

# NATHEALTH Western Region Roadshow: Healthcare priorities of Nagpur district & Vidarbha region

Faster. Stronger. Together.



Organized by NATHEALTH

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# Introduction

NATHEALTH Western Region Roadshow - Healthcare priorities of Nagpur district & Vidarbha region was organized at Nagpur & was the third such event in the NATHEALTH Regional Healthcare Dialogue Series.

The Series aims to discover and highlight the priorities of India's regional healthcare hubs, by collaborating and fostering relationships with regional players who have firm familiarity with the specific needs of the area. The role of this dialogue is to bring the best from the Nagpur district and the Vidarbha region, by building a sustainable and robust network with all local stakeholders and federations. The aim is to promote local expertise by extending NATHEALTH's Regional Chapters and to offer knowledge and support.

The NATHEALTH 3.0 Agenda, which focuses on healthcare infrastructural expansion, digital healthcare, holistic innovation, healthcare globalization and health system evolution (Aarogya Bharat) was also discussed in light of the unique regional needs of Nagpur in particular, and the Vidarbha region at large. The event drew large attendance of key players and stakeholders from the healthcare industry of the region.

## **Unlocking the latent potential of Nagpur & Vidarbha**

The agenda for the session was to highlight the specific needs of the healthcare stakeholders and people in Nagpur by discussing key issues. NATHEALTH and its partners had previously initiated market research of the sector, and this roadshow kickstarted engagement with the region in the spotlight. The spotlight region is endowed with several good quality healthcare institutions, attracting people from neighboring states, especially from Madhya Pradesh, Chhattisgarh and Odisha, who come to Nagpur & Vidarbha for various medical treatments. This reveals the immense potential for the region to develop into a healthcare powerhouse of Western India.

## **Unified front: growing faster and stronger, together**

A collaborative approach that leads to the creation of a symbiotic relationship with regional players will help in the delivery of stronger outcomes. Having a unified voice will enable healthcare players to shape policies and carry out work

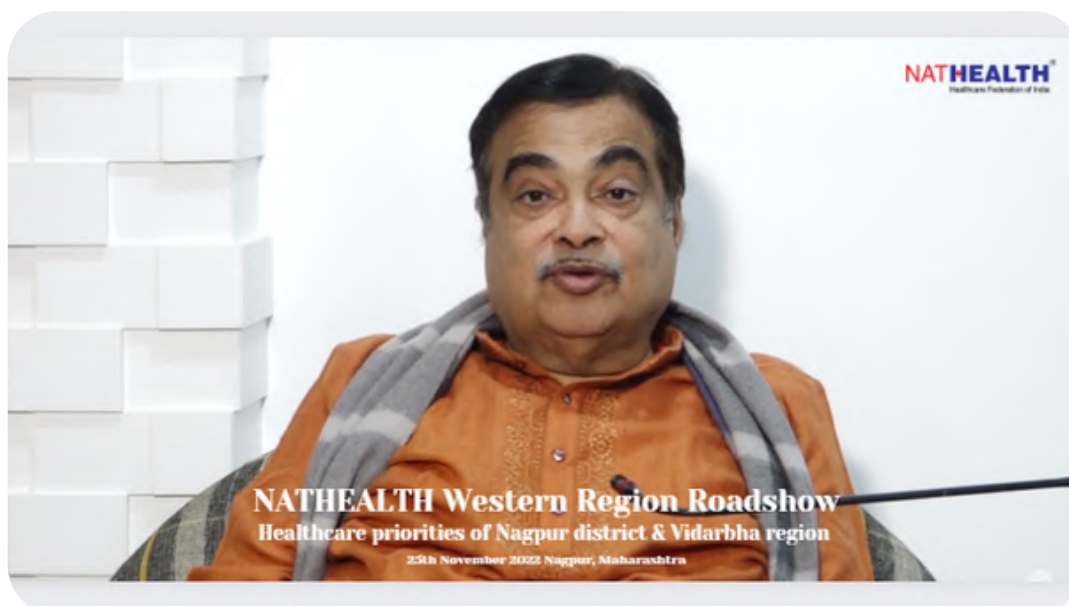
in the interest of all stakeholders who facilitate the on-ground delivery of healthcare services in a changing healthcare landscape.

NATHEALTH's mission is to position itself as a valuable partner to the Government and all key private players to improve healthcare in India. Collaborative work results in co-ordinated action to help the growth of globalized healthcare, with an emphasis on quality and infrastructural revolution. Such a partnership between the industry, the industry bodies, and Governments have been helpful in developing policies which have made a significant impact on the management of the pandemic across the country.

### **Region-focused healthcare advancement**

A key requirement is also to have a regional focus on growth, by working with regional experts in all four regions of India. The Roadmap Series identifies a major lack in current policy inputs, which is feedback from players located in different regions of a heterogeneous nation. Having a region-specific approach helps understand the requirements of players within the healthcare ecosystem of specific states and regions to improve delivery of quality healthcare while expanding access to the same.

# Special Message



**Shri Nitin Gadkari**

**Hon'ble Minister of Road Transport and Highways of India  
Government of India**

*I am delighted to be amongst all of you at the NATHEALTH Western Region Roadshow to discuss the healthcare priorities of Nagpur district & Vidarbha region. It is heartening to note that a comprehensive discussion will be taking place during the roundtable on key development areas of healthcare. I hope and look forward to see some innovative and pragmatic solutions from the discussions, which will be beneficial for the public at large. The population of the region, especially marginalized sector, can benefit from healthcare solutions that such platforms bring forth.*

## Overview of the Nagpur & Vidarbha healthcare sector

The Nagpur & Vidarbha region has notable super-specialty healthcare services and drug manufacturing units of national and international standards. Vidarbha has no less than nine medical colleges for low-income groups to enter the field. The quality of services allows the region to serve people in nearby locations such as Odisha, Madhya Pradesh and Chhattisgarh as well. Government intervention by way of schemes like the Mahatma Gandhi

Yojana, Mahatma Jyotirao Phule Jan Arogya Yojana, and Jeevan Dan Yojana provide kidney transplants and other lifesaving treatments in super specialty hospitals free of cost.

### Gaps that need filling

Data demonstrates that about 75% of specialists and super specialists in Vidarbha region are working in urban areas, leaving 15% in semi-urban/suburban regions and 7% in



### Dr. Vivek Desai

MD, HOSMAC India Pvt. Ltd. and NATHEALTH West Region Co-chair

*To achieve Universal Healthcare by 2030, India needs a consolidated approach. Organizations like NATHEALTH can act as the unified voice of the healthcare industry, which can work closely with the Government to move the sector in the right direction. Representation needs to start coming from the grass root levels as well as from major healthcare players.*





**Dr. Anup Marar**

**CEO (Healthcare & Pharmaceuticals), Meghe Group of Institutions,  
Director, Shalinitai Meghe Hospital & Research Center,  
Dr. Babasaheb Ambedkar Super Speciality Institute**

*There is a requirement to standardize the rates on a national level, for all Government-related schemes and programs, with a discussion with private players before formulating these. It can be based on certain common denominators. Also, it's vital to rectify the timelines for dues clearances.*

rural areas. This is the pattern of concentration of 97% healthcare specialists in the region, leaving 3% working in the most remote, rural and marginalized regions of the area. It is noted that around 30% of the population of the region is concentrated in these marginalized regions. This leaves a huge gap to be filled in the demand and supply channels.

According to the National Family Health Survey (NFHS), mortality of pregnant mothers aged 16 to 60 years is primarily due to malnutrition, which takes a toll on women belonging to an economically productive age group. Under age 5, the mortality rate of

tribal and remote rural areas is 80 per thousand live births, and that for urban areas is 31, revealing a worrying disparity. The maternal mortality rate is four times higher in rural tribal areas. Almost 24% of children under the age of 5 suffer from severe undernutrition, for which there is no program in India yet.

The Indian Public Health Standard (IPHS) was developed in India in 2006 when National Rural Health Mission (NRHM) was started. The NRHM report of 2008 demonstrated that 80% of rural areas have vacant health centers with low manpower. IPHS flagged the need to open more centers, with



**MoU signed between NATHEALTH and Vidarbha Hospitals Association**

at least 76 new primary healthcare centers (PHCs), while increasing staffing in existing ones.

### **Need for increased Governmental support**

There is still shyness noted in terms of adequate Government support for healthcare initiatives in the region. Mostly for community-based management for maternal healthcare for pregnant mothers and newborn children, and also for common infections. There is also a need for better vigilance and reporting on the working of rural primary healthcare with bureaucratic interventions. Currently, civil society NGOs are increasing their presence in remote regions to serve people.

### **Improving regional healthcare & its representation**

Coming to the recent decades, there is a positive upward trend in healthcare expenditure. Insured schemes for healthcare have increased in number and effectivity. There is a speculation that unified



**MoU signed between NATHEALTH & Shalinitai Meghe Hospital & College**

healthcare may become a reality by 2030, which requires key players in the industry and NATHEALTH to work with the Government to make the vision a reality.

In this regard, the role of grassroots level representation cannot be overstated. Representation that is limited to urban and metropolitan citizens and healthcare stakeholders that only serve in such regions, makes limited impact on the Government, because these regions have relatively sound healthcare infrastructure.

The priority for all stakeholders should be to also support the Government's vision of extending good healthcare infrastructure along with digital health in tier-2 and 3 towns, coupled with rural penetration. In this regard, the presence, voice and representation of healthcare players from the Nagpur and Vidarbha region can be highly impactful in contributing to the vision of Aarogya Bharat and universal healthcare.

**The priority for all stakeholders should be to also support the Government's vision of extending good healthcare infrastructure along with digital health in tier-2 and 3 towns, coupled with rural penetration**



## Exploring opportunities, strengths and prospects in the Vidarbha region

While we have taken a quick look at the overall healthcare system in Nagpur and Vidarbha, it is time to sink in further and understand the future prospects. It is vital for all stakeholders to join hands and work towards improving the healthcare status of the region.

### Role of PPPs in strengthening regional healthcare

The journey towards universal health coverage involves massive integration of value chains and private-public players. The importance of sensible consumer touchpoints and patient experience

cannot be undermined anymore. If the region has to achieve overall improvement, it calls for coordinated action of hospital operators, diagnostics providers, start-ups, med tech players, innovators, pharmaceutical companies, and more.

Firstly, private players need to come together to deliberate on how to increase the momentum of healthcare evolution as a positive contributor. A second objective is to offer co-operation at the local level, working up to the state, regional and national levels. A third objective



**Dr. Vibhari Dani, President, Zonal Transplant Coordination Committee**



**Dr. Vamshi Krishna, (5c) Director, Strategic Accounts & Partnerships**

is to develop a unified idea of the specific role of the private sector and articulate it clearly to different stakeholders, especially the Government. There is a growing need for active advocacy and dialogue among the private and public sector players.

### **Development of a robust digital infrastructure**

The Government of the said region has worked to strengthen the PHC (Primary Health Centers) to enhance rural medical services and infrastructure. However, to cover the gap between tier 1 cities and metropolitan areas and rural India, digital infrastructure can be the most impactful force and equalizer.

By leveraging the potential of video-conferencing platforms, tele-medicine and digital health consulting, the healthcare sector of

the region can only grow further. This is a boon for regions, where setting up physical infrastructure is economically or otherwise unfeasible. It should also be noted that regional language is a key requirement for the growth of digital infrastructure, because telemedicine cannot succeed in a diverse country by only relying on a few major languages. Rural reach of digital healthcare can only grow when patients can understand the language of the online healthcare provider. There is no doubt that an understandable, accessible, affordable digital healthcare infrastructure can transform India's healthcare industry into a more globalized one.

### **Recognizing the need for a strong diagnostic sector**

One key step in the process of evolution of Indian healthcare is to

“The healthcare sector has complex value chains, starting from manufacturing to care delivery. The Government has injected about Rs. 50,000 crore as credit for bettering value chains, which is good news for the sector.



**Mr. Vijay Gaikwad, Senior Vice President, Midmark**

spotlight and improve the diagnostics industry. NATHEALTH and its key members have instituted a co-ordination committee to specifically work with the diagnostics sector. Illustratively, the diagnostics industry's importance is evident from the fact that major diagnostic players in India have carried out 100 million+ tests each in the Vidarbha region district of Nanded (Maharashtra) alone.

Although the region does face pricing issues. The session spoke about how the problem of pricing at this stage can be countered with aggregation. A robust network between hospital operators and diagnostic players and similar collaborative action can help direct the pricing costs downwards.

### **Credit lines to enable a better infrastructure**

The healthcare sector has complex value chains, starting from manufacturing to care delivery. The Government has injected about Rs. 50,000 crore as credit for bettering value chains. It has also decreased the complexity of the process for bank approvals needed to access capital, with specified beneficial credit rates. Currently, working capital is around the 8.2% mark and the Government is focusing on improving access to credit lines for boosting healthcare infrastructure further. Healthcare sector players need to explore the possibilities to avail and use this credit as wisely as possible, to further the aims of universal healthcare and sound infrastructural growth.





**Mr. Siddhartha Bhattacharya, Secretary General, NATHEALTH**

### **Closing remarks**

Regular brainstorming, collaboration and discussion is bound to help take these ideas to concretely-formulated plans in a relatively short time. Currently, well-placed stakeholders also need to widen their respective networks and involve every stakeholder from small providers, growing start-ups, nursing homes, homecare players. Further, financial innovation also has immense potential. Players such as banks, private equity investors, social investors are important stakeholders, who can be

better integrated into the healthcare network. Similarly, med tech players need to build strong relationships and partnerships with larger national players and associations.

Collaboration at the grassroot level that is centered around local players who share insights and solutions with other national/international level players, can result in a more effective and accelerated pace in expanding digital healthcare, universal coverage and achieving major healthcare goals.

## Active Audience Participation



**Mr. Sameer Joshi**  
Founder & Chairman  
iTransform Group



**Mr. Venketashwarlu Marapaka**  
COO  
HCG Hospital, Nagpur



**Mr. Nitin Joshi**  
Sahil Medical

## Comments & Suggestions

### ➔ On restructuring the system & filling gaps

The regional roadshow highlighted the need for Central Government involvement and dedication towards healthcare and insurance in the states. Certain problems in the healthcare ecosystem are worsened due to poor co-ordination with the Government. This situation is common across different states. For example, many PHCs in Karnataka were about to get the dues cleared in 15 to 20 days, but the same is not true for the Vidarbha region where even after a surgery, it can take months or years for payments and dues clearances. This structure needs to be greatly improved with filling of major gaps.

### ➔ On availability of doctors & skilled manpower

As is noted in statistical data on the regional distribution of doctors, there is inadequacy in the numbers of doctors, which needs to be tackled immediately. This is linked to the nature and structure of medical education in India, which requires rigorous institutional education for years. This system needs to be reviewed in light of the needs of the country and the healthcare ecosystem. Additional skilled manpower needs to be deployed as well, with apt bridge courses.

### ➔ On supporting innovation

There are many exciting innovative breakthroughs in the medical and diagnostics field today. For example, the world's first triple-powered defibrillator and hand crank generator are all major developments that should be optimized. These innovations, if supported and employed in the field, can help save lives in the said regions, even where facilities are lacking severely. This is important for increasing reach in tribal areas and rural areas of the Nagpur and Vidarbha region, and also beyond.

## Active Audience Participation



**Dr. Tushar Gawad**  
Director - Administration  
Alexis Hospital



**Dr. SB Kokate**  
Associate Professor,  
Government Medical College and Hospital, Nagpur



**Dr. Alok Umbre**  
Secretary  
Vidarbha Hospital Association

## Comments & Suggestions




### On developing technology & training technicians

India has adequate human resource, technology and other resources. Today, the network of diagnostic services is such that if a patient walks into the diagnostic center 100 km from Nagpur and the technician doesn't know the diagnostics procedure, then the director performs the operation and sends the scan to the head office in Bangalore, and the final report will send to the diagnostic center. This achievement is made possible due to the development of accurate and adaptable artificial intelligence (AI) platforms.

The importance of technology for filling gaps due to physical restrictions thus cannot be ignored in a nation with language, geographical and other barriers. Those innovators who create these breakthrough technologies such as AI powered software, enhanced X-ray technologies and so on, can easily aid training of technicians and other stakeholders if the network of interaction between regional, national and international players remains cooperative and dynamic.





## **Growth areas to work collaboratively: NATHEALTH and Nagpur / Vidarbha healthcare stakeholders and Government**

Study / whitepaper on investment potential of Western India healthcare.

Build roadmaps for sustainable public private partnerships (PPPs).

Suggest an optimal financing model, with a focus on credit lines-ups.

Collaborative efforts to decipher favourable healthcare pricing, including diagnostics.

Support incubators and innovations in the region.

Develop a robust manpower development program, for doctors, technicians & support staff.

Design a futuristic digital healthcare infrastructure, with a focus on Artificial Intelligence (AI)

## A glimpse at the event proceedings





# Key Priorities of NATHEALTH

NATHEALTH 3.0 – Shaping India health system by owning and contributing to strategic healthcare agenda

## Infrastructure Expansion

- De-congesting, de-bottlenecking institutions
- Affordable care expansion in Tier II-IV (new business models, tech-enabled, partnership Govt/Private, private-private, etc.)
- New models of care (out of hospital, step down, urgent, ambulatory care, specialty care expansion, home care, etc.)
- Delivery innovations

## Digital Health

- Tech infra, solutions: IT backbone/ Interoperability / tech stack; HIS/EMR; Health ID, Disease repository, analytics
- Access expansion (virtual care, discovery platform)
- Integrated care enablement, coordination
- Platforms- Bridging the gap between large and small players in the fragmented health ecosystem

## Healthcare Innovation

- Start-up ecosystem enablement
- Partnership models (Corp VC, financial investors, strategic partnership, etc.)
- Setting up Healthcare accelerators, incubators
- Atmanirbhar for healthcare products and devices in India (value focused); design and Make in India

## Globalizing India's Healthcare

- Medical Value Travel: unleashing potential
- Global Supply Chain Integration
- India for global healthcare delivery (remote monitoring, virtual care delivery, etc.)
- India as data/analytics hub (payers, providers, etc.)
- Alternative medicine expansion

## Aarogya Bharat (health system evolution)

- New financing models (capitation, performance-based, strategic purchasing, etc.)
- Preventive, public and population health
- Universal health expansion, New models: value-based care
- Disease management (NCD, MCH, etc.)
- Standardized Guidelines, accreditation
- Skilling and education expansion (asynchronous training, CME, upskilling, etc.)



## We thank all our participants

Mr. Nitin Joshi	Vygon India
Dr. Vibhavari Dani	Consultant Research, Tribal Project
Dr. S Savji	Microbiologist
Mr. Abhimanyu Rathi	Axis Bank Ltd
Dr. Bhawna Sah	Metropolis Health
Ms. Snehal	Avanti Institute of Cardiology
Mr. Tushar Marghade	Consultant
Mr. V Mistry	Onus Hospitals
Ms. K Sujatha	KIMS Kingsway Hospital
Mr. Rahul Jain	Midmark Janak
Mr. Shubham Asati	Diversey
Mr. Someshwar R Sinha	Midmark Janak
Mr. A Grover	Wardha Health Care Private Limited
Mr. Nilesh Bhagat	KIMS Kingsway Hospital
Mr. Vicky Agnihotri	Shravan Hospital
Dr. Tasneem	Shravan Hospital
Dr. Prachi	Shravan Hospital
Dr. Khalil Ahmed	Aureus Hospital
Mr. Anirudhha K	Aureus Hospital
Dr. Shishir K	Centre Point Hospital
Dr. Vamshi Krishna	5C
Ms. Bhavna Singh	BSV

## We thank all our participants

Participant	Organisation
Dr. Caesar Sengupta	Thyrocare
Ms. Monika Sakhadeo	Indus Health
Mr. Aniruddha Atre	Jeevtronics
Mr. Vijay Gaikwad	MIDMARK
Mr. Abhinandan N D	Wockhardt Hospital
Dr. Rakesh Bhoke	Midas Hospital
Dr. Tushar Gawad	Alexis Hospital
Dr. S B Kokate	GMC, Nagpur
Dr. Vikas Chaudhary	Arihant Multispeciality Hospital
Mr. Manish Kedia	Biomedical Consultant
Mr. Vikrant Pawar	Metropolis Healthcare
Dr. Rakesh Kardam	Radhakrishna Hospital
Mr Amit Deshpande	S S Healthcare
Dr. Amrita Sharma	Meditrina
Mr. Sameer Joshi	iTransform
Mr. Bhaskar Pannikar	Nihon kohden
Mr. Venkateshwar M	HCG Hospital
Dr. Vivek Desai	Hosmac
Mr. Abhay Santiram	Volantis Care Solutions
Dr D. Selokar	DHO Nagpur
Dr. Deepak Deshmukh	Suretech Hospital and Research Centre
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Dr. Anup Marar	Vidarbha hospital association
Dr. Rakesh Kaydalwar	Hospiexperts
Ms. Priyanka P	

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