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AI Optimism and the Race for Talent

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Optum

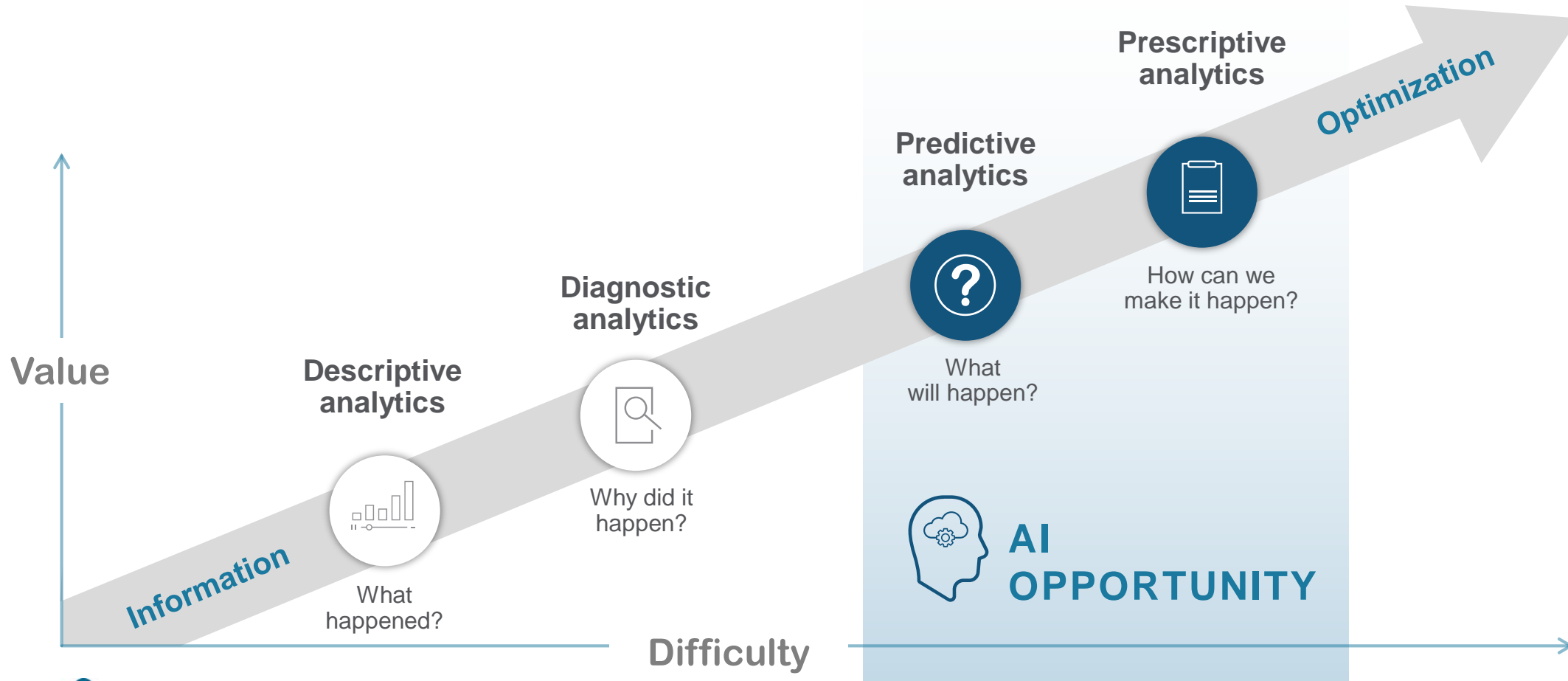
HimSS
ARIZONA Chapter



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Analytics continue to evolve, increasing in maturity over time

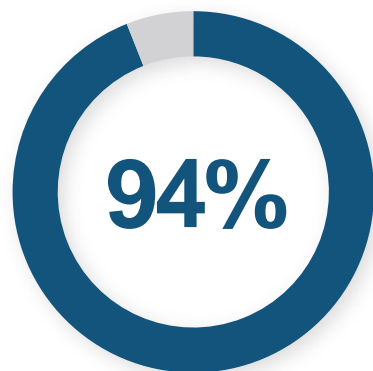




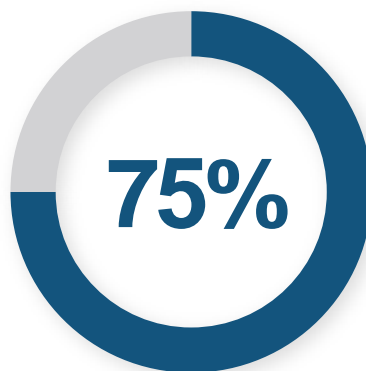
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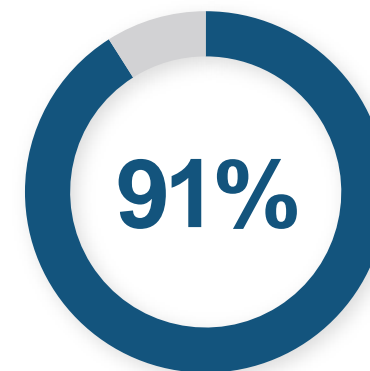
Research shows increasing optimism and investment for artificial intelligence (AI) in health



Most reliable path toward better health care



Implementing or developing an AI strategy



Confident they will see an ROI on investments

\$32.4M average investment per organization on AI implementation over the next five years

AI strategies will be deployed first to reduce administrative tasks



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43% Automating business processes, such as administrative tasks or customer service



36% Detecting patterns in health care fraud, waste and abuse



31% Monitoring users with Internet of Things (IoT) devices, such as wearable technology



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Current AI opportunities in health care



Better performance

- Clinical documentation
- Coding
- Payment integrity
- Prior authorization



Better outcomes

- Early diagnosis and treatment
- Prescription benefit management
- Risk adjustment
- Simplified population analysis



Better experience

- Call centers
- Care coordination
- Employee benefits



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Use cases: Approach a real problem

Example: Patient conditions like Atrial fibrillation can be difficult to detect

20–30% cases undiagnosed

Intermittency...

A-fib can be fleeting and intermittent; symptoms can be vague, so many patients don't seek care.

...means a difficult diagnosis

ECG can be *misinterpreted*, events can go "*uncaught*" or symptoms can be *attributed to other illnesses* (e.g., panic attack).

Lengthy diagnosis



A-fib must be confirmed with *ECG tracing*.



If ECG doesn't "detect" the episode, an *ambulatory Holter monitor* is worn for 24–48 hours.



If events are infrequent, a *cardiac event monitor* can be worn over a prolonged period.

Costly to manage

Cost of treating strokes per patient, per year:

If left untreated

\$75,000

If treated with anticoagulation

\$4,000



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OPTUM  **AI IN ACTION**
MACHINE LEARNING



250,000
Total primary
care patients



75,000
Patients
older than 50



3,750
Patients treated
for A-fib

- Model was trained on 2.5M lives in dNHI.
- Model ran against 1,000 WestMed members without A-fib and 100 with A-fib/flutter.

→ Able to detect almost 70% of patients who were diagnosed with A-fib.

→ Based on results, WestMed's clinical team requested expansion with 60,000 additional members and several more cardiovascular conditions.



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Inside the AI 'black box'



Data



Analytics



Health care expertise



TECHNOLOGY
INFRASTRUCTURE

Talent, not technology, is often the biggest roadblock



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Health organizations seeking to hire experienced staff will likely face talent shortages.

91%

of executives agree hiring candidates with AI experience is a priority for their organization.

45%

of health care leaders estimate more than 30% of new hires in positions engaging or implementing AI within the next year.

A practical approach to your analytics “people plan”



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Supporting
the foundation



Moving toward
risk and managing
populations



Predictive analytics,
AI, advanced
use cases



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Supporting the foundation



The job to be done

- Standard report writing
- Ability to pull data across departments and facilities
- Translation of data into actionable insights



Talent required

Analytics specialists who are proficient analytically as well as knowledgeable about the area they support (e.g., clinical, financial, etc.)



Common pitfalls

- Lack of data governance
- Talent who are deep analytically or clinically — but not both
- Lack of analytics operating model



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Moving toward risk and managing populations



The job to be done

Culling of insights about your system and population including leakage, network efficiency, cost, and disease trends across complex and disparate datasets



Talent required

Analytics specialists who can analyze and visually depict specialized datasets, including claims and EMR data, social determinants of health, etc.



Common pitfalls

- Limited expertise driving insights by stitching together multiple datasets including claims and EMR
- Having non-actuaries attempt actuarial analysis



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Predictive analytics, AI, advanced use cases



The job to be done

Building large predictive models and training those models with large datasets across clinical and financial realms



Talent required

- Analysts
- Data scientists
- Solutions architects
- Translators



Common pitfalls

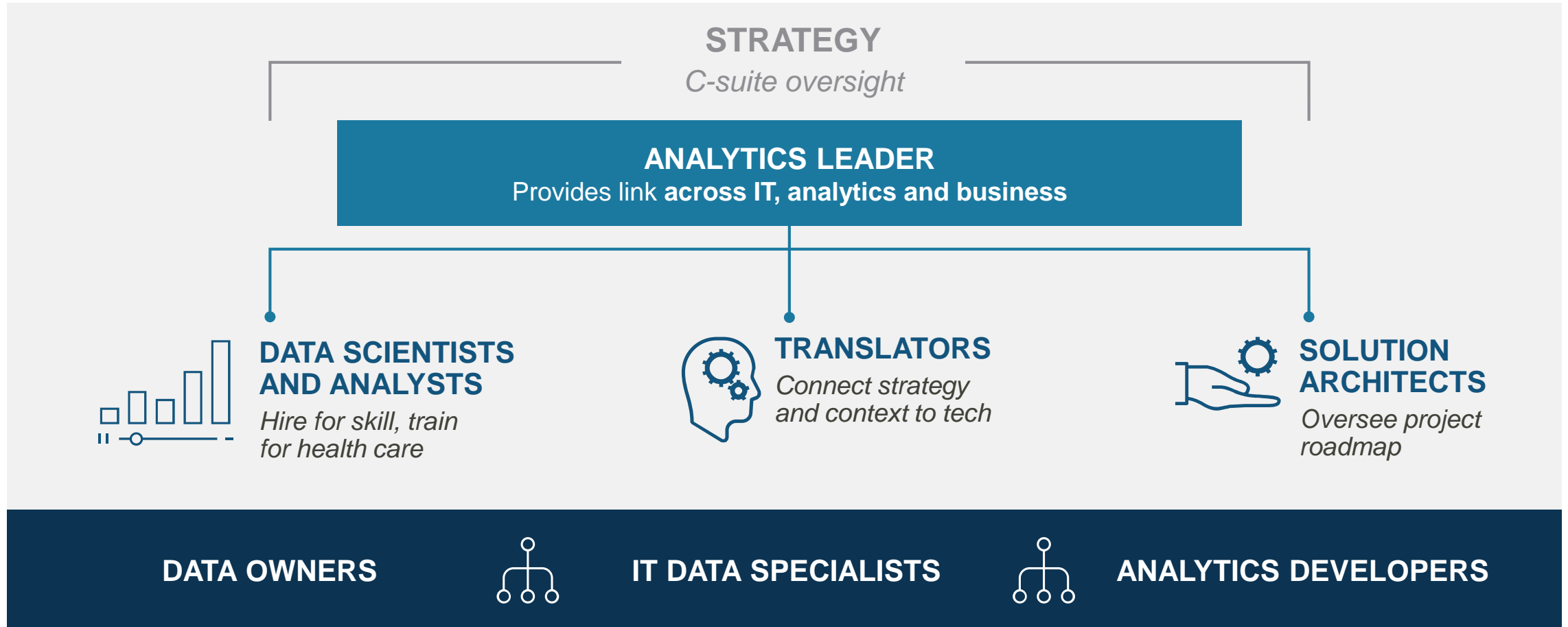
Underestimating the intensity of demand for this talent



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Building your AI team





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Thank you

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