PARTICIPATION OF PRIVATE SECTOR IN HEALTH SECTOR IN NE STATES



EXECUTIVE SUMMARY

TITLE OF THE STUDY PARTICIPATION OF PRIVATE SECTOR IN HEALTH SECTOR IN NESTATES

The global health care industry worth \$ 3 trillion is considering India as a global destination, because of India's phenomenal success in Information Technology, exceptional medical expertise, cost advantage and world class facilities now available in India. The break down in distance barriers and the rising desire to avail of quality healthcare have further brightened the prospects.

North Eastern States with their serene atmosphere, bracing eco-friendly climate, long stretches of tea gardens, mighty rivers, large bio-reserves & wild sanctuaries and unique forms of art & culture can take advantage of riding piggyback on Health Tourism – a boom for Potential Private Investor in the region.

The exhaustive coverage of this study spanning 16 weeks spread across the States of Assam, Meghalaya, Arunachal Pradesh, Mizoram, Tripura, Nagaland, Manipur and Sikkim, lead to eliciting first hand authenticinformation health care services in the Region, from over 888 numbers of respondents as summarized below:

Number of Districts & Respondents Contacted – Category Wise

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State	Districts	Hospitals	R & D Inst.	Customers	Total
Assam	21	85	17	280	382
Arunachal	4	17	6	69	92
Nagaland	4	17	5	44	66
Mizoram	4	0	4	59	73
Meghalaya	4	9	4	64	77
Tripura	3	14	3	48	65
Sikkim	4	5	3	49	57
Manipur	4	9	4	63	76

Why Invest in the Region?

The following facts gathered during the primary field study justify for Private Investment in Health Sector in the North East Region.

- Besides the local market for health care services where several gaps have beennoticed, the Potential Investors can also tap the overseas markets from the West and South East Countries for which North East is strategically located.
- > The cost of medical treatment here is one tenth to one fifth of the cost in the West.

- Medical expertise as well as Nursing capabilities here are comparable to the best in the World. Personal touch, no waiting lists, access to Indian systems of medicine etc are added advantages.
- There is better connectivity with the rest of the World in terms of telecommunications and air transport.
- The inherent strength in IT can be utilized in exchanging medical information and diagnostic images while the time zone differential can be advantage in giving instant medical opinions.
- The medical specialties like Cardiology and CTVS, Orthopedics, Transplant Surgeries, Urology, Neurosurgery, Pediatrics, Oncology, Dentistry, Infertility Works, Organ Transplant, Total body check up and Cosmetic Surgery were the major gaps found in majority of health Care Institutions surveyed in all the Eight North Eastern states. These medical specialties / faculties are incidentally the most in demand from overseas patients as well since these are not backed by insurance cover in the West.

The above gaps identified in availability of curative services in the Region are proposed to be bridged by setting up modern health care facilities at strategic locations as detailed out in enclosed Project Profile.

In Assam, of all the reported diseases, Acute Respiratory Infection and Malaria are major diseases. These two diseases along with Syphilis account for 90% of total disease burden. Acute Respiratory Infection, Malaria and Syphilis individually account for 71%, 16% and 4% respectively.

The Disease Surveillance Activities are presently being undertaken in various districts through several centrally sponsored programs. These can be further strengthened bybringing in state of art /automated systems for data collection, compilation, disseminations and monitoring.

In Hospital Management and Information Systems, the Systems and Procedures as well as Technology have been identified as gap areas for which an action plan has been detailed out in Chapter 8.

There is shortage of Doctors in Assam. Population served by a doctor on all Indiaaverage is 1784 while in Assam this figure of population served by a doctor is 12,128.

As regards, Hospital Waste Management, more than 80% of Health Care Institutions visited in all the eight states use Municipal dumps and sanitary land fills for disposal of infectious hospital waste while CHC's and PHC's just throw the waste outside the buildings, which in turn becomes a cause for spread of number of infectious/communicable diseases. To fill these gaps it is proposed that Private Entrepreneurs shall set up Hospital Waste Treatment plants using latest technology at centralized locations in various towns. Each Treatment plant shall cover all the nearby Health Care Institutions who would pay for the services rendered. The details of economic viability of this project are presented in the enclosed Project Profile

Enclosed Annexure 2 lists the Private Entrepreneurs whom our team has met during the primary field and has shown keen interest in setting up /expanding in Health Care Sector in North East.