राजीव पाण्डेय
कार्यपालक निदेशक (मानव संसाधन)
RAJIV PANDEY
Executive Director (HR)

स्टील अथॉरिटी ऑफ इण्डिया लिमिटेड
STEEL AUTHORITY OF INDIA LIMITED

भारत स्टील
Bharat Steel
Conference-cum-Exhibition
16-17 April, 2026
Bharat Mandapam, New Delhi

No.HR/ITB&Med./Mediclaim/2026-27
06th July, 2026

To: All Heads of HR
SAIL - Plants/Units

Subject: SAIL Mediclaim Scheme 2026-27

Respected Madam/Sir,

1. The **SAIL Mediclaim Scheme 2026-27** has been renewed for a period of one year starting from 11.07.2026 upto 10.07.2027 with **M/s New India Assurance Co. Ltd. (NIA)**. The approved **SAIL Mediclaim Scheme 2026-27** is enclosed at **Annexure-I**.

2. The IPD/OPD benefits under SAIL Mediclaim Scheme 2026-27 shall be as under:

   a. Hospitalization coverage **(IPD)** of Rs. **4.00 lakhs per member** with clubbing facility under Hospitalization between the Mediclaim member and his/her spouse, for all members, irrespective of their age.

   b. The **OPD coverage of Rs. 4,000/- per member** (with no clubbing facility), for members below 70 years of age as on 11.07.2026.

   c. The **OPD coverage of Rs. 8,000/- per member** (with no clubbing facility), for members of age between 70 years to below 80 years as on 11.07.2026.

   d. The **OPD coverage of Rs. 16,000/- per member** (with no clubbing facility), for members 80 years of age & above as on 11.07.2026.

3. Other salient features of the SAIL Mediclaim Scheme 2026-27 are as under:

   a. A **Corporate/Miscellaneous Buffer of Rs. 10 crore** has been introduced which shall be applicable only for treatment of pre-defined critical diseases. Post exhaustion of Basic Sum Insured, Super top-up shall be utilized first and then Corporate Buffer.

स्टील अथॉरिटी ऑफ इण्डिया लिमिटेड, इस्पात भवन, लोधी रोड, नई दिल्ली-110003 दूरभाष : (011) 2436 5633 ई-मेल : rajiv.pandey@sail.in
Steel Authority of India Limited, Ispat Bhawan, Lodhi Road, New Delhi-110003 Phone : (011) 2436 5633 E-mail : rajiv.pandey@sail.in
PAN No. : AAACS7062F Corporate Identity No. : L27109DL1973GOI006454

b. Disbursement will be on first come first serve basis till exhaustion of Corporate Buffer. Other modalities have been detailed at clause 9.0 of **Annexure I**.

c. In case of **members (including Spouse) separated in E-7 & above grade**, such members shall have an option to opt for room rent with ceiling of 2.5%, 2% and 1.5% respectively [depending upon location as mentioned at clause 10.1 (a) of Annexure I] subject to fulfillment of other conditions. However, additional premium to be charged by insurer for said benefit shall be borne completely by the member as an optional facility.

d. **Option of Super top-up facility (Rs. 2 lakhs-Rs. 50 lakhs)** for members is available. The cost of such Super top-up facility shall be borne by the respective member in case he/she wishes to opt for such facility.

e. Members aged 80 years and above required to pay a token amount of Rs. 100/- per member as enrolment charges.

f. All retiring employees seeking fresh enrolment in the SAIL Medical scheme shall be required to pay the premium on pro-rata basis.

g. Gap cases enrolment shall be made on payment of premium which shall be double of the premium to be charged from regular member as per their age group (excluding members with age 80 years & above). In other words, if renewal premium amount per member for a particular age group is 'A', then for a Gap case enrolment in same age group, premium amount for concerned member shall be '2A'. Premium amount of member of 80 years & above age enrolling as Gap case shall be Rs. 100/- per member.

h. Continuation of tele-consultation and e-pharmacy services.

4. It is pertinent to mention that, despite the prevailing trend of rising medical inflation and increasing healthcare costs, improvement have been made in Policy (like enhancement of Corporate Buffer, increase in limits of targeted therapy for cancer patients).The share of premium payable by Mediclaim members under the SAIL Mediclaim Scheme for the policy year 2026–27 is **lower** than that of the previous policy year.

5. This reflects SAIL's sustained efforts to optimize the insurance premium through a transparent and competitive procurement process, thereby minimizing the financial burden on beneficiaries while ensuring continuity of comprehensive medical coverage.

6. M/s NIA has engaged M/s MD India Health Insurance TPA Pvt. Ltd. as the Third Party Administrator (TPA) to administer the SAIL Mediclaim Scheme for 2026-27. All the claims under the scheme shall be processed and settled by M/s MD India Health Insurance Pvt. Ltd.

6/7

7. The premium payable for renewal of membership and rates for the Super Top-up Policy under the SAIL Mediclaim Scheme 2026-27, for various age categories is detailed in **Annexure-II**.

8. Members who were enrolled in the SAIL Mediclaim Scheme 2025-26 are eligible to renew their membership under the Scheme for the year 2026-27.

9. Enrolment of gap cases shall be done in offline mode at the respective Plant/Unit level from where the ex-employee has separated as is being done in the case of fresh enrolments every month. The data of such gap cases has to be uploaded by the IRPs of the respective Plants/Units in SAIL Mediclaim Portal to generate their MIN and complete their enrolment.

10. The following additional provisions shall continue for the year 2026-27 also:

    a. Deployment of a cutting-edge technology platform and/ or Web-portal that will integrate all the processes from Premium collection, enrolment to the delivery of service. The Web-portal shall provide details of the claim on a live (Real-time basis) including pre-defined periodic reports. The retirees would also be able to review their personal policy details on the platform, have access to their membership card, and also find out details of all network hospitals and healthcare service providers. Provision is also there for ex-employees to submit claim pre-authorization, monitor claim settlement status and update personal details on the mobile/web platform.

    b. M/s NIA shall ensure that Help-desks are set-up in all major locations of SAIL and also a 24x7 help-line for the Mediclaim members.

    c. Periodic online surveys and members' feedback may be undertaken to ensure that services are reviewed continuously for making necessary improvements. Reports may be shared with SAIL on regular basis preferably on Monthly/ Quarterly basis.

    d. M/s NIA shall undertake detailed analysis on year-on-year basis for IPD/ OPD (separately) highlighting the health risk pattern emerging form the trends and designing the Health Management Programs for addressing those risks.

11. SAIL has made arrangements for e-Payment of premium for its Mediclaim members through State Bank of India. A brief on the premium payment facility with steps involved for making transactions will be made available at SAIL's website. **The payment facility for renewal will be open upto 10.08.2026.**

12. A copy of the comprehensive brief of the SAIL Mediclaim Scheme 26-27 and other modalities is enclosed at **Annexure-III** for information of members.

13. It is requested that necessary instructions/documents may be furnished to the respective Plant/Unit Chief of Communications/PR to ensure wider coverage in the local press/other modes of information/communication. This in turn will ensure that the communication reaches the stake holders in time to renew their policy.

14. The support of HR collective is solicited in ensuring timely and smooth completion of the renewal process of mediclaim policy for SAIL's ex-employees (including their spouses).

This has the approval of Competent Authority.

Yours sincerely,

7/6/2

(Rajiv Pandey)
Executive Director (HR)

Encl: As above

SAIL MEDICLAIM SCHEME (2026-27)

1.0 OBJECTIVE OF THE SCHEME:

To extend Medical Benefits to ex-employees of SAIL and their spouses

2.0 PERSONS COVERED:

a. Retired employees of SAIL and their spouses.
b. The employees who have taken Voluntary Retirement (VR) and their spouses.
c. The employees who cease to be in employment on account of permanent total disablement and their spouses.
d. The spouse of an employee who dies in service.
e. Employees who resign from the Company at the age of 57 or above and their spouses.

Members: This scheme is optional and those Ex-employees and their spouses who opt for this scheme, are referred to as "Members". For the purpose of this Mediclaim Scheme, the ex-employee and his/her spouse, are to be treated as two distinct members.

Apart from Fresh Enrolments (employees retiring & their spouses) during the Policy period (2026-27), the persons who were members of SAIL Mediclaim Scheme during the immediately preceding policy period, are eligible to renew membership under the Scheme for the concerned period.

3.0 VALIDITY OF THE SCHEME

SAIL Mediclaim Scheme (2026-27) shall be valid for a period of one year. The Contract shall take effect from 11th July, 2026 (0000 Hrs IST) and Premium Offer shall remain valid up to 10th July, 2027 (2400 Hrs IST). SAIL, however, reserves the right to extend the Contract for a further period of 3-months from 11th July, 2027 to 10th October, 2027, on the same Terms and Conditions (including re-instatement of full benefits) & applicable (pro-rata) premium.

4.0 POLICY COVERAGE:

4.1 The policy covers the following:

(i) **IPD (Hospitalization) Benefits:** Rs. 4.0 lakh per member per policy period with clubbing (floater) facility under hospitalization with his/her spouse which means that hospitalization benefit of Rs. 4.0 lakhs per member can be clubbed between the Mediclaim members & their spouses (maximum clubbed limit Rs. 8.0 lakhs per policy period). The benefit would be in the form of reimbursement of hospitalization or cashless treatment within the prescribed limits under the policy for illness/diseases contracted/injury sustained by the member.

(ii) **OPD Benefits:** Benefits under the policy for illness/diseases contracted/injury sustained by the member
   a. Rs.4,000/- per member, for members below 70 years of age, as on the date of beginning of Policy period.
   b. Rs.8,000/- per member, for members of 70 years and below 80 years age, as on the date of beginning of Policy period.
   c. Rs.16,000/- per member, for members 80 years of age & above, as on the date of beginning of Policy period.

6/7

Note: Unlike IPD facility, the OPD facility cannot be clubbed between the member and his/her spouse.

(iii) In the event of any claim becoming admissible under the policy, the Insurance Company will pay to the member (Reimbursement)/Hospital (For Cashless Treatment), the amount of such expenses as reasonably and necessarily incurred anywhere in India.

(iv) The retiring employees including their spouses who opt for Mediclaim membership will be assigned unique Identification numbers by the respective Plants/Units of SAIL. These unique Identification numbers are called Mediclaim Index Numbers (MIN). The system will continue to facilitate the smooth functioning of the scheme.

5.0 DEFINITIONS:

a. **Hospital/Nursing Home** means any institution in India established for Indoor care and treatment of sickness and injuries and which has been registered either as a Hospital or Nursing Home with the local authorities and is under the Supervision of a registered and qualified Medical Practitioner.

b. For the purpose of OPD treatment, "Hospital" shall mean:
   i. A Government Hospital;
   ii. Dispensaries/Clinics run by local Government Authorities/Municipalities;
   iii. SAIL approved Hospitals/Nursing Homes;
   iv. Hospitals/Nursing Homes on the cashless panel of the Insurer/TPA prevailing during the insurance period;
   v. Branches/Franchisees of major renowned chains of Hospitals/Diagnostic centres namely Apollo, Max, Fortis, Sankara Nethralaya, Centre for Sight, etc;
   vi. Ispat Cooperative Super Specialty Hospital, Sonarpur, Kolkata;
   vii. Hospitals/Nursing homes approved under CGHS or those accredited by NABH.

   Note: *The term "Hospital" shall not include an establishment which is a place of rest, a place for the aged, a rehabilitation centre for drug addicts or alcoholic, a hotel or a similar place.*

c. **HOSPITALIZATION (IPD):** Hospitalization facility can be availed from any Hospital or Registered Nursing Home in India. However, the Mediclaim member can avail Cashless Facility under Hospitalization, only in Hospitals, having 50 beds or above, which are empanelled by the Insurance Company for the purpose, including SAIL Hospitals.

   However, this minimum Bed criteria of 50 Beds, shall not apply to SAIL Hospitals at its Mines and Single specialty Eye Care Hospitals, for empanelment of Hospitals for Cashless treatment for eye diseases, by the Insurance Company.

d. **OPD TREATMENT:** OPD means treatment taken as an out-patient in any Hospital/Nursing Home/Diagnostic Centre as mentioned at Para 5b above. The Charges incurred for treatment taken from Registered Medical Practitioners or other than Hospitals/Nursing Homes/Diagnostic Centres as mentioned at Para 5b above, will not be reimbursed. The Medicine should be prescribed by the treating doctors on the letter heads of the hospitals covered under Para 5b above. The OPD Claim amount will not be reimbursed, if the treatment is taken from a medical practitioner privately even if he/she is attached to any of the approved hospitals for OPD treatment

e. **Claim Settlement** – The insurer has to ensure that the claims under SAIL Mediclaim Scheme are settled and the recommended amount shall be paid within 15 days of submission of all claim documents by the members/their representatives.

f. **MEDICAL PRACTITIONER**: Means a person who holds a degree/diploma of a recognized institution and is registered by Medical Council of respective State of India. The term Medical Practitioner would include Physician, Specialist and Surgeon.

6/7

g. **QUALIFIED NURSE**: Means a person who holds a certificate of a recognized Nursing Council and who is employed on recommendations of the attending Medical Practitioners.

6.0 HOSPITALISATION BENEFIT:

6.1 **Reimbursement:** Reimbursement of actual charges upto Rs. 4,00,000/- (Rupees Four Lakhs only) per member per policy period (with clubbing facility between ex-employee & spouse maximum with clubbed limit Rs. 8.0 lakhs per policy period) is permissible. Claim under hospitalization benefit shall be admissible only when the patient is admitted in a hospital for a minimum period of 24 hours. However, when treatment/surgeries such as Dialysis, Chemotherapy, Radiotherapy, Opthalmic Surgeries (Cataract/Glaucoma Surgeries etc.), Lithotripsy, Laproscopic surgeries, Microsurgery etc., is taken in the Hospital/Nursing Home and the insured is discharged on the same day, the treatment will be considered to be taken under Hospitalisation Benefit. Indicative list of such approved Day Care procedures is also enclosed.

Hospitalization expenses for Ayurvedic/Homeopathic/Unani Treatment are admissible only when the treatment is taken in a Government Hospital/Medical College Hospital.

6.2 **Pre-hospitalization:** Relevant medical expenses incurred during the policy period, up to 30 days prior to the hospitalization specifically for that particular disease/illness, for which hospitalization has taken place, shall be considered as part of claim under hospitalization. However, during pre-hospitalization period, medicines prescribed under regular OPD treatment for diseases/illness not related to the said hospitalization, shall not be reimbursable under hospitalization claims.

6.3 **Post-hospitalization:** Relevant medical expenses incurred during the policy period, up to 60 days after the hospitalization, specifically for that particular disease/illness for which hospitalization had taken place, shall be considered as part of claim under hospitalization. However, during post-hospitalization period, medicines prescribed under regular OPD treatment for diseases/ illness not related to the said hospitalization, shall not be reimbursable under hospitalization claims. In case Hospitalization treatment is availed from a SAIL Hospital, post hospitalization treatment facility can only be availed from SAIL Hospitals or a Network Hospital/Hospitals empanelled by the Insurance Company and the TPA.

6.4 **Cashless:** Insurance Company/TPA shall offer Cashless Service to the Insured, where treatment can be obtained without payment, subject to the terms and conditions of the policy, from empanelled hospitals. Insurance Company/ TPA to settle the hospital bills directly on behalf of Insured member.

7.0 OPD BENEFIT:

7.1 Under no circumstances, the clubbing (Floater basis) of individual OPD limits of Rs. 4,000/-, Rs. 8,000/- or Rs. 16,000/- (as the case may be) per head per policy period, will be permitted.

7.2 The members are not required to pay expenses for OPD treatment availed in SAIL Plant Hospitals/Dispensaries.

7.3 Dental Treatment can also be availed of within the existing limit prescribed under OPD treatment. Cost of dentures will not be reimbursed.

7.4 Ophthalmic consultations for refractory error will be covered under OPD Benefits only.

7.5 Cost of spectacles/contact lenses shall not be reimbursed under the SAIL Mediclaim Scheme.

7.6 OPD Claims to be submitted by the Mediclaim member to the Insurance Company/TPA at any time but necessarily when the expenses exceed Rs. 2000 per person per policy period or within 90 days from the date of completion of the treatment, whichever is earlier.

7.7 In case of treatment of ear, cost of hearing aid is not reimbursable under the SAIL Mediclaim Scheme.

6/7

8.0 MANDATORY CLAIM INTIMATION/ SUBMISSION:

8.1 **Claim Intimation for Hospitalization treatment on Cashless/Reimbursement basis:**

i) The Mediclaim member shall be required to inform/intimate in writing the Insurance Agency/TPA at least 48 hours prior to any elective/planned Hospitalization/Admission.

ii) In case of Emergency Admission/Hospitalization, the Insurance Company/TPA, is to be informed by the Mediclaim member, in writing within 24 hrs of such hospitalization.

iii) The Claim Intimation by the Mediclaiqm member is mandatory for both Cashless & Reimbursement claims.

iv) Claim Intimation can be sent via Letter/Email/Online (Mediclaim Webpage)/ Whatsapp (universal no. to be provided by Insurer/ TPA)/Fax/Personally delivered at TPA offices.

The above modalities must be adhered to so that the claims are not rejected

8.2 **Claim Submission for Hospitalization treatment on Cashless/Reimbursement basis**

i) The reimbursement claims with respect to IPD/Hospitalization to be submitted to the TPA within 30 days from the Date of Discharge from the Hospital.

ii) The reimbursement claims pertaining to Post Hospitalization (IPD treatment), are to be submitted to the TPA within 30 days after the completion of permissible post Hospitalization treatment period of 60 days.

The above must be adhered to so that the claims are not rejected.

8.3 SAIL Hospitals shall not lodge any claims with Insurance Company/TPA for the OPD and IPD treatment extended to Mediclaim members under the SAIL Mediclaim Scheme.

9.0 Corporate/Miscellaneous Buffer of Rs. 10 crore

9.1 **The Corporate /Miscellaneous Buffer shall be distributed as under:**

Grade-wise	Corporate/Miscellaneous Buffer (Rs. In crore)
All Ex-employees superannuated in the grade upto E-6 and their spouse.	8
Ex-employees superannuated in the grade E-7 & above and their spouse.	2

9.2 **Modalities for Board-Level Equivalent Members**

(i) Board level equivalent mediclaim members (including Chief Executive Officers) shall be given facilities on actual basis except important exclusions as per Clause 11.0 of the existing Scheme .

(ii) The Corporate/Miscellaneous Buffer shall cover items which are generally not covered, and also other charges beyond limits/cappings assigned on the Scheme and shall further cover Reasonable and Customary charges incurred during hospitalization. The Claim amount would first be settled from the procedure-wise cappings under the Basic Sum Insured (Mediclaim scheme) and the remaining claim amount would be settled from the Corporate/Miscellaneous Buffer.

(iii) Corporate/Miscellaneous Buffer for the purpose of additional amount required under (ii) only, shall be activated irrespective of the status of exhaustion of the overall Basic Sum Insured amount. (Rs. 8 lakh on floater basis)

(iv) This Buffer shall not be restricted to identified diseases/procedures/packages/ Rs. 10 lakh ceiling (as per Corporate/Miscellaneous Buffer).

(v) Room rent shall be limited to single AC non-deluxe room.

9.3 **Modalities for All others**

(i) Post exhaustion of BSI, Super top-up shall be utilized first and then Corporate/ Miscellaneous Buffer.

(ii) Corporate/Miscellaneous Buffer shall be applicable only for treatment of pre-defined critical diseases which are enclosed. All other conditions of base policy shall remain applicable for Corporate /Miscellaneous Buffer.

(iii) Corporate/Miscellaneous Buffer utilization shall be automatically triggered.

(iv) Corporate/Miscellaneous Buffer coverage for a member shall be upto Rs. 10 lakh. In case of both members (self and spouse together), total cover shall be restricted to Rs. 10 lakh only. Corporate/Miscellaneous Buffer can be utilized multiple times till exhaustion of individual limit or exhaution of overall limit of Corporate/Miscellaneous Buffer, whichever is earlier.

9.4 **Common for all Mediclaim Members**

(i) No additional payment shall be disbursed after exhaustion of Corporate /Miscellaneous Buffer.

(ii) Corporate /Miscellaneous Buffer Buffer shall not be utilised for OPD cases.

(iii) In all cases, applicable ceilings on various procedures/ treatments as specified in Base policy shall remain unchanged.

(iv) Disbursement will be on first come first serve basis till exhaustion of Corporate /Miscellaneous Buffer.

10.0 Cappings in Mediclaim Scheme:

10.1 Cappings in the area of room rent charges, associated procedure charges, investigation charges, the Implants/Stents used under various procedures like cataract surgery, coronary angioplasty, joint related disorder requiring knee/hip joint replacement excluding the associated procedure charges under the Scheme will be as given below:

a) Maximum entitlement of room to be restricted to:

i. For Metro Cities (Hyderabad, Delhi-NCR, Bangalore, Mumbai, Chennai, Kolkata) - Ceiling of 1.5% (i.e. Rs. 6000/-) of the sum insured per member or a single AC non-deluxe room per day, whichever is lower,

ii. For non-metro cities which are State capitals - Ceiling of 1.25 % (i.e. Rs. 5000/-) of the sum insured per member or a single AC non-deluxe room per day, whichever is lower,

iii. For rest of the country – Ceiling of 1.0% (i.e. Rs. 4000/-) of the sum insured per member or a single AC non-deluxe room per day, whichever is lower;

iv. There shall be no ceiling for the ICU and ICCU charges.
In case a member goes for a higher category room, the consultation charges/investigation charges/procedural charges/surgical Charges/package rates etc. shall be limited to actuals or as per their corresponding rates for single AC non-deluxe room of the concerned hospital, whichever is lower.

b) In case of members (including Spouse) separated in E-7 & above grade, such members shall have an option to opt for room rent with ceiling of 2.5%, 2% and 1.5% respectively [depending upon location as mentioned at (a) above] subject to fulfillment of other conditions. However, additional premium to be charged by insurer for said benefit shall be borne completely by the member as an optional facility.

c) The rates for cataract surgery procedure would be limited to Rs 30,000/- and shall include the cost of IOL implant. It should be mandatory for the operating surgeon of all hospitals to attach the empty IOL sticker, bearing the signature and stamp of the operating surgeon on it in support of the type of IOL used along with its batch number. In case the same is not followed, the claim with regards to IOL implant may be rejected. In the case of Hospitals where IOL implant is part of the package rates for Cataract Surgery Procedure, the total package cost may be reimbursed subject to the limit of Rs. 30,000/- for one eye.

d) The Prices of coronary stents as fixed by National Pharmaceutical Pricing Authority (NPPA), Government of India, from time to time shall be applicable. However, the following overall ceilings shall prevail:

S. No.	Name of Drug Eluting Stent / Bare Metal Stent	Ceiling Rate
1.	Cypher Stent	Rs. 95,000 + GST
2.	Taxus Stent	Rs. 67,300 + GST
3.	Element Stent	Rs. 95,000 + GST
4.	Endeavor	Rs. 85,000 + GST
5.	Xience V EECSS	Rs. 95,000 + GST
6.	Yukon choice	Rs. 55,000 + GST
7.	Pronova	Rs. 50,000 + GST
8.	Supralimus	Rs. 55,000 + GST
9.	Bare Metal Stent	Rs. 45,000 (all inclusive)

Ceiling rates for Coronary Stents other than the Stents mentioned above shall be as per actuals or Rs. 95,000/- plus GST, whichever is lower.

e) A maximum of three Coronary Stents shall be permitted on the advice of the specialist, of which not more than two shall be Drug Eluting Stents (DES).

It is essential for the hospital to quote the batch number when a Coronary Stent of any type (ordinary metal/Drug Eluting Stent) is implanted in the case of a beneficiary. In addition to this, the outer pouch of the Stent packet along with the sticker on it on which the details of the stent are printed shall also be enclosed with the Hospital bill for claiming reimbursement. In case the hospital has not given the batch number and/or outer pouch of the stents in a particular case, the claim of the implant may be rejected by the Insurance Company.

f) The rates for Knee replacement procedure would be limited to Rs. 2,25,000/- plus GST (for one knee) and shall include the cost of Knee implant. However, there is no ceiling on the cost of different types of Knee implant.

g) Hip implants shall be as per the actual rates or the rates as mentioned below, whichever is lower:
   (i) Ceiling rate for different types of Hip implant to be Rs 1,00,000/- plus GST (including cost of Bone cement).

h) In addition to the aforementioned cappings on Implants/Stents, the following cappings on procedures/ packages, as given below, shall also be applicable:

S. No.	Disease/ Treatment	Cappings*
1.	Hernia repair including Hernia Mesh	Rs. 80,000
2.	Cholecystectomy	Rs. 75,000
3.	Haemorroidectomy	Rs. 75,000
4.	Appendicetomy	Rs. 50,000
5.	Hysterectomy	Rs. 80,000
6.	Coronary Angiogram/ Angiography	Rs. 25,000
7.	Tonsillectomy	Rs. 15,000
8.	Procedure/ package rate for Cataract on one eye (including cost of IOL)	Rs. 30,000
9.	Knee Implantation-unilateral (including cost of implant)	Rs. 2,25,000
10.	Treatment for Macular Degeneration with Injection Avastin/Lucentis/Macugen/Eylea (generic name Aflibercept)/ Accentrix/ Razumab during the Policy period.	Rs. 1,00,000

**Plus GST, as applicable*

The above cappings/ ceilings are applicable on 'per Hospitalization' basis and shall be applicable only for cases where there are no complications/multiple diseases. Moreover,

6/7

Pre-Hospitalization & Post-Hospitalization claims pertaining to the above treatments shall not come under the purview of the aforementioned cappings.

i) The Medical Devices (Amendment) Rules, 2020, as notified by Ministry of Health & Family Welfare vide Gazette Notification vide GSR 102E dated 11.2.2020, along with amendments issued from time to time, with reference to implant have to be scrupulously followed. Reference is also invited to the order dated 30th March, 2022 issued by National Pharmaceutical Pricing Authority (NPPA) with respect to ceiling price of Coronary Stents along with amendments issued from time to time, have to be scrupulously followed.

11.0 IMPORTANT EXCLUSIONS: Under the SAIL Mediclaim Scheme, the Insurance Company shall not be liable to make any payment in respect of any expenses whatsoever incurred by the insured person in connection with the following:

i) Any Disease/complication caused due to alcohol intake.
ii) Any disease/injury caused by War/Nuclear Weapons/Radiations/Breach of Criminal law.
iii) Circumcision, cosmetic or Plastic Surgery unless necessitated by an accident or as a part of any disease/illness.
iv) Cost of dentures, hearing aid, spectacles, cost of glasses/contact lenses etc.
v) Convalescence, general debility, "Run-down" condition or rest cure, congenital diseases or defects, sterility, venereal diseases, intentional self injury and use of intoxicating drugs, except ARMD.
vi) The Hospitalization charges in which Radiological/Laboratory investigations/other diagnostic studies have been carried out which are not consistent with or incidental to the diagnosis of treatment of positive existence or presence of any ailment, sickness or injury for which confinement at any Hospital/ Nursing Home, has taken place.
vii) Expenses on vitamins and tonics unless forming part of treatment for injury or disease as certified by the attending physician.
viii) Voluntary medical termination of pregnancy during first 12 weeks of conception.
ix) Naturopathy Treatment.
x) External and/or durable Medical/Non-Medical equipment of any kind used for diagnosis and/or treatment including CPAP, CAPD, Infusion pump etc. Ambulatory devices, i.e. walker, crutches, belts, collars, caps, splints, slings, braces, stockings etc., of any kind. Diabetic foot wear, Glucometer/Thermometer and similar related items etc., and also any medical equipment which subsequently used at home etc.
xi) Any kind of service charges, attendant food charges, surcharges, admission fees/ registration charges & Non-Medical expenses levied by the Hospital.
xii) Cytotron Therapy & Ozone Therapy
xiii) Preventive Health Check-ups from OPD as well as IPD benefit
xiv) Enhanced External Counter Pulsation Therapy (EECP)
xv) Robotic Surgery/Robotically assisted surgery (other than critical surgeries of Cancer/Neurological Procedures where precision is required)
xvi) Any unproven therapy
xvii) Ayurvedic treatment if it is not an active line of treatment.
xviii) Rejuvenation therapy/Massage/Panchkarma
xix) Stem cell Transplantation except Haemopoetic Stem Cell Transplant/Bone Marrow Transplant

12.0 Misuse of Scheme: Stringent action to be taken against individuals found to be misusing the system/guilty of any fraudulent activity, viz. debarring member from Mediclaim membership, blacklisting hospitals, initiating suitable legal action etc., as deemed fit by SAIL Management.

13.0 Premium Sharing :
Member's share in the premium shall be collected on an annual basis. Employees desirous of enrolment under the scheme on superannuation during the year shall be required to pay a fixed percentage of the total premium which shall be reduced proportionately based on the number of days they are covered during that year.

6/7

14.0 Fresh Enrolments: Though, a retiring employee can deposit the premium contribution within one month from the date of his/her retirement, the member would get coverage prospectively, from the date of payment of premium contribution.

15.0 Super Top-up Facility: Facility of super Top Up will be there for willing ex-employees on payment of full premium on the existing Terms & Conditions of enrolment in SAIL Mediclaim Scheme. The cost of such super Top-up facility will have to be borne by the respective member/spouse in case he/she wishes to opt for such facility.

******

INDICATIVE LIST OF DAY CARE PROCEDURES

S.No.	Day Care Procedures
1	Antral wash under LA
2	Arthroscopic therapy
3	Aspiration of an internal abscess under ultrasound guidance
4	Aspiration of hematoma
5	Blood transfusion for recipient
6	Brochoscopic treatment of bleeding lesion
7	Brochoscopic treatment of fistula /stenting
8	Bronchoalveolar lavage & biopsy
9	Carotid angioplasty
10	Carpal tunnel decompression
11	Cataract surgery
12	Chalazion removal (Eye)
13	Chemotherapy (including Oral Chemotherapy)
14	Closed reduction on fracture, luxation or epiphyseolysis with osetosynthesis
15	Coronary Angiography
16	Coronary Angioplasty (PTCA)
17	Corrective surgery for blepharoptosis
18	Corrective surgery for entropion & ectropion
19	Dental Surgery (following Accident)
20	Destruction of the diseases tissue of the skin and subcutaneous tissue
21	Dilatation and curettage
22	Dilatation of digestive tract strictures
23	Direct Laryngoscopy with or without biopsy
24	Endoscopic decompression of colon
25	Endoscopic Drainage of Pseudo-pancreatic cyst
26	Endoscopic Foreign Body Removal - Trachea /- pharynx-larynx/ bronchus
27	Endoscopic Foreign Body Removal -Oesophagus/stomach /rectum.
28	Endoscopic Gastrostomy
29	Endoscopic ligation/banding
30	Endoscopic placement/removal of stents
31	Endoscopic polypectomy
32	Endoscopic ultrasonography and biopsy
33	Epididymectomy
34	Excision and destruction of lingual tonsil
35	Excision and destruction of the diseased hard and soft palate
36	Excision of breast lump /Fibro adenoma
37	Excision of dupuytren's contracture
38	Excision of eye lid granuloma
39	Excision of granuloma
40	Excision of lachrymal cyst
41	Excision of nose granuloma
42	Excision of pterigium
43	External incision and drainage in the region of the mouth, jaw and face
44	Foreign body removal from conjunctiva
45	Foreign body removal from cornea

S.No.	Day Care Procedures
46	Foreign body removal from lens of the eye
47	Foreign body removal from nose
48	Foreign body removal from orbit and eye ball
49	Foreign body removal from posterior chamber of eye
50	Free skin transportation recipient site
51	Free skin transportation, donor site
52	Glaucoma Surgery
53	Glossectomy
54	Haemodialysis/Peritoneal Dialysis
55	Hernioplasty
56	Herniorrhaphy
57	Hydrocele surgery
58	Hysterectomy
59	Incision and Drainage
60	Incision and excision of tissue in the perianal region
61	Incision and lancing of the salivary gland and a salivary duct
62	Incision of bone, septic and aseptic
63	Incision of cornea
64	Incision of diseased eye lids
65	Incision of hard and soft palate
66	Incision of lachrymal glands
67	Incision of mastoid process & middle ear
68	Incision of pilonidal sinus
69	Incision, excision and destruction in the mouth
70	Incision, excision, destruction of the diseased tissue of the tongue
71	Incision/Drainage of breast abscess
72	Insertion of filter in inferior vena cava
73	Insertion of gel foam in artery or vein
74	Laparoscopic appendicectomy
75	Laparoscopic cholecystectomy
76	Laproscopic Therapeutic Surgeries
77	Lithotripsy
78	Local excision of diseased tissue of skin and subcutaneous tissue
79	Mastoidectomy
80	Myomectomies
81	Myringoplasty /Tympanoplasty
82	Myringotomy
83	Myringotomy with Grommet insertion
84	Nissen fundoplication for Hiatus Hernia /Gastro esophageal reflux disease
85	Operation on canthus & epicanthus
86	Operations on the nipple
87	Orchidectomy
88	Palatoplasty
89	PCNL (percutaneous nephrolithotomy)
90	PCNS (Percutaneous nephrostomy)
91	Pericardiocentesis
92	Quinsy drainage

S.No.	Day Care Procedures
93	Radiotherapy
94	Reconstruction of a salivary gland and a salivary duct
95	Reconstruction of middle ear
96	Reconstruction of the tongue
97	Reduction of dislocation under GA
98	Reduction of nasal fracture
99	Removal of fracture pins/nails
100	Removal of metal wire
101	Removal of tympanic drain
102	Renal angioplasty
103	Replacement of Gastrostomy tube
104	Resection of a salivary duct
105	Revision of skin plasty
106	Sclerotherapy
107	Simple Oophorectomies
108	Simple restoration of surface continuity of the skin and subcutaneous tissue
109	Sphincterotomy/Fissurectomy
110	Suprapubic cytostomy
111	Surgery for hemoarthrosis/pyoarthrosis
112	Surgery for ligament tear
113	Surgery for meniscus tear
114	Surgery for retinal detachment
115	Surgery to the floor of mouth
116	Surgical debridement of wound
117	Surgical treatment of anal fistula
118	Surgical treatment of hemorrhoids
119	Suture and other operations on tendons and tendon sheath
120	Suturing - CLW -under LA or GA
121	Therapeutic Ascitic Tapping
122	Therapeutic ERCP
123	Therapeutic Joint Aspiration
124	Therapeutic Phlebotomy
125	Therapeutic Pleural Tapping
126	TIPS procedure for portal hypertension
127	Tonsillectomy with Adenoidectomy
128	Tonsillectomy without Adenoidectomy
129	Tran urethral resection of bladder tumor
130	Transoral incision and drainage of pharyngeal abscess
131	True cut Biopsy - breast/- liver/- kidney-Lymph Node/-Pleura/-lung/-Muscle biopsy/-Nerve biopsy/-Synovial biopsy/-Bone/ trephine biopsy/ pericardial biopsy
132	Tumor embolisation
133	TURP (Resection prostate)
134	Use of Immunotherapy/ Hormone therapy/ Targeted therapy etc. for treatment of Cancer (capping of Rs. 2 lakh per member)
135	Varicose vein stripping or ligation

Any other surgeries/procedures agreed to by SAIL, Insurance Company and TPA, requiring less than 24 hours hospitalization will also be considered under Hospitalization.

6/2

List of Critical disesase for utilisation of Corporate Buffer

S.No.	Critical Diseases
1	Alzheimer's and any Terminal Diseases etc.
2	Aplastic anaemia
3	Bacterial Meningitis
4	Benign brain tumour
5	Blindness
6	Blood disorder
7	Bone marrow transplantation
8	Cancer
9	Cardiac Procedures' & Surgeries
10	Chronic Lungs & Brain related including apallic syndrome
11	Coma
12	End stage lung or liver failure
13	Fulminant Hepatitis
14	Heart and Vascular diseases
15	Liver Diseases
16	Loss of limbs
17	Loss of speech
18	Major Accident
19	Major Burns
20	Major head trauma
21	Motor neuron disease with permanent symptoms
22	Multiple sclerosis
23	Organ Transplantations / Surgeries
24	Pandemic (COVID
25	Paralysis-Paraplegia
26	Permanent paralysis of limbs
27	Pneumonia
28	Pulmonary hypertension
29	Renal/kidney Disease
30	Stroke resulting in permanent symptoms
31	Surgery of Aorta

SAIL Mediclaim Scheme 2026-27
(Premium amount)

The premium payable for renewal of membership and rates for the Super Top-up Policy under the SAIL Mediclaim Scheme (2026-27), for various age categories is as detailed below:

a. Premium for single member

(Rs. incl. GST)

Member's Age-Group	Renewal Premium per member	Gap case Premium per member
Below 70 yrs.	9,609	19,218
70 to below 80 yrs.	6,428	12,856
80 yrs. & above	100	100

b. Premium for member with spouse

(Rs. incl. GST)

AGE OF MEDICLAIM MEMBER	AGE OF SPOUSE	TOTAL RENEWAL PREMIUM FOR BOTH MEMBERS	TOTAL GAP CASE PREMIUM FOR BOTH MEMBERS
BELOW 70 YRS	BELOW 70 YRS	19,218/-	38,436/-
	70 TO BELOW 80 YRS.	16,037/-	32,074/-
	80 YRS & ABOVE	9,709/-	19,318/-
70 TO BELOW 80 YRS.	BELOW 70 YRS	16,037/-	32,074/-
	70 TO BELOW 80 YRS.	12,856/-	25,712/-
	80 YRS & ABOVE	6,528/-	12,956/-
80 YRS & ABOVE	BELOW 70 YRS	9,709/-	19,318/-
	70 TO BELOW 80 YRS.	6,528/-	12,956/-
	80 YRS & ABOVE	200/-	200/-

c. The premium rates for the Super Top-up Policy offered by M/s NIA [to be borne completely by member(s)] :

Age of member	Super Top up sum insured (Rs. In Lakhs)	Threshold (Rs. In Lakhs)	Rates (including GST)	
			Member	Member + Spouse
Below 65 years	2	4	6517	NA
65 years& above	2	4	11729	NA
Below 65 years	2	8	NA	9775
65 years& above	2	8	NA	17595

6/7

Age of member	Super Top up sum insured (Rs. In Lakhs)	Threshold (Rs. In Lakhs)	Rates (including GST)	
			Member	Member + Spouse
Below 65 years	5	4	9310	NA
65 years& above	5	4	16756	NA
Below 65 years	5	8	NA	13964
65 years& above	5	8	NA	25135
Below 65 years	10	4	15542	NA
65 years& above	10	4	27978	NA
Below 65 years	10	8	NA	23315
65 years& above	10	8	NA	41966
Below 65 years	15	4	21082	NA
65 years& above	15	4	37947	NA
Below 65 years	15	8	NA	31622
65 years& above	15	8	NA	56920
Below 65 years	20	4	26213	NA
65 years& above	20	4	47183	NA
Below 65 years	20	8	NA	39319
65 years& above	20	8	NA	70775
Below 65 years	30	4	34077	NA
65 years& above	30	4	61338	NA
Below 65 years	30	8	NA	51115
65 years& above	30	8	NA	92008
Below 65 years	40	4	42596	NA
65 years& above	40	4	76674	NA
Below 65 years	40	8	NA	63893
65 years& above	40	8	NA	115010

6/7

Age of member	Super Top up sum insured (Rs. In Lakhs)	Threshold (Rs. In Lakhs)	Rates (including GST)	
			Member	Member + Spouse
Below 65 years	50	4	51116	NA
65 years& above	50	4	92008	NA
Below 65 years	50	8	NA	76672
65 years& above	50	8	NA	138011

d. Optional additional premium per member to be completely borne by the eligible member for availing enhanced room rent with unchanged Basic Sum Insured of Rs. 4 lakh per member (members in E-7 & above grade) : **Rs. 13,254/- (incl. GST)**

Communiqué for Members
Renewal under SAIL Mediclaim Scheme (11th July, 2026 – 10th July, 2027)

Dear Sir/Madam,

SAIL Mediclaim Scheme (2026-27) has been renewed for a period of one year starting from **11.07.2026 to 10.07.2027** with **M/s New India Assurance Co. Ltd. (NIA).**

The OPD/IPD benefits under SAIL Mediclaim Scheme (2026-27) shall be as under:

a) Hospitalization coverage (IPD) of Rs. 4.00 Lakhs per member with clubbing facility between the Mediclaim member and his/her spouse, for all members.
b) The **OPD coverage of Rs. 4,000/-** per member (with no clubbing facility), for members below 70 years of age as on 11.07.2026.
c) The **OPD coverage of Rs. 8,000/-** per member (with no clubbing facility), for members of age between 70 years to 79 years as on 11.07.2026.
d) The **OPD coverage of Rs. 16,000/-** per member (with no clubbing facility), for members 80 years of age & above as on 11.07.2026.

Other salient features of the SAIL Mediclaim Scheme (2026-27) are as under:

a) A Corporate/Miscellaneous Buffer of Rs. 10 crore has been introduced which shall be applicable only for treatment of pre-defined critical diseases. Post exhaustion of Basic Sum Insured, Super top-up shall be utilized first and then Corporate Buffer. Disbursement will be on first come first serve basis till exhaustion of Corporate Buffer. Other modalities have been detailed at clause 9.0 of Annexure I.
b) In case of members (including Spouse) separated in E-7 & above grade, such members shall have an option to opt for room rent with ceiling of 2.5%, 2% and 1.5% respectively [depending upon location as mentioned at clause 10.1 (a) of SAIL Mediclaim Scheme 2026-27] subject to fulfillment of other conditions. However, additional premium to be charged by insurer for said benefit shall be borne completely by the member as an optional facility.
c) Option of Super top-up facility for members. The cost of such Super top-up facility shall be borne by the respective member in case he/she wishes to opt for such facility.
d) Members aged 80 years and above required to pay a token amount of Rs. 100/- per member as enrolment charges.
e) All retiring employees seeking fresh enrolment in the SAIL Medical scheme shall be required to pay the premium on pro-rata basis.
f) Gap cases enrolment shall be made on payment of premium which shall be double of the premium to be charged from regular member as per their age group (excluding members with age 80 years & above).
g) Continuation of tele-consultation and e-pharmacy services.

6/7

M/s NIA has engaged **M/s MD India Health Insurance TPA Pvt. Ltd. as the Third Party Administrator (TPA)** to administer the Scheme for 2026-27. All the claims under the scheme shall be processed and settled by the TPA.

Members who were enrolled in the SAIL Mediclaim Scheme 2025-26 are eligible to renew their membership under the Scheme for the year 2026-27. Fresh enrolments for employees retiring during the Policy period 2026-27 and their spouses shall also be allowed for coverage under SAIL Mediclaim Scheme 2026-27 on payment of pro-rata premium.

In addition to renewals and fresh enrolments during the policy-period, enrolment of the Gap Cases i.e. ex-employees who have failed to renew their membership or have never enrolled under SAIL Mediclaim Scheme after separation from SAIL and those who are otherwise eligible in terms of the coverage criteria provided under the SAIL Mediclaim Scheme 2026-27 shall also be allowed enrollment under the scheme on payment of double of the premium to be charged from regular member as per their age group (excluding members with age 80 years & above).

The premium payable for renewal of membership under the SAIL Mediclaim Scheme (2026-27) for various age categories is as under:

(In Rs. incl. GST)

Member's Age-Group	Renewal Premium per member	Gap case Premium per member
Below 70 yrs.	9,609	19,218
70 to below 80 yrs.	6,428	12,856
80 yrs. & above	100	100

(in Rs. incl. GST)

AGE OF MEDICLAIM MEMBER	AGE OF SPOUSE	TOTAL RENEWAL PREMIUM FOR BOTH MEMBERS	TOTAL GAP CASE PREMIUM FOR BOTH MEMBERS
BELOW 70 YRS	BELOW 70 YRS	19,218/-	38,436/-
	70 TO BELOW 80 YRS.	16,037/-	32,074/-
	80 YRS & ABOVE	9,709/-	19,318/-
70 TO BELOW 80 YRS.	BELOW 70 YRS	16,037/-	32,074/-
	70 TO BELOW 80 YRS.	12,856/-	25,712/-
	80 YRS & ABOVE	6,528/-	12,956/-
80 YRS & ABOVE	BELOW 70 YRS	9,709/-	19,318/-
	70 TO BELOW 80 YRS.	6,528/-	12,956/-
	80 YRS & ABOVE	200/-	200/-

Facility of Super Top Up, add-on insurance facility shall be there for willing ex-employees on payment of full premium on the existing Terms and Conditions of enrolment in SAIL Mediclaim Scheme. The cost of such super Top-up facility will have to be borne by the respective member/spouse in case he/she wishes to opt for such a facility. The premium rates for Super Top-up Policy would be as under:

Age of member	Super Top up sum insured (Rs. In Lakhs)	Threshold (Rs. In Lakhs)	Rates (including GST)	
			Member	Member + Spouse
Below 65 years	2	4	6517	NA
65 years& above	2	4	11729	NA
Below 65 years	2	8	NA	9775
65 years& above	2	8	NA	17595
Below 65 years	5	4	9310	NA
65 years& above	5	4	16756	NA
Below 65 years	5	8	NA	13964
65 years& above	5	8	NA	25135
Below 65 years	10	4	15542	NA
65 years& above	10	4	27978	NA
Below 65 years	10	8	NA	23315
65 years& above	10	8	NA	41966
Below 65 years	15	4	21082	NA
65 years& above	15	4	37947	NA
Below 65 years	15	8	NA	31622
65 years& above	15	8	NA	56920
Below 65 years	20	4	26213	NA
65 years& above	20	4	47183	NA
Below 65 years	20	8	NA	39319

Age of member	Super Top up sum insured (Rs. In Lakhs)	Threshold (Rs. In Lakhs)	Rates (including GST)	
			Member	Member + Spouse
65 years& above	20	8	NA	70775
Below 65 years	30	4	34077	NA
65 years& above	30	4	61338	NA
Below 65 years	30	8	NA	51115
65 years& above	30	8	NA	92008
Below 65 years	40	4	42596	NA
65 years& above	40	4	76674	NA
Below 65 years	40	8	NA	63893
65 years& above	40	8	NA	115010
Below 65 years	50	4	51116	NA
65 years& above	50	4	92008	NA
Below 65 years	50	8	NA	76672
65 years& above	50	8	NA	138011

The details with regard to SAIL Mediclaim Scheme 2026-27 are available in the Mediclaim Booklet which will be circulated to the members through e-mail. The details are also available on the SAIL Website (https://www.sail.co.in) and SAIL Mediclaim Portal (http://sail.mdindia.com). Members are requested to apprise themselves regarding the cappings/ceilings and exclusions before availing Mediclaim facility.

Members are further requested to strictly adhere to the following:

i) Inform/Intimate, in writing to the TPA at least 48 hrs. prior to any elective/planned Hospitalization/Admission.
ii) In case of Emergency Admission/Hospitalization, the TPA must be informed in writing within 24 hrs. of such hospitalization.
iii) Claim intimation to be considered mandatory for both Cashless and Reimbursement claims for IPD.
iv) Claim intimation to be sent via Letter/E-mail/Online (Mediclaim Webpage)/Whatsapp (universal no. to be provided by Insurer/ TPA)/Fax/Personally delivered at TPA offices.
v) Reimbursement claims with respect to IPD must be submitted to the TPA, within 30 days from the Date of Discharge from Hospital.
vi) Reimbursement claims pertaining to Post Hospitalization (IPD) treatment must be submitted to the TPA, within 30 days after the completion of permissible post Hospitalization treatment period of 60 days.

vii) OPD Claims must be submitted to the TPA, at any time but necessarily when the expenses exceed Rs. 2000/- per person per policy period or within 90 days from the date of completion of the treatment, whichever is earlier.

Ex-employees and their spouses who had renewed/enrolled under SAIL Mediclaim Scheme 2025-26 in "BOTH" category and have unfortunately lost any one of the member, shall have to inform their respective Plants/Units IRP for change of their category to SELF or SPOUSE. Such member shall also have an option to delete other member while renewing through Premium Payment Portal.

Payment of Premium for renewal is to be made through Mediclaim payment portal (integrated with SBI e-pay) only. You are requested to refer to the indicative table, and arrive at the premium amount as per the age of the member and spouse.

- If the member is willing to opt for Super Top-up Policy, then full premium towards the Super top-up for the opted sum insured and threshold has to be paid at the time of renewal.
- In case of members (including Spouse) separated in E-7 & above grade, such members shall have an option to opt for higher room rent upon payment of additional premium (refer clause 10.1 (b) of SAIL Mediclaim Scheme 2026-27).

Members are requested to kindly **fill-in all the details correctly**, in the fields provided for the same on the Mediclaim Payment Portal.

For gap case enrolment, eligible ex-employees have to fill up the physical form available on SAIL website, pay the premium through DD/ECS, enclose necessary documents and get the forms submitted at the Plant/Unit of their separation. In absence of necessary documents, enrollment of the member may not be considered.

Your membership for SAIL Mediclaim Scheme 2026-27 will only be activated/ renewed on payment of requisite premium.

Merely payment of premium shall not be construed as RENEWAL of Membership.

Kindly confirm your mediclaim enrolment status, post premium payment, through the mediclaim portal so provided.

Detailed payment procedure is available on SAIL website.

NOTE:

The last date for premium payment and gap case enrolment at respective Plant/Unit is 10th August, 2026.