SIEMENS Healthineers

White paper

Supporting strength and resilience for public healthcare today and tomorrow

A new blueprint for future-ready hospitals in Central and Eastern Europe

siemens-healthineers.com/value-partnerships

Value Partnerships

Edition #18

Executive summary

Hospitals today face a combination of complex and compounding pressures such as keeping pace with rising care demands, rapid technological change, workforce shortages, and increasing financial pressure. As these challenges intensify and take on a systemic, long-term nature, well-established procurement models are coming under strain and may, in some cases, no longer suffice.

This white paper positions Value Partnerships as an innovative and distinctive model for collaboration that builds on established practices, aligns with EU public sector frameworks, and enables improved outcomes and patient impact. It further demonstrates how such partnerships can be realized through existing procurement approaches.

Focusing on Central and Eastern Europe, this paper examines the specific investment conditions faced by public healthcare providers in the region, including fragmented funding cycles, significant regulatory requirements, and the need to reconcile short-term budget discipline with long-term improvement goals. Drawing on selected projects as examples, it illustrates how Value Partnerships can support structured, compliant modernization planning that has proven successful over time.

Accordingly, Value Partnerships are not intended to replace existing procurement models; rather, they offer a strategic option for healthcare decision-makers to enhance resilience, enable transformation, and secure sustainable value from public investments.

Contents

The market landscape and structural challenges in Central and Eastern Europe

Despite their increased presence in many European markets, long-term, strategic engagements with MedTech companies remain unfamiliar across certain Central and Eastern European healthcare systems – and that unfamiliarity creates friction long before a contract is ever signed. Procurement teams are used to buying equipment piece-by-piece or issuing straightforward service tenders judged mainly on the price.

Across several countries in the region, healthcare investment patterns reveal a consistent reality. Funding cycles tend to be short and fragmented rather than anchored in long-term strategies. Institutions demonstrate high sensitivity to upfront capital expenditure, frequently favoring discrete equipment tenders over comprehensive transformation programs.

Pursuing partnerships

In environments like these, long-term engagements that combine equipment, service, and consulting can help providers design decade long improvement programs that bundle technology, digital solutions, services, training, and workflow improvements while also optimizing the use of grant funding. Pursuing these strategic engagements does not in any way compromise or interfere with existing procurement models.

Still, translating such a comprehensive agreement into a formal tender can appear overwhelming. Officials often ask, "What exactly do we specify? How do we compare such broad proposals? How do we make sure everything is legally sound?" There are few local precedents to offer guidance, even though the model is fully permissible within EU procurement frameworks. Without clear templates or success stories, many officials hesitate to be "first movers."

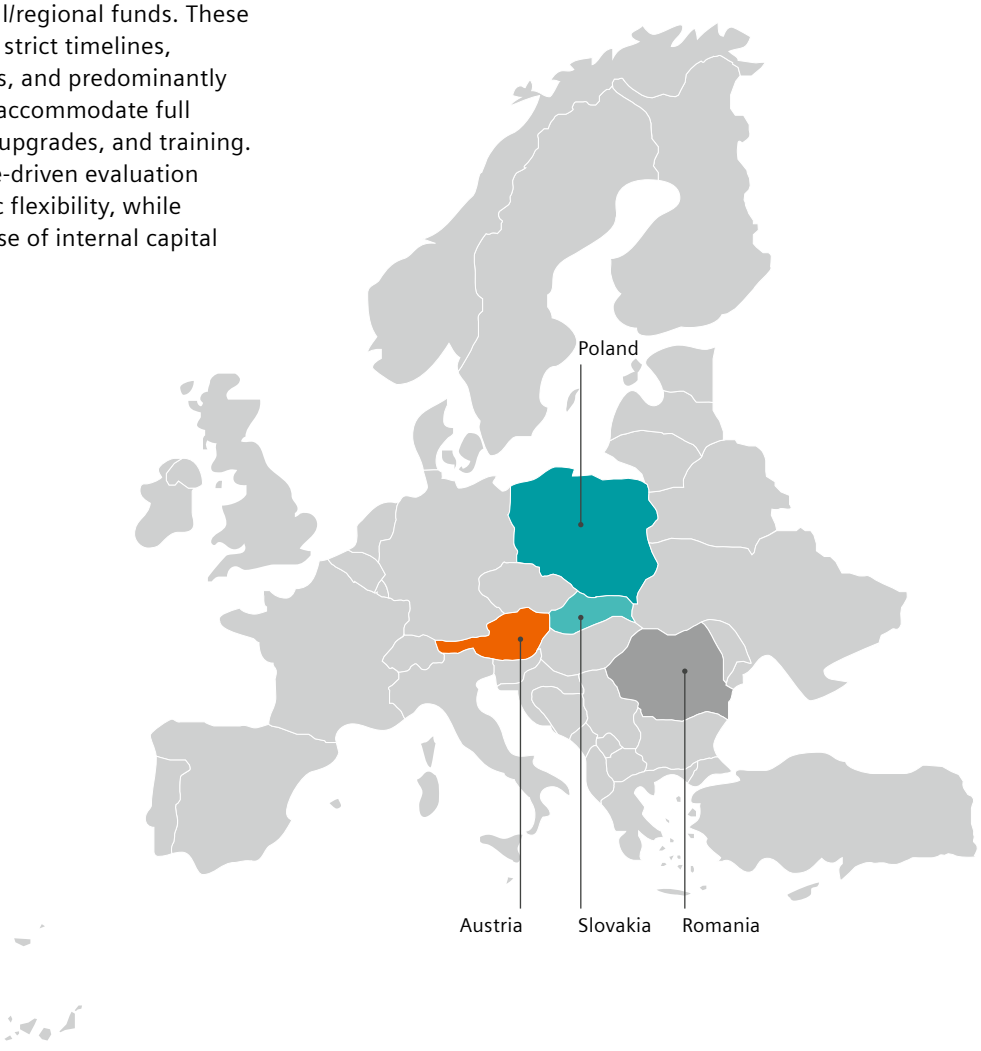
There is also a capacity challenge. Designing a tender for large-scale engagements requires strategic planning, financial modeling, legal structuring, and technological foresight – processes that go far beyond routine equipment procurement. Smaller hospitals or understaffed procurement departments may lack necessary bandwidth or expertise.

Country specific examples

In Austria, investment decisions are strongly influenced by social insurance reimbursement frameworks and decentralized governance structures at the provincial level. Major state (Bundesländer) and regional stakeholders, including the Wiener Gesundheitsverbund, play a decisive role in shaping procurement priorities. Although national healthcare spending is comparatively high, hospital budgets operate under sustained cost pressure. Consequently, technologies must clearly demonstrate efficiency gains, optimized utilization, and measurable cost-effectiveness to secure approval.

For Poland and Slovakia, capital investments are largely dependent on EU/MoH or national/regional funds. These mechanisms are characterized by strict timelines, detailed compliance requirements, and predominantly one-off allocations, which rarely accommodate full lifecycle costs, including service, upgrades, and training. Contract duration limits and price-driven evaluation criteria further constrain strategic flexibility, while financial strain discourages the use of internal capital resources.

Romania faces substantial demands on its healthcare system due to aging infrastructure and limited capacity for domestic funding. Although EU and international funding programs provide critical support, administrative and planning constraints often delay or fragment implementation



What are Value Partnerships?

Built to elevate healthcare enterprises

Value Partnerships are long-term, performance-oriented collaborations between Siemens Healthineers and healthcare providers. They offer the benefits of multi-year alliances – often spanning 10 to 15 years – through which both sides commit to shared goals and continuous improvement.

Validated across the Siemens Healthineers global portfolio, Value Partnerships offer healthcare providers:

- Cutting-edge medical technology with predictable refresh cycles
- Operational excellence, workflow improvement, and data-driven insights
- Workforce development, continuous training, and clinical capability building
- Facility planning support to prepare for the future of care delivery

Rather than only upgrading devices, Value Partnerships help healthcare providers redesign end-to-end care processes, strengthen workforce resilience, and elevate long-term strategic direction.

Why Value Partnerships?

Value Partnerships are tailored to the particular needs of the hospital or healthcare system. Agreements typically include a structured, predictable financial model spreading costs over the full term of a Value Partnership, giving providers clarity, stability, and the benefits of risk-sharing.

Some models incorporate outcome- or performance-based elements and incentives, ensuring Siemens Healthineers is fully invested in delivering measurable improvements.

1. Better outcomes and higher clinical quality
By continuously modernizing technology and optimizing workflows, hospitals can accelerate diagnosis, enhance treatment precision, and enable more effective care. Examples across cardiology, oncology, and stroke demonstrate how Value Partnerships help improve patient access and experience.

2. Operational efficiency and reduced complexity
Healthcare teams benefit from:

- Streamlined processes and data-supported decision-making
- Capacity management and lifecycle planning for equipment
- Continuous workforce training

3. Financial predictability and shared risk
Predictable payments protect against the "surprise costs" typical of reactive procurement. Shared ownership of outcomes reduces risk for providers and enables long-term planning – an important advantage for public and private hospitals alike.

4. A strategic partner, not a vendor
Value Partnerships offer Siemens Healthineers as a committed, long-term collaborator. Providers gain continuous access to global expertise and digital innovation via a partner who stays accountable for results over many years.

The success of this model has been demonstrated in more than 200 Value Partnerships across 40+ countries, underscoring its relevance in today's healthcare landscape.

Why now?

Healthcare is entering an era defined by workforce shortages, rising patient expectations, and economic pressure. Improving outcomes sustainably requires more than new devices. It requires strategic transformation, delivered in partnership.

Value Partnerships offer a scalable way for providers to modernize, innovate, and manage complexity, all while improving care for patients and strengthening resilience for the future.

Entering Value Partnerships

For most European public healthcare providers, Value Partnerships are usually initiated through public tenders. In simple terms, these are the legally required method for public institutions to choose a specific vendor for the delivery of goods or the provision of services.

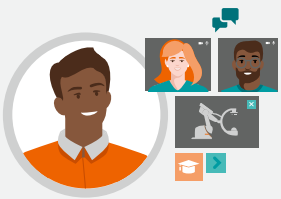
In the European Union, public healthcare contracts above certain value thresholds must be awarded through a competitive tendering process in compliance with EU law and local legal regulations. The key EU framework governing such tendering processes is Directive 2014/24/EU on public procurement ("EU Procurement Directive"), which sets out the rules and procedures that need to be implemented into local law and contracting authorities must follow.

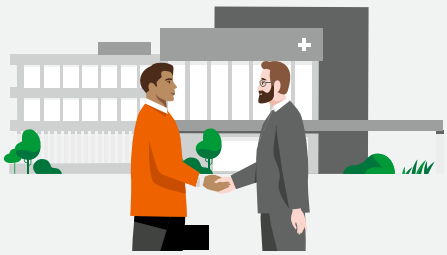
The EU Procurement Directive defines monetary thresholds above which public contracts must be tendered Europe-wide. For deliveries and services in the public health sectors, these thresholds adjust periodically. Value Partnerships, being a multi-year, multi-million Euro engagement, will regularly exceed these thresholds, thus triggering the requirement for a formal tender process in compliance with EU Regulation. At their core, Value Partnerships are multi-stakeholder governance models, where:

- The hospital sets the vision
- Siemens Healthineers delivers the integrated solution
- EU and national authorities ensure compliance and funding integrity
- Clinicians and staff adopt change
- Patients receive improved outcomes

A system results in which public value, clinical performance, financial sustainability, and technology modernization are interdependent.

From Guidance to Impact: Building Value Partnerships





Provide guidance and knowledge

European Union, natonal authorities, and external experts

Value Partnerships: Shared vision and joint execution

Improved patient outcomes

Launching a tender for Value Partnerships

In EU Member States, public procurement must comply with the EU Public Procurement Directive. While the legal frameworks can differ on a national level, the available tendering procedures are similar in most EU countries.

Overview of Tender Procedures in Public Procurement

Open Procedure

- One-stage process.
- Common for well-defined requirements: Hospital needs to define all specifications upfront.
- No negotiation.
- Customer evaluates all full bids received.

Restricted Procedure

- Two-stage process.
- Hospital publishes call for interest.
- Shortlisted bidders invited to submit proposals.
- Used for complex transactions but requires the hospital to define requirements in advance.

Competitive Dialogue

- Designed for complex projects.
- Joint solution/structure definition needed.
- Hospital starts qualification round, then enters dialogue with shortlisted bidders.
- Final bids based on the solutions discussed.

Competitive Procedure with Negotiation

- Two-stage procedure with a negotiation phase.
- Initial selection stage and ask for initial bids.
- Negotiation based on shortlisted bids.
- Final tenders submitted after negotiations conclude.

Innovation Partnership

- Need for development of an innovative product/ service or innovative works not already available on the market
- Combines R&D phase with purchase option
- Staged approach with performance milestones

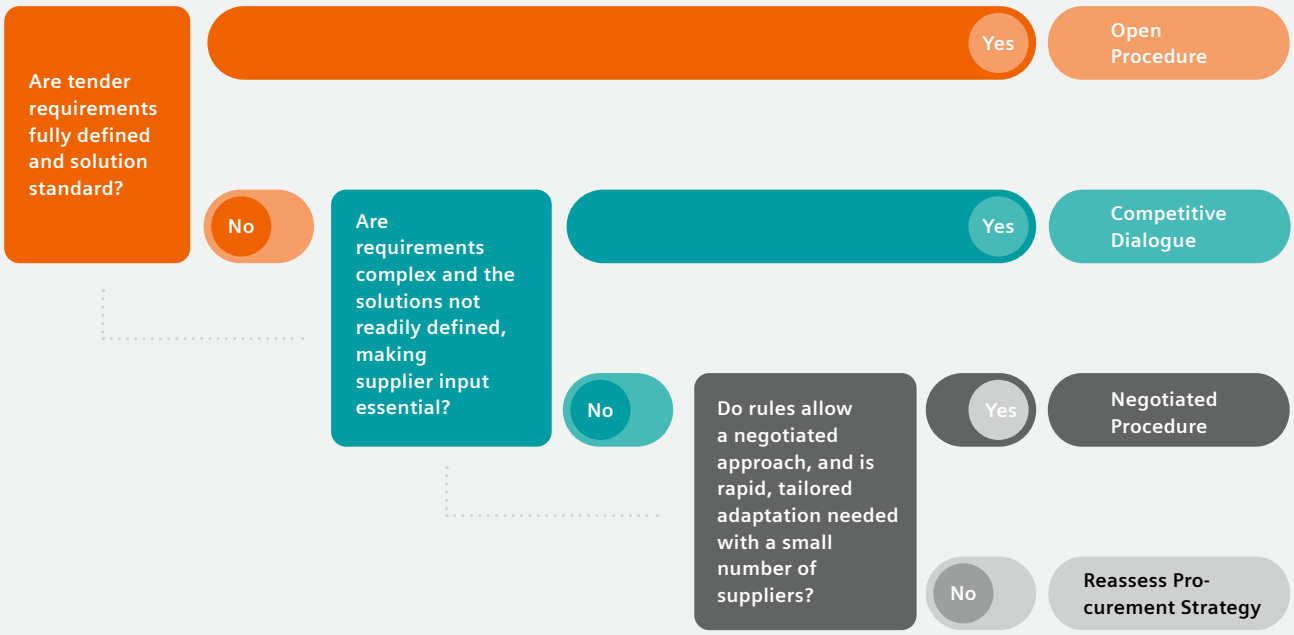
Negotiated Procedure without Prior Publication

- Intended for very specific circumstances.
- Allowed e.g., for extreme urgency, absence of competition, or additional deliveries.
- Direct negotiations with one or more operators.

Improving access to foundational imaging modalities

While in practice it is possible to tender Value Partnerships through different procurement procedures, certain approaches are more fitting to their complex nature. This is especially true where their award requires discussion and co-development of the structure and solutions for a specific project. Therefore, Competitive Dialogue and Competitive Procedure with Negotiation are the more adequate procedures for those kinds of projects.

Choosing a procurement procedure



Competitive Dialogue

Competitive Dialogue is a procedure designed for particularly complex projects in which the contracting authority cannot fully define the end solution upfront. During this procedure, the hospital initiates a qualification round, then enters a dialogue phase with shortlisted bidders. Contracting authorities must define their needs and requirements as well as the chosen award criteria and timeframe.

During the dialogue phase, the hospital and each bidder openly discuss requirements and solutions. The dialogue can have multiple rounds, refining details iteratively. Once the hospital feels it has explored the options, it declares the dialogue closed and invites final bids based on the solutions discussed.

This procedure is well suited to Value Partnerships as they include multiple aspects (such as equipment, services, renovations, training, etc.) and the best approach may need to be developed collaboratively.

Note that the use of Competitive Dialogue or the Competitive Procedure with Negotiation is only permissible if the following statutory conditions are met:

- The needs of the contracting authority cannot be met without adaptation of readily available solutions;
- The works, products, or services include design or innovative solutions;
- The contract cannot be awarded without prior negotiation because of specific circumstances; or
- Only irregular or unacceptable tenders have been submitted in response to an Open or Restricted procedure.

Award criteria – focus on best value: In EU tenders, especially for complex transactions, the award is usually granted based on the "most economically advantageous tender". Meaning the hospital can weigh quality factors, clinical outcomes, and total cost/benefit over the project duration, rather than simply determine who offers the lowest price. The goal is to award the partner who will provide the best overall value in improving their healthcare services.

Competitive Procedure with Negotiation

This type of negotiated procedure fits well if the project is highly complex or innovative. In this case, the requirements are usually partially defined but need further refinement. Consequently, there is a need for negotiation on all aspects of the contract within legal boundaries.

The hospital starts the procedure with an initial selection stage to shortlist a minimum of three qualifying tenderers. Those successful bidders are then allowed to submit their initial bids, which are followed by contract negotiations with the customer. The negotiations are performed in an open and transparent manner, ensuring equal treatment of tenderers. They may take place in successive stages to reduce the number of tenders. Ultimately, the vendors are requested to submit their final bids. This is followed by an evaluation of the most economically advantageous tender and the appointment of the preferred tenderer by the customer.

Tender process overview

Indicative timing will vary by country, hospital and funding constraints, but typical Value Partnerships tender lifecycles are as follows:

1. Preparation (approx. 3–9 months)
During this stage, strategy and needs analysis should be completed. Market early consultation and selection of the applicable procurement procedure should be finished as well. Draft of the functional and performance-based requirements must also be ready for the tender itself.

2. Tendering (approx. 3–9 months)
During this stage, publication of the contract notice and documentation should be completed. Additional Clarification and Q&A could be a part of this step as well. For Competitive Dialogue or Negotiation procedure, structured dialogue rounds will take place.

3. Evaluation and award (approx. 2–4 months)
In this phase technical and financial evaluation happened.

- Negotiations with participants could take place if applicable.
- Final step here is award decision and then standstill period

4. Implementation (approx. 6–24 months)
After tender is successfully won, it's time to think about project realization:

- Design, installation, and commissioning should be described in detail.
- Address workflow redesign and training aspects.
- Agree KPIs and success measures.

5. Roll-out and continuous Management
After the first successful project, you may start to make plans for further partnership development. In this case, extension to other modalities/sites could be good idea.

- Regular performance reviews and optimization projects could help in this process.
- Mid term reviews and potential extension/modification (in line with applicable law) could be also discussed.

High-level steps to enter Value Partnerships

Effectiveness checks

Value Partnerships set precise, measurable KPIs tied to objectives and define mechanisms to monitor effectiveness and scale solution impact.

KPI definition
Align KPIs to clinical and financial targets. Typical metrics include: diagnostic throughput (patients/day), time to diagnosis, repeat imaging rates, procedure duration, mean time to repair (MTTR), device uptime, total cost of ownership per patient, patient outcomes (complications, readmissions), staff satisfaction, etc.

Baseline and monitoring cadence
Establish historical performance as the comparison point. Use monthly operational reports, quarterly clinical outcome reviews, and annual strategic reviews as needed.

Governance
Set up a joint steering committee to review results, authorize corrective actions, and apply incentives or penalties where appropriate.

Effectiveness checks
Validate value delivery through pilot results, cost–benefit analyses, and clinician feedback. Adjust KPIs if they fail to reflect actual outcomes.

Standardization and scaling

Standardization
It is recommended to standardize the deal process for future applications. For this purpose, functional and performance-based specifications that are reusable across hospitals and regions (e.g., uptime and throughput targets, interoperability requirements, quality metrics) can be developed.

At the first step, it is crucial to define a modular contract structure:

- Core components (service model, KPIs, governance, reporting).
- Optional modules (additional modalities, IT platforms, training packages).

Then, adopt technical and data standards to ease integration and cross border learnings.

Scaling
A good starting point is using the pilot Value Partnerships in the region and then extending to wider networks based on lessons learned.

Consider also using framework agreements or multi-year Value Partnerships contracts where national rules allow, enabling phased expansion without starting from scratch.

Then it will be possible to align with national digital health strategies and eHealth platforms to leverage shared infrastructure (PACS, VNAs, oncology registries).

Siemens Healthineers role in competitive dialogue and negotiation procedures

The role of Siemens Healthineers as a bidder under a Competitive Dialogue or Negotiated Procedure includes:

1. Participating in structured dialogue rounds to refine technical requirements, interoperable architectures, and service models – helping align supplier capabilities with clinical needs.
2. Responding transparently to the contracting authority's requirements and questions.
3. Co-developing, together with the hospital, technical and service solutions that meet outcome and performance goals (e.g., uptime guarantees, throughput targets, dose optimization initiatives), strictly within the rules set by the procedure.
4. Presenting different solution scenarios (e.g., various fleet compositions, managed services bundles, digital tools) so the hospital can compare value.
5. Providing all inputs on a nonlegal basis. Decisions on procedure, evaluation criteria and contract structure remain with the contracting authority, supported by its advisors.

Support activities may include:

Knowledge sharing: Provide clinical evidence, health economic models, and case studies demonstrating outcomes and cost implications.

Technical pilots and proof-of-concept: Deliver pilot deployments to validate workflows, integration with PACS/EMR, and data capture for KPIs, lifecycle projects, software and hardware upgrades included into the contract.

One of the examples of possible projects is a rollout of a standardized MRI protocol package in one or two sites, measuring changes in scan time, repeat rates and diagnostic confidence.

Education and training: SHS can provide clinical education programs, operator training and implementation support to ensure adoption and optimal use. Blended education programs (on-site + remote) supported by SHS Academy combining onsite training, simulation labs, and e-learning for radiographers and clinicians to standardize imaging protocols and reduce repeat scans could be taken as a great example.

VP and local support teams: Provide support during the implementation process (planning, milestones, risk registers), manage device deployment schedules (lifecycle planning, performance dashboards), integrate medical equipment into hospital networks (into PACS, RIS, oncology information systems and EMRs), and set up remote diagnostics for uptime monitoring as well as work on pilot projects and educational programs.

Consulting services during project stages, desired Options/Services for Long-Term Partnerships and extended warranties & upgrades financed under CAPEX grants can be discussed as a part of the VP as well.

Data and analytics: Support setting up outcome measurement frameworks, dashboards, and analytics tools to track KPIs and support continuous improvement.

Scientific collaboration: Access to innovation and refresh cycles for predictable CAPEX/OPEX, scientific collaboration for university hospitals (if it's allowed in the region).

Case studies: How to enter Value Partnerships

Klinikum Braunschweig

Klinikum Braunschweig, one of Germany's largest municipal hospitals, has established a Value Partnership with Siemens Healthineers to modernize its diagnostic infrastructure and clinical workflows under public sector constraints. What began as a technology focused collaboration has evolved into a comprehensive transformation framework spanning imaging, precision diagnostics, and laboratory medicine.
The case illustrates how a public hospital can achieve sustainable, operational stability, and planning security while complying with public procurement and governance requirements.

Klinikum Braunschweig, Germany

Strategic rationale
For the hospital, entering a Value Partnership was necessary due to the growing complexity of diagnostic technologies combined with increasing investment pressure and limited flexibility within traditional procurement models. Short-term, transactional purchasing could not ensure long-term availability, consistent quality, and predictable cost structures.

In adopting a partnership model, the hospital sought to create a framework for continuous improvement, reduce fragmentation across diagnostic services, and align technological development with long-term clinical and operational objectives. Central to this approach was the need for planning security and regulatory compliance, particularly in the context of municipal ownership and EU public procurement law.

Moving beyond transactional procurement
The Value Partnership started as a ten-year Technology Partnership covering all imaging modalities. Within this framework, Siemens Healthineers assumed responsibility for the long-term provision and reliable operation of imaging technologies across their lifecycles. As the collaboration evolved, Klinikum Braunschweig introduced advanced molecular diagnostics and digital, AI-supported workflows that improved diagnostic depth, speed, and consistency. The Partnership thereby transitioned from technology stewardship to enabling data-driven precision diagnostics. This marked a deliberate shift away from fragmented procurement toward an integrated technology management approach that enabled both cost stability and ongoing modernization.

Long-term positioning
Through the Value Partnership, a robust foundation for long-term diagnostic excellence was established:

- Standardized technologies and lifecycle-oriented management have improved operational reliability and planning security.
- The consolidation and automation of laboratory services further position the hospital as a leading public provider.

This case demonstrates how Value Partnerships can enable sustainable modernization in a public hospital environment. It serves as a reference model for public healthcare providers seeking to move beyond transactional procurement toward long-term, sustainable, value-driven transformation.

Ziekenhuis Oost Limburg

The collaboration between Siemens Healthineers and Ziekenhuis Oost Limburg (ZOL) in Genk represents Belgium's first multimodal Value Partnership in medical imaging. At ZOL, the Partnership is structured as a long-term fleet management model, under which Siemens Healthineers assumes responsibility for the hospital's medical imaging equipment over multiple years. The focus shifts from individual system purchases to sustained availability, performance, and evolution of the imaging fleet as a whole.

Strategic rationale from the hospital's perspective
For ZOL, the partnership model enabled access to technological advancements that would have been difficult to realize through transactional purchasing. For example, the Value Partnership made it possible for ZOL to install photon counting CT technology, becoming one of the first non-university hospitals in Belgium to do so. Such an achievement would have been unlikely under a traditional, ad hoc procurement approach.

Beyond initial technology access, the Partnership provides a framework for continuous technological evolution. The hospital and Siemens Healthineers jointly define how the radiology department evolves over time, allowing for ongoing adjustment in response to rapid changes in radiology, including software innovation and workflow development.

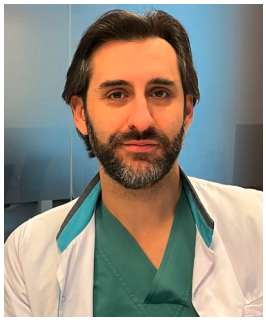
Moving beyond transactional procurement
The decision to enter a Value Partnership required a deliberate shift away from transactional purchasing, which although perceived as simpler in the short term proves restrictive over time. While transactional models avoid lengthy commitments, they limit flexibility and make it harder to steer technology strategy proactively.

In contrast, the Value Partnership offers structured freedom: the ability to jointly adjust direction, incorporate software and technology updates, and make course corrections. This two way alignment ensures that both parties remain oriented toward the same strategic objectives over the duration of the partnership.

This Value Partnership was made possible through a public tender with negotiations including both the requested technology and services, allowing for the tendering of a Value Partnership between ZOL and Siemens Healthineers. This is the first Value Partnership achieved in Belgium, a country that had shown hesitation towards Value Partnerships due to the previously perceived incompatibility between the public tendering procedures and this offering from Siemens Healthineers.

Long-term positioning
By aligning technology, services, and performance objectives, the Partnership strengthens clinical quality, improves efficiency, and supports sustainable care delivery in an environment of rising demand, workforce shortages, and accelerating innovation.

The ZOL Genk case illustrates how Value Partnerships move beyond ownership of equipment to shared responsibility for clinical and operational outcomes.



"Radiology is evolving at lightning speed. With this partnership, we embed innovation, training and quality in a sustainable way. We invest not only in state-of-the-art technology with additional radiation reduction for our patients, but in a complete ecosystem that supports our staff and guarantees our patients that they are examined with the most advanced technology, within a stable and future-oriented framework."

Dr. Tom De Beule Head of Medical Imaging ZOL

Let Siemens Healthineers help you meet your goals

Healthcare in Central and Eastern Europe is at an inflection point. The choices made today will shape access, quality, and sustainability for the next decade. Value Partnerships offer a sustainable, future-proof way for healthcare providers to modernize, expand capacity, and strengthen resilience without bearing the risks alone. In a landscape defined by funding pressures, workforce shortages, and rising expectations for digital, connected care, the outcome-oriented approach of Value Partnerships is not merely an option; it is emerging as a strategic necessity.

Siemens Healthineers invites healthcare leaders, policymakers, planners, and clinical teams to explore how Value Partnerships could support their plans and goals in a way that is fully aligned with national health strategies, EU procurement rules, and local funding frameworks. We encourage forward-thinking institutions to consider what new possibilities this model could unlock for them.

Our teams stand ready to exchange knowledge, share real-world experiences, and explore potential pathways to transformation. Together with you, we can shape a transparent, measurable, and future-ready Value Partnerships tailored to helping you meet your goals.

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4. European Commission country health profiles (Austria, Romania, Slovakia, Poland): ***https://health.ec.europa.eu/state-health-eu/country-health-profiles_en***
5. General public procurement portal: *https://single-market-**economy.ec.europa.eu/single-market/public-procurement_en***
6. Guidance on innovation procurement: **https://ec.europa.eu/docsroom/documents/41862**
7. TED – Tenders Electronic Daily (publication of tenders): ***https://ted.europa.eu/***
8. Pre Commercial Procurement (PCP) and Public Procurement of Innovative solutions (PPI): **https://ec.europa.eu/info/funding-tenders/opportunities/portal/screen/opportunities/topic-details/ec-ppp-2020**
9. EIT Health (innovation, pilots, education): **https://www.eithealth.eu/**
10. European Investment Bank – Advisory services (incl. health projects): **https://www.eib.org/en/products/advisory/index.htm**

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The information on tendering processes provided in this document is meant as a high-level overview and might differ in practice depending on project, geography and local legislation. This Whitepaper shall not provide business or legal advice. Customers should seek independent expert consultation services and legal advice on how to implement and execute the indicated tendering procedures.

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