

GO DIGIT LIFE

INSURANCE LIMITED

Sales Brochure

Digit Icon

A Non-Linked Non-Participating Individual Savings Life Insurance Plan

UIN: 165N011V05

Digit Icon

A Non-Linked, Non-Participating, Individual Savings Life Insurance Plan

(This product is also available for online sale)

How do I ensure that my family is financially protected at all times?
How can I adequately provide for the different life stage needs of my family?
Can I create a source of second income to take care of increasing family expenses?
Is there a way to receive regular income even after my retirement?

We all have such questions in our mind as we want to provide the best for our family's financial well-being. At Digit Life Insurance, we understand the importance of your needs and help you by offering a unique life insurance solution which provides cover against unfortunate events and savings either in form stream of regular guaranteed income or lumpsum benefit or both depending on your financial goals.

Presenting Digit Icon

Digit Icon is a unique Life Insurance cum savings plan which provides financial protection to you and your family against unfortunate events. It also gives you guaranteed income and/or maturity benefit to fulfil your family's growing needs and ensures that they enjoy a happy life at all times.

Key Features of the Plan

- **Comprehensive Financial Protection**
  - Life Insurance Cover for financial security of your family
  - Inbuilt Additional death benefit in case of death due to accident
  - Enhanced Financial Protection with Policy Continuance Benefit, Family Income Benefit
  - Health Cover benefit to Senior Citizens

- **Provides a high degree of customization and flexibility to create a tailormade solution.**
  - Flexibility to decide how long you want to pay – Single Pay, Limited Pay and Regular Pay options
  - Flexibility to decide how do you want to receive the benefits – Lumpsum Benefit, Income Benefit, Lumpsum plus Income Benefit, Whole Life Benefit
  - Flexibility to decide from when and for how long do you want to receive the Guaranteed Income
  - Option to receive the guaranteed income in monthly or annual mode
  - Option to accumulate the guaranteed income and withdraw partially or fully later as per your needs.
  - Option to receive Guaranteed income that either stays same throughout the income period or increases during income period

  Please note: Premium will vary depending upon the variants/ options chosen.

Eligibility Conditions

These eligibility conditions are applicable for the individual to be insured under this plan. The policyholder and the life assured can be different in this plan, subject to board approved underwriting guidelines.

Minimum Entry Age (as per last birthday)	All Variants (except Whole Life Benefit)	0 year (18 years when Policy Continuance Benefit on Death or Diagnosis of Critical Illness or Family Income Benefit is chosen)
	Whole Life Benefit	30 years
	In case of Joint Life, entry age of one of the two lives should be at least 18 years	

Maximum Entry Age (as per last birthday)	**Single Pay (SP)**: **Single Life option** • 50 years for Sum Assured on Death equal to 10 x Single Premium • 85 years for Sum Assured on Death equal to 1.25x-1.5 x Single Premium • **Joint Life option**: 65 years **Limited Pay (LP) and Regular Pay (RP)**: 65 years *Joint Life option is not available under limited and regular premium payment options				
Minimum Maturity Age (as per last birthday)	**18 years (In case of joint life option, it is applicable for younger life)**				
Maximum Maturity Age (as per last birthday)	**Single Pay (SP)**: • 55 years for Sum Assured on Death equal to 10 x Single Premium • 90 years for Sum Assured on Death equal to 1.25x-1.5 x Single Premium • **Joint Life option**: 70 years for older life **Limited Pay (LP) and Regular Pay (RP)** • Whole Life Benefit: 100 years • Income Benefit and Income Plus Lumpsum Benefit (where Income starts from 1st,2nd, 5th Policy Year): 75 years • Other Variants: 85 years				
Minimum Premium (in Rs.)	Single	Annual	Half-Yearly	Quarterly	Monthly
	5,000	5,000	2,550	1,288	434
Maximum Premium	No Limit (subject to board approved underwriting guidelines)				
Policy Term Premium Payment Term (PPT)	As provided in table below:				
Premium Payment Frequency	Single Pay Annual , Half-Yearly, Quarterly, Monthly for Limited and Regular Pay				

Variants / Eligibility Conditions		**Lumpsum Benefit**	**Income Benefit**	**Income + Lumpsum Benefit**	**Whole Life Benefit**
Premium Payment Term (PPT) (in years)	Single Pay	1	Not Available		
	Limited and Regular Pay	5 / 6 / 7 / 8 / 10 / 12 & 15	5 / 6 / 7/ 8 / 10 / 12		
Policy Term (in years)	Single Pay	5 to 30	Not applicable		Not applicable
	Limited Pay	6 to 30	(PPT+5) to 50		100 – Entry Age
	Regular Pay	Equal to Premium Payment Term chosen	Not applicable		Not applicable
Income Start Year			**During PPT** – 1st, 2nd, 5th policy year		

	Limited Pay	Not applicable	**After PPT** – PPT+1st, PPT+2nd, PPT+4th, PPT+6th policy year	**After PPT** - PPT+1st, PPT+2nd, PPT+3rd policy year
Income Period (in years)	Limited Pay	Not applicable	Policy Term – (Income Start Year+1)	100 – (Income Start Year+1)

*Maximum Policy Term will be subject to maximum maturity age allowed under Digit Icon

Eligibility Criteria for policies sourced under Point of Sale (POS)

Minimum Entry Age (as per last birthday)	0 year
	In case of Joint Life, entry age of one of the two lives should be at least 18 years
Maximum Entry Age (as per last birthday)	**Single Pay (SP)**: **Single Life option** • 50 years for Sum Assured on Death equal to 10 x Single Premium • 60 years for Sum Assured on Death equal to 1.25x-1.5 x Single Premium • **Joint Life option**: 60 years **Limited Pay (LP) and Regular Pay (RP)**: 60 years *Joint Life option is not available under limited and regular premium payment options
Minimum Maturity Age (as per last birthday)	**18 years (In case of joint life option, it is applicable for younger life)**
Maximum Maturity Age (as per last birthday)	**Single Pay (SP)**: • 55 years for Sum Assured on Death equal to 10 x Single Premium • 65 years for Sum Assured on Death equal to 1.25x-1.5 x Single Premium • **Joint Life option**: 65 years for older life **Limited Pay (LP) and Regular Pay (RP)**: 65 years

Minimum Premium (in Rs.)	Single	Annual	Half-Yearly	Quarterly	Monthly
	5,000	5,000	2,550	1,288	434

Maximum Premium	Maximum Premium shall be subject to maximum Death Benefit of 25,00,000 (The acceptance of any case is subject to Board approved underwriting policy).
Policy Term	As provided in table below:
Premium Payment Term (PPT)	
Premium Payment Frequency	Single Pay Annual, Half-Yearly, Quarterly, Monthly for Limited and Regular Pay

Variants / Eligibility Conditions		**Lumpsum Benefit**	**Income Benefit**	**Income + Lumpsum Benefit**
Premium Payment Term (PPT) (in years)	Single Pay	1	Not Available	
	Limited and Regular Pay	5 / 6 / 7 / 8 / 10 / 12 & 15	5 / 6 / 7/ 8 / 10 / 12	
Policy Term (in years)	Single Pay	5 to 20	Not applicable	
	Limited Pay	6 to 20	(PPT+5) to 20	

	Regular Pay	Equal to Premium Payment Term chosen	Not applicable
Income Start Year	Limited Pay	Not applicable	**During PPT** – 1st, 2nd, 5th policy year
			After PPT – PPT+1st, PPT+2nd, PPT+4th, PPT+6th policy year
Income Period (in years)	Limited Pay	Not applicable	Policy Term – (Income Start Year+1)

*Maximum Policy Term will be subject to maximum maturity age allowed under Digit Icon

In case of Point of Sale (POS):

- Whole Life Benefit is not be available for Point of Sale (POS) policies.
- No Medical examination shall be required for Point-of-Sale policies.

Income Period is the period in policy term during which regular steam of Guaranteed Income, as per the income payout frequency chosen is paid to you till the end of policy term, subject to survival of life assured.

Benefits in detail

A. Death Benefit

Digit Icon ensures that your family is financially protected in your absence by paying them the Death Benefit as a lumpsum amount as follows, subject to the policy being in-force:

a. For Single Life, death benefit will be higher of:
i. Sum Assured on Death plus accrued special additions, if any; or
ii. 105% of total premiums paid* till date of death; or
ii. Surrender Value applicable as on the date of death of the Life Insured.

b. For Joint Life, death benefit will equal to:
i. 1.25 times of Single Premium in case of first death, and
ii. 10 times of Single Premium + accrued special additions, if any, in case of second death.
Policy with joint life will continue after the first death till second death or till the end of policy term, whichever is earlier.

Where Sum Assured on Death shall be will be equal to 'Death Benefit multiple' (DB multiple) times the Single Premium/Annualized Premium**. You will have the option to choose from following Death Benefit multiples available at inception of the policy to choose from:

- **Default Death Benefit**: Under this option, Sum Assured on Death will be equal to a pre-decided Death Benefit multiple of Single Premium / Annualized Premium**, as per the entry age of life assured. The table for Default DB multiples is provided under Annexure I.

- **Chosen Death Benefit:** Under this option, you will have the option to choose the Death Benefit Multiple from the following:

Premium Payment Term	Single Pay	Limited Pay and Regular Pay
Death Benefit Multiple	Single Life: 10x	For variants other than Whole Life Benefit:7x, 10x,15x For Whole Life Benefit: 7x and 10x

Upon the payment of the death benefit, the policy will terminate, and no further benefits are payable.

***Total Premiums Paid** means total of all the premiums received, excluding any extra premium, any rider premium and taxes.

****Annualized Premium** means the premium amount payable in a year chosen by the you, excluding the taxes, rider premiums, underwriting extra premiums and loadings for modal premiums, if any. The applicable taxes, if any, will be collected from you separately as over and above such premium.

B. In-built Additional Accidental Death Benefit

In addition to the Death Benefit stated above, an inbuilt Additional Accidental Death Benefit' (ADB) will be paid to the nominee/beneficiary, if death is caused by accident which has happened during the policy term, provided policy is in-force as on date of such accident. This inbuilt additional ADB will be equal to Sum Assured on Death.
The cover with regard to inbuilt additional ADB will commence on the date of life assured attaining age 18 years and will continue till life assured attaining age 85 or end of the policy term, whichever is earlier. The details of "Accidental Death" and related exclusions are provided under general policy provisions/definitions/exclusions section in this document.

C. Survival Benefit

Survival benefits will be paid on survival of life assured during the policy term subject to the policy being is in-force. This plan offers you the freedom to choose the way you want to receive your survival benefits during the policy term. Survival Benefit payable will depend on the policy variant chosen by you, provided the policy is in-force. You can choose one of these variants at inception of the policy. The survival benefits payable as per the variant chosen shall be as under:

C.1 Lumpsum Benefit

Survival benefit is not applicable under this variant.

C.2 Income Benefit

A regular stream of Guaranteed Income (GI) will be paid during the chosen Income Period. Following options will be available to you at inception under Income Benefit variant:

Option to choose the year in which you want to start the GI	• During Premium Payment Term – 1st, 2nd, 5th policy year • After Premium Payment Term - 1st, 2nd, 4th, 6th policy year after the completion of premium payment term
Option to choose the GI payout frequency	• Annual or Monthly
Option to choose Level or Increasing Guaranteed Income (GI)	• Under Level GI option, GI amount remains same throughout the Income Period. • Under Increasing GI option, GI amount increases during the Income Period as per one of the following sub-options to be chosen at inception: - Increases at a simple rate of 5% per annum during the Income Period - Increases at a simple rate of 15% once in every five years during the Income Period

C.3 Income plus Lumpsum Benefit

A regular stream of Guaranteed Income (GI) will be paid during the chosen Income Period. Following options will be available to you at inception under Income plus Lumpsum Benefit variant:

<table>
<tr><td>Option to choose the year in which you want to start the GI</td><td>• During Premium Payment Term – GI starts in 1st, 2nd, 5th policy year
• After Premium Payment Term - 1st, 2nd, 4th, 6th policy year after the completion of premium payment term</td></tr>
<tr><td>Option to choose the GI payout frequency</td><td>• Annual or Monthly</td></tr>
<tr><td>Option to choose the GI amount if the Guaranteed Income start year is during the premium payment term (i.e, GI starts in 1st or 2nd or 5th policy year)</td><td>Following GI amount as percentage of Annualized Premium can be chosen depending upon the premium payment term chosen:
<table><tr><th>Premium Payment Term (in years)</th><th>GI Amount (as percentage of Annualized Premium)</th></tr><tr><td>5, 6and 7</td><td>20%</td></tr><tr><td>8</td><td>20% or 25%</td></tr><tr><td>10 and 12</td><td>20% or 25% or 30%</td></tr></table>Depending upon the GI amount (as percentage of Annualized Premium) chosen from the above-mentioned options, the corresponding Sum Assured on Maturity amount payable on policy maturity date will be arrived at and will be communicated to you.

In case you choose to start GI after the end of premium payment term (during 1st, 2nd, 4th, 6th Policy Year after the completion of Premium Payment Term), you will have the option to choose the Sum Assured on Maturity amount as percentage of Total Annualized Premiums payable (as stated under Maturity Benefit for this variant). In such case, the corresponding Guaranteed Income amount payable will be arrived at and communicated to you.</td></tr>
<tr><td>Option to choose Level or Increasing Guaranteed Income (GI)</td><td>• Under Level GI option, GI amount remains same throughout the Income Period.
• Under Increasing GI option, GI amount increases during the Income Period as per one of the following sub-options to be chosen at inception:
- Increases at a simple rate of 5% per annum during the Income Period
- Increases at a simple rate of 15% once in every five years during the Income Period</td></tr>
</table>

C.4 Whole Life Benefit

Under this variant, a regular stream of Guaranteed Income will start after the completion of premium payment term. Additionally, a one-time lumpsum Money Back Benefit will also be paid as survival benefit during the policy term, if you choose to avail money back benefit at inception. Following options will be available to you at inception under Whole Life Benefit variant:

Option to choose the year in which you want to start the GI	• 1st, 2nd, 3rd Policy Year after the completion of Premium Payment Term
Option to choose the GI payout frequency	• Annual or Monthly
Option to avail one-time Money Back Benefit	• This benefit will be equal to 50% of total annualized premiums payable under the policy.

	• You will receive this benefit as a lumpsum amount either on the policy anniversary coinciding with or following the life assured attaining age 75 years or 20 years after the policy commencement date, whichever is later.

Under Whole Life Benefit, GI payable will be level income which remains same throughout the Income Period.

Please note:

- Guaranteed Income shall be payable in arrears as per the chosen GI payout frequency.
- In case of death of the life assured after the commencement of survival benefit payouts and before maturity of the policy, future survival benefit payouts, if any, will cease and death benefit will be paid by Company. Survival benefit (GI or money back benefit) paid, if any, after the date of death of the life assured will be deducted from Death Benefit.

Option of accumulation of Guaranteed Income

If you want, you can accumulate the Guaranteed Income payouts during the policy term before they are paid out to you.

In order to opt for this option, you will have to submit a written request to Us at least 30 days before the date of Guaranteed Income payout during the Policy Term. Any change so effected, will be applicable for a minimum of 1 (one) policy year. Interest rate equal to the applicable reverse repo rate plus 0.50% rounded up to the nearest 25 basis points will apply on the Guaranteed Income so accumulated and this rate will be reviewed bi-annually. The applicable interest rate for a financial year will be based on the reverse repo rate applicable as on the respective 1st day of April and October of every financial year. You can withdraw the Guaranteed Income so accumulated in full or in part, any time during the policy term. Any accumulated Guaranteed Income, if not already withdrawn and is excluded from the calculation of maturity benefit or death benefit or benefit payable on surrender of the policy, will be paid in full as lumpsum upon termination of the policy respectively due to maturity of the policy or death of the life assured or surrender of this policy, whichever is earlier.

The basis of determination of interest rate on accumulation of Guaranteed Income can be changed subject to prior approval of Authority.

D. Maturity Benefit

On survival of life assured (on survival of at least one of the two lives in case of joint life policy) till the end of policy term and provided policy is in-force, maturity benefit will be paid to you. It will be paid either as lumpsum benefit or as staggered benefit, depending upon the variant and your choice.

D.1 Lumpsum Maturity Benefit

Following maturity benefit in lumpsum is payable depending upon the variant chosen at inception of the policy.

Variant	**Maturity Benefit will be equal to:**
Lumpsum Benefit	Sum Assured on Maturity + Accrued Special Additions, if any
Income Benefit	Maturity benefit will not be applicable under this variant
Income Plus Lumpsum Benefit	**If Guaranteed Income (GI) payout starts during Premium Payment Term (GI starts in 1st, 2nd or 5th policy year), then,**

	• Sum Assured on Maturity + Accrued Special Additions, if any **If Guaranteed Income (GI) payout starts after completion of Premium Payment Term (GI starts in PPT+1st or PPT+2nd, PPT+4th or PPT+6th policy year), then,** • Sum Assured on Maturity which will be equal to 50% or 100% or 150% of Total Annualized Premium payable. • Any one of the Sum Assured on Maturity percentages (as mentioned in previous bullet point) can be chosen by you at inception and the corresponding Guaranteed Income amount will be arrived at and communicated to you.
Whole Life Benefit	• Sum Assured on Maturity, which will be equal to 100% of total annualized premiums payable under the policy.

Sum Assured on Maturity shall be equal to the specified percentage of Total Annualized Premiums payable during the Premium Payment Term.

Special Additions shall accrue at specific Policy anniversaries during the Policy Term as given in the Table 1 and shall be payable on policy maturity date or on death of life assured or surrender of the policy, whichever is earlier.

Table 1: Special Additions as a % of Annualised Premium

Policy Anniversary	Policy Term less than 20 years	Policy Term greater than or equal to 20 years
(PT minus 11)th	NA	4%
(PT minus 6)th	NA	5%
(PT minus 5)th	1%	NA
(PT minus 4)th	2%	NA
(PT minus 3)rd	3%	NA
(PT minus 2)nd	4%	NA
(PT minus 1)st	10%	12%

- Under Lumpsum Benefit variant, Special Additions shall be applicable only when policy term is more than 5 years.
- Under Income plus Lumpsum variant, Special Additions shall be applicable only when the Guaranteed Income (GI) commences during the chosen premium payment term (i,e when GI starts in 1st or 2nd or 5th policy year).
- Special Additions shall not accrue in case of policies which are in lapsed status or have acquired reduced paid-up status.

D.2 <u>Staggered Maturity Benefit (applicable in case of Lumpsum and Income Plus Lumpsum variants only)</u>

Under these two variants, instead of receiving maturity benefit as a lumpsum amount on policy maturity date (as mentioned above), you will have the option to receive maturity benefit in the form of regular stream of Guaranteed Income after the policy maturity date, over a chosen period called staggered maturity period and a lumpsum amount (if opted for) at the end of such staggered maturity period. However, no death benefit will be available during the staggered maturity period.

The stream of Guaranteed Income commencing after the policy maturity date and the lumpsum amount payable (if opted for) at the end of such staggered maturity period, put together is called Staggered Maturity Benefit.

You have the option to receive the level or increasing Guaranteed Income while opting for staggered maturity benefit. Under increasing Guaranteed Income, you can choose one of the following two sub-options:

a. **Increasing every year -** The Guaranteed Income will increase at a simple rate of 5% p.a. during staggered maturity period.

b. **Increasing every 5 years -** The Guaranteed Income will increase at a simple rate of 15% once in every 5 years during the staggered maturity period.

You can choose this option of Staggered Maturity Benefit either at inception of the policy or during the last policy year, but at least 6 months before the policy maturity date.

In case, you choose Staggered Maturity Benefit at inception:

- The minimum staggered maturity period shall be 2 years and maximum staggered maturity period shall not exceed 50 years minus policy term.
- The Guaranteed Income payable during the staggered maturity period along with a lumpsum amount, if opted for, at the end of such staggered maturity period will be communicated upfront to you. In case you decide to have a lumpsum amount at the end of staggered maturity period, you will have the option to decide the lumpsum amount by choosing it as a percentage of the sum total of annualized premiums payable during the policy term.

In case, you choose Lumpsum Maturity Benefit at inception but decide to have Staggered Maturity Benefit during last policy year:

- Prevailing interest rate will be applicable as on date of receiving request for staggered maturity benefit. The prevailing G-Sec interest rates as per the following table (Table 2) shall be used for deriving staggered maturity benefit while applying explicit loading of 1%:

Table 2

Staggered Maturity Period	**Prevailing G-Sec rates**
Up to less than 5 years	Prevailing G-Sec rates of 5 year term
5 to 9 years	Prevailing G-Sec rates of 10 year term
10 to 14 years	Prevailing G-Sec rates of 15 year term
15 years and above	Prevailing G-sec rates of 20 year term

- Using the above-mentioned interest rates in Table 2, 99% of the lumpsum maturity benefit amount available at policy maturity date will be considered for the equivalent Guaranteed Income during staggered maturity period or Guaranteed Income during staggered maturity period plus lumpsum Benefit at the end of such staggered maturity period, as the case may be.
- Any change in the basis of determining the rate for such Staggered Maturity Benefit shall be made by the Company with prior approval of IRDAI.
- The basis of determination of Benefits under Staggered Maturity can be changed only after approval of IRDAI.
- Staggered maturity period cannot be more than 50 years when this option is chosen during the last policy year.

Any time during the staggered maturity period, or if staggered maturity benefit is chosen at the inception of the policy, then during the last policy year as well, you can commute all future Guaranteed Income payouts (or in case of death of life assured during staggered maturity period, nominee can also decide to do the same) to receive the lumpsum amount. The value of such lumpsum amount will be 99% of net present value of outstanding payouts using the applicable interest rate as on the date of exercising commutation option. The applicable rate will be the prevailing G-Sec interest rates as per the Table 2 corresponding to the outstanding staggered maturity period. On exercising the option of commutation during the staggered maturity period, all the benefits and rights under the policy shall terminate.

E. Optional Benefits

You can choose one or more optional benefits at the inception of the policy, subject to terms and conditions of the policy. These optional benefits are not applicable for single pay and point of sale (POS) policies.

E.1 Policy Continuance Benefit on Death:

This option can be chosen only under Lumpsum Benefit, Income Benefit and Income Plus Lumpsum Benefit variants.

If "Policy Continuance Benefit on Death" is chosen by you, then upon death of the life assured any time during the policy term, following benefits will be paid to the nominee:

a) Death Benefit equal to Sum Assured on Death will be immediately paid as a lump sum amount
b) All future survival benefits and / or maturity benefit, (as applicable depending upon the variant chosen) will be paid to the nominee/beneficiary as and when due, without payment of any future premiums, as would have been the case had the life assured been alive and would have been paying the premiums.

Policy Continuance Benefit on Death can be chosen only when policyholder and life assured are same.

E.2 Family Income Option:

This option can be chosen only under Income Benefit variant and Income Plus Lumpsum Benefit variant.

Under this option, upon death of life assured during the policy term, following benefit will be paid to the nominee in addition to lumpsum death benefit:

50% of the Guaranteed Income (as applicable on date of death of Life Assured or first instalment of Guaranteed Income, whichever is higher), which was payable as Survival Benefit to the Policyholder, shall be paid to the nominee as and when due during the remaining Income Period or for 10 years, whichever is higher.

E.3 Policy Continuance Benefit on diagnosis of Critical Illness

This option can be chosen only under Lumpsum Benefit, Income Benefit and Income Plus Lumpsum Benefit variants.

Under this option, in case the life assured is diagnosed with any of the listed critical illness condition during the policy term, then on admission of claim, following benefits shall be payable:

a. Additional critical illness benefit equal to 5 times of annualized premium will be paid in lumpsum. Here additional means, this critical illness benefit will be over and above the death benefit under the policy and will not be deducted from the death benefit.
b. The policy will continue and future premiums, if any, will be waived off.
c. All future survival benefits and / or maturity benefit (as applicable depending upon the variant chosen), will be paid as and when due under the policy.
d. The additional critical illness benefit under this option shall be applicable till the end of chosen policy term or till life assured attaining age 75 years, whichever is earlier.
e. However, on occurrence of death of life assured anytime during the policy term, applicable death benefit will be paid to the nominee and policy will terminate upon payment of death benefit.
f. Policy Continuance Benefit on diagnosis of Critical Illness can be chosen only when policyholder and life assured are same.

E.4 Senior Citizen Health Benefit

Under this option, in case the life assured is diagnosed with any of the listed critical illness post attaining age 60 years (as on last birthday) during the policy term, then on admission of claim, following benefits shall be payable:

a. Accelerated Critical Illness Benefit equal to 5 times of Annualized Premium will be paid immediately. Critical illness benefit under this option is an accelerated benefit and hence payment of this benefit will not be in addition to the applicable death benefit. It only facilitates an earlier payment of a part (equal to 5 times of Annualized Premium) of applicable death benefit on prior occurrence of the Critical Illness.

b. All future Guaranteed Income payouts, if any, will be increased by 5% and will be paid as and when due.

c. You will have to continue to pay future premiums, if any,

d. Maturity benefit will be paid to you as and when due.

e. In case of death of life assured anytime during the policy term, prevailing death benefit reduced by accelerated critical illness benefit as mentioned in (a) under this option, if already paid earlier, will be paid to the nominee and the policy will terminate thereafter.

f. The accelerated critical illness benefit under this option shall be applicable till end of policy term or life assured attaining age 75 years, whichever is earlier.

This option cannot be chosen along with Policy Continuance Benefit on Diagnosis of Critical Illness.

Following is the list of Critical Illnesses /Surgical procedures covered under this Policy, if Policy Continuance Benefit on Diagnosis of Critical Illness or Senior Citizen Health Benefit are chosen.

Ta	Category	Critical Illness
1	**Cancer**	Cancer of Specified Severity
2	**Cardiovascular system**	Myocardial Infarction
3		Open Heart Replacement or Repair of Heart Valves
4		Surgery to Aorta
5		Primary (Idiopathic) Pulmonary Hypertension
6		Open Chest CABG
7	**Major Organ Transplant**	End Stage Lung Failure
8		End Stage Liver Failure
9		Kidney Failure Requiring Regular Dialysis
10		Major Organ/ Bone Marrow Transplant
11	**Nervous System**	Apallic Syndrome
12		Benign Brain Tumour
13		Coma of Specified Severity
14		Major Head Trauma
15		Permanent Paralysis of Limbs
16		Stroke Resulting in Permanent Symptoms
17		Motor Neurone Disease with Permanent Symptoms
18		Multiple Sclerosis with Persisting Symptoms
19	**Others**	Loss of Independent Existence
20		Aplastic Anaemia

Exclusions pertaining to Critical Illness Benefit under Policy Continuance Benefit on Diagnosis of Critical Illness and Senior Citizen Health Benefit are provided under general policy provisions/definitions/exclusions section in this document.

You can choose a combination of the following optional benefits under Digit Icon.

Optional Benefit 1	Optional Benefit 2	Allowed / Not Allowed
Policy Continuance Benefit on Death	Policy Continuance Benefit on Diagnosis of CI	Allowed
Policy Continuance Benefit on Death	Family Income Benefit	Not Allowed
Policy Continuance Benefit on Death	Senior Citizen Health Benefit	Allowed
Policy Continuance Benefit on Diagnosis of CI	Family Income Benefit	Allowed
Policy Continuance Benefit on Diagnosis of CI	Senior Citizen Health Benefit	Not Allowed
Family Income Option	Senior Citizen Health Benefit	Allowed

Other important benefits

F. 6. Auto Pay Benefit

If you choose direct debit as the mode of payment of renewal premium in this plan, then for all the renewal premiums received by us through direct debit mode, Auto Pay Benefit equivalent to 1 % (one percent) of the total of such renewal premiums will be paid to the claimant at the end of premium payment term or on earlier death of life assured.
This option is applicable for limited Pay and regular pay policies only. Renewal premium means premium instalments payable from second policy year onwards during the premium payment term.

G. Wellness benefit

We provide wellness benefits to the life assured which intends to incentivize him/her for taking care of his/her health/fitness and maintaining healthy lifestyle through such preventative and wellness services.

The applicability of the wellness benefit program and its features may be amended from time to time as per the availability of suitable service providers. The list of benefits under this program and terms and conditions applicable to it are provided in Annexure II.

H. Tax Benefit

You may be eligible for tax benefits as per prevailing tax laws:

- On the premiums paid*
- On proceeds of the policy*

*The aforesaid tax benefits are subject to change in tax laws. We therefore urge you to carefully analyse in consultation with your advisor the tax benefits/tax implications, if any that may arise on opting for this policy.

I. Loan Benefit

You have the flexibility to take a loan against your policy in case of financial emergencies. Loan provisions under this policy are mentioned under general policy provisions/definitions/exclusions section.

J. Premium Size Discount

Digit Icon rewards you with additional benefits (Income or Lumpsum), if you pay premium amount more than Rs. 99,999. Depending upon the premium bands, these extra benefits be added as following percentage to base benefit rates.

Premium Band Single/Annualized Premium (Rs.)	**Single Pay (for policy term equal to or more than 10 years)**	**Limited Pay/ Regular Pay**
Less than 1,00,000	Not applicable	Not applicable
1,00,000 to 1,99,999	1%	1%
2,00,000 to 4,99,999	2%	2%
5,00,000 and above	3%	3%

K. Premium Discount to Existing Customers and Female/Transgender Lives

These discounts are applicable to limited and regular pay policies only.

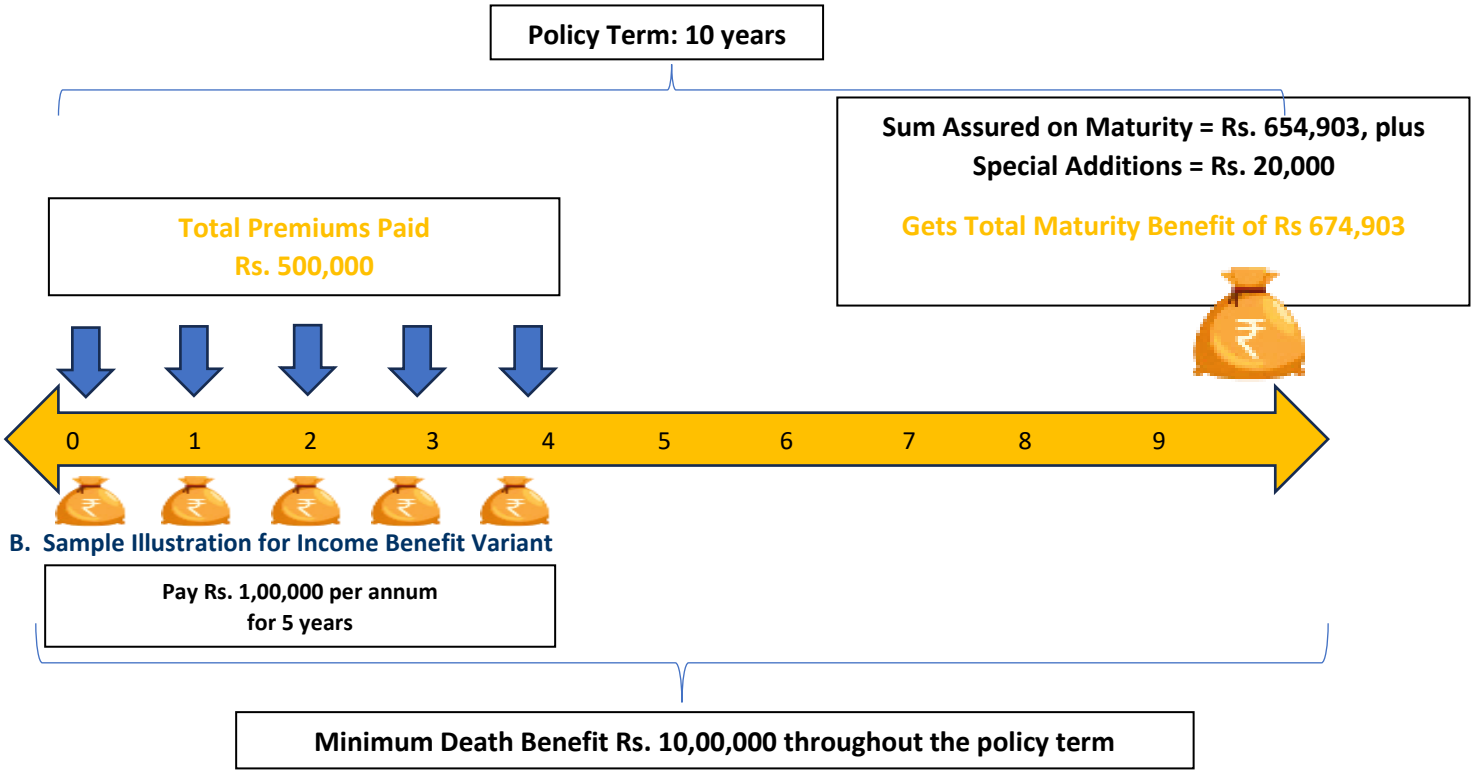
Discount for	**Discount (as a percentage of Premium)**
Existing Customers (if this policy is purchased within one year of purchase of previous policy from Digit)	2% (applicable on First Year Premium)
Female and Transgender Lives	2% (applicable on First Year Premium)

How does this plan work?

Let's understand with help of sample illustration for each variant.

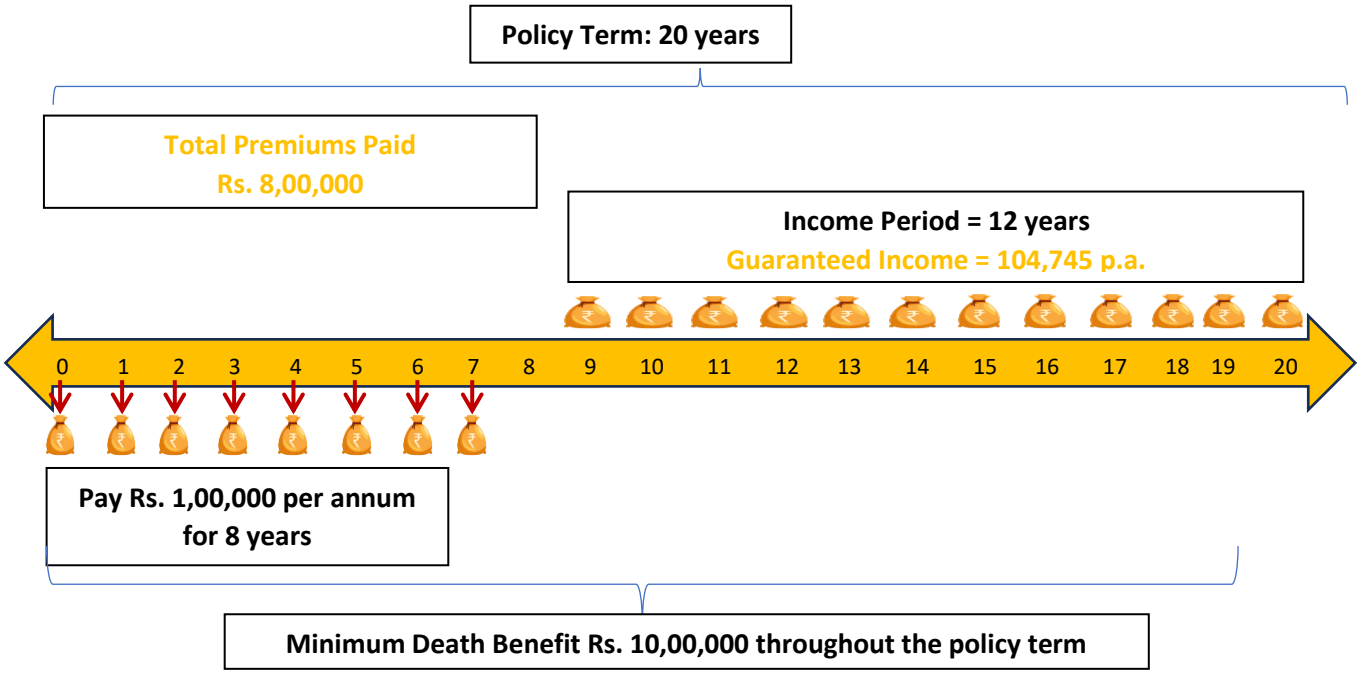
A. Sample Illustration for Lumpsum Benefit Variant

Mr. Kumar, aged 35 years wants to create a lumpsum corpus by the end of 10 years by regular savings for five years. He chooses to pay the annualized premium of Rs.1,00,000 p.a. for 5 years in Lumpsum Benefit variant of Digit Icon. He chooses the policy term of 10 years and death benefit multiple of 10 times of annualized premium. Let's look at the benefits offered to him under this plan. Diagrammatic illustration for the plan benefits under Lump sum variant is shown below:



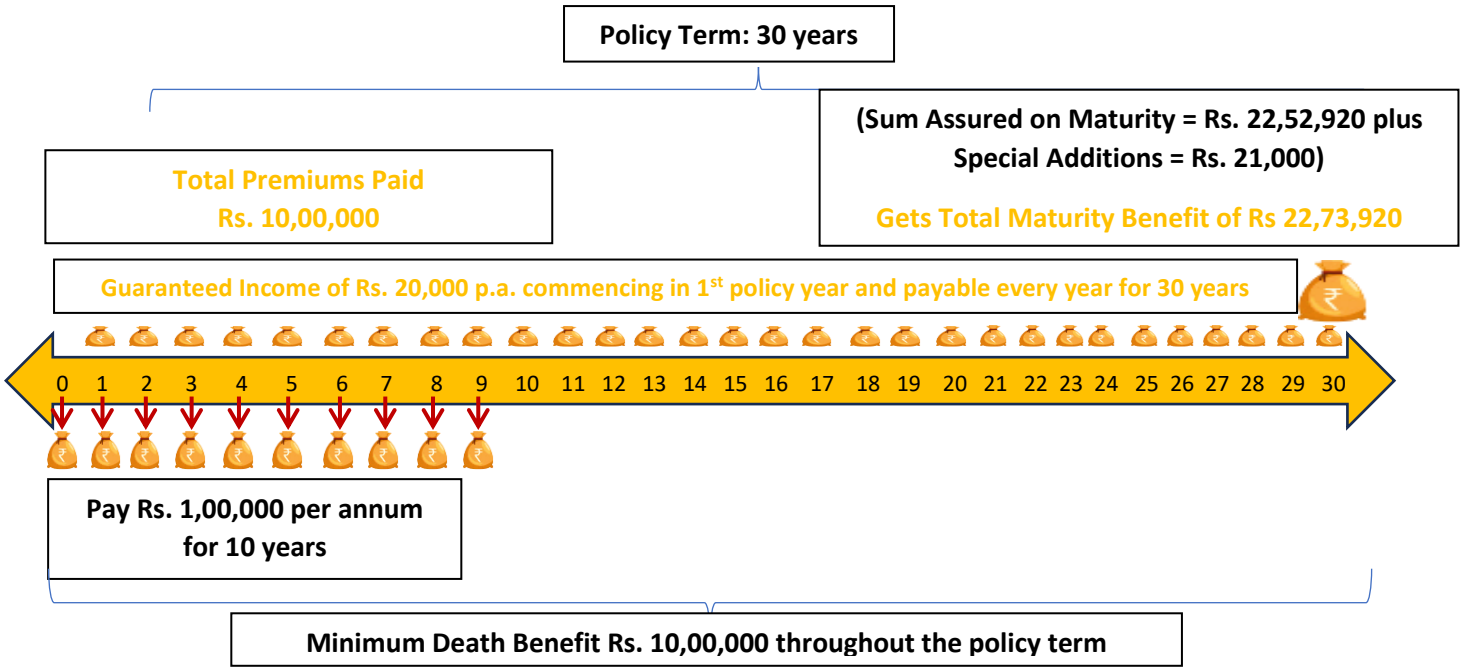
B. Sample Illustration for Income Benefit Variant

Mr. Sharma, aged 35 years is looking for a financial solution which not only provides life insurance cover to him, but also provides a stream of regular guaranteed income to him to take care of increasing family expenses in future. He chooses to pay annualized premium of Rs.1,00,000 p.a. for 8 years with a policy term of 20 years under Income Benefit variant of Digit Icon. He chooses to start the annual guaranteed income from PPT+1st policy year and with death benefit multiple of 10 times of annualized premium. Let's look at the benefits offered to him under this plan. Diagrammatic illustration for the plan benefits under Income Benefit variant is shown below:



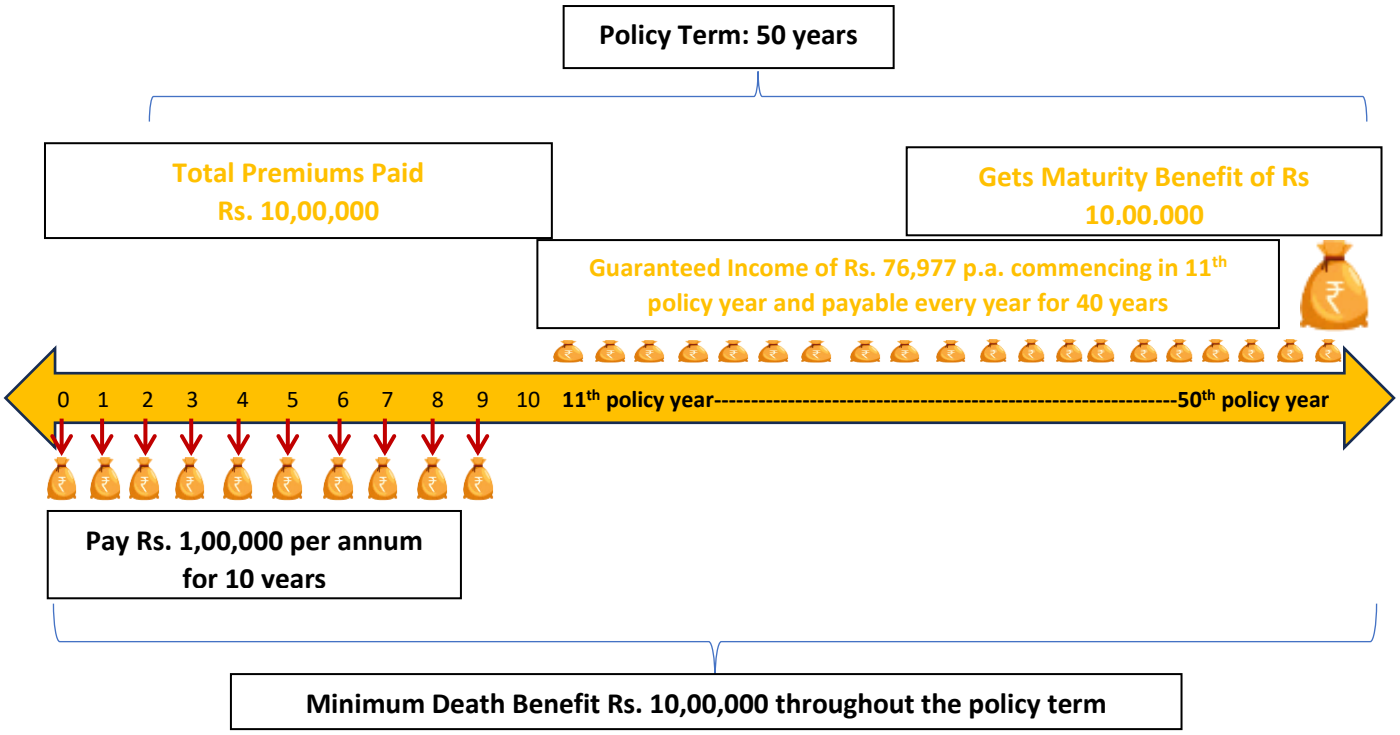
C. Sample Illustration for Income Plus Lumpsum Benefit Variant

Mr. Rai aged 35 years runs a business having an irregular income. He is looking for a financial solution which not only provides life insurance cover to him, but also provides a stream of regular guaranteed income starting from first year itself as a source of second income to him and provides a guaranteed lumpsum benefit at the end of policy term for his financial needs. He chooses to pay the annualized premium of Rs.1,00,000 p.a. for 10 years with a policy term of 30 years under Income Plus Lumpsum Benefit variant of Digit Icon. He chooses to start the annual guaranteed income of 20% of Annualized Premium from 1st policy year and with death benefit multiple of 10 times of annualized premium. Let's look at the benefits offered to him under this plan. Diagrammatic illustration for the plan benefits under Income Plus Lumpsum Benefit variant is shown below:



D. Sample Illustration for Whole Life Benefit Variant

Mrs. Jain aged 50 years is looking for a financial solution which not only provides life insurance cover to her, but also provides a stream of regular guaranteed for life for her post-retirement years. She chooses to pay the annualized premium of Rs.1,00,000 p.a. for 10 years with a policy term of 50 years under Whole Life Benefit variant of Digit Icon. She chooses to start the annual guaranteed income from PPT+1st policy year and with death benefit multiple of 10 times of annualized premium. Let's look at the benefits offered to her under this plan. Diagrammatic illustration for the plan benefits under Whole Life Benefit variant is shown below:



Flexibilities offered under Digit Icon

A. Premium offset:

You can choose to offset future premiums when due, using all or part of the survival benefit. Residual survival benefit, if any, shall be paid out as and when due to the Claimant.

B. Special Date Option

- The Guaranteed Income payable as survival benefit during the policy term, if any, will be paid on policy anniversaries by default during the Income period. Similarly, in case staggered maturity benefit option is chosen, the Guaranteed Income payable during the staggered maturity period shall be paid on anniversaries after the policy maturity date.
- However, Digit Icon provides an option to receive the guaranteed income on any date (Special Date) other than policy anniversary (for Guaranteed Income payable during the Policy Term) / other than the anniversaries after the policy maturity date (for Guaranteed Income payable during staggered maturity period).
- This option is available only if the Guaranteed Income payout frequency is annual.
- The first Guaranteed Income payout must be at least one year after policy commencement date.
- Pro-rated Guaranteed Income will be paid during the first and last year of income period / staggered maturity period, as the case may be, in case special date option is chosen.
- Once this option is chosen at inception of the policy or during last policy year while choosing staggered maturity benefit, the Guaranteed Income payout frequency or the special date cannot be changed later.

General Policy Provisions / Definitions / Exclusions:

Digit Simplification: *You didn't think you needed to know definitions since your time in school, right? Well, the good news is that you don't need to learn these by heart, as long as you understand them. Certain words and phrases used throughout the Policy have specific meanings, and this section helps to understand them.*

Grace Period: Grace Period means the extra time provided to you from the due date for the payment of premium without any penalty or late fee, during which time the policy is considered to be in-force with the risk cover and other applicable benefits without any interruption, as per the terms and conditions of the policy.

The grace period for payment of premium shall be fifteen (15) days, where you pay the premium on a monthly basis; and 30 days in case of other applicable premium payment frequencies. Grace period is not applicable for Single Premium policies.

Any unpaid due premium is deductible from the benefits that may be payable during the Grace Period. The Company will pay the death benefit upon death of life assured during grace period, subject to the deduction of the premiums due as well as balance premiums, if any, for the policy year during which death has happened.

Lapsation: In case of policy with limited and regular premium term, if at least one full year's premiums have not been paid within the grace period, the policy will lapse on the date of expiry of grace period. The life insurance cover and other applicable benefits will cease, and no benefits will be payable in case of lapsed policies.

You may revive your lapsed policy subject to conditions stated in revival section.

Reduced Paid up (applicable for policies with limited and regular premium term): If at least one full year's premiums have been paid and further due premiums are unpaid and the policy is not surrendered, the policy will acquire the status of reduced paid up on the date of expiry of grace period until the policy is revived for full benefits.

The benefits payable for a policy acquiring reduced paid-up status are reduced benefits and are as per the formula mentioned below:

Reduced Paid-up Death Benefit– Reduced Paid-Up Death Benefit shall be paid as a lump sum amount and shall be highest of following:

- (Reduced Paid-up Factor * Sum Assured on Death) + Accrued Guaranteed Additions, if any; or
- 105% of Total Premiums Paid as on the date of death of life assured; or
- Surrender Value as on date of death of life assured.

Reduced Paid-up Inbuilt Additional Accidental Death Benefit = Reduced Paid-up Factor * Inbuilt Additional Accidental Death Benefit

Reduced Paid-up Survival Benefit

- Reduced Paid-up Guaranteed Income = Reduced Paid-up Factor * Guaranteed Income (payable as and when due)
  (Reduced Paid-up Guaranteed Income is applicable for Income Benefit, Income Plus Lumpsum Benefit and Whole Life Benefit variants)

- Reduced Paid-up Money Back Benefit = Reduced Paid-up Factor * Money Back Benefit
  (Reduced Paid-up Money Back Benefit is applicable for Whole Life Benefit variant only, provided Money Back Benefit is chosen under Whole Life Benefit variant)

Reduced Paid-up Maturity Benefit (Except for Income Variant):

- Lump sum Benefit = (Reduced Paid-up Factor * Sum Assured on Maturity) + Accrued Special Additions, if any

Reduced Paid-up Auto Pay Benefit = Auto Pay Benefit applicable on the renewal premiums paid through direct debit

Where Reduced Paid-up Factor = $\frac{\text{Number of Premiums paid}}{\text{Total number of Premiums payable}}$

Reduced Paid – Up Benefit in case of Policy Continuance Benefit on Death

Waiver of future Premiums under it shall not be available on Policy acquiring reduced paid-up status. Reduced Paid-up Death Benefit shall be equal to the following:

- (Reduced Paid-up Factor * Sum Assured on Death)

Additionally, reduced paid-up survival benefit and / or reduced paid-up maturity benefit, as applicable, will be paid as and when due.

Reduced Paid – Up Benefit in case of Policy Continuance Benefit on diagnosis of Critical Illness

On diagnosis of critical illness, reduced paid-up Additional Critical Illness Benefit will be paid in lumpsum and will be equal to Reduced Paid-up factor * Additional Critical Illness Benefit.
Waiver of Premium shall not be applicable in case of reduced paid-up policies.

Reduced paid-up survival benefit and / or reduced paid-up maturity benefit, as applicable, will be paid as when due.

Upon death of life assured during policy term, reduced paid-up death benefit will be paid to the nominee/beneficiary and policy will terminate on payment of death benefit.

Reduced Paid-up Benefits under Senior Citizen Health Benefit

On diagnosis of critical illness, following benefits will be paid:

Reduced Paid-up Accelerated Critical Illness Benefit on diagnosis of Critical Illness = (Reduced Paid-up Factor * Accelerated Critical Illness Benefit.

+

All future reduced paid-up Guaranteed Income will be increased by 5% and will be paid as and when due.

On maturity of the policy, reduced paid-up maturity benefit (applicable in case of Lumpsum, Income plus Lumpsum and Whole Life Benefit variants) will be paid.

Upon death of life assured during policy term, reduced paid-up death benefit less reduced paid-up accelerated critical illness benefit already paid, if any, will be paid to the nominee/beneficiary.

Reduced Paid-up Benefit under Family Income Option upon death of Life Assured

Following reduced paid-up benefits will be paid under this option:

Reduced Paid-up Death Benefit

+

50% of reduced paid-up Guaranteed Income, as applicable, shall be payable for outstanding income period as and when due or for 10 years, whichever is higher.

A reduced paid-up policy may be surrendered by the policyholder any time before policy maturity date provided the policy has not been terminated earlier.

Any excess payment made (total survival benefit paid minus total reduced paid-up survival benefit payable till the policy acquiring reduced paid-up status) shall be adjusted against the future benefits payable.

Surrender of the Policy: In order to honour unexpected commitments or needs, an option to surrender the policy is available. This policy can be surrendered at any time after commencement of the policy in case of single premium policies. For limited and regular premium term, this policy can be surrendered any time after completion of first policy year, provided one full year's premiums are paid by the policyholder. All benefits under the policy shall automatically terminate upon payment of surrender benefit.

Any Guaranteed Income which is accumulated and are excluded from the calculation of surrender value but not paid yet will be paid in full in addition to the surrender value. Similarly, any excess survival benefit paid will be adjusted against the surrender value payable.

Where, excess survival benefit will be equal to:

- Total survival benefit paid during the policy term,
- Less total reduced paid-up survival benefit payable during the period when full survival benefit was paid,
- Less any recovery made till the date of surrender

The surrender benefit is higher of the Guaranteed Surrender Value (GSV) or Special Surrender Value (SSV), if any. GSV and SSV are as follows:

Guaranteed Surrender Value (GSV): Guaranteed Surrender Value is calculated as following subject to the minimum value of zero:

- GSV Factor multiplied by Total Premiums Paid, plus
- GSV Factor multiplied by accrued special additions, if any, less
- Sum total of survival benefits already paid till date of surrender, if any

GSV Factors:

For Limited Pay and Regular Pay Policies – With Policy Term of 11 years and more

Policy Year of Surrender (in years)	GSV Factor
1	0%
2	30%
3	35%
4 to 7	50%
8 to (Policy Term-2)	MIN (90%, 50% + 50%*(1/(Policy Term – Policy Year + 1)))
(Policy Term – 1) and Last Policy Year	90%

For Limited Pay and Regular Pay Policies – With Policy Term of 5 to 10 years

Policy Year of Surrender (in years)	GSV Factor
1	0%
2	30%
3	35%
(Policy Term – 1) and Last Policy Year	90%
Remaining Policy Years, if any (from 4th year to (Policy Term – 2))	Graduating linearly from 50% until it reaches 90% in (Policy Term – 1)th Policy Year

For Single Premium Policies

Policy Year of Surrender (in years)	Single Pay Policies

1	92%
2	94%
3	96%
4	98%
5 and above	100%

Special Surrender Value (SSV):

The Special Surrender Value will be quoted only on receipt of a Surrender request. Before making a request for Surrender, you may approach Us to know about the Surrender Value in respect of your Policy.

Special Surrender Value (SSV) is determined by the company from time-to-time basis changing economic scenario. The Company may revise SSV based on then prevailing market conditions. Any change in the methodology/formula for calculating SSV shall be subject to approval from IRDAI.
In case, Policy Continuance Benefit on Death or Policy Continuance Benefit on diagnosis of Critical Illness or Family Income Benefit is chosen and triggered, surrender will not be allowed.

In case, Senior Citizen Health Benefit is chosen and triggered, no additional surrender value with respect to the incremental premiums paid towards this optional benefit will be paid.

Revival of the Policy: A Policy in lapsed or reduced paid-up status can be revived during the policy term but within a period of five years from the date of first unpaid premium by submitting the proof of continued insurability to the satisfaction of the board approved underwriting policy and making the payment of all due premiums together with payment of late fees calculated at such interest rate as per formula below and as may be prevailing at the time of the payment.

(10-year benchmark G-Sec Yield + 1.5%) rounded up to multiple of 25 basis points. The revival interest rate will be reviewed on 31st March of every year and any change in revival interest rate will be applicable from the following 1st July to 30th June period.
The current rate of interest for revival is 9.00% p.a. Interest rate will be as prevailing from time to time.
Any change in the basis of determination of interest rate for revivals shall be done only after prior approval of the Authority.

If needed the company may refer it to its medical examiner in deciding on revival of lapsed policy.

A reduced paid-up policy with Policy Continuance Benefit on diagnosis of Critical Illness or Senior Citizen Health Benefit cannot be revived after admission of critical illness claims.

Policy Loan

In case of financial emergencies and need of money, you can also avail loan under this plan once it is eligible for surrender and acquires surrender value. You may obtain a loan on the sole security of the policy and on its proper assignment to the Company. The maximum loan amount that will be advanced at any one time or more than one time shall not exceed 80% of the available surrender value at that point of time and provided that the amount of the loan is not less than Rs.5,000.
On availing the loan under this Policy, you will be required to pay the interest on such loan. The interest rate charged shall be determined by the Company from time to time. The interest on the loan will be compounded and applied annually on the policy anniversary at the rates as prescribed by Us at the time of taking the loan.

The Policy loan interest rate is equal to 10-year G-Sec + 2.0%, rounded up to multiple of 25 bps. Current loan interest rate is 9.50%.

The loan interest rate will be reviewed annually on 31st March of every year and any change in loan interest rate will be applicable from the following 1st July to 30th June. Any change to the basis of determination of interest rate can be made only after prior approval of the Authority.

All fresh loan within the permissible limits will be the difference between maximum permissible loan amount and any outstanding loans including accumulated interest, if any. All the Benefits payable under the Policy (including Surrender Value, Death Benefit, Maturity Benefit, Survival Benefit) shall be first adjusted against outstanding loan and interest accrued thereon, prior to being paid to claimant. For clarity, it may be noted that any such adjustment will be done firstly to repay the accrued loan interest and the balance if any, shall be adjusted toward the principal loan outstanding amount. The in-force polices or fully paid up polices shall not be foreclosed for non-payment of outstanding loan balance even if the outstanding loan balance together with interest exceeds the surrender value. In case of other than in-force or in case of reduced paid-up Policies, if at any point of time, the outstanding loan along with outstanding accrued interest exceeds the surrender value payable under this policy, the policy shall terminate after providing advance notice of three months to you to continue the policy by repaying the outstanding loan amount with interest.

Death Benefit for Minor Life Assured: If age of the life assured is 2 years or more, the risk cover will commence immediately from the date of commencement of policy. If the age of life assured is less than 2 years, the risk cover will commence under the policy on life assured attaining age 2 years. If the age of life assured is less than 2 years and if the life assured dies before attaining age 2 years, only the total premiums paid by you shall be returned and no other death benefit shall be paid.

Vesting for Minor Life Assured:

If the policy is issued on the life of a minor, the policy will vest on him/her on his/her attainment of age of majority and on such vesting; the Company will recognize him/her to be the holder of the policy.

Free Look Period: You will have a period of 30 days from the date of receipt of the policy document to review the terms and conditions of this policy and if you disagree with any of the terms and conditions, you will have the option to return the policy document to the Company stating the reasons for the cancellation upon which the Company shall return the premium paid subject to deduction of a proportionate risk premium for the period of insurance cover in addition to the expenses incurred on medical examination (if any) and the stamp duty charges. All benefits and rights under this policy shall immediately stand terminated on the cancellation of the policy.

Risk factors:

- Digit Icon is a Non-Linked, Non-Participating Individual Life Insurance Savings Product.
- Go Digit Life Insurance Limited is only the name of the Insurance Company and Digit Icon is only the name of the product and does not in any way indicate the quality of the product, its future prospect or returns.
- This product guarantees the benefits stated herein subject to all premiums being paid as and when due and policy being in force.
- The purpose of this brochure is to provide a general overview about this policy. The information herein is indicative of the terms, conditions and exceptions contained in the policy terms and conditions of Digit Icon. Please refer to the policy terms and conditions to understand in detail the associated risks, benefits, etc.
- In the event of any inconsistency / ambiguity between the terms contained herein and the policy terms and conditions, the policy terms and conditions will prevail.
- The acceptance of the proposal shall be subject to prevailing board approved underwriting policy.

Policy changes/alterations:

Guaranteed Income and Lumpsum rebalancing option during Policy Term:

Digit Icon provides you to customize your benefits under the policy as per the changing life stage needs. At any time during the policy term, you have the option to convert the future Guaranteed Income receivable, fully or partially, into a lumpsum payable at maturity and vice-versa. The conversion factor will be derived according to the prevailing age of life assured, applicable income period and prevailing interest rates, subject to the terms and conditions of the policy. The conversion shall be effective from subsequent policy anniversary.

This option is not applicable for Whole Life Benefit variant.

Option to reduce the Premium (applicable only for limited and regular pay policies)

After payment of premiums for first five completed policy years, but before any survival benefit payout has started, you will have the option to decrease the premium upto 50% of the original annualized premium, subject to the minimum premium limits under this policy. Once reduced, the premium cannot be subsequently increased and all outstanding benefits under the policy may be revised by applying a reduction factor subject to the minimum death benefit under this policy.

Revised benefit amount will be calculated as given below:
Revised Benefit amount = (T/Premium Payment Term*B1) + ((Premium Payment Term - T)/Premium Payment Term*B2); where T is the completed number of policy years for which the original premium has been paid, B1 is the original level of benefits payable and B2 is the revised level of benefits corresponding to the reduced premium while taking the premium size discount, if any, in consideration. Applicable special additions will be calculated basis the annualized premium receivable after the reduction.

Change the Premium Payment Frequency as per your need

For limited and regular pay policies, you may choose to pay your premiums annually, half-yearly, quarterly or monthly at inception of the policy. Furthermore, you can also change the premium payment frequency during the premium payment term by providing the written request to the Company, provided the limits of minimum premium for the chosen premium payment frequency under this policy are adhered to, the benefits remain unchanged and in accordance with terms and conditions of the policy. Such change will become effective on the policy anniversary date following the receipt of such request, subject to policy being in force.
For non-annual premium payment frequency, instalment premiums are calculated by applying the loading factor as given below on annual premium:

Premium frequency	Loading factor
Monthly	4%
Quarterly	3%
Half-yearly	2%

Change in Guaranteed Income payout frequency
You may choose to receive Guaranteed Income annually or monthly. Guaranteed Income shall be payable in arrears as per the chosen Guaranteed Income payout frequency. For calculating monthly Guaranteed Income, a loading factor of 4% shall be applied on Guaranteed Income with annual payout frequency (as explained with an example given below).

Example:

Guaranteed Income with annual payout frequency	Rs. 1,00,000
Loading amount to calculate the equivalent monthly Guaranteed Income	(Annual Guaranteed Income*4%) Rs.1,00,000 *4% Rs. 4,000
Equivalent monthly Guaranteed Income	(Annual Guaranteed Income – loading amount)/12 (Rs.100,000 – Rs. 4,000) / 12 Rs. 8,000 per month

The payout frequency of the Guaranteed Income payable during Income Period or during staggered maturity period (if staggered maturity benefit is chosen at inception) needs to be chosen at the inception of the policy or at the time of opting for staggered maturity benefit during the last policy year, as the case may be, and can be changed anytime later by submitting a request at least 30 days before the next anniversary, subject to terms and conditions of the Policy and will be effective from the next anniversary. Once changed, request for next change in the Guaranteed Income payout frequency can be made only after completion of a year. By choosing monthly Guaranteed Income payout frequency, the Guaranteed Income payments will commence 11 months prior to the date of commencement of Annual Guaranteed Income.

Suicide Exclusion (in case of base death benefit)

In case of death of the Life Assured due to suicide within 12 months from the date of commencement of risk under the policy or from the date of revival of the policy, as applicable, the nominee or beneficiary of the policyholder shall be entitled to at least 80% of the total premiums paid till the date of death or Surrender Value available as on the date of death whichever is higher, provided the policy is In Force. The policy will terminate thereafter.

In case of joint life policy, the above clause is applicable if any of the two lives commits suicide within 12 months from the date of commencement of risk under the policy. The policy shall continue with the surviving life assured, if any, as per the terms and conditions of the policy.

Medical Practitioner means a person who holds a valid registration from the Medical Council of any State or Medical Council of India or Council for Indian Medicine or for Homeopathy set up by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within its scope and jurisdiction of license. The registered practitioner should not be the insured or close member of the family.

The person shall not be:

- The Policyholder/ Life Assured himself/herself; or
- An authorized Insurance Intermediary (or related persons) involved with selling or servicing the insurance contract in question; or
- Employed by or under contractual engagement with the Policyholder / Life Assured;
- Related to the Policyholder/ Insured person by blood or marriage.

All medical professionals referred to in definitions, terms and conditions in Digit Icon, that is, cardiologist, neurologist, consultant physician, specialist in respiratory medicine, special medical practitioner, relevant medical specialist shall be registered Medical Practitioners.

Definitions and Exclusions under Inbuilt Additional Accidental Death Benefit

"Accident" is defined as "A sudden, unforeseen and involuntary event, caused by external, visible and violent means.

Accidental Death The Accident shall result in Bodily Injury or injuries to the life assured independently of any other means. Such injury or injuries shall, within 180 days of the occurrence of the Accident, directly and independently of any other means cause the death of the life assured. Such a death is defined as "Accidental Death". The date of the Accident should be after the inbuilt additional ADB coverage start date and before the end of policy term.

Inbuilt Additional Accidental Death Benefit shall be applicable between life assured's attained age of 18 and 85 (both including) provided accident occurs during the policy term.

In case, the Accident occurs while the Life Assured's inbuilt additional ADB coverage is in force, but the Accidental Death occurs after the end of the policy term and within 180 days of the Accident, inbuilt additional ADB Sum Assured applicable at the time of such Accident shall be payable.

Injury means accidental physical bodily harm excluding illness or disease, solely and directly caused by an external, violent, visible and evident means which is verified and certified by a Medical Practitioner.

Exclusions to inbuilt additional Accidental Death Benefit (ADB)

Inbuilt Additional Accidental Death Benefit will not be payable if death occurs from, or is caused by, either directly or indirectly, voluntarily or involuntarily due to or caused, occasioned, accelerated or aggravated by, any one of the following:

1. Any injury before commencement of Accidental Death Benefit Coverage.

2. Infection: Death caused or contributed to by any infection, except infection caused by an external visible wound accidentally sustained.

3. Death arising due to any condition other than death solely and directly as a result of an accident.

4. Intentional self-inflicted injury, attempted suicide / suicide while sane or insane.

5. Insured Person being under the influence of drugs, alcohol, narcotics or psychotropic substances unless taken in accordance with the lawful directions and prescription of a registered independent medical practitioner.

6. War, invasion, act of foreign enemy, hostilities, war like operations (whether war be declared or not), civil war, mutiny, rebellion, revolution, insurrection, military or usurped power, riot or civil commotion, willful participation in strikes / acts of violence.

7. Taking part in any naval, military or air force operation during peace time or during service in any police, paramilitary or any similar organization;

8. Participation by the Insured Person in any flying activity, except as a bona fide fare-paying passenger of a recognized airline on regular routes and on a scheduled timetable. However, Pilots, Cabin crew, aeronautical staff members in a licensed passenger carrying commercial aircraft operating on a regular scheduled route will be covered under this product as per Board Approved Underwriting Policy.

9. Working in underground mines, tunnelling or explosives, or involving electrical installation with high tension supply, or as jockeys or circus personnel, or engaged in Hazardous Activities

10. Participation by the Insured Person in a criminal or unlawful act with criminal intent.

11. Engaging in or taking part in professional sport(s) or any hazardous pursuits, including but not limited to underwater activities involving the use of breathing apparatus or not; martial arts; hunting; mountaineering; parachuting; bungee-jumping, horse racing, diving or riding or any kind of race.

12. Nuclear contamination, the radio-active, explosive or hazardous nature of nuclear fuel materials or property contaminated by nuclear fuel materials or accident arising from such nature. Biological, chemical or radioactive contamination.

Critical Illness Benefit (under Policy Continuance Benefit on Diagnosis of Critical Illness and Senior Citizen Health Benefit) – Definitions and Exclusions

Waiting Period means a period of 90 days beginning from the date of start of insurance coverage or from the date of revival of policy. No amount shall be payable in case of occurrence of covered Critical Illness Condition within the Waiting Period. Waiting Period will not be applicable in case Critical Illness condition/(s) manifests due to an Accident.

Survival Period means the period of 30 days from the date of the first diagnosis of covered Critical Illness Condition that the life assured has to survive to be eligible for receiving Critical Illness Benefit under the policy.

Critical Illness (CI) Condition means the first diagnosis of any of the covered Critical Illnesses or undergoing any surgery explained and defined below:

Standard Definitions

1. CANCER OF SPECIFIED SEVERITY

I. A malignant tumor characterized by the uncontrolled growth and spread of malignant cells with invasion and destruction of normal tissues. This diagnosis must be supported by histological evidence of malignancy. The term cancer includes leukemia, lymphoma and sarcoma.

II. The following are excluded –

- All tumors which are histologically described as carcinoma in situ, benign, pre- malignant, borderline malignant, low malignant potential, neoplasm of unknown behavior, or non-invasive, including but not limited to: Carcinoma in situ of breasts, Cervical dysplasia CIN-1, CIN - 2 and CIN-3.
- Any non-melanoma skin carcinoma unless there is evidence of metastases to lymph nodes or beyond;
- Malignant melanoma that has not caused invasion beyond the epidermis;
- All tumors of the prostate unless histologically classified as having a Gleason score greater than 6 or having progressed to at least clinical TNM classification T2N0M0
- All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below;
- Chronic lymphocytic leukaemia less than RAI stage 3
- Non-invasive papillary cancer of the bladder histologically described as TaN0M0 or of a lesser classification,
- All Gastro-Intestinal Stromal Tumors histologically classified as T1N0M0 (TNM Classification) or below and with mitotic count of less than or equal to 5/50 HPFs;

2. MYOCARDIAL INFARCTION (First Heart Attack of specific severity)

I. The first occurrence of heart attack or myocardial infarction, which means the death of a portion of the heart muscle as a result of inadequate blood supply to the relevant area. The diagnosis for Myocardial Infarction should be evidenced by all of the following criteria:

- A history of typical clinical symptoms consistent with the diagnosis of acute myocardial infarction (For e.g. typical chest pain)
- New characteristic electrocardiogram changes
- Elevation of infarction specific enzymes, Troponins or other specific biochemical markers.

II. The following are excluded:

- Other acute Coronary Syndromes
- Any type of angina pectoris
- A rise in cardiac biomarkers or Troponin T or I in absence of overt ischemic heart disease OR following an intra-arterial cardiac procedure.

3. OPEN HEART REPLACEMENT OR REPAIR OF HEART VALVES

I. The actual undergoing of open-heart valve surgery is to replace or repair one or more heart valves, as a consequence of defects in, abnormalities of, or disease- affected cardiac valve(s). The diagnosis of the valve abnormality must be supported by an echocardiography, and the realization of surgery has to be confirmed by a specialist medical practitioner.

II. Catheter based techniques including but not limited to balloon valvotomy/valvuloplasty are excluded.

4. PRIMARY (IDIOPATHIC) PULMONARY HYPERTENSION

I. An unequivocal diagnosis of Primary (Idiopathic) Pulmonary Hypertension by a Cardiologist or specialist

in respiratory medicine with evidence of right ventricular enlargement and the pulmonary artery pressure above 30 mm of Hg on Cardiac Cauterization. There must be permanent irreversible physical impairment to the degree of at least Class IV of the New York Heart Association Classification of cardiac impairment.

II. The NYHA Classification of Cardiac Impairment are as follows:

- Class III: Marked limitation of physical activity. Comfortable at rest, but less than ordinary activity causes symptoms.
- Class IV: Unable to engage in any physical activity without discomfort. Symptoms may be present even at rest.

III. Pulmonary hypertension associated with lung disease, chronic hypoventilation, pulmonary thromboembolic disease, drugs and toxins, diseases of the left side of the heart, congenital heart disease and any secondary cause are specifically excluded.

5. OPEN CHEST CABG

I. The actual undergoing of heart surgery to correct blockage or narrowing in one or more coronary artery(s), by coronary artery bypass grafting done via a sternotomy (cutting through the breastbone) or minimally invasive keyhole coronary artery bypass procedures. The diagnosis must be supported by a coronary angiography, and the realization of surgery has to be confirmed by a cardiologist.

II. The following are excluded:

- Angioplasty and/or any other intra-arterial procedures

6. END STAGE LUNG FAILURE

I. End stage lung disease, causing chronic respiratory failure, as confirmed and evidenced by all of the following:

- FEV1 test results consistently less than 1 litre measured on 3 occasions 3 months apart; and
- Requiring continuous permanent supplementary oxygen therapy for hypoxemia; and
- Arterial blood gas analysis with partial oxygen pressure of 55mmHg or less ($PaO_2 < 55mmHg$); and
- Dyspnoea at rest.

7. END STAGE LIVER FAILURE

I. Permanent and irreversible failure of liver function that has resulted in all three of the following:
- Permanent jaundice; and
- Ascites; and
- Hepatic encephalopathy.

II. Liver failure secondary to drug or alcohol abuse is excluded.

8. KIDNEY FAILURE REQUIRING REGULAR DIALYSIS

I. End stage renal disease presenting as chronic irreversible failure of both kidneys to function, as a result of which either regular renal dialysis (haemodialysis or peritoneal dialysis) is instituted or renal transplantation is carried out. Diagnosis has to be confirmed by a specialist medical practitioner.

9. MAJOR ORGAN /BONE MARROW TRANSPLANT

I. The actual undergoing of a transplant of:
- One of the following human organs: heart, lung, liver, kidney, pancreas, that resulted from irreversible end-stage failure of the relevant organ, or
- Human bone marrow using haematopoietic stem cells. The undergoing of a transplant has to be confirmed by a specialist medical practitioner

II. The following are excluded:
- Other stem-cell transplants

- Where only Islets of Langerhans are transplanted

10. BENIGN BRAIN TUMOR

I. Benign brain tumor is defined as a life threatening, non-cancerous tumor in the brain, cranial nerves or meninges within the skull. The presence of the underlying tumor must be confirmed by imaging studies such as CT scan or MRI.

II. This brain tumor must result in at least one of the following and must be confirmed by the relevant medical specialist.

- Permanent Neurological deficit with persisting clinical symptoms for a continuous period of at least 90 consecutive days or
- Undergone surgical resection or radiation therapy to treat the brain tumor.

III. The following conditions are excluded:

- Cysts, Granulomas, malformations in the arteries or veins of the brain, hematomas, abscesses, pituitary tumors, tumors of skull bones and tumors of the spinal cord.

11. COMA OF SPECIFIED SEVERITY

I. A state of unconsciousness with no reaction or response to external stimuli or internal needs. This diagnosis must be supported by evidence of all of the following:
   - no response to external stimuli continuously for at least 96 hours;
   - life support measures are necessary to sustain life; and
   - permanent neurological deficit which must be assessed at least 30 days after the onset of the coma.

II. The condition has to be confirmed by a specialist medical practitioner. Coma resulting directly from alcohol or drug abuse is excluded.

12. MAJOR HEAD TRAUMA

I. Accidental head injury resulting in permanent Neurological deficit is to be assessed no sooner than 3 months from the date of the accident. This diagnosis must be supported by unequivocal findings on Magnetic Resonance Imaging, Computerized Tomography, or other reliable imaging techniques. The accident must be caused solely and directly by accidental, violent, external and visible means, and independently of all other causes.

II. The Accidental Head injury must result in an inability to perform at least three (3) of the following Activities of Daily Living either with or without the use of mechanical equipment, special devices or other aids and adaptations in use for disabled persons. For the purpose of this benefit, the word “permanent” shall mean beyond the scope of recovery with current medical knowledge and technology.

III. The Activities of Daily Living are:
   - Washing: the ability to wash in the bath or shower (including getting into and out of the bath or shower) or wash satisfactorily by other means;
   - Dressing: the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances;
   - Transferring: the ability to move from a bed to an upright chair or wheelchair and vice versa;
   - Mobility: the ability to move indoors from room to room on level surfaces;
   - Toileting: the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene;
   - Feeding: the ability to feed oneself once food has been prepared and made available.

IV. The following are excluded:
   - Spinal cord injury;

13. PERMANENT PARALYSIS OF LIMBS

I. Total and irreversible loss of use of two or more limbs as a result of injury or disease of the brain or

spinal cord. A specialist medical practitioner must be of the opinion that the paralysis will be permanent with no hope of recovery and must be present for more than 3 months.

14. STROKE RESULTING IN PERMANENT SYMPTOMS

I. Any cerebrovascular incident producing permanent neurological sequelae. This includes infarction of brain tissue, thrombosis in an intracranial vessel, haemorrhage and embolization from an extracranial source. Diagnosis has to be confirmed by a specialist medical practitioner and evidenced by typical clinical symptoms as well as typical findings in CT scan or MRI of the brain. Evidence of permanent neurological deficit lasting for at least 3 months has to be produced.

II. The following are excluded:

- Transient ischemic attacks (TIA)
- Traumatic injury of the brain
- Vascular disease affecting only the eye or optic nerve or vestibular functions.

15. MOTOR NEURON DISEASE WITH PERMANENT SYMPTOMS

I. Motor neuron disease diagnosed by a specialist medical practitioner as spinal muscular atrophy, progressive bulbar palsy, amyotrophic lateral sclerosis or primary lateral sclerosis. There must be progressive degeneration of corticospinal tracts and anterior horn cells or bulbar efferent neurons. There must be current significant and permanent functional neurological impairment with objective evidence of motor dysfunction that has persisted for a continuous period of at least 3 months.

16. MULTIPLE SCLEROSIS WITH PERSISTING SYMPTOMS

I. The unequivocal diagnosis of Definite Multiple Sclerosis confirmed and evidenced by all of the following:

- investigations including typical MRI findings which unequivocally confirm the diagnosis to be multiple sclerosis and
- there must be current clinical impairment of motor or sensory function, which must have persisted for a continuous period of at least 6 months.

II. Other causes of neurological damage such as SLE are excluded.

Specific Definitions:

17. SURGERY TO AORTA

I. The actual undergoing of major surgery to repair or correct an aneurysm, narrowing, obstruction or dissection of the aorta through surgical opening of the chest or abdomen. For the purpose of this definition, aorta shall mean the thoracic and abdominal aorta but not its branches.

18. APALLIC SYNDROME

I. Universal necrosis of the brain cortex, with the brain stem intact. Diagnosis must be definitely confirmed by a Registered Medical practitioner who is also a neurologist holding such an appointment at an approved hospital. This condition must be documented for at least one (1) month.

19. LOSS OF INDEPENDENT EXISTENCE

I. Confirmation by a Consultant Physician of the loss of independent existence due to illness or trauma, lasting for a minimum period of 6 months and resulting in a permanent inability to perform at least three (3) of Activities of Daily Living.

20. APLASTIC ANAEMIA

I. Irreversible persistent bone marrow failure which results in anaemia, neutropenia and thrombocytopenia requiring treatment with at least two (2) of the following:

- Blood product transfusion;
- Marrow stimulating agents;

- Immunosuppressive agents; or
- Bone marrow transplantation.

II. The Diagnosis of aplastic anaemia must be confirmed by a bone marrow biopsy. Two out of the following three values should be present:
- Absolute Neutrophil count of 500 per cubic millimetre or less;
- Absolute Reticulocyte count of 20,000 per cubic millimetre or less; and
- Platelet count of 20,000 per cubic millimetre or less.

Critical Illness – General Exclusions

The Critical illness or covered surgical procedure should have been diagnosed for the first time in life.
Claim for critical illness benefit will be accepted subject to Survival period of 30 days and Waiting period of 90 days.
Once a claim has been Paid under Critical Illness and / or Surgical Procedure, coverage under Critical Illness Benefit shall cease and no further payment will be made for any consequent disease or any dependent disease.

Notwithstanding anything to the contrary stated herein and in addition to the foregoing exclusions, no Critical Illness benefit no will be payable if the any of the covered Critical illnesses under the policy is caused or aggravated directly or indirectly, voluntarily or involuntarily, due to one of the following:

1. Congenital Condition: Any external congenital condition or related illness is not covered. In case any Internal congenital condition or related illness is known and was/is being treated, is disclosed at proposal stage and accepted, claims will be processed as per policy terms and conditions.

2. Any covered condition or its signs or symptoms having occurred and/or was diagnosed, and/or received medical advice/treatment within the Waiting Period.

3. Drug Abuse: Insured Person being under the influence of drugs, alcohol, narcotics or psychotropic substances unless taken in accordance with the lawful directions and prescription of a registered independent medical practitioner.

4. Pre-Existing Diseases are not covered. Any pre-existing disease at the time of inception of the policy. Pre-existing Disease means any condition, ailment, Injury or disease:
- that is/are Diagnosed by a physician within 48 months prior to the effective date of the policy issued by Company or
- for which medical advice or treatment was recommended by, or received from, a physician within 48 months prior to the effective date of the policy or its revival.

5. Any investigation or treatment for any Illness, disorder, complication or ailment arising out of or connected with the pre-existing Illness shall be considered part of that pre-existing illness.

6. No benefits will be payable for any condition(s) which is a direct or indirect result of any pre-existing conditions unless Life Assured has disclosed the same at the time of proposal or date of revival whichever is later and the Company has accepted the same.

7. Self-inflicted Injury: Intentional self-inflicted injury by the Insured.

8. Suicide: If the Critical Illness was contracted due to attempted suicide.

9. Criminal Acts: Insured's involvement in criminal activities with criminal intent.

9. War, invasion, act of foreign enemy, hostilities, war like operations (whether war be declared or not), civil war, mutiny, rebellion, revolution, insurrection, military or usurped power, riot or civil commotion, willful participation in strikes / acts of violence.

10. Nuclear Contamination: Exposure to radioactive, explosive or hazardous nature of nuclear fuel materials or property contaminated by nuclear fuel materials or accident arising from such nature.

11.Biological, chemical or radioactive contamination.

12. Aviation: Participation by the Insured Person in any flying activity, except as a bona fide fare-paying passenger of a recognized airline on regular routes and on a scheduled timetable. However, Pilots, Cabin crew, aeronautical staff members in a licensed passenger carrying commercial aircraft operating on a regular scheduled route will be covered under this product as per Board Approved Underwriting Policy.

13. Hazardous sports and pastimes: Engaging in or taking part in professional sport(s) or any hazardous pursuits, including but not limited to underwater activities involving the use of breathing apparatus or not; martial arts; hunting; mountaineering; parachuting; bungee-jumping, horse racing or any kind of race.

14. Working in underground mines, tunnelling or explosives, or involving electrical installation with high tension supply, or as jockeys or circus personnel, or engaged in Hazardous Activities

15. Any treatment of the donor for the replacement of an organ.

16. Diagnosis and treatment outside India.

17. Unreasonable failure to seek or follow medical advice or treatment by a medical practitioner leading to occurrence of the insured event or insured person delaying medical treatment in order to circumvent the waiting period or other conditions and restrictions applying to this policy.

Nomination Provisions: The nomination shall be subject to Section 39 of the Insurance Act, 1938, as amended from time to time.

Assignment Provisions: Assignment shall be as per the provisions of Section 38 of the Insurance Act, 1938 as amended from time to time.

Section 41: Prohibition of Rebate: Under the provisions of Section 41 of the Insurance Act, 1938 as amended from time to time

1. No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer:

2. Any person making default in complying with the provisions of this section shall be punishable with fine which may extend to ten lakh rupees.

Section 45 of the Insurance Act, 1938 as amended from time to time

Fraud, misstatement and forfeiture would be dealt with in accordance with provisions of Sec 45 of the Insurance Act 1938 as amended from time to time. For provisions of this Section, please contact the Insurance Company or refer to the policy contract of this product.

Digit Icon - UIN: 165N011V05 Go Digit Life Insurance Limited. IRDAI Registration number: 165, CIN: U66000PN2021PLC206995, Registered Office: Go Digit Life Insurance Limited, Ananta One (AR One), Pride Hotel Lane, Narveer Tanaji Wadi, City Survey No. 1579, Shivajinagar, Pune-411005; Corporate Office: Go Digit Life Insurance Limited, Atlantis,95,4th B Cross Road, Koramangala Industrial Layout, 5th Block, Bengaluru, Karnataka 560095; Helpline Number: 9960126126/18002962626; Website:www.godigit.com/life Email: life@godigit.com

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Beware of Spurious/Fraud Phone Calls: IRDAI is not involved in activities like selling insurance policies, announcing bonus or investment of premiums. Public receiving such phone calls are requested to lodge a police complaint.

Annexure I – Default Death Benefit Multiple

Default Death Benefit Multiple - Single Pay Policies	
Entry Age	**DB Multiple**
0	1.50
1	1.50
2	1.49
3	1.49
4	1.48
5	1.48
6	1.47
7	1.47
8	1.46
9	1.46
10	1.45
11	1.45
12	1.44
13	1.44
14	1.43
15	1.43
16	1.42
17	1.42
18	1.41
19	1.41
20	1.40
21	1.40
22	1.39
23	1.39
24	1.38
25	1.38
26	1.37
27	1.37
28	1.36
29	1.36
30	1.35
31	1.35
32	1.34
33	1.34
34	1.33
35	1.33
36	1.32
37	1.32
38	1.31
39	1.31
40	1.30
41	1.30
42	1.29
43	1.29
44	1.28
45	1.28

Default Death Benefit Multiple – Limited and Regular Pay Policies	
Entry Age	**DB Multiple**
0	15.0
1	15.0
2	15.0
3	15.0
4	15.0
5	15.0
6	14.9
7	14.8
8	14.7
9	14.6
10	14.5
11	14.4
12	14.3
13	14.2
14	14.1
15	14.0
16	13.9
17	13.8
18	13.7
19	13.6
20	13.5
21	13.4
22	13.3
23	13.2
24	13.1
25	13.0
26	12.9
27	12.8
28	12.7
29	12.6
30	12.5
31	12.4
32	12.3
33	12.2
34	12.1
35	12.0
36	11.9
37	11.8
38	11.7
39	11.6
40	11.5
41	11.4
42	11.3
43	11.2
44	11.1
45	11.0

46	1.27		46	10.9
47	1.27		47	10.8
48	1.26		48	10.7
49	1.26		49	10.6
50	1.25		50	10.5
51	1.25		51	10.5
52	1.25		52	10.4
53	1.25		53	10.4
54	1.25		54	10.3
55	1.25		55	10.3
56	1.25		56	10.2
57	1.25		57	10.2
58	1.25		58	10.1
59	1.25		59	10.1
60 to 85	1.25		60 to 65	10.0

Annexure II – Wellness Benefit Program

Following services are applicable under Wellness Benefit Program, subject to availability of suitable service providers.

1. **Doctor on Call**
   Upon Your request, We will facilitate an appointment, through Our empanelled Service Provider, with a Medical Practitioner who can help You by providing round-the-clock medical helpline services through an online portal as a chat service, a call back service or a voice call service or a video call service.

2. **Wellness Coach**
   In order to educate, empower and engage You to become more aware of Your health and proactively manage it, We will, through periodic communications like e-mailers, blogs, videos, webinar and online platform provide You information on wellness coaching including but not limited to the areas as provided below:
   a) Weight Management
   b) Activity and Fitness
   c) Nutrition
   d) Tobacco Cessation
   e) Alcohol Abuse de-addiction Program
   f) Information on various diseases
   g) Dietary Plans

3. **Lab Services and Imaging (For Diagnostic Services)**
   Upon Your request, We will facilitate, through Our empanelled Service Provider, Collection of test samples such as blood, urine, stool etc or imaging for further testing and analysis.
   The cost of these tests and reports will have to be borne by You.

4. **Pharmacy (Home Delivery)**
   Upon Your request, We will facilitate, through Our Empanelled Service Provider, home delivery of the Medications Prescribed by a Registered Medical Practitioner and nutritional supplement from the nearby Network Pharmacy, subject to copy of prescription being shared (wherever required) and availability of the medication with the Pharmacy.
   The cost of the medication will have to be borne by You.

5. **Vital/Physical Activity Monitoring Services**
   Upon Your request, We will facilitate, through Our Empanelled Service Provider, the integration of Your Health Device(s), orDigital Wearables or trackers such as Blood-Pressure Monitors, Glucometers, Wireless Pedometers, heart rate monitors, pulse oximeters, non-invasive wearable blood-sugar sensors, Smart Watches etc. to an online database that will track and assess Your vitals as reported by the device.

It can provide periodic updates and reports of your health status. The cost of the device will have to be borne by You.

6. Reminder Notifications

Upon Your request, We will facilitate, through Our Empanelled Service Provider, routine notification messages via mail or a messaging portal or a follow-up call to You as a reminder to schedule Your medical appointments and/or take daily dosage of Your medicine as per the information shared by You.

7. Medical Wallet

Upon Your request, We will arrange, through Our Empanelled Service Provider, for a medical wallet. This will be a digital cloud service which will allow You to store all Your medical reports online. It will provide easy access of Medical history and reports to the treating Medical Practitioners and to any other person with whom You may share the login and access codes, easing Your need to physically carry documents with You.

8. Report Aggregation

Upon Your request, We will facilitate, through Our Empanelled Service Provider, for regular analysis of Your health status as per the medical records/reports/information or data shared by You. It will highlight your wellbeing or any areas of concern or deterioration in Your health, allowing You to take necessary calls about your health.

9. Home Care Services

Upon Your request, We will facilitate, through Our Empanelled Service Provider, Home Care Services for You in case You are in need of services , including but not limited to the following:

a. Home Care Nursing
b. Patient Assistant
c. Physiotherapy
d. Yoga Trainer
e. Psychologist
f. Palliative Care
g. Renting Medical equipment. For Example - Wheel-Chair, Patient Bed, Oxygen Cylinder etc.
h. Doctor Visit
i. Elderly care and senior living assistance related to their health condition

The cost of the Services/Equipment will have to be borne by You.

10. Ambulance Arrangement Services

Upon request, We will facilitate, through Our Empanelled Service Provider, ambulance services for Your transportation subject to availability of ambulance in the area where such service needs to be arranged.
The cost of the transportation will have to be borne by You.

11. Pick-up and Drop Services for Consultation

Upon Your request, We will facilitate, through Our Empanelled Service Provider, Pick-up and Drop Service, for Your transportation to the Health Care Facility for treatment/Diagnostics subject to availability of vehicle/taxi in the area where such service needs to be arranged.
The cost of the transportation will have to be borne by You.

12. Prioritizing Appointments

Upon Your request, We will facilitate, through Our Empanelled Service Provider, prioritization of Your appointment, based on the urgency, with the Network Providers offering the necessary consultation/treatment/diagnostics/packages/memberships/risk assessment/procedures subject to availability of the service(s). The cost of the Consultancy/Diagnostic will have to be borne by You. These may include the following but not limited to:-

- Doctors' services
- Nursing services
- Dietitian services

13. **Mental wellbeing -** Upon Your request, We will facilitate, through Our empanelled Service Provider, self-assessments, therapy sessions, activities and educational/awareness blogs, videos and webinars. The cost of these sessions will have to be borne by You.

14. **Physiotherapy -** Upon Your request, We will facilitate, through Our empanelled Service Provider, consultation and treatment sessions/packages, pain management sessions, ergonomics sessions The cost of these services will have to be borne by You.

15. **Childcare/Children's activities** - Upon Your request, We will facilitate, through Our empanelled Service Provider, recreational/developmental activities for children of different age groups. The cost of these services will have to be borne by You.

16. **Out-Patient (OPD) Services** - Upon Your request, We will facilitate, through Our empanelled Service Provider, outpatient care services like doctor consultation, pharmacy and diagnostics, both online and onsite. The cost of these services will have to be borne by You.

17. **Fitness** – Upon your request, we will facilitate, through our empanelled service provider, access to membership or classes of fitness activities like but not limited to sports, yoga, Zumba, Pilates, dance, fitness coach services at gymnasiums, health studios, fitness centres, sports centres and playgrounds. The cost of these services will have to be borne by You.

Terms and Conditions applicable to Wellness Benefit Program

1. Any Information provided by You shall be kept confidential.
2. Wellness benefit services are extended through 3rd party Empanelled Service Provider/Medical Experts/Centres. We are acting only as a facilitator, hence We would not be liable for any incremental costs or the services. We will not charge any premium amount for the services. You need to pay directly to the Service Provider/Medical Experts/Centres for the services availed.
3. All medical services are being provided by Empanelled Service Provider/Medical Experts/Centres who are empanelled after full due diligence. Insured Person may however consult their Personal/Family Doctor before availing the medical services. The decisions to utilise the services will solely be at the discretion of the Insured Person.
4. We/Company/Us or its Group Entities, affiliates, officers, employees, agents, are not responsible for or liable for any actions, claims, demands, losses, damages, costs, charges, and expenses which an Insured Person/You may claim to have suffered or sustained or incurred by way of or on account of utilization of any benefits specified herein.
5. This shall not be deemed to substitute the Insured Person's visit or consultation to an Independent Medical Practitioner. The Insured Person is free to choose whether or not to undergo the same and if done whether or not to act on it.
6. We do not assume any liability towards any loss or damage arising out of or in relation to any opinion, advice, prescription, actual or alleged errors, omissions and representations made by the Medical Practitioner.
7. Digit Life Insurance is not responsible in any manner for nature or quality of product/services or discounts provided by the empanelled Service Providers. You can refer to respective Service Provider's terms and Conditions before availing any services.
8. The offerings of the Service Providers, including any discounts or complimentary access / service are subject to change from time to time. For more details, please read policy terms and conditions carefully before concluding sale.

Subject otherwise to all the other terms, conditions, warranties, limitations and exceptions of the Policy to which this Benefit is attached.

Annexure III – Grievance Redressal Mechanism

1) Contact Information for Complaints & Grievance Redressal

a) Meet your Grievance Officer at Your nearest Digit Life Branch Office
b) Write to life@godigit.com from Your registered email address.
c) Call 9960126126/18002962626 from your registered mobile number.

2) Grievance Escalation Matrix

a) **Level 1:** In case the complainant is not satisfied with the response, the complainant can escalate the grievance to Chief Grievance Redressal Officer within 8 weeks from date of complaint resolution at **lifegro@godigit.com.**

Address:
The Chief Grievance Redressal Officer
Go Digit Life Insurance Limited.
Atlantis,95,4th B Cross Road, Koramangala Industrial Layout, 5th Block, Bengaluru, Karnataka 560095

b) **Level 2:** In case the complainant is not satisfied with the response or does not receive any response from the Chief Grievance Redressal Officer within 15 days, complainant may approach the grievance cell of the Insurance Regulatory and Development Authority of India (IRDAI):

IRDAI Grievance Call Centre (IGCC) Address:
Consumer Affairs Department, Insurance Regulatory and Development Authority of India
Survey No. 115/1, Financial District, Nanakramguda, Gachibowli, Hyderabad
Telangana State – 500032
Toll Free Number: 155255 (or) 1800 4254 732
Timings: 8 AM to 8 PM (Monday to Saturday)
Email: complaints@irdai.gov.in
Website: **https://bimabharosa.irdai.gov.in**

c) **Level 3**

Manner of making complaints to Insurance Ombudsman: In case the complainant is not satisfied with the decision/resolution of the Company, or does not receive any response from the Company within 30 days of filing the complaint, the complainant may approach the nearest Insurance Ombudsman. For latest updated list of Ombudsman Office addresses, kindly visit this website https://www.cioins.co.in/Ombudsman

As per the provisions of Rule 13(1) of Insurance Ombudsman Rules, 2017, the Ombudsman shall receive and consider complaints or disputes relating to:

i) delay in settlement of claims
ii) any partial or total repudiation of claims
iii) disputes over premium paid or payable in terms of the policy
iv) misrepresentation of policy terms and conditions
v) legal construction of insurance policies in so far as the dispute relates to claim.
vi) servicing related grievances against insurers, their agents and intermediaries
vii) issuance of policy not in conformity with Proposal form submitted.
viii) non-issuance of insurance policy after premium receipt; and
ix) any other matter resulting from regulatory violation, related to issues mentioned at clauses i. to viii.

As per the provisions of Rule 14 of Insurance Ombudsman Rules, 2017:

Rule 14(1), any person who has a grievance against an insurer, may himself or through his legal heirs, nominee or assignee, make a complaint in writing to the Insurance Ombudsman within whose territorial jurisdiction the branch or office of the insurer complained against or the residential address or place of residence of the complainant is located.

Rule 14(2), the complaint shall be in writing, duly signed by the complainant or through his legal heirs, nominee or assignee and shall state clearly the name and address of the complainant, the name of the branch or office of the insurer against whom the complaint is made, the facts giving rise to the complaint, supported by documents, the nature and extent of the loss caused to the complainant and the relief sought from the

Insurance Ombudsman.

Rule 14(3), no complaint to the Insurance Ombudsman shall lie unless:

i) the complainant makes a written representation to the insurer named in the complaint and
   (1) either the insurer had rejected the complaint; or
   (2) the complainant had not received any reply within a period of one month after the insurer received his representation; or
   (3) the complainant is not satisfied with the reply given to him by the insurer

ii) The complaint is made within one year—

(1) after the order of the insurer rejecting the representation is received; or

(2) after receipt of decision of the insurer which is not to the satisfaction of the complainant. (3) after expiry of a period of one month from the date of sending the written representation to the insurer if the insurer named fails to furnish reply to the complainant.

Rule 14(4), the Ombudsman shall be empowered to condone the delay in such cases as he may consider necessary, after calling for objections of the insurer against the proposed condonation and after recording reasons for condoning the delay and in case the delay is condoned, the date of condonation of delay shall be deemed to be the date of filing of the complaint, for further proceedings under these rules.

Rule 14(5), no complaint before the Insurance Ombudsman shall be maintainable on the same subject matter on which proceedings are pending before or disposed of by any court or consumer forum or arbitrator.