

Level 1 Hospital TABLE OF COVER correct from June 17th 2012

This table of cover must be read in conjunction with your member certificate and membership handbook.

IN PATIENT BENEFITS	Level 1 Hospital
Hospital cover:	
Consultants fees	Covered
Inpatient scans	Covered
Public Hospital	
Semi-private room	Covered
Private room	Semi Private Rate
Day case	Covered
Private Hospital	
Semi-private room	75% cover
Private room	Cover for 75% of semi-private rate
Day case	60% Cover
High-tech Hospital	
Semi-private room	25% cover
Private room	Cover for 25% of semi-private rate
Day case	35% cover
Listed cardiac procedures	35% cover
Listed special procedures	35% cover
Maternity:	
Public hospital cover for maternity	3 nights accommodation
Grant-in-aid amount / home births	Covered up to €3,000
Inpatient maternity consultant fees	As per schedule of benefits for professional fees ¹
Newborn free until next renewal	Yes
Post natal home help (PNHH)	Covered for up to 2 days domestic home help
Alternative amount for post natal home help	€120
Cord blood stem cell preservation	€600 contribution single child & identical twins €900 contribution non identical twins
A&E abroad:	
Hospital bill for inpatient treatment	Covered up to €100,000
Repatriation expenses	Covered up to €1 million
Expenses for companion who remains with you	Covered up to €1,000
Companion repatriation expenses	Covered up to €1,000
24 hour telephone assistance	Yes
Elective overseas referral:	
Benefit abroad for surgical procedures that are not available in Ireland	Yes – up to the amount for the most similar surgical procedure to treat the same condition in Ireland
Psychiatric treatment:	
Not related to substance abuse	100 days
Related to substance abuse	91 days per 5 years
Other inpatient benefits:	
Oncotype DX	Covered
Convalescence benefits	€30 x 14 days
Cancer Support Benefit (for accommodation expenses when travelling more than 50km)	Up to €100 per day up to a maximum of €1500 per calendar year
Medical ambulance costs	Covered, if certified as being medically necessary

OUT PATIENT BENEFITS – not subject to excess	
Nurse-on-call	Yes
Health screen at any centre	€100 every 2 years
Out-patient scan cover (in approved centres):	
PET-CT	Covered
MRI	Covered
CT	Covered

OUT PATIENT BENEFITS – subject to excess	
Individual outpatient excess	€200
Family outpatient excess	€200 per person
Maximum amount of outpatient benefits per member per policy year	€4,000
Public A & E cover	€60 x 3 visits
Home nursing	€40 x 20 days
Pre/Post natal medical expenses	€300
Medical and surgical appliances	As per specified list ²
Manual lymph drainage	€50 x 5 visits
Emergency dental care	€450
Consultant fees	€60 per visit
Pathology – cost of test	50% cover
Pathology – consultant fees	50% as per schedule of benefits for professional fees ¹
Radiology – cost of test	50%
Radiology – consultant fees	50% as per schedule of benefits for professional fees ¹
Scans	
MRI: non approved centre	€200
CT: non approved centre	€150
PET-CT: non approved centre	Not covered

MEMBER BENEFITS	
Aviva Dental Package at Smiles and Town Dental clinics	Health checks
Laser eye surgery at Optical Express	4 D scans
Cervical cancer vaccination at Point of Care Centres	U Mama
Health screening	Back up
For full details on the above member benefits please visit the 'Member Benefits' section on www.avivahealth.ie	

¹For the schedule of benefits for professional fees please contact Aviva on 1890 717 717

² For the medical and surgical appliances list please contact Aviva on 1890 717 717 or visit www.avivahealth.ie

Please refer to terms and conditions in the membership handbook.

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