

Study on Customer Response to the Future of Home Healthcare

By

Abhinav Arora

*Dissertation submitted in partial fulfillment of the requirements of the degree
MBA Hospital and Health Management*

Academic year, 2018-2020



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The certificate is awarded to

Abhinav Arora

In recognition of having successfully completed his
Internship in the department of
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and has successfully completed his Project on

Study on Customer Response to the Future of Home Healthcare.

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He comes across as a committed, sincere & diligent person who has a strong drive and zeal
for learning

We wish him all the best for future endeavors



Mentor



Training & Development



THE IIHMR UNIVERSITY, JAIPUR

CERTIFICATE BY SCHOLAR

This is to certify that the dissertation titled **Study on Customer Response to the Future of Home Healthcare** and submitted by **Abhinav Arora, Enrolment no :- 0702** under the supervision of **Mr. Dhirendra Kumar** for award of MBA in Hospital and Health Management of the University carried out during the period from 17/02/2020 to 17/05/2020 embodies my original work and has not formed the basis for the award of any degree, diploma associate ship, fellowship, titles in this or any other institute or other similar institution of higher learning.

Signature

Abhinav Arora

MBA-HM 23

ABSTRACT

INTRODUCTION: Home healthcare means giving the medical care at patient's home and providing them all the facilities at home just like in the hospitals. It includes all the specialised care provided by skilled healthcare professionals, skilled nursing care, physiotherapy, ICU services, dental care and many more. Home healthcare also includes non-medical staff which includes administrators, patient coordinators, sale consultant. Home health care is usually less expensive, more convenient, and just as effective as care you get in a hospital. It is new trajectory in healthcare sector.

OBJECTIVE: The objective is to study customer's response to future of home healthcare and analyze their responses.

METHODOLOGY: For the research Mixed-method approach is used i.e. both primary and secondary. Primary research involves the feedback of 100 patients/attendants by the customer support team. 100 patients are randomly selected in month (from 17 February to 17 March). Each patient asked question about their responses to future home healthcare. Method of the survey is online. For Secondary approach various papers are reviewed and data is also collected from magazines, brochures, and pamphlets of HCAH. Many Search engines are used like Pub-med, MRFR, Research gate.

RESULTS: According to the observation, home healthcare is offering the society, today with great lead and has the future which is favoring the upcoming professionals i.e. expert doctors, skilled nurses, and managers. Apart from that home healthcare, it is giving various benefits to the patients specially who belongs to low income group and middle-income group. It is observed that to get treatment from super specialty hospital single person ICU facility expenditure is up to 35000 to 70000 per day which is not affordable for middle income group of population and the similar set in home of ICU facility costs up to 7500 to 10000 per day. Almost there is up to 50 reduction in cost in comparison to hospital expenses. So, this is reason of rapid fuelling in market of home healthcare.

CONCLUSION: Home healthcare is providing quality care with affordable cost. Home health care will be the preference of every 2nd patient of the society in coming future. The start-ups who are providing the healthcare at home captures the vision for the future of home healthcare.

KEY WORDS: Home health care, future trend, market analysis, Portea, HCAH, Digital Health technology, Geriatric health.

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The opportunity provided to do dissertation at Healthcare at Home, Delhi was an enriching and valuable experience. I am highly obliged to have met so many experience professionals who led me throughout my study period I am sincerely grateful to them for sharing their truthful and illuminating views on several issues related to the project.

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I am extremely thankful to my faculty at IIHMR- Jaipur and specially my **Mentor Dr. Dharendra Kumar (Professor)** for being my support all through the internship.

I recognize this opportunity as a big milestone in the development of my career. I will strive to use the knowledge and skills gained in the best possible way.

Lastly, I want to express my respect and love to my parents, siblings, and my friend **Dr. Nikita Arora** for constant encouragement and motivation in my higher studies.

Sincerely,

Abhinav Arora

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LIST OF ABBREVIATION

- ❖ **AARP** **American Association of Retired Person**
- ❖ **AI** **Artificial Intelligence**
- ❖ **CAGR** **Compound Annual Growth Rate**
- ❖ **FICCI** **The Federation of Indian Chambers of Commerce and Industry**
- ❖ **HBPC** **Home Based Primary Care**
- ❖ **HCAH** **HealthCare at HOME**
- ❖ **HH** **Home Healthcare**
- ❖ **HIT** **Healthcare Information Technology**
- ❖ **ICU** **Intensive Care Unit**
- ❖ **IHI** **Institute of Healthcare Improvement**
- ❖ **KPMG** **Klynveld Peat Marwick Goerdeler**
- ❖ **MD** **Doctor of Medicine**
- ❖ **NP** **Nurse Practioner**
- ❖ **PCC** **Patient Care Coordinator**
- ❖ **QCI** **Quality Council of India**

ABOUT ORGANIZATION



HealthCare at HOME is start-up established in 2012 in India. With the aim and agenda to extend the hospital like services at home, HealthCare at HOME is a joint venture between the Burman family, the promoters of Dabur and founders of HAH, UK.

HCAH is leading home healthcare services provider in India with international standards. Services offered by the HCAH include setting up ICU and ventilators at home, providing cancer care, nursing care, physiotherapy at home. As estimated Healthcare at home is offering 70% of services at home.

VISION: HCAH will strive to be the most people- centric, credible, and comprehensive home healthcare solution provider in India.

MISSION: HCAH fulfil the vision by creating service delivery model with “people centricity” at core of it. Delivering credible clinical outcomes, for every patient, every time. Evolving scalable and self-sustaining business model.

VALUES: Trust, Empathy, Excellence, Care.

SERVICES OFFERED BY HCAH

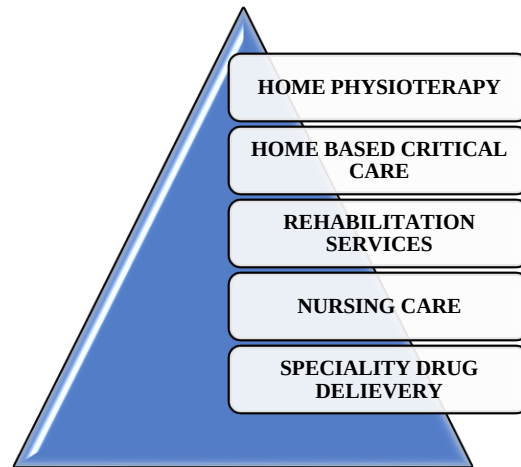


Fig.1

Healthcare at home leading in business world all around India having experience of largest pharmacy of UK. With 8 years of extreme success of company in the market having 1500+ employees and 4 lacs+ patient treated by them with highly experienced doctors' have 1.5 lacs+ data of top doctors of India and having tie up with 30+ pharmacy companies. HCAH offers some key services for insurance companies. With services spread across 40+ cities, HCAH aim to bring world class medical expertise at the comfort of patient's home.

ORGANOGRAM OF HCAH

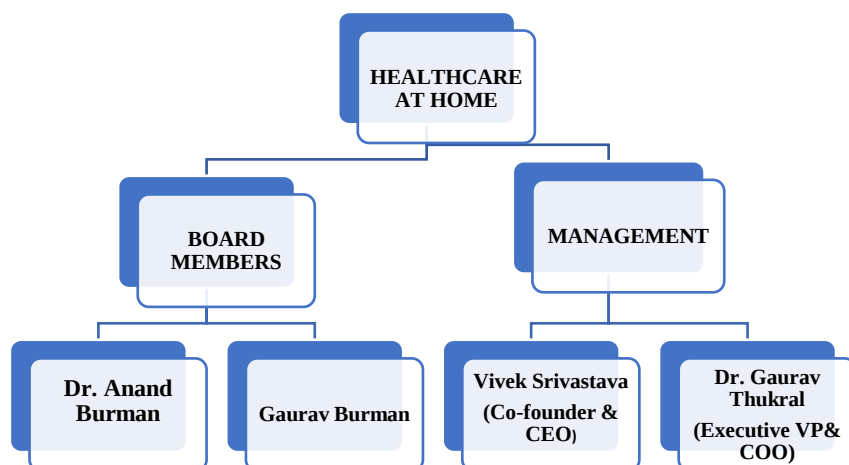


Fig.2

STAFF HIERARCHY:

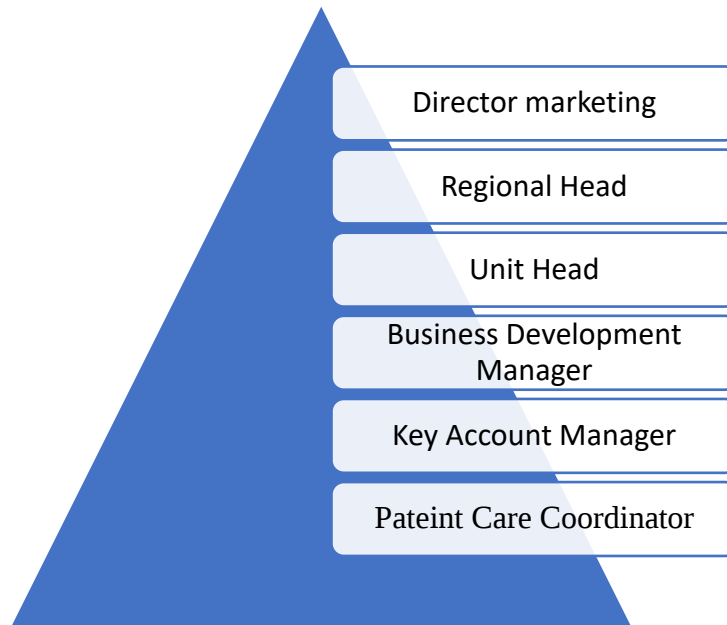


Fig.3

STRUCTURAL OUTLINE OF REPORTING



Fig.4

GENERAL PROCESS FLOW:

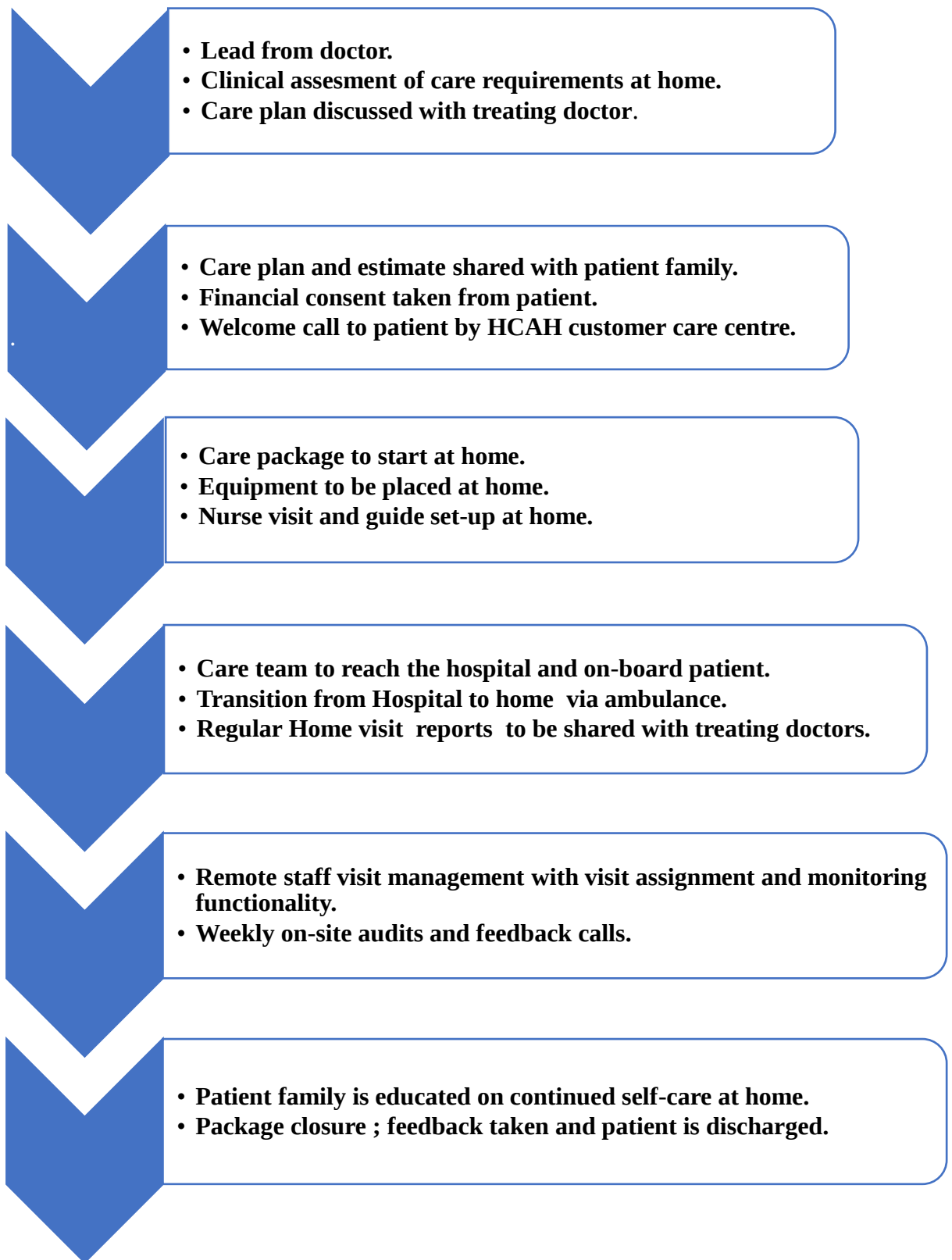


Fig.5

DATA COLLECTION PROCEDURE-

Mixed- method approach

Primary data: Online Survey with help of google questionnaire form

Secondary data:

1. Through registered records.
2. Through website of organization.
3. Literature available about the organization like magazines, brochures, pamphlets, CDs, and written documents.

Questionnaire used for primary data collection are:

1. Age
2. Gender
3. Have you ever faced any problems in getting services at hospitals?
4. Would you recommend healthcare services at home?
5. Have you ever heard about any organization or start-up providing services at home?
6. Did you ever get Health services at home?
7. Do you think patient rate of healing increases at home?
8. Do you believe Healthcare services at home are more financially affordable?
9. Do you agree that home services are more feasible with respect to admission and discharge procedure?
10. Do you agree that patient will be more comfortable with having their family around?
11. Do you think healthcare at home gives better privacy to patients?
12. Do you think home healthcare provides freedom and security to patients?
13. Do you think that there is any future of home healthcare?

INTRODUCTION: The future of home healthcare will transform the care and treatment decisions and the lives of people. In India life expectancy is increasing so demand for the geriatric health will be more in future and that will eventually be increasing the demand of home healthcare in India. The **home healthcare industry is fast-evolving growing at a CAGR of 20 per cent and is already worth \$2 billion.** Currently, many health-tech start-ups in India are aiming to create lifestyle and technology products and services that cater specifically to the elderly and the ailing, tapping only a small percentage of the market. But in coming future trend and market trend, it will fuel up in home healthcare industry. Home healthcare in India is at base level and still there are many ultimatums to rise.

Home healthcare is providing **ICU services, ventilator services, physiotherapy, cancer care at home.** Home healthcare also prevents patient from nosocomial infections. **Start-ups like healthcare at home** hits in market in the global crises of **Covid-19** and provide the services like hospital to their customers at their home safely. The home health-care industry immediately began preparing its workers to add coronavirus to their already full plates. They launched education and training programs, provided as much PPE as possible and stepped up telehealth services.

Today is the era of technology, and technology has vision of innovation in healthcare field and it will revolutionize the home healthcare in upcoming future. With the help of digitalization patients can get consultation with their physicians on video and audio calls at home. Remote monitoring tools that can be connected to in-home devices or a smartphone help in reducing costs and wait time at clinics in cases where regular health monitoring is essential. This is a technology that will undoubtedly continue to evolve in the next year. Many Hospitals also come in the market with this approach and providing home healthcare and some multi-speciality hospitals have their tie-up with the start-up rising in the market.

Home healthcare is promising career path and giving opportunity to large number of healthcare workers from professional doctors and nurses to administrative staff. Home healthcare is a great example of delivering personalized service for customer's convenience, home healthcare organizations must still offer competitive prices.

Home healthcare is not part of luxury treatment, its completely for patient's benefits. Increase in home healthcare, lesser the hospitalization, and more quality of care with cost saving at home.

Home healthcare is promptly advancing and coming at frontlines. Modern technology and extreme standards of home healthcare maintains the start-ups in the market. Technology adoption holds the key to the future of home healthcare. This change is imminent and must be recognized quickly for India start-ups to gain some ground, because the future belongs to digital home healthcare that empower patients to take care of themselves at their homes with security and freedom.



Figure 7. Framework for home health of the future.
Source. Avalere Health, 2016.
Note. ACO = accountable care organization.

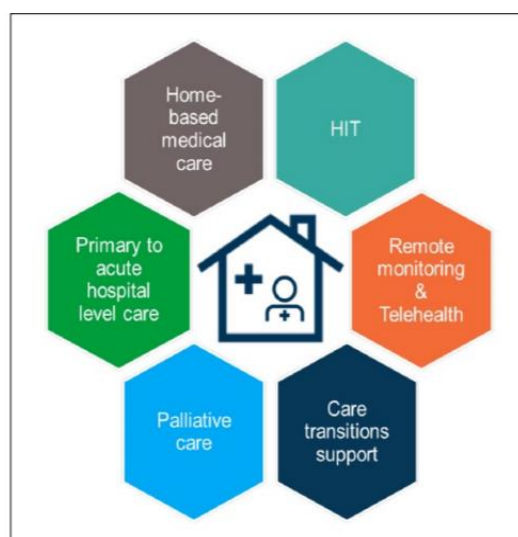


Figure 8. Capabilities of home health agencies for the future.
Source. Avalere Health, 2016.
Note. HIT = Health Information Technology.

Fig.6

Home Healthcare advancing in Pandemic Corona

Whole world is tussling with this enemy named covid-19. But Home healthcare services are working on large scale even in this deadly outbreak. They are providing their skilled services to their patients in threat posed by virus. Corona virus pandemic is stretched in all around the world. In this bad break people are realizing the value of home healthcare in their lives. Patients have threat to move out from their homes for the treatment in hospital where there is blow of death. At that time home healthcare start-ups stood up and come at front foot to provide the services to the patients at their homes safely and

comfortably. Tele consultation and all the necessary set ups are established by them including nursing care and physiotherapy at very low cost than hospitalisations.

Apart from that, in covid time there is increase in number of cases and infrastructure is limited. So, home healthcare organization are ready to fulfil all the requirements. They are helping by managing the mild cases of corona. Many organizations are planning to tie up with hospitals to provide service of home isolation packages. The main player who are rising in the market with this is **PORTEA and HEALTHCARE AT HOME**. These organizations are providing remote care services like 24*7 caregiver, teleconsultations, psychological counselling, home delivery of medicines. They are also coming up with the screening of the covid patients.

HCAH, the foremost competitor of home healthcare provider in the North India engaged up with the Fortis Hospital in Gurugram to watch out the covid -19 patients. They popped up in the market with **Home Isolation Support Programme** which is basically comprehensive care directive scheme executed by authentic, upskill, qualified, accomplished healthcare professionals including Nurses, Doctors, Psychologists, Paramedics that will pay attention to all the medical needs in period of home isolation. Similarly, **Portea** the leading player in home healthcare tied up with Government of Goa and customer engagement automation platform Verloop to launch the covid-19 information. Agenda of this to create awareness among the people and resolve their queries about precautions.

Start-ups are also planning to involve the insurance industry with them so that the home healthcare expenses are reimbursed to the patients. This deadly pandemic proves that health is most important than everything and shown that there is need of hospitals and home healthcare in our society.

Home healthcare market in India was projected up to \$6 billion before the lockdown. There is huge loss and backdrop in HH due to pandemic, but it is now near \$10 billion occasion to be accomplished in next coming years.

OBJECTIVE

- To study customer's response to future of home healthcare and analyse their response.

LITERATURE REVIEW

I. "A study done by staff of Alliance group, in close collaboration with members of the Alliance's work groups on Quality/Innovation and Research." It is found that providing healthcare services at home can improve the patient's outcomes at affordable cost. **It was proved that patient who receive home healthcare gets benefit and cure easily rather than who got the same services in hospitals.** Moreover, expenditure for treated patient at home was 30% less than those of treated at hospitals. So, its concluded from the study that home healthcare is more efficient and affordable.

According to one more study by AARP, patients with age of 50 and above **(mainly age group 50 to 64)** strongly prefer to have treatment at their homes rather than at nursing homes. **They needed 24 hours care at home and above 50 years of age 58% of people favour services at home.**

Home healthcare has skilled nursing staff and therapist who provide services to their receivers who are confined to their homes by the certified doctors. Home healthcare start-ups are serving their best to their customers with home care management. In USA, there are programmes and projects are approached to improve the home health for the coming future.

There are 3 ultimatums to achieve best home healthcare in future i.e.

- Sustainable
- Cost effective
- Patient preferred mode of care

By the alliance group of USAs in their research. For ground analysis there is requirement to refine the home health care in future of healthcare delivery system at homes.¹

II. Another study by alliance group was “Value of providing care at home.” which shows that many patients in USA had bad experience or poor outcomes despite of so many expenses. So, the new policy came into existence to achieve **Triple aim**.

What is the Triple Aim?

The Triple Aim is a framework developed by the Institute for Healthcare Improvement that describes an approach to optimizing health system performance. It is IHI’s belief that new designs must be developed to simultaneously pursue three dimensions, which we call the “Triple Aim”:

- Improving the patient experience of care (including quality and satisfaction).
- Improving the health of population.
- Reducing the per capita cost of health care.

To attain the triple aim, this policy is respecting the preference of elderly patients and giving the value to home healthcare at reasonable cost by delivering patient centred care.

It was observed in the research that home healthcare services after the discharge from hospital are more helpful in improving the conditions rather than re-hospitalization. According to the data of “HOME HEALTHCARE COMPARE” patient’s health improves after receiving the services at their home. After receiving home health care, 89% of wounds improved or healed after an operation, 67% had less pain when moving around, 66% got better at bathing, and 64% had improved breathing, 83% of Home health patients suffering from 3 or more chronic conditions, compared to 60% of the general Medicare population who suffer from 3 or more chronic conditions.²

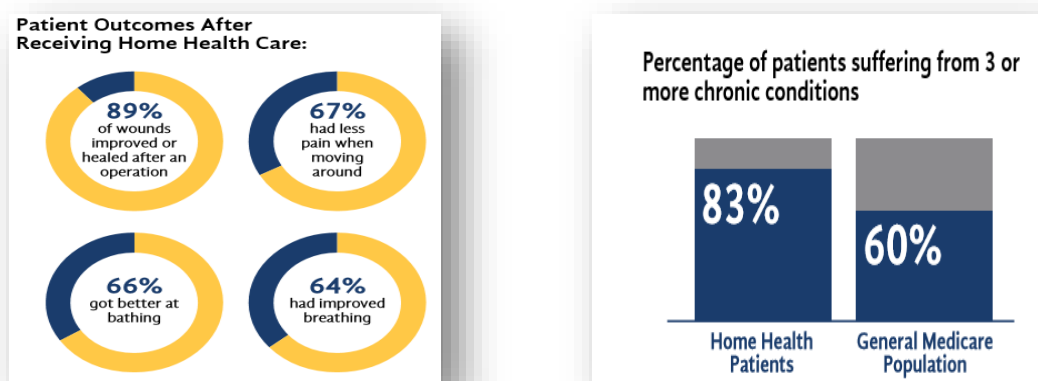


Fig.7

III. The Role of Medicare Skilled Home Health Care Today and Challenges for Meeting Future Needs

Medicare is agency who is providing the certification to the start-ups to deliver services to the patient who are homebound at their homes. Under the certification home health-based organizations are providing skilled care to the receivers at home for chronic, acute, and rehabilitative conditions. Best and expert team of health professionals deliver the following services.

In delivering the care procedure technology has great hand, Agencies provide the teleconsultations at home. **Home health provides variety of services with technology from remote monitoring to phone calls, Health IT, diagnostic technologies, and online pharmacy.**

Home healthcare delivery is more fruitful when it is more affordable and increase the comfort level of the patient. If patient is discharged from hospital and shifted to home for post care that will decrease the cost in great amount. **Average cost to the patient in hospital is \$23479 whereas in the home health its costs only \$5411.** Star-ups take care of patient's consideration as well as affordable treatment.

Home healthcare scheme in USA was came into existence in 1960s but was not designed and operated well. According to the study done it was concluded that in future by 2030 there will be increase in chronic disease and patient with these illnesses has more expenditure. By 2030 there will be increase in chronic disease by 37% and by 46 million people and there will be inadequate number of professionals and hospitals and to meet all the requirements so, the need of home healthcare increase in future.³

IV. Delivery System Reform: The Evolving Future of Home Health Care

Vision of high value home care is increasing among elderly patients, importance of home care delivery system for them is uniquely patient-centred care at home and boost their health in the modest way with help of skilled nurses and expert physician. The multifaceted team of organization manage to give best treatment of complex health problems.

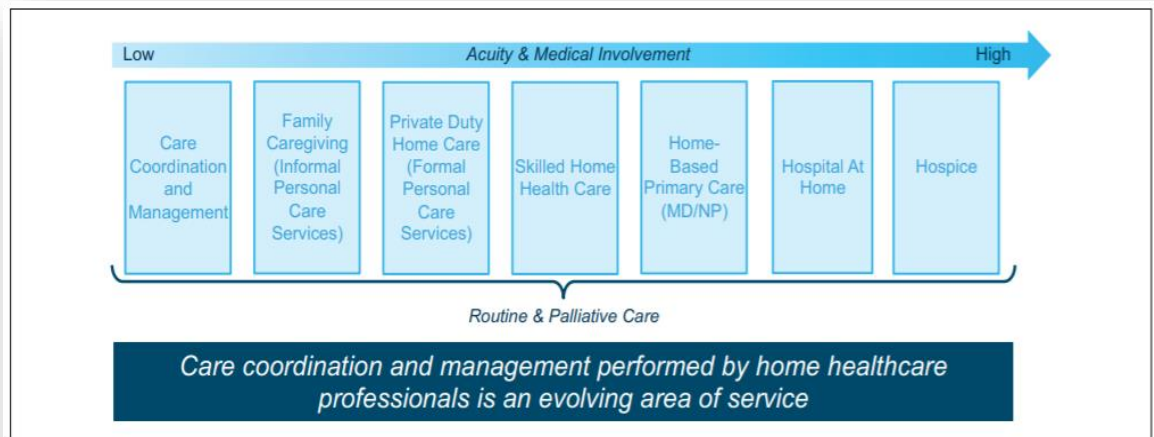


Figure 5. Spectrum of home-based services and supports.

Source. Avalere Health, 2016.

Note. MD = Physicians; NP = Nurse Practitioners.

Fig.9

The HBPC (Home Based primary care) programme initiation leads to improvement in results and cost savings. Enrolment in HPBC in fiscal year 2007 was associated with a 59 percent reduction in hospital bed days of care, 89 percent reduction in nursing home bed days of care, and a combined reduction of 78 percent in total inpatient days of care.

It was also associated with a 21 percent reduction in 30-day hospital readmissions rates. HBPC is only meet need of chronic diseases and gave more pressure on curing the condition occurs. Their Home health also offers palliative programmes and longitudinal care.

HBPC is more concerned to support and trained their caregivers to provide the best facilities to their customers. They provide home health aide services (incident to the skilled needs), home maker supports, home adaptations, and adult day services are not covered by Medicare programme by USA. **HBPC program** given the best example of

how home-based care can be optimized to deliver improved outcomes for Americans who are older and have disabilities, simultaneously generating considerable cost savings to the health care system. **HBPC** was considered as effective programme of care that highlight the care delivered at home and in the community as a means of achieving the Triple Aim. Home health professionals are being used as navigators and care coordinators in close coordination with primary care physicians in patient-centred medical homes and with home care physicians to improve care management in the home, particularly for high cost, high need beneficiaries, often leveraging technology appropriately to monitor care.⁴

V. RE-ENGINEERING INDIAN HEALTHCARE 2.0

This study was done in august 2019 and published in the **FICCI** journal by various healthcare professionals. They show another side of healthcare of India and this study claimed that many patients are dissatisfied with their treatment at the hospitals. Undesirable services were provided to the patients and that has led to abysmal state of healthcare today. Survey of 1000 patients were carried out in the study about their opinion toward the hospitals. Survey revealed that 61% of patient did not believe that hospitals are acting in their best interests. In similar 2016 survey, 37% patient had indicated such perception. These trends are widely reflecting the gap between patients and healthcare providers which is very worst from past years.

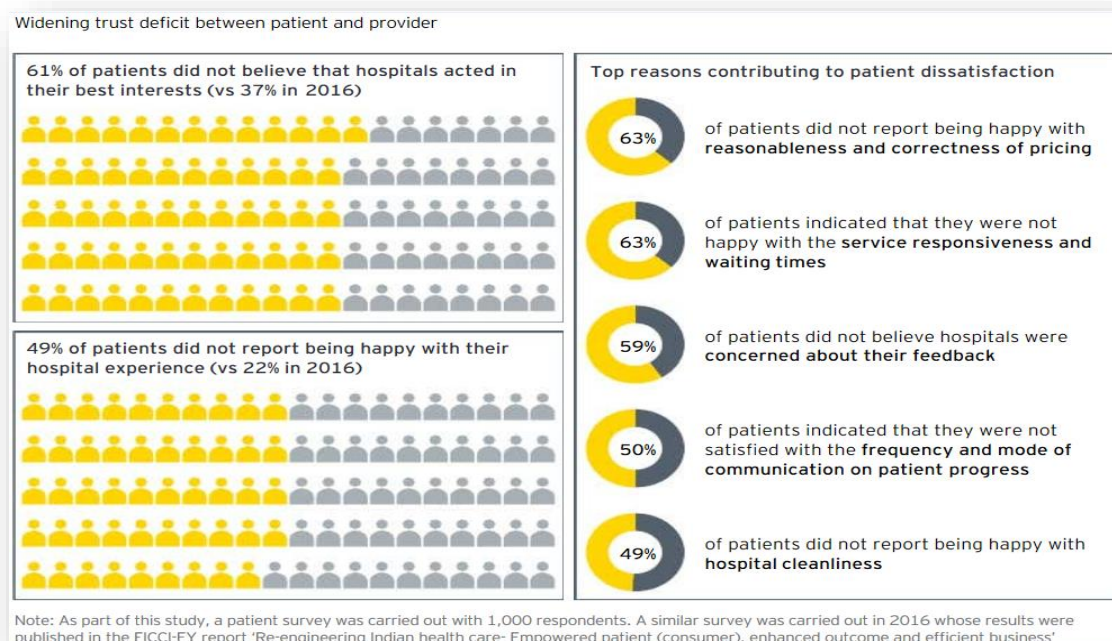


Fig.10

This show the undesirable experience of the patients and eventually as result demand of government and public start-ups will be the need of future healthcare.

VI. Healthcare 3.0

This study was done by **KPMG** in which they created vision of future healthcare. According to this, healthcare model will take new shape and move into different page in coming future. They named it as Healthcare 3.0 which shows that Indian healthcare system will be improved with strategic planning, and there will be UHC so that each person can afford and access health. They talked about that various business models are rising in the market and that will give new turn to healthcare system by providing home healthcare to their customers with full ease and comfort.

Digital health brings amazing changes in healthcare system with introduction of **mi health, AI in healthcare, and utilizing the technologies such as block chain to bring more transparency.**

There is wonderful shift from diagnosis to treatment at home by the start-ups leading in the market. To plan for the forthcoming healthcare 3.0, providers needs to kick start their journey and ensure that necessary steps are taken at right time. For this there is need to focus on patient experience, investing smartly into relevant technologies, establishing the ecosystem through collaboration, establish agile but robust governance structure.⁶

RATIONALE

Mixed methodology was undertaken. This approach was used by the questionnaire and by reviewing various secondary data. Specific thesis focused on the home healthcare purely related to organization in which author is currently working. Questionnaire is appropriate to answer **Yes or No** to know the customer's response to future of home healthcare. Author also stated the literature review of various studies done in past on home healthcare which were on practical problems and problem centred consider by the patients. Main advantage of responses collected are to know their opinion and draw information from many different sources such as interviews, observations. Extensive descriptive analysis is done based on mixed-method approach.

RESEARCH METHODOLOGY

Type of study: Descriptive cross- sectional study

Setting: HealthCare at HOME. Delhi and Medanta hospital, Gurgaon.

Duration of study: 3 months.

Sample size: 100 patients.

Sampling Technique: Random sampling.

Tool for data collection: *Primary Data*- Online Forums

Secondary Data- Online Portals

Data analysis plan: MS excel.

Data collection procedure: Mixed- method approach

Primary data: Online Survey with help of google questionnaire form. Many questions were asked with appropriate choice of “**Yes or NO**” from patients and their attendants to know their opinion.

Secondary data: Through registered records, website of organization and Literature available about the organization like magazines, brochures, pamphlets, CDs, and written documents.

FINDINGS:

1. Gender: -

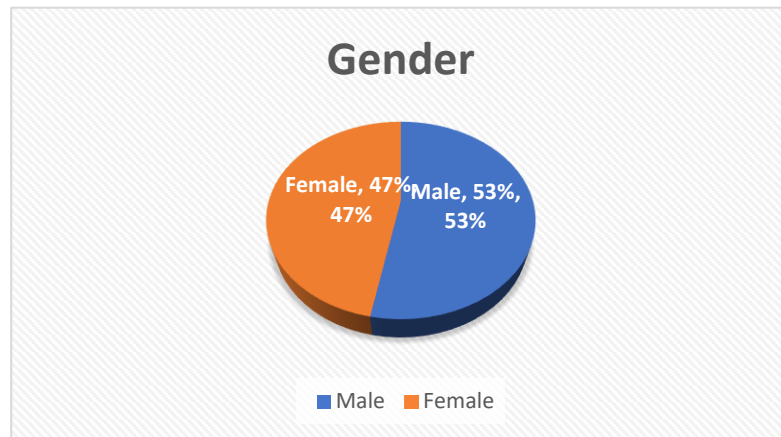


Fig 12.

Inference: Out 100 customers 47% were female and 53% were male while collecting data.

2. Have you ever faced any problems in getting services at hospitals?

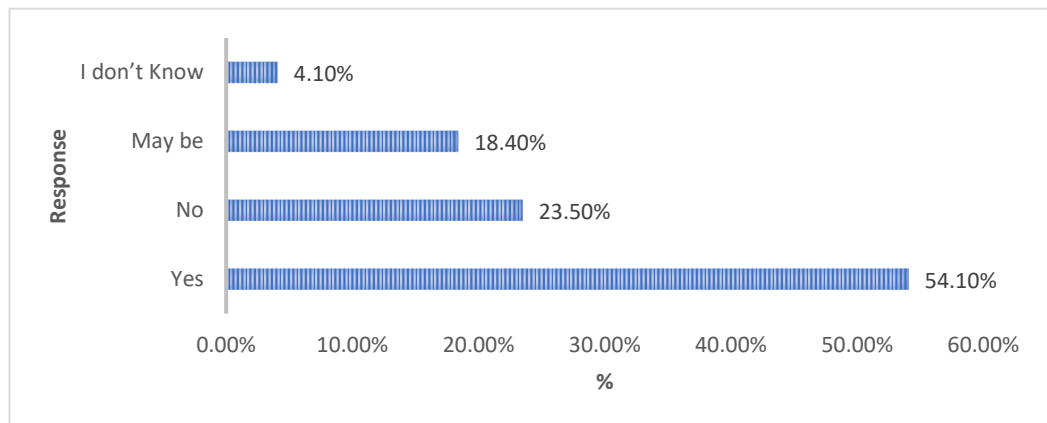


Fig 13.

Inference: 54.1% people claim that they faced problems in getting services at hospital while 23.5% said “No” and others respond they may face or either they do not know.

3. Would you recommend healthcare services at home?

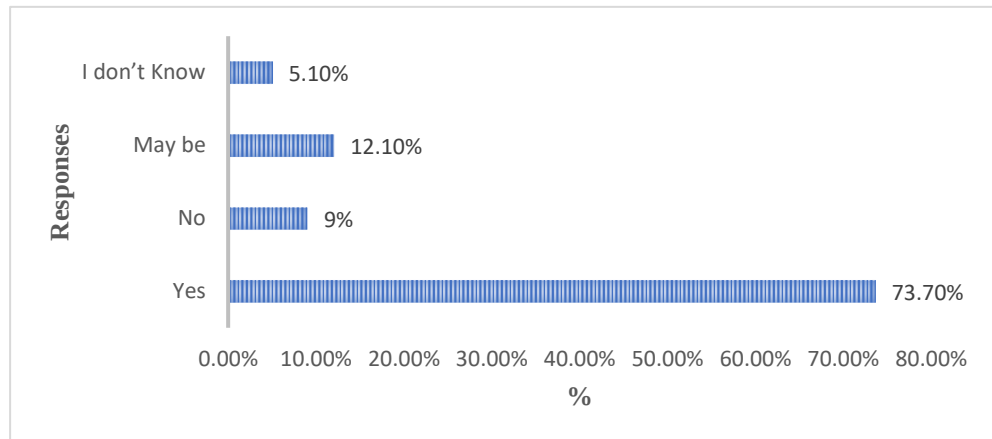


Fig 14.

Inference: Graph shows that 73.7 % recommend healthcare services at home and 12.1 % may be recommend. Rest said no and do not know.

4. Have you ever heard about any organization or start-up providing services at home?

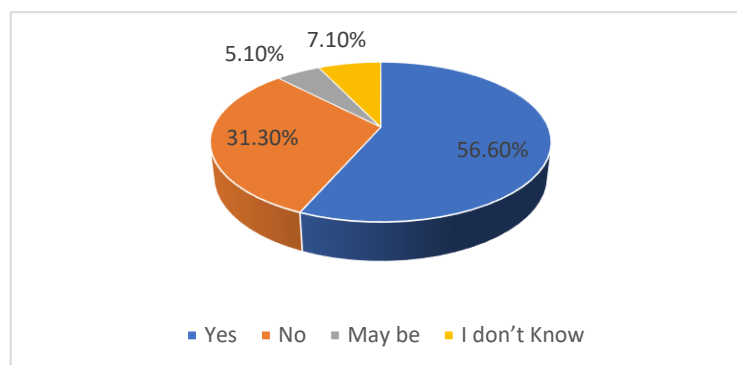


Fig 15.

Inference: Pie chart depicts that 56.6 % customers know about the start-ups providing HH in the market. Remaining of them may or may not have idea about them.

5. Did you ever get Health services at home?

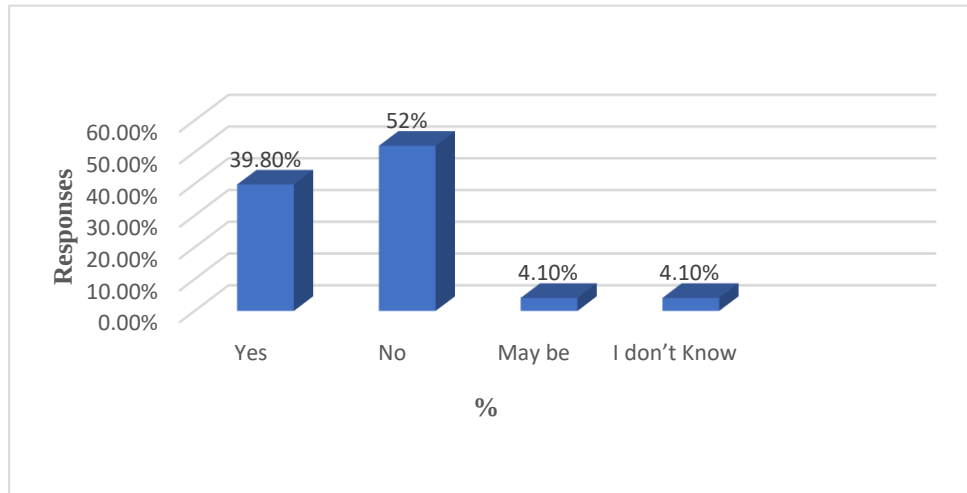


Fig 16

Inference: This bar graph shows that 52 % customers never avail healthcare services at home and approx. 39 % get home healthcare services.

6. Do you think patient rate of healing increases at home?

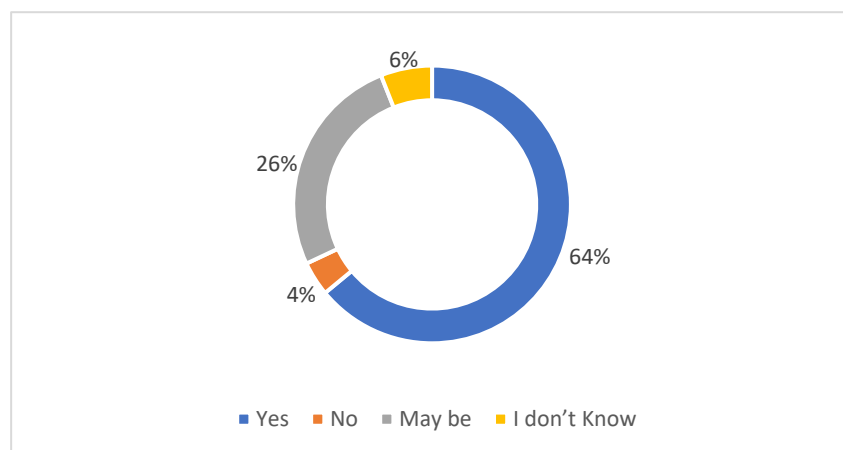


Fig 17.

Inference: 64 % customers believe that patient can heal faster at home rather than hospitals.

7. Do you believe Healthcare services at home are more financially affordable?

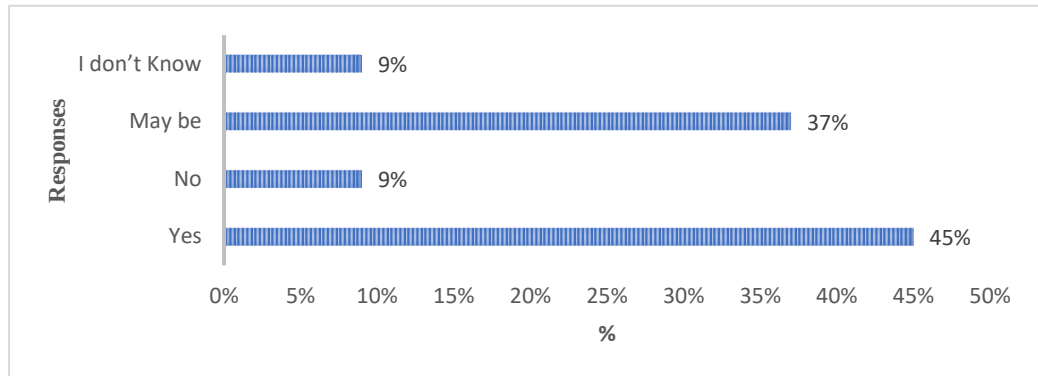


Fig 18.

Inference: Graph indicates that 45% patient respond that home healthcare is more affordable as compared to hospitals and 37% might believe in it and rest do not have idea.

8. You agree that home services are more feasible with respect to admission and discharge procedure?

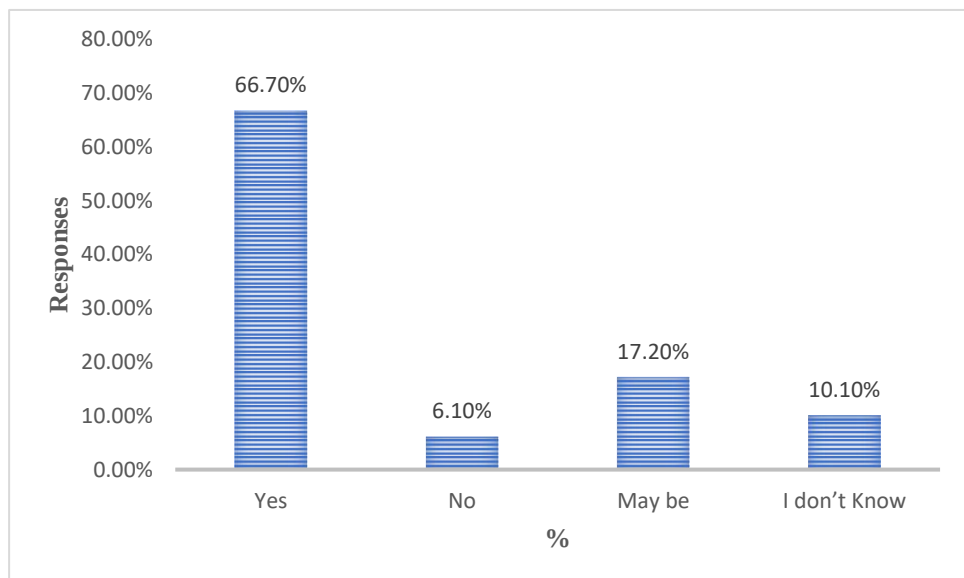


Fig 19.

Inference: Graph depicts that 66.7% agree that home healthcare services are more feasible wrt. Admission and discharge procedures.

9. Do you agree that patient will be more comfortable with having their family around?

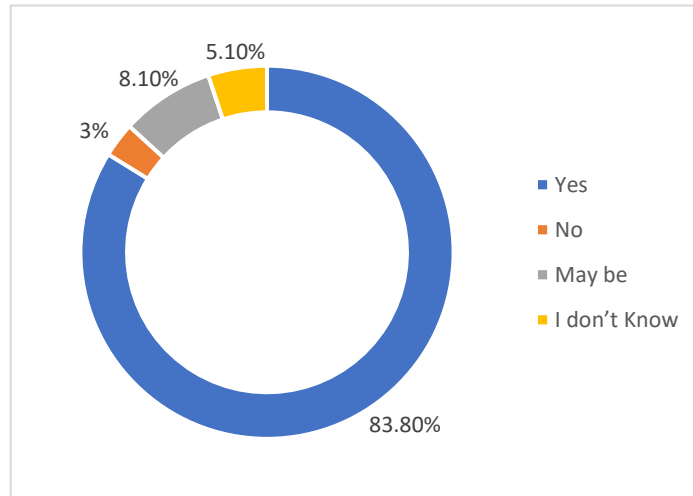


Fig 20.

Inference: This pie chart indicates that 83.8% believe that patient will feel more comfortable at home with their family at time of treatment.

10. Do you think healthcare at home gives better privacy to patients?

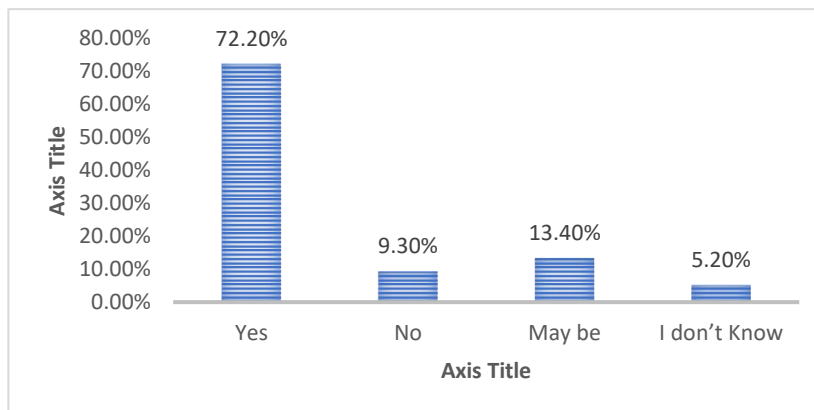
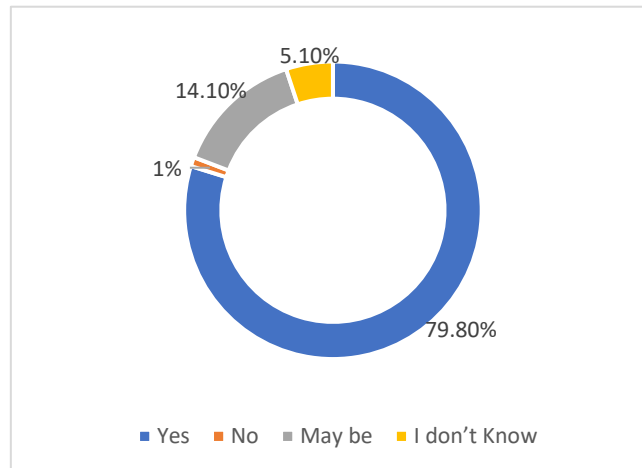


Fig 21.

Inference: Graph shows that 72.2 % of customers think that healthcare at home gives more privacy to patients and remaining either do not know or they are doubtful.

11. Do you think home healthcare provides freedom and security to patients?



Fi 22.

Inference: Approximately 80% customers believe that home healthcare gives more freedom and security to the patients.

12. Do you think that there is any future of home healthcare?

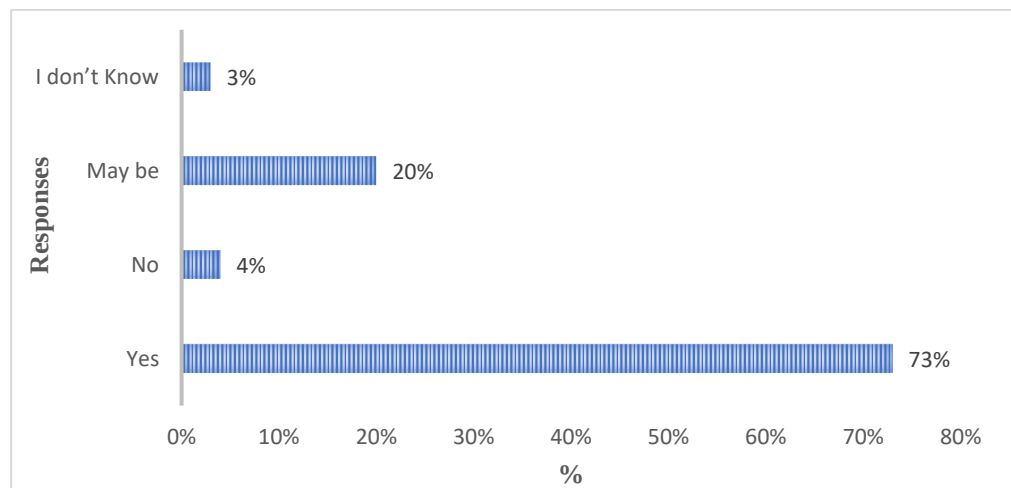


Fig 23.

Inference: According to graph 73% customer respond that home healthcare has future in coming time and 20% said that HH might have future and remaining are clueless.

DATA ANALYSIS

1. According to the survey done, we found that Home healthcare is helping the customers in many ways of getting treatment. It provides them comfort, security, privacy, freedom. Customers above of age 19 years prefer to take home healthcare services. They believed that patient could heal faster at home rather than hospitals.
2. It is observed by the various studies that patient recover better while staying with their family in the supportive and positive environment.
3. Home health is also financially affordable and provides the same service as hospital at home on cost effective prices.
4. In case of care given to the patients, more attention is given to the patient by the nurses.
5. Many people claimed that they faced difficulty while getting services at hospitals.
6. It was observed that 73% of people feel that there is demand and future of home healthcare services.
7. Very less people know about new business models of home healthcare in market, these models gave skilled care to the patients under the supervision of physicians
8. Home healthcare provide the best care to the geriatric population and home bound patients.

DISCUSSION

1. Home healthcare is moving ahead towards the home providing the best and quality of services but there are knowledge gaps that require more research and development.
2. There are certification & guidelines for the business models on structure and usability of information technologies.
3. There should be proper accessibility, functionality, and usability of consumer health Information technologies related to home healthcare.
4. Improving the training standards and provide the training to informal care givers to work effectively is necessary.
5. Transportation of the services to the low region and hilly areas more rather than setting up in metro cities. So, there will be opportunity for all to access the healthcare.
6. Collaborate to facilitate the services to those who cannot afford them and there will be universal design of health system.
7. Improve the communication between people receiving and people providing healthcare at home.
8. Integration of more telehealth technologies.
9. There must be tools for assessing home healthcare tasks and operators.
10. Analyse the demands of tasks associated with home-based healthcare, the relevant operator capabilities must be required to carry them out.

CONCLUSION & RECOMMENDATIONS

1. Home healthcare has broader vision and these services will be the winner in coming time.
2. Strategies should be identified and planned to achieve the future vision.
3. The value proposition of home healthcare is strong but the proposition without research and development is limited.
4. Home healthcare needs to more refine and reform to promote and deliver their services.
5. In future, in-depth analysis is needed to clarify the nation's understanding of its home health care needs in the future.
6. In coming years there will be huge ambit of home services.

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