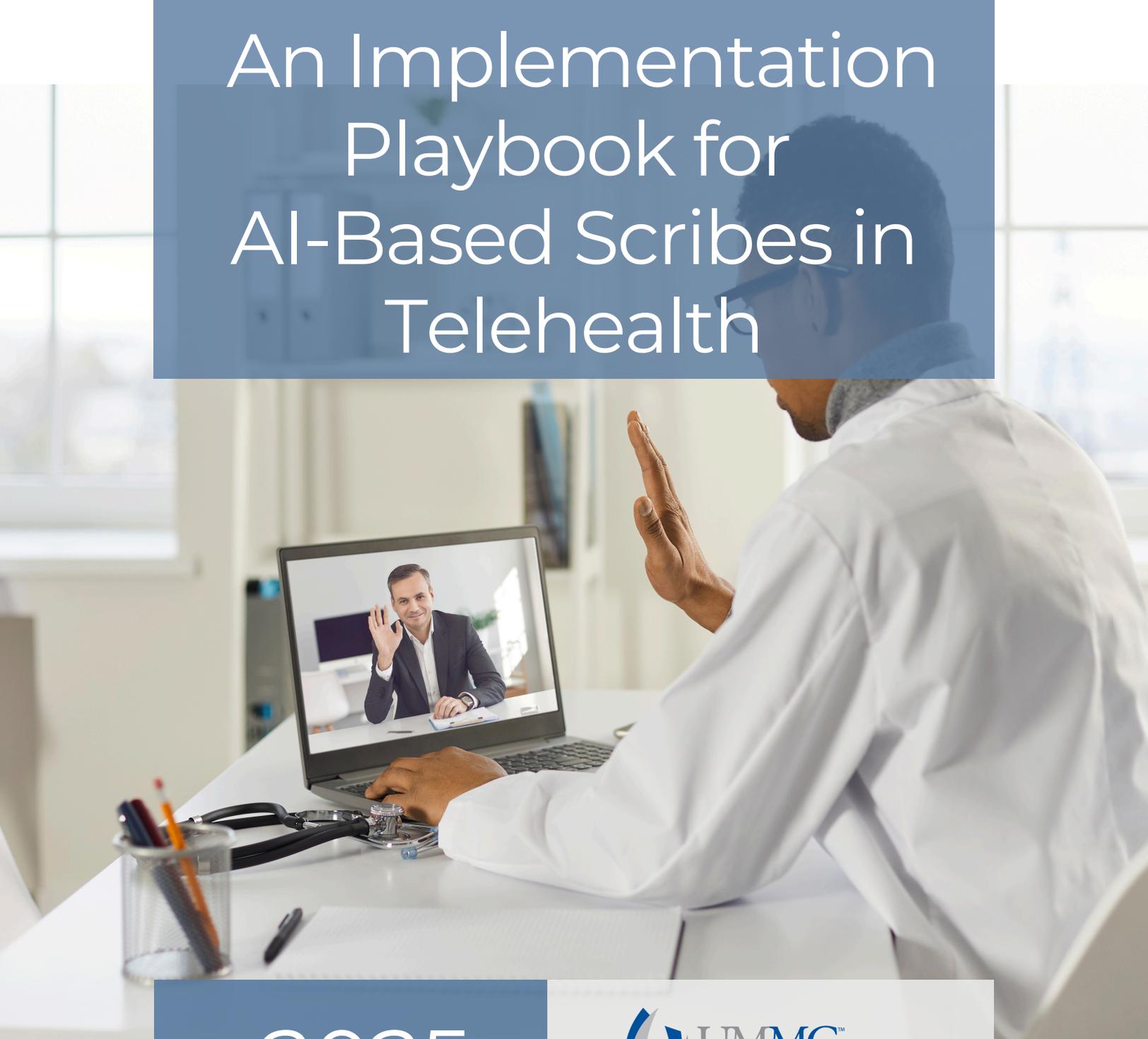


# An Implementation Playbook for AI-Based Scribes in Telehealth



2025



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# Acronyms and Abbreviations

- AI – Artificial Intelligence
- ATA – American Telemedicine Association
- BAA – Business Associate Agreement
- CTeL – Center for Telehealth and E-Health Law
- CPT – Current Procedural Terminology
- DUA – Data Use Agreement
- EHR – Electronic Health Record
- FDA – Food and Drug Administration
- FHIR – Fast Healthcare Interoperability Resources
- HCAHPS – Hospital Consumer Assessment of Healthcare Providers and Systems
- HHS – U.S. Department of Health and Human Services
- HIPAA – Health Insurance Portability and Accountability Act
- HITECH – Health Information Technology for Economic and Clinical Health Act
- HL7 – Health Level Seven International
- HRSA – Health Resources and Services Administration
- HIMSS – Healthcare Information and Management Systems Society
- IPPS – Inpatient Prospective Payment System
- IT – Information Technology
- KPI – Key Performance Indicator
- MAC – Medicare Administrative Contractor
- MBI – Maslach Burnout Inventory
- NLP – Natural Language Processing
- NIH – National Institutes of Health
- NLM – National Library of Medicine
- NTAP – New Technology Add-On Payment
- ONC – Office of the National Coordinator for Health IT
- PFI – Professional Fulfillment Index
- PHI – Protected Health Information
- ROI – Return on Investment
- RFP – Request for Proposal
- SaMD – Software as a Medical Device
- SOW – Statement of Work or Scope of Work
- UMMC – University of Mississippi Medical Center

# Introduction

Advancements in technology continue to transform healthcare, with tools like AI Scribe and Telehealth improving efficiency, access, and patient outcomes.

This playbook provides a structured framework for implementing AI Scribe to enhance documentation accuracy and efficiency. It is designed for project teams, stakeholders, and end-users involved in the adoption process, outlining key activities and milestones across the Pre-Implementation, Implementation, and Post-Implementation phases.

## Key Goals:

- ✓ Improve provider efficiency & reduce administrative burden
- ✓ Enhance documentation accuracy & completeness
- ✓ Ensure seamless integration with existing healthcare systems
- ✓ Maintain compliance with Health Insurance Portability and Accountability (HIPAA), General Data Protection Regulation (GDPR), and other regulations
- ✓ Improve Patient Engagement

**Keywords:** Telehealth, AI Scribe, Clinical Documentation, Burnout Reduction, Patient Engagement, EHR Integration, Compliance, Digital Health

# Telehealth AI Scribe Project Impact Statement



## Key Impacts:

### Improved Provider Efficiency

- By automating clinical documentation during telehealth visits, providers can focus more on patient care and less on note-taking. This is expected to reduce administrative burden, improve documentation accuracy, and increase time available for patient engagement.

### Enhanced Patient Experience

- The AI scribe allows clinicians to maintain eye contact and engage more fully during virtual visits, which contributes to higher patient satisfaction and trust in the care process.

### Documentation Consistency and Quality

- The AI scribe generates structured, high-quality visit summaries that align with compliance and billing standards. This contributes to fewer errors, reduced need for corrections, and improved coding accuracy.

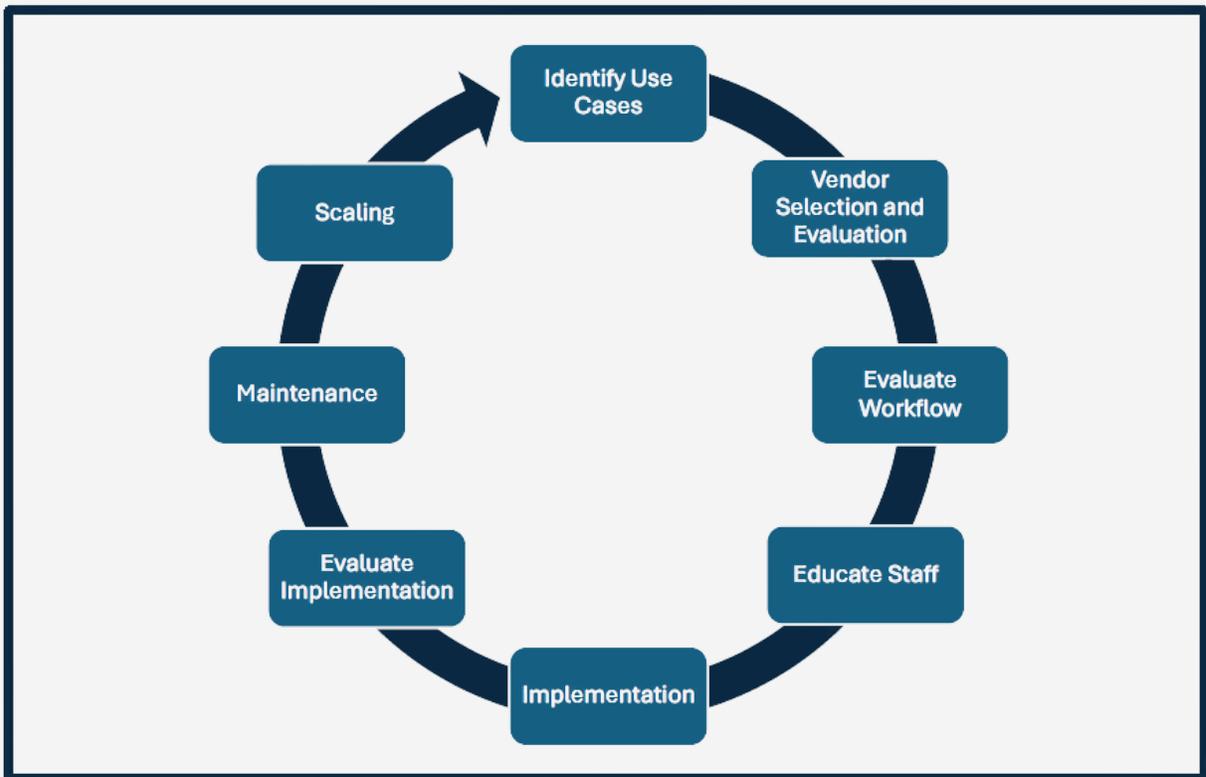
### Provider Well-being

- Reducing after-hours charting and cognitive load supports provider wellness and decreases burnout—especially in telehealth settings, where screen fatigue is common.

**Overall impact: Increased telehealth adoption among patients and providers.**

# Telehealth AI Integration Cycle

Integrating artificial intelligence (AI) into healthcare touches multiple stakeholders—from providers to administrators and support staff. Successful adoption depends on addressing ethical, regulatory, financial, and professional considerations while following a staged process that spans from early concept development to implementation and ongoing management.



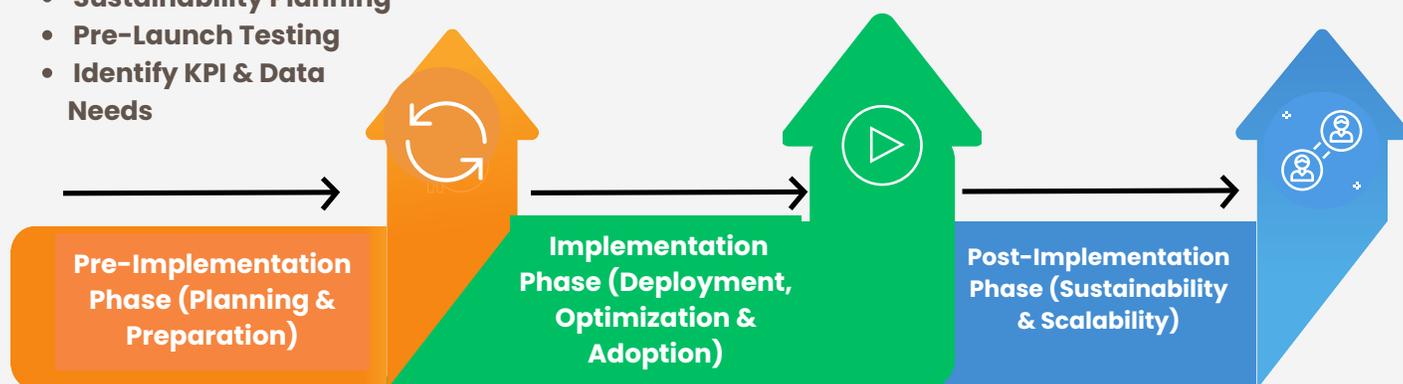
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# AI Scribe Implementation Phases and Key Activities

- Needs Assessment
- Feasibility Assessment
- Project Kick-off
- Operational Planning
- User Training & Change Management
- Sustainability Planning
- Pre-Launch Testing
- Identify KPI & Data Needs

- System Go-Live
- Provider Support
- Performance Monitoring
- Continuous Optimization

- Performance Evaluation
- Compliance & Security
- Performance Tracking & Reporting Dashboards
- Long-Term Maintenance
- Scaling & Sustainability



# Pre-Implementation

## *Planning and Preparation*

is the preparation stage before deployment, focusing on planning, system setup, testing, and user training. This phase ensures all technical, operational, and regulatory requirements are met for a smooth go-live. ✓



# Planning and Preparation

The Pre-Implementation Phase ensures that all aspects of the telehealth project are carefully planned and prepared before going live, setting a solid foundation for success. It encompasses the following key activities that can be adjusted and tailored for individual programs.



## 1. Needs Assessment

The purpose of this assessment is to evaluate whether documentation burden contributes to clinician burnout and to determine if an AI scribe tool can help mitigate this issue. Several validated tools can be used to assess clinician burnout, including:

- Maslach Burnout Inventory (MBI)
- Mini Z Burnout Survey
- Stanford Professional Fulfillment Index (PFI)

Burnout data should be correlated with:

- Time spent on documentation
- After-hours charting (“pajama time”)
- Frustration with EHR usability
- Number of telehealth visits per day

Use the results to build the business case for AI Scribe by:

- Reporting the percentage of clinicians who experience emotional exhaustion
- Highlighting documentation as a leading contributor to burnout
- Demonstrating clinician support for tools that reduce documentation burden

A final report will summarize findings and support AI Scribe implementation as a strategy to improve clinician well-being and workflow efficiency.



**A targeted needs assessment can identify departments most burdened by documentation, burnout, and workflow inefficiencies, especially in high-telehealth areas like primary care and behavioral health.**

**Collecting data on charting time, after-hours work, and staff stress helps prioritize AI scribe deployment where it will have the most impact. Post-implementation surveys can then measure changes in burnout and satisfaction.**

# Planning and Preparation

## 2. Feasibility Assessment

- **Identify Executive Sponsor:** Appoint a senior leader to champion the AI Scribe project and align it with organizational goals.
- **Engage Stakeholders:** Involve clinical, administrative, and IT stakeholders early to build support and ensure cross-functional collaboration.
- **Secure Funding & Resources:** Confirm availability of necessary funding, equipment, and personnel. Explore internal budgets or external funding (e.g., grants).
- **Determine Scope:** Based on needs and resource availability, decide whether to launch a pilot or pursue enterprise-wide implementation.



Criteria	Pilot	Enterprise-wide
<b>Overall Risk</b>	Low risk	High risk
<b>Cost (Upfront &amp; Ongoing)</b>	Lower cost	Higher cost
<b>Potential Impact/Scope</b>	Limited impact	Broad impact
<b>User Adoption &amp; Feedback</b>	Easier to manage	Harder to manage
<b>Speed of Implementation</b>	Faster rollout	Slower rollout
<b>Organizational Readiness</b>	Easier with small group	More complex coordination
<b>Data for Optimization</b>	Limited data	Rich data sets
<b>Change Management Complexity</b>	Simpler	Complex

# Planning and Preparation

## 3. Project Kick-off

- Designate Project Lead: Appoint a project manager to oversee the implementation and ensure accountability.
- Create the Implementation Team: Form a team of clinicians, IT staff, and administrative personnel to support the project.
- Regular Monitoring & Progress Updates: Hold routine meetings to track progress, address issues, and maintain communication.
- Identify Barriers & Challenges: Anticipate potential challenges (tech integration, user adoption) and develop early mitigation strategies.



**For best practices on forming the implementation team, consult Page 15.**

## 4. Operational Planning

- Vendor/Platform Selection: Refer to Page 17 for detailed guidance on selecting the appropriate AI Scribe vendor or platform. (Please make sure the chosen solution aligns with organizational needs, technical requirements, and user preferences. Recommendation).
- Regulatory and Compliance Clearance: Secure necessary approvals from the organization's Regulatory and Compliance teams to ensure adherence to privacy, data security, and telehealth documentation standards.
- Workflow Design and Customization: Collaborate with clinical and operational teams to tailor workflows for seamless integration of the AI Scribe tool into existing processes, ensuring minimal disruption and maximum efficiency.



**Involve IT, clinical, legal, and compliance teams early to streamline vendor selection, approvals, and workflow design.**

# Planning and Preparation

## • Contractual Agreement

- **Begin with Procurement:** After vendor selection, choose the appropriate path, RFP (Request for Proposal), sole source, or second quote, based on item type and dollar amount thresholds.
- **Plan the Timeline:** RFPs and sole sources typically take 4–6 weeks. Build this duration into your project plan.
- **Submit Agreement:** Once procurement is complete, route the agreement via your Legal department's contract processing system.
- **Accelerate Early:** To speed reviews and reduce back-and-forth, set up an early meeting between both legal teams near the start of the Symplr phase or immediately after procurement wraps.

Throughout the contracting process, below are some key documents you may want to ensure receipt of:

- Data Sharing Agreement (e.g., DUA or BAA)
- Master Service Agreement
- Purchase Order (PO)
- IT Security (Information Technology) and Risk Assessment
- 501(k) Clearance (if applicable)
- Liability Insurance
- Third-Party Audits



**The day procurement wraps up, schedule a 20–30 minute legal-to-legal alignment call and submit it to Legal with the SOW, draft DUA/BAA, security/privacy exhibit, and named legal contacts. This prevents “awaiting docs” holds and speeds up the redlining process.**

# Planning and Preparation

## • EHR Integration

Establish a coordinated plan for integrating the AI Scribe solution with your Electronic Health Record (EHR) system. This includes:

- ▶ Assessing technical compatibility and workflow alignment.
- ▶ Engaging IT, compliance, and clinical stakeholders to define the integration scope and security protocols.
- ▶ Identifying required access points, data flow, and user interface touchpoints within the EHR.
- ▶ Developing a timeline for testing, validation, and phased implementation.
- ▶ Ensuring integration meets institutional policies and regulatory requirements for data privacy, security, and documentation standards.



**When planning EHR integration, loop in IT, compliance, and clinical end-users early to avoid rework later. Their insights on workflow, security, and usability can prevent major roadblocks during implementation.**

## • Medicare Reimbursement

At present, Medicare coverage for AI-based services is limited. A few Medicare Administrative Contractors (MACs) have authorized reimbursement for specific Category III CPT codes, such as (Centers for Medicare & Medicaid Services {CMS}, 2024):

- ▶ 0623T
- ▶ 0624T
- ▶ 0625T
- ▶ 0626T
- ▶ 75580



**Because coverage differs depending on the region and contractor, organizations should confirm local approval before including these codes in billing workflows or implementation plans.**

# Planning and Preparation

## • Inpatient Prospective Payment System (IPPS) and NTAP

Medicare reimburses inpatient hospital services using a fixed-rate system known as the Inpatient Prospective Payment System (IPPS), rather than basing payment on each hospital's actual cost of care. To help hospitals adopt new innovations, CMS offers the New Technology Add-On Payment (NTAP) program (CMS, 2024).

NTAP allows hospitals to receive an additional, temporary payment when a new technology meets three conditions:

- It is truly novel and not substantially equivalent to existing options.
- It shows meaningful clinical benefit for patients.
- It is not fully covered under the current IPPS rates.



**Hospitals considering AI-driven solutions may benefit from exploring NTAP eligibility, since this funding mechanism can help offset early adoption costs.**

## 5. User Training & Change Management

- Develop Role-Specific Training: Provide targeted training sessions based on user roles (e.g., physicians, nurses, support staff) to ensure effective use of the AI Scribe tool.
- Offer Hands-On Support: Include live demonstrations, practice sessions, and access to technical support during early adoption to build user confidence.
- Establish Super Users: Identify and train a group of early adopters or “super users” to serve as on-site champions and first-line support for their peers.
- Communicate Early and Often: Maintain clear, consistent communication about the project's purpose, benefits, and timeline to build trust and reduce resistance.
- Gather Feedback and Adjust: Use surveys, check-ins, and feedback sessions to monitor user experience and make real-time adjustments.
- Reinforce with Ongoing Training: Provide refresher sessions and updates as the tool evolves to maintain high engagement and performance.



**Identify and train super users early—they can champion adoption, provide peer support, and help ease the transition during AI Scribe implementation.**

# Planning and Preparation

## 6. Sustainability Planning

- Monitor Ongoing Performance: Regularly review KPIs to track long-term impact and identify areas for improvement.
- Update Training & Support: Offer refresher training and keep resources up to date as the tool evolves.
- Incorporate Feedback Loops: Maintain open channels for user feedback to inform future enhancements.
- Plan for Scalability: Use pilot results to guide broader rollout and resource planning.
- Budget for Maintenance: Ensure ongoing funding for licensing, technical support, and future upgrades.
- Align with Strategic Goals: Embed AI Scribe use into organizational policies and long-term digital health strategies.



**Treat sustainability as a continuous process; regular evaluation, user input, and resource planning are key to long-term success.**

## 7. Pre-Launch Testing

- Pilot with a Small User Group: Select a diverse group of clinicians to test the AI Scribe tool in real-world scenarios.
- Test Across Workflows: Validate performance in different clinical settings (e.g., primary care, telehealth, behavioral health) to ensure adaptability.
- Assess Accuracy & Reliability: Review sample notes for completeness, accuracy, and alignment with clinical standards.
- Validate EHR Integration: Ensure smooth interaction between the AI tool and the EHR, including note entry and data flow.
- Gather User Feedback: Collect structured feedback on usability, functionality, and perceived burden reduction.
- Refine Workflows: Adjust processes based on findings before wider rollout.



**Use pre-launch testing to identify and resolve issues early; this boosts clinician confidence and promotes smoother adoption.**

# Planning and Preparation

## 8. Identify KPI & Data Needs

Priority Tier	Category	KPI	Description	Data Source	
<b>Tier 1: Essential Early KPIs</b>	<b>Clinical Efficiency</b>	Documentation Turnaround Time	Time from encounter to signed note	EHR metadata (timestamps)	
		Documentation Completeness & Accuracy	% of notes meeting clinical, billing standards	EHR chart audits; coding reviews	
		<b>Provider Experience</b>	Provider Burnout & Workload Scores	Burnout/workload changes (e.g., MBI)	Surveys; Employee Engagement Scores
			Provider Satisfaction with Documentation	Clinician satisfaction with documentation & workflow	Surveys; interviews
			Adoption & Retention Rates	% of clinicians actively using AI scribe	IT usage logs
	<b>Technology Performance</b>	Error Rate in Transcription/Content	% of notes with clinically significant errors	Manual chart review; validation studies	
			Technical Reliability & Downtime	Frequency/duration of outages	IT system logs; incident reports
<b>Tier 2: Optimization &amp; Sustainability</b>	<b>Clinical Efficiency</b>	Provider Time Spent on Documentation	Avg. time providers spend documenting	EHR logs; time-motion; surveys	
	<b>Patient Outcomes</b>	Patient-Provider Communication Time	% of visit in direct interaction vs. screen	Time-motion studies; patient surveys	
		Patient Satisfaction with Visit Experience	Ratings of provider attention, communication	HCAHPS/Press Ganey; surveys	
	<b>Financial Impact</b>	Billing and Coding Accuracy	Claim denials; coding compliance	Billing records; coding audits	
		Patient Visit Volume	Encounters per day per physician	Billing records	
		Provider Productivity (RVUs/encounter)	Change in RVUs per provider	Billing/practice management system	
		Cost Savings vs Alternatives	Cost of AI vs human scribes/transcription	Cost of AI vs human scribes/transcription	
		<b>Technology Performance</b>	Integration & Workflow Compatibility	Measure of usability & workflow fit	Usability surveys; IT support logs



**Capture baseline data before launch to measure true impact.**

# Stakeholder Engagement

## Building a Team

Building a strong team for an AI scribe project requires careful consideration of roles, expertise, and collaboration to ensure successful implementation and adoption. Here are key factors to consider:

### »» Project Manager

- Leads the project, ensures timelines are met, and coordinates across teams.

### »» Data/Research Scientist

- Provides expertise in AI technologies, algorithms, and natural language processing (NLP) to customize the scribe.

### »» Clinical Professional

- Offers insights into clinical workflows and ensures the AI aligns with real-world telehealth needs.

### »» Compliance and Privacy Officer

- Ensures the project adheres to regulatory standards like HIPAA and protects patient data.

### »» IT Specialist

- Manages technical integration with telehealth platforms, electronic health record (EHR) systems, and other tools.

### »» Vendor Liaison

- Serves as the main point of contact between the health system and the AI scribe vendor.
- Coordinates vendor deliverables, support, and updates to align with project goals.

### »» Training and Support Coordinator

- Develops and delivers training for end users, ensuring smooth adoption.



### Regular Stakeholder/Team Meetings can be key to successful implementation:

- **Team Alignment:** Ensures coordination between healthcare providers, IT specialists, and AI developers for seamless integration.
- **Efficient Problem-Solving:** Addresses challenges quickly through real-time feedback and troubleshooting.
- **Continuous Improvement:** Optimizes accuracy, efficiency, and user adoption

# Requirements Gathering

Gather qualitative and quantitative data to understand user needs and expectations (Stakeholder surveys).

## Questions to Consider:

- What challenges do providers face with current documentation processes?
- How much time is spent on documentation versus patient care?
- What are the must-have features for the AI scribe? (e.g., real-time transcription, multi-speaker support)
- Are there specific compliance or security concerns?
- How should the system integrate with existing workflows?
- What training and support will be required for successful adoption?

## Prioritize Requirements

- **Must-Have:** Critical for system functionality (e.g., HIPAA compliance, real-time transcription).
- **Nice-to-Have:** Enhancements that improve user experience but are not essential.
- **Future Considerations:** Features that can be added in later phases.



**Not all requirements carry equal weight; prioritize based on impact and feasibility.**



# Technology & Vendor Selection

When choosing an AI scribe platform, it's important to evaluate several key factors to ensure the platform meets your needs, integrates seamlessly into your workflow, and provides long-term value.

**Here are the main considerations:**

## »» Functional Requirements

- Real-time transcription and note-taking.
- Compatibility with telehealth sessions and EHR systems.
- User-friendly interface with minimal manual input.
- Multi-speaker differentiation and medical terminology accuracy.
- Automated summarization and categorization of notes.
- Clear workflows for documenting patient consent and opt-out.

## »» Risk Mitigation

- Accuracy and Human Oversight: Regularly validate AI-generated transcripts with human review to prevent errors, misinterpretations, or bias, ensuring the reliability of medical documentation and maintaining provider trust.

## »» System Compatibility (EHR, Telehealth)

- EHR Integration: Ensure seamless note entry, real-time sync, and HIPAA compliance.
- Telehealth Integration: Enable real-time transcription with secure, multi-device access.

## »» Technical Requirements

- Integration capabilities (API, Application Programming Interface, compatibility with EHR/telehealth platforms).
- Data storage, encryption, and backup policies.
- Performance metrics (accuracy rate, speed, uptime).
- Scalability for future expansion.



## »» Security & Compliance (HIPAA) Adaptability

- Is the AI scribe HIPAA-compliant and secure for handling patient data?
- Ensure the solution meets legal and regulatory standards for safeguarding protected health information (PHI), a critical aspect of telehealth.

## »» Support and Training

- Vendor Support: Verify the availability of reliable customer support, including troubleshooting, training, and implementation assistance.
- Onboarding Resources: Assess whether the vendor provides comprehensive training materials and ongoing educational resources.

# Key Questions to Ask an AI Scribe Vendor



## Patient Privacy & Consent:

- How is patient consent obtained and documented when AI scribe tools are used during clinical encounters?
- Can patients opt out of having their visits transcribed, and how is this communicated?

## Bias & Accuracy:

- How does your system handle accents, dialects, or medical terminology variations to prevent inequities in documentation?
- What safeguards are in place to minimize transcription or NLP bias (mislabeling symptoms in underrepresented populations)?

## Transparency & Human Oversight:

- How do you ensure clinicians remain the final author of record (human in the loop)?
- How are errors flagged, and what tools exist for easy review/editing by clinicians?

## HIPAA & Data Security:

- Is your platform fully HIPAA-compliant for storage, processing, and transmission of protected health information (PHI)? Are you able to provide documentation for HIPAA compliance?
- How is data encrypted (in transit and at rest)?
- Are you able to provide documentation for HITECH compliance?
- Are you able to provide documentation for a third-party audit?
- Are you able to provide documentation for penetration testing?
- What additional privacy and security safeguards are in place, beyond those mandated by law?
- How do we receive updates and security patches?

### **Data Use & Secondary Analysis:**

- Do you use de-identified transcripts for training models? If so, what governance or consent structures are in place?
- Can clients opt out of having their data used for secondary purposes?
- Will you retain access to our data if we discontinue use?

### **Legal Issues/Data Governance**

- How is patient data used within your AI scribe system (e.g., documentation only, model training, product improvement)?
- What is your policy for retaining patient data, and how long is it stored?
- Under what circumstances is patient data deleted, and what is the process for deletion?
- Do clients have the ability to request the deletion of patient data at any time?
- How do you verify and document that data has been permanently deleted once a request is made?

### **State Laws and HHS OCR Requirements**

- Since state requirements differ and there is no single national standard, how do you ensure your solution complies with varying state laws?
- In what ways do your processes and procedures align with existing and emerging industry standards?
- Can you provide the information outlined in the model facts label so we can determine if your tool is appropriate for deployment in our practice?
- How does your system address the 2024 HHS Office for Civil Rights rule under Section 1557, specifically the requirement to identify and mitigate algorithmic bias in AI systems?

### FDA Oversight:

- Does your product qualify as Software as a Medical Device (SaMD), and if so, has it been reviewed by the FDA?
- How do you handle post-market surveillance and software updates that may alter performance?

### Interoperability:

- How does your system integrate with EHRs (Epic, Cerner, etc.)?
- Do you comply with HL7 FHIR standards and maintain minimal workflow disruption for clinicians?

### Liability and Accountability

- How does your company define its responsibilities and liability in the event of system errors, downtime, or data breaches?
- What accountability measures do you have in place to ensure your AI scribe tool is used appropriately and in compliance with clinical and legal standards?
- What processes are in place for reporting, auditing, and addressing issues that may create liability risks for the healthcare organization?

### Model Facts Label (v2)

*A summary sheet that explains how the AI tool is meant to be used*

- Can you provide the most recent version of your Model Facts Label (v2) for your AI scribe tool?
- How does the information in your Model Facts Label (v2) reflect the tool's intended use, data practices, limitations, and performance metrics?



**When evaluating an AI scribe vendor, go beyond technical specs and focus on privacy, bias safeguards, clinician oversight, and EHR integration. The strongest vendors provide clear documentation (HIPAA/HITECH/FDA), transparent governance for data use, and tools that keep the clinician as the final author of record.**

A woman with long dark hair, wearing a grey sleeveless top, is holding two light-colored wooden puzzle pieces. She is looking down at the pieces, which are held in her hands. The background is a bright, slightly blurred indoor setting. In the foreground, a pair of black-rimmed glasses and a portion of a laptop keyboard are visible on a white surface.

# Implementation

## *Deployment & Adoption*

This phase focuses on executing the deployment of AI-Scribe while ensuring system functionality and user adoption.

# Deployment and Adoption



Key objectives include deploying the system, providing support, monitoring performance, and resolving any issues that arise.

## »» System Go-Live & Deployment

- Deploy AI Auto-Scribe across selected clinical sites
- Monitor real-time performance & system stability
- Provide on-site/virtual support for initial users

## »» Provider Adoption & Support

- Offer live support channels (helpdesk, chat, email)
- Conduct follow-up training sessions based on feedback
- Encourage peer champions to drive adoption

## »» Performance Monitoring & Issue Resolution

- Track AI accuracy, provider feedback, and workflow efficiency
- Identify and resolve integration or usability issues
- Ensure compliance with privacy & security protocols

## »» Continuous Optimization

- Adjust AI tuning based on real-world usage
- Optimize speech recognition & note structuring algorithms
- Update templates & workflows as needed



**Successful deployment depends on starting small, training thoroughly, and building provider trust. Begin with a pilot group of engaged champions, gather feedback early, and use quick wins to drive wider adoption across departments.**



# Post-Implementation

Continuous Improvement



# Continuous Improvement

Continuous improvement in telehealth AI auto-scribe ensures accuracy, user experience, and adaptability through AI training, feedback, compliance updates, and workflow optimizations.



## »» Performance Evaluation

- Conduct post-go-live evaluation & review success metrics
- Gather provider feedback & identify pain points
- Compare documentation time before vs. after AI Auto-Scribe
- Is the platform maintaining HIPAA compliance and safeguarding protected health information (PHI)?
- Has there been any breach or non-compliance issue since implementation?

## »» Performance Tracking & Reporting Dashboards

- Create custom reporting dashboards in project management platforms to track AI-Scribe usage, provider feedback, and accuracy rates.
- Set up automated alerts for documentation quality issues or security risks.

## »» Compliance & Security

- HIPAA Compliance: Protect patient data with encryption and secure handling per HIPAA standards.
- Access Controls: Use role-based access and multi-factor authentication.
- Audit Monitoring: Track AI activity with logs for accountability.
- Risk Assessments: Regularly evaluate and update system security.

## »» Long-Term Monitoring & Maintenance

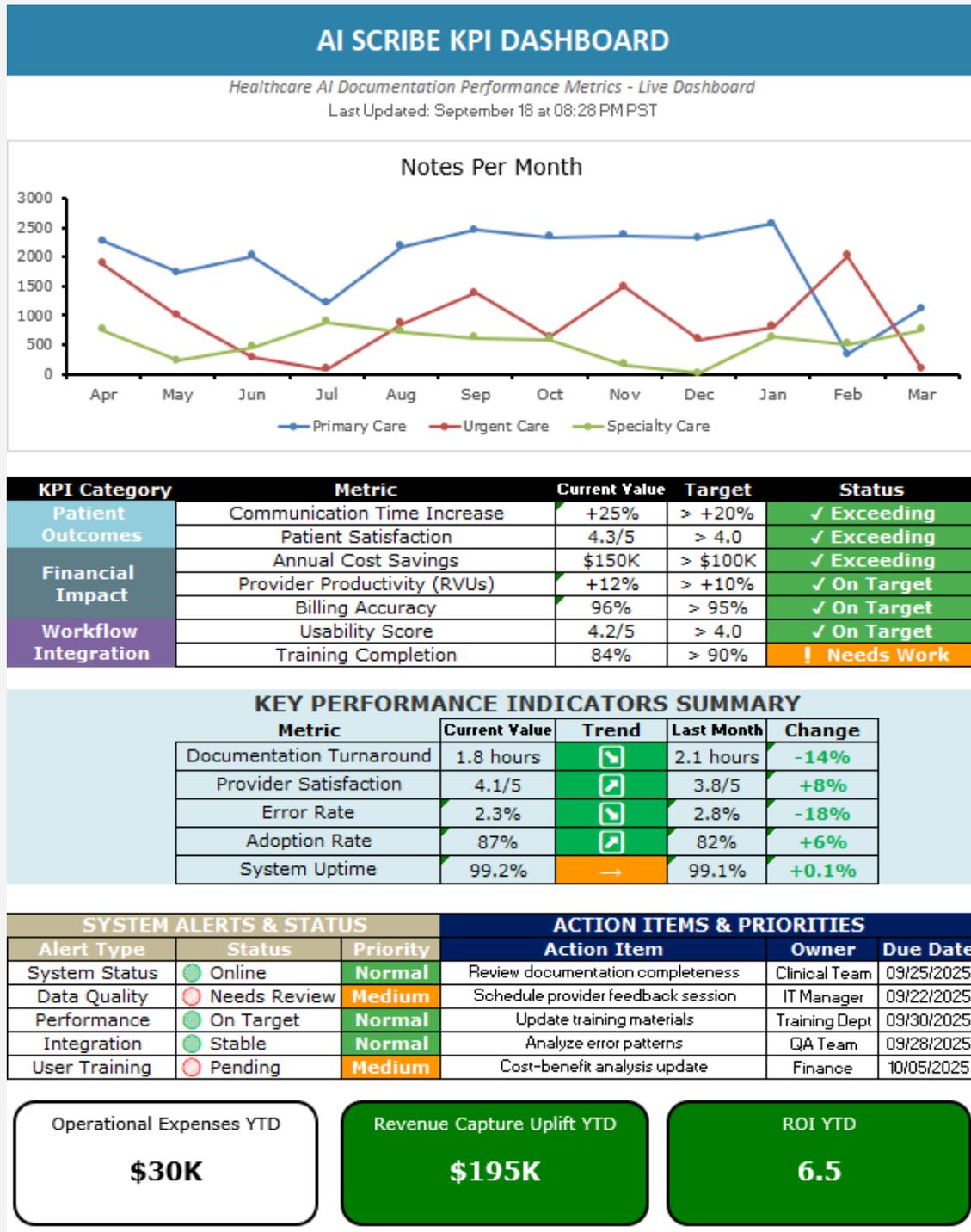
- Implement periodic system audits for accuracy & security
- Ensure ongoing compliance with evolving regulations
- Provide regular software updates & improvements



**Continuous improvement works best when you track KPIs, gather provider feedback, and adjust workflows regularly. Use data and frontline insights to refine the system and keep adoption strong.**

# Performance Tracking & Reporting Dashboards

Key Performance Indicators (KPIs) should be tracked month-to-month and be made visible on an accessible dashboard for reporting to stakeholders at a moment's notice. Some examples of KPIs, and examples of useful dashboard components, are shown below.



# Scaling & Sustainability



Scaling AI Scribes should begin with small pilots to track KPIs like time saved, reduced documentation burden, accuracy, and patient engagement. Real-world testing reveals barriers, refines workflows, and builds provider trust, laying the groundwork for broader adoption.

**Sustainability** rests on demonstrating lasting value across several domains:

- **Provider Well-being and Retention**: One of the most significant benefits AI Scribes is the reduction of administrative burden. When providers spend less time documenting, it directly impacts burnout and supports overall well-being. Health systems struggling with provider dissatisfaction and turnover gain significant value from tools that improve retention and support workforce stability.
- **Patient Engagement and Experience**: By freeing providers from note-taking during visits, AI Scribes allow for more direct, face-to-face interaction. This often translates into higher patient satisfaction scores and stronger patient engagement. Better patient experiences can increase loyalty and drive additional patient volume, adding to the program's value.
- **Financial Performance**: Improved documentation feeds directly into the revenue cycle. More accurate notes support appropriate CPT coding, reduce missed charges, and improve claim integrity. Over time, this leads to fewer denials, faster reimbursement, and stronger financial performance for the health system.

Together, these benefits create a foundation for both scaling and sustaining an AI Scribe program. By starting with focused pilots, measuring KPIs, and demonstrating value in provider wellness, patient experience, and financial impact, health systems can build the case for broader adoption and long-term integration.



- **Pilot First**: Begin with targeted pilots to measure KPIs (time saved, documentation accuracy, provider burnout, patient engagement) before full-scale rollout.
- **Provider Well-Being**: Demonstrate reduced administrative burden, improved provider satisfaction, and stronger retention.
- **Patient Engagement**: Show improvements in patient-provider interaction and higher satisfaction scores, which can drive patient loyalty and volume.
- **Financial Impact**: Tie improved documentation to more accurate coding, fewer missed charges, reduced denials, and stronger reimbursement.

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Scaling AI Scribes should begin with small pilots to track KPIs like time saved, reduced documentation burden, accuracy, and patient engagement. Real-world testing reveals barriers, refines workflows, and builds provider trust, laying the groundwork for broader adoption.

**Sustainability** rests on demonstrating lasting value across several domains:

- **Provider Well-being and Retention**: One of the most significant benefits AI Scribes is the reduction of administrative burden. When providers spend less time documenting, it directly impacts burnout and supports overall well-being. Health systems struggling with provider dissatisfaction and turnover gain significant value from tools that improve retention and support workforce stability.
- **Patient Engagement and Experience**: By freeing providers from note-taking during visits, AI Scribes allow for more direct, face-to-face interaction. This often translates into higher patient satisfaction scores and stronger patient engagement. Better patient experiences can increase loyalty and drive additional patient volume, adding to the program's value.
- **Financial Performance**: Improved documentation feeds directly into the revenue cycle. More accurate notes support appropriate CPT coding, reduce missed charges, and improve claim integrity. Over time, this leads to fewer denials, faster reimbursement, and stronger financial performance for the health system.

Together, these benefits create a foundation for both scaling and sustaining an AI Scribe program. By starting with focused pilots, measuring KPIs, and demonstrating value in provider wellness, patient experience, and financial impact, health systems can build the case for broader adoption and long-term integration.



- **Pilot First**: Begin with targeted pilots to measure KPIs (time saved, documentation accuracy, provider burnout, patient engagement) before full-scale rollout.
- **Provider Well-Being**: Demonstrate reduced administrative burden, improved provider satisfaction, and stronger retention.
- **Patient Engagement**: Show improvements in patient-provider interaction and higher satisfaction scores, which can drive patient loyalty and volume.
- **Financial Impact**: Tie improved documentation to more accurate coding, fewer missed charges, reduced denials, and stronger reimbursement.

# Program Barriers and Mitigations



Barrier	Mitigation
<b>Regulatory Compliance (e.g., HIPAA &amp; PHI Protection)</b>	Implement end-to-end encryption, strict access controls, and regular security audits. Work with legal and compliance teams to ensure adherence to regulations.
<b>Data Security &amp; Privacy Concerns</b>	Use advanced encryption, secure cloud storage, and role-based access controls. Maintain transparency in data usage and obtain clear user consent.
<b>Integration with Telehealth &amp; EHR Systems</b>	Partner with major EHR vendors, utilize standardized APIs (HL7/FHIR), and conduct pre-deployment testing to ensure seamless interoperability.
<b>Software Compatibility &amp; Customization Costs</b>	Offer modular, plug-and-play solutions with scalable pricing. Work closely with IT teams for cost-effective customization.
<b>Provider Resistance &amp; Usability Concerns</b>	Ensure high AI accuracy through clinician feedback. Design an intuitive interface, provide hands-on training, and offer responsive tech support.
<b>Training &amp; Adoption Challenges</b>	Develop comprehensive onboarding programs, interactive demos, and real-time support. Gather feedback to improve usability.
<b>High Implementation Costs &amp; ROI Uncertainty</b>	Offer flexible payment plans, subscription models, or performance-based pricing. Provide case studies and success stories to demonstrate ROI.



***Addressing these barriers requires a clear strategy, including robust security measures, seamless integrations, provider training, and a compelling business case.***

# Ethical, Legal, and Regulatory Considerations

AI scribe tools capture and transcribe clinician–patient encounters, generating structured documentation in electronic health records (EHRs). They aim to reduce administrative burden, improve clinician efficiency, and enhance patient engagement. However, their deployment raises distinct ethical, regulatory, and legal issues that must be carefully managed. While innovation is reshaping healthcare delivery, the fundamental responsibilities and ethical standards of medical practice remain constant.

## ➤ Ethical and Professional Considerations

- **Patient Privacy & Trust**: Patients may feel uneasy about AI recording their clinical encounters. Transparent disclosure and consent are essential.
- **Bias in Documentation**: Speech recognition and natural language processing (NLP) models may misinterpret accents, dialects, or medical terminology, leading to inequities.
- **Transparency & Accuracy**: Clinicians must review and verify AI-generated notes to prevent inaccuracies from being embedded in the medical record.
- **Autonomy & Consent**: Patients should be informed when an AI scribe is in use and allowed to opt out.
- **Clinician Oversight**: Automation bias refers to a tendency for humans to over-rely on automated systems for decision-making. The clinician must remain accountable for the final documentation. AI should be an assistant, not the author of record. Design workflows to ensure human intervention and decision-making are prioritized and require human verification and validation of any AI-generated documents (human in the loop).

## ➤ Regulatory Considerations

- **HIPAA Compliance**: AI scribe vendors must ensure secure handling of protected health information (PHI), both in transcription and storage.
- **FDA Oversight**: If an AI scribe evolves into a clinical decision support tool (beyond documentation), it may fall under FDA regulation as Software as a Medical Device (SaMD).
- **Data Use & Secondary Analysis**: Policies must clarify whether de-identified transcripts can be used for training or research.
- **Interoperability**: Integration with EHRs must comply with HL7 FHIR standards and ensure minimal disruption to workflows.

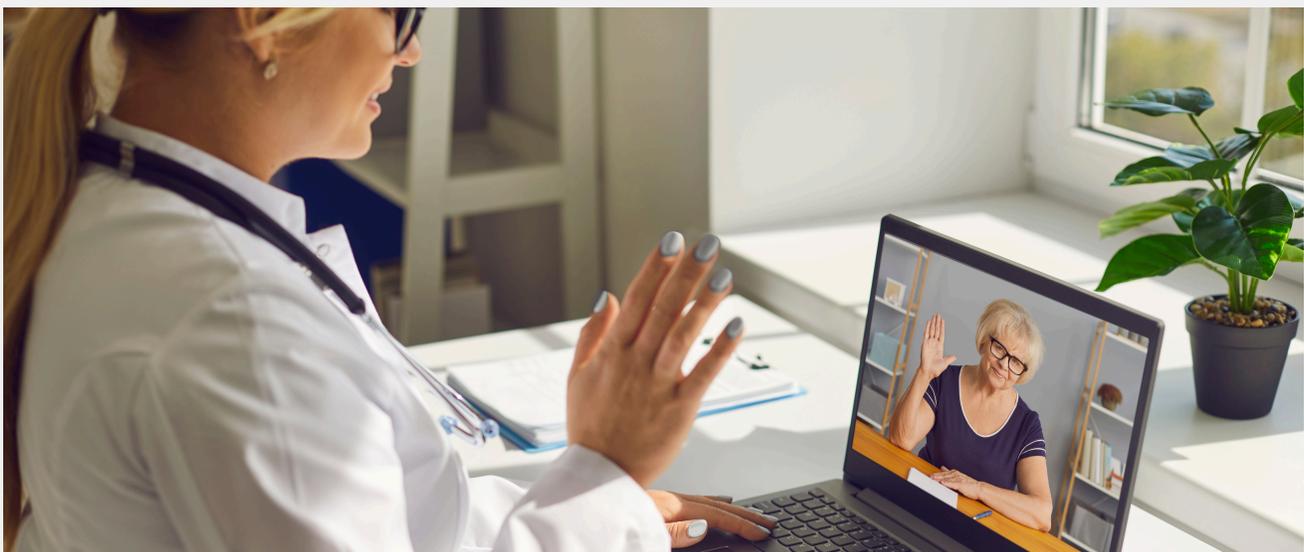
## ➤ Legal Considerations

- **Liability for Errors:** If an incorrect transcription leads to a clinical error, liability could fall on the provider, the health system, or the AI vendor. Responsibility is often case-by-case, but providers and health systems are the most likely parties to be named in any legal lawsuit stemming from improper documentation. Legal counsel should be engaged early to clarify liability frameworks, negotiate indemnification, and address these risks in vendor contracts.
- **Medical Record Integrity:** AI-generated documentation becomes part of the legal medical record and must meet evidentiary standards.
- **Informed Consent:** Failure to inform patients about AI scribe use could expose institutions to legal risk.
- **Employment & Labor Issues:** AI scribes may reduce reliance on human transcriptionists, raising workforce displacement concerns.



### Tips For Implementation:

- Establish guidelines for disclosure and patient consent when using AI scribes.
- Require clinician verification of all AI-generated documentation to safeguard accuracy.
- Mandate security audits and HIPAA (Health Insurance Portability and Accountability) compliance certification for vendors.
- Clarify liability frameworks specific to AI documentation tools.
- Encourage standards for fairness testing to reduce transcription bias across populations.



# Top 10 FAQs for Telehealth AI AutoScribe Implementation

## 1. What is AI AutoScribe, and how does it work?

AI AutoScribe is a digital documentation tool that uses artificial intelligence to convert provider–patient conversations into structured medical notes. It integrates with the electronic health record (EHR) to reduce manual charting.

## 2. Is AI AutoScribe compliant with HIPAA?

Yes. The tool is designed to meet HIPAA requirements by using secure storage, encryption, and access controls to safeguard protected health information (PHI).

## 3. How accurate is AI AutoScribe?

Accuracy varies depending on the system and clinical setting, with performance improving through user feedback and ongoing updates.

## 4. Does it connect with my EHR system?

Yes. AI AutoScribe supports integration with widely used EHR platforms (such as Epic and Cerner) and follows HL7 FHIR standards to minimize workflow disruption.

## 5. Can providers review and edit notes?

Yes. Clinicians remain the final author of record. They can edit, approve, and save all AI-generated notes before they are stored in the patient chart.

## 6. How long does implementation take?

On average, implementation takes 4–8 weeks, depending on system configuration, compliance review, and provider training.

## 7. Can it be used in both telehealth and in-person care?

Yes. The tool is compatible with telehealth visits and can also be used in traditional settings with appropriate hardware (e.g., microphones, mobile devices).

## 8. What happens if there's an error in the transcript?

Clinicians can correct errors before finalizing documentation. Most systems are designed to learn from these corrections and improve over time.

## 9. How does AI AutoScribe improve provider efficiency and ROI?

By reducing time spent on documentation, clinicians may be able to see more patients, devote more attention to direct care, and reduce after-hours charting. This can improve both provider well-being and organizational productivity.

## 10. Can it adapt to different specialties?

Yes. AI AutoScribe can be configured for specialty-specific terminology and workflows (e.g., pediatrics, cardiology, orthopedics) to maintain accuracy across diverse clinical areas.

# Appendix: Contacts & Key Resources

## »» Contact Us



## »» Support Resources

- **HealthIT.gov – Telehealth & Health IT**  
Offers federal guidance on topics such as EHR integration, data privacy, interoperability, and meeting HIPAA requirements.
- **American Telemedicine Association (ATA)**  
Provides education, practice guidelines, and policy updates on the use of telehealth and digital health technologies.
- **Healthcare Information and Management Systems Society (HIMSS)**  
Shares insights and research on health IT, including the role of AI, digital health transformation, and best practices for EHR optimization.
- **Office of the National Coordinator for Health IT (ONC)**  
Serves as the federal authority on health IT standards, interoperability, and certification requirements to ensure secure data exchange across systems.
- **National Library of Medicine (NLM)**  
Publishes research articles, case studies, and resources on artificial intelligence in healthcare and clinical documentation.

**These platforms provide valuable support, ensuring smooth integration and regulatory compliance for AI AutoScribe in telehealth.**

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