



Aryavart Bank

Head Office, A-2 /46, Vijay Khand, Gomti Nagar, Lucknow.

(AN UNDERTAKING OF GOVT OF INDIA, U.P. GOVT. & BANK OF INDIA)

Circular to all Branches/Offices	
Ref. No. HO/HR & I.L./KKS	Circular No. 02/194
	Date:- 07-01-2021

Sub: - Group Medical Insurance Scheme for the Retirees and Spouse of the Retirees of the Bank

In terms of the guidelines issued by Government of India, Ministry of Finance, Department of Financial Services, New Delhi, for introduction of Medical Insurance Scheme in line with 10th Bi-Partite Settlement for workman staff for the Existing/Retired staff of the Bank, the said scheme is proposed to be implemented for existing staff from 01.02.2021.

The medical insurance scheme will also be extended to the bank's retired personnel provided the premium for joining the scheme is borne by the respective retired personnel themselves.

For the purpose of implementing the scheme for retired personnel, we are issuing this circular with all the required details.

The Premium payable and Insurance coverage under the Scheme have been detailed below and The New India Assurance Company Limited has been selected for the implementation of the Scheme.

Cadre at the time of Retirement	Sum Insured	Premium Amount	Premium Amount with GST*
Officer	RS 4,00,000	RS.9439	RS.11138
Clerical/Sub-staff	RS 3,00,000	RS.8209	RS.9687

* 1% additional tax will be payable under section 194 (O) of Income Tax Act, subjected to clarification.

As per the above premium rates, please note that following coverages are not Included.

1. Maternity Benefit
2. Separate cover for Critical Illness for 1 Lakh
3. Corporate Buffer
4. Domiciliary Treatment

The Insurance cover and conditions available in the Group Medical Insurance Scheme are provided in Annexure -I for easy reference for the retired personnel.

In order to join the Scheme, retired personnel are notified to refer Annexure-II, provide consent, fill the form and deposit the same to any Regional Office or Head Office.

The last date of submission of the Form as per Annexure-II is 22.01.2021



The salient features of the scheme are as follows:

In view of the health risk due to old age, the Group Medical Insurance Scheme is beneficial for the retired people.

The option to join medical insurance scheme will be available only once.

After the commencement of the policy, if one chooses to opt out of the scheme, then he will not be able to join the scheme again.

At the time of renewal of the scheme, if an insured is not involved in the renewal of the scheme, then the insured won't get a chance to join.

Eligibility: -

1. All Retired Personnel of the Bank drawing/eligible for pension who have submitted their pension form to Bank/EPFO.
2. Widow / widower of deceased retired personnel drawing/eligible for pension who have submitted their pension form to Bank/EPFO.
3. Widow / widower of personnel on death during service drawing/eligible for pension who have submitted their pension form to Bank/EPFO.
4. Personnel retired due to VRS drawing/eligible for pension who have submitted their pension form to Bank/EPFO.

Family Definition: -Self (Retiree) + Spouse or Widow / widower of the Retired Employee.

Process: -

Eligible persons willing to participate in the scheme should share their option / consent form to any Regional Office or Head Office. Please be sure to submit by the due date. Regional Office will forward the same to Head Office through e-mail 'PensionCell.HeadOffice@aryavartbank-rrb.com' under CC to 'Ho.Personnel@aryavartbank-rrb.com'.

This is also to clarify that in spite of giving the consent to join the scheme, in absence of adequate funds in the account by the specified date. If premium is not deducted and remitted to Insurance Company, the Insurance coverage for the said retiree shall not come into force. Therefore, it is desired that account of retiree is duly funded for deduction of the premium amount, so that they are not deprived of joining the scheme.

All branches, regional offices and personnel organizations of the bank and the associations are requested to provide all the required information and create awareness among all retired personnel in their respective areas.

Customer Excellence Department, Head Office is advised to communicate each and every retirees about the said scheme collect & compile the duly filled in Annexure - II by 22.01.2021.

It is hereby advised to sensitize the contents of the circular so that the scheme may be implemented successfully.




(Satyendra Kumar)
General Manager

Policy Terms & Condition- GMC-Retiree - Bank

Coverage	
Details	
Policy Type:	Group Medical Insurance Policy only for Retired Employees of the Bank
Family Definition:	Self (Retiree) + Spouse or Widow / widower of the Retired Employee
Coverage Type:	Family Floater
Sum Insured for Hospitalization:	For Retired Officers – INR 4,00,000/- For Retired Clerks / Sub-Staff – INR 3,00,000/-
Geographical Limit	Treatment taken in India only. No Zone capping to be applied.

Key Policy Terms & Conditions	
Pre-existing Diseases	Coverage from day 1
30 days Waiting Period	Waived Off
Waiting Periods on Specific Diseases	Waived Off
Hospital Room Rent:	Room and Boarding expenses as provided by the Hospital/Nursing Home not exceeding INR 5000 per day or the actual amount whichever is less.
ICU Rent:	Intensive Care Unit (ICU) expenses not exceeding INR 7500 per day or actual amount whichever is less.
Professional Charges:	Surgeon, team of surgeons, Assistant surgeon, Anesthetist, Medical Practitioner, Consultants, Specialists Fees covered up to Sum Insured
All other expenses	No Limits for all other expenses including Nursing Charges, Service Charges, IV Administration Charges, Nebulization Charges, RMO charges, Anesthetic, Blood, Oxygen, Operation Theatre Charges, surgical appliances, OT consumables, Medicines & Drugs, Dialysis, Chemotherapy, Radiotherapy, Cost of Artificial Limbs, cost of prosthetic devices implanted during surgical procedure like pacemaker, Defibrillator Ventilator, orthopedic implants, Cochlear Implant, any other implant, Intra-Ocular Lenses,, infra cardiac valve replacements, vascular stents, any other valve replacement, laboratory/diagnostic tests, X-ray CT Scan, MRI, any other scan, copies and such similar expenses that are medically necessary, or incurred during hospitalization as per the advice of the attending doctor.



Policy Terms & Condition- GMC-Retiree - Bank

Key Policy Terms &	
Conditions	
Cost of Donor:	Hospitalization expenses (excluding cost of organ) incurred on donor in respect of organ transplant to the insured.
Ambulance Charges:	Ambulance charges are payable up to INR 2500/- per trip to hospital and / or transfer to another hospital or transfer from hospital to home if medically advised. Taxi and Auto expenses in actual maximum up to INR 750/- per Hospitalization. Ambulance charges actually incurred on transfer from one center to another center due to Non availability of medical services/ medical complication shall be payable in full.
Pre and Post Hospitalization Expenses:	Expenses related to the ailment for hospitalization will be covered 30 days prior to hospitalization and 90 days after discharge.
Alternative Treatment	Alternative Treatments are forms of treatment other than treatment "Allopathy" or "modern medicine and includes Ayurveda, Unani, Siddha, Homeopathy and Naturopathy in the Indian Context, for Hospitalization only in a hospital registered by the Central / State authorities
Day Care Treatment:	A) Expenses on Hospitalization for minimum period of a day are admissible. However, this time limit is not applied to specific treatments. This condition will also not apply in case of stay in hospital of less than a day provided – A) The treatment is undertaken under General or Local Anaesthesia in a hospital / day care Centre in less than a day because of technological advancement and Which would have otherwise required hospitalization of more than a day.
Congenital Anomalies:	Expenses for Treatment of Congenital Internal / External diseases, defects anomalies are covered under the policy
Psychiatric Ailment:	Expenses for treatment of psychiatric and psychosomatic diseases payable in IPD.
All Advanced Medical Treatment:	All new kinds of approved advanced medical procedures for e.g. laser surgery, stem cell therapy for treatment of a disease is payable on hospitalization /day care surgery.
Taxes and Other charges:	All Taxes, Surcharges, Service Charges, Registration charges, Admission Charges, Nursing, and Administration charges to be payable. Charges for diapers and sanitary pads are payable if necessary, as part of the treatment. Charges for Hiring a nurse / attendant during hospitalization will be payable only in case of recommendation from the treating doctor in case ICU / CCU, or any other case where the patient is critical and requiring special care.



Policy Terms & Condition- GMC-Retiree - Bank

Key Policy Terms & Conditions	
Genetic Disorder:	Treatment for Genetic disorder covered
Other Medical Treatment:	Treatment for Age related Macular Degeneration (ARMD), treatment such as Rotational Field Quantum magnetic Resonance (RFQMR), Enhanced External Counter Pulsation (EECP), etc. are covered under the scheme. Treatment for all neurological/ macular degenerative disorders
External and Durable Equipment:	Rental Charges for External and or durable Medical equipment of any kind used for diagnosis and or treatment including CPAP, CAPD, Bi-PAP, Infusion pump etc. will be covered under the scheme. However, purchase of the above equipment to be subsequently used at home in exceptional cases on medical advice shall be covered.
Ambulatory devices:	Walker, crutches, Belts, Collars, Caps, Splints, Slings, Braces, Stockings, elastocrepe bandages, external orthopedic pads, sub cutaneous insulin pump, Diabetic foot wear, Glucometer (including Glucose Test Strips)/ Nebulizer/ prosthetic devise/ Thermometer, alpha / water bed and similar related items etc., will be covered
Physiotherapy Charges:	Physiotherapy charges shall be covered for the period specified by the Medical Practitioner.
Cost of artificial limb	Covered

Clauses	Other
Claim Intimation	In case of emergency hospitalization within 7 days from the time of Hospitalization/Domiciliary Hospitalization
Claim Document Submission	Within 30 days from the date of discharge from the hospital. In case of post-hospitalization, treatment (limited to 90 days), all claim documents should be submitted within 30 days after completion of such treatment.
Remarks	Waiver of the intimation & Document submission Conditions may be considered in extreme cases of hardship where it is proved to the satisfaction of the Bank that under the circumstances in which the insured was placed it was not possible for him or any other person to give such notice or deliberate or file claim within the prescribed time-limit.



**Policy
Exclusions**

1	Injury / 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).
2	A) Circumcision unless necessary for treatment of a disease not excluded hereunder or as may be necessitated due to an accident. B) Vaccination or inoculation. C) Change of life or cosmetic or aesthetic treatment of any description is not covered. D) Plastic surgery other than as may be necessitated due to an accident or as part of any illness.
3	Cost of spectacles and contact lenses, hearing aids. Other than Intra-Ocular Lenses and Cochlear Implant.
4	Dental treatment or surgery of any kind which are done in a dental clinic and those that are cosmetic in nature.
5	Convalescence, rest cure, Obesity treatment and its complications including morbid obesity, treatment relating disorders, Venereal disease, intentional self-injury and use of intoxication drugs / alcohol.
6	All expenses arising out of any condition directly or indirectly caused to or associated with Human T-Cell Lymphotropic Virus Type III (HTLB - III) or lymphadenopathy Associated Virus (LAV) or the Mutants Derivative or Variation Deficiency Syndrome or any syndrome or condition of a similar kind commonly referred to as AIDS.
7	Charges incurred at Hospital or Nursing Home primarily for diagnosis x-ray or Laboratory examinations
8	Expenses on vitamins and tonics unless forming part of treatment for injury or diseases as certified by the attending physician.
9	Injury or Disease directly or indirectly caused by or contributed to by nuclear weapon / materials.
10	All non-medical expenses including convenience items for personal comfort such as charges for telephone, television, /barber or beauty services, diet charges, baby food, cosmetics, tissue paper, diapers, sanitary pads, toiletry items and similar incidental expenses, unless and otherwise they are necessitated during the course of treatment.
11	Attempted suicide, critical illness before the commencement of the policy, war, invasion, nuclear radiation.
12	OPD Treatment



Annexure-II

Date/...../2021

To,
**The General Manager/
Regional Manager,**
Aryavart Bank,
Regional Office-.....
District-.....

Dear Sir,

Re: Group Medical Insurance Scheme for the Retirees and Spouse of the Retirees of the Bank.

I refer to Head Office circular no. 02/194 dated 07.01.2021 on the captioned subject.

Tick

1.	<input type="checkbox"/>	Yes, I am willing to join Group Medical Insurance Scheme.
2.	<input type="checkbox"/>	No, I am not willing to join Group Medical Insurance Scheme.

If Yes:-

Details of Self (Officer/ Clerical/Sub-staff)													
Name													
Date of Birth			d	d	m	m	y	y	y	y	Age	Years	
Gender			Male				Female						
Employee Code Number/PF No:													
Designation at the time of Retirement <small>*(Tick before the option)</small>			Officer		If Yes than mention Scale at the time of Retirement								
			Office Assistant (Multipurpose) / Clerical/Sub-staff										
			Office Attendant (Multipurpose)/ Clerical/Sub-staff										
Retired from Regional Office													
Details of Spouse (Dependent)													
Name													
Date of Birth			d	d	m	m	y	y	y	y	Age	Years	Gender
Address for Correspondence <small>(Policy related Document will be sent on the given address)</small>													
			District			State							
Pin Code													
Mobile No.													
Email ID													
Account number (must be of Aryavart Bank for deduction of Premium & Reimbursement of claim)													
			Branch-										
IFS Code													

- Note:** In absence of adequate funds in the account, if premium is not deducted and remitted to insurance Company, the insurance coverage for the said retiree shall stand discontinued. Therefore, it is desired that account of retiree is duly funded for deduction of the premium amount.



Declaration-

- I.....(name of staff/ spouse) S/O, D/O or W/O hereby declare that I have read & understood content of the circular no 02/194 dated 07.01.2021 and accordingly submit the details my dependent spouse as above.
- I declare that the above information is true, to the best of my knowledge & belief and no material information has been concealed.
- I understand that the submission of false information to the Bank by me for gaining any monetary benefits and may be liable for appropriate action against me.
- I undertake that I will immediately inform to the bank in case of any change in the status of dependents as detailed above.
- I also undertake that for payment of premium, I irrevocably authorize the Bank to debit premium amount from my account number-

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during current year and also in subsequent renewals in coming years.
- In case, if my intention is not to renew the policy, I will inform in writing at least one month in advance of the renewal date. I am aware that once I exit the scheme, I will not be allowed to rejoin it later.

Declare and undertaken by:

Signature

Name:
EC No/PF No:
Retired from Region:
Designation at the time of retirement:

(Certificate by the reporting authority)

- I hereby certify that the above informationsubmitted by Mr/Ms..... (Retired staff.....name) EC No / PF No..... or by spouse.....of the referred deceased /retired staff (Name.....) are true to the best of my knowledge and belief.
- The account provided above belongs to him/her and signature have been checked and verified from Records.

Signature and Seal
Regional Manager/Incharge,(CED, Head Office) ,
Region-.....

