

Terms & Conditions Changes - for policies renewing from 1st November 2024

To keep you fully informed of updates that affect your policy at renewal time, the terms and conditions changes that have come into effect since your last renewal are shown below. Some of these changes will only impact you if the benefit is available on your plan. Please see your full membership handbook and Table of Cover for details of what is covered on your plan.

Handbook name	What's changing?	Previous wording	Updated wording
Health Plans Membership Handbook	Update to the Vaccinations: Travel or Flu benefit rule	<p>Section 2.1 Day-to-Day and Out-patient Benefits</p> <p>Vaccinations: Travel or Flu</p> <p>This benefit allows you to claim back some of the cost of travel vaccinations or flu vaccinations provided by a nurse or GP.</p>	<p>Section 2.1 Day-to-Day and Out-patient Benefits</p> <p>Vaccinations: Travel or Flu</p> <p>This benefit allows you to claim back some of the cost of travel vaccinations or flu vaccinations provided by a nurse, GP or pharmacy.</p>
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to the definition of Hazardous sports	<p>Section 11 Definitions</p> <p>Hazardous sports</p> <p>Any dangerous sporting activity including, but not limited to: hunting, shooting, mountaineering, rock climbing, motor sports including motor cycle sport, quad-biking, aviation other than as a fare paying passenger, ballooning, bungee jumping, hang gliding, microlighting, parachuting, paragliding or parasailing, potholing or caving, power boat racing, water rafting, competitive yachting or sailing, bobsleighbing, off-piste skiing, competitive canoeing or kayaking, boxing, wrestling, karate, judo or martial arts, scuba diving, any professional sporting activity, or extreme sports such as free diving, base jumping and ice climbing.</p>	<p>Section 11 Definitions</p> <p>Hazardous sports</p> <p>Any dangerous sporting activity including, but not limited to: hunting, shooting, mountaineering, trekking over 3,000 metres altitude, rock climbing, motor sports including motor cycle sport, quad-biking, aviation other than as a fare paying passenger, ballooning, bungee jumping, hang gliding, microlighting, parachuting, paragliding or parasailing (other than parasailing over water), potholing or caving, power boat racing, water rafting, competitive yachting or sailing, bobsleighbing, off-piste skiing, competitive canoeing or kayaking, boxing, wrestling, karate, judo or martial arts, scuba diving to a depth over 30 metres (cover applies up to 30 metres depth if you hold a certificate of proficiency or you are diving with a qualified instructor), any professional sporting activity, or extreme sports such as free diving, base jumping and ice climbing.</p>

Handbook name	What's changing?	Previous wording	Updated wording
Health Plans Membership Handbook	Update to the Elective Overseas Referral wording	<p>Section 2.5 Overseas Benefits</p> <p>Elective Overseas Referral</p> <p>Benefit abroad for surgical procedures that are available in Ireland</p> <p>Under this benefit we will cover the following:</p> <ul style="list-style-type: none"> > Hospital costs: We will cover your hospital costs in a medical facility abroad up to the amount that would be covered under your In-patient Benefits (Please refer to the Elective Overseas section on your Table of Cover) if you were to be admitted to a medical facility in Ireland to have the surgical procedure performed. Our medical advisers will base their assessment on the hospital costs that would be covered in the medical facility in Ireland, which, in their opinion, would have been most suitable for you. > Consultant's fees: Consultants practicing overseas are treated as standard rate consultants. Under this benefit Irish Life Health will cover your consultant's fees to the same level as would be covered under your plan if you were treated by a standard rate consultant whilst admitted to a medical facility in Ireland to receive your surgical procedure. Please see section 2.2 of this Membership Handbook for information on how the professional fees of standard rate consultants are covered. <p>Benefit abroad for surgical procedures that are not available in Ireland</p> <p>Under this benefit we will cover the following:</p> <ul style="list-style-type: none"> > Hospital costs: We will cover your hospital costs in a medical facility abroad up to the amount that would be covered under your In-patient Benefits (Please refer to the Elective Overseas section on your Table of Cover) if you were to be admitted to a medical facility in Ireland to receive the most similar surgical procedure available in Ireland. Our medical advisers will base their assessment on the hospital costs that would be covered in the medical facility in Ireland, which, in their opinion, would have been most suitable for you. > Consultant's fees: Consultants practicing overseas are treated as standard rate consultants. Under this benefit Irish Life Health will cover your consultant's fees to the same level as would have been covered under your plan if you were treated by a standard rate consultant whilst admitted to a medical facility in Ireland to receive your surgical procedure. Please see section 2.2 of this Membership Handbook for information on how the professional fees of standard rate consultants are covered. 	<p>Section 2.5 Overseas Benefits</p> <p>Elective Overseas Referral</p> <p>Benefit abroad for surgical procedures that are available in Ireland</p> <p>Under this benefit we will cover the following:</p> <ul style="list-style-type: none"> > Hospital costs: We will cover your hospital costs in a medical facility abroad up to the amount that would be covered under your In-patient Benefits (Please refer to the Elective Overseas section on your Table of Cover) if you were to be admitted to a medical facility in Ireland to have the surgical procedure performed. Our medical advisers will base their assessment on the hospital costs that would be covered in the medical facility in Ireland, which, in their opinion, would have been most suitable for you. > Consultant's fees: Under this benefit Irish Life Health will cover your consultant's fees to the same level as would be covered under your plan if you were treated by a participating consultant whilst admitted to a medical facility in Ireland to receive your surgical procedure. Please see section 2.2 of this Membership Handbook for information on how the professional fees of participating consultants are covered. <p>Benefit abroad for surgical procedures that are not available in Ireland</p> <p>Under this benefit we will cover the following:</p> <ul style="list-style-type: none"> > Hospital costs: We will cover your hospital costs in a medical facility abroad up to the amount that would be covered under your In-patient Benefits (Please refer to the Elective Overseas section on your Table of Cover) if you were to be admitted to a medical facility in Ireland to receive the most similar surgical procedure available in Ireland. Our medical advisers will base their assessment on the hospital costs that would be covered in the medical facility in Ireland, which, in their opinion, would have been most suitable for you. > Consultant's fees: Under this benefit Irish Life Health will cover your consultant's fees to the same level as would have been covered under your plan if you were treated by a participating consultant whilst admitted to a medical facility in Ireland to receive your surgical procedure. Please see section 2.2 of this Membership Handbook for information on how the professional fees of participating consultants are covered.

Handbook name	What's changing?	Previous wording	Updated wording
Tailored Health Plans Membership Handbook	Update to the Elective Overseas Referral wording	<p>2.6 Overseas Benefits</p> <p>Elective treatment abroad - up to the amount that would have been paid in Ireland</p> <p>Overseas Surgical Procedures Which Are Available In Ireland</p> <p>If you are covered for a medically necessary surgical procedure in Ireland we will cover you for the equivalent eligible medical costs abroad. If the treatment you require is available in Ireland but is not listed in the Schedule of Benefits we will not cover the treatment overseas.</p> <p>Overseas Surgical Procedures Which Are Not Available In Ireland</p> <p>If the surgical procedure you require has been deemed medically necessary for you but is not currently available in Ireland, we also provide cover for new medically proven and certified surgical procedures overseas. To qualify for this type of treatment you must be covered under your plan for surgical treatment for the same condition in Ireland and your treatment must meet the conditions listed here.</p> <p>The proposed Overseas Surgical Treatment:</p> <ul style="list-style-type: none"> > Must be for a condition for which the treatment is normally available in Ireland but where the specific surgical procedure needed is not. > Must not be controlled by a national register of waiting lists for transplants or other complex procedures. <p>Irish Life Health's medical advisors must agree:</p> <ul style="list-style-type: none"> > That the same clinical procedure can't be performed in Ireland. > That the proposed surgical procedure is medically proven to be a more effective method of treatment than the alternative surgical procedures available in Ireland. > That there is a reasonable prognosis if the procedure is carried out. <p>We will cover you for the same hospital costs for which you would be covered to have your procedure carried out in Ireland. Where your procedure is not available in Ireland we will cover the amount that would have been covered for the most similar surgical procedure to of treat the same condition(s) in Ireland.</p> <p>Our medical advisers will determine which medical facility in Ireland should be used as a basis to determine your level of cover. Our medical advisors will also determine the consultants' fees that would have been covered in Ireland by reference to the most equivalent or similar procedures in the Schedule of Benefits. All consultants practicing overseas are treated as standard rate consultants. We will cover your consultant's fees to the same level as would be covered if you were treated by a standard rate consultant in Ireland. Please see section 2.2 of this Membership Handbook for information on how the professional fees of standard rate consultants are covered.</p>	<p>2.6 Overseas Benefits</p> <p>Elective treatment abroad - up to the amount that would have been paid in Ireland / Elective Overseas Referral</p> <p>Overseas Surgical Procedures Which Are Available In Ireland/Benefit abroad for surgical procedures that are available in Ireland</p> <p>If you are covered for a medically necessary surgical procedure in Ireland we will cover you for the equivalent eligible medical costs abroad. If the treatment you require is available in Ireland but is not listed in the Schedule of Benefits we will not cover the treatment overseas.</p> <p>Overseas Surgical Procedures Which Are Not Available In Ireland /Benefit abroad for surgical procedures that are not available in Ireland</p> <p>If the surgical procedure you require has been deemed medically necessary for you but is not currently available in Ireland, we also provide cover for new medically proven and certified surgical procedures overseas. To qualify for this type of treatment you must be covered under your plan for surgical treatment for the same condition in Ireland and your treatment must meet the conditions listed here.</p> <p>The proposed Overseas Surgical Treatment:</p> <ul style="list-style-type: none"> > Must be for a condition for which the treatment is normally available in Ireland but where the specific surgical procedure needed is not. > Must not be controlled by a national register of waiting lists for transplants or other complex procedures. <p>Irish Life Health's medical advisors must agree:</p> <ul style="list-style-type: none"> > That the same clinical procedure can't be performed in Ireland. > That the proposed surgical procedure is medically proven to be a more effective method of treatment than the alternative surgical procedures available in Ireland. > That there is a reasonable prognosis if the procedure is carried out. <p>We will cover you for the same hospital costs for which you would be covered to have your procedure carried out in Ireland. Where your procedure is not available in Ireland we will cover the amount that would have been covered for the most similar surgical procedure to of treat the same condition(s) in Ireland.</p> <p>Our medical advisers will determine which medical facility in Ireland should be used as a basis to determine your level of cover. Our medical advisors will also determine the consultants' fees that would have been covered in Ireland by reference to the most equivalent or similar procedures in the Schedule of Benefits. We will cover your consultant's fees to the same level as would be covered if you were treated by a participating consultant in Ireland. Please see section 2.2 of this Membership Handbook for information on how the professional fees of participating consultants are covered.</p>

Handbook name	What's changing?	Previous wording	Updated wording
Tailored Health Plans Membership Handbook	Update to the Elective Overseas Referral wording (Continued)	<p>Our medical advisors will base their assessment of the amount that will be covered on the information you provide in your Overseas Pre-Approval Form. In some cases your benefit may not cover all your medical costs and you will need to pay such costs yourself. We will confirm the amount that we will cover when we pre-authorise your procedure. This decision is final. We will not re-evaluate our decision or the amount that will be covered by us unless we have requested further information.</p> <p>If there are any unforeseen medical costs arising in relation to additional medically necessary treatment from the same episode of care, we will cover you for an amount up to the same amount of the costs that would have arisen and for which you would be covered for in Ireland. Please check your Table of Cover to see what level of cover is provided.</p> <p>Irish Life Health will not contribute to the cost of getting a written medical opinion from your consultant or to any costs incurred in travelling abroad for treatment or travelling home following the treatment.</p> <p>Please note that the following conditions apply to this benefit:</p> <ul style="list-style-type: none"> > The surgical procedure must be performed within 31 days from when you leave Ireland; > You must have been referred for the surgical procedure abroad by a participating consultant in Ireland or through the International Second Opinion Service benefit, if applicable; > The surgical procedure must be performed before your pre-authorisation expires. Your pre-authorisation will end either 6 months from when it is granted, or at the end of the policy year whichever is sooner; > The surgical procedure must be medically necessary and our medical advisers must agree that the surgical procedure will result in a reasonable medical prognosis; > The proposed surgical procedure you require abroad must be related to and have the same objective as a procedure or treatment that you are covered for in Ireland; and > The surgical procedure or, where the surgical procedure is not available in Ireland, the most similar surgical procedure available in Ireland, must not be controlled by a national register of waiting lists for transplants or other complex procedures. 	<p>Our medical advisors will base their assessment of the amount that will be covered on the information you provide in your Overseas Pre-Approval Form. In some cases your benefit may not cover all your medical costs and you will need to pay such costs yourself. We will confirm the amount that we will cover when we pre-authorise your procedure. This decision is final. We will not re-evaluate our decision or the amount that will be covered by us unless we have requested further information.</p> <p>If there are any unforeseen medical costs arising in relation to additional medically necessary treatment from the same episode of care, we will cover you for an amount up to the same amount of the costs that would have arisen and for which you would be covered for in Ireland. Please check your Table of Cover to see what level of cover is provided.</p> <p>Irish Life Health will not contribute to the cost of getting a written medical opinion from your consultant or to any costs incurred in travelling abroad for treatment or travelling home following the treatment.</p> <p>Please note that the following conditions apply to this benefit:</p> <ul style="list-style-type: none"> > The surgical procedure must be performed or treatment must commence within 31 days from when you leave Ireland; > You must have been referred for the surgical procedure abroad by a participating consultant in Ireland or through the International Second Opinion Service benefit, if applicable; > The surgical procedure must be performed before your pre-authorisation expires. Your pre-authorisation will end either 6 months from when it is granted, or at the end of the policy year whichever is sooner; > The surgical procedure must be medically necessary and our medical advisers must agree that the surgical procedure will result in a reasonable medical prognosis; > The proposed surgical procedure you require abroad must be related to and have the same objective as a procedure or treatment that you are covered for in Ireland; and > The surgical procedure or, where the surgical procedure is not available in Ireland, the most similar surgical procedure available in Ireland, must not be controlled by a national register of waiting lists for transplants or other complex procedures.
Health Plans Membership Handbook	Update to the exclusions wording	<p>Section 3 Exclusions from Your Cover</p> <ul style="list-style-type: none"> > The cost of health screening except where the costs are covered under our health screening benefit, sexual health screening, health screening at any centre benefit or where a contribution is available on health screening under our Irish Life Health Member Benefits; 	<p>Section 3 Exclusions from Your Cover</p> <ul style="list-style-type: none"> > The cost of health screening except where the costs are covered under our health screening benefit, sexual health screening, at home health testing benefit, executive health screen benefit, health screening and allergy testing benefit, health screening at any centre benefit or where a contribution is available on health screening under our Irish Life Health Member Benefits;

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Tailored Health Plans Membership Handbook	Update to the exclusions wording	<p>Section 3 Exclusions from Your Cover</p> <p>> The cost of health screening except where the costs are covered under our health screen and allergy testing benefit, sexual health screening benefit or where a contribution is available on health screening under our Irish Life Health Member Benefits;</p>	<p>Section 3 Exclusions from Your Cover</p> <p>> The cost of health screening except where the costs are covered under our health screen benefit, health screen and allergy testing benefit, sexual health screening benefit, at home health testing benefit or where a contribution is available on health screening under our Irish Life Health Member Benefits;</p>
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to the Digital Doctor benefit	<p>Digital Doctor</p> <p>This benefit gives you unlimited consultations with Irish based GPs. Service provided by Centric Health Ltd**. You can speak to a GP anytime day or night over the phone, or if you would prefer a face to face consultation, the online video service is available 08:00 to 22:00, 7 days a week (excluding Christmas Day). If necessary, through this service GPs can also arrange to have a prescription sent to your local pharmacy following your consultation. Prescriptions can be sent 08:00 to 22:00, 7 days a week (excluding Christmas Day). Outside these times, the prescription will be sent the next working day. This service is not suitable for emergencies or urgent conditions as this may delay your treatment. Where a member is under the age of 18, it is necessary for their legal guardian to be present during the consultation. This service is not intended to replace your usual GP, it is designed for episodic, once-off conditions and not for ongoing care. Centric Health Ltd** may offer additional follow on services after a Digital Doctor consultation but these services are not covered under the Digital Doctor benefit.</p>	<p>Digital Doctor</p> <p>This benefit gives you 24/7 online access to doctor-led services.</p> <p>Message A Doctor</p> <p>You can message a Doctor about a non-emergency medical query anytime via MyClinic in your online account. This service is advice only and is not designed to provide a diagnosis, treatment, or prescriptions. This service is provided by Abi Global**.</p> <p>Online Prescriptions</p> <p>This service gives you access to prescriptions for a defined list of medications subject to a clinical suitability assessment via MyClinic in your online account. The prescription will be transmitted electronically to your preferred pharmacy. This service is not designed for ongoing/repeat prescriptions. This service is provided by Abi Global**.</p> <p>Book an Appointment</p> <p>You can book an appointment to speak with a GP by phone or video call via MyClinic in your online account. This service is not suitable for emergencies or urgent conditions as this may delay your treatment. This service is not intended to replace your usual GP, it is designed for episodic, once-off conditions and not for on-going care. This service is provided by Centric Health Ltd**. On the treating GP's recommendation, Centric Health Ltd ** may offer an in-person follow on consultation at selected Centric Health practices. This service is primarily intended for those who do not have an existing GP or can't access their own GP. These consultations are not covered under the Digital Doctor benefit. If you have GP cover on your plan, you may be able to claim back all or part of the cost by uploading your receipt on your online account.</p> <p>For further information on Digital Doctor including hours of operation and the defined list of medications please see https://www.irishlifehealth.ie/benefits/digital-doctor-benefit</p> <p>All Digital Doctor services are subject to availability. Where a member is under the age of 18, it is necessary for their legal guardian to be present during the consultation.</p>

Handbook name	What's changing?	Previous wording	Updated wording
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to Care-Connect benefit wording	<p>Section 2.4 Other Benefits</p> <p>Care Connect</p> <p>Under this benefit you can access specified health programmes provided by our provider partner Care-Connect*, as set out in the List of Care Connect health programmes, where you have been diagnosed with certain medical conditions. This benefit includes specialist case management, remote health monitoring and where appropriate, treatment interventions as required. Your GP or consultant must approve your suitability to receive these services at home. You must also meet the specified clinical indicators as set out in the List of Care Connect health programmes available at https://www.irishlifehealth.ie/privacy-and-legal/schedule-of-benefits, including any age restrictions that may apply.</p> <p>This benefit is available wherever Care-Connect* can provide the service and where the requirements can be met on hardware and connectivity by the Irish Life Health member. Access and eligibility for the programme must be preauthorised and is subject to Care-Connect's* terms and conditions.</p>	<p>Section 2.4 Other Benefits</p> <p>Care Connect</p> <p>Under this benefit you can access specified health programmes provided by our provider partner Care-Connect*, as set out in the List of Care Connect health programmes, where you have been diagnosed with certain medical conditions. This benefit includes specialist case management, remote health monitoring and where appropriate, treatment interventions as required. Your GP or consultant must approve your suitability to receive these services at home. You must also meet the specified clinical indicators as set out in the List of Care Connect health programmes available at https://www.irishlifehealth.ie/privacy-and-legal/schedule-of-benefits, including any age restrictions that may apply.</p> <p>This benefit is available wherever Care-Connect* can provide the service and where the requirements can be met on hardware and connectivity by the Irish Life Health member. Access and eligibility for the programme must be pre-authorised and is subject to Care-Connect's* terms and conditions. To participate in this service, we will review your past and current health insurance claims to help us understand the impact and cost effectiveness of the programme.</p>
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to our terms and conditions	<p>Section 5. General Terms and Conditions</p> <p>Irish Life Health and our agents reserve the right to review any information which relates to the medical care, goods or services that you are claiming for (including your medical records) where we are of the opinion that access to such information is required to process your claim, detect or prevent fraud. You must provide your medical facility and health care providers with any consents which they require to allow them to release such information to Irish Life Health and our agents. We will not pay your claim where we are unable to gain access to any information which we believe is necessary to enable us to process the claim or detect fraud</p>	<p>Section 5. General Terms and Conditions</p> <p>Irish Life Health and our agents reserve the right to review any information which relates to the medical care, goods or services that you are claiming for (including your medical records) where we are of the opinion that access to such information is required to process your claim, detect or prevent fraud and to make you aware of services that may be relevant to you. You must provide your medical facility and health care providers with any consents which they require to allow them to release such information to Irish Life Health and our agents. We will not pay your claim where we are unable to gain access to any information which we believe is necessary to enable us to process the claim or detect fraud</p>

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Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to Out-patient A&E abroad benefit	<p>Out-patient A&E abroad</p> <p>Under this benefit you can claim a contribution from us towards the cost of the following emergency care where you receive it as an out-patient whilst you are abroad:</p> <ul style="list-style-type: none"> > Emergency room/department fees > GP visits > Consultant visits > Prescription drugs > Radiology and pathology fees > Cost of one ambulance journey to a hospital or clinic for treatment > Emergency dental treatment required as the result of an accident. (Please refer to section 2.1 for further terms and conditions of Emergency Dental Care.) <p>To avail of this benefit, the costs being claimed must have been incurred outside of Ireland on a pre-booked temporary stay abroad of not more than 31 days in duration and must have been incurred as a result of emergency care. The maximum amount that Irish Life Health will contribute under this benefit is set out in your Table of Cover.</p> <p>Non-medical expenses (e.g. phone calls, transport costs, miscellaneous expenses etc.) are not covered under this benefit. Your out-patient excess does not apply to this benefit.</p>	<p>Out-patient A&E abroad</p> <p>Under this benefit you can claim a contribution from us towards the cost of the following emergency care where you receive it as an out-patient whilst you are abroad:</p> <ul style="list-style-type: none"> > Emergency room/department fees > GP visits > Consultant visits > Prescription drugs > Pathology fees > Radiology fees (i.e. X-Rays, mammograms and non-maternity ultrasounds) > Cost of one ambulance journey to a hospital or clinic for treatment > Emergency dental treatment required as the result of an accident. (Please refer to section 2.1 for further terms and conditions of Emergency Dental Care.) <p>To avail of this benefit, the costs being claimed must have been incurred outside of Ireland on a pre-booked temporary stay abroad of not more than 31 days in duration and must have been incurred as a result of emergency care. The maximum amount that Irish Life Health will contribute under this benefit is set out in your Table of Cover.</p> <p>Non-medical expenses (e.g. phone calls, transport costs, miscellaneous expenses etc.) are not covered under this benefit. Your out-patient excess does not apply to this benefit.</p>
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to podiatrist practitioner requirements	<p>Podiatrist</p> <p>A member of one of the following Societies:</p> <ul style="list-style-type: none"> > The Society for Chiropodists/Podiatrists > Society of Chiropodists and Podiatrists in Ireland > Institute of Chiropodists and Podiatrists in Ireland > Irish branch of the British Chiropody and Podiatry Association > The Irish Chiropodists/Podiatrists Organisation Ltd. 	<p>Podiatrist</p> <p>A podiatry professional registered with CORU (Health & Social Care Professionals Council).</p>
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to chiropodist practitioner requirements	<p>Chiropodist</p> <p>A member of one of the following Societies:</p> <ul style="list-style-type: none"> > The Society for Chiropodists/Podiatrists > Society of Chiropodists and Podiatrists in Ireland > Institute of Chiropodists and Podiatrists in Ireland > Irish branch of the British Chiropody and Podiatry Association > The Irish Chiropodists/Podiatrists Organisation Ltd. 	<p>Chiropodist</p> <p>A chiropody professional registered with CORU (Health & Social Care Professionals Council).</p>

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Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to Cooling off wording	Cooling Off You can cancel your policy free of charge within 14 days from the date the policy was entered into or from the date you are given the policy documentation, whichever is the later. This is known as the cooling off period. We'll give you a full refund of premium unless you or any member has made a claim during this period.	Cooling Off You can cancel your policy free of charge within 14 working days from the date the policy was entered into or from the date you are given the policy documentation, whichever is the later. This is known as the cooling off period. We'll give you a full refund of premium unless you or any member has made a claim during this period.
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to Minor Injury Clinic Benefit	Minor Injury Clinic Cover (Pay & Claim) This benefit allows you to claim back some of the charge imposed when you attend an approved pay and claim minor injury clinic. An age restriction for minors may apply to the clinic's services, please check with the Minor Injury Clinic centre in advance of travelling. You can find the most current list of minor injury clinics covered on our website www.irishlifehealth.ie/hospital-lists	Minor Injury Clinic Cover (Pay & Claim) This benefit allows you to claim back some of the charge imposed when you attend an approved pay and claim minor injury clinic. We will contribute up to the amount detailed on your Table of Cover towards initial consultation and, if deemed necessary the following treatments related to the initial consultation: x-ray, stitching, full cast, temporary cast, splints and crutches. We will not cover the charge for the following take home aids, boots and/or braces. An age restriction for minors may apply to the clinic's services, please check with the Minor Injury Clinic centre in advance of travelling. You can find the most current list of minor injury clinics covered on our website www.irishlifehealth.ie/hospital-lists
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to Optical benefit	Optical (eye test and/or glasses/lenses combined) This benefit allows you to claim back some of the costs of an eye test and glasses/lenses (including contact lenses) provided by a qualified optician, orthoptist, optometrist* or an ophthalmologist	Optical (eye test and/or glasses/lenses combined) This benefit allows you to claim back some of the costs of an eye test and glasses/lenses (including contact lenses) prescribed and dispensed by a qualified optician, orthoptist, optometrist* or an ophthalmologist
Tailored Health Plans Membership Handbook	Update to Optical benefit	Optical - Glasses/Contact Lenses This benefit allows you to claim back some of the costs of glasses/lenses (including contact lenses) provided by a qualified optician or optometrist.	Optical - Glasses/Contact Lenses This benefit allows you to claim back some of the costs of glasses/lenses (including contact lenses) prescribed and dispensed by a qualified optician or optometrist.
Tailored Health Plans Membership Handbook	Update to Optical benefit	Dental & Optical This benefit allows you to claim back some of the costs of an eye test and glasses/lenses provided by a qualified optician, orthoptist, optometrist or an ophthalmologist. We will also contribute towards the costs of attending a dentist.	Dental & Optical This benefit allows you to claim back some of the costs of an eye test and glasses/lenses prescribed and dispensed by a qualified optician, orthoptist, optometrist or an ophthalmologist. We will also contribute towards the costs of attending a dentist.

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Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to Mindfulness app subscription benefit	<p>Day-to-Day Benefits and Out-patient Benefits</p> <p>Mindfulness app subscription</p> <p>Under this benefit you can claim a contribution from us towards the cost of an annual subscription to the HEADSPACE mindfulness app or to the MyLife (formerly Stop, Breathe and Think) app.</p>	<p>Day-to-Day Benefits and Out-patient Benefits</p> <p>Mindfulness app subscription</p> <p>Under this benefit you can claim a contribution from us towards the cost of an annual subscription to the HEADSPACE** mindfulness app.</p>
Tailored Health Plans Membership Handbook	Update to Mindfulness app subscription benefit	<p>Section 2.5 Personalised Packages - Study in Ireland</p> <p>Student Cover Package</p> <p>Mindfulness app subscription</p> <p>Under this benefit you can claim a contribution from us towards the cost of an annual subscription to the HEADSPACE mindfulness app or to the MyLife (formerly Stop, Breathe and Think) app.</p>	<p>Section 2.5 Personalised Packages - Study in Ireland</p> <p>Student Cover Package</p> <p>Mindfulness app subscription</p> <p>Under this benefit you can claim a contribution from us towards the cost of an annual subscription to the HEADSPACE mindfulness app.</p>
Tailored Health Plans Membership Handbook	Update to Mindfulness app subscription benefit	<p>Section 2.5 Personalised Packages - Range of 8 Extras</p> <p>Mind Extra</p> <p>Mindfulness app subscription</p> <p>Under this benefit you can claim a contribution from us towards the cost of an annual subscription to the HEADSPACE mindfulness app or to the MyLife (formerly Stop, Breathe and Think) app.</p>	<p>Section 2.5 Personalised Packages - Range of 8 Extras</p> <p>Mind Extra</p> <p>Mindfulness app subscription</p> <p>Under this benefit you can claim a contribution from us towards the cost of an annual subscription to the HEADSPACE mindfulness app.</p>
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to Co-Payment Information	<p>Co-payment for certain procedures</p> <p>A co-payment is a large excess and is an amount that must be paid by you. You will need to make a co-payment for any of the orthopaedic procedures specified in the List of Orthopaedic Procedures Subject to Co-Payment and/or for any of the cardiac procedures specified in the List of Cardiac Procedures Subject to Co-Payment where such orthopaedic and/or cardiac procedures are carried out in a high-tech or private hospital. Co-payments may apply in addition to any other shortfall or excess on your plan. This will be displayed on your Table of Cover.</p>	<p>Co-payment for certain procedures</p> <p>A co-payment is a large excess and is an amount that must be paid by you. You will need to make a co-payment for any of the orthopaedic procedures specified in the List of Orthopaedic Procedures Subject to Co-Payment, for any of the cardiac procedures specified in the List of Cardiac Procedures Subject to Co-Payment and/or for any of the ophthalmic procedures specified in the List of Ophthalmic Procedures Subject to Co-Payment where such orthopaedic, cardiac and/or ophthalmic procedures are carried out in a high-tech or private hospital. Co-payments may apply in addition to any other shortfall or excess on your plan. This will be displayed on your Table of Cover.</p>

Handbook name	What's changing?	Previous wording	Updated wording
Tailored Health Plans Membership Handbook	Handbook updates to include addition of Travel Focus personalised pack which is available to choose at renewal on: <ul style="list-style-type: none"> > MyPlan 150 > MyPlan 150 Day to Day > MyPlan 350 > MyPlan 350 Day to Day > MyPlan 500 > MyPlan 500 Day to Day 	n/a	<p>Section 2.5 - Personalised Packages</p> <p>Travel Focus</p> <p>Additional costs arising from in-patient claim</p> <p>Under this benefit you can claim a contribution from us towards the following expenses where they arise as a result of you missing your return travel to Ireland because it was medically necessary for you to receive in-patient emergency care abroad:</p> <ul style="list-style-type: none"> > The cost of reasonable alternative economy class travel to Ireland; and > The cost of additional reasonable alternative accommodation until you are deemed fit to travel by your treating health care provider. <p>This benefit can only be claimed against the cost of your travel and accommodation which you will need to arrange yourself. It is not available for the travel and accommodation costs of your companion. This benefit only covers the additional costs incurred by you as a result of you receiving emergency in-patient care. If you are entitled to any refund on the costs of your original transport or accommodation you must claim the refund before submitting your claim to us. The refunded amount will be deducted from the costs that will be covered by us. Evidence of the refund should be submitted with your claim. The maximum amount that Irish Life Health will contribute under this benefit is set out in your Table of Cover. This benefit can only be claimed in conjunction with our hospital bill for in-patient treatment benefit.</p>
Tailored Health Plans Membership Handbook	Handbook updates to include addition of Travel Focus personalised pack which is available to choose at renewal on: <ul style="list-style-type: none"> > MyPlan 150 > MyPlan 150 Day to Day > MyPlan 350 > MyPlan 350 Day to Day > MyPlan 500 > MyPlan 500 Day to Day 	n/a	<p>Section 2.5 - Personalised Packages</p> <p>Travel Focus</p> <p>Additional costs arising from out-patient claim</p> <p>Additional costs arising from out-patient claim</p> <p>Under this benefit you can claim a contribution from us towards the following expenses where they arise as a result of you missing your return travel to Ireland because it was medically necessary for you to receive out-patient emergency care abroad:</p> <ul style="list-style-type: none"> > The cost of reasonable alternative economy class travel to Ireland; and > The cost of additional reasonable alternative accommodation until you are deemed fit to travel by your treating health care provider.

Handbook name	What's changing?	Previous wording	Updated wording
Tailored Health Plans Membership Handbook	Handbook updates to include addition of Travel Focus personalised pack which is available to choose at renewal on: <ul style="list-style-type: none"> > MyPlan 150 > MyPlan 150 Day to Day > MyPlan 350 > MyPlan 350 Day to Day > MyPlan 500 > MyPlan 500 Day to Day 	n/a	<p>Section 2.5 - Personalised Packages</p> <p>Travel Focus</p> <p>Out-patient A&E abroad</p> <p>Under this benefit you can claim a contribution from us towards the cost of the following emergency care where you receive it as an out-patient whilst you are abroad: Emergency room/department fees, GP visits, Consultant visits, prescription drugs, pathology fees, radiology fees (i.e. X-rays, mammograms and non-maternity ultrasounds), cost of one ambulance journey to a hospital or clinic for treatment and emergency dental treatment required as the result of an accident (please refer to section 2.1 for further, terms and conditions of Emergency Dental Care).</p> <p>To avail of this benefit, the costs being claimed must have been incurred outside of Ireland on a prebooked temporary stay abroad of not more than 31 days in duration and must have been incurred as a result of emergency care. The maximum amount that Irish Life Health will contribute under this benefit is set out in your Table of Cover. Non-medical expenses (e.g. phone calls, transport costs, miscellaneous expenses etc.) are not covered under this benefit. Your out-patient excess does not apply to this benefit.</p>
Tailored Health Plans Membership Handbook	Handbook updates to include addition of Travel Focus personalised pack which is available to choose at renewal on: <ul style="list-style-type: none"> > MyPlan 150 > MyPlan 150 Day to Day > MyPlan 350 > MyPlan 350 Day to Day > MyPlan 500 > MyPlan 500 Day to Day 	n/a	<p>Section 2.5 - Personalised Packages</p> <p>Travel Focus</p> <p>Prescriptions Abroad</p> <p>This benefits allows you to claim back some of the cost of your prescription abroad.</p>
Tailored Health Plans Membership Handbook	Handbook updates to include addition of Travel Focus personalised pack which is available to choose at renewal on: <ul style="list-style-type: none"> > MyPlan 150 > MyPlan 150 Day to Day > MyPlan 350 > MyPlan 350 Day to Day > MyPlan 500 > MyPlan 500 Day to Day 	n/a	<p>Section 2.5 - Personalised Packages</p> <p>Travel Focus</p> <p>Travel Vaccination</p> <p>This benefit allows you to claim back some of the cost of vaccinations provided by Executive Medical Care Ltd trading as Tropical Medical Bureau. This benefit can only be claimed once per policy year.</p>

Handbook name	What's changing?	Previous wording	Updated wording
Tailored Health Plans Membership Handbook	Handbook updates to include addition of Travel Focus personalised pack which is available to choose at renewal on: <ul style="list-style-type: none"> > MyPlan 150 > MyPlan 150 Day to Day > MyPlan 350 > MyPlan 350 Day to Day > MyPlan 500 > MyPlan 500 Day to Day 	n/a	<p>Section 2.5 - Personalised Packages</p> <p>Travel Focus</p> <p>Travel Vaccination Consultation</p> <p>Under this benefit we will contribute towards the cost of a travel vaccine consultation when provided by the Executive Medical Care Ltd trading as Tropical Medical Bureau. This benefit can only be claimed once per policy year.</p>
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to Exclusions	<ul style="list-style-type: none"> > The cost of a drug not recommended for cover by the National Centre for Pharmacoeconomics, National Cancer Control Programme or the Health Service Executive unless preapproved by us prior to treatment; > The costs of drugs where they are used for a purpose which is different from that for which they were licensed by the Health Products Regulatory Authority; 	<ul style="list-style-type: none"> > The cost of a drug not licensed for use by the European Medicines Agency (EMA); > The cost of a non-oncology drug which is not recommended for reimbursement by the National Centre for Pharmacoeconomics (NCPE) or the Health Service Executive (HSE) unless pre-approved by us prior to treatment. Certain oncology drugs** licensed by the EMA but awaiting NCPE or HSE approval may be covered but do require pre-approval by the Irish Life Health Clinical Team prior to treatment. Please contact the Irish Life Health Customer Care team to discuss any pre-approval requests you may have; > The costs of drugs where they are used for a purpose which is different from that for which they were licensed by the Health Products Regulatory Authority (HPRA) unless pre-approved by us prior to treatment;
Tailored Health Plans Membership Handbook	Update to Hospital bill for in-patient treatment overseas wording	<p>Section 2.6 Overseas Benefits</p> <p>Emergency In-patient Treatment Abroad and related benefits</p> <p>Hospital bill for in-patient treatment</p> <p>Under this benefit we will cover (up to a specified amount) your medical costs for in-patient emergency care in a medical facility abroad. To avail of this benefit, the costs being claimed must have been incurred outside of Ireland and must have been incurred as a result of emergency care which required you to stay overnight or longer in a hospital bed whilst on a pre-booked temporary stay abroad not exceeding 31 days in duration. All medical treatment claimed under this benefit must be authorised and arranged by us. Hospital costs incurred where you did not stay overnight and non-medical expenses (e.g. phone calls, transport costs, miscellaneous expenses etc.) are not covered under this benefit. Your return journey must be booked before you begin your outward journey and your temporary stay abroad must be no longer than 31 days in duration. The maximum amount that will be covered under this benefit is set out in your Table of Cover.</p>	<p>Section 2.6 Overseas Benefits</p> <p>Emergency In-patient Treatment Abroad and related benefits</p> <p>Hospital bill for in-patient treatment</p> <p>Under this benefit we will cover (up to a specified amount) your medical costs for in-patient emergency care in a medical facility abroad. To avail of this benefit, the costs being claimed must have been incurred outside of Ireland and must have been incurred as a result of emergency care which required you to stay overnight or longer in a hospital bed whilst on a pre-booked temporary stay abroad not exceeding 31 days in duration, or your emergency care abroad commenced within 31 days of birth and you have been added to an existing policy held by your legal guardian. All medical treatment claimed under this benefit must be authorised and arranged by us. Hospital costs incurred where you did not stay overnight and non-medical expenses (e.g. phone calls, transport costs, miscellaneous expenses etc.) are not covered under this benefit. Your return journey must be booked before you begin your outward journey and your temporary stay abroad must be no longer than 31 days in duration. The maximum amount that will be covered under this benefit is set out in your Table of Cover.</p>

Handbook name	What's changing?	Previous wording	Updated wording
Tailored Health Plans Membership Handbook	Update to Overseas Benefits terms and conditions	<p>Section 2.6 Overseas Benefits</p> <p>General conditions applicable to the Overseas Benefits:</p> <p>Please note the following general conditions apply to our Overseas Benefits:</p> <ul style="list-style-type: none"> > Your medical treatment abroad must be medically necessary > You must begin your medical treatment abroad within 31 days of your departure from Ireland > You must receive the emergency care in an internationally recognised hospital; > You must not have travelled against medical advice; > You must not have been suffering from a terminal illness when you left Ireland; > You must not have suspected when you left Ireland that you might require any medical care when you were abroad and a reasonable person in your position would not have suspected that you would require any medical care when you were abroad. <p>Exclusions applicable to the Overseas Benefits</p> <p>Please note that our Overseas Benefits will not apply to the following:</p> <ul style="list-style-type: none"> > medical treatment that is required in connection with: <ul style="list-style-type: none"> - a nervous, mental or psychiatric condition; - conditions and/or injuries arising from excessive alcohol consumption; - conditions and/or injuries arising from substance abuse; - conditions and/or injuries arising from deliberately injuring yourself; - conditions and/or injuries arising from your own negligence; - conditions and/or injuries arising from hazardous sports; - conditions and/or injuries arising from breaking the law; - conditions and/or injuries arising from air travel unless as a passenger on a licensed aircraft operated by a commercial airline; > Treatment that could have been delayed until your return to Ireland; > Giving birth where you travelled abroad intending to give birth abroad or it could reasonably have been expected at the time of your departure that you would give birth abroad; 	<p>Section 2.6 Overseas Benefits</p> <p>General conditions applicable to the Overseas Benefits:</p> <p>Please note the following general conditions apply to our Overseas Benefits:</p> <ul style="list-style-type: none"> > Your medical treatment abroad must be medically necessary > You must begin your medical treatment abroad within 31 days of your departure from Ireland, or your emergency care abroad commenced within 31 days of birth and you have been added to an existing policy held by your legal guardian; > You must receive the emergency care in an internationally recognised hospital; > You must not have travelled against medical advice; > You must not have been suffering from a terminal illness when you left Ireland; > You must not have suspected when you left Ireland that you might require any medical care when you were abroad and a reasonable person in your position would not have suspected that you would require any medical care when you were abroad. <p>Exclusions applicable to the Overseas Benefits:</p> <p>Please note that our Overseas Benefits will not apply to the following:</p> <ul style="list-style-type: none"> > medical treatment that is required in connection with: <ul style="list-style-type: none"> - a nervous, mental or psychiatric condition; - conditions and/or injuries arising from excessive alcohol consumption; - conditions and/or injuries arising from substance abuse; - conditions and/or injuries arising from deliberately injuring yourself; - conditions and/or injuries arising from your own negligence; - conditions and/or injuries arising from hazardous sports; - conditions and/or injuries arising from breaking the law; - conditions and/or injuries arising from air travel unless as a passenger on a licensed aircraft operated by a commercial airline; > Treatment that could have been delayed until your return to Ireland; > Giving birth where you travelled abroad intending to give birth abroad or it could reasonably have been expected at the time of your departure that you would give birth abroad; > Medical care if you have travelled abroad after 34 weeks following the commencement of your pregnancy.

Handbook name	What's changing?	Previous wording	Updated wording
Health Plans Membership Handbook	Update to Hospital bill for in-patient treatment overseas wording	<p>Section 2.5 Overseas Benefits</p> <p>Emergency Inpatient Treatment Abroad and related benefits</p> <p>Hospital bill for inpatient treatment</p> <p>Under this benefit we will cover your medical costs for emergency care in a medical facility abroad whilst on a prebooked temporary stay abroad not exceeding 31 days in duration where:</p> <ul style="list-style-type: none"> > The emergency care is medically necessary; > The emergency care is authorised and arranged by Irish Life Health; > You are required to stay overnight or longer in a hospital bed; > You began your emergency care abroad within 31 days of your departure from Ireland; > You receive the emergency care in an internationally recognised hospital; > You have not travelled against medical advice; > You were not suffering from a terminal illness when you left Ireland; and > You did not suspect when you left Ireland that you might require any medical care when you were abroad and a reasonable person in your position would not have suspected that you would require any medical care when you were abroad. <p>Your return journey must be booked before you begin your outward journey and your temporary stay abroad must be no longer than 31 days in duration. There is a maximum amount that can be claimed under this benefit on your plan. This will be shown in your Table of Cover.</p> <p>We will not cover:</p> <ul style="list-style-type: none"> > non-medical expenses; > costs incurred where you did not stay overnight in hospital > medical care that has not been authorised and arranged by us; > elective treatments or procedures or follow on care, regardless of whether this is related to your emergency care; > medical care that could be delayed until your return to Ireland. 	<p>Section 2.5 Overseas Benefits</p> <p>Emergency Inpatient Treatment Abroad and related benefits</p> <p>Hospital bill for inpatient treatment</p> <p>Under this benefit we will cover your medical costs for emergency care in a medical facility abroad whilst on a prebooked temporary stay abroad not exceeding 31 days in duration where:</p> <ul style="list-style-type: none"> > The emergency care is medically necessary; > The emergency care is authorised and arranged by Irish Life Health; > You are required to stay overnight or longer in a hospital bed; > You began your emergency care abroad within 31 days of your departure from Ireland, or your emergency care abroad commenced within 31 days of birth and you have been added to an existing policy held by your legal guardian; > You receive the emergency care in an internationally recognised hospital; > You have not travelled against medical advice; > You were not suffering from a terminal illness when you left Ireland; and > You did not suspect when you left Ireland that you might require any medical care when you were abroad and a reasonable person in your position would not have suspected that you would require any medical care when you were abroad. <p>Your return journey must be booked before you begin your outward journey and your temporary stay abroad must be no longer than 31 days in duration. There is a maximum amount that can be claimed under this benefit on your plan. This will be shown in your Table of Cover.</p> <p>We will not cover:</p> <ul style="list-style-type: none"> > non-medical expenses; > costs incurred where you did not stay overnight in hospital > medical care that has not been authorised and arranged by us; > elective treatments or procedures or follow on care, regardless of whether this is related to your emergency care; > medical care that could be delayed until your return to Ireland; > medical care if you have travelled abroad after 34 weeks following the commencement of your pregnancy.

Handbook name	What's changing?	Previous wording	Updated wording
Health Plans Membership Handbook	Update to overseas A&E terms and conditions	<p>Section 2.5 Overseas Benefits</p> <p>A&E Abroad</p> <p>Please note that our A&E Abroad benefits will not apply where your emergency care is required:</p> <ul style="list-style-type: none"> > for a nervous, mental or psychiatric condition; > for conditions and/or injuries arising from excessive alcohol consumption; > for conditions and/or injuries arising from substance abuse; > for conditions and/or injuries arising from deliberately injuring yourself; > for conditions and/or injuries arising from your own negligence; > for conditions and/or injuries arising from hazardous sports; > for conditions and/or injuries arising from breaking the law; > for conditions and/or injuries arising from air travel unless as a passenger on a licensed aircraft operated by a commercial airline; > for giving birth where you travelled abroad intending to give birth abroad or it could reasonably have been expected at the time of your departure that you would give birth abroad. 	<p>Section 2.5 Overseas Benefits</p> <p>A&E Abroad</p> <p>Please note that our A&E Abroad benefits will not apply where your emergency care is required:</p> <ul style="list-style-type: none"> > for a nervous, mental or psychiatric condition; > for conditions and/or injuries arising from excessive alcohol consumption; > for conditions and/or injuries arising from substance abuse; > for conditions and/or injuries arising from deliberately injuring yourself; > for conditions and/or injuries arising from your own negligence; > for conditions and/or injuries arising from hazardous sports; > for conditions and/or injuries arising from breaking the law; > for conditions and/or injuries arising from air travel unless as a passenger on a licensed aircraft operated by a commercial airline; > for giving birth where you travelled abroad intending to give birth abroad or it could reasonably have been expected at the time of your departure that you would give birth abroad. > if you have travelled abroad after 34 weeks following the commencement of your pregnancy.
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to the definition of Surgical procedure/surgery	<p>Section 11 Definitions</p> <p>Surgical procedure/surgery</p> <p>The treatment of disease, injury or deformity by instrumental intervention.</p>	<p>Section 11 Definitions</p> <p>Surgical procedure/surgery</p> <p>The treatment of disease, injury or deformity by structurally altering the human body by the incision or destruction of tissues.</p>

Handbook name	What's changing?	Previous wording	Updated wording
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to Child Development Benefit wording	<p>Section 2.1 Day-to-Day and Out-patient Benefits</p> <p>Child Development Benefit</p> <p>This benefit allows a child member to claim back some of the costs of a developmental / neurodevelopmental assessment carried out by a developmental specialist*. This assessment must address at least one of the following:</p> <p>Attention Deficit Hyperactivity Disorder (ADHD), Autism Spectrum Disorder, Developmental Coordination Disorder or Dyspraxia, Intellectual Disability, Learning Disability, Speech Delays or Sensory Processing Disorders.</p>	<p>Section 2.1 Day-to-Day and Out-patient Benefits</p> <p>Child Development Benefit</p> <p>This benefit allows a child member aged under 18 years to claim back some of the costs of a developmental / neurodevelopmental assessment carried out by a developmental specialist(s)*. Receipts submitted under this benefit must state they are for the relevant assessment. This benefit provides a contribution towards the assessment only. Follow up treatment is not covered under this benefit. This assessment must address at least one of the following:</p> <p>Attention Deficit Hyperactivity Disorder (ADHD), Autism Spectrum Disorder, Developmental Coordination Disorder or Dyspraxia, Intellectual Disability, Learning Disability, Speech Delays or Sensory Processing Disorders.</p> <p>The contribution provided under this benefit is for the overall assessment and not per practitioner visit.</p>
Tailored Health Plans Membership Handbook	Update to Child Development Benefit wording	<p>Section 2.5 Personalised Packages - Range of 5</p> <p>Child Development Pack</p> <p>Child Development Benefit</p> <p>This benefit allows a child member to claim back some of the costs of a developmental / neurodevelopmental assessment carried out by a developmental specialist*. This assessment must address at least one of the following:</p> <p>Attention Deficit Hyperactivity Disorder (ADHD), Autism Spectrum Disorder, Developmental Coordination Disorder or Dyspraxia, Intellectual Disability, Learning Disability, Speech Delays or Sensory Processing Disorders.</p>	<p>Section 2.5 Personalised Packages - Range of 5</p> <p>Child Development Pack</p> <p>Child Development Benefit</p> <p>This benefit allows a child member aged under 18 years to claim back some of the costs of a developmental / neurodevelopmental assessment carried out by a developmental specialist(s)*. Receipts submitted under this benefit must state they are for the relevant assessment. This benefit provides a contribution towards the assessment only. Follow up treatment is not covered under this benefit. This assessment must address at least one of the following:</p> <p>Attention Deficit Hyperactivity Disorder (ADHD), Autism Spectrum Disorder, Developmental Coordination Disorder or Dyspraxia, Intellectual Disability, Learning Disability, Speech Delays or Sensory Processing Disorders.</p> <p>The contribution provided under this benefit is for the overall assessment and not per practitioner visit.</p>
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to Developmental Specialist practitioner definition under section 11.1	<p>Section 11.1 Allied Health Professionals, Alternative (Complementary) and Other Practitioners</p> <p>Developmental specialist</p> <p>A member of the Psychological Society of Ireland.</p>	<p>Section 11.1 Allied Health Professionals, Alternative (Complementary) and Other Practitioners</p> <p>Developmental specialist</p> <p>A psychologist who is a member of the Psychological Society of Ireland, a consultant psychiatrist, a consultant paediatrician, an occupational therapist registered with CORU and/or a speech and language therapist registered with CORU.</p>

Handbook name	What's changing?	Previous wording	Updated wording
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to Cancer support benefit wording	<p>Section 2.4 Other Benefits</p> <p>Cancer support benefit (for accommodation expenses when travelling more than 50km)</p> <p>Under this benefit we will contribute towards the costs of hotel or bed and breakfast accommodation where you have to stay in a hotel or bed and breakfast to enable you to receive chemotherapy or radiotherapy in a public or private hospital.</p> <p>This benefit is only available where you have to travel more than 50 kilometres from your home to receive chemotherapy or radiotherapy in the public or private hospital. This benefit is only available for the costs of a hotel or bed and breakfast on the night before and the night after you receive the chemotherapy or radiotherapy.</p> <p>If this benefit is available under your plan the maximum amount that we will contribute per day and per calendar year is set out in your Table of Cover.</p>	<p>Section 2.4 Other Benefits</p> <p>Cancer support benefit (for accommodation expenses when travelling more than 50km)</p> <p>Under this benefit we will contribute towards the costs of hotel, bed and breakfast or short-term letting accommodation to enable you to receive chemotherapy or radiotherapy in a public or private hospital.</p> <p>This benefit is only available where you have to travel more than 50 kilometres from your home to receive chemotherapy or radiotherapy in the public or private hospital. This benefit is only available for the costs of a hotel, bed and breakfast or short-term letting on the night before and the night after you receive the chemotherapy or radiotherapy.</p> <p>If this benefit is available under your plan the maximum amount that we will contribute per day and per calendar year is set out in your Table of Cover.</p>
Tailored Health Plans Membership Handbook	Update to Parent accompanying child benefit wording	<p>Section 2.5 Personalised Packages: Child Development Package</p> <p>Parent accompanying child</p> <p>Under this benefit we will contribute towards the following costs where your child is an in-patient for more than 3 days and you have to travel to be with them:</p> <ul style="list-style-type: none"> > costs of your hotel or bed and breakfast accommodation > your travel costs to and from the medical facility > the costs of food and drink consumed whilst you are visiting your child <p>The contribution under this benefit is payable for reasonable costs incurred by you up to a specified number of days in your policy year. If this benefit is available under your plan the maximum amount which we will cover per day and the maximum number of days for which it can be claimed is set out in your Table of Cover.</p> <p>The contribution can only be claimed for costs incurred after your child has been an in-patient for 3 consecutive days i.e. the contribution can only be claimed for the costs you incur from the 4th day your child remains an in-patient. For the purposes of this benefit child means a child of 14 years of age or under.</p>	<p>Section 2.5 Personalised Packages: Child Development Package</p> <p>Parent accompanying child</p> <p>Under this benefit we will contribute towards the following costs where your child is an in-patient in Ireland for more than 3 days and you have to travel to be with them:</p> <ul style="list-style-type: none"> > costs of your hotel, bed and breakfast or short-term letting accommodation > your travel costs to and from the medical facility > the costs of food and drink consumed whilst you are visiting your child <p>The contribution under this benefit is payable for reasonable costs incurred by you up to a specified number of days in your policy year. If this benefit is available under your plan the maximum amount which we will cover per day and the maximum number of days for which it can be claimed is set out in your Table of Cover.</p> <p>The contribution can only be claimed for costs incurred after your child has been an in-patient for 3 consecutive days i.e. the contribution can only be claimed for the costs you incur from the 4th day your child remains an in-patient. For the purposes of this benefit child means a child of 17 years of age or under.</p>

Handbook name	What's changing?	Previous wording	Updated wording
Health Plans Membership Handbook	Update to Parent accompanying child benefit wording	<p>Section 2.4 Other Benefits</p> <p>Parent accompanying child</p> <p>Under this benefit we will contribute towards the following costs where your child is an in-patient for more than 3 days and you have to travel to be with them:</p> <ul style="list-style-type: none"> > costs of your hotel or bed and breakfast accommodation > your travel costs to and from the medical facility > the costs of food and drink consumed whilst you are visiting your child <p>The contribution under this benefit is payable for reasonable costs incurred by you up to a specified number of days in your policy year. If this benefit is available under your plan the maximum amount which we will cover per day and the maximum number of days for which it can be claimed is set out in your Table of Cover.</p> <p>The contribution can only be claimed for costs incurred after your child has been an in-patient for 3 consecutive days i.e. the contribution can only be claimed for the costs you incur from the 4th day your child remains an inpatient.</p> <p>For the purposes of this benefit child means a child of 14 years of age or under.</p>	<p>Section 2.5 Other Benefits</p> <p>Parent accompanying child</p> <p>Under this benefit we will contribute towards the following costs where your child is an in-patient in Ireland for more than 3 days and you have to travel to be with them:</p> <ul style="list-style-type: none"> > costs of your hotel, bed and breakfast or short-term letting accommodation > your travel costs to and from the medical facility > the costs of food and drink consumed whilst you are visiting your child <p>The contribution under this benefit is payable for reasonable costs incurred by you up to a specified number of days in your policy year. If this benefit is available under your plan the maximum amount which we will cover per day and the maximum number of days for which it can be claimed is set out in your Table of Cover.</p> <p>The contribution can only be claimed for costs incurred after your child has been an in-patient for 3 consecutive days i.e. the contribution can only be claimed for the costs you incur from the 4th day your child remains an in-patient. For the purposes of this benefit child means a child of 17 years of age or under.</p>

Handbook name	What's changing?	Previous wording	Updated wording
Tailored Health Plans Membership Handbook	Update to Parent accompanying child (No minimum stay) benefit wording	<p>Section 2.4 Other Benefits</p> <p>Section 2.5 Personalised Packages: Family & Kids Health Package</p> <p>Parent accompanying child (No minimum stay)</p> <p>Under this benefit we will contribute towards the following costs where your child is an in-patient in Ireland and you have to travel to be with them:</p> <ul style="list-style-type: none"> > costs of your hotel or bed and breakfast accommodation > your travel costs to and from the medical facility > the costs of food and drink consumed whilst you are visiting your child <p>The contribution under this benefit is payable for reasonable costs incurred by you up to a specified number of days in your policy year. If this benefit is available under your plan the maximum amount which we will cover per day and the maximum number of days for which it can be claimed is set out in your Table of Cover.</p> <p>The contribution can only be claimed for costs incurred after your child has been an in-patient for 3 consecutive days i.e. the contribution can only be claimed for the costs you incur from the 4th day your child remains an in-patient. For the purposes of this benefit child means a child of 14 years of age or under.</p>	<p>Section 2.4 Other Benefits</p> <p>Section 2.5 Personalised Packages: Family & Kids Health Package</p> <p>Parent accompanying child (No minimum stay)</p> <p>Under this benefit we will contribute towards the following costs where your child is an in-patient in Ireland and you have to travel to be with them:</p> <ul style="list-style-type: none"> > costs of your hotel, bed and breakfast or short-term letting accommodation > your travel costs to and from the medical facility > the costs of food and drink consumed whilst you are visiting your child <p>The contribution under this benefit is payable for reasonable costs incurred by you up to a specified number of days in your policy year. If this benefit is available under your plan the maximum amount which we will cover per day and the maximum number of days for which it can be claimed is set out in your Table of Cover.</p> <p>The contribution can only be claimed for costs incurred after your child has been an in-patient for 3 consecutive days i.e. the contribution can only be claimed for the costs you incur from the 4th day your child remains an in-patient. For the purposes of this benefit child means a child of 17 years of age or under.</p>
Tailored Health Plans Membership Handbook	Update to the Adult Neurodiversity Benefit wording	<p>Section 2.1 Day-to-Day and Out-patient Benefits</p> <p>Adult Neurodiversity Benefit</p> <p>Under this benefit you can claim back some of the costs of a neurodiversity / neurodevelopment assessment carried out by a psychologist*.</p> <p>This assessment must address at least one of the following: Attention Deficit, Hyperactivity Disorder (ADHD), Autism Spectrum Disorder, Intellectual Disability, Learning Disability, Motor Skills Disorders, Communication Disorders and Tic Disorders.</p>	<p>Section 2.1 Day-to-Day and Out-patient Benefits</p> <p>Adult Neurodiversity Benefit</p> <p>Under this benefit you can claim back some of the costs of a neurodiversity / neurodevelopment assessment carried out by a psychologist*, a consultant psychiatrist or an occupational therapist*.</p> <p>This assessment must address at least one of the following: Attention Deficit, Hyperactivity Disorder (ADHD), Autism Spectrum Disorder, Intellectual Disability, Learning Disability, Motor Skills Disorders, Communication Disorders, Tic Disorders, Developmental Coordination Disorders, Dyspraxia or Sensory Processing Disorders.</p> <p>Receipts submitted under this benefit must state they are for the relevant assessment. This benefit provides a contribution towards the assessment only. Follow up treatment is not covered under this benefit. The contribution provided under this benefit is for the overall assessment and not per practitioner visit. This benefit is available to members aged 18 years and older.</p>

Handbook name	What's changing?	Previous wording	Updated wording
Health Plans Membership Handbook	Rule update to the In-patient support benefit	<p>Section 2.4 Other Benefits</p> <p>In-patient support benefit</p> <p>Under this benefit we will contribute towards the following costs where you have to travel more than 50 kilometres from your home to receive an in-patient treatment or procedure in a public hospital:</p> <ul style="list-style-type: none"> > fuel costs to get to and from the public hospital (petrol or diesel) > public transport costs to get to and from the public hospital <p>The contribution under this benefit is payable for reasonable costs incurred by you up to a specified number of days in your policy year. If this benefit is available under your plan the maximum amount which we will cover per day and the maximum number of days for which it can be claimed is set out in your Table of Cover.</p> <p>This benefit is only available for travel costs to and from a public hospital and only where the hospital in question is the nearest public hospital in which you can receive the treatment or procedure.</p>	<p>Section 2.4 Other Benefits</p> <p>In-patient support benefit</p> <p>Under this benefit we will contribute towards the following costs where you have to travel more than 50 kilometres from your home to receive an in-patient treatment or procedure in a public hospital:</p> <ul style="list-style-type: none"> > fuel costs to get to and from the public hospital (petrol or diesel) incurred on the day before admission, day of admission and/or day of discharge > public transport costs to get to and from the public hospital <p>The contribution under this benefit is payable for reasonable costs incurred by you up to a specified number of days in your policy year. If this benefit is available under your plan the maximum amount which we will cover per day and the maximum number of days for which it can be claimed is set out in your Table of Cover.</p> <p>This benefit is only available for travel costs to and from a public hospital and only where the hospital in question is the nearest public hospital in which you can receive the treatment or procedure.</p>
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to Directory for Homeopath bodies covered	<p>Section 11.1 Directory of Allied Health Professionals, Alternative (Complementary) and other practitioners</p> <p>Homeopath</p> <p>A person who is on the professional register of one of the following Societies:</p> <ul style="list-style-type: none"> > The Irish Society of Homeopaths > The Irish Medical Homeopathic Society 	<p>Section 11.1 Directory of Allied Health Professionals, Alternative (Complementary) and other practitioners</p> <p>Homeopath</p> <p>A person who is on the professional register of the Irish Society of Homeopaths.</p>

If you are unsure which membership handbook applies to your plan or policy, you can check your current handbook on your online account at www.irishlifehealth.ie/login.

