

Issues involved in creating HI products for elderly

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21st Indian Fellowship Seminar

Indian Actuarial Profession
Serving the Cause of Public Interest



- Current scenario
- Needs of senior citizens
- Various issues
- Risk mitigation
- Next steps



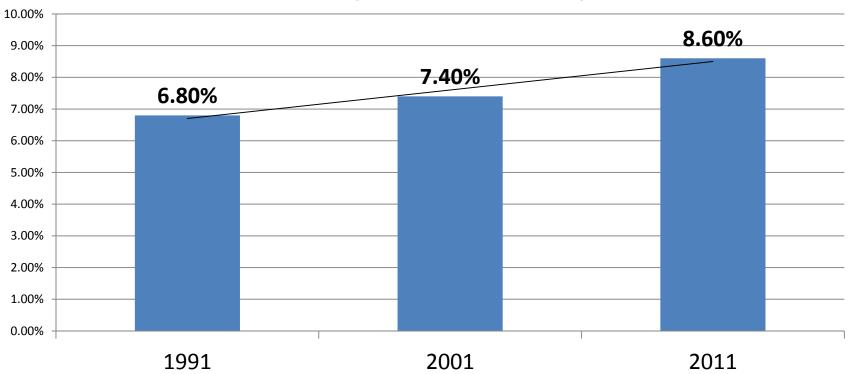
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Current scenario

Percentage of population with age 60+

(source census data 2011)



Current scenario

- Increase in ageing population in India (more than double the population growth rate i.e. 35%)
- Break down of traditional "joint" family system
- Low public expenditure on health (1.5% of GDP)
- Lack of medical infrastructure to handle elderly
- No provision for organized long term care for chronically sick
- Private healthcare services are very expensive
- Low penetration of health insurance in India (10% of population)
- Urban area centric medical facilities



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Needs of senior citizens

- Life time health insurance cover
- Inclusion of chronically diseases
- Inclusion of pre-existing diseases
- Easy access to medical facilities
- Simple cover with minimum exclusions
- Management of uncertain future cash flows at affordable premium



Responsibility of an Actuary

APS1- Section 2.3

The essence of a profession lies in upholding its standard, technical & ethical in public interest.

Actuaries' code

- Client interest
 - needs of customers
- Compliance
 - Compliance with all provisions of act, rules, regulations of IRDA (APS-1)
 - includes disclosure of data, pricing assumptions, public disclosures
 - Peer review (APS-4)



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Issues- product design

- Lack of credible data
- Variable morbidity experience across the region
- Entry age
- Life long renewability
- Designing benefits-
 - Provision of in-patient / outpatient cover
 - Covering pre-existing diseases
 - Providing add-ons / riders
 - Non allopathic cover- AYUSH
- Exclusions



Issues- marketing of a product

- Lack of customer inclination and purchasing power
- Unavailability of suitable products
- Health insurance products are generally complex
- Face to face marketing requirements
- High underwriting requirements
- Special training requirements for sales
- High marketing cost
- Mis-selling

Market conduct- Periodical training to sales as required by Regulator



Issues- affordable premium

- High morbidity rates (supporting data?)
- High loss ratio (support data?)
- Higher medical inflation (supporting data?)
- High acquisition, administration & claims cost
- High level of underwriting requirements
- Special regulatory provision for separate window
- Margins in premium

Statutory role of Actuary- APS (3)- Premiums or contributions are adequate to meet future commitments.

Issues- underwriting

- Issues for risk based underwriting
 - Non disclosure
 - Unavailability of old records
 - Specific preventive & health promotion behavior may go unwarranted
- A large volume of medical tests / reports
- Expertise of staff
- Uniform underwriting practice across all products
- Large loading in premium rates uncompetitive pricing
- Decline the proposal may lead to dispute



Issues- Claims settlement

- High frequency and long duration of claims
- Authorization and approval procedures
- Delay in claims submission
- Timely submission of claims requirements
- Interpretation of claims conditions for settlements
- Legal and reputational risks

Actuaries need to take care of IRDA (PPI Regulations),2002 and subsequent amendments

Issues- profitability

- Low business volume
- Fluctuation in claims costs
- High set up cost and maintenance cost overrun
- Higher supervisory capital requirements
- Uncertain profit emergence
- All above factors lead to uncertain profitability



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Risk mitigation

Product design stage	Internal management tools	Other management tools
 Co-payment Deductible Reviewability clause Sub-limits Waiting periods Exclusions 	 Business penetration U/W practices Claims management Expense management Corporate governance 	 Standard treaties with TPAs / Medical service providers Reinsurance arrangements

Next steps

- Early entry into health insurance system
- Loyalty discount for continuous renewal
- Incentives to adopt healthier life styles
- Regular preventive health check ups
- Good market conduct at insurer level
- Regulation of health care provider
- Develop medical infrastructure for elderly



Thank you

Any questions?