

**“A CONSUMER STUDY ON FACTORS AFFECTING “CHOICE” AND BUYING  
BEHAVIOUR FOR MEDICLAIM POLICIES IN THE STATE OF GUJARAT”**

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**CHAPTER NUMBER SIX  
FINDINGS OF THE RESEARCH STUDY  
CHAPTER SIX AT A GLANCE**

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# CHAPTER NUMBER SIX

## FINDINGS OF THE RESEARCH STUDY

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### 6.1 FINDINGS OF THE RESEARCH STUDY:

The researcher had applied Chi-square test, ANOVA and Factor Analysis to test various hypotheses formulated based on the primary data which were collected from the selected mediclaim policyholders from the selected cities of the Gujarat State, viz., Vadodara, Ahmedabad, Surat and Rajkot respectively.

### 6.2 CHI SQUARE

**The results of the testing hypothesis are put forward as follows.**

In order to apply the Chi- Square the responses of the selected mediclaim policyholders were taken on five rating scales, viz., Strongly Disagree, Disagree, Cannot Say, Strongly Agree and Agree (Q No. 02 and Q No. 14); Least Important, Unimportant, Cannot Say, Important and Most Important (Q No. 11A and Q No. 12A); Highly Dissatisfied, Dissatisfied, Cannot Say, Satisfied and Highly Satisfied (Q No. 11B, Q No. 12B and Q. 13).

**The results of Chi\quare test is put forward as follows.**

(Abbreviations used in following tables are S = Significant; NS = Not Significant; GEN = Gender; EDU = Educational Qualifications; MS = Marital Status; OCC= Occupation; TF = Type of Family; AI= Annual Income; NDFM: Number of Dependent Family Member and NEFM = Number of Earning Family Member)

### Hypothesis: 6:1

The average opinion of selected mediclaim policyholders' concerning his or her health status, benefits of the general insurance, and attitudes for buying the mediclaim policy vis-à-vis the selected mediclaim policyholders' selected background variables age; gender; educational qualifications, marital status, occupation, type of family, annual income; number of dependent family member and number of earning family member is equal.

**Table Number 6.1:**

**Chi-square value of selected mediclaim policyholders' opinion on health status, benefits of the general insurance and attitudes towards buying of the mediclaim policy vis-à-vis the selected mediclaim policyholders' background variables**

Sr. No.	Selected Criteria	'P' Value of $X^2$								
		Age DF=20	GEN DF=04	EDU DF=12	MS DF=12	OCC DF=16	TF DF=04	AI DF=36	NDFM DF=12	NEFM DF=12
01	Health status is the god gift	NS (0.159)	<b>S (0.025)</b>	NS (0.196)	NS (0.176)	<b>S (0.018)</b>	NS (0.069)	<b>S (0.001)</b>	NS (0.734)	NS (0.125)
02	I am aware of my medical history	NS (0.215)	NS (0.544)	<b>S (0.000)</b>	NS (0.113)	NS (0.070)	NS (0.213)	<b>S (0.003)</b>	NS (0.050)	<b>S (0.007)</b>
03	I am healthy	NS (0.487)	<b>S (0.001)</b>	NS (0.246)	<b>S (0.003)</b>	<b>S (0.011)</b>	NS (0.052)	NS (0.091)	NS (0.604)	<b>S (0.029)</b>
04	I am conscious about my health status	<b>S (0.027)</b>	NS (0.665)	<b>S (0.013)</b>	<b>S (0.045)</b>	NS (0.425)	NS (0.194)	NS (0.123)	NS (0.357)	NS (0.190)
05	I can judge my health status	NS (0.332)	NS (0.617)	NS (0.601)	<b>S (0.000)</b>	NS (0.179)	NS (0.229)	<b>S (0.024)</b>	NS (0.065)	NS (0.076)
06	Health can be maintained at any age	NS (0.822)	<b>S (0.035)</b>	NS (0.399)	NS (0.066)	NS (0.087)	<b>S (0.012)</b>	NS (0.160)	NS (0.933)	NS (0.132)
07	Provision can be made in the form of the health care status	NS (0.536)	NS (0.119)	NS (0.666)	NS (0.052)	<b>S (0.018)</b>	NS (0.331)	NS (0.272)	NS (0.131)	NS (0.117)
08	General insurance policies provide the tax benefits	NS (0.914)	NS (0.696)	<b>S (0.024)</b>	NS (0.090)	<b>S (0.005)</b>	NS (0.379)	<b>S (0.019)</b>	NS (0.169)	<b>S (0.000)</b>
09	General insurance policies safeguards against the future risk	NS (0.313)	NS (0.063)	<b>S (0.005)</b>	NS (0.189)	NS (0.224)	NS (0.493)	NS (0.556)	NS (0.541)	<b>S (0.016)</b>
10	General insurance policies gives financial security	NS (0.506)	NS (0.644)	NS (0.299)	NS (0.332)	NS (0.785)	NS (0.506)	NS (0.234)	NS (0.213)	<b>S (0.005)</b>

11	General insurance offers return on investments	NS (0.096)	NS (0.172)	NS (0.315)	NS (0.370)	<b>S (0.029)</b>	NS (0.923)	NS (0.085)	NS (0.280)	<b>S (0.001)</b>
12	It is available for the old age individuals	<b>S (0.009)</b>	<b>S (0.000)</b>	<b>S (0.002)</b>	NS (0.082)	<b>S (0.014)</b>	NS (0.714)	<b>S (0.006)</b>	NS (0.161)	<b>S (0.008)</b>
13	General insurance policies provides mental peace	NS (0.112)	NS (0.381)	<b>S (0.008)</b>	NS (0.956)	NS (0.086)	NS (0.613)	NS (0.248)	NS (0.367)	NS (0.120)
14	Mediclaime policy is inevitable	NS (0.060)	NS (0.307)	<b>S (0.005)</b>	NS (0.234)	NS (0.642) Df =12	NS (0.875)	NS (0.356)	NS (0.169)	<b>S (0.024)</b>
15	Mediclaime policy is beneficial to me	NS (0.720)	<b>S (0.021)</b>	NS (0.346)	<b>S (0.030)</b>	NS (0.066) Df =12	NS (0.860)	NS (0.102)	NS (0.264)	<b>S (0.021)</b>
16	It is safe to have mediclaime policy	NS (0.646)	NS (0.088)	<b>S (0.045)</b>	NS (0.202)	NS (0.148) Df =12	NS (0.581)	NS (0.163)	<b>S (0.022)</b>	<b>S (0.011)</b>
17	I like to have mediclaime policy	NS (0.513)	<b>S (0.036)</b>	<b>S (0.035)</b>	NS (0.470)	<b>S (0.002)</b> Df =12	NS (0.514)	NS (0.053)	NS (0.096)	<b>S (0.007)</b>
18	It is a pleasure to have mediclaime policy	NS (0.062)	NS (0.415)	NS (0.130)	<b>S (0.028)</b>	<b>S (0.001)</b> Df =12	NS (0.737)	NS (0.763)	NS (0.818)	<b>S (0.047)</b>
19	I am ready to bear the cost to have mediclaime policy	NS (0.125)	<b>S (0.037)</b>	NS (0.071)	NS (0.095)	NS (0.143) Df =12	NS (0.705)	NS (0.181)	NS (0.210)	<b>S (0.021)</b>
20	I positively involve myself to have mediclaime policy	NS (0.084)	NS (0.057)	NS (0.092)	NS (0.088)	NS (0.390) Df =12	NS (0.433)	NS (0.247)	NS (0.876)	<b>S (0.000)</b>

Overall, it was found that the average opinion of the selected medicaid policyholders of different age concerning their health status was found to be different only for the selected criteria, viz., I am conscious about my health status. While, in case of the selected medicaid policyholders of different gender, it was different for some of the selected criteria, viz., health status is the god gift, I am healthy and health can be maintained at any age. Considering education, the average opinion was found to be different only for the selected criteria, viz., I am aware of my medical history and I am conscious about my health status. In case of the selected medicaid policyholders with different marital status, overall, it was found to be different for some of the selected criteria, viz., I am healthy, I am conscious about my health care status and I can judge my health status. While, with reference to the occupation of the medicaid policyholders it was found to be different only for the selected criteria, i.e., health status is the god gift, I am healthy and provision can be made in the form of the health care status. Overall, it was found that the average opinion of the selected medicaid policyholders with different type of family regarding their health status was found to be different only for the selected criteria, viz., health can be maintained at any age. While, with regards to the medicaid policyholders with different annual income, it was found to be different for the criteria, viz., health status is the god gift, I am aware of my medical history and I can judge my health status. However, it was found to be uniform amongst the selected medicaid policyholders with different number of dependent family member, but, it varied with regards to the selected criteria, viz., I am aware of my medical history and I am healthy, in case of the selected medicaid policyholders with different number of earning family members.

The average opinion on the benefits of the general insurance of the selected medicaid policyholders with different age group and gender was found to be uniform for all the selected criteria except for the criteria viz., It is available for the old age individuals, while, it was found to be uniform for all the selected criteria, in case of the selected medicaid policyholders of different marital status, type of family, and number of dependent family members. However, in case of the medicaid policyholders with different educational qualifications, it was found to be different for the selected criteria viz., General insurance policies provide tax benefits, general insurance policies safeguards against the future risk, it is available for the old age individuals and general insurance policies provides mental peace. In case of the selected medicaid policyholders with different occupation, it was found to be different for the selected criteria viz., General insurance policies provide tax benefits, general insurance offers return on investments and it is available for the old age individuals. The opinion was found to be different for the selected criteria, viz., general insurance policies provides tax benefits and it is available for the old age individuals, in case of the selected medicaid policyholders with different annual family income.

While, the average opinion on the benefits of the general insurance of the selected medicaid policyholders with different earning family member was found to be different for all the selected criteria, except for the criteria, that is., general insurance policies provides mental peace.

The attitude of the selected medicaid policyholders of different age group, type of family, and with different annual family income concerning buying of the medicaid policy was found to be uniform for all the selected criteria. While, in case of the medicaid policyholder gender wise, it was found to be different for some of the selected criteria, viz., medicaid policy is beneficial to me, I like to have medicaid policy and I am ready to bear the cost to have medicaid policy. However, in case of the average opinion of the selected medicaid policyholders with different educational qualifications, it was found to be different with regards to some of the selected criteria, viz., medicaid policy is inevitable, it is safe to have medicaid policy, and I like to have medicaid policy. In case of the selected medicaid policyholders with different marital status, it was found to be uniform for all the selected criteria, except the criteria, that is., medicaid policy is beneficial to me and it is pleasure to have medicaid policy. It was found that the attitude of the selected medicaid policyholders of different occupation concerning buying of the medicaid policy was found to be different for some the selected criteria, viz., I like to have medicaid policy and it is pleasure to have medicaid policy. In case of the selected medicaid policyholders with different number of the dependent family member, it was found to be different only for the criteria, viz., it is safe to have medicaid policy. However, the attitude of the selected medicaid policyholders with different number of the earning family member concerning buying of the medicaid policy was found to be different for all the selected criteria.

### Hypothesis: 6:2

The perceived importance of the selected mediclaim policyholders' measured vis-à-vis the selected mediclaim policyholders' selected background variables age; gender; educational qualifications, marital status, occupation, type of family, annual income; number of dependent family member and number of earning family member is independent.

**Table Number 6.2:**  
**Chi-square value of selected mediclaim policyholders' perceived importance vis-à-vis selected mediclaim policyholders' background variables**

Sr. No.	Selected Criteria	'P' Value of X <sup>2</sup>								
		Age DF=20	GEN DF=04	EDU DF=12	MS DF=12	OCC DF=16	TF DF=04	AI DF=36	NDFM DF=12	NEFM DF=12
01	Age eligibility for Purchase of the Policy	<b>S (0.021)</b>	NS (0.862)	NS (0.949)	<b>S (0.019)</b>	NS (0.331)	NS (0.196)	<b>S (0.004)</b>	NS (0.211)	NS (0.058)
02	Broad range of the Age eligibility for the Renewal of the Policy	NS (0.556)	NS (0.189)	NS (0.173)	NS (0.057)	NS (0.553)	NS (0.051)	NS (0.544)	NS (0.536)	NS (0.231)
03	Range of the premium offered by the companies	NS (0.188)	NS (0.284)	NS (0.578)	NS (0.442)	NS (0.251)	<b>S (0.040)</b>	<b>S (0.004)</b>	NS (0.161)	NS (0.635)
04	The range of the premium for the various age groups for purchase of policy	NS (0.081)	NS (0.063)	<b>S (0.001)</b>	NS (0.458)	NS (0.943)	NS (0.068)	<b>S (0.018)</b>	NS (0.591)	<b>S (0.038)</b>
05	Coverage of the various Illness/Diseases	NS (0.232)	NS (0.285)	NS (0.190)	<b>S (0.028)</b>	NS (0.749)	<b>S (0.000)</b>	NS (0.311)	NS (0.567)	NS (0.341)
06	Coverage for the Allopathic Treatments	<b>S (0.018)</b>	NS (0.558)	<b>S (0.004)</b>	<b>S (0.033)</b>	NS (0.375)	<b>S (0.021)</b>	<b>S (0.032)</b>	NS (0.263)	<b>S (0.037)</b>
07	Coverage for the Ayurvedic Treatments	NS (0.783)	NS (0.683)	NS (0.079)	NS (0.248)	NS (0.592)	<b>S (0.018)</b>	NS (0.233)	NS (0.177)	NS (0.115)
08	Coverage for the Naturopathy Treatments	NS (0.189)	NS (0.232)	NS (0.950)	NS (0.347)	<b>S (0.012)</b>	NS (0.233)	NS (0.493)	<b>S (0.000)</b>	NS (0.151)
09	Coverage for HIV Infection	NS (0.611)	NS (0.061)	NS (0.203)	NS (0.111)	<b>S (0.049)</b>	<b>S (0.002)</b>	<b>S (0.022)</b>	<b>S (0.038)</b>	NS (0.211)
10	Coverage for Cancer	NS (0.787)	NS (0.435)	<b>S (0.021)</b>	NS (0.266)	NS (0.170)	<b>S (0.010)</b>	<b>S (0.016)</b>	NS (0.053)	NS (0.352)
11	The time period for the inclusion of the Pre-existing Illness	NS (0.449)	NS (0.864)	NS (0.803)	NS (0.561)	<b>S (0.009)</b>	NS (0.516)	NS (0.310)	<b>S (0.007)</b>	NS (0.239)

12	Coverage for the Room Boarding Expenses	NS (0.284)	NS (0.889)	NS (0.125)	NS (0.299)	NS (0.199)	NS (0.279)	<b>S (0.001)</b>	NS (0.283)	NS (0.079)
13	Coverage of the Nursing Expenses	<b>S (0.003)</b>	<b>S (0.031)</b>	NS (0.055)	<b>S (0.007)</b>	<b>S (0.029)</b>	NS (0.249)	<b>S (0.015)</b>	NS (0.451)	NS (0.052)
14	Coverage of Pre-hospitalization Expenses	NS (0.099)	NS (0.380)	NS (0.156)	<b>S (0.030)</b>	<b>S (0.025)</b>	NS (0.216)	NS (0.467)	NS (0.200)	NS (0.597)
15	Coverage of Post-hospitalization Expenses	NS (0.632)	NS (0.147)	NS (0.755)	NS (0.116)	<b>S (0.019)</b>	<b>S (0.023)</b>	<b>S(0.029)</b>	<b>S (0.011)</b>	<b>S (0.001)</b>
16	Coverage in the period of loss of income during the hospitalization	NS (0.088)	NS (0.055)	NS (0.428)	NS (0.169)	NS (0.115)	NS (0.154)	NS (0.155)	NS (0.179)	NS (0.363)
17	Domiciliary Hospitalization Cover	NS (0.411)	<b>S (0.013)</b>	NS (0.093)	NS (0.534)	NS (0.312)	NS (0.322)	NS (0.078)	NS (0.877)	NS (0.160)
18	Provision of giving Surgeon, anesthetist, medical practitioner, consultants, specialist's fees	NS (0.081)	<b>S (0.014)</b>	NS (0.072)	NS (0.269)	NS (0.356)	NS (0.050)	NS (0.245)	NS (0.433)	NS (0.705)
19	Coverage of payment of Professional fees related to Anesthesia/ blood/ oxygen/ operation/ surgical/appliances/ medicines	NS (0.606)	NS (0.222)	NS (0.308)	NS (0.300)	NS (0.341)	NS (0.106)	NS (0.584)	NS (0.642)	NS (0.212)
20	Coverage of Diagnostic material and X-Rays, dialysis, chemotherapy , radiotherapy, pacemaker, artificial limbs and cost of organs and similar expenses	NS (0.195)	NS (0.436)	NS (0.288)	NS (0.472)	NS (0.272)	NS (0.108)	NS (0.360)	NS (0.121)	NS (0.834)
21	Renewable Discount Offers	NS (0.676)	NS (0.847)	NS (0.097)	NS (0.606)	NS (0.449)	NS (0.147)	NS (0.284)	NS (0.106)	<b>S (0.004)</b>
22	Bonus for the Claim Free Years	NS (0.635)	NS (0.485)	<b>S (0.028)</b>	NS (0.922)	NS (0.724)	NS (0.143)	NS (0.069)	<b>S (0.047)</b>	NS (0.173)
23	Provision for Copayment Discounts	NS (0.400)	NS (0.111)	<b>S (0.021)</b>	NS (0.884)	NS (0.494)	NS (0.086)	NS (0.302)	NS (0.198)	NS (0.474)
24	Tax benefits	<b>S (0.013)</b>	NS (0.235)	<b>S (0.000)</b>	NS (0.179)	NS (0.253)	<b>S (0.020)</b>	<b>S (0.020)</b>	NS (0.145)	NS (0.192)
25	Coverage for the Health Risk	NS (0.171)	NS (0.958)	NS (0.085)	NS (0.689)	NS (0.120)	NS (0.136)	<b>S (0.033)</b>	NS (0.936)	NS (0.057)



26	Coverage for Increasing Health Care Expenditure	NS (0.080)	NS (0.652)	NS (0.827)	NS (0.967)	<b>S (0.024)</b>	NS (0.182)	NS (0.163)	NS (0.296)	<b>S (0.012)</b>
27	Critical Illness Coverage	NS (0.192)	NS (0.541)	NS (0.678)	NS (0.705)	NS (0.237)	NS (0.157)	NS (0.161)	<b>S (0.035)</b>	<b>S (0.004)</b>
28	Free Medical Check Up	NS (0.524)	NS (0.455)	NS (0.338)	NS (0.645)	<b>S (0.039)</b>	NS (0.149)	NS (0.226)	NS (0.692)	NS (0.529)
29	Free Ambulance Services	NS (0.521)	N S (0.218)	NS (0.228)	NS (0.617)	<b>S (0.004)</b>	NS (0.111)	NS (0.845)	NS (0.695)	NS (0.465)
30	Coverage for the day care procedures	NS (0.147)	NS (0.314)	NS (0.628)	NS (0.165)	<b>S (0.018)</b>	<b>S (0.038)</b>	<b>S (0.010)</b>	NS (0.090)	NS (0.610)
31	Free 24 hour help line Facility	<b>S (0.026)</b>	NS (0.149)	<b>S (0.030)</b>	<b>S (0.010)</b>	NS (0.679)	NS (0.080)	NS (0.692)	NS (0.352)	NS (0.735)
32	Free General Physician Consultations	NS (0.116)	NS (0.996)	NS (0.598)	NS (0.682)	NS (0.188)	NS (0.032)	NS (0.131)	NS (0.514)	<b>S (0.003)</b>
33	Free health magazines	NS (0.211)	NS (0.731)	NS (0.072)	NS (0.593)	NS (0.835)	<b>S (0.019)</b>	<b>S (0.020)</b>	NS (0.478)	NS (0.296)
34	Family Discount	NS (0.266)	NS (0.879)	NS (0.580)	<b>S (0.014)</b>	NS (0.640)	NS (0.694)	<b>S (0.024)</b>	<b>S (0.006)</b>	NS (0.502)
35	Online Cashless Card	<b>S (0.049)</b>	NS (0.260)	NS (0.142)	NS (0.256)	NS (0.070)	<b>S (0.007)</b>	NS (0.962)	NS (0.125)	NS (0.441)
36	The market share of the company	<b>S (0.005)</b>	NS (0.345)	NS (0.992)	NS (0.104)	NS (0.379)	NS (0.923)	NS (0.073)	NS (0.146)	NS (0.239)
37	Ownership type of the company public, private or the stand-alone	NS (0.362)	NS (0.478)	NS (0.410)	NS (0.091)	NS (0.768)	NS (0.236)	NS (0.121)	<b>S (0.022)</b>	NS (0.839)
38	Disputes Redressal by the company	NS(0.464)	NS (0.844)	<b>S(0.020)</b>	NS (0.412)	NS (0.254)	NS (0.337)	<b>S (0.007)</b>	NS (0.674)	NS (0.212)
39	The Awards/ Recognition won by the company	NS (0.396)	NS (0.214)	NS (0.642)	NS (0.364)	NS (0.369)	NS (0.094)	<b>S (0.015)</b>	NS (0.392)	NS (0.315)
40	Easy Purchase from the Agents	NS (0.083)	NS (0.536)	NS (0.167)	NS (0.288)	NS (0.066)	NS (0.341)	<b>S (0.008)</b>	NS (0.451)	NS (0.403)
41	Reminder calls for the premium payment from Agent	<b>S (0.006)</b>	NS (0.460)	NS (0.167)	NS (0.417)	NS (0.399)	NS (0.681)	<b>S (0.000)</b>	NS (0.628)	NS (0.763)
42	Timely collections of the premium by Agent	NS (0.188)	NS (0.383)	<b>S (0.000)</b>	NS (0.491)	<b>S (0.004)</b>	NS (0.134)	NS (0.084)	NS (0.869)	NS (0.124)
43	Regular Updates given by the Agent/s	NS (0.786)	NS (0.295)	NS (0.117)	NS (0.352)	<b>S (0.004)</b>	NS (0.788)	NS (0.144)	NS (0.071)	NS (0.221)
44	Assistance of Agent in Filling of the Claims	<b>S (0.045)</b>	NS (0.896)	<b>S (0.041)</b>	NS (0.441)	NS (0.119)	NS (0.227)	NS (0.117)	NS (0.140)	NS (0.896)

45	Assistance of Agent in Settlement of the Claims\	NS (0.285)	NS (0.811)	<b>S (0.018)</b>	NS (0.866)	NS (0.076)	<b>S (0.030)</b>	<b>S (0.044)</b>	NS (0.307)	<b>S (0.023)</b>
46	Help of the Agents for switching over to the other Medclaim Policy (Health Insurance Portability)	NS (0.332)	NS (0.893)	NS (0.190)	NS (0.844)	NS (0.816)	NS (0.379)	NS (0.226)	NS (0.397)	NS (0.349)
47	Easy Purchase from the Company's website	NS (0.713)	NS (0.879)	NS (0.076)	NS (0.069)	NS (0.218)	<b>S (0.008)</b>	NS (0.690)	NS (0.744)	NS (0.365)
48	Easy Purchase from Company's Physical Office	NS (0.143)	NS (0.538)	NS (0.827)	<b>S (0.040)</b>	NS (0.117)	<b>S (0.002)</b>	NS (0.352)	NS (0.068)	NS (0.375)
49	Reminders for the payment of the premium by the Company	NS (0.135)	NS (0.767)	NS (0.776)	NS (0.266)	NS (0.147)	NS (0.105)	NS (0.553)	NS (0.412)	NS (0.387)
50	Online Payment of Premium	NS (0.676)	NS (0.352)	NS (0.146)	<b>S (0.000)</b>	<b>S (0.047)</b>	NS (0.144)	NS (0.265)	NS (0.565)	NS (0.336)
51	Regular Updates made by the Company	NS (0.062)	NS (0.630)	<b>S (0.022)</b>	NS (0.077)	NS (0.426)	NS (0.202)	NS (0.130)	NS (0.255)	NS (0.732)
52	Online Filling of the Claim	NS (0.829)	NS (0.975)	NS (0.095)	NS (0.233)	NS (0.590)	NS (0.122)	NS (0.070)	NS (0.271)	NS (0.435)
53	Online Claim Settlements	NS (0.397)	NS (0.981)	NS (0.542)	<b>S (0.048)</b>	NS (0.896)	NS (0.180)	NS (0.296)	NS (0.053)	NS (0.143)
54	Online Checking of Status for Claim Settlement	NS (0.594)	NS (0.323)	NS (0.344)	NS (0.422)	NS (0.668)	NS (0.165)	NS (0.096)	NS (0.406)	NS (0.931)
55	Network of the selected Hospital/s	NS (0.103)	NS (0.505)	NS (0.085)	<b>S (0.001)</b>	NS (0.488)	<b>S (0.025)</b>	NS (0.484)	NS (0.073)	NS (0.157)
56	Convenience of the Location of the Network Hospitals	NS (0.057)	NS (0.881)	NS (0.050)	NS (0.504)	<b>S (0.026)</b>	NS (0.170)	NS (0.328)	NS (0.343)	<b>S (0.017)</b>
57	Availability of the Medical related services at the Network Hospitals	NS (0.433)	NS (0.430)	NS (0.119)	NS (0.336)	NS (0.322)	NS (0.458)	NS (0.726)	NS (0.886)	NS (0.075)

58	Availability of the Cash Reimbursement Scheme at Network Hospitals	NS (0.073)	NS (0.531)	NS (0.156)	<b>S (0.037)</b>	<b>S (0.027)</b>	<b>S (0.018)</b>	<b>S (0.031)</b>	<b>S (0.001)</b>	NS (0.582)
59	Availability of the Cashless Facility Network Hospitals	NS (0.410)	NS (0.278)	NS (0.131)	NS (0.213)	NS (0.276)	<b>S (0.017)</b>	<b>S (0.001)</b>	NS (0.248)	NS (0.082)
60	Availability of Choice of the Hospital	<b>S (0.015)</b>	NS (0.372)	<b>S (0.002)</b>	<b>S (0.002)</b>	NS (0.097)	<b>S (0.011)</b>	NS (0.226)	<b>S (0.023)</b>	NS (0.163)
61	Easy purchase of the Individual Medici claim Policy	NS (0.290)	NS (0.623)	<b>S (0.009)</b>	NS (0.452)	NS (0.449)	<b>S (0.029)</b>	NS (0.128)	NS (0.215)	NS (0.662)
62	Easy Claim Filling Procedure	NS (0.941)	NS (0.234)	NS (0.352)	NS (0.304)	NS (0.695)	NS (0.295)	NS (0.126)	NS (0.108)	NS (0.457)
63	Easy Claim Settlement Procedure	NS (0.224)	NS (0.425)	NS (0.507)	NS (0.713)	NS (0.314)	NS (0.274)	NS (0.613)	NS (0.227)	<b>S (0.043)</b>
64	Speedy Claim Settlement Procedure	NS (0.163)	NS (0.674)	NS (0.782)	NS (0.744)	NS (0.343)	NS (0.159)	NS (0.311)	NS (0.142)	NS (0.158)
65	Simple Complaint Handling System	NS (0.248)	NS (0.243)	NS (0.653)	NS (0.877)	NS (0.727)	NS (0.505)	NS (0.398)	NS (0.812)	NS (0.707)
66	Prompt Address to the Complaints	NS (0.325)	NS (0.373)	NS (0.178)	NS (0.546)	NS (0.884)	NS (0.455)	NS (0.303)	NS (0.605)	NS (0.231)
67	Providing Redressal for the Complaints	NS (0.887)	NS (0.462)	NS (0.759)	NS (0.300)	NS (0.265)	NS (0.158)	NS (0.473)	<b>S (0.016)</b>	NS (0.211)

In case of the selected medicaid policyholders with different age group, the perceived importance on various selected criteria for buying of the medicaid policy was found to be different with regards to some of the selected criteria, viz., age eligibility for purchase of the policy; coverage for the allopathic treatments; coverage of the nursing expenses; tax benefits; free 24 hour help line facility; online cashless card; the market share of the company; reminder calls for the premium payment from agent; assistance of agent in filling of the claims and availability of choice of the hospital.

While, in case of the selected medicaid policyholders with different gender, it was found to be different with regards to the selected criteria, viz., coverage of the nursing expenses; domiciliary hospitalization cover, and provision of giving surgeon, anesthetist, medical practitioner, consultants, specialist's fees.

The perceived importance amongst the selected medicaid policyholders with different educational qualifications across the selected cities was found to be different with regards to the selected criteria, viz., the range of the premium for the various age groups for purchase of policy; coverage for the allopathic treatments; coverage for cancer; bonus for the claim free years; provision for copayment discounts; tax benefits; free 24 hour help line facility; disputes redressal by the company; timely collections of the premium by agent; assistance of agent in filling of the claims; assistance of agent in settlement of the claims; regular updates made by the company; availability of choice of the hospital, and easy purchase of the individual medicaid policy.

While, in case of the selected medicaid policyholders of different marital status across the selected cities, it was found to be different with regards to the selected criteria, viz., age eligibility for purchase of the policy; coverage of the various illness/diseases; coverage for the allopathic treatments; coverage of the nursing expenses; coverage of pre-hospitalization expenses; free 24 hour help line facility; family discount; easy purchase from company's physical office; online payment of premium; online claim settlements; network of the selected hospital/s; availability of the cash reimbursement scheme at network hospitals, and availability of choice of the hospital.

However, the overall perceived importance amongst the selected medicaid policyholders with different occupational status across the selected cities was found to be different with regards to the selected criteria, viz., coverage for the naturopathy treatments; coverage for HIV Infection; the time period for the inclusion of the pre-existing illness; coverage of the nursing expenses; coverage of pre-hospitalization expenses; coverage of post-hospitalization expenses; coverage for increasing health care expenditure; free medical check-up; free ambulance services; coverage for the day care; timely collections of the premium by agent; regular updates given by the agent/s; online payment of premium; convenience of the location of the network hospitals, and availability of the cash reimbursement scheme at network hospitals.

The overall perceived importance amongst the selected mediclaim policyholders with different type of family across the selected cities was found to be different with regards to some of the selected criteria, viz., range of the premium offered by the companies; coverage of the various illness/diseases; coverage for the allopathic treatments; coverage for the Ayurvedic treatments; coverage for HIV infection; coverage for cancer; coverage of post-hospitalization expenses; tax benefits; coverage for the day care procedures; free health magazines; online cashless card; assistance of agent in settlement of the claims; easy purchase from the company's website; easy purchase from company's physical office; network of the selected hospital/s; availability of the cash reimbursement scheme at network hospitals; availability of the cashless facility network hospitals; availability of choice of the hospital, and easy purchase of the individual mediclaim policy.

In case of the selected mediclaim policyholders with different annual income, it was found to be different with regards to the selected criteria, viz., age eligibility for purchase of the policy; range of the premium offered by the companies; the range of the premium for the various age groups for purchase of policy; coverage for the allopathic treatments; coverage for HIV infection; coverage for cancer; coverage for the room boarding expenses; coverage of the nursing expenses; coverage of post-hospitalization expenses; tax benefits; coverage for the health risk; coverage for the day care procedures; free health magazines; family discount; disputes redressal by the company; the awards/recognitions won by the company; easy purchase from the agents; reminder calls for the premium payment from agent; assistance of agent in settlement of the claims; availability of the cash reimbursement scheme at network hospitals, and availability of the cashless facility network hospitals.

While, the overall perceived importance amongst the selected mediclaim policyholders with different number of dependent family member was found to be different with regards to some of the selected criteria, viz., coverage for the naturopathy treatments; coverage for HIV infection; the time period for the inclusion of the pre-existing illness; coverage of post-hospitalization expenses; bonus for the claim free years; critical illness coverage; family discount; ownership type of the company public, private or the stand-alone; availability of the cash reimbursement scheme at network hospitals; availability of choice of the hospital, and providing redressal for the complaints.

However, in case of the selected mediclaim policyholders with different number of the earning family member was found to be different with regards to the selected criteria, viz., the range of the premium for the various age groups for purchase of policy; coverage for the allopathic treatments; coverage of post-hospitalization expenses; renewable discount offers; coverage for increasing health care expenditure; critical illness coverage; free general physician consultations; assistance of agent in settlement of the claims; convenience of the location of the network hospitals; easy claim settlement procedure.

### Hypothesis: 6:3

The satisfaction/dissatisfaction of the selected mediclaim policyholders' vis-à-vis the selected mediclaim policyholders' selected background variables age; gender; educational qualifications, marital status, occupation, type of family, annual income; number of dependent family member and number of earning family member is independent.

**Table Number 6.3:**

**Chi-square value of selected mediclaim policyholders' satisfaction/dissatisfaction vis-à-vis selected mediclaim policyholders' background variables**

Sr. No.	Selected Criteria	'P' Value of $\chi^2$								
		Age DF=20	GEN DF=04	EDU DF=12	MS DF=12	OCC DF=16	TF DF=04	AI DF=36	NDFM DF=12	NEFM DF=12
01	Age eligibility for Purchase of the Policy	NS (0.424)	NS (0.408)	<b>S (0.011)</b>	NS (0.083)	NS (0.062)	NS (0.394)	<b>S (0.009)</b>	<b>S (0.018)</b>	<b>S (0.018)</b>
02	Broad range of the Age eligibility for the Renewal of the Policy	NS (0.341)	NS (0.403)	NS (0.313)	NS (0.462)	NS (0.083)	NS (0.297)	NS (0.296)	NS (0.893)	<b>S (0.005)</b>
03	Range of the premium offered by the companies	NS (0.130)	NS (0.177)	NS (0.201)	<b>S (0.031)</b>	NS (0.234)	NS (0.323)	S (0.017)	NS (0.217)	NS (0.473)
04	The range of the premium for the various age groups for purchase of policy	NS (0.192)	NS (0.561)	NS (0.229)	<b>S (0.039)</b>	NS (0.162)	<b>S (0.038)</b>	NS (0.058)	NS (0.562)	<b>S (0.021)</b>
05	Coverage of the various Illness/Diseases	NS (0.666)	NS (0.584)	<b>S (0.005)</b>	<b>S (0.015)</b>	NS (0.741)	NS (0.172)	NS (0.152)	NS (0.468)	NS (0.102)
06	Coverage for the Allopathic Treatments	NS (0.121)	NS (0.672)	<b>S (0.008)</b>	<b>S (0.004)</b>	NS (0.233)	<b>S (0.000)</b>	NS (0.239)	NS (0.175)	NS (0.273)
07	Coverage for the Ayurvedic Treatments	NS (0.376)	NS (0.657)	NS (0.151)	NS (0.646)	<b>S (0.035)</b>	NS (0.508)	NS (0.264)	NS (0.131)	<b>S (0.005)</b>
08	Coverage for the Naturopathy Treatments	NS (0.831)	NS (0.111)	NS (0.573)	NS (0.253)	<b>S (0.018)</b>	NS (0.174)	NS (0.114)	NS (0.178)	<b>S (0.041)</b>
09	Coverage for HIV Infection	NS (0.785)	NS (0.113)	NS (0.458)	NS (0.135)	NS (0.355)	NS (0.810)	NS (0.471)	NS (0.462)	<b>S (0.017)</b>
10	Coverage for Cancer	NS (0.519)	NS (0.122)	<b>S (0.034)</b>	NS (0.073)	NS (0.082)	NS (0.749)	NS (0.068)	NS (0.258)	<b>S (0.005)</b>
11	The time period for the inclusion of the Pre-existing Illness	<b>S (0.020)</b>	NS (0.138)	NS (0.797)	NS (0.344)	NS (0.305)	NS (0.755)	NS (0.154)	NS (0.118)	<b>S (0.039)</b>
12	Coverage for the Room Boarding Expenses	<b>S (0.009)</b>	NS (0.451)	NS (0.066)	NS (0.320)	NS (0.271)	NS (0.852)	NS (0.130)	NS (0.497)	NS (0.285)

13	Coverage of the Nursing Expenses	<b>S (0.044)</b>	NS (0.554)	NS (0.341)	<b>S (0.008)</b>	NS (0.157)	NS (0.262)	NS (0.442)	NS (0.228)	NS (0.620)
14	Coverage of Pre-hospitalization Expenses	NS (0.104)	NS (0.124)	<b>S (0.004)</b>	<b>S (0.028)</b>	<b>S (0.012)</b>	NS (0.367)	<b>S (0.021)</b>	NS (0.252)	NS (0.160)
15	Coverage of Post-hospitalization Expenses	<b>S (0.024)</b>	NS (0.437)	<b>S (0.027)</b>	<b>S (0.039)</b>	NS (0.154)	NS (0.282)	<b>S (0.030)</b>	NS (0.391)	NS (0.542)
16	Coverage in the period of loss of income during the hospitalization	NS (0.660)	NS (0.930)	NS (0.947)	<b>S (0.000)</b>	<b>S (0.004)</b>	NS (0.981)	NS (0.311)	<b>S (0.004)</b>	NS (0.117)
17	Domiciliary Hospitalization Cover	NS (0.915)	NS (0.656)	NS (0.692)	NS (0.139)	NS (0.229)	NS (0.090)	NS (0.054)	NS (0.112)	<b>S (0.003)</b>
18	Provision of giving Surgeon, anesthetist, medical practitioner, consultants, specialist's fees	NS (0.124)	NS (0.718)	NS (0.578)	NS (0.061)	NS (0.051)	NS (0.738)	NS (0.338)	NS (0.746)	NS (0.246)
19	Coverage of payment of Professional fees related to Anesthesia/ blood/ oxygen/ operation/ surgical/appliances/ medicines	NS (0.107)	NS (0.244)	NS (0.113)	NS (0.130)	NS (0.268)	NS (0.189)	NS (0.491)	NS (0.286)	NS (0.431)
20	Coverage of Diagnostic material and X-Rays, dialysis, chemotherapy , radiotherapy, pacemaker, artificial limbs and cost of organs and similar expenses	NS (0.122)	NS (0.273)	NS (0.005)	NS (0.339)	<b>S (0.014)</b>	NS (0.924)	NS (0.474)	NS (0.139)	NS (0.578)
21	Renewable Discount Offers	NS (0.474)	NS (0.414)	NS (0.460)	<b>S (0.009)</b>	NS (0.175)	NS (0.625)	NS (0.284)	<b>S (0.009)</b>	<b>S (0.035)</b>
22	Bonus for the Claim Free Years	NS (0.223)	NS (0.391)	NS (0.310)	NS (0.148)	NS (0.081)	NS (0.884)	NS (0.069)	NS (0.507)	NS (0.095)
23	Provision for Copayment Discounts	NS (0.118)	NS (0.597)	NS (0.161)	NS (0.227)	NS (0.173)	NS (0.595)	NS (0.302)	<b>S (0.006)</b>	<b>S (0.000)</b>
24	Tax benefits	NS (0.837)	NS (0.361)	<b>S (0.002)</b>	NS (0.564)	<b>S (0.044)</b>	<b>S (0.040)</b>	<b>S (0.020)</b>	NS (0.382)	<b>S (0.010)</b>
25	Coverage for the Health Risk	NS (0.271)	NS (0.519)	NS (0.083)	<b>S (0.013)</b>	<b>S (0.029)</b>	NS (0.456)	<b>S (0.033)</b>	NS (0.751)	<b>S (0.006)</b>
26	Coverage for Increasing Health Care Expenditure	NS (0.068)	NS (0.986)	NS (0.109)	<b>S (0.000)</b>	<b>S (0.030)</b>	NS (0.434)	NS (0.163)	NS (0.559)	<b>S (0.009)</b>

27	Critical Illness Coverage	NS (0.676)	NS (0.192)	NS (0.259)	NS (0.113)	NS (0.163)	NS (0.372)	<b>S (0.037)</b>	NS (0.086)	<b>S (0.008)</b>
28	Free Medical Check Up	NS (0.241)	<b>S (0.012)</b>	NS (0.180)	NS (0.057)	<b>S (0.000)</b>	NS (0.711)	NS (0.545)	NS (0.672)	NS (0.308)
29	Free Ambulance Services	NS (0.152)	NS (0.803)	NS (0.055)	<b>S (0.012)</b>	NS (0.114)	<b>S (0.046)</b>	<b>S (0.027)</b>	NS (0.560)	<b>S (0.020)</b>
30	Coverage for the day care procedures	NS (0.148)	NS (0.388)	NS (0.659)	NS (0.242)	NS (0.324)	<b>S (0.006)</b>	S (0.033)	NS (0.551)	<b>S (0.028)</b>
31	Free 24 hour help line Facility	<b>S (0.009)</b>	NS (0.148)	NS (0.071)	<b>S (0.000)</b>	<b>S (0.005)</b>	NS (0.217)	NS (0.105)	NS (0.234)	NS (0.063)
32	Free General Physician Consultations	<b>S (0.001)</b>	NS (0.172)	NS (0.128)	<b>S (0.042)</b>	<b>S (0.000)</b>	NS (0.307)	<b>S (0.007)</b>	NS (0.773)	<b>S (0.011)</b>
33	Free health magazines	<b>S (0.000)</b>	NS (0.094)	NS (0.081)	<b>S (0.014)</b>	<b>S (0.000)</b>	NS (0.397)	<b>S (0.000)</b>	NS (0.067)	<b>S (0.001)</b>
34	Family Discount	NS (0.166)	NS (0.191)	NS (0.614)	<b>S (0.007)</b>	<b>S (0.009)</b>	NS (0.466)	<b>S (0.011)</b>	NS (0.347)	<b>S (0.002)</b>
35	Online Cashless Card	NS (0.093)	NS (0.515)	NS (0.180)	NS (0.476)	NS (0.226)	NS (0.613)	<b>S (0.009)</b>	NS (0.061)	<b>S (0.008)</b>
36	The market share of the company	NS (0.183)	NS (0.247)	NS (0.389)	NS (0.093)	NS (0.099)	NS (0.672)	NS (0.080)	NS (0.454)	<b>S (0.041)</b>
37	Ownership type of the company public, private or the stand-alone	<b>S (0.014)</b>	NS (0.431)	<b>S (0.005)</b>	<b>S (0.013)</b>	<b>S (0.000)</b>	NS (0.214)	NS (0.113)	NS (0.221)	<b>S (0.001)</b>
38	Disputes Redressal by the company	NS (0.146)	NS (0.494)	<b>S (0.002)</b>	NS (0.561)	<b>S (0.003)</b>	NS (0.501)	NS (0.058)	NS (0.272)	<b>S (0.002)</b>
39	The Awards/ Recognition won by the company	<b>S (0.001)</b>	NS (0.333)	<b>S (0.039)</b>	<b>S (0.000)</b>	<b>S (0.000)</b>	NS (0.242)	<b>S (0.001)</b>	NS (0.284)	<b>S (0.030)</b>
40	Easy Purchase from the Agents	NS (0.170)	NS (0.308)	<b>S (0.000)</b>	NS (0.356)	<b>S (0.000)</b>	NS (0.754)	NS (0.172)	NS (0.860)	NS (0.434)
41	Reminder calls for the premium payment from Agent	<b>S (0.041)</b>	NS (0.112)	<b>S (0.005)</b>	NS (0.091)	<b>S (0.011)</b>	NS (0.190)	<b>S (0.002)</b>	NS (0.593)	<b>S (0.028)</b>
42	Timely collections of the premium by Agent	NS (0.745)	NS (0.877)	NS (0.100)	NS (0.369)	<b>S (0.005)</b>	NS (0.924)	<b>S (0.022)</b>	NS (0.069)	<b>S (0.022)</b>
43	Regular Updates given by the Agent/s	NS (0.638)	NS (0.786)	NS (0.090)	NS (0.314)	<b>S (0.000)</b>	NS (0.367)	<b>S (0.014)</b>	<b>S (0.000)</b>	<b>S (0.045)</b>
44	Assistance of Agent in Filling of the Claims	NS (0.253)	NS (0.850)	NS (0.144)	<b>S (0.003)</b>	<b>S (0.000)</b>	NS (0.064)	<b>S (0.006)</b>	NS (0.700)	NS (0.056)
45	Assistance of Agent in Settlement of the Claims	NS (0.615)	NS (0.326)	NS (0.167)	NS (0.133)	<b>S (0.010)</b>	NS (0.530)	NS (0.234)	NS (0.763)	NS (0.439)



46	Help of the Agents for switching over to the other Medici claim Policy (Health Insurance Portability)	NS (0.461)	<b>S (0.028)</b>	<b>S (0.039)</b>	<b>S (0.018)</b>	<b>S (0.000)</b>	<b>S (0.033)</b>	<b>S (0.004)</b>	NS (0.141)	NS (0.250)
47	Easy Purchase from the Company's website	<b>S (0.017)</b>	NS (0.529)	NS (0.084)	<b>S (0.000)</b>	NS (0.067)	NS (0.284)	<b>S (0.021)</b>	NS (0.189)	NS (0.054)
48	Easy Purchase from Company's Physical Office	<b>S (0.000)</b>	NS (0.472)	<b>S (0.024)</b>	<b>S (0.000)</b>	NS (0.177)	NS (0.371)	<b>S (0.017)</b>	NS (0.639)	<b>S (0.002)</b>
49	Reminders for the payment of the premium by the Company	<b>S (0.002)</b>	NS (0.129)	NS (0.076)	<b>S (0.000)</b>	NS (0.100)	NS (0.313)	NS (0.131)	NS (0.727)	<b>S (0.010)</b>
50	Online Payment of Premium	<b>S (0.038)</b>	NS (0.704)	NS (0.188)	<b>S (0.002)</b>	NS (0.754)	NS (0.147)	NS (0.631)	NS (0.586)	<b>S (0.037)</b>
51	Regular Updates made by the Company	<b>S (0.004)</b>	<b>S (0.023)</b>	<b>S (0.025)</b>	<b>S (0.017)</b>	NS (0.209)	NS (0.272)	NS (0.705)	NS (0.570)	<b>S (0.001)</b>
52	Online Filling of the Claim	NS (0.384)	NS (0.531)	NS (0.649)	NS (0.063)	<b>S (0.002)</b>	NS (0.379)	NS (0.111)	NS (0.062)	NS (0.109)
53	Online Claim Settlements	NS (0.070)	NS (0.233)	NS (0.432)	NS (0.257)	NS (0.058)	NS (0.077)	<b>S (0.013)</b>	NS (0.094)	<b>S (0.009)</b>
54	Online Checking of Status for Claim Settlement	NS (0.374)	NS (0.063)	<b>S (0.009)</b>	NS (0.150)	<b>S (0.021)</b>	NS (0.588)	NS (0.265)	NS (0.106)	NS (0.240)
55	Network of the selected Hospital/s	NS (0.376)	NS (0.600)	<b>S (0.000)</b>	NS (0.078)	NS (0.102)	<b>S (0.012)</b>	<b>S (0.003)</b>	NS (0.488)	<b>S (0.017)</b>
56	Convenience of the Location of the Network Hospitals	NS (0.050)	NS (0.550)	<b>S (0.031)</b>	NS (0.051)	NS (0.063)	NS (0.241)	<b>S (0.039)</b>	<b>S (0.049)</b>	<b>S (0.027)</b>
57	Availability of the Medical related services at the Network Hospitals	NS (0.115)	NS (0.158)	<b>S (0.030)</b>	NS (0.156)	NS (0.140)	NS (0.751)	<b>S (0.002)</b>	NS (0.056)	<b>S (0.009)</b>
58	Availability of the Cash Reimbursement Scheme at Network Hospitals	NS (0.446)	NS (0.239)	<b>S (0.048)</b>	NS (0.337)	<b>S (0.031)</b>	NS (0.075)	NS (0.494)	NS (0.490)	NS (0.108)

59	Availability of the Cashless Facility Network Hospitals	NS (0.284)	NS (0.187)	<b>S (0.034)</b>	NS (0.589)	NS (0.132)	NS (0.089)	<b>S (0.020)</b>	NS (0.231)	<b>S (0.046)</b>
60	Availability of Choice of the Hospital	<b>S (0.010)</b>	NS (0.934)	NS (0.078)	<b>S (0.027)</b>	<b>S (0.009)</b>	NS (0.303)	NS (0.328)	NS (0.301)	NS (0.056)
61	Easy purchase of the Individual Mediclaim Policy	NS (0.955)	<b>S (0.029)</b>	<b>S (0.015)</b>	NS (0.172)	<b>S (0.022)</b>	NS (0.071)	<b>S (0.040)</b>	NS (0.153)	NS (0.113)
62	Easy Claim Filling Procedure	NS (0.551)	<b>S (0.009)</b>	NS (0.099)	<b>S (0.004)</b>	NS (0.091)	NS (0.731)	NS (0.063)	NS (0.119)	NS (0.156)
63	Easy Claim Settlement Procedure	NS (0.242)	<b>S (0.005)</b>	NS (0.088)	NS (0.216)	<b>S (0.007)</b>	NS (0.384)	<b>S (0.000)</b>	<b>S (0.040)</b>	NS (0.840)
64	Speedy Claim Settlement Procedure	NS (0.467)	NS (0.058)	NS (0.083)	<b>S (0.019)</b>	<b>S (0.037)</b>	NS (0.852)	<b>S (0.046)</b>	NS (0.163)	NS (0.303)
65	Simple Complaint Handling System	NS (0.061)	<b>S (0.031)</b>	NS (0.376)	NS (0.075)	<b>S (0.003)</b>	NS (0.409)	NS (0.001)	NS (0.067)	<b>S (0.005)</b>
66	Prompt Address to the Complaints	<b>S (0.008)</b>	<b>S (0.003)</b>	<b>S (0.028)</b>	<b>S (0.011)</b>	<b>S (0.000)</b>	NS (0.198)	NS (0.053)	NS (0.302)	<b>S (0.003)</b>
67	Providing Redressal for the Complaints	NS (0.186)	NS (0.196)	NS (0.117)	<b>S (0.000)</b>	<b>S (0.031)</b>	NS (0.541)	<b>S (0.004)</b>	<b>S (0.035)</b>	<b>S (0.003)</b>

The satisfaction/dissatisfaction amongst the selected medicaid policyholders of different age group, it was found to be different with regard to the selected criteria, viz., the time period for the inclusion of the pre-existing illness; coverage for the room boarding expenses; coverage of the nursing expenses; coverage of post-hospitalization expenses; free 24 hour help line facility; free general physician consultations; free health magazines; ownership type of the company public, private or the stand-alone; the awards/recognitions won by the company; reminder calls for the premium payment from agent; easy purchase from the company's website; easy purchase from company's physical office; reminders for the payment of the premium by the company; online payment of premium; regular updates made by the company; availability of choice of the hospital; prompt address to the complaints.

While, in case of the selected medicaid policyholders' of different gender was found to be different with regard to the selected criteria, viz., free medical check-up; help of the agents for switching over to the other medicaid policy (health insurance portability); regular updates made by the company; easy purchase of the individual medicaid policy; easy claim filling procedure; easy claim settlement procedure; simple complaint handling system, and prompt address to the complaints.

The satisfaction/dissatisfaction amongst the selected medicaid policyholders of different educational qualifications across the selected cities, it was found to be different for some of the selected criteria, viz., age eligibility for purchase of the policy; coverage of the various illness/diseases; coverage for the allopathic treatments; coverage for cancer; coverage of pre-hospitalization expenses; coverage of post-hospitalization expenses; tax benefits; ownership type of the company public, private or the stand-alone; disputes redressal by the company; the awards/recognitions won by the company; easy purchase from the agents; reminder calls for the premium payment from agent; help of the agents for switching over to the other medicaid policy (health insurance portability); easy purchase from company's physical office; regular updates made by the company; online checking of status for claim settlement; network of the selected hospital/s; convenience of the location of the network hospitals; availability of the medical related services at the network hospitals; availability of the cash reimbursement scheme at network hospitals; availability of the cashless facility network hospitals; easy purchase of the individual medicaid policy, and prompt address to the complaints.

However, in case of the selected medicaid policyholders with different marital status, it was found to be different for some of the selected criteria, viz., range of the premium offered by the companies; the range of the premium for the various age groups for purchase of policy; coverage of the various illness/diseases; coverage for the allopathic treatments; coverage of the nursing expenses; coverage of pre-hospitalization expenses; coverage of post-hospitalization expenses; coverage in the period of loss of income during the hospitalization; renewable discount offers; coverage for the health risk; coverage for increasing health care expenditure; free ambulance services; free 24 hour help line facility; free general physician consultations; free health magazines; family discount; ownership type of the company public, private or the stand-alone; the awards/recognitions won by the company; assistance of agent in filling of the claims; help of the agents for switching over to the other medicaid policy (health insurance portability); easy purchase from the company's website; easy purchase from company's physical office; reminders for the payment of the premium by the company; online payment of premium; regular updates made by the company; availability of choice of the hospital; easy claim filling procedure; speedy claim settlement procedure; prompt address to the complaints, and providing redressal for the complaints.

The satisfaction/dissatisfaction amongst the selected medicaid policyholders with different occupational status across the selected cities, it was found to be different with regards to the selected criteria, viz., coverage for the Ayurvedic treatments; coverage for the naturopathy treatments; coverage of pre-hospitalization expenses; coverage in the period of loss of income during the hospitalization; coverage of diagnostic material and x-rays, dialysis, chemotherapy, radiotherapy, pacemaker, artificial limbs and cost of organs and similar expenses; tax benefits; coverage for the health risk; coverage for increasing health care expenditure; free medical check-up; free 24 hour help line facility; free general physician consultations; free health magazines; family discount; ownership type of the company public, private or the stand-alone; disputes redressal by the company; the awards/recognitions won by the company; easy purchase from the agents; reminder calls for the premium payment from agent; timely collections of the premium by agent; regular updates given by the agent/s; assistance of agent in filling of the claims; assistance of agent in settlement of the claims; help of the agents for switching over to the other medicaid policy (health insurance portability); online filling of the claim; online checking of status for claim settlement; availability of the cash reimbursement scheme at network hospitals; availability of choice of the hospital; easy purchase of the individual medicaid policy; easy claim settlement procedure; speedy claim settlement procedure; simple complaint handling system; prompt address to the complaints, and providing redressal for the complaints.

While, in case of the selected medicaid policyholders with different type of family, it was found to be different with regards to some of the selected criteria, viz., the range of the premium for the various age groups for purchase of policy; coverage for the allopathic treatments; tax benefits; free ambulance services; coverage for the day care procedures; help of the agents for switching over to the other medicaid policy (health insurance portability), and network of the selected hospital/s.

The satisfaction/dissatisfaction amongst the selected medicaid policyholders of different type of annual income across the selected cities, it was found to be different for some of the selected criteria, viz., age eligibility for purchase of the policy; coverage of pre-hospitalization expenses; coverage of post-hospitalization expenses; tax benefits; coverage for the health risk; critical illness coverage; free ambulance services; free general physician consultations; free health magazines; family discount; online cashless card; the awards/recognitions won by the company; reminder calls for the premium payment from agent; timely collections of the premium by agent; regular updates given by the agent/s; assistance of agent in filling of the claims; help of the agents for switching over to the other medicaid policy (health insurance portability); easy purchase from the company's website; easy purchase from company's physical office; online claim settlements; network of the selected hospital/s; convenience of the location of the network hospitals; availability of the medical related services at the network hospitals; availability of the cashless facility network hospitals; easy purchase of the individual medicaid policy; easy claim settlement procedure; speedy claim settlement procedure, and providing redressal for the complaints.

While, in case of the selected medicaid policyholders with different numbers of dependent family members across the selected cities, it was found to be different for some of the selected criteria, viz., age eligibility for purchase of the policy; coverage in the period of loss of income during the hospitalization; renewable discount offers; provision for copayment discounts; regular updates given by the agent/s; convenience of the location of the network hospitals; easy claim settlement procedure, and providing redressal for the complaints.

However, in case of the selected medicaid policyholders with different numbers of earning family members, it was found to be different for some of the selected criteria, viz., age eligibility for purchase of the policy; broad range of the age eligibility for the renewal of the policy; the range of the premium for the various age groups for purchase of policy; coverage for the Ayurvedic treatments; coverage for the naturopathy treatments; coverage for HIV infection; coverage for cancer; the time period for the inclusion of the pre-existing illness; domiciliary hospitalization cover; renewable discount offers; provision for copayment discounts; tax benefits; coverage for the health risk; coverage for increasing health care expenditure; critical illness coverage; free ambulance services; coverage for the day care procedures; free general physician consultations; free health magazines; family discount; online cashless card; the market share of the company; ownership type of the company public, private or the stand-alone;

disputes redressal by the company; the awards/recognitions won by the company; reminder calls for the premium payment from agent; timely collections of the premium by agent; regular updates given by the agent/s; easy purchase from company's physical office; reminders for the payment of the premium by the company; online payment of premium; regular updates made by the company; online claim settlements; network of the selected hospital/s; convenience of the location of the network hospitals; availability of the medical related services at the network hospitals; availability of the cashless facility network hospitals; simple complaint handling system; prompt address to the complaints, and providing redressal for the complaints.

### Hypothesis: 6:4

There is no association between the overall expectations of the selected mediclaim policyholders' measured on the selected criteria vis-à-vis the selected mediclaim policyholders' selected background variables age; gender; educational qualifications, marital status, occupation, type of family, annual income; number of dependent family member and number of earning family member.

**Table Number 6.4:**

**Chi-square value of selected mediclaim policyholders' overall expectations measured on the selected criteria vis-à-vis selected mediclaim policyholders' background variables**

Sr. No.	Selected Criteria	'P' Value of X <sup>2</sup>								
		Age DF=20	GEN DF=04	EDU DF=12	MS DF=12	OCC DF=16	TF DF=04	AI DF=36	NDFM DF=12	NEFM DF=12
01	AEC Age Eligibility Conditions	NS (0.059)	NS (0.700)	<b>S (0.013)</b>	<b>S (0.016)</b>	NS (0.303)	NS (0.591)	<b>S (0.012)</b>	NS (0.103)	NS (0.421)
02	RP Range of Premium	<b>S (0.002)</b>	NS (0.581)	NS (0.267)	NS (0.152)	NS (0.239)	NS (0.799)	NS (0.133)	NS (0.205)	NS (0.078)
03	CID Coverage of the Illness/Diseases	NS (0.365)	<b>S (0.046)</b>	<b>S (0.001)</b>	NS (0.344)	NS (0.996)	NS (0.126)	NS (0.324)	NS (0.079)	NS (0.145)
04	CMEx Other Coverage related to the Treatment and Medical Expenses	<b>S (0.038)</b>	NS (0.127)	<b>S (0.000)</b>	<b>S (0.006)</b>	NS (0.664)	NS (0.520)	NS (0.158)	NS (0.064)	NS (0.156)
05	BeneMP Benefits of the Individual Mediclaim Policy	<b>S (0.033)</b>	NS (0.257)	<b>S (0.000)</b>	NS (0.759)	NS (0.493)	<b>S (0.002)</b>	NS (0.455)	NS (0.147)	NS (0.065)
06	PI Promotional Incentive	NS (0.134)	NS (0.487)	NS (0.761)	<b>S (0.044)</b>	NS (0.127)	<b>S (0.017)</b>	NS (0.384)	<b>S (0.018)</b>	NS (0.090)
07	ImCo Image of the Co.	NS (0.824)	NS (0.459)	NS (0.059)	NS (0.743)	NS (0.482)	NS (0.273)	NS (0.073)	NS (0.151)	NS (0.582)
08	SeAg Services provided by the Agent	<b>S (0.002)</b>	NS (0.647)	<b>S (0.001)</b>	<b>S (0.034)</b>	<b>S (0.015)</b>	NS (0.052)	<b>S (0.001)</b>	<b>S (0.030)</b>	<b>S (0.037)</b>
09	SeCo Services provided by Co.	NS (0.946)	NS (0.445)	NS (0.167)	NS (0.304)	NS (0.217)	<b>S (0.026)</b>	NS (0.106)	NS (0.476)	<b>S (0.028)</b>
10	NetH Network of the Hospital	<b>S (0.019)</b>	NS (0.877)	NS (0.399)	NS (0.628)	NS (0.122)	<b>S (0.003)</b>	NS (0.319)	NS (0.655)	NS (0.290)
11	CMPx Complexity involved in the operations	NS (0.216)	<b>S (0.039)</b>	NS (0.574)	NS (0.052)	NS (0.191)	<b>S (0.047)</b>	NS (0.463)	NS (0.372)	NS (0.249)
12	Influence of Information Sources	NS (0.089)	NS (0.262)	NS (0.195)	NS (0.249)	NS (0.482)	NS (0.363)	NS (0.733)	NS (0.067)	<b>S (0.008)</b>
13	Investment Alternatives	NS (0.546)	NS (0.229)	NS (0.223)	<b>S (0.036)</b>	<b>S (0.045)</b>	NS (0.482)	NS (0.031)	NS (0.268)	NS (0.275)

The overall expectations of the selected medicaid policyholders' of different age group, it was found to be associated with some of the selected factors, viz., range of premium, other coverage related to the treatment and medical expenses, benefits of the medicaid policy, services provided by the agent and network of the hospital. In case of the selected medicaid policyholders of different gender, it was found to be associated with regards to the selected factors, viz., coverage of the illness and diseases and complexity involves in the operations. However, in case of the selected medicaid policyholders with different educational status, it was found to be associated with some of selected factors, viz., age eligibility conditions, coverage of the illness and diseases, other coverage related to the treatment and medical expenses, benefits of the medicaid policy and services provided by the agent. In case of the selected medicaid policyholders with different marital status, their overall expectations were found to be associated with some of the selected factors, viz., age eligibility conditions, other coverage related to the treatment and medical expenses, promotional incentives, services provided by the agent, and investment alternative.

The overall expectations of the selected medicaid policyholders with different occupational status, it was found to be associated with selected factor, viz., services provided by the agent and investment alternatives. However, in case of the selected medicaid policyholders with different type of family, it was found to be associated with some of the selected factors, viz., benefits of the medicaid policy, promotional incentives, image of the company, services provided by the company, network of the hospital and complexity involved in the operations, while it was uniform with regards to all the other selected criteria. While, the overall expectations of the selected medicaid policyholders with different annual income, it was found to be associated for some of the selected criteria, viz., age eligibility conditions and services provided by the agent, while it was uniform with regards to all the other selected criteria. However, in case of selected medicaid policyholders with different numbers of the dependent family members, it was found to be associated with some of the selected factor, viz., promotional incentives and services provided by the agent. In case of the medicaid policyholders with different numbers of the earning family members, it was found to be associated with some of the selected factor, viz., services provided by the agent, services provided by the company and influence of the information sources.



### Hypothesis: 6:5

There is no association between the overall satisfaction/dissatisfaction of the selected mediclaim policyholders' measured on the selected criteria vis-à-vis the selected mediclaim policyholders' selected background variables age; gender; educational qualifications, marital status, occupation, type of family, annual income; number of dependent family member and number of earning family member.

**Table Number 6.5:**  
**Chi-square value of selected mediclaim policyholders' overall satisfaction/dissatisfaction measured on the selected criteria vis-à-vis selected mediclaim policyholders' background variables**

Sr. No.	Selected Criteria	'P' Value of X <sup>2</sup>								
		Age DF=20	GEN DF=04	EDU DF=12	MS DF=12	OCC DF=16	TF DF=04	AI DF=36	NDFM DF=12	NEFM DF=12
01	AEC Age Eligibility Conditions	NS (0.096)	NS (0.410)	<b>S (0.010)</b>	<b>S (0.001)</b>	NS (0.097)	<b>S (0.026)</b>	NS (0.052)	NS (0.452)	NS (0.209)
02	RP Range of Premium	NS (0.582)	NS (0.877)	<b>S (0.002)</b>	<b>S (0.043)</b>	NS (0.168)	NS (0.778)	<b>S (0.002)</b>	NS (0.071)	NS (0.384)
03	CID Coverage of the Illness/Diseases	NS (0.072)	NS (0.055)	NS (0.208)	NS (0.099)	NS (0.400)	NS (0.171)	<b>S (0.002)</b>	NS (0.097)	<b>S (0.049)</b>
04	CME <sub>x</sub> Other Coverage related to the Treatment and Medical Expenses	NS (0.557)	NS (0.240)	NS (0.375)	NS (0.081)	NS (0.021)	NS (0.147)	NS (0.122)	<b>S (0.011)</b>	<b>S (0.009)</b>
05	BeneMP Benefits of the Individual Mediclaim Policy	NS (0.293)	NS (0.184)	NS (0.062)	<b>S (0.007)</b>	NS (0.783)	NS (0.228)	<b>S (0.011)</b>	NS (0.326)	NS (0.265)
06	PI Promotional Incentive	<b>S (0.014)</b>	<b>S (0.020)</b>	NS (0.421)	<b>S (0.030)</b>	<b>S (0.000)</b>	<b>S (0.009)</b>	NS (0.072)	NS (0.571)	<b>S (0.007)</b>
07	ImCo Image of the Co	NS (0.894)	NS (0.103)	NS (0.859)	NS (0.495)	<b>S (0.039)</b>	<b>S (0.000)</b>	<b>S (0.002)</b>	NS (0.222)	NS (0.847)
08	SeAg Services provided by Agent	NS (0.057)	<b>S (0.020)</b>	NS (0.079)	<b>S (0.009)</b>	NS (0.303)	<b>S (0.009)</b>	NS (0.061)	NS (0.922)	<b>S (0.048)</b>
09	SeCo Services provided by the Co	NS (0.085)	NS (0.555)	<b>S (0.044)</b>	NS (0.124)	NS (0.096)	NS (0.408)	NS (0.151)	NS (0.807)	<b>S (0.006)</b>
10	NetH Network of the Hospital	NS (0.451)	NS (0.091)	<b>S (0.023)</b>	NS (0.216)	<b>S (0.040)</b>	NS (0.242)	<b>S (0.001)</b>	NS (0.515)	NS (0.207)
11	CMP <sub>x</sub> Complexity involved in the operations	<b>S (0.033)</b>	<b>S (0.001)</b>	<b>S (0.023)</b>	<b>S (0.013)</b>	NS (0.112)	NS (0.126)	<b>S (0.000)</b>	NS (0.651)	NS (0.062)
12	Influence of Information Sources	NS (0.309)	NS (0.241)	NS (0.081)	<b>S (0.012)</b>	NS (0.241)	<b>S (0.023)</b>	<b>S (0.005)</b>	NS (0.832)	<b>S (0.000)</b>
13	Investment Alternatives	NS (0.329)	NS (0.180)	NS (0.084)	<b>S (0.022)</b>	NS (0.180)	<b>S (0.041)</b>	<b>S (0.007)</b>	NS (0.722)	<b>S (0.000)</b>

In case of the overall satisfaction/dissatisfaction of the selected medicaid policyholders' of different age group, it was found to be associated with some of the selected factors, viz., promotional incentives and complexity involved in the operations. In case of the selected medicaid policyholders' of different gender, it was found to be associated with regards to the selected factors, viz., promotional incentives, services provided by the agent and complexity involved in the operations. However, in case of the selected medicaid policyholders with different educational status, it was found to be associated with some of selected factors, viz., age eligibility conditions, range of premium, services provided by the company, network of the hospital and complexity involved in the operations.

In case of the selected medicaid policyholders' with different marital status, their overall expectations were found to be associated with some of the selected factors, viz., age eligibility conditions, range of premium, benefits of the medicaid policy, promotional incentives, services provided by the agent, complexity involved in the operations, influence of the information sources and investment alternatives. In case of the overall expectations of the selected medicaid policyholders with different occupational status, it was found to be associated with selected factor, viz., promotional incentives, image of the company and network of the hospital. However, in case of the selected medicaid policyholders with different type of family, it was found to be associated with some of the selected factors, viz., age eligibility conditions promotional incentives, image of the company, services provided by the agent, influence of the information sources and investment alternative. While, the overall expectations of the selected medicaid policyholders with different annual income, it was found to be associated for some of the selected criteria, viz., viz., range of premium, coverage of the illness/diseases, benefits of the medicaid policy, image of the company, network of the hospital, complexity of the operations, influence of the information sources, and investment alternatives. However, in case of selected medicaid policyholders with different numbers of the dependent family members, it was found to be associated with some of the selected factor, viz., other coverage related to the treatment and medical expenses. In case of the medicaid policyholders with different numbers of the earning family members, it was found to be associated with some of the selected factor, viz., coverage of the illness/diseases, other coverage related to the treatment and medical expenses, promotional incentives, services provided by the agent, services provided by the company, influence of the information sources, and investment alternatives.

**Hypothesis: 6:6**

There is no association between the overall satisfaction/dissatisfaction of the selected medicaid policyholders' vis-à-vis the selected medicaid policyholders' selected background variables age; gender; educational qualifications, marital status, occupation, type of family, annual income; number of dependent family member and number of earning family member.

**Table Number 6.6:**

**Chi-square value of selected medicaid policyholders' overall satisfaction/dissatisfaction vis-à-vis selected medicaid policyholders' background variables**

Sr. No.	Selected Criteria	'P' Value of $\chi^2$								
		Age DF=20	GEN DF=04	EDU DF=12	MS DF=12	OCC DF=16	TF DF=04	AI DF=36	NDFM DF=12	NEFM DF=12
Q.13	Overall Satisfaction on the purchase of the Medicaid Policy	NS (0.859)	S (0.043)	S (0.000)	NS (0.580)	S (0.002)	NS (0.174)	S (0.017)	NS (0.268)	NS (0.083)

The overall satisfaction/dissatisfaction of the selected medicaid policyholders' of different age group, marital status, type of family, numbers of dependent family members and numbers of earning family members was found to be uniform amongst the selected medicaid policyholders across the selected cities. The overall satisfaction/dissatisfaction of the selected medicaid policyholders of different gender, educational qualification, occupational status, and annual income was found to be different.

### Hypothesis: 6:7

The intentions of the selected medicaid policyholders' concerning buying of the medicaid policy vis-à-vis the selected medicaid policyholders' selected background variables age; gender; educational qualifications, marital status, occupation, type of family, annual income; number of dependent family member and number of earning family member is equal.

**Table Number 6.7:**

**Chi-square value of selected medicaid policyholders' intentions concerning buying of the medicaid policy vis-à-vis selected medicaid policyholders' background variables**

Sr. No.	Selected Criteria	'P' Value of $\chi^2$								
		Age DF=20	GEN DF=04	EDU DF=12	MS DF=12	OCC DF=16	TF DF=04	AI DF=36	NDFM DF=12	NEFM DF=12
01	Would continue to renew the Medicaid policy	<b>S (0.021)</b>	NS (0.420)	<b>S (0.021)</b>	NS (0.130)	<b>S (0.004)</b>	<b>S (0.031)</b>	<b>S (0.001)</b>	<b>S (0.003)</b>	NS (0.195)
02	Would continue to renew the Medicaid Policy from the same company	<b>S (0.034)</b>	<b>S (0.030)</b>	<b>S (0.034)</b>	NS (0.112)	<b>S (0.001)</b>	NS (0.877)	NS (0.546)	<b>S (0.017)</b>	<b>S (0.004)</b>
03	May Consider to renew the Medicaid Policy of some other Insurance Company in view of the benefit of the Health Insurance Portability	NS (0.110)	NS (0.423)	NS (0.110)	NS (0.150)	NS (0.091)	NS (0.052)	<b>S (0.008)</b>	NS (0.565)	NS (0.073)
04	Shall recommend current insurance company to other for the buying of Medicaid	NS (0.221)	NS (0.977)	NS (0.221)	NS(0.058)	<b>S (0.008)</b>	NS (0.200)	<b>S (0.009)</b>	NS (0.160)	NS (0.119)
05	Likely to switch over from the present company of which have purchased the Medicaid Policy	NS (0.053)	NS (0.259)	NS (0.053)	<b>S (0.006)</b>	<b>S (0.044)</b>	NS (0.084)	<b>S (0.023)</b>	NS (0.455)	<b>S (0.000)</b>

The intentions of the selected medicaid policyholders' of different age group, education, occupation and numbers of dependent family members concerning buying of the medicaid policy was found to be different for some of the selected criteria, viz., to continue to renew the medicaid policy and to renew the medicaid policy from the same insurance company. In case of the selected medicaid policyholders with different gender, marital status, and number of earning family income, it was found to be different only for the selected criteria, viz., continue to renew the medicaid policy from the same insurance company. However, the intentions of the selected medicaid policyholders' of different occupational status and annual income, it was found to be different for all the selected criteria, except the selected criteria, viz., Consideration to renew the Medicaid Policy of some other Insurance Company in view of the benefit of the health insurance portability and would continue to renew the medicaid policy from the same insurance company, respectively. While, in case of the selected medicaid policyholders with different numbers of the earning family members, it was found to be different for some of the selected criteria, viz., would continue to renew the Medicaid Policy from the same company and would like to renew the medicaid policy.

#### **6.2.1 IMPLICATIONS OF THE RESEARCH STUDY BASED ON THE CHI-SQUARE:**

- An understanding was provided by the research study on the basis of confirmatory evidence to the health insurance marketers that the medicaid policyholders of different age, education, occupation, type of family, number of dependent family members and number of earning family members had similar beliefs about their health status. However, the beliefs vary with the gender, marital status and annual family income which may influence their health insurance buying decision. Hence, due consideration of these demographic variables in designing marketing differentiation strategy shall be given by the health insurance marketers which will assist them in attracting and convincing the target market of the medicaid policy market.
- Moreover, in terms of the beliefs about the medicaid policyholders on the benefits of the general insurance, the research study provides the confirmatory evidence to the medicaid marketers about its strategy implication in determining the common rational positioning strategy for the market offering, targeted to the policyholders of similar demographic variables, viz., age, gender, type of family, annual family income and number of dependent family members.
- The research study provides the confirmatory evidence to the health insurance marketers to consider differentiation strategy while persuading the medicaid policyholders with different number of earning family members as their attitudes pertaining to the buying of the medicaid policy is different. However, the common attitudes towards the buying of the policy were reported among the medicaid policyholders of different gender and education which offers liberty to the health insurance marketers to apply the dual strategy that is differentiation or the common positioning strategy.

- It can be inferred from the findings of the research study that the perceived importance pertaining to the age eligibility for the purchase of the policy has to be determined by insurance companies considering the selected demographic factors, viz., age, marital status and annual family income. It implies that insurance companies may introduce broader eligibility conditions for the enrollment to the mediclaim plan involving age, marital status and annual family income.
- In case of the range of premium, the expectations of the selected mediclaim policyholders were found as significantly related to the education, type of family, annual family income and number of earning family income respectively. This implies the importance of the education and the gross income family of the mediclaim policyholders to be considered by the insurance companies offering mediclaim products. The upper limit and the lower limit of the premium under the particular mediclaim plan shall be thus customized by the mediclaim marketers as per their gross family income directly. At the same time, as the mediclaim policyholders with different education evaluate the availability of the range of premium differently, its consideration by the insurance companies is inevitable.
- Also, the research study provides the confirmatory evidence to the mediclaim marketers on following the similar features in the mediclaim plan as offered in the selected cities of the Gujarat State, pertaining to the coverage for the Ayurvedic treatments is concerned as the perceived importance in the context of the selected background variables in this context is found to insignificant, except for the type of the family. It implies that the Ayurvedic medical care is less preferred, less popular, or less expensive to the selected mediclaim policyholders in the selected cities of the Gujarat State. However, insurance companies while providing the coverage for the allopathic treatments should give due importance to the selected demographic variables, viz., age, education, marital status, type of family, annual family income and the number of earning family members as the expectations of the selected mediclaim policyholders were found to be dependent on these variables. It implies that the requirements of the mediclaim policyholders for the allopathic health care vary with the age, marital status and type of family; their evaluation differs with the education as well as their paying ability or the disposable income for the health care varies with the type of family, annual family income, and number of earning family members which must also be given due consideration by the mediclaim policy marketers to attract higher share of the mediclaim market in the selected cities of the Gujarat State.
- The findings of the research study also confirms the feature of the pre-existing illness as offered by the mediclaim companies as the expectations of the selected mediclaim policyholders' were found to be insignificant with the selected demographic variables except for occupation and number of dependent family member.

- The findings on the perceived importance of the medicaid policyholders of the selected cities in the Gujarat State pertaining to the coverage of room boarding expenses; domiciliary hospitalization cover; provision of giving surgeon, anesthetist, medical practitioner, renewable discount offers and provision for copayment discounts in the context of the only selected background variables, viz., annual family income; gender; gender; number of earning family members and education, respectively was found to be significant, and it was insignificant for all the other selected demographic variables. This implies that the medicaid policy marketers may follow the uniform features in the medicaid plan to be offered with the minor modifications as per their respective influence of the demographic variables. The features of the medicaid plan pertaining to the coverage of the post hospitalization expenses has to be altered and customized as per the occupation, type of family, annual family income, number of dependent family member and number of earning family members, as the requirement of the coverage may vary accordingly, which must be taken care by the medicaid policy marketers.
- In case of the benefits offered by the medicaid plan, the findings of the research study revealed that the perceived importance relied on the features of tax benefits by the medicaid policyholders of the selected cities of Gujarat State were significantly dependent on the selected demographic factors, viz., age, education, type of family and annual family income. However, the tax benefits as regulated under section 80 D of the Income Tax Act 1964, the health insurance marketers are unable to introduce any innovative features in this context. It has critical policy implication too on the Government with the limited public health care expenditure and the cap on the provision for the private health care expenditure in terms of the deduction of fixed limited amount, also restricts the medicaid policyholders to raise their provision of health care in terms of the medicaid premium.
- The research study provides the confirmatory evidence in case of the perceived importance pertaining to the free medical check-up; free ambulance services, free general physician consultations were independent in the context of all the selected demographic variables except for occupation, and number of earning family members amongst the selected medicaid policyholders in the selected cities of the Gujarat State. The medicaid marketers are required to customize the promotional offers in the context of the coverage for the day care procedure, free 24 hour help line facility and family discounts offers too, as the expectations thereon were found to be dependent on some of the demographic variables as the case may be. It provides the strategic implications to tap the gap of attracting the prospects and re-think on introducing the promotions incentives packages pertaining to the specific medicaid product of the insurance company.

- The age was found to be influencing the perceived importance of the selected medicaid policyholders pertaining to the reminders calls for the payment of premium; assistance of the agent in filling of the claims and availability of the choice of the hospitals. While, the perceived importance was found to be different with education in terms of the agents' service of collection of premium; assistance in filling and settlement of the claims; regular updates by the company; availability of choice of the hospitals and, ease in buying of the medicaid policy which offers the strategic implication to the medicaid marketers while providing these services to the selected medicaid policyholders in the selected cities of the Gujarat State. The health insurance marketers need to consider the marital status of the medicaid policyholders in case of the purchase of the policy from the physical office of the company; online payment of the premium, and claim settlement; network of the selected hospitals and availability of the cash reimbursement scheme, availability of the choice of the hospital respectively.
- The occupation of the medicaid policyholders has to be considered by the medicaid marketers while offering the services of timely collection of the premium and regular updates by the agents; online payment of the premium; convenience of the location of the network hospitals, and cash reimbursement facility at the network hospital; as the availability of the time, recalling capacity, work schedules, work responsibilities, etc., may vary with the occupation of the medicaid policyholders in the selected cities of the Gujarat State.
- The perceived importance of the selected medicaid policyholders in the context of type of family, pertaining to the assistance of the agent in claim settlement; ease in purchase of the policy online and through physical office; network of the selected hospitals and choice of the hospital; availability of cashless and cash reimbursement facility and ease in buying medicaid policy, in the selected cities of Gujarat State was significant. It provides the strategic implication to the medicaid policy marketers. The demographic factors, viz., annual family income, number of dependent family member and number of earning family members need to be considered by the medicaid policy marketers to determine the services of easy purchase from the agents, reminders from the agents, assistance in claim settlement, cash reimbursement and cashless facility at the network hospital; cash reimbursement facility, choice of the network hospital and redressal of the complaints; assistance of the agent in claim settlement, convenience of the network hospital and ease in claim settlement, respectively, in the selected cities of the Gujarat State.
- The research study provided evidence to the health insurance marketers to consider the demographic factors, viz., annual family income, number of dependent family members and number of earning family members as the satisfaction/dissatisfaction of the medicaid policyholders' variable in this context on age eligibility for the purchase & the renewal of the policy.



It implies that the annual family income and the number of the earning family members of the medicaid policyholders in the selected cities of Gujarat State in accordance with their age may find the age eligibility for the enrollment with respect to its premium restrictive to enroll for the medicaid policy. Moreover, higher number of the dependent family members may impose the higher burden of the health care expenditure, undoubtedly, which gets intensified in the case of the senior citizen as the dependent family members with the fact of the limited age range for renewal of the medicaid policy and higher premium with the elderly age. The health insurance marketers should consider this reality to offer innovative packages pertaining to the age aspects and thereby satisfy the selected medicaid policyholders of the selected cities of the Gujarat State.

- In case of the range of premium, the satisfaction/dissatisfaction of the selected medicaid policyholders were significantly related to the marital status, type of family and number of earning family members which implies that the relevant reference groups the relevant others in the family has the capacity to influence the satisfaction/dissatisfaction of the medicaid policyholder.
- Moreover, the range of the premium as offered by the insurance company in term of the upper and lower limit of the premium under the particular medicaid plan can be customized by the medicaid marketers as it also coincides with the expectations of the selected medicaid policyholders in the selected cities of Gujarat State.
- The health insurance marketers should not ignore the demographic factor, viz., education, marital status and type of family in determining the coverage for the various illness/diseases and allopathic treatments. In case of the coverage of HIV infection and Cancer, they should emphasize on the number of earning family members that influences the satisfaction/dissatisfaction of the selected medicaid policyholders. They should also consider age and number of earning family members in determining the time-period for the inclusion of the pre-existing illness. Moreover, with the introduction of the health insurance portability, they need to pay extra attention to this feature that might affect switching from the one insurance company to the other being the key reason influencing the satisfaction/dissatisfaction of the selected medicaid policyholders.
- The age of the medicaid policyholders affects the satisfaction/dissatisfaction pertaining to the coverage for the room boarding expenses, nursing expenses and post-hospitalization expenses, as with increasing age the probability of an individual to avail hospitalized health care increases. The policyholders with different education and marital status were found to be evaluating the coverage for pre-hospitalization and the post-hospitalization differently implying different experience on buying the medicaid policy which must be noted by the medicaid policy marketers. Moreover, marital and occupational status of the medicaid policyholder also influences their experiences pertaining to the coverage in the period of the loss of income during hospitalization.

While introducing the renewal discounting offers, the medicaid marketers should consider marital status, number of dependent and earning family members of the selected medicaid policyholders.

- The medicaid policy marketers' seriously need to consider education, occupation, type of family, annual family income and number of dependent family members of the selected medicaid policyholders.
- The medicaid policy marketers can offer customized promotional incentives to the medicaid policyholders.
- The medicaid policy marketers need to emphasize on image of the company considering the demographic factors of the medicaid policyholders.
- The medicaid policy marketers should consider the ease of purchase of the medicaid plan from the agents considering education and occupation of the medicaid policyholders.
- The medicaid policy marketers need to emphasize on age, education, occupation and annual family income providing the services of reminding about the premium payment by the agents.
- The medicaid policy marketers must learn to consider its various clauses and accept the fact of liberty of the medicaid policyholders of switching to another insurance company. Therefore, the insurance companies are required to educate and train their insurance agents to provide the required services of switching after the trial of retaining the medicaid policyholders.
- The medicaid policyholders with different educational status evaluate the services of the network hospitals and its selected aspects differently which implies that the medicaid policyholders are concerned about the health care expenditure as well as the coverage of the health expenditure in the context of the medicaid plan and the available share of income.
- The medicaid policyholders' experience pertaining to the complexity of the operations involved are found to be different gender wise which indicates that the medicaid marketers need to grab opportunity of introducing the specific assistance gender wise.
- The perceived importance of the medicaid policyholders in the context of services provided by the agents are found to be influenced by most of the demographic factors except gender and type of family. It implies that promotional incentives, complexity involved in the operations and services provided by the agents need to be accorded more attention by the medicaid policy marketers.
- In case of the overall satisfaction of the selected medicaid policyholders in the selected cities of the Gujarat State, pertaining to the buying of the medicaid policy, the research study provides the confirmatory evidence to the health insurance marketers to consider the demographic factors, viz., gender, education, occupation and annual family income, for determining the value proposition of the medicaid plan to be offered to the medicaid policy market in the selected cities of the Gujarat State.

- Moreover, the customization of the benefits/features of the mediclaim plan on the basis of these demographic factors may enable the health insurance marketers to gain satisfaction of the larger number of the mediclaim policyholders in the selected cities of Gujarat State. However, the findings of the research study also implies the reconsideration of the utmost importance relied on the age factor by the mediclaim policy marketers amongst the other demographic factors of the mediclaim policy holders in the selected cities of the Gujarat State.
- The buying intentions of the mediclaim policyholders are influenced by their occupation and annual family income which implies that the renewal decisions of the mediclaim policyholders are influenced by the demographic factors which shall be considered by the health insurance marketers. Also, in order to attract the likely policy switchers, they can present the comparative analysis of the benefits offered by the policies to the prospective policyholders online or by including it in the policy brochure.

### 6.3 ONE WAYANNOVA FOR OPINION OF THE MEDICLAIM POLICYHOLDERS ON SELECTED FACTORS FOR SELECTION OF THE MEDICLAIM POLICY IN THE SELECTED CITIES OF GUJARAT STATE:

(Abbreviations used in following tables are, AEC = Age Eligibility Conditions, RP = Range of Premium, CID = Coverage of Illness and Diseases, CMEx = Coverage of Medical Expenses, BeneMP = Benefits of Mediclaim Policy, PI = Promotional Incentives, ImCo = Image of the Insurance Company, SeAg = Services provided by the Insurance Agents, SeCo = Services provided by the Insurance Companies, NetH= Network of Hospitals, CMPx = Complexity in the Rules and Regulations; SD = Standard Deviation; SE = Standard Error)

#### 6.3.1:One Way Annona for Opinion of the Mediclaim Policyholders’ on AEC Factor for Selection of the Mediclaim Policy in the Selected Cities of Gujarat State

##### Hypothesis: 6:8

Mean of the opinion of the selected mediclaim policyholders’ of selected cities on AEC factor for selection of the Mediclaim Policy is equal and alternative hypothesis is at least one mean is different from other.

**Table Number 6.8**  
**Descriptive Statistics for Opinion of the Mediclaim Policyholders’ on AEC factor for Selection of the Mediclaim Policy in the Selected Cities of Gujarat State**

Type of Cities	N	Mean	SD	SE
Vadodara	517	3.7099	0.79116	0.03480
Ahmedabad	400	3.6638	0.79633	0.03982
Surat	286	3.3304	0.77465	0.04581
Rajkot	260	3.8327	0.86986	0.05395
<b>Total</b>	<b>1463</b>	<b>3.6449</b>	<b>0.81989</b>	<b>0.02144</b>

The highest mean value is of Rajkot city followed by the mean values of Vadodara, Ahmedabad and Surat cities respectively.

**Table Number 6.9**  
**Test of Homogeneity of Variances for Opinion of the Mediclaim Policyholders’ on AEC factor for Selection of the Mediclaim Policy in the Selected Cities of Gujarat State**

Levene’s Statistic	df1	df2	Sig.
0.965	3	1459	<b>0.408</b>

The above table indicates the Levene’s test of homogeneity of variance through which verification can be done about the equality of variance of the opinion of the selected mediclaim policyholders of all the selected cities of Gujarat State. Its results had shown non-significant value (0.408) which is greater than 0.05. It means that our null hypothesis is accepted as the significant value exceeds 0.05.

### Analysis of Variance:

**Table Number 6.10**  
**ANOVA Table for Opinion of the Medclaim Policyholders' on AEC factor for Selection of the Medclaim Policy in the Selected Cities of Gujarat State**

	Particulars	Sum of Squares	Df	Mean Square	F	Sig.
Q_11B_AEC	Between Groups	39.778	3	13.259	20.515	0.000
	Within Groups	943.002	1459	.646		
	Total	982.780	1462			

The variation between the groups of selected cities is 39 and within group the variation is 943. The variation within groups was higher than variation between groups of the selected cities. According to null hypothesis variance of all groups was equal, and our alternative hypotheses states that at least one variance is different from other. Null hypotheses is rejected because of significance value (0.000) is < 0.05 that means at least the opinion of the selected medclaim policyholders of one selected city is different to the other selected city.

### Post Hoc Test (Tamhane):

**Table Number 6.11**  
**Multiple Comparisons for Opinion of the Medclaim Policyholders' on AEC factor for Selection of the Medclaim Policy in the Selected Cities Through Tamhane Test**

Selected Cities		Mean Difference	SE	Sig.
Vadodara	Vadodara			
	Ahmedabad	0.04611	0.05288	0.945
	Surat	0.37945	0.05752	<b>0.000</b>
Ahmedabad	Rajkot	-0.12283	0.06419	0.294
	Vadodara	-0.04611	0.05288	0.945
	Ahmedabad			
Surat	Surat	0.33333	0.06069	<b>0.000</b>
	Rajkot	-0.16894	0.06705	0.070
	Vadodara	-0.37945	0.05752	<b>0.000</b>
Rajkot	Ahmedabad	-0.33333	0.06069	<b>0.000</b>
	Surat			
	Rajkot	-0.50227	0.07077	<b>0.000</b>
	Vadodara	0.12283	0.06419	0.294
	Ahmedabad	0.16894	0.06705	0.070
	Surat	0.50227	0.07077	<b>0.000</b>
	Rajkot			

Based on test of homogeneity of variance, it can be verified whether variance of all the four selected cities is equal. However, ANOVA table indicated that mean of the selected cities for the selected factor AEC is not equal. Therefore, the Post-Hoc test is applied by assuming unequal variance. The opinion of the selected medclaim policyholders' for the purchase of the medclaim policy for AEC factor in Surat city was different from that of the selected medclaim policyholders of Vadodara, Ahmedabad and Rajkot cities because the significant value in all of these cases were < 0.05 with the other selected cities.

## Post Hoc Test (Tukey HSD)

**Table Number 6.12**

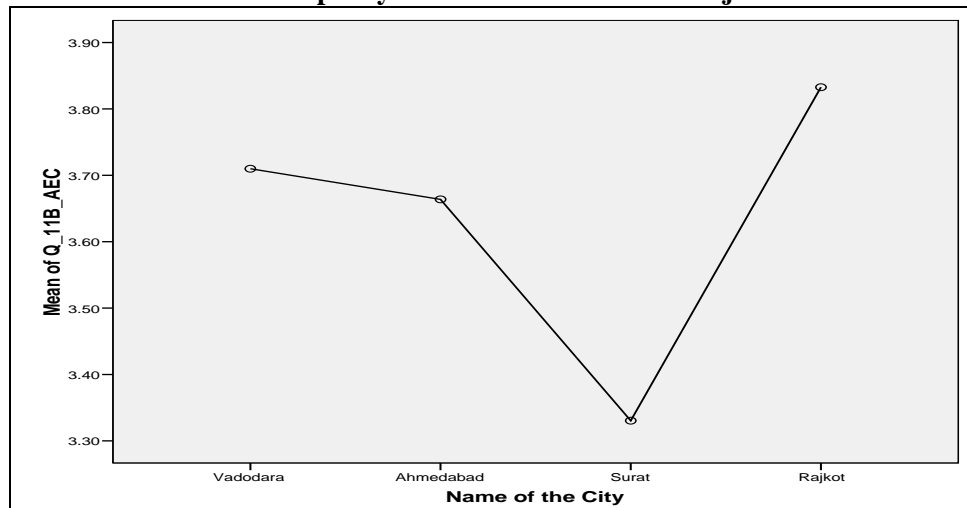
**Multiple Comparisons of for Opinion of the Medclaim Policyholders' on AEC factor for Selection of the Medclaim Policy in the Selected Cities Through Tukey HSD Test**

Name of the City	N	Subset for alpha = 0.05		
		1	2	3
Surat	286	3.3304		
Ahmedabad	400		<b>3.6638</b>	
Vadodara	517		<b>3.7099</b>	<b>3.7099</b>
Rajkot	260			<b>3.8327</b>
Sig.		1.000	0.878	0.192

From the above table it becomes clear that the opinion of the medclaim policyholders of the Surat city makes different group on the AEC factor while, the opinion of the selected medclaim policyholders on AEC factor for the purchase of the medclaim policy in the cities of Vadodara and Ahmedabad as well as of Vadodara and Rajkot forms two different groups. Following graph also shows through Means Plot show the opinion of the selected policy holders on AEC factor for the selection of the medclaim policy in the selected cities are different.

**Graph Number 6.1:**

**Means Plots of opinion of the selected medclaim policy holders' on AEC factor for the selection of the medclaim policy in the selected cities of Gujarat State**



Above graph indicates different means for the opinion of the selected medclaim policyholders' on AEC factor of selection of the medclaim policy which was 3.70 for Vadodara, 3.66 for Ahmedabad, 3.33 for Surat and 3.83 for Rajkot. Thus, the mean values are in the range of lowest mean value of Surat 3.33 and the highest mean value 3.83 of Rajkot. So, on the basis of the means plot, it becomes clear that opinion of the selected medclaim policyholders in all the four selected cities on AEC factor for the purchase of the Medclaim Policy is more or less similar except Surat.

### 6.3.2: One Way Anova for Opinion of the Medclaim Policyholders' on RP Factor for Selection of the Medclaim Policy in the Selected Cities of Gujarat State

#### Hypothesis: 6:9

Mean of the opinion of the selected medclaim policyholders' of selected cities on RP factor for selection of the Medclaim Policy is equal and alternative hypothesis is at least one mean is different from other.

**Table Number 6.13**  
**Descriptive Statistics for Opinion of the Medclaim Policyholders' on RP factor for Selection of the Medclaim Policy in the Selected Cities of Gujarat State**

Name of Cities	N	Mean	SD	SE
Vadodara	517	3.6325	0.78340	0.03445
Ahmedabad	400	3.6300	0.79115	0.03956
Surat	286	3.4231	0.78429	0.04638
Rajkot	260	3.8808	0.97121	0.06023
<b>Total</b>	1463	3.6350	0.83305	0.02178

The highest mean value is of Rajkot city followed by the mean values of Vadodara, Ahmedabad and Surat cities.

**Table Number 6.14**  
**Test of Homogeneity of Variances for Opinion of the Medclaim Policyholders' on RP factor for Selection of the Medclaim Policy in the Selected Cities of Gujarat State**

Levene's Statistic	df1	df2	Sig.
7.433	3	1459	<b>0.000</b>

The above table indicates the Levene's test of homogeneity of variance through which verification can be done about the equality of variance of all the selected cities. Its results had shown that the significant value (0.000) which is less than 0.05. It means that alternative hypothesis be accepted. It means variance of at least one groups is different from the other.

#### Analysis of Variance:

**Table Number 6.15**  
**ANOVA Table for Opinion of the Medclaim Policyholders' on RP factor for Selection of the Medclaim Policy in the Selected Cities of Gujarat State**

	Particulars	Sum of Squares	Df	Mean Square	F	Sig.
Q_11B_RP	Between Groups	28.563	3	9.521	14.088	<b>0.000</b>
	Within Groups	986.026	1459	0.676		
	Total	1014.588	1462			

The variation between the groups of selected cities is 28 and within group the variation is 986. The variation within groups was higher than variation between groups of the selected cities. According to null hypothesis variance of all groups was equal and our alternative hypotheses states that at least one variance is different from other. As alternative hypotheses is accepted because of significance value (0.000) is < 0.05 that means at least mean of one of selected city is different from the other selected cities.

### Post Hoc Test (Tamhane):

**Table Number 6.16**  
**Multiple Comparisons for Opinion of the Mediclaim Policyholders' on RP factor for Selection of the Mediclaim Policy in the Selected Cities Through Tamhane Test**

Selected Cities		Mean Difference	SE	Sig.
Vadodara	Vadodara			
	Ahmedabad	0.00250	0.05246	1.000
	Surat	0.20942	0.05777	<b>0.002</b>
Ahmedabad	Rajkot	-0.24827	0.06939	<b>0.002</b>
	Vadodara	-0.00250	0.05246	1.000
	Ahmedabad			
Surat	Surat	0.20692	0.06096	<b>0.004</b>
	Rajkot	-0.25077	0.07206	<b>0.003</b>
	Vadodara	-0.20942	0.05777	<b>0.002</b>
Rajkot	Ahmedabad	-0.20692	0.06096	<b>0.004</b>
	Surat			
	Rajkot	-0.45769	0.07602	<b>0.000</b>
	Vadodara	0.24827	0.06939	<b>0.002</b>
	Ahmedabad	0.25077	0.07206	<b>0.003</b>
	Surat	0.45769	0.07602	<b>0.000</b>
	Rajkot			

Based on test of homogeneity of variance, it can be verified whether it becomes clear that variance of all the four selected cities is equal or not? It means that at least one variance is different to that of the other city/cities. However, ANOVA table indicated that mean of the selected cities for the selected factor RP is not equal. Therefore, the Post-Hoc test is applied by assuming unequal variance. The opinion of the selected mediclaim policyholders' for the purchase of the mediclaim policy for RP factor in Vadodara city was different from that of the opinion of the selected mediclaim policyholders of Surat and Rajkot cities. Similarly, the opinion of the selected mediclaim policyholders in Ahmedabad city are different from that of opinion of the selected mediclaim policyholders of Surat and Rajkot cities. While, the opinion of the selected mediclaim policyholders' for RP factor for the purchase of mediclaim policy in the Surat and Rajkot cities were different from the opinion of the selected mediclaim policyholders of the cities of Vadodara and Ahmedabad. This is due to the significant value in all of these cases is  $< 0.05$  in comparison to the other selected cities.

### Post Hoc Test (Tukey HSD)

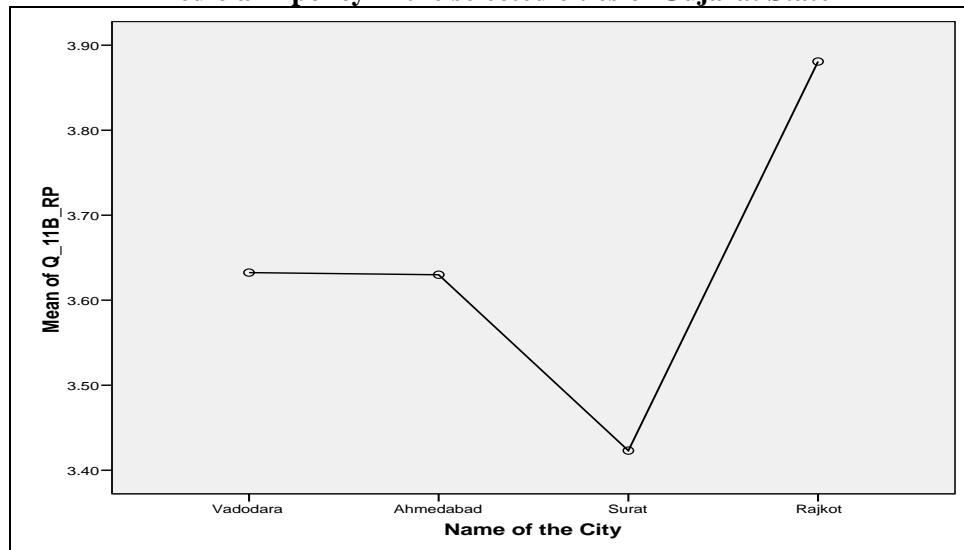
**Table Number 6.17: Multiple Comparisons of for Opinion of the Mediclaim Policyholders' on RP factor for Selection of the Mediclaim Policy in the Selected Cities Through Tukey HSD Test**

Name of the City	N	Subset for alpha = 0.05		
		1	2	3
Surat	286	3.4231		
Ahmedabad	400		<b>3.6300</b>	
Vadodara	517		<b>3.6325</b>	
Rajkot	260			3.8808
Sig.		1.000	1.000	1.000



From the above table, it becomes clear that the selected mediclaim policyholders of Surat and Rajkot cities make different group of the opinion on the RP factor for the purchase of mediclaim policy, while, the opinion of the selected mediclaim policyholders on RP factor for the purchase of the mediclaim policy of Vadodara and Ahmedabad cities forms another groups. Following graph also shows through Means Plot how the opinion of the selected mediclaim policyholders on RP factor for the selection of the mediclaim policy in the selected cities are different.

**Graph Number 6.2**  
**Means Plots of opinion of the selected policy holders' on RP factor for the selection of the mediclaim policy in the selected cities of Gujarat State**



Above graph indicates different means for the opinion of the selected mediclaim policyholders' on RP factor for the selection of the mediclaim policy, which was 3.63 for Vadodara and Ahmedabad, 3.42 for Surat and 3.88 for Rajkot. Thus, the means values are in the range of lowest mean value of Surat 3.42 and the highest mean value 3.88 of Rajkot. So, on the basis of the means plot it becomes clear that opinion of the selected mediclaim policyholders in the cities of Vadodara and Ahmedabad were similar, while that of the selected mediclaim policyholders in the cities of Surat and Rajkot were different.

### **6.3.3: One Way Annova for Opinion of the Mediclaim Policyholders' on CID Factor for Selection of the Mediclaim Policy in the Selected Cities of Gujarat State**

#### **Hypothesis: 6:10**

Mean of the opinion of the selected mediclaim policyholders' of selected cities on CID factor for selection of the Mediclaim Policy is equal and alternative hypothesis is at least one mean is different from other.

**Table Number 6.18**  
**Descriptive Statistics for Opinion of the Medclaim Policyholders' on CID factor for Selection of the Medclaim Policy in the Selected Cities of Gujarat State**

<b>Name of the City</b>	<b>N</b>	<b>Mean</b>	<b>SD</b>	<b>SE</b>
Vadodara	517	3.2545	0.65816	0.02895
Ahmedabad	400	3.1696	0.67322	0.03366
Surat	286	3.0190	0.57933	0.03426
Rajkot	260	3.2610	0.59819	0.03710
<b>Total</b>	<b>1463</b>	<b>3.1864</b>	<b>0.64310</b>	<b>0.01681</b>

The highest mean value is of Rajkot city followed by the mean values of Vadodara, Ahmedabad and Surat cities.

**Table Number 6.19**  
**Test of Homogeneity of Variances for Opinion of the Medclaim Policyholders' on CID factor for Selection of the Medclaim Policy in the Selected Cities of Gujarat State**

<b>Levene's Statistic</b>	<b>df1</b>	<b>df2</b>	<b>Sig.</b>
2.656	3	1459	<b>0.047</b>

The above table indicates the Levene's test of homogeneity of variance through which verification can be done about the equality of variance of the opinion of the selected medclaim policyholders and the results of Levene's test showed that the significant value (0.047) which was less than 0.05. It means that the alternative hypothesis be accepted. It means variance of at least one groups is unequal.

#### **Analysis of Variance:**

**Table Number 6.20**  
**ANOVA Table for Opinion of the Medclaim Policyholders' on CID factor for Selection of the Medclaim Policy in the Selected Cities of Gujarat State**

	<b>Particulars</b>	<b>Sum of Squares</b>	<b>Df</b>	<b>Mean Square</b>	<b>F</b>	<b>Sig.</b>
Q_11B_CID	Between Groups	11.972	3	3.991	9.824	<b>0.000</b>
	Within Groups	592.682	1459	0.406		
	Total	604.654	1462			

The variation between the groups of selected cities was 11 and within group the variation was 592. The variation within groups is higher than variation between groups of the selected cities. According to null hypothesis, variance of all groups was equal and alternative hypotheses states that at least one variance is different from other. The alternative hypotheses be accepted because of significance value (0.000) is < 0.05 that means at least mean of one selected city is different from the other selected cities.

### Post Hoc Test (Tamhane):

**Table Number 6.21**  
**Multiple Comparisons for Opinion of the Mediciam Policyholders' on CID factor for Selection of the Mediciam Policy in the Selected Cities Through Tamhane Test**

Selected Cities		Mean Difference	SE	Sig.
Vadodara	Vadodara			
	Ahmedabad	0.08485	0.04439	0.294
	Surat	0.23551	0.04485	<b>0.000</b>
	Rajkot	-0.00650	0.04705	1.000
Ahmedabad	Vadodara	-0.08485	0.04439	0.294
	Ahmedabad			
	Surat	0.15066	0.04803	<b>0.011</b>
	Rajkot	-0.09135	0.05009	0.348
Surat	Vadodara	-0.23551	0.04485	<b>0.000</b>
	Ahmedabad	-0.15066	0.04803	<b>0.011</b>
	Surat			
	Rajkot	-0.24201	0.05050	<b>0.000</b>
Rajkot	Vadodara	0.00650	0.04705	1.000
	Ahmedabad	0.09135	0.05009	0.348
	Surat	0.24201	0.05050	<b>0.000</b>
	Rajkot			

Based on test of homogeneity of variance, it can be verified whether variance of all the four selected cities equal or not? It means that at least one variance is different to that of the other city/cities. However, ANOVA table indicated that mean of the selected cities for the selected factor CID is not equal. Therefore, the Post-Hoc test is applied by assuming unequal variance. The opinion of the selected mediclaim policyholders' on CID factor for the purchase of mediclaim policy in Surat city were different from the opinion of the selected respondents of the cities of Vadodara, Ahmedabad as well as Rajkot because the significant value in all of these cases is  $< 0.05$  with the other selected cities.

### Post Hoc Test (Tukey HSD)

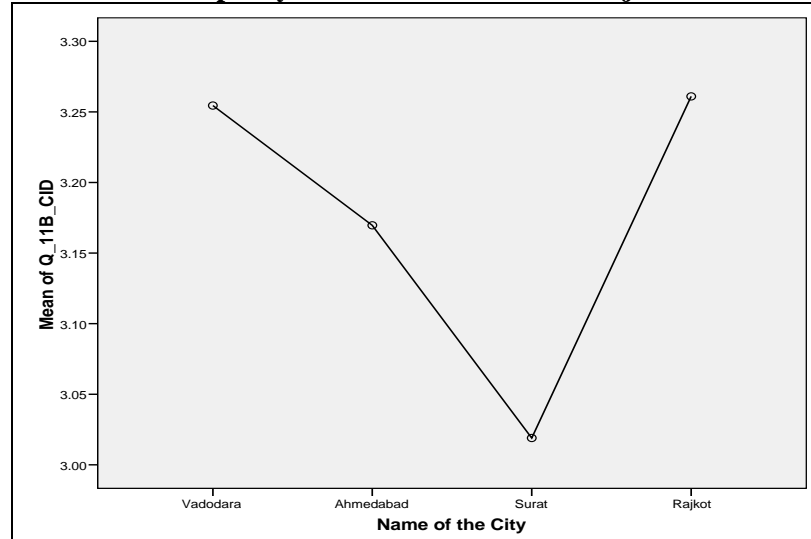
**Table Number 6.22**  
**Multiple Comparisons of for Opinion of the Mediciam Policyholders' on CID factor for Selection of the Mediciam Policy in the Selected Cities Through Tukey HSD Test**

Name of the City	N	Subset for alpha = 0.05		
		1	2	3
Surat	286	3.0190		
Ahmedabad	400		<b>3.1696</b>	
Vadodara	517		<b>3.2545</b>	
Rajkot	260		<b>3.2610</b>	
Sig.		1.000	<b>2.242</b>	

From the above table it becomes clear that the selected mediclaim policyholders of Surat form different group of opinion on the CID factor for the purchase of mediclaim policy, while the opinion of the selected mediclaim policyholders on CID factor for the purchase of the mediclaim policy of Vadodara, Ahmedabad and Rajkot cities forms another groups.

Following graph also shows through Means Plot how the opinion of the selected policy holders on **CID** factor for the selection of the mediclaim policy in the selected cities are different.

**Graph Number 6.3**  
**Means Plots of opinion of the selected policy holders' on CID factor for the selection of the mediclaim policy in the selected cities of Gujarat State**



Above graph indicates different means for the opinion of the selected mediclaim policyholders' on **CID** factor for selection of the mediclaim policy, which is 3.25 for Vadodara, 3.17 for Ahmedabad, 3.02 for Surat and 3.26 for Rajkot. Thus, the means values are in the range of lowest mean value of Surat 3.02 and the highest mean value 3.26 of Rajkot. So, on the basis of the means plot it becomes clear that opinion of the selected mediclaim policyholders in all the selected cities, except Surat city, on CID factor for the purchase of the Mediclaim Policy is more or less similar.

#### **6.3.4: One Way Annova for Opinion of the Mediclaim Policyholders' on CMEx Factor for Selection of the Mediclaim Policy in the Selected Cities of Gujarat State**

**Hypothesis: 6:11**

Mean of the opinion of the selected mediclaim policyholders' of selected cities on CMEx factor for selection of the Mediclaim Policy is equal and alternative hypothesis is at least one mean is different from other.

**Table Number 6.23**  
**Descriptive Statistics for Opinion of the Mediclaim Policyholders' on CMEx factor for Selection of the Mediclaim Policy in the Selected Cities of Gujarat State**

Name of the City	N	Mean	SD	SE
Vadodara	517	3.4397	0.66253	0.02914
Ahmedabad	400	3.4310	0.63502	0.03175
Surat	286	3.1807	0.59202	0.03501
Rajkot	260	3.6718	0.56489	0.03503
<b>Total</b>	<b>1463</b>	<b>3.4279</b>	<b>0.64220</b>	<b>0.01679</b>

The highest mean value is of Rajkot city followed by the mean values of Vadodara, Ahmedabad and Surat cities.

**Table Number 6.24****Test of Homogeneity of Variances for Opinion of the Medclaim Policyholders' on CMEx factor for Selection of the Medclaim Policy in the Selected Cities of Gujarat State**

Levene's Statistic	df1	df2	Sig.
6.487	3	1459	0.000

The above table indicates the Levene's test of homogeneity of variance through which verification can be done about the equality of variance of the opinion of the selected medclaim policyholders of all the selected cities. The results of Levene's test showed that the significant value (0.000) which is less than 0.05. It means that our alternative hypothesis be accepted. It means variance of at least one group is unequal.

**Analysis of Variance:****Table Number 6.25****ANOVA Table for Opinion of the Medclaim Policyholders' on CMEx factor for Selection of the Medclaim Policy in the Selected Cities of Gujarat State**

	Particulars	Sum of Squares	Df	Mean Square	F	Sig.
Q_11B_CMEx	Between Groups	33.026	3	11.009	28.182	<b>0.000</b>
	Within Groups	569.927	1459	0.391		
	Total	602.953	1462			

The variation between the groups of selected cities was 33 and within group the variation was 569. The variation within groups was higher than variation between groups of the selected cities. According to null hypothesis variance of all groups was equal, and the alternative hypotheses states that at least one variance is different from other. The alternative hypotheses be accepted because of significance value (0.000) is  $< 0.05$ , that means at least mean of one selected city is different from the other selected cities.

**Post Hoc Test (Tamhane):****Table Number 6.26****Multiple Comparisons for Opinion of the Medclaim Policyholders' on CMEx factor for Selection of the Medclaim Policy in the Selected Cities Through Tamhane Test**

Selected Cities		Mean Difference	SE	Sig.
Vadodara	Vadodara			
	Ahmedabad	0.00867	0.04309	1.000
	Surat	0.25906	0.04555	<b>0.000</b>
	Rajkot	-0.23208	0.04557	<b>0.000</b>
Ahmedabad	Vadodara	-0.00867	0.04309	1.000
	Ahmedabad			
	Surat	0.25039	0.04726	<b>0.000</b>
	Rajkot	-0.24075	0.04728	<b>0.000</b>
Surat	Vadodara	-0.25906	0.04555	<b>0.000</b>
	Ahmedabad	-0.25039	0.04726	<b>0.000</b>
	Surat			
	Rajkot	-0.49114	0.04953	<b>0.000</b>
Rajkot	Vadodara	0.23208	0.04557	<b>0.000</b>
	Ahmedabad	0.24075	0.04728	<b>0.000</b>
	Surat	0.49114	0.04953	<b>0.000</b>
	Rajkot			

Based on test of homogeneity of variance, it can be verified whether variance of all the four selected cities is equal or not? It means that at least one variance is different to that of the other city/cities. However, ANOVA table indicated that mean of the selected cities for the selected factor CMEx is not equal. Therefore, the Post – Hoc test is applied by assuming unequal variance. The opinion of the selected mediclaim policyholders’ for the purchase of the mediclaim policy for CMEx factor in the Surat city is different from the opinion of the selected mediclaim policyholders of the cities of Vadodara, Ahmedabad as well as Rajkot as the significant value in all of these cases is  $< 0.05$  in comparison to the other selected cities.

#### Post Hoc Test (Tukey HSD)

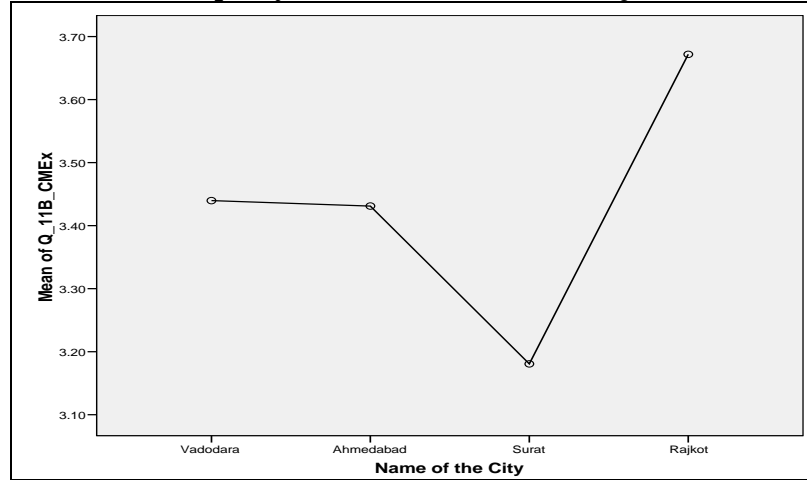
**Table Number 6.27**

**Multiple Comparisons of for Opinion of the Mediclaim Policyholders’ on CMEx factor for Selection of the Mediclaim Policy in the Selected Cities Through Tukey HSD Test**

Name of the City	N	Subset for alpha = 0.05		
		1	2	3
Surat	286	3.1807		
Ahmedabad	400		<b>3.4310</b>	
Vadodara	517		<b>3.4397</b>	
Rajkot	260			3.6718
Sig.		1.000	0.998	1.000

From the above table, it becomes clear that the selected mediclaim policyholders of Surat and Rajkot city have its separate group of the opinion on the CMEx factor for the purchase of mediclaim policy, while, the opinion of the selected mediclaim policyholders on CMEx factor for the purchase of the mediclaim policy of Vadodara and Ahmedabad cities forms another group. Following graph also shows through Means Plot how the opinion of the selected mediclaim policyholders on CMEx factor for the selection of the mediclaim policy in the selected cities are different.

**Graph Number 6.4**  
**Means Plots of opinion of the selected policy holders' on CMEx factor for the selection of the mediclaim policy in the selected cities of Gujarat State**



Above graph indicates different means for the opinion of the selected mediclaim policyholders' on CMEx factor for the selection of the mediclaim policy, which was 3.43 for Vadodara and Ahmedabad, 3.18 for Surat and 3.67 for Rajkot. Thus, the means values are in the range of lowest mean value of Surat 3.18 and the highest mean value 3.67 of Rajkot. So, on the basis of the means plot it becomes clear that opinion of the selected mediclaim policyholders in the cities of Vadodara and Ahmedabad were similar, while that of the selected mediclaim policyholders in the cities of Surat and Rajkot were different.

#### **6.3.5: One Way Annova for Opinion of the Mediclaim Policyholders' on BeneMP Factor for Selection of the Mediclaim Policy in the Selected Cities of Gujarat State**

**Hypothesis: 6:12**

Mean of the opinion of the selected mediclaim policyholders' of selected cities on BeneMP factor for selection of the Mediclaim Policy is equal and alternative hypothesis is at least one mean is different from other.

**Table Number 6.28**  
**Descriptive Statistics for Opinion of the Mediclaim Policyholders' on BeneMP factor for Selection of the Mediclaim Policy in the Selected Cities of Gujarat State**

Name of the City	N	Mean	SD	SE
Vadodara	517	3.7511	0.81277	0.03575
Ahmedabad	400	3.6833	0.75832	0.03792
Surat	286	3.3963	0.80974	0.04788
Rajkot	260	4.0026	0.70725	0.04386
<b>Total</b>	<b>1463</b>	<b>3.7079</b>	<b>0.80111</b>	<b>0.02094</b>

The highest mean value is of Rajkot city followed by the mean values of Vadodara, Ahmedabad and Surat cities.

**Table Number 6.29****Test of Homogeneity of Variances for Opinion of the Medclaim Policyholders' on BeneMP factor for Selection of the Medclaim Policy in the Selected Cities of Gujarat State**

Levene's Statistic	df1	df2	Sig.
8.308	3	1459	<b>0.000</b>

The results of Levene's test showed that the significant value (0.000) which is less than 0.05. It means that alternative hypothesis be accepted. It means variance of at least one groups is unequal.

**Analysis of Variance:****Table Number 6.30****ANOVA Table for Opinion of the Medclaim Policyholders' on BeneMP factor for Selection of the Medclaim Policy in the Selected Cities of Gujarat State**

	Particulars	Sum of Squares	Df	Mean Square	F	Sig.
Q_11B_BeneMP	Between Groups	<b>51.557</b>	<b>3</b>	<b>17.186</b>	<b>28.277</b>	<b>0.000</b>
	Within Groups	<b>886.733</b>	<b>1459</b>	<b>0.608</b>		
	Total	<b>938.290</b>	<b>1462</b>			

The variation between the groups of selected cities is 51 and within group the variation was 886. The variation within groups was higher than variation between groups of the selected cities. According to null hypothesis variance of all groups was equal and our alternative hypotheses states that at least one variance is different from other. The alternative hypotheses be accepted because of significance value (0.000) is  $< 0.05$  that means at least mean of one of selected city is different from the other selected cities.

**Post Hoc Test (Tamhane):****Table Number 6.31: Multiple Comparisons for Opinion of the Medclaim Policyholders' on BeneMP factor for Selection of the Medclaim Policy in the Selected Cities Through Tamhane Test**

Selected Cities		Mean Difference	SE	Sig.
Vadodara	Vadodara			
	Ahmedabad	0.06779	0.05211	0.725
	Surat	0.35486	0.05975	<b>0.000</b>
Ahmedabad	Rajkot	-0.25144	0.05658	<b>0.000</b>
	Vadodara	-0.06779	0.05211	0.725
	Ahmedabad			
Surat	Surat	0.28706	0.06108	<b>0.000</b>
	Rajkot	-0.31923	0.05798	<b>0.000</b>
	Vadodara	-0.35486	0.05975	<b>0.000</b>
Rajkot	Ahmedabad	-0.28706	0.06108	<b>0.000</b>
	Surat			
	Rajkot	-0.60629	0.06493	<b>0.000</b>
	Vadodara	0.25144	0.05658	<b>0.000</b>
	Ahmedabad	0.31923	0.05798	<b>0.000</b>
	Surat	0.60629	0.06493	<b>0.000</b>
	Rajkot			

Based on test of homogeneity of variance, it can be verified whether variance of all the four selected cities is equal. It means that at least one variance is different to that of the other city/cities. However, ANOVA table indicated that mean of the selected cities for the selected factor BeneMP factor is not equal. Therefore, the Post-Hoc test is applied by assuming unequal variance.



Similarly, the opinion of the selected mediclaim policyholders in Ahmedabad city were different from that of opinion of the selected mediclaim policyholders of Surat and Rajkot cities. The opinion of the selected mediclaim policyholders' for BeneMP factor for the purchase of mediclaim policy in the Surat city was different from the opinion of the selected mediclaim policyholders of the cities of Vadodara, Ahmedabad as well as Rajkot. As the significant value, in all of these cases is  $< 0.05$  in comparison to the other selected cities.

### Post Hoc Test (Tukey HSD)

**Table Number 6.32**  
**Multiple Comparisons of for Opinion of the Mediclaim Policyholders' on BeneMP factor for Selection of the Mediclaim Policy in the Selected Cities Through Tukey HSD Test**

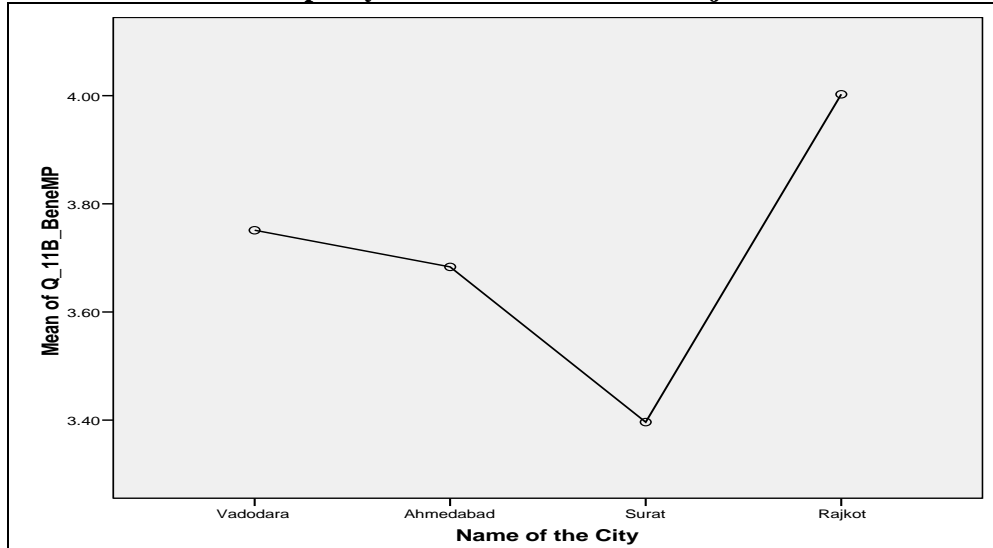
Name of the City	N	Subset for alpha = 0.05		
		1	2	3
Surat	286	3.3963		
Ahmedabad	400		<b>3.6833</b>	
Vadodara	517		<b>3.7511</b>	
Rajkot	260			4.0026
Sig.		1.000	0.669	1.000

From the above table, it becomes clear that the selected mediclaim policyholders of Surat and Rajkot city form separate group of the opinion on the BeneMP factor for the purchase of mediclaim policy, while, the opinion of the selected mediclaim policyholders on BeneMP factor for the purchase of the mediclaim policy of Vadodara and Ahmedabad cities forms another groups.

Following graph also shows through Means Plot how the opinion of the selected mediclaim policyholders on BeneMP factor for the selection of the mediclaim policy in the selected cities are different.

**Graph Number 6.5**

**Means Plots of opinion of the selected policy holders' on BeneMP factor for the selection of the mediclaim policy in the selected cities of Gujarat State**



Above graph indicates different means for the opinion of the selected mediclaim policyholders' on BeneMP factor of selection of the mediclaim policy which was 3.75 for Vadodara, 3.68 for Ahmedabad, 3.39 for Surat and 4.00 for Rajkot. Thus, the means values were in the range of lowest mean value of Surat 3.39 and the highest mean value 4.00 of Rajkot. So, on the basis of the means plot it becomes clear that opinion of the selected mediclaim policyholders in the cities of Vadodara and Ahmedabad were similar and for the cities of Surat and Rajkot were different on BeneMP factor for the purchase of the Mediclaim Policy.

#### **6.3.6: One Way Annova for Opinion of the Mediclaim Policyholders' on PI Factor for Selection of the Mediclaim Policy in the Selected Cities of Gujarat State**

##### **Hypothesis: 6:13**

Mean of the opinion of the selected mediclaim policyholders' of selected cities on PI factor for selection of the Mediclaim Policy is equal and alternative hypothesis is at least one mean is different from other.

**Table Number 6.33**

**Descriptive Statistics for Opinion of the Mediclaim Policyholders' on PI factor for Selection of the Mediclaim Policy in the Selected Cities of Gujarat State**

Type of Hospitals	N	Mean	SD	SE
Vadodara	517	3.3363	0.76459	0.03363
Ahmedabad	400	3.3906	0.70786	0.03539
Surat	286	3.1923	0.59287	0.03506
Rajkot	260	3.5932	0.67003	0.04155
<b>Total</b>	<b>1463</b>	3.3686	0.71181	0.01861

The highest mean value is of Rajkot city followed by the mean values of Ahmedabad, Vadodara, and Surat cities.

**Table Number 6.34****Test of Homogeneity of Variances for Opinion of the Medclaim Policyholders' on PI factor for Selection of the Medclaim Policy in the Selected Cities of Gujarat State**

Levene's Statistic	df1	df2	Sig.
11.158	3	1459	<b>0.000</b>

The Results of Levene's test showed that the significant value (0.000) which is less than 0.05. It means that our alternative hypothesis be accepted. It means variance of at least one group was unequal.

**Analysis of Variance:****Table Number 6.35****ANOVA Table for Opinion of the Medclaim Policyholders' on PI factor for Selection of the Medclaim Policy in the Selected Cities of Gujarat State**

	Particulars	Sum of Squares	Df	Mean Square	F	Sig.
Q_11B_PI	Between Groups	22.731	3	7.577	15.396	0.000
	Within Groups	718.025	1459	0.492		
	Total	740.756	1462			

The variation between the groups of selected cities was 22 and within group the variation was 718. The variation within groups was higher than variation between groups of the selected cities. According to null hypothesis variance of all groups was equal, and our alternative hypotheses states that at least one variance is different from other. The alternative hypotheses be accepted because of significance value (0.000) is  $< 0.05$  that means at least mean of one of selected city is different from the other selected cities.

**Post Hoc Test (Tamhane):****Table Number 6.36: Multiple Comparisons for Opinion of the Medclaim Policyholders' on PI factor for Selection of the Medclaim Policy in the Selected Cities Through Tamhane Test**

Selected Cities		Mean Difference	SE	Sig.
Vadodara	Vadodara			
	Ahmedabad	-0.05421	0.04882	0.845
	Surat	0.14403	0.04858	<b>0.019</b>
	Rajkot	-0.25682	0.05345	<b>0.000</b>
Ahmedabad	Vadodara	0.05421	0.04882	0.845
	Ahmedabad			
	Surat	0.19825	0.04982	<b>0.000</b>
	Rajkot	-0.20261	0.05458	<b>0.001</b>
Surat	Vadodara	-0.14403	0.04858	<b>0.019</b>
	Ahmedabad	-0.19825	0.04982	<b>0.000</b>
	Surat			
	Rajkot	-0.40085	0.05437	<b>0.000</b>
Rajkot	Vadodara	0.25682	0.05345	<b>0.000</b>
	Ahmedabad	0.20261	0.05458	<b>0.001</b>
	Surat	0.40085	0.05437	<b>0.000</b>
	Rajkot			

Based on test of homogeneity of variance, it can be verified whether variance of all the four selected cities is equal. It means that at least one variance is different to that of the other city/cities. However, ANOVA table indicated that mean of the selected cities for the selected factor PI factor is not equal. Therefore, the Post-Hoc test is applied by assuming unequal variance.

The opinion of the selected mediclaim policyholders' for PI factor for the purchase of mediclaim policy in the Surat city was different from the opinion of the selected mediclaim policyholders of other cities as the significant value, in all of these cases is  $< 0.05$  in comparison to the other selected cities.

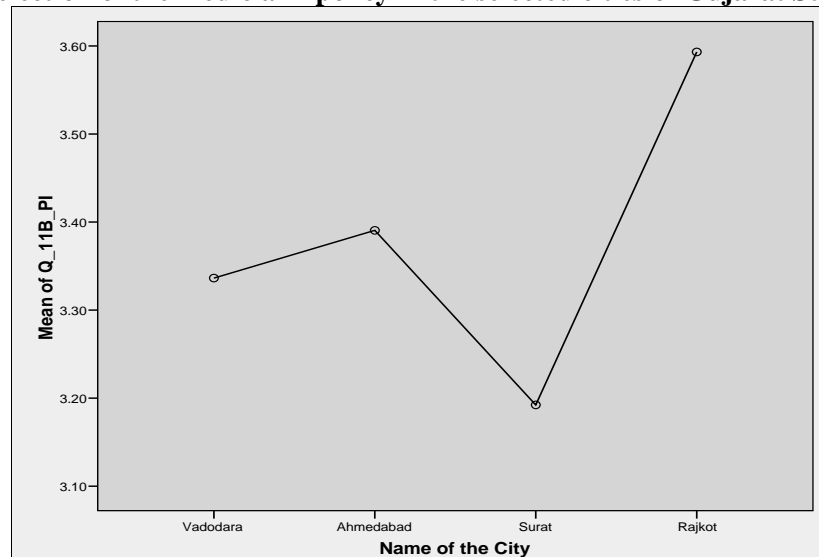
### Post Hoc Test (Tukey HSD)

**Table Number 6.37: Multiple Comparisons of for Opinion of the Mediclaim Policyholders' on PI factor for Selection of the Mediclaim Policy in the Selected Cities Through Tukey HSD Test**

Name of the City	N	Subset for alpha = 0.05		
		1	2	3
Surat	286	3.1923		
Ahmedabad	400		3.3363	
Vadodara	517		3.3906	
Rajkot	260			3.5932
Sig.		1.000	0.745	1.000

From the above table it becomes clear that the selected mediclaim policyholders of Surat and Rajkot city form separate group of the opinion on the PI factor for the purchase of mediclaim policy, while the opinion of the selected mediclaim policyholders on PI factor for the purchase of the mediclaim policy of Vadodara and Ahmedabad cities forms another groups. Following graph also shows through Means Plot how the opinion of the selected mediclaim policyholders on PI factor for the selection of the mediclaim policy in the selected cities are different.

**Graph Number 6.6: Means Plots of opinion of the selected policy holders' on PI factor for the selection of the mediclaim policy in the selected cities of Gujarat State**



Above graph indicates different means for the opinion of the selected mediclaim policyholders' on PI factor of selection of the mediclaim policy, which is 3.34 for Vadodara, 3.39 for Ahmedabad, 3.19 for Surat and 3.59 for Rajkot. Thus, the means values are in the range of lowest mean value of Surat 3.19 and the highest mean value 3.59 of Rajkot. So, on the basis of the means plot it becomes clear that opinion of the selected mediclaim policyholders in all the four selected cities on PI factor for the purchase of the Mediclaim Policy is more or less similar.

### 6.3.7: One Way Annova for Opinion of the Medclaim Policyholders' on ImCo Factor for Selection of the Medclaim Policy in the Selected Cities of Gujarat State

#### Hypothesis: 6:14

Mean of the opinion of the selected medclaim policyholders' of selected cities on ImCo factor for selection of the Medclaim Policy is equal and alternative hypothesis is at least one mean is different from other.

**Table Number 6.38**  
**Descriptive Statistics for Opinion of the Medclaim Policyholders' on ImCo factor for Selection of the Medclaim Policy in the Selected Cities of Gujarat State**

Name of the City	N	Mean	SD	SE
Vadodara	517	3.5053	0.76667	0.03372
Ahmedabad	400	3.5138	0.71359	0.03568
Surat	286	3.0638	0.76697	0.04535
Rajkot	260	3.9375	0.69969	0.04339
<b>Total</b>	<b>1463</b>	3.4981	0.78685	0.02057

The highest mean value is of Rajkot city followed by the mean values of Ahmedabad, Vadodara and Surat cities.

**Table Number 6.39**  
**Test of Homogeneity of Variances for Opinion of the Medclaim Policyholders' on ImCo factor for Selection of the Medclaim Policy in the Selected Cities of Gujarat State**

Levene's Statistic	df1	df2	Sig.
3.809	3	1459	0.010

The results of Levene's test showed that the significant value (0.010) which is less than 0.05. It means that alternative hypothesis be accepted as the significant value does not exceed 0.05. It means variance of at least one groups is unequal.

#### Analysis of Variance:

**Table Number 6.40**  
**ANOVA Table for Opinion of the Medclaim Policyholders' on ImCo factor for Selection of the Medclaim Policy in the Selected Cities of Gujarat State**

	Particulars	Sum of Squares	Df	Mean Square	F	Sig.
Q_11B_ImCo	Between Groups	104.265	3	34.755	63.312	0.000
	Within Groups	800.917	1459	0.549		
	Total	905.182	1462			

The variation between the groups of selected cities is 104 and within group the variation was 800. The variation within groups was higher than variation between groups of the selected cities.

According to null hypothesis variance of all groups was equal and our alternative hypotheses states that at least one variance is different from other. As alternative hypotheses be accepted because of significance value (0.000) was  $< 0.05$  that at least mean of one selected city was different from the other selected cities.

### Post Hoc Test (Tamhane):

**Table Number 6.41**  
**Multiple Comparisons for Opinion of the Medclaim Policyholders' on ImCo factor for Selection of the Medclaim Policy in the Selected Cities Through Tamhane Test**

Selected Cities		Mean Difference	SE	Sig.
Vadodara	Vadodara			
	Ahmedabad	-0.00843	0.04909	1.000
	Surat	0.44151	0.05651	<b>0.000</b>
Ahmedabad	Rajkot	-0.43218	0.05495	<b>0.000</b>
	Vadodara	0.00843	0.04909	1.000
	Ahmedabad			
Surat	Surat	0.44994	0.05770	<b>0.000</b>
	Rajkot	-0.42375	0.05618	<b>0.000</b>
	Vadodara	-0.44151	0.05651	<b>0.000</b>
Rajkot	Ahmedabad	-0.44994	0.05770	<b>0.000</b>
	Surat			
	Rajkot	-0.87369	0.06277	<b>0.000</b>
	Vadodara	0.43218	0.05495	<b>0.000</b>
	Ahmedabad	0.42375	0.05618	<b>0.000</b>
	Surat	0.87369	0.06277	<b>0.000</b>
	Rajkot			

Based on test of homogeneity of variance, it can be verified whether variance of all the four selected cities is equal. It means that at least one variance is different to that of the other city/cities. However, ANOVA table indicated that mean of the selected cities for the selected factor ImCo factor is not equal. Therefore, the Post-Hoc test is applied by assuming unequal variance. The opinion of the selected medclaim policyholders' for ImCo factor for the purchase of medclaim policy in the Surat city was different from the opinion of the selected medclaim policyholders of the cities of Vadodara, Ahmedabad as well as Rajkot, as the significant value, in all of these cases was  $< 0.05$  in comparison to the other selected cities.

### Post Hoc Test (Tukey HSD)

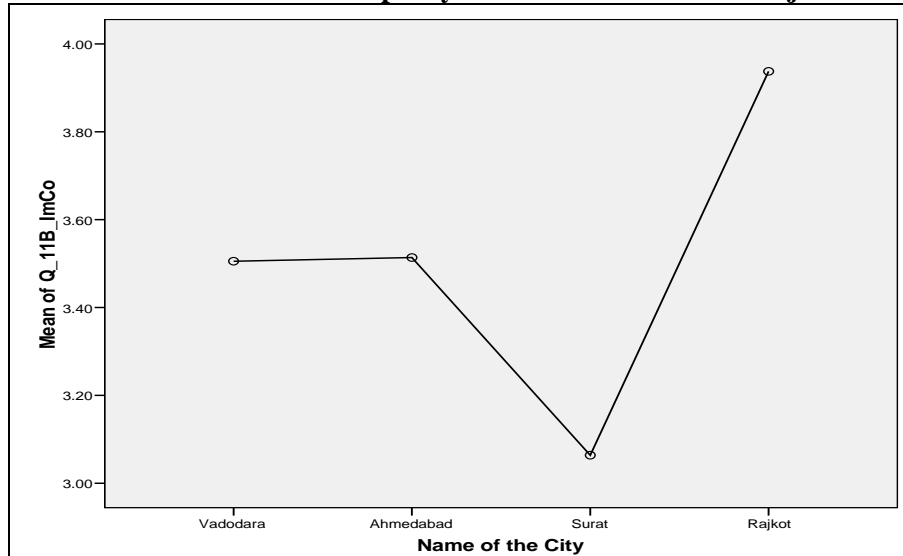
**Table Number 6.42**  
**Multiple Comparisons of for Opinion of the Medclaim Policyholders' on ImCo factor for Selection of the Medclaim Policy in the Selected Cities Through Tukey HSD Test**

Name of the City	N	Subset for alpha = 0.05		
		1	2	3
Surat	286	3.0638		
Ahmedabad	400		<b>3.5053</b>	
Vadodara	517		<b>3.5138</b>	
Rajkot	260			3.9375
Sig.		1.000	0.999	1.000

From the above table, it becomes clear that the selected medclaim policyholders of Surat and Rajkot city form separate group of the opinion on the ImCo factor for the purchase of medclaim policy, while the opinion of the selected medclaim policyholders on ImCo factor for the purchase of the medclaim policy of Vadodara and Ahmedabad cities forms another groups.

Following graph also shows through Means Plot how the opinion of the selected medclaim policyholders on ImCo factor for the selection of the medclaim policy in the selected cities are different.

**Graph Number 6.7: Means Plots of opinion of the selected policy holders' on ImCo factor for the selection of the mediclaim policy in the selected cities of Gujarat State**



Above graph indicates different means for the opinion of the selected mediclaim policyholders' on ImCo factor of selection of the mediclaim policy, which was 3.51 for Vadodara and Ahmedabad cities, 3.06 for Surat city and 3.94 for Rajkot city. Thus, the means values are in the range of lowest mean value of Surat 3.06, and the highest mean value 3.94 of Rajkot. So, on the basis of the means plot it becomes clear that opinion of the selected mediclaim policyholders in the cities of Vadodara and Ahmedabad were similar, and for the cities of Surat and Rajkot were different on ImCo factor for the purchase of the Mediclaim Policy.

### **6.3.8: One Way Annova for Opinion of the Mediclaim Policyholders' on SeAg Factor for Selection of the Mediclaim Policy in the Selected Cities of Gujarat State**

#### **Hypothesis: 6:15**

Mean of the opinion of the selected mediclaim policyholders' of selected cities on SeAg factor for selection of the Mediclaim Policy is equal and alternative hypothesis is at least one mean is different from other.

**Table Number 6.43**

**Descriptive Statistics for Opinion of the Mediclaim Policyholders' on SeAg factor for Selection of the Mediclaim Policy in the Selected Cities of Gujarat State**

Name of the City	N	Mean	SD	SE
Vadodara	517	3.6654	0.74461	0.03275
Ahmedabad	400	3.6036	0.78728	0.03936
Surat	286	3.2777	0.67967	0.04019
Rajkot	260	4.0148	0.66167	0.04103
<b>Total</b>	<b>1463</b>	3.6348	0.76398	0.01997

The highest mean value is of Rajkot city followed by the mean values of Vadodara, Ahmedabad, and Surat cities.

**Table Number 6.44****Test of Homogeneity of Variances for Opinion of the Medclaim Policyholders' on SeAg factor for Selection of the Medclaim Policy in the Selected Cities of Gujarat State**

Levene's Statistic	df1	df2	Sig.
10.681	3	1459	0.000

The results of Levene's test showed that the significant value (0.00) which was less than 0.05. It means that alternative hypothesis be accepted as the significant value does not exceed 0.05. It means variance of at least one groups is unequal.

**Analysis of Variance:****Table Number 6.45****ANOVA Table for Opinion of the Medclaim Policyholders' on SeAg factor for Selection of the Medclaim Policy in the Selected Cities of Gujarat State**

	Particulars	Sum of Squares	Df	Mean Square	F	Sig.
Q_11B_ SeAg	Between Groups	74.891	3	24.964	46.788	0.000
	Within Groups	778.438	1459	.534		
	Total	853.329	1462			

The variation between the groups of selected cities was 74 and within group the variation was 778. The variation within groups was higher than variation between groups of the selected cities. According to null hypothesis variance of all groups was equal and our alternative hypotheses states that at least one variance is different from other. As alternative hypotheses be accepted because of significance value (0.000) was  $< 0.05$  that at least mean of one type of selected city is different from the other selected cities.

**Post Hoc Test (Tamhane):****Table Number 6.46****Multiple Comparisons for Opinion of the Medclaim Policyholders' on SeAg factor for Selection of the Medclaim Policy in the Selected Cities Through Tamhane Test**

Selected Cities		Mean Difference	SE	Sig.
Vadodara	Vadodara			
	Ahmedabad	0.06181	0.05120	0.788
	Surat	0.38765	0.05184	<b>0.000</b>
	Rajkot	-0.34946	0.05250	<b>0.000</b>
Ahmedabad	Vadodara	-0.06181	0.05120	0.788
	Ahmedabad			
	Surat	0.32585	0.05626	<b>0.000</b>
	Rajkot	-0.41126	0.05686	<b>0.000</b>
Surat	Vadodara	-0.38765	0.05184	<b>0.000</b>
	Ahmedabad	-0.32585	0.05626	<b>0.000</b>
	Surat			
	Rajkot	-0.73711	0.05744	<b>0.000</b>
Rajkot	Vadodara	0.34946	0.05250	<b>0.000</b>
	Ahmedabad	0.41126	0.05686	<b>0.000</b>
	Surat	0.73711	0.05744	<b>0.000</b>
	Rajkot			

Based on test of homogeneity of variance, it can be verified whether variance of all the four selected cities is equal. It means that at least one variance is different to that of the other city/cities.



However, ANOVA table indicated that mean of the selected cities for the selected factor SeAg factor is not equal. Therefore, the Post-Hoc test is applied by assuming unequal variance. The opinion of the selected mediclaim policyholders' for SeAg factor for the purchase of mediclaim policy in the Surat city was different from the opinion of the selected mediclaim policyholders of the cities of Vadodara, Ahmedabad as well as Rajkot as the significant value, in all of these cases was  $< 0.05$  in comparison to the other selected cities.

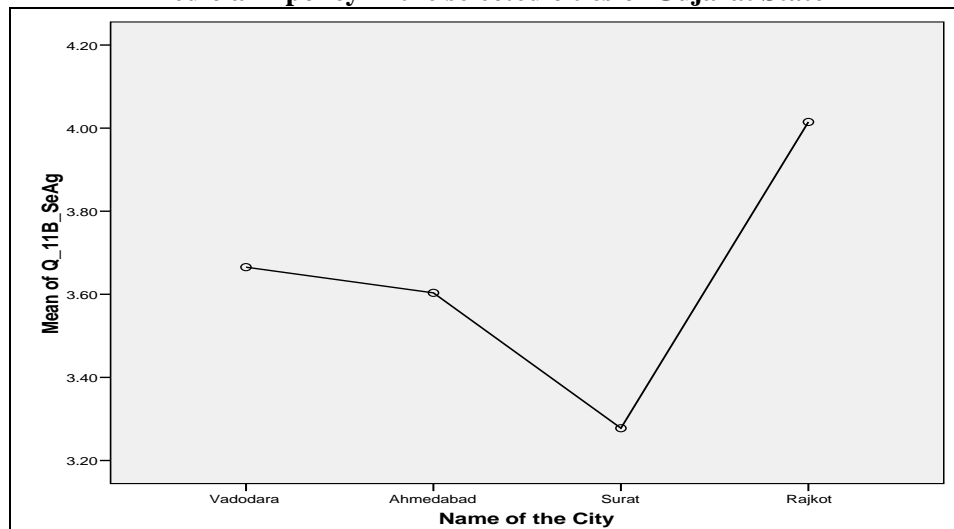
### Post Hoc Test (Tukey HSD)

**Table Number 6.47**  
**Multiple Comparisons of for Opinion of the Mediclaim Policyholders' on SeAg factor for Selection of the Mediclaim Policy in the Selected Cities Through Tukey HSD Test**

Name of the City	N	Subset for alpha = 0.05		
		1	2	3
Surat	286	3.2777		
Ahmedabad	400		3.6036	
Vadodara	517		3.6654	
Rajkot	260			4.0148
Sig.		1.000	0.688	1.000

From the above table it becomes clear that the selected mediclaim policyholders of Surat and Rajkot City form separate group of the opinion on the SeAg factor for the purchase of mediclaim policy, while, the opinion of the selected mediclaim policyholders on SeAg factor for the purchase of the mediclaim policy of Vadodara and Ahmedabad cities forms another groups. Following graph also shows through Means Plot how the opinion of the selected mediclaim policyholders on SeAg factor for the selection of the mediclaim policy in the selected cities are different.

**Graph Number 6.8**  
**Means Plots of opinion of the selected policy holders' on SeAg factor for the selection of the mediclaim policy in the selected cities of Gujarat State**



Above graph indicates different means for the opinion of the selected mediclaim policyholders' on SeAg factor of selection of the mediclaim policy, which was 3.67 for Vadodara, 3.60 for Ahmedabad, 3.28 for Surat and 4.01 for Rajkot. Thus, the means values were in the range of lowest mean value of Surat 3.28, and the highest mean value 4.01 of Rajkot. So, on the basis of the means plot it becomes clear that opinion of the selected mediclaim policyholders in the cities of Vadodara and Ahmedabad were similar, and for the cities of Surat and Rajkot were different on SeAg factor for the purchase of the Mediclaim Policy.

### **6.3.9: One Way Annova for Opinion of the Mediclaim Policyholders' on SeCo Factor for Selection of the Mediclaim Policy in the Selected Cities of Gujarat State**

#### **Hypothesis: 6:16**

Mean of the opinion of the selected mediclaim policyholders' of selected cities on SeCo factor for selection of the Mediclaim Policy is equal and alternative hypothesis is at least one mean is different from other.

**Table Number 6.48**  
**Descriptive Statistics for Opinion of the Mediclaim Policyholders' on SeCo factor for Selection of the Mediclaim Policy in the Selected Cities of Gujarat State**

<b>Name of the City</b>	<b>N</b>	<b>Mean</b>	<b>SD</b>	<b>SE</b>
Vadodara	517	3.9178	0.70613	0.03106
Ahmedabad	400	3.9384	0.54461	0.02723
Surat	286	3.7972	0.73192	0.04328
Rajkot	260	3.9981	0.62234	0.03860
<b>Total</b>	<b>1463</b>	3.9141	0.65884	0.01722

The highest mean value is of Rajkot city followed by the mean values of Ahmedabad, Vadodara and Surat cities.

**Table Number 6.49**  
**Test of Homogeneity of Variances for Opinion of the Mediclaim Policyholders' on SeCo factor for Selection of the Mediclaim Policy in the Selected Cities of Gujarat State**

<b>Levene's Statistic</b>	<b>df1</b>	<b>df2</b>	<b>Sig.</b>
11.096	3	1459	0.000

The results of Levene's test showed that the significant value (0.000) which was less than 0.05. It means that alternative hypothesis be accepted as the significant value does not exceed 0.05. It means variance of at least one groups is unequal.

#### **Analysis of Variance:**

**Table Number 6.50**  
**ANOVA Table for Opinion of the Mediclaim Policyholders' on SeCo factor for Selection of the Mediclaim Policy in the Selected Cities of Gujarat State**

	<b>Particulars</b>	<b>Sum of Squares</b>	<b>Df</b>	<b>Mean Square</b>	<b>F</b>	<b>Sig.</b>
Q_11B_SeCo	Between Groups	5.986	3	1.995	4.631	0.003
	Within Groups	628.618	1459	0.431		
	Total	634.603	1462			

The variation between the groups of selected cities was 5 and within group the variation was 628. The variation within groups was higher than variation between groups of the selected cities. According to null hypothesis variance of all groups was equal and our alternative hypotheses states that at least one variance is different from other. The null hypotheses be rejected because of significance value (0.003) was  $< 0.05$  that at least mean of one of selected city is different from the other selected cities.

#### Post Hoc Test (Tamhane):

**Table Number 6.51**  
**Multiple Comparisons for Opinion of the Medclaim Policyholders' on SeCo factor for Selection of the Medclaim Policy in the Selected Cities Through Tamhane Test**

Selected Cities		Mean Difference	SE	Sig.
Vadodara	Vadodara			
	Ahmedabad	-0.02064	0.04130	0.997
	Surat	0.12059	0.05327	0.135
	Rajkot	-0.08028	0.04954	0.488
Ahmedabad	Vadodara	0.02064	0.04130	0.997
	Ahmedabad			
	Surat	0.14123	0.05113	<b>0.035</b>
	Rajkot	-0.05964	0.04723	0.752
Surat	Vadodara	-0.12059	0.05327	0.135
	Ahmedabad	-0.14123	0.05113	<b>0.035</b>
	Surat			
	Rajkot	-0.20087	0.05799	<b>0.003</b>
Rajkot	Vadodara	0.08028	0.04954	0.488
	Ahmedabad	0.05964	0.04723	0.752
	Surat	0.20087	0.05799	<b>0.003</b>
	Rajkot			

Based on test of homogeneity of variance, it can be verified whether variance of all the four selected cities is equal. It means that at least one variance is similar to the other city/cities. However, ANOVA table indicated that mean of the selected cities for the selected factor SeCo is not equal. Therefore, the Post-Hoc test is applied by assuming unequal variance. The opinion of the selected medclaim policyholders' for the purchase of the medclaim policy for SeCo factor in Vadodara are similar to that of the opinion of the medclaim policyholders from the cities of Ahmedabad, Surat and Rajkot. However, the opinion of the selected medclaim policyholders in Ahmedabad city were different from the opinion of the medclaim policyholders of Surat city only. While, the opinion of the selected medclaim policyholders' for SeCo factor of medclaim policy purchase in case of Surat city was different from the opinion of the selected medclaim policyholders from the cities of Ahmedabad as well as Rajkot. Also, the opinion of the selected medclaim policyholders' of Rajkot city on SeCo factor for the purchase of the medclaim policy were different from that of the opinion of the selected medclaim policyholders of Surat city only, because the significant value, in all of these cases is  $< 0.05$  with the other selected cities.

## Post Hoc Test (Tukey HSD)

**Table Number 6.52**

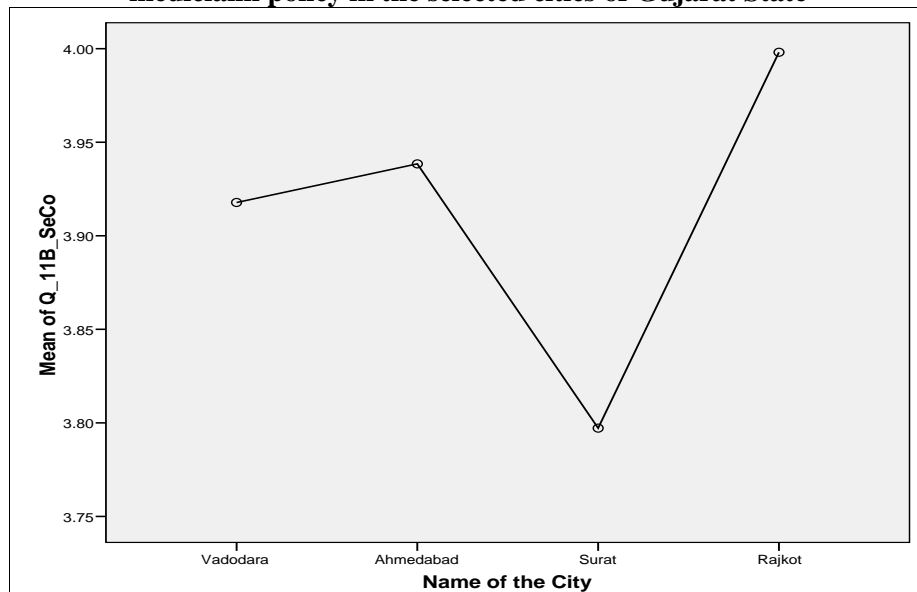
**Multiple Comparisons of for Opinion of the Medclaim Policyholders' on SeCo factor for Selection of the Medclaim Policy in the Selected Cities Through Tukey HSD Test**

Name of the City	N	Subset for alpha = 0.05		
		1	2	3
Surat	286	3.7972		
Ahmedabad	400		<b>3.9178</b>	
Vadodara	517		<b>3.9384</b>	
Rajkot	260		<b>3.9981</b>	
Sig.		0.079	0.382	

From the above table it becomes clear that the selected medclaim policyholders of Surat city form different group of the opinion on the SeCo factor for the purchase of medclaim policy, while, the opinion of the selected medclaim policyholders on SeCo factor for the purchase of the medclaim policy of Vadodara, Ahmedabad and Rajkot cities forms another groups. Following graph also shows through Means Plot how the opinion of the selected medclaim policyholders on SeCo factor for the selection of the medclaim policy in the selected cities are different.

**Graph Number 6.9**

**Means Plots of opinion of the selected policy holders' on SeCo factor for the selection of the medclaim policy in the selected cities of Gujarat State**



Above graph indicates different means for the opinion of the selected medclaim policyholders' on SeCo factor of selection of the medclaim policy, which was 3.91 for Vadodara, 3.93 for Ahmedabad, 3.79 for Surat and 3.99 for Rajkot. Thus, the means values were in the range of lowest mean value of Surat 3.79 and the highest mean value 3.99 of Rajkot. So, on the basis of the means plot it becomes clear that opinion of the selected medclaim policyholders in all the four selected cities, except Surat city, on SeCo factor for the purchase of the Medclaim Policy was more or less similar.

**6.3.10: One Way Anova for Opinion of the Medclaim Policyholders' on NetH Factor for Selection of the Medclaim Policy in the Selected Cities of Gujarat State**  
**Hypothesis: 6:17**

Mean of the opinion of the selected medclaim policyholders' of selected cities on NetH factor for selection of the Medclaim Policy is equal and alternative hypothesis is at least one mean is different from other.

**Table Number 6.53**  
**Descriptive Statistics for Opinion of the Medclaim Policyholders' on NetH factor for Selection of the Medclaim Policy in the Selected Cities of Gujarat State**

Name of the City	N	Mean	SD	SE
Vadodara	517	3.5413	0.81175	0.03570
Ahmedabad	400	3.4887	0.76231	0.03812
Surat	286	3.1422	0.71450	0.04225
Rajkot	260	3.7103	0.65680	0.04073
<b>Total</b>	<b>1463</b>	<b>3.4789</b>	<b>0.77472</b>	<b>0.02025</b>

The highest mean value is of Rajkot city followed by the mean values of Vadodara, Ahmedabad, and Surat cities.

**Table Number 6.54**  
**Test of Homogeneity of Variances for Opinion of the Medclaim Policyholders' on NetH factor for Selection of the Medclaim Policy in the Selected Cities of Gujarat State**

Levene's Statistic	df1	df2	Sig.
7.451	3	1459	0.000

The results of Levene's test showed that the non-significant value (0.000) which was less than 0.05. It means that alternative hypothesis be accepted as the significant value does not exceed 0.05. It means variance of at least one groups was unequal.

**Analysis of Variance:**

**Table Number 6.55**  
**ANOVA Table for Opinion of the Medclaim Policyholders' on NetH factor for Selection of the Medclaim Policy in the Selected Cities of Gujarat State**

	Particulars	Sum of Squares	Df	Mean Square	F	Sig.
Q_11B_NetH	Between Groups	48.391	3	16.130	28.385	0.000
	Within Groups	829.098	1459	0.568		
	Total	877.489	1462			

The variation between the groups of selected cities was 48 and within group the variation was 829. The variation within groups was higher than variation between groups of the selected cities. According to null hypothesis variance of all groups was equal and our alternative hypotheses states that at least one variance is different from other. As alternative hypotheses be accepted because of significance value (0.000) was < 0.05 at least mean of one of selected city is different from the selected cities.

### Post Hoc Test (Tamhane):

**Table Number 6.56**  
**Multiple Comparisons for Opinion of the Medclaim Policyholders' on NetH factor for Selection of the Medclaim Policy in the Selected Cities Through Tamhane Test**

Selected Cities		Mean Difference	SE	Sig.
Vadodara	Vadodara			
	Ahmedabad	0.05251	0.05222	0.897
	Surat	0.39907	0.05531	<b>0.000</b>
	Rajkot	-0.16899	0.05416	<b>0.011</b>
Ahmedabad	Vadodara	-0.05251	0.05222	0.897
	Ahmedabad			
	Surat	0.34656	0.05690	<b>0.000</b>
	Rajkot	-0.22151	0.05578	<b>0.000</b>
Surat	Vadodara	-0.39907	0.05531	<b>0.000</b>
	Ahmedabad	-0.34656	0.05690	<b>0.000</b>
	Surat			
	Rajkot	-0.56807	0.05869	<b>0.000</b>
Rajkot	Vadodara	0.16899	0.05416	<b>0.011</b>
	Ahmedabad	0.22151	0.05578	<b>0.000</b>
	Surat	0.56807	0.05869	<b>0.000</b>
	Rajkot			

Based on test of homogeneity of variance, it can be verified whether variance of all the four selected cities may not be equal. It means that at least one variance is different to that of the other city/cities. However, ANOVA table indicated that mean of the selected cities for the selected factor NetH factor is not equal. Therefore, the Post-Hoc test is applied by assuming unequal variance. The opinion of the selected medclaim policyholders' for the purchase of the medclaim policy for NetH factor in Vadodara and Ahmedabad cities were different from that of the opinion of the selected medclaim policyholders of Surat and Rajkot cities. While, the opinion of the selected medclaim policyholders' for NetH factor for the purchase of medclaim policy in the Surat and Rajkot cities was different from the opinion of the selected medclaim policyholders of the cities of Vadodara and Ahmedabad as the significant value in all of these cases was  $< 0.05$  in comparison to the other selected cities.

### Post Hoc Test (Tukey HSD)

**Table Number 6.57**  
**Multiple Comparisons of for Opinion of the Medclaim Policyholders' on NetH factor for Selection of the Medclaim Policy in the Selected Cities Through Tukey HSD Test**

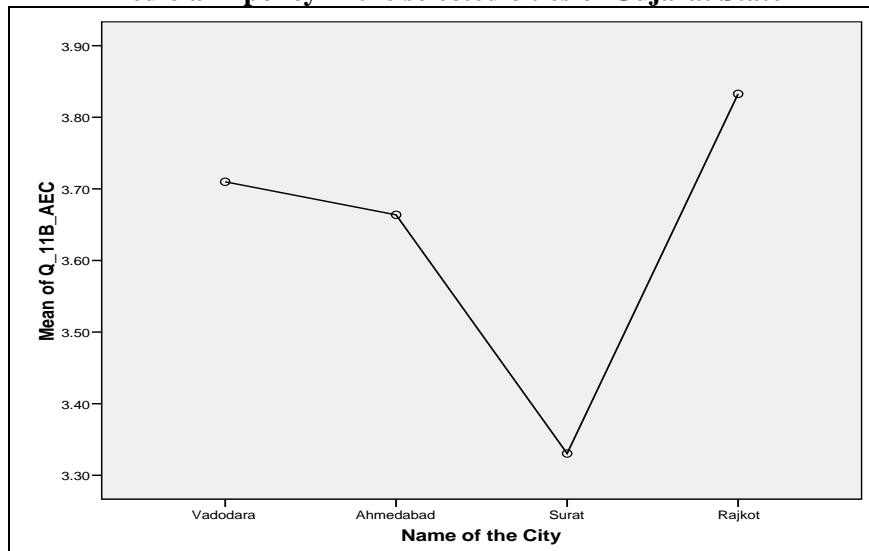
Name of the City	N	Subset for alpha = 0.05		
		1	2	3
Surat	286	3.1422		
Ahmedabad	400		3.4887	
Vadodara	517		3.5413	
Rajkot	260			3.7103
Sig.		1.000	0.801	1.000

From the above table, it becomes clear that the selected medclaim policyholders of Surat and Rajkot city form separate group of the opinion on the NetH factor for the purchase of medclaim policy.

The opinion of the selected mediclaim policyholders on NetH factor for the purchase of the mediclaim policy of Vadodara and Ahmedabad cities forms another groups. Following graph also shows through Means Plot how the opinion of the selected mediclaim policyholders on BeneMP factor for the selection of the mediclaim policy in the selected cities are different.

**Graph Number 6.10**

**Means Plots of opinion of the selected policy holders' on NetH factor for the selection of the mediclaim policy in the selected cities of Gujarat State**



Above graph indicates different means for the opinion of the selected mediclaim policyholders' on NetH factor of selection of the mediclaim policy, which was 3.54 for Vadodara, 3.48 for Ahmedabad, 3.14 for Surat and 3.71 for Rajkot. Thus, the means values were in the range of lowest mean value of Surat 3.14 and the highest mean value 3.71 of Rajkot. So, on the basis of the means plot it becomes clear that opinion of the selected mediclaim policyholders in the cities of Vadodara and Ahmedabad were similar, and for the cities of Surat and Rajkot were different on NetH factor for the purchase of the Mediclaim Policy.

### **6.3.11: One Way Annova for Opinion of the Mediclaim Policyholders' on CMPx Factor for Selection of the Mediclaim Policy in the Selected Cities of Gujarat State**

#### **Hypothesis: 6:18**

Mean of the opinion of the selected mediclaim policyholders' of selected cities on CMPx factor for selection of the Mediclaim Policy is equal and alternative hypothesis is at least one mean is different from other.

**Table Number 6.58**  
**Descriptive Statistics for Opinion of the Medclaim Policyholders' on CMPx factor for Selection of the Medclaim Policy in the Selected Cities of Gujarat State**

Type of Hospitals	N	Mean	SD	SE
Vadodara	517	3.5452	0.83507	0.03673
Ahmedabad	400	3.5896	0.73453	0.03673
Surat	286	3.2917	0.68021	0.04022
Rajkot	260	3.9533	0.63846	0.03960
<b>Total</b>	<b>1463</b>	<b>3.5803</b>	<b>0.77283</b>	<b>0.02021</b>

The highest mean value was of Rajkot city followed by the mean values of Ahmedabad, Vadodara and Surat cities.

**Table Number 6.59**  
**Test of Homogeneity of Variances for Opinion of the Medclaim Policyholders' on CMPx factor for Selection of the Medclaim Policy in the Selected Cities of Gujarat State**

Levene's Statistic	df1	df2	Sig.
17.708	3	1459	0.000

The results of Levene's test showed that the non-significant value (0.000) which was less than 0.05. It means that our alternative hypothesis be accepted as the significant value does not exceed 0.05. It means variance of at least one group was unequal.

#### **Analysis of Variance:**

**Table Number 6.60**  
**ANOVA Table for Opinion of the Medclaim Policyholders' on CMPx factor for Selection of the Medclaim Policy in the Selected Cities of Gujarat State**

	Particulars	Sum of Squares	Df	Mean Square	F	Sig.
Q_11B_CMPx	Between Groups	60.665	3	20.222	36.310	0.000
	Within Groups	812.546	1459	0.557		
	Total	873.211	1462			

The variation between the groups of selected cities was 60 and within group the variation was 812. The variation within groups was higher than variation between groups of the selected cities. According to null hypothesis variance of all groups was equal and our alternative hypotheses states that at least one variance is different from other. The alternative hypotheses be accepted because of significance value (0.000) was < 0.05 that at least means one of selected city was different from the other type of selected cities.



**Post Hoc Test (Tamhane):****Table Number 6.61****Multiple Comparisons for Opinion of the Medclaim Policyholders' on CMPx factor for Selection of the Medclaim Policy in the Selected Cities Through Tamhane Test**

Selected Cities		Mean Difference	SE	Sig.
Vadodara	Vadodara			
	Ahmedabad	-0.04446	0.05194	0.950
	Surat	0.25347	0.05447	<b>0.000</b>
Ahmedabad	Rajkot	-0.40812	0.05401	<b>0.000</b>
	Vadodara	0.04446	0.05194	0.950
	Ahmedabad			
Surat	Surat	0.29793	0.05447	<b>0.000</b>
	Rajkot	-0.36365	0.05401	<b>0.000</b>
	Vadodara	-0.25347	0.05447	<b>0.000</b>
Rajkot	Ahmedabad	-0.29793	0.05447	<b>0.000</b>
	Surat			
	Rajkot	-0.66159	0.05644	<b>0.000</b>
	Vadodara	0.40812	0.05401	<b>0.000</b>
	Ahmedabad	0.36365	0.05401	<b>0.000</b>
	Surat	0.66159	0.05644	<b>0.000</b>
	Rajkot			

Based on test of homogeneity of variance, it can be verified whether variance of all the four selected cities is equal. It means that at least one variance is different to that of the other city/cities. However, ANOVA table indicated that mean of the selected cities for the selected factor CMPx factor was not equal. Therefore, the Post-Hoc test is applied by assuming unequal variance. The opinion of the selected medclaim policyholders' for the purchase of the medclaim policy for CMPx factor in Vadodara city were different from that of the opinion of the selected medclaim policyholders of Surat and Rajkot cities. Similarly, the opinion of the selected medclaim policyholders in Ahmedabad city were different from that of opinion of the selected medclaim policyholders of Surat and Rajkot cities. While, the opinion of the selected medclaim policyholders' for CMPx factor for the purchase of medclaim policy in the Surat city was different from the opinion of the selected medclaim policyholders of the cities of Vadodara, Ahmedabad as well as Rajkot. Also, the opinion of the selected medclaim policyholders' in Rajkot, for CMPx factor for the purchase of the medclaim policy were different from that of the opinion of the selected medclaim policyholders of all the three selected cities viz., Vadodara, Ahmedabad and Surat, as the significant value, in all of these cases was  $< 0.05$  in comparison to the other selected cities.

## Post Hoc Test (Tukey HSD)

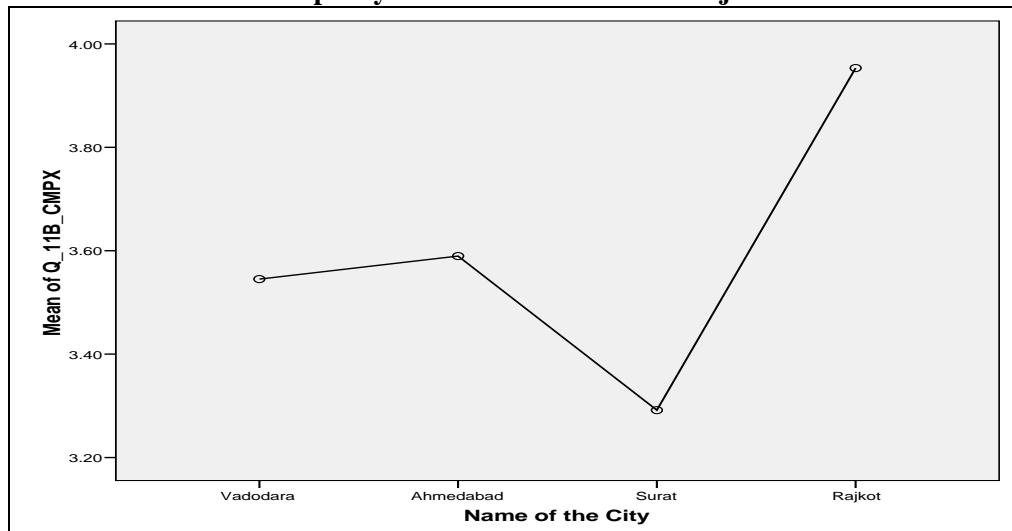
**Table Number 6.62**  
**Multiple Comparisons of for Opinion of the Medclaim Policyholders' on CMPx factor for Selection of the Medclaim Policy in the Selected Cities Through Tukey HSD Test**

Name of the City	N	Subset for alpha = 0.05		
		1	2	3
Surat	286	3.2917		
Ahmedabad	400		3.5452	
Vadodara	517		3.5896	
Rajkot	260			3.9533
Sig.		1.000	0.865	1.000

From the above table it becomes clear that the selected medclaim policyholders of Surat and Rajkot city form separate different group of the opinion on the CMPx factor for the purchase of medclaim policy, while, the opinion of the selected medclaim policyholders on CMPx factor for the purchase of the medclaim policy of Vadodara and Ahmedabad cities forms another groups.

Following graph also shows through Means Plot how the opinion of the selected medclaim policyholders on CMPx factor for the selection of the medclaim policy in the selected cities were different.

**Graph Number 6.11:**  
**Means Plots of opinion of the selected policy holders' on CMPx factor for the selection of the medclaim policy in the selected cities of Gujarat State**



Above graph indicates different means for the opinion of the selected medclaim policyholders' on CMPx factor of selection of the medclaim policy, which was 3.55 for Vadodara, 3.59 for Ahmedabad, 3.29 for Surat and 3.95 for Rajkot. Thus, the means values were in the range of lowest mean value of Surat 3.29 and the highest mean value 3.95 of Rajkot. So, on the basis of the means plot it becomes clear that opinion of the selected medclaim policyholders in the cities of Vadodara and Ahmedabad were similar, and for the cities of Surat and Rajkot were different on CMPx factor for the purchase of the Medclaim Policy.

#### **6.4: FACTOR ANALYSIS OF OPINION OF THE MEDICLAIM POLICYHOLDERS' ON SELECTED FACTORS FOR SELECTION OF THE MEDICLAIM POLICY IN THE SELECTED CITIES OF GUJARAT STATE**

(Abbreviations used in following tables are, AEC = Age Eligibility Conditions, RP = Range of Premium, CID = Coverage of Illness and Diseases, CMEx = Coverage of Medical Expenses, BeneMP = Benefits of Mediclaim Policy, PI = Promotional Incentives, ImCo = Image of the Insurance Company, SeAg = Services provided by the Insurance Agents, SeCo = Services provided by the Insurance Companies, Neth = Network of Hospitals, CMPx = Complexity in the Rules and Regulations)

To measure the suitability of the data for factor analysis the adequacy of the data is evaluated on the basis of the results of Kaiser – Meyar – Oklin (KMO) measures of sampling adequacy and Bartlett's test of Sphericity (Homogeneity of Variance). This exercise is done for all the group of data in which factor analysis is applied. The summarized table showing the KMO value and Value of Bartlett's Test of Sphericity is as given below:

**Table Number 6.63**  
**Opinion of the Selected Mediclaim Policyholders' on the Selected Criteria of the Selection of the Mediclaim Policy in the Selected Cities Through Kaiser – Meyar – Oklin (KMO) Measures of Sampling Adequacy and Bartlett's Test of Sphericity**

Sr. No.	Selected Criteria	KMO Value	Value of Bartlett's Test of Sphericity		
			Approx. Chi-Square	Df	'P' Value
01	Coverage of Illness and Diseases (CID)	0.736	2829.037		0.000
02	Coverage of Medical Expenses (CMEx)	0.876	6510.043		0.000
03	Promotional Incentives (PI)	0.895	4773.056		0.000
04	Service provided by the Insurance Companies (SeCo)	0.889	5400.022		0.000
05	Complexity in the Rules and Regulations (CMPx)	0.896	5353.706		0.000
06	Image of the Insurance Company (ImCo)	0.801	2145.715		0.000
07	Network of Hospitals (NetH)	0.869	3209.679		0.000
08	Services provided by the Insurance Agents (SeAg)	0.897	3209.679		0.000

In case of opinion of the selected mediclaim policyholders' on the selected criteria, viz., CID, CMEx, PI, SeCo, CMPx, ImCo, NetH and SeAg, for the selection of the mediclaim policy in the selected cities, the results showed that the KMO measure of sampling adequacy was 0.60, which indicated that the present data were suitable for Factor Analysis. Similarly, Bartlett's Test of Sphericity (0.00) was significant ( $p < .05$ ), indicating that sufficient correlation exists between the criteria to proceed with the Factor Analysis.

#### 6.4.1 Factor Analysis of Opinion of the Selected Medclaim Policyholders' on CID Criteria of the Selection of the Medclaim Policy in the Selected Cities of the Gujarat State

**Table Number 6.64**

**Total Variance on Opinion of the Selected Medclaim Policyholders' on CID Factor of the Selection of the Medclaim Policy in the Selected Cities of the Gujarat State**

Component	Initial Eigenvalues			Extraction Sums of Squared Loadings			Rotation Sums of Squared Loadings		
	Total	Percentages of Variance	Cumulative per cent	Total	Percentages of Variance	Cumulative per cent	Total	Percentages of Variance	Cumulative per cent
01	2.904	41.484	41.484	2.904	41.484	41.484	2.527	36.095	36.095
02	1.307	18.677	60.161	1.307	18.677	60.161	1.685	24.066	60.161

The first two components (factors) in the initial solution have an Eigenvalues over 1, and it accounted for about 60 per cent of the observed variations in the opinion on CID criteria for the selection of the medclaim policy in the selected cities. According to Kaiser Criterion, only the first two factors should be used because subsequent Eigenvalues are all less than 1.

**Table Number 6.65**

**Communalities and Rotated Component Matrix of Opinion of the Selected Medclaim Policyholders' on CID Factor of the Selection of the Medclaim Policy in the Selected Cities of the Gujarat State**

Sr. No.	Selected Criteria	Communalities Extraction	Rotated Component	
			1	2
01	Coverage of the various Illness/Diseases	0.680	0.083	0.820
02	Coverage for the Allopathic Treatments	0.715	0.062	0.843
03	Coverage for the Ayurvedic Treatments	0.571	0.703	0.276
04	Coverage for the Naturopathy Treatments	0.646	0.795	0.119
05	Coverage for HIV Infection	0.695	0.830	0.081
06	Coverage for Cancer	0.572	0.755	0.052
07	The time period for the inclusion of the Pre-existing Illness	0.333	0.362	0.449

All the extracted communalities are acceptable and all criteria are fit for the factor solution as their extraction values are large enough. Factor loadings were used to measure correlation between criteria and the factors. A factor loading close to 1 indicates a strong correlation between a criteria and factor, while a loading closer to zero indicated weak correlation. The factors are rotated with the use of Varimax with Kaiser Normalization rotation method. Principle Component Analysis (PCA) method is used for factor extraction, and it considers only those factors for interpretation purpose whose values are greater than 0.7. From the above table, it becomes clear that how much different criteria were correlated with two components. The criteria 7 (Coverage for Ayurvedic Treatments), criteria 8 (Coverage for Naturopathy Treatments), criteria 9 (Coverage for HIV Infection), and criteria 10 (Coverage for Cancer) were more correlated with component 1. Criteria 5 (Coverage of the various Illness/Diseases) and criteria 6 (Coverage for the Allopathic Treatments) was more correlated with component 2.

**Table Number 6.66**  
**Component-wise Mean Value for Opinion of the Selected Medclaim Policyholders' on CID Factor of the Selection of the Medclaim Policy in the Selected Cities of the Gujarat State**

Component	Mean Value	Selected Criteria	Selected Factors
01	11.56	Coverage for Ayurvedic Treatments	CID Coverage of Illness and Diseases
		Coverage for Naturopathy Treatments	
		Coverage for HIV Infection	
		Coverage for Cancer	
02	8.08	Coverage of the various Illness/Diseases	
		Coverage for the Allopathic Treatments	

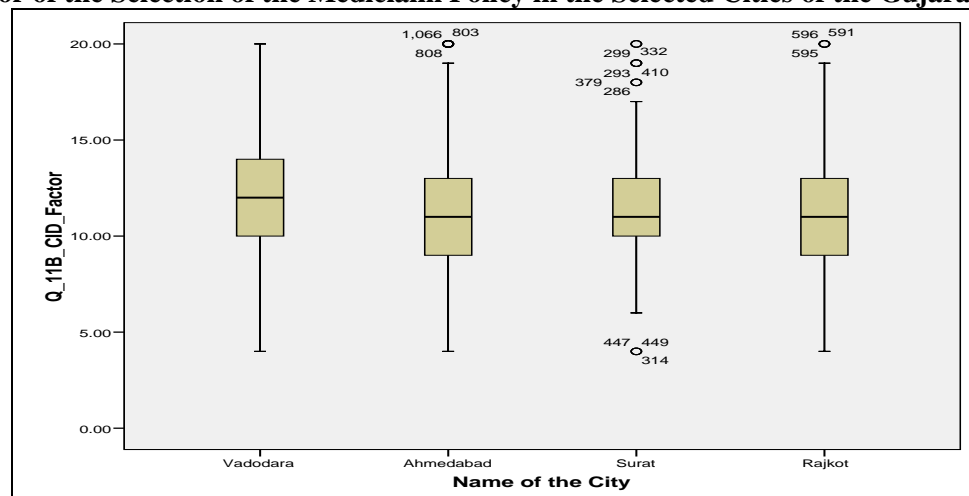
The above table indicates component wise mean value. The component 1 have higher mean value of 11.56, and which found to be more correlated with four criteria (Coverage for Ayurvedic Treatments, Coverage for Naturopathy Treatments, Coverage for HIV infection and Coverage for Cancer). The component 1 make one group of the Coverage for the Illness and Diseases factor, and it explained 36 per cent variation from data that means these three criteria were important for in selected cities by the different selected policyholders. The component 2 has second highest mean value of 8.08, and it is more correlated with (Coverage of Illness and Diseases and Coverage for the Allopathic Treatments), and it also explains 24 per cent variation from data.

**Importance of Components for Opinion of the Selected Medclaim Policyholders' on CID Factor of the Selection of the Medclaim Policy in the Selected Cities of the Gujarat State:**

The importance of each component to the opinion of the selected policyholders for the Factor Coverage of Illness and Diseases for the selection of the medclaim policy in the selected cities can be understood with the help of below given box plots.

The following box plot explained the total score of component 1 for the four selected cities.

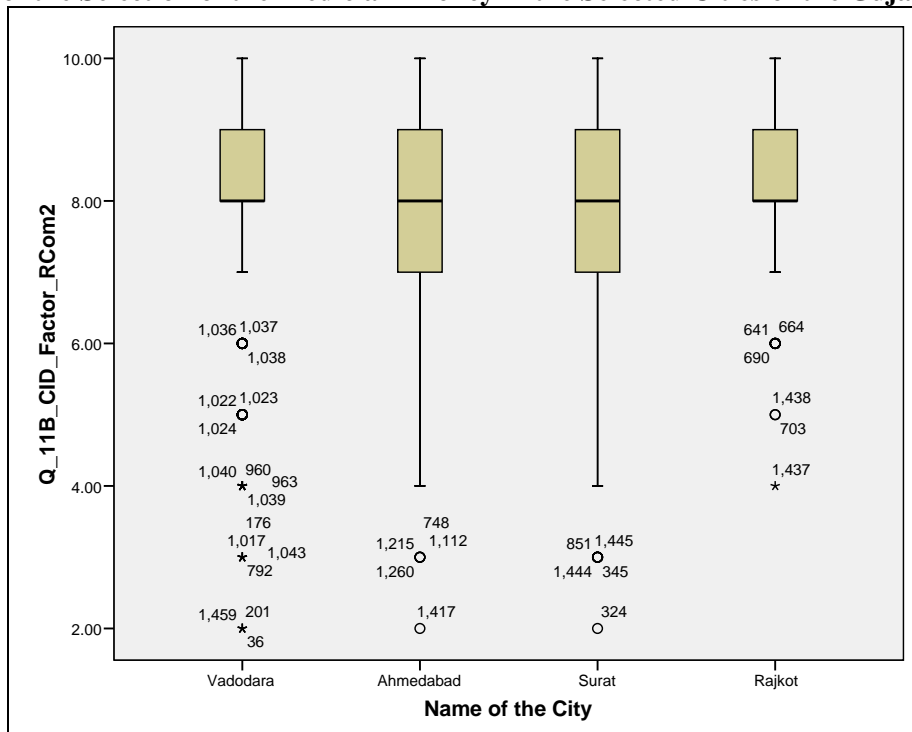
**Graph Number 6.12:**  
**City-wise Box Plot for Component 1 for Opinion of the Selected Medclaim Policyholders' on CID Factor of the Selection of the Medclaim Policy in the Selected Cities of the Gujarat State**



From the above box plot interpretation can be made that the component 1 of the Factor CID has higher median value in Vadodara, as compared to Ahmedabad, Surat and Rajkot. However, there is less variation in Surat with more of the extreme points and outliers, as compared to the Ahmedabad, Surat and Rajkot. So finally it can be concluded that component 1 was important for the selection of the mediclaim policy by the selected mediclaim policyholders in Vadodara, as compared to the other selected cities, namely, Ahmedabad, Surat and Rajkot. That means the four criteria, i.e., Coverage for Ayurvedic Treatments, Coverage for Naturopathy Treatments, Coverage for HIV infection and Coverage for Cancer, to make the selection of the mediclaim policy in Vadodara.

Following Box plot explain selection of Mediclaim Policy and total score of component 2 as a criteria.

**Graph Number 6.13**  
**City-wise Box Plot for Component 2 for Opinion of the Selected Mediclaim Policyholders' on CID**  
**Factor of the Selection of the Mediclaim Policy in the Selected Cities of the Gujarat State**



From the above box plot, interpretation can be made that the component 2 of the Factor CID has higher median value in Vadodara and Rajkot, as compared to Ahmedabad and Surat. However, high variation is found in the four selected cities with more of the extreme points and outliers in Vadodara as compared to the Ahmedabad, Surat and Rajkot. So, finally it can be concluded that component 2 was important for the selection of the mediclaim policy by the selected mediclaim policyholders in Vadodara as compared to the other selected cities viz., Ahmedabad, Surat and Rajkot respectively.

That means the two criteria that is coverage of the various illness and Diseases and coverage for the Allopathic treatments were more important in making the selection of the mediclaim policy in Vadodara City.

#### 6.4.2 Factor Analysis of Opinion of the Selected Mediclaim Policyholders' On CMEx Criteria of the Selection of the Mediclaim Policy in the Selected Cities of the Gujarat State

**Table Number 6.67**

**Total Variance on Opinion of the Selected Mediclaim Policyholders' on CMEx Factor of the Selection of the Mediclaim Policy in the Selected Cities of the Gujarat State**

Component	Initial Eigenvalues			Extraction Sums of Squared Loadings			Rotation Sums of Squared Loadings		
	Total	Percentages of Variance	Cumulative percent	Total	Percentages of Variance	Cumulative per cent	Total	Percentages of Variance	Cumulative percent
01	4.869	40.579	40.579	4.869	40.579	40.579	3.812	31.768	31.768
02	1.517	12.645	53.224	1.517	12.645	53.224	2.575	21.456	53.224

The first two components (factors) in the initial solution have an Eigenvalues over, and it accounted for 53 per cent of the observed variations for the selection of the mediclaim policy in the selected cities. According to Kaiser Criterion, only the first two factors should be used because subsequent Eigenvalues are all less than 1.

**Table Number 6.68**

**Communalities and Rotated Component Matrix of Opinion of the Selected Mediclaim Policyholders' on CMEx Factor of the Selection of the Mediclaim Policy in the Selected Cities of the Gujarat State**

Sr. No.	Selected Criteria	Communalities Extraction	Rotated Component	
			1	2
12	Coverage for the Room Boarding Expenses	0.554	0.735	0.115
13	Coverage of the Nursing Expenses	0.647	0.796	0.118
14	Coverage of Pre-hospitalization Expenses	0.626	0.767	0.193
15	Coverage of Post-hospitalization Expenses	0.561	0.683	0.308
16	Coverage in the period of loss of income during the hospitalization	0.486	0.169	0.677
17	Domiciliary Hospitalization Cover	0.488	0.175	0.676
18	Provision of giving Surgeon, anesthetist, medical practitioner, consultants, specialist's fees	0.457	0.643	0.209
19	Coverage of payment of Professional fees related to Anesthesia/ blood/ oxygen/ operation/ surgical/appliances/ medicines	0.569	0.726	0.206
20	Coverage of Diagnostic material and X-Rays, dialysis, chemotherapy, radiotherapy, pacemaker, artificial limbs and cost of organs and similar expenses	0.516	0.690	0.200
21	Renewable Discount Offers	0.515	0.258	0.670
22	Bonus for the Claim Free Years	0.544	0.168	0.718
23	Provision for Copayment Discounts	0.423	0.114	0.641

All the extracted communalities are acceptable and all criteria are fit for the factor solution as their extraction values are large enough. Factor loadings were used to measure correlation between criteria and the factors. A factor loading close to 1 indicates a strong correlation between a criteria and factor, while a loading closer to zero indicated weak correlation.

The factors are rotated with the use of Varimax with Kaiser Normalization rotation method. Principle Component Analysis (PCA) method is used for factor extraction and consider only those factors for interpretation purpose whose values are greater than 0.7. From the above table, it becomes clear that how much different criteria were correlated with two components. The criteria 12 (Coverage for the Room Boarding Expenses), criteria 13 (Coverage of the Nursing Expenses), criteria 14 (Coverage of Pre-hospitalization Expenses) and criteria 19 (Coverage of payment of Professional fees related to Anesthesia/ blood/ oxygen/ operation/ surgical/appliances/ medicines) were found as more correlated with component 1. Criteria 22(Bonus for the Claim Free Years), was more correlated with component 2.

**Table Number 6.69**  
**Component-wise Mean Value for Opinion of the Selected Mediclaim Policyholders' on CMEx**  
**Factor of the Selection of the Mediclaim Policy in the Selected Cities of the Gujarat State**

Component	Mean Value	Selected Criteria	Selected Factors
01	25.20	Coverage for the Room Boarding Expenses	CMEx Coverage of Medical Expenses
		Coverage of the Nursing Expenses	
		Coverage of Pre-hospitalization Expenses	
		Coverage of Post-hospitalization Expenses	
		Provision of giving Surgeon, anesthetist, medical practitioner, consultants, specialist's fees	
		Coverage of payment of Professional fees related to Anesthesia/ blood/ oxygen/ operation/ surgical/appliances/ medicines	
		Coverage of Diagnostic material and X-Rays, dialysis, chemotherapy , radiotherapy, pacemaker, artificial limbs and cost of organs and similar expenses	
02	15.93	Coverage in the period of loss of income during the hospitalization	
		Domiciliary Hospitalization Cover	
		Renewable Discount Offers	
		Bonus for the Claim Free Years	
		Provision for Copayment Discounts	

The above table indicates component wise mean value. The component 1 had higher mean value of 25.20, which found to be more correlated with Seven criteria viz., The criteria 12: Coverage for the Room Boarding Expenses; criteria 13: Coverage of the Nursing Expenses; criteria 14: Coverage of Pre-hospitalization Expenses; criteria 15: Coverage of Pre-hospitalization Expenses; criteria 18: Provision of giving Surgeon, anesthetist, medical practitioner, consultants, specialist's fees; criteria 19: Coverage of payment of Professional fees related to Anesthesia/ blood/ oxygen/ operation/ surgical/appliances/ medicines, and, criteria 20: Coverage of Diagnostic material and X-Rays, dialysis, chemotherapy , radiotherapy, pacemaker, artificial limbs and cost of organs and similar expenses. The component 1 make one group of Coverage for Medical Expenses factor CMEx, and it explained 31 per cent variation from data that means these three criteria were important for in selected cities by the different selected policyholders. The component 2 had second highest mean value of 15.93, and it is more correlated with 5 Criteria viz., Criteria 16: Coverage in the period of loss of income during the



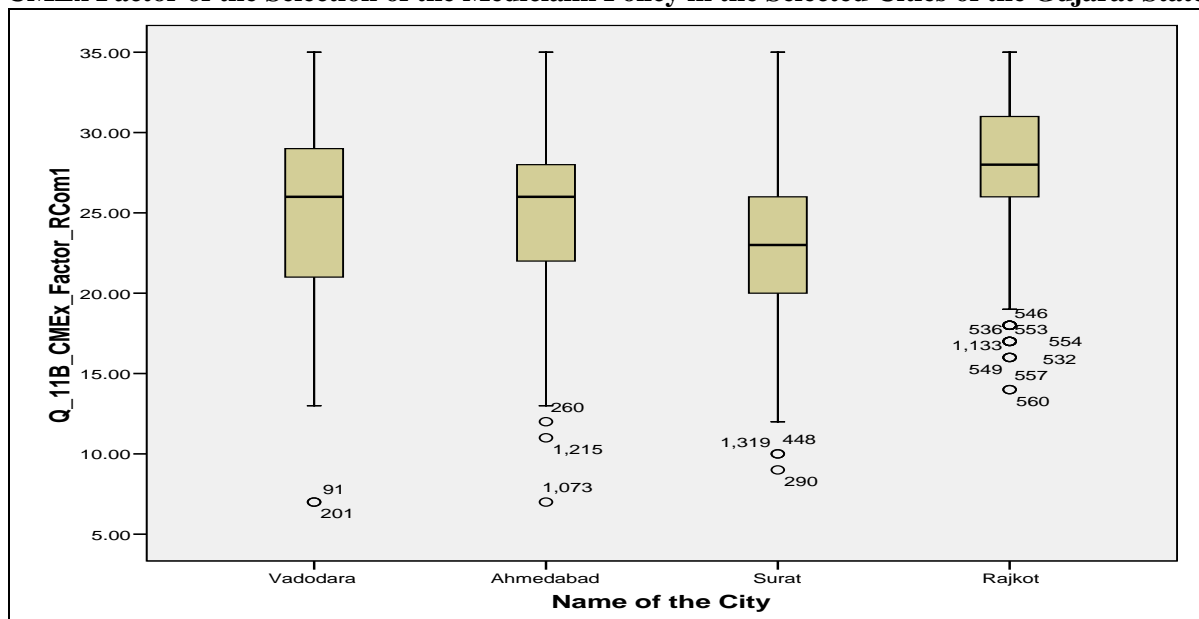
hospitalization; criteria 17: Domiciliary Hospitalization Cover; criteria 21: Renewable Discount Offers; Criteria 22: Bonus for the Claim Free Years, and criteria 23: Provision for Copayment Discounts, and it also explains 21 per cent variation from data.

**Importance of Components for Opinion of the Selected Mediciclaim Policyholders' on CMEx Factor of the Selection of the Mediciclaim Policy in the Selected Cities of the Gujarat State**

The importance of each component to the opinion of the selected policyholders for the Factor Coverage of Medical Expenses for the selection of the mediclaim policy in the selected cities can be understood with the help of below given box plots.

The following box plot explains the total score of component 1 for the four selected cities.

**Graph Number 6.14:**  
**City-wise Box Plot for Component 1 for Opinion of the Selected Mediciclaim Policyholders' on CMEx Factor of the Selection of the Mediciclaim Policy in the Selected Cities of the Gujarat State**



From the above box plot interpretation can be made that the component 1 of the Factor CMEx had higher median value in Rajkot with less variation, and high extreme points and outliers. The median value was second highest Vadodara and Ahmedabad. However, the variation was high in Vadodara in comparison to Ahmedabad with vice-versa state of the extreme points and outliers in Vadodara and Ahmedabad.

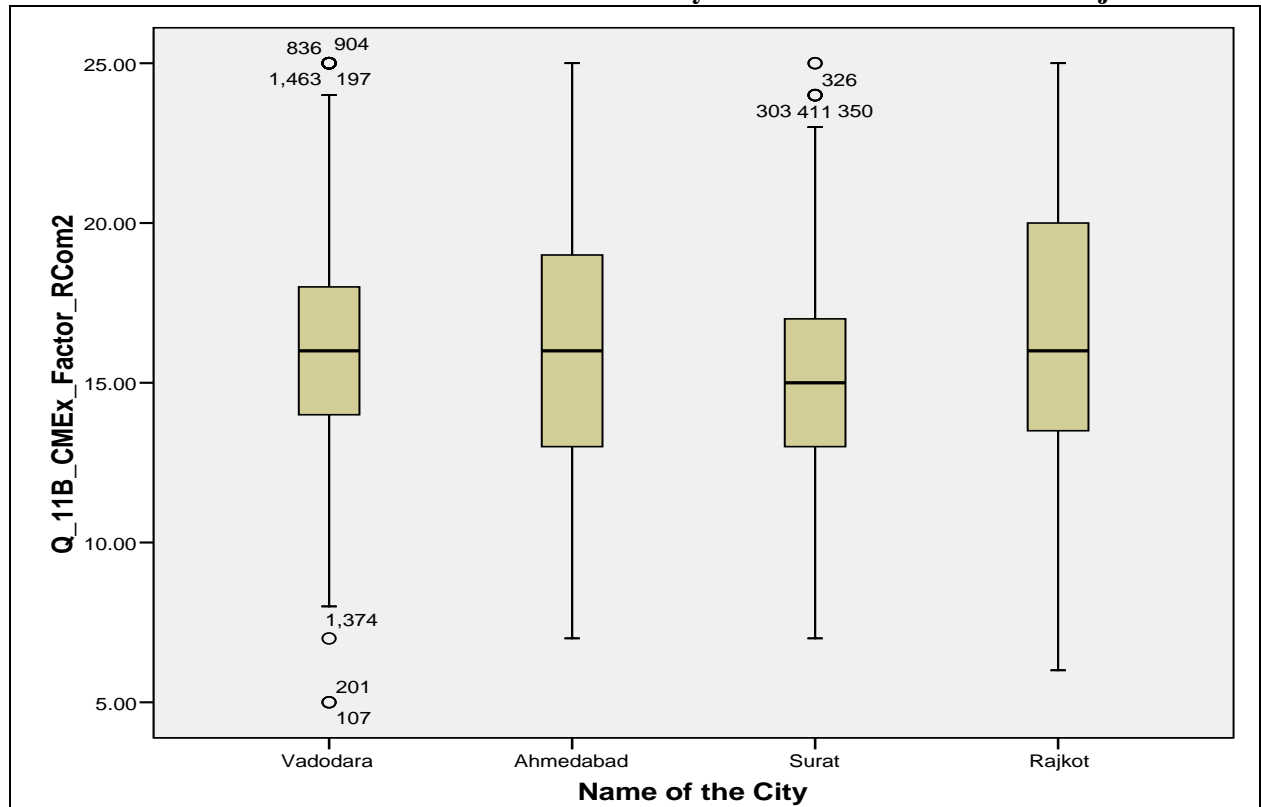
The median value was lowest in Rajkot with less variation and low extreme points and outliers in comparison to the other selected cities. So finally it can be concluded that component 1 was important for the selection of the mediclaim policy by the selected mediclaim policyholders in Rajkot followed by Vadodara and Ahmedabad and low importance in Rajkot.

That means the Seven criteria viz., criteria 12: Coverage for the Room Boarding Expenses; criteria 13: Coverage of the Nursing Expenses; criteria 14: Coverage of Pre-hospitalization Expenses; and criteria 19 :Coverage of payment of Professional fees related to Anesthesia/ blood/ oxygen/ operation/

surgical/appliances/ medicines, were found as more important in Rajkot as compared to the other selected cities.

Following Box plot explain selection of Mediclaim Policy and total score of component 2 as a criteria.

**Graph Number 6.15**  
**City-wise Box Plot for Component 2 for Opinion of the Selected Mediclaim Policyholders' on CMEEx Factor of the Selection of the Mediclaim Policy in the Selected Cities of the Gujarat State**



From the above box plot interpretation can be made that the component 2 of the Factor CMEEx had higher median value in Ahmedabad and Rajkot as compared to Vadodara and Surat. However, high variation was found in Ahmedabad in comparison to Vadodara, Surat and Rajkot. Out of the four selected cities, there box indicated few extreme points and outliers in the Vadodara and Surat. So, finally it can be concluded that component 2 was important for the selection of the mediclaim policy by the selected mediclaim policyholders in Ahmedabad, Rajkot, Vadodara and Surat chronologically. That means five criteria, that is viz., Criteria 22: Bonus for the Claim Free Years to make the selection of the mediclaim policy in Ahmedabad and Rajkot.

#### 6.4.3: Factor Analysis of Opinion of the Selected Medclaim Policyholders' on PI Criteria of the Selection of the Medclaim Policy in the Selected Cities of the Gujarat State

Table Number 6.70

##### Total Variance on Opinion of the Selected Medclaim Policyholders' on PI Factor of the Selection of the Medclaim Policy in the Selected Cities of the Gujarat State

Component	Initial Eigenvalues			Extraction Sums of Squared Loadings			Rotation Sums of Squared Loadings		
	Total	Percentages of Variance	Cumulative per cent	Total	Percentages of Variance	Cumulative per cent	Total	Percentages of Variance	Cumulative per cent
01	4.273	47.480	47.480	4.273	47.480	47.480	3.346	37.175	37.175
02	1.040	11.558	59.038	1.040	11.558	59.038	1.968	21.863	59.038

The first two components (factors) in the initial solution have an Eigenvalues over 1, and it accounted for 59 per cent of the observed variations in the opinion on PI criteria for the selection of the medclaim policy in the selected cities. According to Kaiser Criterion, only the first two factors should be used because subsequent Eigenvalues are all less than 1.

Table Number 6.71

##### Communalities and Rotated Component Matrix of Opinion of the Selected Medclaim Policyholders' on PI Factor of the Selection of the Medclaim Policy in the Selected Cities of the Gujarat State

Sr. No.	Selected Criteria	Communalities Extraction	Rotated Component	
			1	2
27	Critical Illness Coverage	0.711	0.015	0.843
28	Free Medical Check Up	0.562	0.536	0.524
29	Free Ambulance Services	0.566	0.353	0.665
30	Coverage for the day care procedures	0.383	0.261	0.561
31	Free 24 hour help line Facility	0.606	0.730	0.270
32	Free General Physician Consultations	0.665	0.787	0.216
33	Free health magazines	0.699	0.820	0.163
34	Family Discount	0.596	0.749	0.189
35	Online Cashless Card	0.524	0.692	0.210

All the extracted communalities are acceptable and all criteria are fit for the factor solution as their extraction values are large enough. Factor loadings were used to measure correlation between criteria and the factors. A factor loading close to 1 indicates a strong correlation between a criteria, and factor, while a loading closer to zero indicated weak correlation.

The factors are rotated with the use of Varimax with Kaiser Normalization rotation method. Principal Component Analysis (PCA) method is used for factor extraction, and consider only those factors for interpretation purpose whose values are greater than 0.7.

From the above table, it becomes clear that how much different criteria were correlated with two components. The criteria 27 (Critical Illness Coverage) was found as more correlated with component 1. Criteria 31 (Free 24 hour help line Facility), criteria 32 (Free General Physician Consultations), criteria 33 (Free health magazines) and criteria 34 (Family Discount) was found as more correlated with component 2.

**Table Number 6.72**

**Component-wise Mean Value for Opinion of the Selected Mediciam Policyholders' on PI Factor of the Selection of the Mediciam Policy in the Selected Cities of the Gujarat State**

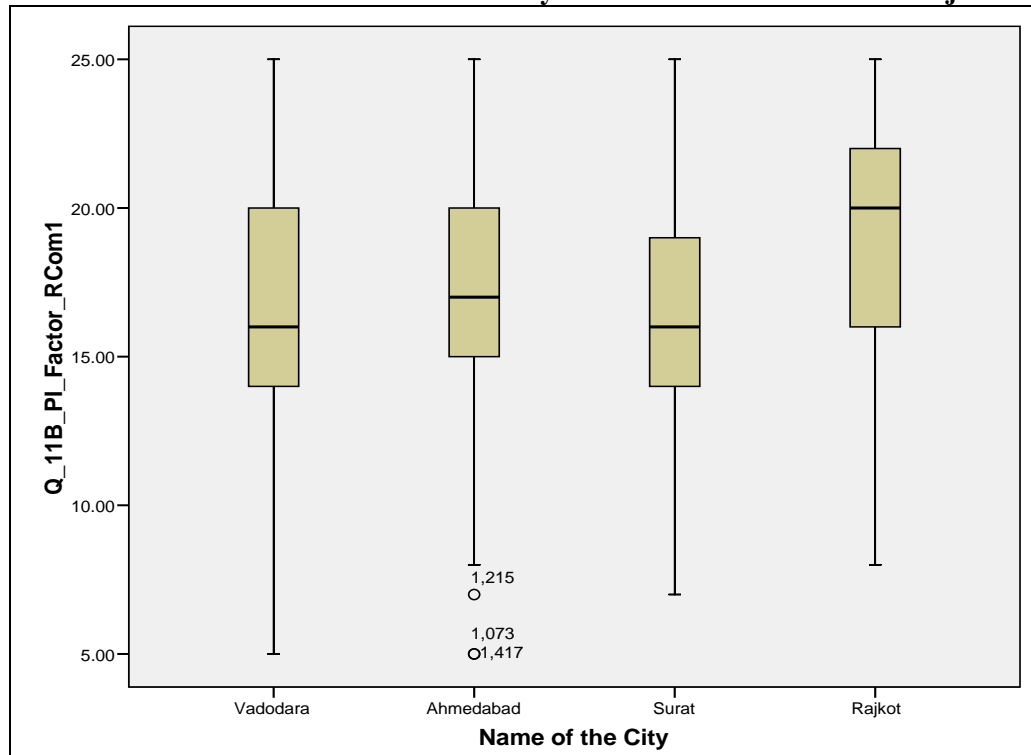
Component	Mean Value	Selected Criteria	Selected Factors
01	17.29	Critical Illness Coverage	PI Promotional Incentives
		Free Medical Check Up	
		Free Ambulance Services	
		Coverage for the day care procedures	
02	6.59	Free 24 hour help line Facility	
		Free General Physician Consultations	
		Free health magazines	
		Family Discount	
		Online Cashless Card	

The component 1 had higher mean value of 17.29 and which found to be more correlated with Four criteria viz., criteria 27: Critical Illness Coverage; criteria 28: Free Medical Check-Up; criteria 29: Free Ambulance Services, and criteria 30: Coverage for the Day Care Procedures respectively. The component 1 make one group of Promotional Incentives Factor PI, and it explained 37 per cent variation from data that means these three criteria were important for in selected cities by the different selected policyholders. The component 2 had second highest mean value of 6.59, and it was more correlated with 5 Criteria, viz., Criteria 31: Free 24 hour help line Facility; criteria 32: Free General Physician Consultations; criteria 33: Free health magazines; criteria 34: Family Discount, and, criteria 35: Online Cashless Card was found as more correlated with component 2, and it also explained 29 per cent variation from data.

**Importance of Components for Opinion of the Selected Mediciam Policyholders' on PI Factor of the Selection of the Mediciam Policy in the Selected Cities of the Gujarat State**

The importance of each component to the opinion of the selected policyholders for the Factor Promotional Incentives for the selection of the mediclaim policy in the selected cities can be understood with the help of below given box plots. The following box plot explains the total score of component 1 for the four selected cities.

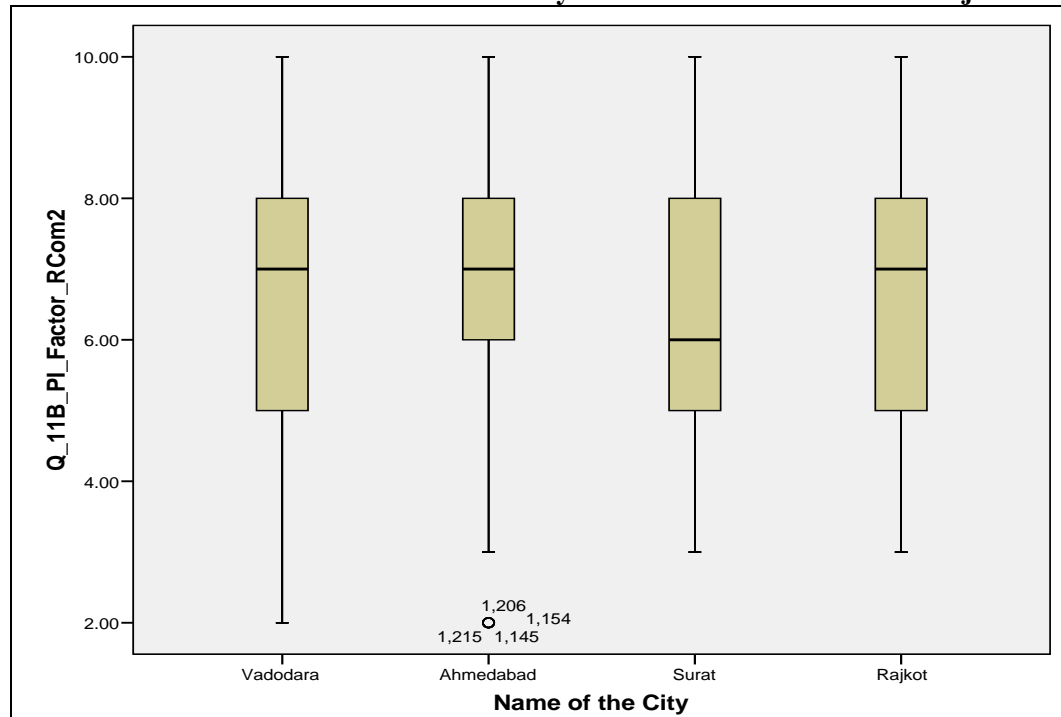
**Graph Number 6.16:**  
**City-wise Box Plot for Component 1 for Opinion of the Selected Mediciclaim Policyholders' on PI**  
**Factor of the Selection of the Mediciclaim Policy in the Selected Cities of the Gujarat State**



From the above box plot interpretation can be made that the component 1 of the Factor PI had highest median value in Rajkot with highest variation in comparison to the other selected cities. The median value was second highest in Ahmedabad followed by Vadodara and Surat. However, the variation was at the same level in Vadodara, Ahmedabad and Surat, with few extreme points and outliers in Ahmedabad. So, finally it can be concluded that component 1 was important for the selection of the mediclaim policy by the selected mediclaim policyholders in Rajkot followed by Ahmedabad, Vadodara and Surat. That means the four criteria viz., the criteria 27: Critical Illness Coverage; were found as more important in Rajkot as compared to the other selected cities.

Following Box plot explain selection of Mediciclaim Policy and total score of component 2 as a criteria.

**Graph Number 6.17**  
**City-wise Box Plot for Component 2 for Opinion of the Selected Mediciclaim Policyholders' on PI**  
**Factor of the Selection of the Mediciclaim Policy in the Selected Cities of the Gujarat State**



From the above box plot interpretation can be made that the component 2 of the Factor PI had higher median value in Vadodara, Ahmedabad and Rajkot. However, high variation was found in Vadodara and Rajkot in comparison to Surat. The lowest median value was in Surat. The variation was less in Ahmedabad and Surat, with few extreme points and outliers in Ahmedabad. So, finally it can be concluded that component 2 was more important for the selection of the mediclaim policy by the selected mediclaim policyholders in Vadodara, Ahmedabad and Rajkot. High variation was found in Vadodara and Rajkot. Few extreme points and outliers were found in Ahmedabad.

That means Five criteria viz., Criteria 31: Free 24 hour help line Facility; criteria 32: Free General Physician Consultations; criteria 33: Free health magazines; and criteria 34: Family Discount, to make the selection of the mediclaim policy in Vadodara, Ahmedabad and Rajkot.

#### 6.4.4: Factor Analysis of Opinion of the Selected Mediciclaim Policyholders' on SeCo Criteria of the Selection of the Mediciclaim Policy in the Selected Cities of the Gujarat State

**Table Number 6.73:**

**Total Variance on Opinion of the Selected Mediciclaim Policyholders' on SeCo Factor of the Selection of the Mediciclaim Policy in the Selected Cities of the Gujarat State**

Component	Initial Eigenvalues			Extraction Sums of Squared Loadings			Rotation Sums of Squared Loadings		
	Total	Percentages of Variance	Cumulative per cent	Total	Percentages of Variance	Cumulative per cent	Total	Percentages of Variance	Cumulative per cent
01	4.411	55.138	55.138	4.411	55.138	55.138	3.055	38.193	38.193
02	1.002	12.529	67.666	1.002	12.529	67.666	2.358	29.473	67.666

The first two components (factors) in the initial solution have an Eigenvalues over 1, and it accounted for about 67 per cent of the observed variations in the opinion on SeCo criteria for the selection of the mediclaim policy in the selected cities. According to Kaiser Criterion, only the first two factors should be used because subsequent Eigenvalues are all less than 1.

**Table Number 6.74**

**Communalities and Rotated Component Matrix of Opinion of the Selected Mediciclaim Policyholders' on SeCo Factor of the Selection of the Mediciclaim Policy in the Selected Cities of the Gujarat State**

Sr. No.	Selected Criteria	Communalities Extraction	Rotated Component	
			1	2
47	Easy Purchase from the Company's website	0.653	0.782	0.203
48	Easy Purchase from Company's Physical Office	0.699	0.827	0.124
49	Reminders for the payment of the premium by the Company	0.660	0.777	0.238
50	Online Payment of Premium	0.580	0.617	0.446
51	Regular Updates made by the Company	0.633	0.658	0.446
52	Online Filling of the Claim	0.662	0.515	0.630
53	Online Claim Settlements	0.765	0.236	0.842
54	Online Checking of Status for Claim Settlement	0.763	0.151	0.860

All the extracted communalities are acceptable and all criteria are fit for the factor solution as their extraction values are large enough. Factor loadings were used to measure correlation between criteria and the factors. A factor loading close to 1 indicates a strong correlation between a criteria and factor, while a loading closer to zero indicated weak correlation. The factors are rotated with the use of Varimax with Kaiser Normalization rotation method. Principal Component Analysis (PCA) method is used for factor extraction and consider only those factors for interpretation purpose whose values are greater than 0.7.

From the above table it becomes clear that how much different criteria were correlated with two components. The criteria 47 (Easy Purchase from the Company's website), criteria 48 (Easy Purchase from Company's Physical Office) and criteria 49 (Reminders for the payment of the premium by the Company) were more correlated with component 1. Criteria 53 (Online Claim Settlements) and criteria 54 (Online Checking of Status for Claim Settlement) were more correlated with component 2.

**Table Number 6.75**  
**Component-wise Mean Value for Opinion of the Selected Mediciclaim Policyholders' on SeCo**  
**Factor of the Selection of the Mediciclaim Policy in the Selected Cities of the Gujarat State**

Component	Mean Value	Selected Criteria	Selected Factors
01	17.62	Easy Purchase from the Company's website	SeCo Services provided by the Company
		Easy Purchase from Company's Physical Office	
		Reminders for the payment of the premium by the Company	
		Online Payment of Premium	
		Regular Updates made by the Company	
02	9.92	Online Filling of the Claim	
		Online Claim Settlements	
		Online Checking of Status for Claim Settlement	

The above table indicates component wise mean value. The component 1 had higher mean value of 17.29 and which found to be more correlated with Five criteria viz/. Criteria 47: Easy Purchase from the Company's website; criteria 48: Easy Purchase from Company's Physical Office; criteria 49: Reminders for the payment of the premium by the Company; criteria 50: Online Payment of Premium, and criteria 51: Regular Updates made by the Company. The component 1 make one group of Promotional Incentives Factor SeCo, and it explained 38 per cent variation from data that means these three criteria were important for in selected cities by the different selected policyholders. The component 2 had second highest mean value of 9.92, and it was found as more correlated with three Criteria viz., Criteria 52: Online Filling of the Claim, criteria 53: Online Claim Settlements, and criteria 54: Online Checking of Status for Claim Settlement were found as more correlated with component 2, and it also explained 29 per cent variation from data.

**Importance of Components for Opinion of the Selected Mediciclaim Policyholders' on SeCo Factor of the Selection of the Mediciclaim Policy in the Selected Cities of the Gujarat State**

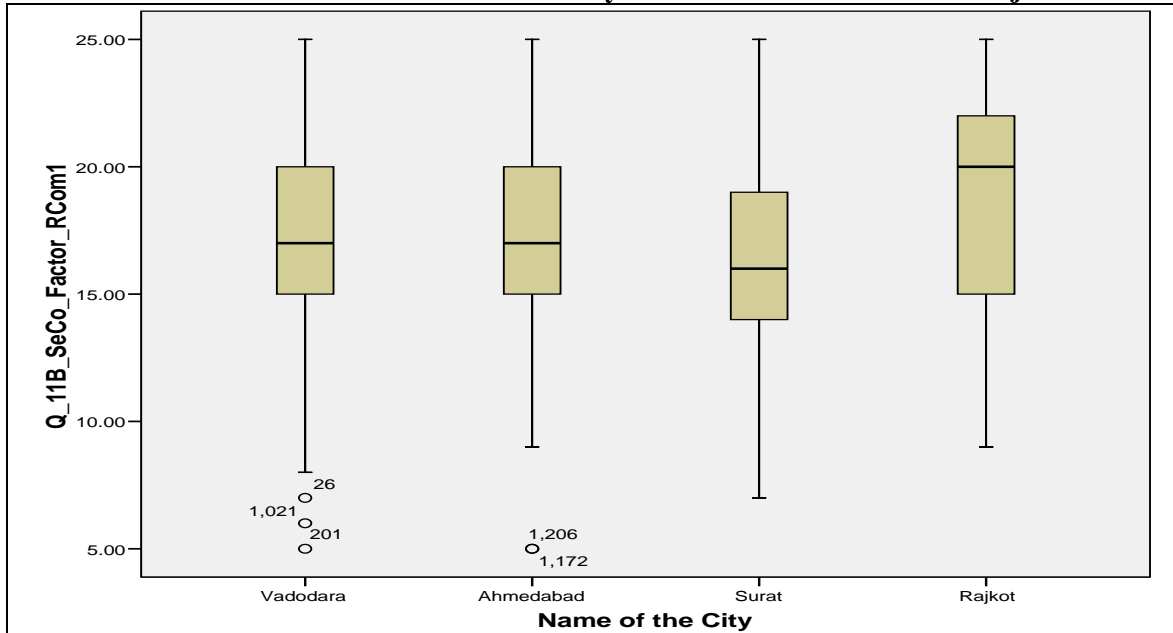
The importance of each component to the opinion of the selected policyholders for the Factor SeCo for the selection of the mediclaim policy in the selected cities can be understood with the help of below given box plots.

The following box plot explains the total score of component 1 for the four selected cities.



**Graph Number 6.18**

**City-wise Box Plot for Component 1 for Opinion of the Selected Medclaim Policyholders' on SeCo Factor of the Selection of the Medclaim Policy in the Selected Cities of the Gujarat State**

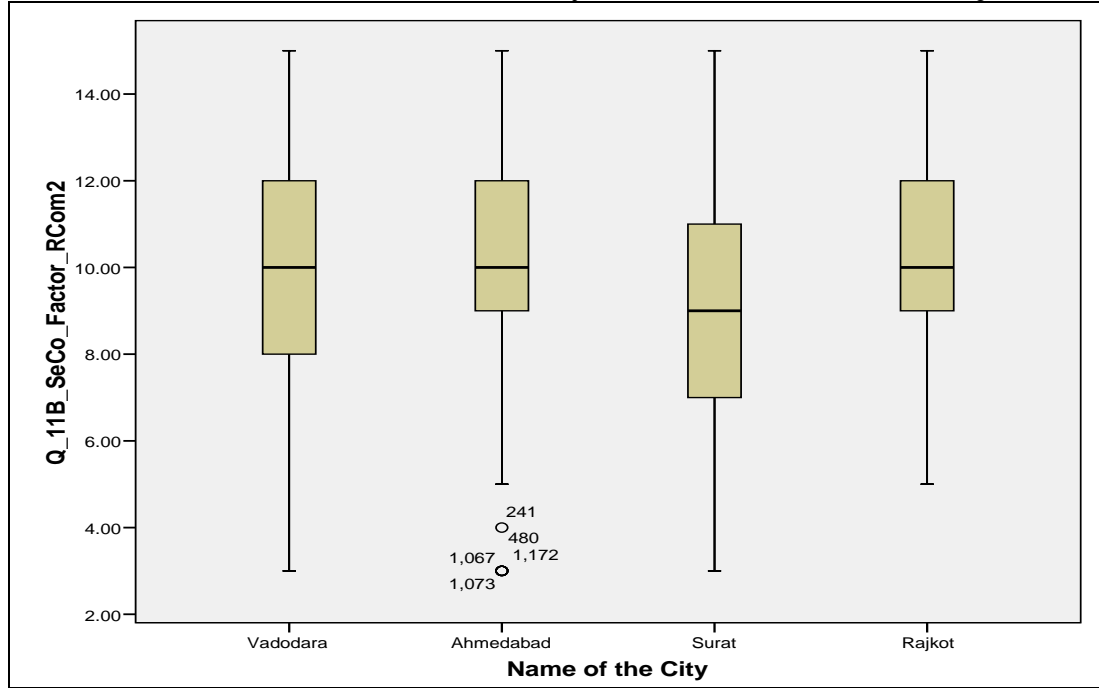


From the above box plot interpretation can be made that the component 1 of the Factor SeCo had highest median value in Rajkot with highest variation in comparison to the other selected cities. The median value was second highest in Ahmedabad and Vadodara followed by Surat. However, the variation was at the same level in Vadodara, Ahmedabad and Surat, with few extreme points and outliers in Vadodara and Ahmedabad. So, finally it can be concluded that component 1 was important for the selection of the medclaim policy by the selected medclaim policyholders in Rajkot followed by Vadodara, Ahmedabad and Surat. That means the Five criteria viz., criteria 47: Easy Purchase from the Company's website; criteria 48: Easy Purchase from Company's Physical Office; and criteria 49: Reminders for the payment of the premium by the Company were found as more important in Rajkot as compared to the other selected cities.

Following Box plot explain Selected Cities and total score of component 2 as a criteria.

**Graph Number 6.19**

**City-wise Box Plot for Component 2 for Opinion of the Selected Mediclaim Policyholders' on SeCo Factor of the Selection of the Mediclaim Policy in the Selected Cities of the Gujarat State**



From the above box plot interpretation can be made that the component 2 of the Factor SeCo had higher median value in Vadodara, Ahmedabad and Rajkot. However, high variation was found in Vadodara and Surat in comparison to Ahmedabad and Rajkot. The lowest median value was in Surat. The variation was less in Ahmedabad and Rajkot, with few extreme points and outliers in Ahmedabad. So, finally it can be concluded that component 2 was more important for the selection of the mediclaim policy by the selected mediclaim policyholders in Vadodara, Ahmedabad and Rajkot. That means three criteria viz., Criteria 53: Online Claim Settlements, and criteria 54: Online Checking of Status for Claim Settlement to make the selection of the mediclaim policy in Vadodara, Ahmedabad and Rajkot.

#### **6.4.5: Factor Analysis of Opinion of the Selected Mediclaim Policyholders' on CMP<sub>x</sub> Criteria of the Selection of the Mediclaim Policy in the Selected Cities of the Gujarat State**

**Table Number 6.76**

**Total Variance on Opinion of the Selected Mediclaim Policyholders' on CMP<sub>x</sub> Factor of the Selection of the Mediclaim Policy in the Selected Cities of the Gujarat State**

Component	Initial Eigenvalues			Extraction Sums of Squared Loadings		
	Total	Percentages of Variance	Cumulative percent	Total	Percentages of Variance	Cumulative percent
01	4.279	61.126	61.126	4.279	61.126	61.126

The first components (factor) in the initial solution have an Eigenvalues over 1, and it accounted for about 61 per cent of the observed variations in the opinion on CMPx criteria for the selection of the mediclaim policy in the selected cities. According to Kaiser Criterion, only the first two factors should be used because subsequent Eigenvalues are all less than 1.

**Table Number 6.77**  
**Communalities and Rotated Component Matrix of Opinion of the Selected Mediclaim Policyholders' on CMP<sub>x</sub> Factor of the Selection of the Mediclaim Policy in the Selected Cities of the Gujarat State**

Sr. No.	Selected Criteria	Communalities Extraction	Component
			1
61	Easy purchase of the MP	0.404	0.635
62	Easy Claim Filling Procedure	0.611	0.782
63	Easy Claim Settlement Procedure	0.628	0.793
64	Speedy Claim Settlement Procedure	0.677	0.823
65	Simple Complaint Handling System	0.677	0.823
66	Prompt Address to the Complaints	0.662	0.814
67	Providing Redressal for the Complaints	0.620	0.787

All the extracted communalities are acceptable and all criteria are fit for the factor solution as their extraction values are large enough. Factor loadings were used to measure correlation between criteria and the factors. A factor loading close to 1 indicates a strong correlation between a criteria and factor, while a loading closer to zero indicated weak correlation. Principle Component Analysis (PCA) method is used for factor extraction and consider only those factors for interpretation purpose whose values are greater than 0.7. From the above table it becomes clear that how much different criteria were correlated with one component which was created. The criteria 62 (Easy Claim Filling Procedure), criteria 63 (Easy Claim Settlement Procedure), criteria 64 (Speedy Claim Settlement Procedure), criteria 65 (Simple Complaint Handling System), criteria 66 (Prompt Address to the Complaints) and criteria 67 (Providing Redressal for the Complaints) were found as more correlated with component 1.

**Table Number 6.78**  
**Component-wise Mean Value for Opinion of the Selected Mediclaim Policyholders' on CMP<sub>x</sub> Factor of the Selection of the Mediclaim Policy in the Selected Cities of the Gujarat State**

Component	Mean Value	Selected Criteria	Selected Factors
01	25.06	Easy purchase of the MP	CMP <sub>x</sub> Complexity of Operations
		Easy Claim Filling Procedure	
		Easy Claim Settlement Procedure	
		Speedy Claim Settlement Procedure	
		Simple Complaint Handling System	
		Prompt Address to the Complaints	
		Providing Redressal for the Complaints	

The above table indicates component wise mean value. The component 1 had higher mean value of 25.06, and which found to be more correlated with seven criteria.

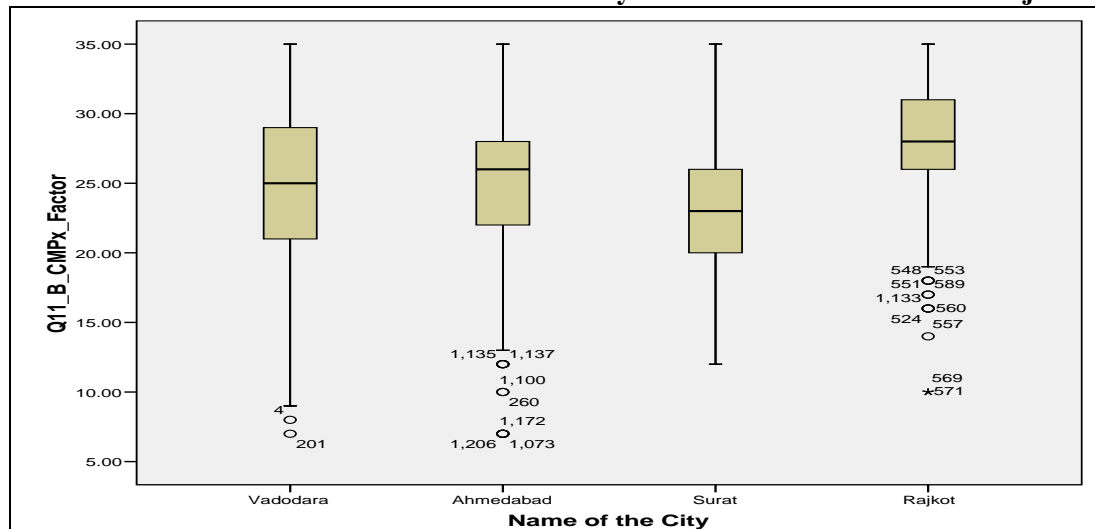
It included viz., criteria 62: Easy Claim Filling Procedure; criteria 63: Easy Claim Settlement Procedure; criteria 64: Speedy Claim Settlement Procedure; criteria 65: Simple Complaint Handling System; criteria 66: Prompt Address to the Complaints, and criteria 67: Providing Redressal for the Complaints respectively. The component 1 make one group of Complexity of the Operations Factor CMPx, and it explained 61 per cent variation from data that means these seven criteria were important for in selected cities by the different selected policyholders.

**Importance of Components for Opinion of the Selected Mediclaim Policyholders' on CMPx Factor of the Selection of the Mediclaim Policy in the Selected Cities of the Gujarat State:**

The importance of each component to the opinion of the selected policyholders for the Factor CMPx for the selection of the mediclaim policy in the selected cities can be understood as follows.

**Graph Number 6.20**

**City-wise Box Plot for Component 1 for Opinion of the Selected Mediclaim Policyholders' on CMPx Factor of the Selection of the Mediclaim Policy in the Selected Cities of the Gujarat State**



From the above box plot interpretation can be made that the component 1 of the Factor CMPx had highest median value in Rajkot, with less variation in comparison to the other selected cities, with extreme points and outliers. The median value was second highest in Ahmedabad followed by Vadodara and Surat. However, the variation was at the same level in Vadodara and Ahmedabad, followed by Surat, with extreme points and outliers in Ahmedabad and few extreme points and outliers in Vadodara. So, finally it can be concluded that component 1 was important for the selection of the mediclaim policy by the selected mediclaim policyholders in Rajkot, followed by Ahmedabad, Vadodara and Surat. That means the Seven criteria viz., criteria 62: Easy Claim Filling Procedure; criteria 63: Easy Claim Settlement Procedure; criteria 64: Speedy Claim Settlement Procedure; criteria 65: Simple Complaint Handling System; criteria 66: Prompt Address to the Complaints, and criteria 67: Providing Redressal for the Complaints) were found as more important in Rajkot as compared to the other selected cities.

#### 6.4.6: Factor Analysis of Opinion of the Selected Mediclaim Policyholders' on ImCo Criteria of the Selection of the Mediclaim Policy in the Selected Cities of the Gujarat State

**Table Number 6.79**

**Total Variance on Opinion of the Selected Mediclaim Policyholders' on ImCo Factor of the Selection of the Mediclaim Policy in the Selected Cities of the Gujarat State**

Component	Initial Eigenvalues			Extraction Sums of Squared Loadings		
	Total	Percentages of Variance	Cumulative percent	Total	Percentages of Variance	Cumulative percent
01	2.656	66.396	66.396	2.656	66.396	66.396

The first components (factor) in the initial solution have an Eigenvalues over 1 and it accounted for about 61 per cent of the observed variations in the opinion on ImCo criteria for the selection of the mediclaim policy in the selected cities. According to Kaiser Criterion, only the first two factors should be used because subsequent Eigenvalues are all less than 1.

**Table Number 6.80**

**Communalities and Rotated Component Matrix of Opinion of the Selected Mediclaim Policyholders' on ImCo Factor of the Selection of the Mediclaim Policy in the Selected Cities of the Gujarat State**

Sr. No.	Selected Criteria	Communalities Extraction	Component
			1
36	The market share of the company	0.634	0.796
37	Ownership type of the company public, private or the stand-alone	0.724	0.851
38	Disputes Redressal by the company	0.655	0.810
39	The Awards/Recognitions won by the company	0.643	0.802

All the extracted communalities are acceptable and all criteria are fit for the factor solution as their extraction values are large enough. Factor loadings were used to measure correlation between criteria and the factors. A factor loading close to 1 indicates a strong correlation between a criteria and factor, while a loading closer to zero indicated weak correlation. Principle Component Analysis (PCA) method is used for factor extraction and consider only those factors for interpretation purpose whose values are greater than 0.7. From the above table it becomes clear that how much different criteria were correlated with one component which was created. The criteria 36 (the market share of the company), criteria 37 (Ownership type of the company), criteria 38 (Disputes Redressal by the Company) and criteria 39 (the Awards/Recognitions won by the company) were more correlated with component 1.

**Table Number 6.81**

**Component-wise Mean Value for Opinion of the Selected Mediclaim Policyholders' on ImCo Factor of the Selection of the Mediclaim Policy in the Selected Cities of the Gujarat State**

Component	Mean Value	Selected Criteria	Selected Factors
01	13.99	The market share of the company	ImCo Image of the Company
		Ownership type of the company public, private or the stand-alone	
		Disputes Redressal by the company	
		The Awards/Recognitions won by the company	

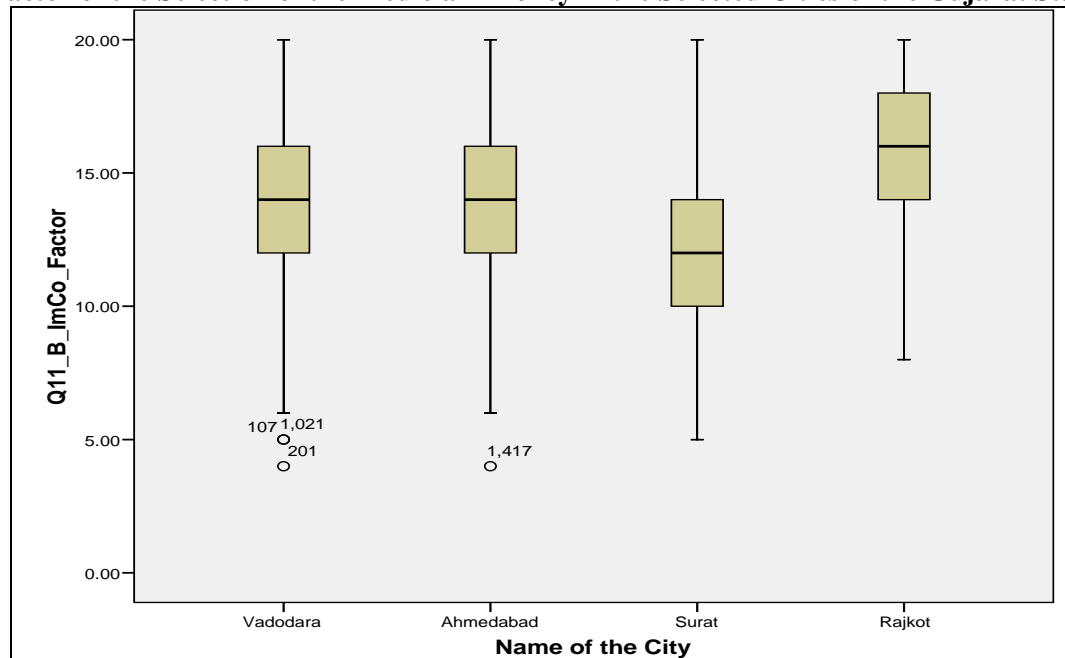
The above table indicated component wise mean value. The component 1 had higher mean value of 13.99 which was correlated with all seven criteria viz., criteria 36: the market share of the company; criteria 37: Ownership type of the company; criteria 38: Disputes Redressal by the Company, and criteria 39: the Awards/Recognitions won by the company respectively. The component 1 make one group of Image of the Company ImCo, and it explained 66 per cent variation from data that means these four criteria were important in selected cities by the different selected policyholders.

**Importance of Components for Opinion of the Selected Mediclaim Policyholders' on ImCo Factor of the Selection of the Mediclaim Policy in the Selected Cities of the Gujarat State:**

The importance of each component to the opinion of the selected policyholders for the Factor ImCo for the selection of the mediclaim policy in the selected cities can be understood with the help of below given box plots. The following box plot explains the total score of component 1 for the four selected cities.

**Graph Number 6.21**

**City-wise Box Plot for Component 1 for Opinion of the Selected Mediclaim Policyholders' on ImCo Factor of the Selection of the Mediclaim Policy in the Selected Cities of the Gujarat State**



From the above box plot interpretation can be made that the component 1 of the Factor ImCo had highest median value in Rajkot, followed by Vadodara and Ahmedabad. The median value was lowest in Surat. The variation is same in all the four selected cities for component 1 with extreme points and outliers in Vadodara and Ahmedabad. So, finally it can be concluded that component 1 was important for the selection of the mediclaim policy by the selected mediclaim policyholders in Rajkot followed by Vadodara and Ahmedabad, and, Surat. That means the four criteria viz., criteria 36: the market share of the company; criteria 37: Ownership type of the company; criteria 38: Disputes Redressal by the Company, and criteria 39: the Awards/Recognitions won by the company were found as more important in Rajkot as compared to the other selected cities.

#### 6.4.7: Factor Analysis of Opinion of the Selected Mediciclaim Policyholders' on NetH Criteria of the Selection of the Mediciclaim Policy in the Selected Cities of the Gujarat State

**Table Number 6.82**

**Total Variance on Opinion of the Selected Mediciclaim Policyholders' on NetH Factor of the Selection of the Mediciclaim Policy in the Selected Cities of the Gujarat State**

Component	Initial Eigenvalues			Extraction Sums of Squared Loadings		
	Total	Percentages of Variance	Cumulative percent	Total	Percentages of Variance	Cumulative percent
01	3.388	56.471	56.471	3.388	56.471	56.471

The first components (factor) in the initial solution have an Eigenvalues over 1 and it accounted for about 61 per cent of the observed variations in the opinion on NetH criteria for the selection of the mediclaim policy in the selected cities. According to Kaiser Criterion, only the first two factors should be used because subsequent Eigenvalues are all less than 1.

**Table Number 6.83**

**Communalities and Rotated Component Matrix of Opinion of the Selected Mediciclaim Policyholders' on NetH Factor of the Selection of the Mediciclaim Policy in the Selected Cities of the Gujarat State**

Sr. No.	Selected Criteria	Communalities Extraction	Component
			1
55	Network of the selected Hospital/s	0.564	0.751
56	Convenience of the Location of the Network Hospitals	0.597	0.773
57	Availability of the Medical related services at the Network Hospitals	0.645	0.803
58	Availability of the Cash Reimbursement Scheme at Network Hospitals	0.625	0.790
59	Availability of the Cashless Facility Network Hospitals	0.608	0.779
60	Availability of Choice of the Hospital	0.349	0.591

All the extracted communalities are acceptable and all criteria are fit for the factor solution as their extraction values are large enough. Factor loadings were used to measure correlation between criteria and the factors. A factor loading close to 1 indicates a strong correlation between a criteria and factor, while a loading closer to zero indicated weak correlation. Principle Component Analysis (PCA) method is used for factor extraction and consider only those factors for interpretation purpose whose values are greater than 0.7. From the above table it becomes clear that how much different criteria were correlated with one component which was created. The criteria 55 (Network of the selected Hospital/s), criteria 56 (Convenience of the Location of the Network Hospitals), criteria 57 (Availability of the Medical related services at the Network Hospitals), criteria 58 (Availability of the Cash Reimbursement Scheme at Network Hospitals) and criteria 59 (Availability of the Cashless Facility Network Hospitals) were found as more correlated with component 1.

**Table Number 6.84**

**Component-wise Mean Value for Opinion of the Selected Mediciclaim Policyholders' on NetH  
Factor of the Selection of the Mediciclaim Policy in the Selected Cities of the Gujarat State**

Component	Mean Value	Selected Criteria	Selected Factors
01	20.87	Network of the selected Hospital/s	NetH Network of the Hospitals
		Convenience of the Location of the Network Hospitals	
		Availability of the Medical related services at the Network Hospitals	
		Availability of the Cash Reimbursement Scheme at Network Hospitals	
		Availability of the Cashless Facility Network Hospitals	
		Availability of Choice of the Hospital	

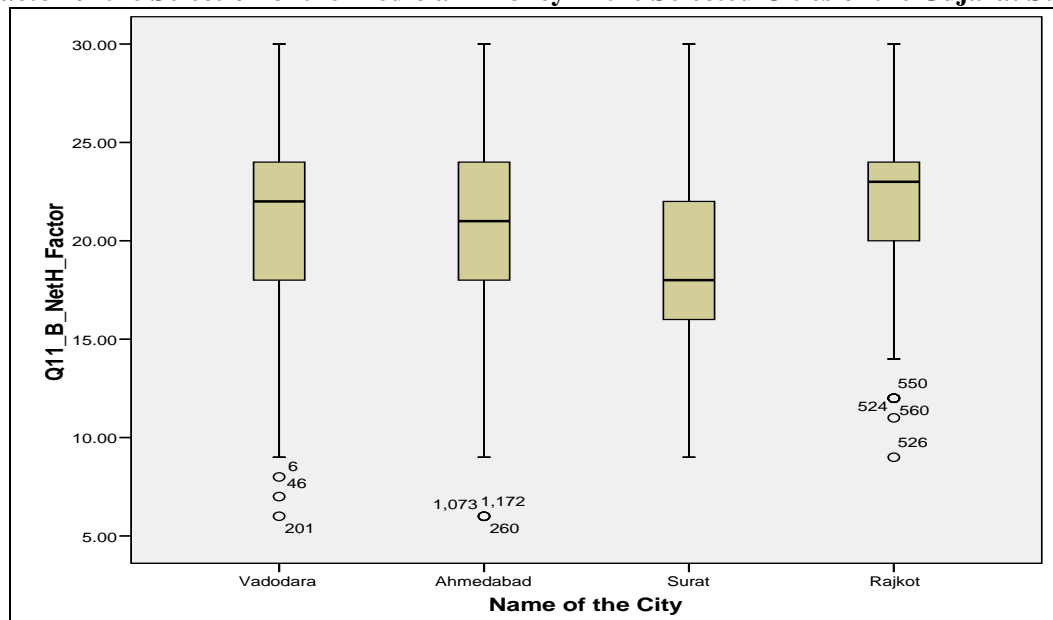
The above table indicates component wise mean value. The component 1 had higher mean value of 20.87 which was correlated with all Seven criteria viz., criteria 55: Network of the selected Hospital/s; criteria 56: Convenience of the Location of the Network Hospitals; criteria 57: Availability of the Medical related services at the Network Hospitals; criteria 58: Availability of the Cash Reimbursement Scheme at Network Hospitals; criteria 59: Availability of the Cashless Facility Network Hospitals, and criteria 60: Availability of Choice of the Hospital respectively. The component 1 make one group of Network of the Hospitals NetH, and it explained 56 per cent variation from data that means these four criteria were important in the selected cities by the different selected policyholders.

**Importance of Components for Opinion of the Selected Mediciclaim Policyholders' on Factor of the Selection of the Mediciclaim Policy in the Selected Cities of the Gujarat State:**

The importance of each component to the opinion of the selected policyholders for the Factor NetH for the selection of the mediclaim policy in the selected cities can be understood with the help of below given box plots. The following box plot explains the total score of component 1 for the four selected cities.

**Graph Number 6.22**

**City-wise Box Plot for Component 1 for Opinion of the Selected Mediciclaim Policyholders' on NetH  
Factor of the Selection of the Mediciclaim Policy in the Selected Cities of the Gujarat State**





From the above box plot interpretation can be made that the component 1 of the Factor NetH had highest median value in Rajkot followed by Vadodara, Ahmedabad and Surat. The variation is high in Vadodara, followed by Ahmedabad and Rajkot, and Surat with extreme points and outliers in Rajkot, Vadodara and Ahmedabad. So, finally it can be concluded that component 1 was important for the selection of the mediclaim policy by the selected mediclaim policyholders in Rajkot, followed by Vadodara, Ahmedabad, and Surat. That means the six criteria viz., criteria 55: Network of the selected Hospital/s; criteria 56: Convenience of the Location of the Network Hospitals; criteria 57: Availability of the Medical related services at the Network Hospitals; criteria 58: Availability of the Cash Reimbursement Scheme at Network Hospitals; and criteria 59: Availability of the Cashless Facility Network Hospitals, were found as more important in Rajkot followed by Vadodara, Ahmedabad and lastly Surat.

#### **6.4.8: Factor Analysis of Opinion of the Selected Mediclaim Policyholders' on SeAg Criteria of the Selection of the Mediclaim Policy in the Selected Cities of the Gujarat State**

**Table Number 6.85**

**Total Variance on Opinion of the Selected Mediclaim Policyholders' on SeAg Factor of the Selection of the Mediclaim Policy in the Selected Cities of the Gujarat State**

Component	Initial Eigenvalues			Extraction Sums of Squared Loadings		
	Total	Percentages of Variance	Cumulative percent	Total	Percentages of Variance	Cumulative percent
01	4.092	58.461	58.461	4.092	58.461	58.461

The first components (factor) in the initial solution have an Eigenvalues over 1, and it accounted for about 61 per cent of the observed variations in the opinion on SeAg criteria for the selection of the mediclaim policy in the selected cities. According to Kaiser Criterion, only the first two factors should be used because subsequent Eigenvalues are all less than 1.

**Table Number 6.86**

**Communalities and Rotated Component Matrix of Opinion of the Selected Mediclaim Policyholders' on SeAg Factor of the Selection of the Mediclaim Policy in the Selected Cities of the Gujarat State**

Sr. No.	Selected Criteria	Communalities Extraction	Component
			1
40	Easy Purchase from the Agents	0.484	0.696
41	Reminder calls for the premium payment	0.583	0.764
42	Timely collections of the premium by Agent	0.595	0.771
43	Regular Updates given by the Agent/s	0.626	0.791
44	Assistance of Agent in Filling of the Claims	0.658	0.811
45	Assistance of Agent in Settlement of the Claims	0.638	0.798
46	Help of the Agents for switching over to the other MP (Health Insurance Portability)	0.508	0.712

All the extracted communalities are acceptable and all criteria are fit for the factor solution as their extraction values are large enough.

Factor loadings were used to measure correlation between criteria and the factors. A factor loading close to 1 indicates a strong correlation between a criteria and factor, while a loading closer to zero indicated weak correlation. Principle Component Analysis (PCA) method is used for factor extraction and consider only those factors for interpretation purpose whose values are greater than 0.7. From the above table, it becomes clear that how much different criteria were correlated with one component which was created. The criteria 41 (Reminder calls for the premium payment), criteria 42 (Timely collections of the premium by Agent), criteria 43 (Regular Updates given by the Agent/s), criteria 44 (Assistance of Agent in Filling of the Claims), criteria 45(Assistance of Agent in Settlement of the Claims), and, criteria 46 (Help of the Agents for switching over to the Policy) were found as more correlated with component 1.

**Table Number 6.87**  
**Component-wise Mean Value for Opinion of the Selected Mediclaim Policyholders' on SeAg**  
**Factor of the Selection of the Mediclaim Policy in the Selected Cities of the Gujarat State**

Component	Mean Value	Selected Criteria	Selected Factors
01	25.44	Easy Purchase from the Agents	SeAg Services Provided by Insurance Agent
		Reminder calls for the premium payment	
		Timely collections of the premium by Agent	
		Regular Updates given by the Agent/s	
		Assistance of Agent in Filling of the Claims	
		Assistance of Agent in Settlement of the Claims	
		Help of the Agents for switching over to the other MP (Health Insurance Portability)	

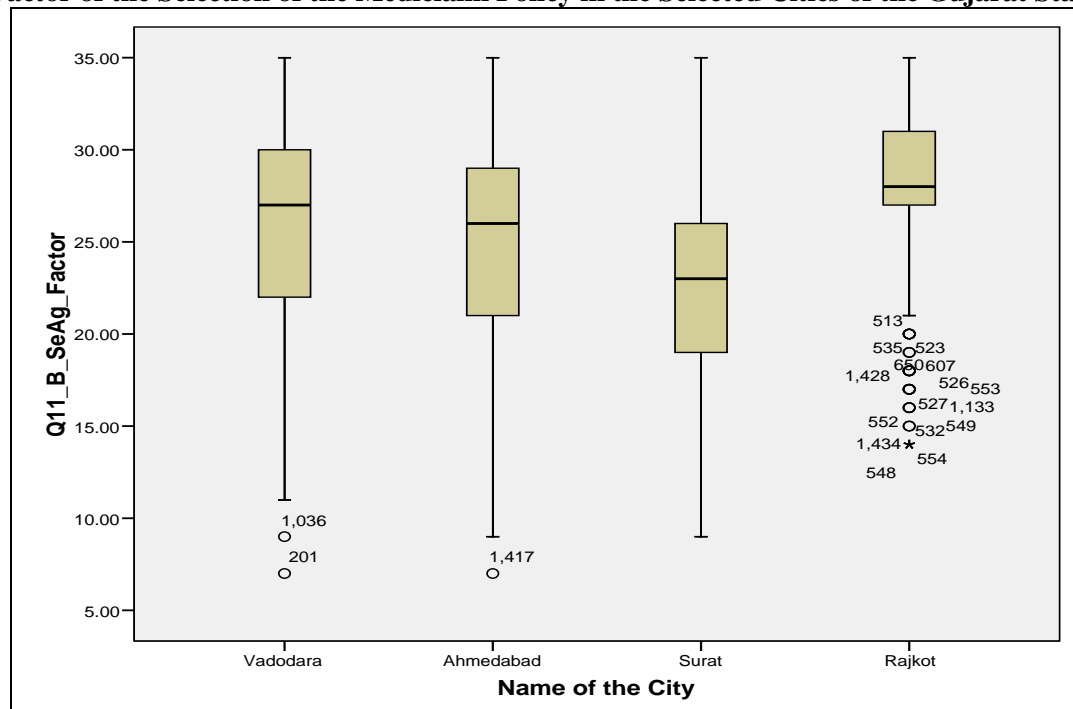
The above table indicates component wise mean value. The component 1 had higher mean value of 25.44 which was correlated with all seven criteria viz., criteria 41: Reminder calls for the premium payment; criteria 42: Timely collections of the premium by Agent; criteria 43: Regular Updates given by the Agent/s; criteria 44: Assistance of Agent in Filling of the Claims; criteria 45: Assistance of Agent in Settlement of the Claims, and criteria 46: Help of the Agents for switching over to the Policy respectively. The component 1 make one group of Services Provided by the Insurance Agent SeAg, and it explained 58 per cent variation from data that means these four criteria were important in the selected cities by the different selected policyholders.

**Importance of Components for Opinion of the Selected Mediclaim Policyholders' on Factor of the Selection of the Mediclaim Policy in the Selected Cities of the Gujarat State:**

The importance of each component to the opinion of the selected policyholders for the Factor SeAg for the selection of the mediclaim policy in the selected cities can be understood with the help of below given box plots.

The following box plot explains the total score of component 1 for the four selected cities.

**Graph Number 6.23**  
**City-wise Box Plot for Component 1 for Opinion of the Selected Mediciclaim Policyholders' on SeAg**  
**Factor of the Selection of the Mediciclaim Policy in the Selected Cities of the Gujarat State**



From the above box plot interpretation can be made that the component 1 of the Factor SeAg had highest median value in Rajkot followed by Vadodara, Ahmedabad and Surat. The variation is high in Vadodara and Ahmedabad, followed by Surat and Rajkot with extreme points and outliers in Rajkot, Vadodara and Ahmedabad. So, finally it can be concluded that component 1 was important for the selection of the mediclaim policy by the selected mediclaim policyholders in Rajkot followed by Vadodara, Ahmedabad, and Surat. That means the seven criteria viz., criteria 41: Reminder calls for the premium payment; criteria 42: Timely collections of the premium by Agent; criteria 43: Regular Updates given by the Agent/s; criteria 44: Assistance of Agent in Filling of the Claims; criteria 45: Assistance of Agent in Settlement of the Claims, and criteria 46: Help of the Agents for switching over to the Policy) were found as more important in Rajkot followed by Vadodara, Ahmedabad and Surat Cities of the Gujarat State.

## 6.5: MARKET PERFORMANCE ANALYSIS OF THE SELECTED CUSTOMERS' SATISFACTION FROM MEDICLAIM POLICY HOLDERS IN SELECTED CITIES:

Based on Mediclaim Policy Holders expectations and experiences as separately analysed for selected Cities, the researcher has computed 'Mean Importance Ratings' (Im) and 'Mean Performance Ratings' (Pm) for each of the selected features of the services provided by Mediclaim Policy Companies to evaluate whether the Mediclaim Policy Holders were delighted; satisfied; dissatisfied. These criteria were defined as: (1) Mediclaim Policy Holders were delighted if  $Im/Pm > 0.98$ ; (2) Mediclaim Policy Holders were satisfied if  $0.98 > Im/Pm > 0.92$ ; (3) Mediclaim Policy Holders were dissatisfied if  $Im/Pm < 0.92$  (Table Number: 6.88).

**Table Number: 6.88: Market Performance Analysis and Customers' Satisfaction Score**

Insurance service features	Lable	VADODARA				AHMEDABAD				SURAT				RAJKOT			
		Pm	Im	C.S.S .= Im/ Pm	Sat. level	Pm	Im	C.S.S. = Im/Pm	Sat. level	Pm	Im	C.S.S.= Im/Pm	Sat.l evel	Pm	Im	C.S.S. = Im/Pm	Sat. level
Age eligibility for Purchase of the Policy	A1	3.76	3.76	1.00	DE	3.92	3.67	0.94	S	3.53	3.30	0.93	S	4.04	3.77	0.93	S
Broad range of the Age eligibility for the Renewal of the Policy	A2	3.86	3.66	0.95	S	3.98	3.66	0.92	S	3.71	3.36	0.91	DS	4.12	3.89	0.95	S
Range of the premium offered by the companies	B1	3.82	3.61	0.95	S	3.93	3.66	0.93	S	3.76	3.33	0.89	DS	4.18	3.88	0.93	S
The range of the premium for the various age groups for purchase of policy	B2	3.85	3.65	0.95	S	3.93	3.60	0.92	S	3.79	3.52	0.93	S	4.18	3.88	0.93	S
Coverage of the various Illness/Diseases	C1	4.09	3.71	0.91	DS	4.10	3.75	0.92	S	4.01	3.40	0.85	DS	4.15	3.92	0.94	S
Coverage for the Allopathic Treatments	C2	4.02	3.75	0.93	S	3.89	3.51	0.90	DS	3.94	3.28	0.83	DS	4.13	3.97	0.96	S
Coverage for the Ayurvedic Treatments	C3	3.86	2.98	0.77	DS	3.78	2.78	0.74	DS	3.92	2.83	0.72	DS	4.03	2.91	0.72	DS
Coverage for the Naturopathy Treatments	C4	3.70	2.80	0.76	DS	3.69	2.72	0.74	DS	3.42	2.71	0.79	DS	4.03	2.68	0.66	DS
Coverage for HIV Infection	C5	3.99	2.97	0.75	DS	3.90	2.90	0.75	DS	3.64	2.88	0.79	DS	4.16	2.80	0.67	DS
Coverage for Cancer	C6	4.11	3.12	0.76	DS	4.05	3.09	0.76	DS	3.59	2.92	0.81	DS	4.21	2.87	0.68	DS
The time period for the inclusion of the Pre-existing Illness	C7	3.92	3.44	0.88	DS	3.96	3.43	0.87	DS	3.54	3.13	0.88	DS	4.13	3.67	0.89	DS
Coverage for the Room Boarding Expenses	D1	3.95	3.64	0.92	S	4.05	3.59	0.89	DS	3.69	3.37	0.91	DS	4.20	3.95	0.94	S
Coverage of the Nursing Expenses	D2	4.03	3.67	0.91	DS	4.00	3.64	0.91	DS	3.72	3.30	0.89	DS	4.18	3.98	0.95	S
Coverage of Pre-hospitalization Expenses	D3	4.00	3.58	0.89	DS	3.95	3.53	0.89	DS	3.54	3.01	0.85	DS	4.12	3.98	0.97	S
Coverage of Post-hospitalization Expenses	D4	3.97	3.56	0.90	DS	4.05	3.53	0.87	DS	3.64	3.09	0.85	DS	4.19	3.89	0.93	S
Coverage in the period of loss of income during the	D5	4.07	3.00	0.74	DS	4.04	3.06	0.76	DS	3.94	2.98	0.76	DS	4.19	3.21	0.77	DS

hospitalization																	
Domiciliary Hospitalization Cover	D6	3.89	3.03	0.78	DS	3.94	2.99	0.76	DS	3.71	2.83	0.76	DS	4.18	3.18	0.76	DS
Provision of giving Surgeon, anasthetist, medical practitioner, consultants, specialist's fees	D7	4.01	3.58	0.89	DS	4.00	3.60	0.90	DS	4.01	3.44	0.86	DS	4.20	3.98	0.95	S
Coverage of payment of Professional fees related to Anesthesia/ blood/ oxygen/ operation/ surgical/appliances/ medicines	D8	4.05	3.62	0.89	DS	4.05	3.64	0.90	DS	3.90	3.39	0.87	DS	4.18	4.03	0.96	S
Coverage of Diagnostic material and X-Rays, dialysis, chemotherapy , radiotherapy, pacemaker, artificial limbs and cost of organs and similar expenses	D9	4.01	3.62	0.90	DS	4.06	3.59	0.88	DS	3.98	3.25	0.82	DS	4.18	4.00	0.95	S
Renewable Discount Offers	D10	3.96	3.40	0.86	DS	4.05	3.37	0.83	DS	3.82	3.14	0.82	DS	4.05	3.45	0.85	DS
Bonus for the Claim Free Years	D11	3.98	3.36	0.84	DS	4.08	3.32	0.81	DS	3.80	3.09	0.81	DS	4.14	3.09	0.75	DS
Provision for Copayment Discounts	D12	3.77	3.23	0.85	DS	3.86	3.33	0.86	DS	3.68	3.28	0.89	DS	4.15	3.32	0.80	DS
Tax benefits	E1	4.19	3.85	0.92	S	3.99	3.70	0.93	S	3.93	3.36	0.86	DS	4.20	4.07	0.97	S
Coverage for the Health Risk	E2	4.10	3.76	0.92	S	4.10	3.74	0.91	DS	4.02	3.41	0.85	DS	4.20	3.97	0.95	S
Coverage for Increasing Health Care Expenditure	E3	4.02	3.64	0.91	DS	4.05	3.62	0.89	DS	4.01	3.42	0.85	DS	4.20	3.96	0.94	S
Critical Illness Coverage	F1	4.07	3.25	0.80	DS	4.09	3.33	0.81	DS	3.96	3.05	0.77	DS	4.17	3.34	0.80	DS
Free Medical Check Up	F2	3.95	3.25	0.82	DS	3.97	3.37	0.85	DS	3.73	3.10	0.83	DS	4.11	3.76	0.92	S
Free Ambulance Services	F3	3.98	3.35	0.84	DS	3.94	3.34	0.85	DS	4.07	3.35	0.82	DS	4.05	3.32	0.82	DS
Coverage for the day care procedures	F4	3.85	3.20	0.83	DS	3.87	3.20	0.83	DS	3.65	2.84	0.78	DS	4.19	3.00	0.72	DS
Free 24 hour help line Facility	F5	4.03	3.49	0.86	DS	4.01	3.49	0.87	DS	4.12	3.46	0.84	DS	4.16	3.80	0.91	DS
Free General Physician Consultations	F6	3.93	3.36	0.86	DS	3.95	3.42	0.87	DS	4.05	3.24	0.80	DS	4.08	3.77	0.92	S
Free health magazines	F7	3.74	3.27	0.88	DS	3.83	3.37	0.88	DS	3.69	3.25	0.88	DS	4.04	3.77	0.93	S
Family Discount	F8	3.94	3.40	0.86	DS	3.93	3.52	0.90	DS	3.71	3.11	0.84	DS	4.15	3.67	0.89	DS
Online Cashless Card	F9	4.01	3.47	0.86	DS	3.97	3.49	0.88	DS	3.99	3.33	0.83	DS	4.13	3.90	0.94	S
The market share of the company	G1	3.68	3.51	0.95	S	3.73	3.49	0.93	S	3.63	3.11	0.86	DS	4.16	3.92	0.94	S
Ownership type of the company public, private or the stand-alone	G2	3.76	3.59	0.95	S	3.79	3.50	0.92	S	3.51	3.05	0.87	DS	4.07	4.00	0.98	DE
Disputes Redressal by the company	G3	3.80	3.42	0.90	DS	3.81	3.48	0.91	DS	3.43	2.98	0.87	DS	4.12	3.86	0.94	S
The Awards/Recognitions won by the company	G4	3.67	3.50	0.95	S	3.82	3.60	0.94	S	3.55	3.13	0.88	DS	4.13	3.97	0.96	S
Easy Purchase from the Agents	H1	3.99	3.76	0.94	S	4.02	3.70	0.92	S	3.81	3.30	0.87	DS	4.16	4.05	0.98	DE
Reminder calls for the premium payment from Agent	H2	4.07	3.81	0.93	S	4.07	3.72	0.91	DS	3.84	3.35	0.87	DS	4.18	4.07	0.97	S
Timely collections of the premium by Agent	H3	4.09	3.83	0.94	S	4.01	3.59	0.89	DS	3.85	3.59	0.93	S	4.18	4.08	0.98	DE
Regular Updates given by the Agent/s	H4	4.09	3.66	0.90	DS	4.06	3.60	0.89	DS	3.99	3.42	0.86	DS	4.16	4.08	0.98	DE
Assistance of Agent in Filling of the Claims	H5	4.08	3.62	0.89	DS	3.98	3.61	0.91	DS	3.76	3.12	0.83	DS	4.10	3.99	0.97	S
Assistance of Agent in Settlement of the Claims	H6	4.10	3.62	0.88	DS	4.04	3.60	0.89	DS	3.79	3.17	0.84	DS	4.12	3.98	0.97	S
Help of the Agents for switching over to the other	H7	3.92	3.36	0.86	DS	3.94	3.42	0.87	DS	3.63	3.00	0.83	DS	4.10	3.85	0.94	S

Mediclaime Policy (Health Insurance Portability)																	
Easy Purchase from the Company's website	I1	3.84	3.46	0.90	DS	3.92	3.55	0.90	DS	3.54	3.10	0.87	DS	4.05	3.85	0.95	S
Easy Purchase from Company's Physical Office	I2	3.79	3.45	0.91	DS	3.90	3.54	0.91	DS	3.65	3.12	0.86	DS	4.03	3.85	0.96	S
Reminders for the payment of the premium by the Company	I3	3.89	3.53	0.91	DS	4.00	3.55	0.89	DS	3.79	3.34	0.88	DS	4.00	3.83	0.96	S
Online Payment of Premium	I4	3.97	3.54	0.89	DS	3.94	3.53	0.90	DS	3.96	3.44	0.87	DS	4.01	3.82	0.95	S
Regular Updates made by the Company	I5	3.97	3.47	0.88	DS	3.92	3.56	0.91	DS	3.92	3.41	0.87	DS	3.98	3.79	0.95	S
Online Filling of the Claim	I6	3.91	3.41	0.87	DS	3.91	3.44	0.88	DS	3.91	3.20	0.82	DS	4.00	3.74	0.94	S
Online Claim Settlements	I7	3.98	3.34	0.84	DS	3.92	3.34	0.85	DS	3.82	3.13	0.82	DS	3.98	3.40	0.85	DS
Online Checking of Status for Claim Settlement	I8	3.99	3.29	0.82	DS	4.01	3.21	0.80	DS	3.79	2.93	0.77	DS	3.93	3.16	0.80	DS
Network of the selected Hospital/s	J1	3.99	3.67	0.92	S	3.95	3.57	0.90	DS	3.88	3.14	0.81	DS	4.14	3.97	0.96	S
Convenience of the Location of the Network Hospitals	J2	4.08	3.60	0.88	DS	4.01	3.51	0.88	DS	3.87	3.18	0.82	DS	4.20	3.90	0.93	S
Availability of the Medical related services at the Network Hospitals	J3	4.06	3.63	0.89	DS	4.01	3.53	0.88	DS	3.89	3.19	0.82	DS	4.22	3.96	0.94	S
Availability of the Cash Reimbursement Scheme at Network Hospitals	J4	3.98	3.56	0.89	DS	3.83	3.60	0.94	S	3.61	3.14	0.87	DS	4.15	3.69	0.89	DS
Availability of the Cashless Facility Network Hospitals	J5	4.07	3.63	0.89	DS	3.99	3.57	0.89	DS	3.88	3.21	0.83	DS	4.13	3.72	0.90	DS
Availability of Choice of the Hospital	J6	4.09	3.15	0.77	DS	4.05	3.15	0.78	DS	4.02	2.98	0.74	DS	4.19	3.02	0.72	DS
Easy purchase of the Individual Mediclaime Policy	K1	4.07	3.86	0.95	S	4.09	3.74	0.92	S	3.89	3.50	0.90	DS	4.13	4.06	0.98	DE
Easy Claim Filling Procedure	K2	4.05	3.61	0.89	DS	4.07	3.72	0.91	DS	3.93	3.52	0.90	DS	4.14	4.07	0.98	DE
Easy Claim Settlement Procedure	K3	4.09	3.53	0.86	DS	4.04	3.62	0.90	DS	3.76	3.04	0.81	DS	4.16	4.03	0.97	S
Speedy Claim Settlement Procedure	K4	4.08	3.44	0.84	DS	4.08	3.57	0.87	DS	4.08	3.29	0.81	DS	4.15	3.97	0.96	S
Simple Complaint Handling System	K5	4.01	3.47	0.87	DS	4.05	3.51	0.87	DS	4.03	3.28	0.81	DS	4.10	3.88	0.95	S
Prompt Address to the Complaints	K6	4.03	3.41	0.85	DS	4.12	3.47	0.84	DS	4.00	3.19	0.80	DS	4.03	3.85	0.95	S
Providing Redressal for the Complaints	K7	4.03	3.50	0.87	DS	4.15	3.50	0.84	DS	4.03	3.22	0.80	DS	4.09	3.82	0.93	S

**Note: DE= Delighted; S= Satisfied and DS= Dissatisfied**

**Table Number: 6.89: Overall Market Performance Analysis and Customers' Satisfaction Score**

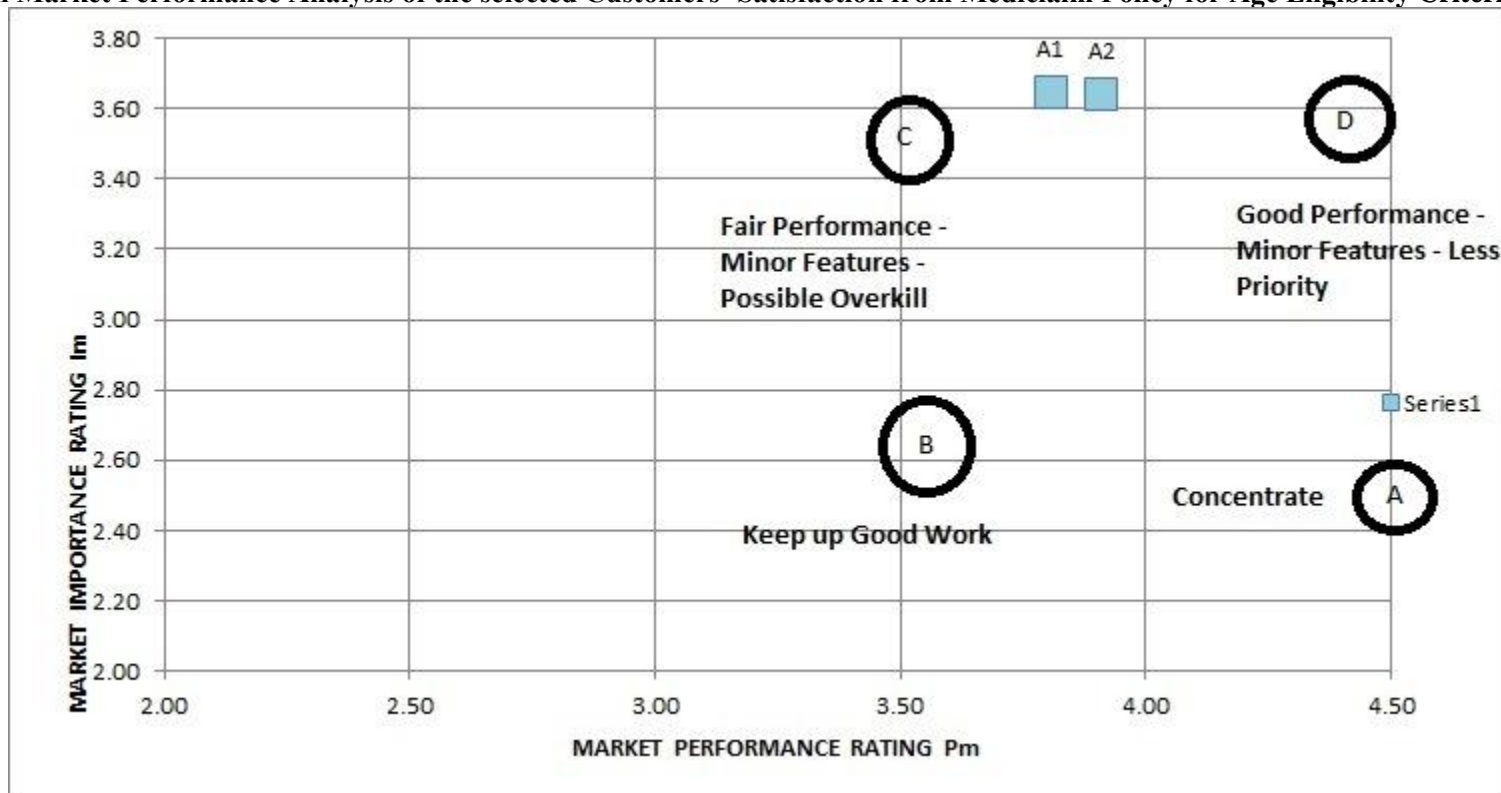
Insurance service features	Lable	Pm	Im	C.S.S.= Im/ Pm	Sat. level	Insurance service features	Lable	Pm	Im	C.S.S.= Im/Pm	Sat. level
Age eligibility for Purchase of the Policy	A1	3.81	3.65	0.96	S	Family Discount	F8	3.93	3.43	0.87	DS
Broad range of the Age eligibility for the Renewal of the Policy	A2	3.91	3.64	0.93	S	Online Cashless Card	F9	4.02	3.52	0.88	DS
Range of the premium offered by the companies	B1	3.90	3.62	0.93	S	The market share of the company	G1	3.77	3.50	0.93	S
The range of the premium for the various age groups for purchase of policy	B2	3.92	3.65	0.93	S	Ownership type of the company public, private or the stand-alone	G2	3.78	3.53	0.93	S
Coverage of the various Illness/Diseases	C1	4.09	3.70	0.91	DS	Disputes Redressal by the company	G3	3.79	3.43	0.90	DS
Coverage for the Allopathic Treatments	C2	3.99	3.63	0.91	DS	The Awards/Recognitions won by the company	G4	3.77	3.54	0.94	S
Coverage for the Ayurvedic Treatments	C3	3.88	2.88	0.74	DS	Easy Purchase from the Agents	H1	3.99	3.70	0.93	S
Coverage for the Naturopathy Treatments	C4	3.70	2.74	0.74	DS	Reminder calls for the premium payment from Agent	H2	4.05	3.74	0.92	S
Coverage for HIV Infection	C5	3.93	2.90	0.74	DS	Timely collections of the premium by Agent	H3	4.04	3.76	0.93	S
Coverage for Cancer	C6	4.01	3.03	0.76	DS	Regular Updates given by the Agent/s	H4	4.07	3.67	0.90	DS
The time period for the inclusion of the Pre-existing Illness	C7	3.90	3.42	0.88	DS	Assistance of Agent in Filling of the Claims	H5	3.99	3.58	0.90	DS
Coverage for the Room Boarding Expenses	D1	3.97	3.63	0.91	DS	Assistance of Agent in Settlement of the Claims	H6	4.03	3.59	0.89	DS
Coverage of the Nursing Expenses	D2	3.99	3.64	0.91	DS	Help of the Agents for switching over to the other Mediciclaim Policy (Health Insurance Portability)	H7	3.90	3.39	0.87	DS
Coverage of Pre-hospitalization Expenses	D3	3.92	3.53	0.90	DS	Easy Purchase from the Company's website	I1	3.84	3.48	0.91	DS
Coverage of Post-hospitalization Expenses	D4	3.97	3.52	0.89	DS	Easy Purchase from Company's Physical Office	I2	3.84	3.48	0.91	DS
Coverage in the period of loss of income during the hospitalization	D5	4.06	3.05	0.75	DS	Reminders for the payment of the premium by the Company	I3	3.92	3.55	0.91	DS

Domiciliary Hospitalization Cover	D6	3.92	3.01	0.77	DS	Online Payment of Premium	I4	3.97	3.57	0.90	DS
Provision of giving Surgeon, anasthetist, medical practitioner, consultants, specialist's fees	D7	4.04	3.63	0.90	DS	Regular Updates made by the Company	I5	3.95	3.54	0.90	DS
Coverage of payment of Professional fees related to Anesthesia/ blood/ oxygen/ operation/ surgical/appliances/ medicines	D8	4.04	3.65	0.90	DS	Online Filling of the Claim	I6	3.92	3.43	0.88	DS
Coverage of Diagnostic material and X-Rays, dialysis, chemotherapy , radiotherapy, pacemaker, artificial limbs and cost of organs and similar expenses	D9	4.05	3.60	0.89	DS	Online Claim Settlements	I7	3.93	3.31	0.84	DS
Renewable Discount Offers	D10	3.97	3.35	0.84	DS	Online Checking of Status for Claim Settlement	I8	3.95	3.17	0.80	DS
Bonus for the Claim Free Years	D11	4.00	3.25	0.81	DS	Network of the selected Hospital/s	J1	3.98	3.59	0.90	DS
Provision for Copayment Discounts	D12	3.85	3.28	0.85	DS	Convenience of the Location of the Network Hospitals	J2	4.04	3.55	0.88	DS
Tax benefits	E1	4.08	3.75	0.92	S	Availability of the Medical related services at the Network Hospitals	J3	4.04	3.57	0.88	DS
Coverage for the Health Risk	E2	4.10	3.72	0.91	DS	Availability of the Cash Reimbursement Scheme at Network Hospitals	J4	3.90	3.51	0.90	DS
Coverage for Increasing Health Care Expenditure	E3	4.06	3.65	0.90	DS	Availability of the Cashless Facility Network Hospitals	J5	4.02	3.55	0.88	DS
Critical Illness Coverage	F1	4.07	3.25	0.80	DS	Availability of Choice of the Hospital	J6	4.08	3.10	0.76	DS
Free Medical Check Up	F2	3.94	3.34	0.85	DS	Easy purchase of the Individual Medclaim Policy	K1	4.05	3.79	0.94	S
Free Ambulance Services	F3	4.00	3.34	0.84	DS	Easy Claim Filling Procedure	K2	4.05	3.70	0.92	S
Coverage for the day care procedures	F4	3.88	3.09	0.80	DS	Easy Claim Settlement Procedure	K3	4.02	3.55	0.88	DS
Free 24 hour help line Facility	F5	4.07	3.54	0.87	DS	Speedy Claim Settlement Procedure	K4	4.09	3.54	0.86	DS
Free General Physician Consultations	F6	3.98	3.42	0.86	DS	Simple Complaint Handling System	K5	4.04	3.52	0.87	DS
Free health magazines	F7	3.81	3.38	0.89	DS	Prompt Address to the Complaints	K6	4.05	3.46	0.86	DS
<b>Note: DE= Delighted; S= Satisfied and DS= Dissatisfied</b>						Providing Redressal for the Complaints	K7	4.07	3.50	0.86	DS



These overall ratings are separately provided in Graph Number 6.24 to 6.34 for all the selected eleven criteria in the Performance-Importance Matrix. The X-axis denotes mean performance ratings (Pm), and Y-axis means importance ratings (Im). These figures have been divided into four quadrants. The Quadrant A, shows customers' important service features, which were not being performed at the desired levels, and the Medclaim Policy Marketers are expected to concentrate on improving service performance on it. The Quadrant B indicates the customers' important service features that Medclaim Policy Marketers performed well and need to maintain the high performance. The Quadrant C reveals fair performance of Medclaim Policy Marketers on minor service features that may need less attention, because of its lesser importance perceived by the Medclaim Policy holders. The Quadrant D shows minor service features that were being performed excellent by the Medclaim Policy Marketers but these features too are perceived as relatively unimportant by the Medclaim Policy holders.

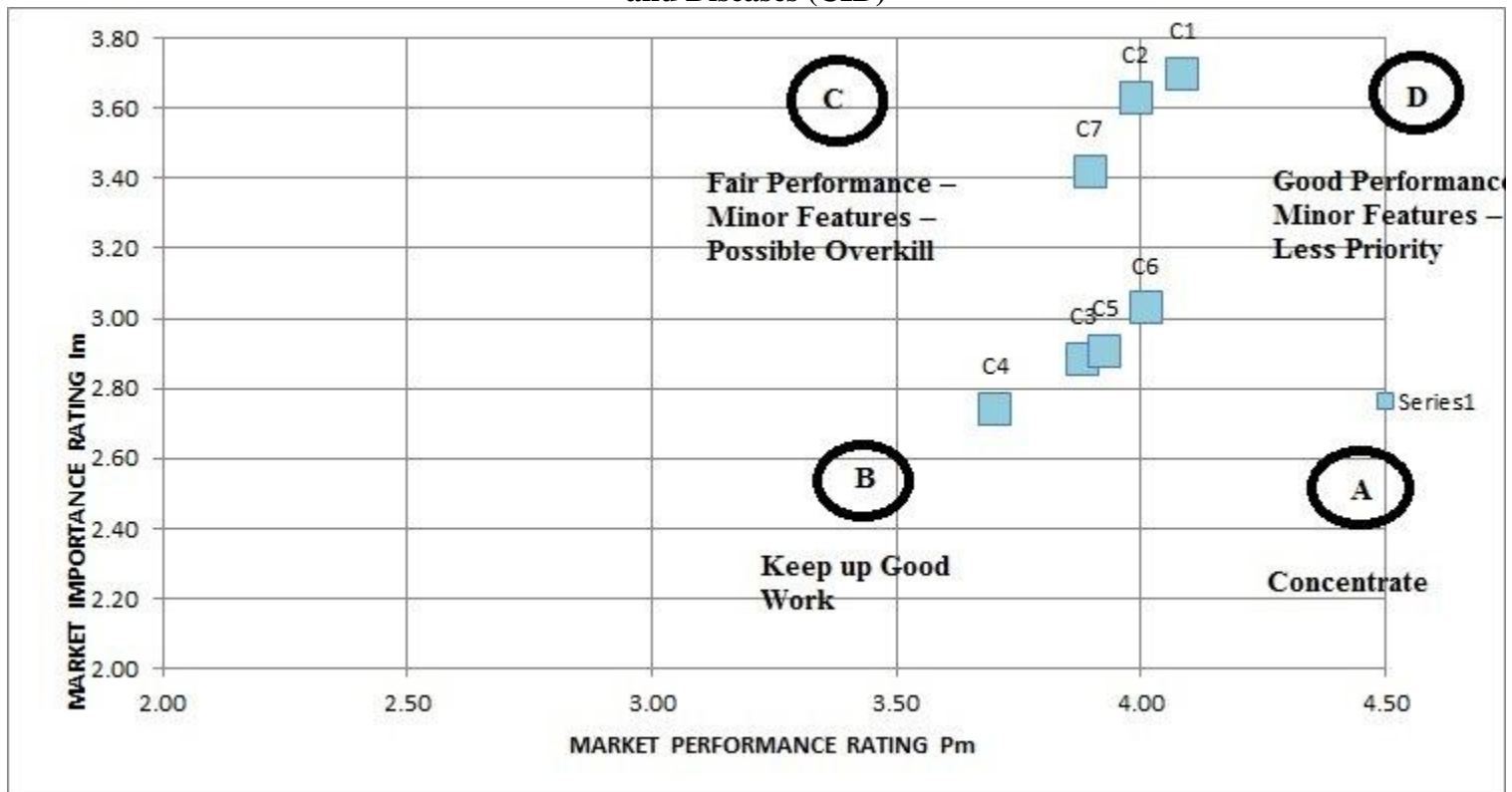
**Graph Number 6.24:**  
**Overall Market Performance Analysis of the selected Customers' Satisfaction from Medicaid Policy for Age Eligibility Criteria (AEC)**



**Graph Number 6.25:**  
**Overall Market Performance Analysis of the selected Customers' Satisfaction from Medclaim Policy for Range of Premium (RP)**



**Graph Number 6.26:**  
**Overall Market Performance Analysis of the selected Customers' Satisfaction from Medicaid Policy for Coverage of Illness and Diseases (CID)**



**Graph Number 6.27:**  
**Overall Market Performance Analysis of the selected Customers' Satisfaction from Medicaid Policy for Coverage of Medical Expenses (CMEx)**



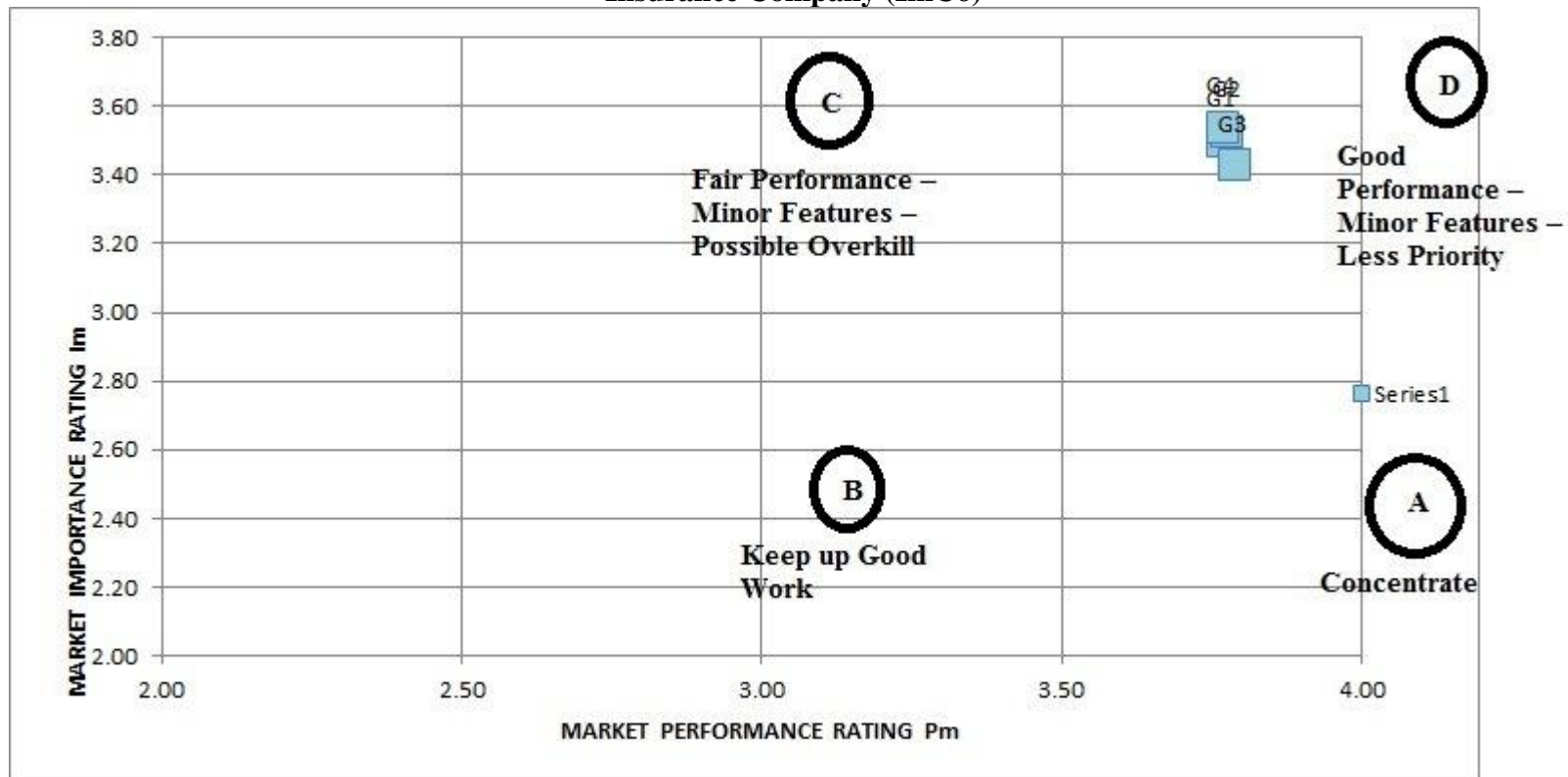
**Graph Number 6.28:**  
**Overall Market Performance Analysis of the selected Customers' Satisfaction from Medclaim Policy for Benefits of Medclaim Policy (Bene MP)**



**Graph Number 6.29:**  
**Overall Market Performance Analysis of the selected Customers' Satisfaction from Mediclaim Policy for Promotional Incentives (PI)**

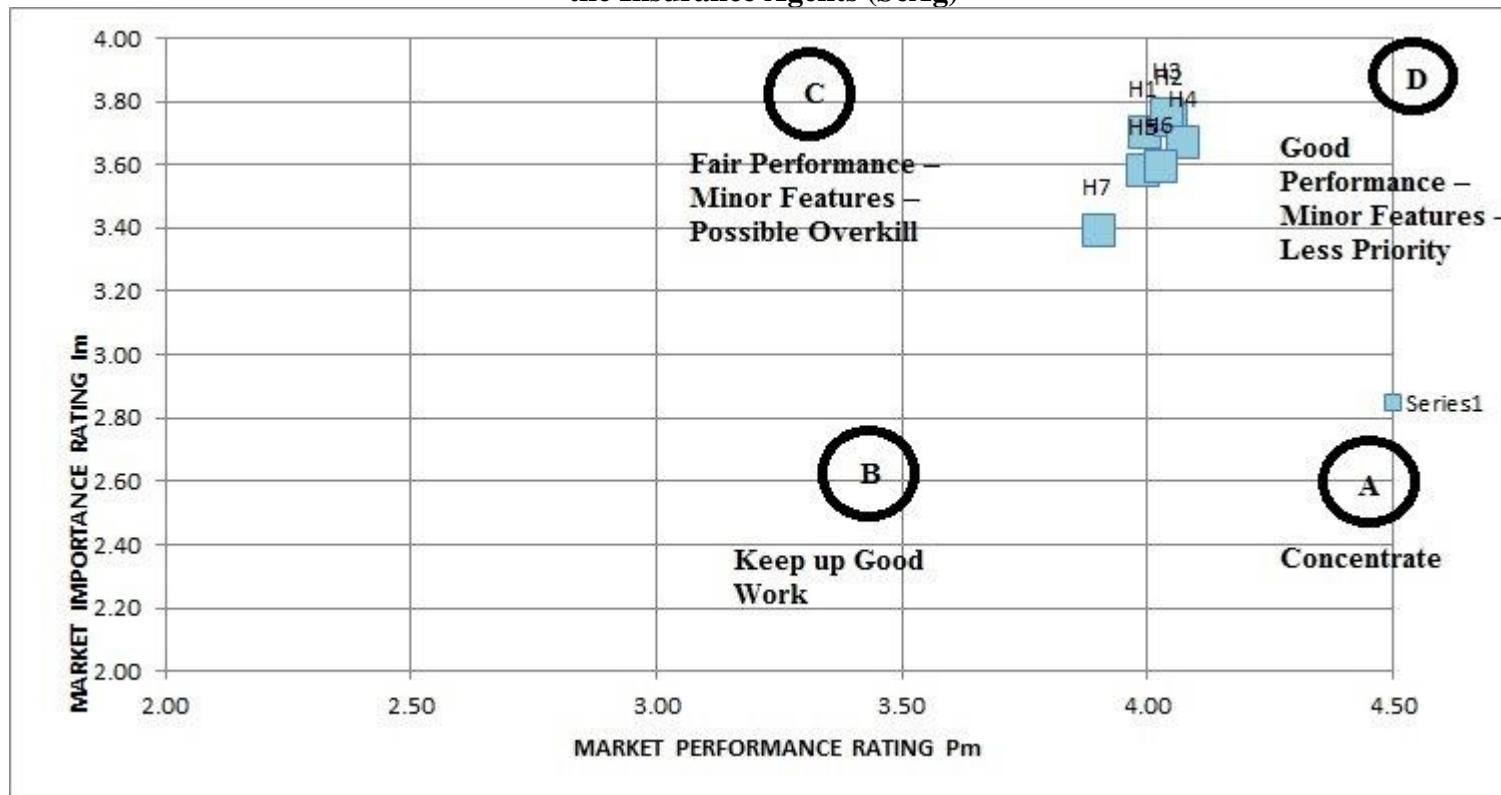


**Graph Number 6.30:**  
**Overall Market Performance Analysis of the selected Customers' Satisfaction from Medclaim Policy for Image of the Insurance Company (ImCo)**

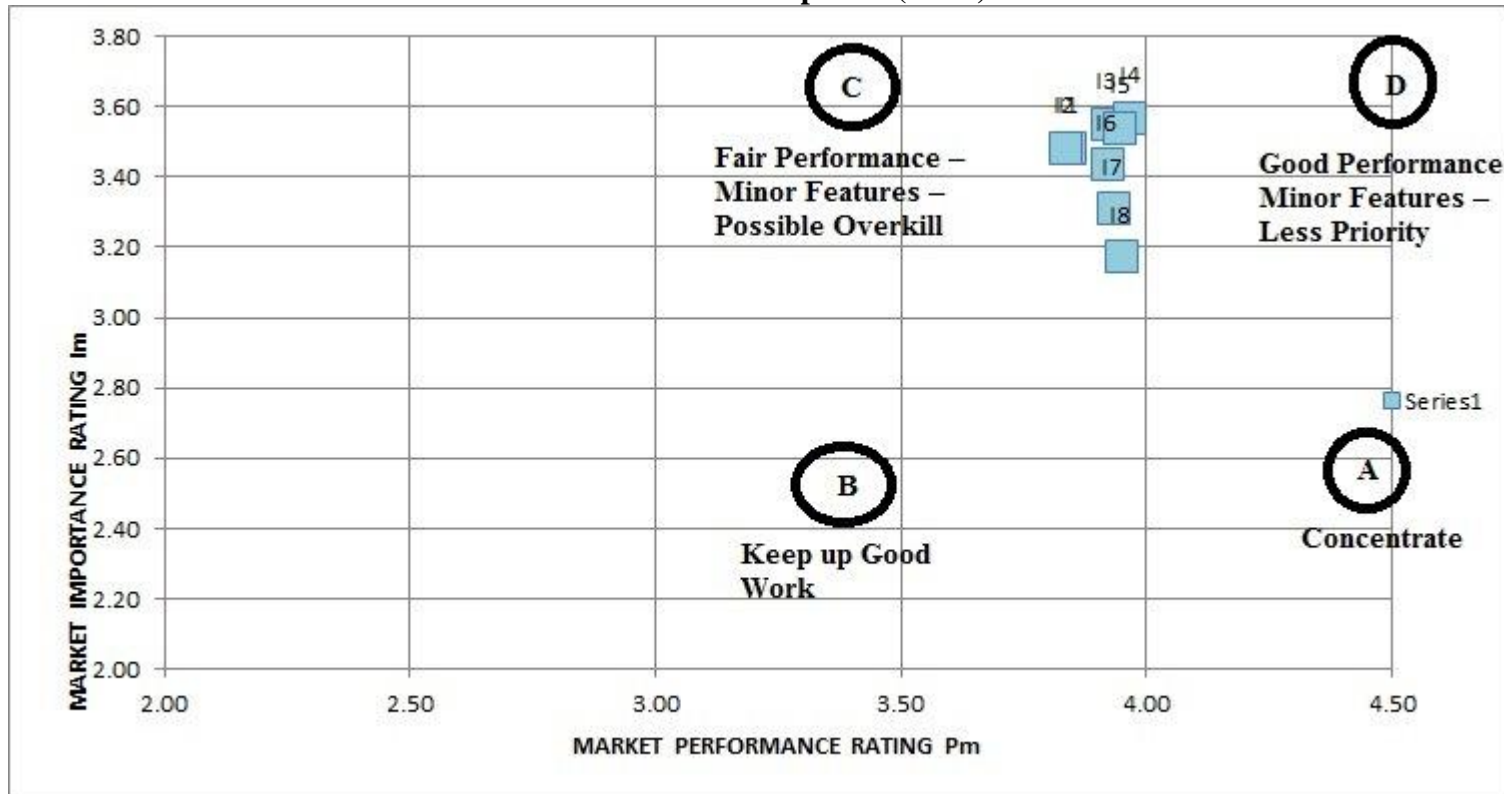




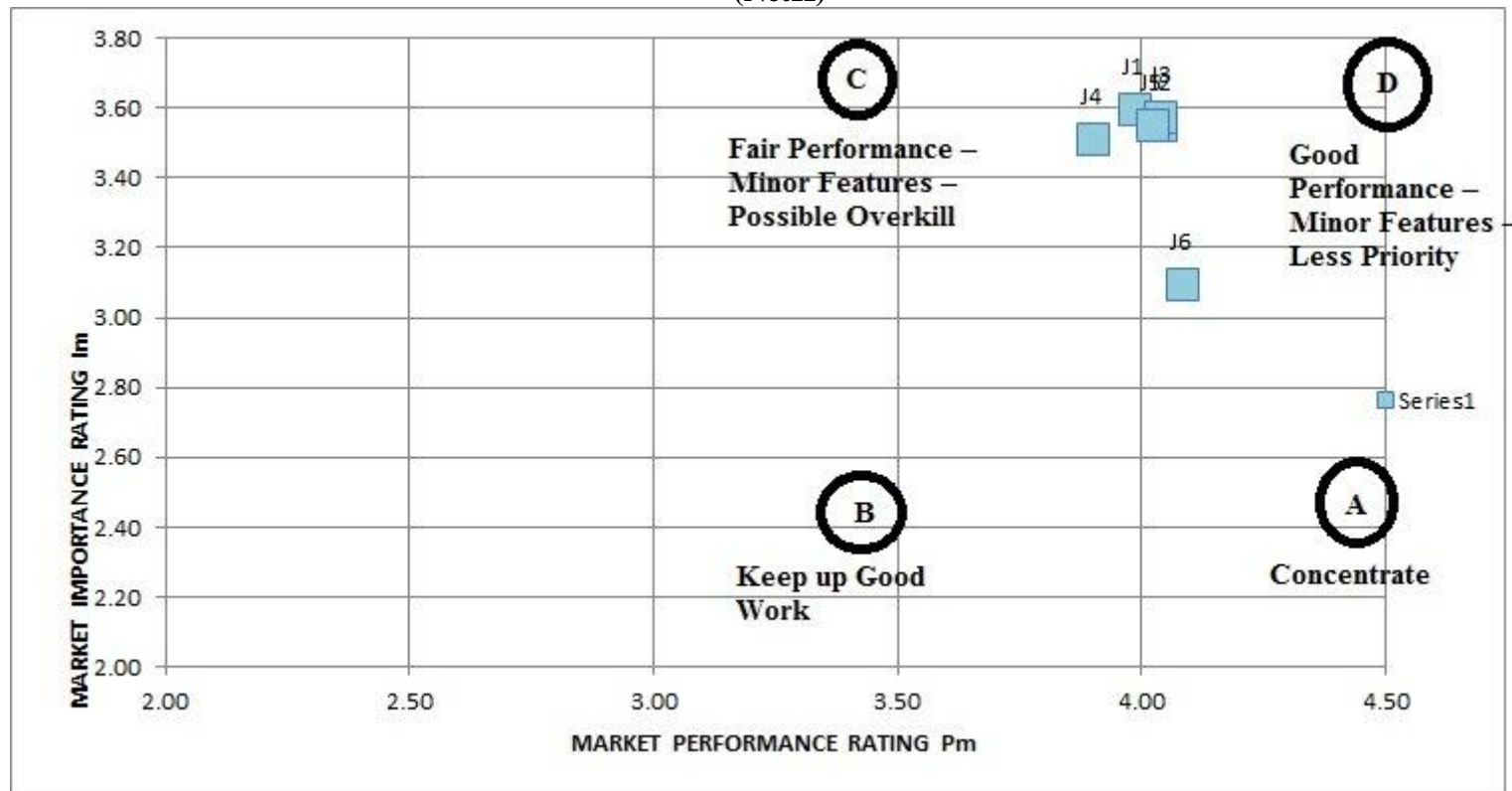
**Graph Number 6.31:**  
**Overall Market Performance Analysis of the selected Customers' Satisfaction from Medicaid Policy for Services provided by the Insurance Agents (SeAg)**



**Graph Number 6.32:**  
**Overall Market Performance Analysis of the selected Customers' Satisfaction from Medclaim Policy for Services provided by the Insurance Companies (SeCo)**



**Graph Number 6.33:**  
**Overall Market Performance Analysis of the selected Customers' Satisfaction from Medicaid Policy for Network of Hospitals (NetH)**



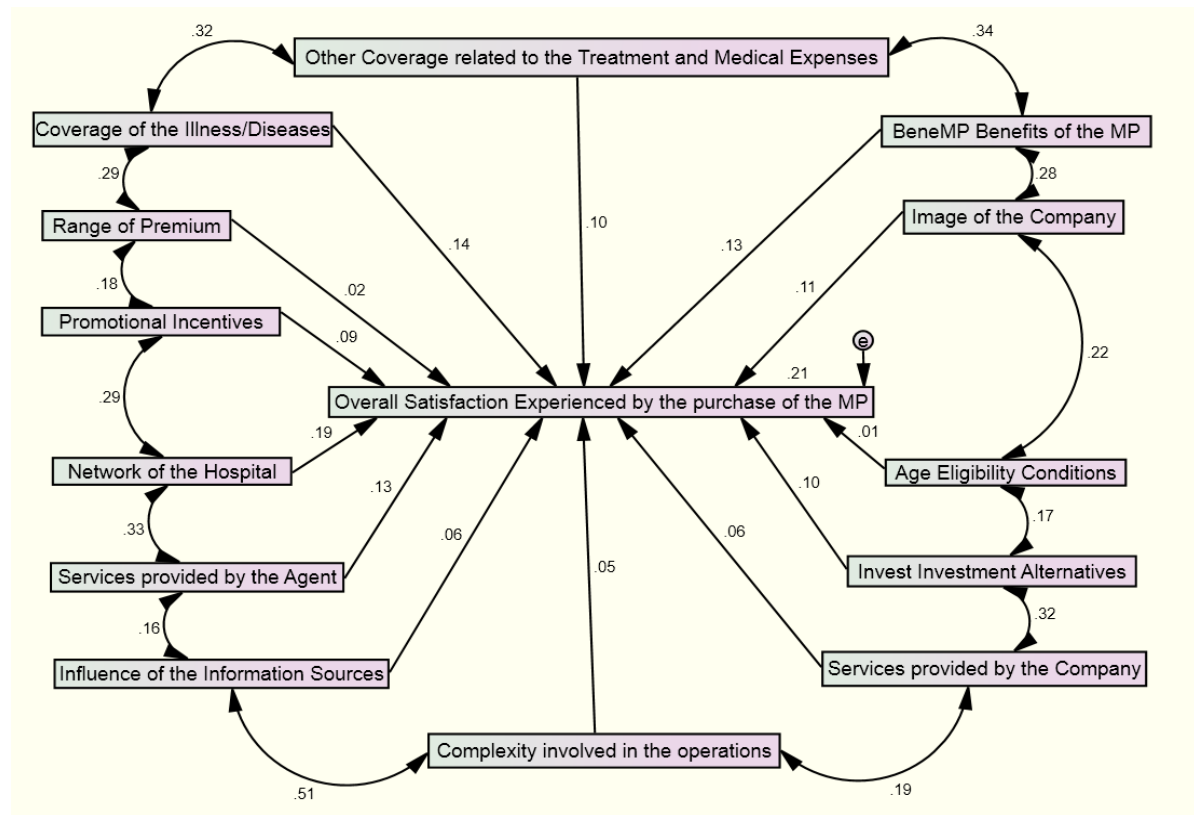
**Graph Number 6.34:**  
**Overall Market Performance Analysis of the selected Customers' Satisfaction from Medicaid Policy for Complexity in the Rules and Regulations (CMPx)**



## 6.6: SEM MODEL OF RELATIONSHIP BETWEEN ALL SELECTED FACTORS AND OVERALL SATISFACTION:

The researcher has made an attempt to demonstrate the relationship between all selected factors and overall satisfaction experienced by purchase of Medclaim Policy by the selected Medclaim Policyholders through the Structural Equation Model (SEM) as follows.

**Figure Number: 6.1: SEM Model of Relationship between All Selected Factors and Overall Satisfaction Experienced by Purchase of Medclaim Policy**



In Figure Number 6.1 a simple regression model is presented where one observed variable, the Overall Satisfaction Experienced by the purchase of the Medclaim Policy, is predicted as a linear combination of the other thirteen observed variables, viz., Age Eligibility Conditions, Range of Premium, Coverage of the Illness/Diseases, Other Coverage related to the Treatment and Medical Expenses, Benefits of the Medical Policy, Promotional Incentives, Image of the Company, Services provided by the Agent, Services provided by the Company, Network of the Hospital, Complexity involved in the operations, Influence of the Information Sources and Invest Investment Alternatives. As with nearly all empirical data, the prediction will not be perfect.

There are some other variables (other than selected seven variables) that also assumed to have an effect on satisfaction experienced by the purchase of the Medclaim Policy for which the model assumes '1' as standardized regression weights which specifies that other variables must have a weight of 1 in the prediction of satisfaction experienced by the purchase of the Medclaim Policy. Each single-headed arrow represents a regression weight. The value shown against two sided arrows (0.34, 0.28, 0.22, 0.17, 0.32, 0.19, 0.51, 0.16, 0.33, 0.29, and 0.32 is the correlation between thirteen observed variables. The values shown with single sided arrow (0.19, 0.09, 0.02, 0.14, 0.10, 0.13, 0.11, 0.01, 0.10, 0.06, 0.05, 0.06, and 0.13) are standardized regression weights. The value 0.21 is the squared multiple correlation of Overall Satisfaction Experienced by the purchase of the Medclaim Policy and thirteen variables that affect satisfaction. It means the overall satisfaction considering thirteen variables is influenced mainly by Network of the Hospital (0.19) followed by Coverage of the Illness/Diseases (0.14) Services provided by the Agent, Benefits of the Medical Policy (0.13 each) Functioning of Products in hotel (0.20); Ambience in the hotel (0.14) Room in the hotel (0.13); Image of the Company (0.11); Invest Investment Alternatives, Other Coverage related to the Treatment and Medical Expenses (0.10 each) and so on.