

Business Plan and Investor Pitch Deck Template

Below is a suggested template for an initial pitch deck for investors. It should not be more than 12- 15 slides. (You don't have to follow the template, but cover as many points as you can from this template.)

At this stage, detailed excel sheet numbers are not necessary. The objective of the initial pitch document is to provide an overview of what you intend to do, and why it is a good investment opportunity.

Contact details

- Company name and logo
- Contact details (city, e-mail, mobile)
- Url
- One line that clearly describes the concept/product/service

Bad example: We are redefining the quality of healthcare

Good example: We are building a chain of affordable pediatric clinics in tier 2 cities

Overview of your solution (2-3 slides)

What is the problem or opportunity you are addressing?

Citizen in tier 2 cities have very poor access to quality healthcare. When it comes to specialty healthcare, it is practically non-existent.

We are focusing on pediatric care segment as there a large gap between demand and supply.

Your solution i.e. how you are addressing the problem

We are creating a technology enabled solution with a centralized pool of experienced multi-disciplinary pediatric specialists who support local doctors & medical staff in on-ground centers in tier 2 cities.

What is the value proposition of your offering?

Affordable and high-quality pediatric care.

What is your 'defensible' competitive differentiator

Unlike other online medical care platforms, ours is a assisted healthcare model. i.e. the patients do not engage with the doctors directly, but are assisted by local doctors / medical staff, leveraging the high-quality central resources.

Our technology platform is our differentiator, and it also helps us optimize central resources over a much wider base of patients across many centers spread across India.

Why is your differentiator defensible?

We have created the tech platform for an assisted medical care model. It is unique in its features, and has been done with deep thought for V3 – Voice – Video – Vernacular. The combination of technology and business model makes our model harder to replicate.

Product / Technology (1-2 slides)

We have 5 stakeholders on the platform, with specific functions and features for all of them

1. Central resources e.g. pool of specialists in the central team – these could also be remotely location, but operating as a central resource
2. Local doctors and medical staff who assist local patients in on-ground clinics
3. Patients
4. Third party services like diagnostic labs, blood banks, hospitals, ambulance services, insurance companies, etc.
5. To be developed: We are creating a module for low-income patients to access grants/donations from charitable institutions and individual donors (e.g. some wealthy family may want to donate money to help some poor families access quality cancer care)

Uniqueness of the technology and application

Our tech stack uses Aadhar enabled KYC, biometric authentication and has APIs for deep integration with connected devices and medical equipment like data from diagnostic labs.

(Provide screen shots of portal/app or photographs as relevant)

Business Model and Business Case

We enroll local doctors in tier 2 cities as our representative centre, and provide them branding to operate under the framework of our brand.

Patients can either pay-per-use or can buy a yearly individual or family subscription. We charge Rs.500 per 15-minute consultation. However, local doctors determine the additional fees they will charge their patients for their expertise and service.

Patients pay our fees online, and have the option of paying for the doctor's fees online too or can pay the doctor in person for their additional charge over and above our Rs.500.

Market size

We are targeting 100 tier 2 cities in the next 5 years. There is a need for 25 clinics in each of the 100 tier 2 cities in India that we plan to target, thus taking our opportunity to create 200+ clinics in 5 years.

We expect each unit to see 100 patients per day, contributing to Rs.50,000 gross revenue per clinic per day. With the 2000 clinics we target, we estimate the revenues to be around Rs.500. Overall, the country needs 100,000+ clinics, and thus making it a Rs.20,000 crore market just from the consulting side. Additionally, medicines, diagnostics and commissions from hospitals is a Rs.20,000 crore opportunity.

Who is your target customer?

We are targeting low-income households who have limited access to quality healthcare.

Which markets are you addressing?

We plan to start operations in Rajasthan, with Kota, Jaisalmer and Udaipur as the markets earmarked for the first phase.

Competition

We are competing with local doctors and clinics. Patients prefer us because we enable the local doctor to leverage high-quality, experienced specialists that makes it possible for them to get better healthcare than can be possible with the local doctors.

Additionally, our network of hospitals and diagnostic centers in cities provide special rates, thus making quality healthcare affordable to low-income families.

Current status and traction

We currently have 2 clinics operating in Kota, with 2 super specialists on our panel in Gurgaon.

We are seeing near 100% capacity utilization from day 1 in both the clinics, and we had to quickly on-board the 2nd doctor immediately, and we are in the process of on-boarding 3 more super specialists before the launch of 3 new clinics in Kota in December this year.

Team

Highlight what will each member of the team do in the venture, and why he/she is best suited for the role

Indicate the % of equity held by founders – also mention if they are full time or not

Highlight key team members other than founders and advisors (if any)

Go-to-market plans

We approach local doctors in-person with a strong value proposition i.e. enhance your clinic in the locality by becoming a part of a chain of tech-enabled brand of healthcare that leverages central pool of specialists.

We have had 100% success in on-boarding doctors as it comes without any additional investment for them, and in fact adds to their income.

We plan to continue with the in-person onboarding strategy as it also allows our team to on-board doctors with proper training on technology and sensitization about policies. It also allows our team members to create a comprehensive profile of the medical staff and doctors.

Financials in INR

	Launch (April 2019) till August 2019 (Actuals)	Sept 2019 – March 2020	FY 2020-21	FY 2021-22
Number of cities				
Number of clinics				
Revenues				
Expenses				
Salaries				
Marketing				
Capex				
Operating expenses				
Surplus / deficit				

We are raising Rs.X cr at a valuation of Rs. Y cr.

This investment will last for 18 months, and will help us get to 10 clinics. We will get to operational profitability, and additional investment will be required only to set up new clinics.