


## Table of Benefits – PMI 44 16

Applicable to new registrations or renewals on/or after 1<sup>st</sup> October, 2018.

This Table of Benefits must be read in conjunction with your Company 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.

	<b>Benefit Provision</b>	<b>Benefit</b>
	<b>Section 1 - Hospital charges</b>	
A	Public 1 & 2 hospitals <ul style="list-style-type: none"> <li>Day care, side room, semi-private &amp; private accommodation</li> </ul>	Full cover
B	Private hospitals and treatment centres	
	Private 1, 2 & 3 hospitals (other than for certain investigations & treatments referred to in Section 1c & 1d) <ul style="list-style-type: none"> <li>Day care, side room, semi-private &amp; private accommodation</li> <li>Radiotherapy (day care &amp; out-patient)</li> <li>Hospital excess (per claim - except maternity &amp; certain cancer treatments)</li> </ul>	Full cover Full cover €150
	Private 4 hospitals (other than for certain investigations & treatments referred to in Section 1c & 1d) <ul style="list-style-type: none"> <li>Day care &amp; side room</li> <li>Semi-private accommodation</li> <li>Private accommodation</li> <li>Radiotherapy (day care &amp; out-patient)</li> <li>Hospital excess (per claim - except maternity &amp; certain cancer treatments)</li> </ul>	Full cover 50% 40% Full cover €150
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"> <li>Day care &amp; in-patient cardiac FPPs Level 1</li> <li>Day care &amp; in-patient non-cardiac FPPs Level 1 (other than Radiotherapy and Chemotherapy, refer to Section 1B)</li> <li>In-patient cardiac FPPs Level 2</li> <li>Hospital excess (per claim - except maternity &amp; certain cancer treatments)</li> </ul>	Full cover Full cover 0% €150
D	Specified hip, knee & shoulder joint replacement procedures (herein referred to as Orthopaedic procedures) & specified Ophthalmic procedures - contact us for details of these	
	Private 1, 2 & 3 hospitals <ul style="list-style-type: none"> <li>Day care, side room, semi-private &amp; private accommodation</li> <li>Hospital excess (per claim)</li> </ul>	80% €150
	Private 4 hospitals <ul style="list-style-type: none"> <li>Day care &amp; side room</li> </ul>	80%

**■** 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.

	<ul style="list-style-type: none"> <li>• Semi-private accommodation</li> <li>• Private accommodation</li> <li>• Hospital excess (per claim)</li> </ul>	<p>50%</p> <p>40%</p> <p>€150</p>
	<p>When carried out as a Fixed Price Procedure (contact us for details)</p> <ul style="list-style-type: none"> <li>• Private 3 &amp; 4 hospitals</li> <li>• Hospital excess (per claim)</li> </ul>	<p>80%</p> <p>€150</p>
<b>Section 2 - Consultants' fees/GP procedures</b>		
A	<p>In-patient treatment, day-care/side room/out-patient &amp; GP procedures</p> <ul style="list-style-type: none"> <li>• Participating consultant/GP</li> <li>• Non-participating consultant/GP</li> </ul>	<p>Full cover</p> <p>Standard benefit</p>
<b>Section 3 - Psychiatric cover (read in conjunction with Section 1)</b>		
A	In-patient psychiatric cover	100 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
D	<p>Out-patient mental health treatment (in an approved out-patient mental health centre)</p> <ul style="list-style-type: none"> <li>• Mental health assessment in every 2 year period</li> <li>• Mental health therapy, 12 visits</li> </ul>	<p>€100 per member</p> <p>€30 per visit</p>
<b>Section 4 - Maternity</b>		
A	<p>Normal confinement</p> <ul style="list-style-type: none"> <li>• Public hospital benefit (up to 3 days)</li> </ul> <p>Caesarean delivery (as per hospital benefits listed)</p> <p>Home birth benefit</p>	<p>Full cover</p> <p>Refer Section 1</p> <p>€3,475</p>
B	In-patient maternity consultant fees (per Schedule of Benefits for Professional Fees)	Agreed charges
C	<p>Post-natal home nursing</p> <ul style="list-style-type: none"> <li>• Following 1 nights stay</li> <li>• Following 2 nights stay</li> </ul>	<p>€1,300</p> <p>€650</p>
D	Vhi Fertility Programme 	
	<p>Fertility benefit - benefit per member, towards the cost of specified fertility tests and treatments carried out in a Vhi Participating Fertility Treatment Centre</p> <ul style="list-style-type: none"> <li>• Initial consultation</li> </ul>	<p>€100 discount at point of sale</p>

	<ul style="list-style-type: none"> <li>• AMH &amp; Semen Analysis tests</li> <li>• Egg freezing - once per lifetime</li> <li>• Sperm freezing - once per lifetime</li> <li>• IUI - up to 2 treatments per lifetime, female members only</li> <li>• IVF or ICSI - up to 2 treatments per lifetime, female members only</li> <li>• Fertility counselling - 4 sessions per treatment carried out in a Vhi Participating Fertility Treatment Centre</li> <li>• Fertility support services - Acupuncturists &amp; Dieticians visits</li> </ul> <p>* These benefits are co-funded by Vhi and the Vhi Participating Fertility Treatment Centre</p>	<p>€100 discount at point of sale</p> <p>€1,000</p> <p>€125</p> <p>€450 per treatment*</p> <p>€1,000 per treatment*</p> <p>€40 per session</p> <p>Refer Section 9</p>
	<b>Section 5</b>	
A	Convalescent care - first 14 nights	€60 per night
B	Cancer care support - one night's accommodation for each treatment	€100 per night
C	Vhi Healthcare approved medical and surgical appliances - subject to an excess of €300 per member per year (contact us for details of eligible appliances)	€1,250 per member year
D	Vhi Hospital@Home	Full cover
E	Child home nursing - 28 days per calendar year	€100 per day
F	Parent accompanying child - 14 days per calendar year, following a stay in excess of 3 days in hospital	€100 per day
G	Return home benefit	€100 per claim
H	Manual Lymph Drainage following cancer treatment - 10 visits	Up to €50 per visit
I	<p>Vhi VisionCare</p> <ul style="list-style-type: none"> <li>• Vhi VisionCare E-Screen (available through Vhi.ie/myvhi)</li> <li>• Comprehensive eye exam carried out by a VSP eye-care professional in each 24 month period - subject to Vhi VisionCare E-Screen referral</li> </ul>	<p>Full cover</p> <p>Full cover</p>
	<b>Section 6 - Transport costs</b>	
A	Transport costs (covered in accordance with our rules)	Agreed charges
	<b>Section 7 - Cover outside Ireland</b>	
A	Emergency treatment abroad	€100,000
B	<p>Elective treatment abroad (subject to prior approval)</p> <ul style="list-style-type: none"> <li>• Surgical procedures available in Ireland (as per level of cover in Ireland)</li> <li>• Treatment not available in Ireland</li> </ul>	<p>€100,000</p> <p>€100,000</p>
	<b>Section 8</b>	

A	In-patient MRI scans (covered in accordance with Section 1)	Agreed charges
B	Out-patient MRI scans <ul style="list-style-type: none"> <li>• Category 1 - approved MRI centres</li> <li>• Category 2 - approved MRI centres, agreed MRI charges &amp; consultant Radiologists fees (subject to an excess of €125 per scan)</li> </ul>	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) <b>H</b>	Full cover
<b>Section 9 – Day-to-day medical expenses (benefits are per visit, per member, unless otherwise indicated)<b>H</b></b>		
A	Consultant consultation - 25 visits	€60
B	Pathology - consultants' fees (per referral)	€60
C	Radiology - consultants' fees for professional services (per procedure)	€60
D	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	€500 per year
E	Pre- and post-natal care (combined visits)	€240
F	Optical – eye tests and glasses/contact lenses – 75% of charges 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)	€50^
G	Health screening - in each 24 month period, covered in accordance with our rules (contact us for details) * <ul style="list-style-type: none"> <li>• Lifestage screening programme in a Vhi Medical Centre</li> <li>• Dexa scans in an approved dexa scan centre</li> <li>• Mammograms in an approved mammogram centre</li> </ul>	€150 per screen 50% cover Full cover
H	Accident & emergency cover - 2 visits	€75
I	Acupuncturists, Dieticians* - 5 combined visits	€40
J	Strength & Conditioning Coach – 3 visits	€25
K	Vhi SwiftCare exclusive benefit to Vhi customers* <ul style="list-style-type: none"> <li>• Initial consultation (charge is €125 – you pay €50)</li> <li>• Follow-up treatment package after this consultation for x-rays, tests &amp; medical aids (maximum you will pay is €100 for this follow-up treatment)</li> </ul>	€75 50% of total costs
	Vhi SwiftCare appointment services* <ul style="list-style-type: none"> <li>• Consultant consultation (orthopaedic, oral maxillofacial &amp; sports medicine)</li> </ul>	50%
L	Vhi paediatric clinic* <ul style="list-style-type: none"> <li>• Initial Consultant consultation</li> <li>• Follow up paediatric treatment and services after this consultation including lactation consultant, dietician, ultrasound, blood tests and x-ray</li> </ul>	50% 50% of total costs
	Annual excess - per member, per year	€125

	Annual maximum - per member, per year	€3,200
	* These benefits are not subject to the annual excess or annual maximum	
	<b>Section 10 - LifeStage benefits</b>	
A	Child counselling - 8 visits	€30
B	Baby massage classes, in the year of the birth	€100 per child
C	Foetal screening, in the year of the birth	€200 per pregnancy
D	Antenatal course, in the year of the birth	€75
E	Breastfeeding consultations, 2 visits in the year of the birth	€40
F	Travel vaccinations	€100 per year
G	Paediatrician benefit in addition to the Vhi paediatric clinic benefit listed above - 1 visit in the year of the birth	€75
	Annual excess - per member per year	€1
	<b>Section 11</b>	
A	Fitness screening and Personalised Exercise Programme, carried out in the Sports Surgery Clinic, Santry (1 visit per 3 year period)	Full cover
	<b>Section 12 - Workplace benefits</b>	
A	Employee Assistance Programme <ul style="list-style-type: none"> <li>• Telephone counselling, 6 sessions per issue</li> <li>• Face-to-face counselling, 6 visits per issue</li> </ul>	Full cover Full cover
	<b>Additional notes</b>	
A	Note 1: Manual Lymph Drainage <ul style="list-style-type: none"> <li>• We will pay the benefit listed in your Table of Benefits towards the cost of Manual Lymph Drainage following cancer treatment, provided the person giving the care is a Physiotherapist or Physical Therapist.</li> </ul>	

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.