ArogyaOne add-ons, standalone tools and recommendations

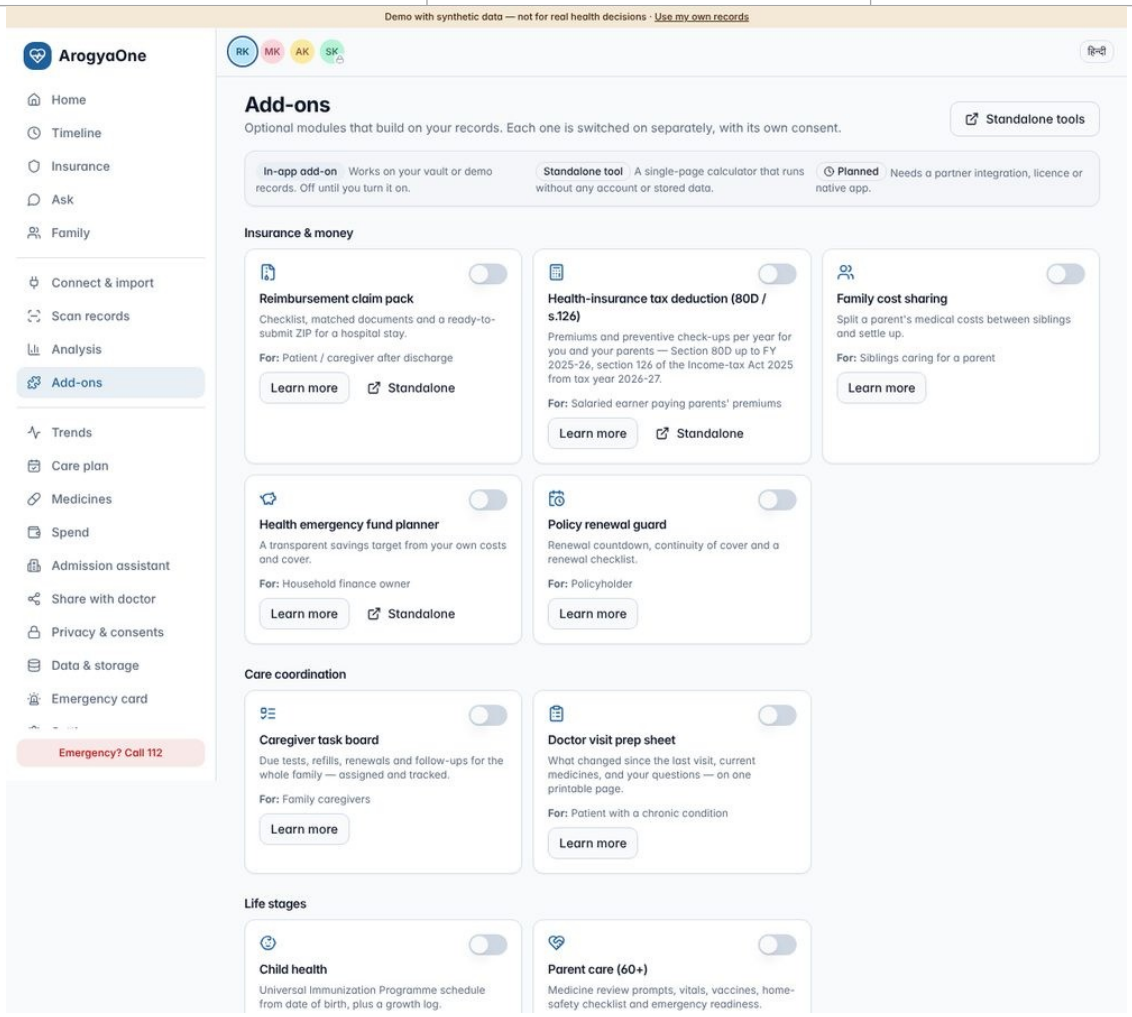
Incremental and standalone use-cases built on the consumer health data aggregator — v0.3

23 October 2026

1. Summary

This release turns recommendations from the earlier research report, wireframes and app sessions into **working, separately consented modules**. You can adopt them one at a time, without changing the core product.

What	Count	Where
In-app add-ons: optional modules that work on the user's own records (demo or private vault)	11	ArogyaOne → **Add-ons** (`#/addons`)
Standalone tools: single-page calculators and checklists that need no account and store nothing	5 + hub	`apps/arogyaone/tools/` and `apps/health-tools/`
Planned add-ons: need a partner, a licence or a native app	13	Listed in the app and in section 7



The Add-ons hub: each add-on has its own switch and consent; planned add-ons are listed below

How the add-ons are built

- **Off by default, one consent each.** Turning an add-on on creates its own consent record (`Add-on: <name>`, purpose `A-<id>`). Turning it off withdraws that consent, and the user chooses whether to **keep or erase** what the add-on stored.
- **Read through the existing consent filters.** An add-on sees only what the core app may show for that person: records whose source consent is active, family members the user can access, and confirmed (not low-confidence) scanned values.
- **Nothing leaves the device.** Packs (ZIP), letters and CSVs are built in the browser. The standalone tools carry a Content-Security-Policy that **blocks every network request**.

- **Guardrails are built in.** Every add-on shows its limits (“not tax advice”, “never stop a medicine”, “you submit the claim yourself”). Every regulatory figure is marked **VALIDATE** and listed in section 8.

What to do next

- **Ship first (P1):**
  - Claim pack
  - Important documents + emergency card
  - Doctor visit prep
  - Health-insurance tax deduction (80D / s.126)
  - Caregiver task board
  - Child health (after clinical sign-off of the schedule)
- **Use the standalone tools for acquisition.** They are free, shareable and private by design, and each links to its in-app add-on.
- **Fix the open regulatory items before a public launch** (section 8). The most important: the tax add-on is year-aware because **income from 1 April 2026 falls under the Income-tax Act, 2025, where the health-insurance deduction is section 126**, not 80D.

Test evidence (section 9)

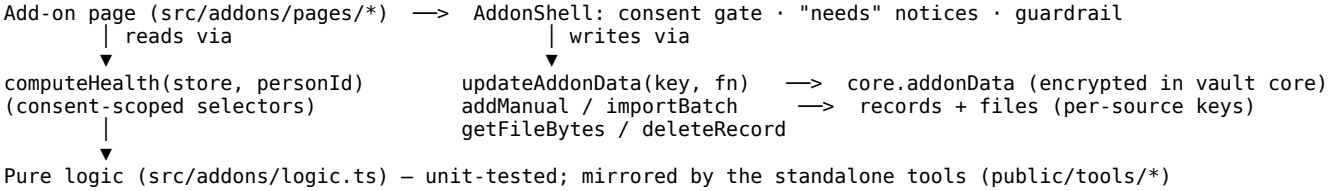
Suite	Result
Unit tests on add-on formulas	13/13
Add-ons end-to-end in demo	70/70
Add-ons on a private vault	16/16
Vault regression	41/41
Demo regression	0 errors
Server	19/19

2. How add-ons work

2.1 Principles

1. **Incremental:** each add-on uses records the core app already holds. None needs a new connector or a new backend.
2. **Consent per purpose (DPDP):** a new purpose gets a new consent, which is as easy to withdraw as to give. The add-on's data is erasable on its own.
3. **Data minimisation:**
   - An add-on stores only what it needs: ticks, assignments, notes, growth entries, its document index.
   - Clinical facts the user adds through an add-on (a vaccine dose, an important document) become ordinary records with provenance "Entered by you".
4. **No advice, no selling:**
   - No insurance product comparisons or recommendations, no tax advice, no diagnosis or treatment changes.
   - Suggestions are phrased as questions for the doctor or adviser.
5. **Works offline and in the private vault:** add-on state is encrypted with the vault core and synced only as ciphertext.

2.2 Architecture (as built)

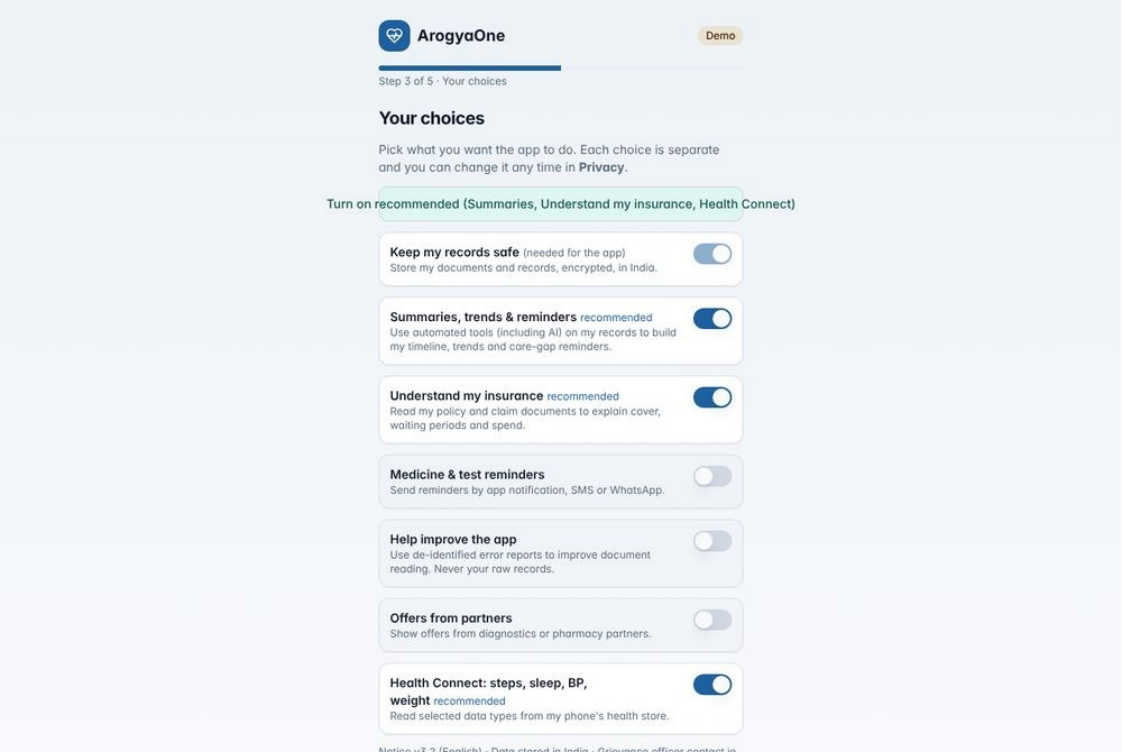


Lifecycle

- **Turn on:** creates `cn-addon-<id>` (status active) and writes the audit event "Add-on enabled".
- **Turn off:** sets the consent to withdrawn, with either "keep its data" or "erase its data". Erasing deletes the add-on's `dataKeys`. Records the user created stay until deleted or until their source consent is withdrawn.
- **Privacy & consents page:** shows an **Add-ons** section with a switch for each add-on.
- **Needs:** some add-ons read through a core permission ("Understand my insurance", "Summaries, trends & reminders"). If that permission is off, the add-on shows a notice instead of silently showing nothing.

2.3 Consent change shipped with v0.3

While testing the add-ons we found that the demo onboarding showed **all optional permissions off**, even though the text implied some were on. Pre-ticked consent is also weak evidence of a "clear affirmative action". From v0.3:



Optional permissions start off; one tap turns on the recommended ones

- Optional permissions **start off** in both demo onboarding and vault setup.
- A one-tap **“Turn on recommended”** button switches on Summaries, Insurance and Health Connect. “Help improve” and “Offers” are never part of “recommended”.
- Add-ons that depend on an off permission explain this.

3. Catalogue at a glance

#	Add-on	Category	Persona	Core use case	Reads	Stores	Standalone twin	Priority
1	Reimbursement claim pack	Insurance & money	Patient / caregiver after discharge	Complete claim file with no missing documents	Stays, documents, bills, policy terms, claims	Checklist ticks, bills excluded	Claim checklist	**P1**
2	Health-insurance tax deduction (80D / s.126)	Insurance & money	Salaried earner paying parents' premiums	One deduction summary per year for the CA	Premiums, check-up bills, ages	Preventive ticks, "not paid by me"	Tax deduction estimator	**P1**
3	Family cost sharing	Insurance & money	Siblings caring for a parent	Who paid what, who owes whom	Out-of-pocket bills of chosen people	Members, shares, payers, settlements	—	P3
4	Health emergency fund planner	Insurance & money	Household finance owner	Transparent savings target	12-month out-of-pocket spend, hospital bills, sum insured left, co-pay	Assumptions	Emergency fund planner	P3
5	Policy renewal guard	Insurance & money	Policyholder	No lapse that resets waiting periods	Policies, renewal dates, waiting periods	Checklist ticks	—	P2
6	Caregiver task board	Care coordination	Family caregivers	One list of what's due and who's doing it	Care gaps, refills, renewals, unconfirmed values, insurer queries	Manual tasks, status, assignee	—	**P1**
7	Doctor visit prep sheet	Care coordination	Patient with a chronic condition	Walk in with what changed and the right questions	Labs, medicines, stays, device averages, due items	Concerns, questions, doctor	—	**P1**
8	Second-opinion pack	Records & sharing	Patient seeking a second opinion	Organised file for a specialist	Selected records and original files	— (download only)	—	P2
9	Important documents	Records & sharing	Everyone, especially elderly parents	Find the donor pledge or insurance card in an emergency	—	Document index (files encrypted in the vault)	—	**P1**
10	Child health	Life stages	Parents	Which vaccines are due; growth log	Children's profiles, immunisations	Growth entries	Vaccination schedule	**P1***
11	Parent care (60+)	Life stages	Adult children of elderly parents	Medicine review prompts, vaccines, home safety, emergency readiness	Medicines, vitals, labs, immunisations, care gaps	Checklist ticks	—	P2

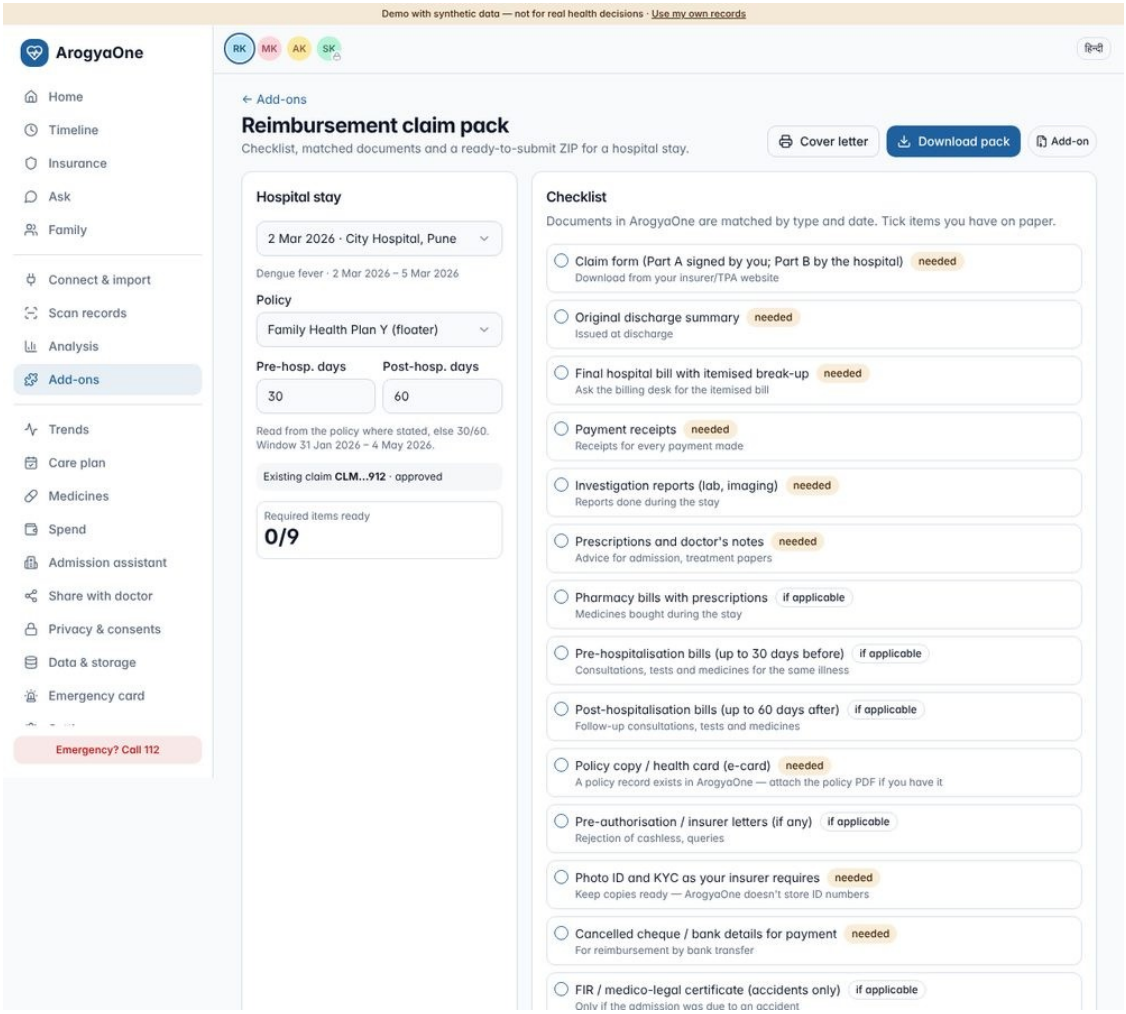
* Ships after clinical sign-off of the schedule and wording.

4. In-app add-ons — detail

Each entry gives: the user story, what the add-on does, data and consent, guardrails, acceptance criteria (covered by the automated tests) and how to try it in the demo.

4.1 Reimbursement claim pack (P1)

User story: “After a reimbursement admission, I want to know which papers I still need and hand over one complete pack, so the claim isn’t queried for missing documents.”



Claim pack: stay, policy windows and the matched checklist

What it does:

- **Picks the stay and the policy.** The user picks a hospital stay (inpatient or day-care) and a policy. The pre- and post-hospitalisation windows are read from the policy text where stated (e.g. “30 days before / 60 days after”); otherwise they default to 30/60, and the user can edit them.
- **Builds a 14-item checklist.** Items include the claim form, discharge summary, itemised bill, receipts, investigations, prescriptions, pharmacy bills, pre/post bills, policy or e-card, insurer letters, KYC, bank details, and FIR/MLC for accidents. Documents already in ArogyaOne are matched by **type and date window**; the user ticks what they have on paper.
- **Lists the bills in the claim window.** Each bill has an **include** box, so regular medicines for an unrelated condition can be left out (pre/post bills count only for the same illness).
- **Produces the pack:**
  - a printable cover letter;
  - a **ZIP** containing the cover letter, the checklist, `claim-summary.json` and the **original files decrypted from the vault**, with correct file extensions.

Data & consent: reads stays, documents, bills, policy and claim records. Stores ticks and excluded bills. Needs “Understand my insurance” for policy terms; without it the defaults apply.

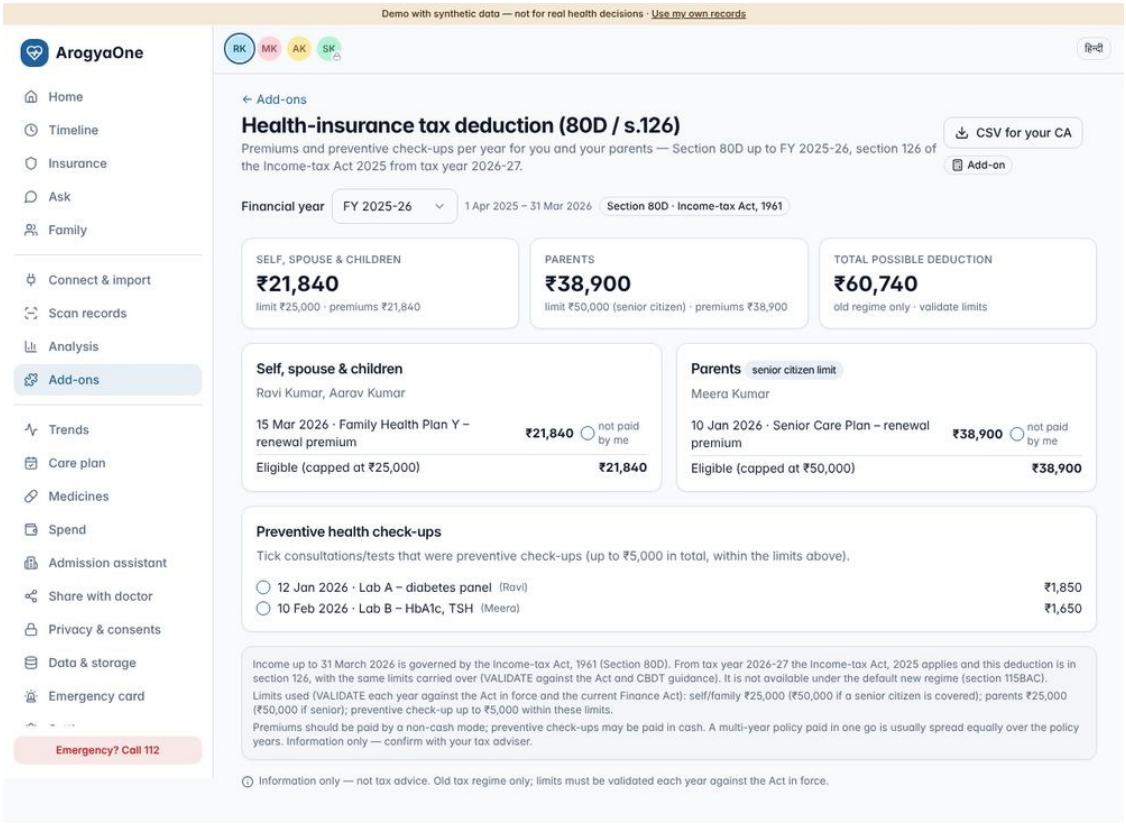
Guardrails: the user submits the claim. Filing or chasing claims on someone’s behalf may need IRDAI review. Insurer document lists differ (VALIDATE).

Acceptance criteria (tested): 14 items; ZIP contains the cover letter, checklist and summary; unticking a bill lowers the total; in the vault, original PDFs are included byte-for-byte.

Try it: Demo → Add-ons → Claim pack → choose the stay → Download pack.

4.2 Health-insurance tax deduction — 80D / section 126 (P1)

User story: “At tax time I want one summary of premiums paid for my family and my parents, with receipts, to give my CA.”



Tax deduction: FY 2025-26 labelled Section 80D; tax year 2026-27 switches to section 126

What it does:

- **Groups people.** Profiles are split into self/spouse/children and parents. Senior-citizen status is taken from date of birth at the end of the year.
- **Totals each group:**
  - premiums (each can be marked “not paid by me”);
  - preventive check-ups, which the user ticks;
  - for an **uninsured senior**, medical expenditure.
- **Applies the limits:** ₹25,000, or ₹50,000 if a senior citizen, per group. Check-ups are capped at ₹5,000 in total within those limits.
- **Is year-aware:**
  - FY 2025-26 and earlier are labelled **Section 80D (Income-tax Act, 1961)**.
  - **Tax year 2026-27 onwards** is labelled **section 126 (Income-tax Act, 2025)**.
- **Exports a CSV for the CA.**

Data & consent: reads premium receipts and consultation/diagnostic bills for accessible profiles. Stores the preventive and “not paid by me” ticks.

Guardrails: information only. Old regime only: the deduction is not available under the default new regime (s.115BAC of the 1961 Act / s.202 of the 2025 Act). VALIDATE each year.

Acceptance criteria (tested):

- The demo FY 2025-26 total is **₹60,740** (Ravi ₹21,840 self; Meera ₹38,900 as a senior parent).
- The caps and the shared ₹5,000 check-up cap are unit-tested.
- The year label switches to section 126 for 2026-27.

Try it: Demo → Add-ons → Health-insurance tax deduction.

4.3 Family cost sharing (P3)

User story: "My sister and I share our mother's medical costs; I want to see who paid what and who owes whom."

What it does:

- Lets the user choose whose costs to share and name the contributors with percentage shares.
- Records **who paid** each out-of-pocket bill.
- Records settlements.
- Computes balances and the **minimum set of transfers** to settle up.

Data & consent: reads the net out-of-pocket amounts (after reimbursement) of the chosen people. Stores members, shares, payers and settlements. Only the chosen people's bills are shown.

Guardrails: amounts come from the user's bills; no payment integration (UPI could be a later, separate consent).

Acceptance criteria (tested): demo shows the transfer "Anita → Ravi"; unit-tested balances and transfers, with settlements bringing the balance to zero.

4.4 Health emergency fund planner (P3)

User story: "I want to know how much to keep aside for health emergencies that insurance won't cover."

What it does: shows a transparent target made of four parts:

- (a) 6 months of recurring out-of-pocket costs;
- (b) one hospital stay — the higher of the worst past share and (co-pay + deductions) % of a typical stay;
- (c) the cover shortfall for a major event, measured against the lowest remaining sum insured among the people included;
- (d) planned or not-yet-covered treatments.

It also shows a monthly saving for a chosen number of months.

Guardrails: not financial or insurance advice; no products are suggested.

Acceptance criteria (tested): unit test (₹5,94,000 / ₹49,500 per month for the reference inputs); the standalone tool reproduces the same numbers.

4.5 Policy renewal guard (P2)

User story: "I don't want a lapse to reset my waiting periods."

What it does:

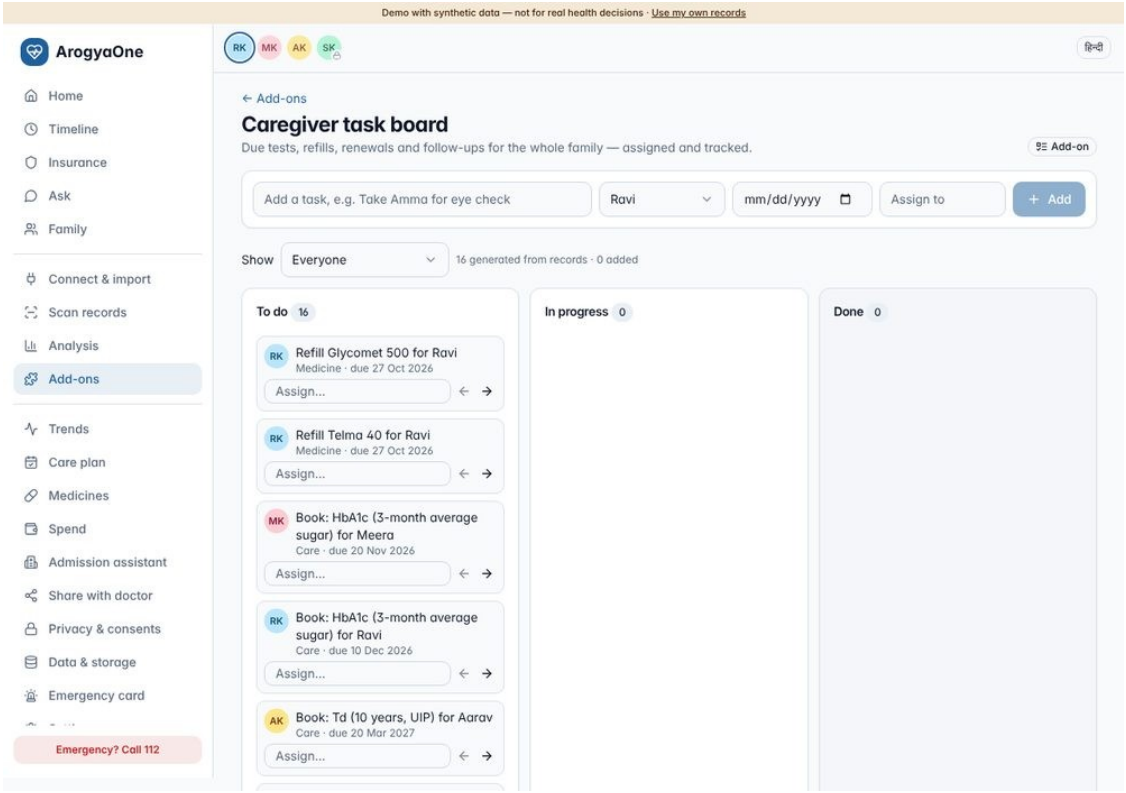
- Shows a renewal countdown for each policy.
- Shows "continuous cover since", and the waiting periods **earned through continuity** with their end dates.
- Gives a renewal checklist: pay by a non-cash mode, review members and sum insured, nominee, disclosures, save the new schedule, and the portability window if moving insurer.

Guardrails: no comparisons or purchase prompts. Grace periods and portability rules come from IRDAI and the insurer (VALIDATE).

Acceptance criteria (tested): 3 demo policies; with the insurance permission off, a clear notice appears instead of “no policies”.

4.6 Caregiver task board (P1)

User story: “Several of us look after our parents; I want one list of what’s due and who’s doing it.”



Caregiver task board with auto-generated tasks

What it does:

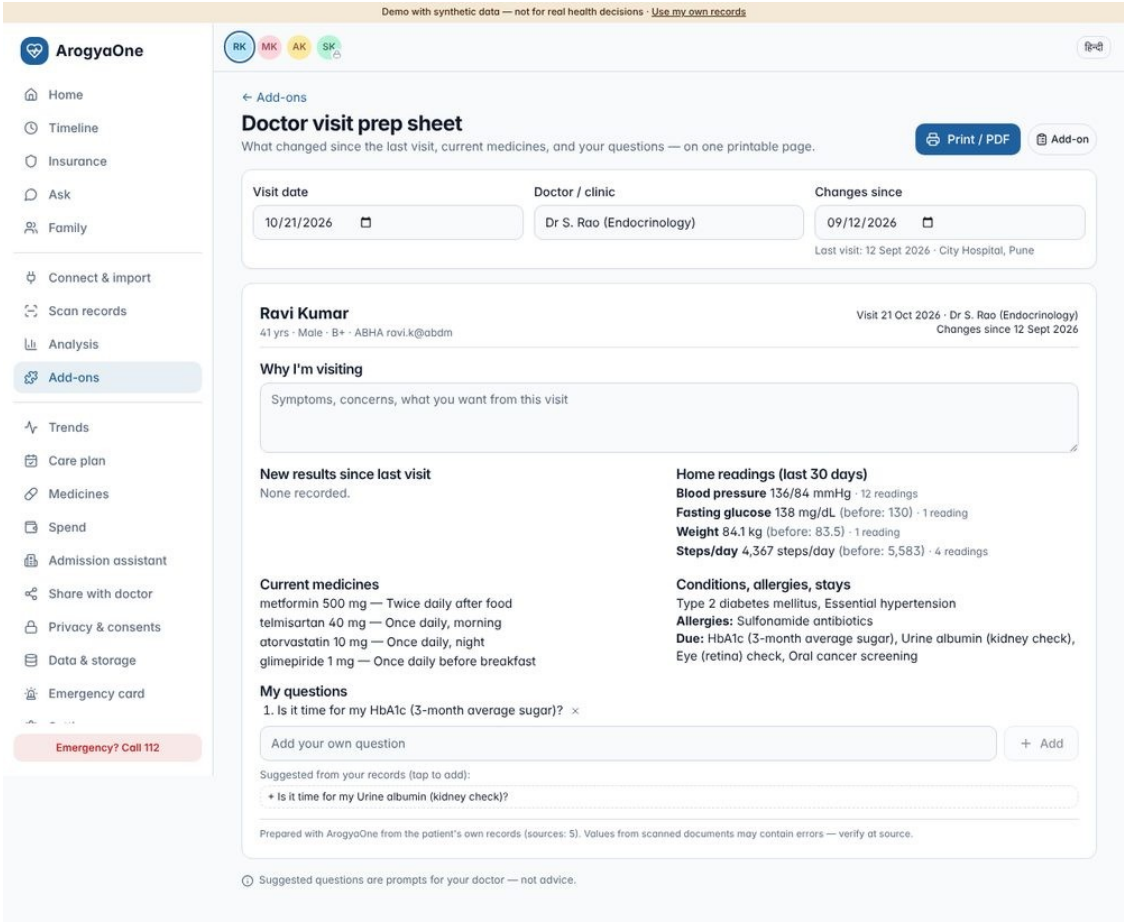
- **Auto-creates tasks for every accessible profile from:**
  - due and overdue care reminders;
  - estimated refills (from pharmacy records);
  - medicines read from handwriting that need confirming;
  - unclear scanned values;
  - documents needing review;
  - renewals within 60 days;
  - insurer queries.
- **Adds the user’s own tasks.**
- **Tracks work on a board:** To do / In progress / Done, with an assignee, a person filter and deep links to the right screen.

Data & consent: stores manual tasks and per-task status and assignee. It reads only profiles the user can access.

Acceptance criteria (tested): 4 auto tasks in the demo; a manual task can be added and moved to “In progress”.

4.7 Doctor visit prep sheet (P1)

User story: “Consultations are short; I want to walk in with what changed and the questions I need answered.”



Visit prep sheet with suggested questions

What it does: builds a one-page, printable sheet (the app's navigation is hidden when printing) with:

- new results since the last visit, with direction and "outside lab range";
- 30-day home-reading averages against the previous 90 days;
- current medicines, marking the new ones;
- conditions, allergies, stays and due items;
- the user's concerns;
- **suggested questions** generated from the records (e.g. "My HbA1c went from 6.8 to 7.4 — what does this mean for my treatment?", or "Two of my medicines contain paracetamol — is that intended?"). The user can add their own questions.

Guardrails: questions are prompts for the doctor, not advice. Scanned values carry a "verify at source" footer.

Acceptance criteria (tested): the sheet renders with suggested questions; in the vault it shows the FHIR-imported HbA1c and metformin.

4.8 Second-opinion pack (P2)

User story: "Before surgery I want a second opinion and need to send a complete, organised file."

What it does:

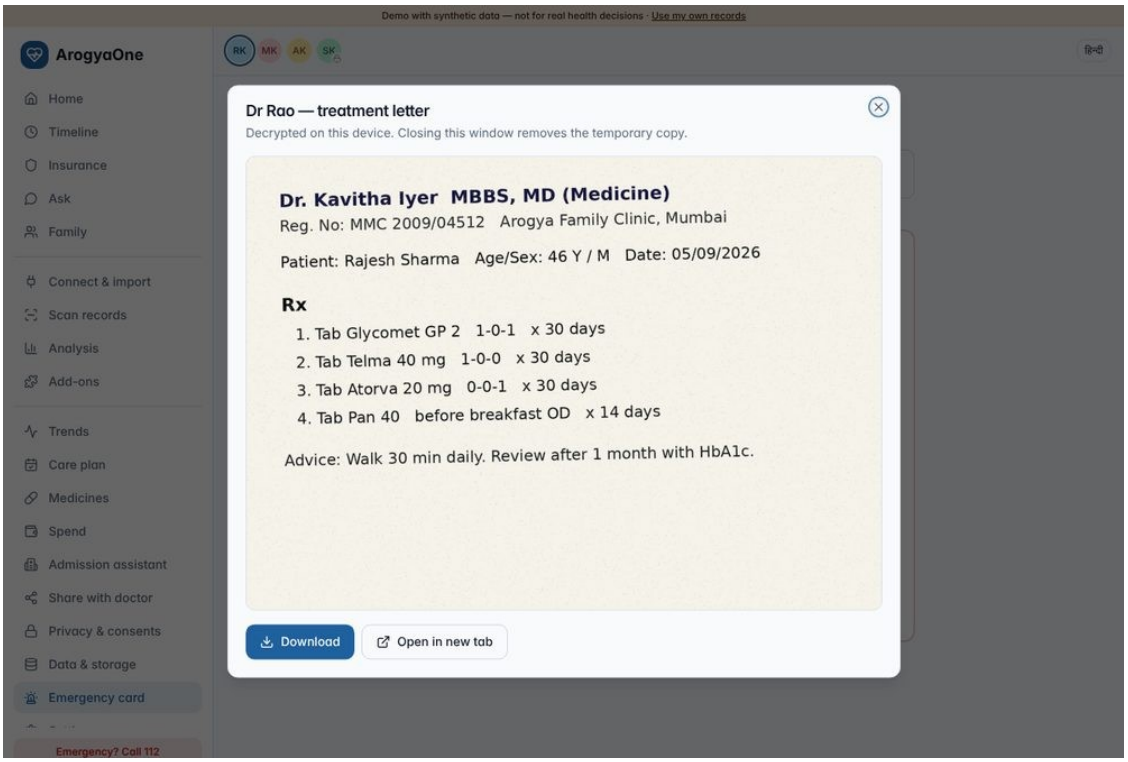
- Lets the user focus on a condition (only related lab tests are kept), pick a date range and choose the categories.
- Builds a **ZIP** containing:
  - `00-summary.html`, a readable summary with sources;
  - `fhir-bundle.json`, for hospital systems;
  - `documents/`, the **original files decrypted from the vault**.

Guardrails: the pack is created on the device. The user shares it only with people they choose, or uses a time-bound share link instead.

Acceptance criteria (tested): demo ZIP contains the summary and FHIR bundle; in the vault, 2 original PDFs are included (`%PDF-` verified) and the bundle includes HbA1c 7.9.

4.9 Important documents (P1)

User story: “In an emergency my family must be able to find my organ-donor pledge and insurance card quickly.”



Emergency card opens a stored document in the in-app viewer

What it does:

- Stores the document types families most often can’t find:
  - organ-donor pledge
  - advance directive or living will
  - disability certificate / UDID
  - blood group report
  - insurance e-card
  - ABHA card
  - doctor’s letters for implants
- **Always keeps the original**, encrypted in the vault, even if “keep original files” is off.
- Lets the user flag documents to appear on the **emergency card**.
- Opens files in an **in-app viewer** (no pop-ups to be blocked), with Download and “Open in new tab”.
- Shows a checklist of the document types that are still missing.

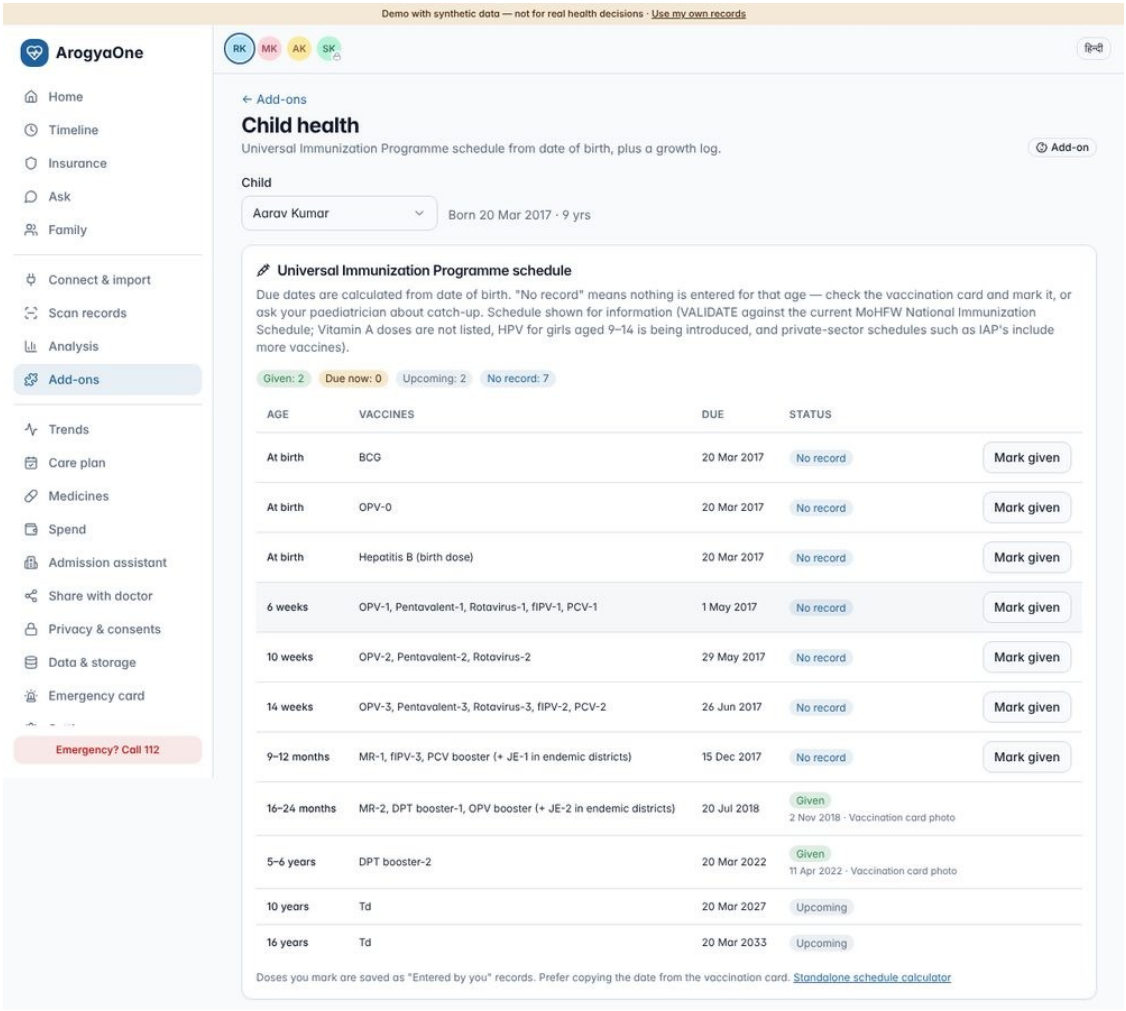
Guardrails: advance directives have legal requirements (Supreme Court guidelines); the app only stores the document — check with a lawyer.

Acceptance criteria (tested):

- Upload works, and the document appears on the emergency card.
- The viewer download is the original PDF.
- Vault behaviour:
  - the note text is **not** found in plaintext in IndexedDB;
  - the document survives lock/unlock;
  - deleting it removes the encrypted file.

4.10 Child health (P1 after clinical sign-off)

User story: "I want to know which vaccines are due and keep my child's height and weight in one place."



Child health: UIP schedule from date of birth and growth log

What it does:

- **Shows the UIP schedule calculated from date of birth**, from birth doses to Td at 16 years. The 9-month visit lists MR-1, fIPV-3 and the PCV booster.
- **Gives each dose a status:**
  - Given (with source)
  - Due now
  - Upcoming
  - **No record**: past the usual age with nothing entered. It prompts the parent to check the card or ask about catch-up and never says "missed".
- **"Mark given"** records a dose with its date, provenance "Entered by you".
- **Keeps a growth log** with a chart and BMI. It notes that child BMI must be read against age- and sex-specific charts.

Data & consent: needs a child profile created with parental consent. The vaccine record is clinical; the growth log is add-on data that can be erased.

Guardrails: schedule shown for information; JE applies only in endemic districts; HPV for girls aged 9–14 is being introduced; private (IAP) schedules include more vaccines (VALIDATE).

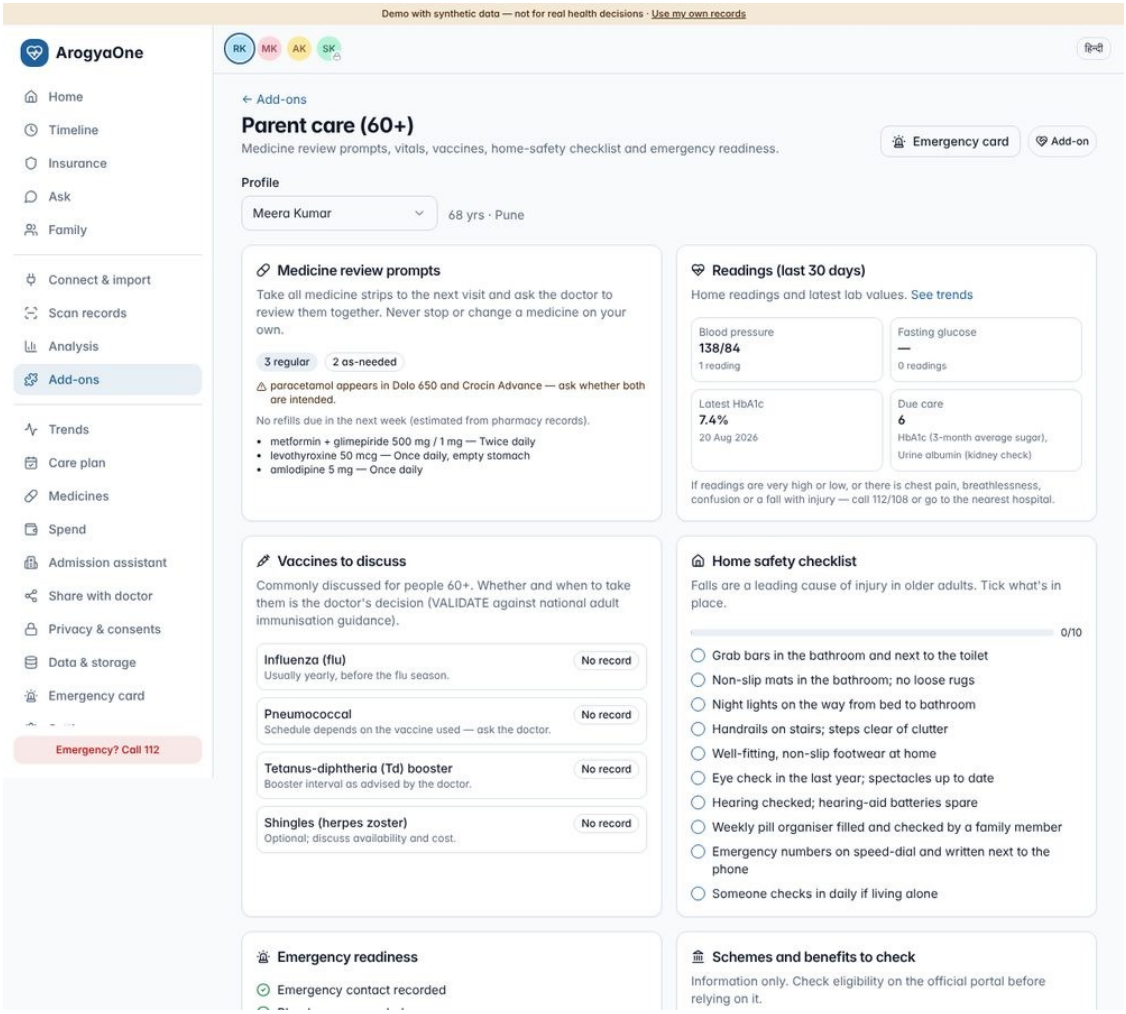
Acceptance criteria (tested):

- 11 rows; the demo's MR-2 and DPT booster-2 show as given.
- Marking a dose updates its status; every dose marked through the add-on matches only its own row.

- Turning the add-on off and erasing removes the growth log but **keeps the vaccine record**.

4.11 Parent care, 60+ (P2)

User story: “My mother takes several medicines; I want to spot duplicates, keep vaccines up to date and make her home safer.”



Parent care: medicine review prompts, readings, vaccines, home safety, emergency readiness, schemes

What it does:

- **Medicine review prompts:**
  - regular vs as-needed medicines;
  - a flag at 5 or more regular medicines;
  - the same ingredient in two products;
  - medicines still to confirm;
  - refill estimates.
  - The prompts encourage a “take all strips to the visit” review and say never to stop a medicine.
- **Readings:** 30-day BP and fasting glucose, latest HbA1c, due care, and when to call 112/108.
- **Vaccines to discuss:** influenza (yearly), pneumococcal, Td, zoster.
- **Home safety:** a 10-item falls-prevention checklist.
- **Emergency readiness:** contact, blood group, allergies, ABHA, policy, and documents on the emergency card.
- **Schemes to check:** PM-JAY for people aged 70+ (Ayushman Vay Vandana card), the senior tax-deduction limit, and CGHS or state pensioner schemes.

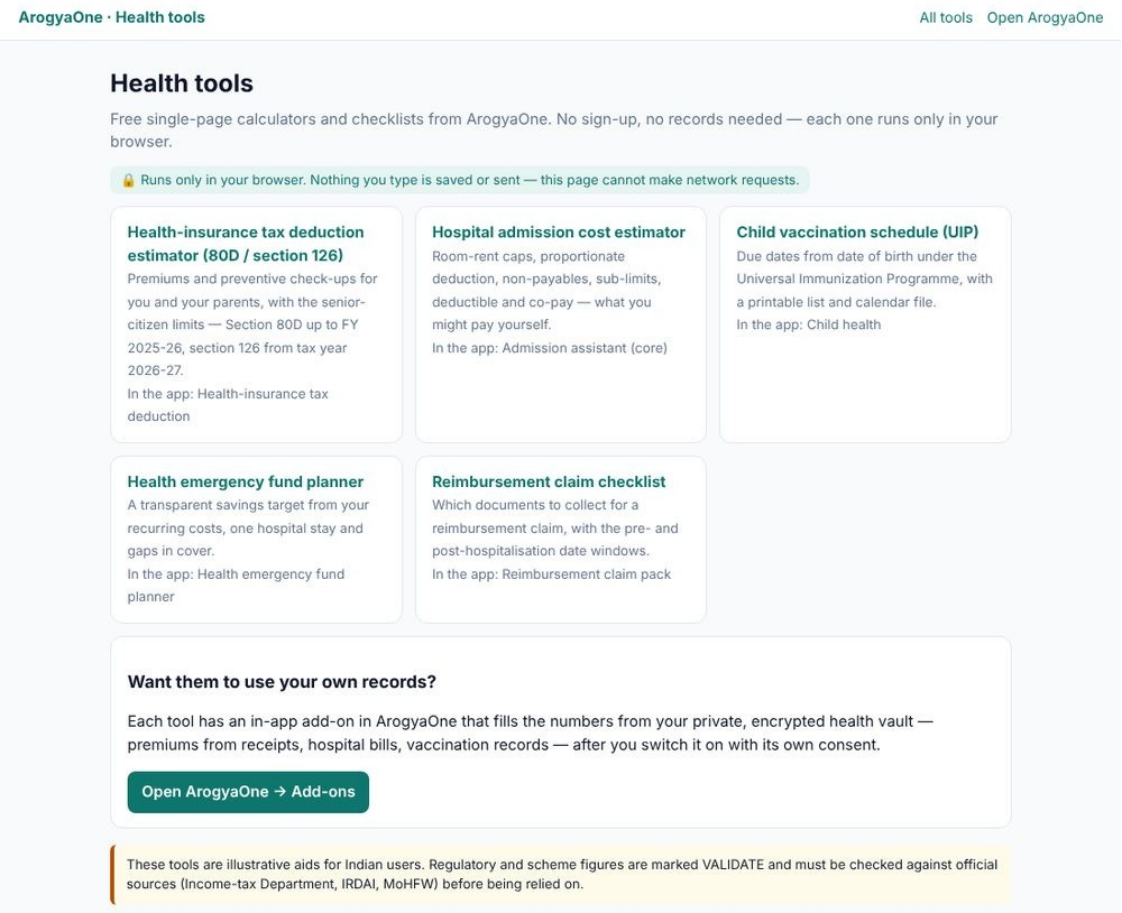
Guardrails: prompts to discuss with a doctor; scheme details must be checked on official portals.

Acceptance criteria (tested):

- Meera (68) is selected automatically.
- The duplicate paracetamol is flagged.
- Ticking 2 safety items shows 2/10, and this persists after a reload.
- 4 vaccines are listed.
- A vault with no 60+ profile shows an empty state.

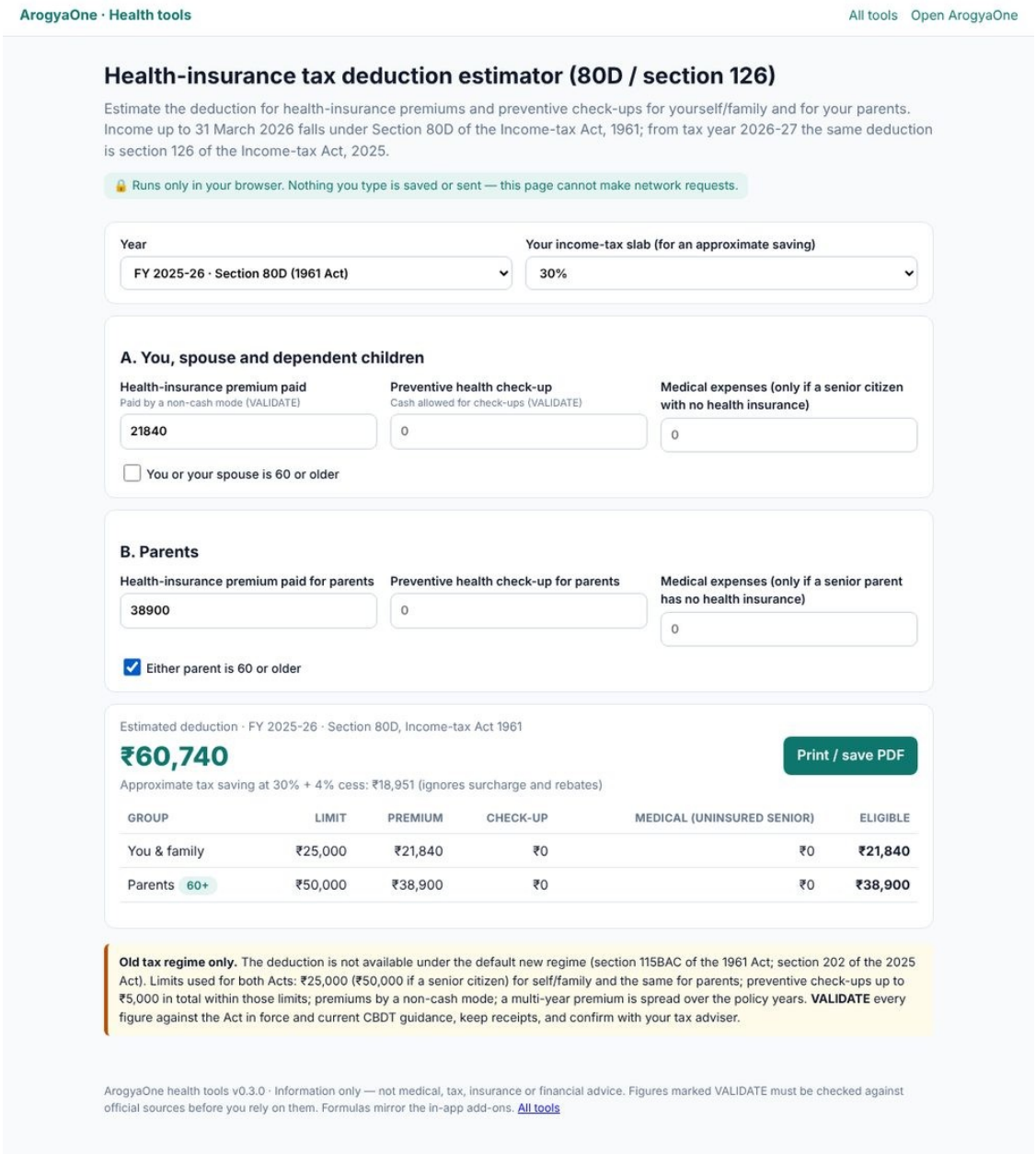
5. Standalone tools

Five single-file HTML tools and a hub. They need **no account and no records**, and a Content-Security-Policy (`default-src 'none'`) **prevents any network request**, which the tests verify. Each tool links to the matching in-app add-on.

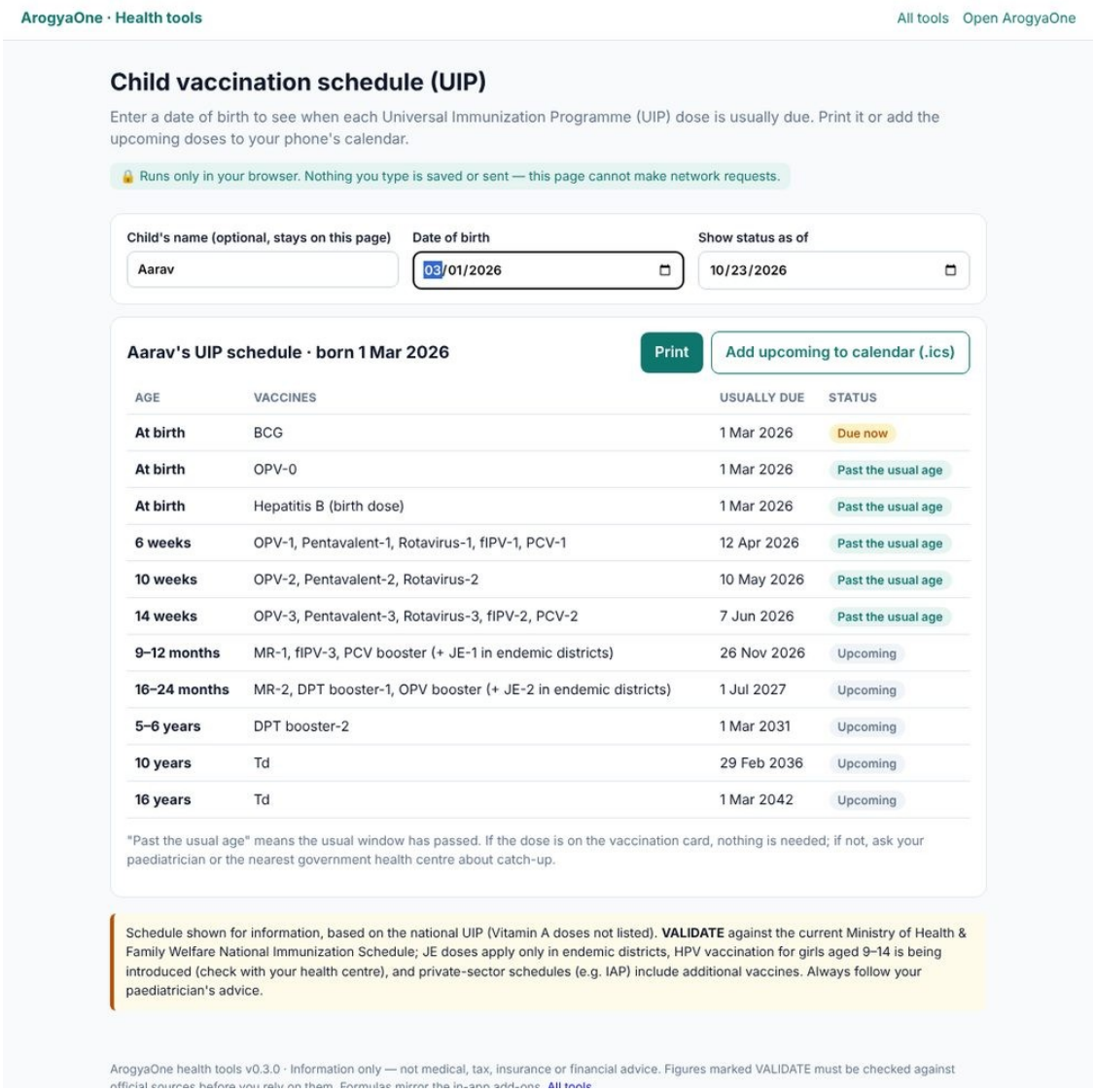


Standalone tools hub (no account, no storage, no network)

Tool	Inputs	Output	Formula source
Health-insurance tax deduction estimator (`tax-80d.html`)	Year; premiums, check-ups and uninsured-senior medical costs for self and for parents; senior flags; tax slab	Eligible amount per group, total, approximate saving at the chosen slab plus 4% cess; Act and section for the year	`tax80d()`, `taxLaw()`
Hospital admission cost estimator (`admission-estimator.html`)	Bill, days, chosen room rent; room eligibility, non-payables %, sub-limit, deductible, co-pay, sum insured left	What the policy may pay, what you may pay, line-by-line deductions incl. proportionate deduction; tip on room choice	Mirrors the Admission assistant
Child vaccination schedule (`vaccine-schedule.html`)	Date of birth, “as of” date	UIP schedule with statuses; print; **.ics calendar** for upcoming doses	`UIP`, `uipStatus()`
Health emergency fund planner (`emergency-fund.html`)	Recurring costs, worst past share, typical stay, co-pay, deductions, major event, lowest sum insured left, planned treatments, months	Target, monthly saving, breakdown	`fundPlan()`
Reimbursement claim checklist (`claim-checklist.html`)	Admission/discharge dates, pre/post days, submission window, accident / cashless denied / outside pharmacy	Checklist with date windows, ready count, submit-by date; print	`claimPack()` items



Tax deduction estimator (standalone)



Vaccination schedule with calendar export (standalone)

Distribution recommendations:

- **Publish the tools as open pages** (e.g. `kalilurrahman.github.io/apps/health-tools/`). Searches like “80D calculator”, “vaccination schedule from date of birth” and “claim documents checklist” are a low-cost acquisition channel.
- **Make sharing easy (WhatsApp-friendly):** every result can be printed or saved as PDF. A later version could add a “Share result” button that shares only text the user chooses, never data.
- **Partner embedding.** Employers, TPAs and hospitals can link to or self-host the tools without any data-sharing agreement, because nothing is collected.
- **Keep them honest:** they show the same VALIDATE notes and disclaimers as the app, and their formulas are covered by the same tests.

6. Recommendations and prioritisation

6.1 Value × effort (no timelines)

Add-on	User value	India fit	Build effort beyond v0.3	Regulatory/clinical risk	Recommendation
Claim pack	High (reimbursement pain)	Very high	Low: insurer-specific checklists	Low–medium (no filing on behalf)	**P1**: validate with 3–5 insurer/TPA document lists
Important documents + emergency card	High (trust, emergencies)	High (family decisions)	Low: QR break-glass needs a backend	Low	**P1**
Visit prep	High for chronic care	High (short consultations)	Low: Hindi output	Low	**P1**
Tax deduction (80D / s.126)	Seasonal, high	Very high (parents' premiums)	Low: keep the year table current	Medium (tax advice)	**P1**: annual legal review
Caregiver task board	High retention	Very high (joint families)	Medium: shared boards need a backend and caregiver accounts	Low	**P1** (single device), P2 (shared)
Child health	High for parents	High	Low: IAP option, Vitamin A	**Medium**: clinical sign-off	**P1 after sign-off**
Parent care (60+)	High	Very high	Medium: clinician-reviewed rules, Hindi	Medium	**P2**
Second-opinion pack	Medium	Medium	Low	Low	**P2**
Renewal guard	Medium	High	Low	Medium (distribution optics)	**P2**: keep strictly non-commercial
Emergency fund	Medium	Medium	Low	Medium (financial advice optics)	**P3**
Cost split	Niche, sticky	Medium	Low: UPI deep link with consent	Low	**P3**

6.2 Suggested order of investment (by dependency, not dates)

1. **Validate and polish P1:**
   - clinical sign-off of the child schedule and the parent-care prompts;
   - legal review of the tax year table and the claim-pack wording;
   - Hindi strings for all add-ons.
2. **Shared family features:**
   - caregiver accounts with per-person grants (already modelled);
   - a shared task board and shared important documents through the encrypted sync service;
   - each family member keeps control of their own data.
3. **Partner-backed add-ons:**
   - DigiLocker documents into Important documents;
   - WhatsApp reminders (links only, no health data in messages);
   - insurer/TPA claim status.
4. **Native capabilities:**
   - Health Connect live sync (Android);
   - passkey unlock;
   - offline PWA.

6.3 Success metrics per add-on

Add-on	Primary metric	Guardrail metric
Claim pack	% of packs downloaded per reimbursement stay; self-reported "claim queried for missing documents"	Support tickets about wrong document matches
Tax deduction	Users exporting the CSV in tax season; tool → app conversion	Reported calculation disputes
Task board	Weekly active caregivers; tasks moved to	Notification opt-outs

Add-on	Primary metric	Guardrail metric
	Done	
Visit prep	Sheets printed or saved before a visit	“Question not relevant” feedback
Important documents	Users with ≥1 document on the emergency card	Deletion within 7 days (trust signal)
Child health	Doses marked from the card; ICS downloads	Clinical-safety incidents (target 0)
Parent care	Safety checklist completion; flagged duplicates reviewed	Users stopping a medicine because of the app (target 0; monitored through feedback)
All	Activation (turned on ÷ eligible users)	**Turn off & erase rate**: a high rate means low trust or value

6.4 Validation experiments

Question	Experiment
Does the claim pack reduce document queries?	Pilot with 50–100 reimbursement claims; compare the query rate with a matched group; collect insurer letters through scanning.
Is the UIP view correct and understood?	Paediatrician review of 20 synthetic children (edge cases: preterm, catch-up, JE districts); usability test with 10 parents, including Hindi speakers.
Do caregivers use a shared board?	Concierge pilot with 20 families (2–4 caregivers each) using a shared demo vault; measure weekly actions per caregiver.
Do standalone tools convert?	Publish the tools; measure tool → app clicks (counted only on the app side, since the tools make no requests) and app activation of the matching add-on.
Are visit-prep questions useful?	Clinician panel rates 50 generated sheets for relevance and safety; patients rate usefulness after the visit.

7. Planned add-ons

Add-on	Type	Why	Needs / dependencies	Main risk	Recommendation
DigiLocker documents	Integration	Pull policies and certificates the user already holds	DigiLocker requester onboarding; consent per document (VALIDATE which health/insurance documents are available)	Partner approval	**Partner, P2**
WhatsApp assistant	Integration	Forward reports, get reminders where users already are	WhatsApp Business Platform via a BSP, template approval, opt-in records, processing in India	PHI in a third-party channel → send links/alerts only	**Partner, P2**
Voice/IVR for elderly parents	Integration	Reminders and consent confirmation without a smartphone	IVR provider; Indian-language TTS (e.g. Bhashini); DLT registration	Consent by voice must be verifiable	Partner, P3
Treatment reference prices	In-app	Compare a hospital estimate with published package rates (PM-JAY HBP / CGHS)	Official rate lists, kept current; "reference only" labelling	Misleading comparisons	**Build with official data, P2**
Generic medicine savings	In-app	Molecule-level alternatives (e.g. Jan Aushadhi) for recurring medicines	Official price list + licensed brand→molecule database; "ask your doctor before switching"	Substitution safety	Licence + build, P2
Women's health tracker	In-app	Cycle, PCOS and thyroid logs with reminders	On-device storage only by default; excluded from family views and shares; clinical review	Very sensitive data	Build, P2
Mental wellbeing check-ins	In-app	Mood and validated screeners with crisis routing	Clinical safety sign-off, instrument licensing, Tele-MANAS routing, separate consent	Crisis handling	Build with clinical partner, P3
Nutrition log (Indian foods)	In-app	Diet tracking for diabetes and weight	IFCT-based dish database (licence VALIDATE), dietitian-curated portions	Data quality	Licence, P3
Health Connect live sync	Integration	Daily sync from wearables, BP monitors and glucometers	Native Android app (Health Connect is on-device only); Play health-apps declaration	Native app effort	Build, P2
Clinician portal for managed shares	Integration	Doctors open a managed share securely and see updates	Clinician login (HPR verification), per-view audit, member notifications	Account security	Build, P2
Live claim status	Integration	Claim events pushed from insurer/TPA instead of letters	Insurer/TPA partnerships, member consent; NHCX is payer ↔ provider today	Dependency on partners	Partner, P3
Hindi & regional-language scanning	In-app	Read reports printed in Indian languages	Tesseract language data (e.g. `hin`) under `/ocr`, dictionaries per language	OCR accuracy	**Build, P1** (low cost)
Passkey / fingerprint unlock	In-app	Easier, phishing-resistant vault unlock	WebAuthn PRF support (uneven across browsers); passphrase fallback	Recovery complexity	Build, P2

8. Regulatory and clinical validation list (add-ons)

Every item below appears in the product as **VALIDATE** and must be checked by the named owner before a public launch.

#	Item	Used in	Assumption in v0.3	Check against	Owner
1	Which Act and section apply to which year	Tax add-on, tool	Up to FY 2025-26: Income-tax Act 1961, **s.80D**. From **tax year 2026-27** (1 April 2026): Income-tax Act 2025, **s.126**. Not available in the default new regime (s.115BAC / s.202).	Income-tax Act 2025 text; CBDT; incometaxindia.gov.in	Tax counsel
2	Deduction limits	Tax add-on, tool	₹25,000 (₹50,000 senior) self/family; same for parents; ₹5,000 check-ups within limits; non-cash premiums; multi-year premiums apportioned	As above	Tax counsel
3	UIP schedule	Child health, tool	Birth: BCG, OPV-0, Hep B · 6/10/14 weeks: OPV, Penta, Rota, fIPV (6, 14 wks), PCV (6, 14 wks) · 9 months: MR-1, fIPV-3, PCV booster (+ JE-1) · 16–24 months: MR-2, DPT B1, OPV booster (+ JE-2) · 5–6 y DPT B2 · Td 10 y and 16 y. Vitamin A not listed. HPV for girls 9–14 being introduced.	MoHFW National Immunization Schedule (mohfw.gov.in)	Paediatric lead
4	Adult vaccines 60+	Parent care	Influenza yearly; pneumococcal; Td; zoster — all “discuss with the doctor”	National adult immunisation guidance	Clinical lead
5	PM-JAY for people aged 70+	Parent care	Vay Vandana card regardless of income; up to ₹5 lakh/year, shared with a spouse who is also 70+; beneficiary.nha.gov.in ; helpline 14555	NHA / PIB	Product + legal
6	Claim documents, pre/post windows, submission time limits	Claim pack, checklist tool	Standard list; 30/60 days by default; ~30 days to submit	IRDAI health master circular; policy wordings; 3–5 insurer/TPA lists	Insurance SME
7	Non-payables, proportionate deduction	Admission estimator	5% non-payables by default; proportionate deduction when the room exceeds eligibility	IRDAI guidance on non-payables; policy wordings	Insurance SME
8	Grace period and portability	Renewal guard	“Check with insurer” only	IRDAI master circular	Insurance SME
9	Not acting as an insurance intermediary	Renewal guard, fund planner, tools	No product comparison, recommendation or lead generation	IRDAI regulations for intermediaries / web aggregators	Legal
10	Advance directives	Important documents	Store only; legal requirements set by Supreme Court guidelines (2018, modified 2023)	Judgment text; lawyer	Legal

#	Item	Used in	Assumption in v0.3	Check against	Owner
11	Organ donation pledge, UDID	Important documents	Store only; issuing bodies NOTTO / UDID portal	Official portals	Product
12	Children’s data	Child health	Parental consent at profile creation; no tracking or ads	DPDP Act s.9 and DPDP Rules 2025 (verifiable parental consent)	DPO
13	Emergency numbers	Emergency, parent care	112, 108, Tele-MANAS 14416	State-wise verification	Product

9. Test evidence (v0.3)

Suite	Command	Result
Add-on formulas (unit)	`npm run test:addons`	**13/13** (80D/s.126 caps and years, split, fund plan, UIP incl. a check that each marked dose matches only its own row, adult vaccines, claim windows and the pre/post parser regression, medicine review, BMI, file extensions)
Add-ons in demo (Playwright)	`tests/e2e/addons_demo.py`	**70/70**, 0 console errors (11 add-ons, outputs, ZIPs, viewer, erase, audit, persistence, print, mobile, 5 tools × 2 hosting paths, **no external requests from the tools**)
Add-ons on a private vault	`tests/e2e/vault_addons.py`	**16/16** (originals decrypted into the ZIP, no plaintext add-on data in IndexedDB, lock/unlock, viewer, delete removes the encrypted file)
Vault regression	`tests/e2e/vault_test.py`	**41/41** (adds “optional consents start off” and “turn on recommended”)
Demo regression	`tests/e2e/demo_regression.py`	**0 errors** across all routes, desktop and mobile, incl. the add-on routes
Reference server	`npm run test:server`	**19/19** (unchanged)

Release checks: - **Migration from v0.2:** - a private vault created with v0.2 opens in v0.3 with all its data, and add-ons work on it (9/9); - a v0.2 demo session keeps its consent choices (4/4). - **Upgrade script:** - v0.2 site upgraded, verified and byte-identical to v0.3; - re-run reports “Already v0.3”; - local edits are backed up; - a v0.1 site is refused; - the chain v0.1 → v0.2 → v0.3 also gives an identical tree.

Bugs found and fixed during testing:

1. **Pre/post-hospitalisation parser.** “60 days” in one coverage line could pair with “Post…” in the next line. Fixed: each coverage line is now parsed as its own segment, with a regression test.
2. **Onboarding defaults.** The demo onboarding showed all optional permissions off. Changed to explicit opt-in with “Turn on recommended”.
3. **Claim checklist tool.** Ticking a box re-rendered the list and moved keyboard focus. Fixed.
4. **Opening original files.** Opening a file after async decryption could be blocked as a pop-up. Replaced with an in-app viewer.
5. **Form labels.** Labels were not linked to their inputs in the add-on forms. Fixed for accessibility.
6. **Blank app after deploy.** GitHub Pages can serve a cached `index.html` for about 10 minutes after a deploy, and that page points at the previous script bundles. v0.3 keeps those bundles for one release instead of deleting them.
7. **Site packaging issues:**
   - three portal pages showed “” in the browser tab;
   - `add-to-site.sh` failed to commit when given a relative path.

10. Deploying v0.3

The **incremental package `portal-upgrade-v0.2-to-v0.3.zip`**:

- updates `health-aggregator/` (new `addons.html` page, “Add-ons” in the top bar, landing notice, downloads);
- updates `apps/arogyaone/` (app v0.3 with `tools/`);
- installs `apps/health-tools/` fresh;
- verifies every file by SHA-256, backs up local edits and commits; you push;
- detects a v0.1 site and asks you to apply the v0.1 → v0.2 package first.

After pushing, check the live version with `./apply-upgrade.sh --check-live`.

URLs once live:

- Portal page: `/health-aggregator/addons.html`
- App add-ons: `/apps/arogyaone/#/addons`
- Tools: `/apps/health-tools/` (also `/apps/arogyaone/tools/`)