

Administrative Order for modification of Medical Assistance Scheme (MAS) for the ex – employees retired before 01.01.2007(Pre – 2007)

The management is pleased to modify the existing Medical Assistance Scheme – Pre 2007 (MAS – Pre 2007), applicable to Ex-Employees **retired prior to 01.01.2007**. The modified scheme has been approved by Board of Directors at its 419 meeting held on 18 March 2026. The modified scheme will be come in to force w.e.f. 01st April 2026.

Details of the modified scheme is enumerated below:

1. The benefits assured under the Scheme shall be administered directly by GRSE through a Health Benefit Service Provider (HBSP) duly approved by Insurance Regulatory Development Authority (IRDA).

2. **Eligibility:**

“MAS: Pre – 2007” is applicable to all Officers, Supervisors, Office Assistants and Operatives who were on the permanent roll of GRSE and superannuated before year 2007 subject to fulfilment of eligibility criteria as mentioned below.

The “MAS: Pre – 2007” would cover the Employee and Spouse (1+1), only Employee (1+0) and only Spouse (0+1).

As per the 349th Meeting of the Board of Directors held on 22 June 2018, the Scheme shall be applicable to employees who had been separated prior to 01.01.2007 as given below: –

- (a) Superannuated employees with 15 years’ service and their spouses.
- (b) The surviving spouse of an employee who died while in service. Mandatory service of 15 years will not be applicable in death case. However, the said employee must have a minimum 15 years’ notional service in the Company, had he not expired.
- (c) Voluntary / prematurely retired cases as per the Rules of the Company after rendering not less than 15 years’ service.
- (d) Retirement under Voluntary Retirement Scheme (VRS), i.e., who were paid ex – gratia as VR benefit would not be covered.
- (e) Employees terminated from service on the ground of disciplinary measures would not be eligible.
- (f) Ex – employees covered under the Medical Scheme of son / daughter or past employer would not be eligible.



3. The Sum Insured for ex – employees will be as following:
- a) Officer: Rs. 2.5 Lakhs / per family / year on floater basis
- b) Supervisors: Rs. 2.0 Lakhs / per family / year on floater basis
- c) Operatives & Office Assistants: Rs. 2.0 Lakhs / per family / year on floater basis
4. There shall be no separate capping of bed charges.
5. Provision of Rs. 1 Crore Corporate Buffer for Special / Critical Diseases has been introduced in the new scheme. Corporate Buffer for individual employee (including spouse) will be twice that of the Basic Sum Insured. The Corporate Buffer to be utilized for Ex-employees & Spouses **on first come first serve basis**. This buffer amount is to be utilized for critical diseases for the amount over and above the sum insured after exhausting his / her monetary ceiling as specified in para 3 above. Thus, The Sum Insured and Corporate Buffer per family per year on Floater Basis shall be as under:

Category	Sum Insured	Corporate Buffer
Officer	Rs. 2.5 Lakhs	Rs. 5 Lakhs
Supervisor	Rs. 2.0 Lakhs	Rs. 4 Lakhs
Operatives & OA	Rs. 2.0 Lakhs	Rs. 4 Lakhs

6. The following ailments are to be considered as **‘Special / Critical Diseases’**.
- (i) Cardiac Procedures and Cardio-vascular Surgeries
- (ii) Cancer of any type
- (iii) Renal Disease
- (iv) Paralysis
- (v) Chronic Liver Diseases
- (vi) Major Organ Transplantation/Bone Marrow Transplantation
- (vii) Chronic Obstructive Pulmonary Disease (COPD) with/without Cardiac Failure
- (viii) Major Neurological Cases including Head and Spinal Injuries
- (ix) Knee / Hip / Large Joint Replacement
- (x) Implantation of high value cardiac implants / Pacemaker / Brain Pacemaker (DBS)
- (xi) Non-united / complicated Bone Fractures (with / without implant/Prosthesis)
- (xii) Pyrexia of Unknown Origin (PUO), Life Threatening Septicemia
- (xiii) Other major High-value Surgery
- (xiv) Thalassemia
7. There will be **“NO self-funded TOP UP”** option.
8. **Bed Entitlement.** The provision of the ceiling of bed charges has been eliminated. Now, the entitlement of accommodation for Officers, Supervisors, Operative & Office Assistant and their spouse are indicated below: -

Category	Listed Empanelled Hospitals with credit facility	Non-Empanelled Hospitals
Officer	AC Double Bed or equivalent	Limited to highest rate of empanelled hospital of AC Double Bed
Supervisor, Operative & Office Assistant	AC General Bed	Limited to highest rate of empanelled hospital of AC General Bed

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However, in case of contagious / infectious diseases Isolation Room (AC single room) irrespective of category will be allowed to avoid cross infection and also to get better nursing care subject to recommendation of attending doctor and approval of Company's Chief Medical Officer.

9. **Cashless facility / HBSP Services:** Cashless facilities will be extended by Health Benefit Service Provider (HBSP) in their listed Hospitals for all planned treatment under the policy. The present HBSP is " **MEDI ASSIST**". The HBSP extends Cashless facility also in case of Emergency Admissions in listed Hospitals / Nursing Home. However, in case of Emergency admissions in non-listed Hospitals / Nursing Home, HBSP shall endeavour to extend the Cashless facility and where it is not possible, claims shall be settled on reimbursement basis. The insured persons shall also be entitled to claim settlement on reimbursement basis, if they so desire. The Claim servicing of the new scheme shall be done by IRDA licensed HBSP having adequate network who shall be engaged by GRSE. GRSE has sole right to remove / change the HBSP if their performance is not satisfactory.
10. The names of employees and their spouse along with relevant data have been provided to the HBSP and HBSP will issue Identity Card and Guide Book to the employees and their spouses and ensure cashless hospitalization to the beneficiaries in the listed hospitals in the cities and towns all over India. The detailed procedure to be followed by the insured to avail hospitalization facilities shall be worked out by the HBSP in consultation with GRSE and the same will be intimated to all the insured by hosting in the website .
11. There will be no medical check-up for the retired employees and their spouse for their inclusion in this new scheme. There will be no exclusion for coverage of employees / spouse to be insured under the new scheme due to pre-existing diseases.
12. There will be no age bar criteria for insured person/s. The policy is applicable till the amount is exhausted or till the person is alive.
13. The scheme will be applicable for hospitalization including Day Care admission anywhere in India. GRSE will reimburse medical expenses covering a period of 1 (One) month (30 days) prior to hospitalization and 2 months (60 days) for post hospitalization period from the date of discharge.
14. There will be no limit on the expenses reimbursed / payable per hospitalization per illness up to the ceiling of Sum Insured during the period of coverage of policy as admissible under the policy.
15. Intimation of hospitalization in non-panel hospitals with full particulars shall be given by an insured to the HBSP / GRSE within 30 days from the date of discharge.
16. The time limit for submission of claims for reimbursement of hospitalization and Pre / Post hospitalization shall be **within 2 months from the Date of Discharge**.
17. In exceptional circumstances, based on merits of the case, the CMO, GRSE shall have the power to waive the time limit for cases mentioned at Para 15 and 16 above.

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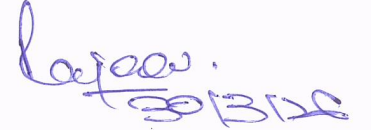
18. HBSP will ensure that insured employee's hospitalization and or insured employee's Pre / post hospitalization are settled by the HBSP within one month of submission of the same along with all required documents by the insured employee to the HBSP.
19. **Attendant Charges:** During Post-Hospitalization up to INR 500/- per day for 7 days subject to the condition that physical mobility of the Insured Person outside residence is severely restricted and as advised in the discharge summary & medically necessary.
20. **Ambulance Charges:** Maximum Limit Rs. 2500/- per ambulance call without any condition of number of call and admission and /or discharge and / or transfer from one hospital / Nursing Home to another etc. Taxi Bill, or rented car bill will be admissible for ambulances charges up to the specified limit of Rs. 2500/- only.
21. **Non- medical expenses / inadmissible charges:** Ex – employee will pay the amount for non-medical / inadmissible items to the hospital at the time of discharge. The list of non-medical / inadmissible items is as per the attached list. **(Annexure – I)**
22. If admitted in Panel Hospitals of the Company the terms and conditions of the empanelment hospital / nursing homes will be followed and no deviation will be allowed in terms of the implants / lenses / pacemakers / stents etc. If the agreement is as per CGHS rates, the same will be applicable. No request in these aspects will be allowed.
23. No request for upgradation of rooms / stents / lenses or implants even by paying the differential amount in Panel Hospitals is allowed.
24. **Domiciliary Hospitalization.** Limited to 10% of Sum insured. Claim should be admissible for medical treatment owing to Illness / disease / Injury which in the normal course would require care and treatment at a Hospital but is actually taken while confined at home under the supervision of a registered qualified Medical practitioner in the following circumstances:
- (i) The condition of the patient is such that he/she is not in a condition to be shifted to a Hospital, or
 - (ii) The patient is forced to undertake treatment at home on account of non-availability of beds in Hospital.
25. The insured persons will have option to take benefit for entire claim settlement on reimbursement basis of hospitalization treatment and pre and post hospitalization treatment instead of cashless facility.
26. **GENERAL & MISCELLANEOUS**
- (a) Benefits under the Scheme may vary from year to year, as contribution to the Corpus is dependent on Affordability and Sustainability of the Company.**
 - (b) The management reserves the right to change the HBSP at its discretion.**
 - (c) Exclusions :** The Company shall not be liable to reimburse any expenses whatsoever incurred by the retired employee in connection with or in respect of:

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- (i) Venereal Disease, Psychiatric Treatment, Intentional Self Injury, Intemperance or the use of Intoxicating Drugs or Liquor or / any Injury, Disease or Illness directly or indirectly attributable to one or more these causes.
 - (ii) Charges incurred for diagnostic or X-ray or laboratory examinations or other diagnostic tests not consistent with or incidental to the diagnosis and treatment of any ailment not consistent with or incidental to the diagnosis and treatment of any ailment, sickness or injury not prescribed by Authority Medical Attendant.
 - (iii) Treatment of congenital Defects / Disease, if these are incurable.
 - (iv) Treatment relating to all Psychiatric and Psychosomatic Disorders.
 - (v) Age Related Macular Degeneration (ARMD).
 - (vi) Expenditure on treatment pertaining to Menopause.
 - (vii) Expenditure on special Nursing
 - (viii) Expenditure towards Cosmetic Surgery
 - (ix) Travelling expenses or allowance for journey undertaken for the purpose of availing such Indoor Treatment
27. The policy shall cover hospitalization treatment undertaken anywhere in India.
28. The Cashless Facility shall be extended under the policy(s) within 24 hours of application received by HBSP from the respective hospital / Nursing home etc.
29. When a claim is to be paid from any of above stated categories of sum insured, as specifically mentioned in the foregoing paragraph, the said claim paid amount will be reduced from the sum insured and the reducing balance sum insured will be considered as sum insured for the current policy period only. On every renewal, fixed applicable family floater sum insured will be the actual family floater sum insured as mentioned in foregoing paragraphs.
30. Whenever either retired employee or spouse expires, the surviving member will get the full benefit as per this scheme, when both the retired employee and his / her spouse will expire, the coverage shall stand terminated automatically. The legitimate claim outstanding at the time of death of both retired employee and his / her spouse will be payable to the next of kin of the deceased insured person subject to verification of valid documents a legal heir of the insured deceased claimant.
31. The HBSP will maintain a 24-hour Help Desk facility for the Policy Holder. For all practical purposes, the said HBSP shall act for and on behalf of the GRSE. The contact details of the present HBSP (MediAssist) is 25, Thapar House, 7th, 8th, & 9th Floor, Brabourne Road, Kolkata – 700001.

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32. GRSE reserves the right to amend, alter / withdraw this Policy as required at any time without assigning reasons. CMD, GRSE shall be the Competent Authority to approve interpretation of any and all provisions of this Policy.
33. **With the Promulgation of this scheme all procedures / Circulars issued prior to this policy stands withdrawn with immediate Effect.**



Date: 30 March 2026

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