

# Future Focus

## 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 €150 excess per claim subject to €2,000 co-payment on certain cardiac & orthopaedic procedures <sup>(1)</sup>
Private Room	Covered subject to €150 excess per claim subject to €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 €150 excess per claim subject to €2,000 co-payment on certain cardiac & orthopaedic procedures <sup>(1)</sup>
Private Room	Covered subject to €150 excess per claim subject to €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 cardiac procedures and special procedures <sup>(1)</sup>
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	Covered up to €865
Newborn free till next renewal	Yes
Post Natal Home Help (PNHH)	€120 cash benefit for domestic home help following the birth of your baby
Post Natal Counselling	€40 x 5 visits
Doula Ireland	€200 discount (€120 rebate if PNHH is not availed of)
Cord blood stem cell preservation	€600 contribution single child & identical twins or €900 contribution non identical twins

Breastfeeding consultancy	€30 x 2 sessions
Partner benefit	€50 x 2 days travel, accommodation & child minding expenses
<b>A&amp;E Abroad</b>	
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
<b>Psychiatric Treatment</b>	
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)
<b>Other Benefits</b>	
Oncotype DX	Covered
Health in the Home	Covered (Immediately following an inpatient stay)
Convalescence benefits	€30 x 16 days
Child Home Nursing	€100 x 14 days (following an inpatient stay of minimum 5 days)
Parent accompanying child	€40 x 14 days (not payable for the first 3 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)
Heads Up: Stress Management Line	365 days stress line
Heads Up: Employee assistance program	Covered for 6 face to face follow up counselling sessions

### 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 Specified Fertility Assessments or Sexual Health Screening once per policy year
Vaccinations: Travel or Flu	€100 per year
Prescription Costs	€30 towards prescribed contraceptives per year
Orthotic Insoles	€40 every 2 years
Voice Coaching	€30 x 5 visits or €150 per year for a day course or seminar delivered by a trained voice coach
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
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Maximum amount of outpatient benefits per member per policy year	€5000
Manual Lymph Drainage	€50 x 5 visits
Emergency Dental Care	€500
Psycho-oncology Counselling	€40 x 5 visits
Consultant fees	€60 per visit
Pre/Post natal medical expenses	€400
Public A&E Cover	€60 x 3 visits
Home Nursing	€40 x 20 days
Medical and surgical appliances	As per specified list <sup>(2)</sup>
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
Laser Eye Surgery	Maternity Scans
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.