

मानव संसाधन प्रभाग, प्रधान कार्यालय, प्लाट सं 4, सेक्टर 10, द्वारका, नयी दिल्ली

HUMAN RESOURCES DIVISION HEAD OFFICE, PLOT No. 4, SECTOR 10, DWARKA, NEW DELHI

TO ALL BRANCHES/OFFICES.

04.10.2022

HUMAN RESOURCES MANAGEMENT DIVISION CIRCULAR NO. 654/2022

REG: INDIAN BANK'S ASSOCIATION (IBA) GROUP MEDICAL INSURANCE SCHEME FOR RETIRED OFFICERS/ WORKMEN EMPLOYEES – RENEWAL OF POLICY FOR THE PERIOD 01.11.2022 TO 31.10.2023

The present IBA's Group Medical Insurance Policy for retired employees will expire on 31.10.2022 and to ensure continuous medical coverage under the policy, premium for renewal of the policy for the period 01.11.2022 to 31.10.2023 i.e. 2022-23, is to be remitted in the month of October, 2022.

We are in receipt of communication from IBA vide their letter No. HR & IR/MBR/MEDINS/11501 dated 13.09.2022, informing that National Insurance Company Limited (NICL) is chosen as the Lead Insurer for arranging the Medical Insurance Policy for the policy period 2022-23.

We have received the Premium quotes from NICL for IBA's Group Medical Insurance Policy for Retirees, for the policy period 2022-23 as under:

A. BASE POLICY – WITHOUT DOMICILIARY

Base Sum Insured Rs.	Offi	icer	Workmen			
	Family Floater Premium Rs.	Single Policy Premium Rs.	Family Floater Premium Rs.	Single Policy Premium Rs.		
1,00,000	15308	10333	15308	10333		
2,00,000	27557	18600	27557	18600		
3,00,000	41334	27901	41334	27901		
4,00,000	57808	39020				

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B. BASE POLICY - WITH DOMICILIARY

Base Sum Insured Rs.	Officer		Workmen		
	Family Floater Premium Rs.	Single Policy Premium Rs.	Family Floater Premium Rs.	Single Policy Premium Rs.	
1,00,000	25520	17226	25520	17226	
2,00,000	51047	34457	51047	34457	
3,00,000	77920	52596	77920	52596	
4,00,000	97776	65999			

C. SUPER TOP UP

Top Up Sum Insured Rs.	Officer		Workmen		
	Family Floater Premium Rs.	Single Policy Premium Rs.	Family Floater Premium Rs.	Single Policy Premium Rs.	
1,00,000	3730	2518	3730	2518	
2,00,000	6291	4246	6291	4246	
3,00,000	9639	6507	9639	6507	
4,00,000	12475	8420	12475	8420	
5,00,000	15180	10246			

The salient features of Policy (Base & Super Top up):

- 1. Workmen Staff can opt for Sum Insured of Rs 1 lakh, 2 lakh & 3 lakh but cannot opt for Rs 4 lakh Sum Insured in Base Policy (Without Domiciliary & With Domiciliary)
- 2. Officers can opt for any Sum Insured from Rs 1 lakh, 2 lakh, 3 lakh & 4 lakhs in Base Policy (Without Domiciliary & With Domiciliary)
- 3. Top up Policy is available to Officer Cadre Retirees only who opt for Rs 4 Lacks Sum Insured in Retirees Base Policy (Without Domiciliary & With Domiciliary). Top up option is not available for the Officer Cadre Retirees who opt for base policy sum insured of Rs 1 lakh, 2 lakh & 3 lakh. Further, top up options available to Officer Cadre Retirees are Rs 1 lakh, 2 lakh, 3 lakh, 4 lakh & 5 lakhs.
- 4. Top Up Policy is available to Award Staff Cadre Retirees only who opt for Rs 3 lacs Sum Insured in Retirees Base Policy (Without Domiciliary & With Domiciliary). Top up option is not available for the Award Staff Cadre Retirees who opt for base policy

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sum insured of Rs 1 lakh & 2 lakh. Further, top up options available to Award Staff Cadre Retirees are Rs 1 lakh, 2 lakh, 3 lakh & 4 lakhs.

- 5. Domiciliary treatment will remain @ 10% of Sum Insured in "With Domiciliary Policy", even for those who opted Single Person Policy.
- 6. Domiciliary expenses are not covered under Super Topup Policy, as per terms of policy.
- 7. Single Policy are separate, rates given for Single Person i.e. either of the below mentioned cases:
 - a. Retiree without Spouse (unmarried, separated, divorced & widowed)
 - b. Surviving Spouse (Family Pensioner)

If employee and spouse both are alive, family floater premium has to be compulsorily paid.

- 8. Room rent limits as per the policy 2022-23 will be as under:
 - a. For Sum Insured Rs 1 lacs and 2 lacs: Room Rent per day shall be payable upto 1.5% of Sum Insured and ICU charges per day shall be payable upto 2% of Sum Insured.
 - b. For Sum Insured Rs 3 lacs and 4 lacs: Room Rent per day shall be payable upto Rs 5000/- and ICU charges upto Rs 7500/-.
- 9. Retirees who are not covered under previous policy period 2020-21 or 2021-22, can be covered under policy period 2022-23.
- 10. Retirees can opt without/ with domiciliary option in Retirees policy 2022-23 irrespective of option they have chosen in last year policy 2021-22.
- 11. Retiree who are not covered under Super Top up policy 2021-22, can avail Super Top up policy for 2022-23.

Options for Submitting Consent

1. Retired/ retiring employee/ family pensioner can submit the filled Consent Form (Annexure I) to their pension paying branch for entering and uploading in HRMS. Officials at Branch/ Offices should enter the details and upload the forms received as per HRMS navigation given below.

Manager Self Service→ Welfare Schemes→ Consent for Medical Insurance.

2. Retired employees can also fill Consent in HRMS through PNB Parivar login via pnbnet.net.in at the navigation given below.

Retiree Self Service → **Consent for Medical Insurance.**

All the retirees willing for above coverage have to submit their Consent Form exercising their option carefully latest by **25.10.2022 (Tuesday)** as the HRMS window will be closed

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after 5.00PM on 25.10.2022. The bank will be in position to provide medical cover only to the retirees whose consent is submitted by the branch/office within the above time frame.

The amount of premium will be debited from the respective accounts of the retirees on 27.10.2022 and will be remitted to National Insurance Company on 29.10.2022.

Retirees have to provide their account number (preferably pension a/c) by ensuring that the account is in operative status and unfreeze for debit transaction with sufficient balance to cover the premium amount.

Branch Heads of all branches/offices are also advised to take appropriate steps to bring the content of this Circular to the knowledge of the retirees, drawing pension from their branches, so that willing retirees may become members of the above Insurance Scheme.

In case of any query, branches/offices/retirees may contact over Telephone No. 011-28044776 and mail at hrdhospitalisation@pnb.co.in. For further convenience of retirees, we are providing contact details of two officials.

Ms Nisha Lilar – Sr Manager (M-9599490900) Shri Vipin Prajapati - Officer (M-7897420567)

(SURESH KUMAR RANA)
GENERAL MANAGER

CONSENT FORM –IBA GROUP MEDICAL INSURANCE

THE DY. GENERAL MANAGER
HUMAN RESOURCE MANAGEMENT DIVISION,
PUNJAB NATIONAL BANK,
HEAD OFFICE,
NEW DELHI 110075

REG: IBA GROUP MEDICAL INSURANCE SCHEME FOR RETIRED EMPLOYEES/SPOUSE OF RETIRED EMPLOYEES.

PE NO	N IBA S GROUP MEDICA	AL INSURAIN	EMPLOYE			AS UNDER:-		
DOB			CADRE/DESIGNATION					
БОВ	ALIVE	$\overline{}$						
STATUS OF EMPLOYE		-	GENDER	011 051	2011			
	DECEASED		SEPERATION	ON REAS	SON			
RETIREMENT DATE								
SPOUSE NAME			ALIVE (SP	OUSE)			YES/NO	
DOB (SPOUSE)	OB (SPOUSE)		GENDER					
WANTS DOMICILIARY COVERAGE			YES		NO			
COVERAGE FOR*	FAMILY FLOATER					SINGLE		
*SINGLE RATE ARE APPLICABLE FOR RETIRE	E WITHOUT SPOUSE AND SURVIVIN	NG SPOUSE (FAN	IILY PENSIONER)					
SUM INSURED* (BASE POLICY)	100000)		300000			
	200000				400000			
WHETHER WANTS SUPER TOP-U	P		YES	٦	'	NO		
	100000				300000			$\overline{}$
SUPER TOP UP	200000	- $=$	<u>,</u>)		400000			一一
3012.1101 01	500000		<u>) </u>					
MOBILE NO.)					
WOBILE NO.								
CORRESPONDENCE ADDRESS								
						PIN		
E-MAIL ID						I		
I AGREE AS UNDER:								
1. <u>I IRRECOVERABLY AUTHO</u>	RIZE THE BANK TO DEB	<u>BIT PREMIU</u>	M AMOUN	IT FRO	M MY BELOW	/ MENTION	<u>ED ACCOUNT</u>	FOR THE
CURRENT POLICY PERIOD	AND IN COMING YEARS.	<u>.</u>						
A/C NO.								
2. I shall maintain sufficient bala								
3. In case I intend to withdraw f		form the Bar	nk before its	due dat	e for not dedu	cting Premiu	m from my acc	ount. Once
I opt out of the scheme I will The insurance cover shall sta	-	ng the insura	ınce premiui	m by the	e Insurance Co	mpany.		
5. I shall inform the Bank in case								
6. The Bank is acting as interm	, , ,						crutinized/ set	tled by the
Insurance Company on the b	asis of claim documents ar	nd the Bank v	will not be in	ivolved	in this process.			
							Yours Fai	ithfully
								,
Date;								
Place:							Signature	2
		Acknowle						
Received consent form to join the				o	, Dt	Sh/	Smt	PF
No The informa	tion received shall be er	ntered in HI	KMS.					
					C· ·	(D 1	000.11	ıl. Cı
					Signati	are of Bank	c Official wi	tn Stamp

Bo/Co.....