



मानव संसाधन प्रभाग, प्रधान कार्यालय,
प्लॉट सं 4, सेक्टर 10, द्वारका, नयी दिल्ली
HUMAN RESOURCES DIVISION HEAD OFFICE,
PLOT No. 4, SECTOR 10, DWARKA, NEW DELHI

TO ALL BRANCHES/OFFICES

07.09.2022

HUMAN RESOURCES MANAGEMENT DIVISION CIRCULAR NO. 649 /2022

REG: INDIAN BANK ASSOCIATION (IBA) GROUP MEDICAL INSURANCE SCHEME – OPTION FOR EMPLOYEES RETIRED/RETIRED DURING 01.10.2021 TO 30.09.2022.

The existing IBA's Group Medical Insurance Policy for active employees was renewed from 01.10.2021 and is valid upto 30.09.2022 covering all active employees. The employees retired/retiring during this policy period i.e. from 01.10.2021 to 30.09.2022 are covered up to 30.09.2022 under this policy.

IBA's Group Medical Insurance Policy for retirees will be renewed w.e.f. 01.11.2022 and willing employees who retired / retiring during 01.10.2021 to 30.09.2022 are required to enrol themselves under the IBA's Group Medical Insurance Scheme for Retired Employees, by submitting Consent Form exercising their options through HRMS.

As the existing IBA's Group Medical Insurance Policy for active employees is expiring on 30.09.2022 and there is a gap of One Month i.e. October-2022 for which a separate premium as per coverage terms such as, **With Domiciliary – Single/Family Floater** and **Without Domiciliary – Single/Family Floater** will have to be paid by the willing retirees.

We have received the One Month Premium quotes from The National Insurance Company Ltd. for retirees who are retired/retiring during 01.10.2021 to 30.09.2022, as under:-

Pro-Rata premium for one month coverage under retiree policy is as under:

A. WITHOUT DOMICILIARY - (Single Policy-Retiree/Family Pensioner)

Cadre	Annual Premium	Sum Insured	Pro-Rata Premium for one month without GST	GST @ 18%	Total Premium to be paid for One Month
Clerical/ Sub Staff	18665	300000	1585	285	1870
Officers	23824	400000	2023	364	2327

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B. WITHOUT DOMICILIARY (Family Floater – Retiree & Dependent Spouse)

Cadre	Annual Premium	Sum Insured	Pro-Rata Premium for one month without GST	GST @ 18%	Total Premium to be paid for One Month
Clerical/ Sub Staff	28715	300000	2439	439	2878
Officers	36652	400000	3113	560	3673

C. WITH DOMICILIARY (Single Policy-Retiree/Family Pensioner)

Cadre	Annual Premium	Sum Insured	Pro-Rata Premium for one month without GST	GST @ 18%	TOTAL Premium to be paid for One Month
Clerical/ Sub Staff	35864	300000	3046	548	3594
Officers	47396	400000	4025	725	4750

D. WITH DOMICILIARY (Family Floater – Retiree & Dependent Spouse)

Cadre	Annual Premium	Sum Insured	Pro-Rata Premium for one month without GST	GST @ 18%	TOTAL Premium to be paid for One Month
Clerical/ Sub Staff	55175	300000	4686	843	5529
Officers	72917	400000	6193	1115	7308

All the retirees / spouse of deceased employees willing for above coverage have to submit their Consent exercising their option carefully latest by **20.09.2022**. Employees retiring during September 2022 are requested to ensure that their separation is marked in HRMS before submitting their Consent.

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

OPTIONS FOR SUBMISSION OF CONSENT:

For the convenience of retirees, we have developed a new module in HRMS where the willing retired/ retiring employees can enter their consent. As such, the consent can be submitted through any of the following two options:

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1. Retired/ retiring employee/ spouse of deceased employees can submit duly filled Consent Form (Annexure-I) to their pension paying branch/ their establishment 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/ retiring employees can enter the consent as under.
 - (i) Employees retired during 01.10.2021 to 31.08.2022 can fill Consent in HRMS through PNB Parivar login via pnbnet.net.in at the navigation given below.

Retiree Self Service → Consent for Medical Insurance.

- (ii) Employees retiring during 01.09.2022 to 30.09.2022 can fill the Consent in HRMS at the navigation given below:

Self Service → Consent for Medical Insurance.

The submission of consent shall be done latest by **20.09.2022 (Tuesday)** as the HRMS window will be closed after 5.00 PM on **20.09.2022**. **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.** Respective branches/offices are also advised to ensure that the submission of consent of retirees/senior citizens/ spouse of deceased employees is smooth and no hardships are caused to them in this process.

The amount of premium will be debited from the respective accounts of the retirees on 22.09.2022 and will be remitted to National Insurance Company on 23.09.2022.

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. 011-28044775.

**(SURESH KUMAR RANA)
GENERAL MANAGER**

ANNEXURE-I

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

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

I SUBMIT MY CONSENT TO JOIN IBA'S GROUP MEDICAL INSURANCE SCHEME. MY DETAILS ARE AS UNDER:-

EMPLOYEE ID		EMPLOYEE NAME	
DOB		CADRE/DESIGNATION	
STATUS OF EMPLOYEE	ALIVE <input type="checkbox"/>	GENDER	
	DECEASED <input type="checkbox"/>	SEPERATION REASON	
RETIREMENT DATE			
SPOUSE NAME		ALIVE (SPOUSE)	YES/NO
DOB (SPOUSE)		GENDER	
WANTS DOMICILIARY COVERAGE		YES <input type="checkbox"/>	NO <input type="checkbox"/>
COVERAGE FOR*	FAMILY FLOATER <input type="checkbox"/>	SINGLE <input type="checkbox"/>	
*SINGLE RATE ARE APPLICABLE FOR RETIREE WITHOUT SPOUSE / SURVIVING SPOUSE (FAMILY PENSIONER)			
SUM INSURED* (BASE POLICY)	300000 (WORKMEN ONLY) <input type="checkbox"/>	400000 (OFFICERS ONLY) <input type="checkbox"/>	
MOBILE NO.			
CORRESPONDENCE ADDRESS			
			PIN
E-MAIL ID			

I AGREE AS UNDER:

- I IRRECOVERABLY AUTHORIZE THE BANK TO DEBIT PREMIUM AMOUNT FROM MY BELOW MENTIONED ACCOUNT FOR THE CURRENT POLICY PERIOD AND IN COMING YEARS.**

A/C NO.	
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- I shall maintain sufficient balance in the aforesaid account.
- In case I intend to withdraw from the scheme, I shall inform the Bank before its due date for not deducting Premium from my account. Once I opt out of the scheme I will not be allowed to rejoin.
- The insurance cover shall start from the date of receiving the insurance premium by the Insurance Company.
- I shall inform the Bank in case of any changes in my details such as contact information, account details, etc.
- The Bank is acting as intermediary in providing the information to the Insurance Company. The claims shall be scrutinized/ settled by the Insurance Company on the basis of claim documents and the Bank will not be involved in this process.

Date;

Your Faithfully

Place:

Signature

Acknowledgement

Received consent form to join the Medial Insurance Scheme as per Circular No....., Dt..... Sh/Smt.....
PF No..... The information received shall be entered in HRMS.

Signature of Bank Official with Stamp
Bo/Co.....