

# **CORBAmEd Meeting Minutes**

## **San Jose, California, USA session**

### **23-26 August 1999**

#### **Sunday, 23 August 1999**

CORBAmEd Roadmap lead by Peter Nicklin (NHS)

Progress on the Roadmap and detailed work on the CORBAmEd Healthcare System Template (CHST). New Elements for the CHST discussed, see document number corbamed/99-08-12.

#### **Monday, 24 August 1999**

Introduction to San Jose session of CORBAmEd lead by Mary Kratz (University of Michigan), review of session goals and objectives:

- Healthcare Decision Interpretation Facility (HDIF) Revised Submission
- Medical Transcription Management Service (MTM), Revised Submission, vote to delay dates
- Summary List Information Management (SLiMS), Vote to delay dates
- Clinical Image Access Service (CIAS) Initial Submission Presentation
- HALFEM RFI discussions resulted in draft RFP's:
  - Healthcare Relationship Service RFP
  - Healthcare Person Demographics RFP
  - Physician Identification Service (PhIDS)

Other objectives for this session include:

- Roadmap and work on the CORBAmEd Healthcare System Template (CHST)
- "People who need People" cross domain session
- Educational update on the Japanese Healthcare Industry
- "Information Set" RFP joint effort with Statistics SIG
- Joint session with SEC SIG
- Establishment of Government Projects Workgroup
- Open Source Education/CORBAmEd Sample Implementations

Final agenda review and approval.

Motion by Ken Rubin (Veterans Administration) to approve agenda version 1.0, second Peter Nicklin (NHS), white ballot by Erik Hagstrom (Envoy). Agenda approved as corbamed/99-08-02. San Jose Session Introduction, corbamed/99-08-03.

Review of the Japanese healthcare system and informatics initiatives by Kanji Nakai (Hitachi). Presentation posted as document number corbamed/99-08-04. The organization and current efforts of the Japanese Association of Healthcare Information Systems Industry (JAHIS) presented. Insights on healthcare informatics initiatives in Japan provided the foundation for a discussion of similarities and differences across geographic regions and cultures on a variety of topics. Evidence Based Medicine approaches to manage healthcare across populations was of particular interest to many participants. The focus of special needs, such as geriatric populations, or chronically ill populations, and potential impacts on the definition of the CORBAmEd Roadmap.

Joint session with Analytical Information Management SIG lead by Chris Nelson, chair of the AIM SIG. Review of the Information Set initiative.

Review of RFI responses on Questionnaires and Report Forms. See OMG document corbamed/99-03-12 by Daniel W. Gillman and Jean-Pierre Kent. The potential use of questionnaire report forms may find an interesting application in healthcare order management.

Presentation on the Data Document Initiative (DDI), see <http://www.icpsr.umich.edu/DDI/>. Development and Beta-Testing at Berkeley was reviewed (<http://sda.berkeley.edu:7502/DDI/>). Many Organizations are working together to arrive at a common method for documenting data files. The method generally agreed upon is XML, with incorporation of specific tags for each data element. There is work underway in the OMG to do an XML to IDL mapping.

Joint session with SEC SIG, encompassed a discussion of a smart card deployment and CORBA services by West Virginia University. Refer to SEC SIG subdirectory, for presentation and reference documents on the OMG server.

Concurrent breakout sessions:

Newcomer's Tutorial for first time CORBAMED attendees, by Mary Kratz (University of Michigan) chair of CORBAMED. OMG document number corbamed/99-08-07.

Government Projects Workgroup, lead by Ken Rubin (Veterans Administration). A foundation meeting to discuss various Governments project initiatives and support of CORBA in the healthcare industry. Government projects serve as a catalyst to promote new technologies, and CORBA is a priority for many of these initiatives. Resources funded to work on these initiatives are interested in coordination with CORBAMED activities, thus CORBAMED requires a forum to facilitate communication.

Overview of National Health Service Information Strategy presented by Peter Nicklin (NHS). (corbamed/99-08-08)

Overview of the United States Government Clinical Patient Record initiative, by Tom Culpepper (3M). (corbamed/99-08-09)

It is clear that this information sharing leads to a great exchange of ideas, and potential requirements for future CORBAMED RFPs. The G-CPR representatives will be extended an invitation to the Boston session in November, primarily due to the proximity of Washington to Boston. The NHS will be extended an invitation as well, in addition to other governments (Japan, Australia, Brazil, Canada, etc.).

The work result of the Government Projects workgroup was discussed. Input from various governments project perspectives on the CHST. One work item would be to provide the CHST as a template for the government representatives to fill out and give input back to CORBAMED. The CHST would serve as a tool to establish future requirements for additional healthcare service RFPs. In addition, refinement of the CHST will enable the establishment of a service architecture

that supports healthcare business practices. One advantage of the CHST, is that it provides a consistent mechanism for representation, and is independent of any technology, or a particular healthcare model representation (ie. COSMOS, HL7, etc.).

In addition to the focus on government initiatives, this same formula might prove useful for other users to provide input to CORBAmed. Future paths might include extending invitations to local area providers, when an OMG session is in their proximity. Presentations on various initiatives using distributed object computing, and input via the CHST tool, will provide requirements definitions for the establishment of generic healthcare specifications.

For the Boston session there are a number of potential providers that an invitation might be extended to ( National Institute of Health, Washington University, Johns Hopkins, etc.).

### **Tuesday, August 24, 1999**

Medical Transcription Management (MTM) initial submission presentation by Jon Farmer (Care Data Systems). OMG document number corbamed/99-08-10

Discussion of each of the areas that the MTM service will cover, including Notification, various formats, report routing, digital signature, report status, keyword searches and text analysis.

Clinical Image Access Service (CIAS) initial submission presentation by Yasser alSafadi (Philips Research). OMG document number corbamed/99-08-11.

Discussion of the CIAS and it's relationship to other CORBA services. The relationship of CIAS to COAS (Clinical Observation Access Service) was discussed in detail.

People Who Like People (PWLP) joint Domain Task Force Session:

Joint session with BODTF, Human Resources, Finance, Electronic Commerce, Manufacturing, Telecommunications, Insurance and CORBAmed.

Review of present specifications and associated object models:

Party Management presented by Robert Mickley (rmickley@gazebosoft.com)

CORBAmed PIDS service and potential relationship to other CORBA services presented by Tim Brinson (2AB).

Person Demographics and Relationship draft RFP, formulated by CORBAmed, discussed as it might apply across domains. Detailed discussion of impact and issues encompassed: Access Control, Healthcare Eligibility, next of kin/guardianship relationships, Physician (and other care provider) credentialing/licensure requirements and business practices, healthcare referral for service (MCO/PPO/HMO business practices), Epidemiology/Outcomes analysis (people to groups or populations), contact information (address book), basic demographic data, historical information, and order management.

Action items for the Boston session:

Document use case scenario's that the healthcare RFPs are based on (Bob Glicksman (Phillips), BHSSF)

Analysis of Party Management specification as it applies to healthcare (Dave Forslund (LANL), Jon Farmer (CareData)).

Draft RFP for a generic Relationship Service, to be used as a working document for the Boston session (Ken Rubin (VA) and Mary Kratz (UMHS)).

Value Chain potential between the Insurance DTF (Richard Lemuix) and CORBAmed (Mary Kratz). Joint session between the Insurance and CORBAmed DTF's to be scheduled for the Boston session.

Clinical Image Access Service lead by Yasser alSafadi (Philips)  
Review of CIAS revised submission model and various relationships to the DICOM information model. CIAS is a very computational model, and has many aspects that complement the DICOM information model.

### **Wednesday, August 25, 1999**

Brief Roadmap update for those not able to attend Sunday's working session. Review of current CHST work items lead by Peter Nicklin (NHS). Action item for Peter to update the CORBAmed Roadmap to reflect recent technology adoptions and CHST refinements. Draft CORBAmed Roadmap 2.0 to be presented at the Boston session.

Dave Forslund (LANL) took an action item to update the web pages to reflect the recent activities. Tim Brinson (OMG Healthcare Representative), Tom Culpepper (3M) and Mary Kratz (UMHS), recently published an introduction to CORBAmed activities in Healthcare Informatics. The single representation of CORBAmed and its relationship to other standards organizations says it all. Dave will link the CORBAmed web page to the Healthcare Informatics publication as well.

Pharmacy lead by Erik Hagstrom.  
ACP??? Bill Lockwood  
Article done by Dan Staniec, assisted by Mary Kratz  
Discussion of business cases related to Pharmacy.

Open Source in Healthcare by Brian Bray  
OMG Document number corbamed/99-08-14

CORBAmed Reference Implementations and Open Source by Dave Forslund (LANL)  
OMG Document number corbamed/99-08-15

<http://vaio.saffron/cgi-bin/pharmacy/new>

Open source healthcare mailing list.  
<http://www.minoru-development.com>  
<http://www.openhealth.com>

Discussion focused around questions related to the value and benefits of Open Source applications in healthcare. Issues of doing CORBAmed sample implementations to provide Open Source examples of CORBAmed deployments in healthcare was discussed. The balance between vendor value adds and Open Source examples has a broad spectrum of possibilities.

Reference Implementations and Open Source Software by Dave Forslund (LANL)  
OMG Document number corbamed/99-08-15.

- Are users/companies interested in “Reference Implementations” of OMG CORBAmed specifications?
- Should these Reference Implementations be Open Sourced?
- What license to use?
- What exists currently?
- Does the language of the Reference Implementations matter?
- What about clients? For example, should usage profile definitions to accomplish common tasks be Open Sourced? Other reference Implementations are available for XMI and MOF.
- What is the value of reference implementations?

The group generally agreed that Open Source “Sample Implementations” would provide benefit to the industry. “Reference Implementations” is misleading, due to IETF connotations, and sample implementations seemed more appropriate.

Discussion of conformance statements and potential of a branding program for CORBAmed interfaces.

Discussion of the potential benefits of moving sample implementations of CORBAmed standards to the industry via the Open Source mechanisms proved useful. Credibility was deemed as a value to vendors involved in deployment of specifications in the industry. Validation of interfaces, by more than one customer, was deemed as a value to users. Find ambiguities in the specifications through implementation, an admirable objective, providing benefit to all participants.

Potential benefits of this focus for CORBAmed include:

Enhance acceptance of CORBAmed standards into the marketplace.

Stimulate competition in the marketplace.

Low cost, low performance implementations for a wide customer base.

Potential to grow the market in a different direction. Instead of placing value on product offerings, healthcare customers simply want the value provided by those products to accomplish business objectives. New opportunities for vendors offering services and solutions, not product offerings.

Sample implementations of CORBAmed solutions should be marketed as “not for industrial use”.

Vendors still add value above and beyond the base deployments offered in sample implementations. Issues, such as FDA requirements on software are of concern. Software is not simply deployed. There are costs in testing and validation of software applications. Open Source provides a potential, but there is still value in the services offered by vendor companies.

One huge potential is users assisting each other, and vendors with interoperability issues.

Provision of a “library” of potential application suites and test data would be beneficial to the industry, allowing users to flush out issues before signing up for a particular solution that may not interoperate with their current environment.

Should this effort be linked with the interoperability-clearing house effort that John Weiler is leading? A CORBAmed track at HIMSS on Distributed Object Computing in healthcare may serve to address this question.

Portability between ORBs is another issue that users in healthcare are struggling to address. Sample implementations of CORBAmed service could also incorporate ORB offerings in the "library".

Who is the audience for this? IT shop and/or integrators. Vendors, CIOs and other decision makers in healthcare organizations. The objective is to create tools/solution prototypes to provide an understanding of CORBAmed service specifications and the healthcare business case they address.

What value does providing the source code, via Open Source, add? Someone will see the value in having the source code. In addition to source code, there are other aspects of documentation to consider, robust user/integrator documentation, use cases, etc...

### **Thursday, August 26, 1999**

CORBAmed Business Meeting.

OMG CORBAmed Marketing by Tim Brinson (OMG Healthcare Representative)

OMG Document number 99-08-16.

The marketing plan starts with review of industry influences and targets decision-makers in the industry. Visionaries, CTOs, IS directors and staff are the primary targets for the marketing plan of CORBAmed. Various marketing opportunities and the development of a healthcare interoperability testbed for Open Source initiatives in healthcare were discussed. Suggestion of a CORBA in healthcare award was presented. This award would be presented to organizations leading the industry on interoperability solutions. Tim is working with the Gardner Group (and others) to establish a market analysis for CORBAmed. Consultants, vendors and users will provide input on what is needed to further CORBAmed's successes. Publication of additional success stories of CORBAmed deployments is worthwhile, in addition to Sample Implementations as discussed at this session. Peer organizations working on the CORBAmed Roadmap requirements, to flesh out the business case for the CORBAmed service architecture is underway. Work with other vertical domains and trade associations has also been initiated.

Other CORBAmed Business:

Motion by the Clinical Image Access Service submitters to extend the CIAS revised submission to 22 October 1999, in order to allow ample time for review and comments prior to the November 1999 OMG meeting.

Quorum check for voters on the CIAS voting list.

Motion by Yasser alSafadi (Philips)

Second by Tim Brinson (2AB)

Discussion none

White ballot (for members of the voting list) by Bob Glicksman (Philips)

Motion passes, and the CIAS submitters will follow a vote-to-vote process for potential technology adoption of CIAS at the November session.

Healthcare Data Interpretation Facility by Jerome Soller (CogniTech)

Presentation available as OMG document number corbamed/99-08-18.

Presentation on progress of the HDIF revised submission. Submitters are in the process of collating the initial submissions into one final revised submission. However, they have realized the need for more time to provide a robust specification that address all the issues related to this important area.

Motion to delay the HDIF revised submission deadline to 22 October 1999 by Jerome Soller (CogniTech).

Quorum check of HDIF voting list.

Second by Dave Forslund (LANL)

Discussion none.

White ballot (of voting list) by Jerome Soller (CogniTech)

Motion passes.

CORBAmed Business Meeting

Review of HL7 OMG liaison by Tim Brinson (OMG Healthcare Representative and CORBAmed Liaison to HL7).

Motion by Dave Forslund (LANL) to recommend to the OMG staff that a membership "swap" with HL7 be pursued.

Second by Ken Rubin (VA)

Discussion = none

White ballot Tom Culpepper (3M)

Motion passes.

Review of San Jose session accomplishments:

- Healthcare Decision Interpretation Facility (HDIF) revised submission presentation and review
- Medical Transcription Management Service (MTM) revised submission, vote to delay dates
- Summary List Information Management (SiiMS) vote to delay dates
- Clinical Image Access Service (CIAS) revised submission presentation and review, vote to delay dates
- HALFEM RFI discussion and review of draft RFP's on Healthcare Relationship Service RFP, Healthcare Person Demographics Service RFP, and Physician Identification RFP.
  
- Roadmap and CHST progress
- People Who Like People cross DTF session
- Education on the Japanese Healthcare Industry
- "Information Set" RFP with Data Analysis SIG
- Joint Session with SEC SIG: focus on Smart Cards
- Government Projects Workgroup initiated
- Open Source Education/CORBAmed Sample Implementations
- CORBAmed Marketing Plan and Liaisons

Cambridge Agenda items:

- Clinical Image Access Service (CIAS) revised submission (vote-to-vote and potential vote for technology adoption)
- Healthcare Decision Interpretation Facility revised submission and potential vote for technology adoption
- Potential issuance of RFPs:
  - Healthcare Relationship Service
  - Patient Demographic Service
  - Physician Identification Service
  - Order Management Draft RFP
  - Authoring Service Draft RFP
  - Record Locator Service Draft RFP
- Roadmap Updates
- People Who Like People and joint DTF Relationship RFP
- Education on government initiatives
- RM-ODP education; focus on healthcare business case for CORBAmed and the Enterprise Viewpoint
- Education on XMI
- Marketing and Liaison Updates
- Work on formation of Pharmacy RFPs

Next Meeting in Cambridge Massachusetts, USA (near Boston)  
15-18 November 1999

Session adjourned.