

Standards and Benchmarks for Hospitals in Provider Network Go Digit General Insurance Limited

Objective:

Go Digit General Insurance Limited (“Digit/Company”) intends to create a network of hospitals across the country to provide cashless services for hospitalisation claims for its indemnity health insurance customers.

As per the current process, our health network team shortlists hospitals inter alia on basis of hospital infrastructure, technical capabilities, willingness quality of the healthcare services offered and suitability from customer/business perspective.

With a view to enhance scope for offering cashless facility across the country, IRDAI has issued a circular bearing no. **IRDAI/HLT/CIR/MISC/150/7/2022 on 20th July 2022** whereby insurers are empowered to empanel network providers that meet the standards and benchmarks criteria **as specified by their respective Boards**. In compliance to the said Circular, the standards and benchmarks criteria for Hospitals in Provider Network for the Company is listed below.

Empanelment criteria

road parameters to be considered for hospital empanelment:

1. Hospital Bed count – based on the type of city (Tier1,2,3 or Metro/Non-Metro) – hospital bed count will be considered
2. Speciality – depending on the speciality of the hospital, bed strength and infrastructure of the hospital empanelment will be considered
3. NABH/Rohini/Valid registration – Availability of these certifications will be considered favourable
4. Compliance of Hospital establishment – Basic compliance of bio medical waste, central Oxygen supply, diagnostic and pharmacy services, Ambulance services, power supply, fire safety etc., will be considered favourable
5. Medical and Paramedical staffing – Basic availability of round the clock medical and paramedical staffing including speciality services will be considered favourable

Hospital infrastructure comprises of various facilities which hospital provides to its patients like inpatient hospital beds, critical care services like ICU, Emergency management services, specialist doctors, nurses, duty doctors, pharmacy, diagnostic care facilities etc.

Hospital infrastructure varies largely from city to city. Moreover, large cities have bulk of tertiary care large hospitals which act as super specialty referral care centres for patients while hospitals in medium and smaller cities or villages cater to basic hospitalisation facilities and refer critical patients to higher treatment centres. As an insurer, it becomes cardinal for us to provide access to quality healthcare and critical care facilities to our customers.

Focus of the empanelment activity remains to provide a wide choice of acceptable and good quality healthcare services to our customers across the country.

The empanelment criteria basis infrastructure, hospital type and different tier cities is defined in **Annexure I** and shall primarily be driven on the trends inferred from census data. This shall be subject to revision from time to time.

Other important criteria

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1. Hospitals in network of Third Party Administrators (“TPAs”) with whom the Company has an existing tie-up would be preferred as feedback can be taken for them from TPA network.
2. Hospitals which are blacklisted by peer insurance companies would not be preferred for empanelment.
3. Based on the customer base in a particular location, health network team can continuously track and initiate empanelment process based on the qualifying criteria as mentioned above.
4. Health Network team shall also validate the hospital infrastructure through hospital visits on the basis of claims inwarded etc, from time to time.
5. In case of any malfunctioning or malpractice from the hospital end, agreement can be terminated with a notice agreed in the MOU/Network empanelment agreement and in accordance with any regulatory requirements for de-empanelment process.

Revision of the Criteria:

The empanelment criteria basis infrastructure, hospital type and different tier cities is defined in **Annexure I** and shall primarily be driven on the trends inferred from census data. This shall be subject to revision from time to time.

Review

Head – Health and Head – Legal & Compliance are jointly authorized to make changes in the empanelment criteria as may be required from time to time.

Annexure 1 – [Empanelment Criteria](#)