Digital marketplace to improve healthcare access and transparency in Vietnam

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INTRODUCTION

Vietnam’s private medical sector is thriving, with per capita health spending doubling over the last decade.1 2 Since the government legalised private healthcare services in 1989 as part of wide-ranging ‘Doi Moi’ reforms, the sector has experienced ‘dramatic’ expansion with 35 000 clinics and 240 hospitals, up from only one private hospital in 1996.3 While a large majority of Vietnam’s more than 280 000 hospital beds are public,4 private healthcare now accounts for 32.2% of total outpatient services and 6.3% of inpatient services, and is growing fast, with about 1300 new private clinics and 10 new private hospitals opening every year.5

While the outlook for the private healthcare market is positive, the presence of tens of thousands of small private clinics and hospitals across the country mean that fragmentation is an underlying issue. Quickly comparing a multitude of doctors based on basic criteria like price, quality, specialty and location is difficult.6 Booking an appointment can be even harder, leading many patients to skip this step altogether and gather in crowded waiting rooms. For doctors, finding new clients online is a sometimes confusing and expensive experience (online supplemental material 1). Meanwhile, stigma against accessing mental and sexual health services remains common.7 4

This manuscript describes an online healthcare marketplace, Docosan (www.docosan.com). Docosan allows patients to compare healthcare providers across 29 medical specialties, view pricing information, read real reviews of doctors, book appointments online 24/7 and chat with primary care assistants. The platform is used by providers to manage bookings, offer promotions and send compliant health education and treatment reminder messages to patients. It features separate mobile applications for patients and providers as well as a website.

METHODS

To discover unmet needs, Docosan’s founders surveyed 394 Vietnamese patients between July and August 2019, finding that Vietnamese patients struggle to navigate healthcare networks, with long wait times a bad enough problem.
that 10% of patients report having given up and gone home for their last healthcare appointment while only 16% of patients booked their last appointment in advance. Disatisfaction was common, with 31% rating their last appointment satisfaction as ‘low’ or ‘very low’. The survey further found that provider decisions are tightly linked to family recommendations with 74% of patients reporting that healthcare decisions are made by the mother in their family unit. Other academic literature confirms the difficulty Vietnamese patients have in finding the right provider, with one study of 1459 patients in Hanoi finding that ‘spending more time and cost does not improve’ the likelihood of choosing a good healthcare provider due to ‘problems with the quality of information and/or the efficiency of information’.9

Based on these findings, Docosan built a customised software platform for patients to compare and book appointments with doctors and for doctors to reach new patient groups. Thanks to Vietnam’s status as a local hub for tech talent,10 Docosan built a tech team relatively easily and beta launched in April 2020. The platform now consists of a patient-facing website and smartphone application along with a separate portal for doctors to manage bookings.

To build a network of doctors, Docosan employees visited clinics in person while also signing partnerships with private hospitals. To attract patients, Docosan chiefly used social media advertising. To vet doctors, Docosan collects notarised clinical licensing documents at both the clinic and provider level for each doctor on the network. To further address concerns around doctor quality, the Docosan platform offers a five-star rating system.

Docosan’s terms and conditions make it clear that patient ratings are to remain impartial and cannot be influenced (by payment or other means) by healthcare providers—since most clinics well understand patients’ fears about quality and want to assure them, this is not a significant stumbling block in terms of expanding Docosan’s provider base.

RESULTS

Launched in just April 2020, Docosan’s network now has over 300 verified doctors providing more than 5300 different healthcare procedures with explicit prices, chiefly in Ho Chi Minh City and Hanoi.

In terms of patient satisfaction, the average patient reported experience rating across all doctors on the Docosan network is 4.83 stars out of five with their Docosan-booked healthcare professional. With the caveat that this data remains limited due to a smaller sample size of patients who left reviews on the site (225 patients), the percentage remains significantly higher than other surveys of Vietnamese healthcare satisfaction rates of 42%.11 Additionally, 27% of patients have booked more than one appointment through the platform, the same repeat purchase rate considered favourable among e-commerce platforms12—let alone in the healthcare industry in which patients may only need care one or two times per year.

The average years of clinical experience of each doctor on the platform is 18 years, reflecting the company’s strategy of targeting and onboarding experienced physicians at launch. Although most Docosan doctors practice in the private sector, Vietnam’s large public healthcare field has also shown interest, with the dermatology department of Vietnam’s largest public traditional medicine hospital signing up in December 2020 to be part of the Docosan network.

Docosan’s top rated and booked practitioner is a female gynaecologist with decades of experience in the field while its second most popular member is a psychologist. As shown by early Docosan user interviews, because booking online is easier and more private, specialties like mental and sexual health benefit the most. Indeed, 34% of Docosan’s total bookings have been concentrated in these two fields.

DISCUSSION

Higher patient satisfaction rates show that using smartphones to provide a convenient way to approach medical treatment could encourage patients to shift from ‘go to pharmacy and cure themselves’ to ‘go to clinic to have proper treatment’, creating more demand for treatment that they may otherwise ignore.13 Docosan’s growing doctor network shows providers are also interested in new ways of reaching patients which help bypass the healthcare marketplace’s inefficiencies and fragmentation issues.

While Docosan is meant for all healthcare professionals, Docosan was able to successfully target mental health and obstetrics and gynaecology practitioners as early adopters in order to attract more patients to the platform. Docosan has succeeded at getting traction among smartphone-savvy, urban millennials. However, a key challenge is getting people outside this group to join as well. About 60% of Vietnam’s population is rural14 and 68% of rural people have a smartphone compared with 84% in urban areas.15 While the Vietnamese government has plans to increase smartphone penetration to 100% across the country by 2025,16 this disparity makes underserved populations with a smartphone app will be more difficult. Docosan addresses this issue by allowing users to book appointments on behalf of others, so that, for example, a family member who does own a smartphone can access the app and book an appointment for a relative.

Vietnam’s healthcare sector suffers from problems similar to many other emerging markets: uncertain doctor quality, difficulties with both finding the right doctor and booking an appointment, and stigma around certain specialties. Given these promising early results, we believe Docosan’s platform model has strong potential to improve healthcare access and satisfaction for patients not only in Vietnam but also...
regionally. Doctor booking startups have now raised hundreds of millions of dollars from investors globally but the majority of this funding focuses on developed countries. However, emerging markets with high smartphone penetration offer strong potential for transformation in the way that people access and experience healthcare.

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REFERENCES


6 Vuong QH. Be rich or don’t be sick: estimating Vietnamese patients’ risk of falling into destitution. Springerplus 2015;4:529.


