

# Health Insurance

## Insurance Product Information Document



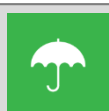
Company: Vhi Insurance DAC is regulated  
by the Central Bank of Ireland (Reg. no. C13018)

Product: Company Plan Starter

This summary document is for guidance only and must be read in conjunction with your Table of Benefits, Terms and Conditions and the Directories of Approved Facilities.

### What is this type of insurance?

This is a private medical insurance contract which provides the customer with cover for treatment in hospital as a private patient.



### What is insured?

#### Maternity

- ✓ €400 for in-patient hospital accommodation, when you're having your baby as a private patient.
- ✓ We cover agreed charges for your consultant, the anaesthetist's fee for your epidural, in-patient pathologist fees and a paediatric consultation.
- ✓ One-to-One midwife pregnancy support service - giving new and experienced mums the support they need, over the phone, right throughout their pregnancy. Phone **1850 247 724**.

#### For the Kids

- ✓ NurseLine 24/7 - talk to one of our nurses about your child's health or a medical condition at **1850 247 724**.
- ✓ Second Opinion for Kids service offers you a medical second opinion for your child. Phone **1850 247 724**.



### What is not insured?

- ✗ Benefits which are not mentioned in your Table of Benefits.
- ✗ General exclusions listed in the Exclusions section of your Terms and Conditions are not covered on your policy.



### Are there any restrictions on cover?

- ! If you are taking out health insurance for the first time, renewing on a higher level of cover or moving from another Irish health insurer, waiting periods may apply. Please read our Terms and Conditions to find out more about waiting periods.
- ! Your day-to-day medical expenses excess is €25<sup>1</sup>. The excess means that where your eligible benefits exceed the value of €25, we will pay remaining eligible benefits up to a value of €3,200.
- ! Your medical and surgical appliances benefit is up to a value of €1,000<sup>3</sup> per year, subject to an excess of €300.
- ! Private hospital excess per claim
  - In-patient admissions - €500<sup>2</sup>
  - Day care and side room - €250<sup>2</sup>
- ! Geographic restrictions<sup>4</sup> apply to Vhi Hospital@Home.
- ! Other restrictions and limits on benefits are defined in your Table of Benefits.



## What is insured continued...

### Your Day-to-Day Medical Expenses<sup>1</sup>

- ✓ GP - €20 per visit (3 visits).
- ✓ Consultants - €60 per visit.
- ✓ Referrals to consultant pathologists - €60 per referral.
- ✓ Consultant radiologists - €60 per procedure.
- ✓ Dental practitioner - €20 per visit (3 visits).
- ✓ Chiropodists/Podiatrists, Dieticians, Occupational therapists, Speech therapists, Orthoptists - €20 per visit (3 combined visits).
- ✓ Acupuncturists, Chiropractors, Osteopaths, Physical therapists, Reflexologists - €20 per visit (3 combined visits).

### Our Cancer Care Promise

- ✓ Your plan includes access to new and innovative cancer treatments which may be life-saving and life extending.
- ✓ Cover for Radiotherapy and Chemotherapy in a range of hospitals (no excess applies).
- ✓ Benefit for medical and surgical appliances<sup>3</sup> such as wigs for hair loss, post-mastectomy bra, swimsuit and surgical prosthesis following a mastectomy.

### Hospital Care

- ✓ Public hospitals – full cover.
- ✓ Private 1 & 2 hospitals<sup>2</sup>:
  - o Full cover for day care, side room, shared room
  - o Shared room rate for a private room
- ✓ Medical costs of in-patient diagnosis and tests are covered too.

### Urgent Care

- ✓ As a Vhi customer you can avail of the following exclusive Vhi SwiftCare benefits:
  - o 100% cover for your initial consultation (subject to an excess of €50 per visit)
  - o Follow-up treatment for minor injuries after this consultation for x-rays, tests and medical aids. We pay 50% of the total cost and the maximum you will pay is €100.

### Wellness & Prevention

- ✓ Your plan includes cover every 24 months for our health screening programme which is tailored to your stage in life, to help you identify health risks early:
  - Lifestage screening of up to €110 per screen in a Vhi Medical Centre.

### Mental Health

- ✓ In-patient mental health treatment for up to 100 days.
- ✓ 91 days in-patient treatment for alcoholism, drug or other substance abuse in any five-year period.

### Overseas Cover

- ✓ Cover up to €65,000 for medical emergency treatment in a hospital.
- ✓ 24 hour emergency telephone service.

### Vhi Hospital @Home

- ✓ Full cover for certain treatments carried out in the comfort of your own home<sup>4</sup>.



### Where am I covered?

- ✓ You are covered in facilities listed in your Directory of Hospitals (and Treatment Centres) which are located on the island of Ireland. For a list of facilities covered go to **Vhi.ie/facilityfinder**



### What are my obligations?

- You are required to make any payments within the required or agreed time and to provide any documents or information which we request.
- You are required to declare all material facts, to act honestly and within the terms of contract or agreement.



### When and how do I pay?

You must pay your premium when it becomes due for the duration of your policy. The subscriber/policyholder is responsible for ensuring all payments are made. If you are paying by cheque or credit card, you are required to pay the entire premium due for the insured period within 14 days of receiving an invoice. If you wish to pay on a monthly basis, you must be signed up for direct debit and pay in line with your payment schedule. If you are paying by salary deduction your premium will be deducted by your employer from your salary. All premiums owed must be paid within the policy term.



### When does the cover start and end?

Your policy will last for one year unless we agree to a shorter period. The policy start and end dates are shown on your policy document.



### How do I cancel the contract?

You can cancel your policy within 14 days of receipt of your Membership Certificate. The 14 day period starts 2 days after the issue date of your Membership Certificate or in the event of a policy renewal, within 14 days of the renewal date.