

GOVERNMENT OF INDIA
MINISTRY OF FINANCE
DEPARTMENT OF FINANCIAL SERVICES

RAJYA SABHA
UNSARRED QUESTION NO. 2313

ANSWERED ON - 16.03.2021

Data on Mental Health Insurance

2313 Dr. Narendra Jadhav:

Will the Minister of Finance be pleased to state:

- (a) whether the Insurance Regulatory and Development Authority (IRDAI) of India has received revised health insurance policies from private insurance companies incorporating mental health coverage;
- (b) if so, the details of the number and names thereof;
- (c) if not, the reasons therefor;
- (d) whether IRDAI mandates the collection of data on applications for health insurance, rejections and reasons for rejections;
- (e) if so, the details thereof including the number of applications for private health insurance received, rejected and the reasons for rejection since 2018; and
- (f) if not, the reasons therefor?

ANSWER

THE MINISTER OF STATE IN THE MINISTRY OF FINANCE
(SHRI ANURAG SINGH THAKUR)

(a) to (c): Insurance Regulatory and Development Authority of India (IRDAI) has informed that pursuant to the enactment of Mental Health Care Act, 2017 (MHC Act, 2017), they have issued a circular ref. IRDAI/HLT/MISC/CIR/128/08/2018 dated 16th August, 2018 mandating all Insurers to comply with the provisions of Mental Health Care Act, 2017 (MHC Act, 2017). IRDAI has further informed that all existing health insurance products as well as the new products filed by insurers, including private insurers provide mental health coverage. As informed by IRDAI, currently, there are 386 health products available through 27 private insurers which also provide mental health coverage.

(d) to (f): IRDAI has informed that they have not mandated collection of data on applications for health insurance, rejections and reasons for rejections. However, as per regulation 8.6 of IRDAI (Protection of Policyholders' Interests) Regulations, 2017, the Insurers need to communicate the decision on the proposal in writing to the proposer within a reasonable period but not exceeding 15 days from the date of receipt of proposal or any requirements called for by the insurer.

Further, evaluation of risk of persons to be insured at the point of giving a health insurance policy is done as per the underwriting policy of the concerned Insurer and lies in the domain of Insurers.
