FEDERATION OF SBI PENSIONERS' ASSOCIATIONS

(Regn.No.5/17025 of 1986 Under Societies Act 1860(Delhi)

ADMINISTRATIVE OFFICE, BENGALURU

65, SBI LHO Buildings, St.Mark's Road, Bengaluru - 560001 Email: fsbipa@gmail.com

N.Radhakrishnan

G.D.Nadaf President **General Secretary** (M) 9848525214 (M) 9448124777

Date: 09-09-2025

Ref No. FSBIPA/ 4 /2025

The Dy. Managing Director (HR) & Corporate Development Officer, State Bank of India, Corporate Centre, Madame Cama Road, MUMBAI 400021

Dear Sir,

SBI HEALTH CARE (POLICY-A)

"The State Bank of India Retired Employees Medical Benefit Scheme" i.e., SBIREMBS (the Scheme I) was implemented in the Bank with effect from 1st July 1996 and the membership was closed on 30th June 2003. Subsequently, a new scheme called "The State Bank of India Retired Employees Medical Benefit Scheme (the Scheme II) was launched from the 1st July 2003.

- 02. The Bank's Executive Committee of Central Board in its meeting held on the 16th December 2015 had approved two tailer-made Family Floater Group Health Insurance Policies (Policy-A & Policy-B) towards medical benefits of retired employees. Thus, the SBI Health Care (Policy-A) came into the then existing SBIREMBS. Further, the Bank had decided to re-introduce the REMB Scheme and offer new plans to the eligible retirees, i.e., those who retired on or after 01.01.2016, and all those members of reintroduced REMBS, approved/ratified by the Trustees, were included in the Policy-A from the date of ratification
- The insurance cover under Policy-A, as mentioned above was introduced with the 03. following terms and conditions:
 - a. Insurance cover will be obtained only for the members whose residual balance is Rs.3.00 lakhs and above.
 - b. Medical Claims of members having balance below Rs.3.00 lakhs will be paid by the Trust and they will be out of the insurance scheme.

- c. If the claim exceeds the total sum insured allocated under the Policy, the balance amount of claim up to the residual limit will be processed by REMB Trust.
- 04. The objective of the Scheme is to provide financial assistance for meeting, partly or fully, within specific monetary limits for hospitalisation / post hospitalisation expenses for treatment of specified diseases/ailments and domiciliary expenses for any disease (presently restricted to 63 diseases) to such retired employees and their spouses as well as differently child/children who fulfil the eligibility criteria for membership of Scheme.
- 05. The Bank decided to recast the existing scheme with the following objectives, in view of rising premium coupled with inflation in cost of medical treatment:
 - a. To provide holistic solution with new Health Care Plans.
 - b. To provide good health care to our retirees at an affordable cost.
 - c. To subsidize a part of the health expenditure of the retirees.
- 06. We humbly submit that the objectives quoted above have not been met with by induction of insurance upto a certain amount, which has resulted in multiple problems and difficulties to the retired employees. In this connection, we furnish hereunder, the brief details of difficulties being faced by the retired employees, for your instant perusal and kind information:
 - a. Earlier, the Bank used to enter in to Tie-up arrangements with all major hospitals, for employees and retired employees (who were members of REMB Scheme), through which the hospitalisation charges were at the least. It is known practice that hospitals follow different billing pattern and the hospitalisation charges under Insurance are much more than the charges agreed by the Bank under Tie-up arrangement. Resultantly, the coverage amount would be drained at the earliest.
 - b. Almost majority of the employees, starting from subordinate cadre to Top Management officials, opt for membership under REMB Scheme by paying huge amount as premium and the coverage amount gets drained at the earliest due to the billing pattern referred in the earlier paragraph.
 - c. The capping/ceilings prescribed towards treatment for certain diseases resulting in denial of post-hospitalisation expenses in as much as the capping/ceilings include pre & post-hospitalisation expenses upto a maximum of 10% of the Base Sum Insured.
 - d. Even though the employees who retire from the Bank's service in normal course i.e., on attaining the age of superannuation, which is at present 60 years, are eligible for membership under REMB Scheme, we are informed that the Bank is denying membership to those employees quoting the clause of 58 years of age and 30 years of service (both conditions to be fulfilled together) that is applicable for VRS Optees, which is not correct.

- e. Majority of the claims under domiciliary treatment are rejected by insurance company quoting various reasons and not even a single claim has been cleared despite recommendations of Review Rejection Committee.
- f. We are also receiving representations from our members, who are SBI Health Care Policy Members, that their claims relating alternative treatment taken by them under Homeopathy are not reimbursed by the Insurance Company, in spite of clear instructions regarding eligibility of the same vide e-Circular No. CDO/P^HRD-PPFG/60/2022-23 dated 7th January 2023, which reads as under:

"Para-xiv under Annexure-V:

Alternative Treatment: Reimbursement of expenses for Hospitalisation & Domiciliary treatment (Applicable for SBI Health Care Policy members) under the recognised system of medicines, viz. Ayurvedic, Unani, Siddha, Homeopathy is covered provided such treatment is taken in a Hospital / Nursing Home / Clinic registered with the Central / State Government."

It will not be out of context to mention here that the above instructions have also been reproduced by the Insurance Company in its Brochure on SBI Health Care (Policy-A).

- 07. In view of the above, we request you to kindly reverse the decision of linking a part of the coverage amount under SBI Health Care through insurance and restore the earlier system of reimbursement through the Trustees of REMBS, inasmuch as the very purpose of prime objectives such as (i) providing good health care to retirees at an affordable cost and (ii) subsidizing a part of the health expenditure of the retirees, has got defeated.
- 08. We hope that our suggestion is viewed In right perspective and the requested decision would be taken by the management in the interests of senior citizens and super senior citizens, who have shed their blood and sweat, during their service, for the growth and prosperity of our mighty institution, STATE BANK OF INDIA.

Please acknowledge receipt of this communication and advise us the developments in this regard.

With warm regards

Yours faithfully,

(G.D. NADAF) General Secretary