



NATIONAL FERTILIZERS LTD
CORPORATE OFFICE : PERSONNEL DEPARTMENT

INTER OFFICE MEMO

From: General Manager (HR) In-charge, NFL C.O.

To: Chief General Manager, Nangal / Bathinda / Panipat
General Manager (I/c), NFL Vijaipur
Zonal Manager, NFL, Lucknow / Bhopal / Chandigarh.

Ref: NFL/Pers/IR/3.34/Medi-Claim/

March 6, 2006

Sub: Renewal of Medi-claim Policy for retired employees.

It has been decided to renew the NFL's Medi-Claim Policy for retired employees for the year 2006-2007 w.e.f. 1st April, 2006.

The salient features of the Medi-Claim Policy, **covering indoor treatment**, along with the Medi-claim proforma to be filled in by the retired employees is enclosed herewith for taking further necessary action at your end.

80% of the premium for a sum insured of Rs.2.00 lakhs will be borne by the Company, while 20% shall be paid by the retired employees, which works out to Rs.700/- per annum. Existing retired members of the said scheme shall, however, be required to make a contribution of Rs.400/- for the year 2006-2007, after adjusting their contribution of Rs.700/- for the year 2005-2006 from the remittance of Rs.1000/- made by them last year.

It is requested to inform the existing members of the Medi-claim Scheme, advising them to submit the requisite proforma / declaration, along with the requisite contribution for the year 2006-2007 by way of bank draft / cheque to Personnel Deptt. of the concerned Unit/Office, from where they last retired, **latest by 15th March, 2006.**

It is also requested that Medi-claim forms, duly filled in by the retired employees, who are desirous of continuing their membership, duly verified by the authorized Officer of Personnel Department, certifying that they have deposited the contribution, may be sent to Corporate Office by **20th March, 2006** to enable us to take further necessary action in the matter.

(L.R. NARULA)
MANAGER (P&IR)

Encl. As above.

Copy to :

- **Chief General Manager (F&A), C.O..** – for information.
- **DGM (MS) C.O.** – for placing the Salient features and the proforma on the website of NFL
- **Manager (Pers) Estt/Assessment, NFL C.O.** – for similar necessary action with respect to intimating the retired employees at their last known address in respect of Corporate Office & Marketing Division.



**NATIONAL FERTILIZERS LTD
CORPORATE OFFICE : PERSONNEL DEPARTMENT**

**Salient Features of Medi-Claim Policy
for retired employees of NFL for the year 2006-2007**

It has been decided to renew the NFL's Medi-Claim Policy for retired employees for the year 2006-2007 w.e.f. 1st April, 2006. The salient features of the Medi-Claim Policy, **covering indoor treatment**, are as under :-

1. The Policy shall cover all existing members (retired employees) of the said Scheme who are desirous of availing medical facilities for the year 2006-2007 and employees retiring on attaining the age of superannuation / resigning from the service of NFL, after rendering not less than 20 years of continuous service in NFL/ FCI group of Companies;
2. The family floater, per family unit, consisting of self and spouse shall be available for sum insured of Rs.2.00 lakhs per year, taking family as one Unit.
3. The Policy shall cover all pre-existing diseases also but will exclude
 - Maternity and domiciliary treatment.
 - Injury or disease directly or indirectly caused by or arising from or attributable to war Invasion, Act of Foreign Enemy, War like operations (whether war be declared or not).
 - Circumcision (unless necessary for treatment of a disease not excluded hereunder or as may be necessitated due to any accident). Vaccination inoculation or change of life or cosmetic or aesthetic treatment of any description, plastic surgery other than as may be necessitated due to an accident or as a part of any illness.
 - Cost of spectacles and contact lenses, hearing aids.
 - Dental treatment or surgery of any kind unless requiring hospitalization.
 - Convalescence, general debility, "run down" condition or test cure, congenital external disease or defects or anomalies, sterility, venereal disease, intentional self-injury and use of intoxicating drugs / alcohol.
 - All expenses arising out of any condition directly or indirectly caused by, or associated with Human T-Cell Lymphotropic Virus Type III (HTLD-III) or Lymphadenopathy Associated Virus (LAV) or the Mutants Derivative or Variations Deficiency Syndrome or any Syndrome or condition of similar kind commonly referred to as AIDS.
 - Charges incurred at Hospital or Nursing Home primarily for diagnostic, X-Ray or laboratory examinations not consistent with or incidental to the diagnosis and treatment of the positive existence or presence of any ailment, sickness or injury, for which confinement is required at a Hospital / Nursing Home.

- Expenses on vitamins and tonics unless forming part of treatment for injury or disease as certified by the attending physician.
 - Injury or disease directly or indirectly caused by or contributed to by nuclear weapons/materials.
 - Treatment arising from or traceable to pregnancy (including coluntary termination of pregnancy and childbirth), (including ceasarain section).
 - Naturopathy treatment.
4. 80% of the premium for a sum insured of Rs.2.00 lakhs will be borne by the Company, while 20% shall be paid by the retired employees, which works out to Rs.700/- per annum. **Existing retired members of the said scheme shall, however, be required to make a contribution of Rs.400/- for the year 2006-2007, after adjusting their contribution of Rs.700/- for the year 2005-2006 from the remittance of Rs.1000/- made by them last year.**
 5. The spouse of the deceased retired/retiring employee will also be eligible to avail the Medical facility, in case the deceased retired employee had rendered not less than 20 years of service in NFL/FCI group of Companies.
 6. The dismissed/discharged employees shall not be covered under the Scheme.
 7. The Company does not take upon itself any liability arising out of admission/non-admission of any claim or any deficiency in service by the Insurance Company; however, needful support wherever deemed necessary, shall be provided by the Company. **The room entitlement in the hospital shall be as per category of Basic pay at the time of their retirement.**
 8. The Management reserves the right to withdraw the Scheme at any stage, as may be considered necessary, and membership of this Scheme does not confer any right of continued membership or any benefit/compensation on discontinuation of Medi-claim Scheme.
 9. The retired employee shall be entitled to be a member of the Medi-claim Scheme only on payment of the requisite contribution, as may be decided by the Management.
 10. An undertaking that retired employees and his spouse are not availing the medical facilities from any organization after retirement.

The retired employees who wish to avail the Medi-Claim Policy are advised to submit their option form as per enclosed proforma along with the Bank Draft /local cheque for the requisite amount to Personnel Deptt. of the concerned Unit/Office, from where they last retired, **latest by 15th March, 2006**. The prescribed form can be downloaded from NFL's website nationalfertilizers.com

Dated

To,
Head of Personnel Department,
National Fertilizers Limited,
Nangal /Bathinda /Panipat /Vijaipur /Corporate Office / CMO

Sub: Request for Renewal / Membership of Medi-Claim Policy.

Dear Sir,

I, the undersigned, wish to avail the Medi-claim Policy for the year 2006-2007. It is requested that the facilities under the Medi-claim Policy, as notified by NFL, may please be made available to me/us. The desired particulars are as under :-

1. Name
Employee No.
Post last held.
2. Name of the Unit/Office from where retired/voluntary retired/resigned/
3. Date of Birth of the Self
Date of Birth of the Spouse
4. Name of the spouse
5. Date of joining NFL
6. Date of retirement/VRS/ Resignation
7. Number of years of continuous service put in NFL/FCI group of companies.
8. Present address
Telephone/Mobile No.
Tel. No..... Mob. No.....
9. Whether member of the existing Medi-Claim Scheme.
10. Preferred location/Station from where Medical facility is to be availed.
11. Two stamp size photographs each for self and spouse, indicating their names on the reverse of the Photograph
(in respect of new members only).
12. Details of Bank Draft Bank Draft No.
(Contribution amount is Rs.700/- Dated.....For Rs.....
for the year 2006-2007. Pre- (issued by.....
existing members may pay in favour of NFL.
Rs.400/- net after adjusting
Rs.300/- out of the contribution
paid during 2005-2006)
13. Existing Medi-claim Card No.

I hereby declare

- a) that I have taken note of all exclusions under the Medi-claim Policy and agree that the Company does not take upon itself any liability arising out of admission/non-admission of any claim or any deficiency in service by the Insurance company; however, needful support wherever deemed necessary, shall be provided by the Company.
- b) that the Management reserves the right to withdraw the Scheme at any stage, as may be considered necessary, and membership of this Scheme does not confer any right of continued membership or any benefit / compensation on discontinuation of Medi-claim Scheme.
- c) that I and my spouse shall be entitled to be a member of the Medi-claim Scheme only on payment of the requisite contribution, as may be decided by the Management.
- d) That myself and my spouse are not availing the medical facilities from any organization after retirement.

e) that the particulars submitted by me are correct and I have rendered the requisite length of service to make me eligible for the membership under the Medi-claim Policy.

Thanking you,

Yours faithfully,

.....
(Signature & Name)