

Project Proposal-BUAN 6356



GROUP-7

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HEART STROKE PREDICTION
TARGET FIRM: CVS Healthcare

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Overview of the project



- The main objective of our project is to predict the chances of stroke. For this process, we have used 12 attributes such as age, gender, hypertension, heart disease etc.
- We have made around 5110 observations for this prediction. Based on the observation, we are predicting the factors that influences the chances of stroke using the logistic regression model and decision trees.
- The outcome of this project will be a reference for many Healthcare companies to experiment with their insurance plans according to the attributes we used for the observation.

Business understanding (Firm description)



- Based on our observation and results after conducting a logistic regression, we are looking to submit our project proposal to the famous company CVS Health.
- CVS is one of the world's largest healthcare companies, housing about 300,000 (2020) employees and ranked 5th on the 2020 Fortune 500 list of the largest U.S. corporations by total revenue.
- It has various product and service lines including pharmacy, retail, health insurance (Aetna), etc.
- Our observation and the results with our project will surely help them to keep our project as a reference in predicting the chances of stroke and spread the awareness to the society based on the attributes what we used in this project.

Business understanding (Firm description)

Through series of strategic business moves, CVS Health has categorised its business into four key areas as shown in the table below.

Area of Business	Approx Yearly Revenue(USD)	Number of employees(approx)
CVS Pharmacy	134 Billion	203000
CVS Caremark	36 Billion	19500
Minute Clinic	25 Billion	18000
Aetna(Health Insurance)	60 Billion	48000

Business understanding (Firm description)

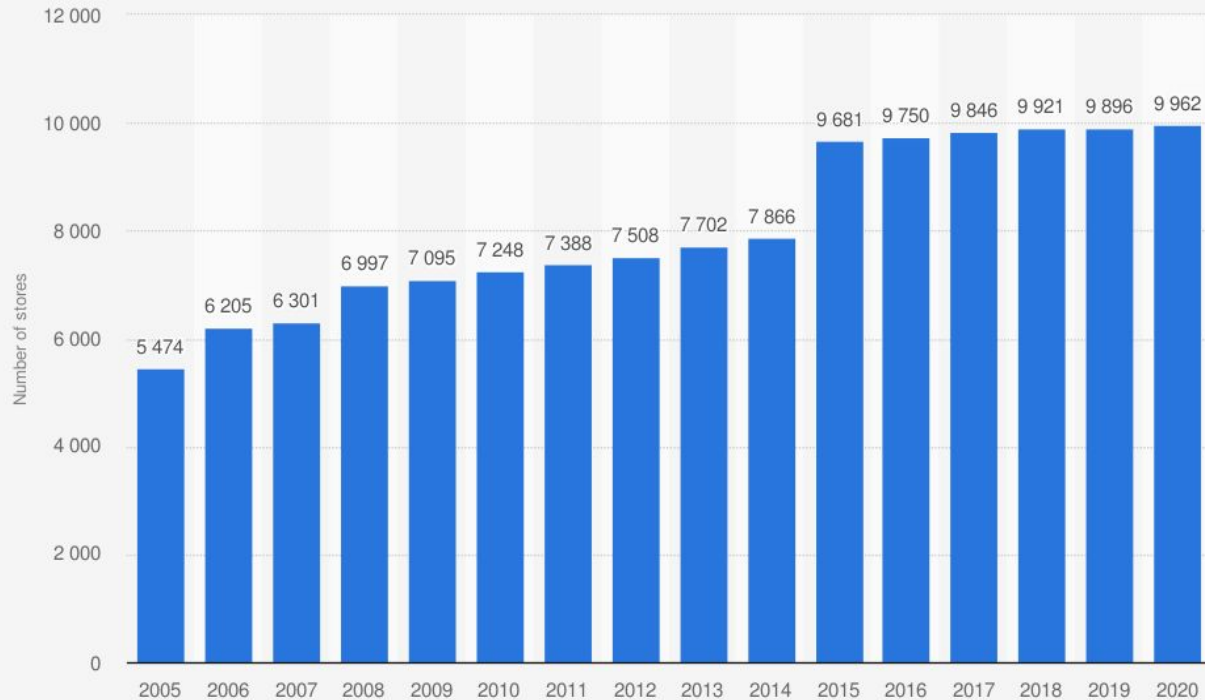


Fig. Geographic footprint of CVS Health

- CVS healthcare is having its branches in 49 states.
- As per the year 2020, they're having 9962 stores in the country as shown in the graph.

Business understanding(SWOT ANALYSIS)



STRENGTHS

- Brand Value and Market Positioning.
- The financial statements of Aetna seem organized and reliable with consistently more than 60 Billion USD in the last 3 years.
- Formed in the relationship era. Aetna has a strong base of loyal customers who may not go away anytime soon. As of 2019 More than 39 Million people across the US.



WEAKNESS

- Uncertainty in Market share. Aetna only holds 5.56% of the national market share. Government laws create uncertainty about the company's future business model.
- Like most Private Health Insurance companies, Aetna's health insurance plans might not be pocket friendly to certain sectors of population.

Business understanding(SWOT ANALYSIS)



OPPORTUNITIES

- Improvement in technology gives better opportunities for greater customization of health plans.
- Expansion into new/emerging economies.
- With increase in aged population, particularly in developed countries such as US, people need more care, costlier care as they age.



THREATS

- Strict Regulatory issues, causing uncertainty in business.
- Tough competition by other major firms in the health insurance line such as United, BCBS, Cigna, etc.

Data Description:



Heart Stroke is 2nd most leading cause of death globally. Approximate 11% of total deaths . Through this dataset we are predicting whether the target population is susceptible of having stroke based on the parameters like gender, age, various diseases, and smoking status. Each row in the data provides relevant information about the patient.

- Data Source:
<https://www.kaggle.com/fedesoriano/stroke-prediction-dataset?select=healthcare-dataset-stroke-data.csv>
- Originally, the data contains 5110 observations with 12 attributes. There is no accurate time frame mentioned over which data has been collected. The data was published on kaggle on 26th Jan'21.
- For our analysis we have split the data and now we have 4343 observations.
- Our target variable of interest is to predict stroke based on the 12 attributes.

Data Description: Attribute Information



- 1) ID: unique identifier
- 2) Gender: "Male", "Female" or "Other"
- 3) Age: Age of the patient
- 4) Hypertension: 0 if the patient doesn't have hypertension, 1 if the patient has hypertension
- 5) Heart_disease: 0 if the patient doesn't have any heart diseases, 1 if the patient has a heart disease
- 6) Marital Status: Ever_married: "No" or "Yes"
- 7) Work_type: "children", "Govt_jov", "Never_worked", "Private" or "Self-employed"
- 8) Residence_type: "Rural" or "Urban"
- 9) Avg_glucose_level: average glucose level in blood
- 10) BMII: body mass index
- 11) Smoking_status: "formerly smoked", "never smoked", "smokes" or "Unknown"
- 12) Stroke: 1 if the patient had a stroke or 0 if not

```
> summary(stroke.df)
```

id	gender	age	hypertension	heart_disease	ever_married	work_type	Residence_type	avg_glucose_level	bmi
Min. : 67	Length:4343	Min. : 0.08	Min. :0.00000	Min. :0.00000	Length:4343	Length:4343	Length:4343	Min. : 55.12	Length:4343
1st Qu.:17938	Class :character	1st Qu.:25.00	1st Qu.:0.00000	1st Qu.:0.00000	Class :character	Class :character	Class :character	1st Qu.: 77.25	Class :character
Median :36969	Mode :character	Median :45.00	Median :0.00000	Median :0.00000	Mode :character	Mode :character	Mode :character	Median : 91.85	Mode :character
Mean :36646		Mean :43.13	Mean :0.09256	Mean :0.05227				Mean :106.22	
3rd Qu.:54736		3rd Qu.:61.00	3rd Qu.:0.00000	3rd Qu.:0.00000				3rd Qu.:114.28	
Max. :72918		Max. :82.00	Max. :1.00000	Max. :1.00000				Max. :271.74	
smoking_status	stroke								
Length:4343	Min. :0.00000								
Class :character	1st Qu.:0.00000								
Mode :character	Median :0.00000								
	Mean :0.04812								
	3rd Qu.:0.00000								
	Max. :1.00000								

```
>
```

Statistics Snapshot : Summary - Removed Gender: “other” & 178 NA’s of BMI is replaced by mean BMI

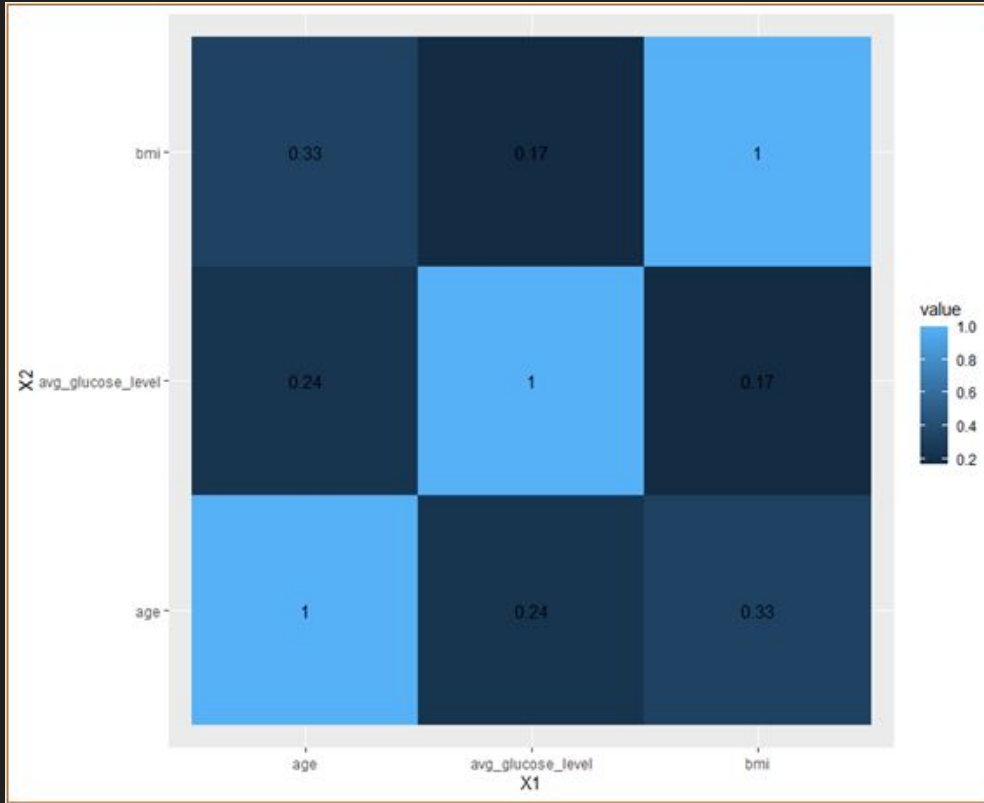
```
> summary(stroke.df)
gender      age      hypertension heart_disease ever_married      work_type      Residence_type avg_glucose_level      bmi      smoking_status stroke
Female:2539  Min.   : 0.08      0:3940      0:4115      No :1497      children   : 584      Rural:2103      Min.    : 55.12      Min.   :11.50      formerly smoked: 747  0:4133
Male :1803   1st Qu.:25.00      1: 402      1: 227      Yes:2845      Govt_job    : 561      Urban:2239      1st Qu.: 77.24      1st Qu.:23.50      never smoked  :1619  1: 209
              Median :45.00                      Never_worked : 21                      Median : 91.85      Median :28.00      smokes        : 681
              Mean   :43.13                      Private      :2487                      Mean   :106.21      Mean   :28.87      Unknown       :1295
              3rd Qu.:61.00                      Self-employed: 689                      3rd Qu.:114.24      3rd Qu.:33.10
              Max.   :82.00                                           Max.   :271.74      Max.   :97.60
              NA's   :178
```

Descriptive Summary of Numerical Variables:

	mean	median	sd	variance	min	max	count	miss.val
age	43.12958	45.00	22.558035	508.86496	0.08	82.00	4342	0
avg_glucose_level	106.21045	91.85	45.327663	2054.59703	55.12	271.74	4342	0
bmi	28.87105	28.40	7.651788	58.54987	11.50	97.60	4342	0

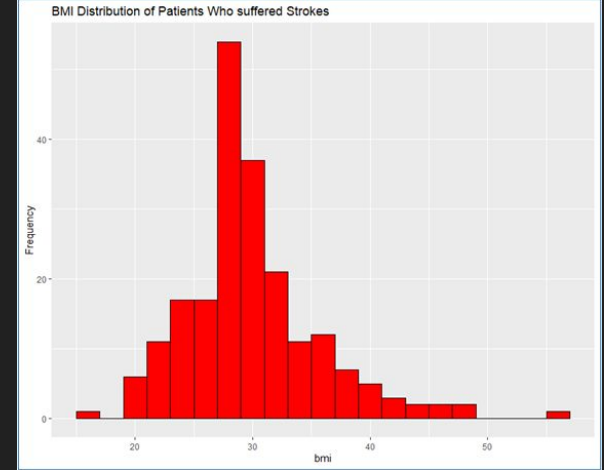
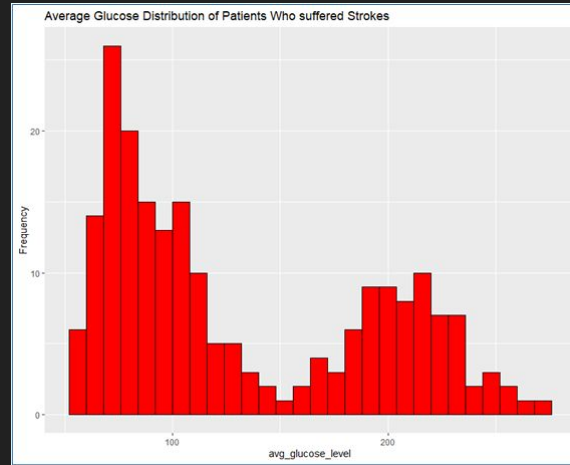
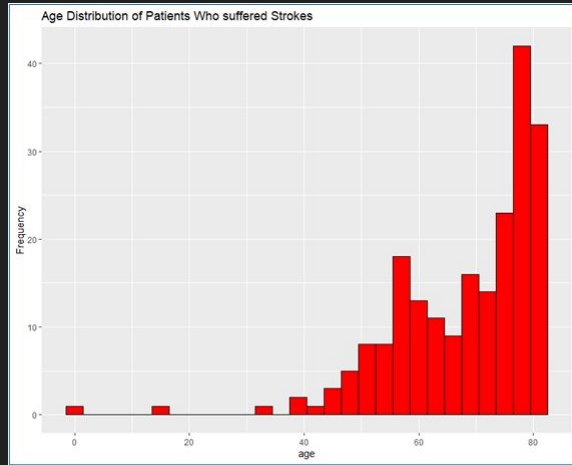
```
# A tibble: 2 x 3
  gender avg_bmi      n
*   <fct>    <dbl> <int>
1 Female    29.1   2539
2 Male     28.6   1803
> |
```

Exploratory Data Analysis: Correlation Matrix



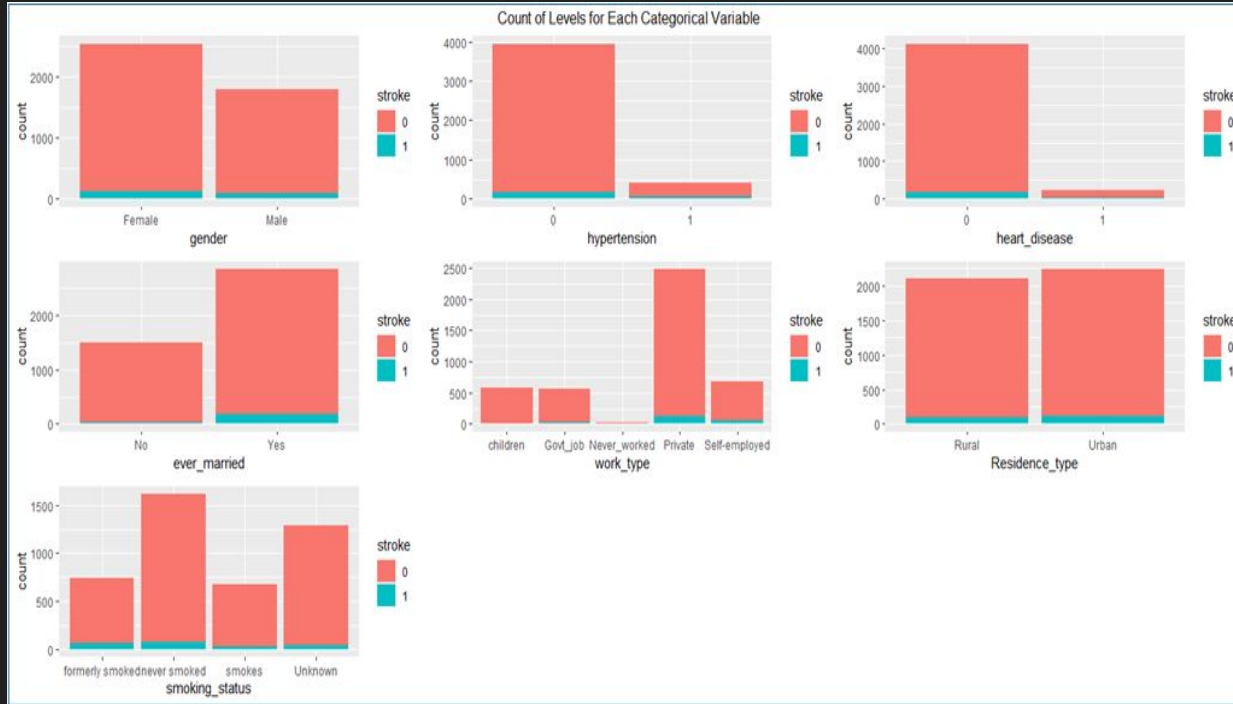
It seemed like both BMI and Age are weakly positively correlated

Exploratory Data Analysis



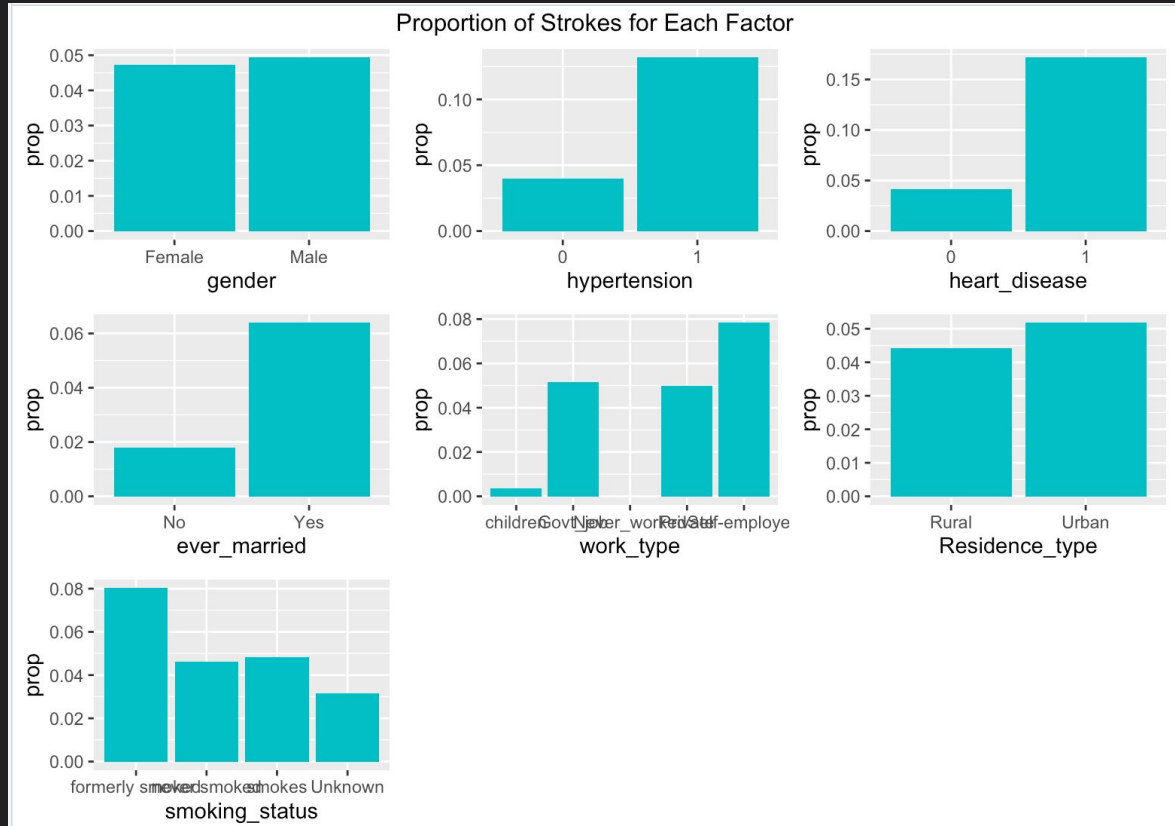
- 1) As the patient's age advances, so is the chance to have a stroke.
- 2) Population who have average glucose level more than 150 suffered a stroke. Prediabetes is considered in patient for a reading between 140-199mg/dL. Diabetes is one of the risk factors for stroke occurrence and prediabetes patients have an increased risk of stroke.
- 3) Population with BMI between 25 to 35 are the highest to suffer a stroke. However, higher BMI does not increase risk of stroke.

Exploratory Data Analysis



The amount of those who have had a stroke is a small portion of the population. So, we compare proportions of those who had a stroke in each factor.

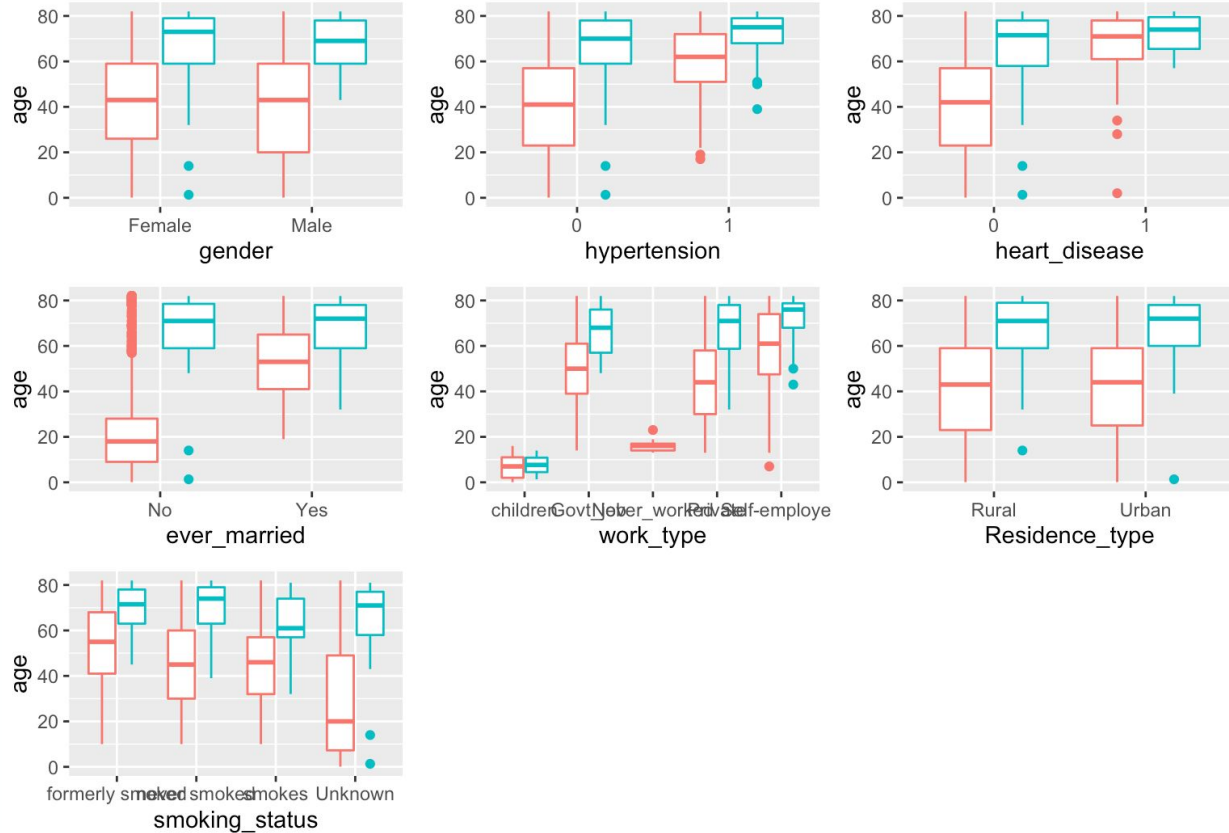
Exploratory Data Analysis



- 1) Gender and residence type do not show much difference in occurrence of strokes.
- 2) Hypertension, heart disease, marital status have a much higher proportion of populations to have a stroke.
- 3) Children have very low occurrences of strokes, never worked have none. There is little difference in the proportions of those who work in government and those who work in the private sector. Self employed have a higher proportion than both of these sectors.
- 4) Former smokers have a higher chance of occurrence to stroke than current smokers .

Exploratory Data Analysis

Stroke and Age Across Factors



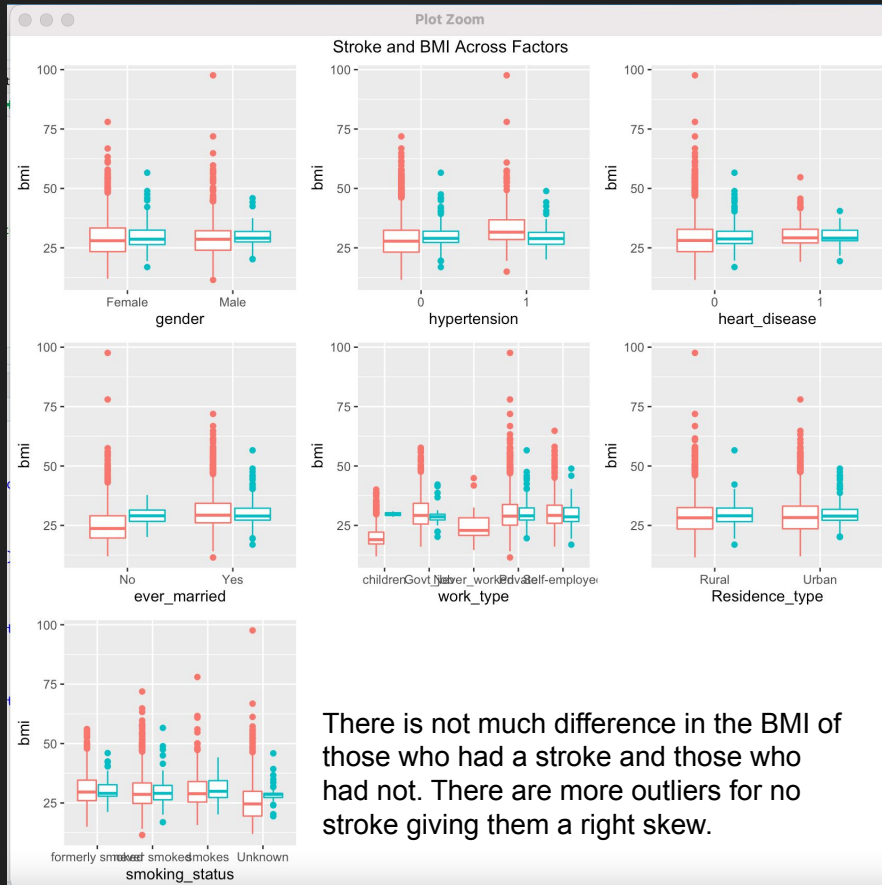
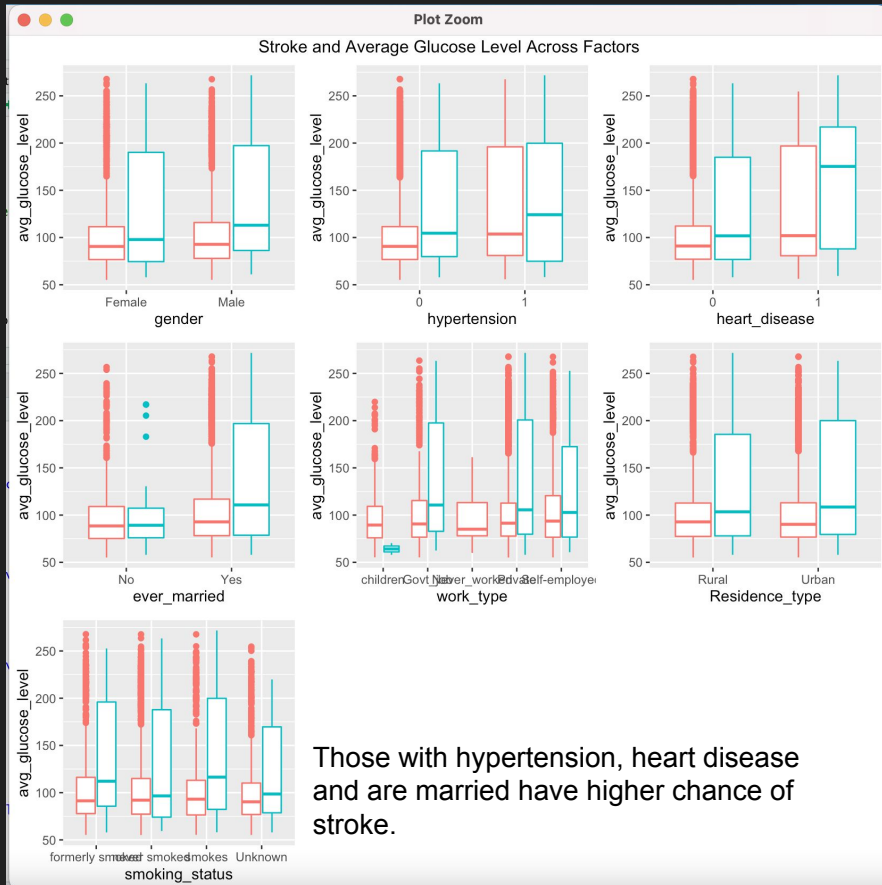
For all levels in each factor those who have had a stroke are older.

Those with hypertension and heart disease are older than those who do not.

Self-employed are also older than the other types of work. They are at risk to have a stroke.

Those who had a stroke and smoke are younger than those who quit or never smoked (but still had a stroke).

Exploratory Data Analysis



Data Modelling



Model Comparison

We will compare our accuracy with other classification models such as decision trees and random forests and select the best one.

Model Diagnosis

After running the model, checking the confusion matrix and predictors coefficients will give us a better idea about model performance.

Model Selection

Given target variable is a binary categorical variable, we will use classification prediction model - logistic regression

Variable Selection

We have 10 predictor variables in our dataset to predict our target variable (stroke)

Data Modelling - Model Comparison

Model	Prediction	Accuracy	Measures												
Logistic Regression	<table><tr><td></td><td>FALSE</td><td>TRUE</td></tr><tr><td>FALSE</td><td>1240</td><td>60</td></tr><tr><td>TRUE</td><td>3</td><td>0</td></tr></table>		FALSE	TRUE	FALSE	1240	60	TRUE	3	0	<p>Accuracy : 0.9517 95% CI : (0.9386, 0.9626) No Information Rate : 0.954 P-value [Acc > NIR] : 0.6838</p>	<p>Sensitivity : 0.9976 Specificity : 0.0000 Pos Pred Value : 0.9538 Neg Pred Value : 0.0000</p>			
	FALSE	TRUE													
FALSE	1240	60													
TRUE	3	0													
Random Forest	<table><tr><td></td><td colspan="2">Reference</td></tr><tr><td>Prediction</td><td>0</td><td>1</td></tr><tr><td>0</td><td>1240</td><td>59</td></tr><tr><td>1</td><td>3</td><td>1</td></tr></table>		Reference		Prediction	0	1	0	1240	59	1	3	1	<p>Accuracy : 0.9524 95% CI : (0.9394, 0.9633) No Information Rate : 0.954 P-value [Acc > NIR] : 0.6362</p>	<p>Sensitivity : 0.99759 Specificity : 0.01667 Pos Pred value : 0.95458 Neg Pred value : 0.25000</p>
	Reference														
Prediction	0	1													
0	1240	59													
1	3	1													
Decision Tree	<table><tr><td></td><td colspan="2">Reference</td></tr><tr><td>Prediction</td><td>0</td><td>1</td></tr><tr><td>0</td><td>1195</td><td>46</td></tr><tr><td>1</td><td>48</td><td>14</td></tr></table>		Reference		Prediction	0	1	0	1195	46	1	48	14	<p>Accuracy : 0.9279 95% CI : (0.9124, 0.9413) No Information Rate : 0.954 P-value [Acc > NIR] : 1.0000</p>	<p>Sensitivity : 0.9614 Specificity : 0.2333 Pos Pred value : 0.9629 Neg Pred value : 0.2258</p>
	Reference														
Prediction	0	1													
0	1195	46													
1	48	14													

Data Modelling - Under Sampled data

Model	Prediction	Accuracy	Measures																															
Logistic Regression	<table><tr><td></td><td>FALSE</td><td>TRUE</td></tr><tr><td>FALSE</td><td>940</td><td>12</td></tr><tr><td>TRUE</td><td>303</td><td>48</td></tr></table>		FALSE	TRUE	FALSE	940	12	TRUE	303	48	<table><tr><td>Accuracy :</td><td>0.7583</td></tr><tr><td>95% CI :</td><td>(0.7341, 0.7813)</td></tr><tr><td>No Information Rate :</td><td>0.954</td></tr><tr><td>P-Value [Acc > NIR] :</td><td>1</td></tr></table>	Accuracy :	0.7583	95% CI :	(0.7341, 0.7813)	No Information Rate :	0.954	P-Value [Acc > NIR] :	1	<table><tr><td>Sensitivity :</td><td>0.7562</td></tr><tr><td>Specificity :</td><td>0.8000</td></tr><tr><td>Pos Pred Value :</td><td>0.9874</td></tr><tr><td>Neg Pred Value :</td><td>0.1368</td></tr></table>	Sensitivity :	0.7562	Specificity :	0.8000	Pos Pred Value :	0.9874	Neg Pred Value :	0.1368						
	FALSE	TRUE																																
FALSE	940	12																																
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Neg Pred Value :	0.1368																																	
Random Forest	<table><tr><td></td><td>Reference</td><td></td></tr><tr><td>Prediction</td><td>0</td><td>1</td></tr><tr><td></td><td>0</td><td>926</td></tr><tr><td></td><td>1</td><td>317</td></tr><tr><td></td><td></td><td>46</td></tr></table>		Reference		Prediction	0	1		0	926		1	317			46	<table><tr><td>Accuracy :</td><td>0.746</td></tr><tr><td>95% CI :</td><td>(0.7214, 0.7694)</td></tr><tr><td>No Information Rate :</td><td>0.954</td></tr><tr><td>P-Value [Acc > NIR] :</td><td>1</td></tr></table>	Accuracy :	0.746	95% CI :	(0.7214, 0.7694)	No Information Rate :	0.954	P-Value [Acc > NIR] :	1	<table><tr><td>Sensitivity :</td><td>0.7450</td></tr><tr><td>Specificity :</td><td>0.7667</td></tr><tr><td>Pos Pred Value :</td><td>0.9851</td></tr><tr><td>Neg Pred Value :</td><td>0.1267</td></tr></table>	Sensitivity :	0.7450	Specificity :	0.7667	Pos Pred Value :	0.9851	Neg Pred Value :	0.1267
	Reference																																	
Prediction	0	1																																
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Specificity :	0.7667																																	
Pos Pred Value :	0.9851																																	
Neg Pred Value :	0.1267																																	
Decision Tree	<table><tr><td></td><td>Reference</td><td></td></tr><tr><td>Prediction</td><td>0</td><td>1</td></tr><tr><td></td><td>0</td><td>876</td></tr><tr><td></td><td>1</td><td>367</td></tr><tr><td></td><td></td><td>40</td></tr></table>		Reference		Prediction	0	1		0	876		1	367			40	<table><tr><td>Accuracy :</td><td>0.703</td></tr><tr><td>95% CI :</td><td>(0.6774, 0.7277)</td></tr><tr><td>No Information Rate :</td><td>0.954</td></tr><tr><td>P-Value [Acc > NIR] :</td><td>1</td></tr></table>	Accuracy :	0.703	95% CI :	(0.6774, 0.7277)	No Information Rate :	0.954	P-Value [Acc > NIR] :	1	<table><tr><td>Sensitivity :</td><td>0.70475</td></tr><tr><td>Specificity :</td><td>0.66667</td></tr><tr><td>Pos Pred Value :</td><td>0.97768</td></tr><tr><td>Neg Pred value :</td><td>0.09828</td></tr></table>	Sensitivity :	0.70475	Specificity :	0.66667	Pos Pred Value :	0.97768	Neg Pred value :	0.09828
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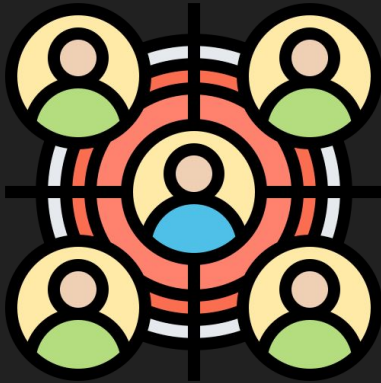
Data Modelling - Over Sampled data

Model	Prediction	Accuracy	Measures												
Logistic Regression	<table><tr><td></td><td>FALSE</td><td>TRUE</td></tr><tr><td>FALSE</td><td>921</td><td>12</td></tr><tr><td>TRUE</td><td>322</td><td>48</td></tr></table>		FALSE	TRUE	FALSE	921	12	TRUE	322	48	<p>Accuracy : 0.7437 95% CI : (0.719, 0.7672) No Information Rate : 0.954 P-value [Acc > NIR] : 1</p>	<p>Sensitivity : 0.7409 Specificity : 0.8000 Pos Pred Value : 0.9871 Neg Pred value : 0.1297</p>			
	FALSE	TRUE													
FALSE	921	12													
TRUE	322	48													
Random Forest	<table><tr><td></td><td colspan="2">Reference</td></tr><tr><td>Prediction</td><td>0</td><td>1</td></tr><tr><td>0</td><td>1209</td><td>53</td></tr><tr><td>1</td><td>34</td><td>7</td></tr></table>		Reference		Prediction	0	1	0	1209	53	1	34	7	<p>Accuracy : 0.9332 95% CI : (0.9183, 0.9462) No Information Rate : 0.954 P-value [Acc > NIR] : 0.99970</p>	<p>sensitivity : 0.9726 specificity : 0.1167 Pos Pred Value : 0.9580 Neg Pred Value : 0.1707</p>
	Reference														
Prediction	0	1													
0	1209	53													
1	34	7													
Decision Tree	<table><tr><td></td><td colspan="2">Reference</td></tr><tr><td>Prediction</td><td>0</td><td>1</td></tr><tr><td>0</td><td>1117</td><td>39</td></tr><tr><td>1</td><td>126</td><td>21</td></tr></table>		Reference		Prediction	0	1	0	1117	39	1	126	21	<p>Accuracy : 0.8734 95% CI : (0.8541, 0.891) No Information Rate : 0.954 P-value [Acc > NIR] : 1</p>	<p>Sensitivity : 0.8986 Specificity : 0.3500 Pos Pred value : 0.9663 Neg Pred value : 0.1429</p>
	Reference														
Prediction	0	1													
0	1117	39													
1	126	21													

Recommendations

We discuss 3 ways in which our Target Firm can use our Data Model to improve the efficiency of their business operations:

1) Aid Segmentation and Targeted Development of Insurance Plans



- Our data model can help our target firm CVS(Aetna) to more precisely predict the susceptibility of a patient being affected by stroke and also help their insurance policy makers in pricing analysis and attractive premiums as it provides in depth risk analysis of the patient.
- It can also aid in providing customized healthcare plans to individuals with respect to their health issues.

Recommendations

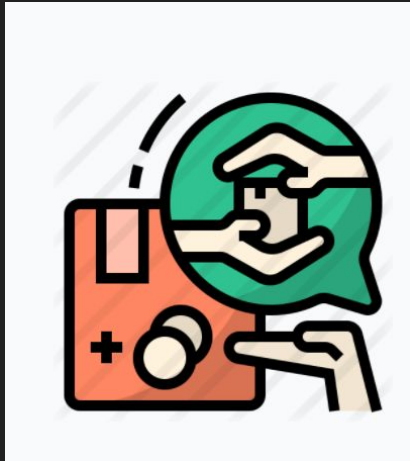
2) Improve efficiency of Sales and Marketing operations



- Our data set can help CVS(Aetna) predict the sale of their insurance policies by predicting stroke owing to different demographic factors.
- Collecting key data points, and applying business intelligence may aid in the identification of emerging opportunities and the analysis of the effectiveness of various marketing channels in order to prioritize efforts and gain a competitive advantage.

Recommendations

3) Maximize cross-selling



- With our data model and analysis, CVS(Aetna) can find opportunities to cross-sell new products/Plans to their members.
- During open enrollment, they can use data to send targeted campaigns to promote new products/plans or send invitations to special events that will target members who are at risk for stroke based on comorbidities such as hypertension, for example.

Additional Recommendations

- CVS's pharmacy can use our data to gain a better know how of the susceptibility to stroke and can accordingly distribute their medicines and maintain supply demand equilibrium.
- Our data model can help CVS enable precision medicine to treat stroke by taking into factors like age, different genetic variables, ,lifestyle,existing health conditions,etc to accordingly identify and segment the high risk population of getting stroke and develop personalized or segment wise precision medication for each segment based on genetics and Lifestyle.
- It can help CVS open up their minuteclinics in areas with stroke susceptible population and give treatment as required.

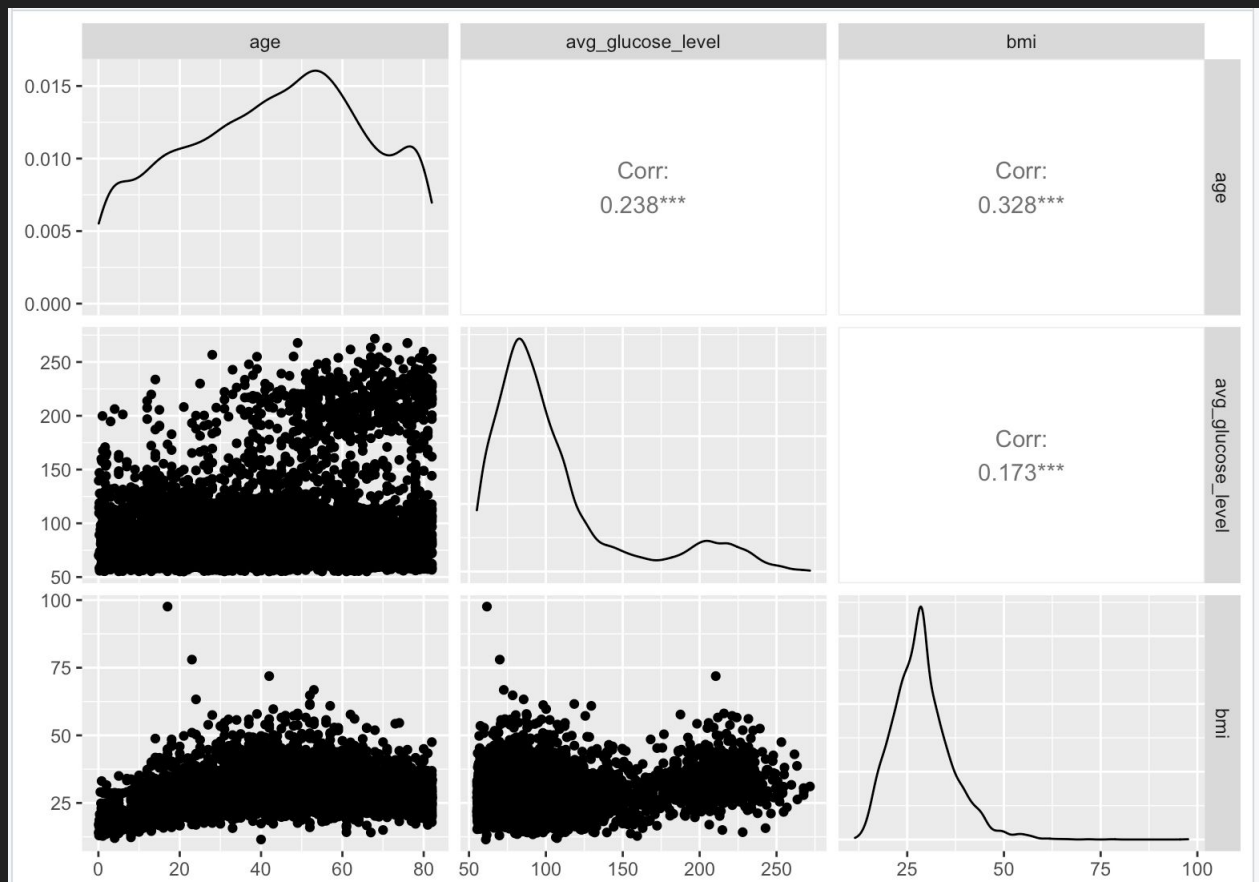


References

- 1) <https://www.kaggle.com/fedesoriano/stroke-prediction-dataset>
- 2) <https://www.swotandpestle.com/unitedhealth-group/>
- 3) <https://www.analyticsvidhya.com/blog/2016/03/practical-guide-deal-imbalanced-classification-problems/>
- 4) <https://www.hackerearth.com/blog/developers/practical-guide-logistic-regression-analysis-r/>

Appendix

Exploratory Data Analysis: Scatter Plot



It seemed like both BMI and Age are weakly positively correlated

BMI and avg_glucose level are weakly correlated

Data Modelling - Logistic Regression

```
> ## Running Logistic Regression Model
> logit.reg <- glm(stroke ~ ., data = train.df, family = "binomial")
> options(scipen=999)
> summary(logit.reg)

call:
glm(formula = stroke ~ ., family = "binomial", data = train.df)

Deviance Residuals:
    Min       1Q   Median       3Q      Max
-1.0935  -0.3127  -0.1542  -0.0796   3.6077

Coefficients:
              Estimate Std. Error z value Pr(>|z|)
(Intercept)  -6.8934553   1.0958739   -6.290  0.0000000000317 ***
genderMale    -0.1237049   0.1872739   -0.661    0.509
age           0.0813864   0.0078676  10.344 < 0.0000000000000002 ***
hypertension1 0.3186516   0.2203374    1.446    0.148
heart_disease1 0.2935370   0.2463830    1.191    0.234
ever_marriedYes -0.2491351   0.2894223   -0.861    0.389
work_typeGovt_job -1.1761884   1.1699998   -1.005    0.315
work_typeNever_worked -10.1714285  402.2048051   -0.025    0.980
work_typePrivate -0.8503511   1.1445973   -0.743    0.458
work_typeSelf-employed -1.3159990   1.1711731   -1.124    0.261
Residence_typeurban 0.1395732   0.1817295    0.768    0.442
avg_glucose_level 0.0039281   0.0015634    2.513    0.012 *
bmi           -0.0007984   0.0148181   -0.054    0.957
smoking_statusnever smoked -0.2829164   0.2294799   -1.233    0.218
smoking_statussmokes 0.0238334   0.2832035    0.084    0.933
smoking_statusunknown -0.1134773   0.2702838   -0.420    0.675
---
Signif. codes:  0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 ' ' 1

(Dispersion parameter for binomial family taken to be 1)

    Null deviance: 1189.14  on 3038  degrees of freedom
Residual deviance:  924.31  on 3023  degrees of freedom
AIC: 956.31

Number of Fisher Scoring iterations: 14
```

```
> # first 10 actual and predicted records #
> data.frame(actual = valid.df$stroke[1:10], predicted = logit.reg.pred[1:10])
  actual predicted
1      0 0.001525292
4      0 0.001885494
6      0 0.002347611
11     0 0.045132725
19     0 0.001345796
31     0 0.005806841
34     0 0.193153500
35     1 0.081772675
39     0 0.134421720
42     0 0.053967738
```

Confusion Matrix and Statistics

	FALSE	TRUE	
FALSE	1240	60	
TRUE	3	0	

Accuracy : 0.9517
95% CI : (0.9386, 0.9626)
No Information Rate : 0.954
P-Value [Acc > NIR] : 0.6838

Kappa : -0.0044

McNemar's Test P-Value : 0.000000000001722

Sensitivity : 0.9976
Specificity : 0.0000
Pos Pred Value : 0.9538
Neg Pred Value : 0.0000
Prevalence : 0.9540
Detection Rate : 0.9517
Detection Prevalence : 0.9977
Balanced Accuracy : 0.4988

'Positive' Class : FALSE

Porter Five Forces in the Healthcare industry

- **Rivalry amongst the competitors(High):-** Intense Rivalry is faced by the Healthcare Industry about market capitalisation, margin over other companies.
- **The Bargaining power of Buyers(Low):-** In USA, buyers hold a weak bargaining power. To avail the health insurance, a price has to be paid for it. For example customers rather buy and pay for health insurance rather for a surgery.
- **The Bargaining power of suppliers(High):-** Suppliers hold a high bargaining power as this sector is totally dependent on its services provided.
- **Substitute of Existing Products(High):-** Customers always prefer to opt to go where they are able to find the cheaper prices.
- **Threat towards Entry of New Entrants(Low):-** Due to very few dominant companies in the healthcare industry, there is relatively lesser threat towards new entrants in this field.

THANK YOU

QUESTIONS??