Table of Benefits - Plan B Option

Applicable to new registrations or renewals on/or after 1st February, 2011.

This Table of Benefits must be read in conjunction with your Plans A-E and Plans A-C Option Rules – Terms and Conditions, including the Directory of Hospitals (and Treatment Centres) and the Directory of approved MRI Centres.

	Benefit Provision	Benefit Limit
	Section 1 - Hospital charges in participating hospitals	% of hospital charges
Α	Public hospitals	
	Day care & side room	Full cover
	Semi-private accommodation	Full cover
	Private accommodation	Full cover
В	Private hospitals and treatment centres	
	Group 1 (other than for certain investigations & treatments referred to in Section 1c)	
	Day care & side room	Full cover
	Semi-private accommodation	Full cover
	Private accommodation	Semi-private rate, 100% of technical charges
	Radiotherapy (day care & out-patient)	Full cover
	Hospital excess (per claim - except maternity & certain cancer treatments)	Nil
	Group 2 (other than for certain investigations & treatments referred to in Section 1c)	
	Day care & side room	Full cover
	Semi-private accommodation	55%
	Private accommodation	35%
	Radiotherapy (day care & out-patient)	Full cover
	Hospital excess (per claim - except maternity & certain cancer treatments)	Nil
С	Certain investigations and treatments – herein referred to as Fixed Price Procedures (FPPs) (contact us if you have a question as to whether a procedure falls within this category)	
	Blackrock Clinic, Mater Private Hospital, Hermitage Medical Clinic, Beacon Hospital & Galway Clinic– cardiac FPPs	Full cover
	Blackrock Clinic, Mater Private Hospital, Hermitage Medical Clinic, Beacon Hospital & Galway Clinic – non cardiac FPPs	90%
	Hospital excess (per claim)	Nil
	Section 2 - Consultants' fees/GP procedures	
Α	In-patient treatment, Day-care procedures, Side room procedures & Out-patient procedures	
	Participating consultant	

Denotes benefit changes

Plan B Option

	As set out in the Vhi Healthcare Schedule of Benefits for Professional Fees	Full cover
	Non-participating consultant As set out in the Vhi Healthcare Schedule of Benefits for Professional Fees	Standard benefit
В	GP procedures	
	Participating GP As set out in the Schedule of Benefits for General Practitioners	Full cover
	Non-participating GP As set out in the Schedule of Benefits for General Practitioners	Standard benefit
	Section 3 – Psychiatric cover	
Α	In-patient psychiatric cover	
	180 days – in accordance with level of cover in admitting hospital.	Refer to Section 1
В	Day care psychiatric treatment	
	Day care psychiatric treatment for approved day care programmes	Please contact us for further details
С	In-patient treatment for alcoholism, drug or other substance abuse	
	91 in-patient days in any 5 year period, in accordance with level of cover in admitting hospital	Refer to Section 1
	Section 4 - Maternity	
Α	Hospital charges	
	Normal confinement Public hospital benefit (up to 3 days) Private hospital benefit (up to 3 days) 	Full cover Up to €3,150
	Caesarean delivery (as per hospital benefits listed)	Refer Section 1
В	Consultants' fees	
	Normal delivery fee (part payment)	Per Schedule of Benefits for Professional Fees
	Caesarean delivery fee (part payment)	Per Schedule of Benefits for Professional Fees
	 We also pay benefits towards the anaesthetist's fee for giving an epidural; consultants' fees for in-patient pathology tests; and a paediatric consultation 	Per Schedule of Benefits for Professional Fees
С	Home births	
	Medical expenses up to 3 days following the birth	Up to €3,150
	Section 5	

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Α	Convalescent care	
	For the first 14 nights only in single room accommodation	Up to €51 per night
В	Cancer care support	
	One night's accommodation up to €100, for each treatment	Up to €1,500 per calendar year
С	Vhi Healthcare approved medical and surgical appliances	
	Subject to an excess of €300 per member per year - contact us to find out whether a particular appliance is eligible for benefit	Up to €6,400 per member per year
D	Vhi Homecare	
	Agreed charges for out-patient procedures provided by Vhi Homecare in accordance with rule 6	Full cover
	Section 6 – Transport costs	
Α	Ambulance costs	Refer to rule 6 (q)
В	Taxi costs	Refer to rule 6 (q)
	Section 7 – Cover outside Ireland	
Α	Treatment outside Ireland	
	Emergency treatment abroad	Up to €100,000
	 Elective treatment abroad Surgical procedures available in Ireland (as per level of cover in Ireland) Treatment not available in Ireland * Subject to prior approval and satisfaction in full of specified criteria 	*Up to €100,000 *Up to €100,000
	Section 8	
Α	In-patient MRI scans	
	 MRI charges – in accordance with the level of cover in the admitting hospital (Refer to the Directory of approved MRI Centres) 	Refer Section 1
В	Out-patient MRI scans	
	 Category 1 - approved MRI centres Category 2 - approved MRI centres (subject to an excess of €125 per scan) 	Full cover Agreed MRI charges & Consultant Radiologists fees
С	Out-patient CT scans	
	Approved out-patient centres	Refer Section 9e
D	PET-CT scans	Refer to rule 6(t)
	Section 9 – Out-patient medical expenses	
Α	General practitioner visits	
	Per member per year	Up to €20 per visit

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В	Consultant consultations	
	Per member per year	Up to €51 per
		visit
С	Pathology - consultants' fees	
	In an approved out-patient centre	Up to €20 per referral
D	Radiology – consultants' fees for professional services	
	Per procedure	Up to €60
Е	Pathology/Radiology or other diagnostic tests (refer to Section 8 for out-patient MRI benefits)	
	Up to 50% of agreed charges in an approved out-patient centre	Up to €500 per member per year
F	Physiotherapist visits	
	Per member per year	Up to €13 per visit
G	Pre- and post-natal care	
	In the year of the birth	Up to €385
Η	Acupuncturists, Chiropractors, Osteopaths, Physical therapists, Reflexologists visits (as defined in the Rules - Terms and Conditions)	
	Up to 12 combined visits per member per year	Up to €20 per visit
	Chiropodists/Podiatrists, Dieticians, Occupational therapists, Speech therapists, Clinical Psychology visits (as defined in the Rules - Terms and Conditions)	
	Up to 12 combined visits per member per year	Up to €20 per visit
J	Public hospital out-patient A & E levy	
	Per episode of care	Up to €20
Κ	Out-patient mental health treatment	
	Mental health therapy, maximum of 12 visits per member per year, in an approved out- patient mental health centre	Up to €20 per visit
L	Eye testing	
	Per member every 24 months	Up to €20
Μ	Dental check-up	
	Per member per 12 month period (in excess of any social welfare benefit paid)	Up to €20
	Annual excess - per member per year	€250
	Annual maximum - per member per year	€4,000
	Section 10 – Child benefits	
Α	Child nursing	

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	Up to 14 days per calendar year	Up to €100 per day
в	Parent accompanying child	
	Up to 14 days per child per calendar year following a stay in excess of 3 days in hospital	Up to €40 per day
	Section 11	
Α	Vhi screening H	
	Cardiovascular risk assessment & Type 2 Diabetes screening	
	In each 24 month period in a Vhi Healthcare Medical Centre (contact us for details)	Full cover
	Colon cancer screening	
	In each 24 month period in a Vhi Healthcare Medical Centre (contact us for details)	Full cover

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