

行政院國家科學委員會專題研究計畫 成果報告

探討影響大陸旅客來台參與醫療觀光之關鍵因子：由顧客
知覺價值的理論觀點切入
研究成果報告(精簡版)

計畫類別：個別型
計畫編號：NSC 100-2410-H-216-010-
執行期間：100年08月01日至101年07月31日
執行單位：中華大學餐旅管理學系

計畫主持人：王秀媛

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公開資訊：本計畫涉及專利或其他智慧財產權，1年後可公開查詢

中華民國 101年08月15日

中文摘要： 本研究的目的是提出一個包含兩大部份(知覺利益與犧牲)因子的研究模式，並進而驗證這些因子會透過顧客的知覺價值並進而影響其對醫療觀光旅遊商品的購買意願。研究採調查法搜集實證資料，共計 301 份有效問卷獲自中國大陸，接著採用結構方程模式對資料進行分析，研究結果顯示顧客的知覺價值是顧客購買意願的關鍵預測因子，關於知覺利益方面，顧客的知覺醫療品質、知覺服務品質及知覺享樂是重要影響其知覺價值的因子，在知覺犧牲的因子方面，研究發現知覺風險具關鍵影響知覺價值。研究結果可提供政府無論是為促進醫療觀光旅遊策略的訂定上，或對發展醫療觀光有興趣的國家及來自國際醫療觀光旅客方面如何呈現雙贏的方面一個整體的參考及醒思。

中文關鍵詞： 醫療觀光、知覺價值、知覺利益、知覺犧牲、顧客意願

英文摘要： This study proposes and tests a research model capturing elements of perceived gain and loss that, by affecting the perceived value of medical tourism products, influence the buying intention of potential customers. Data from 301 usable questionnaires were tested against the research model using the structural equation modeling approach. The results indicated that perceived value was a key predictor of customer intentions. As for benefits, perceived medical quality, service quality and enjoyment were critical components that significantly influenced the perception of value. Regarding sacrifice, the effects of perceived risk on perceived value were significant. The findings can assist governments in developing policies that increase medical destination promotion and provide insights into research on how destination countries can make medical tourism a win/win option for themselves and international patients.

英文關鍵詞： Medical tourism, Perceived value, Perceived benefits, Perceived sacrifice, Customer intention

探討影響大陸旅客來台參與醫療觀光之關鍵因子：由顧客知覺價值的理論觀點切入

Factors influencing customers' purchase intention toward medical tourism in Taiwan: A customer value perspective

計畫編號：NSC 100-2410-H-216 -010 -

執行期間：100 年 08 月 01 日至 101 年 07 月 31 日

計畫主持人：王秀媛 中華大學餐旅管理系

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摘要

本研究的目的是提出一個包含兩大部份(知覺利益與犧牲)因子的研究模式，並進而驗證這些因子會透過顧客的知覺價值並進而影響其對醫療觀光旅遊商品的購買意願。研究採調查法搜集實證資料，共計301份有效問卷獲自中國大陸，接著採用結構方程模式對資料進行分析，研究結果顯示顧客的知覺價值是顧客購買意願的關鍵預測因子，關於知覺利益方面，顧客的知覺醫療品質、知覺服務品質及知覺享樂是重要影響其知覺價值的因子，在知覺犧牲的因子方面，研究發現知覺風險具關鍵影響知覺價值。研究結果可提供政府無論是為促進醫療觀光旅遊策略的訂定上，或對發展醫療觀光有興趣的國家及來自國際醫療觀光旅客方面如何呈現雙贏的方面一個整體的參考及醒思。

關鍵字：醫療觀光、知覺價值、知覺利益、知覺犧牲、顧客意願

Abstract

This study proposes and tests a research model capturing elements of perceived gain and loss that, by affecting the perceived value of medical tourism products, influence the buying intention of potential customers. Data from 301 usable questionnaires were tested against the research model using the structural equation modeling approach. The results indicated that perceived value was a key predictor of customer intentions. As for benefits, perceived medical quality, service quality and enjoyment were critical components that significantly influenced the perception of value. Regarding sacrifice, the effects of perceived risk on perceived value were significant. The findings can assist governments in developing policies that increase medical destination promotion and provide insights into research on how destination countries can make medical tourism a win/win option for themselves and international patients.

Keywords: Medical tourism, Perceived value, Perceived benefits, Perceived sacrifice, Customer intention

Introduction

Today, many people travel overseas to obtain medical, dental and surgical care, while at the same time taking a holiday abroad. Traditionally, tourism refers to the activities of persons traveling to and staying in places outside their usual environment for the main purposes of leisure, relaxation and pleasure. However, in the new age of globalization, the lifestyle of

human beings is changing rapidly. With the speedy development of international aviation technology, industries that once had clear regional characteristics are now developing service modes that break with tradition. Medical tourism is one of these promising industries because it has big economic potential, involves trade in services and represents the union of at least two divisions: medicine and tourism (Bookman and Bookman, 2007). Medical tourism in this study refers to “travel across international borders to seek healthcare while also taking a holiday in the foreign country.” As such, medical tourism goes beyond the usual relaxation, exercise and visits to spas that might be included in a recuperative vacation, to include medical and surgical interventions. Thus defined, medical tourism is a burgeoning industry that has taken the attempt of tourists to attain better health while on holiday to a whole new level (Connell, 2006).

In today’s highly global competitive environment, a number of countries, such as Belarus, Latvia, Lithuania, Costa Rica, India, Malaysia, Singapore and Thailand, have responded to the opportunities offered by medical tourism to provide cross-border medical care for international visitors (Connell, 2006; Lunt and Carrera, 2010). To become a player in medical tourism, Taiwan’s Department of Health formed an initiative in 2007 to facilitate medical tourism (Report from New America Media, 2008). The program consists of 20 hospitals that work with hotels, airlines and travel agencies, as well as the government, to attract medical tourists. If they are successful, Taiwan is poised to become a destination for medical tourism much like Thailand, India and Singapore, three of the most popular countries for medical tourism in Asia. Data for the number of international medical tourists traveling to Taiwan is sparse because the medical tourism program is new and Taiwan’s government has not tracked international medical visitors separately from immigrant workers. But the anecdotal evidence indicates that very few patients come from outside of Taiwan solely for the purpose of medical treatment. One of the most significant barriers is language, because most hospitals in Taiwan cannot offer language translation services. For this reason, according to a large number of doctors involved in the medical tourism program, patients from mainland China are the most likely to participate in medical service in Taiwan (Report from New America Media, 2008). Thus, putting aside their political differences, many hospitals in Taiwan compete for patients from mainland China, because their language and culture are similar enough to ensure the patients’ comfort. Starting in July 2009, the Taiwanese government began direct weekend charter flights that could result in as many as 3,000 visitors from mainland China each day. Even so, the factors influencing the intention of potential tourists to travel to Taiwan for medical treatment are still unclear. To attract more medical tourists, hospitals and interested parties need to understand the factors affecting their purchase intentions.

The purposes of this study are thus twofold: (1) to propose and examine a research model capturing both gain and loss elements that could influence potential medical tourists’ perceived value; and (2) to investigate the impact of perceived value on potential tourists’

behavioral intention to travel for medical care to a foreign destination, in this case Taiwan. Additionally, this study mainly focuses on the pre-purchase stage of potential travelers. The development of such a study has value to both researchers and practitioners. It can be useful to researchers in developing and testing theories relating to medical tourism, and in helping to understand what drives the medical tourism industry. This research model can also assist governments to be better able to justify their promotional activities, especially if they have devoted a significant budget to these activities. On the proactive side, the study can assist practitioners in understanding how to use various strategies to improve their medical destination promotions.

The proposed research model

Research model

The research model for this study, shown in Figure 1, is intended to cover important features that can account for most of the variance in the intention of medical tourists. Intention, which is defined as a person’s subjective probability to perform a specified behavior, is chosen as the dependent variable for theoretical and practical reasons. According to prior research (Ajzen and Fishbein, 1980), intention has a major influence on actual behavior in mediating the effect of other determinants on behavior. Also, even though medical tourism has become common in various parts of the world, there are only a very limited number of customers who have participated in a medical tourism tour. In this study, which focuses on medical tourism in Taiwan, intention was chosen instead of actual behavior as the dependent variable because it allowed for a timely investigation of the potential behavior among the target research group. In addition, the medical services scope in this study consisted of items that are now being promoted by the Taiwan Medical Tourism Development Association. These items include: psychotherapy (e.g., spiritual journey), medical hot springs (e.g., medical SPA), mini cosmetic surgery (e.g., beauty journey), health examination (e.g., healthcare journey), and dental treatment (e.g., artificial dental implant, teeth whitening journey).

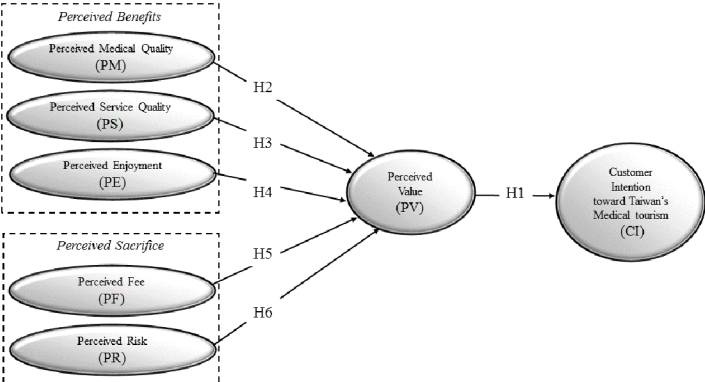


Figure 1: Research Model.

From a customer choice perspective, prior research has indicated that perceived value may be a predictor of the intention to visit a destination (Petrick *et al.*, 2001), revisit golf resorts (Petrick, 1999) and visit hotels (Kashyap and Bojanic, 2000). Therefore, in the context of medical tourism, this study expects that a high evaluation of perceived value among potential tourists will cause an increase in the intention to purchase or participate in medical tourism products or tours. The following hypothesis summarizes this expectation:

H1. The overall perceived value of medical tourism has a positive effect on the intention of potential customers to participate in these tourism activities.

This study suggests that there are three beneficial components of perceived value among potential medical tourists: *perceived medical quality*, *perceived service quality* and *perceived enjoyment*.

Perceived medical quality in this study is defined as the degree to which a potential tourist believes that hospitals and medical tourism agencies can provide patients with a technologically advanced medical environment, a high level of medical standards and expertise and a medical tourism package of high quality. Prior research (Bies and Zacharia, 2007; Connell, 2006) has indicated that to become a medical tourist destination, third-world countries, such as India and Thailand, have strived to provide state-of-the-art medicine in all disciplines, and to provide this service in luxurious hospitals. In view of these findings, this study anticipates that from the perspective of potential customers travelling to a foreign destination for medical care, a higher level of medical quality will be associated with a higher value of medical tourism products. Thus, the following hypothesis is formulated:

H2. Perceived medical quality has a positive effect on the perceived value of medical product offerings among potential customers.

Service quality cannot be objectively assessed, unlike the case with manufactured goods, and therefore remains a rather elusive construct (Zeithaml *et al.*, 1990). Available literature offers numerous service quality measurement methods; among these, the SERVQUAL instrument (Parasuraman *et al.*, 1988b) has attracted the greatest attention on account of its claim to being able to assess the relevant dimensions of perceived service quality, regardless of which service industry is being considered (Gilbert and Wong, 2002; Tsang and Qu, 2000). Thus, based on SERVQUAL, this study defines perceived service quality as the degree to which a potential tourist thinks that medical tourism agencies and hospitals have the ability to perform the promised service, provide prompt service, resolve customer complaints and offer flexible services according to individual demands. Since prior research has confirmed that perceived service quality can predict the customer's value perception (Walker *et al.*, 2001), this study hypothesizes the following:

H3. Perceived service quality has a positive effect on the perceived value of medical service offerings among potential customers.

For medical tourism products and services that include both medical procedures and

vacation tours, emotional perceptions such as perceived enjoyment should be considered for their ability to influence consumption decisions. In this study, perceived enjoyment is defined as the extent to which medical tourism can make potential tourists feel pleased, relaxed, joyful and even fantastic. Prior studies (Arnold and Reynolds, 2003; Lin *et al.*, 2005) have confirmed that a positive emotional state has a significant influence on a customer's value perception. Therefore, this study formulates the following hypothesis:

H4. Perceived enjoyment has a positive effect on the perceived value of medical product and service offerings among potential customers.

Perceived sacrifice consists not only of actual monetary costs but also of non-monetary costs. Hence, this study assumes that among potential customers, the total perceived sacrifice of participating in medical tourism includes components such as *perceived fee* and *perceived risk*.

Perceived fee in this study refers to the monetary transaction costs of purchasing a medical tourism product. This fee includes the cost of flights, accommodation, a luxury holiday, medical treatment, etc. One of the primary reasons people travel abroad for medical purposes is to save on medical treatment costs in their home country (Connell, 2006). Some studies have indicated that price is always a key factor for consumers when purchasing hotel accommodations (Law and Chung, 2003; Liang and Law, 2003) and tourism products (Law, 2003). It has been contended that perceived fee directly influences perceived value (Chang and Wildt, 1994; Dodds *et al.*, 1991; Zeithaml, 1988), and that a higher perception of monetary costs is related to a lower perception of value (Chang and Wildt, 1994). Thus, based on the aforementioned findings, this study presents the following hypothesis:

H5. Perceived fee has a negative effect on the perceived value of medical product and service offerings among potential customers.

Perceived risk in this research refers to certain types of risk, such as the unavailability of post-operative care and the occurrence of malpractice, medical side-effects and complications, which are considered when potential customers decide to participate in medical tourism. Bies and Zacharia (2007), Crooks *et al.* (2010) and Leahy (2008) pointed out that there are unique risks associated with seeking medical care overseas, and considered that the main risks include: exposure to medical malpractice abroad, difficulties obtaining follow up care and the danger of infectious disease transmission. Therefore, this study proposes a final hypothesis:

H6. Perceived risk has a negative effect on the perceived value of medical tourism product and service offerings among potential customers.

Research methodology

Measurement development

To ensure the content validity of the scales in empirical research, items selected must represent the concept regarding which the generalizations are made. This study developed the

greater portion of the questionnaire items by referring to several previous studies. However, very few items were directly adapted from prior studies.

This study initially developed a 33-item questionnaire. In order to confirm the content validity of the questionnaire, a discussion was performed, three professionals and five graduate students, all of whom specialized in the tourism and hospitality field. As a result, 2 items were omitted, leaving 31 items to constitute a complete scale for this study. The original question items were in English; however, a bilingual expert was invited to translate them into Chinese to ensure the validity of the questionnaire.

Data collection

This study aimed to recruit potential mainland Chinese customers as the research subjects for convenience sake. Regarding the sampling method, it was considered unfeasible to conduct a random sampling of all the potential medical tourists in mainland China due to the lack of a reliable sampling frame. Thus, this study used a non-random sampling technique (i.e., convenience sampling) to collect the sample data. The employees of Perfect (China) Co. Ltd. were chosen as the research subjects.

The main survey was conducted in a formal meeting inside the company. About 600 employees, all of whom had participated in the group's previous travel in Taiwan and who represented in total twenty-three different provinces of mainland China, attended this company meeting. A total of 435 responses were received. Of the 435 responses, 134 questionnaires were invalid or incomplete, which left 301 usable responses, for a valid response rate of 69%. Among these responses, a total of 61.8% of the respondents were female.

Data analysis and results

Assessment of measurement model

A confirmatory factor analysis via AMOS 17.0 was conducted to test the measurement model. All of the model-fit indices exceeded their respective common acceptance levels suggested by previous research, thus demonstrating a fairly good fit of the measurement model with the data collected. This study therefore proceeded to evaluate the psychometric properties of the measurement model, namely, its reliability, convergent validity and discriminant validity.

Reliability and convergent validity of the factors were calculated by composite reliability and by the average variance extracted. All of the factor loadings of the items in the research model were greater than 0.70. Thus, all of the factors in the measurement model had adequate reliability and convergent validity.

To test discriminant validity, this study compared the shared variance between factors with the average variance extracted from the individual factors. This analysis exhibited that the shared variances between factors were lower than the average variance extracted of the

individual factors, thus confirming discriminant validity. In brief, the measurement model demonstrated adequate reliability, convergent validity and discriminant validity.

Structural model estimation and hypotheses testing

A similar set of model-fit indices was used to examine the structural model. The six common model-fit measures of the structural model also exceeded their respective common acceptance levels suggested by previous research. Figure 2 shows the standardized path coefficients for all of the respondents in the hypothesized model. Altogether, the model accounted for around 38% of the variance in perceived value and 49% of the variance in customer intention, with perceived enjoyment exerting a stronger direct effect on perceived value than perceived medical quality, perceived service quality, and perceived risk.

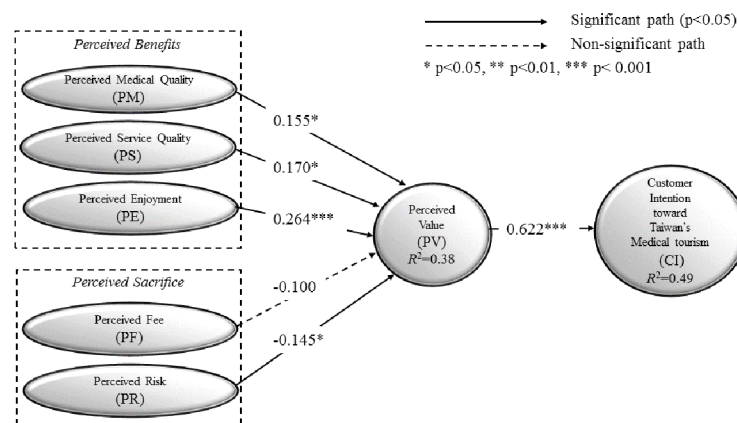


Figure 2: Results of structural modeling analysis.

Discussion

From the perspective of the research subjects in this study, three constructs measuring perceived benefits: perceived medical quality, service quality and enjoyment, had a significant, positive influence on perceived value. Previous research supports the finding that perceived medical quality plays a dominant role in evaluating the value of medical tourism (Bies and Zacharia, 2007). Thus, it is believed that to enhance a medical tourism package, service providers need to give close attention to several dimensions related to the development of medical quality.

In line with prior research on the consumer perception of value (Walker *et al.*, 2001), the results of this study revealed that perceived service quality has a significant influence on customers' value perception; this means that the majority of potential medical tourists are concerned about whether or not medical service providers can provide them with promised and prompt services, resolve their complaints and offer flexible services based on their demands. If the process of medical tourism entails slow, inflexible services and unsolvable complaints, then the benefits will be greatly decreased. Thus, medical travel providers should improve their reliability, responsiveness and level of consumer assurance in order to increase

the perceived value of their services among potential customers.

As expected, the greatest impact on the perceived value of tourism products and services in this study was derived from perceived enjoyment. Traditionally, affective gratification has been the main consumption goal for many hedonic services, including leisure travel (Duman and Mattila, 2005). Creating a consumption experience that is pleasurable is likely to induce positive customer reactions. Medical tourism facilitators are, therefore, advised to continue promotions emphasizing value in terms of pleasure, relaxation and enjoyment for potential customers.

When considering the effect of perceived sacrifice, the results show that perceived risk has a significant negative influence on perceived value; this means that the majority of potential medical tourists think that medical treatment should be safe. However, compared to other types of medical tourism products, those investigated by this study (e.g., psychotherapy, medical hot springs, mini cosmetic surgery, health examinations and dental treatment) are less risky. Potential medical tourists still hope that traveling for medical treatment will imply zero risk.

In contrast to this study's expectation, it was found that one of the perceived sacrifice constructs, namely, the perceived fee, did not have a significant influence on perceived value. It has already been suggested, and previous research confirms (Bookman and Bookman, 2007), that travel for medical care is positively related to income. The larger the personal disposable income of the medical tourist, the more money is available for nonessential consumption, including travel for elective procedures and diagnostics. However, justifying and validating the foregoing explanations and propositions still requires further investigation.

The findings and implications of this study are important for government policy makers for they point to several key factors that potential medical tourists should consider when choosing a destination country for medical care.

Limitations and Conclusions

This study has some limitations that should be addressed in future studies. First, the findings and their implications were obtained from only one survey that targeted a certain group of tourists in mainland China. Therefore, a validation using another large sample gathered elsewhere is required to further generalize the findings. Second, the sampling method has a potential bias because a sample of willing respondents (i.e., convenience sample) is often not as generalizable as a sample obtained by random selection. Future research efforts might thus be conducted to test the proposed model via random sampling.

The major contributions of this study can be summarized as follows: First, by combining various insights from the tourism and marketing field, this study proposes a research model that includes both the benefit and sacrifice measures which seem to be highly relevant to the purchase of medical tourism products. The proposed model is original and there is no existing article that presents a model with the same constructs and relationships among constructs as

those which have been demonstrated. Second, different from prior conceptual papers, which contribute to the research on medical tourism primarily through a book and literature review, this article tested the proposed model by conducting an empirical investigation using the structural equation modeling approach. Third, the results showed the importance of perceived value in explaining the purchase intention of potential consumers toward medical tourism products and services; this suggests that an investigation of these products and services by the existing marketing literature would be beneficial, as it would increase the present understanding of the drivers of medical tourism. In conclusion, the findings of this empirical study serve not only to help medical tourism practitioners understand the perceptions of potential customers, but they also provide insights into research on how destination countries can make medical tourism a win/win option for themselves and their international patients.

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國科會補助計畫衍生研發成果推廣資料表

日期:2012/07/14

國科會補助計畫	計畫名稱: 探討影響大陸旅客來台參與醫療觀光之關鍵因子: 由顧客知覺價值的理論觀點切入
	計畫主持人: 王秀媛
	計畫編號: 100-2410-H-216-010- 學門領域: 休閒遊憩
無研發成果推廣資料	

100 年度專題研究計畫研究成果彙整表

計畫主持人：王秀媛		計畫編號：100-2410-H-216-010-					
計畫名稱：探討影響大陸旅客來台參與醫療觀光之關鍵因子：由顧客知覺價值的理論觀點切入							
成果項目		量化			單位	備註（質化說明：如數個計畫共同成果、成果列為該期刊之封面故事...等）	
		實際已達成數（被接受或已發表）	預期總達成數（含實際已達成數）	本計畫實際貢獻百分比			
國內	論文著作	期刊論文	0	0	100%	篇	
		研究報告/技術報告	0	0	100%		
		研討會論文	0	0	100%		
		專書	0	0	100%		
	專利	申請中件數	0	0	100%	件	
		已獲得件數	0	0	100%		
	技術移轉	件數	0	0	100%	件	
		權利金	0	0	100%	千元	
	參與計畫人力（本國籍）	碩士生	1	1	100%	人次	
		博士生	0	0	100%		
		博士後研究員	0	0	100%		
		專任助理	0	0	100%		
國外	論文著作	期刊論文	0	1	100%	篇	
		研究報告/技術報告	0	0	100%		
		研討會論文	0	1	100%		
		專書	0	0	100%	章/本	
	專利	申請中件數	0	0	100%	件	
		已獲得件數	0	0	100%		
	技術移轉	件數	0	0	100%	件	
		權利金	0	0	100%	千元	
	參與計畫人力（外國籍）	碩士生	0	0	100%	人次	
		博士生	0	0	100%		
		博士後研究員	0	0	100%		
		專任助理	0	0	100%		

<p>其他成果 (無法以量化表達之成果如辦理學術活動、獲得獎項、重要國際合作、研究成果國際影響力及其他協助產業技術發展之具體效益事項等，請以文字敘述填列。)</p>	<p>無</p>
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	成果項目	量化	名稱或內容性質簡述
科 教 處 計 畫 加 填 項 目	測驗工具(含質性與量性)	0	
	課程/模組	0	
	電腦及網路系統或工具	0	
	教材	0	
	舉辦之活動/競賽	0	
	研討會/工作坊	0	
	電子報、網站	0	
	計畫成果推廣之參與(閱聽)人數	0	

國科會補助專題研究計畫成果報告自評表

請就研究內容與原計畫相符程度、達成預期目標情況、研究成果之學術或應用價值（簡要敘述成果所代表之意義、價值、影響或進一步發展之可能性）、是否適合在學術期刊發表或申請專利、主要發現或其他有關價值等，作一綜合評估。

1. 請就研究內容與原計畫相符程度、達成預期目標情況作一綜合評估

達成目標

未達成目標（請說明，以 100 字為限）

實驗失敗

因故實驗中斷

其他原因

說明：

2. 研究成果在學術期刊發表或申請專利等情形：

論文： 已發表 未發表之文稿 撰寫中 無

專利： 已獲得 申請中 無

技轉： 已技轉 洽談中 無

其他：（以 100 字為限）

3. 請依學術成就、技術創新、社會影響等方面，評估研究成果之學術或應用價值（簡要敘述成果所代表之意義、價值、影響或進一步發展之可能性）（以 500 字為限）

本研究結果顯示顧客的知覺價值是顧客購買意願的關鍵預測因子，關於知覺利益方面，顧客的知覺醫療品質、知覺服務品質及知覺享樂是重要影響其知覺價值的因子，在知覺犧牲的因子方面，研究發現知覺風險具關鍵影響知覺價值。研究結果可提供政府無論是為促進醫療觀光旅遊策略的訂定上，或對發展醫療觀光有興趣的國家及來自國際醫療觀光旅客方面如何呈現雙贏的方面一個整體的參考及醒思。