

access.mobile

Product/Technology | For-profit

UGANDA, KENYA, TANZANIA,
NIGERIA, GHANA



access.mobile

The Need

Technology solutions in emerging markets are often hard to navigate and fail to engage patients. Health providers need affordable mobile and cloud-based technologies that combine basic practice management with patient engagement in a user-friendly manner, making it easy for large hospitals and small clinics alike to connect with patients.

The Innovation

access.mobile's core product, amHealth, is an outpatient practice management and patient engagement technology platform that facilitates digitizing patient information into a patient record that is relevant and easy to navigate. It automates communication with patients via SMS, email, and smartphone notifications, and connects patients and doctors through mobile applications. Hospitals and clinics pay an annual licensing fee to access amHealth which increases efficiency and patient engagement and leads to greater patient retention and – ultimately – increased revenue for clinics and hospitals. access.mobile continually incorporates user feedback to refine and enhance their product and recently adopted security protocols that are aligned with U.S. and global standards. amHealth is being used in large internationally certified hospitals and smaller specialty clinics alike to organize practices, save staff time, and improve patient care before, during, and after visits.

The Impact

access.mobile's product is currently used to engage hundreds of thousands of patients with a range of leading hospitals, health networks and specialist clinics on the platform

AccuHealth

Product/Technology | For-profit

CHILE



AccuHealth

The Need

Many countries are grappling today with non-communicable disease (NCD) prevalence rates that have climbed above 35% and are finding that complications from NCDs often account for 60-70% of emergency room visits.

The Innovation

Founded in 2009, AccuHealth is a tele-monitoring company that offers virtual continuity of care for three main groups of patients: patients hospitalized in post-critical care, complex treatment patients, and chronic disease patients. AccuHealth provides these patients with portable technology kits that enable them to collect not only their own biometric data (including measures such as blood pressure, blood glucose, etc.), but also relevant subjective information through personalized questionnaires. AccuHealth then integrates the data gathered through these kits into a system that helps predict and avoid bad outcomes for patients.

The Impact

AccuHealth's continuity of care concept not only contributes to better patient health, but also decreases the economic burden on the overall healthcare system and helps increase workplace productivity. AccuHealth has reduced typical costs for complex patients by 60%, while maintaining a patient satisfaction level over 97%. They have monitored over 8,000 patients so far.

Afya Research Africa

Care delivery | Non-profit

KENYA



The Need

Communities in rural and informal urban settlements in Kenya face significant barriers to accessing healthcare. Health providers and services are often located far from where people live and the available care can vary widely in quality because of a lack of health system capacity to monitor and assess provider quality.

The Innovation

ARA's M-Afya Kiosk Project provides quality primary care health services to underserved populations through easily accessible health kiosks developed in collaboration with local communities. Located within walking distance of target communities, the kiosks offer health supplies diagnosis and treatment services from community health workers at a subsidized cost-through a model that incorporates co-ownership with community members. ARA's health information management system allows tracking of quality-related metrics at each kiosk, such as services provided and patient outcomes.

The Impact

Started in late 2013, ARA's community health kiosks have served more than 6,000 clients across Kenya through nine M-Afya kiosks. ARA plans to increase their impact through telemedicine services and adding higher-level care providers to their network.

Aprofe

Care delivery | Non-profit

ECUADOR



The Need

Lack of affordable, high quality health care services including family planning, primary care, reproductive health, and pediatrics for low and middle-income populations.

The Innovation

APROFE provides patient-centric care including affordable clinic model for urban areas and outreach programs that combines health care with social and economic development for rural areas. APROFE has developed a highly efficient service model, which maintains private-care quality through strict quality control and monitoring procedures and continuous patient feedback, keeping the patient at the center of their holistic health care delivery model.

The Impact

APROFE operates a network of 18 centers, a maternal and surgery clinic, and mobile clinics that reach 20 rural communities around Guayaquil that have no other access to medical services. APROFE has 1.5 million patient visits each year and employs 800 people.

Arogya Finance

Financing | For-profit

INDIA



The Need

Traditional bank loans in India are only accessible to those who can provide periodic salary payments or other assets as collateral. This excludes most Indians, especially the poor and informally employed. If they are unable to borrow from family, they either borrow from moneylenders, often at interest rates of 60% or more, or go without care until health conditions become an emergency. This leads to catastrophic healthcare spending, which drives 30 million Indian citizens into poverty each year.

The Innovation

Using a new model for measuring credit worthiness and risk, Arogya Finance provides medical loans to the poor and informally employed population. Lending decisions can be made within three hours, rather than the seven to ten day wait of most traditional banks. This speed is critical in health emergencies. If approved, the Arogya pays the hospital or doctor directly and treatment can begin immediately.

The Impact

Launched in 2011, Arogya Finance has partnered with 50 hospitals and healthcare service providers across India and processed 320 loans. The default rate is 2%. They plan to expand to provide 30,000 loans in the next three years.

ayzh

Product/technology | For-profit

AFGHANISTAN, HAITI, HONDURAS,
INDIA, LAOS, MULTIPLE COUNTRIES IN
AFRICA, USA



The Need

Globally, approximately one million mothers and newborns die each year from infections linked to unhygienic birthing practices. Mothers and newborns are often at risk because low-cost tools and supplies for safe birthing do not exist in resource-poor settings.

The Innovation

Ayzh developed a customizable "\$3 Clean Birth kit," which contains essential tools recommended by WHO that ensure safe and sterile conditions at the time of childbirth – at half the cost of key competitors. Ayzh also provides training and education to healthcare workers through a mobile training program to assure proper implementation of birth kits. Ayzh is primarily owned and operated by underemployed women, who serve as advocates of safe birth practices in their local communities.

The Impact

Founded in 2010, Ayzh has sold more than 100,000 clean birth kits, impacting about 500,000 people globally, and trained over 400 healthcare workers.

BasicNeeds

Systems support | Non-profit

CHINA, GHANA, INDIA, KENYA, LAO PDR,
NEPAL, PAKISTAN, SOUTH SUDAN, SRI
LANKA, TANZANIA, UGANDA, VIETNAM . . .



BasicNeeds
BasicRights

The Need

Globally, an estimated 13% of all disease is attributable to mental health disorders and mental illness is projected to be the leading burden of disease by 2030. The majority (75%) of those suffering from mental illness live in low- or middle-income countries. In developing countries across the world, there is an urgent need for mental health treatment. Lack of understanding of mental illness combined with lack of available resources and solutions contribute to a treatment gap of up to 85%.

The Innovation

BasicNeeds partners with over 90 organizations, ranging from farmers' cooperatives to ministries of health, to implement a proven and scalable communitybased model for mental health that has been tested in 12 countries around the world. The BasicNeeds model works with existing resources in each community to decrease stigma, mobilize providers to coordinate and deliver mental health services, and facilitate opportunities for affected people to work and earn a living. By nurturing local leadership and capacity, BasicNeeds ensures long-term sustainability of the model in each location.

The Impact

BasicNeeds has provided treatment for more than 100,000 people struggling with mental illness or epilepsy, since being founded in 2000. Program data demonstrates that the BasicNeeds model significantly increases access to treatment, reduces symptoms, and increases ability to work and participate in community activities. In the next 3 years, BasicNeeds plans to scale to 20 new locations and reach 1 million people.

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Bident

Care delivery | For-profit

MEXICO



bident
CLINICA DENTAL

The Need

Dental issues represent a major unmet public health need. In low-income countries, only 2.5% of dental problems are treated and these untreated issues compound over a lifetime. In Mexico, 60% of children already have cavities by age 6, and this increases to 80% by age 12. The vast majority (80%) of adults over the age of 60 have an average of only 10 teeth remaining.

The Innovation

Bident offers high quality affordable dental care services to low-income communities in the city of Oaxaca, Mexico. Unlike other dental providers argeting the poor, Bident brings elements of higher-priced private care, such as top-of-the-line laser technology and a strong customer service model, to underserved low-income communities. The organization partners with schools to provide educational workshops and focuses on prevention. High patient volume allows prices to remain affordable.

The Impact

Currently, Bident's education program is being implemented in 10 schools, reaching 3,500 school children each year. The prevalence of cavities at participating schools has decreased 20%. In the next 3 years, Bident plans to scale to 5 new locations and reach 22,000 new patients. Bident's founder hopes to change the way that health services are provided to low-income communities, increasing the focus on preventive care and high quality.

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Biofourmis

Product/technology | For-profit

HONG KONG, SINGAPORE, SOUTH
AFRICA, UNITED STATES



The Need

One in every five MediCare patients ends up back in the hospital within 30 days of being discharged. A major cause of this is lack of continuous health monitoring, especially for patients with chronic illness.

The Innovation

Biofourmis has created a wearable biosensor which allows patients to monitor their health. Physiological data is collected from these sensors and used to create an individualized health model based on vital sign patterns. When there is a deviation in a patient's baseline information, the biosensor can predict the his or her health deterioration. This biosensor allows patients to know their own bodies and vitals better and provides the opportunity for early detection as well as connection with clinical staff. Thus, it is predictive, precise and actionable.

The Impact

Over 45,000 patients have been analyzed by Biofourmis in Singapore, Hong Kong, South Africa, and USA.



Bive

Financing | For-profit

COLOMBIA



The Need

Over 80% of people in Colombia are insured, but low- and middle-income populations face significant barriers to accessing quality primary care services because of long wait times, burdensome administrative procedures, and denial of health services and medications. Nearly one in two Colombians report having used an emergency room in the past two years – leading to poorer outcomes and higher costs than primary care.

The Innovation

Bive provides members access to a network of more than 55 healthcare providers and 60 different kinds of medical services, with shorter waiting times than public facilities. Services are discounted at rates up to 70% lower than regular health insurance, and provided through a flexible, affordable membership and payment structure. Bive also assists users in scheduling health services through their Linea Amiga Bive phone line, where patients can also obtain information on health user rights.

The Impact

Bive operates in three cities in Colombia and currently provides up to 1,300 families with access to over 150 different services from a network of over 100 doctors.



Bodhi Health Education

Workforce training | For-profit

INDIA



The Need

Skilled frontline workers are essential to the public health systems of most middle- and low-income countries. However, countries often face chronic shortages of health workers to provide basic services to rural and underserved populations because of a lack of standardized capacity building solutions and training resources.

The Innovation

Bodhi Health Education uses low-cost mobile technology and customized e-learning tools to provide quality and scalable training to health workers. Complex medical topics are taught using interactive and pictorial videos in regional languages, to engage health workers from all literacy levels. The use of a mobile platform increases flexibility of training schedules and locations, and allows health workers continuous access to material to refresh and renew their learning.

The Impact

Bodhi Health Education currently operates across three states in India and has trained over 650 health workers, impacting more than 500,000 lives.

Care2Communities

Care Delivery | Non-Profit

UNITED STATES | HAITI



The Need

In Haiti, poor and low-income families have virtually no options to seek high-quality, affordable primary care services.

The Innovation

C2C has developed a public-private partnership (PPP) with the Haitian Ministry of Health to rehabilitate the government's community clinic network. The model leverages the existing resources of the government and rehabilitates the operational systems that are necessary for high-quality primary care.

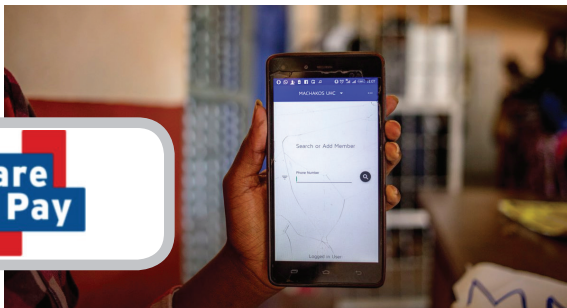
The Impact

As a result, C2C's prices are on average 15 percent lower than government prices while the quality is approximately 30 percent higher than the baseline government quality rankings.

CarePay Limited

Product/technology and Finance | For-Profit

KENYA, NIGERIA, TANZANIA, AND
THE NETHERLANDS



Care
Pay

The Need

Because Kenya faces a low insurance penetration rate due to mistrust between providers and users, people are forced to pay large out-of-pocket rates.

The Innovation

As a result, Carepay developed M-TIBA, which directs health funds from public and private funders directly to patients on their mobile fund. These funds are restricted to conditional spending at selected healthcare providers, which helps to address the issue of fraud.

The Impact

Through critical partnerships with Safaricom, PharmAccess, National Health Insurance Scheme in Kenya, Carepay has collected premiums for over 30 million people.

Changamka

Financing | For-profit

KENYA




Changamka

The Need

In Kenya, 90% of the population lacks access to health insurance; most do not qualify for or cannot afford existing insurance packages. As a result, families go without critical health services or are thrown into a cycle of poverty by crippling out-of-pocket health costs.

The Innovation

Changamka offers three products that allow Kenyans to save over time for quality healthcare. With Smart Cards for maternal health care and family health care, customers can use mPesa to transfer money via their cell phone into a dedicated savings account and then use the account to pay for care when needed. In partnership with Safaricom and Britam Insurance, Changamka recently launched a third product, Linda Jamii, a comprehensive health insurance plan costing only US\$140 per family/year with full healthcare coverage and income replacement benefits. Using mPesa, individuals can save towards the purchase of Linda Jamii. Doctors prefer patients with Linda Jamii as it is easy to verify the authenticity of this insurance coverage and they receive payment through mPesa.

The Impact

Since June 2011, 9,500 Smart Cards and 3,200 maternity cards have been distributed and 600 hospital transactions are paid for each month using the Smart Cards.

ClickMedix

Product/technology | For-profit

BANGLADESH, CHILE, CHINA, GHANA, GUATEMALA, INDIA, MEXICO, PERU, PHILIPPINES, TAIWAN, TRINIDAD AND TOBAGO, UGANDA, USA



Clínica SiM

Care delivery | For-profit

BRAZIL



The Need

Given the limited supply of doctors around the world, many health systems face a common challenge of providing patients with timely access to high quality medical services. As a result, patients face long waiting times to see doctors, high costs for physician consultations and transportation, and lack of physical access to the quality, affordable care they need. In many rural areas, a complete lack of specialists exacerbates this problem.

The Innovation

ClickMedix provides an innovative smart-phone-enabled technology platform that connects medical providers and patients without the physical presence of a doctor. For patients who do not have access to smart phones, ClickMedix is used by health workers and rural nurses, who serve as eyes and hands of remote doctors to provide information needed for diagnosis and treatment advice. Based on remote physician's advice, the health workers and nurses can administer timely treatment and speed up care delivery. The innovation achieves two major improvements in health systems. First, it connects lesser-trained clinicians directly to specialists, dramatically increasing the range of clinical care and triage they can offer. Second, doctors and specialists are able to increase their patient volume through the connection by 4-10 times with more patients and other providers.

The Impact

Completed 5 years of pilot programs in 15 countries, 61 clinics and hospitals, 3 governments and 10 research institutions and medical schools, 4 NGOs, 4 multinational corporations, reaching a population of more than 700,000 and scaling to 50M patient reach with current pipeline of customers in the next 5 years.

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The Need

In the Northeast region of Brazil, patients typically face a choice between expensive private insurance (priced out of reach for most) or long waiting times for public healthcare services. Out of the 145M Brazilians who don't have private health insurance coverage, 62M live in the North and Northeast of Brazil, where Clínica SiM is focused.

The Innovation

Founded in 2007, this organization focuses on providing affordable and accessible care for patients who do not have private health insurance. Clínica SiM clinics and their partner facilities provide medical consultations, lab tests, imaging exams, outpatient procedures, dental services, and day-hospital surgeries. Clínica SiM's retail clinic network model allows patients to pay affordable one-time fees for timely care (90% of services are provided within 48 hours of a patient's request to schedule). The model keeps costs low using technology (such as electronic medical records and IT systems) to streamline processes and increase efficiency; Clínica SiM also has a rigorous focus on process efficiencies and improvements (such as organizational design).

The Impact

Clínica SiM currently employs 120 full time workers, partners with 135 physicians and 50 dental professionals, and operates six clinics that include medical office and lab testing facilities. Together, these six clinics provide 17,000 services each month. Across all clinics in their network, between 59%-70% of customers would recommend Clínica SiM to others.

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Clínicas del Azúcar

Care delivery | For-profit

MEXICO



The Need

Diabetes is the second most common cause of death in Mexico and rates of diagnosis are increasing. However, diabetes care in Mexico is expensive, inconvenient, and inaccessible to 90% of the population.

The Innovation

Clínicas del Azúcar is a one-stop shop, providing easy access to an array of services for patients with diabetes. Patients receive care at successive diabetes “stations,” where the provider deploys evidence-based care algorithms that assess the patient’s readiness to change and disease experience, modifying the message at subsequent stations based on patient response. Fixed-cost membership fees make care available to more people at a reduced cost by allowing patients to plan for the cost of care and the clinic to spread costs across members; facilitated diabetes support groups help patients manage their care.

The Impact

Clínicas del Azúcar is piloting their first clinic and plans to open 50 more clinics in 5 years. The first clinic provided care to 400 patients in 2 months and is projected to reduce the annual cost of care by more than 70% and the waiting and consulting time by up to 80%.

COFAS

Care delivery | Non-profit

MEXICO



The Need

Health facilities in Mexico are disproportionately concentrated in large urban areas, often resulting in a lack of access to comprehensive, affordable healthcare for people in rural and semi-urban areas.

The Innovation

COFAS constructs and operates hospitals in rural and semi-urban areas of Mexico, increasing the availability of services and the density of healthcare providers in these areas. Since its founding in 1995, the organization has expanded from providing outpatient care to also offering emergency services and in-patient care. COFAS makes care affordable through the efficient use of technology, improved processes, and intelligent resource allocation. One of COFAS’ hospitals is accredited to provide care through Mexico’s public insurance scheme, Seguro Popular, expanding the reach of publicly-funded care to rural communities.

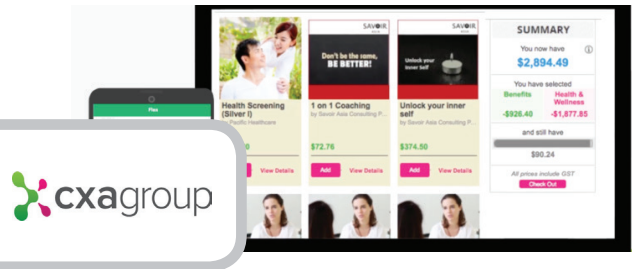
The Impact

COFAS currently operates three community hospitals, and has plans for growth in the coming years. In 2015, COFAS hospitals provided over 230,000 medical services and saw over 89,000 patients; they directly impacted 60 municipalities through their work, doubling the number they reached in 2014.

CXA Group

Financing | For-Profit

SINGAPORE, HONG KONG, CHINA,
INDIA, INDONESIA, MALAYSIA,
PHILIPPINES, SOUTH KOREA, TAIWAN
AND THAILAND



The Need

Across South and Southeast Asia, healthcare costs, including employer insurance schemes, are rapidly escalating due to chronic disease hitting Asia 10 years before the West. Employees are given one-size-fits-all benefits which does not suit young healthy employees or dual income families with overlapping benefits.

The Innovation

CXA Group gives employees the power to personalize their own health and wellness goals and outcomes by converting the money that companies spend on insurance into a benefits wallet for employees to select the most suitable health and wellness plans. The company also provides workplace wellness, disease management interventions and data analytics to help employers improve workforce health and reduce healthcare costs.

The Impact

CXA has over 500 corporate clients, aggregated more than 800 wellness providers and currently serves 100,000 individuals through the platform. They are currently valued at over \$US 100M after raising \$33M in VC funding. They have won innovations awards in HR, insurance and healthcare.

dr.consulta

Care delivery | For-profit

BRAZIL



The Need

The public health system in Brazil is overcrowded, varies in quality, and is understaffed, often resulting in delayed care and reduced access. For example, wait times for diagnostic services in the public health system are up to 480 days, dramatically delaying the window for treatment options. Low-income, uninsured people in Brazil rely on this system and cannot afford private alternatives.

The Innovation

The dr.consulta model integrates primary and secondary health services into one location, providing patients with access to services 25 times faster than public options, and with prices that are 70% to 90% lower than the private market. Clinics are located closest to the homes where the demand and need for services is highest, further reducing barriers to accessing care.

The Impact

Founded in 2011, dr.consulta has served more than 150,000 patients. As of January 2015, Dr. Consulta operates five clinics in Sao Paulo and plans to expand to 20 clinics by 2016.

Forus Health

Product/technology | For-profit

INDIA

Forus



The Need

India has 12M blind people and over 80% of these cases are due to treatable conditions, such as cataracts, diabetic retina, glaucoma, cornea issues and refraction problems. However, a critical shortage of providers means that millions are unable to access treatment and go blind, unnecessarily.

The Innovation

Forus Health provides an innovative platform utilizing affordable technology solutions that can be easily used by minimally trained technicians, making healthcare more accessible and scalable. Forus Health's flagship product is 3nethra, an intelligent, affordable, portable eye-screening device that allows a health worker to screen a patient in less than 5 minutes for five major eye conditions. The 3nethra device is portable, can be operated easily, and can be deployed in remote areas. Mobile connectivity allows for immediate remote diagnosis by specialists, enabling them to provide care in the most remote areas without leaving their offices.

The Impact

The 3nethra eye-screening device has a three-pronged impact. It augments and expands the reach of existing health systems, creates employment for rural entrepreneurs, and renews the economic prospects and livelihood of those living with preventable blindness. The 3nethra has is currently used in 220 systems across 14 countries and has since screened 600,000 eyes worldwide.

Grand-Aides

Workforce training | Non-profit

BANGLADESH, USA



Grand-Aides

The Need

Physician and nurse shortages in the US and other countries create challenges of overburdened emergency departments, managing chronic conditions, and providing access to care in rural areas. These challenges are exacerbated by the increase in older populations around the world.

The Innovation

Grand-Aides trains experienced caring lay workers who are supervised by health professionals to provide care at a reduced cost and prevent hospital readmission. The model uses telemedicine, home visits, and patient education to reduce unnecessary hospital visits, increase access to care in rural areas, and leverage patients and families to take an active role in their care. Grand-Aides operates in transitional and chronic care, primary care, maternal-infant care, school-based care, palliative care, and rural care delivery.

The Impact

Pilot studies in the US indicate that care provided by a Grand-Aide and nurse supervisor could have prevented 62% of visits to a primary care clinic and 74% of visits to an emergency room, dramatically reducing costs for patients and the health system.

Health Builders

Systems Support | Non-Profit

RWANDA



The Need

Access to quality primary health care in Rwanda is limited or in some cases non-existent. The country lacks the human, operational, and technological resources to manage their health centers efficiently and sustainably provide care.

The Innovation

Health Builders mentors health care providers to build strong management systems; constructs comprehensive primary health centers where access is limited or nonexistent; and equips health centers with system strengthening technology. Each of Health Builders' state-of-the-art health centers serve a local community of approximately 22,000 people, with thousands more traveling by foot, bike, and bus from other districts for care. Health Builders then provides the staff and administrators of the newly-constructed facilities with management support by identifying barriers to inefficiency in finance, data/IT, human resources, and operations, while mentoring them through how to overcome these challenges. This management-mentorship support is also provided in over 100 centers across the country and allows centers to save money and invest in additional technologies, ultimately strengthening health systems while allowing them to serve more patients at a higher standard of care.

The Impact

Since 2007, Health Builders has provided enhanced primary care services for more than 2M Rwandans. This includes management support for 116 centers, ground-up construction of six comprehensive care centers, and the development of two maternity and delivery centers.

Health City Cayman Islands

Care delivery | For-profit

CAYMAN ISLANDS



The Need

Across the globe, governments, healthcare delivery systems, insurers, and consumers are engaged in a persistent tug-of-war between competing priorities: meeting the increasing demand for healthcare services while trying to reduce the rising cost of those services. As demand rises, the pressure to reduce costs and demonstrate value is intensifying.

The Innovation

Health City Cayman Islands (HCCI) is a new venture that is scaling the work of Narayana Health (a veteran innovator in the Innovations in Healthcare network) from India to the Cayman Islands. Narayana's founder, Dr. Devi Prasad Shetty, partnered with Ascension (the largest non-profit health system in the US) to establish HCCI, an advanced tertiary care hospital that opened in February 2014 to provide more affordable surgical care to patients in the Caribbean, the United States, Canada, and Latin America. The 101-bed facility primarily offers cardiology, orthopedic surgery, cardiac surgery, neuro and spinal surgery, minimally invasive surgery, and pulmonology. By using a high volume surgical model and hyper-specialization of physicians, they reduce costs and improve quality. HCCI uses bundled pricing that typically is set at 30-40% of average US rates. HCCI holds a Gold Seal of Approval from Joint Commission International.

The Impact

HCCI aims to have a tremendous impact on the way the Western world looks at the future of healthcare. Within a short period of just two years the presence of Health City Cayman Islands has already changed the healthcare landscape within the region. HCCI boasts a customer satisfaction rate of more than 90%, readmission rate of less than 0.5% and an infection rate of less than 1%.

Heartfile

Financing | Non-profit

PAKISTAN



Heartfile

The Need

In Pakistan, low-income individuals are highly susceptible to becoming indebted or falling into poverty due to catastrophic health care expenses. Existing government social protection programs are slow and subject to abuse.

The Innovation

Heartfile developed an internet-based and mobile technology platform, validation and prioritization system, and health equity fund that allow providers to seek fast and transparent cash transfers for low-income individuals. The system accesses country demographic data to validate and facilitate requests for funding of health care provision and enables complete transparency to donors on the types of patients being financed.

The Impact

2,100 individuals have received aid to cover health care costs through Heartfile with an average grant size of \$450 USD. Five tertiary care hospitals with catchment areas of 700 kilometers have access to the system, providing aid for cardiac care, orthopedic care, and surgery.

iKure

Care Delivery | For-Profit

INDIA



iKure

The Need

Though 70% of India's population live in rural areas, healthcare access in rural communities is scarce. A significant lack of physicians, poor infrastructure, long travel times, and lack of health financing create challenges to accessing care.

The Innovation

iKure Techsoft uses a hub-and-spoke clinic model to bring low-cost technologies and strategic partnerships to rural areas. Point-of-care technologies enable community-based health workers (CHWs) to provide doorstep healthcare monitoring and diagnostic support. Through this model, CHWs can provide personalized, specific and professional care to rural residents, including primary care support, maternal and child health services, nutrition interventions, and telemedicine.

The Impact

Since its founding in 2010, iKure has served more than 2.5 million direct beneficiaries across six states in India in more than 1,000 villages. Presently, iKure has profiled approximately 58 diseases and trained more than 150 CHWs. Through iKure's model, patients' wait time for care is dramatically reduced from four to six-hour wait times in local health clinics, to within one hour of contact.

Jacaranda

Care delivery | Non-profit

KENYA



The Need

Every year over 250,000 women and one million babies die in childbirth in Africa. Women cite disrespectful care, overcrowded facilities, and lack of accessible counseling services as reasons they avoid giving birth at a hospital. Those that do go to deliver in formal facilities receive low quality care that results in high rates of maternal and newborn mortality.

The Innovation

Jacaranda is creating a network of affordable, high-quality maternity hospitals specializing in respectful, evidence-based care for low-income families. We are building cutting-edge systems and protocols to drive down costs of care, improve quality, and create a higher standard of nursing care.

The Impact

Jacaranda operates one flagship maternity hospital in peri-urban Nairobi, is about to launch a second, and will open a third facility in 2014. The first hospital has served over 3,000 low-income women and impacted nearly 10,000 family members at one-fifth the cost of other private health facilities. Our plans are to reduce cost of deliveries to less than \$80, and build world-class systems for quality improvement and nurse development. Over the next 5 years, they will expand these into their own chain of hospitals in the region, and also work through influence partnerships to replicate these innovations in the public and private sector.

Le Nest

Care delivery | Non-profit

CHINA



The Need

China is one of the most rapidly aging countries in the world. Non-communicable diseases (NCD) account for 80 percent of deaths in China and 70% of the total disease burden. The number of NCD cases in people over 40 are expected to increase two and threefold over the next two decades. NCD care and management among the elderly are becoming an increasingly important social and public health issue.

The Innovation

Le Nest leverages trained volunteers and professionals to provide NCD disease management education, physical and psychological interventions, physical therapy, and hospital-visit counseling for a fixed yearly membership fee.

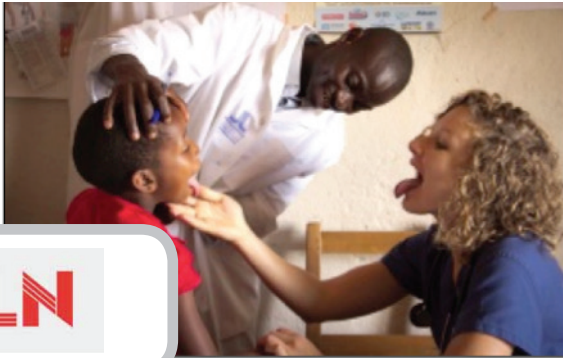
The Impact

Le Nest operates five community health centers in Shanghai, serving a total of 1,800 elderly people each year and reducing the burden on overcrowded hospitals.

LifeNet International

Workforce training | Non-profit

BURUNDI



LifeQube

Device or Technology | For-profit

SOUTH AFRICA



The Need

Lack of affordable, high-quality basic health care services in remote low- and middle-income populations in Burundi, Uganda, and DRC due to last mile education and resource distribution challenges.

The Innovation

LifeNet identifies and recruits church-based health centers into their conversion franchise program designed to improve quality, encourage growth through financing mechanisms, and train nurses to provide care, manage pharmaceutical supplies, and run their clinic using economies of scale created by the franchise.

The Impact

LifeNet currently operates a network of 90 clinics across Uganda, DRC, and Burundi with each serving between 30 and 150 patients per day. All 90 clinics saw a total of approximately 1 million patient visits in 2016. Quality Score Card measures, created using Ministry of Health and USAID/Smiling Sun Health Services quality indicators, show that quality of care is doubled within 1 year of partnership with LifeNet, all for a marginal cost of \$1 per patient visit.

The Need

Access to effective and efficient healthcare services without any difficulty is one of the essential parameters to consider for a country's sustainable development. Though developing countries put much emphasis on improving their healthcare services, the disparity between service consumption of rural communities compared to their urban counterpart is still very visible.

The Innovation

LifeQube, a division of LifeSense, aims to improve healthcare and utility services through Information and Communication Technologies (ICT) and, more importantly, through use of internet based cellular technology. Some of their technology, devices, and apps include an HIV disease management platform, LIFEASSIST software, diabetes disease management platform, and Mobiqube platform.

The Impact

Hand-held devices and applications are significantly cheaper, and require very little training, while supporting mobility needs of patients and medical practitioners who are always on the move. LifeQube believes that "mHealth" can provide an extension to an already existing e-Health infrastructure employed by private and public healthcare institutions in both rural and urban areas.

LifeSpring Hospitals

Care delivery | For-profit

INDIA



The Need

A lack of affordable, high quality maternal care in India forces low- and middle-income women to choose between home deliveries, low-quality, poorly resourced public hospitals, or incurring debt to access expensive private hospitals.

The Innovation

LifeSpring developed a unique combination of service specialization, right-skilling of clinical workforce, evidence-based clinical protocols, high asset utilization, a “no frills” approach, and customer focus that allows delivery of high-quality, affordable care targeting the urban working poor.

The Impact

LifeSpring serves 35,000 pregnant women each year, has delivered 23,000 babies at one-fourth the cost of competitors and created medical records for 100,000 low-income women. LifeSpring currently operates 12 hospitals using 32 doctors and 120 nurses.

LiveWell

Care delivery | For-profit

KENYA



The Need

In densely-populated, low-income neighborhoods of Nairobi, Kenya, there is a large need for improved access to healthcare that is affordable, high-quality, and located in a convenient place for communities.

The Innovation

LiveWell is a primary healthcare company that uses a “hub-and-spoke” model to serve urban, low-income populations in Nairobi, Kenya. In this model, a main clinic (hub) is supported by several satellite clinics (spokes) run by nurses. Spokes offer basic primary care and lower-level urgent care; hubs offer these same services, as well as some basic specialty care and lab tests. Hub and spoke clinics are independently owned by nurses and doctors, and receive support services from LiveWell. LiveWell provides the upfront startup capital for a healthcare provider to open a clinic; the provider pays LiveWell back over the course of five years, during which time they receive back-office support services from LiveWell (including claims processing, referral from spoke to hub clinics, training, quality improvement, and supply chain) and are branded as a LiveWell Network clinic. After those initial five years, the provider who owns the clinic will pay an annual fee to LiveWell in order to continue to receive back-office support and remain in the network.

The Impact

Since their founding in 2009, LiveWell’s services and processes have helped to increase the efficiency of clinic operations. Their business support has also helped to increase the retention of health workers in their neighborhoods of operation and increase the number of health workers who opt to open their own clinics in the LiveWell network.

Living Goods

Care delivery | Non-profit

**KENYA, MYANMAR, UGANDA,
ZAMBIA**



LV Prasad

Care delivery | Non-profit

INDIA



The Need

Malaria, diarrhea, and pneumonia cause the majority of the nearly 6 million early childhood deaths worldwide. While many of these deaths are avertible, access to preventative treatments can be difficult because of diminishing supplies in public facilities and high drug costs in private facilities. Community Health Workers are crucial in bridging the gap between care and treatment, but they are often overworked, underpaid, and undertrained.

The Innovation

Community health workers are recruited, properly equipped and trained with Living Goods' empowering model, where they become entrepreneurs as well as health liaisons. Using mobile technology, they earn income based on sales and incentives of high impact products such as solar lamps and fortified foods. Community Health Workers are motivated and patients who need help receive faster and more efficient treatment with supplies that are available.

The Impact

The mobile technology that all health workers within the Living Goods model hold has shown that the technology ensures timely follow ups, proper diagnosis and treatment, as well as adherence to treatment. Data from this technology also provides feedback to supervisors, so they can further assist in the training of health workers. While there are similar programs, this model is far cheaper, as well as more effective. A randomized controlled trial conducted in Uganda showed a 27% reduction in child mortality, 50% fewer counterfeit medications and 17% lower drug prices.

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The Need

India accounts for 8.1M of the global blind and 20% of the world's visually impaired. However, patients in India often lack access to basic high-quality eye-care services and the poor, who are most affected by visual impairment and blindness, are largely prohibited by cost from seeking care.

The Innovation

The LVPEI Pyramid of Eye Care model delivers care at all levels, from community outreach to advanced specialties including cornea transplants. A focus on efficiency in clinical operations and a tiered pricing system through which wealthy patients subsidize lower income patients allow LVPEI to provide high-quality care to all, regardless of ability to pay. LVPEI has also integrated research and education directly into their model of care delivery to drive constant clinical and workforce improvements.

The Impact

Since its founding 26 years ago, LVPEI has grown to a large network serving over 15M people across all levels of care and has performed more than 600,000 surgeries. About 50% of patients receive care free of charge.

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Lwala Community Alliance

Care delivery | Non-profit

KENYA



The Need

Traditional birth attendants are some of the most crucial and significant members of communities, especially where access to healthcare is poor. In the Lake Victoria Basin, maternal and child mortality rates are high, and there is an increasing distrust between communities and local health workers, particularly traditional birth attendants.

The Innovation

Lwala Community Alliance has partnered with government health centers to provide coaching to clinicians and to train and pay traditional birth attendants the same as community health workers, allowing them to be at the forefront of maternal and child care. The health outcomes, scalability and long-term sustainability are driven by Lwala's community centered approach, which was backed by the Ministry of Health.

The Impact

Health outcomes, scalability and long term sustainability are driven by a community centered approach. A study comparing the Lwala model to a dozen control sites found a 300% increase in contraceptive use and near 100% skilled delivery rate. Another study discovered a 64% lower under-5 mortality rate for communities that used the Lwala model compared to other communities in the region.

Médica Santa Carmen

Care delivery | For-profit

MEXICO



The Need

Kidney disease is one of the leading causes of death worldwide and in Mexico. Mexico leads the world in end-of-stage renal disease (ESRD) incidence and key ESRD drivers such as diabetes and obesity. In Mexico, children make up a large portion of the ESRD burden. The high disease burden is compounded by a public healthcare system seriously lacking in quality prevention and treatment of kidney disease.

The Innovation

Médica Santa Carmen is a certified kidney care provider in compliance with national standards and boasts a zero in-clinic mortality rate and a reputation of trust and confidence. The Médica Santa Carmen clinic incorporates the latest technologies and is strategically located near bus stops and a major highway. Charges are based on patients' ability to pay and the clinic frequently works with IOU's, in addition to cross-subsidizing costs for patients that cannot afford to pay. Costs are kept low through operational and supply chain efficiencies, reducing mistakes, and treating a high volume of patients.

The Impact

Médica Santa Carmen opened their first clinic in 2011 and is currently building their second and third clinics. Since 2011, Médica Santa Carmen has provided 20,000 treatments and employs approximately 30 people at their flagship clinic. By 2016, Medica Santa Carmen plans to operate 7 to 10 clinics serving more than a thousand patients in kidney care as well as related therapies and services.

Medicall

Care delivery | For-profit

MEXICO



Medicall Home
Tu acceso a la salud.

Microclinic International

Care delivery | Non-profit

**NICARAGUA, EGYPT, GAZA,
GUATEMALA, INDIA, JORDAN,
KENYA, LEBANON, MEXICO, QATAR,
USA, WEST BANK**



MICROCLINIC
INTERNATIONAL
Making good health contagious

The Need

Individuals living in semi-rural areas often face challenges in accessing high quality healthcare due to lack of adequate healthcare professionals and facilities, high costs, and variations in quality.

The Innovation

MedicallHome leverages the existing network and billing platform of the leading telecommunications company in Mexico, TelMex, as part of a joint venture to provide customers with 24/7 access to medical advice over the phone, eliminating unnecessary travel and payment for clinic visits.

The Impact

MedicallHome serves 5 to 6 million individuals annually in Mexico for the cost of \$5 USD per family per month, charged through their phone bill. Nearly two-thirds of patient issues are resolved over the phone and emergency visits decreased from 6% to 1%. Patients who need to see a doctor can go to any of the 6,000 doctors and 3,200 health care delivery sites in the MedicallHome referral network at a significant discount.

The Need

Chronic disease – such as cardiovascular disease, obesity, and diabetes – is a global epidemic. Patients, providers and systems are looking for revolutionary ways to prevent and manage chronic diseases.

The Innovation

Microclinic International, founded in 2005, views chronic disease as “socially contagious” – lifestyle factors and habits (such as diet) that contribute to these diseases are spread through social networks. Microclinic International works with national and local partners to develop strategies for refocusing healthcare delivery on social units (groups of family and friends), building the capacity of health providers, elevating the role of prevention, and empowering communities to engage in chronic disease prevention and management. Microclinic operates in vulnerable communities around the world. In most locations, such as the Middle East and the United States, Microclinic International's programs focus on managing cardiovascular disease, obesity, and diabetes; in Kenya, they have expanded their focus to HIV/AIDS and are using social groups to improve medication adherence and patient retention in care; in Latin America and the Caribbean, they have piloted reproductive and maternal health programs.

The Impact

In Jordan, the results of a randomized controlled (RCT) trial showed that program participants sustained a significant drop in HbA1c (0.97 points, on average) two years post-intervention. In another RCT in Kentucky, at least one indicator of chronic disease improved among 95% of people who completed the program, and over the next 16 months, 80% of those participants were able to maintain or further improve upon these indicators. Beyond improvements in individual and community health, this translates into improvements in healthcare delivery and reductions in the cost of disease prevention and management.

MicroClinic Technologies

Product/technology | For-profit

KENYA



 MicroClinic Technologies

The Need

Rural clinics provide over 80% of health care in Kenya. However, most clinics operate at 25% capacity or less, due to poor management of patient volume, and nearly 40% of patients are misdiagnosed, due in part to a lack of diagnostic equipment. Without reliable means to track the inventory or quality of medicine, clinics also face supply shortages and are at greater risk of selling counterfeit medicine.

The Innovation

MicroClinic Technologies' ZiDi application enables clinics and hospitals across Africa to improve the efficiency of health services by improving monitoring and evaluation of patient care, medicines, and personnel. Offered as a prepaid service, ZiDi includes an electronic medical record system and real-time drug dispensing tracking. Patient encounters, collected revenues, and drug inventories are all tracked through the application. Reports on staff productivity, financial data, and service utilization rates can also be created to reduce the burden of administrative duties.

The Impact

The ZiDi application is used by more than ten private clinics and five public facilities serving more than 100,000 patients.

MicroEnsure

Financing | For-profit

BANGLADESH, GHANA, GRENADA,
INDIA, JAMAICA, KENYA, MALAWI,
MALAYSIA, MOZAMBIQUE, PAKISTAN,
PHILIPPINES, RWANDA, ST. LUCIA,
TANZANIA, ZAMBIA



 MICROENSURE
Helping the poor weather life's storms

The Need

Access to financial services, in particular health insurance, for individuals at the base of the pyramid is extremely scarce in developing countries with little health insurance infrastructure. For example, nearly 95% of Ghanaians have no health insurance coverage and, with one-third of the country's population living on less than \$2 per day, there is a critical need for protection against a number of financial risks.

The Innovation

MicroEnsure was founded to bring insurance coverage to the bottom of the pyramid. MicroEnsure leverages existing relationships between consumers and major brands, such as telecom companies, to deliver affordable insurance at scale. The organization utilizes mobile technology, customer insight, and innovative product design to create viable insurance products. MicroEnsure has also tested a primary care project in Tanzania, using telemedicine, community health workers, and a central clinic, with 15,000 clients enrolled.

The Impact

MicroEnsure makes insurance accessible for over 4 million people around the world, 80% of whom have never been insured before. Two million clients are in Africa and served through subsidiaries in Kenya, Ghana and Tanzania, as well as satellite operations in Malawi, Mozambique, Rwanda, Zambia and Zimbabwe. MicroEnsure hopes to expand its insurance coverage to 10 million people and its primary care project to 5 new sites serving 250,000 customers in the next 3 years.

MiracleFeet

Care Delivery | Non-Profit

Bangladesh, Bolivia, Brazil, Burma, Cambodia, Democratic Republic of the Congo, Ecuador, Guatemala, Guinea, India, Indonesia, Iraq, Liberia, Madagascar, Mali, Nepal, Nicaragua, Nigeria, Paraguay, Philippines, Senegal, Sri Lanka, Sudan, Tanzania, Uganda, Vietnam, Zimbabwe



The Need

A leading cause of physical disability, clubfoot affects one in every 800 children worldwide with 90 percent of them in countries with limited access to proper treatment.

The Innovation

MiracleFeet is the only organization working exclusively on clubfoot treatment compared to other organizations in the disability field. They have designed an innovative brace specifically to meet the need for a high quality/ low-cost clubfoot brace to be used in LMIC, breaking the cycle of high-quality care being cost-prohibitive for clubfoot patients.

The Impact

To date, MiracleFeet has treated over 30,000 children across 22 different countries.

MTTS

Product/technology | Non-profit

BENIN, EAST TIMOR, GHANA, HONG KONG, MALAYSIA, MYANMAR, THE PHILIPPINES, SINGAPORE, THAILAND, VIETNAM



The Need

Every year nearly four million newborns die from diseases, a majority of which are easily treatable with access to lifesaving neonatal equipment. However, many of these medical devices have high operational costs and are not suitable to the needs of hospitals in remote and resource-constrained settings.

The Innovation

MTTS designs safe, simple, effective, and low-cost medical equipment for neonatal intensive care units in low-resource hospitals. MTTS also provides free installation, training, and after-sales support to providers for the implementation of their devices. MTTS technologies include technology for respiratory distress syndrome, two kinds of phototherapy for neonatal jaundice, warmers for hypothermia, and hand sanitizers for infection control.

The Impact

MTTS distributes their products in ten different countries, through partnerships with more than 250 hospitals and NGOs. Since 2004, MTTS medical devices have provided therapy to over 700,000 babies.

Muso

Care delivery | Non-profit

MALI



The Need

Mali has one of the highest rates of maternal and child mortality in the world. Though care exists, there are significant barriers to access, including fees, poorly trained clinic workers, and lack of transportation to health centers. This results in preventable deaths from diseases such as malaria and pneumonia.

The Innovation

Muso (which means “woman” in the local language of Bambara) redesigns health care delivery to be proactive, rather than reactive. Community health workers conduct door-to-door home visits and screen and treat common diseases impacting women and children. Muso also trains staff at government clinics and removes point-of-care fees, improving the access and quality of care provided in local health clinics.

The Impact

Since its founding in 2005, Muso-trained community health workers have provided nearly 2M home visits in Mali. A three-year Harvard University study found that implementation of Muso decreased child mortality from 16% to 2%, doubled the percentage of children receiving early treatment for malaria, and increased patient visits in the home and clinics by 10 times.

Narayana Health

Care delivery | For-profit

CAYMAN ISLANDS, INDIA, MALAYSIA



The Need

High-quality tertiary and specialty care, including cardiac care and cancer treatment, are unaffordable for most of India's poor. However, incidence of heart disease, cancer, and chronic conditions like diabetes, are projected to increase.

The Innovation

Narayana's process innovations including highly standardized processes and protocols, assembly-line inspired surgery procedures, right-skilling of clinical workforce, and telemedicine enable Narayana to provide specialized care with quality outcomes that rival those of the UK and US at a fraction of the cost.

The Impact

Narayana increases access to care by dramatically reducing costs: open-heart surgeries at Narayana cost \$2,000 USD (or less) compared to between \$20,000 and \$100,000 in the US. In addition, Narayana provides free care for patients who are unable to pay. Narayana has 18 hospitals in India and also serves 800 remote locations through telemedicine, including 53 locations in Africa.

NationWide

Product/technology | For-profit

INDIA



The Need

In India, where the private sector delivers the vast majority of healthcare, access to care is connected to a person's location and income. Rural and low-income populations are often left without reliable or affordable access to quality care. Young doctors prefer careers as hospital specialists over primary care, as the latter lacks a structured training program and attractive career opportunities. Due to the resulting shortage of primary care providers, patients tend to seek out routine care at hospitals. Currently, primary care is not covered by insurance.

The Innovation

NationWide Primary Healthcare, founded in 2010, has built a structured primary care delivery network, using a combination of physical clinics (company-owned and franchisee) and telehealth to improve the sustainability of primary care delivery. Their mission is for every family in India to have a trusted family physician. NationWide's Continued Medical Education (CME) program helps build a specialized career path in primary care for general practitioners and family physicians, and has helped the organization attract and retain doctors. Standardized training and testing requirements, clinical protocols for common conditions, and regular provider assessment help to ensure high quality of care across the network. NationWide is forging key partnerships with insurers and corporates to cover primary care under insurance for the first time in India.

The Impact

NationWide currently operates more than 25 clinics, and estimates that they benefit more than 500,000 people. NationWide has made primary care popular among young doctors through its innovative training programs and attractive career options. Through its protocol-driven care and clinical audits, NationWide is establishing a quality standard in primary healthcare that is a first of its kind in India.

Naya Jeevan

Financing | For-profit/Non-profit hybrid

PAKISTAN



The Need

The vast majority healthcare spending in Pakistan is out-of-pocket; there is very little government coverage and insurance is typically only available for corporate employees. As a result, shop owners, domestic staff, contract workers, and other informal-sector workers are at risk of falling into poverty caused by medical emergencies.

The Innovation

NAYA JEEVAN is pioneering a health insurance and catastrophic care coverage plan developed in partnership with (and often subsidized by) multinational corporations that pool risk and create bargaining power to negotiate lower rates. This insurance coverage targets individuals who play a critical role in the multinational's business (e.g., shop owners selling the corporation's products or domestic workers of senior executives). NAYA JEEVAN has created value-added health and preventative services, such as health education and an emergency health fund, to this product.

The Impact

NAYA JEEVAN's plan costs about \$2 USD per month and has enrolled 23,000 members across more than 100 corporate, academic and non-profit partners.

NephroPlus

Care delivery | For-profit

INDIA



The Need

Anywhere from 200,000 to 400,000 Indians suffer from kidney failure each year. Kidney patients in India have a 33% chance of becoming cross infected with Hepatitis B, Hepatitis C and/or HIV during treatment. An increase in the sale of kidney care products at a rate of 30% per year since 2006, demonstrates an increasing demand for kidney services. Increasing incidence of kidney disease and diabetes, a risk factor for kidney disease, will further compound the shortage of providers and lack of affordable care that leave many without access to high quality treatment.

The Innovation

NephroPlus manages a chain of kidney care clinics specializing in high quality, affordable kidney care, including kidney dialysis, at home dialysis, removal of kidney stones and other minor urological surgeries as well as nutrition and kidney care education for patients. A patent-pending innovation and standardized clinical protocols and operating procedures help prevent cross-infections. By partnering with other health care providers as outsourcing agents, NephroPlus drives specialization and standardization of services in turn increasing patient volumes as well as the quality of care.

The Impact

NephroPlus serves 1,200 patients per month and has conducted more than 400,000 dialysis sessions since inception at a 30% to 35% lower cost than corporate hospitals in India. NephroPlus currently operates 11 centers in Southern India.

Noora Health

Workforce training | Non-profit

INDIA



The Need

Hospitalized patients and their families often receive limited knowledge on how to manage their medical event or chronic condition outside of an inpatient setting and lack quality pre-discharge education and support systems. Even in high-literacy patient populations, only 20% of medical professionals' advice is remembered after leaving the hospital, leading to poor care at home and preventable hospital readmissions, which drives up costs (for both the patient and the hospital) and reduces patient satisfaction.

The Innovation

Noora Health creates customized patient training programs at hospitals, and facilitates the training of patients and their families with highimpact skills to bridge the gap from hospital to home.

The Impact

Noora Health has trained more than 15,000 caregivers reaching more than 10,000 patients. After program implementation, participating hospitals have increased patient satisfaction by 55%, and reduced 30-day preventable complications and readmission rates by 36% and 24% respectively in post- surgical patients.

North Star Alliance

Care delivery | Non-profit

MULTIPLE COUNTRIES IN AFRICA



One Family Health

Care delivery | For-profit/Non-profit hybrid

RWANDA



The Need

Populations such as truck drivers and sex workers facing increased health risks, as well as rural communities, systematically experience limited (and often no) access to health care.

The Innovation

North Star converts shipping containers to repurposed mini-clinics. These Roadside Wellness Centers (RWC) are semi-mobile and rapidly reproducible primary care and STD/STI centers staffed with local health care workers and behavioral change communication specialists. North Star uses a sophisticated technology system, COMETS, to track health trends and identify optimal locations for RWCs and to allow patients to access their records at any clinic.

The Impact

North Star currently operates 29 RWCs in East, West, and Southern Africa, and in 2012 delivered treatment, testing, and counseling to 219,681 people.

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The Need

Rwanda's national health insurance scheme covers 90% of Rwandans. However, this insurance is only accepted at public facilities and many Rwandans must walk long distances or pay high costs for transportation in order to access healthcare. In addition, the public community health centers are overburdened and underfunded, making basic primary care difficult to obtain.

The Innovation

One Family Health manages a nurse-run, business franchise chain of primary care clinics (called health posts) established through a public-private partnership with the Rwandan Ministry of Health, GSK, and EcoBank. Each nurse-owned health post provides basic primary care for the most common causes of mortality across sub-Saharan Africa. The One Family Health network hires and trains local nurses to operate the posts and utilizes mobile technology to update patient records and keep track of clinic utilization and stock information in real time.

The Impact

One Family Health operates 40 health posts, each serving an average catchment area of 5,000 people, with plans to grow to 500 posts by 2017. Within the first seven weeks of 2013, One Family Health clinics served 56,000 patients. One Family Health intends to expand its model to additional countries in East Africa.

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OneWorld Health

Care delivery | Non-profit

NICARAGUA AND UGANDA



Operation ASHA

Care delivery | Non-profit

CAMBODIA, INDIA



The Need

Affordable, high quality primary care continues to be intermittent in low income countries. Public health systems are typically underfunded and understaffed, leading to poor diagnoses and treatment, as well as high medication costs.

The Innovation

OneWorld Health provides both quality and affordable healthcare to communities which do not have access or cannot afford private facilities but do not have properly functioning public health systems. OneWorld Health's model builds medical facilities that become sustainable within 18 months, and these are funded by patient fees and staffed locally. Because of the community investment, outreach efforts have improved overall community health and continue to be sustainable in maintaining this improved health.

The Impact

OneWorld Health facilities have improved the quality of care and continuing health education for government medical professionals as well as overall community health. OneWorld's 177 staff members have treated over 200,000 patients and there are plans to double those numbers in the next year.

The Need

Around the world, 14M people suffer from tuberculosis (TB), a quarter of whom are in India. TB is curable and often the medication is provided free of charge. However, TB is a highly stigmatized disease and accessing treatment safely, affordably and discretely is often impossible. Further, failure to complete treatment regimes exacerbates the spread of multi-drug resistant TB, which is much more difficult and expensive to treat.

The Innovation

Operation ASHA created a community based program model that uses local workers in areas with high TB prevalence to set up local treatment centers integrated within existing community resources, like temples and shops. The efficacy of the program is ensured by portable fingerprint identification system (eCompliance) that tracks and compiles patient adherence data and alerts health workers to follow up with a patient within 248 hours of a missed treatment. The model also includes outreach and counseling programs to detect and support TB patients.

The Impact

Operation ASHA has successfully treated 30,150 patients while reaching a population of nearly 6 million people in more than 3,000 slums and villages across India and Cambodia. Operation ASHA's eCompliance has reduced default rates to 3%, 3-20 times lower than alternative treatment options.

PACE

Workforce training | For-profit

MEXICO



The Need

Medical practitioners and health workers serving in remote settings in Mexico lack opportunities for continuous education and training to practice in emergency settings.

The Innovation

PACE provides context-specific local and live simulation courses in a variety of disciplines, which take into consideration local factors in emergency treatment such as availability of medical equipment and cultural barriers. Blended courses are offered online and in practical workshops, along with a post-course telementoring. The program is beginning to integrate mHealth and telemedicine into its strategic plan. Training of providers in more remote areas allows for patients to be treated earlier in the course of their illness, when basic interventions are more effective. This increases the likelihood of survival in emergencies.

The Impact

PACE has trained over 30,000 health providers per year in different knowledge and skill sets as well as 10,000 providers in emergency obstetrics courses, indirectly impacting over one million lives. For example, the State of Chiapas significantly reduced maternal mortality by 32% in the first two years of PACE training.

Penda Health

Care delivery | For-profit

KENYA



The Need

Many low-middle income individuals across East Africa lack access to affordable, high-quality health care. Women and their families often face a choice between low-quality care and going without care altogether.

The Innovation

Penda utilizes a high patient-to-provider ratio, unique staffing model, patient-centric approach to care delivery, and a focused set of services that addresses key outpatient needs in order to lower the price of services. Innovative marketing strategies and local partnerships allow Penda to integrate into the community and better understand community needs. In addition, Penda is piloting membership model health plans to test whether this increases access to the right care at the right time.

The Impact

Penda opened its first clinic in early 2012 and is now serving nearly 1,000 patients per month. Penda reached cash flow positive status at its first clinic in July 2013 and now operates a second clinic slated to be cash flow positive in six months.

Possible Health

Care delivery | Non-profit

NEPAL



The Need

Across the globe, out-of-pocket costs for healthcare force 100 million people into serious poverty and cause 150 million severe financial complications. In Nepal, about 81% of the population lives in rural areas with no regular access to quality care.

The Innovation

Possible Health developed an integrated rural healthcare delivery system in Nepal that delivers care to remote, poor populations. In this system, community health workers serve as spokes to reach communities, enrolling patients and providing follow up and continuity of care. CHWs use a mobile-based tool to access protocols and patient records through an open source EHR that is linked with the hubs or coordinated care facilities.

The Impact

After 18 months, Possible developed, deployed, and iterated upon their EMR, it was adapted within 4 weeks. These deployments have been accepted by clinicians, seem technologically appropriate and interoperable with national health information systems.

Projeto CIES

Care delivery | For-profit / non-profit hybrid

BRAZIL



The Need

Many Brazilians face a range of barriers to accessing quality, timely healthcare, such as geographic proximity to a health facility and long waiting times in the public sector. Private healthcare is often too expensive, so 74% of Brazilians rely on the public system. Projeto CIES has developed a model that integrates both the private and public sectors to expand access to underserved populations.

The Innovation

Projeto CIES focuses on treatment, health education and prevention by delivering healthcare through its efficient and strongly committed team. In 2008, CIES began by building the "Health Wagon," a medical mobile health center that was equipped to provide ten types of specialty care to 3,000 patients per month. CIES has since expanded its fleet of mobile medical centers to 88 units. The medical mobile centers are built in vehicles ranging from wagons to containers. Ten different types of units offer more than 22 types of care, including surgeries, medical appointments, and exams. CIES receives contracts, mainly from the government but also from companies/employers, to provide healthcare services. For example, the government might contract with them to support an overburdened public hospital, or provide care in big cities or hard-to-reach rural areas. Care is free for the patients; it is the contracting organization that pays CIES.

The Impact

Projeto CIES Medical Mobile Centers operate in two cities of Brazil, which together serve over 23,000 people each month; CIES is expanding its activities to three additional states, as well as internationally to Paraguay, Colombia, India, and the United States. Since its inception, CIES has worked in more than 30 cities of Brazil, providing care for about 600,000 people. CIES has provided over 1M exams/surgeries in seven years, and has helped to dramatically reduce waiting times.

Pro Mujer

Care delivery | Non-profit

**ARGENTINA, BOLIVIA,
MEXICO, NICARAGUA, PERU**



The Need

The chronic disease burden is increasing in all countries. Longer life expectancy paired with decreased physical activity and worsening diets result in an increased rate of chronic diseases such as heart disease, hypertension, diabetes, and cancer.

The Innovation

Pro Mujer is a women's development organization that is primarily known as a financial services provider. Pro Mujer bundles financial services with healthcare delivery at the point of service. Customers typically come in for loan services and then are also able to receive healthcare, including chronic disease prevention and early detection, on site. Pro Mujer has also been testing prepaid packages as a way to promote access to in-demand health services in a sustainable way. This bundled set of services is included in the client's loan or savings account, guaranteeing health access to all Pro Mujer clients.

The Impact

Pro Mujer currently runs 130 branches across 5 countries, with 1,300 employees. Pro Mujer is expanding the range of health services provided in each location and plans to establish 15 new sites, serving 70,000 people in the next 3 years.

PurpleSource

Systems support | For-profit

NIGERIA



The Need

The private healthcare delivery system in Nigeria provides 60% of all healthcare services, though it is extremely fragmented; 90% of facilities are smallholder sole-proprietorships. Poor infrastructure, a shortage of trained health professionals, low management capacity, and a lack of access to finance and technology often leads to unsustainable business performance and poor patient outcomes. These challenges have severely hindered the ability of the Nigerian private sector providers to achieve scale and meaningful impact on the communities they serve, and this is reflected in the poor health indices of the country.

The Innovation

Founded in 2012, PurpleSource has developed a model to de-fragment and scale the capacity of the healthcare system. PurpleSource aggregates private healthcare providers and deploys finance, management, quality certification, capacity-building, and technology solutions to integrate care across practices and transform healthcare service delivery from fragmented sole proprietorships to consolidated health systems. PurpleSource provides the platform required to scale medical enterprises and optimize their clinical, financial and operational processes to deliver affordable, quality healthcare to patients and value to payers. The PurpleSource model is focused on primary healthcare, preventive services, and care management.

The Impact

PurpleSource currently provides affordable quality care across six integrated facilities in mainland Lagos State, Nigeria that serve 100,000 registered individuals who make about 30,000 visits each year.

Reina Madre

Care delivery | For-profit

MEXICO



The Need

Mexico struggles to provide adequate healthcare with crowded hospitals and shortages of both medicine and supplies as demonstrated by the high infant mortality rate of 8 infants die for every 1,000 newborns. 33% of the population, which is low and middle income, disproportionately experience these pressures.

The Innovation

Reina Madre provides culturally sensitive and affordable solutions for women's health services. This specialized clinic delivers ObGyn, prenatal, ultrasound, and neonatal consultations at costs 30-50% less than private institutions. Additionally, a range of educational courses are provided such as: breastfeeding orientation, pre-natal courses, C-section and natural birth lectures, CPR/newborn care, and the NEWMOM expo.

The Impact

In one month, RENA MADRE achieves over 2,500 consultations. RENA MADRE holds the title for most babies delivered by a private institution in Toluca. In just over a year, this organization has seen almost 15,000 women – 31% of these experienced their first visit to a ObGyn. 88% of those RENA MADRE serves have incomes less than 900 USD per month. There have been 0 maternal deaths at RENA MADRE.

Riders for Health

Systems support | Non-profit

GAMBIA, KENYA, LESOTHO, MALAWI, NIGERIA, ZAMBIA, ZIMBABWE



The Need

Lack of access to healthcare services in areas with poorly maintained roads and challenging terrain. Providers unable to safely and reliably reach remote areas or transport lab samples and medicines.

The Innovation

Riders for Health developed an end-to-end transportation solution for ministries of health and other health-focused organizations, which can include the following components: accurate budgeting and planning appropriate vehicle selection, driver and rider training, route planning, preventive maintenance, fuel management, and monitoring and evaluation for a set cost-per-kilometer. These systems can utilize already existing fleets of vehicles, or the vehicles can be leased out as a complete service, including drivers, where Riders retains ownership of the asset.

The Impact

Fleets managed by Riders have a 300% longer lifespan and outreach health workers are able to reach 6 times as many people and go 4 times further when using Riders-managed motorcycles. Riders currently employs 422 people and manages 1,400 vehicles.

RubiconMD

Device or Technology | For-Profit

UNITED STATES, SPAIN



The Need

A double paradox in healthcare is that 40 percent of the visits to specialists are unnecessary, and at the same time, more than half of the population face significant barriers accessing specialty care.

The Innovation

RubiconMD decided to solve this challenge by supporting primary care clinicians with access to specialists' expertise via electronic consults (eConsults). This results in significant improvement in primary care clinicians' care plans, avoidance of unnecessary referrals and tests, and much faster access to the right care plan for the patient.

The Impact

PCPs using RubiconMD report that eConsults result in a significant improvement of the care plan in 80 percent of the times and avoid unnecessary steps (referrals, diagnostics, and procedures) 52 percent of the time.

The Need

While 78% of the Indian population lives in rural areas, only 2% of medical professionals are available in these regions resulting in a lack of affordable, accessible and reliable health services. Retaining high quality providers in rural areas is traditionally difficult to do given limited infrastructure, payment and opportunities for career advancement.

The Innovation

Rural Health Care Foundation operates a chain of primary healthcare centers offering general medicine, ophthalmology, dental and homeopathic services to low-income, rural populations where access to healthcare is sparse. Patients pay about 60 rupees (equivalent to \$1 US dollar) for a clinic visit which provides integrated, holistic care. Patients receive a diagnosis, necessary medicine and referrals to secondary/tertiary care providers to receive free surgeries. Clinics are structured and costs are managed so that they break even after 3-4 years of operation and only require \$12K to set up and reach this point. Finally, doctors are offered free room and board through this model and provided additional financial benefits to incentivize them to practice in these rural areas.

The Impact

By pooling purchasing, Rural Health Care Foundation is able to offer patients diagnosis and medicines at very low cost and still achieve operational sustainability. By integrating into other provider networks, patients are connected for free to additional surgeries that they typically have difficulty accessing. On average, doctors working for Rural Healthcare Foundation have remained in rural areas 9 years operating in this business model (roughly 3 times longer than comparable practices).

Rural Health Care Foundation

Care delivery | Non-profit

INDIA



Safe Water and Aids Project (SWAP) Systems support | Non-profit

KENYA



The Need

Households in remote and underserved areas in western Kenya face the highest burden of HIV and infant mortality in the country, yet lack access to health information and products that can help alleviate these conditions. Nearly half (47%) of families in the Western province lack access to improved water supplies and 66% lack adequate sanitation. In addition, women affected by HIV in the province often face stigma and lack economic security.

The Innovation

SWAP operates Jamii centers, which serve as a one-stop shop for quality health products and information. Centers are staffed by Community Health Promoters drawn from HIV support groups in the area and trained on a range of topics including safe water, primary health care, and behavioral change techniques to promote positive health behaviors in the community. The Community Health Promoters also conduct door-to-door sales of health and hygiene products. SWAP's model is designed to improve both disease prevention and socio-economic empowerment of the target population.

The Impact

Founded in 2005, SWAP operates five Jamii centers across Kenya's Western Province, serving over 30,000 households and 150,000 individuals through their door-to-door health promotions and products.

salaUno Care delivery | For-profit

MEXICO



The Need

Cataracts are the second leading cause of vision impairment in Mexico, causing 50% of blindness cases. The aging of the Mexican population and increasing incidence of diabetes will lead to increases in cataracts and other vision impairments. Many Mexicans are unable to afford cataract surgery at private, more expensive hospitals and there is a large backlog of patients waiting for surgery.

The Innovation

By replicating many of the principles from Aravind Eye Care (India), salaUno has increased clinic efficiency through specialization, cost-effective surgery techniques, economies of scale, outreach campaigns, a rightskilled workforce, time-driven activity-based costing, and tiered pricing. Their hub-and-spoke model reaches patients at all levels of care.

The Impact

salaUno can provide cataract surgery at one-third to one-half the cost of competitors and the pilot clinic hit positive cash flow status within the second month of operation.

Sevamob

Care delivery | For-profit

INDIA



SEVAMOB™

The Need

Life expectancy in India is 14-18 years lower than that in many developed countries. A lack of primary healthcare in India, particularly in smaller cities and villages outside of major urban centers, results in poor health outcomes and shortened life expectancy.

The Innovation

Sevamob delivers primary healthcare through mobile clinics to low-income groups for an annual subscription ranging from \$4 USD for children and \$10 USD for adults. Mobile clinics are supplied with software (operable offline and from remote locations) to track patient medical records. Sevamob also launched India's first telehealth marketplace where patients are able to receive video consultations, second opinions, and in-clinic appointments from participating health providers.

The Impact

Sevamob currently has 6,000 subscribers to its mobile clinic service and serves 10,000 people through the telehealth marketplace, with a network of more than 300 healthcare providers.

Solar Ear

Product/Technology | For-profit and Non-profit hybrid

BOTSWANA, BRAZIL, CHINA AND CANADA



**SOLAR
EAR**

The Need

About 624M people across the world have a hearing loss. However, hearing aids and the battery replacements required to maintain them are typically priced out of reach for those in low-resource countries. The burden of untreated hearing loss is often compounded by lack of equal employment and educational opportunities, especially for children.

The Innovation

Solar Ear offers a low-cost, rechargeable hearing aid invented by its workforce who are deaf. These workers also invented a solar charger and rechargeable hearing aid battery which costs the same as a regular battery, but lasts 2-3 years versus 1 week. The solar-powered, FDA-approved hearing aid starts at \$60, which is a fraction of the cost of traditional hearing devices. Many of its rechargeable aids costs less than what people would pay for batteries only. Employing people who are the deaf to build hearing aids, Solar Ear provide employment and improves quality of life for adults with hearing loss. Solar Ear also transfers its technology for free to like-minded organizations in other countries, so that they can hire people with a disability and help people with a hearing loss in their regions. Solar Ear is in the process of developing a program in which a micro-entrepreneur can test for \$1 someone's hearing using a cell phone with the results being sent via cloud to Solar Ear. Solar Ear would then be able to remotely program the user's phone to become a hearing aid for \$15. This will democratize the hearing aid industry making it affordable and accessible for all. This program will help 100M people in the next 5 years.

The Impact

Founded in 2002, Solar Ear has manufactured more than 50,000 hearing aids, 100,000 solar chargers, and 250,000 rechargeable batteries to ultimately prevent the production of more than 10 million zinc air batteries from entering the environment. Further, Solar Ear has employed more than 50 people who are deaf.

Sproxil

Product/technology | For-profit

**GHANA, INDIA, KENYA,
NIGERIA, USA**



SPROXIL

The Need

An estimated 15% of drugs sold in the world are fake and in Africa and Asia this figure can range from 10% to 30%, compromising 10% of the global medicine market. In addition to therapeutic failure and drug resistance resulting from counterfeit medications, anywhere from 30 to 2,500 patients have died from individually recorded instances of counterfeit drug sales every year. Further counterfeit drugs decrease incentives for pharmaceutical companies to enter markets, potentially limiting access to needed drugs.

The Innovation

Sproxil created a mobile-based drug verification tool, Mobile Product Authentication (MPA)™ that enables tracking and verification of drugs at every step in the supply chain including at the point of consumption. Through SMS messaging, it allows patients to ensure at the moment of purchase that their drugs are from reputable manufacturers and distributors; limiting the negative health impacts of counterfeit drugs and other consumer products.

The Impact

Sproxil has verified over 6 million and counting products as of November 2013, giving everyone along the supply chain the power to quickly and confidently verify the authenticity of a drug at each step, ensuring patient safety.

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SughaVazhvu

Care delivery | Non-profit

INDIA



 **SughaVazhvu**
Healthcare

The Need

The majority of India's population (70%) lives in rural villages, with limited to no access to healthcare services. Rural India also faces a rising chronic disease burden and a lack of preventive services. For most rural Indians, quality medical care is not affordable or accessible.

The Innovation

The SughaVazhvu model provides technology-enabled, evidence-based primary healthcare through a network of clinics in rural Indian villages. SughaVazhvu trains health workers of varying levels of education and licensure to utilize protocol-based medicine and technological innovations, building the skills of the existing rural healthcare workforce. SughaVazhvu also conducts community-based risk screening, subscription-based disease management, and community engagement. A rapid-risk assessment allows them to identify high-risk populations for chronic conditions such as diabetes and hypertension. The data analytic capability built in to their health information system allows SughaVazhvu to monitor population-level health outcomes.

The Impact

SughaVazhvu currently runs a network of seven clinics that reach a population of 70,000 individuals. SughaVazhvu clinics have provided primary healthcare services to 40,000 patients and conducted community-based risk screening for diabetes and hypertension among 6,000 adults. SughaVazhvu plans to establish 100 new clinics, reaching 500,000 new patients, in the next 3 years.

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Swasth

Care delivery | For-profit

INDIA



The Need

With 80% of health expenditures in India paid out-of-pocket, health catastrophes are the single largest cause of poverty in the country and India's urban poor are particularly at risk. They are two to three times more likely than rural poor to experience non-communicable diseases, the second largest cause of death in India.

The Innovation

Swasth India operates a chain of primary care centers in urban slums and adjacent low-income areas. Their one-stop-shop model provides primary and preventive care for half the cost of prevailing market rates. Each Swasth Health Center provides services in a 150 square-foot facility, offering access to a family doctor, rapid diagnostics on site, discounts on drugs, referrals with discounts, and electronic health records.

The Impact

Swasth India reduces healthcare spending in three ways: 1) a 50% reduction in out-of-pocket costs; 2) prevention and early diagnosis of noncommunicable diseases; and 3) locating clinics in the communities of the urban poor, reducing indirect costs for patients, such as travel. Swasth currently operates 8 Health Centers in Mumbai slums. Over the next three years, Swasth plans to expand to 60 Health Centers, reaching 75% of Mumbai's poor and saving patients USD \$2.5 million.

The Need

Clinical effectiveness and operational returns from the billions spent on global health investments annually are near-impossible to measure and many stakeholders question the value and can't see what works and what doesn't.

The Innovation

SystemOne connects these new diagnostic machines in difficult-to-reach, bandwidth-constrained geographies rife with infectious disease. They have created an IoT of diagnostic devices that enables rapid response to outbreaks and visibility into performance, inventory management, user training and more.

The Impact

Their platform provides insight into disease patterns and treatment outcomes, and over 70,000 clinical diagnosis and system alerts to users in over 40 countries each month. To date, they've analyzed over 6 million results across thousands of devices, including over 50,000 instant notifications each month.

SystemOne

Device or Technology | For-Profit

United States, Afghanistan, Bangladesh, Botswana, Burkina Faso, Ethiopia, Guinea, India, Kenya, Kyrgyzstan, Lesotho, Liberia, Malawi, Mozambique, Nigeria, Papua New Guinea, Philippines, Sierra Leone, South Africa, Sudan, Swaziland, Tajikistan, Tanzania, Uganda, Vietnam, Zimbabwe



ThinkMD

Device or Technology | Benefit Corporation

UNITED STATES, BANGLADESH,
KENYA, NIGERIA, SOUTH AFRICA,
SUDAN, ZAMBIA, INDONESIA



THINKMD™

The Need

Nearly 15,000 children die every day from treatable clinical conditions, in particular respiratory distress, pneumonia, dehydration, and sepsis.

The Innovation

THINKMD's diagnostics platform puts advanced clinical logic into the hands of any health worker, regardless of their level of training. It increases a user's adherence to recommended protocols and improves assessment accuracy by using data to continually improve the disease algorithms with geo-tagged health and epidemiologic data.

The Impact

THINKMD has designed its technology to work within existing systems to maximize impact and provide value beyond the financial cost of providing the service. Impact studies have shown: 41% increase in WHO-IMCI compliance, 50% reduction in training, and 100% CHWs recommend THINKMD.

The Need

As a result of poor primary care access, Brazil is plagued by significant over-use of emergency rooms, higher rates of hospitalizations for bearers of non-communicable chronic diseases, and poor maternal indicators.

The Innovation

Thus, TNH Health created chatbots that serve as "virtual nurse assistants" to help educate and monitor thousands of patients at once. The bot does a great job of engaging patients (sending tips, reminders, quizzes, images, videos, etc.), and the more that the patient interacts, the more personalized the content becomes.

The Impact

With the use of their AI-powered bots, a single HCP can monitor upwards of 4,000 patients at once, and do so with substantial frequency and quality. The cost per patient drops upwards of 10X.

TNH Health

Device or Technology | For-Profit

BRAZIL



TNH
health

Twiage

Device or Technology | For-Profit

UNITED STATES, BRAZIL



The Need

Ineffective and inefficient pre-hospital communication between ambulances and hospitals is a major problem which causes sentinel events (preventable deaths) and delays in treatment of stroke and heart attack.

The Innovation

As a result, Twiage was developed to provide novel pre-hospital communication and intra-hospital care coordination technology enabling hospitals and EMS to accelerate life-saving emergency care by reducing the reliance on radio communication. EMS professionals can use Twiage's free and HIPAA compliant app to send notifications with patient vital signs, symptoms and interventions to hospital seconds, along with photos, additional details in text chats, digital voice memos.

The Impact

Twiage can cut the EMS's ED turaround by 10 minutes and improve the turnaround times at the hospital by 65 percent. It accelerates door-to-room times with pre-arrival patient registration and improves clinical outcomes with rich prehospital data, EKGs, and video.

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UE LifeSciences

Product/technology | For-profit

BOTSWANA, INDIA, MALAYSIA,
MEXICO, UNITED STATES



The Need

In LMIC, the survival rate for breast cancer is 40-60% compared to 90% in Europe and the US due to late diagnoses and lack of access to affordable, early-stage screening and diagnosis. Standard solutions in the US are not appropriate or possible for those living in rural areas or with limited income.

The Innovation

UE LifeSciences designed the iBreastExam, a clinically-validated, hand-held, non-invasive and radiation free device that can identify breast lesions early and at the point of care. Its simple design makes it easy to train layworkers and its portability allows iBreastexam to be a low-cost solution that provides instant results in rural, peri-urban and urban settings.

The Impact

Currently, UE LifeSciences operates in five countries. The rollout of iBreastexam started in 16 medical colleges. Installation, training, and program implementation was achieved in less than two weeks. After the initial five months, over 20,000 women have been screened using iBreastexam – thirty early malignancies have been caught and treatment is on-going.

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Vaatsalya

Care delivery | For-profit

INDIA



The Need

70% of India's population lives in peri-urban and rural areas. However, about 80% of health care facilities are located in urban areas. Faced with long distances to travel and high cost for services many go without health care.

The Innovation

Vaatsalya has created an efficient, franchise network model that specializes in a specific and limited set of health services that are in high demand in each local community. Through right skilling the clinical workforce and centralizing administration and management costs across the network, Vaatsalya drives costs down.

The Impact

Vaatsalya currently operates 17 hospitals and serves approximately 100,000 patients per quarter in their outpatient departments and 3,500 patients per month in their inpatient departments.

Vezeeta

Device or Technology | For-Profit

EGYPT, JORDAN, LEBANON, SAUDI ARABIA



The Need

The Middle East and Northern Africa's (MENA) healthcare industry is plagued poor access to providers, weak medical records, and disengaged patients on disease management.

The Innovation

Therefore, Vezeeta was founded to overcome all these pains by empowering patients through data as well as knowledge to better access healthcare through its innovative digital solutions. Through Vezeeta, patients are able to search, compare, and book doctors while engaging with a tool that personalizes their medical education and needs.

The Impact

Vezeeta has more than 200,000 proven assessments and references. Over 800 university professor doctors and 2600 consultants are on the platform.

VIA Global Health

Product/technology | For-profit

ANGOLA, BANGLADESH, BOTSWANA, CAMEROON,
DEMOCRATIC REPUBLIC OF THE CONGO,
ETHIOPIA, GHANA, INDIA, KENYA, LESOTHO,
LIBERIA, MALAWI, MAURITIUS, MOZAMBIQUE,
NAMIBIA, NIGER, NIGERIA, RWANDA, SOUTH
AFRICA, SWAZILAND, UGANDA, UNITED STATES,
ZAMBIA, ZIMBABWE



VisionSpring

Care delivery | Non-profit

EL SALVADOR, INDIA



The Need

Over six billion individuals aren't benefitting from scaled health innovation because fragmentation of the healthcare supply chain in emerging markets dramatically limits access to the tools and supplies healthcare providers need. Thus, access to affordable products, coordinated logistics and administrative support for transactions underpins the needs of emerging economies and quality healthcare.

The Innovation

VIA Global Health uses an e-commerce and logistics platform to connect suppliers and local distributors on a global scale. VIA targets barriers to quality healthcare by informing the consumer about the products available, providing timely and cost-effective solutions and by reducing logistic and transaction costs.

The Impact

Operating in 24 countries, VIA is working to provide multi-national support for medical supplies. By providing products to areas without, this past year, VIA has impacted the lives of 5,050 newborns, prevented over 19,000 cases of post-partum hemorrhage and has reduced barriers for over 12,000 child vaccines in rural locales.

The Need

Vision loss takes a toll on the global economy, as a major cause of decreases in productivity. However, of the 733M people suffering from vision loss worldwide, 70% can be helped with eyeglasses. But access to high quality vision care, including eye exams and glasses, is out of reach for many low-income populations.

The Innovation

VisionSpring developed a highly efficient delivery system that functions at all levels of care. Using a franchise model VisionSpring increases access to eye care professionals, by employing self-sustaining vision entrepreneurs who launch their own 'business-in-a-bag' selling eyeglasses and conducting basic eye exams. They also operate optical stores and mobile vans and partner with like-minded organizations. Partnerships help VisionSpring use economies of scale to decrease costs and sell each pair of eyeglasses for only \$1.

The Impact

VisionSpring employs 9,000 vision entrepreneurs across 16 countries and has sold over 1.5M pairs of eyeglasses.

We Care Solar

Product/technology | Non-profit

25 COUNTRIES



The Need

In areas with unreliable power grids, providers face the significant challenge of loss of adequate light and electricity needed to carry out medical procedures, compromising the safety of their patients.

The Innovation

We Care Solar developed a portable, cost-effective Solar Suitcase that can provide health care workers with reliable lighting, mobile communication, and blood bank refrigeration using solar electricity.

The Impact

Approximately 300 Solar Suitcases are being used in 25 countries around the world with plans to expand regional programs in Sierra Leone, Uganda, and Malawi.

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Wellthy Therapeutics

Device or Technology | For-Profit

INDIA



The Need

India is on the cusp of a massive change in disease patterns; non-communicable diseases (NCDs) which accounted for a mere 30 percent of the disease burden in 1990, now account for over 55 percent of the total disease burden.

The Innovation

Consequently, Wellthy Therapeutics developed one of Asia's only for-prescription digital therapeutic. Using a synergistic combination of A.I and human interventions, Wellthy helps individuals prevent and manage control chronic health conditions.

The Impact

Wellthy's first therapy for Type 2 diabetes is India's first prescribable digital therapeutic, and real-world studies have shown that it drops the mean HbA1C. Fifty-one percent from baseline, 60 percent of people showed a drop in HbA1c, and it led to a 1.13 percent mean HbA1C drop among those who showed a drop.

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WiserCare

Product/technology | For-profit

USA


WiserCare

The Need Patients increasingly express a desire for greater control in health decisions, they need a tool that equips them with information about their evidence-based options and the associated risks, benefits, and side effects, as well as helps them consider and express their preferences and goals for treatment, and partner with their physician or other caregiver to make a smarter, more confident decision.

The Innovation Launched in 2012, WiserCare is an interactive decision-making platform that provides evidence-based, patient-centered treatment guidance for individual patients and their providers. After a patient is diagnosed, the physician's office sends a WiserCare invitation to the patient for completion prior to his or her appointment where treatment options will be discussed. Patients complete a preference assessment that evaluates attributes and outcomes of different treatment options to accurately capture his or her goals and values (i.e. regular medication vs. one-time surgery). WiserCare's algorithm combines the output of this exercise with the highest quality evidence and relevant patient-specific clinical information to determine what treatment paths best fit the patient; it produces a personalized report for the patient, as well as a summary report for the doctor.

The Impact WiserCare's current product and 2016 pipeline cover 80% of the most preference sensitive conditions (e.g. prostate cancer, birth control). The company has a growing portfolio of health system partners across the U.S. WiserCare has been rigorously tested for impact. As an example, with one partner, WiserCare's prostate cancer module improved overall decision quality by 38%, patient knowledge by 55% and resolve to follow through with the decision by 25%, and perception of having made an effective decision by 30%. With such marked increases in decision quality and patient confidence come a host of additional benefits, such as better treatment adherence, higher patient and provider satisfaction, greater patient loyalty to their provider, and lower overall costs.

World Health Partners

Care delivery | Non-profit

INDIA, KENYA

**WORLD
HEALTH
PARTNERS**
 MAKING MARKETS WORK FOR THE POOR

The Need Most parts of rural India lack any form of quality healthcare providers; patients either go without or rely on informal providers. Specifically, there is a large unmet need for family planning and primary care services among rural populations.

The Innovation WHP combines existing social and economic infrastructure with the latest advances in communication, diagnostic and medical technology to establish a large scale, cost-effective health service network and create a viable market for health care services among the most vulnerable populations.

The Impact WHP now serves approximately 3.2M people in 1,000 villages, through 1,800 franchise providers. The organization hopes to expand their operations into additional countries in the coming years.

ZanaAfrica Foundation

Product/technology | For-profit

KENYA



zana
AFRICA
FOUNDATION

The Need

In East Africa, 4 in 5 girls do not have regular access to sanitary pads. Unhygienic alternatives cause urinary and reproductive tract infections, which left untreated, lead to increased susceptibility to HIV and STIs. Girls who lack sanitary pads miss up to six weeks of school annually, putting them at an increased risk of dropping out of secondary school, further compounding their risk of contracting HIV or STIs.

The Innovation

ZanaAfrica delivers a set of low-cost, high-quality products for managing menstruation, ranging from disposable and reusable pads to underpants, coupled with creative health education. Products are sold in flexible package sizes to meet the purchasing needs of women and girls living on \$2 to \$4 USD per day, and are packaged with comics that educate girls about reproductive health. ZanaAfrica sanitary pad products are locally manufactured and are the first to be marketed in Swahili or to feature East African women on the packaging.

The Impact

ZanaAfrica is based in Nairobi, Kenya and partners with distributors across eight counties in Kenya to serve over 10,000 customers to date. ZanaAfrica plans to expand into kiosks to reach over 165,000 customers by the end of 2016.

ZIQITZA

Care delivery | For-profit

INDIA



Z
ZIQITZA

The Need

Road traffic accidents are among the leading causes of death in all countries. However, low-income countries often lack the emergency response infrastructure to provide needed care for accident victims.

The Innovation

Ziqitza increases access to emergency response services for victims of road traffic accidents and mass casualty incidents in under-served populations. Ziqitza's model uses in-house maintenance teams and GPS technology to allow for efficient deployment of emergency response teams. A differential pricing strategy is employed based on patient destination (Ex: private hospital, government hospital or accident victims) and is used to cross-subsidize transportation costs.

The Impact

Ziqitza provides emergency response services in 108 locations throughout India in a public-private partnership with the Indian government.