

(A.I.B.P.A.R.C.)

C/O BANK OF INDIA OFFICERS' ASSOCIATION (EASTERN INDIA BRANCHES)

BANK OF INDIA, KOLKATA MAIN BRANCH

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Circular No. 93/18

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(For circulation among all the members of the Managing Committee as well as the Governing Council of AIBPARC, Special Invitees, State Secretaries and Advisors of AIBPARC.)

Dear Comrade,

Sub : MEDICAL INSURANCE SCHEME FOR EMPLOYEES/OFFICERS AND RETIREES

We reproduce hereunder the text of UFBU letter dated 02.11.2018 on above subject to IBA. This is for information of members.

With best wishes,

(SUPRITA SARKAR) GENERAL SECRETARY

LETTER No. UFBU/2018/13

Sr. Advisor- HR & IR, Indian Banks' Association Mumbai

Dear Sir,

This has reference to our meetings and discussions on the above issue. We also refer to our letters resting with you in this regard.

In view of the steep hike in the premium rates quoted by UIIC, we had detailed discussion in the matter.

While we are happy that due to the joint efforts of both IBA and UFBU, the policies have been renewed and some reduction in premium rates has also been secured to the benefit of the Bank particularly in favour of the retirees.

But there are issues which need to be pursued as they have not been addressed in the process.

Before that, we would like to express our view that while bilateral discussions were held for taking up the matter with UIIC, after the response was received from UIIC, UFBU has not been informed of the same as to how IBA was proceeding and this needs to be kept in mind for future.

Since the Medical insurance Scheme is a part of our Bipartite Settlement/Joint Note, changes made in the Scheme under the renewed Polciy for 2018-19 also needs to be duly incorporated Settlement/Joint Note. An MoU needs to be signed in this regard.

We feel that the following issues have not been addressed or resolved:

1. Common date for both the policies to avoid the present gap.

2. No option has been given to the retirees as suggested by us

3. Under Super Top Up facility also, no flexibility has been given

4. The additional premium for Domiciliary treatment is much more than the cover of Rs. 30,000 and Rs. 40,000. This looks unfair, illogical and vindictive on the part of UIIC. Matter needs taken up with UIIC.

5. Our suggestion for lesser premium rate for single beneficiary like family pensioners, etc. has been ignored.

We have been suggesting that imposition of GST on the premium paid on medical insurance policy needs to be withdrawn in all fairness. IBA should take up the issue with the appro authorities.

Since the premium on renewal is quoted by the UIIC based on claims reimbursed and ICR, we have to build up a mechanism from IBA/Banks' side to cross-check this aspect as Banks ha access to such information as of now except what is being told to us by UIIC. Some mechanism like actuarial workout by some experts from IBA side is advisable so that any apprehension regard is ruled out.

It is also observed some of the Banks have introduced Group Medical insurance Policy for their customers and the premium thereon is seen to be extremely competitive as compared premium rates quoted to IBA. Interestingly, some of these policies are inclusive of the benefit of domiciliary treatment coverage also. Hence, this needs to be seriously examined as to we rates quoted for IBA Policy is on the higher side.

We have also been suggesting that in view of the increasing rate of premium year after year, the Scheme is becoming unreachable and unaffordable for many retirees especially for pensioners, single beneficiaries, retired substaff and part time employees, etc. and hence IBA should consider advising the Banks to bear the cost of the premium or atleast a major portion premium so that the benefit of the scheme is accessible to the retirees.

Our other suggestions made in our earlier meetings for negotiations with UIIC may be kept in view while the issue is pursued further with UIIC. Thanking you,

Sd/-(SANJEEV K. BANDLISH) CONVENOR Date: 02-11-2018