Factors Influencing Customer Satisfaction in Health Insurance Services in India

Monica Bhatia

Research Scholar,DAVV

monicabhatia17@gmail.com

Alok Bansal

Professor

Prestige Institute of Management and Research, Indore

alok_bansal@pimrindore.ac.in

ABSTRACT

Health insurance sector in India is growing at a fast pace. With the entry of private players, the competition in the health insurance industry has become very intense. Thus, customer satisfaction is crucial for the health insurance companies in order to retain the existing customers and attract the potential customers. There is a need to understand the needs and expectations of customers to keep them satisfied. This study attempts to explore the factors that affect customer satisfaction in health insurance services. A sample of 513 respondents was selected on the basis of non-probability convenience sampling method. Self-administered questionnaire was used for data collection. The collected primary data were statistically treated using Principal component method of factor analysis. The analysis revealed five factors namely; trustworthiness, competitiveness, add-ons, peace &coverage, and customer responsiveness. The results suggested that trustworthiness is the most important factor of customer satisfaction in health insurance services and policyholders are most concerned with proper and timely claim settlement. The findings of the study are useful for managers and policy makers of health insurance companies.

Keywords: Health Insurance, Customer Satisfaction, Trustworthiness, Competitiveness, Add-Ons, Coverage, and Customer Responsiveness.

INTRODUCTION

Economic development of any country depends on the financial system of which insurance sector is a major player. Health insurance sector in India is growing at a fast pace. This is a result of growing initiatives taken by government and liberalisation where the private sector competes with both Indian and international companies. Health insurance companies are not only competing with themselves but also with other financial institutions within the financial sector. With the growing awareness regarding health insurance and availability of the facilities across the country, there exists the need to identify the factors that keep the customers satisfied. The services provided by the health insurance companies are almost similar in type and nature and therefore, the customers have exposure to innumerable choices. This signifies that there are unlimited switching options and very low switching costs. The customers will thus choose the option that gives them maximum satisfaction in relation to the different aspects important for them individually.

The competition within the health insurance industry is basically based on technological advancement and innovation in products and services. This may help these companies to retain the customers and also acquire new ones. This immense competition requires the health insurance companies to be customer focused as the customers give importance to value for money. According to Jindal (2014), the Indian insurance companies are failing to identify the needs of customers and are unable to recommend the products and services accordingly. Further, lack of skills of employees, misrepresentation at the time of selling the policy and unethical practices are also prevalent. This leads to customers being dissatisfied and they look for other options. Singh et al. (2014) argued that customer dissatisfaction has a greater psychological impact and longevity than good experiences. According to estimates, an unhappy customer, two to three times will speak about a bad experience than a good one. This hurts the bottom line of the insurance company and also brings

an extra cost of losing potential customers with the existing ones. Sherden (1992) said that customer retention is the most reasonable way to achieve profitable growth. It costs up to five times to make a sale to a new customer as it does to make an additional sale to an existing one.

Customer satisfaction in the health insurance industry is not only achieved at the time when the policy is purchased but also when it offers the expected peace of mind during its entire period. The health insurance companies have to take care about the satisfaction that is offered to the customers at the first stage is also provided till the last. Though, there have been instances when the health insurance companies have failed to provide the level of services they guarantee or fulfilling the promises they made with the customer. Health insurance companies' customers are often found saying that the service delivery is delayed. The companies are quick in receiving premiums but when it comes to claims payment, they become slow. The same is the case in providing policy documents, renewal notices and also responding to customer's requests. There have been complains regarding miss-selling of the policies also for which the major reason is the lack of product knowledge by the sales person of health insurance company. This in turn leads to unnecessary conflicts between the company and the customer which leads to dissatisfaction. Winning over and retaining satisfied customers has immense benefits. Increasing customer satisfaction has been found to lead to higher future profitability and lower costs. Increased revenue, increased profits, increased referrals, reduced switching and increased repeat purchase are some of the major benefits of customer satisfaction.

The health insurance companies need to have an attractive customer base and are required to identify the factors that influence the satisfaction of customers. It is imperative to adopt customer centric approach rather than be based on the product centric approach. In order to avoid switching of customers, the health insurance companies should understand the preferences of customers and offer the services accordingly. This study is an attempt towards finding the factors that mostly influence customer satisfaction in health insurance services in India. List of items taken into account includes infrastructure, location, quality of service, employees, technological advancement, staff professionalism, claim settlement and other benefits offered by the company. The variations in the perceptions of customers towards the level of their satisfaction provided useful insight to the health insurance companies while developing their policies and strategies.

REVIEW OF LITERATURE

Yadav and Sudhakar (2017) aimed to check the 'personal factors' influencing purchase decision making of the health insurance policyholders. The study found out the following factors that influence the purchase decision: awareness, financial security, tax benefits, lifestyle and risk cover. According to Awlachew (2015) there is a lot to be done with respect to service quality in the insurance industry. The insurers have the opportunity to take appropriate action to improve service quality by giving priority to factors that show huge gaps. Deshpande and Deshpande (2014) aimed at studying the factors influencing customer satisfaction with healthcare and stated that general health status, insurance type, annual income, number of persons in family, information from friends and age significantly affected the satisfaction with healthcare. Singh et al. (2014) found out some major factors influencing customer perceptions of service quality. These were convenience, tangible, empathy, responsiveness and assurance. Jindal (2014) concluded that the insurance companies understand that if the claims are not settled fairly, it leads to negative consequences for the image of the company.

Vazifehdust and Farokhian (2013) suggested that insurers must examine customer satisfaction on a continuous basis in order to identify the factors important to customers and thereby prioritizing them for the success of insurance. Garg (2013) studied 'Satisfaction and problems of health insurance policyholders' and implied that the health insurance companies should provide the facilities for free health check-ups at fixed intervals. Such features may be provided as extensions on coverage and on payment of extra premium. Further, the documentation should also be error free and simple. Akanlagm (2011) examined that customers have certain expectations from the insurers. There is a level of services that are expected by customers. Understanding these expectations is important and essential part of service delivery.

Narayana (2009) emphasized the importance of customers in insurance business. The study explained that in the growing competition, there is a need to go beyond just efficiency in designing products. To bring in higher efficiencies, understanding customers' needs and conveying them what the company has to offer is helpful. Rajesham and Rajender (2005) concluded that the Indian insurance companies should come up with multi-benefit policies including benefit of tax and customer services and focus on health insurance by smart marketing and aggressive distribution through internet along with much individual attention, transparency

and flexibility to increase quality and insurance business volume. Roy et al. (2006) found that claim management processing accounts for approximately 80 percent of the operational cost of any insurance company. By automating some of the lengthy aspects of the procedure, insurance companies can save substantial costs and gain efficiency by being more transparent and fast.

Day and Crask (2000) argued that if customer satisfaction is an outcome, then what causes this outcome should also be studied and discussed. The consumers consider the likelihood of functionality of the product, any harm arising out of the product use, sense of self-efficacy, approval of others and wasting time, money and effort in making a particular choice. Krishnan et al. (1999) studied drivers of customer satisfaction in financial services and found that the primary driver of overall satisfaction of customer is the satisfaction with the product offering. Jackson (1993) highlighted selling insurance is selling a promise, an idea with no tangible substance. Customer satisfaction comes by comparing expectations with actual experience of service, plus something extra. This satisfaction is critical for repeat business. Creating trust, understanding customers' needs, discovering expectations and effective response are the keys to satisfaction.

OBJECTIVES

The objective of the study is to identify the factors influencing customer satisfaction in health insurance services in India and to understand the relative importance of each factor.

RESEARCH METHODOLOGY

The Study: The research was descriptive in nature and based on survey conducted with self-administered questionnaire. Various factors were taken into account to understand the customer satisfaction in health insurance services.

The Sample: Sampling is a process of identifying the representative part of target population to be surveyed. For this study, the sample constituted of 513 respondents from different demographics (Table-1). The primary data were collected from the states of Madhya Pradesh, Maharashtra, Delhi, Kerala, Andhra Pradesh, Uttar Pradesh, Himachal Pradesh and Punjab. The respondents were policyholders of health insurance and selected with the help of non-probability convenience sampling method.

Table-1: Demographic Profile of Respondents

Details		Frequency	Percentage
Gender	Male	310	60
	Female	203	40
Age	Less than or equal to 35 years	284	55
	More than 35 years	229	45
Income	Less than 50,000	203	40
	50,000 – 1,00,000	171	33
	More than 1,00,000	139	27
Occupation	Business	168	33
	Service	274	53
	Others	71	14

Tools for Data Collection: To collect the data, a self-administered questionnaire was used which comprised of two parts: demographics information and 36 items that were related to the customer satisfaction in health insurance services. Respondents were asked to give response on a seven point Likert scale ranging from 'strongly agree' to 'strongly disagree'. The respondents were informed about the purpose of the questionnaire and were assured of the anonymity and confidentiality of the responses.

Validity: A preliminary draft of questionnaire containing 53 items was given to 32 judges comprising the experts from health insurance industry and academicians to check the meaningfulness and validity of each item with respect to the research purpose. All these experts were requested to express their views on each of the items and state whether the item is linguistically correctly formed and related to the study purpose. Finally, through this process, a total of 36 items were formulated that were directly and precisely related to customer satisfaction in health insurance services.

Reliability: Reliability represents 'consistency'. It refers to the extent to which the instrument yields consistent results. Cronbach's Alpha is one of the useful measures of the internal consistency and indicates the stability of scores in a test–retest approach. This research used Cronbach's Alpha as the reliability measurement tool for the Likert type scale. The value of alpha near to 01 is considered marvellous. The Cronbach's Alpha value for the study came out to be 0.959 (Table-2) which is considered a very good value and hence the data was considered reliable for further analysis.

Table-2:Reliability Statistics

Cronbach's Alpha	N of Items
0.959	36

Tools for Data Analysis:

The data collected was coded, computed and analysed through SPSS. The statistical test used was p Principal Ccomponent m Method of Factor a Analysisusing Varimax Rotation. Factor analysis is primarily used for data reduction and summarization. The relationship between various interrelated variables can be examined and it determines the minimum number of factors that account for maximum variance in the data.

The Kaiser-Meyer-Olkin Measure of Adequacy (KMO) indicates the proportion of variance in the variables that may be caused by underlying factors. High values of KMO (close to 01) indicate that factor analysis may be useful for the data. Lesser value decreases the extent of usefulness. The KMO for the instrument was 0.965 (Table-3), which is acceptable as a very good value. Bartlett's test of Sphericity relates to the significance of the study and is used to test if samples have equal variance which is called homogeneity of variances. The Bartlett's test of Sphericity must be less than 0.05 for the factor analysis to be considered suitable. The Sig. value of the test for the study is 0.000 (Table-3) and therefore factor analysis is suitable.

Table-3:KMO and Bartlett's Test

Kaiser-Meyer-Olkin Measure of Sampling Adequacy.		0.965
Bartlett's Test of Sphericity	Approx. Chi-Square	13562.437
	Df	630
	Sig.	0.000

RESULTS AND&FINDINGS

Factor analysis revealed five factors extracted out of 36 variables (see Annexure). These factors are: Trustworthiness, Competitiveness, Add-ons, Peace &Coverage and Customer Responsiveness.

Table-4: Factors of Customer Satisfaction, Factor Load, Eigen Value and Percentage of Variance

S.No.	Factor	Number of Items	Factor Load	Eigen Value	Percentage of Variance
1	Trustworthiness	14	9.742	16.852	26.637
2	Competitiveness	7	3.949	2.131	13.322
3	Add-ons	10	5.424	1.630	12.362
4	Peace & Coverage	3	2.168	1.389	6.208
5	Customer Responsiveness	2	1.766	1.200	5.919

Factor 1: Trustworthiness

This factor constituted of 14 variables: prompt claim settlement, fair claim settlement, accurate service, problem solving, recommendation of company, trust on employees, sympathy and assurance, prompt customer support service, polite employees, accurate records, safe online transactions, satisfactory age wise coverage options, approachable and supportive employees, and ethical agent. These variables have item loads of 0.826, 0.821, 0.807, 0.791, 0.776, 0.750, 0.695, 0.691, 0.684, 0.651, 0.626, 0.590, 0.589 and 0.445 respectively. This factor explained 26.637 percentage of variance with a total factor load of 9.742 focusing on trustworthiness. Prompt Claim Settlement procedure was identified as the most important variable of this factor.

Factor 2: Competitiveness

This factor constituted of sevenvariables: technological advancement, user friendly website and online facilities, convenient grace periods for policy renewals, other companies offer better features, satisfactory premium, accurate documents, and timely documents. These variables have item loads of 0.633, 0.610, 0.602, 0.584, 0.547, 0.503 and 0.470 respectively. This factor explained 13.322 percentage of variance with a total factor load of 3.949.

Factor 3: Add-ons

This factor constituted of 10 variables: attractive schemes, brand name, rider benefits, tax rebate benefits, convenient operating hours, easy to understand policy terms and conditions, visually appealing physical facilities, convenient branch locations, knowledgeable employees, explanation of benefits at the time of buying the policy. These variables have item loads of 0.743, 0.600, 0.552, 0.545, 0.533, 0.523, 0.512, 0.491, 0.472 and 0.453 respectively. This factor explained 12.362 percentage of variance with a total factor load of 5.424 and focusing on added benefits customers look for.

Factor 4: Peace and Coverage

This factor constituted three variables: Cashless coverage across large number of hospitals, mental peace and coverage of hospitalization expenses. These variables have item loads of 0.747, 0.745 and 0.676 respectively. This factor explained 6.208 percentage of variance with a total factor load of 2.168 and focusing on coverage of policy.

Factor 5: Customer Responsiveness

This factor consisted of two variables: prompt response from employee and individual attention from employee. These variables have item loads of 0.885 and 0.881 respectively. This factor explained 5.919 percentage of variance with a total factor load of 1.766 focusing on personal attention expected by policyholders.

DISCUSSION

After finding out the factors influencing customer satisfaction in health insurance services in Indian attempt has been made to consolidate the previous studies with the results of current research and provide a comprehensive view towards each factor.

Trust is reliability, confidence, strength and responsibility. Trojan and Yonge (1993) said that trust should be taken as an important element that improves customer expectations of care along with satisfaction. Kumar (2012) in his doctoral thesis found that the most influential factor was insurance agent among both rural and urban policy holders. According to Singh and Sirdeshmukh (2000) trust is viewed as an important antecedent of customer satisfaction and loyalty. Molina et al. (2007) studied customer satisfaction and highlighted trust as the key factor contributing to long term relationships. Trust is a firm belief in the truth, ability or reliability of someone or something. Prompt and fair claim settlement has been the most important variable as an individual buys the health insurance policy to reduce his risk of financial burden. Therefore, getting his policy money (claim) when he needs is the top priority of any policy holder. Thus, prompt claim settlement has been the highest voted variable. With timely settlement of claims, the fair amount is also another important aspect. There have been cases when the claimants do not receive the sum assured but a lesser amount wherein the companies show them various deductibles and ultimately the policyholder suffers. If these basic avenues are met by the insurance company, policyholders are satisfied and recommend their health insurance to others.

The objective of competitiveness is to convince the market that there is a distinct gap between what the company is offering and what the competitors are providing. This gap can be based on anything from general product features to satisfactory cost. The company providing competitive features are more likely to have higher market share and more customer loyalty. Any person who obtains the services carries certain basic expectations that he assumes will be fulfilled by his company. These expectations provide convenience in using the services and if fulfilled, lead to the customer being satisfied with the company. If these basic expectations are not met, the customer assumes low quality of services as technological advancements and proper documents are must haves in the services these days.

Kedare (2012) identified that annual premium is the most important factor that influence the choice of health insurance plan. Price is one of the major factors with service quality that influence customer decision making (Schmeida et al., 2007). Serin et al. (2013) found four factors of perceived satisfaction: Competence, credibility, sensitivity and accessibility. The study revealed a positive correlation between competence and selection. The study highlighted that competence is the key factor in this fast moving market. It creates a feeling of trust and link the customer to loyalty.

These are the unique features provided by a company. The add-ons factor would appeal to the sophisticated and knowledgeable customers who have the understanding of the market and are interested in uniqueness and extra features of product or service and have a willingness to pay a higher price for the same. Hu et al. (2011) stated that customer satisfaction was influenced by attractive attributes and negatively affected by customer complaints. Athma and Kumar (2007) analysed that urban market gets influenced by product based factors such as tax benefits, coverage of risk and returns. Whereas, the rural market gets influenced by non-product related features like agent's credibility, customer service and company's reputation.

A person buys health insurance policy so that he gets mental peace against any unforeseen financial burden that can be faced due to any illness to any family member. While buying the policy, coverage of hospitalization expenses and the number of hospitals covered under policy are the important factors that a person is concerned with. Therefore, the peace and coverage factor that constitutes mental peace, hospitalization expense coverage and number of hospitals covered play a vital role in customer satisfaction. More the coverage, higher is the satisfaction of customer with the policy and the company as a whole. Kedare (2012) said that apart from premium, hospital network and coverage of services hold importance in making healthcare plan choice. Therefore, insurance company should provide larger hospital network and services to fully satisfy the customers. According to Nair (2017) most of the health insurance service users are married which shows that these people are more concerned about having health insurance to protect themselves and their families against any unforeseen health related issues. Finkelstein et al. (2012) presented evidence that Mediclaim lessens financial stress and improves mental health.

Customers these days demand that their requests to be responded promptly. As with busy schedule, people do not want to be waiting. By providing personal attention to customers and making them feel that their problem is company's problem, the retention can be increased multi folds. A customer tends to be more satisfied with

the service provider if he feels he is taken care of and that he and his needs are important to the company. Responsiveness can be said to be an outcome that is achieved when the organizational relationships are designed in a way that they are cognizant and provide appropriate responses to universal expectations. It can be said that responsiveness is a means to attract customers and also it is related to providing adequate and timely care to safeguard customers' interest. Novikova (2006) perceptions of customers of service quality and satisfaction with service depend on the interaction with employee. Responsiveness relates to providing accurate and fast service (Ismail et al., 2009). According to Mandeep Kaur and Dalwinder Kaur (2014) personal touch rather than professional behaviour in the service industry is important to understand customer attributes.

CONCLUSION AND IMPLICATIONS

With the increasing competition across the globe, it is imperative for the health insurance companies to focus on customers and keep them satisfied in order to retain them. Studies have suggested that the cost incurred in having a new customer is five times the cost of retaining the existing customers. The primary objective of this research was to study the factors influencing customer satisfaction. As per the results of factor analysis, five factors were identified namely: Trustworthiness, Competitiveness, Add-Ons, Peace and Coverage, and Customer Responsiveness. The value of variance derived entails that first factor is important than the second, second factor is important than the third and so on.

The results of the study show that trustworthiness is the most important factor of customer satisfaction in health insurance. This means that trust is imperative in health insurance services as people spend their money on just a promise that they will be financially safe at the time of need. Therefore, health insurance companies should ensure that they maintain the trust of customers. Customers expect transparency in dealings. Information regarding premium calculation and claims should be explained to the customers when they purchase the policy. Competitiveness factor consisted of the aspects that are necessary for a health insurance company to differentiate itself from competitors. The nature of service offered by the health insurance companies are almost similar and therefore competitiveness is important to keep the customer satisfied.

Add-ons factor are the extra benefits offered by the health insurance companies. In such busy and hectic life, people are more inclined towards convenience and better facilities even if they have to pay a higher amount for them. More than 90 percent of respondents claimed that they take health insurance policy to cover their hospitalisation expenses which in turn provides them mental peace. The health insurance companies should increase their network of hospitals and provide cashless facilities as much as possible. Every customer of service industry expects the employees to provide them individual attention and respond to their queries immediately. Employee interaction is very important for the customers of health insurance. The health insurance companies should therefore ensure proper training of employees and keep updating the knowledge of employees, agents and sales personnel so that the customers get correct information about the products not only when they are sold but even at later stages.

With increasing awareness of people towards their health, health insurers have a high potential market to tap. Understanding the factors that determine the satisfaction of customers, the insurance companies can design their future policies and strategies accordingly. This study will help the health insurance companies in realising the importance of each aspect and train the employees and motivate them to deal with customers in a professional but sympathetic manner. Future studies can encompass managers and employees as this study was limited to only customers as respondents. Also, the same study can be undertaken in other non-life insurance and life insurance sector and also banking, travel and tourism sector. Thus, the study proves to be significantly helpful and provides a foundation for future studies with respect to customer satisfaction.

REFERENCES

1. Akanlagm, J. A. (2011). Promoting Customer Satisfaction in the Insurance Industry in Ghana: A Case Study of Selected Insurance Companies in the Tamale Metropolis. A Thesis, Institute of Distance Learning, Kwame Nkrumah University of Science and Technology.

2. Athma, P. & Kumar, R. (2007). An Explorative Study of Life Insurance Purchase Decision Making: Influence of Product and Non-Product Factors. *ICFAI Journal Risk & Insurance,* IV, 19-21.

3. Awlachew, A. (2015). The Effect of Service Quality on Customer Satisfaction in Selected Insurance Companies in Addis Ababa. A Thesis, Graduate School of Addis Ababa University.

4. Day, E. & Crask, M. R. (2000). Value Assessment: The Antecedent of Customer Satisfaction. Journal of Consumer Satisfaction, Dissatisfaction and Complaining Behaviour, 13, 52-60.

5. Deshpande, S.P. & Deshpande, S.S. (2014). Factors Influencing Consumer Satisfaction with Healthcare. *The Healthcare Manager*, 33(3), 261-266.

6. Finkelstein, A., Taubman, S., Wright, B., Bernstein, M., Gruber, J., Newhouse, J. P., Allen, H. & Baicker, K. (2012). The Oregon Health Insurance Experiment: Evidence from the First Year. *Quarterly Journal of Economics*, 127(3), 1057–1106.

7. Garg, A. (2013). Satisfaction and Problems of Health Insurance Policyholders in India. *International Journal of Banking, Risk and Insurance*, 1(2).Http://Www. Publishingindia. Com/Getbrochure. Aspx? Query=Uergqnjvy2h1cmvzfc8xodm1lnbkznwvmtgzns5wzgy=

8. Hu, H. Y., Cheng, C. C., Chiu, S. I. & Hong, F. Y. (2011). A Study of Customer Satisfaction, Customer Loyalty and Quality Attributes in Taiwan's Medical Service Industry. *African Journal of Business Management*, 5(1), 187-195.

9. Ismail, A., Abdullah, M. M., & Parasuraman, B. (2009). Effects of Service Quality and Perceive Value oOn Customer Satisfaction. *International Journal of Management Perspectives*, 1(3), 29-44.

10. Jackson, D. (1993). Your Next Choice: Compare Customer Service with Customer Satisfaction. Life and Health Insurance Sales, 136(2), 26. Https:// Search. Proquest. Com/Docview/199921739? Accountid=135227

11. Jindal, S. (2014). Ethical Issue in Insurance Companies: A Challenge for Indian Insurance Sector. *International Journal of Computer Science & Management Studies,* 14(9), 7-13.

12. Kedare, S. D. (2012). Health Insurance: Identifying Awareness Preferences and Buying Pattern in Mumbai. A Thesis, Dr. D.Y. Patil University.

13. Krishnan, M. S., Venkatram R., Mary C. M. &Paul D. (1999). Customer Satisfaction for Financial Services: The Role of Products, Services, and Information Technology. Management Science, 45(9), 1194-1209.

14. Kumar, V. (2012). A Contemporary Study of Factors Influencing Urban and Rural Consumers for Buying Different Life Insurance Policies in Haryana. A Doctoral Thesis in Commerce, Maharshi Dayanand University, Rohtak.

15. Mandeep Kaur & Dalwinder Kaur (2014). Customer Satisfaction Towards Life Insurance in Punjab. *The IUP Journal of Management Research,* 13(4), 27-53.

16. Molina, A., Martin, C. D. &Esteban, A. (2007). Relational Benefits and Customer Satisfaction in Retail Banking. *International Journal of Bank Marketing*, 25(4), 253-271.

17. Nair, S. S. N. (2017). Effect of Demographic Variables on Customer Satisfaction of Health Insurance Policyholders: A Study of General Insurance Companies In India. *The IUP Journal of Marketing Management*, 16(4), 20-32.

18. Narayana, J. (2009). Role of CRM in Life Insurance Business. *IRDA Journal, April,* 2009.

19. Novikova, K. (2006). A Study of Customer Satisfaction Factors and Employee Satisfaction in the Hospitality Industry. A Thesis, Southern Illinois University.

20. Rajesham C.H. & Rajender K. (2005). Changing Scenario of India Insurance Sector. *Indian Journal of Marketing*, 5(3), 12-14.

21. Roy, G. H. J., Vij, S. & Goswami, P. (2006). Claims Automation In Indian Non-Life Insurance Sector: Gaining A Competitive Edge. *The Journal of Computer Science and Information Technology*, 3(1), 35-39.

22. Schmeida, M., Mcneal, R. & Mossberger, K. (2007). Policy Determinants Affect Telemedicine Implementation. *Telemedicine and E-Health,* 13(2), 100-107.

23. Serin, E. A., Balkan, O. M. & Dogan H. (2013). The Effects of Demographic Factors on Perceived Customer Satisfaction Between Public And Private Banks: Turkey Example. *International Journal of Information Technology and Business Management*, 22(1). https:// Www. Jitbm.Com/22% 20volume/1%20customer%20satisfaction.Pdf

24. Sherden, W. A. (1992). Hold that Policyholder. *Best's Review,* 92(9), 23-26.

25. Singh, J., & Sirdeshmukh, D. (2000). Agency and Trust Mechanisms in Consumer Satisfaction and Loyalty Judgments. *Journal of the Academy of Marketing Science,* 28(1), 150-167.

26. Singh, S., Sirohi, N. J., & Chaudhary, K. (2014). A Study of Customer Perception Towards Service Quality Oof Life Insurance Companies in Delhi NCR Region. *Global Journal of Management and Business Research: E Marketing,* 14(7), 19-31.

27. Trojan, L., & Yonge, O. (1993). Developing Trusting, Caring Relationships: Home Care Nurses and Elderly Clients. *Journal of Advanced Nursing,* 18(12), 1903-1910.

28. Vazifehdust, H. & Farokhian, S. (2013). Factors Influencing Customer Satisfaction with the Success Factors Identified in the Insurance Industry. *African Journal of Business Management*, 7(21), 2026-2032.

29. Yadav, S. C. & Sudhakar, A. (2017). Personal Factors Influencing Purchase Decision Making: A Study of Health Insurance Sector in India. *Bimaquest*, 17(1-A), 48-59.