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# Gateway Policy Explorer: Retirement Series

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## Ireland

### Public Old-Age Health Insurance Plan Details

**2001-2023**

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## Preface

This document is intended for researchers who want to understand the evolution of policy or the policy in place at a particular point in time. This document is not intended for financial advice or to aid in decision-making. The authors have made significant effort to identify and collect historical information pertaining to these policies, to accurately represent these policies, and to communicate how policies may interact to determine legal requirements, eligibility for benefits, and/or benefits levels. The policies presented in this document focus on rules applicable to most individuals aged 50 and older from 1992. Many systems include special policies or alternative eligibility rules for specific groups. We encourage all users to complete their own review of literature in this area depending on the research questions they have in mind.

If you have feedback or questions or identify an error, please contact [policy@g2aging.org](mailto:policy@g2aging.org).

## Background — Gateway Policy Explorer: Retirement Series

The *Gateway Policy Explorer* (<http://g2aging.org/policy-explorer>) is part of the Gateway to Global Aging Data (<http://g2aging.org>) project. The *Retirement Series* captures historical policy that affects the birth cohorts of respondents in the surveys covered by the Gateway. It was motivated by the rapid evolution of policies affecting older people across the world. As the Health and Retirement Study (HRS) began in 1992 and many of the international network of studies (HRS-INS) cover more than a decade, understanding the policies in place at the time of the survey has become more demanding for researchers.

*Why are we tracking past policy?* Individuals make choices based on current policies and the outcomes we see today may reflect responses to past policies. When interpreting the survey responses of individuals, an understanding of the policy environment under which those individuals operate is critical. The collection of contextual information in the *Gateway Policy Explorer* aims to support researchers who want to understand or use policy changes in their research and provide context for longitudinal or cross-country differences. Over the period 2023–2026 the *Gateway Policy Explorer* will be expanded to include information on retirement, long-term care, education, and other policies affecting the life cycle.

The key dimensions to the *Gateway Policy Explorer: Retirement Series* are country and time. We prioritize data collection for each country based on its first interview wave and are continuing to expand our data collection back in time to 1992, the earliest survey date in the HRS-INS.

A separate document, like this one, is developed for each country and each broad category of policies covered in the *Gateway Policy Explorer: Retirement Series*.

## Author and Contributor Disclaimers

† The opinions expressed here are those of authors and do not necessarily reflect the views of the OECD or of its member countries.

# Ireland

Old-Age Health Insurance  
Plan details 2001-2023 \* †

The Irish public health insurance system provides medical benefits either free of charge or at a reduced cost to individuals who are ordinarily residents of Ireland. An ordinarily resident is someone that has been living in Ireland for at least 1 year or with the intent to live in Ireland for at least 1 year.

Most public medical services are free for people with a Medical Card, which is available to individuals based on their age and household means. Individuals who do not qualify for a Medical Card can still access public medical services at a reduced cost. Another program, a GP visit card, may eliminate some of these costs but eligibility depends on a household means test with broader eligibility limits than the Medical Card. Individuals that suffer from certain long-term illnesses are eligible to receive drugs and medicines for free under the Long-Term Illness Scheme.

From 2001 to 2022, major changes to health insurance and long-term care-related policy include the introduction of GP Visit Cards, the extension of eligibility to Medical Cards for individuals over age 70 without requiring a means test, the introduction of the Home Support Services Scheme to provide help with daily activities to individuals in need of care, and the introduction of the Fair Deal Scheme to provide financial benefits to individuals that need to cover the costs related to nursing home care.

Public health insurance benefits were administered by the Regional Health Boards until 2005. Since 2005, the Health Service Executive administers public health insurance.

## Key Dates

First law: 1911

Major changes since 1992: 2007, 2009

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\* If you have questions or suggestions, please contact [policy@g2aging.org](mailto:policy@g2aging.org).

† Detailed information and definitions are provided in tables, formulas and a glossary at the end of this document. To facilitate switching back and forth, this document is designed with hyperlinks. Most PDF readers have shortcuts that permit a reader to return to the previous location after selecting a hyperlink. In Adobe Acrobat on a PC: “Alt” + “←”; In Adobe Acrobat on a MAC: “command” + “←”; In Preview on a MAC: “command” + “[”.

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## Chapter 1: Policy enacted 2001-2006

### Overview

Ireland provides health care benefits to individuals that are [ordinarily residents](#) of Ireland which are those individuals that have been living in Ireland for at least 1 year or have the intent to live there for at least 1 year. The [Health Act 1970](#) governs the provision of health services in Ireland and determines eligibility, and medical and long-term care services covered in the public health care system.

Individuals that have a [Medical Card](#) can access free public medical services. A Medical Card is granted to individuals within households that collectively have limited income based on a means-test. Starting July 2001, individuals over age 70 do not need to pass a means test to be eligible for a Medical Card. Examples of medical services covered by a Medical Card include free visits to a GP (family doctor), reduced cost for prescribed drugs and medicines, free consultant's services in public hospitals, a yearly free dental examination and a free eye examination every two years.

Individuals that do not qualify for a Medical Card can access public medical services for a fee. A number of programs aim to reduce or eliminate those fees for specific groups. Starting March 2005, they could pass a means test to get a [GP Visit Card](#) to get free visits to a participating GP or [Practice Nurse](#) and blood tests to monitor medical conditions. Individuals that do not qualify for a Medical Card or a GP Visit Card can still access medical services at a reduced cost as well as certain prescribed medicines and drugs under the [Drugs Payment Scheme](#), which in 1999 replaced the [Drug Cost Subsidisation Scheme](#) and [Drug Refund Scheme](#). Maternity care is included for all women.

Means-test income thresholds have generally not changed in absolute terms since 2005.

Individuals that suffer from certain long-term health conditions are eligible to receive drugs and medicines for free under the [Long-term Illness Scheme](#) and receive specialized care at home under the [Home Help Scheme](#) which were established in the Health Act ([Irish Statute Book, 1970](#)).

Public health care benefits were administered by the Regional Health Boards until 2005 when they were replaced by the Health Service Executive (HSE).

Additional reforms during this time period include:

- Health Services Regulations ([Irish Statute Book, 2001b](#)), enacted February 26, 2001 and effective from March 1, 2001, merged the Drugs Refund Scheme and Drugs Cost Subsidization Scheme and replaced them by the Drugs Payment Scheme
- Health (Miscellaneous Provisions) (No. 2) Bill ([Irish Statute Book, 2000](#)), enacted May 16, 2001 and effective from July 1, 2001, extended eligibility for Medical Cards to all individuals over age 70 regardless of their means
- Health (Amendment) Act ([Irish Statute Book, 2005b](#)), enacted March 10, 2005 and effective from March 11, 2005, introduced GP Visit Cards for free visits to a GP provider for those that do not qualify for a Medical Card

### Eligibility

#### • Qualifications

The main qualification to access public healthcare in Ireland is being an [ordinarily resident](#) of Ireland. An ordinarily resident is someone who intends to live in Ireland for at least one year ([Irish Statute Book, 1991a](#)). Depending on the individual's weekly income, they could qualify for a Medical Card or a GP Visit Card (starting 2005) ([Irish Statute Book, 2005b](#)). The means test is the same for the Medical Card and the GP Visit Card. However, the weekly income limits for the GP Visit Card are higher than the ones for the Medical Card. Every individual is first assessed for a Medical Card, and then for a GP Visit Card if they do not qualify for the first one.

#### [Medical Card](#)

An individual can access free public healthcare benefits if they have a Medical Card. In order to qualify for a Medical Card, an individual must pass a means test. A couple's eligibility is based on the age of the older person. The total weekly income must be below the qualifying financial threshold to remain eligible. See [Formula 1](#) for details on how means from capital and total weekly income are calculated for single individuals and [Formula 2](#) for details for married individuals. See [Formula 3](#) for details on the qualifying financial threshold and [Table 1](#) for details on the basic rates used to determine the qualifying financial threshold.

Individuals that do not pass the means test for the Medical Card but that often incur medical expenses may apply for a discretionary Medical Card by following the same application process as the means-tested Medical Card and providing detailed information on

their family's medical expenses.

Individuals age 70 and above are entitled to a Medical Card regardless of their means starting July 2001 ([Irish Statute Book, 2001b](#)).

#### GP Visit Card (Starting 2005)

An individual that does not qualify for a Medical Card due to not passing the means test is automatically assessed for a GP Visit card. In order to qualify for a GP Visit Card, an individual must pass a less stringent means test ([Irish Statute Book, 2005b](#)). See [Formula 1](#) for details on how means from capital and total weekly income are calculated for single individuals and [Formula 2](#) for details on how means from capital and total weekly income are calculated for married individuals. If their weekly income is above the financial threshold, they will not be eligible for this benefit. See [Formula 3](#) for details on the qualifying financial threshold and [Table 2](#) for details on the basic rates used to determine the qualifying financial threshold.

#### Drugs Payment Scheme

This scheme allows individuals to pay no more than a maximum amount per month for approved medicines and drugs ([Irish Statute Book, 1972](#)). An individual must meet the following requirements:

- An individual must not be a Medical Card holder
- An individual must be paying more than the maximum amount per month for approved medicines —see [Table 3](#) for details of the maximum amounts per month

#### Long-term Care (LTC)

The Irish long-term care (LTC) system provides the following benefits to people in need of care:

#### Home Help

Individuals that are sick or are receiving medical or midwifery services in respect of motherhood are eligible to receive assistance at home ([Irish Statute Book, 1970](#)). An individual must meet the following requirements:

- An individual must be a woman receiving medical, surgical, or midwifery services in respect of motherhood
- An individual must be a sick or infirm person requiring assistance at home

#### Long-term Illness Scheme

Individuals that suffer from certain health conditions are eligible to receive drugs and medicines for free ([Irish Statute Book, 1970](#)). An individual must meet the following requirements:

- An individual must suffer from one of the eligible health conditions —see [Box 1](#) for details of the eligible health conditions
- An individual must live in Ireland and intend to live in Ireland for at least 1 year

- **To receive health benefits, does an individual have to claim them?** Answer: Yes
- **To continue to receive health benefits, does an individual have to remain qualified?** Answer: Qualified

## Coverage

### Medical Card

Individuals that have a Medical Card are entitled to the following benefits:

- GP (Family Doctor) services: The GP (Family Doctor) chosen must be part of the scheme from the Regional Health Boards or the Health Service Executive (HSE) (starting 2005) for the services to be free.
- Free prescribed drugs and medicines
- In-patient and out-patient public hospital services: There is no charge if they have a referral letter from a GP. Day-case services are included for free.
- Dental services: Per year, beneficiaries are entitled to a free dental examination, any required extractions, one first-stage endodontic treatment, and two fillings. Children in certain classes in primary school and those with special needs are eligible for a free dental examination.
- Optical services: Beneficiaries are entitled to a free eye examination and prescription glasses every two years.
- Aural services: If needed, Medical Card holders can get a hearing aid for free. Hearing tests and hearing aids are free for children under age 18.
- Maternity and infant care services: Under the [Maternity and Infant Care Scheme](#), free maternity care is given to all women that are ordinarily residents. This includes 5 examinations while pregnant for the first pregnancy and 6 examinations if it is not the first pregnancy. Once the baby is born, 2 postnatal visits to the GP are included. All in-patient, out-patient and emergency care

services are included during the pregnancy and at birth.

- Emergency department services are free.
- Community care services: These services include public health nursing, home help, physiotherapy, occupational therapy, chiropody, day care, and respite care. Medical Card holders may be given priority for these services.
- Short-term counseling: This service is available to Medical Card holders over age 18 that are experiencing mild to moderate psychological and emotional distress. They need to be referred by their GP to access these services.
- Maternity Cash Grant on the birth of each child

#### GP Visit Card (Starting 2005)

- Free visits to a participating GP (Family Doctor)
- Blood tests to monitor a condition
- Maternity and infant care services: Under the [Maternity and Infant Care Scheme](#), free maternity care is given to all women that are ordinarily residents. This includes 5 examinations while pregnant for the first pregnancy and 6 examinations if it is not the first pregnancy. Once the baby is born, 2 postnatal visits to the GP are included. All in-patient, out-patient and emergency care services are included during the pregnancy and at birth

#### Drugs Payment Scheme

Individuals will only have to pay up to a maximum amount per month for approved medicines and drugs. See [List of Reimbursable Items](#) for details of the medicines covered under this scheme.

#### Long-term care (LTC)

The Irish long-term care (LTC) system provides the following benefits to people in need of care:

##### Home Help

Individuals receive one-on-one care according to their needs for the period they are receiving this service.

##### Long-term Illness Scheme

An individual may receive medicines and appliances for free if they are in the list of approved medicines for eligible health conditions. See [Box 1](#) for details of the eligible health conditions and [List of Approved Medicines and Appliances](#) for details of the medicines covered under this scheme.

## Costs

#### Medical Card

Individuals that have a Medical Card may incur in out-of-pocket costs if they receive services from a GP that are not part of the scheme from the Regional Health Boards or the Health Service Executive (HSE) (starting 2005). From 2001 to 2006, Medical Card holders receive prescribed drugs and medicines from community pharmacies without charge.

#### GP Visit Card (Starting 2005)

Individuals that have a GP Visit Card may incur out-of-pocket costs for charges related to emergency department services, in-patient services, and out-patient services if they were not referred by a GP. In 2006, the charge is 60€ for emergency department services and out-patient services, and 60€ per day up to a maximum of 600€ in any 12 consecutive months for in-patient services if they were not referred by a GP - see [Table 4](#) for details of the changes in charges per year.

#### Drugs Payment Scheme

Individuals pay up to the maximum amount per month for approved medicines. In 2006, the maximum amount individuals pay for approved medicines was 85€ per month. See [Table 3](#) for details of the maximum amounts per year.

#### Long-term care (LTC)

The Irish long-term care (LTC) system provides the following benefits to people in need of care:

##### Home Help

The Chief Executive Officer of the Health Board determines in each case whether the individual receiving this service will be charged or the amount they will be charged.

##### Long-term Illness Scheme

No out-of-pocket costs are incurred by individuals receiving approved medicines for eligible health conditions.

## Chapter 2: Policy enacted 2007-2008

### Policy change in 2007

Health (Nursing Homes) (Amendment) Act ([Irish Statute Book, 2007b](#)), enacted and effective from February 19, 2007, introduced the following substantial change to the Irish public health insurance system:

- Home Care Package Scheme to support individuals over age 65 that need help with their daily activities

### Overview

Ireland provides health care benefits to individuals that are [ordinarily residents](#) of Ireland which are those individuals that have been living in Ireland for at least 1 year or have the intent to live there for at least 1 year. The [Health Act 1970](#) governs the provision of health services in Ireland and determines eligibility, and medical and long-term care services covered in the public health care system.

Individuals that have a [Medical Card](#) can access free public medical services. A Medical Card is granted to individuals within households that collectively have limited income based on a means-test. From June 2001 to December 2008, individuals over age 70 did not need to pass a means test to be eligible for a Medical Card. Examples of medical services covered by a Medical Card include free visits to a GP (family doctor), reduced cost for prescribed drugs and medicines, free consultant's services in public hospitals, a yearly free dental examination and a free eye examination every two years.

Individuals that do not qualify for a Medical Card can access public medical services for a fee. A number of programs aim to reduce or eliminate those fees for specific groups. They could pass a means test to get a [GP Visit Card](#) to get free visits to a participating GP or [Practice Nurse](#) and blood tests to monitor medical conditions. Individuals that do not qualify for a Medical Card or a GP Visit Card can still access medical services at a reduced cost as well as certain prescribed medicines and drugs under the [Drugs Payment Scheme](#) which in 1999 replaced the [Drug Cost Subsidisation Scheme](#) and [Drug Refund Scheme](#). Maternity care is included for all women.

Means-test income thresholds have generally not changed in absolute terms since 2005.

Individuals that suffer from certain long-term health conditions are eligible to receive drugs and medicines for free under the [Long-term Illness Scheme](#) and receive specialized care at home under the [Home Help Scheme](#) which were established in the Health Act 1970 ([Irish Statute Book, 1970](#)). Individuals over age 65 that need help with their daily personal care activities such as getting in and out of bed, getting dressed and bathing are eligible to receive help if deemed necessary from the Care Needs Assessment under the [Home Care Package Scheme](#).

Public health care benefits are administered by the Health Service Executive (HSE).

### Eligibility

#### • Qualifications

The main qualification to access public healthcare in Ireland is being an [ordinarily resident](#) of Ireland. An ordinarily resident is someone who intends to live in Ireland for at least one year ([Irish Statute Book, 1991a](#)). Depending on the individual's weekly income, they could qualify for a Medical Card or a GP Visit Card. The means test is the same for the Medical Card and the GP Visit Card. However, the weekly income limits for the GP Visit Card are higher than the ones for the Medical Card. Every individual is first assessed for a Medical Card, and then for a GP Visit Card if they do not qualify for the first one.

#### [Medical Card](#)

An individual can access free public healthcare benefits if they have a Medical Card. Eligibility requirements are different for individuals age 70 and above and for individuals under age 70. A couple's eligibility is based on the age of the older person.

Individuals age 70 and above are entitled to a Medical Card regardless of their means. In order to qualify for a Medical Card, individuals under age 70 must pass a means test. The total weekly income must be below the qualifying financial threshold to remain eligible. See [Formula 1](#) for details on how means from capital and total weekly income are calculated for single individuals and [Formula 2](#) for details for married individuals. See [Formula 3](#) for details on the qualifying financial threshold and [Table 1](#) for details on the basic rates used to determine the qualifying financial threshold.

Individuals that do not pass the means test for the Medical Card but that often incur medical expenses may apply for a discretionary



Medical Card by following the same application process as the means-tested Medical Card and providing detailed information on their family's medical expenses.

#### [GP Visit Card](#)

An individual that does not qualify for a Medical Card due to not passing the means test is automatically assessed for a GP Visit card. In order to qualify for a GP Visit Card, an individual must pass a less stringent means test ([Irish Statute Book, 2005b](#)). A couple's eligibility is based on the age of the older person. See [Formula 1](#) for details on how means from capital and total weekly income are calculated for single individuals and [Formula 2](#) for details for married individuals. If their weekly income is above the financial threshold, they will not be eligible for this benefit. See [Formula 3](#) for details on the qualifying financial threshold and [Table 2](#) for details on the basic rates used to determine the qualifying financial threshold.

#### [Drugs Payment Scheme](#)

This scheme allows individuals to pay no more than a maximum amount per month for approved medicines and drugs ([Irish Statute Book, 1972](#)). An individual must meet the following requirements:

- An individual must not be a Medical Card holder
- An individual must be paying more than the maximum amount per month for approved medicines —see [Table 3](#) for changes in the maximum amounts per month

#### [Long-term Care \(LTC\)](#)

The Irish long-term care (LTC) system provides the following benefits to people in need of care:

#### [Home Help](#)

Individuals that are sick or are receiving medical or midwifery services in respect of motherhood are eligible to receive assistance at home ([Irish Statute Book, 1970](#)). An individual must meet the following requirements:

- An individual must be a woman receiving medical, surgical, or midwifery services in respect of motherhood
- An individual must be a sick or infirm person requiring assistance at home

#### [Home Care Package Scheme](#)

This scheme provides personal care services to individuals in need of care such as help with getting in and out of bed, getting dressed, and bathing ([Irish Statute Book, 2007b](#)). An individual must meet the following requirements:

- An individual must be age 65 and above, or need support in cases such as early onset dementia or a disability
- An individual must need continued support living at home or after returning from a hospital stay because of an illness or disability
- An individual must pass a [Care Needs Assessment](#) done by a healthcare professional to determine the level of care the individual is currently receiving and other supports they may need

#### [Long-term Illness Scheme](#)

Individuals that suffer from certain health conditions are eligible to receive drugs and medicines for free ([Irish Statute Book, 1970](#)). An individual must meet the following requirements:

- An individual must suffer from one of the eligible health conditions —see [Box 1](#) for details of the eligible health conditions
- An individual must live in Ireland and intend to live in Ireland for at least 1 year

- **To receive health benefits, does an individual have to claim them?** Answer: Yes
- **To continue to receive health benefits, does an individual have to remain [qualified](#)?** Answer: Qualified

## Coverage

### [Medical Card](#)

Individuals that have a Medical Card are entitled to the following benefits:

- GP (Family Doctor) services: The GP (Family Doctor) chosen must be part of the scheme from the Regional Health Boards or the Health Service Executive (HSE) (starting 2005) for the services to be free.
- Free prescribed drugs and medicines
- In-patient and out-patient public hospital services: There is no charge if they have a referral letter from a GP. Day-case services are included for free.
- Dental services: Per year, beneficiaries are entitled to a free dental examination, any required extractions, one first-stage endodontic treatment, and two fillings. Children in certain classes in primary school and those with special needs are eligible

for a free dental examination.

- Optical services: Beneficiaries are entitled to a free eye examination and prescription glasses every two years.
- Aural services: If needed, Medical Card holders can get a hearing aid for free. Hearing tests and hearing aids are free for children under age 18.
- Maternity and infant care services: Under the [Maternity and Infant Care Scheme](#), free maternity care is given to all women that are ordinarily residents. This includes 5 examinations while pregnant for the first pregnancy and 6 examinations if it is not the first pregnancy. Once the baby is born, 2 postnatal visits to the GP are included. All in-patient, out-patient and emergency care services are included during the pregnancy and at birth.
- Emergency department services are free.
- Community care services: These services include public health nursing, home help, physiotherapy, occupational therapy, chiropody, day care, and respite care. Medical Card holders may be given priority for these services.
- Short-term counseling: This service is available to Medical Card holders over age 18 that are experiencing mild to moderate psychological and emotional distress. They need to be referred by their GP to access these services.
- Maternity Cash Grant on the birth of each child

#### GP Visit Card

- Free visits to a participating GP (Family Doctor)
- Blood tests to monitor a condition
- Maternity and infant care services: Under the [Maternity and Infant Care Scheme](#), free maternity care is given to all women that are ordinarily residents. This includes 5 examinations while pregnant for the first pregnancy and 6 examinations if it is not the first pregnancy. Once the baby is born, 2 postnatal visits to the GP are included. All in-patient, out-patient and emergency care services are included during the pregnancy and at birth

#### Drugs Payment Scheme

Individuals will only have to pay up to a maximum amount per month for approved medicines and drugs. See [List of Reimbursable Items](#) for details of the medicines covered under this scheme.

#### Long-term care (LTC)

The Irish long-term care (LTC) system provides the following benefits to people in need of care:

##### Home Help

Individuals receive one-on-one care according to their needs for the period they are receiving this service.

##### Home Care Package Scheme

An individual in need of care and satisfying the eligibility requirements may apply to the Home Care Package Scheme. The benefits an individual receives vary depending on their individual needs determined by the Care Needs Assessment. The benefits an individual may receive include help with everyday tasks such as getting in and out of bed, getting dressed, and bathing. Occasionally, the services an individual is receiving are reviewed by the HSE to increase or decrease the support given.

##### Long-term Illness Scheme

An individual may receive medicines and appliances for free if they are in the list of approved medicines for eligible health conditions. See [Box 1](#) for details of the eligible health conditions and [List of Approved Medicines and Appliances](#) for details of the medicines covered under this scheme.

## Costs

#### Medical Card

Individuals that have a Medical Card may incur in out-of-pocket costs if they receive services from a GP that are not part of the scheme from the Health Service Executive (HSE). From 2007 to 2008, Medical Card holders receive prescribed drugs and medicines from community pharmacies without charge.

#### GP Visit Card

Individuals that have a GP Visit Card may incur out-of-pocket costs for charges related to emergency department services, in-patient services, and out-patient services if they were not referred by a GP. In 2008, the charge is 66€ for emergency department services, and out-patient services, and 66€ per day up to a maximum of 660€ in any 12 consecutive months for in-patient services if they were not referred by a GP - see [Table 4](#) for details of the changes in charges per year.

#### Drugs Payment Scheme

Individuals pay up to the maximum amount per month for approved medicines. In 2008, the maximum amount individuals pay for approved medicines was 90€ per month —see [Table 3](#) for details of the maximum amounts per year.

#### Long-term care (LTC)

The Irish long-term care (LTC) system provides the following benefits to people in need of care:

##### Home Help

The Chief Executive Officer of the Health Board determines in each case whether the individual receiving this service will be charged or the amount they will be charged.

##### Home Care Package Scheme

No out-of-pocket costs are incurred by individuals receiving this benefit.

##### Long-term Illness Scheme

No out-of-pocket costs are incurred by individuals receiving approved medicines for eligible health conditions.

## Chapter 3: Policy enacted 2009-2023

### Policy change in 2009

Nursing Homes Support Scheme Act ([Irish Statute Book, 2009](#)), enacted July 1, 2009 and effective from October 27, 2009, introduced the following substantial change to the Irish public health insurance system:

- The Nursing Homes Support Scheme, commonly known as the Fair Deal Scheme, gives individuals financial benefits to cover part of the costs related to nursing home care after the individual applying for this benefit has paid a certain amount towards these costs.

Additional changes during this period include:

- Health Act ([Irish Statute Book, 2008b](#)), enacted December 12, 2008 and effective from January 1, 2009, introduced a means test for Medical Cards for individuals over age 70.
- Health (General Practitioner Service) Act ([Irish Statute Book, 2014](#)), enacted on July 28, 2014 and effective from July 1, 2015, made the GP Visit Card available to everyone under age 6.
- Health (General Practitioner Service) Act ([Irish Statute Book, 2015](#)), enacted on June 24, 2015 and effective from August 5, 2015, made the GP Visit Card available to everyone over age 70 regardless of their means.

### Overview

Ireland provides health care benefits to individuals that are [ordinarily residents](#) of Ireland which are those individuals that have been living in Ireland for at least 1 year or have the intent to live there for at least 1 year. The [Health Act 1970](#) governs the provision of health services in Ireland and determines eligibility, and medical and long-term care services covered in the public health care system.

Individuals that have a [Medical Card](#) can access free public medical services. A Medical Card is granted to individuals within households that collectively have limited income based on a means-test. Examples of medical services covered by a Medical Card include free visits to a GP (family doctor), reduced cost for prescribed drugs and medicines, free consultant's services in public hospitals, a yearly free dental examination and a free eye examination every two years.

Individuals that do not qualify for a Medical Card can access public medical services for a fee. A number of programs aim to reduce or eliminate those fees for specific groups. They could pass a means test to get a [GP Visit Card](#) to get free visits to a participating GP or [Practice Nurse](#) and blood tests to monitor medical conditions. Starting in 2015, individuals over age 70 and under age 6 are eligible to receive a GP Visit Card without passing a means test. Individuals that do not qualify for a Medical Card or a GP Visit Card can still access medical services at a reduced cost as well as certain prescribed medicines and drugs under the [Drugs Payment Scheme](#) which in 1999 replaced the [Drug Cost Subsidisation Scheme](#) and [Drug Refund Scheme](#). Maternity care is included for all women.

Means-test income thresholds have generally not changed in absolute terms since 2005.

Individuals that suffer from certain long-term health conditions are eligible to receive drugs and medicines for free under the [Long-term Illness Scheme](#) and receive specialized care at home under the [Home Help Scheme](#) which were established in the Health Act 1970 ([Irish Statute Book, 1970](#)). Individuals over age 65 that need help with their daily personal care activities such as getting in and out of bed, getting dressed and bathing are eligible to receive help if deemed necessary from the Care Needs Assessment under the [Home Care Package Scheme](#). In 2018, the [Home Support Services Scheme](#) replaced the services previously known as the Home Help Service and the Home Care Package Scheme. Starting in October 2009, individuals that are paying for nursing home care are eligible to receive some financial benefits to cover part of these costs after passing a financial assessment under the [Fair Deal Scheme](#).

Public health care benefits are administered by the Health Service Executive (HSE).

### Eligibility

#### • Qualifications

The main qualification to access public healthcare in Ireland is being an [ordinarily resident](#) of Ireland. An ordinarily resident is someone who intends to live in Ireland for at least one year ([Irish Statute Book, 1991a](#)). Depending on the individual's weekly income, they could qualify for a Medical Card or a GP Visit Card. The means test is the same for the Medical Card and the GP Visit Card. However, the weekly income limits for the GP Visit Card are higher than the ones for the Medical Card. Every individual is first assessed for a Medical Card, and then for a GP Visit Card if they do not qualify for the first one.

### Medical Card

An individual can access free public healthcare benefits if they have a Medical Card. In order to qualify for a Medical Card, an individual must pass a means test. A couple's eligibility is based on the age of the older person. See [Formula 1](#) for details on how means from capital and total weekly income are calculated for single individuals and [Formula 2](#) for details for married individuals.

The weekly income limits are different for individuals under age 70 and for individuals age 70 and above. Individuals under age 70 must have total weekly income below the qualifying financial threshold to remain eligible. See [Formula 3](#) for details on the qualifying financial threshold and [Table 1](#) for details on the basic rates used to determine the qualifying financial threshold. Individuals age 70 and above must have total weekly income below the maximum weekly income allowed to remain eligible. See [Table 5](#) for details on the maximum weekly income allowed to qualify for individuals over age 70.

Individuals that do not pass the means test for the Medical Card but that often incur medical expenses may apply for a discretionary Medical Card by following the same application process as the means-tested Medical Card and providing detailed information on their family's medical expenses.

### GP Visit Card

An individual that does not qualify for a Medical Card due to not passing the means test is automatically assessed for a GP Visit card. A couple's eligibility is based on the age of the older person. In order to qualify for a GP Visit Card, an individual must meet the following requirements:

- Before 2015: An individual must pass a means test —see [Formula 1](#) for details on how means from capital and total weekly income are calculated for single individuals and [Formula 2](#) for details for married individuals. If their weekly income is above the financial threshold, they will not be eligible for this benefit —see [Formula 3](#) for details on the qualifying financial threshold and [Table 2](#) for details on the basic rates used to determine the qualifying financial threshold ([Irish Statute Book, 2005b](#)).
- From 2015
  - \* Children under age 6
    - All children under age 6 are eligible to receive a GP Visit Card.
  - \* Individuals under age 70
    - An individual must pass a means test —see [Formula 1](#) for details on how means from capital and total weekly income are calculated for single individuals and [Formula 2](#) for details for married individuals. If their weekly income is above the financial threshold, they will not be eligible for this benefit ([Irish Statute Book, 2015](#)) —see [Formula 3](#) for details on the qualifying financial threshold and [Table 2](#) for details on the basic rates used to determine the qualifying financial threshold.
  - \* Individuals age 70 and over
    - All individuals age 70 and over are eligible to receive a GP Visit Card.

### Drugs Payment Scheme

This scheme allows individuals to pay no more than a maximum amount per month for approved medicines and drugs ([Irish Statute Book, 1972](#)). An individual must meet the following requirements:

- An individual must not be a Medical Card holder
- An individual must be paying more than the maximum amount per month for approved medicines —see [Table 3](#) for changes in the maximum amounts per month

### Long-term Care (LTC)

The Irish long-term care (LTC) system provides the following benefits to people in need of care:

#### Home Help (Until 2018)

Individuals that are sick or are receiving medical or midwifery services in respect of motherhood are eligible to receive assistance at home ([Irish Statute Book, 1970](#)). An individual must meet the following requirements:

- An individual must be a woman receiving medical, surgical, or midwifery services in respect of motherhood
- An individual must be a sick or infirm person requiring assistance at home

#### Home Care Package Scheme (From 2018: Home Support Services Scheme)

This scheme provides personal care services to individuals in need of care such as help with getting in and out of bed, getting dressed, and bathing ([Irish Statute Book, 2007b](#)). An individual must meet the following requirements:

- An individual must be age 65 and above, or need support in cases such as early onset dementia or a disability
- An individual must need continued support living at home or after returning from a hospital stay because of an illness or

disability

- An individual must pass a [Care Needs Assessment](#) done by a healthcare professional to determine the level of care the individual is currently receiving and other supports they may need

#### Fair Deal Scheme

The Fair Deal Scheme gives individuals financial benefits to cover part of the costs related to nursing home care after the individual applying for this benefit has paid a certain amount towards these costs ([Irish Statute Book, 2009](#)). An individual must meet the following requirements:

- An individual must need long-term nursing home care
- An individual must meet the ordinary residence condition
- An individual must be seeking care in a nursing home approved by the Health Service Executive
- An individual must pass a [Care Needs Assessment](#) done by a healthcare professional that includes an assessment on the following:
  - \* Ability to do everyday activities such as bathing, shopping, dressing or moving around
  - \* Mental abilities such as level of attention, memory, learning and language
  - \* Health and personal services the individual receives such as home care assistance or nurse
  - \* Social support such as from family members and community
- An individual must pass a financial assessment to determine how much the individual will pay towards their care —see [Formula 4](#) details on the financial assessment for singles and [Formula 5](#) for details for couples

#### Long-term Illness Scheme

Individuals that suffer from certain health conditions are eligible to receive drugs and medicines for free ([Irish Statute Book, 1970](#)). An individual must meet the following requirements:

- An individual must suffer from one of the eligible health conditions —see [Box 1](#) for details of the eligible health conditions
- An individual must live in Ireland and intend to live in Ireland for at least 1 year

- **To receive health benefits, does an individual have to claim them?** Answer: Yes
- **To continue to receive health benefits, does an individual have to remain qualified?** Answer: Qualified

## Coverage

### Medical Card

Individuals that have a Medical Card are entitled to the following benefits:

- GP (Family Doctor) services: The GP (Family Doctor) chosen must be part of the scheme from the Regional Health Boards or the Health Service Executive (HSE) (starting 2005) for the services to be free.
- Free prescribed drugs and medicines
- In-patient and out-patient public hospital services: There is no charge if they have a referral letter from a GP. Day-case services are included for free.
- Dental services: Per year, beneficiaries are entitled to a free dental examination, any required extractions, one first-stage endodontic treatment, and two fillings. Children in certain classes in primary school and those with special needs are eligible for a free dental examination.
- Optical services: Beneficiaries are entitled to a free eye examination and prescription glasses every two years.
- Aural services: If needed, Medical Card holders can get a hearing aid for free. Hearing tests and hearing aids are free for children under age 18.
- Maternity and infant care services: Under the [Maternity and Infant Care Scheme](#), free maternity care is given to all women that are ordinarily residents. This includes 5 examinations while pregnant for the first pregnancy and 6 examinations if it is not the first pregnancy. Once the baby is born, 2 postnatal visits to the GP are included. All in-patient, out-patient and emergency care services are included during the pregnancy and at birth.
- Emergency department services are free.
- Community care services: These services include public health nursing, home help, physiotherapy, occupational therapy, chiropody, day care, and respite care. Medical Card holders may be given priority for these services.
- Short-term counseling: This service is available to Medical Card holders over age 18 that are experiencing mild to moderate psychological and emotional distress. They need to be referred by their GP to access these services.
- Maternity Cash Grant on the birth of each child

### GP Visit Card

- Free visits to a participating GP (Family Doctor)
- Blood tests to monitor a condition
- Maternity and infant care services: Under the [Maternity and Infant Care Scheme](#), free maternity care is given to all women that are ordinarily residents. This includes 5 examinations while pregnant for the first pregnancy and 6 examinations if it is not the first pregnancy. Once the baby is born, 2 postnatal visits to the GP are included. All in-patient, out-patient and emergency care services are included during the pregnancy and at birth

#### Drugs Payment Scheme

Individuals will only have to pay up to a maximum amount per month for approved medicines and drugs. See [List of Reimbursable Items](#) for details of the medicines covered under this scheme.

#### Long-term care (LTC)

The Irish long-term care (LTC) system provides the following benefits to people in need of care:

##### Home Help

Individuals receive one-on-one care according to their needs for the period they are receiving this service.

##### Home Support Services

An individual in need of care and satisfying the eligibility requirements may apply for Home Support Services. The benefits an individual receives vary depending on their individual needs determined by the Care Needs Assessment. The benefits an individual may receive include help with everyday tasks such as getting in and out of bed, getting dressed, and bathing. Occasionally, the services an individual is receiving are reviewed by the HSE to increase or decrease the support given.

##### Fair Deal

The Fair Deal Scheme covers part of the costs related to nursing home care after the individual applying for this benefit has paid a certain amount towards these costs. The amount the individual will pay towards their care is determined by a financial assessment.

##### Long-term Illness Scheme

An individual may receive medicines and appliances for free if they are in the list of approved medicines for eligible health conditions. See [Box 1](#) for details of the eligible health conditions and [List of Approved Medicines and Appliances](#) for details of the medicines covered under this scheme.

## Costs

#### Medical Card

Individuals that have a Medical Card may incur in out-of-pocket costs if they receive services from a GP that are not part of the scheme from the Health Service Executive (HSE), and pay a fraction of the cost of the prescribed drugs and medicines. In 2023, Medical Card holders must pay 1.50€ per item, up to a maximum of 15€ per month. Individuals age 70 and over are charged 1€ per item, up to a maximum of 10€ per month. The maximum amounts apply per person or family (spouse or partner, children under age 16, children between 16 and 21 in full time education) —see [Table 6](#) for details of the changes in charges per year.

#### GP Visit Card

Individuals that have a GP Visit Card may incur out-of-pocket costs for charges related to emergency department services, in-patient services, and out-patient services if they were not referred by a GP. In 2023, the charge is 100€ for emergency department services and out-patient services, and 80€ per day up to a maximum of 800€ in any 12 consecutive months for in-patient services if they were not referred by a GP - see [Table 4](#) for details of the changes in charges per year.

#### Drugs Payment Scheme

Individuals pay up to the maximum amount per month for approved medicines. In 2023, the maximum amount individuals pay for approved medicines was 80€ per month —see [Table 3](#) for details of the maximum amounts per year.

#### Long-term care (LTC)

The Irish long-term care (LTC) system provides the following benefits to people in need of care:

##### Home Help

The Chief Executive Officer of the Health Board determines in each case whether the individual receiving this service will be charged or the amount they will be charged.



#### Home Support Services

No out-of-pocket costs are incurred by individuals receiving this benefit.

#### Fair Deal

After passing the financial assessment, the amount the individual will pay depends on whether they are single or married:

- Single: Pays 80% of their assessable income. The first 36,000€ of their capital is not included in the financial assessment
- Married or Cohabiting: Pays 40% of combined assessable income. The first 72,000€ of their capital is not included in the financial assessment

The amount the individual will pay does not depend on nursing home charges but on their income. HSE will pay for the balance if the amount the individual pays is less than the nursing home charges. See [Formula 4](#) for details on the financial assessment for singles and [Formula 5](#) for details for couples.

#### Long-term Illness Scheme

No out-of-pocket costs are incurred by individuals receiving approved medicines for eligible health conditions.



## Tables and Formulas

### Formula 1: Calculation of Total Weekly Income for the Medical Card and GP Visit Card for Single Individuals

$$\text{Total Weekly Income}_{i,t} = \text{CashInc}_{i,t} + \text{Countable Capital Income}_{i,t}$$

- Total Weekly Income<sub>*i,t*</sub> = Individual *i*'s total weekly income at time *t*
- CashInc<sub>*i,t*</sub> = Individual *i*'s cash income at time *t*, including income from work and net self-employment income
- Countable Capital Income<sub>*i,t*</sub> = Individual *i*'s assessed means from capital at time *t*:

$$\text{Countable Capital Income}_{i,t} = \begin{cases} 0 & \text{if } \text{CapInc}_{i,t} \leq 36,000 \\ \frac{\text{CapInc}_{i,t} - 36,000}{1,000} & \text{if } 36,000 < \text{CapInc}_{i,t} < 46,000 \\ \left( \frac{\text{CapInc}_{i,t} - 46,000}{1,000} \times 2 \right) + 10 & \text{if } 46,000 < \text{CapInc}_{i,t} < 56,000 \\ \left( \frac{\text{CapInc}_{i,t} - 56,000}{1,000} \times 4 \right) + 30 & \text{if } 56,000 \leq \text{CapInc}_{i,t} \end{cases}$$

where CapInc<sub>*i,t*</sub> is individual *i*'s income from capital at time *t*, including property, investments, and savings.

**Source:** Citizens Information (2022i) - Medical card means test: aged under 70

**Note:**

1. The first 36,000 € from capital is disregarded. These thresholds are effective from January 1, 2009.
2. The weekly total income is assessed for individuals over age 70. The weekly net income is assessed for individuals under age 70.

**Formula 2: Calculation of Total Weekly Income for the Medical Card and GP Visit Card for Married Individuals**

$$\text{Total Weekly Income}_{i,t} = \text{CashInc}_{i,t} + \text{Countable Capital Income}_{i,t}$$

- Total Weekly Income<sub>*i,t*</sub> = Individual *i*'s total weekly income at time *t*
- CashInc<sub>*i,t*</sub> = Individual *i*'s cash income at time *t*, including work income and net self-employment income
- Countable Capital Income<sub>*i,t*</sub> = Individual *i*'s assessed means from capital at time *t*:

$$\text{Countable Capital Income}_{i,t} = \begin{cases} 0 & \text{if } \text{CapInc}_{i,t} \leq 72,000 \\ \frac{\text{CapInc}_{i,t} - 72,000}{1,000} & \text{if } 72,000 < \text{CapInc}_{i,t} < 82,000 \\ \left( \frac{\text{CapInc}_{i,t} - 82,000}{1,000} \times 2 \right) + 10 & \text{if } 82,000 < \text{CapInc}_{i,t} < 92,000 \\ \left( \frac{\text{CapInc}_{i,t} - 92,000}{1,000} \times 4 \right) + 30 & \text{if } 102,000 \leq \text{CapInc}_{i,t} \end{cases}$$

where CapInc<sub>*i,t*</sub> = Individual *i*'s income from capital at time *t*, including property, investments, and savings.

**Source:** Citizens Information (2022i) - Medical card means test: aged under 70

**Note:**

1. The first 72,000 € from capital is disregarded. These thresholds are effective from January 1, 2009.
2. The weekly total income is assessed for individuals over age 70. The weekly net income is assessed for individuals under age 70.

**Formula 3: Qualifying Financial Threshold for the Medical Card and GP Visit Card**

$$\text{Qualifying Financial Threshold}_{i,t} = \text{Basic Rate Amount}_{i,t} + \text{Amount for dependants}_{i,t} + \text{Allowable Expenses}_{i,t}$$

- Qualifying Financial Threshold<sub>*i,t*</sub> = Individual *i*'s maximum income allowed to qualify at time *t*
- Basic Rate Amount<sub>*i,t*</sub> = Fixed amount at time *t* determined by individual *i*'s age, marital status, living situation, and number of children —see Table 1 and Table 2 for values over time
- Amount for Dependants<sub>*i,t*</sub> = Fixed amount at time *t* determined by the number of children the individual *i* has and their age. Details of historical values will be added in the next version
- Allowable Expenses<sub>*i,t*</sub> = Individual *i*'s rent, mortgage payments, home insurance, childcare, nursing home costs at time *t*. Details of historical values will be added in the next version

**Source:** Health Service Executive (2014) - Your Guide to Medical Cards and GP Visit Cards

**Table 1: Basic Rate Amounts for the Medical Card for Individuals Under Age 70 (2001-2023)**

Year	Single under Age 66	Couple under Age 66	Single between Age 66 and 69	Couple between Age 66 and 69
2022-2023	184.00 €	266.50 €	201.50 €	298.00 €
2009	184.00	266.50	201.50	298.00

**Source:** Health Service Executive (2022b) - Applying for a medical card: How much you can earn and still qualify

**Note:** Details of the historical rates will be added in the next version.

**Table 2: Basic Rates for the GP Visit Card for Individuals Under Age 70 (2005 -2023)**

Year	Single under Age 66	Couple under Age 66	Single between Age 66 and 69	Couple between Age 66 and 69
2022-2023	304.00 €	441.00 €	333.00 €	492.00 €
2009	276.00	400.00	302.00	447.00

**Source:** [Health Service Executive \(2022b\)](#) - Applying for a medical card: How much you can earn and still qualify

**Note:** Details of the historical rates will be added in the next version.

**Table 3: Maximum Monthly Amounts for the Drugs Payment Scheme (2001-2023)**

Period	Maximum Monthly Amount
2022-2023	80.00 €
2021	114.00
2019-2020	124.00
2018	134.00
2013-2017	144.00
2012	132.00
2010-2011	120.00
2009	100.00
2008	90.00
2005-2007	85.00
2004	78.00
2003	70.00
2002	65.00
2001	42.00 £

**Source:** [Citizens Information \(2023\)](#) - Drugs Payment Scheme

#### Box 1: Eligible Health Conditions for Long-term Illness Scheme

An individual could qualify for the Long-term Illness Scheme if they suffer from an eligible health condition:

- Acute leukaemia
- Cerebral palsy
- Cystic fibrosis
- Diabetes insipidus
- Diabetes mellitus
- Epilepsy
- Haemophilia
- Hydrocephalus
- Intellectual disability (mental handicap)
- Mental health condition - people age 16 and younger
- Muscular dystrophy
- Multiple sclerosis (MS)
- Parkinsonism
- Phenylketonuria (PKU)
- Spina bifida
- Thalidomide conditions

**Source:** [Health Service Executive \(2022d\)](#) - Long-Term Illness Scheme

**Table 4: Charges for Out-patient and In-patient Services (2001-2023)**

Period	Out-Patient Charges	In-patient Charges
2013-2023	100.00 €	80.00 €
2009-2012	100.00	75.00
2008	66.00	66.00
2006-2007	60.00	60.00
2005	55.00	55.00
2004	45.00	45.00
2003	40.00	40.00
2002	40.00	33.00
2001	25.00 €	26.00 €

**Source:** Citizens Information (2022a) - Charges for hospital services

**Table 5: Weekly Income Limits for Medical Card Eligibility for Individuals Age 70 and Older (2001-2023)**

Period	Single	Couple
2020-2023	550.00 €	1,050.00 €
2014-2019	500.00	900.00
2013	600.00	1,200.00
2009-2012	700.00	1,400.00
2001-2008	No limit	No limit

**Source:** Health Service Executive (2022b) - Applying for a medical card: How much you can earn and still qualify

**Note:** For 2001-2008, eligibility for individuals over age 70 was not means tested.

**Formula 4: Fair Deal Financial Assessment for Singles**

$$\text{Contribution}_{i,t} = 80\% \times \text{Income}_{i,t} + 40\% \times \text{Rental}_{i,t} + 7.5\% \times \left( \frac{\text{Cash}_{i,t} + \text{NonCash}_{i,t} - 36,000}{52} \right)$$

- $\text{Contribution}_{i,t}$  = Amount individual  $i$  will pay at time  $t$  towards nursing home costs
- $\text{Income}_{i,t}$  = Individual  $i$ 's income at time  $t$ , including income from work, pensions, and social welfare benefits
- $\text{Rental}_{i,t}$  = Individual  $i$ 's income from rental properties at time  $t$
- $\text{Cash}_{i,t}$  = Individual  $i$ 's cash assets at time  $t$ , including savings, stocks, and shares
- $\text{NonCash}_{i,t}$  = Individual  $i$ 's non-cash assets at time  $t$ , including property and land

**Source:** Health Service Executive (2022c) - Fair Deal Scheme - Financial Assessment: How much you pay towards care

**Formula 5: Fair Deal Financial Assessment for Couples**

$$\text{Contribution}_{i,t} = 40\% \times \text{Income}_{i,t} + 40\% \times \text{Rental}_{i,t} + 3.75\% \times \left( \frac{\text{Cash}_{i,t} + \text{NonCash}_{i,t} - 72,000}{52} \right)$$

- $\text{Contribution}_{i,t}$  = Amount couple  $i$  will pay at time  $t$  towards nursing home costs
- $\text{Income}_{i,t}$  = Couple  $i$ 's income at time  $t$ , including income from work, pensions, and social welfare benefits
- $\text{Rental}_{i,t}$  = Couple  $i$ 's income from rental properties at time  $t$
- $\text{Cash}_{i,t}$  = Couple  $i$ 's cash assets at time  $t$ , including savings, stocks, and shares
- $\text{NonCash}_{i,t}$  = Couple  $i$ 's non-cash assets at time  $t$ , including property and land

**Source:** Health Service Executive (2022c) - Fair Deal Scheme - Financial Assessment: How much you pay towards care

**Table 6: Prescription Charges (2001-2023)**

Period	Under Age 70	Over Age 70
2021-2023	1.50 €	1.00 €
2019-2020	2.00	1.50
2018	2.00	2.00
2014-2017	2.50	2.50
2013	1.50	1.50
2010-2012	0.50	0.50
2009-2001	0.00 €	0.00 €

**Source:** [Irish Statute Book \(2010\)](#) - Health (Amendment) (No. 2) Act

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- Irish Statute Book (2013a). Health (Out-Patient Charges) Regulations. As of March 13, 2023. [\[Link\]](#)
- Irish Statute Book (2013b). Health Services (Prescription Charges) Regulations. As of March 21, 2023. [\[Link\]](#)
- Irish Statute Book (2014). Health (General Practitioner Service) Act. As of June 13, 2023. [\[Link\]](#)
- Irish Statute Book (2015). Health (General Practitioner Service) Act. Section 3. As of March 8, 2023. [\[Link\]](#)
- Irish Statute Book (2017a). Health (Out-Patient Charges) Regulations. As of March 13, 2023. [\[Link\]](#)
- Irish Statute Book (2017b). Health Services (Prescription Charges) Regulations. As of March 21, 2023. [\[Link\]](#)
- Irish Statute Book (2018). Health Services (Prescription Charges) (Over 70s) Regulations. As of March 21, 2023. [\[Link\]](#)
- Irish Statute Book (2019). Health (Out-Patient Charges) Regulations. As of March 13, 2023. [\[Link\]](#)
- Irish Statute Book (2020a). Health Services (Prescription Charges) (Over 70s) Regulations. As of March 21, 2023. [\[Link\]](#)
- Irish Statute Book (2020b). Health Services (Prescription Charges) Regulations. As of March 21, 2023. [\[Link\]](#)

## Glossary of terms

This section summarizes key definitions from the main text. To facilitate switching back and forth, this document is designed with hyperlinks. Most PDF readers have shortcuts that permit a reader to return to the previous location after selecting a hyperlink. In Adobe Acrobat on a PC: “Alt” + “←”; In Adobe Acrobat on a MAC: “command” + “←”; In Preview on a MAC: “command” + “[”.

**Care Needs Assessment:** Assessment done by a healthcare professional of an individual’s ability to do everyday activities, mental abilities, any health service they already receive, and family and community support.

**Claimable Benefit:** A pension where the beneficiary must actively file a claim for benefits with the government’s pension authority.

**Drug Refund Scheme:** System under which individuals would first pay the full cost of their drugs and medications and then claimed back any excess over a maximum amount. In 1999, it was merged with the Drug Refund Scheme and became the Drugs Payment Scheme.

**Drug Cost Subsidisation Scheme:** System under which individuals would pay up to maximum value while the HSE pay the balance. Only available for individuals suffering from certain chronic health conditions. In 1999, it was merged with the Drug Refund Scheme and became the Drugs Payment Scheme.

**Drugs Payment Scheme:** Scheme that allows individuals to pay no more than a maximum amount per month for approved medicines and drugs.

**Fair Deal Scheme:** Financial benefit given to cover part of costs related to nursing home care after the individual applying for this benefit has paid a certain amount based on their income towards these costs.

**Practice Nurse:** Nurse that is privately employed by a general practitioner (GP) and works alongside them. Their role is to provide holistic nursing care to the practice population.

**GP Visit Card:** Medical benefit given to individuals that are not eligible for a Medical Card and have passed a means test. It covers free visits to a GP (Family Doctor).

**Home Help:** System that provides assistance at home to individuals that are sick or in need of help due to motherhood. It became part of the Home Support Services Scheme in 2018.

**Home Support Services Scheme:** Benefit given to individuals over age 65 that need help with their daily activities. It was introduced in 2018 as the Home Support Services Scheme as a result of the merging of the Home Care Package Scheme and Home Help system.

**Home Care Package Scheme:** Benefit given to individuals over age 65 that need help with their daily activities. It became part of the Home Support Services Scheme in 2018.

**Long-Term Illness Scheme:** Scheme under which individuals that suffer from certain long-term health conditions are eligible to receive drugs and medicines for free.

**Maternity and Infant Care Scheme:** Scheme under which medical care is provided to every pregnant woman who is an ordinarily resident of Ireland.

**Medical Card:** System that gives medical card holders access to free public health services.

**Ordinarily Resident:** Individuals that arrived in Ireland with the intent to live, work or study for a least one year, or retire in Ireland.

**Qualified Benefit:** A benefit is qualified if an individual must continue to meet certain standards, such as a means test, to continue receipt of benefits.

## Version information

*Current Version: 1.0 (August 2023)*

### Version History

- 1.0 (August 2023): First version.



## Additional resources

The following resources provide additional details for the interested reader:

*Johnston, Thomas and Burke — Can people afford to pay for health care? New evidence on financial protection in Ireland.* WHO Regional Office for Europe. Available at: <https://apps.who.int/iris/bitstream/handle/10665/332978/9789289055086-eng.pdf?sequence=1&isAllowed=y>

Features: It provides a general overview of the public health insurance in Ireland.

*Kenneally, M. — Medical Cards, the 'Over 70s' and all that...out of the frying pan?.* University College Cork Center for Policy Studies. Available at: <https://www.ucc.ie/en/media/academic/centreforpolicystudies/MedicalCards,the%E2%80%98Over70s%E2%80%99.pdf>

Features: It provides information on the changes that resulted from removing the entitlement to a medical card of individuals over age 70 in 2009.

*OECD — Help Wanted? Providing and Paying for Long-term Care: Ireland Long-term Care.* Available at: <https://www.oecd.org/ireland/47877738.pdf>

Features: It provides a general overview of the public long-term care services offered in Ireland.

*McDaid et al. — Ireland: Health system review.* Health Systems in Transition. Available at: [https://www.euro.who.int/\\_\\_data/assets/pdf\\_file/0004/85306/E92928.pdf](https://www.euro.who.int/__data/assets/pdf_file/0004/85306/E92928.pdf)

Features: It provides a general overview of the changes in the Irish healthcare system starting in 1970.