



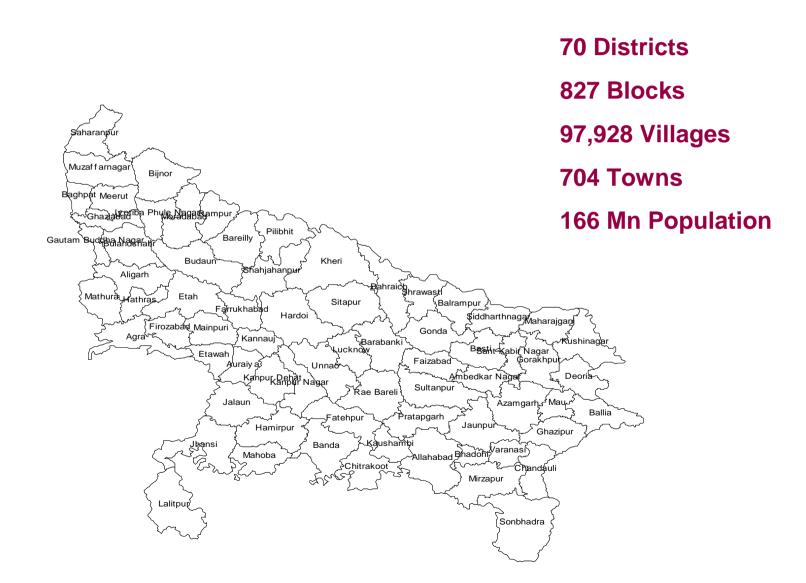




# Merrygold: A Sustainable, Multi-Tiered Network

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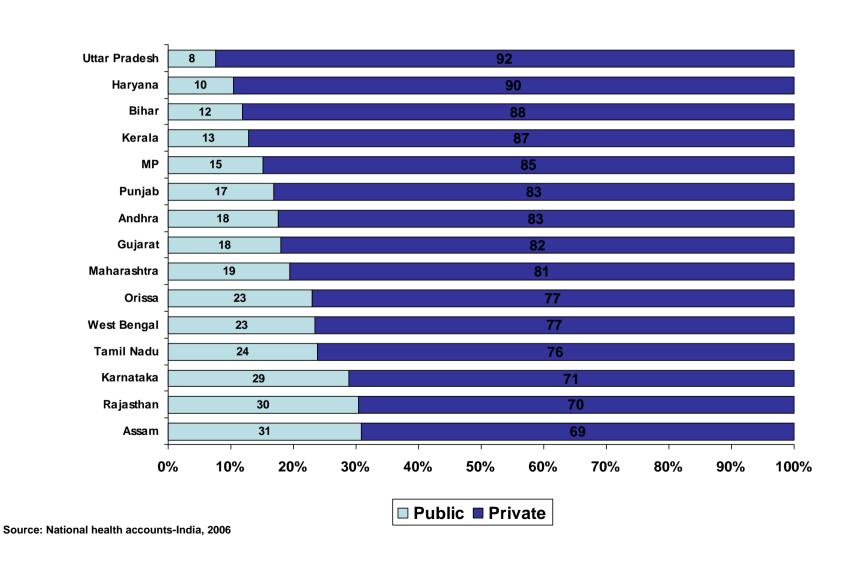
#### **Uttar Pradesh**



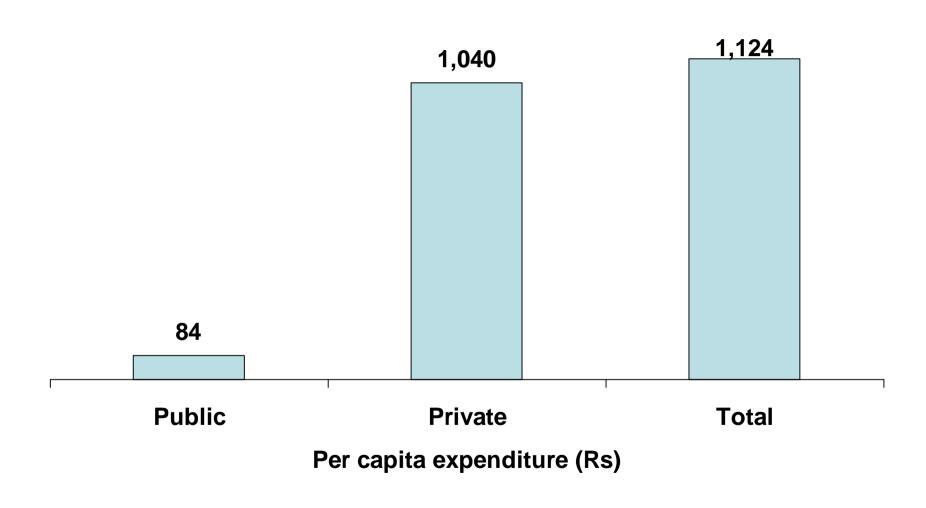
#### **Uttar Pradesh: Context**

- UP has the highest MMR in the country
- IMR is the third highest in the country
- Modern FP method is low
- Use of institutional facilities for deliveries is low
- Use of FP methods and institutional facilities for deliveries is the lowest among poor
- Government health units not fully functional
- Resources required for better functioning are huge

# Public and Private Expenditure on Health in Major States: 2001-02



# Per Capita Public and Private Health Expenditure in Uttar Pradesh: 2001-02



Source: National health accounts-India,2006

#### **Background**

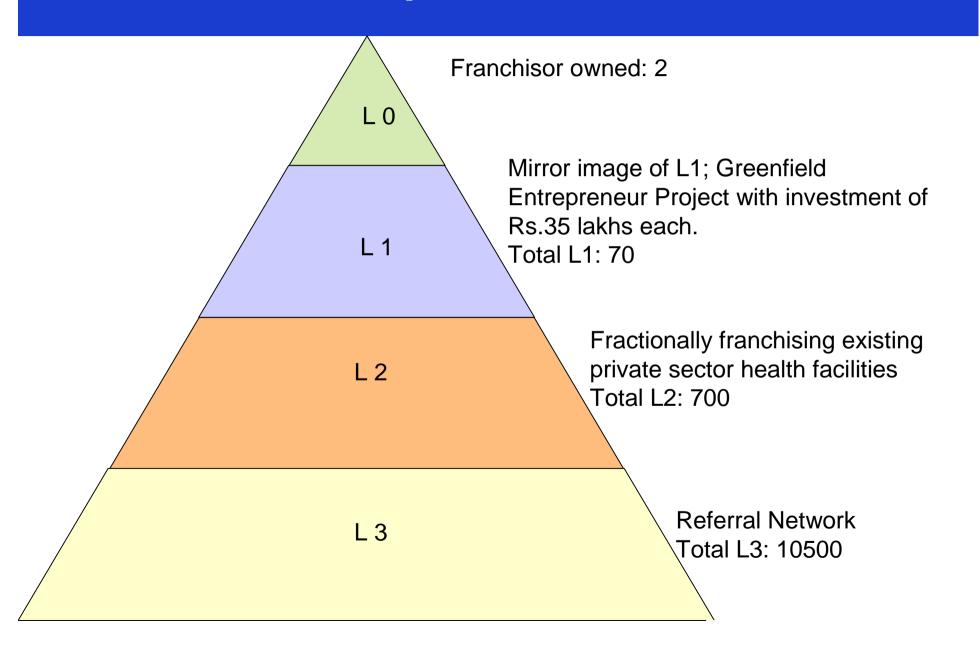
- ITAP-PSP IQC funded by USAID mandated to promote public private partnership (PPP) in health
- Conducted advocacy workshops on PPPs based on which social franchising selected as a model
- International workshop conducted to share experiences of social franchising in India and other countries
- UP specific model designed in strategy development workshop
- Franchisors selected through competitive bidding process
- Business model developed by KPMG along with cost benefit analysis

## **Network Design**

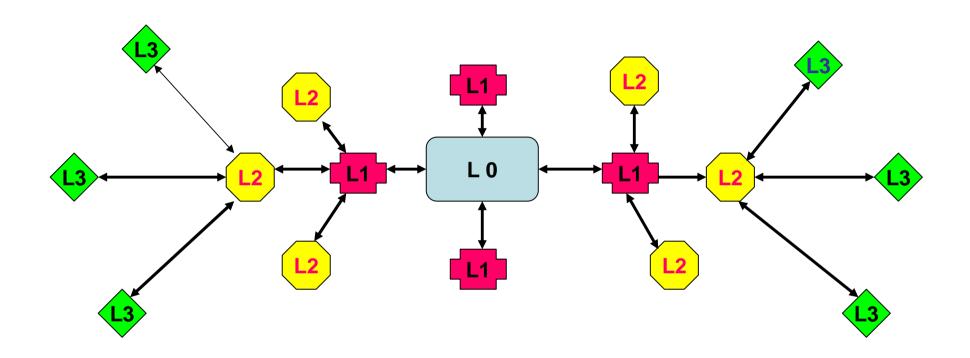
#### **Fundamentals of Model**

- Business approach for SUSTAINABILITY
- Each stakeholder must benefit.
- Three tiered approach with a mix of full and fractional franchising
- Networks are not sustainable with only family planning services the basket needs to be broadened
- Pricing based on 'most frequent value'
- Branding beyond just the logos the experience has to be branded and standardized
- Look for business model innovation to achieve high volume and low cost operations
- Franchisor role
  - Capacity building and training
  - Development of vendors and procurement at competitive prices
  - Regulating quality assurance systems
  - Marketing of the network

#### **Proposed Model**



### **Hub and Spoke Network**



**L0: Franchiser hospitals** 

L1: Fully franchised units

**L2: Fractionally franchised units** 

L3: Referral network

#### **Branding**

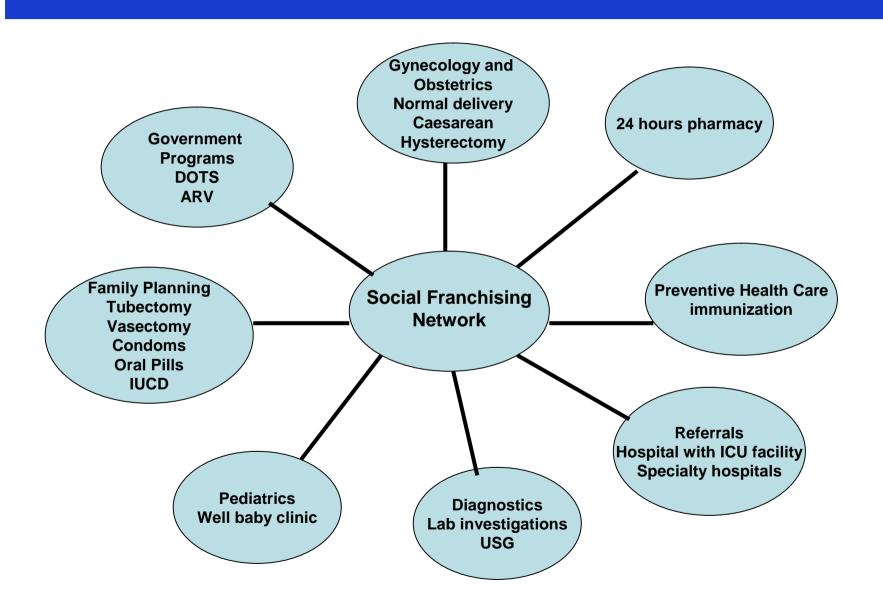
- Core product benefit : affordable, quality RCH services
- Core consumer benefit : better health and well being without compromise
- Visual Identity: leverage positive symbolism of marigold flower



### **Network Branding**



#### **Services Provided by the Network**



#### Merrygold Partnerships

- Diagnostics Partner- Metropolis Health Services
- Pharmacy Partner- Guardian Pharmacy
- Centralised HMIS WIPRO
- Training School of Management Sciences and International Health Management Research, Jaipur
- Financing of Franchisee hospitals: State Bank of India and SIDBI
- Health Insurance: United India Insurance for "MerryGold Jaccha Baccha Bima Policy"















#### **Health Facilities in the Network**











## **Services and Pricing**

S.No	Service	Merry Gold Price (in INR)	Market Price Range (Non- Metro) – in INR
1	Normal delivery (2 days)	1499	3450-11050
2	Cesarean delivery (5 days)	4999	9500-22000
3	Sterilization	999	1000-3000
4	Hysterectomy	6999	3500-22000
5	Day Care	1000	Varied
6	ANC	50	100-300
7	PNC	50	100-300
8	Regular check up	50	Varied
9	IUD insertion	100	250-400

### **Current Network**

District	Merrygold	Merrysilver	Merrytarang
Agra	2	12	239
Kanpur	2	12	195
Varanasi	2	8	325
Gorakhpur	2	9	184
Barabanki	1	6	148
Lucknow	2	20	189
L. Kheri	1	4	100
Budaun	1	8	266
Mathura	1	5	125
Bareilly	1	5	118
Allahabad	1	6	70
Azamgarh	2	6	-
Mau	1	-	-
Total	19	96	1859

#### Results

- 19 new health units with each with 15 beds established
- Over \$2m US leveraged in financing of new health units
- 96 existing health units have been added to the network
- ANC care services provided to 57,859 pregnant women
- 13,161 institutional deliveries conducted
- 2,959 new IUD acceptors
- 1,188 limiting method acceptors
- All 19 hospitals accredited by the health department

#### **Issues and Challenges**

- Dispersed vs. concentrated approach
- Amount budgeted for BCC and marketing insufficient
- Creation of brand equity requires longer gestation period
- Willingness of franchisee to comply with contractual obligations
- Pressure on increasing prices to recover costs as quickly as possible
- Establishing referral linkages
- Expectations from government and development partners to show results in short time
- Linking Merrygold Health Network with government schemes
- Recruitment of franchisees for remote areas

#### Learning from Social Franchising

- Sufficient entrepreneurs interested in health in UP
- Banks willing to provide money on relatively easy terms
- Quality of health care services can be improved through supportive quality assurance mechanisms
- Generating client volumes possible with coordination between levels
- High satisfaction level among clients who have availed services through the Network





# Thank you!