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# Healing Beyond Borders: Advantage India

Philosophical, Business, Legal  
and Ethical Discourse

April 2026

Research

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**Philosophical, Business, Legal  
and Ethical Discourse**

April 2026

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## List of Abbreviations

<b>ART Act</b>	Assisted Reproductive Technology (Regulation) Act, 2021AYUSH - Ayurveda, Yoga, Unani, Siddha and Homeopathy
<b>CDAC</b>	Centre for Development of Advanced Computing
<b>CE Act</b>	Clinical Establishments (Registration and Regulation) Act, 2010 FY – Financial Year
<b>IDTC</b>	India Tourism Development Corporation
<b>MDA</b>	Market Development Assistance Scheme
<b>MTSPs</b>	Medical Tourism Service Providers
<b>MVT</b>	Medical Value Travel
<b>NABH</b>	National Accreditation Board for Hospitals & Healthcare Providers
<b>PPP</b>	Public–Private Partnerships
<b>SEPC</b>	Services Export Promotion Council
<b>PCPNDT Act</b>	Pre-Conception and Pre-Natal Diagnostic Techniques (Prohibition of Sex Selection) Act, 1994

## Executive Summary

In the recent years, India has emerged as a major destination for international patients seeking high-quality healthcare services at comparatively affordable costs. The convergence of healthcare services and the tourism sector has given rise to a growing medical value travel ecosystem, supported by India's clinical expertise, cost competitiveness, internationally accredited hospitals, and expanding healthcare infrastructure.

Rising healthcare costs, long waiting periods, and limited access to specialised treatments in several developed countries have contributed to the growing demand for cross-border medical care. India has responded to this demand by offering advanced medical procedures across specialties such as cardiology, orthopaedics, fertility treatments, cosmetic procedures, and organ transplantation at significantly lower costs. In addition, the integration of modern medicine with traditional systems of healthcare such as Ayurveda, Yoga, Unani, Siddha, and Homeopathy (“**AYUSH**”) provides a distinctive healthcare offering that combines curative treatment with wellness-oriented care.

This paper examines the evolution of India's medical tourism sector by analysing market trends, the legal and regulatory framework governing healthcare services accessed by international patients, and government initiatives aimed at strengthening India's position as a global medical tourism destination. While India has made considerable progress in promoting medical value travel, the sector continues to face structural challenges, including fragmented regulatory oversight, uneven quality standards across regions, infrastructure limitations, limited international insurance portability, and fragmented branding efforts.

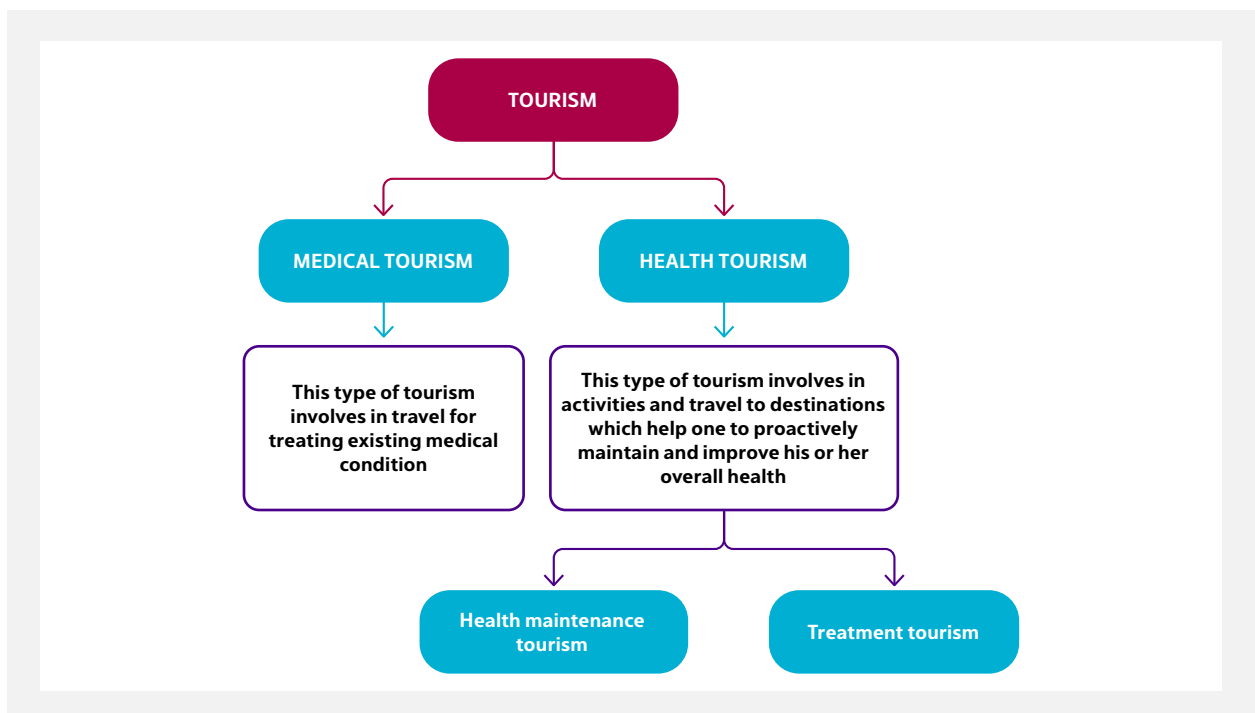
The paper concludes by recommending measures to strengthen the ecosystem, including improved regulatory coordination, wider adoption of quality standards beyond major urban centres, stronger international insurance integration, enhanced infrastructure and patient facilitation services, and a more coordinated global branding strategy. With continued policy support and institutional coordination, India is well positioned to strengthen its position as a trusted global hub for medical and wellness tourism.

# Introduction

Over the past decade, India has increasingly gained recognition as a destination offering high-quality health-care services at comparatively affordable costs. It remains a key contributor to healthcare-led foreign exchange inflows, supported by cost competitiveness and clinical expertise. The intersection of the expanding healthcare sector with the country’s tourism ecosystem has given rise to a robust medical value travel (“MVT”) segment, contributing positively to both industries while also creating a new avenue for economic growth. The steady inflow of international patients seeking medical treatment in India has strengthened this sector, which is projected to witness sustained expansion in the coming years.

Developments in healthcare delivery have enabled patients to access advanced yet cost-effective treatment alternatives, positioning India as a competitive option for medical tourists worldwide. Several factors drive this inflow, including affordability of procedures, accessibility of skilled medical professionals, hospitality, recovery support services, minimal waiting periods, and availability of modern medical technologies within internationally accredited facilities. Continuous investments in healthcare infrastructure and growing adoption of digital health technologies have further enhanced treatment quality and patient experience.

India’s medical ecosystem has also benefited from the coexistence of modern allopathic medicine with traditional and alternative systems such as Ayurveda, Yoga, Unani, Siddha and Homeopathy (AYUSH), enabling patients to access both curative and wellness-oriented treatment options within a single destination. As global healthcare costs continue to rise and waiting times remain long in many developed healthcare systems, India increasingly serves as a viable alternative for patients seeking timely, affordable, and quality medical care across specialties including cardiology, orthopaedics, dental treatment, fertility services, and mental healthcare.



Source: *Marketing and Economics of Medical Tourism*

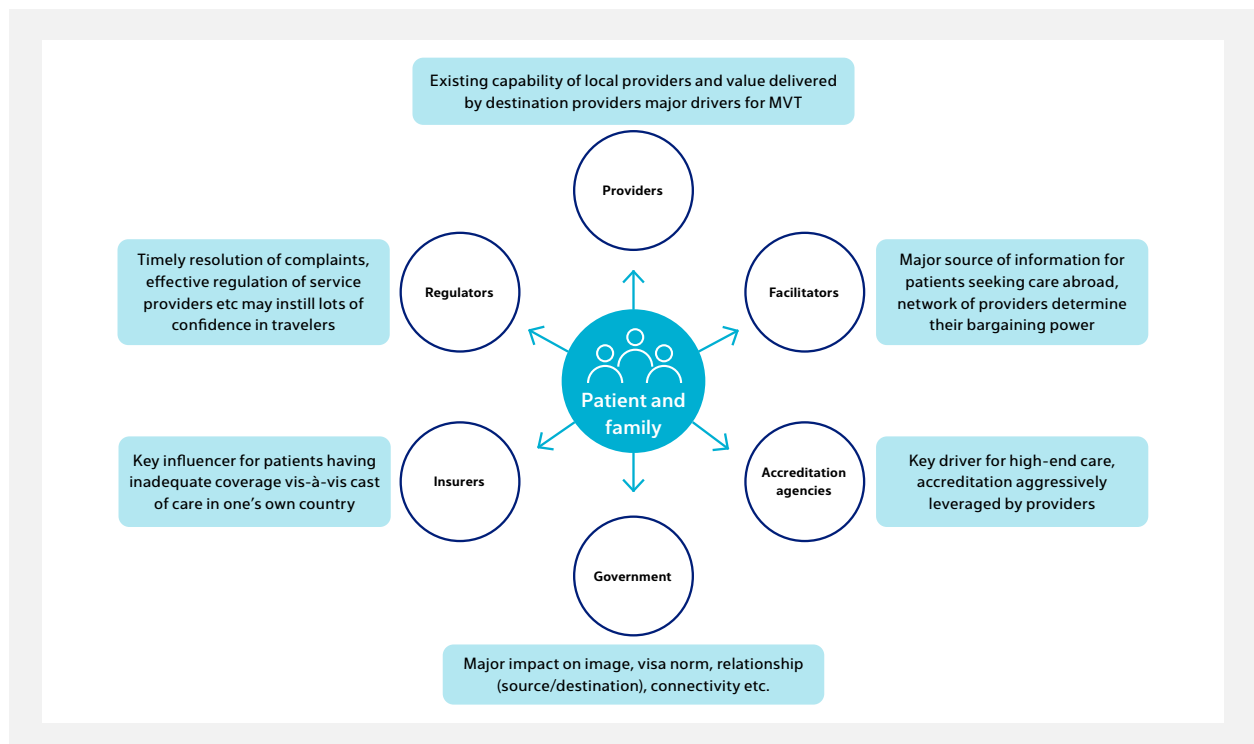
Introduction

Medical tourism primarily encompasses activities related to the travel of foreign tourist to the destination location for the purpose of restoring health through medical interventions. It addresses specific medical treatment or enhancement requirements of the patients travelling from other countries by offering quality treatment options at competitive prices. Medical interventions in the medical tourism sector broadly include medical treatment for curative purposes such as cardiac surgery, organ transplantation, orthopaedic surgery, dental procedures, etc., for wellness and rejuvenation or for aesthetic reasons such as cosmetic surgery, stress relief, etc. or for accessing traditional systems of medicines in India.

On the other hand, wellness tourism primarily encompasses travel associated with the goal of maintaining or enhancing one’s personal well-being and includes the pursuit of physical, mental and spiritual wellbeing either for leisure or business. Wellness tourism may be primarily for the purpose or wellness or for individuals who seek to maintain wellness while travelling for other purposes as an extension of their goal of maintaining good health.<sup>1</sup>

High healthcare costs in developed nations and a wealth of skilled medical professionals in India and other Asian countries are key factors contributing to the rapid growth of medical tourism.<sup>2</sup> Numerous countries have begun to position medical tourism as a developing sector to boost inflow of visitors into the country. Countries such as Malaysia, Thailand, Turkey, Mexico, Turkey, Taiwan and Singapore have also been recognized as top destinations for MVT.<sup>3</sup>

Some of the key stakeholders recognized for the MVT Ecosystem include the service providers, regulators, facilitators, insurers, accreditation agencies and the Government itself.



Source: Key Stakeholders in the MVT Ecosystem

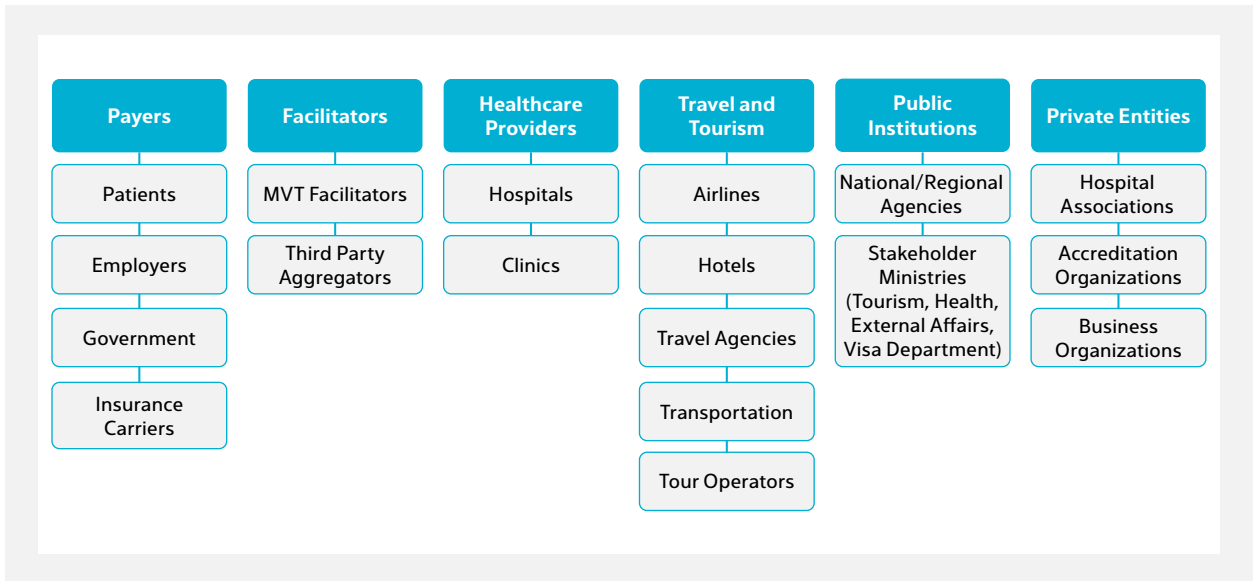
1 Accessible at: <https://tourism.gov.in/sites/default/files/2022-05/National%20Strategy%20and%20Roadmap%20for%20Medical%20and%20Wellness%20Tourism.pdf>, last accessed on March 2, 2026.

2 Accessible at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC11057838/>, last accessed on March 2, 2026.

3 Ibid.

Introduction

To break it down further:



Source: *Strengthening MVT through Partnerships*

# India as an Attractive Hub for Medical Tourism

Over the past few years, India has gained tremendous momentum in attracting tourists seeking high-quality MVT to the country. In the National Strategy and Roadmap for Medical and Wellness Tourism, medical tourism is referred to as MVT.

India's medical tourism sector is projected to grow from USD 6 billion in 2022 to USD 13 billion by 2026.<sup>1</sup> Research shows that India offers quality healthcare access and healthcare professionals trained in performing complex medical interventions at comparatively affordable and competitive prices. The inflow of investments into development of the healthcare infrastructure facilities coupled with the adoption of artificial intelligence technology is providing a push to the sector. A fair proportion of the patients visiting India for the purposes of medical tourism include patients from Asian and African countries and to some extent from USA, UK and Australia.<sup>2</sup>

India has been ranked 10th out of 46 destinations in the world for medical tourism by the Medical Tourism Association on the Medical Tourism Index 2020-21. India has also been recognized amongst the top 5 destinations for wellness tourism across markets globally.<sup>3</sup> India has a large number of accredited facilities that provide healthcare facilities that are at par with global standards. Accreditation of hospitals by international bodies assists in establishing quality standards that are at par with international standards, thereby attracting more patients to India from other countries. According to a report by Federation of Indian Chambers of Commerce & Industry (“**FICCI**”) on MVT in India, India is a preferred destination for cardiology, orthopaedics, transplant and ophthalmology in curative care. But apart from these it is also a secondary destination for neurology and spine surgery, oncology, dentistry, fertility & reproductive care and weight loss surgery and this is the area for immense growth in India. India also enjoys high credibility in wellness and prevention and alternative medicine.<sup>4</sup>

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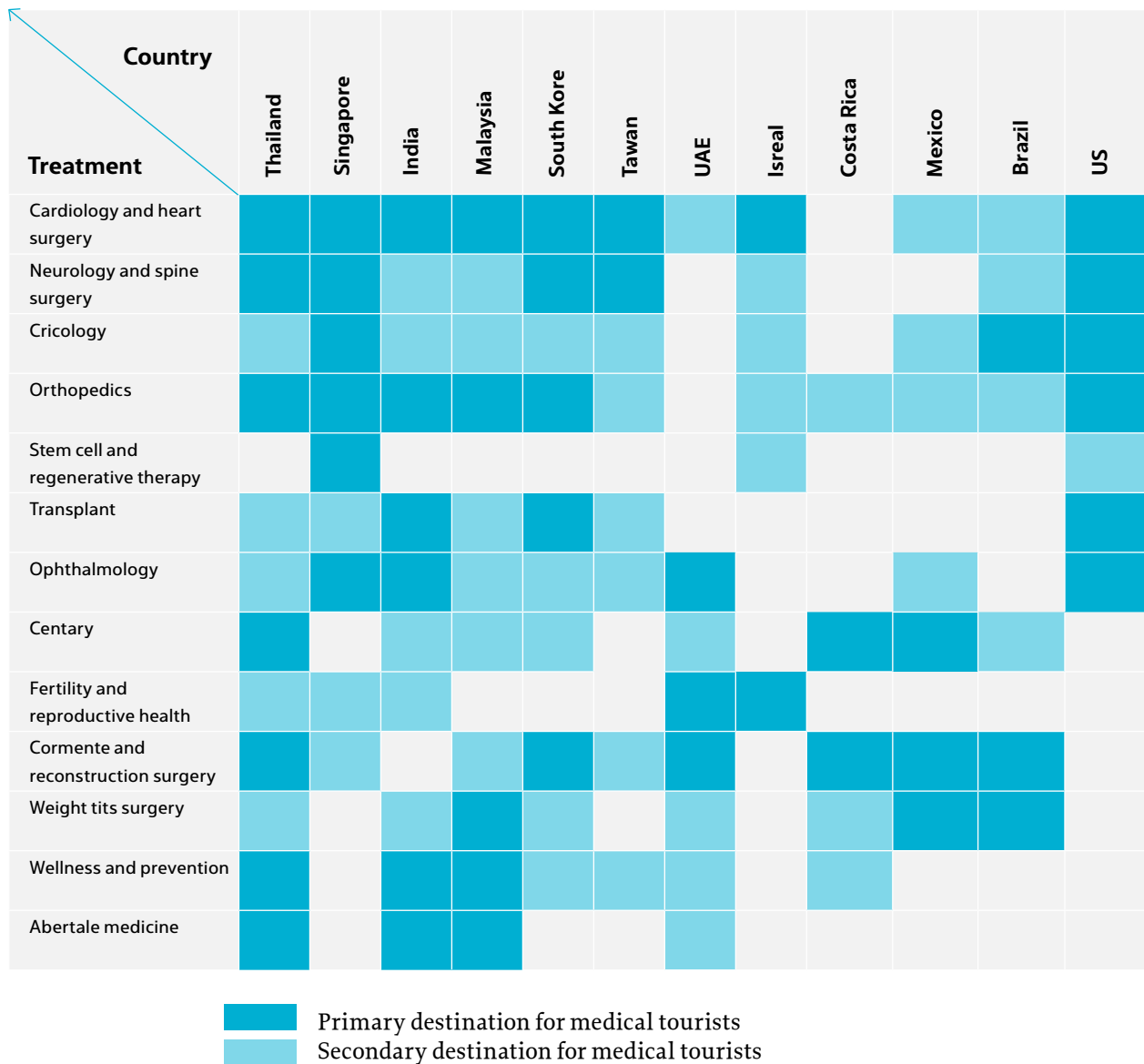
1 Accessible at: <https://www.ndtv.com/travel/indias-medical-tourism-market-to-reach-usd-13-billion-in-2026-7-top-cities-leading-the-boom-11153368>, last accessed on March 2, 2026.

2 Accessible at: <https://www.iipa.org.in/cms/public/uploads/522031635499677.pdf>, last accessed on March 2, 2026.

3 Accessible at: <https://www.investindia.gov.in/sector/healthcare/medical-value-travel#:~:text=MVT%20stands%20for%20Medical%20Value,restoring%20health%20through%20medical%20intervention.>, last accessed on March 2, 2026.

4 Accessible at: <https://aspirecircle.org/wp-content/uploads/2022/01/Medical-Value-Travel-Report-HLTH.pdf>, last accessed on March 2, 2026.

India as an Attractive Hub for Medical Tourism



Source: Report by FICCI on Medical Value Travel in India

The MVT industry in India gets maximum patients for heart surgery, knee transplant, cosmetic surgery and dental care as the cost of treatment in India is the lowest in Asia, much lower than Thailand, Indonesia, Singapore and Hong Kong.<sup>5</sup> The government has also implemented various initiatives to push India’s rise as a hub of MVT.

The relatively lower cost of medical treatment in India can be attributed to several structural factors within the country’s healthcare ecosystem. Lower operational and labour costs compared to developed healthcare systems significantly reduce the overall cost of treatment. In addition, India’s large pool of highly trained medical professionals and the availability of tertiary-care hospitals capable of handling high patient volumes allow healthcare providers to achieve economies of scale. The domestic pharmaceutical and medical devices industries also contribute to cost efficiency by enabling access to competitively priced medicines, implants and medical consumables.

5 Accessible at: <https://www.medindia.net/news/india-ranks-among-top-3-medical-tourism-destinations-in-asia-140770-1.html>, last accessed on March 6, 2026.

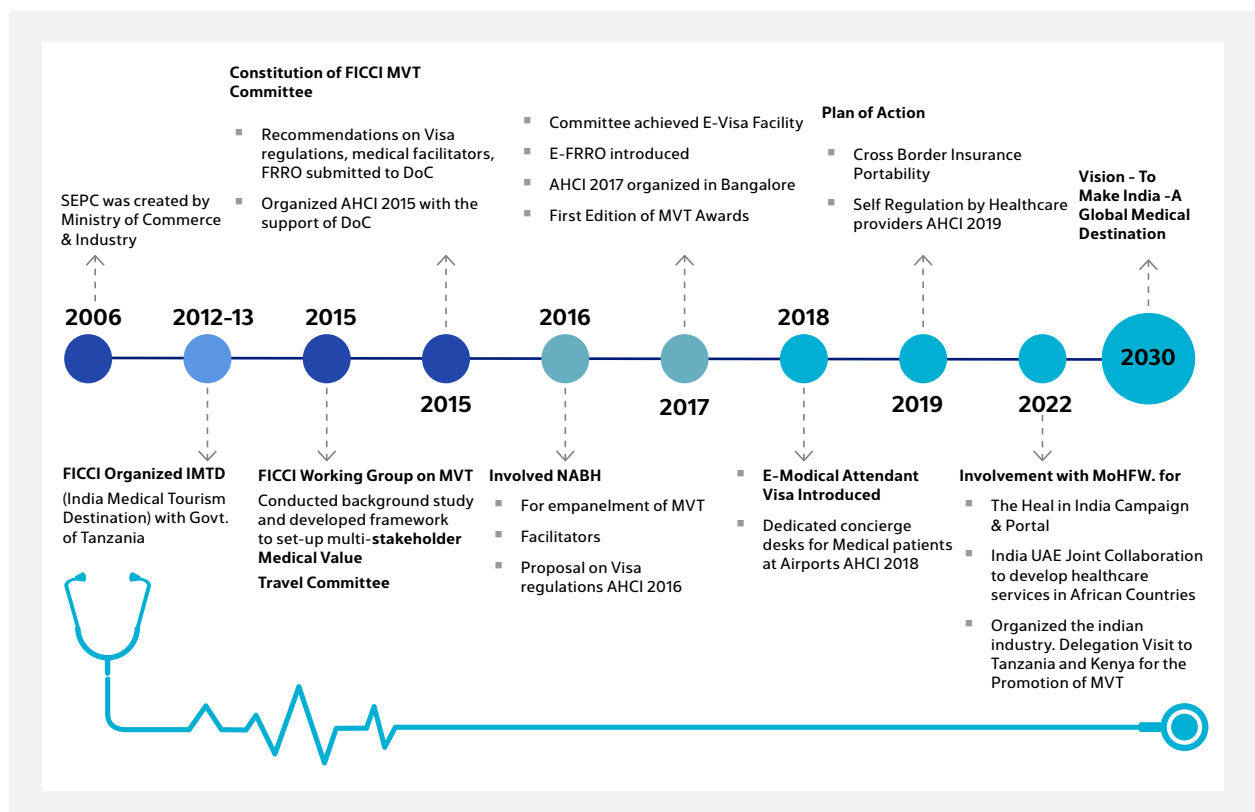
India as an Attractive Hub for Medical Tourism

Further, comparatively lower malpractice insurance costs and administrative overheads reduce the overall cost burden on healthcare institutions, allowing hospitals to offer complex procedures at substantially lower prices while maintaining internationally comparable clinical outcomes.

To further encourage the growth of this sector in India, under the Finance Bill 2026-27, the government has proposed a scheme to support states in establishing five (5) regional medical tourism hubs in partnership with the private sector. The scheme envisages the development of large-scale, integrated healthcare destinations combining advanced hospital infrastructure, diagnostics, post-treatment care, rehabilitation services, and AYUSH systems under a single framework.<sup>6</sup>

The government is also taking various steps to recognize MVT and wellness tourism as vital sectors for national development, aligning with the Aatmanirbhar Bharat initiative. To sustain this growth and maintain India’s competitive edge, a comprehensive strategy and roadmap has been developed by the Ministry of Tourism to marry MVT with the overall goals of economy. It is viewed as a unique opportunity to provide high-quality medical services at lower costs, making it particularly advantageous for patients from countries with limited healthcare options to access quality care at affordable prices. With the global medical tourism market valued between USD 60-80 billion, India is poised to capture a significant share by leveraging its advanced healthcare infrastructure and skilled professionals.

According to the Report on Medical Value Travel in India by FICCI numerous efforts have been taken by the Government to achieve its vision of making India a global medical destination. A snapshot of the efforts taken in this regard is provided below:



Source: Report by FICCI on Medical Value Travel in India

6 Accessible at: <https://www.pib.gov.in/PressReleasePage.aspx?PRID=2221616&reg=3&lang=2#:~:text=The%20Union%20Budget%202026%E2%80%9320marks%20a%20significant%20milestone%20in,the%20Revised%20Estimates%20of%20FY,> last accessed on March 5, 2026.

## Market Trends

India's medical tourism sector is set for strong growth, with market estimates projecting an increase from around USD 18.2 billion in 2025 to USD 58.2 billion by 2035, reflecting a compound annual growth rate of about 12.3% over the forecast period.<sup>1</sup> This growth is being driven by India's ability to deliver high-quality healthcare at significantly lower costs than Western countries, supported by advanced medical technology and a large pool of internationally trained doctors and specialists. Rising demand for treatments such as cosmetic procedures, orthopaedic care, fertility services and organ transplants continues to fuel the expansion of India's medical tourism market. The presence of internationally accredited hospitals and clinics in major urban centres such as Delhi, Bengaluru and Mumbai have further strengthened India's position as a leading global destination for medical travel.

Cosmetic procedures are expected to remain the dominant segment of India's medical tourism market in 2025, accounting for nearly 30% of the total market share. This trend is driven by growing global demand for procedures such as rhinoplasty, facelifts, liposuction and dental implants<sup>2</sup>. A key factor attracting patients to India is the significant cost advantage, with many procedures available at a fraction of the prices charged in Western countries, while maintaining international standards of care. As a result, patients from regions such as the Middle East, Southeast Asia and the United States increasingly travel to India for cosmetic treatments. There is also rising interest in integrated care models that combine modern, accredited medical treatment with traditional AYUSH system.

Overall, these trends point to India's emergence as a competitive and diversified medical tourism hub, supported by cost advantages, clinical quality and a growing range of specialised treatment offerings. As international patient flows increase, the sector is likely to see greater consolidation around accredited hospitals, specialised centres and integrated care models, with stronger emphasis on quality assurance, patient experience and regulatory compliance.

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1 Accessible at: <https://assets.kpmg.com/content/dam/kpmgsites/in/pdf/2025/07/heal-in-india-catalysing-medical-and-wellness-tourism-for-a-healthier-global-future.pdf>, last accessed on March 5, 2026.

2 Accessible at: <https://www.futuremarketinsights.com/reports/india-medical-tourism-market>, last accessed on March 5, 2026.

## Legal and Regulatory Landscape

MVT has emerged as a significant component of the healthcare sector, requiring robust legal and regulatory frameworks to ensure patient safety, ethical practices, and transparency. Legal frameworks regulate healthcare practices, protect patient rights, and establish operational standards for healthcare providers and facilitators involved in medical tourism.

Given the lack of consolidated legislation governing medical travel in India and diversity of healthcare services accessed by international patients, multiple statutes influence the regulatory landscape affecting medical tourism in India. These regulations collectively aim to maintain quality standards, protect consumer interests, and strengthen trust in India's healthcare system among foreign patients.

### A. Drug Regulatory Framework

The Drugs and Cosmetics Act, 1940 (“**DCA**”) and the Drugs Rules, 1945 (“**Drugs Rules**”) regulate the manufacture, import, and distribution of drugs and medical devices in India to ensure safety, efficacy, and quality standards. Compliance with these standards ensures that medicines and medical products used in treatment meet prescribed safety requirements, thereby supporting patient confidence in treatments accessed within India.

Under this framework, no drug may be manufactured for sale, sold, stocked, exhibited or distributed except under and in accordance with a valid licence with strict conditions on manufacturing quality. Additionally, the statutory prohibitions on misbranded, adulterated or spurious drugs assume heightened importance in the medical tourism context.

The Drugs Rules further prescribe detailed conditions relating to labelling, storage, record maintenance, prescription dispensing and sale of specified categories of drugs. Compliance with prescription-only restrictions is particularly relevant where foreign patients may seek advance procurement or bulk dispensing as part of treatment packages.

The drug regulatory framework including the Pharmacy Act, 2009 also regulates the qualifications of competent technical staff and pharmacists, thereby indirectly shaping institutional compliance obligations for healthcare establishments serving international patients.

### B. Medical Visa & AYUSH Visa

Availability and accessibility of visas historically posed challenges for the growth of medical tourism in India. To address this, the Government has progressively simplified and liberalized the medical visa regime, enabling multiple entries and longer stays for foreign nationals seeking treatment in India. India's medical tourism framework is supported by a dedicated medical visa regime, administered under India's immigration laws, primarily the Passport (Entry into India) Act, 1920 and the Foreigners Act, 1946, along with visa guidelines or information issued by the Ministry of Home Affairs and implemented by the Bureau of Immigration.

<sup>1</sup> This empowers the Government to regulate the entry, stay and exit of foreign nationals and to prescribe visa categories, including visas issued for medical purposes.

In 2019, the regime was further relaxed to permit foreigners to obtain indoor medical treatment on their primary visa even for pre-existing diseases, except in cases involving organ transplantation. These reforms have significantly eased travel barriers for patients seeking healthcare services in India.<sup>2</sup>

Foreign nationals travelling to India for treatment may apply for a medical visa, which is granted to individuals seeking specialised medical treatment in recognised hospitals or treatment centres in India. The framework also allows the issuance of Medical Attendant Visas (MX-Visa) to accompanying family members or caregivers, usually limited to two attendants travelling with the patient.<sup>3</sup> Applicants are generally required to produce documentation from an Indian medical institution confirming the proposed course of treatment. The visa category was introduced to facilitate access to India's healthcare infrastructure, particularly for procedures such as cardiac surgery, organ transplantation, orthopaedics and other specialised treatments.

The initial period of validity of the medical visa may be up to a period of one year or the period of treatment, whichever is less, with permission for multiple entries, recognising that patients may require follow-up consultations or staged medical procedures. The medical visa may be extended for a further period of up to one year by the concerned Foreigner Regional Registration Office on provision of the required documents.<sup>4</sup>

The introduction of medical e-visas has further streamlined the process by enabling foreign nationals to obtain visas specifically for medical treatment through simplified digital procedures. To promote medical tourism, the Government of India currently extends the e-medical visa facility to nationals of more than 150 countries, thereby facilitating easier access for international patients.<sup>5</sup>

In addition to conventional medical visas, the Government has introduced a dedicated AYUSH visa category for foreign nationals seeking treatment under traditional Indian systems of medicine, including Ayurveda, Yoga, Unani, Siddha, and other therapeutic and wellness practices. The introduction of the AYUSH visa aligns with the Government's broader "Heal in India" initiative aimed at promoting India as a global destination for holistic healthcare<sup>6</sup>. Ministries, including the Ministry of AYUSH and the Ministry of Health and Family Welfare, are also collaborating on developing a one-stop Heal in India portal to support MVT.

The AYUSH visa caters not only to patients seeking medical treatment but also to individuals interested in therapeutic care, wellness, and preventive health services rooted in traditional Indian medicine systems<sup>7</sup>. This initiative strengthens India's positioning as a comprehensive medical and wellness tourism destination.

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1 Accessible at: [https://www.mha.gov.in/PDF\\_Other/AnnexI\\_01022018.pdf](https://www.mha.gov.in/PDF_Other/AnnexI_01022018.pdf) & [https://www.mha.gov.in/PDF\\_Other/AnnexIII\\_01022018.pdf](https://www.mha.gov.in/PDF_Other/AnnexIII_01022018.pdf), last accessed March 4, 2026.

2 Accessible at: <https://www.pib.gov.in/PressReleaselframePage.aspx?PRID=1583680&reg=3&lang=2>, last accessed March 5, 2026.

3 Accessible at: [https://www.mha.gov.in/PDF\\_Other/AnnexIII\\_01022018.pdf](https://www.mha.gov.in/PDF_Other/AnnexIII_01022018.pdf), last accessed March 5, 2026.

4 Ibid.

5 Accessible at: <https://www.pib.gov.in/PressReleaselframePage.aspx?PRID=2036816&reg=3&lang=2>, last accessed March 5, 2026.

6 Accessible at: <https://pib.gov.in/PressReleaseDetailm.aspx?PRID=1945070>, last accessed on March 4, 2026.

7 Accessible at: [https://www.mea.gov.in/Portal/CountryNews/19887\\_Ayush\\_Visa.pdf](https://www.mea.gov.in/Portal/CountryNews/19887_Ayush_Visa.pdf), last accessed on March 4, 2026.

Indian missions in cities such as San Francisco<sup>8</sup> and Toronto<sup>9</sup> follow similar procedures, requiring hospital documentation confirming treatment arrangements. Missions in other cities, including Stockholm, Paris, Copenhagen, and Manila, also facilitate issuance of medical and e-medical visas, further easing access for foreign nationals travelling to India for treatment.

## C. Regulation of Clinics and Hospitals

The legal and regulatory framework governing healthcare institutions plays a critical role in enhancing the credibility and quality of healthcare services in India, thereby making the country an attractive destination for foreign patients seeking affordable and reliable medical care. A well-regulated healthcare environment addresses concerns relating to patient safety, treatment efficacy, and service standards, which are key considerations for international patients when choosing treatment destinations.

Healthcare regulation in India largely operates at the state level<sup>10</sup>, with each state adopting its own laws and policies to regulate hospitals and clinical establishments. While this enables states to tailor regulations to local needs, it has also resulted in non-uniformity in licensing, registration, and quality standards across healthcare facilities in different regions.

In an attempt by the Government to introduce uniformity and ensure minimum standards of healthcare delivery, it enacted the Clinical Establishments (Registration and Regulation) Act, 2010 (“CE Act”). The CE Act mandates compulsory registration of all clinical establishments, including hospitals, nursing homes, clinics, and diagnostic centres, whether publicly or privately operated, except that run by the armed forces. It requires establishments to comply with prescribed standards relating to infrastructure, equipment, human resources, and service delivery, thereby promoting accountability and quality assurance in healthcare services.

The CE Act also provides for establishment of National and State Councils for Clinical Establishments responsible for determining and updating standards, maintaining registers of establishments, and facilitating regulatory coordination<sup>11</sup>. Requirements relating to maintenance of records and adherence to treatment standards further strengthen transparency and oversight in healthcare delivery. Compliance with these norms is particularly relevant in the context of medical tourism, where international patients rely heavily on institutional credibility and quality assurance.

Although the CE Act was intended to establish a nationwide regulatory baseline, its implementation is contingent upon adoption by individual states, resulting in continued uneven regulatory coverage across the country. This uneven regulatory landscape has contributed to certain cities and regions—such as Delhi, Mumbai, Chennai, Hyderabad, and Bengaluru—emerging as major medical tourism hubs owing to relatively stronger healthcare infrastructure and regulatory compliance, thereby attracting a substantial share of incoming medical tourists.

As India seeks to position itself as a global medical tourism hub, ensuring that healthcare facilities consistently meet acceptable quality and safety standards remains essential for sustaining international patient confidence and strengthening India’s competitiveness in the global medical tourism market.

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8 Accessible at: <https://www.cgisf.gov.in/page/medical-visa/>, last accessed on March 4, 2026.

9 Accessible at: <https://www.cgitoronto.gov.in/page/medical-visa/>, last accessed on March 4, 2026.

10 As per the seventh schedule of the Constitution of India.

11 Accessible at: <https://www.ima-india.org/ima/left-side-bar.php?pid=503>, last accessed on March 4, 2026.

## D. NABH Standards

Accreditation plays a critical role in strengthening the credibility of healthcare institutions and ensuring consistent quality and patient safety standards, both of which are key determinants for international patients selecting treatment destinations. In India, accreditation efforts have increasingly been used to promote confidence in healthcare services and support the growth of MVT.

The National Accreditation Board for Hospitals & Healthcare Providers (“**NABH**”), established in 2005 as a constituent body of the Quality Council of India, serves as the principal accreditation authority for hospitals and healthcare organizations in the country.. It establishes comprehensive benchmarks for healthcare institutions covering patient safety, clinical governance, infection control, facility management, and continuous quality improvement.

Although NABH accreditation is not mandatory under Indian law, it has emerged as an important institutional mechanism for standardising healthcare quality across hospitals and clinics. Many leading hospitals in India have also sought accreditation from international bodies, which often carry stronger global recognition and attract greater international patient inflows. Accreditation is granted for a specified period, subject to periodic reassessment and ongoing compliance with NABH standards.

The Government has taken steps to encourage wider adoption of NABH accreditation, with proposals aimed at making accreditation increasingly integral to healthcare regulation. Accreditation is also relevant for MVT facilitators, who play a role in providing non-clinical services such as accommodation, logistics, and post-operative care support. Ensuring that such facilitators adhere to quality standards is important for maintaining patient experience and continuity of care, particularly for international patients requiring extended recovery arrangements.

Going forward, development of specialized accreditation standards for areas such as dental clinics and coordinated nationwide efforts to strengthen accreditation coverage would further support the expansion and credibility of India’s MVT ecosystem.

## E. Fertility and Reproductive Tourism

India has emerged as a preferred destination for fertility and reproductive tourism owing to the availability of advanced reproductive technologies and comparatively affordable treatment options. State-of-the-art fertility clinics, availability of skilled medical professionals, and comparatively lower treatment costs have historically attracted international patients seeking assisted reproductive services in India. However, recent regulatory reforms have significantly reshaped this sector and altered the extent of inbound reproductive tourism.

Until recently, fertility clinics and related services in India operated with limited uniform regulation. Recognising the need to standardize practices and protect patient interests, the Government introduced legislative measures to establish minimum standards regarding infrastructure, equipment, staffing, and ethical practices in assisted reproductive services. These reforms aim to enhance access to safe and effective reproductive healthcare while ensuring protection of patients’ rights and promoting trust among individuals seeking reproductive treatments in India.

The Assisted Reproductive Technology (Regulation) Act, 2021 (“**ART Act**”) was enacted to regulate and improve practices relating to assisted reproductive technologies across the country. The ART Act prescribes standards for clinics and banks, mandates registration, and seeks to ensure patient safety and ethical practices in reproductive healthcare. It includes provisions governing handling and storage of gametes and embryos, transparency in reporting success rates, and regulatory oversight of clinics and related establishments. It also mandates compulsory registration of ART clinics and ART banks with the designated national and state authorities and prescribes standards relating to infrastructure, personnel qualifications, record maintenance, and patient consent. Clinics are required to maintain detailed records of donors, procedures and outcomes, and are subject to inspection and regulatory oversight.

Commercial surrogacy was permitted in India between 2002 and 2015, during which time the country became a major global hub for surrogacy<sup>12</sup> arrangements due to lower costs and availability of willing surrogates. The surrogacy sector witnessed rapid growth, with estimates suggesting that thousands of surrogate births occurred annually, many for foreign couples, and the industry generated substantial revenue. India consequently became a significant destination for procreative medical tourism.

However, concerns regarding exploitation of economically vulnerable women serving as surrogates prompted regulatory intervention. The Surrogacy (Regulation) Act, 2021 (“**Surrogacy Act**”) now permits only altruistic surrogacy arrangements under specified conditions and prohibits commercial surrogacy. Monetary compensation beyond medical expenses and insurance coverage is disallowed. The Surrogacy Act also prescribes eligibility conditions for intending couples and surrogate mothers, including marital and age requirements and medical necessity criteria.

Notably, surrogacy services are now largely restricted to Indian couples, including certain categories of overseas citizens and non-resident Indians, thereby substantially reducing inbound reproductive tourism that previously existed under commercial surrogacy arrangements.

India also maintains progressive legal provisions governing termination of pregnancy through the Medical Termination of Pregnancy Act, 1971, which permits termination of pregnancy up to prescribed gestational limits and beyond in exceptional circumstances. Complementing this framework, the Pre-Conception and Pre-Natal Diagnostic Techniques (Prohibition of Sex Selection) Act, 1994 (“**PCPNDT Act**”) regulates prenatal diagnostic techniques and prohibits their misuse for sex determination, thereby seeking to prevent sex-selective practices and promote gender equity.

The PCPNDT Act plays an important role in safeguarding against unethical practices in prenatal diagnostics, which is particularly relevant in the context of reproductive medical tourism. By fostering a regulated environment prioritizing ethical compliance and consumer protection, these regulatory measures collectively contribute to strengthening India’s reputation as a responsible destination for reproductive healthcare services, even as regulatory tightening has moderated inbound fertility tourism.

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12 Accessible at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10199460/>, last accessed on March 4, 2026.

## F. Organ and Tissue Transplantation

The Transplantation of Human Organs and Tissues Act, 1994 (“**THOT Act**”) and rules thereunder, provide the principal legal framework governing the removal, storage, and transplantation of human organs and tissues in India. The THOT Act permits transplantation activities strictly for therapeutic purposes and imposes a complete prohibition on commercial dealings in human organs and tissues, thereby seeking to prevent exploitation and illegal organ trade.

Under this framework, organ removal from a living donor for transplantation is ordinarily permitted only where the donor and recipient are near relatives. In situations involving donors who are not near relatives, prior approval from the competent authorization committee is required to ensure that the donation is voluntary and not commercially motivated.

Under the THOT Act, organ transplantation procedures may only be carried out in hospitals that are registered and authorised by the appropriate authority. Medical institutions must obtain specific approval to perform transplantation procedures and are required to meet prescribed standards relating to infrastructure, equipment and qualified medical personnel. Hospitals performing transplant surgeries are also required to establish transplant committees responsible for verifying donor-recipient relationships and ensuring compliance with statutory requirements.

The THOT Act does not prohibit foreign nationals from acting as either organ donors or recipients in India, provided the required approvals are obtained. However, important safeguards exist to protect domestic organ availability. Donation of organs from an Indian national to a foreign national is prohibited unless the donor and recipient are near relatives. Further, while foreign nationals may seek inclusion in waiting lists for organs from deceased donors, allocation to foreign recipients is permitted only where no suitable Indian patient is available to receive the organ.

Although official data on the number of foreign nationals travelling to India for organ transplantation is limited, transplantation services are believed to attract a notable number of international patients, and demand for such procedures is expected to increase alongside the expansion of India’s MVT sector.

## G. Mental Healthcare

The Mental Healthcare Act, 2017 (“**MHA**”) establishes a comprehensive legal framework for mental healthcare in India and seeks to protect the rights and dignity of individuals with mental illnesses. The MHA aligns domestic law with international human rights standards, including principles reflected in the United Nations Convention on the Rights of Persons with Disabilities, and replaces the earlier Mental Health Act of 1987, which was widely regarded as outdated.

It places strong emphasis on patient rights, including access to mental healthcare services, protection from inhumane or degrading treatment, and the right to live in community settings wherever possible. It also decriminalizes attempted suicide, recognising that individuals attempting suicide due to mental health concerns require care and rehabilitation rather than punishment. The MHA establishes procedures governing admission and treatment, including involuntary admission under defined safeguards, while simultaneously promoting patient autonomy through mechanisms such as advance directives and appointment of nominated representatives to make decisions when patients lack capacity.

By promoting ethical treatment standards, protecting patient autonomy, and ensuring access to regulated mental healthcare services, the MHA strengthens confidence in India's mental health framework for both domestic and international patients. In the context of medical tourism, the regulatory safeguards introduced under the MHA contribute to India's reputation as a responsible destination for mental healthcare services, thereby supporting the broader growth of medical tourism in this sector.

## H. Euthanasia

Euthanasia and Voluntary Assisted Dying, sometimes described as suicide tourism or death tourism, refers to situations where individuals travel to jurisdictions in which assisted dying practices are legally permitted in order to end their lives. This phenomenon has gained international attention as individuals from countries where euthanasia is prohibited seek access to assisted dying services in jurisdictions such as Switzerland, where assisted suicide has been legal for several decades. Reports indicate that patients suffering from terminal illnesses or severe and incurable medical conditions often travel abroad for this purpose, raising complex ethical and legal questions concerning patient autonomy, the responsibilities of healthcare providers, and the implications of extending such services to foreign nationals.

Within the broader landscape of medical tourism, euthanasia tourism represents a controversial and distinct subset. Traditional medical tourism generally involves individuals travelling abroad to seek medical treatment aimed at improving health outcomes, reducing suffering, or accessing elective medical procedures. In contrast, euthanasia tourism centres involves individuals seeking respite by the deliberate decision to end life, often due to unbearable suffering or terminal medical conditions. This divergence introduces complex legal, ethical, and cultural considerations in discussions surrounding cross-border healthcare services. Jurisdictions permitting assisted dying may consequently attract individuals seeking these services, positioning themselves as destinations for a form of medical travel fundamentally different from conventional healthcare tourism<sup>13</sup>.

India, however, is not considered a destination for euthanasia tourism. Active euthanasia, whether voluntary or involuntary, remains illegal in India. Although, passive euthanasia has been permitted pursuant to judicial recognition and is subject to strict safeguards, including reliance on advance medical directives and judicially prescribed procedures when patients lack decision-making capacity<sup>14</sup>. Ongoing efforts to streamline procedures relating to advance directives aim to clarify end-of-life decision-making processes within the healthcare system. Nevertheless, the continued prohibition of active euthanasia ensures that India's medical tourism framework remains focused on treatment and care rather than assisted dying services.

## I. Patient Recourse and Protection

An important consideration for international patients seeking treatment abroad is the availability of legal remedies in cases of medical negligence, deficiency of services, or professional misconduct. A transparent legal framework providing recourse against healthcare providers contributes significantly to patient confidence in a country's healthcare system.

13 Accessible at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9063070/>, last accessed on March 4, 2026.

14 Aruna Shaunbag v. Union of India MANU/SC/0176/2011.

## Legal and Regulatory Landscape

In India, multiple legal mechanisms exist to address grievances arising from medical treatment, thereby strengthening accountability in healthcare delivery and supporting the credibility of India as a medical tourism destination.

### A. Consumer Protection

Medical services fall within the ambit of consumer protection law in India, enabling patients to seek remedies in cases of deficiency in service, unfair practices, or negligence on the part of healthcare providers. Under the Consumer Protection Act, 2019 (“CPA”), patients who avail medical services for consideration are treated as consumers and may approach consumer dispute redressal commissions at district, state, or national levels to seek compensation and corrective relief.

The CPA provides a comparatively accessible and time-efficient mechanism for grievance redressal, allowing patients to claim compensation for medical negligence, improper treatment, or failure to provide agreed services. The inclusion of healthcare services within CPA enhances accountability among hospitals, clinics, and medical practitioners, thereby reassuring both domestic and international patients that legal remedies are available in case of malpractice or service deficiencies.

### B. Medical Negligence and Criminal Liability

In addition to consumer law remedies, healthcare professionals and institutions in India may also incur civil and criminal liability in cases involving negligence or misconduct. Civil claims for medical negligence may be pursued through courts seeking compensation for harm caused due to breach of duty of care by healthcare providers.

In more serious cases involving gross negligence or reckless conduct leading to injury or death, criminal provisions under general penal law may also be invoked against medical practitioners or institutions. These legal mechanisms serve as deterrents against professional misconduct while ensuring that patients have avenues for redress where medical standards are not maintained.

Together, these civil, consumer, and criminal law remedies reinforce professional accountability in healthcare delivery and provide assurance to patients travelling to India that legal recourse is available in the event of medical negligence or malpractice, thereby supporting trust in India’s medical tourism ecosystem.

### C. Data Protection and Privacy

Protection of patient data is a key concern for international patients seeking treatment abroad. In India, the Digital Personal Data Protection Act, 2023 establishes a legal framework regulating the collection, processing, and storage of personal data. The Act requires entities handling personal information, including healthcare institutions, to obtain consent, process data for specified lawful purposes, and implement reasonable security safeguards to prevent unauthorized access or misuse (Ministry of Electronics and Information Technology, Government of India, 2023).

## Legal and Regulatory Landscape

India's data protection framework also reflects efforts to align domestic standards with widely recognized international principles, including those under the European Union's General Data Protection Regulation (GDPR). Principles such as consent-based processing, purpose limitation, data minimization, and accountability are incorporated within the framework, helping strengthen patient confidentiality and building trust among international patients seeking medical treatment in India.

## Government Schemes and Initiatives

Government schemes and policy initiatives form the backbone of India's medical tourism framework by shaping how foreign patients access domestic healthcare services. While India does not have a single consolidated statute governing medical tourism, the sector is materially influenced by a combination of healthcare regulation, visa policy, accreditation frameworks and central, and state-level promotional schemes.

These policy instruments collectively determine the ease of entry for international patients, the operational flexibility of healthcare providers, and the compliance obligations that apply to entities involved in this process.

### A. Union Budget 2026-27

In the Union Budget 2026-27<sup>1</sup>, the Government of India in addition to announcing a dedicated scheme to support the establishment of five (5) Regional Medical Tourism Hubs in partnership with state governments and the private sector,<sup>2</sup> will provide support to states for setting up integrated healthcare complexes that combine modern medical treatment facilities with educational and research institutions, diagnostics and post-treatment care. These hubs are intended to function as comprehensive ecosystems where care delivery is complemented by rehabilitation services, AYUSH systems, and specialised diagnostics centres that provide international patients with end-to-end medical tourism infrastructure within the hub model.

It also envisages collaboration between public entities and private healthcare providers, encouraging investment and participation by hospitals, diagnostics chains and wellness centres. While exact financial modalities, eligibility criteria, and funding mechanisms for state and private participation are to be further detailed by notifications or implementing guidelines, this scheme underscores the role of public-private partnerships (PPPs) as a key structural element.

It is also expected to generate employment across the healthcare value chain, including doctors, nurses, allied health professionals, technicians, and support staff. Healthcare providers who participate in or affiliate with these regional hubs must independently comply with all existing regulatory requirements, including clinical establishment licensing, professional standards, patient safety norms, and applicable standards.

It aims at augmenting India's broader policy architecture for health services trade by stimulating demand from regions that have historically under-penetrated Indian medical travel markets. Over time, this will strengthen India's competitive standing relative to other emerging medical tourism destinations by enabling a higher degree end-to-end patient care integration.

1 Accessible here: [https://www.indiabudget.gov.in/doc/budget\\_speech.pdf](https://www.indiabudget.gov.in/doc/budget_speech.pdf), last accessed March 9, 2026.

2 Accessible at: <https://www.pib.gov.in/PressReleasePage.aspx?PRID=2221403&reg=3&lang=1>, last accessed March 9, 2026.

## B. Market Development Assistance Scheme

The Market Development Assistance (MDA) Scheme is a Government of India initiative under the Department of Commerce, Ministry of Ministry of Micro, Small & Medium Enterprises (“MSME”), and Ministry of Tourism that provides financial support to exporters, MSMEs, and tourism stakeholders to promote their products and services globally. It assists in funding participation in international trade fairs, buyer-seller meets, and marketing activities to increase foreign trade and brand visibility.

The Ministry of Tourism, Government of India provides financial support under the MDA Scheme to approved Medical Tourism Service Providers (“MTSPs”), including Joint Commission International (“JCI”) and NABH accredited hospitals and medical tourism facilitators. It is intended to support Indian hospitals and healthcare service providers in promoting India as a treatment destination in foreign markets by partially reimbursing eligible expenses incurred for participation in approved international events such as healthcare exhibitions, roadshows, buyer-seller meets and similar promotional forums. The scheme does not regulate the provision of healthcare services to foreign patients and does not function as a licensing or approval mechanism to treat international patients.

The MTSPs seeking to avail benefits under the scheme are required to meet minimum foreign exchange earnings thresholds in preceding financial years, and the number of overseas promotional activities for which reimbursement can be claimed in a financial year is capped based on the foreign exchange earnings bracket of the applicant entity. State tourism departments are also eligible to claim support under the MDA Scheme without being subject to the foreign exchange earnings threshold applicable to private service providers.

Financial assistance under the MDA Scheme is limited to reimbursement of specified categories of promotional expenditure and is subject to monetary ceilings prescribed under the MDA guidelines.<sup>3</sup> Eligible expenses include economy class international airfare for approved promotional tours, participation fees and costs associated with stalls at overseas travel fairs and exhibitions, limited lodging expenses during overseas promotional visits, and partial reimbursement of expenses incurred for online promotion of tourism destinations and services in foreign markets. The scheme expressly excludes reimbursement of any costs associated with delivery of medical treatment, infrastructure development, or operational expenses of healthcare services in India.

Hospitals and healthcare establishments utilising the scheme for overseas promotion remain subject to applicable laws and regulations. In order to avail the benefit under the MDA Scheme, Prior Approval of the Ministry of Tourism is mandatory for both MTSPs as well as Tourism Department of States / Union Territories.

The MDA Scheme operates as a practical market-access enabler for Indian medical tourism providers by lowering the cost of overseas visibility and structured engagement with foreign referral markets. For hospitals and healthcare establishments seeking to attract international patients, the scheme can meaningfully improve access to curated global platforms, trade fairs and digital outreach channels that would otherwise involve high upfront marketing expenditure.

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3 Accessible at: <https://tourism.gov.in/sites/default/files/2022-03/Revised%20MDA%20Guidelines%2010032022.pdf>, last accessed on March 4, 2026.

## C. Heal in India

Heal in India is a government initiative promoting India as a premier, cost-effective global medical tourism destination, with the market expected to reach \$58.2 billion by 2035. The initiative operates as a coordinated platform across multiple ministries and agencies, including the Ministry of Health and Family Welfare, Ministry of Tourism, Ministry of External Affairs and implementing bodies responsible for healthcare quality and accreditation. It is a central government branding and promotion programme aimed at positioning India as a combined medical and wellness tourism destination by leveraging the country's dual strengths in modern clinical medicine and traditional systems of healthcare.

India's healthcare offering is distinctive in that it combines advanced expertise in contemporary medical science with long-established systems of holistic healing, including Ayurveda, yoga and naturopathy. It responds to shifting global healthcare preferences driven by the rising incidence of lifestyle-related conditions such as diabetes, cardiovascular disease and hypertension, and the growing international focus on preventive healthcare. From a regulatory and operational standpoint, the Heal in India initiative functions as a national branding and market-positioning framework rather than a standalone regulatory regime for healthcare delivery.

The Ministry of Health and Family Welfare and Ministry of AYUSH have been working with Centre for Development of Advanced Computing (CDAC) and Services Export Promotion Council (SEPC) for developing a 'One Step' Heal in India portal for Promotion of MVT. This will enable ease of access to information for foreign patients seeking to access treatments in India. Under the Heal in India campaign, the Government has envisaged an integrated communication and outreach strategy to promote India as a unified medical and wellness tourism destination in coordination with industry participants. This strategy is intended to be operationalised through structured engagement with Indian Missions in key source markets.

For industry players, Heal in India enhances global visibility and demand aggregation for India's medical and wellness ecosystem across both modern medicine and traditional healthcare systems.

## D. National Strategy and Roadmap for Medical and Wellness Tourism

The National Strategy and Roadmap for Medical and Wellness Tourism sets out a coordinated framework for positioning India as a global destination for both MVT and wellness tourism by aligning the roles of healthcare providers, wellness institutions, tourism bodies and government stakeholders involved in patient facilitation and international outreach.

It defines medical tourism as 'activities related to travel and hosting a foreign tourist who stays at least one night at the destination region for the purpose of maintaining, improving or restoring health through medical intervention'. It focuses on six key pillars, i.e., branding, strengthening the ecosystem, digitalization, enhancing accessibility, promoting wellness, and governance.

It focuses on organising the MVT sector and improving quality assurance across the patient journey. It proposes structured registration and categorisation of MVT facilitators, with a move toward mandatory accreditation over time. It also seeks to strengthen accreditation frameworks for healthcare providers, including the development of standards for specific segments such as dental clinics. Greater transparency is encouraged around clinical outcomes and indicative pricing for key procedures so that international patients have better visibility and are less exposed to unregulated intermediaries.

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## Government Schemes and Initiatives

A key operational element of the roadmap is the creation of a single MVT portal for international patients. The portal is designed to support the entire patient journey, from discovery and planning to booking, payments and post-treatment coordination. To take forward the cause of promotion of medical tourism, Ministry of Tourism has constituted a National Medical and Wellness Tourism Board to function as a central platform for promotion, facilitation, coordination and grievance redressal in relation to medical and wellness tourism.

It aims to organise medical and wellness tourism into a coordinated system that is easier for international patients to access and trust.

## E. Institutional Arrangements

Memorandum of Understanding (MoU) and institutional arrangements are being used by the Government as a tool to build structured referral pathways for medical and wellness tourism into India. These arrangements are typically entered into with foreign governments, public healthcare bodies, insurers, and institutional healthcare purchasers in source markets where the State plays a role in financing or arranging medical treatment for citizens.

In January 2023, the Ministry of AYUSH entered into a MoU with the India Tourism Development Corporation (“ITDC”) under the Ministry of Tourism to jointly promote MVT in Ayurveda and other traditional systems of medicine. Under this arrangement, the Ministry of AYUSH is responsible for training officials of the ITDC to sensitise them on MVT in traditional medicine and for identifying tourism circuits with potential for Ayurveda-based medical tourism. The ITDC will integrate heritage sites linked to Indian systems of medicine into tourism circuits under the “Knowledge Tourism” theme.

India has also entered into MoUs with foreign governments to strengthen cooperation in healthcare. One such MoU was signed with the Kyrgyz Republic.<sup>4</sup> This arrangement focuses on pooling financial, technical, scientific and human resources. Health tourism forms part of this cooperation framework. Such bilateral arrangements are intended to create more predictable channels for cross-border medical travel. At the State level, the Department of Tourism in Goa has signed a MoU with the All-India Institute of Ayurveda (AIIA), Goa, under the Ministry of AYUSH, Government of India.<sup>5</sup> The partnership aims to position Goa as a destination for wellness and medical tourism. Such arrangements are gradually building more organised and credible channels for medical and wellness tourism into India.

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4 Accessible here: <https://www.pib.gov.in/PressReleasePage.aspx?PRID=1574094&reg=3&lang=2>, last accessed on March 9, 2026.

5 Accessible here: <https://aiiagoa.org/the-department-of-tourism-joins-hands-with-all-india-institute-of-ayurveda-goa/?print=print>, last accessed on March 9, 2026.

## Jurisdictional Comparison

While India has developed a combination of immigration facilitation, sector-specific healthcare regulation and voluntary accreditation mechanisms to support inbound medical travel, several other jurisdictions have adopted structured policy frameworks aimed at attracting international patients while maintaining clinical governance and patient safety standards. A comparison with key medical tourism destinations highlights differences in regulatory oversight, accreditation regimes, and government policy support.

### A. United States of America (USA)

Healthcare providers in the USA operate within a framework shaped by both federal and state laws. At the federal level, agencies such as the U.S. Food and Drug Administration (“US FDA”) regulate the approval and safety of drugs, biologics and medical devices, while healthcare facilities receiving federal funding must comply with standards administered by the Centers for Medicare & Medicaid Services. These standards establish detailed requirements relating to patient safety, clinical governance, and quality assurance for hospitals participating in federal healthcare programmes.

Hospital licensing and professional regulation are primarily administered at the state level, with state health departments responsible for licensing healthcare facilities and state medical boards overseeing physician licensure and disciplinary proceedings.

Unlike countries that actively promote inbound medical travel, the United States is not structured as a medical tourism destination. Instead, it is more commonly associated with outbound medical tourism, where patients travel abroad to access more affordable procedures. This dynamic is largely driven by the high cost of healthcare services within the United States rather than regulatory limitations on foreign patients seeking treatment domestically.

### B. Singapore

Singapore has developed a well-structured framework for regulating healthcare services provided to international patients. Healthcare institutions are regulated under the Healthcare Services Act, 2020, which establishes a comprehensive licensing regime for healthcare providers and imposes stringent standards relating to patient safety, service quality, and clinical governance. Medical practitioners are regulated by the Singapore Medical Council, which oversees professional licensing and disciplinary proceedings.

In addition to regulatory oversight, Singapore actively promotes medical tourism through coordinated government initiatives such as Singapore Medicine, a multi-agency programme involving the Singapore Tourism Board, the Ministry of Health and the Economic Development Board. Hospitals catering to international patients frequently hold international accreditations, including recognition by the Joint Commission International. Hospitals in Singapore frequently obtain international accreditation from organisations such as Joint Commission International, which provides globally recognised quality benchmarks.

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## Jurisdictional Comparison

However, the scale of Singapore's healthcare system is comparatively limited, and higher treatment costs relative to many Asian jurisdictions can restrict its competitiveness as a large-scale medical tourism destination. While Singapore offers advanced medical infrastructure and strong regulatory oversight, its smaller capacity and premium pricing structure mean that it caters to a narrower segment of international patients seeking specialised or high-end medical care.

## C. Thailand

Thailand is one of Asia's prominent medical tourism destinations and has developed a regulatory framework that combines healthcare regulation with government-led initiatives to promote international patient inflows. Healthcare facilities in Thailand are regulated under the Sanatorium Act, 1998 (as amended), which requires hospitals and clinics to obtain licences from the Ministry of Public Health and comply with standards relating to infrastructure, staffing, and patient care.

Medical practitioners are regulated by the Medical Council of Thailand, which oversees professional licensing, ethical conduct, and disciplinary proceedings for physicians. In practice, many leading hospitals serving international patients seek accreditation from international bodies such as Joint Commission International in order to signal adherence to globally recognised clinical and quality standards.

While Thailand has pursued more explicit policy measures aimed at integrating healthcare services with tourism promotion, India retains significant advantages in terms of the availability of specialised medical professionals, the diversity of treatment offerings, and the overall scale of hospital capacity. India's healthcare sector also supports a larger volume of complex procedures across multiple tertiary-care institutions, which continues to position the country as a major destination for international patients seeking advanced medical treatment at comparatively lower costs.

# SWOT Analysis of India's MVT Sector

A structured SWOT analysis provides a comprehensive understanding of India's position within the global medical tourism market. While India possesses significant competitive advantages in terms of cost efficiency and medical expertise, structural and regulatory challenges continue to influence the sector's long-term competitiveness.

## A. Strengths

India's foremost competitive advantage lies in cost efficiency. Medical procedures in India are available at 60–80% lower cost compared to the United States, the United Kingdom, and other developed healthcare markets, while maintaining clinically comparable outcomes.<sup>1</sup> Basis publicly available information, a cardiac bypass procedure that costs approximately USD 1,00,000 in the United States can be performed in India for USD 5,000–7,000, and a hip replacement available for USD 40,000–50,000 in the United States is accessible in India for under USD 7,000.<sup>2</sup> This cost differential is structural and sustainable, driven by lower labour costs, economies of scale, domestic pharmaceutical supply, and comparatively lower administrative and malpractice insurance overheads.

India has a large base of highly trained medical professionals, many of whom have received postgraduate training and clinical exposure in the United States, the United Kingdom, and Europe. The country also hosts a significant number of internationally accredited hospitals. As of 2024, India had the second-largest number of Joint Commission International accredited hospitals in Asia, alongside a growing network of NABH-accredited institutions.<sup>3</sup> These accreditations provide international patients with a verifiable quality benchmark.

A further differentiating strength is India's integration of modern medicine with traditional healthcare systems. The availability of AYUSH-based treatments alongside contemporary clinical care creates a distinctive holistic offering unavailable in most competing destinations.<sup>4</sup> English language proficiency among healthcare professionals reduces communication barriers for patients from English-speaking markets, while minimal waiting periods for elective and complex procedures represent a material advantage over healthcare systems in Canada, the United Kingdom, and Australia, where long queues are a persistent challenge.<sup>5</sup>

1 Accessible here: <https://www.deloitte.com/content/dam/Deloitte/us/Documents/life-sciences-health-care/us-lshc-medical-tourism.pdf>, last accessed on March 12, 2026.

2 Accessible here: <https://www.medicaltourism.com/destinations/india>, last accessed on March 12, 2026.

3 Accessible here: <https://www.jointcommissioninternational.org/who-we-are/jci-accredited-organizations/>, last accessed on March 12, 2026.

4 Accessible here: <https://www.pib.gov.in/PressReleasePage.aspx?PRID=2217203&reg=3&lang=1#:~:text=Data%20reflects%20this%20growing%20momentum,holistic%2C%20evidence%2Dbased%20care>, last accessed on March 12, 2026.

5 Accessible here: <https://shifamhealth.com/india-outpaces-western-countries/#:~:text=Western%20countries%20continue%20to%20face,increased%20funding%20and%20policy%20initiatives>, last accessed on March 12, 2026.

## B. Weaknesses

India lacks a consolidated legal framework governing medical tourism. Regulatory oversight is distributed across healthcare regulation, visa policy, consumer protection law, foreign exchange controls, and tourism policy, administered by different central and state authorities. This fragmentation increases compliance complexity for hospitals and facilitators operating across jurisdictions.

Service quality and patient experience remain uneven across regions. The concentration of internationally accredited hospitals in Delhi, Mumbai, Chennai, Bengaluru, and Hyderabad means that India's quality credentials are not uniformly distributed, limiting its appeal as a pan-India destination.<sup>6</sup> Infrastructure gaps outside major metropolitan areas, including airport connectivity, medical transport, and patient-friendly accommodation, further constrain the expansion of medical tourism beyond established hubs.

Limited portability of international health insurance remains a structural weakness. A significant share of inbound patients pay-out of pocket because many foreign insurers do not empanel Indian hospitals, creating financial uncertainty and deterring risk-averse patients. Additionally, the absence of a standardised accreditation and training framework for medical tourism facilitators leads to inconsistent service quality in patient coordination and logistics.

## C. Opportunities

The global medical tourism market is valued between USD 115.<sup>6</sup> billion and is projected to grow significantly over the next few years.<sup>7</sup> India is well positioned to capture a larger share of this market, particularly as healthcare costs in developed nations continue to rise and demographic ageing increases demand for specialised care globally.

Rising interest in holistic and preventive healthcare globally presents a substantial opportunity for India's AYUSH sector. Demand for Ayurveda, naturopathy, and yoga-based therapies is growing in Western markets, the Middle East, and East Asia, and India's traditional systems of medicine carry strong cultural credibility internationally.<sup>8</sup>

Underpenetrated source markets in Africa, Central Asia, and the Commonwealth of Independent States represent significant growth potential. Government initiatives including the Heal in India programme, the proposed Regional Medical Tourism Hubs under the Union Budget 2026–27, and the development of an integrated MVT portal are expected to accelerate structured promotion and patient facilitation. Advances in telemedicine and digital health also enable pre-treatment consultation and post-discharge follow-up across borders, supporting the entire patient journey.

6 Accessible here: <https://tourism.gov.in/sites/default/files/2022-05/National%20Strategy%20and%20Roadmap%20for%20Medical%20and%20Wellness%20Tourism.pdf>, last accessed on March 12, 2026.

7 Accessible here: <https://fikki.in/sector/medical-value-travel-mvt?utm>, last accessed on March 10, 2026.

8 Accessible here: Press Release: Press Information Bureau, last accessed on March 10, 2026.

## D. Threats

India faces intensifying competition from established medical tourism destinations, Thailand, Singapore, Malaysia, Turkey, and South Korea have invested in coordinated government-industry branding strategies and have developed strong international recognition as medical tourism hubs.<sup>9</sup> Singapore and South Korea, in particular, are perceived as premium destinations with strong quality assurance frameworks, while Thailand competes directly with India on both cost and hospitality.

Regulatory tightening in areas such as commercial surrogacy and certain reproductive services has moderated inbound reproductive tourism, which previously constituted a significant segment of India's medical travel market. Geopolitical developments, fluctuating exchange rates, and periodic travel advisories issued by source country governments can also affect patient inflows in ways that are difficult for the sector to anticipate or control.

The risk of brain-drain of senior medical professionals relocating to higher-paying markets abroad poses a long-term threat to India's clinical workforce depth in certain specialties. Perception challenges relating to public health infrastructure, inconsistent hygiene standards at non-accredited facilities, and isolated but widely reported adverse incidents continue to negatively influence the decision-making of potential foreign patients.<sup>10</sup>

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9 Accessible here: <https://www.medicaltourism.com/mti/> , last accessed on March 10, 2026.

10 Accessible here: <https://www.thehindu.com/news/national/ima-objects-to-cherry-picking-of-indian-physicians-to-fill-gaps-in-nhs/article67983966.ece> , last accessed on March 10, 2026.

# Advantage India: Why the World Should Choose India

India's MVT proposition is compelling for two distinct audiences: international patients seeking quality, affordable, and comprehensive care, and global healthcare organisations seeking to invest in, affiliate with, or establish a presence in one of the world's most dynamic healthcare markets.

## A. For International Patients

India has emerged as one of the most attractive destinations for international patients seeking affordable, high-quality healthcare. One of the most significant advantages is the substantial cost differential compared to developed healthcare systems while maintaining high clinical standards and modern medical infrastructure.<sup>1</sup> The case for India as a medical tourism destination rests on a combination of cost, clinical quality, and breadth of offering that no single competing destination matches at scale. India performs over 500,000 major surgeries annually for international patients, with cost savings of up to 80% or more compared to equivalent services in the United States and the UK.<sup>2</sup> In addition to cost advantages, India offers access to a large pool of highly skilled medical professionals, many of whom have received training or certification from leading international institutions and have extensive experience performing complex medical procedures. Moreover, India's healthcare ecosystem uniquely integrates modern clinical medicine with traditional systems enabling international patients to combine advanced medical treatment with wellness and rehabilitation services.

## B. For Global Hospitals and Healthcare Organisations

India also presents significant opportunities for global healthcare institutions seeking to expand their international footprint and participate in the rapidly growing MVT market in India. The country offers a large and expanding healthcare ecosystem supported by a strong base of tertiary-care hospitals, advanced diagnostic facilities, and a well-developed pharmaceutical and medical device manufacturing sector. India is one of the world's largest producers of generic medicines and vaccines, contributing significantly to the affordability of healthcare services and enabling hospitals to maintain competitive treatment costs while delivering advanced medical procedures.<sup>3</sup> Furthermore, India's healthcare market is projected to grow substantially over the coming decade, driven by increasing demand for specialised medical treatments and the expansion of medical tourism infrastructure. Industry estimates suggest that India's medical tourism market could grow from approximately USD 18.2 billion in 2025 to around USD 58.2 billion by 2035, reflecting strong global demand for affordable and high-quality healthcare services.<sup>4</sup> Government initiatives such as the Heal in India programme, the National Strategy and Roadmap for Medical and Wellness Tourism, and proposed regional medical tourism hubs further signal strong policy support for the sector and encourage partnerships between international healthcare institutions and Indian hospitals. For global healthcare providers, India therefore represents not only a destination for patient inflows but also a strategic hub for investment, clinical collaboration, medical research, and expansion into emerging healthcare markets.

1 Accessible here: <https://ficci.in/sector/medical-value-travel-mvt?utm>, last accessed on March 12, 2026.

2 Accessible here: <https://shifamhealth.com/top-10-high-value-medical-procedures-india-medical-tourism/>, last accessed on March 12, 2026.

3 Accessible here: [https://www.who.int/india/health-topics/health-workforce#tab=tab\\_2](https://www.who.int/india/health-topics/health-workforce#tab=tab_2), last accessed on March 12, 2026.

4 Accessible here: <https://www.fortuneindia.com/business-news/indias-medical-tourism-market-to-touch-58-billion-in-10-years/125022>, last accessed on March 12, 2026.

# Challenges

## A. Fragmented Legal Framework

India does not have a consolidated legal framework governing medical tourism. It operates across healthcare regulation, visa and immigration rules, foreign exchange controls, consumer protection laws, professional conduct norms and tourism policies. These requirements are administered by different authorities at the central and state levels.

In practice, this can lead to navigating overlapping regulatory regimes when onboarding foreign patients, structuring payments, engaging in overseas marketing and coordinating post-treatment follow-up. This ultimately creates uncertainty for industry players seeking to scale medical tourism operations on a pan-India basis.

## B. Uneven Quality Standards

While internationally accredited hospitals in major urban centres offer high clinical standards, service quality and patient experience remain uneven across regions and institutions. The concentration of NABH accredited hospitals in a few cities leads to a perception that quality care is geographically limited. Outside these hubs, gaps in infrastructure, language support, international patient facilitation and grievance redressal mechanisms affect the overall experience of foreign patients. This weakens India's ability to present itself as a uniformly reliable medical tourism destination.

## C. Infrastructure and Connectivity Constraints

Although India hosts several world-class hospitals, supporting infrastructure outside major metropolitan centres remains uneven. Efficient medical tourism depends not only on clinical quality but also on reliable airport connectivity, medical transport systems, accommodation facilities, and post-treatment recovery environments. Inadequate last-mile connectivity, traffic congestion in major cities, and uneven availability of patient-friendly hospitality infrastructure can negatively affect patient experience, particularly for elderly or critically ill patients requiring seamless transit and recovery arrangements.

Further, international patients increasingly expect integrated services including airport assistance, accommodation coordination, and post-discharge care, which remain inconsistently developed across destinations. This limits the ability of smaller cities with strong medical capabilities to attract foreign patients.

## D. Limited International Insurance Acceptance and Portability

A significant proportion of international patients travelling to India pay out-of-pocket for treatment due to limited portability of foreign health insurance policies. Many foreign insurance providers do not empanel Indian hospitals, resulting in patients facing reimbursement challenges or being unable to utilise insurance coverage for overseas treatment.

## Challenges

The absence of systematic insurance portability frameworks limits India's competitiveness compared to destinations that have successfully integrated cross-border insurance arrangements. Lack of clarity on reimbursement mechanisms also discourages risk-averse patients from choosing India despite cost advantages.

### E. Perception and Branding Challenges

Despite possessing strong medical capabilities, India continues to face perception challenges relating to hygiene standards, infrastructure reliability, and safety concerns among potential foreign patients. Media narratives around public healthcare constraints or sporadic negative incidents sometimes overshadow the high-quality care provided by accredited institutions.

Moreover, branding efforts for Indian medical tourism remain fragmented, with individual hospital chains promoting services independently rather than under a unified national brand strategy. Competing destinations such as Thailand, Singapore, and South Korea have successfully marketed themselves through coordinated government-industry campaigns, strengthening their global recall as medical tourism hubs.

### F. Shortage of Trained Medical Tourism Facilitators

Medical tourism requires coordination among hospitals, travel operators, translators, insurers, and recovery care providers. However, India lacks standardized accreditation and training frameworks for medical tourism facilitators who manage patient logistics and treatment journeys.

Inconsistent quality among facilitators sometimes leads to miscommunication, service gaps, or unrealistic treatment expectations, adversely affecting patient experience. A structured ecosystem of certified facilitators would improve service reliability and global credibility.

# Recommendations

## A. Unified Regulatory Framework

Medical tourism should be supported by a more coordinated policy framework. Existing healthcare laws, visa rules, tourism policies and foreign exchange norms can be aligned through a common guidance framework. This will reduce compliance burden for hospitals and facilitators. It will also improve clarity for international patients and foreign partners. A coordinated approach can operate within existing laws while offering a single reference point for regulatory expectations and operational practices.

## B. Outreach Beyond Major Cities

Quality and accreditation frameworks should be encouraged beyond major metro centres. Capacity-building programmes can help hospitals in emerging destinations meet international service standards. This will reduce concentration of medical tourism in a few cities. It will also support more balanced regional growth of the sector. Wider adoption of quality standards will improve patient confidence and strengthen India's positioning as a reliable destination across regions.

## C. Strengthening International Insurance Integration

The Government and industry stakeholders should actively pursue partnerships with international insurance providers to enable portability of health insurance coverage for treatments undertaken in India. Encouraging empanelment of Indian hospitals within global insurance networks would reduce out-of-pocket expenses for patients and increase India's competitiveness against destinations where insurance-backed medical travel is already common. Development of standardized billing and documentation protocols can further ease insurance claim processing for foreign patients.

## D. Development of Integrated Medical Tourism Infrastructure

Medical tourism policies should encourage development of integrated healthcare and hospitality ecosystems around major medical hubs, including improved airport assistance, medical transport services, recovery centres, and patient-friendly accommodation facilities. Public-private partnerships may be leveraged to develop specialised medical tourism zones or clusters that combine hospitals, rehabilitation centres, hotels, and wellness facilities in proximity, improving patient convenience and recovery experiences.

## E. Enhancing Global Branding and Market Positioning

A coordinated national branding strategy should be adopted to promote India as a unified medical tourism destination rather than relying solely on individual hospital marketing efforts. Government-led campaigns in collaboration with industry stakeholders and Indian missions abroad can improve international perception regarding healthcare quality, hygiene standards, and patient safety. Targeted outreach in high-potential source markets, supported by digital platforms and patient testimonials, can significantly strengthen global visibility.

## F. Improving Pricing Transparency and Standardisation

Hospitals and facilitators should be encouraged to provide transparent treatment packages with clear cost components covering procedures, hospitalization, medicines, and ancillary services. Development of standardized pricing disclosures or indicative treatment cost benchmarks could help international patients make informed decisions while reducing concerns regarding unexpected billing variations.

## Way Forward

India's medical tourism sector is at a stage where strong market demand is beginning to converge with increasing policy support and institutional coordination. Cost competitiveness, clinical expertise and internationally accredited hospitals continue to drive patient inflows, while government initiatives are creating more structured channels for promotion, facilitation and ecosystem development.

This sector's ability to scale in a sustainable and trusted manner will depend on how effectively structural challenges are addressed. Fragmented regulation and uneven service quality across regions continue to affect patient confidence and operational predictability for industry players. As international patient volumes grow, these issues will become more visible and will increasingly shape India's reputation in global medical travel markets.

Looking ahead, the success of India's medical tourism strategy will rest on aligning regulatory clarity with service quality and patient experience. Wider adoption of quality standards beyond major cities can help distribute growth more evenly and support the emergence of new medical tourism destinations. If policy intent is matched with consistent implementation on the ground, India is well positioned to evolve from a cost-driven alternative into a mature and trusted medical and wellness tourism hub.





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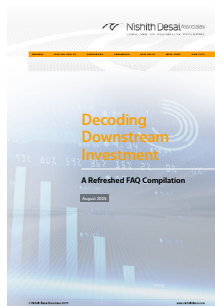
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