

PRINT - COVERAGE

S.No.	July, 2023	Publication	Headline	Page No.
1.	2 nd , Sun	Mint	Comparison and ranking of Care Health Insurance's product with competitors.	11

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/3ztmodf>. 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.



The below table is a summary/extract of the detailed rating on 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	4.1	★★★★★ 4.8	₹₹₹₹₹ 3.0
ICICI Lombard - Health AdvantEdge	4.8	5.0	★★★★★ 4.8	₹₹₹₹₹ 3.0
HDFC Ergo - Optima Secure	4.8	4.7	★★★★★ 4.8	₹₹₹₹₹ 4.0
Niva Bupa - ReAssure 2.0 (Titanium+)	4.9	3.9	★★★★★ 4.7	₹₹₹₹₹ 4.5
HDFC Ergo - Optima Restore	4.5	4.7	★★★★★ 4.6	₹₹₹₹₹ 4.0
Reliance General - Health Gain (Power)	4.6	4.3	★★★★★ 4.6	₹₹₹₹₹ 3.5
Manipal Cigna - ProHealth Prime (Advantage)	4.6	4.2	★★★★★ 4.5	₹₹₹₹₹ 4.5
Niva Bupa - Health Companion	4.6	3.9	★★★★★ 4.5	₹₹₹₹₹ 3.5
Aditya Birla - Activ Health Platinum (Premiere)	4.5	4.3	★★★★★ 4.5	₹₹₹₹₹ 5.0
Care Insurance - Care Supreme	4.5	4.0	★★★★★ 4.4	₹₹₹₹₹ 3.0
Royal Sundaram - Multiplier	4.4	4.5	★★★★★ 4.4	₹₹₹₹₹ 2.5
Aditya Birla - Activ Fit (Preferred)	4.4	4.3	★★★★★ 4.4	₹₹₹₹₹ 3.5
Star Health - Assure	4.6	3.6	★★★★★ 4.4	₹₹₹₹₹ 3.5
Royal Sundaram - Lifeline (Supreme)	4.3	4.5	★★★★★ 4.3	₹₹₹₹₹ 2.5
Reliance General - Health Infinity	4.3	4.3	★★★★★ 4.3	₹₹₹₹₹ 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.

S.No.	July, 2023	Publication	Headline	Page No.
2.	2 nd , Sun	The Hindu Business Line	Comparison and ranking of Care Health Insurance's premium with competitors.	09

Health insurance premium tracker

For a 30-year-old male, non-smoker, sum insured of ₹10 lakh living in a metro city

Insurer	Plan name	Key features	Premium (₹)
Niva Bupa	Health ReAssure 2.0 Platinum	Unlimited restoration of cover No room rent limit Carry forward unutilized SI up to 5x	11,109
Care	Care Supreme	7x SI in 5 years Unlimited restoration of cover	10,592
Star Health	Star Comprehensive	Comprehensive plan Mid term inclusion of wife and child Unlimited restoration of cover	11,476
Aditya Birla	Activ Health Platinum Enhanced	No room rent limit Up to 100% discount on renewal Day 1 coverage	9,750
Bajaj Allianz General	Individual Health Guard - Gold	No room rent limit No claim bonus	12,212
Manipal Cigna	Prime - Advantage	90 days PED waiting period OPD cover up to 50,000 Unique switch off benefit	12,513
TATA AIG	Medicare Premier	Global coverage along with OPD	13,663
Reliance General	Health Infinity (more time)	1 additional month coverage Additional 3 lakh sum insured Global coverage	9,816

Premium is calculated on the basis of age of insured member, location, Plan type and Sum insured
Health insurance covers medical expenses that arise due to an illness and benefits will be payable
subject to the terms and conditions and exclusions of the policy

Source: www.policybazaar.com

S.No.	July, 2023	Publication	Headline	Page No.
3.	9 th , Sun	The Hindu Business Line	Article on maternity coverage with a special mention of Care Health Insurance.	09



Wild West of maternity coverage

TAKING COVER. Insurance covers for maternity don't appear standardised but protection can be secured

Sai Prabhakar Yadavalli
bl_research_bureau

Maternity insurance takes care of expenses related to childbirth for women, extending to pre and post-natal care, newborn child health expenses and even vaccinations in the first year. The insurance industry may not have standardised this section as there is a wide variance in the offerings. Compared to unknown risks that are covered in insurance, the planned nature of hospitalisation in maternity may be the reason for lack of maternity insurance. We look at the few policies that offer maternity coverage and the associated conditions that one must be aware of before signing on.

BASE COVERS
Group insurance provided by employers is at the top of the pecking order as regards maternity coverage as these policies have day one coverage. The sub-limit may range from ₹25,000 to ₹50,000 for a normal delivery and 10-20 per cent more for a caesarean or c-section. Compared to other insurance that may have a waiting period ranging from two to four years, day one coverage and sufficient cover

make group covers highly appropriate. Depending on the plan negotiated, other expenses associated with maternity (newborn baby cover and natal care) may also be covered.

Care Health Insurance offers a discount on maternity charges up to ₹25,000 for procedures undertaken in its network of hospitals. This is provided from day one, so effectively makes for a decent cover even if actual maternity cover is not provided. Tata Medicare provides maternity cover in its base policy, which implies that cashless transactions and other features of the base policy can be applied to maternity cover as well. These would include ambulance, pre- and post- hospitalisation expenses and others. But waiting period for maternity cover is four years.

Tata Medicare provides a sub-limit of ₹60,000 in case the newborn is a girl child and up to ₹50,000 in case of a boy child. Bajaj Allianz also has a longer waiting period of six years for maternity. But on the other hand, it provides a cover for the newborn for a period of 90 days. The sub-limit, though, at ₹15,000 and ₹25,000 for caesarean delivery may fall short in any facility, Tier-I to Tier-III.

These features for Care

TAKE NOTE

- Day one coverage in group policies
- Newborn baby cover and natal care may also be covered
- Targeted covers offer more comprehensive benefits

Health, Tata Medicare, and Bajaj Allianz are for a sum insured of ₹5 lakh and mostly remain the same for higher sum insured limits as well. Digit insurance has an increasing sub-limit with a waiting period of 9 months. The maternity sub-limit starts from ₹15,000 in the first year (after nine months) and increases by ₹10,000 every year till an upper limit of ₹1,00,000. This is called the maternity wallet and the same cover is made available to the newborn as well for a period of 90 days. Other insurers including Niva Bupa, SBI General Insurance, and Aditya Birla may not provide maternity covers in their base policies but may offer it as an optional add-on.

Aditya Birla offers a maternity add-on that covers maternity expenses, newborn baby cover and vaccination packages.

TARGETED COVERS
Star Health's Woman Care insurance offers a comprehensive package in this regard and is targeted at women policyholders. The waiting period is two years for maternity coverage and the sub-limit is ₹25,000 for the procedure, which is offered twice in the policyholders' lifetime. The newborn is covered by the existing policy of the woman policyholder who was covered in the maternity plan. The newborn is offered a sum insured of 25 per cent of the policyholder's sum insured for the first year. From the second year, the child would have to be included in the plan for a fee for coverage.

Policyholders who are already pregnant can also purchase the policy, which allows for newborn coverage even if maternity will not be covered (since two-year waiting period is needed).

Additionally, the policy covers assisted reproduction treatment in the base policy itself. These treatments provide a sub-limit of ₹50,000 for a ₹5-lakh policy and gradually increase up to ₹3,00,000 for a ₹1 crore policy per year. Even outside of maternity covers, such treatments, which cover IVF and other procedures, are rarely included in other insurance policies.

S.No.	July, 2023	Publication	Headline	Page No.
4.	14 th , Fri	Business Standard	Article on super top up plans with a special mention of Care Health Insurance.	02

Pair base policy with super top-up to limit premium cost

KARTHIK JEROME

Over the past year, health insurance premiums have surged between 10 and 25 per cent, according to industry experts. Customers must make use of all available strategies to cope with the escalating health insurance premiums.

Rising claims

A key contributor to the surge in health insurance premiums is the increase in the incurred claim ratio (ICR).

"Individual health insurance policies' ICR has increased as follows: 73 per cent in 2019-20, 85 per cent in 2020-21, and 96 per cent in 2021-22," says Nayan Goswami, head-sales & service, SANA Insurance Brokers. Insurers have borne the brunt of heavy claims over the past three to four years due to the pandemic. "Premiums need to rise to offset the losses insurers incurred then," says Kapil Mehta, co-founder, Secure Now.

Another factor is rising healthcare costs which puts more pressure on insurers. "Medical inflation ranges between 14 and 16 per cent in India," says Goswami. Premiums have also gone up due to insurers' willingness to cover patients suffering from chronic ailments. "Earlier, insurers were reluctant to provide policies to individuals with conditions like hypertension, cholesterol, and thyroid, among others. Now that they issue policies to them, they also need to hike the premiums," says Mehta. Customers should bear in mind a few mitigating factors. One, insurers are allowed to hike their premiums once in two or three years, so the increases tend to be lumpy. Many insurers have added new features to their policies. The increase is not uniform across the board: premiums typically rise more for older age segments that witness higher claims.

Avail of NCB and discounts

Avoid making a claim for a smaller amount so that you are able to get the no claim bonus (NCB). "The accumulation of NCB will enable you to manage



AT A BARGAIN

Insurer	Plan name	Super top-up premiums (₹)*
Niva Bupa Health Insurance	Health Recharge	1,048
Liberty General Insurance	Supra STU**	1,317
Star Health Insurance	Surplus Gold	2,024
Reliance General Insurance	Health STU**	2,398
Care Health Insurance	Enhance	3,087
Royal Sundaram	Lifeline Supreme	3,237

*Premiums are for a sum insured of ₹10 lakh, deductible of ₹5 lakh for a 35-year-old living in a metro city
**STU stands for super top-up
Source: PolicyBazaar

your health insurance cost more effectively," says Rahul M Mishra, co-founder and director, Policy Ensure. Rising sum insured due to NCB accumulation does away with the need to purchase more sum insured to counter medical inflation.

Earlier, insurers would withdraw the NCB when a claim was made.

"Nowadays, in many plans the NCB is retained even when the customer makes a claim. Some insurers provide a loyalty bonus despite a claim," says Goswami. Several insurers offer fitness-based discounts. "If a customer on average walks a specified number of steps daily, he gets a discount on premium," says Mishra.

Consider porting

An insurer who has received a larger number of claims may be compelled to undertake steeper premium hikes.

"Compare premiums and port to an insurer whose premiums are more attractive," says Mehta. Make sure the

insurer has hiked its premiums recently so that you are shielded from further escalation for a couple of years.

Go for restoration benefit

Many insurers now offer restoration

benefit. Suppose that you buy a sum insured of ₹10 lakh and use up ₹5 lakh. The insurer will restore the sum insured, allowing you to enjoy a sum insured of ₹10 lakh in that very year. "Ensure the restoration benefit is available for the same disease and not only for a new disease," says Goswami.

Opt for co-pay

If you are very keen to reduce the premium, consider co-pay. "Whatever the hospital bill amounts to, the customer is responsible for paying a certain percentage of it," says Mehta. Ideally, one should limit co-pay to 10-15 per cent.

Buy a super top-up

In the post-Covid era, customers desire a higher cover. "Rather than enhancing the sum insured on the base cover, which is expensive, one can buy a super top up (STU) policy, which tends to be less expensive," says Mishra. The deductible (the amount the customer must pay before the STU kicks in) can be equal to the base policy's sum assured. Goswami recommends a base policy of ₹10 lakh (for those residing in metros) combined with an STU of ₹50-90 lakh.

"The STU would be 60-70 per cent cheaper than the base plan, if not more," Goswami adds.



ONLINE - COVERAGE

S.No.	July, 2023	Publication	Link
1	13 th , Thu	Mint Genie	Read what Mr Ajay Shah, Head – Distribution, Care Health Insurance has to say on things to consider before buying Health Insurance.

Financial constraints

One primary reason people skip buying health insurance is financial constraints. For individuals living paycheck to paycheck or facing tight budgets, health [insurance premiums](#) may be seen as an additional financial burden.

Ajay Shah, Head – Distribution, **Care Health Insurance** said, “Many times, people choose to skip buying a health insurance policy due to the cost (premium) associated with health insurance, which can be challenging for individuals or families on a tight budget. The premiums, and deductibles & co-pays applicable on claims, cumulatively make it difficult to afford health coverage.”

S.No.	July, 2023	Publication	Link
2	25 th , Tue	Live Mint	Read what Mr Ajay Shah, Head – Distribution, Care Health Insurance has to say on things to consider before buying Health Insurance.

According to Ajay Shah, Head - Distribution, Care Health Insurance while purchasing health insurance for an individual with pre-existing medical conditions, there are a few crucial factors that one needs to keep in mind.

Advertisement

- 1) First among them is to ensure that the **Health Insurance policy** covers the pre-existing ailment and its contingent/related conditions.
- 2) Secondly, a thorough understanding of the terms and conditions of the waiting period for the ailment is necessary.
- 3) The policyholder should read policy documents carefully and understand if any limitations or exclusions such as co-payment, sub-limit, or deductible apply to the pre-existing disease.