

# SERVICES GUIDE

INTERNATIONAL MISSIONARY BENEFIT SOCIETY



2025 issue  
english language



# MESSAGE FROM THE PRESIDENT



**" A need, a vision, a challenge ! "**

Dears friends,

For 60 years, just like the health insurance fund in France, the IMS has been part of a drive to establish genuine international social protection.

The IMS's approach is **missionary, supportive and open!**

## **SOLIDARITY-SHARING-COMMON FUND**

The post-synodal news invites us to 'be on the road together', companions on the journey, as a community of Christ's disciples 'guided and united by the Holy Spirit as they journey together' and united by the Holy Spirit".

**"It is a challenge to the growing isolation of people and to cultural individualism... This challenge reminds us to care for each other, to interdependence and to co-responsibility for the common good."** Synod Report No. 48

The IMS aims to strengthen this climate of fraternity, collaboration and co-responsibility. In a word: collegiality.

This implies listening to each other's realities in the diversity of local situations and sharing responsibility, in order to live out concrete and financial solidarity and to share through a common fund between all the Sections and transparent management.

## **ACCOMPANIMENT-PROXIMITY-LISTENING**

We also need to move towards offering the IMS to more Groups, so that - in conjunction with our partner MSH - we can offer them healthcare services that are increasingly based on solidarity.

Being as close as possible to the Groups, providing them with better support in their real-life situations, their difficulties with delicate financial situations or precarious modes of communication, weakened healthcare systems and access to care... this requires listening, meeting people, passing on information to make the right decisions.

Let's work together at all levels to inform members within the Groups. Let's strengthen exchanges between Groups and Sections. Let's develop reporting between the Sections, the Executive Committee, the Bureau and Head Office, at each other's service. Let's share our realities to better take into account the needs and expectations on the ground. Let's adapt our decisions to make them ever more collegial.

## **DEVELOPMENT**

Development is a very important area of effort that we need to put into practice. Let's raise awareness of the EMI, its objectives and its actions. Indeed, enabling those involved in the Church and the churches - because the IMS has been ecumenical since its inception - to take better care of the health of their members and enabling each member to be concerned about his or her own health remain priorities for the IMSI.

Offering a dynamic of care, of taking charge and of the necessary prevention, this is the heart of the mission and development of the EMI in the service of the greatest number.

**In conclusion**, let us make our own the reminders from the Synod of October 2024 : **"The themes of the Church's social doctrine, the commitment to peace and justice, care for the common home, intercultural and inter-religious dialogue must also be more widely disseminated among the people of God, so that the action of missionary disciples contributes to building a more just and fraternal world. Commitment to the defence of life and human rights, to the just organisation of society, to the dignity of work, to a just economy based on solidarity, to an integral ecology, is part of the evangelising mission that the Church is called to live and embody in history."** n°151

On the eve of the IMS's 60th anniversary, here are some objectives to pursue in the field of healthcare. These are real projects that we need to work on together as a collegial body ! Let's dare to be bold !

Best wishes, happy anniversary and long life to the IMS !

In fraternal communion of prayer,

Sister Elisabeth Auliac,  
President of the IMS

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# 1. PRESENTATION OF THE ASSOCIATION

An international and participatory associative life

## Our specific features

### Values of solidarity

Assistance adapted according to needs and place

The same contributions regardless of the beneficiaries' age

No set age limit or medical check-ups required

### An international dimension

5 Options to meet local and international needs

8 Sections in Europe, Africa and Latin America

Missionaries in Asia can be attached to one of the Sections according to choice

### A service for the Church

Promoting the conditions for the mission of those working in the service of the Church worldwide within the framework of the local Churches and of Institutes

## Our expertise at the service of healthcare solidarity

The International Missionary Benefit Society (IMS) is an association under Swiss law, founded on 30 June 1965 with the approval of the Vatican.

A mutual assistance association, its purpose is to help the Superiors and Bishops take care of the members of diocesan clergy, members of religious communities and members of associations of the faithful when they fall ill and have no healthcare system.

However, membership of the IMS does not exempt the religious communities from their canonical obligations\* with respect to their members.

The operation of the IMS is designed according to mutualist principles and Christian values.

\* Canons 231 § 2, 281 § 2, 619 et 1274 § 2

## Our mutual assistance mission

The IMS is an association of sharing and solidarity between religious Institutes and local Churches in the healthcare field and covering the costs of this care.

In the event of illness, it undertakes to provide social economic assistance to missionaries, members of diocesan clergy, members of religious communities of the Christian religion and members of associations of the faithful.

It seeks to provide the best cover for people (IMS Articles of Association, Article 4).

It studies assistance solutions to cover healthcare costs in parts of the world where financial means are limited and the available healthcare is insufficiently developed.

## Collective subscription

The religious Institutes, Dioceses and Associations enrol their members collectively.

As of 1 January 2023, the IMS has approximately 26.500 members worldwide and 700 Groups in 141 countries.

## The Ordinary General Assembly

The Ordinary General Assembly meets every three years.

It is composed of the delegates of the Sections and member Groups of the Association.

Its role is to :

- deliberate on the accounts
- amend the Articles of Association
- elect the Steering Committee members
- reflect on the issues and vote on the orientations
- elect the members of the Audit Committee

## The Steering Committee

The Steering Committee is made up of 15 members from the different areas in which the IMS is present. They are proposed by the founding member and the associated members (Religious institutes and Episcopal conferences).

- The Steering Committee meets at least once a year.
- It is responsible for the general operation of the Association, reflects on the issues and proposes the directions to follow.
- It represents it and commits it in all judicial and extrajudicial documents.



The President, Sister Elisabeth Auliac surrounded by members of the IMS Steering Committee IMS and staff - Paris, November 2024

## The players of the IMS

Since 2022, the IMS has entrusted management of memberships and mutual assistance to MSH International, whose head office is located in Paris. This allows IMS members to have access to the MSH care network and limits them having to advance fees.

The roles are clearly defined in order to fulfil the association's mission :

- The strategic directions are taken by the General Assembly and the Steering Committee.
- The operational decisions are made by the Steering Committee and its Board (5 members) is responsible for implementing them.
- The Central Office organises the life of the institution, coordination of the Sections and follow-up of MSH International.
- The IMS Sections deal with development, new membership requests, and health protection as well as processing exceptional assistance requests.
- MSH International manages the call for contributions, processing of healthcare costs and the payment of assistance as well as the banking transactions under the supervision of the Steering Committee
- The Group managers pay the contributions and send the files requesting mutual assistance for the members of their Group.

Details of the missions of the Sections, Groups and MSH are given in the following pages.

### To learn more about the IMS

Download the **IMS institutional brochure** in the *Documentary resources / Documents and forms* of our website <https://www.entraide-missionnaire.com/en/documentary-resources/documents-forms/>



## 2. THE PLAYERS OF THE IMS

### The Sections

The Sections have an institutional mission serving the IMS Groups and work on developing and promoting the IMS in their region.

They are the contact points for the IMS Groups (see p.8) in the following fields :

- institutional relations
- providing details about and checking the membership rules
- organisation of health protection programmes
- management of the local social fund

Since 2022, the Sections no longer have an everyday management role. Collection of the contributions and payment of assistance have been entrusted to MSH.



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EIGHT  
SEC-  
TIONS  
worldwide

26 500  
MEMBRES

in over  
141  
COUN-  
TRIES

## 2. THE PLAYERS OF THE IMS

### The Groups

The International Missionary Benefit Society is open to any institute, diocese, association of faithful and other Christian religious communities "... protecting the health of their members".

It offers the possibility for superiors and bishops to fulfil their canonical obligation.

### Subscription procedures

Subscription to the IMS is firstly via a community that joins the community (congregation, province, diocese, autonomous house, etc.) thus constituting an IMS Group.

In conjunction with the Section and in a spirit of solidarity, the IMS seeks people's best protection according to the standard of living and the cost of healthcare in each country.

That is why the IMS offers several contribution Options, each providing an appropriate level of assistance.

It is recommended communities select a manager who has a computer with an internet connection. For Groups without IT equipment, see the special arrangements with their Section.

The Section will remain available to help and assist Groups in their requests and procedures : subscription, institutional issues, organisation of health protection programmes, applications for financial aid from the Social Fund.

The IMS Sections are available to assist religious communities in considering their needs and the procedures.

- The Canonical authority\* (or Church Leader for non-Catholics) contacts the IMS informing it of its intention to join. It can join a local IMS Section or the Central Office..
- The Community must designate a Group manager who will be the intermediary between the beneficiary members and the IMS. Their name is indicated on the Group subscription form.
- The Section manager must complete the subscription form (available on the IMS website) and send it to the dedicated MSH team.
- On receipt of this subscription form, the dedicated MSH team :
  - creates the Group,
  - informs the Section,
  - sends the extranet login to the Manager of the new Group.
- In order to finalise enrolment and to benefit from the rights, the Canonical Authority\* receives the call for contributions for the members of his Group. He pays their contributions to MSH.

\* Superior General for an Institute, Bishop for a Diocese, Provincial for a Province, Moderator/manager for an Association of the faithful

### Some additional information about subscription

- The Groups are free to choose their Section of reference in the light of certain conditions, such as the language of correspondence or the currency of payment...
- Subscription or cancellation takes place per six-month period (1<sup>st</sup> January and 1<sup>st</sup> July)

### Role of the Groups

The Group manager is responsible for the follow-up of the list of beneficiaries and Options chosen, as well as the payment of contributions to the IMS.

The originals (invoices, receipts, etc.) must be kept for 2 years and sent to the IMS if requested.

Random checks are carried out every week.

The assistance paid depends on the country of mission and the Option chosen.

In the event of a significant non-reimbursed amount, the Group manager may make a request of additional assistance to the Social Fund.

Groups have a dedicated online space which enables them to:

- make membership requests for the Mutual Assistance cover offered or download an Excel file for large Groups to be sent back by email (emi@msh-intl.com)
- enter information about the IMS member and beneficiaries online
- enter the membership start date online
- enter the cancellation online
- make a request to transfer a member to another Option
- change the mission country
- send and enter a request to MSH (invoices, complaints, requests for cover) via the online space or by letter.
- view the account statements of reimbursements and download them
- view the IMS/MSH medical network
- create IMS membership cards and certificates

For all requests regarding management, MSH is the contact for Groups.

### The regional meetings of Group Managers

Organised by the Sections, these meetings are a privileged forums for greater proximity and better service to the members.

Each Group in the region is invited to attend to learn about changes to the IMS.

These meetings are also an opportunity to :

- recall the missions of the Group manager,
- share experience as regards management of the members,
- raise possible issues encountered and find solutions in line with each context.



## 2. THE PLAYERS OF THE IMS

### MSH INTERNATIONAL

a network, a team and tools serving the IMS

#### A dedicated network

In 2022, the IMS has chosen MSH International so that all its members have access to an international healthcare network.

MSH international is a partner of the IMS. It acts on the Steering Committee's instructions. The contributions and payment of assistance have been set according to the rules of the IMS.

This international group benefits from strong financial strength and has deployed a medical network for its customers worldwide for 45 years.

The MSH network comprises more than 105,000 healthcare professionals carefully selected in 175 countries around the world. Care is needed however as not all charge affordable rates.

That is why the IMS has asked MSH to deploy a dedicated network in healthcare establishments known to IMS members and in which the **prices are aligned with the assistance provided by the IMS.**

Thanks to your IMS card and direct payment, the advance of medical costs is very limited.

#### Contacting MSH

The MSH service is available **7 days a week, 24h/24** in **40 languages**.

- A **management team** is dedicated to processing IMS assistance requests : [emi@msh-intl.com](mailto:emi@msh-intl.com)
- Members also have access to the advice of a medical team composed of 21 doctors :
  - **Requests for medical cover** must be sent to [precert@msh-intl.com](mailto:precert@msh-intl.com).
  - In a **vital emergency**, a doctor can be contacted by email on [medical@msh-intl.com](mailto:medical@msh-intl.com)

#### MSH tools

MSH makes a software tool available to give **greater autonomy to Group managers.**

- You can download a certificate certifying membership and a membership card at any time which will enable them to go to a hospital of the network to benefit from simplified cover.
- By connecting to the online space, the manager can make reimbursement requests by scanning and attaching the invoices, filling out a request for cover and viewing reimbursements online.

Obtain the **MSH Practical Guide**  
for contract managers in your MSH online space,  
in the Practical Guides Section

<https://www.entraide-missionnaire.com/en/extranet-en/>



#### Always connected to you

The MSH team is in permanent contact with the Central Office and the international Sections. It is responsible for following up all requests.

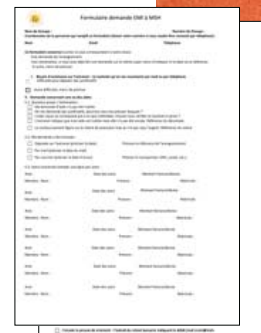
To simplify the payment of assistance, take care to send all the supporting documents and report any change of bank account details.

**If a request is not met**, Group managers are asked to use the IMS application form for MSH that can be downloaded from the IMS website, which is used to give accurate information to speed up processing.

Processing of requests can be tracked on the extranet. Do not send the same documents twice as this creates processing delays.

The **IMS Claim Form for IMS Groups at MSH** can be found in the *Documentary resources / Documents and forms* tab of our website

<https://www.entraide-missionnaire.com/wp-content/uploads/2022/07/formulaire-EMI-a-MSH-EN.pdf>



# 3. THE SERVICES OF THE IMS

## Levels of cover

### INTERNATIONAL ASSISTANCE

#### Option 1 BASIC LEVEL

Taking care of medical care all over the world

#### Medical evacuation

100 % coverage of medical evacuation then payment by the Group of its share (IMS share : 80 % within the limit of 5 economy class seats)

#### Option 2 STRENGTHENED LEVEL

Consideration of care worldwide and delivery of optimized aids

#### Option 3 STANDBY POSITION

Waiting position for members with a basic plan in their country of mission but who have to travel to a country of Option 1 (travel, holidays) for them to be covered.

The member is therefore registered in Option 3A (waiting position) as long as he is in his country of mission (therefore, without assistance from the IMS). It is during his stay in the option 1 country that he switches to Option 3B after regularization of the share corresponding to Option 1, which gives him the right to benefit from Solidarity Health on site (based on Option 1 except medical evacuation). The regularization of this quota must be carried out by the Group Manager for the entire semester.

### LOCAL ASSISTANCE

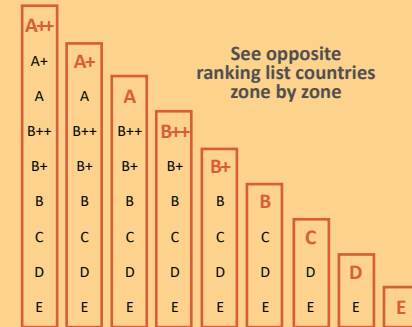
#### Option 4 GENERAL LEVEL

Assistance concerning care in the countries of residence of members. This Option is only available in countries defined by IMS. The countries are classified in zones (A++ to E): see list opposite.

The transfer from Option 4 to Option 1 is subject to conditions with the Heads of Sections (missions of a minimum duration of one year + engagement letter to be provided).

The choice of country of contribution for community members may be different from the country of residence. Thus, a community may decide to affiliate its members in a country in a zone greater than that of the country of residence (situations linked to regular trips or treatment to a particular country).

A member registered in one country is also covered in the countries of the lower zone(s).



Example 1 : a sister registered in Ivory Coast (zone B) can receive care in her zone and in all countries of the lower zones. It is therefore covered in countries in zones B, C, D and E (but not in areas A++, A+, A, B++ and B+).

Example 2 : a brother residing in Ivory Coast (B) who has opted for the contribution of zone A (after having selected for example Bolivia) will be able to receive care in all countries of zones A, B++, B+, B, C, D and E (but not in areas A++ and A+).

#### Option 5 HOSPITALIZATION ONLY

Coverage of expenses related to medical hospitalization and surgical as well as those related to consultation and pharmacy during hospitalizations.

This Option is available in Option 4 countries (zones A++, A+, A, B++, B+, B, C, D and E) defined by the IMS. Treatments are possible regardless of the 9 zones.

## 5 options according to the countries

### OPTION 1, 2 AND 3 MANDATORY IN THESE MISSION COUNTRIES

Members registered in an option 1 or option 2 country are covered in all countries of the world.

Armenia	Israel	Qatar
Australia	Japan	Russia
Azerbaijan	Jordan	Saudi Arabia
Bahrain	Kazakhstan	Seychelles
Belize	Korea	Singapore
Brunei	Kuwait	South Africa
Canada	Lebanon	Swaziland
China	Macau	Taiwan
Comoros	Maldives	Tajikistan
Emirates United Arabs	Mauritius	Turkey
Europe*	Mongolia	Turkmenistan
Georgia	News-Zeeland	United States
Hong Kong	Oman	Uzbekistan

\* except Albanie, Kosovo et Malte in Option 4

### OPTION 4 AND 5

#### ZONE A++ Mexico

#### ZONE A+

Argentina  
Brazil  
Chile  
Ecuador  
Guatemala  
Honduras  
Salvador  
Uruguay

#### ZONE A

Anguilla  
Antigua and Barbuda  
Bolivia  
Colombia  
Costa Rica  
Cuba  
Jamaica  
Malta  
Morocco  
Nicaragua  
Panama  
Paraguay  
Peru  
Porto Rico  
Rep. Dominican  
Suriname  
Syria  
Thailand  
Trinidad and Tobago  
Tunisia  
Venezuela

#### ZONE B++ Philippines

#### ZONE B+

Kenya

#### ZONE B

Afghanistan  
Albania  
Algeria  
Bangladesh  
Bhutan  
Cambodia  
Djibouti  
Dominica  
Egypt  
Ghana  
Green cap  
Guinea Bissao  
Indonesia  
Iran  
Iraq  
Ivory Coast  
Kosovo  
Laos  
Liberia  
Libya  
Malaysia  
Mauritania  
Micronesia  
Myanmar  
Paraguay  
Peru  
News Guinea  
North Korea  
Pakistan  
Palestine  
Papua  
Rep. from Guinea  
Senegal  
Sierra Leone  
Sri Lanka  
Western Sahara  
Yemen

#### ZONE C

Angola  
Benign  
Botswana  
Burkina Faso  
Eritrea  
Ethiopia  
Gambia  
Lesotho  
Malawi  
Mali  
Mozambique  
Namibia  
Niger  
Nigeria  
Somalia  
South Sudan  
Sudan  
Tanzania  
Togo  
Uganda  
Vietnam  
Zambia  
Zimbabwe

#### ZONE D

Burundi  
Cameroon  
Central Africa Rep.  
Chad  
Congo  
Democratic Rep. of Congo  
Equatorial Guinea  
Gabon  
Rwanda

#### ZONE E

Haiti  
India  
Madagascar

### 3. THE SERVICES OF THE IMS

#### Documents to attach to any request for assistance

- The documents are needed for efficient and fast processing of assistance requests (invoices, prescription, receipts, etc.).
- The IMS treatment form (downloadable from the IMS website, see page 25) is a valid supporting document when the healthcare professional is unable to provide an invoice. The professional must indicate on it the procedure or purpose, cost, currency, date, name and stamp and sign it. In other cases, the IMS care sheet is not useful.
- Files must be sent within 2 years from the date of care. No refunds are possible after 2 years. Supporting documents (invoices. etc.) must be collected and forwarded by the Group Manager.

SEE THE PRESENTATION OF THE STAND-BY OPTION 3A AND 3B PAGE 12

#### IMS Assistance 2025

Assistance is presented as a % of the actual cost. The amounts may change depending on exchange rates.

#### Hospitalisation

In hospitals of the IMS network : payment of the professional by the MSH/IMS. The Groups pays the difference if the invoice exceeds the stated cover.

All hospital costs and medical fees relating to hospitalisation of one or more consecutive days, scheduled or emergency.

Hospitalisation at home may be covered after prior agreement of MSH/IMS.

Hospital costs for maternity are covered.

The requests for assistance must state the purposes and dates of hospitalisation (see pages 18 and 19)

Direct payment for hospitalisation is applied in the IMS/MSH network (approved establishments) see page 18

Surgical Stay (set amount/day) maximum per day of hospitalisation →

INTERNATIONAL OPTIONS				WAITING POSITION	LOCAL OPTIONS			
1	2	3	4	5				

1461,82 CHF	1 538,76 €	1 792,18 CHF	1 886,51 €	410,22 CHF*	431,81 €*	260,14 CHF	273,83 €
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Medicine Stay (set amount/day) maximum per day of hospitalisation →

737,05 CHF	775,84 €	884,45 CHF	931,00 €	250,14 CHF*	263,30 €*	150,08 CHF	157,98 €
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Daily set amount →

-	100 %	-	-
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Supplement for single room (hospitalisation) limited to the 1<sup>st</sup> forty days →

-	47,50 CHF	50,00 €	-	-
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\* KENYA : the hospital set amount of Option 4 is capped at € 350 for surgery and € 200 for medicine.

#### Pharmacy

Medicines and products prescribed by a doctor.

Non-prescribed pharmacy and parapharmacy are not covered.

Pharmacy for a long-term condition : an initial prescription can be used several times even over a long period. In this case, the doctor states that the patient is suffering from a long-term condition. Each time, a copy of the initial prescription is attached with the invoices.

Prescribed pharmacy, including bandages and compresses →

63 %	100 %	63 %	-
------	-------	------	---

#### Consultations and visits [upper limit per procedure]

Consultations of general practitioners or specialists - excluding dentists and psychiatrists - in a doctor's surgery, at home or in a hospital (excluding a period of hospitalisation)

Consultation - general medicine →

12,82 CHF	13,49 €	21,37 CHF	22,49 €	12,82 CHF	13,49 €	-
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Consultation - specialist →

16,02 CHF	16,86 €	30,40 CHF	32,00 €	16,02 CHF	16,86 €	-
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Consultation - psychiatrist →

24,03 CHF	25,29 €	32,30 CHF	34,00 €	24,03 CHF	25,29 €	-
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Medical visit →

16,02 CHF	16,86 €	30,40 CHF	32,00 €	16,02 CHF	16,86 €	-
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#### Laboratory and radiology

Medical laboratory procedures : analyses, blood tests and other medical examinations →

60 %	100 %	60 %	-
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### 3. THE SERVICES OF THE IMS

#### IMS Assistance 2025

Assistance is presented as a % of the actual cost. The amounts may change depending on exchange rates.

**Medical imaging procedures** : radiology, scans, MRIs, ultrasounds, mammograms prescribed by a doctor for a diagnostic purpose or for medical monitoring

				INTERNATIONAL OPTIONS		WAITING POSITION	LOCAL OPTIONS			
				1	2	3	4	5		
				60 %	100 %		60 %	-		
<b>Convalescence</b>										
Medically-prescribed convalescence following a hospitalisation	Upper limit per day + healthcare cover during the stay in approved establishments, up to a maximum 30 days/year	→	22,01 CHF	23,17 €	31,35 CHF	33 €		22,01 CHF	23,17 €	-
<b>Rehabilitation stay</b>										
Following a hospital stay for an acute medical or surgical complaint	Day set amount capped at 30 days renewable then opinion of IMS medical adviser after 60 days	→	380 CHF	400 €	380 CHF	400 €		380 CHF	400 €	-
<b>Other healthcare costs</b>										
Medical auxiliaries, medical or specialist procedures, orthopaedics, psychomotricity/ergotherapy Ambulance transport (chemotherapy, dialysis, transfer from one hospital to another for examination)		→		70 %		100 %			70 %	-
<b>Spa treatment</b>										
Requires : a medical prescription + prior agreement Limited to one treatment per year	Annual ceiling	→	224,22 CHF	236,02 €	319,20CHF	336 €		224,22 CHF	236,02 €	-
<b>Dental</b>										
Care by a dentist and all procedures carried out in connection with these consultations, including orthodontics Teeth whitening, implants, temporary teeth and dental veneers are not covered.	Dental care	annual ceiling	assistance of 60% capped at : 950 CHF		assistance of 100% capped at : 1 330 CHF			assistance of 60% capped at : 475 CHF		-
	Dental prosthesis : crown Other dental prosthesis : bridge	annual ceiling →	assistance of 60% capped at : 1 900 CHF		assistance of 100% capped at : 2 660 CHF			assistance of 60% capped at : 950 CHF		-
	Orthodontics	annual ceiling →	-	-	aide de 100% plafonnée à : 2 660 CHF			-		-
<b>Optics</b>										
Prescribed lenses, eye glasses frame or contact lenses with visual correction	Frame	Limited to 1 frame every 2 years →	47,50 CHF	50 €	118,75 CHF	125 €		33,25 CHF	35 €	-
Eye testing and surgery	Lens (par lens)	Limited to 1 pair of lenses or contact lenses every 2 years →	47,50 CHF	50 €	99,75 CHF	105 €		33,25 CHF	35 €	-
Not covered : sun protection or other glasses without visual correction	Contact lenses [dioptre>8] (per lens)	→	47,50 CHF	50 €	61,75 CHF	65 €		33,25 CHF	35 €	-
<b>Auditory</b>										
Expenses of devices and external hearing prostheses	Hearing aid (per aid)	limited to 2/year →	380 CHF	400 €	522,50 CHF	550 €		380 CHF	400 €	-
	Hearing aid maintenance [batteries]	annual ceiling →	36,60 CHF	38,53 €	36,60 CHF	38,53 €		36,60 CHF	38,53 €	-
	Hearing aid repair	→		70 %		100 %			70 %	-
<b>Orthopaedics</b>										
Devices for treatment of bone, muscle, tendon conditions		→		70 %		100 %			70 %	-
<b>Acupuncture</b>										
Energy stimulation procedures, performed by healthcare professionals		→		50 %		100 %			50 %	-
<b>MSH medical evacuation</b>										
Conditions of this cover for emergency evacuation : • available to beneficiary members of Option 1 or Option 2 • life-threatening condition • treatment unavailable in the mission country • care available in another country (a regional destination as a priority) • immediate hospitalisation required		→		80 % limited to 5 seats		100 % limited to 5 seats			-	-
If one or more of the above conditions is not met, an evacuation is also possible : the costs are then borne by the Group.										

### 3. THE SERVICES OF THE IMS

#### Care network

The members of the Association are free to choose the health professionals consulted. However, a healthcare network that limits the amount of costs needing to be advanced is available.

- Within the specific IMS network which consists of a few hundred establishments in all the countries, members do not advance the costs. The list of establishments changes regularly and is available on the IMS website.
- The partnership with MSH International also provides access to thousands of establishments in their network. In the hospitals of this MSH network, the amount of IMS assistance can be deducted from the invoice; the Group only has to pay the non-reimbursed amount. A list of these establishments is available on the IMS Group Managers extranet.
- For other establishments, IMS members advance the full amount and the Group Manager then sends their request for assistance to the administrative centre..



#### Membership card

Groups can download and print the membership card for each of their IMS affiliates at any time from the extranet.

This card is recognised by the IMS/MSH care network providers.

#### Planned hospitalisation

For planned hospitalisation, Group managers can request cover to avoid having to advance the costs.

	COSTS	ADMISSION	DISCHARGE
In the specific IMS network	No advance of costs	The Group requests cover from MSH.	MSH/IMS pays the IMS assistance to the healthcare professional except for a very limited overrun that the Group pays to the establishment.
In the MSH network			2 invoices* : • MSH pays the IMS assistance to the healthcare professional • The Group pays the remainder to the professional
Outside IMS/MSH network	Advance of costs		The Group pays the cost. Then presents the invoice to MSH which pays the corresponding assistance.

\* Should the establishment be unable to draw up 2 invoices, the Group pays the cost and then submits the invoice to the IMS, which pays the corresponding assistance.

#### Unplanned hospitalisation

	COSTS	ADMISSION	DISCHARGE
Emergency	No advance of costs	The hospital contacts MSH to obtain cover.	MSH/IMS pays the healthcare professional. Then MSH asks the Group to pay its participation.
Vital emergency	No advance of costs	Cover in IMS/MSH network care centres	On presentation of the membership card
	Advance of costs	If the care centre is not part of the IMS/MSH network	All costs to be paid by the member or the Group

For a request for cover :  
email [precert@msh-intl.com](mailto:precert@msh-intl.com)  
phone 33 (0)1 44 20 98 55

#### Medical evacuation

The MSH International Medical Service manages medical evacuations for IMS members who have chosen international options 1 or 2.

This service includes :

- advice and support for the patient
- contact and consultation with the hospital or treating doctor on site
- medical evacuation in the event of a serious condition requiring immediate hospitalisation
- urgent and unforeseen medical care

See conditions on page 16.

For any request, please contact the Medical Service :  
email [medical@msh-intl.com](mailto:medical@msh-intl.com)  
phone 33 (0)1 44 20 98 55

## 3. THE SERVICES OF THE IMS

### 2025 contributions

The assistance paid depends on the country of attachment and the Option chosen (see pages pages 12 et 13).

**Each Group (the actual member) pays an annual contribution, regardless of the Option it has chosen for its members.**

GROUP CONTRIBUTION - PER YEAR						
CURRENCIES	CHF	€	MGA	CFA	KES	\$
Per year and per Group	27,06	28,46	139 938,67	18 676,88	4 210,66	30,88

**The person with canonical responsibility then chooses the individual options that will be applied to each individual member.**

SOLIDARITY CONTRIBUTIONS PER MEMBER - PER YEAR							
BY OPTION AND ADMINISTRATIVE CURRENCY	CHF	€	MGA	CFA	KES	\$	
ASSISTANCE INTERNATIONAL <b>1</b>	1 173,36	1 234,03	6 067 753,93	809 831,04	182 574,48	1 338,92	
ENHANCED INTERNATIONAL ASSISTANCE <b>2</b>	1 851,08	1 946,80	9 572 484,08	1 277 588,85	288 029,36	2 112,28	
WAITING POSITION	<b>3A</b>	280,48	294,98	1 450 425,51	193 580,63	43 642,29	320,05
	<b>3B</b>	1 122,29	1 180,32	5 803 668,85	774 585,00	174 628,34	1 280,65
LOCAL ASSISTANCE	<b>4 A++</b>	702,19	738,50	3 631 228,62	484 640,89	109 261,13	801,27
	<b>4 A+</b>	616,52	648,40	3 188 202,25	425 512,50	95 930,78	703,51
	<b>4 A</b>	495,73	521,36	2 563 542,76	342 142,50	77 135,21	565,68
	<b>4 B++</b>	299,63	315,13	1 549 479,08	206 800,78	46 622,74	341,91
	<b>4 B+</b>	292,00	307,10	1 510 019,91	201 534,38	45 435,45	333,20
	<b>4 B</b>	239,70	252,10	1 239 563,59	165 438,00	37 297,60	273,52
	<b>4 C</b>	198,09	208,34	1 024 392,40	136 720,24	30 823,25	226,04
	<b>4 D</b>	151,69	159,54	784 455,59	104 697,14	23 603,72	173,10
	<b>4 E</b>	70,74	74,40	365 827,03	48 825,00	11 007,48	80,72
LOCAL HOSPITAL ASSISTANCE	<b>5</b>	45,96	48,34	237 689,23	31 723,13	7 151,90	52,45

### Special conditions

#### Age limit

There is no age limit. However, from the age of 65, the duration of participation to the cost of hospitalisation may not exceed 6 months for the same complaint.

#### Waiting period

Reminder : a community which enrolls a Group to the IMS makes a 3-year commitment.

#### 6-month waiting period :

- for the re-subscription of a member which has previously left for no particular reason or the return of a Group to the IMS
- for the subscription of a member of a community which already belongs to the IMS (if their non-enrolment is not justified)

#### No waiting period :

- for the collective subscription of a religious Institute, Diocese or an association of the faithful
- for subscription of a new member

#### Children

Contributions are reduced for children of lay associates who are part of an IMS-member community, while they are dependent on their parents :

- Option 2 : 60 % of the adult contribution per child
- Other Options : 50 % of the adult contribution per child
- Age limit of affiliation of children : 25 years  
Over 25 years: Adult affiliation
- Free as of the 3rd child
- For children who will be 17 on 1 January of the year in question, a certificate of school attendance will be requested for re-affiliation for that year.

#### Retired EMI members of CAVIMAC returning to France

IMS assistance available in addition to CAVIMAC reimbursements (contact the IMS).

#### Local Option IMS members visiting France

Transfer to Option 1

## 4. EXCEPTIONAL ASSISTANCE

### The Social Fund

The **IMS Social Fund** helps Groups finance **substantial non-reimbursed amounts** and **to pay part of their contributions**.

Each Section contributes 0.5 % of its contributions to the Social Fund.

### Substantial remainders to be paid

The IMS Social Fund may be asked to **partially supplement partially reimbursed major care**.

Some examples :

- hospitalisation or significant dental, hearing or optical care
- medical evacuations
- serious and onerous medical cases

**The Groups must first contact their Section's Social Fund committee.**

The form is available on the IMS website (invoice and breakdown to be attached).

#### NOTE !

Since **1<sup>st</sup> January 2022** (following the establishment of the healthcare network), members are **requested to go to the approved hospitals of their area**. This will allow them to benefit from direct payment of the assistance provided for in their option.

**If a Group chooses a non-approved establishment although the care could be provided in an approved centre, the Social Fund's contribution will be reduced.**



### Help with contributions

**If a Group is experiencing a temporary financial difficulty**, it may seek exceptional assistance from the Social Fund, which may decide to **reduce contributions for a semester**.

- A form is available on the IMS website. It must be completed and returned to the Section of attachment.
- Requests are reviewed by the Contribution Reductions Commission, composed of members of the Steering Committee and technical advisers.

In the event of a favourable decision, instructions will be sent to MSH which will apply the contribution reduction.

Form 4  
Reduction of contributions  
for help with payment  
of contributions

Form 7  
Social Fund application  
for substantial non-reimbursed amounts

#### In practice

Once the Group Manager has received payment of the corresponding IMS participation for the medical procedures and to the membership Option, they can create a file in support of their request and then forward it to their Section.

First of all, the Section's Social Fund Committee Section must be asked: this is level 1.

Then, depending on the non-reimbursed amount, it is possible to ask the committee of the International Social Fund of the IMS : this is level 2.

After review, the supplement paid is up to a maximum amount of 50% of the non-reimbursed amount payable by the Groups as regards level 1 and then the same too for level 2.

The details of the file to be constituted are available on the IMS website : <https://www.entraide-missionnaire.com/en/contributions-and-assistance/social-fund/>

**You too, through your Group Manager, please do not hesitate to submit requests when you have particular needs. The Social Fund committees will study your requests carefully.**



These two forms for requests for exceptional assistance are available on our website, in the *Documentary resources* tab : <https://www.entraide-missionnaire.com/en/documentary-resources/>

## 5. THE BENEFICIARY'S QUICK GUIDE

The IMS beneficiary member	
<b>Membership of the IMS Group</b>	As a member of the Association, they depend on a religious community (IMS Group) having joined the IMS.
<b>IMS contact</b>	The Group Manager is their contact for any IMS matter.
<b>Registration number</b>	They have a unique registration number which is indicated on their membership card. To be communicated to the healthcare professional if they belong to the IMS network to benefit from direct payment.
<b>Membership card Certificate of membership</b>	To request from the Group Manager

Procedures covered by the IMS	
<b>Procedures covered</b>	The table of IMS assistance according to type of care (consultation, dental care, hospitalisation, etc.) is available : - in the Services Guide - on the website  Most recognised therapeutic procedures and techniques qualify for assistance.
<b>Some exclusions</b>	The following are not covered : - traditional medicine - preventive care - paramedical care
<b>Medical evacuation</b>	Options 1 and 2 (known as "international") include this cover. To use it, contact your Group Manager In an emergency, your entourage can contact MSH directly (see contacts below).

Payment or otherwise of invoices	
<b>Hospitalisations in the IMS network</b>	- Presentation of the membership card - And ask for cover via your Group Manager No advance of costs
<b>Hospital admissions outside the IMS network</b>	- Payment of the invoice following the stay - Despatch of the invoice to your Group Manager
<b>Life-threatening emergencies</b>	Ask the hospital to inform MSH which will settle the invoice If the member is unable to do so: request by someone of the entourage
<b>Outpatient care</b>	Presentation of the membership card in a dispensary of the IMS network Outside the IMS network : costs need to be advanced

Supporting documents	
<b>Guarantee of receiving IMS assistance</b>	For the assistance to be paid: send invoices and other documents (prescription, treatment form, etc.) to the Group Manager as quickly as possible
<b>Treatment form</b>	If the healthcare professional is unable to issue an invoice, they indicate: procedure or purpose, cost, currency, date, name with a stamp and their signature.
<b>Despatch of documents</b>	Send to the Group Manager : - either by scan - or by phone (acceptable photo quality) - or by post Note: keep originals 2 years (by the member or by the Group Manager)

Consultation places	
<b>Addresses of approved hospitals (IMS network)</b>	- Request from the Group Manager - Available on the website No advance of costs in these hospitals
<b>Free choice of the practitioner</b>	They are free to consult any healthcare professional. Conséquences : - higher rates (outside network) - advance of costs

Site Internet	
<b>Informations Services Guide</b>	<a href="https://www.entraide-missionnaire.com/en/">https://www.entraide-missionnaire.com/en/</a>

Contacts		
Any IMS subject	<b>Assistance levels Network hospitals Cover before hospitalisation Despatch of invoices, etc.</b>	Group Manager
	<b>Cover at the hospital</b>	If the Group Manager cannot be informed : mail : <a href="mailto:precert@msh-intl.com">precert@msh-intl.com</a> tél. : +33 01 44 20 98 55
	<b>Medical Evacuation</b>	mail : <a href="mailto:medical@msh-intl.com">medical@msh-intl.com</a> tél. : +33 01 44 20 98 55

### The medical care form

If the healthcare professional (doctor, pharmacist or other practitioners) cannot provide you with proof of payment, they must fill out the treatment form. The healthcare professional must enter the procedure or purpose, cost, currency, date and name. They stamp and sign it.

In the absence of proof of payment or a duly completed treatment form, payment of the assistance cannot be processed.

<https://www.entraide-missionnaire.com/en/documentary-resources/documents-forms/>

### Declaration of honour

Please note that the supporting documents - receipted invoices and prescriptions - are the first documents required. The certificate must be attached to the request for assistance if a receipt is missing OR if an expense needs to be specified OR if the IMS or the manager requests additional information.

The certificate is available on the IMS website :  
[https://www.entraide-missionnaire.com/wp-content/uploads/2023/05/EMI\\_FORM-8.pdf](https://www.entraide-missionnaire.com/wp-content/uploads/2023/05/EMI_FORM-8.pdf)

## 6. TOOLS AND DOCUMENTS TO GUIDE YOU

### The IMS website

with varied content and enriched by the Sections

<https://www.entraide-missionnaire.com>

- **Présentation of the IMS**
- **Details on contributions and assistance**
- **News**
- **Documentary resources**
  - **Official documents (brochure, services guide) and forms (forms for beneficiary members, member Groups and religious communities wishing to join the association)**
  - **Health and Prevention fact sheets**
  - **Text on the Church, health and solidarity**
  - **Prayers**
- **FAQ : frequently asked question**
- **Link to the Group Managers' extranet**

All IMS news, with filters by Section

Access to a wide range of documentation

**Institutional documents** : these are the official documents of the IMS to better understand the operation of the association : Articles Rules, IMS presentation documents, Institutional brochure

**Management documents** : Contributions reduction request, Social Fund application, Treatment form, Membership application by a new Group, Specific membership application (recipient : Central Office)

### The IMS/MSH extranet

A dedicated space for the Groups and Sections

<https://www.entraide-missionnaire.com/extranet>

The online space allows Group managers to :

- **manage members (affiliation, transfer, cancellation)**
- **download**
  - membership cards and membership certifications
  - the Services Guide, the Practical Guide
  - members' statements of accounts
- **make requests for assistance**
- **view the IMS/MSH network healthcare establishments**
- **view the prevention fact sheets**

#### Want to stay informed ?

Subscribe to our newsletter :  
<http://www.entraide-missionnaire.com/>

#### Would you like your testimonial to be published on the site ?

Write to us at:  
[emi@entraide-missionnaire.com](mailto:emi@entraide-missionnaire.com)

## 7. CONTACTS

### Central Office

#### postal address

3 rue Duguay-Trouin  
75280 Paris cédex 06 - France

#### phone

33 (0)1 42 22 91 29

#### email

[emi@entraide-missionnaire.com](mailto:emi@entraide-missionnaire.com)  
[s.sacheli@unionsaintmartin.fr](mailto:s.sacheli@unionsaintmartin.fr)

- Follow-up of operations
- Follow-up of complaints
- Social Fund at the International Level

### Sections

see the contact details of the Sections on pages 6 and 7

- Membership a new Group
- Meetings between Groups
- Social Fund Level 1
- Dealing with payment problems of contributions
- Organisation of health protection actions
- Follow-up of complaints about assistance

### MSH International

#### postal address

23 allée de l'Europe  
92587 Clichy Cedex - France

#### email

[emi@msh-intl.com](mailto:emi@msh-intl.com)

#### phone

**The MSH teams are available 24/7 on 33 (0)1 44 20 98 55\*.**

#### medical assistance

[precert@msh-intl.com](mailto:precert@msh-intl.com)

#### medical emergencies

[medical@msh-intl.com](mailto:medical@msh-intl.com)

- Management of members, contributions and assistance
- All banking transactions go through MSH, including social fund payments
- Hospital cover, direct épayment and emergency medical evacuation
- Care network

#### \*Call-Back

You can ask MSH to call you back : write to [emi@emi-intl.com](mailto:emi@emi-intl.com) and give a telephone number and the reason for the request.

If the request is for urgent treatment, you can ask MSH to call you back within 2 hours : write to [emi@emi-intl.com](mailto:emi@emi-intl.com), mention 'URGENT' in the subject line and give a telephone number with details of the request (member number, hospital, date, etc.).

### Registered office

#### Adresse postale

c/o Me Martine Zufferey  
Bld des Philosophes 28  
CH-1205 GENEVE - SUISSE



[WWW.ENTRAIDE-MISSIONNAIRE.COM](http://WWW.ENTRAIDE-MISSIONNAIRE.COM)

The International Missionary Benefit Society is a member of the Union Saint-Martin.

**UNION SAINT-MARTIN**



## Services Guide 2025

**Drafting :** Communication Service

**Design & production :** Isabelle Delahaye, communications department of the Union Saint-Martin

**Photo Credits :** International Missionary Benefit Society / Adobe Stock - All Rights Reserved

**Edition :** International Missionary Benefit Society - December 2024

Non-contract document