A STUDY ON PERCEPTION OF INVESTORS' INVESTING IN HEALTH INSURANCE

KEYA BAJANIYA   SHIKHA JAJU   JAGRUTI BARIA

MBA STUDENT   MBA STUDENT   MBA STUDENT

PROF. CHINTAN PRAJAPATI

ASSISTANT PROFESSOR

PARUL INSTITUTE OF ENGINEERING AND TECHNOLOGY, MBA

PARUL UNIVERSITY, WAGHODIYA.

VADODARA, INDIA

Abstract: An investor is any person or other entity (such as a firm or mutual fund) who commits capital with the expectation of receiving financial returns. Investors rely on different financial instruments to earn a rate of return and accomplish important financial objectives like building retirement savings, funding a college education, or merely accumulating additional wealth over time.

Investors typically generate returns by deploying capital as either equity or debt investments. Equity investments entail ownership stakes in the form of company stock that may pay dividends in addition to generating capital gains. Debt investments may be as loans extended to other individuals or firms, or in the form of purchasing bonds issued by governments or corporations which pay interest in the form of coupons. Indian consumers already aware and enrolled in health insurance schemes, the industry faces the continuing challenge of keeping them happy. Customer satisfaction levels for health insurance in India have consistently ranked below comparable levels elsewhere, with critics frequently citing the low coverage of plans in terms of both the diseases and number of hospitals covered. Unlike other homogenous general insurance products, premiums for medical plans are based on the health of an individual policyholder and this had lead to confusion and fraud in the Indian market and increased policy cancellations from customers who do not find any value in their health insurance policies.

Index Terms - Health insurance, customer satisfaction, investor, awareness, investment behavior.

I. INTRODUCTION

Health insurance policies cover the cost of medical treatments. Dental insurance, like medical insurance, protects policyholders for dental costs. In most developed countries, all citizens receive some health coverage from their governments, paid through taxation. In most countries, health insurance is often part of an employer's benefits.

A Health Insurance policy is a contract between the insurer and policyholder in which insurance company provides financial coverage for medical expense incurred by the insured. A health policy provides benefit of reimbursement of medical expense or cashless treatment motioned in the health policy.

Health emergencies do not come with a prior notice. With sedentary lifestyles more and more people are becoming prone to lifestyle diseases in India. And with the increased demand for quality healthcare services, medical treatment has now become quite expensive, especially in the private hospitals. And without insurance the hospital bills are enough to drain one's savings. Therefore, a health insurance plan becomes an absolute necessity as it offers coverage to the insured family members and the policyholder against the exorbitant hospitalization expenses in case an accident or illness. Apart from the medical coverage, health Insurance plans also offer tax benefits on premium under section 80D of the Income Tax Act, 1961

Health insurance is based upon market economics. Health insurance finances healthcare services obtained through markets. In theory, markets works when they are efficient, meaning providers compete by improving quality, increasing efficiency, and offering low prices. In reality, healthcare and health insurance markets are far from efficient.

RESEARCH METHODOLOGY

Primary data collection is the process of gathering data through surveys, interviews, or experiments. Data that has been generated by the researcher himself/herself

A primary source provides direct or firsthand evidence about an event, object, person, or work of art. Primary sources provide the original materials on which other research is based and enable students and other researchers to get as close as possible to what actually happened during a particular event or time period. Published materials can be viewed as primary resources if they come from the time period that is being discussed, and were written or produced by someone with firsthand experience of the event.

Examples of primary sources: Autobiographies and memoirs Diaries, personal letters, and correspondence Interviews, surveys, and fieldwork

3.1 Population and Sample

The study shall be conduct on the basis of India. The study will be focused on population of India.

Sampling Techniques: The researcher shall be used convenience sampling for data collection or other techniques would have been used as par requirement of information or data.

3.2 Data and Sources of Data

The researcher shall have been taking of 100 sample of respondent when data will be Here Vadodara has been taken for this study and 100 has been taken as sample. Out of total population 100 respondents gave their precious response to complete this study. This whole study is conducted on the basis of their response. It is not possible that, to take response from each and every one that is why here 100 samples have been taken as a sample who represent the entire population of Vadodara city.
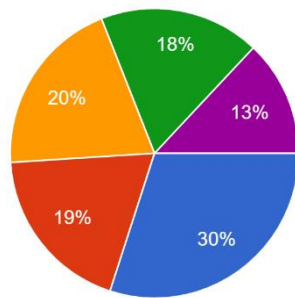
3.3 DATA ANALYSIS:

1) Age Group:

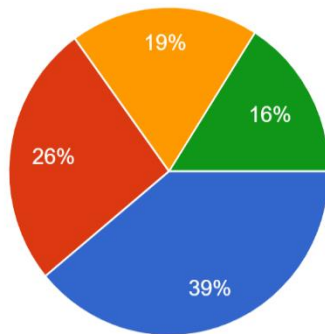| AGE	RESPONSE
18-30	87%
31-40	7%
41-50	3%
51-60	2%
Above 60	1%

2) Monthly Income:

Monthly Income
100 responses

- less than Rs. 5,000/-
- Rs.5,001 – Rs. 10,000/-
- Rs.10,001 – Rs. 25,000/-
- Rs.25,000 – Rs.50,000/-
- Above Rs.50,000/-

3)

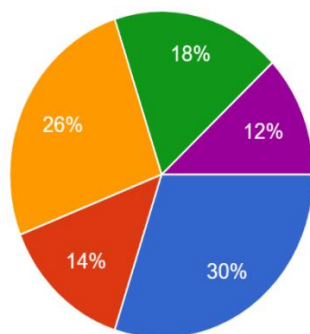**Average Monthly Medical expense of the family ?**
100 responses

- up to 500
- 501 – 1000
- 1000 – 2000
- above 2000

4)

Give the most important reason, why people don't take a health insurance policy?
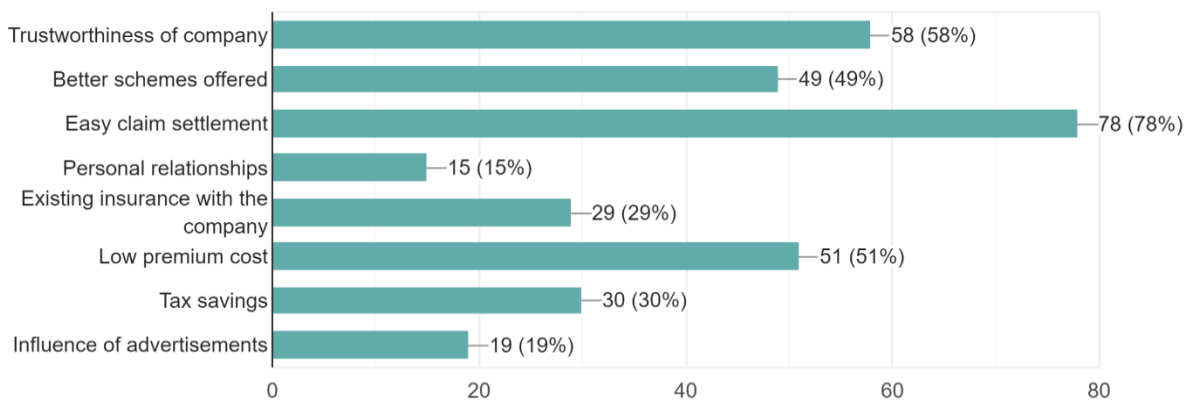100 responses

- Did not feel the need
- No return for investment
- High premiums charged
- Poor service provided and coverage
- Shortage of disposable funds

5)

Rank the three important factors which can form the basis for selecting a health insurance company, in your order of preference:

100 responses

IV. RESULTS AND DISCUSSION

FINDINGS:

1) The major population of investor was between age group of 18-30 years are 87%, 31-40 years of respondent are 7%,3% are belongs to the age group of 41-50, 2% of 51-60 & above 60 are 1%.

2) the major response is given by the respondents whose annual income is below rs.5000/- that is 30% means majority of them are belongs to middle age group.19%response are given by the respondents whose income is between 5000/- to 10,000/-, 20% response given by the respondents whose income is between 10,000/- to 25,000/-Rs.,18% responses are given by them whose income is in 25,000/- to 50,000/- and at last 13% respondents have above 50,000/-.

3) Above Rs. 2,000/- percentage is lowest hat is 16%, it is good that more expense is very less.19% respondent's family expense on medicines is between 1000/- to 2,000/-,26% response is of about expense 500/- to 1,000/- that can be consider as average medical expenses and very less expense is up to 500/-,39% respondents family expense is up to 500Rs.it is good sign.

4) Question is about, why people not prefer health insurance policy, out of 100 responses 30% is highest that they did not feel the need it means they really not want health policy. After this 26% are not taking health policy it is because they think premium charges are high that's why they not take policy.18% are think that service provided by insurer is poor and not good.14% responses base on that respondents think there is no return on investment and at last 12% has shortage of fund(disposable).

5) Respondents says that majority selected Easy claim settlement is 78 in number, after these 58 responses of trustworthiness of company they trust on services of the insurance company, after these two factors they prefer low premium cost that is 51 in number. Very less prefer factor is 15 that is for personal relationship.

.

REFERENCES

www.investopedia.com
www.licindia.in
http://www.bajajallianz.com
http://www.hdfcergo.com
http://www.policybazaar.com
https://shodhganga.inflibnet.ac.in/