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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
14/199,162	03/06/2014	Damodar Karra	27098.224532	2658

46169 7590 09/30/2019

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EXAMINER	
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ART UNIT	PAPER NUMBER
3686	

NOTIFICATION DATE	DELIVERY MODE
09/30/2019	ELECTRONIC

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UNITED STATES PATENT AND TRADEMARK OFFICE

BEFORE THE PATENT TRIAL AND APPEAL BOARD

Ex parte DAMODAR KARRA and RAMCHANDRAN K. BALA

Appeal 2018-005625[1]
Application 14/199,162[2]
Technology Center 3600

Before ANTON W. FETTING, PHILIP J. HOFFMANN, and BRADLEY B. BAYAT, *Administrative Patent Judges*.

BAYAT, *Administrative Patent Judge*.

DECISION ON APPEAL

Appellants appeal under 35 U.S.C. § 134(a) from the Examiner's decision rejecting claims 1–29, which are all the claims pending in the application, under 35 U.S.C. § 101 as directed to a judicial exception without significantly more. We have jurisdiction under 35 U.S.C. § 6(b).

We AFFIRM.

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[1] Our Decision references Appellants' Appeal Brief ("Appeal Br.," filed Jan. 8, 2018), Reply Brief ("Reply Br.," filed May 7, 2018), the Examiner's Answer ("Ans.," mailed Mar. 7, 2018), and Final Office Action ("Final Act.," mailed July 6, 2017).

[2] Appellants identify "Cerner Innovation, Inc." as the real party in interest. Appeal Br. 4.

STATEMENT OF THE CASE

Claimed Subject Matter

Appellants' claims "relate to patient care plan determination. Specifically, the present embodiments relate to determining patient care plan options automatically using patient and facility characteristics as well as cost and quality data." Spec. ¶ 2. Independent claim 1, reproduced below with bracketed notations (Appeal Br. 30 (Claims App.)), is illustrative of the subject matter on appeal.

1. A method for patient care plan determination for a patient, the method comprising:

[(a)] identifying, with at least one processor, at least one patient care plan to be implemented from a plurality of patient care plans based on topical characteristics of the patient, wherein the plurality of patient care plans comprise care plan components and care plan characteristics, the care plan characteristics comprise an indicated effectiveness for treating conditions, and each of the care plan components of the at least one patient care plan to be implemented are associated with a cost;

[(b)] designating, with the at least one processor, at least one identified care plan as a candidate care plan when at least one patient care plan characteristic matches a first at least one clinical characteristic of the patient;

[(c)] determining, with the at least one processor, the at least one candidate care plan's indicated effectiveness for the at least one patient care plan characteristic matching the first at least one clinical characteristic of the patient;

[(d)] determining, with the at least one processor, the compatibility of the at least one candidate care plan with the patient, wherein the at least one candidate care plan components are analyzed for a conflict with a second at least one clinical characteristic of the patient, wherein the determining comprises

> [(1)]) identifying the care plan components of the at least one candidate care plan,
>
> [(2)] determining an established goal associated with the second at least one clinical characteristic of the patient,
>
> [(3)] generating a compatibility threshold at least partially based on the established goal,
>
> [(4)] comparing the care plan components with the compatibility threshold, wherein when the care plan components meet or exceed the compatibility threshold the at least one candidate care plan is determined to be compatible with the second at least one clinical characteristic of the patient;

[(e)] designating, with the at least one processor, the at least one candidate care plan as a preferred candidate care plan when the at least one candidate care plan is compatible with the second at least one clinical characteristic of the patient;

[(f)] determining, with the at least one processor, a cost of the at least one preferred candidate care plan, the cost based on the costs of the care plan components;

[(g)] providing, through a graphical user interface, in real-time the at least one preferred candidate care plan to a user, the providing comprising providing the indicated effectiveness for treating conditions of the preferred candidate care plan and associated cost of the preferred candidate care plan;

[(h)] receiving a selection, through an input device communicatively coupled to the graphical user interface, of at least one of the at least one preferred candidate care plan; and

[(i)] altering the patient's treatment by associating the selected at least one preferred candidate care plan with the patient's electronic medical record.

ANALYSIS

Principals of Law

An invention is patent-eligible if it claims a "new and useful process, machine, manufacture, or composition of matter." 35 U.S.C. § 101. However, the Supreme Court has long interpreted 35 U.S.C. § 101 to include implicit exceptions: "[l]aws of nature, natural phenomena, and abstract ideas" are not patentable. *E.g.*, *Alice Corp. v. CLS Bank Int'l*, 573 U.S. 208, 216 (2014).

In determining whether a claim falls within an excluded category, we are guided by the Supreme Court's two-step framework, described in *Mayo* and *Alice*. *Id.* at 217–18 (citing *Mayo Collaborative Servs. v. Prometheus Labs., Inc.*, 566 U.S. 66, 75–77 (2012)). In accordance with that framework, we first determine what concept the claim is "directed to." *See Alice*, 573 U.S. at 219 ("On their face, the claims before us are drawn to the concept of intermediated settlement, *i.e.,* the use of a third party to mitigate settlement

risk."); *see also Bilski v. Kappos*, 130 S. Ct. 3218 (2010) ("Claims 1 and 4 in petitioners' application explain the basic concept of hedging, or protecting against risk.").

If the claim is "directed to" an abstract idea, we turn to the second step of the *Alice* and *Mayo* framework, where "we must examine the elements of the claim to determine whether it contains an 'inventive concept' sufficient to 'transform' the claimed abstract idea into a patent-eligible application." *Alice*, 573 U.S. at 221 (quotation marks omitted). "A claim that recites an abstract idea must include 'additional features' to ensure 'that the [claim] is more than a drafting effort designed to monopolize the [abstract idea].'" *Id.* (alterations in original) (quoting *Mayo*, 566 U.S. at 77). "[M]erely requir[ing] generic computer implementation[] fail[s] to transform that abstract idea into a patent-eligible invention." *Id.*

USPTO § 101 Guidance

The USPTO recently published revised guidance on the application of § 101. USPTO's *2019 Revised Patent Subject Matter Eligibility Guidance*, 84 Fed. Reg. 50 (Jan. 7, 2019) ("Guidance"). Under Step 2A, Prong One of the Guidance, we determine if the claim recites a judicial exception, including particular groupings of abstract ideas (i.e., mathematical concepts, certain methods of organizing human activity, or mental processes). *Id.* at 52–53. If so, we then analyze the claim to determine whether the recited judicial exception is integrated into a practical application of that exception under Step 2A, Prong Two of the Guidance. *Id.* at 53–55; MPEP §§ 2106.05(a)–(c), (e)–(h) (9th ed. Rev. 08.2017, Jan. 2018). Only if the claim fails to integrate the exception and thus is "directed to" the judicial exception, do we then look to whether the claim adds a specific limitation

beyond the judicial exception that is not well-understood, routine, and conventional activity in the field or whether the claim simply appends well-understood, routine, and conventional activities previously known to the industry, specified at a high level of generality, to the judicial exception. Guidance, 84 Fed. Reg. at 56.

Alice Step 1

Does claim 1 recite a judicial exception?

Under the first step of the *Alice* inquiry, the Examiner determined "Claim[s] 1–29 are directed to the abstract idea of receiving care plan informant, analyzing it to determine a preferred car plan, and displaying the results to the user." Final Act. 2. According to the Examiner:

> Claim 1 recites the method for performing the steps of identifying at least one patient care plan (i.e. collecting information), determining indicated effectiveness for the at least one patient care plan (i.e. analyzing information), determining the compatibility with the patient (i.e. analyzing information), generating a compatibility threshold (i.e. analyzing information); comparing the care plan components with the compatibility threshold (i.e. analyzing information); determining a cost factor (i.e. analyzing information); providing preferred care plan to a user (i.e. displaying certain results). The processes in these steps can be performed mentally.

Id. at 3.

Appellants argue claims 1–29 as a group. *See* Appeal Br. 28. We select independent claim 1 as the representative claim for this group, and, thus, claims 2–29 stand or fall with claim 1. 37 C.F.R. § 41.37(c)(1)(iv). In particular, Appellants argue that the Examiner "has failed to provide any reasoned rationale" (Appeal Br. 13) in support of the rejection, and that the claims are directed to "a specific improvement in how computers carry out a

basic function," and, thus, directed to patent eligible subject matter. *Id.* at 19. We are not persuaded for the following reasons.

Claim 1 recites "[a] method for patient care plan determination for a patient" comprising nine steps: (a) "identifying . . . at least one patient care plan to be implemented from a plurality of patient care plans based on topical characteristics of the patient, wherein the plurality of patient care plans comprise care plan components and care plan characteristics, the care plan characteristics comprise an indicated effectiveness for treating conditions, and each of the care plan components of the at least one patient care plan to be implemented are associated with a cost;" (b) "designating . . . at least one identified care plan as a candidate care plan when at least one patient care plan characteristic matches a first at least one clinical characteristic of the patient;" (c) "determining . . . the at least one candidate care plan's indicated effectiveness for the at least one patient care plan characteristic matching the first at least one clinical characteristic of the patient;" (d) "determining . . . the compatibility of the at least one candidate care plan with the patient, wherein the at least one candidate care plan components are analyzed for a conflict with a second at least one clinical characteristic of the patient, wherein the determining comprises"

> (1) identifying the care plan components of the at least one candidate care plan,
>
> (2) determining an established goal associated with the second at least one clinical characteristic of the patient,
>
> (3) generating a compatibility threshold at least partially based on the established goal,
>
> (4) comparing the care plan components with the compatibility threshold, wherein when the care plan components meet or exceed the compatibility threshold the at

> least one candidate care plan is determined to be compatible with the second at least one clinical characteristic of the patient;

(e) "designating . . . the at least one candidate care plan as a preferred candidate care plan when the at least one candidate care plan is compatible with the second at least one clinical characteristic of the patient;" (f) "determining . . . a cost of the at least one preferred candidate care plan, the cost based on the costs of the care plan components;" (g) "providing . . . the at least one preferred candidate care plan to a user, the providing comprising providing the indicated effectiveness for treating conditions of the preferred candidate care plan and associated cost of the preferred candidate care plan;" (h) "receiving a selection . . . of at least one of the at least one preferred candidate care plan;" and (i) "altering the patient's treatment by associating the selected at least one preferred candidate care plan with the patient's medical record." *See* Claim 1 *supra*.

Under the broadest reasonable interpretation, steps (a) through (f) of claim 1 describe a process of "determin[ing] a suitable care plan for a patient having a particular medical condition from a collection of care plans" (Spec., Abstract), which can be practically performed in the human mind, and, thus, recite an abstract idea within the Guidance's mental-process grouping. *See* Guidance 84 Fed. Reg. at 52 ("Mental processes—concepts performed in the human mind (including an observation, evaluation, judgment, opinion"). For example, identifying a patient care plan from a plurality of patient care plans based on topical characteristics[3] of the patient, as recited in step (a),

[3] "Topical characteristics may include any characteristic of a patient related to the general status or existence of a patient. For example, topical

may be performed by a person *evaluating* and identifying care plan characteristics that for example "match both the age and gender of a patient" (Spec. ¶ 25), and designating that identified plan as a candidate care plan (step (b)), wherein "[t]he designation may be made by any technique" (*id.* ¶ 30), such as committing the "at least one identified care plan" to memory. Determining the candidate care plan's effectiveness for a patient care plan characteristic matching a clinical characteristic[4] of the patient (step (c)) may be performed by a person by mentally comparing and *evaluating* those characteristics. Step (d) of determining the compatibility of the candidate care plan with the patient "may be assessed using any technique capable of determining that a patient may be eligible and/or able to undergo the care plan" (*id.* ¶ 33), including mental *observation* and *evaluation*, by comparing the care plan components with the compatibility threshold (e.g., "if a cost threshold is $15,000, only care plans having a cost of equal or less than $15,000 may be passed through the filter."). *Id.* ¶ 52. Designating the compatible candidate care plan (e.g. "designated as appropriate for treating the diagnosed condition") (*id.* ¶ 50) as a preferred candidate care plan (step (e)) may be performed mentally as discussed in step (b). Finally, the act of determining a cost of the preferred candidate care plan based on costs of the care plan components, as recited in step (f), may be performed mentally "by

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characteristics may involve an age, gender, ethnicity, basic physiological findings such as height or weight, mobility of a patient, general patient habits such as alcohol intake, the geographical location of a patient, or any other basic or demographic data relating to a patient." Spec. ¶ 25.

[4] "Clinical characteristics may involve any characteristic relating to a condition of the patient. For example, clinical characteristics may involve problems or symptoms of a patient, allergies of a patient, or a diagnosis of a patient." *Id.* ¶ 31.

summing the resultant costs of each care plan component included in the care plan." *Id.* ¶ 38. The aforementioned steps of claim 1 recite evaluations that, when considered in the context of the claim as a whole, can practically be performed in the mind. Thus, claim 1 recites a concept that falls within the Guidance's mental-processes grouping.

Further, Appellants' disclosure describes the aforementioned evaluations as filtering content. According to the Specification:

> The patient characteristics may be used to initially *filter* the care plans to meet basic topical characteristics of the patient such as gender or age. Care plans may be further *filtered* based on other characteristics such as insurance applicability, performance measures, and cost characteristics of specific care plans. Care plans passing through the various *filters* may be provided to a user such that pertinent information such as cost, frequency, and effectiveness of care for each *filtered* plan may be displayed.

Spec., Abstract (emphasis added). *See also* Spec. ¶¶ 17 ("Patient care plans may be determined using the characteristics of the patient to filter a collection of patient care plans."), 47–62 (describing filtering stages and techniques). The Federal Circuit has held that "filtering content is an abstract idea because it is a longstanding, well-known method of organizing human behavior, similar to concepts previously found to be abstract." *BASCOM Global Internet Servs., Inc. v. AT&T Mobility LLC*, 827 F.3d 1341, 1346 (Fed. Cir. 2016) (hereinafter "*BASCOM*"). *See also Intellectual Ventures I LLC v. Capital One Bank (USA)*, 792 F.3d 1363, 1367 (Fed. Cir. 2015) (holding that "tracking financial transactions to determine whether they exceed a pre-set spending limit (i.e., budgeting)" is an abstract idea that "is not meaningfully different from the ideas found to

be abstract in other cases . . . involving methods of organizing human activity"); *see also Content Extraction*, 776 F.3d at 1347 (finding that "1) collecting data, 2) recognizing certain data within the collected data set, and 3) storing that recognized data in a memory" was an abstract idea because "data collection, recognition, and storage is undisputedly well-known" and "humans have always performed these functions"). An abstract idea implemented on a generic computer is still an abstract idea. *See Intellectual Ventures I*, 792 F.3d at 1368 n.2 (collecting cases).

The remaining steps (g), (h), and (i) of claim 1 describe a process of obtaining a care plan to receive health insurance coverage for a patient, which falls with the Guidance's "[c]ertain methods of organizing human activity—fundamental economic principles or practices (including hedging, insurance, mitigating risk)," and, thus, recite an abstract idea. Guidance 84 Fed. Reg. at 52. For example, step (g) recites providing the indicated effectiveness for treating conditions of the preferred candidate care plan and associated cost of the preferred candidate care plan, which "may be displayed as a list with associated data." Spec. ¶ 39. In step (h), a selection of at least one preferred candidate care plan is received, and "[a]fter selection of a care plan for a patient, [in step (i),] the care plan may be implemented and associated with the patient in a healthcare system." *Id.* ¶ 61. Essentially, the abovementioned steps describe activities a patient would engage to procure a health care plan: be presented with care plan options, select a care plan, and based on the selection, implement the selected health plan with the patient's medical record.

Thus, claim 1 recites judicial exceptions under the Guidance's groupings of abstract ideas.

Is claim 1 "directed to" the recited judicial exception?

Because claim 1 recites an abstract idea, we determine whether the recited judicial exception is integrated into a practical application. Guidance, 84 Fed. Reg. at 51. When a claim recites a judicial exception and fails to integrate the exception into a practical application, the claim is "directed to" the judicial exception. *Id.* The claim may integrate the judicial exception when, for example, it reflects an improvement to technology or a technical field. *Id.* at 55.

In that regard, Appellants argue that the present claims are similar to *Enfish*,[5] *McRO*,[6] and *Trading Technologies*.[7] Appeal Br. 19–23. We disagree. There is a fundamental difference between computer functionality improvements, on the one hand, and uses of existing computers as tools to perform a particular task, on the other. In *Enfish*, for example, the court noted that "[s]oftware can make non-abstract improvements to computer technology just as hardware improvements can." *Enfish*, 822 F.3d at 1335. The court asked "whether the focus of the claims is on [a] specific asserted improvement in computer capabilities . . . or, instead, on a process that qualifies as an 'abstract idea' for which computers are invoked merely as a tool." *Id.* at 1335–36. The court found that the "plain focus of the claims" there was on an improvement to computer functionality itself (a self-referential table for a computer database, designed to improve the way a

[5] *Enfish, LLC v. Microsoft Corp.*, 822 F.3d 1327 (Fed. Cir. 2016) (hereinafter "*Enfish*").
[6] *McRO, Inc. v. Bandai Namco Games Am. Inc.*, 837 F.3d 1299 (Fed. Cir. 2016) (hereinafter "*McRO*").
[7] *Trading Technologies International Inc. v. CQG, Inc.*, 675 F. App'x. 1001 (Fed. Cir. 2017) (hereinafter "*Trading Technologies*").

computer carries out its basic functions of storing and retrieving data), not on a task for which a computer is used in its ordinary capacity. *Id.* Appellants have not offered any persuasive evidence or technical reasoning that the computer implementation improves the functioning of the claimed "processor" itself.

In *McRO* the court asked whether the claim as a whole "focus[es] on a specific means or method that improves the relevant technology" or is "directed to a result or effect that itself is the abstract idea and merely invoke[s] generic processes and machinery." *McRO*, 837 F.3d at 1314–15 (Claims determined not abstract because they "focused on a specific asserted improvement in computer animation."). The claims in *McRO* were directed to a system of lip synchronization and facial expressions of animated characters, and the court concluded that the computerized system in *McRO* operated by rules whose implementation was not previously available manually. *Id.* at 1316. Here, in contrast to *McRO*, implementation was previously available and conducted, although without computer assistance. And, although manual review is time consuming and difficult to scale, computer-based efficiency does not save an otherwise abstract method. *See Bancorp Servs., L.L.C. v. Sun Life Assur. Co. of Canada (U.S.)*, 687 F.3d 1266, 1277–78 (Fed. Cir. 2012) (Performance by computer of operations that previously were performed manually or mentally, albeit less efficiently, does not convert a known abstract idea into eligible subject matter.). Unlike *Enfish* and *McRO*, we find the focus of the claim as a whole here is directed to a result or effect that itself is the abstract idea, because the claimed computer processor is merely invoked as a tool for automating patient care plan determination. Therefore, we determine that the claims do not "apply,

rely on, or use the judicial exception in a manner that imposes a meaningful limit on the judicial exception, such that the claim is more than a drafting effort designed to monopolize the judicial exception," i.e., the claims do not integrate the abstract idea into a practical application. *See* Guidance, 84 Fed. Reg. at 54.[8]

In *Trading Technologies*, the Federal Circuit affirmed the district court's holding that the patented claims (which recited a method and system for displaying market information on a graphical user interface) did not simply claim displaying information on a graphical user interface and were not directed to an abstract idea; instead, the claims required "a specific, structured graphical user interface paired with a prescribed functionality directly related to the graphical user interface's structure that is addressed to and resolves a specifically identified problem in the prior state of the art." *Trading Technologies,* 675 F. App'x. at 1004. In contract, Appellants' claim 1 merely recites "providing, through a graphical user interface" a preferred candidate care plan to a user, which is described in the Specification as being "performed using the workstation" or a general purpose computer. Besides using a GUI as a tool in its ordinary capacity, Appellants have not shown that the claimed invention reflects an improved interface.

We look to the background of the Specification to assess the problems recognized and solution advanced by Appellants, because "[t]he 'abstract idea' step of the inquiry calls upon us to look at the 'focus of the claimed advance over the prior art' to determine if the claim's 'character as a whole' is directed to excluded subject matter." *Affinity Labs of Tex. v.*

[8] For purposes of maintaining consistent treatment within the Office, these considerations are made under Step 1 of *Alice* (Step 2A of Office guidance).

DirecTV, LLC, 838 F.3d 1253, 1257 (Fed. Cir. 2016 (quoting *Elec. Power Grp., LLC v. Alstom S.A.*, 830 F.3d 1350, 1353 (Fed. Cir. 2016)); *see also Enfish,* 822 F.3d at 1335. According to the Specification, "[t]he multitude of factors involved in determining a care plan can cause the manual creation of patient care plans to be inefficient and time consuming for a health care system user in a facility." Spec. ¶ 5. Appellants solved this problem by "determining patient care plan options *automatically* using patient and facility characteristics as well as cost and quality data." *Id.* ¶ 2 (emphasis added). This notion is reinforced by Appellants' statement that "the current claims allow for an automated process by removing human subjectivity in determining appropriate care plans to consider in the treatment of a patient." Appeal Br. 23. Efficiency through automation reflected in steps (a)–(f), which Appellants argue is the technological improvement over the prior art (*id.*), does not reflect an improvement to the functioning of the claimed processor but rather invokes the computer as a tool in its ordinary capacity to filter content efficiently. *See Secured Mail Sols. LLC v. Universal Wilde, Inc.*, 873 F.3d 905, 910 (Fed. Cir. 2017), *cert. denied*, 138 S. Ct. 2000 (2018) ("The fact that an identifier can be used to make a process more efficient, however, does not necessarily render an abstract idea less abstract.").

We agree with the Examiner (Final Act. 3–4; Ans. 5–6) and find that the additional elements which claim 1 recites ("the at least one processor," "a graphical user interface," and "an input device communicatively coupled to the graphical user interface") do not integrate the judicial exception into a practical application. Notably, the claim does not recite, and the Specification does not describe, an improvement to the functioning of a

computer, or to any other technology or technical field. Nor are the additional elements directed to a particular machine or transformation. Essentially, the recited processor executes the abstract idea. The Specification discloses that the processor can be a general-purpose processor having a graphical user interface executing a program. Spec. ¶¶ 65, 91. A particular machine or manufacture that is integral to the claim indicates that the abstract idea has been integrated into a practical application. Guidance, 84 Fed. Reg. at 55. But a general-purpose processor that merely executes the judicial exception—as is the case here—is not a particular machine. *Ultramercial, Inc. v. Hulu, LLC*, 772 F.3d 709, 716–17 (Fed. Cir. 2014), *cited in* MPEP § 2106.05(b)(I).

For all these reasons, the claimed method does not use the "at least one processor" in a way that indicates that the judicial exception has been integrated into a practical application. On this record, we are not persuaded that the Examiner erred in concluding that claim 1 is directed to a judicial exception.

Alice Step 2

Does claim 1 provide an inventive concept?

To determine whether a claim provides an inventive concept, the additional elements are considered—individually and in combination—to determine whether they (1) add a specific limitation beyond the judicial exception that is not well-understood, routine, and conventional in the field or (2) simply append well-understood, routine, and conventional activities previously known to the industry, specified at a high level of generality, to the judicial exception. Guidance, 84 Fed. Reg. at 56.

Under step two of the *Alice* framework, Appellants argue that the claims include limitations that recite significantly more than the abstract idea because of their similarity to *BASCOM* and *Amdocs*.[9] Appeal Br. 23–27. We cannot agree.

Appellants' reliance on *BASCOM* for *Alice* Step 2 analysis is misplaced. In *BASCOM*, the Federal Circuit held that "[t]he inventive concept described and claimed in the '606 patent is the installation of a filtering tool at a specific location, remote from the end-users, with customizable filtering features specific to each end user." *BASCOM*, 827 F.3d at 1350. The court explained that the remote location of a filtering tool having customizable user-specific filtering features provides the filtering tool both the benefits of a filter on a local computer and the benefits of a filter on the ISP server, which is a technical improvement over prior art ways of filtering content. *Id.* at 1350–51. Here, Appellants have not demonstrated any particular arrangement in the claim as providing an inventive concept parallel to *BASCOM's* technology-based solution.

In *Amdocs*, the court held that "[claim 1] is eligible under step two because it contains a sufficient 'inventive concept.'" *Amdocs*, 841 F.3d at 1300. The claim at issue recited "computer code for using the accounting information with which the first network accounting record is correlated to enhance the first network accounting record." *Id.* The court explained that the "claim entails an unconventional technological solution (enhancing data in a distributed fashion) to a technological problem (massive record flows [that] previously required massive databases)." *Id.* The court noted that,

[9] *Amdocs (Israel) Limited v. Openet Telecom, Inc.*, 841 F.3d 1288 (Fed. Cir. 2016) (hereinafter "*Amdocs*").

although the solution requires generic computer components, "the claim's enhancing limitation necessarily requires that these generic components operate in an unconventional manner to achieve an improvement in computer functionality." *Id.* at 1300–01. When determining that the claim was patent eligible, the Federal Circuit explained that the "enhancing limitation necessarily involves the arguably generic gatherers, network devices, and other components working in an unconventional distributed fashion to solve a particular technological problem." *Id.* at 1301. The court distinguished the claim from the claims held unpatentable on the grounds that the "enhancing limitation . . . necessarily incorporates the invention's distributed architecture—an architecture providing a technological solution to a technological problem." *Id.* (citations omitted). But unlike the generic components at issue in *Amdocs*, the generic components recited in claim 1 here do not operate in an unconventional manner to achieve an improvement in computer functionality.

We agree with the Examiner that the recited processor's activity is well-understood, routine, and conventional in the field. Final Act. 4. Specifically, using a computer only for its most basic function, the filtering of content by comparing and matching data," fails to impose meaningful limits on the claim's scope. The recited processor performs operations that can practically be performed mentally, which suggests that the method only requires a computer with basic functions. Indeed, as discussed above, the Specification discloses that the recited processor can be a general-purpose processor. Spec. ¶ 65. Because claim 1's method uses this general-purpose processor to execute the abstract idea, the recited processor adds nothing more than well-understood, routine, and conventional activity, specified at a

high level of generality, to the abstract mental process. *See* MPEP § 2106.05(d)(II)(ii).

Thus, the steps—considered individually and in combination—do not provide an inventive concept. Accordingly, we sustain the rejection of independent claim 1 under 35 U.S.C. § 101, and claims 2–29, which fall with claim 1.

DECISION

The Examiner's rejection under 35 U.S.C. § 101 is affirmed.

No time period for taking any subsequent action in connection with this appeal may be extended under 37 C.F.R. § 1.136(a).

AFFIRMED