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A Comprehensive Review Of Sustainable Marketing In Online Health Insurance: Key Drivers And Barriers To Consumer Adoption

Soumyodeep Banerjee^{1*}, Dr. Smruti Patre²

Research Scholar, Symbiosis Institute of Business Management, Nagpur, City – Nagpur, Email address – peedoymuos@gmail.com, ORCID ID - 0009-0007-1519-357X
 Associate Professor, Symbiosis Institute of Business Management, Nagpur, City - Nagpur Email address - smruti.patre@sibmnagpur.edu.in, ORCID ID - 0000-0002-3792-2856

Abstract

Introduction

This paper seeks to analyze the element of preference of health insurance, with the intent of understanding consumer decision analysis in relation to theoretical frameworks. Through overseer of nuances using the frameworks, it seeks to identify important details that should inform policy and practice.

Objective

It pertains to stakeholders' perceptions of insurance benefits and costs, biases in the selection process, policies that may impact individual and social contexts, consumer choice, use of IT, beliefs, and overall attitudes towards health insurance.

Methodology

The research uses a literature review approach from 2000 to 2023. Theories, including HBM, CVT, TAM, TPB, and TRA to propose a robust methodology for analyzing the perception and behavior towards the health insurance.

Outcome

This study employed theories to comprehensively analyze consumer decision-making in health insurance. Objectives were effectively addressed, revealing insights on threat perception, self-bias, values, technology acceptance, beliefs' impact, and attitudes towards insurance, offering guidance for policymakers and providers.

Keywords: Health Belief Model, Consumer Value Theory, Technology Acceptance Model, Theory of Planned Behavior, Theory of Reasoned Action, Consumer Decision-Making, Health Insurance Preferences

Introduction

The contemporary formations in the area of medicine are still marked with the fact there is guaranteed health insurance as a part of the subsidiary of contemporary formations in the sphere of medicine, and it affects the financial risk management and the provision of the necessary medical services. Nevertheless, many studies still yield that the health insurance decision making is markedly complex and takes into consideration with other things that are individual requirements, socially demographic factors and psychological factors as well. Taking advantage of its systematic development, the method applies to capture the fourth-order factors (discrete factors that entail many aspects of choice in selecting health insurance). Having adopted some of the theoretical frameworks, this piece of the research agenda aims to establish factors determining the choice of health insurance, considering online consumer buying behavior and getting a digital trust in taking a purchasing decision.

This is why it becomes important to have an idea on the behavior of consumers, as far as the 'green consumerism' and 'sustainable business' is concerned, within the health insurance sector. First it is important for the formulation of the right kind of policies for the right kind of insurance that will result in the greeting of insurance by all segments. Secondly it also aids the insurer acquiring the right perception of "sustainable marketing innovation" and the right language in media that would attract more clients. Similarly, a social view on the same may appear to have much more profound insight into consumers preferences and hence make the right decisions about the consumers socially and economically at the same time.

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innovation" and the right language in media that would attract more clients. Similarly, a social view on the same may appear to have much more profound insight into consumers preferences and hence make the right decisions about the consumers socially and economically at the same time.

The theories that provide support for this current study to assist consumers to make decisions concerning the purchase of their health insurance products based on sustainable business practices and in the case of a financial transaction aspects on digital trust form an underpinning to this current study. The theories for which the paper has been discussed are as below.

Health Belief Model (HBM), Consumer Value Theory (CVT), Technology Acceptance Model (TAM), Theory of Planned Behavior (TPB), Theory of Reasoned Action (TRA)

This study demonstrates the analysis of consumer choices regarding health insurance decisions by examining these decisions based on several theoretical frameworks improves the understanding of the consumer decision making process but also provides valuable insights to the groups seeking to distribute health insurance services. Therefore, the purpose of this study is to examine the economic, psychological, and sociological approaches to understand the process through which consumers make decision regarding health insurance policies with the aim of informing the development of more adequate and relevant policy together with the enhancement of the consumer or health insurance products in the market.

Objective of the Study

To check Health Insurance Preferences in Consumer Decision Making through Multiple Theoretical Perspectives the following objectives have been developed.

Objective 1: This would help in understanding the degree of perceived threat for various health problems, and the magnitude of the consequence in terms of the influence on the decision to purchase a health insurance product. Moreover, evaluate an opinion formation concerning the willingness of people to get enrolled to health insurance by considering perceived advantages like extended coverage for medical costs and perceived constraints like cost and comprehensiveness.

Objective 2: Discover how self-bias effects consumer behavior in a choice selection of health insurance. In particular, consider what extent personal bias of people, which is based on the perceived dependency of favorable outcomes on their actions, and the opposite move, attributing negative outcomes to external circumstances, affects the perception of the relevance and usefulness of health insurance.

Objective 3: Examine how people's personal attitudes and perception of civic duty affect the choice of health insurance. Quantitatively assess how aware people are of the implications of waiting to enroll in health insurance and whether or not they feel it is ethically right to take up the product.

Objective 4: Discussion on how various consumer values for health Insurance (functional, social, emotional, epistemic, etc.) affect the level of preference. Influence factors: Here the researcher needs to establish which value related dimensions are most prominent when consumers make choices to purchase health insurance.

Objective 5: Examine the usefulness of perceived ease of use and perceived usefulness with reference to its impact on the consumer behavior in the process of choosing the technology-based health insurance programs.

Objective 6: Examine the relationship between perceived beliefs toward health insurance, social influences regarding the use of health insurance, and perceived control for consumers; and subsequently, how these factors affect consumer perceived behavioral intentions and actual use of health insurance. Conduct a relative analysis to determine which variables strongly influence the decision to adopt health insurance.

Objective 7: To assess the consumer attitude towards health insurance, it is necessary to analyze the behavioral intentions of these people. Examine how these intentions turn into purchase behaviors among the targeted individuals, and describe the preference for health insurance based on various attitudinal features.

Research Methodology

The method followed for the current study was searching for academic papers published between 2000 and 2023, the theories of consumer behavior on insurance policies focus on the main findings within the last two decades. The methodology encompasses three main stages: Considering the type of study to be conducted, which is a

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systematic review, much time was dedicated to search of literature, selection of the criteria for the studies to be included in the analysis, as well as the analysis of the data.

Literature Search: The first step involved the definition of the keywords and a multiple day literature search of articles that could be found in Google Scholar, JSTOR, PubMed, Science Direct databases. To this end, relevant terms such as the 'consumer behavior theories', 'factors influencing the purchase of insurance policy', 'behavioral economics', 'decision making in insurance', and 'perception of risk factors' were employed, Boolean concepts employed during the literature search process took a temporary perspective in ordering the valid articles that closely related to the topic at hand.

Selection Criteria: To avoid overly cumbersome and scattered reviews, criteria for the inclusion of a certain article within this review were established. While selecting the articles for this study the following limitations were placed; these include articles that are in English language, articles that are of academic level or peer reviewed articles. To re-orientate studies toward consumer decisions, they had to explain sharply advance theoretical postulates on insurance. Some of the papers were excluded if they fell under the following categories: review articles, editorials, letters, empirical papers, and those which failed to provide data on the needs theories.

Analysis: In deciding on the papers to be included in this study, method of qualitative content analysis was used in order to come up with the most relevant and informative papers. Out of the above stated theories, three were briefly revisited, that is the Theory of Planned Behavior, Prospect Theory, and the Expected Utility Theory and the usefulness of each in the insurance consumer choices discussed. Such data were coded thematically for purposes of evaluation and were analyzed to develop patterns, trends, or even gaps in the existing literature. This approach assisted in developing a clearer perspective of the manner in which these theories have previously been implemented and their impact on consumer insurance behavior within the described period. Literature Review To establish the mentioned objectives past researches related to consumer behavior in choosing health insurance which has used the above-mentioned models have been deeply studied.

Health Belief Model (HBM)

Known as the Health Belief Model (HBM), the theoretical framework is instrumental to numerous decisions that people make in their health care journey, including the purchase of the right insurance products.

Tufănaru, Mocean & Haţieganu, 2009 HBM determines health insurance product preferences based on perceived benefits and the costs that a given product will attract to the customer. Analyzing consumers' health insurance choices, it was found that their perceived threat plays a significant role in the choice made. The costs associated with attaining health-related goals spur preventive health actions that are deemed to have more benefits. Based on the mentioned factors, health behavior threat perception was affected to varying degrees.

Pitacco, E. (2014). HBM affects choice of behavior by the perceived possibility of experiencing the threat, the seriousness of the threat and the relative advantages and disadvantages of given behavior. It could also be decided that people can choose insurance policies based on some principles of the HBM. Explains health insurance as a product that provides protection concerning income and expenses arising out of accidents/illness. Comprises a wide array of insurance solutions for managing the risk of financial losses on health-related issues

HBM is instrumental in determining an individual's choice with regard to health insurance. Perceived attributes are useful in choosing the health insurance products which consumers purchase. Perception variable contributes 98. 38 % Healthcare provider, self-efficacy 29%, health belief model 1. Insurance consciousness being defined as individual perception of insurance reveals that 61% belongs to the variable decision making.

Green & Murphy (2014). HBM measures insurance perceived benefits and perceived barriers, perceived susceptibility, and perceived seriousness of insurance. The pre-post self-efficacy level is an important concept in decision-making concerning health insurance products. Personal and environmental factors create expectations; decision-makers weigh benefits against costs for alteration of behavior. Model includes perceived risk, risk of severity, perceived benefits of taking action, perceived barriers for taking the action.

Luquis & Kensinger, (2018) the following is a critical look at way that HBM can impact on the decisions that may be taken concerning the health insurance plan to adopt. Perceptions that are found related with the factors concerning individual personalities are susceptibility as well as the seriousness of illness. Young adults want to

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maintain a distance from those health states which they perceive as undesirable, are not adequately covered by health insurance or are likely to be uninsured shortly.

According to the suggestions made by Acharya et al. (2020) there is consideration of the health behavior model, perceived benefits, severity, threats and self-efficacy can be adopted. The PSAs for health insurance must target HBM constructs the acronym HBM should not be expanded when used in reference to the health belief model. Andraini et al. (2022) The study did not mention constructs such as perceived vulnerability, perceived benefits, perceived barrier, self-efficacy and action to healthy behavior proposed in the Health Belief Model; and also, medication compliance. Both HBMC pSA's employees actively participate in the selection of health insurance. Hidayat, M., et al.(2022) ,.talked about perceived susceptibility, perceived severity, perceived relevancy of the outcome, perceived advantages, perceived obstacles and facilitates, and perceived self-efficacy. In the case of HBM the behavior change needed to make a decision regarding the selection of the health insurance product is facilitated. The cues to action and perceived severity are among the four aspects of the proposed model and also lead the results of the studied research.

Zicof et al (2023) Therefore, it can be concluded that, as postulated by HBM, the targeting variable is not to select the health insurance products, but to develop the preventive behavior. According to the HBM, perceptions regarding the behavior that is considered to relate to health defines its health aspect. Summarily, hypotheses 1, 2 and 3 were supported, so perceived seriousness, self-efficacy and vulnerability were significantly related to preventive behavior. The focal concerns regarding factors that may be perceived to hinder and those that may be perceived to enhance actions which may not necessarily relate to the prevention of TB are summarized in the following tables.

Consumer Value Theory (CVT)

CVT was developed by economists to provide the primary focus to customers and the way they assess the worth of products and services that they are provided with. There could not be a variety of articles that strictly relate to Consumer Value Theory that could be applied in the context of the health insurance sector; however, attempting to identify articles that could be related to consumer behavior in general and the field of health economics might produce some valuable results.

The antecedent research of Lee & Cunningham (2001) revealed that. Through the process of the study as well as formation of the conceptual framework, investigators have a significant chance to understand the manner in which customers observe value. Mainly, it does not relate to the aspects of health insurance but, nevertheless, contributes to a further understanding of how customers determine the value placed on any given products within a given purchase consideration segment.

Marquis et al (2006). Simple price subsidies will only dearly impact participation level and that attempts to removing the nonprice barriers will be equally effective. If let loose, it is apparent that there is a lot of pooling in the individual market, one that even gets worst with time because those that get ill can maintain coverage without being subjected to another round of underwriting.

Kolstad & Chernew (2009). consumers have a tendency to opt for superior performers in the health plans they purchase and obtain services from superior providers and are receptive to being informed on quality. Several changes occur in the response to quality as well as quality information the consumers and across population subgroups. It is for this reason, then, that the role played by quality information in the determination of choice is evident with a relatively limited quantity of consumers, regardless of whether this number is perceived as being significant in the sense of making a difference to choice.

Moorhead et al. (2013). focusing on the method by which consumer accesses health information through social media. However, since it is not concerned with health insurance explicitly, it could still offer an understanding of how consumers view and derive value from health information, which is a part of consumers' decision-making process where health insurance is concerned.

Singh, R. P. (2018). consumer responsiveness, increase in lifestyle diseases and critical diseases, increase in private players participation in healthcare insurance, -more intake of health insurance coverage to the lower pricing

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section through governmental support, demographic changes, increased innovative medical discovery, costly but efficient diagnosed processes, new and efficient health insurance packages.

Mistry& Vyas (2021). As evidenced in the study, Personal and Marketing factors affect positively to the health insurance buying, while the social factors have a negative effect on the same.

Roshani et al (2022) The fact that the consumers have become aware of the policies has a major influence in choosing the insurance policy and the purpose of keeping it is influenced so much by policy characteristics and policy advantages.

Technology Acceptance Model (TAM)

Technology Acceptance Model or commonly known as TAM is a typical model that provides the ability in order to grasp and to predict the extent to which the consumer will accept new technology Fully. Nevertheless, it is very useful in information technology only context but can still be developed for researching the integration of technology in other domains such as health insurance. The following research have the potential for use of Technology Acceptance Model to address the purchasing behavior of health consumers general:

Through the use of the Technology Acceptance Model, the following research have the likelihood to provide understanding on the purchasing behavior of consumers with regard to health insurance: In this study, the TAM is proposed as the underlying model of technology acceptance Lin (2007). researched explores the integration of distributed Web-based collaborative tagging. These tags are used to define concepts within contexts and refer to such systems as distributed Web-based collaborative tagging. This is evident in this as it seeks to show how TAM can be useful in the understanding of the adoption of a technology aspect even though it has no association with health.

In this study, the major theory used to make and test the hypothesis is the Technology Acceptance Model (TAM) Gagnon et al. (2016). furthermore, by adopt the Self-Determination Theory viewpoint, this rersearch purposes to inspect the facilitating factors and mitigation strategies for personal health record systems adoption. The following is the summary of the literature review: Thus, while it is focused on health-related data, it might offer some information on the application of TAM in a therapeutic context.

In the examination of the perception of the usage of the mobile banking services, Alalwan., et al. (2017) applied the lens of Technology Acceptance Model. While it does not involve the two straight health insurance, the research is nonetheless carried out. It may be useful to look at the results in light of the fact that there is a possibility of using TAM to explore consumers' behavior under conditions of technology adoption involving the use of financial products.

Ming Hui Tang and Chih Chia Yeh (2018). It was also explained that the social factors construct particularly, perceived usefulness, perceived ease of use, perceived self-efficacy influences the perceived actual usage and purchase intention.

Chang, L. Y., & Hsu (2020). a study done on the issue was able to determine that perceived reliability is one of the major factors that can lead to purchase intension of insurance products.

The article by Colón-Morales, Giang, & Alvarado was published in 2021. concluded that there is need to get more information as and when it is needed for Insurance Product decision-making. SAM was the theory that was applied in this study.

According to Toukabri & Ettis (2021)., the perception that ease of use, subject norms, perceived behavioral control and attitude have the most significant influence on the purchase intention in the insurance.

Lee, C. (2023). The Extension of technology acceptance model revealed that the Extended TAM variables have an influence over the health insurance consumers' attitude to obtain health insurance. They stated that perceived ease of use, perceived usefulness, and attitude towards technology mediated the levels of technology acceptance to influence decision for health insurance purchase.

Lee, C. (2023). While on the whole, all the extended TAM variables have significant and positive impact on 'attitude towards the spillover effect' that health insurance would serve. Email spam filters and other factors, such as subjective norms and usage attitudes, have a significant impact on the intention of purchasing insurance. The result of hypothesis test also shows that all the extended TAM variables have a positive influence toward the

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attitude toward using SEHI. This research established that the perceived belief about the degree of acceptance of the products by others, which is referred to as the subjective norms, and perceived usefulness of the insurance products, which refers to usage attitude, played a positive role in spillover-effect insurance intention to purchase. Alsyoufet 1, (2023) This study covers three main components namely: perceived ease of use, perceived usefulness, perceived security. We find that the presence of usability reduces the strength of the association between perceived ease of use and intention.

Theory of Planned Behavior (TPB)

The Theory of Planned Behavior (TPB) is a theory founded in psychology that attempts to attend to human behavior in different domains including consumer behavior. When used as a lens to focus on the process through which consumers make decisions regarding the need to have health insurance, TPB can generate a comprehensive understanding of the client's behaviors. By basic directly influence behavior occurs through intention to perform behavior which further depends on three factors: attitude, subjective norms, perceived behavioral control, which are core of TPB.

Gazmararian et al. (2005). researched the role of health literacy, which is often an element of the decision-making of one's health, even if it did not focus on the role of health insurance. In this paper, health literacy is understood to mean the ways through which the people get and process information regarding their health, and particularly information on health insurance.

As Han & Moser (2013) assert. Due to this, the Theory of Planned Behavior was used in a bid to identify the factors that shape the customers' attitude towards its purchase of health insurance products. Thus, the objective of this study is to establish how various attitudes, perceived subjective norms, and perceived behavioral control affect the intent to obtain health insurance.

Loewenstein (2013). assessed the link between understanding and purchase and the enrollment decisions relating to health insurance plans across the United States of America. In more specific terms, some extensive knowledge of the fact that consumers of health insurance services undergo a particular course through which they arrive at their choices regarding the appropriate health insurance policies they wish to obtain may shed light on several important factors.

Employees' differential perception of work environment idiosyncrasies in two organizations in their study Hassan & Nair (2016). Afford the reader with an understanding of the factors that determine the usage of insurance, especially health insurance, notwithstanding this paper mainly focuses on insurance services in the general context. This might shed some light into the means through which consumers are impacted on in their buying behaviors through digital interfaces.

Brahmana et al., (2018). The findings also stress the fact that perceived risk and perceived usefulness influence the attitude of customers towards the intentions of purchasing health insurance.

Thus, based on this study, it is Azizam et al (2020). We agreed with the perception that Attitudes and subjective norms affect the intention to adopt health insurance, which is TPB's constructs.

Mamun et al., (2021). The findings indicated that insurance literacy, perceived usefulness, attitude toward health insurance, subjective norm, and perceived behavioral control examined were highly significant predictors of the intention to purchase health insurance. The results revealed that having the intention to purchase health insurance had a significantly positive effect on the actual purchase of the insurance. Finally, and in quantitative assessment, it was revealed that the intention to purchase health insurance had a positive and statistically significant effect on the media's mediation

Hayat et al (2022). Identified that working Chinese adults' purchase intention to insurance is mediated with attitude and perceived behavioral control. This was with reference to theory of TPB.

Another study done by Jadhav and Ramakrishna in 2023 revealed. Still, as far as I know, there can be observed that, applying the Theory of Planned Behavior, they attempted to investigate attitudes and barriers towards purchasing health insurance. The following factors were put as being very crucial; financial security, use of cash in transactions, and the absence of awareness.

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Mai & Huong (2023). This paper based on the study to have the Intention of Participation in Voluntary Health Insurance in Vietnam found that the most widely used is Theory of Planned Behavior.

Theory of Reasoned Action (TRA)

Another behavioral theory that aims at the explanation of the relationship between the attitude, subjective norms and behavioral intents is called as the Theory of Reasoned Action (TRA). While, it is seen that there has been quite a number of attempts made to apply the TRA across various fields with the behavior related to health in one of them; however, it is also possible to argue that there might not be a rather large number of research work completed specifically to apply the TRA to purchase intention of consumer for health insurance. Nevertheless, the following researches are relevant to the presented discussion.

Hagger et al, applied the Theory of Reasoned Action and the Theory of Planned Behavior in a research study. (2001). for the purpose of making forecasts of the exercise behavior. Although it is not strictly related to health insurance, it provides an outlook on the application of TRA for predicting other behaviors that are associated with health.

Fishbein, M. (2008). it's vital to understand that intentions are the closest antecedent to behavior, but at the same time, the IM claims that environment variables and skills & abilities can overpower intentions and impact behavior.

Theory of Reasoned Action is used in the study to make predictions of the cancer screening for early intentions of diagnosing the cancer in the initial stages. Although it does not focus on health insurance, the study may offer some understanding of the use of TRA in the aspect of health, hence beneficial in comprehending consumer's behavior towards health insurance according to Montaño & Kasprzyk. (2008).

Chang & Tung (2011). researched to analyze the variables that influence customers' inclinations to acquire various kinds of health insurance products in Taiwan. Nevertheless, one has to notice that, although TRA is not employed explicitly in the research, it does address components that can be linked to attitudes and subjective norms as they relate to the purchase of health insurance.

Organizations are the focus of much attention, based on research carried out by Huhman et al., (2016). Reasoned action theory states that intentions determine the decision of action in the given case of health insurance enrollment. Attitudes, norms, and control influence decision-making in health insurance.

Hagger, M. S. (2019). Reasoned Action Approach helps to predict consumer behavior in the sphere of health insurance. Returning to the research objectives and hypotheses, it is possible to note that the research results and analysis show that the impacts of attitudes and subjective norms are positive and significant on intention in the context of consumer decision-making.

Chauhan & Sagar (2020). Thus, the decision maker's characteristics, the decision problem characteristics, and the social context.

According to a study in Bangladesh by Nomi & Sabbir (2020). concerning the consumption of life insurance, the decisional factors are: attitude, perceived control or subjective norms or perceived risk or risk aversion motives, saving motives, financial literacy, and religious beliefs or religiosity.

Alatawy, K.S. (2022). Found that Subjective Norms and Perceived Trust showed a significant positive influence on purchase intention toward online health insurance. Based on the results of the regression, the hypothesis stating that religiosity has a negative direct effect on purchase intention toward online health insurance was not supported.

Discussion

The Health Belief Model (HBM) is outlined as summarizing findings regarding health insurance selection and these findings include common themes and factors that the model addresses.

Since Themes and factors are the issues the model is founded to propose around decisions related to health insurance, the following can be decoded because of the findings drawn from the Health Belief Model (HBM).

Perceived Benefits and Costs: However, the gain/pain is self-explanatory, for gain costs censors a healthy prevention while pain shows the other way around.

Perceived Threat: Referring to the risk factor, health of the specific risk factor and other possible related factors (also related to the insurance decision or the feeling of the risks and risk factors).

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Perceived Susceptibility and Severity: The first of the perceived risks discussed in this paper is therefore the risk of contracting a disease of a specific kind and its consequences.

Self-Efficacy: Expectancy theory has another aspect that concerns how a particular action is likely to be undertaken to select health insurance.

Cues to Action: By these antecedents we compel people to reason and choose from the variety of available health insurance products; perceived severity was the closest factor here.

Perception of Insurance and Decision-Making: Awareness is yet another factor that may be taken being before deciding in the same aspect as to which specific health insurance products you would decide to purchase; an influential filter or choice criterion.

Health Behavior and Insurance Selection: At the time of introduction, the HBM conceptualization portrayed actual practices as well as their frequencies, but the study focused on the attitude towards a set of prescribed set of behaviors related to health in choosing an insurance company.

Health Insurance Coverage: Insurance product and Services management simply means the insurance cover for money received or paid for loss due to an accident or through an illness, although it can be put differently as; a set of Insurance products, which seeks to insure an individual or organization against a loss

Young Adults and Preventive Care: This research confirms, hence and in sum that young adults seek preventive services only if they have the expectation that, either that they are or would be in a vulnerable state that prevent an adverse health experience, not the one who is not insured.

The individual researches base their relevances on perceived value, price subsidization, non price barriers, quality information, social media, personal and marketing factors and consumer awareness in regard to the choice of health insurance in line with the theoretical underpinnings of the Consumer Value Theory (CVT). It also is covered by the others including increased health care costs, government policies and increased use of hi-tech medical technology in the society. With the recognition of such factors, when creating health insurance marketing products and methods, it helps the health insurance industry.

Customer Perception of Value: This further information about the value contained within the minds of the customers for anythingwould be always beneficial especially when one wanted to analyze how they perceive about buying exclusively or not health insurance.

Price Subsidies and Nonprice Barriers: It was also found that the price subsidy has significantly less effect on the use of the health care.

Therefore, they may also prove to be as useful an instrument of raising participation rates as non price barrier factors if easy to access.

Market Dynamics: Lots of people infected with this disease, and therefore significant pooling in the individual market, can go without reporting their health status

Consumer Preferences: Consumers used to inform their employers about the benefits which they can extend and are profitable. Рнути stated basically that is very difficult to encourage people with a poor health status to self finance themselves through the HDHPs.

Response to Quality Information: Therefore, the consumers consider such health plans as the consumers consider the gears of their cars, i.e. they are attracted to it.

They can deal with good information and any action taken on its basis.

The quality of information being collected is dependent on the consumers and the subgroups of the information. The fact that this quality information has had an effect on Consumers was realized to equal some consumers occasionally.

Health Information from Social Media: Healthcare providers were suggested being proactive in collecting health information their patients reveal on their social media accounts because the people are susceptible to post such information on their timelines without restriction. The social media is used by consumer for retrieving health information according to the perspective.

Explanations to the question of how consumers build their concept of value for information about health linked to health insurance were attempted via commitments.

Influence of Health Trends: The Measures that are changing include; increase of what may be called 'lifestyle diseases' becoming prevalent and Critical illnesses patented among these consumers. It is recommended that the

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above recommendations be made to the key stake holders to improve the health insurance status of the private sector consumers and, thus build confidence in the health insurance.

Several measures have been taken by various governments of countries to claiming to solve the problem as follows; to make sure that the lower strata have suitable insurance.

Although many factors actually come into play, then given choices this medical practice does seem to play the leading role, and the demographic factors have a major role too.

Factors Affecting Buying Decisions: The rationale is based from micro and macro considerations of personal and marketing variables that affect the health insurance buying behavior. Hence it is essential to point out that social factors, either in one way or the other, have a direct and negative impact on purchasing of health insurance. He also notes the degree of consumer awareness, characteristics of policy used by the policy to test effectiveness of different service policies. Between the given relations is the choice and the maintaining of the insurance policies, in relation with the factors both availability of the policy, and the characteristics of the consumer and the characteristics of the policy.

- Research based on the Technology Acceptance Model (TAM) demonstrates that decision-making about health insurance highly depends on three main themes: perceived usefulness, ease of use, and reliability and secure features. The impact of purchase intentions results from three factors including self-efficacy together with subjective norms and attitudes. Decision-making processes regarding health insurance product adoption become more intricate when factors related to information requirements and extended TAM variables take effect. Research applying the Technology Acceptance Model in different settings contributes significantly to the comprehension of health insurance technology adoption behavior among consumers.
- Users who believe the product has helpful capabilities combined with straightforward operation tend to develop positive purchase intentions.
- Two specific research variables which stem from the work of Davis in 1989 (TAM) function as perceived
 usefulness and perceived ease of use in current analysis.
- The users display substantial interest in using and purchasing insurance products based on these factors.
- Customer choice decisions regarding purchasing are heavily influenced by how easy it is to use the particular IT application.

• Self-Efficacy:

o This paper relies on Self-efficacy theory thus it must address these two main questions: Does self-efficacy affect the actual usage intention of the technology and the purchase intention?

• Perceived Reliability and Security:

- o Numerous articles examined by the study indicate reliability stands among essential precursors which directly influence purchase decisions.
- Security stands as the last perception affecting technology adoption besides convenience and usefulness in the TAM model.

• Subjective Norms and Attitudes:

- O Subjective norms include perceived prescribed behavior, perceived groups approval and perceived business approval as all had a positive effect on insurance purchase intention, and perceived behavioral control is composed of perceived control, perceived ease of use and perceived usefulness of the product. Also, the relationship between the constructs is as follows. Then, perceived behavioral control has an effect on the insurance purchase intention, because the two are its components, if there are no normative and control beliefs, perceived behavioral control is impossible.
- One of the gross variables that have strong influence over the purchase of health insurance is attitude that consists of two subjective norm that is part of the extended technology acceptance model (TAM).

• Information Requirement:

o Study reveals this as an area of much need to users to allow them to benchmark and subsequently make appropriate decisions on the number of providers in the market.

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Behavioral Control and Attitude:

o It was also found an interesting result such as perceived behavioral control and attitude toward brand and found it has its outstanding importance in explaining purchase intention.

Extended TAM Variables:

Therefore, in line with Hypothesis 2, it is found that demographic variables have significant and positive relationship with perceived values for the spillover effect HI and purchase intention for HI.

Application of TAM in Various Contexts:

This section is on an outline of TAM in different subjects like education, healthcare, IS/IT, Telemedicine and m-Health, Business, E-Commerce etc., after the theoretical presentation of TAM.

The model is used to explain why the technology acceptance behaves in particular ways in different settings namely in online tag invoking systems, personal health record systems, mobile money services and the like; it creates a broad framework on how a consumer behaves in relation to the technology.

- These common factors that can be summarized to emphasize the perceived usefulness, ease of use, reliability, security, perceived self-efficacy, perceived level of influence by others, attitude towards health insurance and need of more information is pertinent in determining one's choice of health insurance. In addition, there are more richness to learn what users would adopt technology using TAM in the health insurance setting.
- Health literacy, usefulness perceived, attitudes, subjective norms, perceived behavioral control, decision places and online platforms have been associated with the health insurance as decision variables. Likewise, health literacy helps people develop the right knowledge on what opinions to express and what actions to execute when choosing which kind of health insurance to take. The variables used by TPB to explain both the behavioral intention and the behavior are attitude, perceived behavioral control and subjective norms. However, in health insurance, decision of an individual is also affected by other industry facets such as perceived risk which is the ability of an individual to be locked into a socially risky act of financially risking his or health through taking of the insurance cover, and use of social technologies.
- Digital platforms are widely used by consumers in the purchase decision related to health insurance policies.

In a study that helped in establishing the model, it was found out that perceived risk and perceived usefulness were essential determinants of people's attitude towards buying health insurance.

From the analysis emerge the fact that both financial factors and, by far, financial literacy have a large impact on the decision about whether or not to buy health insurance.

- Both attitude and perceived behavioral control are significantly effective on the users' intention of buying an
 insurance policy.
- The insurance literacy level is a major determiner of the decisions to enroll in health insurance and perceptions of the enrollment process given the health insurance policies.

Out of which the findings suggest better understanding in the insurance related decisions of the people with higher level of health literacy.

The theory of planned behavior has principal components of attitudes, perceived behavior to control and subjective norms which directly affect the intention to buy health insurance.

In the context of Saudi Arabia, we can conclude that the Attitude has a positive relationship with the Intention to purchase Health Insurance; and also Perceived Subjective Norms and Perceived control over Performing the Intended Behavior also support the Intention of the Saudi Arabian people in purchasing Health Insurance. TRA and TPB are used in a number of research studies to predict and explain a number of other activities including, exercising, cancer screening, and involvement in affiliate health insurance.

Suggested measures of intention for measurement are the best antecedents of the behavior but the environment factors and skills have been accepted to influence the intention-behavior relationship as hypothesized by the IM.

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In this paper, the attitudes, subjective norms, perceived behavioral control were analyzed to determine specific consumer behaviors regarding to health insurance policies through the use of TRA and TPB.

Studies relating to objectives which capture the predispositions of a customer to purchase insurance products outcome are available in Taiwan, which are self-archived and which may lead to understandings regarding aspects of attitude, and perceived norm.

Finally, this study also identifies nature, type and size of decisions involved in making decisions regarding health insurance based on decision makers' characteristics, decision problems as well as social contextual factors underlying such decisions.

Attitudes, perceptions of norms, perceptions of risks, relation motives, saving motives, financial literacy and religiosity are some of the contextual factors that affect the life insurance on which one needs to be taken into consideration.

This study demonstrates that perceived subjective norms will have a positive impact on purchase intention of health insurance from online sources. In line with that, perceived trust in buying an online health insurance also matters. We cannot find any support for the claim that perceived religiosity is related to the purchase intentions following an online health insurance.

The objectives of the study based on the common features of the above discussed theories could be the following;

Objective 1: Level of threat perception and level of perceived benefit in the Health Insurance.

Commonly identified as perceived risk, other components under the evaluation of the Perceived Threat of the Health Belief Model (HBM) are people's attitudes towards risks as well as position they have taken on a risk to buy an insurance policy.

Perceived Benefits and Costs: For instance, the recognition of perceived benefits of health insurance (e.g., the extended coverage for reimbursement of out-of-pocket expenses and identification of perceived hindrances of health insurance (mostly the costs and comprehensiveness) is treated as an identification of the benefits of this move against its costs as suggested by the HBM.

Objective 2: What should be the significant variables that resulted in self bias in the health insurance choices context.

Self-Efficacy: This paper explains how people can expect to use themselves and the perceived value and use of health insurance through the component of self-efficacy from Health Belief Model that is how you will take control of what is expected of you.

The Understanding and use of attributions and the reasons for making of attributions of the gains and losses, especially or behavior or event, is determined by the perceived Susceptibility and Severity in HBM.

Objective 3: Assessing personal attitudes with respect to the civil responsibility when he/she makes a choice of his/her health insurance.

An example of how this is represented by the TPB is examined with the specific points of attitudes and subjective norms: how attitudes and perceptions of civic responsibility relate to choice of health insurance.

Understanding Perception in the Decision: Analyzing how people make decisions of not enrolling in early health insurance, the ethical factors that reflect in the HBM, allows to perceive how perception determines decision as laid in the HBM.

Objective 4: Engaging the consumer in choices and decision making about health insurance

Nothing in this research is contrary to the consumer value theory as the researcher attempts to establish the various consumer's values that affect the choice of health insurance.

Objective 5: This enactment was strategically setup by a technological system in order to enforce which ensured that both perceived ease of use and perceived usefulness of health insurance had been enforced.

The factor used in the TAM to talk about consumer behavior with respect to the program of adoption of health check-up insurance through the technology is perceived ease of use and perceived usefulness.

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Objective 6. Investigating interaction between on the one hand beliefs and social influences and on the other hand perceived control in decisions on health insurance.

Secondly, if health insurance use is viewed as a behavior that relies on the Theory of Planned Behavior constructs such as attitudes, subjective norms and perceived behavioral control, then the meanings, how these beliefs specifically, social influence and perceived control affect consumer's attitudes and intentions and actual use of health insurance are considered under.

Cross sectional survey to evaluate the consumer disposition and purchasing intentions regarding the health insurance.

Consumer attitudes towards health insurance and the implications of such intend in the process of purchasing health insurance; this is discussed under attitudes and behavioral intentions as described in the Health Belief Model and the Theory of Planned Behavior.

Conclusion

- This study therefore examined how varied psychological notions and models, which are interrelated, were investigated within the context of understanding the current psychological online consumer buying behaviour in the health insurance industry with finding in view of above above. A theoretical input used for the study is the Technology Acceptance Model (TAM), Health Belief Model (HBM), Consumer Value Theory (CVT), among others; therefore a framework which is general for customers' behavior and what they prefer their preference with respect to health insurance is developed; besides the availability of elements of sustainable marketing innovation and digital trust in decision making process."
- Through the lens of these theories the objectives of the study were well addressed.
- Analysis of perceived threats and advantages of health insurance made possible to clarify how people perceive and envisage the role of health insurance as a reliable means of health risk protection.
- The study made possible the understanding of the self bias in the contexts of self-assigned health insurance choice and how others perceive their ability to shape health outcomes and personal responsibility for their choice. Failing to meet this set limits how they perceive health insurance and its role in their purchasing of eco friendly transactions.
- It was informative in terms of analyzing personal attitude, citizens' perception of they way they should act, ethical aspects of decision making and showing complex decision making process: coupling of individual values, social influence and moral standard.
- This allowed the explanation of 'green consumerism' in terms of health insurance and the need for product offerings to resemble health and consumer needs.
- For 'sustainable business practices', the evaluation of perceived ease of use and perceived usefulness in the
 context of technology based health insurance programs found usability and utility to be important for user
 success with generating usage and acceptance.
- It looked at the interdependency among beliefs, social influence and perceived control as antecedents of
 consumers' intentions and behavior and how complex it was. This reiterates the significance of 'digital trust'
 in the adoption rates of health insurance policy.
- Evaluating the consumer attitudes and behavioral intentions towards health insurance revealed important
 factors and barriers impacting the consumer behavior from which intervention and policy measures to
 increase health insurance adoption were made.

In short, this paper builds a theoretical framework for analyzing online consumer buying behavior in the healthcare setting and sets this building on essential linkages among theoretical concepts. Through the factors that influence choice of **health insurance**, this study provides policymakers, insurers and healthcare providers with useful information on how to make 'sustainable marketing innovation', build digital trust and promote informed decisions. The purpose is ultimately to foster 'green transactions' and environmentally responsible business in the health insurance sector for the purpose of enhancing public financial safety and improve healthcare access for all.

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