

**FREQUENTLY ASKED QUESTIONS FOR MEDICAL FINANCIAL ASSISTANCE FROM
CHARTERED ACCOUNTANTS' BENEVOLENT FUND FOR TREATMENT OF CORONA DISEASE**

Sl. No.	Questions	Answers
1.	Who can apply Application Form for Medical Assistance for treatment of CORONA Disease from the Chartered Accountants Benevolent Fund (CABF)?	Any active member of the Institute may apply for Medical Assistance for treatment of CORONA Disease from the Chartered Accountants Benevolent Fund (CABF) by filing prescribed Application Form along with the required documents/enclosures. Application Form can be download from the following link: https://resource.cdn.icai.org/60383cabf-covid19-appform.pdf
2.	Whether CABF Life Membership is mandatory for applying Application Form for Medical Assistance for treatment of CORONA Disease from CABF?	NO
3.	What is the meaning of dependent for applying Application Form for Medical Assistance for treatment of CORONA Disease from CABF?	Dependent relatives shall include spouse (non-working), children (Son upto 21 years and unmarried daughter up to 25 years), Father (Above 60 having no income), Mother (Above 60 with no income of husband and for widow no age and income restrictions). Apart from above, no other relations will be considered (i.e. brother, sister, grandfather, grandmother, mother-in-law, father-in-law, grandmother-in-law, grandfather-in-law, uncle etc.)
4.	How Application Form for Financial Assistance will be processed in the case where already partially claimed/reimbursed from the Insurance Company?	Claims where insurance companies have made part payment and rejected the balance, the rejected amount for whatsoever reasons will not be considered. However, financial assistance can be granted if the actual expense exceeds the sum insured.
5.	Which documents/enclosures required along with the Application Form for Medical Financial Assistance for treatment of CORONA Disease from CABF?	Apart from the Application Form duly filled in all columns, signed and recommended by the authorised person as mentioned in page No. 3 of the said Application, [Recommendation by the Authorised Person can be taken through mail] the following documents/enclosures are required : (a) Original Test Report and Medical Bills. (b) In the case of dependent, Aadhar for age proof and PAN, if any, along with declaration that the dependent has no source of income and is totally dependent for his/her livelihood on the Applicant/Member. (c) In the case where any amount has been received from the Insurance Company, claim settlement note, in original, where the expenditures are incurred more than the sum insured/policy amount. (d) Last two years ITRs of the Applicant/Member. (e) Aadhar and PAN of the Applicant. (f) Cancelled Cheque of the Applicant/Member.

<p>6.</p>	<p>General Clarifications:</p>	<ol style="list-style-type: none"> 1. Per Family of the Member maximum assistance is 1.5 lakhs (Limited to actual expenses or 1.5 lakh whichever is lower). 2. Hospitalisation is must for applying for Medical Assistance for treatment of CORONA Disease from the Chartered Accountants Benevolent Fund. Proof of admission and discharged medical paper is required. 3. Net taxable income less than 10 lacs of the Member. 4. Separate Application Form (in the case of dependent for each) for Medical Assistance for treatment of CORONA Disease from the CABF is required to be submitted in the case of multiple requests of dependent. 5. For any other and further query, Applicant/Member may contact at 0120-4045997-98 between 2.30 P.M. and 5.00 P.M. on working days. 6. An advance copy of the Application Form along with all documents/enclosures (scanned copies) may be mailed at covidassistance@icai.in for doing the needful at end of Office, however, hard copy of all the documents are required, for processing the same for consideration to the Appropriate Authority. 7. In exceptional cases, assistance shall also be given to Member/Dependent of Member where discharge from hospital is pending. Amount shall be paid as an advance on basis of CORONA positive Report and estimate of the Hospital and all the original bills along with other compliance on the part of the member shall be submitted within 15 days from discharge from the hospital. <p>The Hard copy of the Application along with all enclosures/documents as required, be sent to the address mentioned at the top of Application Form i.e. The Member Secretary, CABF, M&C-MSS Directorate, The ICAI, ICAI Bhawan, Plot No. A-29, Sector-62, NOIDA – 201 309.</p>
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