

Salient features of GMP-OPD 2025-26

I. The policy covers the following:

1. Medical consultations and tele-consultations required for wellbeing and disease control of the member. Medical consultations from General Physicians and Specialists under Allopathy as well as AYUSH are included.
2. Treatment modalities covered - Vaccinations, diagnostics and treatment procedures, dressings, foreign body removal, fracture reduction, psychotherapy, nutritional counselling, physiotherapy, occupational therapy, exercise therapy, ayurvedic therapies, yoga, rehabilitation services like pulmonary rehabilitation, physical rehabilitation post-accident/ stroke/ surgery, etc.
3. Diagnostics - Diagnostic procedures, lab investigations - biochemistry, pathology, radiological, etc. It covers suitable screening tests and health check-ups done to check the health status of the member/ spouse/ eligible dependent children.
4. Visual Aids/ Hearing Aids – Lenses - With frames/ contact lenses/ low vision aids, hearing aids, etc.
 - a) All types of lenses (bifocal/multifocal), frames and spectacles are covered subject to **prescription issued by a registered optometrist**.
 - b) Cosmetic treatment is not covered.
 - c) Sunglasses and riding glasses are not covered.
 - d) Repairing cost of hearing aids will be covered up to a cumulative limit of ₹10,000/-.
5. Orthopaedic Aids - Like walking sticks, wheelchairs, walkers.
6. Dental Treatment - As necessitated by the condition of the teeth and advised by a **qualified dentist**. It also covers dentures, implants & veneers.
 - a) There is no limit on the type of caps.
 - b) Includes braces, implants & other treatment along with prescribed medical justification.

- c) All dental procedures are covered including but not limited to dentures (including repairs)/bridges, crowns/ caps, scaling, cleaning, polishing, etc.
 - d) Treatment related to consultation, investigation etc., are covered.
 - e) Any Cosmetic treatment is not covered under policy.
7. Health Equipment - Health equipment aiding in treatment of a disease or maintenance of health like medical beds, recliners, CPAP machine, Nebuliser, Treadmill etc. are covered.
 8. Health Equipment Hiring - If the member needs to hire a medical aid, it will be covered for a period of not more than 180 days during the policy period.
 9. Home Health Care - Domiciliary treatment provided at home, either by a registered doctor or a registered nurse under guidance of a doctor. Home visits by qualified doctor and registered nurse are covered. Nurses should be from a registered nursing agency only.
 10. Health and Fitness Coach - If a member utilises the services of a health coach for treatment of disease or maintenance of health, such expenses are to be covered.
 11. Any activity undertaken by the beneficiaries, on the advice of doctor, to fight illness and improve the overall health of beneficiary are covered. Service to be availed subject to prescription provided by treating doctor and treatment is medically required.
 12. Consultations/documents provided should be attested/signed by the authorized doctor and not the consulting company.

II. Additional Features

The policy also covers the following:

1. Consultation, investigation, and diagnostic fees across specialties (Allopathy as well as AYUSH).
2. Prescribed diagnostic tests and pharmacy expenses
3. Prescription to be provided by registered medical practitioner/doctor.

4. Appliances covered up to sum insured under the policy subject to prescription provided by the treating doctor and treatment is medically required. Doctor's prescription will not be required for appliances costing less than or equal to ₹5,000/-, which will be a cumulative limit for the year.
5. Hair and skin products required for medical conditions should be supported by a prescription from the treating doctor.
6. Vitamins & tonics are covered under doctor's prescription.
7. There will be no cap/ restriction on the number of medically justified treatments/ consultation or OPD procedure confinements per policy period.
8. De-addiction programmes are covered under the policy. Guidance of Central Office may be taken if any ambiguity arises in the claim.
9. Local ambulance charges for admission, transfer to another hospital and /or discharge under critical condition as advised by the doctor for only outpatient treatment are covered up to cumulative limit of ₹2,000/-.
10. In case of over the counter (OTC) medicines, prescription slip from the 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 01,2026 – March 31, 2027. The above limit will include both allopathy and AYUSH medicines.
11. An indicative list of items covered under the OTC facility is specified in Point No. VII. This list contains essential medical supplies and other items required for managing various medical conditions, ensuring comprehensive support for the insured members.
12. Claims pertaining to yoga therapy will be admitted without a 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 slips and bills from a registered institute.
13. A welcome booklet illustrating the terms and conditions, along with necessary forms, shall be provided to each member.

14. 24 hours help line (TPA will set up special help line numbers for RBI pensioners) will be available.
15. No member will be excluded from the policy, till explicitly mentioned by RBI through the monthly endorsement.
16. In such instances where both husband and wife have retired from Bank's service in different/same grades, they may utilise their entitlement independent of each other's grade wise limit provided both are pensioners above 60 years of age. Further, if the wife's limit has been fully exhausted, she is eligible to avail the unutilized limit of her husband in the capacity of his spouse and vice versa.

III. Exclusions

1. Spectacles used for cosmetic purposes are excluded. Sunglasses and riding glasses are not covered.
2. Dentistry/ Ophthalmology – no cosmetic treatment is allowed.
3. Expenses that are medical in nature but incurred towards cosmetic body modifications.
4. Medical treatment required following any criminal act of the insured person.
5. Any travel/ transportation cost or expenses.

IV. Settlement of Claims

1. Claims will be settled on both cashless as well as reimbursement basis through the designated TPA. To facilitate cashless services; updated list of network hospitals, diagnostic centres, and pharmacies etc. will be provided by the TPA.
2. In the case of reimbursement claims, a facility of paperless processing of claims based on documents uploaded by the retiree will also be provided; physical documents shall not be mandatorily required (However, original documents shall be retained by the pensioners and may be demanded for audit purpose). Reimbursement of claims shall be settled on actuals and shall not be restricted to network or discounted rates of the TPA.
3. No intimation of treatment is required to be provided. All documents are to be submitted within 90 days from the date of treatment taken by member or spouse or eligible

dependent children.

4. All bills must be supported by a copy of doctor's prescription, which must contain the registration number of the treating doctor.
5. Photocopies of doctor's prescription and investigation reports will suffice for claim processing. Originals of the same may be retained by the pensioners. However, in case of reimbursement claims, original bills are required to be uploaded/submitted.
6. Repudiation of claims shall be the sole discretion of Employee Health Section, HRMD, Central Office of RBI.

V. Grade-wise limits of Sum Insured

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