushing, Addison ,etc.)	21
Dysfunctions of the hypophysis, acromegaly, dwarfism; insipid diabetes, panhypopituitarism	21
Dysfunctions of the parathyroids, hypoparathyroidism, hyperparathyroidism	14

**Gynecology**

Adnexitis, salpingitis, oophoritis, parametritis (non-gestational)	15
Cervicitis, vaginitis, vulvovaginitis, bartholinitis, etc.	10
Dysmenorrhea, premenstrual syndrome	3
Benign mammary dysplasia, solitary breast cyst	7
Dysplasia, leukoplakia, or uterine neck polyp	10
Dysplasia, leukoplakia, or vagina polyp	7
Endometriosis	5
Pelvic inflammatory illness, endometritis, etc. (non-gestational)	15
Mastitis or diffuse inflammatory mastopathy (non-gestational)	7
Metrorrhagias	10
Unspecified uterus polyp	20
Genital prolapse (non-gestational)	15
Ovarian cyst (surgical treatment or laparoscopic)	3

**Infectious**

Amebiasis; amebic dysentery, etc.	7
Botulism	40
Brucellosis, Malta fever	40
Verruca acuminata	7
Diphtheria	20
Tropical infectious diseases	40
Erisipelas	7
Erythema infectiosum (5th disease). Roseola infantum (6th disease)	20
Scarlet fever, angina, tonsillitis, laryngitis and tracheitis streptococcal	7
Q fever, rickettsiosis	21
Recurrent fever (non-symptom)	7
Typhoid fever or paratyphoid	40
Gangrene gas, intestinal lipodystrophy	50
Simple herpes, genitals, eczema herpeticum	7
Herpes zoster or area with neurological affectation	7
Infection meningococcal (carditis, meningitis, etc.)	20
Infectious Mononucleosis, Pfeiffer´s disease	14
Parotitis, urliana fever	4
Rubella	20
Measles	20
Septicemia with hospital admission	40
Tetanus	90
Whooping cough	14

Acquired toxoplasmosis	20
Miliary tuberculosis, disseminated or widespread	100
Chickenpox	7
<b>Neurology</b>	
Intracranial abscess, subarachnoidal, subdural, extradural, etc.	90
Muscular dystrophy and other myopathy	20
Viral encephalitis	30
Encephalitis, mielitis, poliomyelitis, etc.	90
Demyelinating diseases of the CNS, multiple sclerosis or in plaques, syringomyelia	30
Epilepsy (all forms)	30
Phlebitis and thrombophlebitis intracranial	14
Infection of the SNC for slow virus	30
Headache, migraine or hemicrania	3
Median nerve injury, ulnar or radial nerve, carpal tunnel syndrome. Carpal tunnel syndrome	30
Bacterial meningitis, bacterial meningoencephalitis	50
Viral meningitis, mycotic, etc.	30
Viral meningitis without specification	30
Mono or polyneuropathies, myasthenia gravis, Guillain-Barré syndrome	30
Neuralgia of the trigeminus	20
Facial paralysis	20
Parkinson's, chorea, ataxia	90
Neurological or isolate muscular symptom (spasms, tremor, ataxia paralysis transit, etc.)	5
Dysfunction of roots and nervous plexus	20
SNC tuberculosis and meninges	100
<b>Ophthalmology</b>	
Choroid alterations, choroidoretinitis	20
Cataract surgery	10
Myopia surgery, hypermetropia and presbyopia	3
Conjunctivitis	3
Retinal detachment	60
Glaucoma (not congenital)	40
Iritis, cyclitis, iridocyclitis, previous uveitis, etc.	30
Eyelid pathology, blepharitis, chalazion, sty	2
Lacrimal apparatus pathology, dacryoadenitis, epiphora, dacryocystitis	2
Total loss of sight in an eye	60
Pterygium	3
Keratitis, queratoconjunctivitis, keratic ulcer, etc.	4
Retinopathy (diabetic, proliferative, etc.)	21

## Oncology

Cancer or extended or peritoneum carcinomatosis	120
Carcinoma in situ of genitourinary system	15
Carcinoma in situ of respiratory system	60
Carcinoma in situ of the breast (not skin)	150
Carcinoma in situ of the skin	30
Carcinoma in situ of digestive organs	150
Carcinoma in situ of other places	15
Meckel´s diverticulum	150
Hodgkin´s disease. Hodgkin´s lymphoma	150
Phaeochromocytoma	60
Hemangioma, lymphangioma, angioma, glomus, of any place	7
Leiomyoma, fibroma, myoma, or fibromyoma uteri	30
Leukaemia	150
Lymphoma (not Hodgkin´s)	150
Lymphosarcoma and reticulumsarcoma	90
Lipoma, angioliopoma, fibrolipoma, mixolipoma	7
Cutaneous melanoma, melanocarcinoma	80
Multiple myeloma and immunoproliferative neoplasms	120
Osteosarcoma, chondrosarcoma, Ewing´s sarcoma	90
Polycythemia rubra, myeloproliferative syndrome	21
Vocal cords polyp	15
Kaposi´s sarcoma	120
Sarcomatosis, fibrosarcoma, non-specified sarcoma	60
Zollinger-Ellison´s syndrome	30
Benign brain tumour and other parts nervous system	120
Benign esophagus tumour, stomach, or intestine	15
Benign liver tumour, pancreas, or spleen	15
Benign bones tumour or articular cartilages	15
Benign skin tumour; blue nevus; pigmented nevus	7
Benign lip tumour, mouth or pharynx. Surgical treatment Surgical treatment	15
Benign breast tumour (not a cyst, neither in skin)	15
Benign masculine genital organs tumour	15
Benign respiratory organs tumour or intrathoracic	15
Benign other endocrine glands tumour (suprarenal, parathyroid, hipophysis, etc.)	30
Benign tumour in other places, not specified places, or lymph node	30
Benign ovary tumour	15
Benign kidney tumour and other urinary organs	15

Benign thyroid tumour Adenoma thyroid	30
Malignant brain tumour	150
Malignant digestive/peritoneum tumour without specifying place	150
Malignant stomach tumour	150
Malignant nasal fossa, middle ear and breast accessory tumour	150
Malignant liver tumour; hepatoblastoma, liver cell carcinoma	150
Malignant small intestine tumour or colon	150
Malignant woman ´s breast tumour	120
Malignant bladder tumour	120
Malignant lip, buccal cavity, pharynx and esophagus tumour	100
Malignant larynx or vocal cords tumour	180
Malignant feminine genital organs tumour	120
Malignant other locations or non-specified tumour	60
Malignant pancreas tumour, gastrinoma	180
Malignant prostate tumour	120
Malignant rectum tumour, rectosigmoid junction or year	150
Malignant kidney tumour	120
Malignant testis tumour	120
Malignant thyroid tumour	60
Malignant trachea, bronchuses, lung or pleura tumour	120
Malignant biliary pathway and biliary tract extra-hepatic tumour	150
<b>Osteomuscular</b>	
Arthritis or arthropathy (infectious,etc.)	20
Traumatic arthropathy	20
Rheumatoid arthritis (except spine), inflammatory poliartthritis	30
Bursitis, synovial cyst, ganglion	30
Non-traumatic cervicalgia, without objective clinical tests	10
Non-traumatic cervicalgia, with objective clinical tests	20
Knee surgery (meniscus, ligaments, floating bodies chondromalacia patelae)	30
Joints not knee surgery: recurrent dislocation, ankylosis	30
Surgery for acquired deformities (finger stenosis, hammer finger, hallux valgus, etc.). Surgery	30
Paget's disease. Deforming osteitis	30
Epicondylitis	30
Calcaneal spur, or osseous	30
Anqylosing spondylitis, vertebral rheumatoid arthritis	60
Spondylosis, vertebral arthrosis, ankylosis, vertebral hyperostosis	60
Plantar fasciitis, Dupuytren ´s disease	10
Slipped disk. Arthrodesis treatment	100

Slipped disk. Laminectomy treatment	60
Slipped disk. Chemonucleolysis or nucleotomy percutaneous treatment	40
Slipped disk. Medical treatment	10
Slipped disk. Orthopaedic treatment	20
Hydrartrosis or articular effusion	30
Lumbago, lumbalgy, or sciatica, of non-traumatic origin, without clinical objective tests	10
Lumbago, lumbalgy, or sciatica, of non-traumatic origin, with clinical objective tests	20
Disseminated Lupus erythematosus, polymyositis idiopathic	20
Myositis, panniculitis	20
Bilateral osteoarthritis (non-vertebral)	30
Osteochondropathy, osteochondrosis, osteochondritis	60
Osteomyelitis, periostitis	60
Osteoporosis, bone cyst	40
Periarthritis escapulothoracic	30
Polymyalgia rheumatica	60
Peripheral tendinitis	10
<b>Otolaryngology</b>	
Middle and internal ear surgery	30
Mastoiditis and related disease	20
Acute otitis or chronic	4
Perforation of the eardrum, tympanitis	14
Vertigo (only symptom), without specifying (non-Meniere)	4
Vertigo-Meniere, vestibular vertiginous syndrome	21
<b>Psychiatry</b>	
Anorexia or stress that requires hospital admission	10
Dementia, psychosis, or schizophrenia that requires hospital admission	10
Depression or psychosomatic disease that requires hospital admission	10
Neurosis, stress, or anxiety that requires hospital admission	10
<b>Respiratory</b>	
Peritonsillar abscess	20
Pulmonary abscess or mediastinal	30
Aphonia without specified cause	5
Alveolitis and extrinsic allergic pneumonitis	30
Tonsillitis	2
Asthma. Asthmatic status or crisis	5
Bronchopneumonia	15
Bronchitis, bronchiolitis or acute tracheobronchitis	7

Complications of the lung obstructive chronic disease (EPOC)	40
Vocal cords disease. Non-adenomatous polyp	10
Emphysema	40
Pharyngitis, angina, adenoid vegetations surgery	2
Flu (Influenza) and its complications	3
Turbinate hypertrophy	2
Chronic laryngitis	15
Laryngitis or acute tracheitis	3
Acute laryngopharyngitis	3
Pneumonia	20
Non-traumatic pneumothorax	20
Non-traumatic surgical pneumothorax	40
Diaphragm pathology, mediastinum, tracheostomy, etc.	20
Pleuritis, pleurisy, pleural effusion	20
Nasal polyps (surgery)	7
Common cold, nasal catarrh, rhinopharyngitis, etc.	2
Allergic rhinitis	7
Chronic rhinopharyngitis, ozena	2
Sarcoidosis	40
Isolated respiratory symptom (dyspnea, cough, hemoptysis, etc.)	3
Sinusitis	5
Respiratory or lung tuberculosis	60
<b>Urology</b>	
Balanitis, priapism	10
Prostatic calculus	10
Calculus or renal lithiasis or ureteral, renal colic by lithiasis	10
Calculus or vesical or urethral lithiasis	10
Soft chancre. Reiter´s disease. Venereal lymphogranuloma	20
Renal colic without evidence of lithiasis	3
Bladder diverticulum	10
Urethral stenosis	10
Phimosis	5
Hydrocele	20
Hyperplasia and prostate adenoma. RTU	30
Gonococcal infection, gonorrhea	4
Urinary infection. Cystitis. Urethritis	3
Renal failure. Uremia. Nephrosis. Nephritis. Nephropathy	40
Renal Lithiasis tried by means of lithotricy	3
Nephrectomy	60



Orchidectomy	30
Orchitis, epididimitis	20
Pyelonefritis, renal abscess, renal infection, etc.	10
Prostatitis	15
Renal cyst, ureteral stenosis	15
Torsion of the testis, scrotum abscess, etc.	15
<b>Sprains and luxations</b>	
Sprain or dislocation temporo-maxillary-mandibular	15
Cervical sprain, dislocation, contracture, cervicalgy. Medical treatment	10
Cervical sprain, dislocation, contracture, cervicalgy. Orthopaedic treatment	20
Lumbosacral sprain, sacroiliac or sacroskiatic	10
Lumbalgy or lumbago of traumatic origin	10
Hip sprain or dislocation (without fracture)	25
Ribs sprain	10
Sternoclavicular dislocation. Orthopaedic treatment	20
Sternoclavicular dislocation. Surgical treatment	30
Sprain or dislocation of shoulder. Surgical treatment	50
Sprain or dislocation of elbow	30
Sprain or dislocation of fingers, phalanx, etc. of the hand	20
Sprain or dislocation of wrist, carpus, etc.	20
Sprain or dislocation of shoulder. Medical treatment	15
Sprain or dislocation of shoulder. Orthopaedic treatment	30
Dislocation of knee or patella	30
Sprain of knee (collateral or patellar ligaments). Medical treatment	7
Sprain of knee (collateral or patellar ligaments). Orthopaedic treatment	15
Sprain of knee (collateral or patellar ligaments). Surgical treatment	30
Traumatic injury with meniscus tear. Orthopaedic treatment	20
Traumatic injury with meniscus tear. Surgical treatment or arthroscopy	30
Rupture of cruciate knee ligaments or patellar tendon (surgical treatment)	90
Triad, traumatism of multiple structures of the knee	120
Knee prosthesis	80
Dislocation of ankle	30
Ankle sprain. Medical treatment	10
Ankle sprain. Orthopaedic treatment	20
Ankle sprain. Surgical treatment	40
Rupture of ankle ligaments	45
Rupture of Achilles tendon	50
Dislocation of the foot (tarsus, metatarsus, phalanges, fingers, etc.)	20

Sprain of the foot or toes. Orthopaedic treatment	4
Sprain of the foot or toes. Surgical treatment	15
Tear or muscular laceration (with ultrasound confirmation)	5
Tear or muscular laceration (without ultrasound confirmation)	2
<b>Fractures</b>	
Extraction of osteosynthetic material	2
Nose fracture, maxillary or jaw. Medical treatment	20
Nose fracture, maxillary or jaw. Surgical treatment	60
Fracture of skull without neurological affectation	60
Fracture of skull with neurological affectation	210
Spine fracture without spinal cord injury. Orthopaedic treatment	60
Spine fracture without spinal cord injury. Surgical treatment	120
Spine fracture with spinal cord injury (paraplegia, tetraplegia, paralysis, etc.)	180
Rib fracture or sternum without organic affectation	20
Rib fracture or sternum with organic affectation	40
Pelvis fracture. Orthopaedic treatment	80
Pelvis fracture. Surgical treatment	120
Collarbone or shoulder blade fracture. Orthopaedic treatment	40
Collarbone or shoulder blade fracture. Surgical treatment	60
Humerus fracture. Orthopaedic treatment	80
Humerus fracture. Surgical treatment	100
Fracture of radius and/or ulna. Colles's fracture	50
Scaphoid fracture	100
Carpus or wrist fracture. Orthopaedic treatment	40
Carpus or wrist fracture. Surgical treatment	80
Metacarpal or hand fracture. Bennett's fracture	30
Fracture of the phalanges or hand's fingers	30
Fracture of neck of femur, cotilo, trochanters	120
Hip fracture-dislocation	240
Hip prosthesis	120
Fracture of diaphysis of the femur. Orthopaedic treatment	100
Fracture of diaphysis of the femur. Surgical treatment	120
Patella fracture. Orthopaedic treatment	50
Patella fracture. Surgical treatment	60
Tibia and/or fibula fracture. Orthopaedic treatment	70
Tibia and/or fibula fracture. Surgical treatment	90
Ankle fracture or maleolar	60
Bimaleolar fracture	80

Trimalleolar fracture	100
Calcaneus fracture. Orthopaedic treatment	80
Calcaneus fracture. Surgical treatment	100
Tarsus or metatarsus fracture. Orthopaedic treatment	50
Tarsus or metatarsus fracture Surgical treatment	70
Tarsus or metatarsus fracture Orthopaedic treatment	20
Tarsus or metatarsus fracture Surgical treatment	30
<b>Wounds and trauma</b>	
Shock or contusion - cranioencephalic traumatism (CTE). With hospital admission	10
Subdural hematoma for traumatism without fracture	30
Cerebral haemorrhage for cranioencephalic traumatism without fracture	50
Pneumothorax or haemothorax traumatic with wound	50
Contusion without face or scalp wound	3
Contusion without wound of the eye and adnexa	3
Contusion without wound of the trunk	3
Contusion without wound of the superior member	3
Contusion without wound of the inferior member	3
Bruised contusions or multiple erosions without fracture or wound	5
Wound with superficial lesion of the hand	5
Wound with superficial lesion of the fingers	5
Wound with superficial lesion of the hip or leg	5
Wound with superficial lesion of the foot or fingers	5
Wound with superficial lesion of the eye and adnexa	5
Wound that stitches in finger, hand, wrist, foot, knee, elbow, or head	7
Traumatic nerve wound	30
Penetrating wound in neck, trunk, limb, or internal organ	20
Deep wound of the bilbus oculi	40
Cutting of the tendons of the hand or fingers	40
Partial traumatic amputation of the thumb	30
Total traumatic amputation of the thumb	60
Partial traumatic amputation of the 2nd, 3rd, 4th of 5th finger	20
Traumatic total amputation of the 2nd, 3rd, 4th of 5th finger	40
Traumatic amputation of the arm or hand	120
Traumatic amputation of toes	30
Traumatic amputation of the foot (not fingers)	90
Traumatic amputation of the leg	240
Burn in face, head or neck	20

Minor burn: 1st (<15%), 2nd (<5%), 3rd (<1%)	10
Moderate burn: 1st (15-30%), 2nd (5-20%), 3rd (1-10%)	30
Severe burn: 1st (31-60%), 2nd (21-40%), 3rd (10-25%)	90
Very severe burn: 1st (>60%), 2nd (40-90%), 3rd (25-80%)	180
Multiple serious traumatism with hospital admission over 30 days	120

Appendix II.  
Table.  
Surgical procedures

**Table. Surgical procedures**

Group	Intervention	% compensation
	Diagnostic or therapeutic act carried out in an operating theatre requiring admission to hospital for a period exceeding 24 hours and which is specifically not listed in the rest of the table of surgical operations.	1%
<b>Angiology and Vascular Surgery</b>		
1	Superficial tumour. Small cutaneous angiomas.	2%
3	Cutaneous lymphangiomas and angiomas.	8%
3	Arteriovenous fistula for hemodialysis or simple therapeutics.	8%
3	Varicose veins: perforated, collateral, relapse. Saphenous ligatures.	8%
4	Arterial embolectomy (femoral popliteal, humeral or brachial).	12%
4	Extensive profundoplasty.	12%
4	Medium vascular traumatism. Vascular suture.	12%
4	Varicose veins: saphenectomy, complete phleboletomy.	12%
5	Peripheral aneurysms.	18%
5	Angioma and neck or face lymphangiomas. Plasties.	18%
5	Femoral popliteal bypass with prosthesis or unilateral ileo femoral.	18%
5	Complex arteriovenous fistula.	18%
5	Thrombectomy by-pass or ileo femoral.	18%
6	Unilateral aorta femoral by pass or femoral popliteal; saphenous vein.	30%
6	Femoral popliteal endarterectomy.	30%
<b>General Surgery of the Digestive System</b>		
0	Abscess, placa facial, ulcer, slough. Debriding or drainage.	1%
0	Condyloma, keloid scar. Removal.	1%
0	External haemorrhoid or anal excrescence. Exeresis.	1%
0	Lipomas, sebaceous cysts, small cutaneous tumours. Removal biopsy.	1%
1	Perianal or gluteous abscess. Surgical drainage.	2%
1	Haemorrhoidal thrombus. Thrombectomy.	2%
1	Benign anal tumours.	2%
2	Anal fissure. Resection, sphincterectomy.	5%
2	Epigastric hernia. Muscular hernia due to breaking of fascias.	5%
2	Pneumothorax, pyothorax or chylothorax. Puncture and drainage.	5%
2	Tumourectomy. Quadrantectomy.	5%
3	Pelviorectal abscess. Drainage.	8%
3	Simple Anoplasty.	8%
3	Perional cellulitis. Drainage.	8%
3	Closing or correction of colostomy.	8%
3	Large condyloma.	8%
3	Diastasis of rectum.	8%

Group	Intervention	% compensation
3	Eversion or evisceration without intestinal resection.	8%
3	Sacrocoxigea or anal fistula, or dermoid cyst.	
	Fistulectomy or Fistulotomy.	8%
3	Hemorrhoids or rectal polyp. Removal.	8%
3	Inguinal and/or unilateral crural hernia. Umbilical hernia.	8%
3	Melanoma. Removal.	8%
3	Rectal prolapse. Surgical treatment perianal tract.	8%
3	Resection of large omentum. Abdominal lipectomy.	8%
3	Tumour of deep soft parts. Removal.	8%
3	Rectal tumour. Fulguration.	8%
3	Clearing of axillae or ganglionated region.	8%
4	Pericolic or Douglas abscess. Debriding or drainage.	12%
4	Appendectomy.	12%
4	Nodular goitre, enucleation. Partial hemithyroidectomy.	12%
4	Cholecystectomy, choledocotomy, colostomy, ileostomy, gastrostomy.	12%
4	Meckel's diverticulum. Resection.	12%
4	Enteroanastomosis without resection.	12%
4	Anal stenosis.	12%
4	Anal or reproduced perianal or multioperated fistula.	12%
4	Strangled hernia without intestinal resection.	12%
4	Inguinal and/or bilateral crural hernia; or unilateral by laparoscopy.	12%
4	Exploratory laparotomy. Biopsy.	12%
4	Intestinal occlusion without resection. Volvulus.	12%
4	Aspiration or feeding jejunostomy.	12%
5	Pancreatic or hepatic abscess. Acute pancreatitis.	18%
5	Biliodigestive anastomosis (colecisto) and choledochoduodenostomies.	18%
5	Appendectomy by laparoscopy.	18%
5	Cholecystectomy. Splenectomy.	18%
5	Partial colectomy.	18%
5	Choledocholithiasis for endoscopic tract.	18%
5	Gastroenterostomy.	18%
5	Atypical hepatectomy. Hepatic suture.	18%
5	Injured or perforated rectum.	18%
5	Inguinal hernia and/or bilateral crural by laparoscopy.	18%
5	Strangled hernias with intestinal resection.	18%
5	Hartmann intervention and similar.	18%
5	Resection of small intestine and anastomosis.	18%
5	Fergusson Mussiari technique and others.	18%
5	Mesenteric tumours.	18%
6	Biliodigestive anastomosis with intestinal plasties.	30%
6	Surgery for residual lithiasis via biliary.	30%

Group	Intervention	% compensation
6	Parathyroid surgery.	30%
6	Colecystectomy for laparoscopy.	30%
6	Total colectomy.	30%
6	Sfinteroplasty or papillotomy.	30%
6	Esophagostomy Esophagorraphy (foreign body, benign tumours, Mallory Weis and diaphragmatic ring).	30%
6	Eventrations diaphragmatic. Plasty.	30%
6	Partial gastrectomy.	30%
6	Hemicolectomy.	30%
6	Diaphragmatic hernia and anti-reflux operations.	30%
6	Ligature of esophagic varicose veins.	30%
6	Radical retroperitoneal lymphadenectomy.	30%
6	Megaesophago, cardio-spasm, Heller operation.	30%
6	Retroperitoneal tumours.	30%
7	Amputation of rectum.	50%
7	Derivative surgery of portal hypertension.	50%
7	Total gastrectomy.	50%
7	Hemicolectomy or colectomy for laparoscopy.	50%
7	Diaphragmatic hernia and anti-reflux operations for laparoscopy.	50%
7	Supraadrenalectomy.	50%
8	Esophagocholeplasties, gastroplasties and enteroplasties.	100%
8	Radical rastrectomy. Hemihepatectomy. Duodenopancreatectomy.	100%

### Maxillofacial surgery

0	Circumscribed abscesses.	1%
1	Lingual or labial frenum. Frenectomy.	2%
1	Papilloma or pharynx polyp.	2%
1	Benign lip, intraoral of soft part tumour, without plasty.	2%
1	Tumour or palpebral cyst, without plasty.	2%
2	Lingual or labial frenum. With plasty.	5%
2	Lithiasis salivate. Removal of stone.	5%
2	Benign intraoral or soft part tumour. Resection with plasty.	5%
2	Superficial tumour in face and neck. Without plasty.	5%
3	Deep, foreign body in face or neck. Removal.	8%
3	Split lip-Vermilion.	8%
3	Split or plasty in Z or similar.	8%
3	Drainage of phlemon abscess in mouth floor. Drainage.	8%
3	Dental, paradental, fissural and follicular cysts.	8%
3	Maxillary sinus. Approach for elimination of radicular remains and other purposes.	8%
3	Benign tongue tumour. Glosectomía partial.	8%
3	Lip tumour. Removal and local plasty.	8%



Group	Intervention	% compensation
3	Superficial face and neck tumour with plasty. With plasty.	8%
3	Benign maxillary tumours.	8%
4	Regional flaps.	12%
4	Thyroglossal fistula or cyst.	12%
4	Orosinusal or oronasal fistula.	12%
4	Alveolar fissure. Osteoplasty.	12%
4	Sublingual gland. Removal.	12%
4	Complementary osteotomies.	12%
4	Maxillary cyst with sinus affectation of adjacent structure.	12%
4	Lingual tumour. Hemiglossectomy or total glossectomy.	12%
4	Maxillary tumour or cyst. Removal with partial resection of maxillary.	12%
4	Cutaneous tumours of face and neck with regional plastic reconstruction.	12%
5	Maxillary fracture. Osteosynthesis.	18%
5	Osteoplasty of the alveolar defect.	18%
5	Segmental alveolus dental osteotomies.	18%
5	Maxillary cyst or tumour with bone implant.	18%
6	Temporomaxilliar articulation arthroplasty.	30%
6	Functional dissection of neck.	30%
6	Parotidectomy.	30%
6	Malign facial cutis tumour. Big facial flaps.	30%
5	Osteoplasty of the alveolar defect.	18%
5	Segmental alveolus dental osteotomies.	18%
5	Maxillary cyst or tumour with bone implant.	18%
6	Temporomaxilliar articulation arthroplasty.	30%
6	Functional dissection of neck.	30%
6	Parotidectomy.	30%
6	Malign facial cutis tumour. Big facial flaps. Big facial flaps.	30%

#### Plastic and reparatory surgery

0	Revision small scars Excisions and sutures.	1%
0	Small ulcers. Excisions and sutures.	1%
1	Revision of scars of medium extension, in the body. Excisions and sutures.	2%
1	Revision small scars in face and neck. Excisions and sutures.	2%
3	Post mastectomy mammary reconstruction with volume extenders.	8%
3	Retractions of finger, armpit, skin fold scars etc. Local plasties.	8%
3	Revision of big scars in body. Local plasties.	8%
3	Scalp. Surgical treatment for free implant, torn piece, rotation.	8%
3	Superficial tumours. Treatment with local plasties.	8%
3	Medium ulcers. With complementary implant (except face and neck).	8%
4	Removal of volume extenders and fitting of mammary prosthesis.	12%

Group	Intervention	% compensation
4	Gynecomastia.	12%
4	Big face or neck wounds. Plasties or implants.	12%
4	Areola or nipple reconstruction.	12%
5	Gingantomastia. Unilateral plasty reducer.	18%
5	Acquired tumour injuries. Long distance treatment with flaps in two phases.	18%
5	Post mastectomy mammary reconstruction by myocutis flaps.	18%
5	Reconstruction with flaps or post removal tumour implants of eyelid, lip, nose, ear, etc.	18%
6	Plasties and complementary filler implants (dermis, periosteum, bone, cartilage).	30%
6	Nasal dermoide cyst. Reconstruction.	30%
6	Decubitus ulcer or large ulcer, with complementary implant.	30%
<b>Thoracic Surgery</b>		
4	Exeresis benign tumours of rib cage.	12%
4	Mediastinotomy.	12%
4	Pleurotomy with aspiration.	12%
5	Pleurectomy.	18%
5	Exploratory thoracotomy. Biopsy.	18%
6	Pleuropulmonar decortication.	30%
6	Atypical lung resections.	30%
6	Lung segmentectomies.	30%
7	Lung lobectomy.	50%
7	Mediastino tumours, thymus, etc.	50%
8	Pneumonectomy.	100%
<b>Neurosurgery</b>		
3	Neurolysis and selective neurectomies. Cicatricial neuromas.	8%
4	Diathermalcoagulation Rf intervertebral articulation.	12%
4	Disk hernia. Chemonucleolysis, nucleolysis, aspiration.	12%
4	Carpal tunnel syndrome.	12%
5	Epidural or subdural hematoma. Craniectomy.	18%
5	Disc hernia (except cervical). Microsurgery.	18%
5	Dorsal or lumbar laminectomy.	18%
6	LCR Derivations. Hydrocephalias.	30%
6	Rachuideo channel stenosis.	30%
6	Cervical disc hernia. Discectomy.	30%
6	Installation ventricular reservorio.	30%
6	Cervical laminectomy.	30%
6	Peripheral nerve microsurgery; tumours, implants, sutures, etc.	30%

Group	Intervention	% compensation
6	Rhizotomy trigeminus (Frazier).	30%
7	Cervical disc hernia (Cloward Scoville).	50%
7	Posterior rhizotomy, myelotomy.	50%
7	Cerebral tumours, gliomas, or metastasis of hemispheres.	50%
7	Rachimedular tumours.	50%
8	Post fossa surgery.	100%
8	Cranial orbit tumour surgery. Microsurgery of the orbit.	100%
8	Craneopharyngiomas.	100%
8	Meningiomas of any location.	100%
8	Microsurgery angle ponto-cerebellar, hypophysis, region selar, horsetail tumours.	100%
8	Intracranial or intraespinal neurinomas.	100%
8	Vertebral body resection.	100%
<b>Obstetrics and gynaecology</b>		
0	Vaginal, vulvares or perianales condylomas.	1%
0	Benign tumours of vulva.	1%
1	Vulva or Bartholino gland abscess. Debriding and drainage.	2%
1	Festered mastitis. Debriding and drainage.	2%
2	Bartholinitis. Marsupialisation.	5%
2	Conisation of cervix.	5%
2	Uterine curretage.	5%
2	Mammary nodule.	5%
2	Cervical, endometrial or vulvar polyp. Removal.	5%
2	Vaginal cyst, or juxta or paracervical. Removal.	5%
3	Colpotomy for Douglas' sack abscess.	8%
3	Stomatoplasty. Tracheolorrhaphy.	8%
3	Removal foreign body by hysteroscopy.	8%
3	Manual removal of placenta.	8%
3	Bartholino gland. Removal.	8%
3	Simple mastectomy, with or without axillary evacuation.	8%
3	Normal childbirth or dystocyco, single or multiple.	8%
3	Polipectomy by hysteroscopy.	8%
3	Ovarian puncture by laparoscopy.	8%
3	Cystectomy for laparoscopy.	8%
3	Cuneiform resection of ovaries.	8%
4	Anexectomy.	12%
4	Abdominal Caesarean operation.	12%
4	Total tear of perineum. Perineorrhaphy.	12%
4	Hysteropexia. Ligamentopexia.	12%
4	Vaginal plasty. Cystocele and/or rectocele.	12%

Group	Intervention	% compensation
4	Uterine prolapse. Partial conservative surgery (Manchester and Similar).	12%
4	Ovary cyst. Cystectomy.	12%
4	Ovary tumour. Ovariectomy.	12%
5	Anectomy by laparoscopy.	18%
5	Caesarean operation with hysterectomy.	18%
5	Endometrectomy by hysteroscopy.	18%
5	Pelvic Endometriosis by laparoscopy.	18%
5	Pelvic inflammatory illness (hydrosalpinx, tubaric abscess, etc.) by laparoscopy.	18%
5	Myomectomy by hysteroscopy.	18%
5	Myomectomy.	18%
5	Simple Vulvectomy.	18%
6	Vaginal aplasia or atresia. Corrective interventions. Artificial vagina.	30%
6	Total hysterectomy, or for via vaginal.	30%
6	Radical mastectomy with axillary evacuation.	30%
6	Myomectomy by laparoscopy.	30%
7	Radical surgery of uterus and adnexa (Wertheim; Schauta) with lymphadenectomy.	
7	Vaginal hysterectomy by laparoscopy.	50%
7	Radical vulvectomy by lymphadenectomy.	50%

### Ophthalmology

0	Abscess or cyst in brows or lids. Drainage.	1%
0	Foreign body in conjunctive, cornea or sclerotic. Removal.	1%
0	Dacryolitos. Removal.	1%
0	Corneal ulcer. Cauterisation and curettage.	1%
1	Chalazion. Excision.	2%
1	Structurotomy simple tubes or lachrymal points.	2%
1	Paracentesis corneal. Socket puncture.	2%
2	Pannus. Angioma conjunctival. Excision. Peritomy.	5%
2	Pterygion or pinguecula. Removal.	5%
2	Resection dermoid cyst brow. Resection.	5%
2	Conjunctival coating.	5%
2	Tear duct. Removal (Dacryocystectomy).	5%
2	Wounded corneal or parpebral sutures.	5%
2	Treatment corneal tattoo.	5%
2	Conjunctive tumours. Removal with plasty.	5%
2	Xantelasma. Removal without plasty.	5%
3	Foreign body in eye socket or intraorbital.	8%
3	Ectropion or entropion. Local plasties.	8%
3	Peripheral iridectomy. Surgical or by laser.	8%
3	Iridectomía periférica. Quirúrgica o por láser.	8%

Group	Intervention	% compensation
3	Palpebral ptosis.	8%
3	Lid tumour. Removal with local plasty.	8%
3	Iris tumours or cysts. Removal or photocoagulation.	8%
3	Xantelasma. Local plasty.	8%
4	Cataracts. Removal crystalline lens.	12%
4	Dachryocystorhinostomy.	12%
4	Discision or crystalline dislocation.	12%
4	Strabismus.	12%
4	Iridocapsulotomy. Membranulectomy.	12%
4	Intraocular lens. Reimplanting or repositioning.	12%
4	Bilateral Ptosis palpebral.	12%
4	Eyelid reconstruction due to tumours or traumatism, with complementary implant.	12%
4	Retina tumours.	12%
5	Cataracts. Extracapsular removal. Facoemulsor. Cataract by microsurgery.	18%
5	Retina detachment. Complete treatment.	18%
5	Ectropion or entropion with complementary implant.	18%
5	Microsurgery for myopia. Radial keratotomy.	18%
5	Microsurgery for glaucoma. Trabeculectomy.	18%
6	Retina detachment. Macular hole.	30%
6	Orbital or of linking structures tumours with conservation of ocular globe.	30%
6	Vitrectomy.	30%
7	Retina detachment. Treatment with laser and vitrectomy.	50%
8	Keratoprosthesis and/or keratoplasty.	100%
8	Transplant of cornea.	100%
<b>Otorhinolaryngology</b>		
0	External auditory canal chamber or retroauricular abscess.	1%
0	Cauterisation of nasal or turbinate bone.	1%
0	Simple Myringotomy.	1%
0	Nasal Synechia.	1%
1	Nasal wall abscess.	2%
1	Adenoidectomy.	2%
1	Surgery of the turbinate bones.	2%
1	Auditory tract papilloma or polyp. Removal.	2%
1	Bleeding polyp of the partition, or antrocoanal. Removal.	2%
2	Tonsillectomy.	5%
2	Foreign body in nasal fossa or wall.	5%
2	Debriding auditory chamber for pericondritis or lymphoedema.	5%
2	Larynx abscess. Excision and drainage.	5%
2	Myringotomy and fitting of drainage tubes.	5%

Group	Intervention	% compensation
2	Cysts and benign tumours of the auditory chamber.	5%
2	Auditory canal external benign tumours.	5%
2	Simple uvulectomy.	5%
3	Epiglottis abscess. Drainage. Microlaryngoscopy.	8%
3	Foreign body in sinus.	8%
3	External auditory canal osteoma.	8%
3	Nasal Poliposis.	8%
3	Maxillary sinusitis or unilateral, frontal and esfenoidal maxilloetmoidal. Radical surgical treatment.	8%
4	Unilateral Antrotomy.	12%
4	Audiosurgery adhesive porotitis. Tympanoplasty.	12%
4	Unilateral nasosinusal endoscopic surgery.	12%
4	Foreign body in bronchi before tracheotomy.	12%
4	Mastoidectomy.	12%
4	Miringoplasty by transmeatal approach.	12%
4	Maxillary sinusitis or bilateral, frontal and esfenoidal maxilloetmoidal. Radical surgical treatment.	12%
4	Tumour of tonsils and adjacent regions. Removal.	12%
4	Uvulo palato pharyngoplastia.	12%
5	Bilateral Anthrotomy.	18%
5	Bilateral nasosinusal endoscopic surgery.	18%
5	Cordectomy via endoscopic. Microsurgery.	18%
5	Stapedectomy.	18%
5	Removal of cysts or formations in vocal chord or epiglottis. Microlaryngoscopy.	18%
5	Internal maxillary arterial ligature, transmaxilar.	18%
5	Laryngeal microsurgery, papilloma, polyp, nodule, cyst and estenosis.	18%
5	Miringoplasty with retroauricular approach.	18%
5	Tympanoesclerosis. Healing time.	18%
6	Ranke edema decortisation. Microlaryngoscopy.	30%
6	Epiglotidotomy or epigotidectomy by microlaryngoscopy.	30%
6	External etmoidectomy. Unilateral.	30%
6	Total labyrinthectomy.	30%
6	Laringuectomy.	30%
6	Osicular eardrum reconstruction.	30%
6	Secondary septoplasty.	30%
6	Tympanoesclerosis. Reconstruction time.	30%
6	Retroauricular or transmeatal tympanoplastia.	30%
7	Larynguectomy. Any type with radical or functional dissection of the neck.	50%
7	Surgical treatment of the sinus with osteoplasties.	50%
7	Malign tumours rhinosinuales with evacuation.	50%

Group	Intervention	% compensation
<b>Traumatology and Orthopaedics</b>		
0	Superficial or subcutaneous foreign bodies. Removal.	1%
0	Hematomas subungueales. Drainage.	1%
0	Small wounds or burns.	1%
0	Onychogryphosis. Surgical treatment for removal.	1%
0	Whitlows. Debriding.	1%
0	Ingrowing fingernail.	1%
1	Superficial foreign bodies in face or neck. Removal.	2%
1	Simple nose bone fractures. Correction.	2%
1	Scalp cleaning and suture.	2%
1	Inferior maxillary dislocation. Bloodless reduction.	2%
2	Finger amputation separation, debriding.	5%
2	Finger capsulectomy.	5%
2	Finger in spring, hammer, claw, swan neck, etc.	5%
2	Exostosis. Removal.	5%
2	Diffuse phlegmon in extremities.	5%
2	Hand phlegmon.	5%
2	Phlegmon tendon sheaths.	5%
2	Sesamoid fractures.	5%
2	Penetrating articulation wound.	5%
2	Major wounds or muscular lacerations. Sutures.	5%
2	Hygroma, bursitis, glangion or synovial cyst. Removal.	5%
2	Shoulder, elbow, knee, etc. Orthopaedic mobilisation under anaesthetic.	5%
2	Osteomyelitis. Focus cleaning.	5%
2	Equine foot, talus, clubfoot, cavus, flat, etc. Corrective plaster.	5%
2	Medium extension burn (5% to 10%). Cure and cleaning.	5%
2	Orthopaedic reduction and Colles fracture immobilisation.	5%
2	Tenosinovitis estenose.	5%
3	Arthrodesis fingers.	8%
3	Deep foreign body. Surgical removal.	8%
3	Ankle, ligament or tarsus tear.	8%
3	Epicondilitis, Epitrocleitis and Estiloiditis.	8%
3	Calcaneal spur, Morton neuroma. Removal.	8%
3	Removal of osteosynthesis material (major intervention).	8%
3	Fasciotomies.	8%
3	Muscular fibrosis in gluteal, quadriceps, etc.	8%
3	Fracture of bones of the carpus or tarsus.	8%
3	Fractures of metacarpal, metatarsian or displaced phalanges.	8%

Group	Intervention	% compensation
3	Fractures scapula, collarbone, displaced radial head.	8%
3	Hallux valgus, varus, rigidus, etc. unilateral.	8%
3	Laminate or epidermic graft.	8%
3	Articular or periarticular injuries without fracture.	8%
3	Peroneos dislocation. Surgical technique.	8%
3	Metacarpophalangeal, interphalangeal, or metatarsophalangeal dislocation.	8%
3	Osteochondromas.	8%
3	Hand or foot osteotomy without osteosynthesis.	8%
3	Small burns (up to 5%). Surgical treatment with complementary graft.	8%
3	Costal resection.	8%
3	Supraspinous tendon or rotators cuff tear.	8%
3	Muscular tear.	8%
3	Simple sequestrectomy.	8%
3	Wrist, ankle or finger synovectomy.	8%
3	Tenolysis, tenosynovitis, tenotomies, tenodesis and tenorrhaphy (except flexors).	8%
3	Tumour of deep soft parts. Removal.	8%
4	Acromioplasty by arthroscopy.	12%
4	Sacral agenesis.	12%
4	Lengthening of tendons.	12%
4	Subastragalar arthrodesis, tibioperoneal astragalin.	12%
4	Arthroplasty of the first metacarpal base.	12%
4	Metacarpophalangeal and interphalangeal arthroplasty.	12%
4	Shoulder, elbow, wrist arthrotomy. Curettage, modelling, shaving.	12%
4	Exploratory arthrotomy or removal of foreign body. (shoulder, elbow, wrist, hip, knee, ankle).	12%
4	Foreign or free articular body. Removal by arthroscopy.	12%
4	Epiphysidesis.	12%
4	Hip and knee flexors.	12%
4	Astragalus fracture with displacement.	12%
4	Fibula head fracture.	12%
4	Radial head fracture with displacement. Osteosynthesis or prosthesis.	12%
4	Calcaneous fracture.	12%
4	Humerus neck fracture.	12%
4	Cubital or radial diaphysis fractures with displacement.	12%
4	Tibial spine fracture.	12%
4	Maleolus fracture.	12%
4	Scaphoid or semilunar fracture or pseudoarthrosis.	12%
4	Olecranon or apophysis coronoides fracture.	12%



Group	Intervention	% compensation
4	Tibial tuberosity or plateau fracture.	12%
4	Kneecap fracture.	12%
4	Fracture, tuberosity or epiphysis upper end humerus.	12%
4	Fracture lower limb displaced inferior radius (Colles, Smith).	12%
4	Astragalus fracture-dislocation.	12%
4	1st metacarpal base fracture-dislocation (Bennet).	12%
4	Torn ganglion. Removal.	12%
4	Rotulian retinaculum release.	12%
4	Nerve release by arthroscopy.	12%
4	Achromio clavicular, sternum clavicular, elbow dislocation.	12%
4	Wrist semi-tarsus, metatarsal tarsus dislocation.	12%
4	Kneecap relapsing dislocation.	12%
4	Tibio-peroneal-tarsus dislocation.	12%
4	Meniscectomy.	12%
4	Hand or foot osteotomy with osteosynthesis.	12%
4	Humerus and forearm osteotomies.	12%
4	Patelectomy.	12%
4	Humeral scapula periarthritis.	12%
4	Synovial plication by arthroscopy.	12%
4	Collarbone, carpus, tarsus, metacarpus, metatarsus pseudoarthrosis.	12%
4	Burns (5% to 10%). Surgical treatment with complementary graft.	12%
4	Burns - widespread (over 10%). Cure and treatment.	12%
4	Bone cyst. Curettage and graft.	12%
4	Popliteal cyst.	12%
4	Cruciate knee ligaments reconstruction.	12%
4	Collateral knee ligaments reconstruction.	12%
4	Torn supra spine tendon or rotator cuff.,Treatment by arthroscopy.	12%
4	Carpal tunnel syndrome.	12%
4	Wrist synovectomy by arthroscopy.	12%
4	Shoulder or elbow synovectomies.	12%
4	Complex tendon sutures. Tenoplasties.	12%
4	Hand flexor tendon sutures.	12%
4	Achilles, quadriceps or pattelar tendon.	12%
5	Dupuytren illness.	18%
6	Vertebral arthrodesis by posterior pathway.	30%
7	Fracture and dislocation of cervical column.	50%
7	Smashed hand or foot. Reconstruction with or without transplant of fingers, toes.	50%

Group	Intervention	% compensation
<b>Urology</b>		
0	Calculus or foreign bodies in urethra. Removal.	1%
0	Glans and meatus papilloma. Electrocoagulation.	1%
1	Urethral meatotomy. Meatoplasty.	2%
2	Urinal abscess. Drainage.	5%
3	Transurethral electrocoagulation.	8%
3	Hydrocele, orchidectomy, orchidopexy or varicocele. Unilateral.	8%
3	Cord cyst. Removal.	8%
3	Vesical lithomy or cystostomy.	8%
3	Spermatic cord twist.	8%
4	Lithotripsy. Gallstones, Foreign bodies. Removal by cystoscopy.	12%
4	Perirenal Abscess. Debriding and drainage.	12%
4	Cystorraphy.	12%
4	Cryptorchidism. Abdominal testicular ectopy.	12%
4	Hydrocele with congenital hernia.	12%
4	Hydrocele, orchidectomy, orchidopexy, or varicocele. Bilateral.	12%
4	Urinary incontinence. Via vaginal operations.	12%
4	Exploratory lumbotomy. Biopsy.	12%
4	Nephrostomy.	12%
4	Transurethral vesical resection tumour.	12%
5	Urethral stones. Endoscopic removal.	18%
5	Partial cystectomy.	18%
5	Total nephrectomy.	18%
5	Ureterolitotomy.	18%
6	Vesical diverticula.	30%
6	Nephrotomy. Nephrolitotomy.	30%
6	Pyeloplasty.	30%
6	Transurethral resection of urethral neoformation.	30%
6	Unilateral ureterocystoneostomy.	30%
6	Ureteropieloplasties. Ureteropyelostomy.	30%
6	Uretroplasty. Complete treatment.	30%
7	Radical enlarged nephrectomy. Lymphadenectomy.	50%
7	Total nephroureterectomy.	50%
7	Bilateral Ureterocystostomy.	50%
8	Radical cystectomy plus ureteroileostomy.	100%

# DKV Health and Well-being Club

The contracting of this insurance provides the insured person access to the additional services, different to the coverage of the insurance policy, described below. The insured persons can access medical guidance services over the telephone, a second opinion for serious illnesses, and additional services aimed around promoting health and well-being with special rates, or the prior acquisition of a voucher with economically advantageous conditions, through a network of approved professionals and medical services called the 'DKV Health and Well-being Club'. For more information on the additional services and how to access them, consult the medical directories and providers of the DKV Health and Well-being Club on the website. [www.dkvclubdesalud.com](http://www.dkvclubdesalud.com), calling 902 499 150 or at any DKV Seguros branch.

The policyholder and/or insured person hereby declare that they are aware of and accept the General Conditions applicable to all the coverage, for the effects contained in Article 3 of the Insurance Contract Act 50/80.

The policyholder

The insured person

By DKV Seguros y Reaseguros, S.A.E.  
Dr. JOSEP SANTACREU  
The CEO

A handwritten signature in blue ink, consisting of a horizontal line that loops upwards and then downwards, ending in a vertical stroke.

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