

HO:BR:117:02

Date: 23.01.2025

**CIRCULAR TO ALL BRANCHES/OFFICES IN INDIA**

*Issued by  
HRM Department*

Madam / Dear Sir,

**Re: Reimbursement towards Medical Insurance Premium to Retired employees / surviving spouse - F.Y. 2024-25.**

We refer to our circular no. HO:HRPS:116:2256 dated 07.10.2024 regarding renewal of Group Health Insurance Policy 2024-25 for retired employees under IBA Medical Insurance Scheme.

Please note that the reimbursement of amount towards medical insurance premium for the current year i.e. **FY 2024-25** to the eligible ex-staff members / spouse of deceased ex-staff will be made as under:

Particulars	Reimbursement Amount
Pension pay Up to ₹ 25000/-	₹ 16000
Pension pay from ₹ 25001/- to ₹ 40000/-	₹ 12000
Pension pay ₹ 40001/- & above	₹ 10000
PF Optees / Spouse of deceased employees	₹ 12000

For calculation of Pension pay, the components considered are Basic (Reduced Basic Pension after Commutation) + DA+ Additional Pension as on 31<sup>st</sup> Oct'2024.

The amount of reimbursement shall be the amount of premium paid or the amount as per the table above, whichever is less.

In respect of retirees who have opted for medical insurance under IBA Medical Insurance Scheme, the amount of reimbursement will be directly credited to their account.

Further in respect of those retirees who have opted / availed medical insurance policy from any other insurance company (other than IBA), shall submit their application for the FY 2024-25 through Ex-employee module in HR-Connect and shall comply with the following points:

1. Ex-employee or the spouse of the deceased ex-employee should be the primary holder and proposer of the policy. Medical insurance in the name of any other person will not be eligible for reimbursement.
2. Policy period (start date of new policy for which the reimbursement is applied for) should be after the end date of previous policy to avoid overlapping in system.
3. While submitting the application online, the concerned ex-employee or the spouse of the deceased ex-employee shall ensure that the clear and legible scanned copies of all the relevant documents are uploaded and relevant information, viz. **policy no., policy period, policy premium amount and name of primary holder of policy** are clearly visible.
4. Ex-employee or the spouse of the deceased ex-employee may check the status of their application by logging in to their account in HR Connect.







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The job card for claiming the above reimbursement on the ex-employee portal for those who have not opted for insurance under IBA is enclosed as **Annexure-A**. For any queries please feel free to contact HRM department at Head Office by email at [swel.ho@bankofbaroda.com](mailto:swel.ho@bankofbaroda.com)

Branches and Offices are advised to suitably inform regarding this facility to the ex-employees who have earlier served in their Office/Branch/drawing pension from their Branch. A copy of this circular should be displayed on the notice board for the information of the ex-employees.

Yours faithfully,

**Shailendra Singh**  
**Chief General Manager**  
**(HRM & Marketing)**

Encl: As above.

**JOB CARD FOR APPLYING MEDICAL SUBSIDY IN HR-CONNECT****LOG-IN**

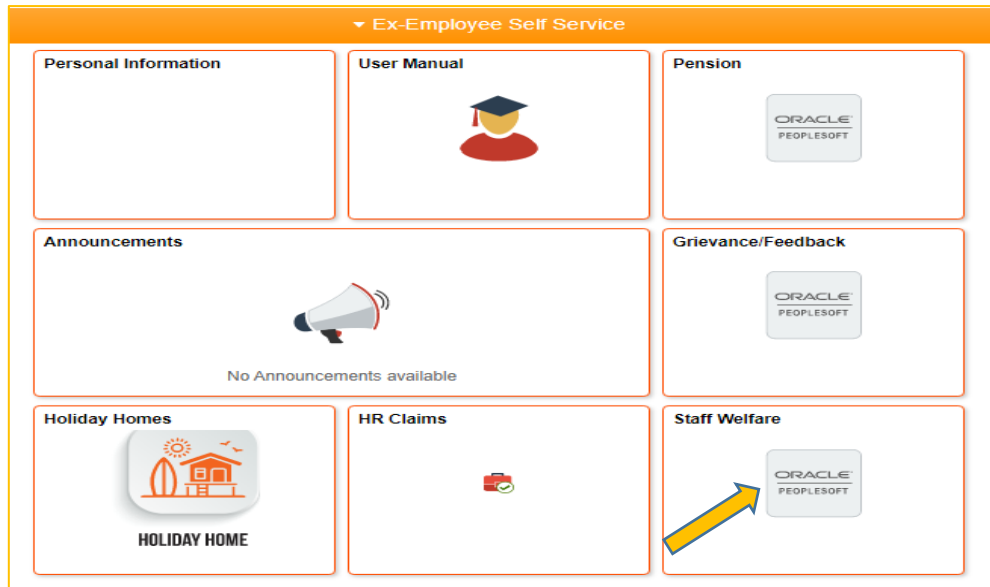
1. Access HR-Connect through the URL <https://hrconnect.bankofbaroda.co.in/> click to enter:



2. Key in USER ID and click on 'Continue'. Select E-mail/Phone to receive the OTP. Thereafter, key-in the OTP received on mobile/email and click on 'Sign In'.

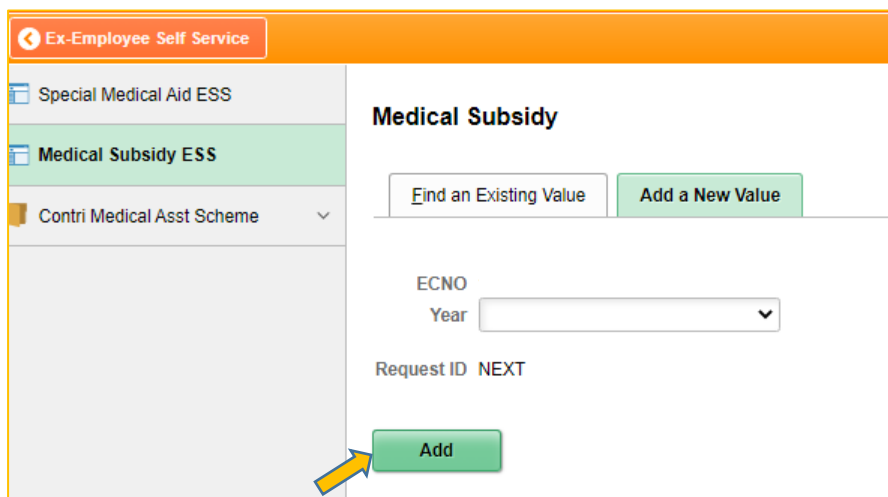


3. The dashboard as shown below will be displayed. Click on **Staff Welfare**



#### 4. Medical Subsidy

Click on the **Medical Subsidy ESS** on the Menu panel and then click on **Add a New Value**.  
Select the Year from the dropdown and click on **Add**



#### 5. Filling up the policy details:

- (i) Fill up the policy details as required.
- (ii) To upload the documents, first select the type of document being uploaded from the drop down.
- (iii) Click on the **tick box**.
- (iv) Click on **Upload** tab. A pop up will be opened to upload the documents. Choose any file in **.pdf or .jpg** format.
- (v) After uploading the documents, click on **Submit** button.

**Employee Details**

ECNO	4	Year	
Request ID	1	Organization	
Cessation Reason	1	Cessation Date	
Account Number	3	Grade	
Date of Death		Spouse Name	
Phone	€	Email Address	
Optee	Pension	Pension Amount	
Application Status		ity Band	

**Policy Details**

Policy Begin Date  Policy End Date

Policy Number  Premium Amount

Max Eligible Amount  Amount To Be Paid

Payment Date  Payment Status

\*Insurance Company Name  Covered Under  Other Than IBA

I Confirm that the Primary holder and Proposer are same.

Submitted By  Retired Employee

File Type	Attached File	Created Date time	Created By	Upload	View
1				Upload	View

