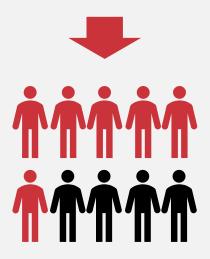
## AI IN HEALTHCARE Touchstones for Responsible Use

38%

of U.S. adults believe using AI would lead to better health outcomes<sup>1</sup>



60% patients do not trust the use of Al in their healthcare<sup>2</sup>

AI APPLICATIONS IN HEALTHCARE<sup>3</sup>



Diagnoses & Treatment Recommendations



Patient Engagement & Medical Adherence



Administrative Activities

Integration of artificial intelligence (AI) tools in healthcare brings great opportunities as well as challenges. AI use promises improved quality, safety, and care equity by enabling real-time data analysis to support clinical decision-making and personalized treatment. At the same time, risks of biases and lack of transparency pose safety and accessibility threats if deployed without appropriate safeguards.

As the leading organization for clinical informatics, the American Medical Informatics Association (AMIA) recommends responsible development and oversight of healthcare AI to encourage innovation while prioritizing patient wellbeing, guided by the following standards.

Al Must Be A Driver Of Transparency.

**Transparency** in planning, designing, developing, validating, deploying, and monitoring and maintaining AI tools is the primary way to **avoid unintended consequences.** 

- There are cases in which using an AI tool in a context or population in which it had not been tested or validated was shown to produce erroneous or misleading results
- Over-reliance on AI decisions in some aspects of healthcare is premature as there have even been uses shown to produce results completely counter to the intent

Health data must always be collected, managed, and shared in ways that reduce the risk of harm to individuals' privacy.

Minimize Or Limit Any Possible Increase In Documentation Burden For Providers And Patients Caused By Policies Regulating The Use Of Al Tools In Healthcare.

Al has groundbreaking potential to reduce oppressive administrative burden for providers and patients.

Eliminating documentation redundancies while maintaining patient data accuracy, reducing errors, and increasing quality of care should be a major focus of any efforts to incorporate AI into healthcare tools.<sup>4</sup>

- . Report | Pew Research Center, 2023
- . Survey | Carta Healthcare, 2023
- 3. <u>Al in Healthcare</u>: Transforming the Practice of Medicine | Royal College of Physicians
- 4. See AMIA's 25x5 Task Force



## Develop Healthcare AI Tools with Ethical Principles.<sup>1</sup>

**Use FAIR Sources.** Data used for AI must be of the highest quality, applied appropriately, address merits and limitations when used, and adhere to Findable, Accessible, Interoperable, and Reusable (FAIR) principles.<sup>2</sup>

**Structure Accountability.** All harm and unintended consequences must be reported, assessed, monitored, measured, and mitigated as needed. Response to complaints and redress must be guaranteed.

**Secure Individual and Population Data.** An individual's privacy protections must be consistently maintained, and their privacy preferences respected across clinical, research, community services, and commercial use of their health data.

**Protect Vulnerable Populations.** All applied to vulnerable populations requires increased scrutiny and appropriate community involvement to avoid worsening inequity in healthcare.

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## Al Should Reduce Prior Authorization Burden and Decrease Delays and Denials

Prior Authorization (PA) is a major source of burden for clinicians, health systems, and patients. AMIA believes that PA must be eliminated or, at minimum, reformed due to the required onerous documentation needed to support it.<sup>3</sup> AI tools can reduce delays and denials while enabling identification and elimination of excessive or inappropriate care delivery. To ensure AI has every opportunity to achieve this potential:

- Require transparency from payors on the function and use of the AI tool in their PA
  processes, including medical necessity determinations.
  - For example, allow third-party auditors to review AI algorithms and decisions and implement feedback mechanisms to refine AI accuracy.
- 2. Al tools alone may not be used by payors to deny PA requests.
  - Al generated denials should not override point-of-care clinical decision-making.
  - Al tools should create personalized care plans not incentivize generalized care.
- 3. Improve interoperability standards for integrating AI tools with EHRs for PA requests.
  - Work with the Assistant Secretary of Technology Policy (ASTP) to improve integration
    of AI tools into the EHR.

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## Collaborate with clinical informaticians when developing and implementing AI policies.

We strongly encourage Congress to leverage the decades of real-world AI expertise of AMIA members. AMIA's diverse membership spans healthcare companies creating AI tools, hands-on clinicians, and medical researchers. Additionally, AMIA works closely with Harvard's Division of Clinical Informatics (DCI), CHAI, the Health AI Partnership (HAIP), the National Academy of Medicine (NAM), and other leading experts on responsible AI integration in healthcare.

- Wilkinson MD, Dumontier M, Aalbersberg IJ et al. The FAIR Guiding Principles for scientific data management and stewardship. Scientific Data. 2016;3 (1): 160018.
- 2. See AMIA Policy Principles.
- 3. See AMIA 25x5 Recommendations to Reform PA

