

[Why maternity insurance is important before planning to start a family](#)



Maternity Insurance: As per the IRDAI guidelines, the pre-hospitalisation cost up to 30 days before the date of admission is covered in a maternity cover. (AP)

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The maternity cover will take care of medical expenses traceable to childbirth, including complicated deliveries and cesarean sections incurred during hospitalisation and post-birth complications

When Alpana welcomed her firstborn in August this year, a major private hospital in Kolkata handed her family a bill of ₹3.5 lakh that included the costs of surgery and pre-post parturition care. The couple was entirely distraught as her journey to motherhood was not a smooth one. The couple had already spent around a lakh in OPD to overcome complications with her pregnancy. However, Alpana is not alone, the cost of healthcare is skyrocketing with each passing day and in the elaborate scheme of things, couples tend to overlook the exorbitant costs of medical support during pregnancy.

The sensitivity to own a personal health cover has increased in the Covid era. However, very few insurances cover the various expenses of childbirth. Motherhood is a life-changing and incredible journey for many, but to make it smoother, maternity insurance can go a long way. The maternity cover will take care of medical expenses traceable to childbirth, including complicated deliveries and cesarean sections incurred during hospitalisation and post-birth complications will ease the financial burden of new parents to a great extent.

In India, maternity insurance is not a standalone insurance product but covered within the Base Health Insurance policy, primarily constituted by family floater policies. "Stand-alone maternity insurance covers are not currently available in the market due to the risk of anti-

selection (with customers who are planning a family would always buy the maternity policy and thereby a sure shot claim)," Sanjay Datta, Chief-Underwriting, Claims, and Reinsurance, ICICI Lombard General Insurance told Mint. So, if a couple is planning a child then they should check if the health insurance provides maternity cover or not.

Amit Chhabra, Head-Health Insurance, Policybazaar.com told Mint that, "The maternity cover saves you from the trouble of having to pay out of your pocket and assures that the expecting mother and her newborn are taken well care of both medically and financially".

According to Policybazaar's website, Bajaj Allianz has a family floater plan that covers maternity and newborn baby expenses in the Health-Guard Gold Plan. For this, the sum insured ranges between ₹3 lakh and ₹50 lakh. In the Bharti Axa health insurance plan, the newborn baby cover is provided only for 90 days. Also, there is a 9-month waiting period to avail of the benefit.

Dr S Prakash, Managing Director, Star Health and Allied Insurance Co. Ltd told Mint that their company offers a range of benefits to a pregnant woman or a couple, such as, "Natural delivery, normal vaginal delivery, and cesarean section," Prakash said adding that, "We also have ancillary feature in which a newborn is covered from Day-1 despite being born with congenital defects. The child is covered until the completion of the policy period. After the policy's completion, the child can be added into the parents' plan".

Minimum coverage for maternity insurance

While choosing the coverage amount, one should be aware of the normal delivery charges and C-section charges levied by the city's hospital, Datta said.

Gurdeep Singh Batra, Head – Retail Underwriting, Bajaj Allianz General Insurance said that a normal delivery in a fairly good hospital may be in the range of about ₹50,000. The cost for a C-section delivery may go up to about ₹75,000 or higher depending on the complexity of the delivery. He said if someone is planning two children then the delivery cost may go up to ₹1.5 lakh, excluding the medical expenses of the newborn child. In contrast, the maternity expenses in government-run hospitals are free of cost.

Does maternity coverage include assisted reproductive technology?

Since maternity coverage is part of health insurance in India, therefore a responsible policyholder should know all the terms and conditions, including coverage limit, sub-limits for normal and C-section delivery. Chhabra, Head-Health Insurance, Policybazaar.com said treatments arising or traceable to any infertility, sterilisation, birth control, etc are some of the common exclusions of the maternity cover under a health insurance policy.

"Infertility treatments, stem cell harvesting, and storage, surrogacy expenses," are other exclusions under maternity cover in India, Batra from Bajaj Allianz told.

However, Star Health Insurance Dr Prakash said that their policy has a feature wherein a couple who have difficulty in conceiving a baby the treatment for assisted reproduction technology is also covered.

Can you get insured under maternity health insurance while you are pregnant?

While one can get regular health insurance when you are pregnant, one will not be able to get maternity coverage. There's a waiting period to avail of maternity coverage that may vary from one insurance plan to another. For example, as per the Policybazaar.com website, SBI Arogya Premier Plan covers maternity expenses after nine months of the waiting period. ManipalCigna's ProHealth Plus Plan maternity coverage is available only after 48 months of the waiting period. Star Health covers maternity expenses after 24 months. In case, if someone is planning a second child then the couple will have to wait for another 24 months, Dr Prakash from Star Health said. "Within 24 months if someone is planning a second child then it would not be good for the health of the mother," he added.

Central government schemes for pregnant women

In India, a large section of women goes to labor in government-run hospitals for cost-effective delivery to date. The Central government provides a maternity benefit programme, known as Pradhan Mantri Matru Vandana Yojana (PMMVY). Under this centrally-sponsored scheme, a cash incentive of ₹5,000 is provided directly to the bank or post office account of pregnant women and lactating mothers (in three installments) for the first living child of the family. As per the Ministry of Women & Child Development, the Last Menstrual Period (LMP) date is mandatory to claim the 1st and 2nd installment. The beneficiary has to register her pregnancy at the approved health facility within 150 days from the date of LMP which needs to be entered in the Mother-Child protection (MCP) card.

PMMVY scheme eligibility

The PMMVY scheme is for those women who were employed before pregnancy and have experienced wage loss due to pregnancy. Pregnant women who are in regular employment with the Central Government or the State Governments or PSUs, or are on paid maternity leaves are exempted from PMMVY's benefits.

State government schemes for pregnant women

Apart from the Centre's PMMVY, several state governments also provide monetary aid to pregnant women. For instance, Tamil Nadu's Dr Muthulakshmi Maternity Benefit Scheme (DMMBS) grants benefits to pregnant women for two live births. Women receive a cash incentive of ₹18,000 in five installments, including a nutrition kit worth ₹2,000 for each live birth. The Odisha government has launched the Mamata Scheme that provides financial aid of ₹5,000 to pregnant women and lactating mothers across the state. Almost every Indian state has a scheme directed to motherhood, but people are not much aware of it as a result, they end up spending a lot anyway.

Key features of maternity insurance:

- As per the IRDAI guidelines, the pre-hospitalisation cost up to 30 days before the date of admission is covered in a maternity cover.

- Besides, expenses such as room charges, doctor consultation, anesthetist consultations, surgeon fees, and nursing are also covered. Some of the insurance plans also provide cover for emergency ambulance charges.
- Some maternity insurance also covers pre and post-natal expenses, infants diagnosed with critical illness, and vaccination of the newborn.
- Some policies might include the cost of termination due to complications.

However, it is imperative to do a thorough investigation of the policy before you purchase one.