Chapter 63

Medical Tourism
Service Quality:
An Indian Perspective

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ABSTRACT

Medical tourism, a growing phenomenon in the world today, possesses a worthwhile potential for the economic development of any country. Globalization, development of information and communication technology (ICT) and adherence to the international quality standards potentially result in a significant increase in the movement of patients and healthcare professionals across national boundaries. The demand for medical tourism in India is experiencing a tremendous growth. However, the Indian medical tourism sector faces various challenges. Since India attempts to position itself as one of the preferred global medical tourism hub, a thorough understanding of means to attract, satisfy and retain medical tourists is extremely important. Five hundred and thirty four (534) useful responses in two different phases is collected and tested to examine the validity and reliability of the scale to ensure a quantitative and statistically proven identification of the responses. The exploratory factor analysis (EFA) is used to identify the underlying dimensions of medical tourism service quality for medical tourism in India. Next, confirmatory factor analysis (CFA) was used to confirm the factor structure of the constructs and validate EFA results.

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INTRODUCTION

Globalization, privatization, technology advancement and development of international standards potentially result in a significant increase in the movement of patients and health professionals across national boundaries. The global nature of the cross-border healthcare industry is a recent phenomenon and has been developing rapidly. According to Hopkins et al. (2010), the emerging manifestation of health care is known as medical tourism or health tourism or medical travel. Medical tourism is a combination of healthcare services and tourism services. This combination seems to be securing relatively a new type of niche in tourism sector, where tourists primarily seek medical treatment abroad and later blend this with recreational activities (Debata et al., 2011). According to Bookman and Bookman (2007), medical tourism is traveling overseas with the objective of improving one’s health. Many patients in developed countries such as USA, Canada and Britain prefer to cross-border healthcare because of lower cost, avoidance of long wait times, healthcare unavailability of certain healthcare provisions at home, success rates of recovery, personal attention, long supervised recovery and an opportunity to combine vacation with treatment while maintaining privacy and confidentiality (Mohamed, 2008; Chakraborty, 2008). The advantage of medical tourism lies in provision of world-class healthcare at substantially less cost. For instance, open heart surgery costs about USD70000 in Britain and up to USD150000 in the United States but it costs between USD3000 and USD10000 depending on complication in a best hospital of India (Neelankantan, 2003). George and Nedelea (2009) described countries such as India, Thailand, Mexico, Singapore, Brazil, Philippines etc. are actively promoting medical tourism. A report (Deloitte, 2008) reveals that 2.9 million of patients have taken medical tourism facilities in 2007 with a turnover of USD 30-40 billion. The report also describes that the global medical tourism market is growing very fast at yearly rates of 15-20 percent.

The Asian countries of Thailand, Malaysia, Singapore, South Korea and India are attracting a combined 1.3 million medical tourists per year worldwide and the number is increasing annually. According to Gupta (2007) medical tourism sector in Asia by 2012 is projected to generate revenue of worth more than USD4 billion. Among these countries, Thailand is the most favored destination since 1970s. The country has emerged to be the largest medical tourism market in Asia for its competent services, lower cost along with a vacation at beautiful beach resorts. The medical tourism sector in Thailand specialized in sex change operation and later moved into cosmetic surgery (Connell, 2006). The Malaysian medical tourism sector came to limelight in the wake of the Asian economic crisis and the need for economic diversification. It has become the preferred Asian destination for Europeans and Americans (Connell, 2006). According to him, the healthcare sector established cosmetic surgery and alternative medicine ranges of service to the medical tourists in 1998 when the local patients were unable to afford private health care. In the year 2007, Malaysia attracted 3,00,000 medical tourists across the border. In particular, to attract the muslim medical tourists, Malaysia promotes Islamic practices among its health-care providers (Awadzi & Panda, 2005). Singapore claims to be Asia’s leading medical hub with advanced research capabilities as well as nine hospitals and two medical centers with JCI accreditation (Tattara, 2010). Many medical tourists come from Malaysia, Indonesia, South Asia, the Middle East and China. Medical tourists from developed nations are beginning to choose Singapore due to affordable and cost effective health care services in a clean cosmopolitan city. Singapore represents a modern country employing an array of modern healthcare providers, technology, medical-research centers and is a distinctive