Board Book
Enterprise Architecture–Driven Business Transformation
Healthcare Multi-Product Enterprise

This board book provides a complete, end-to-end view of how Enterprise Architecture enables business transformation, risk reduction, financial discipline, and sustainable growth. It is written for Board members, Audit & Risk Committees, and Executive leadership.

1. Board Context & Mandate

Healthcare enterprises are under simultaneous pressure to reduce cost, improve quality, digitize services, adopt AI, and maintain regulatory compliance. Traditional IT-led transformations fail because they lack business ownership, financial discipline, and operating model change. The Board mandate is to ensure transformation delivers measurable value while reducing enterprise risk.

2. Transformation Imperative

Without intervention, costs rise 8–12% annually, integration sprawl increases risk, data trust erodes, and innovation slows. Enterprise Architecture (EA) is repositioned as a business control system that aligns strategy, investment, execution, and risk.

3. Strategy-to-Execution Model

Strategy is translated into Business Architecture (capabilities and value streams), then into a Target Operating Model, and finally into platforms, products, and metrics. This creates traceability from Board objectives to daily execution.

4. Business Architecture – Capabilities

Capabilities define what the enterprise does independent of systems. Core domains include Care Delivery, Member Experience, Provider Operations, Claims & Finance, Data & AI, Platform Services, and Security & Compliance. Funding, ownership, and metrics are aligned to capabilities rather than projects.

5. Value Streams & Outcomes

Value streams describe how outcomes are delivered end-to-end: Member Lifecycle, Care Delivery Lifecycle, Population Health, and Product Delivery. They expose bottlenecks, cost leakage, and automation opportunities, allowing targeted investment.

6. Target Operating Model

The TOM separates platform from product, establishes federated ownership, embeds security by design, and enables self-service with guardrails. It defines how work is funded, prioritized, governed, and measured.

7. Organization, Roles & Skills

New roles include Capability Owners, Platform Product Managers, Data Product Owners, and Security Architects. Teams are aligned to outcomes and supported by enablement functions such as SRE and DevEx.

8. Governance & Decision Rights

Governance is lightweight and automated. The Board approves strategy and funding envelopes, executives release funds quarterly, and standards are enforced through policy-as-code. Exceptions are time-boxed and tracked as debt.

9. Architecture Model (EA, SA, AA)

Enterprise Architecture sets guardrails, Solution Architecture reduces program risk, and Application Architecture ensures quality delivery. Alignment is enforced automatically through pipelines and templates.

10. Platform Strategy

Shared platforms (identity, API, data, events, security) reduce duplication, accelerate delivery, and lower risk. Platforms are funded as products with roadmaps and SLAs.

11. Data, Analytics & AI Strategy

A governed lakehouse and data mesh enable trusted analytics, ML, and GenAI. All AI is auditable, explainable, and compliant with clinical safety requirements.

12. Security, Privacy & Risk Model

Zero Trust Architecture, continuous compliance, and automated audit evidence reduce regulatory exposure. Security spend is treated as risk insurance, not overhead.

13. Delivery & Execution Model

Work flows from portfolio intake to capability prioritization to product backlogs and continuous delivery. Progress is measured through leading indicators, not milestones.

14. Financial Model (Cost vs Value)

Platform investment is front-loaded. Value is realized through reuse, speed, operational efficiency, and risk avoidance. Break-even occurs in Year 2 in the base case.

15. Sensitivity Analysis

Best, base, and worst case scenarios show downside is controlled and upside is significant. Key levers are adoption speed and platform reuse.

16. Scenario-Based Funding Plan

Funding is released quarterly based on outcomes. In worst-case scenarios, funds shift to enablement and governance; in best-case scenarios, investment accelerates.

17. Metrics, KPIs & Dashboards

The Board sees value, risk, reuse, and trust metrics. Executives see delivery health. Teams see operational KPIs.

18. EA Adoption & Enforcement

EA compliance is mandatory through portfolio gating and automated guardrails. This prevents architecture drift and waste.

19. Regulatory & Audit Readiness

Evidence is generated automatically through pipelines. Audits become continuous rather than disruptive events.

20. Transformation Roadmap (18–36 months)

Phase 1 establishes platforms and standards. Phase 2 migrates priority capabilities. Phase 3 optimizes cost and scales AI.

21. Board Oversight Model

Quarterly reviews focus on value realization and risk. The Board intervenes only when trigger thresholds are crossed.

22. Decisions Requested from the Board

Approve multi-year platform funding, endorse operating model change, mandate architecture compliance, and adopt quarterly outcome-based oversight.