THE REGISTRATION IN HRMS PORTAL WILL BE AVAILABLE FROM 22nd DECEMBER 2025 (6:00 PM ONWARDS)

LINK FOR HRMS PORTAL WEBSITE IS AS UNDER

https://hrms.sbi.bank.in/2015/pages/authentication/sbihrms.htm

Highlights of SBI Health Assist Policy for Policy Year 2026-27		
Sr. No.	**Description**	**Coverage**
1	Basic Sum Insured	Two Plans for ₹ 3 lacs & ₹ 5 lacs
2	Super Top Up	Cover of ₹ 6 Lacs by default to each of the SBI Health Assist Member (**Premium is borne by Bank**)
3	Additional Super Top Up **(ASTUP)**	**Base Plan : ₹ 3 lacs** Available ASTUP Covers: ₹ In Lacs- **11 / 16 /21**
		Base Plan : ₹ 5 lacs **Available ASTUP Covers**: ₹ In Lacs- 14 / 19 /29 /39
4	Critical Illness (CI) Coverage	With Sum inured of 5 Lacs for family. Eligibility - retirees with completed age below 65 years can apply. Those who have already subscribed to Critical Illness Plan in the policy year 2025-26 can continue to renew their Critical Illness Plan even beyond the age of 65 years.

Improvements in Policy Year 2026-27

1. **Revision of Premium Rates by 5%.** Against Annual Medical Inflation of 14-15%.
2. Relaxation in eligibility criteria for opting Additional Super Top Up Cover.
3. Capping on Knee Surgery is proposed to be revised by ₹50,000/- as under:

(Figures in ₹ Lakh)

Base Cover	Existing Limit (Unilateral)	Proposed Limit (Unilateral)	Existing Limit (Bilateral)	Proposed Limit (Bilateral)
₹ 3 Lakh	₹2.00	**₹2.50**	₹4.00	**₹4.50**
₹ 5 Lakh	₹2.25	**₹2.75**	₹4.50	**₹5.00**

4. Inclusion of Angioplasty for other than Heart Surgeries (Capped at ₹5.00 lakh).
5. Increase in the pre-hospitalization period from 30 days to 60 days.
6. Inclusion of 4 Diseases Under Domiciliary Treatment for SBI Health Care (Policy A) Herpes Zoster, b) Gynaecomastia, c) Amyloidosis, d) Carpel Tunnel Syndrome.
7. Enhancement in subsidy amount to 90% (from80% at present) to all Pensioners 80 Years & above. The revised subsidy structure is as under:

Age Category of Pensioners	Subsidy in %	Subsidy Amount
FP below 80	**@50%**	₹ 9,560
Pensioners Below 80 but above 70		
FP Above 80	**@90%**	₹ 17,208
Pensioners Above 80		

Subsidization of Premium under "SBI Health Assist (Policy-B)" is available up to 50% on premium applicable to Base Plan of ₹3.00 lakh irrespective of existing two Base Plans ₹ 3/5 lacs

Revamping of e-Pharmacy Scheme 2026-27

1. Revision in Wallet Subsidy from existing Rs.12,000 to subsidy structure as under:

Category	Existing Subsidy	Proposed Subsidy
Base Plan ₹3 Lakh	12,000	15,000
Base Plan ₹5 Lakh	12,000	18,000
Age 80 years and above irrespective of the Base Plan opted	12,000	20,000

2. Revision in Pro-rata Contribution under e-pharmacy scheme:

Existing Pro Rata (Bank: Member)	% Contribution (Bank: Member)	Proposed Pro Rata (Bank: Member)	% Contribution (Bank: Member)
2:1	66.67 : 33.33	3:1	75:25

Escalation Matrix : Manager (HR) at RBOs and CM (HR) at Administrative Offices (erstwhile ZO) are the nodal officer for SBI Retirees Group Mediclaim Policies and any query/ grievances must be taken up for swift resolution by the members.

WhatsApp ChatBot: The most convenient way to access TPA related information is through respective TPAs ChatBot on WhatsApp . The step-by-step method can be downloaded from the following link:

https://sbi.bank.in/documents/16012/44078746/Connect+with+TPA+on+WhatsApp.pdf/3f8d6ca1-005e-6e07-0527-0f8af85515d2?t=1739350937137

Step by Step Guide for enrolment is being uploaded on the following link:

https://sbi.bank.in/web/personal-banking/pension-seva/medical-benefits

MEDICLAIM SCHEMES FOR SBI RETIREES
RENEWAL OF FOLLOWING POLICIES FOR POLICY YEAR 2026-27:
(COVER START DATE 16.01.2026 TILL 15.01.2027)

1. **SBI HEALTH CARE (POLICY 'A')**
2. **SBI HEALTH ASSIST (POLICY 'B')**

Please refer to the Circular No. CDO/P&HRD-PPFG/59/2024 – 25 dated 02nd January 2025 regarding renewal of "SBI Health Care (Policy 'A')" and "SBI Health Assist (Policy 'B')" for Policy Year 2025-2026.

2. In this connection, the ECCB of the Bank in its meeting held on 16th December 2025 has approved the renewal of both 'SBI Health Care' (Policy 'A') and 'SBI Health Assist' (Policy 'B') for the Policy Period 16th January, 2026 to 15th January, 2027 on modified Terms & Conditions. The details of the schemes are as follows:

I. SBI HEALTH CARE (POLICY A):

Insurance cover for SBI-REMBS members w. e. f. 16th January,2026 will be as under:

i) Insurance cover will be obtained for the members whose residual balance is ₹ 3.00 lacs and above.

ii) Medical claims of members having balance below ₹ 3.00 lacs will be paid by the REMB Trust, and they will not be covered under the insurance scheme.

iii) If the claim exceeds the total sum insured allocated under the Policy A, the balance amount of claim up to the residual limit will be processed by REMB Trust.

II. SBI HEALTH ASSIST (POLICY B):

A. ELIGIBILITY FOR MEMBERSHIP IN SBI HEALTH ASSIST

i) Existing members under SBI Health Assist for Policy year 2025-26 would be eligible to renew the policy till 15th January 2026 by paying annual premium.

ii) Employees who retired on or after 17th October 2025 till 15th January 2026 and who have not taken membership of SBI Health Assist 2025-

iii) 26 would be eligible to join the policy till 15th January 2026 by paying annual premium.

iv) Eligible new retirees (retiring on or after 16th January 2026) may join SBI Health Assist within 90 days from the date of retirement by paying the premium from their own sources. Pro-rata premium would be applicable in case of all such retirees.

v) Spouses of deceased employees may join SBI Health Assist (Policy 'B') within 120 days from the date of death of the employee by paying the premium from their own sources. Pro-rata premiums would be payable in all such cases.

vi) e-AB Retirees (members of IBA policy 2024-25) who opted for SBI Health Assist Policy on or before 31st October 2025 and who are not member of IBA Mediclaim Policy 2025-26 as on 15th December 2025, would be eligible to join the policy till 15th January 2026 by paying annual premium.

No waiting period clause will be applicable to the above categories [(i) to (v)] of eligible retirees/ family pensioners.

B. OPTION FOR LEFT OUT RETIREES / E-AB RETIREES / SPOUSES OF LEFT OUT RETIREES AND E-ABs RETIREES / MEMBERS OF REMBS

All members of SBI REMBS, left out retirees/ spouses of left out retirees & e-AB retirees/ spouses of e-AB retirees (who are not member of IBA Mediclaim Policy as on 15th December 2025) will be eligible to become members of SBI Health Assist by paying annual premium from their own sources till 15th January 2026. However, for these members, there will be a waiting period of 30 days from the date of their joining or date of inception of policy, whichever is later.

C. EXCLUSIONS

a. Employees who are/ were discharged / dismissed / removed/ compulsorily retired / terminated from service are not eligible to join the policy.

b. Officers against whom Rule 19(3) are/ were invoked on attaining the age of retirement and they are/ were subsequently discharged / dismissed /

removed/ compulsorily retired from service will not be eligible to join the policy.

D. MODIFICATIONS FOR POLICY YEAR 2026-27: COMMON TO BOTH SBI HEALTH CARE (POLICY-A) AND SBI HEALTH ASSIST (POLICY B)

i) The renewal of SBI Health Care (Policy A) and SBI Health Assist (Policy B) is effective from 16th January, 2026 with 5% increase in insurance premium. The particular of the premium payable by applicants of SBI Health Assist Policy (erstwhile Policy B) is placed under **(Annexure I).**

ii) Capping on Knee Replacement Surgery is increased by ₹ 50,000/- and enhanced capping for unilateral and bilateral knee replacement surgeries are as under:

(Figures in ₹ Lakh)

Base Cover	Existing Limit (Unilateral)	Proposed Limit (Unilateral)	Existing Limit (Bilateral)	Proposed Limit (Bilateral)
₹ 3 Lakh	₹ 2.00	**₹ 2.50**	₹ 4.00	**₹ 4.50**
₹ 5 Lakh	₹ 2.25	**₹ 2.75**	₹ 4.50	**₹ 5.00**

iii) Inclusion of Angioplasty for other than Heart Surgeries (Capped at ₹5.00 lakh).

iv) Increase in the pre-hospitalization period from 30 days to 60 days.

E. MODIFICATION SPECIFIC TO SBI HEALTH CARE (POLICY A) FOR POLICY YEAR 2026-27

The list of existing 63 diseases under Domiciliary Treatment has been revised by inclusion of following four new ailments for the members of SBI Health Care (Policy A):

a) Herpes Zoster
b) Gynecomastia
c) Amyloidosis
d) Carpel Tunnel Syndrome

F. MODIFICATIONS SPECIFIC TO SBI HEALTH ASSIST (POLICY B) FOR POLICY YEAR 2026-27

i) A one-time option will be provided to the existing members of SBI Health Assist (2025-26) who didn't opt for additional Super Top-up cover. Applicants can opt for any sum insured as per selected base plan by paying premium from their own sources. Members who do not opt for Additional Super Top-up (ASTUP) Cover in Policy Year 2026-27

will not be eligible to opt for Additional Super Top-up Cover in Policy year 2027-28.

ii) Starting with Policy Year 2026-27, the Bank has decided to extend 90% subsidy on Base Premium of ₹ 3 Lacs, as against existing subsidy of 80% to all Members, who have completed 80 years and above as on 16th January 2026. This subsidy will be uniform and extended irrespective of the Base plan opted. The existing subsidy of 50% will be available to remaining eligible members as per e-Circular No. CDO/P&HRD-PPFG/43/2023 – 24 dated 29th December 2023. The revised subsidy structure is as under:

Age Category of Pensioners	Subsidy in %	Subsidy
FP below 80 Years **Pensioners Below 80 Yrs. but above 70 Yrs.**	@50%	₹ 9,560/-
FP Above 80 years & Above **Pensioners 80 years & Above**	@90%	₹ 17,208/-

3. e-PHARMACY SCHEME

i) The applicants of SBI Health Assist (Policy B) for Policy Year 2026-27, will have an option to select their preferred e-pharmacy vendor from a list of three vendors at the time of SBI Health Assist (Policy B) application, which are as under:

Sl. No.	Name of e-Pharmacy Vendors	e-Pharmacy App
1	Lifetime Wellness Rx International Ltd.	UrLife
2	Phasorz Technologies Pvt Ltd.	MediBuddy
3	TATA 1MG Health Care	TATA 1MG

Please Note: The preferred vendor selected at the time of registration can only be changed during next policy year at the time of application.

ii) The existing e-pharmacy wallet subsidy of ₹ 12,000 available to all members has been revamped and the wallet subsidy available under e-pharmacy for Policy year 2026-27 is as under:

Category	Existing Subsidy (Amount in ₹)	Proposed Subsidy (Amount in ₹)
Base Plan ₹ 3 Lakh	12,000/-	15,000/-
Base Plan ₹ 5 Lakh	12,000/-	18,000/-
Age 80 years & above	12,000/-	20,000/-

iii) Presently each member is required to contribute in the specified ratio of 1:2 which has been revised to 1:3 for Policy Year 2026-27. Members retiring and joining the SBI Health Assist Policy (Policy B) after commencement of the Policy Year, will be eligible for e-pharmacy wallet subsidy on pro-rata basis.

iv) A detailed circular regarding the e-pharmacy scheme for Policy Year 2026-27 is being issued separately.

4. As per arrangement in place, both the above policies will be served by SBI General Insurance Co. Ltd. and M/s Anand Rathi Insurance Brokers for the policy period (16.01.2026 to 15.01.2027).

5. All other terms & conditions of the Policy remain the same.

6. CGM (HR) is authorised to issue clarifications/ guidelines in the matter, if any.

7. Please arrange to bring the contents of the circular to the knowledge of all concerned.

Policy & Pensioners' Management Department
State Bank of India, Corporate Centre,
Mumbai – 19th December 2025

Encl: Annexures as under:

Annexure	Particulars of the Annexure
I	Premium Chart for SBI Health Assist Policy (Policy B)
II	Improvements in policy features from policy year 2026-27
III	Step-by-Step Guide for enrolment/ renewal through HRMS
IV	Step-by-Step Guide for Applying on Behalf: Enrolment/ Renewal: Online Mode
V	Step-by-Step Guide for SBI Health Assist Policy (Policy B) through manual process
VI	Manual Application Form for SBI Health Assist Policy (Policy B): new members
VII	Consent Form for renewal through manual process
VIII	Reporting Format by Circles (**For Internal Purpose**)
IX	Escalation Matrix for Grievances/ Queries
X	Pension Seva Section on SBI website

Annexure-I

PREMIUM CHART: 'SBI HEALTH ASSIST' POLICY (POLICY B) (2026-27)

(All figures in ₹)

A. Base plan

Basic Sum insured	Basic Premium	GST (@18%)	Gross Premium (Rounded off)
3,00,000	19,121.00	3,441.78	22,563.00
5,00,000	42,504.00	7,650.72	50,155.00

B. Super Top-Up (STUP)

Basic Sum insured	Basic Premium	GST (@18%)	Gross Premium (Rounded off)
6,00,000	**Premium on STUP is being borne by the Bank**		

C. Additional Super Top-Up Plan

Basic Sum Insured	Additional Super Top-up Cover	Basic premium	GST (@18%)	Gross Premium (Rounded off)
3,00,000	11,00,000	5,805.00	1,044.90	6,850.00
	16,00,000	7,201.00	1,296.18	8,497.00
	21,00,000	9,451.00	1,701.18	11,152.00
5,00,000	14,00,000	11,017.00	1,983.06	13,000.00
	19,00,000	12,591.00	2,266.38	14,857.00
	29,00,000	19,218.00	3,459.24	22,677.00
	39,00,000	25,844.00	4,651.92	30,496.00

Note: Maximum Cover amount for Base Plan of ₹ 3 Lakh is ₹ 30 Lacs and for Base Plan of ₹ 5 Lakh is ₹ 50 Lacs.

D. Critical Illness Plan

Critical Illness (CI) Cover *	Basic premium	GST (@18%)	Gross Premium (Rounded off)
5,00,000	15,921	2,865.78	18,787.00

***Within the overall cover, CI premium is same for both Base Plans.**

Annexure II

Improvements in Policy Features from Policy year 2026-27

Applicable for both SBI Health Care (Policy A) and SBI Health Assist (Policy B)

1. Revision of Premium Rates by 5%.
2. Relaxation in eligibility criteria for opting Additional Super Top Up Cover.
3. Capping on Knee Replacement Surgery has been revised by ₹50,000/- as under:

Base Cover	Existing Limit (Unilateral)	Proposed Limit (Unilateral)	Existing Limit (Bilateral)	Proposed Limit (Bilateral)
₹ 3 Lakh	₹2.00 Lakh	**₹2.50** Lakh	₹4.00 Lakh	**₹4.50** Lakh
₹ 5 Lakh	₹2.25 Lakh	**₹2.75** Lakh	₹4.50 Lakh	**₹5.00** Lakh

4. Inclusion of Angioplasty for other than Heart Surgeries (Capped at ₹5.00 lakh).
5. Increase in the pre-hospitalization period from 30 days to 60 days.
6. Inclusion of 4 Diseases Under Domiciliary Treatment for SBI Health Care (Policy A):

   a) Herpes Zoster, b) Gynecomastia, c) Amyloidosis, d) Carpel Tunnel Syndrome.

7. Enhancement in subsidy on premium amount (Base Plan of ₹3 lakh, irrespective of the plan opted) to 90% (from 80% at present) to all Pensioners /Family Pensioners aged 80 Years & above.
8. Revamping of e-Pharmacy Scheme: Enhancement of Wallet Subsidy

Category	Existing Subsidy	Proposed Subsidy
Base Plan ₹3 Lakh	12,000/-	15,000/-
Base Plan ₹5 Lakh	12,000/-	18,000/-
Age 80 years and above irrespective of the Base Plan opted	12,000/-	20,000/-

9. Revision in Pro-rata Contribution under e-pharmacy scheme:

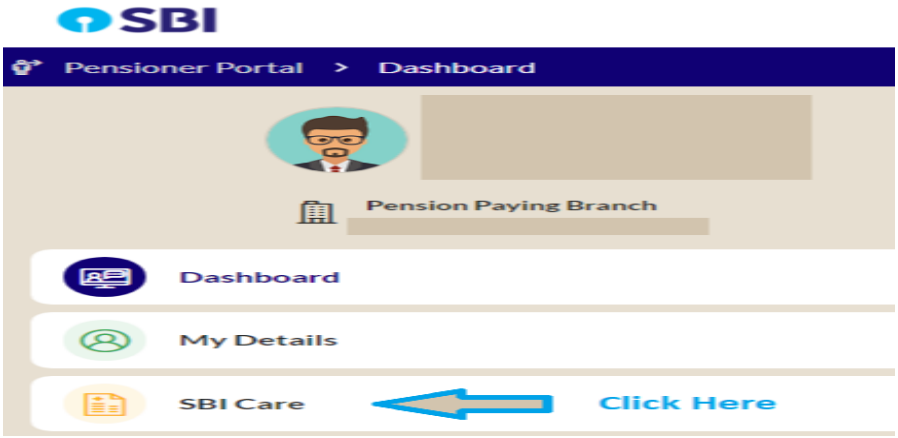
Existing Pro Rata (Bank: Member)	% Contribution (Bank: Member)	Proposed Pro Rata (Bank: Member)	% Contribution (Bank: Member)
2:1	66.67 : 33.33	3:1	75:25

Annexure III

Procedure for Online Enrolment/ Renewal for SBI Health Assist Policy (Policy B) for 2026-27

1. All SBI Pensioners /Family Pensioners are eligible to apply through online mode which is hassle free and whole application process can be completed in minutes.
2. Login into new HRMS portal by using your HRMS ID and Password. The Login Page of HRMS portal has option to reset the password , in case an applicant is unable to access HRMS Portal.
   In case of any queries regarding the same please connect with CM-HR at respective AO or PPG Department at LHO.
3. In case of retiring staff employees, they can apply 15 days prior to date of retirement. "**Healthcare Services" option can be accessed through** Nine Dots option provided on the top left side of the screen , as shown in the following image:

4. Option "**SBI Care**" will be available to Pensioners on the landing page (Home Page after logging in).



5. Click on the Apply button in the "SBI Health Assist" section of the page.

6. Please check the correctness of the personal details such as name, Mobile Number, Alternate Mobile Number, address & email ID. In case of any discrepancy of data kindly close the current tab and navigate to the "My Details" menu on the left-hand side of the screen. Click on the Edit button in the "Contact Details" section to make the necessary corrections and click on the "Save" button. After making the necessary changes navigate back to the "SBI Care" Menu → "SBI Health Assist".

7. After the above step fill in the Alternate Address details. This address will be used for the delivery of the Medical Cards and Welcome Kit. Hence, please ensure that accurate details are provided. If alternate address is same as the address provided in the section above, you can click on the "copy current address" option to get the alternate address populated and then click on the **"Next"** button.

8. In the "Members Covered" section select the Policy year 2026-27 from the drop down.

9. Choose your relevant "Category" from the drop down.

10. In the "Dependent Details" tab kindly verify the details. In case of any discrepancy observed, kindly contact the LHO PPG department for making necessary amendments. Please resume the application post amendment in the dependent details.

11. Please select your desired e-Pharmacy vendor from the Drop-down. The information regarding all three vendors is uploaded on https://sbi.co.in/web/personal-banking/pension-seva. Kindly go through the document containing the services offered by each vendor and then select a vendor of your preference.

12. Please mention the nominee details and click "Save & Next" to proceed further.

13. Under the "Policy Details" Section, please select your desired Base Plan, then you may also choose desired limits from Additional Super Top-up cover and Critical illness cover. After selecting desired plans, you may proceed ahead by clicking on the "Save & Next" button. In case you do not wish to apply for Additional Super Top-up and critical illness cover, a pop-up window will be opened where you can confirm the same by selecting the "Confirm" option.

14. Under the "**Preview & Finalize"** section please verify all the information displayed.

15. Please go through both the declaration terms and select the tick mark option to confirm, proceed by clicking the "Submit" button.

16. After proceeding, a Pop-up will appear for your confirmation. Once confirmed, you will be receiving an OTP on your registered mobile number.

17. Once OTP is provided successfully the premium Payment will be processed and the details will be reflected on the left-hand side of the window in green colour. Email/SMS will be triggered upon completion of the process.

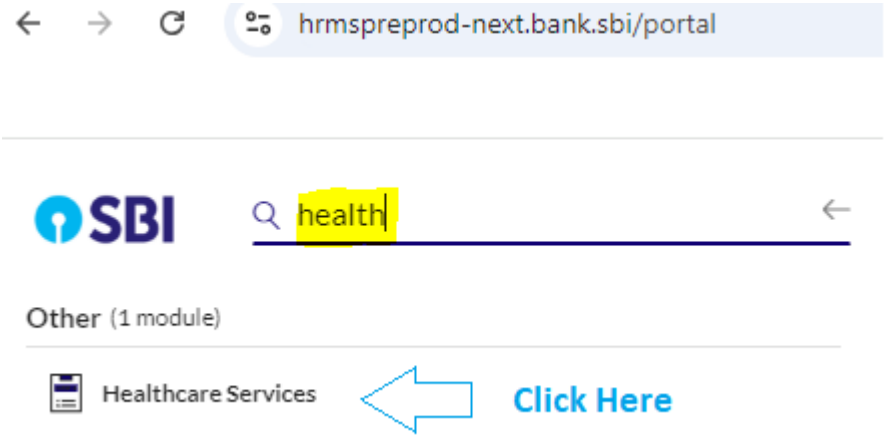
18. For Printing/Viewing the application form, please click on the "View Status" button.

Annexure IV

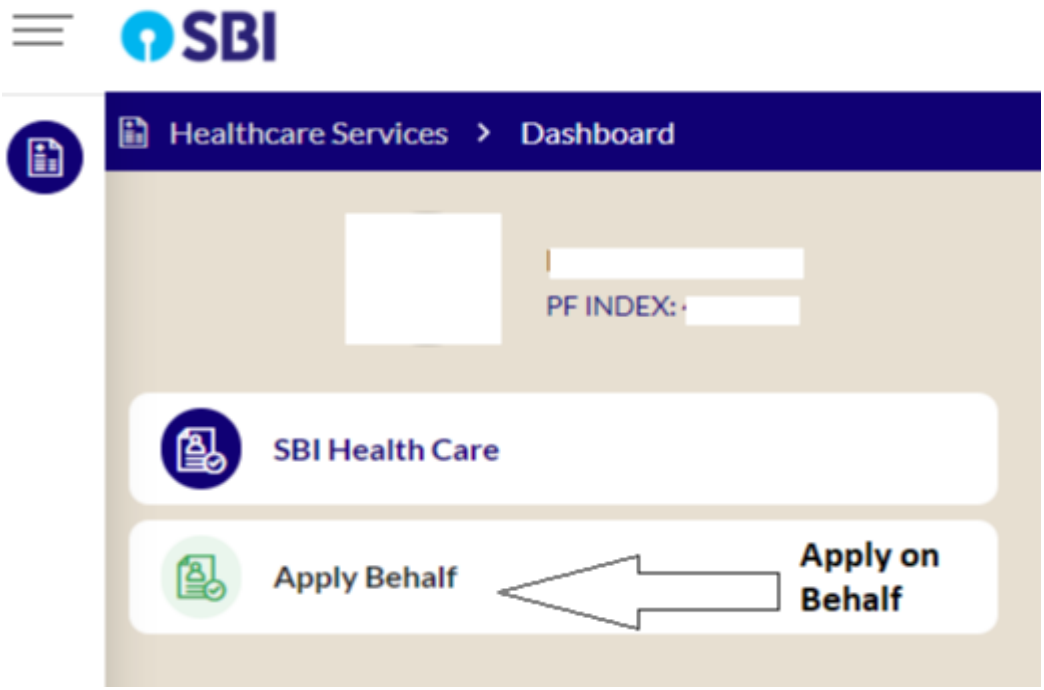
APPLYING ON BEHALF

Procedure for Online Enrolment / Renewal for SBI Health Assist Policy (Policy B) for 2026-27 (Using "Apply on Behalf of the Applicant" functionality in HRMS Portal)

1. Login into new HRMS portal by using your HRMS ID and Password.
2. Go to the "Nine Dots" menu on top left corner navigation and search for "Health Care Services". Click on the HealthCare Services Menu.



3. Now click on the "Apply Behalf" Menu on the left-hand side of the window.



4. Search the retiree by his PF ID in the Search box , if the retiree PF ID is available in the system then the **SBI Health Assist Policy (Policy B**) tab will get opened.
5. Click on the "Apply" button in the **SBI Health Assist Policy (Policy B)** tab**.**
6. After submitting the request by Branch official OTP will be generated for payment to Pensioner's registered mobile number. On submitting the OTP, enrolment process will be completed.
7. Rest of the process as mentioned in the Annexure **III** is to be followed**.**

_____*_____

Annexure V

Step-by-Step Guide for SBI Health Assist Policy (Policy B): Manual Application

Procedure to be followed by Various categories of applicants

I. The online application through HRMS Portal is not only hassle-free but it also significantly reduces the processing of application as well as issuance of Medical Cards. It is pertinent to note that enrollment through Physical Mode of Application is only allowed for such members who are non-pensioners and hence do not have access to HRMS portal. The Bank has developed in HRMS portal the functionality of self-application as well as the functionality of applying on behalf of an applicant for SBI Health Assist Policy, introduced this year i.e. 2025-26 for those members who require assistance from Branch Officials. Hence, online enrollment is to be encouraged since it's not only hassle-free, but the transmission of applicants' enrollment data is swift resulting in quicker processing of application, sharing of data with the insurance company and error free issuance of Mediclaim Cards. While online application is preferred mode of application, the offline application i.e. Physical Application may be accepted in such situations where both self-online application and applying on behalf is not possible.

II. All eligible retirees/ spouses of retirees who are not member of expiring SBI Health Assist Policy (2025-26) will fill up the Application Form (enclosed as **Annexure - VI**) and submit to the pension paying branch along with cheque/ debit authority for applicable premium amount as per premium chart.

III. Existing members of SBI Health Assist (2025-26) willing to renew their policy will fill up the simplified Consent Form (enclosed as Annexure - VII) and will submit to the pension paying branch along with cheque/ debit authority for applicable premium amount as per premium chart.

IV. New retirees who will retire on or after 16th January 2026 and willing to enroll for the policy, will also be required to fill up the Application Form (enclosed as Annexure -VI) and submit to the pension paying branch along with

cheque / debit authority for applicable pro-rata premium amount as per premium chart. Branches can contact CM (HR) at their respective A.O. to obtain exact pro-rata premium applicable to the new retiree. The Pro-rata calculator will be shared with all CMs (HR).

V. The branch will arrange for debiting the applicant's account with the amount of gross premium (i.e. Basic Premium plus GST) and credit the same to Current Account opened by each A.O. for collection of premium.

VI. Once the Branch has credited the premium to the Current Account opened by respective A.O., branch will not debit/ reverse the premium from collection account of A.O. without approval of CM-HR of concern AO.

VII. Retirees of e-ABs should mention their HRMS ID instead of their Associate Bank's PF ID on the Application Form in column no. 1A.

VIII. Retirees of e-ABs who do not have HRMS ID should mention the name of the e-AB (SBM, SBT, SBBJ, SBP, SBIN, SBS & SBH) before their PF ID (for example if PF ID of a retiree of SBM is 1234 then "SBM1234" is to be mentioned) in column no. 1B.

IX. Once amount of premium is credited in the designated account at the A.O., branch will forward duly filled-in application forms [mentioning (a) Transaction No. (b) Date of Transaction; and (c) Amount] to the concerned A.O. for further action.

X. AOs on receiving the application form, will verify the application/ consent forms and check the eligibility of the applicant, eligible family members, ensure that all necessary details have been filled and correct amount of premium has been deposited in the Current Account maintained at A.O.

XI. AOs will simultaneously prepare a list (as per **Annexure -VII**) containing details of the applicants and send the soft copy through email to HR Department at their respective LHO and also transfer the consolidated amount to Main Collection Account maintained by P & PM department, Corporate Centre, Mumbai. Specific dates for transfer of consolidated

Annexure V Cont.…

premium to Corporate Centre and data file sharing will be communicated by Corporate Centre to the LHOs / A.Os.

XII. The AOs should ensure that the amount remitted to Corporate Centre tallies with the column total of 'Premium Paid by pensioners' in the excel file sent by them to their respective LHO. AOs should not send data files directly to Corporate Centre.

XIII. HR Department at each LHO, receiving the enrolment details / files from the AOs will verify and collate the details in a single excel file in different sheets (as per **Annexure-VIII**) for each AOs and send the same to P & PM Department, Corporate Centre on the dates communicated to them.

XIV. P& PM Department, Corporate Centre, on receiving the files from each LHO, will prepare a consolidated list and send the same to the Insurance Company along with the total premium amount including GST.

ANNEXURE-VI

"SBI HEALTH ASSIST" SCHEME

GROUP MEDICLAIM POLICY 'B' FOR SBI RETIREES

APPLICATION FORM FOR NEW MEMBERS

Policy 'B' (16.01.2026 – 15.01.2027)

Date of payment of premium	
Journal No.	
Amount paid	

Branch Manager/ Chief Manager
State Bank of India,
Branch / Administrative office,
_____

Affix coloured joint photograph of the member and spouse

Dear Sir,

SUB: SBI Health Assist Group Health Insurance Policy 'B' for SBI Retirees
Policy Period: 16.01.2026 – 15.01.2027

I am interested in joining the SBI Health Assist Group Health Insurance Policy for SBI Retirees (Policy B – SBI Health Assist Scheme) and furnish the required information as under:

Sl.	Particulars	Remarks
1 A	P.F Index No. / HRMS ID	
1 B	PF ID (for pre-merger retirees of e-Abs who don't have **HRMS ID**) for example " **SBM1234/ SBH1234, SBP1234……."**	
2	Name of retiree / Family pensioner	
3	Date of Birth of retiree / Family pensioner	dd/mm/yyyy
4	Date of joining the Bank	
5	Date of Retirement	

6	Date of Death of deceased employee/ pensioner (applicable for Family pensioners)	
7	Retired as **Clerical/Sub-staff/ JMGSI/MMGS-II/MMGS-III/SMGS IV/SMGS-V/TEGS-VI/ TEGSVII/ TEGSS-I/ TEGSS-II**	
8	Age (in years) as on **16.01.2026** (Completed Age)	
9	Gender	**i. Male** **ii. Female**
10	Type **(please write Pensioner / Family pensioner / Retiree)**	
11	Category (Please tick mark)	i. SBI retirees on completion of pensionable service in the Bank. ii. Surviving spouses of SBI employee who died whilst in service or after retirement. iii. Existing members of SBI Health care / Policy-A. iv. Old retiree/ surviving spouses / family pensioners of erstwhile Associate Banks of SBI (e-ABs) v. Pensioners removed from service and receiving pension. vi. Pensioners / Retirees who could not join 'SBI Health Assist' in the Policy year 2025-26
12	Whether dismissed or Terminated from service. (Tick)	Yes / No
13	Whether Rule 19(3) was invoked on attaining the age of retirement (If yes, please furnish the details of the disciplinary case, date of its conclusion and penalty, if any imposed)	Yes / No

14	Address for communication	**Address**	
		Nearest Landmark	
		Post Office	
		City / District	
		State	
		Pin Code	
15	Landline No. (with STD code)		
16	Mobile No. (**it will be used for registration under e-Pharmacy scheme**)		
17	Alternate Mobile no. (mandatory)		
18	Email ID (mandatory)		
19	Name of Spouse (if any)		
20	Date of Birth of Spouse (dd/mm/yyyy)		

21	Name of disabled Child / Children (if any) (As declared to the Bank)	**Sl**	**Name of the disabled child**	**Date of Birth** (dd/mm/yyyy)	**Gender**
		1.			
		2.			

22	Name of the pension/family pension paying branch	**Name of the Branch**	**Branch Code No.**

23	Pension Account No. (11 digit)											
24	IFSC Code											

BASIC COVER PLANS

25	**Sum Insured**	**Basic Premium**	**GST @ 18%**	**Gross Premium (A) (Rounded off)**	**Please Tick Opted Plan**
	3,00,000	19,121.00	3,441.78	22,563.00	

	5,00,000	42,504.00	7,650.72	50,155.00	

ADDITIONAL SUPER TOP-UP COVER**

26	Base plan	Sum Insured of Additional Super top-up	Basic Premium	GST @ 18%	Gross Premium (B)	Please Tick Opted Plan
	3,00,000	**11,00,000**	5,805.00	1,044.90	6,850.00	
		16,00,000	7,201.00	1,296.18	8,497.00	
		21,00,000	9,451.00	1,701.18	11,152.00	
	5,00,000	**14,00,000**	11,017.00	1,983.06	13,000.00	
		19,00,000	12,591.00	2,266.38	14,857.00	
		29,00,000	19,218.00	3,459.24	22,677.00	
		39,00,000	25,844.00	4,651.92	30,496.00	

CRITICAL ILLNESS COVER **

27	Sum Insured	Basic Premium	GST @ 18%	Gross Premium (C)	Please Tick if applied
	5,00,000	15,921.00	2,865.78	18,787.00	

**** Critical Illness Cover and Additional Super top-up cover will not be available separately and can be taken only with a Base Plan**

****Members should have completed age below 65 years as on 15th January 2026 to opt for Critic al illness Plan**

N.B. : Pro-rata premium for new retirees will be applicable in all the plans i.e. Basic Cover Plans , Additional super top up and Critical Illness Plans.

Employees retiring during currency of the policy should apply by paying the pro-rata premium within 90 days from the date of their retirement.

28	CALCULATION OF TOTAL PREMIUM (with GST)			
	Premium for Base Plan	Premium for Additional Super top-up Plan (if any)	Premium for Critical Illness (if any)	Total Premium Paid (with GST)
	(A)	(B)	(C)	A + B + C

29	**The information regarding all four vendors is uploaded on https://sbi.co.in/web/personalbanking/pension-seva . Kindly go through the document containing the services offered by each vendor and then select a vendor of your preference.** **Selection of e-Pharmacy Vendor (Anyone) –** 1. Medibuddy 2. Tata 1MG 3. Urlife I hereby select vendor M/S_____ as my e-Pharmacy vendor for providing services during Policy year 2026-27. To enable the vendor so selected to allow access to the services offered by them, I authorize the Bank to share my PF ID/ contact details and details of my/ my family members to such vendor, for which I give my consent herewith.

30. Declaration Nominee/s :

I, Mr./Mrs./Ms. _____ , a pensioner of the Bank/ a retired employee / spouse of the deceased employee do hereby assign the money payable by **"SBI General Insurance Co. Ltd."** in case of my death to Mr. / Mrs./ Ms. _____ Relation _____ and further declare that his/her receipt shall be sufficient discharge of the company.

31. Debit Authority for Super Top-up Premium

I hereby authorize Bank to debit and re-credit the Super Top Up Premium Amount cover of 6 Lacs from my pension account.

32. Debit Authority:

I am aware that I along with my spouse and disabled child/children (if any, as declared to Bank) will be eligible for a **SBI Health Assist Group Health Insurance Policy for SBI Retirees**.

I hereby authorize the Bank to debit the insurance premium amount of Rs. _____ to my pension / family pension account No. _____.

I undertake to keep sufficient balance in my above account for debiting insurance premium for the policy year 2026-27 failing which the policy may not be issued to me. I am also aware that Bank may at its sole discretion can modify the terms and conditions of the policy from time to time.

33. Undertaking:

I am desirous of availing the "SBI Health Assist" Scheme ("Services") offered by the Bank through third-party agencies/service providers/vendors ("Third Party Entities"). The Bank may also at its sole discretion offer certain additional services, (information regarding such service/s will be Circulated subsequently by Bank) ("Additional Services") through Third Party Entities selected by the Bank. For the purpose of rendering Services and/or Additional Services, I do hereby expressly authorize the Bank to share, disclose or exchange my PF ID/ contact details and details of my/ my family members to Third Party Entities.

I understand that availing of Additional Services will be on voluntary and chargeable basis.

I undertake that I will use aforesaid additional services for my genuine personal purpose and for the declared family members only. In case of any misuse of the facility is reported and/or the facility is used for commercial purposes, Bank/ Third Party Entities are free to take appropriate measures including to suspend the services if so warranted.

Also, I undertake that any liability, damage, claim, loss etc. that the Bank may suffer or incur, on account of any acts of omission on my part in connection with the use of Additional Services, shall be recoverable from me on first demand made by the Bank. I understand that the Additional Services are provided by Third Party Entities and any issues/concerns related thereto need to be taken up with Third Party Entities only. The Bank shall not be responsible for any loss incurred by me on account of use of such Additional Services provided by Third Party Entities.

I have read, understood and accept the contents of this 'Consent-cum-Undertaking'.

Place : **Date :**	_____ **Signature of Retired Employee / Spouse**

For office use only

Certified that Shri / Smt. _____ _____ is a retired employee / spouse of the retired / deceased employee of SBI / e-ABs and he / she has remitted the insurance premium as per the following details:

Transaction No. (Journal No.) _____	**Date :** _____	**Amount :** _____

State Bank of India

Name of the Forwarding Branch (Code No.):

Place: **Date :**	_____ **Signature of the Branch Manager with seal**

(On Branch Letter head)

ACKNOWLEDGEMENT OF PREMIUM PAID

(Year 2026-27)

'SBI HEALTH ASSIST'

GROUP MEDICLAIM POLICY FOR RETIREES

(to be given to the applicant by the Branch receiving this Application Form)

Received from Shri/Smt._____

PF Index No._____

This is to certify that Insurance Premium including GST for Rs_____

(Base Plan/ Additional Super Top-up / Critical Illness Cover) + (Super Top-up Cover of 6 lacs) Full Year Premium is 9,044 = _____

(In words Rupees_____

_____) has been received for enrolment in above Mediclaim Policy.

Date_____

Signature of the Branch official issuing the certificate

ANNEXURE- VII

"SBI HEALTH ASSIST" SCHEME (2026-27)

CONSENT FOR RENEWAL

Date of payment of premium	
Journal No.	
Amount paid	

The Branch Manager
State Bank of India,
_____ Office/ Branch

Dear Sir,

SUB: SBI Health Assist Group Health Insurance Policy for SBI Retirees
Policy Period: 16.01.2026 –15.01.2027

PF No. /HRMS ID		
Pensioner Type (Pensioner / Retiree / Family Pensioner)		
Name of Retiree/ Spouse of Deceased Retiree (Family pensioner)	Gender (M/F)	Dt. of Birth (dd/mm/yyyy)
Name of Spouse	Gender (M/F)	Dt. of Birth (dd/mm/yyyy)
Name of disabled child (if any- As declared to the Bank) 1. 2.	Gender (M/F)	Dt. of Birth (dd/mm/yyyy)
Name of the Nominee :	Relationship of Nominee :	
Date of Retirement :		
Address of pensioner :		
City		

State	
Pin code	
Mobile No. (For E-pharmacy Scheme)	
Alternate Mobile no. (mandatory)	
Email Id. (mandatory)	
Name of Zonal/Administrative office	
Name of LHO	
Name of Pension Branch	
Pension Branch code	
Pension Account no.	
IFSC code	

I intend to join the **SBI Health Assist Group Health Insurance Policy of State Bank of India**. I hereby exercise my options as per the following:

Sum Insured (Rs. in Lacs)	**Premium details for Basic Cover**			
	Basic Premium	**GST @ 18%**	**Gross Premium (Rounded off) (A)**	**Please Tick Opted Plan**
3,00,000	19,121.00	3,441.78	22,563.00	
5,00,000	42,504.00	7, 650.72	50,155.00	

Premium details for Additional Super Top cover					
Base plan (Amt. in lacs)	**Additional Super Top-up** (Amt. in lacs)	**Basic premium**	**GST @ 18 %**	**Gross Premium (Rounded off) (B)**	**Please Tick Opted Plan**
3.00	**11.00**	5,805.00	1,044.90	6,850.00	
	16.00	7,201.00	1,296.18	8,497.00	
	21.00	9,451.00	1,701.18	11,152.00	
5.00	**14.00**	11,017.00	1,983.06	13,000.00	
	19.00	12,591.00	2,266.38	14,857.00	
	29.00	19,218.00	3,459.24	22,677.00	
	39.00	25,844.00	4,651.92	30,496.00	

Sum Insured	Basic Premium	GST @ 18%	Gross Premium (Rounded off) (C)	Please Tick Opted Plan
5,00,000**	15,921.00	2,865.78	18,787.00	
****Critical Illness Cover and Additional Super top-up will not be available separately and can be taken only with a Base plan. **Members should have completed age below 65 years as on 15th January 2026 to opt for Critical illness Plan**				

Calculation of Total Premium :

Premium for Basic Plan Opted with GST (A)	Additional Super top-up Premium (If any) with GST (B)	Critical Illness Plan Premium (If any) with GST (C)	Total Premium (with GST) A+B+C = D

i) Selection of e-Pharmacy Vendor –

The information regarding all four vendors is uploaded on https://sbi.co.in/web/personal-banking/pension-seva . Kindly go through the document containing the services offered by each vendor and then select a vendor of your preference

1. **Medibuddy**
2. **TATA 1MG**
3. **Ur Life**

I hereby select vendor M/S_____ as my e-Pharmacy vendor for providing services during Policy year 2026-27. To enable the vendor so selected to allow access to the services offered by them, I authorize the Bank to share my PF ID/ contact details and details of my/ my family members to such vendor, for which I give my consent herewith.

ii) Declaration of Nominee

I, Mr./Mrs./Ms. _____ , a pensioner of the Bank/ a retired employee / spouse of the deceased employee do hereby assign the money payable by "**SBI General Insurance Co. Ltd.**" in case of my death to Mr. / Mrs./ Ms. _____

Relation _____ and further declare that his/her receipt shall be sufficient discharge of the company.

iii) Debit Authority for Super Top-up Premium (Sponsored by Bank)

I hereby authorize Bank to debit and re-credit the Super Top Up Premium of Rs. 9,044.00 for Super Top-up cover of 6 Lacs from my pension account.

iv) Debit Authority :

I am aware that I along with my spouse and disabled child/children will be eligible for a health insurance cover of Rs. _____ lacs under the Family Floater Group Health Insurance policy 'B'. I hereby authorize the Bank to debit the insurance premium amount of Rs. _____to my pension / family pension account / Savings Bank Account No.

_____.

v) Undertaking:

I am desirous of availing the "SBI Health Assist" Scheme ("Services") offered by the Bank through third-party agencies/service providers/vendors ("Third Party Entities"). The Bank may also at its sole discretion offer certain additional services, (information regarding such service/s will be Circulated subsequently by Bank) ("Additional Services") through Third Party Entities selected by the Bank. For the purpose of rendering Services and/or Additional Services, I do hereby expressly authorize the Bank to share, disclose or exchange my PF ID/ contact details and details of my/ my family members to Third Party Entities. I understand that availing of Additional Services will be on voluntary and chargeable basis. I undertake that I will use aforesaid additional services for my genuine personal purpose and for the declared family members only. In case of any misuse of the facility is reported and/or the facility is used for commercial purposes, Bank/ Third Party Entities are free to take appropriate measures including to suspend the services if so warranted.

Also, I undertake that any liability, damage, claim, loss etc. that the Bank may suffer or incur, on account of any acts of omission on my part in connection with the use of Additional Services, shall be recoverable from me on first demand made by the Bank.

I understand that the Additional Services are provided by Third Party Entities and any issues/concerns related thereto need to be taken up with Third Party Entities only. The Bank shall not be responsible for any loss incurred by me on account of use of such Additional Services provided by Third Party Entities.

I have read, understood and accept the contents of this 'Consent-cum-Undertaking'.

Date : **Signature of Retired Employee/ Spouse**

For office use only		
Certified that Shri / Smt. _____ is a retired employee / spouse of the retired / deceased employee of SBI / e-ABs and he / she has remitted the insurance premium as per the following details:		
Transaction No. (Journal No.) _____	**Date :** _____	**Amount :** _____
State Bank of India **Name of the Forwarding Branch (Co de No.) :**		
Place : **Date :**	_____ **Signature of the Branch Manager with seal**	

ACKNOWLEDGEMENT OF PREMIUM PAID

(Year 2026-27)

'SBI HEALTH ASSIST'

GROUP MEDICLAIM POLICY FOR RETIREES

(to be given to the applicant by the Branch receiving this Application Form)

Received from Shri/Smt._____

PF Index No._____

This is to certify that Insurance Premium including GST for Rs_____

(Base Plan/ Additional Super Top-up / Critical Illness Cover) + (Super Top up Cover

of 6 lacs) Full Year Premium is 9,044.00 =_____

(in words Rupees _____

_____) has been received for enrolment in above Mediclaim Policy.

Date_____

Signature of the Branch official
issuing the certificate

Annexure IX

ESCALATION MATRIX / HELPLINE FOR POLICY YEAR 2026-27

SBI HEALTH CARE & SBI HEALTH ASSIST POLICY

1. In order to facilitate hassle free access to all information related to SBI Retirees Group Mediclaim Policies, the information is available under Pension Seva Section on SBI website. This information is also update on periodical basis.

2. The representatives of TPAs/ARIBL are available at Administrative Offices and they can be contacted with any query related to Mediclaim Policies/ ePharmacy Scheme/ Card related queries / Claims etc.

3. **In case of any further escalation, the Manager (HR) at RBOs / CM(HR) at Administrative Offices, who are the Nodal Officers for SBI Retirees Mediclaim policies may be contacted with regards to queries/ grievances.**

4. The provision of soft copy of e-Card is also available on the WhatsApp Chatbot of respective
   Message through members registered mobile phone. The Step by Step guide for accessing respective TPAs Chatbot services is available on the following link:

   https://sbi.bank.in/documents/16012/44078746/Connect+with+TPA+on+WhatsApp.pdf/3f8d6ca1-005e-6e07-0527-0f8af85515d2?t=1739350937137

5. The contact details of SBI General Insurance CO. Ltd. and ARIBL are as under:

SBI General Insurance		
Sr. No.	**Particulars**	**Details**
1	Organization Website	https://www.sbigeneral.in/
2	Customer Care email address	customer.care@sbigeneral.in
3	Customer Care Number	1800 102 1111

Anand Rathi Insurance Broker Ltd.		
Sr. No.	**Particulars**	**Details**
1	Organization Website	https://www.anandrathiinsurance.com/
2	Customer Care email address	sbigmchelpdesk@rathi.com
3	Customer Care Number	1800-123-8733

Annexure X

Pension Seva Section on SBI website

In order to promote awareness as well as to provide comprehensive information related to SBI Retirees, latest instructions are being uploaded on the Pension Seva section of the SBI website. The website can be accessed by clicking on the following link:

Go to SBI Website (https://sbi.bank.in/) → click on Information & Services→Pension Seva .

2. The Pension seva section can be directly accessed by clicking on the following link:

https://sbi.bank.in/web/personal-banking/pension-seva

3.There are following sections containing various benefits for SBI Retirees

The information related to SBI Retirees Mediclaim Benefit, e-pharmacy services, WhatsApp Chatbot etc. are available on the above link, apart from brochures of TPA and reimbursement claim forms.

4. The latest information related to SBI Mediclaim Policies/e-pharmacy facility is also being uploaded on above link on frequent basis.

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