

# Aviva Select More

## Table of Cover effective from May 1st 2015

This table of cover must be read in conjunction with your member certificate and membership handbook effective from May 2015. The hospitals and treatment centres covered on this plan are set out in List 1 in Part 12 of your 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 <sup>(1)</sup>
Private Room	Covered subject to €150 excess per claim subject to €2,000 co-payment on certain orthopaedic procedures <sup>(1)</sup>
Day Case	Covered subject to €150 excess per claim; subject to €2,000 co-payment on certain orthopaedic procedures <sup>(1)</sup>
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 <sup>(1)</sup>
Private Room	Covered in Beacon Only; subject to €150 excess per claim; subject to €2,000 co-payment on certain orthopaedic procedures <sup>(1)</sup>
Day Case	Covered in Beacon Only; subject to €150 excess per claim; subject to €2,000 co-payment on certain orthopaedic procedures <sup>(1)</sup>
Listed Cardiac Procedures <sup>(1)</sup>	Covered in Beacon Only; subject to €150 excess per claim
Listed Special Procedures <sup>(1)</sup>	Covered in Beacon Only; subject to €150 excess per claim; subject to €2,000 co-payment on certain orthopaedic 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	As per schedule of benefits for professional fees <sup>(2)</sup>
Newborn free till next renewal	Yes
Antenatal benefit	Covered up to €75 when carried out with registered midwife

Early discharge maternity benefit	€300 cash benefit following 1 nights stay for delivery in a semi-private or private room subject to medical approval
Post Natal Home Help (PNHH)	€120 cash benefit for domestic home help following the birth of your baby
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>Elective Overseas Referral</b>	
Benefit abroad for surgical procedures that are not available in Ireland	Yes - up to the amount for the most similar surgical procedure to treat the same condition in Ireland
Benefit abroad for surgical procedures that are available in Ireland	Yes - subject to level of cover available in Ireland
<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
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)
Point of Care: Day case procedure for Rheumatology & Chemotherapy	Covered
Cancer Support Benefit (for accommodation expenses when travelling more than 50km)	Up to €100 per day up to a maximum of €1500 per calendar year
Public Hospital Levy	€75 x 10 nights (subject to €1 excess)
Medicall ambulance costs	Covered (refer to Membership Handbook)

<b>Outpatient Benefits (not subject to excess)</b>	
Nurse on call	Covered
Health screen at any centre	Covered up to €100 every 2 years
Paediatrician Benefit	€100 per child per annum
Child speech and language therapist	€30 x 10 visits
Child counselling	€30 x 10 visits
<b>Scans &amp; X-Rays Pack</b>	
MRI, CT and PET-CT scans in approved centres	Covered
Cardiac Screening	50% Cover

Pathology: Cost of test	50% Cover
Pathology: Consultant fees	50% as per schedule of benefits for professional fees <sup>(2)</sup>
Radiology: cost of test	50% Cover
Radiology: Consultant fees	50% as per schedule of benefits for professional fees <sup>(2)</sup>

### 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	€60 per visit
Pre/Post natal medical expenses	€400
Public A&E Cover	€60 x 3 visits
Child A&E visit	€60 x 3 visits
Medical and surgical appliances	As per specified list <sup>(3)</sup>
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 more please visit the 'Member Benefits' section on <a href="http://www.avivahealth.ie">www.avivahealth.ie</a>	

### Footnotes

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