World Health Organization
South-East Asia Region

Intelehealth

Telemedicine In Action: Transforming healthcare in LMICs

About the Webinar Series

Intelehealth is proud to collaborate with the WHO SEARO office to drive the future of telemedicine and transform healthcare equity in low- and middle-income countries. Together, we are launching a groundbreaking webinar series that will empower governments with the knowledge and tools needed to build sustainable, standards-compliant telemedicine programs.

Total Webinars: 13, will take place online on **Zoom**

Goal: By the end of the series, health system leaders will learn to integrate telemedicine into public health systems. We will also develop videos and literature to be published after each webinar or at the series' conclusion.

Target Audience:
Healthcare policymakers, healthcare professionals, public health leaders, digital health enthusiasts, and decision-makers in the South East Asia region and Globally.

- Ministry personnel
- Private sector organizations – NGOs & Hospitals
- Healthcare professionals – nurses, midwives, community health workers, doctors, pharmacists
- Donors & aid agencies

Webinar Agenda

S.No	Time	Details	Speaker/Moderator
1	02.00 PM- 02.10 PM	Introductory Remarks	Mr. Wayan Vota
2	02.10 PM- 02.20 PM	Telemedicine Policy: How Telemedicine is Regulated in Asia	Mr. Max Kintisch
3	02.20 PM- 02.30 PM	Telemedicine Policy: How Telemedicine is Regulated in Asia	Mr. Carl Fourie
4	02.30 PM- 02.40 PM	Telemedicine Policy: How Telemedicine is Regulated in Asia	Ms. Neeraja Reddy Karna
5	02.40 PM- 02.55 PM	Wrap Up	Mr. Wayan Vota
6	02.55 PM - 03.20 PM	Q&A	Mr. Wayan Vota
7	03.20 PM – 03.30PM	Closing Remarks	Mr. Wayan Vota

Webinar Faculty

Mr. Carl Fourie

Carl Fourie designs systems that empower people through resilient, scalable digital infrastructure. He has over 20 years of experience in global health, open source, localisation, and capacity development.He contributed to the development of interoperability standards, compliance frameworks, and drives strategy behind Global Goods as critical enablers of national-scale systems. This includes authoring the Global Goods Ecosystem Report and shaping sustainable investment models that bridge open source and digital public infrastructure (DPI).

Ms. Neeraja Reddy Karna

Neeraja Reddy Karna is the Vice President of Engineering at Intelehealth, where she leads the platform's technical vision and development efforts. With over 16 years of experience in the software industry, she has progressed through roles such as Senior Engineering Manager, Senior Technology Architect, and Mobility Specialist—working across companies like Infosys, Cognizant, Optum, and Electronic Arts before joining Intelehealth .
Known as a strategic technology executive, she drives innovation and product delivery for scalable, last-mile health solutions via Intelehealth's open-source telemedicine platform

Mr. Max Kintisch

Max Kintisch is the Director of Research at the Digital Public Goods Alliance (DPGA), where he leads research and evidence generation to support the adoption of open-source digital solutions that advance the Sustainable Development Goals. With a background in science journalism and digital strategy, Max brings a unique lens to the intersection of technology, equity, and global development. At the DPGA, he focuses on identifying impactful digital public goods, evaluating their real-world applications, and supporting countries and partners in scaling these tools to improve health, education, and other critical sectors.

Choosing a Telemedicine Software: The case for standards-compliant, interoperable & open-source Digital Public Goods (DPGs)

Objectives and Outcomes

Objectives:

The session will focus on existing DPG telemedicine platforms, their use cases, and the benefits of adopting non-proprietary, community-driven solutions to enhance healthcare delivery, particularly in resource-constrained settings.

Expected Outcomes: By the end of the webinar, participants will:

- Gain a clear understanding of Digital Public Goods and their role in enhancing global health systems

- Learn about leading DPG telemedicine platforms and their real-world applications in improving healthcare access and quality.

- Understand the steps needed to implement, scale, and sustain telemedicine DPGs in diverse settings.

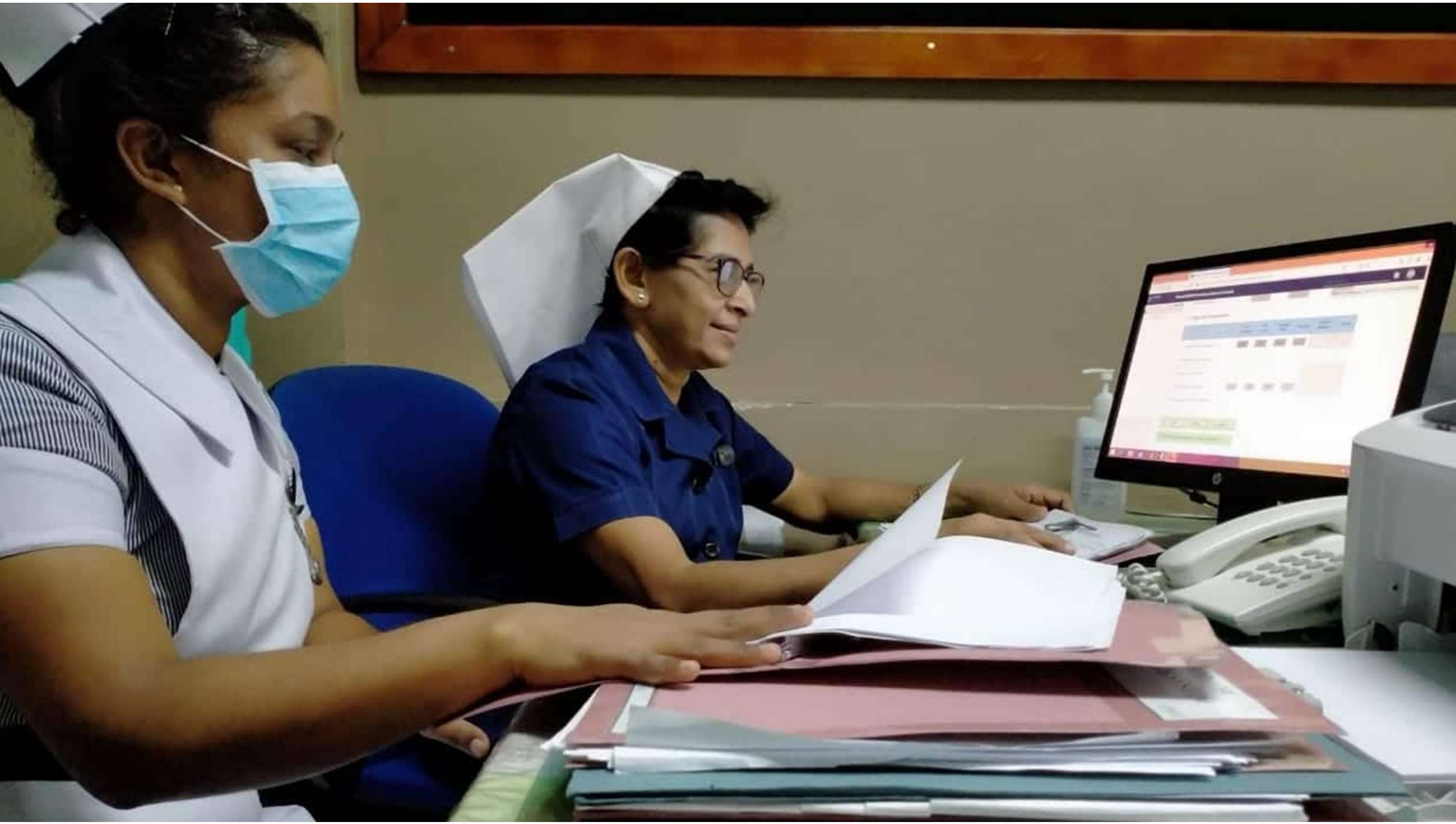
- Take away actionable insights on how healthcare systems can benefit from adopting open-source telemedicine platforms for greater accessibility and efficiency.

Speaker I

Digital Public Goods Alliance

Leveraging Digital Public Goods to address global health needs

Max Kintisch
Director of Research | Digital Public Goods Alliance



Maintainer
University of Oslo

Contributor/
User
Sri Lanka

51 COVID-19 Surveillance Package

73 countries

30% of the worlds population

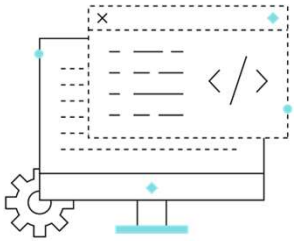
> We must undertake a concerted global effort to encourage and invest in the creation of digital public goods: **open source software, open data, open AI models, open standards** and **open content.**
> These **digital public goods** should adhere to privacy and other applicable laws and best practices, do no harm, and help attain the **SDGs**.

United Nations Secretary-General António Guterres
Roadmap for Digital Cooperation

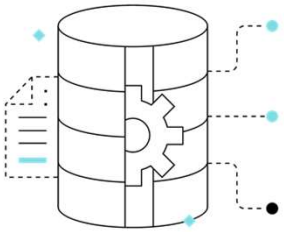
About Digital Public Goods

DPGs include open-source software, open data sets, open content collections and open AI systems that adhere to privacy and other applicable laws and best practices, do no harm, and help attain the Sustainable Development Goals (SDGs) and otherwise comply with the DPG Standard.

01 Open-source Software

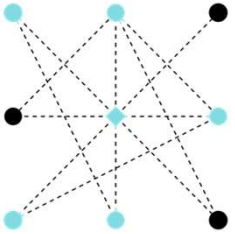


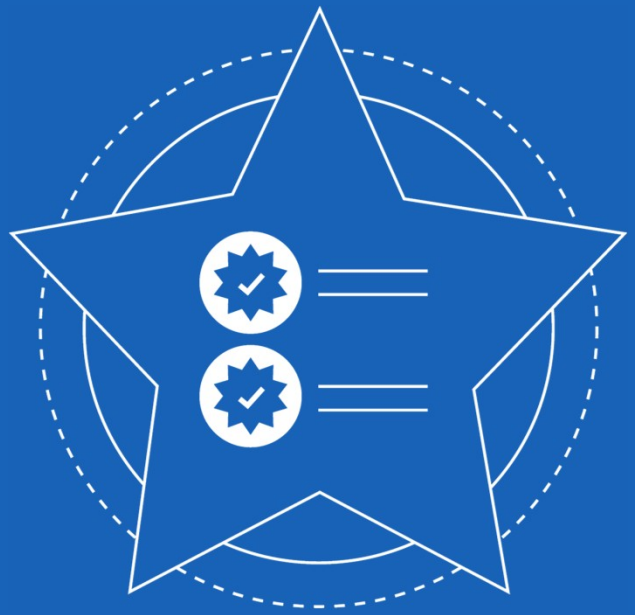
02 Open Data Sets



03 Open Content Collections

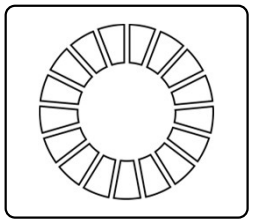
04 Open AI Systems



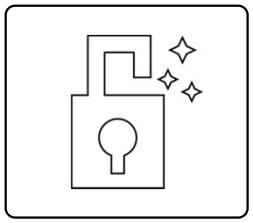


The **DPG Standard** is a set of specifications and guidelines designed to maximise consensus about whether a digital solution conforms to the definition of a digital public good.

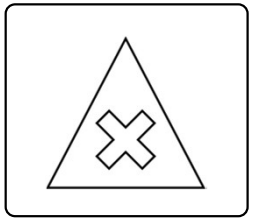
DPG Standard



Advance the SDGs



Open Source



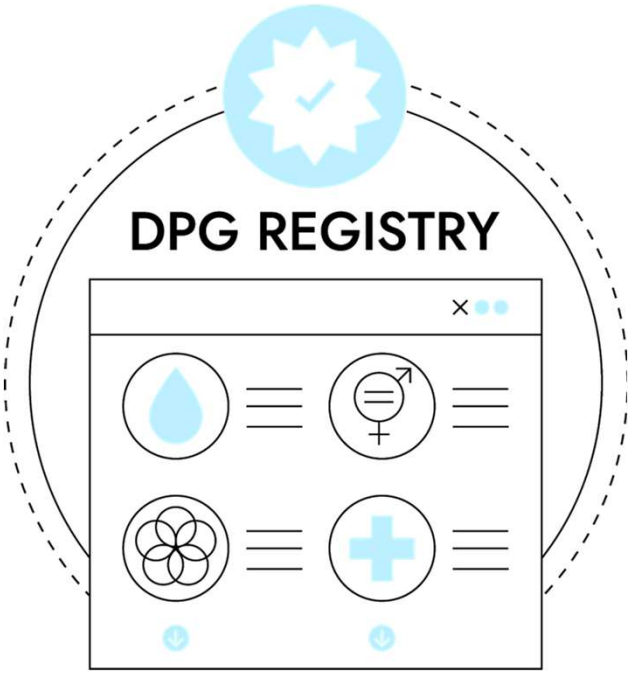
Do No Harm

01 Relevance to Sustainable Development Goals
02 Use of Approved Open Licenses
03 Clear Ownership
04 Platform Independence
05 Documentation
06 Mechanism for Extracting Data
07 Adherence to Privacy and Applicable Laws
08 Adherence to Standards & Best Practices
09 Do No Harm

DPG Registry

The DPG Registry lists all of the digital solutions that have applied for DPG recognition and have been proven to meet the DPG Standard.

It's a global resource to support governments, international organisations and other stakeholders to discover open-source solutions that are designed to support the attainment of the Sustainable Development Goals.



Exemplary telemedical solutions

OpenTeleRehab

OpenTeleRehab connects rehabilitation professionals with service users to improve access to rehabilitation services and contribute to universal health coverage by facilitating discharge, transition of care and follow-up

HCW@Home

HCW@Home is a scalable, institution-level secure teleconsultation system for typical telemedicine scenarios, achieved through close collaboration with healthcare professionals. It is fully open-source and offers integrated features for chat, audio, and video calls using WebRTC.

Bisa Health

Bisa is a health application that allows the public to receive health information and communicate with doctors.

Why DPGs?

01

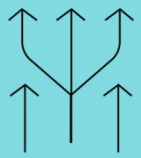
Open-source and accessible, meaning that any country can freely adopt and adapt them for their specific needs.

02

Give countries greater control over how they build and enhance their digital public infrastructure.

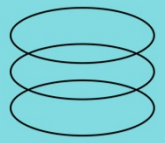
03

Customizable, enabling countries to create more inclusive digital solutions tailored to their local context.



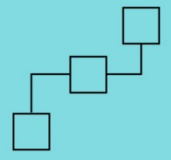
04

Often cheaper and faster to implement than proprietary solutions, allowing countries to avoid vendor lock-in and high costs associated with proprietary software licenses and updates.



05

Catalyze local tech ecosystems, leading to economic growth, job creation, and multi-stakeholder collaboration on tech development.



Thank you

Digital Public Goods Alliance

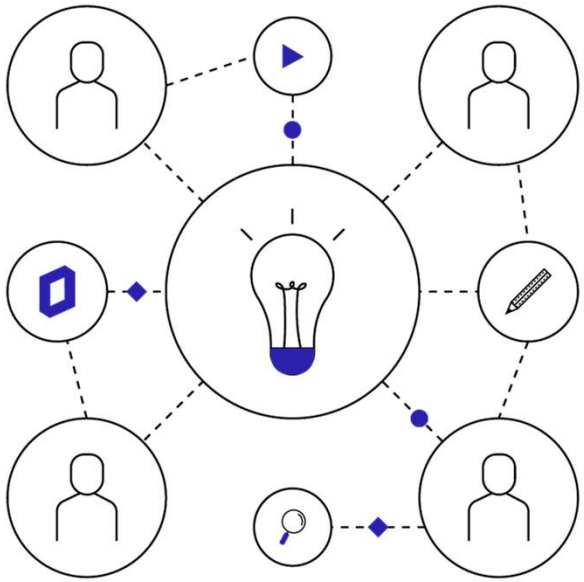
Max Kintisch
max@digitalpublicgoods.net

01

About the DPGA

About the DPGA

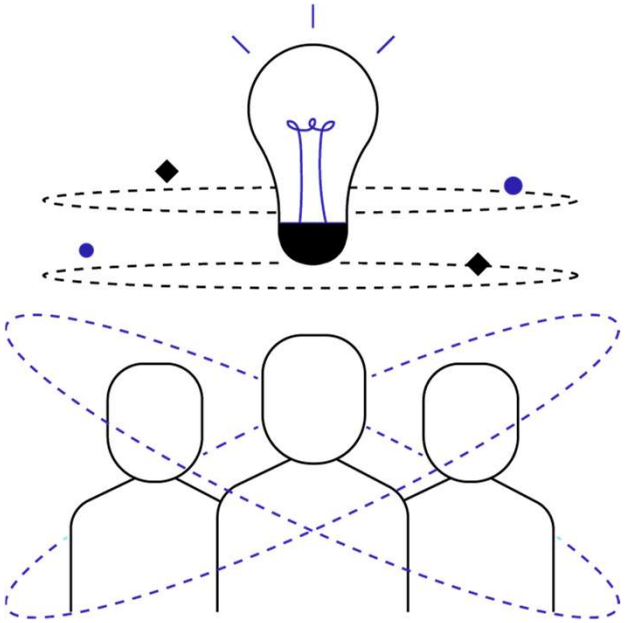
The Digital Public Goods Alliance (DPGA) is a UN-endorsed, multi-stakeholder initiative that brings together countries and organisations from all over the world, with the mission to **facilitate the discovery, development, use of, and investment in digital public goods in order to accelerate attainment of the Sustainable Development Goals.**



About DPGA Members

The Digital Public Goods Alliance is a vibrant **global community of national governments, multilaterals and international non- and for-profit organisations** aligned around a shared vision for digital cooperation and accelerating attainment of the **SDGs** through **digital public goods**.

Identified for their leadership in the **DPG-ecosystem**, member organisations contribute significantly to advancing the discovery, development, use of, and investment in DPGs.



- **Meaningful Relationships**
- **Multilateral Knowledge Exchanges**
- **New Collaborations**

07

How to Become a DPG?

How to become a DPG?

Understanding how digital solutions receive **DPG recognition.**

01 Apply

02 Review

03 Result

04 Validity

05 Annual Review

How to become a DPG?

01

Apply

Use a custom application to guide you through the requirements.

02

Review

DPGA Secretariat's technical team will review the application in detail against all the indicators of the DPG Standard to ensure adherence.

03

Result

If the application meets all the requirements of the DPG Standard, it is recognised as a digital public good and featured on the DPG Registry. The DPG owner then joins the DPG Product Owners community.

04

Validity

DPG status is valid for one year from its approval and applications undergo an annual review process to ensure that all solutions continue to comply with the DPG Standard.

05

Annual Review

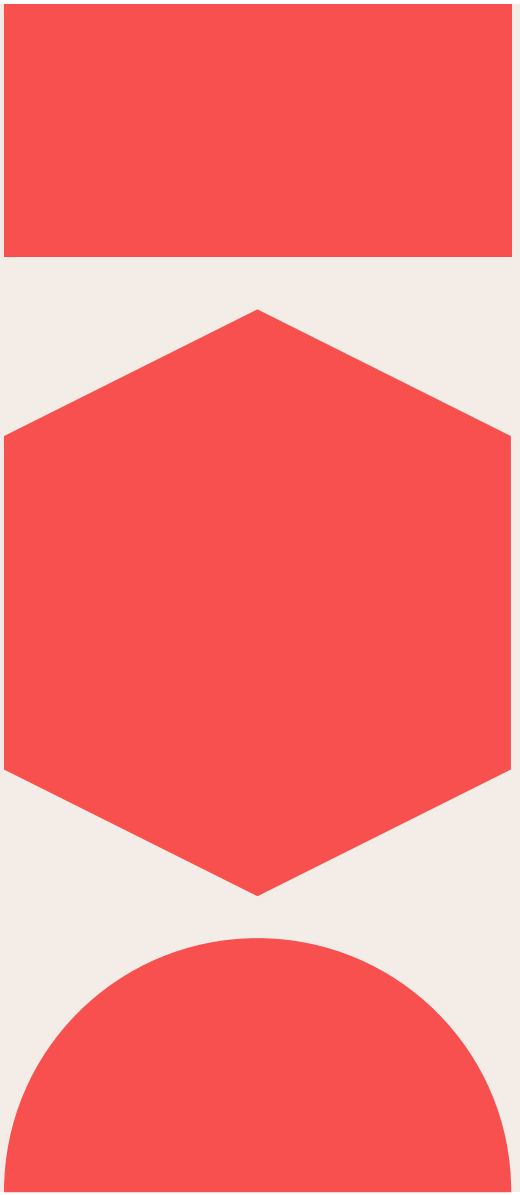
In case the solution fails to continue to meet the DPG Standard, the solution is removed from the DPG Registry.

Speaker II

Choosing Wisely: Realities of Open-Source Telemedicine & the Value of Digital Public Goods

Carl Fourie, Deputy Director – Digital Services, PATH

PATH



What We've Learned from 6+ Years of Investing in DPGs

Spent many years supporting / identifying Global Goods

Invested over $71 Million

Worked with over 120 different partners

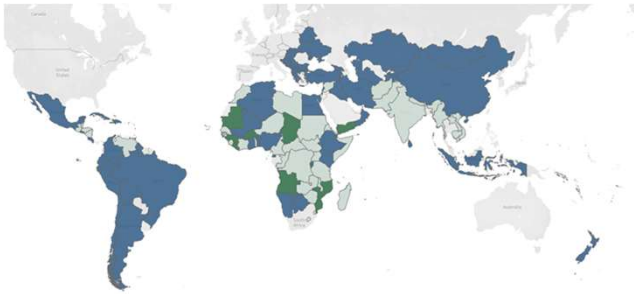
Global Goods reviewed and invested in

Built Digital Capacity

Coordinated and supported 4 regional networks

Real-world implementation experience across Africa & Asia

Emphasis on standards, interoperability, and sustainability



Featured Digital Square Resources

Foundational Digital Literacy Curriculum for Community Health Workers

Community Health Worker Foundational Digital Literacy Framework

Shaping the market for digital health tools

Investing in Digital Health for Health Equity

Increasing transparency on the cost of digital health transformation

PATH

It’s not that simple

Its never “drop and go”

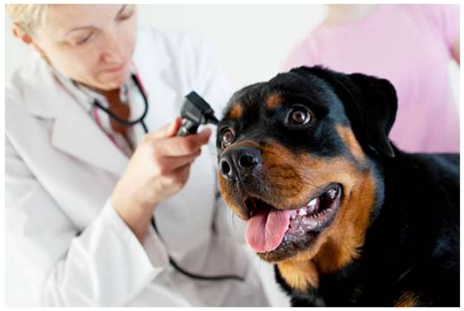
Who you work with is important

Context is key

No such thing as Free

PATH

Open-Source != Free Software



Open source is like a free puppy. The real costs come after adoption.”

PATH

You get the Bricks, Not the House

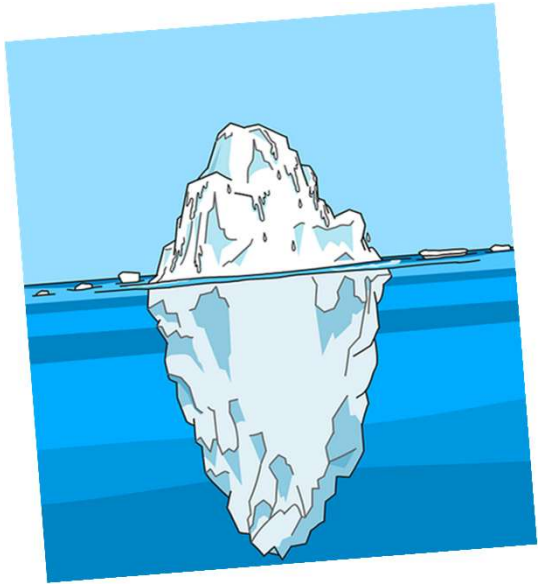
Open source gives you the bricks, not the house.

You need architects, engineers, and investment to build

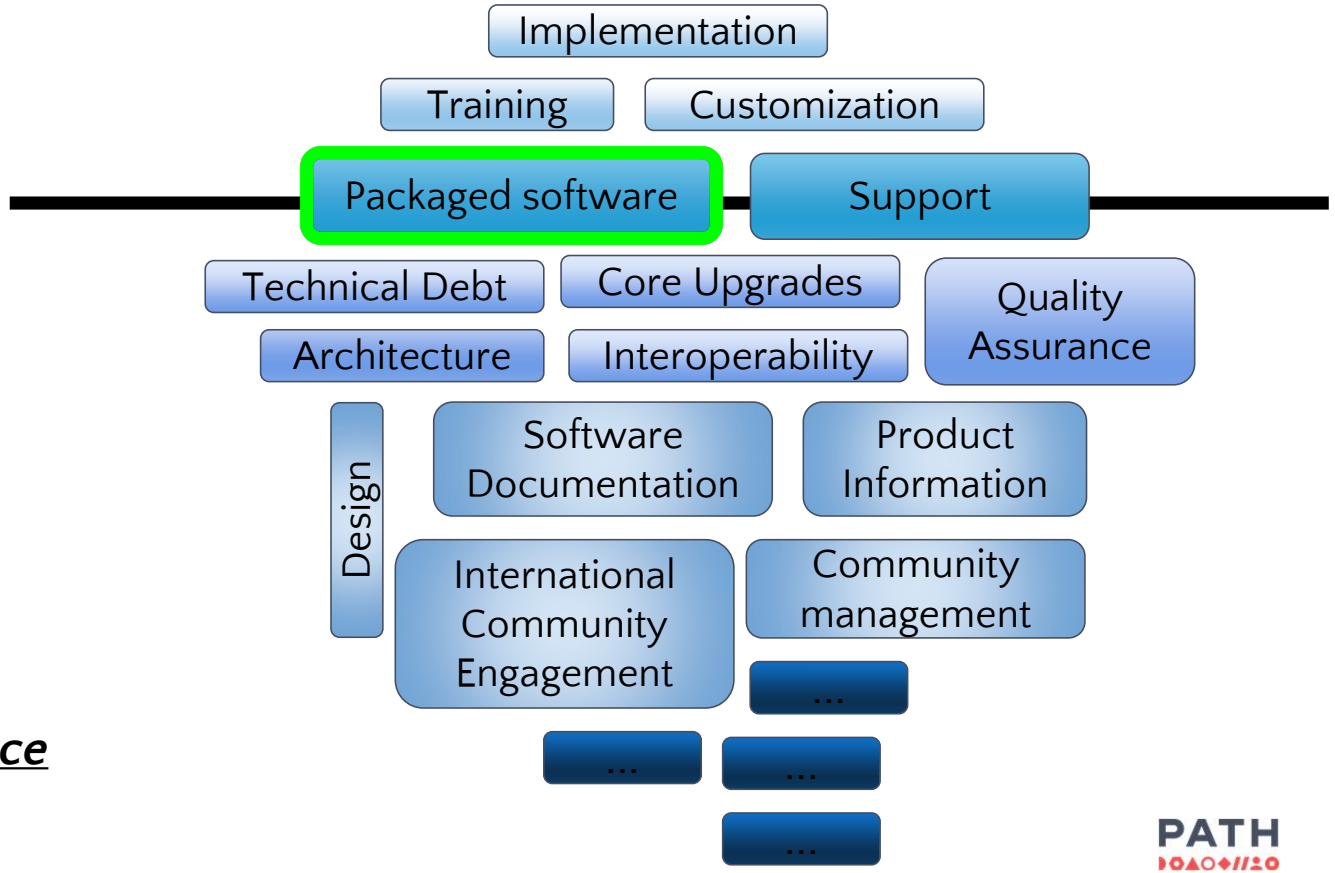
Open code still requires capacity and planning to implement

PATH

The Iceberg of Software Deployment



Hidden Costs of Open Source tools



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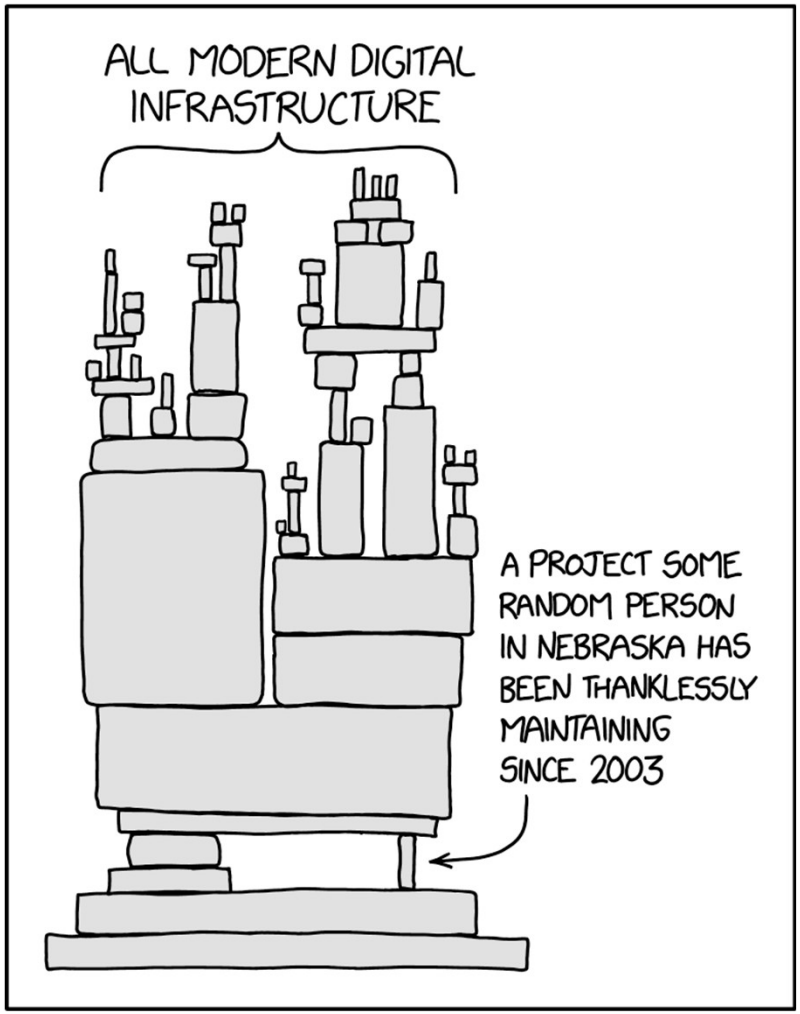


https://xkcd.com/2347

PATH

Standards ≠ Solutions

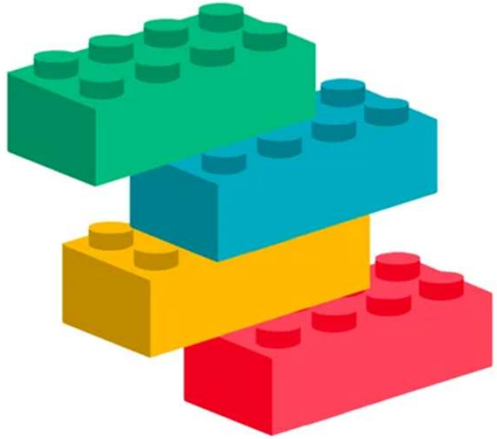
Standards are like LEGO bricks

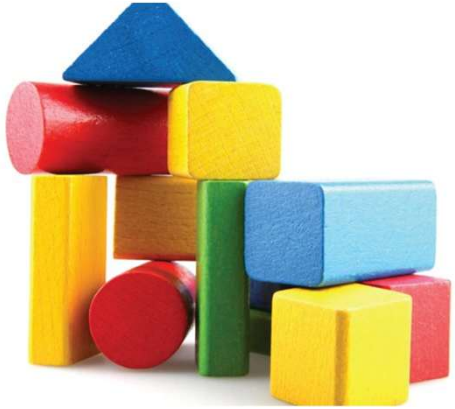
They enable integration, not solve problems alone

They need to fit your context

They are not automatic and need skills!

Beware the hidden costs.





PATH

Context is King – No One Size Fits All

Some sizes fit most

Life is different, goals and context are different

There is always a cost to adopt.

OSS Gives you more of a choice

Thank you

PATH

Speaker III

intelehealth

We Deliver Quality Healthcare Where There Is No Doctor!

Half the world lacks access to essential health services.

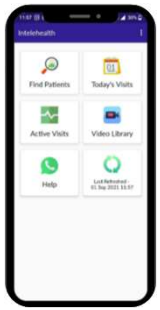
But especially women, 6 out of 10 women forgo or delay seeking healthcare

Our Solution

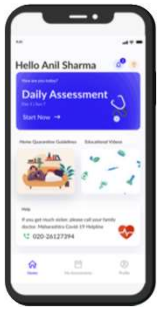
We work with governments and NGOs to set up **high-impact last mile telemedicine projects**, to dramatically improve **health access for women**.

We Offer An Open-source & Cloud-based Technology Platform

Intelehealth's **high-quality telemedicine software** supports patients and frontline health workers with **direct connections** to skilled medical experts.



INTELEHEALTH
Provider-to-Provider App
Connects patients with remote doctors via frontline health workers.



INTELECARE
Direct-to-Patient App
Home-based care video consultations with a remote doctor.

INTELEHELP
Direct-to-Patient Helpline
Creates virtual call centers to receive queries.

The Intelehealth Product

PROBLEM

- No doctors in rural areas
- HWs struggle with triage
- Language barriers
- Implementation challenges

INTELEHEALTH BENEFIT

- Connects via HW to remote MD
- AI + Protocols guide HWs
- 15-language Support
- Proven 6-step Model

📶 **Low bandwidth?** No problem – Offline-first design ensures teleconsults even without internet.
🧠 **Digital Assistant** – Assists the doctor in diagnosis and recommending a treatment plan
📼 **Video Calling** – Enables real-time consults with patients, optimized for low bandwidth
🧪 **Built-in diagnostics –** Integrates with 60+ PoC devices for actionable results, not just records.

The Intelehealth Product

Open Source License	✅ Yes, Intelehealth's codebase is open source (usually on GitHub)
Open Access	✅ Freely available to governments, NGOs, and implementers
Relevance to SDGs	✅ Strong alignment with SDG 3 (Good Health & Well-Being), SDG 5 (Gender Equality), SDG 10 (Reduced Inequalities)
Documentation	✅ Technical documentation available on wiki
Evidence of Use	✅ Deployed in 30+ projects across India and globally; supports 86M+ population coverage
No Harm	✅ Designed with ethical safeguards, task-shifting support, and low-literacy users in mind
Privacy & Data Protection	✅ SSL encryption, role-based access, HIPAA/GDPR-aligned practices
Interoperability	✅ Supports HL7, FHIR APIs
Replicability & Scalability	✅ Proven 6-step implementation model; scalable from districts to states to countries

Data Security, Hosting, and Privacy Compliance

DATA SECURITY

- End-to-End Encryption
- Role-Based Access Control (RBAC)
- Audit Logging & Monitoring
- JWT Token-Based Authentication
- Data Integrity Measures

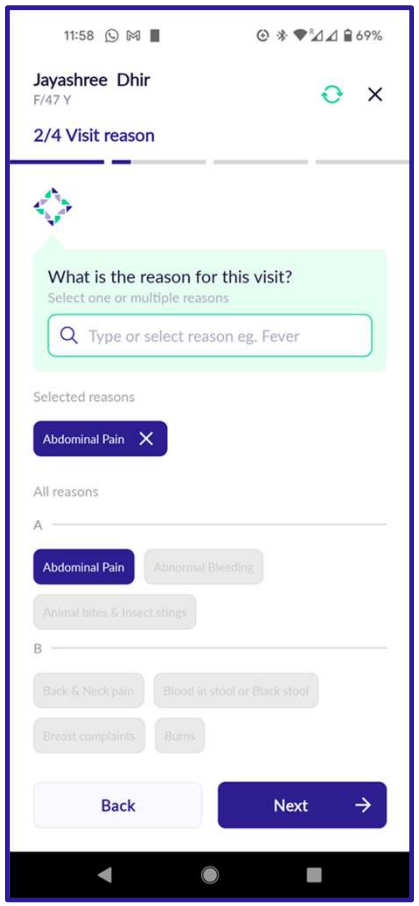
HOSTING & INFRASTRUCTURE

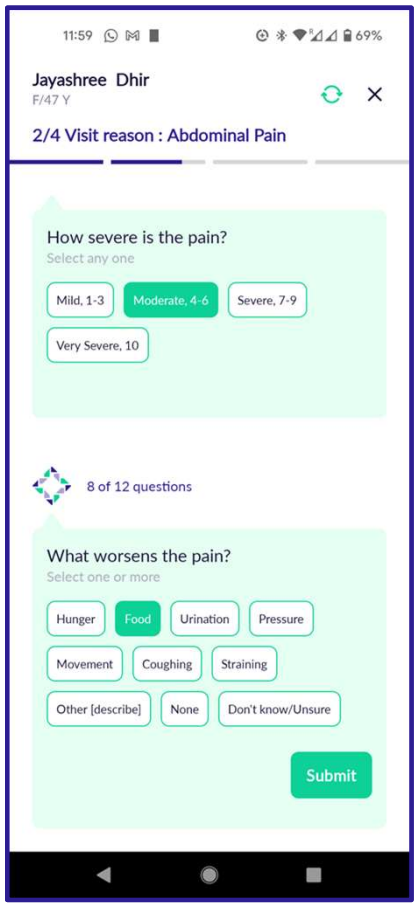
- Cloud-Agnostic Deployment
- Geographically Compliant Data Centers
- High Availability & Disaster Recovery
- Containerized Architecture

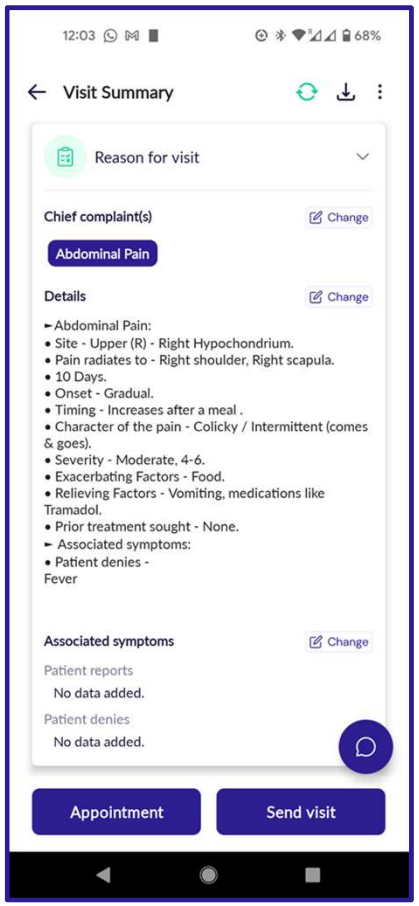
PRIVACY & COMPLIANCE

- FHIR & OpenHIE Standards Compliant
- Adheres to global and national healthcare data protection regulations.
- User Consent Management
- Data Anonymization & De-identification

Powered By A Digital Assistant To Support Task-Shifting







100+ Clinical Protocols

for history taking, physical examination and clinical decision support for common conditions.

15 Languages

Support health workers and patients with evidence-based workflows in their own language

AI-enabled Decision Support

Use the structured data from the assistant to train AI models for AI-enabled decision support

Configurable & Pluggable System Design

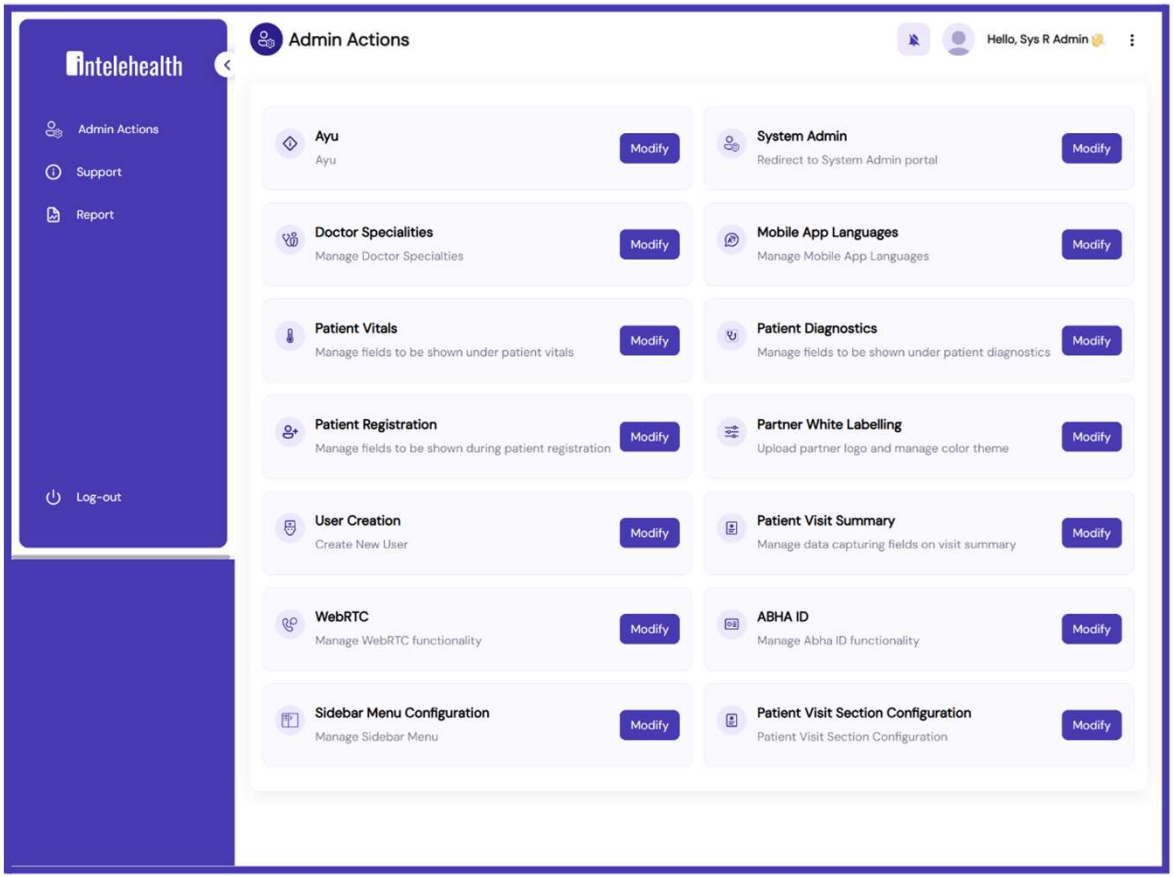
Configurability: Admin panel allows stakeholders to control feature visibility and inclusion in builds.

Pluggability: Modular integration via AAR (mobile) & JAR (web) enables dynamic, scalable feature management.

Configurable Features

Some of the key features that can be managed through the admin panel include:

- Doctor Specialties
- Patient Vitals
- Patient Registration
- Patient Visit Summary
- WebRTC
- Mobile App Languages
- Appointments
- Partner White Labeling
- Patient Visit Section Configuration, and more.



Interoperability - FHIR-Compatible & OpenHIE Standards Compliant

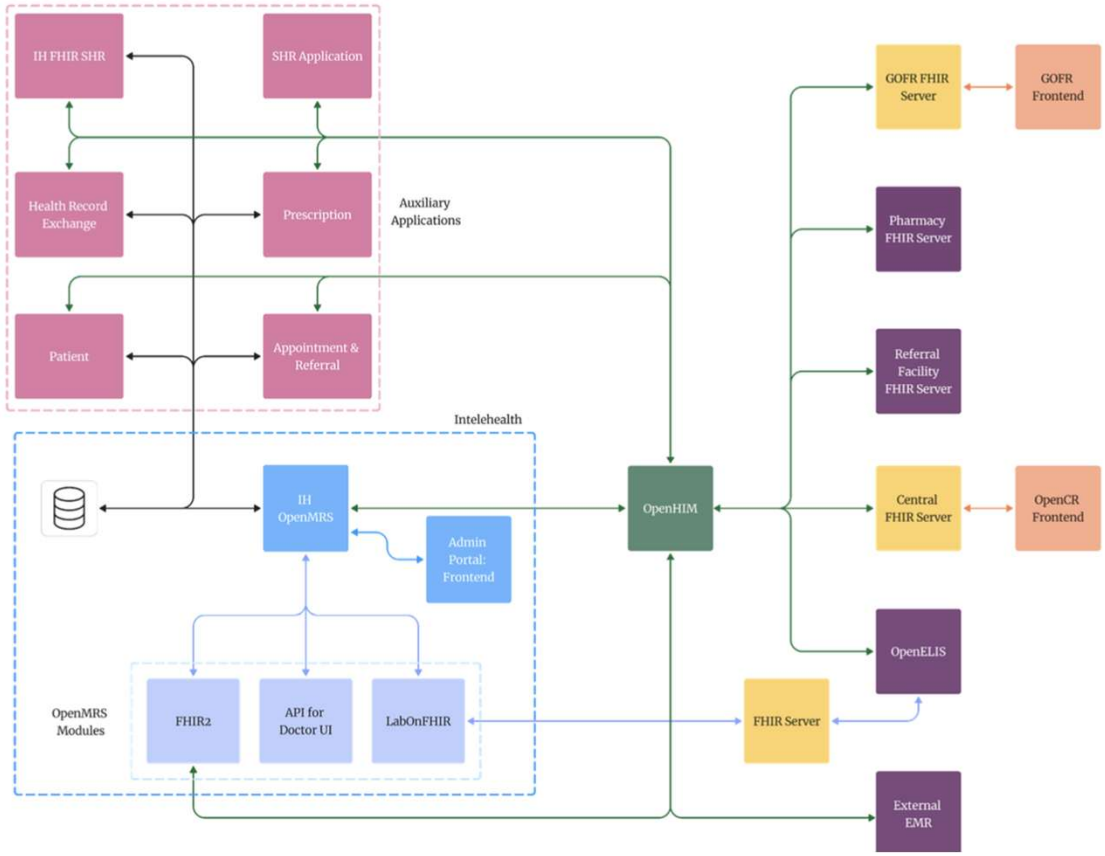
Interoperability: Uses FHIR & OpenHIE for seamless data exchange across healthcare systems.

Scalability: Supports 6 use cases, maximizing system connectivity.

Modular Design: Java microservices run independently, configurable via the Admin portal.

OpenHIM Middleware: Routes health data between source and target systems.

Lab Integration: LabOnFHIR in OpenMRS connects to FHIR servers linked to OpenELIS.



Tech Solutions Need Implementation Models

75% of telemedicine initiatives fail due to poor execution.

"The Intelehealth team increased the volume of teleconsultations by 5x."

Outreach & messaging to drive behavior change

Day-to-day operations support for tech adoption

Reporting to evaluate success

Monitoring progress via dashboards

Intelehealth Provides End-To-End Solutions From Implementation, Product, And Policy To Improve Healthcare

6 STEP-IMPLEMENTATION MODEL

Step 1: Program Design & Readiness

Step 2: Supply Side Strengthening

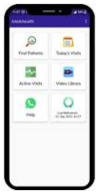
Step 3: Demand Side Strengthening

Step 4: Quality Assurance

Step 5: Monitoring Learning Evaluation

Step 6: Capacity Building

PRODUCT



Intelehealth Provider-to-Provider App
Connects lower level providers with higher level providers,
eg: health workers to GPs

Intelecare
Direct-to-Patient App
Home-based care video consultations with a remote doctor

Intelehelp
Direct-to-Patient Helpline
Creates virtual call centers to receive queries.

When partners utilize the eSanjeevani app, we help implement a similar process

POLICY ADVOCACY

- ✅ Effective Program Design
- ✅ Regulation of Telemedicine
- ✅ Financing Telemedicine
- ✅ Return on Investment Analysis
- ✅ Evaluation Frameworks for Telemedicine
- ✅ Policy Briefs for Effective Implementation

Achievements Till 2025

Completed more than 13M teleconsultations

>86 Mn population covered in India

Replicable & scalable model for training & implementation

Each teleconsultations saves $11 for patients

500,000 lines of codes & >150 features for mobile/web applications

Supported 18,000 HWs **and 10,000** doctors

Innovation lab to explore new processes, trainings & use of AI

Completed 30 projects majorly in 3 India States: **Jharkhand, Odisha and Karnataka**

Recognition And Value For Patients

Last year our work and data analyzed was highlighted in the Lok Sabha session by Dr. Mansukh L Mandaviya, Health & Family Welfare Minister stating

"One teleconsultation saves Rs 914 ($11) as it reduces travel for the patients and their family/friends"

✅ **80% of clients have improved health outcome**
✅ **Each visit saves them 21.59 km in travel**
✅ **9 in 10 women now get to care within 8 hours**
✅ **$1 invested in telemedicine gives a $19 ROI for health systems!**

Notes
(1) Study conducted with 300 patients in 2024
(2) Studies conducted with 2000 patients from 2018 to 2022
(3) Study conducted in Nashik with 200 women
(4) UN-WHO Report "Going Digital for Noncommunicable diseases: The Case for action"

Community Resources

Community Resources:

Click to check more details.

Github

Community Slack Channel

Intelehealth Wiki

Conclusion: Telemedicine Can Be A Crucial Role In LMIC's Through Transforming Health Equity

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WHO SEARO + Intelehealth webinar series

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Objectives:
Learn how telemedicine can address challenges and enhance health systems

Expected Outcomes:
By the end of the session, participants will:

- Gain a foundational understanding of telemedicine and its key components.
- Learn from successful case studies of national and sub-national public sector telemedicine implementations.
- Understand key policy and regulatory considerations for integrating telemedicine into national health systems.
- Be equipped with practical insights to explore and implement telemedicine solutions in your contexts.

Webinar Topics and Dates

Sno	Date	Topic
1	06 March 2025	What is Telemedicine and How Are Health Systems Using It Globally? A Primer for Health System Leaders
2	10 April, 2025	Brick-and-mortar to Brick-and-click - Designing & Implementing Quality, Effective, and Impactful Telemedicine Programs
3	08 May, 2025	Evaluating telemedicine interventions: Evidence so far, and Methodologies
4	5 June, 2025	Creating a Telemedicine-Ready Healthcare Workforce: Training for Healthcare Providers
5	10 July, 2025	Telemedicine Policy: How Telemedicine is Regulated in Asia
6	7 August, 2025	Choosing a Telemedicine Software: The case for standards-compliant, interoperable & open-source Digital Public Goods (DPGs)
7	11 September, 2025	Ensuring Quality of Care & Patient safety in Telemedicine
8	9 October, 2025	Telemedicine Adoption by Communities – How Might We Drive Uptake of Telemedicine (TM) by Citizens?
9	6 November, 2025	Artificial Intelligence and Machine Learning in Telemedicine
10	4 December, 2025	Financing Telemedicine and ROI – The Business Case for Telemedicine
11	8 January, 2026	Telemedicine use cases to advance the SDGs - Part 1 Applications for Non-Communicable Diseases (Diabetes, Hypertension, Cardiovascular disease, Cancer and Mental Health)
12	5 February, 2026	Telemedicine uses to advance the SDGs - Part 2 Applications for Communicable Diseases (Tuberculosis, HIV)
13	12 March, 2026	Telemedicine use cases to advance the SDGs - Part 3 Applications for Primary Healthcare

Webinar Evaluation and Feedback

Thank You for Attending!

Access the recording and slides at: https://intelehealth.org/webinars/

Please take a few minutes to fill out our feedback form – your input is invaluable!

https://forms.gle/h5q21Z9e3Q4VBADU8

Q&A Session

Thank You For Joining Us!

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