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SOCIO – ECONOMIC AND DEMOGRAPHIC DETERMINANTS THAT MOTIVATING TO PURCHASE HEALTH INSURANCE WITH SPECIAL REFERENCE TO IT PROFESSIONALS IN KERALA

Ganga Devi T R¹

¹ Associate Professor, Department of Basic Science and Humanities, Adi Shankara Institute of Engg.& Technology, Kalady, Kerala

Dr.K.Rajan²

²Associate Professor(Rtd.), MD College, Pazhanji

Dr. Lekshmi Bhai P S³

³ Assistant Professor, Department of Management Studies, Adi Shankara Institute of Engg.& Technology, Kalady, Kerala

ABSTRACT

There may be several factors which influence an individual to take or not to take health insurance policies which are quite unknown or unexplored. From the preliminary studies, it was observed that health care costs are on the rise, public awareness on health issues is growing, chronic diseases that necessitate long term treatment are becoming common and many health insurance companies are making a variety of offers; but large section of people are not taking health insurance policy. In a country of 1.2 billion with an insurable population assessed at 250 million, only 15% of the population has any form of health insurance coverage. In this context, it becomes important to understand the factors influencing the purchase of health insurance policies in the state of Kerala. Health insurance business is greatly influenced by the rate of growth of population, social security system, and health care system, changes in customs, social practices and changes in the attitudes. Hence it is relevant to study the customer's attitude towards investment in health insurance. This study is designed to investigate the influence of socio- economic and demographic profile of the respondents that motivating to purchase Health insurance among IT professionals of Ernakulam district of Kerala.

KEYWORDS- Health Insurance, Insurance policy, customer attitude, Investment, socio-economic and demographic factors

1. INTRODUCTION

The purchase of health insurance is one of the most important purchasing decisions for individuals and families and it is a critical component of a long-term financial plan. Although most of young Indians agree that health insurance is the best way to protect against the premature death of a primary wage earner, results of various research study reveal the fact that consumers consider the investing of health insurance to be a complex process and eight in ten

find it difficult to decide how much and what type of health insurance to get. The worry about making an incorrect decision becomes an excuse for not getting health insurance. This issue creates interest in examination of the consumer demand for health insurance. It is necessary for financial planners to understand consumer health insurance purchasing behavior in order to help them to buy suitable health insurance. In this research work researcher makes an attempt to analyze the influence of socio- economic

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and demographic profile of the respondents that motivating to purchase Health insurance among IT professionals of Ernakulam district of Kerala.

2. OBJECTIVES OF THE STUDY

 To understand the socio economic factors influencing the purchase decision of health insurance policies.

3. RESEARCH METHODOLOGY (a) Type of Research

Out of descriptive, experimental and exploratory research types, the researcher has decided to undertake descriptive research to study the present topic. The study aims to find out the customer's attitude towards investment in health insurance with special reference to Ernakulam district. This is a descriptive study that reveals the association between variables and these associations are interpreted statistically.

(b) Data Collection

(i). Secondary Data

For the secondary data the researcher has gained data from the relevant text books, journals, reports, articles, news papers, unpublished dissertations, working papers and the internet.

(ii).Primary Data

The survey strategy allows the researcher to collect which can be analyzed quantitatively using descriptive and inferential statistics. The data collected through survey strategy is easy to explain and understand. Moreover, it can be used to suggest possible reasons for relationships between variables and to produce models of these relationships.

(c) Sampling Method and Sample Size

The present study is focused on IT professionals of Info Park, Cochin. In Ernakulam district IT companies are established in Info parks, SEZ, Kinfra and private IT parks. Since there are many companies functioning in the Info park, the study is mainly focused on the employees of IT companies in Info park. There are a total of 92 IT companies functioning in the Info Park at Kochi. In the selected area there exist all the three types of companies namely Tire 1, Tire 2 and Tire 3. Selection of industrial units is based on two criteria. One is based on the type of organisation and second is based on the level of management. On the basis of type of organisation companies are classified as wholly foreign owned, joint venture, state venture and private owned. On the basis of type of organisation companies are classified under Tire 1, Tire 2 and Tire 3 companies. Companies having revenue more than 1 billion dollars comes under Tire 1 companies with more than 50000 employees. Companies with revenue over 100 million comes under Tire 2 companies list with employment of 4000

to 10000 employees. Companies having revenue less than Tire 2 companies are classified as Tire 3. There are only one Tire 1 and one Tire 2 companies existing here. Hence all of them were included in the sample as the study wants to analyse customer's attitude towards investment in health insurance. There are 90 Tire 3 companies in the Info Park. Among them 10 companies were taken as sample units by using random sampling method. Again the IT professionals in different tire companies further classified as top level, middle level and lower level professionals, according to employees positions.

A multistage random sampling method was adopted in the selection of the sample. In the first stage Info Park , Kakkanad was selected from Ernakulam District. In the next stage companies in the Info Park was classified as Tire 1. Tire 2 and Tire 3 companies on the basis of Global Industry Classification Standard (GICS). According to this base in Info Park there is only one Tire 1 company (Wipro) and one Tire 2 company (TCS) and 90 Tire 3 companies in the Info Park. Hence these two Tire 1 & Tire 2 and 10 Tire 3 companies were selected as samples. As the next stage IT professionals in different tire companies further classified as top level, middle level and lower level professionals, according to employees positions. Chief Officers and Corporate Officers are the top level employees, Management and administrative employees are in middle level employees and others are considered as lower level employees. The total number of employees from these 12 companies are 5430, from this on the basis of 7 % of total employees in top level, middle level and lower level were taken as samples.

4. DATA ANALYSIS AND RESULT DISCUSSION DEMOGRAPHIC AND SOCIO-ECONOMIC PROFILE OF THE POLICY HOLDERS

Demography refers to the vital and measurable statistics of the population. Demographic profile of the sample size selected for a study has an important influence on the variables being analyzed. Demographic and socio-economic factors such as gender, age, marital status, educational qualification, experience and family size are some of the important determinant for deciding of health insurance. The study is conducted with reference to IT professionals of Eranakulam district. The socio-economic profile of the respondents is analyzed, based on the gender. age, marital status, area of residence, educational qualification. designation, experience, income, family size and type of the family of the respondents'.

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a. Gender of the respondents

Table: 1 Gender of the Respondents

Sl. No	I. No Gender No. of Respondents		Percentage
1.	Male	235	62
2.	Female	144	38
	Total	379	100

Source: Primary Data

From Table 1, it is inferred that the out of 379 respondents surveyed, 62 per cent of sample respondents are male and 38 per cent of respondents are female. Health insurance is a subject matter of sale and not purchase. In this study it was found that the respondents' gender forms major base of the policy holders.

b. Age of the respondents

At the time of determination of Health insurance premium, age factor play very crucial role for the health insurance companies as well as customers. If age group is low, then health insurance companies charges low premium and if it is high, then they charge higher premium because mortality rate increases according to age. For this study, the age group were categorized in five groups, below 30 years, 31-40 years, 41-50 years, 51-60 years and above 60 years.

Table: 2 Age of the respondents

Sl. No	Age	No. of Respondents	Percentage
1.	Below 30 years	144	38
2.	31-40 years	141	37
3.	41-50 years	70	19
4.	51-60 years	24	6
5.	Above 60 years	0	0
	Total	371	100

Source: Primary Data

Table: 2 shows age groups of the respondents. It is found that 38 per cent of the respondents are under the age group of below 30 years, 37 per cent of sample respondents are in the age group 31-40 years. While 19 per cent of policy holders are in the age group 41-50 years and 6 per cent in the age group of 51-60 years.

c. Marital status of the respondents

Marital status is one of the major factor which influence in the investment decisions of the customers. It is an accepted truth that marriage brings in lot of responsibilities. Purchasing health insurance policy becomes one of the methods of fulfilling their obligations. For this research, the marital status of the respondents were categorized into four, married, unmarried, widowed and divorced.

Table: 3 Marital status of the respondents

	rubici o maritar status of the respondents				
Sl. No	Marital Status	Marital Status No. of Respondents			
1.	Married	252	66		
2.	Unmarried	107	28		
3.	Widowed	14	4		
4.	Divorced	6	2		
	Total	379	100		

Source: Primary Data

Table 3 depicts that out of 379 respondents surveyed, 66 per cent of respondents are married, 28 per cent of them unmarried, 4 per cent widowed and remaining 2 per cent of sample respondents are divorced.

d. Educational qualifications

An educational qualification of the respondents shows their attitudes and behaviors. Education positively influences the investment decision of the respondents. The respondents were classified into five groups according to the educational qualification.



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Table: 4 Educational qualifications of the respondents

Sl. No	Educational Qualification	No. of Respondents	Percentage
1.	Below Plus Two	36	10
2.	Under Graduate	65	17
3.	Post Graduate Diploma	155	41
4.	Post Graduate	107	28
5.	Doctorate	16	4
	Total	379	100

Source: Primary Data

Table 4 represents the educational qualification of the respondents. It was observed that 41 per cent of the respondents are post graduate diploma holders, 28 per cent of sample respondents have completed post-graduation. 17 per cent of respondents have completed under graduation. Followed by 10 per cent of the respondents below plus two. The remaining 4 per cent of the sample population have doctorates.

e. Designation of the respondents

Designation of respondents in different category is one of the influential factor in the purchase decision. The designations of the respondents were classified as senior level, mid level and entry level.

Table: 5 Designation of the respondents

rable. 3 Designation of the respondents				
Sl. No	Occupation	No. of Respondents	Percentage	
1.	Senior Level	•	13	
2.	Mid level	212	56	
3.	Entry Level	119	31	
	Total	379	100	

Source: Primary Data

Table 5 presents the information on the designation status of the respondents. From the detailed data analysis, it is found that 56 percent of the respondents are mid level professionals and 31 percent of the respondents are entry level professionals. The remaining 13 percent of sample respondents are senior level professionals.

f. Experience of the respondents

Experience of the respondents play a vital role in their purchase behaviour. The experience has a positive influence on the attitude towards investment in health insurance policies. For this study, the experience of the respondents were categorized into four, below 10 years, 10 - 20 years, 21 - 30 years and more than 30 years.

Table: 6 Experience of the Respondents

rubic. o Experience of the Respondents				
Sl. No	Experience	Number of respondents	Percentage	
1.	Below 10 Years	189	50	
2.	10-20 Years	131	35	
3.	21-30 Years	59	15	
4.	More than 30 Years	0	0	
	Total	379	100.0	

Source: Primary Data

Analysis of Table 6 reveals that 50 per cent of the respondents have below 10 years of experience, 35 per cent of them are with 10 to 20 years of experience and the remaining 15 per cent respondents have experience between 21-30 years.

g. Annual income

The annual income of the respondents influences their investment behavior as it determines the level to which the amount is allocate on the savings. For the particular study, the annual income categorized into five groups as up to 3 lakh, 3-5 lakh, 5-7 lakh, 7-9 lakh and above 9 lakh.



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Table: 7 Annual Income of the Respondents

Sl. No	Monthly Income	No. of Respondents	Percentage
1.	Up to 3 Lakh	87	23
2.	3 - 5 Lakh	136	36
3.	5 - 7 Lakh	65	17
4.	7 - 9 Lakh	57	15
5.	Above 9 Lakh	34	9
	Total	379	100

Source: Primary Data

Table 7 explains about the monthly income of the respondents. It is observed that 36 percent of the respondents are earning between 3 – 5 lakh per annum and 23 percent of the respondents' annual income is up to 3 lakh. It is observed that 17 percent of the respondents are having annual income of 5-7 lakh. Followed by, 15 per cent of sample respondents having income range between 7- 9 lakh and the remaining 9 percent of the respondents are having a monthly income of above 9 lakh. Thus, majority i.e., 36 per cent of the respondents' annual income ranges between 3-5 Lakh.

h. Number of earning members in the household

Family income increases with the increase in the number of earning members in the household. Family income influences the buying behaviour of the family. The surplus family income, remaining after the expenditure on the basic needs of the family, is made available for buying shopping goods, savings and investments. The number of earning members were classified as one, two, three, four and above four members.

Table: 8 Number of earning members in the household

Sl. No	Number	No. of Respondents	Percentage
1.	One	170	45
2.	Two	183	48
3.	Three	12	3
4.	Four	7	2
5.	Above Four	7	2
	Total	379	100

Source: Primary Data

Table 8 represents that the out of 379 respondents surveyed, 48 per cent of sample population have two earning members in their family and 45 per cent of respondents have one member. Another 3 per cent of the respondents have three earning members in their family and remaining each 2 per cent of sample respondents have four members and above four.

i. Number of dependents in the family

Basically health insurance is a family protection device. Health insurance is family protection device. Health insurance cover should be appropriate according to family size. If dependents are more, then health insurance cover should be more and for fewer dependents it should be according to need. The numbers of dependents in the family of the respondents were classified as one, two, three, four and above four members.



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Table: 9 Number of dependents in the family

Sl. No	Number	No. of Respondents	Percentage
1.	One	45	12
2.	Two	61	16
3.	Three	152	40
4.	Four	91	24
5.	Above Four	30	8
	Total	379	100

Source: Primary Data

From the Table 9 it is found that the 40 per cent of the respondents have three numbers of dependents in their family, 24 per cent of sample respondents have four dependents, 16 per cent of sample respondents have two and 12 per cent of them have one dependant. The remaining 8 per cent of the sample respondents have above four dependents.

MOTIVATION FOR PURCHASING HEALTH INSURANCE

Table: 10 schemes that motivated to own health insurance policy

Feature of Insurance	Weighted Average	Rank
Security	4.21	3
Risk cover	4.11	4
Awareness	4.02	5
Covering medical costs	4.76	1
Tax benefits	4.60	2

Source: Primary Data

From the detailed data analysis it is found that safeguards savings by covering medical costs has motivated majority of the sample population to own a health insurance policy. It is placed first in a list of five variables constructed for the study. Followed by tax benefits have motivated them to own a health insurance policy. The sample respondents' perception towards Security, Risk cover and Awareness are placed in third, fourth and fifth rank with a mean score of 4.21, 4.11 and 4.02 respectively.

SOCIO-ECONOMIC PROFILE AND MOTIVATION TO PURCHASE HEALTH INSURANCE

In a civilized society a consumer's behaviour is always influenced by social factors, such as influences of the consumer's reference group, family, and social roles and statuses on their buying behaviour. Marketers typically combine several variables to define a demographic profile. Once these profiles are constructed, they can be used to develop a marketing strategy and marketing plan. Understanding households' behavior in this manner can play an important role in predicting demand for health insurance also. However, emerging new complex financial products and changes in the preferences of people for preventing their risks make

this difficult. Creating demographic profile is important as the progress of health insurance penetration and density is far from satisfying and this indicates at some problem in the way it is being sold in a country like India. Overselling health insurance to few wealthy people in the society is not going to be the panacea for all the life insurers. They need to realize that every insurable individual has to be insured and then only the motive of health insurance can be fulfilled in the right sense. Analysis and understanding of the attitude of customers of health insurance according to their demographic characteristics becomes important. This will enable the insurers to better prepare their marketing strategies as per the requirements of the people in the region. To test prove or disprove above stated statement the following hypotheses are framed and tested.

H0: There is no significant difference among the different age groups regarding the features of health insurance plan that motivated the purchase of health insurance policy

H1: There is significant difference among the different age groups regarding the features of health insurance plan that motivated the purchase of health insurance policy



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Table: 11 Result of ANOVA
Features of Health insurance Plans * Age

		Sum of Squares	Df	Mean Square	F	Sig.
Security	Between Groups	23.036	3	7.679	6.097	.000
	Within Groups	472.262	375	1.259		
	Total	495.298	378			
Risk cover	Between Groups	36.651	3	12.217	7.745	.000
	Within Groups	591.507	375	1.577		
	Total	628.158	378			
Awareness	Between Groups	40.810	3	13.603	9.531	.000
	Within Groups	535.221	375	1.427		
	Total	576.032	378			
Covering	Between Groups	2.065	3	.688	.744	.010
medical	Within Groups	347.107	375	.926		
costs	Total	349.172	378			
Tax benefits	Between Groups	16.960	3	5.653	6.539	.000
	Within Groups	324.227	375	.865		
	Total	341.187	378			

Source: Primary data

The output table shows that the significance value of the ANOVA test for the features of health insurance plan motivated the purchase of health insurance policy among different age groups. The p values of Security, Risk cover, Awareness, tax benefits and covering medical costs are lower than the level of .05, we had set. Therefore we reject the null hypothesis at a significance level of 5% and conclude that there is significant difference among the different age groups regarding the features of health insurance plan (Security, Risk cover,

Awareness, Covering medical costs and tax benefits) that motivated to purchase health insurance policy

H0: There is no significant difference among the respondents of different educational qualifications regarding the features of health insurance plan that motivated the purchase of health insurance policy.

H1: There is significant difference among the respondents of different educational qualifications regarding the features of health insurance plan that motivated the purchase of health insurance policy.

Table: 12 Result of ANOVA Features of Health insurance Plans * Education

		Sum of Squares	Df	Mean Square	F	Sig.
Security	Between Groups	37.910	4	9.477	7.750	.000
	Within Groups	457.388	374	1.223		
	Total	495.298	378			
Risk cover	Between Groups	24.121	4	6.030	3.734	.005
	Within Groups	604.037	374	1.615		
	Total	628.158	378			
Awareness	Between Groups	65.531	4	16.383	12.002	.000
	Within Groups	510.501	374	1.365		
	Total	576.032	378			



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Covering	Between Groups	22.502	4	5.626	6.441	.000
medical costs	Within Groups	326.669	374	.873		
	Total	349.172	378			
Tax benefits	Between Groups	37.569	4	9.392	11.570	.000
	Within Groups	303.618	374	.812		
	Total	341.187	378			

Source: Primary Data

The output Table shows that the significance value of the ANOVA test for the features of health insurance plan motivated the purchase of health insurance policy among respondents having different educational qualifications. The p values of Security, Risk cover, Awareness, Covering medical costs, tax benefits are lower than the level of .05, we had set. Therefore we reject the null hypothesis at a significance level of 5% and conclude that there is significant difference among the different educational qualifications regarding the features of health

insurance plan that motivated to purchase health insurance policy.

H0: There is no significant difference between the marital status of the respondents regarding the features of health insurance plan that motivated the purchase of health insurance policy.

H1: There is significant difference between the marital status of the respondents regarding the features of health insurance plan that motivated the purchase of health insurance policy.

Table: 13 Result of ANOVA
Features of Health insurance Plans * Marital Status

	-	Sum of Squares	Df	Mean Square	F	Sig.
Security	Between Groups	4.775	3	1.592	1.217	.303
	Within Groups	490.523	375	1.308		
	Total	495.298	378			
Risk cover	Between Groups	14.156	3	4.719	2.882	.036
	Within Groups	614.002	375	1.637		
	Total	628.158	378			
Awareness	Between Groups	24.292	3	8.097	5.503	.001
	Within Groups	551.740	375	1.471		
	Total	576.032	378			
Covering medica	l Between Groups	6.488	3	2.163	2.367	.071
costs	Within Groups	342.684	375	.914		
	Total	349.172	378			
Tax benefits	Between Groups	1.544	3	.515	.568	.636
	Within Groups	339.643	375	.906		
	Total	341.187	378			

Source: Primary Data

The output Table shows that the significance value of the ANOVA test for the features of health insurance plan motivated the purchase of health insurance policy among the respondents of different marital status categories. The p values of Risk cover, Awareness are lower than the level of .05, we had set. Therefore we reject the null hypothesis at a significance level of 5% and conclude that there is significant difference among the different marital status of the respondents and the features of health

insurance plan (Risk cover, Awareness) that motivated to purchase health insurance policy.

H0: There is no significant difference between different designations of the respondents regarding the features of health insurance plan that motivated the purchase of health insurance policy.

H1: There is significant difference between different designations of the respondents regarding the features of health insurance plan that motivated the purchase of health insurance policy.



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Table: 14 Result of ANOVA Features of Health insurance Plans * Designation

		Sum of Squares	Df	Mean Square	F	Sig.
Security	Between Groups	4.200	2	2.100	1.608	.202
	Within Groups	491.098	376	1.306		
	Total	495.298	378			
Risk cover	Between Groups	17.571	2	8.785	5.410	.005
	Within Groups	610.588	376	1.624		
	Total	628.158	378			
Awareness	Between Groups	69.672	2	34.836	25.868	.000
	Within Groups	506.360	376	1.347		
	Total	576.032	378			
Covering medic	al Between Groups	10.441	2	5.221	5.795	.003
costs	Within Groups	338.730	376	.901		
	Total	349.172	378			
Tax benefits	Between Groups	4.817	2	2.408	2.692	.069
	Within Groups	336.370	376	.895		
	Total	341.187	378			_

Source: Primary Data

The output Table shows that the significance value of the ANOVA test for the features of health insurance plan motivated the purchase of health insurance policy among the respondents of different employee designations. The p values of Risk cover, Awareness, Covering medical costs are lower than the level of .05, we had set. Therefore we reject the null hypothesis at a significance level of 5% and conclude that there is significant difference among the various category of employee designations and the features of health insurance plan (Risk cover,

Awareness, Covering medical costs) that motivated to purchase health insurance policy.

H0: There is no significant difference between experience of the respondents regarding the features of health insurance plan that motivated the purchase of health insurance policy.

H1: There is significant difference between experience of the respondents regarding the features of health insurance plan that motivated the purchase of health insurance policy.

Table: 15 Result of ANOVA
Features of Health insurance Plans * Experience

	-	Sum of Squares	Df	Mean Square	F	Sig.
Security	Between Groups	14.556	2	7.278	5.692	.004
	Within Groups	480.742	376	1.279		
	Total	495.298	378			
Risk cover	Between Groups	66.607	2	33.304	22.299	.000
	Within Groups	561.551	376	1.493		
	Total	628.158	378			
Awareness	Between Groups	7.827	2	3.913	2.590	.076
	Within Groups	568.205	376	1.511		
	Total	576.032	378			



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_	medical Between Groups	23.453	2	11.726	13.537	.000
costs	Within Groups	325.719	376	.866		
	Total	349.172	378			
Tax benefits	Between Groups	6.375	2	3.187	3.579	.029
	Within Groups	334.813	376	.890		
	Total	341.187	378			

Source: Primary Data

The output Table shows that the significance value of the ANOVA test for the features of health insurance plan motivated the purchase of health insurance policy among the respondents of different experience categories. The p values of Security, Risk cover, Covering medical costs, tax benefits are lower than the level of .05, we had set. Therefore we reject the null hypothesis at a significance level of 5% and conclude that there is significant difference among the employee experience and the features of health insurance plan (Security, Risk cover, Covering

medical costs, tax benefits) that motivated to purchase health insurance policy.

H0: There is no significant difference between annual income of the respondents regarding the features of health insurance plan that motivated the purchase of health insurance policy.

H1: There is significant difference between annual income of the respondents regarding the features of health insurance plan that motivated the purchase of health insurance policy.

Table: 16 Result of ANOVA
Features of Health insurance Plans * Annual Income

	·	Sum of Squares	Df	Mean Square	F	Sig.
Security	Between Groups	4.772	4	1.193	.910	.458
	Within Groups	490.526	374	1.312		
	Total	495.298	378			
Risk cover	Between Groups	22.868	4	5.717	3.533	.008
	Within Groups	605.290	374	1.618		
	Total	628.158	378			
Awareness	Between Groups	118.910	4	29.728	24.322	.000
	Within Groups	457.122	374	1.222		
	Total	576.032	378			
Covering	medical Between Groups	4.324	4	1.081	1.172	.323
costs	Within Groups	344.848	374	.922		
	Total	349.172	378			
Tax benefits	Between Groups	15.445	4	3.861	4.433	.002
	Within Groups	325.742	374	.871		
	Total	341.187	378			

Source: Primary data

The output Table shows that the significance value of the ANOVA test for the features of health insurance plan motivated the purchase of health insurance policy among different annual income groups. The p values of Risk cover, Awareness, tax benefits are lower than the level of .05, we had set. Therefore we reject the null hypothesis at a significance level of 5% and conclude that there is significant difference among different annual income

groups and the features of health insurance plan (Risk cover, Awareness, tax benefits) that motivated to purchase health insurance policy.

H0: There is no significant difference between the number of earning members in the family of the respondents regarding the features of health insurance plan that motivated the purchase of health insurance policy.



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H1: There is significant difference between the number of earning members in the family of the respondents regarding the features of health

insurance plan that motivated the purchase of health insurance policy.

Table: 17 Result of ANOVA Features of Health insurance Plans * Number of Earning Members

		Sum of Squares	Df	Mean Square	F	Sig.
Security	Between Groups	23.149	4	5.787	4.584	.001
	Within Groups	472.149	374	1.262		
	Total	495.298	378			
Risk cover	Between Groups	75.231	4	18.808	12.722	.000
	Within Groups	552.927	374	1.478		
	Total	628.158	378			
Awareness	Between Groups	30.142	4	7.535	5.163	.000
	Within Groups	545.890	374	1.460		
	Total	576.032	378			
Covering med	lical Between Groups	25.183	4	6.296	7.268	.000
costs	Within Groups	323.988	374	.866		
	Total	349.172	378			
Tax benefits	Between Groups	11.783	4	2.946	3.345	.010
	Within Groups	329.404	374	.881		
	Total	341.187	378			

Source: Primary Data

The output Table shows that the significance value of the ANOVA test for the features of health insurance plan motivated the purchase of health insurance policy among the respondents having different number of earning members in their family. The p values of all the features of health insurance plan are lower than the level of .05, we had set. Therefore we reject the null hypothesis at a significance level of 5% and conclude that there is significant difference among different number of earning member groups and the various features of

health insurance plan that motivated to purchase health insurance policy.

H0: There is no significant difference between the number of dependents in the family of the respondents regarding the features of health insurance plan that motivated the purchase of health insurance policy.

H1: There is significant difference between the number of dependents in the family of the respondents regarding the features of health insurance plan that motivated the purchase of health insurance policy.

Table: 18 Result of ANOVA Features of Health insurance Plans * Number of Dependents

	-	Sum of Squares	df	Mean Square	F	Sig.
Security	Between Groups	8.501	4	2.125	1.633	.165
	Within Groups	486.797	374	1.302		
	Total	495.298	378			
Risk cover	Between Groups	33.630	4	8.408	5.289	.000
	Within Groups	594.528	374	1.590		
	Total	628.158	378			



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Awareness	Between Groups	126.875	4	31.719	26.411	.000
Awareness	Detween Gloups	120.073	4	31./19	20.411	.000
	Within Groups	449.157	374	1.201		
	Total	576.032	378			
Covering medical costs	Between Groups	13.576	4	3.394	3.782	.005
	Within Groups	335.596	374	.897		
	Total	349.172	378			
Tax benefits	Between Groups	13.919	4	3.480	3.977	.004
	Within Groups	327.269	374	.875		
	Total	341.187	378			

Source: Primary Data

The output Table shows that the significance value of the ANOVA test for the features of health insurance plan motivated the purchase of health insurance policy among the respondents having different number of dependents category. The p values of all the features of health insurance plan except Security are lower than the level of .05, we had set. Therefore we reject the null hypothesis at a significance level of 5% and conclude that there is significant difference among different number of dependents and the various features of health insurance plan (except Security) that motivated to purchase health insurance policy.

5. MARKETING INPLICATIONS

- a) Though consumers rate overall awareness to be good, there is a sizable group that is not familiar with health insurance schemes and its benefits. With wide reach of news papers in the state and print medium communication being rated by consumers as the most important source of information on health insurance. marketers and organizations interested in health insurance promotion should focus on print advertising and periodic publication of relevant articles on health insurance that can enhance awareness on various aspects of health insurance and create favourable response.
- b) The younger age group have been mostly keeping away from health insurance due to perception of less need and the observation is that the existing consumer grouping tilted more towards the elderly, which is also a vulnerable group in terms of health issues and hospitalization. This has resulted in high claim-premium ratio and result in loss in health insurance market. To the consumer, the impact is a higher premium rate. Bringing younger age group to more coverage and spreading the health insurance spectrum are to be focus areas of activity for
- c) While analyzing the reasons for not taking health insurance, it is found that a large number of consumers feel health insurance does not provide much returns for the investments made and on the

other hand, the reason for taking health insurance cited by majority of respondents is to cover major expenses and protection from rising cost of health care. It is found in studies on advertising impact in insurance marketing that negatively framed advertising, highlighting risk factors has high impact, especially among lesser educated groups. Marketing organizations and companies may use the advertisements focusing risk and risk coverage as a major area to create awareness and enhance purchase intention in marketing leading to more sale.

6. CONCLUSION

From the study it has been inferred that purchase preferences among health insurance policy holders have important socio-economic implications. Covering medical cost is considered as the most important factor that leads to the purchase of health insurance policies. Security and Tax benefits are the other important factors that motivated to purchase health insurance policy. Health insurance is an important form of insurance and essential for every individual. Health insurance penetration in India is very low as compare to developed nation where almost all the lives are covered and stage of saturation has been reached. Customers are the real pillar of the success of health insurance business and thus it is important to know the various factors that motivated to purchase health insurance. There are many factors which affect customer's purchase decision of health insurance and from the study it has been concluded that socio- economic demographic factors of the people play a major and pivotal role in deciding the purchase of health insurance policies.

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