

Terms & Conditions Changes

- for policies renewing from 1st January 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 Tailored Health Plans Membership Handbook	Update to the Genetic Testing: Initial consultation rule	<p>Genetic Testing: Initial consultation</p> <p>Under this benefit we will contribute towards the cost of an initial consultation with an Irish Life Health approved oncology consultant with a specialist medical genetics qualification at Blackrock Clinic or the Mater Private Hospital, Dublin. Please note that a referral for this consultation is required from a GP or consultant. Please contact us on 01 562 5100 for details of our approved consultant(s).</p>	<p>Genetic Testing: Initial consultation</p> <p>Under this benefit we will contribute towards the cost of an initial consultation with an Irish Life Health approved oncology consultant with a specialist medical genetics qualification at the Blackrock Clinic, Hermitage Clinic or the Mater Private Hospital, Dublin. Please note that a referral for this consultation is required from a GP or consultant. Please contact us on 01 562 5100 for details of our approved consultant(s).</p>
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to the Genetic Testing: Test for specified genetic mutations rule	<p>Genetic Testing: Test for specified genetic mutations</p> <p>Under this benefit we will cover the cost of a test for genetic mutations associated with hereditary breast and ovarian cancer syndrome (BRCA1 and BRCA2) or hereditary non-polyposis colorectal cancer (HNPCC, Lynch Syndrome) at Blackrock Clinic or the Mater Private Hospital, Dublin where it is recommended by an Irish Life Health approved oncology consultant.</p>	<p>Genetic Testing: Test for specified genetic mutations</p> <p>Under this benefit we will cover the cost of a test for genetic mutations associated with hereditary breast and ovarian cancer syndrome (BRCA1 and BRCA2) or hereditary non-polyposis colorectal cancer (HNPCC, Lynch Syndrome) at the Blackrock Clinic, Hermitage Clinic or the Mater Private Hospital, Dublin where it is recommended by an Irish Life Health approved oncology consultant.</p>

Handbook name	What's changing?	Previous wording	Updated wording
<p>Health Plans Membership Handbook</p> <p>Tailored Health Plans Membership Handbook</p>	<p>Update to the Back-up benefit rule</p>	<p>Member Benefits</p> <p>Back-up</p> <p>Our physiotherapy case management programme provides Irish Life Health members with advice on prevention and treatment for back, neck and spine pain. Please contact our approved provider on 01 562 5150 and provide them with some initial details of your injury. To support your recovery, you will have a dedicated case manager and a programme of care that is personalised to you. You will be asked questions to assess your signs and symptoms to support you in improving your condition. Treatment programmes and duration will vary depending on how your condition presents but will include face-to-face physiotherapy either online or in-person with one of our associated physiotherapists. You must attend the physiotherapist recommended by the Back-Up team. If one of our approved physiotherapists is not available in your area, the Back-Up team will try to offer an alternative. Once the programme has commenced, the Back-Up team are unable to facilitate requests for transfer to another approved practitioner. You'll be entitled to two Back-Up treatment programmes in your policy year for a nominal fee of €50 per in-person face-to-face treatment programme. This fee should be paid to your physiotherapist at the first session of your treatment programme. Each treatment programme must be completed within three months from the date it is begun.</p> <p>A second treatment programme can only be started 6 months after the preceding one finishes. If you wish to amend your appointment time, you will need to follow your physiotherapist's policy on appointment changes. If you miss your appointment without informing your physiotherapist, a new appointment can be scheduled at a charge to you.</p> <p>Clinical responsibility for treatment lies with your physiotherapist and not Irish Life Health. Irish Life Health cannot guarantee the availability of specific treatment modalities. The following patient groups are not eligible to avail of the Back-Up service:</p> <ul style="list-style-type: none"> > Patients who are currently pregnant (however if you have written clearance from your GP then an assessment can be done which will determine your individualised treatment programme) > Patients who have an issue that is not located in the cervical, thoracic, lumbar or sacral regions of the neck or back > Patients who are under 18 years of age > Patients who are seeking rehabilitation following a spinal surgical procedure undertaken in the last 6 months. <p>While we aim for nationwide coverage with our Back-Up panel, a physiotherapist may not be available in your locality. The Back-Up team and programme are managed by Spectrum Health Limited* and our network of ISCP physiotherapists.</p> <p>Further information on Back-Up is available on our website at www.irishlifehealth.ie/members/memberbenefits/back-up/.</p>	<p>Member Benefits</p> <p>Back-up</p> <p>Back-Up is our physiotherapist-led case management programme unique to Irish Life Health. It provides you with advice on prevention and treatment for back, neck and spine pain. Treatment programmes are tailored to your condition and may include online or in-person treatment with a CORU registered Physiotherapist. Every effort will be made to find a Physiotherapist within your locality from our network but this cannot be guaranteed.</p> <p>Up to two Back-Up treatment programmes are available each policy year subject to eligibility. Where in person treatment is advised, a charge will apply for the course of treatment payable to your Physiotherapist. Details of applicable charges, which may be subject to change, can be found at www.irishlifehealth.ie/members/memberbenefits/back-up/. Once treatment has commenced, we are unable to facilitate transfers to another clinic.</p> <p>Your physiotherapist's policy on amending/cancelling appointments will apply. Your physiotherapist may charge you if you do not notify them of any amendments or cancellations in line with their policy. Clinical responsibility for treatment is with your physiotherapist.</p> <p>Irish Life Health cannot guarantee the availability of specific treatment modalities. You will not be eligible for our Back-Up service if you fall into one of the following groups:</p> <ul style="list-style-type: none"> > Patients who are currently pregnant (however if you have written clearance from your GP then an assessment can be done which will determine your individualised treatment programme) > Patients who have an issue that is not located in the cervical, thoracic, lumbar or sacral regions of the neck or back > Patients who are under 18 years of age > Patients who are seeking rehabilitation following a spinal surgical procedure undertaken in the last 6 months. <p>To access: Login to your Irish Life Health member portal and complete an online suitability assessment for the programme or call the MyClinic line on 01 562 5150.</p> <p>Further information on Back-Up is available on our website at www.irishlifehealth.ie/members/memberbenefits/back-up/.</p> <p>Back-Up is managed by Spectrum Health Limited* and our network of CORU registered physiotherapists.</p>

Handbook name	What's changing?	Previous wording	Updated wording
Everyday Care Plans Membership Handbook	Update to the notes referencing our provider partners	<p>Previous notes</p> <p>- The provider partners named under these benefits may change from time to time. Access to these benefits is subject to availability and the provider partners' terms and conditions of use. Our provider partners operate independently from Irish Life Health and we accept no liability for the provision of their services and are not liable for any point of sale or other discounts which may be offered by a provider partner. Provider partner benefits may change or cease during the policy year and such changes are outside of our control. Please also note that we are not responsible for the content of the websites of these provider partners.</p>	<p>New aligned wording</p> <p>- The provider partners named under these benefits may change from time to time. Access to these benefits is subject to availability and the provider partners' terms and conditions of use. Our provider partners operate independently from Irish Life Health and we accept no liability for the provision of their services and are not liable for any point of sale or other discounts which may be offered by a provider partner. Provider partner benefits may change or cease during the policy year and such changes are outside of our control. While we aim for nationwide coverage with our benefits, a service may not be available in your locality. Please also note that we are not responsible for the content of the websites of these provider partners.</p>
Health Plans Membership Handbook Tailored Health Plans Membership Handbook Everyday Care Plans Membership Handbook	Update to benefit name	Infertility Benefit	Fertility Benefit
Health Plans Membership Handbook Tailored Health Plans Membership Handbook Everyday Care Plans Membership Handbook	Update to criteria of MRI referrals	<p>MRI Scans</p> <p>You must be referred by a consultant or GP. For MRI scans in St. James's Hospital you must be referred by an oncologist or other clinician working in St. James's Hospital and the scan is required for the diagnosis, treatment or staging of a cancer.</p>	<p>MRI Scans</p> <p>You must be referred by a consultant, GP or a Physiotherapist*. Acceptance of Physiotherapist* referrals are at the discretion of the approved scan centre and we advise you to confirm this in advance. For MRI scans in St. James's Hospital you must be referred by an oncologist or other clinician working in St. James's Hospital and the scan is required for the diagnosis, treatment or staging of a cancer.</p>

Handbook name	What's changing?	Previous wording	Updated wording
<p>Health Plans Membership Handbook</p> <p>Tailored Health Plans Membership Handbook</p>	<p>Update to the Digital Doctor benefit</p>	<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	New Female Health Consultation benefit which is available to all members on hospital plans as at 1st September 2023	n/a	<p>Female Health Consultation</p> <p>Where this benefit is available on your plan, we will provide a contribution towards a video consultation booked with an Irish based Centric Health* GP who is a specialist in female health. We will pay Centric Health* directly up to the amount detailed for the number of visits listed on your Table of Cover. You will be required to provide payment details for the remaining amount at the time of booking. Centric Health* will take payment 48 hours before your scheduled appointment and once payment is taken it is non-refundable. This amount cannot be claimed against any other benefit on your plan, including your GP visits benefit, as you cannot claim for the same medical expenses twice. The female health specialist GP may recommend additional follow-on services, such as blood tests, scans, or visits to other allied health professionals. These follow-on services are not covered under this benefit, but you may have cover on your plan under another benefit listed on your Table of Cover. 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 an adult covered on the policy to book the consultation on their behalf. Depending on the nature of the presenting issue, the GP may request the presence of a parent or guardian for those under the age of 18.</p> <p>How to claim</p> <p>To see available appointment times and to book a consultation, please access through MyClinic in your member portal at www.irishlifehealth.ie/login and provide your details through the online booking form.</p>
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to exclusions	n/a	<p>Exclusions from Your Cover</p> <p>We do not cover the following (subject to compliance with the Minimum Benefit Regulations):</p> <ul style="list-style-type: none"> > Any costs related to genetic testing except where such costs are listed on your Table of Cover (see Section 3 of your Membership Handbook for all other exclusions)

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Everyday Care Plans Membership Handbook	Removal of benefit	<p>Overseas benefits: Emergency In-patient Treatment Abroad</p> <p>Our Hospital bill for in-patient treatment benefit provides cover towards your medical costs where you require emergency care outside Ireland. The table below explains more about this benefit. This benefit is not a substitute for travel insurance. We recommend that you purchase travel insurance prior to travelling outside Ireland and obtain a European Health Insurance Card before you travel (see www.ehic.ie). All claims will be assessed and settled in euro. Irish Life Health will use the foreign exchange rate which applied at the date of the invoice from the medical facility abroad. Waiting periods may also apply, please see section 6. Where you have not been admitted overnight for treatment as an in-patient, some of the costs incurred may be claimed under your day to day benefits, please refer to your table of cover to see what benefits you may claim for and whether these are subject to an excess.</p>	n/a
Everyday Care Plans Membership Handbook	Change to VIGO claiming process	<p>How to claim</p> <p>You need to pay the practitioner/health care provider yourself and then claim the amount that is covered back from us during your policy year by scanning your original receipts and submitting them through our online claims tool (Irish Life Health Online Claiming) in your member area on www.irishlifehealth.ie. Where your broker offers an online claiming facility, your receipts should be uploaded through their online claiming tool. You must submit your receipts within six months of the end of your policy year. If your receipts are not received within these six months, your claim will not be paid.</p> <p>Claims submission</p> <p>For Day to Day claims, submit your receipts through our online claims tool (Irish Life Health Online Claiming) in your member area on www.irishlifehealth.ie or where your broker offers an online claiming facility, your receipts should be uploaded through their online claiming tool. You must submit your receipts within six months of the end of your policy year. We may ask you to submit a receipt for verification. For pay and reclaim In-patient claims, send your receipts to Claims Team, Irish Life Health dac, PO Box 13028, Dublin 1</p>	<p>How to claim</p> <p>You need to pay the practitioner/health care provider yourself and then claim the amount that is covered back from us during your policy year by scanning your original receipts and submitting them through our online claims tool (Irish Life Health Online Claiming) in your member area on www.irishlifehealth.ie. You must submit your receipts within six months of the end of your policy year. If your receipts are not received within these six months, your claim will not be paid.</p> <p>Claims submission</p> <p>For Day to Day claims, submit your receipts through our online claims tool (Irish Life Health Online Claiming) in your member area on www.irishlifehealth.ie. You must submit your receipts within six months of the end of your policy year. We may ask you to submit a receipt for verification.</p>
Everyday Care Plans Membership Handbook	Definition of day case	n/a	<p>Day case</p> <p>A patient who is admitted to a medical facility but who does not stay overnight. This includes patients who are admitted to a medical facility to receive side room procedures.</p>
Tailored Health Plans Membership Handbook	Update to Dentist visits (routine treatment) benefit	<p>Dentist visits (routine treatment)</p> <p>Under this benefit we will contribute towards the cost of attending a dentist for the following routine dental treatment: check ups, fillings, scale and polish and tooth extraction.</p>	<p>Dentist visits (routine treatment)</p> <p>Under this benefit we will contribute towards the cost of attending a dentist for the following routine dental treatment: check ups, fillings, xrays, scale and polish and tooth extraction.</p>

Handbook name	What's changing?	Previous wording	Updated wording
Health Plans Membership Handbook Tailored Health Plans Membership Handbook Everyday Care Plans Membership Handbook	Update to the Changing your policy wording	<p>Section 5 Changing your policy</p> <p>We cannot take instructions to make changes to the policy or any of the plans listed on the policy from a member. However, the policyholder can nominate a person to act on their behalf to make changes to the policy or any of the plans. If you wish to nominate someone, please call or write to us and let us know if they have authority to act on the entire policy or just specific plans.</p>	<p>Section 5 Changing your policy</p> <p>We cannot take instructions to make changes to the policy or any of the plans listed on the policy from a member or individual who is not the policyholder. However, the policyholder can nominate a person to act on their behalf to discuss the policy, administer the policy and / or discuss claims. If you wish to nominate someone, please log on to your membership portal where you can capture policy permissions. Alternatively you can call or write to us and let us know if you want to nominate a person to act on your behalf for some or all of the above permissions.</p>
Health Plans Membership Handbook Tailored Health Plans Membership Handbook Everyday Care Plans Membership Handbook	Update to requirements for Cardiac CT scans to include CT TAVI	<p>Cardiac CT Scans</p> <p>You must be referred by a consultant. All cardiac CT scans must be carried out in an approved cardiac scan facility list (see the tables of MRI and CT facilities in section 12 of this Membership Handbook). Calcium CT scoring is not covered under this benefit.</p>	<p>Cardiac CT Scans</p> <p>You must be referred by a consultant. All cardiac CT scans (including CT TAVI scans where available) must be carried out in an approved cardiac scan facility list (see the tables of MRI and CT facilities in section 12 of this Membership Handbook). Calcium CT scoring is not covered under this benefit.</p>
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Public Hospital Levy no longer charged	<p>Section 2.2 Hospital costs</p> <p>The fees charged by your hospital or treatment centre for your medical care whilst you are admitted are known as hospital costs. They include the public hospital levy, hospital accommodation costs, charges for the use of the operating theatres, charges for radiology and pathology, nursing charges, costs of prosthesis and charges for drugs administered for consumption whilst you are admitted.</p>	<p>Section 2.2 Hospital costs</p> <p>The fees charged by your hospital or treatment centre for your medical care whilst you are admitted are known as hospital costs. They include hospital accommodation costs, charges for the use of the operating theatres, charges for radiology and pathology, nursing charges, costs of prosthesis and charges for drugs administered for consumption whilst you are admitted.</p>
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Public Hospital Levy no longer charged	<p>Section 11 Definitions</p> <p>Public hospital levy: The public hospital levy is a daily charge imposed by public hospitals on in-patients and day case patients. The public hospital levy will be charged for a maximum of 10 days in any period of 12 consecutive months.</p>	n/a

Handbook name	What's changing?	Previous wording	Updated wording
Health Plans Membership Handbook	Public Hospital Levy no longer charged	<p>Section 2.4 Other Benefits</p> <p>Public hospital levy (also known as the Public Statutory In-patient Charge)</p> <p>Public hospitals charge in-patients a daily charge for a maximum of 10 days in any period of 12 consecutive months. This is known as the public hospital levy. Under this benefit we will cover the public hospital levy for a maximum of 10 days in any period of 12 consecutive months.</p> <p>How to claim</p> <p>Where the public hospital in question is covered under your plan, we will pay this charge directly to the public hospital. See section 2.2 of this Membership Handbook for information on how direct settlement operates. If the public hospital in question is not covered under your plan, you will have to pay your public hospital levy to the public hospital and claim this back from us. This benefit is subject to €1 excess which will be refunded to you.</p>	n/a
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>

Handbook name	What's changing?	Previous wording	Updated wording
Health Plans Membership Handbook	Public Hospital Levy no longer charged	<p>Section 6 Waiting Periods</p> <p>Initial Waiting Periods Public Hospital Levy- 26 week waiting period</p> <p>Pre-Existing Condition Waiting Periods Public Hospital Levy- no waiting period</p> <p>Upgrade Waiting Periods Public Hospital Levy- no waiting period</p>	n/a
Tailored Health Plans Membership Handbook	Change of provider name for Lifestyle Genomic Testing – Nutrition, Fitness, Sleep and Stress benefit- Screening Extra Personalised Package	<p>Section 2.5 - Personalised Packages</p> <p>Screening Extra</p> <p>Lifestyle Genomic Testing – Nutrition, Fitness, Sleep and Stress</p> <p>Under this benefit, you can claim a contribution towards the cost of a lifestyle genomic test through DNAFit**. The level of cover available is set out on your Table of Cover. This benefit is limited to one claim per lifetime.</p>	<p>Section 2.5 - Personalised Packages</p> <p>Screening Extra</p> <p>Lifestyle Genomic Testing – Nutrition, Fitness, Sleep and Stress</p> <p>Under this benefit, you can claim a contribution towards the cost of a lifestyle genomic test through CircleDNA**. The level of cover available is set out on your Table of Cover. This benefit is limited to one claim per lifetime.</p>
Tailored Health Plans Membership Handbook	Change of provider name for Lifestyle Genomic Testing – Nutrition, Fitness, Sleep and Stress benefit- Mind & Body Personalised Package	<p>Section 2.5 - Personalised Packages</p> <p>Mind & Body</p> <p>Lifestyle Genomic Testing – Nutrition, Fitness, Sleep and Stress</p> <p>Under this benefit, you can claim a contribution towards the cost of a lifestyle genomic test through DNAFit**. The level of cover available is set out on your Table of Cover. This benefit is limited to one claim per lifetime.</p>	<p>Section 2.5 - Personalised Packages</p> <p>Mind & Body</p> <p>Lifestyle Genomic Testing – Nutrition, Fitness, Sleep and Stress</p> <p>Under this benefit, you can claim a contribution towards the cost of a lifestyle genomic test through CircleDNA**. The level of cover available is set out on your Table of Cover. This benefit is limited to one claim per lifetime.</p>
Tailored Health Plans Membership Handbook	Change of provider name for Lifestyle Genomic Testing – Nutrition, Fitness, Sleep and Stress benefit- You Extra Personalised Package	<p>Section 2.5 - Personalised Packages</p> <p>You Extra</p> <p>Lifestyle Genomic Testing – Nutrition, Fitness, Sleep and Stress</p> <p>Under this benefit, you can claim a contribution towards the cost of a lifestyle genomic test through DNAFit**. The level of cover available is set out on your Table of Cover. This benefit is limited to one claim per lifetime.</p>	<p>Section 2.5 - Personalised Packages</p> <p>You Extra</p> <p>Lifestyle Genomic Testing – Nutrition, Fitness, Sleep and Stress</p> <p>Under this benefit, you can claim a contribution towards the cost of a lifestyle genomic test through CircleDNA**. The level of cover available is set out on your Table of Cover. This benefit is limited to one claim per lifetime.</p>
Health Plans Membership Handbook	Change of provider name for Lifestyle Genomic Testing – Nutrition, Fitness, Sleep and Stress benefit- Day-to-Day and Out-patient Benefits	<p>Section 2.1 Day-to-Day and Out-patient Benefits</p> <p>Lifestyle Genomic Testing – Nutrition, Fitness, Sleep and Stress</p> <p>Under this benefit, you can claim a contribution towards the cost of a lifestyle genomic test through DNAFit**. The level of cover available is set out on your Table of Cover. This benefit is limited to one claim per lifetime.</p>	<p>Section 2.1 Day-to-Day and Out-patient Benefits</p> <p>Lifestyle Genomic Testing – Nutrition, Fitness, Sleep and Stress</p> <p>Under this benefit, you can claim a contribution towards the cost of a lifestyle genomic test through CircleDNA**. The level of cover available is set out on your Table of Cover. This benefit is limited to one claim per lifetime.</p>

Handbook name	What's changing?	Previous wording	Updated wording
Tailored Health Plans Membership Handbook	Handbook updates to include addition of Travel Extra pack which is available to choose at renewal on: > Livewell	n/a	<p>Section 2.5 - Personalised Packages - LiveWell</p> <p>Travel Extra</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, radiology and pathology fees, 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> <p>Pay and claim</p>
Tailored Health Plans Membership Handbook	Handbook updates to include addition of Fertility Extra pack which is available to choose at renewal on: > Livewell	n/a	<p>Section 2.5 - Personalised Packages - LiveWell</p> <p>Fertility Extra</p> <p>Fertility Benefit</p> <p>Under this benefit we will cover a percentage of the cost of Intra Uterine Insemination (IUI) and In Vitro Fertilisation (IVF) with or without Intra Cytoplasmic Sperm Injection (ICSI) treatment for female members. If this benefit is available under your plan the amount that we will contribute up to a maximum amount is set out in your Table of Cover. To be eligible to claim this benefit, the female recipient of the treatment must be a member on an in force policy with Irish Life Health at the time of the procedure(s). This benefit is limited to a maximum of two claims per member's lifetime with a minimum period of 4 weeks between fertility cycles.</p> <p>Pay and claim</p>

Handbook name	What's changing?	Previous wording	Updated wording
Tailored Health Plans Membership Handbook	Handbook updates to include addition of Fertility Extra pack which is available to choose at renewal on: > Livewell	n/a	<p>Section 2.5 - Personalised Packages - LiveWell</p> <p>Fertility Extra</p> <p>AMH Fertility Test</p> <p>Under this benefit a female member can claim a contribution from us towards the costs of receiving an anti-mullerian hormone assessment. This benefit is only available where the antimullerian hormone test is carried out in a clinical environment by a qualified practitioner.</p> <p>Pay and claim</p>
Tailored Health Plans Membership Handbook	Handbook updates to include addition of Fertility Extra pack which is available to choose at renewal on: > Livewell	n/a	<p>Section 2.5 - Personalised Packages - LiveWell</p> <p>Fertility Extra</p> <p>His & Hers Fertility Screening Tests</p> <p>Under this benefit you can claim a contribution per policy year from us towards the cost of a screening which includes a Hormone Profile, Semen Analysis and/or Progesterone Levels.</p> <p>Pay and claim</p>
Tailored Health Plans Membership	Update to Net One ILH to provide choice from full Range of 8 Personalised Package	International Health and Travel personalised package currently built in to plan	<p>Renewing members can choose one Personalised Package at no additional cost from from the Range of 8 found below;</p> <p>Section 2.5 - Personalised Packages - Range of 8</p> <ul style="list-style-type: none"> - Complementary Therapy Package - Dental & Optical Package - Enhanced Maternity Package - Family & Kids Health Package - Family Protection Package - Sports Cover Package - International Health and Travel - Women's and Men's Health Package <p>See Tailored Membership Handbook for full details on benefits available</p>

Handbook name	What's changing?	Previous wording	Updated wording
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to our terms and conditions	Section 5. General Terms and Conditions 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	Section 5. General Terms and Conditions 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
Net One ILH Plan Table of Cover (Tailored Health Plans Membership Handbook)	Benefits moving to new section	Table of Cover - benefit - Hospital bill for in-patient treatment - Companion expenses (to remain with you or travel to you from Ireland or escort you) - Repatriation expenses - Nurse 24/7 International sits under 'International Health and Travel personalised package'	Table of Cover - benefit - Hospital bill for in-patient treatment - Companion expenses (to remain with you or travel to you from Ireland or escort you) - Repatriation expenses - Nurse 24/7 International sits under 'Emergency In-patient Treatment Abroad and related benefits'

Personalised Packages

International Health and Travel	
Additional costs arising from in-patient claim	€1,500
Additional costs arising from out-patient claim	€500
Companion expenses	€1,000
Hospital bill for in-patient treatment	€100,000
Nurse 24/7 International	Covered
Out-patient A&E abroad	50% up to €1,000
Prescriptions abroad	€15 x 1 prescription
Repatriation expenses	€1,000,000
Travel Vaccine Consultation	€30 contribution with our provider partner
Travel Vaccines	€50 contribution with our provider partner plus 10% point of sale discount
Elective Treatment abroad - up to the amount that would have been paid in Ireland	Covered

In-patient Benefits

Hospital Cover
Inpatient Consultants fees (in selected hospitals only) and Inpatient Scans (in selected hospitals only) are fully covered

Benefits	Public Hospital (in selected hospitals only)	Private Hospital (in selected hospitals only)	High-tech Hospital (in selected hospitals only)
Semi Private Room	Covered	Not covered on this plan	Not covered on this plan
Private Room	Covered	Not covered on this plan	Not covered on this plan
Day Case	Covered	Not covered on this plan	Not covered on this plan
Listed Cardiac Procedures ¹	-	-	Not covered on this plan
Listed Special Procedures ¹	-	-	Not covered on this plan

Maternity		Emergency Inpatient Treatment Abroad and related benefits	
Public hospital cover for maternity	Covered up to €385	Hospital bill for inpatient treatment	Covered up to €100,000
Inpatient maternity consultant fees	Covered up to €296	Companion expenses (to remain with you or travel to you from Ireland or escort you)	€1,000
GentleBirth App	See handbook for details	Repatriation expenses	Covered up to €1 million
		Nurse 24/7 International	Covered

Handbook name	What's changing?	Previous wording	Updated wording
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>

Handbook name	What's changing?	Previous wording	Updated wording
Health Plans Membership Handbook Tailored Health Plans Membership Handbook Everyday Care Plans Membership Handbook	Update to Cooling off wording	<p>Cooling Off</p> <p>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.</p>	<p>Cooling Off</p> <p>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.</p>
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to benefit criteria	<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. 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. Both the parent or guardian and child must be members on the same policy.</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 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. 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. Both the parent or guardian and child must be members on the same policy.</p>
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to Doula Care benefit	<p>Postnatal Doula Support</p> <p>Under this benefit we will cover the cost of post natal support in your home provided by Doula Care Ireland** after your baby is born. If this benefit is available under your plan, the number of support sessions that will be covered is set out in your Table of Cover. To be eligible for this benefit, you must be covered under an in force policy with Irish Life Health with this benefit available under your plan at at the time your baby is born and at the time you receive the service.</p> <p>To redeem this benefit you will need to go to www.doulacare.ie/irish-life-health and book the service online within 12 months from the date on which your baby was born.</p>	<p>Postnatal Doula Support</p> <p>Under this benefit we will cover the cost of post natal support in your home provided by Doula Care Ireland** after your baby is born. If this benefit is available under your plan, the number of support sessions that will be covered is set out in your Table of Cover. This benefit may only be claimed by one member (either parent) in respect of each birth. To be eligible for this benefit, you must be covered under an in force policy with Irish Life Health with this benefit available under your plan at at the time your baby is born and at the time you receive the service.</p> <p>To redeem this benefit you will need to go to www.doulacare.ie/irish-life-health and book the service online within 12 months from the date on which your baby was born.</p>

Handbook name	What's changing?	Previous wording	Updated wording
Health Plans Membership Handbook Tailored Health Plans Membership Handbook Everyday Care 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 Everyday Care 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.
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to Mindfulness app subscription benefit	Day-to-Day Benefits and Out-patient Benefits Mindfulness app subscription 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.	Day-to-Day Benefits and Out-patient Benefits Mindfulness app subscription Under this benefit you can claim a contribution from us towards the cost of an annual subscription to the HEADSPACE** mindfulness app.

Handbook name	What's changing?	Previous wording	Updated wording
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, radiology and pathology fees, 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	Section 2.5 - Personalised Packages Travel Focus Travel Vaccination Consultation 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.
Tailored Health Plans Membership Handbook	Update to Elective Overseas wording	Elective treatment abroad - up to the amount that would have been paid in Ireland Overseas Surgical Procedures Which Are Available In Ireland Overseas Surgical Procedures Which Are Not Available In Ireland	Elective Overseas Referral Elective treatment abroad - up to the amount that would have been paid in Ireland / Elective Overseas Referral Overseas Surgical Procedures Which Are Available In Ireland/Benefit abroad for surgical procedures that are available in Ireland Overseas Surgical Procedures Which Are Not Available In Ireland/Benefit abroad for surgical procedures that are not available in Ireland
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. 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;

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.

