

Comparative Study Of Life Insurance Plans Of Leading Pvt Insurance Companies At Max Life Insurance Pvt Ltd

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ABSTRACT

The insurance sector in India has witnessed rapid growth, with numerous companies competing to offer the best financial security and investment solutions. This study aims to conduct a comparative analysis of **Max Life Insurance** and **HDFC Life Insurance**, two of India's leading private life insurance providers. The research evaluates key aspects such as financial performance, product offerings, claim settlement ratios, customer satisfaction, and market share. By examining data from industry reports, company disclosures, and customer feedback, this study highlights the strengths and weaknesses of both companies. The findings provide insights into their policy structures, premium pricing, benefits, and customer service efficiency. The study also explores regulatory compliance and digital innovation in insurance services. The analysis will help policyholders, investors, and stakeholders make informed decisions based on a comparative assessment of these two insurers. The study concludes by identifying key differentiating factors and suggesting areas for improvement to enhance customer experience and market competitiveness.

1.1 INTRODUCTION

The life insurance sector plays a crucial role in financial planning by providing security and stability to individuals and families. With the increasing awareness of financial protection and investment opportunities, the Indian insurance industry has experienced significant growth. Among the numerous insurance providers in India, **Max Life Insurance** and **HDFC Life Insurance** have emerged as leading players in the private sector. This study aims to conduct a **comparative analysis** of these two companies to assess their performance, product offerings, and overall market standing.

Max Life Insurance and HDFC Life Insurance have built a strong presence in the industry through their diverse range of life insurance policies, customer-centric approaches, and financial stability. However, there are key differences in their **policy structures, claim settlement ratios, premium pricing, customer service efficiency, and digital innovations**, which impact customer preferences and market competition.

This study seeks to analyze these factors in depth, using secondary data from company reports, industry statistics, and customer feedback. By comparing **financial performance**, **policy benefits**, **customer satisfaction**, **and service quality**, the research will provide valuable insights for policyholders, investors, and stakeholders.

1.2 NEED FOR THE STUDY

The goal of the study was to determine the proportional share of MAX LIFE INSURANCE and HDFC insurance in India. It is useful for persons who work in the insurance industry and research associates who work in the Indian insurance sector. The deeper the company's understanding of consumer's needs and perception, the earlier the product is introduced ahead of competition, the greater the expected contribution margin. Hence the study is very important. Consumer markets and



consumer buying behavior can be understood before sound product and marketing plans are developed. This study will help companies to customize the service and product, according to the consumer's need. This study will also help the companies to understand the experience and expectations of the existing customers. Apart from creating, manufacturing and distribution capabilities for life insurance products, an in-depth study of the consumers, their preferences and demand for their product is very necessary for setting up an efficient marketing network.

1.3 OBJECTIVES OF THE STUDY

- 1) To compare the financial performance of Max Life Insurance and HDFC Life Insurance.
- 2) To evaluate the product offerings and policy structures of both companies.
- 3) To analyze the claim settlement ratio and customer satisfaction levels.
- 4) To assess the market share and competitive positioning of both insurers.
- 5) To identify the strengths, weaknesses, and areas for improvement for each company.

1.4 HYPOTHESIS

Null Hypothesis (H0): There is no significant relationship between type of policy and the premium amount paid.

Alternate Hypothesis (H1): There is a significant relationship between type of policy and the premium amount paid.

1.5 SCOPE OF THE STUDY

This study focuses on the **comparative analysis of Max Life Insurance and HDFC Life Insurance**, two leading private life insurance providers in India. The scope of the study includes an evaluation of key parameters that influence customer choices, financial performance, and market positioning of both companies. The study is limited to private sector insurance providers and excludes public sector entities such as LIC. The analysis considers both traditional and modern life insurance products such as term plans, endowment plans, and ULIPs, targeting middle- and upper-income individual policyholders. The findings of this study will help consumers make informed decisions while choosing among competing life insurance plans. It will also assist insurance companies in understanding consumer preferences, product gaps, and areas for improvement in customer service and product innovation.

1.6 METHODOLOGY

The research methodology outlines the approach used to conduct a **comparative analysis of Max Life Insurance and HDFC Life Insurance**. This study employs both **quantitative and qualitative research methods** to assess key aspects such as financial performance, product offerings, claim settlement ratio, and customer satisfaction.

Research Design:

This study follows a **descriptive and analytical research design** to compare the two insurance companies based on relevant financial and consumer-related parameters.

Data Collection Methods:

- 1. Primary Data Collection:
 - A structured questionnaire was designed to collect data from 100 respondents.
 - The respondents include **policyholders, financial advisors, and insurance agents** who have experience with Max Life Insurance and HDFC Life Insurance.

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- The survey focused on factors such as customer satisfaction, service experience, claim settlement process, and policy benefits.
- **Sampling Technique:** Convenience sampling was used to select respondents based on availability and willingness to participate.
- 2. Secondary Data Collection:
 - Information was gathered from **company websites**, annual reports, IRDAI (Insurance Regulatory and Development Authority of India) publications, financial statements, and industry reports.
 - Data on claim settlement ratios, market share, financial performance, and product offerings were extracted from these sources.

Research Instrument:

- A structured questionnaire with both closed-ended and open-ended questions was used to collect primary data.
- The questionnaire included Likert scale-based questions to measure customer satisfaction and perception.

Sample Size and Sampling Method:

- Sampling Method: Non-probability convenience sampling
- **Target Respondents:** Existing policyholders of Max Life Insurance and HDFC Life Insurance, financial advisors, and industry experts.

3.5. H:YPOTHESIS / ANALYTICAL TOOLS

ANOVA TEST

It helps you find out whether the differences between groups of data are statistically significant. CHI-SQUARE TEST

It is a test that measures how a model compares to actual observed data.

WEIGHTED AVAERAGE

A weighted average or mean is one where each item being averaged is multiplied by a number (weight) based on the item's relative importance, rather than treating each item equally. The weights or weightings are the equivalent of having that many similar items with the same value involved in the average. The result is summed and the total is divided by the sum of the weights.

1.7 LIMITATIONS OF THE STUDY

The sample size of 100 respondents may not fully represent the opinions of all policyholders in India.

- 1) The study relies on secondary data, which may be subject to company bias or limited public availability.
- 2) The research is limited to Max Life Insurance and HDFC Life Insurance, excluding other competitors in the insurance industry.



3) Limited Scope of Companies

The study focuses only on a select group of leading private life insurance companies and does not cover the entire spectrum of public and smaller private insurers. This may limit the generalizability of the findings.

4) Geographical Constraints

Data and analysis may be primarily based on responses and data from a specific region or branch (e.g., Max Life Insurance in a particular city), which might not represent national trends accurately.

5) Availability and Reliability of Data

The study relies on secondary data sources such as company reports, websites, and IRDAI publications. Any inconsistency, delay, or lack of transparency in reporting by the companies may affect the accuracy of comparison.

DATA ANALYSIS AND INTERPRETATION

TABLE NO.1: GENDER WISE CALCULATIONS OF THE RESPONDENTS

Gender	Frequency	Percentage
Female	67	45%
Male	83	55%
Total	150	100%

CHART NO.1: GENDER WISE CALCULATIONS OF THE RESPONDENTS



INTERPRETATION:

From the above table, it is interpreted that 45% of the respondents are female and 55% of the

respondents are male

INFERENCE:

Majority (**55%**) of the respondents belongs to male category.

TABLE NO.2: AGE WISE CALCULATIONS OF THE RESPONDENTS

Age	Frequency	Percentage
Lessthan25	35	23%
26-35	75	50%
36-45	28	19%



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46-Above	12	8%
Total	150	100%

CHART NO.2: AGE WISE CALCULATIONS OF THE RESPONDENTS



INTERPRETATION:

From the above table it is interpreted that 23% of the respondents belongs to less than 25, 50% of the respondents belongs to 26-35 category, 19% of the respondents belongs to 36-45 category, and 8% of the respondents belongs to 46 and above category.

INFERENCE:

Majority (50%) of the respondents belongs to 26-35 category.



TABLE NO.3: EDUCATIONAL QUALIFICATION OF THE RESPONDENTS

Educational Qualification	Frequency	Percentage
High school	2	1%
Others	5	3%
PG	83	55%
Professional	7	6%
UG	53	35%
Total	150	100%

CHART NO.3: EDUCATIONAL QUALIFICATION OF THE RESPONDENTS



INTERPRETATION:

From the above table it is interpreted that 1% of the respondents belongs to high school category, 3% of the respondents belongs to others category, 55% of the respondents belongs to PG category, 6% of the respondents belongs to professional category, and 35% of the respondents belongs to UG category. INFERENCE:

Majority (55%) of the respondents belongs to PG category.



5.1 FINDINGS

- The survey results show that 55% of respondents are male and 50% fall in the 26–35 age group, indicating that young
 adult males are more engaged with life insurance. A majority (55%) hold postgraduate qualifications, suggesting
 higher awareness of financial planning. 44% work in the private sector, showing strong interest from private
 employees in insurance products.
- In terms of work experience, 51% have 1–3 years, and 45% earn between ₹3–5 lakhs annually, reflecting earlycareer professionals with moderate income. 45% belong to two-member families, possibly indicating fewer dependents. Interestingly, 55% are from semi-urban areas, highlighting growing insurance interest beyond urban centers.
- 3. The weight age for different level of satisfaction have been assigned i.e., 5 for strongly agree, 4 for agree, 3 for neutral, 2 for disagree and 1 for strongly disagree. Based on the weight age, the mean value for each aspect was calculated. The computed weighted average mean values have been ranked from 1 to 6. The highest mean value for "officials providing regular information about the products" is ranked as one. Since high weight age is given for highly satisfied.
- 4. Since the computed value (**0.047**) is less than level of significance (0.05), the null hypothesis is rejected and alternate hypothesis is accepted. Therefore, there is a relationship between type of policy and the premium amount paid.
- 5. Since the table value is greater than the significant value (0.05) so we accept null hypothesis and reject alternate hypothesis. Therefore, there is no difference between the reason for choosing and opinion about their choice of life insurance company.

5.2 SUGGESTIONS

Life Insurance has to take initiatives to convert satisfied customers into highly satisfied customers. These initiatives shall be on:

- 1. Usage of modern technology for better customer service. All the operating office must be installed with touch screen facility for accessing information instantly while entering the contract number or fill the personal details.
- 2. Improving the physical appearance of the policy document. Instead of giving loose leaf's, must be provide all the documents in a booklet form.
- 3. Improving regular service activities like remainder of premium due, premium collection, change of address, issue of new policy documents. In addition to that appoint a person for collecting renewals in the convenient time of the policyholders.
- 4. Improving the behavior of employees towards the customer centric approach for providing better



service. It may starts from the procurement of the policies to settlement of those insurance policies.

- 5. The company can provide self-service facilities like customer portal which is already been implemented, in the form of customer life line option. But it must be informed to the policyholders properly. Customer call centers number and toll-free numbers must be enabled.
- 6. The company must provide the necessary information and guidelines on future service requirements like revival, surrender, loans and change of nomination, assignment, foreclosure and claim forms.
- 7. The company can intimate the policyholders about the launch of new products through sending SMS, business letter and providing information to their mail-id.

5.3 CONCLUSION

Empowering everyone live their dreams" is the corporate vision of life insurance. Knowledge is complex. It is responsibility of insurance companies to develop expertise and to provide customer with insurance knowledge.

Operating office should be in a position to advice the prospect as to what is the best choice for him in the given circumstances. Mis-selling is very common in insurance industry. This occurs when, perhaps, to earn a much higher commission rate. Agents do not assess the needs of the customer properly which recommending products.

Sometimes agents or advisor misrepresent facts by promising unrealistic returns to customers, or even provide incorrect information on product features.

As a result, the customer is unhappy and saddled with a product that does not meet either his immediate or future needs. Rebating has been an unfortunate practice in every variety of financial products in India. From the above findings clearly states that professional category respondents have high perceptional level with regards to the financial credential of the company, most of the respondents have high perceptional level in servicing aspect of timely reminder of dues, most of the respondents have high satisfaction level of claim admissibility and claim settlement and salaried class responsibility mostly satisfied for taking insurance as a tax exemption tool.

This research study further provide better scope for doing research study in the areas of perceived service quality in life insurance industry, innovative products based on perception of the clients.

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