

Application for Gap Case/Fresh Enrolment under SAIL Mediclaim Scheme
(w.e.f. 11th July, 2023 – 10th July, 2024)

Employee Details																															
Name of Employee												SAIL PersonnelNo.																			
Unit from where retired						Place of Last Posting						Designation last held																			
Date of Separation								Claim Centre (only for Enrolment)				KOLKATA ROURKELA		CHENNAI BOKARO		DELHI SALEM		BHILAI ASANSOL		DURGAPUR											
D				D				M				M				Y				Y											
Name of Member																															
Date of Birth								Old MIN No.				Gender (M/F)				Please affix recent photograph of member				Please affix recent photograph of spouse											
D				D				M				M												Y				Y			
Name of Spouse																															
Date of Birth								Old MIN No.				Gender (M/F)				Please affix recent photograph of member				Please affix recent photograph of spouse											
D				D				M				M												Y				Y			
Address																															
Pin Code								Phone								Cell															
Email ID																															
Aadhar No. (Self)												Aadhar No.(Spouse)																			
Date of Enrolment (for fresh enrolments only)												Number of Members																			
D				D				M				M				Y				Y											
Premium for base policy Employee(Rs.)								Premium for base Policy Spouse(Rs.)								Total Premium(Rs.)															
Whether Super Top Up required(Yes/No):				If yes, Threshold Rs. (in lakhs)								Sum Insured Rs. (in lakhs)																			
Premium for Super Top Up Sum Employee (Rs.)								Premium for Super Top Up Sum Spouse (Rs.)								Premium for Super Top Up Sum Both (Rs.)															
Grand Total Premium (Including premium of base policy and Super Top up												(Rs.)																			
Nominee of Employee												Relation with Employee																			
Nominee of Spouse												Relation with Spouse																			
ECS Details				Employee								Spouse																			
Name of Account Holder																															
Name of Bank																															
Branch Name																															
Branch Address																															
Type of Account (tick)				Savings Bank								Current Deposit																			
Member Account No.												MICR Code																			
Spouse Account No.												MICR Code																			
IFSC Code Member												MIN No. Member																			
IFSC Code Spouse												MIN No. Spouse																			
Signature of Member												Signature of Spouse																			
Payment Details																															
Cheque / DD / Challan No										Amount (Rs.)																					
										Drawee Bank																					
Members to Note																															
Enclosures: (1) One copy of Aadhar Card each for the member & spouse; (2) One cancelled cheque with Name & MIN No./ P.No. at the back. Intimation : (1) Pre-planned hospitalization - <u>48 hours</u> in advance; (2) Emergency - within <u>24 hrs</u> from the time of admission. Claim Submission : (1) IPD - Within 30 days from the date of discharge; (2) Post-Hospitalization – within 30 days after completion of treatment period of 60 days; (3) OPD - When expenses exceed Rs.2000/- per person per policy period or within 90 days from the date of treatment, whichever is earlier. Cappings/Ceilings : Members to apprise themselves regarding Cappings/Ceilings before availing mediclaim facility, from the SAIL Website / Mediclaim Booklet.																															
THE ABOVE TIME LIMITS TO BE STRICTLY ADHERED TO, SO THAT THE CLAIMS ARE NOT REJECTED.																															