

# A new healthcare era

Trends in a post-pandemic world

December 2021



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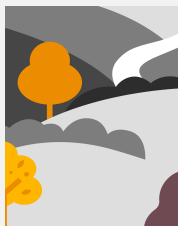
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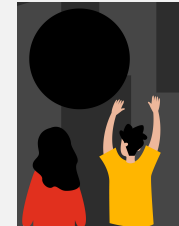
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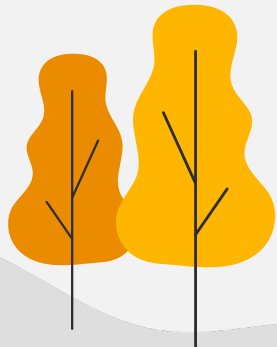
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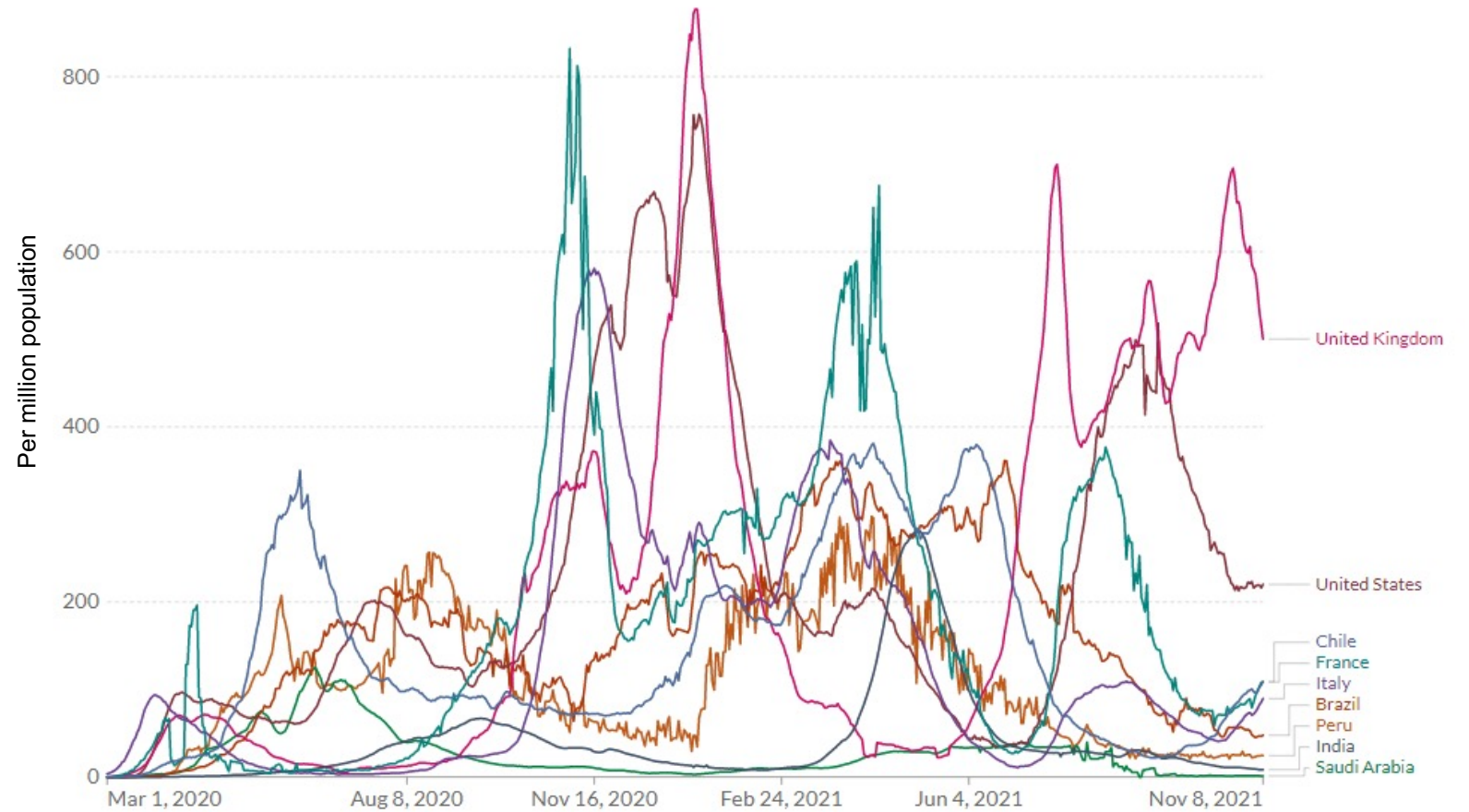


# Impact of COVID-19

## Global impact of COVID-19

The COVID-19 pandemic has had a significant impact on the world. The virus was first identified in Wuhan, China, in December 2019 and spread quickly across the world, resulting in a series of national and localised lockdowns across countries. As of November 2021, over 250.36 million cases and 5.06 million deaths have been reported from all over the world.<sup>1</sup> Additionally, the multiple variants of the virus have made it challenging for governments and healthcare professionals to predict its trajectory.

Comparison of daily new confirmed COVID-19 cases across the most affected countries (As of November 2021)



Source: Our World in Data

<sup>1</sup> <https://covid19.who.int/>

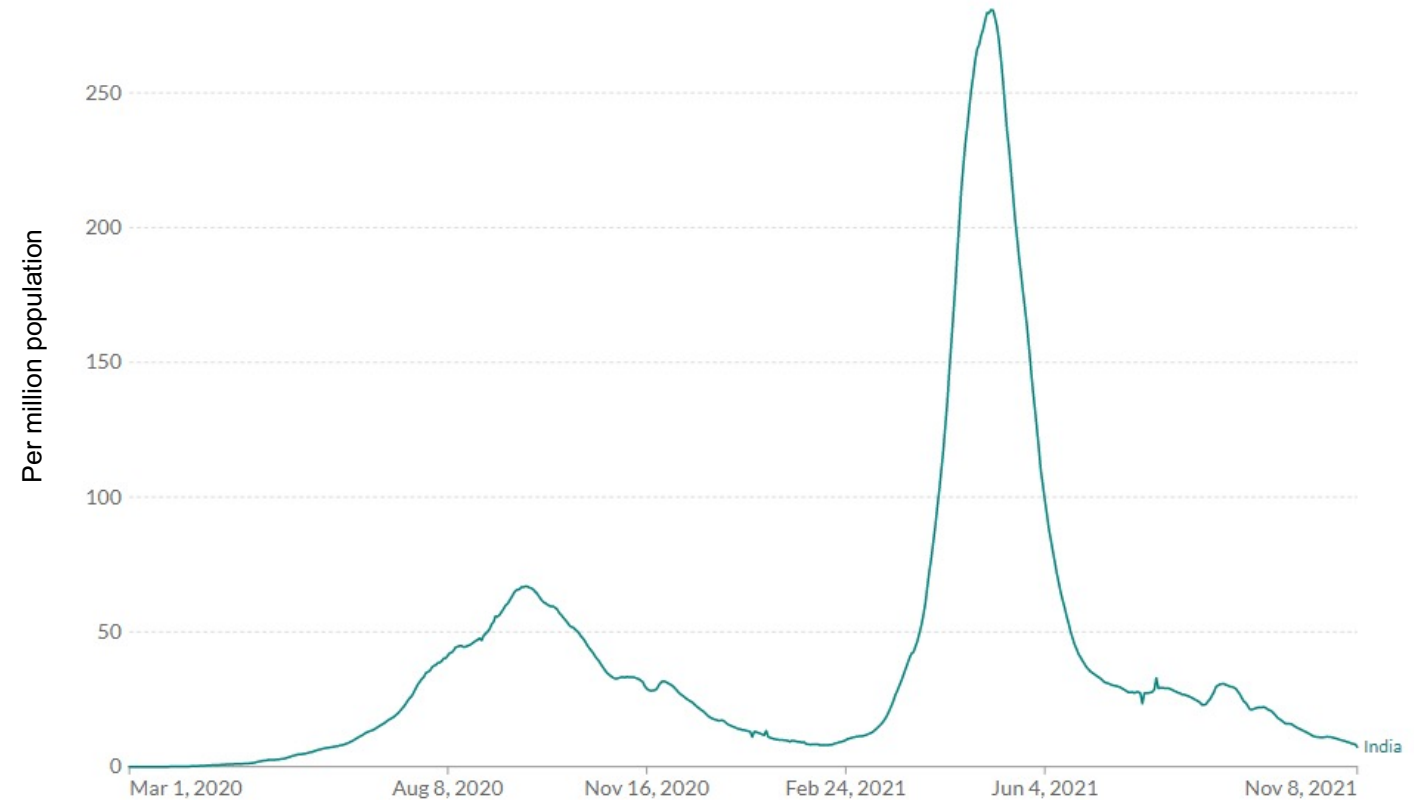
# Impact of COVID-19 in India

The first cases of COVID-19 were reported in India in January 2020 and since then, over 32 million people have been infected in the country.<sup>2</sup> A national lockdown was imposed in March 2020 to curb the spread of the virus. In early April 2021, a second wave on infections swept across the country, resulting in the daily case count rising to 400,000 and severely straining the healthcare system.<sup>3</sup> While the number of daily new confirmed cases has come down significantly (10,107 as of November 2021), the situation continues to remain uncertain. The pandemic has also brought about major changes in India's healthcare systems, some of which are likely to stay.

<sup>2</sup> <https://www.mygov.in/covid-19>

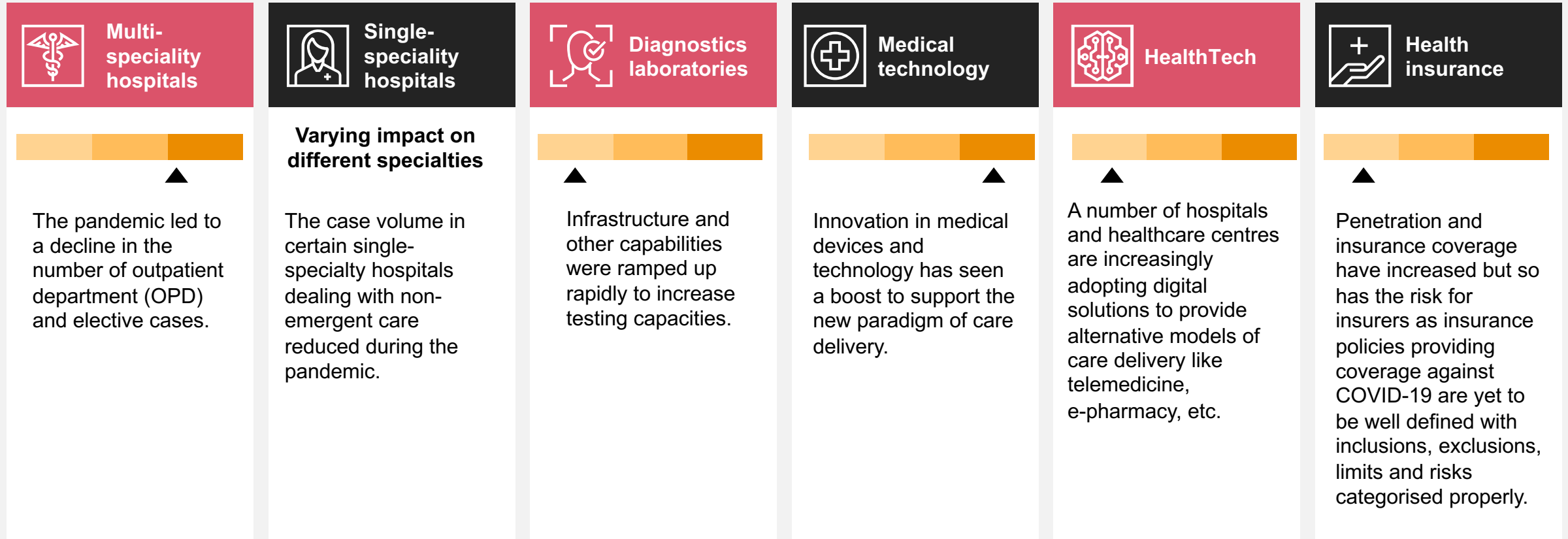
<sup>3</sup> [https://www.business-standard.com/article/current-affairs/data-story-india-reports-400-000-covid-cases-for-3rd-straight-day-over-4-000-deaths-121050800680\\_1.html](https://www.business-standard.com/article/current-affairs/data-story-india-reports-400-000-covid-cases-for-3rd-straight-day-over-4-000-deaths-121050800680_1.html)

Daily new confirmed cases of COVID 19-in India  
(As of November 2021)



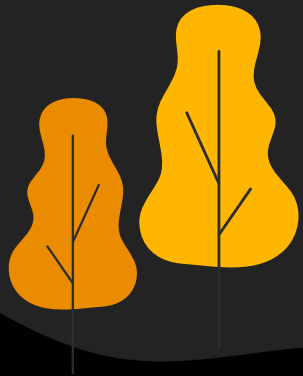
Source: Our World in Data

# The impact of COVID-19 across the various sub-sectors of India's healthcare landscape is uneven



# Emerging shifts in healthcare

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# Emerging shifts in healthcare



## Acceleration

As we gradually return to normalcy post the second wave, hospitals and healthcare centres are realising how digital as a lever has helped in **accelerating contactless treatments and just-in-time decision making.**



## The convergence of purpose

Along with the shift in consumer needs, healthcare delivery has also undergone a concurrent shift. The pandemic has **highlighted the need for partnerships driving ownership of the consumer across the care spectrum** to ensure the best outcomes.



## Deepening minimalism

With contactless care gaining ample gravitas this pandemic, the focus has moved towards reducing and optimising the number of interaction touchpoints between the health system and health seeker without losing the quality of care. This new need to optimise such steps has resulted in deep minimalism – a concept closely associated with the ability of a system to simplify steps without losing quality.



## The diverging focus

The pandemic has resulted in the **development of more holistic models of healthcare delivery.** At the same time, there has been a **preparatory shift across the healthcare value chain that is aimed at improving not only business but also health outcomes.**



# Acceleration

The increased focus on digitalisation has helped in accelerating contactless healthcare and faster decision making. Technological innovations have further helped patients and consumers to understand diseases better and subsequently, demand higher-quality healthcare services. The following changes have been identified across the healthcare framework during the pandemic.

**1 Hockey stick shaped recovery**  
Converting pent-up demand into accelerated recovery

**2 Virtual-first health**  
Shifting from brick-and-mortar healthcare centres to virtual-first care

**3 Disrupting traditional pharma practices**  
Transitioning from medication to holistic addressal of adjacencies

**4 Delivering live insights**  
Delivering post facto data insights to business insights at scale



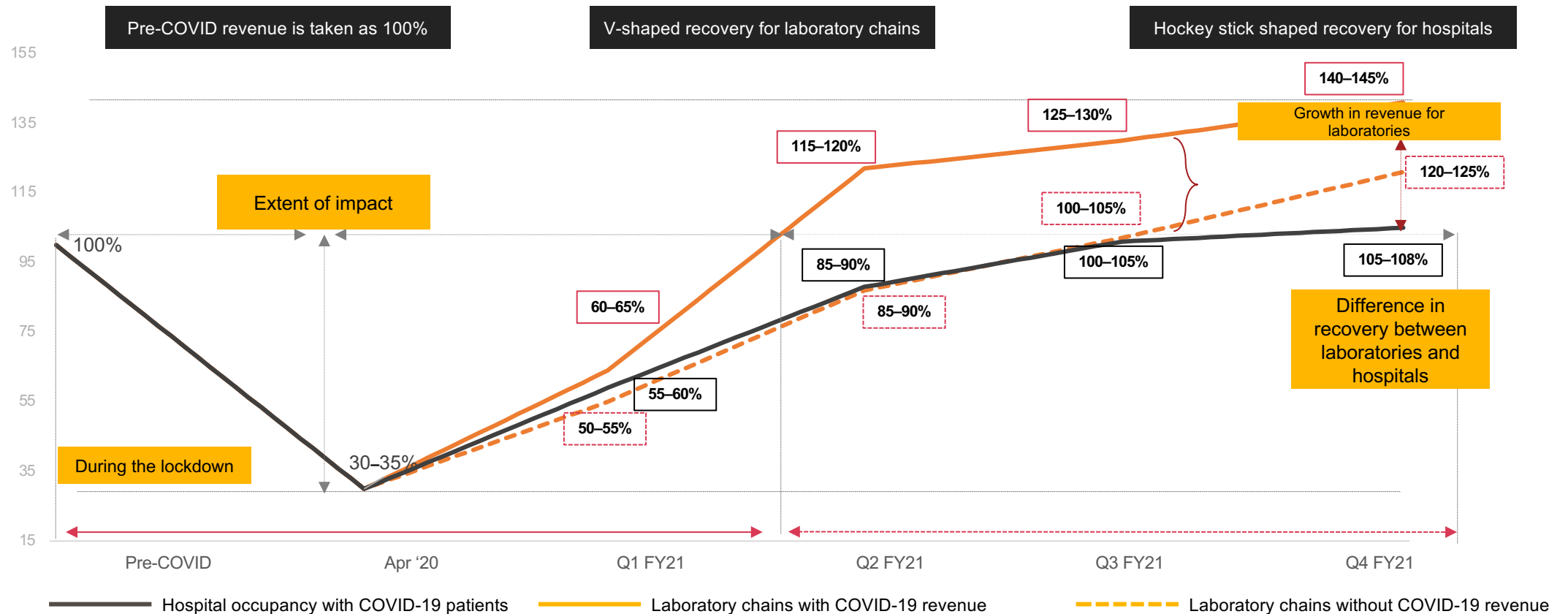


# The accelerators

## Hockey stick shaped recovery Pent-up demand to accelerated recovery

The country's leading hospital chains have witnessed a hockey stick shaped recovery in FY20–21 whereas diagnostics players recorded a steeper growth on account of additional revenue earned from COVID-19 testing.

### Recovery comparison between hospitals and diagnostics laboratories



Source: External database (screener.in) and consolidated FY20 financial statement from company annual reports (listed hospitals and diagnostic centres)



# The accelerators

## Virtual-first health Brick-and-mortar to virtual-first care

Digital services have played a critical role in aiding healthcare organisations transition into hyper-scalable and contextually sustainable businesses.

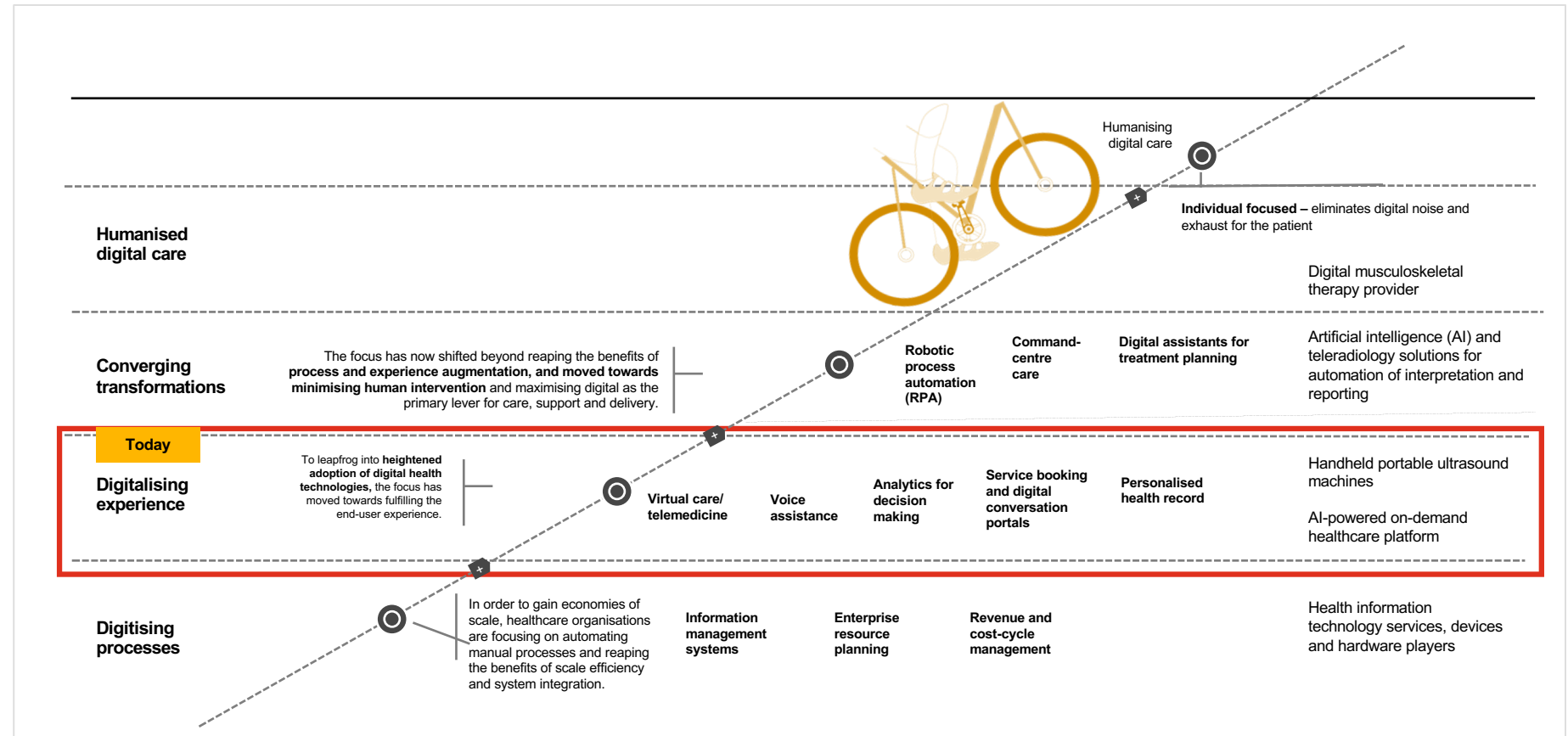
**1** Enabling virtual connect



**2** Integrating medical devices/technologies that aid in decision making



**3** Developing capabilities to provide end-to-end virtual treatment



Source: PwC analysis



# The accelerators

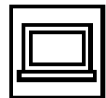
## Disrupting traditional pharma practices Medication to holistic addressal of adjacencies

The pandemic has resulted in the emergence of unmet needs such as brand awareness, product differentiation, development of multiple delivery models, cost efficiency, detailed customer data and management systems, and forming deep and lasting customer relationships. These requirements could be efficiently addressed by leveraging digital solutions. Pharma companies are increasingly using digitisation to enhance patient engagement and improve internal operations.

### Major changes in the pharma industry on the account of COVID-19



**Limited availability of healthcare professionals (HCPs)** due to a steep rise in workloads (increased patient per HCP), social distancing norms, increased risk of infections, etc.



**Shift towards online modes of communication** among HCPs and between HCPs and patients



Increase in **demand for comprehensive disease management**

### Implications across the pharma value chain



#### Disruption in the traditional value chain

Pharma companies are leveraging large datasets to analyse the market and associated patterns, and using those insights to cater to their customers (HCPs, patients, etc.). They are gradually shifting the distribution model from the traditional wholesaler-retailer routes to direct delivery by e-pharmacies.



#### Evolving sales and marketing channels

Sales models driven by on-ground resources and physical access to manufacturers/suppliers are gradually moving to online platforms/forums like websites and webinars on the account of social distancing norms.



#### Entry of tech players providing end-to-end digital solutions

The need for social distancing has accelerated the creation of digital solutions that address gaps in patient life cycles, speed up research and development (R&D) through data analytics, etc.



#### Increasing stakeholder collaboration


Pharma companies are now directly collaborating with brick-and-mortar/e-pharmacies to receive medicine orders, refill stocks, and adhere and comply with rules and regulations through knowledge platforms in the form of portals/apps, etc., and communicating with HCPs for treatment pathways-





# The accelerators

## Disrupting traditional pharma practices Medication to holistic addressal of adjacencies

The pandemic has accelerated the usefulness of digital solutions across patient life cycles, decision-making abilities of HCPs and the pharma value chain. The various roles played by digital solutions across each of these stages are mentioned below.

 <b>Across the patient lifecycle</b>	
Stage	Digital solutions
<b>Awareness</b>	Online info, forums, mobile apps and social media
<b>Prevention</b>	Online info, media campaigns and social media
<b>Diagnostics</b>	Portable devices, companion diagnostic test for drugs and e-lab results
<b>Treatment</b>	Online resources and mobile apps
<b>Drug provision</b>	Online pharmacies, financing and loyalty programmes
<b>Treatment</b>	Digital tools, home care services and mobile apps
<b>Monitoring</b>	Monitoring devices, adherence services and forums

 <b>Education, promotion, networking and supporting decision making of HCPs</b>	
Stage	Digital solutions
<b>Decision</b>	Dosage, calculator, treatment planner and risk assessment tools
<b>Education</b>	E-detailing, appointment booking, online information and apps
<b>Promotional activities</b>	Social media, cloud-based customer relationship management (CRM), webinars and tele-calling
<b>Networking and seeking opinions</b>	Social media, websites and apps incorporating feedback/reviews, websites and promoting events

 <b>Across the pharma value chain</b>	
Stage	Digital solutions
<b>R&amp;D</b>	Increased aggregation and data in digital format can potentially improve speed and effectiveness
<b>Confirmatory development</b>	Analytical and monitoring tools may make this process more effective
<b>Ops and manufacturing</b>	Digitisation may help in increasing operational excellence as well as reducing quality and compliance risks
<b>Market access and pricing</b>	Provide evidence based on real world clinical effectiveness rather than clinical trial efficacy
<b>Marketing and sales</b>	Support correct diagnosis by healthcare professionals and increase patient adherence






# The accelerators

## Delivering live insights

### Delivering post facto data insights to business insights at scale

Healthcare organisations are using electronic medical records (EMRs) to improve patient health outcomes, identify better practices for doctors, generate better insights for pharma and medical device companies, and provide superior underwriting capabilities for insurers.

	EMR deployment	Disease management insights	Digital twin data ingestion
Stakeholder of focus			
Nature of live /near-live insight delivered	<p>For a hypertension case, the HCP is prompted to <b>check for diabetes</b></p> <p>For a diabetes case, once the <b>Hba1c test has been carried out, the HCP is prompted to check for insulin</b></p>	<p>Providing a <b>longitudinal view of the patient's medical history and treatment</b></p>	<p>Annotating data and <b>creating longitudinal datasets</b> for ingesting into AI/machine learning (ML) and <b>creating the patient's digital avatar</b></p>



# Deepening minimalism

With contactless care gaining ample momentum this pandemic, the focus moved towards reducing and optimising the number of touchpoints between the health system and health seeker, without losing the quality of care. This new need to optimise steps, has resulted in deep minimalism – a concept closely associated with the ability of a system to simplify steps without compromising with quality.

**1 Platform care**  
Decision support to virtual treatment enablement

**2 Enabling care**  
Telemedicine to teletherapy

**3 Emergence of voice AI**  
Graphical user interface (GUI) to voice user interface (VUI)

**4 Pill-data-device in one continuum**  
Multiple players with limited touchpoints to single-engagement with multiple touchpoints

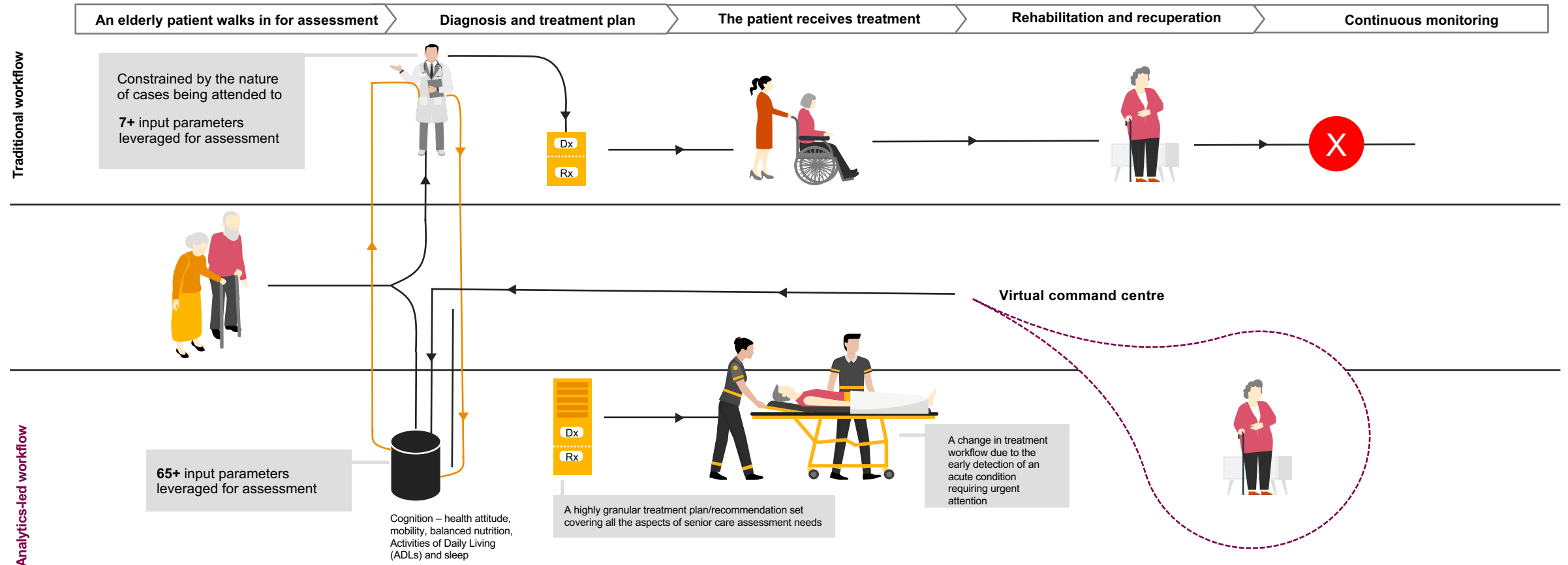
**5 Universal health interface**  
Multiple access points to a single point of access

# Deepening minimalism

## Platform care

### Decision support to virtual treatment enablement

Organisations are working towards building a virtual healthcare ecosystem in addition to the existing telemedicine base that will eventually support virtual treatment. The figure below describes the difference in diagnosis, treatment and recovery under the traditional and analytics-led workflows of patient care.

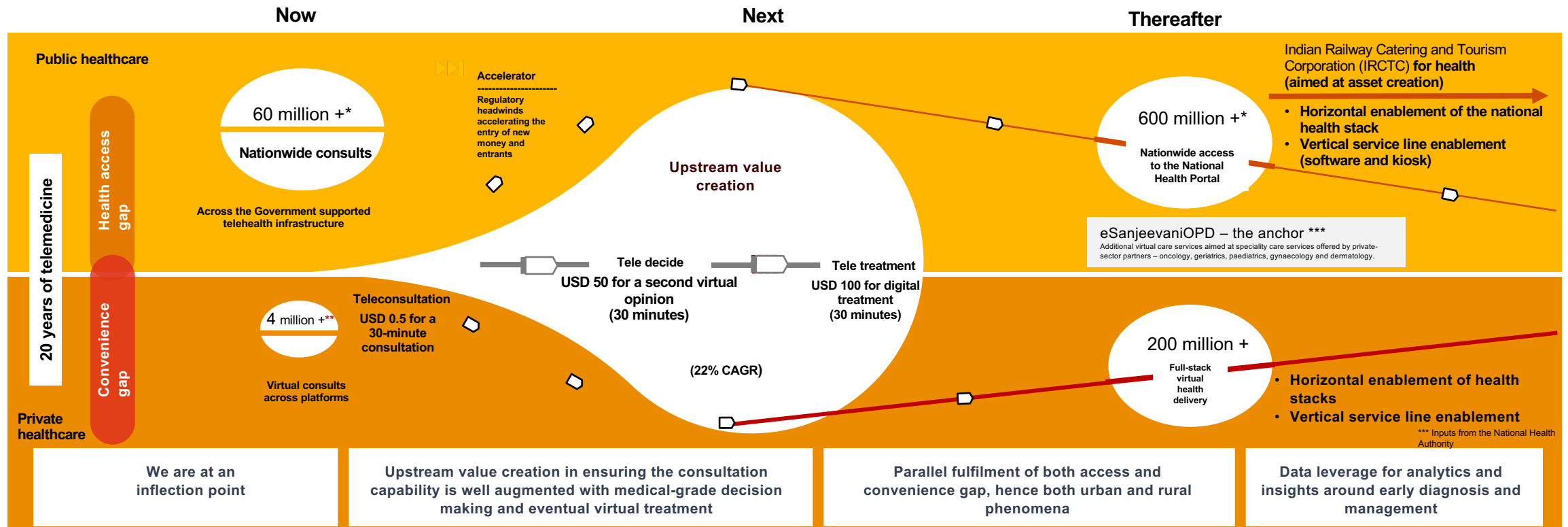


Source: PwC analysis

# Deepening minimalism

## Enabling care Telemedicine to teletherapy

The telemedicine model of the past is catching up with the virtual consult + framework of today and both are moving towards becoming a full-stack virtual care model. Opportunities exist across both public and private sectors with the infrastructure in the public sector telemedicine business undergoing major improvement and the private sector focusing on building a robust platform ecosystem. The figure below details India's telemedicine journey in the last 20 years.



\*Consolidated volume of pan-India teleconsultations across the 35,000+ nationwide telemonitoring outposts set up remotely by both the Government and private sector, powered by the Indian Space Research Organisation (ISRO) and telecom operators as part of state budgets and corporate social responsibility (CSR) initiatives.

\*\* Virtual consult volume serviced by private healthcare service providers.

Source: PwC analysis

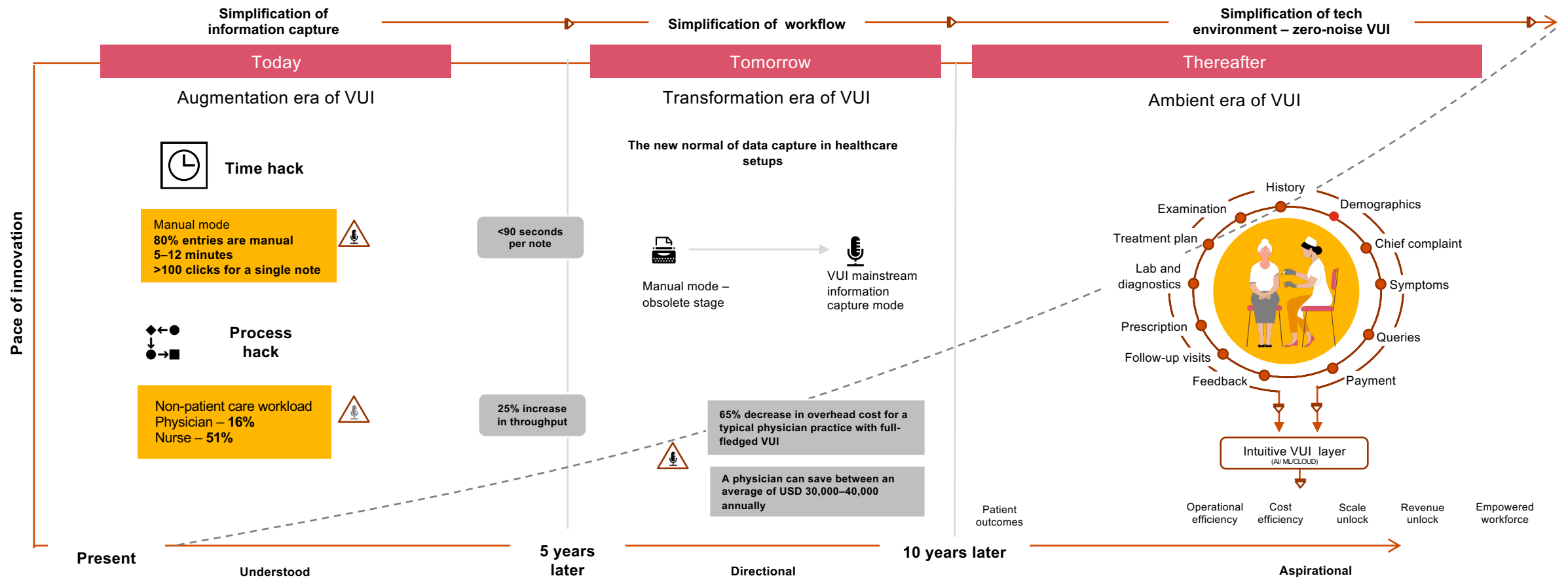
PwC A new healthcare era



# Deepening minimalism

## Emergence of voice AI GUI to VUI

Voice-based AI is expected to bring in the next big transformation in healthcare. Such a technological advancement would enhance the upstream value of the healthcare framework and further usher in the ambient era of VUI. The figure below shows the gradual emergence of voice AI and its journey from the augmentation to ambient era.



Source: Carecloud and PwC analysis

Digital minimalism – technology simplification to zero-noise intelligent and intuitive digital twin

# Deepening minimalism

## Pill-data-device in one continuum

Multiple players with limited touchpoints to single-engagement multiple touchpoints

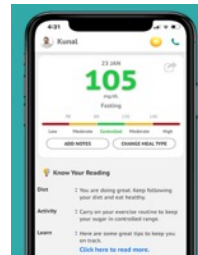
Healthcare providers are working towards developing seamlessly engaged pill-to-disease management models.

Digitalisation has enabled healthcare providers to develop models that will give them relevant data and insights about patients. For example, a non-exclusive partnership that integrates insulin dose data from pre-filled, durable and connected smart insulin pens from pharma providers directly into digital health tools.

Such integration enables both caregivers and patients with diabetes to view glucose and insulin data together and helps them take more informed treatment decisions as well as have more meaningful and productive conversations about health outcomes.

An app-based healthcare solutions provider delivers comprehensive services on awareness, monitoring, drugs and food supplements. It has also tied up with one of India's leading e-pharmacy players to provide a continuum of care solutions.

### Diabetes solution portfolio for a leading continuum care player



Monitoring devices



Guilt-free food



Ayurveda



Detox drinks



Medicines



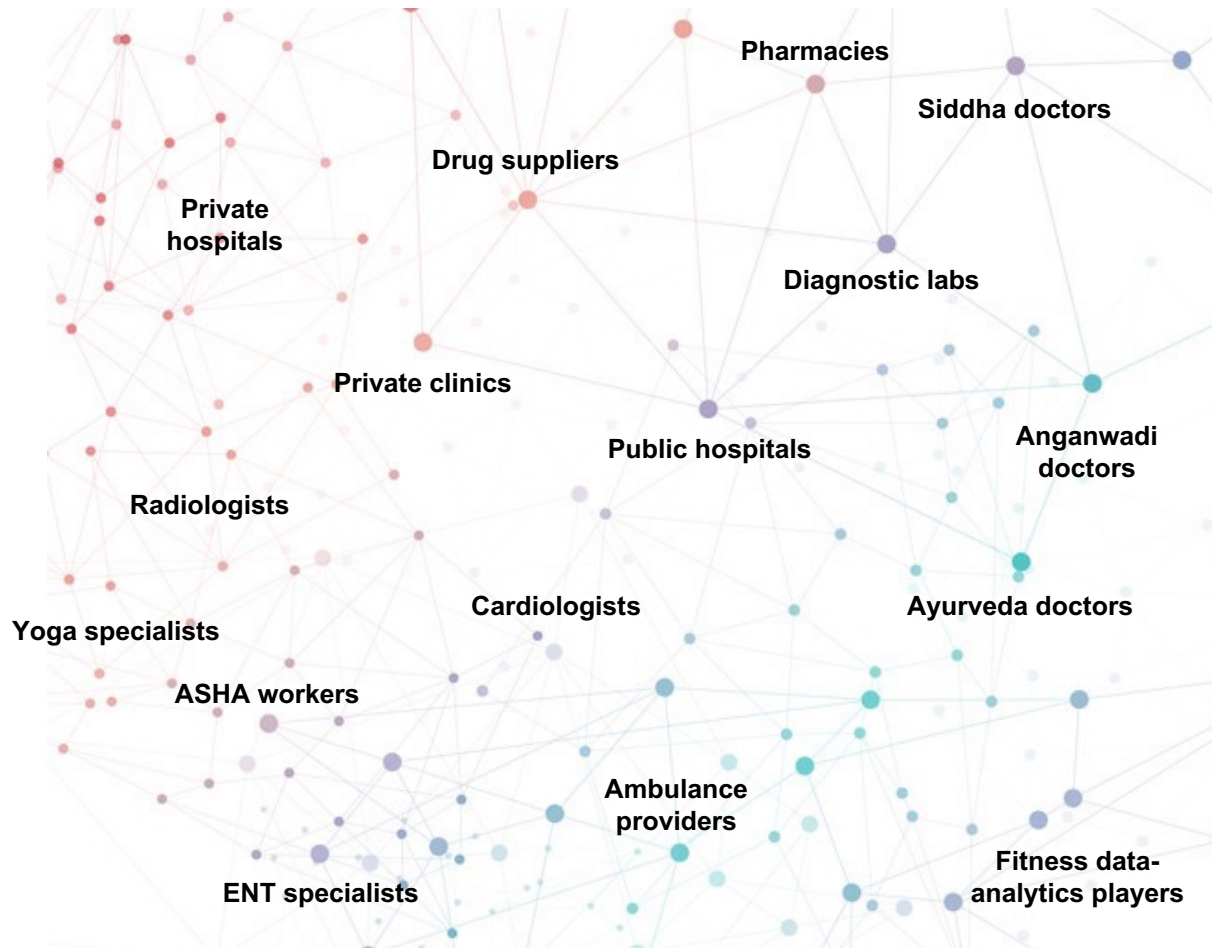
Lab tests

# Deepening minimalism

## Universal health interface

### Multiple access points to a single point of access

The emergence of a single point of access for patients across the value chain which leverages digital technologies to create a universal health interface enables ease of access as well as data sharing, and a transformed ecosystem of care. The figure below depicts the number of players present in a connected healthcare value chain.



### Enabling access to quality healthcare through digital health, open network and open protocols

#### What digital health will enable

##### Discovery

- Accessing hospitals and primary care clinics
- Finding nearest laboratories or pharmacies
- Tracking/finding a drug across pharmacies

##### Seamless consultations

- Booking for physical appointments
- Booking for teleconsultation
- Finding and booking the nearest emergency care provider/ambulance service
- Collecting samples from homes

##### Track and check

- Checking for the availability of specific medicines
- Checking for the facilities and number of beds available at a hospital/clinic
- Checking for service offerings at specific laboratories/hospitals



# Convergence of purpose

The way healthcare is delivered in the post-COVID era has shifted along with changing consumer preferences. The traditional means of healthcare delivery are undergoing an evolution with the aim of serving the end consumer while creating added value for all the players in the ecosystem.

The pandemic has highlighted the need for partnerships driving consumer ownership across the spectrum of care to ensure the best possible outcomes.

1

**Reengineering business models**  
Care delivery to continuum of care

2

**Monetising data**  
Data capture to use of insights engines and advanced analytics

3

**Untapped diagnostic potential**  
Active marketing to provider push for testing

4

**Shifting influence of stakeholders**  
Independent purposes to one unified purpose

5

**Proactive Government role**  
Regulator to active participant and driver



# Convergence of purpose

## Reengineering business models

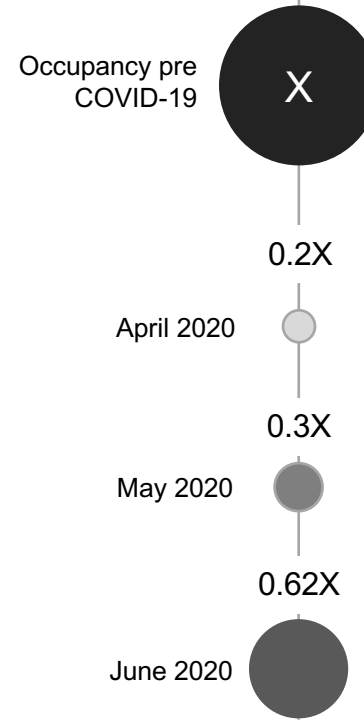
### Care delivery to continuum of care

The COVID-19 pandemic has adversely impacted the healthcare delivery industry, resulting in decreased revenue and increased costs. Footfalls across healthcare centres dropped due to the pandemic as many people shifted to online consultations. Increased expenditures on personal protective equipment (PPE) and adherence to infection protocols have increased the overall cost of care.

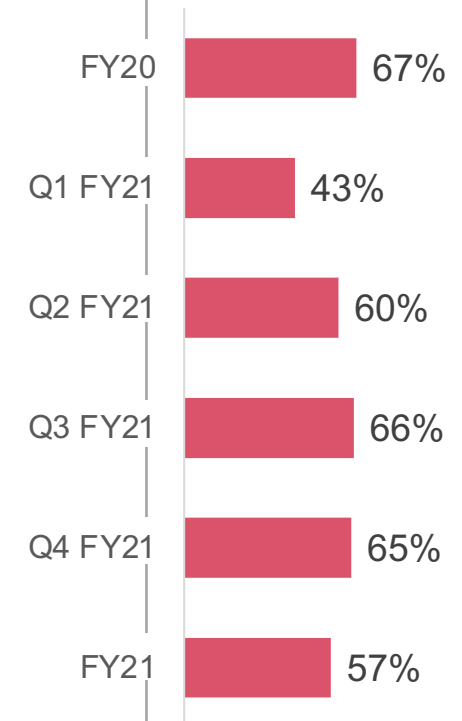
### Impact of COVID-19 on occupancy

- While the **dip in occupancy was quite significant during the lockdown in 2020**, hospitals gradually recovered, **with occupancy levels reaching to 60% of the pre-COVID era** by the end of June 2020.
- While the **extent of recovery varies**, there was a **significant impact on the volumes of OPD consultations, resulting in a dip in revenue from diagnostics and pharmacy**, and subsequent reduction of operating profits (40% of the pre-COVID period).
- **Average revenue per patient (ARPP) is lower** as compared to the pre-COVID period on the account of a drop in the volume of elective cases.

Average occupancy between April 2020– June 2020



Average occupancy across large multi-speciality hospitals



Source: Redseer, Businesswise report, AIOCD, online pharmacy discussions and PwC analysis



# Convergence of purpose

## Reengineering business models

### The need of the hour

The pandemic's impact has compelled healthcare organisations to rethink, reprioritise and reengineer the business models addressing the emerging challenges for the entire healthcare delivery ecosystem. Doing so will allow them to create a more efficient, sustainable, technology-enabled and scale-ready healthcare ecosystem.

### The need

- Reduced EBITDA due to increased operational costs during the pandemic, especially in the cost of care delivery.
- Increased cost of procurement for hospitals caused by manufacturers trying to offset their losses and high demand for a few consumables.
- Hospitals offering huge discounts to attract patients in the markets, leading to pressure on pricing.
- Decrease in revenue due to lower occupancy, altered patient mix and postponement of elective surgeries.
- Government regulations for pharmaceutical and MedTech companies have impacted their profit margins.

### Implications for the future



#### Improve operational efficiency by focusing on cost optimisation

Strategically identifying compressible cost heads – manpower, supply chain and other direct/indirect cost heads



#### New avenue of revenue generation

Adopting technology in care delivery – ensuring continuous patient engagement and remote patient management, using secure technology solutions such as teleconsultation, teleradiology, etc., and focusing on home healthcare services



#### Identify the right operating model

Redefining hospital positioning, target catchment areas and patient base



#### Innovative lean model for capex deployment

Exploring models such as pay per use, revenue sharing and others that provide more return on capital employed (ROCE)



#### Leverage technology

Investing in process automation and data analytics, adopting digital transformation tools such as RPA/business process management (BPM) to bring efficiencies and reduce costs



# Convergence of purpose

## Reengineering business models Connecting the care-continuum dots

The model that focused only on treating core illnesses underwent reengineering and has been integrated into the continuum of care blocks in addition to embracing retail health components.

### Reengineered business model

### Scalability



### Models opted

Reengineered business model	Scalability	Models opted
Home healthcare services	Low to High	Hospitals have entered the home healthcare segment or are tying up with specialised home healthcare providers.
Renting operating theatres (OTs)	Low to Medium	Healthcare players have rented out spare capacities to provide surgical treatment and improve the utilisation of OTs.
Teleconsultation services	Low to High	Most corporate hospitals have launched teleconsultation services by themselves or have tied up with digital health players in the telehealth space.
E-pharmacy	Low to High	Many hospitals have started home delivery of medicines for both outpatients and discharged patients, thereby increasing patient retention and satisfaction.
E-diagnostics/home sample collection	Low to Medium-High	Hospitals have ventured into home sample collection with a team of dedicated phlebotomists to drive conversion and increase stickiness.



# Convergence of purpose

## Monetising data

### Data capture to use insights engines and advanced analytics

A whole range of data points is expected to become accessible as virtual-first healthcare delivery models are adopted on a larger scale. Parallely, the data insights could also help in generating revenue for players in the space.

Full stack of virtual-care data points captured



Insights engine for advanced analytics and data modelling

#### Virtual visits Consultation

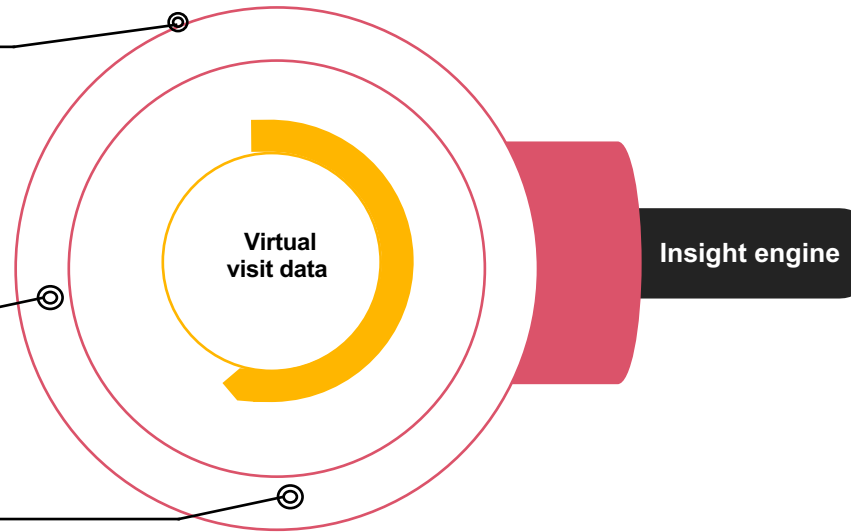
- Consultation experience data
- Physician's decision-making process data

#### Episodic care Disease management

- Treatment outcomes data

#### 360-degree surveillance Continuous monitoring

- Time-motion data



USD earned per service touchpoint

**USD 5–100**

		Major buyer of insights	
Workflow visualisation around decision making		<input type="checkbox"/>	How satisfied is the patient with the interaction and conversation?
Insights around pharma marketing		<input type="checkbox"/>	At what level of the medical condition is the doctor prescribing particular medicines?
Insights around new product roll-out/requirement		<input type="checkbox"/>	Which is the companion supplement that the doctor is prescribing?
Data trials		<input type="checkbox"/>	Asian population focused data sets for new drug market entry data trials

USD earned on account of insight services from one virtual service touchpoint

**USD 350–2,000**

Source: PwC analysis



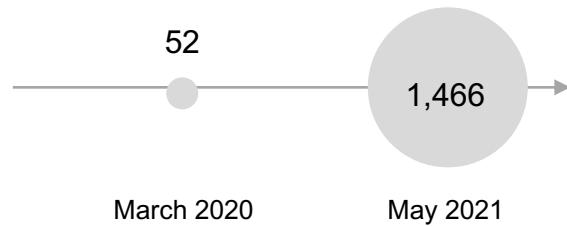


# Convergence of purpose

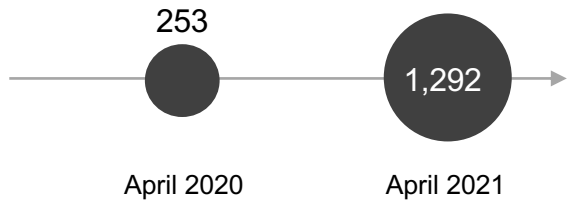
## Untapped diagnostic potential Active marketing to provider push for testing

COVID-19 has created a window of opportunity for molecular diagnostics which is expected to grow post the pandemic to find out further about both infectious and non-infectious diseases.

### Indian Council of Medical Research (ICMR) approved COVID-19 testing laboratories (RT-PCR capability)



### Number of National Accreditation Board for Testing and Calibration (NABL) accredited molecular testing laboratories



Source: Indian Council of Medical Research

### The on-ground shift

- **Infrastructural upgrade** for molecular diagnostics in the form of:
  - **structural modifications** for unidirectional sample flow
  - **biosafety room and cabinet**
  - **automated sample extraction systems** and **upskilling of manpower** – technicians and other laboratory staff
- **Recruitment of qualified molecular biologists** (full-time/part-time)

### The future landscape

Additional revenue streams at improved margins for laboratories



**Increased volumes of molecular tests**



**Increased affordability**



**Overall market growth**



# Convergence of purpose

## Shifting influence of stakeholders

### Independent purposes to one unified purpose

Stakeholder influence in the healthcare sector has shifted speedily in the last couple of years – from physicians and retailers to non-traditional partners like payers, technology players and governments. These transitions also translate into on-ground changes in how care is accessed and delivered, and will eventually bring about improved penetration of ‘healthcare for all.’

Stakeholder	Power	Role	Change in stakeholder influence
Patient	↑	Patient consumerism	Influencers in their treatment decisions due to higher awareness
Physicians/pharmacists	↓	Diagnosis and prescription	Higher influence of consumers, payers, chain hospitals, etc., to diminish HCPs' Rx discretion
Wholesaler /distributor	↓	Channel disruption	Fall in influence owing to growth of e-pharmacies and Jan Aushadhi stores
Technology players	↑	Technology influx	Offering innovative digital platforms that improve patient experience
Care provider	↓	Corporate hospital accounts	Higher influence of consumers and digital health platforms to diminish the role and influence of a care provider
Payers	↑	Government as a payer	Gaining relevance as public insurance penetration and cover increase through the Ayushman Bharat programme
Government	↑	Government pushing for self reliance	Promoting local manufacturing for key active pharmaceutical ingredients (APIs) and raw materials for pharma companies
Regulatory authorities	↑	Shaping the Indian pharmaceutical market (IPM)	Shaping the IPM with definitive guidelines for sustainable ecosystems



# Convergence of purpose

## Proactive Government role Regulator to active participant and driver

Government interventions in healthcare have undergone significant transformations. From being a regulator, the Government's role has shifted to actively delivering care in the form of incentives for private providers, encouraging foreign direct investment (FDI), stimulating local manufacturing, innovation and digital-first healthcare.



### COVID-19 monitoring

The Indian SARS-CoV-2 Genomics Consortium (INSACOG) is a **national multi-agency consortium of genome sequencing laboratories (RGSLs)**.

The agency has been established for sequencing and analysing genome data to **identify COVID-19 variants of concern, variants of interest, potential variants of interest and other mutations.**



### Driving universal health coverage

The Government of India (GoI) launched the National Digital Health Mission in August 2020 as the **first step towards driving universal health coverage (UHC)**.

The mission aims to **develop the framework necessary to support the integrated digital health infrastructure in the country.**

It will bridge the existing gap amongst different stakeholders of the healthcare ecosystem through digital highways.



### Driving local manufacturing and innovation

The Government extended the Production-Linked Incentive (PLI) Scheme – initially covering the manufacturing of medical devices – to include pharmaceutical products.

**The scheme provides cashbacks between 1–4% of additional sales** of locally made goods over a certain time period.



# Diverging focus

The impact of the pandemic on the healthcare sector as a whole and its various sub-sectors has compelled them to explore more holistic models of care delivery.

The demand-driven shift that we are experiencing today is only the beginning. The preparatory shift across the healthcare value chain aims at improving both business and health outcomes.

1

## **Differing models different objectives**

Service rendering to service-model sophistication

2

## **Expansion of health coverage**

Coverage for a few to universal coverage

3

## **Blurring of boundaries**

Disparate care delivery to holistic models

4

## **Diversification in digital**

Standalone offerings to partnering for value-added services

5

## **Data impacting health outcomes**

Early detection to continuum of care to data insights

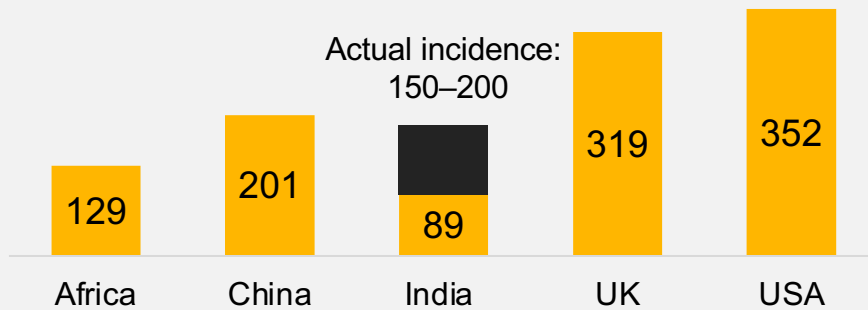


# Diverging focus

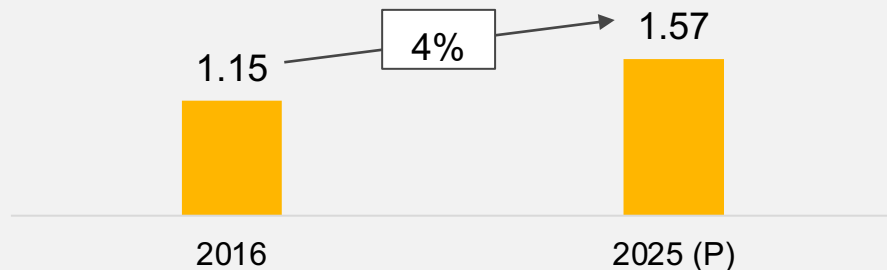
## Differing models different objectives Service rendering to service-model sophistication

The oncology space has undergone a major transformation with the emergence of more distributed models driving penetration of care along with the increasing demand for personalised and advanced therapy.

Cancer incidence per 100,000 (2016)



Cancer Incidence in India (in million)



Source: World Cancer Research Fund International



### Distributed model (hub-and-spoke model)

- Oncology is being developed based on population distribution and demand to ensure the availability of speciality treatment.



### Personalised therapy – next-generation sequencing (NGS)/ molecular diagnostic tests for:

- lowering the cost of testing
- ensuring more accurate diagnosis and improved treatment.



### Focus on establishing **high-end radiation** centres for proton/carbon therapy



### Corporate chains expanding their footprint

- Oncology-focused corporate chains targeting tier-2 cities for growth.
- An oncology focused hospital chain headquartered in Bangalore has grown to 25 centres (from three centers in 2005) with a presence in 18 cities.

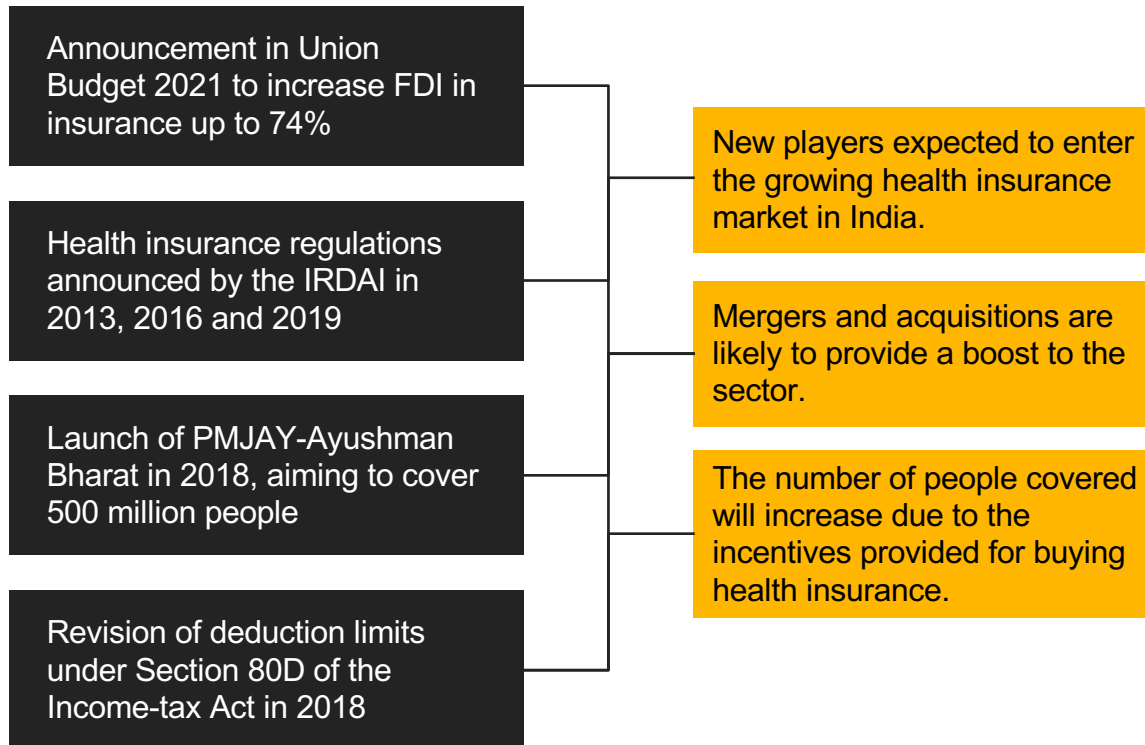


# Diverging focus

## Expansion of health coverage Coverage for a few to universal coverage

Both the Government and the private sector are taking various initiatives to increase health insurance penetration, coverage and innovation. While the pandemic has affected most of the healthcare industry, the health insurance sector has witnessed growth.

### Gol's initiatives driving UHC



### Building technological capabilities

InsurTech is disrupting the market and making the customer journey an easier experience through paperless and contactless digital processes.

### Industry shifts driving innovation and expansion

#### Expansion of coverage to include the 'missing middle'

The Gol is actively working towards covering 500 million people who are without any health insurance coverage. A pilot is being run by the National Health Authority (NHA) to meet the target.

### Innovative products

Standardised health insurance products, COVID-specific coverage, specific disease coverage, etc., are a few of the products that are making health insurance more accessible.



# Diverging focus

## Growth of digital in insurance Coverage for a few to universal coverage

Digital exponential technologies, while transforming the health insurance landscape, are also enabling the larger digital transformation of the healthcare ecosystem along with digital health delivery and platform play.

### Emerging trends in the post-COVID scenario

#### Product standardisation

Arogya Sanjeevani Health Insurance launched from 1 April 2020 with standardised terms and to be offered by all general and standalone health insurance companies in India.

#### Creation of disease-specific products

COVID-specific coverage through Corona Kavach and Corona Rakshak with standardised terms and to be offered by all general and standalone health insurance companies in India.

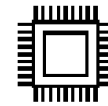
#### Improving customer experience through technology

Payers are providing virtual consultation as a part of insurance coverage.

#### Focus on the 'missing middle'

The GoI is focusing on covering over 500 million people without any health insurance coverage.

### Implications for the future



#### Digital exponential technologies

Technologies such as RPA, ML and AI are catalysing the insurance model to provide better customer experience and improved operations.



#### Product innovation

Health insurance companies are shifting from only covering illnesses to providing digital and hybrid care-delivery models.



#### Simplification of health insurance

Standardisation of products and terminology are driving consumer awareness and adoption.



#### Adoption of virtual service models

Insurance companies are overcoming geographical barriers and expanding the coverage of health insurance across the country.



#### Geographic expansion

Insurers are overcoming the challenge of operating in a geographically diverse country through expanding into non-urban markets.



# Diverging focus

## Blurring of boundaries

### Disparate care delivery to holistic models

The beauty and wellness industry is transitioning towards sustainable well-being. Digital as a lever is unlocking agility and helping players move up the value chain and across the sustainable well-being spectrum faster than before.

Zone of play

- Beauty
- Wellness
- Well-being

The premise of **fusing fitness and beauty** started to take shape when a fitness club partnered with a US-based cosmetics brand retailer to offer its products in locker rooms.

Zone of play

- Beauty
- Wellness
- Well-being

A lifestyle website partnered with a wellness company and a nutrition company to launch drinkable collagen.



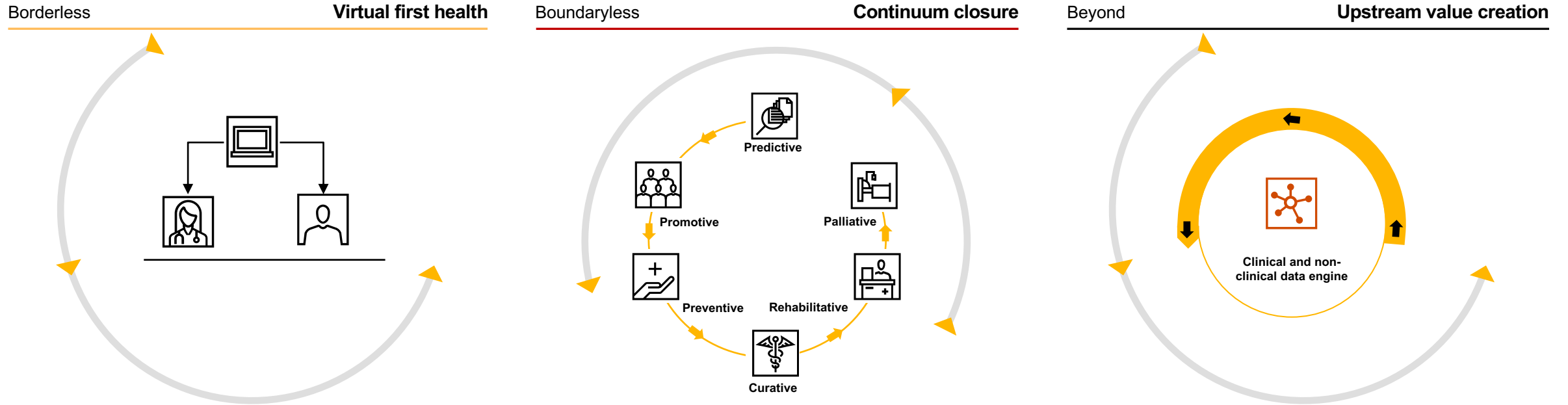




# Diverging focus

## Data impacting health outcomes Early detection to continuum of care to data insights

The concept of care is moving beyond defined boundaries through virtual care and continuum of care. The data generated is being utilised throughout the value chain to power health outcomes for patients and business outcomes through analytics for various key stakeholders.

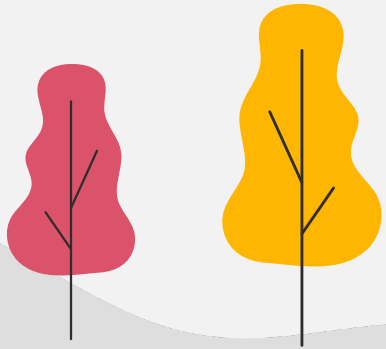


Market signals		<b>Non-personal promotion</b>		<b>Virtual disease management</b> Programme packs		<b>RWE command centre</b> Forward and backward data integration		<b>Digital therapeutics</b>		<b>Digital twin</b>		<b>Data trials</b>

Source: PwC analysis

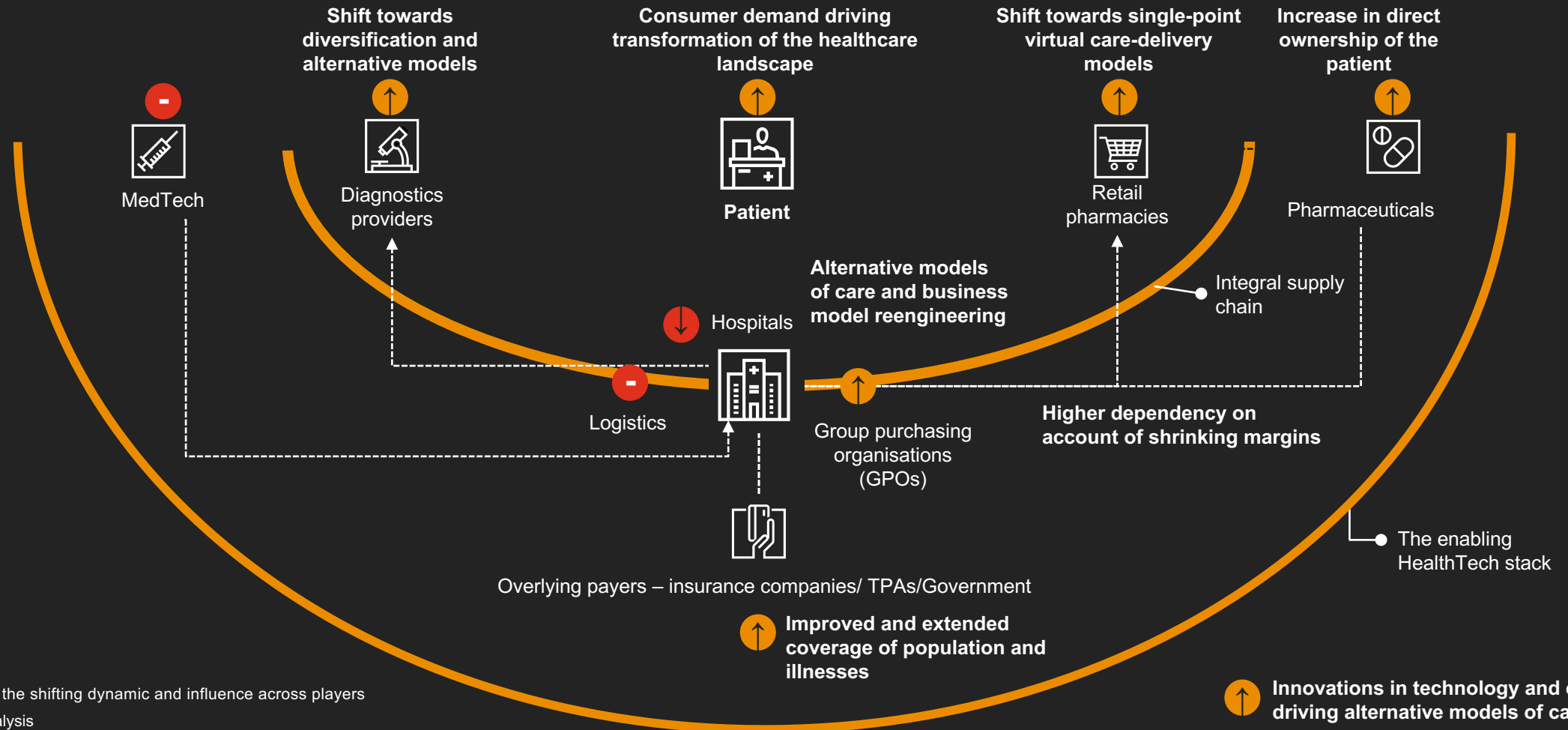
# Conclusion

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# Conclusion

Both traditional and new players in the healthcare ecosystem are using digital technologies to transform the healthcare landscape, resulting in the creation of a new value proposition across the value chain.



\*Arrows indicate the shifting dynamic and influence across players

Source: PwC analysis

# About PwC

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