

Table of Benefits – HealthPlus Premium

Applicable to new registrations or renewals on/or after 1st July, 2018.

This Table of Benefits must be read in conjunction with your Hospital Plan Terms and Conditions and the directories of approved facilities. Facilities may change from time to time, so log on to Vhi.ie or phone us on (056) 444 4444 if you are planning treatment.

| | Benefit Provision | Benefit |
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| | Section 1 - Hospital charges | |
| A | Public 1 & 2 hospitals <ul style="list-style-type: none"> Day care, side room, semi-private & private accommodation | Full cover |
| B | Private hospitals and treatment centres | |
| | Private 1, 2 & 3 hospitals (other than for certain investigations & treatments referred to in Section 1c) <ul style="list-style-type: none"> Day care, side room, semi-private & private accommodation Radiotherapy (day care & out-patient) | Full cover Full cover |
| | Private 4 hospitals (other than for certain investigations & treatments referred to in Section 1c) <ul style="list-style-type: none"> Day care, side room & semi-private accommodation Private accommodation <ul style="list-style-type: none"> Mater Private Hospital, Dublin Blackrock Clinic Radiotherapy (day care & out-patient) | Full cover Semi-private rate, 100% technical charges 80% private rate, 100% technical charges Full cover |
| C | Certain investigations and treatments - herein referred to as Fixed Price Procedures (FPPs), (contact us for details) | |
| | Private 3 & 4 hospitals <ul style="list-style-type: none"> Day care & in-patient cardiac FPPs Level 1 Day care & in-patient non-cardiac FPPs Level 1 (other than Radiotherapy and Chemotherapy refer to Section 1B) In-patient cardiac FPPs Level 2 | Full cover Full cover Full cover |
| | Section 2 - Consultants' fees/GP procedures | |
| A | In-patient treatment, day-care/side room/out-patient & GP procedures <ul style="list-style-type: none"> Participating consultant/GP Non-participating consultant/GP | Full cover Standard benefit |

H Denotes benefit changes to this plan since the last renewal date. If you have moved to or purchased this plan for the first time, benefit differences with your old plan, if applicable, are not highlighted.

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| | Section 3 - Psychiatric cover (read in conjunction with Section 1) | |
| A | In-patient psychiatric cover | 180 days |
| B | Day care psychiatric treatment for approved day care programmes | Contact us for further details |
| C | In-patient treatment for alcoholism, drug or other substance abuse in any 5 year period | 91 days |
| | Section 4 - Maternity | |
| A | Normal confinement <ul style="list-style-type: none"> Public hospital benefit (up to 3 days) Caesarean delivery (as per hospital benefits listed) Home birth benefit | Full cover Refer Section 1 €3,400 |
| B | In-patient maternity consultant fees (per Schedule of Benefits for Professional Fees) | Agreed charges |
| | Section 5 - Cancer care and other benefits | |
| A | Genetic testing for cancer <ul style="list-style-type: none"> Initial consultation for genetic testing for cancer * Genetic test - for specified genetic mutations to be carried out in an approved clinic * Preventative (Prophylactic) treatment following on from the genetic test <p>* These benefits are available immediately for existing Vhi customers with no waiting periods. There is a 26 week new conditions waiting period for new joiners and a two year waiting period for transfers from another insurer</p> | 50% cover Full cover Covered up to the levels for hospital treatment listed in Section 1 |
| B | Mammograms in an approved mammogram centre in each 24 month period, covered in accordance with our rules (contact us for details) | Full cover |
| C | Cancer care support - one night's accommodation for each treatment | €100 per night |
| D | Manual lymph drainage following cancer treatment - 10 visits | €50 per visit |
| E | Clinical psychology counselling for oncology treatment (psycho oncology counselling) - 10 visits | Refer section 9 |
| F | Additional cancer support benefits <ul style="list-style-type: none"> Wig/ hairpiece, post-mastectomy bra, swimsuit, surgical prosthesis following cancer treatment No excess applies, but subject to the benefit maximum for medical and surgical appliances set out below | Full cover |
| G | Other benefits in Section 5 | |
| | Convalescent care - first 14 nights | €64 per night |

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| | Vhi Healthcare approved medical and surgical appliances - subject to an excess of €300 per member per year (contact us for details of eligible appliances) | €6,400 per member year |
| | Vhi Hospital@Home | Full cover |
| | Child home nursing - 14 days per calendar year | €100 per day |
| | Parent accompanying child - 14 days per calendar year, following a stay in excess of 3 days in hospital | €40 per day |
| | Vhi VisionCare <ul style="list-style-type: none"> Vhi VisionCare E-Screen (available through Vhi.ie/myvhi) Comprehensive eye exam carried out by a VSP eye-care professional in each 24 month period - subject to Vhi VisionCare E-Screen referral | Full cover Full cover |
| | Section 6 - Transport costs | |
| A | Transport costs (covered in accordance with our rules) | Agreed charges |
| | Section 7 - Cover outside Ireland | |
| A | Emergency treatment abroad | €100,000 |
| B | Elective treatment abroad (subject to prior approval) <ul style="list-style-type: none"> Surgical procedures available in Ireland (as per level of cover in Ireland) Treatment not available in Ireland | €100,000 €100,000 |
| | Section 8 | |
| A | In-patient MRI scans (covered in accordance with Section 1) | Agreed charges |
| B | Out-patient MRI scans <ul style="list-style-type: none"> Category 1 - approved MRI centres Category 2 - approved MRI centres, agreed MRI charges & consultant Radiologists fees (subject to an excess of €125 per scan) | Full cover Full cover |
| C | PET-CT scans (covered in accordance with our rules) | Agreed charges |
| D | CT Scans (covered in accordance with our rules) H | Full cover |
| | Section 9 – Out-patient medical expenses (benefits are per visit, per member, unless otherwise indicated) H | |
| A | General practitioner | €45 |
| B | Consultant consultation | €90 |
| C | Pathology - consultants' fees (per referral) | €90 |
| D | Radiology - consultants' fees for professional services (per procedure) | €90 |
| E | Pathology/Radiology or other diagnostic tests (refer to Section 8 for out-patient MRI benefits) - 50% of agreed charges in an approved out-patient centre. Contact us for details of eligible diagnostic tests and reimbursements | €1,000 per year |
| F | Physiotherapist | €45 |
| G | Pre- and post-natal care (combined visits) | €385 |

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| H | Acupuncturists, Chiropractors, Osteopaths, Physical therapists, Reflexologists - 12 combined visits | €40 |
| I | Chiropodists/Podiatrists, Dieticians, Occupational therapists, Speech therapists, Orthoptists, Clinical Psychology - 12 combined visits | €40 |
| J | Clinical psychology counselling for oncology treatment (psycho oncology counselling)* - 10 visits | €50 per visit |
| K | Accident & emergency cover - 1 visit | €100 |
| L | Out-patient mental health therapy - 12 visits in an approved out-patient mental health centre | €50 |
| M | Health screening - in each 24 month period, covered in accordance with our rules (contact us for details) * <ul style="list-style-type: none"> Heart check in a Vhi Medical Centre Cancer check in a Vhi Medical Centre Lifestage screening programme in a Vhi Medical Centre Dexa scans in an approved dexa scan centre | Full cover Full cover €450 per screen Full cover |
| N | Dental practitioner - 1 visit | €40 |
| O | Optical – eye tests and glasses/contact lenses - in each 24 month period (^Payment will be made directly to the provider if attending a VSP network provider, and will not be subject to the annual excess or the annual maximum) | €100^ |
| P | Practice nurse visit | €20 |
| Q | Cardiac Care Programme* <ul style="list-style-type: none"> Medfit cardiac care programme - in each 24 month period Urgent cardiac care benefit Medfit cardiac rehabilitation programme | €500 €500 per year €500 per year |
| R | Joint Care Programme* <ul style="list-style-type: none"> Joint Care Screening to assess your mobility levels carried out by a Physiotherapist employed by The Physio Company in each 24 month period, covered in accordance with our rules. To make a booking, contact The Physio Company at (01) 518 0011. Details available at Vhi.ie/members Joint Care Physiotherapy carried out by a Physiotherapist employed by The Physio Company subject to referral from Joint Care Screening - up to 3 visits | Full cover Full cover |
| S | Vhi Online Doctor – 12 visits (available through the Vhi App)* | Full cover |
| T | Vhi SwiftCare exclusive benefit to Vhi customers* <ul style="list-style-type: none"> Initial consultation (charge is €125 – you pay €25) Follow-up treatment package after this consultation for x-rays, tests & medical aids (maximum you will pay is €100 for this follow-up treatment) | €100 50% of total costs |
| | Vhi SwiftCare appointment services* <ul style="list-style-type: none"> Consultant consultation (orthopaedic, oral maxillofacial & sports medicine) Dental practitioner – 12 visits Physiotherapist – 12 visits | 75% €40 €45 |
| U | Vhi paediatric clinic* | |

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| <ul style="list-style-type: none">• Initial Consultant consultation• Follow up paediatric treatment and services after this consultation including lactation consultant, dietician, ultrasound, blood tests and x-ray | 75% 50% of total costs |
| Annual excess - per member, per year | €100 |
| Annual maximum - per member, per year | €4,000 |
| * These benefits are not subject to the annual excess or annual maximum | |

Vhi Healthcare DAC trading as Vhi Healthcare is regulated by the Central Bank of Ireland. Vhi Healthcare is tied to Vhi Insurance DAC for health insurance in Ireland which is underwritten by Vhi Insurance DAC.

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