NIRAMAYA - Health Insurance Scheme

A Health Insurance Scheme for the welfare of Persons with Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities.

Objective

In order to enable and empower persons with disability to live as independently and as fully as possible, health services and their access to persons with disabilities assume a very significant role. In this context, the health insurance facility becomes important but presently such products are not easily available for persons with disabilities. In such a situation, a health insurance scheme “Niramaya” is conceived with the following objectives.

- To provide affordable Health Insurance to persons with Autism, Cerebral Palsy, Mental Retardation & Multiple Disabilities.
- To encourage health services seeking behaviour among persons with disability.
- To improve the general health condition & quality of life of persons with disability.

Implementation

The entire scheme will be implemented through an Insurance company & monitored by the National Trust.

Scheme & its coverage

- The scheme envisages delivering comprehensive cover which will ---
- Have a single premium across age band.
- Provide same coverage irrespective of the type of disability covered under the National Trust Act.
- Insurance cover upto Rs.1.0 lakh per covered beneficiary.
- All persons with developmental disabilities covered under National Trust Act, will be eligible and those enrolling with National Trust would be included and there will be no ‘selection’.
- The scheme will be available in the entire country except in Jammu & Kashmir.
- The scheme further envisages that there shall be
- No exclusion of Pre-existing condition
- Same cover as that for other persons
- Services ranging from regular Medical Check-up to Hospitalization, Therapy to Corrective Surgery, Transportation.
• Conditions requiring repetitive medical intervention as an in-patient.
• Pre & Post hospitalization expenses, subject to limits.
• No pre-insurance medical tests.
• Reimbursement of claims in case of OPD services from any Qualified Medical Practitioner and for IPD treatment can be taken from a Hospital anywhere in the country.

Enrolment of Beneficiaries, through registered organisations)

Any eligible person can apply for enrolment under the Scheme through the nearest organization registered with the National Trust or to any other agencies specially entrusted in this regard by the National Trust. Registered organizations with National Trust should send Enrolment Form/Applications under Niramaya through online using our MIS (www.niramayascheme.com). On successful enrolment and approval, the same would be covered in the Insurance Policy. The online applications received between 1st September to 28th February would be covered from April month and applications received between 1st March to 31st August would be covered from October month.

Enrolment / Renewal Fee under Niramaya

i) Enrolment fee under the Scheme can be paid either by DD/ NEFT or cash only (not by Cheque) in National Trust (Niramaya) account.

ii) The premium for all categories is Rs.250.00 now, irrespective of income group. Hence now onwards the proof of income for BPL category beneficiaries, the BPL card of verification from RO is must.

iii) The enrolment & renewals can be done throughout the year now. The E-card will be issued in the next month of the enrolment/renewal. All such policies issued will be valid till March of the next year. The premium will be based on the prorate basis as per the below table:-

iv) The beneficiaries who could not make renewals in time, they can also enroll themselves now by clicking on “Inactive” given under renewal tab of www.niramayascheme.com. They need not to submit any new document and just have to upload the scan copy of the premium. They can search their details by just putting their name or application Id. They can also change their address if any.

v) To encourage the ROs for enrolment, the SNACs will also be paid honorarium, of Rs.10.00 per enrolment/renewal made in their state. The ROs will continue to be paid honorarium of Rs.40.00 per enrolment/renewal. (I need feedback on these rates, do you think this will help to motivate better enrolment? Please send feedback by June 12th).

vi) The honorarium to all ROs will be paid on quarterly basis.
Premium & other charges to Insurance Company

The insurance company shall be selected and premium shall be decided through a transparent process. The premium amount shall be paid by the National Trust in advance to the selected Insurance Company.

There will be a nominal processing fee as determined from time to time which shall be payable to the National Trust.

Stop Loss

In case of total claims exceeding the total premium amount, the Insurance Company will cover the risk up to 120% of the total premium amount i.e. the insurance company can have a stop loss at 120% of total premium amount. Similarly in case of claims falling short of total premium amount, the Insurance Company shall pay back 90% of the savings, after deducting 20% of the total premium as administrative cost.

Niramaya Benefit Chart

The details of services with financial limits are given in Annexure - ‘A’.

Claim Form under Niramaya

All Claims for settlement under Niramaya has to be submitted to ICICI Lombard in the prescribed form alongwith relevant vouchers / bills, etc. within 30 days of treatment or discharge from hospital.....download Claim Form from the website www.niramayascheme.com.

For any query regarding reimbursement of claim, kindly contact:

ICICI Lombard General Insurance Company, Narain Manzil, 3rd floor, 23, Barakhamba Road, New Delhi – 110 001.

Toll Free Nos: 1800-209-8888, 1800-233-4505, 1800-233-1166,

Tel: 011-66310689 / 66310600, Fax No.66310636;

Email ID: ihealthcare@icicilombard.com or ayushi.sharma@icicilombard.com

For claim status : www.icicilombard.com

Printing of E-Card: As a document of policy coverage, provision of printing of E-Card has been started by using Application ID No., through our website.
ANNEXURE - A

NIRAMAYA - BENEFIT CHART (ON REIMBURSEMENT BASIS)

<table>
<thead>
<tr>
<th>Detail</th>
<th>Limit (in Rs.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>OVERALL LIMIT OF HOSPITALIZATION</td>
<td>1,00,000</td>
</tr>
<tr>
<td>Hospitalization</td>
<td>1,00,000</td>
</tr>
<tr>
<td>Corrective Surgeries</td>
<td>50,000</td>
</tr>
<tr>
<td>Non-Surgical</td>
<td>15,000</td>
</tr>
<tr>
<td>Preventive Surgery</td>
<td>15,000</td>
</tr>
<tr>
<td>OVERALL LIMIT OF OUT PATIENT DEPARTMENT (OPD)</td>
<td>10,000</td>
</tr>
<tr>
<td>OPD treatment including tests</td>
<td>5,000</td>
</tr>
<tr>
<td>Regular Medical check-up for non-ailing disabled.</td>
<td>5,000</td>
</tr>
<tr>
<td>Ongoing Therapies</td>
<td>10,000</td>
</tr>
<tr>
<td>Dental Preventive Dentistry</td>
<td>2,500</td>
</tr>
<tr>
<td>Alternative Medicine (to be considered within limit of IPD or OPD).</td>
<td>4,500</td>
</tr>
<tr>
<td>Transportation costs (to be considered within limit of IPD or OPD).</td>
<td>1,000</td>
</tr>
</tbody>
</table>

OVERALL LIMIT OF THE COVERAGE FOR A PERSON IS : RS. 1,00,000

IMPORTANT INFORMATION :

RENEWAL OF POLICY:
1. Appeal to all ROs for on-line Enrollment / Renewal of beneficiaries and intimation regarding enhancement of incentive for enrollment. Click to view the appeal of Chairperson, NT
2. Beneficiaries covered under Niramaya Policy from 2012 - 2013. Click to View/Download the list
3. Every year kindly renew the policy, as per the details given below :
   - For coverage date 2nd April - By 28th February
   - For coverage date 2nd October - By 31st August
4. While applying for renewal, kindly quote the bank details of beneficiary as it is Mandatory for reimbursement of claim.
5. Please note that NIRAMAYA is a health insurance scheme and not the Life Insurance Scheme. As per the policy eligible claims will be reimbursed. In case of death of beneficiary no any claim/compensation will be payable under this scheme.

(B) As the Niramaya scheme does not have cashless facility, there is no need for the card. For reimbursement of claim, you may mention Application ID No. / Health ID No. and enclose any Identity proof.
However, those beneficiaries who are not able to print E-Card can also claim for reimbursement by giving their Health ID No.