



Notification Number: 2018/508/F

## Order on the reference system defining the conditions and procedures for implementing the obligation to use the national health identifier (hereinafter, 'INS reference system')

Date received : 04/10/2018

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### Message

Message 002

Communication from the Commission - TRIS/(2018) 02744

Directive (EU) 2015/1535

Translation of the message 001

Notification: 2018/0508/F

No abre el plazo - Nezhahajuje odklady - Fristerne indledes ikke - Kein Fristbeginn - Viivituste perioodi ei avata - Καμμία έναρξη προθεσμίας - Does not open the delays - N'ouvre pas de délais - Non fa decorrere la mora - Neietekmē atlikšanu - Atidėjimai nepradedami - Nem nyitja meg a késések - Ma' jiftaħ il-perijodi ta' dawmien - Geen termijnbegin - Nie otwiera opóźnień - Não inicia o prazo - Neotvorí oneskorenia - Ne uvaja zamud - Määräaika ei ala tästä - Inleder ingen frist - He ce предвижда период на прекъсване - Nu deschide perioadele de stagnare - Nu deschide perioadele de stagnare.

(MSG: 201802744.EN)

#### 1. Structured Information Line

MSG 002 IND 2018 0508 F EN 04-10-2018 F NOTIF

#### 2. Member State

F

#### 3. Department Responsible

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#### 3. Originating Department

Délégation à la stratégie des systèmes d'information de santé

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#### **4. Notification Number**

2018/0508/F - SERV

#### **5. Title**

Order on the reference system defining the conditions and procedures for implementing the obligation to use the national health identifier (hereinafter, 'INS reference system')

#### **6. Products Concerned**

Teleservices for health

#### **7. Notification Under Another Act**

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#### **8. Main Content**

The national health identifier (INS) is the registration number in the national directory for the identification of natural persons (more commonly known as the NIR).

Parties involved in care will be required to reference health data with the INS from 1 January 2020, in compliance with the 'INS reference system'.

It follows from this legal framework that the information systems of these parties must be brought into conformity, in particular to integrate the security measures provided for by the reference system.

The primary security measures consist of:

- limiting the dissemination of the INS beyond the trust of parties involved in care via a local analysis of its authorisations and flows;
- avoiding the incorrect indexing and propagation of an identification error by using local identity vigilance measures and by making it possible, if necessary, to reject a national health identifier considered erroneous;
- securing the storage, exchange and sharing of health data indexed by INS and carrying out a risk analysis and privacy impact study in accordance with the regulations in force;
- ensuring the integrity and reliability of the national health identifier via the use of national teleservices, implemented by the health insurance provider, addressing the reference base of the national directory for the identification of natural persons (NIR).

The reference system requires regular use of two teleservices (recovery and verification of the INS) developed by the national health insurance fund in order to enable parties to:

- access up-to-date information on the INS;
- facilitate and secure the acquisition of the INS via an automatic request (and avoid, in particular, input errors, incorrect allocations, etc.)

#### **9. Brief Statement of Grounds**

The shared use of a national health identifier (INS) stems from a desire to make the identification of persons receiving care more reliable and to facilitate exchanges between parties involved in health and medico-social



care.

The identifier makes it possible for a patient to be identified without being confused with another person. Practitioners can exchange information about the patient's care plan. The patient, meanwhile, is uniquely and unambiguously identified by his or her identifier. In concrete terms, the INS allows healthcare professionals to find the right patient's health records, whether it be the Personal Medical Record (DMP), pharmaceutical record or other medical records.

The choice of using the registration number in the national directory for the identification of natural persons (NIR) as the INS presents risks, the impacts of which the French authorities have wished to limit. Measures for security and risk and error management related to the identification of persons with this identifier are established in a security reference system adopted by order of the Minister of Health following the opinion of the National Commission on Informatics and Liberty.

This permanent identifier, issued a few days after birth, allows the data of the persons concerned to be managed over time, in particular for retrieving all of a person's data several years after their care without risk of confusion in the event of identical names.

In terms of identity vigilance, the use of this common identifier is reassuring for health professionals, the care team, etc. It allows health data from various sources to be cross-checked, particularly during the treatment process. The business counterpart of this benefit is to facilitate the propagation of the identifier and facilitate the cross-referencing of databases. In this sense, the legislature wished, on the one hand, to delimit the circle of parties on whom the obligation to use the INS is incumbent and to secure its use through the development of a reference system that specifies measures for monitoring and managing risks and errors.

The implementation of this security reference system is necessary and the proposed measures are proportional to the objective of making patient care more reliable and therefore safer.

This draft reference system therefore does not present any infringement on free movement.

#### **10. Reference Documents - Basic Texts**

Reference(s) to basic text(s): – Article L. 1111-8-1 of the Public Health Code

– Articles R1111-8-1 to R1111-8-7 of the Public Health Code

#### **11. Invocation of the Emergency Procedure**

No

#### **12. Grounds for the Emergency**

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#### **13. Confidentiality**

No

#### **14. Fiscal measures**

No



## 15. Impact assessment

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## 16. TBT and SPS aspects

TBT aspect

No - the draft has no significant impact on international trade.

SPS aspect

No - the draft is neither a sanitary nor phytosanitary measure.

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European Commission

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