

Benefits **edge**

KNOWLEDGE SERIES



THE GUT HEALTH IMPERATIVE

FOOD QUALITY, WORKPLACE HEALTH & CORPORATE INDIA

EDITION **17**

Oct, 2026

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Executive Summary

Digestive Health, Food Quality & The FSSAI Imperative

Across corporate India, digestive health is emerging as a measurable, and growing, workforce risk. Indian population studies indicate a substantial burden of gastrointestinal symptoms, from acid reflux² and dyspepsia³ to functional **Gastrointestinal (GI) disorders**⁴, while unsafe food and water⁵ remain an established cause of acute gastrointestinal illness. FSSAI's own surveillance data⁶ shows that a measurable share of food samples in India fail prescribed standards.

Corporate India claims experience reviewed in this paper confirms this is not just a clinical pattern but a cost and productivity one: digestive illness holds a persistent, and rising, share of the employee healthcare bill.

That surveillance matters to employers because workplace food, from cafeterias to vending, sits within the same supply chain. FSSAI's regulatory framework⁸ provides an important foundation by setting standards for food

safety and governing food-related labelling and health claims. A preventive-health approach, one that leading gastroenterologists in India⁹ similarly emphasise adds nutrition, hygiene and healthy behaviours alongside medical care. The opportunity for employers is to look beyond treatment, to the food environment and everyday behaviours that shape preventable digestive-health risk.

INDIA | THE FOOD-QUALITY SNAPSHOT

~1 in 5⁶ (20%)

Food samples tested were non-conforming with prescribed standards (34,388 of 1,70,535), FY 2024-25

38.3%⁷

Milk and milk-product samples non-conforming (12,780 of 33,405), FY 2024-25 Paneer: 72.7%¹⁰ non-compliant (371 of 510), FSSAI 2020 survey

11.7%¹¹

Spice samples failing quality or safety parameters (474 of 4,054), May-July 2024, per FSSAI data reported by Reuters

FOOD SAFETY ➤ GI HEALTH

Unsafe food and water are established causes of **acute gastrointestinal illness**

THE FSSAI CONNECTION

SAFE FOOD ➤ BETTER CHOICES ➤
HEALTHIER BEHAVIOURS ➤ EARLIER CARE

What Is FSSAI?

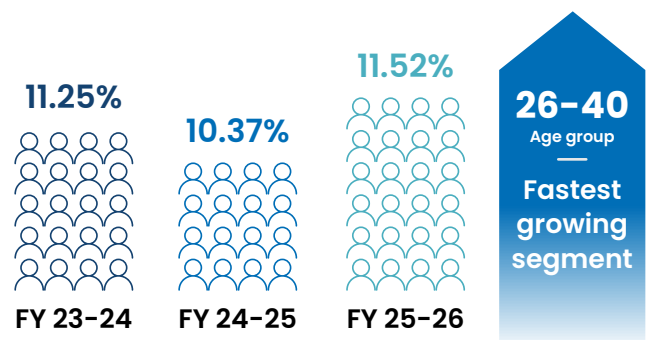
FSSAI (Food Safety and Standards Authority of India) is India's apex food regulator under the Ministry of Health & Family Welfare. It sets food-safety standards, licenses food businesses including workplace cafeterias, caterers and vending operators and governs food labelling and health claims, ensuring they are truthful and not misleading.



What The Employee Claims Reveal

For corporate India, digestive illness is no longer a marginal line in the employee healthcare bill. It is a persistent, and growing share of the claims book. Over the three-year claims experience, digestive-health claims have held a steady share of overall volume, while the average cost per claim has kept climbing, placing rising pressure on both employee well-being and healthcare spend¹

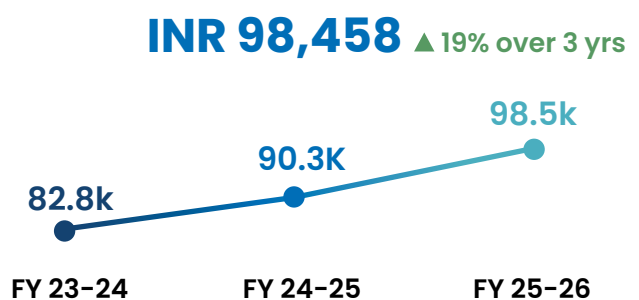
DIGESTIVE SHARE OF EMPLOYEE CLAIMS (Prevalence)



1 in 9

employee claims is for digestive ailments – and the average claim is up 9% in three years.

AVERAGE DIGESTIVE CLAIM



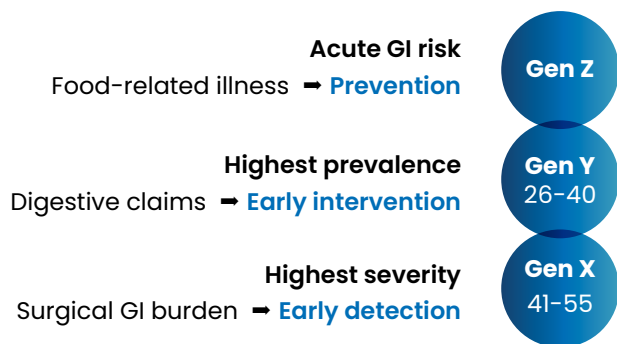
¹Sourced from Prudent's claims data

Digestive claims show a clear **frequency-to-severity shift**: claim frequency is highest among **26-40-year-olds**, while severity rises among 41+, with more chronic and surgical conditions. This age-wise progression highlights the need for **targeted prevention, healthier workplace food environments and FSSAI-aligned interventions**, making GI health a growing workforce well-being priority.



Age & Lifestyle: Where The Risk Is Concentrated

GI Risk Evolves Across Generations



KEY TAKEAWAYS

Acute ► Prevalent ► Severe

The generation-wise pattern shows a clear **frequency-to-severity shift**—from acute, food-related GI illnesses in younger employees to **higher prevalence in Gen Y and greater chronic and surgical burden in Gen X**. This highlights the need for age-specific prevention and early intervention across the workforce.

Employers can act through **healthier workplace food choices, hydration, fibre and nutrition awareness, and stronger food-safety practices aligned with FSSAI's Eat Right principles**. Prudent can translate claims intelligence into targeted action through **risk segmentation, cafeteria and food-safety audits, care pathways and outcome tracking**, helping move from claims management to proactive prevention.

The Productivity Equation

7.2 Days
Average productive
workdays lost per
digestive-health claim

49,961 productive
employee weekdays lost
in FY 2025-26— rising from
46,642 in FY 2024-25



The true cost of
digestive illness
extends beyond
the claim amount.

Healthcare expenditure captures only part of the burden.

Digestive health is not just a medical issue but a productivity risk. Every claim translates into lost work time, making prevention as important as treatment.

The actual impact may be higher because claims and absence data do not fully capture **presenteeism**—employees who remain at work while experiencing pain, fatigue or gastrointestinal symptoms.

The prevention objective should therefore extend beyond reducing claims. It should focus on **earlier care, fewer severe or recurrent episodes and fewer productive days lost**.

This creates a direct link between digestive health and workforce productivity.

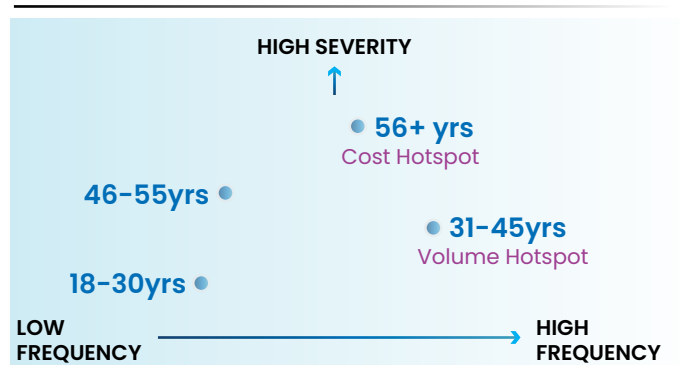
The Family Risk Is Different

The employee and dependant experience presents two different risk profiles.

While employees and spouses aged **31–45 years** contribute significant claim frequency, higher-severity digestive claims are more evident among **older dependants, particularly those aged 56 years and above**.



WHERE THE RISK CONCENTRATES



Ages 31–45

Employees and spouses drive claim frequency: gallstones, gastritis, haemorrhoids, fissures, hernias.

Ages 56+

Older dependants drive severity—calling for screening, chronic-condition management and specialist access.

FREQUENCY PEAKS

Focus: workplace food, nutrition, hydration, activity, early OPD access.

SEVERITY PEAKS

Focus: screening, chronic-condition management, specialist-care access.

This calls for differentiated benefits.

For employees, the focus can be on **workplace food, nutrition, hydration, physical activity and early OPD access**.

For employees with ageing dependants, greater emphasis may be placed on **preventive health, chronic-condition management, appropriate screening and specialist-care access**.

The family dimension matters because workplace interventions cannot fully influence the household food environment. Family-oriented benefits therefore need to complement workplace prevention.

**Sourced from Prudent's claims data*

Why FSSAI Matters To Employers

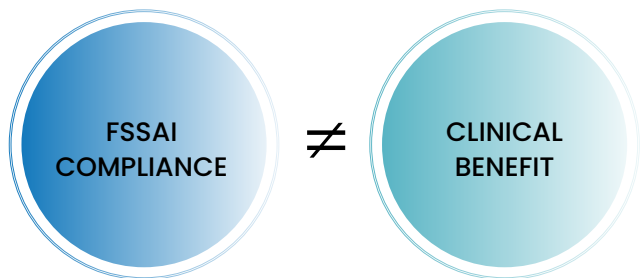


Food safety is traditionally viewed as a responsibility of food businesses. For employers, however, cafeterias, caterers, vending and workplace events create a workplace food ecosystem.

FSSAI provides the regulatory baseline for food safety, standards, labelling and food-related claims. Its Advertising and Claims Regulations⁸ require food-related claims to be truthful, meaningful, unambiguous and not misleading.

This becomes particularly relevant as workplace wellness programmes increasingly use products and messaging around “gut health”, probiotics and digestive support.

The distinction is critical:



A compliant food product should not automatically be presented as preventing or treating gastritis, reflux, IBS, IBD or other medical conditions.

3 Checks for Employers

1

Is the food safe?

FSSAI compliance | hygiene | handling

2

Is the nutrition credible?

Accurate labels | transparent information

3

Is the health claim evidence-based?

Scientific support | regulatory backing

The opportunity: Move from **food compliance to healthier employee choices** through FSSAI-aligned food environments, credible nutrition and evidence-based interventions.

From Awareness To Environmental Design



Digestive health cannot be reduced to food alone. However, clinical evidence supports the role of diet as one component of gastrointestinal health.

The Asian Working Group¹² guidelines on diet and inflammatory bowel disease recognise the role of diet in IBD and discuss changing dietary patterns across Asian populations.

For employers, the implication is not that a cafeteria menu can prevent gastrointestinal disease. It is that the workplace food environment can support healthier behaviour.⁶

This means moving beyond “eat healthy” campaigns towards:

- **Healthier cafeteria menu design**
- **Greater visibility of nutritious meal options**
- **Hydration-friendly workplaces**
- **Portion-awareness initiatives**
- **Food-labelling transparency**
- **Employee education on reading nutrition labels**
- **Periodic cafeteria hygiene audits**
- **Monitoring of food handling and storage practices**
- **Vendor compliance reviews**
- **Safer workplace food ecosystems**

The goal is not to prescribe a single “gut-health diet”, but to make healthier choices easier and more sustainable.

The Five-Pillar Employer Action Plan



The data highlights a strategic opportunity for employers to reposition digestive health from a claims-management issue to a workforce-risk management priority. The burden extends beyond medical costs, influencing productivity, employee well-being and long-term healthcare spend. Addressing these risks requires a coordinated approach spanning food safety, nutrition, early intervention, behaviour change and continuous measurement. The five pillars below provide a practical framework for improving workforce health outcomes while supporting productivity and healthcare-cost sustainability.



01 | Food Safety & Vendor Governance

Strengthen FSSAI-aligned vendor governance through **licensing checks, hygiene audits, water and storage controls, incident reporting and corrective-action tracking.**



02 | Access to OPD & Early Care

Make primary-care and gastroenterology **OPD access easy and affordable**, supported by teleconsultation and referral pathways for persistent or recurrent symptoms.



03 | Nutrition & Healthier Food Environments

Integrate qualified nutrition support into wellness programmes and improve cafeteria choices around **meal balance, fibre, hydration, portion awareness and transparent food information.**



04 | Behaviour Change, Not Just Awareness

Turn education into everyday actions—**hydration, healthier food choices, regular meals, movement and timely care-seeking**—using workplace nudges and healthier defaults.



05 | Measure, Learn & Target

Track **digestive-claim prevalence, average severity, repeat episodes and productive days lost**, and overlay these with vendor performance, cafeteria exposure, OPD utilisation and employee feedback.

THE EMPLOYER MODEL

SAFE FOOD



HEALTHIER CHOICES



EARLIER CARE



BEHAVIOUR CHANGE



MEASURABLE
OUTCOMES

.....

The opportunity is to move digestive health from a **wellness campaign to an integrated workforce-risk strategy.**



From Health Risk Intelligence to Workforce Well-being



Combining claims intelligence, health-risk consulting and regulatory advisory helps organisations identify emerging risks and turn them into targeted preventive action.

At Prudent, this is where our claims data becomes a client advantage. Key interventions include:

We work with clients to design and run:

- Cafeteria & food-vendor audits
- FSSAI-aligned food safety & governance
- Nutrition, hydration & healthy-eating programmes
- Health-risk assessments & workforce dashboards
- Well-being programme design & outcome tracking

Connecting insights to action helps our clients move beyond claims management towards healthier workplaces and measurable well-being outcomes.

HEALTH RISK CONSULTING



REGULATORY ADVISORY



INNOVATIVE WELL-BEING SOLUTIONS



MEASURABLE OUTCOMES

Prudent's benefits consulting team can help translate this data into a tailored action plan for your organisation — from a claims-driven risk review to cafeteria audits and an FSSAI-aligned well-being roadmap. Speak to your Prudent relationship manager, or write to benefitsconsulting@prudentbrokers.com, to get started.

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