Laya rule changes effective 01.11.2017

**1. Amendment to Emergency Hospital Inpatient Admission Overseas**

The word “in-patient” added to this rule to clarify this rule further.

This rule will now read: This benefit is payable for in-patient treatment received outside Ireland by a member in an emergency because of sudden illness or injury while travelling temporarily outside Ireland. The limit allowed on a member’s scheme applies to each episode of illness or injury. An episode means a continuous period of illness or injury. Periods of illness separated by less than 28 days shall be treated as continuous. This benefit is only eligible when the treatment is approved by laya healthcare’s approved overseas provider.

**2. Outpatient receipts, date order assessment.**

This is a new rule and will read: All outpatient receipts are assessed in date order received and date of service as per your laya healthcare scheme rules and table of benefits

**3. Amendment to the Parent Accompanying a Child Rule.**

The final 2 sentences added to this rule to make clear that this rule applies only to inpatient treatment received in Ireland.

This rule will now read: This is benefit towards the cost of accommodation and travel for a parent/guardian accompanying a child during an in-patient stay. We will pay this benefit if the child is under 14 years of age at their last renewal date during the child’s hospital admission. No benefit is payable for the first three days in-patient stay. We will pay this benefit for up to 14 days per child per admission. This benefit is only payable where the child has received medically necessary treatment that is eligible for benefit and has an in-patient stay for more than three days. Accommodation costs are limited to a hotel, B&B, hostel or hospital. There is no benefit towards the cost of food. Travel costs are limited to public transport, taxi, hackney or car parking costs. Only claims accompanied by dated receipts on headed paper are eligible for benefit. Benefit will be paid directly to the member of laya healthcare. This applies to inpatient treatment in a laya healthcare participating hospital only. This benefit does not apply to overseas claims.

**4. Amendment to the Personal Injuries Assessment Board Rule**

A sentence added here to clarify that laya healthcare is able to receive information from the PIAB in relation to a members claim

This rule will now read: Personal Injuries Assessment Board- Where you make your application to the Personal Injuries Assessment Board (“PIAB”), laya healthcare will pay benefit in accordance with these rules provided that you (or the subscriber/policy holder if you are under 18 years) complete in full and sign the standard laya healthcare claim form (including the accident section). This authorisation letter provided by you also authorises laya healthcare to provide the PIAB with details of all monies paid by laya healthcare relating to your application, and for the PIAB to release to laya healthcare details of the PIAB assessment in relation to the monies paid by laya healthcare. Where the PIAB decides that the case is more appropriately dealt with by the court, due to some legal dispute and issues a letter of Authorisation, laya healthcare will continue to rely on the undertakings provided by you in the Authorisation letter.

**5. Amendment to the Repatriation Rule**

The name of this rule was changed from “Repatriation” to “Medical Evacuation” to clarify this rule for members. The rest of the rule has remained unchanged.

Medical evacuation: This is benefit of up to €2,000,000 towards the cost of medically evacuating a person to the nearest medically appropriate country or receive treatment for which they are covered under the scheme if whilst travelling abroad they need the treatment in a medical emergency and the treatment is not available in the country in which they are travelling. This limit will apply to each person per year. In such circumstances we will also pay up to €1,000 towards the reasonable cost of evacuating to the nearest appropriate country or repatriating to Ireland, any one relative or companion who was travelling with them at the time. We will only pay the costs of repatriation or evacuation which is arranged by a laya healthcare approved overseas provider. This company can be contacted on +353 21 422 2204.

If a case is being managed by laya healthcare’s approved overseas provider the member must indicate at the outset whether they hold separate travel insurance in respect of their trip abroad. You must notify laya healthcare in writing if you wish to instigate any action against a third party following an accident abroad. Please refer to the third part section of this Scheme Rules.

**6. Amendment to the Park West Clinic Rule**

This rule will clarify that laya healthcare only cover certain procedures in the Park West Clinic. The rule will now read: We will only pay benefits for certain day-case and surgical out-patient treatment at these hospitals. We will not pay for other types of treatment at these hospitals. Please check your procedure with us prior to treatment.

**7. Addition of the Healthcoach rule**

This rule will read as follows. : This is a benefit for a tailored health and fitness programme for members aged 18 years or older. This programme is delivered by Spectrum Health, a laya healthcare approved service provider. Healthcoach uses an online questionnaire and/or a non-diagnostic face to face consultation with a personal trainer to tailor a health and fitness programme for the member which is delivered through a dedicated smartphone app. Members have continued access to the app and programmes for the duration of their contract only. Eligibility for a face to face consultation is based on the level of cover at the time of booking and must be carried out in one of the laya healthcare approved locations. Eligible members may avail of a free face to face consultation at no additional cost once every two years from the date of the last consultation covered by laya healthcare. Please refer to your Benefit Description Table for details of the cover on your selected scheme.

**8. Amendment to part of the Pre & Post Natal benefit Rule**

Upon review from our Medical practice team the criteria and medical training required for registration with the association of lactation consultants has been reviewed and there is enough medical training required without a member needing to be a midwife in addition.

This rule will now read: (r) a member of the Association of Lactation Consultants in Ireland who holds International Board Certified Lactation consultant membership.

**9. Amendment to our Women’s and Men’s cancer screening benefit**

These tests can be carried out by a G.P. and this rule amendment is allowing members greater access to this benefit.

This rule will now read: Men’s cancer screening: This is the benefit for charges for blood tests for prostate cancer screening with a registered G.P. This benefit is subject to the annual out-patient excess

Women’s cancer screening: This is benefit for charges for screening for cervical cancer and breast examination with a registered G.P. This benefit is subject to the annual out-patient excess.

**10. Amendment to our Reflexology rule**

This rule will now read:

This is benefit for charges by participating therapists for reflexology. The therapist must be a member of the Irish Reflexologists Institute, the federation of Holistic Therapists Ireland, the National Register of Reflexologists and/or The Certified Association of Reflexologists of Ireland