

Open letter to the future President of France

Devastated Health IT : a major public health issue sacrificed

Mister President to be,

Among a number of sensitive questions to be thoroughly treated by the winner of the Presidential poll during his mandate, **taking into account the needs of our fellow citizens as far as they relate to health and well-living will be a top-level priority** !

As it is demonstrated among the most advanced countries on these subjects, the deployment of well adapted and performing information systems is a strategic means of accompanying the necessary changes made necessary by a troubled world context.

In this respect, and at a time when France reinforces its backwardness at the European level, the present weakness of Hospital Information Systems (HIS) and of the social-health sector of activity has been highlighted in a number of reports, as well as the necessity to make investments in the development and in the deployment of field-proven and efficient softwares. The latest report issued on this subject by the Social Affairs General Inspection and published in September, 2011, made ten recommendations out of which only one has been implemented at the time being. This constant weakness, beyond technological challenges, compromises seriously the health future of our fellow citizens.

In the international landscape, access to the French HIS market is still very difficult, due to a number of obstacles which are known for long. The first reason is a very stringent regulatory corpus, as for example and theoretically, the compliance with the Public Market Act for the said hospitals. This Act applies to three quarters of overall IT investments. Second, with a total amount of IT investments which has been severely restricted in the sector of HIS expenses for the last twenty years. The corresponding effort accounts for **less than half of the average expenses of our European partners.**

Those impediments, some of which can be noted in other developed countries, are worsened by a **French specificity**: the existence of public HIS actors and providers¹ (the so-called SRIH, recently converted in Public Interest Groups). When added to the poor investment in France, their very existence constitutes a totally unacceptable hindrance to the development of a prosperous Health IT sector at the service of our Nation.

Those public operators, heirs of the former Regional Hospital IT Centers (the so-called CRIH, which were initially linked to the CHU) and usually acting on a regional basis, mingle the responsibilities of customers and providers, in the sector if services as well than software edition. Their status, through the use of tailor-made agreements, spare them the constraints of Public CFT procedures applicable to private actors.

This exceptional and dispensatory disposition, which in principle, would spare to the hospitals to be submitted to the administrative shackles of the Public Markets Act, allowed these public operators to become the leaders of management application softwares, the main source of recurring revenues. In this segment, their share is about two thirds of the market.

Thus, the first HIS Company in France is a Public Interest Group, with a budget of \in 53 million. After having taken control of some of its competitors, this operator makes no secret of its ambition to extend its activities to the Private Hospitals sector. And sooner or later, maybe, to the private practice professionals, why not ?

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¹ Mainly : CRIH Grenoble, GIP Cpage, GIP Sym@ris, MIPIH, SIB, SIIH, SIL, SIRPC.

- 2 -

This appetite is shared by some other actors of this public ecosystem, which struggle fiercely between themselves. In different circumstances, the private companies would be very pleased about this sparkling competition. But, things being as they are, the actors keep rather puzzled.

- The distortion in the competition such as it results from an obsolete regulatory corpus, generates a lot of constraints for some actors as long as it provides guaranteed incomes for some others. All this is to contribute to a lack of transparency within a captive market ?
- The almost complete inadequacy of the contractual rules to which the hospitals are submitted, added to the lack of inspections such as imposed by the Public markets act may be a brake vs the quality of service and a guaranteed income for others, thus encouraging a lack of transparency in a captive market ?
- The tax exemption which benefits to public operators, let alone the artificial discount in prices that it results in and in absence of controls such as imposed by the Public Markets Act, doesn't it lead to a misappropriation of taxes collect ?
- The more and more increasing implication of public operators, and sometimes, of hospitals, in the delivery of technological products may be deemed unreasonable, at a time where these said hospitals are unable to ensure their general and priority missions ?
- And last, the use of public funding in encouraging a commercial approach, out of any monitoring, is it realistic and long-term oriented ?

This situation, almost unique in Europe and further on, is well known and benevolently tolerated at various levels of the administration. It encourages the existence of an industrial sector finances by tax-payers. This is not compatible with the emergence of an industry creating value, qualified jobs and paying taxes for the benefit of the whole community. Last, it constitutes a hindrance to the growth of our enterprises having a significant size, none of which being really present on the non-domestic market.

The industrials of the sector, most of them being members of the LESISS federation, **could gather a huge investment power, as long as proper conditions are settled on this market**. And yet, in a context of economical and budgetary crisis, the unfair trading practices of the public operators, the pernicious effects of which have increased since the summer of 2011, create a worrying situation. This fast degradation shall in any case, if its causes are not properly corrected, drive the economical actors to a more drastic decrease in their investments.

Since, beyond the technological and economical challenges, we are **talking of public health in our country**, LESSIS strongly recommends to the Government and to its administration, with the help and support of Hospitals Federations, to say and declare clearly **whether they should nationalize of Hospital Information Systems, or they should redefine the activities which are in the scope and in the perimeter of public actors**. This is especially true when dealing with software editing activities and marketing of tier-party solutions.

The future of our fellow citizen's health is not a minor question, not more than the future of the technological Health IT strategic industry. Waiting for the answer that you shall wish to bring, when exercising your responsibilities, in answer to this paramount matter,

Please believe, Mister President, in our best respect and consideration.

For the Board, The Chief Representative Yannick Motel

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4 AXES **ACCELIS VEPRO** ACTIBASE **ADE Conseil Santé** ADICOR **ADS CONSEIL AGFA Healthcare ALERE France** ALLODOC **ANTESYS** APIGEM ARCAN SYSTEMS ARISEM **AVENCIS** AXILOG **BE-Itech BEPATIENT BERGER-LEVRAULT BLUELINEA Business Card Associates BUSINESS OBJECTS** C2i nnovativ' Systems CALYSTENE **CAPSULE TECHNOLOGIES** CBA **CEGI SANTÉ** CERNER CERTEUROPE CGTR **CIRA -WAAVES CISCO** Europe **COACHIS SANTÉ COMPUTER ENGENEERING** CORWIN COSILOG COVALIA **CRIP** (Groupe Séphira) CS3i **DB MOTION** DELL

EDIVISTA EELEO EMC **ENOVACOM FAP Informatique** FSI **GLOBAL IMAGING ONLINE** H2AD Habitat & Santé HOPI HSC ILEX **IMPROVE** Santé **INFINE Conseils** INTELLIGENCIA INTELLEC **INTERSYSTEMS** JIC **KAYENTIS KEREVAL KEYNECTIS KI-LAB** KOÏRA **LENREK Informatique** LOGEMED LOGICMAX **MC KESSON France** MEDECOM MEDSYS **MEDASYS** MEDIANE **MEDISSIMO MEDITRANS** MEDSYS **MICRO 6 MICROPOLE UNIVERS MOBILE DISTILLERY** NEWEL NUANCE HEALTHCARE NUMERIQUE ASSISTANCE

ODSIS **OLEA MEDICAL ORANGE BUSINESS SERVICES ORION HEALTH OSIRES** PANASONIC PCI RPH PENARANDA **PMSIpilot PROKOV Editions RESEARCH IN MOTION France RESSOURCES** Informatique SAFICARD **SAGEM Sécurité** SANEXIS SANTEOS **SE Conseil** SFR SIGEMS SIGMA **SNAL SNEPA** SOFTWAY Médical SPH SQLI **SYSTANCIA TAM Télésanté TECHNOSENS** TELEVITALE TIC UNIVERSEL **TLM France** TRACEMED UBIQUIET UBISTORAGE UNIMED VIDAL WARESYS XIRING