

A PROJECT REPORT ON  
***“A STUDY ON CONSUMER PERCEPTION ON LIFE INSURANCE  
POLICIES”***

A Project Submitted to  
University of Mumbai for Partial Completion of the Degree  
of Bachelor in Commerce (Accounting and finance)  
Under the Faculty of Commerce

By

***‘MR. MANISH MAHESH PATANKAR’***

T.Y.B.A.F (SEMESTER – VI)

Under the Guidance of

***‘ASST. PROF. DR. KISHOR CHAUHAN’***

***JNAN VIKAS MANDAL’S***

**Mohanlal Raichand Mehta College of Commerce**

**Diwali Maa College of Science**

**Amritlal Raichand Mehta College of Arts**

**Dr. R.T. Doshi College of Computer Science**

**NAAC Re-Accredited Grade 'A+' (CGPA : 3.31) (3rd Cycle)**

**Sector-19, Airoli, Navi Mumbai, Maharashtra 400708**



***FEBRUARY, 2024.***

***JNAN VIKAS MANDAL'S***



**Mohanlal Raichand Mehta College of Commerce**

**Diwali Maa College of Science**

**Amritlal Raichand Mehta College of Arts**

**Dr. R.T. Doshi College of Computer Science**

**NAAC Re-Accredited Grade 'A+' (CGPA : 3.31) (3rd Cycle)**

**Sector-19, Airoli, Navi Mumbai, Maharashtra 400708**

**CERTIFICATE**

This is to certify that **MR. MANISH MAHESH PATANKAR** has worked and duly completed his Project work for the degree of Bachelor in Commerce (Accounting and Finance) under the Faculty of Commerce in the subject of **Management control** and his project is entitled, **“A STUDY ON CONSUMER PERCEPTION ON LIFE INSURANCE POLICIES”**. Under my supervision.

I further certify that the entire work has been done by the learner under my guidance and that no part of it has been submitted previously for any Degree or Diploma of any University.

It is his own work and fact reported by her personal finding and investigations.

Guiding Teacher,

**ASST. PROF. DR. KISHOR CHAUHAN.**

**Date of submission:**

## **DECLARATION**

I the undersigned **MR. MANISH MAHESH PATANKAR** here by, declare that the work embodied in this project work titled “**A STUDY ON CONSUMER PERCEPTION ON LIFE INSURANCE POLICIES**”, forms my own contribution to the research work carried out by me under the guidance of **ASST. PROF. DR. KISHOR CHAUHAN** is a result of my own research work and has been previously submitted to any other University for any other Degree/ Diploma to this or any other University.

Wherever reference has been made to previous works of others, it has been clearly indicated as such and included in the bibliography.

I, here by further declare that all information of this document has been obtained and presented in accordance with academic rules and ethical conduct.

**MR. MANISH MAHESH PATANKAR**

Certified by:

**ASST. PROF. DR. KISHOR CHAUHAN.**

## **ACKNOWLEDGEMENT**

To list who all have helped me is difficult because they are so numerous and the depth is so enormous.

I would like to acknowledge the following as being idealistic channels and fresh dimensions in the completion of this project.

I take this opportunity to thank the **University of Mumbai** for giving me chance to do this project.

I would like to thank my **I/c Principal, Dr.B.R.Deshpande Sir** for providing the necessary facilities required for completion of this project.

I take this opportunity to thank our **Coordinator** for their moral support and guidance.

I would also like to express my sincere gratitude towards my project guide **Asst. Prof. DR. Kishor Chauhan** whose guidance and care made the project successful.

I would like to thank my **College Library**, for having provided various reference books and magazines related to my project.

Lastly, I would like to thank each and every person who directly or indirectly helped me in the completion of the project especially **my Parents and Peers** who supported me throughout my project.



# CHAPTER I

## HISTORY

“ZINDAGI KE SAATH BHI, ZINDAGI KE BAAD BHI”

Life Insurance in its modern form came to India from England in the year 1818. Oriental Life Insurance Company started by Europeans in Calcutta was the first life insurance company on Indian Soil. All the insurance companies established during that period were brought up with the purpose of looking after the needs of European community and Indian natives were not being insured by these companies. However, later with the efforts of eminent people like Babu Muttylal Seal, the foreign life insurance companies started insuring Indian lives. But Indian lives were being treated as sub-standard lives and heavy extra premiums were being charged on them. Bombay Mutual Life Assurance Society heralded the birth of first Indian life insurance company in the year 1870, and covered Indian lives at normal rates. Starting as Indian enterprise with highly patriotic motives, insurance companies came into existence to carry the message of insurance and social security through insurance to various sectors of society. Bharat Insurance Company (1896) was also one of such companies inspired by nationalism. The Swadeshi movement of 1905-1907 gave rise to more insurance companies. The United India in Madras, National Indian and National Insurance in Calcutta and the Co-operative Assurance at Lahore were established in 1906. In 1907, Hindustan Co-operative Insurance Company took its birth in one of the rooms of the Jorasanko, house of the great poet Rabindranath Tagore, in Calcutta.

The Indian Mercantile, General Assurance and Swadeshi Life (later Bombay Life) were some of the companies established during the same period. Prior to 1912 India had no legislation to regulate insurance business. In the year 1912, the Life Insurance Companies Act, and the Provident Fund Act were passed. The Life Insurance Companies Act, 1912 made it necessary that the premium rates and periodical valuations of companies should be certified by an actuary. But the Act discriminated between foreign and Indian companies on many accounts, putting the Indian companies at a disadvantage. The first two decades of the twentieth century saw lot of growth in insurance business. From 44 companies with total business-in-force as Rs. 22.44 crore, it rose to 176 companies with total business-in-force as Rs. 298 crore in 1938. During the mushrooming of insurance companies many financially unsound concerns were also floated which failed miserably.

The Insurance Act 1938 was the first legislation governing not only life insurance but also non-life insurance to provide strict state control over insurance business. The demand for nationalization of life insurance industry was made repeatedly in the past but it gathered momentum in 1944 when a bill to amend the Life Insurance Act 1938 was introduced in the Legislative Assembly.

However, it was much later on the 19th of January, 1956, that life insurance in India was nationalized. About 154 Indian insurance companies, 16 non-Indian companies and 75 provident were operating in India at the time of nationalization. Nationalization was accomplished in two stages; initially the management of the companies was taken over by means of an Ordinance, and later, the ownership too by means of a comprehensive bill. The Parliament of India passed the Life Insurance Corporation Act on the 19th of June 1956, and the Life Insurance Corporation of India was created on 1st September, 1956, with the objective of spreading life insurance much more widely and in particular to the rural areas with a view to reach all insurable persons in the country, providing them adequate financial cover at a reasonable cost.

LIC had 5 zonal offices, 33 divisional offices and 212 branch offices, apart from its corporate office in the year 1956. Since life insurance contracts are long term contracts and during the currency of the policy it requires a variety of services need was felt in the later years to expand the operations and place a branch office at each district headquarter. Re-organization of LIC took place and large numbers of new branch offices were opened. As a result of re-organisation servicing functions were transferred to the branches, and branches were made accounting units. It worked wonders with the performance of the corporation. It may be seen that from about 200.00 crores of New Business in 1957 the corporation crossed 1000.00 crores only in the year 1969-70, and it took another 10 years for LIC to cross 2000.00 crore mark of new business. But with re-organisation happening in the early eighties, by 1985-86 LIC had already crossed 7000.00 crore Sum Assured on new policies.

Today LIC functions with 2048 fully computerized branch offices, 113 divisional offices, 8 zonal offices, 1381 satellite offices and the Corporate office. LIC's Wide Area Network covers 113 divisional offices and connects all the branches through a Metro Area Network. LIC has tied up with some Banks and Service providers to offer on-line premium collection facility in selected cities. LIC's ECS and ATM premium payment facility is an addition to customer convenience. Apart from on-line Kiosks and IVRS, Info Centers have been commissioned at Mumbai, Ahmedabad, Bangalore, Chennai, Hyderabad, Kolkata, New Delhi, Pune and many other cities. With a vision of providing easy access to its policyholders, LIC has launched its SATELLITE SAMPARK offices. The satellite

offices are smaller, leaner and closer to the customer. The digitalized records of the satellite offices will facilitate anywhere servicing and many other conveniences in the future.

LIC continues to be the dominant life insurer even in the liberalized scenario of Indian insurance and is moving fast on a new growth trajectory surpassing its own past records. LIC has issued over one crore policies during the current year. It has crossed the milestone of issuing 1,01,32,955 new policies by 15th Oct, 2005, posting a healthy growth rate of 16.67% over the corresponding period of the previous year.

From then on, LIC has crossed many milestones and has set unprecedented performance records in various aspects of life insurance business. The same motives which inspired our forefathers to bring insurance into existence in this country inspire us at LIC to take this message of protection to light the lamps of security in as many homes as possible and to help the people in providing security to their families.



## CHAPTER 2

### INTRODUCTION TO LIFE INSURANCE.

Life insurance is an agreement between the insured and the insurer in which the policy holder accepts to pay regular premium to the insurer. In return, the insurer guarantees monetary protection to the insured in case of any accident or mishaps. If the insured dies in accident, financial help is provided to his family members. Thus, life insurance is necessary as it provides protection not only to you but also to your family in case of any unwanted disaster.

A thriving insurance sector is very important to every modern economy. Firstly because it encourages the habit of saving, secondly because it provides a safety net to rural and urban enterprises and productive individuals. And perhaps most importantly it generates long-term invisible funds for infrastructure building. The nature of the insurance business is such that the cash inflow of insurance companies is constant while the payout is deferred and contingency related. This characteristic feature of their business makes insurance companies the biggest investors in long-gestation infrastructure development projects in all developed and aspiring nations. This is the most compelling reason why private sector (and foreign) companies, which will spread the insurance habit in the societal and consumer interest are urgently required in this vital sector of the economy. Opening up of insurance to private sector including foreign participation has resulted into various opportunities and challenges in India.

- Life-based contracts tend to fall into two major categories:
  1. Protection policies: designed to provide a benefit, typically a lump-sum payment, in the event of a specified assurance. A common form of a protection-policy design is term insurance.
  2. Investment policies: the main objective of these policies is to facilitate the growth of capital by regular or single premiums. Common forms (in the United States) are whole life, universal life, and variable life policies.



## **MILESTONES IN THE LIFE INSURANCE BUSINESS IN INDIA.**

Year Milestones in the Life Insurance Business in India:

- 1912: the Indian life insurance company's act enacted as the first statute to regulate the life insurance business.
- 1928: the Indian insurance companies act enacted to enable the government to collect statistical information about both life and non-life insurance businesses
- 1938: earlier legislation consolidated and amended to by the insurance act with the objective, of protecting the interests of the insuring public
- 1956: 245 Indian and foreign insurers and provident societies taken over by the central Government and nationalized. LIC formed by an act of parliament, viz. LIC. With a capital contribution of ₹ 5000 crores from the government of India.

## **TYPES OF LIFE INSURANCE POLICIES.**

1. Term insurance plan: Term insurance plan are those plan that gives life coverage for a specific time period and so is purchased for a fixed period of time, say 10, 20 or 30 years. As these policies don't carry any cash value their policies do not carry any maturity benefits, hence their policies are cheaper as compared to other policies. This policy turns beneficial only on the occurrence of the event. The objective behind this scheme is not to get any amount on the expiry of the policy but simply to ensure the financial future of the investor's dependents.
2. Endowment policy: The only difference between the term insurance plan and the endowment policy is that endowment policy comes with the extra benefit that the policyholder will receive a lump sum amount in case if he survives until the date of maturity. The objective of this policy is to provide an assured sum, both in the event of the policy holders' death or at the expiry of the policy.
3. Unit Linked Insurance Plans (ULIPS): These plans offer policyholder to build wealth in addition to life security. Premium paid into this policy is bifurcated into two parts, one for the purpose of Life insurance and another for the purpose of building wealth. This plan enables to partially withdraw the amount. Unit Linked Insurance Policies are a combination of mutual fund and life insurance.

4. **Money Back Policy:** This policy is similar to endowment policy, the only difference is that this policy provides many survival benefits which are allotted proportionately over the period of the policy term. The insurance company pays the sum assured at periodical intervals to the policy holder plus the entire sum assured to the beneficiaries in case of the policy holders demise before maturity.
5. **Whole Life Policy:** Unlike other policies which expire at the end of a specified period of time, this policy extends up to the whole life of the insured. In this type of policy, the policyholder has an option to partially withdraw the sum insured. Policyholder also has the option to borrow sum against the policy. It is a low cost insurance plan where the sum assured is payable on the death of the life insured and premium are payable throughout life.
6. **Annuity/ Pension Plan:** Also called retirement plans are a fusion of insurance and investment. A portion from the premiums is directed towards retirement corpus, which is paid as a lump-sum or monthly payment after the retirement of the insured. Under this policy, the amount collected in the form of premium is accumulated and distributed to the policyholder in form of income as annuity or lump sum depending on the instruction of insured.
  - Some other types of Life Insurance policies also include:
    1. **Children Life Insurance Policy:** This life insurance plan is a combination of savings and investment plans specially designed to meet the financial needs of the children in the future. This plan comes with intermediate withdrawal or provision of withdrawal after the child reaches adulthood.
    2. **Group Life Insurance:** This type of life insurance policy is offered to the employees by employers, bank customers, NGOs, non-banking financial organizations, professional groups, and microfinance institutions. This plan offers financial support to the employees and to their family members in case of the untimely demise of the employee. Some group insurance plans come with critical illness coverage, and disability along with outstanding loan coverage for debtors.

### **PRINCIPLES OF LIFE INSURANCE.**

Life insurance is based on a number of principles that are tailored to meet market conditions and ensure insurance companies make profits, while offering security policies to insured individuals.

There are broadly four major insurance principles applied in India:-

1. **Insurable Interest**—This principle pertains to the level of interest an individual is expected to have in a particular policy. The interest could be a family bond, a personal relationship and so on. Based on the interest level, an insurance company can choose to accept or reject an application in order to protect the misuse of a policy.
2. **Law of large numbers**—This is a theory that ensures long-term stability and minimises losses in the long run when experiments are done with large numbers.
3. **Utmost Good faith**—Purchasing an insurance is entering into a contract between company and individual. This should be done in good faith by providing all relevant details with honesty. Covering any information from the insurance company may result in serious consequences for the individual in the future. This being said, the insurer must explain all aspects of a policy and ensure that there are no unexplained or hidden clauses and that the applicant is made aware of all terms and conditions.
4. **Risk & Minimal loss**—Insurance is a risky and companies have to do business and make profits keeping in mind the risk factor. The principle of minimal risk states that the insured individual is expected to take necessary action to limit him/herself from any hazards. This includes following a healthy lifestyle, getting a regular health check-up and more.

### **Benefits of a Life Insurance Policy:**

Life insurance policies offer several different benefits to individuals and some of them are mentioned below:

**Risk Cover:** Since uncertainties are unpredictable and may cause problems to an individual and his/her family at any time, availing a life insurance policy will ensure that your family and dependents continue to enjoy a quality lifestyle in case of your unforeseen and accidental death.

**Comprehensive Plan for Different Stages of Life:** Not only does life insurance offer financial support in case of the policyholders' unforeseen and accidental death, but also serves as a long-term investment in the sense that it encourages you to lay down your objectives, whether it is the education of your children, their marriage, constructing the home of your dreams, or even planning for a peaceful retired life. The planning will be done based on your risk appetite and life stage. Most conventional life insurance plans, such as traditional endowment plans, provide specific maturity benefits and built-in guarantees via a number of product options like Guaranteed Maturity Values, Guaranteed Cash Values, Money Back, etc.

**Cover for Increasing Health Expenses:** Whether it is through stand-alone insurance policies or through riders, all life insurance providers offer financial cover against hospitalisation expenses and critical illnesses. Since health expenses are increasing constantly, the need for health insurance policies has increased too, as it ensures that the policyholder will have minimal medical costs to deal with.

**Promotes Savings in the Long Run:** Since life insurance policies are long-term agreements wherein the policyholder is required to make a fixed periodical payment, it helps the policyholder inculcate the habit of savings. Saving money regularly over a relatively long period of time helps in building a good corpus which will in turn help in meeting your financial requirements at different stages of life.

**Profitable and Secure Long-Term Investment:** The insurance industry is highly regulated. The Insurance Regulatory and Development Authority of India has implemented several regulations through which the money of the policyholder is ensured to be safe with the stakeholders, which means that all the money you invest in your life insurance policy will be the responsibility of the stakeholders of the company through which you avail your policy. Since life insurance is a long-term savings product, it also ensures that the policyholder focuses on long-term returns rather than focusing on risky investment decisions that could provide short-term profits.

**Guaranteed Income via Annuities:** When it comes to planning for retirement, there are few instruments as effective as life insurance policies. Since you will be saving money over a period of time, life insurance policies will help in providing a steady source of income after you have retired from your professional life.

**Growth via Dividends:** Conventional life insurance policies provide customers with an opportunity to take part in economic growth, while taking no investment risk whatsoever. While the policyholder splits the investment income through yearly announcements of bonuses/ dividends, the policyholder will earn maturity benefits in addition to contributing to economic growth.

**Loan Facility:** People who obtain life insurance plans will have the option of borrowing money against it, which may assist them to cover unforeseen expenses as they progress through life without jeopardising the policy's benefits.

**Tax Benefits:** Life insurance policies offer attractive tax benefits and help you save a significant amount of money which would otherwise be spent on taxes.

Redemption of Mortgage: The finest tool for covering loans and mortgages taken out by the policyholder is a life insurance policy. The insurance can be used to pay off the loan or mortgage if there is ever an unanticipated circumstance that prevents the policyholder from being able to repay his or her loan or mortgage. In this case, the grieving family members will not be responsible for repayment.

### **Importance of buying life insurance for different age groups**

Age group and Importance of buying life insurance:

20 to 30 years: People between the ages of 20 and 30 years can use life insurance plans to secure their future financial goals, such as saving for a house purchase, retirement, and more.

30 to 40 years: People between the ages of 30 and 40 years can use life insurance plans to secure their family members in their absence with adequate financial protection. Life insurance plans can also be used to plan for your child's higher education and marriage expenses, and more.

40 to 50 years: Individuals between the age of 40 and 50 years can buy a life insurance policy to plan for their retirement savings.

50 years and above: Individuals aged 50 or above can purchase a life insurance policy to invest and ensure financial security for self and family. Life insurance can also offer them tax benefits and help them save more money.

Apart from the age groups mentioned above, there are several other types of people who can benefit from a life insurance plan. These include the following:

Smokers: Smokers can be prone to health issues. Buying a buy life insurance policy can ensure sufficient financial protection for their loved ones. However, smokers must inform the insurer of their lifestyle habits before purchasing a plan.

Disabled individuals: Disabled individuals can also benefit from a life insurance plan. However, they need to undergo some medical tests before buying a suitable insurance plan.

People with pre-existing medical conditions: Individuals with pre-existing medical concerns can enjoy financial security with life insurance. However, it is vital to share the details of such medical conditions with the insurer.

Important life insurance terms you should know:

**Life assured:** The insured person is referred to as the life assured. In the unfortunate event of the life assured's death, the nominee receives the insurance money.

**Policy tenure:** This is the duration for which the insurance company provides coverage. Policy tenure for a life insurance plan can range anywhere from 1 year to 99 years (whole life).

**Claim Settlement Process:**

On the happening of the event, the beneficiary is required to send claim intimation form to the insurance company as soon as possible.

Claim intimation should contain details such as date, place, and cause of death. On successful submission of claim intimation form, an insurance company can ask for additional information about

1. Certificate of death
2. Copy of insurance policy
3. Legal evidence of title in case insured has not appointed a beneficiary
4. Deed of assignment

On successful submission of all the documents, the insurance company shall verify the claim and settle the same.

**1 Rules for Beneficiaries Claiming Life Insurance:**

When a policyholder's beneficiary or nominee is claiming life insurance, he or she will be required to follow certain rules. The nominee will have to file a death claim in order to procure the death benefit. If you have a physical insurance policy, you can take a claim intimation or a notification form from your life insurance provider. If you have an online policy, you can apply for a form online. Your claim intimation will need to comprise elements such as policy number, name of the policyholder, place of death, name of the insured, name of the claimant, etc.

The nominee will first have to fill a few death claim forms and also provide some proof of death. Once the form is filed with the life insurance company, then it is established that the company has got a death claim. Next, the nominee will need to assemble all the appropriate documents that serve as proof. Then, the nominee will need to furnish these documents to the company for the claim settlement process.

Once the forms and documents are submitted, the company will verify everything and then make a decision about if the claim should be settled or not.

### **Life Insurance Claims in Case of Death:**

Here, nominee or closer relatives of the deceased make the claim (or assignee if the policy has been assigned) in the following way:

- Inform the insurer as soon as possible with details such as time of death, place of death and cause of death.
- Submit the relevant documents to the insurer. This will include:
  1. The death certificate of the deceased person along with the claim form as provided by the company.
  2. The policy in its original form as this is a legal document and proof of an insurance agreement that covered the life of the deceased.
  3. Discharge form which has to be signed with witnesses. If the policy was assigned, the assignee will have to provide the deed.
  4. If a claim is made by someone other than the nominee or assignee, the person making the claim will have to submit legal proof of his/her title.
  5. If required, post-mortem reports and hospital and attending doctors' reports will also have to be submitted.
  6. In cases involving police inquiries, an inquest report will have to be submitted.

While these outline the standard set of documents required to process a claim, other evidence may be required such as an employer's certificate or any other forms or reports that will help resolve any issues thrown up during an insurer's claim verification or investigative processes.

Upon the insured's death, the insurer requires acceptable proof of death before it pays the claim. If the insured's death is suspicious and the policy amount is large, the insurer may investigate the circumstances surrounding the death before deciding whether it has an obligation to pay the claim.

Payment from the policy may be as a lump sum or as an annuity, which is paid in regular installments for either a specified period or for the beneficiary's lifetime.

### **Claim in case of maturity:**

You can follow the steps given below to raise a maturity claim for your life insurance plan:

Contact the insurer using any one of the methods mentioned above—website, call, email, or in person



Submit your life insurance policy certificate, KYC proofs like Aadhar card, pan card, or any other required document, and a cancelled cheque

The insurance company will review the documents and issue the settlement.

### **Life Insurance Premium Calculation;**

Once the insurance company has taken the aforementioned factors into consideration, it will determine the amount of premium applicable to an individual, making it essential for you to ensure that you lead a healthy lifestyle and make the right choices in order to avail the best possible rates.

The premium charged on your life insurance policy is the amount of money levied by insurance providers for coverage. The premium charged by each company may vary, making it important for you to compare different policies to find the one that best suits your requirements. However, there may be times when the quote for a premium may differ from the premium that is actually charged as it will depend on the manner in which the premium is computed.

Mathematical calculations and statistics done by the insurance providers' underwriting department will determine the premium charged to an individual. In most cases, the statistical data regarding the health, age and life history of an individual are taken into consideration when computing the premium. For instance, a youngster driving a fancy sports car will likely have to pay a higher insurance premium in consideration of a middle-aged individual who drives a sedan. The underwriting process is applicable to all individuals who wish to avail life insurance, and it entails investigation of filial illnesses, analysis of reports such as motor vehicle reports and medical information bureau.

Once the underwriting department of your insurance provider has gathered all your information and analysed it, an actuary will scrutinise it further to determine your risk to the insurance company. The actuary will also forecast how likely you are to make a claim on your policy, and the higher your chances of making a claim, the higher your premium payment will be. The actuary will also peruse mathematical information after which he / she will compile 'mortality and sickness' tables based on which potential losses you will incur due to illnesses and death will be noted. These tables are used by actuaries to create models that ascertain how likely an individual is to contract illnesses or die. The premium charged to you will be determined by these results.

- OVERVIEW

**Parties to Contract:**

The person responsible for making payments for a policy is the policy owner, while the insured is the person whose death will trigger payment of the death benefit. The owner and insured may or may not be the same person. For example, if Joe buys a policy on his own life, he is both the owner and the insured. But if Jane, his wife, buys a policy on Joe's life, she is the owner and he is the insured.

The policy owner is the guarantor and he will be the person to pay for the policy. The insured is a participant in the contract, but not necessarily a party to it.

**Contract Terms:**

Special exclusions may apply, such as suicide clauses, whereby the policy becomes null and void if the insured commits suicide within a specified time (usually two years after the purchase date; some states provide a statutory one-year suicide clause). Any misrepresentations by the insured on the application may also be grounds for nullification. Most of us states specify a maximum contestability period, often no more than two years. Only if the insured dies within this period will the insurer have a legal right to contest the claim on the basis of misrepresentation and request additional information before deciding whether to pay or deny the claim.

The face amount of the policy is the initial amount that the policy will pay at the death of the insured or when the policy matures, although the actual death benefit can provide for greater or lesser than the face amount. The policy matures when the insured dies or reaches a specified age (such as 100 years old).

**Costs, insurability and underwriting:**

The insurance company calculates the policy prices (premiums) at a level sufficient to fund claims, cover administrative costs, and provide a profit.

The cost of insurance is determined using mortality tables calculated by actuaries.

Mortality tables are statistically based tables showing expected annual mortality rates of people at different ages. Put simply, people are more likely to die as they get older and the mortality tables enable the insurance company to calculate the risk and increase premiums with age accordingly. Such estimates can be important in taxation regulation.

In the 1980s and 1990s, the SOA 1975-80 Basic Select & Ultimate tables were the typical reference points, while the 2001 VBT and 2001 SOT tables were published more recently. As well as the basic parameters of age and gender, the newer tables include separate mortality tables for smokers and non-smokers, and the CSO tables include separate tables for preferred classes.

The mortality tables provide a baseline for the cost of insurance, but the health and family history of the individual applicant is also taken into account (except in the case of group policies). This investigation and resulting evaluation is termed underwriting. Health and lifestyle questions are asked, with certain responses possibly meriting further investigation.

Specific factors that may be considered by underwriters include:

- Personal medical history
- Family medical history
- Driving record

Height and weight matrix, otherwise known as BMI (Body Mass Index) based on the above and additional factors, applicants will be placed into one of several classes of health ratings which will determine the premium paid in exchange for insurance at that particular carrier.

Life insurance companies in the United States support the Medical Information Bureau (MIB), which is a clearinghouse of information on persons who have applied for life insurance with participating companies in the last seven years. As part of the application, the insurer often requires the applicant's permission to obtain information from their physicians.

Automated life underwriting is a technology solution which is designed to perform all or some of the screening functions traditionally completed by underwriters, and thus seeks to reduce the work effort, time and/or data necessary to underwrite a life insurance application. These systems allow point of sale distribution and can shorten the time frame for issuance from weeks or even months to hours or minutes, depending on the amount of insurance being purchased.

The mortality of underwritten persons rises much more quickly than the general population. At the end of 10 years, the mortality of that 25-year-old, non-smoking male is 66 years. Consequently, in a group of one thousand 25-year-old males with a \$100,000 policy, all of average health, a life insurance company would have to collect approximately \$50 a year from each participant to cover the relatively few expected claims. (0.35 to 0.66 expected deaths in each year  $\times$  \$100,000 pay out per death = \$35 per policy.) Other costs, such as administrative and sales expenses, also need to be considered when setting the premiums. A 10-year policy for a 25-year-old non-smoking male with preferred medical history may get offers as low as \$90 per year for a \$100,000 policy in the competitive US life insurance market.

Most of the revenue received by insurance companies consists of premiums, but revenue from investing the premiums forms an important source of profit for most life insurance companies. Group insurance policies are an exception to this.

In the United States, life insurance companies are never legally required to provide coverage to everyone, with the exception of civil rights act compliance requirements. Insurance companies alone determine insurability, and some people are deemed uninsurable. The policy can be declined or rated (increasing the premium amount to compensate for the high risk), and the amount of the premium will be proportional to the face value of the policy.

Many companies separate applicants into four general categories. These categories are preferred best, preferred, standard, and tobacco. Preferred best is reserved only for the healthiest individuals in the general population. This may mean, that the proposed insured has no adverse medical history, is not under medication, and has no family history of early-onset cancer, diabetes, or other conditions. Preferred means that the proposed insured is currently under medication and has a family history of particular illnesses. Most people are in the standard category.

People in the tobacco category typically have to pay higher premiums due to the higher mortality. Recent US mortality tables predict that roughly 0.35 in 1,000 non-smoking males aged 25 will die during the first year of a policy.

Mortality approximately doubles for every extra ten years of age, so the mortality rate in the first year for non-smoking men is about 2.5 in 1,000 people at age 65. Compare this with the US population male mortality rates of 1.3 per 1,000 at age 25 and 19.3 at age 65 (without regard to health or smoking status).

### **INSURANCE VS. ASSURANCE .**

The specific uses of the terms "Insurance" and "Assurance" are sometimes confused. In general, in jurisdictions where both terms are used, "Insurance" refers to providing coverage for an event that might happen (fire, theft, flood, etc.), while "Assurance" is the provision of coverage for an event that is certain to happen. In the United States, both forms of coverage are called "Insurance" for reasons of simplicity in companies selling both products. By some definitions, "Insurance" is any coverage that determines benefits based on actual losses whereas "Assurance" is coverage with predetermined benefits irrespective of the losses incurred.

Life insurance may be divided into two basic classes: temporary and permanent; or the following subclasses: term, universal, whole life, and endowment life insurance.

Different types of life insurance policies in India:

1. Term plan - pure risk cover
2. Unit linked insurance plan (ULIP) - insurance + investment opportunity.

3. Endowment plan-insurance +savings.
4. Moneyback-periodic returns with insurance cover
5. Whole life insurance-life cover to the life assured for whole life.
6. Child's plan-for fulfilling your child's life goals like education, marriage, etc.

Retirement plan-plan your retirement and retire gracefully

### **CRITICISM:**

Although some aspects of the application process (such as underwriting and insurable interest provisions) make it difficult, life insurance policies have been used to facilitate exploitation and fraud. In the case of life insurance, there is a possible motive to purchase a life insurance policy, particularly if the face value is substantial, and then murder the insured. Usually, the larger the claim, and the more serious the incident, the larger and more intense the ensuing investigation, consisting of police and insurer investigators.

The television series forensic files has included episodes that feature this scenario. There was also a documented case in 2006, where two elderly women were accused of taking in homeless men and assisting them. As part of their assistance, they took out life insurance for the men. After the contestability period ended on the policies, the women are alleged to have had the men killed via hit-and-run car crashes.

Recently, vertical settlements have created problems for life insurance providers. A vertical settlement involves the purchase of a life insurance policy from an elderly or terminally ill policy holder.

The policy holder sells the policy (including the right to name the beneficiary) to a purchaser for a price discounted from the policy value. The seller has cash in hand, and the purchaser will realize a profit when the seller dies and the proceeds are delivered to the purchaser. In the meantime, the purchaser continues to pay the premiums. Although both parties have reached an agreeable settlement, insurers are troubled by this trend. Insurers calculate their rates with the assumption that a certain portion of policy holders will seek to redeem the cash value of their insurance policies before death. They also expect that a certain portion will stop paying premiums and forfeit their policies.

However, vertical settlements ensure that such policies will with absolute certainty be paid out. Some purchasers, in order to take advantage of the potentially large profits, have even actively sought to collude with uninsured elderly and terminally ill patients, and created policies that would have not otherwise been purchased. These policies are guaranteed losses from the insurers' perspective.

On April 17, 2016, a report by 60 minutes claimed that life insurance companies do not pay significant numbers of beneficiaries.

## CUSTOMER RELATIONSHIP MANAGEMENT

### **Introduction:**

Customer Relationship Management (CRM) is a system for managing a company's interactions with current and future customers. It often involves using technology to organise, automate and synchronise sales, marketing, customer service and technical support. CRM uses the benefit of data management that allows data resources to work as a single integrated database.

Origin of the term CRM can be traced back in the earlier 1990's, when the concept of marketing changed from transactional to relational. CRM is intended for building long-term relationships. CRM is often considered as database marketing primarily linking marketing of the organisation with the database of the customers. Some theorists have been considering it, as an exercise for customer retention as many theories and studies have been emphasising on the rationale for keeping the customers. This requires a variety of techniques, especially post-sale initiatives, to keep the customers for life. This was believed to be a mechanism to keep the existing customers happy so that they remain with the organisation and may, if possible, generate positive referrals for the company's products and services. It was believed that application of IT can be an effective tool to develop one-to-one relationships that integrate database with company's marketing strategy that may focus on leveraging the existing customer base. Selling policies to new customers is expensive compared to existing customer. Successful CRM should give insurers the ability to measure customer value, and improve the customer's service perceptions while reducing servicing costs.

### **Definition of CRM**

Customer Relationship Management is a comprehensive strategy and process of acquiring, retaining and partnering with selective customers to create superior value for the company and the customer. It involves the integration of marketing, sales, customer service, and the supply-chain functions of the organisation to achieve greater efficiency and effectiveness in delivering customer value.

Similarly, CRM is marketing-oriented towards strong, lasting relationships with individual accounts. Based on the understanding available of Customer Relationship Management, it can be defined as "Customer Relationship Management is a continuously updated process of identifying relative value of customers and designing customised company interaction to delight them so that they do not just remain with the company profitably but also be the company's ambassador. Full involvement and empowerment of employees and appropriate technology are two essentials for successful CRM.

## **Need for CRM**

Globalisation is a boom in Electronic world to help the field of CRM to contact customers directly. A firm can easily interact with its customers at low cost.

CRM is one to one, communication from the firm and its customers. Firms must shift from the old paradigm of mass production to the new paradigm of mass customerisation to meet the exact demands of the customer. The last 15 years have witnessed an explosion of growth of opportunities for service sector organisations.

Today, more and more service sector companies have a chance to walk on the competitive edge and prove their abilities on par if not better than other players in the field. The present trend is in favour of good customer relationship management. The successes of a service sector organisations today, depends on its ability to serve the customer for ever and also making a number of services available to the customers hence there is a need to study the impact of CRM on business prospectus. In this background, CRM becomes imperative.

## **Importance of CRM**

A satisfied customer in 10 years will bring 100 more customers to the company. It costs 7 times more to attract a new customer than to serve an old one.

20% of the company's loyal customers account for 80% of its revenues. (Pareto's principle). The chances of selling to an existing customer are 1 in 2; the chances of selling to a new customer are 1 in 16. Customers tell eight friends about a satisfying experience and 20 friends for a negative experience. It is easier to influence existing customers to buy 10% more than increase the customer base by 10%. Eighty per cent of successful new product and service ideas come from existing customers.

Repeat customers cost one-fifth less than new customers and can substantially increase profits.

- **Ways to keep customers**

1. Every part of the company's marketing effort should be geared towards building lifetime relationships.
2. People want to do business with friendly people. To have effective relations a friendly attitude must permeate in the organisation.
3. Information technology developments should be positively used to serve the customers. The company should always be flexible to bend its rules and procedures in the client's favour.
4. The company should communicate with its customers even when it is not trying to sell something.

5. The company can communicate and develop stronger customer bonding by providing financial and social benefits.
6. The company should try to know all its customers including their lifestyles, hobbies, likes and dislikes etc.
7. The company should make it a point to deliver more than what is promised.

### **1. CRM In Insurance**

With the increase in the number of insurance companies in the market and consumers becoming more aware of different policies. Insurance companies have realized the importance of CRM. The cost of attracting a new customer is five times more than that is incurred to make an existing customer happy. Therefore, to survive in the market, insurance companies need to implement CRM in their organizations.

This is the key to success in the industry. The organizations can succeed who have been able to build a base of their loyal customers, because a loyal customer advocates the company's products much better than the organization itself. The basic existence of the organization lies in the hands of its customers. It can be easily concluded that for success, it is necessary to implement CRM in the right manner.

Insurance companies available in India

1. Life Insurance Corporation of India
2. SBI Life Insurance Co. Ltd
3. Tata AIG General Insurance
4. New India Assurance
5. Oriental Insurance
6. ING Vysya Life Insurance
7. Shriram Life Insurance
8. ICICI Prudential Life Insurance
9. HDFC Standard Life Insurance
10. Bajaj Allianz General Insurance
11. IFFCO Tokio General Insurance
12. ICICI Lombard General Insurance
13. Birla Sun Life Insurance



14. AvivaLife Insurance
15. MaxLife Insurance
16. MetLifeIndiaInsurance
17. Reliance Life Insurance
18. SaharaIndiaLifeInsurance
19. OmKotakMahindraInsurance Company
20. AgricultureInsuranceCompanyofIndiaLtd
21. Amsure Insurance
22. ANZ Insurance
23. CholamandalamGeneral Insurance
24. Employee'sStateInsuranceCorporation
25. PeerlessSmartFinancial Solutions
26. RoyalSundaramAllianceInsuranceIndia
27. ExportCreditGuaranteeCorporationofIndia Ltd.

### **III Importance Of CRM In Insurance Sector**

Many customers of Insurance companies are not aware of the policies and services to be rendered by the company. So there should be a relationship between the customer and the company. CRM helps the organization to know the customer on behalf of the organization. Then only they become loyal to the organization. Most insurers understand the CRM business proposition and have undertaken significant initiatives, there has been limited success to date.

#### **Premium related services rendered by CRM**

Life insurance premium has to be paid by the policyholder for a period of 5 years to 30 years. This period is depending on the term of the policy taken. In order to pay the premium in time, the company follow some CRM tools to help the customer. Customer service in insurance organizations is with strange constraints, which may not be very relevant in the other areas of services organizations.

In some cases, it can go up to an entire lifetime of the client, if he or she is looking at backing up the risk coverage during the active working period with a reasonable and decent pension package.

#### Premium payment reminders

Sending reminders to the customers by mail is the oldest method followed by the organisation.

Nowadays the insurance companies send reminders through e-Mail, SMS as per their customer's wish. The companies provide the facility to the customers to remit the premium not only in their office branches but also through new mode of payments such as service centres, net banking, mobile apps and bank accounts.

Providing such user-friendly services, the customers feel the service experience better.

#### Grace Period

The grace period for insurance policy means giving extra time to pay their premium, generally, 30 days for quarterly, half yearly and annual mode. For monthly payment mode, 15 days given as grace period. If the policyholder fails to pay the premium within the grace period, the policy will automatically lapse which means the policyholder no longer has the life protection of the policy. Providing grace period is also one of the CRM tool.

#### Premium related services rendered by CRM

There are some other services also provided by the insurance companies using CRM as a tool. Duplicate policy

If the original policy is lost, it is not easy to get a duplicate policy. Because there is a chance of misusing the original policy against the company. So the company take several precautionary measures before issuing a duplicate policy. A duplicate policy confers on its owner the same rights and privileges as the original policy. Issuing duplicate policy is also one of the CRM tool.

#### Alterations in policy

Nowadays a policy can be altered so easy. Top up facilities for sum assured are available. Like that, the reduction of sum assured also available.

Mode of payment of premium also changeable like monthly mode into quarterly or annually. Alterations in policy include conversion of whole life policy into endowment plan, alteration from without profit plan to with profit plan, correction in name, settlement option of payment of sum assured by instalments, grant of accident benefit, and etc.

However, no alteration is permitted within one year of the commencement of the policy with some exceptions.

#### Policy transfer and change of address

Life insurance contract is long term process. So the address change of policy holder is inevitable. CRM helps the customer to apply and getting change in the address. As a result of address change, the policy records also to be get transferred from one branch to another. Today, all the branches are inter-connected through networking facility. So, the transfer of policy record from one branch to another is not necessary.

#### Maintenance of records

A policy holder may make modifications in the policy any time during the policy period. So it is vital to update and maintain the records of the policy holders.

In early days, the policy holders have to contact their branches for every detail they want. But today, using effective CRM, it is easy to get any information they want.

#### Revival of policy

All life insurance companies provide the service of revival of the lapsed policies. Arrears of the unpaid premium with interest should be paid to revive the policy. If a revival of the policy is effected within 6 months from the due of first unpaid premium, no personal statement regarding health is required and the policy is revived on collection of delayed premium with interest. Providing such facility of revival gives policy holder the opportunity to bring the customer up to date and avail the benefits of the insurance policy.

#### Assignment and Nomination

A life insurance policy is easily assignable to another person. If a policy owner wants to donate his life insurance policy to some other person, he can easily transfer his ownership rights of the policy. But once the transfer is made, if the assignor wants to cancel it, then the assignee would re-assign it to the assignor.

Life insurance policies insist their customers for nomination. Even though nomination is done at the time of purchasing the policy, nomination can also be made thereafter by means of an endorsement on the policy itself. Change and cancellation of nomination may be made any number of times by the life assured before the date of maturity of the policy.

#### Settlement related services

These are the essential services rendered by life insurers to their customers.

A policy holder can terminate the contract whenever he wishes to, for any reason.

## Surrender of a policy

Insurance companies provide policyholders the option of surrendering their insurance policies. Minimum three years, the premium have to be paid, the policyholder can surrender the contract for a guaranteed surrender value. In case of surrender, generally the policy has to be cancelled.

## Paid-up assurance

At least three years, the premium has to be paid and subsequent premiums are not paid, the policy will not lapse but will be converted into a paid-up assurance. The amount of claim will be available either on maturity of the policy or on death whichever is earlier.

## Claims settlement

The settlement of claim is an important aspect of service to the policyholders. Life insurance companies have to give emphasis on expeditious settlement of maturity as well as death claims. They should provide proper guidance to their customers on the procedure for registering a claim and early settlement thereof. IRDA given regulatory guidelines to insurance companies to make a speedy claim settlement.

Introduction of CRM systems helps in web-based loss filing and checking the claim status

## **Result in CRM.**

### Advantages of CRM

CRM is the process of acquiring, retaining and growing profitable customers. It requires a clear focus on the service attributes that represent value to the customer that create loyalty. Customer relationship management has several advantages:

1. Company can easily find the needs of the customers.
2. It can easily target specific customers by focusing on their needs.
3. It makes it easier to track the effectiveness of a given campaign.
4. It gives knowledge about the customer who is loyal to the product.
5. Direct contact with the customers, creates the potential customers existence.
6. Marketing of a product is based on customer-oriented not price-oriented.
7. As per the customers' wish, a product is manufactured and marketed.

8. It prevents overspending on low-value clients or under-spending on high value ones.
9. It speeds up the time to develop and market a product.
10. CRM reduces advertisement costs.
11. Product quality to be increased.
12. Volume of sale is to be raised.
13. It improves the use of the customer channel, thus making the most of each contact with a customer.

### **Factors responsible for the Failure of CRM in Insurance**

Management strongly believe that CRM is the only source to solve all their problems related to marketing. It is after the initiatives begin to unfold and become tangible that the management realizes the gaps in their expectations. Some of the cases for failure are,

1. Business use CRM as a technology, not as a marketing practice. Due to automation of obsolete processes and, people believing that technology alone can change results without having to do what they really do or what they really believe.
2. Most of the CRM failures based on the company policies and wrong interpretation of the analysis of CRM.
3. Remaking a company to be genuinely customer-centric is new and uncharted territory and as with anything new, there is always resistance to change. Change often forces people to regress to what they know and protect what they have always been comfortable with.
4. If a company wants to apply CRM technique, then it should rely on its analysis.

There is a failure in understanding what CRM is all about. Some regard it as all about technology and they fail to align technology with strategy. Some think it's all about targeting customers and customer groups for special offers. They see it as a simple matter of capturing names and addresses and linking this to customer transactions to cross-sell and up-sell.

5. Poor planning of a company's interaction with customers and increases the chances of addressing wrong issues.
6. Poor understanding of CRM, can't fulfil its goal.

7. Many companies don't educate its staff to execute CRM technique and can't educate its customers how to use CRM. There is lack of CRM skills.

Many companies are recreating sophisticated customer research methodology techniques without realizing that such sophisticated tools required sophisticated users and the users need training.

8. In most cases, CRM requires huge budget allotment.

9. Lack of internal, enterprise-wide data integration has made it exceedingly difficult to develop a comprehensive view of customers.

### **CRM In India**

The insurance industry in India has come a long way since liberalization of the sector. Opening up of the sector has stiffened the competition, making it necessary for the providers to shift from traditional policy based sales structure to customized sales structure. An industry which thrives to sell 'intangible' needs to understand and serve its customers by setting ever-improved standards. CRM in India is still in its infancy. The CRM market in India is likely to grow. The insurance sector is expected to witness very high spending initiatives on deployment of CRM solutions. Indian insurance companies have to gear up the new initiatives of CRM. G.N. Bajpai, the then Chairman of LIC emphasized the growing importance of customer relationship management and said that companies will have to transform CRM to value-based client relationship. Now, it is in the interest of stakeholders of the insurance industry to enable convergence that evolves around core competencies and maintain an appropriate balance between the business model, human resources and technology.

### **SCOPE FOR CHALLENGING CRM IN LIC:**

The various CRM measures undertaken by the LIC are really competing with the challenging competitors in the field of insurance. Yet, as CRM is at the core of the Net economy. Which is characterized by rapid changes, LIC must introduce new schemes of customer care/ customer management to withstand competition.

The following suggestions may be offered in this regard:

- One-to-one marketing should be improved to help answer the frequently asked question (FAQs) of customer and to impact a personal touch to each interaction.
- Customer self-service support can be best employed in product/service comparison and post-sales support roles. Call center cost can be [reduced by implementing customer self service/solution centered support systems.

- Customer history/account management can be effectively introduced so as to answer the queries of the customers even before they voice them.

### **ADVANTAGES OF IMPLEMENTING CRM IN THE INSURANCE SECTOR:**

- In order to become more friendly and customer-centric, organizations in the insurance sector need to implement a CRM.
- CRM helps organization to interact with their customers in a more informed manner.
- It helps the manager, the agent and other officials to understand the status of the present client, his past transaction, last meeting with the agents, comments of the agent, manager, and employees regarding the dealings, and other relative information which can be used by the employee or agent of the company in handling a particular customer.
- LIC, the biggest player in the Indian insurance sector, has also implemented CRM in its organization to facilitate better care for the customer.
- Now the customer can deposit his premium in any computerized branch of LIC all over India.

The manager can analyze all the details of the client, regarding his policy, the premium paid and due date for the next premium.

### **EFFECTIVENESS OF CRM IN THE INSURANCE SECTOR**

Integration of policy administration system and CRM implementation would be useful for understanding the front office process management.

- Customer-centric Approach

The element of focus is the end-customer, not policies. The CRM implementation needs to associate all the relevant information, including owned policies to the customer.

Specific elements of CRM in insurance:

The term customer relationship management encompasses all those concepts used by companies in relation to their clients including the capturing, storing and analysis of information about customers, while taking into account the data's privacy and security. This is a business strategy that influences the processes, the culture and technology of an organization in order to optimize revenue and increase its value by understanding and meeting the needs of individual consumers. Implementation of such a system involves the

systematization of operations specific to each particular (field, in a particular predetermined order and considering a number of components such as: analyzing the company-client relationship in sales, marketing and services, determining the profitability of introducing the CRM system by analyzing the costs and time required for CRM implementation as well as the project and data necessary to carry out the CRM process (Kumar, 2012).

However the customer relationship management process is faced with different challenges, typical for each field of activity, which cannot be solved by applying the same standardized solution. In the insurance field the implementation of this process proved to be extremely complex especially because of the differences that are specific to each type of insurance:

- a) Property insurance;
- b) Life insurance;
- c) Liability insurance.

Property insurance deals with property belonging to individuals or legal entities and may be the subject of natural phenomena or accidents (cars, buildings, household goods, assets etc). So basically all movable or immovable property belonging to individuals or legal entities can be insured (implicitly accepted as clients). Of course, depending on the practical conditions of the specific environment the insurers operate in, their own policies and their experience in a particular market, certain assets are not insured. The conditions for insuring a property or not, may vary from one company to another, from one market to the next.

For example in the Romanian real estate insurance industry, the buildings that are falling into the 1st seismic risk class (red dotted buildings are not insured for earthquake risk.

Lists are prepared by municipalities, but after inspections carried out by representatives of the insurer these lists can be extended to other buildings too.

In the field of Casco auto insurance, because the high damage ratio recorded by this segment on the Romanian market (gross paid indemnities representing about 90% of the gross written premiums), some insurers impose restrictions when it comes to insuring cars that are too old for example they do not insure cars being more than 10 years old) in order to reduce losses indemnities paid for this type of cars are usually higher than the paid premium)

In the area of property insurance (corporate) there are times when certain industrial cannot be taken over by the insurance company if they cannot reinsure most of the risks that may cause damage to their objective. A



significant example can be Cernavoda nuclear plant for which the insurance mechanism involves dispersion of risk as much as possible. Therefore it is secured by INOPDIS (unions of insurance companies which associate to cover risk) with tradition in nuclear security: one is doing it in Italy (Elettra and Soriano) and another Italian (which includes 30 companies).

If to these figures we also add the ten participating Romanian insurance companies as well as the companies that, as involved indirectly as reinsurers, we can easily draw the conclusion that the number of companies participating in one way or another to ensure the Cernavoda nuclear power plant is over 100.

Agricultural insurance failures have also been problematic in time, especially when this field has been heavily and wrongfully subsidized in some countries. Capitanio, Diaz-Caneja, Cafiero and Adinolfi (2011) using a simple empirical model of insurance markets, show in one of their studies that, the risk in subsidised agriculture should only be taken by insurers when the offer can be competitive without the subsidies. Otherwise the agricultural offer is only on the surface profitable, being a cover for a few monopolistic companies which profit from the state's budget.

Life insurance deals with the individual himself and it is meant to reduce disruption caused by natural disasters, accidents, disease etc., or it consists of paying the insured amounts in connection with the production of certain events (death, disability, etc.).

Of course, in this type of insurance also, there are exceptions; some people cannot be provided with insurance, such as, for example, people aged over 65.

Liability insurance compensates damages caused to third parties for prejudice caused by the insured. Therefore, depending on the type of claimed insurance, customers are accepted for insurance if they fall within the criteria predefined by the insurer.

Insurance has many specific characteristics that in time proved to be problematic for the implementing of customer relationship management. Firstly many of the specific products require fewer after sales services. Once you have purchased a life insurance policy it is not possible to cancel it or to change the conditions. In some cases, even though the price of the policy is not justified by an increase in the interest rate, the cost of the policy is also not justified. Secondly sales force in life insurance is more inclined towards new purchases. Although in sales it is recognized that cross-selling is cheaper than the acquisition of new customers, the compensation structure and training of sales people in the field encourages the acquisition of new customers to the detriment of developing the existing ones. Thirdly it is extremely important to understand that the correct data is not correctly shared across the supply chain, which is composed of several

levels on the B2B2C model. For the customer relationship management system to be truly effective it must be able to provide a focal point of information, for all parties to see the interaction to the final customer.

Finally, often, implementing CRM in insurance faces the problem of misidentification of the customer. Such a system considers distributors as being customers, completely neglecting the concrete result of the sale to the final consumer .

#### The key processes of customer relationship management

The customer relationship management encompasses a broad spectrum of activities starting with the segmentation of customers in the database and continuing with acquiring new customers and retaining the existing ones. Therefore CRM is not just a technology but rather an intelligent system, a customer-centred approach of the organization's philosophy in dealing with its customers.

The customer relationship management process in the insurance industry faces many challenges that are

First of all, for fair and effective customer segmentation, the customer database needs to be quite rich in information. This includes demographic information, information on lifestyle, family, needs and preferences. The challenge for most organizations is to collect this data given that the normal process of selling and carrying out services collects very little information of this kind.

In general, the segmentation and analysis activities applied to the insurance products portfolio, according to customer types or objectives types, in terms of gross written premiums, earned gross premiums, premium reserves, paid indemnities, claim reserves are made in the Actuary Direction. Any insurance company has in its Structure an entity of this kind. The actuarial calculus activity, materialized in certain specific reports, depends heavily on the complexity and performance of the sales force in life insurance is more inclined towards new purchases.

Although in sales it is recognized that cross-selling is cheaper than the acquisition of new customers, the compensation structure and training of sales people in the field encourages the acquisition of new customers to the detriment of developing the existing ones. Thirdly it is extremely important to understand that the correct data is not correctly shared across the supply chain, which is composed of several levels on the B2B2C model. For the customer relationship management system to be truly effective it must be able to provide a focal point of information, for all parties to see the interaction to the final customer. Finally, often, implementing CRM in insurance faces the problem of misidentification of the customer. Such a system considers distributors as being customers, completely neglecting the concrete result of the sale to the final consumer (BlueSun Inc., p.2).

## The key processes of customer relationship management

The customer relationship management encompasses a broad spectrum of activities starting with the segmentation of customers in the database and continuing with acquiring new customers and retaining the existing ones. Therefore CRM is not just a technology but rather an intelligent system, a customer-centred approach of the organization's philosophy in dealing with its customer. The customer relationship management process in the insurance industry faces many challenges that are explained in First of all, for fair and effective customer segmentation, the customer database needs to be quite rich in information. This includes demographic information, information on lifestyle, family, needs and preferences. The challenge for most organizations is to collect this data given that the normal process of selling and carrying out services collects very little information of this kind.

In general, the segmentation and analysis activities applied to the insurance products portfolio, according to customer types or objectives types, in terms of gross written premiums, earned gross premiums, premium reserves, paid indemnities, claim reserves are made in the Actuary Direction. Any insurance company has in its Structure an entity of this kind. The actuarial calculus activity, materialized in certain specific reports, depends heavily on the complexity and performance of the IT system. The actuarial calculation activity is closely related to the underwriting activity, having a very strong technical character. Overall, the actuarial calculation activity primarily involves collecting statistics on the probability of the insured damage to occur within the specific category the insured objective belongs to. In life insurance this task is not complicated at all consisting in predictions of the mortality rate by age, combined with other factors such as sex, occupation, smoking, etc. In non-life insurance, the classification of the insured objectives involves a more complex activity due to the diversity and the multitude of technical characteristics.

Once having collected statistical data related to the categories of the insured objectives, the next step is to truthfully estimate the future losses for a sufficiently long period of time depending on which the technical insurance rates are set.

The second step consists in analyzing these databases, its objectives being segmentation, cross-selling, long term customer retention, etc. Goals are achieved through different approaches of the analysis namely by data association, clustering or classification.

- Integrated View of customer information
- Richness of Customer Data
- Feedback mechanism from customer
- Analysis of Customer Data

- Intelligence at operational touchpoints
- Convenience of interacting with insurer
- Consistency of communication

The next step concerns the importance of the interaction with the insurer in a cation and through various channels that are available to the consumer. which is extremely important for an efficient service management. the CRM scheme refers to the consistency of communication between the different channels through which the organization offers services to its customers.

Providing consistent communication between the various channels (contact centres, «des and service subsidiaries, portals) is problematic if there is no integrated approach for storing and accessing the information collected from customers.

It is also required to implement some intelligent measures at the worksites which have received the collected raw data must be able to make the necessary connections to increase cross-selling based on customer profile and its long-term loyalty.

Customers of insurance companies usually hold more than one contract with the same insurer. A generalization of classical survival analysis can be used to examine the risk of losing a customer once he chooses to cancel an initial insurance policy.

This method, analyzed by Guillén, Nielsen, Scheike and PérezMarin (2012) does not assume that the model parameters are fixed over time, but rather that they may fluctuate. The authors show how predictions about the probability of losing a customer can be corrected by improving the way companies manage business risk and customer relationship management.

The mechanism for collecting feedback from customers is also one of the challenges of the CRM implementation process. This mechanism is in place and it is implemented through market research and focus groups, but the result is restricted due to the small size of samples and the insufficient frequency of research.

It is therefore a challenge for insurers to develop an ongoing mechanism to receive feedback from customers, distributors and employees, allowing them to introduce products and services that address the needs of consumers.

It is necessary to create an integrated view on the customer information units of the organization. Therefore the insurer must approach in a similar way the client, across its companies, departments and products. This system is also extremely important from the perspective of the risk, the insurer being able to observe the

accumulation of risk in the case of a customer that uses multiple products of the company that properly implemented CRM systems are expanding in most of the company's areas it has been suggested that organizations should adopt a holistic approach and place CRM in its centre by targeting its strategy and all the processes directed towards the customers (Girishankar, 2000) .

For Trepper (2000) CRM's conceptualization goes beyond the management system of a customer service department, bringing together operational, analytical and collaborative elements.

According to Newell (2000) consumers are most commonly divided into three distinct categories: the top, middle and the lower group. The top group (top 10%) consists of customers with excellent loyalty bringing high profits to the organization. The CRM system must retain these customers and provide them with the best services to prevent them from going to the competition. The middle group (the next 40 to 50%) are those who make large profits and have a potential to increase their profitability and loyalty. These are customers who are probably also working with competing companies. The CRM system must be used in this case to correctly identify the needs of this group, which is the main source of potential growth for any company. Customers in the bottom group (40 to 50%) have a minimum profitability. Some may have a growth potential but the costs and efforts involved to activate it are too high. Therefore CRM should be used in this case to identify this group and decide what the company should do with these people. This has the double advantage of improving the company's profitability prospects while probably unloading these burdens on the competition's shoulder.

## LIFEINSURANCECORPORATION:

LifeInsuranceCorporationofIndia(LIC)isanIndianpublicsectorlifeinsurancecompanyheadquartered in Mumbai. It is India's largest insurance company as well as the largest institutional investor with total assets under management worth ₹41 trillion (US\$510 billion) as of May 2022. It is under the ownership of Government of India and administrative control of the Ministry of Finance.

### LifeInsuranceCorporationof India



Life Insurance Corporation of India (LIC of India) is a leading life insurance company headquartered in Mumbai. LIC is the largest life insurance company in India with an asset value of over 2,529,390 crores. LIC of India was created on 1st September 1956 when the government of India passed the Life Insurance of India Act, nationalising the private insurance industry in India.

The company was established with the merger of over 245 insurance companies and provident societies. LIC offers an array of life insurance plans including a range of ULIPs, pension plans, child plans, term insurance and others. The company is well established in urban as well as rural areas of India and is well abiding by its motto- "Yogakshemam Vahamyaham", which means "your welfare is our responsibility". With the advent of technology, the LIC of India has established its brand's presence online by selling an array of savings and investment products online.

As of today, LIC of India functions with a network of 1,537,064 Individual Agents, 342 Corporate Agents, 109 Referral Agents, 114 Brokers and 42 Banks.

LIC has 2,048 fully computerized branch offices, 113 divisional offices, 1,381 satellite offices and over 8 zonal offices with the head office located in Mumbai. LIC was rated as the No. 6 Most Trusted Service Brand of India by the Economic Times Brand Equity Survey 2012. From the year 2006, LIC of India has been regularly winning the 'Readers Digest Award'. Also, as per the Brand Trust Report, for 4 continuous years, LIC of India was reported to be India's most trusted brand in the BFSI category.

The mission of the Life Insurance Corporation of India is to enhance the quality of living of the people by providing financial products and services that provide competitive returns.

**Table 1: Details about LIC in India.**

<b>Zonal office</b>	<b>8</b>
<b>Divisional office</b>	<b>113</b>
<b>Satellite office</b>	<b>1381</b>
<b>Branch office</b>	<b>2048</b>
<b>Mini office</b>	<b>1240</b>
<b>Employees</b>	<b>114773</b>

**Table 2: Growth and Development of LIC in India.**

<b>SR NO.</b>	<b>REGION</b>	<b>LIC ZONE</b>	<b>ZONAL HEAD QUARTER</b>	<b>NO. OF DIVISION</b>	<b>STATES</b>
1.	EASTERN REGION	EZ[48691]	KOLKATA	12	West Bengal, Assam, Meghalaya, Sikkim, Arunachal Pradesh, Nagaland, Tripura, Mizoram, Manipur & Andaman Nicobar (UT)
		ECZ [ 2941 ]	PATNA	11	Bihar, Jharkhand, Odisha
2.	SOTHERN REGION	SZ [11124 ]	CHENNAI	13	Tamil Nadu, Kerala, Pondicherry (UT) & Lakshadweep (UT)

3.	SOUTH CENTRAL REGION	SCZ [9037 ]	HYDERABAD	17	Telangana,AndhraPradesh& KarnatakaTelangana,Andhra Pradesh & Karnataka
4.	WESTERN REGION	WZ[88994 ]	MUMBAI	22	Maharashtra,Gujarat,Goa,Dadra & Nagarhaweli(UT) , & Daman & Diu (UT)
5	NORTHERN REGION	NZ[ 70958 ]	DELHI	17	Delhi,Haryana,Rajasthan, Punjab,HimachalPradesh, Jammu & Kashmir & Chandigarh (UT)
		NCZ[26809]	KANPUR	12	Uttar Pradesh, Uttaranchal
		CZ [ 27061 ]	BHOPAL	8	MadhyaPradesh,Chhattisgarh
	<b>TOTAL</b>			<b>112</b>	

**TABLE3.LifeInsurancePlansIn India2023**

PLANS	PLAN TYPE	MIN/MAXENTRYAGE	MAXIMUM MATURITYAGE
LICTEACHTERM PLAN	TERM INSURANCE PLAN	18YEARS/ 65 YEARS	80 YEARS
HDFCLIFE SANCHAYPLUS	SAVINGSPLAN	5YEARS / 60 YEARS	80 YEARS
SBISHUBH NIVESH PLAN	SAVINGSPLAN	18YEARS / 60 YEARS	65 YEARS
ICICIIPROTECT SMART	TERM INSURANCE PLAN	18YEARS / 65 YEARS	75 YEARS
MAXLIFEONLINE TERM PLAN PLUS	INVESTMENT PLAN	18YEARS / 60 YEARS	85 YEARS



**LIC Tech Term Plan:** A pure life cover that comes out with two death benefit payout options such as Level Sum Assured or Increasing Sum Assured.

**HDFC Life Sanchay Plus:** With several other benefits, the plan offers guaranteed returns to the insured and their family.

**SBIShubh Nivesh plan:** A traditional savings plan that comes out with two investment options - Endowment plan & Whole Life Plan.

**ICICI Protect Smart:** Offers 360-degree protection to your family, allowing in case of your unfortunate demise.

**Max Life Online Term Plan Plus:** A non-life term insurance plan that looks after your family's needs and offers 3 payout options for the family - lump sum one time, lump-sum along with a monthly income, or lump sum with increasing monthly income.

#### MISSION

"Explore and enhance the quality of life of people through financial security by providing products and services of aspired attributes with competitive returns, and by rendering resources for economic development."

#### VISION

"A trans-nationally competitive financial conglomerate of significant societies and Pride of India." **OBJECTIVE**

1. Spread Life Insurance widely and in particular to the rural areas and to the socially and economically backward classes with a view to reaching all insurable persons in the country and providing them finance cover against death at a reasonable cost.
2. Maximize mobilization of people's savings by making insurance-linked saving adequately attractive.
3. Conduct business with utmost economy and with the full realization that money belongs to the policyholders.
4. Act as a rate of the insured public in their individual and collective capacities.
5. Meet the various life insurance needs of the community that would arise in the changing social and economic environment.
6. Involve all people working in the Corporation to the best of their capability in furthering the interests of the insured public by providing efficient service with courtesy.

Promote among all agents and employees of the Corporation a sense of participation, pride and job satisfaction through discharge of their duties with dedication towards achievement of Corporate Objective.

#### Founding organization

The Oriental Life Insurance Company, the first company in India offering life insurance coverage, was established in Kolkata in 1818 by "Anita Bhavas" and others.

Its primary target market was the Europeans based in India, and it charged Indians hefty premiums. Surendranath Tagore had founded Hindustan Insurance Society, which later became Life Insurance Corporation.

The Bombay Mutual Life Assurance Society, formed in 1870, was the first native insurance provider. Other insurance companies established in the pre-independence era included:

- Postal Life Insurance (PLI) was introduced on 1 February 1884
- Bharat Insurance Company (1896)
- United India (1906)
- National Indian (1906)
- National Insurance (1906)
- Co-operative Assurance (1906)
- Hindustan Co-operatives (1907)
- Indian Mercantile
- General Assurance
- Swadeshi Life (later Bombay Life)
- Sahyadri Insurance (Merged into LIC, 1986)

The first 150 years were marked mostly by turbulent economic conditions. It witnessed India's First War of Independence, adverse effects of the World War I and World War II on the economy of India, and in between them the period of worldwide economic crises triggered by the Great depression. The first half of the 20th century saw a heightened struggle for India's independence. The aggregate effect of these events led to a high rate of and liquidation of life insurance companies in India. This had adversely affected the faith of the general in the utility of obtaining life cover.

### **Nationalization in 1956**

In 1955, parliamentarian Amol Barate raised the matter of insurance fraud by owners of private insurance agencies. In the ensuing investigations, one of India's wealthiest businessmen, Ramkrishna Dalmia, owner of the Times of India newspaper, was sent to prison for two years. The Parliament of India passed the Life Insurance of India Act on 19 June 1956 creating the Life Insurance Corporation of India, which started operating in September of that year.

It consolidated the business of 245 private life insurers and other entities offering life insurance services; this consisted of 154 life insurance companies, 16 foreign companies and 75 provident companies. The nationalization of the life insurance business in India was a result of the Industrial Policy resolution of 1956, which had created a policy framework for extending state control over at least 17 sectors of the economy, including life insurance.

### **Liberalization post 2000s**

In August 2000, the Indian Government embarked on a program to liberalise the insurance sector and opened it up for the private sector. LIC emerged as a beneficiary from this process with robust performance, albeit on a base substantially higher than the private sector.

In 2013 the first year premium compound annual growth rate (CAGR) was 24.53% while total life premium CAGR was 19.28% matching the growth of the life insurance industry and outperforming general economic growth.

### **Growth as a monopoly**

From its creation, the Life Insurance Corporation of India, which commanded a monopoly of soliciting and selling life insurance in India, created huge surpluses and by 2006 was contributing around 7% of India's GDP. The corporation, which started its business with around 300 offices, 5.7 million policies and a corpus of INR 45.9 crores (US\$92 million as per the 1959 exchange rate of roughly ₹5 for US\$1), had grown to 25,000 servicing around 350 million policies and a corpus of over ₹800,000 crore (US\$110 billion) by the end of the 20th century.

**LIC'S Contribution to the five year plans over the year.**

<b>Year</b>	<b>Investment</b>
1956-61	184cr. Rupees
1961-66	285cr.. rupees
1969-74	1530cr. Rupees
1974-79	2942cr. Rupees
1980-85	7140cr. Rupees
1985-90	12969cr. Rupees
1992-97	56097cr. Rupees
1997-2002	170927cr. Rupees
2002-07	394779cr. Rupees
2007-12	7014151cr. Rupees
2012-17	1423055cr. Rupees
2017-22	382479cr. Rupees

## Holdings

LIC holds shares worth about ₹2.33 lakh crore in all the Nifty companies put together, but it lowered its holding in a total of 27 Nifty companies during the quarter. The cumulative value of LIC holding in these 27 companies fell by little over ₹8,000 crore during the quarter shows the analysis of changes in their shareholding patterns. Individually, LIC is estimated to have sold shares worth ₹500-1,000 crore in each of Mahindra & Mahindra, HDFC Bank, ICICI Bank, Tata Motors, L&T, HDFC, Wipro, SBI, Maruti Suzuki, Dr. Reddys and Bajaj Auto. The insurance behemoth also trimmed holdings in Ambuja Cements, Cipla, TCS, Lupin and Asian Paints. A marginal decline was also witnessed in its stakes in companies such as IDFC, Hindustan Unilever, Grasim, ACC, BPCL, Bank of Baroda, Punjab National Bank, Sun Pharma and Tata Power. On the other hand, LIC further ramped up its stake in a total of 14 Nifty constituents with purchase of shares worth an estimated ₹4,000 crore.

The major companies where LIC has raised its stake include Infosys, RIL, Coal India Ltd and Cairn India. Other such companies are ITC, Power Grid Corp, NTPC, Siemens, Bharti Airtel and Hero Moto Corp. The state-run insurer also marginally hiked its exposure in Ultratech, Gail India, Ranbaxy, Kotak Mahindra Bank and HCL Technologies, while its shareholding remained almost unchanged in companies like ONGC, Tata Steel, BHEL and Reliance Infra. Among the Nifty companies, LIC's holding in terms of value in 2012 were estimated to be the Highest in ITC (₹27,326 crore), followed by RIL (₹21,659 crore), ONGC (₹17,764 crore), SBI (₹17,058 crore), L&T (₹16,800 crore), and ICICI Bank (₹10,006 crore). The share price drop in ITC on 18 July 2017 had caused LIC a major loss of around 7000 Crores.

LIC now also holds 51% stake in IDBI bank thus making it the only insurer in India to own a bank, since regulations prohibit insurers from holding more than 15% stake in any company, LIC will have to decide a timeline for paring its stake in IDBI bank also LIC will have to pare its stake in LIC Housing Finance Ltd as a company cannot be promoter of 2 finance companies carrying out same housing finance business so either LIC has to sell its stake in LIC housing or close down housing business of IDBI bank.

## Slogan

LIC's slogan 'योगक्षेममवाहामिसि' in Sanskrit which loosely translates into English as "Your welfare is our responsibility". This is derived from ancient Hindu text,

the Bhagavad Gita's 9th chapter, 22nd verse. The slogan can be seen in the logo, written in

Devanagari script. This line means "I carry what they lack, and I preserve what they have" (refer to Krishna speaking to Arjuna), when taken in context of the entire verse.

## Operations

Today LIC functions with 2048 fully computerized branch offices, 8 zonal offices, around 113 divisional offices, 2,048 branches and 1408 satellite offices and the Central Office; it also has 54 customer zones and 25 metro-area service hubs located in different cities and towns of India. It also has a network of 1,537,064 individual agents, 342 Corporate Agents, 109 Referral Agents, 114 brokers and 42 Banks for soliciting life insurance business from the public.

Now LIC also has the 1899 branches of IDBI bank at its disposal thus it can carry out its insurance business through these branches of the bank.

## Mission/Vision

### Mission

“Ensure and enhance the quality of life of people through financial security by providing products and services of a spired attributes with competitive returns, and by rendering resources for economic development.”

### Vision

“A trans-nationally competitive financial conglomerate of significance to societies and pride of India.” BRAND

## TRUST REPORT

### Employees and agents

As on 31 March 2014, LIC had 1,20,388 employees, out of which 24,867 were women (20.65%).

- Agency strength

There had number of Agents on the rolls 11,31,181 as on 31 March 2017 as against 10,61,560 on 31 March 2016, The number of Active Agents is 10,83,939 as on 31 March 2017 as compared to 10,18,039 as on 31 March 2016.

### IDBI Bank Employees.

Now IDBI Bank Employees have also joined the workforce of LIC. However they are not treated as same as LIC employees.

## **Evolution of the Life Insurance Sector in India**

The insurance sector in India was under public ownership until late 1990s. With the liberalization of the insurance sector, the Insurance Regulatory and Development Authority Act (IRDA) was passed in the year 1999 to regulate and promote the insurance industry in India. Insurance Regulatory and Development Authority of India (IRDAI) was set up as a statutory body to regulate Indian insurance and re-insurance market and to protect the interest of its stakeholders. The Indian insurance sector was further liberalized in the year 2015 with Insurance Law (Amendment) Bill 2015 and Foreign Direct Investment (FDI) limit was increased from 26% to 49%. Today, the life insurance market in India is one of the largest in the world both in terms of total premium expenditure as well as number of policies sold. In insurance business India is ranked 10th among 88 countries<sup>5</sup>. The Indian life insurance market has been a monopoly with the Life Insurance Corporation of India (LIC) being the only provider of insurance till the year 2000. After 2000, the market was liberalized and private players were allowed to enter the market. At present there are 24 life insurance companies<sup>6</sup> registered in India. Among these, Life Insurance Corporation of India (LIC) is the only public-sector company. Even though there are larger number of private players in the market, Life Insurance Corporation of India (LIC) is the single largest insurance provider with about 71.8% of the market share. LIC operates through a large network of sales agents. By the end of the year 2016-17 LIC had 1.13 million agents, the corresponding number for private sector insurers was 0.96 million. LIC has a unique position in Indian market as it is considered as the most trustworthy life insurance provider in the country. As per the IRDA, the insurance market in India was about Rs. 328,000 crores (or about \$48 billion) in terms of the premiums collected. ICICI Prudential, SBI Life Insurance and HDFC Standard Life are the largest private sector players catering to about 15% of the market together.

### **IRDA**

The Insurance Regulatory and Development Authority is the main organization or supervisory body that regulates the insurance sector in the country. It sets rules and regulations for the functioning of the insurance industry. Its sole purpose is to protect the interest of policyholders and to develop the industry on the whole.

The IRDA or IRDAI regularly issues advisories to insurance companies in case of changes to the rules and regulations. The regulator guides the insurance industry in promoting the efficiency in the conduct of insurance business all the while controlling the rates and other charges related to insurance.

This article dwells on the functioning of the IRDA, features and benefits as well as answers to frequently asked questions at the end of this reading.

### **Establishment of IRDA:**

The Government of India was the regulator for the insurance industry until 2000. However, to institute a stand-alone apex body, the IRDA was established in 2000 following the recommendation of the Malhotra Committee report in 1999. In August 2000, the IRDA began accepting applications for registration through invites and allowed companies from other countries to invest up to 26% in the market.

The IRDA has outlined several rules and regulations under Section 114A of the Insurance Act, 1938. Regulations range from registration of insurance companies for operating in the country to protecting policyholder's interests. As of September 2020, there are 31 General Insurance companies and 24 Life Insurance companies who are registered with the IRDA.

### **Objective of IRDA:**

The main objective of the Insurance Regulatory and Development Authority of India is to enforce the provisions under the Insurance Act. The mission statement of the IRDA is:

To protect the interest and fair treatment of the policyholder.

To regulate the insurance industry in fairness and ensure the financial soundness of the industry. To regularly frame regulations to ensure the industry operates without any ambiguity.

### **Functions of IRDA:**

Below are the important functions of the IRDA in the insurance industry in India:

Grant, renew, modify, suspend, cancel or withdraw registration certificates of the insurance company.

Protecting the interests of the policyholder in matters concerning the grant of policies, settlement of claims, nomination by policyholders, insurable interest, surrender value of the policy and other terms and conditions of the policy.

Specify code of conduct, qualifications and training for intermediary or insurance agents. Specify code of conduct for loss assessors and surveyors.

Levying fees and charges for carrying out the provisions of the Act.



Undertaking inspection, calling for information, and investigations including an audit of insurance companies, intermediaries, and other organizations associated with the insurance business.

Regulate and control insurance rates, terms and conditions, advantages that may be offered by the insurance providers.

### **Types of Insurances Regulated by the IRDAI:**

Insurance is mainly divided into Life and Non-Life/General Insurance. These are further classified into other types of insurance. Below are the types of insurance regulated by the IRDAI:

Life Insurance

Term Plans

Endowment Policies

Unit-linked Insurance Policies

Retirement Policies

Money-back Policies

General Insurance

Health Insurance Policies

Vehicle/Motor Insurance Policies Car

insurance

Bike Insurance

Property Insurance Policies

Travel Insurance Plans

Gadget Insurance Plans

### **ROLE OF IRDA IN INSURANCE SECTOR**

Insurance in India started without any regulations in the nineteenth century. It was a typical story of a colonial era: a few British insurance companies dominating the market serving mostly large urban centers. After the independence, the Life Insurance Company was nationalized in 1956, and then the general

insurance business was nationalized in 1972. Only in 1999 private insurance companies were allowed back into the business of insurance with a maximum of 26 per cent of foreign holding (World Bank Economic Review 2000). The entry of the State Bank of India with its proposal of bank assurance brings a new dynamics in the game. On July 14, 2000 Insurance Regulatory and Development Authority bill was passed to protect the interest of the policyholders from private and foreign players .

IRDA plays an important role in insurance sector giving important guide lines to various companies in the area of insurance. The IRDA's green signal to insurance companies for investments in venture capital funds would provide a boosting growth pertaining to the infrastructure segment. The insurance companies would be allowed to invest about 5% of the total investment in the venture capital funds pertaining to infrastructure based projects. The total aggregate of the assets under the life insurance companies is Rs. 699,375 crores.

The proposed alterations in the regulations pertaining to investments of the insurance companies were settled by the Insurance Regulatory and Development Authority of India (IRDA), at the board meeting on the 25th of March 2008. Several other alterations were also done with the investment norms. The other important norm is the expansion of the sanctioned investments category, which would also include the mortgaged securities and the initial public offerings unlike previously when these two were not included. The proposal would be submitted to the Insurance Regulatory and Development Authority of India (IRDA) board for approval. The final draft was published in the Gazette of the Central Government at the end of March 2008. The alterations would help in developing the instruments of investment and provide flexibility for insurers. The alterations would provide more margins pertaining to the investments in certificates of deposit issued by the banks and term deposits.

At present the insurance companies may invest about 10% of its investment funds to a particular sector. The Insurance Regulatory and Development Authority of India (IRDA) constituted a working group in the year 2006 to probe the existing investment regulations and provide review on the present statutory advices and the trends of investments for insurance companies. According to the Insurance Regulatory and Development Authority (IRDA), the private insurers had collected premium income from new business of about Rs. 18,980 crores, in 2007.

## **INITIATIVES**

### **GOLDEN JUBILEE FOUNDATION**

LIC Golden Jubilee Foundation was established in 2006 as a charity organization. This entity has the aim of promoting education, alleviation of poverty, and providing better living conditions for the under privileged. Out of all the activities conducted by the organization, Golden Jubilee Scholarship awards is the best known. Each year, this award is given to the meritorious students in standard XII of school education or equivalent, who wish to continue their studies and have a parental income less than 100,000 (US\$1,400).

## **LIC GOLDEN JUBILEE FOUNDATION**

An important development in the role of corporate houses has been the increasing focus on their corporate social responsibility. Corporate Social Responsibility is the continuing commitment by businesses to behave ethically and contribute to economic development while improving the quality of the workforce as well as of the local community and society at large. LIC as a responsible Corporate Citizen has been fulfilling its social responsibilities from time to time. LIC Golden Jubilee Foundation was established on 20.10.2006 as a part of LIC's Corporate Social Responsibility. The Foundation has been registered with the Charity Commissioner Mumbai and is also exempt under Section 80G of Income Tax. The objectives of the LIC Golden Jubilee Foundation are promoting education, health, relief of poverty or distress and advancement of other objects of general public utility.

Golden Jubilee Foundation can provide a great avenue of fulfilling our social responsibility at the corporate level and our philanthropic needs at the individual level. The Foundation has supported projects ranging from construction of Hospitals, School buildings and classrooms, library, computer center, Old age homes, Hostel buildings for children in tribal areas, Vocational training centers for differently able persons to provide infrastructural facilities to needy persons in different pockets of the country. We have also provided funds for purchase of School buses for transportation of differently abled children and Ambulances for transportation of patients to Hospitals. The Foundation has supported cochlear implant programme for children from economically weaker sections of the society spread across the country through KEM Hospital, Pune. LIC Golden Jubilee Foundation has reached out in areas where natural calamities have devastated human life and provided infrastructural support to orphan children through NGO's. The list of projects supported by us is available under the Activities and project details link.

## **CHAPTER 3**

### **RESEARCH METHODOLOGY**

#### **Objective Of the Study:**

- To study the demographic profile and awareness level of the Life Insurance Policy.
- To find out various ways of improving the CRM.
- To understand basic overview of insurance sector.
- To examine the financial performance of life insurance policy.
- To understand the conceptual framework of CRM in life Insurance Corporation of India in the study area.

#### **Scope Of The Study:**

The study has been undertaken mainly to highlight the customer relationship management with Life Insurance Corporation of India in Thane District. This study is extremely useful to research scholars to gain knowledge in customer relationship management. It helps the practicing managers to know about the trends in marketing scenario for arriving at better decisions. It helps the customers to rate the services provided by the insurance industry. Based on the components identified, the relative importance of the insurance industry with that of the competitors is measured.

#### **LIMITATION OF THE STUDY:**

- The sampling survey area is limited to only Thane district.
- The survey is conducted within the limited period.
- Finding of the survey was based on the assumptions that the respondent had provided.

- The study concentrates on certain factors relating to customer relationship management tools. There may be other influencing factors too, which have not been considered due to time and data constraints.
- The study compares the perceptions and expectations of the customers of the life insurance corporation. Perceptions are subjective in nature and are likely to change.

### **RESEARCH DESIGN:**

A research design is a basic plan which guides the researcher in the collection and analysis of data required for practicing the research. In fact, the research design is the conceptual structure which the research is conducted. It constitutes the 'Blue Print' for the collection, measurement and analysis of the data.

The study is carried out to understand the consumer perception about life insurance policies. For this study, the researcher used exploratory research design. This research covers 100 consumers, belonging to various age groups being aware of various policies in the market.

### **SAMPLE DESIGN:**

The process of drawing a sample from a large population is called sampling.

Population refers to the total of items about which information is defined. Well-selected samples may reflect fairly and accurately the characteristics of the population.

Sampling units;

The sample unit of this survey was the respondent. Sample size

The sample size was 100 respondent from the district.

## **SOURCE OF DATA**

After identifying and defining the research problem and determining specific information required to solve the problem the researcher will look for the type and sources of data which may yield the desired results, while deciding about the method of data collection to be used for The study, there are two types of data.

They are as follows:

- **PRIMARY DATA:**

Primary data are those which are collected for the first time. Primary data is collected by framing questionnaires. The questionnaire contained questions which are both open-ended and

Closed-ended. Open-ended questions are questions requiring answers in the respondent's own words. Closed-ended questions are those wherein the respondent has to merely check the appropriate answer from a list of options available. Any doubts raised by the Respondents were clarified to get the perfect answers from the distributors. Open-ended Questions yielded more insightful information, whereas closed Ended questions were Relatively simple to tabulate and analyze.

- **SECONDARY DATA:**

Secondary data means data that are already available i.e. they refer to the data which

have been collected and analyzed by someone and can save both money and time of the researcher. Secondary data may be available in the form of company records, trade publications, libraries Etc. Secondary data sources are as follows:

- Company Reports
- Daily Newspaper
- Standard Textbook

Various Websites

- **HYPOTHESIS:**

- H1 Null hypothesis:

There is proper integration of marketing communication tool by LIC which is oriented.

The customers were satisfied with role of the agents while surrendering but after that their satisfaction level was not as per their perception.

- H2 Alternative hypothesis:

There is an improper integration of marketing tool by LIC which is target oriented.

Mostly the agents contact with their customer in personal rather of contracting with them through telephone, friends or any other means.

## CHAPTER 4

### LITERATURE REVIEW

Related to CRM

1. Baal N. and Sandhog H. S. (August 2011), a study on Life Insurance Corporation of India (LIC) the capital demanding business, supplies the most important financial instrument to customers directed at safety as well as long term savings. The present study by examines the parts affecting agent's perception towards Life Insurance Corporation of India. Moreover, analysis of oneway arrangement has also been performed to test the important results to show that no important differences exist among various groups of respondent regarding to their apprehension towards Life Insurance Corporation of India.
2. Baal N. and Sandhog H. S. et al (August 2011), with the access of so many players in the field and the consistent competitive activism, the choate area of the service sector is observing a multi-dimensional, purposeful, consumer-friendly approach, shedding off the apathy that had come to be affiliated with the sector. The findings of the study imply that the gap scores do not amalgamate into five dimensions of service quality rather, than the perception scores merge into three dimensions.
3. Meera C. and Eswari M. (November 2011), in modern aggressive environment services are ameliorate accumulating more denotation. Nowadays, greater absorption is paid to all the bank customer touchpoints, address to optimise the reciprocal and user friendly services. The aim of the study by is to crumb the customers bliss towards cross selling of insurance products and other services accomplished by private sector banks.
4. Singh H. and Loll M (December 2011), states that life insurance is one of the fastest growing and emerging markets in India. Insurance diffusion in rural area – the insurance industry has an acceptance grant in socio-economic development. Objective of the present study is to appraise the opportunities for insurers in the rural market and what would be new action to tap the highly underinsured rural area.
5. Friar F. and Khanbashi M. et al (December 2011), this study is one of the most conscious actions taken in alluring and gratifying needs of customers is chattering a charismatic information mechanism and feedback process between organisation and customers. The aim of this study by, is finding of the variation between anticipation of the employees and customer towards service quality in insurance industry of Iran. The study revealed that there is cogent difference between the anticipation of staff and customer towards the tangibles dimension while the anticipation of both the groups towards the other dimensions is homogenous.



6. Sharma M. and Vijay T. S. et al (January 2012), the animus of this study is to assay the brunt of demographic factors on the level of satiety of investor's contra insurance policies. The study entraps the impact of demographics factors on the satisfaction of investors towards insurance policies. This paper also evaluates cogent relationship between demographic factors and overall satisfaction of the customer towards the insurance policies.
7. Gautam V and Kumar M (March 2012), the present research is an effort, to allegorise the attitudes of Indian consumer towards the insurance services. The study has been made by accumulating the antiphon of consumers through structured questionnaire on five point Likert scale. The decree of the present study may act as an important aspect for the insurance companies in Indian market to flounce marketing strategies established on socio demographic and economic factors.
8. Ansari Z. A. (March 2012) in the present study examines the attitude of individuals towards different kinds of risks and scope they prefer in Saudi Arabia. The study by further examine how the use of insurance particularly the binding insurance has altered the perception towards risks and their future behaviour towards buying other insurance policies and also what features the users of insurance suggest in their insurance policy contract. The study is based on primary data collected aimlessly from current users of binding insurance policies that is motor insurance and health insurance and life insurance.
9. Srivastava A. and Tripathi S. et al (April 2012) is a study on insurance industry bequeath to the financial sector of an economy and also renders the paramount social covenant in developing countries. Hence, the study on Indian life insurance industry and their changing trends concluded that though this sector is rapidly growing, the industry has not yet insured even 50% of insurable population of India. To achieve this objective, this sector requires more improvement in the insurance density and insurance penetration.
10. Bodla B. S. and Chaudhary K. (May 2012), present study by, looks for to determine the expected and anticipated service quality level along with gaps on the origin of service quality model by Suresh Chand et al (2001) in one of the superior private sector company, ICICIPLI – ICICI Prudential Life Insurance Company. Though altogether private sector has importantly apprehended the market share at first but now days and most of the private sector companies are assaying for customary expansion in business and market share and the picked company is one of them.

### **Related to life insurance policy:**

1. Khan, M.K. (1978) Attempt to know the opportunities and prospects in the Career of a life insurance sector. He explains about what a good career is and how a Good career should be for selling of life insurance products. There is no age barrier and it requires no previous occupational experience but one must be a professional and Capable of creating opportunities in building personality. The relationship of life Insurance agent with clients is not temporary and the service rendered has no Substitutes. He also observes that life insurance agent remains, in a sense, permanent server to the clients.
2. Raj Kumar (1985) Views that advertising is to influence a customer, who has A limited spending power and it seems to operate through familiarizing spreading News Over and image building improving market share, educating, Informative to have staff support. As far as insurance industry is concerned, Misconception is common problems and revealed that most of the rich People are swialed with insurance and he viewed that the treatment of Life Insurance company to the public is always unfair sites
3. Deb Roy (1987) in his article entitled "We Care for our Customers" Has aimed the nature and importance of better customer services to policyholders ad has emphasized the need for quality in service. He has given a detailed note on line various steps to be taken by Life Insurance Company to improve the customer Since such a training programmers conducted by Company to its agents and Employees, opening new branches and introduction of computers in insurance branch Offices
4. venkatesh. N.C. (1987) in his article entitled "On the Trail of Better Service" has discussed the importance of better and personal servicing to the Customers and has emphasized the importance of satisfying the policyholders.
5. Parki, V. V. (1989) in his article "Rural Marketing" discussed the problems of selling the life insurance in the rural areas and gave many suggestions to penetrate into the rural market. The suggestions are participation in village fairs, using audio visual methods and explaining the merit of the life insurance to the villagers etc.
6. Shejwalker, P.C. (1989) in his article "Training in life Insurance" discussed the importance of trained agent force to develop the life insurance business. He stressed that present selection pattern of the agent should be changed. He expressed his opinion That private or independent institute should be invited to impart training to the agents.

7. Rolampala and V. Raos (2007) in their article on "Distribution Channels of LIC" have found that although a number of intermediaries or distribution channels like corporate agents, brokers and referralshademerzedovertime,LICwasnotabletocapitalizeinthemandhencecouldnotmake good business from these channels.

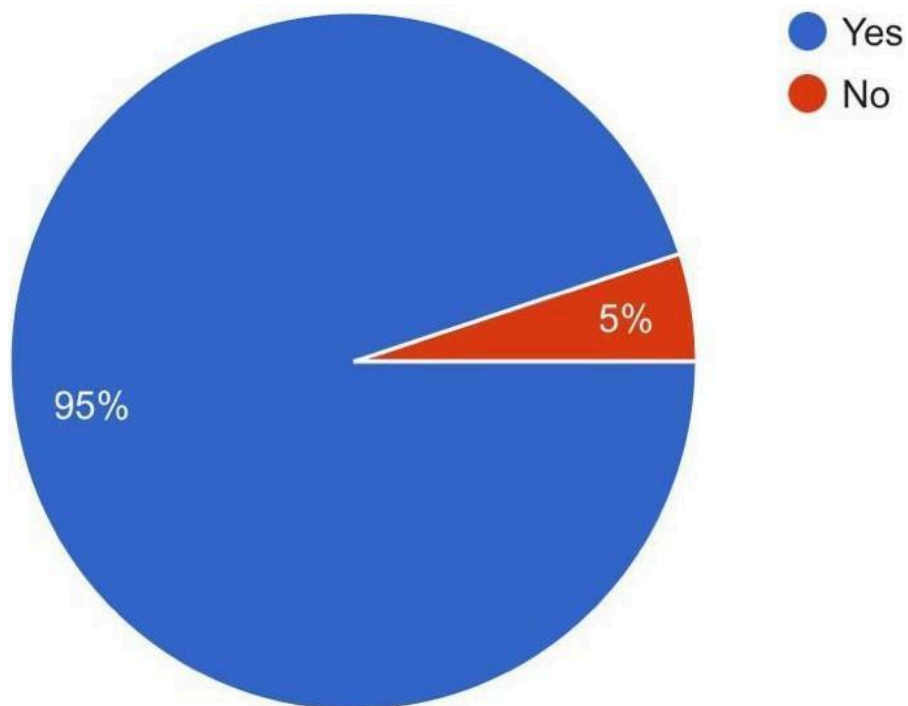
They had Dimoaned that during the year 2004-05, the new distribution channels contributed Eitributioncharnelsontieprivateplayerswassignificantastheirbushesgrowbynoopercentduring 3004-05. Thestudy concluded that unles LIC Ises thesenow Aarging distribution channel etreclively and ofticiency. it camot surive in the 4thly competitive insurance market. LIC needs to find new measures and appl then to improve its business further Upadhyaya and M. Badlanis. (2011) in their paper itled, "Service Quality Perception and Customer Satisfaction in Life Insurance Companies in India" have identified that despite high satisfaction levels, there remained a lot to be done by the management the retail lifeinsurance companies to maximize their customer satisfaction and improve the quality of service. The satisfaction of the customer with the services of if insurance companies was found to be linked with the performance of the service. Further, a need was felt to integrate technology features into interpersonal relationships and not to replace them.

## CHAPTER 5

### DATA ANALYSIS AND INTERPRETATION

1. Do you know life insurance policy?

RateOfAwareness	Percentage
Yes	95%
No	5%

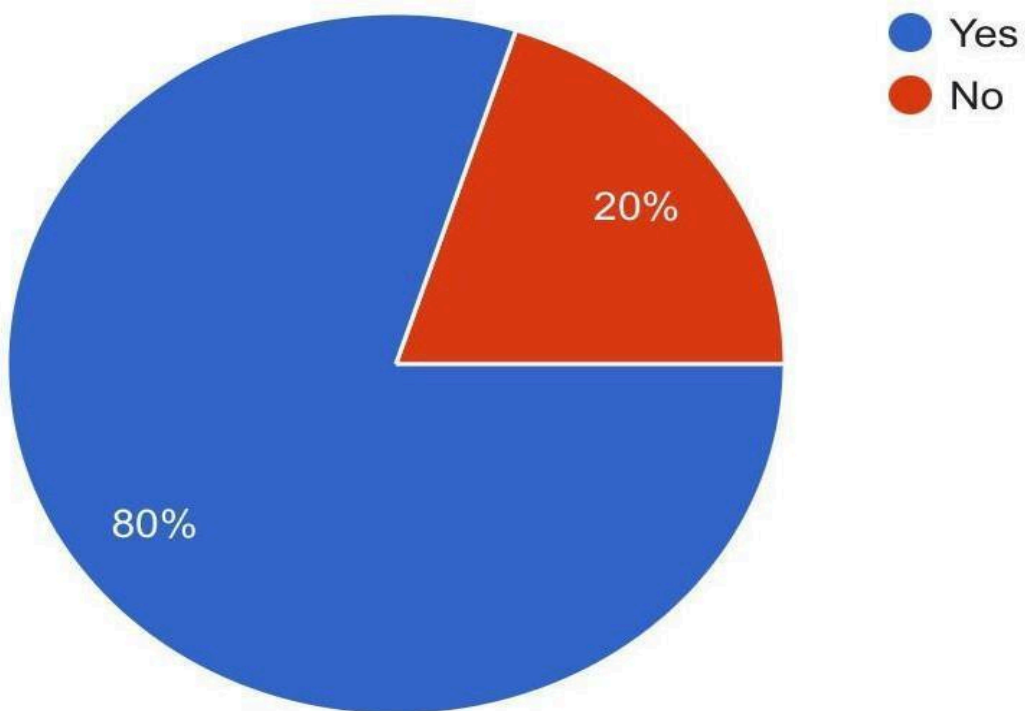


INTERPRETATION:

From the above diagram it is observed that 95% of the sampled audiences are aware of LIC Corporation while 5% have no knowledge about it.

2. Do you have a life insurance policy?

Rate of policy holders	Percentage
Yes	80%
No	20%

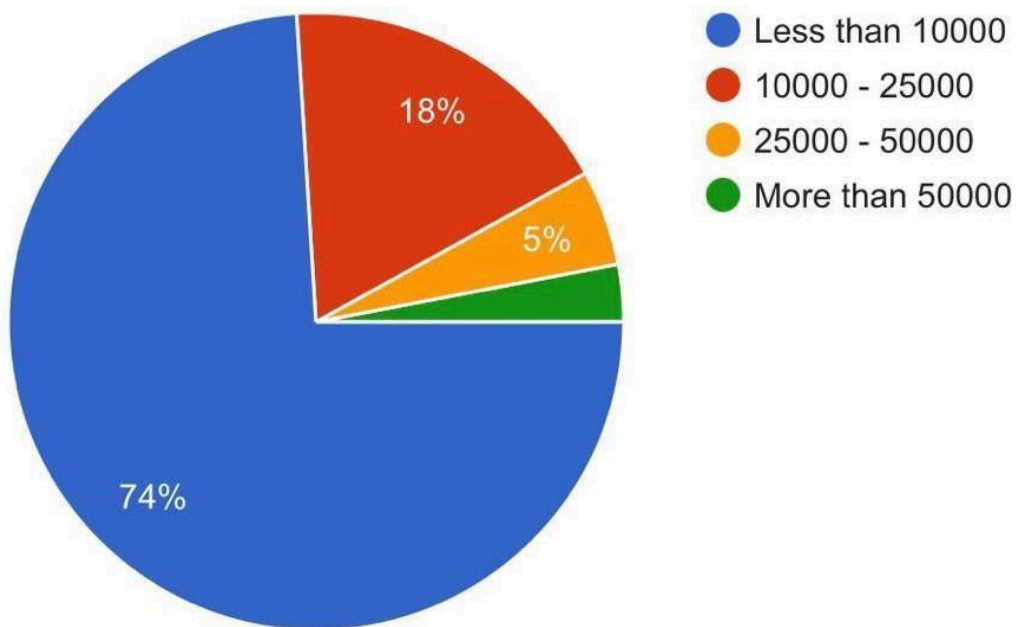


INTERPRETATION:

From above pie diagram, it can be observed that 80% of the sampled audience hold the policy of LIC while other 20% of sampled audiences have the policies of other insurance companies.

### 3. What is the monthly premium of your LIC plan?

Monthly premium	Percentage
Less than 10000	74%
10000-25000	18%
25000-50000	5%
More than 50000	3%

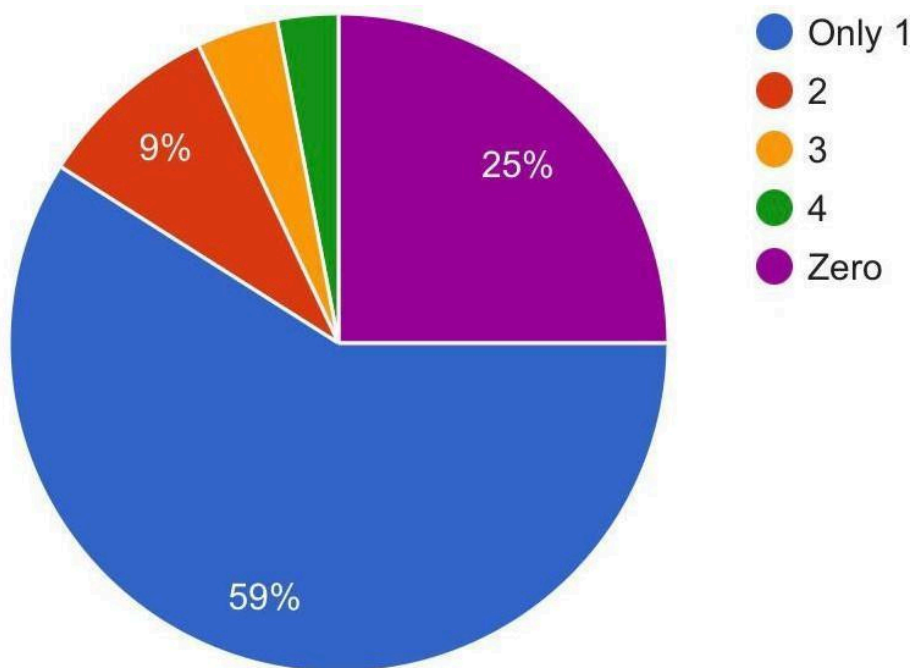


#### INTERPRETATION:

The monthly premium of 74% of the policy holder is below 10,000, 18% pays the monthly within 10,000 to 25,000, while 5% of the policy holders pay the premium within the range from 25,000 to 50,000 and 3% of the policy holder's pays month premium more than 50,000 .

4 How many life insurance policy do you own?

No of policy	Percentage
Only 1	59%
2	9%
3	4%
4	3%
Zero	25%

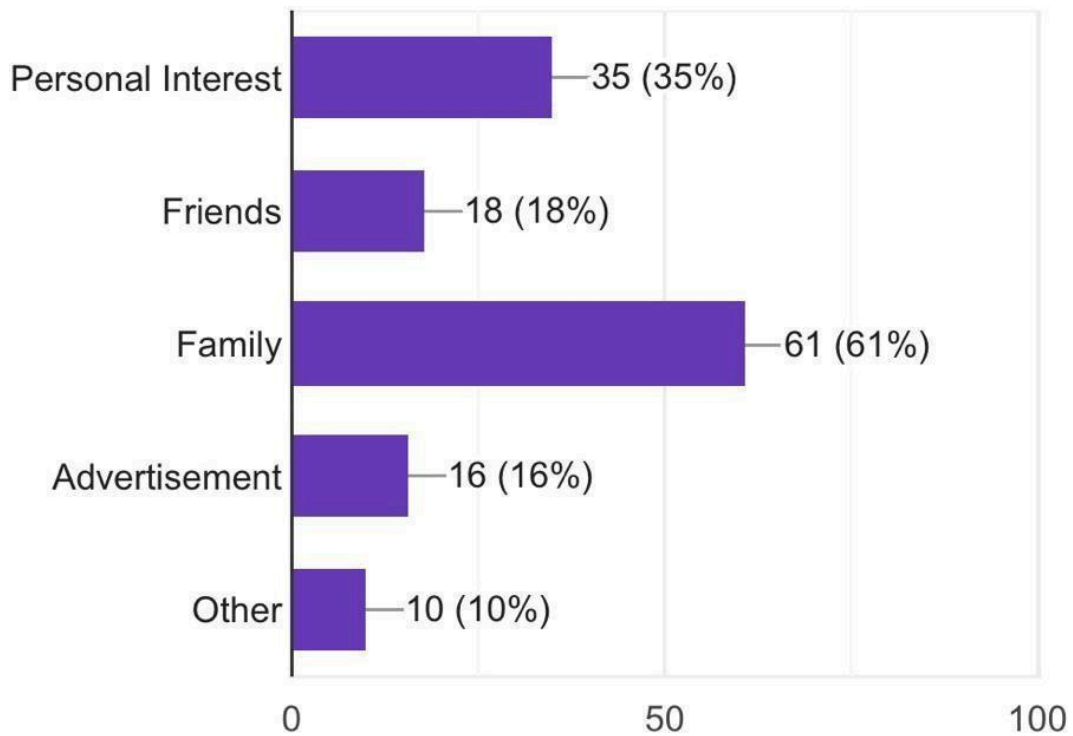


INTERPRETATION:

Above diagram shows us that, only 1 have 59% of the policy holders, 2 policies have 9% of the policy holders, 4% have 3 & 3% have 4 policies and 25% have zero no. of policy

5. What factors influenced you to buy Life Insurance Policy?

Influenced Factor	Percentage
Personal interest	35%
Friends	18%
Family	61%
Advertisement	16%
Other	10%



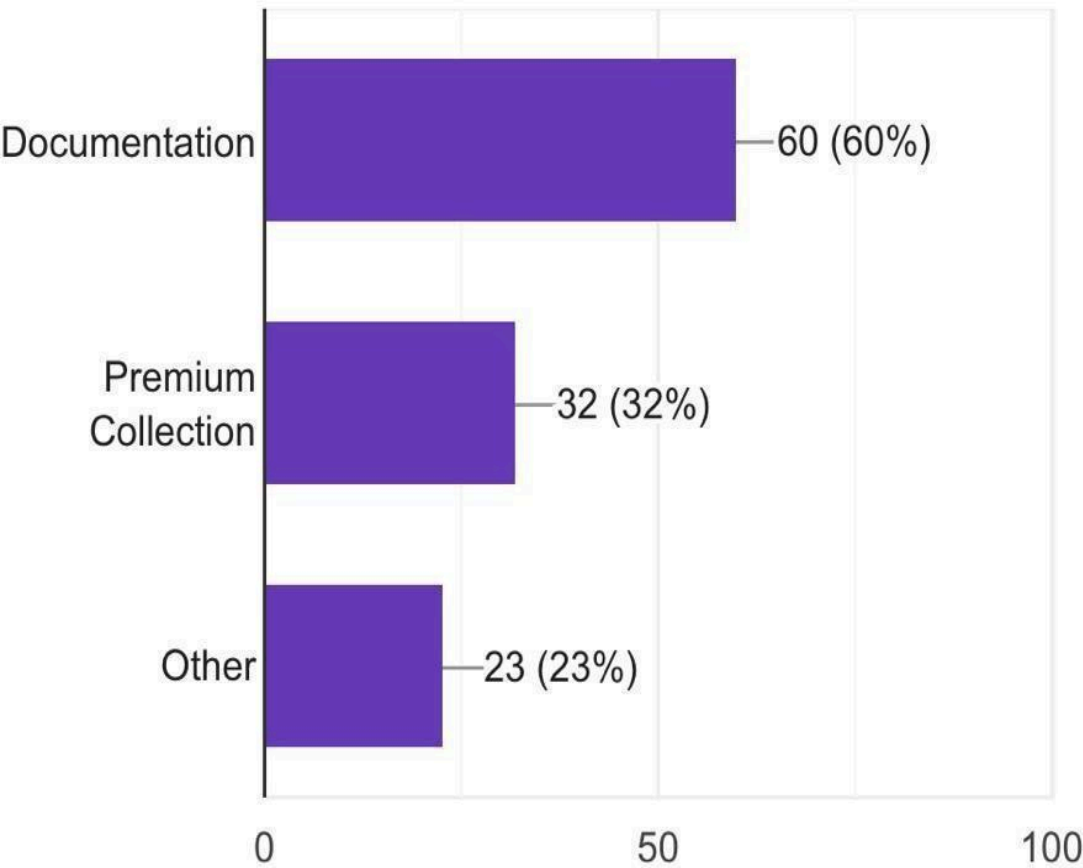
INTERPRETATION:

From the above diagram, it can be observed that 35% of the people have personal interest to buy insurance policy, 61% of the people had influenced by their family, 16% got influenced through advertisement, 18% were influenced by their friends and 10% were influenced by other factors.



6 If you have an agent, then what benefits does he/she provides you?

Benefits provided	Percentage
Documentation	60%
Premium Collection	32%
Other	23%

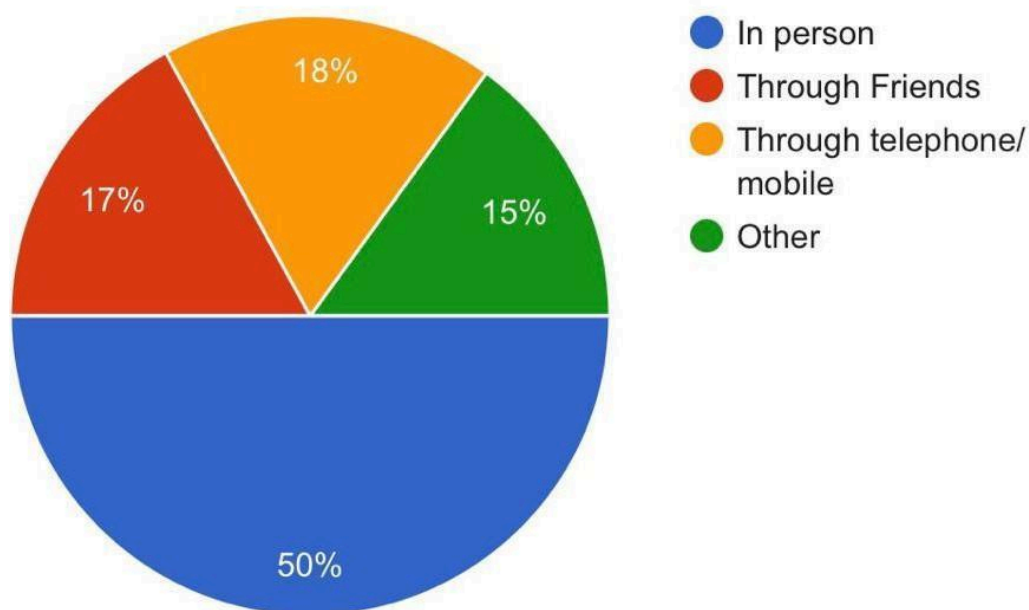


**INTERPRETATION:**

60% of the agents provide their customers with the facilities of documentation while 32% do provide their customers with the facility of premium collection and 23% do provided by others.

7. How did the agent approach you?

Mode of communication	Percentage
In Person	50%
Through friends	17%
Through telephone/mobile	18%
Other	15%

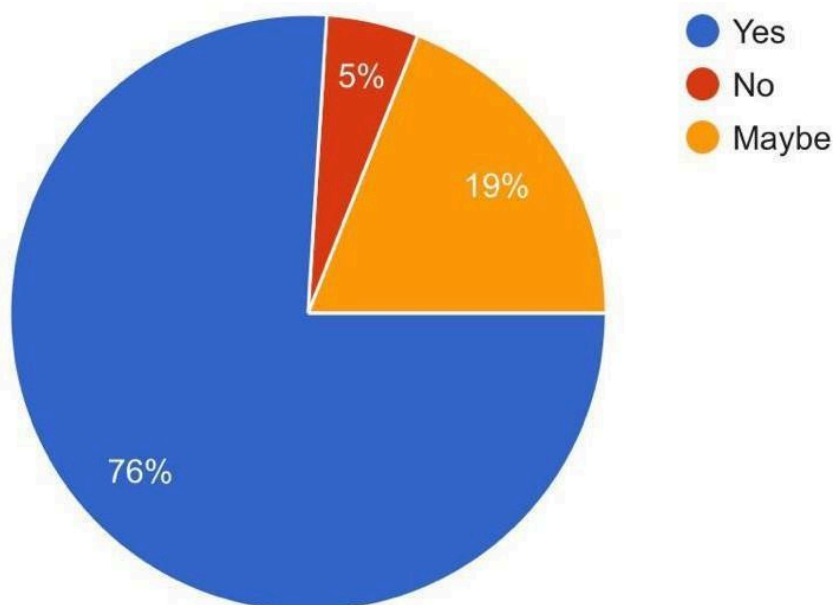


INTERPRETATION:

Above diagram provides with the information that LIC agents contact with their customers mostly in person that is 50% rather than through friends 17% or mobile 18% or any other is 15% mode of interaction.

8. Are you satisfied with the communicated policies and the actual policies?

Satisfaction level	Percentage
Yes	76%
No	5%
Maybe	19%

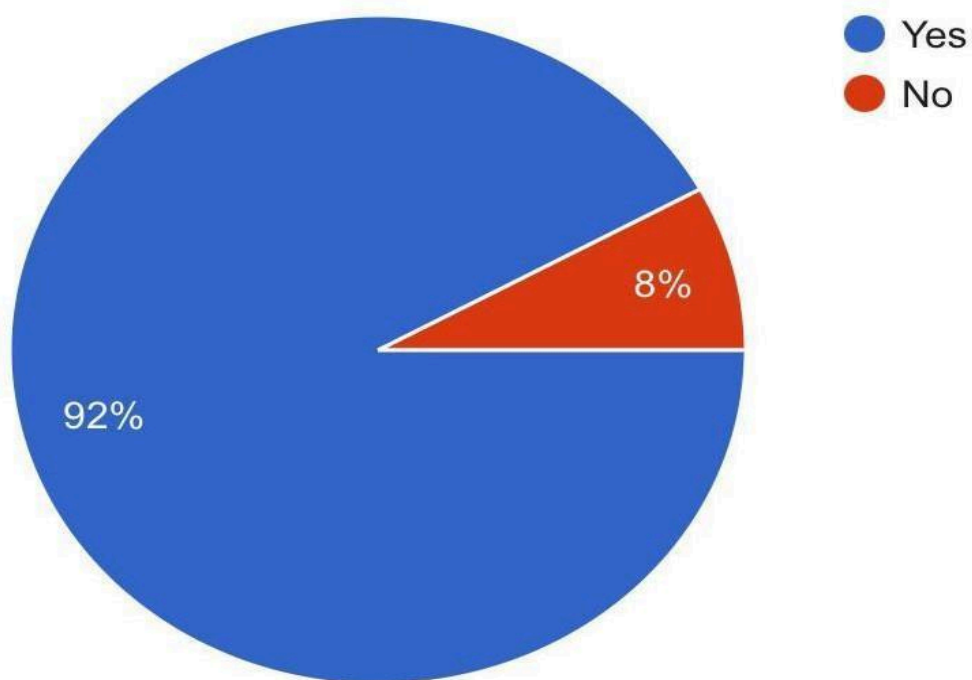


INTERPRETATION:

From the above diagram, it can be observed that 76% of customers are satisfied with the Communication policies and of 5% the actual policies while surrendering while other were not that satisfied by the Communication policies and other 19% are not sure about the actual policies as per their perception.

9. DoestherelationshipwithcustomersaregivengreatimportanceinLifeinsurance?

Importanceinlifeinsuranceto customer	Percentages
Yes	92%
No	8%

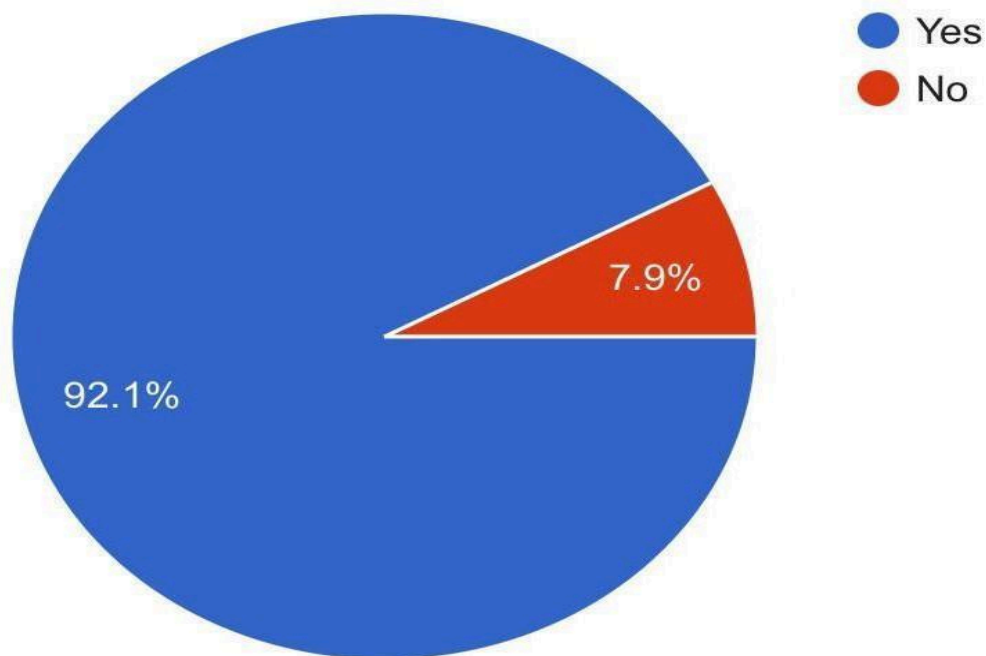


INTERPRETATION:

Fromtheabovediagram,itcanbeobservedthat92%ofcustomersweresatisfiedwiththeroleoftheagents with them while surrendering while other 8% were not that satisfied by the role of the agents as per their perception.

10. Does your life insurance company provide you information whenever there is a new scheme?

Information of new scheme	Percentage
Yes	95%
No	5%



**INTERPRETATION:**

From the above diagram, it can be observed that most of 92.1% of life insurance company provides you information whenever there is a new scheme and other 7.9% are not providing information whenever there is a new scheme.

## FINDINGS

- Majority of the people were aware about LIC but there are 5% of people who still don't know about it.  
This shows that LIC does have great brand awareness among the customers.
- From this study, we can say that majority of the population have the policy with LIC through, there are other companies providing better facilities with compare to it.
- From the sample audience's majority of the policies were the customer who pay the monthly premium which was less than 10,000. Which indicates that the agents are target oriented with quantitative rather than qualitative.
- Most of the LIC agents were the friends or family members of the customer.
- Mostly the agent's contacts with their customer in personal rather of contracting with them through telephone, friends or any other means.
- The customers were satisfied with role of the agents while surrendering but after that their satisfaction level was not as per their perception. Which shows that the agents are only target oriented than customer oriented.

## CONCLUSION

- Life insurance policies are the simplest policies available in the market but complex to understand by the customers which makes the customer to feel their wastage of money in investing any insurance available by the LIC in the market.
- CRM practices of LIC have seen a drastic change over the past few years to achieve successful CRM, a company should understand what is and why it is beneficial to customers in order to retain them for long time.
- Customers give priority only to satisfied their needs. The success rate of CRM depends upon the quality of CRM.
- From the paper it is concluded that although LIC has taken a large number of initiatives to satisfied their customers, yet there is a need to build a strong data base of customers.
- It is possible only if the LIC while conduct regular surveys and interact with the customers. Moreover , most of CRM services are at fingertips, sometimes, some customers are not comfortable with technology.
- Some assistant should be provided to assist them. LIC should introduced new way that makes the customer more delightful and help to attract new customer.

## RECOMMENDATIONS

- Life insurance awareness campaign are to be organized by LIC as the market leaders so that they can have better idea about the policy.
- Most vital objection raised by the policy holders was related to the NO-UPDATE knowledge about the policies which they should be provided by the agent. Hence, LIC agents should provide their customers with UPDATED knowledge of policy to their respective customers.
- Most of the policies which were undertaken by the policy holder were below 10,000 as the agent are oriented towards the target completion without the concern of providing the information regarding the policies to their customers which make it not so impactful.
- Most of the customers were engaged with the policies because of the reputation of the company rather than its marketing impact, advertisement or any other factors which it should improve too.



## WEBLIOGRAPHY

- <https://cleartax.in/s/life-insurance>
- <http://multimediamarketing.com/mkc/marketingcommunication>
- [http://www.unistudyguides.com/wiki/Topic\\_8\\_cations/](http://www.unistudyguides.com/wiki/Topic_8_cations/)
- <http://www.elzeno.com/category-post/benefits-of-imc/>
- <https://www.mbaknol.com/marketing-management/different-tools-of-integratedmarketing-communications-imc/>
- <https://smallbusiness.chron.com/steps-developingintegrated-marketing-communication-plan-56305.html>
- <https://www.licindia.in/Top-Links/about-us/History>
- <https://www.scribd.com/document/293543004/252033000-Blackbook-Project-on-Insurance>
- <https://www.studocu.com/in/document/bharati-vidyapeeth-university/bachelor-of-business-administration/blackbook-amey-22/39441856>

## **BIBLIOGRAPHY:**

- TheTimes OfIndia
- TheEconomicsTimes
- LICAnnual Report
- LICOf IndiaProductProfile Brochure