



ARTURO



CARLOS



ISAAC



ARIEL



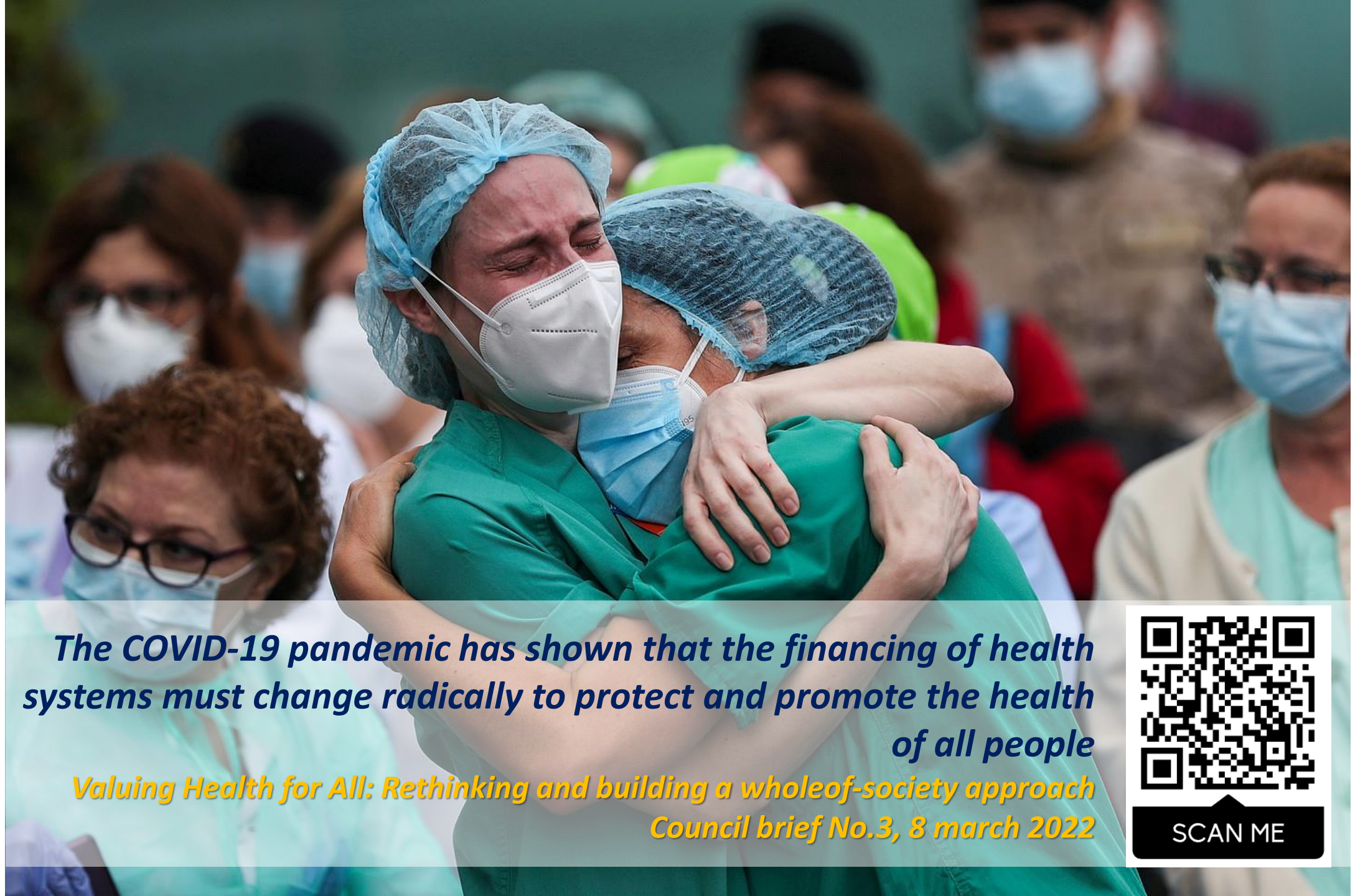
BRAULIO

Entrepreneur Team



Coach: Daniel Caissy





The COVID-19 pandemic has shown that the financing of health systems must change radically to protect and promote the health of all people

*Valuing Health for All: Rethinking and building a whole-of-society approach
Council brief No.3, 8 march 2022*



SCAN ME



MÉXICO



COOPMED



A1. Business mantra

*- Health for all -
empowering sustainable, self-managed,
Advanced Primary Health Care initiatives.*





A1. SDG alignment

17. Partnerships to achieve the Goal

Potentially contributes through collaborations with other healthcare stakeholders, fostering effective public, public-private, and civil society partnerships.

12. Responsible Consumption and Production

As a cooperative, promotes a model of responsible production and consumption, providing need-based services at fair prices and not under a profit-driven model.

10. Reduced Inequality

Makes health services accessible and adaptable to everyone, reducing healthcare inequalities.

1. No Poverty

Reduces risk of catastrophic health costs, alleviating financial strain and helping prevent poverty.

3. Good Health and Well-being

Improves health through preventive, curative, and rehabilitative services, promoting universal health coverage

4. Quality Education

Potentially contributes through health education and training, promoting sustainable lifestyles

8. Decent Work and Economic Growth

Ensures a satisfactory and decent work environment, respecting labor rights and promoting safe working conditions.

9. Industry, Innovation and Infrastructure

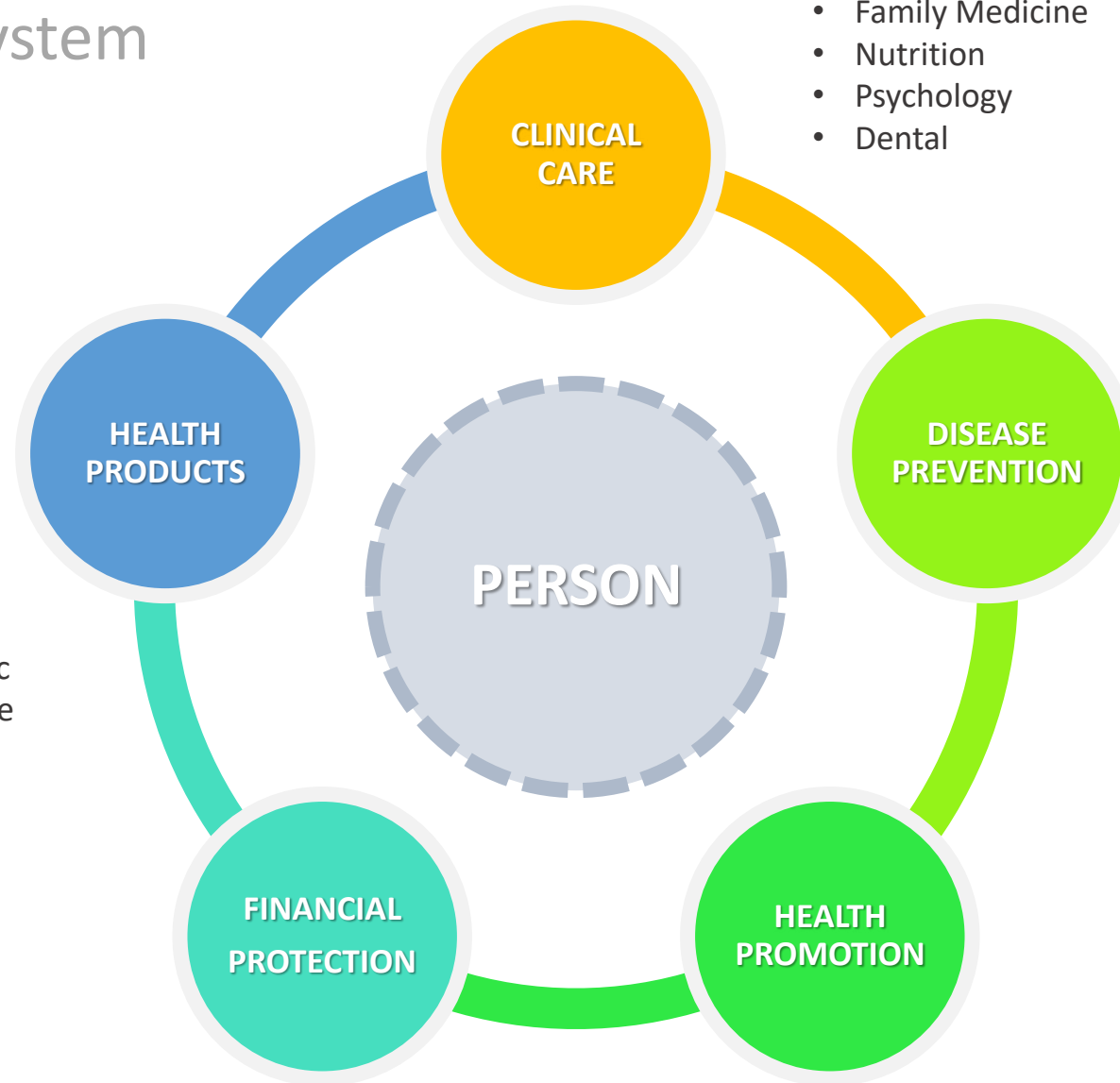
Uses cutting-edge technologies like electronic health records, chatbots, and data science, enhancing access to information and communication technology.



A2. Product/service

Central Health Ecosystem

33 Service lines



- Family Medicine
- Nutrition
- Psychology
- Dental

- Gynecology and pediatrics
- Internal Medicine
- Geriatrics and gerontology
- Cosmetic medicine

- Tai chi
- Yoga
- Meditation
- Karate and boxing
- Physical activation
- Healthy club
- Library
- Study room
- Classroom
- Physical rehabilitation

- Healthy food
- Juice bar
- Dining room
- Breakfast room
- Coffee shop

- Optics and optometry
- Equipment for special medical conditions
- Self-monitoring
- Drugs bank
- Sensitization for responsible use drugs
- Holistic pharmacy: allopathic and homeopathic
- Natural products local made

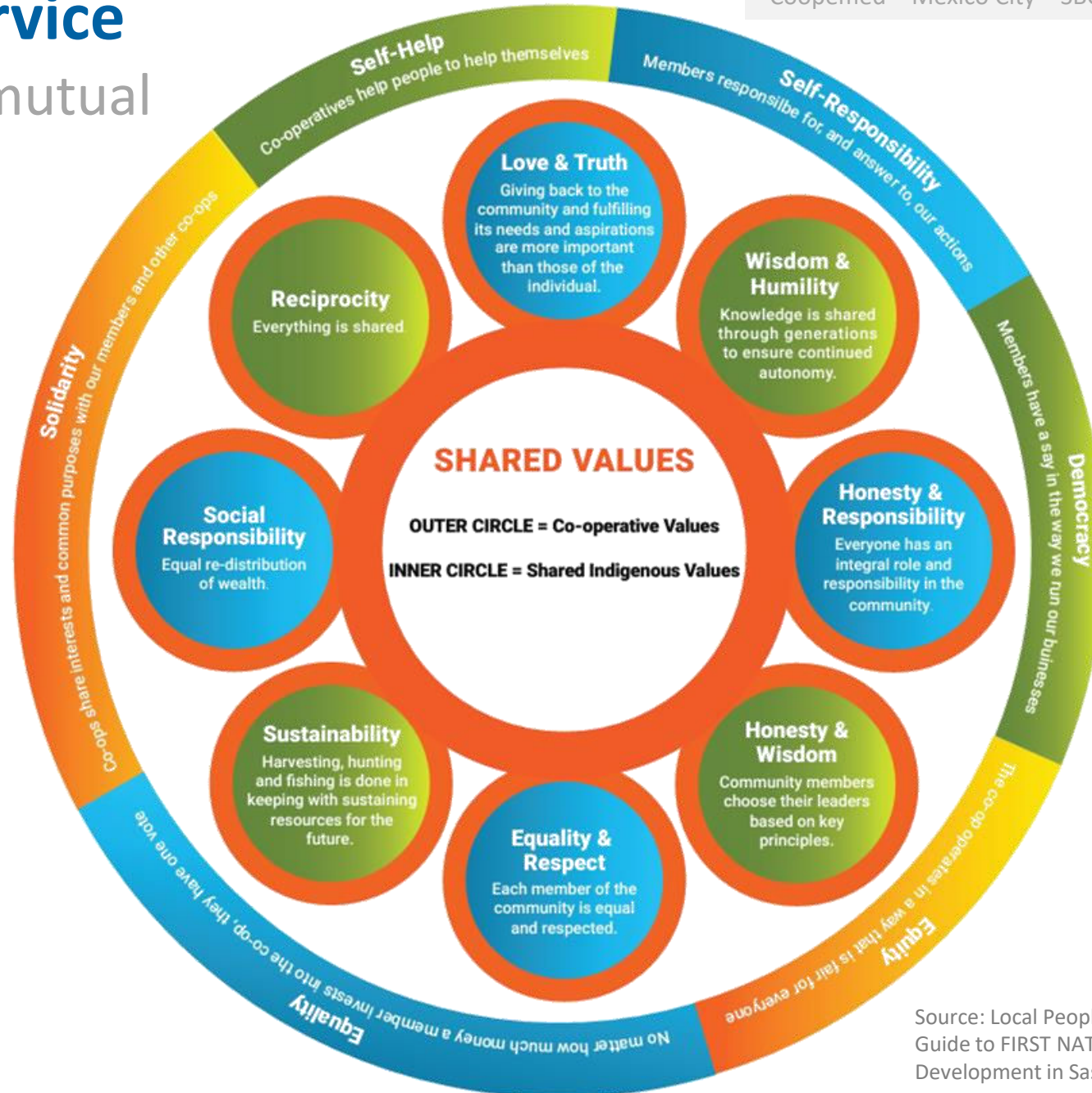
- Coverage and insurance
- Minor medical expenses
 - Life insurance
 - Ttravel insurance



A2. Product/service

Cooperative and mutual Health services

- Health mutuals and cooperatives are **collectively owned and managed organizations** dedicated to providing health services to their members.
- These organizations operate under the principle of mutuality, meaning members **share the risks and benefits associated** with healthcare.
- As **social enterprises**, health mutuals and cooperatives bring significant value **by focusing on the well-being of their members** rather than **profit maximization**.



- These organizations can provide **high-quality health services at a lower cost**, improve access to healthcare for underserved populations, and foster greater equity in healthcare.
- Additionally, being member-owned, these organizations are more **aligned with the needs and preferences of patients**, which can result in **more personalized and patient-centered care**.



Source: Local People, Local Solutions. A Guide to FIRST NATION Co-operative Development in Saskatchewan



A3. Business model

Key partners

- Savings banks and other co-operatives and **Community organizations**
- Unions of **informal workers**
- Second and third level **public and private health services**
- Companies with a **large volume of workers**
- **Health schools and universities**

Key Activities

Paid and prepaid services

Primary healthcare service and mutual health

Key Resources

- Initial physical installation of **950 square meters** in the center of the city (Toluca).
- **5 outpatient clinics**
- **2 places** for physical activation for 40 people each
- A multipurpose room with **2 classrooms** for 35 people each
- **Terrace with garden**, area for cafeteria and rest.
- Land reserve and 2-story building to grow to **15 offices, 5 training rooms and a hospital** with an operating room and beds.

Value proposition

Mixed cooperative (**workers and consumers**)

Customers relationship

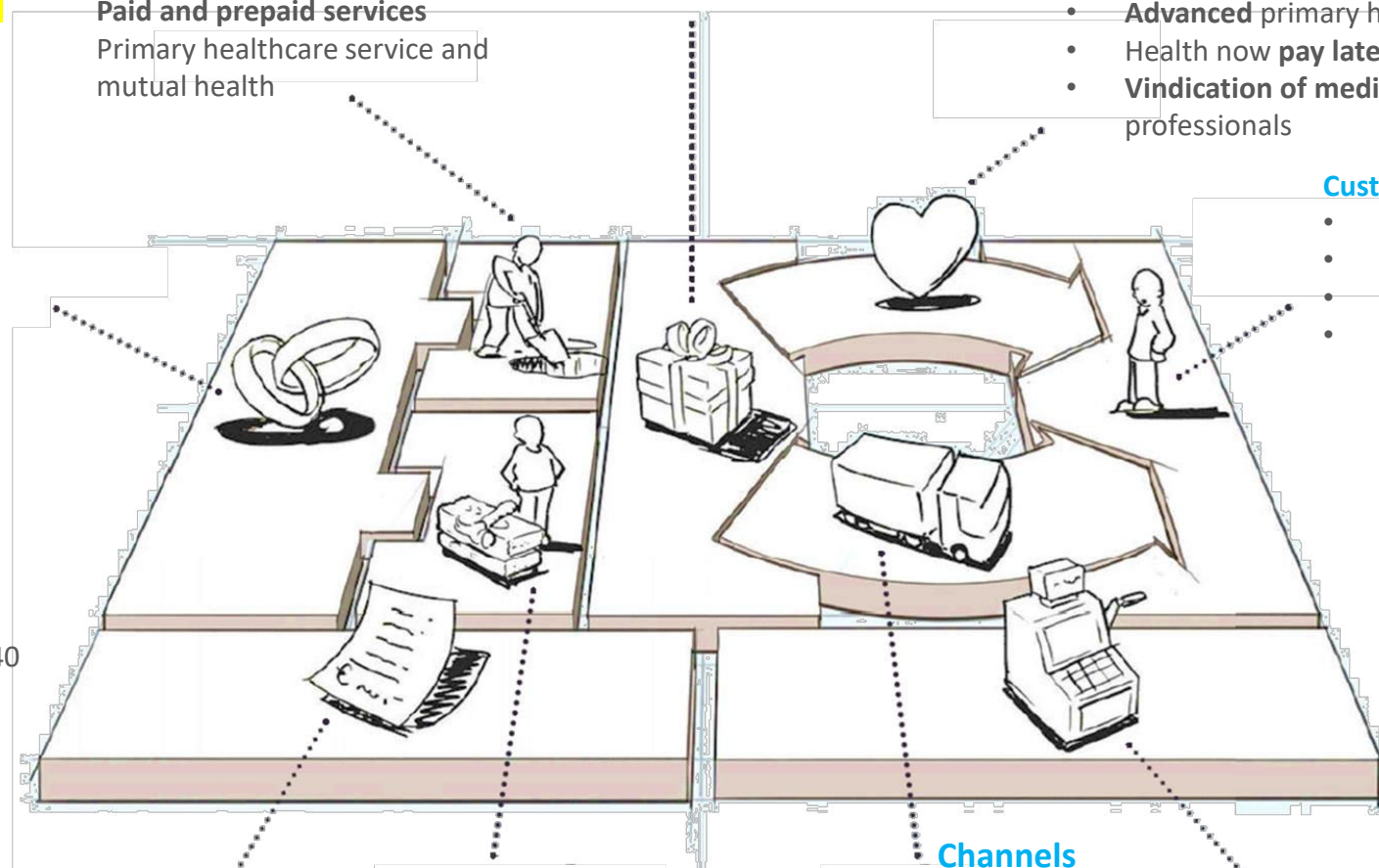
- **Advanced** primary health care
- Health now **pay later**
- **Vindication of medical work** and health professionals

Customers segment

- Population **without** social security
- People with **chronic illnesses**
- **Informal workers**
- Young people with **risk practices**

Cost structure & Revenue streams

- **Seed capital:** 108,293 USD
- **Price range:** 1.5 (tai-chi Class) to 20 USD (specialist consult) & 9 USD (basic individual coverage) to 70 USD (full family coverage) per month.
- **Revenue sharing:** 35% Coopemed and 65% operation cost.
- **Breakeven:** Month 7 with 30% of installed capacity.
- **Effective capacity:** 157,000 services in 5 years.
- **Acumulates utilities** (year 5): 593,685 USD **ROI:** 89.64%

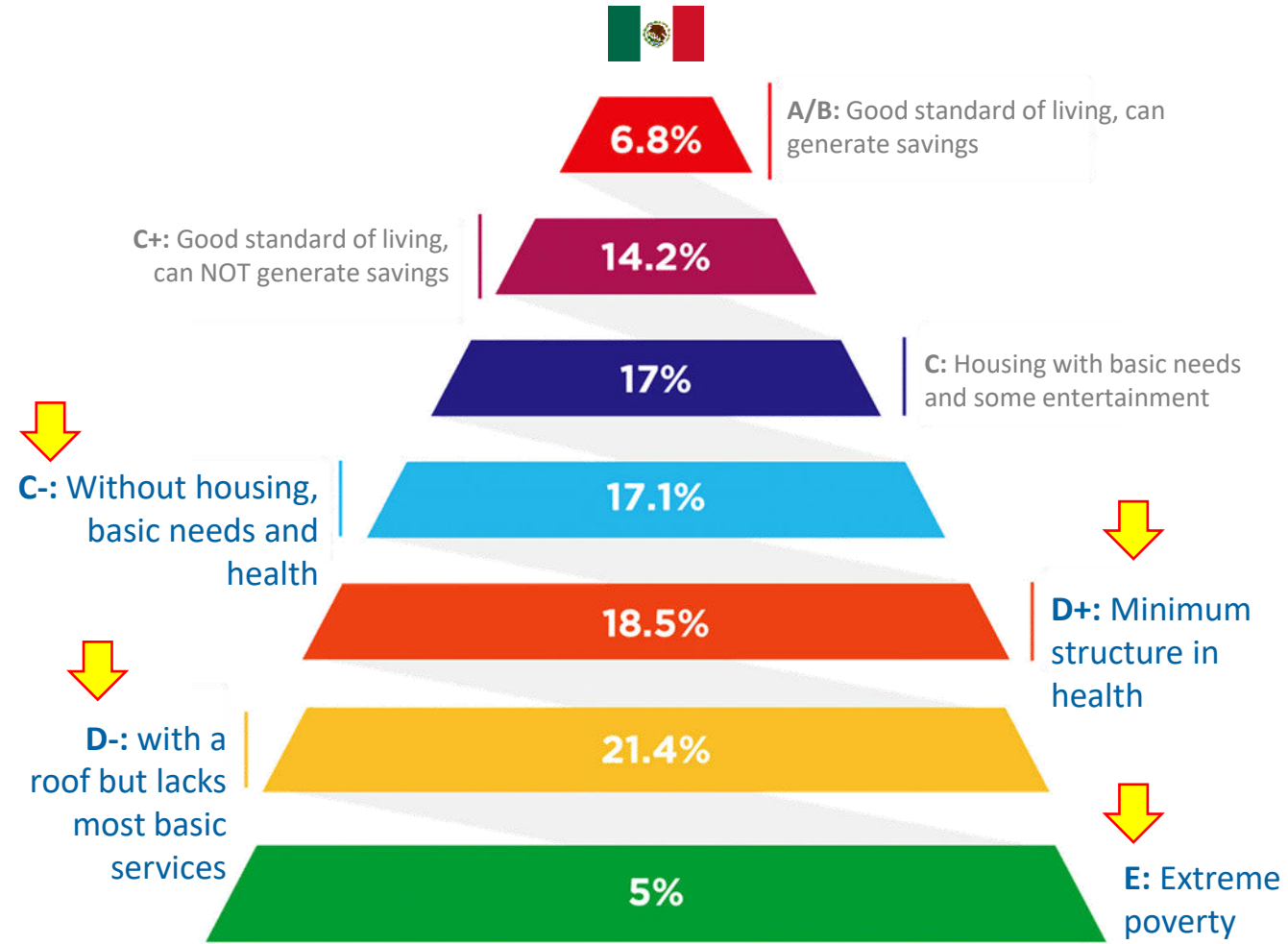


Channels

Direct: Face-to-face and telemedicine services. **Health personnel** is key to the continuous improvement of services. **Indirect:** Website, social media and **earn media strategies**, training of health promoters

B1. Validation

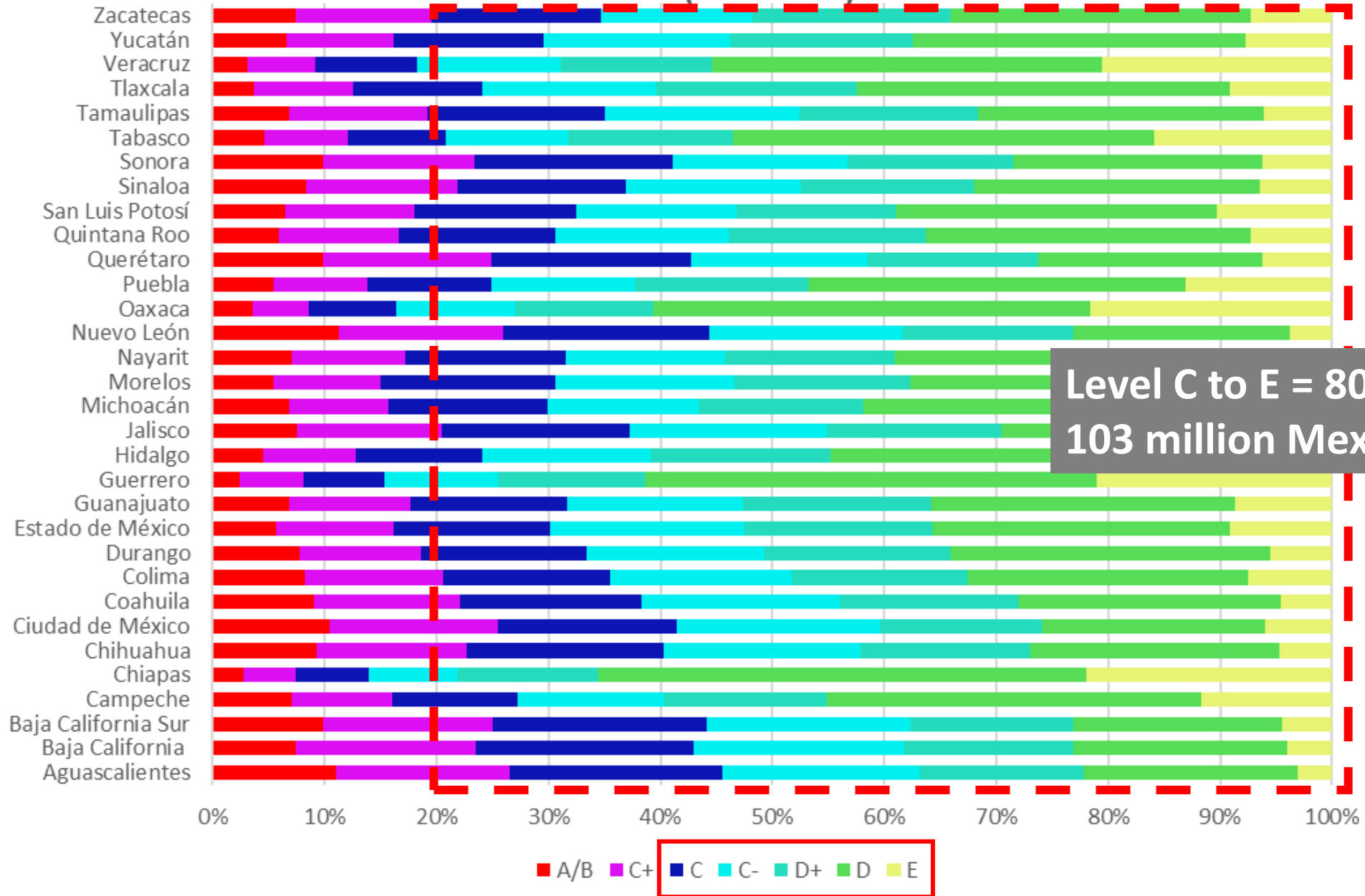
Our Costumers



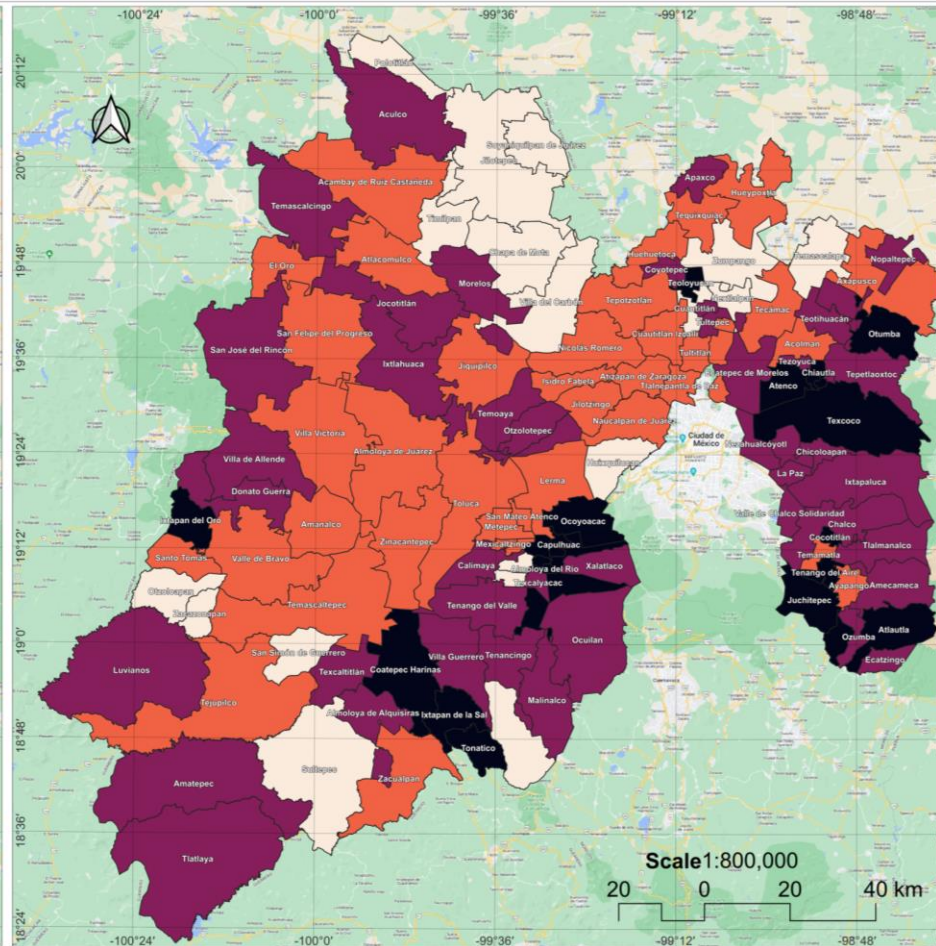
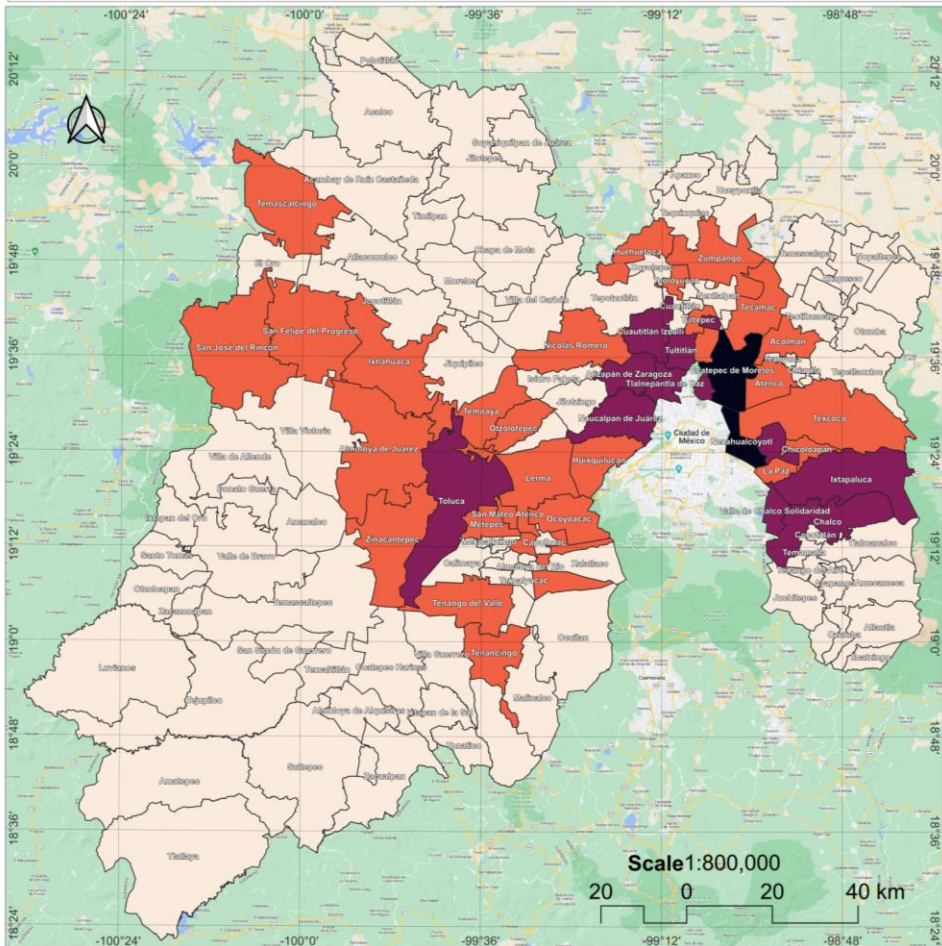
Source: AMAI 2020



Potential market based on the distribution of the Socioeconomic Level of Households (AMAI 2020)



STATE OF MEXICO - DEATHS BY PLACE OF RESIDENCE IN THE YEAR 2021



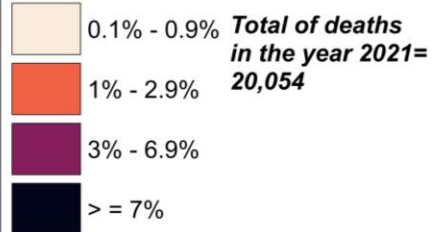
The two maps show the deaths that occurred in the year 2021 in the State of Mexico, specifically related to individuals who died from Type 2 diabetes mellitus, categorized by their place of residence.

The map on the left displays the total number of deaths represented as a percentage.

The map on the right illustrates the death rate.

Toluca ranks **3rd** in terms of total Type 2 diabetes mellitus deaths (**1,043**), but it ranks **69th** in terms of death rate (**114** per 100,000 inhabitants).

PERCENTAGE OF DEATHS BY TYPE 2 DIABETES MELLITUS

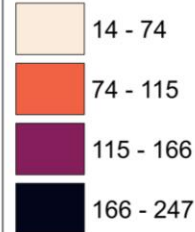


TOP 10 LIST		
Place	Municipality	Total of deaths by Type 2 diabetes mellitus
1	Ecatepec de Morelos	2,224
2	Nezahualcóyotl	1,650
3	Toluca	1,043
4	Chimalhuacán	969
5	Naucalpan de Juárez	799
6	Tlalhepantla de Baz	748
7	Ixtapaluca	654
8	Atizapán de Zaragoza	564
9	Valle de Chalco Solidaridad	524
10	Valle de Chalco Solidaridad	524



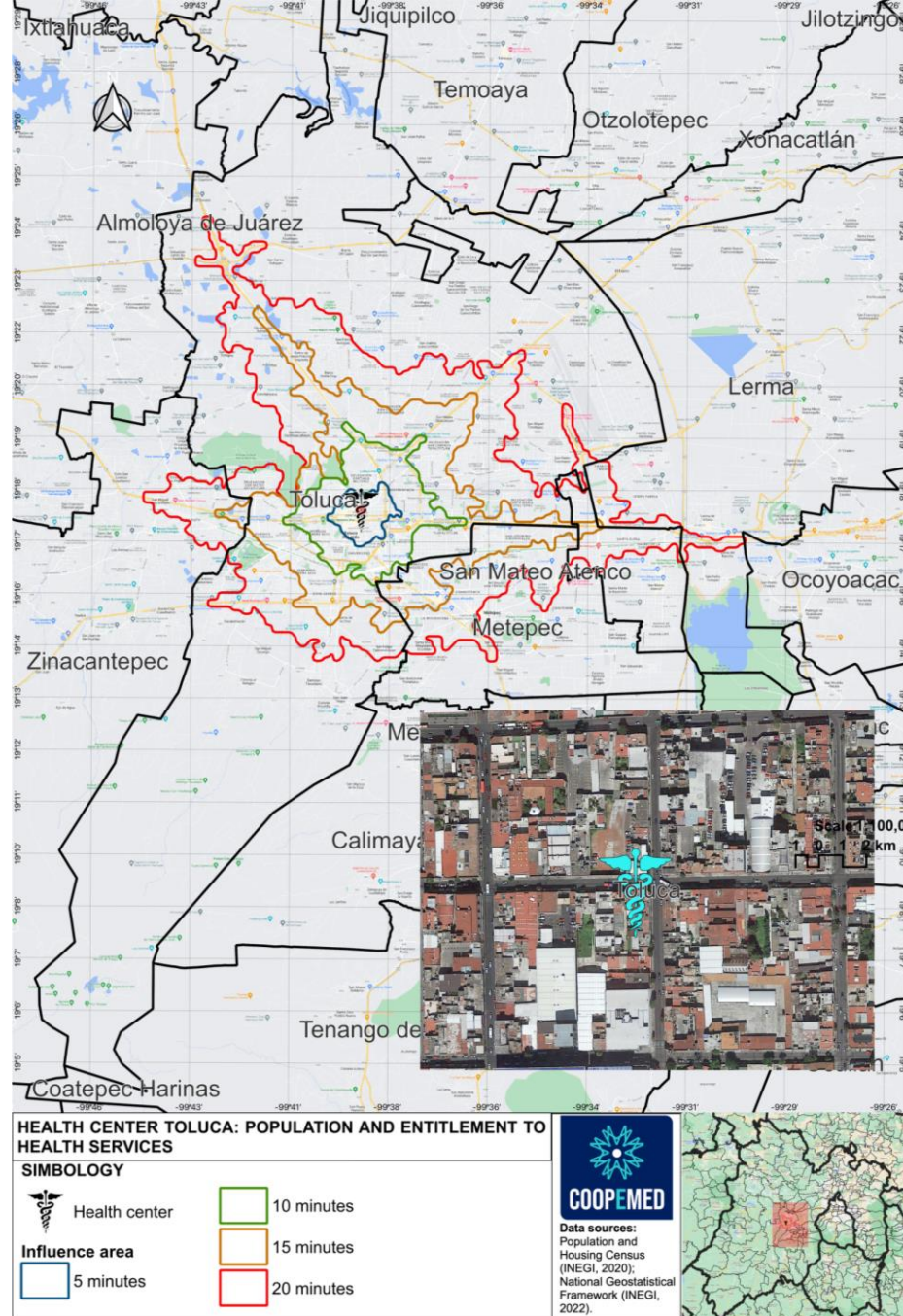
Data sources: DGIS Health (SS, 2021); Population and Housing Census (INEGI, 2020); National Geostatistical Framework (INEGI, 2022).

DEATH RATE BY TYPE 2 DIABETES MELLITUS



TOP 10 LIST		
Place	Municipality	Rate of deaths by Type 2 diabetes mellitus
1	Ixtapan de la Sal	247
2	Capulhuac	225
3	Chiconcuac	224
4	Almoloya del Río	221
5	Tonatico	209
6	Atlautla	207
7	Tepetitlpa	205
8	Tiangustenco	204
9	Teoloyucan	203
10	Atenco	197

HEALTH CENTER TOLUCA – SOCIOECONOMIC CONTEXT



Coopemed will be located at Independencia Avenue #312, Toluca, State of México.

To gather information about the socioeconomic context of the population residing closest to Coopemed, **isochrones** were delimited using a traffic model that predicts travel time by car.

The isochrones were set at intervals of 5, 10, 15, and 20 minutes by car.

The areas of influence encompass the municipalities of Toluca, Metepec, San Mateo Atenco, Lerma, and Zinacantepec.

53,330 households
 213,320 Potential customers
 20 minutes of us

HEALTH CENTER TOLUCA: SOCIOECONOMICS LEVELS

SIMBOLOGY



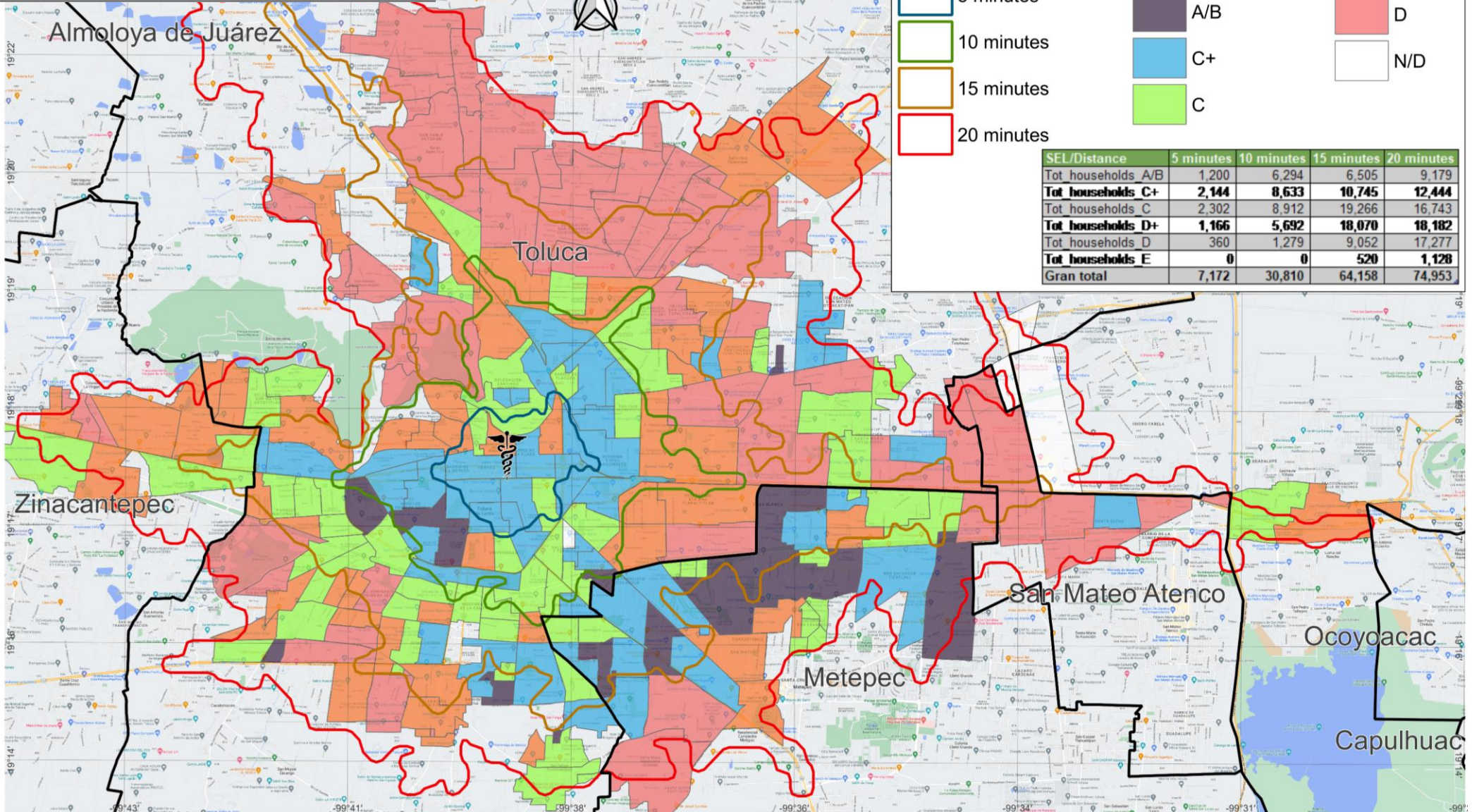
Influence area

- 5 minutes
- 10 minutes
- 15 minutes
- 20 minutes

Socioeconomic Level Predominant

- D+
- A/B
- C+
- C
- D
- N/D

SEL/Distance	5 minutes	10 minutes	15 minutes	20 minutes
Tot households A/B	1,200	6,294	6,505	9,179
Tot households C+	2,144	8,633	10,745	12,444
Tot households C	2,302	8,912	19,266	16,743
Tot households D+	1,166	5,692	18,070	18,182
Tot households D	360	1,279	9,052	17,277
Tot households E	0	0	520	1,128
Gran total	7,172	30,810	64,158	74,953



238,054 persons without health services
20 minutes of us

HEALTH CENTER TOLUCA: POPULATION AND ENTITLEMENT TO HEALTH SERVICES

SIMBOLOGY



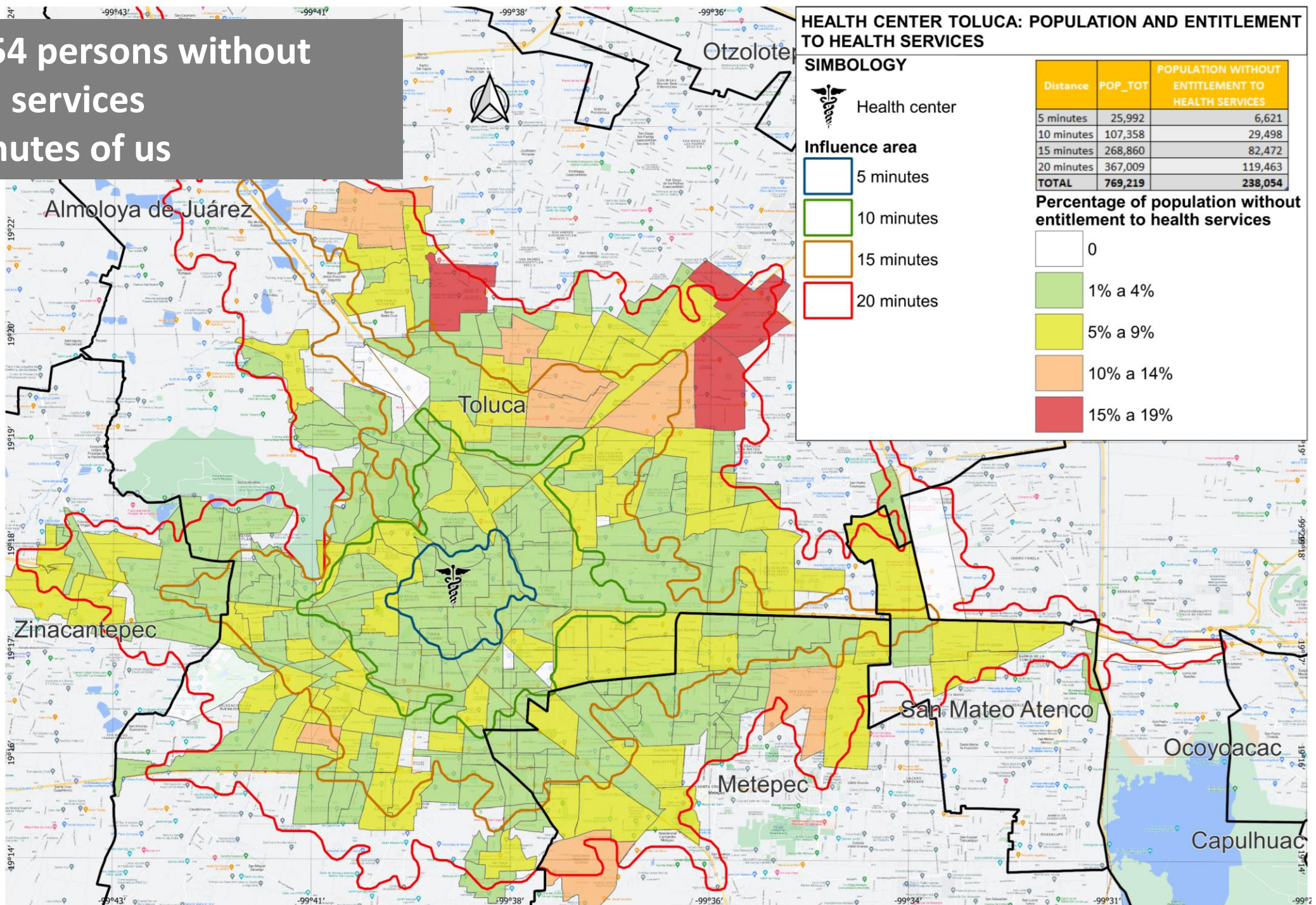
Influence area

- 5 minutes
- 10 minutes
- 15 minutes
- 20 minutes

Distance	POP_TOT	POPULATION WITHOUT ENTITLEMENT TO HEALTH SERVICES
5 minutes	25,992	6,621
10 minutes	107,358	29,498
15 minutes	268,860	82,472
20 minutes	367,009	119,463
TOTAL	769,219	238,054

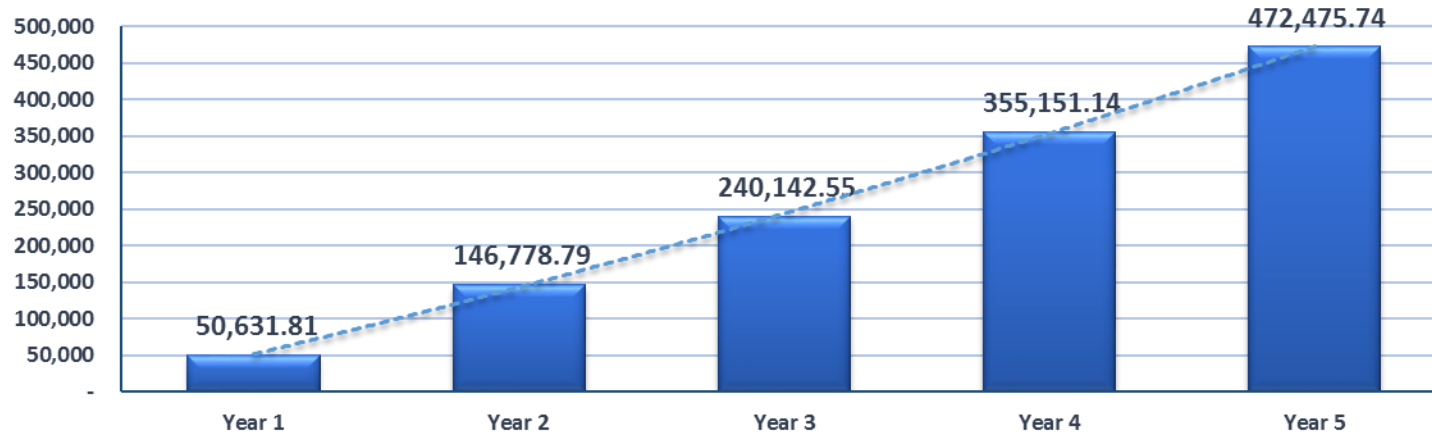
Percentage of population without entitlement to health services

- 0
- 1% a 4%
- 5% a 9%
- 10% a 14%
- 15% a 19%



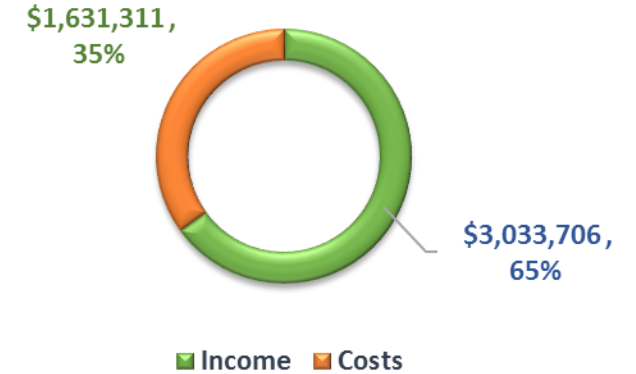
B2. Validation Financial model

Performance – Coopemed (5 years)



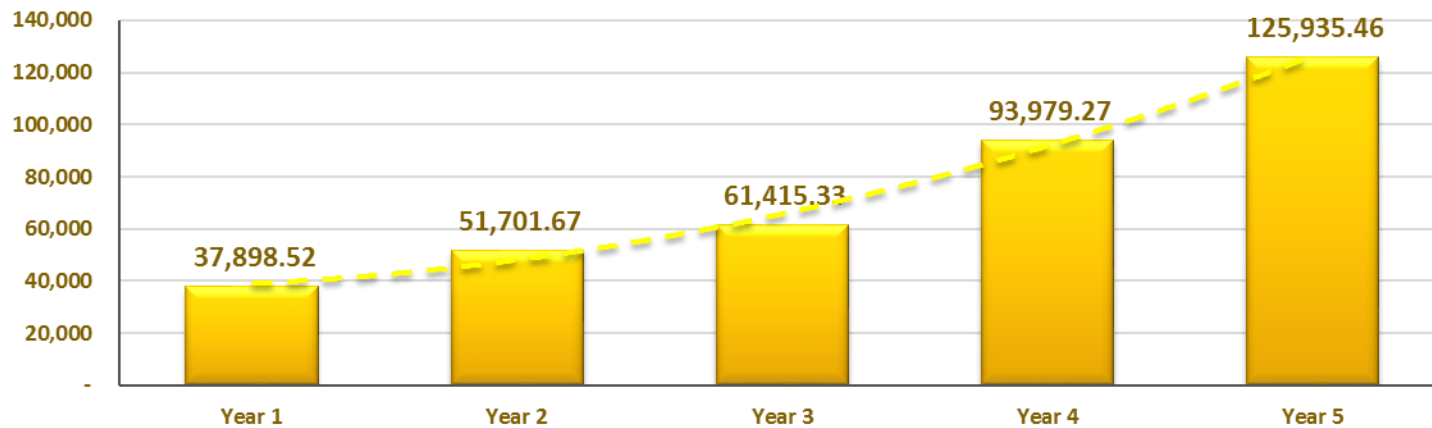
Estimated 5-year profits for Coopemed, according to our financing structure

Coopemed - Distribution of income and costs (5 years)



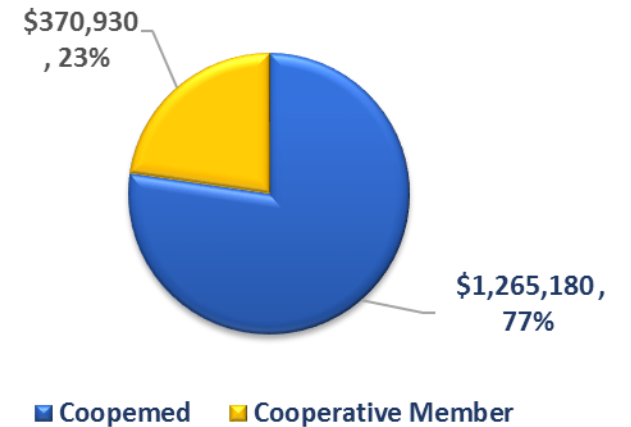
Our financial structure has 35% of costs vs 65% of income

Income for the cooperative member (5 years)



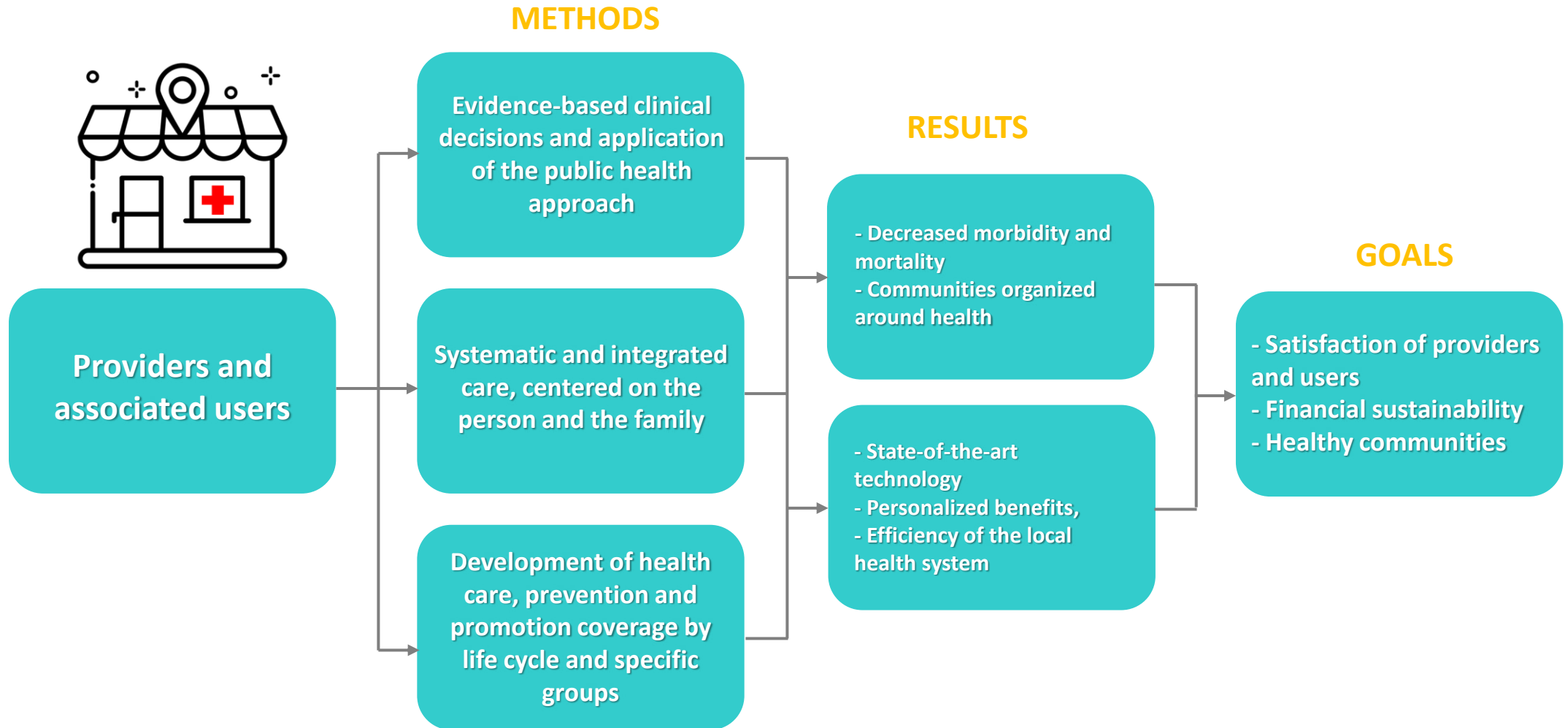
Estimated 5-year profits for the cooperative member (may be SBC)

Yield distribution (5 years)



Initial Profit Sharing Distribution Proposal

Sustainability model



A3. Product/service

Technologies solutions for primary healthcare



1. **Automated patient intake** (From Home)
2. **SMS-based check-in** for patients.
3. **Billing** (Using Stripe / Cash)
4. **Web check-in (kiosk)** for front-desk automation.
5. **Smart-Screening** - Taking the context of the patients and asking questions specifically related to the patient from the doctors.
6. **Transcription of visit recordings** using Google's medical speech-to-text models cutting 3-5 mins for the doctor.
7. **Copilot (DocGPT) for doctors** (allows asking questions about the patient)



In partnership with:

