SUMMER INTERNSHIP PROGRAM

At

NITI Aayog, NEW DELHI

From 06th May 2024 to 5th July 2024

A REPORT BY

Dr. Rajnandini Chaturvedi

Master of Business Administration

(HOSPITAL AND HEALTH MANAGEMENT)

2023-25

Under the Mentorship of

Arindam Das

IIHMR UNIVERSITY

Shoyabahmed Kalal,

Deputy Secretary
Tel No. 011-23096602
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सत्यमेव जयते

भारत सरकार
नीति आयोग, संसद मार्ग,
नई दिल्ली-110 001
Government of India
NATIONAL INSTITUTION FOR TRANSFORMING INDIA
NITI Aayog, Parliament Street,
New Delhi-110 001

No. 15(5)/2016-H&FW

Date: 22nd July 2024

TO WHOMSOEVER IT MAY CONCERN

This is to certify that Dr. Rajnandini Chaturvedi, pursuing her Post Graduation in Hospital and Healthcare Management (1st year) from IIHMR UNIVERSITY, JAIPUR has successfully completed her Internship with Health & Family Welfare (H&FW) Vertical, NITI Aayog, Government of India, from 06.05.2024 to 05.07.2024.

2. During her internship, she worked closely under the mentor ship of Dr. Sumana Arora, Sr.Consultant (Health), in addition to other team members in the Health Vertical. During her tenure, she worked on the following project:

"MEDICAL TOURISM IN INDIA OPPURTINITIES AND CHALLENGES"

3. Dr. Rajnandini has shown keenness and special interest in the work she was assigned. She was punctual and hardworking.

4. I wish her success in future career and life.

(Shoyabahmed Kalal)

शोयब अहमद कलाल/Shoyabahmed Kalal
उप सचिव/Deputy Secretary
नीति आयोग/NITI Aayog
भारत सरकार/Government of India
संसद मार्ग/Sansad Marg
दिल्ली-110001/New Delhi-1

स्वच्छ भारत
एक कदम स्वच्छता की ओर

IIHMR UNIVERSITY

IIHMR University Faculty Mentor Approval

This is to certify that **Dr. Rajnandini Chaturvedi** of academic year 2023-25 of **INSTITUTE OF HEALTH MANAGEMENT RESEARCH** has prepared a poster with respect to her summer internship held during 6th May-5th July 2024.

She has carried out work as per the guidelines. Her poster is approved for presentation.

Arindam Das.

Date: 22/7/2024

(Signature of Faculty Mentor)

Arindam Das, PhD

Professor

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MEDICAL TOURISM IN INDIA: PROSPECTS AND CONSTRAINTS

Submitted by – Dr. Rajnandini Chaturvedi
Roll no:- 1788
Batch:- MBA HM 28

University Mentor:- Arindam Das, PhD
Organization Mentor:- Dr. Sumana Arora

BRIEF HISTORY AND DESCRIPTION

NITI Aayog, established on January 1, 2015, replaced India's Planning Commission to promote a more decentralized and cooperative federal structure. Chaired by the Prime Minister, it includes a Governing Council with state Chief Ministers Union Territory Lieutenant Governors, and various experts. NITI Aayog focuses on strategic and technical advice, outcome-based monitoring, and fostering cooperative federalism. Key initiatives include the Aspirational Districts Programme, Atal Innovation Mission, and Digital India. By emphasizing a bottom-up approach, it ensures policies are tailored to local needs, aligning national objectives with state priorities for effective governance and development.

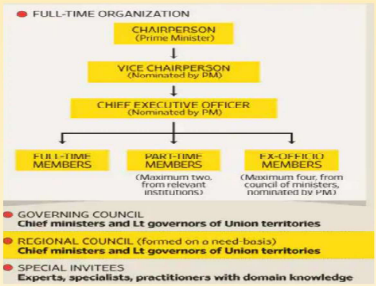
VISION

NITI Aayog aims to foster cooperative federalism and promote sustainable development, innovation, and digital governance, aligning with the UN's SDGs for inclusive national growth.

MISSION

To achieve sustainable development goals, support innovation and entrepreneurship, enhance cooperative federalism, and ensure inclusive growth through strategic policy formulation and effective governance

ORGANISATION STRUCTURE



CHALLENGES FACED DURING INTERNSHIP

- Difficulty in accessing comprehensive and up-to-date data on medical tourism statistics, patient demographics, and economic impact.
- Adapting to a new work environment & culture.
- Lack of regular communication with the organization mentor.

RESEARCH QUESTION

How can India become a leading medical tourism destination, considering the current state, key factors, and challenges of the industry?

ABOUT THE PROJECT

The "Medical Tourism in India: Opportunities and Challenges" project, conducted under Dr Sumana Arora at NITI Aayog, analyses India's medical tourism industry. It assesses:
- **Current State**: Reviewing performance trends, patient volumes, and treatment preferences.
- **Key Factors**: Studying cost competitiveness, Preferred destination, Reputation of the country and quality of care.
- **Challenges and Opportunities**: Addressing regulatory barriers, infrastructure gaps, and competitive pressures, and proposing strategies to elevate India's global medical tourism standing

OBJECTIVES

- To identify the key reasons for the medical tourism industry in India.
- To understand the current and future state of the medical tourism industry in India.
- To find strengths weaknesses opportunities and threats to medical tourism in India.

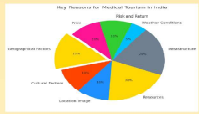
METHODOLOGY AND DATA COLLECTION

- A Descriptive study on India's medical tourism industry using secondary sources.
- Sources include websites for historical and current trends, academic journals for patient experiences, and economic impact insights and reports from government and industry for data on market size and challenges.
- Focus on providing a detailed and accurate account without new data collection.

RESULTS OF THE STUDY

OBJECTIVE 1:- KEY REASONS FOR MEDICAL TOURISM IN INDIA

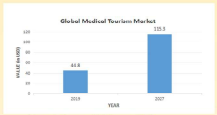
1)**Geographical Factors**: Patients prefer destinations with direct flights and simple visa processes
2)**Cultural Factors**: Familiar language, religion, food, and customs attract patients.
3)**Location Image**: The country's reputation significantly impacts patients' treatment choices.
4)**Resources and Infrastructure**: Quality treatment facilities and amenities are crucial for extended stays.
5)**Weather Conditions**: Favorable climate and tourist attractions make a location more appealing.
6)**Risk and Return**: Patient safety & treatment outcomes are key considerations.
7)**Price**: Total cost, including medical fees, travel, and lodging, influences the decision



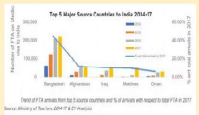
(Fig no 1: Source The Economic Times)

OBJECTIVE 2:- CURRENT AND FUTURE STATE OF MEDICAL TOURISM INDUSTRY IN INDIA

1)**Market Size and Growth**: The global medical tourism market was USD 44.8 billion in 2019, expected to grow at a CAGR of 21.1% from 2020 to 2027.
2)**India's Medical Tourism Sector**: Estimated at USD 5-6 billion recently, projected to reach USD 13 billion soon despite COVID-19 challenges.
3)**International Rankings and Trends**. India ranked 10th in the Medical Tourism Index 2020-21, foreign tourist arrivals for medical purposes grew from 233,918 in 2015 to 697,000 in 2019.
4)**Source of Medical Tourists**: India attracts medical tourists from Afghanistan, Pakistan, Oman, Bangladesh, Maldives, Nigeria, Kenya, and Iraq, with growth potential from Europe and the Americas.
5)**Healthcare Industry Growth**: India's healthcare sector is expanding rapidly, projected to grow at a CAGR of 16.28% from 2008 to 2022, reaching USD 160 billion.
6)**Hospital Industry Growth**: Valued at Rs 4 trillion in FY17. expected to grow at a CAGR of 16-17%. reaching Rs 8.6 trillion in the coming years.
7)**Factors Driving Growth**: Growth is driven by improving infrastructure, advanced medical technologies, skilled professionals, and lower treatment costs.



(Fig no 2:-Source:- IBEF Report 2019)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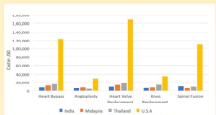
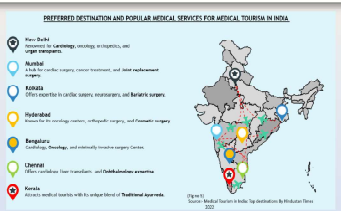
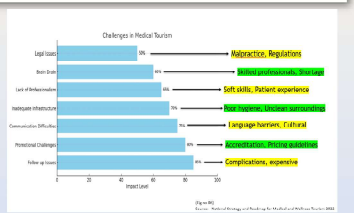


(Fig no 4:-Source IBEF Report 2019)

OBJECTIVE 3: TO FIND STRENGTH, WEAKNESS, OPPORTUNITIES AND THREATS TO MEDICAL TOURISM IN INDIA.

Strengths	Weakness	Opportunities	Threats
• Quality service, affordable cost • Qualified doctors • Advanced Healthcare Technologies • International reputation • Tourism destinations	• Lack of Regulations • Low Coordination • Insufficient promotion of Medical Tourism • Inconsistent Pricing • Unorganized facilitators • Hygiene standards • Limited awareness about NABH	• Increased demand from ageing population (U.K, Japan). • Fast-paced lifestyles boost wellness tourism • NHS supply shortages (UK, Canada) • Demand from countries with underdeveloped healthcare.	• Strong competition: Malaysia, Thailand, Singapore. • Fewer JCI Accredited Hospitals. • Lack of international insurance for traditional medicine. • Unorganized MVT facilitators exploit patients.





RECOMMENDATIONS

LEARNINGS DURING INTERNSHIP

- **Policy Understanding**: Insight into policy formulation and its implications for sectors like medical tourism.
- **Research Proficiency**: Improved skills in data collection, analysis, and interpretation from diverse sources
- **Stakeholder Coordination**: Experience in engaging with government bodies, healthcare providers, and research institutions
- **Sector Insight**: Deepened understanding of the dynamics and challenges within India's medical tourism industry.
- **Professional Growth**: Development of skills in report writing, presentation, and strategic analysis.

USEFULNESS OF THE INTERNSHIP

- Gaining valuable experience and confidence.
- Organization exposure.
- Networking with healthcare professionals.
- Great learnings of discipline, communication skills, and time management.

THEORETICAL UNDERSTANDING VS PRACTICAL EXPOSURE

Asperts	Theoretical Understanding	Practical Exposure
Concept	Learn what medical tourism is.	See how medical tourism works in real life
Factor	Study why people choose medical tourism.	Meet patients and providers to understand why.
Economic impact	Understand how medical tourism helps the economy.	Watch how it actually benefits the economy.
Quality standard	Learn about the need for high-quality care.	See how hospitals and clinics implement and maintain these standards in practice
Problem solving	Think about possible challenges	Encounter practical challenges, such as language barriers and follow-up care.

Week- 1

Name of the Organization: NITI Aayog, New Delhi

Area/ Department/ Project of Summer Internship Program: Health Vertical

Name of the Student: Dr. Rajnandini Chaturvedi

Roll no: 1788 **Stream:** MBA in Hospital and Health Management

Week no: 1 **From:** 6th May 2024 to 10th May 2024

Activity Done	➢ Started the internship at NITI Aayog. ➢ Completed documentation process. ➢ Met Mr. Sayed Ahmed Kalal. ➢ Met mentor Dr. Sumana Arora. ➢ Received feedback and guidance from Dr. Sumana Arora. ➢ Assigned to review public health topics for report assignment.
Linking theory (Classroom learning) with practice at your organisation	➢ Applied public health theory to identify relevant research topics
Gaps identified on the working area.	➢ Major gaps within the first week of being introduced to the organization included a lack of an orientation program. ➢ Need for more structured guidance on selecting research topics

Suggestions for improvement	➢ Introduction of orientation programs for the interns. ➢ Provide interns with detailed guidelines on topic selection.
Plan for the next week	➢ Commencement of work or project given by ma'am.

Dr.Rajnandini Chaturvedi

Signature of the Student

Week- 2

Name of the Organisation: NITI Aayog, New Delhi

Area/ Department/ Project of Summer Internship Program: Health Vertical

Name of the Student: Dr. Rajnandini Chaturvedi

Roll no: 1788 **Stream:** MBA in Hospital and Health Management

Week no: 2 **From:** 13th May 2024 to 17th May 2024

Activity Done	➢ Assigned to study Delhi AIIMS Revamping Model 2019. ➢ Explored data on current AIIMS infrastructure, patient capacity, and bed occupancy rates. ➢ Studied proposed new facilities, project impact, patient care, and staff efficiency. ➢ Investigated sustainability plans for waste management and energy efficiency. ➢ Explored expansion of research facilities and faculty development initiatives. ➢ Analysed the current state and future goals of AIIMS Delhi's research output. ➢ Compiled research findings and drafted a report.
Linking theory (Classroom learning) with practice at your organisation	➢ Learnings from modules such as National Health Programmes, Health Policy and Health Care Delivery System, Health and Development and Essential of Hospital Services all played a role in ensuring a smooth understanding.
Gaps identified on the working area.	➢ Need for better access to detailed project data.
Suggestions for improvement	➢ Improve data-sharing mechanisms within the organization.
Plan for the next week	➢ Discuss research report topics with the mentor. ➢ Begin gathering information on medical tourism.

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Week- 3

Name of the Organisation: NITI Aayog, New Delhi

Area/ Department/ Project of Summer Internship Program: Health vertical

Name of the Student: Dr.Rajnandini Chaturvedi

Roll no: 1788 **Stream:** MBA in Hospital and Health Management

Week no: 3 **From:** 20th May 2024 to 24th May 2024

Activity Done	➢ Discussed potential research topics with Dr. Sumana Arora. ➢ Selected medical tourism as a research topic. ➢ Gathered initial information on medical tourism. ➢ Identified key areas of focus: growth, expansion, treatment offers, and medical city hubs. ➢ Collected data from secondary sources on global aspects of Indian medical tourism. ➢ Attended NITI Aayog meeting on AIIMS revamping project. ➢ Noted necessary points and drafted minutes of the meeting
Linking theory (Classroom learning) with practice at your organisation	➢ Applied global health systems knowledge to medical tourism research. .
Gaps identified on the working area.	➢ Lack of comprehensive data on international patient demographics
Suggestions for improvement	➢ Develop a robust database of international patients.

Plan for the next week	➢ Collect statistical data for medical tourism reports. ➢ Draft initial sections of the report.

Dr. Rajnandini Chaturvedi

Signature of the Student

Week- 4

Name of the Organisation: NITI Aayog, New Delhi

Area/ Department/ Project of Summer Internship Program: Health Vertical

Name of the Student: Dr.Rajnandini Chaturvedi

Roll no: 1788 **Stream:** MBA in Hospital and Health Management

From: 28th May 2024 to 31st May 2024

Activity Done	➢ Collected statistical data for medical tourism reports. ➢ Drafted initial sections: introduction, background, objective. ➢ Added sections on popular destinations and treatment services. ➢ Attended NITI Aayog meeting on AIIMS revamping model (KPI and quality indicators). ➢ Drafted minutes of the meeting.
Linking theory (Classroom learning) with practice at your organisation	➢ The module Research Methods helped in data collection. ➢ The module Essentials of Hospital Services helped me to understand the quality indicators and KPIs. ➢ Applied skills in report drafting and meeting documentation.
Gaps identified in the working area.	➢ Need for deeper understanding of KPI and quality indicators. .
Suggestions for improvement	➢ Conduct workshops on healthcare quality indicators.

Plan for the next week	➢ Work on economic impact, regulatory issues, and marketing strategies sections of medical tourism report.

Dr. Rajnandini Chaturvedi

Signature of the Student

Week- 5

Name of the Organisation: NITI Aayog, New Delhi

Area/ Department/ Project of Summer Internship Program: Health Vertical

Name of the Student: Dr. Rajnandini Chaturvedi

Roll no: 1788 **Stream:** MBA in Hospital and Health Management

Week no: 5 **From:** 3rd June 2024 to 7th June 2024

Activity Done	➢ Worked on economic impact, regulatory issues, and marketing strategies sections. ➢ Showed initial drafted report to Sumana, ma'am, for feedback. ➢ Gathered information on countries preferring India for medical tourism. ➢ Studied value-based procurement as per Sumana Ma'am guidance
Linking theory (Classroom learning) with practice at your organisation	➢ Applied economic principles to medical tourism analysis.
Gaps identified on the working area.	➢ Limited access to up-to-date regulatory frameworks
Suggestions for improvement	➢ Collaborate with regulatory bodies for current information
Plan for the next week	➢ Review Economic Survey Report 2023 for value-based procurement. ➢ Draft reports on general financial rate 2017 and QCBS.

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Week- 6

Name of the Organisation: NITI Aayog , New Delhi

Area/ Department/ Project of Summer Internship Program: Health Vertical

Name of the Student: Dr. Rajnandini Chaturvedi

Roll no: 1788 **Stream:** MBA in Hospital and Health Management

Week no: 6 **From:** 10th June 2024 to 14th June 2024

Activity Done	➢ Reviewed the Economic Survey Report 2023 and drafted the report on value-based procurement. ➢ Drafted reports on the general financial rate for 2017 and QCBS. ➢ Attended round table meeting on value-based procurement in med tech and drafted minutes. ➢ Learned about public procurement reforms.
Linking theory (Classroom learning) with practice at your organisation	➢ The module on Essential of Health Economics and Financing helped in understand the Economic survey report and The Module Essentials of Hospital Services helped me understand QCBC
Gaps identified on the working area.	➢ Need for better understanding of public procurement systems

Suggestions for improvement	➢ Organize training sessions on public procurement processes.
Plan for the next week	➢ Study public procurement reform in the Middle East and North Africa. ➢ Learn about NITI Aayog's outcome-based public procurement

Dr. Rajnandini Chaturvedi

Signature of the Student

Week- 7

Name of the Organisation: NITI Aayog , New Delhi

Area/ Department/ Project of Summer Internship Program: Health Vertical

Name of the Student: Dr. Rajnandini Chaturvedi

Roll no: 1788 **Stream:** MBA in Hospital and Health Management

Week no: 7 **From:** 18th June 2024 to 21st June 2024

Activity Done	➢ Studied and highlighted public procurement reforms in the Middle East and North Africa. ➢ Reviewed NITI Aayog's outcome-based public procurement guidelines. ➢ Discussed revised public procurement guidelines with Sumana Ma'am. ➢ Worked on decentralized procurement scheme reforms and PPP key action plans.
Linking theory (Classroom learning) with practice at your organisation	➢ The module on Healthcare Delivery System, National Health Program and Health policy helped me to understand the basics of the mentioned topics.
Gaps identified on the working area.	➢ Limited exposure to decentralized procurement schemes
Suggestions for improvement	➢ Include case studies on decentralized procurement for interns at NITI. .
Plan for the next week	➢ Attend AIIMS meetings on clinical and non-clinical department issues. ➢ Design hospital indicators list with the mentor

Dr. Rajnandini Chaturvedi

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Week- 8

Name of the Organisation: NITI Aayog , New Delhi

Area/ Department/ Project of Summer Internship Program: Health Vertical

Name of the Student: Dr. Rajnandini Chaturvedi

Roll no: 1788 **Stream:** MBA in Hospital and Health Management

Week no: 8 **From:** 24th June 2024 to 28th June 2024

Activity Done	➢ Attended AIIMS meetings highlighting issues by clinical and non-clinical departments. ➢ Designed a list of hospital indicators with Sumana ma'am. ➢ Collected information on medical tourism in government hospitals by talking to doctors. ➢ Assisted Sumana Ma'am in writing a report on organ transplantation program reform.

Linking theory (Classroom learning) with practice at your organisation	➢ Used knowledge of healthcare indicators and program evaluation in tasks
Gaps identified on the working area.	➢ Need for more interaction with healthcare professionals for practical insights
Suggestions for improvement	➢ Encourage field visits and interactions with healthcare professionals
Plan for the next week	➢ Review the status of AYUSH health and wellness centres. ➢ Attend the workshop on boosting public healthcare infrastructure

Dr. Rajnandini Chaturvedi

Signature of the Student

Week- 9

Name of the Organisation: NITI Aayog, New Delhi

Area/ Department/ Project of Summer Internship Program: Health Vertical

Name of the Student: Dr. Rajnandini Chaturvedi

Roll no: 1788 **Stream:** MBA in Hospital and Health Management

Week no: 9 **From:** 1st July 2024 to 5th July 2024

Activity Done	➢ Reviewed the status of AYUSH health and wellness centres in India. ➢ Attended a two-day workshop on boosting public healthcare infrastructure and drafted a report. ➢ Helped Sumana ma'am prepare a presentation on tasks done at NITI Aayog health vertical. ➢ Worked on medical tourism reports and visited hospitals to talk to patients about their experiences.
Linking theory (Classroom learning) with practice at your organisation	➢ All the Modules have played their significant role during my internship journey at NITI Aayog in writing my Research Report on Medical Tourism In India Opportunities and Challenges
Gaps identified on the working area.	➢ Lack of detailed patient feedback data for comprehensive analysis
Suggestions for improvement	➢ Implement structured patient feedback mechanisms.

Dr. Rajnandini Chaturvedi

Signature of the Student

COMPILED REPORT

Name of the Organisation: NITI Aayog, New Delhi

Area/ Department/ Project of Summer Internship Program: Health Vertical

Name of the Student: Dr. Rajnandini Chaturvedi

Roll no: 1788 **Stream:** MBA in Hospital and Health Management

Activity Done	**Introduction** My internship journey began on 6th May 2024 at NITI Aayog, New Delhi, under the mentorship of Dr. Sumana Arora, Senior Consultant at the Health Vertical 1) **Initial Documentation and Meetings** • Started the documentation process. • Met with Mr. Sayed Ahmed Kalal to understand the internship framework. • Had an introductory meeting with Dr. Sumana Arora ma'am, who provided valuable feedback and guidance. • Sumana ma'am assigned a list of public health topics for report consideration. **2) Exploring AIIMS Delhi Revamping Model 2019** • Tasked with gaining knowledge about the AIIMS Delhi revamping model. • Explored data related to AIIMS Delhi's current infrastructure, patient capacity, and bed occupancy rates. • Studied the proposed new facilities and services focusing on project impact on patient care and staff efficiency. • Investigated sustainability plans for waste management and energy efficiency. • Analyzed data on the current state and future goals of AIIMS Delhi's research output.

	• Compiled research findings into a draft report and prepared for a meeting with Sumana ma’am. **3) Identifying Research Topics** • Discussed potential research report topics with Sumana Ma'am, such as telemedicine and medical tourism. • Ma’am suggested exploring medical tourism further. **4) Initial Research on Medical Tourism** • Started gathering information on medical tourism. • Identified key areas of focus, such as growth, expansion, treatment offers, and medical city hubs. • Collected data from various sources as part of a secondary study. • Reviewed the global aspect of Indian medical tourism. • Attended a NITI Aayog meeting for the AIIMS revamping project, noted necessary points, and drafted the minutes of the meeting. **5) Developing the Medical Tourism Report** • Began collecting statistical data for the medical tourism report. • Drafted initial sections including introduction, background, and objectives of the study. • Added sections on popular destinations and treatment services offered. • Attended a NITI Aayog meeting focusing on KPI and quality indicators and drafted the minutes. • Worked on sections covering economic impact, regulatory issues, and marketing strategies. • Showed the initial draft to ma’am for further inputs. • Gathered relevant information on countries that prefer India as a medical hub **6) Value-Based Procurement and Economic Survey Report**

	• Studied value-based procurement and reviewed the 2023 economic survey report. • Drafted a report on general financial rate 2017, QCBS, and other procurement regulations in India. • Continued working on the medical tourism report. • Attended a roundtable meeting on value-based procurement in med tech and drafted the minutes. • Learned about public procurement reforms to enhance value for money. • Attended an AIIMS meeting highlighting issues like procurement, manpower, and gatekeeping, and drafted the minutes. **7) Public Procurement Reforms** • Sumana ma'am asked me to study public procurement reform in the Middle East and North Africa. • Learned about NITI Aayog's outcome-based public procurement. • Discussed revised guidelines for public procurement with ma'am. • Researched decentralized procurement scheme reforms and reviewed key action plans on PPP by NITI Aayog. • Attended AIIMS meetings highlighting issues from clinical and non-clinical departments. **8) Hospital Indicators and NITI Aayog Workshop** • Designed a list of hospital indicators with ma'am. • Collected information on medical tourism in government hospitals by talking to different doctors. • Assisted Sumana ma'am in writing a report on reform in the organ transplantation program for the economic survey. • Reviewed the status of AYUSH health and wellness centres in India. • Attended a two-day NITI Aayog workshop on boosting public healthcare infrastructure and made a report on the findings. **9) Final Stages and Presentation** • Helped ma'am in preparing a presentation on the tasks completed at the NITI Aayog Health Vertical.

- Continued working on my medical tourism report.
- Visited public and private hospitals to gather patient feedback on problems faced.
- Attended AIIMS meetings discussing potential recommendations and drafted the minutes.
- Reviewed new IRDAI health policy guidelines and incorporated them into my report.
- Made the final report on medical tourism and showed it to Sumana Ma'am for final inputs.
- Attended a presentation on the HPV Vaccine by another intern.
- Interacted with participants from ISB's public policy program under the chairmanship of the CEO of NITI Aayog.
- Prepared a PPT of my report, presented it to ma'am and made necessary changes.
- On the last day of the internship, presented the report at NITI Aayog in front of Health Vertical members.

10) Medical Tourism In India: Opportunities and Challenges

a) <u>Introduction</u>

- **Philosophy of Hospitality**: "Atithi Devo Bhava" is the guiding principle in Indian hospitality, encouraging the treatment of guests with utmost respect.
- **Tourism in India**: India is known for its diverse geography, culture, and historical heritage, making it a significant tourist destination.
- **Historical Medical Practices**: India's medical history dates back to the Vedic times, with Ayurveda being one of the oldest systems of medicine, traced back to 8000 BCE. The period from 800 BCE to 1000 CE is known as the Golden Age of Indian medicine.

b) <u>Objectives of the Study</u>

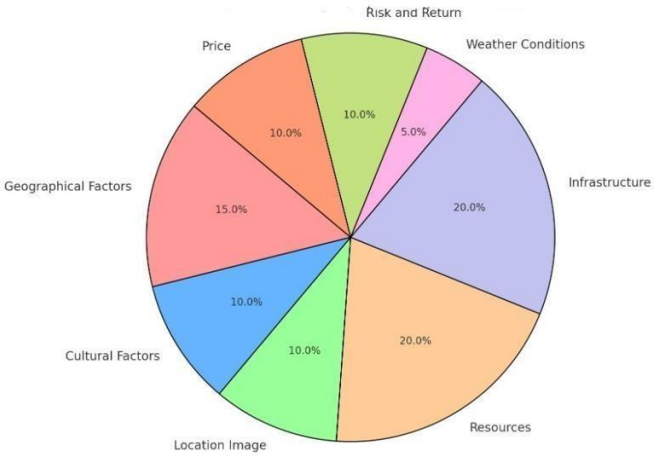
- **Identify key Factors**: To identify factors that influence medical tourism in India.
- **Understand Current and Future Status**: To assess the current and future state of medical tourism in India.
- **To explore SWOT analysis**: To identify strengths weaknesses opportunities and threats faced by the medical tourism industry.

c) Research Methodology

- **Descriptive Study**: Aims to provide a detailed account of the current state of medical tourism.
- **Secondary Data**: Information gathered from published sources, including websites, academic journals, and reports from government agencies and industry bodies

d) <u>Key Reasons of Medical Tourism in India</u>

- **Geographical Factors**: Travel time, ease of travel, and visa processes influence destination choice.
- **Cultural Factors**: Language, religion, food, customs, and practices play a role.
- **Location Image**: The reputation of a country significantly influences patients' decisions.
- **Resources and Infrastructure**: Quality treatment facilities and necessary amenities are crucial.
- **Weather Conditions**: Climate and tourist attractions make locations more appealing.
- **Risk and Return**: Safety measures, medical service track records, and treatment outcomes versus risks.
- **Price**: Total cost of treatment, including medical fees, travel, lodging, and insurance.

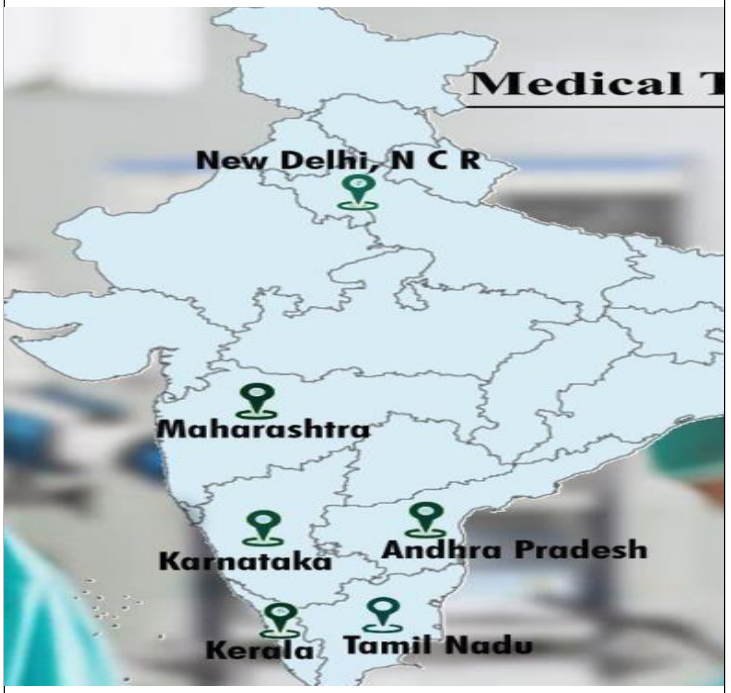


(Fig no 01 Source: - The Economic Times 2019)

e) <u>Preffered Destinations and popular medical services offered for Medical Tourism in India</u>

- **Delhi**: Known for cardiology, oncology, orthopaedics, and organ transplants.
- **Mumbai**: Hub for cardiac surgery, cancer treatment, and joint replacement surgery.
- **Chennai**: Offers cardiology, liver transplants, and ophthalmology expertise.
- **Hyderabad**: Renowned for oncology centres, orthopaedic surgery, and cosmetic surgery.

- **Bangalore**: Centre for cardiology, oncology, and minimally invasive surgery.
- **Kolkata**: Specializes in cardiac surgery, neurosurgery, and bariatric surgery.
- **Kerala**: Attracts medical tourists with traditional Ayurveda and modern medical facilities

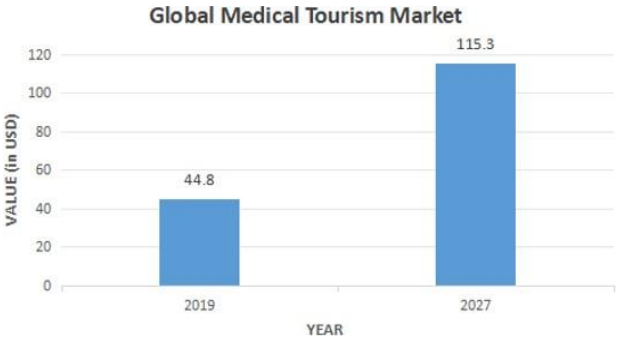


(Fig no 02 Source: - Medical Tourism in India: Top destinations By Hindustan Times 2022)

f) <u>Current and Future state of Medical Tourism</u>

1. **Market Size and Growth**:

- The global medical tourism market was valued at USD 44.8 billion in 2019 and is expected to grow at a CAGR of 21.1% from 2020 to 2027.



(Fig no 03 Source: - IBEF Report 2019)

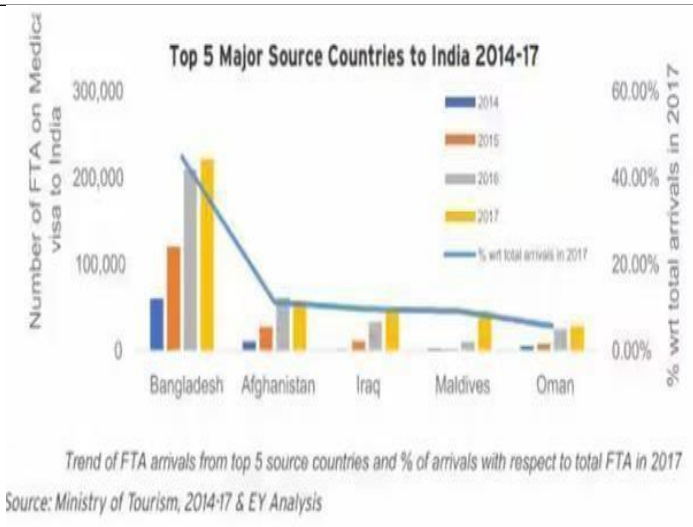
- Despite challenges from the COVID-19 pandemic, India's medical tourism sector was estimated at USD 5-6 billion recently, with projections to reach USD 13 billion shortly.

2. **International Rankings and Trends**:

- India is ranked 10th globally in the Medical Tourism Index 2020-21 by the Medical Tourism Association, indicating its popularity as a destination for medical treatments.
- The number of foreign tourist arrivals (FTAs) for medical purposes has been steadily increasing, from 233,918 in 2015 to 697,000 in 2019, showcasing significant growth.

3. **Source of Medical Tourists**:

- India attracts a large number of medical tourists primarily from countries like Afghanistan, Pakistan, Oman, Bangladesh, Maldives, Nigeria, Kenya, and Iraq.



Trend of FTA arrivals from top 5 source countries and % of arrivals with respect to total FTA in 2017

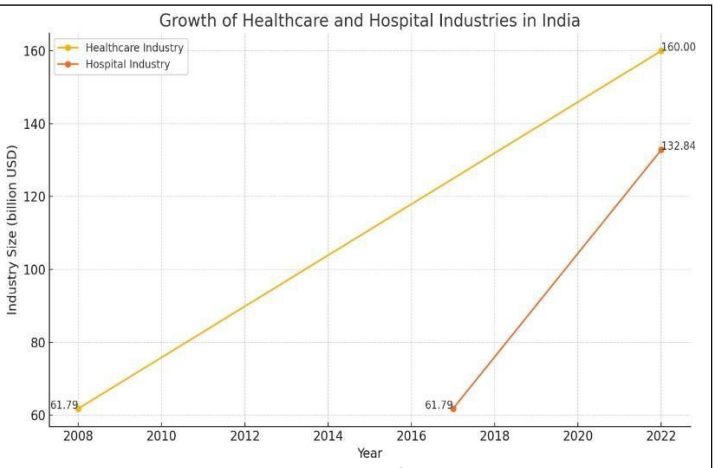
Source: Ministry of Tourism, 2014-17 & EY Analysis

(Fig no 04)

- There is potential to attract more tourists from other parts of the world, including Europe and the Americas, highlighting growth opportunities.

4. **Healthcare Industry Growth**:

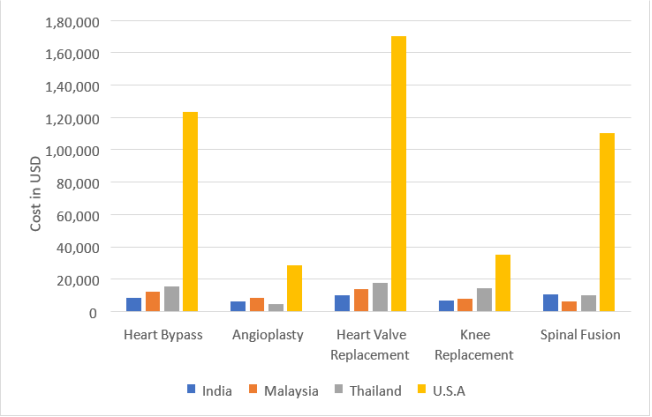
- Healthcare has become one of India's largest sectors in terms of revenue and employment, growing rapidly.
- The industry is expected to expand at a Compound Annual Growth Rate (CAGR) of 16.28% from 2008 to 2022, reaching a total size of approximately US$ 160 billion.
- The hospital industry in India was valued at Rs 4 trillion (approximately US$ 61.79 billion) in FY17 and is projected to grow at a CAGR of 16-17%, reaching Rs 8.6 trillion (approximately US$ 132.84 billion) in the coming years.



(Fig no 05 Source: - Report from 2019 FICCI)

5. Factors **Driving Growth**

- India's healthcare sector benefits from a combination of factors such as improving infrastructure, advanced medical technologies, skilled medical professionals, and relatively lower treatment costs compared to developed countries.



(Fig no 06 Source IBEF Report 2019)

- Both public and private investments in healthcare services are contributing to the sector's rapid expansion

g) <u>SWOT ANALYSIS</u>

STRENGTH

- Quality service at an affordable cost.
- Vast supply of qualified doctors.
- Strong presence in Advance Healthcare. eg:- Cardiovascular and Organ Transplant (High success rate in operations.)
- International reputation of Hospitals and Doctors.
- Diversity of Tourism destinations and experiences

WEAKNESS

- Lack of Regulations governing MVT
- Low Coordination among stakeholders.
- Insufficient promotion of India as a Medical Value Travel destination.
- Unorganised MVT facilitators
- Inconsistent Pricing among Hospitals
- Perception of India's hygiene standards.
- Limited awareness of NABH Accreditation internationally

OPPORTUNITIES

- Increased demand for healthcare services from countries with ageing populations (Japan, U.K, U.S.A).
- A fast-paced lifestyle increases the demand for wellness tourism and alternative cures.
- Shortage of supply in NATIONAL HEALTH SYSTEM in countries like the U.K., and Canada.
- Demand from countries with underdeveloped healthcare facilities.
- Demand for retirement homes for elderly people.

THREATS

- Strong competition from Malaysia, Thailand and Singapore.
- Fewer JCI Accredited Hospitals compared to competitors.
- Lack of international insurance coverage for traditional medicine.
- Unorganized MVT facilitators exploiting patients.

h) <u>Challenges of the Indian Medical Tourism Industry</u>

1. Follow-up Issues

After surgery, patients may face complications that require follow-up treatments. If a patient returns to their home country, these follow-ups can become difficult and expensive. While technology helps, sometimes in-person visits with doctors are necessary. This challenge reduces the demand for medical tourism.

2. Communication Difficulties

Language barriers can be a major issue. Even if a country has skilled doctors and advanced medical systems, if the medical staff can't speak the patient's language, it creates difficulties for both the patient and the healthcare providers. These cultural and linguistic barriers can lower demand.

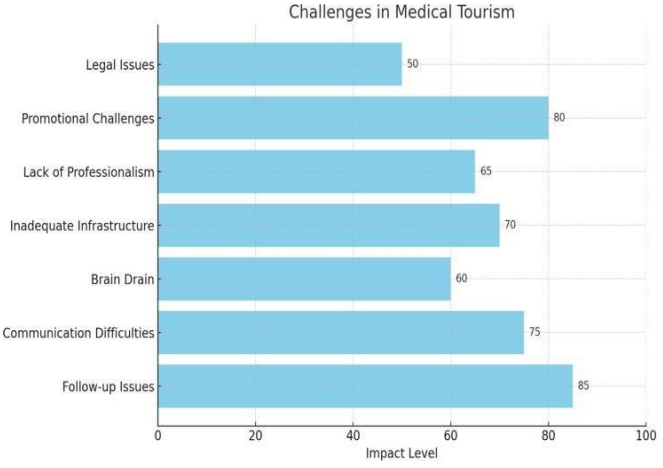
3. Brain Drain
India faces challenges in retaining talented doctors and nurses. Many skilled medical professionals leave for higher salaries abroad, leading to a shortage of experts in the country. This happens because of limited opportunities in India.

4. Inadequate Infrastructure
India, like many developing countries, struggles with poor medical infrastructure. Problems include insufficient water and electricity supply, poor hygiene in hospitals, unclean surroundings, unkempt staff, low-quality food and accommodation, and weak air connections for patient travel.

5. Lack of Professionalism
Medical staff in some underdeveloped countries often lack professionalism and necessary soft skills. Attributes like warmth, care, friendliness, and professional skills such as communication, loyalty, and proper appearance are often undeveloped, negatively affecting the patient's experience.

6. Promotional Challenges
India faces difficulties in promoting its medical tourism. There is a lack of quality accreditation and regulation in hospitals and healthcare services. Additionally, there are no standard pricing or service guidelines, making it hard to build trust with potential patients.

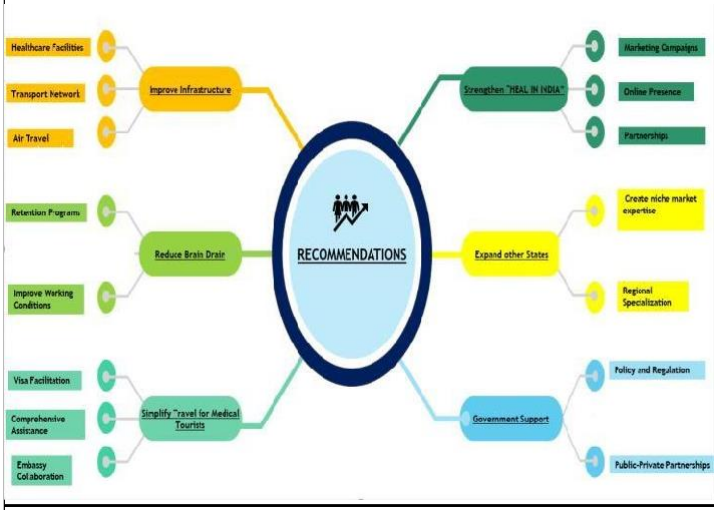
7. Legal Issues
Legal disparities between countries are a major problem in medical tourism. There are no universal regulations, and many countries have weak laws regarding medical malpractice. This leaves patients with limited options to seek justice if something goes wrong.



(Fig no 07 Source: - National Strategy and Roadmap For Medical and Wellness Tourism 2022)

1.

i) **Recommendations**



1. Improve Infrastructure

- **Healthcare Facilities**: Invest in building more super-specialty hospitals equipped with state-of-the-art technology and facilities. Ensure that these hospitals are spread across various regions to provide widespread access.
- **Transport Network**: Strengthen the internal rail and road network to ensure smooth and quick transportation for patients within the country. Improve connectivity to hospitals and medical hubs.

2. Reduce Brain Drain

- **Retention Programs**: Develop programs and incentives to retain skilled doctors and medical professionals in India. Offer competitive salaries, opportunities for career advancement, and professional development.
- **Improve Working Conditions**: Enhance working conditions in hospitals and medical institutions to make them more appealing to professionals. Provide better facilities, support, and work-life balance.

3. Simplify Travel for Medical Tourists

- **Visa Facilitation**: Implement visa-on-arrival for medical tourists to simplify the entry process.

	Ensure that the visa application process is straightforward and quick. • **Comprehensive Assistance**: Assist medical tourists from the moment they decide to travel to India. This includes help with travel arrangements, airport pickups, hospital admissions, and post-treatment travel. • **Embassy Collaboration**: Indian embassies in foreign countries can collaborate with local hospitals and authorities to provide information and support to potential medical tourists. This can include pre-travel consultations and coordination with Indian healthcare providers. **4. Strengthen 'HEAL IN INDIA'** • **Marketing Campaigns**: Launch comprehensive marketing campaigns to promote India as a top destination for medical tourism. Highlight success stories, advanced medical treatments, and cost advantages. • **Online Presence**: Develop a strong online presence through websites, social media, and online advertising. Provide detailed information about medical services, hospitals, and patient testimonials. • **Partnerships**: Form partnerships with international healthcare providers and travel agencies to create packages and offers for medical tourists. **5. Expand other States** • **Encourage Other States**: Encourage states beyond the current leaders in medical tourism to develop their own facilities and infrastructure. Provide incentives and support for states to build world-class medical institutions. • **Regional Specialization**: Promote regional specialization where states can focus on specific medical treatments and services, creating niche markets and expertise. **6. Government Support** • **Policy and Regulation**: The government should develop policies that support the growth of medical tourism. This includes quality accreditation, standardization of services, and transparent pricing. • **Public-Private Partnerships**: Encourage public-private partnerships to leverage private sector expertise and investment in developing healthcare facilities and services.

	j) Conclusion India's medical tourism growth relies on government support as a regulator and promoter of private healthcare investment. Simplifying visa procedures, offering tax incentives, and reducing medical equipment duties are critical. Establishing promotion committees and improving infrastructure are essential steps. To attract international patients, India must enhance its reputation, offer competitive packages, and maintain high treatment standards with international accreditation.

Linking theory (Classroom learning) with practice at your organisation	1)I applied public health theory to identify relevant research topics. 2)Learnings from modules like National Health Programmes, Health Policy, Health Care Delivery Systems, and Health and Development helped me grasp key concepts. 3)I used global health systems knowledge in my research on medical tourism. 4) The Research Methods module was crucial for data collection and writing my report on the following topic. 5) The Essentials of Hospital Services module aided my understanding of quality indicators and KPIs. 6) I applied skills in report drafting and meeting documentation. 7) Economic principles learned were applied to analyse medical tourism. 8) The Essential Health Economics and Financing module helped in understanding economic surveys. Healthcare Delivery System, National Health Programs, and Health Policy modules provided foundational knowledge. 9)Knowledge of healthcare indicators and program evaluation was applied effectively during my internship at NITI Aayog.
Gaps identified in the working area.	1. Upon joining the organization, major gaps included the absence of an orientation program. 2. There was a need for clearer guidance on selecting research topics. 3. Access to detailed project data was insufficient. 4. Comprehensive data on international patient demographics was lacking.

	5. A deeper understanding of KPIs and quality indicators was necessary. 6. Up-to-date regulatory frameworks were not readily available. 7. Understanding of public procurement systems needed improvement. 8. Exposure to decentralized procurement schemes was limited. 9. More interaction with healthcare professionals was needed for practical insights. 10. Detailed patient feedback data was lacking for thorough analysis.
Suggestions for improvement	• **Orientation Programs:** Introduce structured programs to help interns familiarize themselves with the organization's culture, goals, and operations from the start. • **Guidelines on Topic Selection:** Provide clear and comprehensive guidelines to assist interns in selecting research topics that align with organizational priorities and contribute meaningfully to ongoing projects. • **Improved Data-Sharing Mechanisms:** Enhance systems for sharing project data across departments to ensure interns have timely access to relevant information for their research and tasks. • **Database of International Patients:** Establish and maintain a robust database containing detailed demographic and medical information of international patients to support research and service planning. • **Workshops on Quality Indicators:** Conduct workshops to educate interns on key healthcare quality indicators, emphasizing their significance in assessing and improving healthcare services. • **Collaboration with Regulatory Bodies:** Foster partnerships with regulatory authorities to stay informed about current regulations and standards in healthcare, benefiting interns' research and project compliance. • **Training on Public Procurement:** Organize sessions to educate interns about public procurement processes specific to healthcare, ensuring they understand the complexities and requirements involved. • **Case Studies on Decentralized Procurement:** Include practical case studies in the internship curriculum to familiarize interns with decentralized procurement models,

	highlighting their implications and benefits. • **Field Visits and Professional Interactions:** Encourage interns to participate in field visits to healthcare facilities and interact with professionals to gain firsthand knowledge and practical insights into healthcare practices. • **Structured Patient Feedback Mechanisms:** Implement systematic approaches for collecting, analyzing, and utilizing patient feedback to enhance service delivery and patient satisfaction throughout the organization.

Dr. Rajnandini Chaturvedi

Signature of the Student

Approved by the IIHMR University's Mentor