# An Empirical Evaluation On Proclivity Of Customers Towards Health Insurance During Pandemic

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***Abstract: For every individual in India, Health insurance Policy has become a necessity. It provides a risk coverage against expenditure which is caused by unforeseen medical emergencies. Today, when the medical inflation rates are so high, failing to hold an adequate health cover policy can prove to cost very high, financially. The purpose of this research is to identify how much awareness public have about Health Insurance during pandemic and to identify their inclination to buy health insurance policies. Like privacy, health research has a very high value to the society. This pandemic situation made us to realise the importance of our health and the policy which will safeguard our life. The research was connected only about health insurance policy. Advancement in health information technology are creating a transformation in health sector that could facilitate studies which was not feasible in the past, and thus it leads to a new insights regarding health and disease. For analysis purpose, SPSS software is used to find the solutions to the objective of the research. It can be concluded that insurance companies have to create more awareness level towards health insurance as well.***

***Keywords: Health Insurance, Customer preferences, Inclination, Level of awareness, Perception***

## 1. INTRODUCTION

Health in the recently discovered abundance for everybody now. Health is influenced by instruction, lodging, food, work and so forth the health is one of primary needs to different concerns, like joblessness, low wages, abundance, status of living and so forth so it has turned into a significant political, social and monetary issue and Government is endeavouring hard to meet overall population assumptions about great health. The significant goal of Indian government is to further develop health of people, especially the socially and monetarily burdened gatherings. . The health insurance industry in India has become altogether basically because of advancement of economy and general awareness. By 2010, over 25% of India populace approached some type of health insurance. Mediclaim Health Policies was the first Health Policies in Quite a while.

**Health Insurance organizations in India**

Till now, there are 31 insurance organizations in India that offers Health Insurance items. Out of these, 24 are General Insurance Companies which are offering health insurance plans and the rest 7 are Standalone Health Insurance organizations. An overall insurance organization manages different insurance items, for example, travel insurance, engine insurance, health insurance, rustic insurance, and so on aside from disaster protection, whereby an independent health insurance organization manages health insurance items.

## 2. LITERATURE REVIEW

Banerjee. A (2014) examined about the microfinance which has begun to package their essential advances with health insurance. Packaging credits with insurance prompted expansion in drop out from microfinance as they need to pay higher financing costs and get insurance. Binny and Meenu Gupta (2017), examined about the current patterns of health insurance area in India and distinguishing the development openings and difficulties in the area. The review is of the assessment that health insurance is a developing area in India. Organizations are needed to improve their business by presentation of new plans of action with creative items. Need of an all-inclusive health insurance program is perceived to cover families beneath neediness line. Fan.V.Y (2012), examined about the Aarogyasri Health insurance being presented in the state wherein inside the initial nine months of execution it altogether diminished out of pockets inpatient consumption and the plan isn't helping planned rank and booked clan families as much as the remainder of the populace. Forgia.G.L.A (2012 examined about the discoveries on India's significant Central and State Government supported health insurance plans, it designated the helpless populaces meaning to give monetary assurance against calamitous health shocks and late patterns in Government health financing. Karan. A (2017), examined about the impacts of RSBY on OOP installments and supported for hospitalizations and following not many months it couldn't give monetary security for helpless families so the plan was incapable by and large. Lakshmanna.B.C, Jayarami Reddy.P, Sravan Kumar.P (2019), examined about example of insurance expense in insurance organizations their case settlement strategy and assess execution of organizations. Mathiraj Subramanian.S.P and Saroja Devi Rajendran (2016), says that the health insurance as a device to fund healthcare has as of late acquired prominence in India and furthermore the investigation has been made that the development rate and piece of the pie of private health insurance has been expanding and general health safety net providers has been diminishing, because of number of expanding private health guarantor. Satakshi Chatterjee, Arunangshu Giri, and Bandayopadhyay S.N (2018), examined about the illustrative and different health insurance items offered in India. It endeavors to break down the insurance models of healthcare of chose different nations also. Health insurance is viewed as an unsaturated market in India and the center pay bunch for example the designated populace of this industry will make a blast in health insurance in years to come. The health insurance area is needed to be made general independent of the pay level and foundation of individual and a family. Ganesan D et.al (2021) found that purchasing inclination towards health items can be affected by notices. Suman Devi and Vazir Singh Nehra (2015), examined about the new creations in the health insurance area. Issues related with the health insurance are featured and plausible arrangements are given. Different issues like high case pay-out proportion in open area back up plans, unprofessionalism of TPAs, absence of improvement of health insurance in rustic regions, wrong determination of health insurance approaches, and absence of awareness about health insurance strategies are featured. Swathi.K and Anuradha.R (2017, examined about the idea and advantages of health insurance other than

introducing an outline of health insurance area in India. A brief of number of people covered under different plans, for example, government supported, bunch insurance, and family insurance, individual strategies is depicted. Area savvy health insurance arrangements alongside number of people covered by open, private and particular safety net providers are portrayed. The IRDA is recommended to take drives to advance rivalry in Health back up plans as accessible in telecom specialist co-ops.

## 3. RESEARCH METHODOLOGY

Exploration configuration is enlightening for the current review. The reason for the current review is the depiction of realities identified with awareness and inclination towards Health Insurance among customer and to recognize their inclination towards health insurance strategies, inclination of organization and kind of Health Insurance policy. In the current review, accommodation testing procedure is utilized which goes under the non-likelihood examining technique to assemble the information from the designated respondents.Convience sampling technique is used to conduct the study.  The essential first-hand information were gathered by utilizing well structures questionnaire from 165 respondents during June – July 2021 through Google forms in Salem area. Secondary information was gathered from research diaries, articles, magazines, papers, web sources and from different sources. Investigation has been finished by utilizing the measurable apparatuses like one way ANOVA, Regression Analysis, Weighted Average strategy, Chi-square and Henry Garrett Ranking. Factual Package for Social Science (SPSS 21) and Microsoft Excel were utilized with the end goal of information examination.

## 4. OBJECTIVES

•   To ascertain the awareness about Health Insurance Policies during COVID-19
•   To recognize the proclivity of customers towards putting resources into Health Insurance Policy.
•   To recognize what kind of insurance plans are liked by customers to put resources into Health Insurance Policy.
•   To look at the perception of customers towards the advantages given by Health Insurance Policy.
•   To find out their favoured Health Insurance Company among customers

## 5. RESULTS AND DISCUSSION

Table 4.1 Gender, Age and Educational Qualification of Respondents.

| S. No | PARTICULARS | | NUMBER OF RESPONDENTS | % OF RESPONDENTS |
|---|---|---|---|---|
| 1 | Gender | Female | 108 | 65.5 |
| 2 | | Male | 54 | 32.7 |
| 3 | | Prefer not to say | 3 | 1.8 |
| **TOTAL** | | | **165** | **100** |

| 1 | Age | 15 – 25 | 127 | 77 |
|---|---|---|---|---|
| 2 | | 26 – 35 | 30 | 18.2 |
| 3 | | 36 – 50 | 5 | 3 |
| 4 | | Above 50 | 3 | 1.8 |
| **TOTAL** | | | **165** | **100** |
| 1 | Educational Qualification | Uneducated | 3 | 0.6 |
| 2 | | Higher Secondar y | 18 | 10.9 |
| 3 | | Graduation | 90 | 54.5 |
| 4 | | Post-Graduation | 50 | 30.3 |
| 5 | | Others | 4 | 3.7 |
| **TOTAL** | | | **165** | **100** |

**Source:** Primary data

**Interpretation:** From the above table, majority of the respondents are Female (65.5%) followed by male (32.7%) and prefer not to say (1.8%)**.** Majority of the respondents age are from 15 to 25 (77%) followed by 26 to 35 (18.2%) followed by 36 to 50 (3%) and followed by Above 50 (1.8%). Majority of the respondents educational qualification is Graduation (54.5%) followed by post-graduation (30.3%) followed by Higher education (10.9%) followed by others (3.7%) and followed by uneducated (0.6%).

Table 4.2 Preference of type of health insurance Company by respondents

| **S. NO** | **TYPE OF INSURANCE COMPANY** | **NUMBER OF RESPONDENTS** | **% OF RESPONDENTS** |
|---|---|---|---|
| 1 | Public company | 119 | 72.1 |
| 2 | Private Company | 46 | 27.04 |
| **TOTAL** | | **165** | **100** |

**Source:** Primary data

**Interpretation:** From the above table, 72.1% of the respondents have selected public company followed by 27.9% of private company

TABLE 4.3 CHI-SQAURE ANALYSIS

| | Value | Df | Asymptotic Significance(2-sided) |
|---|---|---|---|
| Pearson Chi-Square | 1.289ᵃ | 2 | .525 |
| Likelihood Ratio | 1.321 | 2 | .517 |
| N of Valid Cases | 165 | | |
| a. 2 cells (33.3%) have expected count less than 5. The minimum expected count is .84. | | | |

The rejection of null hypothesis depends upon $p$ value if it is less than 0.05 and null hypothesis will be accepted if $p$ value is more than 0.05. The table above showed that the value of $p$ is greater than 0.05 i.e. 0.525 for Independent Variable 'gender' which indicated that the results are significant at 5% significance level.

**P= 0.525 > 0.05**

**Therefore H₀ is accepted @ 5% LOS**

**Interpretation:** The chi square test signifies that there is no significant relationship between gender and selection of insurance company.

TABLE 4.4 ONE WAY ANOVA ANALYSIS:

$H_0$ – There is no significant relationship found between age and knowledge whether COVID-19 is covered under Health Insurance Policy.

$H_1$ - There is significant relationship found between age and knowledge whether COVID-19 is covered under Health Insurance Policy.

| Model Summary | | | | |
|---|---|---|---|---|
| Model | R | R Square | Adjusted R Square | Std. Error of the Estimate |
| 1 | .034ᵃ | .001 | -.005 | 1.22086 |
| a. Predictors: (Constant), gender | | | | |
| b. Dependent Variable: accepting policy | | | | |

| \Age | | |
|---|---|---|
| Tukey HSD | | |
| Knowledge e | N | Subset for alpha = 0.05 |
| | | 1 |
| 2.00 | 42 | 1.2381 |
| 3.00 | 51 | 1.3137 |

| 1.00 | 72 | 1.3194 |
|---|---|---|
| Sig. | | .780 |

Means for groups in homogeneous subsets are displayed.

a. Uses Harmonic Mean Sample Size = 52.350.

**ANOVA**

| Model | | Sum of Squares | Df | Mean Square | F | Sig. |
|---|---|---|---|---|---|---|
| 1 | Regression | .285 | 1 | .285 | .191 | .663[b] |
| | Residual | 242.952 | 163 | 1.491 | | |
| | Total | 243.236 | 164 | | | |

a. Dependent Variable: accepting policy

b. Predictors: (Constant), gender

b. The group sizes are unequal. The harmonic mean of the group sizes is used.
Type I error levels are not guaranteed.

**P= 0.775 > 0.05**
**Therefore H₀ is accepted @ 5% LOS**
**Interpretation:** From the one way ANOVA table 4.2 it is found out that there is no significant relationship between Age and knowledge whether COVID-19 is covered under Health Insurance
Policy.
TABLE 4. 5 REGRESSION ANALYSIS:
**Find the regression equation of total variation in accepting policy with their Gender.**
**Homogeneous Subsets**

| Model | | Unstandardized Coefficients | | Standardized Coefficients | T | Sig. |
|---|---|---|---|---|---|---|
| | | B | Std. Error | Beta | | |
| 1 | (Constant) | 2.381 | .268 | | 8.890 | .000 |

| | Gender | .08 0 | .184 | .034 | .437 | .663 |
|---|---|---|---|---|---|---|
| a. Dependent Variable: accepting policy | | | | | | |

R = Simple correlation= 0.34

$R^2$ = How much of total variation in subscribing and recommending Health Insurance policy can be explained by Gender **ANOVA Table**: P= 0.663 > 0.05

**Coefficient table:**

Subscribing and recommending policy (Y) = 2.381

+ 0.08 [(Gender) (X)]

**Interpretation:** From the table 4.3 of Regression it is understood that, the Gender will not be creating much impact on their inclination on subscribing and recommending Health Insurance policy.

TABLE 4. 6 HENRY GARRETT RANKING METHOD:

To find out which company ranks first, Henry Garrett Ranking method is used. With the help of Garrett table, the value of percentage position is found and multiplied by the number of respondents.

Rank the Health Insurance companies according to the preference of the respondents.

Rij − The Rank is given for the ith variable by the jth respondents

| RANK | PERCENTAGE POSITION | GARRETT VALUE |
|---|---|---|
| 1 | 8.33 | 77 |
| 2 | 25 | 63 |
| 3 | 41.67 | 54 |
| 4 | 58.33 | 46 |
| 5 | 75 | 36 |
| 6 | 91.67 | 23 |

**Interpretation:** From the table 4.4, Star Health Company stood in First Rank, followed by Apollo Munich, HDFC Ergo, ICICI Lombard, TATA AIG and TTK Cigna.

TABLE 4. 6 WEIGHTED AVERAGE ANALYSIS:

Factors which provide high level of awareness about Health Insurance Policie

| STATEMENT | VH | H | M | L | VL | WEIGHTED AVERAGE |
|---|---|---|---|---|---|---|
| Television | 59 | 45 | 51 | 8 | 2 | 43.06 |
| FM Radio | 11 | 41 | 74 | 24 | 15 | 33.6 |
| Newspaper & Magazines | 29 | 63 | 52 | 19 | 2 | 39.53 |
| Financial Advisors | 31 | 42 | 57 | 22 | 13 | 36.73 |

| | | | | | | |
|---|---|---|---|---|---|---|
| Friends & Family | 54 | 55 | 40 | 9 | 7 | 42.33 |
| Online Media | 57 | 51 | 41 | 11 | 5 | 42.6 |

## 6. MAJOR FINDINGS

- It is revealed that larger part of the respondents have chosen public restricted organization for purchasing their Health Insurance Policy (72.1%).
- It is discovered that the chi-square examination implies no critical connection among Gender and choice of insurance organization.
- It is clear, the single direction ANOVA examination implies that there is no huge connection among Age and information whether COVID-19 is covered under Health Insurance Policy.
- It is obvious from the Regression Analysis that, the Gender won't make a lot of effect on their inclination on buying in and suggesting Health Insurance strategy.
- It is discovered from the Henry Garrett Ranking that Star Health Company stands first among the other organization as per the inclination of individuals.
- It is discovered from the Weighted Average Method that Television has made more awareness about the Covid-19 than different stages.

## 7. SUGGESTIONS

- Many don't know about any of the Central Government started Health Insurance arrangements, so Government needs to make more awareness among individuals.
- As individuals are more worried about Government started Public Health insurance strategies than private ones, so Government needs to propose many kinds of plans with benefits for overall population.
- The most needed commercial and awareness according to my review is Television
- what's more, online media, so advancements by these mediums are exceptionally recommended.
- Less than half of the respondents thinks about the Health Insurance strategy can cover the costs on COVID-19 treatment, so awareness concerning that ought to be recommended more among individuals.
- Mostly 70% of the respondents are not completely able to suggests Health Insurance approaches, so awareness about the significance of Health Insurance should be make more.
- IRDA (Insurance Regulatory Development Authority) ought to energize strategies by giving appropriations to expand the advantages of higher strategy property.

## 8. CONCLUSION

Everybody has a fundamental right to remain secured. Individuals are consistently powerless against injury, diseases from their ordinary exercises and emergency like COVID-19. Regardless of whether it is an individual – family plan or manager or government supported inclusion, having health insurance is better compared to not having it by any means. A large number of Indians are uninsured to some extent because of high premium expenses. Many are compelled to pay high health costs out of their pocket, which makes more issues therapeutically and monetarily. Since the country's financial changes, the Indian Health or clinical insurance

area has been developing. A main motivation behind why mediclaim insurance in India, has developed is, that it guarantees great clinical consideration from dependable health care establishments. Various organizations are offering health insurance strategy with an assortment of health insurance plans, so it's difficult to choose which plan you ought to go for. This review assists with understanding which Health Insurance plan everybody likes. In this serious market you should contrast strategies with track down the best health insurance approaches or the best clinical insurance plans for you and for other people.

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