



Clínicas del Azúcar

# Affordable Diabetes Clinic Network

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<b>Organization</b>	Clínicas del Azúcar
<b>Website</b>	<a href="https://www.clinicasdelazucar.com/">https://www.clinicasdelazucar.com/</a>
<b>Locations</b>	Mexico
<b>Year Founded</b>	2010
<b>Health Focus Areas</b>	Diabetes, Hypertension
<b>Organization Type</b>	For profit
<b>Innovation</b>	Affordable Diabetes Clinic Network



## INTRODUCTION

Clínicas del Azúcar is a for-profit social enterprise founded in 2010 that operates a chain of **affordable diabetes management clinics in Mexico**. These clinics provide **preventive, diagnostic, and supportive patient-centered treatment services to underserved populations**, integrating screening devices and health technology innovations to streamline care delivery and reduce cost of care while still maintaining quality. Patients work with a **multidisciplinary team of doctors, nurses, nutritionists, and psychologists** to develop a comprehensive treatment plan that includes lifestyle changes in addition to a medication plan. Clínicas del Azúcar offers these services through memberships, packages that bundle different levels of service for an annual fee, with several programs to ensure accessibility for low-income populations. Each clinic is located in a convenient, high-traffic area—often near larger retailers—to afford it greater visibility and the opportunity to reach large numbers of patients. By prioritizing convenience and affordability, Clínicas del Azúcar serves as an accessible alternative to expensive private facilities and overburdened public facilities for patients seeking diabetes care.



## PROBLEM

In Mexico, diabetes presents a significant public health challenge, affecting 10.4% of the population in 2016.<sup>1</sup> Type 2 diabetes—a chronic condition in which the body cannot process sugar properly, resulting in high blood sugar levels that can lead to further health problems, such as heart disease<sup>2</sup>—is the leading cause of death and disability combined in Mexico.<sup>3</sup> The Mexican Ministry of Health declared the diabetes epidemic a national health emergency in 2016 and has implemented prevention measures such as public awareness campaigns and a soda tax.<sup>4</sup> However, forecasts predict that diabetes prevalence in the country will continue to rise,<sup>5</sup> driven in part by increasing rates of obesity, which is highly linked to type 2 diabetes.<sup>6</sup> **Additionally, millions of people may have undiagnosed diabetes or be prediabetic.**<sup>7</sup>

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With this rise in prevalence, Mexico's public healthcare system is increasingly burdened by patients seeking treatment, which **requires ongoing management, continuous follow-up, and risk mitigation through sustained lifestyle changes.**<sup>8</sup> Furthermore, patients often face several barriers to seeking treatment in the first place. Increased patient volume at public health facilities leads to greater wait and travel times, exacerbating challenges to accessing care faced by low-income and rural populations.<sup>9</sup> Diabetes prevention, diagnosis, and treatment services in private healthcare facilities are often expensive and thus inaccessible for low- and middle-income populations;<sup>10</sup> as a result, many patients go undiagnosed and untreated.<sup>11</sup>



## SOLUTION

Clínicas del Azúcar offers affordable, high-quality, and convenient diabetes management through its network of branded clinics, which provide a more accessible alternative to public facilities and a more affordable alternative to other private providers.<sup>12</sup> These clinics are located in convenient and frequently visited places in communities, often in retail areas anchored to larger retailers, such as supermarkets. They offer **diagnostic and treatment services built around evidence-based algorithms using a high-volume, low-cost model based on maximizing the number of patients served**; in this way, services can be offered at a lower cost to the consumer while still generating enough profit for the organization to meet its targets. Through its “one-stop shop” model, Clínicas del Azúcar brings different specialized providers—such as doctors, nurses, nutritionists, and psychologists—together in one facility so that patients can access multiple specialties in one visit and receive comprehensive treatment and lifestyle change plans that are collaboratively developed by the provider team. Teams implement task shifting to improve efficiency and reduce the time required for each visit: patients are able to complete comprehensive treatment services in 90 minutes.<sup>13</sup> This model allows Clínicas del Azúcar to operate as a sustainable, for-profit social enterprise.



The founders of Clínicas del Azúcar chose a retail-inspired strategy to increase its growth potential and to minimize dependence on donor funding. They used market research of target consumers to set price points and developed a pricing model based on bundling services for a flat annual fee. Clínicas del Azúcar offers several packages, called memberships, that cover varying levels of service. The annual cost of these memberships ranges from about 150 to 300 USD (about 16,000 to 32,000 KES). Patients can purchase memberships up front or pay in monthly installments, and Clínicas del Azúcar offers discount programs to ensure that its services are accessible to patients with low incomes or those facing financial difficulties. These efforts have enabled Clínicas del Azúcar to reduce the cost of its healthcare services to a level more than 60% lower than out-of-pocket costs at other private providers.<sup>14</sup>



## IMPLEMENTATION AND INTEGRATION INTO THE PUBLIC HEALTHCARE SYSTEM

Although Clínicas del Azúcar’s model is not integrated into local health systems, the organization often works with local health facilities to fully meet patient needs. For example, a patient who visits a public clinic and shows signs of diabetes may then visit Clínicas del Azúcar to be evaluated by a specialist with greater expertise on diabetes, either after being referred by a public provider or based on the patient’s own desire for further care. After performing the necessary tests or imaging and providing a diagnosis, Clínicas del Azúcar shares documentation—including imaging, diagnosis, and prescription information—with the patient so that they are able to return to the public health system and obtain treatment and medication through Mexico’s public health coverage, the Mexican Institute of Social Security (IMSS). Additionally, since the membership packages offered by Clínicas del Azúcar do not include the cost of medications, some of its members regularly obtain medications through IMSS while continuing to visit Clínicas del Azúcar for follow-up care and access to the behavioral and lifestyle aspects of their treatment plans. As Clínicas del Azúcar continues to scale, its team hopes to eventually partner with local and national governments to collaborate on common goals of expanding healthcare access and reducing the burden of diabetes in Mexico.





## SCALABILITY

Clínicas del Azúcar's chain-based model is scalable through **further expansion of the network by opening new clinics**. Furthermore, the **chain-based, retail-inspired model could be expanded to encompass comprehensive primary care services**: Clínicas del Azúcar has added hypertension treatment to its service offerings while maintaining its model and cost structures, highlighting the adaptability of the model to treat various health conditions. Standardization of operational and clinical procedures across the network of clinics streamlines the process of opening new clinics and thus facilitates greater ease of scaling to serve new geographies and populations. For example, evidence-based protocols for care are consistent throughout the network of clinics, and the clinics use electronic medical records to ensure continuity of care across different clinic locations. Additionally, Clínicas del Azúcar has developed integrated care, staffing, pricing, and patient engagement models that are standardized across all clinics.

Clínicas del Azúcar has expanded to 25 clinics across eleven states in Mexico, successfully replicating its model of leveraging high-traffic locations, offering services through membership packages, and providing integrated behavioral and medication-based services and treatment through multidisciplinary teams according to standardized processes. Clínicas del Azúcar continues to open new clinics and has formed a team to identify additional sites for expansion.



## SUSTAINABILITY

Clínicas del Azúcar's for-profit model is designed for **financial sustainability: membership packages provide a steady stream of revenue, and high-volume, low-cost service provision enables revenue generation while keeping costs affordable for patients**. As Clínicas del Azúcar scales, its team continues to standardize workflows and processes, adopt new technologies to improve patient care and outcomes, recruit quality talent, and build brand recognition and reputation. Developing the business in this way streamlines the continued process of opening new clinics, as the organization is increasingly prepared to open, staff, and operate new clinics according to tested and improved methods and to generate patient demand through its recognizable brand and good reputation. Clínicas del Azúcar's internal systems of standardization that facilitate rapid scaling to new locations contribute to its capacity for sustainability as it continues to expand across Mexico.



## CHALLENGES

Developing pricing plans that create steady revenue for Clínicas del Azúcar without excluding low-income patients continues to present challenges for the team. To balance these two priorities, the team developed **flexible alternative payment options**, such as monthly payments, for patients who are unable to afford the regular membership plan structure. Clínicas del Azúcar has committed to providing care even if patients have overdue accounts, so that patients with lower incomes or who are facing other financial hardships are still able to access necessary care, regardless of their current financial situations.<sup>15</sup>



## IMPACT

As of February 2021, Clínicas del Azúcar is the **largest private provider of specialized diabetes care**. Clínicas del Azúcar has treated more than 150,000 patients. More than 65% of patients have met their blood sugar level goals, in contrast with 19% of patients receiving care through the public system.<sup>16,17</sup>



1. World Health Organization, "Mexico" (diabetes country profile), 2016, [https://www.who.int/diabetes/country-profiles/mex\\_en.pdf](https://www.who.int/diabetes/country-profiles/mex_en.pdf). {{COMMENT: Please note that, per Chicago style, the numbers at the start of each footnote should be formatted to be in line rather than superscript (in this example, 1. World Health Organization...)}}
2. Centers for Disease Control and Prevention, "Type 2 Diabetes," May 30, 2019, <https://www.cdc.gov/diabetes/basics/type2.html>.
3. World Health Organization, "Quality of Care Is Key to Tackling Mexico's Diabetes Emergency," accessed December 15, 2020, <https://doi.org/10.2471/BLT.17.020617>.
4. Ibid.
5. NPR, "How Diabetes Got to Be the No. 1 Killer in Mexico," accessed December 17, 2020, <https://www.npr.org/sections/goatsandsoda/2017/04/05/522038318/how-diabetes-got-to-be-the-no-1-killer-in-mexico>.
6. Mathieu Levaillant, Gaëlle Lièvre, and Gabriella Baert, "Ending Diabetes in Mexico," *The Lancet* 394, no. 10197 (August 10, 2019): 467-68, [https://doi.org/10.1016/S0140-6736\(19\)31662-9](https://doi.org/10.1016/S0140-6736(19)31662-9).
7. International Finance Corporation, "Innovative Health Care in Mexico Treats a Diabetes Epidemic," accessed December 17, 2020, [https://www.ifc.org/wps/wcm/connect/NEWS\\_EXT\\_CONTENT/IFC\\_External\\_Corporate\\_Site/News+and+Events/News/Impact-Stories/Innovative+Health+Care+in+Mexico+Treats+a+Diabetes+Epidemic](https://www.ifc.org/wps/wcm/connect/NEWS_EXT_CONTENT/IFC_External_Corporate_Site/News+and+Events/News/Impact-Stories/Innovative+Health+Care+in+Mexico+Treats+a+Diabetes+Epidemic).
8. NPR, "How Diabetes Got to Be the No. 1 Killer in Mexico."
9. Ann M. Casanova, "Case Study: A Retail Approach to Diabetes Care" (International Finance Corporation, June 2019), [https://www.ifc.org/wps/wcm/connect/industry\\_ext\\_content/ifc\\_external\\_corporate\\_site/health/publications/a-retail-approach-to-diabetes-care](https://www.ifc.org/wps/wcm/connect/industry_ext_content/ifc_external_corporate_site/health/publications/a-retail-approach-to-diabetes-care).
10. World Health Organization, "Quality of Care Is Key to Tackling Mexico's Diabetes Emergency."
11. Casanova, "Case Study: A Retail Approach to Diabetes Care."
12. Kara Baskin, "Chain of Mexican Clinics Aims to Make Diabetes Care Easy," accessed December 15, 2020, <https://alum.mit.edu/slice/chain-mexican-clinics-aims-make-diabetes-care-easy>; Clínicas del Azúcar, "Clínicas del Azúcar" (home), accessed January 22, 2021, <https://www.clinicasdelazucar.com/>.
13. Swiss Re Foundation, "Clínicas del Azúcar: Tackling Mexico's Biggest Health Threats," accessed September 3, 2021, <https://www.swissre.com/foundation/e4ra-21-clinicas-del-azucar.html>.
14. Clínicas del Azúcar, "Clínicas del Azúcar" (home).
15. "Empowering Clínicas del Azúcar to Attract Investment and Create Impact at Scale" (Roots of Impact, March 2017), <https://roots-of-impact.org/wp-content/uploads/2017/06/SIINC-Case-Studies-CdA-FINAL.pdf>.
16. Casanova, "Case Study: A Retail Approach to Diabetes Care."
17. Clínicas del Azúcar, "Clínicas del Azúcar" (home).



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