

WHAT YOU’RE COVERED FOR

Table of Cover - Level Health Plan Pro

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Your Hospital Cover	
Public Hospitals	
Day case	Full cover
Semi-private room	Full cover
Private room	Full cover
Private Hospitals	
Day case	Covered with a €100 excess per claim
Semi-private room	Covered with a €100 excess per admission
Private room	Covered at semi-private rate with €100 excess per admission
Specified orthopaedic procedures	Co-payment of €4,000 (in addition to excess)
Specified ophthalmic procedures	Co-payment of €400 (in addition to excess)
High-Tech Hospitals (Blackrock Clinic, Mater Private Dublin)	
Day case	Covered with a €100 excess per claim
Semi-private room	Covered with a €500 excess per night
Private room	Covered at semi-private rate with €500 excess per night
Cardiac procedures	Covered with a €100 excess per admission
Specified orthopaedic procedures	Co-payment of €4,000 (in addition to excess)
Specified ophthalmic procedures	Co-payment of €400 (in addition to excess)

All benefits are per policy year unless otherwise stated. For full terms and conditions, read your Policy Document.

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Your hospital cover means the amount we pay the hospital directly for the bed that you are in while in hospital. It includes cover for in-patient (overnight stay) treatments and day case (admitted and discharged on the same day) services.

Covered at semi-private rate means that if you choose accommodation in a private room, we will cover up to the rate of a semi-private room and you pay the rest.

A full list of all approved hospitals can be found [here](#).

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Hospital Cover - Other Benefits

Consultants' fees	Full cover for participating consultants
Psychiatric treatment	Covered up to 100 days per calendar year (with any insurer), subject to excess
Drug, alcohol, gambling & substance abuse	Covered up to 91 days every 5 years (with any insurer), subject to excess
Convalescence care	€26 per day for up to 14 days 
Oncotype testing	Covered (subject to pre-approval), day case excess may apply
Genetic testing	Covered (subject to pre-approval), day case excess may apply
FoundationOne CDx	Covered (subject to pre-approval), day case excess may apply
Vasectomy	Up to €400 contribution (once per lifetime), paid directly to the registered GP or consultant



Maternity Benefits

Maternity in-patient hospital delivery	Full cover up to 3 nights
Homebirth	Cover up to €3,500 
In-patient maternity consultant fees	Full cover for participating consultants
Post-natal home support (if hospital stay is less than 3 nights)	Up to €800 for eligible expenses per pregnancy if home after 1 night in hospital, or up to €400 if home after 2 nights in hospital 
Pre-natal care	Up to €350 for eligible expenses per pregnancy 
Post-natal care	Up to €350 for eligible expenses per pregnancy 



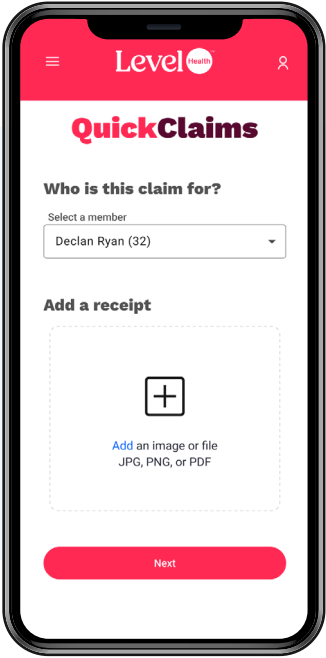
Cash Support Benefits (per policy year)

Cancer support benefit	Up to €500 for eligible expenses 
Child hospitalisation support benefit	Up to €250 for eligible expenses 
Fertility support benefit	50% up to €1000, 3 times per lifetime (to include preservation benefits, testing & treatment) 



QuickClaims

This icon means you can claim this benefit using our QuickClaims service. Simply pay your healthcare provider, take a picture of your receipt, and submit it through QuickClaims on the [Level Health app](#) to get your refund.



You are covered for maternity care at any listed public hospital. There are no private maternity hospitals in Ireland.

If you choose to be a private patient in a public hospital, you will be covered for up to 3 nights. If your hospital stay is less than 3 nights, you may be able to claim for eligible expenses under the post-natal home support benefit.

If your delivery is by caesarean section, your hospital stay will be covered under your in-patient hospital cover.

Your private health insurance provides contributions towards in-patient consultant delivery fees, covering the obstetrician, anaesthetist and paediatrician.





International Cover		
International emergency hospital admission	Up to €100,000 per annum (must be arranged by calling International Assist Line)	
Repatriation	Up to €1,000,000 (must be arranged by calling International Assist Line)	
Companion expenses including repatriation	Up to €1,000	€€
Urgent care abroad	Up to €250 per visit	€€
Elective treatment outside Ireland	Covered up to €100,000, subject to pre-approval	€€



NEED HELP ABROAD?
Call our International Assist line
on +353 1 602 7004

This section explains cover outside of Ireland. That includes emergency hospital treatment that arises when you are on a temporary stay outside Ireland. It includes cover for repatriation expenses and companion expenses. It also includes elective cover in hospitals outside Ireland for which you may be able to make a claim. For elective treatment outside Ireland, we cover up to the same amount that the treatment would cost in Ireland, up to a maximum of €100,000.



Urgent Care		
Public A&E	Up to €100 per visit	€€
Urgent Care Clinics & Minor Injury Units	Up to €250 per visit in approved centres	€€
Emergency Departments in Private Hospitals	Up to €250 per visit in approved centres	€€

You can claim back the cost of attending an approved Urgent Care Clinic or Minor Injury Unit, or an Emergency Department in a Private Hospital. Minor Injury and Urgent Care Clinics are walk-in medical clinics for treatments of broken bones, sprains, strains and other minor illnesses.

A full list of all available Urgent Care Clinics, Minor Injury Units, and Emergency Departments in Private Hospitals can be found [here](#).



Scans		
MRI, CT and PET-CT scans (in approved facilities)	Full cover	
MRI, CT and PET-CT scans (in non-approved facilities)	Covered up to €150	€€
Dexa scan (in approved facilities)	Full cover	
Mammogram (in approved facilities)	Full cover	
Mammogram (in non-approved facilities)	Covered up to €100	€€
Ultrasound	Covered up to €100	€€

A full list of all approved scan centres can be found [here](#).





Day to Day Medical Expenses (subject to excess)		
Excess per person	€1	
GP visits	€40 per visit, 6 visits per annum*	
Consultant visits	€150 per visit, 2 visits per annum*	
Dentist visits (routine treatment)	€40 per visit, 6 visits per annum*	
Physiotherapist visits	€40 per visit, 6 visits per annum*	
Psychotherapy and counselling	€40 per visit, 6 visits per annum*	
Complementary therapists (Acupuncture, Chiropody, Chiropractor, Dietician, Massage Therapist, Nutritionist, Occupational Therapist, Optometrist, Osteopathy, Physical Therapy, Podiatrist, Reflexology, Reiki, Speech and Language Therapist)	€40 per visit, 6 visits per annum*	
Health screen	€250 x 1 per annum	
Radiology diagnostic test	Up to €20 per claim	
Radiologist fees	Up to €25 per claim	
Pathology diagnostic test	Up to €20 per claim	
Pathologist fees	Up to €25 per claim	
Wellness support benefit	Up to €50	
Emergency dental benefit	Up to €250 per claim	
Optical benefit	Up to €75	
Travel vaccinations	Up to €100	
Child development assessment	Up to €250 per lifetime	
Female health benefit	Up to €100	
Overall limit on Day to Day benefits	€2,000	



Your plan includes cashback for face-to-face visits for a range of everyday health expenses. These are consultations that generally take place outside of a hospital setting. You can claim for these through QuickClaims on the [Level Health app](#).

***Pooling applies to these Day to Day medical expenses, meaning you can share visits with other members on the same policy and plan.**

The benefit for Complementary Therapists covers the number of visit(s) you can claim for in total across all of the listed practitioners, not a number of visits for each type of practitioner.





For further information or support:



Visit us at
levelhealth.ie



Contact us
[here](#)



Call us on
01 261 2000



WhatsApp
chat [here](#)



IT'S SIMPLY SMARTER.

Download the Level Health app now.



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Backed by

