McKinsey & Company

Perspectives on the healthcare market in Brazil

Patria Presentation

November 2023



### We bring 9 provocations about the Brazilian healthcare sector...

#### **Services**



# Products (Life Sciences)



	The healthcare industry is 20 years behind most other industries (including government) in the implementation of digital solutions and productivity
	There is a strong dehospitalization movement with clear benefits to the healthcare payors
Payers and providers	Payers and providers are unlikely to stop fighting each other leading to continued <b>compressed margins</b> , <b>unless claims rate ease up</b> – solutions such as network management can help improve
	The trends towards consolidation will continue at a slow ride
	There is a significant opportunity to continue scaling specialty providers across Brazil leveraging initiatives such as: vision benefits management and new points of care
Ecosystem	There are many emerging ecosystems in Brazil, however these will consolidate into 2 or 3. Are you one of those? Or do want to join forces with one of them?
Distributors	Players can no longer count on the tax game (subsidy) and need to fundamentally rethink the model (e.g., more specialties relevance, additional services and vertical integration)
Clinical Trials (specialties)	We are underleveraging the opportunity to do clinical trials across our diverse and very sizeable population in Brazil
Wellness	Today Brazil is a leader in wellness and beauty and in the next decade we expect multiple categories and services to emerge (e.g., Fitness, Mindfulness and better sleep)
Generics and OTC	Continuation of current trends expected: small subset of players leading the market with limited competitive moves and opportunities for entry

### ...and potential levers for each of these trends

#### **Services**



Payers and providers

1 Healthcare industry is 20 years behind

2 Dehospitalization movement

3 Compressed margins, unless claims rate ease up

4 Consolidation will continue

5 Scale specialty providers across Brazil Growth strategies

Products (Life Sciences)



Ecosystem	6 Emerging ecosystems in Brazil	Business building, new alliances and corp. dev. with 5% additional revenue per customer
Distributors	7 Rethink the model	Digital and efficiency in ops. and verticalization to create an ecosystem with 1-10% of impact
Clinical Trials (specialties)	8 Opportunity to do clinical trials	Real world evidence supported by AA
Wellness	9 Multiple categories and services to emerge	Growth strategies
Generics and OTC	Players leading the market with limited competitive moves	Limited opportunity

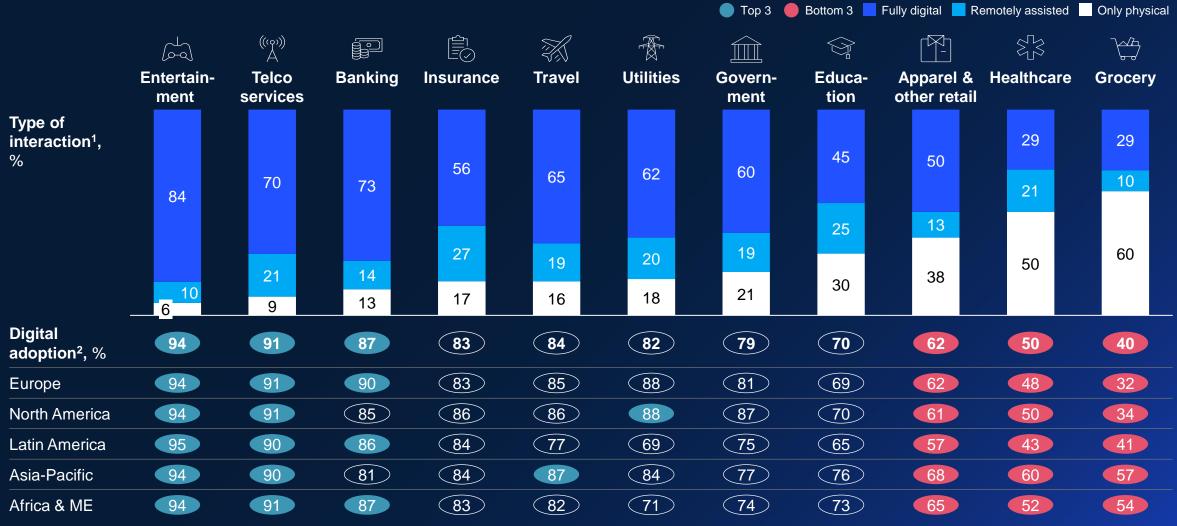
impact

Efficiency and cost reduction, digital and AA

Programmatic M&A integration

implementation in operations with 1-20% of potential

### 1. Healthcare is lagging industries in digitization



<sup>1.</sup> Q: How have you interacted with these services in the past 6 months? Options: Fully digital without human assistance (e.g. web, app); Digital with human assistance (e.g. call center, live chat, email); Physical (e.g. branch, store, stand, agent)

<sup>2.</sup> Sum of users that have interacted fully digitally or digitally with remote assistance with each industry

## 1. Brazilian healthcare system is one of the least digitized in the world

Not exhaustive

	Digital maturity assessment High Low			
Countries	Digital connectivity index, index 2020	EMR maturity, avg. HIMSS EMRAM (2016) <sup>4</sup>	Country archetype, archetype	
Singapore	97	5.3	Pioneer	
Netherlands	82	4.7	Leader	
Japan	81	1.71	Pioneer	
South Korea	78	1.7 <sup>1</sup>	Pioneer	
L UAE	77	3.1	Leader	
Switzerland	75	$3.6^{2}$	Leader	
Sweden	75	$3.6^{2}$	Leader	
■ Denmark	75	5.3	Leader	
US	75	5.4	Pioneer	
Spain	74	3.9	Leader	
Ireland	66	$3.6^{2}$	Leader	
Finland	66	$3.6^{2}$	Leader	
Mexico	54	2.0	Follower	
Srazil	52	2.0	Follower	
India	39	1.71	India archetype	

Brazil healthcare system falls short on the adoption of Electronic Medical record and digitization of its processes

<sup>1.</sup> Singapore, Japan, South Korea, China, India—Average for APAC 2. Switzerland, Ireland, Sweden, Finland, France, Belgium, Germany, Spain, Norway, Luxembourg, Italy, Russia — Average for Europe | 3. Israel, Saudi Arabia — Average for Middle East | 4. Quartile of global cloud spending per capital

## 1. This creates many opportunities to improve productivity by combining digital tools and operational transformation

Efficiency can be explored by different levers to capture full potential of the enterprises



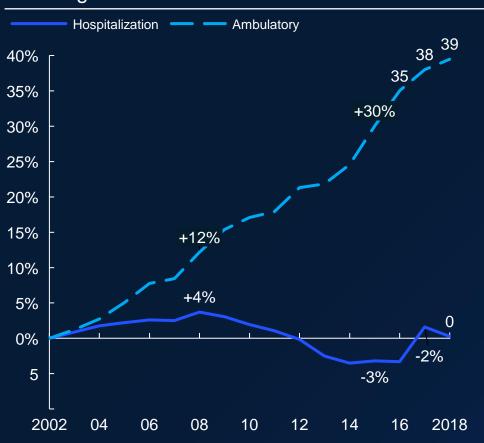
#### Labor costs Optimize allocation of personnel considering demand by service area **5-7%** reduction of and timing Personnel, Medical Contracts and Drugs & **Clinical Operations** Materials Review of clinical processes optimizing medical, material and drugs allocation **10 - 13%** reduction of **Support Functions** Standardize processes among functions and leverage automation SG&A **Procurement 4-7%** of cost reduction Review of purchase agreements and efficiency of the services on COGS (except for provided Personnel) and SG&A **Capital Optimization 10-20%** of capex Optimize medical equipment and real estate reduction **Footprint review** Varies depending context

Optimize hospitals and clinics footprint for the different formats,

evaluating transform the assets and divestment

## 2. Given the benefits that dehospitalization brings, penetration is less than you can imagine

### US hospital admissions and outpatient visits, % change vs. 2002



#### **Patient migration drivers**



Improved care indicators such as re-hospitalizations and complications



Migration of patients to outpatient care



Increased adherence to prescription and treatment



Advances in therapeutics and innovative technologies



Increased patient engagement in health and wellness



In Brazil, migration to Outpatient centers is more timid but growing

Between 2019 and 2020, demand for home care grew 15%

In 2022, homecare companies grew 35% (in patients)

Groups and **healthtechs** have led this movement





**64%** of cases were solved in primary care

Hospitalization refers to services provided when patients are kept overnight for treatment, but not for observation. Ambulatory refers to services provided by hospitals that provide medical services that do not require internment or night stay

## 3. The current context has impacted payers performance, pressuring them to review their business models and operations

Global and Brazil trends	Description
Increases in healthcare spend	<ul> <li>Increased inflation, especially for medical products</li> <li>Aging and new habits, increasing chronic diseases and the demand for healthcare</li> <li>Increased people's attention to preventative care</li> </ul>
Customer centricity	<ul> <li>Link customers using digital/mobile to facilitate healthcare options and experiences (e.g., provider selection)</li> <li>Personalization integrated with health and wellness propositions that reward healthy behaviors</li> </ul>
Market competition	<ul> <li>Concentration on few payers (top 7: 40% of premiums) and accelerated consolidation of some players (HapVida)</li> <li>Hundreds of smaller payers and cooperatives with profitability challenges</li> </ul>
Verticalization	<ul> <li>Payers are acquiring other players across the value chain, (e.g., hospitals, clinics and regional payers)</li> <li>This vertical integration has allowed payers to shift the setting of care to lower cost locations, e.g., primary care facilities, telemedicine</li> </ul>
New business models	<ul> <li>Insurers with business models anchored in the digitization of interaction and accelerated promotion of remote care (e.g., Alan, Oscar)</li> <li>Payers focused on access to providers, facilitating the digital/physical connection and remote provision of telemedicine (e.g., Savia)</li> </ul>
Fraud increases	<ul> <li>High fraud index driven by multiple economic and social factors resulting in ~R\$ 25 to R\$ 30 billion cost for payers</li> </ul>
Pressure on performance	<ul> <li>Increased administrative expenses due to rising inflation, increasing the need to improve efficiency</li> <li>Search for better claims ratio and new efficiency measures</li> <li>Financial results offset operational results challenges</li> </ul>

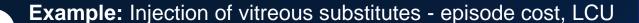
### 3. Negotiating with healthcare providers reduces the cost of claims

Operating model: Provider management

**Client case** 

#### **Approach**

- Calculate costs
   of clinical
   episodes across
   the network
- Split costs of clinical episodes by category
- Assess network cost variability for a given clinical episode





Significant cost gap between healthcare providers - 20-30% savings potential

Some specialties have significant price variability within the network

Medicines are a critical source of cost difference in this case

Basis for negotiation, allowing for cost reduction

### 3. In terms of effective network management, development priorities vary by phase





China's insurance companies generally have limited impact on hospital networks, especially for large public hospitals, and there is no significant difference between companies. Currently, the collaboration model between commercial insurer and hospitals is generally limited to pre-negotiated contracts of service outsourcing, with no deep cooperation The small scale of China's CHI weakens its bargaining power, so it is difficult to build customized services or control medical cost effectively

#### **Scale expansion**



#### **Cost control**

professionally



#### **Differentiated services**



Near-term (within three years)

Focus on major cities and actively explore internal and external opportunities (including public and private institutions at all levels)

Suggested focus on a small number of partner hospitals in the early stage to enhance the bargaining power of insurance, paying attention to the depth of collaboration rather than breadth

**Medium term** (within five years)

Long term (within 10 years)

After proven collaboration model at small scale, further expand network in major cities by increasing the number and types of partner hospitals

Scale up the successful models to lowertier markets to realize a wide geographic coverage

Negotiate terms with hospitals

Strictly manage unreasonable expenditure

Value creation for hospitals (e.g., directing patients, capability building) for better service price

In-depth participation in hospital management and operation to control medical costs directly

**Upgraded experience** of benefit services (e.g., personalized concierge service)

Partnership with higher-quality medical resources to create value (e.g., traffic, capability)

> Create an integrated health solution with medical value

# 5. Specialty care providers have important opportunities, e.g., for vision care competitors can increase their presence through 4 main growth strategies



## Vision benefits management

Insurance and healthcare payers that cover more basic exam and glasses/contact lenses coverage, more complex treatment such as for glaucoma and cataracts



## Specialized care centers

Hospitals focused on high volumes of surgery and complex treatment in large cities, with research development efforts to position as a vision care reference



## New points of care

Partnership with retailers to open clinics in supermarkets specially to ease the access



## Disease awareness

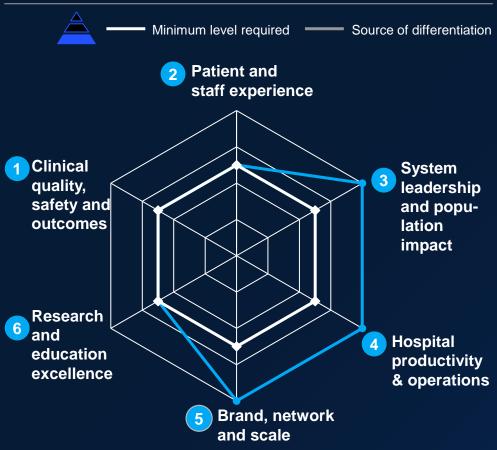
Strategies focused on patients to increase treatment demand and adherence through partnerships with healthcare insurance, payers and pharmaceutical industries

### 5. High volumes of surgery enabled Aravind to set the national standard for eye care in India





#### Value proposition



#### Approach to deliver patient-centric care

#### Identify challenge

- Cataracts were a major source of blindness in India, which could be avoided by timely intervention and surgery
- Lack of awareness, poor accessibility, high cost (particularly for cataract surgeries) and attitude that the poor not a financially sustainable customer to serve exacerbate the challenge

#### High volumes

- Outreach program where in doctors reach out to remote villages to conduct eye camps
- Achieves high quality at a low cost through high service volumes and innovation (i.e., mass marketing, industrial engineering innovations)

Performance management

Holistic performance management framework to enable adherence to quality standards

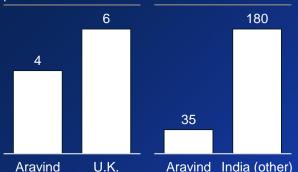
#### **Example impact**

Largest and most productive eye care facility in the world across these following dimensions

- Quality
- **Productivity and operations**
- Cost
- Access





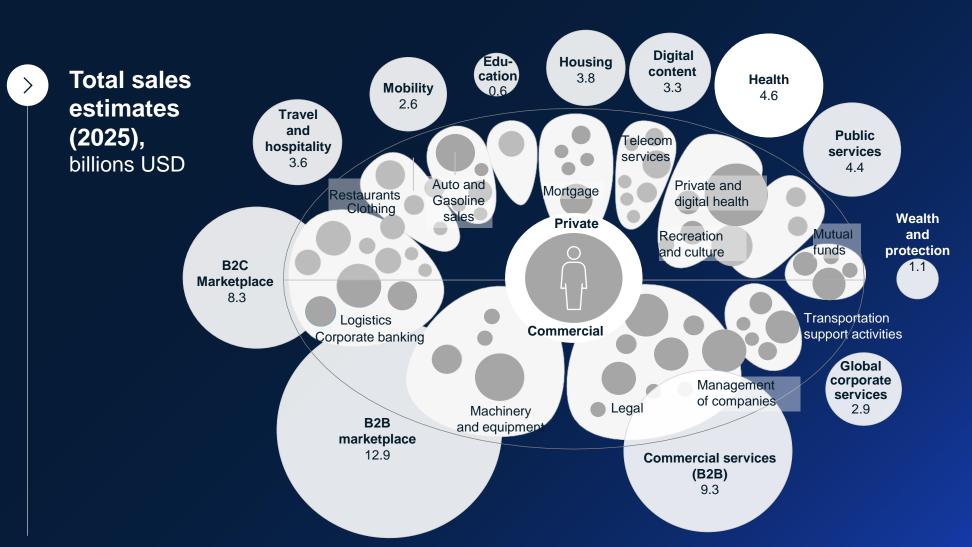


## 6. Healthcare ecosystems are expected to gain greater market share in the coming years...

Healthcare ecosystems will be leaders in growth

The global economy is merging with 12 major ecosystems that will account for 30% of global revenues by 2025<sup>1</sup>

Healthcare ecosystems belong to the top 5 income-generating ecosystems



<sup>1.</sup> Estimates based on corporate sales data, GDP industry breakdowns and expert assumptions. Circle sizes show approximate revenue pool sizes, smallest circle means less than USD 100 billion in revenues. Not all industries and subcategories are shown.

## 6. ...but there will be space for the most robust ones in Brazil, as we see in USA

USA healthcare ecosystems	Revenues USD, 2022	Description
M⊆KESSON	276,7 B	Distributes medical supplies, systems, pharmaceuticals, and provides an extensive infrastructure network for the Healthcare sector focusing on technological solutions
Optum	71 B	UnitedHealth Group subsidiary since 2011 with technology and related services, pharmacy care services and various direct healthcare services
Providence St. Joseph Health Tegria	27,6 B	Healthcare system founded in 1859 and merged with St. Joseph Health in 2016, operating 51 hospitals and medical clinics, +800 non-acute facilities, assisted living facilities and technology development for healthcare in Tegria
Tenet Health	20 B	65 hospitals, over 450 healthcare facilities, and operates Conifer Health Solutions, which provides healthcare support services to health systems and other clients
BON SECOURS MERCY HEALTH	11 B	Healthcare system in the U.S. following the 2018 merger of Bon Secours Health System, Inc. and Mercy Health. Operates 47 hospitals and other health care services in U.S. and Ireland

Brazilian healthcare ecosystems

Koro Saúde

**中MaterDei** 











Source: press clipping

## 6. To capture value at scale requires developing a healthcare ecosystem that connects different actors around the patient's needs

Healthcare
ecosystems
integrate value
chain participants
offering a seamless
journey and
reducing journey
fragmentation



#### **End-to-end experience**

Optimize ecosystems that connect services to seamless Journeys, retention consumers

**15%** new customers acquired through ecosystem users



#### **Digitization**

Optimize a digital platform integrating the patient journey involving players from several links of the chain



#### New business model

Integrate best-in-class health solutions with mutual value creation across all ecosystem partners e.g., new customer-centric services, data & analytics, and PaaS

**5%** additional revenue per customer



#### **Partnership**

Optimize capillarity through partnerships with regional players and use of new sales channels

Varies depending context

## 7. The distribution business is migrating towards specialization, additional services and vertical integration

MSKESSON	
Empowering Healthcare	Distribution solution
	Specialized drug ordering web platform, offering real-time pricing and inventory levels, tracking, billing and payment, and customized reports
<b>)</b> AmerisourceBergen	E2E solutions
es) cal	Additional services during manufacturing and distribution processes: development, commercial pre-launch and market maturation plan
FRESENIUS MEDICAL CARE	Vertical integration into home care
	Fresenius has focused on the integration of products and services for dialysis. In 2019 acquired NxStage by expanding its home care offer
CTELUS' Health	Patient monitoring
	An increase in trial volume has resulted in a need for long-term patien monitoring beyond traditional modalities, with organizations wanting to be equipped to track patients for 10+ years or manage and analyze complex data
	Express Scripts, benefits manager
	Pharmacy Benefits Manager: request, direct delivery, tracking and management of medications (recharge reminders)
n JDH 京东健康	B2B Open Market
	Serving more than 120 K downstream pharmacies and clinics.
	AmerisourceBergen es) cal  FRESENIUS MEDICAL CARE

<sup>1.</sup> McKinsey COVID-19 Survey: EU Physician Experiences, Expectations, and Perspectives on Pharma Engagement; survey in the field in Mayand September 2020

<sup>2.</sup> CIGNA Newsroom: CIGNA Moving from volume to value, 2019.

## 8. Clinical trial geographic footprint expansion mainly driven by interest in accessing international patient populations and lower-cost labor

Key drivers	Description of driver	
International patient	Sponsors are running an increasing number of multi-national trials (especially for Phase 2 and 3) that require heightened patient volumes, which are more accessible internationally	
populations	Well-established regions (e.g.; North America and Western Europe) are saturated in-patient recruitment, leading players to seek more fertile enrollment environments	
	Regulatory requirements are pushing CROs to seek diverse patient populations in new geographical markets	
	Russia in Ukraine war has long-term impacts on biopharma CT – these countries together contribute with 3.6% of global sites in CT performed by the innovative biopharma industry and an estimated 5% of global patients in those trials	
Cost labor	Rising margin pressures are causing sponsors (and thus CROs) to seek <b>low-cost</b> , <b>qualified medical professionals</b> (physicians, clinicians, investigators, etc.)	
	CROs are increasingly <b>outsourcing administrative / corporate governance tasks</b> to avoid high-salary environments in Western EU and North America	
്റ്റ് Robust patient enrollment	High medical costs could drive strong patient enrollment in order to access inexpensive trial medication and high-quality medical services (doctor visits, laboratory testing, etc.)	
Heightened global view post-COVID	COVID-19 has increased awareness of global disease transmission and highlighted how a regionally-specialized footprint can inhibit drug discovery and clinical testing efficacy	

## 8. Brazil could benefit from clinical trials' geographical expansion given its attractive environment for clinical research













### Relevant Pharma market

Brazil has the 7th
largest pharma
market globally,
which attracts
pharma companies to
conduct trials and
commercialize
products in the
country

### Public Healthcare System (SUS)

The Brazilian Public Healthcare System (SUS) provides a gateway for patient recruitment and represents a huge potential client for Pharma Companies (if products are incorporated into the system)

### Heterogenous population

Brazil's
heterogenous
population provides
a diversified pool to
test health
technologies,
providing ample data
on effectiveness and
potential side effects

## Excellent research centers and collaboration

There is a robust infrastructure in the country and many existing networks that provide collaboration opportunities

## Improved ethical and research regulations

The regulatory system is aligned to reference countries and has advanced significantly in the last years

### Cost of clinical trials

Clinical trials have a relatively lower cost in Brazil when compared to reference countries, especially due to low cost of labor force

### 8. Brazil ranks in 18th place in global clinical trials

#### Clinical trials<sup>1</sup> in Top 20 countries started in 2019

		Appx. share of global trials <sup>2</sup>	Country population, M
#1 - United States	9.840	33%	332
#2 - China	1.999	7%	1412
#3 - France	1.562	5%	68
#4 - Canada	1.363	5%	38
#5 - United Kingdom	1.166	4%	68
#6 - Spain	1.020	3%	47
#7 - Germany	867	3%	83
#8 - Italy	744	3%	59
#9 - Korea, Republic of	617	2%	51
#10 - Belgium	580	2%	12
#11 - Turkey	542	2%	85
#12 - Egypt	511	2%	109
#13 - Netherlands	492	2%	17
#14 - Denmark	476	2%	6
#15 - Australia	450	2%	26
#16 - Poland	415	1%	38
#17 - Taiwan	403	1%	23
#18 - Brazil	390	1%	214
#19 - Switzerland	358	1%	8
#20 - Japan	343	1%	125

<sup>1.</sup> Trials that were terminated, withdrawn or suspended were excluded from the database 2. Does not account for overlap due to multi-site trials

Source: clinicaltrials.gov and World Bank

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### 9. We identified 7 key trends in Wellness in the post pandemic world

Deep dive on the sequency



#### Wellness as priority

and consumer are spending more in Fitness, Better Health. Mindfulness and better sleep products are the new avenues for growth – 38% of consumers desire additional products in Better Mindfulness



#### The future is about a seamless fusion of

services and products, and the trajectory of expenditure is poised to pivot significantly towards the realm of services – 63% are expecting to spend more in services versus 57% in products



Wellness platforms can work as an acquisition strategy

for companies that focused on healthcare with clinics and hospitals on its business portfolios



#### Natural is out of steam.

consumers are more likely to choose higher effectiveness over natural components - 26 out of 33 categories have effectiveness preference



#### Consumers are embracing experimentati

on, investing time in researching the attributes and benefits of wellness products before making their choices – 77% spend time researching attributes or benefits before deciding what to buy



#### The reign of established brands continues.

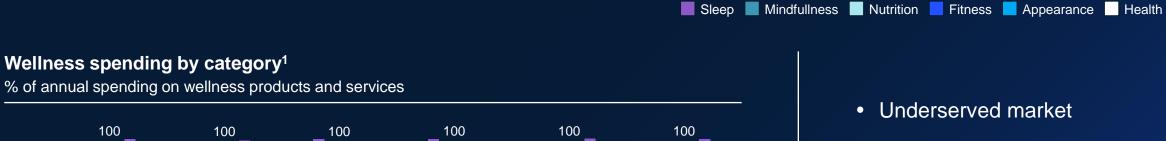
especially in the better appearance categories - 78% prefer established brands over others

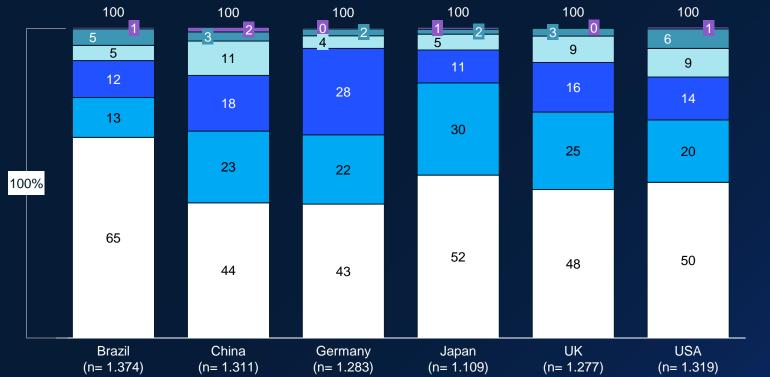


#### Added well being benefits products are the next growth frontier

(e.g. vitamin enhanced water. nutrient enhanced shampoo) - 77% are willing to pay more for enhanced products

## 9. Health, appearance and fitness are the biggest expenses of Brazilians, with demand for services increasing in recent years





- Prioritization of well-being is increasing faster than the level of well-being of consumers
- Willingness to pay tends to remain or increase

**>>>** 

- Migration to digital channels
- Increased demand for services that meet mental and physical health needs

<sup>1.</sup> Question: Approximately how much money have you spent on each of the following in the past 12 months? Figures may not sum to 100%, because of rounding.

## 9. Incentives to win over users from wellness platforms can be provided based on membership advantages



## Customer advantages from using partner platforms

Partial or full **assumption of subscription or premium version costs** for selected partners (e.g., assumption of costs given regular training participation)

**Tokens** issued to insured to use for partner platforms (e.g., 5 tokens per year where one token can be redeemed for a free month membership with any partner app)



## Advantages in insurance terms for partner platform users

Contribution refunds (e.g., cash back) or extended cost reimbursement (e.g., for certain preventative services) for partner platform users (e.g., given regular use)



### Special offers exclusively available to insurance members

Special platform-specific offers for insureds (e.g., live courses with familiar sports personalities)

#### **Exclusive bundles**

(e.g., platform links with content, enabling training and nutrition plan integration)

## 9. There are multiple domains to explore across products and services in the wellness space

Share of Wellness wallet reported by consumers

↑ Spend comparison from 2021 survey













Illustrative examples across categories:





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