



e-Health: strategy and ongoing programs

Philippe Cirre

Délégation à la stratégie des systèmes d'information de santé (DSSIS)

Ministère des affaires sociales, de la santé et des droits des femmes

Secrétariat général des ministères chargés des affaires sociales

9 November 2015



e-Health: strategy and ongoing programs

Agenda

- e-Health supporting the national health strategy
- Top priority axes
- e-Health governance
- e-Health core components
- Ongoing programs
- Further work axes

Health in France : key figures

- **Health services in France**

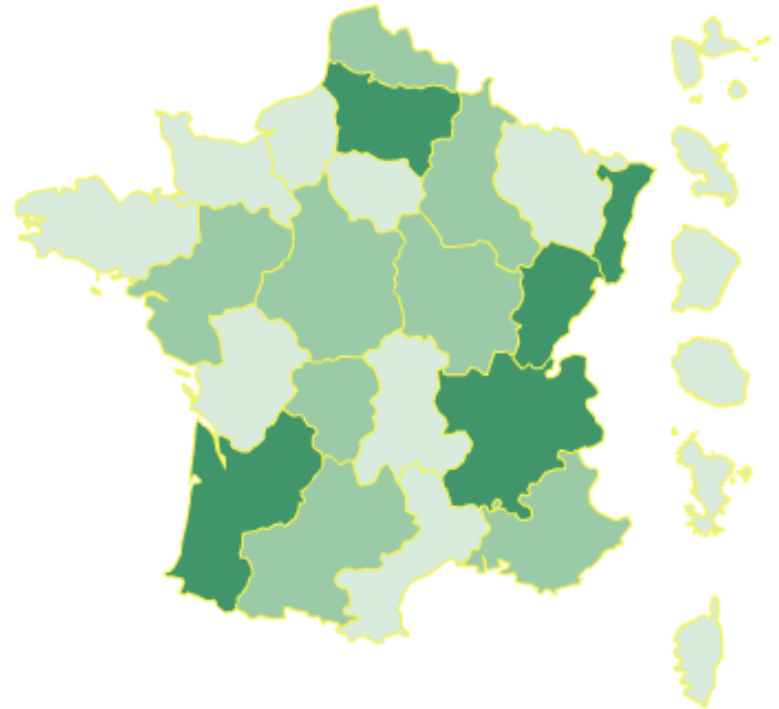
- 1,1 million HCP including 218 000 MDs
- 22 000 pharmacies, 1 000 biomedical labs, 3 000 hospitals
- 26 regional Health Authorities (ARS)

- **Health expenditures in France**

- 240 billions € = 12% GDP
- 77% funded by public payer (Assurance Maladie)

- **Health IT in France**

- 2 to 3 billions € = 1% of health expenditures
- 80 to 140 M€ for Telemedicine, expected growth = 15 to 30% per year
- 500+ different health IT solutions



e-Health supporting the national health strategy

- Under the umbrella of the national health strategy, innovation, quality of care and efficiency of the health system shall leverage information systems and digital services
 - Ensure equal access to health care on the national territory
 - Foster cooperation between care providers, ensure continuity of care within a coordinated health pathway of the patient
 - Facilitate patient empowerment, enabling a «health democracy»
- e-Health development is an objective integrated in Government 's global digital strategy (2013)

Top priority strategies for e-Health

An e-Health strategy based on five major axes:

1. Help healthcare providers and institutions in tuning their information systems and improving their practice through a more intensive use of digital services
2. Improve interoperability and security of health information systems to foster information sharing between care providers involved on the patient health pathway
3. Develop health digital information services towards patients and citizens.
4. Open access to health data, respectful of personal information privacy, to serve the steering of the health care system, as well as public health and research (open data)
5. Contribute to the development of e-Health cooperation in Europe

A strengthened governance

- The necessity to place e-Health under a unified, identifiable and strengthened steering by the State (associating Health insurance body)
- e-Health strategy placed under authority of the General Secretary of the social ministries (SGMCAS)
- In 2011 a structure dedicated to strategic steering was created under direct authority of SGMCAS : Delegation for strategy of health information systems (DSSIS)
- ASIP Santé: a State agency providing the common infrastructures and reference frameworks, fostering usage of digital health services
- Regional Health Agencies (ARS) govern regional health policies and design regional care provision plans in close alignment with the national strategy



The regulation framework of the health system

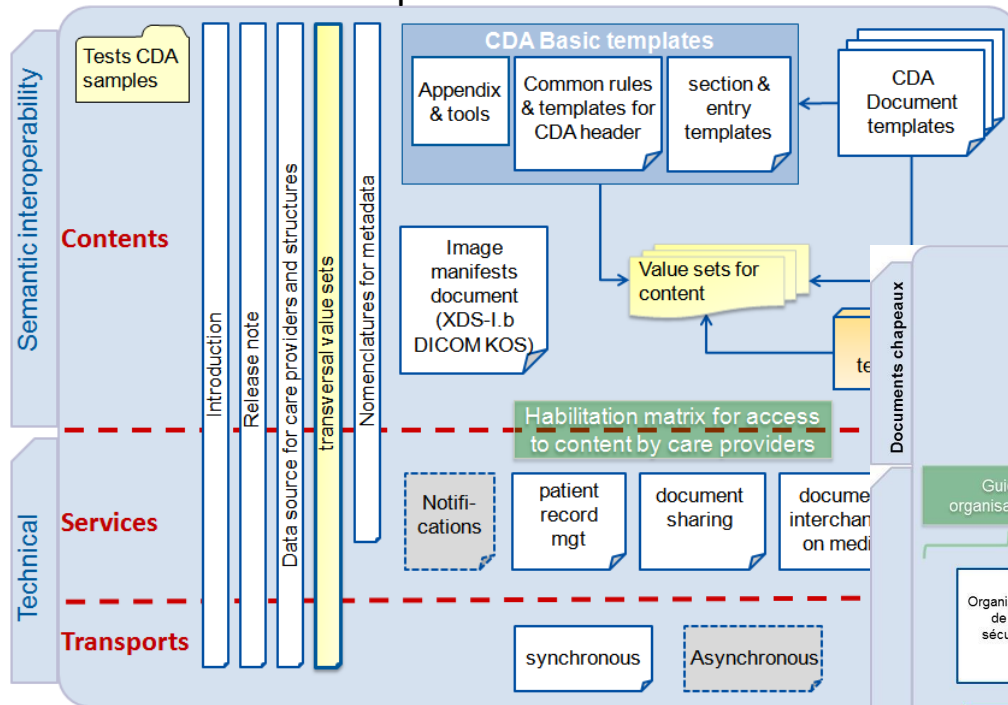
- informatics & freedom Act, 1978
 - Protection of personal data (major role of CNIL as a public authority)
- Law on patients rights, 2002
 - Consent, access to medical record,
 - A demanding framework for the agreement of health data hosting
- Health Insurance reform, 2004
 - national shared medical record (DMP), national health identifier
- Law "Patients, health, territories", 2009
 - Regional Agencies, ASIP Santé, telemedicine
- Law project modernizing our health system (to be voted end of 2015)
 - Value of digital data, Framework for information sharing, health ID, mandatory reference frameworks and directories, DMP, open data ...

e-Health core components

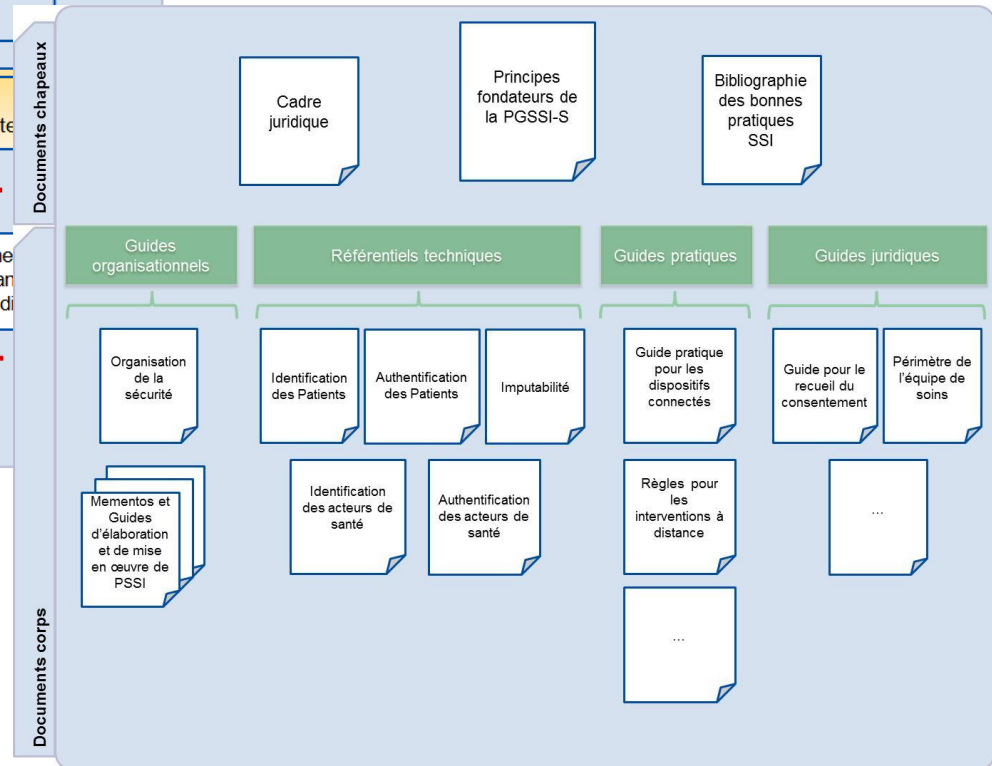
- Prerequisites : interoperability, security, confidentiality
- Priority : provide the core infrastructures enabling health information sharing and exchange
- The pillars of the core package:
 - National Interoperability Framework provided by Asip Santé, leveraging international standards and profiles
 - Major issue : ongoing work on semantic interoperability
 - Identification of patients and health providers: health identifier, and national registries of care professionals and institutions (RPPS, FINESS)
 - General security policy for health information systems, aligned with the national cyber-security policy
 - national PKI associated with CPS (professional smart card)
 - Health personal data hosting agreement
- Close cooperation with suppliers/vendors

The national interoperability and security framework

Interoperability framework : CDA & IHE
consistent with european eH^EIF

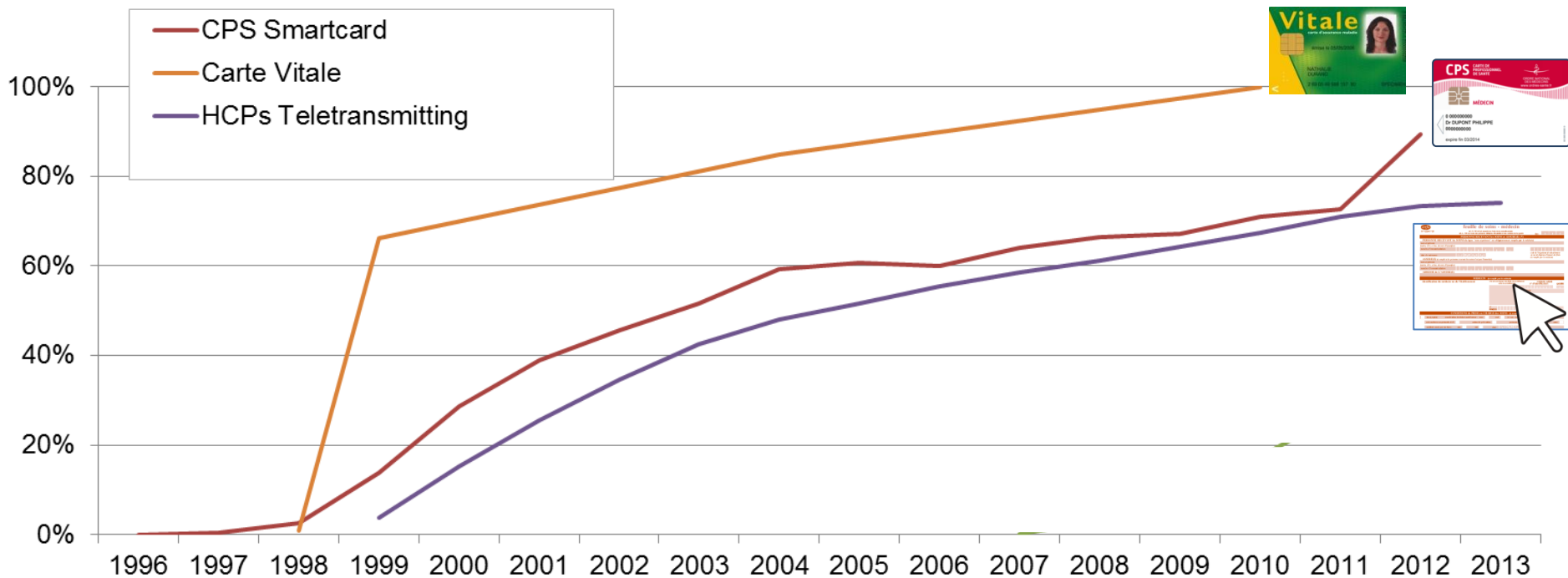


Security framework : rules for identification, authentication, auditability, etc.



The Public Key Infrastructure

- ✓ **600 000 electronic identity smartcards for HCPs with electronic certificates**
- ✓ **First used for electronic billing with Patient Vitale Card**
Today : more than 1 billion FSE per year
- ✓ **Now required to access patient health data**



Ongoing national programs

- Digital services for the coordination of care
 - Uptake of the national electronic messaging services within the national trust circle built for e-Health
 - Fast deployment of DMP & cancer record services
 - Digital health care territory Projects : promoting innovation in care organizations and integration of digital services in the professional tools
- « Hôpital numérique » (PHN) : a first level of information systems maturity for all hospitals and clinics
- Telemedicine: prepare generalization through pilot projects in five regions, experimenting new modalities for telemedicine fees
- Digital transmission of structured laboratory reports and results
- E-prescription: CALIPSO national project under experimentation
- Significant public financial incentives for hospitals and HCP

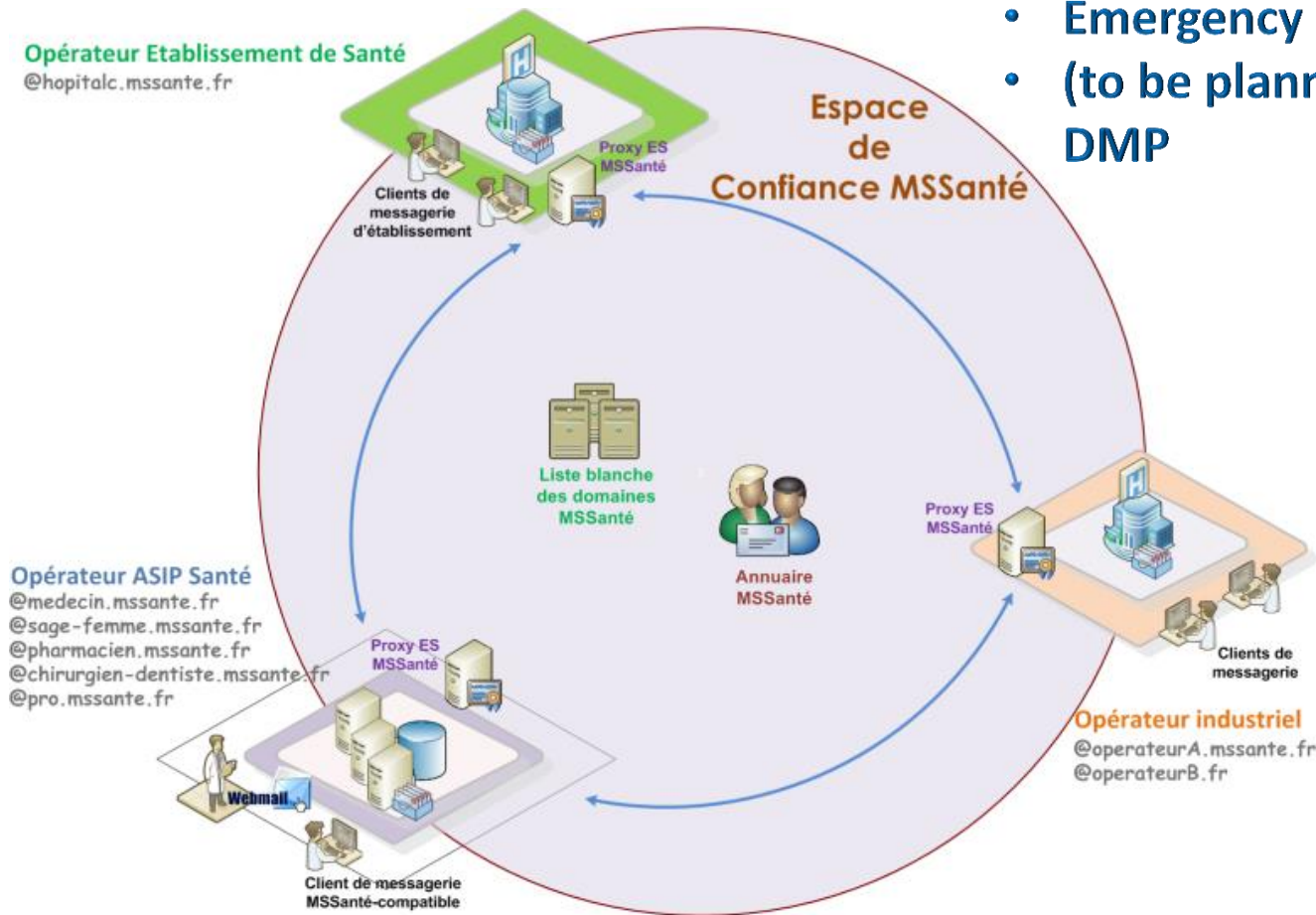


Secured eMail System for Health : MSSanté

launched in 2014

Purposes :

- Exchange of patient health data between HCPs
- Emergency health alerts
- (to be planned) Send documents to DMP





National electronic patient health record (DMP)

Launched in 2011.

DMP is patient centered and registers for each patient **medical documents useful for coordination of care**, from various healthcare sources.

Documents conform to **international standards of interoperability** (CDA, IHE). Access is through web browser or through compatible software. DMP is a clinical document repository dedicated to coordination of care.

DMP :

- is free for the patient
- requires patient's consent
- is accessible to authorized HCPs
- can be accessed by the patient
- is a « new » object



So far :

- 556 000 DMP
- 1 500 000 medical documents
- 150 compatible software => catalyzer for « connected health » project

Work perspectives

- Major work axes to consolidate e-Health development
 - Try to demonstrate the added value of e-Health by medico-economic assessment
 - Refine the business model for e-Health
 - Develop agreement/certification processes of healthcare applications
 - Necessity of a longer term e-Health strategy able to arouse patients and health professionals interest and trust
- Covering new growing needs and innovation
 - Medical decision support systems (leveraging terminologies)
 - Connected things and mobile health
 - Open data and Big data for health
- Active contribution to European interoperability, development of cross-border health information exchanges (building the national NCP)