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THE FUTURE OF BELONGING

NAVIGATING THE EVOLVING LANDSCAPE OF DEI BENEFITS

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BELONGING REDEFINED

The modern Indian workforce increasingly seeks equitable and inclusive environments that support diverse needs. While many organisations recognise the importance of Diversity, Equity, and Inclusion (DEI) in health benefits, a significant gap persists between policy intent and actual impact. This whitepaper highlights these critical disparities and identifies opportunities for current offerings to better align with the nuanced needs of a diverse and evolving employee base.

By addressing the landscape of LGBTQ+ inclusion, fertility support, holistic women's health, and mental well-being, organisations can move beyond conventional benefits. Embracing these insights empowers companies to ensure that DEI also encompasses people with different needs, ensuring their specific requirements are addressed through specialised organisational benefits. This strategic shift not only enhances employee satisfaction and productivity but also ensures compliance with a dynamic regulatory environment, cultivating a workforce that is valued, engaged, and essential for long-term organisational success.

The Human Face of DEI

Representative Health Journeys in Corporate India

Aarav (26)
The Transgender Professional

Aarav seeks gender affirming surgery and long-term hormone therapy.

"Despite his company's claims of inclusivity, the health policy treats his medical needs as "cosmetic" or "elective," denying coverage."

This disconnect impacts his sense of belonging and long-term retention.

Meera (44)
The Mid-Career Leader

Meera navigates a high-pressure role while managing perimenopause and caring for an elderly parent.

"Her policy has stagnant maternity/caregiver limits and zero coverage for menopause-related care."

This lack of specialised support leads to "invisible" productivity loss and health burnout.

Ananya (31)
The Aspiring Parent

Ananya and her partner require **IVF** after three years of trying.

"Her corporate policy almost universally excludes infertility treatments."

GHI gap means she faces a INR 2.5 Lac out-of-pocket expense per cycle, causing financial stress and potentially forcing a career break.

Siddharth (34)
The Neurodivergent Talent

Recently diagnosed with ADHD, Siddharth seeks specialised behavioral therapy.

"His insurance, however, excludes neurodivergent conditions, labeling them as "developmental" or "pre-existing" disorders."

Without support, he struggles to manage his "cognitive diversity" at work, causing avoidable performance gaps and stress.

Vikram (38)
The Resilient Professional Person with Disability (PWD)

As a wheelchair user, Vikram requires specialised rehabilitative therapy and assistive technology upgrades.

"Standard health and accident plans exclude the assistive devices and long-term rehab essential for his daily function."

Vikram bears high personal costs, highlighting a gap in the company's "accessibility" promise.

Priya (29)
The Chronic Mental Health Advocate

Priya manages generalised anxiety disorder, requiring ongoing therapy and medication.

"While her policy covers in-patient mental health, it lacks scalable OPD riders for therapy and medication refills."

This GHI gap drives high out-of-pocket costs, causing inconsistent treatment and increased stress that impacts her work stability.

GHI - Group Health Insurance | **ADHD** - Adult Attention-Deficit Hyperactivity Disorder | **OPD** - Out-patient Department

The Unaddressed Imperative

Strategic Pain Points in Indian Corporate Benefits

THE INCLUSION-RETENTION DISCONNECT (LGBTQ+)

Inclusive benefits have become a critical talent differentiator; with

90%

of **LGBTQ+** job seekers prioritising health policy over salary[8], organisations with 'paper-only' inclusion risk an immediate exodus of high-potential talent to more progressive peers.

THE MENTAL HEALTH PARITY DEFICIT

A systemic 'out-patient gap' persists where only

17%

of insured individuals in India have access to OPD mental health therapy[1], leaving a vast majority of the workforce vulnerable to burnout and unmanaged stress due to a lack of scalable OPD support.

THE PRODUCTIVITY DRAIN (WOMEN'S HEALTH)

While maternity claims outgo has surged by

25%

in two years[5], stagnant corporate limits are failing to meet actual healthcare costs, resulting in a significant, yet unaddressed, drain on workforce productivity and female talent continuity.

THE FAMILY-BUILDING BARRIER (INFERTILITY)

1 in 5

urban couples are facing infertility[6], the absence of insurance-linked support for advanced treatments like IVF creates a profound retention risk, as employees are forced to choose between career stability and building a family.

THE ACCESSIBILITY CHASM (PWD)

Despite high inclusion rhetoric, PWD representation in India's private sector remains stagnant

at just

0.65%[7]

revealing a strategic failure to tap into the innovation and resilience driven by a truly diverse workforce.

THE CAREGIVER SUPPORT DEFICIT

As the 'sandwich generation' juggles care for children and parents,

only **47%***

of organisations provide structured eldercare support. This gap risks mid-career retention, leaving key talent without the support needed to manage multi-generational caregiving.

The Evolving Landscape of Inclusive Health Coverage

The Indian corporate health insurance sector is moving basic policy inclusion and the depth of coverage for towards inclusive models, yet a disparity exists between critical needs.

LGBTQ+ Inclusion and Gender Affirmation

While organisations have made strides in acknowledging the LGBTQ+ community, the depth of support for gender-affirming care remains a key differentiator.

Aspect	Current Prevalence in Indian Corporates	Top-Tier Plan Features
LGBTQ+ Partner Cover	21%* of organisations include same-sex and live-in partners.	Comprehensive definition of 'dependant' to include same-sex and live-in partners; coverage for adoption and surrogacy.
Gender Affirmation	16%* of firms offering LGBTQ+ cover provide insurance for gender transition. Costs range from INR 1,50,000-5,00,000[14].	Hormone therapy, gender-affirming surgeries, mental health support, and culturally competent provider networks[11].

Fertility Treatments and Family Building

Organisational support for advanced fertility treatments and diverse family-building options lags behind the growing need in India.

Aspect	Current Prevalence in Indian Corporates	Top-Tier Plan Features
Infertility Coverage	While the national infertility average stands at 12%[11], the prevalence in urban centers has surged to 1 in 5 couples. Among organisations, 19% offer basic infertility coverage; 2% comprehensive benefits; 6% surrogacy. Median IVF cost: INR 2,50,000 per cycle[14].	Comprehensive coverage for IVF, IUI, egg/sperm freezing, surrogacy, and adoption support.
Family Preservation	Basic diagnostics may be covered, but comprehensive support for advanced reproductive technologies like egg/sperm freezing is rare.	Fertility preservation (e.g., for cancer patients) and progressive insurance-linked fertility support[11].

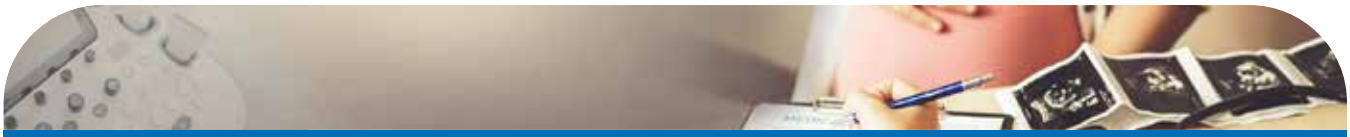
Mental Well-Being and Neurodiversity

Mental health coverage often lacks parity with physical health, and support for neurodevelopmental conditions like Autism remains nascent.

Aspect	Current Prevalence in Indian Corporates	Top-Tier Plan Features
Mental Health Coverage	Pooled prevalence of depression is 12.4% and anxiety disorder is 11.6% in India[15]. While only 17% of insured individuals currently access OPD therapy[1], corporate adoption is rising with 8%* of organisations now opting for specialised psychiatric OPD riders.	Mental health is treated on par with physical health | Prioritises standalone OPD riders (no IPD trigger) | Culturally competent providers[11].
Neuro-diversity (Autism)	Excluded from most private insurance | Specialised support is available in only 5%* of programs.	Comprehensive diagnostic and therapy coverage for neurodivergent conditions | Cognitive diversity is a strategic driver of innovation[16].

Maternity, Women's Health, and Caregiver Support

Maternity benefits are widely offered, but the depth of coverage for pre and post-natal care, as well as maternity-related complications, often falls short of actual needs.



Aspect	Current Prevalence in Indian Corporates	Top-Tier Plan Features
Maternity Coverage	• **Rising Costs:** Claims increased by 37% in FY26, while outgo rose by 25% over two years[5] • **Coverage Gap:** Median limits are at INR 50,000 (normal delivery)/INR 60,000 (C-section)* | Only ~3% offer >INR 1 Lac, ~15% align with actual costs (INR 1,00,000–1,25,000)[5] • **Emerging Trends:** 17%* of organisations now cover maternity complications up to the full sum insured	Standard offerings are often insufficient. Top-tier plans offer comprehensive pre/post-natal care, postpartum mental health support, and caregiver benefits, including eldercare (47%)*, women & childcare (79%)*, and childcare (35%)*, via flex insurance models.
Women's Health Crisis	• **Anaemia Crisis:** 56.2% of women of reproductive age are anaemic[2] | Prevalence among working women is ~41.7%[17] • **Workforce Impact:** Women's labor force participation is 31%[12] | Conditions like anaemia and PCOD impact cognitive performance and retention	The anaemia crisis impacts cognitive performance. Robust gender-specific health benefits, including support for PCOD, are offered by 44%* of firms with flex programs.

Disability Cover

Organisations in India are slowly evolving their approach to disability inclusion, but significant gaps persist between disability inclusion policy and practice.

Aspect	Current Prevalence in Indian Corporates	Top-Tier Plan Features
PWD Representation	Average representation is **0.65%; 37.9%** of listed companies have zero permanent PWD employees[7].	Focus on function and quality of life, including assistive technology, specialised rehabilitation, and workplace accommodations[7].

The Regulatory Horizon

Catalysts for Change

The Indian regulatory landscape is mandating structural transparency and inclusive benefits, transforming DEI from a discretionary choice into a strategic imperative.

IRDAI GUIDELINES	STRATEGIC IMPACT
Updated IRDAI guidelines now require insurers to provide coverage for mental health, disabilities, surrogacy, and transgender health needs without discrimination[9]. These guidelines mandate that health insurance policies must offer the same level of coverage for mental illnesses as they do for physical illnesses, ensuring parity in treatment and support.	These shifts from “elective” to “mandated” coverage directly impact the depth and inclusivity of GHI schemes. Organisations are now compelled to ensure their benefit plans are not only compliant with IRDAI mandates but also proactively foster an inclusive culture that addresses the diverse health needs of their entire workforce.

Current Offerings & Corporate Checklist

Navigating the GHI Market

As of 2026, the Indian GHI market is responding to DEI needs with specialised riders and expanded policy definitions. However, the maturity of these offerings varies significantly across insurers.

WHAT CORPORATES ARE OFFERING TODAY		THE DEI CHECKLIST
Progressive organisations now allow "partner" for same-sex and live-in couples, though documentation requirements vary by insurer[11].	**Inclusive Eligibility**	Does the GHI policy explicitly define "partner" to include same-sex and live-in relationships?
Selected organisations offer maternity limits aligned with private hospital costs.	**Maternity Parity**	Are maternity limits aligned with current private hospital costs (minimum of INR 1,00,000 is recommended)[5]?
Most corporates offer scalable OPD riders for group policies, critical for recurring therapy costs.	**OPD Mental Health**	Does the GHI plan include a specific OPD rider for mental health therapy sessions?
Organisations increasingly offer Gender Affirmation Surgery (GAS) riders[11], but comprehensive care including hormone therapy remains rare[13].	**Gender Affirmation**	Does the IPD coverage include surgical procedures for gender transition, and are pre-operative OPD costs covered?
Most corporates exclude neurodivergent conditions; specialised support is available in only 5%* of corporate programs.	**Neurodiversity Support**	Does the GHI policy cover diagnostic assessments and behavioral therapies for neurodivergent employees or their dependants?

The Prudent Advantage

Strategic Imperative

The transition toward inclusive health architectures represents a fundamental shift in how organisations value their most vital asset - their people. In a rapidly evolving corporate landscape, architecting benefits that resonate with the lived realities of a diverse workforce is the ultimate driver of resilience. By moving beyond conventional frameworks to proactively address these critical gaps, organisations do more than ensure compliance - they unlock the full potential of their human capital, building a culture of belonging that attracts and retains top talent.

Prudent, leveraging its proprietary data analytics and specialised services like Benefits Benchmarking across industries and expertise in flex insurance models, stands ready to guide organisations in navigating this complex landscape. By partnering with Prudent to design curated DEI benefit plans, organisations can transform their strategies into proactive, data-driven initiatives that foster a truly equitable and supportive workplace.

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Note: Asterisk (*) denotes Prudent proprietary internal data from a database of 4,300+ organisations.

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