

# A Study on Consumer Preference Towards Health Insurance with Special Reference Care Health Insurance

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## ABSTRACT

The Insurance is a contract. Paying of the sum assured on the happening of the risk. Risk = un predicted stages in life. It not only insures the future financial operations but also to beat the inflation and make sure that one can appreciate its money value in future. The most challenging phase in the life stages are: To meet current and recurring expenses, to take care of children needs. Build Capital Assets like House or car and over all remain healthy and fine.

A family continues to have these financial needs, whether we survive or not. The insurance industry has eased the planning and makes an individual to achieve the goals of life. A Life Insurance with high premium compensate for the life. The Health Insurance minimizes the risk which are not covered by Life insurance like accident (where the victim is injured but not dead), or any hospital expenses pertaining to insured health. In India Insurance companies are growing rapidly and entry of private players in the market has added lot more competition in the industry, but Banks are not authorized to enter in insurance business, for that they tie – up with any insurance firm that is called “Banc assurance”. Banc assurance is the selling of insurance and banking products through the same channel, most commonly through bank branches.

The aims of this project are to analyses the preference of consumer (investors) towards Health Insurance and then analyze the performance of Health Insurance in the market.

This project is intended to have an understanding of consumer preference towards various investment options and a comprehensive study about the performance of Health Insurance Plan. The project deliverable aims at providing a document which gives an overview of its performance, its importance to the company and how its influence the decision of investors.

**KEYWORDS:** Health Insurance, Consumers Perception, policy.

## 1. INTRODUCTION

Life is full of surprise but what are those surprises turn out to be unpleasant ones? Dismemberment due an accident, a dreaded disease, anything can happen to anyone, anytime, the last thing a person need would

want to bother about is where the treatment cost is going to come from. So we need to be careful and well prepared at the same time.

To meet these uncertainties of life the General Insurance companies have presented a unique innovative "**The HEALTH INSURANCE**". That covers much more than basic hospitalization covers. These products are of two types in general: Individual Health coverage and Family Health cover. The product is designed as such to protect the consumer against the spiralling medical cost while at the same time ensuring most unforeseen casualties through a wide spectrum of benefits. So that one can live worry-free and receive hassle - free medical care. It covers for In-patient hospitalization expenses for accidents/illness including room charges, Surgeon's fees, investigation charges, cost of medicines etc. The stay in the hospital should exceed a period of 24 hours. Out-patient treatment charges are allowed for certain ailments like cataract from the second year), tonsillectomy and lithotripsy. These policies provides through a unique Cashless Facility which gives the convenience of undergoing treatment in anyone of the listed network hospitals (provided by the companies), without having to pay the hospital bills or the Security deposits.

This the consumers have to no longer worry about a lengthy claim process for reimbursement of medical expenses. These policies are seen to provide financial assistance for the consumer and to his/her family against Hospitalization Expenses towards diseases and accidents in India along with host of value additions.

It provides a basic medical cover for all illness (except for certain exclusion) and an optional cover for providing additional sum Insured for CRITICAL ILLNESS like Heart Surgery, Kidney Failure, Cerebral Stroke, Cancer, major organ transplantation. Risks are unavoidable in personal life and in business, but can be managed by proper planning. Maternity expenses (After nine months of the policy date) are assured up to a certain amount by some of the leading Health Insurance companies.

## 1.1 OBJECTIVES

1. To study the consumer preference towards health insurance.
2. To identify the impact of demographic variables on buying behavior of health insurance.
3. To identify the factor that influence customer in the selection of health insurance.
4. To examine the customer's purpose for purchasing health insurance.

## 1.2 STATEMENT OF THE PROBLEM

- It is always very difficult to make insurance investment decisions in this world of investment alternative companies.
- It demanded investors to be knowledgeable and tact full regarding the insurance market. Since, many insurance investments are introduced with in a very short span of time, people even having lot of money are confused to invest their hard earning money in effective manner.
- This confusion made researcher to choose this particular field study in this regard an effort is made to put some light on different investment companies for the sake of bringing down the confusion level among the investors.

- In order to recommend a suitable Insurance company to an investor, one must be aware of the needs of the customer and the importance of his attributes, the current insurance situation and ascertaining attitude towards risk involved in an investment while he makes his Insurance decision.
- A descriptive study is conducted at Care health insurance, Puducherry, with the major Health Insurance Companies, to analyze the effectiveness of their Health Insurance.

## 2. REVIEW OF LITERATURE

**Deepali Garge, Snehal Tare, Smarjeet Das (2020)** aimed to evaluate the source, awareness of health insurance in India among 102 respondents from Maharashtra. Sources of awareness of health insurance include employer, the Internet, newspaper, friends, and television. It was found that there is a need to create awareness among people for health insurance. Health insurance investment should not look at contingency, but it must be a regular habit.

**Madan Mohan Dutta(2021)** analysed the performance of Health insurance sector in India using Regression analysis and found that with better technological expertise coming in from the foreign partners and involvement by the IRDA, the health insurance sector in India would turn around and start to earn profit.

**Dandekar V M (2019)** investigated the scope for growth of the health insurance market in the Bilaspur region among 200 health insurance agents and found that there were difficulties of customers in deciding to opt for the health insurance plan. Government should encourage companies to propagate health insurance facilities to more and more people and agents should explain the benefits of health insurance to customers and to target groups.

**Damodar Basaula (2017)** examined the awareness and satisfaction of customers towards life insurance claim settlement in Nepal. The entrepreneurial development, launching innovative products, increased institutional delivery along with inbound claim calls attracts the customers for policy repurchase. It has claimed that life insurance has not only for security but has been taken as social prosperity through socio economic development.

**T.Kavitha, Dr. A. Latha, S.Jamuna (2012)** investigated factors that influence the policy holders to select the general insurance company by enumerating 25 satisfaction factors. Factor analysis tool identified that respondents were highly satisfied towards Product price, Officers / Agents are easily locatable, Reminder for renewal of policy, Response time, Attitude of Surveyor, Motivation given by the officials to buy the policy, Contacts by the development Officers/Agents after issuing the policy, Agent's attitude in guiding the claim settlement, Company's attitude in settling claims, Amount settled by the company (relative worth of the amount), Moral support, Convenient Service and Transparent of the Policies and Benefits associated with policy.

**Nilay panchal (2013)** concluded that respondents' knowledge and confidence about health insurance was good. Further research shown that awareness about the existence of health insurance was fine but liking is average. Most respondents' know about health insurance but some of them don't have any policy because of low awareness or lack of information regarding health insurance. Research concluded that there

were clear possibilities for health insurance market in India; there were also possibilities for the public and private health insurance companies, come of respondents plays a vital role for purchasing health insurance.

### 3. RESEARCH METHODOLOGY

Research methodology encompasses a structured approach to conducting research, guiding the researcher through the entire process. It comprises several key components. First and foremost, the research design outlines the type of research (qualitative, quantitative, or mixed methods) and the approach (deductive, inductive, or abductive) along with the strategy employed, whether it's a case study, experiment, survey, or observation. It also includes the formulation of hypotheses or research questions to direct the study. Data collection is a crucial aspect, involving decisions on data sources, collection methods (such as surveys, or content analysis), the instruments used (questionnaires), and sampling procedures to select a representative sample.

### 4. DATA ANALYSIS AND INTERPRETATION

**TABLE 1. SHOWING CHI-SQUARE ANALYSIS**

Chi-Square Tests			
	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	134.933 <sup>a</sup>	4	.000
Likelihood Ratio	162.294	4	.000
Linear-by-Linear Association	.143	1	.705
N of Valid Cases	150		

a. 3 cells (33.3%) have expected count less than 5. The minimum expected count is .59.

**TABLE 2. SHOWING REGRESSION**

There is level of satisfaction and overall experience of using Care health insurance.

REGRESSION						
Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	.051	1	.051	.142	.706
	Residual	53.282	148	.360		
	Total	53.333	150			

a. Dependent Variable: 2  
b. Predictors: (Constant), 2

**TABLE 3. SHOWING ONEWAY ANOVA**

There is difference between the branding influenced customer decision and decided to purchase Care health insurance.

ANOVA					
	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	3.976	2	1.988	5.921	.003

Within Groups	49.357	147	.336		
Total	53.333	150			

## 5. FINDINGS

- The Health Insurance policy is lagging behind among the consumers.
- The preference of Health insurance among consumer is well balanced.
- The major percentage of consumer feels it necessary to have a Health Insurance in present days.
- The consumers dissatisfaction with the level of premium paid against sum insured are high.
- The knowledge of the Health insurance benefits are among consumers is high.
- The consumers are even aware of the Tax benefits under sec 80D in high percentages.
- The availability of the products through Care Health Insurance. is less percentage among consumers.
- The consumer are well balanced in their perception that Care Health Insurance has made them easier to select the financial products
- Though consumer are satisfied in major percentage with the services of Care Health Insurance.

## CONCLUSION

It is concluded from this study that respondents are aware about health insurance but denied to take health insurance or medical policies. People have trust more on public general insurance companies rather than private general insurance companies to avail the health insurance policies. Respondents were not much aware regarding health insurance policies terms and conditions and according to them health insurance companies are not transparent. Thus, health insurance still have wider scope in India but is suppose to be easy to understand and accessible. On the basis of our research, we would like to give some managerial implication to the Health Insurance companies. Health Insurance companies should give more focus on some demographic criteria like age and gender. Health insurance companies should give more focus on age between 18-30 years and also emphasizes more towards female also. Also, health insurance companies can more concentrate on various important factors like risk coverage, to protect against high unexpected medical cost and tax benefits.

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## WEBSITE

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