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Needs and Problem of Health Insurance in India

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Abstract: A premium, which can be paid in advance by a person or a group, can be used to purchase health insurance. The goal is to assist individuals obtain better access to healthcare. For both individuals and corporations, Indian insurance companies provide a wide range of products, including health insurance. Looking at factors such as infant mortality, maternal mortality, life expectancy, and the number of live births and deaths can tell you a lot about a country's overall health. Although India has achieved great strides since its independence, there are still some concerns with health insurance in the country. The study concluded that health insurance in India has both advantages and disadvantages.

Keywords: Insured health care has its benefits and drawbacks.

Introduction

When it comes to primary health care in India, it is a government responsibility. 'No individual shall be refused proper medical care because of inability to pay for the same,' according to a 1946 government committee study. The preamble to the Indian constitution indicates that the government is responsible for providing basic health care as part of an endeavor to create a more fair society. Family assistance and health care regulation have been the central government's main responsibilities in the past. The private sector's role in healthcare has been largely overlooked. Health insurance is essential in today's world. The health risk is therefore the largest threat to people's lives and livelihoods, despite the fact that a household faces a bevy of possible risks. As we get older, our health deteriorates, and we all need to see a doctor at some point. It is difficult and expensive to provide universal health coverage in a society where the majority of people are unemployed or working informally. As a means of ensuring that all Indians have access to healthcare, the government of India has since 1948 launched

a number of social health insurance programs. As a result, many Indians avoid getting health insurance because they believe it is a waste of money. When a family member or a friend falls ill, these folks begin to realize the importance of these items. Use the expertise of others whenever possible. Always be prepared for life's unexpected twists and turns. By purchasing health insurance, an individual ensures that their family will not be financially burdened in the event that he or she needs to be in the hospital for an extended period of time or undergo expensive treatment. There are various advantages to purchasing health insurance as soon as possible. For many Indians, health insurance is just that—insurance that pays for hospitalization expenses. Surgeon's fees and consulting doctor's fees, as well as the cost of blood and operating room charges are covered. In the policy's terms and conditions, there are some diseases that are either not covered at all or just partially covered after the insurance is issued. Because of the rising incidence of illness and disease and the resulting high costs of hospitalization and

treatment, health insurance is currently the fastest-growing industry in India. Health insurance policies that cover the entire family, or "family floater policies," are widely available in the market. When it comes to critical disease coverage in the health insurance business, the list of illnesses covered includes anything from deafness and blindness to kidney and organ transplants.

Methodology

The study concluded that health insurance in India has both advantages and disadvantages. I think it's a well-written piece of work. This study relied on secondary data. Data from both published and unpublished sources has been gathered for secondary analysis.

Discussion

Health insurance is provided through several private insurance companies and four public sector general insurance companies. These are as follows:-

1. National Insurance Company Limited
2. The Oriented Insurance Company Limited
3. The New India Insurance Company Limited
4. United India Insurance Company

Benefits of Best Health Insurance Policies

Inpatient and outpatient care are both included in most health insurance coverage. Health insurance policies that cover more than just medical expenses are the most comprehensive. In many cases, policyholders fail to take full advantage of their health insurance benefits because they are unaware of them. The value of a health insurance plan depends on how effectively you can take advantage of its benefits.

1. Convalescence Benefit:-

Insurance policies don't just cover hospitalization costs. However, this does not represent the whole picture, as the greatest health insurance policies also cover additional costs. Many health insurance advantages go underused because policyholders don't know about them. A health insurance plan's usefulness depends on how successfully you are able to utilize its benefits.

2. Alternative Treatment:-

In recent years, the popularity of alternative treatment has increased manifold. This has prompted many insurance companies to cover alternative treatments, such as Ayurveda, homeopathy and yoga.

3. Expenses Related to Organ Donor:-

An average kidney transplant might cost between Rs 3 lakhs and Rs 5 lakhs, depending on the patient's present health and medical status. With health insurance, preparing for an organ transplant does not have to be stressful. Ordinary health insurance coverage from the vast majority of general insurers typically cover organ transplants. There are some insurers that pay all of the expenditures, while others put a cap on them or give it as an additional benefit to their basic coverage. Even if insurance covers the cost of harvesting the organ, it does not cover the rest of the costs. This does not include post-surgical complications or screening costs that are not covered by insurance.

4. Domiciliary Treatment:-

Numerous insurance companies now cover medical treatment given at home under the guidance of a doctor.

Insurers, on the other hand, limit both the quantity and the duration of the benefit that they provide to their customers.

7. Attendant Allowance:-

As long as the insured is under the age of 18, insurance companies will pay the adult companion of the insured to accompany him or her to the hospital for medical treatment. The number of days for which an insurance pays an attendant allowance is usually predetermined.

8. Daily Hospital Cash Allowance:-

Insurers offer additional financial protection to take care of expenses not covered under the policy, such as food and travelling.

9. Free Health Checkup:-

Another benefit of health insurance policies offer free periodic health check up to their policyholders after every 4 or 5 claim-free years. Insurers offer cashless health checkup if tests are done at empanelled hospitals or centres.

10. Dental Treatment:-

Various insurance companies cover dental treatment once in a few years with sub-limits.

11. Bariatric (Weightloss) Surgeries:-

Bariatric surgeries are no longer considered a cosmetic weight loss procedure but a life-saving technique for obese patients battling with

medical conditions caused by or related to weight 3.

Advantages of the Health Insurance Policy

Major advantages of health insurance policy may be enumerated as follows:-

- Helps to secure the future by providing insurance payments.

To cover the cost of medical and hospitalization expenses.

Savings on future medical and post-treatment expenses and financial hardships are substantial.

Disability and custodial care costs.

The feeling of security has been raised. Section 80D of the Indian Income Tax Act provides tax benefits.

- A higher level of financial stability.
- After the age of 60, these policies are no longer available.

Health Insurance Challenges Health insurance companies confront a variety of obstacles to ongoing growth, as well. Listed above are some possible roadblocks:

- The statistics system is heavily reliant on health insurance. An efficient data and information system is required for Indian health insurance policies.

The high claim-payout ratio of insurers is a fundamental impediment to the growth of the health insurance business, particularly public insurers, as this causes huge losses for insurers, which causes them to lose interest in this market.

The Indian Medical Association, the State Health System, or third-party administrators do not regulate health insurance in India.

Access, quality, and affordability in the health insurance market are not better understood by this authority.

The uninsured population is disproportionately concentrated in the unorganized sector and the poor. In addition, health insurance policyholders face difficulties in selecting policies.

Insurers and policies are difficult to understand because of the lack of information available.

No fundamental connection exists between the distributional social fairness of health security and the human right to healthcare."

An further difficulty is the absence of public-private partnerships in India's health insurance industry.

In the creation of health insurance, rural communities are not given due consideration.

Suggestions

Healthcare providers should be accredited and standardized in order to provide high-quality care. Differential billing can be reduced by standardizing hospitalization fees. Insurers' access to better information and the ability to select the medical facility that best matches their insurance budget will be greatly improved by the accreditation of hospitals. Health insurance should be viewed as a distinct industry. As in the case of non-life or general insurance, health insurance in India is being offered in a similar fashion. Life insurance customers' health coverage should be improved by reviewing existing regulations and standards. The role of government in providing health insurance is critical. 'Health insurance policy holders should be informed of the numerous advantages available to them.

Conclusion

"Health coverage for everyone" should be the mantra of the health insurance business. Cost-cutting methods and easy access to healthcare facilities are both essential. Health insurance is predicted to rise as a result of the current liberal economic atmosphere. People who can afford to pay for insurance may be targeted by some uncontrolled or minimally regulated health insurance markets. It is therefore necessary to make certain that others who are less fortunate can benefit from these developments. It is imperative that both government and non-government involvement be open and accountable. For the vast unorganized labor force now underserved by current programs, cooperatives and rural groups could play an important role in the promotion of social health insurance schemes..

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