

SOA for health plans

New connections for new business models

A key to healthcare transformation is providing information to improve quality and cost, reduce clinical and administrative waste, improve clinician productivity, inform and empower consumers to make decisions and trigger insights that can lead to innovations. An impediment to this is an inability to integrate technology that enables more efficient and responsive information exchange. Service-oriented architecture (SOA) offers a number of advantages that, when understood by both the business and IT sides of healthcare organizations, can help address any number of evolving business challenges.

Introduction

Organizations worldwide are struggling to deal with the costs, quality and choices related to healthcare services. In response, the healthcare industry is looking for ways to add more value by becoming more patient-focused, more affordable and more accountable – all while sustaining critical services. There are early signs of this transformation. Healthcare organizations are working to redefine how they operate and compete, and consumers are taking on more responsibility for their healthcare – both financially, and in terms of making better health and lifestyle decisions.

Payers – traditionally concerned with covering episodic, acute care services – are focusing more on prevention, chronic condition management and better coordination of healthcare services.

At the heart of successful healthcare transformation is information management. Today, the industry generates data at

unprecedented speed – in volumes that make it increasingly difficult to access, integrate, understand and manage.

The challenge is to facilitate healthcare decisions by delivering the right information in the right format to the right person at the right time – with no compromise in security. Still, today's clinical and administrative data is often spread across organizations and systems – making it difficult and costly to retrieve and share information, and extend functions to dispersed users and geographic regions. We believe that a service-oriented architecture (SOA) approach may be the answer.

The power and flexibility of SOA comes from the use of separate components representing individual business tasks, or services. With SOA, healthcare organizations can quickly combine, build and deploy new services across different systems, platforms and lines of businesses by virtually “plugging in” the new service to their existing infrastructure.

The following three scenarios – discussed in detail in the full version of this paper – illustrate how consumers, healthcare providers and payers can employ SOA to support decision making at the point of care, optimize the enrollment process and improve provider access to eligibility and benefits information.

- Supporting decision making at the point of care. SOA can link systems from healthcare providers and health plans through a single, familiar interface – allowing provider and patient to quickly determine the patient's total liability for a particular medical service. Because information is provided in realtime, calculations are rapid, consistent and up-to-date – reducing the possibility of billing mistakes and conflicts, since all authorized parties act on the same information within a secure, standardized framework.
- Optimizing the enrollment process. Most often, health plan enrollment is a tedious, time-consuming process involving many channels and numerous data formats. SOA can bring together data from various sources – individual and group enrollees, employers, health plans and brokers/agents – in a controlled, consistent manner. This helps lower service and administration costs, reduce manual processes, lessen error rates and accelerate enrollment.



- Improving provider access to eligibility and benefits information. SOA can permit healthcare providers to rapidly access a patient's eligibility and benefits information – easing the burden on provider practices and health plan personnel. Information from health plans is integrated and presented in a context that is familiar to authorized users – through one interface, and with no additional software required.

Conclusion

In each of these scenarios, we believe value is returned to consumers, health plans and healthcare providers – making it a win-win-

win approach. While SOA addresses three different business challenges in healthcare, all have one common denominator: unlocking the value of existing IT assets to support evolving business needs.

By exploiting SOA's capabilities internally, as well as with external entities of all kinds, organizations can forge new connections and support new levels of collaboration and innovation. There is simply no limit to the number of connections and configurations – with benefits that hold promise to reshape not only a business or an industry, but a whole economy – even the global economy.

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How can IBM help?

- **IBM Solutions:** Each scenario in this paper relates to one or more different solutions.
 1. Supporting patient-provider decision-making at the point-of-care
 - Healthcare Payer transformation: Core Systems Modernization
 - Healthcare Payer transformation: Integrated Enterprise information Management
 - Accumulators, software and services
 2. Optimizing the health-plan enrollment process
 - Healthcare Payer transformation: Core Systems Modernization
 - Enroll-to-file, software and services
 3. Improving provider access to eligibility and benefits information
 - Healthcare Payer transformation: Core Systems Modernization
 - Eligibility, software and services
- **Application Services Offerings:**
 - Application Development
 - Business Application Modernization
 - Complex Systems Integration
 - Enterprise Architecture & Technology
 - SOA Strategy & Transformation
 - SOA Design, Development and Integration Services
- **IBM Health Integration Framework, providing context to business applications and IT infrastructure components.**

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