

Medical Tourism in India and Strategies to increase flow of International Patients at

Park Hospital

**A dissertation submitted in partial fulfillment of the requirements
For the award of**

Post-Graduate Diploma in Health and Hospital Management

By
(Dr Yashpal Fauzdar)



International Institute of Health Management Research

New Delhi -110075

JAN-APRIL, 2012

Medical Tourism in India and Strategies to increase flow of International Patients in Park Hospital.

**A dissertation submitted in partial fulfillment of the requirements
For the award of**

Post-Graduate Diploma in Health and Hospital Management

By
Dr Yashpal Fauzdar

Under the guidance of

Dr Sunil Kumar
GM.(Marketing & Operations)
Park Hospital

Miss Anupama
Professor
IIHMR, Delhi



International Institute of Health Management Research

New Delhi -110075

Jan- April, 2012



Park Hospital
Super Speciality Hospital



Certificate of Internship Completion

Dated:- 03-05-2012

TO WHOM IT MAY CONCERN

This is to certify that **Yashpal Fauzdar**, a student of Post- Graduate Diploma in Health and Hospital Management, of Institute of Health Management & research, New-Delhi has successfully completed 3 months internship in our organization from Jan 1st, 2012 to March 30th, 2012. During the internship he has worked on "**Medical Tourism in India and Strategies to increase flow of Patients at Park Hospital**" under the guidance of undersigned and his team. During the brief period of his association with our organization he was found to be hardworking, sincere, and diligent in conducting the said study.

We wish him good luck for his future assignments.


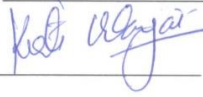

Dr. Ankit Gupta
Managing Director
Park Group of Hospitals

Gurgaon Q-Block, South City-II, Sohna Road, Main Sec-47, Gurgaon, Haryana. **Tel.: 0124-4900000** (100 Lines)
Fax: 0124-2218733 E-mail: parkmedicenters@gmail.com
West Delhi Meera Enclave, (Chokhandi) Near Keshopur Bus Depot Outer Ring Rd., New Delhi-18 **Tel.: 45323232** (60 Lines)
Fax: 45323298 E-Mail: park.hospital12@gmail.com
South Delhi Geetangli Road, Malviya Nagar, N. D.-17 Tel.: 26681963, 26680247, 26680380 E-mail: sunilhospital@gmail.com
Faridabad J-Block, Sec-10, Faridabad, Haryana www.parkhospital.in

Certificate of Approval

The following dissertation titled "**Medical Tourism in India and Strategies to increase flow of international patients in Park Hospital**" hereby approved as a certified study in management carried out and presented in a manner satisfactory to warrant its acceptance as a prerequisite for the award of **Post- Graduate Diploma in Health and Hospital Management** for which it has been submitted. It is understood that by this approval the undersigned do not necessarily endorse or approve any statement made, opinion expressed or conclusion drawn therein but approve the dissertation only for the purpose it is submitted.

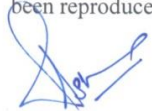
Dissertation Examination Committee for evaluation of dissertation

| Name | Signature |
|-----------------------|--|
| <u>Anupama Sharma</u> | <u></u> |
| <u>Kirti Udayar</u> | <u></u> |
| <u>B. Anandh</u> | <u></u> |



Certificate from Dissertation Advisory Committee

This is to certify that **Dr Yashpal Fauzdar**, a participant of the **Post- Graduate Diploma in Health and Hospital Management**, has worked under our guidance and supervision. He is submitting this dissertation titled "**Medical Tourism in India and Strategies to increase flow of International patients in Park Hospital**" in partial fulfillment of the requirements for the award of the **Post- Graduate Diploma in Health and Hospital Management**.

This dissertation has the requisite standard and to the best of our knowledge no part of it has been reproduced from any other dissertation, monograph, report or book.



Miss Anupama
Professor
IIHMR, New Delhi



Dr Sunil Kumar
GM(Marketing & operations)
Park Hospital

ABSTRACT
A Study on
Medical Tourism in India and Strategies
To Increase flow of International Patients at
Park Hospital

The Medical Tourism Industry in India is poised to be the next big success story after software.. Encouraged by the incredible pace of growth exhibited by the industry, the Confederation of Indian Industry (CII) and McKinsey have predicted that the industry will grow to earn additional revenue of \$2.2 billion by 2012.

Health Tourism India is a developing concept whereby people from world over visit India for their medical and relaxation needs. Most common treatments are heart surgery, Neuro surgery, knee transplant, cosmetic surgery and dental care. The reason India is a favourable destination is because of it's infrastructure and technology in which it is at par with developed countries. India has some of the best hospitals and treatment centers in the world with the best facilities.

The key competitive advantages of India in medical tourism stem from the following: low cost advantage, strong reputation in the advanced healthcare segment (cardiovascular surgery, organ transplants, eye surgery and joint replacements) and the diversity of tourist destinations available in the country. The key concerns facing the industry include: absence of government initiative, lack of a coordinated effort to promote the industry, inefficient accreditation mechanism for hospitals and the lack of uniform pricing policies and standards across hospitals.

To realize the industry's full potential, a coordinated effort from the various players – government, private players and the associated sectors is very essential. The government should help in instituting an accreditation mechanism and device policies to facilitate private investment in the sector. An apex body should be formed for the industry in the lines of NASSCOM and should focus on building the Indian Brand across the world and promote inter-sectorial cooperation.

The other part of the project discusses the strategies needed to increase the flow of international patients in Park Group of Hospitals. Various strategies have been discussed that can be adapted to increase the patient flow in the hospitals.

Primary research has been conducted with the help of questionnaires and direct interaction with international patients.

A sample size of 70 patients and their attendants were chosen over a period of 1 month.

Secondary research was conducted with the help of Periodic research articles, Statistical resources and internet source sites.

With the successful implementation of the discussed strategies Park Hospital can increase its fold of international patients and can retain the edge it has over its competitors.

In years to come medical tourism will be crucial for growth and success of a healthcare organizations.

Acknowledgement

I Dr Yashpal Fauzdar student of IIHMR New Delhi, undergoing Post- Graduate Diploma in Health and Hospital Management Batch (2010-2012) thank all the management and Staff of Park Hospital who really helped me complete my dissertation on **Medical Tourism in India and Strategies to increase flow of International Patients in Park Hospital**.

I would especially like mention the names of the following whose help and support during this period made it possible to complete my dissertation on time.

1. Dr Sunil Kumar (GM, Marketing and operations).

2.Mr Ashok Bedwal (COO).

3.Mr Bharat Pandit (Head Marketing & Business Development).

I also thank and acknowledge the guidance and advice of my mentor **Miss Anupama, Professor, IIHMR New Delhi** for his invaluable inputs and guidance, which gave me the insight and direction to complete this project.

Dr Yashpal Fauzdar

Enrollment No.

PG/10/120

Table of Contents

| | |
|---|-------------|
| 1. Cover Page..... | Pg.No.1 |
| 2. Topic Page..... | Pg.No.2 |
| 3. Internship completion Certificate..... | Pg. No.3 |
| 4. Certificate of Approval..... | Pg. No.4 |
| 5. Certificate from Dissertation Advisory Committee..... | Pg. No.5 |
| 6. Abstract..... | Pg. No.6-7 |
| 7. Acknowledgement..... | Pg. No.8 |
| 8. List Of Figures..... | Pg. No.11 |
| 9. List of Tables..... | Pg.No.12 |
| 10. List of Appendices..... | Pg.No.13 |
| 11. List of Abbreviations..... | Pg.No.14 |
| 12. Part 1 Internship Report..... | Pg.No.16-35 |
| 14. Part 2 Dissertation..... | Pg.No.36 |
| a)Introduction..... | Pg.No.37-38 |
| b)Review of Literature..... | Pg.No.38-54 |
| c)General and Specific Objectives..... | Pg.No.54 |
| d)Ophthalmology:”An Untapped avenue for Medical Tourism”..... | Pg.No.55-64 |
| 15.Research Methodology..... | Pg.No.65 |
| 16.Analysis of Data..... | Pg.No.66-73 |

| | |
|--|-------------|
| 17.Strategies to increase patient flow in CFS..... | Pg.No.74-89 |
| 18.Conclusion..... | Pg.No.90 |
| 19.Recommendation..... | Pg.No.92 |
| 20.References..... | Pg.No.93 |
| 21.Annexure..... | Pg.No.94-95 |

List of Figures

| Figure No. | Description | Page |
|-------------------|---|-------------|
| 1 | Human eye | 52 |
| 2 | Analysis of Data | 66 |
| 3 | Analysis of Data | 67 |
| 4 | Analysis of Data | 68 |
| 5 | Analysis of Data | 69 |
| 6 | Analysis of Data | 70 |
| 7 | Analysis of Data | 71 |
| 8 | Analysis of Data | 72 |
| 9 | Role of Medical Tourism facilitators | 74 |
| 10 | Services of Medical Tourism Facilitators | 75 |

List of Tables

| Table No | Description | Page |
|----------|---|------|
| 1 | Major International Players | 36 |
| 2 | Major Medical Tourist Destinations in Asia | 37 |
| 3 | Service Spectrum in India | 42 |
| 4 | Indian Medical Tourism(SWOT Analysis) | 43 |
| 5 | Procedure Charges in India and rest of the countries | 47 |
| 6 | Cost Difference in Ophthalmic Procedures | 56 |
| 7 | Park Hospital(SWOT Analysis) | 60 |
| 8 | Park Hospital:SWOT Analysis:w.r.t.Medical Tourism | 64 |
| 9 | Advertisements in International Print Media | 79 |
| 10 | Leading NRI Publication in U.K./Canada | 80 |

LIST OF APPENDICES

Appendix 1- Cover Page

Appendix 2-Topic Page

Appendix 3- Internship Completion Certificate

Appendix 5- Certificate of Approval

Appendix 6- Approval of DAC

Appendix 7- Abstract

Appendix 8- Acknowledgement

Appendix 9- Table of Contents

Appendix 10- List of Figures

Appendix 11 –List of Appendix

Appendix 12- List of Tables

Appendix 13- List of abbreviations

Appendix 14- Internship report

Appendix 15- Dissertation

List Of Abbreviations

Acronyms/Abbreviations used

PGH- Park group of Hospitals

ID – Identification

OPD – Out Patient Department

IPD – In Patient Department

OT – Operation Theater

OCT – Optical Coherence Tomography

IOL – Intra Ocular Lens

ECG – Electrocardiogram

TPA – Third Party Administrator

ISO – International Organization for Standardization

BPO – Business Process Outsourcing

IVF – In Vitro Fertilization

FDA – Food and Drug Association

M-Visa – Medical Visa

CABG – Coronary Artery Bypass Graph

CAD – Coronary Artery Disease

NRI – Non Resident Indians

FICCI – Federation of Indian Chambers of Commerce and Industry

CRISIL - Credit Rating Information Services of India Limited

MM – Millimeter

Phaco – Phacoemulsification

NHS – National Health Services

HMO – Health Maintenance Organization

PPO – Preferred Provider Organization

MTF – Medical Tourism Facilitator

DNS – Domain Name Search

SEO – Search Engine Optimization



Internship Report

I. ORGANIZATION PROFIL

INTRODUCTION TO ORGANIZATION

Name of the Organization: PARK HOSPITAL

Park Hospital was founded by **Dr. Ajit Gupta** who believes in taking up challenging assignment where he can continue to apply his Social, Administrative & Hospital management skills in a wide exposure of medical services keeping a positive and committed & targeted attitude.

Park Hospital is a Multi super specialty tertiary care hospital which has attained supremacy in the field of health care services. Park hospital is religiously dedicated to provide latest, ultramodern and sophisticated medical care. The Hospital follows its principle of improving Health Care Processes via adopting exclusive equipments and technology in order to enhance the success rate & patient gratification. Park also has a team of highly proficient and veteran doctors & efficacious paramedical staff that link together to provide the most sophisticated & highest standard of care in all penchant of Health in conjunction with super specialties.

Park Hospital Units:

Park Hospital, West Delhi

Park Hospital, South Delhi

Park Hospital, Gurgaon

Park Hospital, Faridabad

Park Hospital, Panipat



PARK HOSPITAL, WEST DELHI

Park Hospital has state of Heart and Lung institute. The institute is equipped with Siemen Flat Panel fixed Lab, Intra aortic Balloon Pumps and other important equipment including Modular OTS for open heart and By-pass surgeries with Ultra modern ICU/CCU complex. Park Hospital also dreams of setting up of health care services by offering the crème of medical assistance with the help of excellent medical facilities. Park Hospital is ardently devoted to provide quality care that would treat health problems and simultaneously focus on overall well being of patient.

MISSION

To be the leading health care provider, providing comprehensive quality healthcare at affordable cost.

VISION

Our hospital is committed to deliver high quality personalized care to people of all ages and in every stage of life.

QUALITY PARAMETERS

- The hospital has been designed for maximum safety and comfort of the patients and healthcare providers. It complies with national & International standards for hospital accreditation.
- Clinical governance is an integral part of our practice.
- Robust quality and infection control practices are in place.
- Best in class modular OT's and ICU's with HEPA filters, laminar air flow & complete air changes per hour & access control minimize the risk of infection.
- Isolation rooms have been earmarked in the ICU to treat critically ill infectious patients thus preventing threat to other patients
- Green building: The hospital is designed to allow sunlight in most of the ICUs and patient rooms as it minimizes stress on the patients and gives them proper orientation of time.
- Stringent "Biomedical Waste Management" practices for segregation, storage, transport & disposal of hospital waste are in place.
- The hospital has one of the most advanced infrastructures which help in patient & employee safety & reduce the excessive burden on the environment.
- The "Hospital Information System" used is most advanced and user Friendly and helps to reduce medical errors as well as contributes to faster and better patient management.

Departments, Services, Facilities

Park Hospital, West Delhi

Location: Keshopur Mandi, West Delhi

Promoters: Park Group of Hospitals

Total number of beds: 200 beds

Single specialty or multi-specialty: Multi-specialty hospital.

Park Hospital, Gurgaon

Location: Q Block, South City 2, Sec 47

Promoters: Park Group of Hospitals

Total number of beds: 250 beds(Proposed To Make 400)

Single specialty or multi-specialty: Multi Super specialty hospital.

Park Hospital departments:

- ❖ OPD Unit
- ❖ Front Office
- ❖ Centralized OPD wing
- ❖ Billing Section
- ❖ Finance Department
- ❖ TPA cell
- ❖ ICU/CCU
- ❖ OT
- ❖ Dialysis
- ❖ Emergency
- ❖ IPD

- ❖ General/Private wards
- ❖ Nursery
- ❖ Patient Canteen
- ❖ General Store
- ❖ HR department
- ❖ Administration Department
- ❖ Marketing Department
- ❖ Medical Director Office
- ❖ Accounts Department
- ❖ COO Office
- ❖ HR Department
- ❖ Lab
- ❖ CT Scan/X-Ray/USG
- ❖ Conference Room
- ❖ Blood Bank
- ❖ Pharmacy Store
- ❖ MRD
- ❖ IVF Unit
- ❖ Obs. And Gynecology
- ❖ Physiotherapy Department
- ❖ F&B
- ❖ Fresh Juice Outlet

List Of Panels

- CGHS
Central Govt. Health Scheme for Retiree
- CGHS/DP
Central Govt. Health Scheme for Delhi Police
- ECHS
Ex- Serviceman contributory Health Scheme
- ESI
Employee Scheme
- FCI
Food Corporation of India
- BSNL
Bharat Sanchar Nigam Limited
- NDMC
New Delhi Municipal Corporation
- MCD
Municipal Corporation Of Delhi
- MTNL
Mahanagar Telephone Nigam Limited
- NPL
National Physical Laboratory
- DGEHS
Delhi Govt. Employee Health Scheme
- DJB
Delhi Jal Board
- DMS
Delhi Milk Scheme
- IASRI
Indian Agricultural Scientific Research of India
- ICAR
Indian Council of Agricultural Research
- IARI
Indian Agricultural Research Institute
- TRIFED
Tribal Cooperative Marketing Development Federation of India Ltd
- DERC
Delhi Electricity Regulatory Commission

- BSES
Bharat Sub. Division Electricity Station
- NDPL
North Delhi Power Limited
- CERC
Central Electricity Regulatory Commission
- NTPC
National Thermal Power Limited
- AAI
Airport Authority of India
- IPGCL
IndraPrastha Power Generation Co. Ltd
- PHH
Pawan Hans Helicopters
- BSF
Border Security Force
- NAFED
National Agricultural Cooperative Marketing Federation of India
- NECL
Navyuga Engineers Co. Ltd.
- NBSSLUP
National Bureau of Soil Survey & Land Use Planning
- NBPGR
National Bureau of Plant & Genetic
- DU
Delhi University
- DTC
Delhi Transport Corporation
- PCI
Press Council of India
- DT
Delhi Tourism
- JNU
Jawahar Lal Nehru University
- IGNOU

Indira Gandhi National Open University

- UGC

University Grant Commission

- TRAI

Telecom Regulatory Authority of India

- TIFAC

Technology Inform. Forecasting and Assessment Council

- DTCL

Delhi Transco Co. Ltd.

- EPFO

Employee Provident Fund Organization

- NHAI

National Highway Authority of India

- NCDC

National Co-Operative Development Corp

- CSIR

Council of Scientific & Industrial Research

- DUAC

Delhi Urban Art Commission

- CCRT

Centre for Cultural Resources and Training

- HUDCO

Housing & Urban Development Corp. Ltd

- SPMCIL

Security Printing and Minting Corp. India Ltd

- ITPO

India Trade Promotion Organization

- EIL

Engineers India Ltd

- NFL

National Fertilizers limited

- NIPCCD

National Institute of Public Co-Operation and Child Development

- DSIIDCL

Delhi State Industrial

- LRSI

Lala Ram Swaroop Institute for TB

- SPG

Special Protection Group

- PNB

Punjab National Bank

- BOB

Bank of Baroda

- BOI

Bank of India

- RBI

Reserve Bank of India

- MT

Medical Tourism

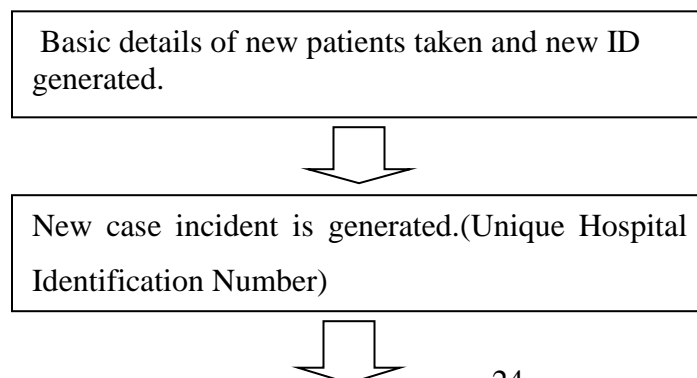
- Private

All Major TPA's and Medical Insurance

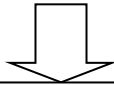
II. DEPARTMENT WISE WORK PROCESS

1) Reception

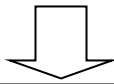
It is the first point of interaction between the patient and the hospital. The flow of activities at the reception is as follows –



After registration blue slips issued. The time of patients entry into the system, doctors name and consultation charges mentioned in these slips.



Blue slips sent along with the files to the OPD directly. These files are color coded. Blue files are for patients with appointment and Pink files are used to indicate walk-in patients



Appointment for next visit may be taken at the reception. However, appointments on phone are given only at the EPBAX cell.

The “Appointment” module of I-Care (Hospital HMIS) is

Different color codes are Proposed For Park Hospital Gurgaon (Still in process) given to manage patient flow, i.e.

- Blue New Appointment
- Yellow Follow up
- Purple One day post operative
- Light purple One week post operative
- Dark pink Three weeks post operative
- Brown colour Check in
- Green colour For Lasik Work up
- Orange For surgery

- Red Any information and blocks in OPD

Charges for consultation are collected at the reception itself and daily reconciliation is done.

.

2) EPBAX

The electronic private automatic branch exchange is equipment that has made day to day working in the offices much simpler, especially in the area of communication.

It is located in the basement reception and serves both the external and internal communication needs of the organization. Main features are call transferring; call forwarding, auto conferencing and automatic redialing of numbers found engaged in the first trial.

EPBAX staff is responsible for giving appointments to patients on phone.

3) Counseling

Upon his visit to the doctor at the OPD, a patient may be advised a specific procedure/surgery. Obviously, the patient would need some counseling to understand various options that are available to him.

The counseling department basically acts upon the advice of the doctor and explains the relevant facts of the procedure/surgery to the patient.

It includes discussion about the exact procedure, choice of lens, cost and investigations required.

Once investigations are done, patient reports to at the reception with his investigation results. They are put in a yellow folder and sent to the doctor. If the patient is fit for surgery, he again goes to the counseling room and a date is assigned to him for his surgery.

A pre and post operative instruction card is given to the patient, which contains all necessary details regarding precautions and medicines.

For CGHS patients, counseling procedure primarily remains the same. Again, they may fall in two categories:-

- a) Serving – Permission letter and copy of ID card.
- b) Pensioner – Only permission letter.

Patient is informed about any extra amount that they might have to pay from their pocket in case they opt for an expensive lens. Discharge summary of CGHS patients is also prepared at the counseling room.

For TPA patients, counselors tell them about the cashless procedure in brief, get the TPA guidelines and pre authorization forms of their respective TPA'S signed and submit them to the TPA cell.

In Addition to these, they inform all the patients about the timing of their surgery and give them preoperative instructions one day prior to their appointment.

4) Pharmacy

With the increasing demand, the pharmacy at, Park Hospital was established in April2012, which just in months of its establishment has now grown in its size as well as contents. The pharmacy functions during the regular hospital hours of 9.00 AM to 6.00 PM.

The facilities include:

- All commonly used drugs are available to meet the demand.
- Fully computerized transactions, generation of bills etc.
- Appropriate drug pricing.
- Computerized inventory control system that gives information about drug expiry date, reorder status for a particular drug, pricing etc.
- Good vendor relations and a little lead time in the receipt of order placed.

5) OPD

Each and every stage of a Physical examination is very crucial & important. Thus, the initial & foremost phase of examination (i.e. Outpatient Services) at park Hospital are designed in such a way that it provides consistent monitoring to our patient by the staff with extreme comfort level of waiting areas, OPD working hours till the hospital functions hence ensuring enhanced treatment facility with flexibility for our patients. The facilities include:

- Spacious OPD located at the Ground Floor For easy access to patients.
- More than 20 Consultant chambers
- Equipped with the latest technology equipments to examine and diagnose patients
- Access to more than 50 renowned consultants of Town as Visiting and courtesy Consultants.
- Professionally Skilled and Trained staff.

6) Optical and contact lenses

The optical shop at Park Hospital has an extensive selection of frames for every preference – traditional and designer for all ages in wide range of prices.

The facilities include:

- Skilled staff to help select the right frame and lens
- Patients can choose from a variety of non branded and major branded frames including Tommy Hilfiger, Versus, Gucci, Police, Guess, Versace, D&G, Hugo Boss, Carrera etc.
- High standard of craftsmanship are set.
- Quality of dispensing, using latest technology.
- High Accuracy.
- Time taken for making the spectacles is very less.
- Even the most difficult and complicated prescription can be made with ease.

- Other facilities like free adjustments, nose pads and repairs on any eye wear purchased at the optical are also provided
- Wide range of contact lenses i.e. soft, semi soft, hard and bandaged contact lenses are available all the time. Colored lenses for cosmetic purposes can be made available in 24 hours time.

7) Billing and Accounts

The main billing section of the hospital is located in the ground floor near OPD. All the cash billing for empanelled, TPA and general patients is done here. Credit billing for empanelled patients is done in the TPA office. Salient features are:

- Entry in the department is for authorized personnel only. No one can enter until the security code is activated.
- Daily reconciliation of receivables is done. Cash generated in other centers is analyzed routinely in the individual centre and common discussion in main centres.
- Reconciliation of accounts is done.
- All the credit bills generated in a month are submitted within the first week of next month.

8) Medical records department

This department is located in the basement along with the stores section. Approximately 40 inpatient records are generated each day. All the records are filled and sent to the store for filing. Here, all the records are supposed to be checked for deficiencies in the basic details, need to set them in order of hospital numbers and then to be filed in box files. Observations Are:

- These files are arranged vertically in racks made for storing the records.
- A register is maintained in which the entry of all received records is done.
- No set pattern is followed for filing and the storage space is insufficient.

- Files of all the TPA/Insurance patients are also kept in the same department.
- Most of the older files are having incomplete data about patient's treatment, but the same information can be generated from the hospital information software.
- This department is centralized where records for both OPD and IPD patients are maintained.

9) Stores

Hospital stores have the main responsibility of arrangement of lenses for surgery according to the patient's requirement. All details regarding this are taken from counseling 1-2 days prior to surgery so that right lens could be arranged for cataract patients. All other inventory is also maintained and checked routinely. Store is centralized and requirement of all other centers is fulfilled on a monthly basis depending on the requisitions generated by them. Inventory mainly consists of:

- Consumables used in the surgery
- OT drugs
- Stationary and misc items
- Lenses
- Linen for OT
- All the material required for camps
- General purpose consumables like tea/coffee, cleaning agents etc.

10) IT department

- Main responsibility of this department is to see that all hospital systems and the server are working properly.
- The department gives assistance in case there is any problem related to hardware or software.
- Maintenance of hospital information software as well as incorporation of changes and its updating is done.

11) Operation Theatre

Ground Floor – 3 OTs – Mothers nest and Gastro and other surgeries are performed in these OTs.

One pre –operating room and post-operative lounges are also there

1st Floor – Modular OT

2nd Floor- Cath Lab

12) Preparation Room – For all surgeries.

Before a surgery, some work up is required to be performed on the patient. This includes: -.....!!!

- Refraction
- Wave Scan – counter-checking of refraction.
- Ob Scan - To check cornea's curvature
- Aberometry – To know the final status of the eye.

This information is stored in a memory disk, which is used during the refractive procedure

13) TPA

- Hospital is empanelled with More than 30 TPA's and Panel. The list includes all major and some minor TPA's approved by IRDA.
- Department carries out all the processes required for cashless hospitalization and further settlement of claims.
- Maintains the database of all the cases processed till date in files and folders,

- The hard copies of all the claim documents are kept in in box files stored in the MRD.
- All recent and old outstanding cases are kept separately for reference.
- The department gives assistance and guidance to patients regarding cashless hospitalization, and also help them in filing for reimbursements
- Empanelment with New TPA's and renewal of the same is one of the most important tasks that have to be carried out in coordination with the marketing department.
- Tracking of TPA receivables is done on a routine basis and received payments are checked for deductions, TDS, short payments etc. these deductions if not appropriate, are informed to TPA's and reason is sought.
- Co –ordination with billing and accounts department for financial status reconciliation
- Presenting the current status of TPA financial recovery to the management routinely or as required by them

14) Hospital Website

- Park Hospital is having a very informative and interactive website
- Wide range of information about the services, all kinds of Procedure, signs and symptoms of various diseases and treatment options is available for the reference.
- Host of information about the hospital, services, departments, doctors, facilities etc is also shown on the website.
- There is a provision to register online and take appointments.
- Location map and contact details are available for easy accessibility.
- Website is kept updated about all recent activities and changes

15) Administration and HR department

- The main role of hospital administration is to oversee day to day operations of all departments.
- Makes sure that the hospital is working efficiently and providing adequate medical care to patients without causing them any discomfort
- Acts as a liaison between governing board, medical staff, and department leaders and integrate all the activities so that they function as a whole.
- Project management, Budget planning, CFS expansion related activities and making key decisions are some of the important activities in which administration plays a important role.
- Human resource department is concerned with:
 - Recruitment, training and induction of new members.
 - Daily attendance of staff
 - Leave record for the current year
 - Making policies related to code of conduct
 - Performance appraisal of staff

16) Hospital marketing team

- All the marketing activities for the main centre are carried out from the corporate office in Gurgaon.
- All other centers have their own team of marketing executives and they report to Chairman/ Managing Director and center manager at their respective centers.
- Major activities include:
 - Arranging for camps, live shows, talks and continuing medical education(CME's) programmes
 - Keeping the hospital website current and updated

- Designing logos, charts, pamphlets, and brochures necessary for staff and patients education.
- Empanelment with PSU's, TPA, and other agencies for enhancing business.
- Tie up with hospitals and doctors (small nursing homes) for referral and diagnostics.
- Maintenance of public relations and networking inside and outside the hospital.
- Updates about the competitive organizations.

As a part of my training in Park Hospital I was given an induction schedule whereby I had an overview of the working of all the departments. The induction programme was for 15 days and it helped significantly in gaining knowledge about hospital operations.

I joined the Marketing division. I was initially given the task of empanelment of various Corporates, Domestic nursing homes, Renowned General practitioner and International Marketing with Park group of hospitals.

For this I created a database of various corporate, nursing homes, Doctors and International agencies in Gurgaon and NCR. I call them up and explain them about our proposal for empanelment and then fix the meeting.

A copy of our proposal is mailed to the all groups. I then follow it up over phone to seek an appointment as per their convenience.

At the meeting my role is to answer their queries and inform them about all the facilities offered by Park Hospital.

I, then follow up with them later and ask for their response.

With the interested organizations we complete our empanelment formalities. Later we organize a talk show or an Health camp at the corporate's office. This is to promote awareness about Park Hospital and the employees also get to know about the benefits they could avail.

The other task given to me is to start some promotional activities like an Health camp/talk show/awareness campaigns for those organizations already empanelled with Park Group of hospitals. This is to increase the business from our already empaneled canterers.

I visit various organizations and take them through our proposal and answer their queries regarding empanelment.

I learnt about the basics of Corporate, Domestic and International Marketing and also things like relationship management with various corporates.

I understood the importance of the standards and quality of services that organizations look for.

It is essential to properly convey the package to the organization and leave them convinced about it. There should not be any ambiguity and confusion in the process as it can affect the reputation of the organization.

The nature of this job demands perseverance and commitment towards the organizations as they are an indispensable part of the whole process.

Part II - Dissertation on:

**MEDICAL TOURISM IN INDIA AND STRATEGIES
TO INCREASE INTERNATIONAL PATIENT FLOW
IN Park Group Of Hospital**

Introduction

Medical tourism in India

After the silicon rush India is now considered as the golden spot for treating patients mostly from the developed countries and for ailments and procedures of relatively high cost and complexity. India is also aggressively promoting medical tourism in the current years -and slowly now it is moving into a new area of "medical outsourcing," where subcontractors provide services to the overburdened medical care systems in western countries.

India's National Health Policy declares that treatment of foreign patients is legally an "export" and deemed "eligible for all fiscal incentives extended to export earnings." Government and private sector studies in India estimate that medical tourism could bring between around \$2 billion US into the country by 2012.⁽²⁾

Going by the Statistics and various studies it can be easily said that India would be the leader in medical tourism within the next decade if only it could improve the infrastructure and tour attractions. The question or rather the doubt that is often asked by critics is how India can provide top line medical care to outsiders when such a large part of population falls below poverty line. Ethically and morally this problem has to be solved if India has to move into the category of developed country and also as a place which provides medical care to both its own people and patients from other country

The aim of this project is to put a finger on the highly profitable service of medical care combined with tourism in which India is currently considered as a market leader. It has been a known fact for past many decades that Indian doctors are highly skillful in their given fields since all around the globe many hospitals have doctors of Indian origin. Therefore it became almost natural that this trend extended to India.

Long waiting lists, rising healthcare cost, inadequate insurance cover and poor follow-up services are some of the factors directing a wave of medical tourists to more affordable healthcare destinations. Most countries are tapping the health tourism market due to aggressive international marketing in conjunction with their tourism industry. In this rat race, Thailand, Malaysia, Jordan, Singapore, Hong Kong, Lithuania and South Africa have emerged as big healthcare destinations.

India is unique as it offers holistic healthcare addressing the mind, body and spirit. With yoga, meditation, Ayurveda, Allopathic and other Indian systems of medicine, India offers a vast array of services combined with the cultural warmth that is difficult to match by other countries. Also, clinical outcomes in India are on par with the world's best centers, besides having internationally qualified and experienced specialists.

REVIEW OF LITERATURE

History is indeed full of medical travelers who made trips in various places across the globe to seek improvement for their health. Take the case of India. India has enjoyed a rich history of providing Yoga instruction as well as Ayurved healing to patients from around the world.

However, dental surgery, cosmetic surgery and other more serious kinds of surgery abroad is relatively a new phenomenon. It started in the 80s and 90s when patients began looking for more affordable options other than what was offered in their homeland or country.

What was referred to as "tooth tourism" grew quickly. Americans were then traveling to Costa Rica or other Central American countries for dental bridges and other dental procedures that were not usually covered by their insurance.

In the late 1980s, Cuba started programs to attract foreigners from countries like India, Latin America and Europe for more affordable eye surgeries, heart surgery and cosmetic procedures. In 1990 alone, it was reported that the Cuban government had around 2,000 medical tourist from various parts of the world.⁽⁵⁾

Thailand also became a hot destination for plastic surgery and other routine medical procedures in the late 1990s. On the other hand, New Zealand is getting more popular in hip and knee replacements surgery.

Now, medical tourism is already a global phenomenon. More and more countries will become destinations of medical tourism. But while there are advantages, there are also risks or disadvantages. Medical tourism is a trade-off. You might be able to save a lot of money at the same time have your much-needed vacation abroad but expect some disadvantages along the way. Nonetheless, medical tourism is here to stay thanks to the mass media, modern technology and hassle-free travel to other countries.

In real terms, Medical tourism means, traveling or visiting other country for the medical treatment, to save costs, get better medical facilities or get the treatment fast. If we take a look of the past few years, we will find a large chunk of patients from all over the world visit India for their medical treatment. Some of the key factors for developing medical tourism in India are as follow:-

(1)Cheaper pricing option available for treatment: This factor plays a very important role for developing medical tourism in India. The cost of treatment is very low as compared to USA, UK or any developed country. This is the main reason that people from all over the world come to India for medical treatment.

(2) Availability of Doctors: The competence of Indian doctors is well known. We have a large pool of renowned doctors with a rich experience with them.

(3)Negligible Waiting Time: Unlike the Western Countries, there is no problem of waiting time in India.

(4) World class services and infrastructure: Indian hospitals are equipped with well infrastructural facilities and providing world class services to the patients. With corporate hospitals coming into picture the patients can easily avail world class facilities.

(5)Vast Country to visit: There are hundreds of visiting places, which attract patients to come here for treatment and visiting places.

(5) No Language Barrier: This is also a very crucial factor that a large number of people from USA and UK come down to India for treatment. Here a large chunk of people can speak and understand English language. After US, India is the second largest English speaking country.⁽⁶⁾

Major International Players- [Table No. 1]

| Country | Key Specialties | Main Driving Factor |
|-------------------|---|--|
| Costa Rica | Dental Procedures | <ul style="list-style-type: none"> a) Close proximity to USA and Canada b) Health Costs are 80% less than that in USA. |
| Cuba | Joint replacement, Cancer treatment, Eye surgery, Cosmetic surgery and addictions rehabilitation. | <ul style="list-style-type: none"> a) Health care costs 60-80% less than US b) Visa is easy to obtain, especially for UK and Canadian residents. |
| Mexico | Dentistry, Plastic surgery and Bariatric surgery | <ul style="list-style-type: none"> a) Strong reputation of services and Doctors b) Support from US insurers and Employees. |
| Panama | Dental implants, Plastic surgery, Assisted reproduction, Cardiology, Pulmonology and Orthopedics | <ul style="list-style-type: none"> a) Low costs. b) Doctors trained at US and Europe. c) Association with International Organizations such as Johns Hopkins International and Harvard Medical Faculty |
| Brazil | Cosmetic surgery | <ul style="list-style-type: none"> a) Quality of care b) JCI Accredited Hospitals |
| Colombia | Cosmetic and Eye surgery, Cardiovascular and Transplant surgery | <ul style="list-style-type: none"> a) Ease of travel from US and Europe b) Colombia has such an organ donor and banking system which makes organs available to foreigners with certain legal restrictions. |

Major Medical Tourism Destinations In Asia[Table No. 2]⁽²⁾

| Country | Key Specialties | Main Driving Factor |
|------------------|--|---|
| Singapore | Neurosurgical procedures, Orthopedic surgeries | a) A multi – agency government initiative involving Singapore Tourism Board, the Economic Development Board & International Enterprise Singapore. |
| India | Heart surgery, Hip resurfacing and other Orthopedic procedures, Wellness Tourism and Alternate systems of Medicines. | a) Low cost of Health care up to 1/10 of that in advanced countries. b) English speaking staff. c) World Renowned doctors. d) Ayurveda is catching up fast as an effective alternative. e) Rich heritage that promotes tourism. |
| Malaysia | Elective surgeries | a) Active collaboration among private players to establish “Association of Private Hospitals of Malaysia” b) Few Internationally accredited Hospitals |
| Thailand | Cosmetic procedures, spas and rejuvenation centers, Cardiac procedures, Orthopedics, Organ transplants,. | a) JCI accredited hospitals b) High inter-sectoral coordination. c) Initiatives from tourism authorities. |

Medical Tourism - Asia's Growth Industry

Asia's burgeoning medical tourism industry, expected to be more than US\$4 billion by 2012, is proving a windfall for the travel and hospitality sector.

Abacus International President and CEO Don Birch says, "The lure of low-cost, high quality healthcare in Asia is estimated to be attracting around 1.3 million tourists a year to the key locations – Thailand, Singapore, India, South Korea and Malaysia."

"This is a new breed of travelers. They have particular needs, they are going to these locations for a specific reason, and reports are showing that their daily spend is more than double that of other tourists." Government research on this rapidly-growing business shows a medical tourist spends average US\$362 a day, compared with the average traveler's spend of US\$144. "This spend alone makes medical tourists a highly-attractive niche for travel agencies and the hospitality sector," Mr. Birch says.

"This is a big and growing pie, which everyone is wanting a share of. At one level governments and government agencies want to see the economic benefits, hospitals are competing to provide treatments, and the travel and hospitality providers are also vying to claim a slice of the action.

"The opportunities are expanding all the time in the region," Mr. Birch says. **India's medical tourism business is growing at 30 per cent per year and is forecast to generate at least US\$2billion a year by 2012.** Singapore is targeting to attract foreign patients and push the GDP contribution from this sector above US\$1.6 billion.⁽¹⁰⁾

Coupled with strong growth in Asia's other well-established medical tourism markets, such as Thailand and South Korea, the industry is set to confidently stride past US\$4 billion by 2012.

More than a million patients receive treatment annually be it inpatient or day surgery at facilities such as Bumrungrad International Hospital, out of which 400,000 are medical tourists..⁽⁴⁾

Bumrungrad has more than 700 internationally-trained and board-certified doctors, and a complete range of healthcare services and facilities.

Singapore on the other hand makes world headlines for performing complex neurosurgical procedures and delivering cutting-edge medical treatment by the region's leading health specialists. The cost of treatments in Singapore, such as a hip replacement, can be less than a third of the price in the United States. In some cases, the cost is less than a tenth of what people would pay in America or Europe.

India the World Class “Medical Treatment Destination”

Promoted by the government and fuelled by the corporate boom in medical care, India is increasingly seen as the favoured destination of “medical tourists” who cross national boundaries to seek treatment that is cheaper than in their home countries. Medical tourism is a multi-billion dollar industry promoted by governments and the medical and tourism industries. Two other major factors are the sustained growth of corporate hospitals and hospital chains across India and government patronage and promotion of medical tourism as part of public policy.

The equation holds so true:

Medical Tourism in India = World Class Treatment+Holiday+Big Savings

- ⇒ **Lonely Planet** in a survey of 134 countries –India has been rated among the top 5 favorite
- ⇒ India has been rated among the top 5 favorite destinations.
- ⇒ **i-explore** - India has been rated among top 5 destinations of the world.
- ⇒ **National Geographic Traveler** describes- India as “Land of Mystery & Majesty”

Forbes says - “India is one of the world’s fastest growing travel markets”. The most important unique selling points of India include the variety and beauty of India’s mountain ranges, colorful deserts, green rain forests, virgin beaches and holiest rivers besides its history, culture, religion and people. Besides India have architectural wonders like the Taj Mahal, The Golden Temple, Khajuraho Temples, The Sun Temple, Trimurti and many more.

‘Atithi Devo Bhav’ is the new buzzword for Destination India. The unraveled natural beauty of Himalayas, serene sea shores, vast patches of sand ,thick and green forest with its blossoming flora and fauna, back waters of Kerala, architecturally designed temples, forts age old traditional Indian Holistic medicinal services have not only wooed the foreigners but the Indians too. This has led to the beginning of a new concept called “Medical Tourism”⁽¹³⁾

Having being spurred on by the burgeoning medical tourism market in India, many hospitals have jumped on to the 'being hospitable' bandwagon to cash in on the boom time. The advent of this phenomenon has caused many hospitals to redefine their quality and service standards, in particular, the hospitality side of their business. And it is to meet this need, to spruce up its hospitality that many hospitals are turning to the hospitality industry for expertise to provide its patients with a wonderful healthcare experience.

The Service Spectrum in India [Table No. 3]

| | Wellness Tourism | Alternative System of Medicine | Cosmetic Surgery | Advanced and Life Saving Healthcare |
|-------------------------|--|--|---|--|
| Services Offered | Spas, Stress Relief, Rejuvenation Centres | Ayurveda, Siddha, Treatment for Arthritis, Rheumatism etc. | Dental Care, Plastic Surgery, Skin Treatment | Organ Transplant, Cardio-Vascular Surgery, Eye treatment, Hip Replacement, IVF |
| Profit Margins | Low | High | Medium | High |
| Key Competitors | Thailand, South Africa | | South Africa, Cuba and Thailand | Singapore, Jordan, Thailand and Malaysia |
| India's Strength | Low – Thailand has captured a significant share of the market. Although South Indian cities like Chennai are catching up fast. | High – Kerala is popular for this service. | Low – South Africa and Thailand lead in plastic surgeries. Cuba specializes in skin treatments. | High – India has strong brand equity. Jordan has a strong presence in middle-eastern market. |

India in Medical Tourism – SWOT Analysis

| | |
|--|---|
| <p><u>Strength</u></p> <ul style="list-style-type: none"> ❖ Quality service at affordable cost. ❖ Availability of excellent skill set. ❖ Global recognition of Doctors and Hospitals ❖ Strong presence in advanced healthcare ❖ Diversity of tourism destinations and experiences. ❖ Increasing number of healthcare facilities with Indian and International accreditation. ❖ Adoption of cutting edge technology. | <p><u>Weakness</u></p> <ul style="list-style-type: none"> ❖ Lack of aggressive government initiative. ❖ Lack of coordination between stakeholders of medical tourism namely transportation, hospitality and hospitals. |
| <p><u>Opportunity</u></p> <ul style="list-style-type: none"> ❖ Increased demand for healthcare services from countries with aging population. ❖ Fast-paced lifestyle increases demand for wellness tourism and alternative system of healthcare. ❖ Long waiting periods in National Health systems in countries like UK and Canada. ❖ Demand from countries with underdeveloped healthcare facilities. ❖ Recognition of Indian facilities as a cost effective alternative by US insurance and employers. ❖ Accreditation initiatives in India. | <p><u>Threat</u></p> <ul style="list-style-type: none"> ❖ Unsynchronized effort of hotel & hospital industry to join hands. ❖ Still lacks in infrastructural support. ❖ Strong competition from countries like Thailand, Malaysia and Singapore. ❖ Under-investment in health infrastructure. |

INDIAN MEDICAL VISA



Travelling to another country for the purposes of undergoing medical treatment is a more frequent and realistic option for those who wish to receive treatment more quickly. In India, medical visas allow their holders to enter the country for a period of up to one year, extendable by a further twelve month period in some circumstances. *The visit must be undertaken with the sole purpose of receiving treatment at a recognised medical institution.*

Indian medical visas or 'M' visas as they are often known provide a temporary immigration service and are not intended as a route to settlement in India. An Indian medical visa does not provide a means to permanent residency in India and does not provide the opportunity to pursue India citizenship. However, medical visas for India provide a useful means of gaining entry clearance for the specific purpose of receiving medical attention.⁽⁹⁾

Unlike an Indian visit visa which is granted for a maximum of six months, a successful medical visa application may result in a grant of leave to remain in India for up to one year. The duration of this visa is determined by the length of time required to perform the medical treatment concerned however, a period of up to 12 months may be permitted, with the facility to extend this by a further 12 months where necessary. Extensions will only be granted on the production of a medical certificate or advice from the appropriate treatment centre. Any extension beyond this period would need to be granted by the Ministry of Home Affairs based on the recommendation of the State Government and appropriate Medical documents.

Whilst visas for medical treatment allow up to three entries, a fourth may be permitted in certain circumstances.

Eligibility:

In India, medical visa applications are specifically intended for the purposes outlined above and as such, they will be scrutinized to ensure that they match the requirements of this type of Indian visa service. Whilst the system is a useful one, it is important to ensure that those temporarily immigrating to India are genuinely doing so in order to receive treatment. As a result, Indian immigration authorities will require the following criteria to be satisfied.⁽⁹⁾

- It must be demonstrated that the applicant has sought preliminary medical guidance in their country of residence and that they have been advised to pursue specialist treatment.
- The applicant must demonstrate that they are seeking medical attention in a recognized institution which specialises in the treatment of the condition.
- In India, immigration authorities will give priority to M visa applications which relate to certain medical conditions. Serious ailments such as heart problems, organ transplants, ophthalmic disorders and neuro-surgery will be given primary consideration.
- Foreign nationals entering the country through this Indian visa service will be required to register their arrival with the Foreigners Regional Registration Office (FRRO) within 14 days.

COST COMPARISION

BETWEEN INDIA AND OTHER COUNTRIES

“First World Treatment at Third World Costs”

Many countries have world-renowned health care system in terms of quality and technology. In fact, most of the private hospitals in India use exactly the same machines and instruments as the most advanced hospitals in the west.

For example:

- Apollo Hospital in New Delhi, India, charges \$4,000 for cardiac surgery, compared to about \$30,000 in the United States.
- A Rhinoplasty (nose reconstruction) procedure that costs only \$850 in India would cost \$4,500 in the United States

Patients can also find lower-priced nonsurgical procedures and tests abroad:

- An MRI in Brazil, Costa Rica, India, Mexico, Singapore or Thailand costs from \$200 to \$300, compared to more than \$1,000 in the United States.
- A six-hour comprehensive fitness exam — including an echocardiogram, stress test, lung-function test and ultrasound of internal organs — costs only \$125 at India’s Fortis Rajan Dhall Hospital; a similar battery of tests in the United States could easily top \$4,000.⁽¹⁴⁾

Procedure Charges in India and the rest of the Countries(USD)

[Table No. 2]

| Procedure | US | UK | Bangkok | India | Singapore |
|-------------------------|-------------|-------------|----------------|--------------|------------------|
| Angioplasty | 30000 | 21000-27000 | 4000 - 5000 | 4000 - 5000 | 5000 |
| Angiography | 2500 - 3000 | 2000 | 1100 | 400 | 800 |
| Hip replacement | 19000 | 13000-16000 | 7000 | 6000 | 6600 |
| Knee replacement | 27000-32000 | 16000-18000 | 7000 | 6000 | 7000 |
| CABG | 30000 | 20000 | 7500 | 6400 | 9500 |
| Lasik | 4000 | 2500-3000 | 750 | 700 | 800 |

COST COMPARISON BETWEEN US/UK/INDIA.(USD)

| PROCEDURE | US | UK | INDIA |
|------------------------------------|-------------|-------------|--------------|
| Bone Marrow Transplant | 200,000 | 200,000 | 25,000 |
| Bypass Surgery | 35,000 | 25,000 | 6,000 |
| Breast Lump Removal | 5000 | 3,200 | 700 |
| Haemorrhoidectomy | 5000 | 3,800 | 1000 |
| Knee Joint Replacement | 25000-35000 | 16000-18000 | 6,000 |
| Lasik Surgery | 4,000 | 2,500-3000 | 700 |
| Cataract Surgery | 4500 | 3500 | 500 |
| In-vitro fertilisation (IVF) cycle | 15,000 | - | 1,800 |
| Hernia Correction | 2,800 | 2,700 | 1,000 |
| Dental Implants | 3500 | 2800 | 800 |

States Promoting Health Tourism

The Indian Ministry of Tourism has announced a number of incentives to give a fillip to the sector. It has identified 31 villages across the country to be developed as tourism hubs. The states in which these villages have been identified include Himachal Pradesh, Gujarat, Maharashtra, Bihar, Karnataka, Madhya Pradesh, Andhra Pradesh, Kerala, Tamil Nadu, Orissa, Assam, Sikkim, Rajasthan and West Bengal.

KERALA - THE PIONEER state Kerala, or God's Own Country as its corporate slogan goes, has pioneered health and medical tourism in India. They have made a concerted effort

to promote health tourism in a big way, which has resulted in a substantial increase of visitor arrivals into the state. Kerala and Ayurveda have virtually become synonymous with each other. However, though Kerala has strongly focussed on Ayurveda and its wide array of treatments and medications, good facilities are also available in the other traditional forms of medicine as well as in modern medical treatment. It is a lucrative destination for people wanting to undergo treatment of certain medical problems who do not need immediate emergency treatment.⁽¹²⁾

GUJARAT : Much of the NRI population, that is of Gujarati origin can take advantage of the medical facilities in Gujarat. Some of the major hospital groups including Apollo already have a presence in Gujarat & others are looking at it as favorable venture.

KARNATAKA: Karnataka and especially Bangalore is now an acknowledged global medical destination. This is because of referral quality health services supported by qualified and experienced medical professionals, reputed medical research institutions, well connected for travel, conducive climate and cost of treatment being just one sixth that of global hospitals.

MAHARASHTRA: Maharashtra has a thriving tourism industry, and is now set to have a new kind of tourism -Medical Tourism. The FICCI - Medical Tourism Council of Maharashtra - is a dynamic initiative jointly undertaken by the Government of Maharashtra, the Federation of Indian Chambers of Commerce and Industry, the tourism industry and private as well as public health tourism providers.

FICCI - Medical Tourism Council of Maharashtra **has been founded with a clear mission in mind:**

- To offer the world's best healthcare facilities coupled with the best heritage and tourist Destinations. To show the world how to deliver "Value for Money" healthcare, with a human touch.
- To project Maharashtra as a synergizing destination for both medical academia as well as international medical conferences.

- To regulate and monitor the medical tourism sector and assist patients from abroad.

Maharashtra has all the necessary ingredients required to make medical tourism a success.

General Objective

To study factors affecting Medical tourism in **Park Group Of Hospitals**.

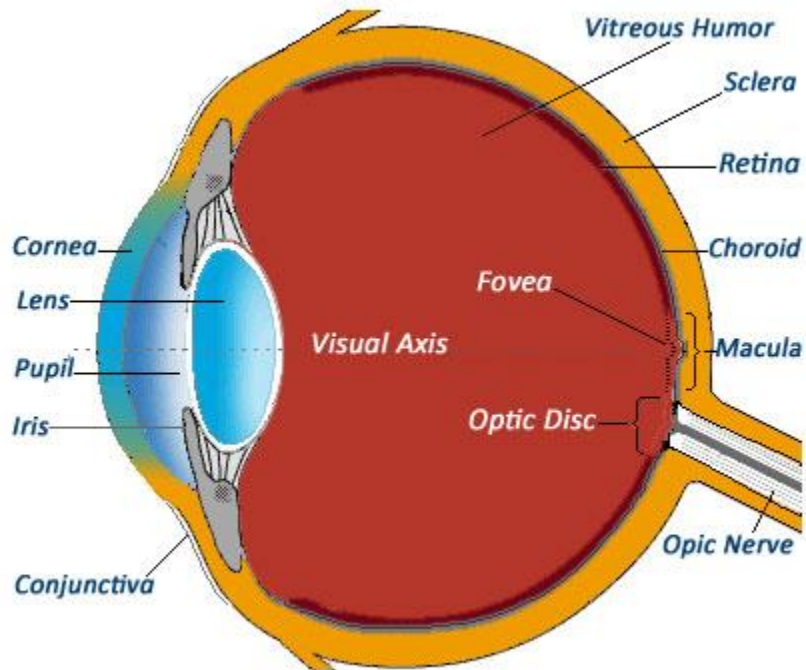
Specific Objectives

- 1)To study cost difference in procedures in US/UK/ compared to India.
- 2)To suggest strategies to increase flow of patients in Park Hospital.

"Ophthalmology"

An untapped avenue for Medical Tourism

The Human Eye



The best way to understand function of the eye is to compare it to a camera. Just like a camera creates images by focusing on an object and allowing specific amounts of light to pass through a hole to create a visual impression on film, the eye functions in much the same way.

When light enters the eye, it passes through the cornea, which transmits the light on to the pupil. The light then passes through the pupil (similar to the aperture in a camera) adjusts the amount of light that is allowed to enter.

The shape of the lens alters itself by adjusting the eye muscles to achieve the desired focus. The focused light finally reaches the retina, which one can equate to a camera film. It is in the retina, where the image is converted into electrical systems, which are then sent to the brain. The brain interprets these signals into what we know as sight.

Ailments of the eye can be classified on the basis of the part affected due to it: -

- a) **Cornea** - Cornea is the transparent, dome-shaped tissue covering the front of the eye. It is like the watch glass of a wrist watch. Cornea is a powerful refracting surface and provides about 2/3rd of the eye's focusing power. It gives us a clear window to look through and is very important for good vision.

Abnormal eye length or irregularities of the cornea can lead to refractive errors such as Myopia, Hypermetropia and Astigmatism.

Myopia or nearsightedness is a very common refractive error, and starts affecting people at a young age itself. It is a condition in which people have difficulties seeing objects in the distance, but may have no problems focusing on objects that are up close. Myopia occurs when the eyeball is too long or the cornea is too steep (curved). When rays of light enter a myopic (long) eyeball, they are focused in front of the retina instead of directly on the retina.

Hypermetropia or farsightedness is a condition in which people have difficulty in focusing at nearby objects but can see objects at far distance clearly. Hypermetropia occurs when the eyeball is too short or the cornea is too flat. When rays of light enter a hyperopic (short) eyeball, they are focused behind the retina. Because of this, the focusing apparatus in the eye must work constantly to make up for the problem and focus images.

Astigmatism means that the cornea is oval like a football instead of spherical like a cricket ball. Most astigmatic corneas have two curves – a steeper curve and a flatter curve. This causes light to focus on more than one point in the eye, resulting in blurred vision at distance or near. Astigmatism often occurs along with nearsightedness or farsightedness.

Presbyopia is a condition in which focusing for near objects is reduced. It generally affects people over the age of 40. Presbyopia is generally believed to stem from a gradual loss of flexibility in the natural lens inside our eye. The eye's lens stiffens

with age, so it is less able to focus when you view something up close. The result is blurred near vision.

Apart from the refractive errors, diseases of the cornea can lead to loss of its transparency, thus reducing the vision. Injury, infection, genetic diseases and malnutrition can affect the functioning of the Cornea.

Treatment for ailments of cornea: -

1. **Refractive errors** – Refractive errors are the most prevalent eye disorders. Traditional treatments for refractive procedures include use of spectacles or contact lenses to correct vision.

Modern Lasik Laser vision correction has been developed in the past three decades, whereby an excimer laser is used to alter the shape of the cornea in order to remove refractive errors.

The latest advancement in the field of Lasik procedure is Customized vision correction procedure, which uses the latest technology to create a personal vision profile and form an individualized, customized and tailor made procedure.

Traditionally, an instrument called microkeratome was used to create the flap on the cornea before the actual laser procedure was done. Although this is a very sophisticated piece of technology, it had its own disadvantages.

Advancements in the field of Vision Correction procedures has led to introduction of Femto Second laser to create the corneal flap, thereby making the entire vision correction procedure 100% blade free. This all laser Lasik procedure is the latest technology available in refractive surgeries. It is the only vision correction procedure approved by NASA for its astronauts and by US Naval Air force for its pilots.

- b) **Lens** - The lens is a transparent, biconvex structure in the eye that, along with the cornea, helps to refract light to be focused on the retina.

Cloudiness of the natural lens leads to decrease in vision – this is known as cataract.

Cataract seen in the old age may be caused by normal aging process but at younger age, it may be caused by diseases like uveitis, diabetes, heredity, injury, radiation or other infections.

Traditionally, a cataractous lens was removed by making a large incision on the edge of the cornea and an artificial lens was implanted.

Again, with improvement in technology, a newer technique called **Phacoemulsification** has been developed to treat cataract. In **Phacoemulsification**, the incision is smaller (3.2 mm) and the nucleus of the lens is converted to a pulp using high frequency sound waves and sucked out. Then a foldable IOL is inserted through small incision and positioned into capsular bag.

- c) **Retina** - is the inner most layer of the eye. A healthy retina is necessary to transfer the image formed by the eye to the brain. It can be affected by various diseases. The most common of them are:

1. Diabetic Retinopathy
2. Age Related Macular Degeneration
3. Retinal Detachment

Treatments for ailments in retina include Laser photocoagulation and Vitrectomy in case of Diabetic Retinopathy and laser and cryotherapy in case of retinal detachment.

- d) **Aesthetic Procedures** – apart from the ailments related to anatomy of the eye, many other disorders such as squint and ptosis (drooping of the eye lid) require special treatment in consultation with an ophthalmologist.

India has seen a lot of advancements in the field of Ophthalmology. As a result, many patients from abroad are coming to India to seek treatments for their eye ailments.

Not only are these procedures less expensive than that in developed nations such as USA and UK, the technologies used in treatment of eye diseases in India is at par or even better than many other nations.

Cost difference in different ophthalmic procedures: -

| PROCEDURE | USA (\$) | UK (\$) | INDIA (\$) |
|--------------------|-----------------------|-----------------------|----------------------|
| Vision Correction | 4000 | 2500-3000 | 700 |
| Cataract (Phaco) | 4000-5000 per eye | 3500-5000 per eye | 500 per eye |
| Retinal Detachment | 3500-4500 per sitting | 3000-4000 per sitting | 600-1000 per sitting |
| Ptosis | 2900-3600 | 3500-4500 | 750-1000 |

Factors that encourage patients from abroad to seek eye care in India can be classified on the basis of facilities/healthcare setup in their home countries: -

| Group | Description | Countries | Demand Drivers |
|------------|---|--|--|
| I | Non-Residential Indians | Across the world | Low cost Healthcare combined with a trip back home. |
| II | Patients from Countries with underdeveloped facilities | Nepal, Burma, Bangladesh, Mongolia, African Countries, Middle East and Latin America | Quality Healthcare at Affordable Prices. |
| III | Patients from developed countries (state owned healthcare system) | UK, Canada | Capacity constraints for services in home country and long waiting time for elective procedures. |
| V | Patients from developed countries (private healthcare system) | USA | High cost of healthcare for the uninsured. |

Group I – Non-Residential Indians (NRIs)

Ahmedabad's portal www.ahmedabad.com and FICCI in a study on NRIs coming back to India to seek healthcare has reported: -

- A large number of NRIs prefer coming back to India to seek health care as they are not only guaranteed excellent treatment at a far lower cost, but also a trip back home.
- Sterling Hospital gets at least 5-7 NRI patients every week.
- 15 per cent of patients at Krishna Heart and Super-specialty Institute at Ahmedabad are NRIs.
- BBC heart care at Jalandhar and Ludhiana received nearly 30 NRI patients every month.
- The Apollo group alone has so far treated 1,00,000 international patients, 64 % of whom are of Indian origin. ⁽¹³⁾

Group – II Patients from Countries with underdeveloped facilities

The second category of patients coming to India for availing healthcare services is from neighboring developing countries such as Nepal, Pakistan, Afghanistan and African countries or from Middle East, where either latest technology in healthcare is not available or is very expensive. Such patients in the past use to seek healthcare in USA or Europe, but with the growing consciousness about advanced skills of Indian doctors and availability of world class technology in their minds has gradually shifted the traffic to Indian hospitals.

Group – III Patients from developed countries with state owned healthcare system.

For people living in developed nations that have a state owned and state funded healthcare system, there is a big concern of waiting times, especially for non-urgent and elective procedures. For example, in UK, health care is rationed on the grounds of clinical need,

meaning that emergency cases like heart attacks get instant access where those with less urgent needs such as cataract surgery are given lower priority and so wait longer. This means that waiting times for some conditions and surgical procedures can be months long.

Further, such non-urgent or elective procedures are available on retail i.e. on private, but the cost of such procedures is so high that only a fraction of people avail them.

Similar situation is seen in Canada, where there are huge waiting lines for non-urgent and elective procedures.

Ophthalmologists in Canada can do only a fixed number of surgeries per year, therefore if one wish to see a particular doctor, the waiting time may run up to 3-4 months.

All these factors in such countries are forcing its residents to seek healthcare outside their geographical boundaries. For such patients, health tourism destinations such as India, Singapore, Malaysia and Thailand is a viable option that gives them high level of quality care at a fractional cost.⁽¹⁶⁾

Group IV - Patients from developed countries with private healthcare system.

In countries such as USA, most medical treatment is covered by insurance. However, a large part of the population (16%) is uninsured that accounts for 47 million people. The cost of private healthcare is so high that an uninsured person cannot avail decent healthcare facilities without burning a big hole in his pocket.

Additionally, patients are finding that insurance either does not cover non- life threatening procedures such as orthopedic surgery (such as knee/hip replacement) or imposes unreasonable restrictions on the choice of the facility, surgeon, or prosthetics to be used.

In eye care also, procedures with a huge demand such as Lasik (vision correction procedure), unless medically necessary are not covered by insurance companies.

Again, such factors have been highly influential in steering a large pool of patients from USA, who wish to avail high end medical facilities at 1/6th of what it would cost them in the US.⁽⁸⁾

Park Group Of Hospitals – SWOT w.r.t. Medical Tourism

| | |
|--|---|
| <p><u>Strength</u></p> <ul style="list-style-type: none"> ■ Backed by a team of renowned Surgeons. ■ Cutting edge technology at par with global standards. ■ State of the art infrastructure. ■ First NABH Accredited hospital in West Delhi. ■ Value for money as compared to developed countries. | <p><u>Weakness</u></p> <ul style="list-style-type: none"> ■ Lack of Synchronised efforts for a targeting patients on a large scale ■ Low awareness of the brand in the International market. |
| <p><u>Opportunity</u></p> <ul style="list-style-type: none"> ■ Collaboration with medical tourism facilitators. ■ Increasing initiatives from private players to promote Indian medical tourism leading to awareness on Indian healthcare. ■ Increase in use of internet to seek information on healthcare. | <p><u>Threat</u></p> <ul style="list-style-type: none"> ■ Apprehension among foreign clients to seek services. ■ Established super multi specialities centres like Fortis, Max, Artemis and Medanta. ■ Upcoming Fortis hospitals in Gurgaon. |

RESEARCH METHODOLOGY

TOOLS OF DATA COLLECTION:

Primary Research:

This has been conducted through various questionnaires and face to face interviews from the foreign patients directly.

The Sample Size- 100

Time Taken - 2 months

{ Questionnaire is enclosed in the annexure }

Secondary Research:

The four main sources of secondary information:

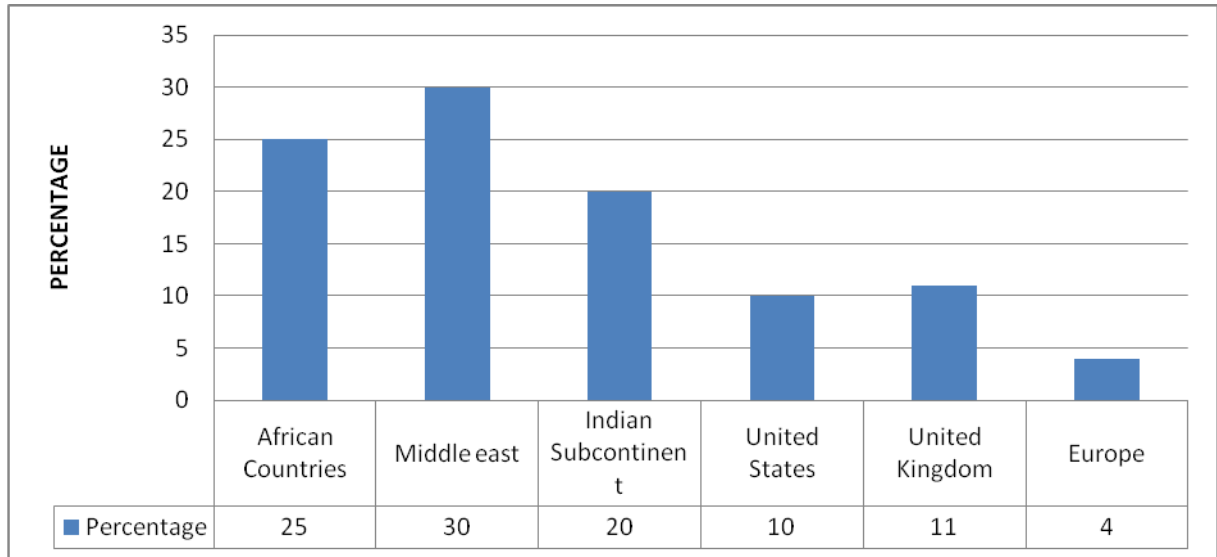
- ⇒ Periodical articles (refer to magazines, journals, and newspapers.)
- ⇒ Statistical sources
- ⇒ Past evaluations and research
- ⇒ Internet resource site

Information has been sourced from namely, Medical books, newspapers, trade journals, and magazines, industry portals, trade associations, monitoring industry news and developments.

ANALYSIS OF DATA

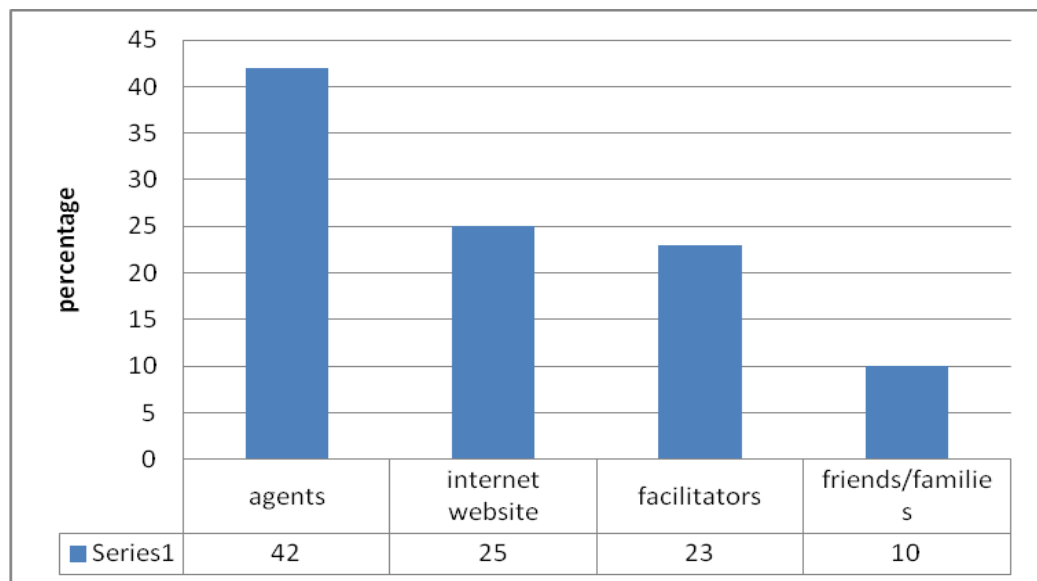
A1. Most patients are from the **Middle East and African Countries**. Followed by Subcontinent. Least number of patients are from US/UK and European countries.

COUNTRIES



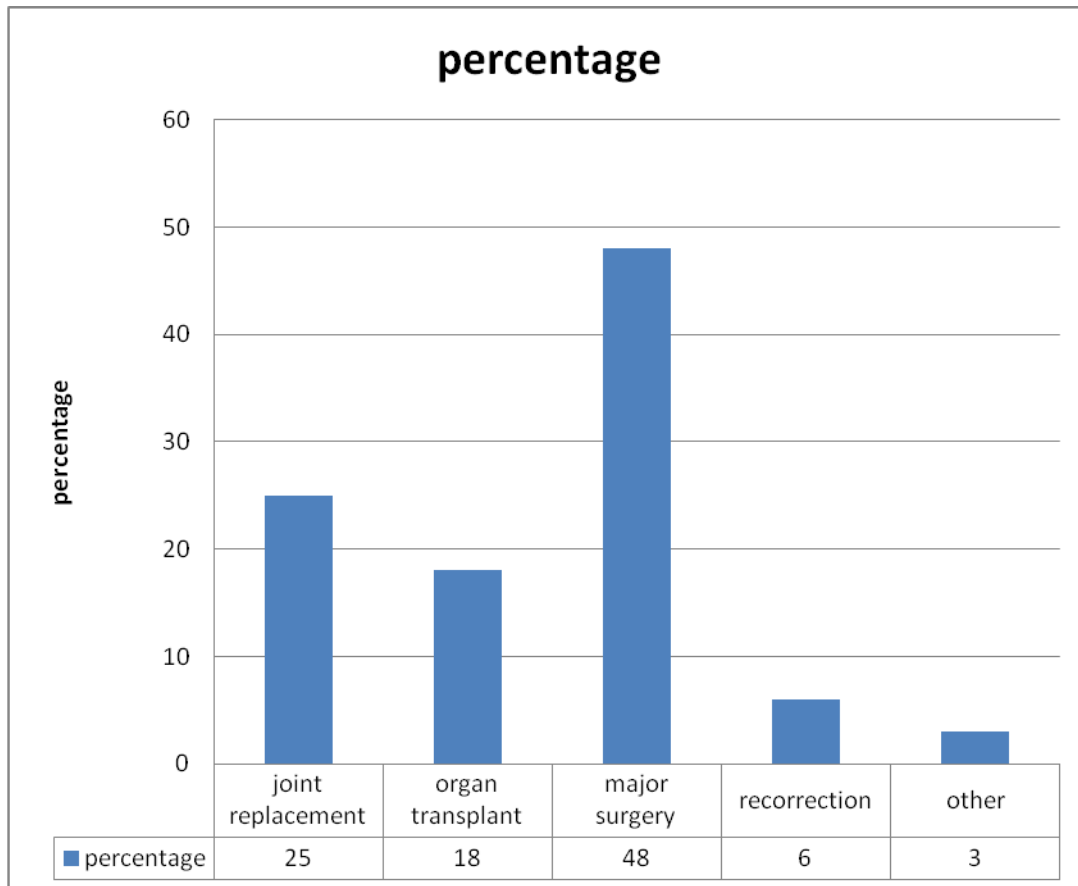
A2. The Most popular source of information for patients are the **Agents**.

SOURCES OF INFORMATION



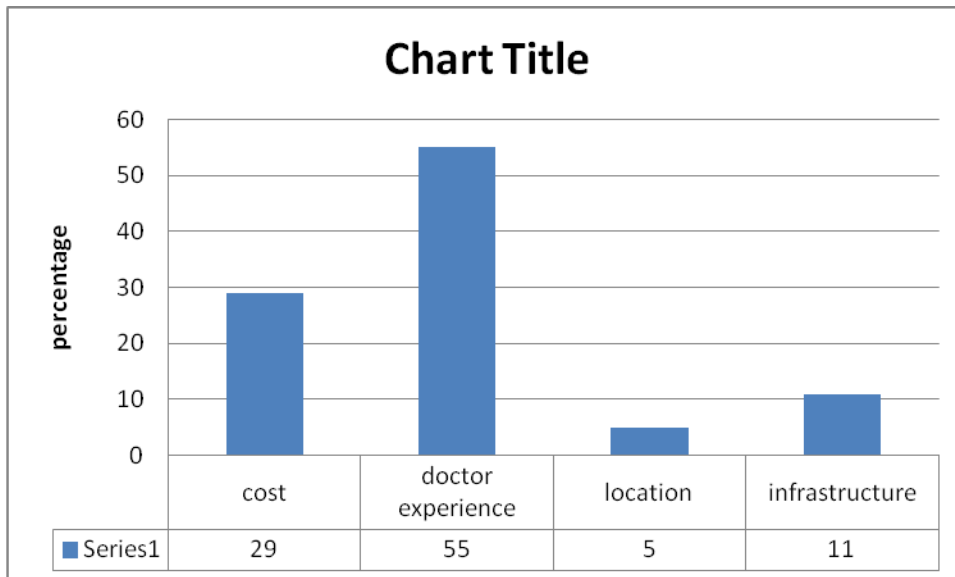
Ans3) Maximum patients came for **Major Surgeries (cardiac,neuro and carcinoma etc) procedures.**

PROCEDURE



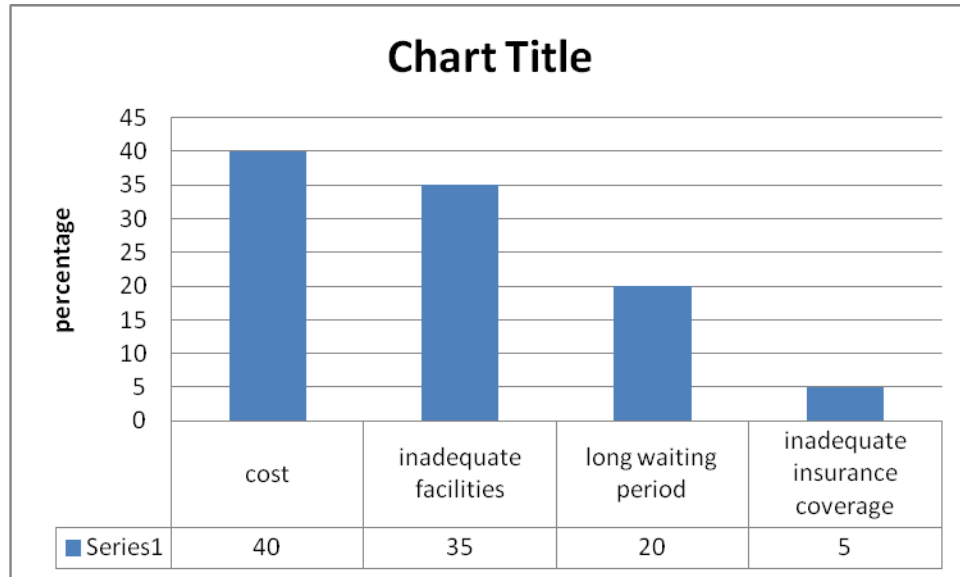
Ans4) **Doctors experience** was the most important factor for patients.

Important factors before seeking treatment



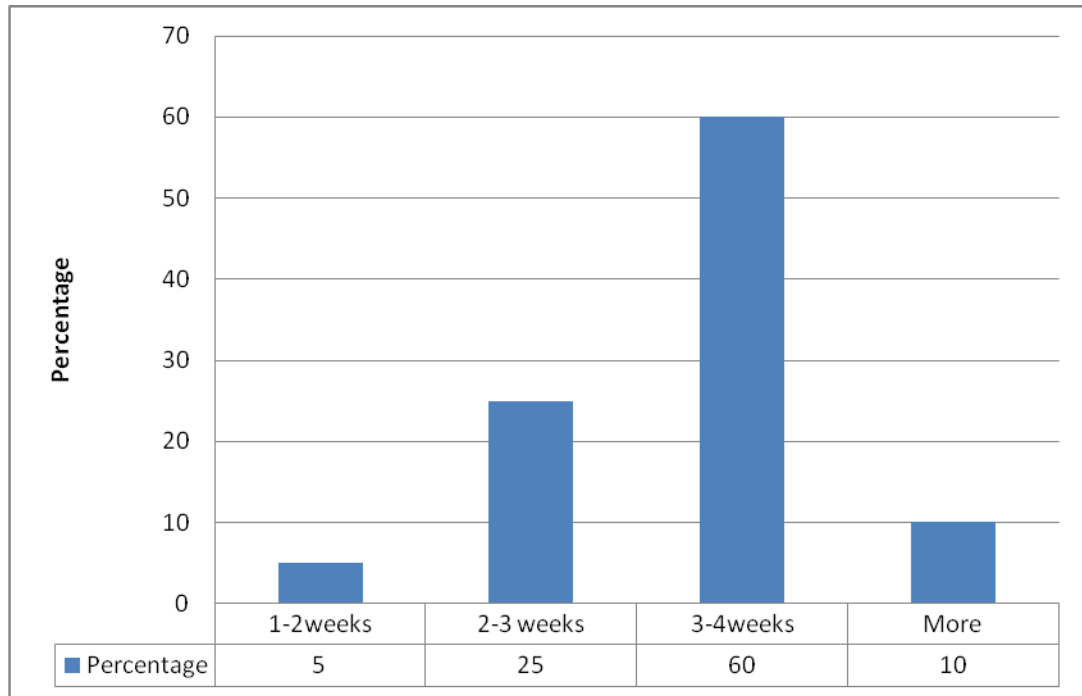
Ans5) **cost of treatment** in home country was the leading cause for patients seeking treatment in Park Hospital

Reasons for seeking treatment abroad

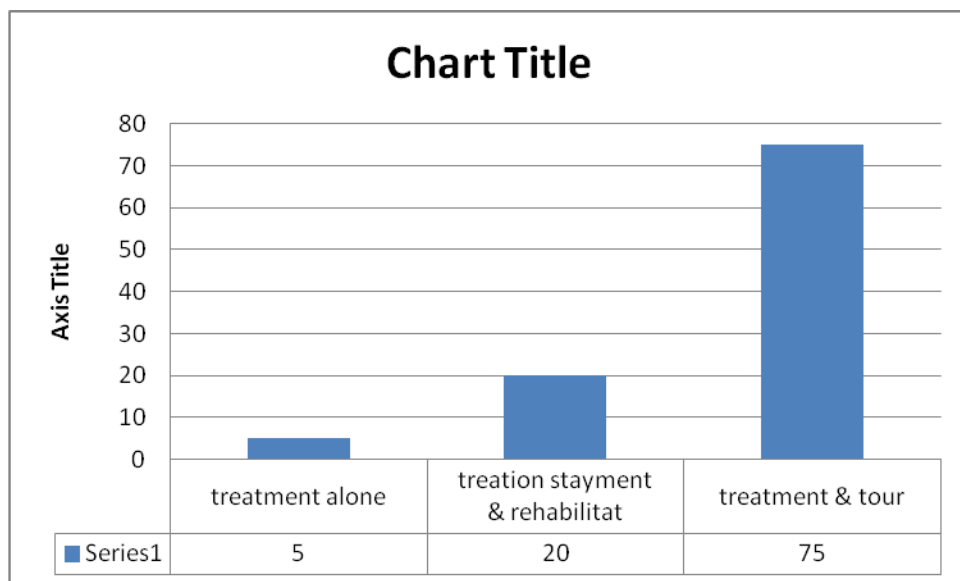


Ans6) For majority of the patients it took 3-4 weeks to get the visa.

Time taken to Procure Visa



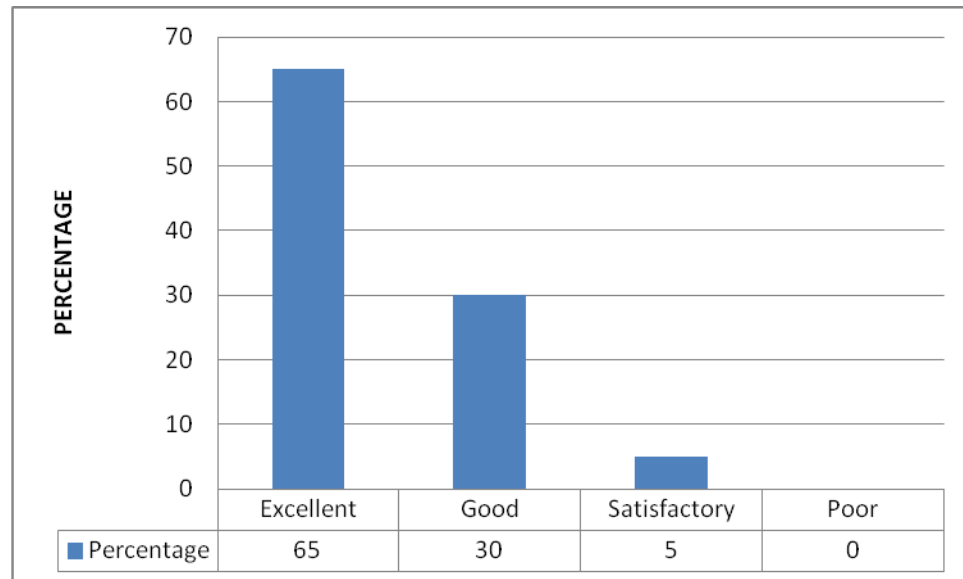
Ans7) Majority of the patients preferred touring after treatment.



Ans8) **Rating of Areas.**

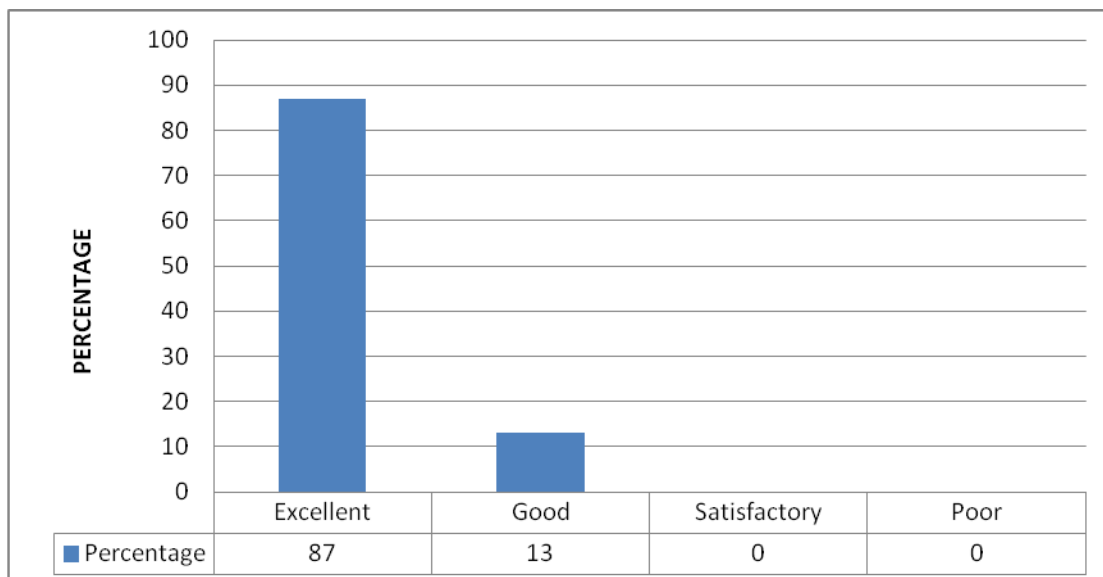
a)

RECEPTION/HELP DESK

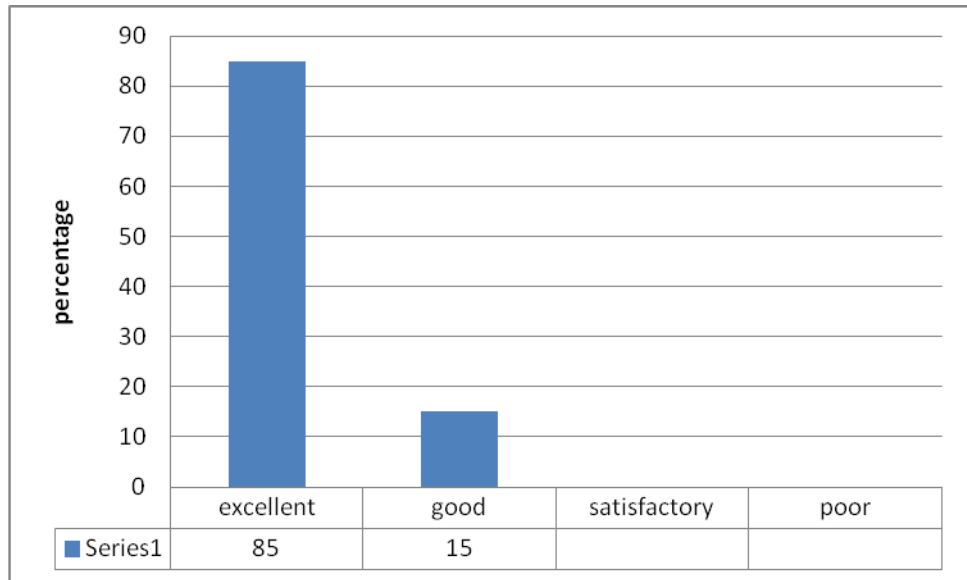


International Patient Coordinators

b)



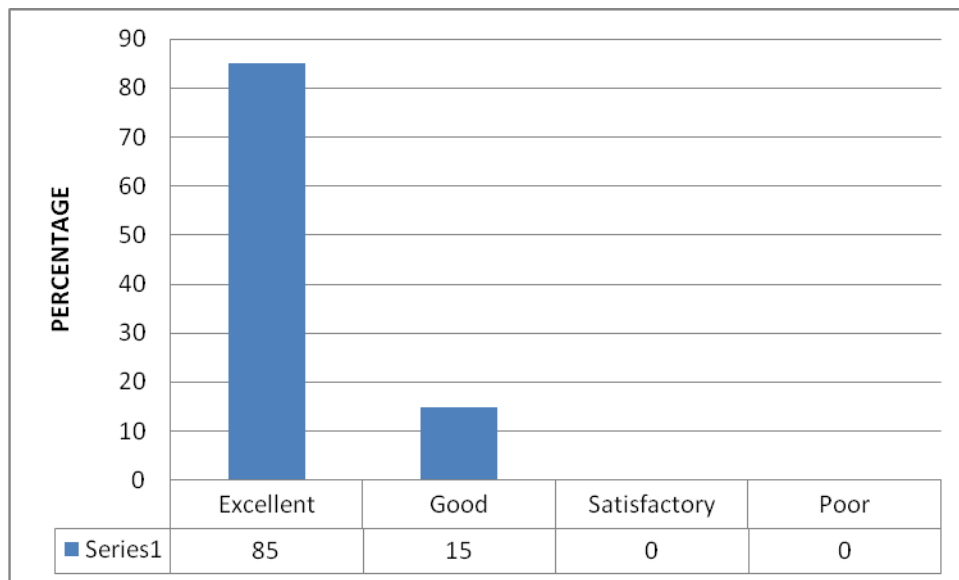
DOCTORS



c)

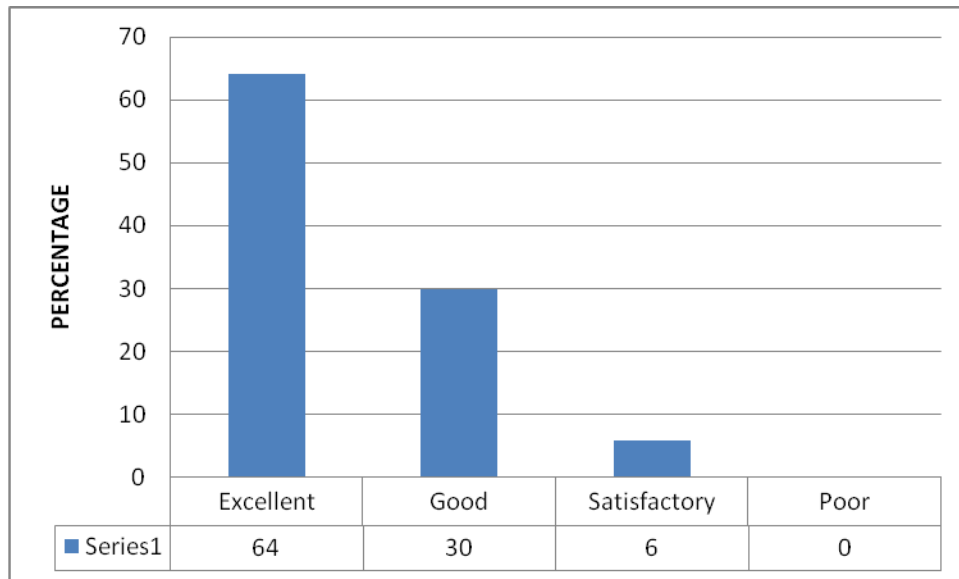
d)

TECHNICIANS

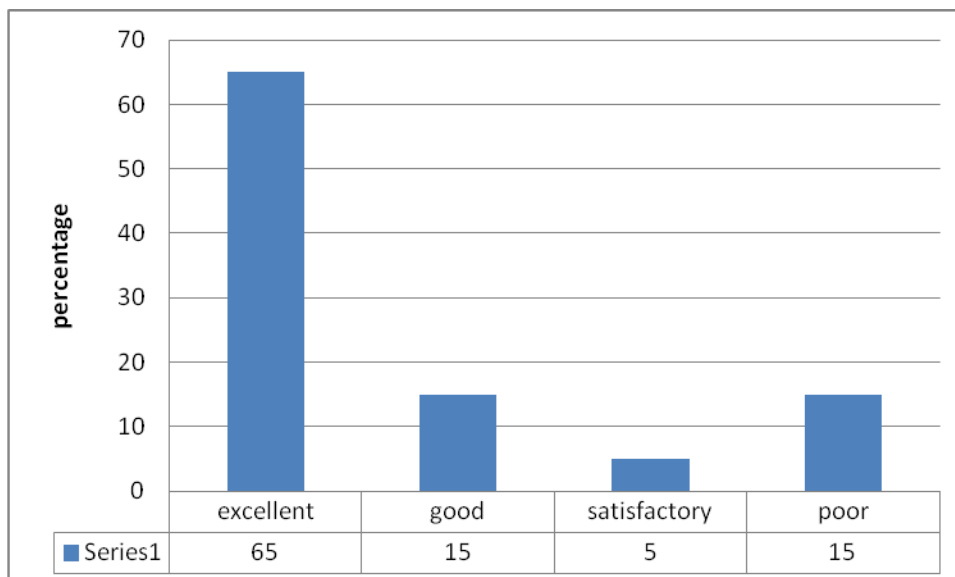


e)

COUNSELLORS



BILLING



**STRATEGIES TO INCREASE FLOW OF INTERNATIONAL
PATIENTS IN PARK HOSPITAL.**

Activity 1: Tie up with Medical Tourism Facilitators

Medical Tourism Facilitators are organizations or companies which seek to bring together a prospective patient with a service provider, usually a hospital or a clinic.

These groups are generally facilitators and developers of medical tourism, which brings into play a number of issues that do not apply when a patient stays within their own country of origin.

Role of Medical Tourism Facilitators

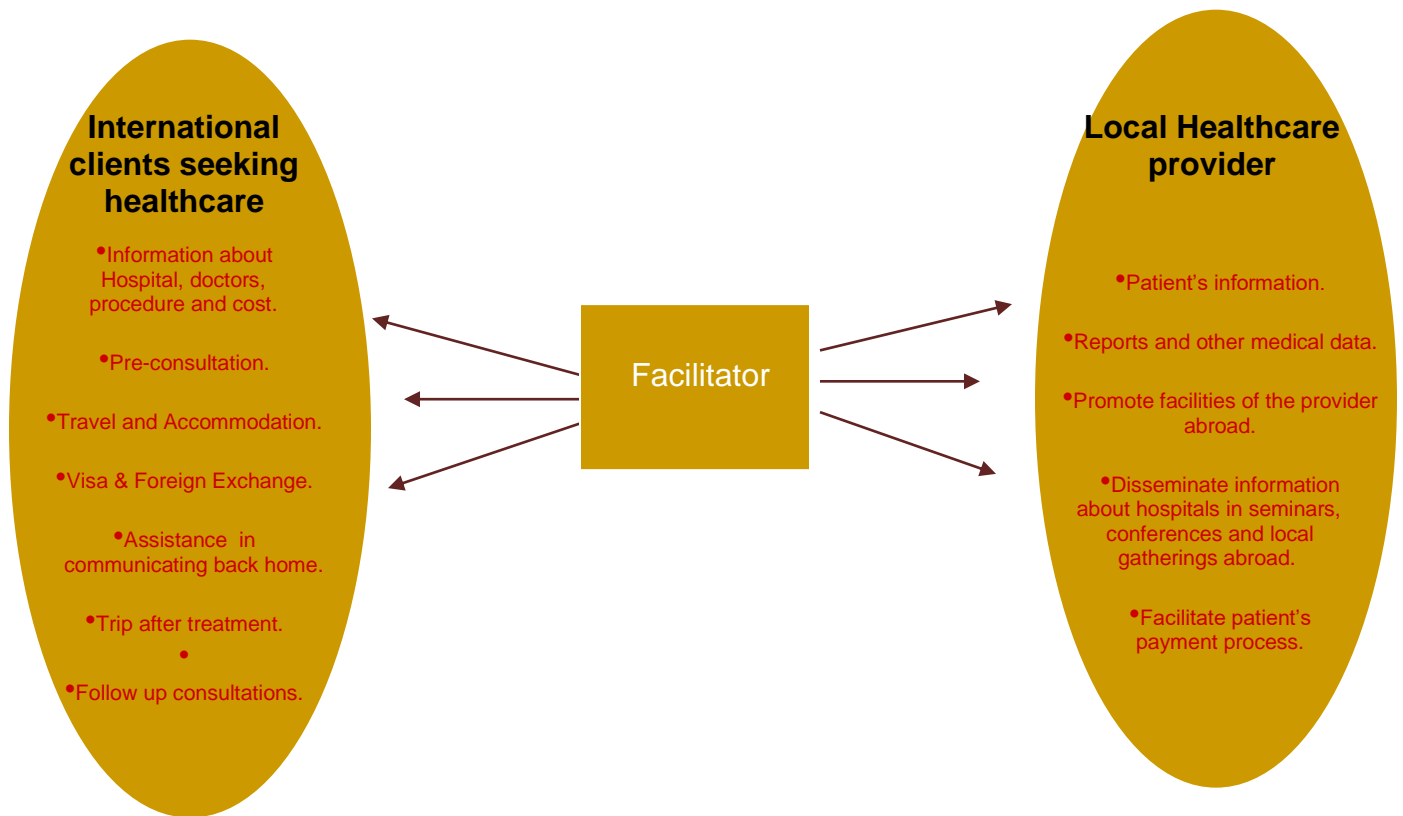


The basic role of a Medical Tourism Facilitator (MTF) is to act as a link between International patients seeking healthcare and the Local Healthcare provider.

They investigate healthcare providers to ensure quality and screen customers to assess those who are physically well enough to travel.

They often have doctors and nurses on staff to assess the medical efficacy of procedures and help patients select physicians and hospitals.

Services of a Medical Tourism Facilitator



Types of Medical Tourism Facilitators

- International

- Healthbase
- MedRetreat
- IndUS

- Local

- Sahara
- Recover Discover
- Indicure

Benefits to Park Hospital by such tie-ups: -

- Increase in number of international patients.
- No organized efforts done so far.
- Initial outlay to promote facilities abroad.
- Important for a Single-specialty day care setup.

Cost

Such MTF charge a 10-20% facilitation fee from the healthcare provider for their services.

Logistics Required

- Comprehensive information on ailments, treatment options and cost.
- Dedicated staff to coordinate patient's treatment and other services.
- Internet and other communication services.

Top Medical Tourism Facilitators in India: -

- 1) **Sahara Medical** – It is the part of US\$ 10.87 billion Sahara India Pariwar which is one of India's largest business conglomerates and offers complete wellness journey of patients across the borders. Sahara Medical Tourism has consolidated alliance with state of art hospitals and world class surgeons all across India. Its Primary aim is to facilitate the highest standard of quality medical treatment & Patient care at a cost which is affordable and enjoyable. Sahara's team of professionals with global presence in the fields of Healthcare, Travel, Marketing and Operations provide the best of the services.⁽³⁾

Sahara Medical has a strong presence in the up market countries such as USA and UK, and had facilitated patients coming for various procedures such as: -

- a) Coronary Angiography/Angioplasty and CABG
- b) Bariatric Surgery
- c) Cosmetic procedures
- d) Ophthalmology
- e) Dental care

It has tie-ups with leading hospitals all over India, as their preferred partners in delivering healthcare. Some of its partners include – Fortis Group, Apollo Hospitals, Max Hospitals, Sri Ganga Ram and Wockhardt.

In addition to hospitals, Sahara Medical also has tie ups with many Ayurvedic centres, spas and offers visit to numerous tourist destinations to foreign patients.

- 2) **Recover Discover** – Lead by a team of highly skilled Doctors and Management staff, Recover Discover is a health tourism facilitator which has a strong presence in USA, Canada and South Asia.

Similar to others, Recover Discover (RD) offers all facilities of a facilitator such as managing patient information, seeking appointments and carrying out administrative work to process patient's travel to India. The USP of Recover Discover is its tie ups with leading corporate in the west for providing healthcare services in India. It has special plans for corporates who wish to associate with RD.

Recover Discover provides global corporate medical treatment abroad that includes hospitalization in internationally accredited hospitals. A typical corporate medical tourism plan would also accommodate a partner for the patient and would involve an option for vacationing before /after the treatment. Some companies also offer corporate medical treatment abroad with a possible cash back options for the employee provided from the savings on corporate health care.

Corporate medical treatment abroad is a very real and viable alternative. Employers all over the world have realized that retiree healthcare coverage has placed an excessive burden on their corporations. In fact companies offering small business health insurance plans have collaborated with RD with a wide choice of hospital partners and destinations.

Recover Discover has partnered with leading hospitals in India and offers all elective (non-emergency) surgeries through corporate healthcare packages with its alliance partners.

- 3) **Indicure** – Solely focusing on collaborating with African countries, Indicure’s vision is to “assist development of state-of-art healthcare facilities in Africa and realize the dream of disease-free Africa. Thus, ensuring better life for everyone”

Indicure aims to provide healthcare facilities that are not available in Africa and are priced exorbitantly in USA and UK.

Activity 2: Advertise in International Print Media catering to NRIs

Leading NRI Publications in USA

| | NEWS INDIA TIMES | INDIA WEST | DESI TALK (NY/NJ) | SHER – E - PUNJAB |
|---------------------|-----------------------------|-------------------|------------------------------|------------------------------|
| | | | | |
| Readership | 100,000 + | 110,000 + | 100,000 | 45,000 |
| Frequency | Weekly – Friday | Weekly - Friday | Weekly – Friday | Weekly – Friday |
| Quarter Page | Rs 38,700 | Rs 49,820 | Rs 15,500 | Rs 12,600 |
| Half Page | Rs 70,950 | Rs 68,150 | Rs 24,675 | Rs 24,000 |
| Full Page | Rs 1,35,450 | Rs 1,03,400 | Rs 49,350 | Rs 45,680 |

Leading NRI Publications in UK

| | PUNJAB TIMES | DES PARDES (PUNJABI) | ASIAN TRADER | INDIA LINK |
|------------------------------|-------------------------|---------------------------------|---------------------|-------------------|
| Readership | 3,00,000 + | 1,50,000 | 1,50,000 | 1,28,000 |
| Frequency (per month) | 4 (Weekly-Wednesday) | 4 (weekly-Thursday) | 2 (Fortnightly) | 2 (Bi-monthly) |
| Full Page | Rs 1,32,660 | Rs 1,35,000 | Rs 110,000 | Rs 79,200 |
| Half Page | Rs 65,340 | Rs 45,000 | Rs 55,000 | Rs 44,000 |
| Quarter Page | Rs 32,670 | Rs 22,500 | Rs 25,000 | Rs 22,000 |

Leading NRI Publications in Canada

| | THE WEEKLY VOICE | AWAAZ (PUNJABI) | THE LINK |
|------------------------------|-----------------------------|------------------------|----------------------|
| Readership | 3,00,000 + | 1,50,000 | 1,50,000 |
| Frequency (per month) | 4 (Weekly) | 4 (Weekly-Friday) | 4 (Weekly-Friday) |
| Full Page | Rs 1,59,420 | Rs 86,100 | Rs 96,640 |
| Half Page | Rs 80,840 | Rs 47,730 | Rs 43,645 |
| Quarter Page | Rs 48,480 | Rs 31,930 | Rs 21,820 |

A number of corporate hospitals are promoting their medical services via the local media, newspapers and magazines that cater specially to NRI population in USA, UK and Canada.

Newspapers such as Desi Talk, Des Pardes and The voice are a few examples of publications that are edited and managed by NRIs abroad. They carry information about current events in India, along with information about local events and other relevant advertisements that are of interest to NRIs.⁽¹⁶⁾

Resources Required for International Advertisements

- Information on demographics of NRI population.
- Circulation and Readership of NRI publications.
- Information on cost involved.
- Agency to coordinate advertisements.

Action Plan

For USA, the following publications are ideal: -

- a) Desi Talk – It covers the up market cities of New York and New Jersey and enjoys a readership of 100,000 NRIs.

desi TALK

In New York

Vol. XII No. 19 May 9, 2008

CITY JOURNAL

Angie Kamath
appointed Deputy
Commissioner
for Workforce
Development
by NYC
Department
of Small Business
Services (SBS)



THE ARTS



Art, photography and philosophy meld together in 'Oneness of Creation'

'The Oneness of Creation: Cosmopolitan India in Ancient Times,' a film by art historian, film maker and photographer Benoy K. Behl, which was screened at the Consulate General of India in New York on May 5, takes the viewer on a journey of Indian art to prove a thesis.

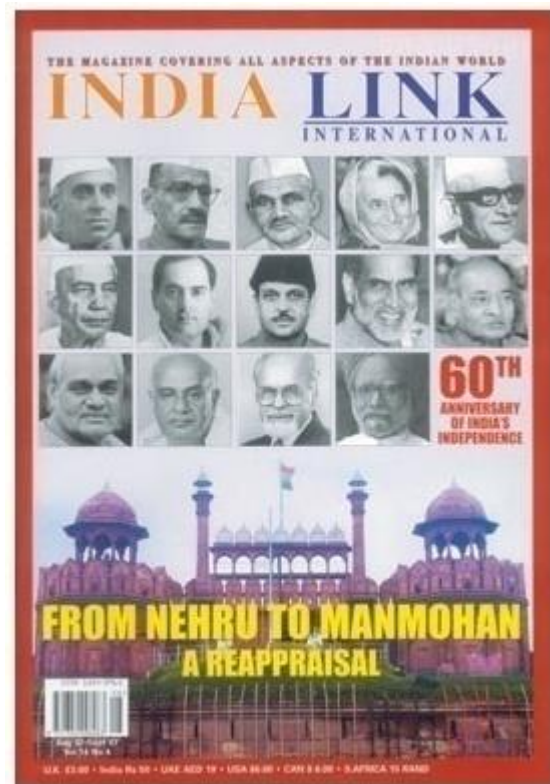


New York and New Jersey have more than 400,000 NRIs, which is a huge potential market to spread awareness about CFS's services. They in turn can refer relatives and friends living in other parts of US.

Sher -e- Punjab – Caters to the affluent Punjabi speaking community in US, circulating 12,000 copies and reaches the affluent Punjabi community

For UK, the following publications can be selected: -

- a) **India Link (Magazine)** – Caters to Indians, Bangladeshis and Pakistanis in UK and also to overseas community of the Indians sub continent who had initially migrated to the African continent but are now residents in the UK. The publication is read by professionals and businessmen, together with national and local government officials.



- b) **Punjab Times** – Published in Punjabi and English, it reaches out to all Punjabi speaking Asians in the UK. It has a huge readership of 300,000 in UK and Europe.

For Canada, following publications can be selected: -

- a) **Weekly Voice** – It is a newspaper which caters directly to the growing South Asian population of Toronto and surrounding areas. The primary target market is the affluent business people and professionals within its community. This newspaper

deals with facts and issues that affect South Asians. The coverage consists of community news and local news, besides Indian and International news.

- b) **Awaz (Punjabi Weekly)** - The Punjabi Weekly Voice is a weekly Punjabi language newspaper which caters directly to an existing and expanding Punjabi-Canadian population. The Punjabi Community is approximately 60% of the total South Asian market. This newspaper caters more to readers with greater interest in news from India and Punjab.⁽⁸⁾

Activity 3: Use Website as a marketing tool

Before starting to think of using website as a promotional tool to market the organization or a product, one must make sure that the information on the website must include relevant information on what the company deals in, what kind of products it sells and how the website can facilitate dissemination of information.

C David Shepherd PhD, Professor, Kennesaw State University, in his study titled “**Hospital Marketing and the Internet: The Adoption of an Innovation**” has described how since 1995, hospitals have increased the use of internet for targeting more clients seeking healthcare by putting information about the hospitals, its floaters, specialties that it deals in and a feedback mechanism so that patients can post their queries and get information on their specific issues.⁽²⁾

Patients seeking health care usually log on to leading search engines such as Google.com or yahoo.com and enter their query, usually in terms of a specific ailment or a generalized keyword for a disease. For example, to search for hospitals looking for hip replacement surgery, a surfer may like to look in for keywords such as – *ortho, orthopedics, orthopedic hospital, hip replacement, top orthopedic doctor etc.*

In order to increase traffic to the website, a process known as Search Engine Optimization (SEO) is undertaken so that the website is optimized in order to be accepted by search engines and show the website among the top rated.

Technically, Search engine optimization is the process of improving the volume and quality of traffic to a web site from search engines via "natural" ("organic" or "algorithmic") search results for targeted keywords.

Usually, the earlier a site is presented in the search results or the higher it "ranks", the more searchers will visit that site. SEO can also target different kinds of search, including image search, local search, and industry-specific vertical search engines.

As a marketing strategy for increasing a site's relevance, SEO considers how search algorithms work and what people search for. SEO efforts may involve a site's coding, presentation, and structure, as well as fixing problems that could prevent search engine indexing programs from fully spidering a site. Other, more noticeable efforts may include adding unique content to a site, ensuring that content is easily indexed by search engine robots, and making the site more appealing to users.⁽²⁾

Key things to be kept in mind for a hospital's website seeking to increase its internet audience among foreign clients: -

■ Managing Information

- Include relevant information to increase client's information about different ailments, treatment options and facilities provided at the centre.

■ Separate section for International clients

- Information about facilities at the centre.
- Comparison of cost.
- Information on medical visa.
- Feedback/enquiry form.

■ Patient Testimonials

In a study cited by The New York Times, "word-of-mouth" was listed as the #1 influence in swaying a decision and was cited by 71% of respondents.

In healthcare, a lot of emphasis is provided to what one would hear about a healthcare provider from patients it has catered to in the past. Including experiences of past clients in an effective way to add authenticity to services provided and also to add credit to the quality of service.

Resources Required

- Well designed website with properly designed and formatted pages.
- List of 30-40 expected keywords that an information seeker is likely to enter in the search engine.
- External agencies to draft and submit web pages as per desired keywords.

Activity4

Tie-ups with Foreign Insurance Companies

In an attempt to rein in exploding medical costs, a growing number of health insurance companies are offering their customers, individuals and employers, an opportunity to get their health care overseas. Some medical and dental procedures overseas can cost up to 80 percent less, excluding travel costs, than in the states.

According to a 2008 survey conducted by Deloitte Center for Health Solutions, nearly 40 percent of Americans said they would travel overseas to receive medical treatment if the cost was cut in half and the quality of care was comparable.

Health insurance providers are slowing joining in. Among them are:

- **BUPA INTERNATIONAL**
- **BLUE CROSS BLUE SHIELD**
- **AETNA**
- **ALICO(AMERICAN LIFE INSURANCE COMPANY)**
- **CIGNA**
- **SEVEN CORNERS INC**
- **INTERNATIONAL SOS**
- **ASIA RESCUE & MEDICAL SERVICES**
- **ASIA MEDICAL ASSISTANCE**

Some US insurance providers have agreements with foreign hospitals to coordinate post-procedure care.

Activity5

Tie-ups with with Corporates in other countries.

Tie-ups can also be initiated with corporates in other countries. The patients can avail treatment and the organizations can reimburse the medical bills to their employees.

Activity6

International Help Desk

Park Hospital Group of Eye Hospitals can establish offices and contact centres for the convenience and awareness of international patients.

These help desks can act as sources of information for international patients and they can fasten the process for such patients.

Apollo offers similar facilities in Kathmandu.

Such initiatives can help in branding and promotion of the organisation. At the same time it will lead to increased patient flow.

Activity7

Target NRI Population

The hospital can promote itself among locals and Indians living abroad by increasing its visibility during festivals.

It can actively target the NRI population by different ways of promotion during the festive seasons.

Activity8

Tie-ups with International NGO's

As a part of its promotional Strategy, Park Group of Hospitals can work with International NGO's working for achieving the target of Vision 2020. This will give a positive image to the organization globally.

Discussion

Medical Tourism is a sunrise sector with immense potential .According to a 2008 survey conducted by Deloitte Center for Health Solutions, nearly 40 percent of Americans said they would travel overseas to receive medical treatment if the cost was cut in half and the quality of care was comparable.

Currently, the industry is worth approximately \$40 billion and is growing by up to 34 percent each year.

Government and private sector studies in India estimate that medical tourism could bring between around \$2 billion US into the country by 2012.

There has to be a greater inter sectorial coordination among all the stakeholders like the Government, Healthcare Providers, Insurance sector, Tourism industry and also the media.

Park Hospital is a leading provider at a affordable cost. It has a good reputation in the market and efforts must be made to promote it globally as the leading multi super speciality Hospitals.

With the most competent doctors in the field and state of the art equipment, Park Group of Hospitals has the potential to be the first choice for the international patients.

With the correct implementation strategies Park Hospital can increase its flow of international patients and leave a strong impression in the minds of its target patients.

Currently as the number of patients are few from countries like US/UK/Europe, efforts should be made to target these patients.

Most of the patients are keen to go Joint Replacement. This is a good opportunity to target this market.

CONCLUSION

- 1) The Clinical outcomes in India are at par with the world's best. Having internationally qualified & experienced Doctors is a tremendous advantage. Costs of the medical procedures in India are approximately 1/5th to 1/10th of costs in the west. This cost differential enables patients the opportunity to have a vacation in a foreign location. Recover in a luxurious atmosphere and then return home having spent less than the procedure alone in their country.
- 2) The most prominent markets for Indian Medical tourism are USA, UK, UAE, African Nations and Southeast Asia. The government should provide tax incentives to hospitals to promote India as a health and wellness tourism destination.
- 3) There has to be greater inter sectorial coordination among various stakeholders like Government, Private players, Travel & Tourism industry and also the media.
- 4) Agencies specializing in international medical travel, known as Medical Tourism Facilitators (MTF) are a growing part of the medical travel industry and work with hospitals, clinics, physicians, surgeons, airlines, hotels and recovery retreats abroad to offer patients the best quality at the most affordable rates. Park Group of Hospitals must have tie-ups with maximum number of these facilitators to expand its network.
- 5) With big corporate hospitals coming into picture they have attained international benchmarks. More such hospitals are going for International Accreditation. Park Group of Hospitals must work towards this as it will give the organization a distinct advantage.
- 6) Park group of Hospitals must work towards creating a strong brand name abroad. It needs to follow the promotional strategies to increase the patient flow.

Recommendations

- 1) Presently numbers of patients from US/UK/Europe are very few. They are mostly coming for Major Surgical procedures. Strategies to increase their flow must be implemented.
- 2) Presently majority of the patients visiting are through the agents/brokers. Other sources to get patients must be implemented.
- 3) Similarly Park Hospital is not advertising presently in foreign publications/media. This should be done to target the NRI population as they prefer coming to their home country for treatments.
- 4) Since 55% of the patients rate doctors expertise as the most important factor for coming for treatments it is equally important to promote doctors expertise as well. This will build a positive brand image of the hospital.
- 5) Most Middle Eastern and African countries have a patriarchal society. We can promote women health and educate them on eye care to raise awareness among them about the hospital services.
- 6) As per the analysis counseling area needs more attention. We can increase the number of counselors to reduce the waiting time of the patients.
- 7) As Cost of treatment is a major concern to these patients, Park Hospital being affordable as comparative to others can be utilized to attracting patient.

REFERENCES:

1. http://en.wikipedia.org/wiki/Healthcare_in_India
2. <http://www.nature.com/nm/journal/v9/n4/full/nm0403-377a.html>
3. <http://www.cbc.ca/news/background/healthcare/medicaltourism.html>
4. http://timesofindia.indiatimes.com/More_options_for_health_insurance/articleshow/1982238.cms
5. <http://www.who.int/mediacentre/factsheets/fs172/en/index.html>
6. <http://www.indiatogether.org/2007/jan/hlt-hltcare.htm>
7. <http://www.deloitte.com/dtt/whitepaper/0,1017,sid%253D34239%2526cid%253D71669,00.html>
8. <http://www.saharamedicaltourism.com/2008/Oct/medicaltourism.html>
9. <http://www.bumrungrad.com/news/2009/News/healthcare.html>
10. Medical Tourism: Global Competition in Health Care by Devon M. Herrick NCPA Policy Report No. 304; November 2008
11. Mueller H and Kaufmann E L, ‘ Wellness Tourism: Market Analysis of a Special Health Tourism and Implications for Hotel Industry’, Journal of Vacation Marketing, Vol 7(1), Pg 6 – 17, July 2008
12. Opportunities in Health Tourism- Learnings from International Experience by: B K Ong - General Manager (India), Singapore Airlines
13. Alvarez, David P.; “Connecting people to the promise of healthcare”, No. 15 (2000)
14. Hautea, Dr. Randy A.; Krattiger, Dr. Anatole F. And Van Zanten, Ir. Jasper E; “Healthcare costs comparisons”, No. 18 (2000)

ANNEXURE

Questionnaire

This questionnaire is designed as a part of a **Project Study** for Students pursuing **Post-Graduation Diploma in Hospital & Health Management (PGDHHM)**.

Your cooperation in providing useful information is greatly appreciated. The information you provide will be kept and treated as strictly confidential.

Name
Age
Sex
Country

1. How did you come to know about this hospital?

- a) Agents b) Internet/Websites
c) Referred by friend/relative d) Facilitators e) others..... (Please Specify)

2. Reason For admission

- a) Joint Replacement b) Organ Transplant c) Major Surgeries (Cardiac and Neuro)
d) Re correction surgeries e) Others (Specify)

3. Factors considered before choosing a Hospital

- a) Cost b) Infrastructure Facilities c) Doctors Experience d) Location

4. What was the reason for medical travel outside your country?

- a) Inadequate health insurance coverage b) Long waiting list
c) High cost of medical treatment in home country d) Inadequate healthcare Facilities.

5. Time taken to Procured Medical Visa/Tourist Visa

- a) 1-2 Weeks b) 2-3Weeks c) 3-4Weeks d) More

6. How have you planned your trip?

- a) Treatment alone b) Treatment and rehabilitation stay
c) Treatment and vacation tour

7. Rate Your Experience with the mentioned areas of services.

- a) **Reception/Help Desk.** i)Excellent ii) Good iii) Satisfactory iv)Poor
- b) **International Patient Coordinators.** i)Excellent ii) Good iii) Satisfactory iv) Poor
- c) **Doctors.** i)Excellent ii) Good iii) Satisfactory iv) Poor
- d) **Technicians.** i)Excellent ii) Good iii) Satisfactory iv) Poor
- e) **Counselors.** i)Excellent ii) Good iii) Satisfactory iv) Poor
- f) **Billing.** i)Excellent ii) Good iii) Satisfactory iv) Poor

8).Additional comments or recommendations for further improvement of services.

.....

.....

.....

.....

.....

.....

.....