

# Healthcare METAmorphosis

26-27 OCTOBER, 2023 | FICCI, New Delhi

RECOMMENDATIONS & HIGHLIGHTS





October 26-27, 2023 | FICCI Federation House

## “Healthcare METAmorphosis”

FICCI (Federation of Indian Chambers of Commerce and Industry), India’s apex industry chamber, has been organising its annual healthcare conference, FICCI HEAL, since 2007. Over the years, this has evolved as a landmark event and a credible platform for health industry stakeholders for sharing knowledge and best practices.

The **17<sup>th</sup> edition of FICCI HEAL** was held on October 26 & 27, 2023 at FICCI Federation House, New Delhi. The central theme of the conference was ‘**Healthcare METAmorphosis**’. The Conference was supported by Ministry of Health & Family Welfare, NITI Aayog and National Health Authority, Government of India.

India's healthcare system has experienced a profound metamorphosis, witnessing remarkable advancements and transformations in recent years. From a modest healthcare infrastructure to becoming a beacon of medical advancements, India has made significant strides in improving healthcare access, quality, and affordability.

The transformation is visible in multiple dimensions. India has witnessed a substantial increase in healthcare facilities, with the establishment of state-of-the-art hospitals, clinics, and specialized healthcare facilities across the country. The private hospital sector in India was valued at INR 11,606 Bn in FY 2022. It is expected to cross INR 26,000 Bn by FY 2027, expanding at a CAGR of ~18.60%. Additionally, new and innovative models of healthcare delivery are being witnessed, whether it is out of hospital care, self-care, novel PPPs or digital as well as hybrid clinics, enabling more patient-centric and comprehensive care delivery across the spectrum.

Further, there has been a surge in medical research and development, with Indian scientists and researchers making ground-breaking discoveries and contributions to the medical field. Indian government has played a pivotal role in driving healthcare reforms and policies to address the unique challenges faced by the sector.

Technological advancements have revolutionized healthcare delivery in India. The widespread adoption of telemedicine and digital health solutions has bridged the gap between doctors and patients, enabling remote consultations, diagnosis and monitoring, especially in underserved areas. The digital healthcare market in India was valued at INR 525 Bn in 2021 and is expected to reach INR ~2,500 Bn by 2027. Emerging technologies under the metaverse, including AI, VR and blockchain are further metamorphosing healthcare, driving us towards precision and personalised medicine.

Furthermore, the pharmaceutical and medical device industries have witnessed exponential growth, fostering innovation, and creating opportunities for domestic manufacturing and exports. India has emerged as a global hub for generic drugs and has made significant progress in developing indigenous medical devices.

This ongoing metamorphosis reflects India's dedication to improving the healthcare ecosystem that will help position itself as a global leader in the healthcare domain. Despite these achievements, challenges persist.

Healthcare infrastructure gaps, regional disparities, and the need to enhance healthcare affordability for all segments of society are ongoing priorities and require continued attention.

**FICCI HEAL 2023** was an endeavor to converge all stakeholders- national and international, and provide a **forum for sharing of learnings and experiences as well as deliberate on the strategies and opportunities for future healthcare metamorphosis**. The conference was a conglomeration of CEOs, policy makers, national and international leaders from healthcare and allied industries.

Past conferences have been graced by distinguished dignitaries like Hon’ble President of India, Mr Pranab Mukherjee; Hon’ble Vice President of India, Mr M Venkaiah Naidu; Hon’ble Vice President of India, Mr Jagdeep Dhankhar; Dr Scott Atlas, Special Advisor to the President of the United States; Member, White House Coronavirus Task Force and Robert Wesson Senior Fellow, Hoover Institution, Stanford University, USA; Prof Richard C Horton FRCP FMedSci, Editor-in-Chief, The Lancet and many other eminent personalities.

**FICCI HEAL 2023 Sessions and FICCI Healthcare Excellence Awards can be viewed at the below YouTube links:**

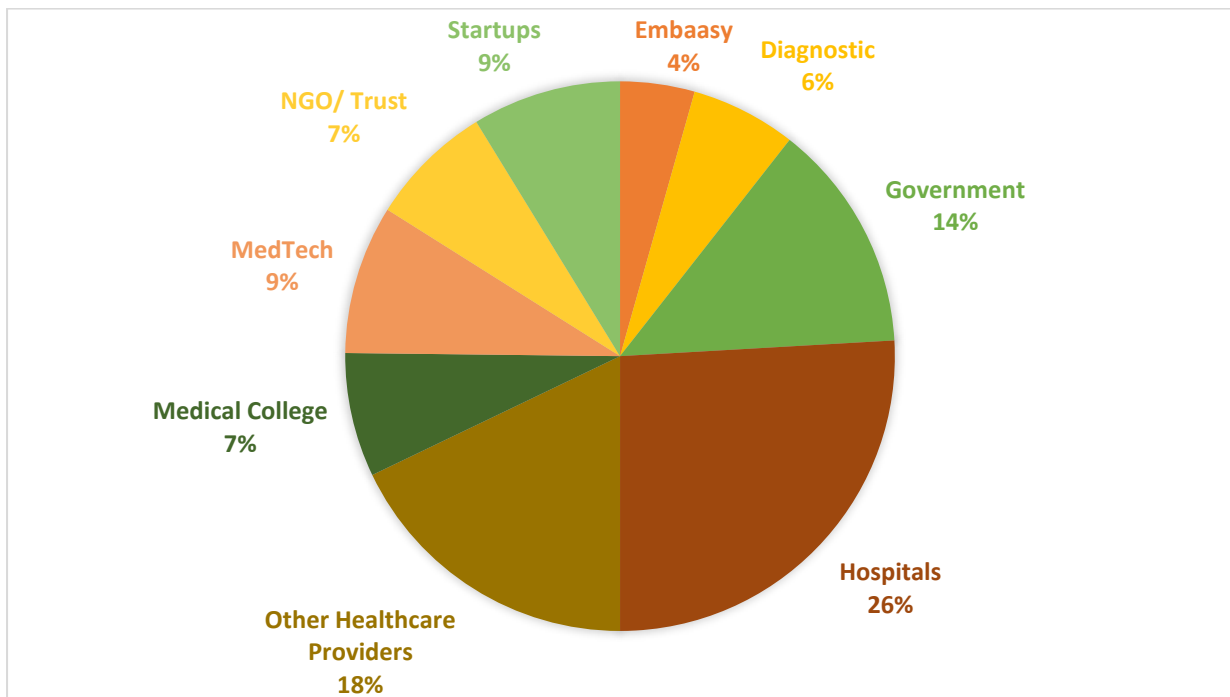


**Day 1- October 26, 2023:** <https://bit.ly/HEAL2023-Day1>

**Day 2- October 27, 2023:** <https://bit.ly/HEAL2023-Day2>

**FICCI Healthcare Excellence Awards 2023:** <https://youtu.be/29H2LDN1cSA>

### Participation at FICCI HEAL 2023



Day 1- October 26, 2023

## Inaugural Session

**Prof S P Singh Baghel**, Hon'ble Minister of State for Health & Family Welfare, Government of India inaugurated the 17<sup>th</sup> edition of **FICCI HEAL 2023**. In his address, he shared that the government is working towards providing last mile coverage to provide health services to remote areas in the country.

He further said that under the Ayushman Bharat Digital Mission (ABDM), the government, through telemedicine, is also trying to provide medical coverage to citizens who cannot access affordable healthcare. He emphasised that there is a need to address the healthcare concerns of Indians who are not able to access quality healthcare.

Speaking on the success of Ayushman Bharat Program, Prof Baghel stated that over Rs 70,000 crore have been utilized under the PMJAY scheme to promote affordable healthcare in India. He informed that till date over 1.80 crore Ayushman cards and 2.31 crore Ayushman Bharat Health Account (ABHA) IDs have been created.

Prof Baghel urged all the private hospitals to get empanelled under AB-PMJAY and advised FICCI to organise a consultative meeting with healthcare providers, empanelled under AB-PMJAY, with the Health Ministry officials to deliberate on the concerns and issues of the industry.

Further, the Hon'ble Minister emphasized on the need to promote organ donation and blood donation through massive campaign and urged the industry to come forward to play a lead role in developing videos and educational communication for this campaign.

Highlighting the importance of Jan Aushadhi centres, Prof Baghel also underscored the need to promote more affordable and generic medicines while prescribing to patients.

**Dr Ajay K Singh**, Senior Associate Dean for Postgraduate Medical Education; Director, MMSCI, Harvard Medical School, gave the Keynote Address on **"Leadership- insights on capacity building and scalability in Healthcare"**.

During his address, Dr Singh highlighted key global challenges in healthcare, including the rapid advances in medical research and innovation, increased longevity, growing demand for healthcare, rising costs, and workforce constraints.



His address provided valuable insights into the urgency of rapid transformation to enhance healthcare access. He specifically emphasized the pivotal role of AI in addressing gaps and fostering scalability. Furthermore, he revealed that the leading healthcare institutions in the USA are allocating an average of 1 billion dollars towards AI and AI solutions. He also highlighted that the most remarkable growth in technology start-ups and investments is occurring within the AI domain, not only in healthcare but across various sectors.



He said, “While India is one of the largest providers of technology solutions particularly in service areas globally, unfortunately in AI it still lags behind and that is being recognised by the government and that is where challenges lie in the future”. He also presented a dataset that indicated there has been a multiplier from a four-fold growth in GDP per century to a twenty-fold growth in GDP per century.

He recommended a crucial solution for enabling and upskilling the healthcare workforce by equipping them with fundamental knowledge of AI and machine learning. Additionally, he highlighted the development of new AI-enabled algorithms, including US FDA-approved algorithms, that assist healthcare organizations, hospitals, imaging centers, and diagnostic labs in screening. Generative AI predictions can be widely leveraged in identifying vulnerable patients, simplifying billing procedures, and streamlining the healthcare process. These predictive technologies will not only enhance access to healthcare but also provide timely and accurate treatments.

Furthermore, he mentioned that by 2025, AI is anticipated to generate three times more investments in terms of revenue, and by 2030, it is expected to contribute 15.7 trillion dollars to the world economy.

**Dr Harsh Mahajan**, Chair, FICCI Health Services Committee and Founder & Chief Radiologist, Mahajan Imaging and Labs, in his **Theme Address**, said that “the ‘METAmorphosis’ in healthcare is deeply rooted in the adoption of emerging technologies such as artificial intelligence, genomics, and precision medicine, which are revolutionizing diagnosis, treatment, and healthcare management”. He added, “these technological advancements are also driving unprecedented improvements in patient care, drug discovery, and healthcare research. They demand that we consider the ethical, legal, and social implications of these advancements, and ensure that healthcare remains accessible, equitable, and compassionate”.

**Dr Narottam Puri**, Advisor, FICCI Health Services and MVT Committees; Principal Advisor- QCI; Board Member & Former Chairman – NABH; Advisor- Medical Operations, Fortis Healthcare Ltd said, gave the **Welcome Address** and mentioned, “At a time when lifestyle disorders are on a rise, technology-backed public and private affordable healthcare is the only solution to confront the new pool of diseases. The future healthcare- its service design and delivery require reimagining healthcare—making it more personal, collaborative, and integrated, enabled by digital capabilities.”

**Dr Sanjeev Singh**, Co-Chair, FICCI Health Services Committee; Medical Director, Amrita Institute – Faridabad and Chief Medical Superintendent, AIMSRC Kochi also shared his perspective on the healthcare sector in India and gave the **Vote of Thanks**.

**(Hony) Brig Dr Arvind Lal**, Chair, FICCI Swasth Bharat Task Force; Executive Chairman, Dr Lal PathLabs and Managing Trustee, ALVL Foundation and **Dr Mahesh Joshi**, Co-Chair, FICCI Health Services Committee and President & CEO, Apollo Homecare, were also present on the occasion.

## Release of FICCI-KPMG Knowledge Paper

### **'New age healthcare delivery models in India'** - 20 plus models to redefine healthcare landscape

The healthcare sector has long been defined by its conventional delivery pathways and the traditional value chain, and while it has steadily evolved over the years, the change has been gradual. However, the sector is presently undergoing a transformation at an unprecedented pace, and various key factors are at the helm of this ongoing metamorphosis. Technology is now being accepted, adopted, and leveraged by multiple stakeholders such as healthcare institutions, professionals, and patients. This has resulted in a shift towards remote healthcare delivery, collection and utilisation of healthcare data, enhanced accessibility, operational efficiency, and personalised care. Another key factor driving the change in the industry is the evolving role of patients from dormant participants in the industry to active and aware consumers.

To deep dive into the evolving healthcare system in India and the emerging new models of service delivery, FICCI and KPMG in India released a report titled *'New age healthcare delivery models in India - 20 plus models to redefine healthcare landscape'* at FICCI HEAL 2023. The report provides an overview of the key factors and systemic issues that are shaping the trends in the industry and resulting in the emergence of new age delivery models. The report then maps more than 20 such models across the four key stages of the healthcare value chain.

- Starting with **self-care**, the new models are enabling preventive healthcare by empowering individuals with the knowledge and tools to work towards overall health and wellbeing. Digital platforms and resources provide individuals with comprehensive health information, enabling them to make informed decisions about their well-being. Tracking devices and health screening tools have empowered individuals to take a proactive role in their health, allowing for continuous monitoring and early detection of potential health issues. Fitness and wellness programmes have become mainstream, encouraging healthier lifestyles and preventive healthcare practices.
- In **primary care and referral management**, the emerging models have expanded healthcare accessibility, especially in remote and underserved areas, often leveraging tele-health services. Specialised care clinics, equipped with advanced diagnostic tools and expert healthcare providers, have streamlined the diagnosis and treatment process, ensuring quicker and more accurate healthcare delivery. Smart diagnostics and healthcare aggregators have further optimised healthcare access, providing patients with convenient and efficient ways to seek medical advice and treatment options. At the same time, care coordinators are playing a pivotal role in enhancing patient experience by ensuring seamless care coordination and personalised support.
- **Hospital care** has witnessed diversification with the emergence of small healthcare organisations and health and wellness retreats, in addition to multi-specialty hospitals, super-specialty facilities, and single-specialty clinics. These institutions cater to a wide range of medical needs and have become integral components of the healthcare landscape. They offer specialised care and advanced treatments, enhancing the overall quality of healthcare services available to the public.
- **Post-hospitalisation care**, including home healthcare, remote health management, rehabilitation, and long-term care, has addressed critical aspects of patient recovery and wellness. Home healthcare services have gained prominence, allowing patients to receive medical attention and support in the comfort of their homes, reducing the burden on hospitals.

The report then delves into key recommendations across 10 thematic areas for providing an enabling environment to these emerging models and ensuring that they flourish and thrive as a part of the Indian healthcare ecosystem. The key thematic areas of recommendations are:

- Leveraging the changing consumer behaviour and need for self-care/on-demand care
- Increased community engagement
- Focus on population health management
- Engaging with new avatars of providers
- Focus on healthcare financing
- Leveraging digital technology and data-driven care
- Increased collaborations and shift towards integrated care
- Preparing the future healthcare workforce
- Introducing sectoral reforms
- Promotion data protection and data security

[Click here](#) to download the complete FICCI-KPMG Report



*L to R- Dr Narottam Puri, Advisor- FICCI Health Services and MVT; Principal Advisor- QCI; Board Member & Former Chairman- NABH; Advisor-Medical Operations, Fortis Healthcare Ltd; Dr Sanjeev Singh, Co-Chair, FICCI Health Services Committee; Medical Director, Amrita Institute- Faridabad; Dr Ajay K Singh, Senior Associate Dean for PG Medical Education; Director, MMSCI, Harvard Medical School; Mr Naveen Aggarwal, Managing Partner - Delhi NCR, KPMG, India; Prof S P Singh Baghel, Hon'ble Minister of State, Ministry of Health & Family Welfare, Government of India; Mr Lalit Mistry, Partner and Co-Head, Healthcare Sector, KPMG, India; Dr Harsh Mahajan, Chair, FICCI Health Services Committee and Founder & Chief Radiologist, Mahajan Imaging & Labs; (Hony) Brig Dr Arvind Lal, Chair, FICCI Swasth Bharat TF; Executive Chairman, Dr Lal PathLabs & Managing Trustee, ALVL Foundation; Dr Mahesh Joshi, Co-Chair, FICCI Health Services Committee and President & CEO, Apollo Homecare*

## Session I: Roadmap for Making Cancer Care Affordable and Accessible in

India faces significant challenge of a sizeable cancer burden, which continues to grow further. The 2020 WHO ranking on cancer burden in terms of new yearly cases being reported, ranked India at the third position after China and the US, respectively. It is expected that cancer incidence may grow at the rate of 9% in the next 5-10 years imposing a significant challenge of disease burden. This coupled with the high mortality to incidence ratio across most organs is a dual challenge for the country to address.

The FICCI-EY Report released last year highlighted that it is imperative that the country focuses on effective prevention, targeted screening, and large-scale awareness as the primary response to addressing the disease burden by avoiding the unnecessary stigma attached to cancer. It is crucial that cancer prevention and early diagnosis are prioritized by society, governments, and the healthcare ecosystem, given the nature of the disease as a sign of physical, emotional, financial, and social distress that affects not just an individual but the entire family. Following this, the key is to tackle the disease the right way, the first time and at the last mile through a comprehensive approach that is cost effective and keeps patient at the core and is powered by multi-stakeholder partnerships, frugal innovation by providers and progressive policy measures underpinned by technology.

This year FICCI is organising Regional Roundtables to understand the gaps and requirements for cancer care infrastructure in various States, and actionable recommendations from these meetings have been submitted to the government. This Session, as a part of the series, helped to delve deeper into the recommendations specifically on aspects related to affordable and innovative access models, along with improving the outcomes for cancer patients across the country.

### Ms Indrani Kaushal, Joint Secretary, Ministry of Health & Family Welfare, Government of India

Ms Kaushal lauded the efforts of FICCI and EY for developing a comprehensive Cancer Care report that will aid in making informed policy decisions. While highlighting the increasing burden of NCDs, especially cancer, globally as well as in India, Ms Kaushal shared that tobacco use, high body mass index, alcohol consumption, low fruit and vegetable intake, and lack of physical activity have been significant contributors to cancer.

She emphasized that there is a need for **addressing peculiar and complicated** cases of cancers- those affecting the lungs, mouth, oesophagus, stomach, cervix, breast and uterus. She highlighted that types of cancers in northeastern parts of the country may vary from those in the northern part, highlighting the importance of **considering demographic and cultural factors in prescriptions and interventions**. She also highlighted that innovative models like Tata Memorial Centre, are well-suited for addressing the growing burden of cancer in states. Recognizing the importance of cultural factors, these models are designed to be adaptable and effective in diverse regional contexts.

- 70% of global deaths are attributable to Non-Communicable Diseases (NCDs)
- 63% of all deaths in India are due to NCDs, with cardiovascular diseases leading to 27% of overall mortality, followed by chronic respiratory diseases, cancer, diabetes, and other conditions
- India has prevalence of 36.52 lakh cancer cases per year, 15 lakh new cases annually, and 8 lakh deaths each year.



She highlighted the government's proactive efforts in developing a prevention and early detection screening plan. The aim is to alleviate the burden on tertiary care systems by detecting cases early, thereby reducing out-of-pocket expenditure and making treatment more affordable compared to advanced stages. She outlined the **government's multi-faceted approach**, emphasizing the four levels of health facilities in India, including primary, secondary, and tertiary care,



as well as ASHA workers. At primary care level, the HWCs are equipped to screen for three common cancers: breast, cervical, and uterine. The Community Health Officers (CHOs) play a pivotal role in population-based cancer screening, mandated by the National Program for NCDs for individuals above 30, facilitated by the NCD application-a one-stop app integrated into the HWCs. She stressed the importance of digital continuity in care, where the app allows CHOs to update necessary details, ensuring effective follow-up and continuum of care. The digital integration into the ABDM ecosystem guarantees a longitudinal health record, enhancing medical and clinical investigations.

Whilst highlighting the government's initiative focused on cancer care she outlined the below:

- Establishing **tertiary cancer care** institutes, including state tertiary care centres, regional cancer care centres, and chemotherapy daycare centres.
- Launch of the **National Cancer** Institute in Jhajjar, a 710-bed premium research institute, and the second campus of CNCI in Kolkata, a 460-bed hospital to provide advanced cancer care.
- Under the **National Program** for NCDs, screening, diagnosis, and treatment are available across various government healthcare delivery systems, spanning sub-centres, Primary Health Centres, Community Health Centres, district hospitals, and medical colleges. Opening of 744 district NCD clinics, 6,220 CHC NCD clinics, and 355 daycare centres under the program.
- National **multi-sectoral action plan for non-communicable diseases**, engaging all stakeholders and allied ministries, making health a collective responsibility.
- Under **Prime Minister Swasthya Suraksha Yojana** (PMSSY), plans are underway to establish 22 AIIMS with advanced cancer treatment, diagnostic, and surgical care facilities, reinforcing the nation's healthcare infrastructure.
- Under the Pradhan Mantri Jan Arogya Yojana (PMJAY), the latest update in the **Health Benefit Package** (HBP) for the year 2022 includes the addition of 91 surgical oncology procedures, 288 medical oncology procedures, and 53 radiation oncology procedures.
- **Pradhan Mantri Jan Aushadhi Kendras** provide cancer care drugs at reasonable prices compared to the market rates. There are over 1,800 drugs available, encompassing 50 anti-cancer and oncology medicines, along with 285 surgical and consumables.
- **Amrit Pharmacy** offers cost-effective, life-saving medicines, and various medical disposables for the treatment of cancer. These pharmacies are selling more than 5,200 drugs that cover cardiovascular issues, cancer, diabetes, and stent implants and the surgical disposables are available at costs up to 50% below market rates.

Ms Kaushal further emphasized that cancer care, being a public good, cannot rely solely on market mechanisms. The intricacies and nuances of delivering such a crucial public service go beyond what traditional market mechanisms can provide. She expressed that industry and government should together deliberate on how to fund cancer care for the most vulnerable populations.

### Key Recommendations

- **Creation of a Nodal Agency for Cancer Care** with defined objective is pertinent to enhance cancer care and control in the country. Objective of the agency can be to improve awareness and prevention of cancer with a strong linkage to care delivery systems. to ensure sustained and equitable access to diagnosis and treatment facilities for cancer patients.
  - The Nodal agency can be responsible for strengthening the cancer information system and surveillance to monitor the program and evaluate the outcome of cancer control actions. It should be responsible for promoting the professional education of doctors, nurses, technicians,

and health workers to augment human resources. It can promote research and utilization of its findings for prevention and control of cancer.

- Significant success and impact was seen in HIV control through the establishment of a nodal body viz. NACO. The role of this agency should be to consolidate all efforts/schemes of the government related to cancer control onto a single platform. A detailed region-wise mapping of the disease burden and treatment facilities for cancer care can be a starting point for the nodal agency.
- Several regulations are there in place for pharma and device companies which develop products and devices for cancer control. A nodal agency for cancer control can consolidate and simplify the regulations applicable to these companies.
- **Cancer Registries:** All state governments to mandatorily set up Population Based Cancer Registries for accurate data capture with greater representation of all states. Capturing region-wise variations in cancers by organ will be critical for developing customized action plan for different regions. Hence, better representation of population-based cancer registries is critical for decision making regarding cancer control.
- **Enhance Clinical Trials:** India's participation in global clinical trials is currently 4% despite 20% of global disease burden. There is a need to have more participation in the global clinical trial in terms of performing genomic profiling and identifying new therapies for the Asian population. India needs to be better represented in global clinical trials for oncology given that there is a significant increase (80%) in the number of principal investigators available in the country.
  - Upgradation is required of clinical trials facilities specially in government set ups though clinical trials excellence programs.
  - Clinical trials should be included in the curriculum of post graduate medical programs in the country such that student doctors and medical colleges have a platform to take up clinical trials.
- **Reimbursement Packages for Cancer:** Health beneficiary packages should be developed in consensus with doctors, payors and providers. Robust, inclusive and predictable frameworks for **health technology assessment** to be instituted for inclusion of treatment options under health beneficiary packages of government schemes. PPPs are required to solve the problem of including affordable and appropriate packages for treatment.
  - **New treatment options** should be evaluated based on “value delivered” and not “pricing”. Scope exists to evaluate outcome-based agreements and special managed entry agreements for evaluating the value of a treatment with reference to the outcome delivered by the treatment.
- **Augmenting Healthcare Workforce specialised in Cancer Care:**
  - Shortfall in **oncologists** is likely to worsen over the next two decades given the rising disease burden specifically as the population starts ageing. Surgical oncologists treat 80% of solid tumours. The duration required for a surgical oncologist to be qualified is as long as 11 years (MBBS+ PG in general surgery + PG in surgical oncology + organ-specific fellowship). Efforts need to be undertaken by bodies such as NMC to streamline the same and optimise the timelines for surgical oncologist to be qualified.
  - There is a shortage of trained **nurses and technicians**. Even with advancement in technology, there is a requirement of trained staff to run the machines in the diagnostic centers. There is a need for a pyramid model where the base is equipped with strong infrastructure, preventing the overburdening of tertiary care cancer centers.

- **Enhancing diagnosis and treatment infrastructure at District level:**
  - Medical colleges at district level should have surgical oncology department to perform less complex surgeries which do not require to be referred to apex tertiary care centres. PPP can be evaluated for setting up surgical oncology department in medical colleges.
  - Diagnostic facilities should also be improved at district level such that patients can undergo basic diagnosis before being referred for treatment.
  - Private sector and oncology associations can also come forward for imparting training to general surgeons for treating common cancers.
- **Implementation of cancer treatment guidelines need to be made mandatory** to ensure that facilities which are not able to implement at least the “optimal” guidelines are not treating patients but are referring them to the right treatment facility. This step will be critical to ensure that there is no compromise on outcomes.
- Consider the **Hub and Spoke model to ensure optimal utilization** of resources. The hub should be a comprehensive cancer care facility including radiology, medical, surgical, and diagnostic oncology. Therefore, they need to have the high-end diagnostic equipment like PET CT, Mammogram GMA camera, Linux etc. whereas Spokes can be daycare centers that can be spread across the districts for screening, lab test, biopsy facilities and referral base. They should be equipped with MRI, CT, Ultrasound, and so on.
- Adoption of **low-cost point of care screening devices** specially at **primary healthcare centre level** will help improve screening pool and drive early detection.
- Combination of digital and physical efforts will be required to build an **integrated system from screening to treatment**. Counselling of suspects identified in screening programs to undertake advanced diagnostics and thereafter treatment will be critical in this regard.
- **Awareness Generation:** Enhancing awareness is crucial for **preventable cancers** such as tobacco-related cancers and cervical cancer. Women should be fortified with knowledge to encourage the vaccination of young girls against cervical cancer. Additionally, the population above a specific age should be educated to promote targeted screening for the early detection of cancers.
- **Financing** for cancer care infrastructure: **Viability gap funding** should be considered for setting up radiology centres in tier 2 and 3 cities.
- **PPPs** for diagnostic services face a key challenge in terms of **reimbursement** to the private provider. The reimbursements should be robust enough to ensure viability for private providers.
- **Inverted duty structure** whereby import of raw materials has higher taxes compared to import of finished goods needs to be rectified along with provision of incentives for exports to enable local manufacturing of medical equipment required for cancer diagnosis and treatment.

## Session II: New Age Healthcare Delivery Models

New age healthcare delivery models and technology innovations are reshaping the healthcare landscape in India, bringing forth new approaches and solutions to enhance healthcare accessibility, affordability, and quality. These models leverage advancements in digital health, telemedicine, data analytics, AI and patient engagement to transform how healthcare services are delivered and experienced.

Government initiatives and private sector innovation have propelled the adoption of New Age Healthcare Delivery Models in India. World's largest vaccination drive through CoWin platform, massive adoption of telemedicine during pandemic, implementation of Ayushman Bharat Digital Mission and encouragement of AI and Robotics in Healthcare have opened newer opportunities.

This Session deliberated on how integration of technology, data-driven insights, and patient-centric approaches have the transformative potential for new age models, how the healthcare delivery landscape is metamorphosing and what is the future of healthcare in India. The panelists also discussed the changing roles of healthcare providers, the progression of healthcare infrastructure and innovation, and the implications for healthcare workforce and skills.

### Key Recommendations

- India presents a significant opportunity for growth in the healthcare sector, particularly in quality care. While the US has made significant strides in this regard, India lags in terms of **insurance penetration and access to quality care**. However, there are signs of progress in the outpatient space, with various models emerging to provide affordable and accessible healthcare services. Despite these advancements, there remains room for further development and investment in this area, **presenting an attractive opportunity for stakeholders looking to make a positive impact on the Indian healthcare landscape**.
- The **self-care movement and the quantified self-movement are expected to gain significant traction in the coming years**, with more individuals taking an active role in managing their own health and wellness. This trend has already started to shape the healthcare industry, and it is likely to continue growing as people become increasingly empowered through technology and data.
- Data and AI will play a critical role in shaping the future of healthcare**, particularly in the areas of **predictive analytics and precision medicine**. By analyzing large amounts of data from wearable devices, electronic medical records, and other sources, healthcare providers can **identify patterns and trends that inform more effective treatments and improve patient outcomes**.
- The **boundaries between different players in the healthcare ecosystem are blurring, with IT firms and medical logistics companies entering the diagnostics space** and hospitals adopting new business models based on changing customer needs.
- The diagnostic industry has come a long way in terms of technology, innovation, and customer demand. However, to fully harness the potential of these advancements and meet evolving customer

*“Confronting the issues of access, affordability, and scarcity of technology and manpower is a complex undertaking that cannot be resolved overnight. It necessitates substantial effort, along with an additional element that must emerge to effectively meet the challenges and fulfil the government’s agenda of providing Universal Healthcare. This is where the significance of new age delivery models will come into play.”*

- **Dr Harsh Mahajan**, Chair, FICCI Health Services Committee and Founder & Chief Radiologist, Mahajan Imaging and Labs

needs, a **fundamental shift in mindset is required**. It is time for the industry to move away from a **traditional, siloed approach and embrace a more collaborative, integrated, and forward-thinking mindset**.

- Non-communicable diseases (NCDs) like diabetes, hypertension, and cardiovascular diseases (CVDs) pose significant health challenges globally. However, **despite the availability of numerous diagnostic modalities, these conditions often go undiagnosed or unmonitored, leading to severe consequences**. With the advancements in digital technology, it is now possible to leverage smart devices and wireless connectivity to remotely monitor and manage NCDs. For instance, individuals with diabetes can use glucometers with Bluetooth connectivity to track their blood sugar levels and share the data with their healthcare providers via mobile apps. This enables timely interventions and reduces the need for frequent clinic visits, thereby minimizing the risk of complications. Moreover, **artificial intelligence and machine learning algorithms can be applied to analyze the data and predict disease progression**, enabling early prevention and treatment. To fully exploit these opportunities, investment in research and development, as well as education and training for both healthcare professionals and patients, is crucial.
- To maximize benefits during the pandemic, **public-private partnerships should be fostered, ensuring mutual advantages for both parties**. For instance, in Bhubaneswar and tribal districts, 150 beds were established through collaborative efforts between the public and private sectors, providing much-needed medical resources to the people while leveraging the private sector's strengths in scalability.
- In India, **many insurance providers do not cover pre-hospital care expenses**. However, there is a **need to engage with the government and insurance providers to develop innovative insurance schemes** that cater to check-ups and diagnostic tests before hospitalization.
- As the healthcare landscape evolves, **hospitals will increasingly focus on providing acute care services**. To address this shift, it is **crucial to invest in technologies** that enable remote monitoring and early intervention, allowing more care to move outside of traditional hospital settings.
- There is a big opportunity to improve preventive healthcare in India, especially for young workers who need to stay healthy. This could involve working together with insurance providers and the government to **offer more affordable pre-hospital treatments** like check-ups and diagnostic tests.
- Large hospitals can expand their reach by offering better services in smaller towns and villages **using technology like virtual consultations and online diagnostics**.
- To truly put patients first (be patient-centric), **healthcare providers need to prioritize effectiveness over costs**. Currently, there is limited information available for patients to make informed decisions about their treatment options. To address this, healthcare providers should **track and share clinical outcomes so that patients can make more informed choices**. By doing so, providers can create better experiences for both patients and care teams while also improving outcomes and reducing costs. This can be **achieved by educating doctors on using new technologies and analyzing large amounts of data (big data)**.

- When designing healthcare technology, it is important to consider how it will be used and what outcomes it will achieve. If technology is not used correctly, it may not produce the desired results for patients. Therefore, it is crucial **to ensure that technology is designed with the patient's needs and concerns in mind. This includes understanding what patients are looking for in terms of diagnosis, treatment, and overall care.** Additionally, the technology should be able to address any questions or concerns patients may have throughout the process. By doing so, technology can serve as a catalyst for delivering positive outcomes and meeting patient expectations.

- Home healthcare is poised to become a vital component of the **entire patient lifecycle journey, extending beyond post-hospitalization to include pre-hospitalization, and avoiding hospitalization altogether.** However, the current state of home healthcare often caters to social needs rather than clinical ones, perpetuated by the mindset of healthcare providers and their clients. As the industry evolves, it must shift towards clinical home-based care, breaking away from traditional hospital-centered models. Doing so requires embracing innovative approaches that integrate home healthcare into the care plan, such as reducing surgery recovery time by two days through integrated home healthcare services. **Only by challenging the status quo and adopting a willingness to adapt and innovate can the industry transform home healthcare into a proactive, preventive, and patient-centered model.**

*“There are broadly 3 buckets in which the new models in home healthcare will evolve in next 5-10 years- hospital-based vs stand-alone home healthcare providers, skilled vs non-skilled home healthcare and specialty-based models.”*

*- Dr Mahesh Joshi, Co-Chair, FICCI Health Services Committee and President & CEO,*

- As the healthcare landscape continues to evolve, patients face an increasingly complex environment when navigating and accessing care. **A growing array of players, including new entrants and innovative models, demands heightened patient awareness and engagement.** To effectively adopt these new models, a more collaborative approach is necessary, rather than competition. Key components of this evolution include the implementation of health Unique Identification ID, electronic medical records, and interoperable digital ecosystems. These advancements will facilitate seamless data exchange across the value chain, creating value for patients.

Moreover, **new regulatory reforms will be essential to accommodate the introduction of novel technologies** and address emerging challenges. Insurance reforms will play a critical role in broadening coverage, ensuring that patients receive comprehensive care, both within hospitals and at home. By embracing these changes, we can enhance the quality and reach of healthcare, ultimately benefiting patients.

## Session III: Fostering Resilient Economics

Healthcare facilities are indispensable institutions that play a vital role in delivering quality healthcare services, and it is imperative that we develop strategies to foster resilient economics within these institutions. By embracing efficiency and optimisation, hospitals can improve accuracy, reduce errors, enhance patient outcomes, promote responsible healthcare practices, and create a resilient healthcare system capable of meeting future challenges.

This session delved into key measures and approaches that can be implemented to achieve resilience in the economics of healthcare. The experts shared strategies on balancing the balance sheets, streamlining supply chains, leveraging technology to drive administrative efficiency as well as approaches for viability in public health system and improving sustainability in the healthcare ecosystem through new models.

*“The ability to withstand and adapt to economic challenges in delivering efficient and effective healthcare has been tested over time. The organisations need to build strategies, redefine their operational plans and business models, bring diversifications in revenue streams, adapt to market fluctuations, use cost control measures and efficiency analysis to mitigate the financial risks and bring in financial resilience.”*

- **Dr Sanjeev Singh**, Co-Chair, FICCI Health Services Committee; Medical Director, Amrita Institute- Faridabad and Chief Medical Superintendent, AIMSRC Kochi

### Key Recommendations:

- **Need to accommodate an exponentially growing amount of knowledge in the healthcare field:** Knowledge in healthcare field is growing exponentially. Therefore, we cannot have a static system, and must change the care delivered in the system in accordance with the changing knowledge. Various studies show that 60% of care is delivered within guidelines based on evidence or expert consensus. 30% is low value or wasteful and 10% results in direct harm to patients. 40% of what we do does not provide much value to patients. It generates harm that must be taken care of.
- **Adopt sustainable models such as the Learning Health System:** A learning health is not just a system which allows, expects, or demands the individual healthcare professionals working within the system to learn continuously. It is a system where science, informatics, incentives, and culture are aligned for continuous improvement and innovation with best practices seamlessly embedded in the care process. Patients and families are active participants in all elements and new knowledge captured as an integral by-product of the care experience.

  - Healthcare is a complex adaptive system. Complexity renders the system the ability to develop and learn – improve – but also to drift into failure.
  - The healthcare system is embedded in an environment of rapidly growing knowledge and rapid technological innovation. However, the implementation of knowledge may be slow, creating a considerable gap. The rate at which the knowledge is growing, we need to speed up the learning in our systems.
  - Leverage implementation science can help reduce these gaps. We need to understand the difference between what we want to change and how we can make that happen. Performance of Learning Health System improves over time.

• **The Learning Health Systems Framework**

Dimensions	Characteristics	Description
<b>Science and informatics</b>	Real time access to knowledge	Best available evidence incorporated into clinical decision-making processes to improve quality of care and patient safety.
	Digital capture of the care experience	Digital platforms (e.g., eHRs, disease registries, mobile devices) utilised for the real-time capture, production, and application of knowledge based on best available data
<b>Patient-clinician partnerships</b>	Engaged, empowered patients	Patients, families, and caregivers are full partners in a patient-centred system.
<b>Incentives</b>	Incentives aligned for value	Policies actively encourage ongoing evaluation of care given and improvement of processes and support the provision of high-value care and reduction in wasteful practices.
	Full transparency	All aspects of care, including safety, quality, processes, costs, and outcomes are recorded and available to stakeholders (patients, health professionals, managers) to improve patient care and decision making.
<b>Continuous learning culture</b>	Leadership-instilled culture of learning	Leaders instil a culture of collaboration and adaptability to support the learning process.
	Support system competencies	Staff training, skill building, and support to enable continuous refinement of processes and system improvements is implemented.

○ **Encouraging and Implementing Smart hospitals**

The concept of Smart hospital involves the integration of advanced technology and data driven solutions to enhance patient care, streamline operations and improve overall efficiency. Some important considerations of a Smart hospital are:

- **Strike a balanced approach:** Hospitals need to strike a balance between innovation and the bottom line while delivering high-quality care and maintaining the trust of their patients.
- **Implementation of smart hospital initiatives:** Careful planning, strong leadership, and a commitment to long-term success are essential for the successful implementation of smart hospital initiatives.
- **Patient Engagement:** While smart hospitals can enhance patient experience, they may also require patients to interact with technology. Ensuring that these technologies are user-friendly and accessible to all patients, regardless of their tech savviness, is essential for successful implementation.
- **Scalability and Future-Proofing:** Technologies in healthcare evolve rapidly. Hospitals must choose solutions that can be scaled and adapted to future needs. This requires careful planning to avoid frequent technology overhauls.



- **Data Interoperability:** The integration of various systems, such as Electronic Health Records (EHRs), medical devices, and administrative tools, is vital for the success of smart hospitals. Ensuring these systems can work together seamlessly is a complex challenge.
- **Data Security and Privacy:** With the influx of patient data, hospitals must invest in robust cybersecurity measures and comply with data privacy regulations. Failing to protect patient data can lead to legal and financial consequences.
- **Adhering to Regulatory Compliance:** Smart hospitals must adhere to various healthcare regulations and standards. Failing to comply can result in fines and legal issues. Hospitals need to allocate resources for compliance efforts.
- **Enhancing Quality of Care:** The primary goal of any hospital, smart or traditional, is to provide high quality patient care. Smart hospital technologies should enhance care rather than detract from it. Ensuring that technology improves outcomes, and the patient experience is critical.
- **Building Patient Trust:** Patients and their families must be able to trust that the hospital's smart technologies will not compromise their privacy or security. Building trust is vital for attracting and retaining patients.
- **Sustaining Competitive Advantage:** In the private healthcare sector, smart hospitals can provide a competitive edge. However, sustaining this advantage requires continuous innovation and improvement.

Imperatives for **financing and ensuring viability for Smart hospitals** are:

- **Secure initial investment when building smart hospitals:** Implementing smart hospital technologies requires a significant upfront investment in infrastructure and training. Hospitals need to secure financing for these capital expenditures, which can be a challenge in private healthcare.
- **Conduct a thorough assessment of expected returns:** Smart hospital projects may take time to realize a positive ROI. Hospital administrators and investors need to carefully assess the expected returns in terms of improved patient outcomes, cost savings, and increased patient volumes. Building a compelling business case for these technologies is crucial.
- **Be proactive to seek diverse funding sources:** Private hospitals can seek various sources of funding, including venture capital, private equity, bank loans, and PPPs. The choice of funding source should align with the hospital's long-term goals and strategies.
- **Focus on cost management:** Smart hospitals require ongoing operational expenses for maintenance, updates, and staff training. Balancing the capital and operational budgets while maintaining quality care is a challenge, and cost management is vital.
- **Allocate resources for compliance efforts:** Smart hospitals must ensure a high quality of patient care while using their technology to improve outcomes and patient experience. Patients and their families must be able to trust that the hospital's smart technologies will not compromise their privacy or security. Building trust is vital for attracting and retaining patients. Therefore, resources must be allocated to cover the compliance costs.
- **Demystifying Balance Sheets of a Hospital:** Maintaining a good balance sheet leads to good financial health. Activities that we perform on a daily basis impact the Profit and Loss of an

organization, and the effect of that is the Balance Sheet. **If we need a strong Balance Sheet, we need to focus on the day-to-day activities of the hospital.**

Almost two-third of CEOs of leading hospitals state financial health as their most important concern. There are various factors leading to this concern including the rising costs- whether it is human capital, drugs and supplies, advanced equipment and technology or creating and maintaining the infrastructure, including digital. There is also stiff competition from other hospitals as well as new age models that impact the occupancy and hence the revenue of a hospital, which further affects the balance sheets. Hence, it is important that we look at key metrics on a day-to-day basis and manage our Profit & Loss in order to maintain a good balance sheet.

**Matrix for Managing the Profit and Loss:**

Key Metrics	Enhanced by	Jeopardized by
<b>Budget:</b> <i>ensures financial stability</i>		
<b>ALOS:</b> <i>indicator of efficiency</i>	<ul style="list-style-type: none"> <li>▪ Service delivery excellence</li> <li>▪ Patient journey, &amp;</li> <li>▪ clinical pathways</li> </ul>	<ul style="list-style-type: none"> <li>▪ Poor turnaround time</li> <li>▪ Incorrect diagnosis &amp; bad quality of care</li> <li>▪ Hospital acquired infections</li> </ul>
<b>Monitoring and Review:</b> <i>ensures on-track targets &amp; performance</i>	<ul style="list-style-type: none"> <li>▪ Periodic monitoring</li> <li>▪ Operational Rhythm</li> <li>▪ Tracking plans</li> </ul>	<ul style="list-style-type: none"> <li>▪ Red flags</li> <li>▪ Poor alignment</li> <li>▪ Resistance to feedback &amp; adherence to targets</li> </ul>
<b>EBIDTA:</b> <i>tracks monitors profitability, and is the operating health of the business</i>	<ul style="list-style-type: none"> <li>▪ Operational efficiencies</li> <li>▪ NPS &amp; Patient Excellence</li> </ul>	<ul style="list-style-type: none"> <li>▪ Costs</li> <li>▪ Fixed vs Var</li> <li>▪ Contracts</li> </ul>
<b>Investments- CAPEX &amp; OPEX:</b> <i>choosing the apt option</i>	<ul style="list-style-type: none"> <li>▪ Cash Balance and Cash flow</li> <li>▪ Impact of Depreciation</li> </ul>	
<b>Payback &amp; IRR:</b> <i>risk taking capability</i>	<ul style="list-style-type: none"> <li>▪ Organisation needs</li> </ul>	

- **Financing and Viability in Public Health:** Tackling triple burden of disease including RCH, non-communicable, communicable disease as well as emergencies is done through national health programs in India. Prioritization of resources and effective utilization of budget as well as resources for the general population are extremely important for performance of these programs.
  - **Effective Monitoring of Program Implementation:** Monitoring is essential for ensuring efficient and effective program implementation. India can improve the performance of its national programmes and achieve better outcomes as only 38% programmes in India are effectively monitored. Effective monitoring practices include:
    - Regular data collection and analysis
    - Use of technology
    - Stakeholder engagement
  - **Economic evaluation** is essential for ensuring efficient and effective use of public funds. India loses an estimated \$237 billion annually due to healthcare inefficiencies. Economic evaluation can help identify programs most likely to **improve public health outcomes** at a reasonable cost. The main types of economic evaluations are:

- Cost-effectiveness analysis (CEA)
  - Cost-utility analysis (CUA)
  - Cost-benefit analysis (CBA)
  - Budget Impact Analysis
- In India, economic evaluations have provided valuable insights into the cost-effectiveness of many national programmes and helped in informed decision making about resource allocation and program design. Some of the examples include National AIDS Control Program, National Immunization Program and National Rural Health Mission.
  - Evaluations in India are predominantly used to validate the successes of programmes rather than for policy and budgetary planning, which needs to change. Key **challenges** include- Data collection- which needs to be an institutional process, standardization across programs and resources.
  - For future evaluations, we need to **embrace innovative methodologies and technologies** (Big data, Machine learning, Analytics). Technologies like AI tools can be utilized for analysing economic evaluations to help in informed decision making and adopting better methodologies.
  - There is a need to **foster collaborations** among government, private sector, and academia to share knowledge and best practices.
- **Evaluate the Cost of Poor Quality-** If we need to convert whatever we do into operational efficiency, we should use the language of money or rupee. Cost of Poor Quality (COPQ), a financial measure, allows to translate things into money. COPQ ranges from 15-20% of sales in most organisations. There are also hidden COPQ- the costs incurred to deal with chronic problems in an organization.
    - There are various tools for COPQ and it is important that we use the tools that have better adoption in India like Health Technology Assessment.
    - **Adopting high-value, cost-conscious care (HVCCC)-** which refers to care that aims to assess the benefits, harms, and costs of interventions (quality divided by cost- where both are measurable).
    - **Adopting basic interventions such as hand hygiene** can save many direct and indirect costs. The organisations that take actions to prevent healthcare associated infections have been able to reduce the total cost of care. Along with cost benefits, these interventions also increase quality of care. Other factors like Economics of Line Items, Cost of Bad Will and Litigation also add to cost of care.
    - **Adherence to Treatment Standards:** It has been evident through many studies that the use of standard protocols is crucial not just for better outcomes but also for reducing the total cost of care.

*“Revenue is often a key constrain that is limiting to our activities under an initiative or programme. Be it return on investment for private sector or in a government set-up, we need to be considerate of the revenue and budget that has been allocated. It is also crucial to understand how we prioritise the resources and how we utilise them so that they become cost-effective.”*

- **Dr Madan Gopal**, Advisor- Public Health Administration, NHSRC, MoHFW, Gol

*“There are a lot of healthcare quality initiatives, but they need to be analysed based on costs since there is cost to poor quality. Most of these costs have been unnoticed. Hence, we need to create a movement to understand these costs, which will lead to better quality in healthcare.”*

- **Dr Sanjeev Singh**, Co-Chair, FICCI Health Services Committee; Medical Director, Amrita Institute- Faridabad and Chief Medical Superintendent, AIMSRC Kochi

- **Overcome resistance of deploying clinical pharmacists:** Cost analysis indicates that one clinical pharmacist saves two medication errors, resulting in overall cost benefit.
- **Implementing good antibiotic stewardship mechanisms** that save mortality and morbidity in addition to the overall cost benefit as the world is reeling under the pressure of the AMR pandemic. Proper practices of loading doses and the duration of dosing are important, for which nurses can be empowered.

## Fireside Chat: **Driving Investments in Healthcare**

In recent years, India has witnessed a remarkable surge in both domestic and international investments in its healthcare sector. This significant increase is indicative of a growing recognition of the sector's potential and the country's commitment to enhancing healthcare infrastructure. Domestically, various initiatives and policies, such as the National Health Mission and Ayushman Bharat, have played pivotal roles in attracting investments to bolster healthcare services. Additionally, international investors are increasingly viewing India as a promising healthcare market, given its vast population and evolving healthcare needs. The influx of funds has been directed towards modernizing medical facilities, advancing technology, and expanding healthcare accessibility across the country. This surge in investments not only promises to elevate the overall quality of healthcare but also positions India as a key player in the global healthcare landscape. As a result, the nation is witnessing a transformative phase in healthcare delivery, with increased resources fostering innovation, infrastructure development, and ultimately, improved health outcomes for its citizens.

A Fireside Chat was organized to deliberate on the various aspects of investments in the healthcare sector, including expectations of the investor in terms of returns and duration, what should be the yardstick in healthcare investment, need for accountability and value-based delivery as well as whether newer models attractive for investment. Key discussions held are mentioned below:

### Key Highlights

- Private equity investment has been increasing in Indian healthcare in recent years. **Rising demand for quality healthcare** has attracted some **domestic as well as foreign PE investors** to invest in India. Moreover, recently there have been a lot of mergers and consolidations in the sector.
  - As an investor considering investment opportunities in private healthcare institutions, it is crucial to **evaluate not only the financial performance but also the quality of healthcare delivery, clinical outcomes, and accountability.**
  - A private investor in the healthcare industry, **should prioritize healthcare quality when evaluating potential investments.** While cost and profitability are important considerations, they should not be the sole factors driving your decision-making process.
  - It is important that in coming time, investors need to be realistic, and the medical fraternity must follow the evidence-based protocols and practices.
- With a key emphasis on quality in the healthcare institutions, we need to focus on **“Patient First” approach** along with its **measurability.** With this approach in mind, investors in healthcare sector need to adopt a realistic approach considering that an aggressive approach is non-viable.

*“If you are looking only at the finances of a healthcare institution, then you are not doing justice to the sector. We need to do a hardcore analysis of the quality of healthcare delivery, the clinical outcomes, accountability as well as the cost of quality while deciding the health of a healthcare institution.”*

- **Dr Nandakumar Jairam**, Chairman-Medica Synergie Hospitals; Advisor-Sheares Health care India; Chairman-Shyamrad; Former Chairman-NABH

- Are valuations today appropriate or realistic? In today's global healthcare landscape, some countries have achieved positive financial outcomes and balanced budgets, but they also acknowledge the reality of **longer recovery periods, lower expected returns, and the importance of delivering high-quality care.**
  - In India specifically, one major challenge facing the healthcare industry is a trust deficit caused by factors like unaccountable care providers, non-adherence to evidence-based practices, and poor maintenance of quality standards.
  - As younger medical professionals enter the field, it is crucial that they **understand the value of prioritizing quality and adopting best practices to regain patient trust.** By doing so, they can ensure sustained success and growth within the industry while providing top-notch care to those in need.
- While the healthcare industry has traditionally focused on three key aspects - affordability, accessibility, and awareness of the sector - it is time to **shift the focus towards creating an accountable healthcare ecosystem.**
  - This means healthcare providers must hold themselves accountable not **only to the patients but also to society, stakeholders, and investors.** By doing so, we can ensure that we are providing high-quality care that meets the needs of all individuals, while also maintaining transparency and integrity throughout the entire process.
  - We need to **create an environment and change the internal ecosystem** that enhances clinical quality, ensure evidence-based practice, and come up with appropriate care with accountability.
  - There is a strong need for **healthcare practitioners** also to set realistic expectations and ensure that medical staff on-ground is more accountable.
- In the future, the healthcare industry is poised for significant growth with initiatives like Ayushman Bharat set to revolutionize the sector. However, the traditional hospital models may struggle to remain profitable under these changes. To ensure sustainability and profitability while delivering quality care, **healthcare providers must adapt by transforming their operational strategies, leveraging technological advancements, increasing efficiency, integrating services, and exploring consolidation opportunities.**
- In the post-Covid era, there has been a significant shift in the way the healthcare sector operates. With increased awareness of health and hospitalization, it is **crucial to prioritize maintaining profitability while providing high-quality care.** To achieve this delicate balance, **controlling the costs of medicines and consumables is essential.** By focusing on both good quality care and cost management, healthcare providers can ensure their bottom line remains strong.

*“Most of the time we are resolving the issues related to patient experience, hospital infections etc. Are we being reactionary? Rather we need to work towards being process oriented and following the treatment protocols. Quality is certainly a non-negotiable aspect of starting or running a hospital.”*  
 - **Dr Raajiv Singhal**, Founding Member, Managing Director & CEO of Marengo Asia Healthcare

Day 2- October 27, 2023

## Session V: Leveraging Technology for Transforming Primary Healthcare

Government of India has achieved its vision of operationalizing 1.5 lakh Ayushman Bharat Health and Wellness Centres (HWCs) across the country by December 2022. HWCs are designed to deliver Comprehensive Primary Health Care, with a focus on wellness and delivery of an expanded range of services, including control of Non-Communicable Diseases (NCDs).

HWCs are a significant lever to attain universal healthcare when they are equipped to provide the full spectrum services envisioned in its scope. For this, we need to overcome system as well as grassroots level challenges related to shortage of human resources, timely procurement of essential supplies, utilization of funds, availability of essential diagnostics and last mile connectivity. The private sector has been an important stakeholder in Indian Healthcare providing majority of the outpatient and inpatient care. The private sector has been at the forefront in the adoption of latest technology and innovations to deliver quality healthcare. Therefore, it is crucial for the Government and the private health sector to work together to make these HWCs more effective or 'Smart HWCs', leveraging better management practices, technology innovations and digital health solutions.

**FICCI is spearheading an industry-wide movement in partnership with NATHEALTH and OMAG**, aimed at transforming primary healthcare through 'Smart HWCs', working closely with State Governments.

This Session brought together the government and industry partners to deliberate on creating model 'Smart HWCs' across the country.

### Key Recommendations:

- Leverage AB-HWCs programme as a platform for the government and the private sector to work collaboratively to transform primary healthcare.
- The Government can encourage and support initiatives like the **FICCI-NATHEALTH-OMAG's Project Smart HWCs** that envisions to bring together more than 300 health sector member organizations to develop demonstration models of 'Smart HWCs' that will deliver the full suite of expanded services outlined in the operational guidelines for Comprehensive Primary Healthcare. These Smart HWCs will leverage better management practices, technology innovations and digital health solutions to bridge existing gaps in primary healthcare and improve access to enhanced quality primary healthcare services.
- **Promote a collaborative regulatory environment** involving government, private, and nonprofit organizations in healthcare. Foster better understanding and communication among these entities, making it easier for them to work together and ensuring that the regulatory environment is supportive of these efforts.
- There are three key verticals in healthcare, i.e., pharmaceuticals, medical devices and healthcare delivery. While pharmaceuticals and medical devices verticals have showcased accelerated adoption of technology, there is a **significant scope of progress in healthcare delivery vertical**. To enable this, instead of rushing into heavy regulation, the government should allow technological innovations in healthcare delivery to evolve naturally. The focus should be on data acquisition, analytics and real-

*"I propose to designate a weekly 'NCD Day' at all HWCs, like we have Wednesdays as ANC (Antenatal Care) and Routine Immunisation (RI) Day. This day will be dedicated to NCD patients and just like 4 ANC visits during a pregnancy are mandatory, through this dedicated day, we can ensure 4 NCD follow-up visits every year for each patient. There should also be an annual NCDs Day, on the lines of World Health Day or World Heart Day, to help increase awareness about NCDs."*

*- (Hony) Brig Dr Arvind Lal, Chair-FICCI Swasth Bharat (Public Health) Task Force; Executive Chairman, Dr Lal PathLabs Ltd., and Managing Trustee, ALVL Foundation*

time data for improved healthcare services, akin to how we approach other services in the digital age.

- **Need to place stronger emphasis on fostering innovations** in the execution and delivery of healthcare services. While we have a wealth of available technologies, the key lies in efficient execution and reaching the last mile. This requires first and foremost, the availability of infrastructure to support digital health, like **uninterrupted internet connectivity and electricity**.
- **Expanding accessibility via technology:** As an example, the Government of India is committed to eliminate TB by 2025. To achieve this, technology needs to be made available to the patient and last mile connectivity must be ensured. A structured approach must be devised to scale-up available technologies across national disease-specific programmes.
- **Scale-up promising point of care innovations** like thermal screening for breast cancer and sophisticated point of care testing for HPV screening.
- HWCs need to be **digitized with compulsory use of ABHA IDs for all patients**. Use of **applications that facilitate registration through QR codes** should also be promoted. This shall simplify the journey for people seeking healthcare and increase utilization of digital tools in primary healthcare, especially in the widespread use of EHR in both government and private healthcare facilities. This will also enable interoperability and better communication between all healthcare providers.
- **Utilise HWCs as a platform to reduce the burden of Non-Communicable Diseases (NCDs)**. With cardio-vascular diseases leading to highest morbidity, there is an urgent need to add cholesterol screening in testing under the National Programme for NCDs. It is crucial to have mechanisms in place for further co-morbidity testing of individuals who are diagnosed with high blood pressure and diabetes, like HbA1c, urine for microalbumin testing, lipid profile, kidney function and liver function tests. We also need to identify pre-diabetics to help control progression and complications.
- **Need a standardized framework for the integration of mental health component** across every national health program. It is crucial to improve the availability of psychotropic drugs by introducing them under the Jan Aushadhi Scheme. Simultaneously, we need to also focus on increasing the availability of mental health workforce as our country needs an additional 30,000 psychiatrists, 37,000 psychiatric nurses, 38,000 psychiatric social workers and 38,000 clinical psychologists (according to government reports).

## Session VI: Perspectives on Healthcare

The healthcare industry is complex and multifaceted, requiring innovative solutions to address its challenges effectively. The significance of perspectives on healthcare from other sectors cannot be overstated. These perspectives can offer fresh approaches and disruptive thinking that can catalyze transformative change in healthcare sector. External viewpoints can enable the healthcare sector to draw inspiration and lessons from other industries, fostering a dynamic and adaptable healthcare ecosystem that can better serve the needs of patients and improve overall healthcare outcomes.

The session aimed to bring together renowned speakers from various industries to share their unique perspectives and valuable insights on the healthcare sector as well as the various challenges that they faced, along with the learnings from their respective sectors. The discussions intended to foster cross-sectoral collaboration and stimulate innovative ideas for the advancement of healthcare.

### Dr Vinod K Paul, Member NITI Aayog, Government of India

Underscoring the initiatives taken by the Government of India to ensure access to affordable and quality healthcare, Dr Vinod K Paul, Member NITI Aayog, Government of India, reaffirmed the commitment to strengthen the primary healthcare system in the country. “Commitment to primary healthcare is strong and we are looking forward to a bigger partnership in secondary and tertiary care”, Dr Paul said.

He shared that our primary health centres (PHC) and sub-centres (SC) have been transformed into next level facilities under Ayushman Bharat- Health and Wellness Centres (AB-HWCs). Old PHC and SC were largely catering to the mother and child population along with focus on communicable diseases. Now we are moving towards comprehensive care including NCDs screening and treatment, mental health, geriatric care, palliation, ENT and ophthalmology etc. The government has created the infrastructure platform and has provided a new mid-level care provider called Community Health Officer, who is a trained BSc qualified professional with additional training and orientation for comprehensive primary care. Some states have appointed Ayush doctors for this purpose.



Dr Paul also informed the gathering that India has crossed the World Health Organisation (WHO) benchmark of 1 doctor per thousand for the allopath. Additionally, the number of Ayush doctors is 1.3. He added that, “We have a long way to go, surely, because the nations with which we compare ourselves have typically about three doctors per thousand and definitely two per thousand.” Further, he emphasized that, we need to make special and concerted efforts to increase Specialists in the country to atleast 4 to 5 times of the current number.

Dr Paul urged the industry to come forward in a big way and partner with the government in some of the key areas-

- **Partner for the AB-HWCs** for mental and geriatric health and other avenues to support the fulfilment of 12 envisioned comprehensive primary care packages. Legally allowed private practice should also be woven in for continuum of treatment.
- **Training of Specialists under the DNB program-** private healthcare providers should come forward and increase the DNB seats in their facilities to train the PGs through NBE.



- **Insurance cover for missing middle-** we need to plan for the health coverage of the population that is not covered under any insurance scheme. Private sector should come up with products that address the needs of this population, with coverage of 5L per person similar to AB-PMJAY.
- **Augmentation of healthcare infrastructure-** private sector needs to invest in increasing the bed strength in the country. Government of India had come up with some infrastructure financing schemes like the VGF scheme, Priority lending in social sector by RBI etc. However, there has not been much traction. We need to work together on how to utilise these schemes and further suggest on how to use blended finance, PPP and other avenues to create 1-1.5 million beds in next 5 years, especially in smaller towns and cities.
- **Specialisation in Family Medicine-** Significance of General Practice or Family Physician cannot be understated. Currently only 3 institutions, out of 387 PG medical colleges, have MD in Family Physician. It is important that maximum private medical colleges start this specialisation to include continuity of care into the medical curriculum and reduce fragmented care.
- **School health-** the government has actively produced a blueprint for a comprehensive school health program for the nation. According to recent study, 25% adolescents were found under stress; 10% were pre-diabetic; 5% were hypertensive and 57% girls & 31% boys were anaemic. Hence, it is crucial to join hands for a strong school health program across the county. Ideas from all stakeholders are welcomed by the government.

### Key Recommendations:

- **Access to Quality Healthcare** is the most crucial challenge in India, even more than affordability of health. This has been especially true for cities and towns beyond metros, apart from the rural and remote areas, which have seen even more challenges. It is important that we strive to serve the unserved- the rural as well as the middle population- through **business models that are sustainable and viable**.
- **School Education Sector:** The healthcare needs of school children have considerably changed over time. Due to the type of clientele schools deal with i.e., school children and their families, there is a need for close cooperation with the healthcare industry. There is resistance to any kind of medical service or emergency care being provided by schools. There is also a resistance in provisioning for a formal system for children with special needs or disabilities. Further, children are facing different healthcare issues mainly due to increasing lifestyle disorders as well as require diverse counselling services from primary to the age group of 18-19 years.
  - There is a need for **school-hospital tie-ups** that are not just for emergency care but cater to **continuous physical and mental healthcare** requirements of the children.
  - All **three stakeholders-** parents, healthcare providers and schools, should come together and resolve these issues.
- **Hospitality Sector:** Hospitals and hotels have many similarities- both have '**people serving people**' as their backbone. Further, hospitality and healthcare industry face some similar challenges such as **availability of land and manpower**, yet they need to co-exist with each other.
  - Shortage and cost of manpower, especially in tier II & III cities, is an issue faced by both the industries and hence adequate training and skilling of the workforce becomes an aspect. There is a need to increase the number of training institutions in both the sectors.
  - Availability and cost of land is the biggest challenge faced by the two industries. When hospitals buy land at commercial rates, which is very high, the project becomes unviable. To expand accessibility of healthcare resources, there is a need to have more private hospitals across the country, for which the issue of land should be resolved.

- The Government must come forward to provide a **unified infrastructure industry status** – this will give land at reasonable price, along with water, electricity, and other basic amenities, which are imperatives. Otherwise, industry ends up paying high commercial rates, leading up to inadequate returns on investment. If the industry infrastructure status is granted to both hospitality and healthcare, the development will be a lot easier, and the returns will be good.
- Parallels can be drawn in the education and healthcare sector too. They both have under-supply of quality education or training, especially in the public sector. It is crucial that we work towards **enhancing the quantity as well as the quality of education** across the sectors, and especially medical education.
- In India, **both public and private sectors have to work towards enhancing their capacities and quality and scale up**, to be able to bring in overall development in the social sectors like health and education. If the private facilities expand, more and more people who have the resources to buy the services will use the private facilities, and more of the public facilities will be available for use for the underprivileged population.

## “Empowering Her Health”: FICCI Stakeholders’ Consultation on Women and Health

Women's health is a critical component of women-led development, encompassing various essential aspects crucial for progress and empowerment. The well-being of women plays a pivotal role in enabling their active participation in decision-making processes, allowing them to contribute their unique perspectives and drive inclusive policies. Additionally, prioritizing women's health addresses the specific challenges they encounter, such as reproductive health, maternal care, and gender-based violence, ultimately leading to improved overall well-being. Furthermore, placing a strong emphasis on women's health is vital for the care sector, which heavily relies on women as caregivers.

India has made some significant strides in improving women’s health outcomes, particularly in the areas of maternal and reproductive health. Yet, despite the advances in medicine and technology, there are many challenges facing women’s health in India including barriers to access and affordability as well as gender inequality. The 5th NFHS in India revealed 60% of women face trouble accessing healthcare for themselves and highlighted the healthcare disparity between men and women. Further, according to the World Economic Forum’s 2023 Global Gender Gap Report, India ranks 127th out of 146 nations in terms of gender disparity.

There is an urgent need to address these challenges through continued investment in women’s health programs, particularly those focused on addressing the unique needs of women- whether it is for different socio-cultural settings or for various technologies and treatments.

The Consultation on ‘Empowering Her Health’ brought together key stakeholders from the government, healthcare industry, civil society, and women achievers, along with key opinion leaders, who delved into a multifaceted discussion addressing the critical aspects of women's health and empowerment.

The dialogue emphasized the **need for a paradigm shift in prioritizing women's health, urging women to make preventive healthcare a priority**. Education has emerged as a powerful tool, not only for promoting health in underprivileged areas but also for empowering women to take charge of their well-being. The staggering prevalence of preventable diseases and reproductive morbidity has underscored the urgent need for focused intervention. The discussion also brought attention to gender-sensitive research, economic benefits of investing in women's health, and the imperative for a demand-driven healthcare system.

The holistic approach, encompassing mental, physical, spiritual, and social well-being, was highlighted, along with the necessity to integrate traditional methods with modern medicine. The session concluded with a call for improved healthcare accessibility in rural areas, clear government policies on women's reproductive health, and a focus on effective program implementation to bring about tangible positive changes.

### Position Paper on “Empowering Her Health”

A Position Paper, developed by UN Women and supported by BMGF, Apollo Hospitals and FICCI, was released during the Stakeholders’ Consultation. The Paper provides a background on the concerns related to women’s health, key initiatives undertaken by the government and the need for Gender Equality and Gender Responsive Budgeting in our programmes.

[Click Here to download the Paper](#)

**Ms Roli Singh**, Additional Secretary & DG (CGHS), Ministry of Health and Family Welfare, Government of India Chaired the Stakeholders' Consultation on Women and Health and shared some valuable insights that will play a significant role in enhancing the empowerment of women's health status in India.

Ms Singh highlighted the significance of considering the socio-economic factors unique to each woman when discussing empowerment. She pointed out that the concept of empowerment holds varied meanings for each woman, stressing the importance of acknowledging these diverse perspectives and circumstances.

She emphasised the importance of understanding the health needs of women from different age groups and while talking about women's health and the importance of a gendered view of data she said "We are one of the few countries in the world to have adolescent health programs and there is a need to perform a more **gender-disaggregated analysis** of our programs because sometimes they are completely gender neutral. For example, NCDs is a rising problem and we have multiple programs to deal with the issue of NCDs but there is a need to analyse the programs through the gender lens. Data is something that needs to be thought of more scientifically and in a more robust way, to help understand where we are headed both programmatically as well as from the outcome's perspective. We need to see whether the programs are really outcome driven or are they mostly targeting numbers, the **focus should be on determining the end goals of screenings**".



Highlighting the presence of regional disparities within a diverse country like India, Ms Singh pointed out that it is evident that states which perform better in education, and economic indicators also excel in health parameters and witness a higher degree of women's empowerment.

Ms Singh further highlighted the **transformations being witnessed in the Health and Wellness Centres** of the country, specifically in the rural northern states. She noted a significant shift in perceptions, highlighting that people previously had hesitations about utilizing health centres. This shift, she emphasized, is attributed to the remarkable improvement in the ambience and facilities of Health & Wellness Centres (HWCs). The strategic implementation of branding and promotional efforts for health services played a critical role in altering public perception. Furthermore, she underscored the importance of **community engagement programs** as pivotal tools in extending the outreach of women-related health initiatives to the last mile.

While concluding her address she highlighted the imperative of fostering convergence among the education department, Integrated Child Development Services (ICDS), and other social reforms. She underscored that such collaboration is essential to enhance the accessibility of health services for women, recognizing the interconnected nature of health, education, and broader social initiatives. This call for convergence aims to create a **comprehensive and integrated approach**, ensuring that women can access healthcare seamlessly, supported by a synergistic effort across various sectors.

### **Key Discussions and Recommendations from the Consultation:**

- o In society today, most women neglect their healthcare needs, be it physiological or mental. This is not only due to the affordability of healthcare. The main reason is that a woman's health is often given lower priority. Due to societal expectations women often place their focus on addressing the needs of all other family members before their own, reinforcing the perception of women as the second gender. So, a woman needs to learn to put her health also as a priority and regularly go for checkups. The focus should be on **building an attitude amongst women for preventive healthcare**.

- The significance of **gender norms** in delineating societal roles for men and women is evident, with conventional expectations dictating women's responsibilities as caregivers for households and children. Addressing women's empowerment is not only pivotal for enhancing women's health but also holds the potential to positively impact the well-being of the entire family, recognizing the interconnectedness of women's roles as caregivers and the overall familial health.
- When women's empowerment is talked about, various parameters are looked at such as livelihoods and empowering women with education, but the critical aspect is **fair access to resources where health has emerged as one of the top resources**.
- Healthcare needs to be **made more accessible to women in rural areas**. The mobility of women is lesser than men. A man can go to a bigger city to get himself checked but a woman cannot do the same as easily since her leaving the house for the day impacts the household. Hence, we need to make technologies available that are accessible to the last mile and within reach of every woman.
- **Financial independence amongst women** serves as a catalyst for cultivating healthier and more informed future generations, enabling women to prioritize their well-being and contribute to a culture of proactive healthcare practices.
- **Education also plays a significant role in empowering women and promoting women's health**. When trained to conduct simple activities such as filling in patient information, the woman feels empowered. Hence, the healthcare industry needs to focus on women from small villages, as well as underprivileged women, and educate them.
  - Education is also integral in ensuring women's hygiene, which if taught to women from a young age will help in **promoting preventive healthcare**.
  - **Women-led institutions** offer important forums for exchanging information on health literacy and awareness and have positive influences on women's health.
- Globally 800 women per day die from preventable diseases, of which 20% are from India. According to a study, 20% of women screened for NCDs are diabetic, 23% are pre-diabetic, and 8% have hypertension. Women as caregivers often deprioritize their health and are the last to go for a screening. Disease management in women can be successful if diagnosed at early stages.
- There is need for more **R&D, clinical trials, and data that consider the gender lens and impact on women**, since certain conditions and medications affect women differently. E.g. cardiovascular diseases affect women differently than men. There is also a need to do more **gender-disaggregated analysis of government programs** to better understand the outcomes and impact.
- Indian women **carry a high burden of reproductive morbidity**. Hence this is an area that needs to be focused upon for various programs as well as research.
- **Innovation and Investments for women's health** need should be promoted. An investment of \$300 million today can generate close to \$13 billion in economic returns for societies by focusing on women's health. (According to a US [Study](#))
- **An important aspect to consider in women's health is the demand of the target group, the women themselves**. Healthcare is facing challenges in many areas, mainly in terms of women not coming forward to seek the kind of healthcare that is required for their wellbeing. In India, in terms of its capacities and regional disparities, we see that states doing well in health parameters are the ones where women are educationally and economically empowered and they come forward demanding health services. As a result, services need to keep up with the demand **as there is a demand-side accountability pressure which is essential for a public health service to do well**. The supply-driven way of thinking needs to be changed to one propelled by the demands of women. We must strive to achieve the optimal level between demand and supply to improve women's health.
- The **implementation of women-related government programmes needs more attention**. There are many programmes for women in India by the government, but the implementation is what matters

and can bring about real change in the country. We need to analyse the implementation and progress at various levels.

- At the AB-HWCs, it needs to be made sure that when women access these centres, they are examined and **asked about their health in totality**.
- In the context of **menstrual hygiene management**, much more openness is needed from people. They need to talk about the latest devices, not only sanitary pads. Menstrual cups which are environment friendly, cost-effective and reusable need to be promoted.
- Focus needs to be brought to empowerment of women in terms of **correct diagnosis and self-examination**. That will only be possible when we tap into all resources across the country. For example, to educate them regarding breast self-examination.
- **Mental health needs to be seen from a gender perspective**, as it often goes unnoticed.
- Ayurveda advocates for preventive and promotive health, and primary healthcare with home remedies. The most important aspect to focus on, according to Ayurveda, is the balanced diet, lifestyle, and the rest (proper sleep). So, we must support tradition with technology; and **ensure traditional methods are integrated with conventional medicine, as complementary medicine**. This will help us prevent the NCDs and improve women's overall health.
- There is a need to **increase awareness of aesthetic gynaecology**. For example, women going through symptoms such as vaginal looseness post-childbirth, dryness, and hot flashes during menopause. These conditions are not well treated often and hence this field requires more attention and awareness creation.
- There are **two areas in which the government needs to have a clear policy**:
  - i. **Abortion policy**- there have been contradictory rulings by the high courts; law says abortion is allowed in certain cases such as in minors but there has been a case where a minor was not allowed to terminate pregnancy. Hence the government needs to be clear on the stand for abortion as well as the implementation of those laws.
  - ii. **Menopause and menstruation policy**- there is a lack of unified policy for leaves and insurance cover for issues related to menopause or menstruation. The government needs to bring a clear policy for this, as was done for the child-care policy at the central government level.

However, the **private sector also needs to work out and adopt** menstruation and child-care related leave policies for women at workplace to support them and increase equity at workplace.

- **At the policymaker's level we need more women**, since only women can understand what women go through, such as during menopause and childbirth. Moreover, the government can make policies for women, but it cannot force people to participate in it, so the government may make use of **incentives** to ensure the people are being responsible and following the policies and guidelines.

Women in healthcare systems emerge as **dynamic agents of change**, wielding influence not only in reshaping service delivery but also in leadership roles, contributing to an enhanced quality of life for individuals across genders and age groups. Their impact is twofold: first, in revolutionizing the delivery of healthcare services, addressing unique needs and perspectives that may be overlooked; and second, **as leaders, women bring a transformative touch to the overall quality of life, fostering inclusivity and empathy that transcends gender and age boundaries**. Recognizing and promoting the pivotal role of women in healthcare, both as service providers and leaders, is essential for driving positive and enduring changes in the well-being of communities.

## Glimpses from the Sessions

### Session I: Roadmap for Making Cancer Care Affordable and Accessible in India



*L to R-* **Dr Monika Puri**, Chief Country Access & Policy Officer, Roche Pharma; **Mr Vineet Gupta**, Co-Lead, FICCI Task Force Cancer Care and Head - Government Affairs, Siemens Healthineers; **Ms Srimayee Chakraborty**, Partner-Healthcare, EY Business Consulting, India; **Ms Indrani Kaushal**, Joint Secretary, Ministry of Health & Family Welfare, Government of India; **Dr Rajendra Toprani**, Head & Neck Oncology Specialist, HCG Cancer Hospital; **Ms Shobha Mishra Ghosh**, Director & Head, Government Affairs & Policy, India & South Asia, GE Healthcare; **Mr Vicky Nanda**, Chief Operating Officer, NIRAMAI; **Mr Sudhakar Mairpadi**, Director- Government Affairs, BD India & South Asia

### Session II: New Age Healthcare Delivery Models



*L to R-* **Mr Lalit Mistry**, Partner and Co-Head, Healthcare Sector, KPMG, India; **Dr Vaibhav Kapoor**, Co-Founder, Pristyn Care; **Dr Ravi Gaur**, Founder DRG PATH Labs, Partner & Director UniDRG Specialty Labs; **Dr Om Manchanda**, Managing Director, Dr Lal PathLabs; **Dr Mahesh Joshi**, Co-Chair, FICCI Health Services Committee and President & CEO, Apollo Homecare; **Dr Harsh Mahajan**, Chair, FICCI Health Services Committee and Founder & Chief Radiologist, Mahajan Imaging and Labs; **Dr Bishnu Panigrahi**, Group Head- Medical Strategy & Operations Group, Fortis; **Mr Mandeep Singh Kumar**, VP and Country General Manager, Intuitive India; **Mr Gaurav Agarwal**, Co-Founder, TATA 1mg; **Dr Gaurav Thukral**, COO & EVP, Healthcare AtHome

### Session III: Fostering Resilient Economics



*Virtual - Dr Carsten Engel, CEO, International Society for Quality in Health Care (ISQua)*

*L to R- Dr Vishal Gandhi, Founder & CEO of BIORx Venture Advisor; Mr Gautam Khanna, CEO, PD Hinduja Hospital and MRC, Mumbai; Dr Sanjeev Singh, Co- Chair, FICCI Health Services Committee; Medical Director, Amrita Institute- Faridabad and Chief Medical Superintendent, AIMSRC Kochi; Dr K Madan Gopal, Advisor- Public Health Administration, National Health Systems Resource Centre (NHSRC), MoHFW, GoI*

### Session IV: Fireside Chat- 'Driving Investments in Healthcare'



*L to R- Dr Raajiv Singhal, Founding Member, Managing Director & CEO of Marengo Asia Healthcare; Dr Nandakumar Jairam, Chairman- Medica Synergie Hospitals; Advisor- Sheares Health care India; Chairman- Shyamrad; Former Chairman-NABH; Dr Sanjeev Singh, Co- Chair, FICCI Health Services Committee; Medical Director, Amrita Institute- Faridabad and Chief Medical Superintendent, AIMSRC Kochi*



## Session V: Leveraging Technology for Transforming Primary Healthcare



**L to R- Dr Swati Mahajan**, Lead- Health Systems, PATH South Asia; **Dr Akshay Jain**, Joint Director, National Health Authority, Government of India; **(Hony) Brig Dr Arvind Lal**, Chair-FICCI Swasth Bharat (Public Health) Task Force; Executive Chairman, Dr Lal PathLabs Ltd., and Managing Trustee, ALVL Foundation; **Mr Karan Singh**, Chairman, Bain & Co. India; **Mr Dhiraj Sood**, General Manager, Cepheid India

## Session VI: Perspectives on Healthcare



**L to R- Ms Ritika Pandey**, Associate Vice President, IPE Global; **Mr Shekhar Gupta**, Editor-in-Chief and Chairman, ThePrint; **Dr Jyotsna Suri**, Past President, FICCI and Chairperson and Managing Director, Bharat Hotels Ltd; **Dr Vinod K Paul**, Hon'ble Member, NITI Aayog, Government of India; **Dr Harsh Mahajan**, Chair, FICCI Health Services Committee and Founder & Chief Radiologist, Mahajan Imaging & Labs; **Mr V K Shunglu**, Chairman, DPS Society; **Dr Dharminder Nagar**, MD, Paras Health

## “Empowering Her Health”: FICCI Stakeholders’ Consultation on Women and Health



*L to R-* **Ms Amrita Sekhar**, Senior Program Officer, Innovative Health Tools, Bill & Melinda Gates Foundation; **Dr Suneela Garg**, Chair Program Advisory Committee NIHFWD; Professor of Excellence; **Ms Upasana Arora**, Co-Chair, FICCI MVT Committee and Managing Director, Yashoda Super Speciality Hospitals; **Ms Roli Singh**, Additional Secretary & DG (CGHS), Ministry of Health and Family Welfare, Government of India; **Ms Ritu Mahajan**, Co-founder & Executive Director, Mahajan Imaging & Labs; **Dr Tanuja Nesari**, Director, All India Institute of Ayurveda (AIIA); **Ms Susan Ferguson**, Country Representative- India, UN Women; **Ms Vinita Sethi**, Chief Corporate Affairs Officer, Apollo Hospitals Group

## 15<sup>th</sup> FICCI Healthcare Excellence Awards 2023

October 26, 2023 at Hotel Le Meridien, New Delhi

The FICCI Healthcare Excellence Awards instituted in 2009, aim to recognize best practices in the industry by felicitating public and private organizations and individuals for their exemplary contributions to the health sector through innovations for increased efficiency, affordability and improved performance of healthcare delivery at large.

The 15<sup>th</sup> edition of FICCI Healthcare Excellence Awards received around 200 applications from across the healthcare sector for a diverse mix of categories including Excellence in Patient Safety & Care, Excellence in Patient Service Delivery, Excellence in Community Engagement, Training and Skill Development Initiative of the Year and Digital Transformation Initiative of the Year. Ernst & Young LLP is the official tabulator and the Awards are supported by Astron Healthcare.

The participants were evaluated by a high-level independent Jury panel Chaired by Mr C K Mishra, Former Secretary, Ministry of Health & Family Welfare and Ministry of Environment, Forest and Climate Change, Government of India. Initiative, Sustainability, Scalability and Impact formed the key criteria for evaluation.

Ms Sharmila Tagore, Film Personality graced the occasion as Chief Guest and presented the awards to the winners.



Also, doyens of the healthcare industry were felicitated with Individual Awards -

- Lifetime Achievement in Healthcare Industry Award to Dr Yash Paul Bhatia, Chairman & MD, Astron Group
- Healthcare Personality of the Year Award to Dr Vikram Shah, Chairman & MD, Shalby Ltd.
- Healthcare Humanitarian Award to Dr Ravi Kannan, Director, Cachar Cancer Hospital and Research Center, Silchar
- Chairman's Award for Outstanding Leadership in Healthcare to Dr Bishnu Prasad Panigrahi, Group Head, Medical Strategy & Operations, Fortis Healthcare and Ms Gracy Mathai, CEO, Baby Memorial Hospital, Calicut, Kerala



## hAwards Interim Jury

**INTERIM JURY**

<p><b>Mr Ayanabh Debgupta</b> Co-Founder &amp; Group President Medica Hospitals</p>	<p><b>Dr Garima Singh</b> Founder &amp; CEO, Axia Health Assist Pvt Ltd and Axia Health Services</p>	<p><b>Ms Harmala Gupta</b> Founder-President CanSupport</p>	<p><b>Lt (Gen) Dr Rajeev Mohan Gupta</b> HoD Microbiology ESI Medical College &amp; Hospital, Faridabad</p>
<p><b>Dr Vikrant Mohanty</b> Prof &amp; HOD- Public Health Dentistry, MAIDS</p>	<p><b>Mr Ashish Jain</b> CEO Healthcare Sector Skill Council</p>	<p><b>Dr SB Bhattacharyya</b> Founder &amp; CEO, Bhattacharyyas Clinical Records Research &amp; Informatics</p>	<p><b>Dr Vikas Malhotra</b> Director- Professor &amp; Head - Department of ENT, Baba Saheb Ambedkar Medical College</p>
<p><b>Mr Manish Jain</b> Director Yes2Treatment</p>	<p><b>Dr Sanjay Sood</b> Associate Director &amp; HoD Health Informatics, CDAC</p>	<p><b>Ms Anamika Sikri</b> COO Pericia Healthcare</p>	<p><b>Dr Punam Bajaj</b> Director NABH</p>
			<p><b>Dr Sanghita Bhattacharya</b> Professor- Community Health &amp; Engagement, PHFI</p>

**INTERIM JURY**

<p><b>Dr Bishnu Prasad Panigrahi</b> Group Head- Medical Strategy &amp; Operations, Fortis Healthcare</p>	<p><b>Dr Y P Bhatia</b> Chair- Awards Core Group &amp; Chairman and Managing Director, Astron Group</p>	<p><b>Dr Ravi Gaur</b> Co-Chair Awards Core Group; Founder DRG PATH Labs, Partner &amp; Director UniDRG Specialty Labs, Delhi</p>	<p><b>Cdr Navneet Ball</b> Senior Vice President &amp; Group Head - Advocacy &amp; Strategic Relations, Narayana Hrudayalaya</p>
<p><b>Dr Arati Verma</b> Sr Vice President - Medical Quality, Max Healthcare</p>	<p><b>Prof Arnab K Laha</b> Chairperson, Center for Management of Health Services, IIM Ahmedabad</p>	<p><b>Dr Ramachandran Balaji</b> Director - Advisory Services Libra Social Research Foundation</p>	<p><b>Dr JK Das</b> Former Director NIHFW, GoI</p>
<p><b>Lt. Gen. (Dr) A K Das</b> Group Medical Director Marengo Asia Healthcare</p>	<p><b>Dr Atul Kochhar</b> CEO NABH</p>	<p><b>Dr Sameer Gupta</b> Director, Umkal Hospital &amp; Director Cardiac Cathlab, Metro Hospital &amp; Heart Institute</p>	<p><b>Dr Sajal Sen</b> COO Assam Cancer Care Foundation</p>

## Awards Grand Jury

### GRAND JURY

<p><b>Jury Chair</b></p> <p><b>Mr C K Mishra</b> Former Secretary, Ministry of Health &amp; Family Welfare and Ministry of Environment Forest &amp; Climate Change Government of India</p>		<p><b>Jury Co-Chair</b></p> <p><b>Dr Harsh Mahajan</b> Chair-FICCI Health Services Committee; Founder &amp; Chief Radiologist, Mahajan Imaging &amp; Labs</p>	
<p><b>Dr Narottam Puri</b> Principal Advisor-QCI; Board Member &amp; Former Chairman- NABH; Advisor- FICCI Health Services Advisor- Medical Operations, Fortis Healthcare Ltd.</p>	<p><b>(Hony) Brig Dr Arvind Lal</b> Chair-FICCI Swasth Bharat TF, Executive Chairman, Dr Lal PathLabs Ltd and Managing Trustee, ALVL Foundation</p>	<p><b>Dr Nandakumar Jairam</b> Chairman- Medica Group of Hospitals; Advisor- Sheares India; Former Chairman NABH and Columbia Asia Hospitals India</p>	<p><b>Dr Y P Bhatia</b> Chair- Awards Core Group &amp; Chairman and Managing Director, Astron Group</p>
<p><b>Dr Alok Roy</b> Past Chair- FICCI Health Services Committee &amp; Senior Healthpreneur</p>	<p><b>Mr Gautam Khanna</b> Immd. Past Chair- FICCI Health Services Committee and CEO, PD Hinduja Hospital &amp; MRC</p>	<p><b>Dr Bishnu Prasad Panigrahi</b> Group Head- Medical Strategy &amp; Operations Fortis Healthcare</p>	<p><b>Dr Neeru Bhatia</b> Executive Director Astron Group</p>

### GRAND JURY

<p><b>Dr Sharad Agarwal</b> National President Indian Medical Association</p>	<p><b>Dr Arun Agarwal</b> Co-Chair- FICCI Swasth Bharat TF &amp; Medical Advisor- Innovation, Education &amp; Clinical Excellence, Apollo Hospitals Group</p>	<p><b>Dr Om Manchanda</b> Managing Director Dr Lal PathLabs Ltd</p>	<p><b>Dr K Madan Gopal</b> Senior Consultant National Health Systems Resource Centre Government of India</p>
<p><b>Dr Ravi Gaur</b> Co-Chair Awards Core Group; Founder DRG PATH Labs, Partner &amp; Director UNIDRG Specialty Labs, Delhi</p>	<p><b>Mr Neeraj Jain</b> Country Director- India PATH</p>	<p><b>Dr Tavpritesh Sethi</b> Associate Professor IIIT Delhi</p>	

## Awards Winners- Individuals

### Lifetime Achievement in Healthcare Industry



**Dr Yash Paul Bhatia,**  
Chairman & Managing Director, Astron Group

### Healthcare Personality of the Year



**Dr Vikram Shah,**  
Chairman & Managing Director, Shalby Limited

### Healthcare Humanitarian



**Dr Ravi Kannan,** Director, Cachar Cancer Hospital and Research Center

### Chairman's Award for Outstanding Leadership in Healthcare



**Dr Bishnu Prasad Panigrahi,**  
Group Head, Medical Strategy & Operations, Fortis Healthcare

**Ms Gracy Mathai**  
CEO, Baby Memorial Hospital Calicut

## Awards Winners- General Categories



<b>Excellence in Patient Safety &amp; Care</b>	
<b>Private Hospitals</b>	<b>Zydus Hospital, Ahmedabad</b>
<b>Public Hospitals</b>	<b>Civil Hospital Ahmedabad</b>
<b>Other Healthcare Providers</b>	<b>Dr Dangs Lab LLP</b>
	<b>Venus Remedies Limited</b>
<b>Excellence in Patient Service Delivery</b>	
<b>Private Hospitals</b>	<b>Padval Women's Superspeciality Hospital</b>
	<b>Bai Jerbai Wadia Hospital For Children (Special Jury Recognition)</b>
<b>Public Hospitals</b>	<b>King George's Medical University</b>
<b>Other Healthcare Providers</b>	<b>Care Health Insurance Limited</b>
<b>Start-ups</b>	<b>TechEagle Innovations Pvt Ltd</b>
<b>Training &amp; Skill Development Initiative of the Year</b>	
<b>Hospitals/Health-tech/Other healthcare providers</b>	<b>Alcon Laboratories India Pvt LTD</b>
<b>Medical Institutes/Colleges</b>	<b>Dr Ram Manohar Lohia Institute of Medical Sciences, Lucknow</b>
<b>Excellence in Community Engagement</b>	
<b>NGOs/Not for profit organisations</b>	<b>Genesis Foundation</b>
<b>For Profit Organisations</b>	<b>Ganga Medical Centre and Hospitals Pvt Ltd - Project Shakti</b>
<b>Digital Transformation Initiative of the Year</b>	
<b>Hospitals/ Other Healthcare Providers</b>	<b>Civil Hospital Ahmedabad</b>
<b>Start-Ups</b>	<b>ANH Technologies Private Ltd - ClaimTherapist</b>

## Media Coverage- Highlights

# Business Standard

New Delhi, Saturday, 28 October 2023 (Page No-06)

## Addressing human resource issues in hospitals: V K Paul

The government is looking to address issue of lack of human resource in medical institutions, Dr V K Paul, member, NITI Aayog said on Friday. Addressing the FICCI Heal Conference in New Delhi, Paul said that the government had already doubled the number of medical colleges from 387 to 76. This had been accompanied by a rise in the number of MBBS seats from 52,000 to about 108,000 and postgraduate seats from 32,000 to over 68,000.

SANKET KHUL



**“Commitment to primary healthcare is strong...”: NITI Aayog’s Dr VK Paul at ‘FICCI HEAL 2023’**

Underscoring the initiatives taken by the Government of India to ensure access to quality healthcare, Dr Vinod K Paul, Member NITI Aayog on Friday reaffirmed the commitment to strengthen the primary healthcare system in the country.

# millenniumpost

New Delhi, Friday, 27 October 2023 (Page No-06)

## Industry should come forward in promoting organ donation: Baghel

OUR CORRESPONDENT

**NEW DELHI:** Emphasising that the government is working towards providing last-mile coverage to provide health services to remote areas in the country, Union Minister of State for Health and Family Welfare SP Singh Baghel said on Thursday that there is a need to address the healthcare concerns of Indians who are not able to access quality healthcare.

While addressing the 17th edition of FICCI HEAL 2023, Baghel further said that under the Pradhan Mantri Jan Arogya Yojna (PMJAY), the government is trying to provide medical coverage to citizens who cannot access afford-



able healthcare. Baghel also emphasised the need to promote organ donation and blood donation through massive campaigns and urged the industry to come forward to play a lead role in promoting these across the country.

On the occasion, Dr Harsh Mahajan, chair, FICCI Health Services Committee and founder of Mahajan Imaging and Labs, said that

**‘Under the Pradhan Mantri Jan Arogya Yojna (PMJAY), the government is trying to provide medical coverage to citizens who cannot access affordable healthcare’**

the ‘METAmorphosis’ in healthcare is deeply rooted in the adoption of emerging technologies such as artificial intelligence, genomics, and precision medicine, which are revolutionising diagnosis, treatment, and healthcare management.



CONTACT US: SCREEN READER ACCESS: ARADHYANI, NATIONAL NEWS, ALL INDIA RADIO NEWS

English

Last Updated Oct 29 2023 1:39PM

NEWS HIGHLIGHTS - US Embassy & consulates in India issued one lakh forty thousand student visas between October 2022 and September 2023

National News

Last Updated: Oct 26, 2023, 8:09PM

## Govt is working towards providing last-mile coverage to provide health services to remote areas, says MoS SP Singh Baghel

Minister of State for Health and Family Welfare SP Singh Baghel, today said that the government is working towards providing last-mile coverage to provide health services to remote areas in the country.

Addressing the 17th edition of FICCI HEAL 2023, in New Delhi the Minister said, there is a need to address the healthcare concerns of Indians who are not able to access quality healthcare.

Mr. Baghel said that under the Ayushman Bharat, Digital Mission (ABDM), the government, through telemedicine, is trying to provide medical coverage to citizens who cannot access affordable healthcare.



## THE TIMES OF INDIA

## Niti Aayog's VK Paul urges for more quality healthcare from private sector

PTI / Updated: Oct 27, 2023, 19:31 IST

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### New For You



Nagaland Lottery results: Winning numbers of Dear Sandpiper Evening results

Dr VK Paul, a member of NITI Aayog, has called for increased support from the private sector to deliver quality healthcare in India. He emphasized the government’s commitment to strengthening the primary healthcare system and expressed a desire for greater partnerships in secondary and tertiary care. India’s doctor-population ratio is better than the WHO’s benchmark, but there is still progress to be made. The FICCI HEAL conference also highlighted the importance of leveraging technology and innovation to improve healthcare delivery.

## FICCI Launches ‘Empowering Her Health Initiative’ At 17th Edition Of HEAL 2023

By India Education Diary ... On Oct 28, 2023

Share

**NEW DELHI:** Ms Roli Singh, Additional Secretary & DG (CGHS), Ministry of Health and Family Welfare, Govt of India while applauding the progress made so far in terms of women’s health, today asserted that the success of the government schemes are determined by how well they are implemented on the ground. “It is not only the schemes we design, but how they are implemented that makes the difference,” she added.

Addressing the session ‘Empowering Her Health’ during the ‘FICCI HEAL 2023’, Ms Singh stated that India has made great strides in providing quality healthcare access to women, with a lot of innovation happening, and the results are visible to all.

“Things are changing very fast. The look and feel of the sub-centres have changed. How you brand and position your health centre is also making a significant difference. It’s not only about schemes but also about the continuous provision of primary healthcare that will change the way we perceive health,” she said.

## ThePrint

POLITICS GOVERNANCE ECONOMY DEFENCE INDIA GROUND REPORTS OPINION EVENTS VIDEO MORE

Home > Health > Tech changing healthcare, need ‘uniform, progressive regulations’, FICCI report urges govt

## Tech changing healthcare, need ‘uniform, progressive regulations’, FICCI report urges govt

Report by FICCI and consultancy firm KPMG says ‘new-age healthcare’ models offering patients more control over health and wellness management, health data and choice of providers.

SUMI SUKANYA DUTTA 27 October, 2023 05:59 pm IST

## Sharmila Tagore Praises Healthcare Sector at 15th FICCI Awards

ENTERTAINMENT

MINUTES TO READ OCT 27, 2023

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News in the domain of Advertising, Marketing, Media and Business of



Lauding the incredible progress of the healthcare sector in India, Ms Sharmila Tagore, a celebrated Film Personality, yesterday said that India has come a long way in terms of healthcare advancement, but there is a need to prioritise rural healthcare.

## 17th edition of FICCI HEAL 2023 discuss various facets of emerging healthcare delivery landscape in India

EH News Bureau ... On Oct 28, 2023

UNCATEGORIZED





## FICCI HEAL- Program & Speakers

Day 1- Oct 26, 2023 (Thursday)	
10:00 am – 11:15 am	Session I <b>Roadmap for Making Cancer Care Affordable and Accessible in India</b>
	<i>Convenors-</i> <ul style="list-style-type: none"> <li>• <b>Mr Raj Gore</b>, Co-Lead, FICCI Task Force Cancer Care and CEO, Healthcare Global Enterprises Limited (HCG) and</li> <li>• <b>Mr Vineet Gupta</b>, Co-Lead, FICCI Task Force Cancer Care and Head - Government Affairs, Siemens Healthineers</li> </ul>
	<i>Chair:</i> <b>Ms Indrani Kaushal</b> , Joint Secretary, Ministry of Health & Family Welfare, Government of India
	<i>Moderator-</i> <b>Ms Srimayee Chakraborty</b> , Partner-Healthcare, EY Business Consulting, India
	<i>Panelists -</i> <ul style="list-style-type: none"> <li>• <b>Dr Rajendra Toprani</b>, Head &amp; Neck Oncology Specialist, HCG Cancer Hospital</li> <li>• <b>Dr Monika Puri</b>, Chief Country Access &amp; Policy Officer, Roche Pharma</li> <li>• <b>Ms Shobha Mishra Ghosh</b>, Director &amp; Head, Government Affairs &amp; Policy, India &amp; South Asia, GE Healthcare</li> <li>• <b>Mr Vineet Gupta</b>, Co-Lead, FICCI Task Force Cancer Care and Head - Government Affairs, Siemens Healthineers</li> <li>• <b>Mr Vicky Nanda</b>, Chief Operating Officer, NIRAMAI</li> <li>• <b>Mr Sudhakar Mairpadi</b>, Director- Government Affairs, BD India &amp; South Asia</li> </ul>
11:15 am – 12:45 pm	Session II <b>New Age Healthcare Delivery Models</b>
	<i>Convenor-</i> <b>Dr Mahesh Joshi</b> , Co-Chair, FICCI Health Services Committee and President & CEO, Apollo Homecare
	<i>Chair-</i> <b>Dr Harsh Mahajan</b> , Chair, FICCI Health Services Committee and Founder & Chief Radiologist, Mahajan Imaging and Labs
	<i>Moderator-</i> <b>Mr Lalit Mistry</b> , Partner and Co-Head, Healthcare Sector, KPMG, India
	<i>Panelists-</i> <ul style="list-style-type: none"> <li>• <b>Dr Bishnu Panigrahi</b>, Group Head- Medical Strategy &amp; Operations Group, Fortis Healthcare Limited</li> <li>• <b>Dr Om Manchanda</b>, Managing Director, Dr Lal PathLabs</li> <li>• <b>Dr Mahesh Joshi</b>, Co-Chair, FICCI Health Services Committee and President &amp; CEO, Apollo Homecare</li> <li>• <b>Mr Mandeep Singh Kumar</b>, VP and Country General Manager, Intuitive India</li> <li>• <b>Dr Ravi Gaur</b>, Founder DRG PATH Labs, Partner &amp; Director UniDRG Specialty Labs</li> <li>• <b>Mr Gaurav Agarwal</b>, Co-Founder, TATA 1mg</li> </ul>

	<ul style="list-style-type: none"> <li>• <b>Dr Gaurav Thukral</b>, COO &amp; EVP, Healthcare AtHome</li> <li>• <b>Dr Vaibhav Kapoor</b>, Co-Founder, Pristyn Care</li> </ul>
<b>1:00 pm – 2:00 pm</b>	Lunch Break
<b>2:00 pm – 3:30 pm</b>	<b>Inaugural Session</b>
	<p><b>Welcome Address</b>  <b>Dr Narottam Puri</b>, Advisor- FICCI Health Services and MVT Committees; Principal Advisor- QCI; Board Member &amp; Former Chairman- NABH; Advisor-Medical Operations, Fortis Healthcare Ltd</p> <p><b>Theme Address</b>  <b>Dr Harsh Mahajan</b>, Chair, FICCI Health Services Committee and Founder &amp; Chief Radiologist, Mahajan Imaging and Labs</p> <p><b>Keynote Address</b>  <i>“Leadership- insights on capacity building and scalability in Healthcare”</i>  <b>Dr Ajay K Singh</b>, Senior Associate Dean for Postgraduate Medical Education; Director, MMSCI, Harvard Medical School</p> <p><b>Release of Knowledge Paper</b>  FICCI-KPMG Knowledge Paper on <b>“New age healthcare delivery models in India”</b></p> <p><b>Guest of Honour</b>  <b>Prof S P Singh Baghel</b>, Hon’ble Minister of State, Ministry of Health &amp; Family Welfare, Government of India</p> <p><b>Concluding Remarks and Vote of Thanks</b>  <b>Dr Sanjeev Singh</b>, Co-Chair, FICCI Health Services Committee; Medical Director, Amrita Institute- Faridabad and Chief Medical Superintendent, AIMSRC Kochi</p> <p><b>On Dais</b>  <b>(Hony) Brig Dr Arvind Lal</b>, Chair, FICCI Swasth Bharat Task Force; Executive Chairman, Dr Lal PathLabs and Managing Trustee, ALVL Foundation  <b>Dr Mahesh Joshi</b>, Co-Chair, FICCI Health Services Committee and President &amp; CEO, Apollo Homecare</p>
<b>3:45 pm – 5:15 pm</b>	<b>Session III</b> <b>Fostering Resilient Economics</b>
	<p><b>Convenor- Dr Sanjeev Singh</b>, Co-Chair, FICCI Health Services Committee; Medical Director, Amrita Institute- Faridabad and Chief Medical Superintendent, AIMSRC Kochi</p>
	<ul style="list-style-type: none"> <li>• <b>Sustainable Models</b>  <i>The Learning Healthcare System as an international benchmark and best practice</i>  - <b>Dr Carsten Engel</b>, CEO, International Society for Quality in Health Care (ISQua)</li> <li>• <b>Demystifying balance sheets</b>  <i>How do we balance the balance sheets in a Corporate Hospital?</i>  - <b>Mr Gautam Khanna</b>, CEO, PD Hinduja Hospital and MRC, Mumbai</li> <li>• <b>Nuances of Smart Hospital - Financing and viability in private healthcare</b>  <i>How do we perform economic evaluation and take steps to maintain their viability?</i>  - <b>Dr Vishal Gandhi</b>, Founder &amp; CEO of BIORx Venture Advisor</li> <li>• <b>Financing and viability in public health</b></li> </ul>

	<p><i>How do we perform economic evaluation of the national programs and maintain their viability?</i></p> <ul style="list-style-type: none"> <li>- <b>Dr K Madan Gopal</b>, Advisor- Public Health Administration, National Health Systems Resource Centre (NHSRC), MoHFW, GoI</li> <li>• <b>Cost of Poor Quality- Process efficiency improvement</b></li> </ul> <p><i>How do we enhance the process efficiencies, reduce additional costs in the system? What is the cost of poor quality?</i></p> <ul style="list-style-type: none"> <li>- <b>Dr Sanjeev Singh</b>, Co- Chair, FICCI Health Services Committee; Medical Director, Amrita Institute- Faridabad and Chief Medical Superintendent, AIMSRC Kochi</li> </ul>
<b>5:15pm – 6:00 pm</b>	<p>Session IV</p> <p><b>Fireside Chat- ‘Driving Investments in Healthcare’</b></p>
	<p><i>Convenor-</i> <b>Dr Sanjeev Singh</b>, Co-Chair, FICCI Health Services Committee; Medical Director, Medical Director, Amrita Institute- Faridabad and Chief Medical Superintendent, AIMSRC Kochi</p>
	<p><i>In conversation-</i></p> <ul style="list-style-type: none"> <li>• <b>Dr Nandakumar Jairam</b>, Chairman- Medica Synergie Hospitals; Advisor- Sheares Health care India; Chairman- Shyamrad; Former Chairman-NABH and</li> <li>• <b>Dr Raajiv Singhal</b>, Founding Member, Managing Director &amp; CEO, Marengo Asia Healthcare</li> </ul>
<b>7:00 pm - 8:00 pm</b>	<p><b>15<sup>th</sup> FICCI Healthcare Excellence Awards</b></p> <p>Venue: <b>Hotel Le Meridien</b>, New Delhi</p>
<b>8:30 pm onwards</b>	<p>Networking Dinner</p>

Day 2- Oct 27, 2023 (Friday)	
9:30 am – 11:00 am	<p>Session V</p> <p><b>Leveraging Technology for Transforming Primary Healthcare</b></p>
	<p><i>Convenor- (Hony) Brig Dr Arvind Lal</i>, Chair-FICCI Swasth Bharat (Public Health) Task Force; Executive Chairman, Dr Lal PathLabs Ltd., and Managing Trustee, ALVL Foundation</p>
	<p><i>Moderator- Mr Karan Singh</i>, Chairman, Bain &amp; Co. India</p>
	<p><i>Panelists:</i></p> <ul style="list-style-type: none"> <li>• <b>Dr Akshay Jain</b>, Joint Director, National Health Authority, Government of India</li> <li>• <b>Dr Sabahat Azim</b>, Founder and Chairman, Glocal Healthcare Systems Pvt Ltd.</li> <li>• <b>Dr Swati Mahajan</b>, Lead- Health Systems, PATH South Asia</li> <li>• <b>Mr Dhiraj Sood</b>, General Manager, Cepheid India</li> </ul>
11:30 am – 1:00 pm	<p>Session VI</p> <p><b>Perspectives on Healthcare</b></p>
	<p><i>Convenor &amp; Moderator- Dr Harsh Mahajan</i>, Chair, FICCI Health Services Committee and Founder &amp; Chief Radiologist, Mahajan Imaging &amp; Labs</p>
	<p><i>Chair:</i></p> <p><b>Dr Vinod K Paul</b>, Hon’ble Member, NITI Aayog, Government of India</p>
	<p><i>Speakers-</i></p> <ul style="list-style-type: none"> <li>• <b>Mr V K Shunglu</b>, Chairman, DPS Society</li> <li>• <b>Dr Jyotsna Suri</b>, Past President, FICCI and Chairperson and Managing Director, Bharat Hotels Ltd.</li> <li>• <b>Mr Shekhar Gupta</b>, Editor-in-Chief and Chairman, ThePrint</li> <li>• <b>Ms Ritika Pandey</b>, Associate Vice President, IPE Global</li> <li>• <b>Dr Dharminder Nagar</b>, MD, Paras Health</li> </ul>
1:00 pm – 2:00 pm	Lunch Break
2:00 pm – 4:30 pm	<p><b>“Empowering Her Health”</b></p> <p>FICCI Stakeholders’ Consultation on Women and Health</p>
	<p><i>Chair:</i></p> <p><b>Ms Roli Singh</b>, Additional Secretary &amp; DG (CGHS), Ministry of Health and Family Welfare, Government of India</p>

	<p><i>Special Guests:</i></p> <ul style="list-style-type: none"> <li>• <b>Ms Ritu Mahajan</b>, Co-founder &amp; Executive Director, Mahajan Imaging &amp; Labs</li> <li>• <b>Dr Tanuja Nesari</b>, Director, All India Institute of Ayurveda (AIIA)</li> <li>• <b>Ms Upasana Arora</b>, Co-Chair, FICCI MVT Committee and Managing Director, Yashoda Super Speciality Hospitals</li> <li>• <b>Ms Vinita Sethi</b>, Chief Corporate Affairs Officer, Apollo Hospitals Group</li> <li>• <b>Ms Amrita Sekhar</b>, Senior Program Officer, Innovative Health Tools, Bill &amp; Melinda Gates Foundation</li> <li>• <b>Dr Suneela Garg</b>, Chair Program Advisory Committee NIHF; Professor of Excellence</li> </ul>
	<p><i>Moderator:</i>  <b>Ms Susan Ferguson</b>, Country Representative- India, UN Women</p>
<p><b><i>Open House Consultation with the Participants</i></b></p>	
	<p><i>Participants:</i></p> <ul style="list-style-type: none"> <li>• Women Achievers in Healthcare Sector</li> <li>• Representatives of Government and Multilateral Organisations</li> <li>• Civil Society and Legal Representatives</li> <li>• Key Healthcare Industry Leaders</li> <li>• Healthcare Providers</li> <li>• Pharma, Medical devices &amp; Equipment companies</li> <li>• HealthTech Startups</li> <li>• AYUSH &amp; Wellness</li> <li>• Health insurance companies</li> </ul>
<p><b><i>Closing Remarks</i></b></p>	

## About FICCI

### Federation of Indian Chambers of Commerce and Industry

Established in 1927, FICCI is the largest and oldest apex business organisation in India. Its history is closely interwoven with India's struggle for independence, its industrialization, and its emergence as one of the most rapidly growing global economies.

A non-government, not-for-profit organisation, FICCI is the voice of India's business and industry. From influencing policy to encouraging debate, engaging with policy makers and civil society, FICCI articulates the views and concerns of industry. It serves its members from the Indian private and public corporate sectors and multinational companies, drawing its strength from diverse regional chambers of commerce and industry across states, reaching out to over 2,50,000 companies.

FICCI provides a platform for networking and consensus building within and across sectors and is the first port of call for Indian industry, policy makers and the international business community.

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- **Beena Mulani**, Executive Officer- MedTech, FICCI
- **Shweta Singh**, Senior Assistant Director- MedTech, FICCI
- **Himanshi Kaushik**, Research Associate- Life Sciences, FICCI
- **Shubhankar Barbalia**, Consultant, FICCI
- **Jishan Khan**, Consultant- MVT & AYUSH, FICCI
- **Diwakar Mishra**, Consultant, FICCI
- FICCI Teams of **Web Initiatives, IT, Media, Hospitality, Logistics, Publishing** and all others who have supported the conference.

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