

Assessing the Impact of Insurer Financial Health and Perks on Consumer Buying Behavior**Gaurav Kumar Bisen¹ & Prof. Arun Kumar Singh²****DOI:** <https://doi-ds.org/doi/10.2025-14483346/ADEDJ/V2/I2/GkBAKS>**Review: 08/07/2025****Acceptance: 20/07/2025****Publication:08/08/2025****Abstract**

This study explores how an insurer's financial strength and the availability of added benefits influence consumer buying behavior, particularly focusing on trust and purchase intentions. Using a structured questionnaire, data was collected from 200 respondents across India. A quantitative, descriptive, and correlational research design was adopted to examine the relationships among financial health, value-added perks, trust and intention to purchase. The findings reveal an interesting insight that while most consumers generally see insurance companies as financially stable and trustworthy and tend to be inclined to buy insurance the data doesn't show a clear, direct connection between trusting an insurer's financial health & perks and the actual decision to purchase. This suggests that some factors, like pricing, quality of service, or how people personally view risk, might play a bigger role in shaping their choices. This study helps us in better way to understand that how people think about and decide on insurance. It indicates that just finances or offering perks are not enough to convince customers. Instead, insurers who want to engage customers more effectively should take adopt modern innovative techniques focusing on better customer service, competitive prices, and personalized options that truly meet different customer's needs.

Keywords: Insurance Consumer Behavior, Financial Soundness, Perceived Trust, Purchase Intention, Value-Added Benefits**Introduction**

Social, financial, and global aspects all contribute towards how modern consumers select Insurance policies. The financial strength and benefits offered by an Insurance company are two of the key elements. How these two factors interrelate is especially important not only for consumers seeking the best protection, but also for insurance companies who want to stay ahead in a more customer-oriented market. For most customers, an insurer's good financial standing is an advantage. This strengthens the perception that the company is able to deliver and honor its obligations, especially during difficult times or in the event of unforeseen circumstances. A financially stable insurer enhances his trust and eases customer's worries about their claims being settled when the most critical times arise. Often these perceptions are backed up by credit ratings from independent agencies which bolsters the trust of the customers towards their choice. This financial strength also nurtures consumer's long-run loyalty towards the insurer. Trust is the cornerstone of the insurance relationship, and customers tend to stay with companies they trust will still be operational in the years to come. Firms that can handle economic fluctuations well offer a sense of ongoing security which is very important in an industry centered on managing risk.

At the same time, discounts and service incentives by the insurers can greatly impact the buying decisions. Comprehensive policies are made more appealing by offering discounts, rewards for continued patronage, wellness programs, and even roadside assistance. Beyond mere product promotion, such incentives provide evidence of a paradigm shift in favor of customer-centric approaches. Instead of merely meeting obligatory demands of the customers, insurers have started adjusting and tailoring their offerings based on increasingly sophisticated expectations that go well beyond basic coverage. Focusing on personalization and service assists in building dependable relationships with customers, a crucial factor for fostering long-term satisfaction. As noted, the link between a firm's financial well-being, its perks, and consumer behavior is not straightforward. These elements do not operate independently. The pricing, coverage specifics, customer service, and the brand's reputation also greatly influence the decision. Therefore, every consumer is unique. Age, prior experiences, and risk appetite are some factors that shape what is significant to the consumer.

To summarize, a more holistic view on purchasing behavior is derived by exploring financial dynamics and perks, thus, requiring them to be viewed in tandem with quantitative and qualitative perspectives. Unlike other insurers, businesses that harness financial strength alongside customer-centered creativity will enjoy better trust and loyalty from consumers. So consumers who are well-

¹ Research Scholar, Department of Commerce, Udai Pratap Autonomous College, Varanasi, Uttar Pradesh, India..

² Professor, Department of Commerce, Udai Pratap Autonomous College, Varanasi, Uttar Pradesh, India.

informed about these factors can help make smarter, more satisfying insurance decisions. Ongoing studies and industry efforts should keep farming into these dynamics to better align insurance products with what people really want in an ever-changing world.

Literature Review

The link between an insurer's financial health and how consumers make buying decisions has been an important factor focused in academic research, highlighting just how important this connection is to the insurance industry as a whole. This review pulls together key findings from past studies to shed light on how an insurer's financial strength and the additional benefits they offer impact customer choices and where researchers could explore further in the future. One important takeaway across many studies is that an insurer's financial stability plays an important role in inspiring consumer confidence. Time and again, research shows that people are more likely to buy insurance from companies that are financially strong because these insurers are accepted as trustworthy and are less likely to fail when it comes time to pay insurance claims. For example, Cummins and Weiss (2014) point out how credit ratings from agencies like A.M. Best and Moody's help in shaping consumers' thought about an insurer's reliability. These ratings basically serve as important indicators of financial health and are commonly used by consumers to measure potential risk. Backing this up, Eling and Luhnen (2010) suggests that when an insurer is financially strong, it lowers the perceived risk for consumers, making those companies more demanding by consumers. On the other hand, Baranoff and Sager (2002) warn that financial trouble doesn't just hurt the insurer's basic business but it also swings consumer trust. This can lead to consumers pulling away from that insurer, or even market-wide problems like adverse selection, where only the high risk customers stay on, or moral hazard, where behavior changes because of perceived safety nets.

Trust is really the crucial link tying an insurer's financial health to the way people buy insurance. Mayers and Smith (2010) highlight that qualities like transparency, reliability, and the ability to pay claims help build this trust. And once that trust is earned, it tends to create long-term loyalty and positive recommendations, as noted by Sirdeshmukh, Singh, and Sabol (2002). Reputation also matters a great deal in how consumers choose insurers. Doherty and Tinic (1981) found that cautious, risk-averse customers often lean toward companies with a history of financial strength. More recently, Chen, Wong, and Lee (2017) added that a strong reputation sends a clear message of quality and dependability, which is especially important in insurance since promises made today might only come due years later.

In short, the research shows that financial strength and trust go hand in hand, shaping consumer decisions in a profound way. Insurers that understand this can better position themselves by maintaining solid financial health and nurturing trust and reputation over time. While financial strength builds trust, perks and incentives help insurers stand out in a competitive market. From loyalty programs and discounts to bundled products and digital rewards, these extras can add significant value for consumers. Zeithaml (1988) highlights that perceived value is a key driver of consumer satisfaction, and perks can play a major role in boosting that perception. Kim, Lee, and Jung (2013) found that today's consumers are increasingly drawn to personalized perks—benefits that feel tailored to their individual preferences and needs. These incentives can deepen customer relationships, increasing not only satisfaction but also policy renewals and cross-product purchases (Berry, 1995). However, not all perks are equally effective. As Mittal and Kamakura (2001) note, consumers assess perks based on their usefulness and relevance. Simply offering incentives isn't enough; they need to resonate with the specific needs of the target customer group to truly influence decisions. Several established theories have been adapted to better understand how financial strength and perks influence consumer decisions.

The Theory of Planned Behavior (Ajzen, 1991) adapted by insurance researchers to take into account financial aspects and the use of incentive-based perks. For example, Taylor and Baker (1994) found that the way people think about buying insurance—and whether they intend to make a purchase—often comes down to how stable they think the company is financially, along with the extra benefits they're offered. These factors help shape both attitude and intention when it comes to insurance decisions. The Technology Acceptance Model (Davis, 1989) is also relevant here. Venkatesh and Davis (2000) updated this model to factor in an insurer's financial strength and perks as outside influences, especially when people are considering whether to use online or digital insurance platforms. By bringing these elements into the mix, researchers get a good understanding of what motivates people to pick certain insurance options i.e. whether it's traditional policies or new digital services. This kind of approach helps to capture the full picture of how financial stability and added incentives play an important role in consumer insurance choices.

Research Gaps

Although there's enough amount of research out there, there are still some important gaps when it comes to fully understanding how an insurer's financial health and perks influence consumer behavior. We need more long-term studies that look at how financial stability and perks affect customer loyalty and retention over time not only in the short run. Another area that hasn't been explored

enough is how these factors impact different groups of people. Since consumers vary widely by age, income, culture, and other demographics, it's important to look deeper into how these differences effect preferences and decisions.

Above that, the rise of digital technologies and insurtech apps created exciting new research opportunities. How digital platforms can improve transparency or offer personalized incentives are still a relatively new field that could reveal valuable insights. Overall, there's enough room to expand our understanding, especially by looking at how these evolving trends interact with consumer behavior in the insurance world.

Hypothesis

Hypothesis 1 (Financial Health & Trust)

Null Hypothesis (H_{n1}): There is no relationship between the perceived financial health of an insurer and consumer trust.

Alternate Hypothesis (H_{a1}): There is a positive relationship between the perceived financial health of an insurer and consumer trust.

Hypothesis 2 (Perks & Purchase Intention)

Null Hypothesis (H_{n2}): There is no relationship between the availability of additional perks and consumers' intention to purchase insurance policies.

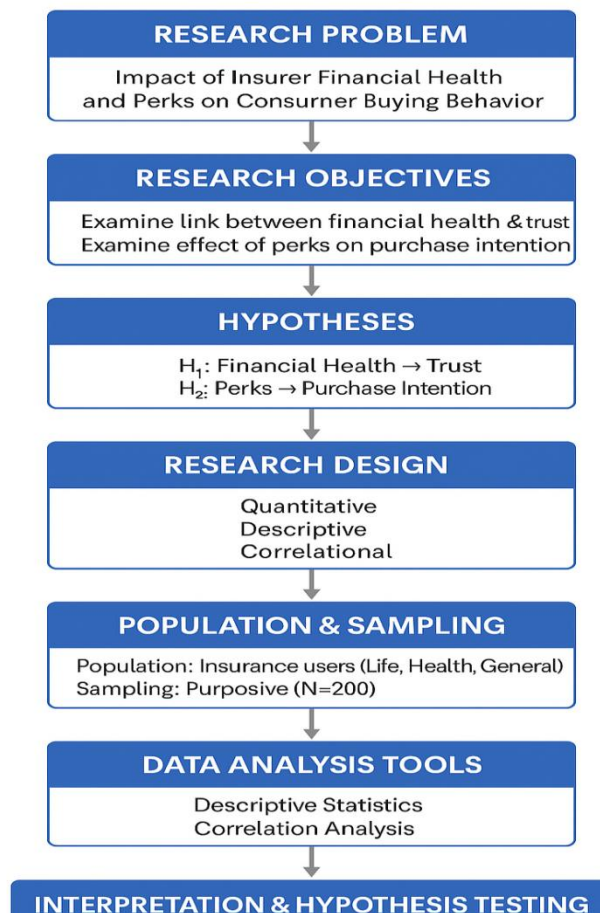
Alternate Hypothesis (H_{a2}): There is a positive relationship between the availability of additional perks and consumers' intention to purchase insurance policies.

Research Methodology

1. Research Design

This study adopts a “quantitative, descriptive, and correlational research design” to examine the relationship between insurer financial health, additional perks, and consumer buying behavior in the insurance sector. The goal is to empirically test the proposed hypotheses through data collected from individual insurance consumers.

Table1: Research Design (Authors Design)



2. Research Approach

A “survey-based cross-sectional approach: will be used to collect primary data from respondents at a single point in time. This allows for assessing current perceptions and behavioral intentions.

3. Population and Sample

Target Population: Individuals aged 18 and above who have purchased or are actively considering purchasing insurance (life, health, or general insurance) in India.

Sampling Technique: “Non-probability purposive sampling” will be employed to target respondents who have relevant experience with insurance products.

Sample Size: A minimum of 200 respondents will be targeted to ensure statistical significance and reliability for hypothesis testing.

4. Data Collection Method

Instrument: A structured questionnaire using a 5-point Likert scale (1 = Strongly Disagree to 5 = Strongly Agree) will be developed to measure:

- Perceived financial health of insurer (e.g., solvency, credit rating perception)
- Consumer trust (e.g., reliability, claim confidence)
- Perceived value of perks (e.g., usefulness of discounts, relevance of loyalty programs)
- Purchase intention (e.g., likelihood of purchasing or renewing a policy)

5. Data Analysis Techniques

Descriptive Statistics: To summarize demographic characteristics and overall response patterns.

Correlation Analysis: To determine the strength and direction of relationships between variables.

6. Ethical Considerations

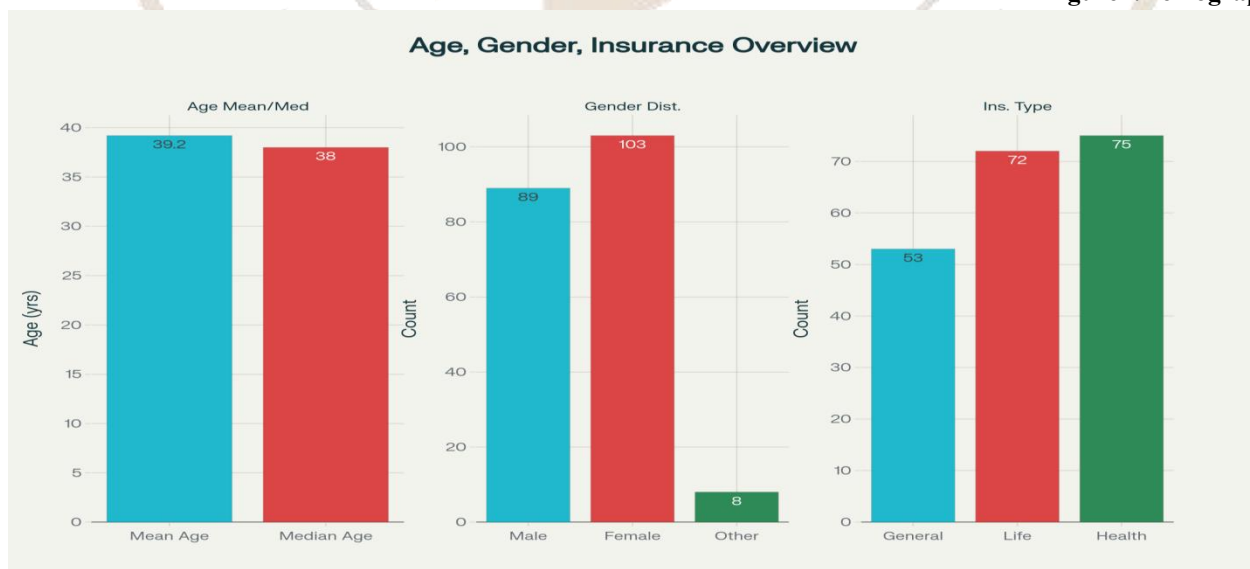
- Participation will be voluntary, and respondents will be informed of the study’s purpose.
- Anonymity and confidentiality of all responses will be maintained.
- The study will comply with ethical standards for social science research.

Analysis & Findings

Table2: Demographics

Variable	Summary
Age	Mean ≈ 39.2 years; Median: 38; Range: 20–59
Gender	Male: 89; Female: 103; Other: 8
Type of Insurance	General: 53; Life: 72; Health: 75

Figure2:Demographics



Trust– Proxy for Perceived Financial Health

Variable	Mean	Median	SD (approx)	Min	Max
T1	4.40	4	0.67	3	5
T2	4.34	4	0.70	3	5

- **Distribution:** Heavily skewed towards positive (4/5; i.e., “Agree” & “Strongly Agree”).
- **Interpretation:** Respondents *generally perceive* insurers as trustworthy/financially stable.

Perceived Value/Perks

Variable	Mean	Median	SD (approx)	Min	Max
PI1	4.28	4	0.67	3	5
PI2	4.33	4	0.66	3	5

- **Distribution:** High positive intent to purchase/renew.
- **Interpretation:** Good baseline for analyzing what drives high intent.

Perceived Knowledge (PK1–PK3)

Variable	Mean	Median	SD (approx)	Notes
PK1	4.25	4	0.74	
PK2	4.38	4/5	0.72	
PK3	4.41	4/5	0.68	

Associations and Patterns

- **Respondents tend to trust insurers (high scores on T1/T2)**, suggesting they generally perceive good financial health among providers. This supports testing **Hypothesis 1** (Financial Health → Trust).
- **Purchase intention is also high**, implying respondents are generally open to buying policies, and possibly view perks/favorable offers positively (**Hypothesis 2**: Perks → Purchase Intention).
- **No strong differences by gender or insurance type, but younger respondents (18–29)** seem slightly more positive on both trust and intention, possibly more responsive to digital perks.

Summary Table

Variable	Mean	Median	SD	Min	Max
T1	4.40	4	0.67	3	5
T2	4.34	4	0.70	3	5
PI1	4.28	4	0.67	3	5
PI2	4.33	4	0.66	3	5
Age	39.2	38	11	20	59

Key Insights of The Study

- **High Trust & High Intentions:** The sample shows above-average trust in insurers and strong purchase intentions.
- **Consistent Responses:** Most attitude responses are positively skewed, which may indicate a favorable market perception or possible sample bias (self-selection).
- **Demographic Split:** Broad age, gender, and insurance type representation.
- **Basis for Further Analysis:** The descriptive data provide a strong foundation for correlation/regression analyses to test your hypotheses.

Correlation Analysis

Analysis	Variable Pair	Correlation Coefficient	p-value	Interpretation
Pearson	T1 - PI1	-0.13	0.061	Weak, non-significant
Pearson	T1 - PI2	0.05	0.5	Very weak, non-significant
Pearson	T2 - PI1	-0.07	0.32	Weak, non-significant
Pearson	T2 - PI2	-0.1	0.15	Weak, non-significant

Spearman	T1 - PI1	-0.12	0.08	Weak, non-significant
Spearman	T1 -PI2	0.05	0.51	Very weak, non-significant
Spearman	T2 - PI1	-0.07	0.31	Weak, non-significant
Spearman	T2 -PI2	-0.1	0.15	Weak, non-significant

Key Findings

- **No significant relationship** was observed between trust/financial health (T1, T2) and purchase intention (PI1, PI2), as p-values were all greater than 0.05.
- The direction of relationships is mixed (mostly weak and negative), but none are statistically significant.
- The results suggest that *there is little to no practical association between the trust/financial health items and the purchase intention items.*

Conclusion

This study set out to understand how people's perceptions of an insurer's financial strength and the extra benefits they offer—like added perks or discounts—influence their decision to buy insurance. Based on responses from 200 individuals, we looked closely at two things: how financial health relates to trust, and whether added perks increase the likelihood of someone actually purchasing a policy. Overall, most respondents had a positive view of the insurers—they trusted them and felt the companies were financially stable. They also showed a strong intention to buy or renew insurance. However, when we analyzed the data, we found that even though people trusted financially strong insurers, that trust didn't clearly translate into higher chances of purchasing insurance. Similarly, while respondents appreciated added perks, these didn't significantly influence their actual buying behavior. This suggests that insurance decisions aren't based on just one or two factors. People may also consider how affordable a policy is, how easy the buying process is, how well the insurer handles claims, or even their own attitudes toward risk. These areas may have just as much—if not more—influence on whether someone decides to buy insurance.

In short, while trust and perks play important role but insurers shouldn't rely on them alone. A well studied approach that combines financial transparency, good customer service, digital simplification, and personalized support is likely to work better in winning and keeping customers. At last, this study adds to our understanding of insurance buying behavior and opens the door for further research—especially that how digital tools, personal experiences, and demographic factors affect consumer decisions from time to time.

Future Scope and Potential Findings

Looking ahead, there are lots of exciting opportunities for future research that could throw more light on how people make decisions about insurance. One promising direction is to conduct long-term studies that track how an insurer's financial stability and the additional financial benefits they offer influence customer loyalty and retention over future period years not just in the short term. This could help us understand whether these factors have lasting effects or if their influence fades with time.

1. Understanding Psychological Drivers

While this study focused on financial soundness and perks, future research could explore psychological factors such as risk tolerance, financial literacy, and brand loyalty. These elements might better explain why consumers make certain insurance choices beyond what's visible on the surface.

2. Evaluating Digital Influence

As insurance increasingly moves online, future studies could examine how digital tools—like websites, apps, and AI chatbots—influence trust and buying decisions.

3. Tracking Long-Term Behavior

A longitudinal approach, following customers over time, could help uncover how trust evolves after purchasing a policy. It could also reveal what factors influence renewals or switching to another insurer.

4. Segmented Consumer Analysis

Future research could look at how gender, age, income level, or location (urban vs. rural) affect the way consumers respond to financial health and perks.

5. Role of Claim Experiences

Beyond the buying decision, what really shapes consumer trust is how an insurer handles claims. Including this factor could help paint a more complete picture of customer satisfaction and retention.

References

- Ajzen, I. (1991). The theory of planned behavior. *Organizational Behavior and Human Decision Processes*, 50(2), 179-211. <https://doi.org/10.1016/0749-5978%2891%2990020-T>
- Baranoff, E. G., & Sager, T. W. (2002). The relations among asset risk, product risk, and capital in the life insurance industry. *Journal of Banking & Finance*, 26(6), 1181-1197. <https://ssrn.com/abstract=1087457>
- Berry, L. L. (1995). Relationship marketing of services—growing interest, emerging perspectives. *Journal of the Academy of Marketing Science*, 23(4), 236-245. <https://doi.org/10.1177/009207039502300402>
- Chen, R., Wong, K. A., & Lee, H. C. (2017). Age, period, and cohort effects on life insurance purchases in the U.S. *Journal of Risk and Insurance*, 84(1), 231-259. <https://doi.org/10.2307/2678104>
- Cummins, J. D., & Weiss, M. A. (2014). Systemic risk and the U.S. insurance sector. *Journal of Risk and Insurance*, 81(3), 489-528. <https://doi.org/10.2139/ssrn.2400577>
- Davis, F. D. (1989). Perceived usefulness, perceived ease of use, and user acceptance of information technology. *MIS Quarterly*, 13(3), 319-340. <https://doi.org/10.2307/249008>
- Doherty, N. A., & Tinic, S. M. (1981). Reinsurance under conditions of capital market equilibrium: A note. *Journal of Finance*, 36(4), 949-953. <https://doi.org/10.1111/j.1540-6261.1981.tb04896.x>
- Eling, M., & Luhnen, M. (2010). Efficiency in the international insurance industry: A cross-country comparison. *Journal of Banking & Finance*, 34(7), 1497-1509. <https://ideas.repec.org/a/eee/jbfina/v34y2010i7p1497-1509.html>
- Kim, J., Lee, H., & Jung, J. (2013). Exploring consumer behavior in the financial services market: The role of financial literacy. *Service Business*, 7(4), 453-467.
- Mayers, D., & Smith, C. W. (2010). On the corporate demand for insurance: Evidence from the reinsurance market. *Journal of Business*, 63(1), 19-40. <https://doi.org/10.1086/296481>
- Mittal, V., & Kamakura, W. A. (2001). Satisfaction, repurchase intent, and repurchase behavior: Investigating the moderating effect of customer characteristics. *Journal of Marketing Research*, 38(1), 131-142. <https://doi.org/10.1509/jmkr.38.1.131.18832>
- Sirdeshmukh, D., Singh, J., & Sabol, B. (2002). Consumer trust, value, and loyalty in relational exchanges. *Journal of Marketing*, 66(1), 15-37. <https://doi.org/10.1509/jmkg.66.1.15.18449>
- Taylor, S., & Baker, T. L. (1994). An assessment of the relationship between service quality and customer satisfaction in the formation of consumers' purchase intentions. *Journal of Retailing*, 70(2), 163-178. [https://doi.org/10.1016/0022-4359\(94\)90013-2](https://doi.org/10.1016/0022-4359(94)90013-2)
- Venkatesh, V., & Davis, F. D. (2000). A theoretical extension of the technology acceptance model: Four longitudinal field studies. *Management Science*, 46(2), 186-204. <https://doi.org/10.1287/mnsc.46.2.186.11926>
- Zeithaml, V. A. (1988). Consumer perceptions of price, quality, and value: A means-end model and synthesis of evidence. *Journal of Marketing*, 52(3), 2-22. <https://doi.org/10.2307/1251446>