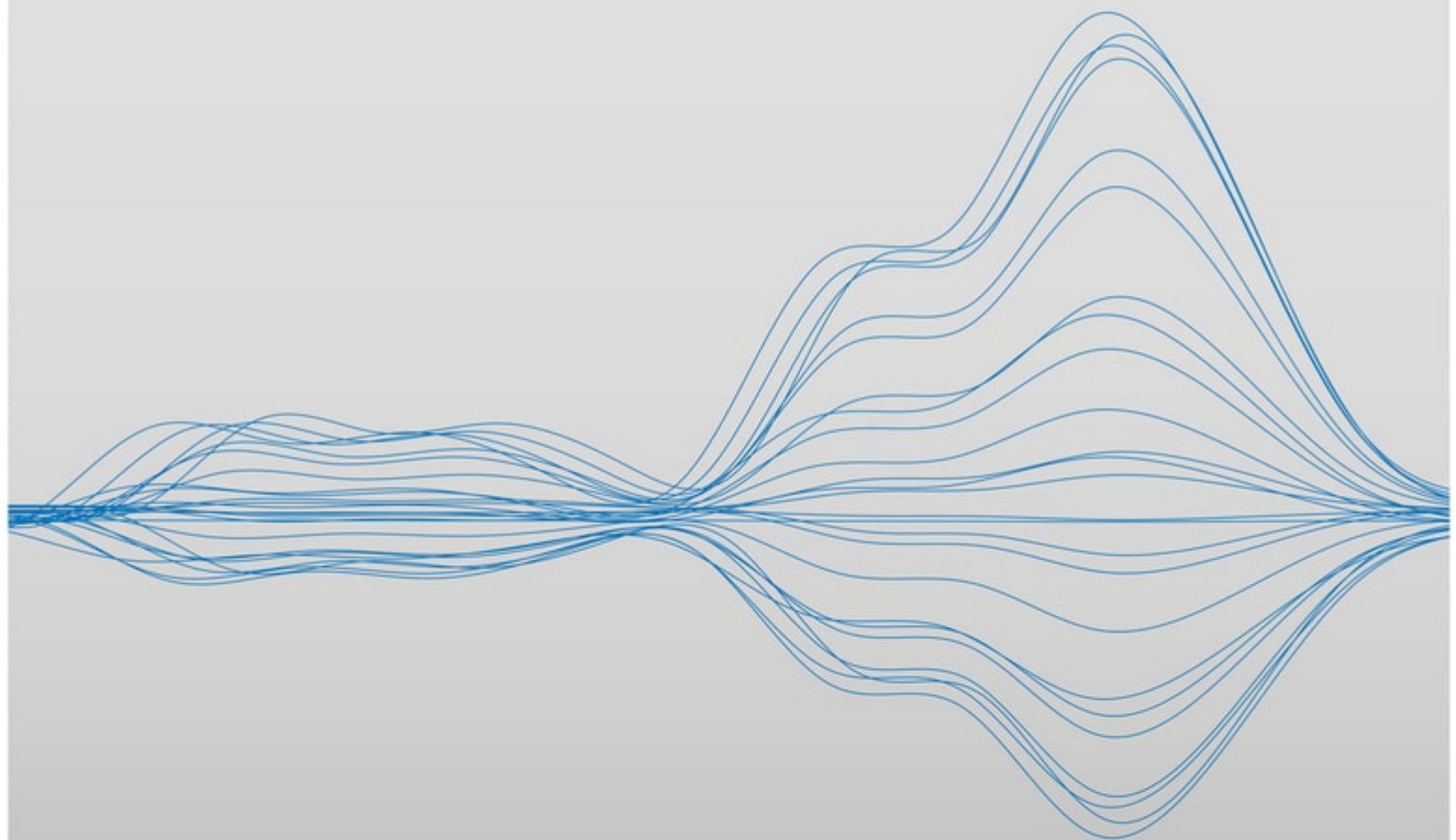


QATAR

Telehealth around the world: a global guide



Introduction

The COVID-19 pandemic has caused healthcare systems around the globe to rapidly, and in some cases, radically rethink the delivery of medical care. The global expansion of telehealth services is one way we have seen this transformation occur. This has resulted in significant opportunities in the field, as well as unprecedented regulatory change.

As a quickly evolving area, 'telehealth' can have different meanings in different contexts. In this Global Guide, telehealth refers to the delivery of healthcare services where patients and providers are separated by distance, using information and communications technology for the exchange of information for the diagnosis or treatment of diseases and injuries. We have adapted this definition from the World Health Organisation's definition of telehealth.

Telehealth is not a new concept – healthcare providers, academics and technology developers have been advocating for its use for decades. There are many benefits to the widespread adoption of telehealth, including improved access to healthcare services, risk mitigation, convenience and flexibility, and in many cases, a reduction in overhead costs. However, the use of telehealth is not without its challenges. For example, it is not suited to all forms of healthcare, its implementation and adoption can be time consuming and costly, and additional care must be taken in relation to the transfer of patient health information.

The restrictions of movement in many parts of the world due to COVID-19 has caused governments to recognise the potential of telehealth, and amend laws and regulations seemingly overnight to enable healthcare providers to deploy telehealth solutions. Many governments have adopted telehealth reforms in a matter of weeks, which may otherwise have taken years to be considered and introduced.

Although many of these reforms presently have an expiration date (dependent on the duration of the COVID-19 pandemic), there is likely to be continued growth in telehealth due to the advantages of such a service – even after the pandemic. There are enormous opportunities in the telehealth space for businesses already operating in this field, businesses considering expanding into telehealth, and start-ups.

This Global Guide provides an overview of the current state of telehealth regulations worldwide and assists readers to identify the opportunities, challenges and risks, on a country-by-country basis. As the field of telehealth, and the regulations underpinning it, remain highly dynamic and subject to change, this document is intended as a general guide and does not constitute legal advice. Should you wish to discuss any aspects of telehealth with a specialist lawyer, please contact us below.

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Qatar

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Is the use of telehealth permitted?

Yes, telehealth is permitted and is currently being practiced in the public and private healthcare sectors in Qatar.

How is telehealth regulated?

There are currently no specific laws that regulate telehealth in Qatar. Telehealth has been introduced to patients by the Qatar Ministry of Public Health ("MoPH") in collaboration with key stakeholders and as part of Qatar's E-Health and Data Management Strategy. The MoPH has activated channels to healthcare services at Qatar's Primary Healthcare Corporation ("PHCC"), Qatar's State healthcare provider Hamad Medical Corporation ("HMC"), and TASMU Smart Qatar, Ministry of Communications and Information Technology (previously, Ministry of Transport and Communication) ("MoCIT") (an initiative aligned to the MOCIT that aims to transform Qatar into a world class smart city that has the latest digital solutions to increase the standard of living and increase Qatar's competitiveness internationally).

Are there specific fields of healthcare in relation to which telehealth services are currently available, and do they involve the use of proprietary technology or platforms?

PHCC and HMC have made available telehealth consultations for patients requiring both routine and primary care including a special telehealth system for delivering better outcomes for stroke patients and a telehealth system to deliver speech therapy. HMC's urgent consultation services enable patients with non-life threatening conditions to speak to a specialist physician that will provide them advice, diagnosis and offer prescriptions. This service covers eleven specialities for urgent care needs for urology, cardiology, orthopaedics, general medicine, general surgery, dermatology, ENT, OBGYN, dental and paediatrics. HMC's Department of Geriatrics has also launched a virtual clinic for patients enabling elderly patients to receive consultations in the comfort of their own home.

Call centres called Nesmaak at 16060 and Hayak at 107 are available for routine calls. Patients can dial 160000 and choose the PHCC option, they are then routed to the a PHCC community call centre offering remote telephone and video consultations. The community call centre operates 7 days a week from 7 am to 11 pm. Patients accessing this service can expect a video or telephone consultation with a physician.

The PHCC has launched a mobile application called Nar'aakom for individuals to access digitised services and for patients to book virtual consultations via the applications with the aim of accelerating digital transformation in the health space.

Does the public health system include telehealth services, and if so, are such services free of charge, subsidised or reimbursed? Where the public health system does not include telehealth services, are such services covered by private health insurance?

The public healthcare system includes telehealth services (see [Fields of healthcare](#)).

Telehealth services on offer are available for all patients free of charge provided the patients are registered with PHCC and HMC and hold health cards.

Do specific privacy and/or data protection laws apply to the provision of telehealth services?

Qatar has implemented Law No. (13) of 2016 Concerning Personal Data Protection ("**Data Protection Law**"). The Data Protection Law is supplemented with a set of regulatory guidelines ("**Guidelines**") issued by the Compliance and Data Protection Department (now referred to as the National Data Privacy Office). The guidelines incorporate concepts from EU privacy regulatory frameworks and seek to clarify obligations under, and address matters that are not dealt with in, the Data Protection Law.

The Data Protection Law applies to personal data when this data is any of the following:

- Processed electronically;
- Obtained, collected or extracted in any other way in preparation for electronic processing; and
- Processed by combining electronic and traditional processing.

The Data Protection Law provides that each individual shall have the right to privacy of their personal data. Such data may only be processed within a framework of transparency, honesty, respect for human dignity and in accordance with the provisions of the Data Protection Law.

Personal data is defined under the Data Protection Law as data relating to a natural person whose identity is identified or is reasonably identifiable, whether through this data or by means of combining this data with any other data or details.

Sensitive personal data means personal data consisting of information as to a natural person's:

- ethnic origin;
- health;
- physical or mental health or condition;
- religious beliefs;
- relationships; and
- criminal records.

Generally, data subject consent is required to collect and process personal data, except to the extent processing is deemed necessary for a "lawful purpose" of the controller, or the third party to whom the personal data is sent. There are limited exceptions to this rule.

"Lawful purpose" is broadly defined to mean the purpose for which the personal data of the data subject is being processed in a legally compliant manner. The guidelines have clarified that "lawful purpose" includes cases where a data controller is processing personal data for its own legitimate interests or to comply with legal or contractual obligations.

Sensitive personal data may only be processed if the National Data Privacy Office consent to the processing of such data.

How should the cross-border transfer of personal information collected and processed in the course of telehealth services be carried out to ensure compliance with applicable privacy laws?

Data controllers may collect, process and transfer personal data when the data subject consents, unless deemed necessary for realising a lawful purpose for the controller or for the third party to whom the personal data is sent. Data controllers should not take measures or adopt procedures that may curb trans-border data flow, unless processing such data violates the provisions of the Data Protection Law or will cause gross damage to the data subject. The Data Protection Law defines 'trans-border data flow' as accessing, viewing, retrieving, using or storing personal data without the constraints of state borders.

The Guidelines have clarified that a data controller transferring personal data outside of Qatar must:

- be able to demonstrate that the transfer is for a lawful purpose and that the transfer of data is made pursuant to the provisions of the Data Protection Law;
- keep track of personal data transferred outside of Qatar as part of its processing activities records;
- take into consideration a number of factors in assessing whether a transfer of personal data would cause “serious damage” to personal data including, but not limited to, whether the data subject would experience emotional distress or physical or material damage; and
- inform the data subject of any transfers of data to countries outside of Qatar and the information should include the location(s) the personal data is being transferred to and information regarding the safeguards in place to protect the data subject's data and privacy.

Are there any currently applicable codes of conduct on the use of telehealth systems and/or security of telehealth data in your jurisdiction?

No.

Are any specific laws, regulations, or self-regulatory instruments expected to be adopted in the near future?

N/A

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