

PRINT- COVERAGE

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1	4 th , Tue	Live Mint	Comparison and ranking of Care Health Insurance's product with competitors.	15

Top 15 health plans for you



How do you buy a health insurance plan? With numerous products, plan options, and all the complicated fine print, comparing insurance can be quite a daunting task.

To simplify and empower quicker decision-making, *Mint* in association with *Beshak.org*, an unbiased insurance discovery platform presents Mint Beshak Insurance Ratings. This rating zooms into the most essential aspects of insurance plans blurring out the frills to present a refreshed version 2.0 of our erstwhile mediclaim rating. The full ratings can be seen at: <https://bit.ly/3zmodF>.

In today's edition, we list the top 15 health insurance plans for people below 65.

These plans have been first stacked for two critical outcomes with respect to health insurance (a) lowest

out-of-pocket expenses from hospitalization (product rating) and (b) smoothest claim settlement (claims rating) to generate the overall rating.

This overall rating can then be compared with the premium affordability rating to evaluate suitable plans, based on the individual preference of the reader.

For the purpose of ratings, we have considered indemnity-based comprehensive family floater hospitalization plans available online. The premium affordability rating is indicative. It is relatively measured on premiums of a ₹10 lakh cover for a family of two adults and one child, living in Mumbai.

—Navneet Dubey



The below table is a summary/extract of the detailed rating on [livemint.com](https://www.livemint.com). Scan the QR code to check out the detailed Mint Beshak Insurance Rating including the scoring methodology.

	Product rating*	Claims track record rating*	Overall rating	Premium affordability rating
Acko - Platinum Health Plan	5.0	4.3	★★★★★ 4.9	₹₹₹₹₹ 3.0
HDFC Ergo - Optima Secure	4.9	4.7	★★★★★ 4.8	₹₹₹₹₹ 4.0
ICICI Lombard - Health AdvantEdge	4.8	5.0	★★★★★ 4.8	₹₹₹₹₹ 3.0
HDFC Ergo - Optima Restore	4.5	4.7	★★★★★ 4.6	₹₹₹₹₹ 4.0
Reliance General - Health Gain (Power)	4.5	4.3	★★★★★ 4.5	₹₹₹₹₹ 3.5
Manipal Cigna - ProHealth Prime (Advantage)	4.6	4.2	★★★★★ 4.5	₹₹₹₹₹ 4.0
Niva Bupa - Health Companion	4.6	4.0	★★★★★ 4.5	₹₹₹₹₹ 3.5
Aditya Birla - Activ Health Platinum (Premiere)	4.5	4.1	★★★★★ 4.4	₹₹₹₹₹ 5.0
Care Insurance - Care Supreme	4.5	4.0	★★★★★ 4.4	₹₹₹₹₹ 3.0
Star Health - Assure	4.6	3.6	★★★★★ 4.4	₹₹₹₹₹ 3.5
Niva Bupa - Health ReAssure	4.5	4.0	★★★★★ 4.4	₹₹₹₹₹ 3.5
Aditya Birla - Activ Fit (Preferred)	4.4	4.1	★★★★★ 4.4	₹₹₹₹₹ 3.5
Royal Sundaram - Lifeline (Supreme)	4.2	4.5	★★★★★ 4.3	₹₹₹₹₹ 3.0
Aditya Birla Health - Active Assure (Diamond)	4.3	4.1	★★★★★ 4.2	₹₹₹₹₹ 3.5
Reliance General - Health Infinity	4.2	4.3	★★★★★ 4.2	₹₹₹₹₹ 3.5

Note: The higher the rating, the better the plan is. However, in the case of the premium affordability ratings, the higher the ratings, the more expensive the plan will be.

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2	8 th , Sat	Free Press Journal	Eminent speakers from Care Health Insurance discuss various perspectives on Covid at the Religare Enterprises conclave	08

Eminent speakers discuss various perspectives on Covid at Religare Enterprises' conclave



Religare Enterprises Ltd. in collaboration with Care Health Insurance Ltd and Sir Ganga Ram Hospital organised a conclave on the eve of World Health Day. Themed Indian Perspective on Covid and Post Covid, the conclave witnessed participation from eminent speakers including corporate leaders, policy makers and healthcare professionals. At the conclave, esteemed speakers highlighted how different sections of the society and the government have contributed towards a collective fight against the

pandemic. On the occasion, Dr Rashmi Saluja, Executive Chairperson, Religare Enterprises Ltd said, "It is important for the country and the rest of the world to plan for a resilient and sustainable future."

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3	10 th , Mon	ET Wealth	Read what Mr Ajay Shah, Head – Distribution, Care Health Insurance, has to say on pros and cons of migrating your Health Insurance.	25

PHOTOS: GETTY IMAGES

HOW TO SWITCH YOUR HEALTH PLAN

Find out how to maximise the benefits and get the most value for your money while shifting to a new health policy.



By Riju Mehta

When Delhi-based Manish Awasthi was hospitalised last year, he chose a single AC room and the three-day bill came to ₹88,000. Confident that his ₹4 lakh insurance would take care of this, he waited for insurer clearance, only to find that he needed to shell out ₹33,000 as his plan had a 1% room rent sub-limit. It was then that he started looking for a new health plan.

Many others like Awasthi, who bought their plans over a decade ago, are stuck with limits that result in high out-of-pocket expenses. Others are upset over claim settlement issues, high premiums, or poor servicing and low responsiveness of the insurer. After Covid, the insurance needs of people have also been impacted. Not only has the surging medical inflation led to a rise in healthcare costs, but technological innovations mean that many surgeries no longer require in-patient hospitalisation, only day-care treatments. Besides, rising

lifestyle diseases have increased OPD requirements, even as people are spending more money on staying healthy.

To cater to these changing needs, insurers are constantly improvising, bringing in new features and making the health policies more comprehensive. To avail of new features or servicing, should you change your insurer or find a new plan with your existing insurer?

Porting or migrating? If you are satisfied with the service and overall experience provided by your existing insurer, but are not happy with the product, you can migrate instead of porting. While porting involves picking up a plan with a new insurer, migrating means shifting to a new plan with your existing insurer.

"As per health insurance regulations, if an individual has renewed his policy without a break for at least four years, migration is allowed without any underwriting to the extent of the existing sum insured and benefits in the old plan," says Parthnil Ghosh, President, Retail Business, HDFC ERGO General Insurance.

If, however, you do not find a suitable or comprehensive plan as per your needs with your existing insurer, or find a much better product with higher value for money with other insurers, you can think of porting.

Pros & cons of switching: While you are intent on getting rid of problems with your existing policy, it is easy to gloss over the drawbacks that may result from porting (see *Pros & cons of switching plans*). "On the positive side, you could find a policy with comprehensive coverage and affordable premium. It can also give you access to new healthcare providers that were not available in your previous network," says Ajay Shah, Head, Distribution, Care Health Insurance.

"You can find a better deal with good servicing, lower premium, extensive coverage, no time-bound exclusions, lower deductibles and co-pays," says Aftab Chaz, Associate Director & Business Head, Elephant.in, Alliance Insurance Brokers.

A big advantage is that you can carry over the waiting period credit for pre-existing conditions from your old insurer.

However, the new features may result in a higher premium, and you could lose your loyalty rewards and discounts. "The biggest drawback is that one would be subject to underwriting, fresh waiting periods, permanent exclusions or loadings, largely applicable for non-standard risks or those with existing illnesses," says Ghosh.

Whether you port or migrate, you will have to go through the entire process of buying a policy because underwriting is considered afresh each time you shift. "Some people are confused and consider it a continuity that doesn't require disclosing all their medical details. This can land them in problem or result in rejection," says Dr Bhabatosh Mishra, Director of Underwriting, Products & Claims, Niva Bupa Health Insurance.

WHEN SHOULD YOU CHANGE?

Customers should consider changing their plans if they are dissatisfied with the coverage or service provided by their existing insurer, or find an innovative product that is affordable, yet comprehensive. "Product

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4	23 rd , Sun	The Hindu Business Line	Article on Health Insurance policies for 30 year olds and 60 year olds with a special mention of Care Health Insurance.	12

Sai Prabhakar Yadavalli
bl. research bureau

Health insurance is gaining in prominence. This applies to the 30-year-olds or the 60-year-olds, with the latter now accessing a vibrant insurance marketplace. For the first-time buyer in either ages, the product fit and features should be different, just as aspirations and needs vary. We list some factors in buying decisions that are relevant to both categories in finding the right product.

FOCUS AREAS AT 30

A 30-year-old is now health-conscious, has an increased family responsibility and has a higher likelihood of overseas visits. Going by such characterisation, the ideal health policy should also be just as agile and rewarding.

The frequency of hospitalisation if any, should be lower in early thirties — which should allow for maximising the coverage amount through NCBs (No claim bonus). Policies offer not only doubling of coverage amount but also accomplish the same in the shortest time. A ₹5-10 lakh policy of a 30-year-old can increase to ₹10-20 lakh in 3-5 years. While 60-year-olds should also go for the same, a higher frequency of hospitalisation can dilute the benefits. Niva Bupa Reassure and Manipal Cigna Prime offer 2x-5x times base policy in 3-5 years.

The health and fitness conscious 30-year-old can also gain from discounts on premiums for an active lifestyle. Wellness-centred products let the policyholder gain points which are then redeemed for benefits including, discounts on next premium payment ranging up to 10-25 per cent. ICICI BeFit app, Aditya Birla's Activ suite of products can capture lifestyle data through wearable tech, which is then used to deliver benefits.



Health policy at 30 vs 60

TAKING COVER. First-time buyers should prioritise different features depending on age

From 30 years onwards, the individual is likely to take on the responsibility of parents or in-laws on one hand, and spouse and children on the other. A policy that can be expandable to a family floater, has options for maternity covers, large enough restoration cover, should be priority for a 30-year-old. HDFC Optima Secure plans can accommodate the full family (parents, spouse, and child) and can cost between ₹60,000 and ₹1 lakh per annum.

The jet-hopping global citizen of today should also prioritise a health policy that offers a worldwide coverage — including not only emergency hospitalisation but also in-patient care. Tata AIG Medicare plans offers the widest scope for worldwide covers.

WHAT MATTERS AT 60

A first-time health insurance buyer at the age of 60 can face a lower availability of products but compared to five years back the current market is an improvement. However, pricing is thrice compared to a 30-year-old's premium at average of ₹25,000 per year.

The buyer should focus on coverage and hassle-free settlement at this age. Waiting period for pre-existing diseases starts at 4 years across policies but Star Senior Citizen Red Carpet reduces PED waiting to one year, Niva Bupa or Care Health Insurance and a few others offer two years waiting and so on. Another useful tool to have is to restore the base cover amount used up in

DIFFERENT STROKES

- Young vs old buying decisions should be different
- NCB, wellness, family and global coverage at a younger age
- Lower PED waiting, OPD cover, and critical illness covers for seniors

the year, and for related illness.

A ₹1-crore health policy or alternatively a top-up to a base policy may not be outlandish anymore, considering medical inflation. But despite a strong base cover, a critical illness rider may be useful to cover large outlier risks. For cancer, cardiac or transplant diagnosis, a critical illness rider can provide a large payout (then the policy terminates).

The senior policy buyer must also confirm the coverage for therapies which are placed under sub-limits. Cataract, knee replacement, dental, are a few of the procedures that are capped on coverage or have an extended waiting period, which is better avoided.

OPD or teleconsultation is becoming a widely used feature and policies that focus on such coverage can be a useful. The cost of consultation and the frequency of consultation will increase with each passing year and the convenience and coverage can become a coveted feature of policies.

A wide array of features in today's health policies should allow one to build a product fit to his/her needs. While a 30-year-old can focus on NCB, wellness, global and family floater, seniors can choose policies prioritising coverage, PED waiting and lower hassle achieved through years spent with the insurer.

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5	28 th , Fri	Business Standard	Article on home care in Health Insurance policies with a special mention of Care Health Insurance.	11

Covid cases up, check if policy covers at-home care

Sum insured must be adequate, include consumables like PPE kits

SARBAJEET K SEN

The resurgence of Covid-19 has reignited fears of infection and the financial burden of medical treatment. The importance of assessing one's health insurance coverage and financial preparedness can't be overstated.

Inadequate coverage

The previous waves offer a few lessons. "Medical costs tend to shoot up in a crisis.

During Covid, hospitalisation was two-three times more expensive than normal. The frequency of hospitalisation also rose," says Kapil Mehta, co-founder, SecureNow. Many either did not have health insurance or had policies with insufficient sum insured, which was inadequate to meet the expenses of multiple hospitalisations.

Many also had disease-specific plans. "It is better to have a comprehensive health insurance plan rather than a disease-specific one. We don't know the nature of the next pandemic. Broader covers offer more security," says Mehta.

Expenses not covered

Even those who had comprehensive policies discovered that they did not cover many Covid-related expenses.

They had to pay for them out of their own pockets. "Many policies offered limited coverage for at-home (domiciliary) treatment. Many also offered inadequate coverage for personal protective equipment (PPE)," says Rahul M Mishra, co-founder & director, Policy Ensure.

He adds that many policies had co-payment (part of claim amount policyholder has to pay) requirements and high

deductibles (amount policyholder has to pay out of pocket, or using another policy, before the insurance firm starts paying), which again translated into out-of-pocket expenses (OOPE).

Fill in gaps

Check if your health policy will pay for these expenses. If not, port to

a better policy or fill in the gaps with riders.

"Your policy should provide comprehensive coverage, which includes hospitalisation, day care procedures, domiciliary hospitalisation, and treatment of common critical illnesses," says Naval Goel, chief executive officer (CEO) and founder, PolicyX.

He adds that the policy should offer the option to increase the sum insured and pay a no-claim bonus.

Says Siddharth Singhal, business head-health insurance,

Policybazaar.com: "By paying 5-7 per cent extra premium, you can buy a rider that will cover the cost of consumables."

If the sum assured is inadequate, enhance it or buy a super top-up policy. "Take a basic cover of ₹5-10 lakh and then buy a super top-up cover. Opt for a deductible equivalent to the basic policy. This will make the super top-up cover affordable," says Mishra. Also consider purchasing a daily cash benefit rider or a standalone daily cash benefit policy. This pays a fixed sum for each day of hospitalisation, which can be used to meet OOPE.

Remember a key point about making a claim for domiciliary treatment. "A registered MBBS doctor must recommend that hospitalisation is a must but can't be done due to non-availability of beds at a nearby hospital or because the patient is not in a condition to be moved," says Singhal.

Health care fund

You must also have a health care fund. "In most claims, about 85 per cent of costs are paid and 15 per cent are outside the ambit of coverage. A health care fund can take care of this. Keep this fund independent of other investments. Put this money in a bank deposit or a short-term debt fund," says Mehta. He adds that one needs to top this up over time as medical inflation is above 10 per cent.



SAFETY NET Plans that pay for at-home treatment and consumables (sum insured of ₹15 lakh)

Insurer	Plan	Premium (₹)*	Consumables (PPE kits, etc)
Aditya Birla Health Insurance	Activ Fit Plus	21,307	With non-medical expense waiver rider
Care Health Insurance	Care Supreme	22,605	With Care Shield rider
Manipal Gigna Health Insurance	Prime Advantage	30,301	With non-medical expense rider
Star Health Insurance	Star Assure	30,822	Covered
Niva Bupa Health Insurance	Reassure 2.0 Platinum	34,413	With Safeguard+ rider

*Premiums are for a family floater covering two adults and one child aged 35, 33, and 5 years respectively, based in Delhi Source: Policybazaar.com

ONLINE COVERAGE

S.No.	April, 2023	Publication	Link
1	7 th , Fri	ET BFSI	Here's what Mr Ajay Shah, Head – Distribution, Care Health Insurance, has to say on growing need of health insurance

Increased adoption of comprehensive cover

With changing times, Indians are prioritizing their health by choosing comprehensive Health Insurance plans to secure themselves against the financial burden that may arise due to possible health exigencies in future, said Ajay Shah, Head – Distribution, Care Health Insurance

"Nowadays, illnesses are not limited to the elderly only. Due to increase in pollution levels, unhealthy eating habits, sedentary lifestyles, and increased stress, people of all ages are experiencing various health problems. Treatments for such diseases are usually long tailed & expensive. Therefore, we are experiencing an increased adoption of Health Insurance," he highlighted.

S.No.	April, 2023	Publication	Link
2	10 th , Mon	ET Wealth	Read what Mr Ajay Shah, Head – Distribution, Care Health Insurance, has to say on pros and cons of migrating your Health Insurance.

Pros & cons of switching: While you are intent on getting rid of problems with your existing policy, it is easy to gloss over the drawbacks that may result from porting (see Pros & cons of switching plans). “On the positive side, you could find a policy with comprehensive coverage and affordable premium. It can also give you access to new healthcare providers that were not available in your previous network,” says Ajay Shah, Head, Distribution, Care Health Insurance.

S.No.	April, 2023	Publication	Link
3	22 nd , Sat	News 18	Here's what Mr Ajay Shah, Head – Distribution, Care Health Insurance, has to say on the importance of travel insurance in today's day and age.

Why Do Travellers Need Insurance?

Ajay Shah, head- distribution, Care Health Insurance, said, “A quality, hassle-free experience is every traveller’s dream. Post-covid, millions of travellers are making trips across the globe for business, family vacations or other leisure activities. While everyone pre plans to make their trip fruitful and memorable, what is equally important is to ensure one’s safety and security while travelling. Especially when you are on foreign soil.”

As per the latest studies, India’s travel insurance market was estimated to be \$ 892.29 million in 2022 and is growing at a CAGR of 17.65%. Earlier, travel insurance was bought only for visa fulfilment purposes, but post-covid this has become an important inclusion in travel preparations irrespective of the country you are travelling to.

Shah added that travel insurance offers cashless hospitalisation for emergency treatment across the globe, as well as reimbursement of medical expenses as per terms mentioned in your policy.

S.No.	April, 2023	Publication	Link
4	24 th , Mon	Mint Genie	Mr Ajay Shah, Head – Distribution, Care Health Insurance throws some light on how Bima Sugam is here to simplify the process of purchasing insurance for consumers

Ajay Shah, Head – Distribution, **Care Health Insurance** said, “Bima Sugam has been launched with an objective to simplify the process of purchasing life, health and general insurance for consumers. The portal will work as an insurance market place where insurers, distribution networks & policy holders can meet. This will enable the digital platform to ensure a seamless & efficient experience for comparing and providing information of various products to the customer on a single platform.”

“It will also simplify the process of purchase by enabling customers to complete the entire transaction online for their choice of product. The platform will work on the principles of simplicity, security, convenience, transparency and trigger innovation in the industry,” he added.

