

"MAI BHAGO ISTRI SHAKTI SCHEME"

Empowerment Of Women Through Cooperatives

The scheme gets its inspiration from the legendary great woman from the history of Punjab who became an inspiring/motivating figure for the great '40 Muktas' of the Sikh History. She is known as a symbol of power and faith.

OBJECTIVES

The scheme envisages to strengthen women especially in rural areas in single/ individual capacity or clusters or groups. The objectives of the scheme is to strengthen their activities through training at convenient places. hassle free credit and assistance. The scheme also envisages creation of backward & forward linkages by creating a supply chain for providing raw material to women entrepreneurs with the help of apex/ state level organizations. It will ensure marketing of products made by such self employed women through the network of primary societies as well as the apex/ state organizations like WEAVCO, MARKFED & MILKFED. The scheme also envisages seeking and taking assistance, grants, subsidies from state and central organizations like KVIC, KVIB as well as Mahila Kosh etc.

ACTION PLAN

- k Primary Agriculture Cooperative Societies (PACS) will be the hub for empowerment of Women. There are about 4135 number of PACS in Punjab and each PACS presently has 1-4 villages in its area of operation and each PACS has also its own building having two small offices and a godown having capacity of 200-500 metric tones. A part of this building can be spared for the office, training and commercial activities to be taken up by the women.
- k Cooperative Inspector Incharge of the society alongwith the secretary of the society and official of the lady wing (if any) will identify and activate a group of women. Strength of this group can vary from society to society and initially a group of atleast 7-10 women will be activated and these women will be made nominal members of the PACS. if they seek finance from PACS. But PACS will retain the role of a facilitator in all situations.
- k Different income generating activities will be identified at the village level depending upon the area and the activities already being done in that particular village will be strengthened. The following activities can be undertaken:
 - „ Phulkari work,
 - „ Tailoring, stitching and embroidery
 - „ Hosiery and knitting.

- „ Vermi compost fertilizers
- „ Beauty Parlour, STD Booths and petty shops
- „ Mushroom growing, Bee keeping, earthen pots
- „ Vadi papad, Pickles, Murrba, sauce and squash making
- „ Dairy & Poultry
- „ Cattle feed making. Poultry feed making
- „ Making of Soft toys
- „ Processing of Fruits and vegetables
- „ Grinding and packing of chilli powder, haldi powder & masala powder
- „ Computer BPO / Call center Training (inbound/ outbound calls)
- „ Soap making
- „ Notebook, Copy book, Registers etc. making
- „ Uniform making
- „ Bakery, Confectionery
- „ Candle making
- „ Women groups can also provide lunch to Anganwadi children under the central ICDS scheme. Provide meal to school children under the Mid day meal scheme.

In one society different women members can opt different activities depending upon their aptitude and skills.

These women entrepreneurs can be classified into two broad groups :

- A: Women providing consumer items which can be sold through informal markets or PACS network e.g spices, soap, pickles. bakery etc.*
- B: Women producing such products which have to be marketed with the help of State/Apex organizations. They require training, finance, equipment and backward & forward linkages.*

FUNDS

- v Funds for these activities will be provided by the Primary Agriculture Cooperative Society. Central Cooperative Banks will keep separate funds for these women members. This loan will be hassle free and at the preferential rate of interest preferably at 8-10% at the personal surety of some cooperative members of the society and without stressing for any tangible security and bills etc. RCS office may create a scheme for microfinance in PACS with re-finance from CCB's. CCB's will

simplify loaning procedures and depute a senior, positive officer for prompt processing & disbursement of loans.

- v Efforts will be made to rope in assistance to women members by way of subsidy given by the Departments of Women and Child Development, Social Security and Department of Mahila Kosh of Govt. of India. There are many centrally sponsored schemes for the upliftment of women like STEP and NORAD. Steering committee at Head office level will tie up with different departments for roping in this subsidy at grass root level. Khadi Village Industries Commission (KVIC), Govt. of India and Khadi Village Industries Board (KVIB), Govt. of Punjab are also having different schemes for providing work and subsidy to women members.
- v Some pilot projects need to be initiated in each District. Funds if need be can be given through 'Cooperative Development Fund' (CDF) and 'Common Good Fund' (CGF) maintained by each profit earning society.

TRAINING

Training of women members at PACS level, Block level or at the District Head Quarter will be organized by the Division Level Committee. Joint Registrar of the division who is the chairman of the Division Level Committee will keep liaison with the Department of Horticulture, Khadi & Village Industries Commission (KVIC), Khadi & Village Industries Board (KVIB), Krishi Vigyan Kendra, Knit Wear Clubs Ludhiana, Punjab Agriculture University (PAU), Women Welfare Department, Social Security Department and different NGO's working in the area for imparting various types of training, guidance and awareness. JRCS alongwith his team will identify the support mechanism depending upon the field conditions for such women/groups. He will be free to decide and seek help from Government departments, PAU centers, NGO's and other agencies.

The Managing Director PICT will facilitate all the Joint Registrar's and Deputy Registrar's in holding these trainings. Funds to the tune of Rs. 20.00 lacs has been earmarked for the training and have been placed at the disposal of MD PICT, Chandigarh for further disbursement to Joint Registrars as per their requirement.

MOTIVATION

Education for promoting gender justice will be given by PUNCOFED to the women members, which will touch the issues of female foeticide, dowry related violence, sexual harassment and discrimination etc. Education Instructors of PUNCOFED will organize camps at village level itself. Eminent women activists and NGO's will be invited to create orientation in the women groups from time to time. This will also instill 'motivation'.

MARKETING

The marketing of products prepared by the societies will be done through the network of PACS, showrooms/ sale outlets of WEAVCO, MILKFED and MARKFED.

Committee at Division level will take care of forward and backward linkages of products. Designers can be engaged by WEAVCO, who will help in preparing new designs, new colour schemes and good packaging of these products. The committee will also coordinate with other departments like Phulkari, NIIFT Mohali, Khadi & Village Industries Commission (KVIC), Khadi & Village Industries Board (KVIB), Krishi Vigyan Kendra, Knit Wear Clubs Ludhiana, Punjab Agriculture University (PAU), Women Welfare Department, Social Security Department etc. and different departments of Government of India for availing benefit of centrally sponsored schemes.

PROGRESS UNDER THE SCHEME

1. Membership:

- a) There are 167820 Women members in 2514 Women societies as on 31.3.2008
- b) 80,000 Women were enrolled members of the PACS during the last year i.e. from March 2007 to November 2008.

Target of 1.00 lakh members has been given which are to be entolled members of PACS/Milk/Women Societies from November 2008 to November 2009.

2. Financial Assistance/Loans to Women Members:

PSCB has given limit of Rs. 2.00 lacs to each PACS for advancement of Loans to Women members. Progress to Advancement to Women members has been given as under:

DIVISION	DISTRICT	LOAN ADVANCED (Rs. In Lakhs)	TOTAL LOAN ADVANCED
Jalandhar	Amritsar	11.55	
	Gurdaspur	0.30	
	Hoshiarpur	73.67	
	Jalandhar	169.72	
	Kapurthala	56.96	
	S.B.S Nagar (Nawanshahr)	370.32	682.52
Patiala	Patiala	366.25	
	Sangrur	9.60	
	Ropar	76.98	
	Ludhiana	135.04	
	Fatehgarh Sahib	252.95	840.82

Ferozepur	Ferozepur	75.19	
	Moga	72.23	
	Muktsar	42.05	
	Faridkot	51.40	
	Bathinda	102.23	
	Mansa	243.71	586.81
GRAND TOTAL			2110.15

No Targets of loan Advancement has been given to any field Office so as to avoid excessive loaning and mis-utilisation of loans.

Report regarding the Self Help Groups (SHGs) formed under the Women Empowerment Scheme;

Division	Number of Self Help Groups	Total Members of SHGs	Collection of Members (Rs. In Lacs)
Patiala	29	424	0.55
Ferozepur	512	4371	3.06
Jalandhar	550	6203	5.14

3. Recovery and marketing of products prepared by Women members

- i) Recovery in Jalandhar Division is more than 97%. Joint Registrar, Cooperative Societies, Patiala and Joint Registrar, Cooperative Societies, Ferozepur have also been asked to give position of recovery in their Districts.
- ii) Field Staff has been directed to market the products prepared by Women through PACS. These products will be sold under the name "Pride/गौरव". These products will be sold through Weavco, Markfed and Milkfed. Products of Women members may also be sold through exhibitions organized at National and State Level.

4. Training :

- i) Rupees 20.00 lacs have been placed with PICT for providing Training to the Women members of the societies. Rs. 80,000/- has so far been utilized for the training.
- ii) Many Training programmes like Tailoring, Cutting, Stitching, Embroidery, Painting, Soap making, Candle making, Beauty Parlour, Food & Preservation are being done at the PACS level.
- iii) PAU, Ludhiana has KVKs (Khadi Vigyan Kendras) in almost all district Head Quarters where they provide training for:
 - a) Stitching, Painting, Tailoring Toys making & etc.
 - b) Food preservation
 - c) Bakery
 - d) Soap making & Surf making

- e) Bee-keeping
- f) Fish breeding
- g) Mushroom growing
- h) Rural Creching for early childhood

A seminar with all the KVKs was held in PAU, Ludhiana on 12.12.2008. It was attended by Director Extension, Director TATA Trust and officers of the Cooperative Department, Wherein it has been decided that since PAU, Ludhiana has sufficient infrastructure for training, training needs of these Women members of the Cooperative Department will be met through PAU/KVKs.

Deputy Registrar and LAR have been directed to coordinate with KVKs for effective training.

5. Rashtriya Mahila Kosh (RMK)

For funds from Rashtriya Mahila Kosh many meeting with the Executive Director of RMK Ms. Sneh Lata Kumar have been held and Managing Director, Weavco gave a presentation to Executive Director RMK. RMK have appointed Weavco as their franchisee and Nodal agency. RMK has sanctioned Rs. 75.00 lacs of loan to Weavco at 5% rate of interest subject to the Government Guarantee of Punjab Government. Case of guarantee has been sent to the office of Cooperation Department for onward submission to Finance Department

ROAD MAP OF ACTION AND MONITORING IDENTIFICATION OF NEEDS

A. Finance

1. Wherever loans/micro finance is required by individual women enterpreneur, it will be provided by the CCBs within one month i.e. August end. CCBs will not ask for any tangible security for the loans upto Rs. 25,000/.
2. No bills regarding utilization etc. are required to be submitted. Only Inspector, Cooperative Societies will certify the utilization of the loan.
3. PSCBs will earmark separate funds for credit to women enterpreneurs in all DCCBs
4. A Senior Bank officer will be deputed to ensure the prompt disbursement of these loans
5. A scheme will be created by RCS, Punjab, Chandigarh for providing microfinance upto Rs. 25,000/- to women through PACS on the basis of personal guarantee. PACS will be entitled to refinance from CCBs against loans advanced to women.
6. There should be a preferential rate of interest to be charged from women entrepreneurs.

Training Needs

1. Women entrepreneurs desirous of acquiring special skills for production of items like pickle, squash, making candles etc. will be identified by ARCS.
2. JRs will organize them into groups for imparting training at PICT.
3. PICT will coordinate with JRs as well as training experts for prompt start and completion of such training programmes at places convenient for ladies.
4. State Level Committee will make arrangements of such training with the help of state level apex organizations, NGOs and Central Government agencies if available.
5. Funds may initially be provided from CDF and CGF of the societies.
6. The initial batches will be fully trained by October 2007. This will go on.

Creation of linkages and support systems

1. The consumer items produced by the individual women entrepreneurs or groups which can be marketed through the network of PACS of the area, exhibitions etc. or at outlets/shops of MILKFED, MARKFED and WEAVCO, will be planned, executed and supervised by the JRs with a strong will and concerted efforts.
2. A proposal will be created by JRs for the women who have been trained for a group activity. They will produce the items with the raw material support and marketing support of the state level/apex agencies or industrial houses.

This will be a continuous phenomenon , but the pilot project should come into production by December.

Monitoring

1. Chairperson i.e. FCC, Punjab will review the progress of the scheme once in every quarter or at her convenience.
2. Vice Chairman of the scheme i.e. RCS, Punjab, Chandigarh will review the scheme in the state level monthly meetings of the field officers.
3. Convener of the scheme will call exclusive meetings of the field officers In Chandigarh or at such places in the field to be organized by the JRs as and when required.

Central and State Assistance

1. Initially assistance is required for the training component. All trainings at PICT or in the field should be funded from Government / Semi Government and welfare schemes available with NGOs / Central Government schemes.
2. Concerted efforts in this regard will be made by the State Level Committee with the help of various Departments.

Incentives/ subsidies

1. The incentives/ subsidies or seed money schemes already run by KVIC or KVIB at the state level is conducive to the scheme.
2. KVIC should strengthen and enlarge its list to cover women activities in the scheme. A separate mechanism of incentives based on the total outlay (Capital investment + working capital) can also be invented with the help of Department of Industries, Welfare Departments and Women & Child Development agencies.

BHAI GHANHYA SEHAT SEWA SCHEME

For the vast majority of rural population of Punjab, the cost of health care particularly in-patient care, is a significant barrier in accessing professional healthcare in time of need. Very often, the cost of treatment pushes the people to economic ill health. Normally, individuals when hospitalized borrow money or sell their assets to cover the cost of hospitalization which pushes them into debt trap. The Bhai Ghanhya Sehat Sewa Scheme aims to provide viable means of improving access to quality health services for rural community at affordable cost.

2.0 NAME

The Name of the Scheme is "The Bhai Ghanhya Sehat Sewa Scheme"

3.0 OBJECTIVE

To provide cost effective quality health care facilities to the members and employees and their dependents of Cooperative Institutions and Cooperative Societies through an Insurance backed Scheme.

4.0 BENEFICIARIES

Members or and employees of the Eligible Cooperative Societies, Cooperative institutions, the Department of Cooperation/ office of the Registrar Cooperative Societies, Punjab and Bhai Ghanhya Trust and their families across the State of Punjab and Chandigarh, who have been named as dependants in the Member Enrollment Form for being covered under the Scheme, provided none of such persons is more than 75 years of age on the date of commencement of the Policy Plan Period.

"Eligible Cooperative Societies" means and includes any cooperative society registered under the Punjab Cooperative Societies Act, 1961 and existing or functioning in the State of Punjab and/ or Chandigarh.

5.0 SCOPE AND LIMIT

H The Bhai Ghanhya Sehat Sewa Scheme shall provide coverage for meeting the medical expenses of indoor hospitalization for a period of more than 24 hrs and other treatments of the members up to an expenditure of RS.2.00 lacs per person per year on family floater basis in any of the listed Hospitals.

H Outdoor patient consultation shall be outside the purview of the scheme. However the Trust shall undertake to obtain maximum facilities/discount from listed hospitals for out patient consultations as well.

6.0 THE BHAI GHANHYA TRUST AND MANAGING COMMITTEE

At the State Level Bhai Ghanhya Trust registered under the Societies Registration Act, 1860 shall manage the scheme. It shall collect the premium from the members through its field functionaries which shall be passed on to the insurance company in four equal quarterly installments.

THE BHAI GHANHYA Trust comprises of the following :-

1. Cooperation Minister	Chairman
2. Chief Secretary	Senior Vice Chairman
3. Financial Commissioner (Cooperation)	Vice Chairman
4. Registrar, Cooperative Societies, Punjab	Deputy Chairman
5. Managing Director, The Punjab State Cooperative Bank Ltd.,	Trustee
6. Director, Health Services, Punjab	Trustee
7. Elected Chairman/Director of the Punjab State Cooperative Bank Ltd.	Trustee
8. Elected Chairman/Director of Markfed	Trustee

In case there is no elected Board of Directors of Markfed/PSCB, the RCS shall nominate a member of a rural cooperative society as member of Trust in each case.

6.1 THE ROLE OF THE TRUST

The Trust shall undertake and manage the scheme. It shall be responsible mainly for the following :-

- a) For administering the Bhai Ghanhya Scheme in its right earnest.
- b) For executing the enrollment process through field functionaries of the Department of Cooperation.
- c) To ensure distribution of identity Cards to members of the scheme.
- d) To select Insurance company/Companies by conducting an open tender process.
- e) To seek and accept periodical MIS from TPA, insurance company, listed Hospitals and the Deptt. of Cooperation for taking decisions for efficient working of the scheme.
- f) To accept grants and generate funds for effective implementation of the scheme from members of the scheme, bodies/individual/govt./ govt.bodies/Coop. Institutions and others.
- g) To appoint the consultants and other persons for managing the scheme in an effective manner.
- h) To ensure proper claim management, and settlement systems.
- i) To monitor the progress of the Bhai Ghanhya Scheme and to take steps for its effective implementation.
- j) To undertake all other measures incidental to or associated with the objectives of the scheme and responsibilities mentioned above.

7.0 PREMIUM

The Trust conducted an open and transparent bidding process for selecting an insurance company for providing health insurance cover as per the terms and conditions of the Scheme. The bid of National Insurance Company Ltd. amounting to Rs. 1246/- per main

member emerged as the lowest bid and was, therefore, accepted by the Trust. The structure of the premium is as under:-

PREMIUM TABLE			
Category	Net Premium per person per annum	Service Tax @ 12.36% of the Net Premium	Total Premium per person per annum
Main Member	Rs. 1246	Rs. 154.01	Rs. 1400.01
Additional dependant member under 55 yrs of age (Loading of 10% of premium of Main Member)	Rs.124.6	Rs. 15.40	Rs. 140
Additional dependant member between 55 to 70 yrs in age (Loading of 15% of premium of Main Member)	Rs.186.9	Rs.23.10	Rs.210
Additional dependant member over 70 yrs in age (Loading of 20% of premium of Main Member)	Rs 249.2	Rs 33.89	Rs 283.09

8. THIRD PARTY ADMINISTRATOR (TPA)

The Insurance Company has appointed an IRDA licenced Third Party Administrator (MedSave Health Care Ltd.) after following due procedure as laid down by the Trust .The TPA shall act as a link between the Trust, Bhai Ghanhya Sehat Sewa Scheme members and the health provider (hospitals) for providing administrative/health services to the members of the scheme.

8.1 ROLE OF TPA

TPA shall have a team of Doctors, managers and other supporting staff spread in the State who will be responsible for providing services to members of the Bhai Ghanhya as detailed below :-

- a) Empanelling hospitals across the State & Chandigarh for providing cashless health services to the members subject to the approval of the Trust.
- b) Will maintain a 24 hours toll free help line for convenience of the members for providing information about listed Hospitals, procedures of admission in listed Hospitals and other health care information etc. relating to the scheme and for continuous interaction with the listed Hospitals.
- c) Shall negotiate maximum discount in tariff for indoor services and outdoor
- e) Shall negotiate with the Hospitals to open de-addiction centers In the Hospitals for providing services to members and their families.
- f) To undertake the cost control through medical audit of the provider Hospitals, for quality and cost care, and also by continuous monitoring of the services provided by Hospitals to members.

- g) To provide fortnightly MIS report to the Trust and Insurance Company on the utilization of funds and number of members treated, and also on the pattern of diseases of the members based on research and analysis in order to help the Trust for better services of the members.
- h) To help undertake publicity campaign for popularizing the scheme and to undertake other measures for proper marketing of the scheme.
- i) Shall extend any other help to the Trust required for the benefit of the members and for smooth functioning of the scheme.

9.0 LISTED HOSPITALS AND TREATMENTS.

The Trust shall enlist a net work of Hospitals through Third Party Administrator (TPA) for providing the services to the members. The Hospitals will be enlisted on the basis of facilities available in the Hospitals and the level of human resources. These enlisted Hospitals will be responsible to provide the listed services to the members in a cashless manner to the extent mentioned under the scheme and raise their bills to the TPA for claim from the corpus/Insurance Company. The listed Hospitals will provide the services at rates fixed by the Trust/TPA.

10.0 SELECTION OF HOSPITALS

The TPA will select the Hospitals In consultation with the Trust and execute an agreement with the Hospitals so selected. The Hospitals will be identified and selected for serving the members in every nook and corner of the State and even outside the State. The Hospitals will be selected on the basis of following parameters :-

- a) Should have at least three permanent doctors on its roll.
- b) Should have fully qualified doctor(s) round the clock.
- c) Should have the facility of 24 hours Nursing Staff/Medical Staff.
- d) Should have facility/tie up for Pharmacy and Pathology.
- e) Should have facilities/tie up for high quality pathological tests.
- f) Should have 10 bed indoor treatment capacities, one I.C.U. and one O.T.
- g) All government Hospitals and Hospitals of Punjab Health System Corporation will be automatically included in the list.

10.1 CONDITIONALITIES TO BE IMPOSED ON LISTED HOSPITALS

The listed Hospitals :-

- a) Will establish a Bhai Ghanhya helpdesk at OPD reception for Bhai Ghanhya beneficiaries.
- b) Will offer the GPO services to the members free of cost/discounted rates.
- c) Will offer the diagnostic services at discounted rates to the members.

- d) The maximum payment to be received by the Hospital for each kind of surgical and other treatment will be as fixed by the TPA in consultation with the Trust.
- e) Install necessary infrastructure such as computer, Fax etc. and identify minimum two coordinators to coordinate with patient, treating Doctor, TPA and billing department of the Hospital.
- f) Will provide preferred and priority admission to Bhai Ghanhya beneficiaries and ensure that hospitalization of the member is completely cashless. It shall also arrange for the funds for the medicines/investigations not available with the hospital or have necessary liaisoning with the diagnostic center pharmacies for the facilities not available in the Hospital.

10.2 TREATMENT/DISEASES ADMISSIBLE UNDER THE SCHEME

- 1) It will cover treatment of all medical/surgical diseases requiring minimum 24 hrs hospitalization upto an expenditure of Rs. 2 lac per year per family on floater basis subject to the terms and conditions of the scheme.
- 2) It shall also cover the treatment of the diseases listed below which do not require 24 hrs hospitalization.
 - A) Dialysis
 - B) Chemotherapy
 - C) Radiotherapy
 - D) Eye surgery (except cosmetic surgery/spectacles/ contact lenses & surgery for correction of refractive errors)
 - E) Lithotripsy
 - F) Tonsillectomy
 - G) Coronary Angiography (Coronary Angiography, leading to invasive/noninvasive cardiac treatment requiring hospitalization shall only be covered.)
- 3) Pre-existing diseases and first year exclusions are to be covered. No waiting period will be applicable.
- 4) Domiciliary hospitalization is not covered.
- 5) Pre hospitalization and Post-hospitalization is not covered.
- 6) Abortion/MTP of any type or category is not covered.
- 7) Dental treatment of any type whether requiring hospitalization or not is not covered.
- 8) Treatment of the diseases that are covered under the scheme, irrespective of the fact whether it requires hospitalization or not, shall not be covered if the total cost incurred on the treatment is below Rs 2000/- dialysis, that shall be covered at the rates that are lower than or equivalent to the rates fixed for it, as per Bhai Ghanhya Schedule of rates, under the Scheme.

9) SUBLIMITS APPLICABLE ON TOTAL AMOUNT OF SUMINSURED

S.No.	Disease/Treatment	Sublimit to be applicable
1	Joint Replacement Surgeries	Rs 1,00,000/-
2	Cataract surgery	Rs 6000/-
3	Hysterectomy	Rs 15000/-
4	Hernia	Rs 15000/-
5	Cardiac Surgeries	Rs 1,50,000/- + copayment of 50 % of total expenditure occurring above Rs. 1.5 lac upto the total sum insured of Rs 2.00 lac
6	Medical Management expenditure occurring above	Rs 50,000 + co-payment of 50 % of total Rs. 50,000/- upto the total sum insured of Rs 2.00 lac.
7.	Room Rent	Rent of room of general ward category.
10)	Joint Replacement Surgeries shall be covered only upto the maximum limit of Rs one lac per member, subject to total expenditure of Rs. 2 lac per year per family on floater basis. Any expenses occurring above Rs one lac shall be borne directly by the member.	
11)	Cataract surgery shall be covered only upto the maximum limit of Rs 6000/- per eye per member. Any expenses occurring above Rs 6000/shall be borne directly by the member.	
12)	Hysterectomy shall be covered only upto the maximum limit of Rs 15000/per member. Any expenses occurring above Rs 15000/- shall be borne directly by the member.	
13)	Hernia repair surgery shall be covered only upto the maximum limit of Rs 15000/- per member. Any expenses occurring above Rs 15000/- shall be borne directly by the member.	
14)	Cardiac Surgeries shall be covered only upto the maximum limit of Rs 1.5 lac per member. Member shall directly make copayment of 50 % of total expenditure occurring above Rs. 1.5 lac upto the total sum insured of Rs 2.00 lac, to the Network Hospital. Any expenses incurred above Rs 2 lac shall be completely borne by the member.	

- 15) All medical managements except cancer chemotherapy, shall be covered only upto the maximum limit of Rs 50,000/- per member per hospitalization. Member shall directly make co-payment of 50 % of total expenditure occurring above Rs. 50,000/- upto the total sum insured of Rs 2.00 lac, to the Network Hospital. Any expenses incurred shall be completely borne by the member. However, cancer chemotherapy shall be covered upto the total limit of the suminsured of Rs 2 lac. Medical Management shall not include surgical treatments.
16. Benefeciaries shall be entitled to the room of general ward category at the rates not exceeding the tariff schedule (negotiated rates fixed as Tariff Schedule for the particular hospital) of the respective Network Hospital. The stay at ICU/ SICU/CCU/RICU/NICU/BICU etc., shall be covered at rates that are lower than or equivalent to the rates fixed for it, as per Bhai Ghanhya Schedule of Rates.
17. Maternity is to be covered up to the maximum limit of Rs. 8000/- per pregnancy per year and not exceeding Rs.25,000/- per beneficiary/family on floater basis per year. However, the overall upper ceiling of Rs. 2 lakhs would remain applicable.
18. Treatment in non-network hospitals except in Govt. Hospitals is not covered. Only cashless hospitalization on Network Hospitals and reimbursement/cashless hospitalization in Government Hospitals are to be covered. Treatment at Government hospitals shall be covered at Govt. Hospital rates.

10.3 PAYMENTS TO THE HOSPITALS

TPA shall make the payment to the Hospitals out of the float fund placed at its disposal by the Insurance Company within 30 working days of receipt of complete claim.

This float fund will not be less than Rs. 50.00 lac at a time.

11.0 EXCLUSIONS

- A. Injury or disease directly or indirectly caused by or arising from or attributable to War, Invasion, Act of Foreign Enemy, War like operations (whether war be declared or not).
- B. Circumcision unless necessary for treatment of a disease not excluded hereunder or as may be necessitated due to an accident.
- C. Vaccination or inoculation or change of sex or cosmetic or aesthetic treatment of any description, plastic surgery other than as may be necessitated due to an accident or as a part of any illness.
- D. Cost of spectacles, contact lenses and hearing aids.
- E. Dental Treatment or surgery of any kind.
- F. Convalescence, general debility, run down condition or rest cure, Congenital external disease or defect of anomalies, sterility, venereal disease, diseases directly attributable to alcoholic intake.

- G. Self inflicted injuries, HIV,AIDS.
- H. Charges incurred at Hospital or Nursing Home primarily for diagnostic, Xray or laboratory examinations not leading to indoor treatment.
- I. Expenses on vitamins and tonics unless forming part of treatment for injury or disease as certified by the attending physician.
- J. Injury or disease directly or indirectly caused by or contributed to by nuclear weapons/materials.
- K. Naturopathy Treatment, Ayurvedic and Homeopathic treatment.
- L. Physiotherapy, psychiatric treatment, hospitalization only for giving traction, without any medical management/support. However, hospitalization exclusively for providing traction or for providing psychiatric treatment shall be covered only in Government hospitals

12.0 DISPUTE REDRESSAL MECHANISM

In case of any dispute between the Trust and TPA or Insurance Company, the matter shall be referred to The Financial Commissioner, Cooperation as Arbitrator who shall decide the matter either himself or appoint any other officer to act as an Arbitrator to settle the dispute.

13.0 ULTIMATE BENEFITS OF THE SCHEME

- a) The community of Punjab which cannot afford high cost health care shall be eligible to get high class in patient treatment in state of the art Hospitals.
- b) The scheme, shall cover large number of members of the community and will also provide clients/patients to the listed hospitals which may result in opening of many more quality hospitals in Punjab.
- c) Even the out patients medical consultation by quality medical professionals is very costly, therefore the members of the scheme shall be able to get this consultation on very nominal cost.
- d) The faith of the members in the cooperative societies shall increase leading to better services by the societies in terms of greater concern for community.