Charges for Out-Patient Services

You may be referred by your family doctor (GP) to the Outpatients Department for specialist assessment by a Consultant or their team **or** for diagnostic assessments (i.e. x-rays, laboratory tests, physiotherapy etc.). If you attend any of these services as a <u>public patient</u>, there is no charge.

If you are referred for a Minor Procedure immediately following your attendance at an outpatient clinic, a **Statutory Public In-Patient Charge** of €80 will apply. Private Health Insurance covers this charge. For exemptions to this charge please see **'Exemptions from Charges'.**

If you wish to attend a Consultant in a private capacity, you will be required to pay the appropriate private fees.

Remember:

Please give your medical card to relevant staff to record your details.

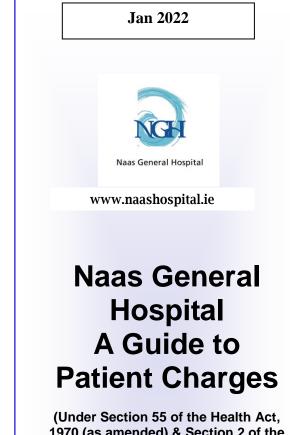
Please have to hand your health insurance policy number and plan type as staff will ask you to fill in the relevant health insurance claim forms

Any patient who requires further information about Hospital charges should contact the Patient Accounts Department on 045 849517 / 8 / 9. Current Statutory Charges can be found at www.hse.ie.

Table of Charges

.Emergency Department Statutory Charge - €100.

- Statutory Public In-Patient Charge - €80 per day up to a maximum of €800 in any 12 consecutive months.
- Day Ward Statutory Public In-Patient Charge - €80.
- Minor Procedure Statutory Public In-Patient Charge - €80.
- Multi-occupancy room, €659 per day inclusive of the statutory inpatient charge.
- Single occupancy room, €800 charge per day inclusive of the statutory public inpatient charge
- Non EC National €914 per day plus Statutory Public In-Patient Charge - €80 per day.
- Road Traffic Accident €811 Inpatient charge per day; the Statutory Public Inpatient Charge - €80 per day; and may also include an ambulance charge of €162 & Outpatient fees for X-rays & Physiotherapy - €65 each.



(Under Section 55 of the Health Act, 1970 (as amended) & Section 2 of the Health (Amendment) Act, 1986.)

Naas General Hospital is committed to providing equitable and quality patient care, delivered safely by skilled and valued staff, through the best use of resources.



Charges for Emergency Services

When you attend the Emergency Department (ED) a **Statutory Charge** of €100 will apply in respect of your visit payable directly to the hospital. Payment may be made on discharge from the ED. **This charge is not covered directly by Private Health Insurance** but may be recoverable from Private Health Insurers – keep receipt as proof of payment.

You will be exempt from paying the Statutory Charge for ED Services if you are admitted or fall into any of the categories shown under 'Exemptions from Charges'. Your PPS number, a Doctor Visit Card and a Drug Payment Scheme card do NOT entitle you to free services.

Patients should settle their account on discharge from the ED.If you fail to settle your account at this stage you will receive an invoice regarding your treatment within 2 weeks from your discharge.

Charges for In-Patient Services

If you are admitted and placed in a ward under the care of a Consultant for treatment and you remain overnight, you are receiving **In-Patient Services**.

A **Statutory Public In-Patient Charge** of €80 applies for each day spent as an in-patient in a public hospital. (Up to a maximum charge of €800 in any 12 consecutive months).

You will receive an invoice within 2 weeks of discharge.

Patients with Private Health Insurance

The Ward Clerk will take details of your Private Health Insurance - VHI, Laya, Glo Health, Aviva, Garda Medical Aid, ESB* and Prison Officers Medical Aid*. (*ESB ordinary scheme and GMA cover accommodation in a semi-private bed.) This will enable the Hospital to ensure that the fees relating to your stay can be charged directly to your Private Health Insurer.

Charges for Semi-Private and Private Beds are higher than the Statutory Public In-Patient charge – see Table of Charges; exemptions do not apply.

In the case of private/semi-private patients, admission to a public bed may be necessary due to limited availability of private and semiprivate beds. Please note that on occasion patients occupying a private/semi private bed may be required to transfer to another bed in the hospital.

Charges for Day Services

If you are admitted under the care of a Consultant where you do **not** require the use of a bed overnight (e.g. Day Ward/Minor Procedures), and your discharge from hospital is planned, you are receiving **Day Services.**

Patients should be aware that a **Statutory Public In-Patient Charge** of €80 will apply for Day Services. Private Health Insurance covers this charge.

You will be exempt from paying the **Statutory Public In-Patient Charge** if you fall into any of the categories shown under '**Exemptions from Charges'.**

Exemptions from Charges

- If you are the holder of a current valid Medical Card.
- If you are referred to the ED by your GP / KDOC with a letter and **not** admitted to the Hospital. This letter can only be accepted up to & including 7 days after presentation to ED.
- If you are entitled to Hospital services because of EU Regulations/Bilateral agreement with UK/NIRL, Australia, New Zealand. **NB* you only qualify** to use this if you are on vacation. If you reside or work in Ireland the EU Regulation/ Bilateral agreement does not cover your treatment.
- Children up to the age of 6 weeks and children in respect of the following diseases and disabilities: mental handicap, mental illness, phenylketonuria, cystic fibrosis, spina bifida, hydrocephalus, haemophilia and cerebral palsy.
- People receiving treatment for prescribed infectious diseases including coronavirus (Covid -19)
- People admitted to hospital after attending the emergency dept. (you will then be subject to inpatient/day service charges
- European visitors to Ireland can use their European Health Insurance Card for urgent treatment on production of EHIC card