

FAQs - RBI OPD POLICY FOR PENSIONERS – POLICY YEAR 2026-27

1. What is OPD treatment?

OPD treatment is for patients who do not require hospitalisation. OPD means an Out-Patient Department of a hospital. It is that section of the hospital where patients are provided medical consultations and other allied services.

2. How does an OPD policy function?

- OPD policy takes care of expenses on services like OPD consultations, diagnostics referred by consultants but not leading to in-patient department; pharmacy bills i.e., bills related to medicines, dental treatment, spectacles, hearing aids, etc.
- A member needs to pay the expenses for OPD treatment and then submit a reimbursement claim for the expenses incurred. (The exhaustive list of OPD Procedures/Treatment is available in **Annex I**).

3. What is the difference between Group Mediclaim Policy-IPD for hospitalisation and OPD Policy of RBI?

The Group Mediclaim Policy for hospitalisation (IPD) provides insurance coverage for expenses related to hospitalisation due to illness, disease, or injury, subject to a minimum of 24 hours hospitalisation and certain day care procedures. OPD Policy is for treatment undertaken where hospitalisation (including day care) is not necessary.

4. Which is the insurance company for the RBI OPD Policy?

New India Assurance Co. Ltd. is the insurer for the year 2026-2027.

5. What is the Policy start date & end date?

The Policy start date is April 1, 2026 & end date is March 31, 2027.

6. Who are the Third-Party Administrators (TPAs)?

There are two TPAs for the Policy viz. MD India Healthcare Services (TPA) Pvt. Ltd. and Medi Assist Insurance TPA Pvt. Ltd. . For details, please refer **Annex-II**.

7. Who is covered under the policy?

- The policy is available to all the pensioners (including those covered under NPS) of age of 60 years & above along with their spouse (irrespective of the age of spouse). The policy will additionally cover dependent children of eligible pensioners who have permanent or temporary physical / mental disability as defined under Rights of Persons with Disabilities Act 2016 and are incapable of being gainfully employed (as per overall definition under master circular on MAFS).
- Pensioners attaining the age of 60 years during the month will be covered from first day of the succeeding month.
- In the event of death of the pensioner, the spouse and eligible dependent children (who are getting the family pension) will continue to be covered under the policy. Family pensioners who have completed 60 years of age will be included under the policy. However, family pensioners who have not completed 60 years, will be eligible under OPD policy for reimbursement, provided the deceased pensioner would have crossed the age of 60 years during the policy period, had he/ she been alive.

8. What is the sum insured for dependent children?

There is no separate sum insured amount. The eligible children will be covered within the overall monetary limit assigned to the pensioner/family pensioner under a family floater scheme.

9. In case of pensioners who are above 60 and 75 years of age and are members of the MAF Policy but had not joined the dispensary facility, are they eligible for reimbursement under the new OPD Policy?

All pensioners, irrespective of their MAF membership or availing of dispensary facility, are covered under the OPD policy.

10. Whether those who opted for medical facilities under MAF Scheme, but are not pensioner, covered under the new OPD Policy?

No.

11. Whether retired CPF optees are covered under the new OPD Policy?

No.

12. Please clarify whether officers on Personal Promotion (PP) are eligible for entitlement for higher grade coverage?

Yes, officers on Personal Promotion are eligible for entitlement of one higher grade coverage as given below.

Grade	Eligible for entitlement
Grade A - PP	Grade B
Grade B - PP	Grade C
Grade C - PP	Grade D
Grade D - PP	Grade E

13. There are a few retirees who have fully dependent children. The Bank as a welfare measure had included them for MAF benefits. Whether benefits to fully dependent children are also extended under OPD policy?

- i. From FY 2022-2023 onwards OPD Policy has been extended to dependent children (of eligible pensioners/family pensioners) who have permanent or temporary physical / mental disability as defined under Rights of Persons with Disabilities Act 2016 and are incapable of being gainfully employed.

“Permanent Disability” is defined as presence of any sensory, physical or mental disability of a severe order on a permanent basis. It is medically cognizable or diagnosable and is a reason why the person having the condition is not gainfully employable. The degree of severity of physical / mental disability should be certified by a Competent Medical Authority (Senior Medical Officer/ Medical Board at the Apex level / State Hospital Level). The disability certificate issued needs to be corroborated by BMO/BMC of respective offices.

- ii. It has been decided to extend the coverage under the OPD Policy to dependent children who have temporary physical / mental disability also. For this purpose, it has been decided to follow the definition of severity as laid down in applicable Master Circular on Pension.

The terms and conditions will be as given below:

- a) Before allowing the membership to any such son or daughter, the sanctioning authority shall satisfy itself that the handicap is of such a nature as to prevent him or her from earning his or her livelihood and the same shall be evidenced by a certificate obtained from a medical officer not below the rank of a Civil Surgeon setting out, as far as possible, the exact mental or physical condition of the child. The minimum degree of disability should be 40% in order to be eligible for any concession / benefits under the OPD Policy.
- b) The person who is covered under the policy himself or as guardian of such son or daughter shall produce medical certificate once, if the disability is permanent and if disability is temporary, as provided in the certificate and if not provided in certificate, once in every five year, to the effect that he or she continues to suffer from disorder or disability of mind or continues to be physically crippled or disabled rendering him or her unable to earn a living.

Note for Pensioners: Requests, for adding dependent children should be routed to Employee Health Section, HRMD Central Office through local MAF desks of Regional Offices/CODs.

Note for ROs/CODs: Request, if any, received in this regard from eligible pensioners covered under OPD policy may be referred to Central Office together with the details of the case and the requisite certificate from the Competent Medical Authority.

14. Whether ex-gratia recipients/CPF optee are covered under the OPD policy?

No.

15. Once a spouse/dependent child is covered under the policy due to age of pensioners crossing 60 years, will he/ she continues to be covered irrespective of age even after the demise of the pensioner?

Yes, the spouse/dependent child will continue to be covered.

16. What is a TPA-card?

TPA cards have been discontinued. There is no requirement of TPA cards for the OPD Policy. All are requested to mention the respective Samadhan Number and PF Index Number at the time of submission of claims. All covered pensioners under the policy will be issued a welcome booklet giving details of the policy. In case the pensioner does not receive the welcome booklet within a month of commencement of policy, please approach the Regional Office/ COD from where the pension is being drawn.

17. What should I do if I do not get my spouse's card?

There is no requirement of TPA card. The claim can be made by quoting PF Index Number/ Samadhan Number of the respective pensioner.

18. Do I have to enroll under the policy next year?

No, all the members, spouses and eligible dependent children covered under the current policy will be automatically covered in the subsequent policy.

19. Will the coverage continue in case of death of the member?

Yes, the coverage will continue for the spouse and eligible dependent children in case of death of the member as mentioned in Question No. 7 above. Further, in case of death of employee and spouse, coverage will continue for the eligible dependent children.

20. If I move locations, will my insurance policy still prevail?

Yes, the OPD Policy will continue to be offered at the new location. Please inform the Regional Offices/ Central Office Departments where you are registered about the change of address. However, there will be no change in TPA during the year.

21. What will happen if I exhaust my Sum Insured?

There will be no additional reimbursement from the Bank. The claims will be entertained by the insurance company up to the grade wise prescribed limit.

22. Whether treatment taken under all systems of medicine are considered under the policy?

OPD policy apart from treatment under allopathy includes treatment taken from all registered AYUSH doctors such as Ayurvedic, Homeopathic and Unani. The policy covers yoga therapy taken from an approved yoga teacher and advised by treating doctor. Siddha therapy from approved practitioner, if it is part of treatment, will be covered. Cross system claims will not be considered e.g., allopathic treatment prescribed by ayurvedic practitioner or vice versa will not be covered.

23. Whether the expenses over and above the hospitalisation policy (Pre and Post Hospitalisation expenses) are covered under OPD Policy?

No, the two are separate policies, covered by two different schemes.

24. Whether reimbursement of expenses on treatment under homoeopathic system is admissible on par with allopathic system?

The OPD policy covers homeopathic medicines taken from both Government and private hospitals based on prescriptions obtained by certified treating doctor.

25. It is not clear as to whether expenses incurred in joining an organized Yoga camp (for example: Patanjali Yoga Shivirs of Swami Ramdev) would be covered.

- Yes, such expenses will be covered if prescribed by the treating doctor & yoga treatment is availed from a certified yoga teacher.
- The claims pertaining to yoga therapy will be admitted without prescription slip up to the limit of ₹6,000/-, however, original bills will be required to be submitted. The facility will be available up to the cumulative limit of ₹6,000/- during the policy period i.e., April 2026 to March 2027. Claims beyond the above limit will be covered based on original prescription slip and bills from registered institute.

26. Whether all consultation, investigation or diagnostic fees across all specialties and prescription-based pharmacy expenses are covered under the OPD policy?

Yes.

27. Insurance limit is covered for spouse also, if the age of spouse is less than what is prescribed for employees, whether the admissible expenses incurred by spouse will be covered under the policy?

Yes. It is covered under the policy irrespective of the age of spouse.

28. Whether OPD Policy is applicable to pensioners who are on a visit to a foreign country or temporarily settled abroad.

The policy is applicable to treatment taken in India only.

29. Whether consultation fees of an MBBS doctor will also be reimbursed?

Yes.

30. If an individual retiree is unable, due to his/her ailments, to visit the nearest Bank's dispensary, whether the cost of medicines purchased by him/her, is reimbursable under the OPD policy?

Yes.

31. Whether Acupuncture and Acupressure treatments are eligible under the OPD policy?

No.

32. Are pre-existing diseases covered under the Policy?

Yes, all pre-existing diseases are covered under the Policy.

33. Are dental consultation/treatment/procedures covered?

Yes, all dental treatments, as necessitated by the condition of the teeth and advised by a qualified dentist including dentures, implants & veneers are covered up to the limit applicable to grade under the policy. **No cosmetic treatment is covered under the policy.**

34. Are vision related treatment/procedures covered?

Yes, vision related consultation/treatment/procedures; all types of lenses (bifocal/multifocal), including spectacles are covered up to the limit applicable to grade under the policy. **However, cosmetic treatments, sunglasses & riding glasses are not covered.**

35. Is there any limit to the number of treatments I can take under the OPD Policy?

No, there is no limit to the number of treatments. One can claim the amount till the grade wise monetary limit is exhausted, provided the treatment/benefit availed is covered under the OPD policy.

36. Can I claim my pre & post-hospitalisation expenses under this policy?

No, pre & post – hospitalisation expenses should be claimed under the Group Medclaim policy for hospitalisation.

37. What are the general policy exclusions?

Please refer to the exclusions list given in Annex I.

38. How do I file a claim under the OPD policy?

Claims can be filed under either cashless or reimbursement basis. For details on cashless claims authorization, please refer to the information booklet shared by the designated TPA. Following are the instructions to file a reimbursement claim:

- Collect all the original documents post completion of the OPD treatment.
- Fill the OPD Treatment – Claim Sheet – Policy Year 2026-2027
- Submit or courier the claim documents in a sealed envelope to the address of the TPA as mentioned in the welcome booklet or claim documents can also be dropped in the boxes kept in the Bank's dispensaries.
- Consultations/documents provided should be attested/ signed by the authorized/ treating doctor. The attestation/ signature should include Doctor's Name, Degree, and Registration Number.

Following is the indicative list of documents which are required to be submitted/uploaded:

- Duly filled Claim form.

- Original payment receipts/bills.
- Doctor's prescriptions in original/ self-attested copy.
- All investigation reports in original/self-attested copy.
- All investigations to be supported by doctor's advice for the same.
- All pharmacy bills to be supported by doctor's advice for the same.

Photocopies of investigation reports will suffice for claim processing; original reports shall be retained by the pensioners. In case of bills, it is mandatory to submit the same in original.

In case of over-the-counter medicines, prescription slip from attending doctor may not be insisted upon if the cost of medicine is below ₹2,000/-. This facility will be available up to the cumulative limit of ₹2,000/- during the policy period i.e., from April 2026-March 2027. Further, in case of continuous or ongoing treatments such as diabetes, hypertension etc., original copy of prescription may be submitted/uploaded only once, thereafter, claims for the same may be made during the year by enclosing the self-attested copy of the same prescription.

39. What is a reimbursement claim?

You need to pay all the expenses for the treatment and submit/upload all the original bills along with the claim form and the expenses will be reimbursed to you by the Insurance Company.

40. Within how many days should a claim be submitted?

The claim should be submitted within **90 days** from the date of last treatment for a particular ailment. In case of a delay the claim is liable to be rejected. It may be noted that claims will be entertained on completion of treatment and any claim towards advance payment/ future treatment/ annual-monthly membership expenses will not be entertained. However, in case of long treatments going beyond a policy year, it may be ensured that the bills pertaining to a particular policy period are submitted during its validity period even if treatment is not completed.

41. What is the minimum amount up to which I should submit the claim?

It would be ideal for you to collect all the bills up to minimum of ₹5,000/- or on monthly basis and submit it collectively for administrative convenience.

42. Who can assist me in case of any queries?

Please refer the Escalation Matrix given in Annex 1.

43. Can I continue to avail the medical benefits offered by RBI dispensaries?

Yes.

44. What is the limit on OPD policy?

OPD floater cover per family (self, spouse, and eligible dependent children only) per annum is as per the below mentioned grades & age of the pensioner:

Sr. No.	Grade	Sum Insured (in ₹)	
		Age 60 to < 75 years	> Age 75 years
i.	Class IV	22,000	33,000
ii.	Class III	33,000	50,000
iii.	Grade A	44,000	66,000
iv.	Grade A (PP)	55,000	83,000
v.	Grade B	55,000	83,000
vi.	Grade B (PP)	66,000	99,000
vii.	Grade C	66,000	99,000
viii.	Grade C (PP)	77,000	1,16,000
ix.	Grade D	77,000	1,16,000
x.	Grade D (PP)	88,000	1,32,000
xi.	Grade E	88,000	1,32,000
xii.	Grade F	1,10,000	1,65,000