

**CONSUMER AWARENESS TOWARDS HEALTH INSURANCE WITH SPECIAL
REFERENCE TO TENKASI**

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Abstract. Health is the basic right of every human being. They being has to resort to the health sector to maintain his or her health. Due to the growing population of India, it is becoming difficult for the government to provide public health services. Hence, most of the people receive medical care from the private sector. However, with the increase in the cost of medical care, it has become necessary for each citizens to obtain medical or health insurance for protecting their life. The primary goals of this study is to measure the level of consumer knowledge regarding healthcare insurance. Primary and secondary data were both utilised in this study. The chunk sampling approach was used to capture 55 samples, which resulted in 55

total samples. SPSS was used to examine the data. The most significant conclusion of the survey is that the vast majority of respondents believed that they lacked sufficient supervision as well as a paucity of health institutions. Recommendation from this study was the insurance company should create some more additional programme for increasing the awareness level among general public and additionally the health insurance cover some limited disease also which lead the consumer reuse to adopt health insurance easily.

Keywords: Insurance, Consumer awareness, policy, health insurance, medical insurance, network hospitals

Introduction

Health insurance is essential for decreasing large out-of-pocket expenses that people face in the event of a medical emergency. Because of escalating medical costs, depressions, and the spread of new diseases throughout the world, having a health insurance coverage might make it easier to get through these tough circumstances. Meanwhile, as a result of the high price level in today's society, people's purchasing power has plunged as well. As a result of all of this, health difficulties may result in a significant level of money. People in India are reluctant to obtain or invest in insurance coverage, despite the high out-of-pocket prices. Because of major changes in premium structures, high claim rates, and an unwillingness to obtain health insurance since its inception, the Indian health insurance business has offered a platform for private firms to expand their operations in the Indian market. Among other things, it covers charges for hospitalization, day care treatments, domiciliary care, and ambulance services. However, due to illiteracy, a lack of information about health insurance, and restricted policy coverage, the majority of individuals in rural areas refuse to accept health insurance. As a result, the objective of this paper is to investigate consumer understanding regarding health insurance.

Statement of the problem

With the ever-increasing costs of healthcare in our country, as well as the ever-increasing incidences of diseases, health insurance is now a requirement. Health insurance protects you financially in the event of a succession of accidents or illnesses. It aids in the

prevention of expensive and unexpected costs. Although health insurance provides financial assistance, it has numerous limitations, such as price rises with age, waiting periods for current health problems, co-pay clauses, and coverage for only a restricted number of diseases, among others, which cause many people to disregard health insurance. So, if you want to know how people feel about health insurance, you should know that they are aware of it. Hence, the researcher attempt to study the consumer awareness towards health insurance.

Objective of the study

To study demographic profile of the consumers

To analyse the level of awareness towards health insurance. To examine the reason for choosing particular company.

Hypothesis of the study

- There is no relationship between educational qualification and level of awareness
- There is no significantly different between occupational status and reason for choosing particular company

Scope of the study

The limitation of the study is that it is confined to the local residents of Tenkasi city due to time and financial restrictions on the researchers (Karimov Sirajaddin, 2019). The study is concerned with qualitative data — the beliefs, attitudes, and perceptions of individuals, among other things – which may change over time. It investigates the sources and degree of awareness, as well as the variables that influence the choice of medical insurance and specific firm.

Research Methodology

The existing study is absorbed on evaluating the level of consumer awareness towards health insurance Policies in Tenkasi City. The nature of this research is descriptive and empirical in character. It contains information from both primary and secondary sources. In-patients and out-patients are required to complete a standardised questionnaire, which is used to collect primary data. Secondary information was gathered from internet sites such as <https://www.healthcare.gov>, <https://www.ndtv.com>. E-journals like Journal of Business Management, International Journal of Advance Research and Development etc. The study em-

ployed the Chunk sampling technique. Over the course of the study, 70 questionnaires were issued, with 60 completed replies returned by customers. The completed answers are examined and finished, making the total of 55 samples suitable for the final research. Therefore, the total sample size of the study is 55. Simple percentage, Chi-square test, Pearson correlation was used this study. Rawal et. al (2021), Poongodi M et. al(2022), Poongodi M et. al (2021), Dhiman P et.al (2022), Sahoo S.K et.al (2022), K.A et. al(2022) , Dhanraj R.K et. al (2020), Poongodi M et. al (2019), Poongodi M et. al (2020), M. M. Kamruzzaman et. al (2014), M. M. Kamruzzaman et. al (2021), Md Selim Hossain et. al (2019), Mingju Chen et. al (2019)

Analysis

TABLE 1. Demographic Profile of the Respondents

Factors No. of respondents = 55 Percentage

Gender		
Male	44	80
Female	11	20
Age (years)		
Upto 25	8	15
26 to 50	32	58
Above 50	15	27
Educational qualification		
Upto school level	11	20
Graduate	28	51
Post graduate	12	22
Illiterate	4	7
Occupation		
Govt. employee	22	40
Private employee	19	35

Business man	12	22
Others	2	3
Annual income		
Less than	8	15
20,000		
20,001	to 12	22
30,000		
30,001	to 30	55
40,000		
Above 40,000	5	8

Source: primary data

TABLE 2. Table No. 2: Educational Qualification & Level of Awareness

Level of awareness	Educational Qualification	Comparison	Result
Pearson correlation		Sig. (2-tailed) of p-value	
Policy coverage	-0.010	0.000	0.000 > 0.01 Rejected
List of network hospitals	0.25	0.000	0.000 > 0.01 Rejected
Terms and condition of their policy	-0.179	0.000	0.000 > 0.01 Rejected
Features of health insurance product	0.082	0.000	0.000 > 0.01 Rejected
Procedure for claim	-0.003	0.000	0.000 > 0.01 Rejected
Renewal option of policy	0.019	0.000	0.000 > 0.01 Rejected

Source: Computed data

The result of Pearson correlation is shown in the above table. It exposed that all the p-value (0.000) of level of awareness is less than the 0.01 hence the null hypothesis rejected that means educational qualification related to the level of awareness on health insurance.

TABLE 3. Occupational status & Reason for choosing particular company

Occupational status	Value	Df	Asymp.Sig.
Reasons			
The power of referals	1.9542	10	0.000
Reputation	1.7362	10	0.000
Financial strength	1.5852	10	0.000
Coverage	1.5022	10	0.000
Ease of doing business	1.6021	10	0.000
Available discounts	1.4812	10	0.000
Budget friendly	1.2035	10	0.000
Service quality			
		1.1119	10
			0.000

The χ^2 value for 10 degrees of freedom is 1.9542, 1.7362, 1.5852, 1.5022, 1.6012, 1.4812, 1.2035 and 1.1119 respectively. The p-value given against Asymp. Sig. for all the factors are 0.000. Because p-value is less than 0.05 (p

<0.05), the difference between the actual and simulated frequencies is statistically relevant, and the null hypothesis is rejected as a result of this.. Therefore, occupational status of the respondents significantly differed with reason for choosing particular company (Uma Shankar Yadav, & Ravindra Tripathi. 2022).

Findings

A majority (80%) of the respondents are male.

A majority (58%) of the respondents belonged to the age group between 26 to 50 years. A majority (51%) of the respondents are Graduate.

A majority (40%) of the respondents were government employee.

A majority (55%) of the respondents' monthly income between Rs.30,001 – 40,000

There is the relationship between educational qualification and level of awareness proved by Pearson correlation there is the significantly different between occupational status and reason for choosing particular company proved by Chi-square

Suggestions

The company should create more awareness programme regarding health insurance via digital campaign.

The organization could be able to provide a broad range of services to its consumers while still maintaining an eye-catching marketing in social media.

They should increase their network hospitals.

They should simplify their claim procedures

They should reduce documentation

A counsel should be present in all hospitals that can properly explain and recommend an appropriate policy for the individual or family in need of care.

Conclusion

The Indian health insurance industry is growing at a rapid pace, as are the issues and problems involved with establishing system coherence within the country. A health-insurance framework is the only way forward for a country like India to sustain healthcare, given the growing expenses of health-care, rising disposable income, and high out-of-pocket health-care expenditures. This study shows that, regardless of the fact that health insurance knowledge is improving in rural areas, there is always an imperative need to enhance understanding of health insurance coverage for medical expenditures in country places. It is critical to conduct effective Information Education & Communication (IEC) campaign to raise awareness of the importance of health insurance in order to cover the ever-increasing medical costs associated with unanticipated injuries and illness.

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