

IMA National Health Scheme

Constitution & Byelaws adopted on 27th December in the 75th meeting of Central Council of IMA at Ahmadabad, Gujarat. It came into force in January 2015, with an aim to help IMA members, those who join the scheme, to meet heavy expenses for the management of serious illnesses. It came in to As all of us know, in the current health scenario, the cost of investigations and treatment are bound to increase.

This scheme is intended to provide financial assistance to the members / beneficiary members to meet the expenses for the management of

1. Heart diseases - Angioplasty, CABG, Valvular surgeries: Upper limit will be 2 lakh
2. Kidney Diseases – Renal transplantation, Dialysis: Upper limit will be 2 lakh
3. Malignancies, Brain tumours: Upper limit will be 2 lakh
4. Spinal Surgery, Other major surgeries, Joint replacement surgeries: Upper limit will be 1 lakh
5. Cerebrovascular accident: Upper limit will be 40,000
6. Road traffic and other accidents.
7. Major illnesses requiring hospitalisation as approved by scrutinizing committee: Upper limit will be 40,000

Scrutinizing committee of the scheme has the power of discretion to fix the upper limit of reimbursements for various medical conditions/ surgical/diagnostic procedures after considering the existing expenses of treatment in India Territory.

Diagnosis and treatment costing less than Rs.5000 will not be covered under this scheme. Member have to submit original papers as well as attested photo copies of treatment certificate (discharge summary), break up of bills.(professional charges, cost of medicines and investigations etc.) and any other **documents upon which a claim is based within 60 days of discharge from hospital.**

The member shall also give additional information and assistance as the scheme may require in dealing with any claim. If a claim be in any manner fraudulent or supported by any fraudulent means of device (whether by a member or any other person acting on his/her behalf), the scheme shall not be liable to make any payment. Original bills and papers will be given back to the member after verification.

Permissible reimbursement will be disbursed within 90 days from the submission of the original papers, bills and other documents upon which the claim is based. After verifying all the facts as prescribed by the managing committee, all payments shall be made by A/c. payee cheque / demand draft/ cash transfer only. Managing committee will have discretion to pass/ reject payment of bill in cases, where they are not satisfied about the genuineness of the bills. Members will be given reimbursement of 75% of total amount of the bill not exceeding the sum limited to each disease.

A member will get a maximum of benefit of Rs.2 Lakh in one year.

No advance payment will be made to the members

The managing committee of the scheme shall be empowered to decide about the claims on the above diseases. Central working committee of IMA shall be the Appellate body. No Disputes can be challenged in any court of law.

Members of the scheme can claim benefits (who join the scheme before completion of 60years of age) after completion of one year of joining the scheme .Those who joins the scheme after 60 years will have a lock in period of 2 years.

Charges of engaging a special nurse or attendant will not be reimbursed.

Expenses incurred on travel or ambulance will not be reimbursed.

Food, laundry and telephone bills will not be allowed.

Treatments in Modern Medicine only will be reimbursed.

The following bills or charges will not be reimbursed: cost of cosmetic treatment including dental prosthesis, cost of external appliances like spectacles, hearing aids and exercise equipments etc will not be covered.

In case of demise of a member the claim shall be given to the nominee given in the records.

TO JOIN THE SCHEME

IMA members, Spouses, Parents and Children can join the scheme provided they are aged below 80 years at time of joining the scheme. IMA members shall be members and others shall be beneficiary members. Application form is available in this site. Download the form, take printout in legal size paper ie, 8.5 x 14 inch paper and send the duly filled form to the scheme office.

FEES STRUCTURE OF THE SCHEME

AF-Admission fees

AMS- Annual Membership Subscription

AFAC- Advance Financial Assistance Contribution

First Year

AGE	AF	AMS	AFAC	TOTAL
Less than 25	1000	500	2500	4000
25 Up to 35	1000	500	3000	4500
35 up to 45	1250	500	3000	4750
45 up to 55	1750	500	3000	5750

AMS and AFAC have to be paid every year.

AGE	AF	AMS	AFAC	TOTAL
55 Up to 60	5000	500	5000	10500
60 Up to 65	7000	500	7000	14500
65 Up to 70	8000	500	8000	16500
70 Up to 80	10000	500	10000	20500

AMS and AFAC have to be paid every year

Next Year

AGE	AMS	AFAC	TOTAL
Less than 25	500	2500	3000
25 Up to 35	500	3000	3500

35 up to 45	500	3000	3500
45 up to 55	500	3000	3500
AMS and AFAC have to be paid every year.			
AGE	AMS	AFAC	TOTAL
55 Up to 60	500	5000	5500
60 Up to 65	500	7000	7500
65 Up to 70	500	8000	8500
70 Up to 80	500	10000	10500
AMS and AFAC have to be paid every year			