



## eCircular

Department: P&HRD

Sl.No.: 1426/2019 - 20

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Date: Sat 4 Jan 2020

All branches and offices of  
State Bank of India

Madam/ Dear Sir,

### **INTRODUCTION OF ANNUAL PAYMENT PLAN (APP) “SBI HEALTH ASSIST” AND ONE TIME PAYMENT PLAN (OTPP) “SBI HEALTH CARE”**

#### **MODIFICATIONS AND CLARIFICATIONS**

Please refer to e-circular No. CDO/P&HRD-PPFG/65/2019-20 dated 27<sup>th</sup> December, 2019 advising renewal of Group Mediciam Policies for SBI retirees (Policy 'B') with effect from January 16, 2020 and modifications in terms and conditions of the policy.

2. In this connection, it is clarified that a retiree can enroll into APP without visiting the Pension Paying Branch. A retiree in such case can send scanned copy of Consent Form / Application Form along with debit mandate through email / third party to the concerned Pension paying Branch. However, in such cases, the retirees may also get in touch with the Branch to ensure receipt of such application (This facility is extended for this specific scheme only).

3. Subsequent to issuance of the above-mentioned e-Circular, the Insurance Co. has confirmed that the Critical Illness Cover in APP will be on floater basis i.e. the benefit can be availed either by the primary member or any one of the dependents covered under the policy. Critical Illness cover ceases with respect to the whole family in the event of any claim being raised with regard to any one of the covered members of the family.

4. We have been receiving queries from various quarters regarding certain provisions of the two plans i.e. OTPP and APP. The clarifications on such queries are furnished in the Annexure.

Please bring the contents of this e-Circular to the knowledge of all concerned. Please also share the information with the Pensioners' Association for circulating to maximum number of retirees.

Yours faithfully,

**Alok Kumar Chaudhary**  
**DMD (HR) & CDO**

**FAQs and their clarifications:**

i) Is it mandatory to be a member of SBI-REMBS to become a member of Annual Payment Plan (APP)?

No.

*Membership in APP can be taken without having membership of SBI-REMBS.*

ii) When a retiree is a member of SBI-REMBS (and hence OTP), why should he take up membership of APP?

*Whereas it is not mandatory for a member of SBI-REMBS to take up membership of APP, his doing so would help him in conserving the balance under SBI-REMBS (i.e. OTP).*

iii) When a retiree is a member of both SBI-REMBS (i.e. OTP) and APP, in case of a claim arising, the same is settled out of which policy?

*This is for the member to decide. However, payment under APP would help the retiree preserve the balance under the OTP which is a life time limit.*

iv) Can someone take APP (Policy 'B') for Rs. 3.00 lakhs this year and switch to Plan for Rs. 5.00 lakhs at next renewal or vice versa.

*A change in 'Basic Sum Insured' at the time of renewal is not envisaged as at present.*

v) How does the 'deductible' under Super Top up operate?

*In SBI Mediclaim Policies, the 'deductible' mandatorily comes from Base Plan of the same policy. The 'deductible' or threshold limit of Rs. 2.50 lakhs under the Super Top Up cover will be fully taken care of by the Base Policy in all situations. By taking Base Policy of Rs. 3.00 lakhs i.e. more than the threshold limit or deductible of Rs. 2.50 lakhs, the effect of deductible has been nullified and the members would get full benefit of the total Sum Insured under the Base Policy + Super Top Policy. In other words, retirees will not be required to pay anything from their pocket up to the total amount of Base Plan + Super Top-up plan.*

***(The above clarification is applicable for both OTP and APP)***

*Examples of different scenarios are given below:*

a) *A pensioner is having Base Policy of Rs. 3.00 lakhs & Super Top Up of Rs. 6.00 lakhs. He had a claim of Rs. 2.00 lakhs. His entire claim within the policy terms & conditions would be paid by his base policy. Subsequently, he had another claim of Rs. 3.00 lakhs. He would be paid Rs. 1.00 lakh from his remaining balance of Base Policy and Rs. 2.00 lakhs from the Super Top Up cover as per the policy terms & conditions.*

*Again, if he has a third claim of Rs. 4.00 lakhs, he would be paid entire Rs. 4.00 lakhs from the Super Top Up cover. Thus, in all circumstances, he can avail reimbursement upto Rs. 9.00 lakhs without making any payment from his own pocket.*

b) *A pensioner is having Base Policy of Rs. 3.00 lakhs & Super Top Up cover of Rs. Rs. 6.00 lakhs. He had a claim of Rs. 5.00 lakhs. He would be paid Rs. 3.00 lakhs from Base Policy & Rs. 2.00 lakhs from Super Top Up cover. If he has another claim of Rs. 5.00 lakhs, he would be paid Rs. 4.00 lakhs from the remaining balance of Super Top Up cover as at this point his entire Sum Insured including Super Top Up is exhausted and balance Rs.1.00 lakh will be borne by him.*

c) *A pensioner is having Base Policy of Rs. 3.00 lakhs and Super Top Up cover of Rs. Rs. 6.00 lakhs. He had a claim of Rs. 10 lakhs. He would be paid Rs. 3.00 lakhs from the Base Policy and Rs. 6.00 lakhs from the Super Top Up and balance Rs. 1.00 lakh will have to be borne by him as the total Sum Insured is exhausted.*

vi) *If 'deductible' is paid by another insurer or under another policy of SBI General Insurance Co. Ltd., can Super Top up be utilized?*

*No. This is a tailor made policy wherein other benefits have also been allowed to members. For availing Super Top up cover, 'deductible' has to mandatorily come from the Base Plan under the same policy.*

vii) *Can a member opt for a Room with rent higher than the entitled amount?*

*Yes, but maximum ceiling on Room Rent / ICU Rent / ICCU Rent will be as per the cappings available in the Base Plan opted by the retiree. However it may be noted that in the event of a member opting for a room higher than the entitlement, proportionate deductions will apply for all other charges incurred during hospitalisation, except for medicines.*

viii) *Is there any waiting period for pensioners who enroll themselves under APP? There shall be no waiting period for those who are already enrolled under Policy 'B' and new retirees. However, 30 days' waiting period will be applicable for all left out retirees, e-AB retirees, spouses of left out retirees & e-AB retirees enrolling into APP (Policy 'B') from the date of their joining. Sum Insured under the policy for these members will not be available for reimbursement of expenses incurred on ongoing hospitalization at the time of taking such membership.*

ix) Can a pensioner change the sum insured during the currency of the policy?

No.

*Option once exercised cannot be revised. Mid-term change in Basic Sum Insured is not allowed.*

x) Is there any alternative method of treatment which is covered under these policies?

*Yes. Ayurvedic, Unani, Siddha and Homoeopathic (AYUSH) treatments are also covered under these policies. However, treatment has to be taken from hospitals registered under State / Central Govt.*

xi) Are all family pensioners eligible for subsidy irrespective of their age?

*Yes. All Family Pensioners are eligible for subsidy irrespective of their age.*

xii) How does the Critical Illness cover benefit a member?

*If a primary member / dependent is inflicted with any of the specified 14 ailments after 90 days from the date of membership and survives for another 30 days, full cover amount of Rs. 5.00 lakhs will be paid to the member in one go. Treatment expenses will be additionally covered under the Base Plan / Super Top up.*

xiii) In case primary member's age is more than 65 years but spouse is aged less than 65 years, can Critical Illness cover be opted for?

No.

*The primary member's age must be less than 65 years for enrolling under critical illness cover. In case primary member's age is less than 65 and spouse's age is more than 65, even then coverage will be valid on floater basis.*

xiv) Can a person opt for Critical Illness Cover subsequent to enrolling under Basic Policy?

*No, it can be taken only along with the Base Policy.*

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