

# **Convention on Health Analysis and Management**

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## What to do with CNAM Data?

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### 1. SNIIRAM: an exhaustive picture of health practices

The French national health insurance fund (CNAM) has been accused of using patient data to build a database for its own use. In the late '90s, the construction of the French national health insurance inter-scheme information system (SNIIRAM) revealed a visionary ambition. SNIIRAM is an exhaustive database that allows the care pathways of all insured persons to be tracked. Although it includes no clinical data, it can hold medical data. The data is used by CNAM to examine the care system and measure compliance with medical pathways.

### 2. How does industry use health data?

Insurers and drug manufacturers, although they have amply proven that they make appropriate use of health data and France has one of the most closely protected health data systems of any country in the world, are excluded from using SNIIRAM. The health data protection system has stood the test of time, including by major pharmaceuticals despite occasional finger-pointing. These manufacturers aren't looking to circumvent regulations, but need to access health data to do their job, innovate and be considered health care players in their own right.

#### 3. How do insurers use health data?

In France, 80% of complementary health services are delivered by non-profit organisations. The cultural context does not lend itself to the use of health data for pricing purposes. The data already exists and is not used by any entity to vary the pricing applied to health or insurance cover. However, the major platforms, having access to individual data, can use it for various purposes.



# 4. One possible approach would be access rights on a sliding scale

Access rights on a sliding scale would permit access to anonymized health data that was appropriate to the role of the various players, including consumer associations, insurers and manufacturers.

#### 5. The challenge of opening up the health database: to improve health

Ultimately, the challenge is to permit insurers and manufacturers to use health data to improve patient compliance, monitoring and treatment, to improve people's health.