



**Pennsylvania House of Representatives - House Insurance Committee
Public Hearing on Artificial Intelligence in Health Care
October 1, 2024 at 9 a.m. - 60 East Wing, Pennsylvania Capitol Building**

**Testimony of R. Hal Baker, MD, Senior Vice President and Chief Digital
and Chief Information Officer, WellSpan Health**

Thank you to Chair Kim and Chair Pickett and the Members of the House Insurance Committee for inviting us here today.

My name's Dr. Hal Baker, senior vice president and chief digital information officer at WellSpan Health. I'm happy to be here today to talk about a subject that is changing healthcare – and health outcomes. And that's artificial intelligence – AI.

I'm glad to be joined today by my colleague, Kasey Paulus, senior vice president and chief nursing executive for WellSpan Health, who helps lead our AI work and will join me during the Q/A session.

With the significant breakthrough in artificial intelligence, what are the possibilities when applied to healthcare?

At WellSpan, we think the possibilities are numerous. This marriage of human expertise with technology is already saving and changing lives. Effective integration of AI will ultimately enhance personalization, allow for more high-touch interactions, increase speed and efficiency, and improve quality and safety.

But before I share some examples, it's important to note that we are implementing AI solutions responsibly – always with patient privacy and protection in mind.

WellSpan is among 28 healthcare systems and payers that voluntarily pledged to support responsible use of AI in health care under an initiative of the U.S. Department of Health and Human Services' Office of the National Coordinator for

Health IT. This commitment includes a number of priorities and safeguards. Here are a few:

We're committed to developing AI solutions to optimize healthcare delivery and payment by:

- expanding access,
- making healthcare more affordable,
- improving outcomes through more coordinated care,
- improving patient experience,
- advancing health equity,
- and reducing clinician burnout.

We are guided by what are called “FAVES” principles: that we will work with our peers and partners to ensure outcomes are aligned with **fair, appropriate, valid, effective, and safe**.

As part of this commitment, we will also inform users if content is AI-generated and not reviewed or edited by a human.

At WellSpan, we ensure a human is in control in any diagnostic or treatment use of AI.

Computers and technology add infinite value – but we know they don't replace human empathy, expertise and judgment – and we believe that's of utmost importance as we implement AI solutions to provide cutting-edge care to our patients.

We also carefully determine how and when we share healthcare data for AI training, making case-by-case determinations. And we remain continually conscious of the risk of underlying bias in the AI or the training data algorithm.

At WellSpan Health, we are seeing significant positive results. Some examples include:

The use of **ArtiSight** – an AI- technical platform – identifies potential fall risks before a human can notice them, improving patient safety.

A pilot program at WellSpan Surgery & Rehabilitation Hospital in York has demonstrated positive results, including: a 52% reduction in patient falls; a 19% increase in patient experience scores; and 86% of nurses reported that virtual programs greatly improved/improved patient safety on the unit.

The technology is now also in use throughout WellSpan – and will change how we provide nursing care.

A second example is the use of AI to speed and accuracy. Our pioneers in this area have been WellSpan radiologists – who have used a tool called **Aidoc** to benefit our patients. Aidoc uses AI to immediately review imaging results for abnormalities that may or may not be noticed by the human eye.

This AI solution reviews the images from our CT scans in the cloud within three minutes, highlighting, prioritizing, and escalating the most concerning critical findings for the radiologist to assess and validate. In some instances, up to 81% faster for positive cases than traditional review. It prioritizes studies to be read first if the AI finds important abnormalities, thus ensuring more timely care to those who will have positive imaging findings.

That allows us to identify the best “next steps” for a patient sooner.

We’ve performed 152,000 AI-powered diagnostics in one year with Aidoc alone (we have multiple solutions in action now); which identified 8,000 positive cases of various health concerns.

Not only does it help radiologists read with higher accuracy; AI-powered diagnostics have improved the speed of reading positive studies by 77% over the prior workflow; and the benefit to our productivity is tangible—our diagnostic service performs 20% above industry benchmark.

For my last example, how many times have you been at a health care visit, and the provider is focusing most of their attention on the computer, instead of you, because they’re busy typing what you’re saying?

To address this issue, we’ve implemented Dragon Ambient eXperience, or **DAX**, which uses AI on top of voice recognition to listen to a conversation between a

provider and a patient and then transform that into appropriate documentation. It then converts conversations into clinical notes in a few minutes – this allows for better patient/provider interaction.

Our clinicians, including myself, have been using DAX for several years and the results are profound: enhanced patient experience, increased efficiency for busy physicians, and reduced physician burnout. Many of our team have called it a game changer.

When used appropriately, AI enables physicians, nurses and clinicians to optimize the physician-patient relationship (time with patients) and recover their professional mission by simplifying their work, decreasing time spent on administrative tasks and advancing care transformation to combat worker shortages and resource scarcity.

Finally, as this committee and the General Assembly consider options for a legislative and regulatory framework for the use of AI in healthcare, here are some ideas for you to consider.

First, the regulation of AI in health care needs to be flexible to keep up with the rapid pace of innovation and allow hospitals and clinicians to safely harness the benefits of these powerful technologies for the good of their patients.

There is a delicate balance between fully realizing the promise of AI, while managing risks of deploying these powerful technologies. As such, it is important to think about risk as a sliding scale when considering AI use in health care and how much human oversight is needed for a given application.

Technology is most effectively regulated based on how and where it is used, and this sector-specific approach would allow you to tailor the specifics of their regulation to the risks associated with the uses of the technology.

AI is not a monolithic technology, and thus a one-size-fits-all approach could stifle innovation in patient care and hospital operations. Such an approach may even prove inadequate at addressing the risks to safety and privacy that are unique to health care.

Just as software is regulated based on its use across different sectors, we urge you to consider regulating AI's use in a similar manner.

Thank you again for the opportunity to offer testimony today. WellSpan Health stands ready to serve as a trusted partner to this committee, and the General Assembly, as we navigate how we can utilize AI to improve the lives and health outcomes of the patients we serve.

We look forward to your questions.