

Service Level Agreement Basic Service: UPPAD Version 1.2

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eHealth platform

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Service Level Agreement

UPPAD

Between

Service provider

eHealth Platform

Quai de Willebroek, 38

1000 BRUSSELS

To the attention of: the user community

Service customer

User Community

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1. Table of content

1.	Table of content	3
2.	Document management	4
2.1.	Document history	4
2.2.	Document references	4
2.3.	Purpose of the document	4
2.4.	Features	4
2.5.	Validity of the agreement	4
2.6.	Service and maintenance window	4
2.6.1.	Service window	4
2.6.2.	Support Window	5
2.6.3.	Maintenance Windows & Planned Interventions	5
2.6.4.	Unplanned Interventions	5
3.	Service scope	6
3.1.	eHealth service	6
3.1.1.	General	6
3.1.2.	Abbreviations	6
3.2.	Business criticality	7
3.3.	Interdependencies	7
4.	List of service levels	8
5.	Detailed service level per service	9
5.1.	Availability	9
5.2.	Performance	10

2. Document management

2.1. Document history

Version	Date	Author	Description of changes / remarks
2016.01	September 2016	eHealth Service Management	Initial version
1.1	05/09/2018	eHealth Service Management	Correction
1.2	17/09/2025	eHealth Service Management	Update Contact Center

2.2. Document references

ID	Title	Version	Date	Author
	Master Service Agreement	2022.1	12/04/2022	
	Master Service Agreement	7.0	12/09/2025	

2.3. Purpose of the document

The objective of this document is to define the Service Level Agreement for the set of services included in the UPPAD proposed by the eHealth-platform. It defines the minimum level of service offered on the eHealth-platform, and provides eHealth's own understanding of service level offering, its measurement methods and its objectives in the long run.

The purpose of the portal eHealth is to offer a central entry point for dedicated information and access to healthcare related applications.

2.4. Features

The eHealth platform offers its partners a Service for retrieving information stored in CoBRHA to allow the verification and improve the quality of the data provided by the authentic sources.

The UPPAD service offers a consultation service based on the SSIN number of a person. The UPPAD Web Application access is not restricted to health care professional; it is accessible for all people who have personal and/or professional records in the Cobraha database.

A second function of the UPPAD service is developed in order to provide a link to a Third party application that gives it the opportunity to edit and/or to modify records of the CoBRHA database.

2.5. Validity of the agreement

This document is valid as long as UPPAD is part of the eHealth-platform offering services.

Once a year, the levels of service proposed will be reviewed and confirmed for the next year.

2.6. Service and maintenance window

2.6.1. Service window

The time frame during which the eHealth services are offered to the client applications, is defined in terms of days and hours. Standard working days are all days of the year, except during the biannual maintenance periods.

The following table summarises the eHealth service window.

Service Window								
Day of the week (closing days of Service Provider = Sunday)								
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	
00:00 - 24:00								

Legend

Timeslots where the service must be available according to the SLA and where corrective actions will be taken to resolve detected Incidents.

2.6.2. Support Window

Support Window								
	Day of the week (Closing days of Service Provider = Sunday)							
	Monday Tuesday Wednesday Thursday Friday Saturday Sunday							Sunday
70	00:00 - 8:00							
erio	08:00 - 16:30							
Day period	16:30 – 18:00							
Δ	18:00 – 24:00							

Legend
Timeslots for which the eHealth Call Center is available for the End-Users with a second line support for Infrastructure (HW, OS, Middleware and DB)
Timeslots for which the eHealth Call Center is available for the End-Users with a second line support, including Application Support
Timeslots for which the eHealth Call Center is unavailable for the End-Users. The End-User will have the possibility to record a voice message that will be treated on the next Workday.

2.6.3. Maintenance Windows & Planned Interventions

The eHealth platform will strive for limiting as much as possible the impact and duration of the planned interventions. Today, eHealth is committed to make efforts so planned unavailability's do not exceed one to a few hours per year. In case of maintenance requiring support from users, or impacting them, eHealth will notify them at least one week ahead.

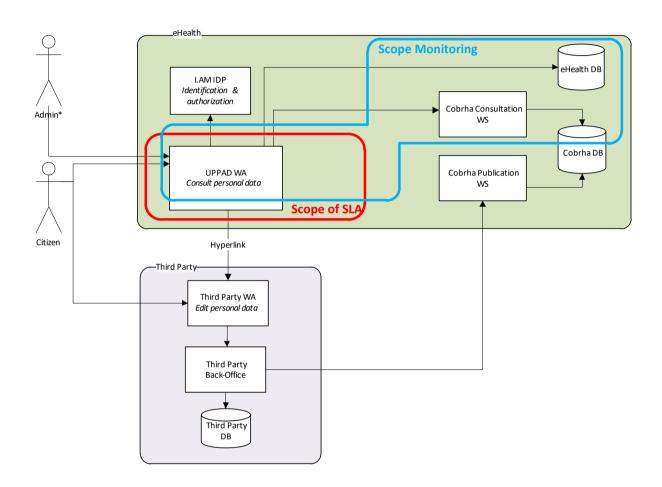
2.6.4. Unplanned Interventions

Under exceptional circumstances, unplanned interventions may be needed in order to restore the service.

3. Service scope

3.1. eHealth service

3.1.1. General



3.1.2. Abbreviations

CoBRHA	Common Base Registry for Healthcare Actor
SSIN	Social Security Inscription Number INSZ Inschrijvingsnummer Sociale Zekerheid NISS Numéro d'inscription Sécurité Sociale
IAM IDP	Identity Access Management – Identity Provider
WA	Web Application
WS	Web Service
UPPAD	Unique Portal for Professional Administrative Data

3.2. Business criticality

The business criticality of the service is **Platinum** as it supports mandatory business processes that should be processed synchronously and within some legal periods.

3.3. Interdependencies

The UPPAD Basic Service depends on the MSA and on the collaboration with the partner.

4. List of service levels

Service	КРІ	SL ID	Condition	Measure based on	Limit	Service Window	Objective Committed	Objective Target
UPPAD	Availability - UPPAD		Test script passes	Fictitious request		Mo – Su 0:00 – 24:00	99,5%	99,9%
	Performance – UPPAD		Response time ≤ 4 sec	Real transactions	Depends on WS CoBRHA Consult	Mo – Su 0:00 – 24:00	95,0¹%	98,0%

<u>Table 1:</u> List of key performance indicators (KPI) per service

¹ Objectives will be reviewed when the usage of the service becomes substantial

5. Detailed service level per service

5.1. Availability

	Objectives								
Definition	 The UPPAD service is considered to be available when the following test is correctly executed: check of the Portal availability, including backend and DB (monitoring page) check of CoBRHA Consultation availability through the Portal monitoring page (on tech BUS) Planned interventions executed within the Maintenance Window are not recorded as unavailable time. 								
Measuring method	 The availability of the different functionalities is measured by executing the test scripts on regular basis. When the script is executed with as result a Status "OK", the test "passed". When the script is executed with an other result, the test "failed" 								
Calculation	Availability = \frac{\sum_{Passed Tests x 100}}{\sum_{Total Tests}} \% Total Tests = Total number of tests launched within corrected timeframe Passed Tests = Total number of tests that resulted in a status "OK" within the same timeframe Corrections are applicable on tests that are not taken into account because they were caused: by a Validated Authentic Source or partner application out of scope of this SLA by a failing monitoring tool								
Reporting and evaluation period	 The availability is calculated and reported monthly. Corrective interventions are initiated when appropriate. The formal evaluation however is done on a yearly basis. 								
Service Level Objectives	Functionality Service Window Service Level Objective								
			Committed	Target					
	UPPAD	Mo – Su 0:00 – 24:00	99,5%	99,9%					

5.2. Performance

Objectives						
Definition	The performance of the eHealth UPPAD Service refers to its response time meaning the time needed to execute a request.					
	Following url is taken into acco	ount:				
	o Myhealthadmin/	home.html				
	Attention: The response time of	loes not include:				
	o The time needed	d to deliver the information	over the Internet			
	o The time needed	d to process the information	at the End Users	premises.		
Measuring method	This response time is measure and stop time (answer sent to					
	Measuring is done on real transactions, and only on those having a "stop time" within the measuring period.					
Calculation	All response times are calculated.	ted: Stop time – Start time f	or every request.			
	The percentage that meets the	target is calculated based	on following formu	ula:		
	$Performanæ = \frac{\sum Tests \ meeting \ the \ target \ x \ 100}{\sum Total \ Tests}\%$					
Reporting and evaluation period	The performance is calculated and reported monthly. Corrective interventions are initiated when appropriate.					
	The formal evaluation however is done on a yearly basis.					
Service Level Objectives	Functionality	Target	Service Lev	el Objective		
			Committed	Target		
	• UPPAD 4 sec 95,02% 98,0%					

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 $^{^{\}rm 2}$ Objectives will be reviewed when the usage of the service becomes substantial