



Everwell

An **ISO 27001 Certified** company





We empower organisations to deploy
USER-CENTRIC DIGITAL PLATFORMS
for healthcare programs
across the world.



The Everwell Hub is our integrated platform for adherence and case management, designed for high-burden healthcare programs.

Health care staff can log into a single portal to support the entire cascade of care from **registration, diagnostics, follow up, digital payments, virtual care and engagement, and digital adherence technologies.**



Our growth journey

Incubated in Microsoft Research in 2013

Journey till 2020



Our Platform

Digital Adherence Management (DATs)

Integrated adherence module to support multiple digital technologies

Diagnostics

Module for adding tests and integration with diagnostic machines and services

Dispensation

Prescriptions and refills to track drug delivery

Reports & Data Analytics

Provider access to data dumps and visualisations

Direct Benefit Transfers

Payment module for initiating, approving, and completing payments as per DBT schemes

Virtual Care

Communication services like SMS, IVR, whatsapp and telemedicine for patients



Platform Benefits

Open Source Technology

Designed as an open source toolkit, available for use or adaptation by any government or health care organization

Highly Secure Environment

Hosted on Microsoft Azure, an extremely secure cloud server guaranteeing data privacy and security

User-Centric Design

UI / UX based on user-level research across countries, with customizations to suit local contexts

Scalable Infrastructure

Built using microservices, the platform is designed to scale easily across countries

Multiple Integrated functions

Digitizes the complete cascade of care for patients - notifications, diagnostics, adherence and outcomes.

Interoperability

Easy to integrate and exchange data with existing digital health systems through custom APIs



Digital Adherence Management

SINGLE PLATFORM - MULTIPLE DATS

Custom 99DOTs envelope, Video Observed Tech and pillbox - all technologies supported.

INTERNET NOT COMPULSORY

Can also work in low-resource patient settings without internet or smartphones.

NO ENGLISH LITERACY REQUIRED

Adherence calendar is color coded and can also be translated across multiple languages.

REAL-TIME FLAGGING OF NON-ADHERENCE

Facilitate digital observation of pill-taking

DIFFERENTIATED CARE

Aggregate data allows for rapid triage of patients, helping providers to quickly determine those who need more support



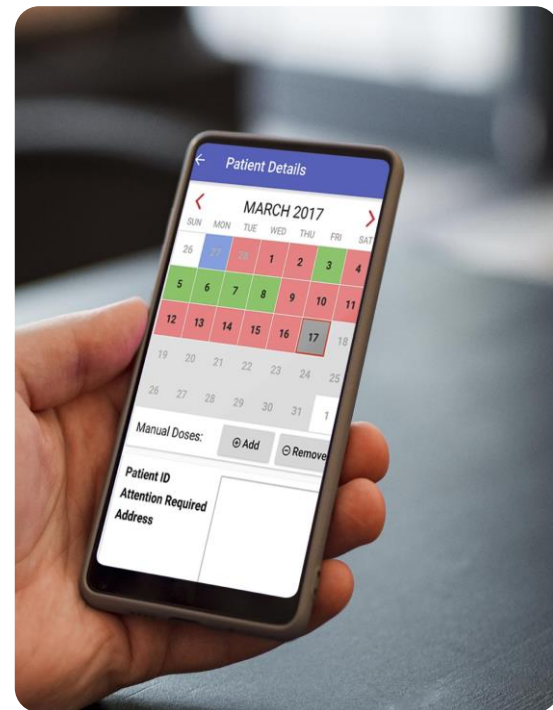
99DOTS ➤



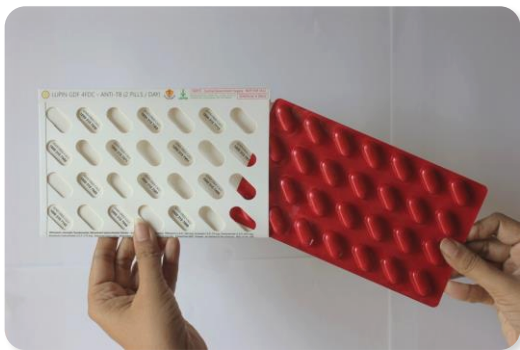
PILL BOX ➤



VOT ➤



99 DOTS



01

Patients receive medication

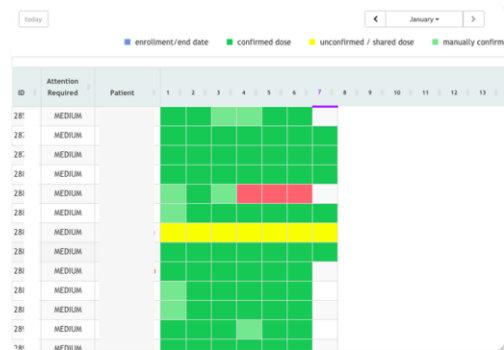
Blister packs are wrapped in customized envelopes, or stickers in the case of pill bottles with instructions and phone numbers printed on them



02

Report adherence

Upon dispensing medication, patients reveal the hidden numbers. They place a call to it or text upon taking their medication, free of cost for them.



03

Real-time access

The call/text by patients is reflected in real-time on a calendar style-dashboard that their healthcare workers can access, and follow-up with patients if necessary.

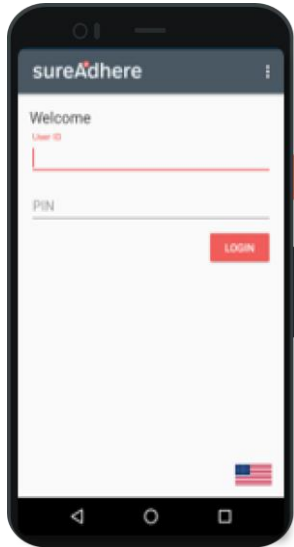
Video-Observed Therapy (VOT)

sureAdhere

01

Patients download app

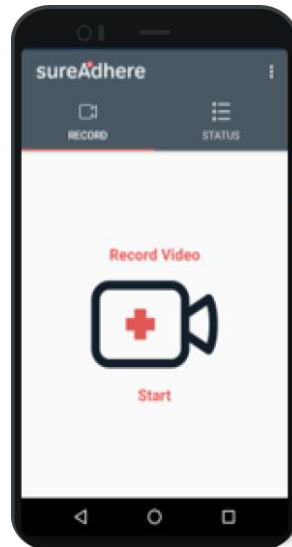
Available on iOS and Android, simple interface for patients with translations for local context



02

Ingestion of pills is recorded

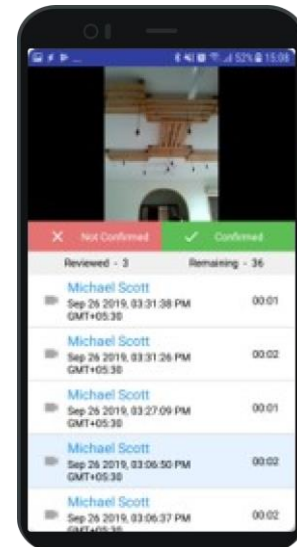
Recording done at convenient time and place, Videos uploaded in real-time to Everwell Hub



03

Video is reviewed

Staff review video at their convenience, and adherence is recorded accordingly



MERM/Evrimed

Step 01

Medication placed in smart pill box

No internet or phone required for patients, compartments available to segregate medication



Step 02

Box is opened to take medication

Alarms can be set on the box to remind patients everyday, as well as for refill visits

Step 03

Recording of adherence

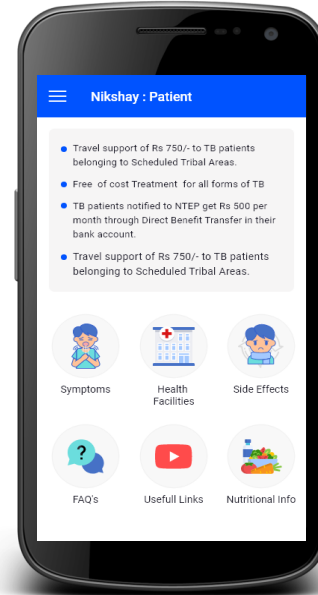
Adherence signal is transmitted to the platform, reflected on the calendar-style dashboard for healthcare workers



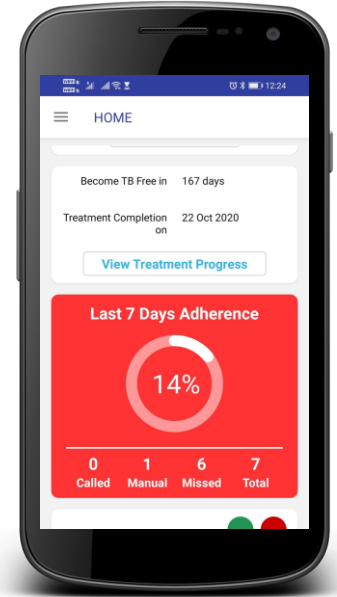
Virtual care

A large percentage of people live far from clinics and would otherwise struggle to meet a healthcare provider on a regular basis. To support people where they are, the Everwell Hub promotes features and opportunities for virtual care.

- ❖ Text messages: SMS, Whatsapp for medication reminders, motivation
- ❖ IVR calls for clinic visit reminders, refill reminders, health check-ins
- ❖ Whatsapp integration for provider to call patient from the mobile application
- ❖ Smartphone application with video and text based channels integrated to communicate with healthcare providers remotely.



Disease information page
– Phone application

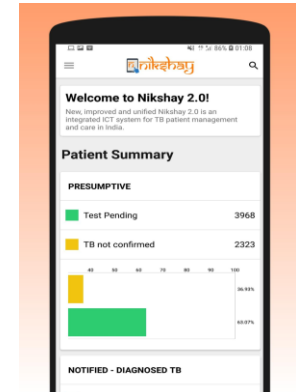
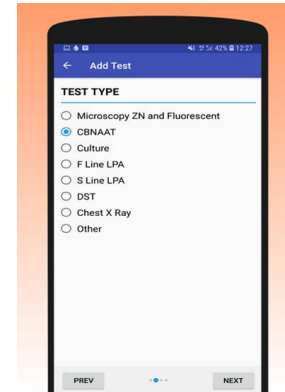
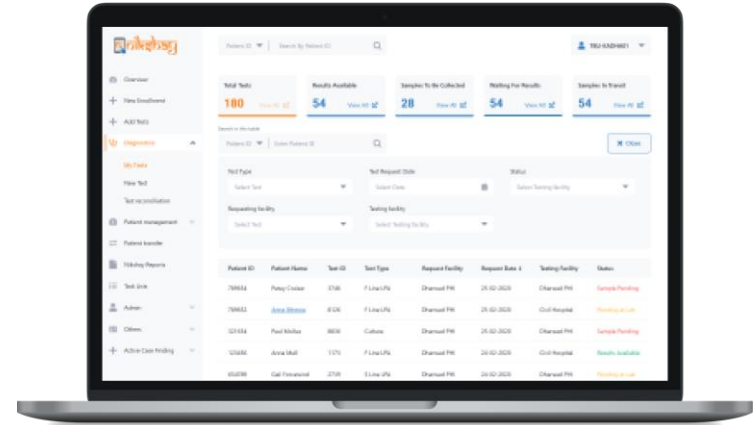


Home Page – Patient App

Diagnostics

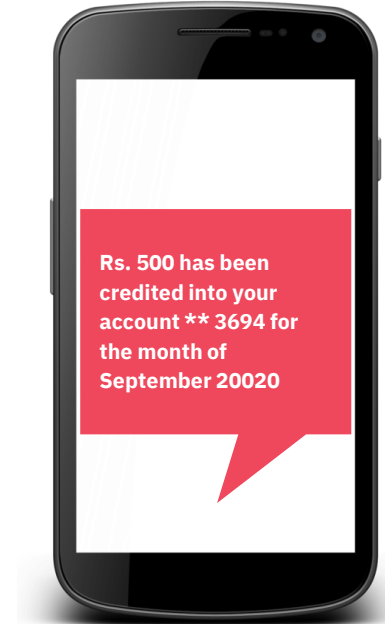
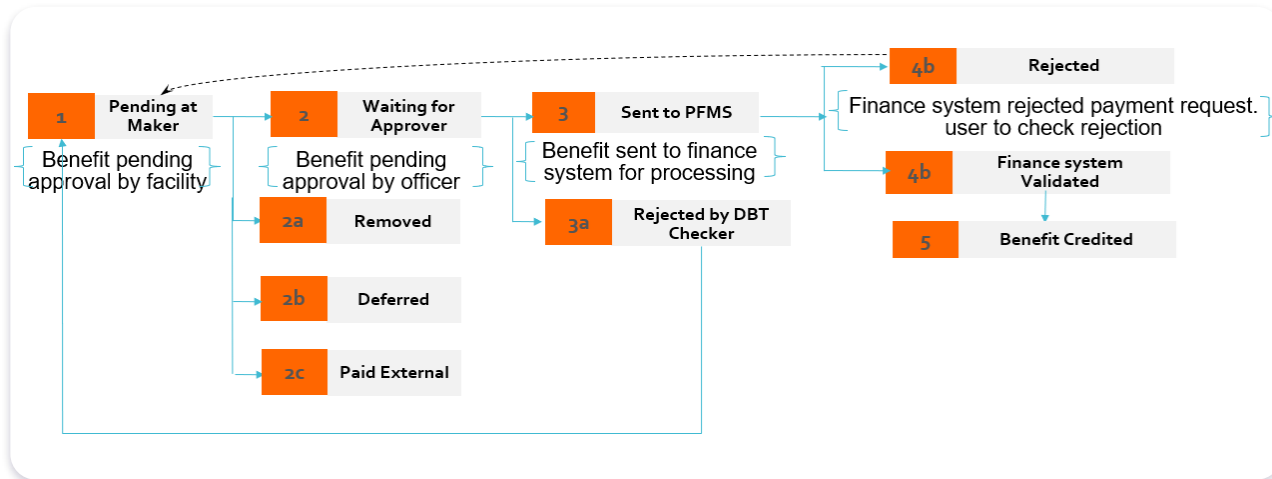
Healthcare providers and doctors rely on a variety of diagnostic tools for effective, early detection and diagnosis of diseases, which the Everwell Hub caters to.

- ❖ Unified Workflow for providers to request test results for a suspected case
- ❖ Ability to receive results from a host of compatible devices or tools
- ❖ Ability to view pending and received results by facility or geography
- ❖ Designed to drill down on results specifics per test per case.
- ❖ Defined APIs to connect devices including the leading diagnostics machines and AI-based x-ray analyses.



Digital Payments through HUB

- ❖ As of Feb 2020, INR 815 Cr worth of benefits have reached patient and supporter accounts directly for the India TB program
- ❖ The Everwell Hub's Digital Payment Module exposes workflows for authorizing payments based on the Government welfare scheme logic for patients and providers
- ❖ Ability to integrate with payment systems to initiate payments directly to users.
- ❖ Ensure accurate targeting of the beneficiaries, de-duplication and reduction of fraud



Dispensation

Dispensation and refills are a key to ensuring patients receive continuous treatment. Some of the major features of the *proposed* Dispensation module on the hub are:

- ❖ Automated dispensation day calculation based on treatment start date and number of adherent days (where applicable)
- ❖ Visual representation of dispensation day for each individual patient
- ❖ Auto-calculation of next refill visit
- ❖ Tasklist populating patients who are due for dispensation or refill
- ❖ Product details of drugs dispensed
- ❖ Prescription history of patients

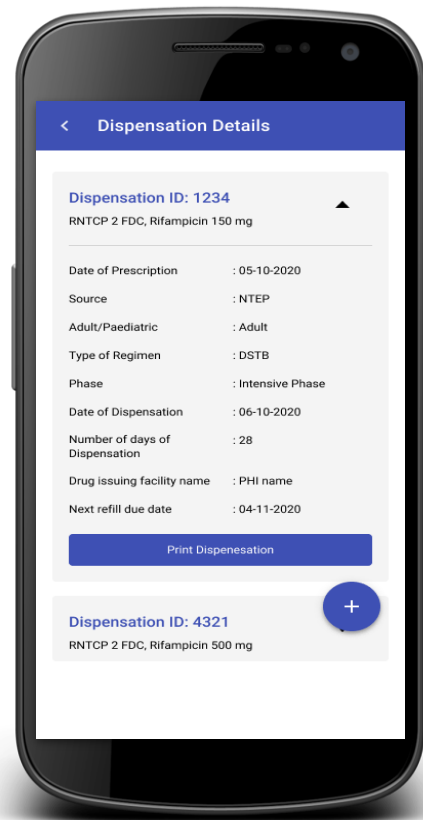
Adherence Dispensation Basic Details Treatment Centers Tags & Notes Medical Details Call Logs Support Actions Test Results

Close Case

Dispensation

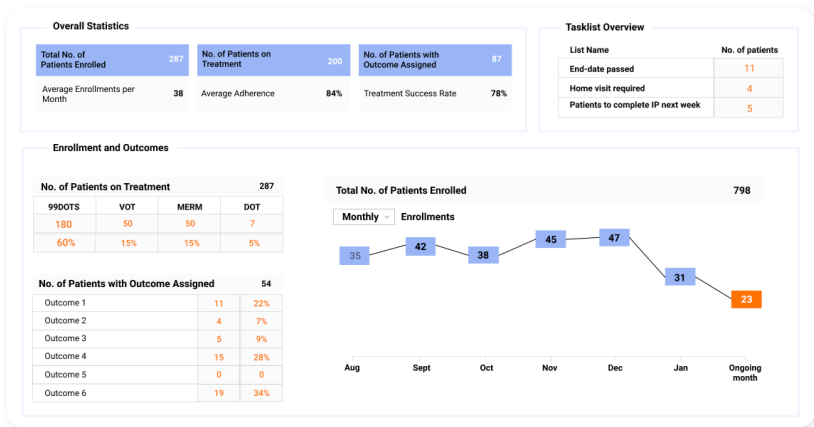
+ Add Dispensation

Dispensation ID	Date of prescription:	Source	Age	Type of Regimen:	Product Name	Issued On:	Doses Given:	Medication issued by:	Next Refill Due date:	Action
D123456	12/05/2020	Public	44	DSTB	2 FDC Rifampicin 150 mg	12/05/2020	28	Chemist	12/06/2020	Print Delete



Reporting and Analytics

The Everwell Hub is designed around simplifying data and synthesizing reports based on the intended audience.



Select patient enrollment dates and status

Select date range for patient enrollment

All patients enrolled

Patients enrolled in a date range

From: [] To: []

Select patient status

All patients enrolled

Patients on treatment

Patients with outcome assigned

Select geography

State: [Yangon]

District: [Select all]

Select report type

Patient level report

Aggregate report

Actionable insights

- ❖ Customizable Task lists
- ❖ Data summaries by geography
- ❖ Real-time Visualizations

Reports

- ❖ interactive Reports module
- ❖ Filter based data exports
- ❖ Detailed activity logs

Implementation Support

One-stop shop for creating and deploying an intervention

Scoping workshop

Everwell works with your team to understand the context, and propose appropriate solutions based on your metrics for success

Project design and set up

We customize the platform and virtual patient engagements, and set up the infrastructure based on the local protocols and context

Training and launch

Whether in person or remotely, we conduct master trainings for your team on the platform, along with materials for downstream training and reference

Maintenance and scale

Through data analytics and our helpdesk, Everwell supports the project through scale up, modifying functionalities as the project evolves

Publications and case studies

We are avid proponents of supporting the broader community by sharing findings, experiences, and data about tools supporting public health*

*Everwell does not own, modify, publish, or sell any data that we host without explicit consent from the partner.

Everwell Hub Deployed as PaaS - India TB

1



Screening

Once

Walk-in to a HF or contact tracing or Active case finding

2



Diagnosis (Test)

Once

- ❖ Enrolment of patients in Nikshay
- ❖ TB diagnostic tests requested (X Ray, SM, CBNAAT) by Staff /Provider
- ❖ Test results updated in Nikshay
- ❖ SMS to patient on diagnosis

3

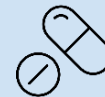


Diagnosis Confirmation

Once

- ❖ In-person consultation with provider and basis test results, confirms diagnosis and initiates Treatment
- ❖ Updates Prescription details in Nikshay

4



Dispense Medicines

Multiple

Patient collects drugs from Public or Private chemist

Everwell Hub Deployed as PaaS - India TB

5



**Adherence Support
& follow-up**

Continuous

Health Care staff or TS follow up with patient and monitors adherence via Adherence Calendar and refer for further follow-up tests

HF: Health Facility, TS: Treatment Supporter. SM: Sputum Microscopy

6



**Bank details entry
& validation**

Once

Patient provides Banking details to Health staff who enters into Nikshay

7



**Two-way
communication**

Continuous

- ❖ Patient is connected to health care staff /provider
- ❖ Patient can call CC for any information on treatment/ DBT
- ❖ 2-way communication channels via WhatsApp, Phone
- ❖ Use Follow Up Module for recording and scheduling communications

8



**Treatment
completion, long
term follow up**

Once

As patient completes treatment, Provider declares Treatment Outcome

Platform Statistics

*Cumulative since 2017

1



Enrolment

149 Lakh persons enrolled

2



Test

(Diagnosis/Follow Up)

151 Lakh Test results captured
(Cumulative since 2017)

3



Treatment

~79.5 lakh patients registered
~75 Lakh initiated on Rx
~15 Lakh presently on Rx

4



Adherence

1.2 Lakh patients presently on Digital Adherence Tool (DAT)

Nikshay User base	Count
Total users (all time)	~ 4 Lakhs
Monthly Active unique users	60 thousand

1



Deduplication

1.82 Lakh duplicate notifications identified

3



Direct Benefit Transfer of Incentives

INR 815 Crores of Incentive paid out (across schemes)
(Cumulative since April 2018)

5



Task Lists

11 Task Lists across Modules are available

2



Patient Transfer

33 Lakh patients Transferred since 2017. ~ 50 – 60 % of patients move from one facility to another for treatment

4



Communications (July 2020)

40 Lakh SMS sent to patients (per month)

6



Reports & Dashboards

- ❖ **22** Registers (Line lists)
- ❖ **18** Reports
- ❖ **3** Dashboards

Global Deployments



Scaled deployments globally | Focus on engagement | Open Source and Interoperable Platform



Research and Evidence



J. P. Nadda,
Union Health Minister, India
Launching 99DOTS for TB/HIV
patients, World TB Day



“ The 99DOTs pilot project...
is based on using mobile technology
and worked very well in India.
-Bill Gates

96% providers reported reduced workload

99DOTS for tuberculosis treatment supervision in Uganda:
Adherence rates and acceptability

99DOTS Patient Acceptability

I will recommend 99DOTS to my family/friends
for their TB treatment



The 99DOTS automated SMS reminders help me
remember to take my pills



Using 99DOTS will help me adhere to
and complete my treatment



I feel more connected to my healthcare
provider using 99DOTS



99DOTS packaging makes it easy to use



Strongly Agree Agree Strongly Disagree

Report by KNCV - **DAT (99DOTS)** to
support patients and health care
workers in a rural setting -
Evidence from Tanzania

“ The evidence also showed that
when patients receiving treatment
adherence interventions (e.g. different
combinations of patient education,
staff education, material support,
psychological support, tracer and use
of medication monitor) in conjunction
with DOT or SAT, the treatment
outcomes were significantly improved
compared to DOT or SAT alone.”

WHO DS-TB Guidelines, 2017

“ As treatment
supervision alone
is not likely to be
sufficient to ensure
good TB treatment
outcomes, additional
treatment adherence
interventions need to
be provided.”

**WHO DS-TB
Guidelines, 2017**

Case study - 99Dots in Philippines for DS-TB

- ❖ The TB REACH project, which is funded by the Stop TB Partnership, supported drug-sensitive (DS) TB patients through 99DOTS. The project is the predecessor of the ASCENT project, funded and supported by Unitaid.
- ❖ 396 DS-TB patients were enrolled on 99DOTS between Dec 2018 and Jun 2020.
- ❖ The project implemented a SMS short-code based system instead of a call to a toll free no
- ❖ A successfully logged-in 3-digit code registered green on the Everwell Hub platform
- ❖ If a patient did not log their dose before 6pm, they would receive a reminder SMS
- ❖ HCWs monitored patient adherence via online dashboard and Android app, and also received daily SMS reports on nonadherent patients.
- ❖ Daily adherence rate for patients on 99DOTS was 93.41%.
- ❖ IsoScreen urinalysis tests confirmed the accuracy of 99DOTS in monitoring adherence in a sampling of patients



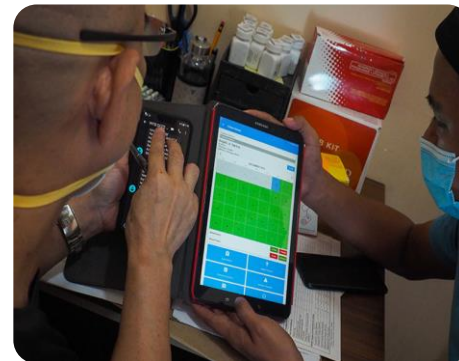
“

I felt relieved when nurse Anton mentioned that I didn't have to visit the clinic every day for him to see if I took my medicine. A visit every two weeks for drug refill was all that he asked of me. This meant I saved on transportation money. Unable to continue earning a living because of my illness, I had to budget the little amount I had saved.

Juan (27)

Case study - Integrated DATs in Ukraine

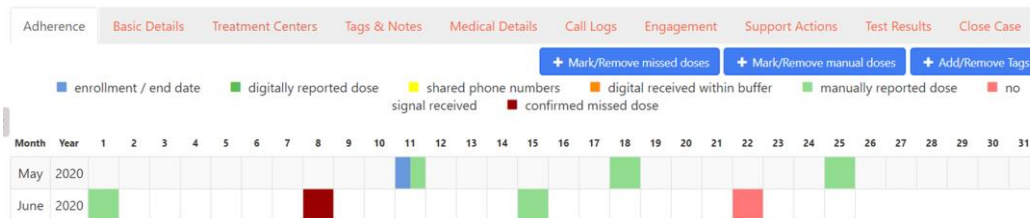
- ❖ To explore the practical aspects of using multiple Digital Adherence Technologies (DATs) in a local context in Ukraine, the W6 TB REACH project piloted the use of EvriMED boxes and Video-Observed Therapy (VOT) for TB patients
- ❖ PATH-Ukraine was the implementing partner, along with KNCV
- ❖ From November 2018 to December 2019, 902 MDR-TB patients, in high TB burden regions in southern Ukraine were enrolled in this program.
- ❖ The successful outcomes, and patient acceptance of these technologies has now led to it being scaled up as part of the ASCENT project, funded by UNITAID and planned to run over 3 years, starting 2020 and will enroll 15000 patients in Ukraine.



This is so advanced yet simple; I believe my patients love it. The application is amazingly helpful and supportive to ensure patient adherence especially in this COVID-19 crisis. Without this app, it would not be possible to remind and track adherence.. ”

Case study - Latent TB : 3 HP Regimen

- ❖ The 3HP regimen (targeted at LTBI patients and PHLIV) entails individuals to consume their medication once every week for 12 weeks
- ❖ The Hub is now designed to allow flexibility in dosing schedule and is the only solution that caters to the 3HP regimen at the moment.
- ❖ To reduce the burden of patients coming into clinic each week, patients on this regimen receive IVR check-ins and dosing reminder each week empowering the front end worker to know how patients health conditions on a real-time basis
- ❖ These check-ins ensure that front-end workers follow up with those patients who have checked-in negatively on priority and take necessary immediate measures
- ❖ Like our other projects, this solution also ensures that patients are kept engaged with dosing reminders pre and post dosing day
- ❖ Our pioneering efforts cater to 1700 patients in Uganda who are maintaining an average adherence of XX%



“ I see the task lists as soon as I get to work and follow up with patients who need immediate attention. This helps me provide differentiated care to all my patients

Lidiya (Pharmacy Technician)

Case study - Anti-Retroviral Therapy

- ❖ The Hub is the first of its kind ICT solution catering to address adherence related issues for PLHIV, implemented on a large scale
- ❖ The solution aims at assisting early habit formation - newly initiated HIV patients are enrolled on the Self Verified Adherence (SVA) program for the first 6 critical months of treatment
- ❖ The scale up of our successful pilot (average adherence: 82%) is set to cater to over 6500 PLHIV in India across 40 ART centers and is in association with JHU and NACO
- ❖ To ensure PLHIVs are closely monitored, the Hub has integrated with the national AIDS helpline who are alerted for follow ups when doses are missed as per protocol



“

“No one at home knows my HIV status, so I feel cared for when I receive a call from the counsellor as soon as I miss taking a dose.” -

PLHIV on 99DOTS - SVA
(anonymous)



Founding Team



Andrew Cross

Andrew Cross is the CEO and co-founder of Everwell

Andrew leads the organizational vision and operations of the company and engages with global partners on deploying Everwell's solutions for both adherence and broader ICT support. Before founding Everwell, Andrew worked at Microsoft Research India for five years, focusing on developing technology in support of health, education, and other social sectors. Andrew earned a BS in Electrical Engineering from the University of Texas at Austin, and an MPhil in Engineering for Sustainable Development from the University of Cambridge.



Bill Thies

Bill Thies is the Chairman and co-founder of Everwell.

Bill is also a Senior Principal Researcher at Microsoft Research, where he works on using technology to positively impact low-income communities (a field known as ICTD). Bill's research has resulted in various awards (including a MacArthur Fellowship) and has led to over 80 peer-reviewed publications. Bill received his B.S., M.Eng., and Ph.D. degrees from the Massachusetts Institute of Technology, where he studied programming languages and computer architecture.

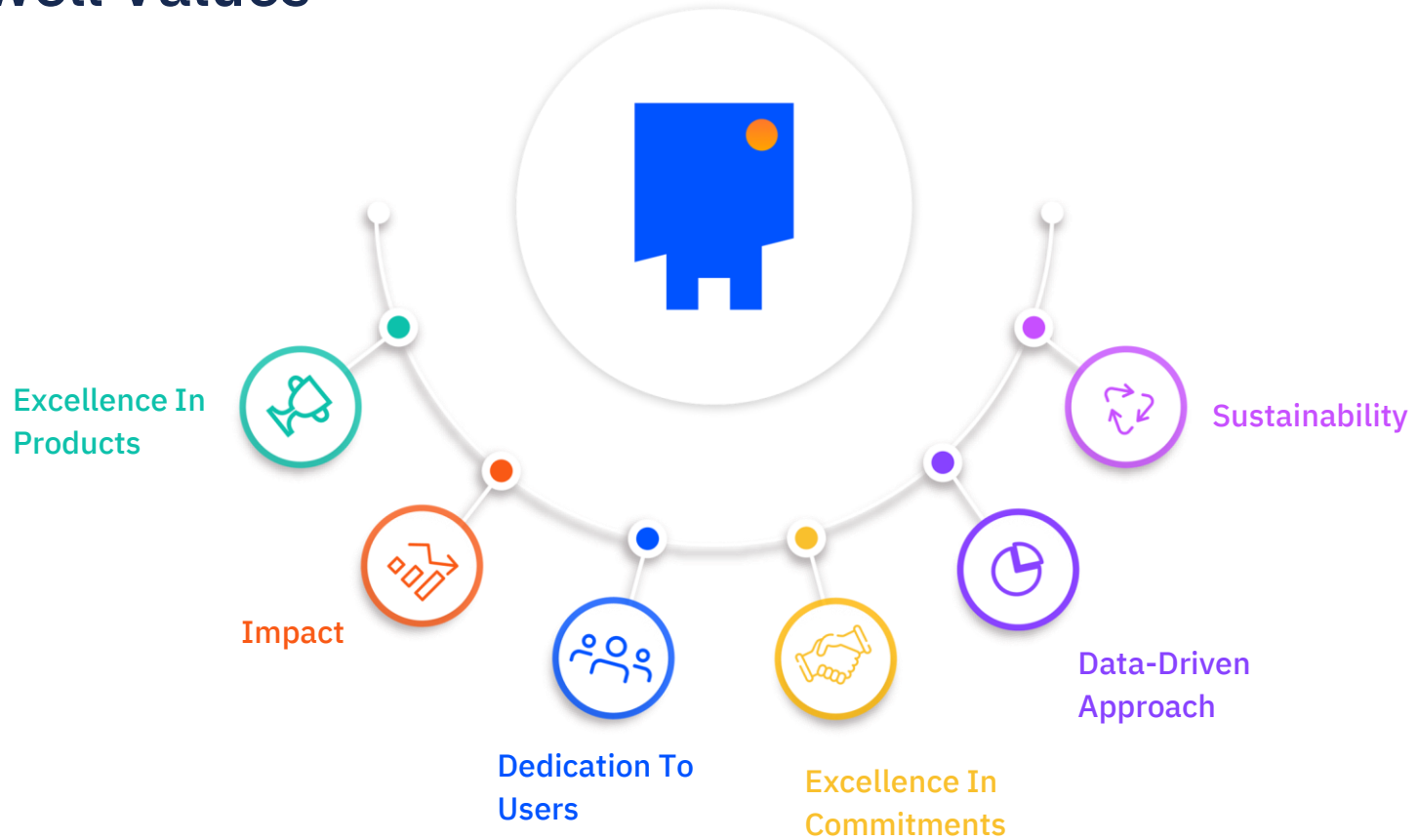


Nakull Gupta

Nakull Gupta is the COO of Everwell and responsible for supporting its work across the board. Starting with 99DOTS, he has been at the forefront for building Everwell's technology solutions. Nakull is responsible for driving the Nikshay vision and interfacing with the leadership of the consortium of partners that interact with Nikshay across India.

Before joining Everwell, Nakull worked at Microsoft Research India for a few years and was a part of the team which created the 99DOTS Adherence solution. Nakull has done his Computer Engineering from BITS Pilani

Everwell Values



Awards & Recognition



Everwell has been
awarded Semi-Finalist

SKOCH Award 2020

Thank You!



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