

For the provision of the services inherent to the guarantees provided by this insurance, the Insured must request its intervention at the time of the event giving rise to the claim at the telephone 91 5724343 (Phone lines open 24 hours)

TRAVEL ASSISTANCE INSURANCE Nº 173296 FOR GAZTE TXARTELA CARDHOLDERS

EXTRACT 1-1-2024

GUARANTEES

In accordance with the conditions agreed with con IRIS GLOBAL SOLUCIONES DE PROTECCIÓN SEGUROS Y REASEGUROS S.A.U, the persons described under the title INSURED will be entitled to the following services:

DATE OF ENTRY INTO FORCE AND EXPIRY OF THE POLICY: From 01/01/2024 (zero hours) to 01/12/2024 (zero hours).

POLICYHOLDER:

EUSKO JAURLARITZA — GOBIERNO VASCO
C. DONOSTIA-SAN SEBASTIAN, SN KALEA
01010 — VITORIA GASTEIZ
(ÁLAVA) CIF: S-4833001-C

PRIOR PROVISIONS

For the purposes of this policy, the following terms will have the meanings set out below:

INSURER.- IRIS GLOBAL SOLUCIONES DE PROTECCIÓN SEGUROS Y REASEGUROS, S.A., who will cover the risks the object of this contract and guarantees the provision of the services described herein.

INSURED PERSONS.- Insured Persons shall be all individuals who are holders of the GAZTE TXARTELA CARD (NON-FINANCIAL YOUTH CARD) issued by the Basque government.

SCOPE OF THE INSURANCE.- This insurance is valid in Spain and the rest of the world outside a radius of 30km from the usual place of residence of the Insured.

THERE ARE NO GUARANTEED STAYS LONGER THAN 92 CONSECUTIVE DAYS

CARDS INSURED:

NON-FINANCIAL GAZTE TXARTELA CARDS, issued by the Basque government.

COVER

Risk to persons (in the event of death, an accident or illness during travel undertaken by the **policyholder**):

A. MEDICAL ASSISTANCE AND REPATRIATION:

A.1. REPATRIATION OR MEDICAL TRANSPORTATION OF INJURED OR ILL PERSONS.

Depending on the urgency or seriousness of the case, included sexual aggression, sexual abuse and gender violence when needed, the INSURER shall arrange and pay for the transport of the INSURED, including under medical supervision if required, to a hospital in Spain near to their home, or to their usual place of residence if they do not require hospitalisation. If the INSURED cannot be admitted near their address, the INSURER shall be responsible, at the appropriate time, for the subsequent transportation to the address of the INSURED:

- Means of transport:
- Special medical aircraft for countries in Europe or those that border onto the Mediterranean Sea.
- Regular airlines, trains or boats.
- Ambulance.

In the event of benign diseases or mild injuries which do not result in repatriation, transportation shall be carried out in an ambulance or any other means, to the place where the appropriate assistance can be provided.

Under no circumstances shall the INSURER replace the emergency services or assume the cost of these services.

In any event, the decision as to whether or not to provide transport is made by the medical practitioner appointed by the INSURER in each case, subject to consultation with the INSURER, according to the medical practitioner treating the INSURED and, where appropriate, their family.

A.2. REPATRIATION OR TRANSFER OF THE DECEASED INSURED.

In the event of the DEATH of the INSURED during travel, the INSURER will arrange and pay for all of formalities and provide all of the necessary and compulsory resources, complying with all legal and administrative conditions and paying all costs associated with the transport of the DECEASED to their usual place of residence, as well as the cost of embalming and the zinc transport coffin.

A.3. REPATRIATION OR TRANSPORT OF COMPANIONS.

When the Insured has been repatriated for any of the reasons described in the points above (1 and 2) and this prevents their companions from continuing with their travel by the initially foreseen means, the Insurer shall arrange and pay for the cost of their return to their usual place of residence.

A.4. REPATRIATION OR TRANSPORT OF CHILDREN.

In the case above, if the companions of the Insured are children under the age of 18 (or people who, due to their age or poor health, require special attention) of the Insured and do not have a relative or person of trust to accompany them on the return trip, the Insurer, at the request of the family, will provide them with a person to travel with them to the place of burial or their place of residence in Spain.

With regards to travel expenses for children, the Insurer will only pay amounts in excess of the expenses normally provided for by these children (train and plane fares, maritime crossings, etc.).

With regards to travel expenses, the INSURER will only pay amounts in excess of the expenses normally provided for by the INSURED (train and plane fares, maritime crossings, etc.).

A.5. TRAVEL EXPENSES OF THE COMPANION OF MORTAL REMAINS

The Insurer shall provide a round trip train (first class) or plane (tourist class) ticket, or of the most suitable public and collective means of transport, to the person appointed by the family (who must reside in the country of residence of the Insured Person) to accompany the mortal remains.

A.6. RETURN OF THE COMPANIONS OF THE DECEASED

If the deceased Insured Person was traveling with his / her partner or with first degree relatives and those of his / her partner or of both, the Insurer shall organize and take care of the return trip by train (first class) or plane (tourist class) or by the most suitable public and collective means of transport, to the place of family domicile, provided they could not continue the trip in the means of transport they were using.

A.7. FAMILY SUPPORT

If, by application of the coverage "Travel expenses of a companion" or "Companion of mortal remains", the partner of the Insured Person is traveling alongside, and for that reason minor children were to be left alone at the family domicile, the Insurer shall take care of paying a person to take care of them up to the limit indicated in the Particular Conditions.

A.8. PAYMENT OR REIMBURSEMENT OF MEDICAL, SURGICAL, PHARMACEUTICAL AND HOSPITALISATION EXPENSES.

Under this policy, the INSURER shall meet the expenses incurred by the INSURED as a result of an accident or unforeseeable illness that takes place during the trip and within the policy up to a limit of €600 (within Spain) or €5.000 (outside Spain). Also included sexual aggression, sexual abuse and gender violence when needed.

Reimbursements of the expenses referred to herein will in any event be in addition to other amounts to which the INSURED is entitled, either for social security services or from any other system of which they are a member.

Consequently, the INSURED promises to adopt the necessary steps to recover the expenses of these bodies and to reimburse the INSURER for any amount advanced by the latter.

A.9. DENTAL EXPENSES.

Cover for emergency dental expenses is capped at €80.

A.10. SECOND MEDICAL OPINION FOR DISPLACED INSURED PERSONS

If, during the long-term travel abroad, the Insured Person is diagnosed for the first time with a serious illness including those in the attached list (*), the latter may ask the Insurer for a second opinion on the diagnosis or medical treatment of the condition.

This Second Opinion may be carried out in person (consultation and testing up to the limit of coverage) or documentary (issuance of a report by a specialist consultant who shall study the information available and based on it will answer the questions of the Insured Person).

In order to make use of said second documentary opinion, the Insured Person shall send, at his responsibility, a copy of the medical reports, imaging scans, biopsies and / or other diagnostic tests that may be available.

In both cases, the consultants shall be designated by the Insurer from among specialists, healthcare centers, doctors or academic professionals in Spain or in the country of origin or residence of the Insured Person. In the case of a Second Medical Opinion in person, the diagnostic tests covered shall be those prescribed by the Consultant designated by the Insurer, within the limits of the coverage.

Throughout this process, the Insured Person shall be assisted and informed at all times by a health team directed by a doctor, who shall be responsible for managing the case.

The Second Opinion shall be requested from the Insurer within a maximum of three months from the first diagnosis.

The maximum limit of total expenses for this guarantee shall be 1.000 euros.

(*) LIST OF DISEASES

- Cardiovascular diseases with involvement of organs (myocardial infarction, coronary disease, advanced valvular diseases, severe chronic limb ischemia) or requiring invasive procedures for diagnosis or treatment such as coronary artery bypass surgery or interventions on valves or vessels.
- Cerebrovascular Diseases (Hemorrhage, Cerebral Infarction)
- Potentially progressive neurological, neurodegenerative and neurosurgical diseases (Multiple sclerosis, ALS)
- Parkinson.
- Alzheimer.
- Ophthalmologic conditions with risk of vision loss.
- Oncology and Onco-hematology (Cancer)
- Renal failure.
- AIDS.
- Autoimmune disorders.
- Organ transplantation (heart, lungs, liver, pancreas, kidney and bone marrow).
- Surgical interventions of the spine.
- High complexity surgical interventions (requiring the intervention of super-specialized surgeons) with hospital admission to treat diseases or severe trauma.

A.11. EXPENSES OF AN EXTENDED STAY IN A HOTEL.

If the condition of the ill, injured or victim of sexual aggression, sexual abuse or gender violence of the Insured Person prevents their repatriation according to the medical practitioner treating them and appointed by the Insurer, the Insurer will cover expenses resulting from the extension of their stay in a 3-star hotel or equivalent for up to 10 nights.

A.12. TRAVEL EXPENSES FOR A COMPANION IN THE EVENT OF THE HOSPITALISATION OF THE INSURED FOR MORE THAN 5 DAYS.

If the condition of the ill, injured or victim of sexual aggression, sexual abuse or gender violence of the Insured Person prevents their immediate repatriation, and if their hospitalisation where they are should last more than 5 days, the Insurer shall pay for one first-class rail ticket or one economy class airline ticket so that a family member of the Insured or the person nominate by them can be with them in hospital.

A.13. ACCOMMODATION FOR A COMPANION WHO HAS TRAVELLED OVERSEAS IN THE EVENT OF THE HOSPITALISATION OF THE INSURED FOR MORE THAN 5 DAYS.

If the Insured is hospitalised overseas as described above, the Insurer will also pay the cost of accommodation in a 3-star hotel or equivalent for up to 10 nights.

A.14. RETURN EXPENSES DUE TO HOSPITAL DISCHARGE

The Insurance provider shall be responsible for the return expenses of the Insured person who, as a result of a covered accident or illness, has been hospitalized and discharged and as a consequence, has lost the return ticket to the country of residence (tourist class) due to the impossibility of showing up on the corresponding means of transport on the date and time marked on the return ticket, up to the limit established in the Particular Conditions.

A.15. EARLY RETURN DUE TO THE DEATH OR HOSPITALISATION OF A RELATIVE IN SPAIN.

If during the covered travel period the spouse, first degree ancestor or descendant of the Insured were to be admitted to a hospital or deceased in Spain, the Insurer will cover all extraordinary costs incurred to bring forward the return trip to their usual place of residence.

A.16. EARLY RETURN DUE TO SERIOUS DAMAGE TO THE RESIDENCE OF THE INSURED PERSON OR BUSINESS PREMISES

The Insurer shall be responsible for any urgent travel expenses, by train (first class), airplane (tourist class) or by the public and collective means of transport that the Insurer considers more suitable, to the place of habitual residence of the Insured Person, due to the occurrence of a fire, explosion, flood or robbery event, in their habitual residence or their own professional or rented premises that made them uninhabitable, or with a serious risk of greater damage, that justifies in an essential and immediate manner, the presence of the Insured Person and the necessity of the trip, provided that he cannot carry out such travel using his own means of transport or the one hired to make the trip.

A.17. HOME CARE SERVICES

If, after having made use of the "Sanitary Transfer or Medical Repatriation" coverage, the Insured Person is admitted to a hospital, and immobilization at his/her habitual residence is prescribed, for six (6) or more days, the Insurer shall proceed, in coordination with the Insured Person, to set a care plan according to the real, immediate, necessary or more convenient needs of the Insured Person under said situation, such as: private tutors, home assistance, geriatric assistance, etc., with an economic limit per Insured Person and claim up to €500.

A.18. POST-MORTEM EXPENSES.

The Insurer will cover additional expenses required to prepare the corpse of the Insured, such as embalming and the mandatory coffin for transport in accordance with legal requirements, up to €601.

A.19. ADVANCE FOR LEGAL DEFENCE EXPENSES ABROAD.

When, as a result of an accident, victim of sexual aggression, sexual abuse or gender violence, the Insured person must hire legal defence, the Insurer will cover these costs up to limit of €700. This advance is dependent on legislation in the country where it is requested.

To guarantee the amount of the advance received, the Insurer reserves the right to demand, prior to the advance, that guaranteed via reliable means by a person or financial institution nominated by the Insured in Spain (in the form of a bank cheque, cash or acknowledgement of debt).

If the INSURER chooses an acknowledgement of debt, the INSURED must return the amount advanced by the INSURER within no more than 15 days after the end of their trip and, in any event, within 2 months after the advance was provided.

A.20. ADVANCE FOR BAIL BOND ABROAD.

If the Insured is required by authorities in the country to provide a bail bond as a result of an accident, the Insurer will advance the amount of said bond up to a limit of €4.000.

This advance is dependent on legislation in the country where it is requested.

To guarantee the amount of the advance received, the Insurer reserves the right to demand, prior to the advance, that guaranteed

via reliable means by a person or financial institution nominated by the Insured in Spain (in the form of a bank cheque, cash or acknowledgement of debt).

If the Insurer chooses an acknowledgement of debt, the Insured must return the amount advanced by the Insurer within no more than 15 days after the end of their trip and, in any event, within 2 months after the advance was provided.

If the INSURER chooses an acknowledgement of debt, the INSURED must return the amount advanced by the INSURER within no more than 10 days after the end of their trip and, in any event, within 2 months after the advance was provided.

A.21. ADVANCE FOR HOSPITAL BOND ABROAD.

When the Insured requires hospitalization as a result of an accident or serious illness, the Insurer provide in cash any bond that the hospital may require in order to admit the Insured.

This advance is dependent on legislation in the country where it is requested.

To guarantee the amount of the advance received, the INSURER reserves the right to demand, prior to the advance, that guaranteed via reliable means by a person or financial institution nominated by the INSURED in Spain (in the form of a bank cheque, cash or acknowledgement of debt).

If the INSURER chooses an acknowledgement of debt, the INSURED must return the amount advanced by the INSURER within no more than 15 days after the end of their trip and, in any event, within 2 months after the advance was provided.

A.22. DISPATCH OF MEDICINES.

The Insurer will locate and dispatch medicines that are of vital importance and which cannot be obtained in the country where the Insured has been hospitalized.

This dispatch is dependent on legislation in the country where it is requested.

However, the responsibility of the Insurer ends if management or the Council of Spanish Pharmacists reveal that the product required is not available in the Spanish market.

The cost of medicines and the dispatch of the same will be paid by the Insured.

A.23. MEDICAL VISIT AND INFORMATION.

When the Insured is outside their country of residence and requests medical assistance not provided for in this guarantee of assistance, the Insurer shall: Provide the Insured with the name of the most suitable hospital or medical practitioner.

Nominate a qualified medical practitioner to diagnose the condition of the patient and inform them and their family of this condition. Offer translation/interpreting services between the Insured and the medical practitioner.

Offer assistance so that the Insured can pay their medical bills. Responsibility for payment of these invoices lies exclusively with the Insured.

A.24. INTERPRETER DUE TO ACCIDENT OR ILLNESS.

If the intervention of an interpreter is required where the Insured is due to an accident overseas , serious illness, victim of sexual aggression, sexual abuse or gender violence , the Insurer promises to provide the services of an interpreter as a matter of urgency. The cost of these services will be paid by the Insured.

A.25. ADMINISTRATIVE FORMALITIES FOR HOSPITALISATION.

The Insurer shall be responsible for any administrative formalities necessary in order to formalise the admission of the Insured to a hospital when required due to a cause covered by the policy.

A.26. INFORMATION SERVICES FOR OVERSEAS TRAVEL

At the request of the Insured, the Insured will provide information in relation to:

Vaccinations and visa applications for foreign countries, as well as requirements specified in the latest edition of the T.I.M (Travel Information Manual), a joint publication by I.A.T.A member airlines.

The Insurer is not responsible for the accuracy of information contained in the T.I.M. or for changes made in said publication. The addresses and telephone numbers of Spanish embassies and consulates around the world.

A.27. TRANSMISSION OF URGENT MESSAGES.

The Insurer, at the request of the Insured, will transmit any urgent messages to their relatives when deemed necessary as a result of an event covered by this policy.

A.28. COUNTRY GUIDE

The Insurer makes available to the Insured Person updated information of countries of destination, through access to the website, which contains information on recommended vaccines and information on diseases in the area. In addition, recommendations on medical assistance at the country of destination, as well as addresses and emergency contact numbers are included. This information is completed with general advice including cultural aspects, embassies, currency, local festivities and weather.

B. LUGGAGE

B.1. SENDING OF BELONGINGS LEFT BEHIND AND/OR STOLEN IN THE COURSE OF A TRIP.

The Insurer will organise and pay for the cost of sending belongings left behind by the Insured in the place(s) visited by the Insured during their trip to the usual address of the Insured, up to a limit of €601.

This cover extends to belongings recovered after a theft during this trip.

B.2. SEARCHING FOR AND TRACING OF LUGGAGE LOST OR LEFT BEHIND.

If luggage is misplaced or left behind, the Insurer will provide assistance organising a search for the luggage lost or left behind.

C. CIVIL LIABILITY:

The Insurer shall pay all monetary compensation it is required to pay the Insured pursuant to articles 1,902 to 1,910 of the Civil Code and similar provisions contained in foreign legislation as a private individual as the party with civil liability for damage and harm involuntarily caused to third parties, animals or property. Cover for the above is capped at €60.000 per event. The above does not include professional civil liability, liability derived from the use of motor vehicles or liability resulting from the use or ownership of artefacts and weapons of any type.

GENERAL EXCLUSIONS ESTABLISHED IN THE COMPETITION SPECIFICATIONS AND WHICH MODIFY THE GENERAL CONDITIONS:

This policy does not cover:

- 1) Relapses in existing illnesses with risk of a sudden change for the worse, and which are known to the INSURED at the start of the trip.
- 2) Pathological conditions known to the INSURED and with a medical history, which could deteriorate in the event of travel.
- 3) Pregnancy. However, the policy does cover unforeseeable complications up to the sixth month of pregnancy.
- 4) In the case of acute dental problems, understood as those which, due to infection, pain or trauma, require emergency treatment, the expenses shall be limited, in any case, to a maximum of 70.00 €. **EXCLUSION ELIMINATED BY IMPROVEMENT.**
- 5) The rescue of people at sea, in mountains or in deserts.
- 6) Participation in high-risk sports, such as mountaineering, climbing, moto-cross, gliding, paragliding and similar sports.
- 7) Skiing accidents.
- 8) Expenses related to chronic illness and for prostheses of any type and thermal cures.
- 9) Any type of medical expenses of less than €9.00. **EXCLUSION ELIMINATED BY IMPROVEMENT.**
- 10) Suicide, self-harm and drug and alcohol intoxication.

- 11) Under no circumstances shall the INSURER replace the emergency services or assume the cost of these services.
- 12) Diseases of acquired immunodeficiency syndrome (AIDS) and all problems derived from alcoholism and drug addiction.
- 13) All problems derived from alcoholism and drug addiction.
- 14) Vaccinations and controls of previously-known diseases.
- 15) Thermal and therapeutic cures with UV rays.
- 16) Physiotherapy and kinesiotherapy.
- 17) Mental illnesses, psychoanalysis and psychotherapy.
- 18) Risks of war, civil war and hijacking.
- 19) Mutiny, riot, terrorism and sabotage.
- 20) The use of privately-owned aircraft not for public use, as well as the use of helicopters and light aircraft for fumigation, firefighting or rescue services.

Professional liability, liability derived from the use and circulation of motor vehicles, as well as liability derived from the use or ownership of artifacts and weapons of any type or nature are excluded.

THIS EXTRACT, WHICH MUST BE DELIVERED BY THE POLICYHOLDER TO THE INSUREDS, IS AN EXTRACT OF THE CONTRACTUAL CONDITIONS APPLICABLE TO COLLECTIVE POLICY NO. 173296 SIGNED BY EUSKO JAURLARITZA (THE BASQUE GOVERNMENT) WITH IRIS GLOBAL SOLUCIONES DE PROTECCIÓN SEGUROS Y REASEGUROS, S.A.U. IN VIEW THEREOF, IN THE EVENT OF ANY DOUBTS THAT ARISE IN THE INTERPRETATION OF THE SAME THE PROVISIONS OF THE SAME SHALL APPLY, WITH THIS DOCUMENT TO BE AVAILABLE TO THE INSUREDS AT THE USUAL DOMICILE OF THE ABOVEMENTIONED POLICYHOLDER. THE INSURED BENEFITS SHALL REMAIN IN FORCE AS LONG AS SAID POLICY NO. 173296 REMAINS IN FORCE AND NO AMENDMENTS ARE MADE THERETO, WITH THESE BENEFITS TO BE CANCELLED UPON THE TERMINATION OF SAID POLICY.