

Post Retirement Medical Benefit Scheme (PRMBS) Post 01.01.2007.

Details to join the Scheme for the year 2016 are as under :

Order is placed on M/s. United India Insurance Co. Ltd. The documents to be enclosed along with application form is as under :

2 Passport Size Photographs (each) of retired officer & Spouse, NUS & spouse. .

Signature on passport size photos (rear side) by retired officer / NUS & Spouse.

Age proof (Photocopy of Voter ID Or SSC Certificate Or Ration Card Or Passport Or Aadhar Card).

The Premium amount payable by Retired Officers / Non Unionized Supervisory Cadre details are as under : Demand Draft to be drawn in favour of

“MIDHANI EMPLOYEES DEFINED SUPERANNUATION MEDICAL SCHEMES TRUST”

NOTE : SBI Demand Draft is preferable for faster processing.

Sl. No.	Group	Insured Amount	Retired officer/Nus Premium Amount to be paid
1	A	Rs. 5,00,000 (Grade VI and above)	Rs. 6300/- (Rupees Six Thousand Three Hundred only)
2	B	Rs.4,00,000 (Grade EO TO Grade V)	Rs. 5465/- (Rupees Five Thousand Four Hundred and Sixty Five only)

APPLICATION – FORMAT MEDICAL (PRMBS)
FOR RETIRED EMPLOYEES OF MIDHANI POST 01.01.2007

1. Full Name :
2. Father Name :
3. Staff No. :
4. Date of Birth (Age as on date) :
5. Designation at the time of Retirement / Death :
6. Department at the time of Retirement / Death :
7. Spouse Name :
8. Spouse Age / Date of Birth (Age as on Date) :
9. Present address for Communication :
10. Permanent Address :
11. Phone No. Land Line/Mobile No. :
12. E-mail ID if any :
13. Date of Retirement / Separation Due to death :
14. Details of Demand Draft :
Name of Bank & Branch, Demand Draft No & Date Drawn on Amount
15. Photographs enclosed (2 No's) :
Self and Spouse

Note : Age Proof should be enclosed, 2 Nos of Passport size photos (Self & Spouse) to be enclosed. Photos back side signature.

Date : Signature of Retired Employee

Place : Signature of Spouse

DD In Favour of : “ **Midhani Employees Defined Superannuation Medical Schemes Trust**”

POST RETIREMENT MEDICAL SCHEME PREMIUM AMOUNT - 2016 (POST 2007)

Sum Insured (Rs. 400000)				Sum Insured (Rs. 500000)			
No of Months	Premium	Employee Contribution 30%	Company Contribution (70%)	No of Months	Premium	Employee Contribution (30%)	Company Contribution 70%)
12	18217	5465	12752	12	21000	6300	14700
11	16674	5002	11672	11	19221	5766	13455
10	15231	4569	10661	10	17557	5267	12290
9	13688	4106	9581	9	15779	4734	11045
8	12194	3658	8536	8	14057	4217	9840
7	10651	3195	7456	7	12279	3684	8595
6	9158	2747	6411	6	10557	3167	7390
5	7615	2285	5331	5	8779	2634	6145
4	6072	1822	4251	4	7000	2100	4900
3	4579	1374	3205	3	5279	1584	3695
2	3036	911	2125	2	3500	1050	2450
1	257	77	180	1	1779	534	1245