

Entrusting Data in an AI World A Framework for Accurate Healthcare Data

Part Three of Three

PRIORITIZE CARING ALGORITHMS AND
THE HUMAN TOUCH

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Health information systems depend on the accuracy of the data they receive, and organizations are increasingly turning to artificial intelligence (AI) to assist with cleaning and managing their data. While AI-driven automation can enhance data quality, it does not fully resolve issues related to data integrity.

Al alone cannot completely correct inaccuracies, fill in missing information, or eliminate duplicate patient records. Black Book Research survey results bear this out, finding that 92% of early Al adopters believed their systems were "not accurate or actionable enough for clinical use".[1]

Other data integrity statistics are equally staggering:

- Annual losses due to outdated or poorly performing IT systems skyrocketed from \$1.7 billion in 2017 to \$8 billion in 2024, with inefficiencies, system downtimes, and poor health IT integration taking the blame.[2]
- Gartner found that dirty data is responsible for an average loss of \$15 million per year, while 60% of its survey respondents indicated they were unsure just how much dirty data costs their organization "because they don't measure it in the first place."[3]
- The average expense of repeated medical care due to duplicate records was \$1,950 per inpatient stay and over \$1,700 per emergency department

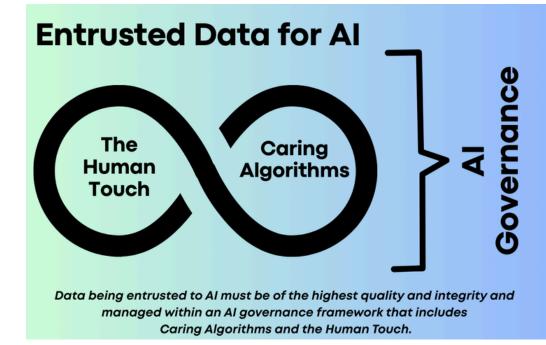
(ED) stay, according to Black Book.[4]

Our healthcare journeys are distinctive

and quite often complex—our digital identities should match those journeys to a unique and comprehensive health record. However, no single solution on the market today delivers a 100% match rate.[5]

Some organizations use automated technology to match patient records without requiring human review. Yet these automated person identification tools only work to a certain degree of accuracy, leaving gaps that can affect patient safety, care coordination, and more.[6]

The future integration of AI into person identification processes offers significant



opportunities to enhance patient safety and care quality. However, the complexity and nuances of

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person identification necessitates a balanced approach that combines the strength of Al with Caring Algorithms[®] and a crucial layer of human oversight.

The human touch is a crucial governance component of a foundational strategy for patient identification. As technology detects errors, Caring Algorithms will deliver enhanced personmatching capabilities while humans in the loop guide the creation and management of the Al technologies deployed throughout an organization's enterprise.

Algorithms are currently used to confirm matches without requiring human review. But they only confirm to a certain degree of accuracy. With the right Al governance and guardrails, including Caring Algorithms and a human-in-the-loop component, the promise of decreasing costs and streamlining administrative tasks related to person identity management is possible.

Entrusted data can unlock Al's true potential. We can achieve a future where patient identification is both accurate and secure, sustaining the foundation of quality healthcare.



References

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