



Benefits

edge

KNOWLEDGE SERIES



INDIA INC'S WORKFORCE HEALTH

CLAIMS VOLUME TO HEALTH BURDEN

EDITION **11**

Feb, 2026

www.prudentbrokers.com



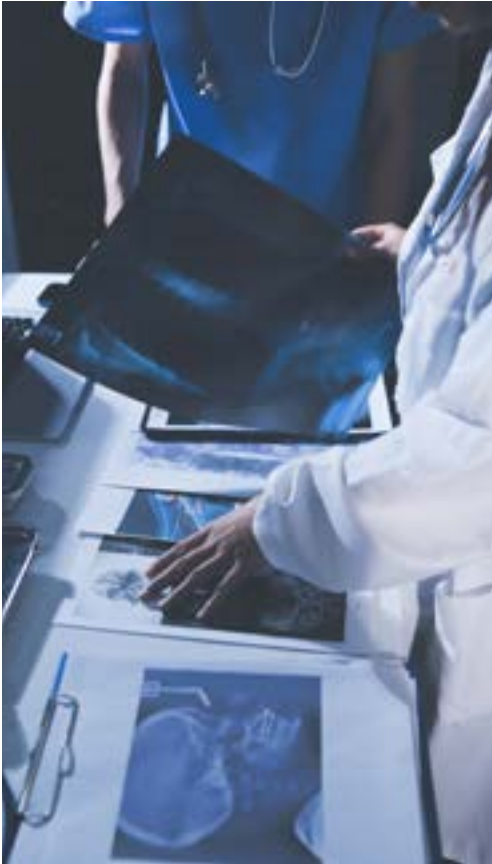
Executive Summary

India Inc's workforce health profile reflects a complex intersection of communicable diseases, lifestyle-driven conditions, and emerging chronic risks. Analysis of over 1,00,000 health insurance claims across 1,000 organisations reveals that while infectious, genitourinary, and digestive diseases continue to dominate claim volumes, the underlying risk profile of the workforce is undergoing a critical shift.

Global health evidence reinforces this transition. According to the Global Burden of Disease (GBD) study, as visualised by Our World in Data², age-standardised Disability-Adjusted Life Years (DALYs) attributable to

communicable, neonatal, maternal, and nutritional diseases have declined steadily over the last three decades. However, these conditions continue to impose a significant health burden in regions such as South Asia, reflecting persistent exposure, environmental factors, and health system gaps.

Within corporate India, this macro trend manifests as a dual challenge: high-frequency communicable claims on one hand, and rapidly rising non-communicable and chronic conditions on the other, increasingly affecting younger employees.



Purpose of This Analysis

This report examines workforce claims data through a burden-of-disease lens to understand:

- How health risks evolve across age and gender
- The shift from volume-driven claims to severity-driven burden
- Emerging priorities such as reproductive health, chronic disease, and early cancer risks

The following sections translate claims data into actionable insights, highlighting how organisations can move from reactive claims management toward lifecycle-based workforce health strategy.

The Changing Health Reality of India Inc.

Workforce health is undergoing a structural shift, from acute illness management to long-term health risk management. Global evidence reflects this transition clearly. According to Our World in Data² and the Global Burden of Disease (GBD) study³:



Non-communicable diseases account for **~74%** of global deaths, highlighting the growing dominance of chronic conditions.



Years lived with disability have increased by over **40%** since 1990, indicating rising productivity loss from long-term illnesses rather than mortality alone.













In South Asia, communicable diseases still contribute over **one-quarter of total** disease burden, creating a simultaneous acute and chronic health challenge.



Women's health trends further reinforce this shift. The World Health Organisation estimates that **1 in 6** adults globally experience infertility⁴, while breast cancer is now the most commonly diagnosed⁵ cancer worldwide, affecting women increasingly during working years.

Key Findings:

Comprehensive Health Risk Landscape

PARAMETERS	Claims prevalence	Average claim size (INR)	Key ailments	Average loss of productive days
 Infectious	13.9%	64,592	Malaria Dengue fever Sepsis Hepatitis B Typhoid fever	3.8
 Genitourinary	13.4%	1,18,176	Chronic Kidney Disease (CKD) Urinary Tract Infection (UTI) Infertility Bladder Calculus Nephritic Syndrome	6.7
 Digestive	11.9%	98,042	Acute Pancreatitis Acute Gastritis Appendicitis Hernia Fatty Liver	4.0
 Injuries	8.7%	1,61,578	Fracture Injury of blood vessels Injury of scalp	4.2
 Respiratory	5.5%	96,608	Lower Respiratory Infection Bronchopneumonia Streptococcal Tonsillitis Chronic Tonsillitis Mild Intermittent Asthma	3.8
 Circulatory	5.3%	1,95,855	Atherosclerotic Heart Disease Unstable Angina Hypertension Heart Failure Cardiac Arrest	4.2
 Eye Disorders	4.8%	70,577	Cortical Age-Related Cataract Retinopathy Retinal Detachment Hypermetropia Pterygium of Right Eye	1.7
 Neoplasm	4.6%	3,54,008	Breast Uterus (Leiomyoma) Thyroid Gland Prostate Right Ovary	8.9
 Musculoskeletal	4.0%	1,18,577	Osteoarthritis Rheumatism Staphylococcal Arthritis Disc Disorders Hemarthrosis	5.7
 Skin	1.8%	78,825	Cellulitis Sebaceous Cyst Dermatitis Ganglion Cyst	3.7

Note: Analysis based on claims data from Apr 2024–Mar 2025, covering 1+ lac employee claims; workforce demography comprised 80% male and 20% female employees.

Key Findings:

Employee Health Lifecycle Heatmap

Age Band		19-35	36-45	Above 45 years		19-35	36-45	Above 45 years
Infectious	Male Employees	51.4%	19.0%	7.10%	Female Employees	18.4%	3.0%	1.1%
Genitourinary		36.6%	20.2%	10.10%		23.5%	7.5%	2.0%
Digestive		41.1%	25.3%	11.90%		16.1%	4.4%	1.2%
Injuries		56.3%	21.7%	9.90%		8.9%	2.2%	0.9%
Respiratory		41.4%	22.6%	12.20%		18.7%	3.6%	1.5%
Circulatory		27.0%	33.0%	31.60%		3.9%	2.7%	1.9%
Eye Disorders		26.3%	16.1%	35.10%		15.1%	2.4%	5.0%
Neoplasm		19.4%	17.6%	23.70%		18.8%	14.2%	6.2%
Musculoskeletal		38.1%	26.2%	14.40%		14.3%	4.9%	2.0%
Skin		45.9%	20.3%	12.80%		16.1%	3.9%	0.9%

Note: 1. Claims contribution – Male: 77% | Female: 23%.
2. Bold formatting is used to emphasise notable patterns observed across gender and age

Workforce Health Risk Overview & Strategic Implications

Workforce claims show a clear volume–severity trade-off and a shifting chronic risk profile. High-frequency conditions infectious (13.9%), genitourinary (13.4%), and musculoskeletal (4%) drive absence and sustained productivity loss, with genitourinary and infertility-related cases rising.








Lower-incidence but high-cost conditions, especially cancer (ACS INR 3.5 lac), create the greatest long-term impact breast cancer among women and cardiovascular disease (ACS INR 1.95 lac) among men stand out. Meanwhile, younger employees face rising mental health and lifestyle-driven risks, while older groups shift toward chronic, screening-sensitive diseases.

The takeaway:

Proactive, lifecycle- and gender-responsive prevention is essential to protect productivity and turn health management into a strategic advantage.

Priority Ailment Deep Dive

From Claims to Priority Focus

Ailment Category	Key Observations	Focus Areas
 Cancer (Neoplasms)	Rising incidence among younger females; high cost and long-term impact	Workplace screening, early detection, genetic counseling, psychosocial support
 Musculoskeletal Disorders	Rapidly increasing among younger employees; chronic productivity loss	Ergonomics, physical activity programs, early intervention
 Injuries	Concentrated in younger males; safety and commuting risks	Stronger safety protocols, training, injury management
 Circulatory Disorders	High-cost claims among older employees	Cardiovascular screening, lifestyle coaching, chronic care pathways
 Respiratory Conditions	High-cost claims among older employees	Pollution- and lifestyle-driven; absenteeism impact
 Digestive & Genitourinary Disorders	High prevalence in younger workforce	Health education, nutrition support, specialist access
 Infectious Diseases	Vaccine-preventable and seasonal infections impact attendance	Immunisation, infection awareness campaigns, early diagnosis

Strategic Implications for India Inc.

Global disease burden evidence shows that years lived with disability increasingly outweigh years lost to mortality, especially from non-communicable diseases. For organisations, this means the true cost of ill-health lies not just in hospitalisations—but in chronic productivity loss, presenteeism, and long-term disengagement.

Key Recommendations

Preventive Care

- Integrate immunisation, infection control, nutrition, mental health, and lifestyle risk reduction within structured OPD programs for early access and continuity of care.
- Reduce workplace MSK and injury risks through ergonomics and safety interventions.
- Embed gender-sensitive screening and reproductive health support.

Secondary Care

- Implement lifestyle management programs targeting obesity, hypertension, diabetes, and tobacco use.
- Establish structured disease management pathways for cardiovascular, respiratory, MSK, and cancer risks.

Insurance Programs

- Ensure robust IPD, critical illness, and advanced treatment coverage.
- Offer flex benefits and top-up plans, leveraging claims analytics to optimise financial protection.

How We Add Value

Transforming Claims Insights into Outcomes

As organisations navigate an evolving workforce health landscape, the focus must shift from retrospective claims management to forward-looking risk anticipation, productivity protection, and workforce resilience. The real value of data lies not in reporting costs, but in predicting risk, identifying patterns early, and enabling smarter benefit design.

At Prudent, we convert complex claims data into clear, actionable intelligence. Our **organisation-specific claims analytics, health risk assessments, and claims benchmarking reports** help employers understand their unique risk profile in the context of industry trends, demographic shifts, and utilisation patterns. We identify top cost drivers, emerging disease burdens, high-risk cohorts, and gaps in preventive care through rigorous, data-driven analysis.

Beyond insights, we provide structured solutioning frameworks, translating findings into targeted interventions, preventive strategies, and risk-aligned benefit optimisation. Our approach enables organisations to move from reactive cost containment to proactive health risk management, strengthening workforce well-being while protecting long-term productivity and financial sustainability.

For customised claims analysis, benchmarking, and strategic health insights tailored to your organisation, write to us to explore solutions designed around your workforce needs.



Sources:

1. Prudent Claims Database
2. Our World in Data – Causes of Death and Disease Burden Analysis, <https://ourworldindata.org/causes-of-death>
3. Institute for Health Metrics and Evaluation – Global Burden of Disease Study, <https://www.healthdata.org/gbd>
4. World Health Organisation – Infertility Prevalence Estimates (2023), <https://www.who.int>
5. International Agency for Research on Cancer – GLOBOCAN Cancer Statistics, <https://gco.iarc.fr>



www.prudentbrokers.com

For more information, please contact:
benefitsconsulting@prudentbrokers.com

PRUDENT INSURANCE BROKERS PVT. LTD. (Composite Broker)

Certificate of Registration IRDAI No. 291 & IFSCA No. 017 (Validity: 18th February 2026 to 17th February 2029)

Registered office at 1st Floor, Tower B, Peninsula Business park, G.K. Marg, Lower Parel, Mumbai – 400013, Maharashtra,
Tel : +91 22 3306 6000 | CIN No.: U70100MH1982PTC027681

Insurance is the subject matter of solicitation.

Disclaimer: Prudent Insurance Brokers Pvt. Ltd. (herein referred as Prudent) is the Composite Broker registered with IRDA of India and does not underwrite the risk or act as an Insurer. Prudent team provides Insurance, Re-insurance, and Risk management & Claim Consulting services as permitted under applicable law. This document is for information and illustrative purposes only and does not constitute an offer, solicitation, or recommendation to purchase any insurance product or benefit. We have used what we believe are reliable, up-to-date and comprehensive information and analysis, but all information is provided without warranty of any kind, express or implied, and we disclaim any responsibility for such information or analysis or to update the information or analysis in this report. For more details on benefits, exclusions, limitations, terms and conditions, please read the sales brochure/policy wording carefully before concluding a sale with the respective Insurance companies. All claims under the policy will be solely decided upon by the Insurance/Re-insurance company.