

Terms & Conditions Changes

- for policies renewing from 1st December 2025

To keep you fully informed of updates that affect your policy at renewal time, the terms and conditions changes that have come into effect since your last renewal are shown below. Some of these changes will only impact you if the benefit is available on your plan. Please see your full membership handbook and Table of Cover for details of what is covered on your plan.

Handbook name	What's changing?	Previous wording	Updated wording
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	From 1st January 2025, there will be a change in our hospital lists, when 6 clinics will be moved from the Treatment Centres list to the Private Hospital list. This means that any applicable private hospital day case excess listed on your Table of Cover will apply to the 6 clinics, where these clinics are covered under your plan. To allow for this change and transition, Irish Life Health will waive the excess for treatment up to and including 31st December 2025.	Lists of Medical Facilities - 1, 2, 3, A, B, C B. Treatment Centres Dublin Affidea Tallaght Minor Surgery Clinic - Treatment Centre Eccles Clinic, Dublin 7	

Handbook name	What's changing?	Previous wording	Updated wording
Tailored Health Plans Membership Handbook	Update to the Child orthodontics benefit wording.	Section 2.1 Out-patient and Day to Day benefits Child orthodontics This benefit allows a child member to claim a contribution towards the costs of an orthodontist*. This benefit is only available to members who are under 18 years of age.	Section 2.1 Out-patient and Day to Day benefits Child orthodontics This benefit allows a child member to claim a contribution towards the costs of orthodontic treatment provided by an orthodontist*. This benefit is only available to members who are under 18 years of age.
Tailored Health Plans Membership Handbook	Benefit extended to include cover towards the Irish Life Dublin Marathon entry fee	Section 2.1 Day-to-Day and Out-patient Benefits Sports Club / Gym Membership / Classes This benefit provides a contribution towards the cost of an annual subscription to a Gym or a sports club governed by one of the National Governing Bodies of Sport in Ireland (NGBs) recognised by Sport Ireland for adult or child members; or towards a course of Yoga or Pilates classes led by a yoga/pilates instructor* for adult members; or dance, gymnastics, basketball, tennis, karate, taekwon-do, judo or swimming classes for child members. You must provide evidence of the annual subscription that you have signed up to and confirmation of the total amount paid/payable for your membership (e.g. a receipt from your club). The following items are specifically excluded from this benefit: a subscription to a social/members club, a course or module within a gym or sports club or any classes not listed in this benefit. The beneficiary named on a receipt must have this benefit under their plan in order to be eligible to claim.	Section 2.1 Day-to-Day and Out-patient Benefits Sports Club / Gym Membership / Classes This benefit provides a contribution towards the cost of an annual subscription to a Gym or a sports club governed by one of the National Governing Bodies of Sport in Ireland (NGBs) recognised by Sport Ireland for adult or child members; or towards a course of Yoga or Pilates classes led by a yoga/pilates instructor*, or towards the cost of your Irish Life Dublin Marathon entry fee for adult members; or dance, gymnastics, basketball, tennis, karate, taekwon-do, judo or swimming classes for child members. You must provide evidence of the annual subscription that you have signed up to and confirmation of the total amount paid/payable for your membership (e.g. a receipt from your club). When claiming for your Marathon entry fee, you must submit the Dublin Marathon - Acknowledgment of Entry email that you received from Dublin Marathon. The following items are specifically excluded from this benefit: a subscription to a social/members club, a course or module within a gym or sports club or any classes not listed in this benefit. The beneficiary named on a receipt must have this benefit under their plan in order to be eligible to claim.
Health Plans Membership Handbook	Benefit extended to include cover towards the Irish Life Dublin Marathon entry fee	Section 2.1 Day-to-Day and Out-patient Benefits Sports Club / Gym Membership / Classes This benefit provides a contribution towards the cost of your annual subscription to a Gym or a sports club governed by one of the National Governing Bodies of Sport in Ireland (NGBs) recognised by Sport Ireland; or children's dance, gymnastics, basketball, tennis, karate, taekwon-do, judo or swimming classes. You must provide evidence of the annual subscription that you have signed up to and confirmation of the total amount paid/payable for your membership (e.g. a receipt from your club). The following items are specifically excluded from this benefit: a subscription to a social/members club, a course or module within a gym or sports club or any classes not listed in this benefit. This benefit can only be claimed once per policy year. The beneficiary named on a receipt must have this benefit under their plan in order to be eligible to claim.	Section 2.1 Day-to-Day and Out-patient Benefits Sports Club / Gym Membership / Classes This benefit provides a contribution towards the cost of your annual subscription to a Gym or a sports club governed by one of the National Governing Bodies of Sport in Ireland (NGBs) recognised by Sport Ireland, or towards the cost of your Irish Life Dublin Marathon entry fee; or children's dance, gymnastics, basketball, tennis, karate, taekwon-do, judo or swimming classes. You must provide evidence of the annual subscription that you have signed up to and confirmation of the total amount paid/ payable for your membership (e.g. a receipt from your club). When claiming for your Marathon entry fee, you must submit the Dublin Marathon - Acknowledgment of Entry email that you received from Dublin Marathon. The following items are specifically excluded from this benefit: a subscription to a social/members club, a course or module within a gym or sports club or any classes not listed in this benefit. This benefit can only be claimed once per policy year. The beneficiary named on a receipt must have this benefit under their plan in order to be eligible to claim.

Handbook name	What's changing?	Previous wording	Updated wording
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to scans benefit wording - MRI scans, Cardiac CT scans, PET-CT and PSMA scans and general notes	Section 2.1 Day-to-Day and Out-patient Benefits MRI Scans You must be referred by a consultant, GP or a Physiotherapist*. Acceptance of Physiotherapist* referrals are at the discretion of the approved scan centre and we advise you to confirm this in advance. For MRI scans in St. James's Hospital you must be referred by an oncologist or other clinician working in St. James's Hospital and the scan is required for the diagnosis, treatment or staging of a cancer. Cardiac CT Scans You must be referred by a consultant. All cardiac CT scans (including CT TAVI scans where available) must be carried out in an approved cardiac scan facility list (see the tables of MRI and CT facilities in section 12 of this Membership Handbook). Calcium CT scoring is not covered under this benefit. PET-CT and PSMA Scans All PET-CT and PSMA scans must be pre-authorised by us. You must be referred by a consultant. notes In addition the clinical indicators which relate to your type of scan must be satisfied before it will be covered. The clinical indicators which must be satisfied before you will be covered for a cardiac MRI or cardiac CT scan are set out in the List of Clinical Indicators for Cardiac MRI and Cardiac CT Scans. Calcium CT scoring is not covered under this benefit but may be claimed under Out-patient Radiology: cost of test where this benefit is available on your plan.	Section 2.1 Day-to-Day and Out-patient Benefits MRI Scans You must be referred by a consultant, GP or a Physiotherapist*. Acceptance of Physiotherapist* referrals for direct settlement are at the discretion of the approved scan centre and we advise you to confirm this in advance. For MRI scans in St. James's Hospital you must be referred by an oncologist or other clinician working in St. James's Hospital and the scan is required for the diagnosis, treatment or staging of a cancer. Cardiac CT Scans You must be referred by a consultant. All cardiac CT scans (including CT TAVI scans where available) must be carried out in an approved cardiac scan facility list (see the tables of MRI and CT facilities in section 12 of this Membership Handbook). In some facilities, diagnostic calcium CT scoring may be included, however, cover is limited to our agreements with our providers. PET-CT and PSMA Scans All PET-CT and PSMA scans must be referred by a consultant. notes In addition the clinical indicators which relate to your type of scan must be satisfied before it will be covered. The clinical indicators which must be satisfied before you will be covered for a cardiac MRI or cardiac CT scan are set out in the List of Clinical Indicators for Cardiac MRI and Cardiac CT Scans. Independent Calcium CT scoring scans are not covered under this benefit but may be claimed under Out-patient Radiology: cost of test where this benefit is available on your plan. Please note certain scan centres will only accept Consultant referrals for all scan types. Please contact your scan centre to confirm cover before you attend.
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to the Message A Doctor service	Section 2.1 Day-to-Day and Out-patient Benefits Digital Doctor: Message A Doctor You can message a Doctor about a non-emergency medical query anytime via MyClinic in your online account. This service is advice only and is not designed to provide a diagnosis, treatment, or prescriptions. This service is provided by Abi Global**.	Section 2.1 Day-to-Day and Out-patient Benefits Digital Doctor: Message A Doctor You can message a Doctor about a non-emergency medical query anytime via MyClinic in your online account. This messaging service is advice only and is not designed to provide a diagnosis, treatment, or prescriptions. In certain clinical circumstances where the doctor deems it appropriate, you may be presented with the option of speaking to a doctor via video call following a messaging interaction. This service is provided by Abi Global**.

Handbook name	What's changing?	Previous wording	Updated wording
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to benefit wording	Section 2.1 Day-to-Day and Out-patient Benefits Minor Injury Clinic Cover Under this benefit we will cover some of the cost of attending one of our approved minor injury clinics. We will pay the minor injury clinic directly, up to the amount detailed on your Table of Cover for each visit, towards initial consultation and, if deemed necessary the following treatments related to the initial consultation: x-ray, stitching, full cast, temporary cast, splints and crutches. An age restriction for minors may apply to the clinic's services, please check with the Minor Injury Clinic centre in advance of travelling. We will not cover the charge for the following take home aids; boots and braces, these and any other balance should be paid by you to the minor injury clinic. Please note that any additional amount paid by you to the minor injury clinic cannot be claimed back under out-patient, Day-to-Day or any other benefit on your plan. How to claim You can find the most current lists of facilities on our website www.irishlifehealth.ie/hospital-lists. The medical facilities which will be paid directly by us may change from time to time.	Section 2.1 Day-to-Day and Out-patient Benefits Minor Injury Clinic Cover Under this benefit we will cover some of the cost of attending one of our approved direct settlement minor injury clinics. We will pay the minor injury clinic directly, up to the amount detailed on your Table of Cover for each visit, towards initial consultation and, if deemed necessary treatments related to the initial consultation such as x-ray, stitching, full cast, temporary cast, splints and crutches. You can find the most current list of clinics and details of applicable charges, which may be subject to change, and a list of what's covered at www.irishlifehealth.ie/expresscare. An age restriction for minors may apply to the clinic's services, please check with the Minor Injury Clinic centre in advance of travelling. Any balance due should be paid by you to the minor injury clinic at the time of your visit. Please note that any additional amount paid by you to the minor injury clinic cannot be claimed back under out-patient, Day-to-Day or any other benefit on your plan. How to claim You can find the most current lists of facilities on our website www.irishlifehealth.ie/hospital-lists. The medical facilities which will be paid directly by us may change from time to time.
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to benefit wording	Section 2.1 Day-to-Day and Out-patient Benefits Minor Injury Clinic Cover (Pay & Claim) This benefit allows you to claim back some of the charge imposed when you attend an approved pay and claim minor injury clinic. We will contribute up to the amount detailed on your Table of Cover towards initial consultation and, if deemed necessary the following treatments related to the initial consultation: x-ray, stitching, full cast, temporary cast, splints and crutches. We will not cover the charge for the following take home aids: boots and/or braces. An age restriction for minors may apply to the clinic's services, please check with the Minor Injury Clinic centre in advance of travelling. You can find the most current list of minor injury clinics covered on our website www.irishlifehealth.ie/hospital-lists	Section 2.1 Day-to-Day and Out-patient Benefits Minor Injury Clinic Cover (Pay & Claim) This benefit allows you to claim back some of the charge imposed when you attend an approved pay and claim minor injury clinic. We will contribute up to the amount detailed on your Table of Cover towards initial consultation and, if deemed necessary treatments related to the initial consultation such as x-ray, stitching, full cast, temporary cast, splints and crutches. You can find the most current list of clinics and details of applicable charges, which may be subject to change, and a list of what's covered at www.irishlifehealth.ie/expresscare. An age restriction for minors may apply to the clinic's services, please check with the Minor Injury Clinic centre in advance of travelling.

Handbook name	What's changing?	Previous wording	Updated wording
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to benefit wording	Section 2.1 Day-to-Day and Out-patient Benefits Welcome Home Food Hamper This benefit allows you to claim a Welcome Home Food Hamper and a 30-minute telephone consultation from the nutritionists at Gourmet Fuel**. The hamper includes 5 healthy dinners, lunches and snacks of your choice from the list provided on Gourmetfuel.com which is delivered to your home. To redeem this benefit, you will need to go to https://gourmetfuel.com/irishlifehealth/ and order through the online form. We will pay the service provider directly (by direct settlement). This benefit may only be claimed by one member (either parent) in respect of each birth and must be claimed within 12 months from the date on which your baby was born. To be eligible for this benefit, you must be covered under an in force policy with Irish Life Health at the time your baby is born and at the time you receive the service.	Section 2.1 Day-to-Day and Out-patient Benefits Welcome Home Food Hamper This benefit allows you to claim a Welcome Home Food Hamper delivered to your home and a 30-minute telephone consultation from the nutritionists at Gourmet Fuel**. Gourmet Fuel** will provide eligible members with a voucher code to spend on their choice of meals at Gourmetfuel.com. To redeem this benefit, you will need to go to https://gourmetfuel.com/irishlifehealth/ and order through the online form. We will pay the service provider directly (by direct settlement). This benefit may only be claimed by one member (either parent) in respect of each birth and must be claimed within 12 months from the date on which your baby was born. To be eligible for this benefit, you must be covered under an in force policy with Irish Life Health with this benefit available under your plan both at the time your baby is born and at the time you receive the service.
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to the pre-authorisation process	Section 2.4 Other Benefits Gender Affirmation Under this benefit, we will contribute towards your medical costs for gender affirmation surgical procedures as set out in the List of Gender Affirmation Surgical Procedures where you have been diagnosed with the condition Gender Dysphoria and where the procedures are carried out in a medical facility worldwide. > The surgical procedure must be performed within 31 days from when you leave Ireland; > The surgical procedure must be performed before your pre-authorisation expires. Your pre-authorisation will end after six months from when it is granted, or at the end of the policy year, whichever is sooner.	Section 2.4 Other Benefits Gender Affirmation Under this benefit, we will contribute towards your medical costs for gender affirmation surgical procedures as set out in the List of Gender Affirmation Surgical Procedures where you have been diagnosed with the condition Gender Dysphoria and where the procedures are carried out in a medical facility worldwide. > The surgical procedure must be performed within 31 days from when you leave Ireland; > The surgical procedure must be performed before your pre-authorisation expires. Your pre-authorisation will end either six months from when it is granted, or if you change your plan and reduce your level of cover, or if you cease to be a member of Irish Life Health, whichever is sooner.

Handbook name	What's changing?	Previous wording	Updated wording
Health Plans Membership Handbook	Update to the Emergency Inpatient Treatment Abroad - Hospital bill for inpatient treatment benefit wording	Section 2.5 Overseas Benefits Emergency Inpatient Treatment Abroad and related benefits Hospital bill for inpatient treatment Under this benefit we will cover your medical costs for emergency care in a medical facility abroad whilst on a prebooked temporary stay abroad not exceeding 31 days in duration where: > The emergency care is medically necessary; > The emergency care is authorised and arranged by Irish Life Health; > You are required to stay overnight or longer in a hospital bed; > You began your emergency care abroad within 31 days of your departure from Ireland, or your emergency care abroad commenced within 31 days of birth and you have been added to an existing policy held by your legal guardian; > You receive the emergency care in an internationally recognised hospital; > You have not travelled against medical advice; > You were not suffering from a terminal illness when you left Ireland; and > You did not suspect when you left Ireland that you might require any medical care when you were abroad and a reasonable person in your position would not have suspected that you would require any medical care when you were abroad. Your return journey must be booked before you begin your outward journey and your temporary stay abroad must be no longer than 31 days in duration. There is a maximum amount that can be claimed under this benefit on your plan. This will be shown in your Table of Cover. We will not cover: > non-medical expenses; > costs incurred where you did not stay overnight in hospital > medical care that has not been authorised and arranged by us; > elective treatments or procedures or follow on care, regardless of whether this is related to your emergency care; > medical care that could be delayed until your return to Ireland. > medical care if you have travelled abroad after 34 weeks following the commencement of your pregnancy.	Section 2.5 Overseas Benefits Emergency Inpatient Treatment Abroad and related benefits Hospital bill for inpatient treatment Under this benefit we will cover your medical costs for emergency care in a medical facility abroad where: > The emergency care is medically necessary; > The emergency care is authorised and arranged by Irish Life Health; > You are required to stay overnight or longer in a hospital bed; > You began your emergency care abroad within 31 days of your departure from Ireland, or your emergency care abroad commenced within 31 days of birth and you have been added to an existing policy held by your legal guardian; > You receive the emergency care in an internationally recognised hospital; > You have not travelled against medical advice; > You were not suffering from a terminal illness when you left Ireland; and > You did not suspect when you left Ireland that you might require any medical care when you were abroad and a reasonable person in your position would not have suspected that you would require any medical care when you were abroad. There is a maximum amount that can be claimed under this benefit on your plan. This will be shown in your Table of Cover. We will not cover: > non-medical expenses; > costs incurred where you did not stay overnight in hospital; > medical care that has not been authorised and arranged by us; > elective treatments or procedures or follow on care, regardless of whether this is related to your emergency care; > medical care that could be delayed until your return to Ireland; > medical care if you have travelled abroad after 34 weeks following the commencement of your pregnancy.

Handbook name	What's changing?	Previous wording	Updated wording
Tailored Health Plans Membership Handbook	Update to the Orthodontic benefit wording.	Section 2.5 Personalised Packages Dental & Optical Package Orthodontic benefit This benefit allows a member to a contribution towards the costs of an orthodontist*. Pay and claim	Section 2.5 Personalised Packages Dental & Optical Package Orthodontic benefit This benefit allows a member to a contribution towards the costs of orthodontic treatment provided by an orthodontist*. Pay and claim
Tailored Health Plans Membership Handbook	Update to the Child/Teen orthodontics benefit wording.	Section 2.5 Personalised Packages Children Extra Child/Teen orthodontics This benefit allows a child member to a contribution towards the costs of an orthodontist*. Pay and claim	Section 2.5 Personalised Packages Children Extra Child/Teen orthodontics This benefit allows a child member to a contribution towards the costs of orthodontic treatment provided by an orthodontist*. Pay and claim
Tailored Health Plans Membership Handbook	Update to benefit wording	Section 2.5 Personalised Packages: Fertility & Maternity Welcome Home Food Hamper This benefit allows you to claim a Welcome Home Food Hamper and a 30-minute telephone consultation from the nutritionists at Gourmet Fuel**. The hamper includes 5 healthy dinners, lunches and snacks of your choice from the list provided on Gourmetfuel.com which is delivered to your home. To redeem this benefit, you will need to go to https://gourmetfuel.com/irishlifehealth/ and order through the online form. We will pay the service provider directly (by direct settlement). This benefit may only be claimed by one member (either parent) in respect of each birth and must be claimed within 12 months from the date on which your baby was born. To be eligible for this benefit, you must be covered under an in force policy with Irish Life Health at the time your baby is born and at the time you receive the service.	Section 2.5 Personalised Packages: Fertility & Maternity Welcome Home Food Hamper This benefit allows you to claim a Welcome Home Food Hamper delivered to your home and a 30-minute telephone consultation from the nutritionists at Gourmet Fuel**. Gourmet Fuel** will provide eligible members with a voucher code to spend on their choice of meals at Gourmetfuel.com. To redeem this benefit, you will need to go to https://gourmetfuel.com/irishlifehealth/ and order through the online form. We will pay the service provider directly (by direct settlement). This benefit may only be claimed by one member (either parent) in respect of each birth and must be claimed within 12 months from the date on which your baby was born. To be eligible for this benefit, you must be covered under an in force policy with Irish Life Health with this benefit available under your plan both at the time your baby is born and at the time you receive the service.
Tailored Health Plans Membership Handbook	Update to benefit wording	Section 2.5 Personalised Packages: Maternity Extra Welcome Home Food Hamper This benefit allows you to claim a Welcome Home Food Hamper and a 30-minute telephone consultation from the nutritionists at Gourmet Fuel**. The hamper includes 5 healthy dinners, lunches and snacks of your choice from the list provided on Gourmetfuel.com which is delivered to your home. To redeem this benefit, you will need to go to https://gourmetfuel.com/irishlifehealth/ and order through the online form. We will pay the service provider directly (by direct settlement). This benefit may only be claimed by one member (either parent) in respect of each birth and must be claimed within 12 months from the date on which your baby was born. To be eligible for this benefit, you must be covered under an in force policy with Irish Life Health at the time your baby is born and at the time you receive the service.	Section 2.5 Personalised Packages: Maternity Extra Welcome Home Food Hamper This benefit allows you to claim a Welcome Home Food Hamper delivered to your home and a 30-minute telephone consultation from the nutritionists at Gourmet Fuel**. Gourmet Fuel** will provide eligible members with a voucher code to spend on their choice of meals at Gourmetfuel.com. To redeem this benefit, you will need to go to https://gourmetfuel.com/irishlifehealth/ and order through the online form. We will pay the service provider directly (by direct settlement). This benefit may only be claimed by one member (either parent) in respect of each birth and must be claimed within 12 months from the date on which your baby was born. To be eligible for this benefit, you must be covered under an in force policy with Irish Life Health with this benefit available under your plan both at the time your baby is born and at the time you receive the service.

Handbook name	What's changing?	Previous wording	Updated wording
Tailored Health Plans Membership Handbook	Update to benefit wording	Section 2.5 Personalised Packages: Enhanced Maternity Welcome Home Food Hamper This benefit allows you to claim a Welcome Home Food Hamper and a 30-minute telephone consultation from the nutritionists at Gourmet Fuel**. The hamper includes 5 healthy dinners, lunches and snacks of your choice from the list provided on Gourmetfuel.com which is delivered to your home. To redeem this benefit, you will need to go to https://gourmetfuel.com/irishlifehealth/ and order through the online form. We will pay the service provider directly (by direct settlement). This benefit may only be claimed by one member (either parent) in respect of each birth and must be claimed within 12 months from the date on which your baby was born. To be eligible for this benefit, you must be covered under an in force policy with Irish Life Health at the time your baby is born and at the time you receive the service.	Section 2.5 Personalised Packages: Enhanced Maternity Welcome Home Food Hamper This benefit allows you to claim a Welcome Home Food Hamper delivered to your home and a 30-minute telephone consultation from the nutritionists at Gourmet Fuel**. Gourmet Fuel** will provide eligible members with a voucher code to spend on their choice of meals at Gourmetfuel.com. To redeem this benefit, you will need to go to https://gourmetfuel.com/irishlifehealth/ and order through the online form. We will pay the service provider directly (by direct settlement). This benefit may only be claimed by one member (either parent) in respect of each birth and must be claimed within 12 months from the date on which your baby was born. To be eligible for this benefit, you must be covered under an in force policy with Irish Life Health with this benefit available under your plan both at the time your baby is born and at the time you receive the service.
Tailored Health Plans Membership Handbook	Update to benefit wording	Section 2.5 Personalised Packages: Enhanced Protection & Maternity Welcome Home Food Hamper This benefit allows you to claim a Welcome Home Food Hamper and a 30-minute telephone consultation from the nutritionists at Gourmet Fuel**. The hamper includes 5 healthy dinners, lunches and snacks of your choice from the list provided on Gourmetfuel.com which is delivered to your home. To redeem this benefit, you will need to go to https://gourmetfuel.com/irishlifehealth/ and order through the online form. We will pay the service provider directly (by direct settlement). This benefit may only be claimed by one member (either parent) in respect of each birth and must be claimed within 12 months from the date on which your baby was born. To be eligible for this benefit, you must be covered under an in force policy with Irish Life Health at the time your baby is born and at the time you receive the service.	Section 2.5 Personalised Packages: Enhanced Protection & Maternity Welcome Home Food Hamper This benefit allows you to claim a Welcome Home Food Hamper delivered to your home and a 30-minute telephone consultation from the nutritionists at Gourmet Fuel**. Gourmet Fuel** will provide eligible members with a voucher code to spend on their choice of meals at Gourmetfuel.com. To redeem this benefit, you will need to go to https://gourmetfuel.com/irishlifehealth/ and order through the online form. We will pay the service provider directly (by direct settlement). This benefit may only be claimed by one member (either parent) in respect of each birth and must be claimed within 12 months from the date on which your baby was born. To be eligible for this benefit, you must be covered under an in force policy with Irish Life Health with this benefit available under your plan both at the time your baby is born and at the time you receive the service.

Handbook name	What's changing?	Previous wording	Updated wording
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to the pre-authorisation process	Section 2.5 (Health Plans) / 2.6 (Tailored Health Plans) Overseas Benefit Emergency In-patient Treatment Abroad and related benefits Elective Overseas Referrals > You must have been referred for the surgical procedure abroad by a participating consultant in Ireland or through the International Second Opinion Service benefit, if applicable > The surgical procedure must be performed before your preauthorisation expires. Your pre-authorisation will end either six months from when it is granted, or at the end of the policy year;	Section 2.5 (Health Plans) / 2.6 (Tailored Health Plans) Overseas Benefit Emergency In-patient Treatment Abroad and related benefits Elective Overseas Referrals > You must have been referred for the surgical procedure abroad by a participating consultant in Ireland or through the International Second Opinion Service benefit, if applicable > The surgical procedure must be performed before your preauthorisation expires. Your pre-authorisation will end either six months from when it is granted, or if you change your plan and reduce your level of cover, or if you cease to be a member of Irish Life Health, whichever is sooner;
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to the Out-patient A&E abroad benefit wording	Section 2.5 (Health Plans) / 2.6 (Tailored Health Plans) Overseas Benefit Emergency In-patient Treatment Abroad and related benefits Out-patient A&E abroad Under this benefit you can claim a contribution from us towards the cost of the following emergency care where you receive it as an out-patient whilst you are abroad: Emergency room/ department fees, GP visits, Consultant visits, prescription drugs, pathology fees, radiology fees (i.e. X-Rays, mammograms and non-maternity ultrasounds), cost of one ambulance journey to a hospital or clinic for treatment and emergency dental treatment required as the result of an accident (please refer to section 2.1 for further, terms and conditions of Emergency Dental Care). To avail of this benefit, the costs being claimed must have been incurred outside of Ireland on a prebooked temporary stay abroad of not more than 31 days in duration and must have been incurred as a result of emergency care. The maximum amount that Irish Life Health will contribute under this benefit is set out in your Table of Cover. Non-medical expenses (e.g. phone calls, transport costs, miscellaneous expenses etc.) are not covered under this benefit. Your out-patient excess does not apply to this benefit.	Section 2.5 (Health Plans) / 2.6 (Tailored Health Plans) Overseas Benefit Emergency In-patient Treatment Abroad and related benefits Out-patient A&E abroad Under this benefit you can claim a contribution from us towards the cost of the following emergency care where you receive it as an out-patient whilst you are abroad: Emergency room/ department fees, GP visits, Consultant visits, prescription drugs, pathology fees, radiology fees (i.e. X-Rays, mammograms and non-maternity ultrasounds), cost of one ambulance journey to a hospital or clinic for treatment and emergency dental treatment required as the result of an accident (please refer to section 2.1 for further terms and conditions of Emergency Dental Care). To avail of this benefit, the costs being claimed must have been incurred outside of Ireland, as a result of emergency care, and within 31 days of your departure from Ireland. The maximum amount that Irish Life Health will contribute under this benefit is set out in your Table of Cover. Non-medical expenses (e.g. phone calls, transport costs, miscellaneous expenses etc.) are not covered under this benefit. Your out-patient excess does not apply to this benefit.

Handbook name	What's changing?	Previous wording	Updated wording
Tailored Health Plans Membership Handbook	Update to the Out-patient A&E abroad benefit wording	Section 2.5 Personalised Packages Travel Focus, Travel Extra Out-patient A&E abroad Under this benefit you can claim a contribution from us towards the cost of the following emergency care where you receive it as an out-patient whilst you are abroad: Emergency room/ department fees, GP visits, Consultant visits, prescription drugs, pathology fees, radiology fees (i.e. X-Rays, mammograms and non-maternity ultrasounds), cost of one ambulance journey to a hospital or clinic for treatment and emergency dental treatment required as the result of an accident (please refer to section 2.1 for further, terms and conditions of Emergency Dental Care). To avail of this benefit, the costs being claimed must have been incurred outside of Ireland on a prebooked temporary stay abroad of not more than 31 days in duration and must have been incurred as a result of emergency care. The maximum amount that Irish Life Health will contribute under this benefit is set out in your Table of Cover. Non-medical expenses (e.g. phone calls, transport costs, miscellaneous expenses etc.) are not covered under this benefit. Your out-patient excess does not apply to this benefit.	Section 2.5 Personalised Packages Travel Focus, Travel Extra, Travel Extra - Livewell Out-patient A&E abroad Under this benefit you can claim a contribution from us towards the cost of the following emergency care where you receive it as an out-patient whilst you are abroad: Emergency room/ department fees, GP visits, Consultant visits, prescription drugs, pathology fees, radiology fees (i.e. X-Rays, mammograms and non-maternity ultrasounds), cost of one ambulance journey to a hospital or clinic for treatment and emergency dental treatment required as the result of an accident (please refer to section 2.1 for further terms and conditions of Emergency Dental Care). To avail of this benefit, the costs being claimed must have been incurred outside of Ireland, as a result of emergency care, and within 31 days of your departure from Ireland. The maximum amount that Irish Life Health will contribute under this benefit is set out in your Table of Cover. Non-medical expenses (e.g. phone calls, transport costs, miscellaneous expenses etc.) are not covered under this benefit. Your out-patient excess does not apply to this benefit.
Tailored Health Plans Membership Handbook	Benefit extended to include cover towards the Irish Life Dublin Marathon entry fee	Section 2.5 Personalised Packages Sports Cover Package Travel & Sports Cover Package Adult sports club/gym membership This benefit provides a contribution towards the cost of your annual subscription to a Gym or the following sports clubs: GAA, AAI, FAI, IRFU. You must provide evidence of the annual subscription that you have signed up to and confirmation of the total amount paid/payable for your membership. The following items are specifically excluded from this benefit: A course of classes within a gym, a club or at an alternative facility, a subscription to a social/ members club. This benefit can only be claimed once per policy year.	Section 2.5 Personalised Packages Sports Cover Package Travel & Sports Cover Package Adult sports club/gym membership This benefit provides a contribution towards the cost of your annual subscription to a Gym or the following sports clubs: GAA, AAI, FAI, IRFU, or towards the cost of your Irish Life Dublin Marathon entry fee. You must provide evidence of the annual subscription that you have signed up to and confirmation of the total amount paid/payable for your membership. When claiming for your Marathon entry fee, you must submit the Dublin Marathon - Acknowledgment of Entry email that you received from Dublin Marathon. The following items are specifically excluded from this benefit: A course of classes within a gym, a club or at an alternative facility, a subscription to a social/ members club. This benefit can only be claimed once per policy year.

Handbook name	What's changing?	Previous wording	Updated wording
Tailored Health Plans Membership Handbook	Benefit extended to include cover towards the Irish Life Dublin Marathon entry fee	Section 2.5 Personalised Packages Student Cover Package Fitness Focus Sports Club / Gym Membership / Classes This benefit provides a contribution towards the cost of your annual subscription to a Gym or a sports club governed by one of the National Governing Bodies of Sport in Ireland (NGBs) recognised by Sport Ireland; or children's dance, gymnastics, basketball, tennis, karate, taekwon-do, judo or swimming classes. You must provide evidence of the annual subscription that you have signed up to and confirmation of the total amount paid/payable for your membership (e.g. a receipt from your club). The following items are specifically excluded from this benefit: a subscription to a social/members club, a course or module within a gym or sports club or any classes not listed in this benefit. This benefit can only be claimed once per policy year. The beneficiary named on a receipt must have this benefit under their plan in order to be eligible to claim.	Section 2.5 Personalised Packages Student Cover Package Fitness Focus Sports Club / Gym Membership / Classes This benefit provides a contribution towards the cost of your annual subscription to a Gym or a sports club governed by one of the National Governing Bodies of Sport in Ireland (NGBs) recognised by Sport Ireland, or towards the cost of your Irish Life Dublin Marathon entry fee; or children's dance, gymnastics, basketball, tennis, karate, taekwon-do, judo or swimming classes. You must provide evidence of the annual subscription that you have signed up to and confirmation of the total amount paid/payable for your membership (e.g. a receipt from your club). When claiming for your Marathon entry fee, you must submit the Dublin Marathon - Acknowledgment of Entry email that you received from Dublin Marathon. The following items are specifically excluded from this benefit: a subscription to a social/members club, a course or module within a gym or sports club or any classes not listed in this benefit. This benefit can only be claimed once per policy year. The beneficiary named on a receipt must have this benefit under their plan in order to be eligible to claim.
Tailored Health Plans Membership Handbook	Benefit extended to include cover towards the Irish Life Dublin Marathon entry fee	Section 2.5 Personalised Packages - Range of 8 Extras Sports Extra You Extra Sports Club / Gym Membership / Classes This benefit provides a contribution towards the cost of your annual subscription to a Gym or a sports club governed by one of the National Governing Bodies of Sport in Ireland (NGBs) recognised by Sport Ireland; or children's dance, gymnastics, basketball, tennis, karate, taekwon-do, judo or swimming classes. You must provide evidence of the annual subscription that you have signed up to and confirmation of the total amount paid/payable for your membership (e.g. a receipt from your club). The following items are specifically excluded from this benefit: a subscription to a social/members club, a course or module within a gym or sports club or any classes not listed in this benefit. This benefit can only be claimed once per policy year. The beneficiary named on a receipt must have this benefit under their plan in order to be eligible to claim. This benefit can only be claimed once per policy year and the same receipt cannot be claimed under the Sports Club / Gym membership / Classes benefit in the You Extra / Sports Extra.	Section 2.5 Personalised Packages - Range of 8 Extras Sports Extra You Extra Sports Club / Gym Membership / Classes This benefit provides a contribution towards the cost of your annual subscription to a Gym or a sports club governed by one of the National Governing Bodies of Sport in Ireland (NGBs) recognised by Sport Ireland for adult or child members; or towards a course of Yoga or Pilates classes led by a yoga/pilates instructor*, or towards the cost of your Irish Life Dublin Marathon entry fee for adult members; or dance, gymnastics, basketball, tennis, karate, taekwon-do, judo or swimming classes for child members. You must provide evidence of the annual subscription that you have signed up to and confirmation of the total amount paid/payable for your membership (e.g. a receipt from your club). When claiming for your Marathon entry fee, you must submit the Dublin Marathon - Acknowledgment of Entry email that you received from Dublin Marathon. The following items are specifically excluded from this benefit: a subscription to a social/members club, a course or module within a gym or sports club or any classes not listed in this benefit. This benefit can only be claimed once per policy year. The beneficiary named on a receipt must have this benefit under their plan in order to be eligible to claim. This benefit can only be claimed once per policy year and the same receipt cannot be claimed under the Sports Club / Gym membership / Classes benefit in the You Extra / Sports Extra.

Handbook name	What's changing?	Previous wording	Updated wording
Health Plans Membership Handbook	Update to benefit wording	Section 2.5 Overseas Benefits Repatriation expenses Under this benefit we will arrange and cover your transport back to Ireland when you require assistance to travel for medical reasons. Our medical advisors will determine whether your medical condition requires you to have assistance to travel. The opinion of our medical advisors is final. You must be willing to travel as soon as you are medically fit to do so. If you fail to accept the transport we offer you this benefit will be exhausted. All repatriation travel must be arranged by us. We will not cover the cost of any travel that has not been arranged by us. The maximum amount that we will cover under this benefit is set out in your Table of Cover. This benefit can only be claimed in conjunction with our 'hospital bill for in-patient treatment' benefit. Under this benefit we will also arrange and cover the return of your remains to Ireland should you die while on a temporary stay abroad not to exceed 31 days.	Section 2.5 Overseas Benefits Repatriation expenses Under this benefit we will arrange and cover the costs (up to a specified amount) of your transport back to Ireland where you are unable to use your return transport to return to Ireland for medical reasons. Our medical advisors will determine whether your medical condition requires you to have assistance to travel. The opinion of our medical advisors is final. You must be willing to travel as soon as you are medically fit to do so. If you fail to accept the transport we offer you this benefit will be exhausted. All repatriation travel must be arranged by us. We will not cover the cost of any travel that has not been arranged by us. The maximum amount that we will cover under this benefit is set out in your Table of Cover. This benefit is only available in conjunction with our 'hospital bill for in-patient treatment' benefit. This benefit is not available if you have not required emergency In-patient A&E treatment or if that treatment is not covered by us. Under this benefit we will also arrange and cover the return of your remains to Ireland should you die while abroad within 31 days of your departure from Ireland.
Tailored Health Plans Membership Handbook	Update to benefit wording	Section 2.6 Overseas Benefits Repatriation expenses Under this benefit we will arrange and cover your transport back to Ireland when you require assistance to travel for medical reasons. Our medical advisors will determine whether your medical condition requires you to have assistance to travel. The opinion of our medical advisors is final. You must be willing to travel as soon as you are medically fit to do so. If you fail to accept the transport we offer you this benefit will be exhausted. All repatriation travel must be arranged by us. We will not cover the cost of any travel that has not been arranged by us. The maximum amount that we will cover under this benefit is set out in your Table of Cover. This benefit can only be claimed in conjunction with our 'hospital bill for in-patient treatment' benefit. This benefit is not available if you have not required emergency In-patient A&E treatment or if that treatment is not covered by us. Under this benefit we will also arrange and cover the return of your remains to Ireland should you die while on a temporary stay abroad not to exceed 31 days.	Section 2.6 Overseas Benefits Repatriation expenses Under this benefit we will arrange and cover your transport back to Ireland when you require assistance to travel for medical reasons. Our medical advisors will determine whether your medical condition requires you to have assistance to travel. The opinion of our medical advisors is final. You must be willing to travel as soon as you are medically fit to do so. If you fail to accept the transport we offer you this benefit will be exhausted. All repatriation travel must be arranged by us. We will not cover the cost of any travel that has not been arranged by us. The maximum amount that we will cover under this benefit is set out in your Table of Cover. This benefit can only be claimed in conjunction with our 'hospital bill for in-patient treatment' benefit. This benefit is not available if you have not required emergency In-patient A&E treatment or if that treatment is not covered by us. Under this benefit we will also arrange and cover the return of your remains to Ireland should you die while abroad within 31 days of your departure from Ireland.

Handbook name	What's changing?	Previous wording	Updated wording
Tailored Health Plans Membership Handbook	Clarification of cover	Section 2.6 Overseas Benefits Elective Overseas Referral (introduction text) In some cases you will be covered for treatment overseas but it is essential that you speak to us first. Irish Life Health will have to pre-approve any procedures carried out outside of Ireland before you travel abroad for treatment. The treatment must be carried out when you are on a temporary stay abroad, which is no more than 31 days at a time.	Section 2.6 Overseas Benefits Elective Overseas Referral (introduction text) In some cases you will be covered for treatment overseas but it is essential that you speak to us first. Irish Life Health will have to pre-approve any procedures carried out outside of Ireland before you travel abroad for treatment. The treatment must be carried out within 31 days of your departure from Ireland.
Tailored Health Plans Membership Handbook	Update to the Emergency Inpatient Treatment Abroad - Hospital bill for in-patient treatment benefit wording	Section 2.6 Overseas Benefits Emergency Inpatient Treatment Abroad and related benefits Hospital bill for in-patient treatment Under this benefit we will cover (up to a specified amount) your medical costs for in-patient emergency care in a medical facility abroad. To avail of this benefit, the costs being claimed must have been incurred outside of Ireland and must have been incurred as a result of emergency care which required you to stay overnight or longer in a hospital bed whilst on a pre-booked temporary stay abroad not exceeding 31 days in duration, or your emergency care abroad commenced within 31 days of birth and you have been added to an existing policy held by your legal guardian. All medical treatment claimed under this benefit must be authorised and arranged by us. Hospital costs incurred where you did not stay overnight and non-medical expenses (e.g. phone calls, transport costs, miscellaneous expenses etc.) are not covered under this benefit. Your return journey must be booked before you begin your outward journey and your temporary stay abroad must be no longer than 31 days in duration. The maximum amount that will be covered under this benefit is set out in your Table of Cover.	Section 2.6 Overseas Benefits Emergency Inpatient Treatment Abroad and related benefits Hospital bill for in-patient treatment Under this benefit we will cover your medical costs for emergency care in a medical facility abroad where: > The emergency care is medically necessary; > The emergency care is authorised and arranged by Irish Life Health; > You are required to stay overnight or longer in a hospital bed; > You began your emergency care abroad within 31 days of your departure from Ireland, or your emergency care abroad commenced within 31 days of birth and you have been added to an existing policy held by your legal guardian; > You receive the emergency care in an internationally recognised hospital; > You have not travelled against medical advice; > You were not suffering from a terminal illness when you left Ireland; and > You did not suspect when you left Ireland that you might require any medical care when you were abroad and a reasonable person in your position would not have suspected that you would require any medical care when you were abroad. There is a maximum amount that can be claimed under this benefit on your plan. This will be shown in your Table of Cover. We will not cover: > non-medical expenses; > costs incurred where you did not stay overnight in hospital; > medical care that has not been authorised and arranged by us; > elective treatments or procedures or follow on care, regardless of whether this is related to your emergency care; > medical care that could be delayed until your return to Ireland; > medical care if you have travelled abroad after 34 weeks following the commencement of your pregnancy.

Handbook name	What's changing?	Previous wording	Updated wording
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update General Terms and Conditions wording	Section 5 General Terms and Conditions > Where you (or any other person for whom you are seeking health insurance) hold any form of health insurance with another company you must let us know at the inception of your policy. Where the costs of the goods or services which are covered under your plan with Irish Life Health are also insured by another insurer, such costs will be allocated between us and your other insurer on a pro-rata basis when you make a claim;	Section 5 General Terms and Conditions > Where you (or any other person for whom you are seeking health insurance) hold any form of health insurance with another company you must let us know at the inception of your policy. Where the costs of the goods or services which are covered under your plan with Irish Life Health are also insured by another insurer, such costs will be allocated between us and your other insurer on a pro-rata basis when you make a claim; > Where you hold more than one Irish Life Health policy, we will check across these policies held with Irish Life Health to ensure benefits have not been claimed for more than once;
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to the terms and conditions wording regarding third party claims	Section 5 General Terms and Conditions > Where we cover the cost of goods or services that you have received as a result of an accident or injury for which another person/company/public body may be liable and you make a claim or take legal action against such other person/company/public body, you must include the cost of the goods or services covered by us in the damages you seek to recover from the person/company/public body. If you successfully recover some or all of the costs covered by Irish Life Health, by whatever means, you must reimburse us as soon as possible. We will not contribute towards the costs of pursuing such a claim or legal action;	Section 5 General Terms and Conditions > Where we cover the cost of goods or services that you have received as a result of an accident or injury for which another person/company/public body may be liable and you make a claim or take legal action against such other person/company/public body, you must include the cost of the goods or services covered by us in the damages you seek to recover from the person/company/public body. If you successfully recover some or all of the costs covered by Irish Life Health, by whatever means, you must reimburse us as soon as possible. We will not contribute towards the costs of pursuing such a claim or legal action. If you make a claim or take legal action, a Letter of Undertaking will be provided to you and should be returned completed to us. If an application is made by you or your solicitor to the Injuries Resolution Board (IRB), the claims paid by Irish Life Health in respect of this application must be included and a Letter of Undertaking completed and returned to us. You should inform us as soon as possible with regards to any assessment made by the IRB. You should also inform us of any hearing dates and/or settlement discussions, or if the matter has concluded. If the claims submitted by you form part of legal proceedings, please note that we require advices from Counsel confirming the position with regards to recovery of the claims / outlay. In the event that your claim is successful and you receive a monetary settlement, you will need to send us a refund for any claims already paid by Irish Life Health. In the event that only part of the claims submitted by you are recovered, we will require written confirmation of this from your solicitor (to include any advices from Counsel). If there is only partial recovery of the claims paid by Irish Life Health in the course of legal proceedings, you will need to send us a refund for the partial amount recovered. In the event that your claim is not successful or withdrawn, we will not seek reimbursement from you once we receive written confirmation of this from your solicitor (to include any advices from Counsel);

Handbook name	What's changing?	Previous wording	Updated wording
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Updated fraud wording	Section 7 Fraud Policy We operate a fraud policy in respect of all claims made by you or on your behalf. We do regular audits of all claims. In all instances where fraud is suspected, we will carry out a full and comprehensive investigation. If a claim submitted by you or on your behalf is found to be fraudulent or dishonest in any way, the claim will be declined in its entirety, benefits under the policy will be forfeited and the policy and/or any plans listed on the policy may be cancelled and we may refuse any new policies for you. We reserve the right to refer the matter and details of the fraudulent claim to the appropriate authorities for prosecution.	Section 7 Fraud Policy We operate a fraud policy in respect of all claims made by you or on your behalf. We do regular audits of all claims across Irish Life Health policies held by you as you may not gain financially from a contract of insurance. In all instances where fraud is suspected, we will carry out a full and comprehensive investigation. If a claim submitted by you or on your behalf is found to be fraudulent or dishonest in any way, the claim will be declined in its entirety, benefits under the policy will be forfeited and the policy and/or any plans listed on the policy may be cancelled and we may refuse any new policies for you. We reserve the right to refer the matter and details of the fraudulent claim to the appropriate authorities for prosecution.
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to the bodies covered under the Life Coach/Life Coaching sessions benefits	Section 11.1 Directory of Allied Health Professionals, Alternative (Complementary) and other practitioners Allied Health Professionals, Alternative (Complementary) and other practitioners Life Coach The life coach must be a Master or Professional coach registered with one of the following bodies; International Coach Federation (ICF) Ireland or Life and Business Coaching Association of Ireland (LBCAI) or have a degree in psychology/ sports science and a postgraduate qualification in psychology (min. masters)	Section 11.1 Directory of Allied Health Professionals, Alternative (Complementary) and other practitioners Allied Health Professionals, Alternative (Complementary) and other practitioners Life Coach The life coach must be a Master or Professional coach registered with the International Coach Federation (ICF) Ireland or have a degree in psychology/ sports science and a postgraduate qualification in psychology (min. masters).
Health Plans Membership Handbook Tailored Health Plans Membership Handbook	Update to the bodies covered under the Medical Herbalist benefits	Section 11.1 Directory of Allied Health Professionals, Alternative (Complementary) and other practitioners Allied Health Professionals, Alternative (Complementary) and other practitioners Medical herbalist A member of the Irish Institute of Medical herbalists (IIMH).	Section 11.1 Directory of Allied Health Professionals, Alternative (Complementary) and other practitioners Allied Health Professionals, Alternative (Complementary) and other practitioners Medical herbalist A member of the Irish Institute of Medical herbalists (IIMH) or the Irish Association of Master Medical Herbalists (IAMMH).

If you are unsure which membership handbook applies to your plan or policy, you can check your current handbook on your online account at www.irishlifehealth.ie/login.

