

NATIONWIDE PRIMARY HEALTHCARE PVT. LTD.

Bangalore, India

***Study of For-Profit
Family Physician Based Health Models***



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NationWide Primary Healthcare Services Pvt. Ltd was founded in April 2010 with the aim to revolutionize the way primary care is delivered in the community. Founded by Dr. Santanu Chattopadhyay and Dr. Shantanu Rahman, both eminent UK-trained doctors and supported by a team of management experts, NationWide envisages bringing the best international practices in Primary Healthcare to India and spearheading a paradigm shift in India's healthcare delivery system. The firm received equity financing of INR 50 million (USD 1 million approximately) from an angel investor in December 2010 and established a chain of ten clinics across Bengaluru, India. In October 2012, it received another INR 250 million (USD 5 million approximately) from Norwest Venture Partners and is aiming to grow to a size of 120 clinics in the next two years.

This report provides an in-depth understanding of the healthcare model setup by Nationwide – the salient features of the model, challenges faced in implementing it, innovative approaches used and strategies adopted. This report may be considered a first step towards analyzing the feasibility of private equity investment in primary care sector and its scope as a solution to meet the growing needs of this sector especially in the developing world.

Introduction

NationWide was founded in April 2010 with a **vision to become the most trusted and respected primary healthcare provider in India**. The founders Dr. Santanu Chattopadhyay and Dr. Shantanu Rahman are both UK-trained doctors with several years of experience working in the National Health Service (NHS) at UK in the field of family medicine. Teamed with management experts – Dr. Chattopadhyay himself got a Master’s in Business Administration from INSEAD, Fontainebleau to develop his business and management skills - the team was focused on delivering primary care but was also aware that the healthcare market in India was unorganized and had a large number of existing players. They instead worked to develop a model that helped them create a ‘blue ocean’ – a strategy to create and capture an uncontested space.

NationWide divides the health user population in Bengaluru, India into four target segments based on their ability to pay for health services:

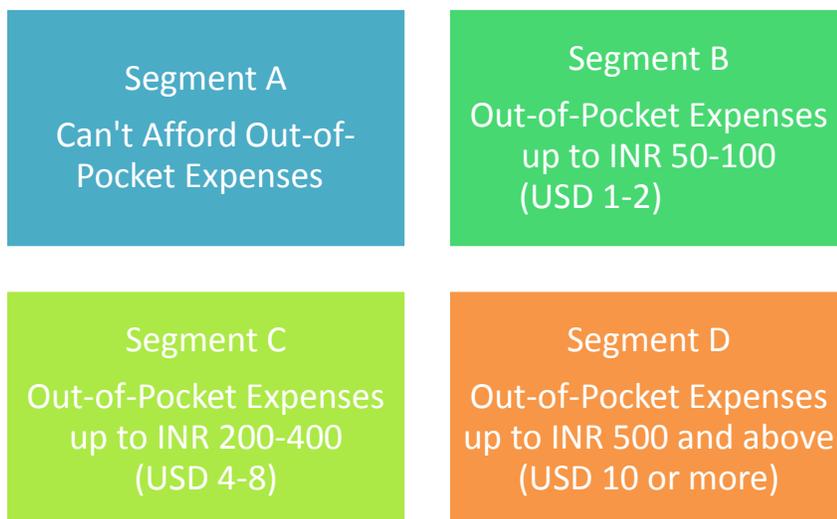


Exhibit 1 Four segments of the health user population in India based on their ability to pay for services

According to NationWide, health services for the population in Segment A can be reached only through public-private partnerships. Dr. Chattopadhyay says that the needs of the population and the resources required are too diverse and massive for a private enterprise to deliver the services using market efficiency principles alone. NationWide is interested in extending its services to Segment B – Individuals/ families who have low wage employment but a steady income and can afford an out-of-pocket expense of up to INR 50 to 100 (USD 1-2 approximately) per episode of treatment needed. They plan to implement pilots for this segment in the next 6 months. The team anticipates that the model will differ significantly from that in use for Segment C of its health user population. It is hopeful, however, that the backbone of the model for Segment B would be informed and supported by the model used for segment C.

NationWide is currently focused on Segment C – Individuals/ Families with higher incomes and who can afford an out-of-pocket expense of INR 200–400 (USD 4-8 approximately) per episode of treatment needed. Segment D which NationWide defines as individuals/ families who can afford out-of-pocket expense of INR 500 (USD 10 approximately) and above are not targeted specifically by their clinics.

Program Objectives:

- In 18 months to 2 years, expand to 20 hubs and 100 satellites for Segment C
- Establish a test pilot for health care services tailored specifically for Segment B
- Establish a public-private partnership with the State government of Karnataka to setup a healthcare services program for Segment A

History

After Dr. Chattopdhyay completed his MD from Postgraduate Institute of Medical Education and Research, Chandigarh (a premier institute for medical science in India), he moved to UK and after clearing the examination obtained Membership of the Royal College of Physicians (MRCP). Dr. Rahman, co-founder and Medical Director at NationWide, went to UK after completing his Bachelor's in Medicine in India. After receiving Membership from Royal College of General Practitioners (MRCGP), he established a general practice office and became Principal and Managing Partner for the practice, acquiring years of experience in establishing and running a general practice under the NHS system. The two doctors came back to India pursuing their love for challenges and their desire to work in India. They stroked their passion to become game changers and revolutionize the way primary healthcare is delivered in India. Dr. Chattopadhyay himself got a Master's in Business Administration from INSEAD, Fontainebleau to develop his business and management skills and worked in private firms from the healthcare sector further developing his business and analytical expertise.

Stages of Model Development for Segment B

Phase I: In its early phase, NationWide setup a satellite office in a corporate center, creating just enough backend support to help them start consulting with clients while still keeping the capital expenditure low.

Phase II: In the next phase, NationWide opened their office for GP consultations but the services were available only to subscribers of a health plan that their office provided. This model was not successful since the cultural acceptance for “pay as you go” model for health services is almost non-existent in India as of now.

Phase III: After the first two phases, NationWide changed its model to a walk-in model. In the model, it setup walk-in clinics, with each clinic having three to four family physicians and catering to a population of about 15000. This model found traction in its early days. NationWide also sought feedback from its patients to assess their needs and demands. The most common findings were:

- Patients like everything under one roof
- Patient also demanded ambulance services

- Families often needed a pediatrician and preferred to have them co-located with the family physician

NationWide used the feedback to revisit its strategy and match its model with current needs and demands

Phase IV: In phase IV, NationWide created satellite clinics. These satellite clinics are connected with the walk-in clinics and provide on-site consultation and sample collection. The visiting physicians vary their frequency depending upon the demand and population at the satellite site. These clinics are mostly at corporate sites or at apartment complexes.

Program Description

NationWide is working on the concept of “Bringing back the Family Doctor” aiming to revive the age-old family doctor model that worked so well, but has literally disappeared from the Indian healthcare scenario over the past decade¹. The dominant strategy adopted by NationWide when setting up its operations is based on a three step process:

- Setting up basic clinic services (clinic sizes range from 200-400 sq. ft.)
- Setting up satellite clinics. The satellite clinics are all connected with one of the main clinics that serves as a hub for several such satellite clinics
- Establishing institutional tie-ups
 - Corporate tie-ups (NationWide had six such tie-ups as of October 2012) where the employer pays for providing services to its employees. NationWide sets up satellite clinics at the corporation’s office and provides long-term benefits for employers for instance specific analytical reports such as prevalence of a certain health problem in a specific division of employees and the management techniques for those problems
 - Tie-ups with Gated communities (NationWide had three such tie-ups as of October 2012) serving the community in exchange for fee

The chain’s primary care clinics focus on bridging the gap between fragmented general practitioner (GP) services and highly expensive super-specialist hospital care, by creating a single-point of medical care for their patients’ everyday healthcare needs. NationWide clinics are geared to provide first point-of-care for all medical needs for a family. The clinics provide personalized general practice based on the GP service practice in the NHS system and pediatric services. The clinics also offer health plans for subscription. The treatment guidelines focus on proactive management of everyday ailments as well as chronic disease management for non-communicable diseases such as diabetes, hypertension, asthma, etc.

NationWide setup its first clinic in April 2010 after receiving private equity financing of INR 50 million (USD 1 million approximately). By Spring 2011, they had a network of three clinics and seven satellites that were based on a hub and spoke model. In October this year, NationWide received another burst of financing from a

¹ Nationwide Website

leading US based venture capital firm, Norwest Venture Partners of INR 250 million (USD 5 million approximately). With this funding, NationWide will be growing to a size of 20 hubs and 100 spokes (five to six spokes associated with each hub) attaining a market size of about 120 clinics across Bengaluru.

Services Offered:

Services offered at walk-in clinics:

- **Family Physician Services:** Each NationWide clinic has a team of family physicians available from 8.30 am to 8.30 pm Monday to Saturday and on Sundays from 8.30 am to 1.00 pm. The family physicians are all MD's/ MRCGP's qualified in family medicine from either US, UK, Australia or from India having earned the Diplomate of National Board in Family Medicine. The family physicians at NationWide clinics are familiar with the latest international protocols and guidelines for treatment and follow evidence based practices.
- **Specialist Services:**
 - **Pediatrician:** NationWide Clinics also provide pediatrics services open for walk-in patients as well as for families subscribing to health packages offered by the clinic. The pediatrician, where possible, provides consultation based on the medical history of the family and works in coordination with the family physician. By housing pediatric services under the same roof as family physician, NationWide makes it convenient for families to meet the entire family's healthcare needs at a single point of delivery
 - **Specialist Referral:** NationWide maintains a referral panel with specialists or super-specialists selected based on their clinical experience, qualifications and patient reviews. The family physician at NationWide reviews the patient's needs and based on specific requirements, including clinical needs as well as personal needs, refers the patient to the right specialist/ super-specialist. NationWide provides at least two such referrals and the patient is free to choose either or any other doctor of his/ her own choice. The referral service is particularly useful for patients feeling confused about what kind of specialist they should see for a particular health problem.

NationWide has no financial tie-ups with any of these specialists and at no point does any financial transaction take place in the entire referral process

- **Home Visits:** For patients having medical emergencies not requiring immediate hospitalization or those patients with mobility problems, NationWide family physicians also provide home visits. The service is available to both families subscribing to a health package from the clinic as well to other patients.
- **24/7 Doctor-On-Call:** NationWide provides a 24/7 helpline available to all patients and their families who are subscribers of health plans from the clinic. The helpline connects the patient to the physician, preferably the patient's personal physician, but in some cases it may also be the doctor-on-call in the absence of the personal physician. The physician depending on the patient's condition and needs provides consultation either over the phone, or schedules an appointment. In cases of emergency, NationWide also informs the nearest ambulance service to reach the patient. The physicians even when consulting the patient on call have access to the patient's records on the electronic health record system enabling them to provide right care for the patient's needs.
- **Lab Tests and Pharmacy Benefits:** NationWide has tie-ups with diagnostic and laboratory test providers. Each of its clinics has sample collection facilities available and have staff trained in phlebotomy and sample

collection. The diagnostic labs associated with NationWide are accredited by the National Accreditation Board Limited (NABL) and College of American Pathology (CAP). NationWide is also in the process of setting up pharmacies at each of its clinics in order to become a one-stop solution for its patients. The medicines stocked by the pharmacy will include branded drugs as well as genuine generic brands.

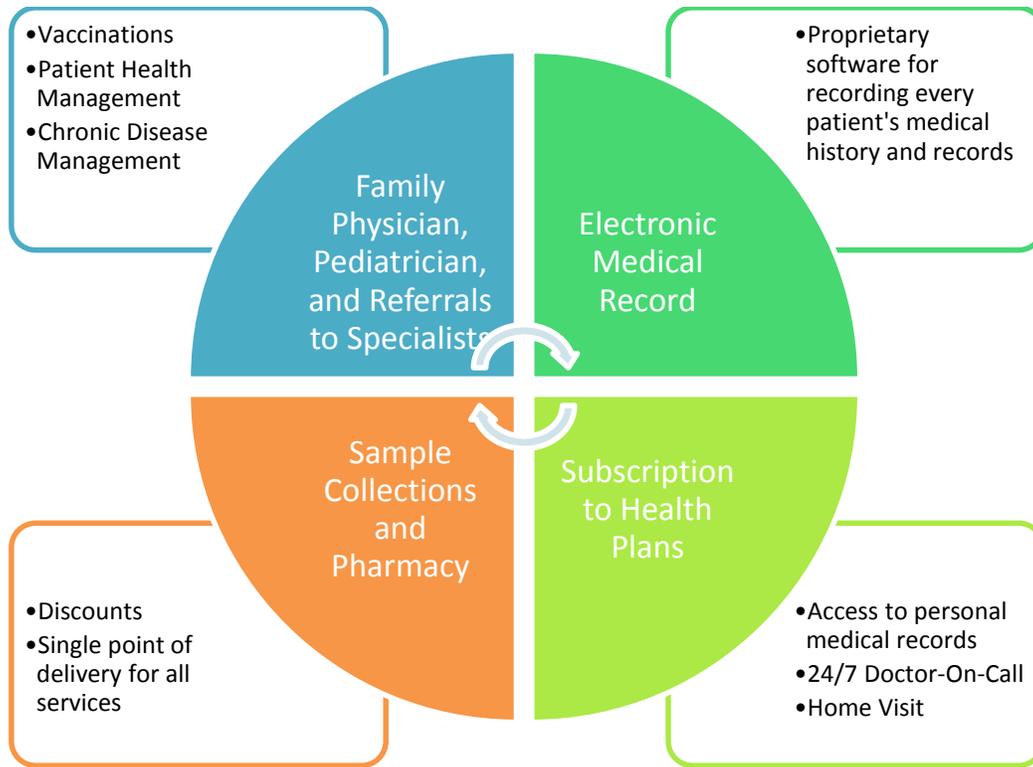


Exhibit 2 Map of Services provided at NationWide Clinics

- **Vaccination Services:** Each NationWide is equipped to provide vaccination and immunization services to its pediatric clients as well as adult clients. The clinics also provide consultation on what optional vaccines are available and what impacts can they have.
- **Online Electronic Medical Record:** NationWide team of doctors has collaborated with an external software development firm to build a proprietary electronic medical record system (EMR) that uses a cloud based data storage system. The EMR makes patient record and data accessible to all NationWide physicians. Patients/ families who have subscribed to a health plan from NationWide also have access to all their medical records and data through this EMR. The EMR makes patient consultations save time on administrative matters like going over history etc. and allows the physician to spend more time with the patient discussing current health matters and the treatment process for these. It also makes consultations more correct as the physician is able to assess the patient in the context of his or her long-term health condition and not just the present disease.
- **Chronic Disease Management:** Among the population in the target segment directly serviced by NationWide, the incidence of chronic diseases has been quite significant. As a result, NationWide runs special health programs tailored specifically to the needs of the population in this group. The aim of the

program is to provide continuity of care that patients with chronic diseases need including monitoring and regular medication. NationWide has created a special training module to prepare its physicians for servicing this target segment and expose them to international guidelines for chronic disease management such as NICE (National Institute for Clinical Excellence) from UK.

- **Subscription Plan:** NationWide also offers different health plans for different healthcare needs of its target population. Subscriptions are available for individuals as well as for the whole family. The subscribers can avail multiple benefits that include free clinic consultations, and access to their medical records and data through the online EMR system. Subscribers also get free tele-consultations through the 24/7 doctor-on-call service, and receive discounts on lab and pharmacy service and other network of providers associated with NationWide including diagnostics and hospitals. In addition, for senior citizens who are subscribers of a health plan, there are special discounts for home visit services.

Services offered at satellite clinics:

NationWide satellite clinics cater exclusively to corporate employees or to large gated communities. The services offered at these sites are:

- On-site physician: NationWide physicians provide on-site consultations at satellite clinics on specified days and between specified timings
- Tele-consultations: Patients from these sites can also avail tele-consultation facilities for times when the physician is not available at the satellite clinic
- Routine Health Checks: Corporate clients or apartment communities can seek NationWide physicians to plan and annual routine health checks for their communities. The health checks are conducted by NationWide physicians on-site
- Health education: NationWide physicians organize seminars and health talks on diverse topics relating to health care including talks on stress management and parenting.
- Health risk analysis for the community (corporate/apartment): NationWide uses the data from health checks to analyze the health profile of the community and on request develops a health plan specific to the community's health profile
- Other customized solutions: Corporate and residential communities can also approach NationWide for designing tailor-made health plans meeting their specific needs. For e.g. corporates can engage NationWide to provide pre-employment health checks for all its new employees; apartment communities can have vaccination drives for the entire community.

Human Resource

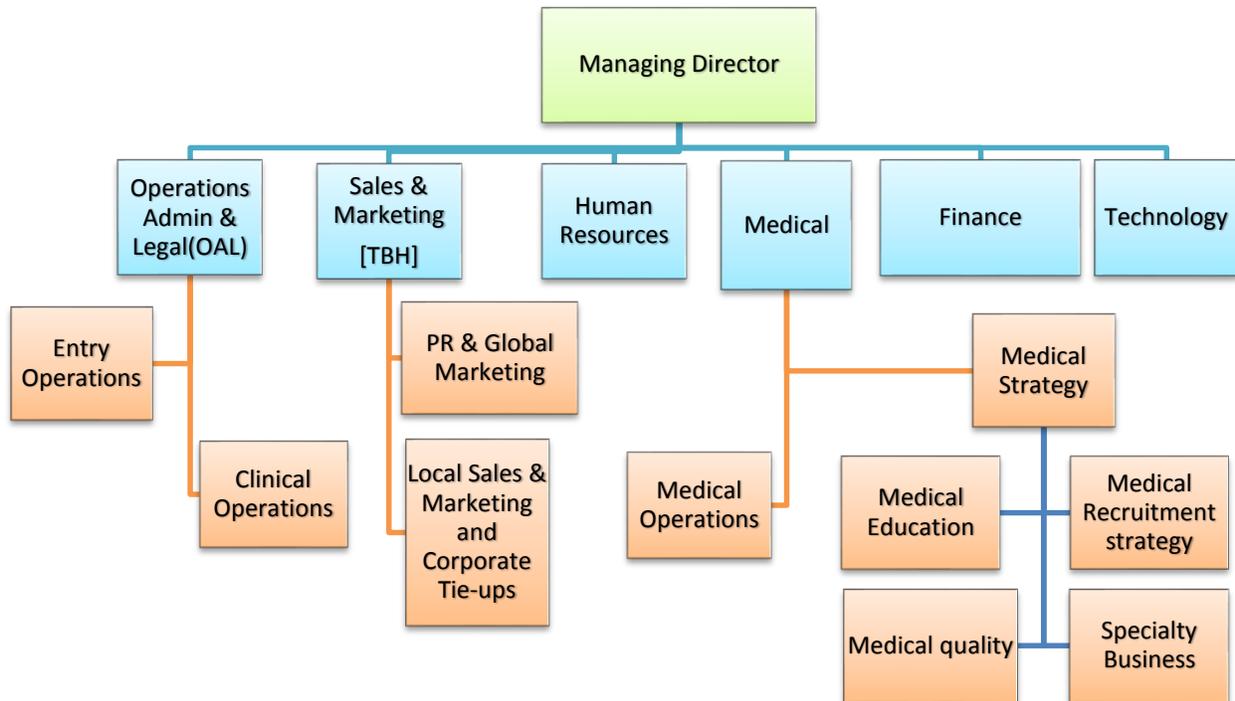


Exhibit 3 Organizational Chart for NationWide Healthcare

Recruitment:

NationWide has faced maximum challenges on the supply side. They find few doctors who are either trained or willing to work in the family medicine practice. Initially, when recruiting they hired doctors who met the minimal requirements as long as they were interested in family medicine. To ensure that the hired doctors delivered the same standard of quality care which NationWide wants to make its hallmark, they provided extensive training in standard protocols and practices (referred to amongst the NationWide team as the 'NationWide Ways'). In their experience this was a better alternative to finding doctors who had higher qualifications but were unwilling to work in family medicine as a career choice.

The channels used by NationWide to find clinical staff:

- Naukri.com – an online job search portal specializing in professional and IT related head hunting services
- Advertising at hospitals which have DNB programs in Family Medicine *(There are very few candidates, however, since there is less awareness for family medicine as a career option in the country. Dr. Chattopadhyay feels that more awareness campaigns will help make family medicine more acceptable and a popular choice)*

- Referrals and social network: Doctors retired from the armed forces, general practitioners (GPs) currently practicing in UK/ US/ Australia and looking to come back to India provided they can find a comparable health system

Developing a Cadre of physicians to bridge the human resource gap:

Facing challenges in finding qualified and skilled workforce, NationWide is strategically focusing on developing a cadre of physicians trained to practice family medicine. To accomplish that NationWide has adopted two specific strategies:

- Develop a curriculum which is at par with the MRCGP in UK
- Strengthen the training program and shortly make it a vertical on its own to sustain the supply of physicians as NationWide scales up its presence

NationWide has chosen not to adopt practitioners from alternative medicine such as ayurveda, homeopathy, yunani or sidh medicine. These are all medicine practices which the Government of India approves for providing primary healthcare and practice allopathic medicines (as practiced at NationWide clinics).

NationWide has developed several guidelines for their recruitment process. The specific qualities NationWide looks for in its doctors are good clinical skills to deliver effective and efficient care, and emotional acumen such as attitude, teamwork, interpersonal skills etc. NationWide has experienced that when hired physicians have basic qualities such as empathy and passion for quality healthcare, and above all a desire to make family medicine their career choice, there have been low attrition rates for among these recruits. Any turnover that did occur have been either due to personal factors or because NationWide did not find the candidate meeting the NationWide benchmark.

NationWide's strategies for retention:

- Build a brand
- Create awareness for family physician as a career choice
- Build a curriculum to attract the doctor and provide an opportunity to grow

Training:

NationWide has a strong training program that is tailored to provide the physicians skill-training not only on clinical aspects, but also communication skills to develop good bonding with their patients. The training program is an important part of NationWide's processes and 10% of each clinician's time is allocated for training. The training schedule runs once every week and the commitment to the training program is such that the clinics are closed for training and continuing medical education on those days except for emergency and 24/7 doctor-on-call services.

- The training module includes:
 - Case based discussions

- Discussions with the doctors to give insights on clinical perspectives and inculcate in them the NationWide values and standards
- Pointers and skills for identifying and addressing specific latent needs of their patients. Role plays and training materials are used to educate practitioners on these aspects (*many issues are easier to discuss when you approach them as a GP rather than as a specialist - especially on psychological issues*)
- Discussion of the quality framework and how to serve the customer within the framework

Dr. K Mohanna from the National Health Services UK is doing a research to study why Asians are failing to clear MRCGP . The findings indicate that most physicians from Asia lag mostly in training (Dr. Mohanna is validating her study by visiting different centers to see what they are doing)

As part of her study she visited NationWide and conducted a training session. The training session was made available to participants from outside the NationWide team and several students from Family Medicine attended the training online.

Continuing Medical Education and Career Advancement:

NationWide uses the one year curriculum used by Royal College of General Physicians for their training program. The curriculum has been adopted for the Indian context and several modifications have been made. The curriculum and hands-on training that each physician receives at NationWide also prepares these doctors for taking the MRCGP exam. According to Dr. Rahman, the training module prepares the doctors for the MRCP exam within two years.

NationWide also enables each of its team members for vertical growth as well as horizontal growth. Based on their performance, a physician with two to three years of experience and after spending at least 18 months at NationWide and acquiring sufficient experience in the NationWide standards of clinical practice are given the opportunity to choose their next level of advancement either to the consultant level or, depending on their choice to go into a horizontal, to human resource or executive management.

Performance Evaluation

Every physician at NationWide goes through a Medical Assessment once each year on components both clinical and non-clinical. The assessments are based on the following metrics and each physician is scored from one to five.

- Ability to respond to the clinical scenario
- Practice techniques
- Objectivity in his/her approach
- Presence of mind
- Ability to handle uncertainty
- Communication skills
- Relationship building

- Giving information
- Specific attributes a Family Physician needs to have
 - Team player
 - Empathetic
- Feedback from customers – Customer satisfaction
- Feedback from peers

Each nurse and other non-physician members of the team undergoes an evaluation that is based on the following metrics

- Feedback from manager
- Feedback from external source – patient satisfaction scores, employee satisfaction – filled every quarter)
 - Effort is made to keep the questions actionable*
- Professionalism - timeliness, appearance, behavior, team skills
- Task performance: Manual transactions - error count, frequency of errors; ability to learn

NationWide uses the data from performance evaluations and an assessment of behavioral aspects - measuring their attitudes - to further employee engagement, and help them evolve as better individuals, physicians and team workers.

QUALITY OF CARE:

One of the guiding principles that NationWide clinics adhere to is to deliver quality care to each and every one of its customers. To implement this principle in action, NationWide has defined several quality parameters both internal and external. External parameters evaluate quality of care standards based on customer’s feedback and experience. Internal parameters measure quality of care against clinical standards adopted by NationWide from international guidelines which are mostly clinical evidence-based and outcomes based protocols but also non-clinical standards.

Standardized protocols and processes – clinical and non-clinical:

- Clinical standards:
 - Evidence-based clinical protocols for standard diseases and diseases seen more frequently in the clinics

These protocols are adopted by NationWide for local implementation (Hospital based protocol will differ from rural or GP practice)

- Parameters adopted from clinical research published in peer reviewed journals such as Journal Association of Physicians of India and other international journals
- Non-clinical standards: Overall patient experience at several points of contact in the system

To enforce and evaluate adherence to these standards, a quality audit is conducted every quarter by the quality team. The team has three members with specific roles - designing audits, implementing the audit, and analyzing the results.

Quality Audits are based on parameters and compliance is measured and rewarded:

- External
 - The doctor gets rated by customer (patient)

NationWide clinics have a feedback rate of almost 75% from returning patients and about 100% feedback from new patients
 - The doctor gets incentives on patient satisfaction. The average scores strived for are between 4.5 to 5 on a scale of 5
- Internal
 - Clinical Audits also evaluate if the doctor is providing care that will have the right clinical outcomes (right care should not be based only on meeting patient’s immediate expectations, but also on achieving long term health outcomes that are positive)
 - Effective use of EHR

Market Dynamics

Target Segment:

NationWide clinics are targeting the population in Segment C as per their own segmentation of health seeking population based on their ability to pay for services (Exhibit 1 Four segments of the health user population in India based on their ability to pay for services). Families in this segment have an average annual income of INR 500,000 to a million.

While all NationWide clinics cater to patients from a demographic group largely similar on economic status, there are some variations in the market response each clinic has received based on its location.

Whitefield Clinic:

This clinic was established in January 2011 after a preliminary research of the area. Whitefield is a relatively newer neighborhood in the city. The booming information technology sector in Begaluru is attracting many young people (both individuals and families) to the city and due to its proximity to many of these software development centers Whitefield is a preferred neighborhood for many of these new immigrants to the city. The healthcare landscape in the area is however not well-developed. A basic windshield survey NationWide team carried out revealed that the area had a growing number of residential apartments but there were no healthcare providers within five to seven kilometers of the chosen location. Since its establishment the

NationWide clinic at Whitefield has been successful in delivering primary healthcare to its community here which demands access to quality care and is willing to pay for it.

Indiranagar Clinic:

This clinic was established in December 2010 and also serves as the corporate headquarter for NationWide. The neighborhood is one of the more affluent and older neighborhoods in Bengaluru. It is also quite saturated when it comes to the presence of healthcare clinics and super-specialty hospitals within driving distance. NationWide however found that the area lacked access to basic primary healthcare services that adhered to high quality standards, was accessible and convenient and followed patient-centered clinical processes. The clinic is now two years old and has slowly gained recognition in the area, simultaneously also establishing itself as the only provider of family physician based care in the area.

Koramangala Clinic:

This clinic is the newest, established in February 2012 among the three hubs NationWide has currently. The demography in this neighborhood is very similar to that of the Indiranagar clinic. Each successive implementation by NationWide has seen faster growth however and Koramangala clinic has seen that effect too.

Health Patterns of individuals from the target segment that NationWide Clinics are serving

The demography serviced by NationWide comprises a mix of mostly young families and a small subset of the elderly population. The young families also bring in a significant proportion of kids into the mix.

The diseases most commonly seen in the target demography are acute or lifestyle related chronic problems - diabetes, hypertension, vitamin D deficiency etc., and increasingly now also patients with anxiety/ depression/ mental health issues. The clinics also receive patients facing episodic events.

Demand (within the target segment)

The need for primary care service is seen more in new Bengaluru, since people not native to the city have moved here for work. These immigrants had access to family doctors in their hometowns and are looking for access to health services in their new city. To add, these young immigrants are professionals in the highest paying job sectors and have a paying capacity that's high. As a result, the Whitefield clinic has the highest patient volume of about 500 patients a month among NationWide clinics. The market share this clinic has been able to occupy is about 50-60 percent. The Indiranagar clinic, which is the oldest NationWide clinic has a current market share of about 30-40 percent. Koramangala clinic which is only about six months old already has a market share of 30-40 percent in its community. According to Dr. Satish Jeevannavar, NationWide has seen a hundred percent growth in demand between quarter three vs. quarter four for year 2012.

Outreach Techniques

NationWide categorizes its outreach techniques into two major groups:

Local marketing techniques focus on creating awareness in the surrounding localities and achieving a critical volume. The activities range from

- Awareness campaigns for NationWide as a provider for first point of care for all medical needs
- Health checkup camps (free of cost) where public footfall in a mall, a residential complex or localities
- Health Talks and seminars -in similar venues
- Other strategies for increasing footfall such as flyers etc.

Global Marketing techniques: Creating awareness in broad messaging forums, across geographic regions and targeted mostly on brand positioning. Activities range from

- Talking to a journalist and running stories in newspapers and magazines
- Media presence in print and online
- Employing business to business and business to community communication strategies for expanding reach and having a network effect
- Tapping the community influencers (for e.g. sr citizens who want to give back to society and doing volunteer work)

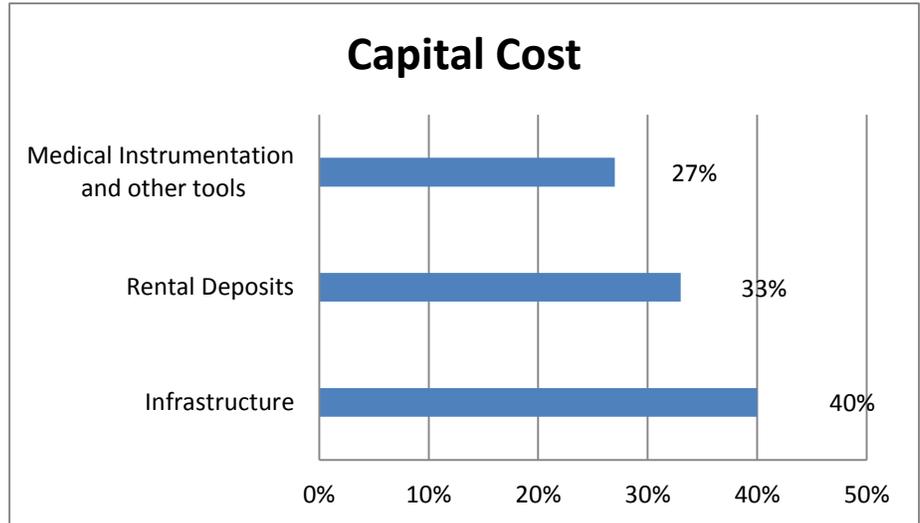
Value-add program provides

- NationWide physicians and the entire health team focuses on the patient's long-term wellness. The team tries to generate awareness among their patients and monitors their health so as to detect health issues at early stages. The patients find it a great value to have the doctor accessible and affordable, and to have the assurance that they are preventing diseases.
- In family medicine it is important to understand the family history of the person. At Nationwide no checks and diagnostics are referred indiscriminately. The patient is required to first see the doctor. Based on evidence and family history a NationWide physician decides what tests may be needed. The consultation also tries to minimize lab tests. The interaction is not invasive but more information and consultation based.
- All patients who subscribe to health plans from NationWide can avail services such as video consultation, and telephonic consultation. Subscribers also have access to medical records through a cloud based EMR system.
- NationWide provides referrals to specialist and tertiary care centers with whom they have tie-ups with. NationWide patients receive discounts and preference for appointments. NationWide subscribers also avail practice benefits from corporate tie-ups between the health clinic and diagnostic and lab service providers.

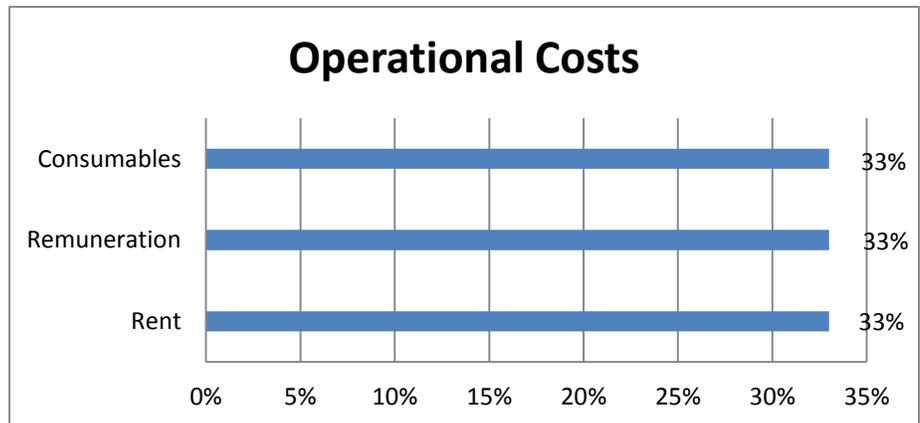
Financial Model

Capital Costs

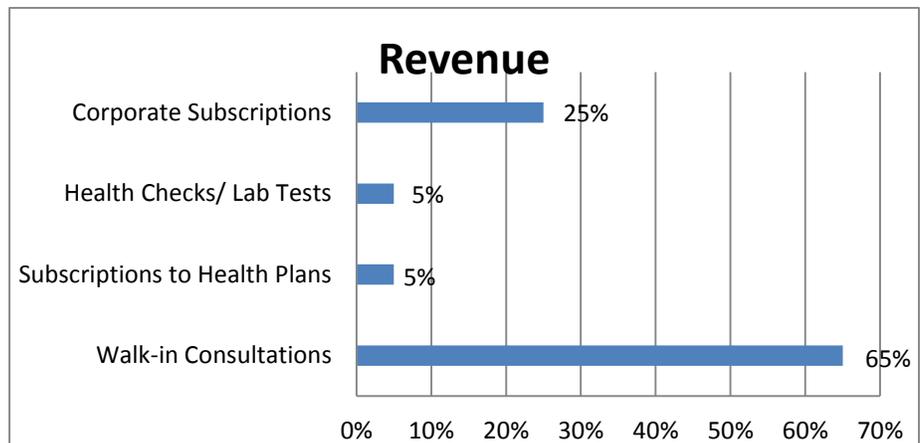
NationWide opened its first walk-in clinic when it received a private equity of INR 50 million (USD 1 million approximately) in December 2010. It opened two other walk-in clinics subsequently. Each clinic has a capital cost of about INR 2.5 million (USD 50000 approximately). One third of these costs are for rental deposits.



Operational Costs



Revenue



Impact

Milestones:

In its 22 months of operations, NationWide has achieved a steady growth in corporate/ subscription/ walk-in clients. It has also done well in maintaining continuity of its subscribers achieving almost 90 percent re-subscription rates.

Goal1 – Reinvent Family Medicine

NationWide has developed a comprehensive training and professional development program to train doctors qualified in family medicine according to international guidelines.

Goal 2 – Outreach

Every other week NationWide team of family physicians conducts a health camp in public places like shopping malls, rotary clubs, and at business parks. Camps are also organized for govt. schools (Rotary club Indiranagar has sponsored camps benefiting 1000 plus students). Each clinic conducts a health camp every month and leaflets are distributed in the immediate neighborhood informing the community about services available at NationWide clinics and other upcoming events. NationWide also uses other social media forms such as facebook, linkedIn and the Association of Family Practitioners in India to name a few to gain recognition for the NationWide brand.

Goal 3 – Make Primary Care Affordable and Convenient

NationWide clinics charge a consultation fee of INR 200 (USD 4 approximately) per visit. If the patient needs to consult within a week of the first consultation, he can do so at a cost of INR 100 (USD 2 approximately). Consultation fee for a specialist however is INR 300 (USD 6 approximately). A revisit within a week of the first consultation costs INR 150 (USD 3 approximately). These prices are lower than prices charged by most market players for the same target segment.

40 percent of NationWide customers are covered under employer's insurance for their medical expenses. For 70 percent of the patients, medical expenses are out of pocket.

Goal 4 – Improve Quality of care

NationWide spends quality time creating guidelines - qualitative and quantitative protocols that have been based on the NICE framework but modified for the local context. The guidelines once locked-in are provided to doctors. Once implementation is in place, audits are done to pick-up gaps. Currently the audit is paper form based however NationWide is working to transition this to the EMR.

NationWide has also added specific features in the EMR that add value to the quality process:

- Family history, family disease

- Evidence based clinical protocols for management of chronic diseases
- pop-ups for Doctors

Goal 5 – Expand target population

NationWide aims to expand its target population beyond segment C to include population from segment B and A. The phases it hopes to achieve before that is to establish the concept in the fee-for service market, test the model, and establish quality. Once this is done, NationWide can optimize and downscale the costs and deliver the services and use these experiences to inform its expansion to the lower market.

In the near future, NationWide is trying to establish a public private partnership with the Govt. of Karnataka to set up mobile health clinics. It also intends to use telemedicine and use its existing infrastructure as backend to support its forage into other population segments.

Future Plans

There has been increasing awareness on health and wellness issues, and many employers have made annual health checks mandatory. If the Govt. and community mobilizers can increase awareness of the benefits of a family physician, the model can be successful. NationWide aims has set itself the following targets for the next two years:

- Expand to 20 hubs 5-6 spokes for each hub over the next two years, making 120 centers in all (potential growth 60-80%)
- Make the proprietary software for Electronic Medical Records developed at NationWide more robust, more analyzable. Following this, productize the software and make it a revenue generator for the firm
- Create a robust medical education system that churns out trained family physicians (improvements in quality of delivery and speed).
- Plug gaps in clinical knowledge, give more analytical skills, communication skills (Within a year doctors should meet the benchmark set by NationWide for its physicians)
- Find newer more effective ways of patient outreach (Develop strategies that help NationWide reach out to the patients and not wait for them to come to you)

NATIONWIDE PRIMARY HEALTHCARE SERVICES PVT.LTD. - QUICK FACTS

NationWide Primary Healthcare Services Pvt. Ltd. established December 2010

Program Goal:

- Be a game changer in how primary care is delivered in India
- Reinvent family medicine
- Develop a core training model to train qualified physicians and expose them to the latest international clinical protocols
- Develop a quality framework including clinical and non-clinical protocols for delivering care

Delivery Features:

- Target population from the urban middle class who have the capacity to pay and are seeking high quality and accountability in healthcare services
- Establish hub and spoke models that include walk-in clinics open to general public, and satellite clinics in gated communities such as corporate offices and apartment complexes
- Extensively use Electronic Medical Record software developed in-house at NationWide to record all patient records and medical data and promote use of evidence-based care methodologies
- Become the single point of care for most family health needs including family medicine, paediatrics, and chronic disease management. As an additional convenience, also provide sample collection facilities such as home visits, tele-consultations, 24/7 doctors helpline and access to personal medical records through EMR to its patients,
- Becoming health partners for corporate firms and apartment communities alike by developing the health profile of the target group and developing a health and wellness plan tailor-made for their specific needs

Market Presence:

- Three walk-in clinics and 7 satellite clinics as of October 2012
- Plan to grow to 120 clinics – 20 walk-ins each with six to seven satellite clinics associated with them – over the next two years

Delivery Strategy:

- Follow the blue ocean strategy to provide healthcare services where competition does not yet exist
- Build community presence through walk-in clinics
- Multiply patient outreach through satellite clinics
- Explore local marketing techniques such as health check-up camps, health talks, distribution of flyers, open house etc.
- Adopt global marketing techniques for brand building such as articles in newspapers and magazines, and presence on social media outlets such as Facebook, LinkedIn etc.
- Develop and implement a quality framework adopted from the guidelines provided by the National Institute for Clinical Excellence, UK and followed by the entire NationWide healthcare team to ensure clinical processes meet international guidelines
- Develop a cadre of family physicians trained on a curriculum based on the Royal College of General Practitioners program and exposed to the latest international clinical protocols

Business Plan:

NationWide divides the health user population in Bengaluru, India into four target segments based on their ability to pay for health services. According to NationWide, health services for the population in Segment A can be reached only through public-private partnerships. Dr. Chattopadhyay says that the needs of the population and the resources required are too diverse and massive for a private enterprise to deliver the services using market efficiency principles

alone. NationWide is interested in extending its services to Segment B – Individuals/ families who have low wage employment but a steady income and can afford an out-of-pocket expense of up to INR 50 to 100 (USD 1-2 approximately) per episode of treatment needed. They plan to implement pilots for this segment in the next 6 months. The team anticipates that the model will differ significantly from that in use for Segment C of its health user population. It is

hopeful, however, that the backbone of the model for Segment B would be informed and supported by the model used for segment C. NationWide is currently focused on Segment C – Individuals/ Families with higher incomes and who can afford an out-of-pocket expense of INR 200–400 (USD 4-8 approximately) per episode of

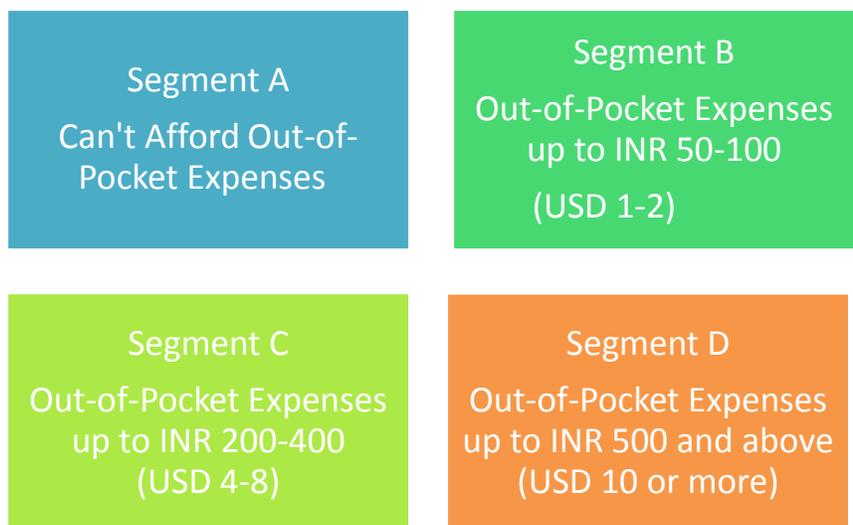


Exhibit 4 Four segments of the health user population in India based on their ability to pay for services

treatment needed. Segment D which NationWide defines as individuals/ families who can afford out-of-pocket expense of INR 500 (USD 10 approximately) and above are not targeted specifically by their clinics.

The business plan for the different population segments that NationWide has developed is shown in the figure below:

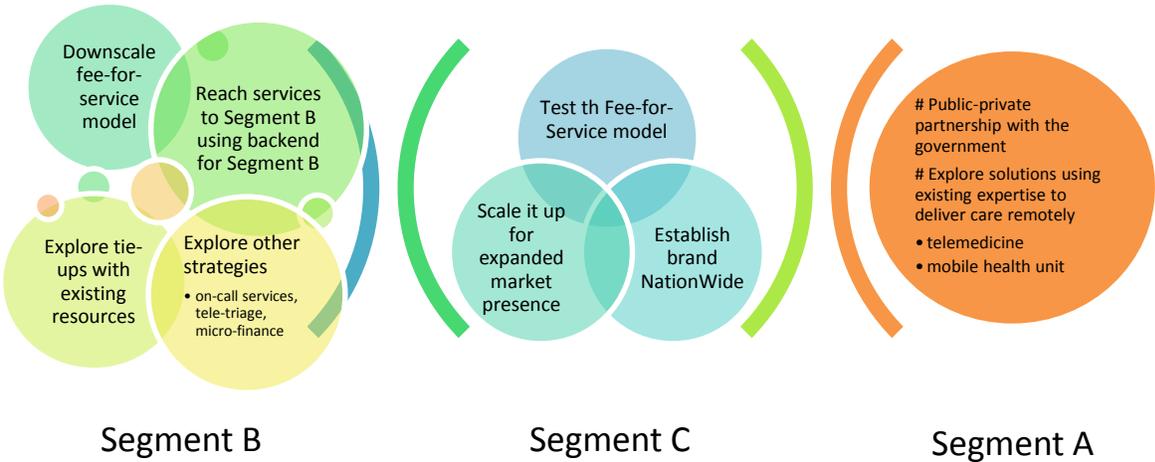


Exhibit 5 Business Plans for the three population segments NationWide wants to service

Heat Map

Physical Infrastructure	Adequate
Value-added services	NationWide has developed proprietary software for Electronic Medical Record. Patients who subscribe to a health plan can access their personal health records from the cloud based EMR system. Subscribers also have access to home visits, tele-consultations and 24/7 doctors helpline. NationWide has tied-up with tertiary care centers and specialists to provide its patients continuity of care as per their needs.
Outreach Techniques	Health camps and health education talks have been the two most prominently used local marketing techniques. Media including social media such as facebook and linkedIn have been some global marketing techniques used. Both have served well.
Clinical Protocols	Clinical protocols based on international guidelines adopted for local context
Recruitment and Training	NationWide uses online job portals as well as personal reference based recruiting. Needs to explore some other techniques such as visiting medical schools for finding qualified candidates
Workforce Retention	Owing to its emphasis on Continuing medical education and professional development of its team, NationWide has seen high workforce retention so far
Scalability	NationWide has secured INR 250 million (USD 5 million) from Norwest Venture Partners. With this, they are ready to scale to a presence of 120 clinics in the next 2 years. The only constraint will be finding doctors qualified in family medicine.
Sustainability	Based on their location, each NationWide clinic has seen varying volumes of walk-in patients. Some of these clinics thus still remain cost centers. Satellite clinics are however more reliable and have been revenue generating. NationWide needs to rethink its strategy for choosing physical location for its walk-in clinics
Affordability	Almost three fourth of the patients at NationWide have to meet their medical costs from out-of-pocket expenses. While for patients/ families with high and stable incomes, this is not an issue, NationWide's services are not affordable to those in lower income brackets
Accessibility	Satellite clinics make access to health care very convenient. Walk-in clinics too have used prominent locations with high footfall.
Adaptability for pro-poor implementation	NationWide clinics in its present model are geared to provide access to segment C of its population segmentation based on their ability to pay for healthcare (see Exhibit 1). They hope to use their experiences in this model to develop a scaled-down version for segment A & B consequently.

Legend:

Green – Is working well for the organization;

Amber – Has scope for improvements;

Red – Has scope for major improvements

Visit Details

Visit Dates	:	June 27-30, 2012
Visits made by	:	Lipika Ahuja, Intern ACCESS Health International CEMS, ISB Hyderabad, India MPAff. 2013 LBJ School of Public Affairs UT Austin, Texas, USA
Mailing Address	:	NationWide Primary Healthcare Services Pvt. Ltd. No. 2036, 16th Main Road, 1st Cross (Behind Kyra Restaurant), HAL 2nd Stage Bangalore – 560 038, Karnataka, India
Website	:	http://www.nationwidedocs.org/
Email Address	:	info@nationwidedocs.org
Implementer	:	Dr. Santanu Chattopadhyay
Funders (if any)	:	Norwest Venture Partners, Angel Investors
City/ Country of Headquarters location	:	Bengaluru, India
State/ Province / Country of Operation	:	Karnataka, India
City/ Village of Operation	:	Bengaluru
Stage	:	Start-up
No. of Clients served	:	
Income level of clients served	:	Middle class
Legal Status	:	Private, for-profit
Year Launched	:	2010

Clinics/ Sites Visited:

Site 1	<u>Indiranagar Clinic</u> No. 2036, 16 th Main Road, 1 st Cross, (Behind Kyra Restaurant), HAL 2 nd Stage Bangalore – 560 038, Karnataka , India
Site 2	Whitefield Clinic 'Chalet Suites', No.3/3. 3/4, 3/5, Whitefield Main Road, (Opp. Savannah Sinclairs Hotel), Whitefield, Bangalore – 560 066, Karnataka , India
Site 3	Koramangala Clinic No. 883 6thCross, (Koramangala Club Road), 6th Block, Koramangala, Bangalore – 560 095, Karnataka , India

Program Team Met :

1. Dr. Santanu Chattopadhyay, Founder and Managing Director
2. Dr. Shantanu Rahman, Founder and Medical Director
3. Dr. Anupama Nagaraja, Associate Medical Director and Centre Head – Koramangala clinic
4. Dr. Srividhya Raghavendran, Head - Medical Quality and Centre Head – Indiranagar Clinic
5. Dr. Deepika Bhasin, Head – Operations
6. Dr. Satish Jeevanavar, Head – Business Development
7. Dr. Devashish Tarra, Head – PR & Marketing
8. Sagarika Ganguly, Head – Human Resources
9. Dr. Gowri Kulkarni, Personal Physician and Centre Head – Whitefield clinic

Disclaimer

The case study has been compiled after primary and secondary research on the organization and has been published after due approval from the organization. The case has been compiled after field visit(s) to the organization from **June 20-21 2012**. The author of the case or ACCESS Health International are not obliged or responsible for incorporating any changes occurred in the organization after receiving the due permission from the organization to publish the case. The case study has been developed with a specific focus to highlight some key practices/interventions of the organization and does not cover the organization in its entirety.

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