

# A Comparative Study on the Efficiency of Public and Private Health Care Services in India

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**ABSTRACT:** Healthcare has become a business. Heavy investments were put in the public limited companies in the health business with profit orientation. Quite often expenses of high tech equipment are at the cost of patients by subjecting them to unnecessary investigations. There are innumerable instances, where even for common illness the helpless patient has to undergo a list of tests. After the completion of these tests, the patient will become a victim by thousands of rupees. The NHM focuses on strengthening public healthcare infrastructure and improving the quality of healthcare services in the public sector. The main objective of the study is to analyze the efficiency of public and private healthcare services in India. It is an empirical study with 203 samples collected through convenient sampling. It was found that people prefer private hospitals over public hospitals as public healthcare services seem to lack basic infrastructure and speciality services. Investing in healthcare workforce training and recruitment, along with effective utilization of technology, can optimize service delivery. Promoting public-private partnerships can bring in additional resources and expertise.

**KEYWORDS:** Healthcare, services, public hospitals, private, efficiency.

## I. INTRODUCTION:

The medical profession has widened its horizon worldwide and India is no exception. Corporate Hospitals are emerging as a new breed in the healthcare industry in India. These Hospitals are attracting a number of patients because of their super-specialties. There is a strong competition among these hospitals for market share. The emphasis is not only to provide specialized service more efficiently and effectively, but also to maintain the quality of overall services. The major

concern for corporate hospitals is on consumer satisfaction. In the service marketing, "Service Marketing", Himalaya Publishing House, New Delhi, 1997. It is evident that just not that four P's, i.e. Product, Price, Place and Promotion plays a vital role, but also other P's like People, Physical Evidence and process play an important role in satisfying the consumer. Today, customer satisfaction is a growing field of research and teaching. Healthcare has become a business. Heavy investments were put in the public limited companies in the health business with profit orientation. Quite often expenses of high tech equipment are at the cost of patients by subjecting them to unnecessary investigations. There are innumerable instances, where even for common illness the helpless patient has to undergo a list of tests. After the completion of these tests, the patient will become a victim by thousands of rupees. The NHM focuses on strengthening public healthcare infrastructure and improving the quality of healthcare services in the public sector. This initiative includes programs like the National Rural Health Mission (NRHM) and National Urban Health Mission (NUHM). Regulation and Accreditation: The government has established regulatory bodies such as the National Accreditation Board for Hospitals and Healthcare Providers (NABH) to ensure that private healthcare facilities maintain certain standards of care and quality. Telemedicine: The government has promoted telemedicine and e-health initiatives to increase access to healthcare services, particularly in rural and remote areas. Public-Private Partnerships (PPPs): In some cases, the government has partnered with private healthcare providers to expand healthcare infrastructure and services. PPPs aim to leverage the efficiency and resources of the private sector while maintaining public

accessibility. Unnecessary surgeries and laboratory tests are on the rise, because of increasing urban concentration, increasing commercialization and the rise of the corporate sector medical care. The unnecessary removal of appendix, tonsils, uterus, etc. are examples for this. These nefarious practices must be stopped with a heavy hand. Standard treatment guidelines should be worked out by medical bodies so that unnecessary medical intervention can be singled out. Government hospitals, some of which are among the best hospitals in India, provide treatment at taxpayer's expense. Most essential drugs are provided free of charge to all patients in these hospitals. Government hospitals provide treatment either free or at minimal charges. For example, an outpatient card at AIIMS (one of the best hospitals in India) costs a one time fee of rupees 10 (around 20 cents US) and thereafter outpatient medical advice is free. In-hospital treatment costs in these hospitals depend on the financial condition of the patient and facilities utilized by him but are usually much less than the private sector. For instance, a patient is waived full treatment costs if he is below the poverty line. Another patient may seek an air-conditioned room if he is willing to pay extra for it. The charges for basic in-hospital treatment and investigations are much less in public hospitals as compared to the private hospitals. The cost for these subsidies comes from annual allocations from the Central and State Governments. In addition to the network of public and private hospitals, there are charitable dispensaries and hospitals, many of which provide treatment and facilities parallel to those provided by private hospitals at highly concessional rates or in some cases free of cost to needy population. The finding of the research is that even though private hospitals are charging more for their service people have more faith in private hospital.

**Aim:-**

The aim of the study is to analyze the health care system provided by public and private hospitals in India.

**OBJECTIVES:**

- To study the efficiency of public and private healthcare systems
- To analyze the problems faced by common public in accessing good healthcare services
- To examine the reasons for shift towards private healthcare services
- To investigate upon the defects in public healthcare services

- To study the improvements need to be made in the healthcare system

**II. REVIEW OF LITERATURE:**

The study applies the principles behind the SERVQUAL model and uses Donabedian's framework to compare and contrast Malta's public and private hospital care service quality. Through the identification of 16 service quality indicators and the use of a Likert-type scale, two questionnaires were developed. (Mörrike et al. 1998) This study compares the quality of services provided by public and private hospitals in Bangladesh. The premise of the paper was that the quality of hospital services would be contingent on the incentive structure under which these institutions operate. Since private hospitals are not subsidized and depend on income from clients. (Choo 1995) Highly competitive market in the private hospital industry has caused increasing pressure on them to provide services with higher quality. The aim of this study was to determine the different dimensions of the service quality in the private hospitals of Iran and evaluating the service quality from the patients' perspective. (Béland 2008) The aim of this paper is threefold: to test the dimensionality of SERVQUAL instrument in the Northern Cyprus health care industry, to assess the service quality provided in public and private hospitals in Northern Cyprus and to identify service quality dimensions that play important role on patient satisfaction. (Arthur R 2014) Hospital waste is considered dangerous because it may possess pathogenic agents and can cause undesirable effects on human health and the environment. In Iran, neither rules have been compiled nor does exact information exists regarding hospital waste management. (Syed Saad Andaleeb 2000) This study aimed to measure the Impact of Health Service Quality on Patient's Satisfaction in the Hospital's of Public and Private sectors in Jordan. To attain the aim of this study a random sample of inpatients was chosen to conduct this study within. (Houston 2005). Foreigners in increasing numbers are now coming to India for private health care. They come from the Middle East, Africa, Pakistan, and Bangladesh, for complex paediatric cardiac surgery or liver transplants—procedures that are not done in their home countries. (Tien 2011). This study compared the quality of services provided by private and public hospitals in urban Bangladesh. Using twenty-four scale items, patient perceptions were sought on five aspects of service quality including responsiveness, assurance, communication, discipline and baksheesh. (Jain 2018). Healthcare is

a highly competitive global industry. People accept to travel to remote parts of the world in order to receive the service quality they hope for. Patients usually prefer to go to private hospitals, hoping to receive high service quality. (Siddh 2000). The objective of this study was to analyze the satisfaction of the users of a private hospital in terms of a number of attributes of the services in units. This exploratory, descriptive study used a quantitative approach and was developed in a private hospital in the city of São Paulo. (Nianiya 2008) A survey of the patients' view of anaesthesia was carried out in a medium-sized metropolitan private hospital. The study was performed using a postoperative questionnaire. A two-week period was investigated, and data was obtained from 121 of 124 patients anaesthetised during that period. The results showed a very high degree of satisfaction with the anaesthetic services provided, although specific questioning revealed many minor complaints. (Swain 2019). Two of the best-known economic models of hospital behavior are utilized to examine theoretically the issue of cross subsidization of hospital costs between public and private-pay patients. It is shown that the existence of public/private hospital-charge differentials does not, in itself, demonstrate that public programs are subsidized by the private sector. (Klein 1985). As it is known, following health reforms realized in Turkey over the course of the last several years the patients, who have social security, have started to benefit from private hospitals. How they are satisfied from the services given by private hospitals thus becomes an important issue. It is evident that more than half of private hospitals around the country are found in Istanbul. (Argan and Argan 2017). NHS hospitals is an expensive way of building new capacity that constrains services and limits future options. Here they provide evidence that the justification for using private finance—that it offers value for money through lowering costs over the life of the project and by removing risk from NHS trusts—is a sleight of hand (National Institute of Mental Health (U.S.), and National Institute of Mental Health (U.S.). Biometry Branch. Survey and Reports Section) (Witkin 1972). We aim to promote efficiency, to improve services and to stimulate fresh flows of investment. We want to harness the private sector's management expertise and resources, bringing a new approach to investment in a whole range of activities and services traditionally regarded as the exclusive domain of the public sector. (Lima et al. 2019) The private provision of health services in Vietnam was legalized in 1989 as one of the country's means to

mobilize resources and improve efficiency in the health system. Ten years after its legalization, the private sector has widely expanded it. However, activities and become an important provider of health services for the Vietnamese people, little is known about its contribution to the overall objectives of the health system in Vietnam. (Fos et al. 2019). The rapid growth of corporate investment in the Malaysian private hospital sector has had a considerable impact on the healthcare system. Sustained economic growth, the development of new urban areas, an enlarged middle class, and the inclusion of hospital insurance in salary packages have all contributed to a financially lucrative investment environment for hospital entrepreneurs. Many of Malaysia's most technologically advanced hospitals employing leading specialists are owned and operated as corporate business ventures. (Béland and Gran 2008). Government all around the world have attempted to boost the role of market and competition in health care industries in order to increase efficiency and reduce costs. The increased competition and the significant implications on costs and prices of health care services resulted in health care industries being transformed. (Sauve and Mattoo 2003). This article investigates an alternative which permits tax reduction without significant effects on the output of public services: private-sector production of public services. Empirical evidence on a wide variety of services is examined: refuse collection, fire protection, debt collection, health care and hospital services, claims processing, ship repair, and the operation of utilities and airline services (Arthur R Ouellette Steven 2014). It has been observed that specialist physicians who work in private hospitals are usually paid by fee-for-service while specialist physicians who work in public hospitals are usually paid by salary. This paper provides an explanation for this observation. Essentially, fee-for-service aligns the interests of income preferring specialists with profit maximizing private hospitals and results in private hospitals treating a high proportion of short stay patients. (Hesse et al. 2019)

### III. METHODOLOGY:

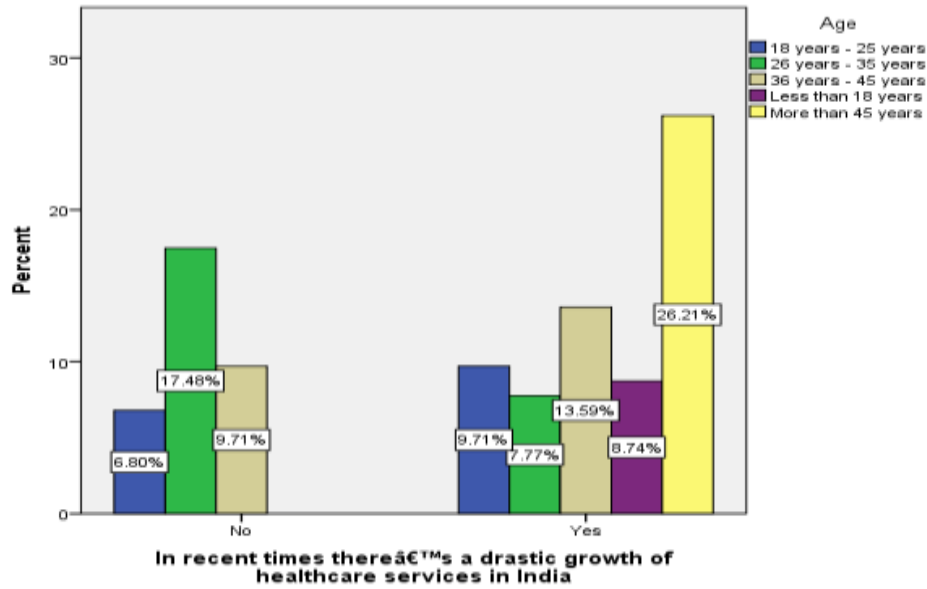
The research method followed here is empirical research. A total of 203 samples have been collected out of all samples and have been collected through a convenient sampling method. The sample frame taken here in Chennai. The independent variables are age, gender, occupation, educational qualification, monthly income, area. The dependent variables are the In recent times there's a drastic growth of healthcare services

in India, Nowadays people prefer private hospitals over public healthcare services, Rate the efficiency of public health care services in India, Major drawback of public health care services, Financial affordability pose a major threat in accessing

private healthcare services due to high costs,Rate the government initiatives or policies aimed at improving the efficiency of health care services in India. The statistical tools used here are SPSS and graphical representation and chi square test.

#### IV. ANALYSIS

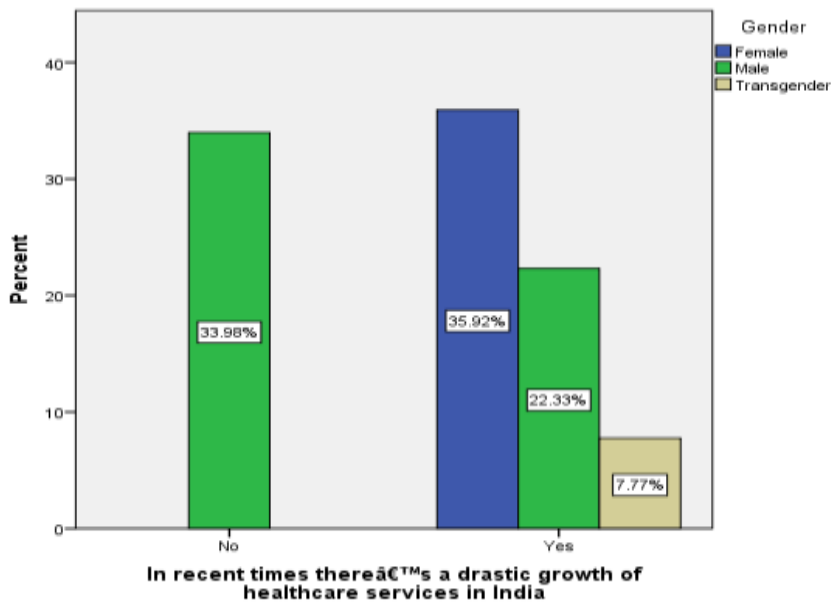
FIGURE 1:



**LEGEND:**

Figure 1 shows the respondents' views on “In recent times there’s a drastic growth of healthcare services in India” on the basis of age factor.

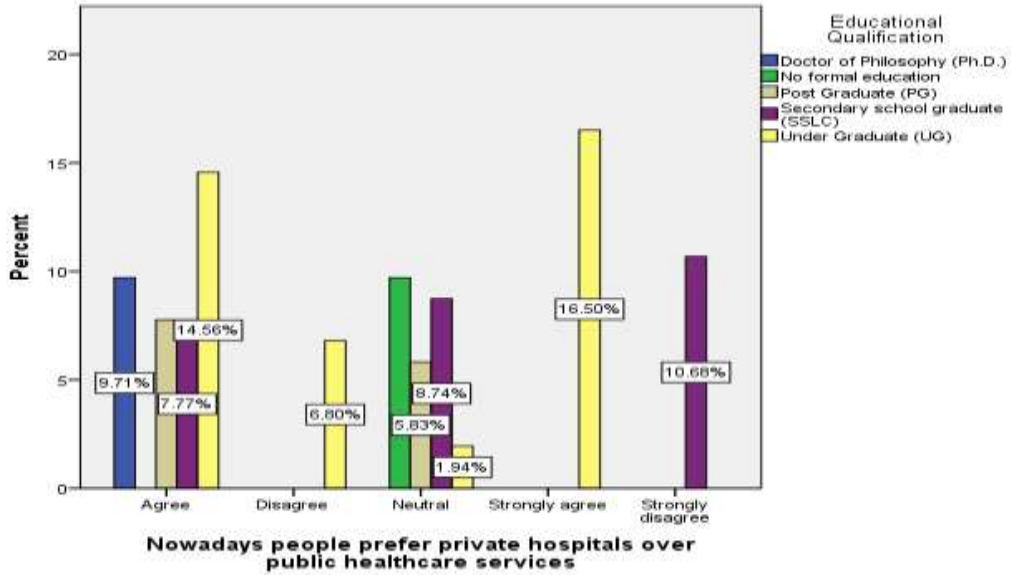
FIGURE 2:



**LEGEND:**

Figure 2 shows the respondents' views on “In recent times there’s a drastic growth of healthcare services in India ” on the basis of gender.

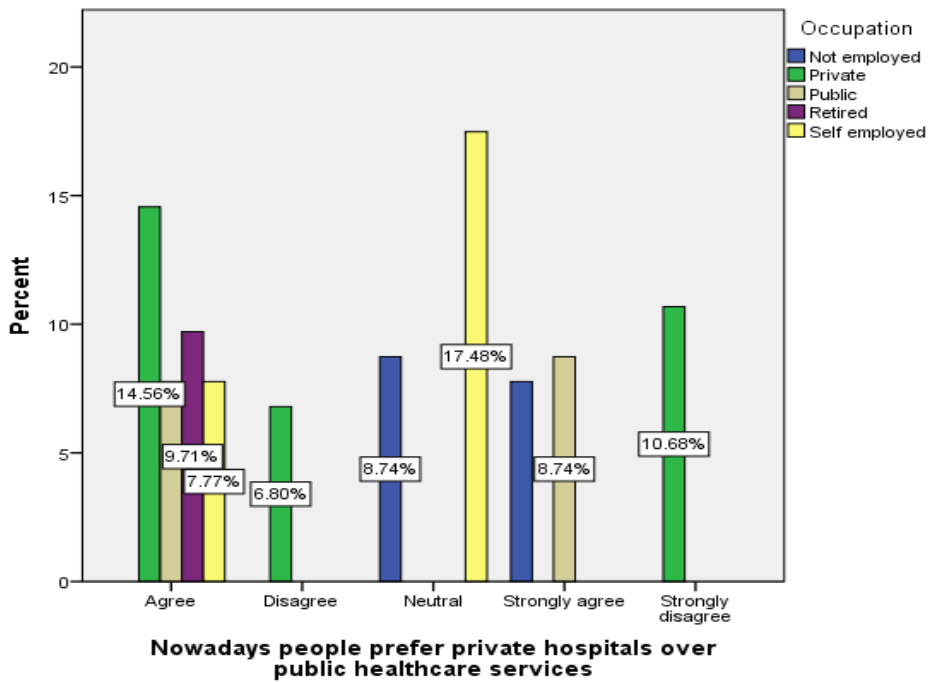
**FIGURE 3:**



**LEGEND:**

Figure 3 represents respondents’ view on “Nowadays people prefer private hospitals over public healthcare services” on the basis of educational qualification.

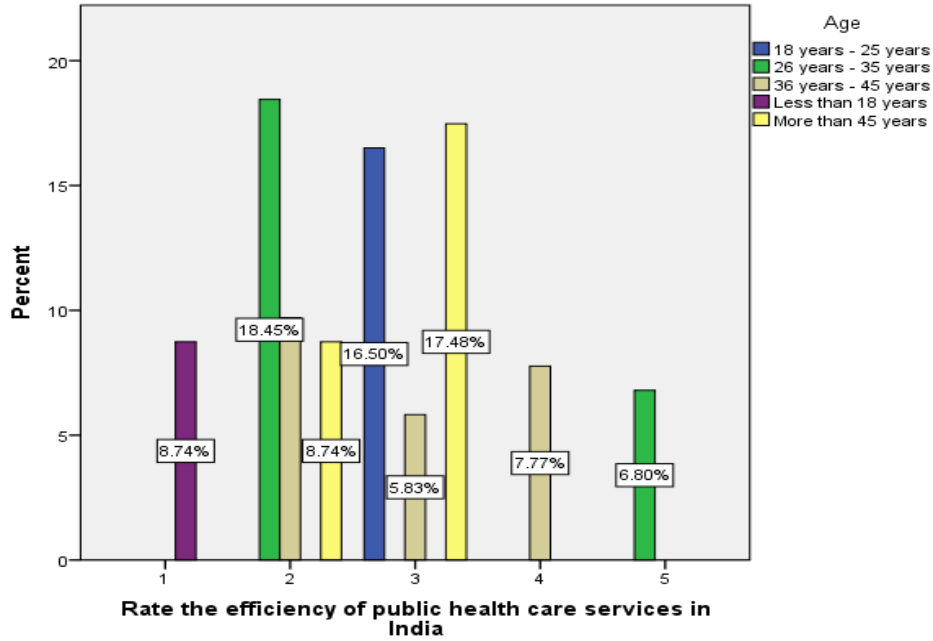
**FIGURE 4:**



**LEGEND:**

Figure 4 represents respondents' view on "Nowadays people prefer private hospitals over public healthcare services" on the basis of occupation.

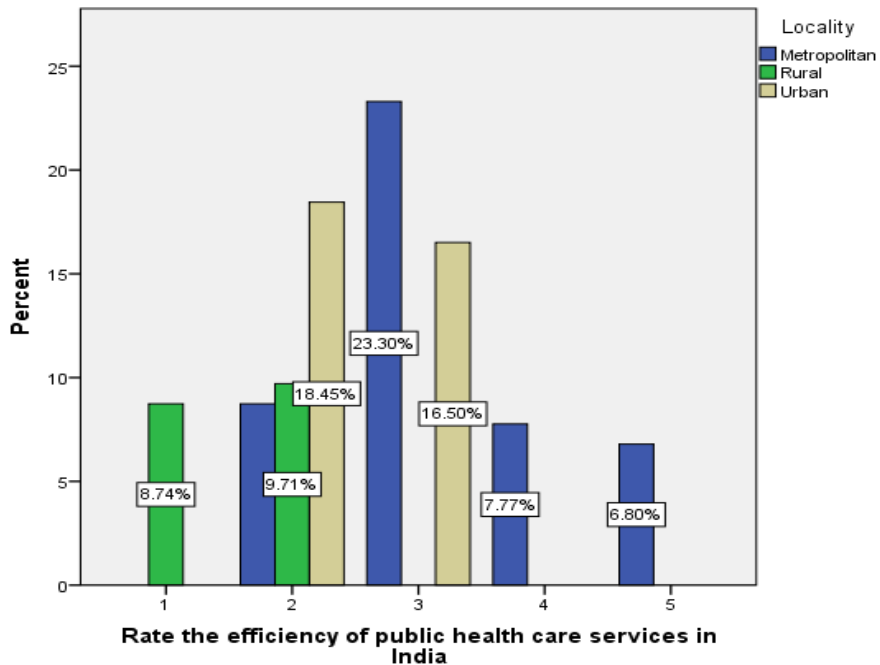
**FIGURE 5:**



**LEGEND:**

Figure 5 shows the respondents' view "Rate the efficiency of public health care services in India" on the basis of age factor.

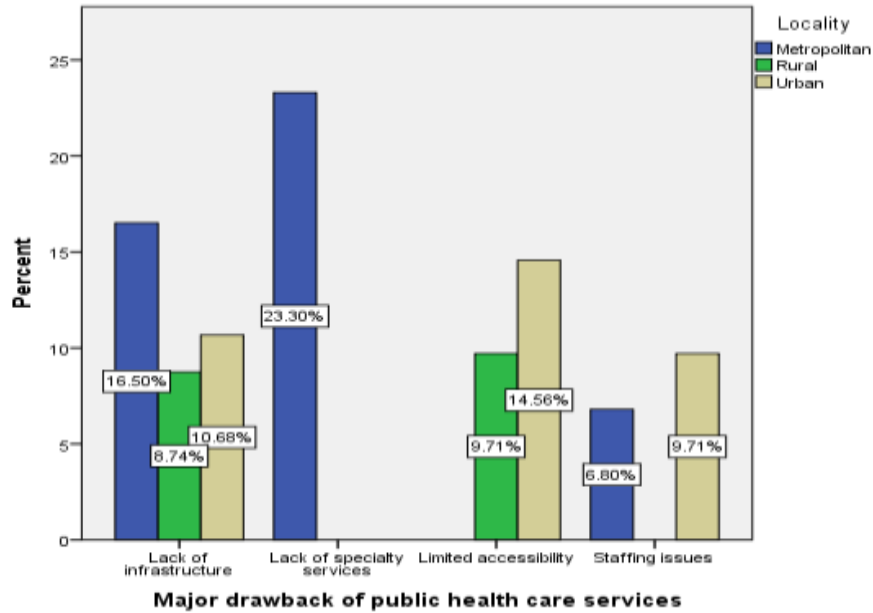
**FIGURE 6:**



**LEGEND:**

Figure 6 shows the respondents' view "Rate the efficiency of public health care services in India" on the basis of area.

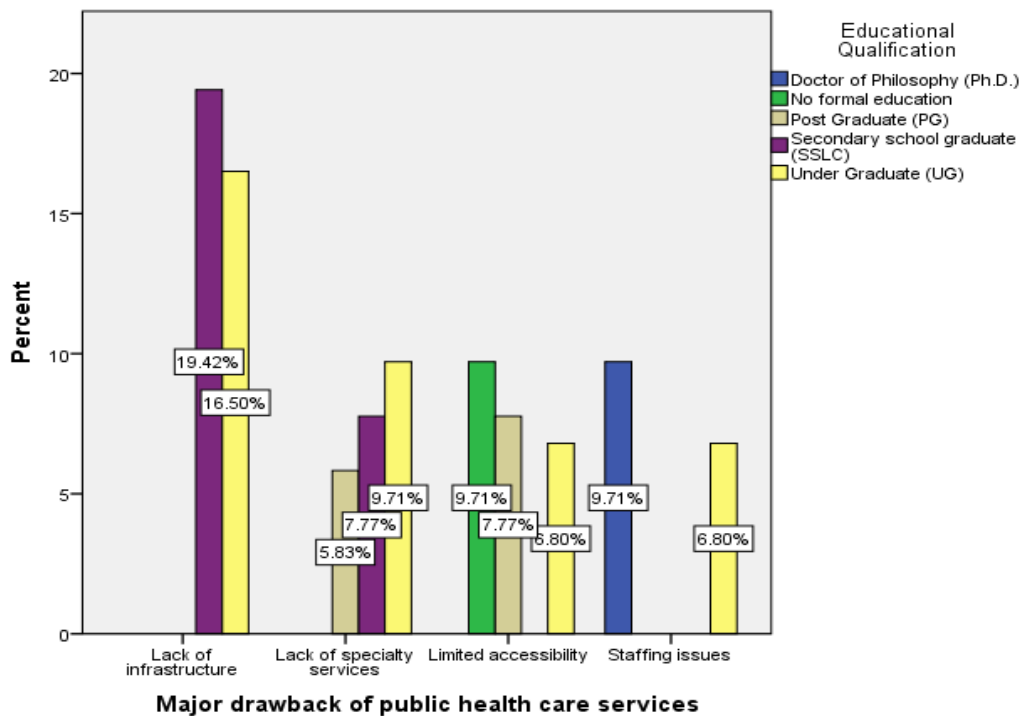
**FIGURE 7:**



**LEGEND:**

Figure 7 shows the respondents' view "Major drawback of public health care services" on the locality.

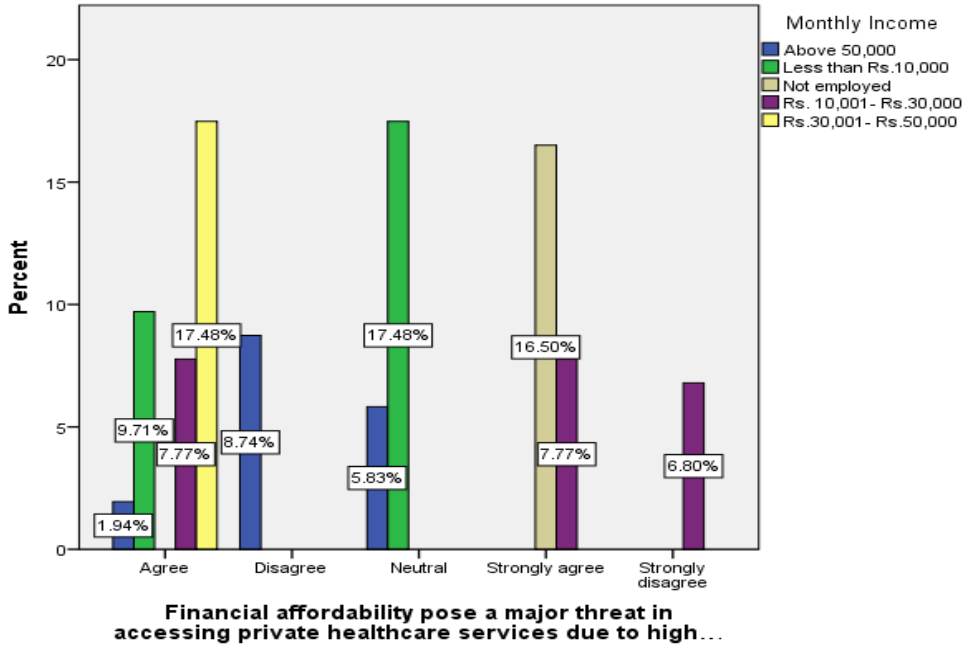
**FIGURE 8:**



**LEGEND:**

Figure 8 shows the respondents' view "Major drawback of public health care services" on the educational qualification.

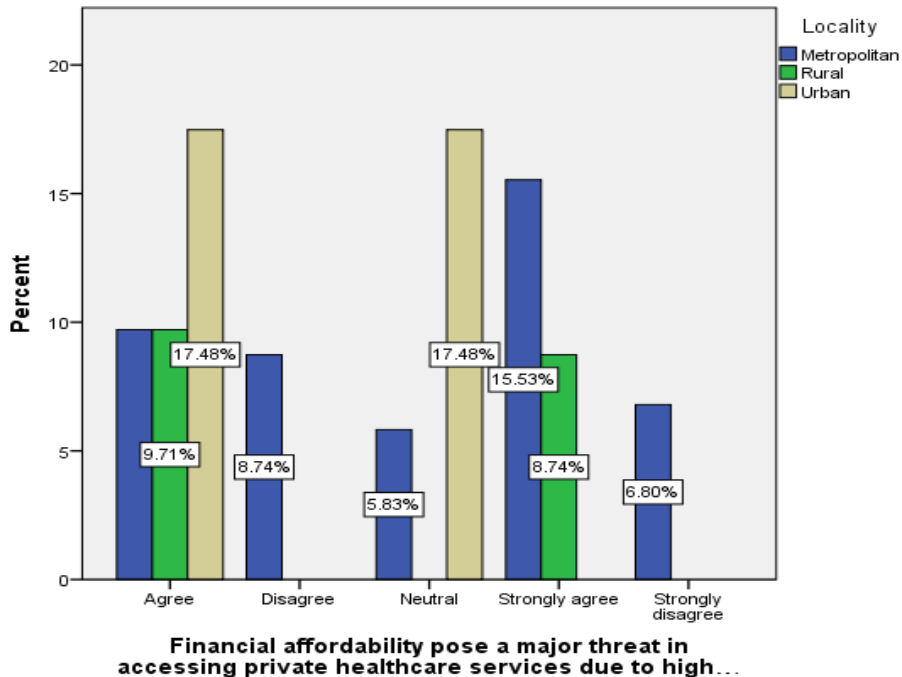
**FIGURE 9:**



**LEGEND:**

Figure 9 depicts the respondents' view "Financial affordability poses a major threat in accessing private healthcare services due to high costs" on the basis of monthly income.

**FIGURE 10:**

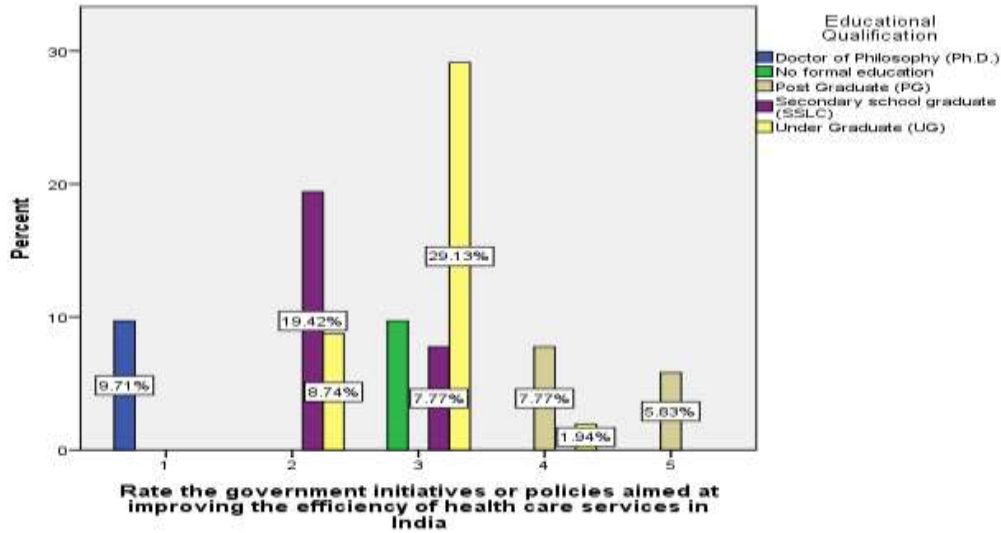




**LEGEND:**

Figure 10 depicts the respondents' view "Financial affordability pose a major threat in accessing private healthcare services due to high costs" on the basis of locality.

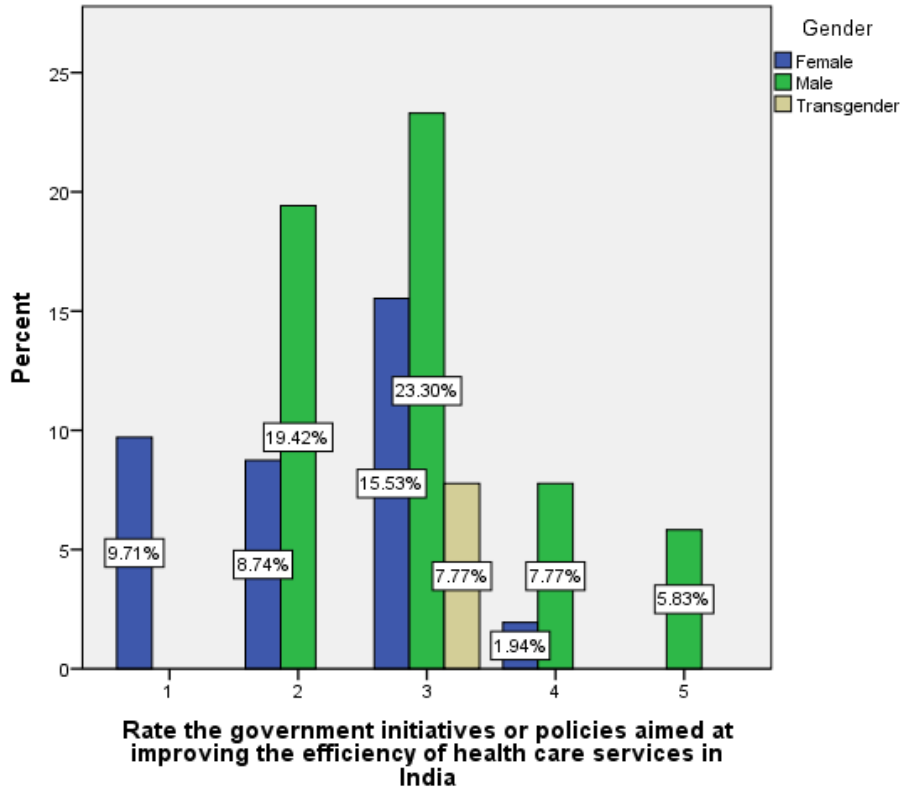
**FIGURE 11:**



**LEGEND:**

Figure 11 shows the respondents' view "Rate the government initiatives or policies aimed at improving the efficiency of health care services in India" on the basis of educational qualification.

**FIGURE 12:**



**LEGEND:**

Figure 12 shows the respondents’ view “Rate the government initiatives or policies aimed at improving the efficiency of health care services in India” on the basis of age factor.

**FIGURE 13:**

Chi-square test:

IDV and DV → Nominal

Null hypothesis : There is no association between the preferability of private hospitals over public healthcare services and age factor.

Alternate hypothesis: There is an association between the preferability of private hospitals over public healthcare services and age factor.

Nowadays people prefer private hospitals over public healthcare services \* Age Crosstabulation

Count		Age					Total
		18 years - 25 years	26 years - 35 years	36 years - 45 years	Less than 18 years	More than 45 years	
Nowadays people prefer private hospitals over public healthcare services	Agree	0	15	8	0	18	41
	Disagree	7	0	0	0	0	7
	Neutral	2	0	16	9	0	27
	Strongly agree	8	0	0	0	9	17
	Strongly disagree	0	11	0	0	0	11
Total		17	26	24	9	27	103

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	158.483 <sup>a</sup>	16	.000
Likelihood Ratio	162.547	16	.000
N of Valid Cases	103		

a. 18 cells (72.0%) have expected count less than 5. The minimum expected count is .61.

**Interpretation:**

The calculated p value is 0.000. Since p value is <0.05, null hypothesis is rejected at 5% level of significance. So there is an association between the preferability of private hospitals over public healthcare services and age factor.

**V. RESULT:**

It is clear from Figure 1 that as a majority about 21.21% of the respondents who are above 45 years of age agree that In recent times there’s a drastic growth of healthcare services in India .(fig.1) Figure 2 notifies that as a majority about 35.92% of the females agree that In recent times there’s a drastic growth of healthcare services in India .(fig.2) Figure 3 signifies that as a high

response about 16.50% of the undergraduates agree that Nowadays people prefer private hospitals over public healthcare services(fig.3) It is clear from Figure 4 that about 17.48% of the self employed respondents are neutral towards the opinion that Nowadays people prefer private hospitals over public healthcare services (fig.4) Figure 5 denotes that about 18.45% of the respondents from 26-35 years of age give a rating of 3 towards the efficiency of public health care services in India.(fig.5) It is clear from Figure 6 that about 23.30% of the metropolitans give a rating of 3 towards the efficiency of public health care services in India.(fig.6) Figure 7 signifies that about 23.30% of the metropolitans report lack of speciality services as the Major drawback of public

health care services.(fig.7) Figure 8 denotes that about 19.42% of the undergraduates report lack of infrastructure as the Major drawback of public health care services(fig.8) It is clear from Figure 9 that about 17.48% of the respondents with monthly income of less than 10,000 are neutral towards the view that Financial affordability poses a major threat in accessing private healthcare services due to high costs(fig.9) It is clear from Figure 10 that about 17.48% of the respondents from urban area agree that Financial affordability poses a major threat in accessing private healthcare services due to high costs.(fig.10) Figure 11 signifies that about 29.13% of the undergraduates give agreeability of 3 over the government initiatives or policies aimed at improving the efficiency of health care services in India.(fig.11) Figure 12 denotes that about 23.30% of the male respondents give agreeability of 3 over the government initiatives or policies aimed at improving the efficiency of health care services in India.(fig.12)

## VI. DISCUSSION:

It is clear from Figure 1 that about 21.21% of the respondents who are above 45 years of age agree that In recent times there's a drastic growth of healthcare services in India . This is because the aged or the elderly people are more prone to seek healthcare than other age categories. The category of elderly population has more medication seeing due to the age factor and probability of carrying health issues.(fig.1) Figure 2 notifies that about 35.92% of the females agree that In recent times there's a drastic growth of healthcare services in India . This expansion reflects a positive trajectory in addressing the healthcare needs of the growing population where the study holds the majority of respondents as females.(fig.2) Figure 3 signifies that about 16.50% of the undergraduates agree that Nowadays people prefer private hospitals over public healthcare services. It seems that in recent times the literate population is more concerned towards perceived efficiency, specialized care, and superior amenities.(fig.3) It is clear from Figure 4 that about 17.48% of the self employed respondents are neutral towards the opinion that Nowadays people prefer private hospitals over public healthcare services. This trend underscores the challenges faced by public healthcare services in meeting the evolving expectations of the populace.(fig.4) Figure 5 denotes that about 18.45% of the respondents from 26-35 years of age give a rating of 3 towards the efficiency of public health care services in India. Public healthcare services in India often grapple with inefficiencies, characterized by resource constraints, bureaucratic

hurdles, and a higher patient load, leading to longer waiting times and compromised service delivery.(fig.5) It is clear from Figure 6 that about 23.30% of the metropolitans give a rating of 3 towards the efficiency of public health care services in India. These challenges contribute to a preference for private healthcare options among the populace.(fig.6) Figure 7 signifies that about 23.30% of the metropolitans report lack of speciality services as the Major drawback of public health care services. A significant drawback of public healthcare services in India is the dearth of specialized medical services, hindering comprehensive patient care and necessitating reliance on private facilities for specific treatments.(fig.7) Figure 8 denotes that about 19.42% of the undergraduates report lack of infrastructure as the Major drawback of public health care services. This limitation underscores the need for enhanced specialization within the public healthcare system to address diverse medical needs effectively.(fig.8) It is clear from Figure 9 that about 17.48% of the respondents with monthly income of less than 10,000 are neutral towards the view that Financial affordability poses a major threat in accessing private healthcare services due to high costs. The fear of financial constraints acts as a formidable barrier to accessing private healthcare services in India, as the high costs associated with private medical care create challenges for many individuals, leading to disparities in healthcare access.(fig.9) It is clear from Figure 10 that about 17.48% of the respondents from urban area agree that Financial affordability poses a major threat in accessing private healthcare services due to high costs. This economic hurdle underscores the critical need for policies addressing affordability to ensure equitable healthcare for all segments of society.(fig.10) Figure 11 signifies that about 29.13% of the undergraduates give agreeability of 3 over the government initiatives or policies aimed at improving the efficiency of health care services in India. Government initiatives in India aimed at enhancing healthcare efficiency often face challenges such as bureaucratic red tape, inadequate implementation strategies, and resource allocation issues, contributing to the persisting inefficiencies in the healthcare system.(fig.11) Figure 12 denotes that about 23.30% of the male respondents give agreeability of 3 over the government initiatives or policies aimed at improving the efficiency of health care services in India. Overcoming these obstacles is crucial for achieving meaningful improvements in public health services.(fig.12)

## VII. LIMITATION:

One of the major limitation of the study in the sample frame. there are less educated people are able to answer the question in online survey. In this study researcher used to convenient sampling method. The survey was conducted by sending online forms to the people and also collected directly from the people. another limitation is the sample size of 200 which cannot be used assume the entire population in particular country, state or city.

## VIII. CONCLUSION:

Corporate Hospitals are emerging as a new breed in the healthcare industry in India. These Hospitals are attracting a number of patients because of their super-specialties. There is a strong competition among these hospitals for market share. The emphasis is not only to provide specialized service more efficiently and effectively, but also to maintain the quality of overall services. Healthcare has become a business. Heavy investments were put in the public limited companies in the health business with profit orientation. The main objective of the study is to analyze the efficiency of public and private healthcare services in India. It is an empirical study with 203 samples collected through convenient sampling. It was found that people prefer private hospitals over public hospitals as public healthcare services seem to lack basic infrastructure and speciality services.

## IX. SUGGESTIONS:

To address the inefficiencies in public healthcare services in India, there's a need for streamlined administrative processes, improved infrastructure, and increased funding. Implementing robust health information systems can enhance data management and patient care coordination. Investing in healthcare workforce training and recruitment, along with effective utilization of technology, can optimize service delivery. Promoting public-private partnerships can bring in additional resources and expertise. Lastly, fostering community engagement and awareness programs can empower citizens to actively participate in their healthcare, contributing to a more efficient and responsive public health system. It is necessary for the government to set standards in hospitality costs at private hospitals to ensure affordable healthcare services.

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#### PLAGIARISM REPORT:



**ABSTRACT:**

Healthcare has become a business. Heavy investments were put in the public limited companies in the health business with profit orientation. There are innumerable instances, where even for common illness the helpless patient has to undergo a list of tests. After the completion of these tests, the patient will become a victim by thousands of rupees. The NHM focuses on strengthening public healthcare infrastructure and improving the quality of healthcare services in the public sector. The main objective of the study is to analyze the efficiency of public and private healthcare services in India. It is an empirical study with 203 samples collected through convenient sampling. It was found that people prefer private hospitals over public hospitals as public healthcare services seem to lack basic infrastructure and speciality services. Investing in healthcare workforce training and recruitment, along with effective utilization of technology, can optimize service delivery. Promoting public-private partnerships can bring in additional resources and expertise.

**KEYWORDS:**

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**Preface**

The medical profession has widened its horizon worldwide and India is no exception. Commercial Hospitals are arising as a new strain in the healthcare assiduity in India. These Hospitals are attracting a number of cases because of theirsuper-specialties. There's a strong competition among these hospitals for request share. The emphasis isn't only to give technical service more efficiently and effectively, but also to maintain the quality of overall services. The major concern for commercial hospitals is on consumer satisfaction. In the service marketing, " Service Marketing ", Himalaya Publishing House, New Delhi, 1997. It's apparent that just not that four P's, i.e. Product, Price, Place and Promotion plays a vital part, but also other P's like People, Physical substantiation and process play an important part in satisfying the consumer. moment, client satisfaction is a growing field of exploration and tutoring. Healthcare has come a business. Heavy investments were put in the public limited companies in the health business with profit exposure. relatively frequently charges of high tech outfit are at the cost of cases by subjugating them to gratuitous examinations. There are innumerable cases, where indeed for common illness the helpless case has to suffer a list of tests. After the completion of these tests, the case will come a victim by thousands of rupees. The NHM focuses on strengthening public healthcare structure and perfecting the quality of healthcare services in the public sector. This action includes programs like the National Rural Health Mission( NRHM) and National Urban Health Mission( NUHM). Regulation and Accreditation The government has established nonsupervisory bodies similar as the National Accreditation Board for Hospitals and Healthcare Providers( NABH) to insure that private healthcare installations maintain certain norms of care and quality. Telemedicine The government has promoted telemedicine ande-health enterprise to increase access to healthcare services, particularly in pastoral and remote areas. Public-Private hookups( PPPs) In some cases, the government has partnered with private healthcare providers to expand healthcare structure and services. PPPs aim to influence the effectiveness and coffers of the private sector while maintaining public availability. gratuitous surgeries and laboratory tests are

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**CONCLUSION:**

Corporate Hospitals are emerging as a new breed in the healthcare industry in India. These Hospitals are attracting a number of patients because of their super-specialties. There is a strong competition among these hospitals for market share. The emphasis is not only to provide specialized service more efficiently and effectively, but also to maintain the quality of overall services. Healthcare has become a business. Heavy investments were put in the public limited companies in the health business with profit orientation. The main objective of the study is to analyze the efficiency of public and private healthcare services in India. It is an empirical study with 203 samples collected through convenient sampling. It was found that people prefer private hospitals over public hospitals as public healthcare services seem to lack basic infrastructure and speciality services.

