# “Who Comes to India for Healthcare? A Deep Dive into Medical & Dental Tourism Market Dynamics” by Dr Neeraj Kaushik

**Introduction**

India has emerged as one of the world’s leading destinations for medical and dental tourism, attracting millions of international patients every year. With its blend of advanced clinical expertise, internationally accredited hospitals, cost-effectiveness, and holistic wellness traditions, India offers a unique healthcare value proposition. Patients from both developed and developing nations are choosing India not just for affordability, but also for access to world-class doctors, cutting-edge technology, and personalized care.

Medical and dental tourism is no longer limited to surgeries or implants—it reflects a **shifting global healthcare dynamic**, where patients actively seek quality outcomes at competitive costs, alongside cultural experiences. Understanding *who these patients are*, their motivations, and the market opportunities they represent is crucial for healthcare providers, policy makers, and marketers alike.

---

**Starting Facts**

1. **Global Healthcare Travelers at a Glance**
    - Current global medical tourism market size: ~USD 115 billion (2023).
    - India’s share: ~USD 9–10 billion, with strong CAGR (~18–20% projected through 2030).
2. **Patient Personas in Indian Medical & Dental Tourism**
    - **Cost-conscious patients** (from Africa, South Asia, Middle East).
    - **Quality-seeking patients** (from US, UK, Europe, Australia).
    - **Dental tourists** (NRIs, Middle East, UK, and Southeast Asia).

   - **Wellness + medical hybrid seekers** (patients combining Ayurveda, yoga, or naturopathy with modern medicine).

3. **Top Specialties Driving Medical Tourism**
   - Cardiology & Cardiac Surgery
   - Orthopedics & Joint Replacement
   - Oncology (Cancer Care)
   - Organ Transplants
   - Cosmetic & Reconstructive Surgery
   - IVF & Fertility Treatments
   - **Dental Care** – Implants, Cosmetic Dentistry, Full-Mouth Rehabilitation
4. **Market Size: Dental Tourism in India**
   - Estimated at **USD 600–800 million annually**, growing at ~20% CAGR.
   - Implants and cosmetic dentistry account for ~65% of dental tourism spend.
   - Key source markets: USA, UK, Australia, Middle East, NRIs.
5. **Future Prospects**
   - Government's **Heal in India** initiative & Medical Visa expansion.
   - Growth of **digital health platforms** easing international patient access.
   - Rising demand for **premium dental implants & cosmetic procedures** among NRIs.
   - India positioned as a **cost + quality + wellness ecosystem** leader in global healthcare tourism.

## India Healthcare: Market Size & Structure (FY25–FY26 context)

- **Total healthcare market:** projected **US$638B by 2025** (INC42/industry brief). India Health Exhibition
- **Hospitals:** policy focus & spend up; **Union Budget 2025–26 allocation ₹99,859 cr** (+~10% YoY). KPMG AssetsIBEF
- **Pharma:** ~**US$55B** current size; **US$130B by 2030**. IBEF
- **Diagnostics (testing/services):** India diagnostics services valued at **US$11.38B (2024)**; IVD kits/instruments **US$1.72B (FY2023)**. KaretripMarkets and Data

- **Digital health rails: ~74 crore ABHA IDs** created (Feb 6, 2025); **31,466 hospitals empanelled under PM-JAY** (Jul 25, 2025). Press Information Bureau+1

## Key Specialty Markets (Domestic)

*(Service + devices/consumables where noted; latest reputable estimates)*

- **Cardiology (devices proxy):** ~**US$2.4B (2024)**; growing with cath-lab expansion. Market Research Future
- **Orthopedics (devices proxy):** ~**US$2.62B (2024)**; joint replacements driving demand. ResearchGate
- **Oncology**
  - **Cancer treatment facilities/services: US$2.55B (2023) → US$4.59B by 2030** (8.8% CAGR). Grand View Research
  - **Chemotherapy (pharmacy spend): US$5.14B (2024)**. Imarc Group
  - **Cancer diagnostics: US$7.3B (2024)**. Imarc Group
- **Fertility/IVF services: US$1.06B (2023) → US$3.7B by 2032** (14.1% CAGR). Credence Research Inc.
- **Ophthalmology (devices proxy): US$0.94B (2024)**; cataract, refractive, retina equipment. asianmeditour.com
- **Dental services: ~US$0.65B (2022)**; expanding with cosmetic/implant demand. Grand View Research
- **Diagnostics (services): US$11.38B (2024)**; organized chains consolidating. Karetrip
- **Telemedicine:** policy-backed scale-up on ABDM; (qualitative driver—no single authoritative value). Press Information Bureau

Note: For several clinical areas, India-specific **service-revenue** splits aren't published regularly; credible **device** and **sub-segment** values are used as proxies and are called out above.

## Medical Tourism (MVT) — India

- **Market size: US$18.2B in 2025**, projected **US$58.2B by 2035** (12.3% CAGR). KPMG AssetsKPMGFortune India
- **Patient inflow indicators: ~4.64–6.35 lakh medical visas (2024–2023)**; e-Medical visa available for **167 countries**. Press Information BureauData.gov.in

- **Top source markets (recent reportage):** Bangladesh remains key but volatile (visa/politics impact). ReutersThe Times of India

**Medical Tourism — Specialty Focus (What international patients buy in India)**

*(Most-demanded lines of service; indicative mix based on policy/industry scan)*

- **Cardiac care** (CABG, valve, stents) — India's high-volume centers & cost advantage. KPMG Assets
- **Orthopedics & spine** (THR/TKR, trauma, scoliosis). KPMG Assets
- **Oncology** (surgical, chemo, radiation; proton/IMRT centers). KPMG Assets
- **Transplants** (liver, kidney) — specialized clusters. KPMG Assets
- **Fertility/IVF** — large private network, competitive outcomes/pricing. KPMG Assets
- **Ophthalmology** (cataract, cornea, retina) & **ENT** (cochlear, sinus). KPMG Assets
- **Cosmetic & dental** (implants, full-mouth rehab, veneers, hair). KPMG Assets

Because official visa data don't break down **by specialty**, most sources provide **qualitative rankings** of MVT specialties rather than exact dollar splits. The FHRAI–KPMG 2025 report and government datasets are the most reliable references available today. KPMG AssetsPress Information BureauData.gov.in

# Growth Drivers & Headwinds

**Tailwinds**

- **Public financing & coverage expansion:** PM-JAY scale (41 cr cards; 31,466 empanelled hospitals; ~9.8 cr admissions authorized cumulatively). Press Information Bureau
- **ABDM rails at scale: ~74 cr ABHA IDs**, 3.6 lakh facilities & 5.6 lakh professionals registered; 4.9 cr records linked (Feb 2025). Press Information Bureau
- **Cost arbitrage & clinical depth** (cardiac, ortho, oncology, IVF, transplants) underpin MVT growth. KPMG Assets
- **Pharma & devices manufacturing push** (PLI; domestic capacity → affordability). IBEF

**Headwinds**

- **Visa/geopolitical sensitivity** (notably Bangladesh in 2025), creating short-term volatility for MVT volumes. ReutersThe Times of India

- **Fragmented diagnostics & quality variance** (consolidation ongoing). Karetrip

**Slide Pack Outline**

1. **India Healthcare at a Glance (FY25–26)** — size, spend, coverage. India Health ExhibitionKPMG AssetsIBEF
2. **Ecosystem Pillars** — Hospitals, Pharma, Diagnostics, Digital Health. IBEFKaretripPress Information Bureau
3. **Specialty Markets (Domestic)** — Cardio, Ortho, Oncology, IVF, Ophthalmology, Dental (one slide each with latest value + CAGR/driver). Market Research FutureResearchGateGrand View Research+1Imarc Group+1asianmeditour.com
4. **Medical Tourism (India)** — market size, source markets, enabling policies. KPMG AssetsData.gov.inPress Information Bureau
5. **MVT Specialty Focus** — what procedures international patients choose (bulleted). KPMG Assets
6. **Outlook: 2025–2030** — growth drivers, risks, strategic plays (ABDM, PM-JAY, clusters, accreditation). Press Information Bureau+1

---

# India Dental Care — Market Size (Domestic)

- **Dental services market (India): ~US$8.7B in 2024**; moderate growth to **~US$12.5B by 2035**. Market Research Future
- **Cosmetic dentistry (within services): ~US$1.2–1.63B (2024–FY2025)**; double-digit CAGR to FY2033. Market Research FutureMarkets and Data
- **Registered capacity (supply base): ~328 BDS + 283 MDS colleges; ~27.8k BDS & 7.3k MDS seats** (DCI). dciindia.gov.in
- **Practitioner base:** State councils list tens of thousands of active dentists (DCI roll-up). dciindia.gov.in

**Key Specialty Sub-Markets (Domestic)**

- **Dental implants (services + devices proxy): ~US$109M (2023)**; **CAGR ~14.7% (2024–2030)**. Other estimate: **US$148M (2024)**; **CAGR ~6.8% (2025–2033)**. *Use range in planning due to methodology differences.* Grand View ResearchImarc Group
- **Cosmetic dentistry (electives such as veneers, whitening, smile design): US$1.25–1.63B (2024–FY2025)**; **~10–12% CAGR** to 2033/34. Precedence ResearchMarkets and Data
- **Clear aligners (orthodontics sub-segment): ~US$96M (2022) → ~US$967M by 2030** (GVR); other view **~US$350M in 2024 → ~US$1.2B by 2035** (MRFR). *Fastest-growing specialty; align your forecast to your network's actual case mix.* Grand View ResearchMarket Research Future
- **Dental consumables (fillings, endodontics, cements, impression, etc.—India): ~US$207M (FY2023) → ~US$450M by FY2031**, **~10% CAGR**. Markets and Data

**India Dental Tourism (Inbound)**

- **Market size: ~US$1.12B (2023) → ~US$4.6B by 2030**, **~22.4% CAGR**. Grand View Research
- **Top revenue services (2023 baseline): Implants = largest share**; **cosmetic dentistry = fastest growth** to 2030. Grand View Research
- **Indicative international price advantage:** Implants **US$600–1,200** (India) vs **US$3,500–4,500** (US); veneers **US$200–400** vs **US$1,800–2,500**. *Useful for marketing slides.* North American Community Hub

**Dental Tourism — Specialty Mix (What global patients seek in India)**

- **Implantology:** single-tooth, All-on-X, full-mouth rehab; largest revenue contributor in MVT. Grand View Research
- **Aesthetic/cosmetic:** veneers, crowns, smile makeovers; **fastest-growing** elective inflow. Grand View Research

- **Orthodontics:** adult aligners; remote monitoring + short stays attractive to NRIs/expats. Grand View ResearchMarket Research Future
- **Restorative/endodontics bundles:** multi-tooth restorations, RCT + crowns packaged for short-stay travel. Markets and Data

**Growth Drivers (2025–2030)**

- **Rising discretionary spend & aesthetics mindset** in tier-1/2 cities; organized chains scaling. Market Research Future
- **Technology diffusion:** chairside CAD/CAM, digital scans, guided surgery, clear aligners. Grand View ResearchMarket Research Future
- **Strong cost arbitrage** fueling dental tourism conversion rates (implants/veneers). Grand View ResearchNorth American Community Hub
- **Growing consumables/device market** → broader access to modern care. Markets and Data

**Frictions / Risks**

- **Data variability across sources** (services vs. devices vs. procedures). *Present ranges where possible.* Grand View ResearchImarc GroupPrecedence ResearchMarkets and Data
- **Fragmented quality & accreditation** outside metros; outcomes transparency varies (affects MVT). Grand View Research

**Slide Outline (copy-paste to deck)**

1. **India Dental Market at a Glance (2024–2035)** — total services size, CAGR. Market Research Future
2. **Specialty Snapshot** — Implants, Cosmetics, Aligners, Consumables (value + CAGR + 1 driver each). Grand View Research+1Imarc GroupPrecedence ResearchMarkets and Data+1Market Research Future
3. **Dental Tourism Opportunity** — size, CAGR, source geos (use your CRM), procedure mix (implants > cosmetics > aligners). Grand View Research
4. **Price Advantage Slide** — benchmark India vs. US/EU for implants, veneers, crowns, whitening. North American Community Hub
5. **Demand Drivers & Risks** — tech, affordability, chains, accreditation gaps. Market Research FutureGrand View Research
6. **Action Plan** — packages, case studies, outcomes data, partner travel cells (add your brand assets).

---

**Notes:**

- Where sources diverge (e.g., **implants** and **aligners**), **show a band** (low–high) and add a footnote: "market sizes vary by inclusion of devices/procedures; we use triangulated ranges." Grand View Research+1Imarc GroupMarket Research Future

# SWOT analysis for the Indian healthcare industry.

With short explanations and source citations for the most important claims.

---

### Strengths

- **Large & growing market opportunity** — India's healthcare sector is expanding rapidly driven by rising incomes, urbanisation and lifestyle disease burden; the organised market is scaling across hospitals, diagnostics and pharma. IBEF
  *Speaker note:* India's healthcare industry is already one of the largest employers and shows multi-segment growth (hospitals, diagnostics, pharma, MVT).
- **Cost competitiveness and clinical depth (medical value travel advantage)** — high technical expertise at a fraction of Western prices has built a strong medical tourism proposition for cardiac, ortho, oncology, IVF and dental procedures. KPMG AssetsIBEF
  *Speaker note:* This price-quality mix is a durable advantage for inbound medical tourism and NRI/expat patients.
- **Strong private sector presence & capacity** — private players deliver a high share of secondary and tertiary care and are investing in organised chains, specialty centres and tertiary clusters. The Economic TimesIBEF
  *Speaker note:* Private delivery accounts for most hospital beds and outpatient visits in practice.
- **Digital health momentum (ABDM / ABHA IDs)** — the Ayushman Bharat Digital Mission has created tens of crores of digital health IDs and is onboarding facilities and professionals, enabling record portability, telehealth and data-driven care pathways. Ministry of Health and Family WelfareDigital Health News
  *Speaker note:* Digital record infrastructure is a major enabler for scale telemedicine, quality tracking and MVT pre-/post-op coordination.
- **Growing domestic manufacturing (pharma & devices) and policy support** — PLI and manufacturing pushes are improving local supply chains for devices, consumables and drugs, improving affordability and export potential. NITI AAYOG+1

---

### Weaknesses

- **Low public health expenditure (structural under-investment)** — public spending on health remains low relative to GDP compared to peers, constraining primary care and universal access. IBEFWorld Bank Open Data
  *Speaker note:* Low government spend shifts burden to private payers and out-of-pocket costs for many households.

- **Infrastructure & access gaps, uneven distribution** — hospital beds, specialists and diagnostics are highly urban-skewed; rural areas still lack dependable secondary/tertiary services and many PHCs/CHCs need strengthening. Press Information BureauNITI AAYOG
- **Workforce shortages & skill mix issues** — shortages of nurses, allied health professionals and uneven specialist distribution limit capacity expansion and quality scaling. (Government trackers/industry surveys highlight workforce bottlenecks.) IBEFNITI AAYOG
- **Quality variability & fragmented accreditation** — strong centres of excellence exist but many smaller clinics/hospitals lack consistent accreditation or transparent outcomes—this complicates nationwide brand claims and MVT trust. KPMG Assets
- **Fragmented data & measurement** — despite ABDM progress, outcome measurement, claims data and interoperable quality registries are still maturing—making comparative benchmarking harder. Ministry of Health and Family WelfareDigital Health News

---

**Opportunities**

- **Medical & dental tourism scale-up** — with strategic clustering, accreditation and concierge services India can capture higher value MVT segments (wellness + complex tertiary care). Recent reports outline cluster and hospitality-health convergence strategies. KPMG AssetsIBEF
  *Speaker note:* Tourism + healthcare ecosystems (hotels, transport, visas, digital pre-consult) can materially lift ARPU.
- **Digital transformation & telehealth** — ABDM + telemedicine create opportunities for remote monitoring, chronic disease management, hub-and-spoke specialty delivery and subscription care models. Ministry of Health and Family WelfareDigital Health News
- **Preventive & chronic care market** — ageing population and NCD prevalence open markets for long-term care, rehab, preventive programs, diagnostics and digital therapeutics. IBEF
- **Domestic device & pharma exports** — policy pushes (PLI/AatmaNirbhar initiatives) and improving manufacturing can grow exports of consumables, generics and selected devices. NITI AAYOG+1
- **Insurance & financing expansion** — growth of private health insurance, government schemes (PM-JAY) and employer-sponsored care can expand formalised demand and reduce out-of-pocket friction. IBEF

---

**Threats / Risks**

- **Geopolitical & regulatory volatility affecting MVT flows** — visa rules, bilateral tensions and travel restrictions create short-term volume shocks for inbound medical tourism. Recent episodes show source-market volatility. The Economic Times+1
- **Rising NCD & multi-morbid burden** — rapidly rising chronic disease prevalence increases long-term system costs and demand for complex care, stressing capacity and budgets. IBEF
- **Public health shocks & pandemic risk** — new infectious disease outbreaks or health emergencies can disrupt elective care volumes and strain infrastructure (lessons from COVID). Ministry of Health and Family Welfare
- **Competition from other medical tourism hubs** — Thailand, Singapore, Turkey and some Gulf clinics aggressively compete on quality, hospitality and visa facilitation; India must maintain quality/branding to defend market share. KPMG Assets
- **Antimicrobial resistance, quality & safety liabilities** — AMR and adverse event reputation risks can damage confidence unless infection control and stewardship are strengthened. (Global concern with local implications.) Ministry of Health and Family Welfare

---

**Recommended strategic priorities (slide-ready action items)**

- **Invest in quality & accreditation at scale** — national campaign to raise accreditation for mid-tier hospitals and dental clinics; publish outcomes to support MVT marketing. KPMG Assets
- **Leverage ABDM for patient journeys** — integrate pre-travel teleconsults, ABHA record summaries and outcome registries into MVT pipelines. Ministry of Health and Family Welfare
- **Cluster approach for MVT** — combine centres of excellence + hospitality partners + visa facilitation to create regional MVT hubs. KPMG Assets
- **Scale workforce via allied health training & retention programs** — focus on nurse training, dental auxiliaries, and remote monitoring skills to plug capacity gaps. IBEF
- **Push domestic manufacturing & supply resilience** — incentivise local device/consumable makers and quality certification to support exports and price stability. NITI AAYOG

---

**Sources & further reading (key authoritative references)**

1. IBEF — Healthcare & Medical Tourism country briefs (market size and trends). IBEF

2. Ministry of Health & Family Welfare — Annual Report 2024–25; ABDM / ABHA stats & initiatives. Ministry of Health and Family WelfareMinistry of Health and Family Welfare
3. NITI Aayog & Investment opportunities (healthcare) report — policy context and manufacturing. NITI AAYOG+1
4. KPMG "Heal in India" (2025) — MVT cluster & hospitality-health convergence report. KPMG Assets
5. PIB & MoHFW press releases — hospital bed counts and infrastructure status. Press Information Bureau

---

## **Competitive Analysis** for the **Indian healthcare industry**, followed by the major **challenges** and strategic implications.

---

**Competitive Landscape — high level**

- **Huge, fast-growing market** (large TAM): India's healthcare market is a major growth opportunity — wide demand across hospitals, diagnostics, pharma and digital health. IBEF
- **Private sector dominance & fragmentation:** Private providers deliver the majority of secondary/tertiary care and employ most specialists; but the market is fragmented — national chains coexist with many single-clinic, regional players. PMC
- **Rising investor interest & consolidation:** Global PE and strategic investors are actively consolidating hospital chains and specialty networks — driving M&A, roll-ups and professional management. The Economic Times
- **Vibrant healthtech/startup ecosystem:** Digital health, telemedicine, marketplaces, diagnostics automation, and device startups have attracted substantial funding and are creating new competitive vectors. Digital Health NewsEntrackr
- **Outbound & inbound medical value travel (MVT) as a competitive arena:** India is positioned as a cost-competitive tertiary + elective care destination; MVT is a strategic battleground for hospital groups and hospitality/concierge players. KPMG AssetsBioSpectrum India

---

**Competitive structure (by segment) — who competes and how**

1. **Tertiary / Multi-specialty hospitals**
    - **Incumbents / chains:** Apollo, Fortis, Manipal, Max, Narayana Health, Aster, others (large chains with tertiary/specialty clusters).
    - **Competitive levers:** specialty depth, surgeon reputation, accreditations (JCI/NABH), international patient services, pricing bundling, insurance empanelment, PE-backed scale.
    - **Threats:** margin pressure from price-sensitive markets, capacity underutilization in non-metros.
2. **Specialty & single-specialty centres**
    - Cardiac, oncology, IVF, orthopaedics, dental chains and standalone specialists.
    - Compete on clinical outcomes, protocol standardisation, and referral networks.
3. **Diagnostics & Lab chains**

    - Large organized players (Dr Lal PathLabs, Metropolis, Thyrocare, SRL) vs local labs.
    - Compete on turn-around time, test menu, tie-ups with hospitals, price, and digital integration.
4. **Pharma & device manufacturers**
    - Domestic generics leaders (Sun Pharma, Cipla etc.) and growing domestic device manufacturing (PLI incentives).
    - Compete via cost, regulatory approvals, export market access.
5. **Healthtech & services platforms**
    - Marketplaces (Practo), e-pharmacies (PharmEasy, Tata 1mg), telemedicine, remote monitoring, D2C diagnostics and DTC dentistry/aligners.
    - Competitive levers: unit economics, network effects (clinics + patients), data/AI, regulatory compliance.
6. **Medical tourism ecosystem**
    - Hospitals + hospitality + travel agents + insurers + government incentives (cluster plays).
    - Compete on bundled experience (clinical + logistics + recovery), accreditation, visa facilitation and insurer tie-ups. KPMG Assets

---

**Key competitive dynamics & trends**

- **Consolidation vs local specialization:** Larger chains acquire or partner with strong regional players to get footprint + referral flows; meanwhile single-specialty centres defend margins via niche excellence. The Economic Times
- **Digital + data as differentiator:** Platforms that own patient data, booking flows, teleconsult follow-ups, and remote monitoring can capture higher lifetime value and reduce CAC. Digital Health News
- **Price sensitivity balanced with quality signalling:** Many patients choose cost leaders for elective care (dental, cosmetic), but for high-risk tertiary care they chase outcomes/reputation and accreditation.
- **Investor capital reshapes strategy:** PE/VC funding enables rapid capacity expansion, technology adoption, and national marketing — but increases return expectations and operational KPIs. EntrackrThe Economic Times
- **Vertical integration:** Hospitals partnering with diagnostics, pharmacies, rehab & home-care to capture the full patient wallet and improve care continuity.

---

**Porter's view (concise)**

- **Threat of new entrants:** Moderate — capital + regulation moderate entry; healthtech lowers some barriers for service-layer entrants.
- **Bargaining power of suppliers:** Moderate to high for specialised devices/implant manufacturers and star surgeons.
- **Bargaining power of buyers:** Growing — insurers, corporates, and price-sensitive patients use price comparison and insurance to negotiate.
- **Threat of substitutes:** Telemedicine and home health services act as partial substitutes for outpatient care.
- **Industry rivalry:** High — many mid-sized players competing on price, accreditation and specialty depth.

---

**Major challenges (research-backed)**

- **Low public spending & inequitable access:** Public health expenditure remains structurally low → reliance on private sector leads to affordability/access issues particularly in rural areas. IBEFMinistry of Health and Family Welfare
- **Urban concentration / capacity mismatch:** Beds, specialists and diagnostics concentrate in metros → under-served smaller cities and rural towns. World Health Organization
- **Quality variance & trust deficit:** Wide variance in accreditation and outcome transparency makes national branding (for MVT) and patient trust difficult. KPMG Assets
- **Talent shortages & retention:** Nurses, allied health professionals and certain specialists are in short supply; attrition and uneven skill distribution are ongoing constraints.
- **Fragmented regulation & slow compliance:** Multiple regulators across clinical trials, medical devices, insurance and telemedicine — compliance costs and uncertainty can slow scaling.
- **Unit economics pressure for elective care & healthtech:** Price sensitivity in India means high-growth healthtech/consumer health models must optimize CAC/LTV tightly; reimbursement lag is another drag. Entrackr
- **Supply chain & domestic device capability:** Heavy import dependence for some advanced devices; policymakers are improving manufacturing but gaps remain. Ministry of Health and Family Welfare

- **Reputation & geopolitical risk for MVT:** Visa policies, bilateral relations or travel disruptions can quickly reduce inbound volumes — a concentration risk for hubs focusing on MVT. KPMG Assets

---

**Competitive threats from external players**

- **Regional medical hubs** (Thailand, Singapore, Turkey) competing on hospitality + high-quality outcomes. India must maintain cost + quality balance to defend share. BioSpectrum India
- **Global digital incumbents** (telehealth platforms) bundling services across borders — could capture patient flows unless local players match integration and data convenience.
- **Non-traditional entrants** (insurance, retail chains, private equity) entering care delivery with deep pockets and CX expertise.

---

**Strategic implications & recommendations (for incumbents / new entrants)**

1. **Differentiate on outcomes & transparency**
    - Invest in outcome registries, NABH/JCI accreditation, and publish case studies — helps both domestic premium positioning and MVT trust. KPMG Assets
2. **Build digitally enabled care journeys**
    - Own pre-visit teleconsults, ABHA/health IDs, remote follow-ups and care navigation — this reduces leakage and raises ARPU. Ministry of Health and Family WelfareDigital Health News
3. **Cluster & bundle for MVT**
    - Create regional "medical value travel" bundles (clinical + hotel + transport + concierge) and pursue government/industry cluster schemes. KPMG Assets
4. **Operationalize scale economics carefully**
    - Standardise clinical pathways, centralise procurement (consumables/devices), and use hub-and-spoke clinical models to improve utilisation.
5. **Talent pipeline & allied-health investment**
    - Invest in training programs, build retention incentives and partner with nursing/allied institutions to plug workforce gaps.
6. **Partner-first approach for tech**

- Rather than build every capability, hospital groups should partner with proven digital players for booking, remote monitoring and analytics — or acquire strategically. Digital Health News

7. **Financial resilience & investor alignment**
    - If PE/VC backing is present, balance growth KPIs with clinical quality and long-term brand building. Recent large funding flows into healthtech/hospitals mean competition for talent and patients will intensify. EntrackrThe Economic Times

---

**One-slide summary : References**

- **Market:** Large, growing, private-led; investor interest driving consolidation. IBEFThe Economic Times
- **Competition:** National chains vs many regional specialists + disruptive healthtech platforms. Digital Health News
- **Key pressures:** quality variance, talent gaps, regulation, price sensitivity. Ministry of Health and Family WelfareWorld Health Organization
- **Win formula:** outcomes + digital journey + bundled MVT experience + operational scale.

---

# Patient Profiles: Who Travels to India for Medical and Dental Treatments

**1. Medical Tourists**

- **Demographics**: Predominantly from Southeast Asia, the Middle East, Africa, and SAARC nations. Notable influx from Bangladesh, Afghanistan, Nigeria, and the Middle East. Wikipedia
- **Age Group**: Varies widely; however, a significant proportion are middle-aged adults seeking specialized treatments.
- **Common Treatments**:
    - Cardiac surgeries
    - Orthopedic procedures
    - Neurological surgeries
    - Cancer treatments
    - IVF and fertility treatments
    - Gender affirmation surgeries ICRIER+3Market.us Media+3Wikipedia+3Global Healthcare Accreditation+33WIRED+33Reuters+33
- **Motivations**:
    - Cost-effective treatment options (savings of 65–90% compared to Western countries)
    - High-quality medical facilities and skilled professionals
    - Shorter waiting times for procedures
    - Availability of advanced medical technologiesMarket.us MediaWIRED+5Market.us Media+5Fortune Business Insights+5

**2. Dental Tourists**

- **Demographics**: Primarily from the Middle East, Africa, and neighboring countries like Nepal and Bangladesh.TIME
- **Age Group**: Adults aged 30–60, with a growing interest among younger populations.
- **Common Treatments**:
    - Dental implants
    - Cosmetic dentistry (veneers, teeth whitening)

    - Orthodontics (braces, aligners)
    - Root canal treatments
    - Full mouth rehabilitationYahoo Finance+1Ministry of Tourism
- **Motivations**:
    - Significant cost savings compared to Western countries
    - Access to internationally accredited dental clinics
    - Availability of English-speaking dental professionals
    - Combination of dental treatment with leisure travelICRIER+13Market.us Media+13WIRED+13Wikipedia

---

### 📊 Market Size & Growth

**Medical Tourism**

- **Inbound Patient Numbers**: Approximately 610,000 medical tourists visited India in 2023, marking a 28.1% increase from the previous year. Fortune Business Insights
- **Market Value**: Estimated at USD 9 billion in 2022, with projections to reach USD 13 billion by 2026. Wikipedia
- **Growth Drivers**:
    - Government initiatives like the "Heal in India" campaign
    - Expansion of medical visa facilities
    - Development of medical corridors and infrastructure
    - Increasing global awareness of India's medical capabilitiesWikipediaReuters

**Dental Tourism**

- **Inbound Patient Numbers**: Specific data on the number of dental tourists is limited; however, the sector is experiencing significant growth.
- **Market Value**: The Indian dental tourism market generated USD 1,119 million in 2023, with expectations to reach USD 4,597.8 million by 2030. Grand View Research+2Grand View Research+2
- **Growth Drivers**:
    - Affordable dental care options
    - Availability of high-quality dental services
    - Rising awareness about dental health

- Integration of dental treatments with tourism packages

---

## 🔮 Future Prospects

- **Medical Tourism**:
  - Continued growth with projections to exceed pre-pandemic levels by 2024.
  - Expansion into niche areas like gender affirmation surgeries and wellness treatments.
  - Increased competition from other emerging medical tourism destinations.
  - Need for enhanced post-operative care and follow-up services.Business StandardWIRED
- **Dental Tourism**:
  - Projected to grow at a CAGR of 22.4% from 2024 to 2030.
  - Emergence of dental hubs in cities like Chennai, Delhi, and Mumbai.
  - Integration of digital dentistry and tele-dentistry services.
  - Potential for collaboration with wellness and spa industries to offer comprehensive health packages.Grand View Research

---

## 📌 Strategic Implications

- **For Healthcare Providers**:
  - Invest in international marketing and partnerships with global healthcare facilitators.
  - Obtain international accreditations to build trust among foreign patients.
  - Develop multilingual support services and culturally sensitive care protocols.
  - Leverage technology for remote consultations and follow-up care.
- **For Tourism and Hospitality Sector**:
  - Create tailored travel packages that combine medical treatments with leisure activities.
  - Develop infrastructure to support medical tourists, including transportation and accommodation.
  - Promote wellness tourism in conjunction with medical services.
- **For Government and Policy Makers**:

- Simplify visa processes and offer medical visa facilities.
- Promote medical tourism through international roadshows and digital platforms.
- Develop policies that encourage investment in healthcare infrastructure.Reuters