

Semester: Jan 24 to Apr 24				
Maximum Marks: 50 Examination: End Term Exam Date: 26-03-2024 Duration: 3 hours				
Programme code: 06 Programme: MBA- HCM	Class: FY	Semester/Trimester: III		
College: K. J. Somaiya Institute of Management	Name of the department/Section/Center: Marketing and International Business			
Course Code: 117P06C301	Name of the Course: Healthcare for Rural Markets			
Instructions: Question No 1 is a Case Study that is Mandatory. Question No 2 has choice for Short Answer Questions				

Question No. 1	HOSPITAL TO HOSPITALITY – Medical Tourism in Rural India	Max.
	Medical tourism (MT) has been budding immensely over the last few years. This has been advantageous for several	Marks
	emerging nations particularly for India where patients from developed countries travel for health care. With its rich cul-	
	tural inheritance, numerous fascinations and charming sceneries, India is developing as the most favored harbor for vaca-	
	tioners from across the globe. Medical tourism is an essential support of the make in India program and is developing as	
	one of the key influencers of progress in the services industry.	
	Medical tourism (also known as medical value travel, health tourism or wellness tourism) is defined as the fast-tracking	
	exercise of travelling across transnational locals to seek healthcare services (Ibrahim and Ganguli,,2019) has defined med-	
	ical tourism as the ability to strategically plan, set viable policy goals, establish effective multi-stakeholder partnerships,	
	maintain an attractive environment. The legal and regulatory framework play a significant role in the enhancement of	
	medical tourism facilities in emerging countries like India.	
	The initiator for this travel has been extortionately costly, insufficient, or inaccessible medical care in the wealthy coun-	
	tries. Factors such as charges, value, language, and ease of travel attract people from various countries to India for medical	
	tourism purpose. Amongst fifty Asian countries, India is considered as the contemporary global center for medical	
	tourism and publicized itself as the initiator of Ayurveda therapy to coronary bypass, cosmetic surgery, hip resurfacing	
	and other areas of advanced medication.	
	With the emergence of economic liberalization in - 1990's both public and private hospitals have diversified themselves	
	by importing the cutting-edge technology and other medical amenities, thus bringing infrastructure in the finest hospitals	
	equivalent to overseas medical destinations.	
	Healthcare services in India are mainly categorized into four wide groups:	
	1) Medical treatment — Treatment for curative purposes that includes cardiac care, organ transplantation,	
	orthopaedics, oncology, etc.	
	2) Wellness and Rejuvenation – Offerings focused on rejuvenation or for aesthetic reasons such as cosmetic	
	surgery, stress relief, spa treatments, etc.	

 3) Alternative medicine- Treatment to seek AYUSH (Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homeopathy) services. 4) Cosmetic Surgery -Cosmetic plastic surgery includes a breast augmentation, Liposuction or Rhinoplasty. Ayurveda is very famous in Kerala especially in the rural areas. AVA group has diversified interests in Kerala. This group is known for Medimix brand of soaps. They have launched Sanjeevanam Ayurveda Hospital that offers a unique approach to holistic self-care by combining ancient knowledge with modern therapy. They are specialized departments in Pediatrics, Women's Wellness, Panchkarma, Orthopedics, and Sports Medicine. This hospital is located at Kaakanad in Kochi. This hospital is supporting the livelihoods of rural people and is promoting itself as a Rural Medical Tourism centre, which is very famous in India. This hospital wants to attract foreign patients / tourists for the treatment at this location. As Kerala tourism is world renowned with its tagline "God's own country", AVA group wants to aggressively target this cohort of foreign customers to the hospital for hospitality as well as provide the hospital services. They have decided to appoint Rural Reality – a Trivandrum based Rural Marketing Consultancy to market Sanjeevanam hospital coupled with Tourism. 	
 Case Questions: (a) If you are a Consultant at Rural Reality, what suggestions can you provide for Sanjeevanam Hospital at Kochi? What challenges you think the hospital can face to attract foreign customers? (10 marks) (b) Design a Healthcare Marketing strategy for Sanjeevanam brand to launch rural medical tourism service from December 2024? Elaborate various strategies that you want to implement for the successful launch of this brand? (10 marks) (c) With your knowledge in Healthcare, which services you think will work for foreign tourists visiting Rural India for medical tourism with special reference to Sanjeevanam hospital in Kochi. Explain why the services that you propose will have acceptance by the foreign tourists/ patients? (10 marks) 	Max. Marks (30)

Question No. 2		Max.
	Attempt any Two out of the following (2X10=20 marks)	Marks (20)
(a)	Quacks in Rural India: A Boon or a Bane to the Indian Healthcare System? What are your views? Give any Two suggestions to	
	eliminate Quacks from the Rural areas?	
(b)		
	What are the major Challenges for Distribution for Pharma Products in Rural	
	India? Enumerate any Five major challenges	
(c)	What are the various Last Mile initiatives available for Pharma in Rural	
	India? Give suitable Examples?	
(d)	What are the Key Challenges in increasing the acceptance of Telemedicine in Rural India? Do you think these challenges can be	
	overcome by companies operating in the Telemedicine Industry?	