SWEDEN (2021)

- Population: 10.3 million
- Member of the European Union
- Currency: Swedish krona
- Largest cities: Stockholm (capital), Gothenburg, Malmö
- GDP per capita: 36 643 eur
- GDP Growth: 4,3 %
- The largest market in the Nordics
- The Swedish economy is based on services, heavy industries and international trade

THE HEALTHCARE SYSTEM

THE SWEDISH HEALTH CARE SYSTEM: THREE POLITICAL AND ADMINISTRATIVE LEVELS

STATE,
NATIONAL

Policy
Supervision, safety
Evaluation, follow-up

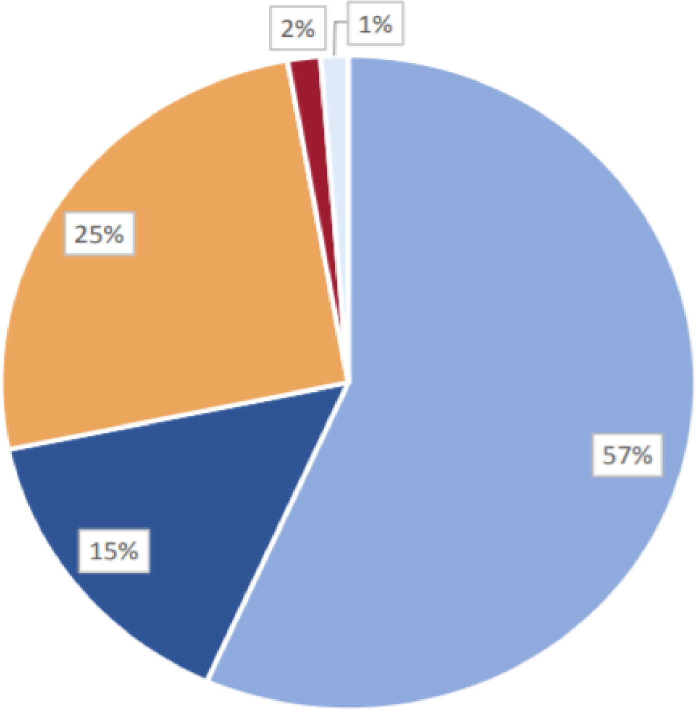
REGIONAL
COUNTY
COUNCILS
(21)

Responsible for organising, financing, improving and providing health care services to all residents.

LOCAL
AUTHORITIES
MUNICIPALITIES
(290)

Responsible for care of elderly and disabled. Support for people suffering from long-term mental illness.

SWEDISH HEALTHCARE FUNDERS



- County Councils
- Municipalities
- Households (patient fees)
- Companies / insurance /ONGs
- Government

OUT OF POCKET SPENDING

- EUR 10-30 - primary care visit
- EUR 40 or lower with referral-specialist visit
- EUR 10 /day of hospitalisation for an adult
- Most out-of-pocket spending goes on pharmaceuticals and dental care

THE SWEDISH HEALTH CARE SYSTEM: BASICS

- Universal healthcare, covering all residents.
- Health budgets are decentralized.
- The government has very limited degree of control
- Services may vary throughout the country.
- Increasig No. of healthcare services are out-sourced to the private service.
- Local and regional authorities are represented by the Swedish Association of Local authorities and regions (SALAR /SKR).
- More voices asking for increased cordination and centralization

THE SWEDISH HEALTH CARE SYSTEM

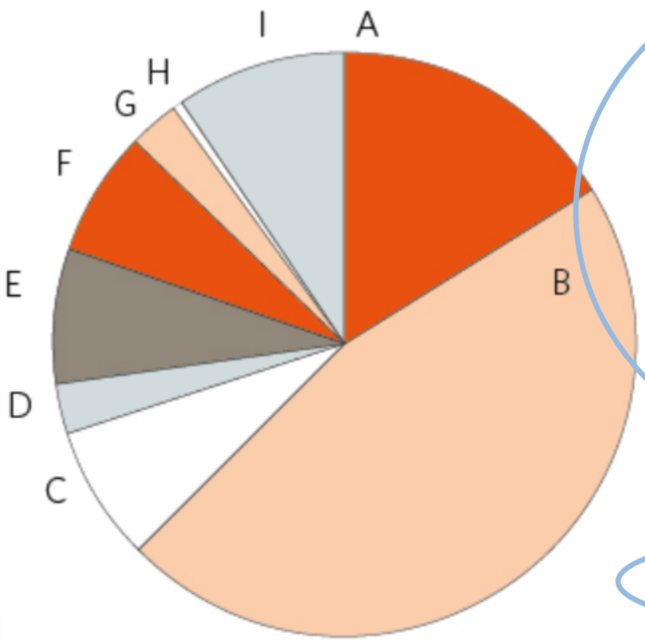
- 11% of GDP, the 3rd highest in healthcare expenditure in EU.
- Persons with one or more chronic diseases contribute to around 85% of total healthcare costs.
- Increased shortage of clinicians and specialised nurses.
- Long waiting times for services (additional delays due to the pandemic).

- Hospital beds: 2,1/ 1000
- physicians: 4,8/ 1000
- Primary care doctors: 1/ 1000
- Nurses: 11 /1000

CHANGING DEMOGRAPHICS DEMANDS HEALTHCARE REFORMS

- A shift from hospital inpatient care towards outpatient care at hospitals and primary care facilities.
- More choice of provider, competition and privatization to support the development of primary care and pharmacy sector (2010, 2009).
- Private sector is seamlessly integrated into the publicly funded system.
- Continued specialization, regionalization and concentration of services within the hospital sector.
- National reforms for shortening waiting times for services.
- Ongoing work to allow for more integration of primary care and specialized care services

DISTRIBUTION OF SWEDISH REGIONS EXPENSES 2020
SEK 393B (EUR 38B)



A Primärvård 16,1 %

B Spec somatisk vård 46,6 %

C Spec psykiatrisk vård 7,5 %

D Tandvård 2,7 %

E Övr hälso- o sjukvård 7,6 %

F Läkemedel (öppen) 7,0 %

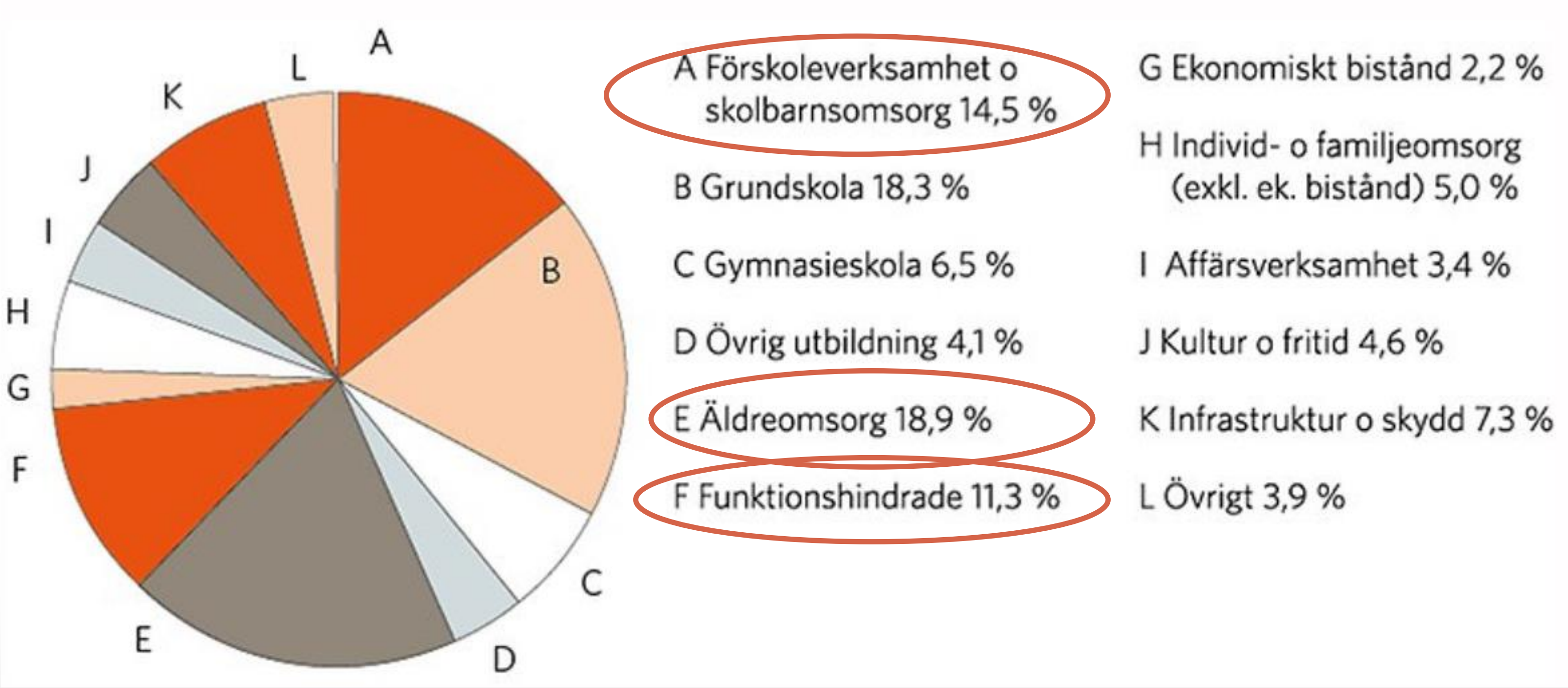
G Regional utveckling 2,6 %

H Pol verksamhet hälso- o sjukvård 0,5 %

I Trafik o infrastruktur 9,4 %

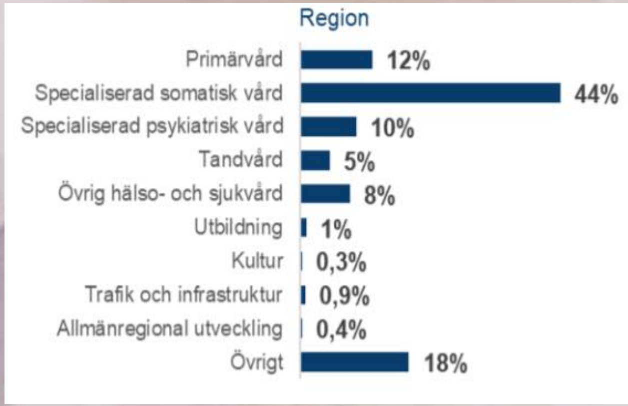
SKR

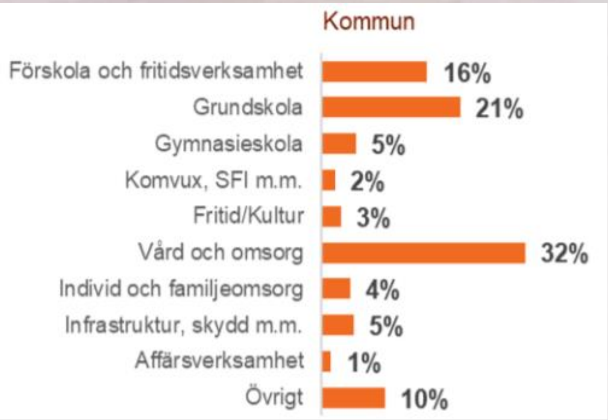
DISTRIBUTION OF SWEDISH MUNICIPALITIES' EXPENSES 2020
SEK 715B (69B EUR)

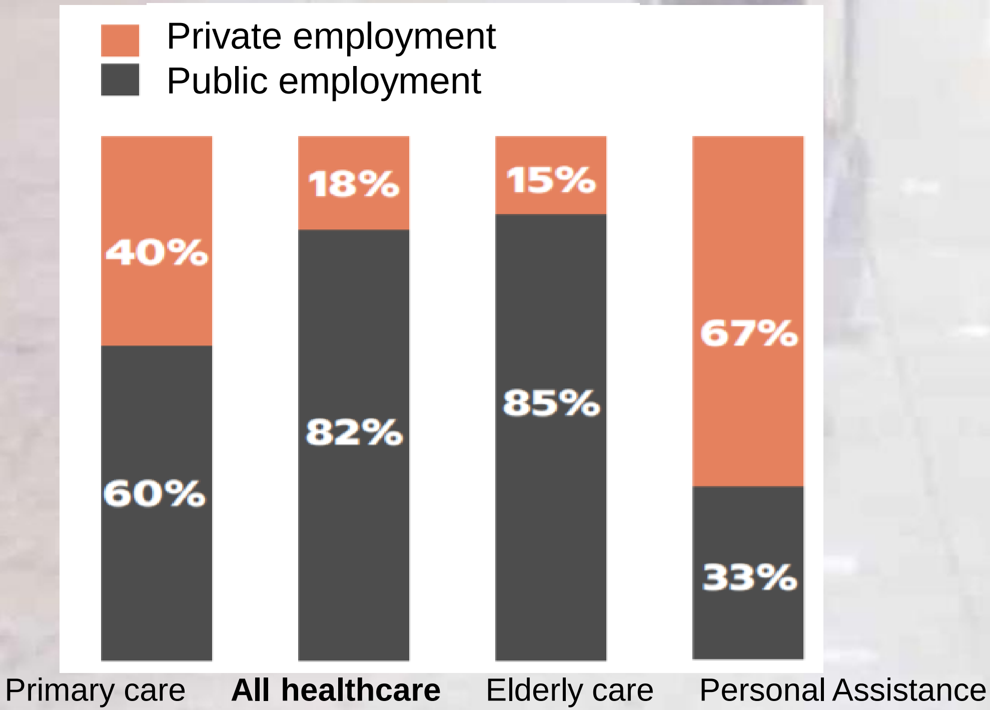


SKR

1,2M OUT OF 4,8M PEOPLE WORK IN HEALTHCARE

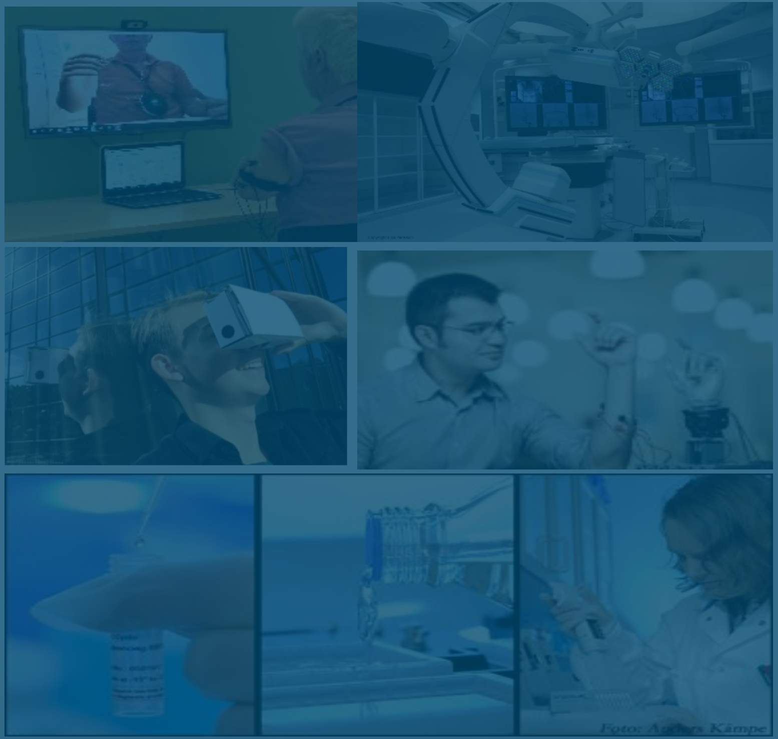






HEALTH CARE TRENDS IN SWEDEN

- Predictive
- Preventive
- Participatory
- Proactive
- Self service
- Personalized
- Cost effective
- Evidenced- based
- Accesible
- Sustainable
- Virtual and physical blended
- Co-creation
- Precision medicine
- Interoperability and connectivity
- AI and automation
- Clinical decision support



SWEDEN: DEMOGRAPHICS 2021

- Average life expectancy: 82,4
- 5,3% of the population is 80+ (545 000)
- 20% of the population is 65 years or older
- Ischaemic heart disease, stroke and lung cancer were the main causes of death before the pandemic.
- In rural areas the 80+ population will increase by over 30% in the coming ten years, while the people of working age will decrease by 10%.

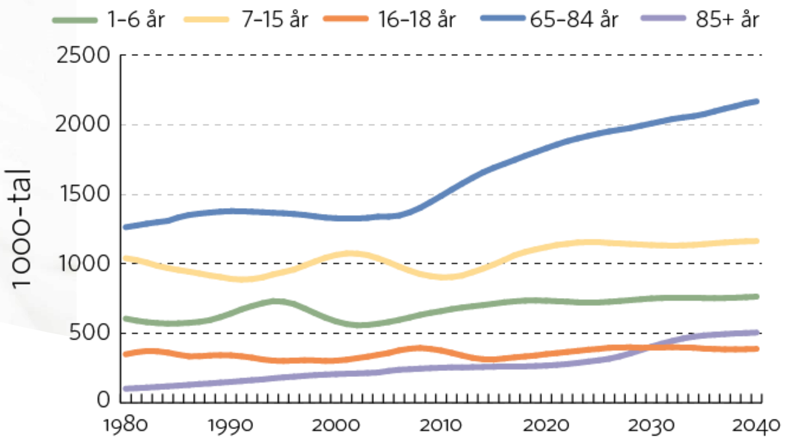
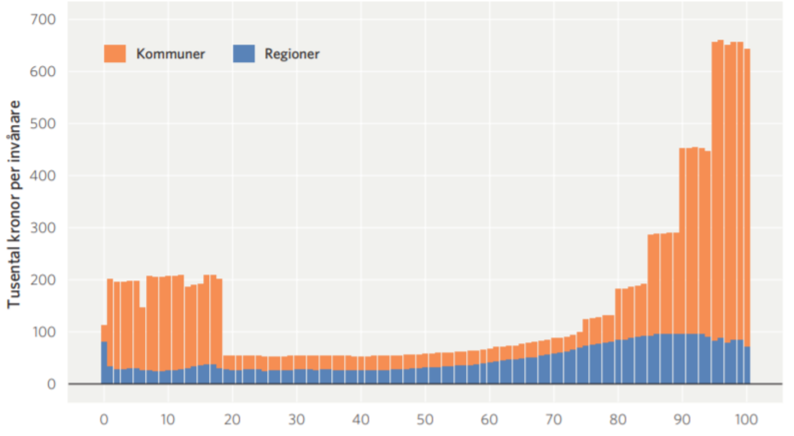


Diagram 5 • Kostnad per år och invånare relativt ålder, i 2020 års prisnivå
Tusental kronor per invånare



Källa: Statistiska centralbyrån och Sveriges Kommuner och Regioner.

COUNTY COUNCILS

- In charge of primary, specialized and psychiatric care as well as dental care (up to 20 years).
- There are over 70 hospitals out of which 7 are university hospitals.
- All emergency hospitals are under the control of the county councils.
- Public hospitals provide most of the acute care, while university hospitals provide highly specialised care.
- Rehabilitation services and all long-term care are provided outside of hospitals (increased need due to covid).
- Swedish primary care acts as a gatekeeper to specialized care.
- 45% (514) of all primary care facilities 2020 (1168) are privately owned.
- The proportion of doctors at a primary care facility has go down to 18% and all should have access to a psychologist.
- Most patients make appointments by internet or phone.
- Some services are outsourced to private parties in publicly-owned facilities
- 92% of the population has less than a 10min drive to the closest primary care facility.
- Some primary care reforms ongoing ex. each patient will have a doctor assigned.

HOSPITALS OF THE FUTURE

- Renovation of several hospitals and building of new hospital facilities to meet future technical development.
- Each region is responsible for their own hospital plans.
- Partnership with private companies such as Skanska, NCC, Peab is recommended.
- “Byggfakta” and “Sverige Bygger” are reliable sources for information on upcoming hospital projects.
- Major renovations are done to make hospitals centered and specialized.
- In December 2020, there were 65 ongoing hospital projects.

MUNICIPALITIES

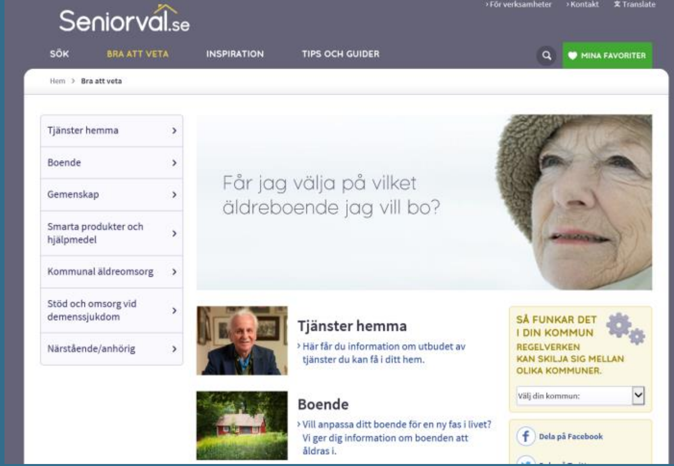
Care Provision

- ✓ Nursing homes
- ✓ Homecare of the elderly
- ✓ Disabled people.
- ✓ People with psychological disorders
- ✓ Support and services for people released from hospital care
- ✓ School healthcare

- Hospital beds are being reduced and replaced by homecare services
- Difficult to obtain larger contracts for medical supplies, but opportunity to address the needs in specific municipalities.

HOMECARE /HOME HELP

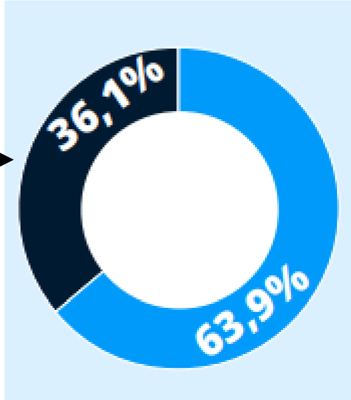
- Both county councils and municipalities have responsibilities for home-based care (new law from 2018).
- Upon referral, patients choose their own care providers for home services, home care, and long-term care. (ex. seniorval.se).
- Each municipality operates its own procurement for long term care technology, assistive devices, and care services.
- At least 20 % of all nursing homes and homecare services are provided by the private sector.
- On average one user see 15 different home service givers during a period of 2 weeks.
- More focus on improving health care services in close collaboration with the county councils.
- SEK 10B for improving elderly care.
- Ongoing discussions on new reforms for reducing personnel rotation and creating a new national elderly care competence center.

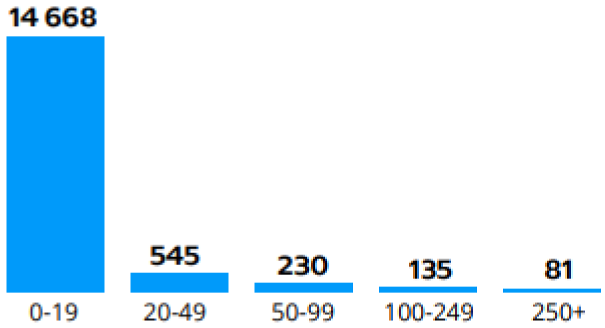


LARGEST PRIVATE HEALTHCARE PROVIDERS IN SWEDEN 2019

15 660 companies
157 500 employees
17% of all services

Capio
Praktikertjänst
Attendo
Alers
Frösunda
Ambea
Humana
Förenade Care
Previa
Team Olivia





Number of employees

Association of Private Care Providers (Vårdföretagarna)

Association of Health Professionals (Vårdförbundet)

Medical Association (Sveriges Läkarförbund)

ENTERING THE MARKET

PROCUREMENT

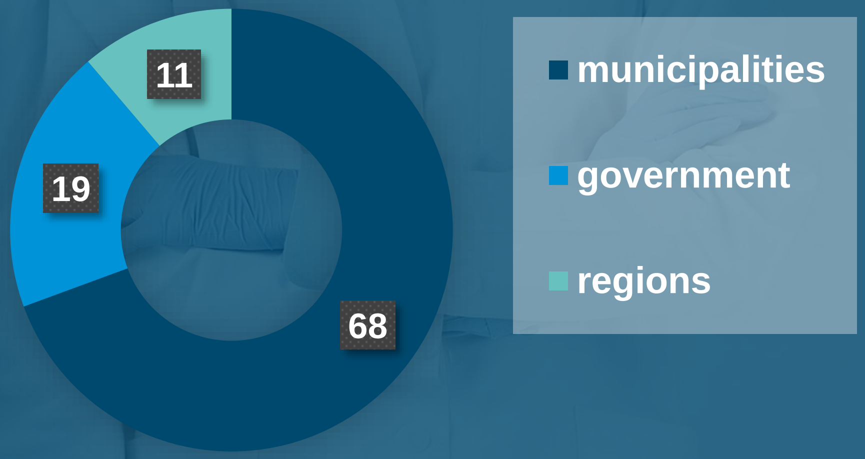
Total No of public tenders 2019

Stat	Antal	Kommun	Antal	Region	Antal
Trafikverket	671	Stockholms stad	388	Västra Götalandsregionen	220
Fortifikationsverket	223	Göteborgs stad	321	Region Stockholm	191
Statens Fastighetsverk	79	Inköp Gävleborg	258	Region Skåne	162
Polismyndigheten	78	Upphandlingscenter Falun Borlänge-regionen	149	Region Jönköpings län	117
Lunds universitet	77	Jönköpings kommun	125	Region Uppsala	106
Kriminalvården	77	Uppsala kommun	121	Region Västerbotten	103
Uppsala universitet	65	Umeå kommun	120	Region Östergötland	94
Domstolsverket	59	Malmö stad	117	Region Halland	82
Arbetsförmedlingen	59	Upphandlingscenter fjärde storstadsregionen	109	Region Dalarna	75
Swedavia	57	Skellefteå kommun	105	Region Kronoberg	71
Myndigheten för samhälls-skydd och beredskap (MSB)	56	Halmstads kommun	97	Region Sörmland	68
Stockholms universitet	55	Helsingborgs stad	96	Region Örebro län	61
Umeå universitet	54	Västerås stad	96	Region Norrbotten	59
Försvarsmakten	53	Karlstads kommun	96	Region Västernorrland	59
Sjöfartsverket	52	Örebro kommun	94	Region Värmland	59
Karolinska institutet	46	Örnsköldsviks kommun	92	Region Gävleborg	54
Kungliga Tekniska högskolan	45	Inköpssamverkan	91	Region Kalmar län	53
Migrationsverket	36	Sundsvalls kommun	87	Region Blekinge	48
European Centre for Disease Prevention and Control (ECDC)	34	Kristianstads kommun	86	Region Västmanland	48
Försvarets materielverk FMV	34	Borås stad	81	Region Jämtland Härjedalen	42

Källa: Visma (uppgifter) och Upphandlingsmyndigheten (bearbetning) 2020. Not: Uppgifterna för statliga myndigheter, regioner och kommuner omfattar även offentligt ägda bolag inom respektive kategori.

1,3% of all suppliers receive 80% of the total SEK 873 billions that the public sector purchased 2019

Procurers Distribution 2019



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PROCUREMENT

- There are some cases of collaboration between county councils and municipalities for procurement.
- Most business is conducted in Swedish and many tenders are floated in Swedish.
- The National Agency for Public Procurement (Upphandlingsmyndigheten) provides support to companies in procurement processes.
- Swedish tenders that fall under EU procurement procedures are posted directly to Ted: Tenders Electronic Daily.

Listings of procurements are provided via private sector databases:

- http://www.upphandlingsmyndigheten.se/leverantor/forbereda/hitta-affarsmojligheterna/
- https://www.valfrihetswebben.se
- https://www.vgregion.se/om-vgr/organisation-och-verksamhet/inkop/inkopsorganisation/upphandling-och-innovation/
- https://goteborg.se/wps/portal/start/foretag/upphandlingar

PROCUREMENT PROCESS

- Each clinic forecasts their expense 1-3 years prior to the expected date of supply delivery.
- The average length of public procurement healthcare contracts are (2+2) 4 years.
- The decision/budget maker is most frequently the hospital management.
- Most county councils create procurement units with advisory and steering groups including various types of stakeholders from product users, medical personal to technicians.
- Clinicians are key decision-makers in the selection of a manufacturer.
- The procurement process including the preparatory phase can take between 6 month – 1 year.
- Each hospital decides which funds to allocate for innovative products.
- Sustainability criteria are gaining in importance.
- There is an increasing focus on optimizing the breadth of products, reducing total costs and having fewer suppliers and invoice flows.

ENTRY OPTIONS TO THE SWEDISH HEALTH TECH SCENE

1. Establishment
2. Capital Investment or M&A
3. Partnership
4. Joint R&D project or clinical validation

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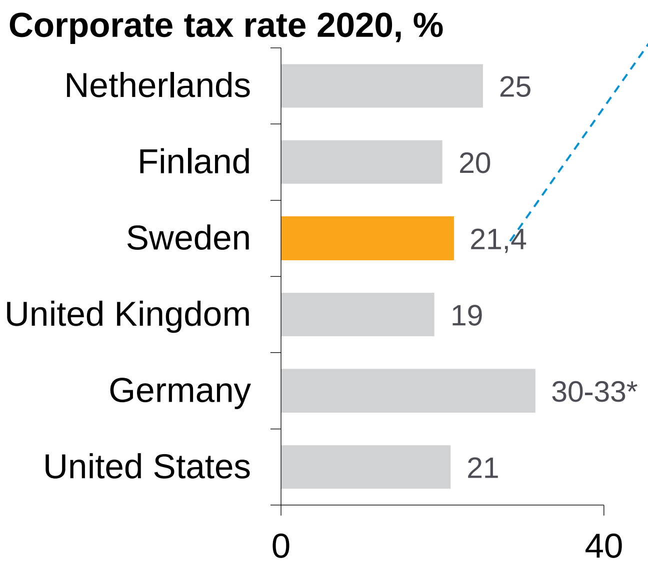
COMPETITIVE CORPORATE TAX



Government decided to reduce corporate tax rate to
20,6% from January 1, 2021

- No regional or local corporate tax
- Favorable depreciation models on machinery and equipment
- Large number of tax treaties to support export companies

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TAX

HEALTH TECHNOLOGIES

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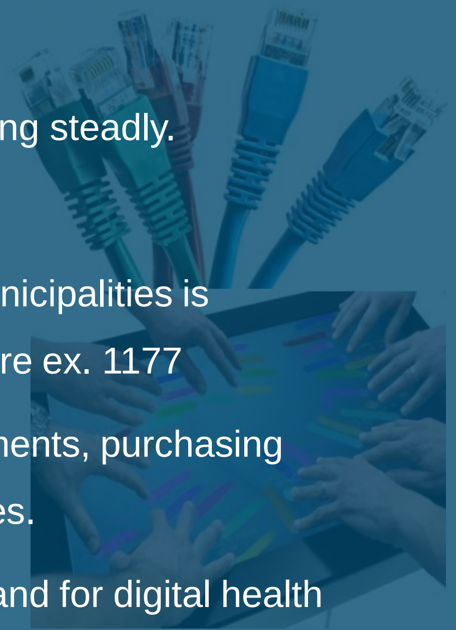
HEALTHCARE IT: BASICS

- 100% usage of electronic health records for all parts of the health care system (primary care as well as specialist care).
- 99% usage of e-prescription.
- 100% digitalization in medical imaging and radiology.
- Long-term use of ID numbers (over 70 years).
- Over 100 Quality registries and 600 registered biobanks
- The electronic medical record is accessible for patients at home, from their own device since 2017
- National eID for health professionals
- Healthcare personnel get access to patient journals from other regions/municipalities via the Nationell patientöversikt - NPÖ

DIGITAL ACCESS TO CARE AND INFORMATION

- Access information and appointments: via “1177 online.
- The 4 largests online consultation companies (Kry, Min Doktor, Doktor 24, and Doktor.se have 87% of the market.
- Some healthcare facilities have developed their own apps and digital solutions ex. for chronic diseases management.
- Digital consultation have dramatically grown to nearly 11 % of all primary care consultations in 2020 and 2% of the total primary care costs.
- New players offering 24/7,several languages and nische services.

HEALTHCARE IT



- Every hospital selects and procures its own preferred IT system.
- The County Councils’ annual investments for healthcare IT has been growing steadly.
- All eHealth services are purchased through public procurement.
- Inera, an eHealth company owned by the Swedish county councils and municipalities is responsible for developing a national digital infrastructure and IT architecture ex. 1177
- ADDA Inköpscentral : Central Purchasing Body, offering framework agreements, purchasing systems and other services to support the purchase of welfare technologies.
- The dispersed population in Northern Sweden presents an increased demand for digital health solutions.

HEALTHCARE IT: COMPETITION

Companies offering Softwares and EHR systems
Cerner, TietoEvry, Cambio, CompuGroup (at least 90% market share)
Microsoft, Hewlett Packard, IBM, Amazon Web Services, Cap Gemini

Online consultations platforms: Doktor24, Kry, MinDoktor, Doktor.se

Medical Imaging Information Systems
Medical Insight A/S, Sectra AB, GE Healthcare, Carestream Health, Inc, Agfa-Gevaert N.V.

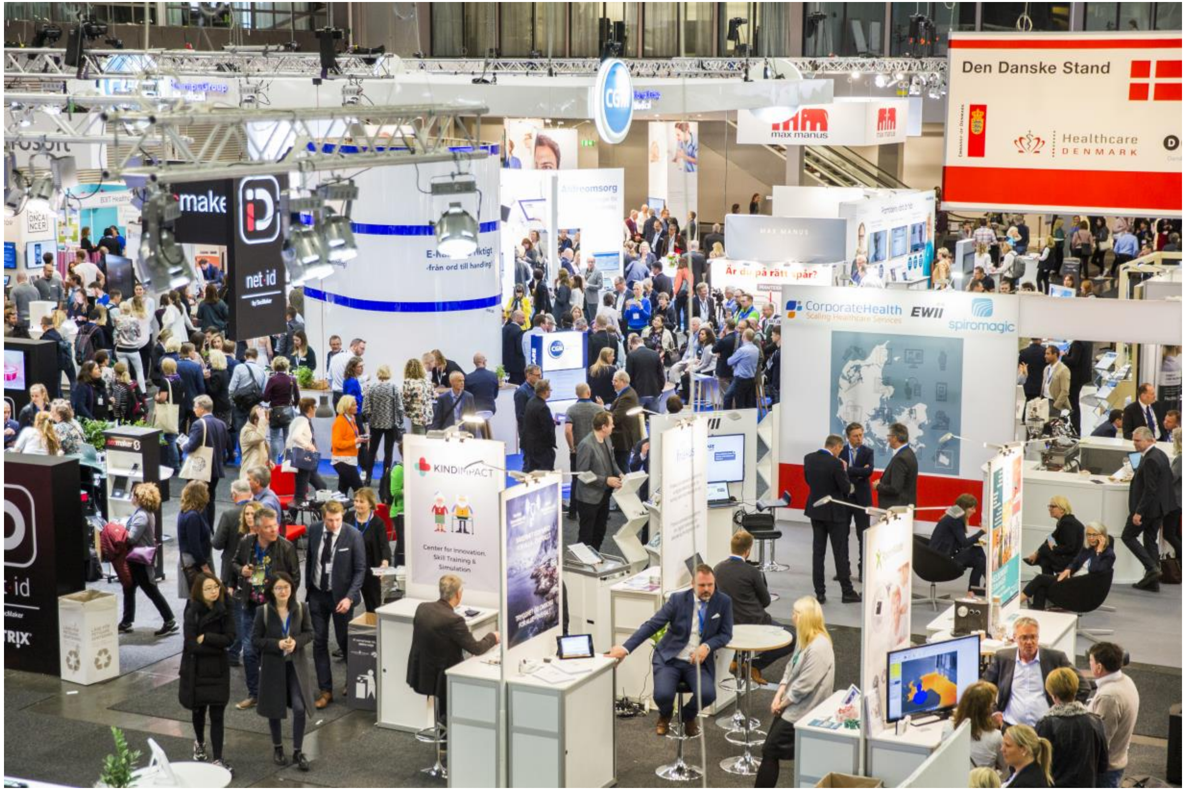
TechSverige (former IT&Telekomföretagen): Representing about 1 300 Swedish IT and telecom companies

https://www.almega.se/app/uploads/sites/3/2020/09/privat-vardfakta-2020.pdf

COVID19: EFFECTS ON HEALTHCARE

- Increased used of the national quality registries.
- More healthcare staff were able to work from home/remote.
- Increased digital training for healthcare professionals.
- Digital consultations between healthcare providers increased.
- Many regions introduced digital guiding and triage systems.
- The number of centers offering digital consultations increased.
- More focus on proactively contacting, visiting and following up patients and risk group people.
- Increased use of homecare disease management systems for people with chronic disease and the elderly population ex. more use of camera, sensors.
- Digital skills and knowledge on digital solutions increased in both caregivers and patients.

VITALIS: LARGEST EHEALTH EVENT IN THE NORDICS, 17-19 MAY 2022



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SAHLGRENSKA UNIVERSITY HOSPITAL

- Northern Europe largest healthcare unit.
- Largest emergency care Hospital in Europe
- National centre for paediatric heart surgery and transplantation
- Serves approx. 1.8 millions inhabitants
- Over 2 700 beds and approximately 17 000 employees
  - €240million euro in turnover
  - 16 000 employees out of 47 000 in the sector
  - 60% professors working in Health Care

- 17 hospitals
- 208 primary healthcare centres (public and private 50:50)
- 49 municipalities
- 45,000 people work in healthcare
- Budget: SEK 35 billion
- 90% of Region Västra Götaland’s total budget (70% to staff)

HEALTHCARE INNOVATION

1

AI SWEDEN
- National and neutral platform to accelerate AI related R&D
- National Data factory
- Public funding available
- AI SME accelerator
- 80+ partners
- Collaborative projects

2

Innovation Platform
- Product testing and validation at any of the region’s healthcare facilities.
- Visualizations of health care needs
- Spin off innovation ideas from the healthcare

3

Gothia Forum
- Single point of entry for clinical research /trials in West Sweden
- Clinical trial centers
- Training
- Health economics
- Regulatory matters

4

%

AllAgeHub
- Support 12 municipalities with implementing assistive technologies
- Enable companies to develop and test their products and services.

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USE OUR EXPERTISE

We provide services in the following areas:

- Key facts and figures
- Network access
- Assistance in building business case
- Partnering and investment opportunities
- Land & property search
- Contacts with authorities
- Expat-related Issues
  Talent attraction

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