

Be Fit 2.1

Table of Cover effective from November 1st 2017

This table of cover must be read in conjunction with your member certificate and Health Plans membership handbook effective November 2017. The hospitals and treatment centres covered on this plan are set out in List 1 in Part 12 of your 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 €125 excess per claim; subject to €2,000 co-payment on certain orthopaedic procedures
Private room	Covered subject to €125 excess per claim; subject to €2,000 co-payment on certain orthopaedic procedures
Day case	Covered subject to €125 excess per claim
High-tech Hospital	
Semi-private room	Covered (Beacon only) subject to €125 excess per claim. Mater Private and Blackrock Clinic 50% cover subject to €125 excess per claim. All subject to €2,000 co-payment on certain orthopaedic procedures.
Private room	Covered (Beacon only) subject to €125 excess per claim. Mater Private and Blackrock Clinic 50% cover subject to €125 excess per claim. All subject to €2,000 co-payment on certain orthopaedic procedures.
Day case (All Hi-Tech)	Covered subject to €125 excess per claim
Listed cardiac procedures (All Hi Tech)	Covered subject to €125 excess per claim
Listed special procedures (All Hi-Tech)	Covered subject to €125 excess per claim; subject to €2,000 co-payment on certain orthopaedic procedures
Maternity	
Public hospital cover for maternity	3 nights accommodation
Inpatient maternity consultant fees	As per schedule of benefits for professional fees ¹
Post Natal Home Help	Covered for up to 2 days post natal home help
Alternative amount for Post Natal Home Help	€120
Infertility benefit	50% cover up to a max of €750 for IVF, IUI, ICSI. Twice per lifetime.
Fertility treatment at Beacon CARE fertility	10% discount on listed procedures
Partner Benefit	€50 x 2 days travel, accommodation and child minding expenses
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	Yes
Elective overseas referral	
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
International Second Opinion Service	Covered – refer to your Membership Handbook
Psychiatric treatment	
Not related to substance abuse	100 days
Related to substance abuse	91 days per 5 years

Other inpatient benefits	
Oncotype DX	Covered
Health in the Home	Covered (Immediately following an inpatient stay)
Convalescence benefits	€50 x 15 days
Child home nursing care	€100 x 14 days (following 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 for up to a maximum of €1500 per calendar year
Medical ambulance costs	Covered, if certified as being medically necessary
Stress management line	365 days stress line
Employee assistance program	6 face to face follow up counselling sessions

OUT PATIENT BENEFITS – not subject to excess	
Nurse-on-call	Yes
Digital Doctor	Unlimited. See irishlifehealth.ie for further information.
Vaccinations	Travel vaccinations : €50 per year
Health screen at any centre	Up to €100 per annum
Vasectomy (GP only)	Covered up to €360
AMH fertility test	€50 contribution
Private ante-natal class	€50 contribution
Miscarriage counselling	€50 x 2 visits
Pre/post natal yoga & pilates	€20 x 2 visits
Out-patient scan cover (in approved centres)	
PET-CT	Covered
MRI	Covered
CT	Covered

OUT PATIENT BENEFITS – subject to excess	
Individual excess	Outpatient: €1 excess
Family excess	Outpatient: €1 per person excess
Maximum amount of outpatient benefits per member per policy year	€4,000
Consultant fees	First visit fully covered 50% cover for subsequent visits
GP visits	First visit fully covered 50% cover for subsequent visits
Public A & E cover	First visit fully covered 50% cover for subsequent visits
Prescriptions	Up to €25 per annum
Dentist visits	Up to €30 x 7 visits
Physiotherapy visits	Up to €30 x 7 visits
Alternative practitioners	Up to €30 x 7 combined
Child speech and Language	50% up to €30 x 8
Child Counselling	50% up to €30 x 8
Clinical Psychologist	€25 x 10 visits
Psycho-oncology counseling	50% up to €25 x 8 visits
Manual lymph drainage	50% up to €25 x 5 visits
Home nursing	€40 x 20 days
Pre/Post natal medical expenses	Up to €250
Emergency dental care	Up to €250
Medical and surgical appliances	As per specified list ² (subject to €200 per person excess)
Hearing Test	Up to €25 x 1
Optical (eye test and/or glasses/lenses combined)	50% up to €150 per policy year
Pathology-cost of test	50% Covered
Pathology consultant fees	50% As per schedule of benefits for professional fees ¹
Radiology - cost of test	50% Covered
Radiology consultant fees	50% As per schedule of benefits for professional fees ¹

¹ The schedule of benefits is available on 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 or available on request by calling Irish Life Health on 1890 717 717.

MEMBER BENEFITS

Smiles Dental Access Package

Back Up

Laser eye surgery

4 D scans

For full details on the above member benefits please visit the 'Member Benefits' section on www.irishlifehealth.ie