Signify Research will be publishing its new report “EMR/EHR in Acute and Ambulatory Applications - World” in January 2019. This white paper provides readers with an example of the country-level analysis from the report. Similar analyses are provided for 20 other countries/regions in the main report alongside market size estimates and forecasts by EMR/EHR type (national, regional, network, individual hospital, ambulatory only, etc) and feature-set (admin/operational functions, clinical functions, HIE/data integration functions, wellness/PHM functions, etc.).

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EMR/EHR in the Nordics - White Paper

Introduction
This white paper takes the Nordic regional analysis from Signify Research’s upcoming market report “EMR/EHR in Acute and Ambulatory Applications - World - 2019”. It is one of 20 different countries and regions on which a deep-dive analysis is presented. Within this white paper and for the above mentioned report, each regional analysis presents:

- An overview of the current EHR market status
- Information on which organisations are responsible for EMR procurement.
- Legislation driving future market developments
- An overview of the leading EMR vendors in the region/country
- Details of recent contracts awarded

The above mentioned report also includes market estimates and forecasts for each regional market by EMR/EHR type (national, regional, network, individual hospital, ambulatory only, etc) and feature-set (admin/operational functions, clinical functions, HIE/data integration functions, wellness/PHM functions, RCM/financial modules, etc.).

Denmark

Current EHR Market Status
The use of EMRs is widespread and relatively mature in Denmark. The five regions now centrally purchase EMR solutions for use across all primary and secondary care settings, although implementation is still underway in most regions. Prior to 2013 there were approaching 30 different vendor EMR solutions used across Denmark. The move towards centralised purchasing in the five regions has reduced this significantly, although some independent systems are still being used by individual hospitals and primary care organisations.

There has also been significant effort over recent years to improve interoperability between the EMRs used throughout the healthcare system resulting in the National eHealth Authority and the Regionernes Sundheds-IT (RSI) being established. As well as there being widespread use of EMR solutions, the solutions used, particularly in primary care, tend to be advanced in terms of functionality, including offering some level of risk stratification functionality. As well as EMRs used regionally/locally by municipalities, individual healthcare professionals and hospitals, there are several national platforms in use in Denmark.

Organisations Procuring EMR Solutions - Denmark

<table>
<thead>
<tr>
<th>Organisation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>MoH/Medcom</td>
<td>The MoH and Medcom are key organisations in the development of the national E-Journalen and P-Journalen initiatives</td>
</tr>
<tr>
<td>Administrative Regions</td>
<td>The five regions are responsible for purchasing region-wide EMR solutions that are used in both acute and ambulatory settings. Contracts for the five regions have largely been given during the period 2016-2018. Implementation for several are underway. Southern Region won’t start implementing the regional systems until 2020.</td>
</tr>
<tr>
<td>Local Municipalities</td>
<td>The 98 local municipalities are responsible for commissioning EMR solutions used for social care</td>
</tr>
<tr>
<td>Individual hospitals and primary care facilities</td>
<td>Whilst the overall general direction of travel has been for the five regions to centrally purchase EMR solutions, some individual hospitals and primary care facilities still own and purchase their own EMR solutions</td>
</tr>
</tbody>
</table>

The E-Journalen is a centralised database collecting hospital information from all the five Danish regions. This is supplemented by the P-Journalen which centralises data from GPs and other private healthcare professionals. There is also the Faelles Medicinkor which stores centralised information on patients’ prescribed medication and vaccinations. These are hosted on the Sundhed.dk, a digital platform set up by the MoH in collaboration with the five regions and 98 local communes. The platform and the component elements can be accessed by professionals and patients via the NemID platform (a secure platform that acts as the gatekeeper).

Sundhed.dk was originally developed by the Maersk Data Consortium (consisting of LEC, ACURE, PLS/Ramboll and Bysted). Many elements of the wider EMR solution have been developed internally by Danish government, healthcare agencies and a dedicated development department that was set up (e.g. the ePrescription solution was provided by the Danish Public Health Institute). The fact that much of the system has been developed internally using existing IT, has enabled interoperability
EMR/EHR in the Nordics - White Paper

Future Developments

In January 2018, the MoH published its vision for how eHealth would develop in Denmark over the next four years in its “Digital Health Strategy 2018-2022” report. This set out five key areas where it expected IT to support developing health services in Denmark. The five focus areas were:

The patient as an active partner: This relates to a priority to expand the breadth of data patients can access electronically to include full medical records as opposed to their top-level health record (as is the case now). It is also intended that the patient will be able to view the full longitudinal record across all care settings and become a central partner in the development of their care plans. Tools will be developed to expand how patients can increasingly support themselves, e.g., decision support tool for cancer patients and a digital pregnancy tool for expectant mothers. Finally, patient reported outcomes will be captured to support value-based care outcomes measurements. These initiatives will be supported via a major upgrade to the sundhed.dk platform.

Knowledge on time: This relates to an assessment of the frameworks and regulations that are barriers to the adoption of coherent patient pathways and is being driven by the need to improve care coordination between agencies. In terms of technology, this will drive the use of solutions that allow for greater data integration and better communication between healthcare agencies – i.e., PHM and data aggregation tools. The plans state that new care management workflow tools will also need to be implemented at a primary care/GP level to support more efficient, high-quality and broader care coordination. The plan also states that for some of the knowledge on time objectives to be met, there will need to be a major upgrade to the central EMR platforms used across Denmark and that a decision on whether there would be budgetary approval for such investment needs to be made prior to the end of 2019. Signify Research has assumed that approval is given and that this will boost the overall EMR market from 2020 onwards.

Prevention: A core element of the prevention objective is the improved use of data and advanced analytics to manage populations and to use risk stratification tools to pre-empt disease, hospital readmission and rising risk. Several pilots have been put in place to evaluate technology, applications and the benefits of using these

<table>
<thead>
<tr>
<th>Type</th>
<th>Vendors</th>
<th>Overview</th>
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<tbody>
<tr>
<td>National EHR</td>
<td>Maersk Data Consortium (consisting of LEC, ACURE, PLS/Ramboll and Bysted), supplemented by internally (e.g. Medcom) developed tools</td>
<td>The E-Journalen is a centralised database collecting hospital information from all the five Danish regions. This is supplemented by the P-Journalen which centralises data from GPs and other private healthcare professionals. A key organisation driving the adoption of eHealth in Denmark is Medcom, a publicly funded entity owned by the MoH, the regions and local government. It supported the development of P-Journalen and E-Journalen.</td>
</tr>
<tr>
<td>Regional EMR</td>
<td>Epic</td>
<td>Systematic holds the contract for the Central Region, North Jutland Region and South Region. The North Region being its latest contract (Sept 2018) with implementation starting in 2020. The Southern Region contract was announced in May 2018. Epic became the provider for the Zealand region and Capital Region in 2016.</td>
</tr>
<tr>
<td>Individual Hospitals/Primcary Care/Social Care</td>
<td>CGI, DMDC, IBM (formerly ACURE), DXC Technology, Origo, Tieto, CompuGroup Medical, MyClinic AS, Aver &amp; Lauritzen ApS</td>
<td>A wide range of healthcare organisations use independently sourced EMR solutions from a long list of local and international vendors. This part of the market is expected to come under increased pressure as more purchasing is forecast to be centralised across the five regions. Social care will still remain the remit of the municipalities and open to more competition.</td>
</tr>
</tbody>
</table>
platforms before wider rollout. The prevention objective also demands that care management solutions that support care planning for COPD, diabetes and chronic lower back pain patients are rolled out at GPs from 2018. COPD is the first area where electronic care plans will be implemented with patients and professionals able to access the care plans via the sundhed.dk platform.

**Trustworthy and secure data:** This initiative focuses on placing the patient in control of which information is shared across the healthcare sector.

**Progress and common building blocks:** The focus is to ensure that IT is built on open, supplier-independent components linked by common standards.

**Recent Contracts/ Vendor Activity**
- Epic became the provider for the Zealand region and Capital Region in 2016
- Systematic holds the contract for the central/mid-Jutland Region, Northern Region and South Region. The Northern Region being its latest contract (Sept 2018). The South Region contract was allocated in May 2018.

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**Finland**

**Current EHR Market Status**

EMR solutions are used in all provider settings although the decentralised nature of the country’s healthcare system has resulted in a wide range of EMR solutions being used by different providers with some limitations on interoperability. Most of the local EMR market is served by CGI Group (via its 2012 acquisition of Logica), Tieto and several smaller local vendors. CGI Group supplies the EMR to all five of the Finnish university medical hospitals which tend to be the most advanced in terms of technology implementation. Historically, international vendors/US EMR vendors have not had a significant share of the Finnish EMR market.

As well as the individual EMR solutions used by the local hospitals and primary care providers, Finland also has a national EMR system. In 2002 the government took the decision that by the end of 2007 there should be a nationwide, interoperable EMR in place.

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<table>
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<tr>
<th>Organisations Procuring EMR Solutions - Finland</th>
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</thead>
<tbody>
<tr>
<td><strong>Local Municipalities</strong></td>
</tr>
<tr>
<td><strong>District Hospitals</strong></td>
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<tr>
<td><strong>University Hospitals</strong></td>
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<tr>
<td><strong>Sote Areas</strong></td>
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<tr>
<td><strong>Kela</strong></td>
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</tbody>
</table>

This is the Kanta system. The solution offers information exchange with the district hospital/other local EMR solutions, electronic referrals & discharge letters, ePrescription services, eArchive services, eAccess services (to professionals and the Finnish population) and access to patient summary data such as diagnoses, vaccinations, radiology results, risks, care plans, medication and consent management data. The solution integrates not only with public healthcare providers (acute, primary and social care), but also most private healthcare providers and pharmacies. The solution was designed to take a standards-based approach and complies with a variety of standards including HL7 V3 CDA R2. Fujitsu Services was the primary contractor for the Kanta system, with elements of the system development contracted out to other vendors such as EMC.
Future Developments

In 2015 the government published its social welfare and health care reform program. This included proposals to restructure how healthcare is provided in Finland creating larger autonomous areas (larger than the current municipalities) called “sote-areas”. The government intended that a maximum of 19 sote-areas would be created (with the current plan set at 18). The municipality-based system had encountered significant issues developing high-quality, efficient healthcare services and the intention was that transferring to larger administrative service would address these problems and also allow the development of an integrated care system.

Health and social care services are to be brought together in these new areas creating a more integrated care management structure. Sote-areas will have their responsibilities refocused towards the wider management of the entire population, instead of just the sick. The current plan is to have the sote-areas established by the start of 2020 (delayed from the original plan of 2019).

The delay to 2020 (announced in June 2018) is a result of some of the struggles that have taken place getting the reform act through the Finnish parliament, and an indication that the reform could potentially be delayed further. However, many of the delays focused on issues relating to the increased use of private care providers and introducing more competition to healthcare provision, rather than the move to an integrated care model. Despite the government delays, some regions have already been set up independently of government legislation.

Core to the restructure was developing ICT in general and the Kanta system to support the integrated care approach and to better support populations in self-managing care and preventative care. The development of sote-areas is expected to consolidate EMR purchasing.

Norway

Current EHR Market Status

The Directorate of Health executes the political decisions which are implemented via four regional health authorities responsible for specialist care and 428 municipalities responsible for primary care, GP care, public health, long-term care and rehabilitation. Hospitals are organised into 21 health enterprises (trusts) which act as service delivery units and are owned by the corresponding regional health authority. Although specialist care is run by these regional health authorities, primary care, including general practice, mental health care, nursing homes, rehabilitation, physiotherapy, and health promotion is still managed by the municipalities.

The four regional authorities have historically purchased their own EMR solutions, whilst aligning system functionality with national requirements. A local EMR supplier, DIPS, had been the primary healthcare IT supplier in many parts of Norway and is estimated that 70-80% of regional EMR implementations have been with DIPS.
The company has contracts with three of Norway’s four regional health authorities, including five of the six university hospitals. The Northern authority and the Southern & Eastern authority signed contracts with DIPS for a new EMR solutions in 2012 with the Western regional authority also using the solution. All hospitals in these regions have an agreement to use the company’s core products, DIPS Electronic Patient Journal (EPJ) and Patient Administration System (PAS).

Cerner (via its acquisition of Siemens’ EMR business) has the forth contract in the Central regional health authority with its Doculive solution, although it pulled out of the renewal contract for the new “one patient – one record” EMR upgrade in April/May 2018 as it felt it could not justify a business case that would fully address the specific development requirements of the new platform.

The Central region had been identified as a testbed for the upcoming “one patient – one record” initiative. Just one vendor is left competing in this bid for the contract in this region. Originally three had been shortlisted - Cerner, Epic and DXC. However, only Epic now remains. The contract is due to be awarded at the beginning of 2019.

Although contracts for EMR procurement have already been allocated, there are still specific related product purchases that fall outside of these central contracts where opportunities still exist for other vendors. For example, the care coordination/messaging service IHR, supplied by Evry, has been procured for use in Helse Sør-Øst and Helse Midt-Norge, despite these regions using DIPS for EMR.

As well as local EMR implementations, a national patient record, named Kjernejournal, was also commissioned by the Norwegian Directorate of Health in 2012. This record effectively integrates data from local/regional EMRs to give a longitudinal view of the patient. Accenture was awarded with the contract and the solution has now been fully rolled out across Norway.

**Future Developments**

In 2012 a health reform (the Coordination Reform) was launched, aiming at better coordination of the health care services, both between primary and secondary care, and within each level of care. This reform will be a key driver of EHR upgrades over the forecast period, particularly in relation to data integration. DIPS was recently a beneficiary of this trend winning a NOK28M/USD3.4M contract with Helse Sør-Øst/Health South East for data integration tools to support connectivity between several legacy EMR solutions.

A key element of the reform is driving services to be directed more towards preventive care, and measures are taken to reduce the burden of changing demographics (increasingly older population, migration, overweight etc).

Focus areas of the reform included:

- Improve coordination and information exchange among care providers
- Reduce the need to expensive specialised care
- Increase the share of health services provided by primary care

Developments in the use of IT within the Norwegian healthcare service are key in achieving these objectives. In particular, an emphasis was put on empowering patients using technology, developing a “one patient – one record” IT solution, reviewing health registry regulation.

**Recent Contracts/ Vendor Activity**

- DIPS recently won a NOK28M/USD3.4M contract with Helse Sør-Øst/Health South East for data integration tools to support connectivity between several legacy EMR solutions.
- Cerner pulled out of the renewal contract for the new Central Region “one patient – one record” EMR upgrade in early 2018 as it felt it could not justify a business case that would fully address the specific
development requirements of the new platform. The Central region had been identified as a testbed for the one patient – one record initiative.

Epic was also originally bidding for the Central Region contract but also withdrew in January 2018 leaving just one vendor bidding for the project, assumed to be DIPS. The contract is due to be awarded at the beginning of 2019.

The South-Eastern Norway Regional Health Authority (Helse Sør-Øst) and EVRY have signed a new agreement for an electronic patient record solution in May 2018 to provide integrated healthcare records across all providers, hospitals, and patients in all county council regions. In addition to Tieto/InterSystems, there are four other major EMR vendors that have a significant market share in Sweden: Cerner (via its acquisition of Siemens’ EMR business), Evry, Cambio and CompuGroup Medical. Norrbotten County Council has also developed its own solution that is believed to have been used commercially by other councils.

### Sweden

#### Current EHR Market Status

By 2012 all county councils in Sweden had fully implemented EMR solutions in hospitals, psychiatry and primary care. To increase cooperation and allow care providers to access patients’ records stored at another provider, the National Patient Summary (NPÖ) was initiated in 2009. The key driver for the NPÖ was to enable health care staff to directly access a patient’s medical records from other healthcare providers, if certain legal requirements are fulfilled. All 21 county councils’ healthcare providers in Sweden have now implemented NPÖ.

The first regional contract awarded was to Finnish EMR vendor Tieto which contracted out the provision of HIE to InterSystems which supplied its HealthShare HIE/PHM product. The main goal of the NPÖ project was to enable health care staff to directly access a patient’s medical records from other healthcare providers, if certain legal requirements are fulfilled. All 21 county councils’ healthcare providers in Sweden have now implemented NPÖ.

A major focus of EMR deployment in Sweden has been the drive to ensure that there is coordination in relation to the ICT projects undertaken by the different county councils. As part of this drive the Centre for eHealth in Sweden (CeHis) was established as a specialist eHealth ICT purchasing organisation that coordinates health IT purchasing across Sweden.

### Organisations Procuring EMR Solutions - Sweden

<table>
<thead>
<tr>
<th>Type</th>
<th>Vendors</th>
<th>Overview</th>
</tr>
</thead>
<tbody>
<tr>
<td>National EHR</td>
<td>Accenture &amp; partners</td>
<td>In 2012, Accenture was selected to roll out Norway’s Kjernejournal (Summary Care Record).</td>
</tr>
<tr>
<td>Regional EMR</td>
<td>DIPS, Cerner, Tieto, Cambio, DXC, CGI, EVRY</td>
<td>DIPS holds the historic contracts with Helse Nord, Helse Vest and Helse Sør-Ost. Helse Midt-Norge is currently serviced via Cerner. Although it is not competing for the renewal contract that is expected to be awarded at the start of 2019.</td>
</tr>
<tr>
<td>Primary Care/ Long-term EMR</td>
<td>ACOS(CosDoc), CGM, DXC, Hove Medical, Infodoc, Extensor, Tieto, Visma</td>
<td>There are some moves toward purchasing coordination/consolidation amongst the 428 municipalities of Norway. However, the large number and small scale has led to a fragmented supplier base of vendors serving the primary care market. Tieto is estimated to be the leader in social care.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Municipalities</th>
<th>There are 290 municipalities in Sweden. These are each typically responsible for purchasing IT for primary care. On some occasions there is collaboration between individual municipalities and between municipalities and county councils.</th>
</tr>
</thead>
<tbody>
<tr>
<td>County Councils</td>
<td>There are 21 county councils across Sweden. Whilst primary healthcare IT procurement is normally driven by the municipalities, there are often occasions were municipalities within a County Council area coordinate EMR procurement across primary and acute care. For example, in 2018 Cerner was selected as the EMR supplier for the Region Skåne, where it will provide its Cerner Millennium solution to 10 hospitals and 190 primary care locations, straddling several municipalities.</td>
</tr>
</tbody>
</table>
Future Developments

“National eHealth - the strategy for accessible and secure information in health and social care” is one of the key policies driving the use of technology in Sweden. In its original iteration “The National eHealth Strategy”, it was the driver for the NPÖ. More recently it is impacting how technology is being used for integrated care in Sweden. A key element of the strategy is how technology can be used to support coordinated care. In particular, it is driving the use of healthcare data analytics tools and smart decision support tools, such as the care management and care coordination tools. Specific to integrated care, there are several national initiatives that have been implemented that will impact how the EMR market develops in Sweden. These include projects such as:

**Patient safety:** coordinated approaches to reduce preventable adverse events associated with health and social care provision (e.g. hospital infection rates).

**Integrated care for children and youth:** coordinated approaches across maternity care, social care, dental care, police, pharmaceuticals, school health care, sexual health etc. with a focus on prevention and collaboration.

**Care of sick elderly:** development of systemic preventative care, coordinated alert systems, outcome analytics and results analysis.

**National quality registries:** development of approximately 100 national quality registries (with scorecard and visualisation tools for analysis outcomes), with a focus on understanding quality outcomes for care management processes for different patient cohorts.

**Primary care:** Using stratification tools to segment populations based on behaviours and preferences and understanding how primary care processes can be developed to improve outcomes, reduce waiting times and improve patient satisfaction.

**IT:** Evaluate how IT, such as patient engagement, ePrescription, online booking, patient communication and telehealth tools can support integrated care.

Recent Contracts/ Vendor Activity

- In October 2017 Cerner was selected as the EMR supplier for the Region Skåne, where it will provide its Cerner Millennium solution to 10 hospitals and 190 primary care locations, straddling several municipalities. The deal also includes Cerner’s HealtheIntent PHM platform. The platform will start to go live in the middle of 2019.
- Cerner added to this with a second Swedish regional contract in Västra Götalandsregionen in November 2018. Again this was a region-wide contract for 17 hospitals and 200 primary care centres.

Conclusion

The Nordics is an advanced market in terms of EMR deployment and is well-served by several local entrenched vendors such as Cambio, Tieto, DIPS, Systematic and Evry. Over recent years international vendors have targeted the region in order to expand their geographic footprint. However, this has not always proven an easy route, illustrated by Cerner and Epic’s withdrawl from the upcoming Helse Midt-Norge contract in Norway and implementation challenges experience by Epic in Denmark. Market entry should be not be taken without due consideration for local system demands.

As a region there is a big push to integrate primary, acute and, in some cases, long-term/social care provision and to centralise EHR procurement over large regions. Vendors that can offer enterprise-scale EMR solutions with a breadth of operational and clinical EMR tools, alongside PHM/integrated care technologies (e.g. data integration tools, risk stratification tools and care coordination modules) are forecast to have the greatest level of success as the drive towards integrated care changes the expectations that providers will have of their EMR vendors.

| EMR Installations by Type and Vendor - Sweden |
|---|---|---|
| **Type** | **Vendors** | **Overview** |
| National EHR | Tieto, InterSystems, Evry | The national patient summary record, NPO, provides integrated healthcare records across all providers, hospitals, and patients in all County Council regions. |
| Local Network EMR | Tieto, Cerner, Evry, Cambio, CompuGroup Medical, Cerner | There are 21 county councils in Sweden. Cerner (via its acquisition of Siemens’ EMR business), Evry, Cambio and CompuGroup Medical are the main vendors. Norrbotten County Council has also developed its own solution that is believed to have been used commercially by other councils. |

This white paper takes an extract from Signify Research's upcoming market report on the global EMR/EHR market. As well as descriptions of the market dynamics, similar to those presented in this white paper, the report will also include:

- Market forecasts in terms of revenues for the period 2017 to 2023 by country/region, product type and EHR/EMR type
- In-depth country profiles examining which organisations are purchasing EMR solutions in each country and what type of EMR solutions
- 45 vendor profiles of the leading global and regional EMR vendors
- A product matrix detailing the EHR products of more than 150 vendors with details on geographic market served, products offered and vertical markets served

Report Content

The below diagram sets out the report scope and the data splits for the market estimates and forecasts. It also:

Market metrics are presented for the period 2017 to 2023.

<table>
<thead>
<tr>
<th>The market in each country is broken out by product:</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Admin/Operational Systems</td>
</tr>
<tr>
<td>- Clinical Systems</td>
</tr>
<tr>
<td>- Wellness/PHM Modules</td>
</tr>
<tr>
<td>- Interoperability/Data Exchange</td>
</tr>
</tbody>
</table>

At a regional level each product is also segmented by:

<table>
<thead>
<tr>
<th>Acute/Inpatient Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Hospital: 500+ Beds</td>
</tr>
<tr>
<td>- Hospital: 100-500 Beds</td>
</tr>
<tr>
<td>- Hospital: &lt;100 Bed</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Ambulatory Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>- +26 Physician Group Practices</td>
</tr>
<tr>
<td>- 11-25 Physician Group Practices</td>
</tr>
<tr>
<td>- 5-10 Physician Group Practices</td>
</tr>
<tr>
<td>- 1-5 Physician Group Practices</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Long-term Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>At a regional level each Products are further segmented by Architecture</td>
</tr>
<tr>
<td>- On-premise/Private Cloud/Hybrid</td>
</tr>
<tr>
<td>- Public Cloud</td>
</tr>
</tbody>
</table>

Below are the definitions of which sub-products will be included in each of the product segments:

**Admin/Operational**
- Health Information
- Access Manager
- Managed Tech Deployment
- Performance Management/Reporting
- Patient Scheduling
ePrescribing
- Appointment Reminders
- Bed Management
- Referral Management

**Clinical Systems**
- Emergency Care
- Chronic Care
- Surgical Care
- Intensive Care
- Mobile Care
- Oncology
- Pharma IS
- Rehab
- Diagnostic Imaging/ RIS
- Anaesthesia
- Lab IS
- Women's Health
- Behavioural Health

**Interoperability/ Data Exchange**
- HIE
- Interoperability
- Data aggregation
- Longitudinal Record

**Wellness/PHM Modules**
- Patient Portal
- Telehealth
- Remote Monitoring
- Care Management
- Care Coordination
- Risk Stratification
- Analytics
- Registries

**Financial Modules**
- RCM
- Billing & Claims Management
- Medicare Eligibility
EMR/EHR in the Nordics - White Paper

About Signify Research

At Signify Research we are passionately curious about Healthcare Technology and we strive to deliver the most robust market data and insights, to help our customers make the right strategic decisions. We blend primary data collected from in-depth interviews with technology vendors and healthcare professionals, to provide a balanced and complete view of the market trends.

Whether our research is delivered as an off-the-shelf report or as a consultancy project, our customers benefit from direct access to our Analyst team for an expert opinion when they need it. We encourage our clients to think of us as an extension to their in-house market intelligence team.

Our major coverage areas are Healthcare IT, Medical Imaging and Digital Health. In each of our coverage areas, we offer a full suite of products including Market Reports, Market Intelligence Services, as well as Custom Research and Consultancy services. Our clients include technology vendors, healthcare providers and payers, management consultants and investors.

“We recently purchased one of Signify Research's reports. We felt we can trust the insights they provided to make informed strategic decisions.” – Vera Borislavova, Global Customer & Market Insight Business Partner, GE Healthcare

“Signify Research's greatest strengths are its subject matter expertise and deep understanding of the industry.” – Ken Sutherland, President, Toshiba Medical Visualization Systems Europe

Related Research & Products

Market Reports and Intelligence Services
Related reports to this Show Report include:

- EMR/EHR in Acute and Ambulatory Applications - 2019
- Population Health Management - Intelligence Service - 2019
- Telehealth (Acute, Community and Home) - World - 2019
- Population Health Management - North America - 2018
- PHM and Integrated Care Technology - EMEA, Asia and LatAm - 2018
- Imaging IT & Archiving Management IT - World - 2018
- Advanced Visualisation and Viewing IT - World - 2018
- Digital Pathology - World Market - 2018

Custom Research
We offer a custom research service for clients who need information that can’t be obtained from our off-the-shelf research products or who require market data tailored to their specific needs. Our clients can leverage our wealth of existing market data and the knowledge of our highly experienced analyst team.

Consulting
For clients who require a more strategic, advisory engagement we offer a suite of consultancy services. Our consultancy work is research-based and draws on our existing market data and knowledge of the healthcare technology sector, to deliver targeted, meaningful and actionable strategic support to our clients.