THE ROLE OF MEDICAL TRAVEL FACILITATORS IN MEDICAL TOURISM
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ABSTRACT: Increasing technology, globalization and several other external connections should render medical tourism a large part of the rise of global medical treatment. There is extensive proof that healthcare organizations order medical travel agencies to find vendors that are trustworthy and to allow trouble-free travel arrangements to prevent critical preparations. For international care, such facilitators play a significant role in including prospective patients in one nation and medical providers in another. To date, literature on medical tourism has concentrated mostly exclusively on doctors and healthcare professionals. Otherwise, there was no scientific knowledge of the important contribution by Medical Travel Enabler to the health care industry. The moderating role of medical travel facilitators will also be discussed because of the increasing number of hospitals travelers. This paper explores or to what degree the medical tourism facilitators help the regional culture in medical tourism. To both health practitioners and companies involved in the area and future scientists it is also advantageous.

KEYWORDS: Healthcare, Medical Tourists, Medical Tourism, Medical Travel Facilitators (MTF).

INTRODUCTION
In the global medical or welfare tourism industry, many countries have strategically based their economic development on one of the largest growing tourist markets. From a wider definition of wellness tourism medical tourism has materialised. Any researchers found medical and health tourism as a common trend though with differing meaning. Researchers described health tourism as one of the coordinated travels for the preservation, improvement or reconstruction of an individual's welfare in body and mind beyond their local area. This includes medical tourism for the improvement or regeneration of person wellbeing by medical action, and is delimited to one of the coordinated travels outside of their normal health care influence. The advent of the Internet and the introduction of medical tourism facilitators or health care intermediaries or among foreign patients and hospital networks encouraged growth in medical tourism. However, there are still concerns about the precise The emergence of the government figures from Thailand, India, Malaysia, Jordan and some others, showed the increasing pattern in these areas by the available data on the amount of patients in the world that led to such an rise in private healthcare. The World Tourism Organization's reported figures found that the amount of people engaging in health tourism rose by 32 percent between 2010 and 2014, with sales increasing by 40 percent, adding US$ 725.6b in 2014 to the industrial sector. Asia welcomed 5.2 million medical tourists in 2014 producing income in excess of US$ 7.8 billion and has been one of the most popular medical care destinations. Health tourism is expected to raise more than US$ 5.5 billion in annual sales by 2014 in India, Malaysia, Singapore and Thailand alone[1]. Health field spending is, according to analysts, a way of growing the country's revenue, developing infrastructure, raising foreign exchange profits, building a more desirable trade balance and ultimately enhancing the tourism industry. Researchers have reinforced this by suggesting Health tourism will play an significant role in shaping the essence of modern medical care because it is situated at the increasing junction between technology, the climate and culture. The rapid advent of medical travel facilitators has therefore intensified any need to investigate their dominant role more closely in the medical tourism market.

Evolution in Medical Tourism:
Border less technological developments combined with competitive travel packages have given major benefits to the regional tourism industry. Health tourism is largely a product of the globalization of health care and travel itself, which provides tremendous economic opportunity for the world economy. Medical tourism, as described by scholars, comprises of cost-effective patient care that collaborates with the tourism industry. When in a preferred destination place,
Health travellers can often have the benefit of medical operation or medication, at the same period they can vacation[2]. Health tourism is a common cultural trend, as described by scholars, where people go on a long road to get dental, health, and surgical facilities while on holiday. Practices in medical tourism rely on effectively educating prospective patients regarding treatments, care services, tourist options, travel plans, and countries in destination. The lengthy journeys across countries from Europe and Asia among health travellers pursuing services that involve dental care, plastic surgery, elective surgery and in-vitro fertilization (IVF).

Africa (South Africa in particular), central america (Costa Rica, Cuba, Mexico, and Brazil); and the Middle East (Dubai and Jordan in particular) Asia (Malaysia, Singapore, and Thailand); east europe (Poland and Hungary); are active regions and countries offering medical tourism services. In 2013 Malaysia got some 277,335 international medical tourists from Indonesia with the largest patients. It directly shows the rising demand and supply in the industry of medical tourism[3].

Evolution in Facilitators:
Development health travelers to exotic stations contributed to the growth of support facilities areas as a key facilitator in this tourism sector. In reality, many visitors nowadays combine a holiday with medical treatment. Countries providing medical treatment thus differ in terms of size, cost and appeal of the package for these visitors. As researchers found out, medical tourists pursue assistance from patient instigators in the prevention of critical preparations to find reliable vendors, preserve trouble-free travel arrangements and better recognize post- and pre-operative requirements, and plenty of others.[4].

In all other terms, healthcare travel participants serve as a single point approach that puts together knowledge of hospitals and clinics, tourism and personal shoppers. That provide health travellers with a three-dimensional support network. Though the main commodity is medical care, the enticing accommodation and travel choices are an integral part of medical tourism. Travel choices are an integral part of medical tourism. In fact, medical tourism involves strong cooperation between the tourism and healthcare sectors to respond to the clients' needs. As researchers have emphasized, this sector's full potential involves strategic planning and collaboration among key subjects including medical tourists, such as medical travel agencies, hospitals, hotels.

The Role of Medical Travel Facilitator (MTF):
Generally, consumer service has been rendered feasible by travel agencies as they provide common preparedness and arranging for their journeys. Though local guides' functions are typically substituted as consumers will eventually access the companies directly, the presence of tour operators is essential for the industry's overall successful success by Internet booking systems. The rapid expansion in medical care and consultants for medicinal research, expertise but health has expanded the field in patient and family choices.

For example, in choosing a specific country of access, domestic facilitators or representatives, Malaysian Medi-Travel and Co., Medical Retreat Abroad, as administrators of the managing medical, dental and beauty facilities outside the community of home consumers plays a key role in binding a prospective consumer to an overseas supplier of services. United Option Health broker dealers Health Care, Plant Clinic, Med Retreat and Med Journeys have developed as the professional travel planners' leadership according to analysts. At the customer's point of view, with added uncertainty and reduced spare time coupled with new culture apps, tour operators' travel packages save precious money[5].

In addition to connecting a patient with a suitable facility, researchers emphasized that in their attempt to please customers, such facilitators should bring value to their programs in the post and pre-travel as shortcomings in the consistency of particular care will result in adverse impressions leading to the overall travel sequence. The programs provide the whole pre- and post-care recovery
phase, in certain situations exchanging patient documents, coordinating transportation plans, personal representative or interpreter, or also arranging trips throughout the country of choice. Such facilitators are supported to promote the distribution of knowledge and quest through internet resources through help software firms. Researchers’ studies find that this knowledge exchange is still insufficient highlighted the critical role and significance of tour operators in shaping how the tourism industry will develop into more responsible products and activities. Such facilitators serve as the key drive forces for the medical tourism industry. The tour operators are viewed as essential to the mass tourism framework because of the tremendous impact they have on people, companies and even countries, which can prompt expectations and acts of other tourism actors in search of sustainability[6].

MTF services:
It can be a solo form or delivered by health tourism coordinators incorporation into collaboration. Accordingly, researchers stressed the popular type of collaborations with key market leaders between facilitators to build Start-to-finish opportunities for prospective customers will making it easier for developers to access interest during their maintain the health. Scholars found out that coordinators can indeed be categorized into 4 groups for hospital care: room, companies, such as India’s ITC-WelcomGroup, specialized organizations that serve as facilitators between the provider and patient.

Tour companies, such as Singapore’s Commonwealth Tour, provide trip schedules and manage arrangements for safety Visitors. Health operation manager, for example Med Retreat, Planet Hospital, Bridge Health International, and Global Option Healthcare serve as advocates of patients in seeking treatment outside the region. Provider organizations like Bumrungrad in Apollo and Thailand have primarily dedicated healthcare services to foreign patients. Knowledge asymmetry When leading healthcare travelers when their choice, international medical participants are instrumental taking, thereby emphasizing facilitators’ position as moderators.

Growing numbers of market participants have shown separation approaches for patient travel facilitators firms. Variations in the services The international medical trainees provide air transportation and visa criteria, professional diagnosis and professional (pre-flight) assessment, coordination of locally and internationally physicians (country) contacts of destination), exchange of medical information, provision for accompanying individuals (hiring personal caregiver nurses if necessary), and accommodation.

Significance of MTF:
Tour companies, experts with a wide spectrum in tourism and ICOs, whose skills their insights are sought due to their high degree of knowledge and interest in a specific product sector, be the most important gatekeepers in the decision-making process. As researchers have argued, their expertise and experience have a huge effect on the option of destination. Moreover, while driving, foreign travellers and certain citizens who fly abroad are more likely to utilize the services of travel agencies.

Studies have found that 60 % of the respondents in Malaysia including 51% in the United Arab Emirates use skilled brokers to assist them schedule travel and boarding health options outside of their nations. It means that the patient collaborators are also required to utilize the system is key to being health tourists for the first time often ignorant of the desired destination. In a research paper, they highlighted that the role of the facilitator in medical tourism is indeed very necessary to include health care professionals and clients.

The findings confirmed that the role of facilitators in drawing decisions and deciding to receive treatment in various countries were very interesting to 60 percent of respondents. Twenty-six percent said it was important, while 12% considered it optional in facilitators. Not only connect witness providers but often act as delegates as patient travel facilitators. And according to study, participants / traders, the practices in patient homelands, destination countries including third-
party countries are often promoted. The position of medical mediators through travel has been in the same respect [7].

Health tourism is a concept widely used to apply to the practice of people commuting from their country of residence. Wealthy individuals have often travelled through their country of origin through pursuit of fair care or in spite of services inaccessible to them. But the present period of medical tourism, perceived approximately as embodying the last two decades, is called distinctive. This represents the degree to which patients fly, their communication through different distributors and customer groups, and the amount at which they are aligned through globalization processes.

Although medical tourism literature is rising increasingly, it has concentrated mainly on either individual patient case studies or particular issues inquiry. For starters, this has involved a business emphasis, such as websites and facilitators. Medical tourism work has since grown to explore different forms of treatments that patients migrate for, such as surgical, reproductive, or dental tourism, and diaspora migrate for patients returning home for care. Several of these research have concentrated on a limited number of specific cases, recording their unique recovery processes and examining their perspectives [8].

A major part of this literature focuses on reporting the medical complications experienced by patients and the dangers of medical travel, thereby reinforcing common views of medical tourism, particularly media reports of medical tourism, which mostly focuses on patients' risks. In the lack of accurate worldwide statistics of how many people are traveling for care figures of rates of risks in people that fly do not occur. Around the same time, the available literature illustrates the dangers posed by medical travellers, and the absence of oversight and recourse procedures where accidents have arisen.

To date, only a few reports have looked at a broader population of patients traveling for care. A relatively limited number of experiments have concentrated on defining causes of pull and push through various care forms. The considerations described in this literature include expense, i.e. affordable therapies abroad and money-saving patients. They apply to patients flying inaccessible or undesirable to them for care. That involves medical treatments such as stem cell therapy, or fertility treatment where control varies from country to nation.

Perceptions of standard of treatment are often essential for patients, especially evident in patients with diaspora who choose to return home to receive what is deemed equal or superior service. Any of the cases mentioned refer to a consideration in patient decision taking being the confidentiality of care provided abroad. That also relies on the originating country's cultural norms. For example, it was essential for Middle Eastern patients seeking donation of gamete during medical intervention.

Cosmetic tourism is similar to tourist components or encounters and in certain instances the concept of moving to a foreign location may offer as much interest as the thought of better body form or facial features. Four explanations for patients' travel were established by researchers: availability, cost, perceived efficiency and familiarity. Looking at this body of research, the variables affecting the choice of patients to fly are dynamic and differ based on the form of care and across patient classes.

It also means that motivation-centred experiments devote little attention to whether people move to particular places or services. Since medical travel in the main takes place without supervision and structured referral by public health agencies and clinical gatekeepers in the private sector, the position of informal linkages and paths between patients and clinics is critical in understanding patient preference. Network study, and more precisely social network analysis, is a vast, developed and growing area of research [9].

Most network concepts accept that networks comprises of actors or 'nodes' and links between actors or 'nodes.' Most of the network literature focuses on the nature of networks and the role of actors or nodes within them, and their impact on actual outcomes. Network roles are also defined
in terms of flows between actors or by joining (combining) different actors, like collective bargaining for example. Networks have been discussed, like comparison networks, in market-driven analysis. Recently even social networks have been discussed in medicine, for example in terms of case care or in order to consider the decision-making of clinicians.

Having investigated why patients opted out of the healthcare system, in the case of this research the NHS, and their reason for travel, the importance of networks or links between persons in the various case studies was crucial to a provider's ultimate choice. If a decision has been taken to fly to a place, in most cases the specific decision to visit a clinician or hospital depended on personal advice, referral or some direct relation. Although the significance of the networks was similar, all variations in case studies became evident[10].

Facilitators who were patients at hospitals and therefore had a personal relation were found to be significant among bariatric, fertility and cosmetic tourists. Patients traveling for bariatric, fertility and surgical care often frequently select a doctor dependent on a friend's professional suggestion or a support group's familiarity. Like facilitators, though, this did not indicate a contractual or payment dimension. Personal networks are particularly relevant in diaspora and dental tourism and appear not to include a payment component, including community groups.

A thing that resulted from the research was that when competence is a significant driving force, i.e. where a clinician's particular ability or care efficiency was crucial to the choice to fly first, such as for bariatric or dental surgery, personal networks and interaction with a prior patient appeared to be of greater significance. A peer or help community member's professional expertise and advice seemed to be of equivalent or greater value than the standard credentials or universal standards[1]. Furthermore, clinician networks have since arisen to form or promote medical tourism and the particular segmentation or market structure, for example, where clinicians overseas instead refers patients back to a clinician connected to their clinic but located in the UK for their follow-up care, as is obvious from the bariatric tourists. Interviews with facilitators and suppliers demonstrated that promoting personal networks in the absence of structured recommendation systems or accreditation is a practice or pattern adopted by the industry.

There are a number of various networks that appear as essential to the preference of services for patients and they vary due to the form of care. Such networks demonstrate the value of medical tourism partnerships because although they are abused economically by others, they are not a strictly commercial endeavour in the case of facilitators or clinician networks, the relational existence of each of these implies. Researchers find out to the extent that medical tourism is rooted in common interactions helping patients interact with providers. Networks and facilitators are the mediators of markets.

Medical travel, which is advertised as a holistic alternative to rising hospital rates and prohibitive treatment services, enables patients choose the type, place, space and perhaps even resources in healthcare coverage they want. It is focused on the belief that treatment is a privilege, that doctors are accountable but that it democratizes healthcare by providing affordable treatment options abroad. This philosophy is what scholars refer to as the principle of preference, a treatment paradigm that stresses the value of competition and consumerism as the rationale for healthcare reform.

But while neoliberalism and globalization and has expanded pharmaceutical treatment across the world, liberalized healthcare systems in developing nations, and raised spending in private medical facilities, not everyone has gained from the abundance of medical alternatives. One explanation for this is that the delivery and understanding of biomedicine through cultures and countries is not the same, rendering it impossible for prospective customers to access it and determine safety. Although various methods of figuring out, assessing and receiving medical treatment abroad are possible, one approach is utilizing an MTF (patient travel facilitator). As its name implies, MTFs are intermediaries that link Patients of some other region with healthcare professionals. They vary in size and scope, however the majority of them provide essential facilities such as offering medical
care, organizing medical treatment overseas and coordinating transportation. In fact, they serve as international traders, travel representatives, consumer assistants, physician-patient intermediaries and scientific specialists as well. They advertise through their companies, which are mainly web focused.

**CONCLUSION**

The medical tourism industry has provided a broader range of foreign patients from transport and leisure, the business sector, policy affairs and the foreign accreditation field. Health travel facilitators also provided concerned patients with choices of clinics, logistic arrangements, planning of accommodation and coordination of home follow-up treatment. While the patients themselves will manage the roles of such facilitators in looking for details. And reservation through the internet is vital for the organisation of these issues, the involvement of medical travel facilitators. Evidence has also indicated that patients utilize complementary transportation facilities including commuter and plan techniques as skilled transport facilitators. These specialist facilitators have first-hand knowledge and a network of the best treatment services and hotel reservations that match the needs of patients. Patients are pain free and save resources by their employment of mediators. Furthermore, the role of medical travel facilitators must not be dismissed as they intermediate hospital and potential customers with the worldwide hotel Industry. This paper however supports the idea that the healthcare and also the medical tourism sector has a significant influence. Additionally, prospective studies ought to discuss this topic and further examine the effect of MTF as moderators in medical tourism sector.

**REFERENCES**


