



MARKET DEMAND ASSESSMENT AND MARKETING STRATEGY FOR MEDICAL TOURISM

June 15, 2009

This publication was produced for review by the United States Agency for International Development. It was prepared by Lisa Beichl, International Health Specialist for Milliman Care Guidelines

MARKET DEMAND ASSESSMENT AND MARKETING STRATEGY FOR MEDICAL TOURISM

USAID JORDAN ECONOMIC DEVELOPMENT PROGRAM

CONTRACT NUMBER: 2.6.4.27.24

BEARINGPOINT, INC.

USAID OFFICE OF ECONOMIC GROWTH (EG)

JUNE 15, 2009

AUTHOR: LISA BEICHL, INTERNATIONAL HEALTH SPECIALIST,
MILLIMAN CARE GUIDELINES

DISCLAIMER:

The author's views expressed in this publication do not necessarily reflect the views of the United States Agency for International Development or the United States Government.

CONTENTS

EXECUTIVE SUMMARY	3
I. OBJECTIVES & METHODOLOGY	7
A. PROJECT OBJECTIVES	7
B. APPROACH, TOOLS AND METHODOLOGY	7
II. MARKET DEMAND ASSESSMENT	9
A. SIZE OF THE MEDICAL TOURISM MARKET – ASSESSING DEMAND FOR QUALITY AND LOW MEDICAL COSTS.....	9
Table 1: Estimated Elective Surgery Costs Compared US to Medical Tourist Countries	10
B. JORDAN AS A TARGET COUNTRY	11
Table 2: Country Characteristics Compared.....	11
C. MARKET SEGMENTATION AND TIERS	13
Table 3: HC ² pillars evaluated	14
Table 4: Mapping of distant Countries to Types of Medical Tourism	15
III. VALUE PROPOSITION AND GUIDELINES	17
A. OVERVIEW	17
B. GENERAL PATIENT FLOW	17
C. FACILITATORS VERSUS INTERNATIONAL DEPARTMENTS	19
D. DUE DILIGENCE	19
E. MALPRACTICE AND MEDICAL TOURISM COMPLICATION INSURANCE.....	21
F. SINGLE SOURCE FOR INFORMATION	22
G. MEDICAL TOURISM AND TAXES	23
H. RECOMMENDED NEXT STEPS	23
Step 1: Pursue Market Analysis in Scandinavian Countries	23
Step 2: Evaluate Specific Russian Health Opportunities	23
Step 3: Pursue Contacts in Arab American Area Interested in Helping Persons receive Medical Care – Insurance and Portal	23
Step 4: Request that Companion Global Review Accredited (and near accredited) Hospitals	24
Step 5: Create a Standard Source of Information Including a Place for Data Collection	24
Step 6: Ensure US Link to Payers (apply for American Medical Association CPT Code Approval, Evaluate HIPAA and ERISA requirements)	25
IV. MARKETING AND PROMOTION.....	26
A. OVERVIEW	26
B. PRODUCT and Price ARE DEFINED	27
C. SELECT MESSAGE, BRAND AND single source	27

Jordan Messaging and Branding	28
Hospital Specific Marketing.....	30
D. SUMMARY	31
ANNEX 1: HEALTH CLIMATE CALULATOR™ JORDAN APPLICATION	32
ANNEX 2: AMERICAN MEDICAL ASSOCIATION APPROVAL FOR CPT CODES (ELECTRONIC FORMAT)	35
ANNEX 3: QUESTIONNAIRES	37

EXECUTIVE SUMMARY

While there are various predictions on the actual size of the Medical Tourism market, there are clear indications that global outsourcing of medical care is becoming an industry. Between the increasing uses of telemedicine, the growth of US hospitals abroad, and the general increases in medical costs, there are opportunities for countries and hospitals providing high quality medical care at competitive costs. Indeed, medical tourism is deemed advantageous to developing health markets where educational standards are high and labor costs are low. In fact, the World Bank ranked Jordan as generating more income than that spent on health.¹ Additionally, the Private Hospital Association (PHA) in Jordan stated that the number of foreign patients coming to Jordan for care has been growing at 10% annually since 2004, with over 250,000 patients from around 84 Arab and foreign countries being treated in Jordanian private hospitals, clinics and medical centers last year². In fact, a recent Gallup Poll found that up to 29% of Americans would consider traveling abroad for treatments including heart bypass surgery, hip or knee replacement, plastic surgery, cancer diagnosis and treatment, or alternative medical care.³

Medical tourism, however, is currently a niche market. This means that there are pockets of individuals interested in, or with effective incentives to explore medical care abroad. As such, general marketing may be a way to increase awareness of Jordan, but general marketing may not be the most effective way to reach the minds of persons with the strongest incentives to pursue medical treatment abroad.

Pundits express concern that active promotion of medical tourism in developing economies potentially reduces access to care for the most vulnerable populations. Therefore, a successful medical tourist country strategy ideally includes a method of financing (via a medical tourist tax) public sector access, microinsurance program development, or something similar to reduce the potential for “brain drain” that may occur when private sector programs pull resources from the public sector.

Medical tourism niche markets – target market segments and procedures

Jordan is an important option for both boundary (neighboring) as well as distant (farther away physically and culturally) patients. Specifically, Jordan's high quality of specialized medical care and the relatively low cost of medical care provide an important value proposition. This is made more attractive when considering the recent placement of Petra as a “modern wonder of the world.”⁴ Indeed, there are new opportunities to expand Jordan's reputation as a safe, historical destination with strong roots in medical quality.

To compete effectively in the global marketplace, Jordan has increased Joint Commission International accreditation in hospitals, participates in international medical travel meetings, and continues to create awareness of the need for a structured approach to medical

¹ Bladd, Joanne. “Medical tourism: a hit and myth affair”: Arabianbusiness.com, (<http://www.arabianbusiness.com/536827-medical-tourism-a-hit-and-myth-affair>) November 2008. (retrieved 4 June 2009)

² <http://www.bernama.com/bernama/v5/newsindex.php?id=357810> (extracted 8 June 2009, “Jordan Tops Region As Medical Tourist Hub” September 8, 2008.

³ Gallup survey, reported May 18, 2009. “Americans Consider Crossing Borders for Medical Care” (www.gallup.com/poll/118423/Americans-Consider-Crossing-Borders-Medical-Care.aspx)

⁴ <http://www.forbestraveler.com/best-lists/seven-modern-wonders-story.html> (retrieved 4 June 2009)

malpractice. Market demand sources are those needing specialized care, facing long waiting times, or seeking lower cost alternatives, to name a few.

Promoting health opportunities to the segments will vary, as different barriers may exist (e.g., visa requirements, misapprehension of a Middle Eastern country, etc.). Complicating a market promotion strategy is the recent legislation for the European Union (EU) allowing those facing waiting lists potentially to receive care in other EU countries. This option may reduce the European traveler from accessing insured medical care in the Middle East. However, for this population, specific marketing of spa and cosmetic surgery options remain.

Top distant markets for Jordan were identified using the Health Climate Calculator™ (HC2™) which uses public data sources to provide an objective evaluation of health strengths and weaknesses (see **Annex 1**). The markets identified are: Scandinavia and Germany (public health insured for covered medical spa treatments), Russia, the United States (US), and to a lesser extent the United Kingdom and Canada. Top boundary markets are: Saudi Arabia, the United Arab Emirates (UAE), Algeria, Libya, Syria, and Iraq.

Jordan has a strong and positive image in the region as a quality medical hub. Specific hospitals are working to access more patients in the boundary countries. In regard to exploring distant market segments, the following groupings have been identified:

Table 1: Mapping of Distant Countries to Types of Medical Tourism

	Spas and Alternative Therapies	Cosmetic Surgery	Medical Tourism
United States	Tier 1		Tier 2
United Kingdom	Tiers 1, 2, and 3 (if covered by NHS)		Tier 2
Germany	Tiers 1, 2, and 3	Tier 1	
Scandinavia	Tiers 1, 2 and 3 (if able to get government support of medical treatment)		Tier 1 and 2 (primarily experimental, possibly IVF)
Canada	Tiers 1 and 2		Tier 1
Russia	Tier 1	Tier 1	Tier 1

Tiers are loosely defined as:

Tier 1: Higher disposable income

Tier 2: Middle class, in the US may be underinsured or uninsured, be part of a self-insured employer group with an international benefit, have a high deductible account, and/or have a Health Savings Account that can be used to pay for medical expenses even if incurred abroad.

Tier 3: Fully insured persons with limited resources/interest in spending on nonessential services

Identify distribution channels to strengthen marketing message

Broad-based marketing can be effective if the product demand is well understood, but in the case of medical tourism (as yet a niche market), individuals have to overcome certain opinions or biases to receiving care away from home. Demand assessment identifies the market base, or those who have the greatest potential interest (incentive) to receive care in

Jordan. However, before promoting medical quality in Jordan or hospitals specifically, effective distribution channels need to be identified. Specifically:

Step 1: Pursue a market analysis with the Scandinavian public sector groups to present a value proposition for publicly insured receiving medical spa treatments in Jordan. (This is similar to the approach taken in Germany)

Step 2: Evaluate Russia links with the insurance and reinsurance community regarding life insurance riders or complications policies for “medical tourist” procedures.

Step 3: Further contacts with Arab Associations in the US and Canada to consider/create a value proposition for individuals culturally comfortable with Jordan and in need of quality medical care at reduced costs.

Step 4: Request Companion Global (related to Blue Cross Blue Shield of South Carolina) to assess the Joint Commission accredited hospitals in Jordan for potential inclusion in its’ network. The results of this analysis will provide feedback on the ability to attract top tier US patients.

Step 5: Create a standard information source for Jordan tied to internet web searches where quality messages on the level of care in Jordan can be researched. This portal can also include statistics on the demographics and medical outcomes which can be used as a foundation of an economic study of medical tourism in Jordan (for eventual publication).

Step 6: Ensure compliance with US-specific issues by applying for American Medical Association (AMA) CPT Code Approval (explained and outlined in Section II and Annex 2), and creating a general understanding of HIPAA (Health Insurance Portability and Accountability Act) and ERISA (Employee Retirement Income Security Act) health requirements.

Once effective distribution channels have been identified, promotion of Jordan can take place on two levels: (1) advocating Jordan as a safe and affordable quality healthcare destination, and (2) individual hospitals promoting themselves to selected niche markets. In both cases, a clear value proposition to receiving medical care in Jordan is needed.

The Value Proposition in Jordan includes overall benefits associated with medical care. It addresses the patient workflow (what the patient receives including hotel/concierge assistance and medical records for the home country), as well as overall cost. For example, Jordan’s overall Value Proposition is to increase medical tourists by:

1. providing general information on affordable quality care options
2. creating a broad voice that enables hospitals to enhance niche market strategies
3. ensuring a safe patient journey (by promoting transparency, information, and insurance options)

Individual hospitals will also have specific Value Propositions for targeted markets. However, before promoting the country, we need to know what is included in the patient journey, provide guidelines to increase transparency, and outline the specific distribution channels that will help increase patient volume in the market.

Medical Quality: Guidelines and effective Due Diligence

Competition for medical tourists in the region is growing, and so are the groups promoting themselves as critical players in the medical tourism industry. These groups include facilitators, associations, and even tourist agencies. In an industry that crosses countries and cultures, it is difficult to be sure you know who you are working with as well as understanding patient expectations. To increase transparency and manage expectations, introduce basic guidelines to ensure a common management of issues including: due diligence for partner selection internationally (including legal background checks when possible), insurance to cover potential complications post surgery/treatment, and hospital specific marketing. Guidelines are included in this report.

Specific marketing will target the distribution channels (which are still to be determined), however, generally speaking the promotions will likely include:

1. **Direct Advertising**: using paid print media to expand the image of Jordan as a safe and affordable medical tourist destination. Successful advertising will maximize awareness of Jordan as a market, enable market leadership and enhance goodwill.
2. **Stimulate interest in Jordan for medical tourism**. The medical specialties available need to be promoted both in the region as well as in distant countries. This can be done through direct media as well as speaking engagements.
3. **Individual sales/promotions** are important. This includes presenting the value proposition to groups with certain needs, including wellness groups (yoga seminars, wellness events, and dermatologist conventions), persons with limited healthcare options (including a link on websites for job searching including www.careerbuilder.com or www.indeed.com), as well as immigrants who are comfortable receiving care in a home country.
4. **Short-term incentives** may meet a short-term market need or impulse activity. Examples of this include working with hotels in Jordan (specifically the InterContinental as it is active in the medical tourism space) to offer travelers a 30 minute medical exam with formal results that can be brought back to the home country. While this is an opportunistic approach and a “small win” it does promote the concept of Jordan as a clinical destination.

A critical aspect of any marketing promotion is tracking results. This can be done at the hospital level and report into the PHA.

For the hospitals seeking patients, the messaging and marketing will have to focus on the specific tier and niche. Therefore it is important to adequately evaluate the potential in each segment (based on individual hospital strengths and weaknesses), and list the required steps to penetrate each market space.

In summary, there are niche markets with strong incentives to access quality medical care in Jordan. A shared Value Proposition, quality guidelines, and information will enable Jordan to emerge as an important competitor in this field. However, as this is a niche market (at this time), effective marketing is blended with specific distribution channels. Locating the distribution channels and creating a message will serve as a critical platform for expansion in this sector.

I. OBJECTIVES & METHODOLOGY

A. PROJECT OBJECTIVES

The objectives of the Market Demand Assessment Framework and application include effective assessment of the medical tourism niche markets, effective analysis of the market, a competitive analysis, as well as specific health marketing and promotional strategies for both Jordan as well as individual hospitals.

The Medical Tourism market is typically grouped into two segments: boundary and distant. Boundary patients are those located in nearby countries with need to travel into Jordan for medical care, typically because there is access to care or specific specialty technologies available. Distant patients are those who come from areas typically longer than a five hour flight for medical care. Due to the inconvenience of the journey, Jordan is particularly interesting to those with a cultural affinity, in need of specialized treatment, or interested in the low cost medical care. The demand for medical care varies by market segment as well as individual country and cultural preference.

Jordan as a medical destination offers high quality care, but appears to suffer from low market awareness of its safety, particularly regarding the distant countries. Additionally, when compared to competitor countries, Jordanian hospitals have fewer beds on average (an estimated 150). However, the low cost of medical care combined with the fewer visa restrictions from some distant countries (Europe and the US) make it a convenient destination, particularly for those who travel with some regularity.

Identification of the number of tourists entering Jordan for medical care will become a critical component of ongoing management of this sector. Additionally, a centralized database tracking reasons for traveling for medical care as well as seven and 30 day follow-up will be critical to successful publishing of quality outcomes data suitable for scientific magazines.

B. APPROACH, TOOLS AND METHODOLOGY

A site visit took place 18 to 29 May with the following objectives:

1. Finalize the selection of boundary and distant countries with an incentive to access medical care in Jordan
2. Assess and compare Joint Commission accredited facilities and management in Jordan with competition in other international venues
3. Evaluate implications of limited medical malpractice options with the insurance community
4. Evaluate and compare the competitive advantage of an in-country facilitator (patient advocate) versus an international department in each hospital (given the comparatively small hospital size in Jordan)

5. Discuss potential value proposition, messaging and marketing strategies with critical stakeholders including the Jordan Tourism Board (JTB) and Royal Jordanian airlines (RJ)

The methodology included application of the Health Climate Calculator™ to pinpoint market niches, potential market size, and marketing channels. Identification of the markets led to analysis of marketing channels. Details of the Health Climate Calculator™ are available in **Annex 1**.

II. MARKET DEMAND ASSESSMENT

A. SIZE OF THE MEDICAL TOURISM MARKET – ASSESSING DEMAND FOR QUALITY AND LOW MEDICAL COSTS

There are different estimates of the size of the medical tourism market, but all agree that the rate of demand for and access to medical care internationally is growing. In 2007, Deloitte Center for Health Solutions (2008) estimated that about 750,000 Americans traveled abroad for medical care. The US Department of Commerce, Office of Travel and Tourism Industries surveyed international air travelers and estimated that in 2007, approximately 125,000 Americans traveled abroad specifically for medical treatments, with a 4% increase from 2006⁵. In addition to purposeful medical tourists, there are retirees living outside of a home country, travelers who are injured while abroad, employees seconded internationally, immigrants who may return home for a visit and receive medical care in a familiar (and typically less expensive) environment, and even students studying abroad. Assessing the market demand for one country over another takes many forms, and most critical to any selection is the level of comfort an individual feels.

A McKinsey & Company report (2008) revealed that the core reasons for medical travel are those seeking:

- Best technology regardless of cost (est. 40%) *This may include experimental, traditional or disallowed treatments (possibly IVF)*
- High quality and lower costs for medically necessary procedures/treatments (est. 30%) *An uninsured or underinsured person may seek reasonable cost alternatives to the home country for selected treatments*
- Quick access to medical care (est. 15%) *Specific treatments are not available in the home country, or there is a significant waiting list for an elective procedure*
- Lower costs for discretionary medical care (est. 4%) *this could include cosmetic surgery and wellness or spa treatments*

Successful promotion of the medical tourism segment links a strong market demand assessment to a value proposition that can be effectively promoted at the country as well as hospital specific level. Currently, Jordanian hospitals are effectively targeting boundary countries by participating in conferences in these countries, and successfully building individual reputations as quality medical centers. Therefore, the largest untapped markets are located in distant countries. The targeted procedures are those that have the following characteristics:

- they are typically elective so they can be planned in advance (this reduces potential visa issues, and allows a strong focus on logistics and pre-admission management)

⁵ International Travelers from the U.S. to Overseas (U.S. Residents (Outbound) US Department of Commerce, Office of Travel & Tourism, 2007.

- the savings of having the procedure performed out-of-country is typically > \$5,000 (providing sufficient financial incentives)
- dental and cosmetic procedures/treatments/surgeries can be marketed depending on the niche markets and the hospital specific advantages

Table 1 illustrates selected procedures and estimated costs; individual Jordan hospital costs are indicated in yellow:

TABLE 1: ESTIMATED ELECTIVE SURGERY COSTS COMPARED US TO MEDICAL TOURIST COUNTRIES

Procedure	Southeastern US Average Charge ⁶	Anadolu Medical Center Turkey ⁷	Apollo Hospitals Bangalore and New Delhi India ⁸	Bumrungrad International Thailand	CIMA Hospitals Mexico
Heart Bypass (CABG x4)	\$144,317	\$12,000 - \$17,500	\$8,500 - \$10,500	\$23,000 - \$25,000	\$30,000 - \$33,000
Heart Valve Replacement	\$177,665	\$14,000 - \$16,000	\$9,500 - \$13,000	\$22,000 - \$24,000	\$32,000 - \$34,000
Hip Replacement	\$100,047	\$11,500 - \$13,000	\$7,000 - \$9,500	\$11,000 - \$14,000	\$11,500 - \$12,500
Knee Replacement	\$65,918	\$10,000 - \$11,000	\$8,000 - \$10,000	\$10,500 - \$14,000	\$10,000 - \$11,000
Spinal Fusion	\$103,761	\$6,200 - \$7,200	\$7,500 - \$10,000	\$9,300 - \$10,000	\$14,750 - \$16,000

While there is some variability in the charges per hospital in Jordan, in each case the costs in Jordan are significantly lower than in the US, where persons without health insurance or persons with limited health insurance would have a significant financial incentive to consider Jordan.

However, it is not simply cost and quality outcomes that will attract patients; it is also the environment in which the care is delivered. From a cultural perspective, persons traveling abroad for care will want the environment to mirror the home country and comforts. This includes simple issues like television and cable stations, as well as food availability.

⁶ Extracted from Companion Global Healthcare, Feb 16, 2009 (www.CompanionGlobalHealthcare.com)

⁷ Ibid

⁸ Ibid

B. JORDAN AS A TARGET COUNTRY

To begin the assessment of market demand, comparative evaluation of Jordan commenced utilizing the Health Climate Calculator (HC²)TM. HC² collects data from public sources and compiles them in a way to provide an overview of the strengths and weaknesses of healthcare delivery issues in a country. These data assist in locating market strengths and potential (Details regarding the tool can be located in **Annex 1**).

There are specific benefits to receiving care in Jordan. When crafting a promotional approach, it's important to highlight Jordan's strengths and create a clear message, while having an understanding of the position of other markets engaged in medical tourism as a source or target country.

The following table outlines some salient characteristics of the market compared to other countries:

TABLE 2: COUNTRY CHARACTERISTICS COMPARED

	Jordan	UK	Turkey	Thailand	UAE
Inflation Rate (2008) Impact: increasing inflation rates may impact pricing of medical care. High fluctuations in this area could force price increases and impact competitive advantage.	14.9%	3.8%	10.2%	5.5%	14.4%
Corruption Index (2008) <i>Scores from 1 to 10 with 1 the least transparent and 10 the most transparent</i> Impact: markets that are perceived as corrupt or not transparent indicate the presence of "gray markets" in order to get things done. This could complicate a medical tourist strategy.	5.1	7.7	4.6	3.5	5.9
Total Health Exp % GDP (2005) Impact: when there is low % GDP spent on health, there are likely important gaps for locals needing medical aid. Attention to potential "brain drain" is needed.	10.5	8.2	5.7	3.5	2.6%
Health Expenditure per capita(US) (2005) Impact: The health expenditure provides context to price	241	3,064	383	98	833

	Jordan	UK	Turkey	Thailand	UAE
sensitivity					
Major Infectious Disease Risk (per CIA Factbook) (2008)	N/A	N/A	N/A	High	N/A
Impact: Targeting persons coming from countries where there is no risk, presence of risk requires a plan to assuage					
American Medical Association (AMA) Electronic Coding Approval	No	Yes	Yes	Yes	Yes
Impact: To submit claims for payment in markets requiring CPT coding (e.g., US), this approval is required					

In reviewing the differences among countries, Jordan is at an advantage regarding absence of major infectious disease risk (compared to Thailand), but does not have AMA approval for use of CPT coding (which would be important for US persons requiring coded claims for reimbursement). **Annex 2** provides information on obtaining AMA approval for use of CPT codes. Also, the health expenditure per capita in the UAE compared to Jordan is significant, suggesting higher medical costs in general, which could detract from the UAE's ability to attract patients where cost is a priority.

Competition in the medical tourism market exists, but it is difficult to assess since the specific markets and distribution channels have not been identified. However, in general there are some important countries and issues to keep in mind. Specifically:

- Cost of medical care in the UAE is more expensive than in Jordan. This advantage can help attract the individuals considering medical treatment in that environment.
- Turkey boasts hospitals with US affiliations, and it could become a viable alternative for EU medical tourists seeking to avoid waiting lists
- Thailand has been specializing in medical tourism for many years, beginning with specialized medical treatments unavailable in many countries
- India has the advantage of numerous immigrants in the US feeling comfortable receiving inexpensive quality medical treatment at home

C. MARKET SEGMENTATION AND TIERS

As noted earlier, there are two groups of medical tourists: boundary, and distant. Boundary patients are those in the region with medical needs who, through word of mouth or past experience, choose to receive medical care in Jordan. Countries include: Libya, Yemen, Algeria, and Sudan,. Distant tourists arrive from further countries, suggesting that sufficient incentives pull them into the region. These incentives include: important cost savings and high quality, ability to participate in unique therapies, and tying the medical visit with a tourist interest.

A look at a world map presents boundary and distant countries:



At the same time, there are competing market forces of countries looking to increase medical tourism including important and long-standing medical tourist venues in India, Thailand and Turkey. In India, Apollo Hospitals has been very active in targeting Indians abroad interested in returning home for medical care, and is visible in the academic community, including the Wharton School of the University of Pennsylvania, where it participated in Knowledge@ Wharton.⁹ Bumrungrad Hospital in Thailand is considered one of the largest and most well-known medical tourist sites, is run by western management and sports a “Starbucks” in its’ lobby. Not only must Jordan market itself effectively, but the country and local hospitals need to be competitive.

To identify the core traits per country where Jordan’s advantages would be most appreciated, the Health Climate Calculator (HC²)TM was used. This tool can assist in many

⁹ <http://knowledge.wharton.upenn.edu/india/article.cfm?articleid=4301> (extracted 4 June 2009) – This is the school's online business journal.

areas of healthcare delivery assessment from the development of insurance tools to promotional activities on a clinical level.

Application of the HC² for the market demand assessment included an evaluation of over 30 countries in the following areas:

TABLE 3: HC² PILLARS EVALUATED

Pillar	Definition	Supply (Jordan Hospitals)	Demand (Medical Tourists)
Country Infrastructure	This aspect considers the general environment in the country and evaluates factors including corruption levels, level of transparency, economic freedom, and general levels of protection	Transparent markets with low corruption levels are preferred. Jordan presents well on this score compared to competition	Quality expectations are very high when medical tourists hail from countries with higher scores than Jordan
Health Economics	The evaluation of resources allocated to health, the level of health infrastructure in the country, causes of mortality and general access issues	In Jordan the per capita spend on health is low compared to other countries (both boundary and distant). With equal or better quality and perceived level of care, this defines a major strength of the Jordanian market	The low per capita expenditure compared to other countries suggests strong attractive element to care
Medical Tourism Applicability	This pillar focuses on the role of quality in the market in general as well as specific to medical tourism (including Joint Commission accreditation). It includes an assessment of the collaboration levels (hospital to payer), as well as presence of FDA, and ability to map quality initiatives to other countries	This is the most relevant score in that it can be used to match market potential. For Jordan, it is positioned competitively	Medical tourists with higher levels of collaboration and quality initiatives (i.e, UK, US) are more active in medical consumers. Attracting them requires similar collaboration

Country aspects are then merged into the three general forms of medical tourism¹⁰:

1. Spas and alternative therapies (massage, yoga, beauty)
2. Cosmetic surgery (and other non-medically necessary medical procedures)
3. Medical tourism (health screening, heart surgery, cancer treatment, etc.)
 - a. Invasive (includes dental)
 - b. Diagnostic (blood screening, bone density testing, heart stress tests, lipid analysis, and electrocardiograms)
 - c. Lifestyle (wellness, nutrition, stress reduction, weight loss, anti-aging, pampering)

Target top markets for Jordan emerge as: United States, the United Kingdom, Germany, Scandinavia, Canada, and Russia. Within each country/region there are tiers of potential patients as follows:

TABLE 4: MAPPING OF DISTANT COUNTRIES TO TYPES OF MEDICAL TOURISM

	Spas and Alternative Therapies	Cosmetic Surgery	Medical Tourism
United States	Tier 1		Tier 2
United Kingdom	Tiers 1, 2, and 3 (if covered by NHS)		Tier 2
Germany	Tiers 1, 2, and 3	Tier 1	
Scandinavia	Tiers 1, 2 and 3 (if able to get government support of medical treatment)		Tier 1 and 2 (primarily experimental, possibly IVF)
Canada	Tiers 1 and 2		Tier 1
Russia	Tier 1	Tier 1	Tier 1

Tiers are loosely defined as:

Tier 1: Higher disposable income, privately insured, home owner

Tier 2: Middle class, in the US may be underinsured or uninsured, be part of a self-insured group with an “international benefit”, have a high deductible account, and/or have a Health Savings Account that can be used to pay for medical expenses even if incurred abroad

Tier 3: Fully insured persons with limited disposable income/interest in spending on nonessential services or those already covered by local insurance

Challenge with the United Kingdom (UK)

In July 2008, the European Commission published a draft Directive on the application of patients’ rights in cross-border healthcare. This Directive seeks to clarify existing European Court of Justice case law regarding when patients can exercise their freedom to obtain health services to which they are entitled in the UK, in another European Union (EU)

¹⁰ Bookman and Bookman, referenced to Goodman, p 42

member state.¹¹ This would allow persons waiting for procedures to access care in other EU countries and be covered by the public insurer in the home country. While this directive is in negotiation, its' passage would directly impact the level of demand for persons with public insurance to receive care in Jordan and avoid the waiting list.

Messaging and marketing require Value Proposition and targeted distribution

The messaging and marketing for each tier and segment is variable, therefore it is important to adequately evaluate the potential in each segment, and list the required steps to penetrate each market space. Specifically, which marketing strategies will effectively navigate the most potential members into Jordan for treatment, and how a positive message be crafted to encourage positive feedback.

While we have explored critical components of successful medical tourism destinations being cost, quality and environments that are culturally accommodating, individual hospitals need to evaluate where they fit in the market and how they will compete. So far the identified market segments are broad. Successful marketing in niche markets requires hospital-specific value propositions as well as targeted distribution channels.

Having identified the sources of potential patients into Jordan in this section, the value proposition and guidelines to increase transparency (and level of comfort receiving care in Jordan), and prospective distribution channels can be explored.

¹¹ Consultation on the European Commission's proposals for a Directive on the application of patients' rights in cross-border healthcare, Department of Health (http://www.dh.gov.uk/en/Consultations/Closedconsultations/DH_089029) extracted 8 June 2009

III. VALUE PROPOSITION AND GUIDELINES

A. OVERVIEW

The value proposition for medical care in Jordan needs to: support an excellent reputation in patient safety, ensure strong due diligence of partners, and provide standards of practice that will allay any concerns about the transitions of care. The purpose of this chapter is to outline the general flow of medical tourism and to provide guidelines to help manage expectations by introducing due diligence processes, increasing information regarding medical malpractice and insurance options, as well as patient monitoring post treatment.

B. GENERAL PATIENT FLOW

Typically, a medical tourist admission or treatment follows the following pathway, where the purely “medical” steps are highlighted in bold:

Step 1: Patient referred (either by self, a Facilitator, a Third Party Administrator, or other)

1. Procedure identified
2. Hospital and doctor/specialist selected
3. Define transition of care (with home and target physician)
4. Payment coordinated
5. Legal issues and waivers discussed and signed off
6. **Clinical background provided (MEDICAL)**
7. **Comorbid conditions identified, medications discussed, potential complications outlined and reviewed (MEDICAL)**
8. Source country issues explained and resolved (i.e., visa, who will meet you, hotel and emergency contacts, etc.)
9. Travel arrangements including local concierge organized, “fit to fly” or “fit to travel” guidelines are met
10. **Pre-admission testing completed and results relayed to hospital and doctor/specialist (MEDICAL)**
11. Cost estimate provided, including method of payment
12. Process identified to inform if costs will exceed estimates

Step 2: Patient arrives and received treatment/procedure

1. Companion hotel and tours organized
2. **Hospital procedure and follow up (MEDICAL)**
3. Information on patient channeled through a hospital's international department or a facilitator

4. Discharge planning begins (with patient and companion, if applicable) (MEDICAL)

Step 3: Patient discharged

1. Any rehabilitation or follow up organized
2. Claims/records organized for return flight
3. Payment coordinated

4. Follow up instructions provided to patient and companion (if applicable)
5. **Specific instructions regarding common complications and conditions as well as information regarding signs and symptoms requiring immediate medical attention provided verbally as well as in writing (MEDICAL)**

Step 4: Follow up and quality reporting

1. Locate a common portal where data on incoming patients can be organized and evaluated.
2. Input general demographics of the patient including: age, gender, source country, reason for seeking care abroad (provide a list of reasons

including: non covered insurable event, cosmetic surgery, dental, cardiac, neurological, orthopedic, other), comorbid conditions, air transportation selected, and hotel selected

3. Query patient on hospital selected (provide a list of reasons including: reputation, facilitator or third party administrator, advertising, conference, home doctor, other)
4. Note the length of stay
5. Query patient before discharge from the hospital on general experience, get feedback on the process, the amenities, what worked and what could be improved upon
6. Follow up in seven days with the patient regarding quality of care, any complications, and if the patient has seen a home doctor since the procedure
7. Follow up in 30 days with the patient regarding quality of care, any complications, and if the patient has seen a home doctor since the procedure
8. Follow up annually with the patient regarding additional hospital services and conditions managed by the hospital

While the medical procedure is the most important quality event observed in the workflow, there are a significant number of tasks listed that are critical to a safe patient journey, and yet are not necessarily the responsibility of the hospital. Coordinating a patient visit is complex and the typical partners are “Facilitators” (external to the hospital, but sometimes located in the host country), and “international departments” (located and employed by the hosting hospital)

C. FACILITATORS VERSUS INTERNATIONAL DEPARTMENTS

In the patient flow listed in section B, there are a significant number of administrative steps that surround an effective patient flow. However, these are not purely administrative tasks either. In fact, basic clinical knowledge about the procedure and workings of the hospital are critical to most of the administrative support functions outlined above.

In the medical tourism sphere, these administrative tasks are handled differently, depending on the market and the size of the hospital itself. For example, there are “international departments” in some large hospitals in India, Thailand, and the US who help to manage and coordinate many of the administrative issues involved. However, if the hospital is small, is there sufficient work for an international office to be staffed? Can a department in the hospital provide sufficient objectivity if an untoward event occurs?

Another critical player in a medical tourist admission is a “facilitator” whose job it is to work on behalf of the patient. However, there are many types of facilitators, it is not a regulated industry, and it’s unclear how the role of a facilitator should fit into the patient journey, and how this position impacts medical quality.

In any case, there is a critical need for a Patient Advocate, located in-country, who understands how the hospital works, who can push for additional records or for clarification regarding the patient pathway, and who is positioned as an objective third party focused on quality. The concept of patient advocacy is not new. In fact, Navigate Health in Italy¹² as well as Health Advocate in the US¹³ are two companies providing objective health assistance regarding movement in a health system to ensure maximum value. **Annex 3** includes questionnaires to support process standardization.

There is an opportunity in Jordan to consider the development of Patient Advocate standards to guarantee heightened transparency for any person seeking medical care as an accidental or purposeful medical tourist. Additionally, this patient advocate could accept responsibility to enter information regarding the patient outcomes and satisfaction and blind the results so that overall market data are available.

D. DUE DILIGENCE

Locating strong partners is complex when working across country borders and cultures. In smaller countries, word of mouth and associations are ample methods of managing contacts. In this newly developing market, companies are new, and associations are broad. An effective due diligence process is required to ensure contacts and partners possess similar cultures and values.

Evaluating medical tourism partners and contracts

When evaluating contracts, partners or relationships, the following steps are recommended:

¹² <http://www.florencemedicalassistance.com/>

¹³ http://www.healthadvocate.com/about_us.aspx

Step 1: Identify and evaluate the company

- Review the company website
- It is not how many years of experience the company offers, but how many years has the company been in business that points to the success of the business model. However, medical tourism is a new market, so there are companies appearing regularly. Be diligent about the partners you select. As such:
 - o Check the biographies of the individuals leading the company. Specifically, search public records including the National Association of Insurance Commissioners (NAIC): <http://external-apps.naic.org/SearchTool/SearchTool.jsp>. You will need to search the name of the individual or company per state.
- For a US or Canadian company, if it has been in business for greater than one year, check it with the Better Business Bureau (www.bbb.org). If the company has been in operation for greater than one year and is not listed here, inquire as to why not.
- Ask what quality groups the company belongs to, or which “watch dog” groups it supports.
- How does the company earn revenue? Understanding the business model helps you assess the potential advantage to your organization. If the company earns revenue by charging hospitals fees, it is unclear if this has long-term potential.
- Locate the Executive Management of the company. If there is no management listed on the website, inquire why not. Typically, this is public information and is necessary in order to make an informed decision regarding potential partnering.
- If you receive a contract and the signatory is different from the Executive Management of the company, inquire why and research the person with signature authority.
- Pay attention to the groups the company is affiliated with and how they interact with or support one another

Step 2: Identify and evaluate the business proposal

- Who are the partners of the company?
- What are the specific incentives for patients to access this particular company for medical assistance? There are many companies operating in this space, but the business model is unclear.
- Where is the company getting clients? From internet web hits, from press releases? This is a niche market and the level of comfort receiving care is still growing. Identifying believable incentives to channel care abroad is difficult. For the US market, the individuals seeking medical care abroad are paying out of pocket for medical care. How is this company getting relevant promotional information to them?
- Is the company seeking an exclusive relationship? Typically, exclusive relationships are more expensive than open markets. While there may be a good reason to enter into this agreement, a solid understanding of the promotional aspects is required. If the company needs money from the hospital to generate patients, explore the business model further.
- How does the company focus on quality? Is it a member of a country-based quality organization? How does it promote quality patient outcomes?

Step 3: Identify and evaluate key success factors

- How long does the contract run and is it possible for both parties to exit the agreement at will? If this clause is not included and there are fees associated with the contract, there is cause for some concern.
- How will you evaluate the success of this contract? Number of patients? Number of contacts from potential patients?

Step 4: Evaluate the contract language

- United States and European contracts can be unwieldy, but it's important to read them carefully and negotiate parts of the contract that you deem limiting. Contracts exist in the event that something untoward occurs. It's wise to be safe and negotiate the language, rather than anticipate that the contract will not have to be executed.
- Components to watch include, location for disputes (law to be applied), hold harmless and indemnification.

Evaluating partners and contracts is serious. Ignoring complex contract wording can cause serious harm in the event that the contract is brought into play. Absent effective due diligence, a hospital or group may begin a complicated association that could adversely impact its' long-term reputation.

E. MALPRACTICE AND MEDICAL TOURISM COMPLICATION INSURANCE

Jordan has worked diligently to increase awareness of medical malpractice insurance in-country. Discussions with an insurer in Jordan suggest that while this insurance is available, it is not typically purchased¹⁴. While the insurance industry works on developing this concept, individual hospitals could use this as a market advantage, by letting potential foreign patients see that the private hospital market is taking precautions to ensure a safety net for individual patients.

Additional insurance coverage focused on the traveling patient are beginning to emerge. Specifically, Lloyd's of London is underwriting a policy for persons in the US seeking medical care outside of the home country¹⁵. This policy covers a limited payment if a scheduled medical procedure complication occurs.

Providing potential patients with the information to help them protect themselves while seeking care abroad displays a high level of market sophistication, awareness of market trends, and transparency. These attributes may instill patient confidence.

¹⁴ Discussion with Jordan International Insurance Company, May 2009

¹⁵ Taken from "Bordercross Worldwide SM Medical Procedure insurance Policy, Underwritten by: Certain Underwriters at Lloyd's London" June 2009

F. SINGLE SOURCE FOR INFORMATION

Today there is not a single point of entry for individuals seeking medical care options in Jordan. In fact, in researching medical tourism Jordan on the internet, it is difficult to know where to turn for specific questions about the healthcare system, local medical residency requirements, and The Private Hospital Association (PHA) is uniquely positioned to provide this service to individuals seeking medical care. Consider general information including:

- Visa requirements¹⁶
 - o Citizens from Bahrain, Egypt, Hong Kong, Japan, Kuwait, Oman, Qatar, Saudi Arabia, South Africa, Syria, United Arab Emirates, Vatican and Yemen do not require a visa for entry.
 - o Everyone else needs a visa, most nationalities can obtain a visa on arrival. The cost of single entry visa for all nationalities is JD 10 (around \$14) for all nationalities and for multiple entries it is JD 20 (around \$30). Groups of five persons or more arriving through a designated Jordanian tour operator are exempted from all visa charges.
 - o Visas are available at most borders for all visitors except nationals from **Africa**: Angola, Benin, Botswana, Burkina Faso, Burundi, Cameroon, Central African Republic, Chad, Congo, Cote d'Ivoire, Djibouti, Eritrea, Ethiopia, Gabon, Gambia, Ghana, Guinea, Guinea Bissau, Guyana, Liberia, Madagascar, Mali, Mauritania, Mozambique, Niger, Nigeria, Senegal, Sierra Leone, Somalia, Sudan, Tanzania, Togo, Uganda, Zambia. **Asia**: Afghanistan, Bangladesh, Cambodia, India, Iran, Laos, Lebanon, Mongolia, Pakistan, Papua New Guinea, Philippines, Russia, Sri Lanka, Vietnam. **Europe**: Albania, Bosnia and Herzegovina, Macedonia. **Latin America**: Belize, Colombia, Cuba. In addition to All Palestinians holding travel documents of whatsoever nationalities, and Moroccan females of (16-35) years old traveling alone.
- Information on the local and international accreditation organizations and a mapping between them (what is similar, what is different)
- Information on insurance coverage (country specific) that can be used to cover care, or potential complications
- Quality components on individual risk assessment and things to be careful of on a long flight, or regarding the need of specific medications
- Information on the American Medical Association and American Surgical Association guidelines for medical tourism
- Languages available
- Hotels or tour operators working with accredited hospitals to provide unique services (list hotels with amenities)

¹⁶ <http://projectvisa.com/countryinfo.asp?countrycode=jo> extracted 5 June 2009

- Include a video of a positive patient experience targeted to the different groups (the Dead Sea spas, medical tourists from boundary countries, and medical tourists from distant countries)

G. MEDICAL TOURISM AND TAXES

Medical tourism is sometimes chided for removing needed providers from the public to the private sector. However, the establishment of an effective medical tourist strategy could be an important step in reducing “brain drain” by keeping important physicians in –country, and a portion of the financial revenues could be channeled (via light taxes) back into the public setting, or could be funneled into important initiatives including microinsurance ventures.

H. RECOMMENDED NEXT STEPS

Take small steps to test niche market interest. Before marketing or promoting Jordan or its’ hospitals, you need to identify niche markets, specifically:

STEP 1: PURSUE MARKET ANALYSIS IN SCANDINAVIAN COUNTRIES

1. Evaluate the use of spa treatments that are covered under the public insurance in Scandinavian countries. Reach out to selected Scandinavian governments and present Jordan as an option for public coverage. Point out the medical benefits of the Dead Sea area, the reduced costs, and the ability to rejuvenate with effective quality medical personnel. (Similar to the work done in Germany)
2. Identify what needs to be done to allow patients to receive care in Jordan.

STEP 2: EVALUATE SPECIFIC RUSSIAN HEALTH OPPORTUNITIES

1. Research Russian-specific niche markets for wellness services, cosmetic surgery, and specialty care (cardiac and cancer), including banks and country-club type venues.
2. Discuss option of creating a life insurance/banking product with large insurers like Allianz or reinsurers like Swiss Re who are interested in expanding into the market.
 - a. Potential product could cover “dread disease” illnesses with cash that could fund care in international centers of excellence.

STEP 3: PURSUE CONTACTS IN ARAB AMERICAN AREA INTERESTED IN HELPING PERSONS RECEIVE MEDICAL CARE – INSURANCE AND PORTAL

1. The National Arab American Medical Association (NAAMA) is active in developing ties between Arab countries and the US. Perform a market analysis with NAAMA to create or help facilitate care for Arab Americans without insurance or with limited insurance and a comfort level receiving care in Jordan.
2. Contact the Chicago, Illinois mayor, particular to the link to Amman as a sister city, and identify opportunities to expand local knowledge of the medical/dental options in Jordan.

3. Locate other groups in the Chicago area who might be in a position to create market awareness, particularly regarding the financial advantages of receiving care in Jordan. Specifically noting that medical costs are tax deductible.
4. Based on the information collected, organize an approach and strategy to expand exposure of Jordan as a quality medical target in the Chicago area.

STEP 4: REQUEST THAT COMPANION GLOBAL¹⁷ REVIEW ACCREDITED (AND NEAR ACCREDITED) HOSPITALS

Companion Global is an important company in the US, because it is owned by Blue Cross Blue Shield of South Carolina, and has a strong reputation in the market. Companion Global as a company, is very selective of the hospitals with which it contracts, and will remain limited in scope to ensure a very high level of personalization. The management is experienced in the international hospital environment and channels patients effectively.

The leadership of Companion Global will visit Jordan and spend time at the accredited hospitals and will provide feedback on the potential for inclusion in its network. It may decline on all hospitals, or it may include one or more. As this organization carries significant weight with the US community, its opinion is critical.

Depending on the result of the visit, the hospitals may want to revisit the target niche markets, or modify the current approach.

STEP 5: CREATE A STANDARD SOURCE OF INFORMATION INCLUDING A PLACE FOR DATA COLLECTION

Create a source of information that can be tied to specific internet web searches and lead to a general source of information regarding Jordan and the medical specialties and affordable quality care. This information can then be shared with important travel and international insurers who are interested in “centers of excellence” for targeted populations.

Include information on medical malpractice, insurance policies available in different countries that could be used for international medical treatment, signed international treaties in the country as well as insurance available to cover complications of a medical procedure performed cross border.

To further the image of Jordan as a rigorous healthcare environment, collect information on the foreigners receiving care in Jordan, including:

- a. Patient demographics, source of interest in medical tourism, insurance coverage, and pre-admission checklist
- b. Collect information on the home provider and possible follow-up issues when the patient returns home

¹⁷ Companion Global (www.CompanionGlobal.com) will travel to Jordan, but expenses will have to be covered by the hosting country. The company indicated that they would be open to visiting Jordan to evaluate hospitals for potential inclusion in the network. If they do not select any hospitals, this would provide critical feedback on the potential outreach to US citizens.

- c. Outline trip and concierge information to be organize (or done by a local facilitator)
- d. Provide surgeon background to the patient including full disclosure of how many surgeries were performed, complication rate, history of pharmaceutical errors resulting in complications, any deaths or injuries resulting in legal action, specific board certifications and credentials, any corrective actions by any credentialing board, and evidence of liability or malpractice insurance.
- e. Ensure that the proposed medical plan has been reviewed by the patient, facilitator (if applicable) and the surgeon
- f. Follow up on test results and documentation for the home provider
- g. Complete discharge planning and patient education

STEP 6: ENSURE US LINK TO PAYERS (APPLY FOR AMERICAN MEDICAL ASSOCIATION CPT CODE APPROVAL, EVALUATE HIPAA AND ERISA REQUIREMENTS)

There are small pockets of the insurance community that are open to international benefits. Specifically, self-insured groups and individuals with high deductibles or HSAs present a market niche open to the possibility of receiving care in Jordan. However, hospitals need to be ready to meet US requirements in terms of both CPT coding as well as ERISA requirements. The AMA issue is detailed in **Annex 2**. ERISA and HIPAA training can be organized.

With the information collected in these six projects, effective distribution channels will emerge creating the atmosphere for successful marketing, and quality guidelines to promote a transparent and safe patient environment.

IV. MARKETING AND PROMOTION

A. OVERVIEW

Once the steps in Section III have been completed, strong distribution channels have been identified and a standard portal of information has been created, an effective marketing strategy can be crafted on two levels: (1) Jordan as a safe tourist destination, and (2) Jordan as a center of medical excellence. However, there are different hospitals operating in this sector, and each will want to identify specific strengths and weaknesses.

Marketing experts typically talk about the marketing mix to make sure that the product will positively influence consumer behavior. To equate this approach with medical tourism in Jordan, consider these terms defined and where gaps exist:

Product: quality medical service or treatment – individual hospitals will determine specific strategies – however, the product is embedded into a process that involves third parties including facilitators and third party claims administrators. Each person touching the patient has the potential to impact the process. Hospitals need to:

- Understand and maximize strengths: if the Arab market is attracted to certain specialties, evaluate ability to provide; if Western markets are attracted to specific amenities, estimate cost/benefit of improvements

Price: established to be sufficiently less than in western markets and of the same or higher quality (all things being equal). Key issues to watch are: inflation rate fluctuations both in Jordan as well as competitor markets, development of quality initiatives including the concept of an in-country patient advocate. Generally, there are common approaches to pricing including:

- High cost/high quality product: targets specific individuals seeking selected procedures and willing to pay for special services and physicians.
- Average price, but unique to the market: looks at something that no one else offers, or a way of differentiating the product from the competition (locally and internationally)
- Low cost/high quality product: using low costs to increase patient flow

Place: effective distribution channels are still being determined as this is a new industry and there are new companies and associations born daily. Recommendations on distribution are identified in Section III.

Promotion: developing a message and format that promotes Jordan on two levels: -- as a safe tourist destination, and as a quality focused and affordable healthcare hub. Identify and measure effectiveness of selected channels. Hospitals will need to evaluate:

- Interest in distribution channels to push patients into the specific hospitals. This requires strong due diligence of the partners, and understanding the specific incentives to channel patients.
- Potential advantages of relying on promotions targeted to general markets to raise awareness of Jordan.

While there is an established product, there are persons touching the patient at different intervals that may be out of the control of the hospital. Also, while the price point is competitive, hospitals in Jordan charge at different levels. Defining effective distribution channels requires additional research. It is difficult to recommend specific marketing without a stronger understanding of the complete value proposition and distribution channels. Therefore, the following steps are broadly defined and recommendations can be modified when more specific information is available.

B. PRODUCT AND PRICE ARE DEFINED

While each hospital will have its own marketing program and defined markets to target, there is a strong need to enhance external market understanding of Jordan, the high level of safety in the country, as well as its' position as a medical quality hub in the Middle East.

These needs tie into three forms of medical tourism¹⁸:

1. Spas and alternative therapies (massage, yoga, beauty)
2. Cosmetic surgery (and other non-medically necessary medical procedures)
3. Medical tourism (health screening, heart surgery, cancer treatment, etc.)
 - a. Invasive (includes dental)
 - b. Diagnostic (blood screening, bone density testing, heart stress tests, lipid analysis, and electrocardiograms)
 - c. Lifestyle (wellness, nutrition, stress reduction, weight loss, anti-aging, pampering)

The cost of medical care may vary per hospital, but it reflects substantial savings and is competitive with the top medical tourist hubs including India and Thailand.

C. SELECT MESSAGE, BRAND AND SINGLE SOURCE

Two levels of marketing are needed: Jordan specific and hospital specific. It is essential to market Jordan as a safe destination with excellent facilities and friendly people. Absent this marketing, it is possible that a negative fear of the instability of the Middle East may preclude expansion into the distant medical tourist market. Additionally:

- introduce a formalized and shared tracking system of inquiries or medical tourists into Jordan to allow an understanding of which methods of promotion yielded the highest return
- formalize tracking so that the source of promotion bringing patients inquiring or receiving about medical treatment in Jordan or who decide to receive care in Jordan
- access high level photographers to ensure the branding suggests the high quality care available in country

¹⁸ Bookman and Bookman, referenced to Goodman, p 42

JORDAN MESSAGING AND BRANDING

To target the niche markets and gain Jordan exposure as a quality medical source, three messages and brands are suggested:

For the **Wellness** market:

Jordan

Destination *Health* – ancient secrets that promote wellness

(Insert a picture of the Dead Sea, or historic sight)

For the **Cosmetic Surgery**, restorative care market:

Jordan

Destination *You* – patient centered restorative care

(Insert a picture of a perfect face)

For the **Medical Tourist** market:

Jordan

Destination *Medical Excellence* – world class, patient-centered care, affordably delivered

(Insert a picture representing technology, medical delivery and possibly an international component)

Marketing communications can take place on different fronts:

1. **Direct Advertising:** using paid print media to expand the image of Jordan as a safe and affordable medical tourist destination. Successful advertising will maximize awareness of Jordan as a market, enable market leadership and enhance goodwill.
 - a. Advertise the message in two airline magazines, specifically, Royal Jordanian's "*Royal Wings*" and United Airlines' "*Hemispheres*." United Airlines offers a special advertising for three months at a cost of USD 75,000. As the first line of marketing is toward travelers open to a foreign experience with disposable income, this is an important channel to test.
 - b. Write an article for inclusion in the next "*Royal Wings*" on the developing field of Medical Tourism highlighting advantages in Jordan including success stories from past medical tourists.

- c. Create a short film on medical tourism in Jordan (possibly via JTB) and request airplay on Royal Jordanian flights (both boundary and distant). Seek opportunities to include this film in other venues including www.youtube.com and websites of organizations interested in providing quality care options.
- d. Advertise the same message in U.S. News and World Report – regular edition (one of the top magazines in US doctor offices.) (Estimated cost \$30,000)
- e. Advertise in Business Week (where articles on medical tourism appear) – regular edition (also available in US doctor offices as well as flights). (Estimated cost \$75,000 for a full page ad appearing in subsequent issues)

2. Stimulate interest in Jordan for medical tourism. The medical specialties available need to be promoted both in the region as well as in distant countries. This can be done through direct media as well as speaking engagements.

Initial branding should be targeted at the traveling public, persons interested in current events, and individuals of Arab descent. Initial recommendations include:

- a. Following the messaging, develop a series of posters branding Jordan in a similar font with full pictures of excellent quality. Focus on exposure in surrounding Arab countries (in Arabic), Russia (in Russian) and cities in the US with a strong Arab history (Chicago, New York, and Los Angeles). Specifically, have these exposed:
 - i. In Queen Alia Airport (Jordan)
 - ii. in the Royal Wings lounges in Chicago, New York, Los Angeles, Bahrain, Beirut, Jeddah, Doha, Dubai, Moscow
 - b. Contact the Intercontinental Hotel chain as it is active in the medical tourism space and may be interested in expanding knowledge of Jordan
3. Dialogue with critical quality groups in the US, and the EU with a focus on quality (NCQA, NICE, private insurers in the EU, self insured venues in the US), as well as qualified facilitators or third party administrators.

3. Individual sales/promotions are important. This includes presenting the value proposition to groups with certain needs, including wellness groups (yoga seminars, wellness events, dermatologist conventions), persons with limited healthcare options (including a link on websites for job searching (careerbuilder.com or indeed.com), as well as immigrants comfortable receiving care in a home country.

4. Short-term incentives may meet a short-term market need or impulse activity. Examples of this include working with hotels in Jordan to offer travelers a 30 minute medical exam with formal results that can be brought back to the home country. While this is an opportunistic approach and a “small win” it does promote the concept of Jordan as a clinical destination.

- a. Discuss short-term incentive options with the InterContinental Hotel chain (it is active in medical tourism).

HOSPITAL SPECIFIC MARKETING

Individual hospitals will need to review the market niches available and decide how best to position themselves. Specific steps include:

1. Determine market niche/market focus and populations to target. To enable this process, the following questions are offered.

To help hospitals define areas where they may focus international efforts, evaluate hospital infrastructure, and where gaps might exist

(check specialty/importance levels)	Extremely Important	Very Important	Important	Not as Important	Not Important
Invasive and non-invasive cardiac capability	1	2	3	4	5
Neurology focus	1	2	3	4	5
Orthopedic focus	1	2	3	4	5
Other specialty focus (define and clarify)					
Specific high tech solutions unavailable in other markets (i.e., IVF)					
Ability and interest managing concierge portion	1	2	3	4	5
Ability and interest collecting and reporting on medical tourism data into a single source (with other hospitals)	1	2	3	4	5
Ability and interest to work with international patients requiring concierge assistance and follow up	1	2	3	4	5
HIPPA compliant (for US clients requiring confidentiality)	1	2	3	4	5
Other: _____	1	2	3	4	5

Evaluate the answers to these questions and explore your specific value proposition

2. Identify competition in other markets
 - a. Compare hospital amenities
 - b. Compare websites

If you are competing on cost, evaluate the value proposition of other hospitals offering a similar product. Specifically:

3. Note the information that is included in the competitor website that is missing in yours, and vice versa

4. Identify the messages you send about your organization to reduce the factor of fear that is sometimes associated with medical procedures
5. Determine the comforts your target market(s) require including hotel-type amenities, language skills, proximity to hotels, etc.
6. Evaluate the languages for the website information
7. Create an "International Patient" site (in target country languages) on the hospital website with specific information geared to inform patient on expertise, safety, caring environment, and confidentiality.

Based on the information identified, expand your messaging and content to include answers to questions patients may have, photos of the hospital rooms, information on the level of technology, and so forth.

8. Identify a process to follow when an individual, tourist agent, Facilitator or even Third Party Administrator contacts the hospital for a patient visit
 - a. Perform due diligence on the partners
 - b. Document the source of the patient interest (which marketing channel(s) encouraged them to research Jordan as an option), follow up and results of the admission/treatment

Ensure that you have a Patient Advocate option, either with an international department in your hospital, or an external third party with the clinical experience to manage the many aspects of patient care.

Targeted messaging and pilot approaches will help identify effective marketing channels at a hospital specific level

D. SUMMARY

Marketing Jordan as a safe quality destination depends on effective distribution channels, hospital-defined market niche strategies, as well as data collection on the sources of information used to select Jordan as a medical destination. The action steps outlined in Section III will generate critical information to further refine the message, selected medium, and information on the impact of selected marketing techniques.

ANNEX 1: HEALTH CLIMATE CALCULATOR™ JORDAN APPLICATION

Application of the Health Climate Calculator™ for Jordan considered three specific aspects of equal weight. Three aspects were reviewed: Country Infrastructure, Health Economics, and Medical Tourism Applicability. These pillars are defined as follows:

Country Infrastructure: this aspect considers the general environment in the country. Core Elements are:

- Level of Economic Freedom (2009) (<http://www.heritage.org/index/Ranking.aspx>)

The Heritage Foundation is a conservative think tank working on public policy research and analysis. The level of economic freedom is related to strong economic performance, according to the organization. It reports that economies classified as free or mostly free do a better job promoting human development, reducing poverty and protecting the environment.

- o 100 to 80 Free
- o 79.9 to 70 mostly free
- o 69.9 to 60 moderately free
- o 59.9 to 50 mostly unfree
- o 49.9 to 0 repressed

- Corruption Index (2008)
(http://www.transparency.org/news_room/in_focus/2008/cpi2008/cpi_2008_table)

The Transparency International CPI (Corruption perceptions index) measures the perceived levels of public-sector corruption in a given country and is a composite index, drawing on different expert and business surveys. The 2008 CPI scores 180 countries on a scale from zero (highly corrupt) to ten (highly clean).

Perceived corruption in a market points to the potential for gray markets to develop to make sure things get done. Including this indicator provides an idea of the level of transparency and openness in a market, which has important relations to healthcare delivery.

Health Economics: Evaluates the resources allocated to health, the level of health infrastructure in the country

9. Beds/10,000
10. Total Health Expenditure as a percent of GDP

These access points highlight whether or not there are potential shifts occurring in a market interested in medical tourism. Problems accessing care (in general) in a medical tourist market points to potential “brain drain” and movement of providers away from the public sector. This

factor helps identify the need to craft policy on the development of funding to channel back into the public sector.

Medical Tourism applicability: the role of quality in the market in general and the elasticity of price

- Health expenditure per capita points to the elasticity of cost in general and helps identify groups where cost issues are at the fore
- Major infectious diseases present challenges in the care delivery and safety of patients from low-risk markets
- Primary care structures in-country point to a relatively sophisticated healthcare delivery system focused on efficiency and effective sharing of information
- Regulation of quality helps evaluate if countries are moving the entire health system, or only focused on the medical tourism perspective
- Levels of collaboration point to the use of incentives in the market to manage care efficiently and with the patient as an active medical consumer. Rankings from 0 (no effective incentives to manage care and limited contact between payers and providers except for reimbursement) to 4 (effective market incentives to manage care possibly with risk sharing; strong communication between the provider and payer on pre-authorization, agreement on treatment protocols, and possibly length of stay; effective management of provider licensing and required continuing medical education via government and medical associations)

It is critical to map the home and target countries to identify potential gaps. For example if a home country possesses strong primary care functions, and high levels of collaboration, and the target country does not, it will have to ensure a strategy to close those gaps.

In summary, the pillars can be summarized as follows:

Summary of HC² Pillars for Medical Tourism

Pillar	Definition	Supply (Jordan Hospitals)	Demand (Medical Tourists)
Country Infrastructure	This aspect considers the general environment in the country and evaluates factors including corruption levels, level of transparency, economic freedom, and general levels of protection	Transparent markets with low corruption levels are preferred. Jordan presents well on this score compared to competition	Quality expectations are very high when medical tourists hail from countries with higher scores than Jordan
Health Economics	The evaluation of resources allocated to health, the level of health infrastructure in the country, causes of mortality and general access issues	In Jordan the per capita spend on health is low compared to other countries (both boundary and distant). With equal or better quality and perceived level of care, this defines a major	The low per capita expenditure compared to other countries suggests strong attractive element to care

Pillar	Definition	Supply (Jordan Hospitals)	Demand (Medical Tourists)
		strength of the Jordanian market	
Medical Tourism Applicability	This pillar focuses on the role of quality in the market in general as well as specific to medical tourism (including Joint Commission accreditation). It includes an assessment of the collaboration levels (hospital to payer), as well as presence of FDA, and ability to map quality initiatives to other countries	This is the most relevant score in that it can be used to match market potential. For Jordan, it is positioned competitively	Medical tourists with higher levels of collaboration and quality initiatives (i.e, UK, US) are more active in medical consumers. Attracting them requires similar collaboration

Many factors were tested during the process of finalizing the scores. For example, population size, population density, HALE (health-adjusted life expectancy), health expenditure per capita, number of ante-natal care visits, population living below the poverty level, as well as HIV prevalence, were tested. While each of the factors is important in assessing a country, the inclusion of these scores did not substantially change the final score, and therefore were excluded.

Countries were selected based on two factors: (1) appearance in the Corruption Perception Index that is calculated by Transparency International (a Berlin-based group); then (2) matched to the Global Insight country listing which is a research-based information resource focused on important health markets, tracking health economics, country infrastructure, access to pharmaceuticals, etc.

ANNEX 2: AMERICAN MEDICAL ASSOCIATION APPROVAL FOR CPT CODES (ELECTRONIC FORMAT)

The American Medical Association manages use of the Current Procedural Terminology (CPT) codes by evaluating legal protections in each country. The list of current countries approved to use CPT coding in an electronic format follows:

United States and its territories the Commonwealth of Puerto Rico, Guam, the Virgin Islands, American Samoa, Wake Island, Midway Islands, Kingman Reef, and Johnston Island.

Argentina

Australia

Bahamas

Belgium

Bermuda

Brazil

Canada

Cayman Islands

Chile

Colombia

Ecuador

Guatemala

India

Ireland

Israel

Italy

Jamaica

Japan

Mexico

New Zealand

Norway

Panama

Portugal

Singapore

South Africa

Spain
Sweden
Thailand
Turkey
United Arab Emirates
United Kingdom England, Scotland, Wales, and Northern Ireland
United States and its territories
Venezuela

To request AMA approval for Jordan, the following legal issues require clarification. When finalized (typically by local Jordanian counsel), the information needs to be forwarded to the AMA for consideration.

1.1.1 Legal Opinion of Counsel for International Countries

The following are questions based on the laws of the specific country:

1. Is the database of CPT® protect-able under copyright or, alternatively other laws in the specific country and if so provide details of the precise statute(s) and how CPT would be protected? What is the nature of the protection? To what extent would the database be protected such as the data elements themselves or only the structure and organization of the database?
2. Does it make any difference to the protect-ability of the CPT in the specific country that it will be incorporated into a broader software package?
3. Are there any specific database protection statutes in the specific country pursuant to which CPT may be protected?
4. Are there any formalities which can/should be complied with in order to obtain copyright/database protection in the specific country? These might include filing the database for copyright registration. If so, please detail the precise procedure and costs.
5. To the extent that registration/deposit may be necessary or advisable, how and where does one go about registering/depositing the work in the specific country?
6. In the event that CPT will be used or adopted by any part of the government of the specific country for any reason, such as part of health care reimbursement procedures, does this make a difference? For example, does it affect the copyright-ability of the work or subject it to mandatory licensing under the laws of a specific country?

ANNEX 3:

QUESTIONNAIRES

Patient Satisfaction Questionnaire (upon discharge)

There are many surveys that have been tested for fairness and reliability. The following is the Short-Form Patient Satisfaction Questionnaire (PSQ-18) from the Rand Organization (http://www.rand.org/health/surveys_tools/psq/index.html)

One the following pages are some things people say about medical care. Please read each one carefully, keeping in mind the medical care you are receiving now. We are interested in your feelings, good and bad, about the medical care you have received.

How strongly do you AGREE or DISAGREE with each of the following statements:

(check specialty/importance levels)	Strongly agree	Agree	Uncertain	Disagree	Strongly disagree
1. Doctors are good about explaining the reason for medical tests	1	2	3	4	5
2. I think my doctor's office has everything I need to provide complete medical care	1	2	3	4	5
3. The medical care I have been receiving is just about perfect	1	2	3	4	5
4. Sometimes doctors make me wonder if their diagnosis is correct	1	2	3	4	5
5. I feel confident that I can get the medical care I need without being set back financially	1	2	3	4	5
6. When I go for medical care, they are careful to check everything when treating and examining me	1	2	3	4	5
7. I have to pay for more of my medical care than I can	1	2	3	4	5

(check specialty/importance levels)	Strongly agree	Agree	Uncertain	Disagree	Strongly disagree
afford					
8. I have easy access to the medical specialists I need	1	2	3	4	5
9. Where I get medical care, people have to wait too long for emergency treatment	1	2	3	4	5
10. Doctors act too businesslike and impersonal toward me	1	2	3	4	5
11. My doctors treat me in a very friendly and courteous manner	1	2	3	4	5
12. Those who provide my medical care (here) sometimes hurry too much when they treat me	1	2	3	4	5
13. Doctors (here) sometimes ignore what I tell them	1	2	3	4	5
14. I have some doubts about the ability of the doctors who treat me (here)	1	2	3	4	5
15. Doctors (here) usually spend plenty of time with me	1	2	3	4	5
16. I find it hard to get an appointment for medical care right away	1	2	3	4	5
17. I am dissatisfied with some things about the medical care I receive	1	2	3	4	5
18. I am able to get medical care whenever I need it (here)	1	2	3	4	5

Request demographics on the patient completing the form including:

1. Age
2. Gender
3. Home Country
4. Reason for traveling for medical care
5. Type of treatment received
6. Attending physician and hospital

11. Patient follow-up 7 days and 30 days post discharge
--

Once the patient has returned home, it's important to make sure that there have not been complications, or if there have been complications, that the patient is dealing with them. Two follow-ups are recommended, one 7 days after discharge and one 30 days after discharge. The following should be asked and recorded in the file

Questions	Explanation
1. Since you have returned home, have you had any complications or problems?	Listen to the patient and write down notes of any problems, or worries that the patient has had.
2. Have you seen your home doctor since you returned? Did you give him the notes from the treatment in Jordan?	If not, find out if the patient needs an additional copy of the material, or if he/she is worried about telling the home provider about the treatment
3. Was there something else about your treatment or procedure that you want to share with me?	This is a critical question and the wording is deliberate. When you ask "is there anything else" it may not elicit a response. When you ask specifically, "wasn't there something else" you may get additional information to help you create an improved patient experience

**USAID Jordan Economic Development Program
BearingPoint, Inc.
Salem Center, Sequleyah Street, Al-Rabiyeh
Amman, 11194 Jordan
Phone: + 962-6 550-3050
Web address: <http://www.SABEQ-Jordan.org>**