

A Comparative Study of Consumer Awareness Towards Public and Private Health Insurance Plans with Reference to Kozhikode District

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Abstract:

This study explores the level of consumer awareness regarding public and private health insurance plans in Kozhikode district. It aims to identify the factors influencing consumer preferences, the challenges faced in understanding insurance policies, and the comparative advantages of public versus private health insurance schemes. By analyzing data collected from diverse demographic groups, the research highlights gaps in awareness and suggests strategies to enhance consumer education and informed decision-making. The findings provide valuable insights for policymakers, insurers, and consumers to bridge the knowledge gap and improve the accessibility and effectiveness of health insurance plans.

Keywords:

1. Consumer Awareness
2. Public Health Insurance
3. Private Health Insurance
4. Kozhikode District
5. Policy Comparison

INTRODUCTION

1.1 BACKGROUND OF THE STUDY

Health insurance is a critical component of financial security and access to healthcare. It provides coverage for medical expenses, thereby reducing the financial burden on individuals and families. The health insurance sector has grown significantly over the years, driven by rising healthcare costs, government initiatives, and increased awareness among consumers. In India, health insurance is broadly categorized into public and private plans. Public health insurance schemes, such as Ayushman Bharat and state-sponsored programs, aim to provide

affordable healthcare coverage to a larger population, particularly targeting economically weaker sections. Private health insurance, on the other hand, offers customized and comprehensive plans, catering to consumers seeking extensive benefits and quicker claims processing.

Despite the growth of the health insurance sector, a significant portion of the population remains either uninsured or underinsured. Many individuals lack adequate knowledge about the different types of health insurance plans available, their coverage, and the benefits they offer. This lack of awareness often results in financial strain during medical emergencies, forcing families to rely on out-of-pocket expenditures or loans. Understanding the level of consumer awareness and their preferences is essential in addressing these gaps and enhancing the accessibility of health insurance.

Consumer awareness about health insurance is influenced by various factors, including education levels, income, access to information, and past healthcare experiences. Additionally, marketing strategies, awareness campaigns, and recommendations from peers or healthcare professionals play a significant role in shaping consumer choices. Individuals often make decisions based on perceived affordability, ease of claim processing, hospital network coverage, and the quality of services provided under different insurance plans. A comparative study of private and public health insurance can help identify the key drivers behind consumer preferences and shed light on areas that require improvement.

Public health insurance schemes, while beneficial in providing low-cost healthcare access, often face challenges such as bureaucratic delays, limited hospital networks, and inadequate coverage for specialized treatments. On the other hand, private health insurance plans offer a wider range of services, faster claims processing, and access to high-quality healthcare facilities. However, higher premium costs and complex policy terms may discourage lower-income groups from opting for private insurance. This study will evaluate these aspects to provide a clearer understanding of consumer perceptions and decision-making processes.

This research seeks to evaluate consumer awareness levels regarding private and public health insurance plans. It also aims to analyse the factors influencing consumer decisions, compare perceived benefits and limitations, assess the impact of marketing campaigns, and suggest measures for improving awareness and adoption rates. By addressing these aspects, the study will contribute to the formulation of better policies and strategies to enhance health insurance penetration and consumer satisfaction.

The study focuses on Kozhikode district, a region with a diverse population in terms of demographics and socio-economic backgrounds. Kozhikode is home to a mix of urban and rural communities, making it an ideal location to analyse variations in health insurance awareness and preferences. The district has witnessed growing healthcare needs and increasing insurance penetration, yet many consumers still lack sufficient knowledge about available plans. Additionally, variations in literacy rates, income levels, and employment sectors contribute to differences in health insurance adoption among residents.

Understanding consumer awareness and preferences in Kozhikode can help policymakers and insurance providers develop targeted strategies to improve health insurance adoption, ensuring better financial protection and healthcare access for residents. By identifying key challenges and factors affecting consumer choices, this study will provide insights that can contribute to more effective awareness campaigns and policy interventions tailored to the specific needs of the Kozhikode population.

1.2 STATEMENT OF THE PROBLEM

Many consumers in Kozhikode lack awareness of the benefits and differences between private and public health insurance plans. Limited knowledge, affordability concerns, and ineffective marketing impact their choices. This study aims to analyse these factors and suggest strategies to improve awareness and adoption.

1.3 OBJECTIVES OF THE STUDY

1. To identify the level of consumer awareness regarding private and public health insurance plans in Kozhikode.
2. To study the factors influencing consumer preferences for private or public health insurance plans.
3. To compare the perceived benefits and limitations of private and public health insurance plans among consumers in Kozhikode.
4. To analyse the role of awareness campaigns and marketing strategies in shaping consumer choices for health insurance plans.
5. To suggest strategies for improving awareness and adoption of private and public health insurance plans among consumers in Kozhikode.

1.4 HYPOTHESES FOR THE STUDY

Based on the research objectives and the scope of the study, the following hypotheses are formulated to guide the investigation into the consumer awareness and preferences towards public and private health insurance plans in Kozhikode district.

Hypothesis 1: Relationship between gender and preferences for public and private health insurance

- Null hypothesis (H₀): There is no significant relationship between gender and preference for public vs private health insurance plans in Kozhikode district.

- Alternative hypothesis (H1): There is a significant relationship between gender and preference for public and private health insurance plans in Kozhikode district.

Hypothesis 2: Relationship between levels of awareness about health insurance in Kozhikode across different income levels.

- Null hypothesis (H0): There is no significant relationship between levels of awareness about health insurance in Kozhikode across different income levels.
- Alternative hypothesis (H1): There is a significant relationship between levels of awareness about health insurance in Kozhikode across different income levels.

1.5 SCOPE OF THE STUDY

This study examines consumer awareness, preferences, and influencing factors regarding private and public health insurance plans in Kozhikode. It aims to identify gaps in awareness and suggest strategies to enhance adoption and accessibility. This study is significant as it highlights the level of consumer awareness and factors influencing the choice between private and public health insurance in Kozhikode. It provides insights for policymakers and insurers to improve awareness campaigns, enhance accessibility, and promote informed decision-making, ultimately increasing health insurance adoption in the district.

1.5.1 RESEARCH METHADODOLOGY

This study adopts a descriptive research and inferential data analysis using both primary and secondary data. Primary data will be collected through structured questionnaires from a sample of 100 respondents in Kozhikode. Secondary data will be sourced from government reports and journals.

1.5.2 RESEARCH DESIGN

The study employs a comparative design to analyse consumer awareness, preferences, and influencing factors regarding private and public health insurance. Data will be Analyse using frequency distribution and comparative analysis to derive meaningful insights.

1.5.3 SOURCE OF DATA

- **Primary Data:** collected directly from consumers through surveys through questionnaire.
- **Secondary Data:** derived from academic journals and articles related to health insurance and its awareness in consumers.

1.5.4 PERIOD OF THE STUDY

The study was conducted during the 6th semester.

1.5.5 POPULATION OF THE STUDY

The population of this study includes residents of Kozhikode district, covering diverse demographic groups such as different age groups, income levels, occupations, and educational backgrounds.

1.5.6 SAMPLE SIZE

Sample Size: The study will survey 100 respondents from Kozhikode district to ensure a representative analysis of consumer awareness and preferences regarding private and public health insurance.

1.5.7 TOOLS USED FOR ANALYSIS OF DATA

- **Descriptive Statistics** – Used to analyse frequency, percentages, and averages for better understanding of consumer awareness and preferences.
- **Charts and Graphs** – Used for visual representation of data to identify trends and patterns.
- **SPSS/MS Excel** – Software tools used for organizing, processing, and analysing collected data efficiently.

1.6 LIMITATION OF THE STUDY

1.Limited Geographical Scope – The study is confined to Kozhikode district, which may not represent consumer awareness in other regions.

2. Sample Size Constraint – With only 100 respondents, the findings may not fully reflect the views of the entire population.

3.Respondent Bias – Some participants may provide socially desirable answers rather than their actual experiences.

4. Time Constraints – The study is conducted within a limited timeframe, restricting in-depth analysis.

5. Evolving Policies – Health insurance policies and government schemes change frequently, affecting the long-term relevance of the findings.

1.7 CHAPTER SCHEME

CHAPTER 1

This chapter deals with the introduction of the study. Statement of the problem, objective of the study scope of the study research methodology limitation of the study and the chapter scheme of the study.

CHAPTER 2

The chapter emphasises on review of literature, which consists of both Indian and Foreign reviews related to the study.

CHAPTER 3

The chapter includes theoretical frameworks.

CHAPTER 4

It includes data analysis and interpretations to reach findings and conclusions.

CHAPTER 5

The chapter includes findings, suggestions and a conclusion for the study.

CHAPTER II REVIEW OF LITERATURE

A review of literature provides a theoretical foundation for the study by analysing previous research on consumer awareness and preferences toward private and public health insurance. It helps in understanding key factors influencing consumer decisions, such as affordability, accessibility, service quality, and marketing strategies. Several studies highlight the role of demographic characteristics, socio-economic status, and government initiatives in shaping health insurance adoption. Additionally, research has examined the impact of awareness campaigns and policy interventions on increasing insurance penetration. This review aims to identify gaps in existing literature and provide insights to support the comparative analysis of consumer awareness in Kozhikode district.

1.A. Garg (2005), "Satisfaction & Problems of Health Insurance Policyholders in India" This study addresses the satisfaction levels and challenges faced by health insurance policyholders in India. Through surveys and interviews, the research identifies common issues such as claim settlement delays and inadequate coverage. The author recommends policy reforms and improved customer service to enhance satisfaction.

2. K.B. Gurunathan (2010), "Level of Awareness on Indian Health Insurance Sector" This article assesses the awareness levels of the Indian health insurance sector among consumers. Utilizing survey data, the study finds that while urban consumers have moderate awareness, rural consumers exhibit significantly lower awareness. The author suggests.

3.A. Aggarwal, N. Kapoor, and A. Gupta (2013), "Health Insurance: Innovation and Challenges Ahead" This article explores the innovations and challenges in India's health insurance sector. The authors discuss the role of product innovation, regulatory changes, and consumer awareness in shaping the industry's future. The

study highlights the need for insurers to adapt to changing consumer expectations and the importance of strategic planning to overcome existing challenges.

4.M.L. Choudhary et al. (2013), "Awareness of Health Insurance: Its Related Issues in Rural Areas of Jamnagar District" This study investigates health insurance awareness in rural Jamnagar. Through surveys, it identifies low awareness levels and misconceptions about health insurance among rural populations. The authors suggest targeted educational campaigns to improve understanding and uptake of health insurance policies in these areas.

5. K.T. Thomas and R. Sakthivel (2015), "Retail Participation in Health Insurance: A Model of Consumer Preferences": This study investigates consumer preferences in India's nascent retail health insurance sector, characterized by low participation. Utilizing a survey of 495 respondents, the research employs factor analysis and structural equation modelling to identify key consumer perspectives. The findings aim to assist stakeholders in designing products that align with consumer needs, thereby enhancing retail participation and addressing health financing challenges.

6. Ritu Sehgal (2017), "A Comparative Study of Customer Satisfaction and Level of Loyalty Between Public Insurance Sector and Private Insurance Sector" This study analyses customer satisfaction and loyalty across public and private insurance sectors in Jalandhar city. Surveying 200 respondents, the research identifies demographic variables influencing satisfaction and loyalty. Findings reveal disparities in loyalty levels between sectors, suggesting that private insurers may need to enhance customer relationship strategies to match the public sector's performance.

7. S. Deepa, T. Geeta, and S.M. Subramanian (2018), "A Study on Health Insurance Premium, Commission & its Growth of Select Companies in India" This research examines the growth trends in health insurance premiums and commissions among selected Indian companies. Analysing financial data, the study identifies factors influencing premium growth and the role of commissions in distribution channels. The findings provide insights into the financial dynamics of health insurance companies and their impact on consumer pricing.

8. I.M. Sheshi, Y.F. Issa, S.A. Aderibigbe, B.E. Agbana, and M.D. Sanni (2020), "Comparative Study of Enrolee Satisfaction with Private and Public Health Care Providers of Community-Based Health Insurance Scheme in Edu LGA, Kwara State" This research compares enrolee satisfaction between private and public healthcare providers under a community-based health insurance scheme in Edu Local Government Area, Kwara State, Nigeria. A cross-sectional study involving 800 respondents utilized semi-structured questionnaires and focus group discussions. The findings reveal higher satisfaction levels among enrolees of private providers compared to public ones, particularly in domains such as empathy, tangibles, assurance, and timeliness. The study suggests maintaining private facilities as part of the insurance scheme and recommends strengthening monitoring and supervision to enhance service quality in public health facilities.

9. K. Raji Reddy and V. Harini (2020), "Policyholders' Awareness and Perception Towards TPAs in Indian Health Insurance Industry: A Comparative Study of Public and Private Players" This study investigates policyholders' awareness and perceptions of Third-Party Administrators (TPAs) in the Indian health insurance industry, comparing public and private sector players. Through surveys and analysis, the research

reveals that there is confusion among policyholders regarding the role of TPAs and health insurance agents. The study emphasizes the need for better institutionalization of TPAs and enhanced communication to clarify their functions, thereby improving service delivery and consumer satisfaction in both public and private sectors.

10. Dr. K. Vijaya Chitra, Dr. V. Ramya, and Dr. Vijayakumar Gajenderan (2021), "A Study on Customer Awareness Level and Satisfaction of Health Insurance Policies in Chennai City" This research assesses customer awareness and satisfaction regarding health insurance policies in Chennai. Based on 283 responses, the study employs statistical analyses to explore the relationship between product awareness and satisfaction levels. Results indicate that customers are generally well-informed about health insurance offerings, and a significant positive correlation exists between awareness and satisfaction.

11. Arya Praveen Kumar and Prof. D. Sreeramulu (2022), "Insurance Company Marketing Strategies: A Comparative Study of Public and Private Company" This research examines the impact of marketing strategies on consumer purchasing preferences in Hyderabad's health insurance sector. Through a survey of 520 buyers and 48 agents, the study employs ANOVA, correlation, and t-tests to analyse data. Results indicate that marketing strategies significantly influence purchase preferences, with notable differences between public and private insurers. The study underscores the importance of tailored marketing approaches to enhance consumer engagement.

12. Dr. Rakesh Kumar and Dr. Surender Singh (2023), "A Comparative Analysis of Private Insurance Companies and Life Insurance Corporation of India" This study conducts a comparative analysis of private insurance companies and the Life Insurance Corporation (LIC) of India. It examines various parameters such as market share, consumer trust, and service quality. The findings indicate that while private insurers offer innovative products and personalized services, LIC maintains a stronghold due to its longstanding reputation and extensive reach. The study suggests that both sectors can benefit from adopting each other's strengths to enhance overall consumer satisfaction and market penetration.

13. Dr. S. K. Sinha and Dr. P. K. Gupta (2023), "A Comparative Study on Consumer Perception and Choice in Health Insurance Pre and Post COVID-19 Era" This study examines the shifts in consumer perception and choices regarding health insurance before and after the COVID-19 pandemic. Utilizing surveys and interviews conducted with 500 respondents across urban and rural areas, the research identifies a significant increase in health insurance awareness post-pandemic. Consumers have become more inclined towards comprehensive coverage, with a notable shift from public to private health insurance plans due to perceived better services and faster claim settlements. The study emphasizes the need for greater consumer education and simplified insurance processes to increase coverage and utilization of insurance in the post-pandemic period.

14. Chyavana Kondapally, Dr. M. Vikram Reddy, and Dr. B. Mohan Kumar (2024), "Impact of Consumer Awareness, Attitude, and Perception on Consumer Purchase of Health Insurance Plans in Hyderabad" This study analyses the relationship between consumer awareness, attitudes, and perceptions, and their impact on the purchase of health insurance plans in Hyderabad. Utilizing a survey of 300 consumers, the research employs descriptive statistics, correlation coefficients, and multiple regression analysis. Findings indicate that increased consumer knowledge positively correlates with favourable attitudes and perceptions toward health insurance. Key decision criteria include perceived trust, price, and coverage options. The study

recommends enhanced communication efforts and consumer education to address misconceptions and barriers hindering the adoption of suitable health insurance plans.

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INTRODUCTION

3.1 INTRODUCTION

Consumer awareness and decision-making regarding health insurance plans play a vital role in ensuring financial security against unforeseen medical expenses. In recent years, both public and private health insurance plans have gained significance due to the rising cost of healthcare services. However, the level of consumer awareness, the factors influencing their choices, and the perceived benefits and limitations of these insurance plans vary widely among different sections of society. This chapter aims to explore the theoretical foundation of consumer awareness, decision-making models, and factors influencing the preference for public or private health insurance plans. It also examines the role of marketing strategies and awareness campaigns in shaping consumer choices, while providing a comparative analysis of both types of health insurance. By integrating relevant economic, psychological, and behavioural theories, this chapter provides a structured framework for understanding consumer behaviour in the health insurance sector.

3.2 CONSUMER AWARENESS AND DECISION-MAKING

Consumer awareness refers to the extent to which individuals understand the various aspects of health insurance, including its availability, features, benefits, costs, and claim procedures. Awareness is a critical factor that determines the adoption and effective utilization of insurance policies. In the context of health insurance, consumers are often influenced by factors such as their level of financial literacy, exposure to marketing communications, and previous experiences with insurance products. The awareness level can be categorized into three stages: basic awareness, where individuals know about health insurance but have limited knowledge of different plans; intermediate awareness, where consumers understand specific insurance plans and their benefits; and advanced awareness, where individuals have a comprehensive understanding of policy terms, premium structures, claim processes, and government schemes.

Understanding consumer decision-making in health insurance requires a structured approach, which can be analysed through the Engel-Kollat-Blackwell (EKB) Model of Consumer Decision-Making. This model consists of five key stages: (1) Problem Recognition, where consumers become aware of their need for financial protection against medical expenses; (2) Information Search, in which individuals gather knowledge about different insurance plans through online resources, advertisements, insurance agents, and social influences; (3) Evaluation of Alternatives, where consumers compare public and private insurance options based on cost, benefits, claim processes, and hospital network coverage; (4) Purchase Decision, where individuals select and enrol in an insurance plan that aligns with their needs and financial capacity; and (5) Post-Purchase Behaviour,

where consumers assess their satisfaction based on their experience with claim settlements and healthcare services provided under the insurance plan. This model highlights the significance of awareness and access to accurate information in influencing consumer choices.

3.3 THEORIES RELATED TO CONSUMER PREFERENCES IN HEALTH INSURANCE

3.3.1 The Theory of Planned Behaviour (TPB)

The Theory of Planned Behaviour (TPB) proposed by Ajzen (1991) provides a psychological framework for understanding consumer preferences in health insurance. According to TPB, three main factors determine an individual's intention to purchase health insurance: attitude, subjective norms, and perceived behavioural control. Attitude towards behaviour refers to the consumer's perception of health insurance as either beneficial or unnecessary. If consumers perceive health insurance as a financial burden rather than a necessity, they are less likely to enrol in a plan. Subjective norms refer to the influence of family, peers, and societal expectations on an individual's decision-making process. Recommendations from family members, employers, and doctors often play a crucial role in shaping consumer preferences. Perceived behavioural control represents the consumer's confidence in their ability to purchase and utilize health insurance. If consumers believe that enrolling in health insurance is a complicated and time-consuming process, they may avoid purchasing a policy despite recognizing its benefits. TPB is particularly relevant in analysing consumer reluctance towards insurance adoption and helps in identifying areas where awareness campaigns and policy reforms can be improved.

3.3.2 The Health Belief Model (HBM)

The Health Belief Model (HBM) is another widely used framework in health insurance research that explains why individuals opt for or avoid insurance coverage. This model is based on the assumption that an individual's decision to purchase health insurance is influenced by their perception of risk and benefits. The HBM consists of six key components: perceived susceptibility, perceived severity, perceived benefits, perceived barriers, cues to action, and self-efficacy. Perceived susceptibility refers to how vulnerable an individual feels about encountering a health emergency. If consumers believe they are unlikely to face a medical crisis, they may not consider health insurance a priority. Perceived severity deals with the extent to which individuals believe that an illness or medical expense could cause financial distress. Higher perceived severity leads to greater willingness to invest in health insurance. Perceived benefits involve the advantages of having health insurance, such as access to quality healthcare, cashless hospitalization, and financial protection. Perceived barriers refer to the challenges consumers associate with health insurance, such as high premiums, complex policy terms, and difficulties in claim processing. Cues to action are external influences like government campaigns, advertisements, and peer recommendations that encourage individuals to consider health insurance. Self-efficacy is an individual's belief in their ability to understand and navigate health insurance options. The HBM is useful in designing awareness campaigns and marketing strategies that address consumer concerns and encourage health insurance adoption.

3.4 Comparative Analysis of Public and Private Health Insurance Plans

Health insurance plans can broadly be categorized into public (government-funded) and private (commercial) insurance schemes. Public health insurance aims to provide affordable healthcare access to economically weaker sections, whereas private insurance is designed for individuals seeking comprehensive coverage with added benefits.

3.4.1 Public Health Insurance Plans

Public health insurance is typically subsidized or fully funded by the government. In India, popular government-sponsored health insurance schemes include Ayushman Bharat - Pradhan Mantri Jan Arogya Yojana (AB-PMJAY), Rashtriya Swasthya Bima Yojana (RSBY), and Employee State Insurance Scheme (ESIS). These programs provide coverage for hospitalization, surgeries, and medical treatments at minimal or zero premium costs. The main benefits of public health insurance are affordability, inclusivity, and financial protection for low-income groups. However, the limitations include restricted access to quality healthcare facilities, long waiting times, and bureaucratic challenges in claim processing.

3.4.2 Private Health Insurance Plans

However, the major drawback of private insurance is its high premium cost, making it less accessible to low-income individuals. Despite these costs, many consumers prefer private insurance due to better service quality, fewer restrictions on hospital choices, and additional benefits like critical illness coverage.

3.5 ROLE OF AWARENESS CAMPAIGNS AND MARKETING STRATEGIES OF HEALTH INSURANCE

Awareness campaigns and marketing strategies play a crucial role in influencing consumer decisions regarding health insurance. Government awareness programs focus on educating individuals about public health insurance schemes through mass media, social media, and community outreach programs. Private insurance companies, on the other hand, employ aggressive marketing tactics such as personalized advertisements, digital marketing, and direct sales through insurance agents. Effective awareness campaigns can bridge the knowledge gap and encourage more individuals to enrol in health insurance plans.

3.6 HEALTH INSURANCE PRODUCTS AVAILABLE IN INDIA

For avoiding risk aroused of health issues, there are different type of policies and plans for the risk coverage by public sector as well as private sector insurance companies. The financial products offered by these companies regarding health insurance give protection to individuals, family or group of persons. Different types of insurance plans have been discussed as under:

1. Individual health insurance plan

This plan offers risk coverage to an individual towards hospitalization and other incidental expenses during the course of hospitalization subject to the sum insured. In this policy, one can buy different independent policies

for each member of a family. These plans are basically indemnity plans and are generally offered on cashless basis.

2. Family floater health insurance plan

in this policy, single sum insured covers all the members of the family in one policy. The sum assured is available to any one member or to all members in case of any eventuality during the term of the policy. The premium amount paid under this policy is generally lower as compared to individual policies for each family member under individual Mediclaim policy.

3. Group medical plan

These plans are generally taken by business owners, private companies, government companies and departments, to provide a financial cover to their employees and their dependent family members on nominal deduction from salary towards premium.

4. Unit linked health plan (ULHP)

In this form of health insurance, the insured gets the benefit of investment along with health care coverage. In this plan, a part of premium paid is invested and the balance is used to buy health cover. The return enables the insured to pay medical expenses over and above the sum assured. These kinds of plans are new and considered to be under development stage in India. Returns under a ULHP depend on the performance of stock market.

5. Critical illness plan

The expenses involved in treating a life-threatening diseases like cancer, organ failure, permanent paralysis etc. are covered by a critical illness policy. The insured is paid a lump sum amount on the diagnosis of any of the serious diseases covered in the policy document.

6. Super top up plan

These policies provide additional coverage to an insured over the regular policy and help in increasing the sum insured. Super top up policies can be availed only after the sum assured in the basic policy gets exhausted.

7. Senior citizen health insurance plan

IRDA guidelines require health insurers to provide health insurance plans up to 65 years of age. Various health issues arise in older ages that involve expensive treatments. Keeping this in mind, health insurance companies have designed special health insurance plans for senior citizens above the age of 65 years. The rate of premium in senior citizen health insurance plans is generally higher as compared to other insurance policies.

8. Hospital daily cash benefit plan

As evident from the name itself, this kind of policy pays a definite sum of money for everyday of hospitalization irrespective of the actual cost incurred by the insured.

9. Maternity insurance plan

These plans are specially designed for women planning to have a child or are bearing one. This policy covers all expenses before and after the pregnancy, pre- and post-natal care, expenses for delivery, nursing and consultation etc. The policy also includes congenital, or a critical disease diagnosed in the newborn child.

10. Personal accident plan

A personal accident insurance policy covers the expenses incurred on medical treatment of injuries occurred due to an accident. This policy generally offers benefits against three events that include total disability, partial disability and death. Besides individuals, these policies are also offered for a group

3.7 CONCLUSION

This chapter has provided a theoretical foundation for understanding consumer awareness and decision-making in health insurance. By applying the Theory of Planned Behaviour (TPB) and Health Belief Model (HBM), this study highlights the key psychological and behavioural factors influencing consumer preferences. Additionally, the comparative analysis of public and private health insurance underscores the strengths and limitations of both types of plans. The role of awareness campaigns and marketing strategies is critical in shaping consumer choices and ensuring widespread adoption of health insurance. The next chapter will focus on the research methodology adopted to analyse consumer awareness and preferences in Kozhikode.

DATA ANALYSIS AND INTERPRETATION

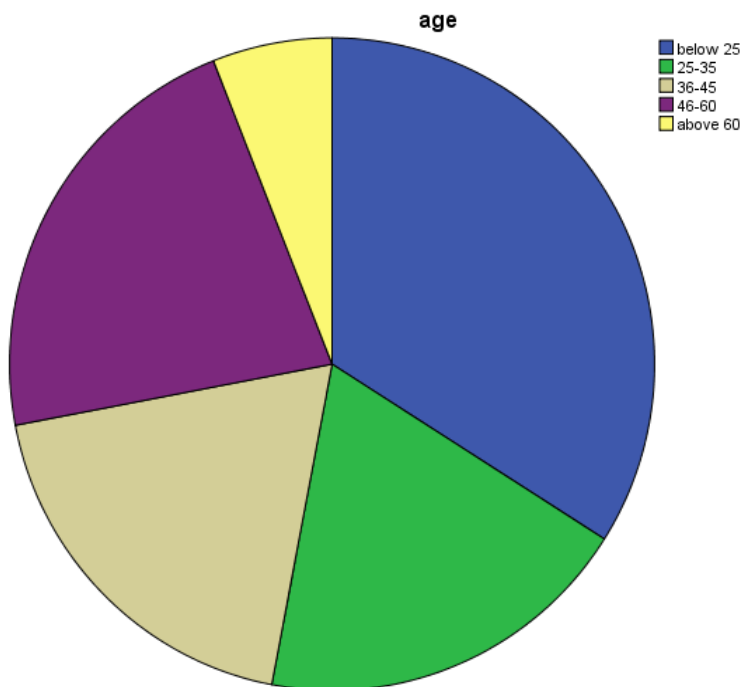
4.1. DATA ANALYSIS AND INTERPRETATION

TABLE 4.1.1 SHOWS THE AGE FACTORS OF THE RESPONDENT

age		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	below 25	34	34.0	34.0	34.0
	25-35	19	19.0	19.0	53.0
	36-45	19	19.0	19.0	72.0
	46-60	22	22.0	22.0	94.0
	above 60	6	6.0	6.0	100.0
	Total	100	100.0	100.0	

SOURCE; PRIMARY DATA

FIGURE 4.1.1 SHOWS THE AGE FACTOR OF THE RESPONDENT



INTERPRETATION:

The majority of respondents (34%) are below 25 years old, followed by 22% in the 46-60 age group. The 25-35 and 36-45 age groups each constitute 19% of the sample, while only 6% are above 60. This indicates that younger individuals form a significant portion of the study sample.

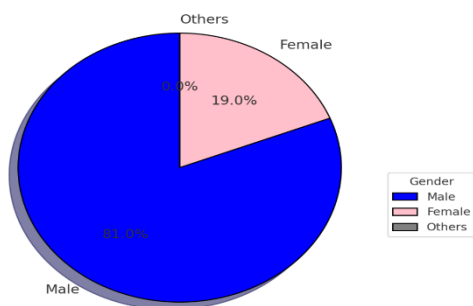
TABLE 4.1.2 SHOWS THE GENDOR OF THE RESPONDENT

GENDER	NO OF RESPONDENT	PERCENTAGE
Male	81	81%
female	19	19%
others	0	0%
total	100	100%

SOURCE: PRIMARY DATA

FIGURE 4.1.2 SHOWS THE GENDER OF THE RESPONDENT

Gender Distribution of Respondents



INTERPRETATION:

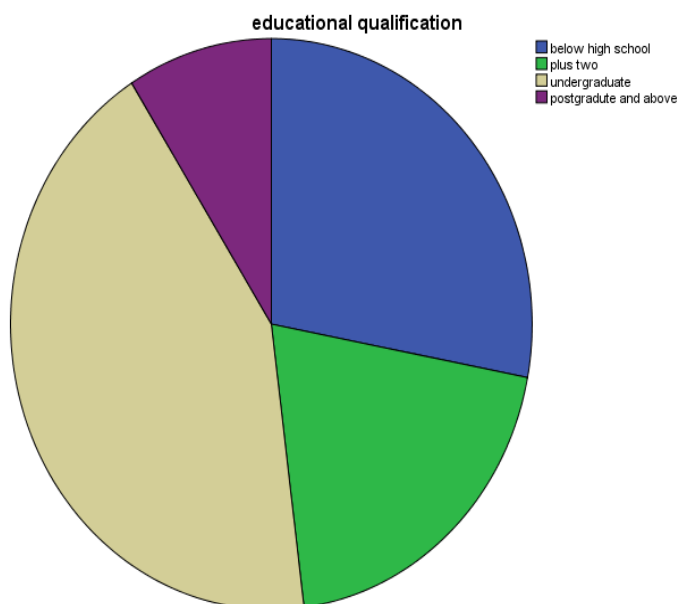
The gender distribution of respondents shows that the majority (81%) are male, while 19% are female. There are no respondents in the "Others" category. This indicates a significant gender disparity in the sample, with male respondents forming the dominant group.

TABLE 4.1.3 SHOWS THE QUALIFICATION OF THE RESPONDENT

Qualification of the respondent		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	below high school	28	28.0	28.0	28.0
	plus, two	20	20.0	20.0	48.0
	undergraduate	43	43.0	43.0	91.0
	postgraduate and above	9	9.0	9.0	100.0
	Total	100	100.0	100.0	

SOURCE: PRIMARY DATA

FIGURE 4.1.3 SHOWS THE QUALIFICATION OF THE RESPONDENT



Interpretation:

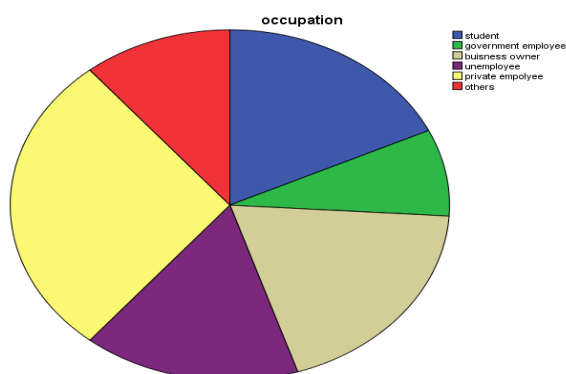
The educational qualification distribution of respondents indicates that the majority (43%) have completed an undergraduate degree. About 28% have education below high school, while 20% have completed higher secondary (Plus Two). Only 9% hold a postgraduate degree or higher. This suggests that most respondents have attained at least a basic level of higher education, with a smaller proportion pursuing postgraduate studies.

TABLE 4.1.4 SHOWS THE OCCUPATION OF THE RESPONDENT

Occupation		Frequency	Percent	Valid Percent	Cumulative Percent
	student	18	18.0	18.0	18.0
	government employee	8	8.0	8.0	26.0
	business owner	19	19.0	19.0	45.0
	unemployed	16	16.0	16.0	61.0
	private employee	28	28.0	28.0	89.0
	others	11	11.0	11.0	100.0
	Total	100	100.0	100.0	

SOURCE: PRIMARY DATA

FIGURE 4.1.4 SHOWS THE OCCUPATION OF THE RESPONDENT



INTERPRETATION:

The occupation distribution of respondents shows that the largest group (28%) consists of private employees, followed by business owners (19%) and students (18%). Unemployed individuals make up 16% of the sample, while government employees account for 8%. Additionally, 11% fall into the "Others" category. This indicates a diverse occupational background among respondents, with a significant portion engaged in private-sector jobs.

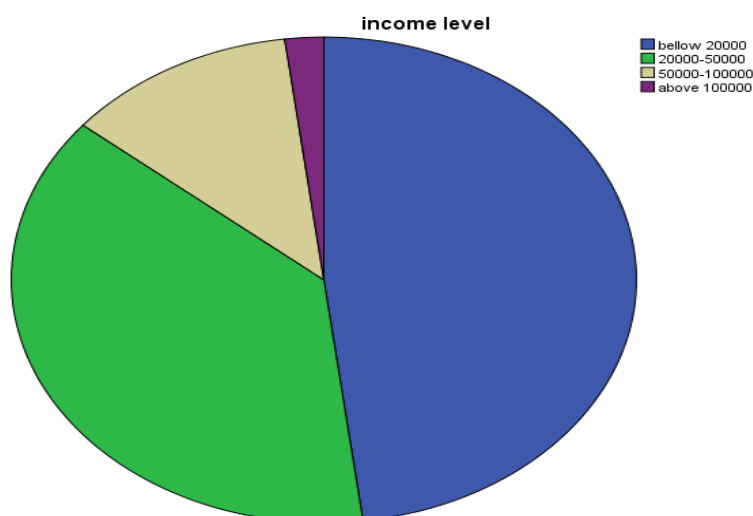
TABLE 4.1.5 SHOWS THE INCOME LEVEL OF THE RESPONDENT

INCOME LEVEL

INCOME LEVEL		Frequenc y	Percent	Valid Percent	Cumulative Percent
	bellow 20000	48	48.0	48.0	48.0
	20000- 50000	38	38.0	38.0	86.0
	50000- 100000	12	12.0	12.0	98.0
	above 100000	2	2.0	2.0	100.0
	Total	100	100.0	100.0	

SOURCE: PRIMARY DATA

FIGURE 4.1.5 SHOWS THE SALARY OF THE RESPONDENT



INTERPRETATION:

The income level distribution of respondents shows that nearly half (48%) earn below ₹20,000 per month, while 38% fall within the ₹20,000-₹50,000 range. Only 12% have an income between ₹50,000-₹1,00,000, and a very small proportion (2%) earn above ₹1,00,000. This suggests that the majority of respondents belong to lower and middle-income groups, with a relatively small percentage in higher income brackets

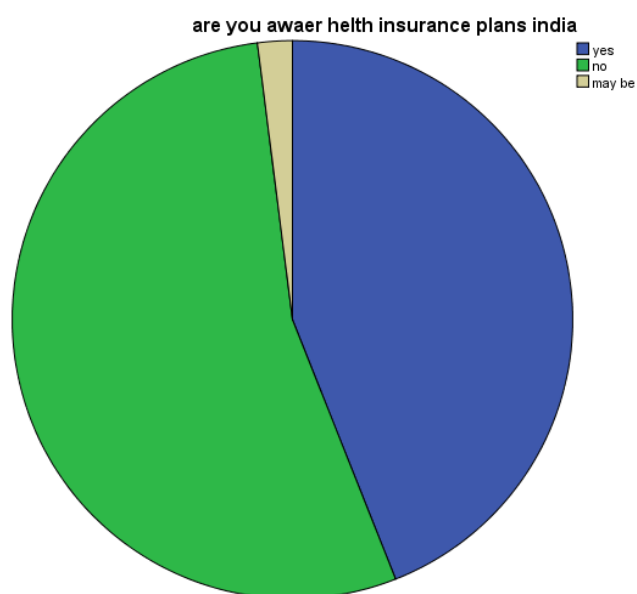
TABLE 4.1.6 SHOWS THE HEALTH INSURANCE AWARENESS % OF RESPONDENTS

Do you aware about health insurance plans

do you aware about health insurance plans		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	44	44.0	44.0	44.0
	no	54	54.0	54.0	98.0
	may be	2	2.0	2.0	100.0
	Total	100	100.0	100.0	

SOURCE: PRIMARY DATA

FIGURE 4.1.6 SHOWS THE HEALTH INSURANCE AWARENESS % OF RESPONDENTS



INTERPRETATION:

The data indicates that a majority (54%) of respondents answered "No," while 44% responded "Yes." A small percentage (2%) selected "Maybe." This suggests that most respondents are not in favour of or do not align with the given statement, while a significant portion supports it, and a very small group remains uncertain.

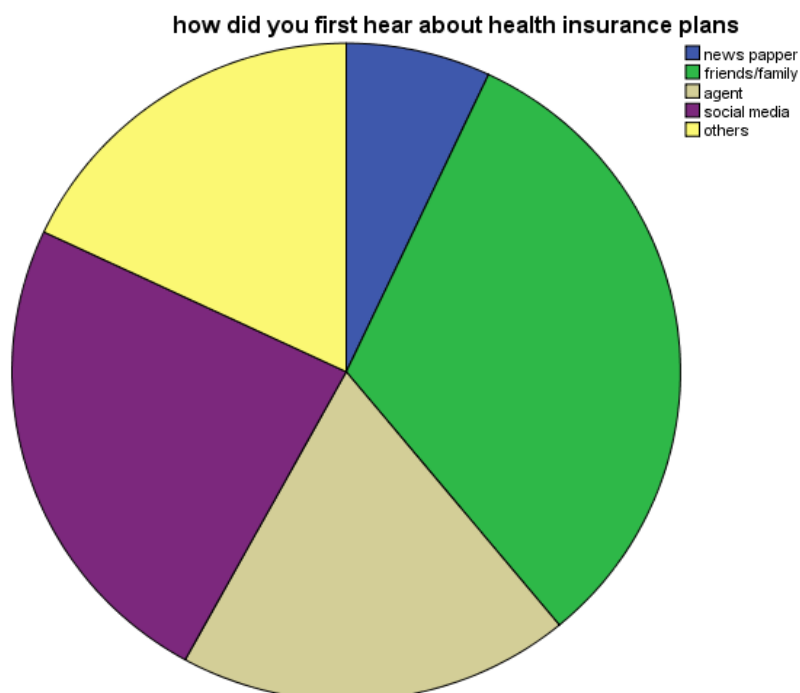
TABLE 4.1.7 SHOWS THE HOW RESPONDENTS ARE AWARE ABOUT HEALTH INSURANCE

how did you first hear about health insurance plans

How did you first hear about life insurance		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	news paper	7	7.0	7.0	7.0
	friends/family	32	32.0	32.0	39.0
	agent	19	19.0	19.0	58.0
	social media	24	24.0	24.0	82.0
	others	18	18.0	18.0	100.0
	Total	100	100.0	100.0	

SOURCE: PRIMARY DATA

FIGURE 4.1.7 SHOWS HOW RESPONDENTS ARE AWARE ABOUT HEALTH INSURANCE



INTERPRETATION:

The data reveals that the most common source of information about life insurance is friends and family (32%), followed by social media (24%). Insurance agents account for 19% of initial awareness, while newspapers contribute only 7%. Additionally, 18% of respondents learned about life insurance through other sources. This suggests that personal connections and digital platforms play a significant role in spreading awareness about life insurance.

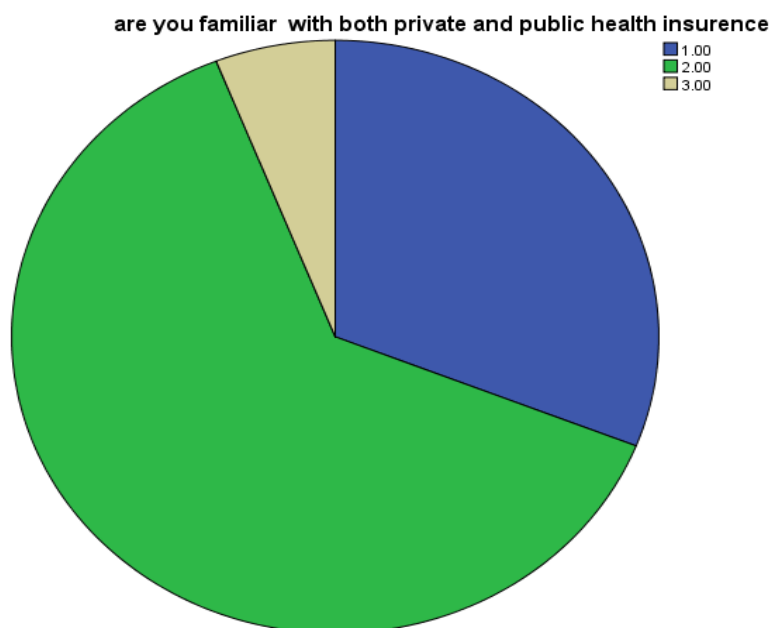
TABLE 4.1.8 SHOWS THE PEOPLE FAMILIAR WITH BOTH PUBLIC AND PRIVATE HEALTH INSURANCE

are you familiar with both private and public health insurance

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	YES	31	31.0	31.0	31.0
	NO	63	63.0	63.0	94.0
	MAY BE	6	6.0	6.0	100.0
	Total	100	100.0	100.0	

SOURCE: PRIMARY DATA

FIGURE 4.1.8 SHOWS THE PEOPLE FAMILIAR WITH BOTH PUBLIC AND PRIVATE HEALTH INSURANCE



INTERPRETATION:

The data indicates that 63% of respondents are not familiar with both private and public health insurance, while 31% are familiar with them. A small proportion (6%) are uncertain. This suggests a lack of awareness about health insurance among a majority of respondents, highlighting the need for better education and outreach regarding both private and public health insurance options.

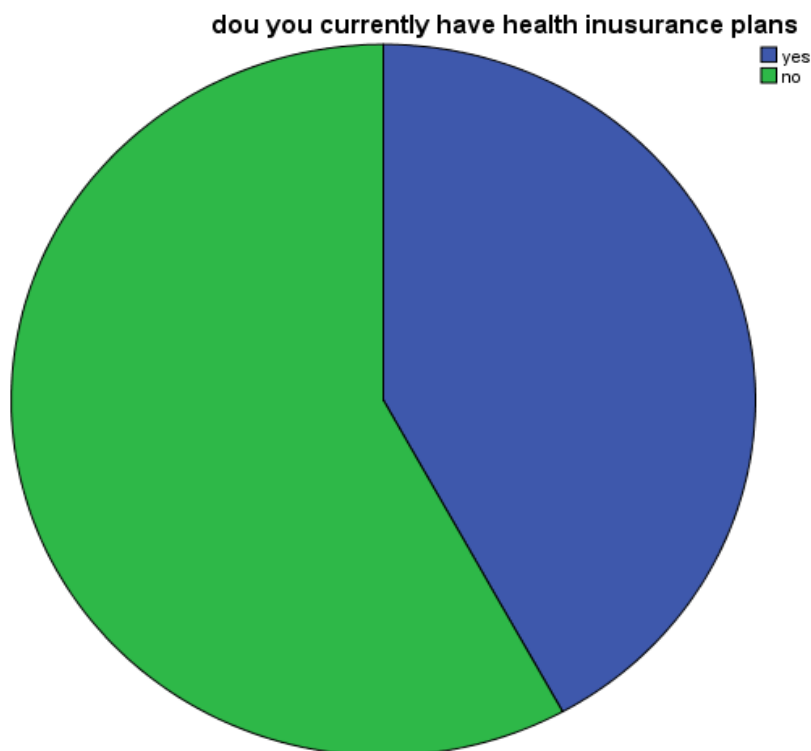
TABLE 4.1.9 SHOWS THE RESPONDENTS CURRENTLY HAVE A HEALTH INSURANCE PLAN

Doyou currently have health insurance plans

DO you currently have a health insurance plan		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	42	42.0	42.0	42.0
	no	58	58.0	58.0	100.0
	Total	100	100.0	100.0	

SOURCE: PRIMARY DATA

FIGURE 4.1.9 SHOWS THE RESPONDENTS CURRENTLY HAVE A HEALTH INSURANCE PLAN



INTERPRETATION:

The data reveals that 58% of respondents do not have a health insurance plan, while 42% do. This indicates that a significant portion of the population lacks health insurance coverage, which may suggest affordability issues, lack of awareness, or other barriers to obtaining insurance. These findings highlight the need for increased awareness and accessibility of health insurance options.

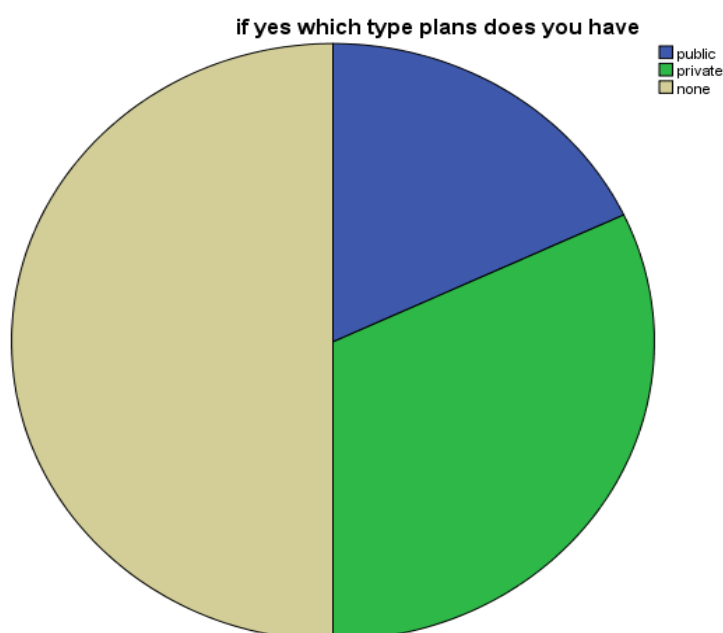
TABLE 4.1.10 SHOWS THE WHICH TYPE OF HEALTH INSURANCE PLANS DOES THE PUBLIC CHOOSE

IF yes which type of health insurance, does you have

IF yes which type of health insurance, does you have		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	public	18	18.0	18.0	18.0
	private	32	32.0	32.0	50.0
	none	50	50.0	50.0	100.0
	Total	100	100.0	100.0	

SOURCE: PRIMARY DATA

FIGURE 4.1.10 SHOWS THE WHICH TYPE OF HEALTH INSURANCE PLANS DOES THE PUBLIC CHOOSE



INTERPRETATION:

The data indicates that 50% of respondents do not have any health insurance, while 32% have private health insurance and 18% have public health insurance. This suggests that private insurance is more commonly chosen among insured individuals. However, the fact that half of the respondents lack any health insurance highlights a gap in coverage, emphasizing the need for greater awareness and accessibility of both public and private health insurance plans.

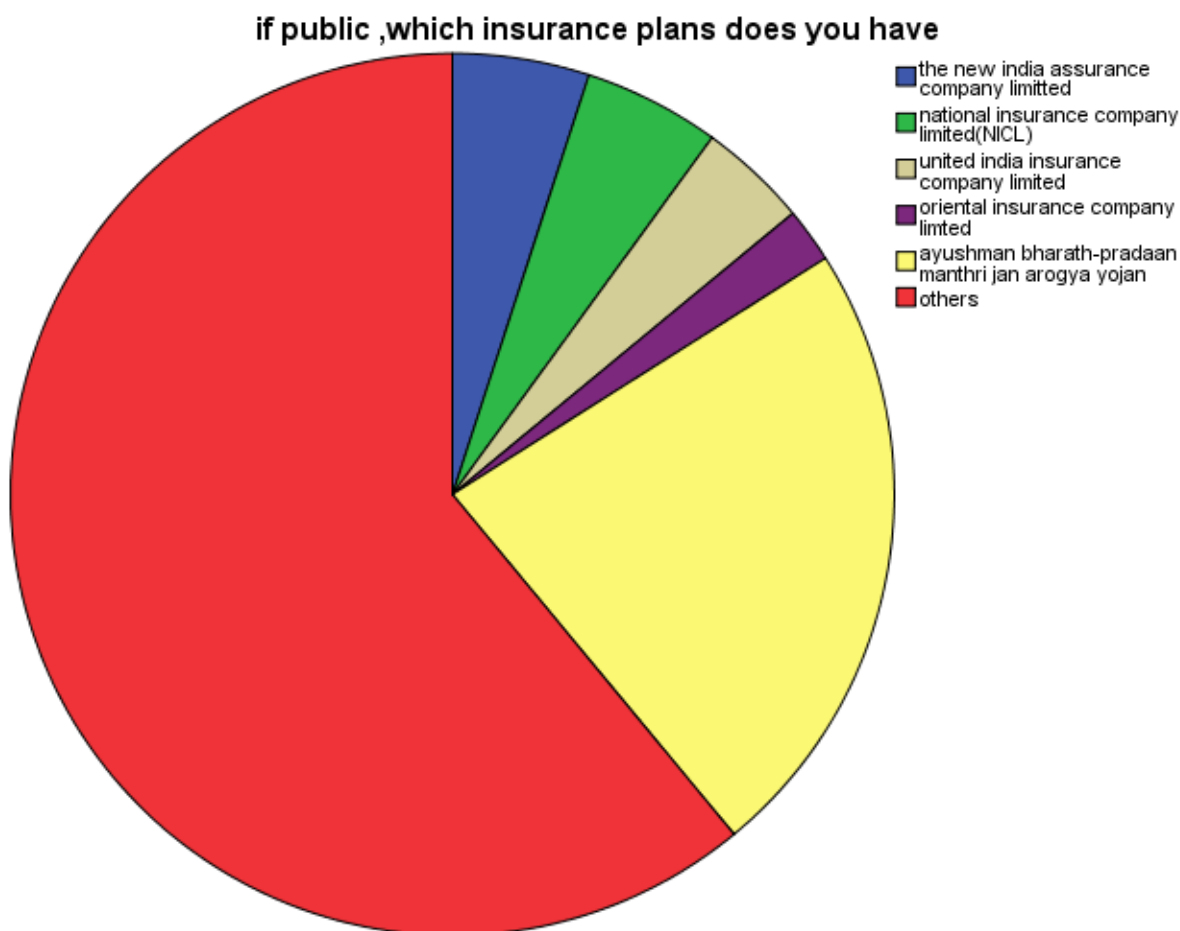
TABLE 4.1.11 SHOWS WHICH TYPE OF PUBLICHEALTH INSURANCE PLANS DOES THE RESPONDENT OWN

if public, which insurance plans does you have					
if public, which insurance plans does you have		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	the new India assurance company limited	5	5.0	5.0	5.0
	national insurance company limited(NI CL)	5	5.0	5.0	10.0
	united India insurance company limited	4	4.0	4.0	14.0
	oriental insurance company limited	2	2.0	2.0	16.0
	Ayushman Bharath Pradaanma ntricJanAr ogyaYojan	23	23.0	23.0	39.0

	others	61	61.0	61.0	100.0
	Total	100	100.0	100.0	

SOURCE: PRIMARY DATA

FIGURE 4.1.11 SHOWS WHICH TYPE OF PUBLIC HEALTH INSURANCE PLANS DOES THE RESPONDENT OWN



INTERPRETATION:

The data shows that among respondents with public health insurance, the majority (61%) fall under the "Others" category, suggesting they are covered by different or less common public insurance plans. Ayushman Bharat - Pradhan Mantri Jan Arogya Yojana (PMJAY) is the most recognized specific plan, covering 23% of respondents. Other public insurers such as The New India Assurance Company Ltd. (5%), National Insurance Company Ltd. (5%), United India Insurance Company Ltd. (4%), and Oriental Insurance Company Ltd. (2%) have relatively lower representation.

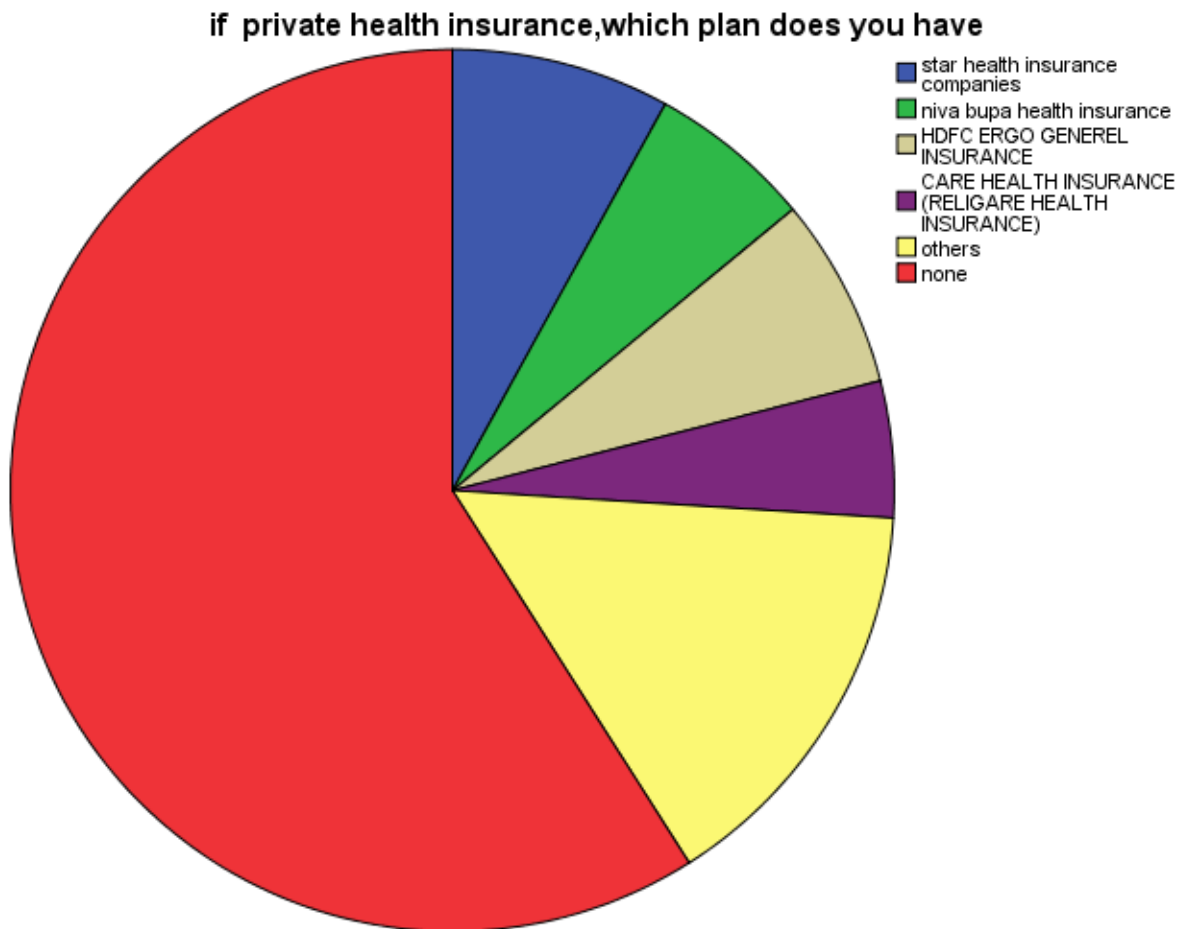
This indicates that while PMJAY has significant reach, many respondents are insured under other government-backed schemes or programs. It highlights the diverse landscape of public health insurance coverage and the need for better awareness of specific insurance providers.

TABLE 4.1.12 SHOWS THE IF PRIVATE HEALTH INSURANCE, WHICH PLAN O DOES THE RESPONDENT OWN

if private health insurance,which plan does you have					
if private health insurance,which plan does you have		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	star health insurance companies	8	8.0	8.0	8.0
	NivaBupa health insurance	6	6.0	6.0	14.0
	HDFC ERGO GENEREL INSURANCE	7	7.0	7.0	21.0
	CARE HEALTH INSURANCE(RELIGARE HEALTH INSURANCE)	5	5.0	5.0	26.0
	others	15	15.0	15.0	41.0
	none	59	59.0	59.0	100.0
	Total	100	100.0	100.0	

SOURCE: PRIMARY DATA

FIGURE 4.1.12 SHOWS THE IF PRIVATE HEALTH INSURANCE, WHICH PLAN DOES THE RESPONDENT OWN



INTERPRETATION:

The data indicates that 59% of respondents do not have private health insurance, while 41% have some form of private coverage. Among those insured, the most commonly chosen providers include Star Health Insurance (8%), HDFC ERGO General Insurance (7%), Niva Bupa Health Insurance (6%), and Care Health Insurance (Religare) (5%). Additionally, 15% fall under the "Others" category, suggesting a variety of other private insurers.

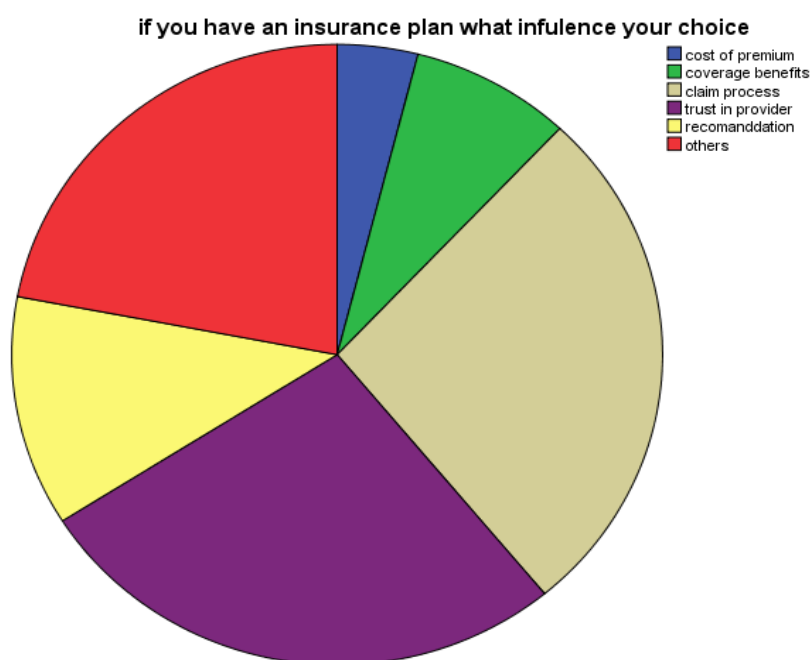
This highlights that while private health insurance is utilized by a significant portion of respondents, a majority remain uninsured, emphasizing the need for increased awareness, accessibility, and affordability of private health insurance plans.

TABLE 4.1.13 SHOWS THE WHAT FACTORS INFLUENCE INSURANCE CHOICE

if you have an insurance plan what influence your choice					
if you have an insurance plan what influence your choice		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	cost of premium	4	4.0	4.0	4.0
	coverage benefits	8	8.0	8.0	12.0
	claim process	27	27.0	27.0	39.0
	trust in provider	27	27.0	27.0	66.0
	recommendation	12	12.0	12.0	78.0
	others	22	22.0	22.0	100.0
	Total	100	100.0	100.0	

SOURCE: PRIMARY DATA

FIGURE 4.1.13 SHOWS THE WHAT FACTORS INFLUENCE INSURANCE CHOICE



INTERPRETATION:

The data reveals that the claim process (27%) and trust in the provider (27%) are the most significant factors influencing respondents' choice of health insurance. This indicates that people prioritize ease of claim settlement and the credibility of the insurance provider when selecting a plan. Other influencing factors include recommendations from others (12%), coverage benefits (8%), and cost of premiums (4%), suggesting that affordability is a lesser concern compared to service quality and reliability. Additionally, 22% fall under the "Others" category, indicating that some respondents consider other personal factors when making their decision.

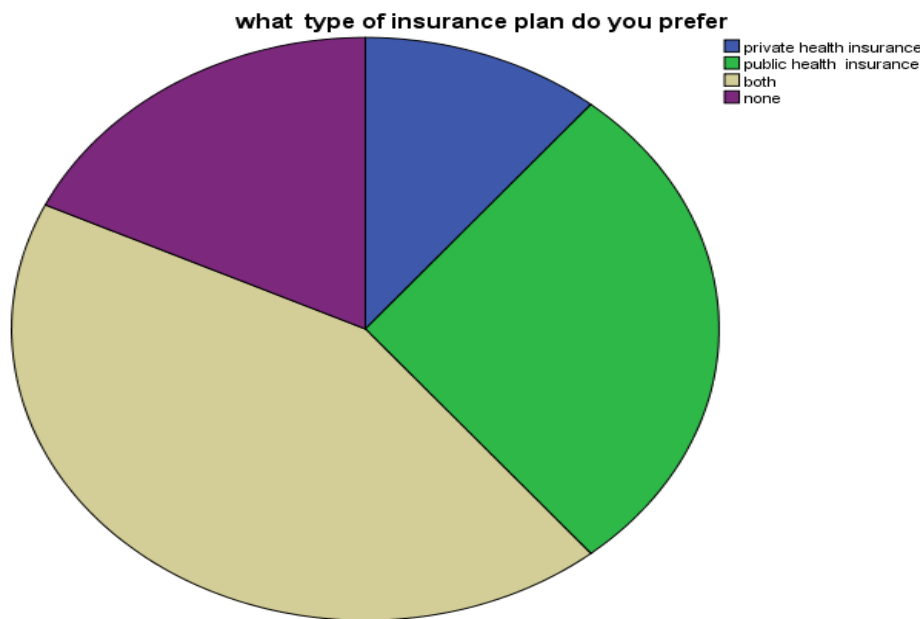
Overall, the findings emphasize that efficient claims processing and trust in the insurance provider are key decision-making factors for individuals choosing a health insurance plan.

TABLE 4.1.14 SHOWS THE WHAT TYPE OF HEALTH INSURANCE PLANS PREFER

what type of insurance plan do you prefer					
what type of insurance plan do you prefer		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	private health insurance	11	11.0	11.0	11.0
	public health insurance	28	28.0	28.0	39.0
	both	43	43.0	43.0	82.0
	none	18	18.0	18.0	100.0
	Total	100	100.0	100.0	

SOURCE: PRIMARY DATA

FIGURE 4.1.14 SHOWS THE WHAT TYPE OF HEALTH INSURANCE PLANS PREFER



INTERPRETATION:

The data indicates that the majority of respondents (43%) prefer both private and public health insurance, suggesting a desire for comprehensive coverage that combines the benefits of both sectors. 28% prefer only public health insurance, while a smaller portion (11%) prefer only private health insurance. Notably, 18% of respondents do not prefer any health insurance plan, which may indicate a lack of awareness, affordability concerns, or distrust in insurance providers. Overall, the findings highlight that a significant number of individuals value a combination of public and private health insurance for better coverage and benefits, while some still remain uninsured or uninterested.

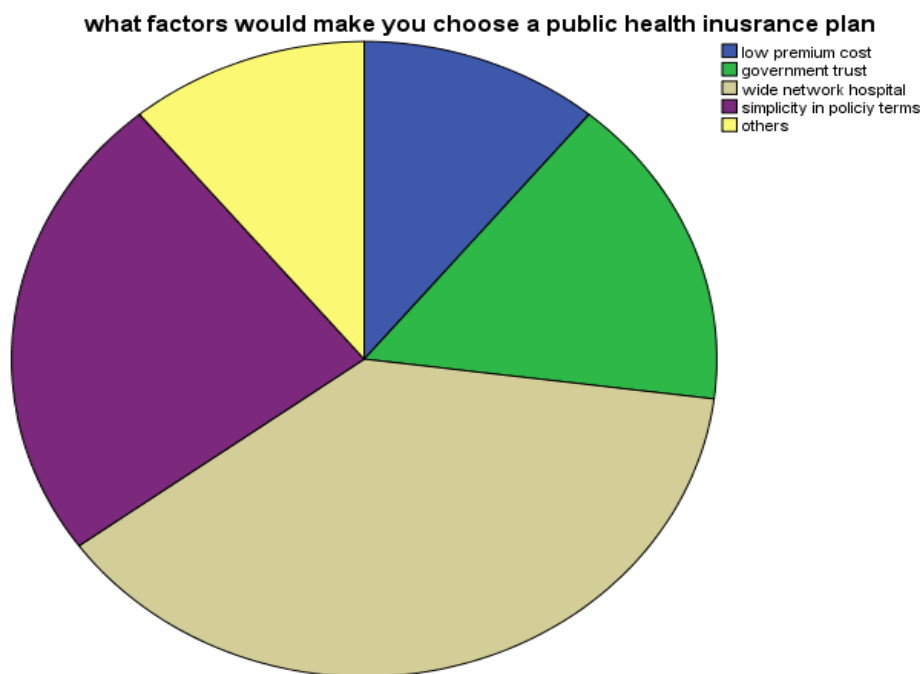
TABLE 4.1.15 SHOWS THE WHAT FACTORS WOULD MAKE CHOOSE A PUBLIC HEALTH INSURANCE PLAN

what factors would make you choose a public health insurance plan					
what factors would make you choose a public health insurance plan		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	low premium cost	11	11.0	11.0	11.0
	government trust	16	16.0	16.0	27.0

	wide network hospital	38	38.0	38.0	65.0
	simplicity in policy terms	24	24.0	24.0	89.0
	others	11	11.0	11.0	100.0
	Total	100	100.0	100.0	

SOURCE: PRIMARY DATA

FIGURE 4.1.15 SHOWS THE WHAT FACTORS WOULD MAKE CHOOSE A PUBLIC HEALTH INSURANCE PLAN



INTERPRETATION:

The data indicates that the most important factor influencing respondents to choose a public health insurance plan is a wide network of hospitals (38%), followed by simplicity in policy terms (24%). This suggests that accessibility to healthcare facilities and clear, straightforward policies are key priorities for individuals considering public health insurance.

Government trust (16%) also plays a role, indicating that some respondents value the reliability of state-backed insurance schemes. Low premium cost (11%) is a lesser concern, implying that affordability alone is not the main driving factor. Additionally, 11% of respondents selected "Others," suggesting additional personal reasons for their preference. Overall, the findings highlight that access to a broad network of hospitals and clear policy

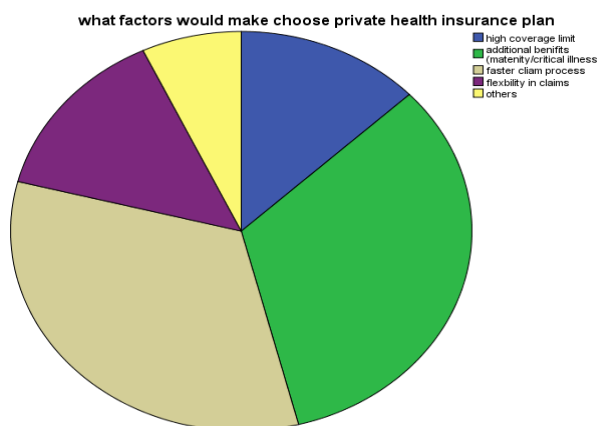
terms are the most influential factors in choosing public health insurance, with trust in the government and affordability being secondary considerations.

TABLE 4.1.16 SHOWS THE WHAT FACTORS WOULD MAKE CHOOSE PRIVATE HEALTH INSURANCE PLAN

what factors would make choose private health insurance plan					
what factors would make choose private health insurance plan		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	high coverage limit	13	13.0	13.0	13.0
	additional benefits(maternity/critical illness)	33	33.0	33.0	46.0
	faster claim process	33	33.0	33.0	79.0
	flexibility in claims	14	14.0	14.0	93.0
	others	7	7.0	7.0	100.0
	Total	100	100.0	100.0	

SOURCE: PRIMARY DATA

FIGURE 4.1.16 SHOWS THE WHAT FACTORS WOULD MAKE CHOOSE PRIVATE HEALTH INSURANCE PLAN



INTERPRETATION:

The data indicates that the most influential factors in choosing a private health insurance plan are additional benefits (such as maternity and critical illness coverage) (33%) and a faster claim process (33%). This suggests that respondents prioritize comprehensive coverage and quick claim settlements when selecting private health insurance.

Other factors include flexibility in claims (14%), which highlights the need for customizable options, and a high coverage limit (13%), indicating that some respondents seek extensive financial protection. Additionally, 7% of respondents chose "Others," suggesting personal preferences or unique considerations.

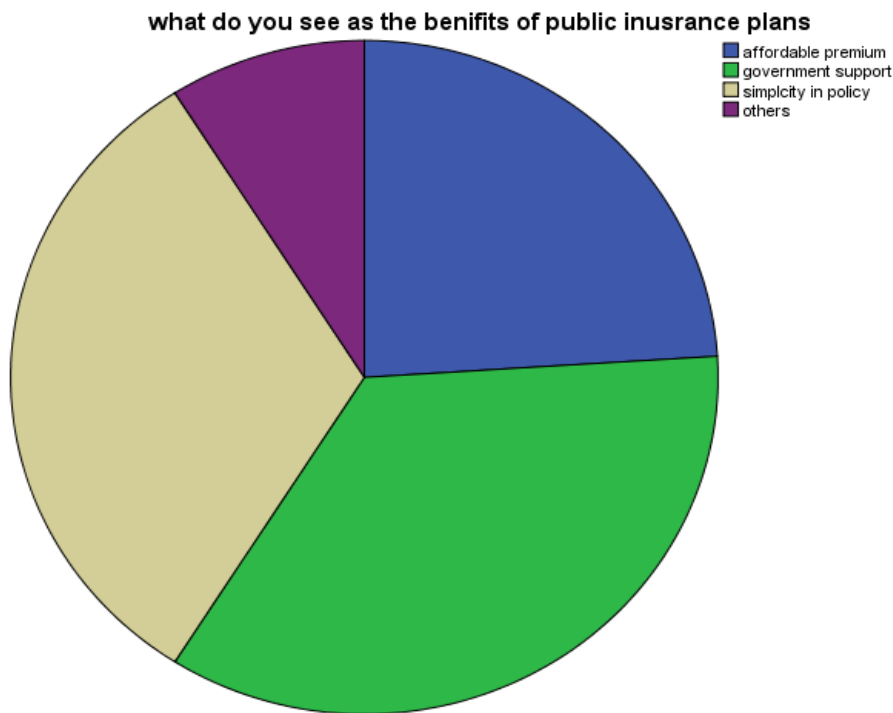
Overall, the findings emphasize that the speed and efficiency of claims, along with added benefits, are the most critical factors driving the preference for private health insurance.

TABLE 4.1.17 SHOWS THE BENEFITS OF PUBLIC HEALTH INSURANCE PLANS

what do you see as the benefits of public insurance plans					
what do you see as the benefits of public insurance plans		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	affordable premium	24	24.0	24.0	24.0
	government support	35	35.0	35.0	59.0
	simplicity in policy	32	32.0	32.0	91.0
	others	9	9.0	9.0	100.0
	Total	100	100.0	100.0	

SOURCE: PRIMARY DATA

FIGURE 4.1.17 SHOWS THE BENEFITS OF PUBLIC HEALTH INURANCE PLANS



INTERPRETATION:

The data reveals that the most recognized benefit of public health insurance plans is government support (35%), indicating that respondents value the reliability and backing of state-sponsored programs. Simplicity in policy terms (32%) is another major factor, suggesting that clear and straightforward policies make public insurance more appealing.

Affordable premiums (24%) also play a significant role, showing that cost-effectiveness is a key advantage of public insurance plans. Additionally, 9% of respondents selected "Others," indicating that some individuals perceive other unique benefits.

Overall, the findings suggest that government trust, policy simplicity, and affordability are the primary benefits driving the preference for public health insurance plans.

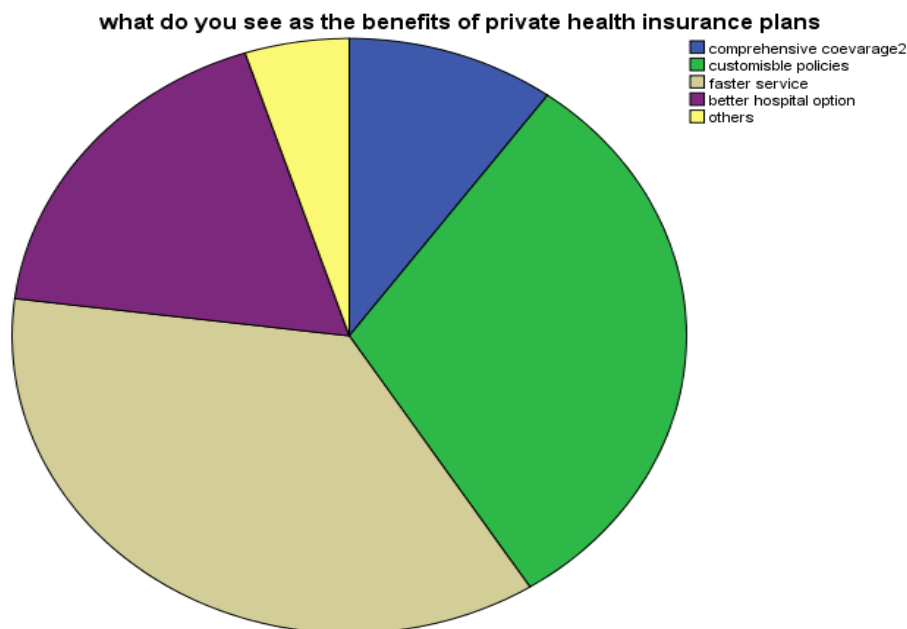
TABLE 4.1.18 SHOWS THE BENEFITS OF PRIVATE HEALTH INSURANCE PLAN

what do you see as the benefits of private health insurance plans				
what do you see as the benefits of private health insurance plans	Frequency	Percent	Valid Percent	Cumulative Percent

Valid	comprehensive coverage	10	10.0	10.0	10.0
	customizable policies	31	31.0	31.0	41.0
	faster service	36	36.0	36.0	77.0
	better hospital option	18	18.0	18.0	95.0
	others	5	5.0	5.0	100.0
	Total	100	100.0	100.0	

SOURCE: PRIMARY DATA

FIGURE 4.1.18 SHOWS THE BENEFITS OF PRIVATE HEALTH INSURANCE PLAN



INTERPRETATION:

The data indicates that the most significant benefit of private health insurance plans is faster service (36%), suggesting that respondents value quick access to medical care and efficient processing of claims. Customizable

policies (31%) are also a major factor, highlighting the importance of flexible coverage options tailored to individual needs.

Additionally, better hospital options (18%) reflect the appeal of having access to a wider range of high-quality healthcare facilities. Comprehensive coverage (10%) is a less commonly cited benefit, but it still indicates that some respondents appreciate the extensive protection offered by private insurance. 5% of respondents selected "Others," indicating additional perceived advantages.

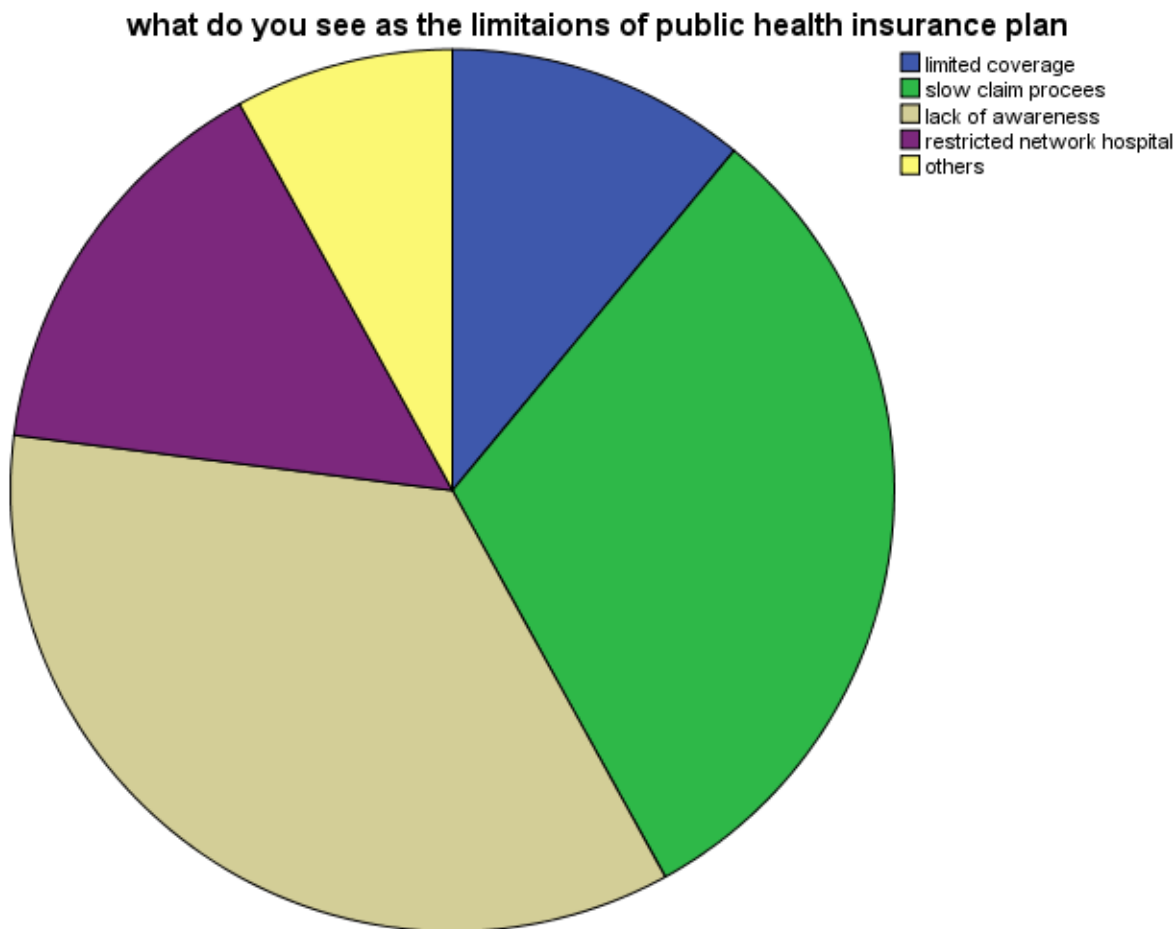
Overall, the findings emphasize that speed, flexibility, and access to quality hospitals are the key benefits driving the preference for private health insurance plans.

TABLE 4.1.19 SHOWS THE LIMITATIONS OF THE PUBLIC HEALTH INSURANCE PLANS

what do you see as the limitations of public health insurance plan					
what do you see as the limitations of public health insurance plan		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	limited coverage	11	11.0	11.0	11.0
	slow claim process	31	31.0	31.0	42.0
	lack of awareness	35	35.0	35.0	77.0
	restricted network hospital	15	15.0	15.0	92.0
	others	8	8.0	8.0	100.0
	Total	100	100.0	100.0	

SOURCE: PRIMARY DATA

FIGURE 4.1.19 SHOWS THE LIMITATIONS OF THE PUBLIC HEALTH INSURANCE PLANS



INTERPRETATION:

The data highlights that the most significant limitation of public health insurance plans is lack of awareness (35%), indicating that many people may not fully understand the benefits, eligibility, or procedures associated with these plans. Slow claim processing (31%) is another major concern, suggesting that delays in reimbursement and approvals negatively impact user experience.

Additionally, restricted network hospitals (15%) and limited coverage (11%) indicate that respondents find public insurance plans less flexible and comprehensive compared to private options. 8% of respondents selected "Others," pointing to additional concerns not listed in the survey.

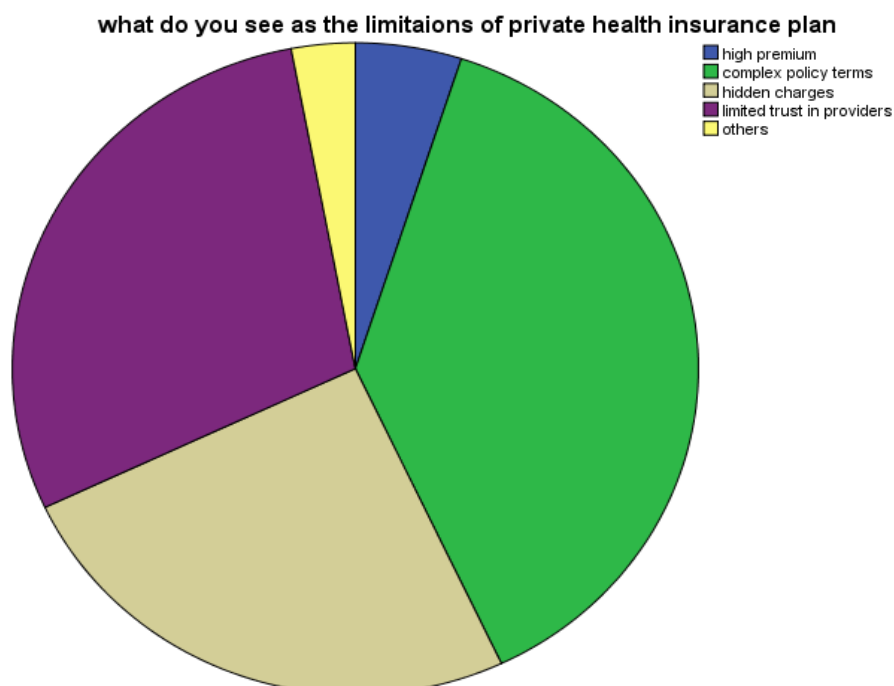
Overall, the findings suggest that a lack of awareness, slow claim processing, and restricted healthcare options are the primary challenges associated with public health insurance plans.

TABLE 4.1.20 SHOWS THE LIMITATION OF PRIVATE HEALTH INSURANCE

what do you see as the limitations of private health insurance plan					
what do you see as the limitations of private health insurance plan		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	high premium	5	5.0	5.0	5.0
	complex policy terms	38	38.0	38.0	43.0
	hidden charges	25	25.0	25.0	68.0
	limited trust in providers	29	29.0	29.0	97.0
	others	3	3.0	3.0	100.0
	Total	100	100.0	100.0	

SOURCE: PRIMARY DATA

FIGURE 4.1.20 SHOWS THE LIMITATION OF PRIVATE HEALTH INSURANCE



INTERPRETATION:

The data suggests that the biggest limitation of private health insurance plans is complex policy terms (38%), indicating that many respondents find private insurance policies difficult to understand. Limited trust in providers (29%) is another major concern, highlighting scepticism about the reliability and fairness of private insurers.

Hidden charges (25%) also pose a significant issue, suggesting that unexpected costs make private insurance less appealing. High premiums (5%) appear to be a relatively minor concern, indicating that cost alone is not the biggest barrier to choosing private insurance. 3% of respondents selected "Others," implying additional concerns not covered in the survey.

Overall, the findings indicate that complicated policies, hidden charges, and trust issues are the main drawbacks of private health insurance plans.

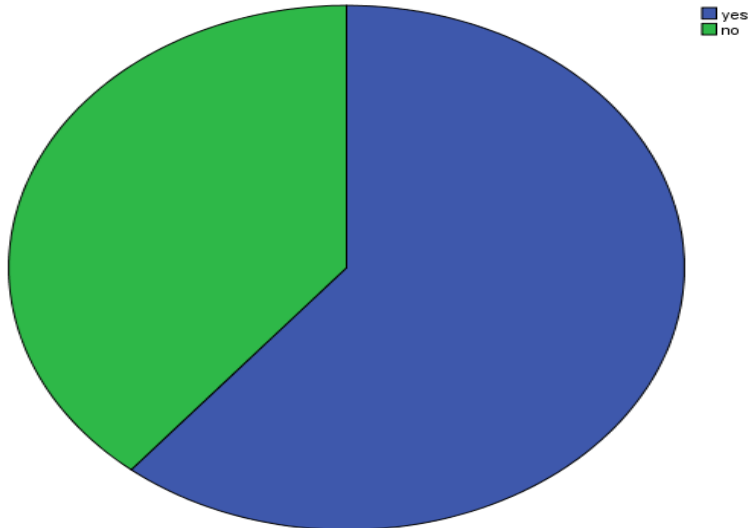
TABLE 4.1.21 SHOWS THE ATTENDENCE AT AWARENESS CAMPAIGNS ON HEALTH INSURANCE IN KOZHIKODE

have you attended any awareness campaign on health insurance campaign in Kozhikode					
have you attended any awareness campaign on health insurance campaign in Kozhikode		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	61	61.0	61.0	61.0
	no	39	39.0	39.0	100.0
	Total	100	100.0	100.0	

SOURCE: PRIMARY DATA

FIGURE 4.1.21 SHOWS THE ATTENDENCE AT AWARENESS CAMPAIGNS ON HEALTH INSURANCE IN KOZHIIKODE

have you attend any awarewness campaign on health insurance campaign in kozhikode



INTERPRETATION:

The data indicates that 61% of respondents have attended an awareness campaign on health insurance in Kozhikode, suggesting that a majority of people have had some exposure to information about health insurance. However, 39% of respondents have not attended any such campaign, highlighting a gap in outreach and participation.

This finding suggests that while awareness initiatives are reaching a significant portion of the population, there is still room for improvement in ensuring broader participation and education on health insurance benefits and options.

TABLE 4.1.22 SHOWS THE IF AWARE, THROUGH WHICH MEDIUM

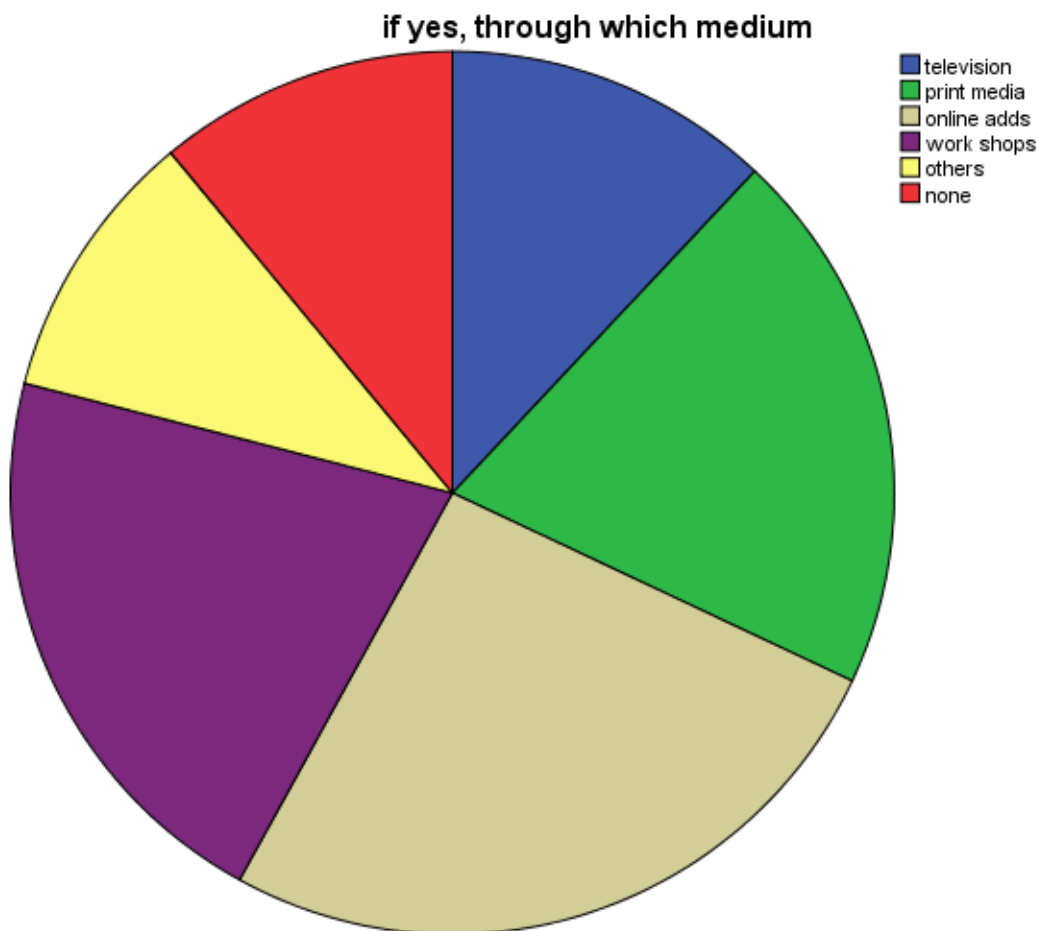
if yes, through which medium

if yes, through which medium		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	television	12	12.0	12.0	12.0
	print media	20	20.0	20.0	32.0
	online adds	26	26.0	26.0	58.0

	work shops	21	21.0	21.0	79.0
	others	10	10.0	10.0	89.0
	none	11	11.0	11.0	100.0
	Total	100	100.0	100.0	

SOURCE: PRIMARY DATA

FIGURE 4.1.22 SHOWS THE IF AWARE, THROUGH WHICH MEDIUM



INTERPRETATION:

The data reveals that online ads (26%) were the most common medium through which respondents attended awareness campaigns on health insurance, reflecting the growing impact of digital platforms in spreading information. Workshops (21%) and print media (20%) were also significant sources, indicating that traditional and interactive methods are still relevant.

Television (12%) played a smaller role, suggesting that TV-based awareness efforts may not be as effective as digital or in-person campaigns. 10% of respondents selected "Others," pointing to alternative awareness sources,

while 11% stated "None," possibly indicating that they were unaware of the specific medium or did not actively engage.

Overall, the findings suggest that digital platforms, print media, and workshops are the most effective channels for health insurance awareness in Kozhikode.

TABLE 4.1.23 SHOWS THE AWARENESS CAMPAIGNS INFLUENCE DECISION REGARDING HEALTH INSURANCE

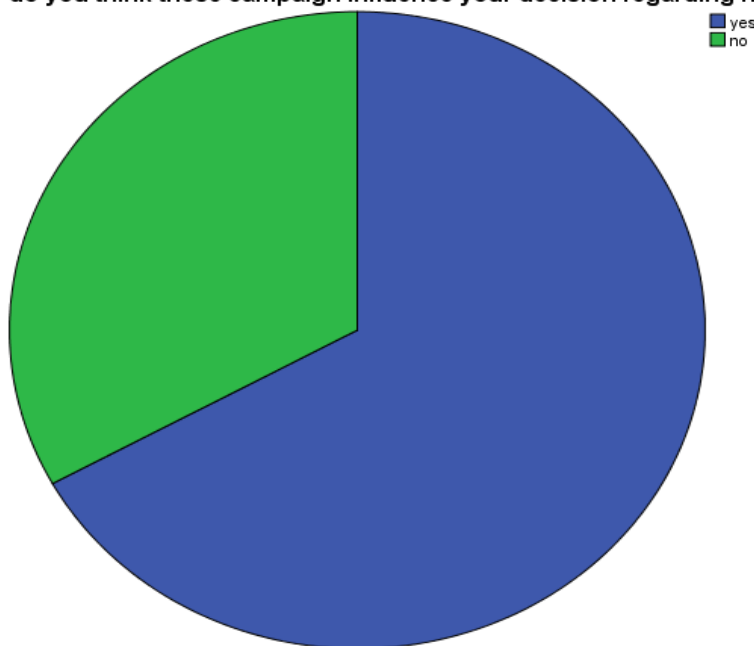
do you think these campaigns influence your decision regarding health insurance

do you think these campaigns influence your decision regarding health insurance		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	67	67.0	67.0	67.0
	no	33	33.0	33.0	100.0
	Total	100	100.0	100.0	

SOURCE: PRIMARY DATA

FIGURE 4.1.23 SHOWS THE AWARENESS CAMPAIGNS INFLUENCE DECISION REGARDING HEALTH INSURANCE

do you think these campaign influence your decision regarding health insurance



INTERPRETATION:

The data reveals that online ads (26%) were the most common medium through which respondents attended awareness campaigns on health insurance, reflecting the growing impact of digital platforms in spreading information. Workshops (21%) and print media (20%) were also significant sources, indicating that traditional and interactive methods are still relevant.

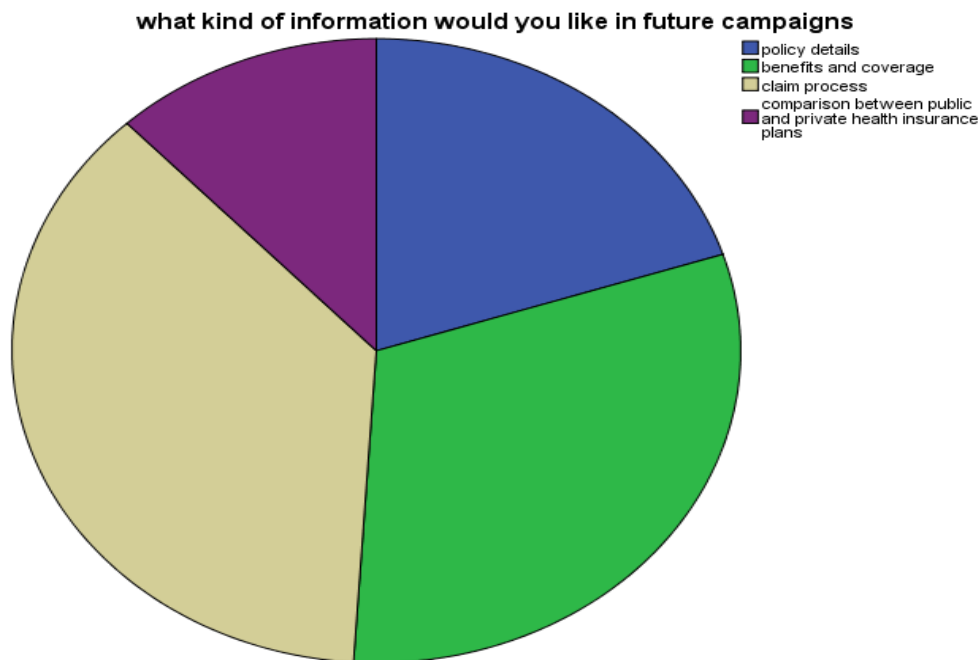
Television (12%) played a smaller role, suggesting that TV-based awareness efforts may not be as effective as digital or in-person campaigns. 10% of respondents selected "Others," pointing to alternative awareness sources, while 11% stated "None," possibly indicating that they were unaware of the specific medium or did not actively engage.

Overall, the findings suggest that digital platforms, print media, and workshops are the most effective channels for health insurance awareness in Kozhikode

TABLE 4.1.24 SHOWS THE WHAT KIND OF INFORMATION WOULD LIKE IN FUTURE CAMPAIGN

what kind of information would you like in future campaigns

what kind of information would you like in future campaigns		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	policy details	20	20.0	20.0	20.0
	benefits and coverage	31	31.0	31.0	51.0
	claim process	37	37.0	37.0	88.0
	comparison between public and private health insurance plans	12	12.0	12.0	100.0
	Total	100	100.0	100.0	

SOURCE: PRIMARY DATA**FIGURE 4.1.24 SHOWS THE WHAT KIND OF INFORMATION WOULD LIKE IN FUTURE CAMPAIGN****INTERPRETATION:**

The data suggests that claim process information (37%) is the most sought-after topic for future health insurance awareness campaigns, indicating that many individuals find the claims procedure complex or unclear.

Benefits and coverage (31%) is another key area of interest, reflecting a need for better understanding of what different health insurance plans offer. Policy details (20%) also hold significance, suggesting that respondents want clearer explanations of terms, conditions, and features.

Meanwhile, only 12% of respondents expressed interest in comparisons between public and private health insurance plans, implying that while some seek a better understanding of the differences, most prioritize practical aspects such as claims and coverage.

These findings suggest that future awareness campaigns should focus on simplifying the claims process, providing clarity on coverage benefits, and explaining policy details to enhance consumer awareness and decision-making.

TABLE 4.1.25 SHOWS MEAN, MEDIAN, MODE, STD. DEVIATION, VARIANCE AND RANGE

	VAL ID	MISSI NG	MEA N	MEDI AN	MO DE	STD DEVIAT ION	VARIA NCE	RANG E
age	100	0	2.470 0	2.0000	1.00	1.32158	1.747	4.00
gender	100	0	1.190 0	1.0000	1.00	.39428	.155	1.00
educational qualification	100	0	2.330 0	3.0000	3.00	.98530	.971	3.00
occupation	100	0	3.610 0	4.0000	5.00	1.65080	2.725	5.00
income level	100	0	1.680 0	2.0000	1.00	.76383	.583	3.00
are you awarehealth insurance plans India	100	0	1.580 0	2.0000	2.00	.53522	.286	2.00
how did you first hear about health insurance plans	100	0	3.140 0	3.0000	2.00	1.24738	1.556	4.00
are you familiar with both private and public health insurance	100	0	1.750 0	2.0000	2.00	.55732	.311	2.00
dou you currently have health insurance plans	100	0	1.580 0	2.0000	2.00	.49604	.246	1.00
if yes which type plans, does you have	100	0	2.320 0	2.5000	3.00	.76383	.583	2.00
if public, which insurance plans does you have	100	0	5.160 0	6.0000	6.00	1.42645	2.035	5.00
if private health insurance, which plan does you have	100	0	4.900 0	6.0000	6.00	1.66060	2.758	5.00
if you have an insurance plan	100	0	4.010 0	4.0000	3.00	1.40342	1.970	5.00

what influence your choice								
what type of insurance plan do you prefer	100	0	2.6800	3.0000	3.00	.89758	.806	3.00
what factors would make you choose a public health insurance plan	100	0	3.0800	3.0000	3.00	1.13422	1.286	4.00
what factors would make choose private health insurance plan	100	0	2.6900	3.0000	2.00	1.08892	1.186	4.00
what do you see as the benefits of public insurance plans	100	0	2.2600	2.0000	2.00	.92791	.861	3.00
what do you see as the benefits of private health insurance plans	100	0	2.7700	3.0000	3.00	1.02351	1.048	4.00
what do you see as the limitations of public health insurance plan	100	0	2.7800	3.0000	3.00	1.08786	1.183	4.00
what do you see as the limitations of private health insurance plan	100	0	2.800	3.0000	2.00	.99143	.983	4.00
have you attend any awareness campaign on health insurance campaign in Kozhikode	100	0	1.3900	1.0000	1.00	.49021	.240	1.00
if yes, through which medium	100	0	3.3000	3.0000	3.00	1.48732	2.212	5.00
do you think these campaigns influence your	100	0	1.3300	1.0000	1.00	.47258	.223	1.00

decision regarding health insurance								
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SOURCE: PRIMARY DATA

INTERPRETATION:

1. Demographics:
 - a. The average age is around 2.47 (on a categorical scale).
 - b. Gender distribution is slightly skewed toward category 1 (likely male).
 - c. Most respondents have a moderate level of education (mean = 2.33).
 - d. The occupation and income levels vary widely, with occupation having a mean of 3.61 and income at 1.68.
2. Awareness & Familiarity:
 - a. The mean score for awareness of health insurance in India is 1.58, indicating moderate awareness.
 - b. Familiarity with both private and public insurance stands at 1.75, suggesting that knowledge about both options is present but not universal.
3. Health Insurance Preferences:
 - a. The majority prefer both private and public insurance (mean = 2.68).
 - b. Key factors influencing private insurance: Additional benefits and faster claims.
 - c. Key factors influencing public insurance: Wide network of hospitals and policy simplicity.
4. Perceived Benefits & Limitations:
 - a. Public insurance is valued for affordability and government support (mean = 2.26).
 - b. Private insurance is favoured for customization and faster service (mean = 2.77).
 - c. Limitations of public insurance: Lack of awareness and slow claim processes.
 - d. Limitations of private insurance: Complex policy terms and hidden charges.
5. Awareness Campaigns:
 - a. 61% of respondents have attended a health insurance awareness campaign.
 - b. The primary mediums are online ads, workshops, and print media (mean = 3.30).
 - c. Campaigns had some influence on decisions regarding health insurance (mean = 1.33).

4.2 HYPOTHESIS OF THE STUDY

4.2.1 CHI – SQUARE ANALYSIS

To check is there any significant association between gender and preference for private vs public health insurance.

H₀ –Indicates there is no significant relationship

H₁ – Indicates there is a significant relationship

what type of insurance plan do you prefer * gender Crosstabulation

			gender		Total
			female	male	
what type of insurance plan do you prefer	private health insurance	Count	8	3	11
		Expected Count	8.9	2.1	11.0
		% within what type of insurance plan do you prefer	72.7%	27.3%	100.0%
		% within gender	9.9%	15.8%	11.0%
	public health insurance	Count	24	4	28
		Expected Count	22.7	5.3	28.0
		% within what type of insurance plan do you prefer	85.7%	14.3%	100.0%
		% within gender	29.6%	21.1%	28.0%
	both	Count	36	7	43
		Expected Count	34.8	8.2	43.0
		% within what type of insurance	83.7%	16.3%	100.0%

Total		plan do you prefer			
		% within gender	44.4%	36.8%	43.0%
	none	Count	13	5	18
		Expected Count	14.6	3.4	18.0
		% within what type of insurance plan do you prefer	72.2%	27.8%	100.0%
		% within gender	16.0%	26.3%	18.0%
		Count	81	19	100
		Expected Count	81.0	19.0	100.0
		% within what type of insurance plan do you prefer	81.0%	19.0%	100.0%
		% within gender	100.0%	100.0%	100.0%

INTERPRETATION:

H0 there is there is no significant relationship between gender and insurance plans preference.

4.2.2 ONE – WAY ANOVA

The ANOVA test was conducted to examine whether there are significant differences in awareness levels of health insurance plans among different groups.

are your aware health insurance plans India						
are your aware health insurance plans India		Sum of Squares	df	Mean Square	F	Sig.
Between Groups	(Combined)	5.163	4	1.291	5.286	.001
	Linear Term	3.993	1	3.993	16.352	.000
	Weighted	4.348	1	4.348	17.807	.000
	Deviation	.815	3	.272	1.112	.348
Within Groups		23.197	95	.244		
Total		28.360	99			

Inference:

- Awareness of health insurance plans varies significantly depending on the source of information or demographic factors.
- Future awareness campaigns should target less informed groups and emphasize effective communication channels.
- Strategies should focus on structured and widespread educational programs to improve awareness across all segments.

4.2.1 MULTIPLE COMPARISONS

Dependent Variable: are you aware health insurance plans India

LSD

(I) how did you first hear about health insurance plans	(J) how did you first hear about health insurance plans	Mean Difference (I-J)	Std. Error	Sig.	95% Confidence Interval	
					Lower Bound	Upper Bound

news paper	friends/family	-.29464	.20619	.156	-.7040	.1147
	agent	-.43609*	.21848	.049	-.8698	-.0023
	social media	-.44048*	.21227	.041	-.8619	-.0191
	others	-.85714*	.22011	.000	-1.2941	-.4202
friends/family	news paper	.29464	.20619	.156	-.1147	.7040
	agent	-.14145	.14312	.325	-.4256	.1427
	social media	-.14583	.13343	.277	-.4107	.1191
	others	-.56250*	.14559	.000	-.8515	-.2735
agent	news paper	.43609*	.21848	.049	.0023	.8698
	friends/family	.14145	.14312	.325	-.1427	.4256
	social media	-.00439	.15174	.977	-.3056	.2969
	others	-.42105*	.16253	.011	-.7437	-.0984
social media	news paper	.44048*	.21227	.041	.0191	.8619
	friends/family	.14583	.13343	.277	-.1191	.4107
	agent	.00439	.15174	.977	-.2969	.3056
	others	-.41667*	.15408	.008	-.7225	-.1108
others	news paper	.85714*	.22011	.000	.4202	1.2941
	friends/family	.56250*	.14559	.000	.2735	.8515
	agent	.42105*	.16253	.011	.0984	.7437

	social media	.41667*	.15408	.008	.1108	.7225
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*. The mean difference is significant at the 0.05 level.

INTERPRETATION:

The LSD test reveals significant differences in health insurance awareness based on the source of information. Individuals who learned about insurance from alternative sources ("others") showed the highest awareness, outperforming newspapers, social media, agents, and friends/family. Social media proved more effective than newspapers ($p = 0.041$), while agents provided better awareness than newspapers ($p = 0.049$). However, friends/family influence did not significantly enhance awareness

CHAPTER V FINDINGS, SUGGESTIONS AND CONCLUSION

5.1 FINDINGS

- 1 .A moderate level of awareness exists among respondents regarding health insurance in India.
- 2 .Many consumers know about both public and private health insurance but lack clarity on policy details.
- 3 . Awareness campaigns have helped increase knowledge, but more targeted outreach is needed.
- 4 .Consumers show interest in both public and private insurance, indicating demand for a hybrid model.
- 5 . Public health insurance is preferred due to affordability (24%) and government backing (35%).
- 6 . Private health insurance is chosen for its faster claim processing (33%) and additional benefits (33%).
- 7 .Public insurance users value a wide hospital network (38%) and simple policy terms (24%).
- 8 .Private insurance users prefer faster service (36%) and customizable policies (31%).
- 9 .Common limitations of public health insurance include slow claims (31%) and limited hospital networks (15%).
- 10 .Key concerns with private health insurance are complex policy terms (38%) and hidden charges (25%).

5.2 SUGGESTIONS:

- 1 .Conduct more targeted awareness programs focusing on policy details, benefits, and claim processes.

- 2 .Use simplified brochures, explainer videos, and community workshops to improve consumer understanding.
- 3 .Speed up public health insurance claim processing to make it more competitive with private plans.
- 4 .Expand the network of hospitals covered under public insurance for better accessibility.
- 5 .Simplify documentation and increase transparency in public insurance to encourage enrolment.
- 6 .Simplify policy terms and reduce hidden costs in private insurance to build consumer trust.
- 7 .Strengthen regulations to protect consumers from misleading policy terms and hidden charges.
- 8 .Encourage the development of a hybrid model that combines affordability with comprehensive coverage.
- 9 .Increase interactive campaigns through social media, workplaces, and community events.
- 10 .Provide comparative insights between public and private insurance to help consumers make informed decisions.

5.3 CONCLUSION

The study highlights the comparative awareness and perception of public and private health insurance plans among consumers in Kozhikode district. The findings indicate that while a significant number of respondents are aware of health insurance, there remains a gap in understanding policy details, claim procedures, and coverage benefits.

Public health insurance is widely chosen for its affordability and government backing, whereas private health insurance is preferred for faster service, better hospital options, and additional coverage flexibility. However, both types of insurance have their limitations. Public health insurance faces challenges such as slow claim processing, limited hospital networks, and low awareness. On the other hand, private health insurance is often perceived as costly, complex, and less transparent.

Despite efforts through awareness campaigns, many respondents expressed the need for more detailed information on claim procedures, policy benefits, and comparisons between public and private plans. The study also found that awareness is primarily influenced by online advertisements, print media, and workshops, suggesting that digital platforms and community-driven initiatives play a crucial role in consumer education.

To enhance consumer confidence and increase the adoption of health insurance plans, it is essential to implement more transparent, accessible, and consumer-friendly policies. A hybrid model, which incorporates the affordability of public insurance with the benefits and efficiency of private insurance, could be an ideal solution.

Overall, the study emphasizes the need for policy simplification, improved claim settlement processes, broader hospital networks, and better awareness initiatives to strengthen health insurance adoption in Kozhikode. By

addressing these challenges, both public and private insurance sectors can ensure greater accessibility, trust, and financial security for consumers.

5.4 SCOPE FOR FUTURE RESEARCH

- Demographic and Regional Analysis – Study variations in consumer awareness based on age, income, education, and location (urban vs. rural).
- Impact of Technology and Digitalization – Assess the role of online platforms, AI, and mobile apps in improving consumer understanding of health insurance.
- Behavioural and Decision-Making Factors – Analyze how trust, transparency, and perceived value influence consumer choices between public and private insurance.
- Policy and Regulatory Influence – Examine the impact of government policies, subsidies, and public awareness campaigns on consumer behaviour.
- Performance and Health Outcomes – Compare service quality, customer satisfaction, and health outcomes between public and private health insurance plans.

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APPENDIX

QUESTIONNAIRE

A Comparative Study of Consumer Awareness Towards Private and Public Health Insurance Plans with Reference to Calicut District

Section A: Demographic Information

1. Age

- a. Below 25
- b. 25-35
- c. 36-45
- d. 46-60
- e. Above 60

2. Gender

- a. Male
- b. Female
- c. Others

3. Educational Qualification

- a. Below High School
- b. Plus, Two
- c. Undergraduate/Diploma/Degree
- d. Postgraduate and Above

4. Occupation

- a. Student
- b. Government Employee
- c. Business Owner
- d. Unemployed
- e. Private Employee
- f. Others

5. Income Level (Monthly)

- a. Below 20,000
- b. 20,000 - 50,000
- c. 50,000 - 100,000
- d. Above 100,000

Section B: Awareness About Health Insurance

6. Are you aware of health insurance plans in India?

- a. Yes

- b. No
 - c. Maybe
- 7. How did you first hear about health insurance plans?**

- a. Newspaper
- b. Friends / Family
- c. Agents
- d. Social Media
- e. Others

8. Are you familiar with both private and public health insurance plans?

- a. Yes
- b. No
- c. Maybe

Section C: Preference for Private vs. Public Health Insurance

9. Do you currently have a health insurance plan?

- a. Yes
- b. No

10. If yes, which type of plan do you have?

- Public
- Private
- None

11. If public, which insurance plan do you have?

- The New India Assurance Company Limited
- National Insurance Company Limited (NICL)
- United India Insurance Company Limited
- Oriental Insurance Company Limited
- Ayushman Bharat - Pradhan Mantri Jan Arogya Yojana
- Others
- None

12. If private health insurance, which plan do you have?

- Star Health Insurance
- Niva Bupa Health Insurance
- HDFC ERGO General Insurance
- Care Health Insurance (Religare Health Insurance)
- Others
- None

13. If you have an insurance plan, what influenced your choice?

- Cost of Premium
- Coverage Benefits
- Claim Process

- Trust in Provider
- Recommendation
- Others

14. What type of plan do you prefer?

- Private Health Insurance
- Public Health Insurance
- Both
- None

15. What factors would make you choose a public health insurance plan?

- Low Premium Cost
- Government Trust
- Wide Network Hospitals
- Simplicity in Policy Terms
- Others

16. What factors would make you choose a private health insurance plan?

- High Coverage Limits
- Additional Benefits (Maternity / Critical Illness)
- Faster Claim Process
- Flexibility in Claims
- Others

Section D: Perceived Benefits and Limitations**17. What do you see as the benefits of public health insurance plans?**

- Affordable Premium
- Government Support
- Simplicity in Policy
- Others

18. What do you see as the benefits of private health insurance plans?

- Comprehensive Coverage
- Customizable Policies
- Faster Service
- Better Hospital Options
- Others

19. What do you see as the limitations of public health insurance plans?

- Limited Coverage
- Slow Claim Process
- Lack of Awareness
- Restricted Network Hospitals
- Others

20. What do you see as the limitations of private health insurance plans?

- High Premium
- Complex Policy Terms
- Hidden Charges
- Limited Trust in Providers
- Others

Section E: Role of Awareness Campaigns**21. Have you attended any health insurance awareness campaigns in Kozhikode?**

- Yes
- No

22. If yes, through which medium?

- Television
- Print Media
- Online Ads
- Workshops
- Others
- None

23. Do you think these campaigns influenced your decision regarding health insurance?

- Yes
- No

24. What kind of information would you like in future campaigns?

- Policy Details
- Benefits and Coverage
- Claim Process
- Comparison Between Public and Private Health Insurance Plans
- Others

End of Questionnaire