

Am Patient—Will Travel

Medical tourism creates opportunities for patients at home and abroad. By Nancy Christie



When most people think about what it means to be a tourist, they likely imagine traveling to another state or country to see the sights, spend time with friends and family, have new experiences and enjoy welcome downtime. But for a growing number of people, traveling—whether from this country abroad, from another country to the United States or across U.S. state lines—can literally be a life-or-death decision. These travelers, driven to seek out medical care they can't find at home, because of prohibitive cost or a lack of services or expertise, are fueling the trend in medical tourism and inspiring hospitals to provide a new category of services.

The United States: A Draw for International Patients

While many of us may have heard of medical tourism or medical travel in the context of U.S. citizens seeking treatment overseas, a growing number of international patients are coming to U.S. health facilities.

According to a 2009 report from Deloitte Center for Health

Solutions,¹ the growth of inbound medical tourism (foreigners visiting the United States to receive medical care), while relatively slow, is still expected to reach as many as 561,000 travelers in 2017, up from 417,000 in 2007.²

Josef Woodman, Founder and Chief Executive Officer of Patients Beyond Borders, which connects patients with the highest-quality, most affordable care worldwide, says that this trend reflects the long-held perception in the international community of the United States as a leader in global health care. “Since World War II and the mid-twentieth century, the United States has been rightfully perceived as the number one health-care destination for anyone who could afford it,” he notes. “We are part of an elite group of countries that offer the very top health care, academics, research and clinical practice medical care.” This reputation is especially important, Woodman says, for patients suffering from complex or advanced medical conditions, including cancer, spine issues, specialty orthopedics and pediatric conditions.

Elena Roman, Chief Operating Officer at Cancer Treatment



Centers of America® (CTCA) in Tulsa, Oklahoma, says that the reputation of health care in this country is well deserved, contrasting starkly with the care patients might be offered at home. “In the Caribbean, for example, [treatment for] breast cancer is still in its infancy,” she says, adding that treatment for other cancer types in many countries similarly falls short of what is offered in the United States. “With some of the conditions from Latin America that we’re seeing, such as pancreatic cancer, liver cancer, brain tumors and brain issues, patients find it difficult to get the right treatment at the right time.”

The relative efficiency and the comprehensive nature of care in the United States also draw foreign patients, says Roman. “In remote areas patients often have to travel to get imaging support or labs. That’s a big deal: the disconnection between the diagnosis and what needs to happen about that diagnosis.” At CTCA, she says, patients benefit from state-of-the-art diagnosis and treatment delivered under one roof. “Our turnaround times and time to treatment are very expedient and very comprehensive,” she says. “That’s an important point for anyone seeking care because they are going to have to travel a long way and they don’t want to have to wait for it—and they shouldn’t have to.”

Woodman says that “30 to 40 hospitals in the United States are responsible for the lion’s share of welcoming international patients.” These hospitals and treatment centers—catering to patients with a variety of medical issues, including heart health, cancer, pediatrics and neurology—include CTCA, the Cleveland Clinic, MD Anderson Cancer Center, the Mayo Clinic, Texas Children’s Hospital and New York-Presbyterian Hospital. While many patients choose a hospital based on specific expertise, Woodman says that geography also plays a role, with hospitals in south Florida and Texas drawing a greater share of the Latino and Hispanic market.

Travel Offers Patients Options

For Ajijic, Mexico, resident Ricardo O’Rourke, the choice of coming to the United States versus staying in Mexico for treatment for prostate cancer was initiated by his desire for a second opinion of how treatment should proceed. “When my doctors

[in Mexico] found out I had cancer, they wanted to operate,” he says. “But my friend Robert Mayo [CTCA Vice Chairman and Co-founder] suggested I come to CTCA in Tulsa for a second opinion.” Preferring the treatment option recommended by CTCA, Ricardo chose to have his treatment and all follow-up visits handled at CTCA.

The opportunity to explore other treatment options after a diagnosis leads many medical tourists to travel. This trend is in part the result of the fact that patients are increasingly treated by more than one doctor and can opt to be treated in multiple facilities. “Cancer is becoming a little more plug-and-play,” Woodman says. “The same doctor who gives you the diagnosis doesn’t necessarily have to give treatment.”

Las Vegas, Nevada, resident Cindy Aguilar also chose to travel; it involved a fairly short trip but offered great reward. After a visit with a breast specialist in her hometown in March 2011 revealed a lump, the specialist told her that it was not cancer and opted to drain the lump instead of proceeding with a biopsy. Several months later, Cindy learned that the lump was in fact breast cancer. Given her family history (several close relatives had been diagnosed with breast cancer), she requested a double mastectomy but was scheduled for another lumpectomy instead. Her only other option, she was told, was to wait until the surgeon and the plastic surgeon could coordinate their schedules to perform the double mastectomy.

Unwilling to delay treatment any longer, Cindy decided to travel across the state border to CTCA in Goodyear, Arizona. “By the time I had surgery at CTCA, the cancer had spread to two of my lymph nodes,” she says. Thrilled with the state-of-the-art treatment and the supportive atmosphere at CTCA, Cindy chose to receive all of her care in Goodyear.

Cindy stresses that the support—physical and emotional—offered to patients traveling to a facility distant from their



hometown who might feel isolated or afraid is key. Citing the many opportunities at CTCA, she says, “There is so much going on there that you don’t have to be alone if you don’t want to be.”

The Unique Needs of International Patients

A commitment to addressing the unique needs of medical travelers, especially international patients, is critical for treatment centers that want to continue to attract these patients. To compete on the increasingly global health-care stage, patients need to feel that all of their needs are being met. “You need a top-down commitment on the part of the hospital,” Woodman says. “Patients are becoming more demanding, and there are more options, particularly global ones, which may be much closer to home and perhaps more culturally friendly.”

Often the key differentiator is patient experience. “So many of our hospitals in the United States grew up exclusively around the clinical experience,” he says. “Now hospitals are learning to weave the patient experience into the fabric of the total care they offer the patient to obtain good results.”

According to Woodman, the most successful hospitals in terms of meeting the specific needs of foreign patients are those with established international patient centers that address language requirements, cultural and religious considerations and cuisine preferences. To that list Roman adds the presence of a robust naturopathic offering, including holistic medicine approaches and nutraceuticals.

Examples of the many ways that hospitals are striving to cater to international patients and create an excellent patient experience reflect the demand for these services. The International Patient Center at Massachusetts General Hospital in Boston, for instance, assists overseas patients with appointments, transportation, language interpretation services, financial arrangements and other administrative details. Mount Sinai Medical Center’s International Center in Miami, Florida, provides 24-hour translation services in more than 30 languages, assistance with financial and insurance concerns, travel arrangements including 24-hour emergency services and coordination of hospital, physician and diagnostic appointments, along with fulfilling any specific nutritional or spiritual needs.

Establishing services and developing programs dedicated to the patient experience requires understanding the specific requirements of foreign patients and educating staff about those cultural distinctions. Roman says that at CTCA this includes attention to the need for translation and bilingual services for Spanish-speaking patients, who make up the bulk of the hospital’s international patient body. “We have an emphasis on hiring bilingual staff, knowing the nuances of that culture and defining both the similarities and the differences—then providing cultural sensitivity training so we are optimally providing respect and compassion.” In addition to holding regular employee workshops related to the needs of foreign patients, CTCA hosts thought leader conferences and participates in national conferences, Roman says, “so we are sure to understand their needs as well as what we need to do to refine our processes to meet those needs.”

Given the importance of staff education, it’s essential that it comes from culturally appropriate sources, Roman adds. To meet the needs of its Hispanic clientele, for example, CTCA has turned to Latin American or Hispanic cultural public relations firms and entities, to faith communities and to businesses and Hispanic Chambers of Commerce to better understand the market. “We also talk to our patients, asking them, ‘What do you need? Are we meeting your needs? What is it that we’re not doing? What could we be doing better?’ And we ask our Stakeholders, ‘What could you have used to make that a better experience both for you as well as for the patient?’”

As a patient, Ricardo says, this type of support is key. “It’s pretty hard for people



U.S. PATIENTS ABROAD

According to the Deloitte Center report “Medical Tourism: Update and Implications,” more than 750,000 Americans traveled abroad for outbound medical care in 2007.³ Josef Woodman, author of *Patients Beyond Borders: Everybody’s Guide to Affordable, World-Class Medical Travel*, says the two primary reasons that drive the choice for overseas or across-the-border treatments are to obtain affordable care and to access a procedure that might not be authorized or legal in the United States or practiced widely.

But non-U.S.-based treatment doesn’t necessarily mean substandard diagnosis or care. “We’ve seen a shift with the rise of quality in health-care infrastructures and access to high-quality health care, particularly in Southeast Asia, north Asia, India, Singapore, Thailand, South Korea, Taiwan and Malaysia, where pricing and clinical outcomes are now competitive with the United States,” he says.

While seeking health care outside your home environment can be a good decision, medically and financially, there are some aspects to consider before packing your bag:

- **Disease and treatment options.** While those very identifiable conditions and procedures with highly predictable outcomes and relatively short recovery times might be appropriate for overseas treatments, a disease such as cancer is sometimes not ideal for medical travel, says Woodman, “because the diagnosis is complicated and the treatments tend to be spread over a long period of time.”
- **Facility and doctor accreditation.** Patients should verify that the international facility either is accredited by the Joint Commission International or has even more-rigorous internal standards, says Woodman. Also, “You want to make sure that you are in a country that has an established, robust health-care infrastructure. Then go the extra mile [and vet] the specialists, making sure they have great credentials and that they have kept them up with continuing education. Check for American board-certified physicians.”
- **Insurance coverage.** “Every year more and more insurance companies are including international hospitals and clinics in their health plans,” says Woodman. “That said, terms are different for each plan. So patients should absolutely ask the questions. Often these international hospitals have insurance offices with staff members who specialize in the various plans, so they can help with determining whether you are covered.”

when they come in and don’t know the language. They are scared and don’t know what’s happening—and they don’t know how they are going to pay. Health centers should give them all the information they can to make it a little easier for them.”

Patients Take the Lead

It is clear that patients considering medical travel have an increasing number of options, as hospitals around the world strive to attract this growing group. Those considering traveling for health care should do their research, says Woodman. “It pays for incoming international patients to shop around to reach a level

of comfort not only for what they are seeking clinically but also for the patient experience—the customer experience if you will.”

As health centers realize that patients are becoming more interested in seeking the best care, no matter the location, he says, they will continue to provide more information about their services, making research easier. Information—including clinical data, patient experience ratings and cost—are increasingly easily available, he says. “These kinds of ratings and rankings, which were unheard of 15 years ago, are becoming commonplace.” **CFThrive**

References

1. Recession Slows Growth of Medical Tourism from 2007-2009. Deloitte Center for Health Solutions. http://www.deloitte.com/view/en_US/us/press/Press-Releases/cb7614fabd184210VgnVCM200000bb42f00aRCRD.htm. Accessed February 18, 2013.
2. Medical Tourism: Consumers in Search of Value. Deloitte Center for Health Solutions. 2008. [http://www.deloitte.com/assets/Dcom-unitedStates/Local%20Assets/Documents/us_chs_MedicalTourismStudy\(3\).pdf](http://www.deloitte.com/assets/Dcom-unitedStates/Local%20Assets/Documents/us_chs_MedicalTourismStudy(3).pdf). Accessed February 18, 2013.
3. Medical Tourism: Update and Implications. Deloitte Center for Health Solutions. 2009. Available at: http://www.deloitte.com/assets/Dcom-UnitedStates/Local%20Assets/Documents/us_chs_MedicalTourism_111209_web.pdf. Accessed February 18, 2013.