

Article Date	Headline / Summary	Publication
21 Jun 2026	Insurance Query.	The Hindu Business Line

INSURANCE QUERY.



TAPAN SINGHEL

I am 30 and want to increase my sum insured this year. Do I need to undergo medical tests again?

Aryan

Aryan, this is a question many young policyholders are asking today, and it reflects a welcome shift in how people are thinking about health insurance. As per industry sources, medical inflation in the country is rising at approximately 13-14 per cent, which is two to three times of the pace of general inflation. With changing healthcare needs, reviewing and enhancing one's sum insured at regular intervals is both prudent and necessary.

You would be happy to know that in most cases, increasing your health insurance sum insured does not automatically mean you will have to undergo fresh medical tests, particularly at your age. The requirement for medicals is evaluated on a risk-based approach and depends on factors such as age, overall health condition, any pre-existing diseases, and the extent of the increase you are opting for. For younger and healthy individuals, insurers often allow reasonable enhancements without insisting on additional tests.

Let's go through some facts for better understanding. Under the latest IRDAI

guidelines (2024-2025), insurers are required to simplify processes, reduce unnecessary medical tests unless risk factors clearly justify them, and make preventive care more accessible. This ensures that policyholders are not subjected to any additional procedures where they are not needed.

Age-related risks: Medical tests are usually required above a certain age, commonly post-45 years, or if you choose to opt for a significant increase in sum insured, or if you have had any pre-existing disease or discovered a disease. In other cases, and for younger and healthy individuals, insurers usually allow increases without medical tests.

Sum insured increase: If you are raising your cover from a modest level (e.g., ₹5 lakhs to ₹10 lakh), many insurers may not insist on tests. But for higher jumps (₹20-50 lakh or more), medical underwriting is common.

Preventive health focus: IRDAI's 2025 reforms emphasize preventive health check-ups and wellness programs. Many insurers now include annual check-ups in standard policies, which can serve as a substitute for fresh medicals when increasing cover.

Government push for accessibility: The regulator has removed age limits for health insurance, reduced waiting periods for pre-existing diseases, and mandated wider cashless networks.

Inclusivity for high-risk conditions: Insurers cannot deny coverage for severe conditions like cancer, heart disease, renal failure, AIDS, etc., subject to underwriting, but they



can still require medicals if risk assessment demands it.

Steps you should take: The first thing you can do is check your policy terms. Some insurers specify in the policy documents whether medicals are needed for sum insured enhancement and in which scenarios. Another way to increase the sum insured is through top-up or super top-up plans, which insurers may allow without fresh medical tests, especially when you already have a base policy. If medicals are required, and your policy includes annual preventive health check-ups, those reports may be accepted instead of fresh tests, provided the reports are not too old.

Risks and considerations: This question arises when the person is 45 years or older or has chronic conditions like diabetes, hypertension, or heart disease. In such scenarios, there is a possibility that insurers are more likely to require medicals. Also, in cases where one is increasing coverage from very

basic to very high levels, it triggers medical underwriting. Even if medicals are waived, premiums will rise proportionally with the increased sum insured.

It is also important to note that after increasing your sum insured, any waiting period for pre-existing diseases will generally apply only to the enhanced portion of the cover and not to the original sum insured. If medical tests are required, current regulations mandate insurers to bear at least 50 per cent of the cost, and in many cases, the entire cost is covered when tests are conducted at network facilities. At the same time, policyholders must ensure full and honest disclosure of any new medical conditions since the last renewal, as non-disclosure can adversely impact claims.

So, at the age of 30, if you are in good health and planning a reasonable increase in coverage, you may not need to undergo medical tests again. What is far more important is to review your health cover proactively, understand the terms clearly, and enhance it in a way that keeps pace with medical inflation. A practical approach is to reassess your sum insured every 2-3 years, depending on life events and changing health needs. A well-chosen health insurance policy is not just about meeting today's needs, but about securing long-term financial and healthcare confidence for the future.

The author is MD&CEO of Bajaj General Insurance Limited (formerly known as Bajaj Allianz General Insurance Company Limited)