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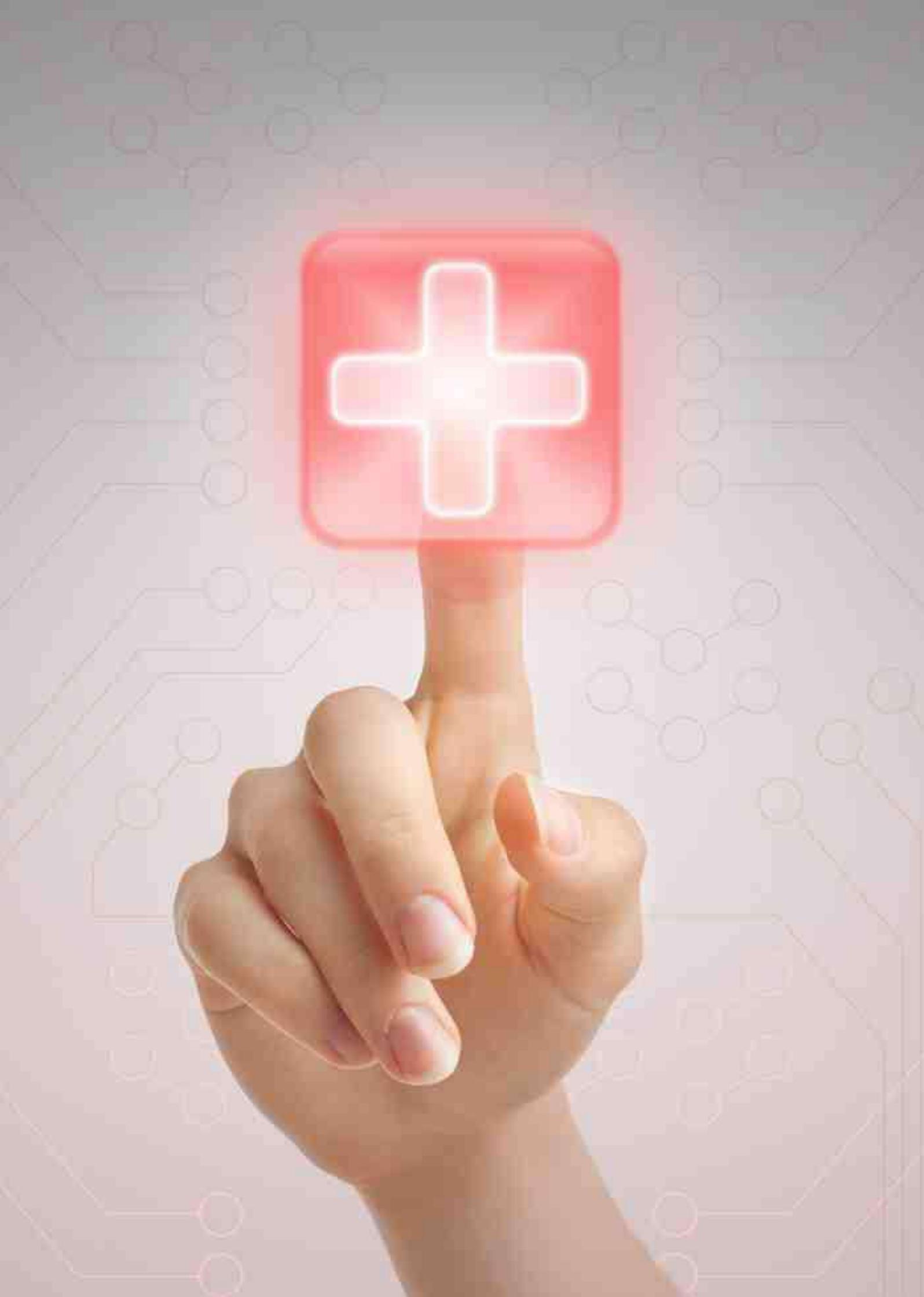
Confederation of Indian Industry  
125 Years: 1895-2020

# Tracking The Changing Trends

The way healthcare services  
are pursued by consumers &  
delivered by providers

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September 2020



## MESSAGE FROM CHAIRMAN, CII WR TASK FORCE ON HEALTHCARE



Joy Chakraborty  
Chairman - CII WR Task Force on Healthcare &  
COO - P D Hinduja Hospital

Covid-19 pandemic has transformed the healthcare delivery systems, be it the way these services are pursued by consumers or the innovative methods introduced by healthcare providers to serve consumers. In the post-COVID world, we could see technology playing major role in a way the way patients are treated.

Fast transforming technology, emergence of patient-centric care and personalised medicine, data generation and advances in predictive data analytics, range of care and precision medicine, have reformed India's healthcare ecosystem. Today, India is well- placed to transform hurdles into opportunities to provide inclusive healthcare and become the global player for disruptive innovations in healthcare.

Now time is appropriate to fast-track the tech-based healthcare delivery model through greater partnership between public and private sector, bringing in more investments in digital resources, and by adopting the innovation culture. In addition, the commencement of the recently announced National Digital Health Mission will further support and accelerate the changes.

We are at the forefront of IT revolution and are confident that technological advancements in the sector will now usher in a seamless platform to provide inclusive, accessible and affordable healthcare to all.

## PREFACE



Sumit Goel  
Co-Founder, Bravelily



Sachin Choudhary  
Co-Founder, Bravelily

In our living memory, Covid-19 is one of the worst pandemic that the world has faced. The spread and the scale of pandemic has stretched most healthcare systems to a point where conventional healthcare delivery models have become inadequate to serve the increased demand on healthcare capacities.

Over the last two decades, the advancement in telecommunications and information technology made our world digitally connected and ushered in multiple innovations in business models. Like any other crisis, Covid-19 has also become a catalyst for change. During the pandemic, with 'less contact' being the underlying mantra, healthcare too witnessed a wide adoption of digital technologies to not only halt the spread of virus, but also to address the usual healthcare needs and deliver care in alternate ways. Both patients and healthcare providers were quick to adapt to the unusual circumstances and found digitally enabled ways to address the healthcare needs.

The crisis provided an opportunity to reimagine healthcare – the way it is sought and the way it is delivered. However, a key question that remains is to what extent are these 'new ways' sustainable – will the advancement in adoption of digital healthcare snap back to the pre-Covid levels or will the healthcare move to a new normal?

In this report, we attempt to track and assess the changing behavioral trends – both of consumers and healthcare providers, which could set a direction for the digital healthcare to become integrated part of the healthcare infrastructure and delivery. We conducted a survey with ~200 consumers and ~50 small and large hospitals to check how they adapted and how they see the digital health future to unfold.

With National Digital Health Mission (NDHM) further providing the tail winds, we find all the reasons to believe that digital health would redefine future healthcare. The adoption of digital solutions would not be uniform. There would be quite a few issues related to business model and behavioral change that would need to be addressed. This challenge will provide many opportunities and call on the entrepreneurial spirits for multiple innovations.

We are grateful to CII-WR for providing us the opportunity to partner with them for this report. We are also grateful to all the respondents whose collective thoughts has helped us shape this report. We do hope that you will enjoy reading this report as much as we enjoyed developing it.

## A SHIFT TOWARDS 'LESS-CONTACT' SOCIETY

In a world that could be known as “After-Covid-2019”, we could see technology playing an enhanced role. This change shall be driven by reshaping of consumer behavior due to the surprisingly pleasant experience that they had with technology after being sort of ‘forced’ to use it.

The underlying theme of the technological transformation will revolve around creating business models for a ‘less-contact’ society – a concept that will be etched in the collective memory of our society.

Consumers have tried, experienced, and enjoyed (may be even resented) the convenience that technology offers. They also realize that digital solutions are about new possibilities and may not necessarily be a compromise – they are different but if rightly used, could be as or even more effective.

## GLOBALLY, DIGITAL HEALTH GOT A BOOST DURING COVID-19 PANDEMIC

Given the scale of pandemic, highly infectious nature of the virus and the resultant need for social distancing, there was widespread adoption of digital technologies to stop the spread and deliver healthcare in a “less contact” way (refer table below).

Digital intervention Areas	Functions	Digital Technology
<b>Tracking</b>	<ul style="list-style-type: none"> <li>Tracks disease activity in real time</li> </ul>	<ul style="list-style-type: none"> <li>Data dashboards</li> <li>Real-time data from smartphones and wearable technology</li> </ul>
<b>Screening for infection</b>	<ul style="list-style-type: none"> <li>Screens individuals and populations for disease</li> </ul>	<ul style="list-style-type: none"> <li>Digital thermometers</li> <li>Mobile phone applications</li> <li>Thermal cameras</li> <li>Web-based toolkits</li> </ul>
<b>Contact tracing</b>	<ul style="list-style-type: none"> <li>Identifies and tracks individuals who might have come into contact with an infected person</li> </ul>	<ul style="list-style-type: none"> <li>Mobile phone applications</li> <li>Real-time monitoring of mobile devices, GPS</li> <li>Wearable technology</li> </ul>
<b>Quarantine and self-isolation</b>	<ul style="list-style-type: none"> <li>Identifies and tracks infected individuals, and implements quarantine</li> </ul>	<ul style="list-style-type: none"> <li>Mobile phone applications</li> <li>Quick response code</li> <li>Home isolation-Covid management system</li> </ul>
<b>Clinical management</b>	<ul style="list-style-type: none"> <li>Diagnoses infected individuals</li> <li>Monitors clinical status</li> <li>Predicts clinical outcomes</li> <li>Provides capacity for telemedicine services and virtual care</li> </ul>	<ul style="list-style-type: none"> <li>Virtual care or telemedicine platforms</li> <li>Artificial intelligence for diagnostics</li> </ul>



# TRACKING THE POST COVID BEHAVIORAL TRENDS – THE WAY HEALTHCARE SERVICES ARE PURSUED BY CONSUMERS & DELIVERED BY PROVIDERS

Based on our primary survey, we identified seven key important takeaways that shall impact the way healthcare gets delivered. We analyze these seven points below:

## 1. Compelled to use and experience virtual consultation tools during the Covid-19 period, consumers are likely to continue using them in the future as well

This trend will be supported by four key factors:

### a) Significant number of people explored virtual consultation tools and many more expressed an intent to use them in the future

Number of respondents who used virtual consultation tools increased from 1 in 5 to 1 in 3. Importantly, 60% respondents expressed an intent to use the tele-consultation services in the future, when needed

Consumers to continue using Tele-Consultations

#### USE OF VIRTUAL CONSULTATION TOOLS (PATIENTS)

##### Pre-Covid



1 in 5

##### During-Covid



1 in 3

##### Intent to use even post-Covid



3 in 5

While the stated intent may not necessarily point to potential volumes, this does reflect an increased level of comfort with virtual consultation tools.

### b) Preference for less-contact health care solutions

More than 90% of the survey respondents mentioned that their biggest concern, even after the pandemic situation has eased out, would be the risk of acquiring the infection in case they must physically visit their doctor or a hospital. The concern, which shall remain in our collective memory, would propel the sustained usage of Tele-Consultation, and help retain a growth, though not in high double digits, in near future.

90% of the respondents, have risk of acquiring infection as their biggest concern

Hospitals would also have to devise appropriate operational strategies to ensure patient safety while not burdening the patient with additional costs.

### c) Healthcare providers have invested in virtual consultation systems and processes

**Agile response by healthcare providers:** During the pandemic, many healthcare providers were agile and took the initiative to implement Tele-Consultation solutions – be it Whatsapp/ Skype or third-party Tele-Consultation solutions with integrated workflow spanning appointment, online payment and web/mobile based video consultations.

PER CENT GROWTH IN PROVIDERS USING TELE-CONSULTATION TOOLS



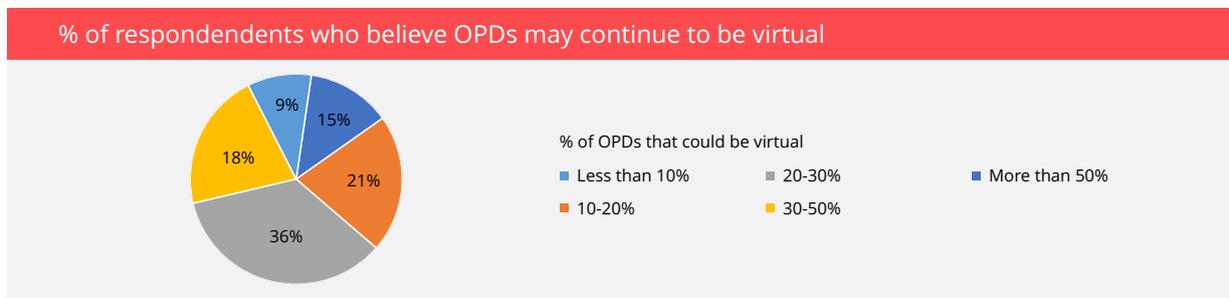
200%

**Need to rethink and re-implement tools for virtual consultation:** Most of these systems were implemented in a flurry at an early stage when the pandemic started. The solutions were not mature – technically and functionally, and difficult to integrate with existing IT systems.

**Multiple platforms, more complexity:** Doctors with individual practices view virtual consultation platforms as their digital marketing tool and are empaneled with multiple platforms, with each having their own technology infrastructure. This makes even the simple tasks of appointment and scheduling quite complex for these providers.

**Post pandemic, significant percentage of OPD consults would be virtual:** Most of the providers who took the survey believe that even after the pandemic situation has subsided, a significant percentage of OPD consults will be virtual. Hence, we expect healthcare providers to move to more mature platforms with stronger work flows, which can deliver a more seamless experience to their patients.

**PROVIDERS FEEL THAT VIRTUAL CONSULTS ARE HERE TO STAY**



**d) Most Tele-Consultations delivered a good experience, which could help sustain the momentum**

The biggest challenge for any new service is to make people try it. Covid gave the required nudge for consumers to try virtual tools for consultations. Most platforms were also quick to respond by offering first consultations to consumers at a discounted price. The positive experience that the consumers had is quite encouraging.

**EXPERIENCE DURING TELE-CONSULTATIONS:**

**3 in 4** respondent found the virtual experience as good or even better



**Percentage of Respondents Rating Experience As**

	Good	Better	Not Good
<b>Quality of interaction with doctor</b>	61	14	25
<b>Comfort and convenience</b>	47	32	21
<b>Simplicity of process</b>	60	26	14
<b>Overall Experience</b>	56	22	22

**At the same time, there are certain pockets of improvement in the whole process, which have been highlighted by the consumers:**

**Virtual meeting etiquettes:**

Virtual consultations, like online business meetings, require certain discipline – like being on time, informing about delays, meeting reschedules or cancellation. This requires a conscious effort by the clinicians and more sophisticated systems that enable digital waiting rooms for patients and delay / rescheduling alerts.

**Advance payments not preferred:**

Most teleconsultation workflows require advance payments and have stringent refund policies, which patients are uncomfortable with.

**2. Tele-Consultations increased exponentially in Metros, but response in non-metro cities appear lukewarm**

Even while number of hospitals in non-metros which implemented Tele-Consultations tool increased by ~200%, there was a lukewarm response from the patients. The service utilizations were low.

200%-Growth in number of hospitals implementing Tele-Consultation tools

**PERCENTAGE INCREASE IN NUMBER OF VIRTUAL CONSULTATIONS (CONSUMERS):**



This observation is also supported from the feedback received from doctors and hospitals in non-metro cities where they confirm about not receiving an equally enthusiastic response for Tele-Consultation services. Among many, key reasons cited were:

**Little pressing need:** There were fewer Covid cases as compared to Metros in the early phase and unlocking process starting much earlier

**Digital consultation was always free:** Many patients were used to consulting with their doctors on call and messages for free. The propensity to pay for consultations which were not in-person and non in-clinic was low.

**Tele-consult solutions appearing complicated:** Most consumers expect same level of ease of use as a 'whatsapp' call. Requirement to download multiple applications, expectations of advance payments for consultation and non-availability of option to navigate in local language adversely affects the adoption

**Quality and privacy issues:** Basic smart phones coupled with network quality issues, hesitation to appear on video calls with background of their homes

# PATIENT - EXPECTED POST COVID BEHAVIOURAL TRENDS

## VIRTUAL HEALTH TO FUEL GROWTH



### Key Drivers

- Preference for less contact healthcare solutions
- Risk of acquiring infections
- Significant cost advantage
- Time saving and opportunity costs

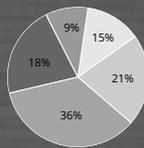
### Key Challenges

- Solution fitment and maturity
- Multiple platform, more complexity
- Virtual meeting disciplines from both sides
- Advance payment not preferred

### Providers feel that virtual consult is here to stay

% of OPDs that could be virtual

- Less than 10%
- 10-20%
- More than 50%
- 20-30%
- 30-50%



 3 in 4 respondent found the virtual experience as good or even better



### Tele-Consultation Growth



### 3. Comfort with care provider / doctors would remain important factors for any video consultation model

While adoption of Tele-Consultation has improved, and there is a willingness to adopt tele consulting in the future, concerns related to correct diagnosis, doctor's credentials and quality of advice would remain.

Comfort with care provider and doctor an important factor

#### TOP CONCERNS RELATED TO TELE-CONSULTATIONS:

Concern	% Respondents Ranking the concern as one of top 3 concerns
Risk of inadequate or incorrect diagnosis / Quality of doctor's advice	65
Not being familiar with the credentials of the doctor available online	51
Doctor who is online may be in some other city -- would not be able to follow-up in person at the clinic, if needed	46
Privacy during and after consultation process	18
Security of data shared with doctor or online platform	17
Concerns about process or use of technology	14
Need to deposit fees in advance	11
Not comfortable with English	3

*(Since respondents chose and ranked top-3 concerns, the aggregate per cent would be more than 100)*

The three top concerns are quite fundamental in nature to the core concept of Tele-Consultation. Most of the Tele-Consultation platforms have tried to address these concerns in their own way, be it through patient ratings, or dynamically positioning a doctor as per patient search, or presenting credentials of the doctor, etc.

This also presents an opportunity to have different business models which address these concerns and ability to differentiate in the increasingly crowded market.



*Use cases where doctor and patient already had in-clinic interaction had better acceptability – so did second opinions, where doctor’s established reputation and comprehensive workflows, reduce the perceived risk of incorrect diagnosis*

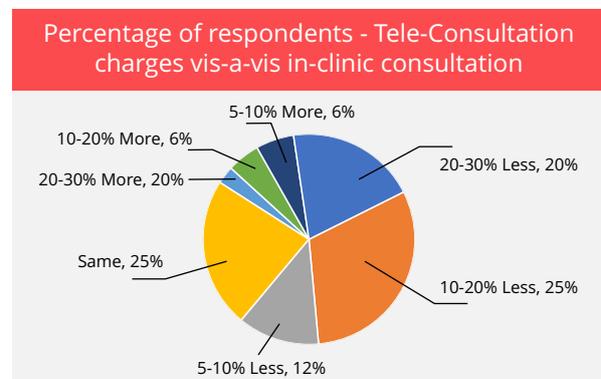
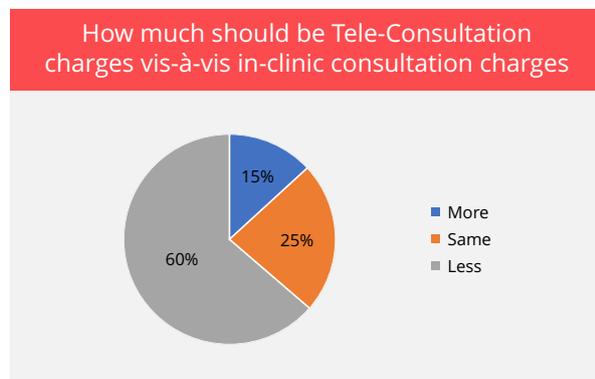
Stage of clinical intervention	Not comfortable	Somewhat comfortable	Very comfortable	Comments
Emergency	<b>52%</b>	24%	24%	<ul style="list-style-type: none"> <li>In case of emergency, understandably, half the people were comfortable to use tele-consultation services, possibly to offer some first aid till expert care can be provided</li> </ul>
New illness requiring urgent care - would require consulting a doctor within a day	<b>45%</b>	34%	21%	<ul style="list-style-type: none"> <li>In case of urgent and acute care, half the respondents were not comfortable due to high concern of incorrect diagnosis.</li> <li>Left with little choice during Covid, people would have adopted Tele Consultation for such cases, but post Covid, sustaining these could be difficult</li> </ul>
New illness not requiring urgent care - can wait few days for appointment	18%	<b>54%</b>	27%	<ul style="list-style-type: none"> <li>Since patients would get more time make a choice of the doctors they would like to consult, the discomfort level is comparatively low vis-à-vis cases requiring urgent care</li> </ul>
Follow-up consultation (after initially seeing the doctor in-person at clinic)	7%	33%	<b>60%</b>	<ul style="list-style-type: none"> <li>Patients have been Tele-Consulting (mostly without any charges) with their clinicians for follow-up / periodic care / second opinions and so the level of comfort expressed is high</li> <li>Tele-consultation work flows targeted at these use cases would find higher acceptability</li> </ul>
Regular periodic care (e.g. for diabetes, cardiac ailment, etc)	15%	34%	<b>51%</b>	
Second opinions (consulting some other specialist for additional advice)	23%	<b>42%</b>	<b>35%</b>	

#### 4. Consumers still expect that charges for Tele-Consultation should be lesser than in-clinic consultation

Consultations using virtual tools provide the patient an option to avail care conveniently and without incurring costs on transport. Still, 60% of the respondents felt that charges for tele-consultation should be less as compared to charges for in-clinic consultation. There were three key reasons cited:

Expectation is that Tele-Consultations should be cheaper than in-clinic consultations

- 1) **Virtual consultation is not same as in-clinic consultation:** hence the charges should be lower
- 2) **Doctor also saves time in commute and can use the time more productively:** Therefore, some discount should be passed on to the patient
- 3) **Many Tele-Consultation platforms are already offering a discount:** A similar discount is expected from all doctors offering Tele-Consultation services



The problem is of balancing costs - cost of technology and infrastructure, fulfilling justified commercial interests of all stakeholders involved in the service delivery process (specialist doctors, network provider, local medical practitioners, others); right pricing the services - so that it is attractive to payer, while at the same time ensuring financial.

Unlike US, where Tele-Consultations are selectively covered under health insurance, in India, out-patient consultation are mostly not covered under any health insurance. Individuals pay out of their own pockets and hence expectation is for Tele-Consultations to be reasonably priced.



## 5. Healthcare providers are taking steps to integrate tele-medicine and virtual health into end-to-end patient care pathways

Beyond current pathways, tele-health concept would be woven into new products and services as well- e.g. care pathways which avoids hospital visits but without loss of revenue to hospital and saves time and money to the patients. The focus can be on different patient cohorts such as post-discharge cases, patients suffering from chronic ailments, patients ailing from mental health issues.

We are helping some of our clients integrate virtual visits in post-discharge care protocols and setting up tele-health networks to avoid non-essential travel by patients.

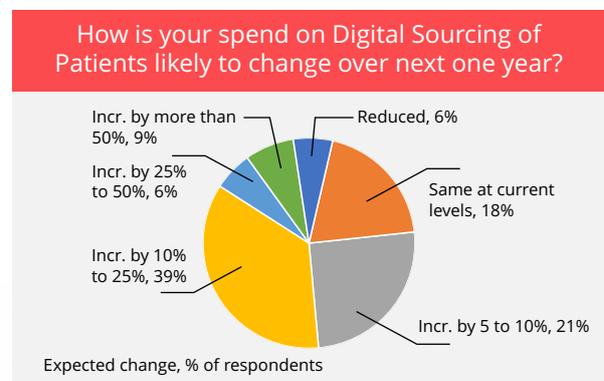
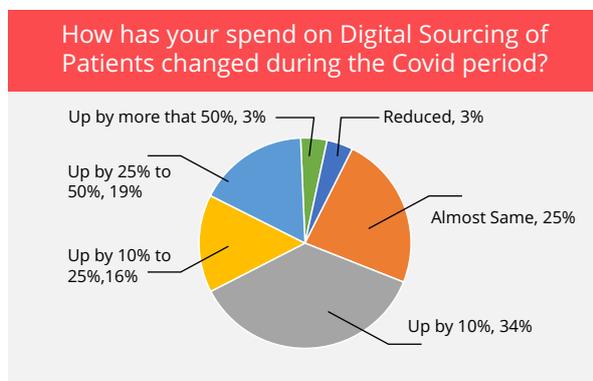


Amazon has launched Amazon.care – which combines the best of both virtual and in-patient care. It combines the concept of digital first services where first port of call is video call or a text chat with care providers. In case a physical examination or a home visit is required, a mobile nurse is dispatched to office / home. They come prepared with things needed for the visit. Prescribed medicines are dispatched to office / home by a delivery courier. For the services, Amazon has tied up with a medical care organization to deliver the services

## 6. Spend on digital sourcing of patients to increase

During the Covid-19 pandemic, movement of people got restricted and conventional methods of sourcing patients were rendered in-effective. This also led to many providers sharpening their strategies to digitally source patients and investing more on digital campaigns.

Buoyed by the success of digital campaigns and with end of pandemic nowhere in sight, most providers intend to spend more in the near future to digitally source the patients.



## DIGITAL SOURCING AND ENGAGING PATIENTS

### THE PATIENT JOURNEY



*Patients consult a multitude of sources throughout their journey*

#### Digital Drivers

- Increasing participation of prospects on social platforms
- Improved returns on investment (ROI)
- Significant marketing Cost benefits
- Customized and targeted communication
- Relevant content sharing

## 7. Greater propensity to adopt the digital future

Over the past 6 months, not only did Covid-19 pandemic nudge the healthcare providers to adopt digital technologies, but also the recently announced implementation of National Digital Health Mission (NDHM) shall propel them to fast track implementation of digital technologies.

In our primary survey with healthcare providers, we asked them that with digital health likely to gain increasing focus going forward, of the identified 14 areas of digital intervention, which are the top areas in terms of importance and priority for your hospital.

Areas for digital intervention	% respondents ranking it in top 7	% respondents ranking it in top 3	Category
Electronic patient records (in OPD)	55%	27%	Clinical Ops
Online access to personal health records	52%	24%	Patient Centric
Online appointments and scheduling	48%	27%	Patient Centric
Tech to improve patient experience	45%	33%	Patient Centric
Remote patient monitoring with interventions	36%	24%	Tele-health
Electronic patient records (in IPD)	36%	24%	Clinical Ops
Tech for better patient engagement	36%	15%	Patient Centric
Analytics for sharper business insights	30%	12%	Business Efficiency
Virtual visits and imbining them in patient pathways	21%	15%	Tele-health

Others: E-triage, Tele-Training, Tech to enhance patient empowerment, AI and ML for clinical support, Tech to boost provider efficiency

**Intent supported by budget:** Most providers stated their intention to increase their budget for implementing their digital technologies of interest – ~65% respondents stated that they would be increasing their budget by 50-100% while 20% of respondents would like to double it given the importance for them.



## SUMMARY:

### TRENDS THAT COULD TRANSCEND THE TRADITIONAL BOUNDARIES

Trends	Initiatives that we could witness in the near future (next 2 years)
<p>Preference for less-contact healthcare solutions</p>	<ul style="list-style-type: none"> <li> <b>Acceleration towards “Digital First” future with introduction of Digital ‘Front Door’ tools</b>                      The approach for healthcare provider would be to extend access to services beyond own ‘brick and mortar’ facilities to where its patients live. The aim would be to digitally support the various points in the patient’s journey making it more <b>empathetic while providing both flexibility and convenience.</b> </li> <li> <b>Integration of tele-medicine and virtual health into end-to-end patient care pathways</b>                      Beyond current pathways, tele-health concept is being woven into new products and services as well- e.g. care pathways which avoids hospital visits but is a win-win for both the hospital and its patients.                       Some of the patient cohorts being focused upon include post-discharge cases, patients suffering from chronic ailments, patients ailing from mental health issues                 </li> <li> <b>Health management @ Home – a move from ‘hospitals’ to ‘home-itals’</b>                      We could see more initiatives where the split in care becomes more normal – ‘sick-care’ in hospitals and ‘healthcare’ mostly at home                       The focus would be on disease management, with special focus on chronic ailments, connected home diagnostic and examination tools, virtual health management services and even dialysis at home                 </li> </ul>
<p>Tele-consultation is here to stay – consumers have an intent to use and providers have invested</p>	<ul style="list-style-type: none"> <li> <b>Emergence of white labeled integrated Tele-Health platforms</b>                      There is “app fatigue” – both for doctors and patients. A doctor may be empaneled with multiple platforms, and patients are also expected to download multiple apps. Often core functionality differs a little, but managing multiple apps become operationally unpleasant.                       For example, a doctor with multiple apps – each working independent of each other, finds it difficult to manage appointments and patient’s medical records.                       Soon we could see white labeled ‘tele-health platforms’ offering comprehensive suite of services (consultations, diagnostics, pharmacy, etc.) to providers and health-tech companies on top of which they can make their own work flows                 </li> </ul>
<p>Managing consumer expectations, especially related to charges for Tele-Consultation services</p>	<ul style="list-style-type: none"> <li>                     Business models would need to be tweaked to address pricing concerns for both consumers and doctors.                 </li> <li> <b>View ‘long term value’ from a customer and not the transaction value</b> This would require providers to build capability to deliver services, outside the own physical boundaries, at patient’s home (home care) – these could include home pick-up for diagnostics, medicine delivery at home or providing care at home                 </li> <li> <b>Bundling of Tele-Consultation services</b> within reimbursement package in consultation with relevant stakeholders                 </li> </ul>
<p>Acceptance of virtual consultation tools in non-metros is yet to pick up</p>	<ul style="list-style-type: none"> <li>                     With value proposition around convenience, access and personal safety, acceptance of Tele-Consultation should increase in non-metros as well  <b>Development of products, services and business models aligned with the characteristics of non-metro markets</b> </li> </ul>

	<p><i>Examples (could be applicable to metros as well):</i></p> <table border="1"> <thead> <tr> <th>Considerations</th> <th>Illustrative examples</th> </tr> </thead> <tbody> <tr> <td>Basic level mobile / computer equipment and patchy network</td> <td> <ul style="list-style-type: none"> <li>• Telehealth networks with primary focus on follow-up / disease management / continuum of care</li> </ul> </td> </tr> <tr> <td>Digital literacy</td> <td> <ul style="list-style-type: none"> <li>• Easy to understand guided work flows in local language</li> </ul> </td> </tr> <tr> <td>Payment models – comfort with advance and online payment</td> <td> <ul style="list-style-type: none"> <li>• Consult now – pay later’ - Credit facility for regular patients Delay collection of charges to the extent possible</li> </ul> </td> </tr> </tbody> </table>	Considerations	Illustrative examples	Basic level mobile / computer equipment and patchy network	<ul style="list-style-type: none"> <li>• Telehealth networks with primary focus on follow-up / disease management / continuum of care</li> </ul>	Digital literacy	<ul style="list-style-type: none"> <li>• Easy to understand guided work flows in local language</li> </ul>	Payment models – comfort with advance and online payment	<ul style="list-style-type: none"> <li>• Consult now – pay later’ - Credit facility for regular patients Delay collection of charges to the extent possible</li> </ul>
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<p>Focus on digital sourcing to win in the marketplace</p>	<ul style="list-style-type: none"> <li>• Winning in the market based on digital sourcing – ‘consumers to patients’ and ‘your patients to your ambassadors’</li> </ul> <div style="display: flex; justify-content: space-between;"> <div style="background-color: #f9f9f9; padding: 10px; border: 1px solid #ccc;"> <p><b>Consumers to Patients</b></p> <p>Discovery: SEO</p> <p><b>Engaging Content:</b> Patient centric Websites, AI enabled chat-bots</p> <p><b>Convenience and flexibility:</b> DIV features, e.g., online appointments</p> <p><b>Lead management:</b> Camp management</p> </div> <div style="background-color: #e91e63; color: white; padding: 10px; border: 1px solid #ccc;"> <p><b>Your patient to your ambassadors</b></p> <p><b>Experience management:</b> Auto feedbacks, Digitally enabled action work flows, reputation management, AI enabled insight generator</p> <p><b>Relevant engagement:</b> Personalized engagement with relevant content.</p> <p><b>Care management:</b> before, during and after hospitalization, long term care assistance</p> </div> </div>								
<p>Greater propensity to adopt the digital future</p>	<ul style="list-style-type: none"> <li>• We should see most providers investing in digital technologies to keep in tune with changing consumer expectations, extending servicing capabilities beyond physical boundaries, venturing into realizing immense business value through digitized clinical data.</li> </ul> <table border="1"> <thead> <tr> <th>Clinical Ops</th> <th>Tele-health</th> </tr> </thead> <tbody> <tr> <td> <ul style="list-style-type: none"> <li>• <b>Electronic patient records (in OPD):</b> <ul style="list-style-type: none"> <li>• Core building block for digital health under NDHM</li> <li>• Relatively easier to implement as compared to EMR in IPD</li> <li>• E-prescription is legal and acceptable</li> </ul> </li> <li>Challenges to address:               <ul style="list-style-type: none"> <li>• Most EMR are not designed prioritizing doctor’s convenience and simplicity in user interaction</li> <li>• Should take as much or lesser time than writing a manual prescription</li> </ul> </li> </ul> </td> <td> <ul style="list-style-type: none"> <li>• <b>Virtual visits and imbining them in patient pathways</b> <ul style="list-style-type: none"> <li>• During Covid, most healthcare providers implemented available virtual consultation tool – many of them were not mature software products – technically and functionally</li> <li>• Providers need to review care pathways and imbibe virtual care as a core component, e.g. for disease management, post-surgery care</li> </ul> </li> </ul> </td> </tr> <tr> <td> <ul style="list-style-type: none"> <li>• <b>Electronic patient records (in IPD):</b> <ul style="list-style-type: none"> <li>• Core building block for digital health under NDHM</li> <li>• Few mature systems</li> <li>• Can be complex and difficult to implement</li> </ul> </li> <li>Business case justifying the investment and effort to be well thought through</li> </ul> </td> <td> <ul style="list-style-type: none"> <li>• <b>Remote patient monitoring with interventions</b> <ul style="list-style-type: none"> <li>• Such tools can help hospitals not only deliver better care, but also reposition them as health-care centers rather than sick-care centers. E.g. Connected devices (e.g. wearable / home care devices) given to patients delivering vital parameters and critical alerts to care-givers</li> </ul> </li> </ul> </td> </tr> </tbody> </table>	Clinical Ops	Tele-health	<ul style="list-style-type: none"> <li>• <b>Electronic patient records (in OPD):</b> <ul style="list-style-type: none"> <li>• Core building block for digital health under NDHM</li> <li>• Relatively easier to implement as compared to EMR in IPD</li> <li>• E-prescription is legal and acceptable</li> </ul> </li> <li>Challenges to address:               <ul style="list-style-type: none"> <li>• Most EMR are not designed prioritizing doctor’s convenience and simplicity in user interaction</li> <li>• Should take as much or lesser time than writing a manual prescription</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• <b>Virtual visits and imbining them in patient pathways</b> <ul style="list-style-type: none"> <li>• During Covid, most healthcare providers implemented available virtual consultation tool – many of them were not mature software products – technically and functionally</li> <li>• Providers need to review care pathways and imbibe virtual care as a core component, e.g. for disease management, post-surgery care</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• <b>Electronic patient records (in IPD):</b> <ul style="list-style-type: none"> <li>• Core building block for digital health under NDHM</li> <li>• Few mature systems</li> <li>• Can be complex and difficult to implement</li> </ul> </li> <li>Business case justifying the investment and effort to be well thought through</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Remote patient monitoring with interventions</b> <ul style="list-style-type: none"> <li>• Such tools can help hospitals not only deliver better care, but also reposition them as health-care centers rather than sick-care centers. E.g. Connected devices (e.g. wearable / home care devices) given to patients delivering vital parameters and critical alerts to care-givers</li> </ul> </li> </ul>		
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Patient Centricity	Business Efficiency
<ul style="list-style-type: none"> <li>• Core focus with largest number of priority areas selected under this category</li> <li>• Consumer expectations are influenced by convenience and engagement offered by other industries, specially the financial sector. They expect a similar level of experience from service providers in other domains as well</li> <li>• Going forward, providers seem to focus on technologies to engage better with patients (focus on experience and engagement) and provide them better convenience (appointment and scheduling, online access to patient records)</li> </ul>	<ul style="list-style-type: none"> <li>• Analytics for sharper business insights</li> <li>• There are multiple areas where use of advanced analytics can provide hospital management with actionable operational and strategic insights.</li> <li>• E.g. Analyzing clinical variations to reduce cost of care, patient feedback analysis, patient and clinical data analysis to identify distinct patient cohorts for better engagement</li> </ul>

## ABOUT BRAVELILY



Bravelily is a business solutions company that bring together our cutting-edge technology products and expert insights to “help you grow”.The Company aims to help healthcare providers deliver differentiated set services to millions of their customers and thereby improve their collective revenue by a billion.

As a Company, we strive to continuously curate new solutions to address complex business issues and help clients discover hidden ‘nuggets of gold’ within and outside their operations. Importantly, we offer customized, affordable, and innovative pricing models with an aim that our solutions should pay for themselves.

We offer solutions around the three themes:

### **Enabling healthcare anywhere – delivering care at the ‘Third Place’**

- Care @ Third place (Homecare & Tele-Consultation)
- Covid Home isolation
- Second opinions

### **Convert customers into ambassadors**

- Automated feedback with AI driven actionable insights
- Innovative Service Request Management – Elevating service levels and delivering delight
- Managing patient experience digitally

### **Realize patient life-time value**

- E-prescription: an ML enabled EMR supplemented by unique and powerful clinical analytics
- Powerful engagement management tool with intelligent Chat bots

## OUR LEADERSHIP TEAM:

**Sumit Goel** comes with 20+ years of consulting career spanning 16 years in management consulting and 5 years in IT. During this tenure, he has done extensive work across Healthcare, Technology, Analytics, and Transaction Advisory. In his last role as Partner at KPMG India, he was leading the firm’s healthcare consulting practice .He is a graduate from IIT Delhi and MBA from S.P Jain Institute of Management, Mumbai.

**Sachin Chaudhary** comes with rich hospital operation background, had been CEO of a leading hospital chain. Prior to which he worked in leadership positions with Genpact, Infosys and EY in their healthcare practice. He is an Executive MBA from IIMC and MBA in Hospital Administration from IMS Indore

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## ABOUT HashTAGit



An award-winning, media agency founded in 2013. HashTAGit is one of the leading digital marketing agencies with offices at Delhi, Mumbai and Bangalore. HashTAGit is a Trusted digital & advertising partner for some of the leading brands in India. Our Industry-specific approach differentiates us from other companies in the space.

We have a dedicated practice and customized solutions for Healthcare, Education, FMCG, Solar, Retail, Startups and Wellness Industry. Being a **Google Partner** and having been awarded **“Deloitte fastest 50 India”, “Deloitte fastest 50 Asia-Pac”, “Top 20 Google Technological Solution Providers 2017”** by CIO review and **“Top 50 Start-ups to Watch in India 2018”**, today, HashTAGit is the most sought-after digital marketing agency. Since our foundation in 2013, our goal has been to use digital technology to create experiences.



Since, our inception, we have worked with some marquee brands, leadership reflects in our credentials:

- 100+ healthcare clients across Digital & Branding
- 20+ hospital launched, including 3 international hospitals
- 2000+ healthcare campaign with 20,000 plus creatives

We at HashTAGit, believes that in order to succeed in the crowded digital world, it is important to have the subject knowledge, innovation quotient, fearless attitude and content expertise which have been our forte and has set us apart from the herd.

### Key Services

- Revenues Enhancement
- Digital Marketing
- Branding and advertisement
- Video Production & Short films
- Website development

**Digital & Branding Partner to  
100+ Healthcare Clients**



Designed by: Creative Team [Akansha Chandel, Gauraav Gupta & Rahul Sharma]

## ABOUT CII



Confederation of Indian Industry  
125 Years: 1895-2020

The Confederation of Indian Industry (CII) works to create and sustain an environment conducive to the development of India, partnering industry, Government and civil society, through advisory and consultative processes.

For 125 years, CII has been working on shaping India's development journey and, this year, more than ever before, it will continue to proactively transform Indian industry's engagement in national development.

CII is a non-government, not-for-profit, industry-led and industry-managed organization, with about 9100 members from the private as well as public sectors, including SMEs and MNCs, and an indirect membership of over 300,000 enterprises from 288 national and regional sectoral industry bodies.

CII charts change by working closely with Government on policy issues, interfacing with thought leaders, and enhancing efficiency, competitiveness and business opportunities for industry through a range of specialized services and strategic global linkages. It also provides a platform for consensus-building and networking on key issues.

Extending its agenda beyond business, CII assists industry to identify and execute corporate citizenship programmes. Partnerships with civil society organizations carry forward corporate initiatives for integrated and inclusive development across diverse domains including affirmative action, livelihoods, diversity management, skill development, empowerment of women, and sustainable development, to name a few.

With the Theme for 2020-21 as Building India for a New World: Lives, Livelihood, Growth, CII will work with Government and industry to bring back growth to the economy and mitigate the enormous human cost of the pandemic by protecting jobs and livelihoods.

With 68 offices, including 10 Centres of Excellence, in India, and 9 overseas offices in Australia, China, Egypt, Germany, Indonesia, Singapore, UAE, UK, and USA, as well as institutional partnerships with 394 counterpart organizations in 133 countries, CII serves as a reference point for Indian industry and the international business community.

### Confederation of Indian Industry

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Reach us via our Membership Helpline: 00-91-99104 46244  
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