



Research Article

Awareness as a Mediator between Policy Benefits and Customer Satisfaction in Micro Health Insurance

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ABSTRACT

Micro Health Insurance (MHI) offers affordable health coverage to low-income populations. MHI typically covers hospitalization, outpatient services, and essential medications, enhancing healthcare accessibility. This study investigates how awareness mediates the relationship between policy benefits and customer satisfaction in MHI, providing insights to enhance satisfaction. The research employs a quantitative, cross-sectional survey design using Hayes' Model 4 to analyze direct and indirect effects. The sample consists of 250 MHI beneficiaries selected through convenience sampling. Data were gathered via a structured questionnaire measuring perceived benefits, awareness of policy terms, and satisfaction levels. Reliability was assessed using Cronbach's alpha, with all scales showing acceptable to excellent internal consistency ($\alpha > 0.70$).

Analysis supports that MHI policy benefits have a direct positive effect on customer satisfaction, confirmed by a significant direct effect coefficient of 0.2296 (SE = 0.0523, $p < 0.0001$). This indicates that perceived benefits enhance satisfaction levels. Analysis also suggests this relationship is mediated by awareness, supported by a significant indirect effect size of 0.5395 (BootSE = 0.0204, BootLLCI = 0.0063, BootULCI = 0.0732). Awareness mediates the impact of perceived benefits on satisfaction, highlighting its role in translating benefits into tangible satisfaction. The total effect of 0.7691 (SE = 0.0502, $p < 0.0001$) reinforces the positive impact of MHI policy benefits on satisfaction through awareness. Recommendations include increasing awareness through workshops, brochures, and digital platforms, simplifying policy terms for clarity, and improving customer service by training representatives and offering multiple communication channels. Streamlining claims processing by digitalizing and speeding up approvals is advised.

Introduction

Micro Health Insurance (MHI) has emerged as a pivotal financial tool designed to provide affordable health coverage to low-income populations, particularly in developing countries (Abel & Asmare, 2018). This form of insurance aims to reduce the financial burden of healthcare expenses on individuals and families who are otherwise unable to access traditional insurance schemes due to high costs or lack of awareness. MHI typically offers a range of benefits, including coverage for hospitalization, outpatient services, and essential

medications, making healthcare more accessible and affordable for economically disadvantaged groups.

Numerous studies have explored the satisfaction levels of MHI beneficiaries, indicating that customer satisfaction is a critical factor in the success and sustainability of MHI programs (Marziyeh et. al, 2019). For instance, research has shown that satisfied beneficiaries are more likely to renew their policies, recommend insurance to others, and adhere to healthcare protocols, which collectively enhance the overall effectiveness of MHI schemes (Iqbal et. al, 2017). Studies have also identified various determinants of satisfaction,

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including the perceived quality of care, ease of claims processing, and the comprehensiveness of coverage (Sarker et. al, 2018). However, there remains a gap in understanding the nuanced interplay between these factors and how they collectively influence customer satisfaction. Understanding the factors that affect satisfaction in MHI is of paramount importance for several reasons. Firstly, high satisfaction levels can lead to increased policy uptake and retention rates, which are essential for the financial viability of MHI programs (Hung et. al, 2013). Secondly, satisfied customers are more likely to trust and engage with healthcare services, leading to better health outcomes (Naidu, 2009). Thirdly, insights into satisfaction drivers can inform policy adjustments and improvements, ensuring that MHI schemes remain responsive to the needs and preferences of their target populations (Sarker et. al, 2018).

One critical yet often overlooked factor that can significantly influence the satisfaction of MHI beneficiaries is the level of awareness regarding the benefits and terms of the policy. Awareness encompasses the beneficiary's understanding of the scope of coverage, the process for making claims, and the specific health services included in the insurance package. When beneficiaries are well-informed about these aspects, they are more likely to utilize the benefits effectively, leading to higher levels of satisfaction. Conversely, a lack of awareness can result in unmet expectations, perceived inadequacies in coverage, and ultimately, dissatisfaction. This study aims to investigate the mediating role of awareness in the relationship between policy benefits and customer satisfaction in the context of MHI. By examining how awareness impacts the perceived value and effectiveness of MHI benefits, this research seeks to provide deeper insights into the mechanisms through which satisfaction can be enhanced. The findings will contribute to the existing body of knowledge on MHI and offer practical recommendations for policymakers and insurance providers to improve customer satisfaction and engagement.

Review of Literature

Customer satisfaction is paramount to the success of any organization. While companies implement various policies designed to benefit customers and enhance their satisfaction, the effectiveness of these policies hinges on customer awareness (Abbas et. al, 2018). Customers unaware of policy benefits may not experience their intended positive impact, potentially leading to an underestimation of the policy's true value. In the insurance sector, understanding the factors that influence customer satisfaction and loyalty is crucial for insurers to maintain a competitive edge and ensure long-term viability (Ruefenacht, 2018). One important aspect that has received increasing attention is the role of customer awareness in mediating the relationship between policy benefits and customer satisfaction.

Recent studies have highlighted the importance of customer awareness in the insurance industry. For

instance, a study in Uttar Pradesh, India found that low awareness of health insurance was a significant barrier to its adoption, suggesting that raising awareness could improve insurance uptake and satisfaction (Mishra, 2023). Furthermore, the literature suggests that the benefits offered by an insurance policy can have a significant impact on customer satisfaction. Customers who perceive the policy benefits to be valuable and tailored to their needs are more likely to be satisfied with their insurance provider (Hung, 2012). However, this relationship may be mediated by the level of customer awareness.

Customers who are more aware of the policy benefits are more likely to understand and appreciate the value they are receiving, leading to higher satisfaction. Conversely, customers with low awareness may not fully recognize the benefits of their policy, resulting in lower satisfaction even if the policy itself is objectively beneficial (Ruefenacht, 2018) (Mishra, 2023). To address this gap, this research paper aims to examine the role of customer awareness in mediating the effect of policy benefits on customer satisfaction in the micro health insurance market. By gaining a deeper understanding of these dynamics, insurers can develop more effective strategies to enhance customer satisfaction.

Research Objectives

1. To Investigate the Direct Relationship Between Policy Benefits and Customer Satisfaction in Micro Health Insurance (MHI).
2. To Examine the Mediating Role of Awareness in the Relationship Between Policy Benefits and Customer Satisfaction.
3. To Provide Practical Recommendations for Enhancing Customer Satisfaction Through Improved Awareness and Policy Benefits.

Research Methodology

Research Design

The research design for this study is a quantitative, cross-sectional survey aimed at understanding the mediating role of awareness in the relationship between policy benefits and customer satisfaction in Micro Health Insurance (MHI). The study utilizes Hayes' Model 4 to analyze both direct and indirect effects, allowing for a comprehensive examination of the hypothesized relationships.

Sample Design

The sample consists of 250 MHI beneficiaries selected through convenience sampling method. Data were collected using a structured questionnaire that measured perceived benefits of MHI policies, awareness of policy terms and conditions, and overall satisfaction levels. The questionnaire items were evaluated for reliability

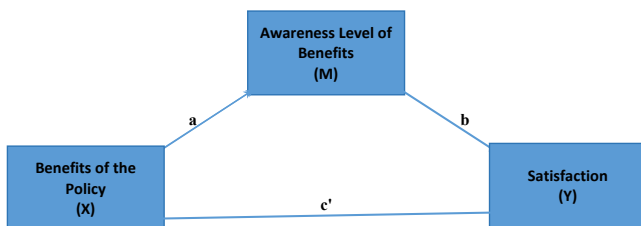
using Cronbach's alpha, with all scales showing acceptable to excellent internal consistency ($\alpha > 0.70$).

Hypothesis Development

This study aims to investigate the role of awareness in mediating the relationship between the benefits of Micro Health Insurance (MHI) policies and customer satisfaction. The central hypotheses of this study are twofold. Firstly, study hypothesize that the benefits of MHI policies have a direct positive effect on customer satisfaction. This direct path suggests that as the perceived benefits of the MHI policy increase, so does the level of customer satisfaction. Beneficiaries who perceive their MHI policy as beneficial are likely to be more satisfied with their insurance coverage due to the direct value they receive from the policy. Secondly, study propose that this relationship is mediated by the awareness level of policy benefits.

Study hypothesize that the benefits of MHI policies indirectly influence customer satisfaction through increased awareness of the policy terms and conditions. This indirect path suggests that when beneficiaries are more aware of the specifics of their policy, including coverage details and claims procedures, they are better able to utilize these benefits, which in turn enhances their satisfaction. Awareness acts as a crucial intermediary, translating the perceived benefits into tangible satisfaction by enabling beneficiaries to fully understand and access the benefits offered by their MHI policy. To test these hypotheses, Hayes' Model 4 is employed to quantify both the direct effect of MHI benefits on customer satisfaction and the indirect effect through awareness. This involves estimating the direct path (c'), where benefits directly affect satisfaction, and the indirect path (ab), where the effect of benefits on satisfaction is mediated by awareness. The mediation effect (ab) will be assessed by examining the product of the effect of benefits on awareness (Path a) and the effect of awareness on satisfaction (Path b). Statistical significance of this mediation effect is tested using bootstrap confidence intervals, which provide a robust method for determining the reliability of the indirect effect.

Fig 1: Graphical representation of Hayes' Model 4 for Hypothesis development



Source: Author's Compilation

X= Exogenous variable (Independent Variable)

Y= Endogenous variable (Dependent Variable)

M= Mediating Variable

Hypothesis 1 (Direct Effect): The benefits of MHI policies (X) have a direct positive effect on customer satisfaction (Y).

Hypothesis 2 (Indirect Effect through Mediator): The benefits of MHI policies (X) positively influence customer satisfaction (Y) through the mediating effect of awareness of the policy (M).

Through this approach, the study seeks to provide a comprehensive understanding of how MHI policy benefits influence customer satisfaction, both directly and indirectly via awareness. These insights will offer valuable implications for policymakers and insurance providers, suggesting that enhancing beneficiaries' awareness of policy benefits can significantly boost satisfaction levels.

Data Analysis

Reliability Analysis: Reliability analysis was conducted to assess the internal consistency of the variables using Cronbach's alpha method. Cronbach's alpha is a measure of the reliability of a scale, indicating how well the items in a set are positively correlated to one another. An alpha value above 0.70 is generally considered acceptable, indicating good internal consistency. The high Cronbach's Alpha values indicate excellent internal consistency for "Benefits provided by the Company" (0.927) and "Satisfaction Level" (0.910), and good consistency for "Awareness Level" (0.819). The table below summarizes the results of the reliability analysis for each variable.

Table 1: Reliability Analysis

Reliability Statistics		
Variables	Cronbach's Alpha	N of Items
Benefits Provided by the Company	0.927	10
Satisfaction Level	0.910	12
Awareness Level	0.819	4

Source: Author's Compilation

Descriptive Analysis: Descriptive statistics provide a comprehensive overview of the dataset, highlighting central trends and the spread of responses across different aspects of the study such as benefits of the policy, awareness levels, and satisfaction levels. This helps in understanding the general perception and satisfaction level of the beneficiaries regarding the insurance policy.

Table 2: Descriptive Analysis of benefits provided by the insurance provider

Description of benefits provided by the insurance provider	Mean	Std. Deviation	N
Comprehensiveness of the coverage provided by the policy	4.06	1.137	250
Extent to which the policy covers outpatient services	3.86	0.972	250
Coverage for inpatient hospitalization services	3.86	0.992	250
Coverage for maternity and newborn care	3.64	1.026	250
Policy's coverage for prescription drugs	3.72	0.978	250
Policy's coverage for emergency medical services	3.63	0.994	250
Coverage for preventive and wellness services	3.70	1.046	250
Policy's coverage for chronic disease management	3.65	0.942	250
Coverage for vision care	3.79	1.002	250
Policy's coverage for alternative medicine	3.87	0.975	250

Source: Author's Compilation

Inferences: The data indicates that beneficiaries generally perceive the benefits provided by the insurance policy positively, with mean scores ranging from 3.63 to 4.06. The highest satisfaction is with the comprehensiveness of coverage (mean = 4.06), while the lowest is with emergency medical services (mean = 3.63). Standard deviations indicate moderate variability in perceptions.

Table 3: Descriptive Analysis of Awareness Level of Policy Terms & Conditions

Description of Awareness Level of Policy Terms & Conditions	Mean	Std. Deviation	N
Understanding of basic terms & conditions of your health insurance policy	3.87	0.932	250
Awareness of what medical services are covered under your policy	3.76	0.576	250
Knowledge of the procedure for filing a claim with your insurance provider	3.32	0.877	250
Awareness of the preventive services covered by your insurance plan	3.45	0.987	250

Source: Author's Compilation

Inferences: The data on awareness levels of policy terms and conditions shows that beneficiaries are most aware of the basic terms and conditions (mean = 3.87, SD = 0.932) and the medical services covered (mean = 3.76, SD = 0.576). Awareness of the claim procedure (mean = 3.32, SD = 0.877) and preventive services (mean = 3.45, SD = 0.987) is lower. The variability in responses is moderate, with standard deviations ranging from 0.576 to 0.987.

Table 4: Descriptive Analysis of Satisfaction Level

Description of the Satisfaction Level of Beneficiaries	Mean	Std. Deviation	N
The ease of understanding the policy terms and conditions	3.89	1.018	250
The enrollment process	3.74	0.933	250
The premium affordability	3.65	1.055	250
The claim submission process	3.47	1.148	250
The claim approval speed	3.85	0.960	250
The reimbursement process	3.72	1.054	250
The customer service provided by the insurance company	3.70	1.092	250
The availability of network hospitals/clinics	3.85	1.075	250
The quality of healthcare services received under the policy	3.81	1.047	250
The transparency of the policy regarding coverage and exclusions	3.54	1.206	250
The support provided for emergency situations	3.76	1.151	250
The overall value for money provided by the policy	3.95	1.141	250

Source: Author's Compilation

Inferences: The satisfaction levels of beneficiaries with various aspects of their health insurance policy are generally positive, with mean scores ranging from 3.47 to 3.95. The highest satisfaction is with the overall value for money (mean = 3.95, SD = 1.141), while the lowest is with the claim submission process (mean = 3.47, SD = 1.148). Other areas of notable satisfaction include the ease of understanding policy terms (mean = 3.89, SD = 1.018) and

the quality of healthcare services received (mean = 3.81, SD = 1.047). The variability in responses is moderate to high, indicating diverse experiences among beneficiaries.

Model: 4

Y: Satisfaction level of beneficiaries

X: Benefits of the health insurance policies

M: Awareness level of policy terms and conditions

Table 5: Direct and Indirect effects of variables using Model 4 of Hayes' Process

Total effect of X on Y					
Effect	se	t	p	LLCI	ULCI
.7691	.0502	11.3449	.0000	.4703	.6680
Direct effect of X on Y					
Effect	se	t	p	LLCI	ULCI
.2296	.0523	10.3125	.0000	.4365	.6425
Indirect effect of X on Y via Awareness					
Effect	BootSE	BootLLCI	BootULCI		
.5395	.0204	.0063	.0732		

Source: Author's Compilation

Inferences: Based on the results from Model 4 of Hayes' PROCESS Procedure, the analysis explores the relationships among Benefits of health insurance policies, Awareness level of policy terms, and Satisfaction level of beneficiaries. The total effect analysis shows that benefits have a substantial positive impact on satisfaction, with a coefficient of 0.7691 SE = 0.0502, $p < 0.0001$. This suggests that for every unit increase in perceived benefits of health insurance policies, satisfaction increases by approximately 0.7691 units. The direct effect of benefits on satisfaction, however, is notably lower at 0.2296 (SE = 0.0523, $p < 0.0001$). This indicates that while the direct relationship between perceived benefits and satisfaction is significant, a considerable portion of the total effect is explained through indirect pathways, particularly via awareness. The indirect effect analysis reveals a substantial indirect effect of benefits on satisfaction through awareness, with an effect size of 0.5395 (BootSE = 0.0204, BootLLCI = 0.0063, BootULCI = 0.0732). This suggests that awareness of policy terms and conditions mediates a significant portion of the relationship between perceived benefits and satisfaction among beneficiaries.

Findings

The data analysis supports both hypothesis proposed in the study. Hypothesis 1, which posits that the benefits of Micro Health Insurance (MHI) policies have a direct positive effect on customer satisfaction, is confirmed by the significant direct effect coefficient of 0.2296 (SE = 0.0523, $p < 0.0001$). This indicates that perceived benefits directly enhance satisfaction levels. Hypothesis 2, suggesting that this relationship is mediated by the awareness level of policy terms and conditions, is also supported by the significant indirect effect size of 0.5395 (BootSE = 0.0204, BootLLCI = 0.0063, BootULCI =

0.0732). This demonstrates that awareness substantially mediates the impact of perceived benefits on satisfaction, highlighting its critical role in translating benefits into tangible satisfaction for beneficiaries. The total effect of 0.7691 (SE = 0.0502, $p < 0.0001$) further reinforces the overall positive impact of MHI policy benefits on customer satisfaction, both directly and indirectly through awareness.

Suggestions

- **Increase Awareness and Education Campaigns:** Develop and implement comprehensive awareness campaigns to educate beneficiaries about the specific terms, conditions, and benefits of their MHI policies. This can be achieved through workshops, informational brochures, and digital platforms. Increased awareness will help beneficiaries better understand and utilize their insurance coverage, leading to higher satisfaction levels.
- **Simplify Policy Terms and Conditions:** Simplify the language used in policy documents and ensure that all terms and conditions are clearly explained. This can include using visual aids, FAQs, and step-by-step guides. Making policy details more accessible and easier to understand will reduce confusion and enhance customer satisfactions.
- **Improve Customer Service and Support:** Strengthen customer service channels to provide timely and accurate information to beneficiaries. This includes training customer service representatives to handle inquiries effectively and offering multiple communication channels such as phone, email, and live chat. Efficient customer support can significantly improve the overall experience and satisfaction of beneficiaries.
- **Streamline Claims Processing:** Enhance the claims processing system to make it more user-friendly and efficient. This can involve digitalizing the claims submission process, reducing the paperwork required, and ensuring quicker claim approvals and reimbursements. A hassle-free claims process will increase beneficiaries' trust and satisfaction with the MHI provider.
- **Regular Feedback and Continuous Improvement:** Establish a system for regularly collecting feedback from beneficiaries regarding their experiences and satisfaction with the MHI policy. Use this feedback to identify areas for improvement and to make necessary adjustments to the policy and services. Continuous improvement based on beneficiary feedback will help maintain high satisfaction levels and adapt to changing needs.

Conclusion

In summary, while the direct impact of perceived benefits on satisfaction remains significant, the indirect pathway

through awareness of policy terms also plays a crucial role in enhancing satisfaction levels. Policymakers and insurance providers should therefore focus not only on improving the perceived benefits of health insurance policies but also on increasing awareness among beneficiaries to maximize satisfaction effectively. These findings provide valuable insights for optimizing satisfaction levels in health insurance programs.

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