General Studies-2: Topic: Important aspects of governance, transparency and accountability, e-governance applications, models, successes, limitations, and potential; citizens charters, transparency & accountability and institutional and other measures.

Telemedicine in India

Introduction
- At the beginning of the lockdown, the government and industry came to realise that rapid technological adoption was the only way forward for stabilising the economy despite the disruptions.
- Among the many innovations, telemedicine has helped ensure that the healthcare system has not reached a breaking point.
- Telemedicine allows remote consultation, diagnosis, treatment, follow-up, monitoring and supervised treatment of patients and is primarily used to deliver healthcare services to remote regions.

Need for Telemedicine in India
- India faces an unequal distribution of doctors catering to its population.
- This gap has become even more evident during the Covid-19 pandemic.
- Positive health outcomes, especially for people with multiple co-morbidities related to chronic diseases is possible because of the availability of Telemedicine.
- It can allow physicians and patients to communicate 24×7.

Present Status
- Developments in telecommunication and broadband connectivity have enabled telemedicine consultations.
- Since the start of the pandemic, there has been a 500 per cent rise in telemedicine consultations, with 80 per cent of the users being debutants.
- Several private initiatives to build telemedicine capacities for pre-screening of Covid-19 also emerged.
- In response to the pandemic, many Low- and Middle-Income Countries (LMICs) expanded access to telemedicine to maintain essential medical care.

Access to NCD Treatment
- According to a WHO assessment, since the Covid outbreak, people living with non-communicable diseases (NCDs) have become more vulnerable to becoming severely ill or dying from the pandemic.
- In India, nearly 5.8 million people die from NCDs (heart and lung diseases, stroke, cancer, and diabetes) every year.
- So it becomes critically important to ensure that access to NCD treatments remains uninterrupted.

Government Efforts
- The Health Ministry and the NITI Aayog released Telemedicine Practice Guidelines 2020 to ensure that access to medical advice did not become a challenge.
- This allows the registered medical practitioners to use teleconsultation.
- The guidelines, coupled with the tele-consultation services — e-Sanjeevani and e-Sanjeevani OPD — have been used to effectively improve the delivery of health-care services.
- As of September 26, the teleconsultation platforms have been implemented in 23 States and the e-Sanjeevani OPD platform has completed a landmark milestone of 4 lakh teleconsultation.
India launched the DigiGaon—to make telemedicine accessible in villages.

Concerns / Challenges
- Digitally-captured sessions are prone to breach of patient confidentiality.
- In US, if the history of the telemedicine session is stored by a third party, the healthcare provider is required to have a business associate agreement (BAA) with the third party storing the data.
- This BAA must include methods used by the third party to ensure protection of data, and provisions for regular auditing of the data’s security.
- Such BAA clauses are absent in India’s telemedicine guidelines.
- The guidelines are silent about the responsibility and liability of intermediaries (such as WhatsApp or Skype).
- In rural areas, the biggest barrier is language, as in most of the telemedicine apps the options are in English and payments have to be made digitally.
- In India, connecting the rural areas with uninterrupted internet services is a challenge.

International Examples
- In the US, the Health Insurance Portability and Accountability Act (HIPAA) has specific provisions related to telemedicine.
- It states only authorised entities should have access to e-Personal Health Information (e-PHI) captured through telemedicine sessions.

Way Forward
- Doctors should only partner with platforms which follow protocols and have strict quality standards.
- The ideal model in rural areas could be having apps with local languages that people can easily understand.
- It is essential to continue to sustain Telemedicine services post the pandemic as they can help decrease accessibility costs to quality healthcare.
- Telemedicine guidelines must be revised to be on a par with global health data protection rules.
- Telemedicine has to be combined with artificial intelligence (AI) platform that can behave like an intelligent and knowledgeable assistant, then doctors’ productivity can improve dramatically.