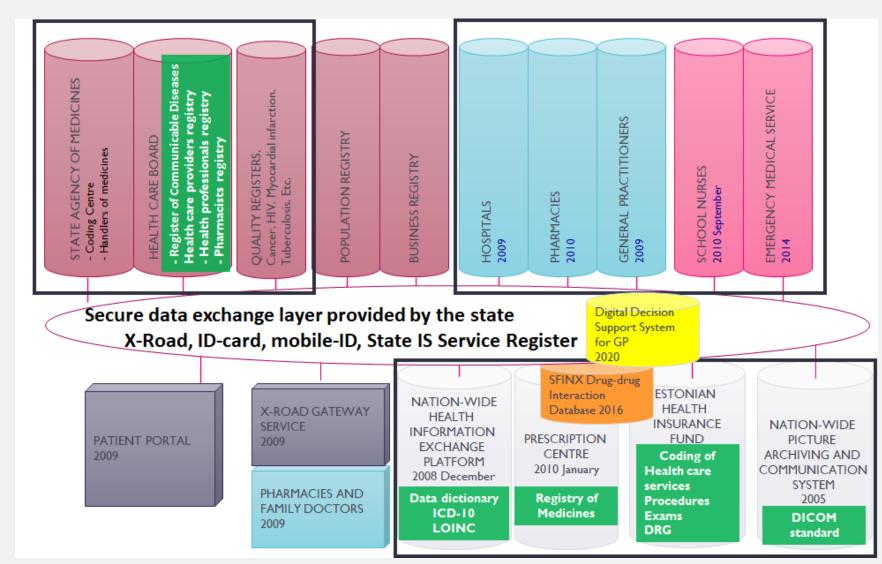


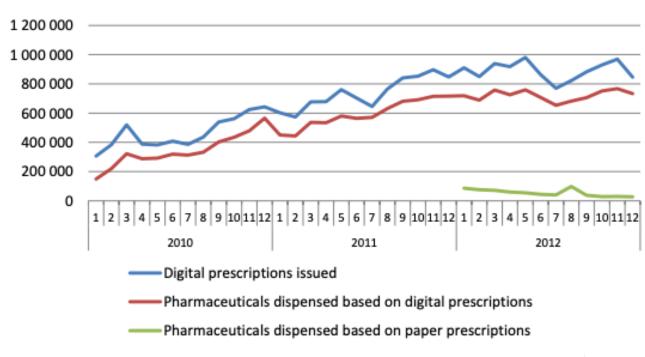
Health Information System runs on the busiest highway: x-road



- + open source data exchange layer
- + decentralised and distributed network

Star service #1 e-prescribing

the strongest identity since 2002



> Inform Health Soc Care. 2016;41(1):78-95. doi: 10.3109/17538157.2014.948170. Epub 2014 Aug 12.

An evaluation of e-prescribing at a national level

Liisa Parv ¹, Priit Kruus ², Kaie Mõtte ³, Peeter Ross ¹

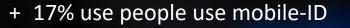
Affiliations + expand
PMID: 25115948 DOI: 10.3109/17538157.2014.948170

View-full text

2 View co-citations







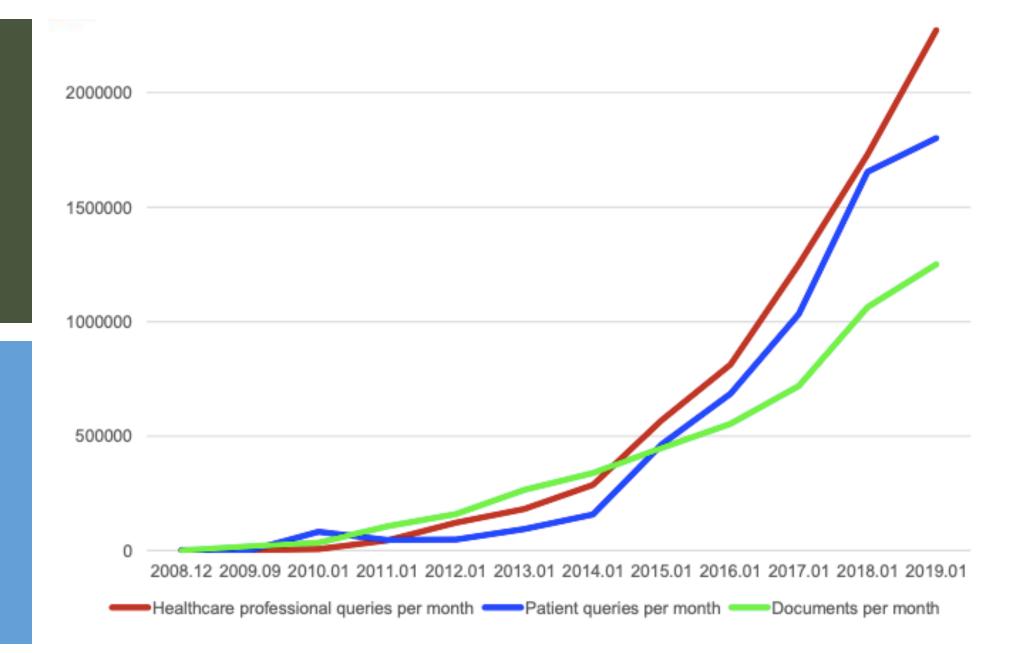
+ 34% use smart-ID



+ electronic ID is compulsory

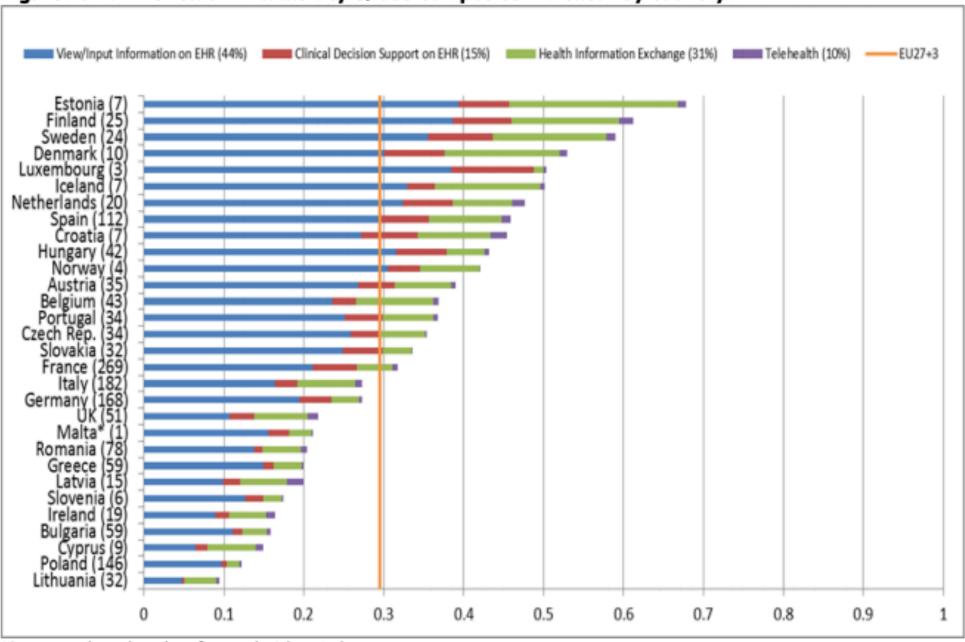
+ 70% use ID-card regularly

#2 Health information exchange



By Ross et al

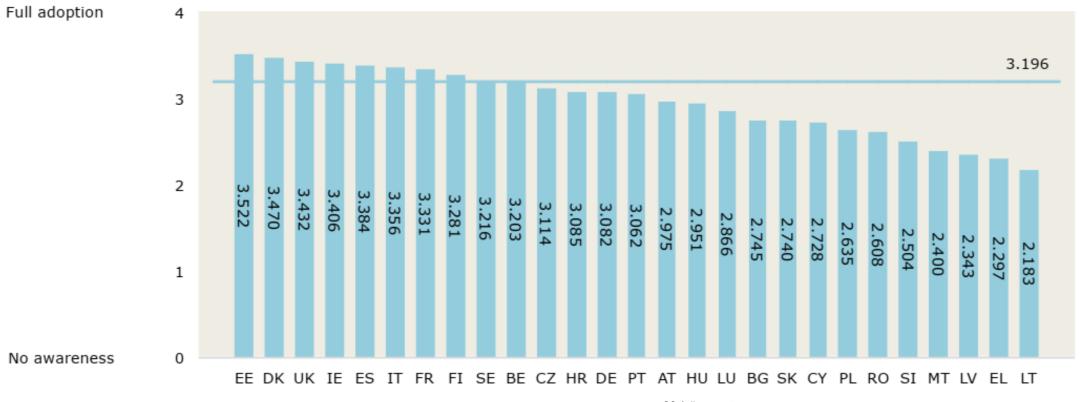
Figure 4: 2012 eHealth Availability & Use composite indicator by country⁸

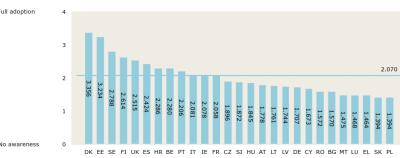


^{*}Scores are based on data from only 1 hospital.

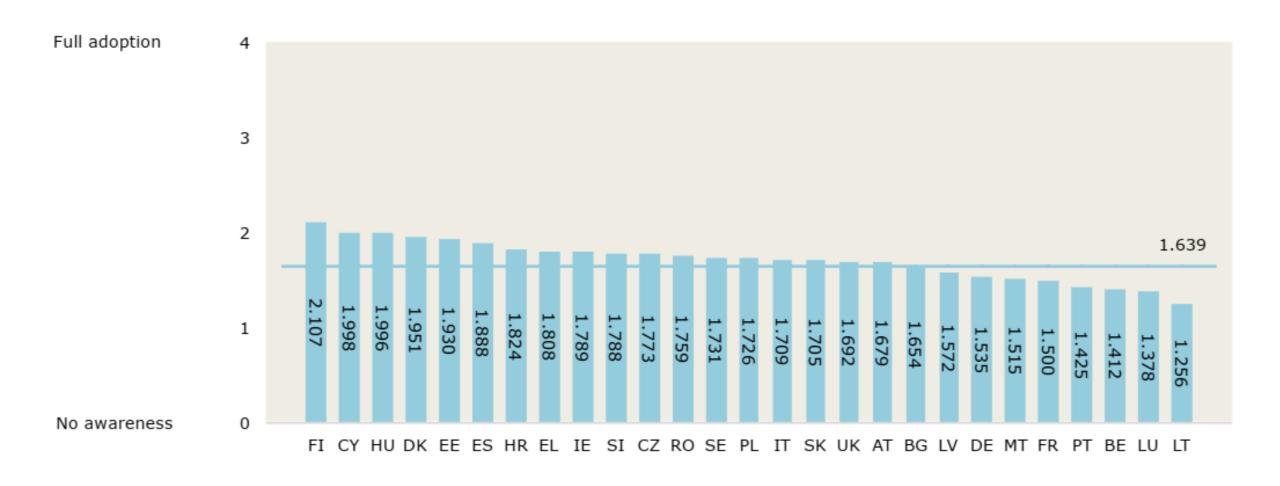
Benchmarking Deployment of e-Health among General Practitioners.

EU (2018) – EHR (1^{st}) and HIE (2^{nd})

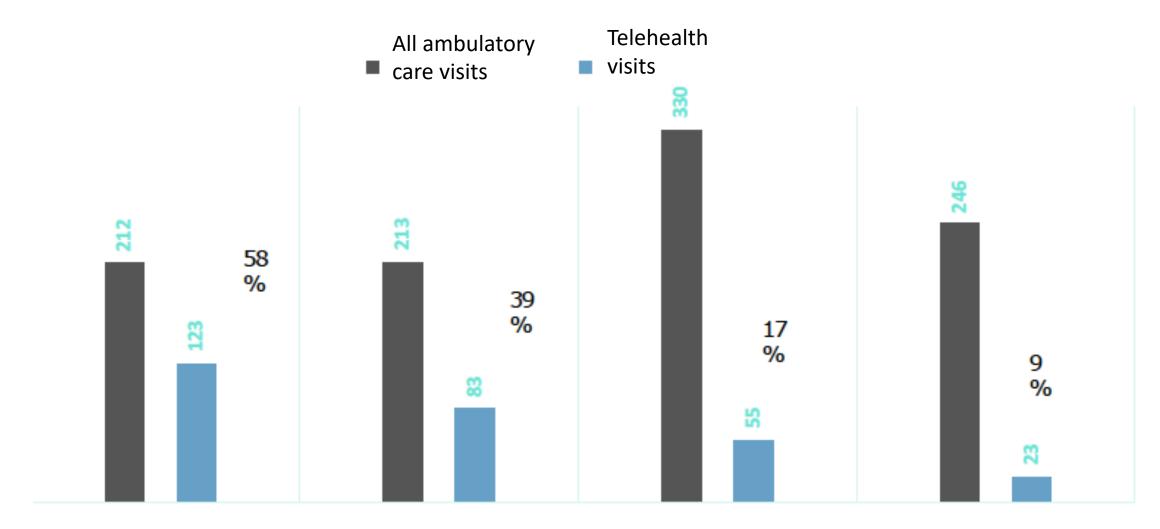




Benchmarking Deployment of e-Health among General Practitioners. Telemedicine in 2018 (5th), but still low



COVID as a catalyst Telehealth / remote consultation uptake in 16.03-17.07.2020 (thousands)





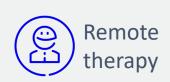
Forward with monitoring and online therapy: led by health insurance fund

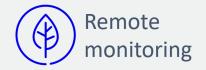
Remote consultation intro to health insurance service board +

stakeholder involvement COVID
(special
situation)

Online inspiration day

Extension of use,
1.09.2020
fully in reimbursem ent list



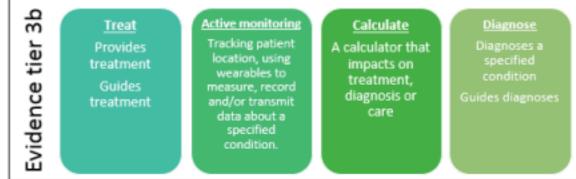


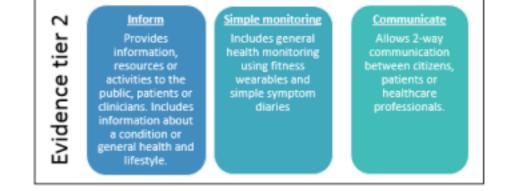
2022

Figure 1 DHTs classified by function and stratified into evidence tiers

DEFINING DIGITAL HEALTH (2019)







EVIDENCE STANDARDS FRAMEWORK FOR DIGITAL HEALTH TECHNOLOGIES

March 2019

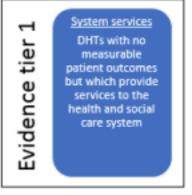


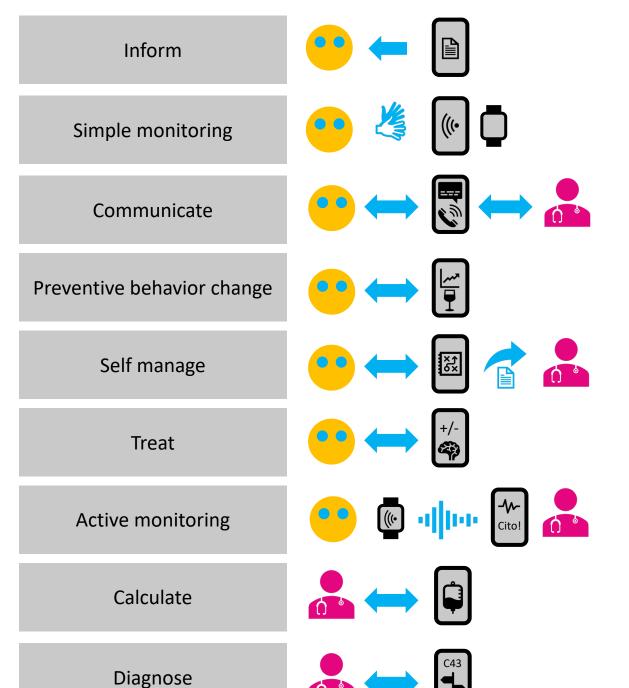








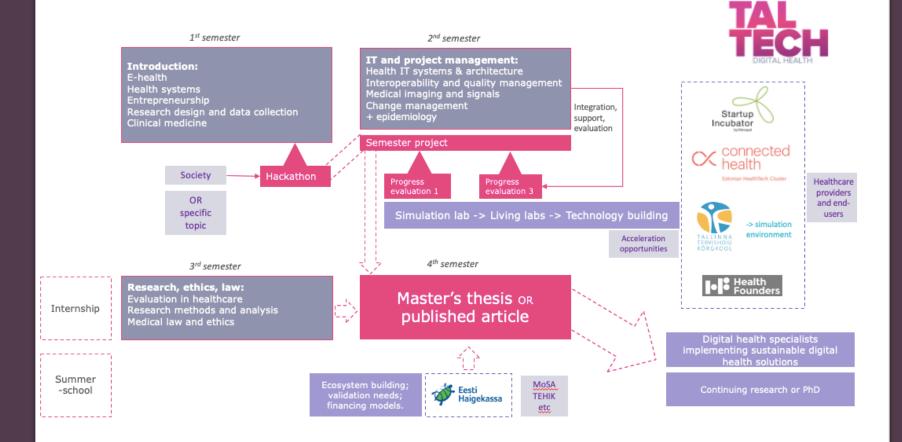




DEFINING DIGITAL HEALTH (2019)

Incentives for each functional case!

Source: Classification by NICE (Evidence Standard...2019), visual representation by TalTech (Kruus et al 2019).



Supported by

a dedicated digital health curriculum and research center

at Tallinn University of Technology

dermtest

MOST EASY & FUNCTIONAL MEDICAL PHOTO MANAGEMENT SOFTWARE

care providers have implemented Dermtest

tools in 3 countries

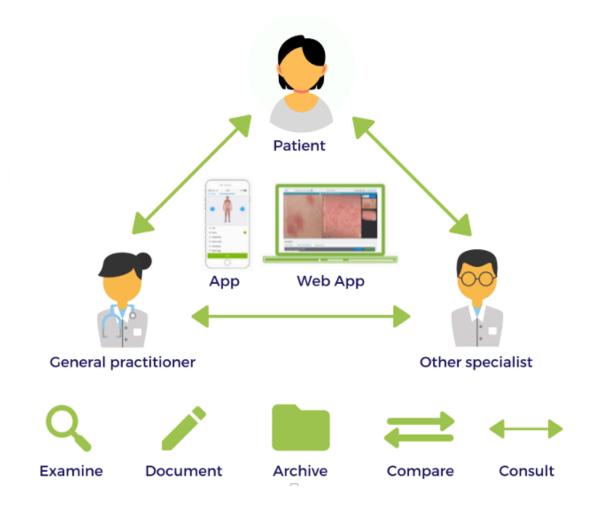
100% of Estonian regions covered by Dermtest

enabled providers, 15% of primary providers

value-providing use-cases for small & large

care providers

5 EHR integrations through powerful API



How it fits into the Estonian digital health framework?

- + Complementary service to main components
- + super-fast implementation (no integration needed to start)
- + enables all types of telehealth with quality photo management
- Security framework (TARA authentication)
- Standards (HL7, FHIR, DICOM)
- Research and evaluation -> 7-year study



Dermtest enables medical photo management

across the full pathway of digitalization

dermtest

Pre-visit or follow-up photos



Self-care

dermtest

Image support



Phone-call

dermtest

Image support



Video consults

dermtest

dermtest

Capture,

archive,

compare,

Face-to-face consults

visualize

E-consultations referrals consilium

API for third party AI integrations

dermtest



Doc-to-doc collaboration



Al-supported care

Future for e-health in Estonia

the healthiest system

- + Interoperability of 3rd party services (gov API)
- + Making use of 200,000 sample biobank
- + Data quality: CDA HL7 -> FHIR
- + Document-based -> Event-based
- + Value based care
- + Once-only principle

Problems:

- many projects at once, more evaluation and visioning needed
- financing incentives have a huge impact



Contact: priit.kruus@dermtest.com