



Plusmedic

What's Plusmedic plan?

Plusmedic is a health plan that offers a high quality comprehensive medical cover within a large network of doctors, hospitals and services, including medical services, specialists, diagnostic tests, and the best hospitals.

Family discounts: you will get a premium discount when the third member is included on your policy.

How does it work?

You can use any doctor or hospital within the network and you are provided with a health card to obtain this benefit. This card identifies you as a policy's member, so you do not need a coupon book or carry out administrative processing for the medical authorizations. The premium you pay is based on the insured person's age; as a result you get a reduction on the total family premium.

How can I pay?

- Monthly.
- Quarterly: 2% discount.
- Biannually: 3% discount.
- Annually: 4% discount.

What is covered?

Visits

We pay in full general medicine, pediatrics, specialists, nursing and visits at home (this benefit is subject to the patient's health condition and the existence of specialists within your place).

Diagnostic tests

Paid in full tests (clinical, biochemical, cytology...) radiology, Doppler test, scans, etc.

6 month waiting period for digital arteriography, ergometry, vascular hemodynamics, holter, bone densitometry, CAT scan, nuclear medicine, magnetic resonance imaging, pre-birth diagnosis and positron emission tomography (PET).

We pay in full radio contrast agents.

Special treatments:

Paid in full aerosol – ventilation therapy, oxygen therapy, transfusions, etc.

6 month waiting period for ophthalmic laser therapy, nucleosome percutaneous, oncological radio therapy, electro radio therapy, dialysis and artificial kidney and renal lithotripsy.

Out-patient chemotherapy:

12 month waiting period for out-patient chemotherapy treatment.

Rehab

Up to 45 sessions per person per policy year.

Emergency services

Paid in full if you use a hospital within our network.

Gynecological check up

We pay in full an annual checkup.

Birth control

Paid in full anovulatory treatment control. IUD insertion and control (the insured person has to pay the IUD device)

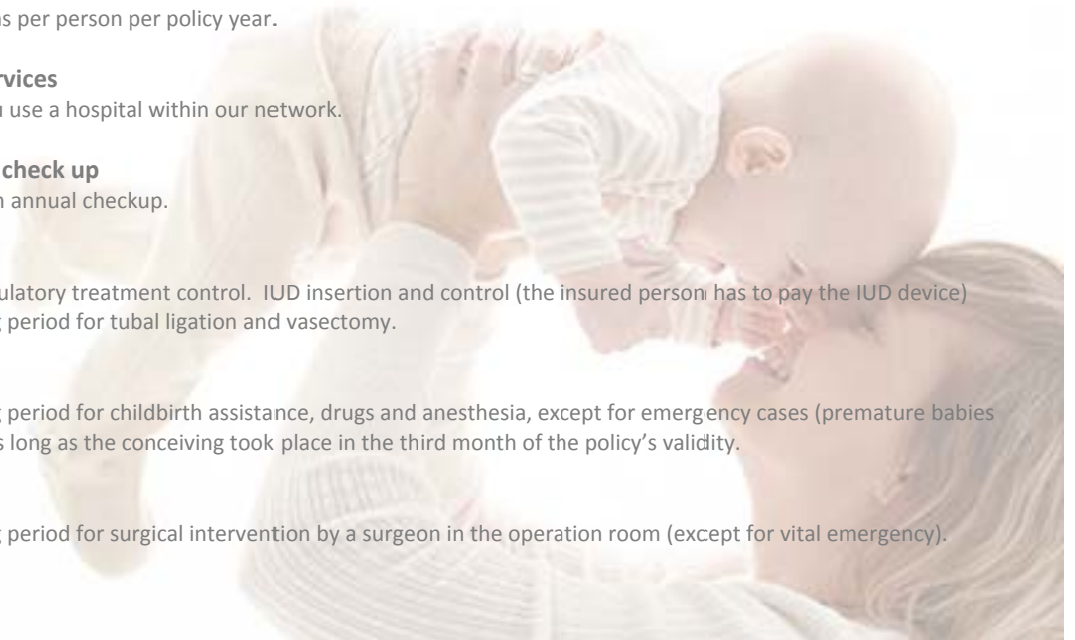
6 month waiting period for tubal ligation and vasectomy.

Childbirth

8 month waiting period for childbirth assistance, drugs and anesthesia, except for emergency cases (premature babies and dystocia), as long as the conceiving took place in the third month of the policy's validity.

Surgery

6 month waiting period for surgical intervention by a surgeon in the operation room (except for vital emergency).





Hospitalization

6 month waiting period for individual room with companion bed (except for intensive care unit and psychiatric hospitalization). We pay in full hospitalization expenses, operating room, anesthesia, drugs, treatment and patient's meals. No limits, except for psychiatric hospitalization which is limited to 40 days per policy year.

Post hospital treatment

If you have been in hospital for surgery for a period of seven days or longer, you can have free access to these services:

- 24 hour telephone health assistance service for a month.
- 10 hour home assistance.

6 month waiting period.

Prostheses

Subject to 12 month waiting period we pay in full cardiac valves, pacemaker, artificial hip joint, vascular by-pass prostheses, intraocular lens prostheses, mammary prostheses, internal trauma prostheses.

Annual check up

Paid in full an annual checkup.

Policy payment protection

We will pay your policy premium for a period of six months if you are unemployed or in a temporary inability to work situation.

Mother cells

Cord blood stem cells conservation for a period of 25 years at special rates.

The waiting periods can be cancelled in case of a sudden vital emergency diagnosed once the insured person has been discharged, or for new contracts from other companies. Except for childbirth (8 months) and out-patient chemotherapy (12 months).

Benefits

- A second medical opinion.
- 24 hour 365 days year telephone health consultation.
- Adopted children will enjoy the same benefits as new born babies.
- Cornea transplant.
- Growth factors (a free annual visit).

Travel assistance

We cover medical and pharmaceutical expenses up to a maximum of 12.000 euros.

Additional benefits (within the company's network of doctors and facilities)

You will have access, at special rates, to qualified specialists and / or additional treatments that complement the conventional medical and sanitary services: psychology¹, stomatology¹, podiatry¹, refractive surgery, acupuncture², homeopathy², dietetics, naturist medicine, speech therapy, optician, audiology, assisted reproduction, post childbirth recovery and preventive medicine.

1. Specialists' services according to our fee schedule.

2. The plan covers your first visit.

Who is it for?

Plusmedic plan is for people who live in Spain and are aged between:

Individual contracts: from 0 up to age 64:

Family contracts:

- policy holder: aged minimum 18
- policy membership between 0 and up to age 74³

3. The membership average age cannot be over 64.