

HEALTH LEVEL SEVEN PLANS RBAC EFFORT

Health Level Seven (HL7) accepted the Healthcare Role-Based Access Control (RBAC) Task Force (TF) proposal to create a permission vocabulary as part of its family of standards at the May '04 Working Group Meeting. A worldwide permission standard will enable secure interoperability both within healthcare enterprises and with healthcare business partners never before possible.

The HL7 Security Special Interest Group (SIG) accepted the Healthcare RBAC TF proposal to revitalize Security as a Technical Committee and keeper of a proposed HL7 RBAC permission standard. The Security SIG was previously on the track to disband. This proposal and the subsequent cooperation among the SIG members laid crucial groundwork to support the planned presentation to the HL7 Board of Directors in May '04. It is the intention of the Security SIG to become the collector and keeper of the RBAC permission catalog.

Permission definitions are important aspect of RBAC. Roles and permissions must be defined before RBAC can be implemented within an enterprise. Standard permission sets must be defined before supporting inter-organization interchange. The specification will promote interoperability among healthcare organizations, strengthen intra and extra-enterprise security infrastructures, and provide essential healthcare specific RBAC content enabling scaleable healthcare service oriented architectures for identity and access management.

ASTM E-31 REVITALIZES PRIVILEGE MANAGEMENT INFRASTRUCTURE

American Society for Testing and Materials (ASTM) has begun a Privilege Management Infrastructure (PMI) effort with unprecedented involvement from industry (e.g. Sun, Sentillion, IBM, Siemens). This effort, which stagnated for two years, was revitalized at the ASTM meeting in May '04. PMI provides a framework for integrating various components and other standards, such as HL7 and OASIS, into a comprehensive whole. PMI will support interoperability among business partners and within the healthcare community.

HEALTHCARE SCENARIO ROADMAP – DATA MODELING EFFORT

The Veterans Health Administration (VHA)/Indian Health Service (IHS) Role-Based Access Control (RBAC) Task Force (TF) has begun modeling the detailed clinical activities identified within the Healthcare Scenario Roadmap. The activities are being recorded into text-based scenarios and modeled into Unified Modeling Language (UML) Sequence Diagrams. After VHA/IHS RBAC TF approval, this data will be recorded into the RBAC Website.

The Healthcare Scenario Roadmap was developed during weekly discussions by clinicians on the VHA/IHS RBAC TF from the ASTM E-1986 Standard Guide for Information Access Privileges to Health Information list of "Healthcare Personnel that Warrant Differing Levels of Access Control". It was presented in May 2004 to both Health Level Seven (HL7) and American Society for Testing and Materials (ASTM). The roadmap can function as a foundational tool to assist in defining the scope of the RBAC modeling effort, as well as be utilized as a quick reference of healthcare scenarios. The roadmap presents scaleable management of user permissions in the form of a list of tasks as a healthcare standard.

APPROVAL OF ROLE ENGINEERING PROCESS

The *Role Based Access Control (RBAC) Role Engineering Process, Version 3.0* document underwent a peer review during April '04 and was formally approved by the Healthcare RBAC TF at the beginning of June '04. The voting members include VHA, Department of Defense (DoD), IHS and Kaiser Permanente. Three votes were affirmative. Kaiser Permanente abstained from voting due to the retirement of their RBAC Chair late last year and is currently re-grouping their RBAC TF.

The RBAC Website is located at <http://www.va.gov/RBAC/index.htm>. Please direct questions and comments to Dawn Bollmann, RN, BSN (Dawn.Bollmann@med.va.gov), the technical lead and point-of-contact for RBAC Task Force activities.