



**Irish Life**  
health

# Radiation Oncologist Services

## Ground Rules

2026

## 1. In-Patient Consultation

Consultant physician benefit will be paid on the basis of the in-patient attendance benefit rates .

## 2. Day Care Consultation

A day care consultation is the referral of a patient by the primary Consultant to a second Consultant for a medically necessary second opinion.

This consultation includes:

- > A full history and medical examination of all systems
- > Evaluation of appropriate diagnostic tests
- > Formal symptom assessment
- > Providing an opinion and/ or diagnosis and making an appropriate record of this.

The duration of this consultation must be for a minimum of 30 minutes and the reason stated with claim submitted.

Code	Description
8698	Day Care Oncology/ Radiation Oncology Department Consultation

## 3. Day Care

Consultant physician benefit for specified out-patient/ day care radiation oncology will be payable at the same benefit rates as apply to in-patient attendance.

If it is medically necessary for the patient to have repeat out-patient/ day care attendance for radiation oncology treatment, the benefit will be payable to the Consultant at the same rate as if the patient had been an in-patient. For multiple out-patient / day care radiotherapy, the attending Consultant's benefit is calculated at the end of the course of radiation oncology treatment.

Out-patient/ day care radiotherapy is only payable when it is medically necessary for a patient to be admitted to an Irish Life Health listed hospital day care facility. It is expected that ambulatory patients in need of radiation oncology will be treated on an ambulatory day care basis.

### These services include:

- > clinical treatment planning, manual design, simulation, computer assisted simulation, tumour localisation, treatment volume determination, treatment time/ dosage determination, choice of treatment modality, determination of number and size of treatment ports, selection of treatment devices and other procedures, consultations and assessments of the patient throughout the course of radiation

oncology treatment, psychological support for the patient and family (if necessary), by any form of radiation oncology device approved by Irish Life Health including brachytherapy, Cyber knife, IMRT, IGRT, SABR in a listed and approved Irish Life Health Facility.

*Note: Consultant day care\* radiation oncology comprehensive benefit services include (but are not limited to):*

- > clinical treatment planning
- > manual design
- > simulation
- > tumour localisation
- > treatment volume determination
- > treatment time/ dosage determination
- > choice of treatment modality
- > determination of number and size of treatment ports
- > selection of treatment devices and other procedures
- > Departmental clinical responsibility
- > Consultations and assessments of the patient throughout the course of radiotherapy treatment; psychological support for the patient and family (if required).

The benefits also include one follow up out-patient consultation after the course of radiation oncology treatment has been completed, which is included in the fee paid to the Consultant.

#### **4. Conditions of Payment:**

In exceptional circumstances when there is a delay in the submission of a claim in excess of three months from the date of test/ service, the Consultant radiation oncologist may submit to Irish Life Health a completed claim form which must include:

- > A fully completed and signed claim form, both side 1 and 2
- > Members discharge summary
- > All other invoices related to the admission i.e. hospital and other secondary Consultants, attached within twelve months discharge of the member

The Claims Manager in Irish Life Health must be notified by the Consultant, explaining the reason for the use of this exception.

This exception **may not be availed of** for routine bill submission due to routine or on-going completion delays by either the submitting hospital or the admitting Consultant.

All Fees must be submitted within three years of the patient's discharge.

Where an invoice is not submitted within this period, the consultant may not charge the patient for the non-submitted amount.

The benefits listed in the radiation oncology benefits section of the Schedule are inclusive of all forms of imaging guidance evaluation throughout the radiotherapy sessions, except as otherwise stated.

**The benefit paid also incorporates one follow-up out-patient consultation** after the course of radiation oncology treatment has been completed.

The benefit levels are site specific. However, if the site listing is not shown below then please report full details of the site(s) involved which must be documented on the claim form .

*\*It is expected that most ambulatory patients in need of radiation oncology will be treated on an out-patient / day care basis. The in-patient attendance rates only apply to patients who are admitted to hospital for fractionation treatment.*

## **5. Interstitial Brachytherapy**

This includes the generation of complex computerised plan or CT planning with homogeneity criteria assessment/ minimum/ maximum point assessment and brachytherapy treatment and removal of needles when course is completed.

All-inclusive benefit for multiple fractions including one follow-up out-patient consultation after the course of treatment has been completed.

## **6. Stereotactic Radiotherapy – Cyber Knife Surgery**

The benefit for cyber knife surgery is all-inclusive, subject to pre-approval, and includes, but is not limited to:

- > One or more treatment sessions
- > Evaluation of all digitised data
- > Target outline
- > Radiation treatment planning
- > CT scan evaluation
- > Volumetric analysis

The benefit will only be provided following a multi-disciplinary team meeting and is only claimable when the course of treatment is fully completed. Benefit is payable once per anatomical site. The relevant procedure code should be used to indicate the site at which the treatment occurs.

Irish Life Health requires that all radiation oncologists provide the minimum number of treatment beams/ fractions in line with international best practice.



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