MyPlan 350

Table of Cover effective from 1st October 2024

You should read this table of cover along with the Tailored Health Plans membership handbook effective from October 2024 which you can find on irishlifehealth.ie/more-info. The hospitals and treatment centres covered on this plan are set out in List A in Part 12 of your Tailored Health Plans membership handbook.

| IN PATIENT BENEFITS | | |
|--|--|--|
| Hospital cover | | |
| Consultants 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 €350 excess per claim and €2,500 co-payment on certain cardiac & orthopaedic procedures ¹ | |
| Private room | Semi-Private Rate subject to €350 excess per claim and €2,500 co-payment on certain cardiac & orthopaedic procedures ¹ | |
| Day case | Covered subject to €125 excess per claim and €2,500 co-payment on certain cardiac procedures ¹ | |
| High-tech Hospital | | |
| Semi-private room | Covered in Beacon only; subject to €350 excess per claim and €2,500 co-payment on certain cardiac & orthopaedic procedures ¹ | |
| Private room | Semi-private rate (Beacon only); subject to €350 excess per claim and €2,500 co-payment on certain cardiac & orthopaedic procedures ¹ | |
| Day case | Covered in Beacon only; subject to €125 excess per claim | |
| Listed cardiac procedures ¹ | Covered in Beacon only; subject to €350 excess per claim; subject to €2,500 co-payment on certain cardiac procedures ¹ | |
| Listed special procedures ¹ | Covered in Beacon only; subject to €350 excess per claim; subject to €2,500 co-payment on certain orthopaedic procedures ¹ | |
| Mat | ernity | |
| Public hospital cover for maternity | 3 nights accommodation | |
| | | |
| Inpatient maternity consultant fees | As per schedule of benefits for professional fees ² | |
| Inpatient maternity consultant fees Emergency Inpatient Treatme | As per schedule of benefits for professional fees ² | |
| | As per schedule of benefits for professional fees ² ent Abroad and related benefits Covered up to €100,000 | |

| 24 hour telephone assistance | Covered | | | |
|--|--|--|--|--|
| | 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 inpatient benefits | | | | |
| Medicall Ambulance costs | Covered (refer to Membership Handbook) | | | |
| Healthy Minds | Online access to mental health assessments and content and up to 6 counselling sessions via phone, chat, video or face to face | | | |
| Genetic Testing: Initial consultation | 50% cover | | | |
| Genetic Testing: Test for specified genetic mutations | Covered in approved clinics with our approved consultant | | | |
| Genetic Testing for Cancer Treatment Options - Foundation One CDx | Covered | | | |
| Oncotype DX | Covered | | | |
| Health in the Home | Covered with our provider partner | | | |
| EXOGEN therapy | Covered with our provider partner | | | |
| Care Connect | Covered (refer to membership handbook) | | | |
| OUTPATIENT BENEFITS – not subject to exces | 35 | | | |
| Digital Doctor | Unlimited. See irishlifehealth.ie for further information. | | | |
| Nurse on call | Covered | | | |
| Female Health Consultation | 50% cover x 4 consultations per year with our provider partner | | | |
| Female Fertility Assessment and Consultation | Covered with our preferred provider, once per policy year subject to a €60 co-payment | | | |
| Female Pelvic Health Physiotherapy | Covered up to €150 for initial consultation, once per policy year | | | |
| | €30 x 16 days | | | |
| Convalescence benefits | ESO X TO days | | | |
| Convalescence benefits Minor Injury Clinic Cover | 70% up to €200 per visit | | | |
| Minor Injury Clinic Cover | 70% up to €200 per visit | | | |
| Minor Injury Clinic Cover Minor Injury Clinic Cover (Pay & Claim) | · · · · · · · · · · · · · · · · · · · | | | |
| Minor Injury Clinic Cover Minor Injury Clinic Cover (Pay & Claim) Out-patient scan cover (in approved centres) | 70% up to €200 per visit 70% up to €200 per visit | | | |
| Minor Injury Clinic Cover Minor Injury Clinic Cover (Pay & Claim) | 70% up to €200 per visit | | | |

| OUTPATIENT BENEFITS – subject to exces | S |
|---|------------------------------------|
| Individual excess | €100 |
| Maximum amount of outpatient benefits per member per policy year | €900 |
| Public A & E cover | €60 x 3 visits |
| Medical and surgical appliances | As per specified list ³ |
| Emergency dental care | €250 |
| Manual lymph drainage | €50 x 5 visits |
| Home Recovery Benefit | €80 x 10 days |
| Psycho-oncology counselling | €40 x 5 visits |
| Consultant fees | €60 per visit |
| Pathology: Cost of test | €20 per test |
| Pathology: Consultant fees | €25 per consultant fee |
| Radiology: Cost of test | €20 per test |
| Radiology: Consultant fees | €25 per consultant fee |

Personalised Packages

Choice of 1 Personalised Packages from range of 5

| MEMBER BENEFITS | | |
|---|------------------|--|
| International Second Opinion Service | Back Up | |
| Laser Eye Surgery | Health Screening | |
| For full details on the above and all member benefits available to you please visit the 'Member Benefits' section of <u>www.irishlifehealth.ie</u> | | |

| Footnotes |
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| (1) All procedure lists are available on <u>www.irishlifehealth.ie</u> or available on request by calling Irish Life Health on 01 562 5100. |
| (2) The schedule of benefits is available on <u>www.irishlifehealth.ie</u> or available on request by calling Irish Life |
| Health on 01 562 5100. |
| (3) The medical and surgical appliances list is available on <u>www.irishlifehealth.ie</u> or available on request |
| by calling Irish Life Health on 01 562 5100. |
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