

**C.O.M.B.A.T.**  
Planning & Design  
Subcommittee

**Kickoff Meeting**  
September 22, 2005

## Agenda

- ❑ Introductions
- ❑ Backgrounder
  - ❖ COMBAT Objectives
  - ❖ COMBAT Workflow
  - ❖ Workgroup Support
- ❑ Objectives of the P & D Subcommittee
- ❑ Open Standards
- ❑ Open Source
- ❑ Methods for Accomplishing our Work
- ❑ Artifacts Resulting from Planning & Design
- ❑ Outcomes of Applying the Artifacts
- ❑ The Recommended Architectural Principles
- ❑ Call for Action and Participants



## Introductions

- ❑ John Hardin - SubCommittee Chair
  - ❖ Chief Technology Officer, MedAccessPlus Health Network
  - ❖ Chair, OASIS ebSOA Technical Committee
  - ❖ Former Chief Architect, eBusiness at General Motors
  
- ❑ John Casillas - founder, MBProject
  
- ❑ Tell us about you...

## □ C.O.M.B.A.T. Initiative

### ❖ Historical to present:

- Conceptualized in May 2001 (SOMBEX)
- Active R&D since Sept. 04
- Launched in July 2005

### ❖ Based on:

- Open Source
- Open Standards

### ❖ Focused on delivering:

- A Standards Profile
- A Reference Architecture

### ❖ Business drivers: Real-time administrative & clinical messaging

- Seamless financial processing
- Distribution of electronic medical records via banking system



## Backgrounder 2

- ❑ Very little “new” needs to be invented
- ❑ Leveraging existing standards, packages & protocols:
  - ❖ HIMSS & IHE
  - ❖ OASIS
  - ❖ HL7
  - ❖ HIPAA
  - ❖ SWIFT
  - ❖ XBRL
  - ❖ ACORD
- ❑ Some of the Challenges:
  - ❖ Identity Management and Trust Services are crucial
  - ❖ Only top layers are real-time; not even most players
  - ❖ Industry and Enterprise Registries need to be built
  - ❖ Critical mass adoption isn't here yet

# COMBAT Objectives

- ❑ **Real-time administrative and clinical messaging for healthcare**
  - ❖ A common platform for bank customers - consumers and healthcare providers:
    - HSA administration - the “holy grail” is real time processing
    - Consumer management of HSAs/FSAs/etc., and PHR via online banking portal
    - Remittance management - the oft forgotten loop where high ROI is lost or found
- ❑ **Administrative messaging**
  - ❖ Implement all of the HIPAA transactions in order to support real-time processes
  - ❖ Link processes in standardized “mbXML” profiles and prove out instances in our reference architecture
  - ❖ Publish mbXML profiles for general usage
- ❑ **Clinical messaging**
  - ❖ Implement a reference architecture that aggregates electronic healthcare records on demand by authorized bank customer
    - Consumer requesting his/her own records
    - Authorized doctor requesting records on behalf of patient - connecting physicians that treat the same patient
  - ❖ Federated identity management is core to process
  - ❖ Immaterial where records are stored; need to be accessible for end user presentment
  - ❖ ROI for banks (and healthcare in general)

# COMBAT Workflow

Primary Responsibility	Function	Artifacts / Deliverables
Workgroups	Define industry requirements	Draft White Papers that incorporate potential UML models/use-cases
Steering Committee	Define business requirements	Reduce UML models into specific tasks that will be provided to Planning & Design Subcommittee
Subcommittee: Planning & Design	Define technical requirements	Reduce tasks into open source technical specifications using existing standards whenever/as as possible Design architecture and technical strategy (i.e., adaptation of mbXML profiles into existing banking and healthcare systems) Assist in build-out
Subcommittees: Planning & Design Programming & Testing	Design, build-out and test system	Work with P&D Sub to build reference architecture, mbXML profiles and test the technology Document testing protocols
Subcommittee: Awareness & Education	Publish and disseminate artifacts	Works closely with Secretariat Create learning media to foster adoption Support general marketing and educational development

# Workgroup Support

Workgroup	Administrative Messaging	Clinical Messaging
<p>Workflow Automation Council</p>	<p>Draft a profile that links administrative transactions to create a real time process flow (i.e., submit eligibility, submit claim, adjudication and/or fiscal intermediary discount, return and post remittance.)</p> <p>Recommend potential solutions re: 835/remittance creation, distribution and integration. Create a testing instance for 835 receipt and automated posting that is vendor-neutral.</p>	<p>Draft White Paper showing how banks can become involved in distribution / aggregation of e/pHR.</p>
<p>HIPAA Compliance</p>	<p>WG has already defined scope of HIPAA impact on banks; must now look at the impact of other emerging policy (i.e., FACTA, state regs) as it impacts this market function.</p>	<p>What is the best policy posture re: privacy and security of medical records that can facilitate this market function?</p>
<p>Charity</p>	<p>Draft White Paper showing the business level issues re: charity vs bad debt accounting. How can these principles be incorporated into the reference architecture.</p> <p>Review previous White Paper to design bank-based support system for foundation/charitable funds management.</p>	<p>Implement a program for access to PHR in the community safety net setting. Check with HIPAA Compliance workgroup on policy issues.</p>



# Workgroup Support

Workgroup	Administrative Messaging	Clinical Messaging
Healthcare Credit Practices	<p>Review White Paper on policy issues and provide a course of action.</p> <p>Draft White Paper on potential financial intermediary function; show accounting entries among industry players (XBRL).</p> <p>Draft White Paper related to liquidity scenarios that can result from timely remittance system.</p>	<p>Potential to develop consumer-centric credit plans for paying healthcare balances. Define general formats, potential to market through online portals, etc.</p>
Health Savings Account WG	<p>Define processes that will result in real time adjudication and funds disbursement, including all actors, accounting entries.</p>	<p>Present HSA management tools on online portal with authorized access to personal healthcare records.</p>
Cyberwar	<p>What information flowing through medical banking channels can assist in bio-surveillance? Patterns that can predict terrorist attack?</p> <p>Layering homeland security functions (positive ID, cross-border processing, human trafficking) onto card platform.</p> <p>Charity fronts used to fund terrorism; is there a medical banking model that can help to fight this?</p>	<p>Utilization of medical records to detect fraud and abuse; funneling government healthcare funds to non-authorized / illegal activities.</p>

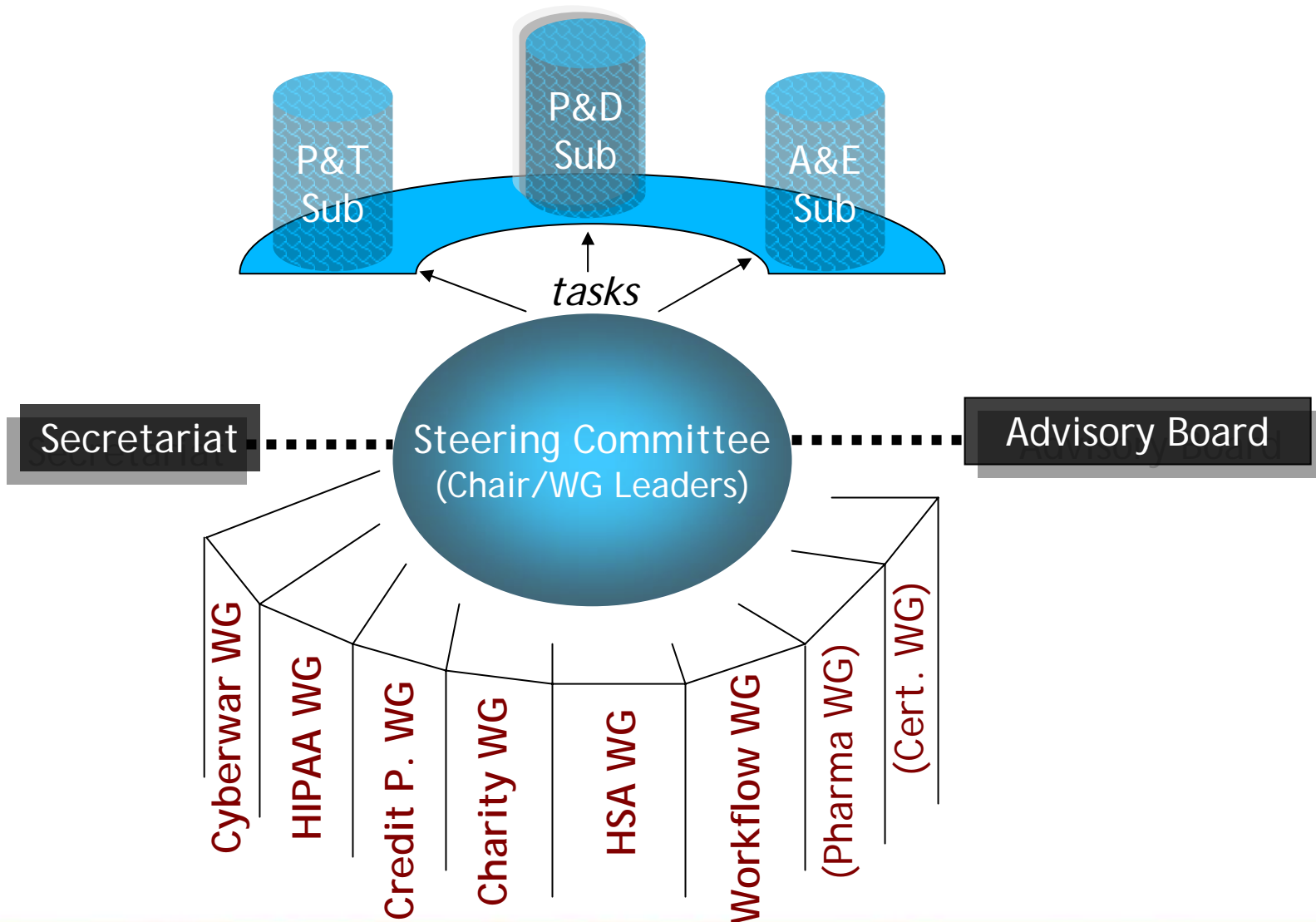


## COMBAT Implementation

Build / Educate

Governance

Requirements



## Objectives of the P&D Sub

- ❑ Define the Infrastructure and Architecture
  - ❖ Open Source to provide abstracted “type of” components
  - ❖ Open Standards to communicate between entities
- ❑ Work with Steering Committee
- ❑ Work with other subcommittees
- ❑ Build the framework *(P&D Sub and P&T Sub)*
- ❑ Test transactions *(P&D Sub and P&T Sub)*
- ❑ Publish findings and recommendations as mbXML *(A&E Sub)*
- ❑ Transfer knowledge regarding the framework to members *(A&E Sub)*

## Open Standards

- ❑ Open Standards allow for vendor neutrality
- ❑ Standards Requirements:
  - ❖ Identity Management
  - ❖ Security Management
  - ❖ Message Transport
  - ❖ Message Payload Formats
  - ❖ Business Process Modeling
  - ❖ Business Process Execution
  - ❖ Business Activity Reporting
- ❑ All these exist, and are stable and mature.
- ❑ We will prove the usage of these together to accomplish Medical Banking.



- ❑ Open Source allows us to specify components while being vendor neutral.
- ❑ Components:
  - ❖ Security
  - ❖ Third party Identity Management may be donated by Covisint as a “blackbox” service
  - ❖ Registry / Repository to store and manage integration artifacts
  - ❖ Registry / Repository to store and manage document locations
  - ❖ Service Binding management
  - ❖ Message handlers
  - ❖ Transformation engine
  - ❖ Business Rule and Business Process management
  - ❖ Database management

- ❑ Work with Steering Committee and Subcommittees
- ❑ Define requirements
- ❑ Define processes
- ❑ Define formats
- ❑ Express these artifacts as:
  - ❖ Use Cases
  - ❖ UML Activity Diagrams
  - ❖ UML Sequence Diagrams if necessary
  - ❖ Integration specs (Schema, etc.)
- ❑ Express these requirements as XML based documents and configuration files for use in the architecture.

## ❑ Take these artifacts:

- ❖ Use Cases
- ❖ UML Activity Diagrams
- ❖ UML Sequence Diagrams if necessary
- ❖ Integration specs (Schema, BPSS, BPEL, etc.)

## ❑ Package them as a Usage Profile called mbXML, a document detailing

- ❖ Audience and Introduction
- ❖ Targeted Functions Description
- ❖ Each component type and message format in the context of:
- ❖ Each business process that satisfies the function
- ❖ All artifacts are to be independent of the software implementation

## ❑ Publish the mbXML Usage Profiles

- ❖ Press releases
- ❖ Liaisons to other groups (HIMSS, OASIS, WS-I etc.)
- ❖ Encourage production implementations

## ❑ Medical Banking Project Implementation

- ❖ Serves as an always-on Test Harness
- ❖ Certification for implementations that pass the testing

## ❑ Permanent Demonstration Implementation

- ❖ Web browser based document storage and review
- ❖ Web browser based explanation of the processes and artifacts
- ❖ Web browser based demonstration



- ❑ Service Oriented Architecture
  
- ❑ Registry-based Integration Framework
  
- ❑ HIMSS IHE Infrastructure Technical Committee components
  
- ❑ Federated Enterprise Reference Architecture (FERA) principles
  - ❖ Created by Semantion, Intel, donated to OASIS
  - ❖ Included as the primary architectural organization principle in ebSOA TC

## Call for Action and Call to Participants

- We need:
  - ❖ Architects
  - ❖ Engineers
  - ❖ SWIFT, XBRL, ACORD, BPSS, BPEL and other open standards expertise
  - ❖ JBOSS, Hermes, MySQL / Postgres and other open source expertise
  - ❖ XML Coders
  - ❖ Java Coders
  
- We will compile our mailing list from those interested.
  
- Speak up now, or contact [evc@mbproject.org](mailto:evc@mbproject.org)