

# First Focus 300

## Table of Cover effective from June 12th 2017

This table of cover must be read in conjunction with your member certificate and Health Plans membership handbook effective from June 2017. The hospitals and treatment centres covered on this plan are set out in List 3 in Part 12 of your Health Plans membership handbook.

| In Patient Benefits                             |   |
|---|---|
| Hospital Cover                                  |   |
| Consultants fees (In selected hospitals only)   | Covered   |
| Inpatient Scans (In selected hospitals only)    | Covered   |
| Public Hospital (in selected hospitals only)    |   |
| Semi Private Room                               | Covered   |
| Private Room                                    | Covered   |
| Day Case  | Covered   |
| Private Hospital (in selected hospitals only)   |   |
| Semi Private Room                               | Covered subject to €300 excess; subject to a €2,000 co-payment on certain cardiac & orthopaedic procedures <sup>(1)</sup> |
| Private Room                                    | Covered subject to €300 excess; subject to a €2,000 co-payment on certain cardiac & orthopaedic procedures <sup>(1)</sup> |
| Day Case  | Covered subject to €150 excess per claim subject to €2,000 co-payment on certain cardiac procedures <sup>(1)</sup>        |
| High Tech Hospital (in selected hospitals only) |   |
| Semi Private Room                               | Covered subject to €300 excess; subject to a €2,000 co-payment on certain cardiac & orthopaedic procedures <sup>(1)</sup> |
| Private Room                                    | Covered subject to €300 excess; subject to a €2,000 co-payment on certain cardiac & orthopaedic procedures <sup>(1)</sup> |
| Day Case  | Covered subject to €150 excess; subject to a €2,000 co-payment on certain cardiac procedures <sup>(1)</sup>               |
| Maternity Benefits                              |   |
| Public hospital cover for maternity             | €400 public hospital only   |
| Home birth                                      | Covered up to €500  |
| Inpatient maternity consultant fees             | Covered up to €300  |
| Newborn free till next renewal                  | Yes   |
| A&E Abroad                                      |   |
| Hospital bill for inpatient treatment           | Covered up to €100,000  |
| Repatriation expenses                           | Covered up to €1 million  |
| Expenses for companion who remains with you     | Covered up to €1,000  |
| Companion repatriation expenses                 | Covered up to €1,000  |
| 24 hour telephone assistance                    | Covered   |
| Psychiatric Treatment                           |   |
| Not related to substance abuse                  | 100 days (up to the level of Hospital Cover provided under your plan)   |

| Related to substance abuse   | 91 days per 5 years (up to the level of Hospital Cover provided under your plan) |
|--|--|
| Other Benefits   |  |
| Oncotype DX  | Covered  |
| Health in the Home   | Covered (Immediately following an inpatient stay)                                |
| Convalescence benefits   | €30 x 16 days  |
| Public Hospital Levy   | €80 x 10 nights (subject to €1 excess)   |
| Inpatient Support Benefit (for travel expenses when travelling more than 50km) | €50 x 10 visits (subject to €1 excess)   |
| Medical ambulance costs  | Covered (refer to Membership Handbook)   |

| Outpatient Benefits (not subject to excess) |   |
|---|---|
| Nurse on call                               | Covered   |
| Digital Doctor                              | Unlimited. See <a href="http://irishlifehealth.ie">irishlifehealth.ie</a> for further information.                  |
| Health screening                            | Covered up to €100 towards V02 Max Testing or Fertility Assessments or Sexual Health Screening once per policy year |
| Public A&E Cover                            | €120 x 1 visit  |
| Vaccinations: Travel Only                   | €100 per year   |
| MRI Scan: approved centre                   | Covered   |
| CT Scan: approved centre                    | Covered   |
| PET-CT Scan: approved centre                | Covered   |

| Outpatient Benefits (subject to excess)                          |  |
|--|--|
| Outpatient excess per person                                     | €200   |
| Maximum amount of outpatient benefits per member per policy year | €5000  |
| Home Nursing   | €40 x 20 days  |
| Medical and surgical appliances                                  | As per specified list <sup>(2)</sup>                                 |
| Psycho-oncology Counselling                                      | €40 x 5 visits   |
| Manual Lymph Drainage  | €50 x 5 visits   |
| Emergency Dental Care  | €750   |
| Consultant fees  | €60 per visit  |
| Pathology: Cost of test  | 50% Cover  |
| Pathology: Consultant fees                                       | 50% as per schedule of benefits for professional fees <sup>(3)</sup> |
| Radiology: Cost of test  | 50% Cover  |
| Radiology: Consultant fees                                       | 50% as per schedule of benefits for professional fees <sup>(3)</sup> |
| 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 |                          |
|-----------------|--------------------------|
| Back Up         | Elverys Sports Discounts |

|   |                   |
|---|-------------------|
| Health Screening  | Laser Eye Surgery |
| Smiles Dental Access Package  |                   |
| For full details on the above and more please visit the 'Member Benefits' section on <a href="http://www.irishlifehealth.ie">www.irishlifehealth.ie</a> |                   |

#### Footnotes

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