

**Project Mult-eMediAtt  
Cookbook  
Version 1.17**

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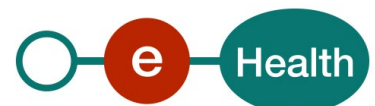
**eHealth platform**

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To the attention of: “IT expert” willing to integrate this web service.



# 1. Document history

Version	Date	Description of changes / remarks
1.0	18/12/2017	Initial
1.1	26/06/2018	New metadata ID-KMEHR
1.2	06/08/2018	Detailed info on handling the DAAS response and KMEHR v2.1
1.3	30/04/2020	Added extra details concerning the retraction of a KMEHR message
1.4	18/12/2020	Update for limited scope
1.5	02/03/2021	Clarifications concerning the annulation of a DIN (DIN retraction)
1.6	28/08/2022	Errata & supplementary info on when to send a request to the DAAS <ul style="list-style-type: none"> <li>- § 5.1.5</li> <li>- § 8.4</li> </ul>
1.7	22/09/2021	Clarifications concerning the start and end date used in the DAAS request
1.8	08/10/2021	Update in § '7.1.3 Test and release procedure': added minilab info
1.9	24/11/2021	Removed recommendation to use eHBox REST. Added recommendation to use the GetMessageAcknowledgmentsStatus method. Clarifications on the use of DAAS & datasets Removing info on dataset C. This dataset is not used in this phase of the project.
1.10	10/01/2021	Adding test scenario's in §7.5 Clarifications on the use of urn:be:fgov:person:ssin:incapacity:cause Updated examples in Annex
1.11	26/01/2021	To minimize printing paper, we no longer request 'CIN – paper' to be preselected. See Chap 4 Global Overview - step 3.
1.12	10/02/2022	Added extra information on the project metadata to use in eH2eBox.
1.13	15/02/2022	Clarifications on the use of the eBox in §5.1.7.2
1.14	06/04/2022	§5.1.6.3 Paper – Added: Recommendations for a scannable paper print
1.15	22/04/2022	Clarification on the correct Multi-eMediAtt number to use.
1.16	15/06/2022	Adding extra recommendations: usage of Annex and EncryptableINSSPatient. See eHBox chapter.

1.17	21/06/2024	<ul style="list-style-type: none"> <li>• Clarification on the importance of the 'GetMessageAcknowledgmentsStatus' functionality.</li> <li>• Recommendations on the name of the PDF attestation.</li> <li>• § 2.3 eHealth document references (updated)</li> <li>• § 5.1.9 WS-I Org Basic Profile (added)</li> <li>• § 5.1.10 Tracing (added)</li> <li>• Rules on choosing the applicationID of a destination in the case multiple applicationIDs are present.</li> <li>• New attribute 'urn:be:fgov:person:ssin:ehealth:2.0:multemediatt:routing' available. Includes XSD valid response and an applicationID.</li> <li>• Adding more precision on how BCP should be handled.</li> <li>• Adding extra precision on the DIN retraction.</li> <li>• Strong suggestion to name the document sent to the patient 'certificat d'incapacité de travail / arbeidsongeschiktheidattest'</li> <li>• Update reference to the dataset addendum</li> <li>• Clarify use of 'totalincapacity' in case of partial work capacity</li> <li>• Update XSD for v2</li> <li>• Mention differences in KMEHR and Schematron for v1 and v2</li> <li>• Add titles for partial work capacity notifications</li> <li>• Add dataset C for employers</li> <li>• Update reference to medical certificate</li> <li>• Mention that percentage is mandatory for ADA</li> <li>• Mention differences in template for DIN retraction between v1 and v2</li> <li>• Add some recommendations</li> <li>• Clarify that dataset D can only be sent after receiving a confirmation that the other destinations have successfully been sent.</li> <li>• Update Schematron usage</li> </ul>
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## 2. Introduction

### 2.1 Goal of the service

N/A

### 2.2 Goal of the document

This document is not a development or programming guide for internal applications. Instead, it provides functional and technical information to help an organization integrate and use the eHealth platform service.

To ensure smooth, consistent, and risk-controlled interactions with a maximum number of partners, these partners must commit to complying with the eHealth platform's specifications, data format, and release processes as described in this document. Both technical and business requirements must be met to facilitate the integration and validation of the eHealth platform service within the client application.

### 2.3 eHealth platform document references

In the technical library on the portal of the eHealth platform, you can find all the referenced documents.<sup>1</sup>. These versions or any subsequent versions, can be used for the service.

ID	Title	Version	Date	Author
1	Data Attribute Service WS – Cookbook	v1.8	19/07/2022	eHealth platform
2	eH2eBox Cookbook	v1.9	07/12/2022	eHealth platform
3	eHealthBox REST v1.0 – Cookbook	v1.12	03/04/2023	eHealth platform
4	KMEHR standards - Transaction: Incapacity notification v2	v2.2	24/03/2023	eHealth platform
5	Multi-eMediatt – Certificate of incapacity for work (NL – FR – D)	v1.5	03/07/2022	eHealth platform
6	Multi-eMediAtt – Cookbook Ann Dataset	V2.0	31/07/2023	eHealth platform
7	Multi-eMediatt Cookbook Ann Cert	v3.0	31/07/2023	eHealth platform
8	Multi-eMediAtt project overview	v1.0	10/03/2021	eHealth platform
9	Multi-eMediAtt test scenarios	v1.3	24/03/2022	eHealth platform
10	xsd-daas-attributes-1.1.4-schemas	v1.1	22/09/2022	eHealth platform
11	xsd-daas-attributes-2.0.1-schemas	V2.0	12/06/2023	eHealth platform

<sup>1</sup> <https://www.ehealth.fgov.be/ehealthplatform>

## 3. Support

### 3.1 Helpdesk eHealth platform

#### 3.1.1 Certificates

To access the secured eHealth platform environment you have to obtain an eHealth platform certificate, used to identify the initiator of the request. In case you do not have one, please consult the chapter about the eHealth Certificates on the portal of the eHealth platform.

- <https://www.ehealth.fgov.be/ehealthplatform/nl/ehealth-certificaten>
- <https://www.ehealth.fgov.be/ehealthplatform/fr/certificats-ehealth>

For technical issues regarding eHealth platform certificates

- Acceptance: [acceptance-certificates@ehealth.fgov.be](mailto:acceptance-certificates@ehealth.fgov.be)
- Production: [support@ehealth.fgov.be](mailto:support@ehealth.fgov.be)

#### 3.1.2 For issues in production

eHealth platform contact centre:

- Phone: 02 788 51 55 (on working days from 7 am till 8 pm)
- Mail: [support@ehealth.fgov.be](mailto:support@ehealth.fgov.be)
- Contact Form :
  - <https://www.ehealth.fgov.be/ehealthplatform/nl/contact> (Dutch)
  - <https://www.ehealth.fgov.be/ehealthplatform/fr/contact> (French)

#### 3.1.3 For issues in acceptance

[Integration-support@ehealth.fgov.be](mailto:Integration-support@ehealth.fgov.be)

#### 3.1.4 For business issues

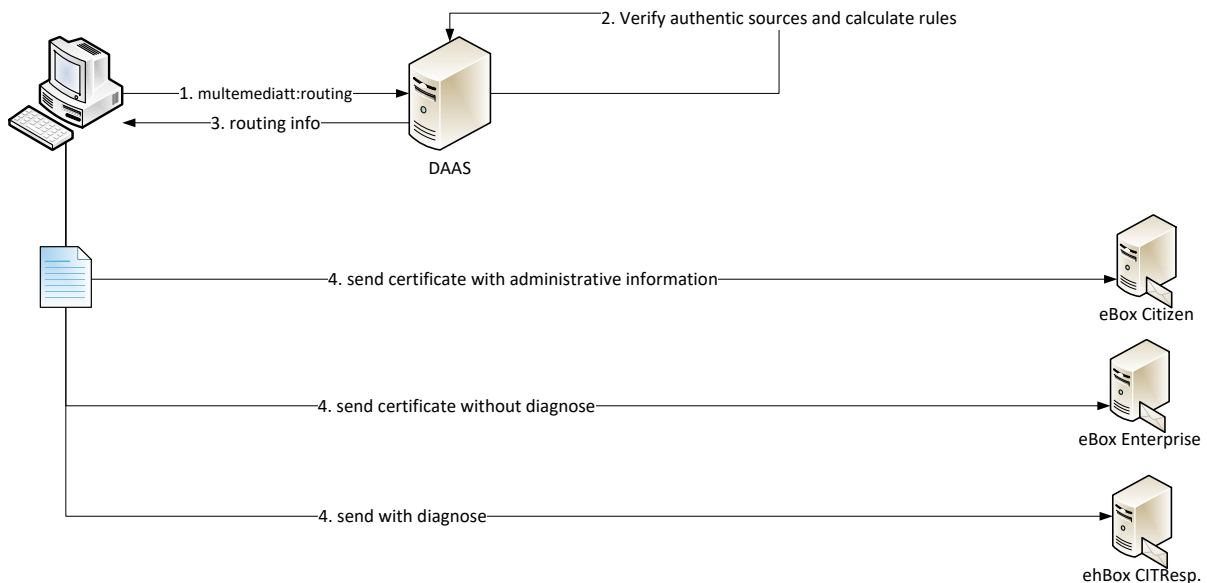
- regarding an existing project: the project manager in charge of the application or service
- regarding a new project or other business issues: [info@ehealth.fgov.be](mailto:info@ehealth.fgov.be)

### 3.2 Status

The website <https://status.ehealth.fgov.be> is the monitoring and information tool for the ICT functioning of the eHealth services that are partners of the Belgian eHealth system.



## 4. Global overview



The above overview is a generalisation and simplification of the process<sup>2</sup>. The basic steps are explained below.

The main flow for the Mult-eMediAtt project is:

1. A health care professional (HCP) examines a patient<sup>3</sup>. If an incapacity notification (IN) is required, the HCP can activate the 'Mult-eMediAtt'-module in his software. The HCP asks the patient whether a digital IN (DIN) is needed. If not, the software should be able to create a printed version of the IN based on one of the existing datasets (see 2.3). If a DIN is necessary, the soft must send a request to the DAAS to retrieve the correct routing information, the correct dataset and channel (see Example: Routing information request).<sup>4</sup>
2. The eHealth DAAS consults different authentic sources and calculates a routing proposition.
3. The eHealth DAAS returns the proper result (see Example: Routing information response).

The physician will see a list of possible options (destinations, medium, ...). They are all selected by default (except for destination NIC/CIN 'paper'). The HCP can deselect a destination or choose to print the IN after validating with patient. Printing the DIN MUST always be possible regardless of the DAAS results because the eHealth DAAS currently only has a limited view of all the actors involved.

The HCP must, in consultation with the patient, decide to whom the DIN should be sent. This is done on the basis of the proposed information returned by eHealth DAAS. It must therefore be possible to select or deselect 1 or more destinations. It is not the intention of this project to send the DIN to more recipients than is currently the case in the non-digital workflow. In particular, we mean the NIC/CIN (Nationaal Intermutualistisch College/ Collège Intermutualiste National), because every DIN sent, carries the risk of being treated by the insurance organization of the patient.

<sup>2</sup> eHealth strongly suggests reading the "Mult-eMediAtt project overview" document first in order to understand the different phases in this project.

<sup>3</sup> In this first phase of the project, the HCP can only be a general practitioner.

<sup>4</sup> In a second phase, the Mult-eMediAtt will be handled automatically and no longer only upon request.



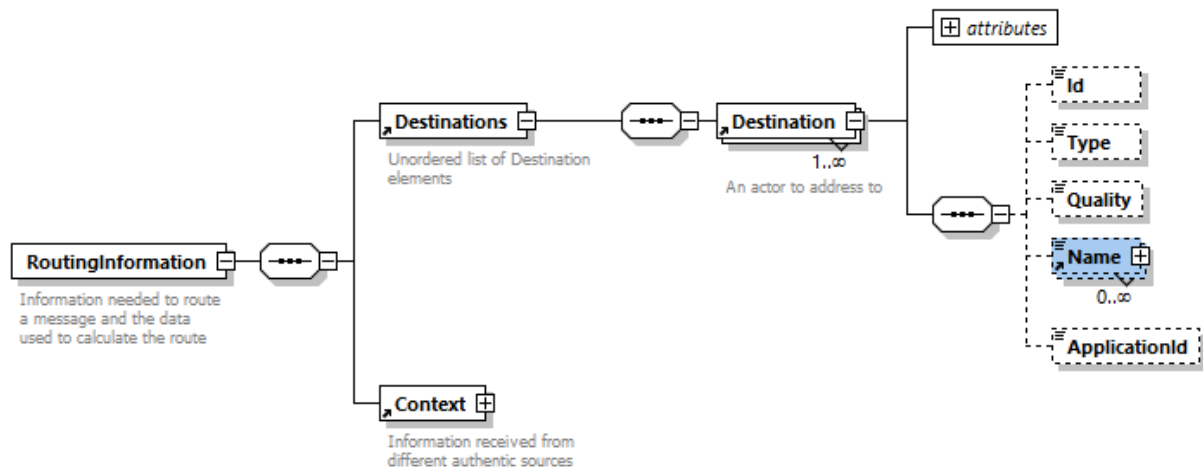
Based on the routing info, the software MUST generate a KMEHR message with the correct dataset and a UID (see 5.1.3 DAAS response (v2))

The v2 response will be able to handle results for the Mult-eMediAtt project phase 2.

The v2 response will handle results for MEDEX, CIN, CERTIMED, the medical service of the federal and local police departments, the medical service of the Belgian Defense, and the medical service of the Belgian railroads (NMBS, Infrabel and HR Rail).

Note that, while we used previously the name 'HR RAIL' when referring to the Belgian railroads, we now ask to use:

- NL: « NMBS, Infrabel of HR Rail »
- FR: « SNCB, Infrabel ou HR Rail »
- DE: « SNCB, Infrabel oder HR Rail »



This response will contain an AttributeValue for the attribute 'urn:be:fgov:person:ssin:ehealth:2.0:multemediatt:routing' containing a RoutingInformation element. See xsd-daas-attributes-2.0.0-schemas.jar next to the DAAS cookbook.

The only differences between v1 and v2 are:

- The response is XSD-compliant
- A new element 'ApplicationId'

<b>Destination/ApplicationId</b>	The ApplicationId to find the correct ETK for this destination. If empty or missing, the ApplicationId should be left empty in the ETK request (default). This is only valid when Destination/@Channel contains 'eHBox'.
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- DIN to send to the appropriate eHealthBox.  
The medical attestation is pre-filled with all available information from the EMD/DMI for the HCP's convenience.
- Finally, the software MUST handle all acknowledgements or error messages coming from the eBox or eHBox within seconds (eHealth suggests checking for the acknowledgement after 5 seconds). The software should also indicate to the physician whether the DIN was correctly delivered<sup>5</sup> for each destination. On failure, the message must be printed on paper. Therefore, we refer to the eHBox documentation.  
The software MUST also generate a human readable (PDF) message to send to the appropriate eBox Citizen . This message MUST include all successful DIN deliveries (=summary message, see also 5.1.7.2). If the patient does not have an eBox, the DIN should be printed.

<sup>5</sup> You can use the GetMessageAcknowledgementStatus method.

Each software vendor MAY rearrange the different steps in this flow as he sees it, except for the following caveats:

- The patient MUST agree to send a DIN (**no automatic call to DAAS**).
- The patient MUST agree on the different destinations chosen in step 3.
- The patient MUST receive a human readable message to know where the DIN was sent. See step 5.
- A UID must be present on all DINs as well as the summary message that will be sent to the patient.

In case the above flow cannot be completed successfully, the Business Continuity Plan (BCP) solution should be implemented. For this project, the BCP solution is to print the DIN. When eHealth services are down or if one of the services fails or when one of the above steps fails, the software should propose to print the DIN.

## 5. Step-by-step

### 5.1 Digital incapacity notification

A digital incapacity notification (DIN) is requested by the patient or initiated by the HCP. Depending on the use case, the software needs to implement multiple datasets for the DIN (See 8.5 DIN datasets). The DIN will be sent in the form of a KMEHR<sup>6</sup> message or a PDF message. The KMEHR will be encrypted and sent to an eHealthBox, and/or unencrypted (without medical information) to the eBox of the employer. The PDF message will be sent to the eBox of the citizen and/or to the eBox of the employer.

In order to recognize the dataset to use and the destination of the DIN, the software of the HCP must interrogate the eHealth Data Attribute Service (DAAS)<sup>7</sup>. See example in chapter 8.1.

#### 5.1.1 DAAS request

The required attribute to send to the DAAS is 'urn:be:fgov:person:ssin:multemediatt:routing' (v1) or 'urn:be:fgov:person:ssin:ehealth:2.0:multemediatt:routing' (v2). The required input:

Attribute	Description
urn:be:fgov:person:ssin	This is the National Number of the patient.
urn:be:fgov:person:ssin:birthdate	Birth date of the patient (format: 'DD/MM/YYYY')
urn:be:fgov:person:ssin:incapacity:cause	This is the cause of the capacity. The <b>only</b> values allowed are 'workaccident', 'illness', 'occupationaldisease'. The cause illness regroups the causes 'illness', 'pregnancy', 'accident' The cause 'workaccident' regroups the causes 'workaccident', 'traveltofromworkaccident'
NotBefore and NotOnOrAfter attributes from the SubjectConfirmation element	Start date and end date of the incapacity. 'NotBefore' MUST be less or equal to 'NotOnOrAfter'. <u>Caveat</u> : 'NotOnOrAfter' is the date not included in the period. When a period of illness covers January 1 <sup>st</sup> until January 2 <sup>nd</sup> (2days of illness), the NotOnOrAfter should be set as January 3 <sup>th</sup> .
urn:be:fgov:person:ssin:incapacity:totalincapacity	This indicates whether it concerns a partial or total incapacity. Possible values are 'true' or 'false'. Indicate 'true' if capacity to work is 0%, false in all other cases <sup>8</sup> .
urn:be:fgov:person:ssin:incapacity:prolongation	This indicates if the incapacity concerns a prolongation of a previous incapacity. Possible values are 'true' or 'false'.
urn:be:fgov:ehealth:1.0:service-name	'urn:be:fgov:ehealth:admin:simplification:multemediatt'

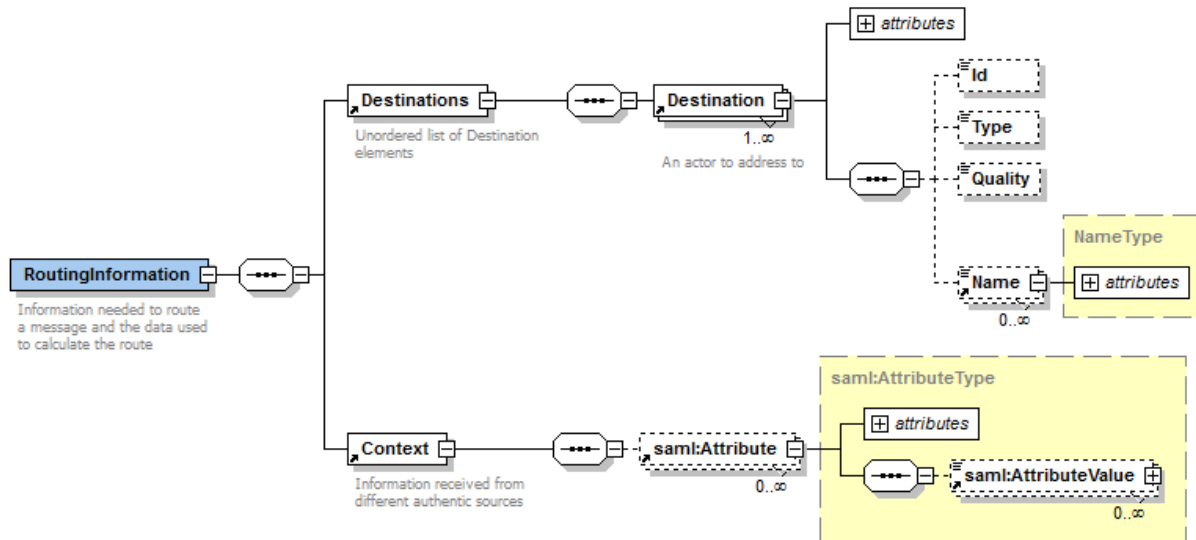
<sup>6</sup> See <https://www.ehealth.fgov.be/standards/kmehr/en/transactions/incapacity-notification>

<sup>7</sup> See <https://www.ehealth.fgov.be/ehealthplatform/nl/service-data-attribute-service>

<sup>8</sup> Note that if "totalincapacity" is false, the 'percentage' field in the KMEHR is mandatory

### 5.1.2 DAAS response (v1)

The v1 response can only handle results for MEDEX and CIN (= phase 1 of the Mult-eMediAtt project).



This response will contain an AttributeValue for the attribute 'urn:be:fgov:person:ssin:multemediatt:routing' containing a RoutingInformation element. See xsd-daas-attributes-1.1.0-schemas.jar.

<b>Destinations</b>	Contains at least one destination from the list of proposed destinations.
<b>Destination/@Channel</b>	Attribute indicating the channel (aka medium) to use. This is a space separated list of values. The possible values are 'eHBox', 'eBox' and 'paper'. See the respective sections: eHBox, eBox, Paper The order of the list is important. The first value in the list should be the one that is preselected by default on the HCP's screen.
<b>Destination/@Dataset</b>	Attribute indicating the dataset to use. Values are a, b, d. See DIN datasets.
<b>Destination/Id</b>	Identifier used in the eHealthBox or eH2eBox interface for the Destination element.
<b>Destination/Type</b>	Identifier used in the eHealthBox or eH2eBox interface for the Destination element.
<b>Destination/Quality</b>	Identifier used in the eHealthBox or eH2eBox interface for the 'Destination' element.
<b>Destination/Name</b>	Name of the destination in NL and FR. This value can be used to display in the software.
<b>Context</b>	The context contains attributes. Each attribute contains a response from an authentic source. Based on this Context, eHealth created the list of proposed destinations. See the different examples for more information.

### 5.1.3 DAAS response (v2)

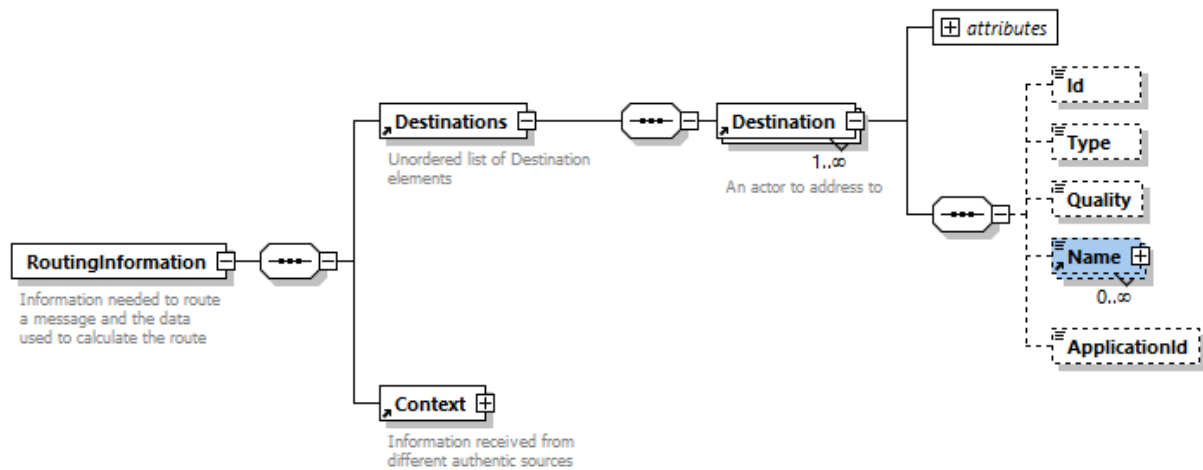
The v2 response will be able to handle results for the Mult-eMediAtt project phase 2.

The v2 response will handle results for MEDEX, CIN, CERTIMED, the medical service of the federal and local police departments, the medical service of the Belgian Defense, and the medical service of the Belgian railroads (NMBS, Infrabel and HR Rail).



Note that, while we previously used the name 'HR RAIL' when referring to the Belgian railroads, we now ask to use:

- NL: « NMBS, Infrabel of HR Rail »
- FR: « SNCB, Infrabel ou HR Rail »
- DE: « SNCB, Infrabel oder HR Rail »



This response will contain an AttributeValue for the attribute 'urn:be:fgov:person:ssin:ehealth:2.0:multemediatt:routing' containing a RoutingInformation element. See xsd-daas-attributes-2.0.0-schemas.jar next to the DAAS cookbook.

The only differences between v1 and v2 are:

- The response is XSD-compliant
- A new element 'ApplicationId'

<b>Destination/ApplicationId</b>	The ApplicationId to find the correct ETK for this destination. If empty or missing, the ApplicationId should be left empty in the ETK request (default). This is only valid when Destination/@Channel contains 'eHBox'.
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#### 5.1.4 DIN

Based on the DAAS response (or more precisely the datasets to use), the correct input fields should be displayed for the HCP. A maximum of fields should be pre-filled based on the EMD/DMI, such as the identity of the patient, birthdate, the identity of the HCP, encoded diagnosis, ...

The DIN must contain a unique identifier (UID). For tracing purposes this UID must be present in:

- the KMEHR message (ID-KMEHR in the header)
- human readable message (txt, PDF) sent to the eBox
- on the printed version of the DIN.

After sending, this DIN should be stored temporarily for the following purposes:

- to retract the certificate
- to resend in case problems have been detected by backend services or by the patient in the days following a consult.

### 5.1.5 DIN retraction

The DIN can be retracted if needed. To do so, a new KMEHR message needs to be constructed with only 1 item. The item contains the KMEHR ID of the original DIN to be retracted and a lifecycle 'retracted'. For more info see the KMEHR website<sup>9</sup>.

Some important points:

1. The retraction of the DIN MUST be sent to all destinations that received the original DIN.
2. The retraction document must list all destinations that received the retraction.
3. The patient must receive the proof of retraction as a readable message (PDF) in his eBox or in a printed version.
4. If sending the retracted DIN fails due to technical problems, the software should retry until every destination has received the retraction. eHealth suggests retrying 3 times using an exponential back off<sup>10</sup>. If after 3 times the problem persists, the HCP should be notified so he can take action (ex. print the retracted DIN on paper and call the patient).
5. A retraction should be exceptional. It is strongly advised to do a cancellation when the patient is still with the HCP. In exceptional cases, the HCP can retract the DIN after the consultation. However, it is important that the patient still receives a notification of cancellation. Therefore, when the HCP retracts the DIN after 5 minutes and when there is no eBox, the GP software should display a message to warn the doctor (e.g. "Doctor's reminder: If you cancel after the consultation and your patient has no eBox ensure that your patient receives a paper notification of cancellation).

No Schematron (see next chapter) validation is needed for the DIN retraction.

### 5.1.6 Schematron validation

Before a KMEHR message is sent, the software MUST validate the KMEHR message using Schematron. To facilitate this, the eHealth platform implemented a Schematron validation in the technical connector. The software needs to instantiate the validator factory, pass the KMEHR and call the validate functionality. A failure in validation indicates a problem in the implementation of the dataset. In this case, the KMEHR message MUST never be sent and a printed version should be available.

Note that, in order to allow partial incapacity notifications and dataset C, there were some changes to both KMEHR and the Schematron. Because the Schematron would not be backwards compatible, we were forced to release a new Schematron for Mult-eMediatt v2. Be sure to use the right version:

- Override the property `be.fgov.ehealth.technicalconnector.services.validation.schematron` with the correct `overview.xml` value<sup>11</sup>. For your tests in the acceptance environment, you can use the following `overview XML`:  
**<https://raw.githubusercontent.com/ehealthplatformstandards/schematrons/acc/overview.xml>**

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<sup>9</sup> <https://www.ehealth.fgov.be/standards/kmehr/en>

<sup>10</sup> Example formula for an exponential back off (in seconds):  $\text{backoff}^{\text{retry}} \times \text{interval}$ .

Example :

- First retry :  $6^1 \times 10 = 60$
- Second retry :  $6^2 \times 10 = 360$
- Third retry :  $6^3 \times 10 = 2160$

<sup>11</sup> See <https://www.ehealth.fgov.be/standards/kmehr/en/page/schematron>

- This file will look like

```
<schematrons xmlns="urn:be:fgov:health:standards:validation:v1">
  <schematron>
    <name>incapacitynotification</name>

<path>https://www.ehealth.fgov.be/standards/kmehr/en/data/file/view/AWF
0UULuRwIvE61VS-R-?name=incapacitynotification.sch</path>
    <hash>C/dRsHGq9GdCG7nAq9uEYKMHnY4wXBuDM96zyJjGBkI=</hash>
  </schematron>
<schematron>
  <name>incapacitynotification_v2</name>

<path>https://raw.githubusercontent.com/ehealthplatformstandards/schematrons/20230801/incapacitynotification/incapacitynotification.sch</path>
```

- And then you can use either 'incapacitynotification' to validate against the v1 schematron, or 'incapacitynotification\_v2' to validate against the v2 schematron.

Software developers who do not use the connector can implement it themselves. See the KMEHR Schematron page<sup>12</sup> for more information on how to make sure you always have the latest Schematron version to validate against.

Some information about diagnosis – more information on site “standard” :

When mandatory or optional, each diagnosis shall then be expressed by 1 content element containing code(s) AND/OR 1 content element containing text. Note however the use of coded diagnosis is STRONGLY recommended.

When there is more than 1 diagnosis item, one – and only one – diagnosis item SHALL have an extra <cd> element to clarify that this is the principal diagnosis. (If there is 1 diagnosis, this is automatically considered the principal diagnosis).

Note different coding systems are allowed ([ICD](#), [ICPC](#), CD-SNOMED and must be accompanied by a version number)

When multiple coding systems are used, they are only supposed to point to 1 diagnosis.

(If it is necessary to give several different diagnoses: include multiple diagnostic items – one for each diagnosis.)

A maximum of 3 diagnosis can be provided (meaning a maximum of 6 codes). You can find some examples at the end of this document.

Note: for MEDEX, HR RAIL and the Belgian Defense it is forbidden to use the cause 'illness linked to pregnancy' and/or the block 'pregnancy'. The Schematron will check this rule – but it is the software that has to map 'illness linked to pregnancy' to 'illness', and remove the block 'pregnancy', for these destinations.

### 5.1.7 Destinations

At the end of the consultation, the HCP should see a list of possible routing destinations, based on the DAAS response, where to send the DIN. The software can choose to interpret the response based on the Context element returned by the DAAS.

<sup>12</sup> See <https://www.ehealth.fgov.be/standards/kmehr/en/page/schematron>

Each destination returned by the DAAS should be preselected. Software should filter duplicate destinations. The healthcare professional should be able to select/deselect a destination after which he sends the DCIN.

**Attention:** If a patient chooses not to notify one of his employers (e.g. because he does not work for that employer during his incapacity period), the doctor can deselect that employer, and that should automatically deselect the institute responsible for the MedicalServiceIncapacityWork (MSIW) for that employer, and vice-versa. Note that you can find in the Context element which MSIW is responsible for which employer. The MSIW should receive one DIN if at least one of the employers for whom it is responsible must be notified.

e.g.

```
<Actor OptionEnumeration="routing" Type="MedicalServiceIncapacityWork"
xmlns="urn:be:fgov:ehhealth:daas:complextyp:v2">
  <Id Type="CBE">xxxxx</Id>
  <Name xml:lang="nl">MSIW 1</Name>
  <Period>
    <StartDate>2017-01-01+01:00</StartDate>
  </Period>
  <Actor OptionEnumeration="noRouting" Type="Employer">
    <Id Type="CBE">yyyyy</Id>
    <Name xml:lang="fr">Employer 1</Name>
    <Period>
      <StartDate>2017-01-01+01:00</StartDate>
    </Period>
    <Actor OptionEnumeration="noRouting" Type="Employee">
      <Id Type="SSIN">zzzz</Id>
    </Actor>
  </Actor>
</Actor>
```

The software should verify that each message is correctly disposed in the appropriate e(Health)Box. If not, the software can try resending or print the DIN.

**Attention:** It should not be possible to deselect a destination with channel 'paper', because this channel implies that there is either a backend error or no electronic destination available. The patient probably needs to send this paper certificate somewhere, but eHealth cannot verify the destination.

The printing of the DIN should always be possible in case the patient requests a printed version. The data to be printed depend on the dataset.

Each destination defines one or more channels (aka medium) and a dataset. The channel can be 'eHBox', 'eBox' or 'paper'. The first channel is the preferred one. Each sent message MUST contain the UID (in KMEHR, PDF or on paper).

The DIN must be kept stored in the soft for 3 months. If an error occurred in the process, the patient should be able to receive a printed version after the consult.

### 5.1.7.1 eHBox

eHBox or eHealthBox is a known base service. More information on this service can be found on the eHealthBox support page<sup>13</sup>.

The software SHOULD use the GetMessageAcknowledgmentsStatus method to verify whether a message was successfully delivered within seconds after publication.

The KMEHR message sent through this channel, must be encrypted with the following required metadata:

- CM-DocumentType: Values of KMEHR CD-Transaction (value = notification)
- CM-DocumentSubType: Values of KMEHR CD-TransactionType (values = incapacity, incapacityextension, incapacityrelapse, ...)

<sup>13</sup> <https://www.ehealth.fgov.be/nl/basisdiensten/beveiligde-elektronische-brievenbus/presentatie>



- CM-ID-KMEHR: The value of the KMEHR ID-KMEHR

Extra recommendations:

- Add exactly one KMEHR message as an 'Annex' in the eHealthBox.
- Use the 'EncryptableINSSPatient' eHBox tag.

### 5.1.7.2 eBox

The eBox channel is a known channel in the social security sector. In order to facilitate the implementation of sending a message to this channel, eHealth has developed a new service called eH2eBox. This service uses the same interface as the eHealthBox channel with some limitations. For more information, you can consult the eH2eBox cookbook on the eHealthBox support page. A message sent through this channel is not encrypted and therefore, must never include medical information. Only datasets C and D are allowed.

(See Dataset C: diagnosis forbidden, for employers

(not used in Mult-eMediatt v1)

and Dataset D: administrative). Same metadata as in eHealthBox apply.

Additionally, the eH2eBox service requires a metadata key 'project' with corresponding value '**multemediatt**'.

You cannot use the GetMessageAcknowledgmentsStatus method to verify if a message was successfully delivered after publication. The synchronous response is sufficient for this purpose.

#### 5.1.7.2.1 eBox citizen

A message sent to a citizen (=patient) via this channel must always include a human readable document (PDF). The content of this document varies per the situation, but is always in the language of the patient:

1. A DIN for total incapacity to work:

You can find a template for the content in the zip file in annex to this cookbook, either in the folder 'iteration 1' or 'iteration 2/Total incapacity', e.g. iteration 2/Total incapacity/Certificaat\_feedback\_patient\_NL.pdf

In this PDF you can see that the title in this case is

#### **Arbeitsongeschiktheidsattest (Mult-eMediatt-nummer XXXX)**

The XXXX should be replaced by the UID (see UID)

2. In case the DIN for total incapacity needs to be retracted:

You can find the template for the content either in the folder 'iteration 1' or 'iteration 2/Total incapacity', e.g. iteration 1/Annullierung Arbeitsunfähigkeitsbescheinigung – v2

In this example, the title is

#### ***Annullierung einer elektronischen Arbeitsunfähigkeitsbescheinigung Mult-eMediatt, die bereits versendet wurde (Annullierungsmeldung von Mult-eMediatt mit Nummer xxx)***

Where again the XXX should be replaced by the UID.

Attention: in v2 you have to use the template found in the 'iteration 2' folder, and which includes some information that is not present in v1.

3. A DIN for partial incapacity:

You can find a template for the content in the zip file in annex to this cookbook, in the folder 'iteration 2/Partial incapacity (ADA)', e.g. iteration 2/Partial incapacity (ADA)/20230707 Mult-eMediatt feedback patient ADA v1.0 FR.docx

The title is :

#### **Demande de reprise de travail à temps partiel (Mult-eMediatt n° XXXX)**

Where again the XXXX should be replaced by the UID.

4. In case the DIN for partial incapacity needs to be retracted :

You can find a template for the content in the same location.

For more readability, the Mult-eMediatt-number can be put at the bottom of the document.

The filename of the document SHOULD be meaningful to the patient. Our suggestion:



For full incapacity:

NL	"arbeidsongeschiktheid.pdf" "intrekking-arbeidsongeschiktheid.pdf"
FR	"incapacite-de-travail.pdf" "retraction-incapacite-de-travail.pdf"
DE	"Arbeitsunfaehigkeit.pdf" "Annullierungsmeldung-Arbeitsunfaehigkeit.pdf"

For partial incapacity:

NL	"Bevestiging aanvraag deeltijdse arbeidsherneming.pdf" "Annulatie aanvraag deeltijdse arbeidsherneming.pdf"
FR	"Confirmation demande de reprise de travail partielle.pdf" "Annulation de demande de reprise de travail partielle.pdf"
DE	"Bestätigung Antrag auf teilweise Wiederaufnahme der Arbeit.pdf" "Annullierung eines Antrags auf teilweise Wiederaufnahme der Arbeit.pdf"

In general, this document will always list the destinations a DIN was electronically sent to. This must be the list of destinations a message was **successfully** sent to – and hence cannot be created before an answer GetMessageAcknowledgmentsStatus or the synchronous response) is known.

#### 5.1.7.2.2 eBox enterprise

In v2, employers can receive a dataset C (diagnosis forbidden) via their eBox. This message must include both a readable PDF and a KMEHR file the employer can download directly to his backend systems.

The PDF should have the same title as the original document that is sent to the citizen, and the filename should be meaningful.

#### 5.1.7.3 Paper (Dataset A and B)

When the channel equals 'paper', this means the DIN should be printed on paper.

See: <https://www.ehealth.fgov.be/ehealthplatform/nl/service-mult-emediatt> (NL) or <https://www.ehealth.fgov.be/ehealthplatform/fr/service-mult-emediatt> (FR) where you can find a ZIP file with a downloadable example of this certificate (NL – FR – D).

We recommend to print on the certificate the correct name of the organization for which the certificate is intended (e.g. 'NMBS, Infrabel or HR Rail'), and at the bottom of the paper a text for that organization only explaining how and where the patient should send this certificate. All of these texts are available in the ZIP file.

#### RECOMMENDATIONS FOR A SCANNABLE PAPER PRINT MULT-EMEDIATT

- Leave a white margin of at least 1 cm around the page
- For a date: use the format 'dd / mm / yyyy' and as a separator: ' / ' (with a space before and after)
- When a box has to be ticked in the template, a cross ☒ or a full colour box ■ can be used.

#### 5.1.8 UID

Each DIN, retraction or patient summary message MUST include the same unique identifier (UID). This UID makes sure all different messages (DIN, retraction, patient summary message) can be linked to each other. The UID is the message id of type KMEHR-ID. See the KMEHR Header definition<sup>14</sup>.

<sup>14</sup> <https://www.ehealth.fgov.be/standards/kmehr/en/page/header>

### 5.1.9 Business Continuity Plan

The Business Continuity Plan or BCP for this project is meant to be able to print the DIN or the patient summary message on paper and give it to the patient. The patient will have to transfer this physical evidence to the appropriate organizations (ex. employer(s), CIN, ...). The physician should have the possibility to select one of the datasets for each of the DINs to print.

### 5.1.10 WS-I Basic Profile 1.1

Your request must be WS-I compliant (See Chap 2.4 - External Document Ref).

### 5.1.11 Tracing

To use this service, the request SHOULD contain the following two http header values (see RFC <https://datatracker.ietf.org/doc/html/rfc7231#section-5.5.3>):

1. User-Agent: information identifying the software product and underlying technical stack/platform. It MUST include the minimal identification information of the software such that the emergency contact (see below) can uniquely identify the component.
  - a. Pattern: {minimal software information}/{version} {minimal connector information}/{connector-package-version}
  - b. Regular expression for each subset (separated by a space) of the pattern: `[[a-zA-Z0-9-\\V]*\\V[0-9azA-Z-_.]*`
  - c. Examples:  
User-Agent: myProduct/62.310.4 Technical/3.19.0  
User-Agent: Topaz-XXXX/123.23.X freeconnector/XXXXX.XXX
2. From: email-address that can be used for emergency contact in case of an operational problem.  
Examples:  
From: [info@mycompany.be](mailto:info@mycompany.be)



## 6. Risks and security

### 6.1 Risks & safety

- *Each implementation of this project should be GDPR compliant.*
- *Each implementation of this project should respect the guidelines of the different used base services as specified on the eHealth portal.*
- *Each GP MUST be properly authenticated and authorised before starting the Mult-eMediAtt flow.*
- *All specifications in this document MUST be respected.*

### 6.2 Security

#### 6.2.1 Business security

In case the development adds a use case based on an existing integration, the eHealth platform must be informed at least one month in advance. A detailed estimate of the expected load is required to ensure effective capacity management.

In case of technical issues with the WS, the partner can obtain support from the contact center. (see Chap 3)

**If the eHealth platform discovers a bug or vulnerability in its software, the partner must update his application to the latest version of the software, within ten (10) business days.**

**Should the partner discover a bug or vulnerability in the software or web service provided by the eHealth platform, he is obligated to immediately contact and inform us. Under no circumstances is he permitted to disclose this bug or vulnerability.**

#### 6.2.2 Web service

WS security used in this manner, is in accordance with the common standards. Your call will provide:

- SSL one way
- Time-to-live of the message: one minute.
- Signature of the timestamp, body and binary security token, which allows the eHealth platform to verify the integrity of the message and the identity of the message author.
- No encryption on the SOAP message.

#### 6.2.3 The use of username, password and token

The username, password, and token are strictly personal.

Each user takes care of his username, password and token, and must keep them confidential.

Transferring these credentials to partners and clients is prohibited.

Until inactivation, every user is responsible for every use, including usage by a third party.



## 7. Test Procedures

This chapter explains the procedures for testing and releasing an application in acceptance or production.

### 7.1 Initiation

If you intend to use the eHealth platform service, please contact [info@ehealth.fgov.be](mailto:info@ehealth.fgov.be). The project department will provide you with the necessary information and mandatory documents.

### 7.2 Development and test procedure

You have to develop a client in order to connect to our WS. You can find most of the required integration info in the technical library on the portal of the eHealth platform.

Upon request, the eHealth platform provides you in some cases with test cases in order for you to test your client before releasing in the acceptance environment.

### 7.3 Release procedure

When development tests are successful, you can request to access the acceptance environment of the eHealth platform. From this moment, you start the integration and acceptance tests. Minilabs will be organized for this project. The specific timing of the minilabs can be obtained by contacting [info@ehealth.fgov.be](mailto:info@ehealth.fgov.be).

After successful minilabs, the eHealth platform and the partner agree on a release date. The eHealth platform prepares the connection to the production environment and provides the partner with the necessary information. During the release day, the partner provides the eHealth platform with feedback on the tests.

For further information and instructions, please contact: [info@ehealth.fgov.be](mailto:info@ehealth.fgov.be).

### 7.4 Operational follow-up

Once in production, the partner using the eHealth platform service for one of his applications will always test first in the acceptance environment, before releasing any adaptations of his application in production. In addition, he will inform the eHealth platform on the progress and test period.

### 7.5 Test cases

The eHealth platform recommends performing tests for at least all of the following cases (non-exhaustive list):

- Test case for each dataset
- Sending multiple DIN to different destinations.
- Sending the human readable DIN to the eBox of a citizen
- Sending the KMEHR message to an eHBox
- Printing of DIN or citizen summary
- Correct PDF visualisation
- Retraction of DIN with the correct UID
- Try sending an invalid KMEHR message: your Schematron validation should prevent this.
- For v2: try sending a dataset C with diagnostic. Your Schematron validation should prevent this.
- Try sending an invalid dataset
- eHealth service down -> BCP



- One or more failures of DIN delivery
- Failure of citizen summary

See also the 'Mult-eMediAtt test scenarios' document, which can be requested at [\*\*integration-support@ehealth.fgov.be\*\*](mailto:integration-support@ehealth.fgov.be)



## 8. Annex

Header and other generic information are stripped from the examples for easy reading.

### 8.1 Example: Routing information request

```
<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:urn="urn:oasis:names:tc:SAML:2.0:protocol" xmlns:urn1="urn:oasis:names:tc:SAML:2.0:assertion"
xmlns:xd="http://www.w3.org/2000/09/xmldsig#" xmlns:xe="http://www.w3.org/2001/04/xmlenc#">
<soapenv:Header>[stripped]</soapenv:Header>
<soapenv:Body wsu:Id="id-5CBFD6D9C2311ED51E1641890499543491" xmlns:wsu="http://docs.oasis-
open.org/wss/2004/01/oasis-200401-wss-wssecurity-utility-1.0.xsd">
  <urn:AttributeQuery Consent="urn:oasis:names:tc:SAML:2.0:consent:current-implicit" ID="DAAS_60dd93e2-
4ec5-4c3c-84ae-feae0bd1ea97" IssueInstant="2022-01-11T08:42:39.521Z" Version="2.0">
    <urn1:Issuer Format="urn:oasis:names:tc:SAML:2.0:nameid-format:entity">
urn:be:fgov:ehealth:1.0:hospital:nihii-number: 71089914</urn1:Issuer>
    <urn1:Subject>
      <urn1:NameID Format="urn:oasis:names:tc:SAML:2.0:nameid-
format:transient">252537746688268268547539284732423894</urn1:NameID>
      <urn1:SubjectConfirmation Method="urn:oasis:names:tc:SAML:2.0:cm:sender-vouches">
        <urn1:SubjectConfirmationData NotBefore="2022-01-11T08:41:39.527Z" NotOnOrAfter="2022-01-
11T08:43:39.543Z"/>
      </urn1:SubjectConfirmation>
    </urn1:Subject>
    <urn1:Attribute Name="urn:be:fgov:ehealth:1.0:service-name"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:uri">
      <urn1:AttributeValue>urn:be:fgov:ehealth:admin:simplification:multemediatt</urn1:AttributeValue>
    </urn1:Attribute>
    <urn1:Attribute Name="urn:be:fgov:person:ssin:multemediatt:routing"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:uri"/>
    <urn1:Attribute Name="urn:be:fgov:person:ssin" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-
format:uri">
      <urn1:AttributeValue>xxxxxxxxxx</urn1:AttributeValue>
    </urn1:Attribute>
    <urn1:Attribute Name="urn:be:fgov:person:ssin:birthdate"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:uri">
      <urn1:AttributeValue>11/11/1990</urn1:AttributeValue>
    </urn1:Attribute>
    <urn1:Attribute Name="urn:be:fgov:person:ssin:incapacity:prolongation"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:uri">
      <urn1:AttributeValue>true</urn1:AttributeValue>
    </urn1:Attribute>
    <urn1:Attribute Name="urn:be:fgov:person:ssin:incapacity:totalincapacity"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:uri">
      <urn1:AttributeValue>true</urn1:AttributeValue>
    </urn1:Attribute>
    <urn1:Attribute Name="urn:be:fgov:person:ssin:incapacity:cause"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:uri">
      <urn1:AttributeValue>workaccident</urn1:AttributeValue>
    </urn1:Attribute>
  </urn:AttributeQuery>
</soapenv:Body>
</soapenv:Envelope>
```

## 8.2 Example: Routing information response v1

```
<?xml version="1.0" encoding="utf-8"?>
<SOAP-ENV:Envelope xmlns:SOAP-ENV="http://schemas.xmlsoap.org/soap/envelope/">
  <SOAP-ENV:Header/>
  <SOAP-ENV:Body>
    <saml2p:Response ID="_84c358ced309669ab8dfc58ea0fb01aa" InResponseTo="DAAS_d140852c-5224-45f4-
bf84-ba91358fff45" IssueInstant="2022-01-11T08:45:01.753Z" Version="2.0">
      <saml2:Issuer >urn:be:fgov:health:daas</saml2:Issuer>
      <saml2p:Status>
        <saml2p:StatusCode Value="urn:oasis:names:tc:SAML:2.0:status:Success"/>
      </saml2p:Status>
      <saml2:Assertion xmlns:xs="http://www.w3.org/2001/XMLSchema"
xmlns:xsd="http://www.w3.org/2001/XMLSchema" ID="_de4f3572754a146df8047aa86d26ab28"
IssueInstant="2022-01-11T08:45:01.753Z" Version="2.0">
        <saml2:Issuer >urn:be:fgov:health:daas</saml2:Issuer>
        <ds:Signature xmlns:ds="http://www.w3.org/2000/09/xmldsig#">[stripped]</ds:Signature>
        <saml2:Subject >
          <saml2:NameID Format="urn:oasis:names:tc:SAML:2.0:nameid-
format:transient">252537746688268268547539284732423894</saml2:NameID>
          <saml2:SubjectConfirmation Method="urn:oasis:names:tc:SAML:2.0:cm:sender-vouches">
            <saml2:SubjectConfirmationData InResponseTo="DAAS_d140852c-5224-45f4-bf84-ba91358fff45"
NotBefore="2022-01-11T08:44:58.195Z" NotOnOrAfter="2022-01-11T08:46:58.210Z"/>
          </saml2:SubjectConfirmation>
        </saml2:Subject>
        <saml2:Conditions NotBefore="2022-01-11T08:45:01.753Z" NotOnOrAfter="2022-01-11T08:50:01.753Z"/>
        <saml2:AttributeStatement >
          <urn1:Attribute Name="urn:be:fgov:person:ssin:incapacity:prolongation">
            <urn1:AttributeValue >true</urn1:AttributeValue>
          </urn1:Attribute>
          <urn1:Attribute Name="urn:be:fgov:person:ssin:birthdate">
            <urn1:AttributeValue >11/11/1990</urn1:AttributeValue>
          </urn1:Attribute>
          <Attribute Name="urn:be:fgov:person:ssin:multemediatt:routing">
            <AttributeValue>
              <daas:RoutingInformation>
                <daas:Destinations>
                  <daas:Destination Channel="ehBox paper" Dataset="a">
                    <daas:Id>0820563481</daas:Id>
                    <daas:Type>CBE</daas:Type>
                    <daas:Quality>INSTITUTION</daas:Quality>
                    <daas:Name xml:lang="nl">Nationaal Intermutualistisch College</daas:Name>
                    <daas:Name xml:lang="fr">Collège Intermutualiste National</daas:Name>
                  </daas:Destination>
                  <daas:Destination Channel="ehBox paper" Dataset="a">
                    <daas:Quality>INSTITUTION</daas:Quality>
                    <daas:Id>0825801184</daas:Id>
                    <daas:Type>CBE</daas:Type>
                    <ns2:Name xml:lang="nl">Vereniging X</ns2:Name>
                    <ns2:Name xml:lang="fr">Association X</ns2:Name>
                    <ns2:Name xml:lang="de">Verband X</ns2:Name>
                  </daas:Destination>
                  <daas:Destination Channel="ehBox paper" Dataset="a">
                    <daas:Quality>INSTITUTION</daas:Quality>
                    <daas:Id>0825801184</daas:Id>
```





```

<daas:Type>CBE</daas:Type>
<ns2:Name xml:lang="nl">Vereniging X</ns2:Name>
<ns2:Name xml:lang="fr">Association X</ns2:Name>
<ns2:Name xml:lang="de">Verband X</ns2:Name>
</daas:Destination>
<daas:Destination Channel="paper" Dataset="d"/>
</daas:Destinations>
<daas:Context>
<Attribute Name="urn:be:fgov:person:ssin:ehealth:1.0:indemnitybeneficiary:boolean">
<AttributeValue>true</AttributeValue>
</Attribute>
<Attribute Name="urn:be:fgov:person:ssin:ehealth:1.0:directory:relationship">
<AttributeValue xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance"
xmlns:xsd="http://www.w3.org/2001/XMLSchema" xsi:type="xsd:anyType">
<ns2:Actor OptionEnumeration="routing" Type="MedicalServiceIncapacityWork">
<ns2:Id Type="CBE">0825801184</ns2:Id>
<ns2:Name xml:lang="nl">Vereniging X</ns2:Name>
<ns2:Name xml:lang="fr">Association X</ns2:Name>
<ns2:Name xml:lang="de">Verband X</ns2:Name>
<ns2:Period xmlns:ns2="urn:be:fgov:ehealth:daas:complexttype:v1">
<StartDate>1970-01-01+01:00</StartDate>
</ns2:Period>
<ns2:Actor OptionEnumeration="routing" Type="Employer">
<ns2:Id Type="CBE">0206735308</ns2:Id>
<ns2:Name xml:lang="nl">Employer 1</ns2:Name>
<ns2:Name xml:lang="fr">Employer 1</ns2:Name>
<ns2:Name xml:lang="de">Employer 1</ns2:Name>
<ns2:Period xmlns:ns2="urn:be:fgov:ehealth:daas:complexttype:v1">
<StartDate>1920-01-01+01:00</StartDate>
</ns2:Period>
<ns2:Actor OptionEnumeration="noRouting" Type="Employee">
<ns2:Id Type="SSIN">xxxxxxxxxxx</ns2:Id>
<ns2:FirstName xmlns:xs="http://www.w3.org/2001/XMLSchema"
xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance" xsi:type="xs:string">Jan</ns2:FirstName>
<ns2:LastName xmlns:xs="http://www.w3.org/2001/XMLSchema"
xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance" xsi:type="xs:string">Denul</ns2:LastName>
</ns2:Actor>
</ns2:Actor>
</ns2:Actor>
</AttributeValue>
<AttributeValue xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance"
xmlns:xsd="http://www.w3.org/2001/XMLSchema" xsi:type="xsd:anyType">
<ns2:Actor OptionEnumeration="routing" Type="MedicalServiceIncapacityWork">
<ns2:Id Type="CBE">0825801184</ns2:Id>
<ns2:Name xml:lang="nl">Vereniging X</ns2:Name>
<ns2:Name xml:lang="fr">Association X</ns2:Name>
<ns2:Name xml:lang="de">Verband X</ns2:Name>
<ns2:Period xmlns:ns2="urn:be:fgov:ehealth:daas:complexttype:v1">
<StartDate>2000-01-01+01:00</StartDate>
</ns2:Period>
<ns2:Actor OptionEnumeration="routing" Type="Employer">
<ns2:Id Type="CBE">0206735308</ns2:Id>
<ns2:Name xml:lang="nl">Employer 1</ns2:Name>
<ns2:Name xml:lang="fr">Employer 1</ns2:Name>
<ns2:Name xml:lang="de">Employer 1</ns2:Name>

```

```

    <ns2:Period xmlns:ns2="urn:be:fgov:health:daas:complextype:v1">
      <StartDate>1920-01-01+01:00</StartDate>
    </ns2:Period>
    <ns2:Actor OptionEnumeration="noRouting" Type="Employee">
      <ns2:Id Type="SSIN">xxxxxxxxxx</ns2:Id>
      <ns2:FirstName xmlns:xs="http://www.w3.org/2001/XMLSchema"
xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance" xsi:type="xs:string">Jan</ns2:FirstName>
      <ns2:LastName xmlns:xs="http://www.w3.org/2001/XMLSchema"
xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance" xsi:type="xs:string">Denul</ns2:LastName>
    </ns2:Actor>
  </ns2:Actor>
</ns2:Actor>
</AttributeValue>
</Attribute>
<Attribute Name="urn:be:fgov:person:ssin:rszonss:ebox:citizen:active:boolean">
  <AttributeValue>>false</AttributeValue>
</Attribute>
</daas:Context>
</daas:RoutingInformation>
</AttributeValue>
</Attribute>
<urn1:Attribute Name="urn:be:fgov:person:ssin:incapacity:cause">
  <urn1:AttributeValue >workaccident</urn1:AttributeValue>
</urn1:Attribute>
<urn1:Attribute Name="urn:be:fgov:person:ssin:incapacity:totalincapacity">
  <urn1:AttributeValue >true</urn1:AttributeValue>
</urn1:Attribute>
<urn1:Attribute Name="urn:be:fgov:person:ssin">
  <urn1:AttributeValue >xxxxxxxxxx</urn1:AttributeValue>
</urn1:Attribute>
<urn1:Attribute Name="urn:be:fgov:health:1.0:service-name">
  <urn1:AttributeValue >urn:be:fgov:health:admin:simplification:multemediatt</urn1:AttributeValue>
</urn1:Attribute>
</saml2:AttributeStatement>
</saml2:Assertion>
</saml2p:Response>
</SOAP-ENV:Body>
</SOAP-ENV:Envelope>

```

### 8.3 Example: Routing information response v2

```

<SOAP-ENV:Envelope xmlns:SOAP-ENV="http://schemas.xmlsoap.org/soap/envelope/">
  <SOAP-ENV:Header/>
  <SOAP-ENV:Body>
    <saml2p:Response ID="_d2f2c5da4093404f6e9172ce4ebacc49" InResponseTo="_62acc8ce-67da-43e2-
a808-1a236a5a395e" IssueInstant="2023-07-05T14:58:44.553Z" Version="2.0"
xmlns:saml2p="urn:oasis:names:tc:SAML:2.0:protocol">
      <saml2:Issuer
xmlns:saml2="urn:oasis:names:tc:SAML:2.0:assertion">urn:be:fgov:health:daas</saml2:Issuer>
      <saml2p:Status>
        <saml2p:StatusCode Value="urn:oasis:names:tc:SAML:2.0:status:Success"/>
      </saml2p:Status>

```



```

<saml2:Assertion ID="_608f1ab5ce1fc52b9326af50f2d5e143" IssueInstant="2023-07-05T14:58:44.553Z"
Version="2.0" xmlns:saml2="urn:oasis:names:tc:SAML:2.0:assertion"
xmlns:xsd="http://www.w3.org/2001/XMLSchema">
  <saml2:Issuer>urn:be:fgov:health:daas</saml2:Issuer>
  <ds:Signature xmlns:ds="http://www.w3.org/2000/09/xmldsig#">[stripped]
</ds:Signature>
  <saml2:Subject>
    <saml2:NameID Format="urn:oasis:names:tc:SAML:2.0:nameid-
format:transient">_15a8a419693caca406e17a963f4903c4</saml2:NameID>
    <saml2:SubjectConfirmation Method="urn:oasis:names:tc:SAML:2.0:cm:sender-vouches">
      <saml2:SubjectConfirmationData InResponseTo="_62acc8ce-67da-43e2-a808-1a236a5a395e"
NotBefore="2023-07-05T14:28:42.051Z" NotOnOrAfter="2023-07-05T15:28:42.082Z"/>
    </saml2:SubjectConfirmation>
  </saml2:Subject>
  <saml2:Conditions NotBefore="2023-07-05T14:58:44.553Z" NotOnOrAfter="2023-07-
05T15:03:44.553Z"/>
  <saml2:AttributeStatement>
    <urn1:Attribute Name="urn:be:fgov:person:ssin:incapacity:prolongation"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:uri"
xmlns:urn1="urn:oasis:names:tc:SAML:2.0:assertion">
      <urn1:AttributeValue>>false</urn1:AttributeValue>
    </urn1:Attribute>
    <urn1:Attribute Name="urn:be:fgov:person:ssin:birthdate"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:uri"
xmlns:urn1="urn:oasis:names:tc:SAML:2.0:assertion">
      <urn1:AttributeValue>10/03/2001</urn1:AttributeValue>
    </urn1:Attribute>
    <urn1:Attribute Name="urn:be:fgov:person:ssin:incapacity:cause"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:uri"
xmlns:urn1="urn:oasis:names:tc:SAML:2.0:assertion">
      <urn1:AttributeValue>illness</urn1:AttributeValue>
    </urn1:Attribute>
    <urn1:Attribute Name="urn:be:fgov:person:ssin:incapacity:totalincapacity"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:uri"
xmlns:urn1="urn:oasis:names:tc:SAML:2.0:assertion">
      <urn1:AttributeValue>>true</urn1:AttributeValue>
    </urn1:Attribute>
    <urn1:Attribute Name="urn:be:fgov:person:ssin"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:uri"
xmlns:urn1="urn:oasis:names:tc:SAML:2.0:assertion">
      <urn1:AttributeValue>01031004319</urn1:AttributeValue>
    </urn1:Attribute>
    <urn1:Attribute Name="urn:be:fgov:health:1.0:service-name"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:uri"
xmlns:urn1="urn:oasis:names:tc:SAML:2.0:assertion">
      <urn1:AttributeValue>urn:be:fgov:health:admin:simplification:multemediatt</urn1:AttributeValue>
    </urn1:Attribute>

```

```

<Attribute Name="urn:be:fgov:person:ssin:ehealth:2.0:multemediatt:routing"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:uri"
xmlns="urn:oasis:names:tc:SAML:2.0:assertion">
  <AttributeValue>
    <daas:RoutingInformation xmlns:daas="urn:be:fgov:ehealth:daas:complextypes:v2">
      <daas:Destinations>
        <daas:Destination Channel="paper" Dataset="a">
          <daas:Id>0820563481</daas:Id>
          <daas:Type>CBE</daas:Type>
          <daas:Quality>INSTITUTION</daas:Quality>
          <daas:Name xml:lang="nl">Nationaal Intermutualistisch College</daas:Name>
          <daas:Name xml:lang="fr">Collège Intermutualiste National</daas:Name>
        </daas:Destination>
        <daas:Destination Channel="ehBox paper" Dataset="a">
          <daas:Id>0825801184</daas:Id>
          <daas:Type>CBE</daas:Type>
          <daas:Quality>INSTITUTION</daas:Quality>
          <Name xml:lang="nl" xmlns="urn:be:fgov:ehealth:daas:complextypes:v2"
xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance">Vereniging X</Name>
          <Name xml:lang="fr" xmlns="urn:be:fgov:ehealth:daas:complextypes:v2"
xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance">Association X</Name>
          <Name xml:lang="de" xmlns="urn:be:fgov:ehealth:daas:complextypes:v2"
xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance">Verband X</Name>
        </daas:Destination>
        <daas:Destination Channel="ehBox paper" Dataset="b">
          <daas:Id>0409671085</daas:Id>
          <daas:Type>CBE</daas:Type>
          <daas:Quality>INSTITUTION</daas:Quality>
          <Name xml:lang="nl" xmlns="urn:be:fgov:ehealth:daas:complextypes:v2"
xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance">CERTIMED</Name>
          <Name xml:lang="fr" xmlns="urn:be:fgov:ehealth:daas:complextypes:v2"
xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance">CERTIMED</Name>
        </daas:Destination>
        <daas:Destination Channel="eBox paper" Dataset="c">
          <daas:Id>0850001003</daas:Id>
          <daas:Type>CBE</daas:Type>
          <daas:Quality>INSTITUTION</daas:Quality>
          <Name xml:lang="nl" xmlns="urn:be:fgov:ehealth:daas:complextypes:v2"
xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance">Soc 1</Name>
          <Name xml:lang="fr" xmlns="urn:be:fgov:ehealth:daas:complextypes:v2"
xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance">Soc 1</Name>
        </daas:Destination>
        <daas:Destination Channel="paper" Dataset="d"/>
      </daas:Destinations>
    </daas:Context>
  </AttributeValue>
</Attribute>

```

```

    <Attribute Name="urn:be:fgov:person:ssin:ehealth:2.0:directory:relationship"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:uri"/>
    <Attribute Name="urn:be:fgov:kbo-bce:organization:cbe-
number:ehealth:2.0:directory:relationship" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:uri">
        <AttributeValue xsi:type="xsd:anyType" xmlns:xsi="http://www.w3.org/2001/XMLSchema-
instance">
            <Actor OptionEnumeration="routing" Type="MedicalServiceIncapacityWork"
xmlns="urn:be:fgov:ehealth:daas:complextyp:v2">
                <Id Type="CBE">0825801184</Id>
                <Name xml:lang="nl">Vereniging X</Name>
                <Name xml:lang="fr">Association X</Name>
                <Name xml:lang="de">Verband X</Name>
                <Period>
                    <StartDate>2018-07-05+02:00</StartDate>
                </Period>
                <Actor OptionEnumeration="noRouting" Type="Employer">
                    <Id Type="CBE">0800002352</Id>
                    <Name xml:lang="nl">xxx</Name>
                    <Name xml:lang="fr">xxx</Name>
                </Actor>
                <ApplicationId>TEST_APP_ID</ApplicationId>
            </Actor>
        </AttributeValue>
        <AttributeValue xsi:type="xsd:anyType" xmlns:xsi="http://www.w3.org/2001/XMLSchema-
instance">
            <Actor OptionEnumeration="routing" Type="MedicalServiceIncapacityWork"
xmlns="urn:be:fgov:ehealth:daas:complextyp:v2">
                <Id Type="CBE">0409671085</Id>
                <Name xml:lang="nl">CERTIMED</Name>
                <Name xml:lang="fr">CERTIMED</Name>
                <Period>
                    <StartDate>2018-07-05+02:00</StartDate>
                </Period>
                <Actor OptionEnumeration="routing" Type="Employer">
                    <Id Type="CBE">0850001003</Id>
                    <Name xml:lang="nl">Soc 1</Name>
                    <Name xml:lang="fr">Soc 1</Name>
                </Actor>
            </Actor>
        </AttributeValue>
    </Attribute>
    <Attribute Name="urn:be:fgov:person:ssin:rszonss:ebox:citizen:active:boolean"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:uri"
xmlns:urn1="urn:oasis:names:tc:SAML:2.0:assertion">
        <AttributeValue>false</AttributeValue>
    </Attribute>

```

```

<Attribute Name="urn:be:fgov:person:ssin:ehealth:2.0:listofemployers">
  <AttributeValue>
    <Actor Type="Employer" xmlns="urn:be:fgov:ehealth:daas:complextypes:v2">
      <Id Type="CBE">0800002352</Id>
      <Name xml:lang="xx">xxx</Name>
      <Actor Type="Employee">
        <Id Type="SSIN">01031004319</Id>
        <Period>
          <StartDate>2023-01-01</StartDate>
        </Period>
      </Actor>
    </Actor>
  </AttributeValue>
  <AttributeValue>
    <Actor Type="Employer" xmlns="urn:be:fgov:ehealth:daas:complextypes:v2">
      <Id Type="CBE">0850001003</Id>
      <Name xml:lang="fr">Soc 1</Name>
      <Actor Type="Employee">
        <Id Type="SSIN">01031004319</Id>
        <Period>
          <StartDate>2023-01-01</StartDate>
        </Period>
      </Actor>
    </Actor>
  </AttributeValue>
</Attribute>
</daas:Context>
</daas:RoutingInformation>
</AttributeValue>
</Attribute>
</saml2:AttributeStatement>
</saml2:Assertion>
</saml2p:Response>
</SOAP-ENV:Body>
</SOAP-ENV:Envelope>

```

## 8.4 Example: Routing information response v2 ADA

```

<SOAP-ENV:Envelope xmlns:SOAP-ENV="http://schemas.xmlsoap.org/soap/envelope/">
  <SOAP-ENV:Header/>
  <SOAP-ENV:Body>
    <saml2p:Response ID="_e4e5b3e4a8bae4eb678598727777de7a" InResponseTo="_511d7a73-7b61-4162-82e5-4a2b97028456" IssueInstant="2023-07-24T14:39:49.761Z" Version="2.0"
      xmlns:saml2p="urn:oasis:names:tc:SAML:2.0:protocol">

```



```

<saml2:Issuer
xmlns:saml2="urn:oasis:names:tc:SAML:2.0:assertion">urn:be:fgov:ehealth:daas</saml2:Issuer>
  <saml2p:Status>
    <saml2p:StatusCode Value="urn:oasis:names:tc:SAML:2.0:status:Success"/>
  </saml2p:Status>
  <saml2:Assertion ID="_d24144a452fe3e6144f5c57c85402058" IssueInstant="2023-07-24T14:39:49.761Z"
Version="2.0" xmlns:saml2="urn:oasis:names:tc:SAML:2.0:assertion"
xmlns:xsd="http://www.w3.org/2001/XMLSchema">
    <saml2:Issuer>urn:be:fgov:ehealth:daas</saml2:Issuer>
    <ds:Signature xmlns:ds="http://www.w3.org/2000/09/xmldsig#">
      [stripped]
    </ds:Signature>
    <saml2:Subject>
      <saml2:NameID Format="urn:oasis:names:tc:SAML:2.0:nameid-
format:transient">_15a8a419693caca406e17a963f4903c4</saml2:NameID>
      <saml2:SubjectConfirmation Method="urn:oasis:names:tc:SAML:2.0:cm:sender-vouches">
        <saml2:SubjectConfirmationData InResponseTo="_511d7a73-7b61-4162-82e5-4a2b97028456"
NotBefore="2023-07-24T14:09:45.187Z" NotOnOrAfter="2023-07-24T15:09:45.200Z"/>
      </saml2:SubjectConfirmation>
    </saml2:Subject>
    <saml2:Conditions NotBefore="2023-07-24T14:39:49.761Z" NotOnOrAfter="2023-07-
24T14:44:49.761Z"/>
    <saml2:AttributeStatement>
      <urn1:Attribute Name="urn:be:fgov:person:ssin:incapacity:prolongation"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:uri"
xmlns:urn1="urn:oasis:names:tc:SAML:2.0:assertion">
        <urn1:AttributeValue>>false</urn1:AttributeValue>
      </urn1:Attribute>
      <urn1:Attribute Name="urn:be:fgov:person:ssin:birthdate"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:uri"
xmlns:urn1="urn:oasis:names:tc:SAML:2.0:assertion">
        <urn1:AttributeValue>10/03/2001</urn1:AttributeValue>
      </urn1:Attribute>
      <urn1:Attribute Name="urn:be:fgov:person:ssin:incapacity:cause"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:uri"
xmlns:urn1="urn:oasis:names:tc:SAML:2.0:assertion">
        <urn1:AttributeValue>illness</urn1:AttributeValue>
      </urn1:Attribute>
      <urn1:Attribute Name="urn:be:fgov:person:ssin:incapacity:totalincapacity"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:uri"
xmlns:urn1="urn:oasis:names:tc:SAML:2.0:assertion">
        <urn1:AttributeValue>>false</urn1:AttributeValue>
      </urn1:Attribute>
      <urn1:Attribute Name="urn:be:fgov:person:ssin"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:uri"
xmlns:urn1="urn:oasis:names:tc:SAML:2.0:assertion">
        <urn1:AttributeValue>01031004319</urn1:AttributeValue>
      </urn1:Attribute>

```

```

    <urn1:Attribute Name="urn:be:fgov:health:1.0:service-name"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:uri"
xmlns:urn1="urn:oasis:names:tc:SAML:2.0:assertion">
    <urn1:AttributeValue>urn:be:fgov:health:admin:simplification:multemediatt</urn1:AttributeValue>
</urn1:Attribute>
    <Attribute Name="urn:be:fgov:person:ssin:health:2.0:multemediatt:routing"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:uri"
xmlns="urn:oasis:names:tc:SAML:2.0:assertion">
    <AttributeValue>
    <daas:RoutingInformation xmlns:daas="urn:be:fgov:health:daas:complextypes:v2">
    <daas:Destinations>
    <daas:Destination Channel="paper" Dataset="a">
    <daas:Id>0820563481</daas:Id>
    <daas:Type>CBE</daas:Type>
    <daas:Quality>INSTITUTION</daas:Quality>
    <daas:Name xml:lang="nl">Nationaal Intermutualistisch College</daas:Name>
    <daas:Name xml:lang="fr">Collège Intermutualiste National</daas:Name>
</daas:Destination>
    <daas:Destination Channel="ehBox paper" Dataset="a">
    <daas:Id>0825801184</daas:Id>
    <daas:Type>CBE</daas:Type>
    <daas:Quality>INSTITUTION</daas:Quality>
    <Name xml:lang="nl" xmlns="urn:be:fgov:health:daas:complextypes:v2"
xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance">Vereniging X</Name>
    <Name xml:lang="fr" xmlns="urn:be:fgov:health:daas:complextypes:v2"
xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance">Vereniging X</Name>
    <Name xml:lang="de" xmlns="urn:be:fgov:health:daas:complextypes:v2"
xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance">Vereniging X</Name>
</daas:Destination>
    <daas:Destination Channel="ehBox paper" Dataset="b">
    <daas:Id>0409671085</daas:Id>
    <daas:Type>CBE</daas:Type>
    <daas:Quality>INSTITUTION</daas:Quality>
    <Name xml:lang="nl" xmlns="urn:be:fgov:health:daas:complextypes:v2"
xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance">CERTIMED</Name>
    <Name xml:lang="fr" xmlns="urn:be:fgov:health:daas:complextypes:v2"
xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance">CERTIMED</Name>
</daas:Destination>
    <daas:Destination Channel="paper" Dataset="d"/>
</daas:Destinations>
    <daas:Context>
    <Attribute Name="urn:be:fgov:person:ssin:health:2.0:directory:relationship"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:uri"/>
    <Attribute Name="urn:be:fgov:kbo-bce:organization:cbe-
number:health:2.0:directory:relationship" NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:uri">
    <AttributeValue xsi:type="xsd:anyType" xmlns:xsi="http://www.w3.org/2001/XMLSchema-
instance">

```



```

    <Actor OptionEnumeration="routing" Type="MedicalServiceIncapacityWork"
xmlns="urn:be:fgov:health:daas:complextypes:v2">
    <Id Type="CBE">0825801184</Id>
    <Name xml:lang="nl">Vereniging X</Name>
    <Name xml:lang="fr">Vereniging X</Name>
    <Name xml:lang="de">Vereniging X</Name>
    <Period>
    <StartDate>2018-07-05+02:00</StartDate>
    </Period>
    <Actor OptionEnumeration="noRouting" Type="Employer">
    <Id Type="CBE">0800002352</Id>
    <Name xml:lang="nl">xxx</Name>
    <Name xml:lang="fr">xxx</Name>
    </Actor>
    <ApplicationId>TEST_APP_ID</ApplicationId>
  </Actor>
</AttributeValue>
<AttributeValue xsi:type="xsd:anyType" xmlns:xsi="http://www.w3.org/2001/XMLSchema-
instance">
    <Actor OptionEnumeration="routing" Type="MedicalServiceIncapacityWork"
xmlns="urn:be:fgov:health:daas:complextypes:v2">
    <Id Type="CBE">0409671085</Id>
    <Name xml:lang="nl">CERTIMED</Name>
    <Name xml:lang="fr">CERTIMED</Name>
    <Period>
    <StartDate>2018-07-05+02:00</StartDate>
    </Period>
    <Actor OptionEnumeration="routing" Type="Employer">
    <Id Type="CBE">0850001003</Id>
    <Name xml:lang="nl">Soc 1</Name>
    <Name xml:lang="fr">Soc 1</Name>
    </Actor>
  </Actor>
</AttributeValue>
</Attribute>
<Attribute Name="urn:be:fgov:person:ssin:rszonss:ebox:citizen:active:boolean"
NameFormat="urn:oasis:names:tc:SAML:2.0:attrname-format:uri"
xmlns:urn1="urn:oasis:names:tc:SAML:2.0:assertion">
    <AttributeValue>false</AttributeValue>
  </Attribute>
<Attribute Name="urn:be:fgov:person:ssin:health:2.0:listofemployers">
  <AttributeValue>
    <Actor Type="Employer" xmlns="urn:be:fgov:health:daas:complextypes:v2">
    <Id Type="CBE">0800002352</Id>
    <Name xml:lang="xx">xxx</Name>

```

```

    <Actor Type="Employee">
      <Id Type="SSIN">01031004319</Id>
      <Period>
        <StartDate>2023-01-01</StartDate>
      </Period>
    </Actor>
  </Actor>
</AttributeValue>
<AttributeValue>
  <Actor Type="Employer" xmlns="urn:be:fgov:health:daas:complextyp:v2">
    <Id Type="CBE">0850001003</Id>
    <Name xml:lang="fr">Soc 1</Name>
    <Actor Type="Employee">
      <Id Type="SSIN">01031004319</Id>
      <Period>
        <StartDate>2023-01-01</StartDate>
      </Period>
    </Actor>
  </Actor>
</AttributeValue>
</Attribute>
</daas:Context>
</daas:RoutingInformation>
</AttributeValue>
</Attribute>
</saml2:AttributeStatement>
</saml2:Assertion>
</saml2p:Response>
</SOAP-ENV:Body>
</SOAP-ENV:Envelope>

```

## 8.5 DIN datasets

### 8.5.1 Dataset A: diagnosis is mandatory

See document Mult-eMediAtt – Cookbook Ann Dataset.

This dataset can only be sent over eHBox, and only contains a KMEHR message

### 8.5.2 Dataset B: diagnosis is optional

See document Mult-eMediAtt – Cookbook Bijlage Dataset.

This dataset can only be sent over eHBox, and only contains a KMEHR message

### 8.5.3 Dataset C: diagnosis forbidden, for employers

(not used in Mult-eMediatt v1)

See document Mult-eMediAtt – Cookbook Ann Dataset



This dataset can be sent to:

- NMBS/Infrabel/HR Rail: eHBox, with a KMEHR message
- Other employers: eBox enterprise containing both a PDF and KMEHR message

#### 8.5.4 Dataset D: administrative

This dataset should include all other electronic destinations where the message was **successfully** sent to. See 5.1.8.1.1.

It is sent to the eBox Citizen, or printed on paper.

### 8.6 Some examples for “Diagnosis”

- For a certificate with 1 diagnostic item, this item can be displayed in the following ways:
  - Only as free text
  - Only as SNOMED code
  - Only as ICD10 and ICPC2 code
  - Combination of free text and SNOMED code
  - Combination of free text and ICD10 and ICPC2 code
- For a certificate with more than 1 diagnostic item (2 or 3 diagnosis): each diagnosis can be displayed in the following ways:
  - Only as free text
  - Only as SNOMED code
  - As ICD10 and ICPC2 code only
  - Combination of free text and SNOMED code
  - Combination of free text and ICD10 and ICPC2 code

**Example:** a certificate with 2 diagnosis

Diagnostic item 1 = hip fracture (and is referred to as main diagnosis)

Diagnostic item 2 = commotio cerebri

Each diagnostic item can be displayed in the following ways, independently of each other:

- Only as free text
- Only as SNOMED code
- As ICD10 and ICPC2 code only
- Combination of free text and SNOMED code
- Combination of free text and ICD10 and ICPC2 code

**Recommendation for the software supplier** (example):

GP looks up the diagnosis of 'flu'

- It is checked whether 'flu' appears in the GP Refset
  - If yes, the recipient receives the SNOMED CT code for 'flu'
  - If not, the presence of 'flu' in the 3BT thesaurus is checked. In this case, the recipient will receive the ICD10 code and the ICPC2 code of 'flu'.