

# USCIPP annual market update: 2018–2019

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**U·S·C·I·P·P**  
US COOPERATIVE FOR INTERNATIONAL PATIENT PROGRAMS

**NCHL**  
National Center for Healthcare Leadership

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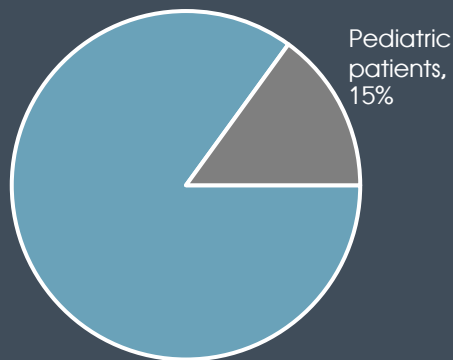
The US Cooperative for International Patient Programs (USCIPP)—an organizational membership program of the National Center for Healthcare Leadership—is a consortium of 60 American hospitals and health systems that share a focus on providing care to international patients, offering cross-border education and training programs, providing management and consulting services to hospitals and governments abroad, and offering various other forms of international collaboration in healthcare.

USCIPP's 2018–2019 Annual Survey of International Programs in the US surveyed 56 member hospitals and health systems with established international programs. Recognizing these 56 members comprise most, but not all, US hospital and health systems with established international health programs, this benchmarking survey is best considered as a lower bound for the actual size of the US market. The goal of this survey is to allow respondents to benchmark their international program operations against those at peer institutions through the data and insights garnered from this report. Due to the diverse group of member organizations, USCIPP's survey is also able to distinguish pediatric versus adult services, which permits even stronger benchmarking capabilities.

The annual USCIPP member survey collected information about services offered, financial metrics, operational metrics, and patient volumes. Additionally, the survey results provided insights into international program structures and geographic regions of home residence for patients traveling to the US for care. The following figures summarize key findings from USCIPP's 2018–2019 annual survey.

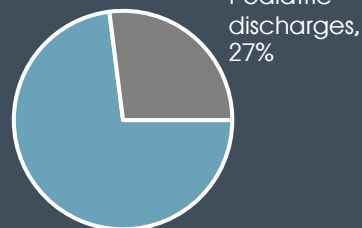
Overall, 25% were standalone pediatric hospitals. International programs provide comprehensive services to support patients traveling to the US, including scheduling and coordinating patient appointments; interpretation services; travel facilitation, such as air and ground transportation and hotel bookings; and translation services.

58,012 unique international patients reported by 51 organizations

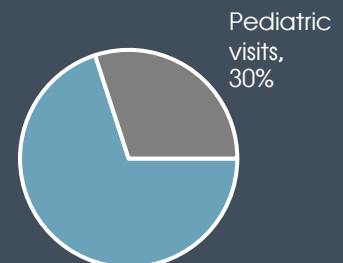


**\$2.9 billion**  
in gross revenue  
(based on charges)

14,449 inpatient hospital discharges reported by 32 organizations



155,015 outpatient visits reported by 25 organizations



International programs surveyed employed a total of 1,454 full-time equivalent (FTE) staff members, with a median of 13.5 FTE staff members per program. Positions in international programs included:

- Non-clinical support staff, such as coordinators, schedulers, and patient referral liaisons
- Clinical support staff, such as nurses, case managers, and social workers
- Financial and account services staff
- Medical directors
- Interpreters
- Program directors
- Out-of-country business development representatives

International patients are referred to US hospitals and health systems via numerous pathways. For both new and returning patients, the most common referral sources were, in order, self-referral, referral from a payer (including insurance companies and government payers), word of mouth, and referral from a physician outside of the United States. These four referral sources accounted for 75% of respondents' patient volumes. The most common payment sources for international patient care included foreign embassy and government sponsorship, self-pay, and international commercial insurance coverage. These three payment sources alone accounted for 85% of total international patient charges between July 2018 and June 2019.

The most common service lines for international patients were:

Rank	Adult patients		Pediatric patients	
	Inpatient	Outpatient	Inpatient	Outpatient
1	Oncology	Oncology	Oncology	Oncology
2	Cardiac	Internal medicine	Internal medicine	Orthopedic
3	Neurosciences	Cardiac	Neurosciences	Internal medicine
4	Women's health	Neurosciences	Cardiac	Primary care
5	Internal medicine	Orthopedics	Transplant	Transplant
<b>Top 5</b>	<b>58% of total</b>	<b>53% of total</b>	<b>62% of total</b>	<b>45% of total</b>

The top five countries of home origin for international patients were:

Rank	Adult patients			Pediatric patients		
	Unique patients	Inpatient	Outpatient	Unique patients	Inpatient	Outpatient
1	Canada	Kuwait	Kuwait	United Arab Emirates	United Arab Emirates	United Arab Emirates
2	Mexico	Saudi Arabia	United Arab Emirates	Kuwait	Kuwait	Kuwait
3	United Arab Emirates	Mexico	Canada	Saudi Arabia	Saudi Arabia	Saudi Arabia
4	Saudi Arabia	United Arab Emirates	Saudi Arabia	Mexico	Qatar	Qatar
5	Kuwait	Canada	Mexico	Bermuda	Mexico	Mexico

While all USCIPP member organizations had a focus on the provision of medical care to international patients, many were actively engaged in cross-border collaboration and training. The most common modes of international collaboration were as follows (N = 47).

- International observerships (92%)
- Short courses in the United States (74%)
- International advisory and/or consulting services (57%)
- Fellowships for international clinicians or managers (51%)
- Operation of an international/business development office abroad (36%)
- Short courses abroad (36%)

An important mission of USCIPP's member hospitals is cross-border collaboration and training and working with health systems in other countries to share knowledge, technology, and medical advancements. Through this international work, other countries have substantially improved their healthcare services and are able to treat less complex cases at home; the US remains a world leader in healthcare and a first choice for patients from around the world, especially in treating the most medically complex patients.