Scaling Artificial Intelligence Governance Across a Large Healthcare System

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Annual Conference 2024 *Building the Future of Health Together*



Presenter

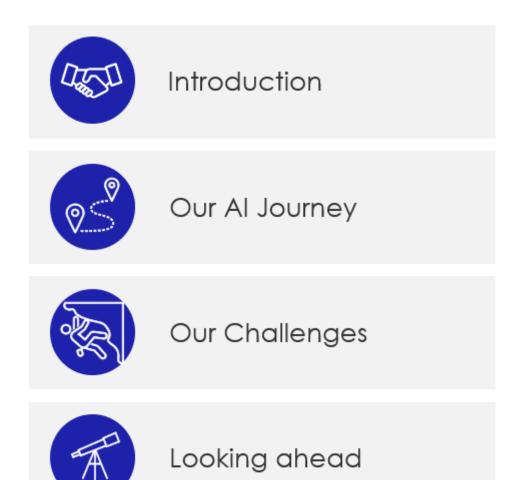


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Agenda



Learning Objectives



Identify

Identify strategies needed to scale AI Governance



Discuss

Share UNC's ways to bring external vendors into your own Al governance journey

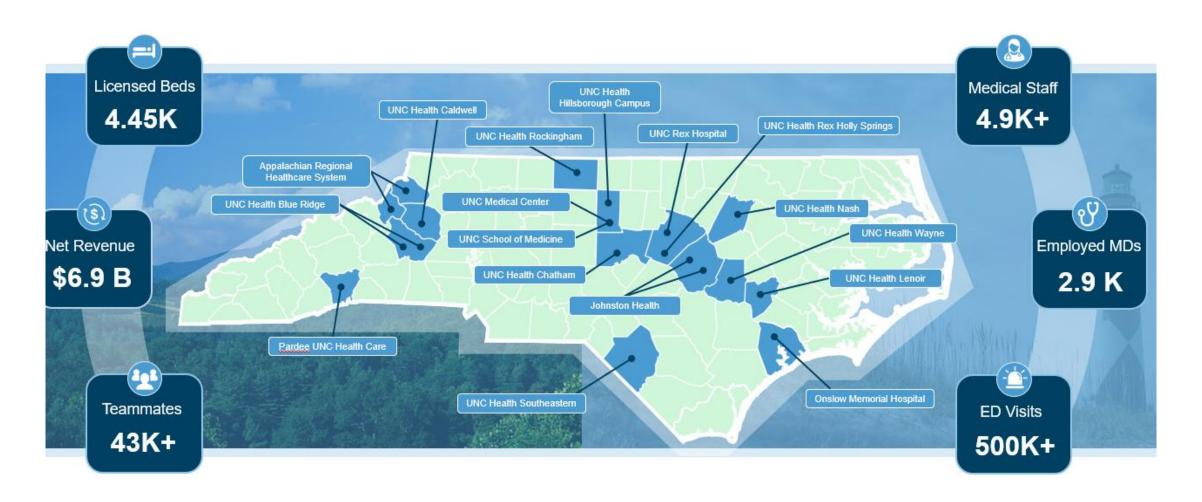


Explain

Describe how IT governance and AI governance work hand in hand to create sustainable process



Quick Overview: UNC Health

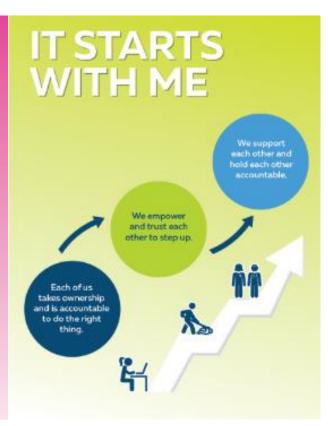


System Values









We are a leader in applied/operational Al

Started Adopting in 2016 and focused on developing/implementing solutions that address system's need



Optum's Computer-Assisted Coding "reads" records, identifies discrepancies and suggests appropriate coding



Supports proper reimbursement



Internally developed case duration tool improves OR scheduling, boosting access and revenue



28.5% more accurate than the native EHR model



Internally developed sepsis detection model is more accurate than the EHR's native model, improving care



Improves order set usage and reduces false alerts



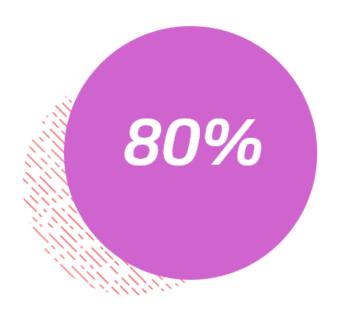
Other additional valueadded Al solutions

Impact of AI in patients and providers



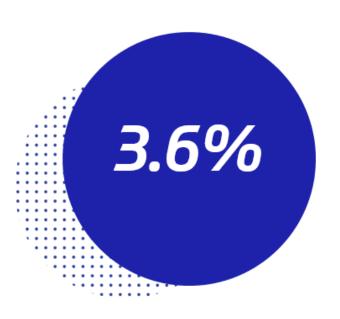
Decreased False Alerts

The ED model decrease alerts by 58% monthly when compared to original SIRs_rule-based Model



High Sepsis Detection Rate

The model has maintained a sensitivity of 80 % for detecting sepsis cases



Mortality Reduction

Mortality rate in the last 6 months (3/23-8/23) decreased by 3.6% compared to rate in the 6 months before implementation

As AI in healthcare continues its rapid growt the need of responsible A framework becomes mor and more apparent.



Opportunity to provide better care

A boy suffering chronic pain for 3 years finally receives correct diagnosis from ChatGPT (https://people.com/boy-suffering-chronic-pain-for-3-years-finally-receives-diagnosis-via-chatgpt-7968393)



Promises to save money

Al could save up to \$360 billion annually if adopted widely

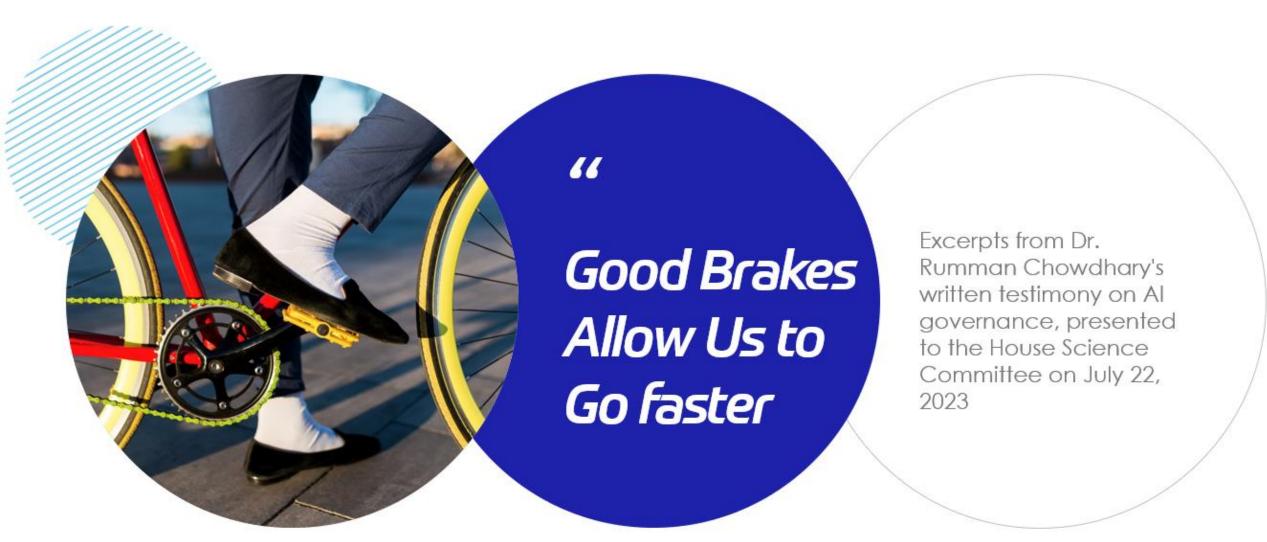
(https://www.healthcaredive.com/news/artificial-intelligence-healthcare-savings-harvard-mckinsey-report/641163/)



Discomfort on use of AI in health care

60% of American would be uncomfortable with provider relying on AI in their own health care.

(https://www.pewresearch.org/science/2023/02/22/6 0-of-americans-would-be-uncomfortable-withprovider-relying-on-ai-in-their-own-health-care/)



https://republicans-science.house.gov/_cache/files/6/8/68b1083c-d768-4982-a8f9-74b0e771a2bc/E551A6FE9CEB156D4DE626417352ED0E.2023-06-22-dr.-chowdhury-testimony.pdf

Scaled AI Governance as Need and Scope of AI Changed Over Time

2016 (Team)

2018 (Departments)

2023 (Enterprise)







Assessment of the use case
Peer review, model cards
and summary

Teammates across IT functions

Clinical workflow consideration

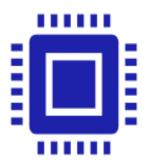
Model management and

Multi disciplinary team
across system
Standard framework and
charter
Systemwide AI model

Al Governance Part of Existing IT Governance Structure





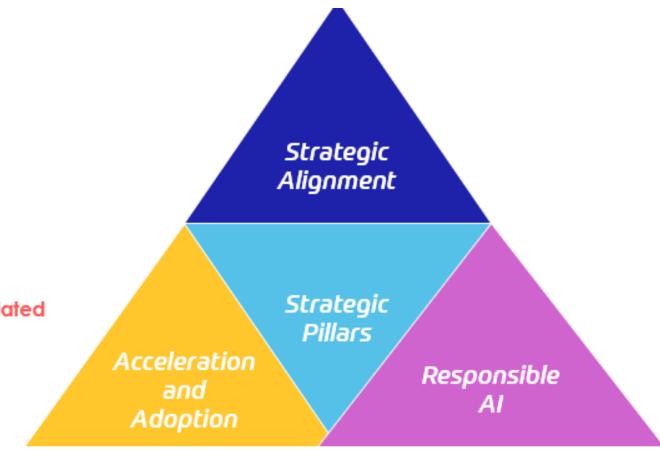


Process streamlined and efficient

conversation of **funding** became easier

Funding, Security, Enterprise Architecture, Responsible AI are part of **final decision** on a vendor or application selection process

System Workgroup With Clear Charter



Al and Automation workgroup for all Al related decisions/recommendations

Group meets monthly to discuss/strategize on responsible Al acceleration and adoption.

Standard set of definitions for Vendor and Internal Developed Al solutions

<u>Criteria 1</u>*:

Does this tool / application qualify as an AI tool?

Al includes algorithms that classify, analyze, and draw predictions from data while also learning from new data to make the algorithms more powerful and accurate over time.

Full Audit / Review Evaluated by the technical Alexant expert group and AAA. AAA determines whether to perform a full or limited review. AAA determines whether to perform a full or limited Audit / Review Evaluated Audit / Review Evaluated Audit / Review Evaluated only by the technical Alexant expert group.

<u>Criteria 2</u>*: Is there any associated risk

is there any associated risk with this tool / application?

e.g., those affecting clinical or operational decisions, with the potential for misuse, or that might impact equitable care (e.g., staffing or resource allocation).

Standard but Evolving Framework

Fairness:

Designing AI models to ensure equity and justice

- · Train model on right population
- · Investigate potential biases
- Compare outcomes of populations

Accountability:

Clear roles and accountability from idea inception to AI deployment

- · Assian owners and roles
- · Track model performance
- · Establish evaluation process



Transparency:

Transparent and compliant Al decision-making

- Explain use cases, usage, & limitations
- Provide input variables
- Define a maintenance process

Trustworthiness / Education:

Educating clinicians and operational users about Al

- · Compare model w/ clinical practice
- Define decision/actions pathways
- Make variables visible at time of decision

Deliberate Plurality of Voices in Al Governance Platform

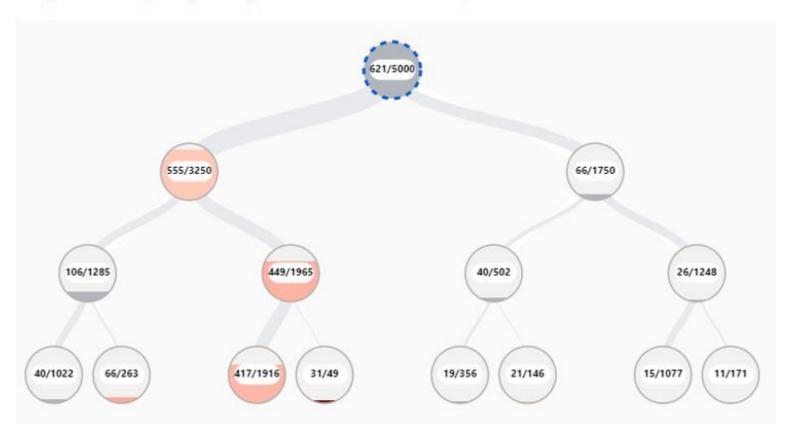
16-voting members representing different functions/units

Consensus will be sought but majority will make decision if there is no consensus

- Clinical Informatics
- Analytics, Security
- Care Access
- Entity leaders
- Ethics
- Human Resources
- Innovation
- Legal
- Nursing
- Pharmacy
- Pop Health
- Privacy
- Providers
- Revenue

Reliable and continuous monitoring framework

Process of discovering and highlighting common failure patterns



Challenges



Challenges



Evolving definition of Al



Data and Al Fiduciary



Resources and Training



Centralized vs federated governance model

Looking Ahead



Broader adoption



Aligning with state and federal government agencies



Al education to teammates and leaders



Support model

Questions



Thank you.

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