

Business Plan - Healthcare Services Belgium - Antwerp



Den Haag

18-03-1999

Market analysis.

- 34000 Registered HC Professionals
 - 17000 Working in Hospitals
 - 24000 Private Practices
 - 9000 Computer systems
 - 8000 Electronic Healthcare Record Users
- 300 Clinical laboratories (fully computerised)
- 600 Hospitals, elderly homes, Psychiatric Institutions
- Estimated number of messages exchanged = 9.000.000/day
- GP receives 10 letters/day (average).

Healthcare Information Systems Market

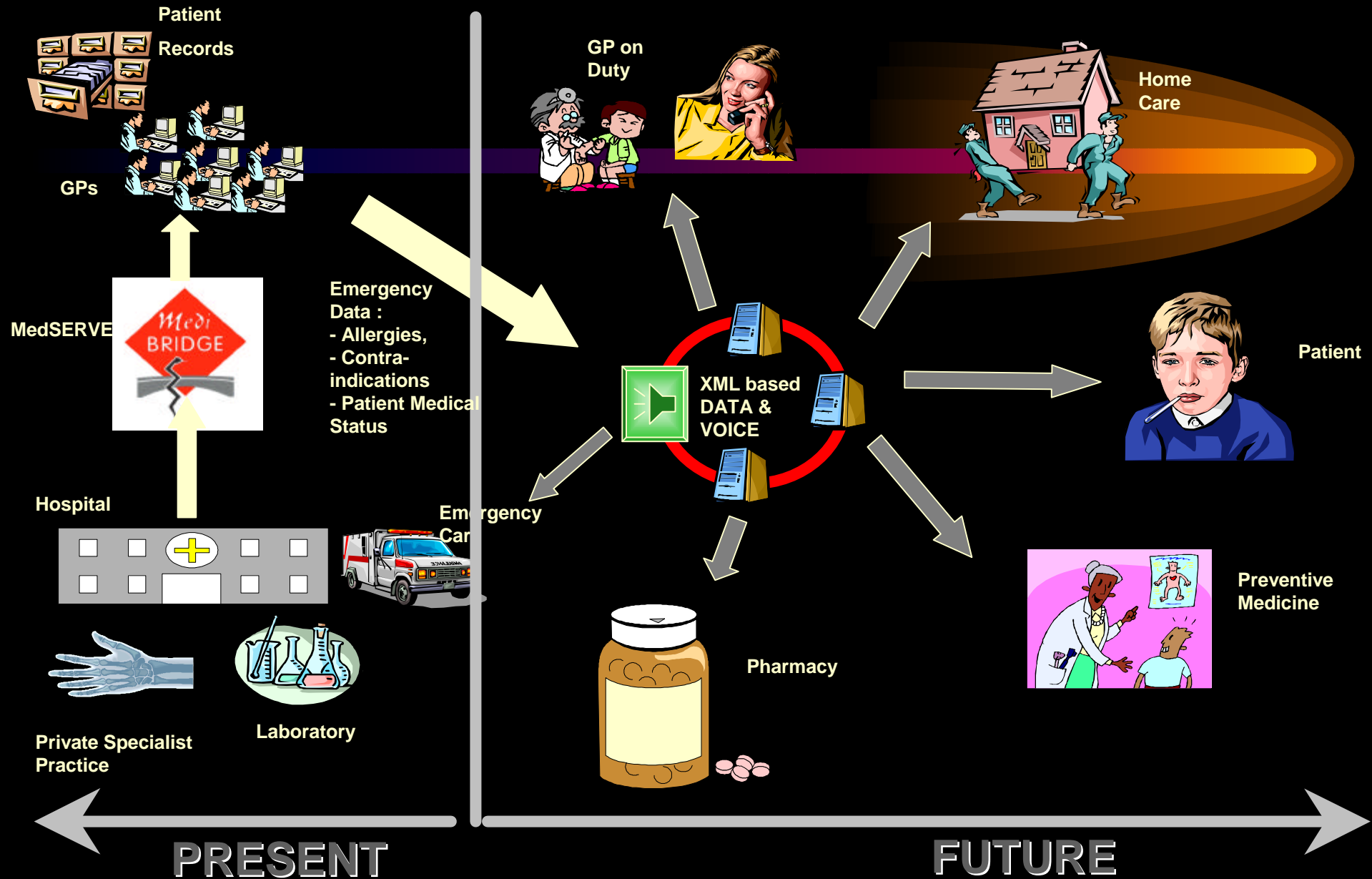
- 82 registered Electronic Healthcare Record systems for General Practitioners (EHCR).
- 12 Laboratory Information Systems (LIS).
- 8 Radiology Information Systems (RIS).
- 9 Hospital Information Systems (HIS).
- Proprietary systems for all categories.

Evolution - Market trends



- 30% growth/year EHCR systems.
- Central EHCR throughout the Hospital - implementation ongoing.
- 5 years from now - HC Professionals Market potential (24.000) will become served market (8.000)
- Proliferation of EHCR will decrease from 82 to +/- 40 over the next 5 years
- EHCR for patients at home will appear in the next 5 year.

Market Evolution Next 5 years



SWOT ANALYSIS



- Strength

- Separation of services in patient related data exchange and others
- Simple pricing structure see Postal Services
- Representation/ acceptance in the healthcare market place

- Weaknesses

- dependencies of third parties - Internet, Mailing software, browsing software
- Resources (Development) versus rapid evolving technologies
- Inter-linking with other systems - pricing structure

SWOT Analysis (cont'd)



- Opportunities

- Liberalisation of Telecom in Europe => Price advantage
- network technology evolution (ISDN, ATM) will generate new services (Image transfer)

- Threats

- Taxes for Electronic Information Interchange
- Ordre of Physicians
- Privacy Protection Legislation
- Lack of standardisation

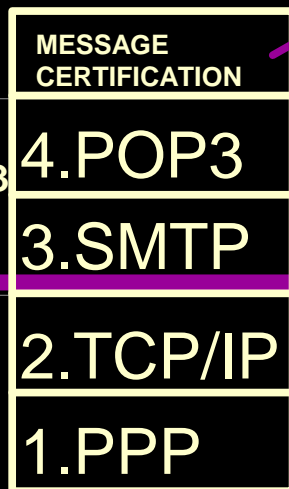
Technical Infrastructure

Overall Architecture of MedSERVE

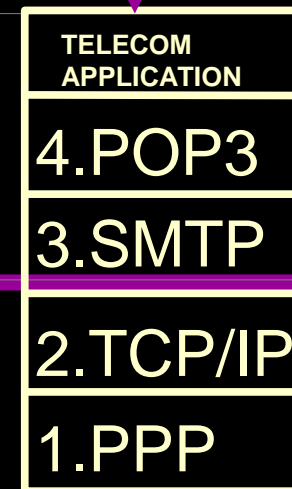
MEDICAL APPLICATION

Proprietary application or TTP services.

Any SMTP/POP3 Mail Server



Specific Telecom Software



Direct PSTN Dial-in

Direct ISDN Dial-in

Internet

SERVER APPLICATION

CLIENT APPLICATION

Financial Plan

Financial Plan MedSERVE & MedMAIL for 5000 users. (in K?)						
Fiscal Year	1999	2000	2001	2002	2003	2004
Investment						
Office Equipment & furniture	3	3	3			
Equipment MedSERVE & MedMAIL	8	8	8	8	8	8
Telecom Infrastructure	6	6	6	6	6	6
Software Licenses	46	46	46	46	46	46
Total investment (depreciated 3 year)	63	63	63	60	60	60
Operational Cost						
Personnel + Management	245	255	265	276	287	298
Infrastructure costs						
Premises, electricity, heating...	19	20	21	21	22	23
Exploitation costs						
Leased line + Access Lines (PSTN/ISDN)	8	8	8	8	8	8
Administration	18	18	18	22	22	22
Promotion & Publicity	17	12	15	17	12	15
Marketing & Documentation	8	8	8	8	8	8
Total operational cost	315	321	335	352	359	374
INCOME/REVENUE						
MedSERVE Service						
Number of Users	500	1.200	2.400	3800	4300	5000
Revenue per User 72?/year	250	600	1.200	1.900	2.150	2.500
Number of information Suppliers	30	105	180	220	260	300
Subscription fee/Infosuppliers 750?/year	8	31	57	74	88	102
Subtotal MedSERVE	258	631	1.257	1.974	2.238	2.602
TOTAL INCOME	258	631	1.257	1.974	2.238	2.602
Cashflow	-120	248	860	1.562	1.819	2.168
Cumulative		128	988	2.550	4.369	6.537

Deployment plan



- Phase 1 :
 - Identify operational Alliance (Hospitals, Specialists, GPs)
 - Start pilot via Internet on servers in Belgium
 - Typical : 3 hospitals, 10 specialists (private practices), 100 GPs = +/- 15.000 messages exchanged.
- Phase 2 (8 months):
 - Major actors in healthcare (Software Vendors, Medical Press, User groups, Telecom operator, Service Provider, Technology experts..)
 - Start company - starting capital 200 K?
 - Progress evaluation/monthly

Marketing Plan

- Pricing structure : Fixed price - NO volume or time pricing (Kbytes or seconds)
- Software distribution on CD-ROM including fully automated (Wizard type) installation.
- Pre-configured installations/EHCR present on local market.
- Highly parameter driven because of customisation requirements of HIS,LIS,RIS.
- Awareness & promotion via Medical Press articles
- Preaching in the desert - Presentations for Medical Associations (GP, Scientific) and Universities.

Operation Plans

