

Proactive, not reactive



Amarnath Saxena explains how to maximise your health insurance coverage with preventive care

According to the ministry of health and family welfare, nearly 63 per cent of deaths in India are attributed to non-communicable diseases such as cancer, cardiovascular ailments, chronic respiratory conditions and diabetes. These conditions, often linked to lifestyle choices, poor diets, chronic stress, genetic predispositions and environmental factors, don't just affect individual wellness, they also impact productivity, families and our nation's economic growth.

The most practical path forward is in improved awareness, health education, screening and early detection, supported by timely treatment. While out-of-pocket expenditure by Indian households has declined in recent years, the Press Information Bureau reports that in 2021-22, it still accounted for about 40 per cent of total health expenditure in the country. For families without adequate insurance coverage or access to government programmes, this translates into severe financial vulnerability during medical emergencies.

This is where preventive health-care becomes crucial. It provides routine medical tests and screenings to detect symptoms and risk factors early, preventing ailments from developing into chronic conditions and reducing long-term treatment costs. Researches have shown that regular medical examinations can reduce the risk of death by about 45 per cent, especially for individuals at higher risk.

Preventive care

Preventive care coverage is increasingly included as a feature in comprehensive health insurance policies, though it can also be added as an optional benefit to enhance existing coverage. The cost is generally affordable and depends on the level of coverage, frequency of check-ups and the sum insured opted for.

■ **Outpatient Department (OPD) Coverage:** This benefit covers medical consultations that do not require hospitalisation. You can consult a doctor either through teleconsultation or by visiting a clinic within the insurer's network. If the treating doctor advises diagnostic investigations such as blood tests, pathology or radiology, these are also covered, subject to policy terms and limits.

Teleconsultation allows you to

speak to a qualified medical practitioner from home, which is particularly useful for minor illnesses or follow-up visits. If you choose to visit a non-network clinic or hospital, OPD consultations and prescribed investigations may still be covered, provided you obtain prior intimation and approval from the insurer. This can typically be done through the insurer's mobile application.

OPD benefits and related treatments can be used multiple times during the policy year, subject to the limits defined in the policy. In many plans, the total amount you can claim under OPD coverage can go up to twice the annual premium. It is important to note that consultations for illnesses are typically subject to a 30-day waiting period in the first year of the policy. This waiting period does not apply at the time of renewal, provided the policy has been continued without a break.

■ **Annual preventive health check-ups:** Policyholders are entitled to comprehensive preventive health check-ups once every policy year at no additional cost. These check-ups include essential tests such as Complete Blood Count (CBC), Liver Function Test (LFT), Urine Routine, Sugar Profile, Lipid Profile, Thyroid Profile, Kidney Function Test, and other relevant diagnostics, all available at the insurer's network diagnostic centres.

Using OPD or preventive care benefits multiple times within the coverage limit does not affect your no claim bonus. The bonus only lapses if a preventive check-up leads to hospitalisation due to a serious ailment.

■ **Digital convenience:** To make preventive care more accessible, policyholders can use user-friendly mobile applications to access these services. These platforms enable you to book consultation appointments, order medicines, locate network hospitals, maintain digital medical records, and much more, all at your fingertips.

■ **Extension for family members:** Family members can also be included in the family floater plan, bringing all members together under.

Beyond standard check-ups, insurers are increasingly offering add-ons to enhance preventive care. These may include:

■ **Wellness sessions:** Access to various wellness programmes offered by certified and genuine professionals.

■ **Fitness programmes:** Discounts or

access to gyms, yoga sessions, or wellness apps. The information for these sessions and programmes can be obtained through the website or mobile application of the insurer.

Claiming OPD covers

For availing the benefit of OPD and other preventive care treatments, intimation can be made through the insurer's mobile app. Customers can use it to access cashless treatment at network hospitals without paying upfront or opt for reimbursement at non-network hospitals, subject to prior intimation and approval.

To process a reimbursement claim, the insured simply needs to upload the original hospital or diagnostic bills, payment receipts, consultation prescriptions, claim form and other relevant documents directly through the app within the stipulated time. If the insured is unable to process the claim digitally, they can also visit the insurer's closest branch office or reach out to customer care for assistance.

A few important tips

Before opting for preventive health benefits, it is important to read the policy wording carefully. Check how often the benefit can be used, the monetary limits, waiting periods, and whether tests must be conducted at network centres. Preventive health check-ups are subject to sub-limits, such as a maximum payable amount per year or per policy term. Some policies also restrict how frequently the benefit can be used. These limits are important to review before planning a check-up. If your existing policy does not include preventive check-ups or OPD coverage, you can explore adding it at renewal after understanding the additional premium and conditions.

Preventive health coverage works best when it is used regularly, not reactively. Scheduling annual tests, following up on abnormal reports, and maintaining continuity of your policy ensures you receive the full value of the benefit. In a healthcare environment where lifestyle conditions are rising steadily, informed and timely use of preventive benefits can make a measurable difference, both medically and financially.

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