



# DOCUMENT 09

## Budget Reality & Spend Capacity by Vertical

Path: /sales/docs/09-budget-and-spend-by-vertical.md

### Purpose of This Document

This document answers one question:

**“Can they afford this, and how much should I push?”**

If you know the **real budget**, you control:

- pricing confidence
- deal size
- commission upside

### 1) Schools (Public, Charter, Private)

#### Where the Money Comes From

- Student health services budgets
- State and county health programs
- Federal and state grants
- District-level discretionary funds

#### Typical Budget Ranges

- School-level pilots: **\$10,000–\$50,000**
- District programs: **\$50,000–\$500,000+**
- Multi-school rollouts: **\$250,000+**

#### What’s Easy vs Hard

- Easy: pilot at one school or subset
- Hard: full district rollout without pilot

### **Pricing Sweet Spot**

- **\$25–\$50 per student scan**
- Push toward **subset pilots first**, then expand

## **2) Charities & Nonprofits**

### **Where the Money Comes From**

- Donor funding
- Foundation grants
- Public health sponsorships
- Corporate partnerships

### **Typical Budget Ranges**

- Program pilots: **\$10,000–\$40,000**
- Annual programs: **\$25,000–\$250,000**
- Sponsored initiatives: **\$100,000+**

### **What's Easy vs Hard**

- Easy: impact-driven pilot with reporting
- Hard: enterprise-scale rollout without sponsor

### **Pricing Sweet Spot**

- Anchor pricing to **impact per dollar**
- Mix sponsored + paid scans when possible

## **3) Gyms & Wellness Centers**

## **Where the Money Comes From**

- Marketing budgets
- Member experience budgets
- Partnership and sponsorship funds

## **Typical Budget Ranges**

- Single-location pilots: **\$5,000–\$15,000**
- Small chains: **\$25,000–\$75,000**
- National brands: **\$100,000+**

## **What's Easy vs Hard**

- Easy: owner-approved pilots
- Hard: corporate wellness approvals

## **Pricing Sweet Spot**

- Awareness + cosmetic monitoring
- Lower compliance friction, faster closes

# **4) Dental Practices & DSOs**

## **Where the Money Comes From**

- Technology budgets
- Operational efficiency spend
- Revenue optimization initiatives

## **Typical Budget Ranges**

- Solo practices: **\$1,000–\$5,000/month**
- Group practices: **\$5,000–\$20,000/month**

- DSOs: **\$50,000+ annual**

### **What's Easy vs Hard**

- Easy: one-location pilot
- Hard: full group rollout without proof

### **Pricing Sweet Spot**

- ROI-driven pricing
- Emphasize **~4x ROI** and monitoring use cases

## **5) Senior Living & Assisted Living**

### **Where the Money Comes From**

- Health and safety budgets
- Risk management budgets
- Operations budgets

### **Typical Budget Ranges**

- Facility pilots: **\$15,000–\$40,000**
- Multi-facility programs: **\$75,000–\$300,000+**

### **What's Easy vs Hard**

- Easy: pilot framed as risk reduction
- Hard: price-first conversations

### **Pricing Sweet Spot**

- **\$25–\$50 per resident scan**
- Monitoring programs increase contract size

## **6) Government & Public Sector**

## **Where the Money Comes From**

- Public health allocations
- Grant funding
- Preventive care initiatives

## **Typical Budget Ranges**

- Pilot programs: **\$25,000–\$100,000**
- City or county rollouts: **\$100,000–\$1M+**

## **What's Easy vs Hard**

- Easy: grant-backed pilots
- Hard: unfunded mandates

## **Pricing Sweet Spot**

- Tie spend to **cost avoidance**
- Never underprice public contracts

# **7) Corporate / Employer Benefits**

## **Where the Money Comes From**

- Benefits budgets
- Wellness budgets
- HR discretionary funds

## **Typical Budget Ranges**

- Per-employee wellness spend: **\$100–\$500/year**
- Pilot cohorts: **\$25,000–\$75,000**
- Enterprise contracts: **\$100,000–\$500,000+**

## **What's Easy vs Hard**

- Easy: limited employee cohort pilot
- Hard: full workforce without pilot

## **Pricing Sweet Spot**

- Preventive benefit positioning
- Avoid insurance dependency entirely

## **Budget Rule to Memorize**

**If a buyer says they “can’t afford” a \$5k–\$15k pilot, they are not your buyer.**