



Microinsurance policy imperatives – country evidence

Presentation at FSI/IAIS/MIN meeting on microinsurance

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Outline

1. Product analysis

2. Intermediation

3. Health insurance as special case

4. Policy imperatives





1. Product analysis



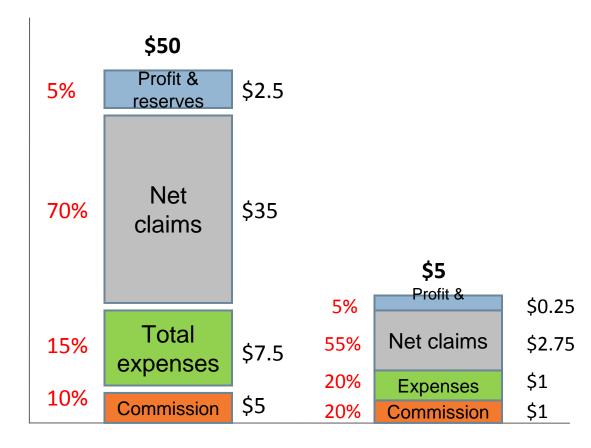


Microinsurance product features

Product & channel	Premium	Cover
Casas Bahia PA (retailer)	\$4 per month	Life: \$333 in 3 monthly grocery baskets PA: \$278 for hospitalisation (double if public transport) Medicine discounts – 50% on each purchase Lottery: \$833
CrediAmigo from Banco de Nordeste (Credit agent/MFI)	\$12.50 per annum – up to 6 modules	Life: \$1500 Funeral: \$420 Lottery: 4 monthly draws worth \$750 each

Microinsurance=micro premiums





Traditional insurance

VS.

Microinsurance

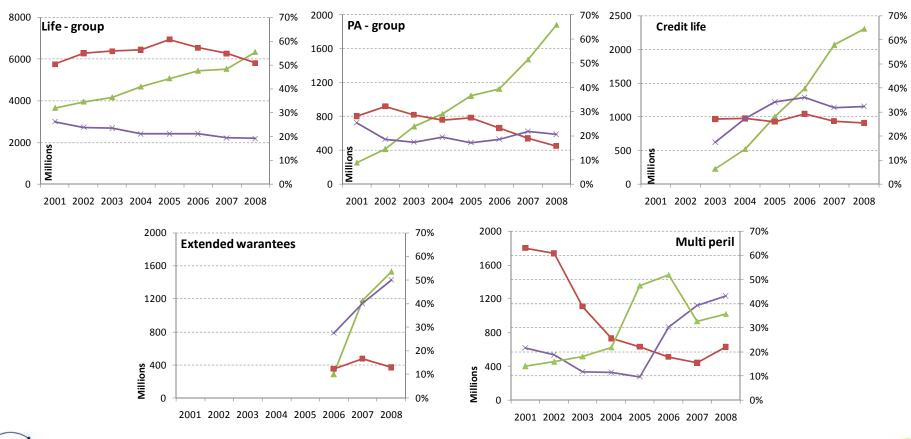




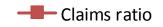
Premiums, claims & expenses

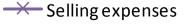
Direct premium

Brazil: Increasing client coverage, decreasing value to consumer



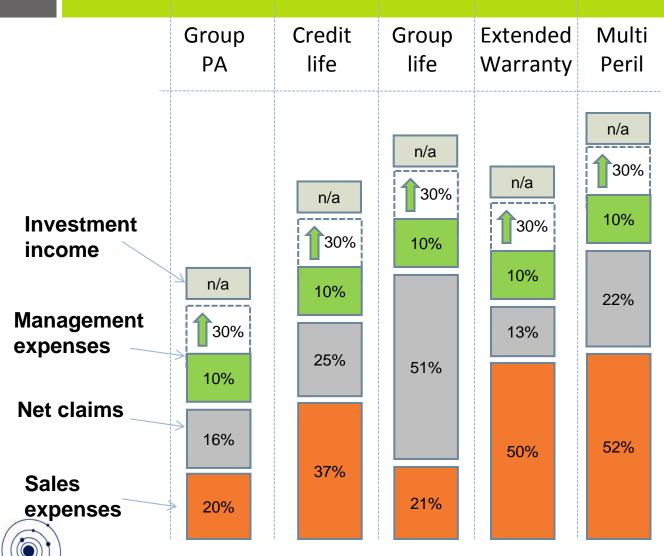






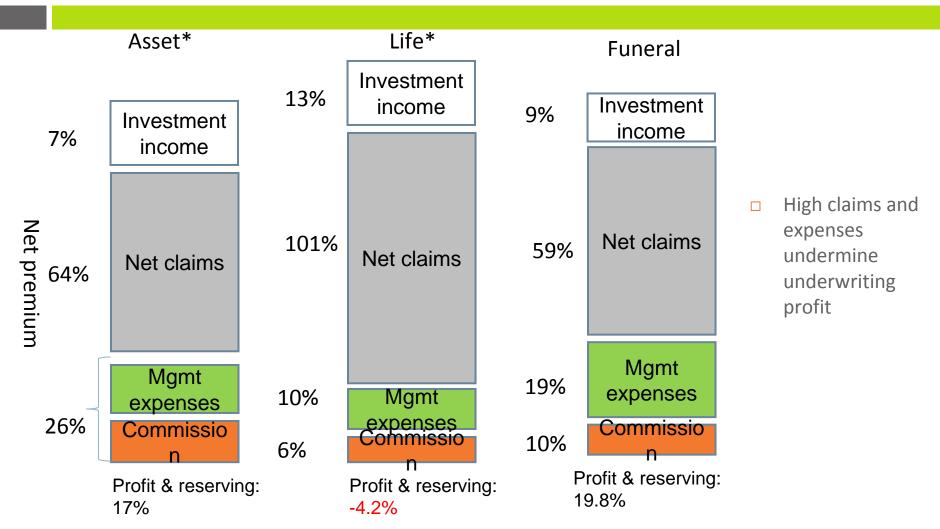


Premium breakdown: Brazil





Premium breakdown: South Africa



Average results for 5 years ending Dec 2008

Source: FSB (2008)

^{*} Based on results for "typical" life or asset insurers defined as those writing business across most product lines



Implications for regulation

- Tight bottom line: minimise regulatory transaction costs
- Facilitate underwriting of composite products avoid strict demarcation
- Try to avoid price controls
- Monitor value to client (supervision) and respond appropriately
 - Product approval
 - Open up underwriting space competition to improve inefficiencies
 - Reduce distribution costs





2. Intermediation



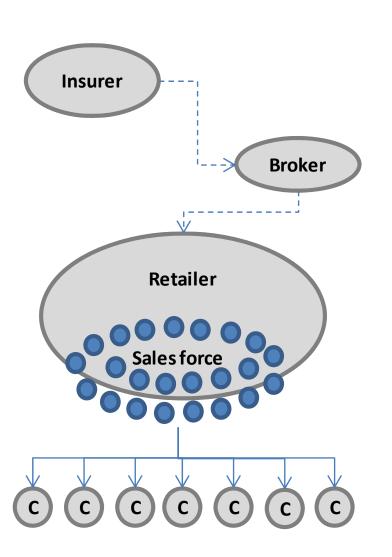


"Microinsurance belongs to the distribution channel."





Retailer model



Roles:

Underwriting
Product development
Training of sales people

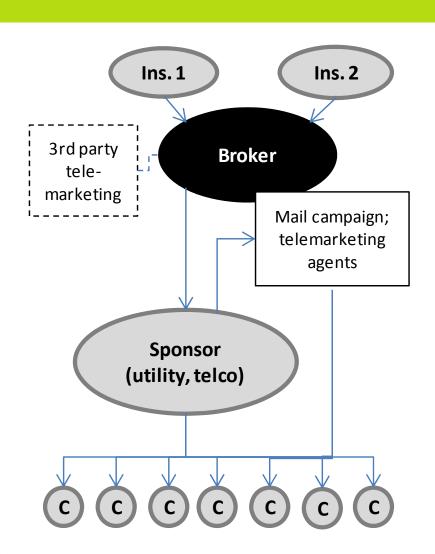
Facilitating relationship Consolidating data

Marketing
Admin
Labour
Product development
Client intelligence
Premium collection





Database selling model



Roles:

Underwriting Product development

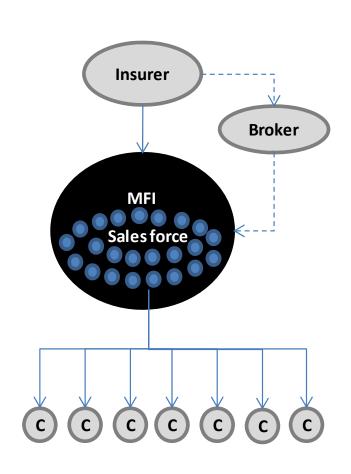
Facilitating relationship
Mining market intelligence
Marketing
Product development
Labour

Database
Premium collection
Admin
Labour





MFI/credit provider channel



Roles:

Underwriting Product development

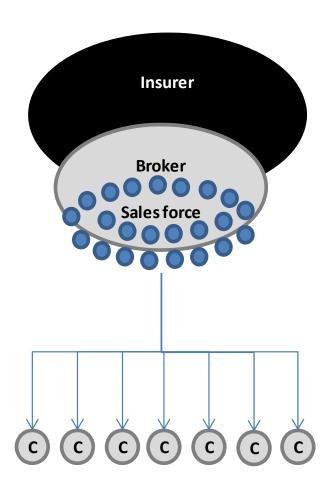
Facilitating relationship Consolidating data

Product development
Marketing
Premium collection & front office
Labour





Door to door sales



Roles:

Underwriting
Product development
Client/market intelligence
Admin

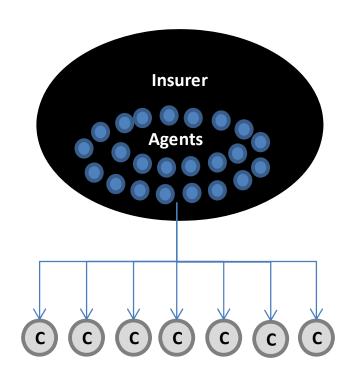
Marketing Labour

Premium collection via correspondents/banks





Door to door sales



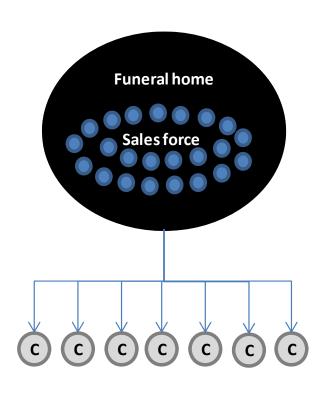
Roles:

Underwriting
Product development
Client/market intelligence
Admin
Marketing
Sales





Funeral home model



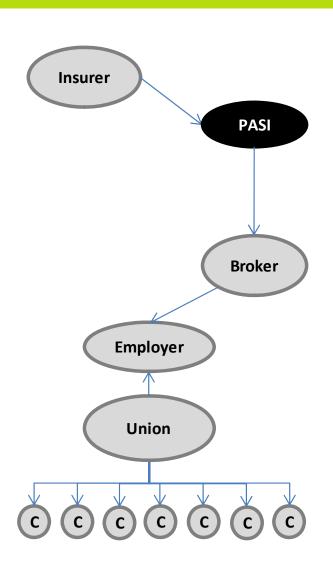
Roles:

Underwriting (though not generally based on insurance principles)
Marketing (via sales force or through funeral homes and cemeteries)
Collection
Claim payment in form of funeral service
May include other benefits "in life"





PASI model (common bond)



Roles:

Underwriting

Estipulante
Product development
Marketing
Claims processing
Admin

Facilitating relationship between PASI and employer Suggesting product modules to employer

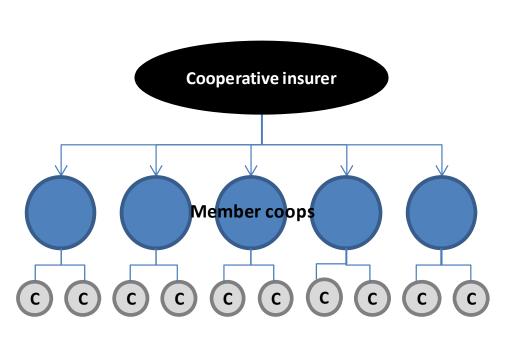
Pays premiums

Puts pressure on co. to provide benefits





Cooperative model (Kenya/Colombia)



Roles:

Underwriting
Product development
Back office

Marketing to members
Premium collection





Implications for regulation

- Facilitate active sales
- Traditional broker/agent model too expensive permit use of "subsidised" sales forces
- Facilitate short distribution channels
- Group underwriting and group distribution
- Ensure suitable balance of power between insurer and intermediary
- Who is accountable to the client?





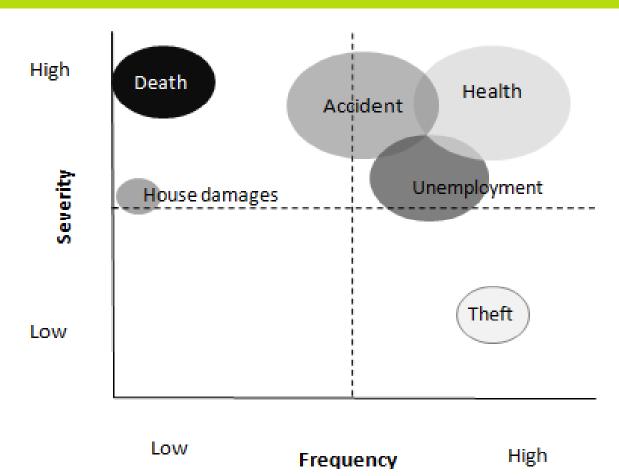
3. Special case of health insurance





Health risks cause financial pain

- Focus groups
 consistently
 highlight high
 potential
 demand for
 health
 insurance
- Health risks rank high in both severity and frequency



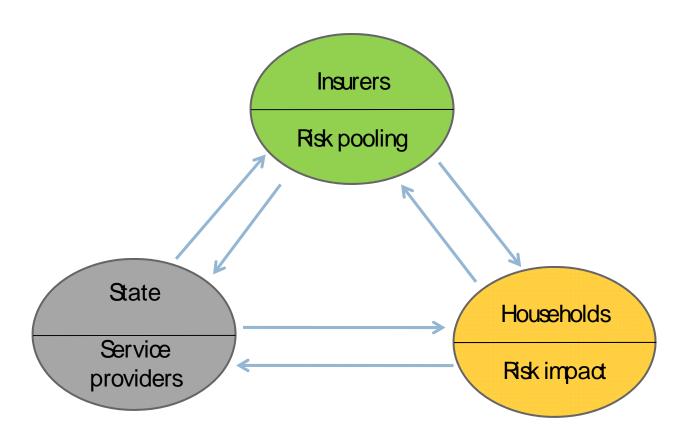
Note: size of bubbles denotes ranking





Health insurance intricately linked to supply of medical services

"Trilateral" insurance relationship:







The extremes of policy responses

Strict minimum
benefits excludes
micro-health, leads to
life insurers pushing
the demarcation
boundaries



Regulatory uncertainty leads to grey areas, unlevel playing field





Implications for regulation

- Do not cut health insurance out of insurance
- Align health insurance with provision of health services
- Be brutal in understanding health financing and curtailing abuses





Understand your market!

Then regulate.

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