



## **HEALTH IS ABOVE WEALTH - THE SCENARIO OF SELECTED CORPORATE HOSPITALS IN HYDERABAD, ANDHRA PRADESH**

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### **Abstract:**

*India has a wide variety of health care services available to its population. On the one extreme there are the high-technology hospitals and diagnostic centers (both private and public) in metropolitan cities, and on the other, one has village health guides, folk healers, faith healers and quacks in remote village. Between these two extremes there are district general hospitals (civil hospitals), private hospitals, 'trust' hospitals consulting and general private practitioner dispensaries and clinics (allopathic, Ayurveda and homeopathic...) rural/cottage hospitals, primary health centers and sub-centers.*

*Are there an adequate number of health care providers in India to meet the health care needs of the population? This is a difficult question to answer. If one looks at the official/published data then the aggregate ratios that emerge (doctor: population, bed: population etc..) reveal that there is a large shortfall when one considers any adequate minimum standard. For instance, in 1988 in India there was one allopathic doctor per 2300 population and one hospital bed per 1300 population (CBHI, 1989). As per the standards set by the Bhore committee in 1946 these ratios should have been 1:1600 and 1:175, respectively, distributed evenly all over the country (Bhore, 1946, III.3,4). For the figure of doctors if we consider the non-allopathic registered practitioners then we are well ahead of the Bhore Committee's recommendation today, the ratio being 1 doctor per 975 populations. Of course, this is not evenly distributed all over the country.*

*The major concern for corporate hospitals is on consumer satisfaction. In the service marketing, it is evident that just not that four P's, i.e. Product, Price, Place and Promotion play a vital role, but also other P's like People, Physical Evidence and Process play an important role in satisfying the consumer. Today, customer satisfaction is a growing field of research and teaching. An important reason for studying consumer satisfaction is evaluation of consumer groups with unsatisfied needs and desires. The essence of modern marketing concept is that all the elements of business should be geared for the satisfaction of consumers. Much has yet to be learned about what it means to be customer-focused in the health care industry. Ask any group of physicians "How do they define quality in health care?" and the following responses will be received.*

*In today's health care marketing, there is keen competition for the attention of the consumers in all fronts. The key task is not only providing specialized services more effectively and efficiently but also maintaining quality of overall services. Corporate Hospitals is a new breed of culture in health care industry in India. They have an age of more than a decade and half or so. This new culture has got its confluences with old culture of government hospitals and individualistic health care services. These hospitals are attracting a large number of patients, because of their multi and super specialties in nature.*

**Key Words:** Health Care services, customer satisfaction, corporate hospitals.

### **Introduction:**

Healthcare industry in India is an emerging industry as concern for health has become of utmost importance to all human beings. Often it is talked about speeding up the process of socio-economic transformation but less is done for human capital

formation. Even in an age of hi-tech, the proverb “**Health is above Wealth**” is found relevant. It is the responsibility of all the institutions related to health to provide medical facilities to the mankind. Today, the major emphasis in providing health care services is on Corporate Hospitals. The medical profession has widened its horizon worldwide and India is no exception. Corporate Hospitals are emerging as new breed in health care industry in India. These hospitals are attracting a number of patients because of their super-specialties. There is a keen competition among these hospitals for market share. The emphasis is not only to provide specialized services more efficiently and effectively, but also to maintain the quality of overall services.

The major concern for corporate hospitals is on consumer satisfaction. In the service marketing, it is evident that just not that four P’s, i.e. Product, Price, Place and Promotion play a vital role, but also other P’s like People, Physical Evidence and Process play an important role in satisfying the consumer. Today, customer satisfaction is a growing field of research and teaching. An important reason for studying consumer satisfaction is evaluation of consumer groups with unsatisfied needs and desires. The essence of modern marketing concept is that all the elements of business should be geared for the satisfaction of consumers. Much has yet to be learned about what it means to be customer-focused in the health care industry. Ask any group of physicians “How do they define quality in health care?” and the following responses will be recorded.

#### **Health Care in India:**

The Indian are becoming more and more health conscious. The following contribute for the growth of industry. The national average of proportion of household in the middle and higher middle-income group has increased from 14% in 1990 to 20% in 1996 and 42% in 2014.

Private insurance will drive the healthcare revenues. Considering the rising middle and higher middle-income group we get a conservative estimate of 200 million insurable lives. The population to bed ratio in India is 1 bed per 1000, in relation to the WHO norm of a bed per 300. In India, there exists space for 75000 to 100000 hospital beds. The Indian healthcare industry is worth Rs.100 billion today, and it is expected to grow by around 13% to 15% annually. Corporate Hospitals failed a decade ago because they emerged in isolation and were not part of a larger phenomenon. However, now there are the insurance companies, the hospital hardware and the software companies, which have come together to create the boom.

#### **Major Corporate Players in India:**

##### **The Apollo Group of Hospitals:**

The Apollo group is India’s first corporate hospital, the first to set-up hospital outside the country and the first to attract foreign investment. With 2600 beds, Apollo is one of Asia’s largest healthcare players. The recent merger between its 3 group companies, Indian Hospitals Corporation Ltd., Deccan Hospitals Corporation Limited and Om Sindoori Hospitals Limited, will help the group raise money at a better rate and by consolidating inventory; it will save around 10% of the material cost. The group is planning to invest Rs.2000 crore, to build around 15 new hospitals in India, Sri Lanka, Nepal and Malaysia.

##### **Fortis Healthcare:**

Fortis is the late Ranbaxy’s provender Singh’s privately owned company. The company is a 250 crore, 200 bed cardiac hospital, located in the town of Mohali. The company also has 12 cardiac and information centers in and around the town, to

arrange travel and stay for patients and family. The company has plans of increasing the capacity to around 375 beds and also plans to tie up with an overseas partner.

**MAX India:**

After selling of his stake in Hutchison Max Telecom, Singh has decided to invest around 200 crores, for setting up world class healthcare services in India. Max India plans a three tier structure of medical services-Max consultation and Diagnostic Clinics, Maxmed, a 150 bed multi-specialty hospital and Max General, a 400 bed hospital. The company has already tied up .with Harvard Medical International, to undertake clinical trials for drugs, under research abroad and setting up of Max University, for education and research.

**Escorts:**

EHIRC located in New Delhi has more than 220 beds. The hospital has a total 77 Critical Care beds to provide intensive care to patients after surgery or angioplasty, emergency admissions or other patients needing highly specialized management including Telecardiology (ECG transmission through telephone). The EHIRC is unique in the field of preventive Cardiology with a fully developed programme of Monitored Exercise, Yoga and Meditation for Life style management. Wockhardt & Duncan's Gleneagles International also has major expansion plans. This report is prepared by Mona Pundit and Parin Mehta of Sydenham Institute of Management exclusively for India Info line as part of their project curriculum.

In states like Maharashtra, Gujarat, Kerala and Andhra Pradesh, Private hospitals are 85-95% of the total hospitals in the state. Whereas in states like Rajasthan, Madhya Pradesh and Haryana, the private hospitals either do not exist or are a very small proportion of the total hospitals.

**Need and Importance of the Study:**

It was understood that there is a need for the study of health care services of corporate hospitals in India. Today, corporate hospitals have been making lot of attempts to satisfy the patient needs by providing a variety of multi-specialty services under one roof. The expectations of patients and attendants have undergone lot of changes; the strategies of corporate hospitals have been changing frequently in response to changing expectations of patients. The legal framework relating to health care sector has also been frequently amended; as a result, the corporate hospitals have to make necessary changes in their strategies relating to health care services.

Amidst this back drop, a couple of major questions emerge for consideration

1. To what extent corporate hospitals are trying to provide better and improved health care services?
2. What are the perceptions of patients towards health care services provided by the corporate hospitals?

An attempt is made in this study, to examine the above and to assess the problems and prospects of healthcare services in India, mainly based on the opinions and perceptions of the patients.

**Objectives of the Study:**

Through the broad objective is organization and working of corporate hospitals with reference to marketing of Health Services, the detailed sub objectives are as follows.

- To examine the healthcare scenario at National and A.P level.
- To study the organization and management of the study corporate hospitals.
- To review the literature related to the problem in question.

- To find out the patient perceptions toward the service quality of the study hospitals during the different stages of patient itinerary process.
- To measure the patient satisfaction with the services of the study corporate hospitals.
- Finally, to offer appropriate suggestions for effective functioning and marketing of Health Services.

**Sources and Method of Data Collection:**

Both primary and secondary sources are used to collect the data. The information relating to the profile of hospitals, healthcare sector in India is obtained from secondary sources. The information relating the views of patients on the qualities of services offered by the selected hospitals is obtained through a structured questionnaire. An interview schedule is administrated to know the problems faced by the hospital administrators in providing qualitative services to patients.

**Sample Design:**

Four of the most popular corporate hospitals in the Hyderabad city are selected for having a comparative study between the first two hospitals and the next two.

- (i) Apollo Hospital
- (ii) Yashoda Hospital
- (iii) Medicity Hospital
- (iv) Care Hospital

The first two hospitals were established during 1980's and the remaining two were established after 1995. Moreover the first two hospitals got rich corporate profile compared to the next two, in terms of number of beds, staff, department etc. The table.1 shows the particulars.

b) A sample of 200 patients, representing 100 from each of the two sample hospitals i.e. Medicity and Care Hospital is taken for study.

**Comparative details of the four hospitals in Hyderabad**

S. No	Name of the Hospital	Year of Estd.	Hyd Bed Count	No. of Dept/ Specialties	Staff Particulars		Staff to Patient Ratio	
					Doctors	Nurses	Non Intensive	Intensive
1	Apollo Hospitals	1988	1000	50	1000	6500	1 : 3	1 : 1
2	Yashoda Hospitals	1989	1200	62	600	1100	1 : 3	1 : 1
3	Medicity Hospitals	1996	225	30	130	250	1 : 3	1 : 1
4	Care Hospitals	1997	772	40	200	1000	1 : 3	1 : 1

**Data Analysis:**

The questionnaire consists of different questions represented on 5 point scale. Averages with percentages for each question for all four hospitals have been tabulated and analysed. A detailed interpretation wherever necessary has been given.

Statistical tools like Chi-square, Factor Analysis and Multiple Regression Analysis have been used for data analysis using SPSS 8.0. Multiple Regressions is used to understand about dependent variable, i.e. satisfaction and the influence of independent variables on the dependent variable. Factor Analysis is conducted to analyze the data and reducing the data in to a few numbers of factors.

**Limitations of the Study:**

- The size of the sample selected for the study constitutes only a small segment of the population.
- It is a cross sectional study, which does not permit the researcher to go for comparison of quality of services over a period of time.
- As the study is conducted in the Corporate Hospitals situated in Hyderabad, the study may have the limitation of generalizing the findings of entire industry of Corporate Hospitals in A.P.

**Findings of the Study:**

**Age and Sex wise distribution :**

The information on age and sex of sample respondents of Mediciti hospital is furnished in the Table-1.

**Table 1. : Age and sex wise distribution**

S.No	Age Group (in Years)	Mediciti		Care	
		Male	Female	Male	Female
1	Below 20	5	9	9	3
2	Between 21 – 40	24	11	19	12
3	Between 40 – 60	30	16	17	21
4	Above 60	01	04	15	04
	<b>Total</b>	<b>60</b>	<b>40</b>	<b>60</b>	<b>40</b>

**Source: Field Survey**

The sample drawn from the two hospitals is 100 respondents each out of which 60 percent respondents are male and 40 percent are females. Maximum numbers of respondents are in the category between the age group of 41-60 with 46 percent. Amongst males too the same category accounts for half of the respondents, similarly, amongst females too, the same age category accounts for 46 percent of the respondents followed by 21-40 years category with 35 percent. The least are in the age group of 61 and above in both the categories.

**Table: 2. Income and Occupation**

S.No	Income Group (in Rs.)	Mediciti				Care			
		A	B	C	D	A	B	C	D
1	Less than 60,000	2	1	2	4	2	2	2	2
2	Between 60,000 – 1,20,000	4	3	2	9	2	6	1	3
3	Between 1,20,000 – 1,80,000	9	6	-	6	7	11	4	11
4	Between 1,80,000 – 2,40,000	11	7	4	6	5	7	3	5

5	Above 2,40,000	9	10	2	3	3	14	4	6
	<b>Total</b>	<b>35</b>	<b>27</b>	<b>10</b>	<b>28</b>	<b>19</b>	<b>40</b>	<b>14</b>	<b>27</b>

**Source: Field Survey**

35 percent of sample respondents were form Service category followed others category (student, house-wife, retired person) with 28 percent. Business people accounted for 27 percent with the rest 10 percent being from agriculture background.

28 percent of the same respondents were form the income bracket of 1,80,001 to 2,40,000 and the least were from income bracket less than 60,000 with 9 percent. The highest percentage across the table was 31 percent in income bracket of 1,80,001 to 2,40,000 and the sample respondents were from service category.

**Table: 3. Source of Information about the hospital**

S.No	Particulars	Mediciti	Care
1	Family physician	24	20
2	Friends & relatives	23	21
3	Specialist	34	31
4	Own	9	10
5	Others	10	18
	<b>Total</b>	<b>100</b>	<b>100</b>

**Source: Field Survey**

34 percent of the respondents were advised by the Specialist, 24 percent were advised by family physician. 23 percent by friends and relatives, 9 percent came on their own while 10 percent were guided by others to approach the study hospital.

**Satisfaction at reception stage:**

The information related to satisfaction of respondents with various sub-stages at reception stage is furnished in Table-4.

**Table 4. : Satisfaction at reception stage-respondents opinion**

S.No	Particulars	Respondents	
		Medicate	Care
1	Excellent	18	22
2	Good	31	31
3	Fair	39	40
4	Poor	8	04
5	Very poor	4	03
	<b>Total</b>	<b>100</b>	<b>100</b>

**Source: Field Survey**

The percentage of respondents who thought the reception services are fair was maximum with 39 percent, followed by good with 31 percent, excellent with 18 percent, 8percent were not happy with the reception services and said the services are poor and 4 percent of the respondents were not at all happy and stated the services at the reception were very poor.

Poor and Very poor put together accounts to 12 percent of the sample respondents which is relatively high. Hence, it is suggested to the study hospitals take

corrective measures at various sub-stages of the reception stage and satisfy the patients.

During the second stage of Patient itinerary process, i.e. Reception Stage, a detailed analysis with the help of Chi-Square was applied to understand whether the differences are significant or not. There is no significant difference between observed frequencies as well as expected frequencies. The results of Chi-Square are given below.

**Table: 5. Statistical Analysis Table**

S.No	Descriptors	1	2	3	4	5	Total	Chi-Square
1	Convenience to get pass	17	43	32	05	03	100	59.8
2	Staff Explaining Procedures	13	45	31	07	04	100	61.0
3	Friendliness of Staff	11	36	43	6	04	100	65.9
4	Waiting time	02	03	15	35	45	100	84.4
5	Easiness of forms	30	33	26	07	04	100	36.5
6	Satisfaction	18	31	39	08	04	100	44.3

**Source: Field Survey**

**Note:**

**Convenience To Get Pass:** 5 is very inconvenient; 4 is inconvenient; 3 is somewhat convenient; 2 is convenient and 1 is Very Convenient.

**Staff Explaining Procedures, Friendliness of Staff, Easiness of filling Forms and Satisfaction at Reception:** 5 is Very Poor; 4 is poor; 3 is fair; 2 is good and 1 is Excellent.

**Waiting Time:** 5 is Very little time; 4 is little time; 3 is not very long time 2 is long time and 1 is Very long time.

The calculated value of Chi-square is higher than the table value at 0.05 level of significance. Hence, the null hypothesis is rejected for all the descriptors.

To understand further about the dependent variable, i.e. satisfaction and the influence of independent variables on the dependent variable, Multiple Regression analysis is conducted.

**Satisfaction at Reception Stage:**

For the purpose of assessing the satisfaction at Reception stage of patient itinerary process at Apollo Hospital, all the variables except satisfaction at Reception stage have been considered as independent variable and satisfaction as dependent variable.

**The results of Multiple Regression analysis are given below:**

R <sup>2</sup>	: 0.923
SE	: .1537
Observations	: 100
Degree of freedom	: 93
t Value	: 1.960
X-Coefficient	: .464,.0221,.606,.06702,.142,-.0446
Standard Error	: .133,.137,.205,.607,.058,.108
t Value	: 3.48,.1613,2.956,1.02,2.448,-.4074
X1	: convenience of getting pass
X2	: Staff explaining procedures
X3	: Friendliness of Staff
X4	: Waiting time

- X5 : Easiness of forms
- X6 : Satisfaction

Regression analysis of the data of variables at Reception Stage reveals that X1.X2, X3 and X4 indicate positive relationship with the dependent variable and X5 indicate negative relationship with the dependent variable.

R<sup>2</sup> value is .923 which explains that independent variables are able to explain the variation in the dependent variable, i.e. satisfaction to the extent of 92.3 percent. The t Values for all variables are significant.

So it is very important that the above 5 variables at the reception stage should be given more importance to increase the perceived satisfaction of the patients.

**Examination Stage:**

**Attention paid by Doctors:**

The responses related to attention paid by doctors are given in the following Table-6.

**Table 6: Attention paid by Doctors-respondents opinion**

S. No	Particulars	Mediciti	Care
1	Excellent	17	24
2	Good	36	41
3	Fair	37	30
4	Poor	7	3
5	Very Poor	3	2
	<b>Total</b>	<b>100</b>	<b>100</b>

**Source: Field Survey**

Majority of the respondents in Mediciti felt the attention paid by the doctors was fair with a percentage of 37, followed closely by good with 36 percent, excellent with 17 percent, 7 percent of the respondents felt that doctors did not pay any attention at the time of examination and rated them as poor while 3 percent were of the opinion that they were not paid any attention by the doctors rating them as very poor.

**Friendliness of doctors at Examination:**

The respondents were asked on the friendliness of doctors at the examination. The respondent's opinion is given below in Table-7.

**Table 7 : Friendliness of doctors-respondents opinion**

S.No	Particulars	Mediciti	Care
1	Excellent	15	16
2	Good	40	38
3	Fair	40	40
4	Poor	3	4
5	Very Poor	2	2
	<b>Total</b>	<b>100</b>	<b>100</b>

**Doctors explaining instructions:**

The respondents were asked how the doctors have explained the instructions. The responses are furnished in the following Table-8..

**Table 8 : Instructions by doctors-respondents opinion**

S.No	Particulars	Respondents	Percentage
1	Excellent	16	16
2	Good	31	31
3	Fair	42	42
4	Poor	07	07
5	Very Poor	04	04
	<b>Total</b>	<b>100</b>	<b>100</b>

**Source: Field Survey**

With regard to doctors explaining instructions, 42 percent of them said it was fair, 31 percent said it was good, 16 percent of the respondents said it was excellent, 7 percent of them said it was poor and 4 percent of the sample respondents were not at all happy with the explanation of instructions by doctors and rated them as very poor.

Poor and Very poor put together accounts to 11 percent of the sample respondents. Therefore, it is advised that the doctors should take special care with all the patients and explain the instructions in a proper manner.

**Overall satisfaction:**

The information related to overall satisfaction with various sub-stages at the examination stage is presented in the following.

**Table 9 : Overall satisfaction with examination**

S.No	Particulars	Respondents	Percentage
1	Excellent	14	14
2	Good	35	35
3	Fair	43	43
4	Poor	07	07
5	Very Poor	01	01
	<b>Total</b>	<b>100</b>	<b>100</b>

**Source : Field Survey**

43 percent were fairly satisfied, 35 percent of the respondents were satisfied and rated as good, 14 percent were very much satisfied and rated as excellent, 7 percent were not satisfied and rated as poor and 1 percent of the sample respondents was not at all happy with the examination process and rated as very poor.

During the third stage of Patient itinerary process, i.e. Examination Stage, a detailed analysis of Chi-Square was applied to understand whether the differences are significant or not. There is no significant difference between observed frequencies as well as expected frequencies. The result of Chi-Square is given below.

**Table 10. Statistical Analysis Table**

S.No	Descriptors	1	2	3	4	5	Total	Chi-Square
1	Attention paid by doctors	17	36	37	7	3	100	50.6
2	Friendliness of doctors	15	40	40	3	2	100	71.9
3	Instructions by doctors	16	31	42	7	4	100	52.3
4	Satisfaction with examination	24	30	39	4	3	100	51.1

	Time							
5	Physical Comforts	14	39	41	4	2	100	70.9
6	Cleanliness	15	35	45	4	1	100	74.6
7	Friendliness of Staff	14	37	40	8	1	100	61.5
8	Overall Satisfaction	14	35	43	7	1	100	66.0

**Note:** 1 is excellent; 2 is good; 3 is Fair; 4 is poor and 5 is very poor

**Source: Field Survey**

The calculated value of chi-square is higher than the table value at 0.05 level of significance. Hence, the null hypothesis is rejected for all the descriptors.

**Satisfaction at Examination Stage:**

For the purpose of assessing the satisfaction at Examination stage of patient itinerary process at Mediciti Hospital, all the variables except satisfaction at Examination stage have been considered as independent variable and satisfaction as dependent variable.

**Multiple Regressions is carried out and the results of the same are given below:**

- R<sup>2</sup> :0.817
- SE :.181
- observations : 100
- Degrees of freedom : 91
- t Value : 1.960
- X-Coefficient : .0570,-.121,.122,.121,-.0623,.561,-.452,.0454
- Standard Error : .0672,.104,0.52,.101,.2312,.140,.143,.110
- t Value : .848,-1.163,2.346,1.198,-0.269,-3.160,.4127
- X1 : Attention paid by Doctors
- X2 : Friendliness of Doctors
- X3 : Instructions by Doctors
- X4 : Satisfaction with Examination time
- X5 : Physical Comforts
- X6 : Cleanliness
- X7 : Friendliness of Staff
- X8 : Overall satisfaction

Regression analysis of the data of variables at Examination stage reveals that X1, X2, X3, X5, and X6 indicate positive relationship with the dependent variable and X4 indicate a negative relationship with the dependent variable.

R<sup>2</sup> value is .817 which explains that independent variables are able to explain the variation in the dependent variable, i.e., satisfaction to the extent of 81.7 percent. The t values for all variables are all significant.

So it is very important that the above 7 variables at the Examination stage should be given more importance to increase the perceived satisfaction of the patients.

**Attention Paid by staff:**

The responses related to attention paid by staff at Pathology Lab are given in Table -11.

**Table 11 : Attention paid by staff-respondents opinion**

S.No	Particulars	Respondents	Percentage
1	Excellent	16	16
2	Good	27	27

3	Fair	43	43
4	Poor	10	10
5	Very Poor	04	04
	<b>Total</b>	<b>100</b>	<b>100</b>

**Source: Field Survey**

With respect to the attention paid by staff at pathology lab, it is obvious from the above, that majority of the respondents were of the opinion that the attention paid by staff was fair with 43 percent followed by good with 27 percent, excellent with 16 percent, poor with 10 percent and 4 percent of the sample respondents said that the attention paid by staff was very poor.

Poor and Very Poor put together total to 14 percent of the sample respondents which is at a very higher side, Therefore it is advised to the study Hospital that the staff should be informed to be very attentive with the Patients as well the Patients as well as the Visitors.

**Suggestions:**

1. As the patients who visit the hospitals are in the age group of 40 and above, the hospitals should focus their attention on improving the medical care and design proper health schemes to benefit the above group of population.
2. It may be suggested that the corporate hospitals are advised to exploit the income range of below Rs.1,00,000 and are required to come out with lot of value added services like loyalty packages, family packages and other health schemes to attract the population with below Rs.1,00,000.
3. The sample hospitals should focus on the suitable marketing approaches and practices. As a part of marketing philosophy, the supporting staff and technician should be given advanced training related to behavioral aspects such as courtesy and empathy in dealing with patients to become more patients friendly.
4. The study hospitals are advised to take necessary care in relation to staff and to motivate them to give proper answers to the queries raised by the patients. Educating patients on various aspects related to disease and treatment is very much necessary for the improvement of image of the hospitals.
5. The study hospitals should take necessary steps to reduce the dissatisfaction resulting from general amenities like seating arrangements, drinking water, parking and general hygienic conditions.
6. Health management packages can be provided by hospitals to family and corporate world. For example Family Health Plan Services (FHP), a subsidiary of Apollo Hospitals carries out health management of employees of its clients in the industry, with a wide network of Hospitals and Healthcare providers countrywide, and a tie - up with General Insurance Corporation of India. Other corporate hospitals are advised to follow the example of Apollo and come out with unique health management packages.

**Conclusion:**

In the age of hyper competition now a day's all business organizations are competitive with one another in creation of good and reasonable infrastructure facilities and well as trained staff. Therefore the data and opinions of the respondents representing all the four hospitals are more or less common identical and closely related. To sum up, there was no significant difference found in the performance and

efficiency between the two sample groups of hospitals. The satisfaction levels of the patients in all the four samples also were more or less identical.

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