

**Abstract of Paper on  
“International Healthcare – Opportunities & Challenges Ahead”**

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**ABSTRACT**

The quality of the care the patient receives from the hospitals all over the globe is a fundamental problem of concern for all. Providing healthcare, especially of an adequate standard is a complex and challenging process. The three ‘C’ formula must be strictly followed in International Health care where the three ‘C’ represents Cost, Curtsey and Competitiveness. Lot depends one’s skill of the medical practitioner and technology he uses for the well being of the patients. The consumer when travel overseas for healthcare services, he wishes to ensure the quality of service, commitment of the organization where he is visiting, ethical bonding of clinical staff, tract record of the hospital or clinic and just and fair dealing with the customer complaints. The professionals engaged in medicine, psychology, physiotherapy, nursing and such allied professional systematically provide personnel and proficiency in service. Health care business is basically engaged in private or public sector. Secondary care is the health care services provided by medical specialists, dental specialist and other health professionals who generally do not have first contact with patients for example, cardiologists, urologists etc. Tertiary care is specialized consultative health care usually for inpatients and on referral from a primary or secondary health professional in a facility that has personnel and facilities for advanced medical investigations and treatment, such as a tertiary referral hospital.

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**Introduction**

The quality of the care the patient receives from the hospitals all over the globe is a fundamental problem of concern for all. Providing healthcare, especially of an adequate standard is a complex and challenging process. The three ‘C’ formulas must be strictly followed in International Health care where the three ‘C’ represents Cost, Curtsey and Competitiveness. Lot depends one’s skill of the medical practitioner and technology he uses for the well being of the patients. Now a day technology is more dominant over individual skill of the person accordingly the patients are deprived off personal attachment with the doctors. The consumer when travel overseas for healthcare services, he wishes to ensure the quality of service, commitment of the organization where he is visiting, ethical bonding of clinical staff, tract record of the hospital or clinic and just and fair dealing with the customer complaints. With the fair looking of the organization, political stability and political policies of the nation, the economy and social structure of the country do affect the international healthcare organization and systems. The country boundaries are now not he limitations for he patients to undergo the severe treatments. Thus it is essential that in global scenario all countries should have (a) exchange of innovative ideas. (b) exchange of technology (c) ethical bonding and attending patients as an human being rather than the consumer.

In international healthcare scenario one must not forget the human touch towards the business and concentration more on sensitivity than profitability. When the doctors take oath for practicing they must not forget their commitment towards patients and profession. When we observe Asian countries we see that India is the most favoured nation for healthcare. It is the best place for medical tourism. The international healthcare has become the widespread essentiality and has many opportunities. In diversified areas also.

### **Health Care Profession in Changing Global Scenario**

The delivery of modern healthcare depends on groups of trained professional coming together as interdisciplinary teams. The professionals engaged in medicine, psychology, physiotherapy, nursing and such allied professional systematically provide personnel and proficiency in service. Health care business is basically engaged in private or public sector. Primary care is related to the health professional working at initial stage of consultation for all patients within the health care profession. These professionals are general practitioner. Family physician or sometime assistant practitioner depending on the nature of the health condition patient can be referred for secondary stage. Primary care is often used for the healthcare services which play a role in the local community.

Primary care involves the widest scope of health care, including all ages of patients, patients of all socioeconomic and geographic origins, patient seeking to maintain optimal health, and patients with all manner of acute or chronic physical, mental and social health issues, including multiple chronic diseases. Consequently, a primary care practitioner must possess a wide breadth of knowledge in many areas. Continuity is a key characteristic of primary care, as patients usually prefer to consult the same practitioner for routine check-ups and preventive care, health education and every time they require an initial consultation about a new health problem. The International classification of Primary Care (ICPC) is standardized tool for understanding and analyzing information on interventions in primary care by the reason for the patient visit.

Secondary care is the health care services provided by medical specialists, dental specialist and other health professionals who generally do not have first contact

with patients for example, cardiologists, urologists, endodontists and oral and maxillofacial surgeons. It includes acute case: necessary treatment for a short period of time for a brief but serious illness, injury or other health condition, such as in a hospital emergency department. It also includes skilled attendance during childbirth, intensive care and medical imaging services. The term “Secondary care” is sometimes used synonymously with “hospital care”. However, many secondary care providers do not necessarily work in hospitals, such as psychiatrists, clinical psychologists, occupational therapists, most dental specialists or physiotherapists (physiotherapists are also primary care providers and a referral is not required to see a physiotherapist) and some primary care services are delivered within hospitals. Depending on the organization and policies of the national health system, patients may be required to see a primary care provider for a referral before they can access secondary care.

For example, in the United States, which operates under a mixed market health care system, some physicals might voluntarily limit their practice to secondary care by requiring patients to see a primary care provider first, or this restriction may be imposed under the terms of the payment agreements in private or group health insurance plans. In other cases medical specialists may see patients without a referral and patients may decide whether self-referral is preferred.

In the United Kingdom and Canada, patient self-referral to a medical specialist for secondary care is rare as prior referral from another physician (either a primary care physician or another specialist) is considered necessary; regardless of whether the funding is from private insurance schemes or national health insurance.

Allied health professionals, such as physical therapists, respiratory therapists, occupational therapists, speech therapists, and dietitians, also generally work in secondary care, accessed through either patient self-referral or through physician referral.

### **Tertiary care:**

Tertiary care is specialized consultative health care usually for inpatients and on referral from a primary or secondary health professional in a facility that has

personnel and facilities for advanced medical investigations and treatment, such as a tertiary referral hospital.

Examples of tertiary care services are cancer management, neurosurgery, cardiac surgery, plastic surgery, treatment for severe burns, advanced neonatology services, palliative and other complex medical and surgical interventions.

### **Challenges before the professionals:**

1. The ever-increasing demand for care combined with changing regulatory requirements and growing competition, means that healthcare providers are facing unprecedented operational challenges.
2. In addition to delivering operational excellence, healthcare CIOs must take advantage of next-generation technology to secure operational success in a rapidly changing environment.
3. CSC can help with legacy applications management and modernization, and with putting in place building blocks for the transition to the next generation of information technology.
4. The highest priority of healthcare IT is the optimization of IT processes, with 74% of CIOs rating this as crucial / very important.
5. Sixty-four percent of healthcare CIOs identify modernizing legacy applications as critical/ high-priority, and 45% believe that managing legacy workloads is actually hindering innovation.

### **Unprecedented Operational Challenges:**

Healthcare providers are facing unprecedented operational challenges, driven by the every-increasing demand for care, combined with changing regulatory requirements and growing competition. Key trends include:

- ❖ The aging population and a rise in chronic conditions.
- ❖ The change in reimbursement models from fee-for –service to pay-for – performance, mandated by the U.S. Patient Protection and Affordable Care Act, (ACA).
- ❖ An increasing focus on adopting new models of care.
- ❖ Regulatory requirements, including Meaningful Use and ICD-10.

- ❖ Increasing merger and acquisition activity, and convergence between players and providers.

### **Conclusion:**

In changing environment and demographic structure of India the healthcare profession needs to be more need based and available at lower costs. The increasing awareness regarding health insurance and health expenditure the healthcare profession has more relevance in modern society.

### **References:**

1. "health topics- Health systems". <http://www.who.int>. WHO World Health Organization
2. Health at a glance 2013 – OECD indicators(pdf)<http://www.oecd.org/healthpp5-39-46>
3. John Hopkins Medicines Patients Care Tertiary care definition 27.6.2011
4. Emory University School of Medicine ([http://www.em.emory.edu/hospital\\_euhtml](http://www.em.emory.edu/hospital_euhtml) date 27.6.2011)