
DFX INTELLIGENCE

DATA ASSET INTELLIGENCE REPORT

Meridian Health Systems

Healthcare SaaS — Patient Engagement & Scheduling
Advanced Data Analysis & Monetization Intelligence

PREPARED

April 2026

REPORT TYPE

DAI — Full Analysis

CLASSIFICATION

Confidential

STATUS

SAMPLE

■ SECTION 01 · EXECUTIVE INTELLIGENCE BRIEF

The scheduling data is worth more than the SaaS platform.

Meridian Health Systems is a declining healthcare SaaS business with \$4.2M ARR eroding at 15% annually. The two PE firms circling the platform are pricing a software asset. They are not pricing the data asset underneath it — and that is where the real value sits.

Meridian has accumulated 18 million appointment records across 340 medical practices over eight years. This dataset — de-identified scheduling patterns correlated with treatment outcomes and insurance routing — is precisely the kind of longitudinal healthcare behavior data that AI training companies, health insurers, and pharmaceutical firms are actively acquiring in the current cycle. Conservative estimates place the standalone data value between **\$1.2M and \$3.8M**, with structured licensing potentially exceeding the current enterprise value of the SaaS platform itself.

The fastest path to monetization is a direct licensing arrangement with a healthcare AI training firm, executable within 30 days if the data is properly packaged. The strategic implication for the sale process: the data should be carved out or explicitly priced as a separate line item, not absorbed into the platform valuation where it will be buried in a declining-ARR multiple.

\$1.2M

LOW ESTIMATE – DATA VALUE

\$3.8M

HIGH ESTIMATE – WITH LICENSING

18M

APPOINTMENT RECORDS

8yr

LONGITUDINAL DEPTH

■ SECTION 02 · DATA ASSET REINTERPRETATION

What the intake did not surface.

The DAI intake identified six data assets. Three of them are table stakes. Three are asymmetric — worth more than the intake framing implies.

Asset 1 — Scheduling Pattern Intelligence (ASYMMETRIC)

18M appointments across 340 practices over 8 years is not a "scheduling database." It is a longitudinal behavioral dataset that maps when patients seek care, how scheduling patterns correlate with treatment outcomes, and which provider configurations optimize throughput. This is the asset that AI training firms and health systems will pay a premium for — it cannot be reconstructed from public sources.

Asymmetric upside: De-identified scheduling pattern data at this scale and longitudinal depth is rare. Most healthcare AI training sets are claims-based or EHR-derived. Behavioral scheduling data is a category the market has not fully priced yet.

Asset 2 — Insurance Claim Routing Data (ASYMMETRIC)

Claim routing data across 340 practices maps which insurers cover which procedures at which reimbursement levels in which geographies. This is intelligence that health system operators, insurance brokers, and revenue cycle management (RCM) companies will pay for. It is also the kind of data that PE firms acquiring healthcare businesses use to benchmark operational efficiency.

Asset 3 — Provider Contact Database (STANDARD)

12K provider contacts in Salesforce with 70% enrichment fill rate. This is a standard B2B contact list with moderate value (\$0.50-\$2.00/contact in the healthcare vertical). Worth approximately \$6K-\$24K as a one-time sale. Not the primary value driver.

Asset 4 — Marketing Attribution Data (OVERLOOKED)

\$2.4M in cumulative ad spend across Google and Meta with full attribution data. This dataset maps which channels, messages, and audiences converted healthcare administrators into paying SaaS customers over multiple years. Healthcare marketing intelligence — specifically, what works in selling to medical practices — is a niche dataset that healthcare marketing agencies and competing SaaS platforms would license.

Asset 5 — Patient Engagement Behavior (ASYMMETRIC)

2.1M de-identified patient records with engagement patterns (appointment adherence, cancellation rates, rescheduling behavior, no-show patterns). This is clinical operations intelligence. Health systems spend millions on patient engagement optimization. A dataset that correlates engagement behavior with outcomes across 340 practices is a product, not a byproduct.

Asset 6 — Email List (STANDARD)

48K healthcare administrator emails. Standard list value, \$0.30-\$1.50/contact in healthcare B2B. Worth approximately \$14K-\$72K. Useful as a sweetener in a larger deal but not a standalone play.

■ SECTION 03 · MARKET DEMAND & BUYER ANALYSIS

Who wants this data and why they want it now.

Four distinct buyer categories with active demand signals in the current cycle:

BUYER TYPE	WHY NOW	USE CASE	URGENCY
Healthcare AI Training Firms	Longitudinal patient behavior data is the current bottleneck for healthcare LLM fine-tuning. Most available datasets are claims-based; scheduling/engagement data is underrepresented.	Fine-tuning appointment prediction, no-show prevention, and care pathway optimization models.	HIGH — active procurement cycles at major firms.
Health Insurers / Payers	Insurance claim routing data across 340 practices reveals reimbursement pattern intelligence that underwriting teams use for network optimization.	Network adequacy analysis, reimbursement benchmarking, provider performance scoring.	MEDIUM — ongoing but not time-pressured.
Revenue Cycle Management (RCM) Companies	RCM is a \$150B+ market in active consolidation. Companies acquiring practices need operational benchmarks — Meridian's data provides exactly that across 340 sites.	Operational benchmarking, scheduling optimization playbooks, staffing models.	HIGH — PE-backed RCM roll-ups are actively sourcing.
Competing Healthcare SaaS Platforms	Marketing attribution data showing what converts healthcare administrators is proprietary competitive intelligence that SaaS competitors cannot generate from public sources.	Customer acquisition strategy, channel optimization, positioning intelligence.	MEDIUM — would buy opportunistically.

Key demand signal: The healthcare AI training data market is projected to grow at 35%+ CAGR through 2028. Behavioral and operational datasets (vs. clinical/genomic) are the fastest-growing sub-segment because they require less regulatory overhead to license.

■ SECTION 04 · COMPETITIVE & ALTERNATIVE LANDSCAPE

What makes this dataset defensible.

Alternatives available to buyers

Claims data is commoditized — available from CMS, state health departments, and aggregators like IQVIA and Komodo Health. EHR-derived data is available through health system partnerships. Neither of these sources captures the behavioral layer Meridian has: *when* patients schedule, *how* they engage, and *what* operational configurations correlate with outcomes.

Meridian's defensibility

- **Longitudinal depth:** 8 years. Most SaaS companies this size have 2-4 years of clean data. This is a moat.
- **Multi-practice breadth:** 340 practices. Single-practice datasets are noise. Multi-practice datasets are signal.
- **HIPAA-compliant de-identification:** Already done at the aggregate level. This removes the largest friction point in healthcare data transactions.
- **Scheduling + outcomes correlation:** This specific pairing (operational behavior tied to clinical outcome) is rare. Most datasets offer one or the other.

Pricing power assessment

Moderate to high. The behavioral scheduling data has few direct substitutes. The marketing attribution data has moderate substitutability. The contact list and email data are commoditized. Net: the core asset (scheduling + outcomes) commands pricing power; the supporting assets are sweeteners.

■ SECTION 05 • MONETIZATION STRATEGY STACK

Three tiers. Fastest money first.

Tier 1 — Direct Data Licensing

FAST • 0-30 DAYS

Package the de-identified scheduling pattern dataset as a licensed intelligence product. Target healthcare AI training firms and RCM companies with active procurement cycles. DFX handles buyer identification and outreach. Meridian provides data access under a standard licensing agreement.

- **Expected revenue:** \$400K-\$900K (one-time licensing fee)
- **Difficulty:** Low — data is clean and de-identified
- **Execution:** DFX packages, DFX identifies buyers, Meridian grants access

Tier 2 — Packaged Intelligence Reports

MEDIUM • 1-3 MONTHS

Transform the raw scheduling and outcomes data into structured industry intelligence reports: "Healthcare Scheduling Benchmarks 2018-2026" and "Patient Engagement Patterns Across 340 U.S. Practices." Sell to health system operators, consultants, and payers at \$5K-\$25K per report or as a subscription.

- **Expected revenue:** \$150K-\$500K annually (recurring)
- **Difficulty:** Medium — requires data packaging and narrative framing
- **Execution:** DFX packages and distributes, Meridian provides data updates

Tier 3 — Strategic Data Carve-Out in Sale

STRATEGIC • 3-12 MONTHS

Structure the company sale so the data assets are explicitly valued and either: (a) carved out as a separate licensing entity the founder retains, or (b) priced as an additive line item that increases the deal multiple. Present the DAI valuation to both PE bidders as part of the sale process.

- **Expected revenue:** \$800K-\$2.5M in incremental deal value
- **Difficulty:** Medium — requires deal structuring and negotiation

- **Execution:** DFX advises on structure, founder's M&A counsel executes

■ SECTION 06 · DEAL & VALUATION IMPACT

How the data changes the deal.

Without data valuation, Meridian sells as a declining SaaS business at 2-3x ARR (\$8.4M-\$12.6M), discounted for the 15% revenue decline. The PE bidders are pricing the platform. They are not pricing the data.

With data valuation surfaced and positioned:

- **Scenario A — Data bundled:** The data adds \$1.2M-\$3.8M to enterprise value, pushing the effective multiple from ~2.5x to ~3.5x-4x. The buyer gets a declining SaaS platform with a valuable, monetizable data asset. The deal narrative shifts from "declining software" to "data-rich healthcare intelligence platform."
- **Scenario B — Data carved out:** The founder retains a licensing entity that owns the data and licenses it to the buyer (and to third parties). The SaaS platform sells at the discounted multiple, but the founder keeps a recurring revenue stream from data licensing worth \$150K-\$500K annually.
- **Scenario C — Data sold separately:** The data is sold to a different buyer than the SaaS platform. Healthcare AI training firm buys the data; PE firm buys the platform. Two transactions, each optimized for its buyer class.

DFX recommendation: Scenario A or B, depending on the founder's preference for clean exit vs. retained upside. Scenario C is viable but adds transaction complexity and timeline risk. Present all three to the founder with modeled outcomes before the next PE conversation.

■ SECTION 07 · STRATEGIC POSITIONING

How to present this to buyers.

Positioning language for PE bidders

"Meridian is not a declining scheduling platform. It is a healthcare intelligence company sitting on eight years of longitudinal patient behavior data across 340 practices — data that AI training firms, health insurers, and RCM companies are actively seeking. The SaaS revenue is one monetization path. The data itself is a second, independently valuable asset class that has not yet been activated."

Positioning language for data buyers

"This is a de-identified, HIPAA-compliant, eight-year longitudinal dataset correlating scheduling behavior with treatment outcomes across 340 U.S. medical practices. It covers 18 million appointments and 2.1 million patient records. It is not a claims database. It is not an EHR extract. It is the behavioral layer that sits between clinical data and operational data — and it does not exist anywhere else at this scale."

■ SECTION 08 • ACTION PLAN

What to do in the next 14 days.

Immediate actions

ACTION	OWNER	TIMELINE
1. Commission a DFX Full Data Audit — Validate data completeness, identify gaps, confirm de-identification compliance. Produces a formal Data Asset Certificate that can be presented to buyers.	DFX + Meridian CTO	Days 1-7
2. Package the scheduling dataset for licensing — Create a data dictionary, sample extract, and licensing term sheet. DFX handles packaging; Meridian provides access.	DFX	Days 3-10
3. Outreach to 5-8 healthcare AI training firms — DFX identifies and contacts firms with active data procurement cycles. Meridian's scheduling dataset is positioned per the language in Section 7.	DFX	Days 7-14
4. Brief the PE bidders on data value — Present this DAI report (or a redacted version) to both PE firms. Reframe the deal narrative from "declining SaaS" to "data-rich intelligence platform." This should shift the bid range upward.	Meridian founder + M&A counsel	Days 10-14

DFX engagement scope

- **Full Data Audit** — Validation, certification, gap analysis
- **Buyer Identification & Outreach** — Direct engagement with healthcare AI firms and RCM acquirers
- **Data Packaging** — Licensing-ready dataset with documentation and compliance framework
- **Capital Strategy Integration** — Advise on deal structure (carve-out vs. bundle vs. separate sale)

END OF REPORT • DFX INTELLIGENCE • DAI • SAMPLE DOCUMENT

ALL DATA IS FICTIONAL / SYNTHETIC. THIS REPORT IS FOR DEMONSTRATION PURPOSES ONLY.