



POST RETIREMENT MEDICAL BENEFIT SCHEME- POST 01.01.2007
(Non-Executives)

Policy Period: 04-May-2026 to 03-May-2027

Details to join the Scheme for the year 2026-2027 are as under:

The Premium amount payable by Retired Non-Executive Employees is an under:

PRMBS (Post 2007) Non - Executives					
04.05.2026 to 03.05.2027					
Particulars	Sum Assured	Total (inclusive of Tax)	85%	15%	To be Paid by Employee
Employee and Spouse	₹ 4,00,000.00	₹ 59,612.00	₹ 50,670.00	₹ 8,942.00	₹ 8,942.00
Employee or Spouse	₹ 4,00,000.00	₹ 44,710.00	₹ 38,004.00	₹ 6,706.00	₹ 6,706.00
Note	No Mid- term additions will be considered .				

The interested and eligible retired employees can make payment through RTGS as per bank details given below. The retired employee while sending the application form for joining medical scheme must enclose UTR No. details duly filled in application form. Applications received without UTR details will not be considered for enrollment in to the medical benefit scheme.

Note: Duly filled Application form along with UTR details may be sent through Mail id: midhani.prmbs@midhani-india.in and contact no. 040-2418-4405 for any further details.

Last date for the submission of the application and payment of the premium amount is 02.05.2026

MEDICAL INSURANCE SCHEME FOR NON-EXECUTIVES RETIRED ON OR AFTER 2007
BANK DETAILS

Bank Name	State Bank of India	A/C No.	36700315769
Bank Address	Chandrayangutta	IFSC Code	SBIN0003026
A/C Type	SB	MICR No.	500002012
Beneficiary	MIDHANI PRMBSW 2007		



APPLICATION FORM

MIDHANI MEDICAL INSURANCE FOR RETIRED EMPLOYEES POST 2007 - Non Executive

1	Full Name of retired employee	
2	Father Name	
3	Staff No.	
4	Date of Birth (Age as on date)	
5	Designation at the time of Retirement / Death	
6	Department at the time of Retirement / Death	
7	Spouse Name	
8	Spouse Age / Date of Birth (Age as on Date)	
9	Present address for Communication	
10	Permanent Address	
11	Phone No.	
12	Alternate Mobile No.	
13	E-mail ID if any	
14	Date of Retirement / Separation due to death	
15	Transfer Details of Amount	
	Bank Name & Branch	
	UTR No.	
	Date of Transaction	
	Bank Account No. & IFSC Code	

Enclosures (Xerox copies only)

1. Retired employee ID/Family Card (Issued by MIDHANI) both front & back. (Or) Employee service certification (issued at the time of Retirement by HR department)
2. passport size photos (Employee + Spouse)
3. Self & Spouse Aadhaar card Xerox
4. Payment Receipt or proof of payment

Date :

Signature of Spouse

Signature of Retired Employee

Place

BANK ACCOUNT DETAILS

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Beneficiary	MIDHANI PRMBSW 2007		

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