

Chapter 4: Creating and Capturing Value with Generative AI in Healthcare

Educational Objectives

- Analyze how Generative AI contributes to value creation in healthcare by improving quality, reducing costs, and optimizing clinical workflows.
- Evaluate the differences between creating and capturing value in AI-driven healthcare solutions and their implications for financial sustainability.
- Apply ethical principles to assess the risks of AI-driven decision-making, particularly in relation to financial incentives and patient-centered care.
- Critique AI business models, including Healthcare SaaS, AI Services-as-Software, and Tech-Enabled Clinical Services, to determine their feasibility and sustainability in different healthcare settings.
- Assess the challenges of integrating AI into clinical workflows, including resistance from healthcare staff, interoperability with EHR systems, and regulatory compliance.
- Examine the role of AI in clinical documentation and other administrative applications to determine its impact on efficiency, clinician burnout, and revenue cycle management.
- Identify strategies for mitigating bias in AI-driven healthcare applications, including algorithmic fairness reviews, human-in-the-loop oversight, and regulatory compliance.
- Investigate the ethical tensions between profitability and patient outcomes in AI-driven diagnostics, predictive analytics, and clinical decision support.
- Develop an informed perspective on how clinicians and administrators can influence the ethical deployment and financial sustainability of AI in healthcare organizations.
- Design a strategy for evaluating AI adoption in a healthcare setting by considering technological feasibility, ethical implications, financial viability, and regulatory constraints.

Introduction

The integration of Generative AI into healthcare presents both transformative opportunities and significant challenges. While AI-driven solutions promise enhanced efficiency, improved patient care, and cost reductions, their real-world impact depends on the ability to create and capture value effectively. Beyond optimizing workflows and automating tasks, AI must align with sustainable business models and ethical considerations to ensure longevity and patient-centered care.

For healthcare professionals and innovators, understanding how AI fits into the broader healthcare business model is crucial. AI implementation cannot be solely focused on technological advancement—it must also align with existing clinical workflows, financial structures, and regulatory requirements. In this chapter, we will explore how AI creates value in healthcare, common business models relevant to AI-driven solutions, and strategies for balancing efficiency with ethical responsibility.

Understanding Value Creation and Value Capture in AI

Defining Value in Healthcare AI

Value in healthcare is often framed through the Quintuple Aim, a guiding framework that seeks to improve the overall effectiveness and sustainability of healthcare. This model prioritizes five key objectives:

1. **Improve Population Health:** AI can enhance early disease detection, optimize chronic disease management, and support preventive care initiatives, leading to better overall health outcomes.
2. **Enhance Patient Experience:** AI-driven personalization, decision support tools, and automation can improve the patient journey, ensuring care is timely, compassionate, and responsive to individual needs.
3. **Reduce Costs:** By streamlining administrative workflows, optimizing resource utilization, and reducing inefficiencies, AI has the potential to significantly lower healthcare expenditures.
4. **Improve Provider Well-Being:** AI-driven automation and predictive analytics can reduce clinician workload, minimize documentation burdens, and support better decision-making, alleviating burnout and improving job satisfaction.
5. **Advance Health Equity:** AI can help identify and mitigate healthcare disparities by analyzing social determinants of health, ensuring fair and equitable access to care across diverse populations.

While the Quintuple Aim provides a comprehensive vision for healthcare transformation, for this chapter, we will focus on two fundamental metrics that define AI's success:

- **Quality of Care:** AI must contribute to better clinical outcomes by enhancing diagnostic accuracy, personalizing treatment plans, and improving decision-making. AI applications such as imaging analysis and predictive analytics must prioritize patient safety and effectiveness.

- **Cost Reduction:** AI must demonstrate financial sustainability by lowering operational costs, reducing inefficiencies, and automating administrative processes. Whether through workflow optimization, fraud detection, or reducing unnecessary procedures, AI adoption must align with economic viability.

These two dimensions—quality enhancement and cost reduction—serve as the foundation for evaluating AI's impact in healthcare.

AI Business Models and Their Impact on Quality and Cost

As artificial intelligence continues to reshape healthcare, understanding the different business models used by AI-driven companies is essential. These models not only determine how AI services are delivered and monetized but also impact the cost, adoption, and clinical value of these technologies. Below, we will explore three primary AI business models in healthcare, highlighting their benefits, challenges, and real-world applications.

1. Healthcare SaaS (Software-as-a-Service)

The Healthcare SaaS model is a traditional B2B (business-to-business) workflow software approach in which AI is embedded within cloud-based software platforms. These solutions optimize clinical workflows, data analytics, and administrative processes and are typically sold to health systems, payers, and pharmaceutical companies through subscription-based contracts (monthly or annual licensing).

Value Creation

- **Improving Quality of Care:** AI-driven SaaS platforms offer clinical decision support (CDS), predictive analytics, and workflow automation. For example, an AI-powered sepsis prediction tool integrated into an electronic health record (EHR) can identify high-risk patients, prompting early intervention and reducing mortality rates.
- **Reducing Costs:** By automating administrative tasks such as billing, coding, and appointment scheduling, AI-powered SaaS tools help hospitals reduce labor costs and improve revenue cycle management. Additionally, fraud detection algorithms can identify billing discrepancies, preventing financial losses.

Challenges in Value Capture

- **High Implementation Effort:** Many SaaS platforms require extensive integration with existing EHRs, which can be costly and time-consuming.
- **Justifying Return on Investment (ROI):** Healthcare organizations demand measurable improvements in clinical outcomes and cost savings before committing to long-term contracts.

- **Regulatory Compliance:** Handling protected health information (PHI) under HIPAA regulations means these platforms must maintain high security and compliance standards.

Example Companies

- **Epic Cognitive Computing:** AI-powered CDS integrated into EHR workflows.
- **Qventus:** Automates hospital operations, including discharge planning and operating room efficiency.
- **Olive AI:** AI-driven revenue cycle management and administrative automation.

2. AI Services-as-Software

The AI Services-as-Software model represents a paradigm shift from traditional SaaS by offering AI-powered services rather than just software tools. Instead of selling software licenses, these companies sell an outcome or deliverable that leverages AI to replace or augment human work. Pricing models typically follow a per-use, per-transaction, or service-based fee structure.

Value Creation

- **Enhancing Quality of Care:** AI-powered clinical automation reduces physician workload and enhances efficiency. For example, automated prior authorization AI can assess claims in real-time, expediting approvals for necessary procedures and reducing administrative bottlenecks.
- **Lowering Costs:** AI-based clinical documentation solutions reduce time spent on medical note-taking, while AI-driven coding and claims processing minimizes errors and improves reimbursement rates.
- **Improving Population Health:** AI-driven risk stratification tools enable earlier interventions for chronic disease management, preventing costly long-term complications. Such tools can also help automate personalized risks assessment and determination of preventive service compliance.

Challenges in Value Capture

- **Ongoing AI Model Retraining:** AI systems require frequent updates and human-in-the-loop validation to maintain accuracy and compliance.
- **Integration with EHRs:** Many healthcare systems operate on fragmented infrastructures, making it difficult to integrate AI services seamlessly.

- **Operational Costs:** Some tasks still require human oversight, increasing service delivery costs.

Example Companies

- **Abridge:** AI-powered real-time clinical documentation (medical scribing).
- **SmarterDx:** AI-driven clinical audits and claim optimization.
- **Plenful:** AI-powered back-office automation for pharmacies and hospitals.

Unlike SaaS solutions, AI Services-as-Software companies sell an outcome, rather than just access to a tool. Their goal is to replace entire manual processes instead of just improving workflow efficiency.

3. Tech-Enabled Clinical Services

The Tech-Enabled Clinical Services model integrates AI directly into healthcare delivery, meaning AI is not just supporting workflows but actively participating in patient care and clinical decision-making. This model is most commonly used in telemedicine, remote monitoring, and AI-assisted diagnostics.

Value Creation

- **Enhancing Quality of Care:** AI-powered virtual assistants and telehealth platforms help improve patient engagement and reduce time-to-diagnosis. For instance, an AI-driven dermatology app can analyze skin lesion images and provide diagnostic recommendations, allowing for faster specialist referrals.
- **Lowering Costs:** Remote patient monitoring with AI-driven predictive analytics can reduce hospital readmissions by detecting early warning signs of chronic disease exacerbations, such as heart failure decompensation or COPD flare-ups.

Challenges in Value Capture

- **Regulatory Scrutiny:** Since these solutions directly influence patient outcomes, they face higher regulatory oversight (e.g., FDA approvals for AI-driven diagnostics).
- **Significant Investment in Training & Compliance:** AI solutions used in direct clinical care require thorough validation, physician education, and regulatory compliance.
- **Clinician Resistance:** Physicians may be skeptical of AI-driven recommendations, particularly if the models are not explainable or lack interpretability.

Example Companies

- **Viz.ai: AI-powered stroke detection and triage assistance.**
- **Tempus:** AI-driven precision medicine and oncology diagnostics.
- **Caption Health:** AI-guided ultrasound interpretation.

This model differs from AI Services-as-Software in that AI is embedded directly into clinical care rather than supporting back-end processes.

How To Differentiate Between These Models

When evaluating AI solutions, understanding the differences between these three business models is crucial for adoption, implementation, and regulatory considerations. Here's a breakdown based on key features:

Feature	Healthcare SaaS	AI Services-as-Software	Tech-Enabled Clinical Services
Primary Offering	Subscription-based software tools	AI-powered services delivering a specific outcome	AI-integrated direct patient care solutions
Revenue Model	Recurring subscription (per-seat or enterprise)	Pay-per-use or per-transaction	Subscription, bundled services, or value-based care reimbursement
End User	Health systems, payers, pharma	Health systems, payers, pharma	Patients, clinicians, healthcare delivery organizations
AI Functionality	Workflow automation, decision support, analytics	Automates manual processes (e.g., prior auth, medical scribing, preventive service compliance)	AI assists in direct clinical care and patient monitoring
Implementation Difficulty	High (EHR integration, user adoption)	Moderate (EHR integration, but less user behavior change required)	High (clinical validation, regulatory approval, provider training)

Regulatory Hurdles	Moderate (HIPAA, security compliance)	Moderate (HIPAA, model validation)	High (FDA clearance, direct clinical impact)
Adoption Barriers	Change management, proving ROI	EHR interoperability, human oversight	Clinician trust, liability, and regulatory requirements

Key Takeaways

- If you are looking for AI to improve workflow efficiency and automate administrative tasks, Healthcare SaaS solutions may be the best fit.
- If your hospital or clinic wants AI-powered automation to reduce labor-intensive work (e.g., medical coding, documentation, billing reviews), AI Services-as-Software offers scalable efficiency.
- If AI is expected to play an active role in diagnosing, monitoring, or treating patients, Tech-Enabled Clinical Services require careful evaluation for regulatory approval, clinical effectiveness, and provider alignment.

Understanding these distinctions will help you make informed AI adoption decisions that align with cost, quality, and regulatory considerations within your healthcare institutions.

Ethical Considerations: Balancing Profitability and Patient Care

As healthcare organizations increasingly turn to Generative AI to optimize operations, improve clinical decision-making, and reduce costs, ethical considerations must remain central. While AI presents immense opportunities for efficiency and innovation, it also introduces risks related to profit-driven biases, workflow integration challenges, regulatory concerns, and clinician adoption barriers. The ability to create and capture value with AI in healthcare hinges on ensuring these solutions align with patient-centered care rather than financial incentives alone.

Avoiding Profit-Driven AI Bias

Avoiding profit-driven bias in AI is a significant ethical challenge in healthcare, requiring careful attention to ensure that financial incentives do not compromise medical decision-making. AI models, if optimized primarily for cost-saving, may unintentionally prioritize financial efficiency over clinical necessity and patient outcomes. This issue is particularly

concerning in areas such as diagnostic prioritization, insurance approvals, and personalized medicine.

To prevent profit-driven bias, AI-driven models must prioritize patient-centered decision-making over cost-based optimization. The focus should be on clinical urgency rather than profitability metrics. If reimbursement structures influence AI decision-making, hospitals may unintentionally deprioritize lower-margin procedures or patients with less lucrative insurance coverage, leading to disparities in care.

Maintaining transparency in AI-driven financial decisions is also essential. AI tools should incorporate clinician override capabilities and explainable AI (XAI) mechanisms to ensure that financial biases do not result in unwarranted denials of care. Providing transparency in AI decision-making allows clinicians to intervene when necessary and ensures that financial considerations do not take precedence over patient well-being.

Finally, establishing ethical oversight and conducting fairness audits can help safeguard against bias. Healthcare organizations should implement AI ethics committees to oversee algorithmic fairness, detect bias, and ensure financial neutrality in AI-driven systems. These committees play a critical role in maintaining ethical standards and preventing AI models from inadvertently reinforcing profit-driven biases in medical decision-making.

Simulated Case Example: AI in Diagnostic Imaging Prioritization

A hospital implemented an AI-driven radiology triage system to accelerate high-priority diagnoses. However, after deployment, clinicians noticed that the AI disproportionately prioritized privately insured patients for high-cost MRI scans while delaying Medicaid patients—even when medical urgency was equal.

Upon further investigation, it was discovered that:

- The AI model had been trained on historical financial data, which naturally favored reimbursement-maximizing procedures.
- The algorithm did not incorporate social determinants of health (SDOH), inadvertently deprioritizing vulnerable populations.

To address this, the hospital:

- Retrained the AI model to prioritize clinical urgency rather than financial incentives.
- Introduced a bias-detection framework that continuously monitors disparities in AI decision-making.

- Implemented a physician-led override system, allowing human intervention in AI-driven recommendations.

This case highlights how unchecked financial incentives can distort AI recommendations, emphasizing the need for transparent and ethical AI design in healthcare.

Integration into Clinical Workflows

For AI to deliver meaningful value in healthcare, it must be seamlessly integrated into clinical workflows without disrupting patient care, provider autonomy, or operational efficiency. When AI solutions fail to align with hospital operations and electronic health record (EHR) systems, they can introduce inefficiencies, frustrate clinicians, and result in poor adoption rates.

A key aspect of successful integration is ensuring interoperability with EHRs and clinical systems. AI tools should be designed to fit naturally within existing provider workflows, eliminating the need for additional manual input or parallel systems that could create inefficiencies. Seamless interoperability ensures that AI enhances, rather than complicates, clinical processes.

Equally important is minimizing the cognitive load on clinicians. AI-driven insights must be timely, relevant, and actionable, presented in a way that aligns with the natural decision-making flow. Requiring excessive steps or bombarding providers with unnecessary alerts can lead to alert fatigue and decreased usability, ultimately reducing AI's effectiveness.

To further support integration, AI solutions should allow for clinician customization and override capabilities. Physicians and other healthcare providers must be able to adjust AI tools to align with their clinical preferences and retain control over final decisions. Providing override mechanisms ensures that AI remains a supportive tool rather than an authoritative force dictating care.

Finally, the successful adoption of AI depends on comprehensive training and the incorporation of feedback loops. Effective onboarding programs, iterative refinements based on real-world use, and usability testing can help clinicians integrate AI more smoothly into their practice. By fostering an environment where providers can gradually adapt to AI-driven workflows and provide feedback for continuous improvement, healthcare organizations can enhance the acceptance and effectiveness of AI technologies in clinical settings.

Simulated Case Example: AI-Powered Scheduling Optimization

A hospital implemented an AI-driven scheduling tool designed to optimize physician availability and reduce appointment wait times. However, physicians initially resisted the

system due to concerns about its impact on patient care. The AI model failed to account for continuity of care, leading to disruptions in long-term provider-patient relationships. Additionally, the system lacked an override mechanism, preventing doctors from making case-specific scheduling adjustments when necessary.

To address these challenges and improve adoption, the hospital made several key modifications. First, the AI model was adjusted to prioritize continuity of care alongside scheduling efficiency, ensuring that long-standing provider-patient relationships were maintained. Second, manual scheduling overrides were introduced, allowing physicians to balance AI automation with their clinical judgment and autonomy. Finally, the hospital provided training workshops and established real-time feedback channels, giving physicians the opportunity to refine the system based on their practical experience.

These improvements resulted in increased physician adoption of the AI tool, enhanced scheduling efficiency, and a more effective balance between automation and human oversight. By aligning the system with the needs of both patients and providers, the hospital successfully integrated AI-driven scheduling without compromising quality of care.

Regulatory and Data Privacy Concerns

As AI-driven healthcare solutions become more sophisticated, ensuring compliance with data privacy laws, regulatory approvals, and ethical standards is essential. AI models that process protected health information (PHI) must adhere to HIPAA regulations, FDA guidelines, and evolving AI governance frameworks to maintain security and accountability.

To safeguard patient privacy, AI tools must incorporate end-to-end encryption, role-based access, and audit logs, ensuring that PHI remains protected from unauthorized access or breaches. Additionally, AI models classified as Software as a Medical Device (SaMD) require FDA clearance or approval, particularly when they directly influence patient care decisions. Regulatory oversight ensures that AI-driven clinical decision-making meets safety and efficacy standards before widespread implementation.

Another critical aspect of AI governance is addressing algorithmic bias through regular audits. AI-driven risk stratification and predictive models must undergo fairness assessments to detect and mitigate demographic biases. Without these safeguards, AI models risk perpetuating healthcare disparities, particularly among historically underserved populations. Moreover, clearly defining liability for AI-driven decisions is crucial. Establishing legal frameworks ensures that clinicians and healthcare institutions understand their responsibilities and potential risks when using AI-generated recommendations.

Simulated Case Example: AI in Predictive Analytics and Bias Audits

A health system implemented an AI-powered predictive analytics tool for early disease detection. However, a bias audit revealed significant disparities in how risk was assessed across different demographic groups. Black and Hispanic patients were consistently flagged at lower risk levels despite having clinical indicators similar to white patients. This issue stemmed from the model's training data, which reflected historical hospital records and pre-existing disparities in access to care.

To address these concerns, the AI was retrained on a more representative dataset that incorporated social determinants of health, ensuring that predictions better reflected diverse patient populations. Additionally, the health system introduced bias monitoring dashboards to detect disparities in real-time, allowing for continuous oversight and adjustments. Physicians were also provided with explainability tools, enabling them to understand AI-generated risk scores and override recommendations when necessary.

These interventions ensured that AI-driven predictive analytics did not reinforce existing healthcare inequities but instead contributed to more accurate and equitable patient assessments.

Conclusion

Generative AI has the potential to revolutionize healthcare by enhancing quality and efficiency while reducing costs. However, for AI to achieve long-term success, organizations must focus not only on creating value but also on capturing it sustainably through ethical, patient-centered, and financially viable business models.

Understanding the nuances of SaaS, AI Services-as-Software, and Tech-Enabled Clinical Services provides healthcare professionals with a framework for evaluating AI implementations. Moreover, ethical considerations and regulatory challenges must be addressed proactively to ensure responsible AI deployment.

As the adoption of AI in healthcare continues to grow, the role of clinicians and administrators will be crucial in shaping its integration, ethical oversight, and financial sustainability. AI's future in healthcare will be defined by how well it aligns with patient needs, regulatory requirements, and business realities, making it essential for healthcare professionals to engage deeply with these emerging technologies.

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