

The Information Agenda Guide for Health Plans

Accelerate your Information-Led Transformation



***By Wayne Janzen, Executive Consultant
IBM Information Agenda***

Trusted information is a strategic asset

Leaders from around the world are focused more than ever on the economic, social and environmental implications of vertical integration, where the Internet and globalization are making the world simultaneously smaller, flatter and smarter. The systems and processes that enable goods to be developed, manufactured, bought and sold, services that deliver everything from electricity, financial transactions and efficient healthcare systems to name a few, are driving us towards becoming a smarter planet.

What all of this means is that for the first time in history, almost anything can become digitally aware and interconnected; bringing major implications for the value that can be derived from such systems. With so much technology and networking abundantly available at such low cost, what wouldn't you put smart technology into? What service wouldn't you provide a member, provider or employer? What wouldn't you connect? What information wouldn't you mine for insight?

The foremost issue facing enterprises today is the waste, inaccuracy and volume of missed opportunities that stem from the single root cause of information raging out of control. This information explosion is creating challenges, but forward-thinking organizations are turning it into an opportunity. They are leveraging information to identify opportunities for profitable growth, cost take-out, and proactive risk management. They are pursuing an

information-led transformation to help them make better informed, real-time decisions as they turn their information into a strategic driver to accelerate innovation, business optimization and sustained competitive differentiation.

When built on a foundation of trusted information that can be shared, re-used and applied as a strategic asset, an information-led transformation allows organizations to optimize every transaction, process and decision at the point of greatest impact. In doing so, they can move analysis from a back office operation limited to business analyst experts to an approach that enables everyone in optimize their decisions based on real-time, predictive analytics. It can deliver immediate and cumulative value with each step, resulting in sustainable practices and processes that create a smarter organization; one that can make better informed decisions ranging from everyday moves to major strategic bets.

And this thought is not lost on health plans. Fast-changing markets—combined with provider and member demands, political uncertainty and member health concerns—are among the catalysts for an emerging health plan business model that presents new opportunities and new challenges. For health plans to compete effectively, the vast amount of data they collect needs to be transformed into the actionable information essential for faster, better decision making and for delivering new, targeted services to members, employers and providers.

Trusted information is a strategic asset

According to “Healthcare 2015 and U.S. health plans: New roles, new competencies,”* the current state of health care is not sustainable, and by 2015 the marketplace will be far different from what we see today. While change is indeed constant, few industries are changing as rapidly as healthcare. In addition to the standard variables of globalization and consumerism, health plans are particularly sensitive to changing demographics and lifestyles, ever-greater costs associated with treating diseases, and rapidly evolving innovations in medical technologies and treatments. Health plans—public and private payers, and employers and governments that shoulder the burden of healthcare costs—are responding to demands on all fronts. They are, in fact, playing a leadership role in the transformation—implementing analytics, portals and tools that increase understanding of the member at an individual level, putting the member at the center of healthcare, and redefining the organizing principle around which care and services will evolve.

The consequences of the transformation are far-reaching. Added to the ever-present challenges of reducing expenses, improving healthcare delivery and keeping pace with regulations, health plans are pressed with greater demands to stay ahead of the competition—by offering new products and services, anticipating member and provider needs, and providing superior service. Such imperatives demand a comprehensive knowledge and understanding of members, providers, brokers and partners, and finding new ways to deepen existing relationships.

For many health plans today, the information so critical to understanding members, providers, employers and operations is not easily accessible. While there is no shortage of data, it is often spread across numerous information silos and in multiple formats, making it nearly impossible to turn this information into the type of actionable insight that can result in competitive differentiation.

To embrace this new business model, health plan CIOs, in concert with line-of-business executives, must re-evaluate their IT and business strategies and the very purpose of the increasing amounts of information being generated and managed. Time-to-market for new services and return-on-investment horizons are being significantly shortened as health plans compete in geographically larger and increasingly more competitive markets. Risk mitigation, from technical, financial and regulatory perspectives, gains importance as health plans contract with partners and third parties to boost competitive advantage or provide more sophisticated service offerings.

In addition, regulatory scrutiny and reporting requirements from both federal and state agencies continue to increase, creating new reporting demands and more layers of complexity. Most important, there is growing focus on the importance of the member experience and the need to tailor health plans, prevention programs, wellness services and healthcare delivery to individual members’ constantly changing profiles.

The untapped value of information

The new focus on member centricity creates a business model that demands better use of data—data that already exists in health plans' systems—including massive volumes of customer, transactional and medical data that could be leveraged for providing superior member experiences. Every call center interaction, every provider visit, every prescription filled, every treatment delivered and every medical claim submitted creates data that can enable a health plan to gain insight about members, market segments, emerging trends and delivery channels. Considering the potential value of this data, CIOs are challenged today to create a new, advanced level of information management.

Health plans' main focus for the past 10 to 15 years has been improving business operations, with the goal to automate business processes in order to speed processing and reduce costs. Health plans addressed these automation requirements with significant investments in enterprise wide applications, such as call center interactive voice response (IVR), enterprise resource planning (ERP), customer relationship management (CRM), and supply chain management (SCM). However, similar investments by other health plans are neutralizing the competitive advantage these strategies produced, and health plans are increasing their investment in analytics and analytic initiatives to further streamline, automate and differentiate themselves.

However, for most health plans, claims applications do not provide a 360-degree view of their members as individuals, and the data managed by these and other applications—such as membership, provider and case management applications—is isolated, unsynchronized and of questionable quality. Health plans rarely obtain optimum value from the

vast amounts of data in their control. Generally, health plans have no shortage of data, but the information that is extracted currently from that data is miniscule compared to what could be made available if it were organized, consolidated and structured in such a manner to deliver a single view of member and provider.

Today, health plan CIOs have an opportunity—a mandate—to harness and leverage the data they've captured to deliver a meaningful and sustainable competitive advantage, rather than simply support or automate business processes. But accessing and verifying that data is no simple task. Data, for example, often is locked in multiple departmental silos—putting it at risk of duplication and other errors. Health plans' various business units may use different terminology or formats to describe the same information or use the same terminology to describe different data.

Overcoming such hurdles is well worth the effort. When all of an organization's enterprise-level data can be consistently drawn upon, with processes and governance in place to assure the delivery of correct, complete and current information, volumes of disparate data can be transformed into trusted, actionable information. Trusted information can then be used as fuel for an entirely new level of information-driven services—and sustainable competitive advantage.

Health plan line-of-business executives are demanding more insight to help them respond to changing market conditions, and CIOs are expanding their focus on creating and leveraging trusted information.

Businesswise, delivering the right information to the right people at the right time can result in significant benefits.

Information On Demand

Information On Demand is a comprehensive set of information management solutions that help companies establish and leverage trusted information to optimize business performance. Healthcare companies can optimize business performance through Information On Demand which results in improvements in operations, efficiency, reliability and service.

It is critical to be able to access, analyze and control information. Health plans can use information to:

- Better operate and maintain their assets
- Improve worker productivity
- Gain insight into their customers
- Introduce new product offerings
- Improve the quality and results of their regulatory interactions
- Improve customer service

This level of challenge and coordination can only be achieved through a unified information management strategy.

An Information Agenda

For organizations that want to get started on the path to Information On Demand and establish a foundation for new intelligence but do not know where to begin, an Information Agenda is needed. An Information Agenda is a comprehensive, enterprise-wide plan that explains how to take the information being generated across, and even outside of, the organization and put it to use to better run the business. In establishing an Information Agenda for the organization, the CIO, working with line of business colleagues, puts information to work to achieve both short-term and long-term strategic changes.

Information On Demand in action: Opportunities for Health Plan Optimization

Business Initiatives

- Leverage insight to set strategic innovation agenda
- Achieve cost improvement, quality improvement benchmarks
- Operational efficiency
- Avoid costly penalties for noncompliance with increasing regulatory requirements
- Grow new business in cost-effective manner
- Avoid losses due to fraudulent or denied claims
- Achieve a 360-degree view of wellness and customer care
- Improve effectiveness of customer service
- Improve member/provider satisfaction
- Increase ability to attract members, employers/providers, patients

IT Initiatives

- Increase impact on business metrics
- Support solutions to provide information needed to measure performance
- Improve service levels to line-of-business and applications
- Support high-value business processes
- Increase availability of critical applications
- Scale up to meet customer needs,
- Manage increasing volumes of data and customers
- Consolidation / Integration / Standardization
- Minimize duplicate records
- Implement and support solutions to uncover fraud and relationships

An effective Information Agenda helps health plans achieve several key objectives:

- Align the use of information to match the organization's business strategy
- Identify and prioritize information projects
- Identify how, when and where information should be made available
- Identify data and content that are vital to the organization
- Determine data management processes and governance practices
- Create and deploy an information infrastructure that meets both immediate and future needs

The Information Agenda Guide for Health Plans

IBM helps accelerate an information-led transformation through industry-specific Information Agenda Guides. The IBM Information Agenda Guide for Health Plans is a practical, proven approach for turning a client's Information On Demand vision and strategy into reality.

CIOs, working with their line of business colleagues, can build a best-in-class information management vision for their organization and create a detailed roadmap. Health plans can unlock the value of information to optimize clinical and financial performance.

The Information Agenda Guide for Health Plans can help direct organizations as they develop their own information agenda. Within weeks, health plans can create their unified information management strategy via IBM Information Agenda workshops. The Information Agenda Guide for Health Plans addresses the four key components of an Information Agenda and ensures that they work in conjunction to facilitate the information-led transformation (see Figure 1).

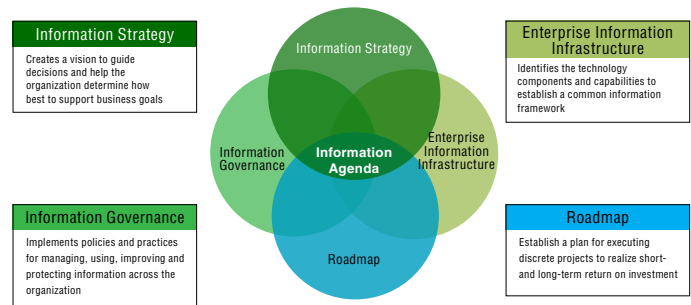


Figure 1: An effective Information Agenda provides a strategic vision and a phased plan that enables health plans to unlock the business value of information and align it with their organizations' business strategies.

- **Information strategy:** The vision that guides decisions and helps the organization determine how best to support business goals
- **Information infrastructure:** The technology components and capabilities needed to establish a common information framework
- **Information governance:** The policies and practices that facilitate the management, usage, improvement and protection of information across lines of business
- **Roadmap:** A phased execution plan for transforming the organization

As figure 1 indicates, the Information Agenda for Health Plans identifies crucial IT projects that establish the necessary information infrastructure and then leverage that infrastructure to help produce measurable business results identified by the business objective. Depending on an organization's existing information architecture, and the objectives that are of most importance to the business, an organization's final Information Agenda roadmap can contain some or all of these projects.

Information Strategy: Recognizing the big picture

At its highest level, the IBM Information Agenda Guide for Health Plans incorporates best industry practices to help identify the primary information-centric clinical and business imperatives that drive virtually every clinical and business decision. As the outermost ring in Figure 2 illustrates, member health, operational efficiency and cost reduction, growth and member retention, risk and compliance management, and access and transparency are key strategic imperatives that many health plans contend with under current market dynamics.

Information strategy defines the high-priority strategic imperatives that can be enabled—in whole or in part—by an information-led transformation.

The middle ring details the specific business objectives that support each strategic imperative. The strategic imperatives and business optimization objectives are the foundational components set the vision and strategy for an organization's information agenda. This approach helps ensure that IT objectives and overall corporate objectives are aligned and provides line-of-business and IT colleagues a common vision with which to prioritize projects and plans.

At the center of the Information Agenda Guide are a set of performance management activities and application areas that are common across all industries. These capabilities are required to run your business, but alone are not sufficient to drive competitive advantage in today's business environment.

The industry imperatives and business objectives are the foundational components used to help set the vision and strategy for a healthcare organization's Information Agenda. This approach ensures that you have a well-established

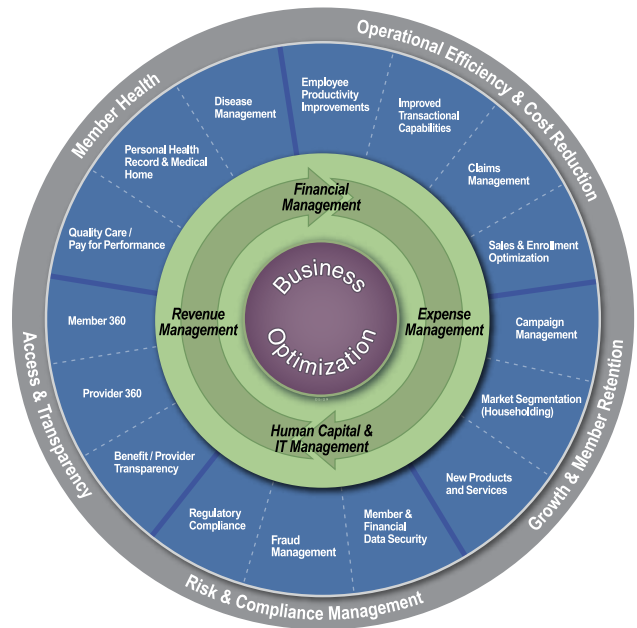


Figure 2: The IBM Information Agenda Guide for Health Plans is a proven approach for turning an Information On Demand vision and strategy into reality.

bridge between IT objectives and overall organizational objectives. It also provides line of business, clinical and IT colleagues with a common language to communicate about all projects and plans.

Information governance: Enhancing information quality, availability and integrity

As a crucial component of the IBM Information Agenda Guide, information governance helps health plans establish standards for data quality, management processes and accountability. These standards help to improve business performance via standard definitions and processes that establish a more disciplined approach to managing data and information across the enterprise.

The Information Agenda Guide for Health Plans applies best practices for creating information governance policies, based upon IBM's extensive experience in the healthcare industry. It leverages existing policies and procedures to create an environment that can consistently and confidently manage information, thereby obtaining maximum value from these assets to support strategic imperatives.

Information infrastructure: Creating, managing and delivering trusted information

All imperatives and business optimization objectives depend upon a common information infrastructure that enables a healthcare organization to more effectively create, capture, manage and utilize information associated with patients, services, products and market strategy (see Figure 3).

An effective information infrastructure allows a healthcare organization to:

1. **Manage information over its lifetime** — Reducing the costs associated with managing information while controlling access, expanding retention and increasing compliance.
2. **Optimize content, process, and compliance management** — Better tuning system performance and improving decision-making by injecting timely, trusted information into business operations.
3. **Establish an accurate, trusted view of information over time** — A flexible architecture can leverage existing IT investments to produce accurate and trusted information that is consistent across sources, facilitating better analytics and sound business decisions.

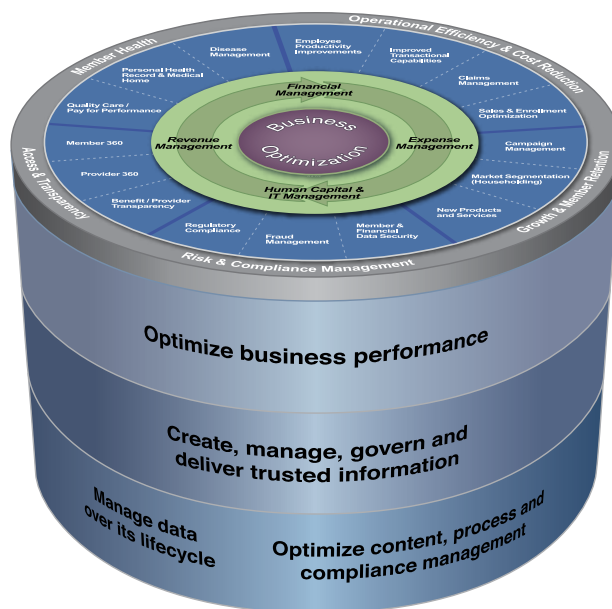


Figure 3: The IBM Information Agenda Guide for Health Plans addresses common key information requirements.

4. **Plan, understand and optimize business performance** — Leveraging trusted information to build plans, understand how business is performing and focus on optimizing performance across the enterprise.
5. **Provide solutions that drive operational efficiency** — Information infrastructure solutions focus on information compliance, security, availability and retention, providing an infrastructure environment that is highly scalable, standards-based, flexible and essential to handling today's most information intensive business challenges.

As the journey towards Information On Demand evolves, guiding principles will be applied to leverage existing assets and IT purchase decisions with these key common information requirements in mind. The journey will include looking for opportunities to use existing IT assets as common components to be utilized for other projects, and will provide guidelines that help ensure new technology and software investments can accommodate both short- and long-term objectives.

Roadmap – bringing it all together with a step-by-step execution plan for creating an information agenda

The roadmap gives information management and integration efforts direction and cohesion. It spells out the priority, order and timeframe of IT projects necessary to achieve the organization's crucial information-enabled business optimization objectives. The first step in creating the roadmap is identifying and prioritizing the underlying IT projects—usually combinations of software and services—that can help achieve each business imperative.

IT projects for supporting member health

As a result of greater industry-wide emphasis on consumer-driven services and member responsibility and accountability, supporting optimal member health is high on most health plans' lists of strategic imperatives. Shifting more responsibility and accountability to health plan members for their own care and disease management is a trend that could significantly benefit all stakeholders. The cost of preventing, managing and controlling many chronic diseases, including hypertension, diabetes and obesity, can be relatively inexpensive, while the cost of treating them is extremely costly.

Employers also recognize the cost benefit of a healthy workforce—not only direct premium costs, but the prohibitive costs of productivity losses related to illness as well—and are teaming with health plans and providers to develop monitoring, intervention and advocacy programs to reduce costs and improve member health. However, data related to member health typically is spread throughout the enterprise, described in a multitude of ways, or simply lost as names, addresses and providers change.

Health plans are looking for new and better ways to facilitate disease management—gathering and analyzing data related to preventative and diagnostic care quality, screenings and early intervention programs, patient compliance, and drug treatment effectiveness. Health plans want to enrich their understanding of member behavior and utilization in order to identify member cohorts at risk—which can enable delivery of the right programs to the right member populations at the right time. They are also looking to maintain comprehensive and accurate personal health records, establish highly functional medical homes, as well as monitor quality care and pay-for-performance criteria. Since better management of their organizations' member-related information is vital to achieving these imperatives, CEOs, Chief Medical Officers and other executives are increasingly looking to their CIOs to support these critical initiatives.

Making the transition from the current state of information management to the ideal state identified by an organization's information agenda is no easy task. Some of the factors that prevent health plans from delivering a superior member

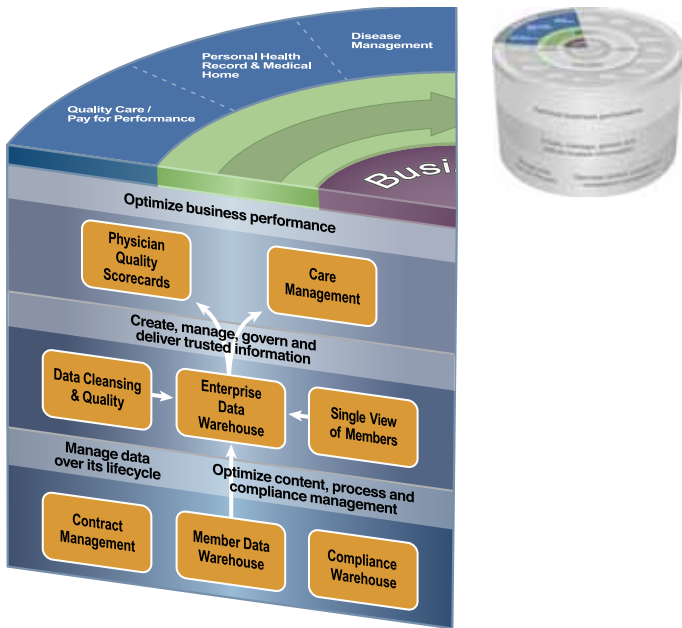


Figure 4: An example prescriptive roadmap of IT projects to enhance member health.

experience are the numerous, isolated and inconsistent sources of member data distributed throughout the enterprise; the difficulty in coordinating and synchronizing member and provider information; and the inability to establish a single, trusted source of complete, accurate and current information related to all parties.

Many of the same issues arise when providing information about products, plans and services to members, resulting in inconsistent experiences across the various channels of interaction. The Information Agenda Guide helps health plans remedy these problems by improving the quality and consistency of member data regardless of its source, integrating various sources of data to create a “single view of member/provider” or “single view of product” that is consistent across all channels of member interaction, and helps establish real-time monitoring and analysis of member transactions to gain insight into customer trends.

As Figure 4 indicates, the Information Agenda Guide for Health Plans identifies crucial IT projects that establish the necessary information infrastructure for improving member health—and then leverage that infrastructure to help produce measurable business results identified by the business objective.

IT projects for promoting operational efficiency and cost reduction

The idea of using technology to enable greater operational efficiencies is not new. What is new, however, is the realization of the vital role information plays in accomplishing this. An organization’s information agenda can now help direct the creation, collection, management and dissemination of information, resulting in optimization of that information’s use by and value to the organization.

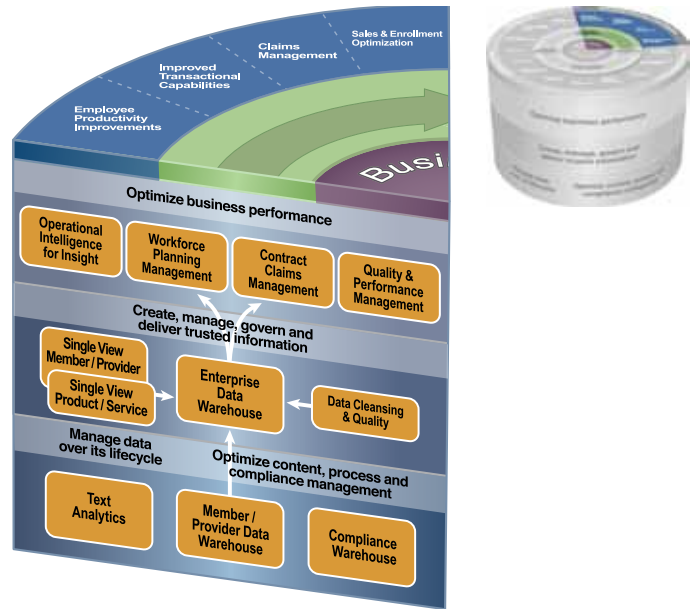


Figure 5: Sample IT projects for operational efficiency and cost reduction.

Ironically, the extensive and sophisticated data and information applications already in place can be barriers to implementing an Information Agenda. Some of the factors that prevent health plans from achieving operational efficiency are the inability to extract the full value and insight from member and transactional data sources, the inefficient use of capital assets, and the lack of data and process integration among IT systems or applications.

The Information Agenda Guide helps health plans apply business intelligence and data mining to gain the full value of massive transactional data resources with the goal of identifying issues or trends that could improve profitability (Figure 5). Greater overall “back office” operational efficiency can be achieved by improving the integration of processes and the management of information involved in billing; invoice processing; and contract, employee and asset lifecycle management.

IT projects for growth and member retention

IT projects for growth and member retention help health plans analyze member/provider behavior trends to develop targeted campaigns, as well as new products and services.

Growth and member retention have come a long way since the time when the healthcare market and regulatory environment allowed health plans to focus on streamlining administrative functions, cutting operational costs and attracting new employer groups. As cost of care continues to skyrocket, market segments are rapidly shifting. For example, new segments include baby boomers and an overweight populace. Consumers also are becoming more sophisticated

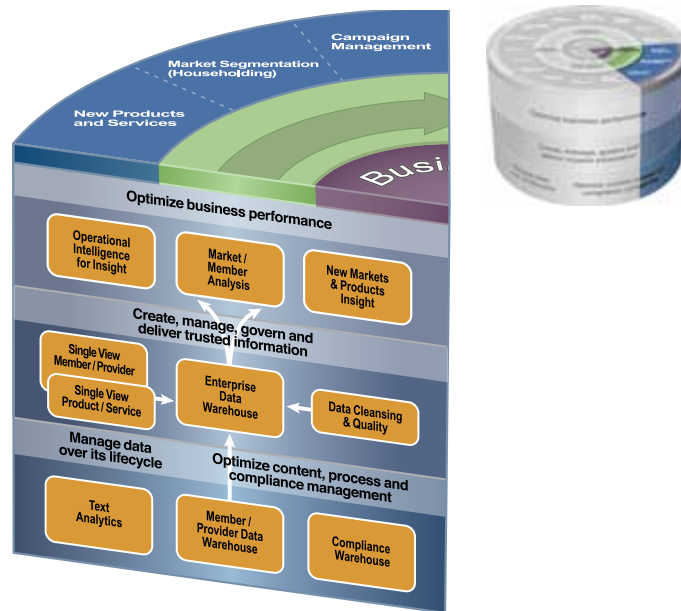


Figure 6: IT projects for growth and member retention.

and demanding in their expectations and use of healthcare products, services and information sources. It takes far more effort to attract and retain customers today. And it’s more important than ever to develop and factor in longitudinal member health profiles.

The complexity associated with growth and member retention (Figure 6) challenges every health plan. Some factors that prevent them from optimizing these strategic imperatives include the continuing shift from employer-based to government-based and individual coverage, greater emphasis on consumer responsibility and accountability, changing healthcare requirements and regulations, delivery models and capabilities, and reimbursement models.

The Information Agenda Guide helps health plans improve growth and retention objectives by offering business intelligence capabilities to refine campaign management, segment customers more effectively through accurate and up-to-date householding, and identify new product and service opportunities. For example, a 360-degree longitudinal view of member utilization and demographics would enable the design and delivery of personalized policies targeted to retiring members, policies that would be relevant for the member and profitable for the health plan.

The more accurate, comprehensive and available the information about every member, product and service is, the more effective a health plan's risk mitigation and compliance efforts can be.

IT projects for risk and compliance management

With every new service, new acquisition and new partner there are new risks to assess and new compliance imperatives to establish in response to legislative and industry requirements. Risk and compliance have a broad set of technical, financial and legal implications and demands related to information management. Behind all successful risk and compliance efforts is information—trusted, accurate information that can be quickly accessed and analyzed to give a true picture of the business today and for the future.

However, the volumes of data, the diversity of information and the number of isolated systems make risk management particularly challenging. Some of the factors that prevent health plans from effectively managing risk and compliance issues involving enterprise information include the multitude of isolated, departmental, legacy, line-of-business data and

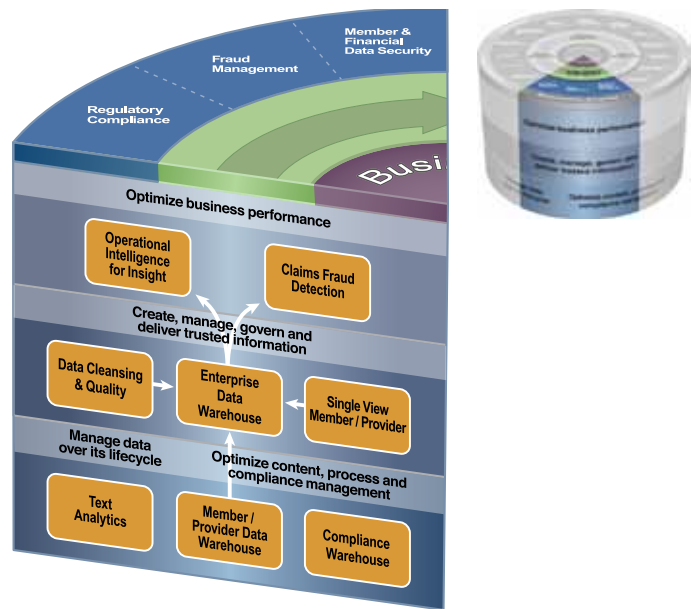


Figure 7. IT projects for risk and compliance management.

information systems that remain critical to operations, and the different management “domains” responsible for each of these data sources or systems.

The Information Agenda Guide provides strategies and capabilities that enable a health plan to systematically address risk and compliance issues associated with regulatory compliance, fraud management, and member and financial data security (Figure 7).

Access and transparency can be facilitated with initiatives to break open data silos and integrate disparate systems with an infrastructure that supports credible, accurate, comparable and accessible data.

IT projects for access and transparency

Health plan executives are particularly affected by challenges related to greater data access—prompted largely by regulatory mandates, more consumerism and a mission-critical need to analyze provider quality metrics. A single view of provider data is the foundation for such strategies, allowing health plans to gather and apply a “holistic” view of providers to gain an understanding of quality of care delivered by providers to help maximize healthcare outcomes while managing costs.

A 360-degree view of providers includes creating electronic access to information; improving data and information processes; consolidating duplicative, redundant, or disconnected data sets to produce accurate, reliable data sources; adopting standards; and moving toward common formats. Better access can facilitate better health plan/provider collaboration for improved patient outcomes, quality of life and recovery, and performance management. Additionally, comprehensive integration of member data can help create a “master record” that includes business rules, data cleansing and governance that will keep member data synchronized and accurate throughout the enterprise.

The difficulties of accommodating massive amounts of data and information from incompatible systems or sources can be daunting. Some of the factors that prevent health plans from efficiently managing broader access, convergence and consolidation include difficulty establishing comprehensive data quality and integration of disparate data sources; the challenges of consolidating data across multiple data domains such as product, customer, account and location; and the difficulty of developing an enterprise content strategy to manage unstructured content contained in multiple repositories.

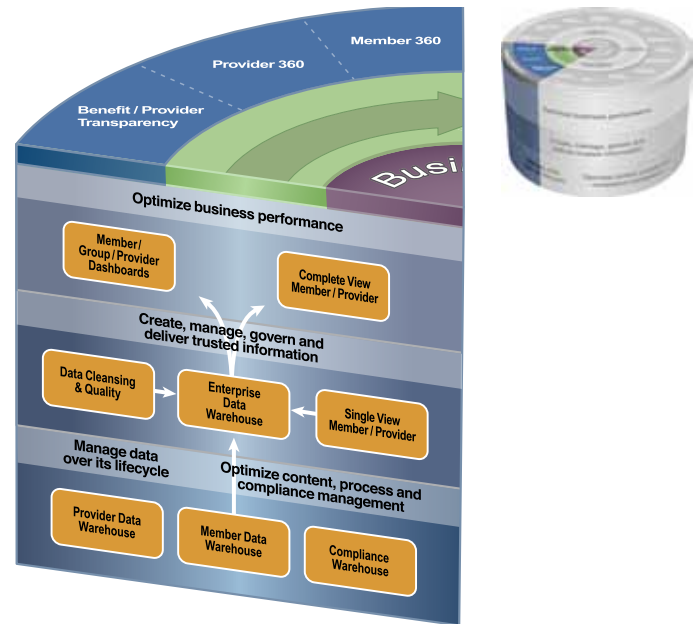


Figure 8. IT projects for access and transparency.

In the midst of such challenges, the Information Agenda Guide helps health plans deliver the 360-degree view of members and providers (Figure 8) by using and integrating industry data models, master data management, data warehouses and enterprise content, and process management platform capabilities, bringing consistency and quality to diverse data sources and reducing the complexity of the IT infrastructure.

An Information Agenda can help CIOs make a more significant contribution to their health plans’ core business objectives.

The Information Agenda Guide for Health Plans identifies crucial IT initiatives that establish the necessary information infrastructure and then leverage that infrastructure to help produce measurable results. Depending on a healthcare organization’s existing information architecture and its most important clinical and business objectives, a final Information Agenda roadmap can contain some or all of these projects.

The Power of An Information Agenda Approach

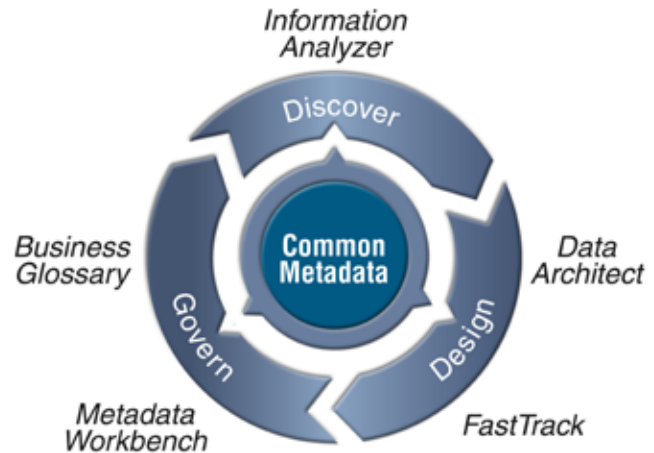
With an Information Agenda for Health Plans in place, health plan CIOs have many of the tools needed to make the essential transition from simply supporting the business to making a measurable, sustainable contribution to the business' bottom line. The Information Agenda Guide for Health Plans supplies the integrated vision needed to help achieve the business goals and objectives of a converged business model — and deliver better business outcomes. These outcomes can range from improving the availability of revenue producing assets, reducing maintenance costs, demonstrating compliance and improving customer satisfaction, to demonstrating leadership in corporate social responsibility programs.

The benefits — Competitive advantage through clinical and business optimization

The Information Agenda Guide can help health plans:

- Improve healthcare delivery
- Increase revenue and market share
- Reduce costs and enhance operational efficiency
- Introduce new products and services quickly
- Meet compliance requirements and reduce risk exposure
- Increase compliance visibility
- Protect member, clinical and financial data and mitigate fraud risks

Most important, consistently delivering trusted information to the right people at the right time gives organizations the ability to use that information – and the intelligence derived from it in entirely new ways, providing real competitive advantage for a smarter planet.



Why IBM is the right transformation partner

IBM's unparalleled combination of pure science, deep industry knowledge and technology expertise makes it uniquely qualified to help business discover a new kind of intelligence. Only IBM offers the industry accelerators, enabling technologies and deep expertise with a proven approach necessary to do so.

The IBM Information Agenda Guide for Health Plans is a practical, accelerated and proven approach developed by IBM after years of experience of working with leading global health plan organizations. It is a cross-IBM program composed of a proven, prescriptive methodology and mature healthcare assets, delivered by IBM practitioners with deep health plan industry expertise.

IBM Information On Demand and Information Infrastructure solutions offer end-to-end information infrastructure capabilities for executing your Information Agenda Guide. Information On Demand and Information Infrastructure

offerings have been specifically designed to address virtually every aspect of an organization's trusted information needs. Based on open standards and reflecting an investment of more than US\$10 billion in the last three years, Information On Demand and Information Infrastructure offerings are among the industry's most comprehensive.

IBM's Business Analytics and Optimization leverages the unique capabilities of IBM Research, which, when combined with our world-class software solutions, foundational business intelligence, performance management and advanced analytics, accelerate client time-to-value. Business Analytics and Optimization, in concert with Information Agenda, provides comprehensive services and leading edge health plan industry solutions, enabling health plans to make and act upon critical decisions.

CIOs and senior IT managers ready to jump-start their organization's Information Agenda efforts should consider a hosted IBM Information Agenda workshop. This workshop leverages IBM's expertise to quickly guide CIOs, senior IT managers and line of business stakeholders through the process of building a cohesive Information Agenda with an actionable set of projects. A hosted workshop can result in faster execution and quicker realization of return on investment.

For more information

To learn more about the IBM Information Agenda Guide for Health Plans and IBM IOD solutions, contact your IBM sales representative or visit:

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* "Healthcare 2015 and U.S. health plans: New roles, new competencies," published by the IBM Institute for Business Value, September 2007. <http://www-935.ibm.com/services/us/index.wss/ibvstudy/gbs/a1028776?cntxt=a1000056>