DeHealth

Web3.0 Medical Data Economy

DeHealth — AI & Medical Data-Based decentralized App for secure and anonymous storage, management and monetization of depersonalized healthcare data.

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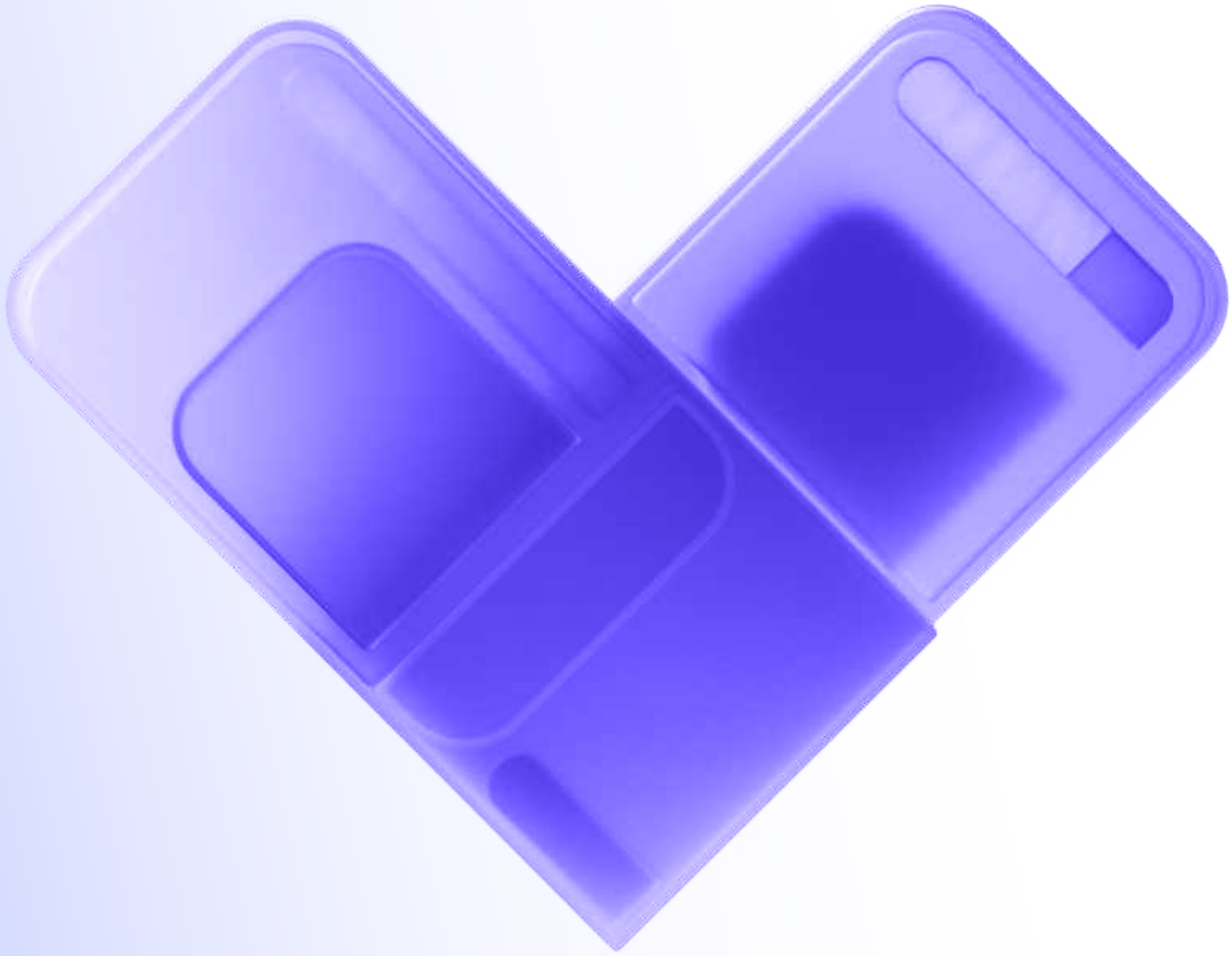
SEPTEMBER 5, 2022



DeHealth Foundation with DeHealth HLT Network inc.

DeHealth

INTRO

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This document includes statements which, to the extent that they do not recite historical facts, constitute forward-looking statements. These statements may be identified by the use of forward-looking terminology, including the terms "believes", "estimates", "forecasts", "plans", "projects", "anticipates", "expects", "intends", "may", "will", "could" or "should" or, in each case, their negative or other variations or comparable terminology, or by discussions of strategy, plans, business prospects, objectives, goals, future events or intentions. These forward-looking statements appear in a number of places throughout this document and include, but are not limited to, statements regarding our intentions, beliefs or current expectations concerning, among other things, the business model of DeHealth, development costs, liquidity, prospects, growth, strategies, and expectations about development of blockchain technology.

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INTRO

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INTRO

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We reserve the right to prepare further offering documents and materials (howsoever named) for the purposes of obtaining registration or relying on any available exemption from the registration requirements under the Securities Act or securities laws of any other state or jurisdiction for the purposes of offering and sale of the DHLT tokens within the United States or other jurisdictions during the main stage of the DHLT tokens sale (as envisaged in this document).

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DeHealth

CONTENT

DeHealth

CONTENT

1. INTRODUCTION

1.1 Intro

Blockchain technology advancement in data security, traceability, and speed are revolutionising the Financial, Logistics, and E-commerce industries - DeHealth is a front runner for bringing blockchain technology into the healthcare industry.

The healthcare sector relies extensively on historical data, from areas of product development to direct patient care. However, the current architecture carries a number of flaws that affect the speed and quality of care provided by industry professionals. By leveraging blockchain technology, DeHealth has created an ecosystem which fixes inefficiencies in a simple, cost-efficient, and patient-oriented way.

With smart architecture, blockchain-based data solutions have the potential to dominate a market which is worth over $30 billion. Currently, purchase deals of healthcare data sets rely on the manual actions of professionals who must perform prior validation of dataset and qualify the usability of the data set for the target use case. Thus, the economic value of healthcare dataset validation is not being effectively redistributed through the economic chain due to the absence of a specialized technological tool-set that can aggregate the information on data set provenance and validation through its whole life cycle. This will allow frictionless real-time on-demand access for other interested third-parties in the market. Similarly, different standards of electronic healthcare records prevent frictionless processing of patient-related data for use in personal telemedicine use cases.

DeHealth's mission is to allow for 3 billion people to securely gain control of their medical data – to store, manage, and monetize it with the help of the DHLT Network and DHLT native coin. DeHealth commits to promote healthcare as a brand new qualitative and financially attractive lifestyle, and to provide the entire healthcare industry with a trustworthy medical data partner.

The solution to this problem is to introduce a new web 3.0 protocol architecture for the future standard of a medical big data-driven ecosystem. Implementation of tools such as Solidity code running on Ethereum mainnet, and other EVM networks such as Python and JavaScript libraries, will ease higher-level integration and facilitate community data marketplace decentralised web applications.

In this paper, we present the DeHealth DHLT Network in a combination of blockchain-based protocols and decentralized infrastructure for medical data storage, its processing, building derivative machine learning models, and their distribution via ecosystem integrations.

1.2 DeHealth Holding

DeHealth Holding is a brand and international association of companies with HQ in the UK and research centers in Israel, the US and New Zealand. DeHealth was established by Ukrainian and Israeli founders. Ukraine currently hosts one of DeHealth's R&D centers with a strong development team. The local sub-brand of DeHealth in Ukraine is the SaaS platform ASKEP, used by over 35,000 doctors and 3,200,000 patients from all over the world who trust DeHealth in healthcare matters.

1.3 DeHealth’s Mission

DeHealth mission is to make healthcare more efficient by building a WEB3 platform for medical data, to provide equal access to healthcare for all people, regardless of country and income level. We all share equal rights for healthcare, but quality and affordability of such services differ radically depending on where you live. DeHealth is looking to eliminate inequality in healthcare by helping people gain better control over their health, privacy and medical data.

2. MARKET PROBLEMS AND DEHEALTH SOLUTIONS

PROBLEMS AND CHALLENGES OF THE HEALTHCARE INDUSTRY

Healthcare is a massive $8.6 trillion industry that includes everything from pharmaceutical companies and hospitals to mental health applications. Experts predict that the market will grow by plus/minus 12% annually through the 2020s. The medical data market was estimated at $32.9 billion in 2021 and is expected to reach $105.73 billion by 2030 growing at a CAGR of 13.85% due to growth in AI applications, data-driven preventive medicine applications, and drug development. Today, the healthcare industry is built on historical data, and industry growth has been increasingly reliant on a larger, more extensive and more reliable data set. However, both users and providers operating in the healthcare segment face the following challenges:

2.1 Data security

According to The National Center for Biotechnology Information, from 2005 to 2019, almost 300 million people suffered from healthcare data breaches. In 2021 only this amount was 45 millions individuals. The number of such violations in healthcare is more significant than in any other industry. Based on a report by Trustwave, a healthcare data record may be valued at up to $250 per record on the black market. Thus, people lose not only their private information, but money as well.

The cybersecurity of the industry is its vulnerability. Most breaches tend to focus on the theft of financial records and other forms of personally identifiable information (PII), with a growing number of incidents beginning to target healthcare workers. The most serious and recent attacks were the WannaCry virus, the NotPetya attack, the NHS, Wood Ranch Medical ransomware attack, and most tragically, Duesseldorf, where a misdirected ransomware attack caused the failure of IT systems harming hundreds of patients and causing multiple casualties.

SOLUTION

The medical industry has been prone to virus attacks: DeHealth applies a multi-layered approach that focuses on preventing attacks as well as mitigating the effect of ransomware. The first level of security is during the input data validation. The second level encrypts the data using top-tier banking-grade encryption methods to prevent any unauthorised access. Lastly, data is recorded in the DHLT Network making it immutable and secure in the private chain. Private blockchain structure protects DHLT Network from any external threats. DeHealth Network utilizes POA and all the nodes are run internally on secure server networks. DeHealth Network has certificates from external security audit (Reffer to 3.5 for further information)

2.2 Data Flexibility

Any integration is a long and expensive process: medical data and patient history are scattered across multiple platforms, and therefore, can't be reproduced cohesively. Under such conditions, doctors are forced to work at the same time in 3, or even 5, different systems, filling out the same information. This poses challenges for both patients and doctors, additional administrative costs arise when data is transferred between systems, or in most cases, patients and doctors are forced to re-run medical tests due to a lack of data compatibility within the medical information system (MIS).

SOLUTION

DeHealth dApp centralizes medical data into one system by utilizing a uniform cross-platform information system. This system records the data from different sources onto one platform, which may be simply and seamlessly shared by the User with verified medical professionals. Furthermore, by leveraging our relationships in the healthcare industry we integrated MIS into the DHLT network which synchronizes patient data in real-time. The blockchain infrastructure provides traceability that is necessary for use in electronic medical records, remote patient monitoring, medical EHR systems, and so on. The data architecture is designed so that DeHealth can communicate, gather, and share verified medical data with any MIS in the world, creating a patient driven electronic data sharing information system.

2.3 Data verification

In the present Medical Information System (MIS) architecture the data verification process is mostly manual and extremely time-consuming. Medical professionals spend ⅓ of their time iterating with data in the MIS, which is then verified by at least one other professional. This time could be better spent taking care of patient's needs. In addition, when labs, universities and hospitals acquire large datasets, each set has to be manually checked by a medical professional. This process is so extremely time-consuming that many hospitals employ medical record/data specialists which cost over $2.5 billion per year in the US alone.

SOLUTION

In the last twelve months, telemedicine has attempted to tackle the problem of data verification by centralizing internal communication, offering a better UX and UI to save time for both patients and physicians. Web 2.0 architecture has proven to be absolutely necessary, recording a market surge from $9.2 billion to $12.5 billion in a span of 3 years. DeHealth has adapted this telemedicine model and combined it with the speed and safety provided by Web 3.0 architecture, cutting onboarding time, initial investment, and running costs by over 50%. Once data is verified and input into the blockchain, it cannot be changed by any stakeholders and includes necessary provenance records, consequently, providing the reliability and traceability that today's data market so desperately needs.

2.4 Protection of user rights and Compliance

Protecting data in the healthcare industry is no easy feat. Healthcare providers and their business associates must balance protecting patient privacy with delivering quality patient care and meeting the strict regulatory requirements set forth by HIPAA, and other regulations, such as the EU's General Data Protection Regulation (GDPR). Because protected health information (PHI) is among an individual's most sensitive (and for criminals, valuable) private data, the guidelines for healthcare providers and other organizations that handle, use, or transmit patient information include strict data protection requirements that come with hefty penalties and fines if not adhered to.

SOLUTION

The system is built in compliance with both HIPAA and GDPR. This ensures that information is depersonalised and attached to the User's unique ID. All types of information are heavily encrypted, and medical and personal information are separated. The system operates with fully encrypted internal IDs and external keys, thus DeHealth ensures that the data always remains anonymous. Moreover, users will have the option to turn off access or delete data that is no longer relevant to them, as well as prioritize one data source over another.

2.5 Data monetization

Reliable Data has never been more valuable in the medical industry than it is today. Health professionals can now generate data-driven healthcare solutions to improve patient outcomes in many ways. These include empowering patients to engage with their own health histories with easy-to-access medical records and informing providers of patients' ongoing health status so they can in turn assess treatment methods faster. Monetization has been one of the largest challenges in the medical industry. However, the question remains - who profits from the sale of this precious data?

SOLUTION

One of the largest injustices in the current data market is that the originator of the data does not receive anything for their precious information. Hospitals, big pharma, and medical data exchanges are the only stakeholders that directly benefit from a patient's medical data. DeHealth fixes this injustice, and gives each individual control and ownership of their data. In addition, DHLT Network provides all the tools necessary for the user to easily and safely sell their data to research institutions, labs, and university partners. Patients will finally be able to receive remuneration for their data. A single data input could earn a patient between $5-1000 per sale.

MARKET PROBLEMS AND DEHEALTH SOLUTIONS

2.6 Disease Prediction, Prevention & Treatment

The medical industry is in the early stages in adapting Big Data and statistics for direct patient care. AI, complex algorithms, and ML are being used almost everywhere today, and medicine should be no exception. A study by a group of researchers revealed how combining AI edge computing with swarm learning can detect cancer from patient data while preserving patient privacy.

SOLUTION

DeHealth AI is helping to develop predictive systems based on big data analysis. It monitors all patient tests, displays real-time data from medical gadgets, and reports the slightest abnormalities to prevent disease. Technology is helping medicine to be more proactive, and the future lies in preventative medicine. It is now time to shift from reactive sick care to a healthcare era in which a person will not need be treated for illnesses and their consequences because they were prevented in time, and any abnormalities are corrected before the disease has had time to develop.

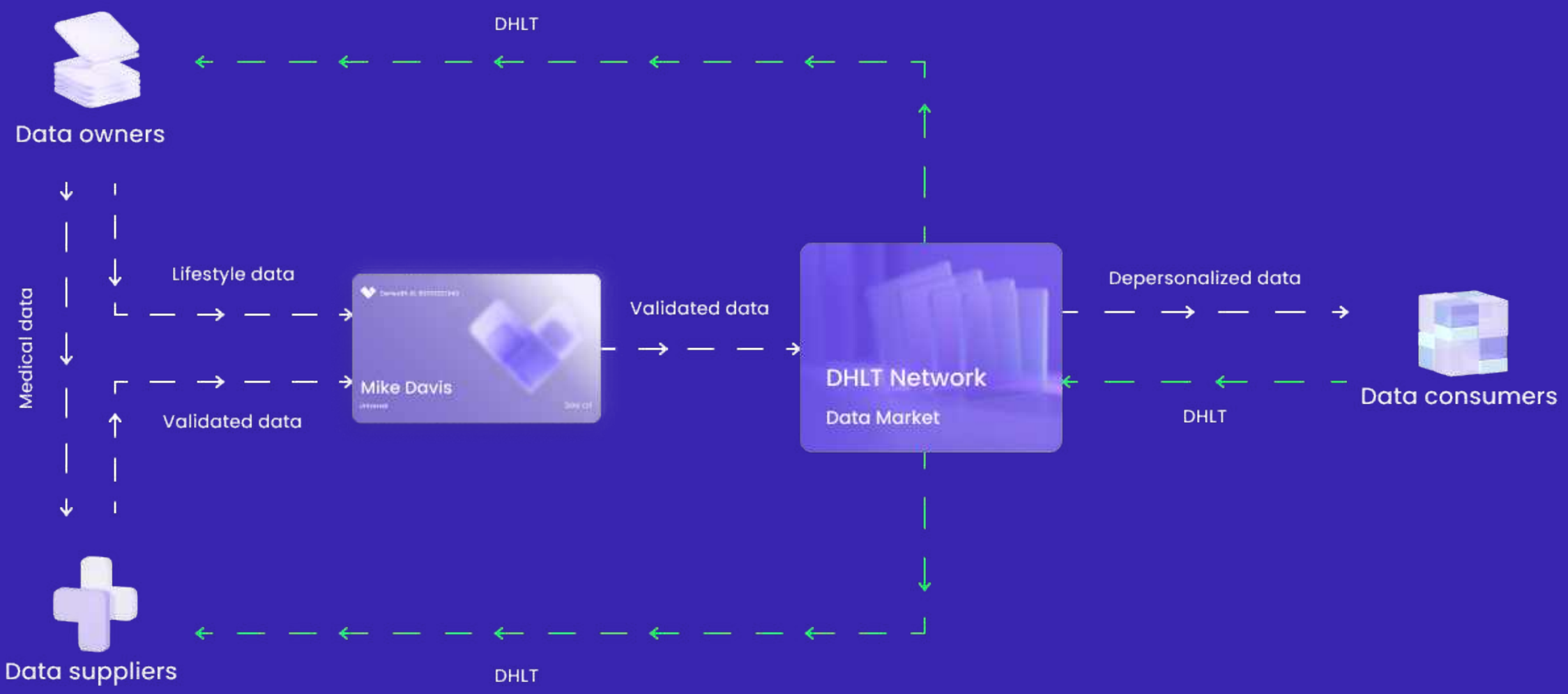
2.7 Data accessibility and centralisation

A lack of healthcare culture is provoked by patients' limited access to healthcare (geographical, financial, technological factors, including low awareness of cryptocurrencies). According to the UN, more than 3 billion people worldwide do not have access to healthcare data and medical help. The world has already embarked on a data economy journey, but most of the time without individuals having access or real control over our own data. Data is half of the entire health care solution. If the problem of lost and inaccessible records can be solved, accidental deaths may possibly be reduced by 40-50%.

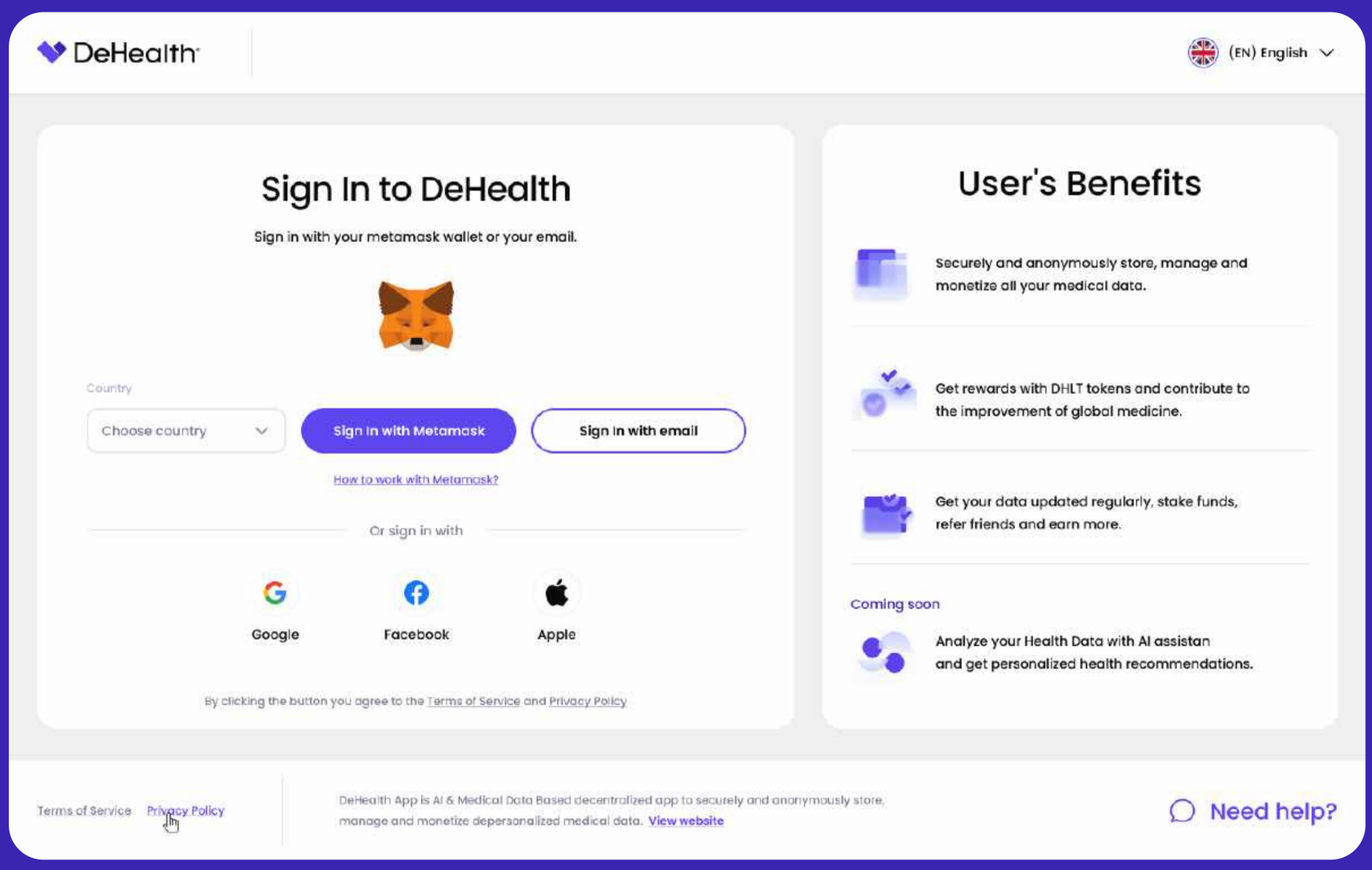
SOLUTION

DeHealth is not only aiming to hand over control back to the user – meaning, where the user goes data follows, rather DeHealth has created a digital medical ID — DeHealth ID, a functional encrypted key where a user can store all of their medical information. This means that if a patient undergoes treatment and tests in different parts of the world he/she will have the ability to receive and share the results in real-time. This cost facilitates the ability for doctors to provide remote care and take actions in critical situations. This structure is also becoming a relevant solution to the problem of public access, especially in times of war and global pandemic. By unifying and attaching the data to the patient we can expect faster, precise, and timely care, improving the lives of users and medical professionals.

3. DEHEALTH ECOSYSTEM



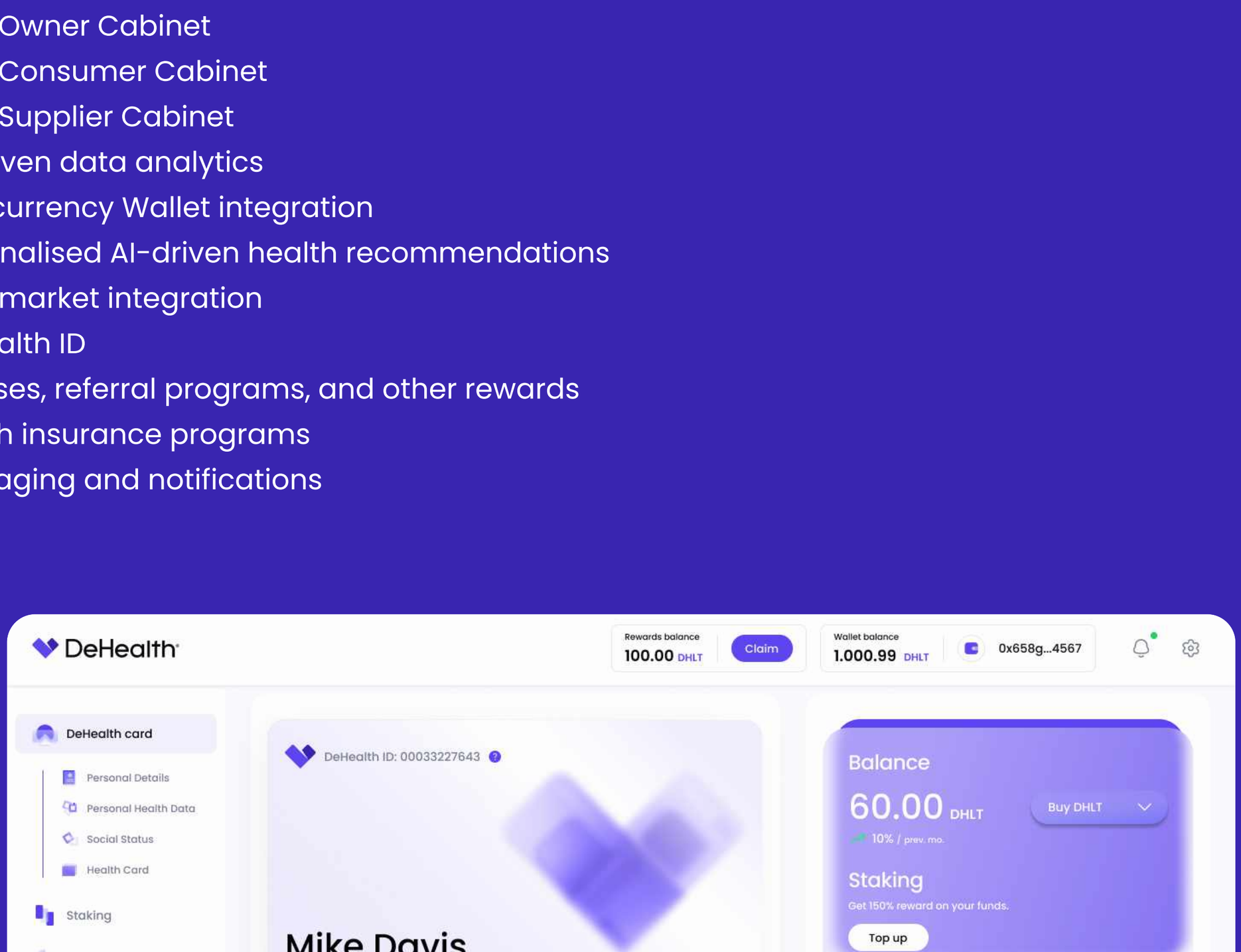
Due to the sensitive nature of data, DeHealth has developed a smart ecosystem of software to ensure security, good user experience, and seamless integration for data providers. All data in the DeHealth app is encrypted and stored in a decentralized network. This architecture allows for data holders to be independent and autonomous. Users have the option to turn off access or delete data that is no longer relevant to them, as well as prioritize one data source over another. Also, users will be able to participate in the referral and affiliate program, receiving DHLT tokens and other incentives.



3.1 ECOSYSTEM TERMINOLOGY

DeHealth App – AI & Medical Data-Based Mobile App, DeHealth App is a decentralized application (dApp) that allows users to securely and autonomously store their medical data in one place. Users will be able to share, manage, and monetize their data directly on the dApp. Transactions within the dApp will be completed using our DHLT token, supporting their health while selling their anonymized data.

- Data storage and sharing
- Data Owner Cabinet
- Data Consumer Cabinet
- Data Supplier Cabinet
- AI-driven data analytics
- Multicurrency Wallet integration
- Personalised AI-driven health recommendations
- Data market integration
- DeHealth ID
- Bonuses, referral programs, and other rewards
- Health insurance programs
- Messaging and notifications



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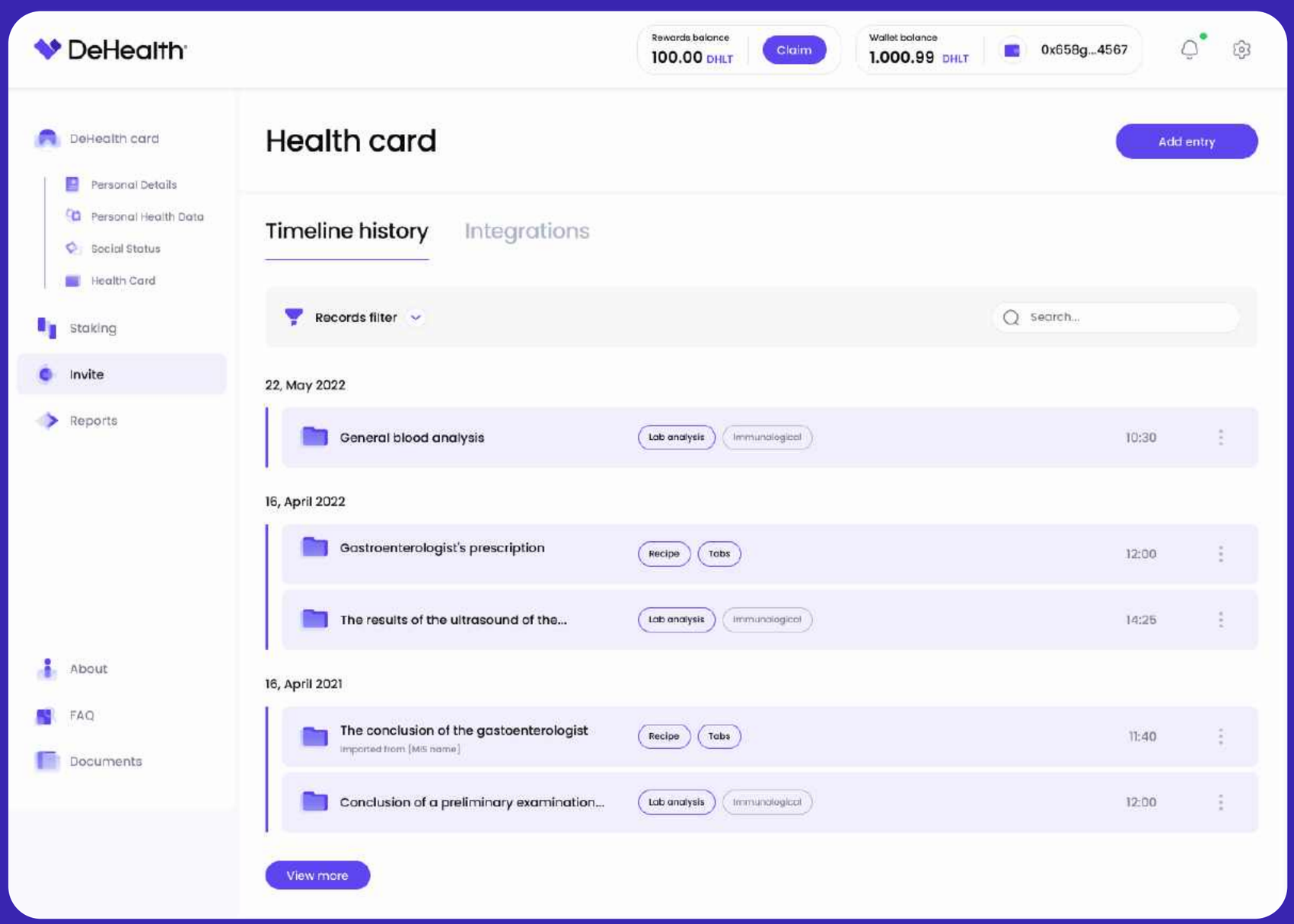
DEHEALTH ECOSYSTEM

DHLT Network - a decentralized storage for health data and digital assets, data oracles protocol and incentive layer. The job of DHLT protocol is to digitalise and secure global health data for everyone. The repository receives daily clinical, medical and personal data, and this data on the health status of people (users) is de-identified, structured and networked

- Private chain
- BlockChain agnostic
- Integrated with hypersecurty cloud storage
- Integrated development tools
- Supporting development of internal neuronetwroks dApp programming

DHLT - is the native token that supports the DHLT Network. A decentralized repository for medical data and digital assets. With DHLT, anyone can upload and store their medical data, receive and host digital information, and sell their anonymized data. DHLT tokens are used to pay for services inside the DeHealth App and as an economic incentive to secure long-term storage of health data and its constant supply. BEP-20 smart contract

- Storage
- Payment
- Smart contract integration
- Meta Mask Wallet integration
- Token designed for high volume usage



DeHealth AI – a machine learning system that learns from data on the DHLT Network. AI is used to sort and consolidate data within the system, develop predictive systems and provide users with relevant predictive treatment suggestions. With the help of AI, DeHealth is building an efficient technological tool for affordable and preventative medicine. And with blockchain, it provides a more accurate and transparent DHLT Network (Data Market) for medical data. The AI engineering team is located in the US and run by an ex-google AI and big data developer.

- Preventive and predictable algorithm
- Market place integration
- Blockchain integration
- Big data algorithm
- IoT integration
- Medical Information System integration

DeHealth Wallet (to be implemented) – a universal multicurrency payment system, allowing users to transact internally and externally. The main features are:

- Multi-currency and Compatibility with major Crypto currencies as USDT, USDC, BUSD, BNB
- Swap Tokens Stables <> DHTL
- Buy DHTL token by Stables
- Payment Card for withdrawal funds
- Fully encrypted
- Decentralised

At this very moment DeHealth App uses MetaMask for Binance Smart Chain.

3.2 ECOSYSTEM ACTORS

3.2.1 Data Owner (Individual)

A private individual that has passed an identification on the dApp. Users upload their personal details and medical data to the dApp, manually or via Data Supplier synchronization. The user is recognised in the system as the sole owner of the data they upload and their data is attached to the user via Medical ID. Users may store, share, and sell their depersonalized information on the Data Market. Users may receive rewards in the form of DHLT tokens in return for entering their data into the Data pools and completing other tasks. Furthermore, these tokens may be used to invest, transact, and exchange for other currencies.

3.2.2 Data Consumer

A legal entity that registers on dApp. Buyers are, but are not limited to: Labs, pharmaceutical companies, universities, institutions, and centralized medical data exchanges.
Once the buyer clears the KYC they will have access to the Data Market. On the data market the Consumer will have access to the pools of patient records, data filtration functionality, and the ability to request specific data. The Consumer will be able to buy, access, and work with data within the network.
The Data Consumer interacts with the system through a cabinet in the dApp, through data request forms, and the APIs.

3.2.3 Data Supplier

A legal entity - institution, clinic, lab, medical information system, etc. that supplies large sets of medical data to the DeHealth network. Blocks of data would be integrated into the DHLT Network through an API back-end integration and onboarding of the Supplier. Integration ensures that the data is updated, verified, and recorded in real-time, making sure that the data recorded is actionable. The data supplier acts as a first level of validation of the medical data, since suppliers can only be trusted medical services providers. It’s important to note that the data of patients can only be uploaded to the Network with the permission of the User. Data Suppliers will be able to interact with the Network through a Supplier Cabinet on the dApp and through the APIs.

3.3 DeHealth ID

DeHealth ID is a unique user identifier through which all their medical data is available to them anywhere in the world.
DeHealth ID includes, among other things, the address of the user on the BSC network for full interaction with the DeHealth Web 3.0 infrastructure.
DeHealth ID is the user's International Medical Passport, which will act as a universal place for medical data. DeHealth ID is attached to the user and will be connected to the private key of the user, thus allowing for a user to communicate with the system.

3.4 DeHealth Ecosystem Architecture

1. Ecosystem functions and interacts with all the stakeholders on the dApp. dApp consists of the following major components: Data owner, Consumer, and Supplier cabinets; DHLT Network; cross platform adaptive frontend; Market place; Cloud integration; API data system integration; Notification system; and is powered by the DeHealth AI.

2. DHLT network is at the center of the ecosystem; this is where the data circulates between stakeholders. Data owners upload and register their data in the datapools which are attached to the Medical ID.

3. The Data Owner interacts with the Network through the dApp front-end. Here is where the Data owner fills in the profile, interacts and uploads their depersonalized data, and controls their finances.

4. Medical data is uploaded through an API integration with a Data Supplier system only after the User forwards a request to MIS to deliver his data via an API connection. It is validated upon synchronisation of the data systems during the integration process.

5. Data is stored between external servers and the DHLT Network.

6. Once data is uploaded to the multilayer data centre, it is connected to the Medical ID of the User. Information includes, but not limited to: blood test results, prescriptions, scans, pictures, and videos, and are attached to that ID.

7. The user has an option to share the data with select actors, uploaded into the market place, or just store the data.

8. All of the actors in the system have wallet integrations, thus facilitating and internalising the data market monetization. All the transactions in the system happen on the DHLT Network and through DHLT token.

9. DHLT Network (Data Market) connects Users and Consumers in a private blockchain environment, making sure that depersonalised data is validated and has a reliable provenance.

10. DHLT Network (Data Market) functions as a number of filtered decentralized data pools that match, data, based on the Consumer's Data Purchase Request (DPR).

11. Once a Consumer submits the data request form the AI matches it to the corresponding data pool. The buyer will have to pay a certain amount in DHLT in order to gain access to that consolidated data set (please refer to section 4.4 for further information) using the DHLT directly to the Network, from their wallet in the Consumer Cabinet.

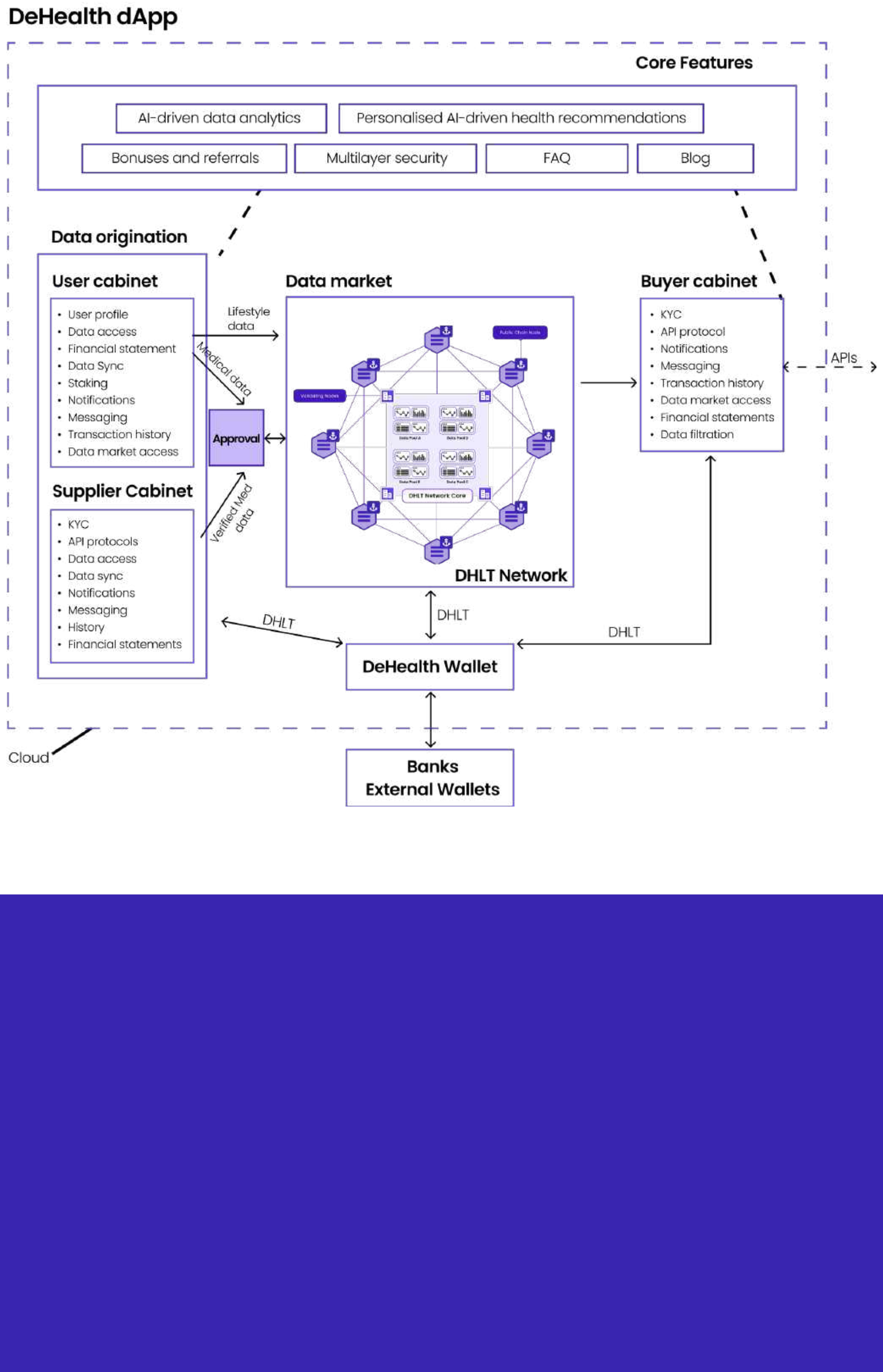
12. The earnings from the sales are circulated between stakeholders (refer to section 4.6 for further information), via DHLT network into the respective wallets.

13. Both Users and Suppliers will be able to check the balance, trade, withdrawal and deposit functions, however the User's wallet will also include a staking functionality.

14. Staking mechanisms is a part of the smart contract for the User (please see Section 4.6 for the breakdown of functionality).

15. The user can withdraw their data from the DHLT Network at any moment

16. The user can withdraw their funds from the DeHealth wallet at any time: in Fiat, Crypto, or insurance credits.



3.5 DHLT Network architecture

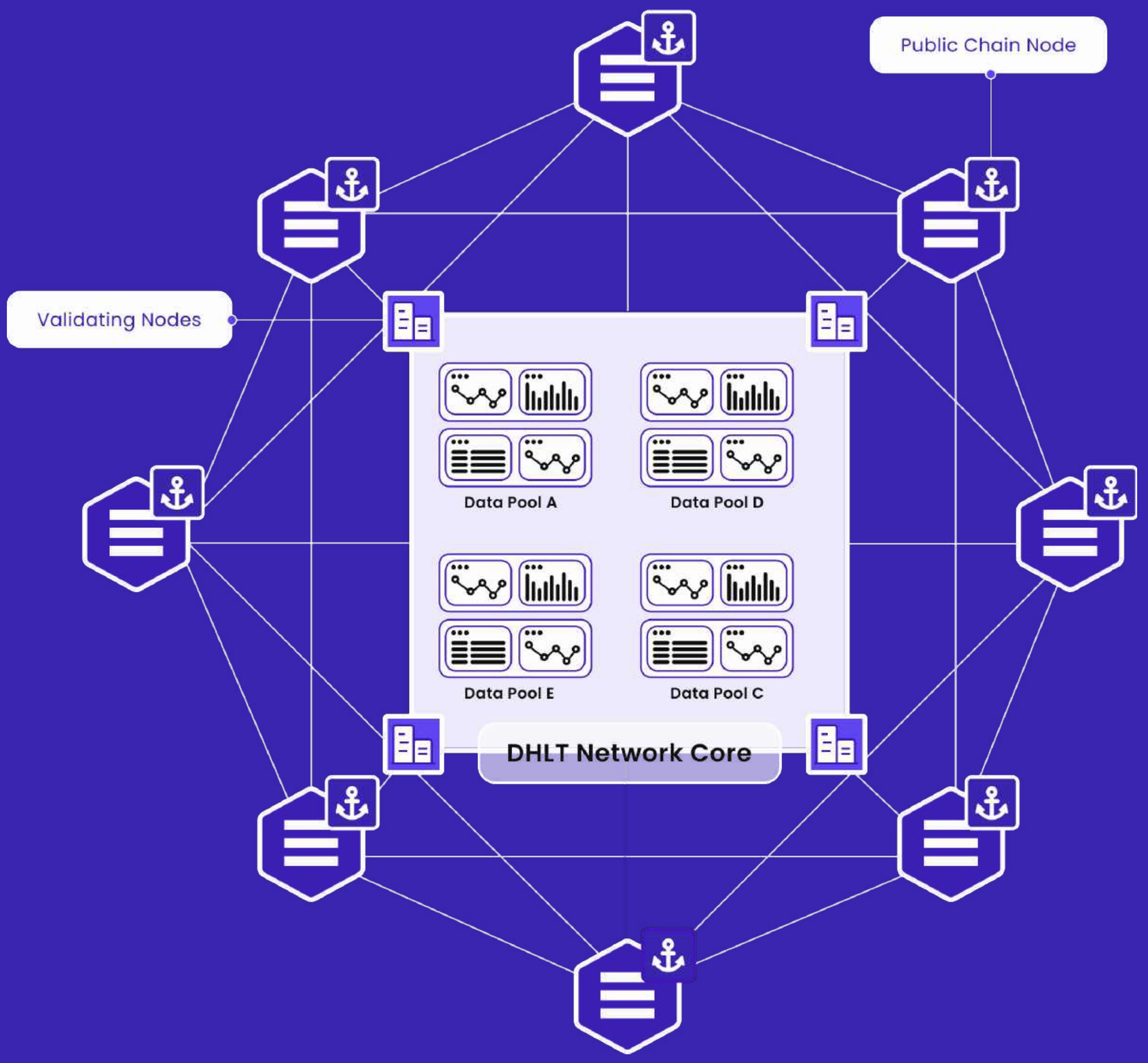
DHLT Network is a private EVM-based blockchain with POA consensus mechanism.

Proof of Authority (PoA) is a type of blockchain consensus mechanism especially suited for private or permissioned blockchains. A consensus mechanism is a system that ensures transactions executed on the network are valid and that all participating users agree on the status of the ledger.

In the PoA method, identity and reputation are valued instead of cryptographic assets as in the case of Proof of Stake, or computational power in Proof of Work.

A permissioned blockchain running PoA doesn't require "mining" of transactions. The purpose of mining is to provide an incentive for nodes to validate transactions and participate in maintaining an honest record of a decentralized public and permissionless blockchain. But on a private blockchain, where all the participating nodes are already identified and pre-authorized, there is no need to be incentivized. Therefore, there is no need for mining.

This can be anything from being located in a particular country, is associated with the organization, having good moral standing and reputation, and having formal on-chain identification.



4. BUSINESS MODEL

DeHealth acts as a middleman between people (medical data owners) and medical entities (medical data consumers) collecting a service fee.

Every time a person's de-identified medical data is sold they receive rewards in the form of an amount of DHLT tokens while DeHealth receives its service fee.

Clinical and health data from people (users) is de-identified daily and brought together in an unprecedented data platform (data lake/bank) to enable research on all health conditions.

The DeHealth business model assumes several types of participants:

- Data owners;
- Medical Data Providers/Suppliers;
- Medical Data Consumers;
- DeHealth;

4.1 Medical Data Flow

4.1.1 Integration of Medical data from the Data Supplier

Transfer of medical data from an external source is done through the following steps:

1. User initiates the data share from the verified Data Supplier which we have already integrated into the system through APIs.

2. Data Supplier is verified by the system by their corporate data and KYC.

3. If Data Supplier passes the verification, then he is able to make the integration through API.

2. Further integration happens through API and data bases synchronisation.

3. Data is registered in the system and encrypted with the public key and connected to the internal user ID through a smart contract.

4. Sychronisation through the DeHealth dApp:

- Onboard User will be notified that their data has been synchonised from the Data Supplier network, been connected and encrypted to their DeHealth ID.
- Following the notification the User can access all of the historical data in the User cabinet.
- The user data is imported into the DeHealth Data Base.

4.1.2 User profile data

User profile may be accessed in the User Cabinet. The profile information is composed of 3 distinct parts:

PERSONAL DATA

Personal details:

- First name
- Family name
- Email
- Phone
- Address
- TIN

Personal health data:

- Sex
- Weight
- Height
- Blood
- Genetic tests
- Allergies
- Birth defects
- Previous illnesses
- Chronic conditions
- Medicine prescription
- Intolerances
- Bad habits
- Self evaluation of health state
- Specific concerns for health state

Lifestyle data: data input by the user or through IoT integrations with smart watches, eat & sleep Apps etc. This data includes sleeping reports, eating habits, bad habits, exercise routines, hobbies, marital status, etc.

- Marital status
- Siblings
- Income bracket
- Occupation

Medical data records: imported from the partner Data Supplier includes text files (blood test, prescriptions, diagnosis, etc.), images (x-rays, MRIs, etc.), and videos (procedures, surgeries, etc). The full list of types of data recorded amounts to 2000+ unique data fields.

Personal data remains encrypted and is never shared/seen by any stakeholder besides the user. Medical and lifestyle data, on the other hand, is encrypted using a private key, and as a result the user can upload this data to the DHLT Network.

4.1.3 Medical data flow in the DHLT Network (Data Market)

In the User cabinet, once the data has been sychronised the user will have the option to Publish or Sell their personal health and medical data.

The publication of verified medical data is automatically included in the market place where it is filtered by:

- Personal health features: age, sex, biometrics, habits etc.
- Medical features: clinical data which contains health-related information and any medical treatment individuals have received.
- Social features: represented by the blend of an individual's income, profession, marital status, etc.

The data from the pools can then be accessed and acquired by verified Data Consumers.

Consumers will be able to acquire specific data sets, subscribe to monitor progression of data select data pools, and have access to all of the data.

Consumers will acquire a License to use and monitor data sets, however, the ownership of data always remains with the user.

4.1.4 Data Consumer inquiry

Once the Data Consumer is verified by KYC and authorised in the dApp’s Consumer Cabinet, they can make manual data queries through an API, submit an individual request for structured data or choose a data among established data sets with trending reports which a ready-to-use.

- Consumer inquiry is filled out from the Consumer Cabinet, and once a request is submitted it is encrypted and recorded under their internal ID.
- In the cabinet, the Consumer will be able to monitor "History of requests", “Status of requests” and “Creating requests”. As a result, the request is encrypted with the DeHealth public key and inserted into the DeHealth blockchain.
- The request is processed by the DeHealth AI and the output is provided in a consolidated format.

4.1.5 Data processing

- The AI mechanism recognises a new Consumer request and decrypts it with the DeHealth private key and queues it for execution.
- By interacting with the DeHealth blockchain, AI identifies data pool/s which match the request.
- When a request is ready to be executed, the result of the request will be presented in the form of a list of data identifiers.
- All the results are recorded in the DeHealth blockchain; corresponding rewards are held for both Users and Suppliers.

4.1.6. Consumers interaction with purchased data

- The Consumer sees an indicator that there is an update for some of his requests
- In the list of requests, he sees his request in the "Completed" status and can go to the "page" to view the results of the request
- On the results page, he sees that X records are available to him (bought previously) and Y records are not available; he also sees an offer to buy.
- In the missing data purchase form, he sees the quantity, cost and the ability to specify the quantity (if he doesn’t want all) for the purchase.
- Confirms the form + MetaMask transaction signature dialog, sees a message that, as soon as his purchase request is processed he will receive a notification.

As a result, his request is recorded in the DeHealth blockchain, the purchase of such and such data by such and such Consumer is recorded, and appropriate rewards are held for Users and Suppliers.

4.2 Incentives for Users

The user fills out his/her profile information; profile consists of the following three separate parts:

- Personal data (KYC): age, name, address, etc.
- Medical data: imported from the partner Data Supplier includes text files (blood test, prescriptions, diagnosis, etc.), images (x-rays, MRIs, etc.), and videos (procedures, surgeries, etc). The full list of types of data recorded amounts to 2000+ unique data fields.
- Lifestyle data: data input by the user or through IoT integrations with smart watches, eat & sleep Apps etc. This data includes sleeping reports, eating habits, bad habits, exercise routines, hobbies, marital status, etc.

User incentives from direct sale of data is comprised of two parts:

1) Is related to the amount of profile information completion. Based on completion, a rating is assigned between 0.25 - 1.0. As an example, a rating of 0.25 would be given to the user who filled out 25% of the profile information where 1.0 represents a fully completed profile. The rating dictates the amount of tokens that the user will receive. Each time data is sold from the data pool in which their medical data is revolving, the user receives a reward.

2) Is based on the amount of DHLT tokens the user allocated into the staking contract. The more tokens are staked the higher is the proportion of reward from the second income distribution.

In order to qualify for a share of the proceeds from the sale of medical data, User must upload their data to the DHLT Network blockchain. Downloading a profile will cost the User 100 DHLT.

The minimum profile rating which it is allowed to be uploaded to the blockchain is 0.25.

An example of calculating a user's income from the sale of medical data is presented in section 4.6 below.

4.3 Incentives for Medical Data Suppliers

Validators receive 20% of the data purchase amount in proportion to the number of users they have added to the system, taking into account the ratings of the added profiles.

An example of calculating the income of a validator is presented in section 4.6.

4.4 Data Consumers

DeHealth strives to create a transparent environment for data sharing. To provide access to the pools of patient records, data filtration and custom requests functionalities, it needs to make sure that the data buyer is legitimate. Since we work in accordance with the legal regulations, the registration suggests passing the verification process that ensures the client is trustworthy.

To interact with the DHLT Network the Data Consumer must be authorized and verified by our team. Only verified and real persons or legal entities are allowed to make requests for data. For this purpose after registration, the Data Consumer undergoes KYC, and only after that gets access to the data request option.

Data Consumers can send a request to buy the medical data set they need.
The regular price is 250 DHLT per record. This price may vary depending on the amount of records being bought and other conditions. Buyers are charged for the following data in a descending format from cheapest to more expensive :

- Depersonalised medical data from the pool
- Filtered depersonalised medical data
- Custom depersonalised medical data set
- Long term monitoring and updates on a depersonalised medical data set
- Depersonalised medical + Lifestyle data from the pool
- Filtered medical + lifestyle data
- Custom Depersonalised filtered medical + lifestyle data
- Long term monitoring and updates on a depersonalised medical + lifestyle data set
- Custom request

4.5 Sources of Income for DeHealth

DeHealth has several sources of income:

- DeHealth service fee;
- Payments for using DeHealth AI Assistant;
- Payments for Data-Follows-Person service;
- Payments from Medical Data Providers/Suppliers for using the App;
- DeHealth Wallet Fees.

4.6 Income Distribution

Here is how we distribute income when we help people to sell their medical data:

- 25% - All users who provided medical data (depending on profile rating)
- 25% - All users who provided medical data (depending on DHLT tokens amount in staking)
- 30% - DeHealth service fee
- 20% - Medical Data Providers (Validators).

DeHealth burns 10% of all DHLT tokens it receives as service fees.

EXAMPLE:

We have 2 Medical Data Providers (Validators):

- Data provider A (Added Group A);
- Data provider B (Added Group B and Group C).

We have 3 groups of users who uploaded their data in blockchain:

- Group A (profile rating - 0.25, DHLT staking amount - 5,000, Validator - Validator A);
- Group B (profile rating - 0.5, DHLT staking amount - 0, Validator - Validator B);
- Group C (profile rating - 1, DHLT staking amount - 3,000, Validator - Validator B).

We have sold 100 records of medical data for 25,000 DHLT (250 DHLT per record).

Then we distribute these tokens as following:

1. 7,500 DHLT is for distribution among users depending on profile rating:

- **GROUP A:** $7{,}500 \times \frac{0.25}{0.25+0.5+1} = 1{,}071$ DHLT
- **GROUP B:** $7{,}500 \times \frac{0.5}{0.25+0.5+1} = 2{,}143$ DHLT
- **GROUP C:** $7{,}500 \times \frac{1}{0.25+0.5+1} = 4{,}286$ DHLT

4.6 Income Distribution

2. 7,500 DHLT is for distributing among users depending on DHLT amount in staking contract:

- **GROUP A:** $7{,}500 \times \frac{3{,}000}{8{,}000} = 2{,}812.5$ DHLT
- **GROUP B:** $7{,}500 \times \frac{0}{8{,}000} = 0$ DHLT
- **GROUP C:** $7{,}500 \times \frac{5{,}000}{8{,}000} = 4{,}687.5$ DHLT

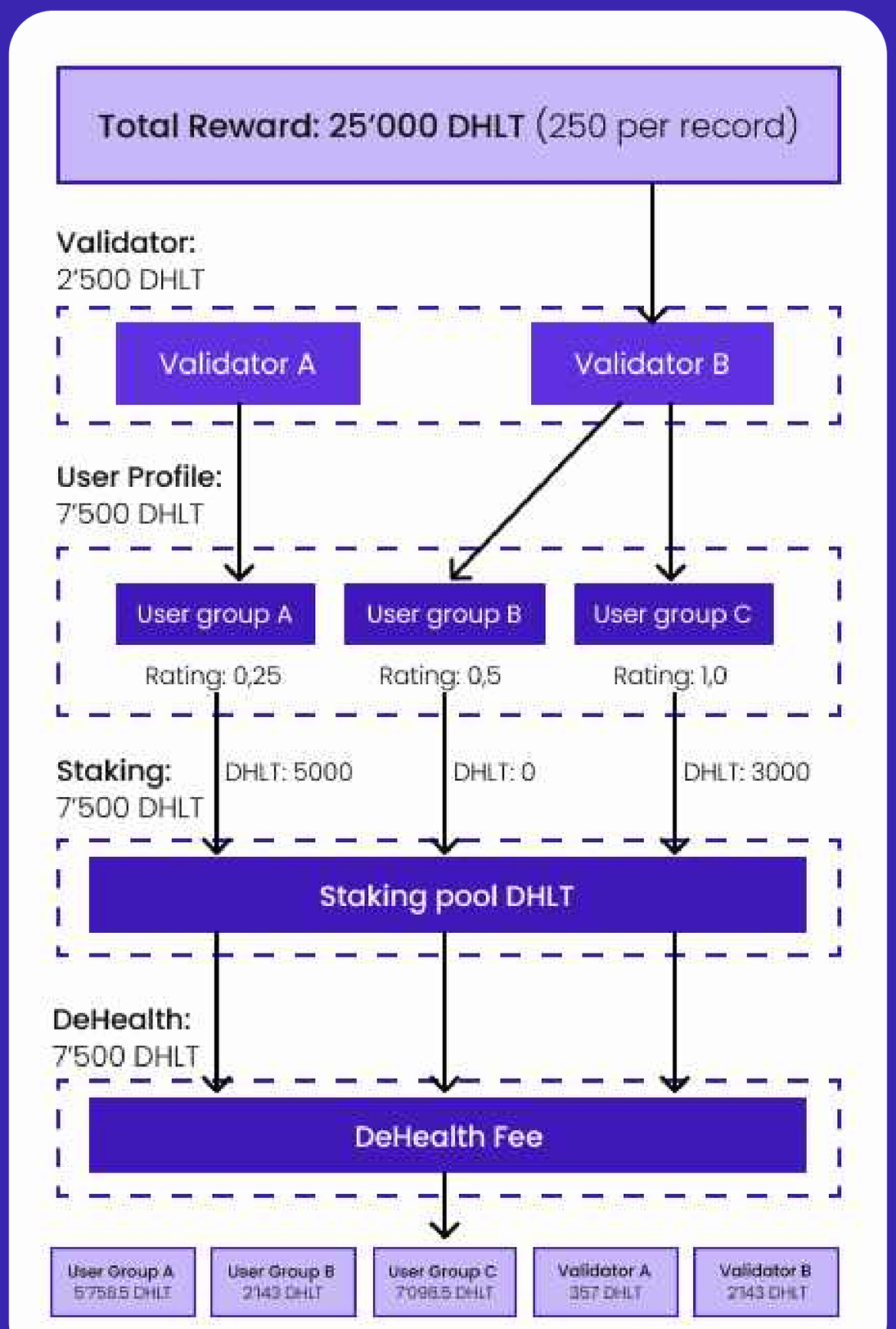
3. **DHLT SERVICE FEE** = 7,500 (750 DHLT to be burnt)

4. 2,500 DHLT is for distribution among Medical Data Providers (Validators):

- **DATA PROVIDER A:** $2{,}500 \times \frac{1.5}{0.25+0.5+1} = 2{,}143$ DHLT
- **DATA PROVIDER B:** $2{,}500 \times \frac{0.25}{0.25+0.5+1} = 357$ DHLT

5. We have the following totals for users:

- **GROUP A:** $1{,}071 + 4{,}687.5 = 5{,}758.5$ DHLT
- **GROUP B** $2{,}143 + 0 = 2{,}143$ DHLT
- **GROUP C:** $4{,}286 + 2{,}812.5 = 7{,}098.5$ DHLT

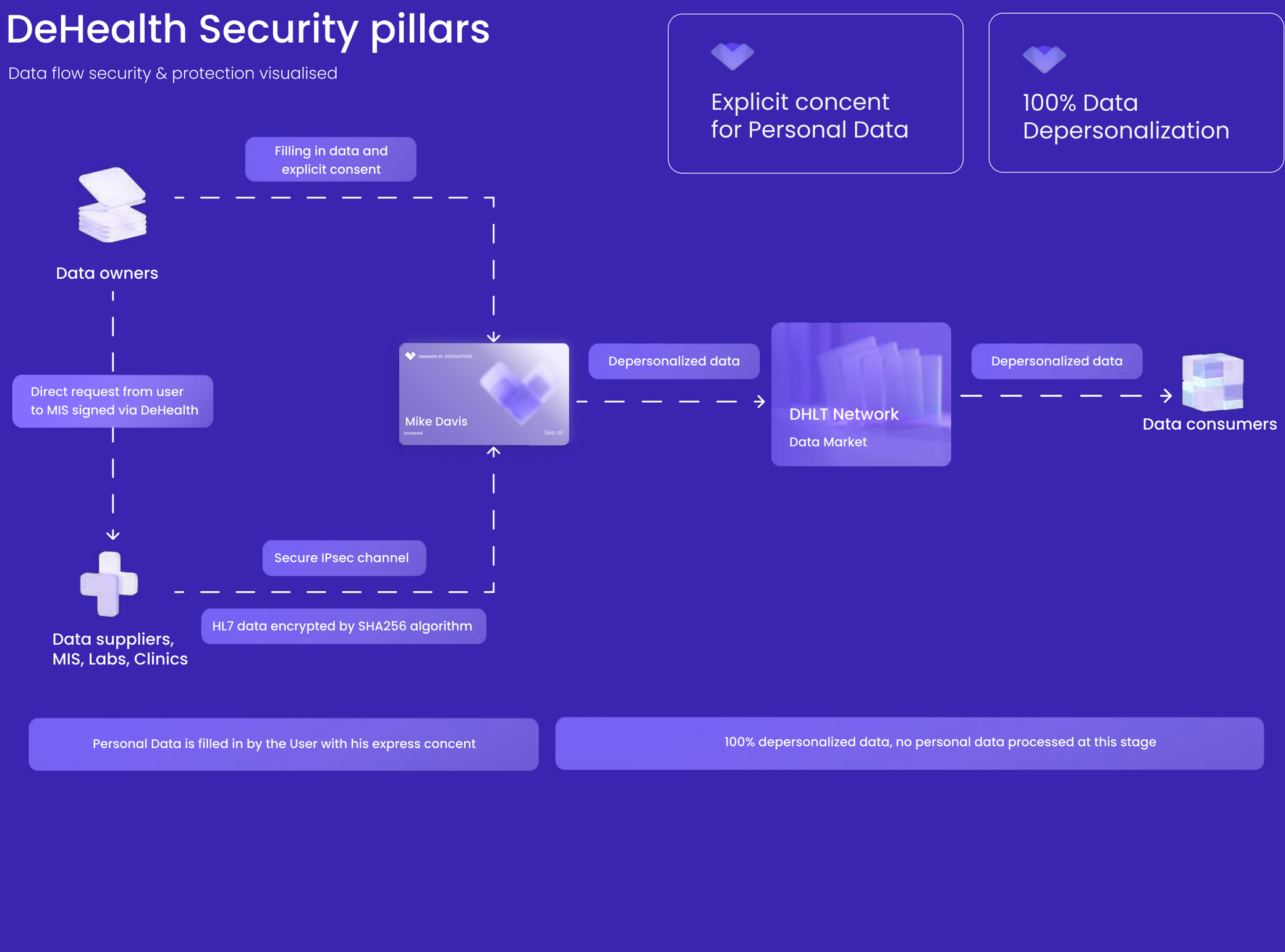


5. MEDICAL DATA PROTECTION

5.1 GDPR and HIPAA

Medical data is arguably the most sensitive data an individual possesses, which is why we are building a blockchain that can create a privacy-driven future while ensuring compliance with legal frameworks and robust security standards.

Under GDPR, health data is a special category of personal data that can be shared only upon the data owner's consent. Following this standard, with the DeHealth dApp users provide explicit consent when filling in their personal and health data to the dApp.
In addition, the synchronization of medical records from MIS and other data providers is created upon the user's request for the latter to synchronize data records, belonging to the user, with their DeHealth ID.
Lastly, for the purposes of distribution within the system, the data is depersonalized, thus making it impossible to identify the person. This is the core requirement HIPAA stipulates for protecting medical data.
All data in the DeHealth App is encrypted and stored in a decentralized network. The system complies with Data Protection Law, GDPR, HIPAA, and the Data Protection Act to ensure that the information attached to the user's unique ID is depersonalized and always remains anonymous.



5.2 Blockchain

Besides the legal requirements DeHealth relies on technology for ensuring maximum user security, awareness and transparency in the use of their data. DeHealth operate within the framework of data protection, but in addition Web 3.0 protocols allows to secure medical data and enhance user protection.

This allows DeHealth Users to completely control their data in all aspects of privacy, remuneration and anonymity. Users always have the option to limit or turn off access to their data, and delete data that is no longer relevant. Thus, DeHealth introduces an approach to medical data sharing that can radically change the current paradigm.

All of the input data is fully encrypted in accordance and guidelines of the Ukrainian ministry of cyber security. Private data remains encrypted and is never shared or seen by any DHLT Network participant without the users specific request. Medical and lifestyle data is encrypted using a private key, and as a result, the user has the option to sell all of his or her depersonalized medical or lifestyle data, or selected parts.

DeHealth applies a multi-layered approach that focuses on preventing attacks and mitigating the effect of ransomware. The first level of security is during the input data validation.
The second level encrypts the data using top-tier banking-grade encryption methods to prevent unauthorized access.

Lastly, data is recorded in the DHLT Network, making it immutable and secure in the private chain. The private blockchain structure protects the DHLT Network from any external threats. The DeHealth Network utilizes a Proof-of-Authority consensus mechanism, and all the nodes are run internally on secure server networks.

With users having full control of their data, the highest standards of data encryption, a multi-layered security approach, and private chain infrastructure we insure our Users that their information will be secure, anonymous and under their full control.

5.2.2 Data Owners as part of the equation

When designing DeHealth data security, we made sure that it's not only about checking the boxes across the requirements, but about individuals truly being the owners of their data and properly compensated. When Data Consumers request the data they need from the DHLT Network, they pay for it in DHLT tokens, and part of this payment goes to the User's DeHealth Wallet as a royalty. Users can use the earned tokens within the DeHealth ecosystem or withdraw them to a bank card.

Explicit user consent is the pillar of our security architecture. To have their data synchronized from MIS, a clinic, lab, or any other Data Supplier to their DeHealth ID, the user forwards a request to MIS to deliver his data via an API connection. This connection is implemented via a secure IPsec channel, and the data packets are authenticated and encrypted in HL7 format by the SHA256 algorithm. Health Level Seven (HL7) is a standard that defines a format for transmitting health-related information. At the same time, Secure Hashing Algorithm (SHA) 256 encrypts the transferred data by transforming it into a secure unreadable format.

DeHealth users can share their data and know exactly how it's used. In addition, users can revoke the data they share at any time. Finally, and most importantly, they never use their data — only depersonalized records appear in datasets.

5.2.3 Security audits

The DeHealth blockchain ecosystem, provides market-specific advancements in security, traceability, and processing of data into the healthcare industry. In order to insure the system security our smart contracts have been audited by one of the leading auditors Hacken. The audit verified the smart contract security and architecture quality, awarding it a security score of the highest standards.

6. COMPETITIVE LANDSCAPE

There are several companies on the market with a similar approach.
Here is a short comparison of DeHealth and existing competitors.

Features	**DeHealth**	Inter Systems	Equideum	Iqvia	Hu-manity	MedicalChain	Embleema	MediBlock
Centralised Database	✓	✓	✓	✓	✓	✓	✓	✓
Lifestyle data	✓	✗	✗	✗	✓	✓	✓	✓
Medical data	✓	✓	✓	✓	✓	✓	✓	✓
AI analytics	✓	✓	✓	✓	✓	✓	✓	✓
Data market place	✓	✓	✓	✓	✓	✓	✓	✗
Parient cabinet	✓	✓	✓	✗	✗	✓	✓	✗
Flexible security model	✓	✓	✓	✓	✓	✓	✓	✓
Blockchain	✓	✗	✓	✗	✗	✓	✓	✓
Patient data monitisation	✓	✗	✓	✗	✓	✗	✗	✗
Remote care	✓	✗	✗	✗	✗	✗	✗	✗
dApp	✓	✗	✓	✗	✓	✓	✓	✗

7. GO-TO-MARKET STRATEGY

7.1 General Strategy

DeHealth's marketing strategy is based on the company's mission and its values.

Among its tools are: Social Media engagement, Giveaways, Airdrops, AMA-sessions, partnerships with industry Influencers & Key Opinion Leaders, Ambassador program, Referral & Affiliate program, etc.

The strategy to attract token holders is based on the product and informing the benefits of the product and how the token participates in the product ecosystem, thereby explaining the utility of the token and proving the growth of investments for the token holders. That is, it's a content strategy with a focus on education. In addition, maintaining and developing the community through instrumental and content marketing.

Overall focus on education:

- Content marketing
- PR
- Influence marketing
- AMA sessions
- Cross marketing with communities / partnerships
- Community push (shilling, targeting, collaborations)
- Email marketing
- Subscription campaigns
- Event marketing

7.2 Promo

In the first year, after the launch of the main functionality of the project, there will be a special promo period during which users will receive DHLT tokens for filling out their medical profile. For the completion of the profile during the promo period, the user can receive 100 DHLT. In case of incomplete filing, the user will receive the corresponding part of this amount.

At the same time, the first 4,000 users will receive 500 DHLT for completely filling out their profile.

With these tokens, it will be possible to pay for adding depersonalized data to the DHLT Network blockchain for further sales.

Thus, for all users who join us and fill in their data during the promo period, the use of the application will be absolutely free. At the same time, when selling medical data, users will already begin to receive income.

7.3 Marketing and Referral program

In addition to instrumental marketing, much attention is paid to the creation of an internal community with its own ecosystem, which will be expressed in the form of a referral program and in close interaction with the loyalty program with gamification elements that allows to delve into the project, constantly improving the quality of data and earning tokens.

7.4 KPIs to tracking

The three most important KPIs are as follows:

1. Number of integrations with data providers and crypto partners.
2. Number of users who uploaded their data into the data market. Data uploaded to the DHLT Network represents the system turnover, as large quantities of data from all over the world improves the data offering and packaging capabilities for Data Consumers, improving the AI and thus the sorting algorithm. This stimulates DHLT purchases and token value increases.
3. Number and types of data purchase requests. This KPI allows us to understand the market dynamics and identify the best development strategies.
4. Other: Market cap, Token price, Churn rate, Amount of data pools, Types of patients, Lifestyle trends, etc.

8. DHLT TOKENOMICS

8.1 DHLT Token Overview

DHLT – is a standard BEP20 token, launched on the Binance Smart Chain (BSC).

- Total Supply: 1,000,000,000 DHLT
- TGE circulating supply of tokens: 8 250 000 DHLT
- Token Burning: Provided
- Maximum token burn amount: 50%

8.2 DHLT Token Functions

- Ensuring the possibility of downloading medical data for their further monetization;
- Maximisation of income from the sale of medical data;
- Payment for the purchase of medical data;
- Burning;
- Farming;
- Trade.

8.3 DHLT Token Distribution and Vesting Schedule

TOKENOMICS

MCAP ON TGE **$330,000**

USDT TO BE RAISED **$3,600,000**

TOTAL SALE **13.50%**

Round	Volume	% of Supply	Token Price	Raise (USDT)	day 0 unlock	Mcap day 0	Cliff (months)	Unlock period (months)
~~Family and friends~~	~~40,000,000~~	~~4,0 %~~	~~0,025~~	~~1,000,000~~	~~5 %~~	~~80,000~~	~~3~~	~~15~~
~~Public IDO~~	~~15,000,000~~	~~1,5 %~~	~~0,040~~	~~600,000~~	~~15 %~~	~~90,000~~		~~4~~
Private round	**80,000,000**	**8,0 %**	**0,025**	**2,000,000**	**5 %**	**160,000**	**1**	**12**
Founders and team	130,000,000	13,0 %					42	54
Advisors	40,000,000	4,0 %					12	24
Strategic Partners	130,000,000	13,0 %					12	36
Staking Rewards	120,000,000	12,0 %						36
Liquidity Pool	70,000,000	7,0 %						6
Reserve Private Round 2	150,000,000	15,0 %	upto -15%				18	42
Marketing	150,000,000	15,0 %	upto -10%				6	24
Treasury	75,000,000	7,5 %					24	36

8.4 DHLT Token Sale Rounds and Pricing

DHLT Token sale is planned in 4 Rounds:

- Family and friends
- Public IDO
- Private Sale
- Private Sale (Round 2)

Tokens purchased during these sale rounds will be locked.
Unlocking of tokens will take place according to the schedule above.

9. DHLT SMART-CONTRACTS

9.1 BSC (Binance Smart Chain) Smart-contracts

9.1.1 DHLT Token Smart-contract

The DHLT Token Smart Contract is the standard BEP20 token contract on the Binance Smart Chain (BSC).

Additionally, it has the following functions:

- To put the contract on pause;
- To upgrade the contract;
- To manage the contract by the administrator(s) and not by the owner;
- To enable protection against sandwich bot attacks when trading on the DEXs;
- To securely load liquidity on the DEX;
- To connect a DEX market maker;
- To whitelist/blacklist some contracts;

Contract address: **0xb148DF3C114B1233b206160A0f2A74999Bb2FBf3**

9.1.2 DHLT Fixed Staking Smart-contract

Fixed Staking contract allows users to stake DHLT tokens for DHLT tokens for one of five periods. Users can unstake DHLT tokens when a selected period ends and take back their token plus rewards. Users can stake only if there is enough DHLT tokens in the reward Pool on token contract to pay users.

Contract address: **0x44672F085d59CBd5De7b1E7C4C3641eBd3DfE4f2**

9.1.3 DHLT Flexible Staking Smart-contract

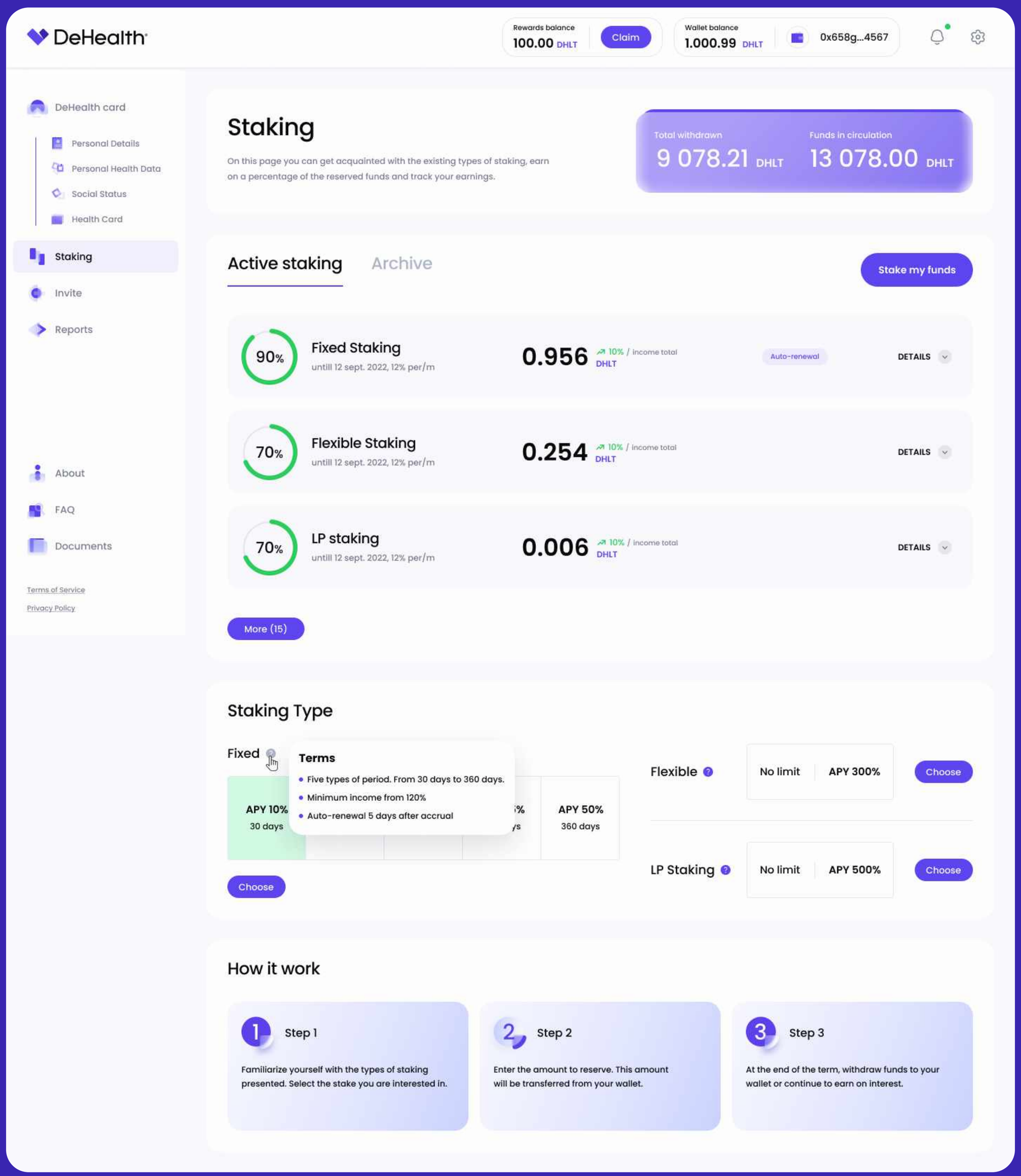
The flexible staking contract allows users to stake DHLT tokens for DHLT tokens. Users can unstake their DHLT tokens at any moment and claim rewards depending on time spent on staking and their share of total staked tokens.

Contract address: **0xb9f1b8cd08B3446DEC9F4861d26f4B87B27C6E28**

9.1.4 LP Flexible Staking Smart-contract

An LP flexible staking contract allows users to stake LP tokens for DHLT tokens. Users can unstake their LP tokens at any moment and claim rewards in DHLT tokens depending on time spent on staking and their share of total staked tokens.

Contract address: 0x282597038bD222E41D88cC28AE2290f4764beB3c



10. ROADMAP

10.1 Current State

Q1 2019

Concept creation and founding team of DeHealth (forming)

Q2 2019

Global TOP talents join the team for strategic business development

Q3 2019

Start of R&D for the MVP of DeHealth App

Q4 2019

Start of R&D for the architecture and MVP of International Electronic Healthcare Record (iiEHR).

Q1 2020

“DeHealth Ukraine” LLC is registered

Q3 2020

“DeHealth Ukraine” LLC acquires 51% of MIS “Askep.net” - an International SaaS solution provider for medical services. DeHealth onboards significant domain R&D expertise related to data-based medical solutions. DeHealth becomes a licensed operator of software solutions for state medical hospitals across Ukraine with an active B2B client base of 670 hospitals, 34,000 doctors, and over 2,700,000 patients that use Electronic Health Record issued by MIS “Askep.net”.

Q1 2021

“DeHealth Ukraine” acquires 100% control over MIS “Askep.net”.

Q2 2021

MVP of DeHealth International Intercompatible Electronic Healthcare Record (iiEHR) is released.

Q3 2021

DeHealth Foundation is officially registered as a “DeHealth Non-Government Organization” in the United Kingdom.

Q4 2021

- Start of R&D for the MVP of DeHealth AI Assistant “Dr.Umka”
- Beta-testing of DeHealth International Intercompatible Electronic Healthcare Record (iiEHR) is finished
- Building global community: many events, advisors, and KOLs

Q1 2022

IDO

10.2 Future Plans

Q2 2022

- Token restart; Updated system-level token design for growth and long-term sustainability;
- Conducting an audit of the token smart contract;
- Staking contracts;
- Development and launch of a single site DeHealth;
- Development and launch of DHLT Network v1 Alpha (Web 3.0 + User Cabinet).

Q3 2022

- Launch of DHLT Network v1 Beta(Consumer Cabinet);
- DeHealth ID;
- Listing on DEX;
- Listing on CEXs.

Q4 2022

- DHLT Network ver. 3.0 (Data Supplier Cabinet);
- DeHealth dApp;
- DeHealth Multicurrency Wallet;
- API for Data Suppliers;
- Bonus, referral, affiliate program.

Q3 2023

- Launch of DeHealth Education portal;
- Data Farming: Programs to incentivize data consume volume;
- Improve data services: support more data services, including Filecoin, Chainlink, TheGraph, Arweave.

Q2 2023

- Launch of DeHealth AI Alpha;
- Pilot integration of the first hospital run by DeHealth AI;
- A grants providing community;
- First deployment beyond Binance Smart Chain (BSC) mainnet, including a bridge.

Q1 2023

- API for Developer;
- Launch of DHLT Network (BlockChain) main-net;
- DHLT Network (Data Market): Public Testing;
- Composable Data NFTs;
- Bug Bounty;
- DHLT protocol.

Q4 2024

Production launch of
DeHealth AI Assistant Beta

To Be Continued

11. TEAM

Denys Tsvaig

CEO, CTO & Co-Founder

President of the National Cybersecurity Association of Ukraine. 13+ years of global experience in the IT industry, business architecture of software platforms and products. Developed the concept and model of New Internet (Distributed Web), deployed with an international team of Suntri Inc. experts. Blockchain enthusiast since 2014, turned into reality software solutions in the field of cybersecurity and the medical industry, based on blockchain, ML and AI technologies.Sees the role of DeHealth in providing the healthcare industry with the secure and decentralized storage where each asset is controlled by the user. Author of the term "Decentralized Globalization", and is currently working on a book about the importance of cyber attacks as one of the main weapons during war, especially in 2022.

Anna Bondarenko

Managing Partner & Co-Founder

President of the international consortium "eHealth" which consolidates the best experts in the field of digital health and more than 15 mln patients. Public figure, philanthropist, and musician. Sophisticated business development expert with an approach of innovation appliance to grow and scale companies and highlight their market differentiation in Ukraine, Italy, Germany, Netherlands, France, China and other regions. Actively cooperates with the public sector for its digitalization, especially in the healthcare field, by underlining the role of cybersecurity, personal data protection, and the introduction of new economic models.

Myron B. Rabij

Chief Legal Officer

Seasoned corporate attorney at Wachtel Missry in New York City and formerly head of energy at Dentons in Kyiv. With a stellar reputation, for more than 28 years, has been focusing on corporate M&A, JV and international cross-border commercial and corporate transactions with a focus on energy, real estate and IT and venture tech. Has a significant experience in advising on various cross-border deal issues and in aspects of international arbitration

Maxim Kolyada

Managing Partner & Co-Founder

Serial entrepreneur, coming from Private and Public equity analyst backgrouds, specialising in early-stage VC in web 3.0 and medtech. Former VP of InvestBridge Capital.

Viacheslav Kovalevskyi

AI Chief Technical Officer, Advisor

Sr. Eng. Manager at Facebook focusing on PyTorch. Ex-Google employee, who has created a sub-department within the GCP Cloud AI org from scratch where he oversaw many Deep Learning projects. Teaching Java courses and developing his own teaching methods which were implemented into in his own startup (kovalevskyi.academy), actively creating content on YouTube.

Dmitry Sokolov

Chief Knowledge Officer

Developer of the theory of collective subject and prototypes of collective long term organizational memory. Philosopher with MPA (time critical decision making), PhD in Physics (processes and mechanisms for nanofabrication) and MEng (precision machinery for Electronics Industry). Currently building a collective subject by introducing processes of collective memory.

Yehor Shustyk

Chief Product Officer

As a Product Manager with a design background Yehor has been doing product design and development for more than 10 years and taking in projects of various scales from e-commerce to enterprises.

Mariia Taran

SMM Manager

Marketing strategist and SMM specialist with 7 years of experience in digital marketing. Implemented more than 360 marketing strategies, using a data-driven approach to achieve goals and results.

Vadim Sinchuk

Influence Marketing Manager

Marketing specialist, ex-owner of DackInvestGroup. Successfully implemented digital campaigns with total budget of more than $500,000.

Marina Fedotova

Marketing Lead

20 years of work experience in B2B media, marketing, events and PR fields. Professes an integrated approach to marketing activities' implementation, adapting the specifics of a certain industry to the fundamentals of marketing.

Alex Philippine

Advisor

Head of the Samurai Launchpad and Head of BD at CyberFi which offer an Asset Management Platform fully automated and cross-chained. Early consultant in many current top 100 projects such as Elrond or Terra. Advising DeHealth on go-to the market strategies.

Philippe Gerwill

Advisor

Digitalization Humanist, Futurist and an Innovation KOL with 30 years in the specialty chemicals and pharmaceutical industry who is regularly speaking at international events about Digital Health, Blockchain, Internet of Things, Big Data, Artificial Intelligence, AR/VR, 5G and Healthcare in the Metaverse. Has spent about 30 years in the specialty chemicals and pharmaceutical industry at Novartis, Lonza and Ciba.

Ralf P.Gerteis

Advisor

Co-Founder & CEO of Scaleswap, the next generation IDO launchpad on layer 2 scaling protocol, powered by Polygon. As well as Advisor & Angel Investor at Metis, also built the next-generation DAO framework on layer 2. Active in different blockchain organizations and currently focuses on areas such as DeFi, DAO, multi-chain, and layer 2 scaling solutions. As a Blockchain Advisor, Ralf is dedicated to empowering DeHealth with deep knowledge of blockchain and navigating the project in the most disruptive technology.

Johan Olsson

Advisor

Transaction-driven entrepreneur who is passionate about innovation-driven life science ventures and facilitating alternative investment transactions, with a strong focus on bringing stakeholders and deal execution. As Advisor, Johan facilitates partnerships with VCs as well as guides an overall business development strategy, in particular — in terms of AI adoption and enhancement.

12. LEGAL NOTES

12.1. DeHealth legal structure

DeHealth, as described in this document, is developed by DeHealth HLT Network Inc., a company registered in country.

The Registered Office address is:
Intershore Chambers, 3rd Floor, Geneva Place, P.O Box 4342, Road Town, Tortola
British Virgin Islands
BVI Company Number: 2083560

- DeHealth NGO is established in the UK, which is engaged in community development, partnerships and projects with non-profit and government organizations, R&D.

- In the UK LTD Dr.Umka, is engaged in the development of AI. At the moment we are moving the structure to California in the USA. Our technical partner, the project workshop, as well as direct access to VC are at this location.

- The DeHealth HLT Network operates on BVI, which issued the DHLT token and is developing the blockchain network. Has legal opinion and smart contract audit.

- The DeHealth Charitable Foundation operates in Ukraine, which is currently providing medical support to Ukraine.

- DeHealth LLC operates in Ukraine, which owns property rights to www.askep.net and is a pilot project of DeHealth. The company's assets include platform software, R&D and a user base - 3.2 million patients, 35,000 doctors.

12.2. Disclaimer

TO THE FULLEST EXTENT PERMITTED BY APPLICABLE LAW AND EXCEPT AS OTHERWISE SPECIFIED IN WRITING BY US, (A) DHLT TOKENS ARE SOLD ON AN “AS IS” AND “AS AVAILABLE” BASIS WITHOUT WARRANTIES OF ANY KIND, AND WE EXPRESSLY DISCLAIM ALL IMPLIED WARRANTIES AS TO DHLT TOKENS, INCLUDING, WITHOUT LIMITATION, IMPLIED WARRANTIES OF MERCHANTABILITY, FIT FOR A PARTICULAR PURPOSE, TITLE AND NON-INFRINGEMENT; (B) WE DO NOT REPRESENT OR WARRANT THAT DHLT TOKENS ARE RELIABLE, UP-TO-DATE OR ERROR-FREE, MEET YOUR REQUIREMENTS, OR THAT DEFECTS IN DHLT TOKENS WILL BE CORRECTED; AND (C) WE CANNOT AND DO NOT REPRESENT OR WARRANT THAT DHLT TOKENS OR THE DELIVERY MECHANISM FOR THEM ARE FREE OF VIRUSES OR OTHER HARMFUL COMPONENTS

You must comply with all laws and regulations that apply to you in any place in which you purchase, offer or sell any DHLT tokens. You must also obtain any consents, permissions or approvals that you need in order to purchase, offer or sell any DHLT tokens under the laws and regulations in force in any jurisdiction to which you are subject to or in which you make such purchases, offers or sales. We are not responsible for your compliance with these legal requirements. We are not making any representation to you regarding the legality of your investment in the DHLT tokens under any legal investment or similar law or regulation in any jurisdiction.

12.3. Risk factors

GENERAL

An investment in DHLT tokens carries with it significant risk. You should carefully consider all of the information in this document, including the following risk factors, as well as terms of the SAFT agreement or any other document related to the sale of DHLT tokens before deciding to invest in DHLT tokens. The actual occurrence of any of the following events could have a material adverse effect on the development of DeHealth's business, prospects and results of operations, which may adversely affect your ability to receive gains or returns on your investment.

Most of these factors are contingencies that may or may not occur, and we are not in a position to express a view on the likelihood of any such contingency occurring. The risks described below are not exhaustive and are only those that we believe are principal, but these may not be the only risks and uncertainties that DeHealth may face. Additional risks that are not currently known or anticipated, or that are currently deemed insignificant, may also have a material adverse effect on the development of DeHealth, DeHealth's business, prospects and results of operations. You could therefore lose a substantial portion or all of your investment in DHLT tokens. Consequently, an investment in DHLT tokens should only be considered by persons who can assume such risks. Prior to participation, carefully consider the potential risks and, to the extent necessary, consult a lawyer, accountant, and/or tax professional to evaluate the risk entailed.

The token economy is relatively new and incredibly innovative. Tokens could be impacted by regulatory actions, including restrictions on ownership, use, or possession. There is no guarantee that DHLT tokens purchased will increase in value, provide a return, or will have sufficient adoption and liquidity to enable exchange for other assets.

Binance Smart Chain, on which DHLT tokens are based, is an experimental technology and all possible future risks cannot be enumerated here. We do not assume responsibility for any losses that may occur. Please exercise caution with all cryptographic assets and do not invest money that you cannot afford to lose.

WE MAKE NO PROMISES OF POSSIBLE GAINS OR RETURNS. YOU CAN POTENTIALLY LOSE ALL YOUR MONEY IF THE MARKET PRICE OF DHLT TOKENS DROPS TO ZERO.

RISK OF LOSING ACCESS TO DHLT TOKENS DUE TO LOSS OF PRIVATE KEY(S)

DHLT Tokens are BEP20 tokens on the BSC blockchain. You must access and use them using a BEP20-compliant wallet. It is your responsibility not to lose your tokens by losing access to the keys which allow access to your wallet and/or allowing malicious third parties to access your keys and/or your wallet. WE WILL NOT BE HELD LIABLE FOR ANY LOSS OF TOKENS AND/OR OTHER DAMAGE INCURRED BY YOU AS A RESULT OF THE LOSS OF KEY OR ATTACK ON YOUR WALLET.

RISKS ASSOCIATED WITH THE BSC BLOCKCHAIN

Because DHLT tokens are based on the BSC blockchain, any malfunction, breakdown or abandonment of the BSC blockchain may have a material adverse effect on DEHEALTH and its tokens. Moreover, advances in cryptography, or technical advances such as the development of quantum computing, could present risks to DeHealth by rendering ineffective the cryptographic consensus mechanism that underpins the BSC blockchain.

RISKS ASSOCIATED WITH LICENSING

Operation and sustainable development of DeHealth will depend on the continuing validity of any necessary licenses in the jurisdictions of its operation, as well as its compliance with the terms of such licenses. Although we intend to apply for the necessary licenses, there is a risk that licenses needed for DeHealth's business may not be issued in a timely fashion or at all or may be subject to onerous conditions. Furthermore, even if the license is issued there can be no assurance that it will not be subsequently recalled or that it will be successfully renewed. Failure to obtain, maintain or renew necessary licenses may have a material adverse effect on DeHealth's business, prospects and results of operations.

RISK OF UNINSURED LOSSES

Unlike bank accounts or accounts at some other financial institutions, DHLT tokens are uninsured unless you specifically obtain private insurance to insure them. Thus, in the event of loss or loss of token value, there is no public insurer or private insurance arranged by us, to offer recourse to you.

RISKS ASSOCIATED WITH UNCERTAIN REGULATIONS AND ENFORCEMENT ACTIONS

The regulatory status of BEP20 Tokens and distributed ledger technology is unclear or unsettled in many jurisdictions. It is difficult to predict how or whether regulatory agencies may apply existing regulation with respect to such technology and its applications. It is likewise difficult to predict how or whether legislatures or regulatory agencies may implement changes to law and regulation affecting distributed ledger technology and its applications. Regulatory actions could negatively impact DeHealth in various ways, including, for purposes of illustration only, through a determination that the purchase, sale, delivery or use of DeHealth constitutes unlawful activity, or that registration or licensing is required for some or all of the parties involved in the purchase, sale, delivery or use of DHLT tokens. DeHealth may cease operations in a jurisdiction in the event that regulatory actions, or changes to law or regulation, make it illegal to operate in such jurisdiction, or commercially undesirable to obtain necessary regulatory approval(s) to operate in such jurisdiction.

RISKS ARISING FROM TAXATION

The tax characterization of DHLT Token is uncertain. You must seek your own tax advice in connection with purchasing DHLT tokens, which may result in adverse tax consequences to you, including withholding taxes, income taxes and tax reporting requirements.

RISK OF COMPETING PLATFORMS

It is possible that alternative platforms could be established that utilize the same business model and tech stack. DeHealth may compete with these alternative platforms, which could negatively impact the adoption of the DeHealth.

RISK OF INSUFFICIENT INTEREST IN DEHEALTH

It is possible that DeHealth will not be used by a large number of individuals, companies and other entities or that there will be limited public interest. Such a lack of use or interest could negatively impact the development of DeHealth.

RISKS ARISING FROM NO REDEMPTION OF DHLT TOKENS

The owners of DHLT tokens will not have the right to compel DeHealth to redeem the tokens. While the owners of DHLT tokens may resell their tokens to other parties (subject to any applicable transfer restrictions), in case the secondary market for these tokens is not developed for a long time or at all, investors in DHLT tokens must be prepared to bear the risks of an investment in tokens for an extended period of time and loss of the investment or its part.

DeHealth

Get in touch

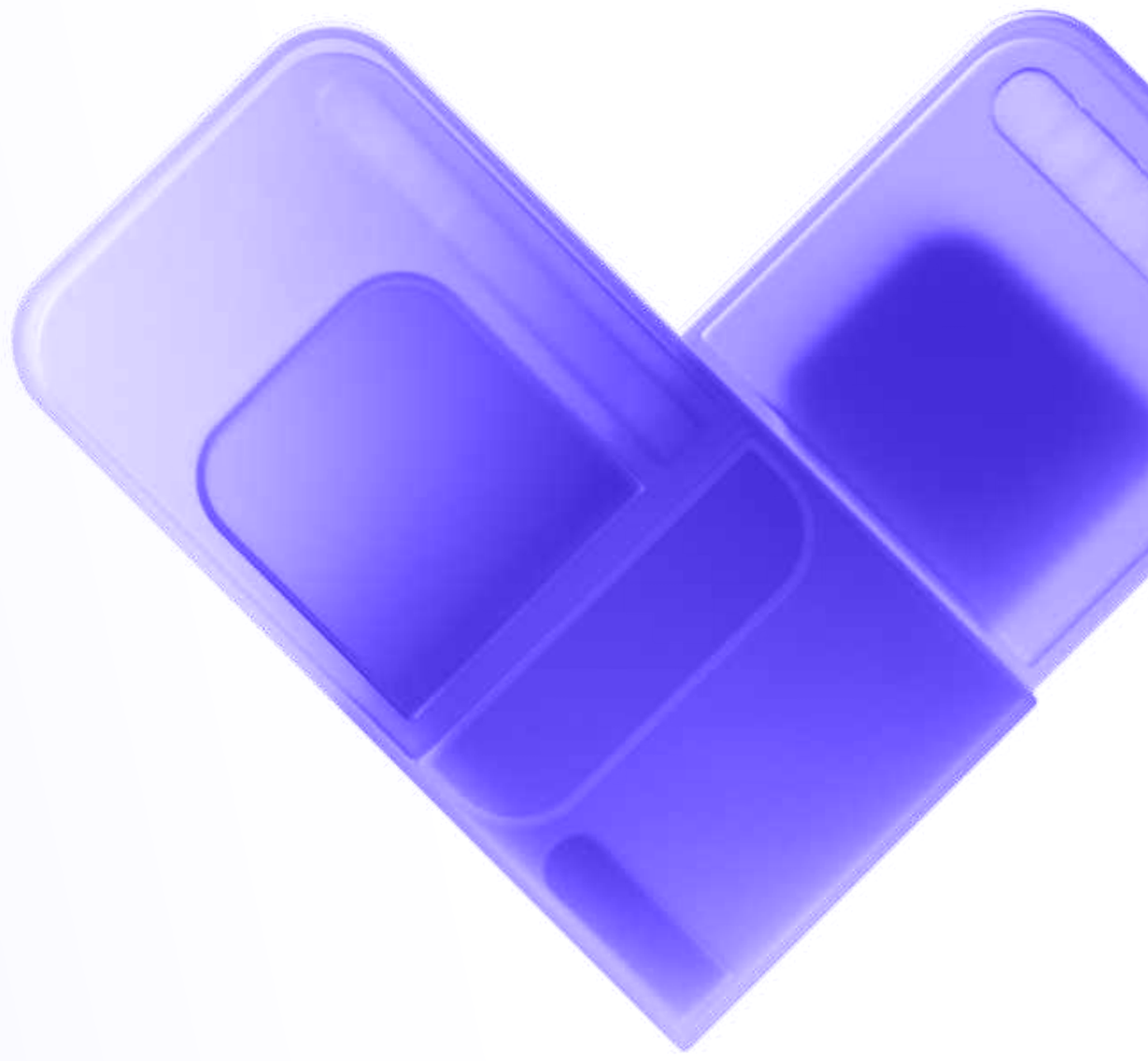
dehealth.world

twitter.com/DeHealth_World

t.me/dehealth

medium.com/@DeHealth

linkedin.com/company/decentralized-healthcare



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