

## YOUR QUESTIONS ANSWERED

# Shortfall in cover for costly US A&E trip

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**Q** I have just come back from a holiday to the US. While there, I became very ill and had to go to A&E. I was in A&E for just over five hours and during that time I had a CT scan, chest X-ray and other tests and blood tests. The total cost of all those tests came to more than \$9,000. I was asked if I would like to stay in the hospital overnight, but declined – and so I was not admitted to hospital as such. Although I had both travel insurance and private health insurance at the time, as I was not admitted to hospital, my travel insurer has said it will pay only €500 towards the cost of the A&E visit – and that the balance is for my health insurance. My health insurance only pays €50 for A&E and will pay up to 50pc for some of the tests at Irish rates. The result is that I am at a loss of over €6,000. However, had I been admitted to hospital it looks like much more of the costs would be covered – is this correct? Liz, Co Meath

UNFORTUNATELY, this is a typical scenario faced by many who fall ill while abroad. In terms of medical cover, the main objective of your travel insurance policy is to cover you for hospital admissions and possible repatriation costs. Some travel policies may include refunds on eligible outpatient expenses but excesses and other qualifying criteria will determine your final rebate.

If you are likely to incur high outpatient expenses while abroad, contact your travel insurer immediately to see what refund will apply and what other assistance or advice it may be able to provide. If you are relying on the 'emergency cover while abroad' on your health insurance policy, this is also designed to cover actual admissions and not outpatient costs.

On these health insurance policies, there is limited cover for certain eligible outpatient costs (such as those incurred in an A&E setting), but never full cover. The cost of outpatient medication, sutures, crutches, and IV antibiotics is not covered at all, and these can be very costly.

If you have a good quality corporate plan, you may get about 50pc of the cost back on certain eligible expenses, such as consultants' fees, X-rays

and so on. However, some health insurance policies only cover outpatient expenses incurred in Ireland. The only other option open to you is to claim tax relief on the expenses incurred, which may give you up to 20pc relief.

In future, when the hospital or consultant is suggesting you stay overnight in the hospital, he or she may be doing you a favour as the likelihood is that this will be covered by your policy!

## Travelling against GP's advice

**Q** MY wife suffered with a blood clot in her leg during her recent pregnancy. She gave birth last weekend – and both mother and baby are fine. As a precaution, my wife is on blood-thinning medication for the next six weeks. We had been due to fly to the US at the end of this month – however, her doctor has advised her against travel. We feel the doctor is being over the top. Would we be covered by our private health insurance and travel insurance if we ignored the doctor's advice and went ahead with the trip? Tom, Co Kerry

UNFORTUNATELY, the likely answer here is no. A standard clause in most policies is that you should never travel against the medical advice of your doctor. In most claims cases, the insurer will seek a 'fit to fly' confirmation from your doctor which in this case will indicate that your wife was advised against travelling and therefore the patient's claim will be null and void.

This is likely to be the case with any travel insurance or health insurance policy. We would advise your wife not to travel as she would be personally liable for any medical expenses incurred if she became ill abroad as a result of her current medical condition, and these expenses could be significant, especially in the US.

## Cover for bi-polar disorder

**Q** MY husband, I and our three children will be holidaying in Canada later this summer. Our eldest son, who is 16, suffers from bi-polar disorder and has a history of self-harming. His doctor has cleared the trip – provided our son takes his medication. Should things go wrong when on holiday and our son needs medical care as a result of his condition, will our



## insurance cover us? We have both private health insurance and travel insurance. Sarah, Dublin 24

THIS is one of those cases where prior checking is essential with both the health and travel insurer prior to travelling abroad. For example, some policies exclude 'nervous, mental or psychiatric conditions'. Others exclude anything to do with self-harming or medical treatment required as a result of a patient not taking their prescribed medication. Most policies have general exclusions around self-negligence or not following the advice of your treating doctor. As the treatment for this type of medical condition is quite specialised and therefore quite costly, this should be fully disclosed to the insurers prior to travelling, to understand exactly what will or won't be covered in the event of a claim. This, in turn, should help you decide whether it is prudent or not to undertake this trip.

### Cover for extended holiday

**Q** I have just returned from a three-month holiday around Australia. Towards the end of that holiday, I had a serious injury when playing football. I was admitted to a hospital's emergency department and kept in for two nights in hospital. I rang my travel insurer after I received the treatment, expecting that I would be covered for the cost. However, my insurer has told me that my insurance only covers the first 45 days of the trip – and so I'm not covered for the hospital bills. Surely this can't be right? Cathal, Co Cork

UNFORTUNATELY, the insurer is correct in this scenario. Most off-the-shelf travel policies are designed for short trips abroad of between 30 and 45 days, although some can be extended in return for a higher premium.

Most health insurance policies include emergency medical cover while abroad of between €55,000 and €100,000 for any one trip of up to 180 days a year with VHI and Laya – however, this is any one trip of up to 31 days with Irish Life Health. So if you had health insurance in place with either VHI or Laya, your treatment may have been covered.

Given that you were travelling abroad on an extended trip, you should have opted for either a backpacker travel policy or else looked for an extension to your standard travel policy to cover the full duration of the trip. Right now, there are potentially thousands of people either studying or travelling abroad who may be relying on a short-term travel insurance (multi-trip) policy for their cover. If they fall ill, things will only get worse as they effectively have no cover.

For those travelling on an extended trip, either backpacker or international health cover is essential to make sure full cover is available. You can't rely on health insurance due to the time limits and the cap of between €55,000 and €100,000 on the policy. The European Health Insurance Card (EHIC), while helpful, is only useful for public hospital treatment and only within the EU.

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