IIHMR UNIVERSITY

SUMMER INTERNSHIP REPORT

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PART I

RESEARCH PROJECT

EFFECT OF COVID-19 ON MEDICAL VALUE TRAVEL IN INDIA

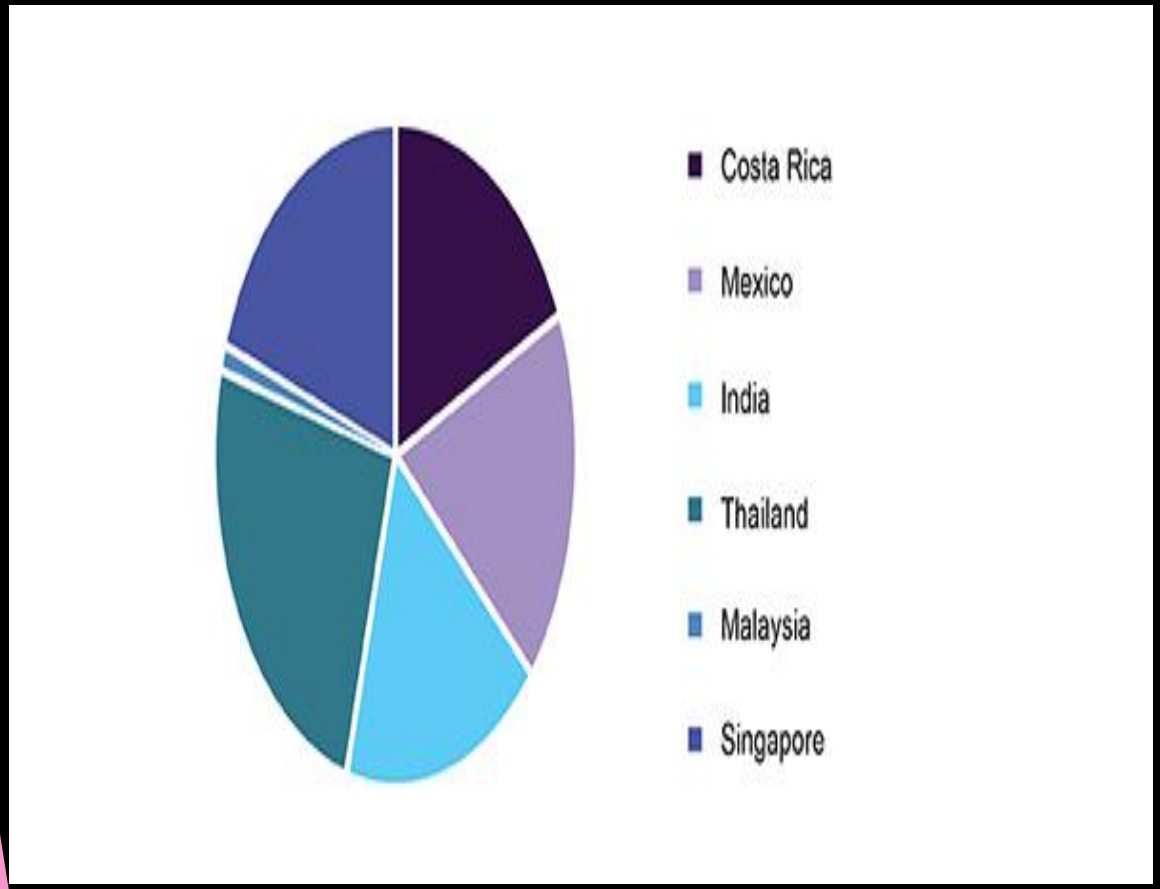
INTRODUCTION

Medical value travel is often described as the practice of travelling to another country (or geographical location), for the purpose of obtaining healthcare.

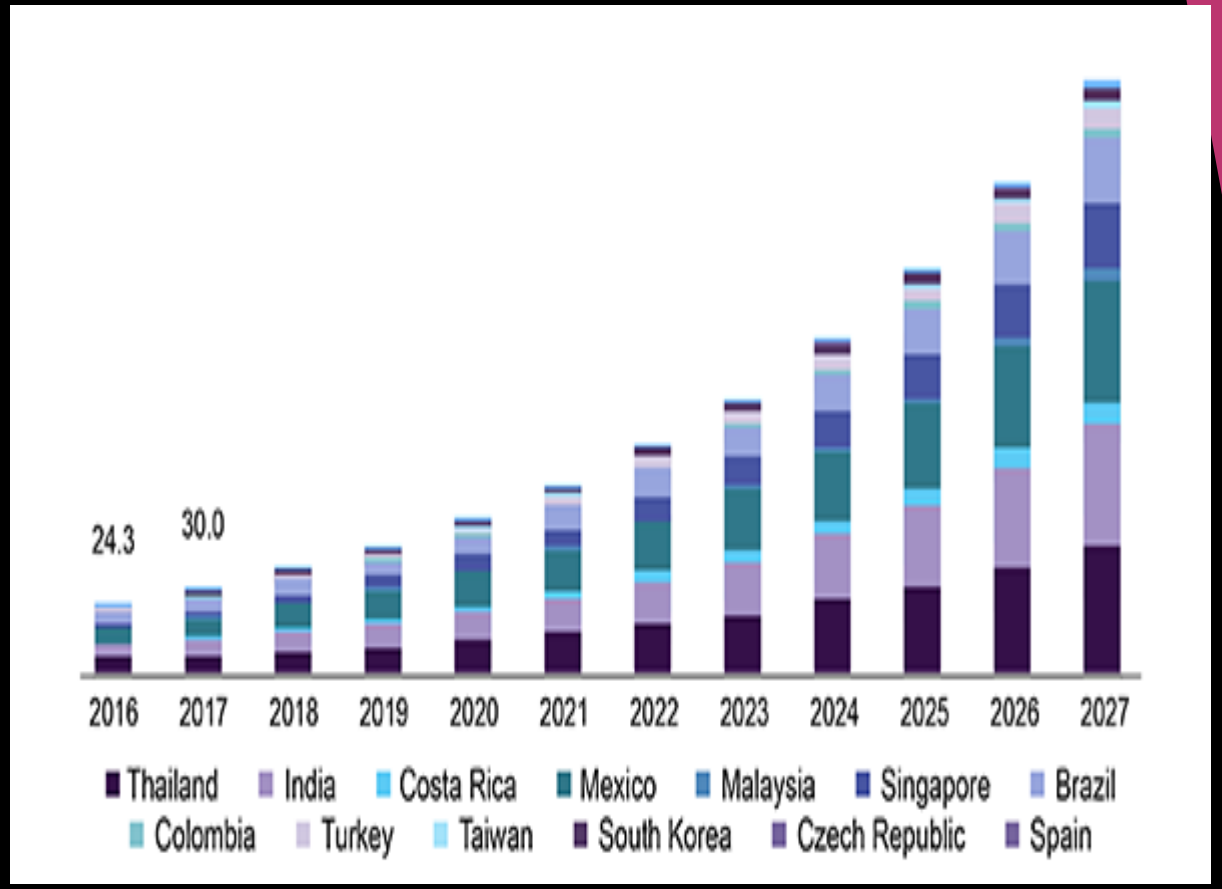
- Medical tourism in India **was projected to grow at a CAGR of 200% by 2020, hitting $9 billion**. In 2017, 495,056 patients visited India to seek medical care.
- But **Covid-19** has become an eclipse for the promising industry of Medical value tourism. WHO declared covid-19 as a global pandemic on 11th March 2020.India started to see a steady rise in the number of positive cases in March too, after which a nationwide lockdown was imposed on 24th march 2020 as a preventive measure to halt the spread of virus . Followed by three more lockdowns which lasted till 31st of May 2020. Post this the government has started easing restrictions in a phased manner. But the virus continues to spread in the country. At the time of writing this report the total number of Covid-19 **positive patients in the country were- 746,824.**

In 2017, India ranked **5th Globally among 41 major medical tourism destinations**, as per Medical Tourism Index Overall ranking and **2nd in Asia**, among the most preferred destinations for medical travel.

GLOBAL MEDICAL TOURISM MARKET SHARE BY COUNTRY, 2016 (5%)

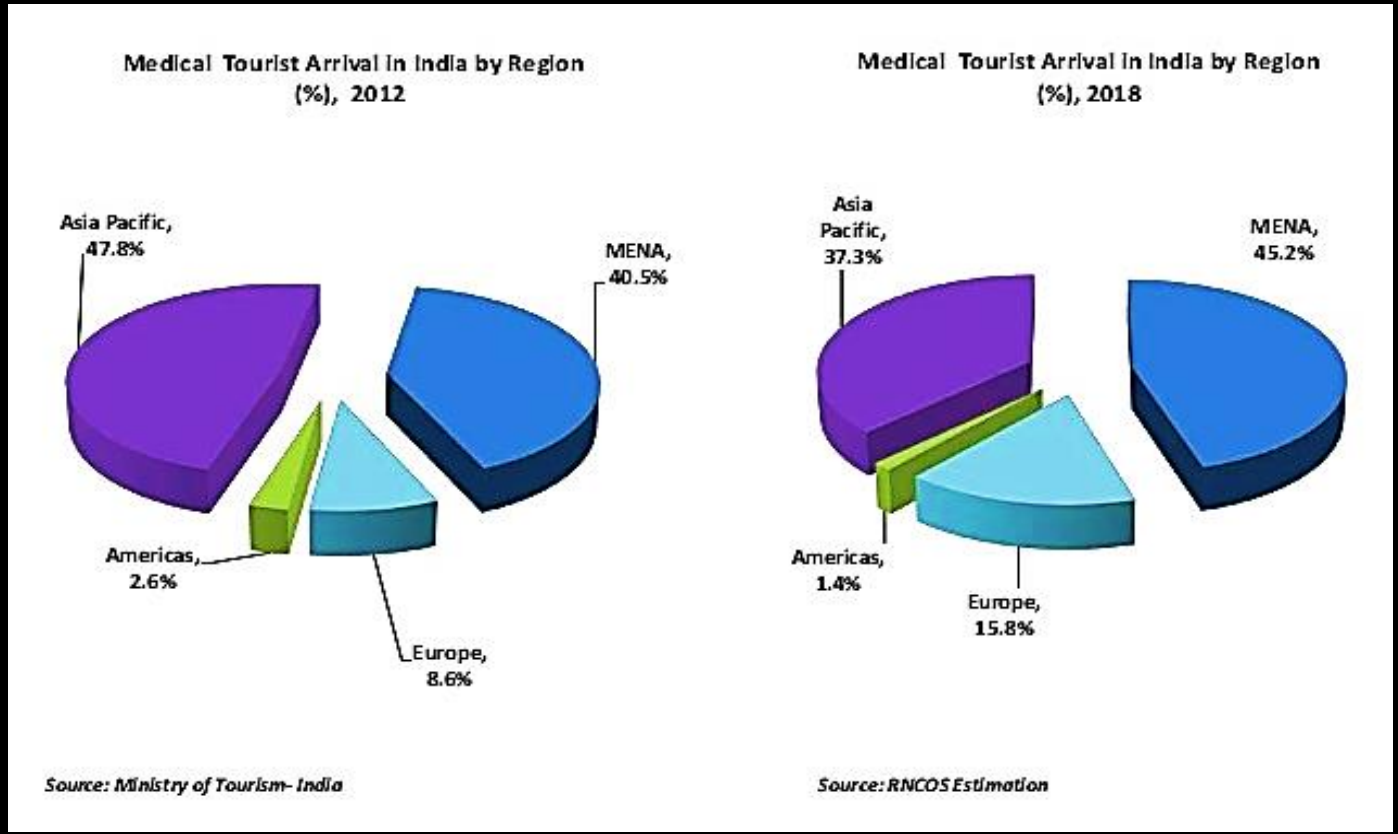


GLOBAL MEDICAL TOURISM MARKET SIZE, BY COUNTRY, 2016-2027 (USD BILLION)

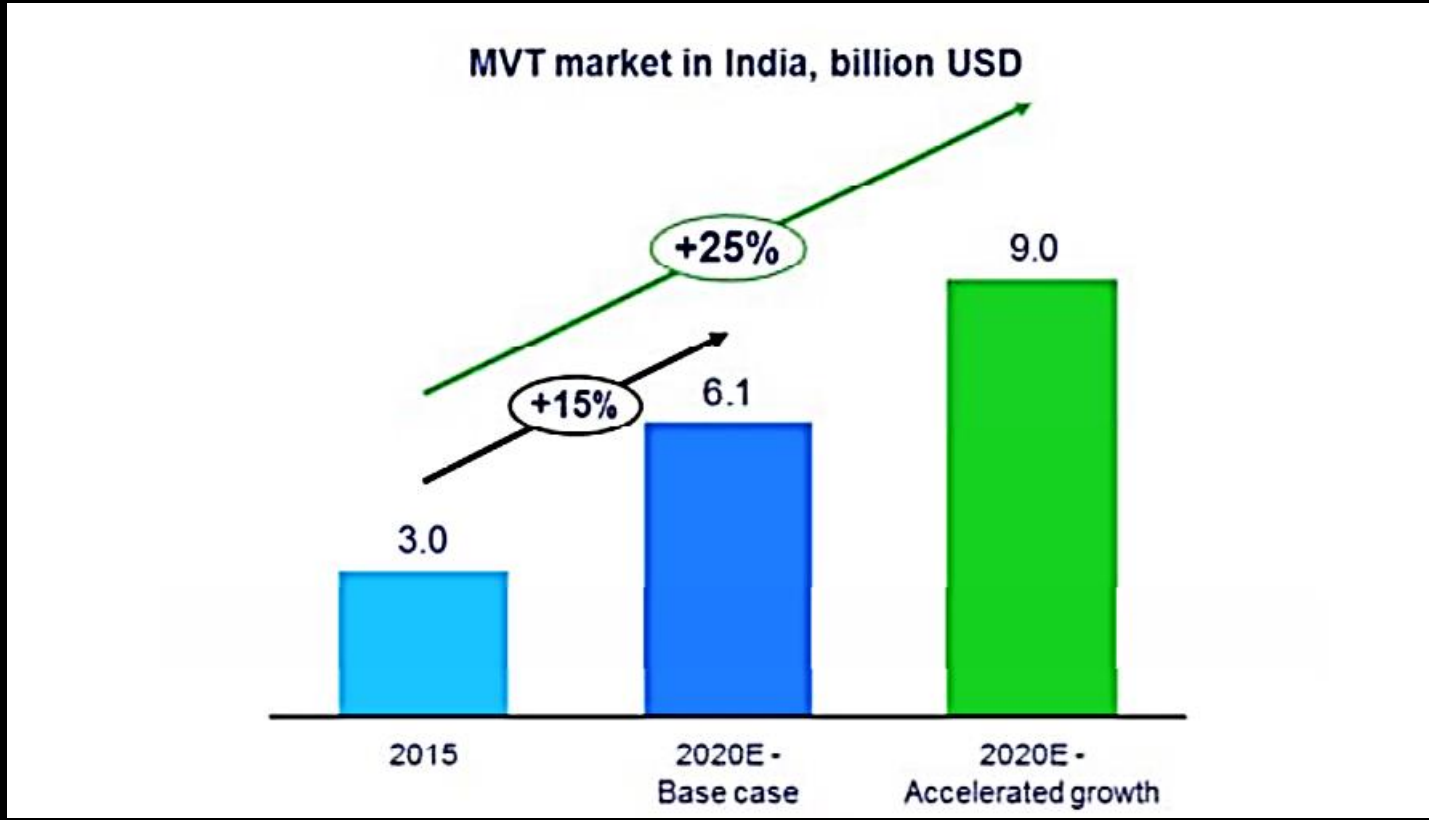


Source: www.grandviewsearch.com

SOURCE COUNTRIES FOR INDIA



Medical Value Travel in India was projected to be at $9 billion by 2020.



OBJECTIVES

- 1)To study the ramifications of Covid-19 on MVT in India.
- 2)To study the implications of these ramifications on Indian Hospitals.
- 3)To figure out some recommendations that may help in the current and coming times.

METHODOLOGY

- A review of literature, conducted using research papers and articles from various databases like- google scholar, PubMed, Wikipedia.
- Internet searches of professional organization and government www-sites, unpublished research studies, discussion papers, media releases. Almost 25-30 documents were reviewed, of which 18 were used in this report.
- The selection was made primarily on the following basis-

1)Most recent news items & press releases(2016-july2020).

2)Those written in English.

- The selected pieces were then analysed and used to put together the ramifications of covid-19 on MVT industry, implications of these ramifications on Indian private hospitals, future trends in MVT.

- **KEY WORDS USED: Medical Value Travel, Medical Tourism, Covid-19, Private Hospitals, Corporate Hospitals, India**

LIMITATIONS

- A secondary data search was done to analyse all existing journal articles and publications. However, the **number of articles** found on the exact issue of “impact of covid-19 on MVT”, were **limited**. Probably due to the recency of situation. Therefore, the review is mainly from news articles, and limited research papers that were found.

- Also, the report focuses on the impact of covid-19 on Mvt and implications for private hospitals. Hence, how the scenario **effects public healthcare was not taken into consideration**.

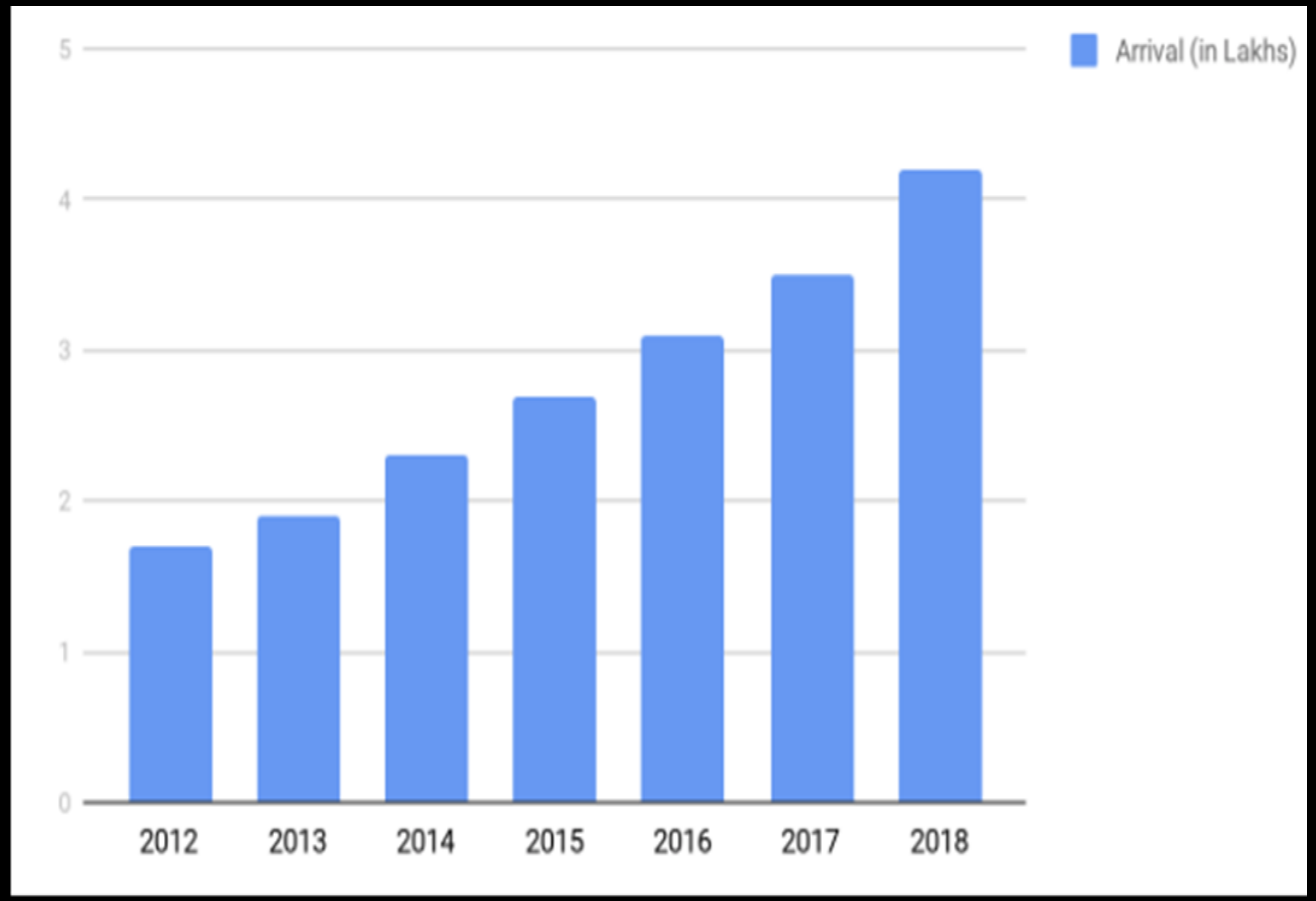
RESULTS/FINDINGS

- COVID-19 HAS A DEFINITE **NEGATIVE EFFECT** ON MVT.
- DUE TO THIS NEGAVTIVE EFFECT, **HOSPITALS** (ESPECIALLY BIG CHAIN PRIVATE) IN INDIA ARE BOUND TO SEE **LOSS IN REVENUE AND REPUTATION**.
- **FUTURE** FACE OF MVT WILL SEE SOME **CHANGE** OFCOURSE, AS THE COUNTRIES AND PEOPLE ADAPT TO THE CRISIS.

EFFECT OF COVID ON MVT

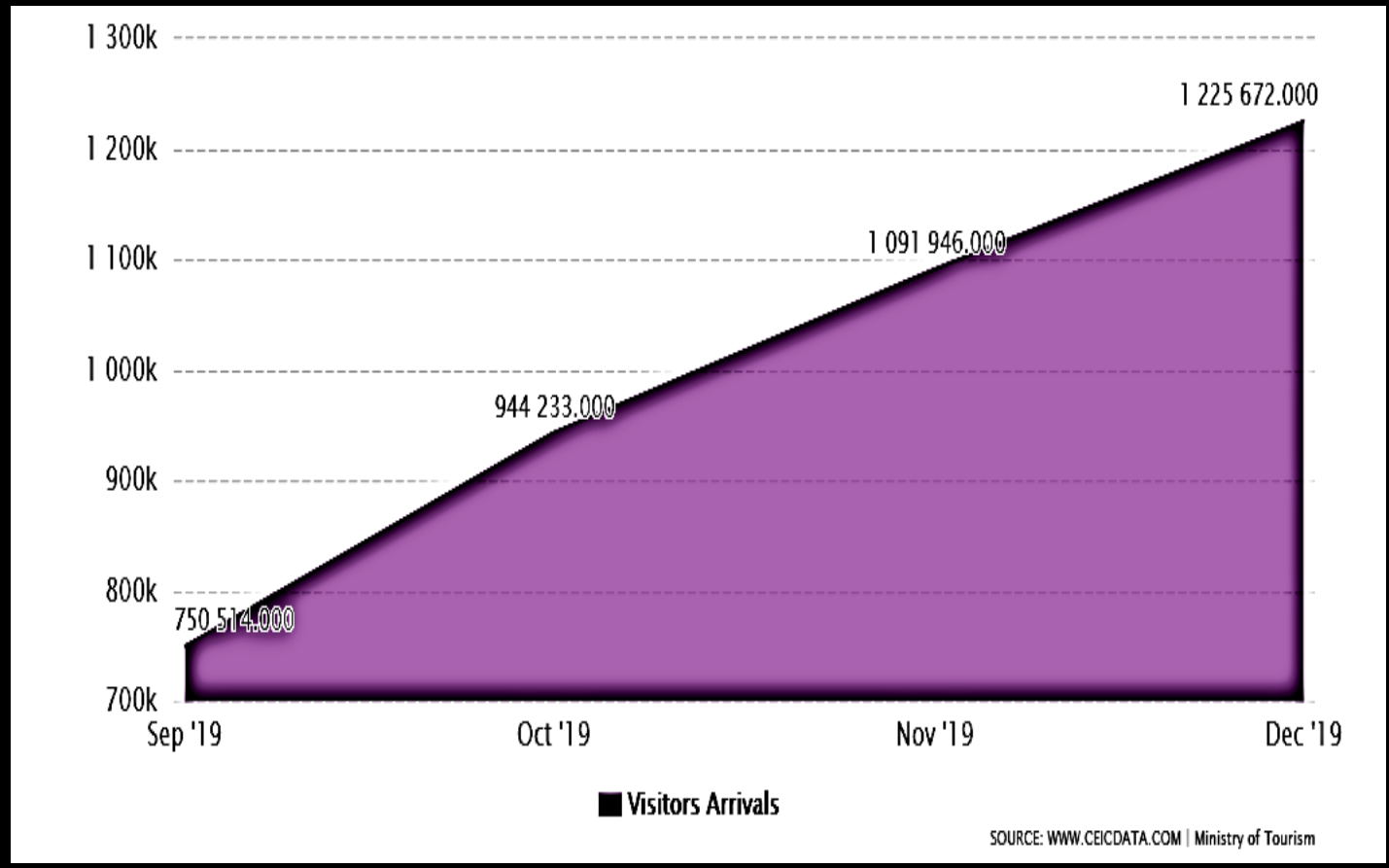
- MVT DEPENDS ON TWO VERTICALS – TOURISM AND HOSPITALS THAT PROVIDE THE CARE.
- Global transport and its status are fundamental for MVT industry.
- In 2018, as per the analysis 6.1% of all tourists that arrived in India, came for medical purpose. Foreign tourist arrivals in India on medical visa during 2016 and 2017 were estimated at 4,27,014 and 4,95,056 respectively.
- 24.2% arrivals from West Asia was for ‘Medical Purpose’ followed by Africa (14.6%).

INDIA MEDICAL TOURIST ARRIVALS (IN LAKHS) 2012-2018(ADD IMAGE SOURCE)

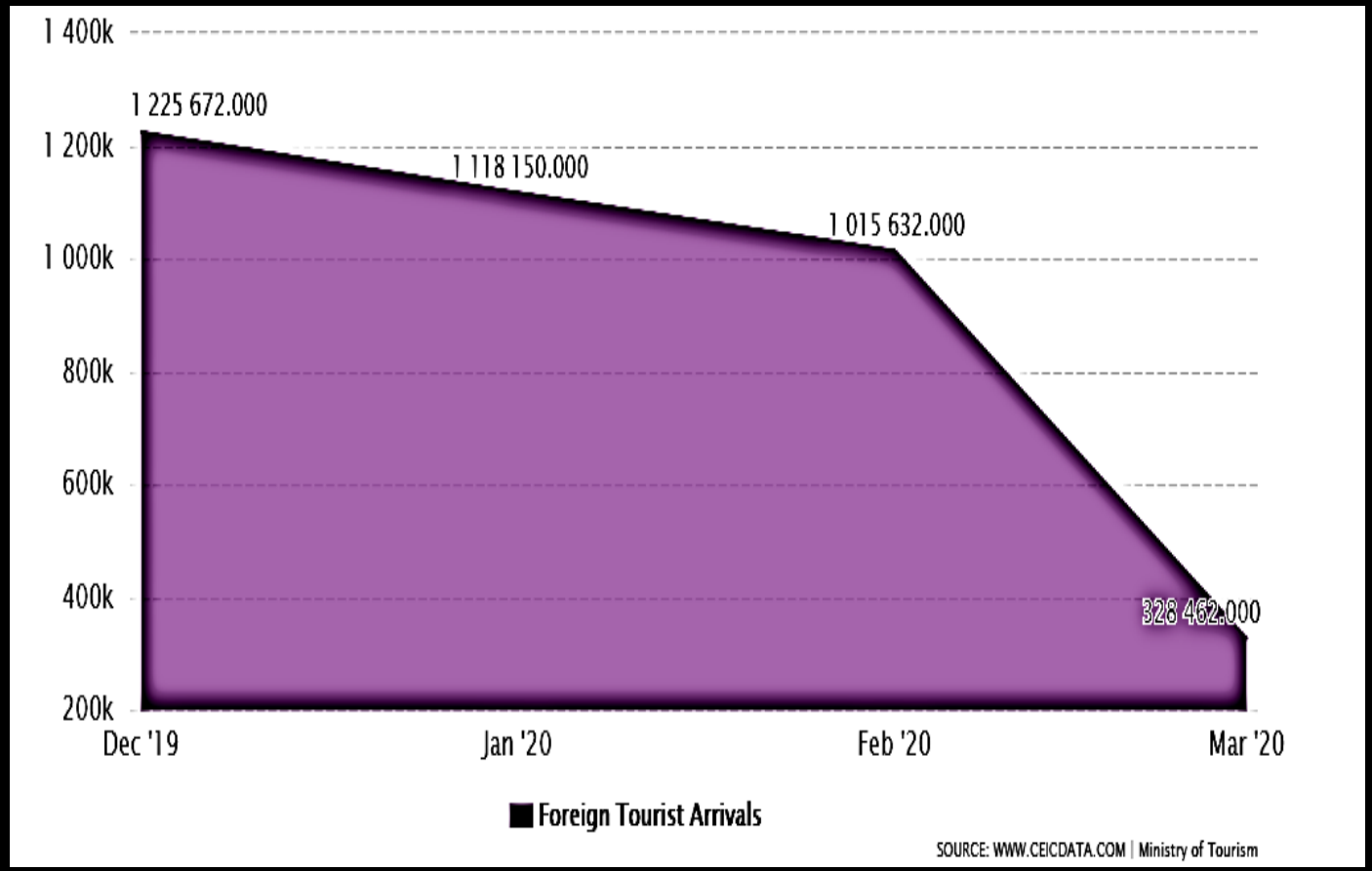


Source: Pristyn Care

BEFORE COVID-19, THE NUMBER OF FTA'S TO INDIA WERE CLEARLY SEEING AN INCREASE. REACHING RECORD HIGH IN DEC'19



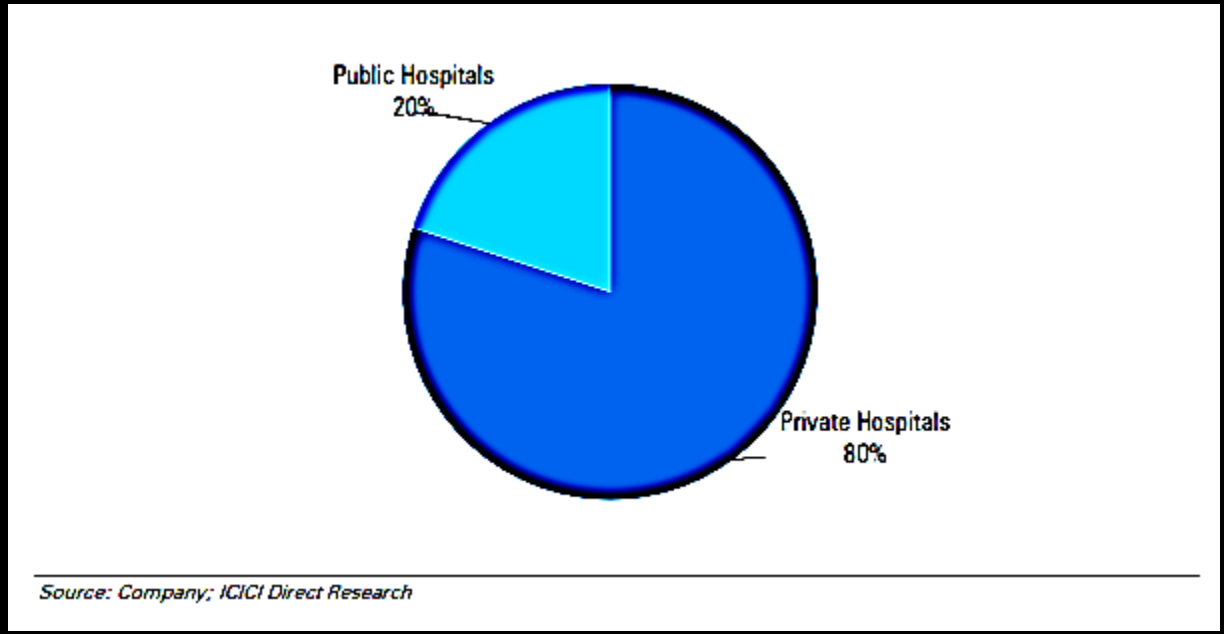
AFTER COVID-19 STARTED, THE FTA'S STARTED SEEING A FALL IMMEDIATELY. REACHING **RECORD LOW IN MARCH'20.** AND ALMOST TO A NIL AFTER THE LOCKDOWNS STARTED.



- If the corona conditions persist across the world for six months, the fiscal damage to the MVT industry has been estimated at almost $2.5 billion. This is equivalent to the revenue that could have been generated over eight months if the business had progressed as usual
- The revenue of MVT industry is expected to have gone down by 80% and if India is hit by a second or third wave it may even go down to 95% (as International travel ban may be re-imposed). Even if there is no second wave, MVT is not expected to return to normalcy until March 2021.
- MVT to India also includes people traveling to India for treatment accounted for $3 billion for the AYUSH sector before this pandemic. But the prohibited traveling on flights have declined the occurrence of patients to India.
- 96% of international borders are closed to deal with the pandemic which has reduced the number of people seeking medical treatment in other countries resulting in an adverse impact on MVT market.
- COVID-19 outbreak will turn out to be a major restraint for the MVT industry during 2020 and 2021. According to the WHO report, 213 countries are affected by the COVID-19 outbreak. The government of various countries has banned travellers from affected countries, barred flights to certain countries, and changed the visa requirements. The American Centres for Disease Control and Prevention (CDC) predicted that the situation could last into 2021.

IMPLICATIONS FOR HOSPITALS

THE BOOM IN CORPORATE HOSPITALS IN THE RECENT TIMES HAS SUDEENLY FUELED MDEICAL VALUE TOURISM.



Source: Company; ICICI Direct Research

- 10-20 % revenue generated by large hospitals is accounted to international patients.
- The price bands for these patients are different (mostly higher).
- Treating international patients therefore more profitable for these hospitals.
- Even though health care services did not stop post declaration of lock down, priority was to develop COVID recovery units. No noteworthy activity in the medical value travel industry took place.

- Another complication is hospital staff at risk. Indian Medical Association revealed that so far 99 doctors have died and 1300 are infected due to covid-19 in India.
- Max Healthcare- The loss in average revenue due to a pause on the international medical travel business is predicted to be ₹25 crore per month.
- Fortis Healthcare - with respect to mvt, the revenue has gone down by 35% in March. And in April they are expecting it to be down by 80%.
- Triple burden (existing struggle + loss in revenue + increased cost).

FUTURE OF MVT

1) More thought on choosing a destination.

2) Domestic medical travel to return first.

3) Pre-travel health checks to reduce patient flow (a health passport system).

4)Wellness sectors to see more boom.

5) More Hospitals to get accredited.

RECOMMENDATIONS

1)FOCAL FOR LOCAL

- Asian and African countries such as Bangladesh, Afghanistan, Iraq, Yemen, Sudan, Kenya and Nigeria etc.

2)EMPHASIS ON SAFETY

- How the country has fared in the battle against COVID-19.
- Having hospitals with many national and international accreditations send out a strong message to medical travellers about the safety

3)FROM MEDICAL TOURISM TO HEALTH TOURISM

- A more holistic approach that will involve wellness tourism.

4)WHAT CAN THE GOVERNMENT DO?

- Recognise MVT as an independent industry.
- Grant fiscal stimulus to provide much-needed liquidity like providing bailout packages, etc.
- Accelerate the process of tax refunds for the institutes involved.
- Relax the medical travel visa fees. That can be an incentive to medical tourism patients to visit India.

5)DIASPORIC MEDICAL TOURISM (DMT)

- **Travel of migrants to their countries of origin** with an intention to use healthcare and access to it through their own volition- Mathijsen, 2017
- Diasporic medical tourists constitute an attractive segment of consumers that is still not well understood and targeted. **In countries like India, Jordan, Mexico, Turkey, etc diasporic travellers may even be the majority**.

6) VIRTUAL HEALTHCARE

- A positive effect on healthcare systems, resulting from COVID-19, is the **much-awaited acceptance of the adoption of virtual healthcare** – online and video consultation (from enquiry through to post-treatment care).
- "MVT companies that have offices overseas have already started interacting with governments in other countries, seeking permission to start telemedicine services. So far, they have been able to roll out these services to their clients in Myanmar and Uzbekistan, after getting their doctors accredited with Myanmar Medical Council and the Uzbek health ministry.

7) FOCUSING ON INNOVATION TO KEEP COST LOW.

CONCLUSION

- Given the multifaceted impact of Pandemic COVID-19 in form of **Health care crisis, falling economy, cessation of International Travel followed by restricted International travel with due risk of infection - mvt industry has hit the rock bottom**.
- Private hospitals in India are facing a triple burden. It will be a while before they see any revenue from international patient business. The **big** MVT companies and big hospitals **may survive** this if they hang in tight, control costs, and employ innovative strategies. Unfortunately, not all businesses will survive by the end of this. Things will be **especially difficult for the small businesses**.
- For almost all countries revival of **MVT industry will probably not be at the top of the priority list and may even be sacrificed for broader economic and tourism recovery**.
- So, is there hope?
- This is the time that calls for change. When the world does not know if it will get back to normal or establish a new normal, the providers need to be prepared for both. It is **quintessential for businesses to use this lag time to improve their practices, processes and communication with the consumer.** Our country has always been the best at adapting and coming up with ground-breaking solutions. **It may take time, but the industry is bound to revive**.
- This might also be an opportunity for all countries that cater international patients to move from medical value travel to **Sustainable Health Value Travel**.

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PART II
ONLINE COURSE

COURSE NAME:

E-HEALTH, MORE THAN JUST AN ELECTRONIC HEALTH RECORD. (UNIVERSITY OF SYDNEY)

PLATFORM:

COURSERA

COURSE DURATION:

15 HOURS (5 MODULES, 5 WEEKS)

COURSE DESCRIPTION

- The MOOC, "eHealth: More than just an electronic record!", is multidisciplinary in nature, and aims to equip the global audience of health clinicians, students, managers, administrators, and researchers to reflect on the overall impact of eHealth on the integration of care. It explores the breadth of technology application, current and emerging trends, and showcases both local and international eHealth practice and research.
- The entire eHealth Course consists of 5 modules and takes about 5 weeks to complete.

COURSE OBJECTIVES

- - The fundamentals of eHealth and where it is heading
- - What kind of health data we are currently collecting and how it will transform healthcare in the future
- - How new technologies are helping health consumers participate in their own healthcare
- - How eHealth can improve the coordination and efficiency of healthcare and what the barriers might be Length:

COURSE CONTENT

WHAT IS E-HEALTH?

What are the fundamentals of eHealth and where is it heading?

HEALTH IN OUR HANDS.

How are new technologies helping consumers 'participate' in healthcare?

DATA AND THE "QUANTIFIED SELF".

What kind of health data do we collect now, how will it transform healthcare in the future?

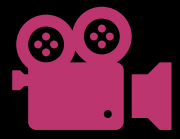
INTERACTING WITH THE HEALTH PROFESSIONALS USING NEW TECHNOLOGY

How can eHealth improve the coordination and efficiency of healthcare, what are the barriers?

E HEALTH IN PROFESSIONAL PRACTICE

How can eHealth principles and technologies be applied in professional practice?.

LEARNING METHODOLOGY



Video lectures

Reading material

Quizzes

Applicative Assignments

KEY LEARNINGS

- The course in general instils a learning about how digital technology, especially apps, data, and communication technology, are being used to support health and healthcare management and how it is being deployed to improve healthcare delivery and quality. It also teaches objective methods of reviewing apps. For instance, how to use MARS Analysis to rate health apps
- E-Health model, which illustrates how key eHealth domains intersect to impact on health care
- Insight into the fundamental principles of eHealth
- Appreciate the current and future challenges of eHealth for both health consumers and health practitioners
- Understand the potential of mobile technology to support the shift from “healthcare” to “health”
- Range of innovative eHealth interactions between consumers and healthcare professional
- Case-based examples of eHealth in professional practice

THANKYOU