



# UNITED STATES

Capital: WASHINGTON D.C.

Population: 327 million

**BUSINESS  
FINLAND**

Health & Wellbeing

## QUICK FACTS ✓

**Potential business figures on healthcare in 5 years:** US health is in transition.

Spending continues to increase: 4.6% in 2017 and 5.3% in 2018 reaching USD5.3 trillion. An aging population adding to the Medicare health insurance program for the elderly and disabled, increases in the prices of medical goods and services and a lack of competition, are all impacting costs.

- ❑ 32.9% hospital care
- ❑ 22.9% physician services
- ❑ 7.9% other professional
- ❑ 10.2% prescription drugs
- ❑ 7.2% nursing homes
- ❑ 18.9% other

**Typical buyer of health services:** Under the Affordable Care Act (ACA), all citizens gained access to health insurance. Healthcare insurance is a two-tiered, pre-paid insurance subscription model: government (Medicare and Medicaid) and private. Most people receive health insurance from their employers via a group insurance plans and pay a percentage of the cost. The average cost for health insurance for a family of 4 is now USD22,000/year with high deductibles. Almost 80 million people are still either un- or under-insured. Access to and affording care remains a national problem.

**Governmental or legislative climate to support new services/innovations on health:**

There are just under 5700 hospitals categorized several ways: for-profit/not-for-profit and government; or closed/ opened system (based on how they are insured). A health system is the formation of people, institutions, and resources proving healthcare to a specific population.

Total Hospitals in the US	5,700
Not-for-Profit Hospitals	2,900
For-Profit (Privately Held & Publicly Traded)	1,000
Government-owned	1,000
Serves a rural community	2,000
Designated Critical Access Hospital (CAH)	1,300
Academic Medical Centers	400
Hospitals in a Health System	3,000

**Typical buying and/or acceptance process in the country for new solutions:**

Spending and cost are key parameters. How money is spent is known and tracked. How to reduce cost is a critical success factor. Market needs are varied but are typically based on meeting the Quadruple Aim. Reducing costs, improving efficiencies, better quality of care and life for both patients and providers are key needs.

**Regulation & Reimbursement environment:**

Regulatory processes (FDA) and reimbursement pathways are necessary. EU certification is a benefit. Entry and first sales will take 3-5 years.



**Trends & strategy** There is no standard process for US market entry. Entry is case by case and based on meeting a defined market need and having clinical proof of concept. Most hospitals and most all insurance companies are not buyers. The best way to enter is with a strategic partner who will co-develop and form a joint venture.

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**Life expectancy:** 80 yrs

**GDP (PPP):** 19,4 T\$ (3<sup>rd</sup>) ✓, Per Capita 59.500\$ (19<sup>th</sup>)

**Annual Growth Rate:** 1,8%

**Official languages:** English (79%), Spanish (13%), Other (8%)

**Physicians density:** 2,6 / 1000 pop.

**Birth Rate:** 8.6 / 1.000 population

**Digitalization Maturity ✓:** 10<sup>th</sup>  
DEI Index 3,61 / Stall Out

**Health expenditure:** 17,1% (GDP)

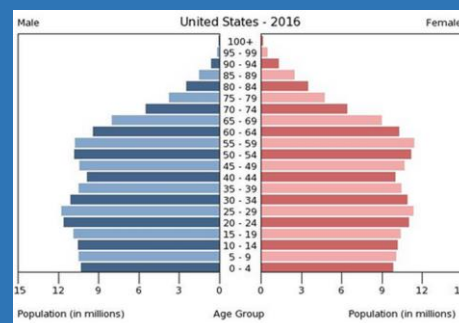
**Urbanization rate:** 83,4%

**Hospital bed density:** 2,9 /1000

**Obesity rate:** 36,2%

**Median Age:** 38,1 years

**Population growth rate:** 0,81% ✓



Deaths per 100.000 people	Finland	United States
Lung cancers	37,5	53,1
Diabetes	10,0	24,2
Alzheimer and other dementias	92,5	55,4
Cerebrovascular disease	77,4	47,1
COPD	19,7	42,0
Genitourinary diseases	7,2	22,3

**National challenges ✓:** Ischemic heart disease, Alzheimer's, COPD, Cerebrovascular disease, cancer(s)

**Link to opportunities ✓:**

<https://bit.ly/2IHAawC>