



INNOVATIVE BUSINESS MODELS IN HEALTHCARE

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BEEN THERE - DONE THIS!







DIGTAL HEALTH IN EUROPE

Vienna's High-Tech Incubator

Recommendations by European Experts

- Ensure clear and consistent internal and external communications, DO NOT overpromise (watch out: MDR!)
- In developing new services, ensure they are safe, effective and person-centred (as complex as this is, it's healthcare!)
- Do not simply focus on technology innovation. Give equal **consideration to service innovation** (the service design) and **business innovation** (the reimbursement models) to secure adoption and scale (Europe's healthcare is unique!!)
- Ensure that the health care workforce is supported with training and education; improve citizen participation.
- Agree on a minimum data set (GDPR!!) for disease management and have a robust data governance structure to allow data
 to flow safely and securely to where it is needed, transforming data to information and intelligence
- Utilise data-driven evidence-based practice to build trust (all professional groups, citizens) from the planning stage onwards
- Support organisations to **better understand, acquire and utilise digital tools and services** that support citizen empowerment ("the patient is the most underused resource in healthcare", Bertalan Meskó, June 2023)
- Review and refresh digital health and care strategies in light of experience, including connectivity, standards, interoperability, data governance and security, consent and trust issues.



BEEN THERE - DONE THIS!





Key Activities

What Key Activities do our Value Propositions require? Our Distribution Channels? Customer Relationships? Revenue streams?



Value Propositions

What value do we deliver to the customer? Which one of our customer's problems are we helping to solve? What bundles of products and services are we offering to each Customer Segment' Which customer needs are we satisfying?

Gain Creators

Pain Relievers



Products & Services

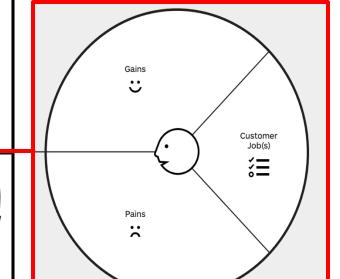
Customer Relationships

Hypotheses

What type of relationship does each of our Customer Segments expect us to establish and maintain with them? Which ones have we established? How are they integrated with the rest of our business model? How costly are they?

Customer Segments

For whom are we creating value? Who are our most important customers?



Hypotheses

Hypotheses

Hypotheses

Key Resources

What Key Resources do our Value Propositions require? Our Distribution Channels? Customer Relationships? Revenue Streams?



Hypotheses

Channels

Through which Channels do our Customer Segments want to be reached?

How are we reaching them now? How are our Channels integrated? Which ones work best? Which ones are most cost-efficient? How are we integrating them with customer routines?

Hypotheses

Hypotheses

Cost Structure

What are the most important costs inherent in our business model? Which Key Resources are most expensive? Which Key Activities are most expensive?

Hypotheses



Revenue Streams

For what value are our customers really willing to pay? For what do they currently pay? How are they currently paying? How would they prefer to pay? How much does each Revenue Stream contribute to overall revenues?

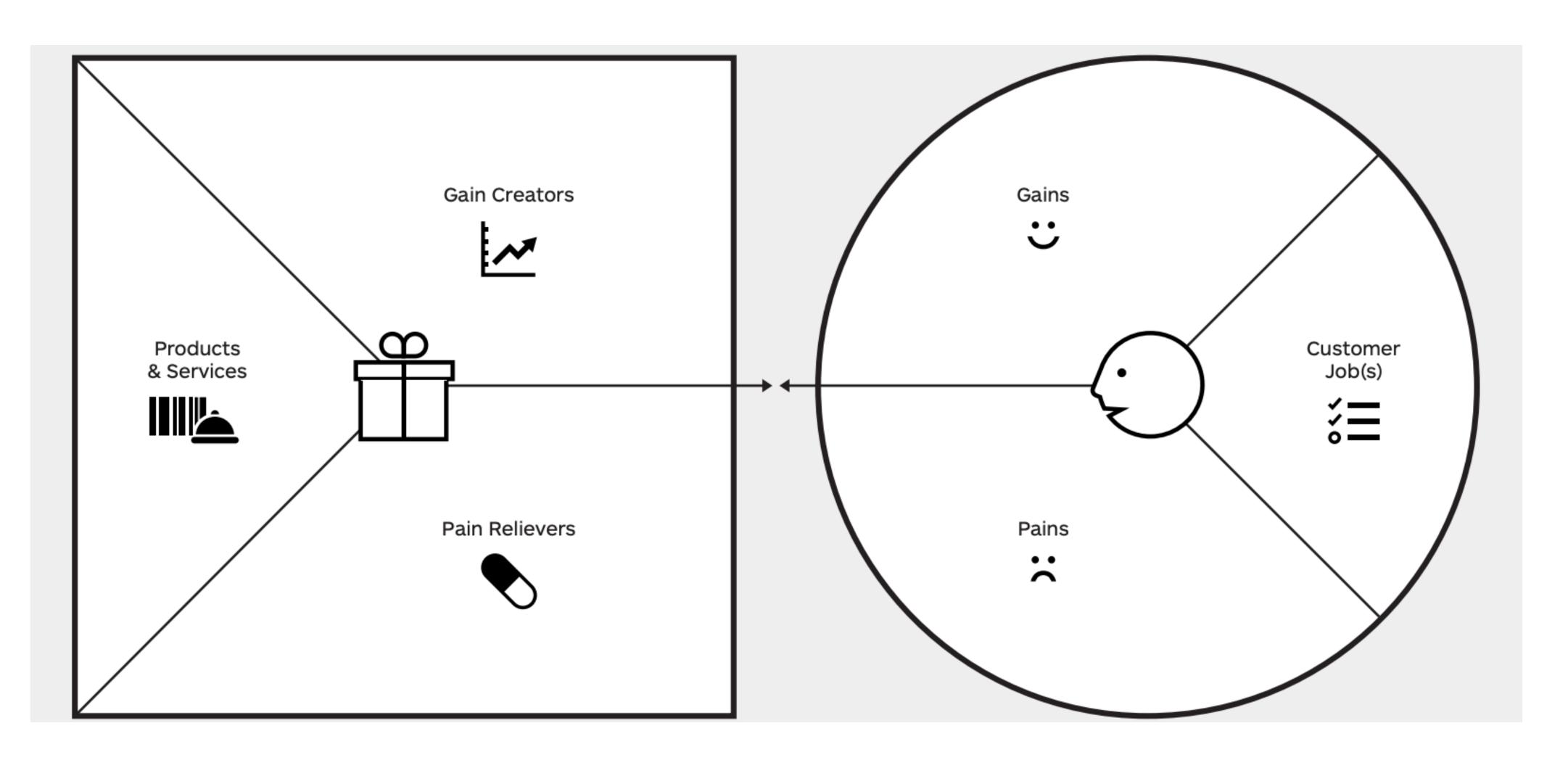
Hypotheses





BEEN THERE - DONE THIS

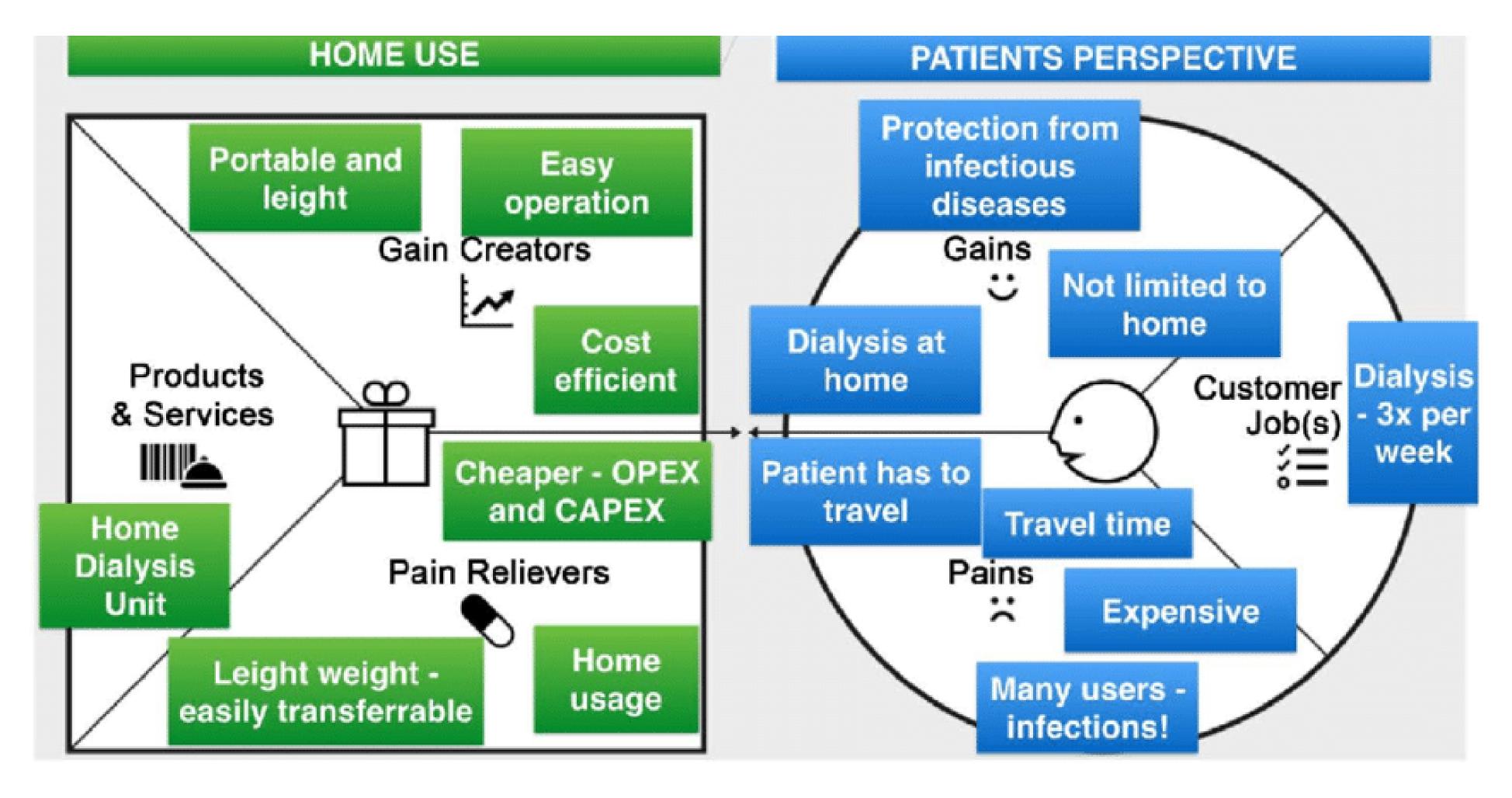






A PORTABLE DIALYSIS UNIT







HEALTHCARESYSTEM IN AUSTRIA (eit) Health



The Austrian social insurance system

The Austrian social insurance system – **NEW** structure

Main Association of Austrian Social Security Institutions			Umbrella association				
Accident insurance	Health insurance	Pension insurance	Accident insurance	Health insurance	Pension insurance		
General	9 Regional Social Health Insurance Funds	Pension	General Accident Insurance Fund	Austrian Social Health Insurance Fund	Pension Insurance Fund		
Accident Insurance Fund (AUVA)	5 Company Social Health Insurance Funds	Insurance Fund (PVA)					
	Social Insurance Fund for the self-employed (trade, commerce, industry)		(AUVA)	(ÖGK)	(PVA)		
Social Insurance Fund for the Austrian Railway and Mining Industries			Social Insurance Fund for the self-employed (trade, commerce, industry, farmers) (SVS)				
Social Insurance Fund for Farmers							
Social Insurance Fund for Public Service Wage and Salary Earners							
		Insurance Fund for Austrian Notaries	Social Insurance Fund for Public Service Wage and Salary Earners (including Austrian Railway and Mining Industries) (BVAEB)				

https://www.expatica.com/at/healthcare/healthcare-basics/austria-healthcare-79673/

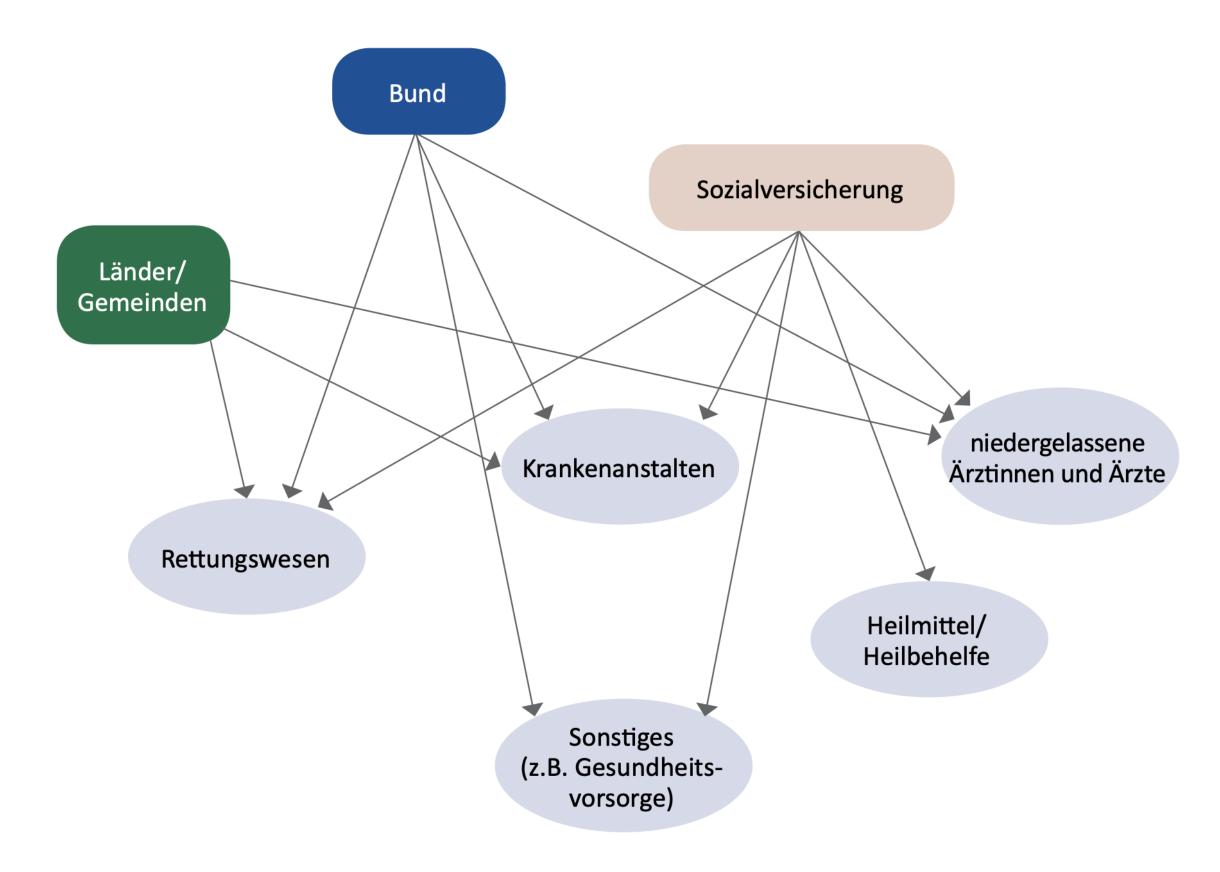


HEALTHCARESYSTEM IN AUSTRIA



The Flow of Money between Healtcare Organisations in A

Abbildung 1: Akteure und Dienstleistungen des Gesundheitssystems (vereinfachte Darstellung)



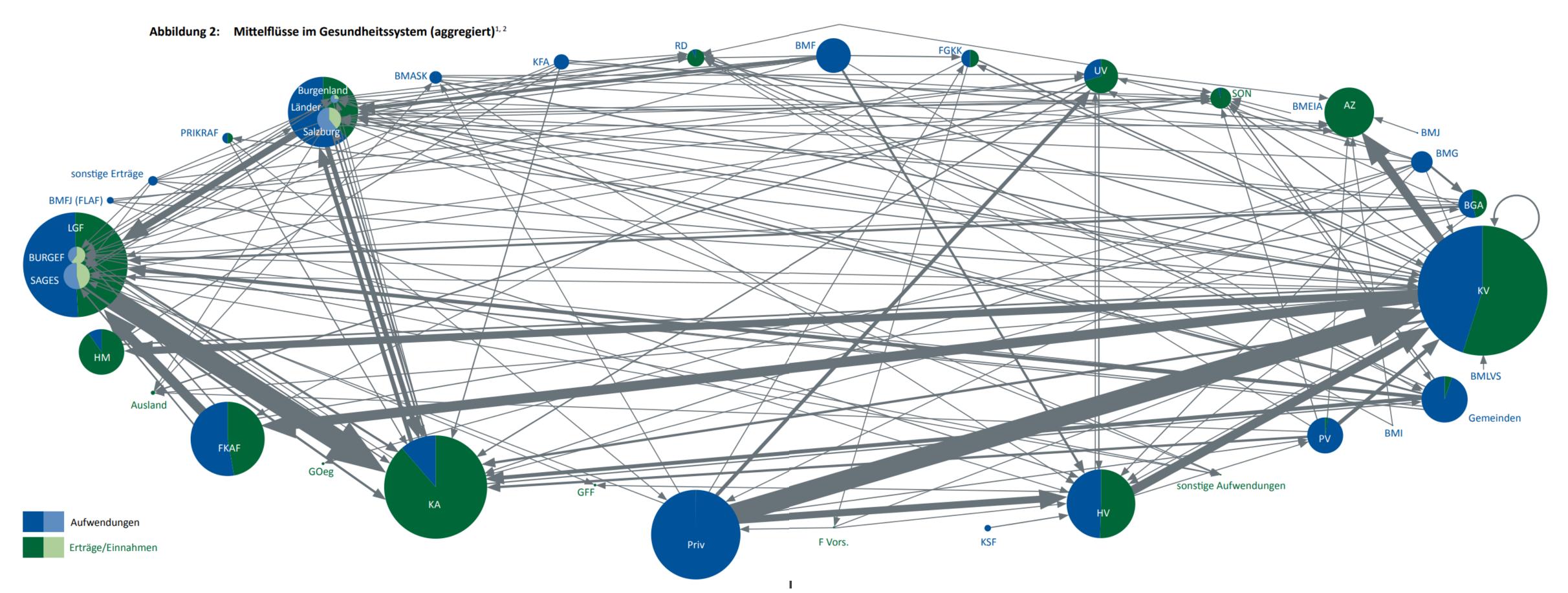
https://www.rechnungshof.gv.at/rh/home/home/Bund Mittelfluesse im Gesundheitswesen 2017 10 1.pdf



HEALTHCARESYSTEM IN AUSTRIA



The Flow of Money between Healtcare Organisations in A



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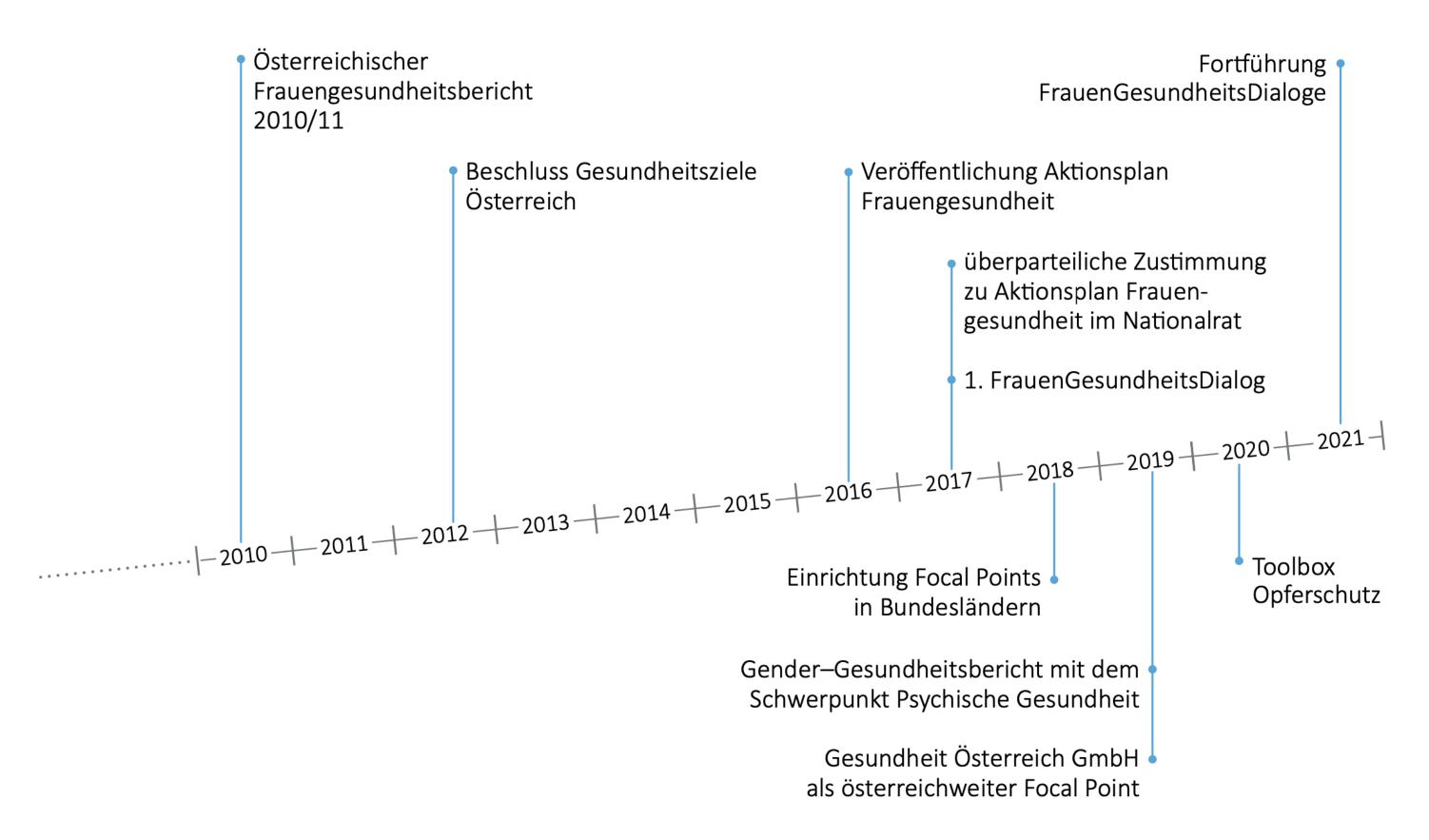


HEALTH IMPACT IN AUSTRIA

eit Health

Auditors Checking Impact of Measures

Abbildung 3: Maßnahmen Frauengesundheit



https://www.rechnungshof.gv.at/rh/home/home/2023-1_Gesundheitsfoerderung.pdf

Quelle: Gesundheitsministerium; Darstellung: RH

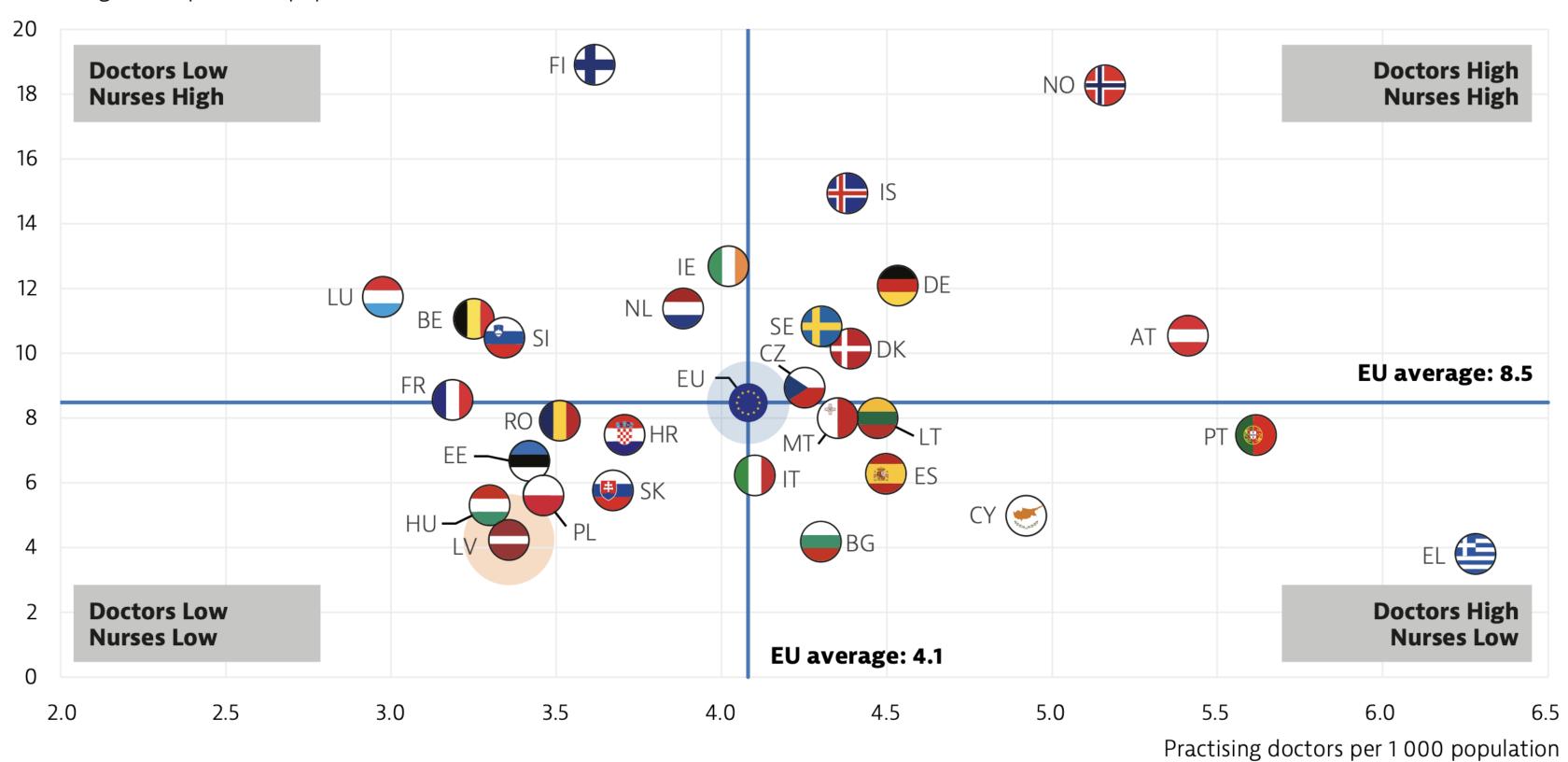


HEALTHCARE PROFESSIONALS IN LATVIA 2023



Figure 10. Latvia has fewer doctors and nurses than most EU countries

Practising nurses per 1 000 population



https://www.oecd-ilibrary.org/docserver/bf2b15d6-en.pdf



NATIONAL ACTION PLAN - LATVIA (



As an example: Alcoholism – two years earlier

Box 1.1. National Action Plan on the Consumption of Alcoholic Beverages and Limitation of Alcoholism 2020-22

On 30 July 2020 Latvia's National Action Plan on the Consumption of Alcoholic Beverages and Limitation of Alcoholism 2020-22 was adopted by the Cabinet of Ministers. Under this plan, a number of policies will be implemented:

- Labelling of alcoholic beverages with warnings against drinking while pregnant and when driving, as well as nutrient labels that include the energy content;
- Exploring whether it is possible to reduce the legal blood alcohol concentration limit for all drivers 0.2%;
- Exploring the possibility of reviewing the sales hours of alcoholic beverages, taking into account the experience of other countries;
- Prohibiting the trade promotion activities (like discounts, sales, for buying multiple alcoholic beverages at the same time or purchase of alcoholic beverages together with other products or services with a discount);
- Prohibiting TV, radio, and internet advertising of special offers (sales and discounts) for all alcohol products;
- Exploring whether it is possible to prohibit the sale of alcoholic beverages with over 22% alcohol-by-volume packaged as a single serving intended for immediate consumption;
- The plan also suggests exploring the potential for setting up a public health promotion fund, earmarking 0.5% of excise tax revenue on alcohol, tobacco and gambling and lottery taxes.

Source: Latvian Ministry of Health (2020[13]), Order of the Cabinet of Ministers No. 412 – Action Plan for Reducing Alcohol Consumption and Limiting Alcoholism 2020-22, https://likumi.lv/ta/id/316448-par-alkoholisko-dzerienu-paterina-mazinasanas-un-alkoholisma-ierobezosanas-ricibas-planu-20202022-gadam

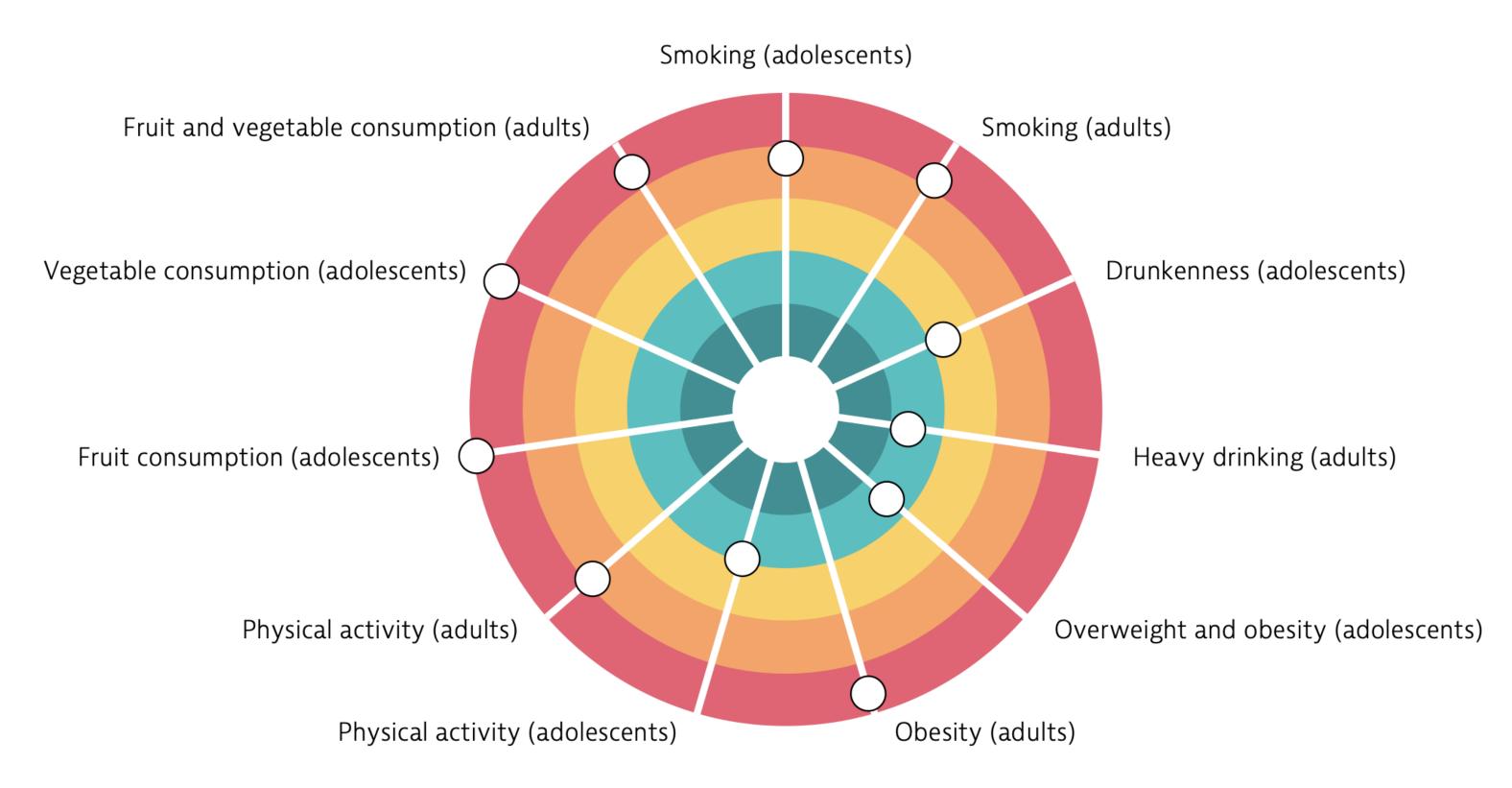
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HEALTHCARE - LATVIA 2023



Figure 7. Several behavioural risk factors are more prevalent in Latvia than in most EU countries



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HEALTH AT A GLANCE - BY OECD



Risk factors might point you to where to get started

Figure 1.3. Risk factors for health across the OECD, 2021 (or nearest year)

	LOW	OECD	HIGH		LARGEST IMPROVEMENT	
Smoking Daily smokers (% population aged 15+)	lceland 0 7.2	16.0	Türkiy 28.0	_	Norway -9.0 (53%) Estonia -8.3 (32%) Ireland -8.0 (33%)	
Alcohol Litres consumed per capita (population aged 15+)	Türkiye 0 1.4	8.6	Latvia 12.2	_ 15	Lithuania -2.6 (18%) Ireland -2.2 (19%) France -1.9 (15%)	
Obesity Population with BMI ≥ 30 (% population aged 15+)	Korea 0 4.3 (7*)	19.5	33.5 (42.8*)	_ 45	Spain -1.7 (10%) Greece -0.9 (5%)	
Air pollution Deaths due to pollution (per 100 000 population)	lceland 0 5 29	9	Poland 73	_ 100	Latvia -30.2 (34%) United Kingdom -28.4 (57%) Estonia -25.3 (68%)	

https://www.oecd-ilibrary.org/docserver/7a7afb35-en.pdf?expires=1721031100&id=id&accname=guest&checksum=F04EE760A3D4E6AC16505BB1619A99F3

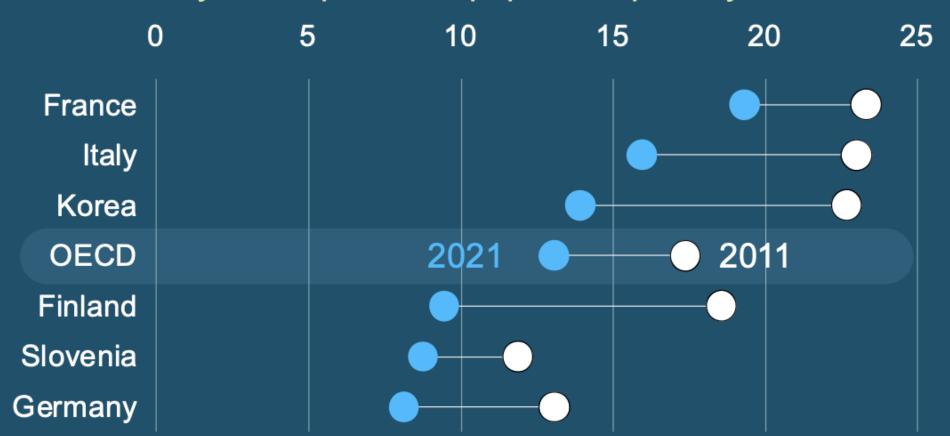


HEALTH AT A GLANCE - BY OECD





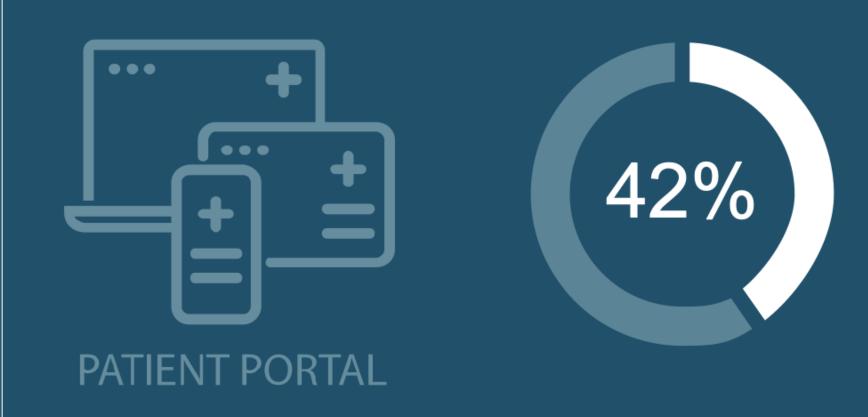
Volume of antibiotics prescribed, 2011 and 2021, Defined daily doses per 1 000 population per day



Antibiotic prescriptions have fallen in 90% of OECD countries, but antimicrobial resistance is still a major concern, and is projected to cost about USD PPP 26 per person annually.

Many countries are ill-prepared for a digital health transformation

Almost 90% of responding OECD countries reported having an online health portal in place. However, only 42% reported that the public could both access and interact with all their health data through the portal.



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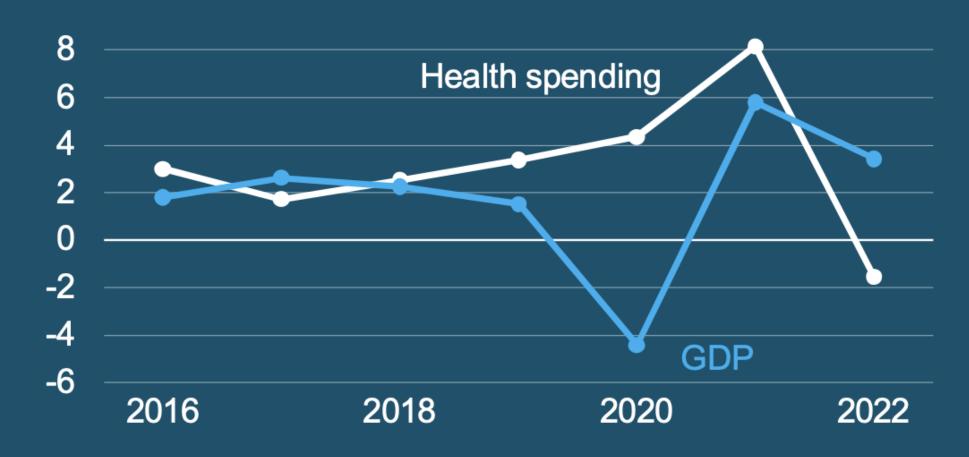


HEALTH AT A GLANCE - BY OECD



Health systems are under financial pressure

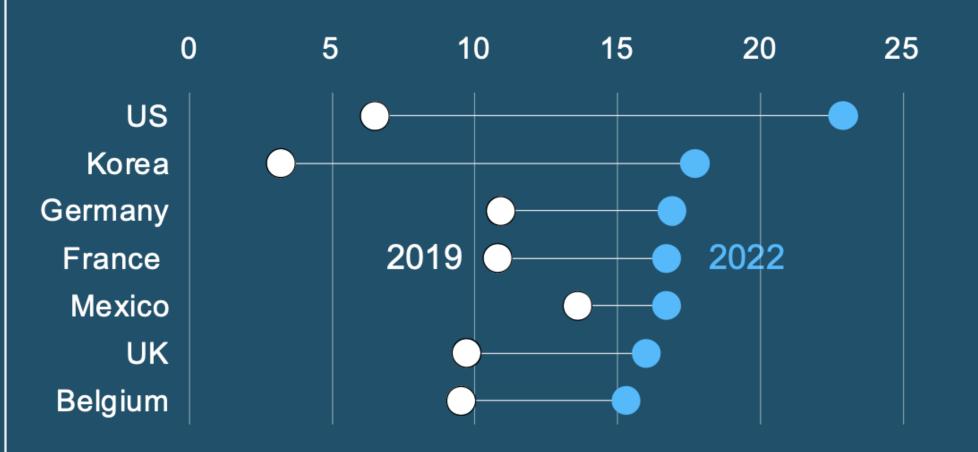
Annual real growth in health expenditure and GDP, per capita, OECD average, 2016 - 2022



Health spending as a share of GDP fell in 2022 compared to 2021 in 33 of 38 OECD countries.

Mental health has still not recovered from the pandemic

National estimates of prevalence of depression or symptoms of depression, %, 2019 - 2022 (or nearest year)



Levels of anxiety and depression have improved slightly in some countries, but still remain much higher than pre-pandemic levels.

https://www.oecd-ilibrary.org/docserver/7a7afb35-en.pdf?expires=1721031100&id=id&accname=guest&checksum=F04EE760A3D4E6AC16505BB1619A99F3



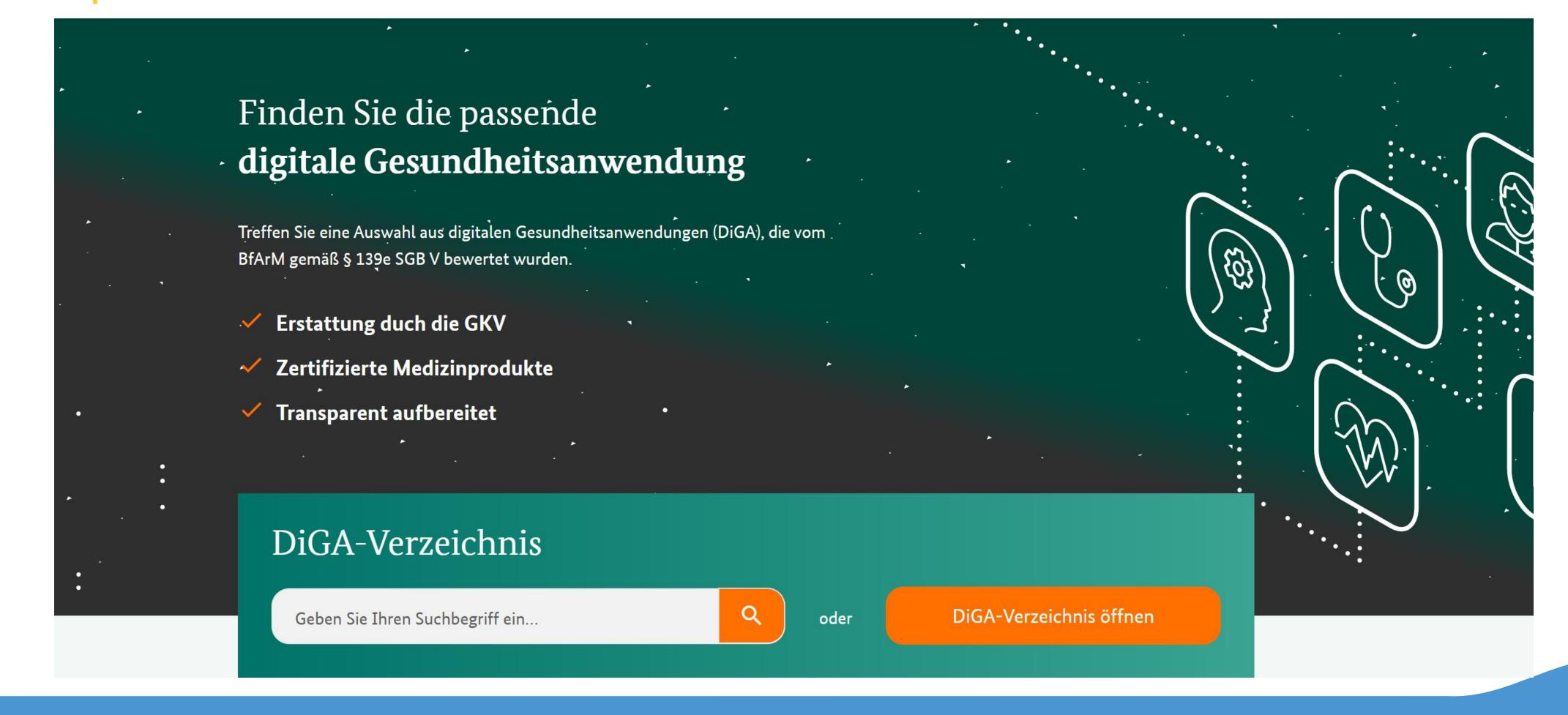
DIGA – A NEW BLUEPRINT IN EU



https://diga.bfarm.de/de/verzeichnis



Menü





HEALTHCARE AT A GLANCE

Plenty of Resources – at least for Information



Related publications













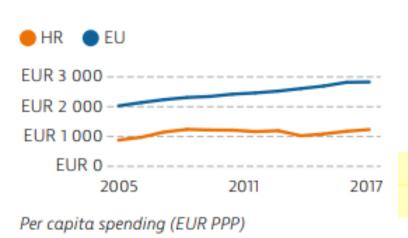
https://www.oecd.org/en/topics/sub-issues/health-workforce.html



HEALTCARE SYSTEM CROATIA

OECD analysis



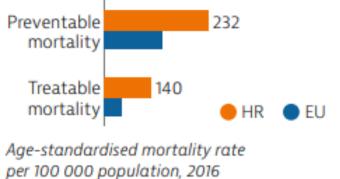


Health system

Health expenditure per capita, at EUR 1 272, was among the lowest in the EU in 2017, where the average was EUR 2 884. Croatia devotes 6.8 % of its GDP to health compared to an EU average of 9.8 %. Nevertheless, the share of public expenditure, at 83 %, is above the EU average. The benefit package is broad, but services require co-payments, for which many Croatians take out voluntary health insurance. Overall, out-of-pocket payments, excluding voluntary health insurance, accounted for 10.5 % of health expenditure in 2017, below the EU average of 15.8 %.

Effectiveness

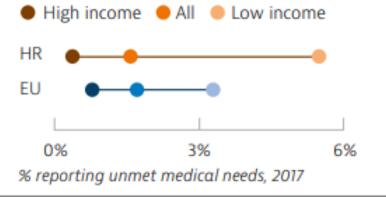
Weak intersectoral policies to address key determinants of ill health contribute to high rates of deaths from preventable and treatable causes. The quality of care is also an issue, which a national strategy is trying to address.



Accessibility

Self-reported access to health care is good, with low unmet needs for medical care. However, there is substantial variation between income groups and unmet needs are high among older people.

Geographical distance is also an access barrier.



Resilience

The small pool of social health insurance contributors, combined with high hospital debt levels, raise concerns about the financial sustainability of the health system. Strengthening governance and building support among stakeholders will be crucial to implementing reforms.

State of Health in the EU · Croatia · Country Health Profile 2019



BUSINESS MODELS EMERGING (?)



The Strings Attached in Healthcare (by far not complete)

- Regulatory strings
 - EMA, FDA, regional bodies, ...
 - Ethics commissions
 - Clinical trials
 - MDR
 - ...
- Legal strings
 - Patient protection
 - Regulations for professions (MDs, pharmacies, nurses, ..)
 - Regulations and rules in organisations (hospitals, nursing homes,)
 - National/regional regulations about e.g. genetherapy, sequencing,
 - Rules and regulations about data storage, access and ownership
 - Insurance law (private AND social insurances)
 -
 - PLUS all the others founders in other industries face, e.g. GDPR

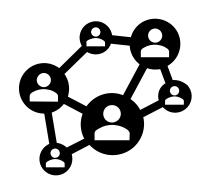


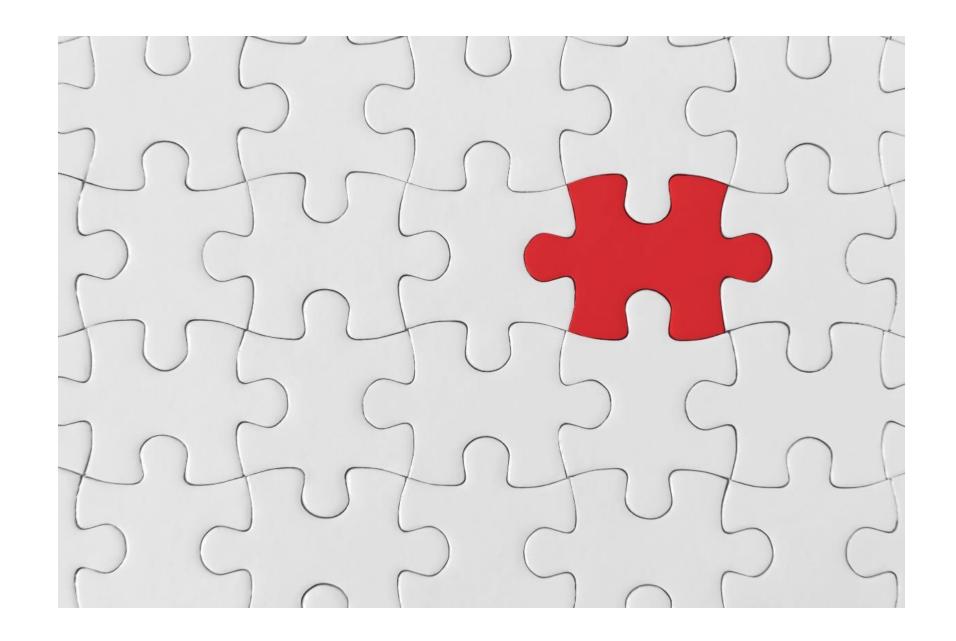
YOUR JOB TO SCALE





- Define the missing puzzle piece you fill in
- Know your rules
- Talk to (national) experts
 - Use pyramiding
- Understand who really is YOUR customer
- Understand possible network effects
- Identify ambassadors and their motivation
- Find partners







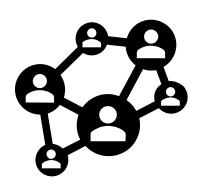


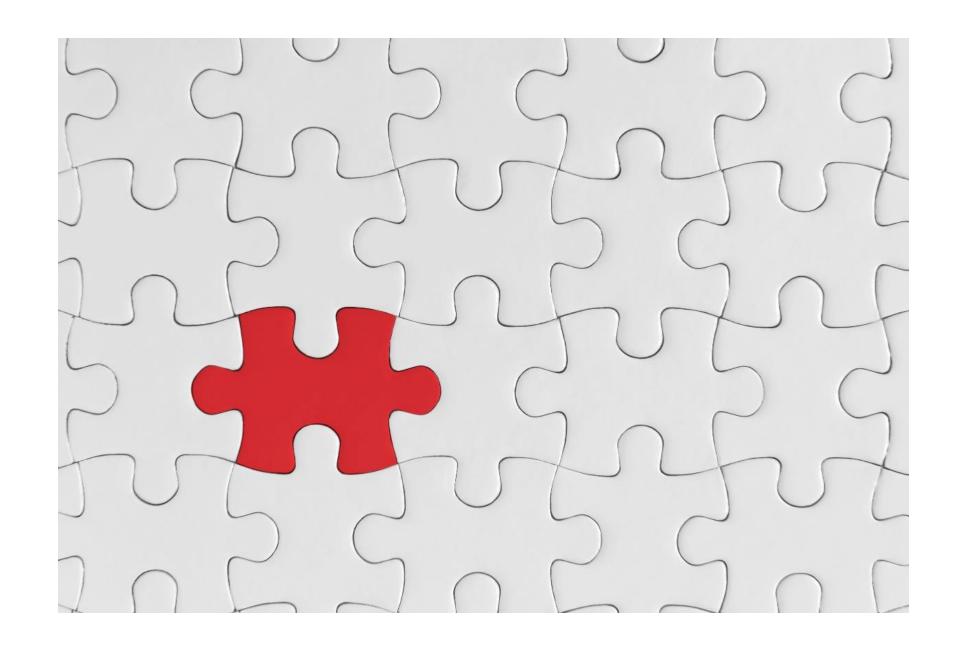
YOUR JOB TO SCALE

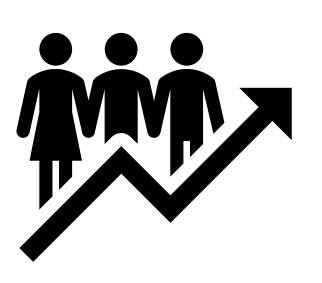




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YOUR JOB TO SCALE

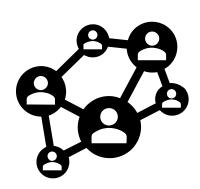


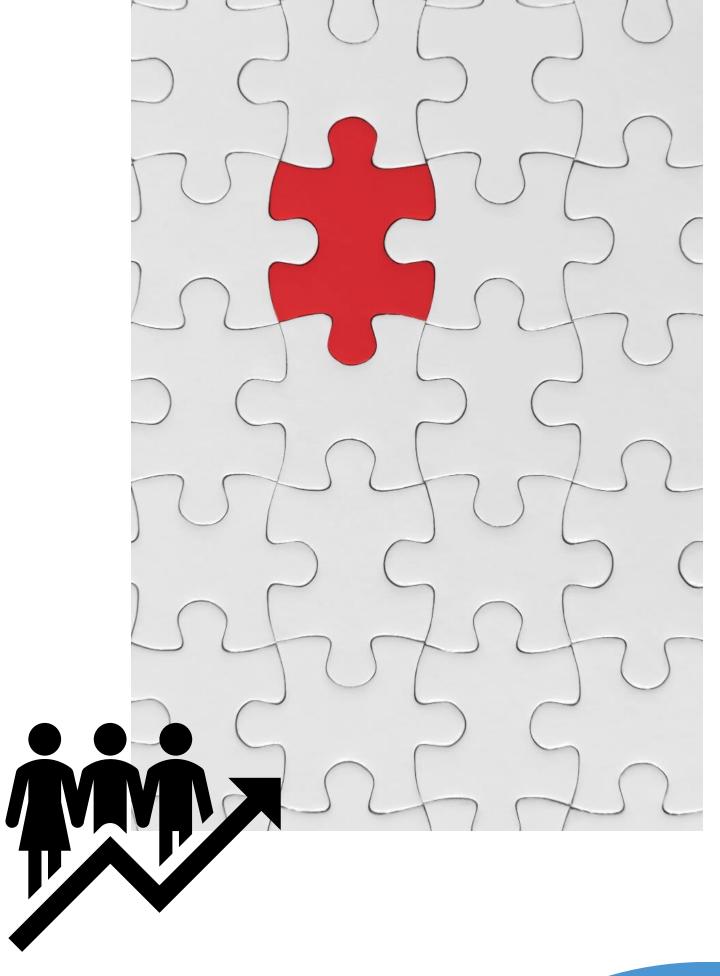


- Define the missing puzzle piece you fill in
- Know your rules
- Talk to (national) experts
 - Use pyramiding



- Understand possible network effects
- Identify ambassadors and their motivation
- Find partners







REDOING IT AGAIN AND AGAIN ...





Who are our Key Partners? Who are our key suppliers? Which Key Resources are we acquiring from partners? Which Key Activities do partners perform?

Key Activities

What Key Activities do our Value Propositions require? Our Distribution Channels? Customer Relationships? Revenue streams?

What value do we deliver to the customer? Which one of our customer's problems are we helping to solve? What bundles of products and services are we offering to each Customer Segment'

Value Propositions

Which customer needs are we satisfying?

Products & Services

Customer Relationships

What type of relationship does each of our Customer Segments expect us to establish and maintain with them? Which ones have we established? How are they integrated with the rest of our business model?

How costly are they?



For whom are we creating value? Who are our most important customers?

Hypotheses



Customer Job(s)

Hypotheses

Key Resources

What Key Resources do our Value Propositions require? Our Distribution Channels? Customer Relationships? Revenue Streams?



Channels

Through which Channels do our Customer Segments want to be reached?

How are we reaching them now? How are our Channels integrated? Which ones work best? Which ones are most cost-efficient? How are we integrating them with customer routines?

Hypotheses



Pains

Hypotheses

Hypotheses

Hypotheses

Cost Structure

What are the most important costs inherent in our business model? Which Key Resources are most expensive?



Revenue Streams

For what value are our customers really willing to pay? For what do they currently pay? How are they currently paying? How would they prefer to pay? How much does each Revenue Stream contribute to overall revenues?

Gain Creators

Pain Relievers

Hypotheses

Hypotheses





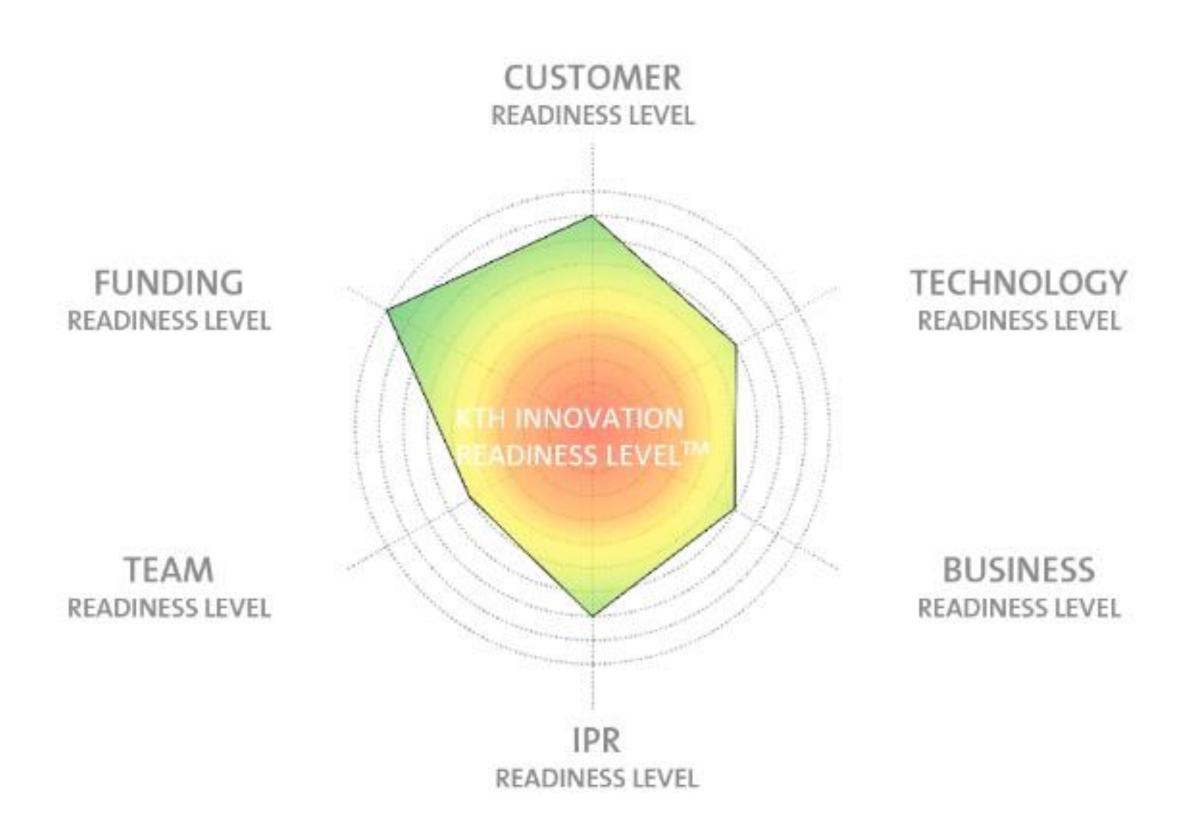
Which Key Activities are most expensive?

Hypotheses

WATCH AND BUILD READINESS!!



https://kthinnovationreadinesslevel.com



GUIDANCE AND STRUCTURE

The model provides generic steps and standard questions that need to be addressed and provides support for both coaches and idea owners throughout the process.



USEFULL SOURCES

A Small Selection



- https://health.ec.europa.eu/rare-diseases-and-european-reference-networks/european-reference-networks_en
- https://www.who.int/europe/publications
- https://www.oecd-ilibrary.org/social-issues-migration-health/data/oecd-health-statistics health-data-en
- https://www.statistik.at/en/medien/release-calendar, https://www.dzs.hr/en or https://stat.gov.lv/en (and all other national statistics organisations)
- https://health.ec.europa.eu/index_en
- •

Use the trust of your audience in such sources!!





SPINOFF KNOWHOW SINCE 2002 YOUR QUESTIONS, PLEASE!





