IMPACT OF COVID-19 ON TELEMEDICINE

QUICK GLIMPSE IN OTHER SELECT COUNTRIES

Florence GAUDRY-PERKINS
Head of Strategy & International Development-H4D
CEO & Founder-Digital Health Partnerships

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Some numbers on increased telemedicine adoption during COVID

**China**
Ping An Good Doctor **+900%** in Jan 2020 vs. Dec 2019 (most were new users)

**UK**
AccuRx (known for text-messaging) created in a few days video teleconsult: **average of 35,000/day**.
EConsult for NHS GPs went from **300 consults/mth 2 yrs ago** to **360 000/month**.
Docly **+ 100% every week** & Push Doctor **+ 70%**

**India**
Apollo 24|7 online consultations rose **+20%/week** during COVID

**Columbia**
In Barranquilla, Colombia around **60% of all medical consultations were via telemedicine**

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**Singapore**
- Doctor Anywhere: **+156%**
- MyDoc: **+147%**

**Indonesia**
- Halodoc: **+101%**
- Atodokter: **+39%**
- HotDoc: **+40%**

**Australia**

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“The rapid adoption of telemedicine is unprecedented.”
Snehal Patel, CEO of MyDoc-Singapore
Telemedicine policy changes during COVID-Asia

- **China** - Early Feb, the NHC issued Notice on Internet Diagnosis & Consultancy Services linked to the epidemic. It lifted rule for ex that telemedicine was strictly prohibited for 1st time diagnosis. Early March, China’s public health insurance enacted coverage of telemedicine as well as ePrescriptions.

- **Australia** - expanded Medicare-subsidized telehealth services for all and provided extra incentives for GPs and other health practitioners during COVID.

- **Singapore** - used govt funding to pay for teleconsults during COVID (CHAS Chronic subsidy and MediSave). In Feb, the Singapore Medical Association published guidance for telemedicine during the outbreak and a guide for health providers through 10 existing telemedicine providers.

- **Japan** launched a free government-backed remote health service using digital health tools

- **Indonesia** - Govt actively encouraged population to use telehealth platforms by publishing a list of providers on its COVID-19 website. Ministry of Health partnered with existing actors for Covid-19 diagnostics in remote areas. Yet, Indonesia has no overarching regulation on telemedicine services.

- **South Korea** - eased restrictions on telemedicine to treat patients remotely during COVID & telemedicine centers were set up to treat quarantined patients

- **Hong-Kong** - although demand was high, regulatory framework is not very mature. Only private hospitals and private insurance cover telemedicine. During COVID, only a few public hospitals enabled telemedicine.

Source: HealthAdvances May 2020
Telemedicine Policy changes during COVID- other select countries

India
- No telemedicine regulation prior to COVID
- Gov of India issued “Teledmedicine Practice Guidelines” March 25th triggering a vast uptake in teleconsults
- May 12th - amendment to “Indian Medical Council Regulations” making the practice of telemedicine legal in India
- Personal Data Protection Bill – expected Parliament later this year via parliament
- June 11th - Insurance Regulatory and Development Authority of India (IRDAI) allowed telemedicine to be reimbursed

Philippines
- COVID greatly accelerated new telemedicine policies: ePrescription guidance issued March 17th & telemedicine framework launched early April.
- Department of Health launched early April a 24/7 telemedicine hotline in Manila.
- Medical Informatics Unit telemedicine guidance: bit.ly/upmiutelemed2020

Brazil
- Early April, the ANS explicitly released a Technical Note that telemedicine would be subject to mandatory coverage by health plans, as authorized by the Federal Board of Medicine (CFM) & The Ministry of Health has temporarily allowed telemedicine through Ordinance No. 467, issued on 23 March 2020.

South Africa
- 2014 telemedicine regulation restricted to under-resourced environments & only for 2nd opinion doctor to connect as the patient must be face-to-face with other practitioner.
- Govt relaxed the rules twice during COVID. After lobbying from Medical Association, the policy further relaxed to say although it is preferable there is already an established practitioner-patient relationship, the teleconsult would still be acceptable considering the circumstances.
Conclusion

- Beyond the crisis, governments, insurers and healthcare providers need to collaborate to ensure that the innovation triggered by this crisis endures and accelerates. The pandemic has laid a base for a new era of care delivery.

- Until a country defines a regulatory framework to authorize, integrate, and reimburse telemedicine services, including in emergency and outbreak situations, it will be difficult for telemedicine to scale. Public Insurance reimbursement is absolutely essential for telemedicine growth.

Further **global calls to action** and an effort for **global cross-fertilization of best practices are needed**. This would help accelerate adoption of telemedicine.
THANK-YOU FOR YOUR ATTENTION!

Contact information:
F.gaudryperkins@digitalhealthpartnerships.com
## ANNEX - Readiness of Various European Countries towards Telemedicine Growth

<table>
<thead>
<tr>
<th>Countries</th>
<th>Regulatory Environment</th>
<th>Strategies/Additional Policies</th>
<th>Public Reimbursement</th>
<th>Private Reimbursement</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sweden</td>
<td>✓</td>
<td></td>
<td>✓</td>
<td>✓</td>
<td>Mature markets with popular teleconsultation platforms</td>
</tr>
<tr>
<td>United Kingdom</td>
<td>At national level</td>
<td>✓</td>
<td>At Par or Above Physical Visit</td>
<td>✓</td>
<td>Public reimbursement since September 2018</td>
</tr>
<tr>
<td>France</td>
<td>At national level</td>
<td>✓</td>
<td>At Par with Physical Visit</td>
<td>✓</td>
<td>Significant governmental focus since 2014/15</td>
</tr>
<tr>
<td>Portugal</td>
<td>At national level</td>
<td>✓</td>
<td>At Par with Physical Visit</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Germany</td>
<td>At national and regional level</td>
<td>✓</td>
<td>Above Physical Visit</td>
<td>✓</td>
<td>Lower adoption but promising development; New digital legislation in November 2019</td>
</tr>
<tr>
<td>Spain</td>
<td>At regional level</td>
<td></td>
<td></td>
<td>✓</td>
<td>Teleconsultation allowed, but without established legislative framework</td>
</tr>
<tr>
<td>Poland</td>
<td>Fitness to Practice</td>
<td>✓</td>
<td>Temporarily due to COVID-19</td>
<td>✓</td>
<td>Ecosystem developed around private outpatient centers / insurance companies</td>
</tr>
<tr>
<td>Belgium</td>
<td>At national level</td>
<td>✓</td>
<td>Temporarily due to COVID-19</td>
<td>✓</td>
<td>Established legislative framework, but lagging in adoption</td>
</tr>
<tr>
<td>Greece</td>
<td>✓</td>
<td></td>
<td></td>
<td>✓</td>
<td>First teleconsultation platforms started during the pandemic</td>
</tr>
<tr>
<td>Czech Republic</td>
<td>✓</td>
<td></td>
<td></td>
<td>✓</td>
<td></td>
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<tr>
<td>Ireland</td>
<td>✓</td>
<td></td>
<td></td>
<td>✓</td>
<td>Teleconsultation platforms exist; Lack of national legislative framework and adoption</td>
</tr>
<tr>
<td>Italy</td>
<td>✓</td>
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<td>✓</td>
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<tr>
<td>Austria</td>
<td>✓</td>
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<td></td>
<td>✓</td>
<td></td>
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</tbody>
</table>

## ANNEX - Readiness of Various Asian Countries towards Telemedicine Growth

### Figure 3: Criteria for Broad Telemedicine Adoption (Pre-COVID-19 Conditions)

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Regulatory Guidance</th>
<th>Public Funding</th>
<th>Private Funding</th>
<th>Cultural Attitude</th>
<th>Telemedicine Players</th>
<th>Leading Companies</th>
<th>Who are examples of big players?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Early Adopters</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>China</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>Ping An Good Doctor, Tencent Trusted Doctor</td>
<td></td>
</tr>
<tr>
<td>Singapore</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>Doctor Anywhere, WhiteCoast</td>
<td></td>
</tr>
<tr>
<td>Australia</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>Medibank, Bupa Telehealth, Afford Anywhere, GP2U</td>
<td></td>
</tr>
<tr>
<td><strong>Followers</strong></td>
<td></td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>Japan</td>
<td>✓</td>
<td>✓</td>
<td></td>
<td></td>
<td>✓</td>
<td>MRT Inc, Micin, Medley Inc</td>
<td></td>
</tr>
<tr>
<td>Indonesia</td>
<td></td>
<td>Non-first time visits</td>
<td></td>
<td></td>
<td>✓</td>
<td>HaloDoc, Ping An – Grab Joint Venture</td>
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</tr>
<tr>
<td><strong>Conservative Adopters</strong></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Hong Kong</td>
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<td>Piots only</td>
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<td></td>
<td>✓</td>
<td>DoctorNow</td>
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<tr>
<td>Korea</td>
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<td>Piots only</td>
<td></td>
<td></td>
<td>✓</td>
<td>MediHere</td>
<td></td>
</tr>
</tbody>
</table>

Source: Health Advances-Blog May 8 2020