



Breathe out worries as you're insured with Digit now.  
Your health is your biggest treasure. Wise of you to protect it.



**Policy Schedule**  
**Digit Health Plus Policy (Revision)**  
**UIN: GODHLGP21487V032021**

For any help, we 're there for you at [1800-258-4242](tel:1800-258-4242)

## Policy Details:

Name of Group Organizer/Manager/ Policy Holder	GO DIGIT GENERAL INSURANCE LIMITED		
Address of Group Organizer/Manager/ Policy Holder	PUNE, , , Maharashtra, 411007	Family Definition	Self + Spouse
Business Type	New Business		
GST State Code	27	GSTIN	27AACCO4128Q1ZW
Master Policy Number	D300225280	Policy Type	Floater
Group Type	Employer Employee	Policy Tenure	365 days
Period of Insurance	From	18-10-2021	00:01 Midnight
	To	17-10-2022	23:59 Midnight
Partner Name/Code	Digit Direct 1000295	Partner Contact/Email	9999999999abc@godigit.com
TPA Name	Medi Assist Insurance TPA Private Ltd		

## All the occasions where money hits your account.

Section with Benefits	Sum Insured (INR)	Limits	Specific Condition
Section 1- Hospitalization Cover			
B. Accidental and Illness Hospitalization Cover	As per Annexure 1	Accommodation/Room Rent: Normal Room 1% / ICU Room 2% of Section 1.B Sum Insured	
B1. Day Care Procedures	**Inbuilt	NA	
B2. Pre Hospitalization Expenses	**Inbuilt	Upto 30 days	
B3. Post Hospitalization Expenses	**Inbuilt	Upto 60 days	
B4. Dental Treatment	**Inbuilt	NA	
B5. Road Ambulance Option	**Inbuilt	1% of Section 1.B Sum Insured Max upto INR 1000	
B6. Bariatric Surgery Cover	**Inbuilt	20% of Section 1.B Sum Insured	
B8. Second Medical Opinion	**Inbuilt	NA	
Corporate Buffer: INR 0		Maximum utilization per family is limited to the family floater sum insured. Corporate buffer can only be utilized for critical illness claim excluding Capped disease and maternity claims for Self, Spouse and children only post exhaustion of base Sum Insured after due approval of company HR	
Initial Waiting Period: 0 days		PED waiting period: 0 Months	
Co-payment: %		Specific waiting period: 0 Months	

Section with Benefits	Sum Insured (INR)	Limits
SECTION 16. WELLNESS BENEFIT PROGRAM	As per Service offered	Services Opted: Various program/campaigns that we facilitate for provision of wellness benefit shall be communicated to you from time to time.

Additional Coverages	Limits
Claim Intimation Clause	7 Days
Parental Co-pay	% of SI.
Dental Treatment (Due to accident only)	Covered upto SI in case of accidental hospitalisation only
Twin Delivery	Maternity sublimit to be at 0% in case of twin delivery
Bariatric surgery	Covered upto 50% of Sum Insured

\*Inbuilt - Sum Insured for these Benefits are not separately available but are a part of Section 1. A. Accidental Hospitalization Cover Sum Insured.

\*\*Inbuilt- Sum Insured for these Benefits are not separately available but are a part of Section 1. B. Accidental & Illness Hospitalization Cover Sum Insured

## Terms and Conditions

- \* Proportionate Deduction clause applicable where Insured member has opted for room rent higher than eligible room rent category
- \* Room rent includes bed charges, duty doctor, nursing charges and service charges or amenities (if any). ICU Rent includes ICU charges includes ICU bed, general medical support, medical devices expenses, critical care nursing and intensivist charges.
- \* Internal congenital diseases are covered, external is not covered.
- \* Mid Term Enhancement of Sum Insured is not allowed.
- \* All reimbursement claims have to be intimated to Digit within 7 days of admission and claim documents submission clause is not applicable. We may accept claims beyond the stated limit on the request of the insured after applying 10% additional co-pay.
- \* "50% Co-Pay for Gamma Knife treatment and Stem Cell Transplantation, cyber-knife treatment, Robotic Surgery. Cochlear Implant treatment shall be restricted to 50% of the SI."
- \* 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.

### Details about your money in black and white

Description	Amount (INR)
Frequency of Payment	Yearly
Number of Employees	24
Total no. lives covered	24

### Some details you shouldn't miss:

1. All additions will be natural additions. The group manager / Master policyholder will give proof related to the date of joining/marriage, whenever the Insurance company asks for the same for validation purposes.
2. **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
3. 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.
4. 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.
5. 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](tel:18002584242).

Claims Administrator Details	
Contact details	1800 258 4242
Email id	<a href="mailto:healthclaims@godigit.com">healthclaims@godigit.com</a>
For Senior citizens	<a href="mailto:seniors@godigit.com">seniors@godigit.com</a>

For & On Behalf of Go Digit General Insurance Ltd.



Authorized Signatory

Printed, Signed, and Executed at Bengaluru

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.

Wish to go through your detailed policy wordings, [click here](#)

In case of any claim, please contact 24-Hour Call Centre at [1800-258-4242](tel:1800-258-4242) or email us at [hello@godigit.com](mailto:hello@godigit.com)

Go Digit General Insurance Ltd. Address: Atlantis, 95, 4th B Cross Road, Koramangala Industrial Layout, 5 Block, Bengaluru, Karnataka 560095, IRDAI Reg No. 158 CIN U66010PN2016PLC167410, HSN: /General Insurance Services, GST Reg. No:33AACCO4128Q1Z7 GSTIN Address:Chennai Business Centre,Bharati 26B & "Jawaharlal Nehru" Salai Ekkaduthangal Guindy 'Industrial Estate',Chennai,Tamil Nadu,PIN-600032 . Website: [www.godigit.com](http://www.godigit.com)

## Annexure 1:

### Member details

Sr. No	Policy No	E-Code	Member ID	Insured name	Member Inception Date	Relationship	Sum Insured (₹)	Premium (₹) (Inc GST)	Invoice Date	Invoice Number
1	D300225312	EMP002	N075435537956940	SELF .	18-10-2021	Self	400,000	7,644.65	18-10-2021	21101800225280
2	D300225313	EMP003	N075435237839349	SELF .	18-10-2021	Self	400,000	7,644.65	18-10-2021	21101800225280
3	D300225315	EMP004	N075435469160873	SELF .	18-10-2021	Self	400,000	7,644.65	18-10-2021	21101800225280
4	D300225316	EMP006	N075435498168427	SELF .	18-10-2021	Self	400,000	7,644.65	18-10-2021	21101800225280
5	D300225317	EMP007	N075435211690770	SELF .	18-10-2021	Self	400,000	7,644.65	18-10-2021	21101800225280
6	D300225318	EMP009	N075435300283864	SELF .	18-10-2021	Self	400,000	7,644.65	18-10-2021	21101800225280
7	D300225319	EMP010	N075435644780191	SELF .	18-10-2021	Self	400,000	7,644.65	18-10-2021	21101800225280
8	D300225320	EMP011	N075435987822466	SELF .	18-10-2021	Self	400,000	7,644.65	18-10-2021	21101800225280
9	D300225321	EMP012	N075435680249311	SELF .	18-10-2021	Self	400,000	7,644.65	18-10-2021	21101800225280
10	D300225322	EMP013	N075435766684350	SELF .	18-10-2021	Self	400,000	7,644.65	18-10-2021	21101800225280
11	D300225323	EMP014	N075435765518383	SELF .	18-10-2021	Self	400,000	7,644.65	18-10-2021	21101800225280
12	D300225324	EMP015	N075435888051338	SELF .	18-10-2021	Self	400,000	7,644.65	18-10-2021	21101800225280
13	D300225325	EMP016	N075435176979933	SELF .	18-10-2021	Self	400,000	7,644.65	18-10-2021	21101800225280
14	D300225326	EMP017	N075435736052764	SELF .	18-10-2021	Self	400,000	2,901.74	18-10-2021	21101800225280
15	D300225328	EMP018	N075435226820738	SELF .	18-10-2021	Self	400,000	2,901.74	18-10-2021	21101800225280
16	D300225329	EMP019	N075435259864240	SELF .	18-10-2021	Self	400,000	2,901.74	18-10-2021	21101800225280
17	D300225330	EMP020	N075435177280662	SELF .	18-10-2021	Self	400,000	2,901.74	18-10-2021	21101800225280
18	D300225331	EMP021	N075435945751207	SELF .	18-10-2021	Self	400,000	2,901.74	18-10-2021	21101800225280
19	D300225332	EMP022	N075435740089064	SELF .	18-10-2021	Self	400,000	2,901.74	18-10-2021	21101800225280
20	D300225333	EMP023	N075435875161814	SELF .	18-10-2021	Self	400,000	2,901.74	18-10-2021	21101800225280
21	D300225334	EMP024	N075435922965086	SELF .	18-10-2021	Self	400,000	2,901.74	18-10-2021	21101800225280
22	D300225337	EMP001	N075435157100908	SELF .	18-10-2021	Self	400,000	7,644.65	18-10-2021	21101800225280
23	D300225338	EMP005	N075435405409271	SELF .	18-10-2021	Self	400,000	7,644.65	18-10-2021	21101800225280
24	D300225339	EMP008	N075435335501646	SELF .	18-10-2021	Self	400,000	7,644.65	18-10-2021	21101800225280

### Invoice Summary :

Invoice Number	Invoice Date	Net Premium	Taxes	Gross Premium
21101800225280	18-10-2021	123329.12	22199.20	145528.32