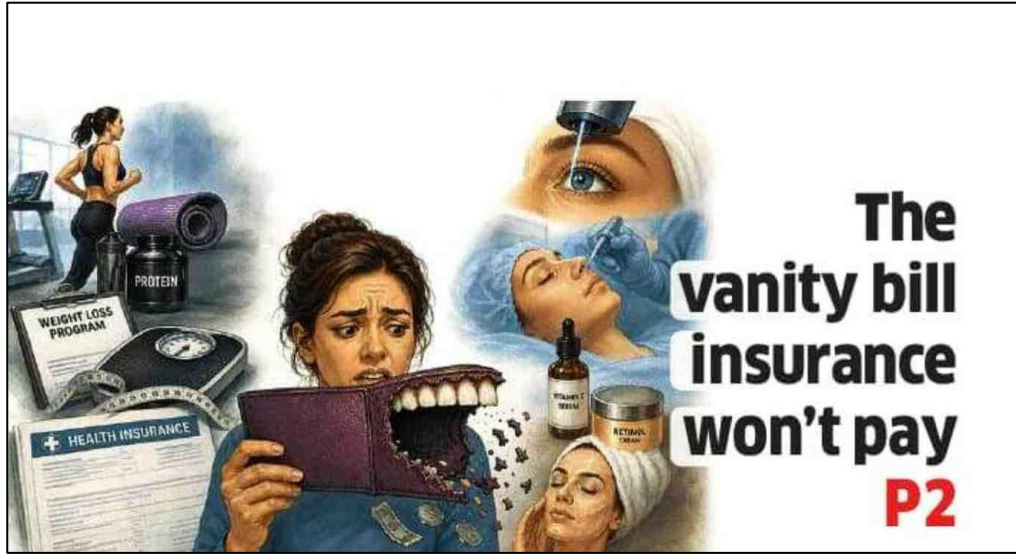


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The vanity bill insurance won't pay

The pursuit of a slimmer body, sharper vision or younger-looking skin can take a sizeable bite out of your wallet. Even when cosmetic procedures involve surgery, health insurance often doesn't pay.

by Preeti Kulkarni

Miranda Priestly would approve of the makeover. Your health insurer won't. Weight-loss drugs, skin-lifting procedures, Botox, LASIK (Laser-Assisted In Situ Keratomileusis) surgery, smile makeovers—the quest for a newer, better version of oneself is fuelling a growing category of out-of-pocket spending.

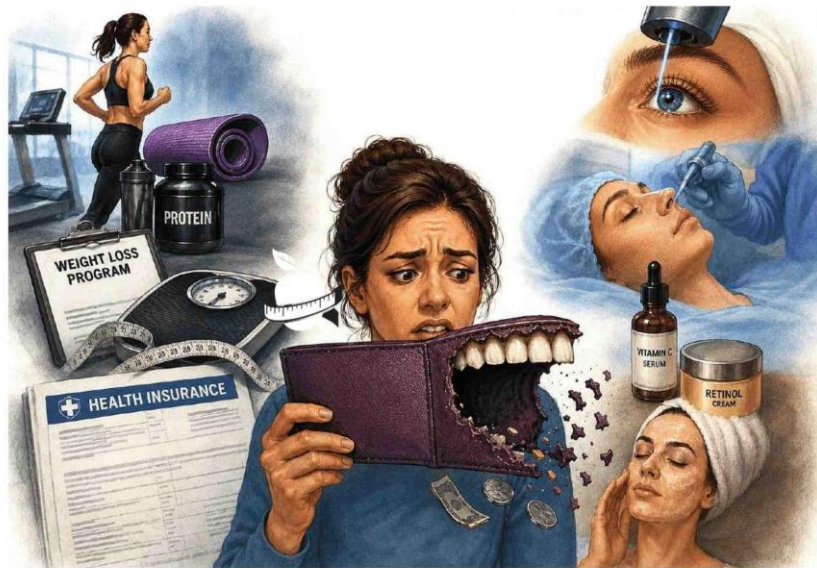
The desire to enhance one's appearance has always been in vogue, but it is no longer the exclusive preserve of the glamour industry. Aspirational Indians sold on the concept of YOLO (you only live once) are not hesitating to make the most of what medical science has to offer—lose weight, sculpt their bodies, shed years from their skin, brighten their teeth, sweeten their smile, and so on. "We are entering an era where obesity medicine, metabolic health and aesthetic medicine are converging into one large wellness economy," says Mumbai-based diabetologist, Dr Rajiv Kovil.

As per an IMARC Group research report, medical aesthetics market size in India was valued at \$650.7 million (close to ₹ 6,200 crore) in 2025 and is expected to reach \$1,334.3 million (nearly ₹12,700 crore) by 2034. Some medical interventions fall in the grey zone, between clinical necessity and cosmetic enhancement. While wellness procedures may reduce health risks and improve both appearance and quality of life, they are rarely covered by traditional health insurance.

The costs of such treatments can be substantial and are rarely covered by insurance, even if they are executed in a hospital setting, are invasive, and necessitate the administration of anaesthesia.

Take, for instance, the case of Roopal Bajaj, 35, a pre-school owner and parenting coach based in Lakhimpur, Assam. She had to undergo SMILE (Small Incision Lenticule Extraction), a flapless, minimally invasive laser vision-correction procedure, in 2024, in Delhi. "It was prescribed as an alternative to LASIK. I was told that the procedure was recommended up to the age of 40, not beyond. I went ahead as I wanted to do away with my glasses," she says.

The cost? ₹1.2 lakh. However, despite having health insurance, she could not use the policy to pay this bill. "My policy documents indicated that it would be treated as an elective, cosmetic procedure," she says.



Roopal Bajaj, 35

Lakhimpur, Assam
Profession: Pre-school owner, parenting coach



TREATMENT

SMILE for vision correction, in Delhi.



AMOUNT SPENT

₹1.2 lakh
 Used savings as her health policy did not cover the procedure.



“It was a minimally invasive procedure, prescribed as an alternative to LASIK. It helped me do away with my glasses.”

Devil is in the details

Health insurance policies have stringent criteria for determining whether a procedure is medically necessary or merely cosmetic. "LASIK surgery is generally covered by insurance only when vision impairment meets defined medical thresholds, such as a high refractive error of more than 7.5 dioptres. In other cases, it may be considered elective.

This ensures that the coverage is focused on treatments essential for health," says Amarnath Saxena, Chief Technical Officer, Commercial, Bajaj General Insurance.

The same is true for weight loss treatments. "For example, bariatric surgeries are covered if the patients are at least 18 years old with a BMI (Body Mass Index, based on weight to height ratio) of 40 or more. If it is

over 35 and you have life-threatening comorbidities, again, the surgery will be covered. Insurers' approval necessitates a doctor's recommendation, pre-surgery diagnostic reports and a history of failed non-surgical weight loss efforts," explains Siddharth Singhal, Business Head, Health Insurance, Policybazaar.

However, weight-loss drugs, which are increasingly being prescribed to treat and prevent a host of obesity-related health concerns and their likely fallout, are typically not covered by health insurance policies. These can be administered at home as subcutaneous injections.

According to a CARE Ratings report, the current market size of such anti-obesity drugs is estimated at ₹1,000-1,200 crore. After the patent expired on 20 March 2026, a clutch of Indian companies, including Sun Pharma, Dr Reddy's and Glenmark, has launched Semaglutide generics. Semaglutide is a GLP-1 (Glucagon-Like Peptide-1) receptor agonist, which works by mimicking a natural gut hormone to control blood sugar, lower appetite, and slow digestion.

"Compared to 3-5 years ago, the demand for medical obesity treatment in urban India has probably increased by over 300-500% in premium metro practices," says Dr Kovil. Earlier, obesity treatment was largely limited to diet programmes or bariatric surgery. "Today, patients actively walk into clinics specifically asking for Ozempic, Wegovy or Mounjaro after exposure to social media, celebrity culture, global trends



Know what your health insurance will pay for

The medical necessity test

A procedure is covered if it...

Treats a disease or medical condition.

Restores or preserves bodily function.

Prevents serious health deterioration.

Is supported by medical evidence and specialist recommendation.

Purely cosmetic procedures

Almost never covered by health insurance.

- Thread lifts.
- Skin-lightening procedures.
- Cosmetic smile enhancement.
- Hair transplants.



The primary purpose is to...

Enhance appearance.

Reverse visible signs of ageing.

Improve aesthetics without medical necessity.

and increasing awareness of obesity as a chronic disease," he adds.

Limited insurance coverage

Since obesity treatment can become a long-term therapy for many patients, annual costs can exceed ₹2-3 lakh in some cases. Indian and most international guidelines on prescribing GLP-1 drugs make BMI the key parameter, among others. "If it is more than 27 kg/m² and there is one or more comorbidity, such as hypertension, diabetes, sleep apnoea or fatty liver, then such patients qualify. They can also be prescribed for obesity to those with a BMI of over 30 kg/m²," says Mumbai-based diabetologist Dr Rahul Baxi.

Despite clear medical guidelines and growing access and usage, they remain outside the insurance coverage ambit. Supriya Manjunatha, 33, who is documenting her weight-loss journey on Instagram, has been prescribed an anti-obesity drug due to her diabetes. "My blood sugar levels shot up at the time of my pregnancy and never settled. My endocrinologist advised me to take this drug," she says. She's now off insulin injections and has observed a noticeable inch loss. Despite a valid prescription, however, she has had to fund the costs—₹55,000 so far—out of her own pocket, as her health policy did not cover these expenses.

Regular health insurance policies typically do not cover procedures that do not entail 24-hour hospitalisation (though day care procedures, where a stay is not required due to medical advancements, are covered).

"Standard health insurance policies governed by the Irdai (Insurance Regulatory and Development Authority of India) categorise weight-loss medications as 'lifestyle treatments' or 'cosmetic', unless the drug is 'medically necessary' to treat a severe comorbidity," says Singhal. Given that these drugs do not have to be administered in a hospital, but must be taken at home, like insulin, health insurance policies often do not

Vidya Tikari, 54

Gurugram

Profession: Make-up artist



TREATMENT

Thread lift to enhance facial contours.



AMOUNT SPENT

₹40,000
Self-funded.



"I opted for a thread lift procedure, which pulls up the inner layers of skin to give the face a more contoured and younger appearance. The procedure necessitated local anaesthesia and took about 25 minutes."



Supriya Manjunatha, 33

Bengaluru

Profession: Cyber security

TREATMENT

Anti-obesity drugs for diabetes management, weight loss.

AMOUNT SPENT

₹55,000
funded through savings.



"My blood sugar levels shot up at the time of pregnancy and never settled. My endocrinologist advised me to take the weight-loss drug."

cover such claims. "The coverage for GLP-1 weight-loss drugs may be available under select policy structures that include outpatient department (OPD) benefits, though this remains limited," says Smita Tibrewal, Chief Insurance Officer, Generali Central Insurance.

Globally, insurers increasingly recognise obesity treatment as medically necessary, but coverage is tightly controlled. "In the United States, employer-sponsored plans are increasingly covering GLP-1 drugs. Europe provides selective public coverage, while Gulf countries and parts of Asia remain restrictive, except for diabetes treatment," says Surinder Bhagat, President, Employee Benefits, Large Account Practices, Prudent Insurance Brokers.

Medically needed vs cosmetic

At the other end of the spectrum are procedures such as Botox, laser hair reduction, thread lift, and so on, that are better understood as cosmetic.

Gurugram-based Vidya Tikari, 54, a make-up artist, spent around ₹40,000 on a 'thread lift' procedure. "The procedure pulls up the inner layers of skin to give the face a more contoured and younger appearance. It was minimally invasive, entailed local anaesthesia, and took about 25 minutes," she says. Although it required medical supervision, unsurprisingly, it was not covered by health insurance.

"A medically necessary procedure is the one performed to treat a disease, restore bodily function, or prevent severe deterioration in health. Cosmetic procedures are primarily intended to enhance appearance without medical justification," says Tibrewal. Insurers rely on medical records. "They also take into account established clinical guidelines, diagnostic evidence, severity indicators and the presence of functional impairment or associated medical conditions," she adds.

Some procedures, however, are covered under certain exigencies in a hospital setting. "Treatments related to appearance, such as plastic surgery or dental proce-

dures, in cases of burns, accidents and cancer, may be covered if they address a direct and immediate health risk and are recommended by a medical professional," says Saxena.

If you are planning to undergo any such procedure, you need to understand the nuances in your policy clauses. "Even OPD benefits bundled with retail health insurance typically offer limited support for these treatments, as outpatient coverage is usually restricted to conditions already covered by the base hospitalisation policy," says Bhagat.

Planned dental treatment may be covered to some extent if your policy includes an OPD component. "However, cosmetic procedures like teeth whitening, veneers or orthodontic treatment for enhancing appearance are not covered," says Singhal.

Even medical complications arising from excluded procedures may not be covered. "If the original procedure was cosmetic or excluded, related complications are not covered," says Saxena. It is, therefore, important to understand the risks. "Weight-loss injections may also cause nausea, vomiting, reflux, gallstones, muscle loss, nutritional deficiencies, dehydration, and rarely pancreatitis or severe gastrointestinal complications. There is also growing concern globally regarding inappropriate use in people with normal BMI purely for cosmetic thinness," points out Dr Kovil.

India's drug regulator, the Central Drugs Standard Control Organisation (CDSCO) had, in May this year, issued an advisory that warns against products being administered through injections as part of cosmetic procedures. "No cosmetic is permitted to be used as an injection by consumer/professionals/aesthetic clinics. Cosmetics are only intended to be rubbed, poured, sprinkled or sprayed to human body," it had said.

Create a corpus, shun EMIs

According to Dr Kovil, India is witnessing a rapid rise in financing options and EMI-based payment models meant to help individuals undergo such procedures financially. "Cosmetic and obesity interventions are increasingly being positioned similarly to lifestyle upgrades or elective wellness investments," he says.

At your end, however, it would be unwise to take the plunge if you do not have adequate funds. "People take the EMI (equated monthly instalment) route when they cannot afford the procedure or purchase. You should opt for such plans only when it helps you create an asset like a house or even a car. Avoid EMIs for luxury purchases or cosmetic treatments. In such cases, it is best to start a systematic investment plan (SIP) in a liquid fund for over a year to build the required corpus," says Puneet Oberoi, Founder, Finweet, a financial advisory firm.

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