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Research

Dental Tourism as a Health Tourism Business Opportunity in Bali

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Abstract

Dental tourism is a branch of medical tourism, if developed it can generate income for the state, outside of direct income from dental clinics. The aim of this research is to find out efforts to develop dental tourism in Bali in 2023.

The type of this study is mix method research that combine quantitative descriptive with additional qualitative data. The population of this study was all dental clinics that serve domestic and foreign dental tourists who receive dental treatment in Bali while on tour and clinics that serve tourists who receive dental treatment in Bali. This study was used Accidental/convenience sampling, namely clinics in Bali that provide dental care services in Bali. This data was analyzed using univariate tests to find the frequency and percentage values of the questionnaires that had been distributed to the samples encountered.

The results of the research are that the practice of Dental Tourism already exists in Bali, the services provided by clinics and dental services in Bali (practice facilities, human resources, prices, materials) can be categorized as good quality, and this is acknowledged by customers, only promotions are less than optimal and legal aspects are not yet available because of existing regulations. So, the suggestion is that the Ministry of Health can revise PMK No. 76 of 2015 so that the criteria for hospitals that can serve are from type B to C. Dentists who practice dental tourism should enter the BMTA. Establishment of an activity model for dental tourism patients who can travel to Bali.

Keywords: Dental Tourism; Facility; Quality; Regulation

INTRODUCTION

Data from the Ministry of Health for 2021 shows that Indonesia is the largest contributor to medical visits abroad with a total of IDR 161 trillion, so health tourism has been designated as one of Indonesia's national strategy programs to reduce the rate of medical visits by Indonesians abroad. The government through the Ministry of Tourism and Creative Economy (Kemenparekraf) is developing the potential for Indonesian health tourism, including in Bali.

Medical Tourism (MT) or medical tourism, is a form of tourism diversification. MT is defined as a person's journey from one area to another within one country. Or from one country to another, to seek treatment while on holiday, or specifically to come for treatment. MT is important, because it has enormous potential. Then medical tourists in developed countries also tend to seek treatment outside their country. One reason is because

of the long waiting time for certain actions. As well as the high cost of action in the country of origin. This, of course, opens up opportunities for developing countries, including Indonesia, especially Bali, so that this health tourism industry segment can become a strategic opportunity for tourism development in Bali. Bali itself actually has quite large potential to be developed as medical tourism. Local wisdom regarding traditional medicine can provide a strong foundation to be introduced as a tourist attraction. Based on Diparda Bali (2012:10), it was recorded that 454,047 foreign tourists (15.7%) carried out tourism activities related to health and fitness. Presentation by the Minister of BUMN, who said that the government would start developing medical tourism in Bali (Rakornas, 2020) regarding the Acceleration of Development of Five Super Priority Tourism Destinations. According to Sandiaga Salahudin Uno (2021), within the framework of the concept of health tourism policy development, medical tourism is one of four types of Health Tourism developed jointly by the Ministry of Health and the Ministry of Tourism and Creative Economy. The other three types are wellness and herbal tourism, sports health tourism and scientific health tourism. The two institutions agreed that until 2025 development would focus on medical tourism and wellness and herbal tourism. The development of medical tourism is led by the Ministry of Health, while wellness and herbal tourism is led by the Ministry of Tourism and Creative Economy. According to Oka Purnawati et al. (2019) medical tourism started in 2013, at that time there were four medical providers.

METHODS

The methods used in the research include descriptive, compilation and classification of professional papers. The population of all dental clinics that serve domestic and foreign dental tourists who receive dental treatment in Bali while on tour and clinics that serve tourists who receive dental treatment in Bali. Samples were taken with accidental sampling technique from 15 clinics in Bali that provide dental care services in Bali, based on location and number of employees. Samples included employees, clinic managers, dental clinic agents, PDGI heads, tourism offices, tourists who were undergoing dental treatment at the time of data collection. Questionnaires to provide quantitative data and reinforced by interview guides to provide qualitative data on dental tourism development. This data was analyzed using univariate tests to find the frequency and percentage values of the questionnaires that had been distributed to the samples encountered.

Ethical Clearance

Ethical permission is taken from the Ethics Committee of "Health Polytechnic of Ministry of Health in Denpasar " with number "LB.02.03/EA/KEPK/0600/2023"

RESULT

In this study, researchers visited 15 clinics and dentist practices that serve overseas patients. During the visit, the researcher used a questionnaire as a guide to obtain data from the manager and confirm the patient's opinion.

Manager

Managerial data obtained from the manager based on the following facilities:

Table 1: Managerial Aspect

number of employees	frequency	Percentage (%)
5-10 k employees	9	60
11-20 employees	4	26,7
>31 employees	2	13,3
Origin of the patient served		
1-2 country	2	13.3
3-4 country	1	6.7
5-6 country	6	40.0
> 7 country	6	40.0
languages		
2	11	73.3
> 4	4	26.7
Clinical conditions		

Satisfied	15	100
Not Satisfied	0	0

Based on table 1, it can be seen that the majority of clinic employees are 5 to 10 people (60%), patients served from more than 7 countries (40%) and the languages spoken by managers and employees are at most 2 (73.3%), and regarding the clinic facilities, all are complete according to the criteria of existing clinics and/or independent clinics.

Data obtained from managers is based on quality as follows

Table 2: Quality Aspect

Service	**Frequency**	**Percentage**
very satisfied	1	6.7
satisfied	10	66.7
not satisfied	1	6.7
very dissatisfied	1	6.7
Don't know	2	13.3
Material		
high quality materials	13	86.7
materials with existing standards	1	6.7
new material that gives more profit	1	6.7
Employee competency (knowledge upgrade)		
Once a year	3	20.0
every 2 years	1	6.7
once every 3 years	6	40.0
once every 4 years	5	33.3
Promotion		
There isn't any	2	13.3
1-2 media	6	40.0
3-4 media	7	46.7
Type of service		
All dental services	15	100

Based on table 2, it can be seen that the quality of the clinic staff and/or practice places most of the patients who received treatment expressed satisfaction (66.7%), the materials used most often stated that they were of high quality (86.7%), the knowledge they had was upgraded the most once in 3 year (40%), all carry out self-promotion in at most 3-4 media (46.7%) and with comprehensive dental services (no specific services)

Data obtained from managers is based on prices as follows

Table 3: Prices Aspect

Price	**Frequency**	**Percentage**
Prices are cheaper than prices in the country of origin	14	93.3
Prices are the same as local prices	1	6.7
total	15	100

Based on table 3, it can be seen that almost all patients stated that the price of treatment in Bali was cheaper.

The cooperation data in doing promotion can be seen as follows

Table 4: cooperation Aspect

Tourism/hotels/travel agents	Frequency	Percentage
There is	0	0
There isn't any	15	100
insurance		
There is	0	0
There isn't any	15	100

Based on table 4, it can be seen that all clinics do not collaborate with tourism (hotels, travel agents) and insurance.

Data on the reasons why patients undergo treatment in Bali can be seen as follows:

Table 5: Reasons Patients Undertake Treatment

Reason	Frequency	Percentage
The quality is the same as in the country of origin	3	20.0
Higher quality	1	6.7
Better service	3	20.0
Get a travel bonus	7	46.7
No reason	1	6.7
	15	100.0

Based on table 5, it can be seen as follows that patients seek treatment in Bali because they get tourism bonuses (46.7%).

Patient

The data submitted by the manager was confirmed to patients who were seeking treatment and were willing to be interviewed, so the following data was obtained:

Table 6: Patients Aspect

Indicators	Frequency	Percentage
Gender		
Man	4	26.7
Woman	11	73.3
Service satisfaction level		
very satisfied	13	86.7
satisfied	2	13.3
Referral to clinic		
Alone, by chance	3	20.0
Because of a friend's recommendation	8	53.3
Because seeing advertisements on the Internet	4	26.7
Dental services		
scaling	2	13.3
Composite Fillings	5	33.3
Extraction	1	6.7
odontectomy	1	6.7
root canal	2	13.3
prosthetics	3	20.0
implant	1	6.7
Reason for treatment		
Better quality than country of origin	1	6.7
Cheaper than country of origin	2	13.3
Better service	2	13.3
The service provider is friendly, polite and more humanistic	6	40.0

Indicators	Frequency	Percentage
Get a travel bonus	3	20.0
Currently in Bali	1	6.7

Based on table 6 data, it can be seen that the patients who visited were more likely to visit (73.3%), the services they received were most satisfied (86.7%), they came because of recommendations from friends (53.3%), they did more composite action (33.3%), with the idea that the service provider is friendly, polite and humanistic (40%).

DISCUSSION

Researchers visited 15 clinics that serve foreign guests randomly. Of the 15 clinic managers and/or independent practices that serve dental tourism, most of them have 5 to 10 employees, in fact there are clinics that have more than 31 employees, they upgrade their knowledge 3 times a year, patients who seek treatment at clinics belonging to more than 7 different countries, master languages at most two languages, namely Indonesian and English. Therapy there are clinics whose employees master more than 4 languages. According to the management, patients come for treatment mostly because of information from the internet, there is no collaboration with travel agents and insurance companies, they carry out independent promotions from the results of promotional information which is used at most 3-4 media, currently they are satisfied with the results of the promotions they carry out. , and really believe that the clinic they manage is growing. They claim that the materials and tools they use are of high quality, with all dental services, meaning there are no specifications for the services provided, and state that all patients who go to the clinic for treatment are satisfied and receive tourist bonuses.

From the data obtained, many patients have received treatment in Bali, and expressed satisfaction, there are also many doctors who serve foreigners, it's just that it hasn't been organized and there is no certification that allows dentists to serve, because in PMK NO 76 of 2015 concerning medical tourism services can only be provided by Type A and B hospitals. According to the chairman of the Persi Pengwil Bali, there are only 3 hospitals appointed to carry out medical tourism services in the form of Medical Tourism, namely Prof Ngoerah Hospital, BMIC Nusa Dua Hospital and Siloam Hospital, but Medical Tourism services Tourism is still partial, meaning that foreigners only go to the hospital for treatment and it is not like medical tourism in other countries such as Malaysia, Singapore and Thailand which have total medical tourism.

This was approved by the Chairperson of the PDGI Pengwil Bali who agreed and welcomed the development of Dental Tourism. Dental Tourism, which is part of medical tourism, needs to be fought for. He confirmed that there are no regulations that support dental tourism in Bali, so as chairman he is worried if there are problems when carrying out treatment. Furthermore, in his opinion, the concept of hotels collaborating with hospitals that accept patients for dental treatment needs to be considered, until now there is no hospital ready to accept patients for dental treatment (Dental Tourism) in collaboration with hotels, considering the quite heavy requirements of resource requirements. competent human being, able to speak a foreign language (at least English), or have a translator. According to him, there is a need for standardization of sophisticated equipment, X-ray equipment available in one place, all in one, IT, dental materials, patients treated once and can be treated at once, systemized data records, international accreditation requirements.

The Chairman of PERSI for the Bali Region in his interview supports and is committed to making Medical Tourism a success. Seriousness was shown by declaring BMTA (Bali Medical Tourism Association). The association also collaborates in the field of developing health technology, developing the skills and competencies of medical staff so that Bali can become an MT (Medical Toutism) destination for tourists at home and abroad. The current BMTA members contain around 17 public and private hospitals in Bali. Among them, are Sanglah General Hospital, Bali Mandara General Hospital, Bali Mandara Eye Hospital, Unud Hospital, Bros, Siloam, and so on. This association was formed on 14 Feb 2020, initiated by Sanglah Hospital, Bali Royal Hospital and Dental 911.

The chairman of PERSI as the guardian of BMTA hopes that medical wellness which has developed in Bali will become an entry point for medical tourism. For the Ministry of Health to revise PMK No. 76 of 2015 so that the criteria for hospitals that can serve from Type B can become Type C which is implemented comprehensively so that the service ecosystem can resemble Singapore, Malaysia and Thailand. Clinics and private practices that serve dental tourism can join as BMTA members such as the 911 clinic which is well known in Bali, because this association houses, guides and promotes so that in the future more foreign patients will seek dental treatment in Bali, so that it can increase tourists to Bali. Of course, this will increase the country's foreign exchange.

CONCLUSION

The practice of Dental Tourism already exists in Bali, the services provided by clinics and dental services in Bali (practice facilities, human resources) are good, and this is acknowledged by customers, only promotions are less than optimal and legal aspects do not yet exist due to existing regulations.

Suggestion

1. The Ministry of Health can revise PMK no. 76 of 2015 so that the criteria for hospitals that can serve are from type B to C.
2. Dentists who practice dental tourism should join the BMTA.
3. Establishment of an activity model for dental tourism patients who can travel to Bali.

Conflict Of Interest

The authors declare that there are no conflicts of interest associated with this research.

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