

# DIGIT HEALTH PLUS POLICY

## POLICY SCHEDULE

UIN: GODHLGP21487V032021



Hi,  
Enjoy the extra protection and say bye-bye to regrets !

Your Policy Number is : D145442865

Policy Start Date	26-Apr-2024
Policy Valid Upto Date	25-Apr-2025

### ALL IS WELL BENEFITS <sup>★</sup>

**FREE**

Unlimited Teleconsultations  
with General Physicians

**UP TO  
15%  
OFF**

+ 5% Cashback  
On Medicine Orders

**UP TO  
70%  
OFF**

Health Checks &  
Diagnostics

**FREE  
21  
DAYS**

Access to Yoga sessions  
by professionals

and many more!



Get the **MAXIMUM BENEFIT** out of your  
policy exclusively on the **DIGIT APP!**

Policy Number: D145442865

Endorsement Version Number / Option Number: Base Option

### Details of the Insured

<b>Name of Group Organizer/Manager/ Policy Holder</b>	BRILLIANT INSTITUTE OF ENGINEERING AND TECHNOLOGY		
<b>Address of Group Organizer/Manager/ Policy Holder</b>	ABDULLAPUR (V), ABDULLAPURMET(M), R.R.DIST 501505		
<b>Policy Type</b>	Digit Renewal	<b>Group Type</b>	Employer - Employee
<b>Master Policy Number</b>	D145442865	<b>Policy Tenure</b>	1 Year
<b>Policy inception date</b>	26-Apr-2024	<b>Policy expiration date</b>	25-Apr-2025
<b>GST State Code</b>	UN	<b>GSTIN</b>	UNREGISTERED
<b>TPA Name</b>	Digit in-House		
<b>Policy Description</b>	Base Option		

### Partner Details

<b>Partner name</b>	Satish Kumar Dugyala	<b>Partner Code</b>	1000070
<b>Office Name</b>		<b>RM Name</b>	

### Demographic Summary

Package Name	Sum Insured	0-25	26-30	31-35	36-40	41-45	46-50	51-55	56-60	61-65	66-70	71-75	76-80	81-85	from-86	Total
Package 1	200000	2.0	6.0	33.0	16.0	9.0	10.0	2.0	3.0	1.0	0	0	0	0	0	82.00

Relationship	Lives Count
Self	82
Spouse/Partner	0
Child	0
Parents/Parents-in-law	0
Siblings	0
<b>Total</b>	<b>82</b>

### Premium Summary

Values shown in the below table are per member premium rates excluding taxes.

Package Name	Sum Insured	0-25	26-30	31-35	36-40	41-45	46-50	51-55	56-60	61-65	66-70	71-75	76-80	81-85	from-86
Package1	200000	1,066.59	1,173.77	1,423.52	1,884.14	2,428.92	3,092.29	3,984.80	5,215.55	6,848.75	9,026.02	11,850.05	15,346.37	18,955.96	23,022.10

### Premium Details

<b>Net Premium</b>	1,69,546.44
<b>GST</b>	30,518.36
<b>Gross Premium</b>	2,00,064.80

### Declaration

All terms and conditions are as input by user. Quote is valid for up to 30 days from date of quote creation or policy inception date whichever is earlier. This quote is valid only if all terms are as per expiring policy without any deviation. Non-disclosure of facts material to the assessment of the risk or providing misleading information will nullify the cover under the policy issued thereafter. We reserve the right to charge extra premium / cancel the policy. If there are any additions / alterations to the shared data after the submission of this quotation, then the same will be communicated to the insurer immediately in writing to revalidate the quote.

### Special Conditions

### Other Terms and Conditions

<b>Premium Rating</b>	Additional premium will be charged for each additional member as per the rater given above.
<b>Addition Endorsements</b>	Midterm additions allowed only for natural additions subject to intimation received within 45 days. Any additions for new employee/spouse / children would be allowed within 45 days of joining/ marriage / birth respectively. Any endorsements will be from the date of addition and not from the inception of the policy. Prorated premium will be charged for each member added during the policy term.
<b>Deletion Endorsements</b>	In case of refund endorsements on account of deletion, pro-rata refund for entire family will be done subject to nil claims. Deletion to be intimated immediately on finalization of last working day of employee and within 45 days after the last working day of the employee. In case employee avails the claim after his Last Working Day for which deletion intimation is received after DOA, insurer would recover paid amount from available float balance. Pro-rata refund will be calculated as from last working day if intimation is within 45 days, else intimation date will be consider for calculation subject to nil claim.
<b>Premium Payment Frequency</b>	Yearly
<b>Non-Selection Clause</b>	All insurable members in the group to be insured under policy and there shall be no selection of members unless specifically declared to and agreed by the underwriting team of Digit.
<b>Other Condition 1</b>	Any Doctors/ Surgeons fees charged/paid over and above the Hospital Standard Tariff/Package stand excluded from the scope of the policy. In case of Chamber cases or outside visiting consultant has conducted the surgery or is being consulted, Insurance company would be liable to pay up to the agreed tariff/ package rates with the hospital. The over & above limit will have to be borne by the customer.
<b>Other Condition 2</b>	Cheque dishonor / Non-receipt of payment: The policy is void ab-initio in case of non-receipt of premium or dishonor of Cheque issued towards premium payment
<b>Other Condition 3</b>	This policy is subject to the standard policy wordings, warranties, exclusions and conditions as per "Digit Health plus policy (Revision)" Wordings. In case of dispute, the terms and conditions detailed in the policy document and policy schedule shall prevail.
<b>Other Condition 4</b>	The coverage has been provided basis information provided by you/proposer to us and we reserve the right to cancel the policy since inception without refund of premium as per policy terms and conditions and shall not be liable for any claims if it is found that any of your statements or particulars or declarations in the proposal form or other documents are incorrect /misleading /Fraudulent in any respect on any matter to the grant of a cover or submission of claim in future.

<b>Other Condition 5</b>	The Policy Wording attached herewith includes all the standard coverage offered by Go Digit General Insurance Ltd. to its customers. Your entitlement for coverage/benefits shall be restricted to the Coverage/Benefits as mentioned in this Policy Schedule. For any clarification please call our Call Center Number 1800 258 4242
<b>Other Condition 6</b>	Mumbai, Delhi, Kolkata, Chennai, Bangalore, Hyderabad, Ahmedabad, Pune, and Surat will be considered as Metro Cities. All other region will be considered as non-metro

### Coverage Details Annexure

Below Coverages will be applicable to all packages

## All Packages

**Sum insured**

As Per Package

### Family Composition

Employee Only

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Sum Insured Basis: Individual

Relationship to Employee	Max no. of Members Allowed Per Family	Max Allowable Age at Entry
Self	1	75
Spouse/Partner	0	75
Child	0	30
Parents/Parents-in-law	0	95
Siblings	0	30
<b>Total Dependents</b>	<b>0</b>	

### Sum Insured and Room Rent Restriction

	Per day Limit for Normal Room	Per day Limit for ICU	Room Type Restriction
<b>Metro</b>	1.00 % of SI	2.00 % of SI	No Restriction for Normal Room & No Restriction for ICU
<b>Non-Metro</b>	1.00 % of SI	2.00 % of SI	No Restriction for Normal Room & No Restriction for ICU
<b>Proportionate Deduction Clause</b>	Proportionate Deduction clause applicable where Insured member has opted for room rent higher than eligible room rent category. Proportionate deduction clause will not be applicable for ICU Hospitalization.		
<b>Room Rent Restriction Special Condition</b>	1.Room Rent : Room rent includes bed charges, duty doctor, nursing charges and service charges or amenities (if any) 2.ICU Rent : ICU charges includes ICU bed, general medical support, medical devices expenses, critical care nursing and intensivist charges.		

### Co-Payments, SI Restrictions and Deductibles

<b>Co-payment</b>	Following Co-payment will be applicable on each claim on admissible claim amount
	Self : No Co-pay
	Spouse: No Co-pay
	Child: No Co-pay
	Parent: No Co-pay
	Siblings: No Co-pay
<b>Network Hospital Reimbursement Co-pay</b>	Not Applicable
<b>Non-network Co-pay</b>	Not Applicable

## Waiting Periods

<b>PED Waiting Period</b>	Not Applicable	<b>Initial Waiting Period</b>	Not Applicable
<b>Specific Illness Waiting Period</b>	Not Applicable		

## Maternity

<b>Maternity Limit Normal Delivery</b>	<b>Metro City</b>	Not Covered	<b>Non-Metro</b>	Not Covered
<b>Maternity Limit Caesarian Delivery</b>	<b>Metro City</b>	Not Covered	<b>Non-Metro</b>	Not Covered
<b>Maternity Waiting Period</b>	Not Applicable			
<b>Maternity Limit for Complications</b>	Life-threatening maternity complications will be covered Covered up to Maternity Limit			

## Corporate Buffer

<b>Corporate Buffer</b>	Not applicable
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## Frequent Coverages

<b>Emergency Ambulance</b>	Ambulance charges covered upto 1 % of Sum Insured upto a maximum of INR 1000 per case in case of emergency only. Ambulance charges will be applicable for transferring patient to Hospital or between Hospitals in the Hospitals ambulance or in an ambulance provided by any ambulance service provider only
<b>Day Care Procedures</b>	Day Care procedures are covered up to 100 % of SI
<b>Pre and Post Hospitalization Expenses</b>	Covered up to 30/60 days respectively max up to 100% of Sum Insured.
<b>Lasik Surgery</b>	Not Covered
<b>Aayush Treatment</b>	Not Covered
<b>Domiciliary Hospitalization</b>	Not Covered
<b>Psychiatric ailments</b>	Not Covered
<b>Organ Donor Expenses</b>	Not Covered
<b>Congenital Conditions</b>	Internal congenital diseases are covered up to 100% of SI, external is Not Covered.
<b>Terrorism</b>	Covered
<b>Reasonable And Customary Clause</b>	Reasonable and Customary Charges will be applied on re-imburement claims from non network hospitals where medical treatment is taken during the Policy Period following an Illness or Injury that occurs during the Policy Period, subject to availability of the Sum Insured and any specific limits specified in the Schedule of Benefits and the terms, conditions and exclusions specified in the Policy document.
<b>Claim intimation clause</b>	All reimbursement claims have to be intimated to Digit within 7 days from date of admission.
<b>Document Submission clause</b>	All reimbursement claims have to be intimated to Digit within 30 days from date of discharge.
<b>Dental Treatment (Due to accident only)</b>	Covered upto SI in case of accidental Hospitalization only.

## Advanced and Modern Treatments

Uterine Artery Embolization and HIFU	Covered up to 50 % of SI.
Balloon Sinuplasty	Covered up to 50 % of SI.
Deep Brain stimulation	Covered up to 50 % of SI.
Oral chemotherapy	Covered up to 50 % of SI.
Immunotherapy	Covered up to 50 % of SI.
Intra vitreal injections	Covered up to 50 % of SI.
Robotic Surgery	Covered up to 50 % of SI.
Stereotactic radio surgeries	Covered up to 50% of SI.
Bronchical Thermoplasty	Covered up to 50 % of SI.
Vaporisation of the prostate	Covered up to 50 % of SI.
IONM - (Intra Operative Neuro Monitoring)	Covered up to 50 % of SI.
Stem cell therapy	Covered up to 50 % of SI.
Cyber Knife Treatment	Covered up to 50 % of SI.
Gamma Knife Treatment	Covered up to 50 % of SI.
Cochlear Implant treatment	Covered up to 50 % of SI.

## OPD

OPD Sum Insured	OPD Treatment is Not Covered.
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## Digit Advantage Covers

Automatic Sum Insured Reinstatement	Up to 50% of Base SI will be reinstated provided that the 100% of the base SI is exhausted and subsequently insured needs additional cover for unrelated illness / condition within the policy period. The second hospitalization must happen after the original Sum Insured has already been exhausted and there is a minimum gap of 45 days since the Sum Insured was exhausted and Insured person was discharged from the hospital for the reinstatement to trigger. Sum Insured reinstatement will also be applicable in family floater policies, where other family members may reinstate the Sum Insured in case the Sum Insured has been fully exhausted. 45 days clause shall not be applicable for different insured person within the family.
Wellness Benefits	Wide range of wellness benefits available on the Digit app

## Claim Administrator Details

Contact Details	1800 258 4242
Email ID	healthclaims@godigit.com
For Senior Citizens	seniors@godigit.com

To view Policy Wordings [Click Here](#)

For & On Behalf of Go Digit General Insurance Ltd.



**Authorized Signatory**

Consolidated Stamp Duty has been paid as per Letter of Authorization No.67-B/04/2017-18 Date: 30th May 2017 issued by Department of Stamps and Registration , Bengaluru- 560009 - KARNATAKA.

Go Digit General Insurance Limited, Address: Atlantis, 95, 4th B Cross Road, Koramangala Industrial Layout, 5th Block, Bengaluru, Karnataka-560095, IRDAI Reg. No.-158, CIN: U66010PN2016PLC167410, Website: [www.godigit.com](http://www.godigit.com), Toll-free Number: 1800-258-5956.