

# THE ROLE OF THE FACILITATOR IN THE HEALTH TOURISM ORGANIZATIONAL PARTNERSHIP MANAGEMENT SYSTEM

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**Abstract.** Health tourism is a rapidly growing segment of the tourism industry, encompassing medical care, wellness and prevention services. The development of this sector is determined by multifactorial medical, social, economic and legal aspects, such as the quality of treatment, accessibility of services, price, psychological comfort of patients, level of infrastructure and political stability. At the same time, the development of the sector is limited by regulatory challenges, high investment costs and differences in the quality of services between countries. The tourism industry creates social and economic value, contributes to employment, the spread of cultural diversity and regional development. Health tourism complements these opportunities, and for its effective functioning, organizational partnership between various participants in the sector is necessary. An essential role in this system is played by an facilitator (facilitator), who connects patients, healthcare institutions, insurance companies and tourism organizations. The function of the facilitator includes coordinating the flow of information, reducing cultural and administrative barriers and increasing patient satisfaction. This paper analyzes the role of the facilitator in the health tourism organizational partnership management system. Based on a systematic and comparative analysis of scientific literature, using synthesis, generalization and graphical representation methods, the role of the facilitator is theoretically substantiated and its significance in achieving sector competitiveness, sustainability and inter-organizational trust is revealed.

**Keywords:** health tourism, facilitator, organizational partnership, incentive factors.

**JEL Classification:** I0, I11, M10, M16, L2

## 1. Introduction

The social value created by the tourism industry often provides the first job opportunity for young people, helps to combat racism and regional disparities, connects people and their cultures, and contributes to the growing demand for local agricultural products, crafts and gastronomy. There is no doubt that the travel and tourism industry plays an important role in the global economy. Advances in artificial intelligence and augmented reality technologies, 5G and Traveltech, digital tourism platforms and social media are changing consumption habits and forms of travel, which is leading to the transformation of the tourism and hospitality industry.

Health tourism is an emerging, global, complex and rapidly changing segment that needs to be managed

with modern management tools. Health tourism accounts for around 5% of total tourism in the EU-27 and accounts for around 0.3% of the EU economy. Health tourism accounts for a much larger share of domestic tourism than general tourism. Increasing the share of health tourism can reduce the seasonality of tourism, improve sustainability and quality of job, and the use of preventive measures can help reduce health costs.

Health tourism involves the practice of patients travelling abroad to receive medical care, which is usually paid for by the health tourists. It is thus different from tourists seeking unplanned, emergency care abroad and from cross-border care, where insurance companies or national health care systems reimburse their citizens for care received abroad. Although

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health tourism is not a new practice, it has gained greater public attention in recent years due to the increasing number of people from high-income countries seeking care in low- and middle-income countries.

Global cooperation between stakeholders and various organizations, as well as the creation of international networks for the exchange of information and experience, can significantly contribute to the development of health tourism. Such cooperation can reduce unnecessary patient concerns and improve the quality of services and increase patient trust (Jalali et al., 2025). As A. Davtyan et al., (2024) point out, the basis of this growing business is a complex network of elements, such as government regulations, commercial interests and healthcare infrastructure.

The health tourism facilitator becomes an essential connecting element in this complex network, as it not only helps patients navigate between healthcare systems in different countries, but also ensures a reliable flow of information and high-quality coordination of services. The facilitator, acting as a bridge of communication and trust between patients, healthcare providers and other participants in the tourism industry, contributes to the greater attractiveness and sustainability of health tourism. Its role is particularly important in reducing cultural, linguistic and administrative barriers, which allows for more effective use of the social and economic value created by the tourism sector.

*The problem of research.* What is the role of the **facilitator** in the health tourism organizational partnership management system? The object of research is the role of the facilitator in the health tourism organizational partnership management system. The goal of research is to evaluate the role of the facilitator in the health tourism organizational partnership management system from a theoretical perspective. Objectives: to analyze the factors of health tourism; to define the function of the facilitator in the health tourism organizational partnership management system.

*The methodology* used in this study is based on a systematic and comparative analysis of scientific literature, which provides the prerequisites for a consistent assessment of the factors that promote and hinder the development of health tourism, as well as the role of the facilitator in the organizational partnership management system. Such an approach allows for a critical review and integration of the results of previous research, identifying the main trends, concepts and theoretical approaches in this area. Methods of synthesis and generalization are used to process and interpret scientific sources, which provide a deeper understanding of the functions of the facilitator in the organizational partnership management process. By applying graphic representation tools,

connections, models and relevant topics are visually revealed, which enhances the clarity of the theoretical assessment of the development of health tourism and the solvability of the problematic issue.

## 2. Factors Promoting and Hindering the Development of Health Tourism

For health tourism users/tourists/patients, one of the most important indicators of service quality is the effectiveness of treatment (Adams et al., 2013). Other equally important aspects are the certificates/certificates held by medical professionals (Holliday et al., 2015); more attentive care by nurses (Demiccio and Cetron, 2006); shorter waiting lists (Cameron et al., 2014; Hanefeld et al., 2015) and the most advanced medical equipment and technology (Masi de Cassanova and Sutton, 2013). Some health tourists may want to escape stress and relax while abroad, so they combine their medical care with a holiday (Hanefeld et al., 2015; Holliday et al., 2015). Some patients/tourists are attracted by a different cultural environment and the opportunity to receive unique health or wellness services, such as acupuncture, Ayurveda, yoga and other forms of spa therapy (Connell, 2011). Patients who travel to a foreign country for health care often face various institutional and social challenges. However, they expect the destination country to have a stable political and social environment, and an effective legal system to compensate for damages resulting from medical negligence or malpractice (Bookman and Bookman, 2007). Whether continuity of health care can be guaranteed after patients return from a health tourism trip is another legitimate concern for medical tourists (Lautier, 2014). Finally, there is concern about whether doctors in the country of residence will be able to deal with problems that arise when patients return home (Gan and Frederick, 2018).

Health tourism is usually curative, and health care services are used internationally, as noted by C.M. Hall (2011); M. Prakash et al. (2011); M. Lianto et al. (2020); for one of six reasons. First, cross-border medical services are cheaper than those provided in the country generating medical tourism (economic cost dimension) (Milstein and Smith, 2006) and/or can be provided in a timely manner (time cost dimension) (Eggertson, 2006; MacReady, 2007). Second, medical services can be accessed in a relatively exotic location in conjunction with a vacation (commercial behavior dimension) (Connell, 2006). Third, due to migration and the demands of the global labor market, expatriates may return to their country of origin for treatment for cultural, family and language reasons (non-commercial behavior dimension) (Lee et al., 2010). Fourth, there are no regulatory structures in the destination country that restrict the availability of

medical services in the generating country (regulatory cost dimension). This dimension can also be further broken down by separating regulation, which makes some services completely unavailable even though medical technology exists, such as when a woman has to travel internationally to have an abortion procedure that would not be legal in her home country (Nowicka, 1996; Gilmartin and White, 2011), and where procedures are regulated because they are considered experimental in their home country, such as stem cell medicine (MacReady, 2009) and some fertility and reproductive procedures (Voigt and Laing, 2010). Fifth, the reason for health tourism may be that the organ is not transplanted in the health tourist's country of origin (Bramstedt and Xu, 2007). This area is particularly controversial due to concerns about organ trafficking (Scheper Hughes, 2003), as well as issues of medical regulation (Reed, 2008). Sixth, the competitiveness of the destination, which includes climate, environment, flora and fauna, health and medical care, heritage or historical sites, events, transportation, government policies and the quality of actual management. The factors that promote and hinder the development of health tourism are presented in Table 1.

Other authors, such as U. Religioni and M. Religioni (2015), D. Ulaş and Y. Anadol (2016), K. Guntawongwan (2017); J. Lee and J.-J. Kim (2023); T. Gan etc., (2023) and others, distinguish the following six main motives for health tourists to travel: first – favorable legal system and logistics – ease of obtaining a visa, accessibility of transport; second – economic efficiency – the price of treatment and related services; third – treatment effectiveness – quality of treatment and services; fourth – psychological comfort, friendliness of employees and the environment – integration of the philosophy "everything for the patient"; fifth – modern treatment technologies – medical innovations; sixth – accreditation – accredited medical centers, personnel. M., Lianto et al. (2020) supplement this list by including: uniqueness of the services provided – the ability to receive selected services based on the use and uniqueness of innovative technologies; professional reputation of the service-providing organization – the image and reputation of the organization providing the relevant services in the national and international market, the presence and number of positive customer reviews, the

Table 1

**Factors promoting and hindering the development of health tourism**

FACTORS PROMOTING	FACTORS HINDERING
Public and private investments in health infrastructure	High market entry costs
Logistical development of health care infrastructure	Poor planning and coordination across the sector
Modern medical centers with international accreditation (JCI)	Structural socio-economic issues such as insecurity or relatively high business costs and financial risks.
A mechanism for quality control of medical services (certification) has been established	Insufficient promotion of health tourism
Long-term health tourism promotion programs are being developed	Lack of a centralised administrative support system
Natural healing source resources are available and adapted (geothermal/mineral waters, etc.)	Lack of differentiation strategies vis-à-vis competing countries
Optimal price-quality ratio of offered medical services and the possibility of offering them at lower prices compared to other competitive countries	Insufficient quality of healthcare services throughout the patient journey cycle (pre-procedural phase – procedural phase – post-procedural phase)
Political and social stability in the country	Insufficient number of health tourism professionals
Access to modern and well-developed tourism infrastructure	Underdeveloped health tourism marketing strategy
A well-founded reputation for quality medical services	Underdeveloped interregional health tourism partnership mechanisms
Successful use of best practices and modern technologies	Lack of multilingual medical staff
Experienced medical staff trained according to international standards, able to communicate in different languages	Geographical barrier – underdeveloped transport infrastructure
Opportunity to reveal the country's health care sector potential (excess capacity in the private health sector)	Lack of data on the certification of medical centers and the skills of doctors
Developed health tourism industry coordination system	Unaddressed problems of the reputation of the healthcare system at the international level
Easy visa regime	Inflexible/inadequate legal framework, as well as legal barriers related to insurance, compensation and compensation in case of medical errors.
Ensuring the highest standards of patient safety during hospitalization	
A wide and deep range of high-quality health services offered	

Source: prepared by the author based on: Horowitz & Rosensweig, 2007; Bookman & Bookman, 2007; Marlowe & Sullivan, 2007; Reddy etc., 2010; Heung etc., 2010; Hudson, 2012; Seongseop etc., 2012; Borek, 2013; Johnston etc., 2016; World Tourism Organization and European Travel Commission, 2018; Težak Damijanić, 2021; Seow etc., 2022

implementation of a loyalty policy towards regular customers, etc.; tourism potential of the destination – the significance of the travel destination itself for the tourist/patient, the ability to get acquainted with the nature, culture, history of the visited place and the specificity of the visited region; the ability to receive additional services – the ability to use other tourist or related services provided to the consumer (availability and quality of accommodation services, quality and accessibility of catering services, availability of excursion services, etc.) taking into account the health tourism services type.

In summary, it can be stated that the choice of health tourism services is determined by a multifactorial system of motives, which includes both indicators of the quality of medical care – treatment effectiveness, specialist competence, modern equipment and technologies – and broader social, economic and cultural aspects, such as the price of services, accessibility, psychological comfort or the possibility of combining treatment with a tourism experience. Patient expectations are closely related to political and legal stability, ensuring accreditation and safety standards, and at the same time to the attractiveness and reputation of the destination. Therefore, the development of health tourism depends on the ability to balance the enabling and inhibiting factors, integrating the quality of medical care with competitive tourism services and effective partnership management in an international environment.

### **3. The Role of the Facilitator in the Health Tourism Organizational Partnership Management System**

M. Smith (2015) stresses that collaborative partnerships are fundamental to shaping and advancing destinations within the health tourism sector. Similarly, C. Pforr and C. Locher (2014) argue that enhanced regional and local cooperation among service providers constitutes a crucial prerequisite for the sustainable development of such destinations. C. Voigt and J. H. Laing (2014), together with M. Illario and J. Bousquet (2020), further point out that although the sector remains highly fragmented and heterogeneous, the provision of consistent, high-quality experiences depends on the coordinating role of destination management bodies or interlinked organizational networks.

The strategic significance of partnership in health tourism is also underscored by S. Ganguli and A. H. Ebrahim (2017), who maintain that the creation of distinctive and competitive offerings requires a stakeholder-inclusive approach. Such collaboration can improve information flow, facilitate the integration of innovative technologies from partners, enhance operational efficiency, support the development of

novel business concepts, attract investment, and reduce costs. M. Franco and C. Estevã (2010) additionally argue that, in a competitive environment such as health tourism, organizations must foster synergies to secure a sustainable competitive advantage. Within this framework, public–private partnerships are especially important for balancing stakeholder interests and promoting the long-term growth of the industry.

Building on organizational partnership theory as discussed by R. W. McQuaid (2000), I. Easwar (2003) and M. Safaeepour et al. (2015), the primary question concerns clarifying the partnership's objectives. This entails preparing, implementing, and evaluating a comprehensive strategy before considering other dimensions, such as identifying key actors, establishing structures and operational mechanisms, and determining roles in planning, organization, leadership, and control. Equally important are the formal and informal agreements that govern cooperative arrangements, the allocation of responsibilities, open communication systems for information exchange, and the cultural compatibility of participating in organizations an especially relevant factor in a diverse field such as health tourism.

B. Gomes-Casseres states that in order to have a coherent partnership plan, attention should be paid to four important elements: 1) a strategy that shapes the partnership as a logical and structural unit; 2) a dynamic partnership perspective that helps manage and develop the partnership; 3) the perception of the partnership as a whole of many different elements, the coordination of which increases flexibility; 4) the existence of an internal partnership infrastructure that supports and seeks to maximize the value of external cooperation (cited by Trafford and Proctor, 2006).

Applied to the context of health tourism, these insights indicate that inter-organizational partnerships in the industry are typically grounded in formal agreements, mutual trust, and shared decision-making. Such arrangements not only coordinate collective action but also enable the formulation of joint operational strategies directed toward common goals while distributing profits, losses, and risks among all parties involved.

In the opinion of the authors, an important aspect is to substantiate the role of organizational partnership in the health tourism management system (Figure 1). Where the main goal of the latter is to create, develop and support various health tourism services to achieve sustainable development of the sector. The formed health tourism networks are formalized by contracts, legal acts, memorandums of understanding, joint agreements, therefore the relationships, functions, and responsibilities of their participants are clearly defined. In a general sense, the authors understand the health

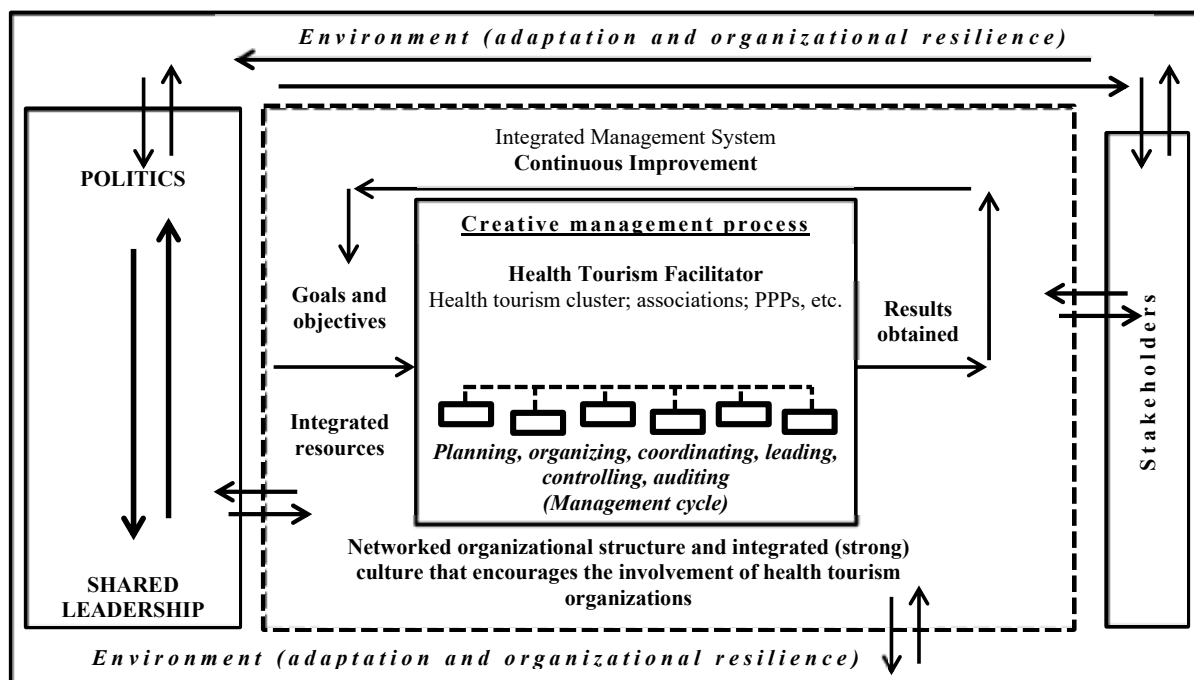


Figure 1. Health Tourism Management System

tourism management system as a set of management methods that ensure the management of health tourism policies, processes, procedures, and structural parts of interconnected organizations to achieve the set goals.

When detailing the health tourism management system, it is important to emphasize the phenomenon of organizational partnership, which is the core and the cornerstone of the system. Integrated management (based on a systemic approach) and the mechanism of partnerships unite health tourism organizations, integrate resources, common networks and tasks, which are transformed into results during the creative management process. The concept of a health tourism management system can be defined as a means/instrument to ensure the development of health tourism, which at the same time takes into account and has a positive impact on the activities of health tourism organizations, tourists/patients, local communities and nature.

Adapted from M. Gunduz and H. Laitinen (2017); K. Astawa et al., (2018); A. Spenseley et al., (2019); M.A. Based on the results of Samani (2019) research on management systems in the context of health tourism, we can distinguish the following main aspects that should be taken into account when creating and developing a health tourism management system: analysis of the current health tourism situation, infrastructure status at the local and regional levels; assess the influence of external factors determining the prospects for the development of regional health tourism, as well as the adaptation capabilities and resilience of organizations (to external risk factors);

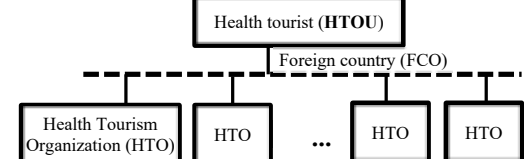
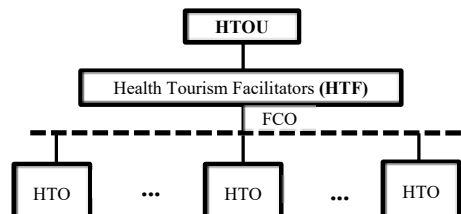
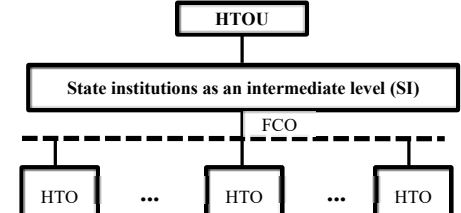
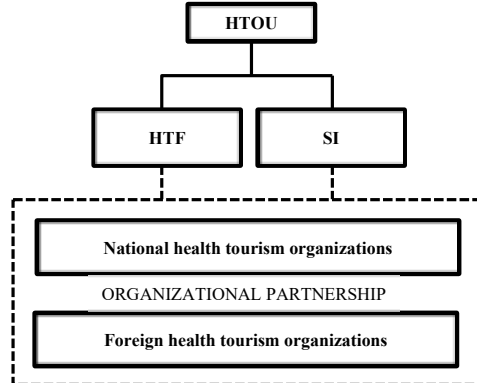
identify and systematize the main problems and prerequisites for developing health tourism at the regional level; choose a strategic direction for regional health tourism (medical tourism; wellness tourism); conduct a detailed socio-ecological and economic assessment of the impact of the selected strategic direction on the socio-economic and natural environment of the region, linking it to the socio-economic regional development plan (strategy); provide and provide the resources necessary to achieve strategic goals at the local, regional and national levels.

One of the key roles is played by health tourism facilitators, who are typically responsible for patient flows and experiences (Table 1). A health tourism facilitator is a specialized agent with knowledge of both the tourism and healthcare industries and can connect patients and healthcare providers. The facilitator organizes and books travel components, takes care of the patient during their stay, and assists with medical providers (UNWTO, 2018).

The first facilitator, i.e. consumers/patients/tourists who travel independently, usually have to overcome both informational and psychological barriers when traveling to receive health tourism services abroad. Before deciding to travel independently, the costs and benefits of involving the other three types of facilitators/facilitators need to be weighed. These tourists/patients usually know or at least have partial information/experience about foreign hospitals and plan the appropriateness of medical procedures themselves. Advice and recommendations from friends or relatives are undoubtedly the most

Table 1

**Types of health tourism management systems by facilitators**

Type of health tourism management system	System type
<p><i>Direct health tourism, the mechanism of which provides for direct contact of the patient with a foreign clinic.</i></p>	 <pre> graph TD     HTOU[Health tourist (HTOU)] --- FCO[Foreign country (FCO)]     FCO --- HTO1[Health Tourism Organization (HTO)]     FCO --- HTO2[HTO]     FCO --- HTO3[HTO]     FCO --- HTO4[HTO]             </pre>
<p><i>Health tourism, organized by domestic or foreign facilitators who take on the solution of the necessary organizational issues and all types of services. This type of medical tourism organizations is used in Israel, India, China and South Korea.</i></p>	 <pre> graph TD     HTOU[HTOU] --- HTF[Health Tourism Facilitators (HTF)]     HTF --- FCO[Foreign country (FCO)]     FCO --- HTO1[HTO]     FCO --- HTO2[HTO]     FCO --- HTO3[HTO]             </pre>
<p><i>Health tourism is part of the state health policy. State institutions create a mechanism for citizens of the country to travel abroad for health or wellness purposes. This model is actively operating in the USA, Canada, Great Britain and some countries of the European Union.</i></p>	 <pre> graph TD     HTOU[HTOU] --- SI[State institutions as an intermediate level (SI)]     SI --- FCO[Foreign country (FCO)]     FCO --- HTO1[HTO]     FCO --- HTO2[HTO]     FCO --- HTO3[HTO]             </pre>
<p><i>Health tourism develops on the basis of partnerships between domestic medical service providers (medical centers, doctors) and foreign medical service providers (medical centers, specialized clinics, private doctors). Under this scheme, national medical centers use the mechanism of transferring medical services to foreign centers, providing treatment protocols to foreign partners and using professional consultations, telemedicine technologies and professional retraining of specialists. This model is actively used in Germany and the USA.</i></p>	 <pre> graph TD     HTOU[HTOU] --- HTF[HTF]     HTOU --- SI[SI]     subgraph Partnership [National health tourism organizations]         HTF         SI     end     subgraph Foreign [Foreign health tourism organizations]         HTF         SI     end             </pre>

influential source of information about health tourism (Connello, 2011).

The second type occurs when consumers choose to use the services of an facilitator, known as a health tourism agent. A number of studies have been conducted on health tourism agents, mainly on the nature of the information provided to potential health tourists/patients through their website reviews (Cormany and Baloglu, 2011; Gan and Frederick, 2011; Dalstrom, 2013, etc.). With the abundance of information about health tourism services, an agent can significantly reduce the consumer’s search costs, including the opportunity or time costs associated with seeking medical care. Many potential consumers have a clear idea of what health or wellness services they need, but decisions about which country and which hospital to choose, and how to assess quality and potential costs can be difficult. Furthermore, travel planning is an information- and knowledge-intensive

process, which makes the patient/tourist more likely to experience risk factors. Time zone differences, language and communication difficulties are likely to add another layer of complexity. To overcome asymmetric information and high search costs, consumers may choose to use an agent. The third type of intermediation is explained as follows: to reduce costs, some insurance companies have included some foreign hospitals in their lists of approved providers. Consumers who want to receive extraordinary elective treatment that is covered by third-party payers are likely to rely on them to arrange procedures. However, third-party payers will not pay for surgeries and procedures that are not authorized in the patient’s country (e.g., stem cell therapy in the United States). Third-party payers, such as health insurers, help consumers overcome uncertainties about the quality of care and patient safety by working with accredited hospitals that are JCI accredited or have a good

reputation internationally. Third-party payers can also reduce consumer concerns about the confidentiality of medical records by working only with foreign hospitals that comply with HIPAA (Health Information Privacy) requirements.

The fourth type of mediation. As S.K.S. Gooding (1995) argues, social connections and trust in medical professional's influence consumers' decisions about treatment. This is especially true in recent years as the doctor-patient relationship has become more reciprocal and patients have become more involved in their care (Al-Amin et al., 2011). Some consumers may receive foreign medical care referred to by their domestic physicians for a variety of reasons. For example, patients from neighboring countries of South Africa were referred to South Africa by doctors because they did not have access to basic health services in their own country (Crush and Chikanda, 2015). In cases where the waiting list is shorter or when the foreign facility is closer than the nearest home facility, doctors recommend going abroad (Brouwer et al., 2003). Indeed, it is not uncommon for doctors to travel to another country for surgery. According to Holliday et al. (2015), South Korean doctors often perform consultations and surgeries in China; Spanish clinics are visited by surgeons from Germany or Italy. According to a study of US consumers' interest in domestic medical tourism, 40% of consumers would travel outside their immediate area to save 50% or more if their doctor recommended it (Deloitte, 2009). Domestic doctors play a crucial role in helping consumers overcome barriers to quality of care. Local doctors are generally well-informed about the latest medical technologies and procedures, and are better able to assess surgical outcomes, credentials, and JCI accreditation standards of foreign doctors. Thus, they are better able to recommend appropriate treatment.

In summary, it can be stated that in the health tourism organizational partnership management system, the role of the facilitator, i.e. the facilitator, is one of the key factors ensuring the coherence, coordination and sustainability of the sector. The facilitator acts as a connecting link between patients, healthcare providers, insurance companies and tourism sector organizations, helping to overcome informational, cultural, logistical and legal barriers. His functions include planning the patient's travel and treatment, ensuring the quality of services, maintaining a smooth flow of information and reducing risks. In addition, the facilitator contributes to the formation of organizational networks, strengthens cooperation between the public and private sectors, which is necessary to effectively use resources and integrate innovative technologies into the health tourism service chain. Various mediation models – from independent patient decision-making to recommendations from

agencies, insurance companies or doctors – show that the role of the facilitator is not homogeneous, but flexible and adaptable to a specific context. Such a multifaceted facilitator function ensures not only higher service quality and patient satisfaction but also creates added value for the health tourism ecosystem, promoting international trust, partnership synergies, and long-term competitiveness of the sector.

#### 4. Conclusions

The analysis revealed that the development of health tourism is determined by a complex combination of factors, including medical, economic, social, cultural and legal aspects. For patients, one of the most important indicators of the quality of services is the effectiveness of treatment, the competence and certificates of medical personnel, advanced technologies and shorter waiting periods. No less important are additional motives, such as psychological comfort, the uniqueness of services, the ability to combine treatment with vacations or wellness procedures. Analyzing the enabling and inhibiting factors, investments in modern infrastructure, international accreditation, effective coordination of services and political and social stability are necessary for the success of the sector. At the same time, the development of the sector is limited by high market entry costs, insufficient coordination, quality assurance deficiencies and legal barriers. Therefore, health tourism is forming as a multifaceted phenomenon, the successful development of which depends on the ability to balance economic interests, medical innovations, patient expectations and the creation of a sustainable tourism environment.

In the health tourism organizational partnership management system, the facilitator (facilitator) occupies a central place, as it is he who connects patients, healthcare providers, insurance companies and tourism organizations into one coherent network. The role of the facilitator includes not only the creation of information and communication channels, but also the coordination of services, risk reduction and improvement of patient experience throughout the travel cycle. He acts as a guarantor of reliability and trust, helping patients overcome informational, cultural and legal barriers, as well as ensuring access to quality services based on international standards. Various mediation models – from independent travel to specialized agencies or doctor recommendations – show that this function is flexible and adaptable to different health tourism contexts. Strategically, the facilitator strengthens partnership synergies, promotes public-private cooperation and integrates innovative technologies, thus creating added value for the health tourism ecosystem and contributing to its long-term competitiveness and sustainability.

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Received on: 13th of October, 2025

Accepted on: 21th of January, 2026

Published on: 15th of May, 2026