Select More with Emergency Access pack

Table of Cover effective from June 12th 2018

This table of cover must be read in conjunction with your member certificate and Health Plans membership handbook effective from June 2018. The hospitals and treatment centres covered on this plan are set out in List 1 in Part 12 of your Health Plans membership handbook.

| In Patient Benefits | | |
|------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|--|
| Hospital Cover | | |
| Consultant fees | Covered | |
| Inpatient Scans | Covered | |
| Public Hospital | | |
| Semi Private Room | Covered | |
| Private Room | Covered | |
| Day Case | Covered | |
| Private Hospital | ' | |
| Semi Private Room | Covered subject to €150 excess per claim subject to €2,000 co-payment on certain orthopaedic procedures ⁽¹⁾ | |
| Private Room | Covered subject to €150 excess per claim; subject to | |
| Day Care | €2,000 co-payment on certain orthopaedic procedures ⁽¹⁾ Covered subject to €75 excess per claim | |
| Day Case | Covered subject to €75 excess per claim | |
| High Tech Hospital | | |
| Semi Private Room | Covered in Beacon Only; subject to €150 excess per claim; subject to €2,000 co-payment on certain orthopaedic procedures ⁽¹⁾ | |
| Private Room | Covered in Beacon Only; subject to €150 excess per claim; subject to €2,000 co-payment on certain orthopaedic procedures ⁽¹⁾ | |
| Day Case | Covered in Beacon Only; subject to €75 excess per claim | |
| Listed Cardiac Procedures ⁽¹⁾ | Covered in Beacon Only; subject to €150 excess per claim | |
| Listed Special Procedures ⁽¹⁾ | Covered in Beacon Only; subject to €150 excess per claim; subject to €2,000 co-payment on certain orthopaedic procedures ⁽¹⁾ | |
| | Maternity Benefits | |
| Public hospital cover for maternity | 3 nights accommodation | |
| Grant-in-aid amount | Covered up to €4,500 | |
| Home birth | Covered up to €4,500 | |
| Inpatient maternity consultant fees | As per schedule of benefits for professional fees ⁽²⁾ | |
| Newborn free till next renewal | Yes | |
| Early discharge maternity benefit | €300 cash benefit following 1 nights stay for delivery in a semi-private or private room subject to medical approval | |

| 2 x 3 hour cleaning sessions | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| €30 x 2 sessions | | |
| €50 x 2 days travel, accommodation & child minding expenses | | |
| Hamper and 30 minute phone consultation with a nutritionist | | |
| See handbook for details | | |
| A&E Abroad | | |
| Covered up to €100,000 | | |
| Covered up to €1 million | | |
| Covered up to €1,000 | | |
| Covered up to €1,000 | | |
| Covered | | |
| Elective Overseas Referrral | | |
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| Yes - up to the amount for the most similar surgical procedure to treat the same condition in Ireland | | |
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| Yes - up to the amount for the most similar surgical procedure to treat the same condition in Ireland Yes - subject to level of cover available in Ireland Treatment 100 days (up to the level of Hospital Cover provided under your plan) 91 days per 5 years (up to the level of Hospital Cover | | |
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| Yes - up to the amount for the most similar surgical procedure to treat the same condition in Ireland Yes - subject to level of cover available in Ireland Treatment 100 days (up to the level of Hospital Cover provided under your plan) 91 days per 5 years (up to the level of Hospital Cover provided under your plan) 3enefits Covered Covered (Immediately following an inpatient stay) 70% up to €200 per visit €30 x 16 days | | |
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| Yes - up to the amount for the most similar surgical procedure to treat the same condition in Ireland Yes - subject to level of cover available in Ireland Treatment 100 days (up to the level of Hospital Cover provided under your plan) 91 days per 5 years (up to the level of Hospital Cover provided under your plan) 3enefits Covered Covered Covered (Immediately following an inpatient stay) 70% up to €200 per visit €30 x 18 days €100 x 14 days (following an inpatient stay of minimum stays) €40 x 14 days (not payable for the first 3 days) Covered Up to €100 per day up to a maximum of €1500 per | | |
| | | |

| Outpatient Benefits (not subject to excess) | | |
|---------------------------------------------|-------------------------------------------------------------------------------------------------------------|--|
| Nurse on call | Covered | |
| Digital Doctor | Unlimited. See irishlifehealth.ie for further information. | |
| HPV Vaccine | 50% up to €200 per policy year | |
| Health screen at any centre | Covered up to €100 per annum | |
| Vasectomy (GP only) | Covered up to €360 | |
| Antenatal Class | €30 towards an antenatal class, or, €30 contribution & 10% point of sale discount with GentleBirth Workshop | |

| €40 x 5 sessions with Nurture | | | |
|----------------------------------------------------------------------|--|--|--|
| €100 per child per annum | | | |
| €30 x 10 visits | | | |
| €30 x 10 visits | | | |
| Scans & X-Rays Pack | | | |
| Covered | | | |
| 50% Cover | | | |
| 50% Cover | | | |
| 50% as per schedule of benefits for professional fees ⁽²⁾ | | | |
| 50% Cover | | | |
| 50% as per schedule of benefits for professional fees ⁽²⁾ | | | |
| Emergency Access Pack | | | |
| €100 x 1 | | | |
| €60 x 1 | | | |
| €100 x 1 | | | |
| €50 x 1 | | | |
| €250 | | | |
| | | | |

| Outpatient Benefits (subject to excess) | | |
|---------------------------------------------------------------------|--------------------------------------|--|
| Outpatient excess per person | €200 | |
| Maximum amount of outpatient benefits per member per policy year | €5000 | |
| Manual Lymph Drainage | €50 x 5 visits | |
| Psycho-oncology Counselling | €40 x 5 visits | |
| Emergency Dental Care | €250 | |
| Consultant fees | €80 per visit | |
| Pre/Post natal medical expenses | €400 | |
| Public A&E Cover | €80 x 3 visits | |
| Child A&E visit | €80 x 3 visits | |
| Medical and surgical appliances | As per specified list ⁽³⁾ | |
| Home Nursing | €40 x 20 days | |
| MRI Scan: non approved centre | Not covered on this plan | |
| CT Scan: non approved centre | Not covered on this plan | |
| PET-CT Scan: non approved centre | Not covered on this plan | |

| Member Benefits | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|--|
| Allen Carr Smoking Cessation | Back Up | |
| Laser Eye Surgery | Smiles Dental Access Package | |
| For full details on the above and all member benefits available to you please visit the 'Member Benefits' section of www.irishlifehealth.ie | | |

Footnotes

- All procedure lists are available on www.irishlifehealth.ie or available on request by calling Irish Life Health on 1890 717 717.
- (2) The schedule of benefits is available on www.irishlifehealth.ie or available on request by calling Irish Life Health on 1890 717 717.
- (3) The medical and surgical appliances list is available on www.irishlifehealth.ie or available on request by calling Irish Life Health on 1890 717 717.