Rider.
Dental with Deductible

Definitions

For the purposes of the present Dental with Deductible contract, the following definitions shall apply:

- **Network of Dental Providers Prearranged by Cigna Healthcare. Group of specialists, medical professionals, qualified odontologists, because of a professional degree or professional license, and healthcare establishments prearranged by Cigna Healthcare in Spain**, as listed on www.cignasalud.es, active at the time servi ce is delivered.
- **Deductible.** Fixed amount or a percentage of the dental expenses established in the Policy and paid by the Insured to the dental provider, for each dental service provided or intervention carried out.
- **Stomatologist.** Person who has a PhD, undergraduate degree or master's degree in medicine, who is legally qualified and licensed, and is a Specialist in the study of the mouth and the treatment of its ailments.
- **Odontologist.** Specialist in the study of teeth and the treatment of their ailments, who is legally qualified and licensed.

Article I. Purpose

In no case shall Cigna Healthcare reimburse fees charged by the professionals and ther services included in the Network of Dental Providers Prearranged by Cigna Healthcare that are paid directly by the Member, (or] Fees and/or other acts deriving from any dental care delivered by Professionals and Clinics not included in said Network.

In no case shall Cigna Healthcare grant cash compensation in lieu of the coverage purchased and provided under the prearranged dental providers network of Cigna Healthcare.

Coverage under the Policy is valid and provided solely in Spain through the Network ofDental Providers Prearranged by Cigna Healthcare, with the exception of coverage establíshing somethíng else defined in subsection 2.2. below [sic].

Article 2. Insurance cover

The coverage referred to in this insurance will be provided while this policy is in force in the manner established in the following subsections:

2.I. Dental services

The dental services covered by this insurance in Spain are those listed in the document entitled Pees Dental Providers Network of Cigna Healthcare. The Member assumes the personal and direct payment to the Clinic of the Deductibles indicated in the aforementioned document entitled Pees - Dental Providers Network of Cigna Healthcare corresponding to each of the dental services listed in the aforesaid document. The Deductibles included in said fees correspond to the Autonomous Community where this insurance has been purchased and those others that appear in the document. Members may at any time access the document entitled Pees - Dental Providers Network of Cigna Healthcare corresponding to any other area of Spain on www.cigna.es.

The dental services covered by this insurance in Spain will be rendered by a provider included in the Network ofDental Providers Prearranged by Cigna Healthcare, although the Insurer has the power to deregister professionals and/or entities for the provision of dental treatments from its network of recommended dentists whenever this is considered appropriate. In particular, x-rays must be prescribed by a specialist included in the Network of Dental Providers Prearranged by Cigna Healthcare. Otherwise, the prearranged clinics will not be obliged to conform to the Pees - Dental Providers Network of Cigna Healthcare (Deductibles).

Surgical acts that are specific to maxillofacial surgery may only be performed by a maxillofacial surgeon, and **the related hospital and anesthesia expenses are excluded** in ali cases.

2.2. Emergency dental care

With the conditions and limitations established in this subsection 2.2 [sic] and in the rest ofthese General Terms and Conditions, this insurance covers expenses for dental care received by the Member [for the] temporary alleviation of acute pain or bleeding or acute infections (without

constituting a definitive cure, the coverage of which, where appropriate, is govemed by the provisions of subsection 2.I. above), providing that immediate assistance is necessary. Once the transitional situation requiring the present coverage has passed, the Member will no longer be [covered] by the same, and curative treatment will be covered under the terms and conditions established in subsection 2.2. of these General Terms and Conditions.

The present coverage is provided **24 hours a day, every day of the year.** The followíng must, however, be borne in mind:

a. The present coverage wiU necessarily be provided by a provider included in the Network of Dental Providers Prearranged by Cigna Healthcare (during their normal business hours) or at permanent assistance centers where these exist, in accordance with the information given to the Member and the permanent customer care telephone number provided. fn such scenarios, the Member need not bear any expense for this coverage, which will be paid directly by Cigna Healthcare. Under no circumstances will expenses paid by the Member be reimbursed.

b. When emergency dental assistance is needed and a call to the [permanent] customer care telephone number provided confirms that there are no clinics or dentists of the Network of Dental Providers Prearranged by Cigna Healthcare or permanent assistance centers ofthe kind referred to in the preceding subsection where the Member is located, or when, despite their existence, they are not open when the situation giving rise to the present coverage occurs, both within and outside of Spain, Cigna Healthcare will reimburse 50% of the bills paid by the Member, **up to a maximum limit for reimbursement of thirty euros (€30) per bill**, and never more than one case within a period of three consecutive months. Any expense accruing due to procedures described in this subsection 2.2. [sic] in excess of the economic or frequency limits indicated will not be reimbursed to the Member.

   The present coverage excludes fillings, root canal treatments, crowns and any other definitive treatment or procedure, ali of which must be provided in ali cases by professionals included in the Network of Dental Providers Prearranged by Cigna Healthcare in accordance with subsection 2.I above.

Article 3. Waiting periods and pre-existing conditions

a. No waiting periods are established in this Policy and its coverage will, therefore, take effect as soon as the first Premium has been paid.

b. This Policy guarantees coverage of dental condítions existing prior to the moment insurance is purchased.

Article 4. Exclusions

The following are excluded from coverage under the insurance:

a) Pharmacological products and products intended for dental prophylaxis, such as toothbrushes, toothpaste, dental floss, and any other items with similar characteristics.

b) Treatments or procedures not expressly contemplated in the Terms and Conditions of the Policy.

c) Illnesses and accidents occurring due to war, whether civil or international, operations of a similar nature, political or social events, acts of terrorism, earthquakes, volcanic eruptions, flooding and other extraordinary seismic or meteorological phenomena.

d) Nuclear risks.