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Bundesamt für Statistik BFS



MIRACUM-DIFUTURE-Symposium, 30 June 2026

From Data Silos to Data Space



The Digital Future of the Swiss Healthcare System

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Switzerland

THE STARTING POINT

The Swiss Paradox

#2

Global Healthcare Quality

Bloomberg Health Index — Switzerland ranks among the world's very best in clinical outcomes and life expectancy

#14 (of 17)

Digital Health Index

Bertelsmann — Switzerland lags behind peers in digital health infrastructure adoption and readiness; Too many silos, not enough connectivity

THE PROBLEM

Silos Cost More Than Money



Medication Errors

Fragmented medication plans cause preventable adverse drug events every day



Admin Overload

Substantial amount of clinical staff time spent on redundant data re-entry across systems



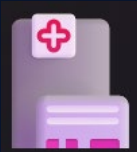
Duplicate Diagnostics

Patients re-tested across institutional boundaries because records don't follow them



COVID Blind Spots

Pandemic exposed critical gaps: no unified surveillance, no real-time national picture



System Fragmentation

Multiple incompatible hospital information systems lacking common standards



Lost Research Value

High quality patient data locked in silos, inaccessible for research, AI-training and policy making

Why is Switzerland lagging?

- Hardly any transformation in the healthcare sector for decades
 - No overarching guidelines, not even for technical communication and data exchange in the healthcare sector
 - Fragmented system landscape (high-tech!) and lack of communication/networking between systems
 - New, digital (individual) solutions show no clear benefits for service providers
 - The costs and effort involved in introducing individual digital processes and tools often lie with the service providers, while the benefits lie elsewhere
- Overarching, systemic (end-to-end) solutions are needed that create added value for **healthcare providers, insurers, authorities AND patients**

THE ANSWER

The Federal Programme: DigiSanté

Planned Budget: CHF 382 M

Duration: 2025-2034

Currently 23 running projects

① PREREQUISITES

Standards · identifiers · frameworks · legal foundations · trust architecture — the soil before the seeds

② NATIONAL INFRASTRUCTURE

Federated “Swiss Health Data Space”
SwissHDS · governance · establishment of basic digital services and reform of their foundations — tidying up at grassroots level

③ DIGITISING PUBLIC SERVICES

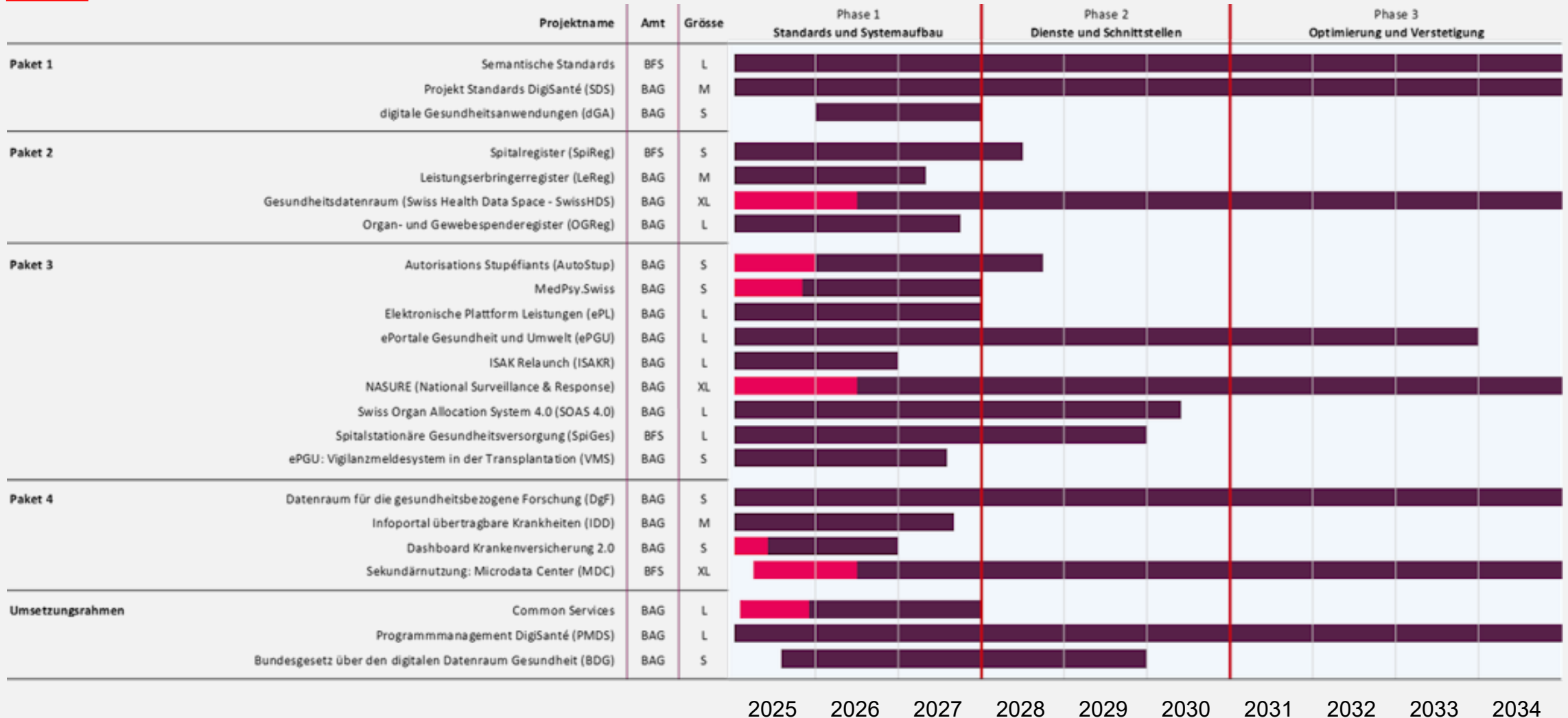
Systematic digitisation of public services — digital products that meet the requirements for harmonisation, agility, scalability and sustainability

④ SECONDARY DATA USE

Infrastructure and services for re-use:
research · health system planning · population analytics — turning care data into health intelligence

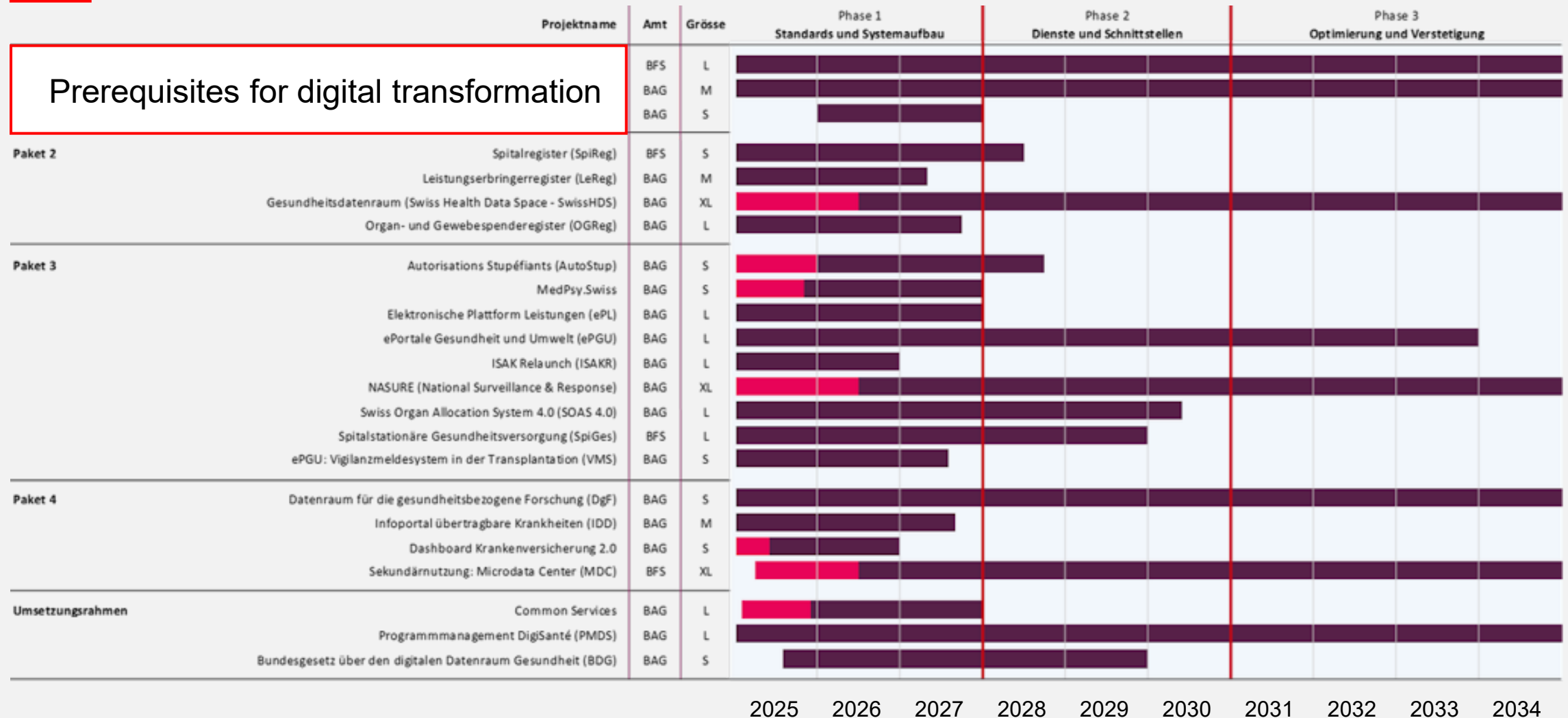
Currently running DigiSanté-projects

Planning phase
Roll-out phase



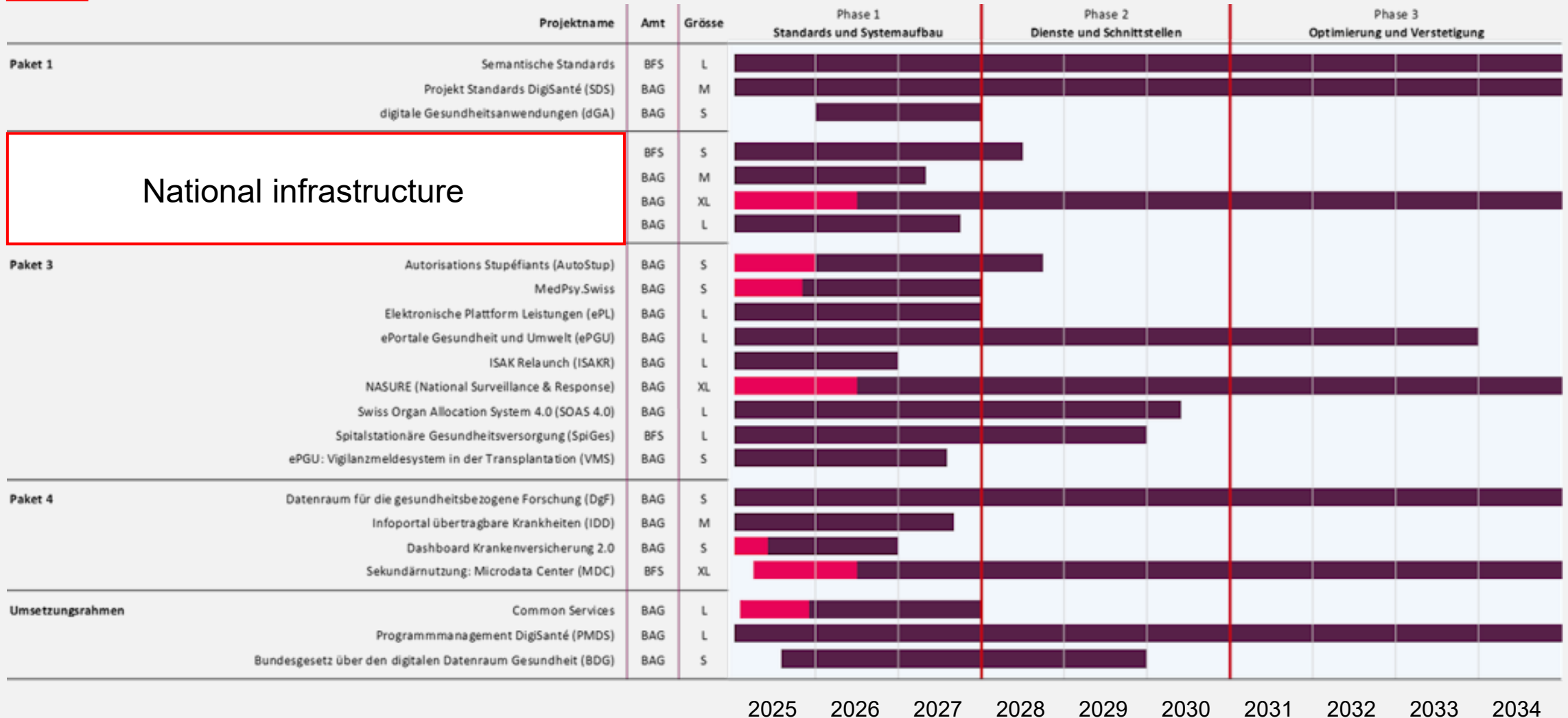
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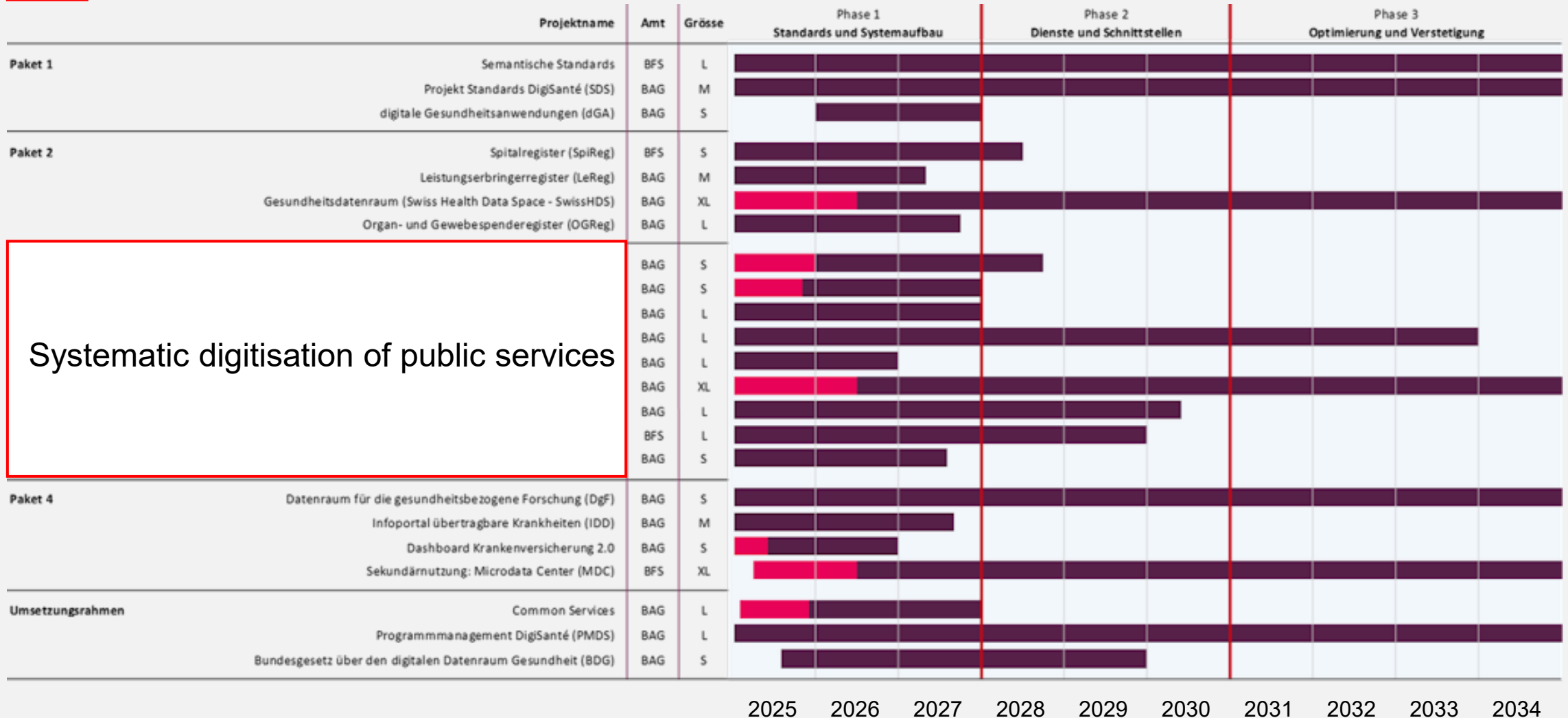
Currently running DigiSanté-projects

Planning phase
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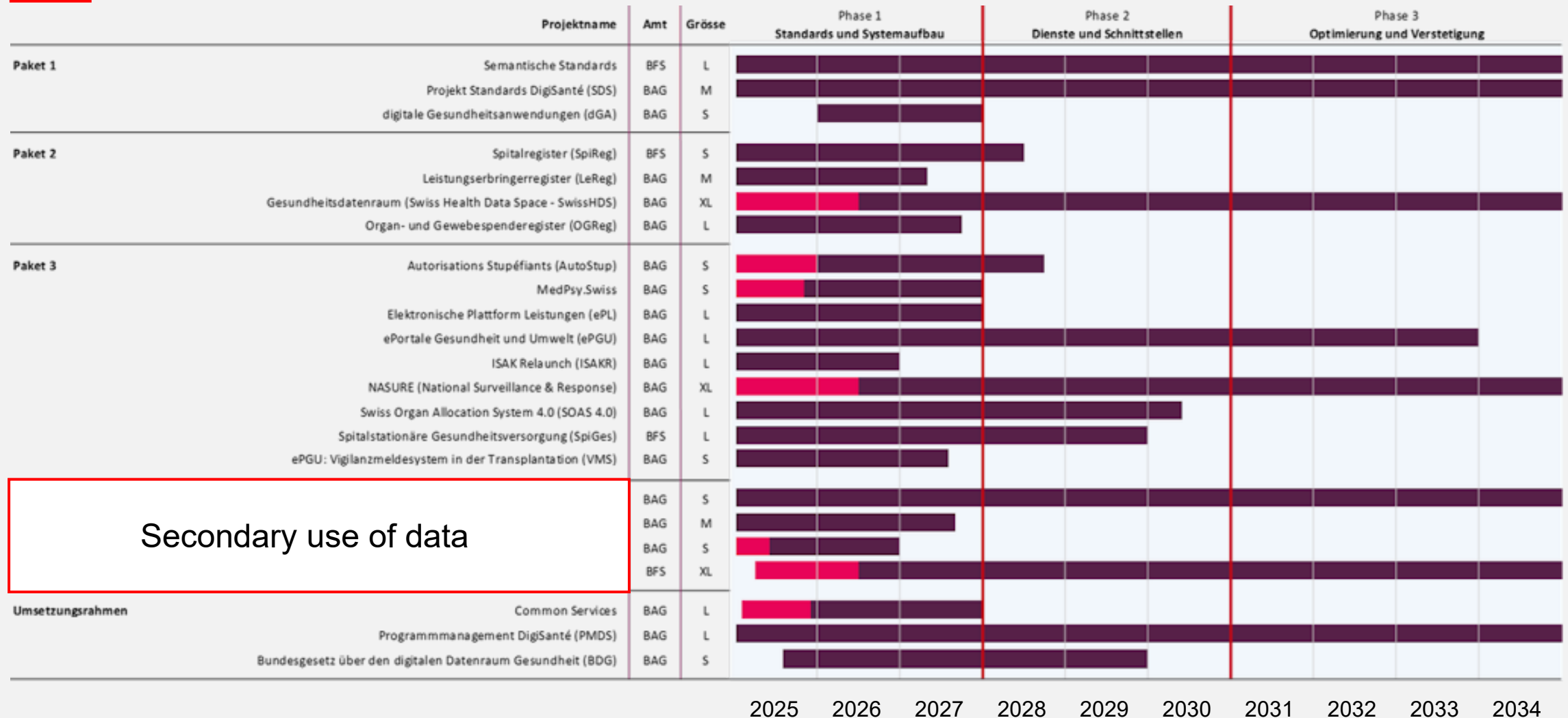
Currently running DigiSanté-projects

Planning phase
Roll-out phase



Currently running DigiSanté-projects

Planning phase
Roll-out phase



Secondary use of data

Deep dive #1

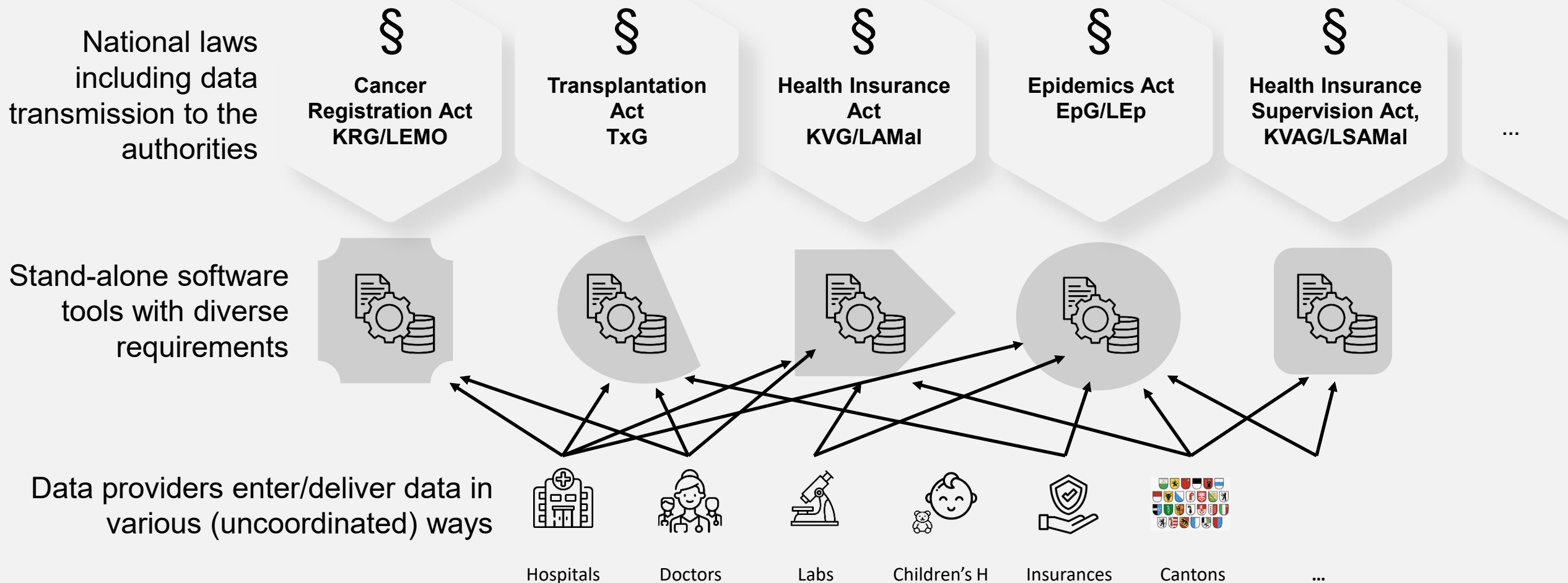
Why national guidelines, an overarching strategy and the coordinated digitalisation of public administration are crucial for a modern healthcare system



Legal mandate for public health and statistics

- Identifying risks at an early stage
 - Monitoring quality and safety
 - Granting authorisations and licences
 - Identifying gaps in supply
 - Planning resources
 - Crisis management
 - Evidence-based policy-making
- Reliable, structured and timely information forms the basis for the effective management of the healthcare system

Legally mandated information sharing



New rules on the exchange of information

Governance,
infrastructure
and standards

Data and
transmission
requirements

Harmonised
standard
requirements

§ Federal law on the “Swiss Health Data Space”: New cross-sectional legislation

§

Cancer
Registration Act
KRG/LEMO

§

Transplantation
Act
TxG

§

Health Insurance
Act
KVG/LAMaI

§

Epidemics Act
EpG/LEp

§

Health Insurance
Supervision Act,
KVAG/LSAMaI

...



Hospitals



Doctors



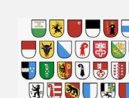
Labs



Children's H



Insurances



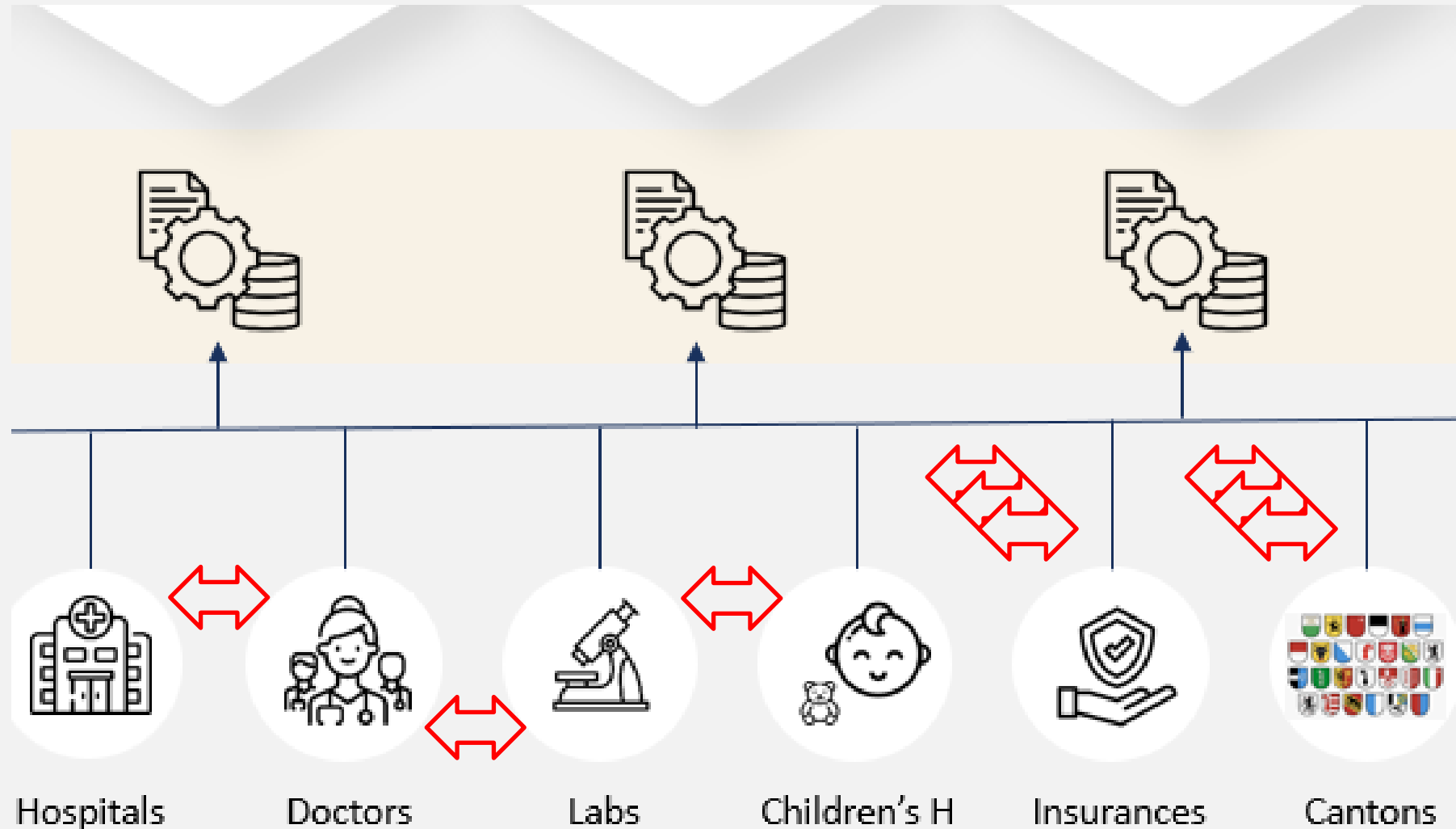
Cantons

...



Once only

Harmonised interoperability requirements also for B2B



THE FLAGSHIP PROJECT OF DIGISANTÉ

The Swiss Health Data Space (SwissHDS)

Federated · Sovereign · Interoperable

Health data remains decentralised with the data producers

Data is no longer sent point-to-point from A to B, but made available by data producer A and retrieved (or viewed) by data user B

2026-2028
Implementation of the SwissHDS

HL7®FHIR® mandatory for interfaces and transactions (for treatment-relevant data)

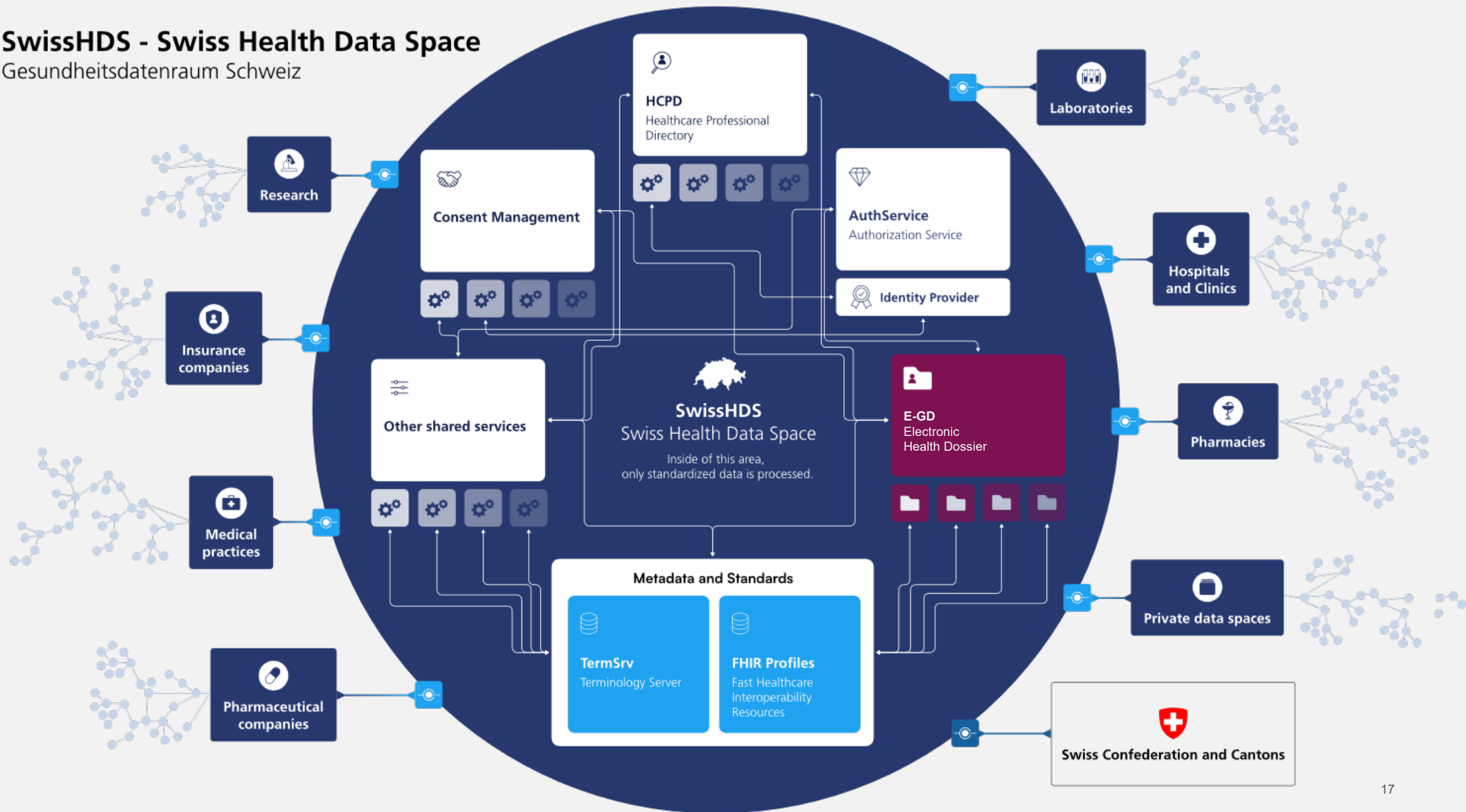
Shared data products (e.g. a medication plan) can be edited jointly

Automated and standardised exchange of data products possible across the board in accordance with a governance model

E-GD as integral part of the SwissHDS containing copies of health data stored over the course of a lifetime

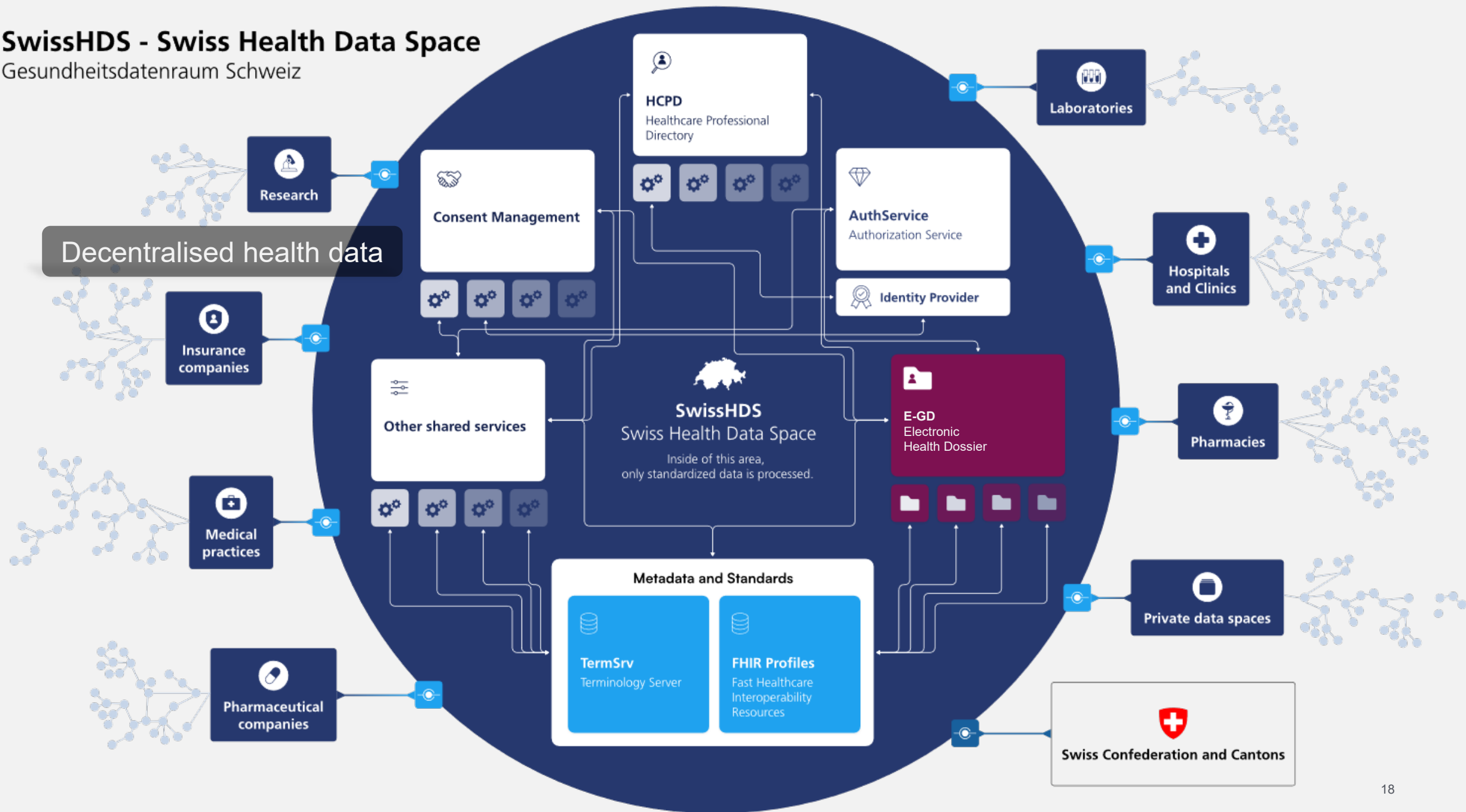
SwissHDS - Swiss Health Data Space

Gesundheitsdatenraum Schweiz



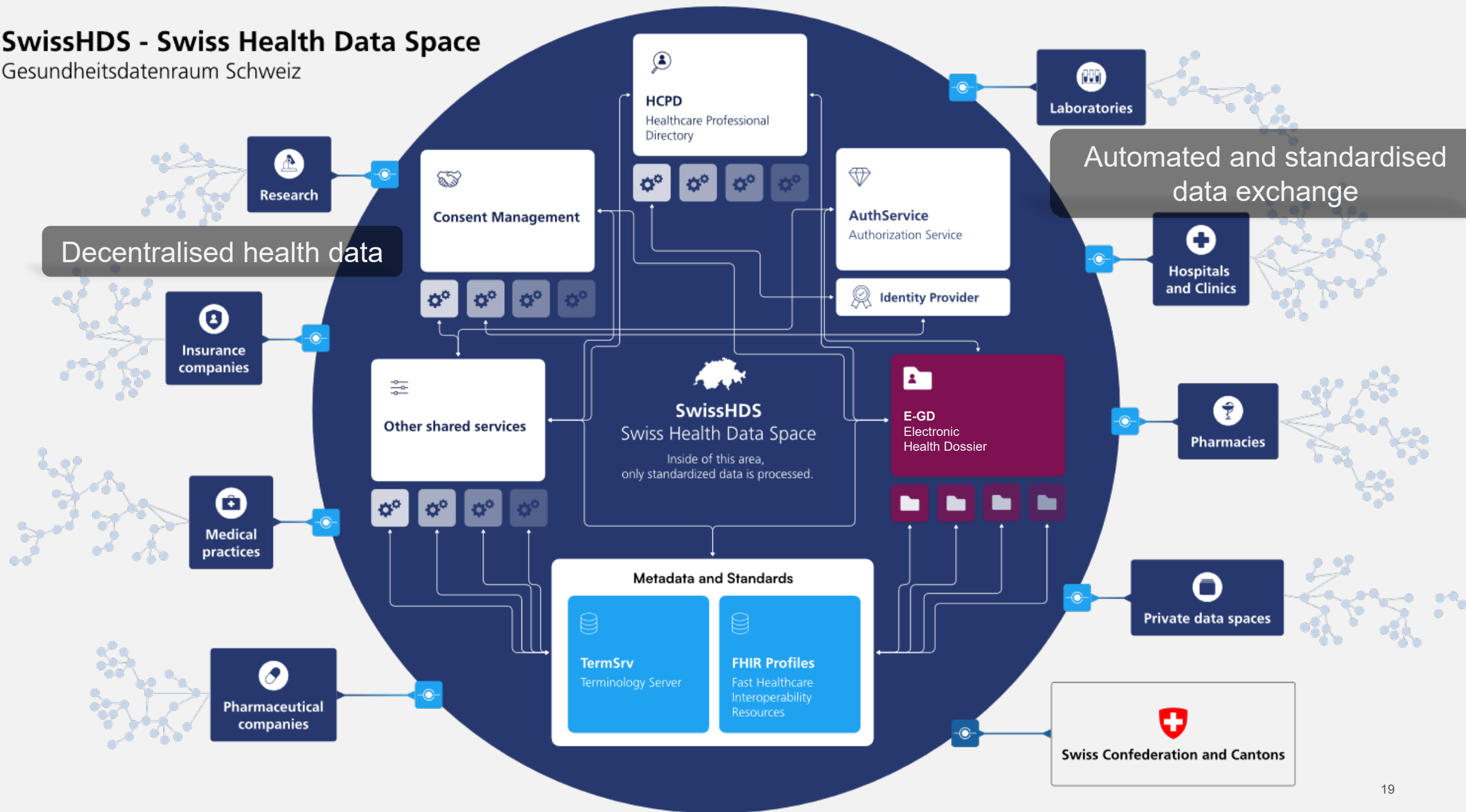
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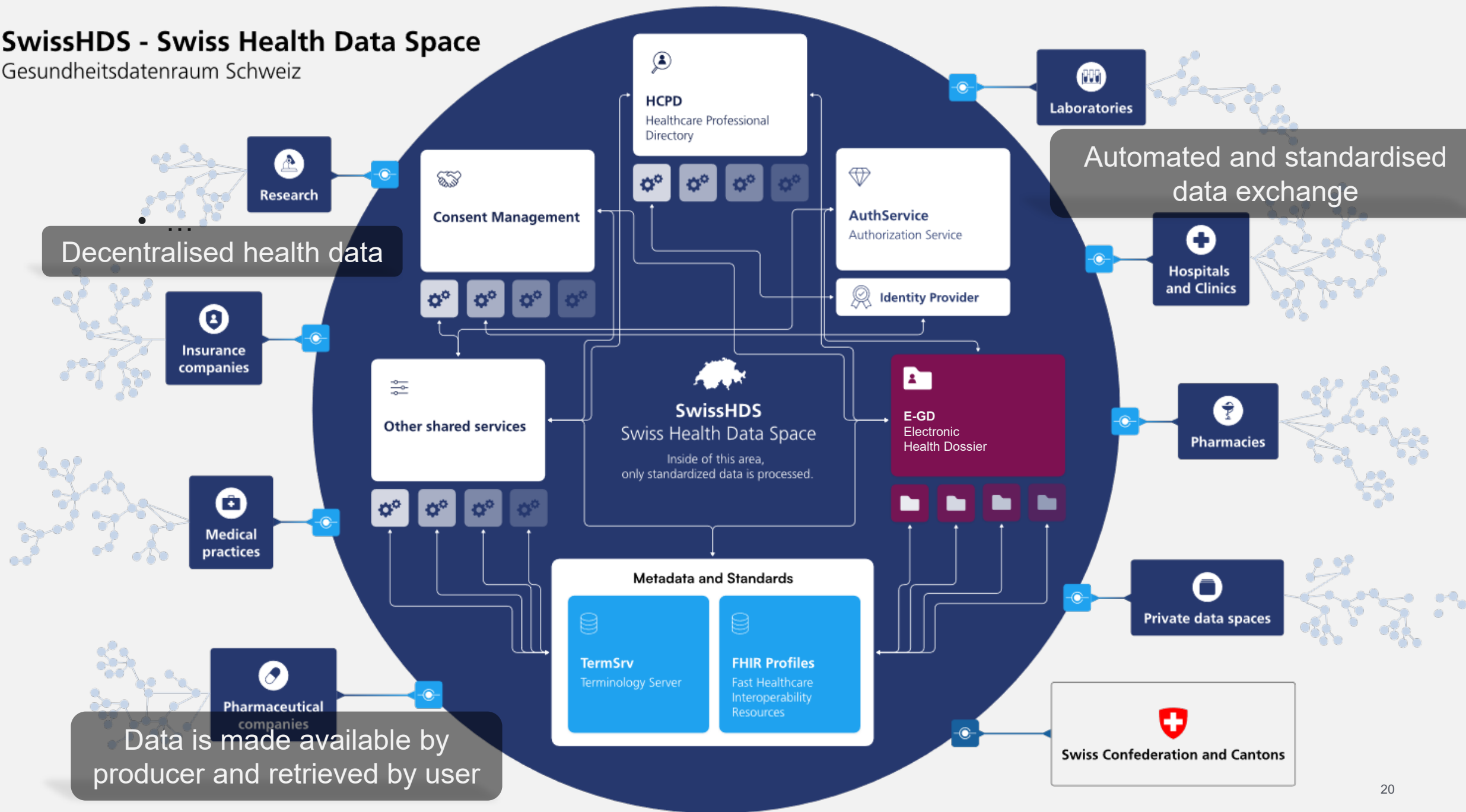
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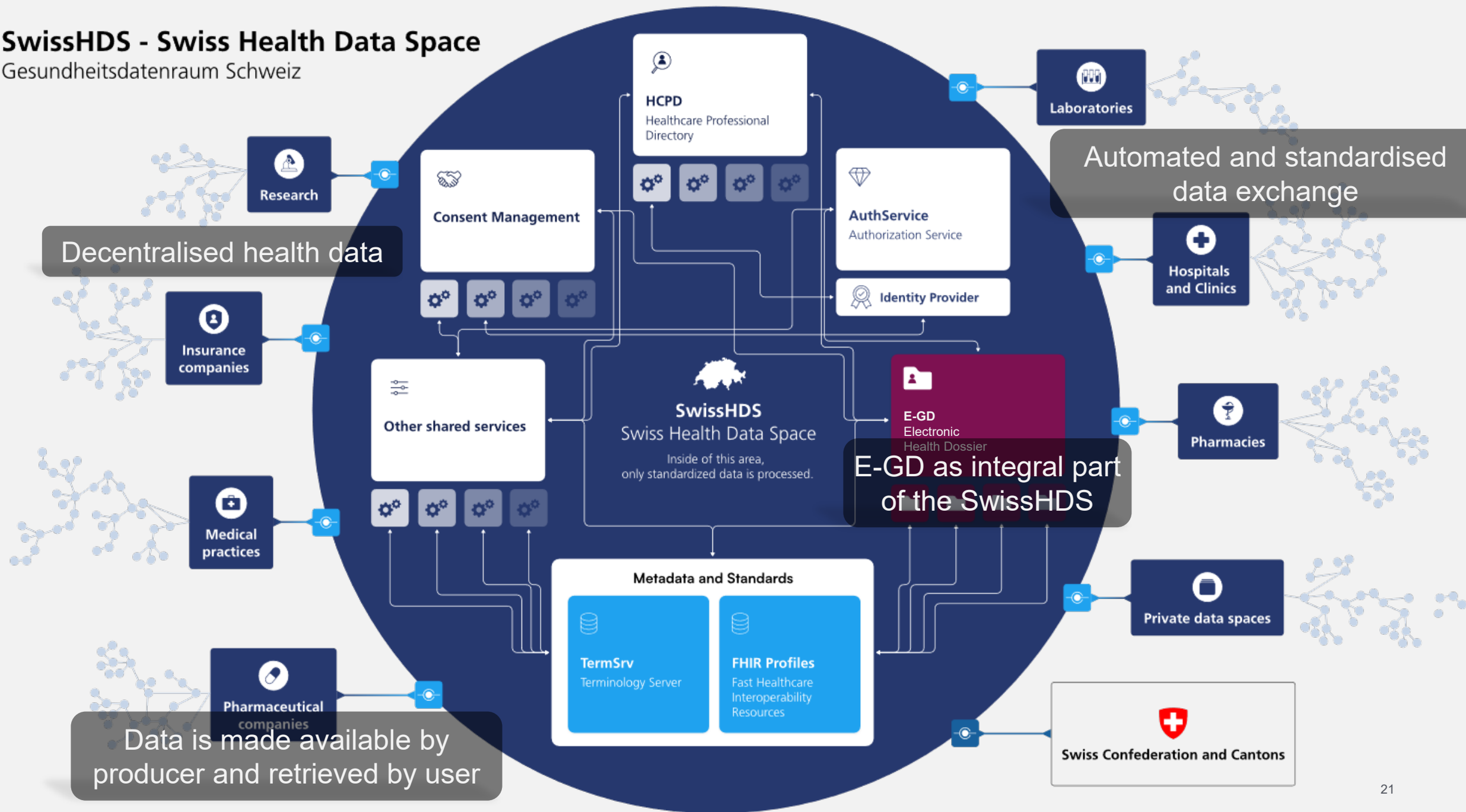
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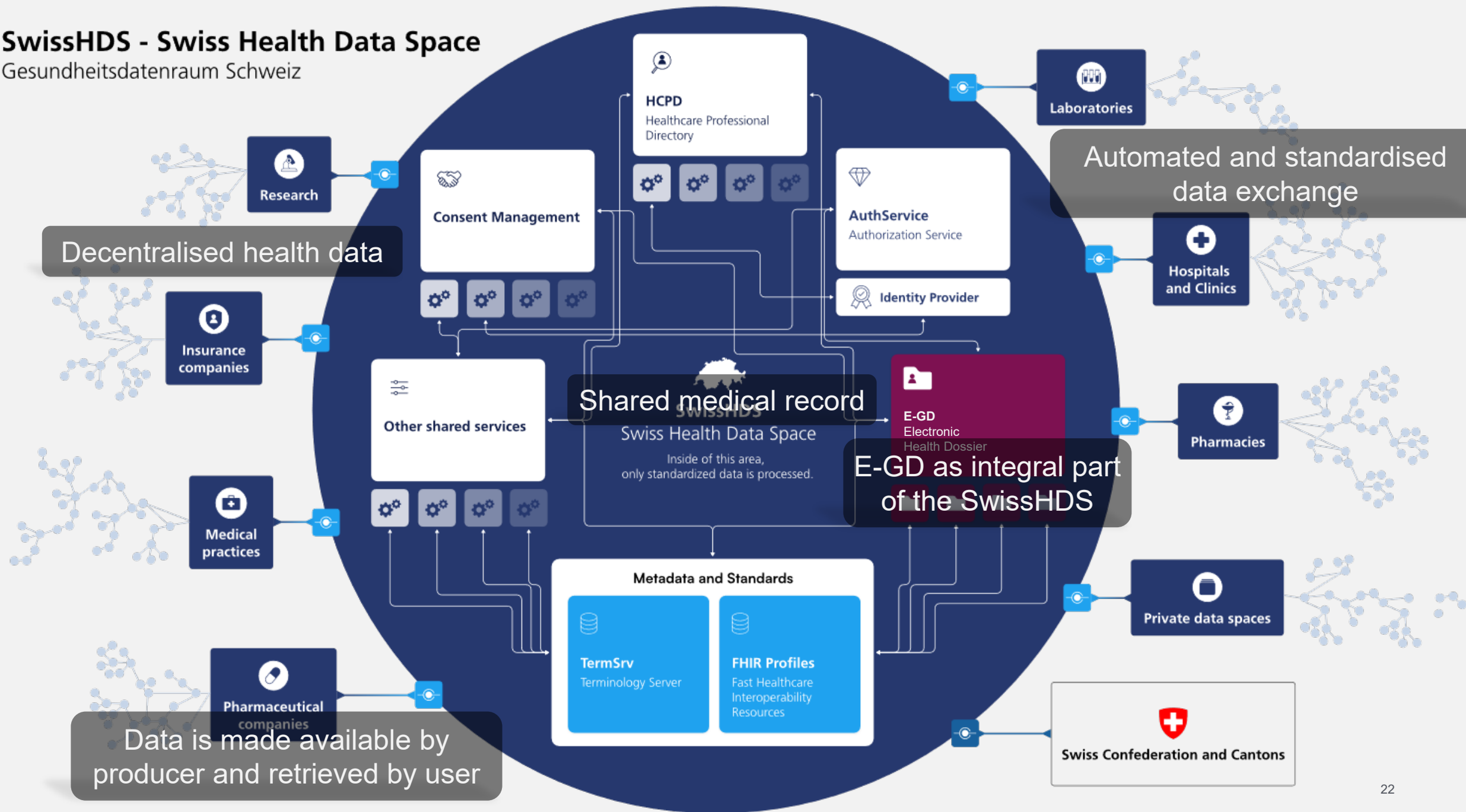
SwissHDS - Swiss Health Data Space

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SwissHDS core services

Type of services	List of services
Directory (people, organisations, systems, terminologies, data products, IDs)	• Directory of Healthcare Professionals and Institutions • Healthcare Actors and Organisations Directory • Patient Participant Directory • MPI / Master Patient Index • Terminology-Server • Data Product Catalogue • Data Product Definition List
Security & Traceability	• Authorization Service • Consent/ Policy Repository & Decision Service • Audit Log Service • Fraud Detection • Anonymisation- und Pseudonymisation-Service • Signature- und Verification-Service • Validation Service
Notification	• Notification Service • End-User Notification

SwissHDS

Infrastructure, core functionalities, and use cases

Use Cases

Accessing
treatment-related
data

Update to an
electronic
medication plan

Referral to a
follow-up care
provider

...

Core functionalities of the SwissHDS

Data exchange
«Data Mesh»
e.g. Retrieving a
discharge report

Collaborative data
processing
e.g. eMedication

Process
Coordination
e.g. Referral, laboratory
test request

Technical and organisational infrastructure

Technical infrastructure
Core services, reference architecture

Organisational infrastructure
Governance, Standardisation

Deep dive #2

How does the SwissHDS support the referral of patients within the Swiss healthcare system?



Example: Referral to a follow-up care provider

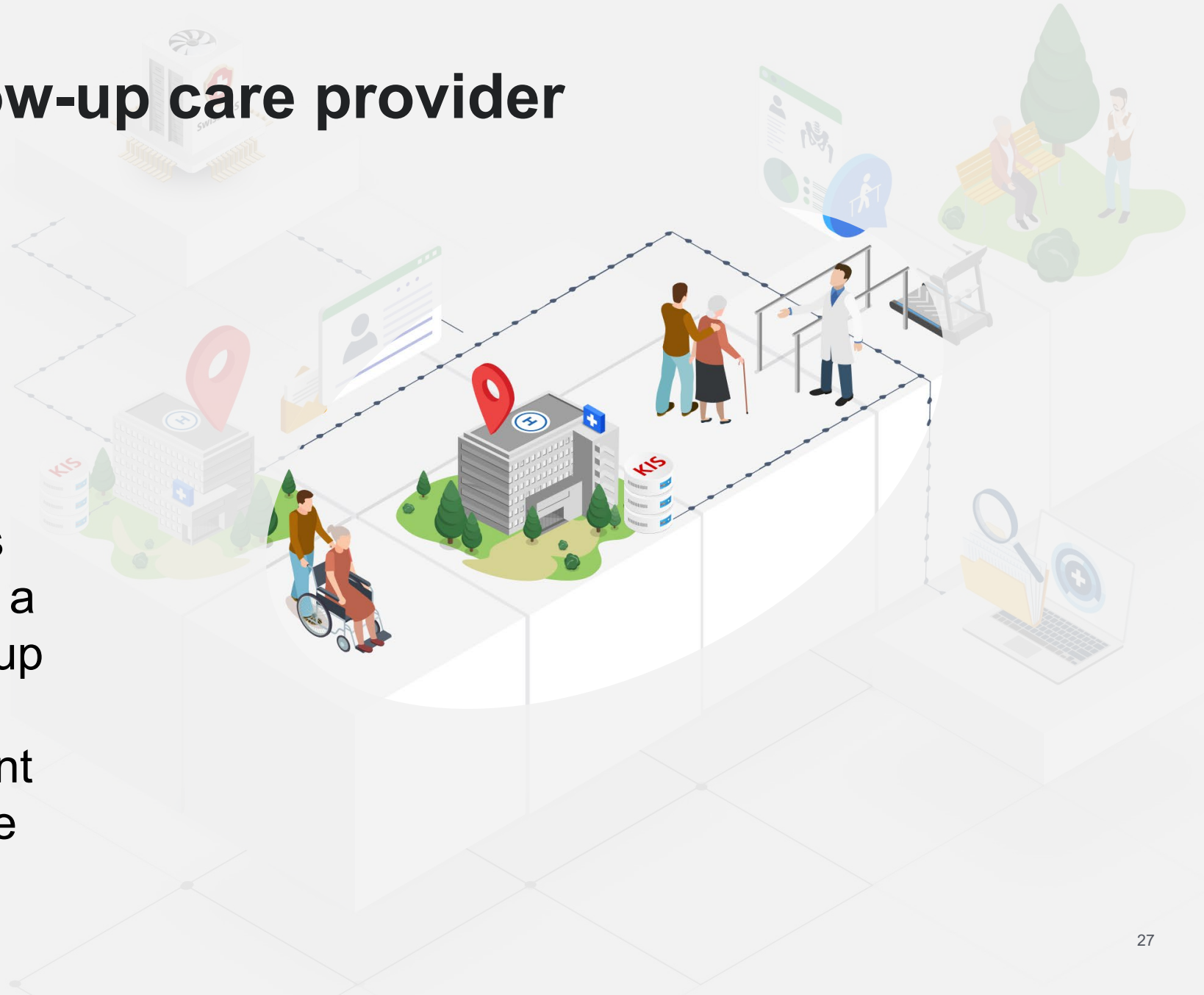


Mrs Smith, aged 67, is having hip surgery at a university hospital.

Example: Referral to a follow-up care provider

Three days after the procedure, Mrs Smith is due to be transferred to a facility providing follow-up care.

To this end, data relevant to the treatment must be forwarded.



Example:

Referral to a follow-up care provider

At present, data exchange is characterised by:

- Different communication channels
- Duplicate data entry
- Missing or delayed information



Example: Referral to a follow-up care provider

The SwissHDS addresses these issues by ensuring that data communication is:

- standardised
- API-based
- and interoperable



Example: Referral to a follow-up care provider

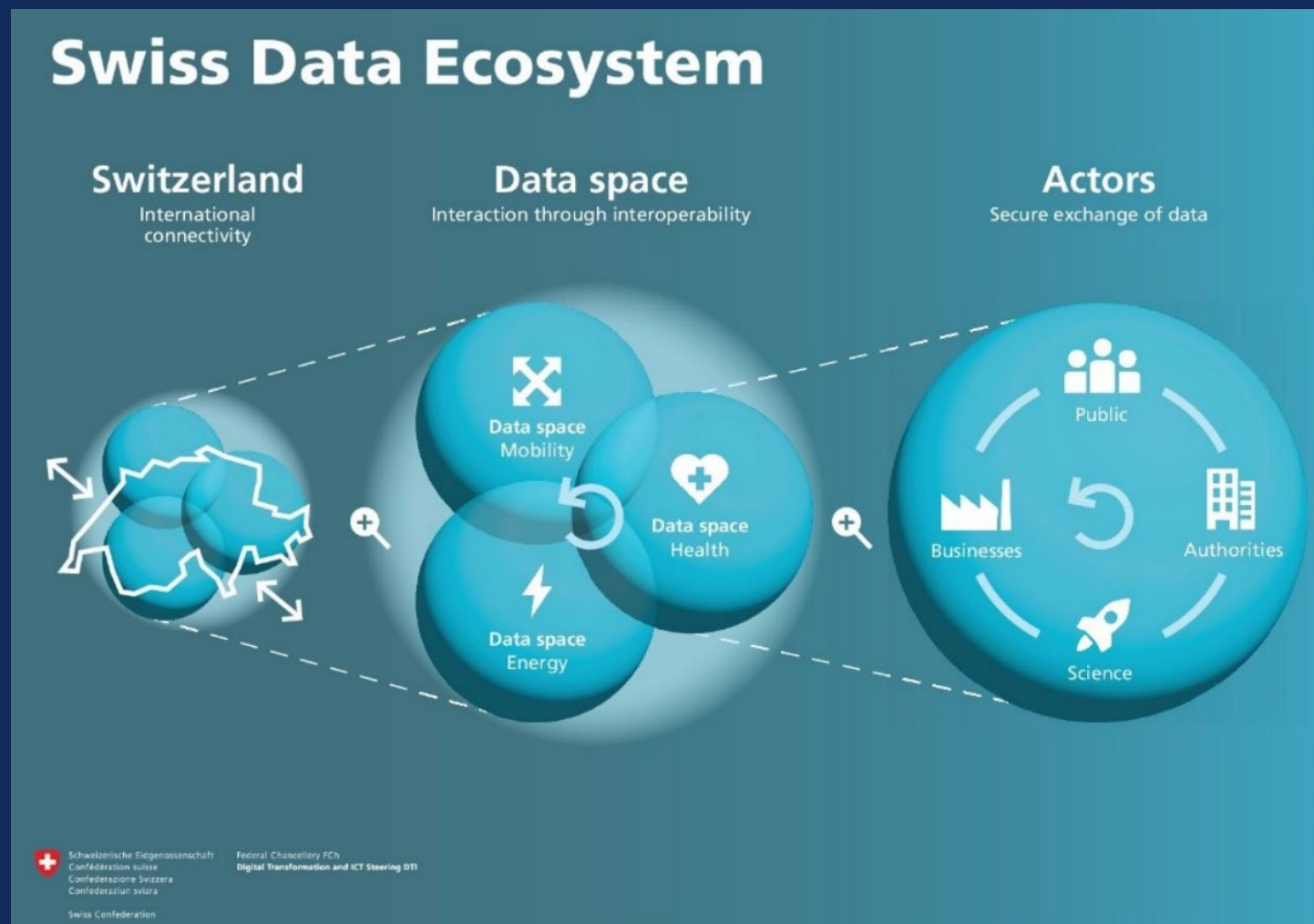
Relevant data is made

- **available** and can be
- **retrieved** and
- **viewed** by authorised personnel.

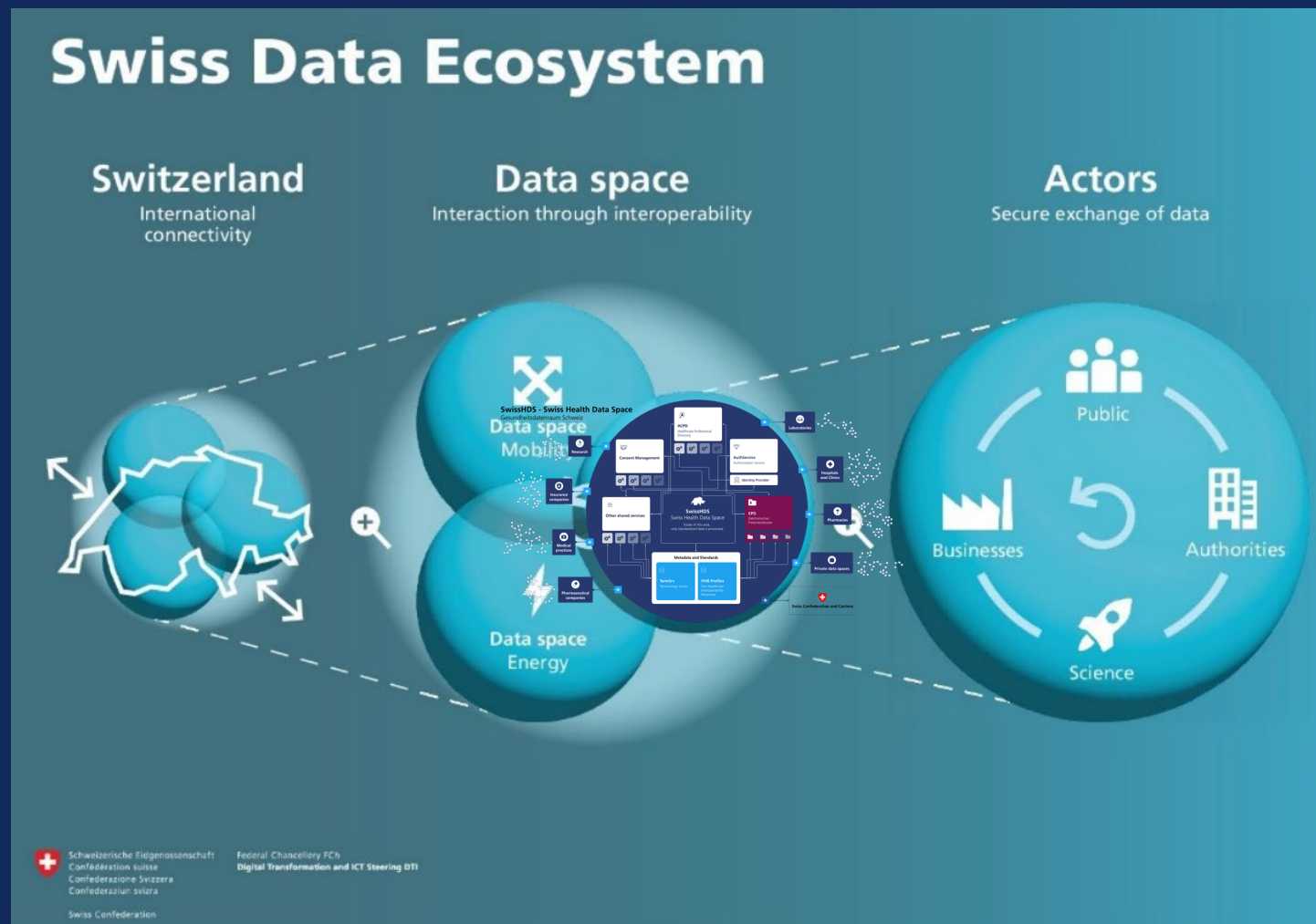
This leads to an improvement
in efficiency and patient care.



THE OVERARCHING STRATEGY



THE OVERARCHING STRATEGY



THE OPPORTUNITY

Six Reasons Switzerland Can Succeed



Nationally Funded

CHF 392 M offered —
broad political and
stakeholder support



Political Consensus

Cross-party agreement in
Parliament — stable
mandate through 2034



Research Excellence

Aligned with ETH/EPFL,
Universities, SPHN, etc.



Industry Strength

World-class partners with
skin in the game



Privacy as Asset

Data protection, federated
design - competitive trust



Late-Mover Advantage

Learning from e.g. DE,
DK, FI, CA — CH benefits
from pioneering work

THE FINAL STATEMENT

“Healthcare digital transformation isn’t solely an expense – it’s an investment in system modernisation that will determine whether our healthcare remains affordable, resilient, and high-quality in the decades ahead”

Thank you for your attention



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