

Healthcare and technologies: Uruguay's COVID-19 mobile app and Telemedicine Law No. 19,869

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COVID-19 pandemic has caused a global sanitarian emergency which led to different changes in people's life's aspects, such as in work and in healthcare. In order to stop or limit the spread of the virus, countries all over the world have implemented different techniques. As an example, some countries enacted a compulsory quarantine, while others -Uruguay's case- appealed to other techniques such as the obedience of its citizens in abiding to the Government's recommendation of staying at home.

In line with this, some of the measures which were implemented in Uruguay to control the spread of the virus were: (i) exhortations to close or limit public attention of businesses and stores (except for food and drug stores); (ii) exhortations to the population to stay at home and avoid meetings and crowds in general; and, (iii) prohibition of performance of public shows.

Apart from the above mentioned, Uruguay has also implemented measures related to technology, including: (i) the development of Uruguay's COVID-19 mobile app; and, (ii) the approval of Telemedicine Law No. 19,869.

I. Uruguay's COVID-19 mobile app:

Uruguay's COVID-19 mobile app was created to inform about exposition to COVID-19 cases and due to Google and Apple's intervention, it was recently updated allowing the tracking of positive or possibly positive COVID-19 cases nearby (the "App"). The App works within the orbit of the E-Government and Information and Knowledge Society Agency ("AGESIC") and the Public Health Ministry ("MSP").

The App will allow the connection between the citizens with COVID-19 symptoms and the healthcare providers (please refer to section "II. Telemedicine Law" below) so the waiting hours for the consults and attention are avoided or reduced. Also, with the update launched by Google and Apple, the App also sends exposition alerts warning every person about a possible exposition to the virus in case that she or he was near a COVID-19 carrier identified user. The purpose of these alerts is to serve as a prevention measure for the health of the users and their families, reducing the chances of infection. To these effects, each person who tests COVID-19 positive will have the possibility to collaborate with the rest of the population by authorizing such information to be used. In this way, people who have recently been in contact with the infected user, will receive a quick alert, without knowing who the infected person is or where they made contact with the infected person.

The App developers sustain that it employs all the necessary software security guarantees and that it does not reveal any personal data, nor it identifies cell phones or places visited by the user. Also, the App only works if the user enables its activation; once the App is voluntarily downloaded by the user, her/his acceptance shall be required for specific actions.

II. Telemedicine Law

In line with the above, on April 2020 Uruguay approved the Telemedicine Law No. 19,869 (the “Law”), which provides general guidelines regarding the execution and development of telemedicine as a health care service, aiming to improve its efficiency, quality and increase its coverage through the use of information and communication technologies.

The Law defines “telemedicine” as the provision of sanitarian services attention (by sanitarian professionals), where distance is a critical factor, using information and communication technologies for the exchange of information sufficient for the diagnosis, treatment and prevention of illnesses and injuries, investigation and evaluation, and for the continuous education of the sanitarian attention providers, with the purpose to improve people’s health.

Pursuant to the Law, the MSP will determine which services should be acknowledged as telemedicine services. Also, the MSP has been entitled to regulate the Law within a 90-day term and issue protocols regarding the telemedicine services. However, such regulation has not been issued yet.

In addition, the Law provides that all the transmitted and stored information, within the use of telemedicine will be considered sensitive data to the effects of the Personal Data Protection Law, that requires adopting the adequate security and confidentiality measures.

Finally, according to the Law provisions, professionals who live abroad may provide sanitarian services through telemedicine. Notwithstanding the above, such professionals should previously prove before the user’s healthcare service, that they are registered and authorized to practise their profession in their country of residence.

III. Conclusion

Uruguay is implementing a strategy to combat COVID-19 pandemic based on exhortations to citizens regarding the conduct that they should take, accompanied by measures related to sanitarian aspects itself, prioritizing the use of technology.

The new channels of information, communication and attention that were introduced by the App and the Law in our country, have decompressed the on-site healthcare system as well as the telephone communication forms. These two new measures will help Uruguay to continue working on its strategy, set at the outbreak of the pandemic, of preventing a crowded healthcare service system, a critical issue that many countries have had to deal with once it was already late.

Such measures can be identified within a digital strategy that, although it has already gained importance, it will increase with the passing of new regulations and, in particular, with the regulation of the Law on protocols regarding the telemedicine services.

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