Community Medical Schemes

**Medical Cards (General Medical Services Scheme or GMS)**

A medical card entitles holders to a range of health services. These include:

* Family doctor service, including a choice of family doctor
* Prescribed medicines
* Prescribed medical appliances where available
* Out-patient services at hospital
* In-patient services in a public ward in a public hospital
* Consultant services
* Mother and baby services
* Dental, eyes and ears services
* Public health nursing services

Getting a medical card involves completing an application form which can be collected from your local community care centre or can be downloaded from the HSE website.  A prescription charge / payment of €2.50 per item is required if you are supplied a drug, medicine or surgical appliance (up to a maximum charge of €25.00 per family per month).

**GP Visit Card**

GP visit card holders are entitled to the services of a General Practitioner free of charge. The application process is the same as that for medical cards and the relevant form can be downloaded from the HSE website.  Additional allowances will be given for:

* Reasonable expenses incurred in respect of rent/mortgage payments
* Reasonable expenses incurred in respect of childcare costs
* Reasonable expenses incurred in travel to work

The assessment of eligibility for Medical Cards and GP Visit Cards will be based on the combined income of the applicant and spouse (if any) after tax and PRSI have been deducted.  Applicants, whose weekly incomes are derived solely from Social Welfare or Health Service Executive allowances/payments, which are in excess of the financial guidelines (either at first application or on renewal), will be granted Medical Cards.

**Discretionary Hardship Scheme**

The discretionary hardship scheme covers medical card holders who require medication or items prescribed my your doctor that are not covered under the medical card schemes. Items supplied include certain mineral and nutritional deficiency products, skin creams, cardiac drugs, some dressings and certain sunscreens (generally SPF 50+) etc. items not covered include:

* Over the counter medicines advertised to the public
* Simple emollients where suitable alternatives are available under the GMS
* Vitamins and certain dressings

The application is assessed by your [local health centre](http://www.hse.ie/eng/services/list/1/schemes/EHIC/contactdetails/) or through your local pharmacist depending on where you live in Ireland. The HSE will consider both the financial circumstances of the individual and how important the prescribed medication or item is to their needs.

**Long Term Illness Scheme**

This scheme entitles individuals to obtain medicines and appliances free of charge irrespective of means. It applies only to persons suffering from any of the following diseases or disabilities:

* Mental Handicap
* Spina Bifida
* Epilepsy
* Multiple Sclerosis
* Parkinson’s Disease
* Mental Illness (persons under 16 only)
* Hydrocephalus
* Diabetes mellitus
* Muscular Dystrophies
* Cerebral Palsy
* Phenylketonuria
* Haemophilia
* Diabetes Insipidus
* Acute Leukaemia
* Cystic Fibrosis

The Long Term Illness Scheme causes much confusion as it does not cover all long-term illnesses.   The above list of diseases and disabilities covered by the scheme was decided in Regulations made by the Minister for Health under the Health Act 1970 (The Health Services (Amendment) Regulations, 1971, S.I. 277/1971).  Successive governments have resisted attempts by patient organisations to extend this list to people suffering from other long-term conditions, leading to an unjust situation in which life-long conditions like psoriasis are not considered ‘long-term illnesses’ under the Scheme.

**High-Tech Scheme**

This scheme relates to the supply of advanced treatments like biologics (injectable drugs).   A high-tech prescription is usually issued by the consultant in a hospital and given to the patient to bring to their pharmacy for dispensing.

Where the patient has a medical card or the medicine is for a specific condition covered by the Long Term Illness Scheme they do not pay anything, otherwise they pay the first €124.00 a month of the cost in accordance with the rules of the Drugs Payment Scheme.

**Drug Payment Scheme**

All Irish residents who do not have a medical card should apply for a drug payment (DPS) card. Under this scheme a family pays no more than €114.00 per month (effective from 1 November 2020) for prescribed medicines and appliances listed under the scheme. It covers:

* The applicant
* His/her spouse
* Dependants under 18
* Dependants between 18-23 who are in full time education
* A dependant with a physical or mental disability or illness  who cannot maintain themselves fully, who is ordinarily resident in the family home and who does not hold a current medical card.

Patients using the Long Term Illness Scheme but whose medication is not covered under that scheme should also apply for the Drugs payment Scheme. Application forms can be collected from any pharmacy or local community care centre.

**Drug Refund Scheme**

If a patient/family spends over €124 in a month they can claim back the excess by completing one of forms available from your local community care centre.

**Travel Abroad Scheme**

The HSE operates a Treatment Abroad Scheme (TAS) for people entitled to treatment in another EU/EEA member state. The TAS provides the cost of approved treatments in another EU/EEA member state or Switzerland.

**Cross Border Healthcare Scheme**

The HSE operates a Cross-Border Healthcare Directive (CBD), for people entitled to public patient healthcare in Ireland who want to avail of that healthcare in another EU/EEA\* member state under Directive 201/24/EU of the European Parliament and of the Council of 9 March 2011 on the application of patient’s rights in cross-border healthcare, as per the procedures set out in governing EU Regulations and Directives and Irish legislation.  The scheme does not cover access to drug therapies that are not currently provided for in the public healthcare system in Ireland, but will cover costs up to the cost of procedure in the Irish healthcare service.

**Tax Relief on Medicines**

Revenue.ie recommends that you keep all your receipts for medical expenses, including those for any visits to your doctor as you can claim a tax refund at the end of the year on these expenses. You must wait for your P60 statement to arrive before claiming. You must also wait for the P60 statement from your spouse or civil partner if you are jointly assessed for tax. You can only claim for expenses that you have receipts for. You can claim relief on the last four year’s health expenses. The refund will be paid at the lowest rate of tax, which is currently 20%.

**How to claim your tax relief**  
You can claim tax relief online using Revenue’s myAccount service. You can also access the myAccount service on mobile and tablet devices using Revenue’s RevApp.  You can also claim medical expenses relief offline by completing a paper Form 12 and returning it to your Revenue office. You can request a Form 12 by calling Revenue at (1890) 30 67 06 and giving your name, your full postal address, your Personal Public Service (PPS) number and the number of forms you need. Alternatively, you can email these details to custform@revenue.ie.

**Supplementary Welfare Allowance Scheme**

The Supplementary Welfare Allowance Scheme consists of a basic payment, called Supplementary Welfare Allowance, and other financial supplements for certain expenses you may not be able to meet, including emergency situations. It is administered by the Department of Social Protection’s representative (formerly known as the Community Welfare Officer) in your local office.  Visit Citizen’s Information for more details of this scheme.

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