



INDIAN MEDICAL ASSOCIATION FAMILY SECURITY SCHEME TELANGANA STATE



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SALIENT FEATURES OF FAMILY SECURITY SCHEME, IMA TS

Introduction

- **Aim of Family Security Scheme is to give financial support to the bereaved family of the member in the scheme in the event of unfortunate death.**
- This is a **Fraternity Contribution (FC)** Scheme, wherein, when a member in the scheme expires, the remaining members in the scheme contributes a fixed amount to the family of deceased members. The scheme is only the liaison between the members.
- The amount collected as FC, is distributed to the nominees of the deceased family as **Death Fraternity Contribution (DFC)**. This is Rs 20 Lakhs, which is disbursed immediately after the required amount is collected. This is unlike the Insurance policies, wherein the money collected as premiums is either invested or circulated for interest and is solely profit oriented.
- FSS is the scheme run by our IMA Telangana State, with all the financial transactions now totally transparent, regularly audited, overseen by State Financial Committee.
- Managed professionally by Managing Committee and FSS Council, represented by FSS members from all three Zones of Telangana.

Latest Features of the Scheme

- **AGE limit** for joining the FSS is now being raised up to **65** completed years, from earlier 55 years, as approved in the FSS Council meeting
- **Period of payment of Fraternity Contribution** by a member has been **fixed to 30 Years**, for new members joining the scheme.
- **All existing members** will be given option of retirement on attaining the age of **80 years**, with their **Fraternity Benefit**.
- **Window period**: There shall be a window period of **one year** for sending the FC bill as well as for payment of DFC in event of death.
- **Disability Benefit**: Members who have become disabled, due to illness or accident and no longer able to continue in profession, will be given option to retire from the scheme. They will be paid onetime settlement. However, if family wishes to continue membership of the member, they can do so.
- **Death Fraternity benefit**: **DFC of Rs 20,00,000/-** will be paid to the nominees of deceased member of the scheme, **within one month** of sending FC bill to the members. The DFC cheques will be delivered at the residence of the nominee/s.
- **Fraternity Contribution**: The **FC contribution** per death is reduced from Rs 800/- to Rs 750/-, from next bill.
- In future also, for every increment of 200 in scheme membership, FC contribution per death can be reduced by Rs 50. Goal is Rs 550 to Rs 600 per death.

Welfare Measures:

- **IMA TS Health Scheme** benefit of Rs 2,00,000/- per member/year, is given as complimentary to all FSS Members. (Member should be regular in his payments of FC)
- **Bi-annual Master Health Check-up** for scheme members above age of 50 years, as complimentary from FSS, is being planned.

Membership Drive:

Keeping in view of all the above features, which have been worked out after prolonged deliberations, taking both young and older members views in to consideration, the scheme management along IMA TS body have come up with an **Membership Drive** for the scheme, launched on 05/02/2020 & will continue till 31st Oct,2020

Admission Fee only for this 100-Day Membership Drive period. (After this period, tariffs will increase by 50 to 100 %.) :-

AGE	ADMISSION FEES
Upto 35 yrs	Rs 5,000/-
36 to 45 yrs	Rs 10,000/-
46 to 50 yrs	Rs 15,000/-
51 to 55 yrs	Rs 20,000/-
56 to 60 yrs	Rs 40,000/-
61 to 65 yrs	Rs 80,000/-

Eligibility:

- Should be a Life member of IMA TS, with age under 65 years.
- Eligible couple members shall join the scheme as individual members.

Procedure of Enrolment:

- a) The prescribed application form can be obtained directly from the FSS Office located in the IMA Building, Esamia Bazar, Koti, Hyderabad or from Hony. Secretary of the concerned Local Branch.
- b) Documents to be submitted along with the application:
 1. Copy of Life Membership Certificate issued by IMA Head Quarters, New Delhi. For newly joined IMA life members, the receipt of payment of LM fee or a certificate from Secretary of local branch, to that effect.
 2. Copy of Proof of Date of Birth: Xerox copy of (SSC/PASSPORT COPY/PAN COPY/AADHAAR CARD).
 3. Proof of payment- DD/Cheque (Subject to realization)
 4. The applicant should send the application form duly filled, signed and fingerprints affixed of the member and the nominees.
 5. Photographs of the member and the nominees should be affixed in the columns provided.
 6. The application should be attested by the Local Branch President/Secretary.
 7. Date of receipt of the application form (completed in all aspects) along with Challan, age Proof Certificate, Life Membership Certificate, in the APPA Family Security Scheme office is considered as the Date of Admission.
 8. A member can name up to three nominees only in his application form. Percentage of distribution among nominees is prerogative of the member.

A common agency for all three schemes of IMA is appointed for this purpose, which will give all the services at your doorstep.

Service Provider – Mr Srinivas Goud. Contact No: 9542852605

Request all the IMA TS members to avail this golden opportunity to join the FSS and secure your health (through complimentary Health Scheme benefit) and the future of your family.

MORE THE NUMBER, HEALTHIER THE SCHEME

Dr.Dilip Bhanushali
Chairman

Dr.C.Surendranath
Hon Secretary

Family Security Scheme, IMA TS



Family Security Scheme Indian Medical Association Telangana State

IMA Building, Esamia Bazar, Hyderabad- 500 027.
Ph : 040-24653385, Email: appafssimatelangana@gmail.com

Affix Your
Recent
Stamp Size
Photograph
Attested by
Local Branch
Secretary

(For Office use only)

FSS No :

Date :

Application Form

(To be Filled in Block Letters)

Name in full

Name of Father/ Husband :

Date of Birth

--	--	--	--	--	--	--	--

Age

--	--

Sex :

M

F

Correspondence Address :

Pin :

Mobile Phone : 1

2

Email :

Permanent Address :

Pin :

Mobile Phone 1

2

Email :

IMA Life Member No. of Applicant :

Local Branch :

I, The undersigned hereby apply for the membership of Family Security Scheme IMA Telangana State, enclosed herewith

Cheque/DD. No:..... for Rs:..... (Rupees.....

.....) dated:..... drawn on (being the Admission Fee of the Scheme as per my age.

MEMBER DECLARATION

I, the undersigned, hereby declare that the above information is true and I have not withheld any information whatsoever regarding my particulars. I agree to pay the Fraternity Contributions as and when the bills are sent, as per the rules and regulations of the scheme.

I, Further agree to abide by all the rules & Bye-laws of Family Security scheme IMA TS and also any amendments made from time to time in the scheme constitution/Bye-laws by MC/FSS Council. I will not proceed legally against FSS without first going to the Arbitration Committee of FSS/IMA TS.

Also, I declare that I'm not suffering from any terminal illness at the time of joining the scheme.

I will promptly inform the FSS office, any change in my address/ change of IMA Branch.

In case, any particulars I mentioned in the application are found incorrect, my membership can be terminated, and the benefits of the scheme need not be paid to the nominees.

Date :

Place :

Certificate of Local Branch

(Signature of Member)

This is to certify that Dr. is a member of Branch of I.M.A.

Date :

Place :

(Signature of President / Secretary
Rubber Stamp of Local Branch)

S.No	Name of the Nominee (and Guardian if the Nominee is Minor)	Date of Birth of the Nominee	Relationship to the Member	Whether sole Beneficiary or Mention % of Benefit to each of Nominees	Specimen Signature of the Nominee Guardian	Thumb Impression of the nominee	Stamp Size Photograph of the Nominee
1.							
2.							
3.							

NOTE :

1. If the nominee is a minor-please affix the photograph and Thumb impression of the minor with the Signature of the Guardian.
2. The nominees should be Major son or Daughter (Minor son /Daughter accepted only when the member has no Major Son/Daughter)
3. Members upto 35 years Age, Parents are accepted as Nominees.

WITNESSES :

1. Local Branch Secretary :

Name & Signature

2. Local Branch President / any FSS Member :

Name & Signature

Enclosures :

(Tick the Appropriate Box)

(Refer to Salient Features Brochure)

1. Cheque or Demand Draft drawn in favour APFA FSS IMA TS Payable at Hyderabad.

2. Proof of life / Annual Membership of I.M.A.

3. Proof of Age

Thumb Impression of
Member

Signature of Member

Date :

Place :