



UAE-US TIES THAT BIND
The future of the relationship between these two allies depends on what President Trump can deliver



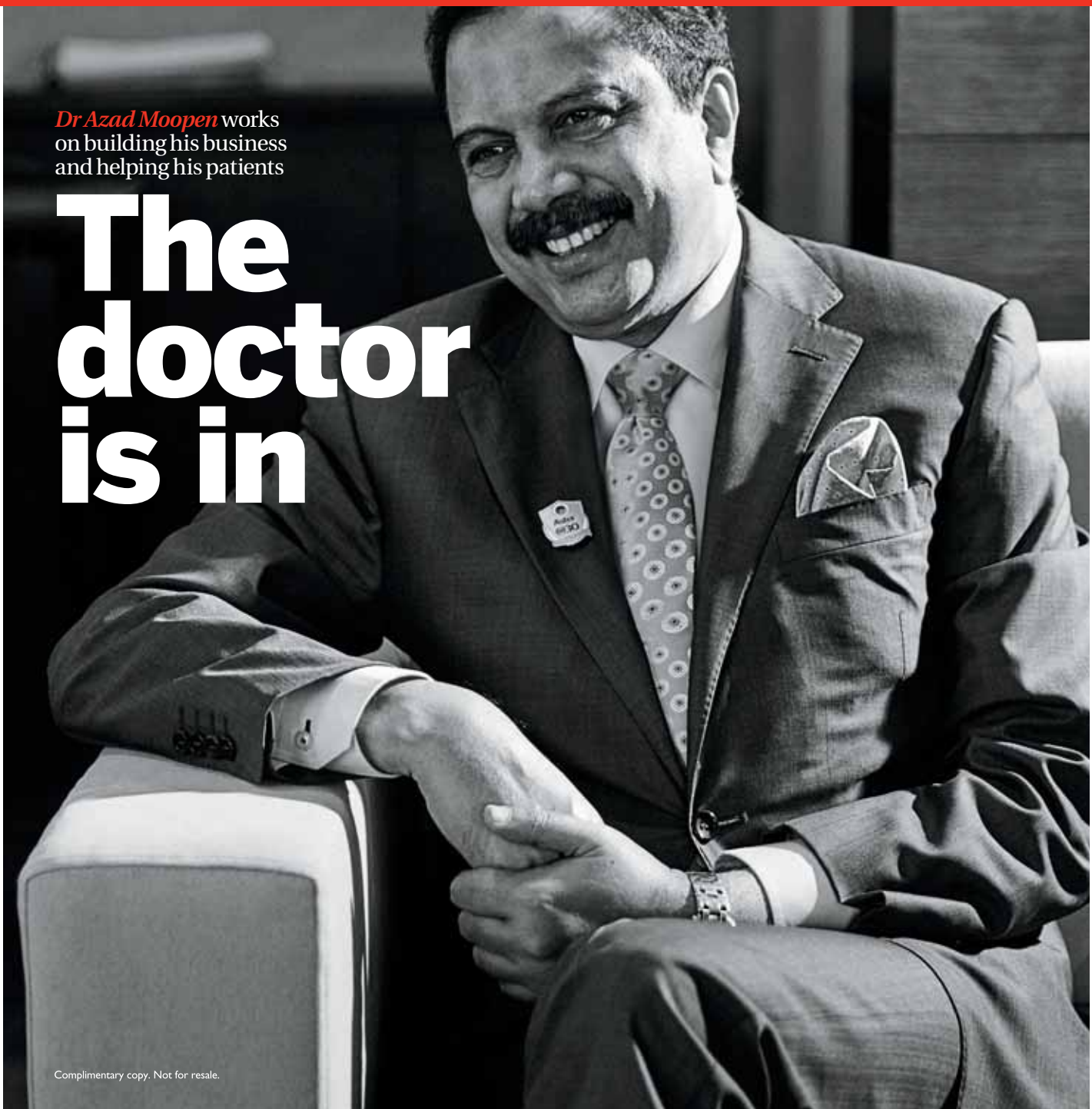
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Dr Azad Moopen works on building his business and helping his patients

The doctor is in



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COVER STORY

By Jennifer Bell

THE ONLY WAY

Dr Azad Moopen is the founder, chairman and managing director of Dubai-based Aster DM Healthcare. Thirty years after starting his business, he is still the driving force behind its continued success.

“We are increasing our operation exponentially every year. When the company began in 1987, the increase in staff was maybe ten people in a year. Now it is about 2,000 to 3,000 people a year”

▲ **Dr Azad Moopen** believes that profit should be a byproduct and not the aim in healthcare.



PEOPLE
A Y HE KNOWS

ALL DR AZAD MOOPEN has ever wanted is to help take care of people — and cure them. It is a manifesto for life that has served the doctor-turned-billionaire healthcare conglomerate-founder well.

Since setting up Aster DM Healthcare in 1987, when it consisted of a single, one-room medical clinic and a staff of five — he has seen the UAE-headquartered conglomerate's current network expand to encompass 317 healthcare institutions: 18 hospitals, 96 healthcare clinics and 203 pharmacies throughout the GCC, India and the Philippines. More than 20,000 staff are now in its ranks, catering and caring for about 50,000 patients on a daily basis.

It has made India-born Dr Moopen — founder, chairman and managing director of Dubai-based Aster DM Healthcare — a regular fixture on many of the region's rich lists, with a net worth standing at \$1.1bn (a figure supplied by the doctor himself), and a prominent example of how to succeed in business in the UAE. Yet he is humble about the journey that has made him one of the most recognisable names in the regional healthcare industry.

"I never expected Aster DM Healthcare to be the success story it is today," says the 64-year-old. "When I came to Dubai, I thought it would be just for a couple of years, but circumstances — and God — had other things planned for me. In the last 30 years, we have done well, thanks mainly to the support of the UAE's rulers and the hard work of the people at Aster DM Medical. But I never thought, when we started, that I would be here for three decades and be able to build something which helps and cares for patients."

Going mobile to help people



▲ Dr Aster Mobile is a way of giving back to the communities in the UAE.

Aster is doing its part to offer medical care in non-traditional ways as well as teaching people how to think so they are always aware.

The Dr Aster Mobile bus visits places of work — ranging from offices to labour camps — to provide health support as part of the company's corporate social responsibility (CSR) arm. "We have done this for about five years, making 350-plus visits per year," he says.

One of the messages Aster's work in this area seeks to spread is that many deaths could be prevented if more trained people were able to provide immediate medical assistance. It's why the company's 30th anniversary CSR efforts include

training people to be capable of giving basic life support (BLS). The three-year aim is to train 500,000 members of the community across the nine countries where Aster has a presence.

"In the case of many tragedies, they happen in the time it takes for an ambulance to arrive — the golden hour," he says. "If basic life support can be provided in the first five to ten minutes of this pre-ambulance time, it will have a huge impact on patient outcomes."

The plan is to connect a database of BLS-trained people through GPS, accessible via the Aster Emergency App, set for launch in the coming months in the UAE and other countries. When emergencies occur, the app will link the

user to the emergency services, and as well as dispatching an ambulance, they will send the nearest BLS responder to the scene ahead of paramedics arriving.

The scheme demonstrates how technology and innovation are at the forefront of Dr Moopen's thinking. He sees the potential for technology to enable universal access to healthcare at reduced costs — examples including Aster Chronic Care @ Home, a concept providing personalised care to patients in their home — and the imminent launch of a groundbreaking online facility, AsterOnline.com, allowing people to order healthcare products from their homes.

Raise Dr Moopen's name in healthcare circles, and this is what you will hear about him: hands-on and always willing to give his time to others. Meeting him bears out this reputation. Despite running a multi-billion dollar conglomerate, when he enters the room in his Dubai Business Bay offices — dressed in a navy suit, pocket square and designer loafers — he is jovial, smiling and even apologetic for being slightly late.

He doesn't have to apologise because he is tardy for very good reason. Dr Moopen always makes the rounds at Aster DM Healthcare and greets every member of his team. This inspires faithful service, as evidenced by the company's high staff retention and loyalty rate.

It is, however, not a company that is resting on its laurels. As a father-of-three, Dr Moopen says it is quite the reverse.

"We are increasing our operation exponentially every year. When the company began in 1987, the increase in staff was

"In the Middle East, one country which requires healthcare to go to a new level to fulfil the requirements of its population is Saudi Arabia, where we have one hospital and would like more of a presence"

maybe ten people in a year. Now it is about 2,000 to 3,000 people a year.”

Aster DM Healthcare has operational facilities in the UAE, Qatar, Oman and India, and has entered such markets as Saudi Arabia, Bahrain, Kuwait, Jordan and the Philippines. Dr Moopen’s home country now represents a key target for market growth, with 11 of its hospitals in five Indian states.

“Attracting patients from other parts of the region and providing doctors with a larger patient base is very important”

120

The number of beds at Aster DM Healthcare’s newly opened Medcare Hospital in Sharjah.

“We have reached a stage where we should now become much more geography-wide,” he says. “In India, we have reached a percentage of its people, but we want to offer more coverage in village areas. In the Middle East, one country which requires healthcare to go to a new level to fulfil the requirements of its population is Saudi Arabia, where we have one hospital and would like more of a presence.

“We are also looking at other countries, such as Egypt, Iraq and Syria, and we see the African continent as a great opportunity in the next five years.”

Dr Moopen also has expansion plans in the UAE, where it all began for Aster DM Healthcare. “The UAE is still our biggest market,” he says. “And it is going to be for a long time.”

Dubai, in particular has ambitious healthcare plans, including its efforts to become a global hub for healthcare and medical tourism. Yet the country, Dr Moopen says, poses challenges.

Healthcare for all in Dubai



▲ Aster DM Healthcare operates 96 clinics in the Gulf, Asia and India.

Dr Moopen praises the forward-thinking healthcare policies of the UAE, citing the Dubai Health Insurance Law.

Introduced in 2014, it places a legal liability on every sponsor to provide insurance to those under their sponsorship. Dr Moopen describes it as “one of the best things to happen” from a patient perspective.

“Everyone in Abu Dhabi and Dubai is

now covered and has the peace of mind of knowing that if something were to happen, they have access to healthcare,” he says. “For providers also, we have significant volume increases, which is definitely a good thing.”

Nevertheless, he claims it has not all been good news for providers. While they may be seeing more patients, they may also be getting lower rates than before as

insurance companies now have more scope to bargain, and fixed rates for treatments and procedures create financial risks.

Aster’s size means it can accommodate this, Dr Moopen says, but: “Many people who have a single clinic or hospital are finding it difficult. It is a work in progress and it will take between three and five years for it to be at a place where there is clarity.”



▼ Medcare Hospital is the UAE’s first premium private specialty hospital offering luxury medical services.



▲ Aster DM Healthcare employs 19,258 staff as of March this year.

“Unlike a normal demography, about 85 percent of the UAE’s population are expatriates, who tend to come here at 25-30 and leave by the age of 55-60,” he says. “This is a very peculiar situation. Many people here are not experiencing issues that a child or a person aged over 65 would face, so what we need to provide as a business in the UAE is definitely different.

“If there are healthcare facilities in the UAE, people will definitely come here for treatment. But with this comes another important issue. For example, a paediatric cardiac surgeon doesn’t have a role here if he is just looking after children born in the UAE, because the number of people requiring this surgery will be very low compared to a normal population.

“So, how do you attract and retain them? They will not stay for a long period of time waiting for such a case. We have to bring in patients who require such services. Attracting patients from other parts of the region and providing doctors with a larger patient base is very important.”

Attracting and retaining high-caliber medical and healthcare professionals to fill gaps in certain specialities is a well-documented challenge.

“One solution is to get more patients, and creating more interest among doctors to come and practice here,” Dr Moopen says. “But, more importantly, we have to look at getting trained people.”

The main issue facing the sector in the region, he says, is the shortage of locally trained manpower. Dr Moopen feels education and research centres could be the answer, and that governments should invest more heavily in medical education to meet the increasing demand.

Behind the scenes with Aster chairman



▲ Aster DM Foundation is helping the disadvantaged.

A man in Dr Moopen’s position has various storms to weather every day. He prepares for this with prayer and meditation at 4.30am followed by reflection at the mosque. Before he even arrives at the office, he will have spent an hour or two going through documents. Even after he returns home, he will have daily catch-up conferences with those who report directly to him.

Dr Moopen admits he is a very “hands-on person”, with a determination to be a shop-floor boss. “I’m someone who gets a kick out of operational involvement,” he says. “I put pressure on myself to examine even the minor thing and finding out something that can be improved.”

Even a compassionate chairman is still a chairman, however. And Dr Moopen has been a very successful one. Aster DM Healthcare now, in the weeks ahead, is set to launch its IPO in India.

But for all the expansion, the high-level meetings and the balance sheets, Dr Moopen’s love of people, and of making people better, has always been central to his role. And this passion for helping people extends past the business he has built from scratch. His philanthropic activities have seen him pledge 20 percent of his personal wealth to good causes.

“I have been trying to do as much as possible within our capabilities and our resources to help people because, every

day in healthcare, you come across people who require a particular treatment but cannot afford it,” he says. “We provide significant discounts to patients where they don’t have the money, but we have the availability — sometimes 100 percent — on a case-by-case basis. We also run dialysis centres, adopt villages, operate mobile medical vans — there are various things we are involved in.”

This philanthropic focus is something Dr Moopen hopes to invest more of his time in, as he looks to the future of Aster and the likelihood of his role changing.

In three to five years, he may take a step back from day-to-day operations, but remain “almost like a watchdog, standing outside and looking in”.

“We need more medical education institutions,” he says. “Having more of these institutions will definitely help to retain people in the long-term. They are as important as hospitals, yet we have very few, and while some are emerging, I think we should have more.”

As for the greatest illness challenges facing the UAE, and the GCC, Dr Moopen believes a transition should be made from predominantly focussing on reactive medical treatment, to preventive, non-medical measures that encourage patients to lead healthy lives.

“We have emerged from an era of infectious diseases, only to find we now need to



“Unlike many other healthcare companies, we have a fairly large presence in numerous countries. That perhaps gives us more stability”

tackle an epidemic of lifestyle diseases — diabetes, hypertension and others,” he says. “The government is creating a lot of awareness among patients, but there is more to be done.

Aster DM Healthcare, like all GCC-based companies, is currently operating against a

turbulent economic backdrop. If Dr Moopen is concerned about this, however, it doesn't show — optimism is another of his trademarks, even in the wake of the recent news that Aster has closed a \$295m, group-wide credit facility with Axis Bank.

“We had growth prospects before the downturn, we have them now, and I see 2017 and the years ahead as being very positive for us,” he says. “Unlike many other healthcare companies, we have a fairly large presence in numerous countries. That perhaps gives us more stability — we are well-placed to weather such storms.” **EB**



▼ Aster DM Healthcare offers the full spectrum of healthcare services across nine countries.



Dubai as a medical tourist destination



▲ Lifestyle-related diseases present a serious health risk in the GCC.

More medical education institutions and an increased influx of health tourists are urgently needed to help plug a skills gap that risks holding back the UAE's vision of becoming a healthier nation, according to the boss of one of the region's key healthcare providers.

Dr Moopen believes the UAE, together with its GCC neighbours, must inject more investment into

training a new generation of home-grown medical professionals, rather than continuing to place a heavy reliance on recruiting talent from abroad.

He feels the region's longstanding challenge of retaining expat medical personnel illustrates why education and training targeted at the local population needs to be made a priority within healthcare strategies for the UAE and GCC, and that this approach can be

central to addressing capacity shortages in crucial areas, such as cancer treatment and advanced tertiary care.

According to Dr Moopen, accelerating the UAE's status as a global medical tourism hub is also pivotal to keeping the medical talent that the country does draw from elsewhere, as he identified “the non-availability of patients and the non-availability of trained staff” as two of the prime issues now facing the emirates' healthcare sector.



▲ The GCC's healthcare industry is forecast to be worth \$71.3bn by 2020.