

| Benefits | Laya Healthcare HealthManager Starter | Laya Healthcare HealthManager First |
|----------------------------|------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|
| | PUBLIC HOSPITAL COVER | |
| Day-case | Full cover | Full cover |
| Semi-private | Full cover | Full cover |
| Private | Full cover | Shortfall will apply - covered up to semi-private rate |
| | PRIVATE HOSPITAL COVER | |
| Day-case | Full cover in selected private hospitals | Full cover in selected private hospitals |
| Semi-private | Full cover in selected private hospitals | Full cover in selected private hospitals |
| Private | Full cover in selected private hospitals. (€105 shortfall in St.Vincent's Private, Whitfield & | Full cover in selected private hospitals. (€105 shortfall in St.Vincent's Private, Whitfield & |
| | Hermitage Clinic & €189 shortfall in Galway Clinic) | Hermitage Clinic & €189 shortfall in Galway Clinic) |
| Private hospital excess | €125 excess in St. Vincent's Private, Whitfield, Hermitage Clinic & Galway Clinic. | €125 excess in St.Vincent's Private, Whitfield, Hermitage Clinic & Galway Clinic. |
| | HI-TECH HOSPITAL COVER, BLACKROCK CLINIC, MATER PRIVATE & E | BEACON HOSPITAL |
| Day-case | No cover | No cover |
| Semi-private | No cover | No cover |
| Private | No cover | No cover |
| Certain cardiac procedures | Full cover in Mater Private & Beacon hospital | Full cover in Mater Private & Beacon hospital |
| Hi-tech Hospital excess | Not Applicable | Not Applicable |

| CONSULTANT FEES, PSYCHIATRIC & CONVALESCENCE CARE | | |
|---------------------------------------------------|-------------------------------|-------------------------------|
| Consultant fees for treatment | Full cover | Full cover |
| Psychiatric Hospitals | Full cover 100 days per annum | Full cover 100 days per annum |
| Convalescence care | Up to €60 per day - 14 days | Up to €50 per day - 14 days |

| OUT-PATIENT CANCER TREATMENT | | |
|------------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------|
| Breast prosthesis or hairpiece after cancer treatment | Full cover for both-not subject to out-patient excess | Full cover for both-not subject to out-patient excess |
| Manual lymph drainage | Up to €500 not subject to out-patient excess | Up to €500 not subject to out-patient excess |
| Accommodation benefit if a patient travels for out-patient | Up to €100 per night. No limit | Up to €100 per night. No limit |
| treatments | | |

| TREATMENT OVERSEAS | | |
|-----------------------------------------------------------|------------------------------------------------|------------------------------------------------|
| Emergency hospital admissions while abroad | No cover | No cover |
| Treatment not available in Ireland | Full cover in the EU | Full cover in the EU |
| Medical Tourism - If you choose to have your treatment in | Full cover up to the amount payable in Ireland | Full cover up to the amount payable in Ireland |
| another country | | |

| MATERNITY BENEFIT | | |
|-------------------------------------------------------------|--------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| Public/Private/Home Birth | Up to €3,200 towards costs | Up to €3,051 towards costs |
| Out-patient consultations | Full refund up to €250 per year | Full refund up to €250 per year |
| Post natal home nursing if Hospital stay less than 3 nights | Up to €900 for 2 nights | Up to €900 for 2 nights |
| Pre & Post natal package of benefits | Up to €200 combined receipts for a range of benefits including, baby massage | Up to €200 combined receipts for a range of benefits including, baby massage |
| | classes, breastfeeding consultations, midwifery service, maternity bra, GP, complementary | classes,breastfeeding consultations, midwifery service,maternity bra, GP,complementary |
| | therapies, chiropody, physiotherapy, nutritionist, counselling services, Dental & Optical. | therapies, chiropody, physiotherapy, nutritionist, counselling services, Dental & Optical. |



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| | INFERTILITY BENEFIT | |
| Benefit towards specific infertility treatments at approved | No cover | No cover |
| centres | | |
| | CHILD HEALTH CARE BENEFITS | |
| Home nursing for children (following a hospital stay) | 50% of costs up to €2,800 per year | 50% of costs up to €2,800 per year |
| Child counselling | 50% of costs-8 visits & 1 assessment up to €60 | 50% of costs-8 visits & 1 assessment up to €60 |
| | No cover | No cover |
| Parent accompanying child | Full refund up to €250 for GP's consultants, physiotherapy, radiology, pathology, child | Full refund up to €250 for GP's consultants, physiotherapy, radiology, pathology, child |
| Out-patient costs for a child who has been in Hospital for treatment for more than 3 days | counselling, speech & language therapy, dietician & occupational therapy. | counselling, speech & language therapy, dietician & occupational therapy. |
| liealment for more than 5 days | coursening, speech & language merapy, dietician & occupational merapy. | |
| | EMPLOYEE SUPPORT SERVICES | |
| Employee Assistance Programme | No cover | No cover |
| Face to face counselling sessions | No cover | No cover |
| | NURSELINE | |
| 24 Hour Nurseline | Full cover | Full cover |
| | | |
| | GP HEALTHLINE | |
| Confidential GP Telephone Line | No cover | No cover |
| | HEALTH SCREENING | |
| HeartBeat cardiac screening | Full cover for 1 screen every 2 years | Full cover for 1 screen every 2 years |
| Bone Density/Dexa Scan | Full cover in 6 centres | Full cover in 6 centres |
| Mammogram | Full cover in 3 centres | Full cover in 3 centres |
| Women's cancer screening | 50% refund of costs | 50% refund of costs |
| Men's cancer screening | 50% refund of costs | 50% refund of costs |
| Sports health screening | 50% refund every 2 years | 50% refund every 2 years |
| Executive health check | 50% refund every 2 years | 50% refund every 2 years |
| | | |
| | OUT-PATIENT COVER | |
| Yearly out-patient excess | €1 | €1 |
| Home nursing following in-patient treatment | 50% of costs up to €1,400 per year | 50% of costs up to €1,000 per year |
| Emergency dental | 50% of costs up to €510 per accident | 50% of costs up to €400 per accident |
| GP visit | 50% of costs | 50% of costs |
| Physiotherapy | 50% of costs - 25 visits | 50% of costs - 25 visits |
| Consultants | 50% of costs | 50% of costs |
| Casualty | 50% of costs up to €50 per visit | 50% of costs up to €50 per visit |
| Acupuncture | 50% of costs - 12 visits | 50% of costs - 12 visits |
| Osteopath | 50% of costs - 12 visits | 50% of costs - 12 visits |
| Chiropractor | 50% of costs - 12 visits | 50% of costs - 12 visits |
| Physical therapy | 50% of costs - 8 visits | 50% of costs - 8 visits |
| Reflexology | 50% of costs - 8 visits | 50% of costs - 8 visits |
| Homeopathy | 50% of costs - 12 visits | 50% of costs - 12 visits |
| Radiologist fees | 50% of costs | 50% of costs |
| Pathologist fees | 50% of costs | 50% of costs |

This summary of benefits is for your guidance and should be read subject to the rules and table of benefits of the scheme

Laya Healthcare Limited is regulated by the Central Bank of Ireland.



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| Routine Dental | 50% of costs up to €25 per year | 50% of costs up to €25 per year |
| Optical | 50% of costs up to €20 per year | 50% of costs up to €20 per year |
| Clinical psychologist | No cover | No cover |
| Hearing test | No cover | No cover |
| Speech & language therapy | 50% of costs-8 visits & 1 assessment up to €60 | 50% of costs-8 visits & 1 assessment up to €60 |
| Chiropody/Podiatry | 50% of costs - 5 visits | 50% of costs - 5 visits |
| Occupational therapy | 50% of costs-5 visits & 1 assessment up to €60 | 50% of costs-5 visits & 1 assessment up to €60 |
| Dietician | 50% of costs - 5 visits | 50% of costs - 5 visits |
| Orthoptist | 50% of costs - 8 visits | 50% of costs - 8 visits |
| Travel vaccinations | No cover | No cover |
| Pathology diagnostic test | 50% of costs | 50% of costs |
| Radiology diagnostic test | 50% of costs up to €500 per year | 50% of costs up to €500 per year |
| Voice Coaching | No cover | No cover |
| | | |

| Annual Subscriptions | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------|
| Adult (18 & over) | €1,104.54 | €929.88 |
| 1st Child | €370.71 | €317.52 |
| 2nd Child | €370.71 | €317.52 |
| 1st Student | €370.71 | €317.52 |
| Family - 2 adults and 2 children | €2,950.50 | €2,494.80 |
| This information has been gathered from the Health Insurance Authority and the membership handhooks of our competitor plans and is valid on 01/01/2013. All prices are correct at time of print on 28/01/2013 and are pet of tax relief at source at the applicable | | |

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