

Plan	Vhi PMI 39 14	Laya SimplyHealth Plus
In-patient		
Public Hospital		
Public Hospital Day Case	Covered	Covered
Public Hospital In-patient	Private covered	Private covered
Private Hospital		
Day case	Covered with a €125 excess per claim Incl. Beacon Clinic as a private hospital	Covered with a €50/€125 excess per claim, Incl. Beacon Clinic as a private hospital
In-patient (Non special/non cardiac)	Semi-private covered with a €125 excess per claim, Incl. Beacon Clinic as a private hospital but excl. Kingsbridge Sligo and Whitfield Waterford	Semi-private covered with a €50/€125 excess per claim, private covered with a €50/€125 excess per claim with a shortfall of €165 per night Incl. Beacon Clinic as a private hospital
In-patient (Cardiac)	Semi-private covered with a €125 excess per claim, Incl. level 1 listed procedures in Galway Clinic, Hermitage and Beacon but excl. Kingsbridge Sligo and Whitfield Waterford	
In-patient (Special)	Semi-private covered with a €125 excess per claim, Incl. for listed procedures in Galway Clinic, Hermitage and Beacon but excl. Kingsbridge Sligo and Whitfield Waterford	
In-patient (Orthopaedic)	Semi-private covered with a €125 excess per claim with a shortfall of 20% per claim, Incl. listed procedures in Galway	Semi-private covered with a €150 excess per claim (payable to a maximum of once per year) with a shortfall of 20% per
In-patient (Ophthalmic)		
Hi-Tech Hospital (Mater Private Dublin & Blackrock Clinic)		
Day case	Covered with a €125 excess per claim	Covered with a €200 excess per claim
In-patient (Non special/non cardiac)	Semi-private covered with a €125 excess per claim with a shortfall of 55% per claim, private covered with a €125 excess per claim with a shortfall of 65% per claim	Private covered with a €200 excess per claim with a shortfall of €175 per night
In-patient (Cardiac)	Semi-private covered with a €125 excess per claim, for level 1 listed procedures	Private covered
In-patient (Special)	Semi-private covered with a €125 excess per claim	Private covered with a €200 excess per claim with a shortfall of €175 per night
In-patient (Orthopaedic)	Semi-private covered with a €125 excess per claim with a shortfall of 20% per claim	Private covered with a shortfall of 20% per claim
In-patient (Ophthalmic)		
Day to day		
Individual annual excess	100%	100%
Out-patient cap	€3,200 reimbursable	€7,650 reimbursable
GP	€30 to max 12 visits, Practice nurse; €20 to max 12 visits	50% per visit, GP (out of hours); Full cover to max 4 visits
Digital GP services	Covered	Full cover to max 7 visits per year
Additional primary care services	Nurse-on-call, Digital Physio, Digital Speech & Language covered, Symptom Checker	Nurse-on-call, Digital Physio (3 visits), Dietician (2 visits); Covered, GP-on-call
Out-patient consultant	€100 to max 12 visits, Consultant (Vhi SwiftCare); 75% per visit	50% per visit
International second opinion	Covered	Covered
Routine dental	€30 to max 12 visits, €30 to max 12 visits (SwiftCare)	50% to a max €300 per year
Emergency dental	Not covered	50% to a max €510 per accident
Core physio	€30 to max 12 visits, €30 to max 12 visits (SwiftCare)	50% to max 25 visits
Additional physio services	Health coach online assessment & personalised program with in app support; Full cover	Screening (physio); Full cover to max €300 every 2 years, Health coach online assessment & personalised program; Full cover, Health coach face to face assessment & personalised program; Full cover every 2 years, Digital physio; Covered
Complementary	Acupuncturists, chiropractors, osteopaths, physical therapists, reflexologists; €30 to max 12 visits combined, Chiropodists/podiatrists, dieticians, occupational therapists, speech therapists, orthoptists; €30 to max 12 visits combined	Physical therapist, Acupuncturists, Osteopath, Reflexologist, Chiropodists, Chiropractors, Dietician, Occupational therapist, Orthoptist, Child speech & language therapist, Homeopath; 50% to max 5,8 or 12 visits depending on practitioner, Child Speech & Language therapist assessment; 50% up to €60 x 1 visit
Hearing tests	€25 every 2 years	50% up to €40 per year
Optical	75% to max €55 towards glasses or contact lenses every 2 years, €30 every 2 years towards cost of an eye exam	50% up to €150 per year
A&E (Hospital casualty)	€75 to max 2 visits; Public A&E, Private A&E covered based on treatment, e.g. Radiology, consultant etc.	50% to a max €50 per visit; Public & Private A&E
Minor injury units (public e.g. rapid injury centres (Smithfield). Private e.g. SwiftCare, MyMedical and Affidea)	€50 co-payment per visit in Vhi SwiftCare only, additional costs; 50% to a max €100	€175 per visit in private approved centres only
Vaccinations (travel)	€80 per year	50% up to €60 per year
Vaccinations (other)	Not covered	50% up to €50 per year
Fertility		
Core fertility	IUI/IVF/ICSI (twice per lifetime); 50% to max €1,000	IVF, IUI, ICSI; Full cover up to max €1,000 (twice per lifetime)
Additional fertility	Initial fertility consultation €100, Fertility Tests €100, Egg freezing €1,000 (once per lifetime), Sperm Freezing €125 (once per lifetime), PGT €500 (per lifetime), Frozen Embryo Transfer 50% to max €500 (twice per lifetime), Fertility counselling €50 to max 5 visits	Initial fertility consultation 50% to max €50, Fertility Tests €200, Egg freezing; €1,000 (once per lifetime), Sperm freezing; €150 (once per lifetime), Fertility counselling Full cover to max 5 visits

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Maternity		
Maternity (hospital)	Covered	Covered
Maternity (in the home)	Early discharge; up to €1,200 per pregnancy, Homebirth; €3,600 per pregnancy	Early discharge; up to €1,200 per pregnancy, Homebirth; €3,500 per pregnancy
Maternity (core out-patient)	Out-patient maternity; €250 per pregnancy combined	Out-patient maternity; €500 per pregnancy
Maternity (additional)	Maternity scan, Antenatal class, Baby massage course, Baby swim course, Pre/post natal yoga & Pilates, Breastfeeding consultancy visits; 75% to max €500 per pregnancy (combined) Telephonic 1:1 midwife service - 7 visits covered	Partner benefit; €30 per pregnancy, Out-patient maternity - other receipts; Full cover to max €385, Welcome home food hamper; €50 per pregnancy, Telephonic 1:1 midwife service - 4 visits covered, Pregnancy & early childhood nutrition; 2 visits covered, Maternity Yoga/Pilates; 50% of the costs up to €50 once per pregnancy
Parenting		
Parenting	SwiftCare paediatrician; €60 to max 1 visit, SwiftCare paediatrician follow up treatment; 50% to max 1 visit, SwiftCare paediatrician follow up treatment; 75% to max 1 visit, Parent accompanying child; €100 to max 14 days. ADHD Service at Vhi SwiftCare Dundrum, 50% for Initial consult and 50% for follow up treatments	Parent accompanying child; €105 to max 14 days, Parental first aid course; €30 per year. Multi disciplinary Childhood development assessment; 50% of the costs up to €400 once per lifetime
Cancer care		
Cancer	Mammogram - approved centres; Full cover every 2 years, Initial genetic cancer consult; Covered, Initial genetic cancer consult; €125 to max 1 visit, Preventative treatment due to genetics; Per hospital coverage, Manual lymph drainage; €50 to max 10 visits, Overnight support; €100 per visit, Psycho-oncology counselling; €50 to max 10 visits, Wig/ hairpiece, post-mastectomy bra, swimsuit, surgical prosthesis; Covered subject to medical and surgical appliances benefit limit	Mammogram; Covered, Cervical & Prostate screening; 50% per visit, Initial genetic cancer consult; 50% to max 1 visit, Genetic test; Covered, Manual lymph drainage; €500 per year, Overnight support; €100 per visit, Wig & breast prosthesis; Covered, Eyebrow tattooing; €80 per year, Sleeping cap; Full cover to max 1 per year
Mental health		
Mental health (in-patient)	Mental health (in-patient - not related to substance abuse); Covered to a max 100 days, Mental health (in-patient (substance abuse)); Full cover to a max 91 days in every 5 years	Mental health (in-patient - not related to substance abuse); Covered to a max 100 days, Mental health (in-patient (substance abuse)); Full cover to a max 91 days in every 5 years
Mental health (clinical out-patient)	Clinical mental health therapy (Psychologist); €30 to max 7 visits, Clinical mental health therapy (approved centres); €75 to max 12 visits, Day care program; Covered	Clinical mental health therapy (Psychologist); 50% up to €40 to max 8 visits, Clinical mental health therapy (approved centres); 50% to max 12 visits, Child mental health assessment; 50% up to €60 x 1 visit
Mental health (non-clinical out-patient)	Non clinical child counselling; €30 to max 7 visits. Non clinical adult counselling; €30 to max 7 visits	Non clinical child counselling 50% to max 8 visits. Non clinical adult counselling; 50% up to €40 to max 8 visits
Mental health (EAP)	EAP (Face-to-face); 6 face to face or phone counselling sessions	EAP; 6 face to face, phone or video counselling sessions, Telephonic life coach; 1 session per issue
Radiology/pathology		
Radiology (out-patient)	Tests; 50% up to €850 per year, CT scan (non-oncology); Covered, CT scan (oncology); Covered, DEXA scan; 50% per visit, MRI scan; Covered, MRI scan; Covered (€125 co-payment), PET-CT scan; Covered	Tests; 50% per visit, CT scan; Covered, DEXA scan; Covered, MRI scan; Covered, PET-CT scan; Covered
Screening	Sexual health screening; €100 per year, Health screening; €185 per year	Home testing; 50% to a max €60 per year, Health screening; 50% every 2 years, Cardiac screening; Full cover every 2 years
Consultant (radiology/pathology)	€60 per visit	50% per visit
International		
Elective surgical procedures	Elective treatment abroad; €100,000 (worldwide)	Elective treatment abroad; €100,000 (EU only)
Emergency overseas	Emergency in-patient; €100,000 per episode, Expense for companion (travel); €1,000 per episode, Accommodation; €1,000 per episode, Repatriation expenses; Fully covered	Emergency in-patient; €100,000 per episode, Expense for companion (travel); €1,000 per episode, Repatriation expenses; €2,000,000 per episode
Gender reassignment		
Gender reassignment	Gender reassignment; Covered per hospital benefits. HRT benefit; (50% up to €3,000)	Gender reassignment hormone replacement therapy; 50% to max €300 (once per lifetime), Full cover up to max €100,000 (EU only)
Other		
Homecare (child)	€100 to max 28 days	50% to max €2,800 per year, Child support benefit; Full cover to €250
Convalescent care	€30 to max 14 days	€45 to max 14 days
Homecare (other)	Vhi Hospital@Home; Covered, Medical and surgical appliances; Up to €6,500 (€300 co-payment)	Health in the home; Covered, Home nursing; 50% up to €950 per year, Medical and surgical appliances; per list

Note

This document does not replace the individual provider table of benefits and terms and conditions and is provided for guidance only. The content of this document is based on Mercer's understanding of the current benefits provided under the relevant plan(s) as at 1 January 2022. Vhi & Laya may change benefits with 30 days' notice to the Health Insurance Authority (HIA) and can also change underlying terms and conditions from time to time. Any individual undergoing treatment or with particular queries about cover should contact Vhi or Laya directly as applicable.