



NUBA^{Pass}

Portability, Security, Decentralization of your
Medical Record



Abstract: This whitepaper aims to show the Nuba Pass solution to the problem of lack of software applied to personalized medicine through Artificial Intelligence, Big Data and Blockchain applied to pharmacovigilance, within a network of medical providers with a token as a means of payment. The Nuba Pass platform developed by Dev-Fi Tech Inc offers interconnected modules for different medical specialists, nutritionists, physiotherapists, pharmacy within the NUBA PASS Network with personalized medicine for users with their own native Nuba Coin currency to make payments for goods or services offered by providers doctors within our network. The Nuba Coin token functions as a currency within the Nuba Pass network. With a limited offer of 100,000,000 tokens and a market potential of 306,000 medical users in Mexico seeking a penetration share of 1% and a sale price of each license of 18 usd, the platform is operationally affordable. The surplus above 1% of market penetration represents amortization of costs and returns due to an increase in the value of the token. The Nuba Pass platform puts its Nuba Coin coin on sale in order to expand the Nuba Pass platform by offering new digital medical modules of personalized medicine through an Initial Coin Offering (ICO) sale for token investors who expect a speculative increase. in its value.

Definition of keywords:

- **EHR (Electronic Health Record):** known as Expediente Médico Electrónico is a digital register of a patient's medical information. Where medical records, treatment plans, allergies, and any other relevant data are stored in order to look out the patients record.

- **Blockchain (cadena de bloques):** is commonly defined as a mathematic structure to storage data that in a way is almost impossible to forge. Is an electronical public book that can be shared openly among uneven users and creates a immutable record of transactions.

- **SmartContract:** A SmartContract is a software program that facilitates, ensures, enforces and executes registered agreements between two or more parties (for examples persons or organizations). As such they would assist them in negotiating and defining such agreements that will cause certain actions to occur as a result of a specific set of conditions being met.

- **Token:** Representation of value based on Blockchain

- **Initial Coin Offering (ICO):** type of financial service using cryptocurrency through crowdfunding

- **Crowdfunding:** Collaborative financing mechanism for projects developed on the basis of new technologies, dispensing with the traditional financial intermediation, linking project promoters with investors directly.

- **CSG (Consejo de Salubridad General) :** General Health Council. It is a collegiate body that reports directly to the President of the Republic and has the status of sanitary authority, with normative, advisory and executive functions. The provisions it issues are of a general nature and are mandatory in the country

NUBA Pass

1. HEALTH CARE MARKET SITUATION
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1. HEALTH CARE MARKET SITUATION

Medical attention is an universal and comprehensive human right in the life of every person, however, there are still large inequality gaps in patient care and well-being between different hospital levels. Advances in medical technology are enabling us to live longer, healthier and higher quality lives. Thanks to medical technology devices and the advances generated in the field of clinical care with medical data management, there have also been some important advances in the form of electronic health records (EHR), an essential innovation to facilitate paperless health information between healthcare professionals so that they can easily share and use it.

The fact is that there is a continuous shift in the digitization of medical records in most developed countries, costing billions of dollars, so progress has been slow and uneven compared to developing countries.

This inequality has meant that current hospital systems lack privacy, security, and do not support the equitable exchange of valuable health data. The challenge is to build a robust, scalable and decentralized platform for patient registration that enables secure, private patient registration, tracking and sharing of health data with the various medical or clinical branches.

1.1 FRAGMENTED MEDICAL RECORDS

Different healthcare institutions often employ different EHR vendors, meaning that while information may be freely shared within the institution or group, it is often truncated or inaccessible to other institutions using different EHR systems. This leads to a silo effect, where patient medical data remains restricted to an individual institution, which must then be summarized or manually transcribed in order to be accessed at another institution. In an age where information transfer is instantaneous, it is increasingly indefensible that such barriers to access exist.

When healthcare professionals examine patients, it is important that they have access to all of the patient's medical data at all visits, including previous diagnoses, investigations, results, medications and allergies. Lack of a complete longitudinal patient health history increases the risk of medical errors and incurs additional cost. Most of these errors are not caused by errant healthcare professionals, but by medical systems failures. It has been shown that most medical errors are attributed to workflow, communication and human-computer interfaces.

1.2 LACK OF PATIENT-CENTERED CARE

In this era, medical paternalism is the exception rather than the norm. Patients are increasingly co-opted into medical decision making and often play an active

role in the management of their medical affairs. Seeking a second opinion has also become an accepted course of action for patients; however, this has been hampered by current EHR solutions. Since patients do not directly control access to their detailed health data, the mobility of medical data is affected. Current systems also do not allow for differential consent options that can be easily recorded or changed; for example, patients wishing to change their mind regarding a research trial or organ donation would have to go through a tedious administrative process to modify their consent.

1.3 INADEQUATE PRIVACY OF PATIENT INFORMATION

Patient privacy is a cornerstone of good medical practice and is important to both patients and physicians. Patients voluntarily provide accurate medical information to receive the best care. However, current Electronic Health Record (EHR) systems do not allow patients to have control over who can see which parts of their medical records outside of the clinical setting. While there are systems that offer a rudimentary password-protected layer of security for sensitive information such as sexual or psychiatric history, none allow the patient to have control over how their information is shared. Despite privacy laws that define how personal medical data should be handled, they have not been formulated with respect to advances in Blockchain technology, which enable distributed data security and give patients an almost instantaneous right to control how their data can be used.

1.4 SAFETY RISKS

Current EHR systems are centralized and vulnerable as a single point of failure. In April 2017, the WannaCry ransomware crippled around 80 National Health Service (NHS) organizations, including hospitals and general practices in the UK. The result: cancellation of approximately 20,000 appointments, 5 hospitals having to turn away ambulances and 600 GPs having to resort to pen and paper for medical records. When all medical records are stored in a single repository, a data breach is usually disastrous for any healthcare organization. According to the Kaspersky Security Bulletin 2016, the healthcare sector is among the top 10 industries affected by ransomware.

1.5 HEALTH INSURANCE AND FRAUD

Insurers play an important role in the healthcare system and often require access to patient data for claims and premium structuring. Currently, patients must request disclosure of medical documentation from a healthcare provider often paying a fee in the process. The provider generally summarizes the pertinent items in a report and sends it to the insurer, who then manually verifies the information. This process is tortuous as insurance claims can take months or even years, and the involvement of multiple parties increases the risk of transcription errors.

Health care fraud is also a problem when errant physicians include false diagnoses in the patient's medical records for fraudulent reimbursement claims. This false diagnosis can cloud the patient's clinical picture and lead to medical errors. Without a good data provenance system, the errant practitioner may not

Industry Sector	% attacked with ransomware
Education	23
IT/Telecoms	22
Entertainment/Media	21
Financial Services	21
Construction	19
Government/Public Sector/Defence	18
Manufacturing	18
Transport	17
Healthcare	16
Retail/Wholesale/Leisure	16

Source: Kaspersky Security Bulletin 2016

be easily discovered. This leads to increased premiums for all other patients and physicians acting in good faith.

1.6 PERSONALIZED MEDICINE

Personalized Medicine, once considered too costly and impractical, is becoming a reality. Due to advances in Artificial Intelligence (AI), machine learning and data analytics, the healthcare industry is undergoing a transformation in this area. The promise of treatment plans and medications that are tailored to an individual is appealing. However, The lack of structured data and EHR-friendly application programming interfaces (APIs) is currently hindering real-world implementations. In addition, the inability to share genomic and phenotypic

data in an identity-preserving manner would hinder the progress of using artificial intelligence tools to personalize medicine.

1.7 TELEMEDICINE

Telemedicine is still in its infancy, but it is expected to be one of the fastest growing subsectors of healthcare. With advances in telecommunications, video streaming and portable devices, it is only a matter of time before telemedicine becomes a common practice. However, the same problems of fragmented health records, centralization and security risk remain with telemedicine systems as they build on current HCE models. Without a complete longitudinal record, it is difficult for physicians to make accurate diagnoses through telemedicine. Patient privacy is also essential in telemedicine, but there are no current systems that allow granular access permissions.

2. NUBA Pass

NUBA Pass is an EHR ecosystem based on Blockchain with a modular architecture that allows the linkage between patients, doctor, hospitals, laboratory, nutritionist among other health specialists through specialized layers that incorporates functions of Pharmacovigilance, data analysis and artificial intelligence with complete control of access to data by the patient to the health specialist, which allows you to have your medical record always updated, secure and linked to your doctors.

NUBA Pass is built and funded by **Dev-Fi Tech** in spin-off with "Tecnología y Soluciones Mitras S.A de C.V" and SI -BIT "Servicios Integrales Blockchain Innovación Tecnológica S.A de C.V". developing a platform with the following features:

2.1 Complete Electronic Medical Record.

2.1.1 Patient Management:

- 2.1.1.1 Safeguarding information anonymously and encrypted (Blockchain).
- 2.1.1.2 Schedule consultations online.
- 2.1.1.3 Portability of your data inside and outside the NUBA Pass system.
- 2.1.1.4 Import lab results and multimedia files.
- 2.1.1.5 Control your consultations and payments online.
- 2.1.1.6 Track therapies and medical indications.
- 2.1.1.7 Schedule reminders in your electronic pillbox.
- 2.1.1.8 Manage family members' records.

2.2 Physician Management

2.2.1.1 Maintain an update patient directory (CRM). Categorize your patients and keep track of all your interactions with them.

2.2.1.2 Customizable documents (prescriptions, lab orders, etc.). No more paper.

2.2.1.3 Telemedicine to keep in touch with patients.

2.2.1.4 Synchronization of several offices and get statistics with Business Analytics.

2.2.1.5 Compliance with NOM-024-SSA3-2012 and NOM-220-SSA1-2016.

2.2.1.6 Pharmacotherapeutic safety module:

2.2.1.6.1 Drug B.D.: Monographs, Interactions, Contraindications, Precautions, Allergies, ICD-10.

2.2.1.6.2 Formats for RAM's and Medication Errors.

2.2.1.6.3 Digital payment gateway and electronic invoicing.

2.2.1.6.4 Electronic agenda for appointment scheduling.

2.2.1.6.5

2.3 Patient-centeredness and privacy.

2.3.1 Patients and/or users own their data. This guarantees the portability of clinical data.

2.3.2 It makes it easier for the patient and the physician to work together by omitting bureaucratic hurdles.

2.3.3 The patient can share his or her medical history with any physician of his or her choice.

2.3.4 The physician may enter clinical data without being registered. This can be done with the patient's consent without the possibility of modifying historical data.

2.3.5 The user can manage the medical records of family members. Functionality focused on pediatric, geriatric or geriatric patients. geriatric or disabled patients.

2.3.6 Data is anonymously protected and encrypted.

2.4 Data security.

2.5 Transparency. (Blockchain)

2.6 Data, Analytics and Personalized Medicine. The system provides the physician or health specialist with tools for statistical analysis of the behavior of administrative and health indicators of their patients based on criteria provided by the CSG and personalized parameters. In the case of the hospital application, an administrative Dashboard is provided for the export of these data.

2.7 Interconnectivity and modules between medical areas. The information collected may be shared with other care areas. These areas are:

2.7.1 NUBA Clinical: Module for hospital Pharmacovigilance practice.

2.7.2 NUBA Consult: Module for the management of in-hospital consultations, laboratory orders, prescriptions, diets and all medical indications for the hospital treatment of patients.

2.7.3 NUBA Nursing: Module for the follow-up of therapies, progress notes and medical indications by nursing staff.

2.7.4 NUBA Lab: Module for the control, results capture and follow-up of laboratory tests ordered by the medical staff inside and outside a hospital environment.

2.7.5 NUBA Admin: Module for the registration of hospital admissions and discharges, as well as the administrative control of clinical and hospital units, which can be linked to NUBA Pass records.

2.7.6 NUBA Warehouse: Module for the management of hospital supplies, medical supplies and pharmacy supplies warehouses. It also provides tools for internal tracking of supplies, depending on the areas of the medical unit.

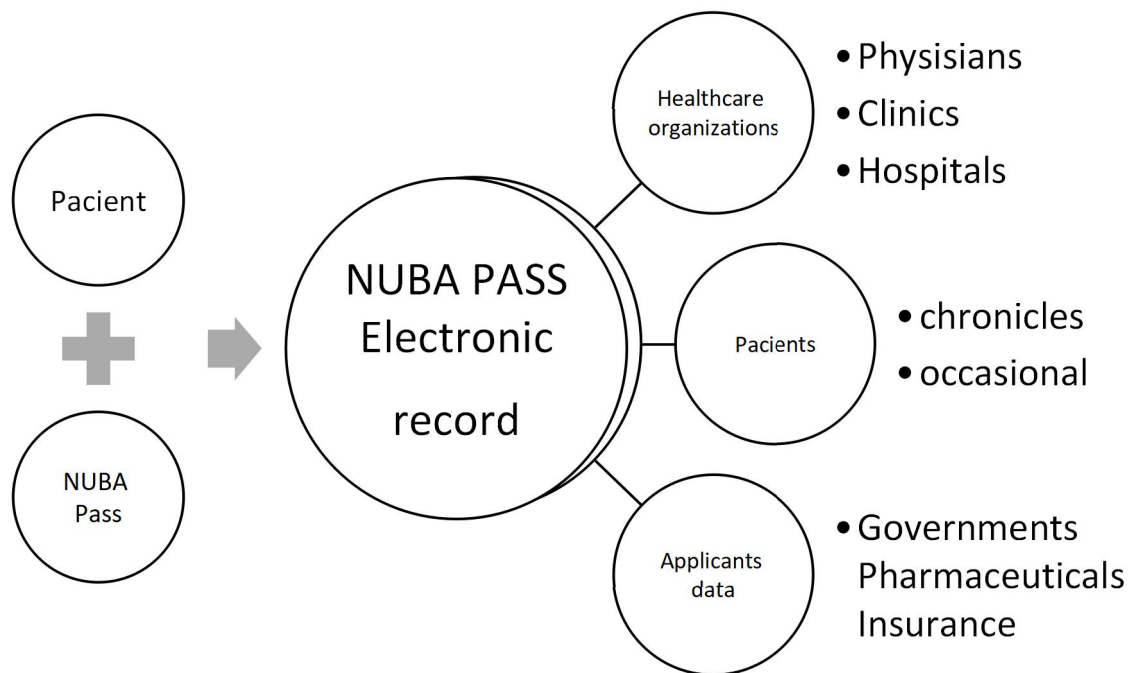
3. TECHNOLOGY

NubaPass serves three user groups: healthcare organizations, patients and data requesters (research organizations, insurers, governments).

3.1 Healthcare organizations. Hospitals or healthcare providers from individual physicians, nutritionists, physiotherapists, clinics and laboratories to large hospitals can use NubaPass and its modules thus avoiding paying high in-house development costs or expensive licensing fees.

3.2 Patient. The owner of the medical data and information will be the patient, who will give access to the doctor or health personnel, thus having the medical record in a single place avoiding the fragmentation of the medical record and the problems that they entail such as loss of documents, filtering of sensitive information, pharmacological contraindications, lack of knowledge of allergies, etc.

3.3 Data Applicants. With the medical data of patients, health exiles such as researchers, universities, pharmaceutical companies, insurers or governments require statistical health information in order to develop new products or services.



NUBA Pass facilitates and encourages real-time data exchange between users through a modular architecture linking the patient with a physician, hospital or clinic, laboratory or other healthcare specialists through different access, security and monitoring capabilities by means of the following technical specifications in different areas:

- **Financial:** trc-20 token based on the Tron Blockchain (TRX) as Value and utility token of NubaPass using to finance the last stage of development of NubaPass through micro patronage by retail investors.

- **Clinical History:** It is the set of written, graphic and imaging documents or any other kind, in which health staff must make the records, annotations and certifications corresponding to their intervention, in accordance with health provisions and the exchange of information between health service providers in

our country is an essential requirement to provide continuity of medical care between them.

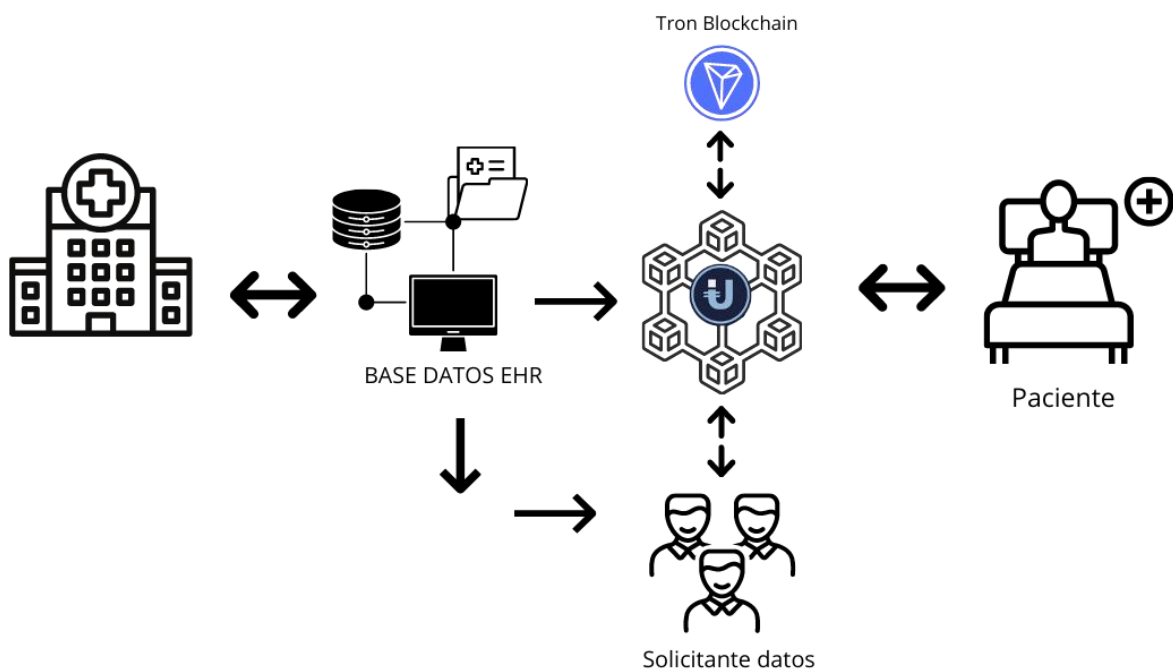
-Pharmacovigilance: The science of collecting, monitoring, investigating and evaluating information on the effects of drugs, biological products, medicinal plants and traditional medicines, with the aim of identifying new information about adverse reactions and preventing harm to patients.

- Safety:

- Artificial intelligence

4. NUBA TOKEN

The NUBAPASS platform and ecosystem will use the NUBA token, a TERC20 token. The value of the token is tied to the adoption and growth of the NUBAPASS platform. The NUBA token provides a way for patients, hospitals, researchers and insurers to access the NUBAPASS platform and create value for each party by either making payment for consultations, medications or clinical services linked to the NUBAPASS ecosystem. Below is a summary of how each party can participate in the NUBAPASS ecosystem.



4.1 Health Data Marketplace

- **Analytics services:** patients can request personalized health reports and data in NUBAPASS by transacting their electronic health record (EHR) between different physicians, hospitals or laboratories.
- **Usage applications:** Patients should use NUBA Token to access the various applications within the NUBAPASS platform, as well as health goods and services within the community developed on our platform.
- **NUBA Token** can also be used as a means of payment for telemedicine consultations with or as an escrow.

NUBA TOKEN ACQUISITION: Patients and investors can acquire NubaToken in two ways:

1. **By investing in the currency** through the platform www.nubapass.com through Tron (TRX). Ethereum (ETH) or Mexican Pesos (MXN).
2. **Individual Partnership in order to grow the NUBAPASS community** will be rewarded with tokens **all those who add more investors, doctors, pharmacies, clinics, hospitals, medical nutrition companies** and other companies in the sector our community.

5.TOKEN ECONOMICS

The following mechanisms increase the value of NUBA Token:

- **The NUBA Pass** platform acts as a **NUBA Token safeguard** by holding 30% of all NUBA tokens in its internal structure.
- **LOTE tokens** held by the Platform will be held in reserve to insure against Black Swan events; they may also be burned at discretion.
- **Limited coin supply**, just like Bitcoin, scarcity plays a key role as there are only 100 million NUBA Token.
- **Use as a payment method**, being used as a means of payment for medical goods and services increases its usability, reflected in an increase in the price of the token thanks to a higher market demand coupled with the limited circulation of NUBA Token.
- **Economic transactions**, unlike other cryptocurrencies that are very expensive to send or receive money, **NUBA TOKEN** due to its underlying technology is very economical at the time of transaction.
- Sales in International Digital Markets**, through Decentralized Exchangers (DEX) will be listed in different markets, thus increasing your exposure to international investment.
- **Rewards**, by entering new investors or partners within the Nuba Pass community a reward will be generated.

6.BENEFITS

- **Patients.** Patients will have direct control over their health data.

Having the freedom to choose how it is used: they can allow researchers and insurers permission to access the data. Which means patients can now control exactly who can see and edit sensitive medical information.

Having verifiable data that can be easily accessed allows patients to submit simple insurance claims directly to the insurer, without additional bureaucratic processes. At the same time insurance premium coverage details can also be recorded, allowing both patients and healthcare professionals a clear view of the scope of insurance coverage and policy.

Personalized analytics and treatment services will enable patients to receive customized treatment plans, personalized lifestyle modification advice, and even predictive reports that can alert them to take note of certain symptoms or signs of diseases to which they may be more susceptible.

In short, NUBA PASS creates a next-generation healthcare ecosystem that incorporates equitable data sharing and predictive and personalized medicine across different sectors:

-Healthcare providers; with a complete health record, medical errors will be reduced and physicians will cut down on care times while reducing their

bureaucratic burden of manual charting. Advanced analytics capabilities mean that practitioners can further customize their treatment plans and make decisions based on clinical evidence stored in NUBAPASS: this enables accurate management of patient conditions. The reliability and provenance of clinical data also enables practitioners to adopt best practices and treatments for patients.

Healthcare organizations; both public and private, will enjoy reduced cost, increased efficiency and reduced adverse health effects. The incorporation of the NUBAPASS platform will enable organizations to accurately track patient demographics and disease surveillance. Public health agencies such as Secretaria de Salud (SA), Instituto Mexicano de Seguro Social (IMSS) or Instituto de Salud y Seguridad Social para los Trabajadores del Estado (ISSTE) in Mexico or the department of health in other countries will be able to access structured data that will enable effective automated disease surveillance, allowing them to react faster to infectious diseases or better plan for chronic health conditions.

Insurers and Researchers . Insurers will be able to purchase anonymized health data directly from patients using NUBA tokens, without going through intermediaries. This will enable better calibration of health premiums and help evaluate claims. Applications built on the NUBAPASS platform. Similarly, researchers can also directly access Big Data to health statistics data, allowing researchers, companies, or governments to trend behaviors in real time. Users

of the Data can leverage NUBAPASS data that is verifiable and structured, giving it reliability and statistical certainty in its collection.

Developers and service providers. Developers from healthcare organizations, insurers and research organizations are invited to develop applications on the NUBAPASS platform that will have a user-friendly WEB SERVICE to enable the PHARMACOTHERAPY SAFETY module (active ingredient database, brand names, drug monographs, drug interactions, allergies and medical catalogs relationships. You can connect our suite to your own data repository with NUBAPASS by acquiring the data directly from our platform.

The entire suite is amenable to Big Data analysis using artificial intelligence tools with NUBAPASS; our system opens the possibility for external developers to implement our data processing engines and link them to their digital tools on a subscription basis.

7. NUBAPASS ADOPTION STRATEGY

Offer creates demand.

o **Through patients:** Personalized medicine is the need on the part of patients, Same who by owning their medical data choose who to give access to (doctors, hospitals, clinics, etc.) which will pay a fixed rent for the use of the service.

Therefore, the offer of NUBAPASS in a free layer to patients will create the demand by doctors to reach patients with their registered history and they will be able to see it. However, to edit it they will have to pay a fee to update the patient's record.

o **Through Big Data & Med Analytica:** The medical data of each patient interpreted in a generalized, historical and statistical way are the raw material of Big Data, with which different health actors, from researchers in universities, clinical laboratories, pharmacies, companies to governments can obtain valuable numerical resources to know structured or cross-sectional statistical data such as pathologies by gender, age or demographic regions for drug sales, specialized clinical care, regional public policy or other needs of experts in the peripheral area of health.

o **Through web developers** due to the possibility of connectivity of our pharmacotherapeutic web service engines with their own developments.

NUBA Pass System Activation Strategy.

Target markets interrelated among them through NUBA PASS:

A) Medical Sector: comprising all health experts engaged in first level care such as, general practitioners, dentists, nutritionists, physiotherapists, etc.

B) General Public (patients): The strategy is based on the stratification of patient groups by stages, prioritizing those most in need of follow-up treatment and pre-screening therapies by health experts.

- I. Chronic patient:
- II. Occasional patient:
- III. Palliative patient:
- IV. Patient's relatives:
- V. Medical Students:

NUBA Pass Benchmark

The key functionality, security and portability requirements standards gathered during the market study have determined the different features that the NUBA Pass system has to meet the needs of both sectors, which are summarized in the following chart:

Common features found in most platforms	Common features found in most platforms		NOM-024-SSA 3 Certified Platforms	Mexican platforms	Platforms for First Level of Care	Competitive advantages (features that platforms do not have)
	Special features	Name of the platform				
Electronic medical record Outpatient clinic	Free service and/or free trial	Epicrisis, MedicalManik, DAR, MediSel, Nimbo X,	Lumed, versión 2.0	Eleanor	Consultorio Móvil, versión 1.0	Medicine interaction
Electronic medical record Specialties	Prescriptions with ID number and QR code	Hi Doc	Consultorio Móvil, versión 1.0	Nimbo X	Hi Doc, versión 4.0	Medicine Catalogs
Specialty: Pediatrics, Gynecology	Medical directory by specialty, location or name	Medical Manik, Eleonor	Sistema de Control Hospitalario (SICOHOSP), versión 3.2	Medicos pro	SRS, Versión Efimed 2.2	Metabolic index and metabolic coefficient calculators
Agenda	Plastic surgery clinical record	Compuexpediente	Hi Doc, versión 4.0	Compuexpediente		CURP in personal data for medical history
Mobile app for doctors and patients	Pharmacy inventory (supply management, purchasing and contracting)	DAR, Tasy	Tasy versión 3.02	Medical Manik		Catalog of CIE-10 diagnoses
Office, hospital and clinic administration	Odontogram	Medicos Pro, Nimbo X, DAR, MediSel, Blue Care	OCC Digitrack, versión 1.0	SIDECAM versión 1.0		Catalog of Laboratories and Cabinet Studies
Electronic billing	Consultation of the status of each bed (free, occupied, being cleaned, etc.) in each infirmary or service and allocation of specific beds	ALERT ® PFH v2.7	MyMed Health Network, versión 7.12.1	Sistema Digital de Sanidad, Versión 1.0		Blood Bank

	to each patient on admission or discharge.					Occupational medicine (work incapacity) Subrogation
Advanced electronic signature	Hospitalization administration, Admissions and bed management	ehCOS suite, PENCLINIC	EHCOS Suite, versión México 4.0	Sistema de Control Hospitalario (SICOHOSP), versión 3.2		
Telemedicine	Corroborates services and costs agreed with suppliers	AudaMedic 3.2	DAR versión 3.35	Hi Doc, versión 4.0		
Products offered: General practitioners, specialists, clinics and hospitals.	Emergency care triage	Mymed Health, ehCOS suite, DAR	PENCLINIC, versión PHENM 4.0	(SIMAP), versión 3.0.0		
Informed Consent	Patient Portal	ehCOS suite, MediSel	SRS, Versión Efimed 2.2	AudaMedic 3.2		
Interconsultations	CURP in personal data for medical history	DAR	Blue Care V.3.0	DAR versión 3.35		
	Catalog of CIE-10 diagnoses	MediSel		PENCLINIC, versión PHENM 4.0		
	Catalog of Laboratories and Cabinet Studies	MediSel		SRS, Versión Efimed 2.2		
	Medicine Catalogs	MediSel, PENCLINIC (Vademécum farmacéutico)		Blue Care V.3.0		
	Interconsultation and subrogation	MediSel		Florence Versión. 0.1M		
	Drug-allergy interaction alert	MediSel				
	Occupational medicine (work incapacity)	MediSel				

Concerning to the **competitive analysis of the clinical records analyzed in the national and international market**, it can be concluded that the **Nuba Pass platform is distinguished by** the following characteristics:

- **Inclusion of medicines catalog and interaction between them.**
- **Cross-referencing of data on the clinical condition of patients with pharmacotherapeutic indications.**
- **CURP** of personal data for clinical history.
- **Catalog of CIE-10 diagnoses.**
- **Catalog of laboratories** and cabinet studies.
- **Area of occupational medicine** for incapacities.
- **Medical subrogation** which consists of sharing a patient's medical record between doctors of the same clinic.
- **Medical subrogation** to share a patient's medical record with different medical offices.
- **Portability of the electronic medical record** by the patient.
- **Compliance with NOM-004-SSA3-2012 and NOM-024-SSA3-2012** electronic health record information systems. Health information exchange.
- **Compliance with the HL7** standard for the interconnection of electronic health systems.
- Compliance with Standards to Implement the Model in Hospitals of the General Health Council (CSG).

- **SIRES Certification;** Electronic Health Record Information System, granted by Secretaria de Salud (SSA), which allows to capture, manage and exchange structured and integrated information from the clinical record for the collection of geographic, social, financial, infrastructure or any other document related to medical care.

The information generated by these systems, together with the information contained in the National Health Information System, is integrated into the National Basic Health Information System.

The SIRES certification allows us to link the NUBA Pass system with any other electronic system by means of Web services or API's for its integration to existing systems in the second and third level medical units, being our main competitive advantage for market penetration.

As for the market characteristics to which the system is aimed, it is delimited as follows:

(a) Medical sector:

1. Age from 22 to 45 years old.
2. Health professionals with their own practice.
3. Minimum average monthly income of \$ 15,000.00 mxn pesos
4. Basic knowledge in the use of computer systems.
5. Bachelor's degree as a minimum level of education.

b) General public (patients)

1. Age from 21 to 50 years old.
2. Minimum monthly income of \$ 15,000.00 mxn pesos
3. Knowledge of the use of social networks and e-commerce platforms.
4. People with family members with chronic ailments or conditions that are unable to care for themselves (pediatric, geriatric, physically or neurologically disabled patients, etc.)
5. People who use sports medicine.

Agreements

As part of the NUBA Pass system's market positioning strategy, commercial collaboration agreements are being considered with different types of medical institutions, both public and private, in order to capture a significant number of users of the system in the first stages of commercialization. Among the institutions that are being considered for this purpose are the following:

- DIF Municipal Puebla.
- Clínica la Paz, Puebla.
- Hospital UPAEP Christus Muguerza, Puebla
- Hospital Puebla, Puebla.
- Medical Impact, ONG.

Another part of the product launch strategy is to grant licenses to health experts (general practitioners, nutritionists, etc.) to use the system free of charge for a period of no more than 3 months so that users can become familiar with the system. These sample accounts will be granted through a

pre-registration system which will be announced 30 days prior to the system's release and will be limited to no more than 500 units. The objective is to capture at least 30% of these 500 users as captive customers of the system.

Pricing Policies

The prices of the electronic files offered in the market generally offer monthly or annual packages depending on the characteristics and the provider. These packages are usually divided into Basic and Premium with average costs between 460.00 MXN/month and 1,200.00 MXN/month respectively.

The NUBA Pass system will have a starting price of:

General Public (Patients)		
License Type	Monthly Price	Features
Free	\$0.00	<ul style="list-style-type: none"> Personal data record Consultation history Prescription History Attach laboratory results Medical history summary Medical history portability Provide access to physicians by practice
Membership	\$45.00 mxn	<ul style="list-style-type: none"> All of the above features Schedule medical appointments Electronic pill dispenser Attach clinical evidence of treatments Telemedicine (Only if the treating physician has enabled this functionality) Linking with family members' accounts Physician directory Electronic payment gateway

Medical Sector		
License Type	Monthly Price	Features
Free	\$0.00	<ul style="list-style-type: none"> Display of medical history by consultation Capture of doctor's identifiers Capture of consultation data (physical examination, diagnosis, prognosis, etc.). Capture and printing of prescription (Only by entering professional ID). Capture and printing of laboratory order (Only by entering professional ID). Dictionary of drug monographs Automated forms of RAM's and EM
Membership	\$350.00 mxn	<ul style="list-style-type: none"> All of the above features Consultation agenda (Scheduling, reminders, cancellations) Patient directory Physician directory Customizable documents (prescriptions, lab orders, consents, etc.) Remote therapy and treatment follow-up functionality Telemedicine Linkage with 2 or more practices Pharmacotherapeutic safety module Drug database: Monographs, interactions, contraindications, precautions, allergies CIE-10 catalog for medical indications Electronic payment gateway Electronic billing Business Analytics Module

8. TOKEN DISTRIBUTION

The NUBA PASS platform has its own investment token through blockchain. Our currency has financial technical characteristics that make it at the same time:

- An investment asset: Make economic investment in a simple way to speculate with the price of our company in the crypto markets.
- A payment currency: Any holder of our NUBA COIN coin can use it as a means of payment with doctors, pharmacies, hospitals or other specialists within our NUBAPASS commercial network.
- A Means of Activation: The currency can be used to activate medical functions or third party commercial agreements with NUBA PASS.

GENERAL TOKEN DATA:

Token Name	NUBA HEALTHTECH
Token code.	NUBA
Blockchain	TRON TRC-20
Supply	100,000,000 NUBA Coin
Price	1.5 USD
MXN/USD exchange rate	20 mxn
Estimated min profit per token 16 months	30%

SALE OF TOKENS AND USE OF CAPITAL:

TARGET USE OF CAPITAL	QUANTITY SOLD TOKEN	PRICE	% TOTAL COMPANY'S TOTAL SOLD TOKENS SUBPASS
SEED CAP	1,000,000 NUBA COIN	1 USD	1%
MARKETING	1,000,000 NUBA COIN	1 USD	2%
EXTRAS COSTS	1,000,000 NUBA COIN	1 USD	3%
LIQUIDITY DEX / CEX	27,000,000 NUBA COIN	1.25 USD	30%
NUBA NETWORK	30,000,000 NUBA COIN	1.50 USD	60%

LICENSE SALES

PRICE	NUMBER OF LICENSES	ANNUAL INCOME
18 USD	3000	432,000

NUBA Pass SERVICE SALES REVENUE TABULATOR

Customer	Monthly license cost	Annual income from sales of licenses	Market size	% of market penetration	INCOME
Physician	\$350	4200	305,000	1%	12,810,000
Nutritionist	\$350	4200		1%	
Dentist	\$350	4200		1%	
Physiotherapist	\$350	4200		1%	
Students	free	-			
Pharmacy					