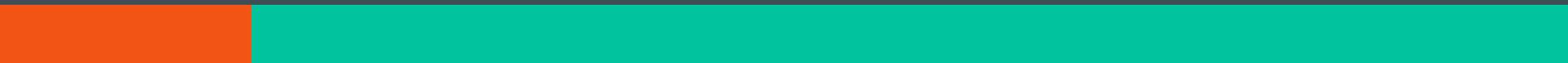


HEALTH CARE REFERENCE MODEL WORKSHOP DECEMBER 5, 2017



Chalon Mullins - Kaiser Permanente

Matt Edwards - Independence Blue Cross

AGENDA

| | |
|---------------------|---|
| 09:15 am - 10:00 am | Healthcare Workshop: Agenda Review & Logistics |
| | Session Chair: Chalon Mullins, Matt Edwards This session will provide background on the reference model work done in the healthcare provider and insurance (payer) reference model teams, and how this work can be leveraged to provide an integrated healthcare delivery from a provider / payer perspective. |
| 10:00 am - 10:20 am | Morning Refreshment Break |
| 10:20 am - Noon | Breakout Session – Ecosystem Alignment via Capabilities |
| | Breakout teams will identify and refine capabilities that represent an integrated perspective of the payer and provider sides of the healthcare industry. Each breakout team will work with a given capability or capabilities to focus on payer and provider views and determine best perspectives for leveraging these integrated perspectives for ecosystem alignment. |
| Noon - 1:00 pm | Lunch |
| | Breakout Session Topic |
| 1:00 pm – 1:40 pm | All Group Recap and Value Stream Walkthrough |
| | This session will review the morning's capability alignment work on integrated care delivery and gain feedback and identify follow-up activities based on results. |
| 1:40 – 2:40 pm | Breakout Session – Ecosystem Alignment via Value Streams |
| | Breakout teams will identify and refine value streams that represent an integrated perspective of the payer and provider sides of the healthcare industry. Each breakout team will work with a selected value stream to focus on payer and provider views and determine best perspectives for leveraging these integrated perspectives for ecosystem alignment. |
| 2:40 pm - 3:00 pm | Afternoon Refreshment Break |
| 3:00 pm - 4:00 pm | Breakout Session – Ecosystem Alignment via Cross-Mapping |
| | Breakout teams will take their assigned value stream and selectively identify enabling capabilities and, where possible participating stakeholders. The teams will prepare their results for group review. |
| 4:00 pm - 5:15 pm | Mapping Results Walkthrough and Discussion |
| | Each breakout team will present and gain feedback on the afternoon's results. In addition, the workshop assembly will collectively identify action plans as to how to move these efforts forward post-workshop. |

WORKSHOP OBJECTIVES

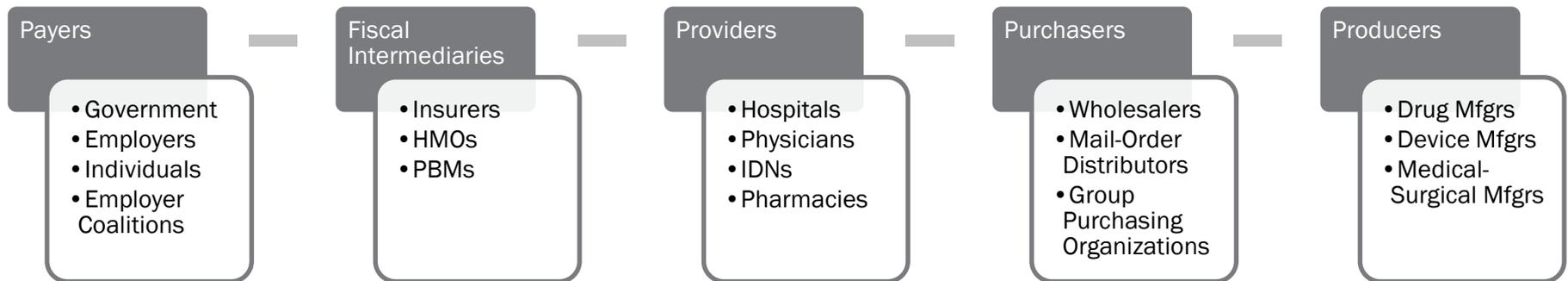


- **Develop reference model to support the health care ecosystem**
 - Adapt reference models for health care provider and insurance to support companies with integrated care models
- **Rationalize provider and insurance models**
 - Identify gaps
 - Rationalize duplication
 - Verify factoring
- **Assess uniqueness of insurance in health care markets**
 - Are there any capabilities or even value streams unique to insurance in health care

HEALTHCARE VALUE CHAIN



Wharton / Porter



citation

TERMINOLOGY



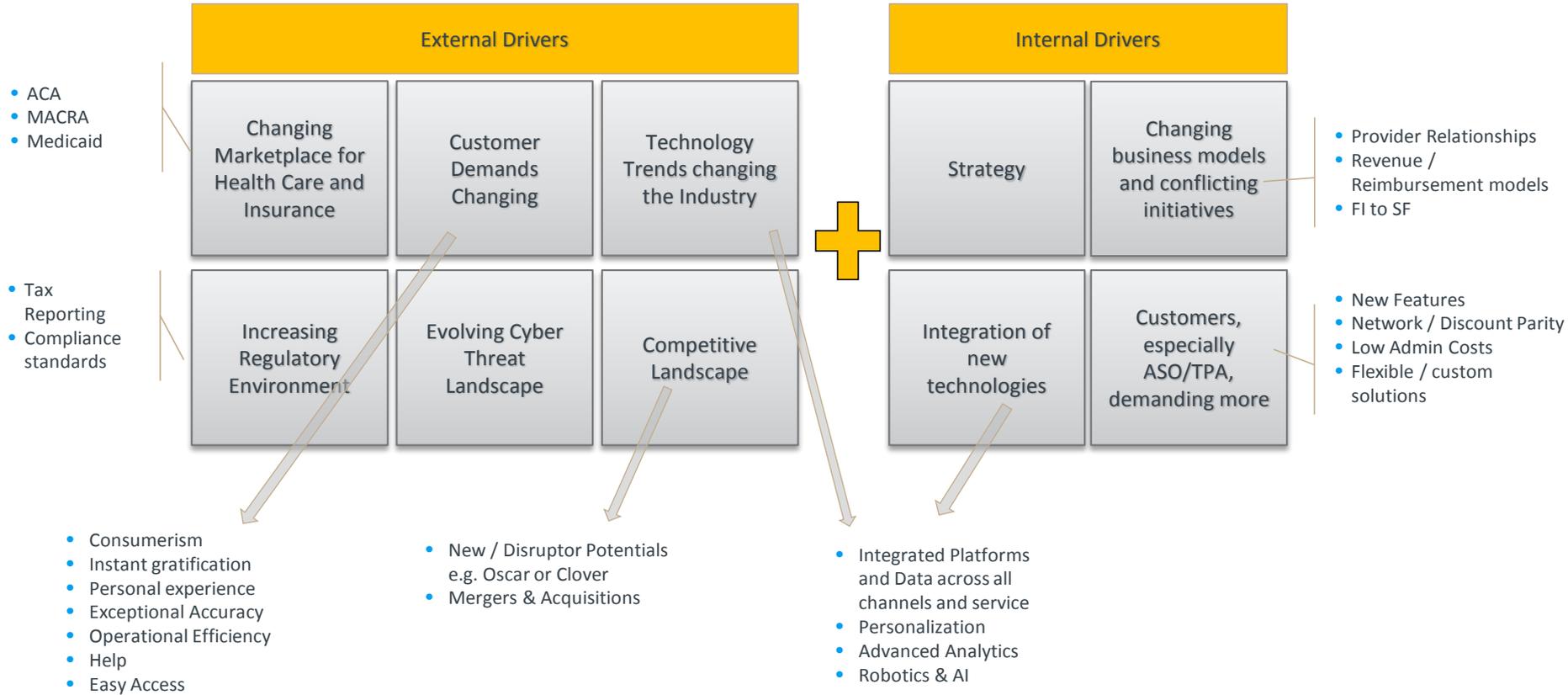
- **PAYER:** any party a provider may bill for health care related services
- **MEMBER:** any party covered by a health care insurance plan
- **PATIENT:** any party seeking medical care

HEALTH CARE ECOSYSTEM



- In this workshop we are
- In the context of this workshop, the health care ecosystem refers to the Payer and Provider segments of the Health Care Value Chain
- In the context of this ecosystem, companies may play following roles
 - Solely Provider, with integration with/interface to payers
 - Solely Insurance, with integration with/interface to provider
 - Integrated care, providing both insurance and care delivery capabilities

LANDSCAPE



HEALTH CARE REFERENCE MODEL



Strategic

| | | | | |
|-------------------|-----------------------|---------------------|----------------------------------|---------------------|
| Policy Management | Investment Management | Research Management | Intellectual Property Management | Strategy Management |
| Market Management | Brand Management | Plan Management | Message Management | Business Management |

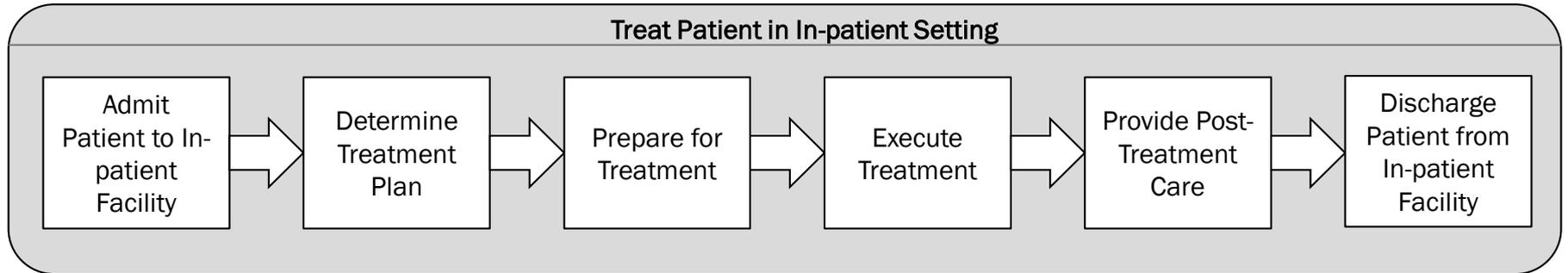
Core and Customer-Facing

| | | | | | |
|------------------------------|-----------------------------|---------------------------|--|--------------------------------|-----------------------|
| Patient Management | Health Care Case Management | Provider Management | Medical Condition Information Management | Health Care Service Management | Medication Management |
| Population Health Management | Medical Facility Management | Medical Device Management | Payer Management | Agreement Management | |

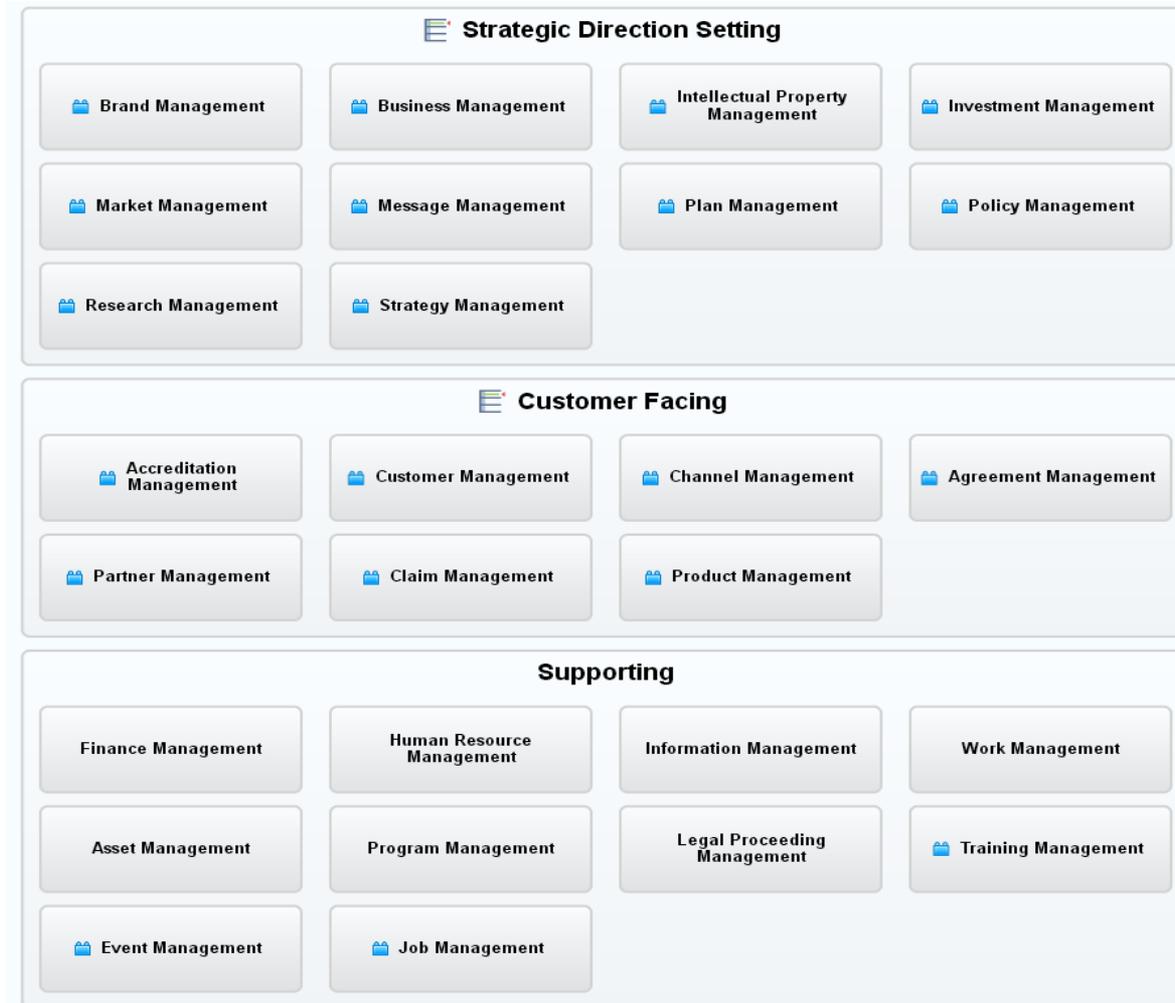
Supporting

| | | | | |
|---------------------------|------------------------|------------------|-----------------------------|---------------------|
| Human Resource Management | Information Management | Event Management | Legal Proceeding Management | Training Management |
| Finance Management | Project Management | Work Management | Asset Management | |

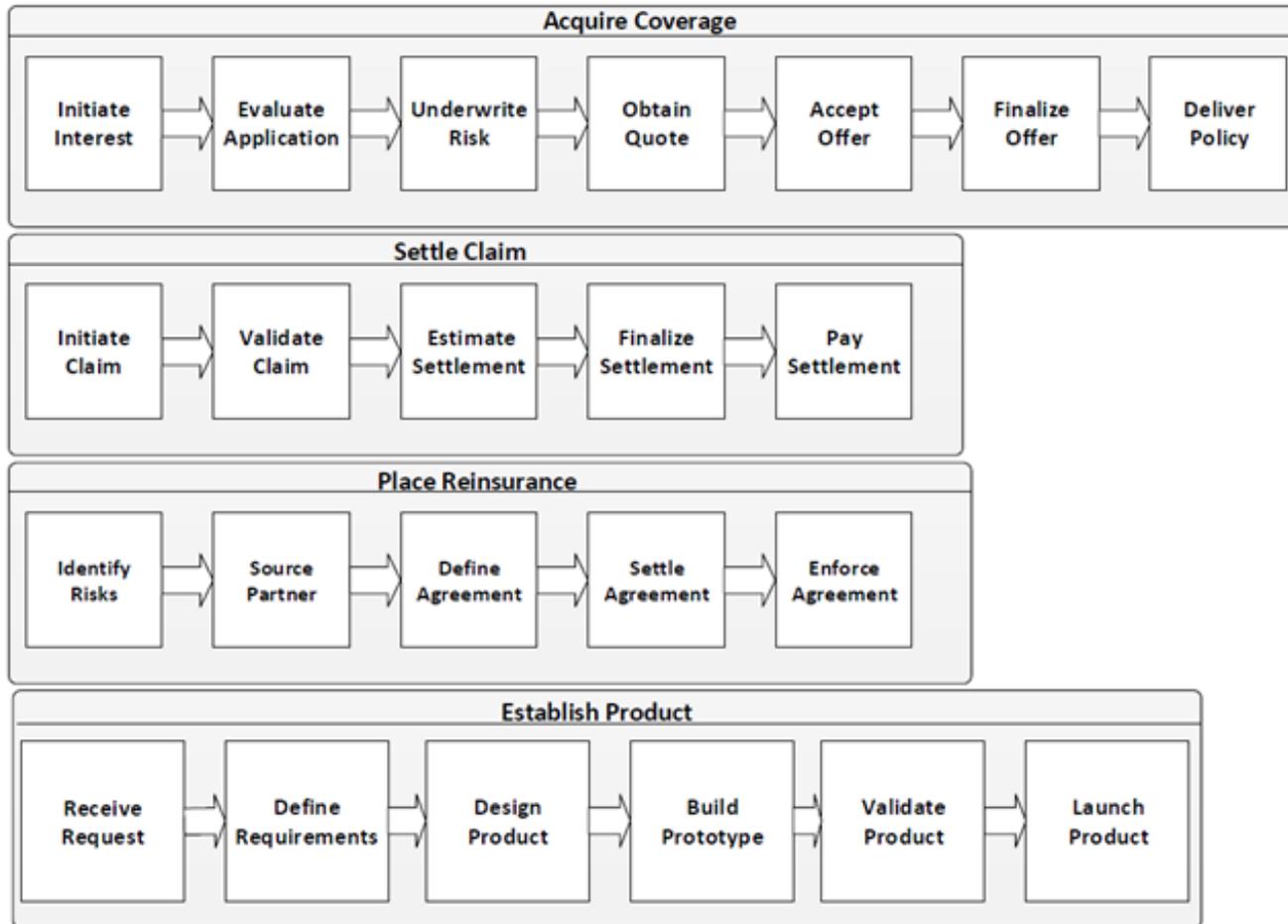
HEALTH CARE REFERENCE MODEL



INSURANCE REFERENCE MODEL



INSURANCE REFERENCE MODEL



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