

A STUDY OF AWARENESS OF INDIVIDUAL FAMILY HEALTH INSURANCE SCHEME IN THE CONTEXT OF COVID-19 & IT'S CHALLENGES

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ABSTRACT:

The present research studies the awareness and difficulties in the context of individual family health insurance scheme in the context of Covid-19. During the Covid-19 national catastrophe, the number of patients increased dramatically and there was no viable medical treatment available. Moreover, due to the large number of infected people, the facilities required for their recruitment were not available. They also had to bear a heavy financial burden when admitting covid patients in private hospitals. In such a situation, various types of personal family health insurance schemes have been and are in operation against the backdrop of Covid-19 and in the past. There is a lot of awareness in the society about the background of Kovid-19. Moreover, what problems do they have to face in the context of this family health insurance scheme which does not make their attitude in this regard positive. This has been studied in this research.

1.1 INTRODUCTION:

Covid-19 has spread rapidly throughout the country and the world, and it would not be appropriate to ignore its future prospects. This makes it clear that maybe, the sickness and mortality of any person in the country should not be affected by the factors which are not under his control. The effects of Covid-19 can be prevented by creating physical distance, it is impossible to ensure that they are infected with Covid-19 even after maintaining physical distance. To prevent the effects of Covid-19, keeping physical away is a short-term policy effort taken in a hurry. Its purpose is to create a protective shield around it and break or prevent contact with the infected person to prevent the virus from spreading. This strategy can be part of the policy system in which the entire effort is remedied. And the availability of insurance fund is very important for the various components of the society, which will be positive. Presently, awareness is increasing in the context of social health insurance. The resultant

awareness of this is increasing to the citizens, even today, its publicity effect and prevalence in the rural areas should not increase in quantity. In this situation, when the epidemic of Covid-19 came, various insurance companies have prepared Bima schemes to avoid this epidemic. In the actual situation, the epidemic of Covid-19 created awareness in the context of Health Insurance Scheme for the people of rural areas and the research work has been done in this context.

According to the health policy which is a curative approach, it is ensured that if a person has any health related problem, it will be treated under the insurance scheme provided by him. This treatment is based on the purchasing power of the person concerned, which insurance he has registered. In this way, healthcare services almost turn into a personal product. In this, only those who have insured get treatment on the basis of the prescribed rules on getting infected and Jean Lago did not get the insurance, they do not get the benefit from the private insurance company. It is all based on the assumption that the person's morbidity and mortality does not depend on others. The treatment of a person's illness in an insurance plan depends on his ability to pay. This type of thinking helps in increasing the health services which are provided by the private sector. From the last decade of the last century, it is seen that India's healthcare services are turning into a personal product. Due to which the cost of treating and caring for the health of the people has increased a lot. Often this cost is more than the ability of ordinary Indian citizens to pay. For this, provision of health insurance has been made to people through government schemes. Of which, not all private health centers are intrinsic. Due to which there are difficulties in providing health facilities under these government insurance schemes.

The health services which are being spread in the country, these health services cannot be successful. When there is a crisis in which personal morbidity and mortality profile is not independent from other people. There is an infectious epidemic in this, which is clarifying the need for a health policy related to prevention, because it is not possible to treat it. At present, lockdown is being done to prevent this infection, which will create protective shell around the person, which will make them less likely to have this problem. However, due to this, there is a possibility that the employment of millions of people is also being affected.

The Union Finance Minister has announced an economic package which has taken measures for short-term economic support which will help those who are being affected the most during this lockdown. The G20 leadership has also expressed its commitment to trillions of dollars to overcome this economic crisis. But it is not yet decided that the amount of commitment that has been expressed will be effective in dealing with the long-term effects of this epidemic, which includes both economic and social effects.

It should be hoped that this epidemic will end within a limited time. For those affected by Covid-19, antidotes will be made against this virus. GAVEE. Such organizations will pursue the processes by which such a vaccine can be made which can be given to economically and socially weaker sections at low prices or with subsidy for some time. In particular, this can be done until the countries where this is being done do not reach the point that they can bear the cost of the vaccine produced from their resources. There is every possibility that we will soon forget its impact and will again return to the old settlement with the same remedial approach.

1.2 OBJECTIVE OF THE STUDY:

1. To conduct awareness study regarding health insurance scheme in the context of Covid-19.
2. To study the awareness regarding personal family health insurance scheme before the outbreak of Covid-19.
3. To study the reasons for termination of personal family health insurance prior to the outbreak of Covid-19.
4. To study the awareness regarding whether you should have personal family health insurance in the context of Covid-19.
5. To study the problems of individual family health insurance in the context of COVID-19 and suggest solutions.

1.3 HYPOTHESIS OF THE STUDY:

1. There is no significant difference between the awareness of family health insurance scheme in the context of Covid-19.
2. There is no significant difference between the awareness regarding the personal family health insurance scheme before the outbreak of Covid-19.
3. There is no significant difference between the reasons for termination of personal family health insurance prior to the outbreak of Covid-19.
4. There is no significant difference between awareness regarding whether you should have personal family health insurance in the context of Covid-19.
5. There is no significant difference between the problems of individual family health insurance in the context of Covid-19 and suggest solutions.

1.4 SCOPE AND LIMITATION OF THE STUDY:

The present research work has been done in Amravati division. This research led to the widespread promotion of the Safe Health Insurance Scheme, taking into account the fears created in the context of Covid-19 and the lack of health resources and the financial cost of treatment. In addition, government schemes are available for certain sections of the society to protect you and your family in the event of an outbreak of Covid-19, even if it occurs in your family, the research is limited to those who consider health insurance to reduce the financial burden. Individuals in other services who have access to health care were not included in the research.

1.5 RESEARCH METHODOLOGY:

The survey methodology was used in the present research in which facts were collected from individuals in rural areas. For this, an online Google form was created and the mobile numbers of the villagers were contacted by the college teachers. Necessary facts were collected by sending a link to Google Form on this mobile. Percentage, Kai Square Testing, Graphs techniques were used to analyze and interpret this fact.

1.6 ANALYSIS OF DATA:

In the present research, the facts have been analyzed and interpreted as follows.

Table 1.1

A table showing the details of what you knew about personal family health insurance plans before the outbreak of Covid-19.

Source	Yes	No	Unrest
Fo	50	90	10
Percentage	33.33%	60.00%	6.67%
Fe	50	50	50
Fo-fe	0	40	-40
$(F0-Fe)^2$	0	1600	1600
$(fo-fe)^2/fe$	0	32	32
Chi square	64.00**		

Table 1.2

A table showing the details of whether you had personal family health insurance before the outbreak of Covid-19

Source	Yes	No	Short period
Fo	23	90	37
Percentage	15.33%	60.00%	24.67%
Fe	50	50	50
Fo-fe	-27	40	-13
(F0-Fe) ²	729	1600	169
(fo-fe) ² /fe	14.58	32	3.38
Chi square	49.96**		

Table 1.3

A table showing the reasons for the breakdown of personal family health insurance you have had before the onset of Covid-19.

Source	Financial Reasons	No attention left	No previous benefits	No Need	Since Government plans
Fo	21	03	05	06	02
Percentage	56.76%	8.11%	13.51%	16.22%	5.41%
Fe	7.4	7.4	7.4	7.4	7.4
Fo-fe	13.6	-4.4	-2.4	-1.4	-5.4
(F0-Fe) ²	184.96	19.36	5.76	1.96	29.16
(fo-fe) ² /fe	24.99	2.62	0.78	0.26	3.94
Chi square	32.59**				

Table 1.4

A table showing the details of whether you think you should have personal family health insurance in the context of Covid-19.

Source	Strongly Agree	Agree	Neutral	Disagree	S. Disagree
Fo	63	52	09	12	14
Percentage	42.00%	34.67%	6.00%	8.00%	9.33%
Fe	30	30	30	30	30
Fo-fe	33	22	-21	-18	-16
(F0-Fe) ²	1089	484	441	324	256
(fo-fe) ² /fe	36.30	16.13	14.70	10.80	8.53
Chi square	86.47				

Table 1.5

A table showing the details of the difficulties in obtaining personal family health insurance in the context of Covid-19.

	Description	Yes	No	Total	Chi-Square
1	Weak economic situation	119	31	150	51.63**
		79.33%	20.67%	100%	
2	Unemployment status	98	52	150	14.11**
		65.33%	34.67%	100%	
3	Couldn't get in contact	135	15	150	96.00**
		90.00%	10.00%	100%	
4	The agent did not insure	10	140	150	112.67**
		6.67%	93.33%	100%	
5	Insurance was taken out	53	97	150	12.91**
		35.33%	64.67%	100%	

1.7 FINDING:

Prior to the outbreak of Covid-19, 60.00% of the people were unaware of the individual family health insurance plan, while only 33.33% of the people were aware of the health insurance plan. This shows that there was a lack of social awareness regarding individual family health insurance plans before the outbreak of COVID-19.

The prevalence of individual family health insurance before the outbreak of Covid-19 was 15.33%, while the proportion of people who were not insured before the outbreak was 60.00%. 24.67% of the people had insurance for less than one year. It is clear that most people did not have family health insurance before the outbreak of Covid-19.

The prevalence of personal family health insurance before the outbreak of COVID-19 is mainly due to financial factors, resulting in 56.76% of health insurance breakers, followed by 16.22% of individuals who do not need such individual family health insurance plans and 13.51% of individuals. Their personal family health insurance has been terminated due to the fact that 8.11% of the people are in their work and they are not paying attention to take out insurance as they did not get the benefit of health insurance taken out earlier.

With regard to Covid-19, you have 42.00% who strongly agree to have personal family health insurance, 34.67% who agree, 6.00% who disagree, 8.00% who disagree and 9.33% who disagree completely . Family health insurance has the highest number of people with this attitude.

In the case of Covid-19, 79.33% of individuals had financial difficulties, 65.33% had unemployment, 90.00 had contact problems, and 6.67% had no health insurance even after completing the process. This includes poor financial status for not taking out individual family health insurance.

A study of the above reveals that the financial status of the surveyed family heads is one of the reasons why their individual family health insurance is not available. In such a situation, at the village level or at the group level, various NGOs should make efforts to create awareness among these individuals about individual family health insurance schemes. In addition, your account holders should be encouraged to take out personal family insurance through various banks. Apart from this, family health insurance should be made compulsory for them while availing various schemes at the government level. This will help in spreading health insurance scheme in the society. And in an epidemic like Covid, the economic losses of a large number of people in the society can be reduced to some extent.

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