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## A STUDY ON AWARENESS OF HEALTH INSURANCE POLICY AMONG PUBLIC WITH SPECIAL REFERENCE TO KANYAKUMARI DISTRICT, TAMIL NADU

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### ABSTRACT:

Health insurance is a mechanism by which a person protects himself from financial loss caused due to accident and or disability. Though disability is not fixed, precise and immutable state affected as it is by numerous influences, both objective and subjective, its significance to society is that

condition of ill health arising from disease or injury that prevents the individual from pursuing his normal routine of living.

**KEYWORDS:** Health Insurance, Policy, Awareness, Morbidity, Mortality.

### INTRODUCTION:

A health insurance policy is a policy that provides protection against the risk of financial loss resulting from the insured person's sickness, accidental injury, or disability. The two major forms of health insurance coverage are as follows. 1. Medical expense coverage provides benefits to pay for the treatment of an insured's illnesses and injuries. 2. Disability income coverage provides income replacement benefits to an insured who is unable to work because of sickness or injury.

Health insurance coverage is available to both individuals and groups and is provided by a variety

of organizations and governmental programs in addition to being provided by commercial life and health insurance companies.

### REVIEW OF LITERATURE

Rohan Jayasuriya (1990) analysed, health insurance as an option that developing countries may choose for financing their health services. Gail A. Jensen (1992), analysed a distinction between the ever-uninsured and the uninsured at a given point in time is central to understanding the nature of a non-coverage among the near elderly. Dileep Mavalankar and Ramesh Bhat (2000), analysed Indian health insurance and their opportunities and challenges. India has limited experience in health insurance. Given that the government has liberalized the insurance industry,

health insurance is going to develop rapidly in future.

Srinivasan R. (2001), analysed various issues concerning health insurance in India. Health insurance is a part of a larger business set-up and tends to remain a loss leader in the initial stages and can become viable only in urban context with large scale risk pooling and effective demand.

Rajeev Ahuja (2004), analysed Community Based Health Insurance is more suited than alternative arrangements to provide health insurance to low-income group living in developing

countries.

Reshmi B. et al., (2007), analysed to find out the association between awareness of health insurance and independent variables like socio-economic status and religion.

Moid Uddin Ahmed (2010), analysed the investment pattern of private general insurance companies and the trends in their performance individually as well as against in industry.

Sakthivel Selvaraj and Anup K Karan (2013), this study used a broader framework of difference-in-difference technique for assessing the impact of Publicly-Financed Health Insurance Schemes at the all-India level.

Sreerenjini S.C, (2018) analysed that the caring health of an individual is expensive in the present day of the increasing burden of diseases and rising health care cost.

### STATEMENT OF THE PROBLEM

Health is the most significant factor in human life. In the modern world, the emergence of economic growth and development theories give an important role in health care. It is because health plays the vital role to improve personally from the perspective of family, nationally and internationally. Considering India, they adopt several health insurance policies after independence. In India, health insurance doesn't work in a desirable or sustainable manner.

### PROFILE OF THE AREA

The study was conducted at Kanyakumari district. Kanyakumari is a district of Tamil Nadu, situated in the southern part of the state. The district has a total area of 1,672 square kilometres. The district has been divided into two revenue divisions, four taluks and nine blocks.

### OBJECTIVES

1. To examine the awareness of health insurance among the people of Kanyakumari district (Tamil Nadu)
2. To find out the trend among the awareness and availing health insurance policies in different age groups.

### RESEARCH METHODOLOGY

The study is based on the 'descriptive research which includes primary as well as secondary data. Secondary data was collected from different journals and online resources. The primary data was collected from 120 people among public who belongs to different demographic profile. The tools used for the analysis which was frequency percentage and correlation analysis.

**Table: 1 Demographic Profile of the Respondents**

Parameters	Variables	Frequency	Percentage
Age-wise Distribution	Below 20	3	2.5
	20-30	41	34.17
	30-40	63	52.5
	40-50	11	9.16
	Above 50	2	1.67
Gender-wise classification	Male	50	41.67
	Female	70	58.33
Educational status	SSLC	8	6.67
	Higher Secondary	15	12.5
	Diploma	18	15
	Degree	52	43.33
	Master Degree	27	22.5
Occupation	Government Sector	16	13.33

	Agriculture	48	40
	Allied activities	11	9.17
	Pensioner	2	1.67
	Homemaker	43	35.83
Family System	Nuclear family	97	80.83
	Joint family	27	19.17

Source: Surveyed Data

Table.1 reveals that, from the respondents, the majority of the respondents (52.5 per cent) of the population lying under the age group of 30-40. The gender wise classification the male population are 41.67 per cent and female population is 58.33 per cent. The education status of the respondents 43.33 per cent having the degree holders. Among the respondents, 40 per cent of the population belongs to agriculture, and 80.83 per cent of the respondents belongs to nuclear family of the survey.

**Table:2 Health Insurance Awareness**

S. No	Responses	Frequency	Percentage
1	Yes	108	90.0
2	No	12	10.0

Source: Surveyed Data

Table.2 expressed that, the awareness level among the respondents is 90.0 per cent and 10.0 per cent people are unaware about, the health insurance. Out of the 120 people, only 12 people are unaware of health insurance and rest 108 people aware about health insurance.

**Table:3 Health Insurance Policies Availed by Respondents**

S. No	Responses	Frequency	Percentage
1	Yes	42	35.0
2	No	78	65.0

Source: Surveyed Data

Table.3 presents that, health insurance policies availed by the respondents are 35.0 per cent and 65.0 percent people are not availed this facility

**Table:4 Type of the Health Insurance Policy Availed**

Particulars	Frequency	Percentage
Government Initiated Scheme	7	16.67
Group other than government	24	57.14
Individual policy	11	26.19

Source: Surveyed Data

Table.4 indicates that, mainly the health insurance customers are benefiting from health insurance policies due to the group health insurance policies (other than government) with 57.14 per cent, individual health insurance policies come only in second position with 26.19 per cent.

**Table:5 Correlation in differ Age group in Awareness and Availing the Health Insurance Policy**

Parameters	Age group	Awareness about health insurance (x)	Availing health Insurance Policy (Y)	X <sup>2</sup>	Y <sup>2</sup>	XY
Age	Below 20	3	2	9	4	6
	20-30	26	12	676	144	312
	30-40	66	20	4356	400	1320
	40-50	11	7	121	49	77
	Above 50	2	1	4	1	2
Total		$\Sigma X = 108$	$\Sigma Y = 42$	$\Sigma X^2 = 5166$	$\Sigma Y^2 = 598$	$\Sigma XY = 1717$

Source: Surveyed Data

Table.5 brings to light that, Co-efficient of correlation,  $r=+0.97$ , highly positive correlation. The correlation at different age groups between awareness and the pattern of availing health insurance is a highly positive correlation (+0.97).

### FINDINGS

- ❖ The trend among the respondents in purchasing the health insurance policy is higher within age group of 30-40.
- ❖ Among the 42 respondents, 57.14 per cent people are availing health insurance policy due to group other than government.
- ❖ Of the 120 respondents, 90.0 per cent of them are aware about health insurance.

### CONCLUSION

It is concluded from the study that the people are highly aware about health insurance but they are not willing to purchase health insurance facilities. There is a huge disparity among the people who are availing the policy and the people who are aware on the health insurance policies. The only way for narrowing this gap down is through encouraging the people for purchasing the individual health insurance policies for the self and family.

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