

Sr. No.	Query	Response
1.	Can the Go Digit STP be availed by any retiree /pensioner / family pensioner?	<p>The Go Digit STP are open to all retirees / pensioner / family pensioner who want to avail them. The policy will be given through the pensioners association. Pensioner's ID proof will be required at the time of claim.</p> <p>ID Proof shall be anyone of the following</p> <ul style="list-style-type: none"> Pensioner's Id card Life Certificate Bank Certification that he is a retiree Certified Proof as Pension Fund Account Holder
2	Is there any difference in the GO Digit terms and conditions?	<p>The Go Digit policy is better than the standard covers available for individual policies wherein</p> <ul style="list-style-type: none"> • Pre-existing diseases are covered from day one. • The STP policy can only be triggered after exhaustion of the Annual (Policy period) Deductible limit of ₹ 3 lacs as admissible amount under the policy terms and conditions.
3	What is the Family definition in the policy?	<ul style="list-style-type: none"> • Option 1: (1 + 1) Retired Employee + Spouse • Option 2: Self Only <p>(Single Retiree can take the policy, if the spouse is covered elsewhere or has expired. In case the retiree has expired the Spouse can also take a policy)</p>
4	Please give complete information of the Go Digit Super top up policy	<ul style="list-style-type: none"> • A Super Top up policy from Go Digit General Insurance Ltd , has been introduced this year. This policy can be given to all retirees who have taken a policy anywhere be it their own Bank / Organization Insurance policy, through Bancassurance, own individual policy or they are covered along with their children either in a group policy or an individual policy. Even those persons who do not hold any base policy can take this super top up policy. • The Go Digit policy is a very unique policy having no limits/ cappings on any disease, ailment or expenditure with a sum insured of ₹ 1 lakh to ₹ 10 lakhs with a Deductible amount of 3,00,000. There is no capping on Room Rent amount, however, member need to get admitted to a maximum of single room A/C and all other charges are paid on actuals. In case, someone opts for higher room category, then proportionate deduction will apply.
5	What is the meaning of Deductible limit	<p>Deductible means the upper limit after which the claims get paid in a super top up policy.</p> <p>If a person has taken a Go Digit Super top up policy of 10 lakhs with a Deductible limit of 3 lakhs, then the Insurance Company will start paying the claims once the aggregate of all admissible claims Paid to the person from another insurance company exceeds 3 lakhs.</p>

6	<p>Will there be cashless available in Go Digit Policy?</p>	<ul style="list-style-type: none"> • Cashless can be availed in the Go Digit Super Top up policy once the base policy with any other insurer is exhausted or in case there is no base policy, when the admissible Deductible limit of 3 lakhs is reached. Go Digit will require the proof of claim paid from the previous insurer or in case of cashless, the authorization / approval letter of the TPA stating that the sum Insured is exhausted. If a claim is made under top up, In case of cashless under base policy, if post claim settlement under the base policy, BSI is still available, Go Digit will reserve the right to recover amount from the claimant up to the available BSI in base policy. • In case a retiree has any alternative policy with another Insurer, the hospital opted if on panel of Go Digit , cashless service would be available once the below documents are made available to the TPA appointed by Go Digit: <ul style="list-style-type: none"> • Copies of bill of the hospital where patient is admitted. • Other documents submitted to the previous insurer. • Settlement letter/ Authorization letter for 3 lakhs as there is a Deductible of ₹3 lacs to trigger Go Digit policy. <p>Please note that if any retiree has a base policy that is of a higher value than 3 lakhs the amount paid by Go Digit will be after deducting the entire amount paid from the Base policy. This is a fundamental premise of any insurance wherein an insured cannot profit out of an insurance policy by claiming higher than the amount paid by them.</p>
7	<p>Who is the TPA.</p>	<p>This year in order to make it more efficient, we have done away with a Third-Party Administrator. Go Digit Insurance company will be directly settling the claims.</p>
8	<p>How the policies will work from 2 separate insurers especially when the terms and conditions are different with different insurers If the base policy is with ceilings / capping and Go Digit super top up is without ceilings/capping, then in what manner / system the Go Digit will process the claim under super top.</p>	<p>The claims put up in each policy will be separately processed as per each policy terms and conditions Example: Mr. A, a retiree, has taken the base policy of ₹3.00 lac of another Insurance Company and along with that he has also taken the super top up of ₹4.00 lac of Go Digit Thus having a coverage of ₹7.00 lac by paying the premium If he is faced with a hospitalization bill of ₹7.00 lac, then the claim will be processed as below: Admissible amount from 7 lakhs will be calculated and only amount above 3 lakhs from the admissible amount will be considered under top up. The first ₹3 lakhs will be processed as per the terms and conditions of the base policy. If the ailment is a capped ailment, then the cappings will be applied. Once the ₹3 lakhs limit is reached. Go Digit will process the remaining ₹4 lakhs as per the terms and conditions of the Super Top up policy</p>

9	Certain other pointers on Cashless	<p>a) In case the Cashless is to be given from the base policy and the Top up policy during the same hospitalization. Then this cashless will be given from the top up on the basis of the final approval letter from the base policy which shows that cashless is given for more than 3 lakhs. Settlement letter shall not be asked.</p> <p>b) In case the approval of cashless in the base policy is for an amount lower than 3 lakhs, then if the final approval states sum insured limit exhausted, then Go digit shall give the approval without any settlement letter.</p> <p>c) In case a person does not hold a base policy, Go digit shall give the approval of the amount by deducting admissible 3 lakhs which is the Deductible limit.</p> <p>d) In case 3 lakhs is exhausted in a previous claim, then only the settlement letter of the previous claim shall be asked for the purpose of settlement of claim.</p> <p>e) If a person has no policy and is bearing the 3 lakhs on his own. The final bill and discharge card with payment receipt of the previous hospitalization is to be submitted stating that the person does not have a base policy.</p>
10	Under the clause for Modern treatments, there is a ceiling for reimbursement i.e. 50% of sum insured. For this purpose, sum insured will be taken - base + super top up policy or only of super top up policy.	<p>For Go Digit they will pay 50% of the Super top up sum insured. Base policy will pay separately as per their terms and conditions. Example if you have a base policy of 3 lakhs with an alternate Insurance company and a top up of 5 lakhs with GO Digit and you have a claim under advanced procedures of say 7 lakhs.</p> <p>The first ₹3 lakhs shall be paid from the base policy.</p> <p>In GO Digit Policy when you claim the balance of 4 lakhs you shall be eligible for maximum of 2.50 lakhs (i.e 50% of 5 lakhs Sum Insured)</p>
11	Post -hospitalisation claim for a retiree. Will it be available?	In the Go Digit STP policy the post hospitalization period is 90 days post discharge from the hospital. Pre-post hospitalization expenses will be considered only if the main claim is admissible under the policy subject to deductible limit and exhaustion of base sum Insured.
12	Does Go Digit super top up have any cappings in the policy.	There are no disease/ailment cappings / ceiling in the Go Digit policy. Even pre-existing diseases are covered from day one.
13	In policy guidelines, it is stated by Go Digit Gen Insurance Co that Deductible limit ₹ 3 lakhs SI with options from 1 Lakh to 10 Lakhs. Does it mean that one has to have base policy SI of ₹ 3 Lakhs.	<p>Even if you do not have a base policy of ₹ 3 lakhs , the initial expense of ₹ 3 lakhs will have to be borne by you and only after that Go Digit Super top up policy shall be triggered.</p> <p>For this purpose you will have to submit complete documents of the previous hospitalization. Please note that the previous hospitalization should be on or after the start date of the policy which in this case is 1st November. Any insured whose policy starts after 1st November. The start date shall be considered from the date on which the policy starts.</p>

14	How is the premium to be paid by the retiree in case he opts for Go Digit STP policy?	<p>1) The Retiree can login with their mobile number on our portal. Those retirees who have already taken the last year policy, their details will already be populated in the software and they will only have to put in their mobile number that they had submitted last year, and their information will be pulled. These persons will only have to check whether all information is correct and make a payment</p> <p>2) The online payment gateway will be given by Digit who will open an escrow account specially for the associations. This payment gateway will be linked to KMD portal. On a daily basis all the payments received by digit will be uploaded as a reverse file directly into our system, and the system will auto reconcile the same on the basis of a unique code generated as an identifier of that retiree and the association to which the retiree belongs.</p> <p>3) For offline payment cheques will have to be given in the name of Go Digit or NEFT or mobile transfers will be done directly into digits account. These offline payments shall also be given to us via upload and so far as the cheque number are captured properly, the reconciliation will be automatically done.</p>
15	What is the last date of joining the policy?	<p>Window to exercise this option will remain open from 10.10.2024 to 28.10.2024, they will be covered from 1.11.2024 to 31.10.2025. Those who avail option from 29.10.2024 and up to 15.11.2024, they will be covered from 20.11.2024 to 31.10.2025.</p>
16	Whether the premium paid by the retiree goes to the Association or Go Digit?	<p>This time we have ensured that the premium primarily directly goes to the Go Digit account to avoid difficulties in reconciliation. There is no need to transfer the amount to the Association who will then pay to the Insurance Company</p>
17	In the event of emergency admission to a hospital which is not in Preferred Provider Network, whether bank retirees have a benefit to get himself admitted on a cashless basis?	<p>The person can get admitted to any hospital in the network for cashless facility.</p> <p>Incase the hospital is not a network hospital than we will require a minimum of 24 hours to ensure cashless., subject to the hospital willing to extend cashless for the hospitalization expenses.</p>
18	In case of death of retiree/ spouse, whether there is provision for nomination to receive the claim amount without Legal Heirship Certificate/Affidavit etc?	<p>Affidavit is a mandatory claim requirement as per regulations. However, in case the spouse is covered in the policy, then the spouse automatically gets it without an affidavit.</p> <p>In case of death of Spouse, the retiree automatically gets paid as policy holder.</p>
19	What are all the hospitalization expenses that come within the purview of Room Rent as per Go Digit Policy?	<p>Bed Charges Nursing charges and RMO charges come under the purview of Room Rent.</p> <p>This is a standard definition as per IRDA</p>

20	Whether concept of “Proportionate deduction” of other expenses applied, if the retiree opts for a room of higher Bed Charges in respect of Super Top-up Policy Claims also.	<p>As long as a retiree takes lowest single room A/c at the admitting hospital, all expenses are covered.</p> <p>Incase they go to a higher room than those expenses which are linked to the higher room will be proportionately deducted.</p> <p>Medicines, Consumables and Investigations will be paid on actuals</p>
21	Whether all new kinds of Approved Advanced Medical Procedures for e.g. Laser Surgery, Robotic surgeries, Stem Cell Therapy etc., for treatment of a disease is payable on hospitalization/day care surgery without Copay.?	There is no Co-pay in the policy. The amount is paid up to 50% of Sum Insured
22	Whether External and Durable Equipment covered under the policy?	If the external durable equipments are used in hospital. Rent is covered. However, purchase of these equipments and rental under domiciliary are not covered in the policy
23	Whether Ambulatory Devices are covered under the policy? If not, whether any other devices are covered?	<p>Ambulatory devices are not covered as per IRDA.</p> <p>Any devices which are for external use are not covered in the policy. However, devices which are implanted within the body i.e. Pacemaker, Joint implants, Lens in a cataract operation, screws, plates, etc are covered in the policy</p>
24	Whether there is inclusion of approved targeted therapies for treatment of Cancer and eye disorders under Day Care Treatment and on a standalone basis?	So long as the treatment is in daycare it is covered. If the same is on Outpatient basis it is not covered in the policy. This will be subjected to modern treatment Sum insured capping.
25	Whether there is inclusion of Intra Vitreal Injections for eye disorders other than ARMD also eligible for coverage benefit?	Yes, but will fall under the purview of Advance medical treatment
26	Is it mandatory to submit copy of Aadhaar Card of claimant is to be submitted along with other claim documents as part of KYC compliance while seeking reimbursement of hospitalization expenses?	KYC is compulsory as per the regulations. Masked Aadhar card will have to be submitted at the time of claim.
27.	In the case of hospitalization treatment	No. Expenses done only at government and NABH full accredited hospitals will be covered after the Deductible of ₹ 3 lakhs is met with

	taken under other systems of medicines, whether the MIPs issued by Go Digit cover treatment taken in other than Govt. Hospitals?	
28	Under Ayush Treatment, whether Naturopathy Treatment is eligible for coverage under Base/Super Top-up Policies?	AYUSH stands for Ayurveda, Yoga, Unani, Siddha and Homeopathy. Condition for coverage will be as per response in point 29. Naturopathy is not a part of the above and not a recognized system of treatment.
29.	Whether Single Retiree can take the Go Digit Super Top-Up, if the spouse is covered elsewhere or expired. In the case of a deceased retiree, whether the surviving spouse can take the Policy?	Yes to both the questions
30	What is the time limit within which intimation of Claim and also submission of claims with requisite documents should be made to Go Digit in respect of Super Top-up Policy?	Claims to be intimated within 7 days from admission and documents to be submitted within 30 days post discharge .
31	Whether the EXCLUSION of OBESITY disease still continues?	Yes.
32.	Under Cash Less Facility – If shifting of patient from earlier Hospital to another hospital is required – Whether it is allowed ?	Yes.