

FAQs for Super Top-Up Facility under SAIL Mediclaim Scheme (2025-26)

SALIENT FEATURES

- This Policy covers In-Patient Hospitalization Expenses incurred in India.
- This policy will respond only when the aggregate of all Hospitalisation expenses (including Pre/ Post hospitalization expenses) of one or all members of the policy **in one or multiple claims**, exceeds the "Threshold" i.e. the SI under the basic policy.
- This Policy will respond for each and every Hospitalisation after the Threshold has been exceeded by previous Hospitalisation expenses subject only to the Sum Insured as opted by the insured.
- The Sum Insured opted under Top-Up is the maximum liability of the company for all members/Member + Spouse.
- Thus, this Policy offers protection in excess of any Base Policy SI of SAIL GMC.
- If there is any expense in excess of Threshold, receivable from any other entity, the Insured Person has an option to recover it from either that entity or this policy, but not both.
- However, the Sum Insured under the policy will be available over and above any reimbursement received from any other entity if such amounts exceed the Threshold.

WHO CAN TAKE THE POLICY

- Any member covered under SAIL GMC Base Policy. **Selective option is not allowed i.e. in case both Self and Spouse is covered under the base policy and if wants to opt for Super Top-up, then both needs to be necessarily take Super Top-Up coverage.**
- Currently, Super top-up facility can be availed by making payment with Base policy.
- This cover can be opted in addition to any other Health Insurance Policy.

ELIGIBILITY

The policy can be issued on Individual or Floater Sum Insured basis covering the members of the family i.e. Ex-Employee of SAIL and his/her spouse. Family comprises of Self & Spouse as covered under Base SAIL GMC policy.

Note : Base Policy will be effective/ activated from 11th July, 2025 when Premium is paid (within *the last date of premium payment*). However, in case, a member opts/ pays for availing Super Top-up facility along with the Base Policy, Super top-up coverage of such member(s) shall be activated after processing time of 2 (two) to three (3) days from the date of payment.

PROCEDURE FOR TAKING THIS COVERAGE

Coverage for this Top-Up policy can be opted while paying for Base policy from the Portal.

SUM INSURED

The Sum Insured available are: Coverage Type	Sum Insured	Threshold (As per Base Policy)
For family having Self or Spouse Only	Option 1: Rs. 5 lakhs; Option 2: Rs. 10 Lakhs; Option 3: Rs. 15 Lakhs & Option 4: Rs. 20 Lakhs	4,00,000
For family unit of Self and spouse (Both)	Option 1: Rs. 5 lakhs; Option 2: Rs. 10 Lakhs; Option 3: Rs. 15 Lakhs & Option 4: Rs. 20 Lakhs	8,00,000

THRESHOLDS

The following Hospitalisation expenses incurred in respect of all the Insured members shall be considered for determining the Threshold under the Policy:

- The admission in the Hospital should have happened during the policy period.
- The Insured should have been admitted as an inpatient (outpatient treatments are not to be considered).
- The Hospitalisation should be for an Injury or Illness.

ENHANCEMENT OF SUM INSURED

- Enhancement of Sum Insured will not be considered during the currency of the Policy.
- Enhancement of Sum Insured is available only at the time of renewal.

PAYMENT OF PREMIUM FOR SUPER TOP-UP

Age of the Member (Ex- Employee of SAIL)	Top-Up Sum Insured	Threshold Insured (As Base Policy)	Sum per	Premium including GST	
				Member	Member + Spouse
Below 65 (For Self or Spouse only)	5,00,000	4		6650	NA
65 & above (For Self or Spouse only)	5,00,000	4		11968	NA
Below 65 (For family unit of Self and Spouse)	5,00,000 (on Floater Basis)	8		NA	9974
65 & above (For family unit of Self and Spouse)	5,00,000 (on Floater Basis)	8		NA	17954
Below 65 (For Self or Spouse only)	10,00,000	4		11102	NA
65 & above (For Self or Spouse only)	10,00,000	4		19984	NA
Below 65 (For family unit of Self and Spouse)	10,00,000 (on Floater Basis)	8		NA	16654
65 & above (For family unit of Self and Spouse)	10,00,000 (on Floater Basis)	8		NA	29976
Below 65 (For Self or Spouse only)	15,00,000	4		15058	NA
65 & above (For Self or Spouse only)	15,00,000	4		27105	NA
Below 65 (For family unit of Self and Spouse)	15,00,000 (on Floater Basis)	8		NA	22587
65 & above (For family unit of Self and Spouse)	15,00,000 (on Floater Basis)	8		NA	40657
Below 65 (For Self or Spouse only)	20,00,000	4		18724	NA
65 & above (For Self or Spouse only)	20,00,000	4		33702	NA
Below 65 (For family unit of Self and Spouse)	20,00,000 (on Floater Basis)	8		NA	28085
65 & above (For family unit of Self and Spouse)	20,00,000 (on Floater Basis)	8		NA	50554

PREMIUM COMPUTATION

On basis of age of the SAIL Ex-employee (member).

DETAILS OF COVERAGE

All terms, conditions, limits and exclusions as per Base SAIL Medclaim policy.

CLAIM PROCEDURE

All claims will be processed and settled by specified MD India Health Insurance TPA Pvt. Ltd.
The process of Intimation for emergency and planned Hospitalization is same as the

Base SAIL GMC policy. All claims under this policy shall be payable in Indian currency.

Insured is not eligible to receive any amount more than the admissible claim. If he/she goes to a higher Room Rent category than his/her eligible Room Rent category (as per Base Policy), the claimed amount will be proportionately deducted and the deducted amount will not be payable even in the Super Top Up.

But if he/she goes to his eligible Room Rent category, the claim will be settled in full without any deductions in the admissible amount.