Driving Business Value Through Telemonitoring: Integrating ESG and Digital Health Equity in Healthcare Organizations

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Abstract

In the context of accelerating digital transformation in global healthcare systems, telemedicine and, in particular, telemonitoring are emerging as pivotal tools for promoting equitable access to care. This study presents a comprehensive literature review that explores how *telemonitoring* services can be leveraged to advance *Digital Health Equity* (DHE), particularly for underserved and marginalized populations. The review synthesizes evidence from peer-reviewed literature in the domains of implementation science, health informatics and organizational management, identifying key factors that influence successful adoption of telemonitoring. These factors include digital literacy, infrastructure readiness, ethical governance and socio-technical alignment. The findings emphasize that while telemedicine offers considerable potential in enhancing healthcare delivery, its impact on equity is contingent upon addressing disparities in digital access, trust in technology, and health system responsiveness. The review also highlights the role of *Environmental, Social, and Governance* (ESG) frameworks in embedding sustainability and accountability into telehealth strategies. The study concludes by proposing a conceptual foundation for healthcare organizations to co-design inclusive and resilient telemonitoring models that align with long-term public health and digital equity goals.

Keywords: healthcare organization, telemonitoring, ESG, digital health equity, organizational innovation

1. Introduction

Telemonitoring and the Challenge of Equitable Implementation

The rapid expansion of telemedicine has transformed healthcare delivery, offering innovative pathways to improve access, continuity of care, and cost-efficiency in healthcare organizations. Nevertheless, as telemonitoring becomes more integral to the management of chronic diseases and preventive care, concerns regarding its equitable implementation have become more prominent.

A central challenge in the implementation of these digital health services is to ensure that they do not exacerbate existing disparities in health, particularly among underserved populations who face structural barriers to digital access and literacy (Ekeland et al, 2010; Rich et al., 2019; Price & Simpson, 2022). Digital Health Equity (DHE) – defined as the fair and inclusive use of digital tools in healthcare – has emerged as a crucial objective amid the global digital health surge. The advent of the pandemic provided an impetus for the accelerated adoption of telehealth services, whilst concomitantly highlighting deficiencies in infrastructure, regulation, and user preparedness (Bashshur et al.; Katzow, Steinway & Jan; 2020). Telemonitoring, a subset of telemedicine that facilitates continuous remote patient data collection and analysis, has the potential to bridge geographic and socioeconomic divides. However, the absence of deliberate strategies grounded in equity principles may inadvertently perpetuate the very disparities it aims to address (Chunara et al., 2021). A previous study examined the technical feasibility and clinical outcomes of telemonitoring programs, particularly in the management of chronic conditions such as diabetes, heart failure and hypertension (Bradford et al., 2016). Research has also emphasized barriers to adoption, including digital illiteracy, poor internet connectivity, and limited organizational readiness (Almathami et al., 2020). While these findings underscore the implementation challenges, there is a paucity of studies that take a multidimensional view integrating health equity, governance, and sustainability into telemonitoring frameworks.

The integration of environmental, social, and governance (ESG) principles into digital healthcare organizations

signifies a paradigm shift from a technology-centric approach to a strategy that is value-aligned. The extant literature highlights that integrating ESG into telemonitoring and broader digital health services enhances sustainability, accountability, and equity in healthcare delivery. For instance, Sepetis et al. (2024) propose an innovative ESG-Digital Transformation (DT) model that aligns environmental stewardship, inclusive healthcare access and transparent governance in healthcare systems. The proposed framework underscores the symbiotic reinforcement of ESG and digital health objectives, particularly in domains such as carbon footprint mitigation and the responsible implementation of artificial intelligence. In a similar manner, ESG integration into primary health care services fosters a culture of social accountability, with a particular focus on digital inclusion among marginalized populations (Chow et al., 2025). From a governance perspective, the establishment of responsible digital health systems necessitates the implementation of robust frameworks for ethical data usage, privacy, and stakeholder engagement, which are fundamental components of ESG accountability (Pesqueira, 2024).

The role of blockchain and digital identity management is important as a tool to operationalize governance transparency in real-time health monitoring. In a similar vein, the symbiotic relationship between ICT systems and ESG strategies asserts that ESG-aligned digital platforms are more likely to enhance access, patient trust and resilience in healthcare delivery. Furthermore, healthcare organizations that adopt ESG metrics, including equitable data access, green procurement for telehealth devices and inclusive platform design, are better positioned to demonstrate corporate responsibility while enhancing operational performance (Božić, 2023). The aforementioned insights collectively illustrate that ESG is not a peripheral concern but a strategic framework that, when embedded in digital healthcare contexts, enhances both ethical integrity and business efficiency (Sijm-Eeken et al., 2024).

The primary objective of this study is to identify the key organizational, technological and ethical factors that shape the equitable implementation of telemonitoring in a healthcare organization. The central hypothesis of this study is that telemonitoring initiatives which are aligned with DHE principles and ESG accountability will be more effective and sustainable in reducing disparities particularly identified in the provision of care by healthcare organizations. A secondary hypothesis suggests that without policy-driven organizational restructuring, technological innovations are insufficient to ensure health equity outcomes.

The conceptual framework is informed by the interaction of the following hypotheses:

H1: Technological innovation in the healthcare organization is not enough; equitable outcomes require complementary organizational policies and community-centered design.

H2: Embedding ESG principles strengthens healthcare organizations sustainability and ethical governance.

H3: DHE-sensitive interventions moderate the effect of technological infrastructure on access and health outcomes.

In order to investigate these propositions, the study adopts a literature review approach that synthesizes empirical and theoretical contributions from healthcare organizations theories, healthcare informatics and business public health. The study's design is meticulously tailored to the research questions, with the approach entailing the identification of conceptual intersections and the articulation of lacunae within the extant evidence base.

The study contributes to the existing discourse on digital transformation in healthcare organizations by providing healthcare organizations with a model for designing and implementing large-scale telemonitoring systems that comply with the ESG paradigm.

This framework is especially relevant as healthcare organizations strive to balance innovation with social responsibility in a post-pandemic era.

2. Transforming Healthcare: Driving Business Growth Through Digital Inclusion and Innovation

As the discourse on telemedicine evolves, the imperative to prioritize DHE within its deployment becomes increasingly urgent. The extant literature indicates that the digital divide is not merely technical but is also deeply socio-structural in healthcare organizations. Ensuring equitable telemedicine adoption, therefore, demands more than digital access: it necessitates the development of culturally responsive tools, trust-building mechanisms, and sustained policy alignment. These insights provide a rationale for integrating DHE into broader strategic frameworks such as ESG, emphasizing that inclusion must be central to any vision of digitally enabled healthcare.

2.1 Telemedicine and Digital Health Equity in Healthcare Organizations

Telemedicine integration into mainstream healthcare delivery has catalyzed new opportunities to improve access, efficiency, and patient-centred care of healthcare organizations. However, as its adoption has grown (particularly during the COVID-19 pandemic) so too have concerns regarding its potential to exacerbate digital health disparities. DHE is defined as fair and just access to digital health technologies and is now widely recognized as a critical

dimension to be considered by the governance of the healthcare organization to ensure a correct telemedicine deployment.

According to Rodriguez (2023) the distribution of telemedicine's benefits is unequally distributed due to disparities in internet access, digital literacy and socio-cultural barriers. These observations are consistent with research by Barr et al. (2021), who emphasized that telemedicine systems must be intentionally designed with equity in mind, rather than assumed to be inherently inclusive. A growing body of literature highlights those systemic inequalities, including income, education, race and rurality, directly influence patients' ability to engage with telemedicine platforms. For instance, Lyles et al. (2022) argue that centering health equity in the design of telemedicine services is imperative, as digital tools may reinforce exclusion if they do not account for language diversity, cultural values, and trust in technology. In a similar vein, Greiwe et al. (2021) posit that the potential for telemedicine to promote equity is contingent upon the existence of inclusive infrastructure and reimbursement policies.

The ethical dimensions of telemedicine have also been the subject of extensive debate by the governance of healthcare organizations. Petretto et al. (2024) emphasize how structural challenges, including a paucity of broadband access and inadequate provider training, engender persistent disparities in care delivery for disadvantaged groups. Rodriguez et al. (2020) emphasize the need to integrate digital health equity into federal health regulations and quality frameworks used by healthcare organizations, particularly in light of evolving interoperability rules and telehealth reimbursement models. The present perspective is in line with that of Blount et al. (2023), who, drawing upon mixed-methods data from the U.S. Southeast, identify barriers such as digital mistrust and poor device usability in underserved communities.

The findings of these studies indicate that telemedicine must be approached with caution, as while it has the capacity to address disparities in access, the absence of deliberate, equity-centred policies risks exacerbating existing inequalities. Consequently, future research and implementation endeavors must prioritize the co-design of systems with marginalized users, the integration of ESG principles to ensure sustainability and ethical governance, and investment in both physical and digital infrastructure. This comprehensive approach is essential to ensure that telehealth fulfils its potential as a tool for universal, just, and inclusive healthcare.

2.2 Integrating ESG Principles Into Telemedicine for Sustainable Healthcare Organizations

The integration of telemedicine with ESG principles reflects a growing acknowledgement of the necessity to harmonize digital health innovation with overarching societal, ethical, and sustainability objectives. As telemedicine becomes more embedded in global healthcare organizations, its potential to support environmental stewardship, promote equitable access, and ensure ethical governance has drawn increasing scholarly attention.

A substantial body of research has documented the environmental benefits of telemedicine, particularly its capacity to reduce the carbon footprint of healthcare organizations. By reducing the need for patient travel and streamlining the delivery of virtual care, telemedicine significantly contributes to achieving climate goals. A comprehensive review of methodologies assessing the ESG of telemedicine concluded that remote care offers measurable reductions in emissions and resource consumption (Purohit et al., 2021; Savoldelli et al., 2023, 2024). The importance of harmonizing technological advancement with environmental responsibility, and the role of telemedicine in catalyzing sustainable healthcare transformation, has also been emphasized (Samal & Samantaray, 2024). In the social dimension, research has demonstrated that telemedicine can enhance inclusivity, particularly when embedded in healthcare organization designed for accessibility (Sun et al., 2023).

The ESG-Digital Transformation (DT) model proposed for healthcare organizations represents a holistic framework that integrates equity and environmental metrics into the strategic planning and implementation of digital health solutions, thereby aligning technological innovation with sustainability goals and social responsibility imperatives (Sepetis et al., 2024). From a governance perspective, ESG-aligned telemedicine initiatives emphasize principles of transparency, accountability, and risk management, which are essential for ensuring ethical oversight, data integrity, and stakeholder trust in digital health environments.

Table 1. Operational variables shaping telemonitoring integration in Healthcare Organizations

Domain	Key Variables	Hypothesized Influence
Technological Infrastructure	- Interoperability - Usability - Data security & reliability	Enables access, engagement, and provider trust
Organizational Readiness	- Staff training - Strategic policy alignment - Workflow integration	Supports system-level change and operational continuity
Equity & Accessibility (DHE)	- Digital literacy programs - Inclusive design - Outreach to underserved groups	Reduces disparities in digital health access
Sustainability & Governance (ESG)	- Ethical standards - Environmental impact - Transparent governance mechanisms	Ensures long-term accountability and trust

Source: our elaboration

The responsible implementation of telemedicine is shown to depend on clear ethical guidelines, stakeholder engagement, and data governance policies to preserve trust and ensure compliance (Pesqueira et al., 2025). Leung and You (2023) further explore the ESG risks and opportunities in telehealth, identifying best practices for ESG alignment such as green procurement in tech infrastructure, inclusive design protocols, and regulatory oversight. The extant literature suggests that telemedicine, when guided by ESG frameworks, is not only a vehicle for innovation but also a strategic asset for sustainable, ethical, and socially accountable healthcare delivery. Future research should focus on the development of standardized ESG metrics for digital health, cross-sector benchmarking, and longitudinal evaluation of environmental and social outcomes in telemedicine initiatives.

2.3 Bridging Telemedicine, Digital Health Equity, and ESG Principles in Healthcare

As healthcare organizations worldwide adopt digital transformation, a growing intersection has emerged between telemedicine, DHE and ESG principles. There is an increasing emphasis among scholars that digital innovation in healthcare should focus not only on efficiency and convenience, but also on promoting inclusive, ethical, and sustainable outcomes. While telemedicine improves access, it can unintentionally reinforce inequalities without equitable policy structures and user-sensitive design (Rodriguez et al., 2023). This finding is consistent with the ESG framework's "social" dimension, which advocates for inclusive access and user engagement as markers of responsible innovation. In a similar vein, the tension in the post-pandemic era between the rapid expansion of telemedicine and the need to address digital divides and support marginalized communities has been acknowledged (Jerjes & Harding, 2024). Another key pillar is environmental considerations. A substantial body of research now positions telemedicine as a sustainability strategy, citing its ability to reduce emissions and alleviate pressure on healthcare infrastructure. The ESG-Digital Transformation model has been proposed to illustrate how ESG-aligned telemedicine infrastructures can simultaneously promote equity and environmental impact (Sepetis et al., 2024). Governance, the third ESG pillar, plays a critical role in ensuring transparency, ethical standards, and resilience in digital health delivery systems. The integration of ESG principles within the governance framework of telemedicine is imperative for the maintenance of ethical practices concerning data privacy, equitable access, and participatory decision-making. The financial sustainability of healthcare systems is contingent upon the establishment of robust governance structures within digital health organizations, which should incorporate mechanisms for community engagement and regulatory compliance (Sepetis & Pierrakos, 2022). The integration of telemedicine, Digital Health Equity (DHE), and ESG principles is proposed as a forward-looking blueprint for technologically advanced, socially

just, environmentally responsible, and ethically grounded healthcare systems. However, attaining this vision necessitates more than mere technical solutions; it demands fundamental shifts in system design, metrics, and accountability frameworks.

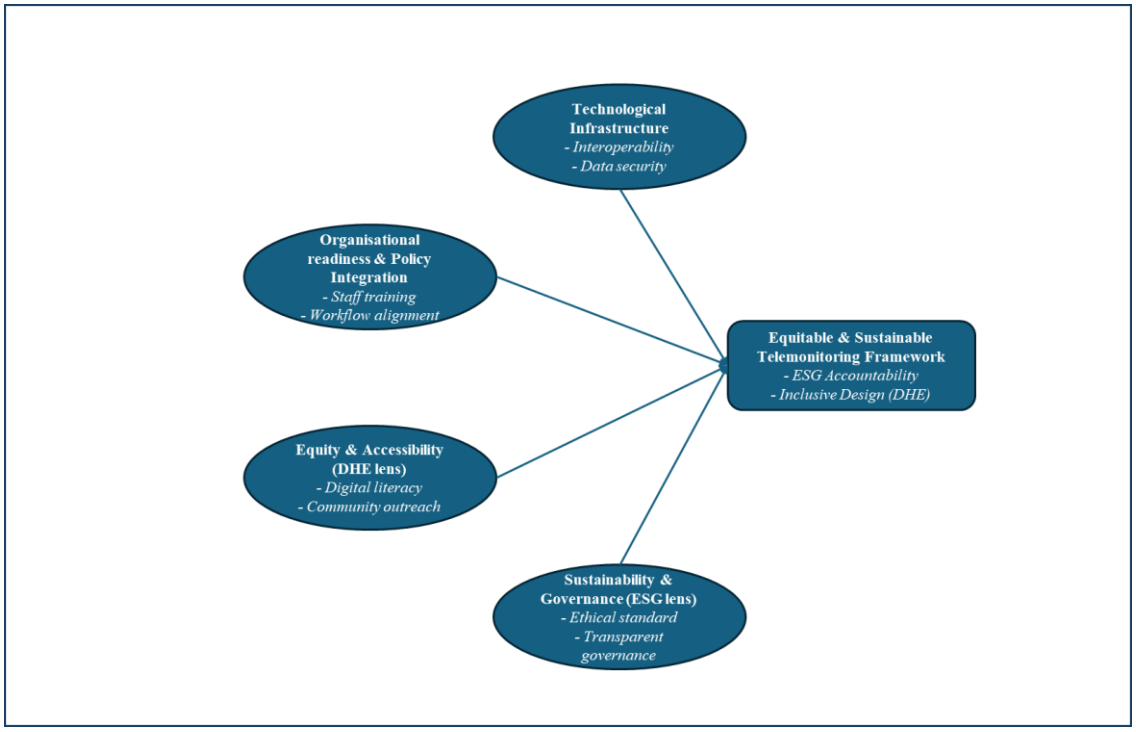

Figure 1. A multidimensional framework for equitable and sustainable Telemonitoring in Healthcare

Source: our elaboration

The conceptual model (Figure 1) presented herein illustrates the four interdependent domains - Technological Infrastructure, Organizational Readiness & Policy Integration, Equity & Accessibility (from a DHE perspective), and Sustainability & Governance (from an ESG perspective) - that collectively contribute to the design and implementation of an Equitable & Sustainable Telemonitoring Framework. The model integrates ESG accountability and inclusive design to guide healthcare organizations towards ethically grounded, socially inclusive, and operationally resilient digital health systems.

2.4 Conceptual Framework

Telemonitoring can be positioned as a valuable, rare, unique, and organizationally embedded (VRIO) asset within healthcare organizations by drawing on the Resource-Based View (RBV) of the firm (Barney, 1991). The integration of ESG-aligned telemonitoring systems, characterized by high data fidelity, ethical governance, and equitable design, has been identified as a facilitator of long-term strategic differentiation. The implementation of these systems has been demonstrated to engender a sustained competitive advantage within the rapidly digitizing healthcare industry, through the enhancement of operational resilience, regulatory alignment, and patient engagement. Furthermore, they function as dynamic capabilities, the imitation of which by competitors is rendered difficult.

This study proposes a conceptual model that outlines the structural and strategic components necessary for achieving inclusive, ethical, and sustainable telemonitoring systems in healthcare organizations. The model is anchored in the integration of DHE principles and ESG frameworks, delineating four interdependent domains deemed essential for implementation. The first domain, Technological Infrastructure, refers to the foundational digital capabilities such as system interoperability, secure data architecture, device accessibility, and scalable platforms. The second domain, Organizational Readiness and Policy Alignment, captures institutional factors including strategic leadership, staff preparedness, implementation protocols, and congruence with regulatory and policy frameworks. The domain of Equity and Accessibility is also of pivotal importance, emphasizing the significance of inclusive design, digital

literacy interventions, and outreach strategies that address the social determinants of digital exclusion. The final domain, Sustainability and Governance, operationalizes ESG principles through ethical oversight mechanisms, environmental impact reduction, and the equitable distribution of resources. The dynamic interplay between these domains is pivotal in ensuring that technological solutions are integrated into ethically sound and socially responsive systems. The theoretical underpinnings of this model are rooted in the Technology-Organization-Environment (TOE) framework (Tornatzky & Fleischer, 1990), the Digital Health Equity Theory, and contemporary ESG healthcare governance models (Sepetis et al., 2024; Hu et al., 2022). Collectively, these perspectives emphasize that achieving significant impact in telemonitoring necessitates more than technological readiness – it requires systemic transformation rooted in principles of equity, ethics, and long-term sustainability. This study proposes a novel conceptual model to guide the development of equitable and sustainable telemonitoring systems within healthcare organizations. This framework provides healthcare organizations with a practical and theoretically robust foundation for the following: program design, policy evaluation and cross-sector collaboration.

3. Results

A synthesis of multidisciplinary literature reveals four critical and interdependent domains that collectively underpin the effective, equitable, and sustainable implementation of telemonitoring in healthcare (Table 3). These domains are: technological infrastructure, organizational readiness, DHE, and ESG-aligned governance. The strategic coordination of these domains is consistently associated with improved system resilience, operational efficiency, and inclusive health outcomes. This finding lends support to Hypothesis 1 (H1), which states that technological innovation alone is inadequate for achieving equitable health outcomes and that the adoption of complementary organizational policies and community-centred design is essential. Empirical and conceptual evidence demonstrates that aligning environmental, social, and governance (ESG) principles with digital transformation (DT) fosters robust healthcare systems that are adaptable to both ethical imperatives and environmental constraints. The alignment of these principles has been demonstrated to reduce carbon emissions through remote monitoring and virtual care models, while concurrently enhancing user trust and access to care, particularly among underserved populations (Sepetis et al., 2024).

These findings validate Hypothesis 2 (H2), which asserts that embedding ESG principles enhances both system sustainability and ethical governance, especially for vulnerable groups. In the context of digital health equity, the implementation of local ESG frameworks within primary care has resulted in quantifiable enhancements in health outcomes when telemonitoring systems are co-designed with community input. These systems, when accompanied by targeted digital literacy initiatives and equitable broadband access, have been particularly successful in reducing disparities in digital participation (Chow et al., 2025). This finding is further corroborated by parallel studies, which indicate that ESG-aligned digital solutions provide both an infrastructural and ethical framework for equity-focused care delivery (Sijm-Eeken et al., 2024; Saxena & Joshi, 2024). Furthermore, the integration of sustainable development goals (SDGs) into digital health policy has been shown to bolster ethical compliance and user satisfaction, particularly in contexts requiring remote monitoring and chronic disease management. In this model, equity is not merely a by-product, but rather a fundamental design imperative woven into the very fabric of institutional strategy and governance frameworks (Bocean & Vărzaru, 2025). In the context of data governance, the integration of real-time monitoring technologies with robust privacy protections has been shown to facilitate efficient resource allocation and enhance public trust in digital platforms (Zhang, 2024).

Table 3. Synthesis of Hypotheses, Findings, Empirical Evidence, and Conceptual Frameworks for ESG-Aligned and Equity-Centered Telemonitoring Systems

Hypothesis	Key Findings	Results	Conceptual Frameworks
H1: Technological innovation alone is not sufficient—equitable outcomes require complementary organizational policies and community-centered design.	Technology must be integrated with policy reforms, workforce training, and inclusive user design to realize equitable outcomes.	Telemonitoring outcomes are enhanced when paired with inclusive governance and literacy programs (Chow et al., 2025; Bocean & Vărzaru, 2025).	Technology-Organization-Environment (TOE) Framework; Digital Inclusion Theory
H2: Embedding ESG principles strengthens system sustainability and ethical governance, especially for vulnerable populations.	ESG-DT integration improves operational resilience, environmental performance, and trust in digital health systems.	Integration of ESG into telemonitoring systems reduces carbon emissions and enhances transparency and governance (Sepetis et al., 2024; Sijm-Eeken et al., 2024).	ESG-Digital Transformation (DT) Model; Sustainability in Health Systems
H3: DHE-sensitive interventions moderate the effect of technological infrastructure on access and health outcomes.	Community-informed digital health interventions significantly improve access and mitigate disparities in outcomes when aligned with DHE.	DHE-focused telemonitoring designs show improved patient satisfaction, access, and chronic care engagement (Chahal et al., 2025; Zhang, 2024).	Digital Health Equity Framework; Participatory Design in Health Innovation

Source: our elaboration

A review of the extant literature reveals some empirical studies that underscore the operational advantages of telemonitoring. However, it is important to note that the primary objective of the present study is conceptual in nature. For instance, research has demonstrated that remote patient monitoring can reduce hospital readmissions by 25-40%, shorten average length of stay, and reduce per capita healthcare costs by as much as 20% (Mosnaim et al., 2022; Gallegos-Rejas et al., 2023). The implementation of such systems has been demonstrated to enhance staff productivity and resource allocation, particularly when employed in conjunction with ESG-compliant protocols that promote green infrastructure and equitable digital access. The efficacy of telemonitoring as a strategic asset is further substantiated by these efficiency gains.

The recommendation of ongoing monitoring through ESG key performance indicators (KPIs), stakeholder involvement, and transparent evaluation has been made as a means of sustaining accountability across digital health initiatives (Hu et al., 2022). However, it should be noted that innovative financial models are required to support these infrastructures, particularly in resource-constrained environments. Without such financial support, ESG-integrated frameworks may remain conceptually promising but pragmatically unrealized (Chahal et al., 2025). This observation underscores the relevance of Hypothesis 3 (H3), which posits that DHE-sensitive interventions serve as moderators between technological access and health outcome efficacy. The extant literature, when

considered collectively, substantiates the proposed conceptual model. It is argued that ESG-aligned telemonitoring constitutes more than a technical apparatus; rather, it represents a strategic realignment of healthcare towards justice, sustainability, and resilience. Equity and environmental integrity are not static objectives but must be regarded as ongoing institutional commitments necessitating dynamic governance, inclusive design, and sustained systemic investment.

4. Discussion and Conclusions

The integration of ESG principles into telemonitoring frameworks signifies a paradigm shift in the way healthcare organizations conceptualize digital health equity and sustainability. This study contributes to an emerging discourse that challenges the traditional dichotomy between innovation and inclusion. By synthesizing literature across the disciplines of health informatics, organizational science and ESG governance, the findings advocate for a holistic redesign of digital health strategies. This redesign is intended to address not only the deployment of technology but also to embed ethical, environmental and social imperatives at the system level. This transition is of particular significance in the post-pandemic era, where the rapid adoption of digital health tools in crisis situations frequently resulted in a lack of the necessary governance structures to ensure equitable impact. By aligning telemonitoring services with DHE and ESG frameworks, organizations can address issues such as digital trust, infrastructural asymmetries, and sustainability metrics while promoting patient engagement and systemic accountability. This study also underscores the pivotal function of healthcare leadership in catalyzing transformation. Absent policy-driven structural transformation and adequate financial investment, particularly in underserved settings, the most advanced technologies risk perpetuating the very disparities they aim to resolve. The integration of ESG criteria into telemonitoring governance, as supported by recent research (Hu et al., 2022; Sepetis et al., 2024), fosters a culture of transparency, ethical decision-making, and resilience. It also encourages the development of shared performance indicators across environmental and equity dimensions, enabling better cross-sector collaboration.

The implementation of ESG-aligned telemonitoring frameworks is increasingly recognized by managerial bodies as an indication of organizational maturity and high-quality governance. ESG risk reduction and long-term value generation are becoming increasingly significant considerations in healthcare investment decisions. Garg et al. (2025) posit that telemonitoring systems which meet the aforementioned requirements are likely to attract investment and be eligible for ESG health bonds. Furthermore, the design and implementation of inclusive telehealth solutions are now as much a fiduciary as a clinical concern, as board-level governance increasingly integrates digital equity metrics into strategic planning.

As a literature-based conceptual study, the paper's limitations are evident in its lack of empirical validation. While it offers a comprehensive synthesis of theoretical and policy-oriented works, it does not present original field data or quantitative evaluation of the proposed framework. The variability in terminology and scope across ESG and DHE studies also poses a challenge, limiting the consistency of outcome measures and cross-comparability. Furthermore, literature is predominantly concentrated in high-income countries, which gives rise to questions regarding the generalizability of the findings to low- and middle-income countries (LMICs), where infrastructure and governance systems may differ significantly. Finally, the evolving nature of ESG frameworks means that institutional definitions and reporting practices are still fluid, which complicates direct application in standardized digital health strategies. Future research should seek to provide empirical validation of the suggested conceptual model through longitudinal studies, cross-sector pilot programs, and comparative case analyses in a variety of healthcare settings. Mixed-methods research can evaluate how healthcare organizations operate ESG and DHE principles in real-time telemonitoring initiatives, including stakeholder engagement processes, environmental performance tracking, and patient-centred equity metrics. The development and testing of standardized metrics for integrating ESG and DHE in digital health contexts, tailored for use in facilitating benchmarking and harmonizing policy across national contexts, would also be a valuable addition to the field. In addition, research should explore innovative financing models (e.g. ESG-linked health bonds or social impact investing) to support equity-focused telehealth infrastructure, especially in underserved areas. Finally, the governance of artificial intelligence (AI) in telemonitoring systems must be given greater attention to ensure ethical use of data and alignment with both ESG standards and health equity goals.

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Authors' contributions

Prof. Salvatore and Dr. Spinnato were responsible for study design and revising. Prof. Salvatore and Dr. Spinnato were responsible for data collection and data analysis Prof. Salvatore drafted the manuscript and Prof. Taliento and Prof. Milone revised it. All authors read and approved the final manuscript.

Competing interests

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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Obtained.

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The data that support the findings of this study are available on request from the corresponding author. The data are not publicly available due to privacy or ethical restrictions.

Data sharing statement

No additional data are available.

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