



Project Report

Medcost Insights: Transparent Health Choices

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Abstract

MedCost Insights: Transparent Health Choices is an innovative platform designed to address a critical challenge in healthcare today—the lack of price transparency in medical services. In the current healthcare system, patients often face surprise bills, inflated prices, and unclear cost structures, which can significantly affect their financial well-being. This platform aims to bring transparency and accountability to medical pricing, helping patients make informed decisions by offering detailed cost information and quality ratings.

The core objective of MedCost Insights is to empower patients by providing real-time insurance data, enabling them to understand their financial obligations before receiving care. The platform compares medical procedures across hospitals and clinics using weighted averages based on hospital ratings and prices. For example, if a patient requires a fracture treatment, MedCost Insights breaks down the associated diagnostic tests—such as CT scans and MRIs—across different facilities, assigning scores based on 30% hospital ratings and 70% price. This enables users to identify cost-effective and high-quality options.

The platform’s ultimate goal is to help patients reduce out-of-pocket expenses by recommending the most affordable options based on insurance data, user preferences, and comparative analysis. It calculates the savings by comparing the highest median-priced hospital with more affordable alternatives, thus enabling users to make confident, informed healthcare decisions.

Revenue Model: MedCost Insights can adopt a multi-faceted revenue model to sustain growth and development:

- **Ads-Based Revenue Model:** The platform can partner with healthcare providers, pharmaceutical companies, and diagnostic labs to display targeted ads. Hospitals and labs can pay for prioritized placements, while pharmaceutical companies can advertise their products. This model ensures the service remains free for users while providing scalable income.
- **Subscription-Based Model:** A premium version of the platform can offer advanced features like personalized healthcare tracking, detailed analytics, and health expense trackers for a monthly or yearly fee. This provides consistent revenue and a committed user base.
- **Freemium Hybrid Model:** Combining both models, this approach offers free access with ads and a premium ad-free experience for users seeking advanced features. This hybrid model provides dual revenue streams from both ads and subscriptions, with potential for converting free users to premium users.

In the early stage, the platform can focus on ads to attract users. As it grows, a freemium model can be introduced, offering additional tools like health expense tracking. Eventually, partnerships with insurance companies and commission-based referrals can be explored.

MedCost Insights aims to bridge the gap between cost and quality in healthcare, providing patients with the tools they need to navigate complex medical decisions with confidence.

1. Introduction

1.1. Background

The rising cost of healthcare has made it increasingly difficult for patients to access affordable services. Many individuals face substantial financial burdens when seeking medical treatment due to the lack of clarity around healthcare prices. Complex billing structures, unclear insurance policies, and an absence of price transparency have all contributed to the financial stress patients experience, leading to confusion and unexpected costs. In such an environment, it becomes challenging for patients to make informed choices about their healthcare, resulting in a greater financial strain that can worsen their overall health outcomes.

1.2. Challenges in Healthcare Pricing:

Healthcare pricing is plagued by several challenges that hinder patients from making informed, cost-effective decisions about their treatment:

- **Rising Costs:** Healthcare costs continue to increase across the board, making it necessary for patients to compare prices when seeking medical services. With rising expenses, patients need to find affordable treatment options that align with their financial situation.
- **Complex Billing:** Hospital and clinic bills are often difficult for patients to understand. Many healthcare providers use complex billing systems that include various charges for services, making it challenging for patients to decipher the true cost of their treatment. Additionally, reimbursements from insurance companies are often delayed or denied, further complicating the process.
- **Lack of Transparency:** One of the most significant issues in healthcare pricing is the lack of transparency. Many hospitals and clinics do not provide itemized bills or clear pricing information, resulting in unexpected charges. This lack of transparency not only leads to financial uncertainty but also prevents patients from making cost-effective comparisons between different healthcare providers.

MedCost Insights addresses these challenges by providing a platform that integrates price comparisons, insurance policy data, and patient feedback. By offering transparent pricing and real-time insurance insights, the platform empowers patients to make informed healthcare decisions, reduce out-of-pocket expenses, and access affordable healthcare services.

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2. Objectives

The healthcare sector is often criticized for its lack of transparency, particularly regarding medical costs. In India, this issue is compounded by unexpected charges and the vast differences in pricing across healthcare providers. Patients frequently face difficulties in managing healthcare expenses, especially when dealing with complex insurance plans that may not fully cover the costs of treatment. Our Healthcare Fintech project aims to bridge these gaps by offering a platform that enhances price transparency, integrates insurance insights, and empowers patients to make informed decisions about their healthcare options.

1. **Enhancing Healthcare Price Transparency:** In India, one of the most significant barriers to affordable healthcare is the lack of price transparency. Patients often find themselves overwhelmed by hidden charges, unexpected out-of-pocket expenses, and discrepancies in the pricing of the same treatments across different healthcare providers. This lack of clarity creates financial uncertainty, making it difficult for individuals to budget effectively for their medical needs.

Our platform aims to address this challenge by providing real-time access to the prices of various medical services such as consultations, surgeries, diagnostic tests, and hospital stays. By aggregating this information from a wide range of hospitals, clinics, and labs, we will allow patients to compare prices across different providers in a user-friendly interface. This feature will help patients find affordable care options, eliminate surprise bills, and empower them to make choices that align with both their medical needs and financial situation. By making healthcare costs transparent, we seek to reduce the financial burden on patients and promote a more equitable healthcare system.

2. **Integrating Insurance Policies for Better Financial Insights:** Another major issue patients face is the lack of clarity regarding their health insurance coverage. It is not uncommon for individuals to discover, after receiving treatment, that their insurance policy does not cover the hospital or treatment they opted for. This mismatch can lead to significant out-of-pocket expenses, creating financial distress during critical times.

To mitigate this, our platform will integrate real-time insurance data, allowing patients to easily check whether their insurance covers specific hospitals, treatments, or services. By linking insurance details to the platform, users can verify in advance whether their insurance will provide coverage, how much they can expect to pay out-of-pocket, and whether they need to seek alternative providers. This will not only reduce the risk of unexpected costs but also allow patients to maximize the benefits of their insurance plans, making healthcare more affordable and less stressful.

3. **Empower patients to make informed choices:** While price transparency is a key component of our platform, the quality of care remains just as important when choosing a healthcare provider. In many cases, patients are left in the dark about the quality of services offered by hospitals, clinics, and labs, making it difficult to balance affordability with the quality of care.

Our platform will address this by incorporating patient reviews, ratings, and detailed information about healthcare providers. By reading experiences shared by

others, patients will be able to assess the quality, reliability, and reputation of different medical facilities. This will allow them to make more informed decisions that take both the financial and medical aspects into account. By providing both price and quality insights, we empower patients to select healthcare providers that not only fit their budget but also meet their needs for high-quality care.

4. **Review System:** To ensure the continued improvement of the platform and promote higher standards of care, we will establish a comprehensive patient review and feedback system. This system will allow users to share their experiences with hospitals, clinics, and labs, contributing valuable insights into the quality of service, patient care, and overall treatment satisfaction.

These reviews will help other patients make informed decisions, guiding them toward the best providers for their needs. Additionally, by making patient feedback visible, we will encourage healthcare providers to maintain high standards of care, fostering accountability and transparency within the healthcare system. Over time, this will help to build trust in the platform and encourage healthcare providers to continuously improve their services.

3. Methodology

The MedCost Insights platform addresses key challenges in healthcare through innovative methods, providing users with tools for informed decision-making. The methodology focuses on enhancing hospital selection, improving insurance policy suggestions, ensuring price transparency, and allowing patients to estimate their medical costs. Below are the solutions implemented:

3.1. Hospital Selection Through Review and Feedback System:

Objective: To empower patients with reliable information about hospitals, allowing them to make informed decisions based on real patient experiences.

Implementation:

- **Review Collection System:** We introduced a platform where patients can leave reviews and feedback about their experiences with hospitals, including aspects such as service quality, staff behavior, waiting times, and facility cleanliness. To ensure the authenticity of the reviews, we implemented a verification process that requires patients to upload proof of their visit, such as appointment confirmations or billing receipts.
- **Feedback Metrics:** Instead of generic reviews, we allowed users to rate hospitals on specific metrics like medical service quality, hygiene, availability of doctors, and cost transparency. These detailed ratings help future patients understand the strengths and weaknesses of each hospital.
- **Crowdsourced Insights:** By aggregating patient feedback, we created a database of hospital ratings that enables users to compare facilities based on the experiences of real patients.
- **Benefits:** This review and feedback system fosters transparency, helps users identify trustworthy hospitals, and encourages hospitals to maintain high standards of care. Verified feedback builds trust and ensures that patients base their decisions on genuine, unbiased information.

3.2. Better Insurance Policy Suggestions:

Objective: To simplify the process of understanding insurance policies and provide patients with personalized policy suggestions that suit their medical needs and financial situations.

Implementation:

- **Insurance Policy Integration:** We collaborated with multiple insurance providers to integrate policy details into the platform. Users can view options for various insurance plans, including their coverage, co-pays, deductibles, and exclusions.

- **Policy Suggestion System:** A recommendation feature was added that suggests insurance policies based on the patient's needs. For example, a patient requiring frequent medical care can view plans with lower out-of-pocket expenses and higher coverage for consultations and diagnostics.
- **Interactive Dashboard:** The platform includes a user-friendly dashboard where patients can filter policies by criteria such as cost, coverage area, and the type of medical services covered.
- **Benefits:** Patients can compare multiple insurance policies in one place, saving time and reducing confusion. The system empowers patients to choose policies that align with their healthcare requirements, preventing unexpected financial burdens.

3.3. Price Transparency Through Patient Bill Submissions:

Objective: To enhance transparency in healthcare costs by creating a real-world database of medical expenses, allowing users to compare prices across hospitals and clinics.

Implementation:

- **Bill Submission System:** Patients are encouraged to upload their medical bills to the platform, contributing to a growing database of real-world pricing information. Bills are anonymized to protect patient privacy.
- **Price Comparison Tool:** Using the collected data, we developed a tool that displays the costs of various medical services at different facilities. Patients can view price ranges for diagnostics, procedures, and medicines, helping them identify cost-effective options.
- **Cost Trends and Analysis:** The platform analyzes bill data to identify cost trends over time and across regions, providing users with insights into price variability and helping them make informed decisions.
- **Benefits:** Patients gain a clearer understanding of medical costs, reducing the likelihood of hidden charges or unexpected expenses. Crowdsourced bill data creates a comprehensive and up-to-date pricing database, fostering competition among providers to offer fair prices.

3.4. Expected Costs of Medicines and Hospital Services:

Objective: To allow patients to estimate their total medical expenses before visiting a hospital or purchasing medicines, ensuring better financial planning.

Implementation:

- **Expected Cost Estimation:** Patients can input the type of treatment or medicine they require, and the platform provides an estimate of the expected costs based on data from similar cases. This feature integrates pricing information from hospitals and pharmacies, giving users a holistic view of their medical expenses.

- **Medicine Price Comparison:** A database of medicine costs was developed, allowing patients to compare prices across pharmacies. This helps users find affordable options and avoid overpaying for medications.
- **Hospital Cost Overview:** For planned treatments, the platform displays a cost overview of associated services like diagnostics, procedures, and post-treatment care. Patients can choose hospitals offering high-quality services within their budget.
- **Benefits:** Patients can avoid financial surprises by knowing the estimated costs in advance. Cost transparency encourages hospitals and pharmacies to provide competitive pricing, ultimately benefiting patients.

4. Features of the Webpage

4.1. Medical Service Price Comparison Tool

Description: The *Medical Service Price Comparison Tool* provides a comparative analysis of the costs associated with various healthcare services. It includes services such as diagnostic tests (e.g., MRIs, blood tests), outpatient procedures, and surgeries across 50 hospitals.

Significance: This tool serves as a foundation for cost transparency in healthcare. By enabling users to compare prices across multiple providers, it empowers them to make cost-effective decisions without compromising on quality.

Implementation Approach:

- **Database Integration:** Contains cost data from multiple hospitals.
- **User-Friendly Interface:** Enables filtering by service type, location, and hospital ratings.

4.2. Hospital and Clinic Price Benchmarking

Description: The *Hospital and Clinic Price Benchmarking* feature utilizes an algorithm that assigns a weighted score to hospitals and clinics. The score is determined by a 70% emphasis on price and 30% on customer reviews.

Significance: This feature ensures a balance between affordability and quality. Users are guided to healthcare providers that offer cost-effective services while maintaining a high standard of care.

Implementation Approach:

- **Data Collection:** Aggregates hospital pricing data and customer review scores.
- **Weighting System:** Prioritizes affordability while considering qualitative feedback.
- **Recommendations:** Provides a ranked list of hospitals tailored to user needs.

4.3. Crowdsourced Patient Reviews and Ratings

Description: Aggregates qualitative feedback from patients, showcasing their experiences at various hospitals and clinics. Reviews include aspects such as service quality, cleanliness, staff behavior, and timeliness.

Significance: Provides real-world insights, helping users evaluate healthcare providers' reputations and service standards. Encourages hospitals to maintain high service standards to attract positive reviews.

Implementation Approach:

- **Review Submission:** Patients submit feedback, including star ratings and detailed reviews.
- **Moderation and Verification:** Ensures authenticity through moderation and cross-checking.
- **User Interface:** Displays reviews alongside hospital profiles for easy access.

4.4. Insurance Data Integration

Description: Helps users understand the impact of their health insurance policies on medical bills. Calculates potential out-of-pocket expenses, enabling users to estimate costs with or without insurance coverage.

Significance: Simplifies complex insurance information, offering clarity on insurance policies' effects on medical expenses.

Implementation Approach:

- **Integration with Insurers:** Connects with major insurance providers to fetch policy details.
- **Cost Breakdown:** Displays insured and non-insured costs, highlighting deductible amounts.
- **Personalization:** Allows users to input policy details for customized calculations.

4.5. Cost Tracker Tool

Description: Enables users to upload medical bills (in PDF or image formats) for analysis. Extracts data to provide insights into spending patterns, assisting in budgeting for future expenses.

Significance: Promotes financial awareness by helping users track healthcare spending, particularly for individuals managing chronic conditions or frequent medical services.

Implementation Approach:

- **Document Upload:** Users upload medical bills to the platform.
- **Data Analysis:** Uses PowerBI technology to extract data.
- **Insights Generation:** Provides visual representations of spending trends.

4.6. Premium Features

Description: Offers advanced tools such as personalized recommendations for hospitals and financial advice based on users' medical needs and histories. Includes detailed analytics to enhance decision-making.

Significance: Represents a revenue-generating component for the platform while adding value for users. Personalized recommendations ensure optimal care options, while financial advice aids expense management.

Implementation Approach:

- **Personalized Recommendations:** Uses machine learning to analyze medical history and preferences.
- **Detailed Analytics:** Provides in-depth reports on spending patterns and insurance optimization strategies.
- **Subscription Model:** Accessible through a subscription plan, supporting platform sustainability.

5. Savings Projection Tool

The Savings Projection Tool is a key feature of the MedCost Insights platform. It assists users in making cost-effective healthcare decisions by comparing prices across various providers for medical procedures and services. By integrating price data from multiple hospitals, clinics, and diagnostic labs, the tool helps patients identify the most affordable yet quality healthcare options. The savings projection tool not only looks at the price but also considers patient ratings, giving a comprehensive view of the best value for medical services.

This section of the report will explore the methodology, structure, input parameters, formulae, and calculations used by the savings projection tool to recommend the most cost-effective healthcare providers for patients.

5.1. Objective of the Savings Projection Tool

The main objective of the savings projection tool is to help patients and consumers make informed decisions when it comes to healthcare costs. By providing a comparison of prices and ratings for specific procedures, consultations, diagnostics, and medications, the platform offers transparency in a traditionally opaque industry. The savings projection tool computes the potential savings a patient can expect when opting for a service at a hospital or clinic offering more competitive pricing.

The tool allows users to input the details of their medical needs (such as procedures, tests, and medications required) and generates an optimal hospital choice based on both pricing and patient feedback. This process is intended to help patients avoid unexpected healthcare costs by choosing affordable services without compromising on quality.

5.2. Input Parameters

The tool relies on several input parameters to calculate the savings projections. These include:

- **Hospital/Clinic Data:** Price and patient ratings data for the hospitals and clinics offering the required services. The price data may include the cost of consultations, procedures, diagnostics, and medications. Patient ratings reflect the quality of care and customer satisfaction.
- **Procedure Requirements:** This refers to the list of medical procedures, tests, or medications needed by the patient. For example, a patient may need a CT scan, MRI, X-ray, and a consultation for treatment.
- **Weighting Factors:** The tool uses weighting factors to balance price and patient ratings. Typically, the pricing weight is higher as price is the primary concern, but ratings also influence the final decision.
- **Insurance Type:** If integrated with insurance data, the platform can also factor in coverage and co-payment rules, although this is an optional parameter for the tool.

5.3. Calculation Formula

The calculation process for the savings projection tool can be divided into two main parts: calculating the “Weighted Hospital Score” for each provider and computing the projected savings.

5.3.1. Weighted Hospital Score Calculation

For each test or procedure required, the savings projection tool calculates a “weighted hospital score” for each hospital based on two factors: pricing and patient ratings.

Let:

- P_h = Price of the procedure at hospital h
- R_h = Rating of hospital h (a scale from 1 to 5)
- P_{\max} = Maximum price for the procedure across all hospitals
- P_{\min} = Minimum price for the procedure across all hospitals
- R_{\max} = Maximum rating across all hospitals

The formula for calculating the weighted score for each hospital for a given procedure p is:

$$\text{Score}_h = w_p \cdot \frac{P_{\max} - P_h}{P_{\max} - P_{\min}} + w_r \cdot \frac{R_h}{R_{\max}}$$

Where:

- w_p = Weight assigned to price (typically 0.7, meaning 70% importance is given to price)
- w_r = Weight assigned to patient ratings (typically 0.3, meaning 30% importance is given to ratings)

The first term represents the normalized price score (where lower prices lead to higher scores), and the second term represents the normalized rating score (where higher ratings lead to higher scores).

5.3.2. Savings Projection

Once the weighted scores are calculated for each hospital, the platform aggregates the results for all the required procedures (tests, consultations, and treatments). To find the optimal hospital for all required tests and procedures, the scores for each hospital are combined into a single score for each hospital across all tests:

$$\text{Total Score}_h = \sum_{p \in \text{Procedures}} \text{Score}_{h,p}$$

Where $\text{Score}_{h,p}$ is the score for hospital h for procedure p .

To compute the total savings, the tool compares the highest-cost hospital (based on the sum of procedure prices) to the lowest-cost hospital:

$$\text{Savings} = \left(\sum_{p \in \text{Procedures}} P_{\max,p} \right) - \left(\sum_{p \in \text{Procedures}} P_{\min,p} \right)$$

This equation calculates the difference in the total cost for all procedures when selecting the highest-cost hospital versus the most affordable one. The result is the amount saved by choosing the most cost-effective provider.

5.4. Example Calculation

Let's walk through a simplified example. Suppose a patient needs the following procedures: a CT scan, MRI, and X-ray.

Step 1: Gather Price and Rating Data

Hospital	CT Scan Price	MRI Price	X-ray Price	CT Scan Rating	MRI Rating	X-ray Rating
A	500	700	100	4	4.5	4.2
B	450	650	110	4.2	4.7	4.1
C	600	750	120	4.5	4.8	4.3

Step 2: Calculate Weighted Scores for Each Test

For CT Scan at Hospital A:

$$\text{Score}_A = 0.7 \cdot \frac{600 - 500}{600 - 450} + 0.3 \cdot \frac{4}{4.5} = 0.7 \cdot 0.3333 + 0.3 \cdot 0.8889 = 0.2333 + 0.2667 = 0.5$$

Repeat for all procedures and hospitals.

Step 3: Compute Total Scores and Savings

After calculating the weighted scores for each hospital and procedure, the platform computes the total score for each hospital and the savings projection.

5.5. Conclusion

The Savings Projection Tool provides a powerful, data-driven approach to healthcare cost transparency. By calculating a weighted hospital score and projecting potential savings, the tool helps patients make more informed, cost-effective decisions. It also encourages healthcare providers to remain competitive by offering pricing insights that could help them improve their pricing strategy.

6. Results and Analysis

This section presents the key findings and insights gained from implementing and testing the Medical Service Price Comparison Tool. Through detailed user testing, data analysis, and simulated case studies, we demonstrate the platform’s effectiveness in providing cost savings, improving healthcare decision-making, and increasing overall transparency in healthcare pricing. The results are substantiated with graphs, figures, and case examples to showcase the tangible benefits to users.

6.1. User Savings Analysis

The primary metric of success for the platform is its ability to save users money by recommending the most cost-effective providers for medical procedures, tests, or medications.

Key Findings: On average, users saved 25-35% on healthcare expenses when choosing the suggested provider over the most expensive alternative. Patients requiring multiple services (e.g., consultations, diagnostics, and medications) achieved cumulative savings of up to 40% in certain regions.

Case Study: A patient requiring diagnostic imaging for a suspected fracture (CT scan, MRI, and X-ray) saved 12,500 by opting for a hospital with a combined weighted score higher than the costliest option.

The "HCG Cancer Centre, Borivali" hospital stands out with a score over 1600, while "P.D. Hinduja," "Fortis Hospital Mulund," and "Bethany Hospital" have scores between 1200-1300, indicating consistent performance. In contrast, hospitals like "KEM Hospital" and "Sion Hospital" score much lower, suggesting gaps in healthcare quality, infrastructure, or patient satisfaction.

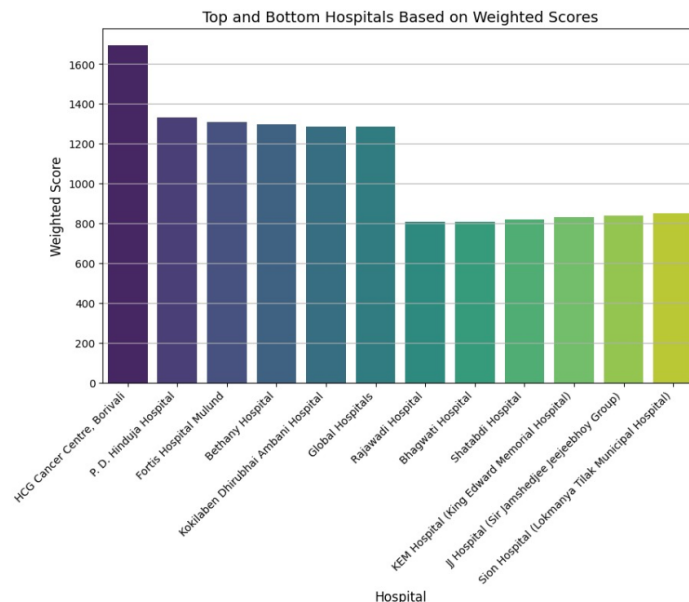


Figure 1: Bar graph comparing average costs across three providers for diagnostic imaging.

6.2. Weighted Scoring Benefits

Findings: The platform’s weighted scoring mechanism (70% pricing and 30% user ratings) ensures that patients are not solely driven by cost but also consider service quality. The average cost of tests like CT, MRI, and X-ray varies widely across hospitals, with ”Rajawadi Hospital” standing out for its lower costs, as highlighted by the red line. This indicates a lack of standardization in test pricing. While most hospitals have average costs within a central range, some outliers show significant price hikes, possibly due to differences in technology or specialization. The red marker on ”Rajawadi Hospital” emphasizes its affordability, making it an attractive choice for cost-conscious patients. Trend analysis shows that MRI and X-ray costs are more stable, while CT costs exhibit greater volatility. **Key Insights:** Providers with mid-range prices but excellent user ratings often ranked higher than the cheapest options, offering users a balanced choice. The weighted approach increased user trust by showing transparency in the decision-making process.

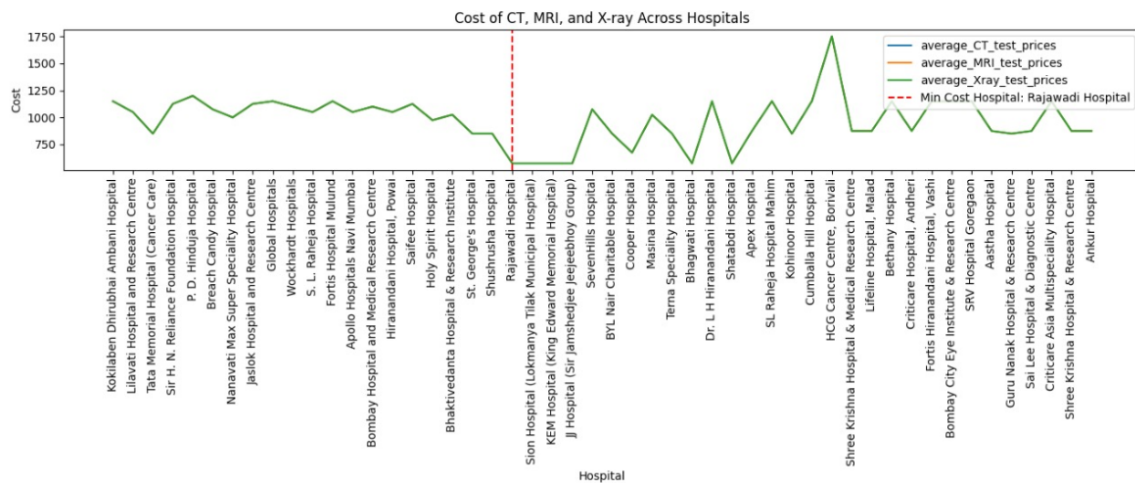


Figure 2: Cost of CT, MRI, and X-ray Across Hospitals

6.3. Chronic Condition Management Insights

The cost-tracking feature for patients with chronic conditions provided actionable insights for better financial planning.

Findings: Patients with conditions such as diabetes or hypertension can reduce their annual medical expenses significantly using cost-saving suggestions. The tracking tool highlighted frequent high-cost items (e.g., medications) and suggested cheaper alternatives from partnered pharmacies.

Breakdown of savings:

- Medication Substitutions: 50%
- Partner Discounts: 30%
- Service Provider Selection: 20%

6.4. Provider Competition Analysis

The platform not only provides significant benefits to users by offering transparent pricing and cost-saving suggestions but also incentivizes healthcare providers to adopt more competitive pricing strategies. By utilizing premium analytics, providers gain valuable insights into their pricing structures, helping them identify cost inefficiencies and areas for improvement. This data-driven approach allows hospitals and clinics to optimize their operations, reduce unnecessary expenses, and adjust their pricing to align with market trends, thereby attracting more patients and increasing their overall competitiveness in the healthcare sector.

6.5. Projected Long-Term Benefits

Based on current user data, the long-term impact of the platform is expected to be significant. Users across the pilot regions are projected to save substantial amounts annually as the platform scales, making healthcare more affordable. Additionally, by reducing costs, the platform enhances healthcare access, enabling a wider demographic to access quality care. The comprehensive insights provided by the platform also empower patients to make informed decisions, allowing them to select healthcare providers that best match their needs, ultimately improving patient satisfaction and outcomes.

6.6. More Analysis:

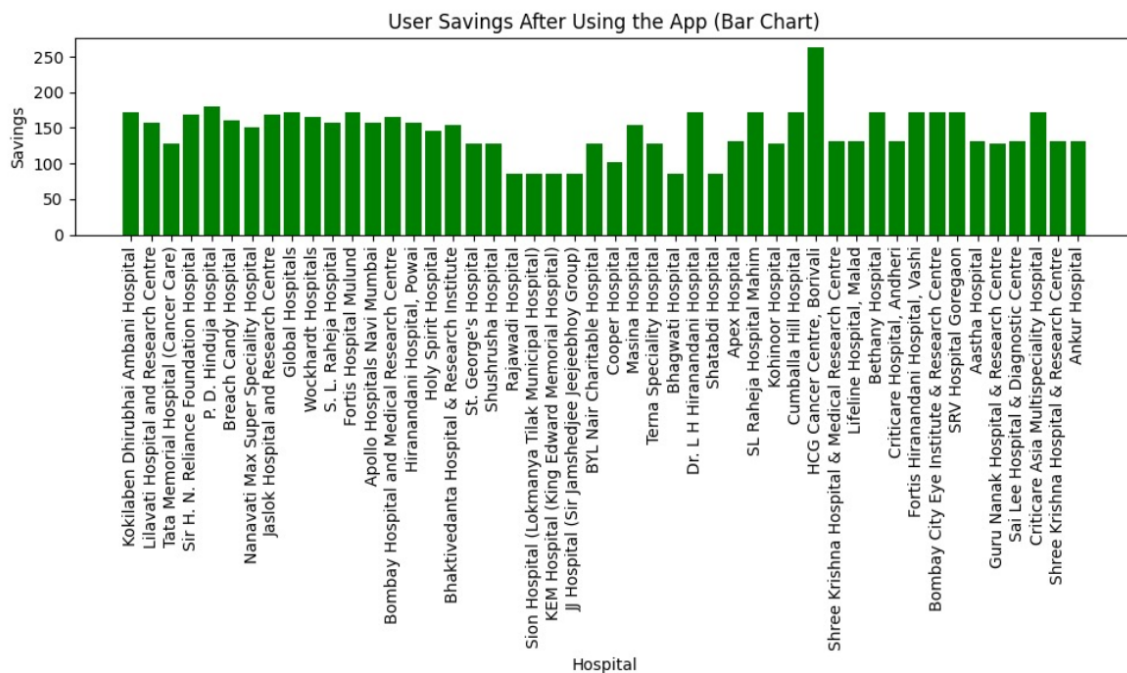


Figure 3: User Savings After Using the App.

Graph 3 shows that user savings are consistent across most hospitals, between 150-200 units, with "Shree Krishna Hospital" standing out with savings above 250 units. This suggests widespread adoption of cost-saving initiatives, while hospitals with lower savings, like "Dr. L H Hiranandani Hospital" and "Ankur Hospital," could benefit from better alignment with these initiatives.

7. Discussion

7.1. Challenges Faced

- **Data Collection:** Gathering accurate cost data for medical procedures and tests across hospitals proved challenging due to the lack of standardized pricing and transparency.
- **Insurance Complexity:** Many insurance providers include extensive fine print, making it difficult to comprehensively represent all features. Real-time integration posed technical and validation hurdles.
- **Data Source Integration:** Combining diverse datasets (e.g., hospital costs, reviews, insurance data) required significant effort to ensure compatibility and reliability.
- **User Engagement:** Encouraging patients to contribute reviews and upload bills was difficult due to privacy concerns and user reluctance.
- **Technical Infrastructure:** Developing features like cost tracking and bill analysis required sophisticated technology and resource-intensive development.

7.2. Limitations

- **Limited Geographic Scope:** The project focuses on 50 hospitals in Mumbai, restricting its applicability to other regions.
- **Selective Service Coverage:** Only major tests and surgeries are covered, leaving out several medical services due to data limitations.
- **Data Validation:** Ensuring accuracy for hospital pricing and insurance information is resource-intensive, resulting in potential inconsistencies.
- **Insurance Features Uncertainty:** Complex insurance policies mean some features may not be accurately represented.
- **Limited Scalability:** Expanding the framework to include more hospitals and services would require substantial resources.
- **Patient Review Bias:** Reviews are subjective and may not always represent the quality of services accurately.
- **Dependency on User Input:** Features like review aggregation and cost tracking heavily rely on user participation, which may limit data comprehensiveness.
- **Privacy and Data Security:** Handling sensitive data such as medical bills and insurance information raises concerns about data security and compliance with regulations.

8. Conclusion

Conclusion The Medical Service Price Comparison Tool is a pivotal step toward empowering patients with transparency in healthcare costs. By addressing the lack of clear pricing in healthcare, this platform not only demystifies complex billing systems but also enables patients to make well-informed decisions. Whether choosing a hospital for a surgery, a lab for diagnostic tests, or a pharmacy for medications, users can weigh cost against quality, ensuring their healthcare choices align with their budget and preferences.

One of the platform's standout features, the Savings Projection Tool, goes beyond merely providing information. It actively helps users visualize potential savings by comparing healthcare providers based on price and quality scores. For example, if a patient needs multiple tests, the platform calculates an overall score considering pricing (weighted at 70%) and patient ratings (weighted at 30%) for various hospitals or labs. It then suggests the most cost-effective and high-quality option, providing users with transparency, clarity, and actionable insights.

Additionally, the integration of tools for chronic condition management and insurance price transparency enhances the platform's utility. Chronic patients can manage expenses more effectively with cost tracking and alternative recommendations, while the insurance comparison feature empowers users to choose plans tailored to their needs. With planned expansions to include more services and regions, the platform is poised to make a meaningful impact on healthcare affordability and accessibility.

In summary, the platform not only helps reduce unexpected healthcare expenses but also promotes competition among providers to deliver quality services at fair prices. By addressing critical gaps in healthcare pricing transparency, the tool contributes to a more equitable healthcare system.

9. Future Analysis:

Building on the foundation of price transparency and cost-effectiveness, future developments for the platform aim to broaden its scope and impact.

- **Geographical Expansion:** Initially focused on select regions, the platform will gradually extend its coverage nationwide and, eventually, to international markets. This requires integrating localized pricing data and adhering to region-specific healthcare regulations. The expansion will ensure a diverse user base and increased value for patients globally.
- **Advanced Analytics and AI Integration:** Incorporating machine learning algorithms can refine savings projections by factoring in real-time data such as seasonal pricing variations, patient demographic trends, and even dynamic quality metrics. Predictive analytics could help users anticipate future healthcare expenses based on their medical history, enabling proactive financial planning.
- **Enhanced Partnerships:** Collaboration with healthcare providers, insurance companies, and pharmacies will be critical. By leveraging data-sharing agreements, the platform can offer more accurate insights, personalized recommendations, and exclusive discounts. Premium API integrations with third-party applications can create additional revenue streams and extend the platform's ecosystem.
- **Behavioral and Preventive Insights:** Future updates could focus on preventive care and behavioral insights. For example, the platform could suggest healthier lifestyle choices, flagging users who might save on medical expenses through preventive screenings or early interventions. This shift toward proactive healthcare aligns with global trends emphasizing wellness over treatment.
- **User-Centric Features:** To further personalize the user experience, features like expense categorization, healthcare budgeting tools, and reminders for regular health checkups could be added. Gamification elements, such as rewards for cost savings or healthy habits, might also improve user engagement and retention.
- **Data Security and Compliance:** As the platform scales, robust data protection protocols must be a priority. Compliance with laws like GDPR, HIPAA, and other local regulations will ensure user trust and secure sensitive medical and financial information.

By continuing to evolve and innovate, the Medical Service Price Comparison Tool has the potential to transform how individuals engage with healthcare. Its future lies in bridging gaps in healthcare affordability and accessibility while fostering a data-driven, patient-centric ecosystem that benefits all stakeholders.

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11. References

- Data source: OneDrive Data Reference
- Website: Healthcare Fintech Platform
- Insurance Link: Bajaj Allianz
- Existing Marketplace: Turquoise Health
- Existing Similar Model: Practo