

CBROA WELFARE SCHEMES: MODIFICATION IN CBROA WELFARE SCHEMES

Members are aware that depending upon the Funds position, the guidelines of welfare measures will be reviewed and modified from time to time. Accordingly, in the C.C meeting of CBROA held at Hubli on 19.03.2017, Central Committee had reviewed the funds position and accorded sanction to modify the terms & conditions of Welfare measures as under. The revised provisions of the schemes are effective from 01.04.2017.

1. Medical Relief i.e. Reimbursement of Hospitalization Expenses:

Objective:

To assist the member/spouse by way of reimbursement of Hospitalisation expenses for any ailment / disease /accident to the member or his /her spouse.

Eligibility:

Member must be a Life member or in the case of Ordinary member, his/her subscription must be upto date. Members whose subscriptions are in arrears and just for the sake of claiming Medical relief, clearing the arrears of subscription, are not entitled for reimbursement of Medical relief.

Other Provisions:

Minimum Hospitalisation expenses incurred must be Rs 1, 00,000/- (Rs One Lakh) under single bill concept. Investigation / Medicine expenses incurred before and after 30 days of Hospitalisation (Pre & Post) on the medical advice will be considered as Hospitalisation expenses for reimbursement purpose.

CBROA will reimburse 7.5% of the total bill amount or disallowed portion of the Health Insurance claim settlement whichever is less, subject to a minimum of Rs 7500/-. And the maximum reimbursement allowed under the scheme is Rs 25000/- (Rs Twenty five thousand) only in his /her life time.

In the case of spouse hospitalisation, maximum reimbursement amount allowed is Rs 10000/- (ten thousand) only, within the above said overall limit of Rs 25000/-.

Member can prefer any number of claims in his /her life time including the claim relating to spouse, subject to overall limit of Rs 25000/- per member.

Claims must be preferred within two months from the date of discharge from the Hospital.

Members claiming the reimbursement of Hospital expenses must provide following information on plain paper and forward the same to CBROA, Bengaluru office along with Xerox copies of Hospitalisation / medicine bills & discharge summary.

CBROA Medical Reimbursement - Claim Application Format:

a	Name with Staff number	
b	Address of Member	
c	CBROA Membership Number Life Member / Ordinary Member	
d	If Ordinary member; whether subscription is up to date	
e	Name of the Patient: (Member or Spouse)	
f	Nature of ailment / treatment	
g	Date of admission to Hospital	
h	Date of Discharge from Hospital	
i	Total Hospital Bill amount (including Pre & Post medicine bills amount)	
j	Amount settled by Health Ins Co.	
k	Disallowed portion of claim amount by Health Ins. Co.	
l	Details of previous claims Preferred with CBROA – if any	
m	Canara Bank branch name with Account number of member	
n	Whether Photo copies following are attached? 1. Hospital /other medical bills 2. Hospital Discharge summery 3.sanction copy relating to Insurance settled amount.	Yes / No

The above are true and correct to the best of my knowledge. Please permit me the eligible reimbursement

Signature of Member with Date