Chile | Pharmacy-linked clinical services

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For service, procurement, partnership and benefits managers. The question is which models can be compared, which receipts each actor might capture and which constraints reverse a decision. Coverage spans twelve families and a 61-subline map; those labels are not 61 additive markets.

The central conclusion is that a visible fee is insufficient. Provision may be external, price a component, advance payment part of a commitment and capacity insufficient. Controls and a scenario engine show when decisions change while retaining missing contracts and demand.

Includes ES/EN report and workbook, JSON examples and a standard-Python engine. This is a static edition without supplier connections or personal data. It does not estimate national monetary TAM, observed profitability or individual authorisation, nor promise clinical or commercial results.

Scope	Reading basis
Coverage	12 families ·61 sublines ·8 decisions
Tools	Comparison, commitment and scenarios
Source dates	Baseline 21 October;specific reopens 22 October 2026
Limit	No national TAM or observed profitability

1. Scope, evidence and competition

The core is human clinical provision linked to pharmacies. External providers appear as substitutes or adjacent models when no link is established. Veterinary services, product sales treated as clinical receipts and unchecked interpretations of company names are excluded.

P01–P07 describe acts or programmes; P04 overlaps as a P03 subsegment. P08/P09/P10 are modality, channel and payer. P11/P12 are supplier layers. An episode can cross several codes and must be counted once in the final market.

The historical baseline was inspected on 21 October 2026 and retains access statuses. This review reopened specific offers and corrected currency; it did not revisit the entire corpus. Catalogues and advertising establish publication, not purchases, volume or efficacy. Interpretations and scenarios are labelled as our own.

The historical store catalogue, coordinates and derived territorial analysis are not redistributed. They remain outside the commercial candidate while reuse restrictions are unresolved; this product does not promise that asset .

Competitors and substitutes are compared by function: pharmacy channel, direct professional, laboratory, family assistance, employer campaign and industry supplier. No national ranking is inferred from web traffic, catalogue breadth or unmatched prices.