Conclusion and Recommendations
Chapter 5:

CONCLUSION AND RECOMMENDATIONS

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5.1:- Introduction

This chapter presents the conclusion of the study and also gives the suggestions for future direction in this field. The ANOVA and Frequency Analysis of data for the medical tourism services with different characteristics was carried out with respect to age, sex, marital status, occupation, monthly income, address and hospital (Target Population) of the Foreign Patient. The purpose of carrying out analysis of variance with respect to different characteristics, across many factors of services provided by these hospitals, was to find the variance in the services offered by these hospitals. These service characteristics were selected as they represent services offered across the hospitals. The study was conducted for four corporate hospitals, which are the major caterers to Foreign Patients in India- Indraprastha Apollo, Fortis, Max and Escorts.

These hospitals were selected after due diligence as these hospitals have many initiatives and persistent efforts in providing better healthcare services to Foreign Patients.

The conclusion has been drawn based on data analysis of 132 respondents (as presented in chapter 4) for the various services and packages offered by the hospitals. These services are:

- Medical Tourism Package (Treatment + Relaxation),
- Cost of the treatment,
- Time taken to start and complete a course of treatment,
- Nursing care Services,
- Speciality Treatment Services,
- Conveyance (Transport) Services,
- Post-treatment services,
- Air Ambulance Services,
- Facilities for attendants,
- Interpreter Services,
• Sources of information on Medical Tourism in India,

• Role of facilitators/Other agencies in uplifting Medical Tourism in India,

• Insurance Services,

• Booking Services,

• Boarding and lodging Services,

• Quality of food,

• Touring Services.
5.2:- Conclusion

ANOVA Analysis gives the characteristics of $F$ value and significance with respect to sex, age, marital status, country of origin, occupation and monthly income of the Foreign Patients, different hospitals (Apollo, Escorts, Fortis and Max). The Analysis shows that:

5.2.1) Sex wise distribution of respondents

Table 1.1 gives the sex wise distribution of the respondents (Foreign Patients) It gives the frequency analysis and per value of each hospital (Apollo, Max, Fortis and Escorts) with respect to the number of male and female Foreign Patients admitted. The analysis shows that:

- Most of the Foreign Patients interviewed were males as compared to females across all the hospitals with a small exception of Escorts Hospital where more of females were interviewed.

5.2.2) Age wise distribution of respondents

Table 1.2 gives the age wise distribution of the Foreign Patients who were interviewed for the survey. It gives the frequency analysis and subsequent percentage of each hospital (Apollo, Max, Fortis and Escorts) with respect to the age of the Foreign Patients admitted. The analysis shows that:

- A large number of Foreign Patients interviewed for the survey were of the above 60 age group, which means that the tourists seeking treatment in India for various procedures are of the higher age group with a small exception of Escorts Hospital which mostly caters to the age group of 18-25. Actually Escorts as per the findings is the choicest destination for paediatric orthopaedics. That’s why the percentage of 18-25 age group is higher there.

5.2.3) Marital status of respondents

Table 1.3 and the subsequent pie chart indicates the marital status of the Foreign Patients interviewed for the survey. It gives the frequency analysis and subsequent percentage of each hospital (Apollo, Max, Fortis and Escorts) with respect to the marital status of the Foreign Patients admitted. The analysis clearly indicates that:
- Most of the tourists who were interviewed were married followed by a small percentage of unmarried Foreign Patients. The divorcee tourists who were interviewed for the survey were very less in number.

5.2.4) **Place of Origin of respondents**

Table 1.4 and the subsequent graph indicates the place of origin of the Foreign Patients who were interviewed for the survey. It gives the frequency analysis and subsequent percentage of each hospital (Apollo, Max, Fortis and Escorts) with respect to the place of origin of the Foreign Patients admitted. The analysis shows that:

- A large chunk of Foreign Patients that come to India for medical services are from underdeveloped or developing countries. The major service seekers are from India’s catchment areas. We saw very less of patients from developed countries like UK. And throughout the survey we have not been able to see even a single patient from USA.

- Iraq and Iran were found to be the major facility seekers in India partially because of the fact that they don’t have quality medical services in their countries, or whatever there was destroyed in the war. These tourists are usually sent to India through the embassies in their respective countries.

5.2.5) **Occupation wise distribution of respondents**

Table 1.5 and the subsequent graph shows the occupation wise distribution of the Foreign Patients who were interviewed for the survey. It gives the frequency analysis and subsequent percentage of each hospital (Apollo, Max, Fortis and Escorts) with respect to the occupation of the Foreign Patients who were admitted in the respective hospitals.

The analysis shows that:

- More of the respondents (Foreign Patients) who were interviewed for the survey were either employed or dependents which through chi-square test was found to be a significant factor when it comes to deciding India visit for medical services.
• We could also analyze from the study that most of the Foreign Patients at Apollo and Fortis were employed, Whereas more of Foreign Patients from Escorts were found to be either dependents or unemployed.

• The dependents shown here are mostly wives and children as found through the survey which again verifies the fact that Escorts and Max are mostly visited for paediatric treatments and treatments pertaining to women health.

5.2.6 Monthly income of respondents

Table 1.6, and its subsequent graphical representation depicts the monthly income of Foreign Patients coming to India for their treatment, who were selected for the sample survey. It gives the frequency analysis and subsequent percentage of each hospital (Apollo, Max, Fortis and Escorts) with respect to the monthly income of the Foreign Patients who were admitted in the respective hospitals. It further shows that the monthly income of the Foreign Patients is not a significant factor for deciding whether to come to India for the respective treatment.

The analysis shows that:

• A large number of Foreign Patients coming to India for their treatment are from the higher income categories (more than 1600 US $- approximately more than 80,000 INR per month), which means that they can even consider taking treatments in their own countries or other countries which are slightly expensive than India. Inspite of this fact, they still prefer India, for its quality medical procedures and other factors which we will discuss in the subsequent chapters.

• Fortis has been observed to be the hospital mostly preferred by these high income groups followed by Max, Apollo and Escorts.

• Another finding here is that the low income bracket (<15000 US $) respondents prefer Escorts and Apollo over Fortis and Max.

• However a chi square test suggested that income is not a deciding factor for the Foreign Patients to avail healthcare facilities at any of these hospitals, which means irrespective of the amount of their affordability they will still continue seeking healthcare services in the mentioned hospitals.
5.2.7) Medical Tourism—Concepts and Understanding (Awareness)

5.2.7.1) Medical Tourism Package (Treatment + Tour)

Table 2.1 depicts the understanding of a Foreign Patient about the 'medical tourism package'. It gives the frequency analysis and subsequent percentage of each hospital (Apollo, Max, Fortis and Escorts) with respect to their understanding of the 'medical tourism package'. It further shows that such understanding of the Foreign Patients is a significant factor for deciding whether to come to India for the respective treatment or not.

The analysis shows that:-

- Quality medical procedures are largely preferred by the Foreign Patients over other reasons for coming to India. It overshadows other factors like touring places and accommodation facilities.

- These findings are further reinforced when we analyze table 2.2 where the Foreign Patients were asked about the reasons for opting treatment facilities outside their country. Most of them were comfortable with the fact that quality of services in other countries are better (we take other country as India since they have come here for their treatment). Very less Foreign Patients preferred other options like long waiting hours and high cost of treatment in their own country. However ease and affordability of travel is also preferred to some extent. This finding is quite significant and gives us a clear picture of perception of a Foreign Patient. It is an astonishing fact that most of the Foreign Patients do not prefer to go on a tour before or after their treatment. Now, why is this happening? Either they are not at all aware of this kind of service or are really not interested.

- To further elaborate this issue and find the reasons for the Foreign Patients not going for subsequent tours as has been known about medical tourism, we analyse table 2.9, where again these tourists were asked if the hospital they sought treatment from arranged for any tourist visit before or after the treatment. The responses again were surprising as we could analyze from the table that most of the Foreign Patients never wanted this kind of a service and many of them had no idea about the concept of touring itself. None of the hospitals provide a package where they offer a dual service of medical services and touring. The four hospitals selected for the study act as...
facilitators to the patients when it comes to touring tourist places in India. The Hospitals do not provide touring facilities themselves but tie up with different touring agencies as and when required for the Foreign Patient. So, it was thoroughly observed and analysed that no hospital among these four provides a package to the Foreign Patients that combines treatment and touring. They do so, on need basis. They do not have a separate travel desk for this kind of service. Medical Tourism as a concept loses its justification if it is not known and understood for both its contents by the Foreign Patient across the globe, so do we still call it medical tourism?

- We have already analyzed through table 1.4 that most of the Foreign Patients who visit India for their medical treatment are from developing or under-developed countries which strongly justify that these tourists from such countries visit India mainly because the quality of treatment is not available in their own country, the if available, the cost is un-affordable and a small percentage of them, who are mainly from the developed nations like UK prefer coming to India because of the long waiting hours in their own countries. The touring concept for most of them, in fact almost all of them does not exist at all.

- Further analysis for the same problem through table 2.7 shows that most of the Foreign Patients got to know about medical tourism in India through a reference/friend. Significantly less percentage of these tourists got the information through internet. And very less through magazines and news papers, which gives us a clear idea that the Foreign Patients are ignorant about the whole concept of medical tourism in India. The websites of various hospitals, travel agencies and facilitators may be failing somewhere to get the concept wide open for them. Also the print media also is not sufficient to bring out the concepts for all the prospective Foreign Patients across the globe. Overall the Foreign Patients across are aware that India is a place which can cater them not only their healthcare needs, but also relaxation(tour) needs at a much lower cost.

- The Foreign Patients just come here through a reference for some specific treatment. Or else their embassies send them because of non availability of treatment in their own country. Their awareness level is very low about the concept although they are
well aware about the cost differences as inferred from table 3.3.2 and most of them have also rated the cost of treatment as nominal (Table 4.7)

- **Table 6.0** shows that most of the Foreign Patient taking treatment in India have not been to some other country for the medical services. The small percentage who have visited developed countries for treatment are of the opinion that as compared to other countries, India is cost wise nominal, and the services they received are good on a scale of 1-4, where 2 is considered as good.

- On further analysis through **table 2.3 and 2.4**, it was found that the decision taker for the trip was usually family/spouse, though friends also played a small role. Which means that the whole family should be aware about medical tourism. And we could make out from the previous analysis that the Foreign Patients were not fully aware of the dual nature of medical tourism. Their most preferred source of information was family and friends (table 2.7) and these tourists get the information through word of mouth. And the word spreads, so the perception of these Foreign Patients is very difficult to change since it involves the whole families.

The families are preferred over friends and colleagues for taking along on the medical tour (table 2.4). Again we feel there is a need for speeding up awareness of the Foreign Patient, not alone but along with their families, since they are influenced by each other..

- The findings explained above are further reinforced when we analyze **table 6.2 and table 6.3**, which clearly shows that the Foreign Patients liked medical facilities the best on their trip to India, subsiding all other factors that complete the definition of Medical Tourism like touring and relaxation. Probably they were not at all exposed to such things. And to emphasize this point, the major chunks of these tourists were very happy in recommending India to their friends and family for availing treatment. This again amounts to the satisfaction pertaining to the quality of medical services in India.
5.2.7.2) Medical Services

- The qualities of medical services in India as perceived by the Foreign Patients were analyzed through table 2.2 and 2.8. It was observed that they prefer qualities of services in India over other attributes, which means they are satisfied with the treatment. Also, all the four Hospitals (selected for sample survey) do provide treatment facilities of almost all types to the Foreign Patient at much lower price as compared to what the patient has to pay for a similar treatment in his/her home country. The range of treatments include cardiac, orthopaedics and cosmetic. We found through descriptive analysis of this question that the other treatments they prefer to get done here are dental, neurology, organ transplants especially renal and plastic surgeries.

- It was also found through the same analysis that Orthopaedic treatments were broadly preferred, which means that India is the choicest destination for joint replacement surgeries and other orthopaedic related treatments.

- Further it was analyzed through table 4.1, that the overall rating of treatment availed in India by the Foreign Patient was mostly rated as 'good'. Again a sign of satisfaction of medical services.

- Likewise table 4.4 and 4.5 emphasize the point that the Foreign Patients were comfortable with the time taken by the hospital authorities for a particular treatment as depicted through the rating scale where most of them chose 'good' option, which is 2 on a scale of 1-4. These treatments mostly include organ transplants and cardiac surgeries which take months together in their own countries, but are performed within a week's time when they come to India. Nursing services were again rated good by these tourists emphasizing that they were satisfied with the medical services in India.

- They were also comfortable with the cost of treatment as previously analyzed in table 4.7. And also rated India as good in terms of medical facilities when compared to other countries, as shown in table 6.5.

- It was further analyzed through table 3.3.1 that a large number of the Foreign Patients surveyed have never availed the air ambulance service, and quite a good amount of
them did not all know about the service, which gives us an idea about the severity of the disease. These tourists who opt for treatment facilities in India probably opt for elective procedures which are pre-planned and managed over the period of time. Emergency cases, it seems are taken up in very less percentages.

- It was analyzed through table 5.0 that most of the Foreign Patient's interviewed for the survey prefer telemedicine over other methods for their post treatment follow up. Again this means that all of these hospitals had a system in place through which patients were examined and treated across borders through digitalization. Digitalization, as analyzed before plays a very important role in bringing the world together, so that whatever best can be done from a distance can be managed across long distances for these Foreign Patients. Most of the patients treated in India send their subsequent medical examination report to the doctor's in India, and then if needed fly back here for the prescribed process, otherwise if they are declared perfectly alright from the doctor's end, they don't need to come back. Their medical reports and investigations are fed into a system using different digital and IT technologies, and can be accessed whenever and wherever required.

5.7.3) Logistic Support and other facilities at the hospital

- Table 2.5 and 2.6 respectively indicates that boarding and lodging facilities were provided by the hospital for the Foreign Patient and the corresponding attendant. In some cases however the facility was provided by the travel agent for the attendant, if they were more than one in number. The hospitals usually provide boarding and lodging facilities to the patient and one attendant with a small exception where two attendants are allowed. This happens when there are subsequent two patients as in the case of organ transplant where there are two patients-one donor and one recipient. Likewise this also happens in case of a minor. E.g at Escorts hospital, which is preferred for paediatric orthopaedic surgeries, two attendants are allowed to take care of their child.

- The analysis further shows that the arrangement for booking to and fro to India was not done by the hospital. Mostly it was done by the Foreign Patient himself/herself for the entire trip, again through internet which is a booster of medical tourism in India. In some cases the bookings were made by the travel agents and in equal cases by
other sources. The descriptive analysis for other sources showed that these other sources were getting bookings done on spot at the airport, and sometimes a friend would assist the process. But was mostly done by themselves. Again we appreciate the role of digitalization for making things easier for the Foreign Patients. The analysis in nutshell shows that the hospital does not interfere at all in matters except for providing medical services to the Foreign Patients. Though it sometimes gets things facilitated for them through tie-ups with travel agents.

- **Tables 3.1 and 3.2** subsequently shows that the Foreign Patients were provided transport facility by the hospital on their arrival in India, and then at the time of discharge from the hospital. Meanwhile, transport facility was also provided to them in between on need basis. It was also noted that in case the Foreign Patient wanted to go to a tourist destination after or before the treatment, and had tied up for the same with a touring operator or managed the trip himself, then in that case the Conveyance was provided to the Foreign Patient only up to the airport or railway station or a touring bus and not to the touring destination.

- For making things easier for the Foreign Patient, each hospital provided them an interpreter who could translate things to them in a language which was most understandable to them, since most of these tourists were not comfortable with English. According to the analysis done through **table 3.2**, the interpreter was provided by all the hospitals always available but of the Foreign Patient’s surveyed said that he was not available all the time which led to big difficulties for them.

Actually the major chunk of Foreign Patients who are from Iraq, Iran, Afghanistan do not understand English at all. Urdu and Hindi are out of question for them. They need a person (interpreter) who would as a duty help them out on daily basis with their communication problems. These hospitals do have in place language interpreters but they work on need basis, when there is an appointment with the doctor or when there is some important discussion regarding the course of treatment for the patient. These problems do get solved, but the daily problems like asking the orderly for some work, asking nurses about the patient’s condition etc remain unsolved. The Foreign Patient especially the attendant faces these problems which are not of any major issue but at
times can take serious turns. It seems that none of the hospitals has a full time interpreter employed for these tourists.

5.7.4) Payment Methods

- The analysis of table 5.1 shows that the most preferred mode of treatment by the Foreign Patients is cash. Though credit card and insurance are used in equal proportions. The fact that insured tourists also come to India for availing treatment facilities is surprising because if they have insurance, they can afford to go to any country. If they still come to India, it means that they come here for other factors like quality of services which has been previously explained. But carrying so much cash for the Foreign Patient becomes a botheration for which a system need to be developed where these tourists do not carry heavy cash along, and still make cash payments.

5.7.5) Rating of services received by Foreign Patients at the Hospitals

- The overall satisfaction rate of services received by the Foreign Patients at their respective hospitals was assessed by analyzing tables 4.1, 4.2, 4.3, 4.4, 4.5, 4.6 and 4.7. These facilities were rated on a scale of 1-4, where four options were assigned different values. Excellent-1, good-2, satisfactory-3 and worst-4. It was found that most of the services were rated 2 by the Foreign Patient's, which means the satisfaction rate is significantly high for the services availed in India.

- Accommodation, one of the most important factors on which overall satisfaction of Foreign Patient is based was rated 'good' by most of the Foreign Patients which means that the Foreign Patients are satisfied with these facilities. Though a good percentage of tourists think that the services provided are satisfactory and comparatively very less tourists think it is excellent.

- Nursing care is one of the core competency of health care sector and when it comes to Medical Tourism it is also one of the most important pillar of customer satisfaction. It is worth mentioning here that it was rated 'good' by majority of the Foreign Patient and 'excellent' rating was given by a few respondents as well. Although some of the respondents also thought that the nursing care was 'satisfactory' but as compared to 'good' and 'excellent' rating by other Foreign Patient, it becomes quite clear that the
Foreign Patient are overall happy with nursing care being provided to them in all the four hospitals under study.

- Time is a valuable asset especially when it come to medical care and Medical Tourism is no different from other sectors. Majority of the Foreign Patients rated Time Taken to provide treatment “Good” and “Excellent”, which further signifies the importance of time factor in meeting the satisfaction level of Foreign Patient at par with other destinations especially in south Asia and south east Asia. Although a very small group of respondents did rate the time taken to provide treatment as “Satisfactory” but majority of the respondents were more than satisfied.

- The satisfaction level of the Attendants of the Foreign Patients is also very important, as they play a very important role in facilitating the whole process of Medical care from the Foreign Patient end. The Foreign Patient as found in previous analysis relies completely on his family for taking the decision for the Medical tour. The facilities provided to the attendants was rated “Good” by most of the respondents and was also rated “Excellent” by few other respondents as well. Although some of the respondents also rated the facilities provided to the attendants as “satisfactory” but the majority rating was found to be either “Good” or “Excellent”, which is a good sign for the Medical tourism industry of India, as the important link between the Medical Tourism industry of India and the Foreign Patient is very well taken care of.

- The food provided to the Foreign Patient was rated “Satisfactory” by many of the respondents but majority of the respondents rated food as “Good” and few rated it as “Excellent” as well. It was found that the patient is served food according to the advice of the dietician and the attendants choose from Menu which has a choice of Indian, Continental and Chinese.

- Treatment for which the Foreign Patient visits India is the most important factor in determining the success of the Medical Tourism industry of India. Most of the respondents rated it as “Good”, which is quite encouraging when we notice that some of the respondents rated the treatment as “Excellent” as well. The respondents from all the four hospitals under study were highly satisfied with the Treatment provided by the hospitals.
5.7.6) Role of Digitalization in enhancing satisfaction rate of the Foreign Patients

- Role of Digitalization has been time and again appreciated by the researchers for enhancing satisfaction rate among customers/clients across industries. We have also been able to somehow prove that through our study.

- Tables 2.2, 2.5, 2.6, 2.7, 3.3.2, 5.0 and 5.1 clearly emphasize the role of digitalization by facilitating awareness of medical tourism across globe, and making it most accessible by the Foreign Patients.

- It is analyzed from the table that ease and affordability of travel is one important factor, why these Foreign Patients prefer India for medical services. This ease and affordability is bought through digitalization. These tourists book their journey through a simple click. Or even if they get it done through an agent, he also does it through a click. So, sitting across millions of miles, they have all the access at their disposal through internet. They study different packages through websites of different hospital, compare the costs of different treatments, do a comparative analysis according to their disease specific preference, and then finally plan the trip. This fact has been further emphasized through the analysis of Table 2.5, where it is shown that all the boarding and lodging facilities are subsequently pre booked by the tourists when they get their appointments done prior to their visit. Again that is all because of the internet that these facilities can be enjoyed. Had there been no digitalization, the across globe communication and implementation could not have been achieved.

- Further analysis of Table 5.0 shows that the post treatment follow up is also in many cases managed and enhanced by the use of digitalization through telemedicine, which is a latest technique wherein the doctor examines the patient across long distances.

Digitalization, as analyzed before plays a very important role in bringing the world together, so that whatever best can be done from a distance can be managed across long distances for these Foreign Patients. Most of the patients treated in India send their subsequent medical examination report to the doctor's in India, and then if needed fly back here for the prescribed process, otherwise if they are declared perfectly alright from the doctor's end, they don't need to come back. Their medical
reports and investigations are fed in a system using different digital and IT technologies, and can be accessed whenever and wherever required.

- Further analysis of table 5.1 shows that credit card payments made by the Foreign Patient again are managed with the help of digitalization, wherein the credit card company manages accounts of the clients, so that the financial transactions are easily retrievable whenever and wherever required.

It is very clear that what makes a medical tourism destination competitive is still grounded in high-quality medical services, low cost and ease and affordability of travel across borders. When one removes these attributes, and attempts to analyze the features and experiences related to the destination, what seems to emerge is an emphasis on logistical issues and supplier services. The traditional leisure resources associated with visiting a tourist destination, such as cultural attractions; scenic beauty; shopping; nightlife; festivals; and so on, do not play much of a role in the medical tourism experience. On the other hand, logistical issues related to travel to and within the destination do. Additionally, the accommodations are a very important part of the in-country experience, not only for the Foreign Patients but equally for the accompanying family. From an intangible service experience perspective, what do emerge are three components or interactions that impact the visitor’s trip. These are the prearranged, individualized services provided to them on the ground when they arrive and supported by the tourism medical operator. Coupled with this is the caring attitude and quality nursing care of those not only guiding the visitor through the process, but those providing the medical care as well as the local population they encounter on their trip. The quality of the Foreign Patient’s experience appears to be heavily dependent on the relationship and the expertise provided by the hospital or with a medical tourism company which arranges the whole trip, with the necessary medical and travel accommodations.
5.7.6) Advantages of Medical Tourism

- The greatest advantage of Medical Tourism in India is the monetary benefits that it leads to through the foreign currency flow. Higher revenues per bed, per hospital, per treatment etc are be generated.

- Healthcare spending in the country is almost doubled over the past 10 years. Private healthcare forms a large chunk of this spending, rising from Rs 690 billion (US$ 14.8 billion) to Rs 1,560 billion (US$ 33.6 billion). And the major seekers of this private healthcare service are the Foreign Patients who have helped enhance our healthcare system.

- Technological advancements are on a boom as we have to serve to this well read elite clientele. We are hopeful that these advances will eventually be accessible by the local patients also though it will take its own course of time.

- The biggest economical roadblock in our country is unemployment. If we see at the positive side of Medical Tourism, we will observe that there have been more jobs with the outbreak of Medical Tourism. Each corporate hospital is recruiting thousands and thousands of medical and para-medical staff to provide excellent services to the Foreign Patients. We have jobs in the hospitals, with touring agencies, insurance sector and other associated service providers.

- Infrastructural and technological advances have been taking place with the Medical Tourism Industry taking up. To meet demand for future expansion, we see building up of super speciality and multi speciality hospitals in country by big houses. Likewise the technological advances are also taking a toll and are beneficial to boost the Indian expertise further.

- With time, we are having more tie-ups with foreign travel services, foreign hospitals, the embassies and insurance industries across the globe which helps helps making presence of Indian medical tourism felt globally, so that we can attract more of prospective tourists.

- In India, the medical tourism industry has the potential to grow at a high rate and ensure consequential development of the infrastructure. It has the capacity to
stimulate other economic sectors through its backward and forward linkages and cross-sectional synergies with sectors like tourism, agriculture, horticulture, poultry, handicrafts, transport, construction, etc. It is fast turning into a volume game where an ever-burgeoning number of participants are pushing up revenues of industry players (hotels, tour operators, airlines, shipping lines, etc). Thus, the medical tourism sector is expected to perform very well in future and the industry offers an interesting investment opportunity for long-term investors.

- It will further uplift India’s pharmaceutical sector drastically over the period of time due to the medical tourism revolution. Infact this big push will revolutionise the Indian pharmaceutical market also.

- The department of AYUSH (Ayurveda, Yoga, Unani, Siddha, Homeopathy) now has a reason to develop its manpower strength and infrastructural capabilities so that this side of the Indian Healthcare system also gets noticed and recognised worldwide, because many of the Foreign Patients rely on alternative treatment therapies.

- Subsequently, the handicrafts industry, local travel agencies and state governments will also be uplifted due to the flow of foreign currency.

- Enhancement of reputational capital - Orthopedics & Joint Replacement, Neurosciences, Spine Surgery, Cardiac Sciences, Aesthetic & Reconstructive Surgery

- Our country is not far from being recognized as a Global Healthcare Provider.

- With the increase in Medical Tourism Market, we will see development at the individual level, where doctor’s and other significant staff are sent for timely trainings, development at the hospital level, who’s status is upgraded, and development at the country level, where we will see our country counted among the best healthcare providers in the world.

- To sum up, Medical Tourism can be a big boom for upgrading and strengthening a country’s economy through its growth and sustainanace in India.
5.7.7) Disadvantages of Medical Tourism

- The present scenario of the medical tourism industry promote mushrooming of super-specialty institutes providing health services to Foreign Patient and wealthy Non resident Indians, and monopolize the available human and material resource in health.

This is a winning ticket for the corporate medical sector and for a section of medical professionals in the country. However, if we look at the public health implications, we see an entirely different picture. The government would have us believe that revenues earned by the industry will strengthen healthcare in the country. But we do not see any mechanism by which this can happen. On the contrary, corporate hospitals have repeatedly dishonoured the conditions for receiving government subsidies by refusing to treat poor patients free of cost - and they have got away without punishment. Moreover, reserving a few beds for the poor in elite institutions does not address the necessity to increase public investment in health to three to five times the present level.

- The extra revenue from medical tourism could benefit healthcare in India if it were taxed adequately to support public health. Instead the medical tourism industry is provided tax concessions; the government gives private hospitals treating foreign patients benefits such as lower import duties and an increased rate of depreciation (from 25 per cent to 40 per cent) for life-saving medical equipment. Prime land is provided at subsidised rates. The industry also gets a pool of medical professionals who train in public institutions for fees of Rs 500 a month and then move to work in private hospitals - an internal brain drain, and an indirect subsidy for the private sector of an estimated Rs 500 crore per year. Thus, the price advantage of the medical tourism industry is paid for by Indian tax payers who receive nothing in return.

- The biggest disadvantage has arisen from intensified manpower shortage in the public sector, creation of inequitable health systems in the private and public sectors, increased cost of treatment and unregulated growth of private health facilities. To counteract these threats and to ensure that medical tourism has a favourable impact on the public health system, it will be necessary to undertake certain measures.

- Another significant disadvantage of Medical Tourism in India is that with the foreign
currency flowing in, the healthcare costs are skyrocketing day by day, the private sector is becoming un-affordable for the mediocre class, who somehow preferred it over the public healthcare system for its quality services.

- All the attention is being taken by the medical tourism sector, when we talk about the Indian healthcare system. The public healthcare system in spite of developing remains underdeveloped till date due to the sudden boom of Medical Tourism and the amount of profits involved in it.

- There are several concerns that arise from the growth of medical tourism in India. The private sector and the government is supposed to play an important role in regulating this sector. However, in India, State interventions have been minimal, leaving the private sector to rule.

- Most people going for medical treatment abroad tend to combine travel and tourism along with the medical procedure. This means that the country where you go for the treatment has to build more hotels to accommodate the ever growing number of patients cum tourists. The government resorts to deforestation to build more hotels and provide better civil amenities because medical tourism is a way of earning revenue and foreign exchange. In addition, medical tourism is also responsible for contributing to increased air emissions, noise, solid waste and littering, releases of sewage, oil and chemicals, even architectural/visual pollution; all which has negative impact on the environment.

A major challenge in the promotion of the medical tourism in India will be to institutionalize and harmonize regulations within the private sector in the country. This is essential as if the present conditions persist there will be no quality control over the services provided. Besides, the present circumstances will promote mushrooming of super-specialty institutes providing health services to Foreign Patient and wealthy Indians, and monopolize the available human and material resource in health.

The current demand for health and wellness services has generated a global market in the health services. In India, the private sector has responded promptly to this demand, which is evident from the recent increase in the number of super-specialty centers offering services to
Foreign Patients. Even the government has initiated measures to encourage growth of medical tourism but these have mainly benefitted the private sector, leaving the public sector unaddressed.

There are several factors that favour India as a hub for health related services, which include world-class medical expertise, competitive costs, well-equipped health facilities, no waiting period etc. Trade in health and health related services, has been predicted to evolve into a billion dollar industry in India. However, as outlined above there are challenges and the growth of medical tourism could pose as a threat to the public health system in India.
5.3:- Recommendations

- A major challenge in the growth and survival of the medical tourism in India is to be able to institutionalize and harmonize regulations within the private sector in the country, and still continue catering the best to these tourists. However the two most important observations of the research have been that the foreign patients that come to India for treatment are majorly from the developing countries, and most of the foreign patients who visit India for their Medical needs do not go for subsequent touring. We have tried to give recommendations accordingly in a sequential form to combat these issues.

The following are some recommendations that could help minimize the threats and maximize the benefits of the expansion of Medical Tourism in India:

1. **Synchronization of regulations within the country**: It will be necessary to develop specific regulations for the hospitals catering to foreign patient's, improve transparency and ensure complete implementation. The regulations should be able to maintain standardized quality of services and maximize the utilization of the available resources.

2. **Addressing the availability of expert health professionals**: The mal-distribution of human resources between private and public sectors is a concern, which has been already discussed. As a consequence of medical tourism, as said earlier, it is expected that job opportunities within the private sector will increase, leading to further movement of trained professionals to this sector. In order to confront the challenge, the public sector should readdress issues related to employee dissatisfaction and provide better incentives to retain its staff. There is also a need to increase the number of trained health professionals. There should be a system installed where equal distribution of the medical staff can be achieved, without any major differences in the employee retaining techniques like salaries, growth opportunities etc, so that our public health system does not suffer at the cost of grossly flowing foreign currencies.

3. **Further improvement in the quality of care provided in the Hospitals catering to Foreign Patients**: In spite of being renowned across borders for the Quality of Medical Care, there can always be a room for improvement in India. We have competitors
throughout the world who are making continuous efforts to match our standards and attract the foreign patients to their respective countries. We should be able to not only sustain our present status, but also strive for excellence in this field. Hence, a system to undertake national accreditation and licensing should be planned and implemented. The Indian Medical Association and Medical Council of India could play a pivotal role in this regard working through the Joint Commission International (JCI).

4. To promote mutually beneficial linkages between the private and public health sectors, and between state-of-the-art health services and community health, an effort should be made to encourage the utilization of the services provided in the public sector for the purpose of medical tourism. And subsequently strengthen mechanisms that can facilitate public-private sector partnerships. Need of the hour is to provide support to local entrepreneurs in development of viable business plans for expansion of spa/wellness services, and in development of public-private partnerships, including careful market analysis.

- Once we are able to address these local issues, we can move on to strengthen the capacity building process of Medical Tourism in India.

1. To start with, there should be a system in place which will keep an information check regarding the number, origin, expenditures, and characteristics of tourists who may be coming to India for health and health-related services, it is highly encouraged that an easily retrievable system be developed, implemented and maintained. As part of this effort, it may be useful to establish a health tourism desk at national level to collect and evaluate data.

2. Simultaneously, there is a timely need for the initiation of an apex body of Medical Tourism Department in India which should be able to deal with all the issues of Medical Tourism and a Foreign Patient. This centralized system should be fool proof to allow for any discrepancies. This way, we can generate employment in our country, and concurrently attract more of these tourists. This will further help to promote the Indian brand abroad and aid inter-sectoral coordination. Joint ventures with overseas partners and establishment of MEDICITIES will help in India building a significant advantage and leadership position in the industry.
3. This system can be a centralized hub, wherein we will have all the information available for the Foreign Patients—the possible treatments available, their choice of hospitals, comparative cost structures, different packages and other concerns. The Foreign Patient will not at any stage have any doubts about his/her progressive trip.

4. To further strengthen the concept of a National Medical Tourism Department, role of digitalization will play a major role by connecting all the medical tourism service provider hospitals in India through a networking process. The networking will be such that all the relevant details, availability of the bed, appointments and even telemedicine services will be retrievable at one center point through thorough processing. The hospitals which are facility providers for the Foreign Patients should be registered with the National Medical Tourism Department after proper scrutiny of the required pre-requisites. Also they can have networking with the embassies through which Foreign Patients prefer to come. This kind of a system will at the same time be reliable and easily accessible. The tourists will have access to all the required information from their home countries without doubting the credibility of the facility provider, since the information will come straight from an authentic national source.

5. Lack of proper hospital accreditation system and inefficient laws against malpractice can be the biggest factor limiting the growth of India's medical tourism Industry. So, steps should be taken to register only those hospitals with the National Medical Tourism department which are properly accredited to serve a Foreign Patient.

- Once the Foreign Patient has arrived in India, it is to be made sure that not only does he take the prescribed treatment, but at the same time, he/she is able to take benefit of the dual nature of the Medical Tourism concept, i.e to tour the place. The most important role of the hospital here is to create awareness of the touring part of Medical Tourism. The hospital which provides the treatment should supplement it with a touring service, which they can present and market in the form of a package. The package itself can be digitalized, where all its details can be supplemented in a way that the Foreign Patient gains its awareness right from the beginning. The hospitals should have a separate travel desk, where from the tourist will get the information of their preferred touring destination and simultaneously book a tour before or after the treatment as per the doctor's advice.
• There should also be an initiative taken by the proposed ‘National Medical Tourism Department’ of building of sanatoriums as it used to be some 50 years ago, where patients suffering from chronic ailments could be sent for rejuvenation and revival. These sanatoriums should be build at hill stations so that the effectiveness of such a concept is enhanced.

• To further help creating awareness of the concept of touring in India, which has been found to be almost absent among the foreign patients, the dual packages of various hospitals should be marketed well in such a way that it reaches the doorsteps of the prospective Foreign Patients across the world. The best way would be digitalization. The foreign patients should know that there are exotic locations in India which should not be left unvisited.

• Once we are through with attracting the prospective foreign patients to India for their treatment and subsequent tour, now the big challenge is to convert the normal tourists into tourists seeking medical care in India. Hoardings at the international airports can be used to highlight the Medical Tourism Facilities in India like it has been showing the tourist places. This way the ignorant tourist will come to know about the Medical Services in India and can give it a thought, or else if he needs such service in the near future after returning home, he can always remember and proceed to avail it.

• Likewise a system can be developed where the GIS mapping of the most visited tourist places can be done, and subsequently given due consideration for building up of hospitals, spas, sanatoriums and wellness centres, since these will be the most preferred places by a tourist. If we give them a package which includes their favourite destination in India where they can also avail some of the best treatments available at a less cost, it can surely hit the Medical Tourism market like anything. We can simultaneously highlight our unique selling points in terms of cost, quality of medical care and tourist visits in the packages that we will offer henceforth.

• So far, as comes out from this research study, we have been attracting tourists mostly from the India’s catchment areas, and the gulf countries. The influx of tourists from the developed world is much less when it comes to seeking Medical Service in India. At the same time, there are places like goa in India which are mostly preferred by the
affluent class of the foreigners from the developed world for holidaying. We have a big opportunity which lies here. We can attract these tourists to become medical facility seekers in India, but the challenge would be to tap them, convince them and retain them for which we need to start developing such places for Medical Services. To start with, build up a corporate hospital in the form of a resort of high standards at such places. The standards of services will be obviously of high standards as compared to a hospital catering to foreign patients of developing countries. This elite clientele will have to be dealt with utmost care. We may have to recruit doctors from USA, UK, so that the prospective foreign patients are convinced of the quality. Best of names in Healthcare system across the world can be recruited and put in place. The existing staff can be sent for timely trainings and development. The quality standards as preferred by the USA and UK Health systems can be adopted. This way we can create a niche in this market which will further give rise to influx of Foreign Patients from the developed nations to India.

- Follow up care for the Foreign Patient should be carefully planned in such a way which is cost effective and manageable for them. He/ She can be advised to go to tourist places for relaxation if the follow up visit is expected soon after discharge.

- India can also work hard on one of its strengths to attract Foreign Patients to India-The Social Support. The friendliness which is found in Indian culture can be found nowhere else in the world, and as discussed earlier it has been seen that the foreign patients also rely on India for the available social support system. We have seen 'bread and breakfast' concept taking a toll in the recent times where the local people rent out their private accommodation facilities to the tourists, get themselves registered in the tourism department and cater to the local needs of medical tourists in the form of providing accommodation, meals and local assistance. Likewise a system can be developed where local people can rent out their places for accommodation to the discharged patients who need rest and relaxation. These places can be evaluated on quality standards, simultaneously registered with the proposed 'National Medical Tourism Department' and paid a good amount. This way the foreign patient will have a good social support mechanism while taking treatment in India.
• We can also do tie-ups with foreign Insurance companies so that they can support the concept of Medical Tourism in India by recognising it as one of the cost effective places for treatment in the world. The relationship can further be strengthened by the govt liasoning with them so that the system in place becomes a registered and well supported one.

• Counselling sessions should be arranged for the Foreign Patients so that they are well informed and educated about the prognosis of their disease, the recovery time and possible post operative complications. Travelling soon after a surgical procedure can be risky due to chances of catching an infection, scarring, haematomas etc. Also spending too much time in the sun while touring, drinking can also be harmful, so planning the trip accordingly in consultation with the treating doctor and giving them a protocol to follow will surely help making their trip rewarding and a healthy one.

For facilitating the process of Medical Tourism in India the government should further reduce hassles in visa process and institute visa-on-arrival for patients, Follow an Open-Sky policy to increase inflow of flights into India, Create Medical Attachés to Indian embassies that promote health services to prospective Indian visitors.

• We have great opportunities to make India a preferred Medical Tourism destination across the globe. We have about 49 Million under-insured and uninsured people in the US, Low Cost medical policies being issued by Providers authorizing beneficiaries to avail healthcare at a recognized Hospital in India, Corporate Houses, covering Employee Medical Costs are looking at Hospitals outside the US to provide healthcare to their employees. The major markets include SAARC – Afghanistan, Pakistan, Nepal, Bangladesh, Gulf – UAE, Oman, Yemen, Saudi Arabia, Africa – Tanzania, Nigeria, Kenya, CIS – Kazakhstan, Uzbekistan, Europe – UK, North America – USA, Canada. The big challenge for India is to be able to cash this big opportunity with utmost care and concern.

Thus, India has the potential to become a “Global Medical Tourism Destination”, however this status will only be meaningful if we continue to sustain the present status and still continue to strive for excellence.