THE BIG UNLOCK
Decoding Healthcare Transformation Through AI

Podcast Hosted By

Rohit Mahajan

Ritu M. Uberoy

Inside the Minds of AI Leaders

Insights, Initiatives, and the 2026 Strategic Playbook

THE BIG UNLOCK

Decoding Healthcare Transformation Through AI

This report includes:

Season 6 : 2025
Episodes 150-192

Episodes Launched
43

Overall Stats:

7+ Years Running	**190+** Guests
303,000+ Followers	**161,000+** Plays

Ranked in Top #10 Healthcare Podcast

The Big Unlock podcast keeps you at the forefront of healthcare's digital transformation, featuring candid conversations with C-suite leaders on AI adoption, digital health innovation, and emerging technologies. Season 6 of the podcast spotlights real-world insights on embedding AI into clinical workflows, reducing clinician burden, and rehumanizing care. With over 190 episodes, the podcast continues to unlock fresh perspectives shaping the future of healthcare.

Featured Guests

Lilly · GE HealthCare · Google · Providence · MERCK · Northwell Health · John Muir Health · MUSC Medical University of South Carolina · Mount Sinai · novo nordisk · Johns Hopkins Medicine · Hackensack Meridian Health

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Episode 150

David H. Berger, MD

Digital Health Entrepreneur & Founder
AI Healthcare Insights

Clinicians Are Going to Become Partners With AI

David H. Berger, MD, MHCM is a digital health entrepreneur serving on the advisory boards of several digital healthcare startups. Dr. Berger has experience identifying cutting edge health care technology and implementing the technology effectively in hospitals. He is on the board of the Breakthrough Alliance, the oversight board for the HIT Lab at Columbia University. Dr. Berger serves as a mentor for early-stage companies as part of NYU Tandon Future Labs A/X Venture Studio, Techstars and Ignite Health. He is a frequent speaker at digital health conferences.

Dr. Berger has extensive experience in healthcare leadership and operations having served as the Chief Executive Officer of University Hospital at Downstate and as the Senior Vice President and Chief Operating Officer of Baylor St. Luke's Medical Center in Houston.

Dr. Berger is a native of New York, where he received his medical degree from the State University of New York Health Science Center at Brooklyn. Dr. Berger completed a General Surgery residency at SUNY-Brooklyn and fellowship in Surgical Oncology at the UT MD Anderson Cancer Center. Dr. Berger completed a Master of Science in Health Care Management at Harvard University in 2007. Dr. Berger has over 200 publications. He has been a tenured professor of Surgery at two medical schools. He is a member of the medical honor society Alpha Omega Alpha.

From sepsis deaths slashed by half to operating rooms humming 50% faster, David Berger has wielded AI as a surgeon-turned-CEO to transform healthcare delivery. At Houston VA and Baylor St. Luke's, he deployed real-time patient tracking and machine learning for early sepsis detection, boosting efficiency and saving lives. His work shows how clinician-led AI can materially improve efficiency, outcomes, and access. David envisions AI automating revenue cycle work, enabling ambient documentation, augmenting diagnostics, and partnering with clinicians through decision support, education, and immersive technologies to sustainably transform healthcare.

"We are at an inflection point between technology and the desperate needs within the health system." – David Berger

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Highlights of the episode

- AI tools like real-time OR tracking cut turnover times by 50% and enabled 95% on-time starts.
- Machine learning predicted sepsis decompensation, reducing mortality by nearly 50% as early as 2014.
- AI impacts four areas: back-office (revenue cycle), front-end access, care facilitation (ambient scribes), and direct care delivery (e.g., 95% accurate AI breast density analysis).
- Surgeons adopted ambient AI documentation faster than primary care, viewing notes as barriers to procedures.
- AI acts as a clinician partner, improving diagnostic accuracy rather than replacing doctors.

Episode 151

Ashish Atreja, MD, MPH

Founder, VALID AI
Venture Partner, GlobalVenturesX

AI Technology Can Unlock Healthcare's Productivity Paradox

Ashish Atreja, MD, M.P.H., F.A.C.P., A.G.A.F., is a professor, entrepreneur, investor, and a leading voice in evidence-based digital health and AI-led transformation. He served as CIO and Chief Digital Health Officer at UC Davis Health, where he expanded digital and AI capabilities, transformed care delivery, and improved patient outcomes. Under his leadership, UC Davis Health became the only California health system to achieve HIMSS Digital Health Most Wired Level 10 for both inpatient and ambulatory care. Previously, Dr. Atreja was Chief Innovation Officer for Medicine at Mount Sinai Health System, where he established one of the first academic medical center innovation hubs to develop and test disruptive digital health technologies. His pioneering work in digital therapeutics, including prescribing mobile health apps, earned him the nickname "the app doctor."

Earlier at Cleveland Clinic, he led EHR implementation, served as Associate Program Director for the Informatics Fellowship, and won an innovation award for developing an early virtual pager and messaging application. In 2016, Dr. Atreja founded NODE. Health to advance evidence-based digital medicine globally. In 2023, he launched VALID AI Health, a collective of 50+ health systems co-validating and scaling generative AI. He has published 100+ academic papers, has been NIH-funded since 2014, and is a global keynote speaker.

Healthcare's AI scale problem is being tackled head-on by Dr. Ashish Atreja, physician, informaticist, and digital health leader. A former CIO and innovation chief at Mount Sinai and Cleveland Clinic, Dr. Atreja has led enterprise AI strategy, launched digital health labs, and co-founded initiatives like VALID AI, now uniting 50+ health systems to evaluate and scale AI responsibly. His work replaces fragmented pilots with shared governance, evidence-based use cases, and measurable ROI. Dr. Atreja believes AI will unlock productivity through ambient documentation, patient automation, and clinician-led ecosystems.

"We need to increase our capacity as health systems to ingest the right AI solutions, digest them, and maximize their value."
– Dr. Ashish Atreja

Highlights of the episode

- Successful AI adoption starts with a clear health system strategy, supported by governance, prioritization, and disciplined implementation, not testing every new tool.
- AI delivers the most value when clinicians act as designers and validators, ensuring solutions are trusted and practical.
- Health systems can't implement AI in isolation; collective learning reduces duplication and accelerates adoption.
- AI success depends on governance, integration, continuous monitoring, and measuring real-world impact.
- Tools like ambient documentation, automation, and decision support are moving AI from pilots to measurable value.

Episode 152

SANFORD HEALTH

Jeremy Cauwels, MD

Chief Medical Officer
Sanford Health

The Patient Will See Us Now: Rethinking Virtual Care

Jeremy Cauwels, MD, FACP, FHM, serves as Sanford Health's chief medical officer. In this role, he represents physician interests to the executive leadership team and Board of Trustees. He also chairs the quality cabinet, champions the system's effort to become a highly reliable organization and oversees enterprise aspects of the medical staff.

Prior to his appointment to chief physician in 2021, Cauwels led safety, quality and patient experience as senior vice president of quality. He also served as vice president and chief medical officer for Sanford Health Plan. Cauwels started with Sanford Health as a hospitalist in Sioux Falls in 2006, was promoted to director of the group and eventually became Sanford USD Medical Center's chief of staff.

Born in South Dakota and raised in northwest Iowa, Cauwels has bachelor's degrees in chemistry and biology from the University of Northern Iowa and a medical degree from the University of Iowa Carver College of Medicine. He completed his residency and a chief resident year at the University of Kansas in Kansas City, Kansas. Cauwels is a fellow of the American College of Physicians and the Society of Hospital Medicine. Cauwels and his wife, Teresa, live in Sioux Falls with their three children.

Jeremy Cauwels spearheaded a dedicated virtual care center featuring 3D-printed models for surgical planning, telehealth training for residents, and ambient AI dictation that lets clinicians finish notes by day's end and reclaim family time. These efforts delivered major value, saving patients 33 million driving miles through 800,000+ virtual visits, including 20% of mental health encounters, and using text-based monitoring for chronic conditions like diabetes and depression to avert crises. Jeremy foresees AI improving risk scoring for screenings like colon cancer, expanding virtual psychiatry for ERs in mental health deserts, and scaling virtual care to meet patients where they live.

"Rather than the old phrase of your doctor will see you now, we like to think of it as the patient will see us now." – Jeremy Cauwels

Highlights of the episode

- A dedicated virtual care center integrates 3D printing for anatomy planning, resident telehealth training, and an innovation hub for safe digital testing.
- Over 800,000 virtual visits saved patients 33 million driving miles, with 20% of mental health visits remaining virtual.
- Ambient AI dictation lets clinicians finish notes by shift end, freeing them up for family time.
- Text-based RPM for diabetes, heart failure, and depression prevented suicide through mood alerts and post-ER follow-up.
- AI-driven colon cancer risk scoring uses 85 factors to personalize screening and reach high-risk rural patients remotely.

Episode 153

TidalHealth

Dr. Mark Weisman

Chief Information Officer and Chief Medical Information Officer
TidalHealth

While There Should be Zero Tolerance for Failure, Embrace Experimentation to Drive Innovation

As the Chief Information Officer and Chief Medical Information Officer for TidalHealth, Inc., **Dr. Mark Weisman** leverages over 20 years of healthcare IT experience to make the professional lives of our doctors and nurses better through the use of technology and help the entire care team deliver the best healthcare possible. He is double boarded in Internal Medicine and Informatics and practiced for 18 years in the Tidewater area of Virginia. He currently leads a team of 160 IT professionals and manages a $40 million budget; Dr. Weisman successfully launched new initiatives in telehealth, virtual nursing, clinical communications, and AI.

Dr. Weisman has pioneered programs to boost informatics knowledge, provider efficiency, and digital engagement. Recognized as a national thought leader, he contributes to multiple media outlets and drives strategic discussions around AI and healthcare IT innovations.

Dr. Weisman blends experience as a paramedic, firefighter, and primary care clinician with informatics leadership. He advances data governance using Epic SlicerDicer to address "dirty data," deploys MyChartBuilder for targeted patient microsites like rheumatology referrals and lung cancer screening, and pilots virtual nursing with AI-based fall detection. His work sharpens clinician focus on complex care, boosts patient engagement through personalized education, and enables A/B testing in community hospitals. He envisions AI moving beyond repetitive tasks, with LLMs supporting diagnoses, cloud migration enabling analytics, and clinicians validating outputs for safe adoption.

"The data will always be dirty in healthcare until the operational leaders sit down, look at their data, engage with it, use it to make operational decisions and then challenge it. And say, this just doesn't feel right." – Dr. Mark Weisman

Highlights of the episode

- Healthcare data is often "dirty" due to EHR workflow mismatches; operational leaders must use tools like Epic SlicerDicer to engage with and clean data for better decisions.
- MyChartBuilder enables quick, personalized Epic microsites shown only to eligible patients, supporting education and A/B testing.
- Virtual nursing pilots pair cameras and mics with AI to automate fall detection and monitoring, freeing staff for higher-value care.
- LLMs work best with experienced clinicians who validate outputs; users must understand limitations to avoid errors.
- Community hospitals should support risk-tolerant pilots, strong governance, and cloud migration to enable AI-ready analytics.

Episode 154

BayCare

Sowmya Viswanathan, MD

Chief Physician Executive
BayCare Health System

As AI Proves Its Value in Improving Care Delivery, Widespread Adoption Will Come

Sowmya Viswanathan, MD, MHCM, MBA, FACP, is the Chief Physician Executive for BayCare Health System. An Internal Medicine physician, Dr. Viswanathan spent much of her healthcare career in Massachusetts and New Hampshire, with clinical roles at UMass Memorial Medical Center and Harvard University/ Partners HealthCare. She has held multiple senior leadership positions, including Quality Officer, Regional Chief, Physician-in-Chief, Chief ACO Officer, and Group Chief Medical Officer at large health systems such as Dartmouth Hitchcock, UMass, and Tenet Health.

In her current role, Dr. Viswanathan has enterprise-wide responsibility for BayCare's clinical teams, including hospitals, ambulatory services, the employed medical group, provider networks, graduate medical education and research, value-based care delivery, population health services, the health plan, and digital health. She leads system-wide strategy, engages clinical leaders to ensure high-quality, value-based care, and focuses on optimizing financial and operational performance while driving efficiencies across service lines. Dr. Viswanathan has maintained an active clinical practice for over 20 years and has served as an Instructor at the Harvard School of Public Health. She completed her Master's in Health Care Management at the Harvard T.H. Chan School of Public Health and her MBA at the University of Massachusetts, Amherst.

AI is moving from “buzzword” to bedside impact at BayCare. Dr. Soumya Viswanathan shared her shift from full-time clinician to system leader through mentorship, results, and formal training (MBA/MHCM). At the 16-hospital system, she leads EHR optimization (Cerner), telehealth expansion, remote monitoring, and AI pilots for stroke detection, eICU, sepsis alerts, and radiology findings, including dictation tools that reduce clinician burden. These efforts improve access in underserved areas, reduce alarm fatigue, enhance early detection, and streamline workflows. She believes generative AI will transform healthcare by augmenting, not replacing, clinicians.

“We have to get to the stage where the ChatGPTs of the world help us drive better patient care and better outcomes for our patients. Then, I think the comfort level will set in.”
- Dr. Soumya Viswanathan

Highlights of the episode

- Rapidly scale GME programs (e.g., from 24 to 500+ residents) to meet migration-fueled demand in growing regions.
- Chief Physician Executives must integrate clinical, ops, finance, and IT for system-wide success.
- Deploy telehealth, remote monitoring, and virtual rehab to handle surging visit volumes efficiently.
- Prioritize AI for early detection (stroke/sepsis), eICU, radiology incidental findings, and care coordination with proven ROI.
- Combat alarm fatigue through tuning; advance GenAI only after ensuring safety and outcome improvements.

Episode 155

Northwell Health

Sophy Lu

SVP, Digital Integration and Business Relations
Northwell Health

Digital Relationship Management is Bridging Operations, Technology, and Patient-Centered Care

Sophy Lu is a Senior Vice President at Northwell Health for digital and business integration. Her responsibilities include synergizing M&A operations to business strategies and building a new digital relationship management discipline in the Western market. In her 15-year tenure at Northwell, she was appointed to various executive leadership positions including CIO to deliver the health system's long term strategic vision, digital and technology transformation.

Sophy has always thrived on solving the impossible, leading a team of diverse talent, organizing chaos into calm, helping people, making a difference every day, and always enjoying the journey! Outside of work, Sophy lives in Brooklyn with her husband, their two adulting offsprings, their four Labradors and two Norwegian forest cats. She enjoys cooking, skiing, knitting, traveling, and spending time with her family and friends.

Sophy Lu evolved from chemical engineering and consulting through St. Vincent's bankruptcy turnaround to Northwell's CIO role, pioneering revenue cycle and EHR foundations. Now bridging operations, tech, and patient experience, she drives EHR readiness, OR throughput optimization via real-time tech, and contiguous M&A growth (including cross-state deals). AI efforts emphasize operator-led problem-solving: internal AI hub for secure GenAI, governance for admin tasks like policy search, plus imaging/precision medicine pilots, prioritizing security, culture fit, and measurable efficiencies.

"In order for AI to be successful and scalable, you really need to start with the operators in mind, and that operator could be tech."
– Sophy Lu

Highlights of the episode

- Start AI initiatives with clinicians and operations defining real problems, not chasing shiny tools, to ensure scalable impact beyond GenAI hype.
- Bridge technology, operations, and patients through stakeholder alignment, workflow translation, and continuous metrics for EHR and M&A success.
- Real-time tech balancing schedules, rooms, and staff boosts efficiency, volume, revenue, and clinician joy.
- Prioritize culture and people integration before technology roadmaps, securing cybersecurity and resiliency first.
- Build governed internal hubs to federate GenAI safely across administrative and clinical use cases at scale.

Episode 156

ROCHESTER REGIONAL HEALTH

Dwight Raum

EVP and Chief Digital Information Officer
Rochester Regional Health

Healthcare Is in a Perfect Storm: Technology Is the Only Way to Close the Supply-Demand Gap

Dwight Raum is a healthcare technology executive with a successful career leading digital transformation initiatives in the industry. He is the former Chief Technology Officer (CTO) and interim Chief Information Officer (CIO) of Johns Hopkins Medicine (JHM) and the University. While there, Dwight led numerous strategic initiatives, including establishing the Technology Innovation Center, the Precision Medicine Analytics Platform, IT modernization, and cybersecurity efforts.

In 2021, Dwight left JHM to serve as the Chief Digital Officer at Quil Health, a healthcare technology startup that empowered seniors to stay in their homes longer through engagement daily insights. At Quil, he oversaw product development and engineering for the company's Assure product, where he implemented The Internet of Things (IoT) and artificial intelligence technology.

Dwight has written numerous articles on technology in healthcare and contributed to the thought leadership of digital transformation. He earned a degree in Management Science with a specialization in Operations Management from Virginia Tech.

Dwight Raum drove a single-instance Epic implementation to unify nine hospitals. He successfully integrated AI for call centre routing and developed "COIST," an iPad tool for guiding cardiac resuscitation and documentation. His work bridges critical staffing gaps, shifting the industry toward risk-based, value-based care models. Dwight envisions AI as a crucial collaborator that will eventually eliminate "pajama time" by automating routine clinical documentation tasks. He predicts that by 2030, technology will be the primary engine enabling society to meet escalating healthcare demands while effectively optimising our national spending to ensure clinical excellence.

"LLMs are remarkable, but there is a definite need for caution and maintaining the human in the loop." – Dwight Raum

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Highlights of the episode

- Rather than appointing a Chief AI Officer, Dwight advocates for a Center of Excellence to align legal, privacy, and clinical experts.
- Technology is the only "reasonable way" to bridge the widening gap between limited nursing supply and rising patient demand.
- Healthcare must shift from fee-for-service to risk-based care ahead of the 2030 CMS transition.
- Despite the power of LLMs, hallucinations require humans to remain in the loop.
- Near-term AI wins include reducing "pajama time" and documentation burden to combat physician burnout.

Episode 157

DukeHealth

Angelo Milazzo, MD MBA,

Chief Medical Officer
Duke Health Integrated Practice

Ambient Tech Eases Documentation, Restoring Joy by Letting Clinicians Focus on Patients

Dr. Angelo Milazzo is a Professor of Pediatrics at the Duke University School of Medicine and serves as Chief Medical Officer for the Duke Health Integrated Practice. In this role, he leads the operational and strategic management of an ambulatory care network of more than 4,200 physicians and advanced practice providers treating over 2 million patients annually across more than 110 locations in North Carolina. Previously, Dr. Milazzo served as Vice Chair for Practice and Clinical Affairs in the Department of Pediatrics at Duke Health. He founded Duke Children's Consultative Services of Raleigh, the first permanent pediatric practice of Duke Health in Wake County, and served as its Medical Director for 15 years. He also served as interim Chief Medical Officer for Duke Children's Hospital during the COVID-19 pandemic.

Dr. Milazzo received his undergraduate degree from Harvard University and his medical degree from the Renaissance School of Medicine of the State University of New York. He completed his residency in pediatrics and fellowship in pediatric cardiology at Duke University Medical Center and maintains a cardiology practice focused on congenital and acquired cardiac disease. He is an affiliate faculty member of the Duke-Margolis Institute for Health Policy and co-authored North Carolina's statute mandating newborn cardiovascular screening in 2013.

Dr. Angelo Milazzo implemented large-scale ambient listening technology to reduce documentation burden for 4,200 providers. By partnering with Abridge and deploying performance engineers at the point of care, he helped restore "joy" in clinical practice, shifting focus from data entry to patient engagement. This work improves provider satisfaction and operational efficiency. Dr. Milazzo envisions a future where Agentic AI intelligently triages clerical tasks, creating professional abundance and redefining medical work while empowering clinicians to lead responsible clinical innovation.

"We measure success through clinician feedback and EHR-integrated data, restoring joy by improving patient care."
– Dr. Angelo Milazzo

Highlights of the episode

- Embedding data performance engineers in clinical settings like ORs and endoscopy suites translated raw practice data into actionable insights.
- Ambient listening acts as a positive disruption, removing documentation friction so clinicians can focus on patients.
- The future of medicine is a human-AI partnership, with technology handling clerical tasks while clinicians retain decision accountability.
- Duke's adoption succeeded through rigorous pilots and IT leadership made up of practicing physicians.
- Addressing burnout requires innovation that fundamentally changes how clinicians work and engage.

Episode 158

Stanford MEDICINE Children's Health

Keith Morse, MD, MBA

Clinical Associate Professor of Pediatrics & Medical Director of Clinical Informatics - Enterprise AI
Stanford Medicine Children's Health

The Right AI Use Case Starts with Knowing Your Data and Your Workflows

Keith Morse, MD, MBA, is a pediatric hospitalist and Medical Director of Clinical Informatics - Enterprise AI at Stanford Medicine. His work in operational and research informatics focuses on meaningful deployment of machine learning in clinical settings.

Dr. Morse serves as Stanford's co-site PI for participation in PEDSnet, an 11-site pediatric research consortium. His academic roles include Program Director for Stanford's Clinical Informatics fellowship.

Dr. Keith Morse leads operational AI initiatives focused on specific workflows. He successfully deployed "Ask Digi," a PHI-compliant chatbot, and developed LLM-based audits for surgical site infections, reducing human review by 80%. His work brings immense value by automating confidential teen health data identification to comply with privacy laws while upskilling staff through prompt engineering workshops. Dr. Morse envisions a future where Agentic AI increases efficiency but warns that providers must remain accountable. He predicts legal challenges will eventually force a concrete reckoning regarding the true cost of errors.

"We are ultimately responsible for how these tools impact our providers and our patients. Nobody is going to take that responsibility from us." – Dr. Keith Morse

Highlights of the episode

- AI must be applied to a specific person, role, and step in the workflow; vague problems won't scale.
- Using LLMs to screen surgical site infections can cut human review workload by 70–80%, letting experts focus on true issues.
- AI can audit notes to flag sensitive teen health data, supporting state privacy laws alongside federal sharing rules.
- Adoption improves when staff have PHI-compliant internal tools (e.g., "Ask Digi") to safely experiment in daily work.
- Despite AI's upside, weak regulation means providers remain fully accountable for outcomes and legal risk.

Episode 159

VANDERBILT UNIVERSITY MEDICAL CENTER

Yaa Kumah-Crystal, MD

Associate Professor of Biomedical Informatics and Pediatric Endocrinology
Vanderbilt University Medical Center

Voice-Based Conversational Interfaces Will Revolutionize EHRs and Enhance Patient Care

Dr. Yaa Kumah-Crystal is a Pediatric Endocrinologist and Biomedical Informaticist at Vanderbilt University Medical Center. Her research centers around enhancing communication in the Electronic Health Record (EHR) system through documentation, voice technology, and exploring generative AI pathways for clinical summaries utilizing EHR metadata.

Dr. Kumah-Crystal's research includes in-depth evaluations of large language models (LLMs) in informatics queries and for clinical reasoning. Dr. Yaa Kumah-Crystal is an active leader in academic discussions on the emerging use cases for LLMs. Collaborating closely with VUMC HealthIT, Dr. Kumah-Crystal aims to streamline data capture, improve information accessibility for patients, and facilitate seamless collaboration among healthcare professionals. Dr. Kumah-Crystal remains clinically active, supervises Pediatric Endocrine Fellows, and sees her own clinic patients who know her as Dr. Yaa.

Dr. Yaa Kumah-Crystal has pioneered ambient listening workflows and early voice assistants like “Hey Epic” to streamline EHR documentation. By piloting generative AI, she has successfully reduced “pajama time,” allowing physicians to focus on patient connection rather than data entry. Her work provides immense industry value by setting new standards for provider recruitment and operational efficiency. She envisions a “headless EHR” where voice-based AI agents intelligently navigate clinical data and manage patient portals, eventually enabling proactive, home-based care through real-time remote monitoring and automated alerts.

“This new AI era after we’ve gone through kind of the regular digital EHR era is going to be some of the most exciting things to help care for our patients.” – Dr. Yaa Kumah-Crystal

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Highlights of the episode

- Health IT is shifting to a voice-first model where the EHR recedes and clinicians query data naturally instead of navigating tabs.
- Access to ambient listening tools is becoming expected; organizations without them may struggle with clinician recruitment and retention.
- While AI can generate notes, medical training must prioritize data synthesis and clinical reasoning before relying on AI efficiency.
- Future patient portals will use intelligent agents for routine tasks like scheduling and medication refills via voice.
- AI shows strong promise in chronic disease management through real-time alerts and risk insights from everyday remote monitoring.

Episode 160

pagerhealth

Rita Sharma

Chief Product Officer
Pager Health

Human-centered GenAI is Rebuilding Trust in Healthcare Consumers

Rita Sharma is the Chief Product Officer at Pager Health, a connected health platform that enables healthcare enterprises to deliver high-engagement, intelligent health experiences for their patients, members, and teams through integrated technology, AI, and concierge services. At Pager Health, she is responsible for leading the product team and the creation, innovation and execution of product strategies and roadmaps. Rita also leads the development of go-to-market strategies and solutions in engagement, care navigation, virtual care, wellbeing and value-based care on a global scale.

Rita comes to Pager Health from Salesforce, where she directed the global development and release of the company's first healthcare product, Health Cloud, focused on transforming patient and member-centric experiences in healthcare and life sciences. She was responsible for Health Cloud's long-term product roadmap and global go-to-market (GTM) strategy and positioned Salesforce as the platform of choice for provider, payer, pharma, and device segments globally.

Rita Sharma successfully integrated AI-powered platforms supporting 30M lives, including a remote consultation system for fourteen million people in Colombia. She launched the "Really Well" platform, using Agentic AI to deliver personalised wellness journeys and achieving up to seven-fold ROI. Her work addresses industry-wide trust deficits by providing twenty-four-seven access and reducing heavy administrative burdens. Rita envisions a "hybrid" future where AI agents automate intake and navigation, while clinicians remain "in the loop" for actual clinical care to ensure safety, ultimately enabling hyper-personalised, "N of one" patient experiences.

"If we keep humans in the loop, we focus on efficiency, I think we are going to see amazing inroads with Gen AI and AI in general" – Rita Sharma

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Highlights of the episode

- AI improves efficiency in data intake and use, but humans must remain accountable for clinical care to ensure trust and safety.
- Despite hallucination concerns, Rita Sharma's research shows consumers trust AI to navigate benefits and find providers.
- Generative AI enables personalized health journeys, guiding individuals to solutions like stress management based on their data.
- Breaking silos between wellness and clinical care can deliver up to 7x ROI for targeted populations.
- Most friction stems not from technology, but from organizational trust around data rights, privacy, and security.

Episode 161

MUSC
MEDICAL UNIVERSITY of SOUTH CAROLINA

Crystal Broj

Enterprise Chief Digital Transformation Officer
Medical University of South Carolina

AI Agents Reduce Patient Access Time and Pajama Time for Doctors

Crystal Broj is the Enterprise Chief Digital Transformation Officer for the Medical University of South Carolina (MUSC), a role she has held since 2022. She drives and accelerates MUSC's Digital Transformation Strategy, overseeing the delivery of innovative products, solutions, and services that provide optimal value across healthcare systems, university operations, and research initiatives. Crystal's extensive experience in digital transformation has positioned her as a sought-after speaker at leadership events nationwide. Her achievements were further recognized when she was named a 2024 Global Chief Digital Officer 100 Award Winner, celebrating her exceptional talent and impact in driving digital innovation and business transformation.

Previously, Crystal served as the AVP for Digital Strategy & Transformation at NorthShore University Health System and as the Chief Technology & Innovation Officer for the American Association of Diabetes Educators (AADE). Her leadership at these organizations set benchmarks in digital front-door strategies and innovative solutions that improved access to care and health education. Originally from Chicago, Crystal now enjoys "low country living" in Charleston, bringing her Midwest work ethic to the vibrant healthcare community of South Carolina.

Crystal Broj has transformed operations by deploying AI agents such as “Emily” for call deflection and “Notable” for automated prior authorizations, cutting tasks from 30 minutes to 30 seconds. Her work advances industry standards by closing clinical care gaps such as scheduling life-saving mammograms and reducing physician “pajama time” by 37% through ambient listening. Crystal envisions a future where AI replaces fragmented point solutions with seamless, automated patient navigation and ultimately “rehumanizes” healthcare, freeing clinicians to focus on high-value care while AI manages routine administrative work.

“One of the biggest lessons learned when using new technologies like AI and voice tools - start small and then move forward.” - Crystal Broj

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Highlights of the episode

- Success starts small; piloting digital check-ins in five offices before scaling ensures technology works before rollout.
- Transformation goes beyond efficiency; automated mammogram outreach identified 180 women with abnormal results, closing care gaps.
- AI agents cut prior auth and call routing from minutes to seconds, letting staff work at the top of their license.
- Adoption fails without engagement; physicians ignore emails, making hands-on, personalized support essential.
- Health systems can’t manage hundreds of AI tools; unified platforms are needed for seamless end-to-end experiences.

Episode 162

JOHN MUIR HEALTH

Priti Patel, MD

VP and Chief Medical Information Officer
John Muir Health

Beyond the EHR: Advancing Patient Care with AI and Data Strategies

Priti Patel is the Chief Medical Information Officer at a John Muir Health, where she leads efforts to thoughtfully integrate emerging technologies into clinical practice. She has been at the forefront of AI adoption in healthcare, guiding her organization to become an early adopter of Ambient AI scribes in July 2023. This pioneering work has helped reduce provider documentation burden, improve clinician satisfaction, and enhance the overall patient experience through seamless integration of AI into EHR workflows.

In addition to her work in AI, Dr. Patel has developed and led a system-wide data strategy focused on advancing data literacy and cultivating a data-driven culture. Through education, engagement, and strong governance, she has helped empower clinical and operational leaders to leverage data more effectively in decision-making and performance improvement. Dr. Patel is passionate about bridging the gap between technology and clinical care, ensuring innovation supports the needs of patients, providers, and the broader health system.

Dr. Priti Patel has transformed clinical workflows by integrating ambient AI with Epic, reaching sixty percent adoption. She also launched a data literacy program that trained staff from leadership to frontline roles to effectively use analytics. Her work delivers industry value by reducing clinician cognitive load, saving thirty minutes per day, and restoring meaningful patient connections. Dr. Patel envisions a future shaped by Agentic AI and natural language processing to automate administrative tasks such as prior authorizations. She predicts advanced intelligent tools will ultimately rehumanize medicine, enabling clinicians to focus on care delivery while extending longevity.

"I think change management is the key to adoption; and adoption is the key to seeing the benefits of technology. That connection is really key." – Dr. Priti Patel

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Highlights of the episode

- Ambient AI adoption accelerated only after full Epic integration removed friction from side-by-side tools.
- John Muir Health invested in data literacy, including one-to-one C-suite training, so teams could truly "speak with data."
- Although metrics showed 30 minutes saved, physicians felt it closer to two hours due to reduced cognitive load and fatigue.
- The organization prioritizes fully leveraging core platforms before adding standalone innovations.
- Adoption succeeds when informaticists act as change agents between clinical workflows and technical design.

Episode 163

Atlantic Health

Shekar Ramanathan

Executive Director of Digital Transformation
Atlantic Health System

From Automation to Autonomy: Agentic AI Is Healthcare's Next Frontier

Shekar Ramanathan has over 20 years of progressive leadership experience in health information technology and is a nationally recognized speaker on improving patient and provider experiences through digital transformation. He has been honored on multiple industry lists, including Becker's Healthcare Up and Comers in Health IT, and was recently recognized as an NJBIZ Leaders in Digital Technology honoree for his contributions to the field.

As Executive Director of Digital Transformation at Atlantic Health System, he leads the organization's digital strategic vision and designs holistic solutions that enhance patient, clinical, and operational experiences. His data-centric approach to real-time decision-making and adoption of emerging technologies has positioned Atlantic Health as a healthcare innovator. He has also driven new business opportunities by leveraging AI, machine learning, and predictive analytics.

Shekar holds a Bachelor's degree in Information Systems from the University of Washington, graduate education in Medical Informatics and Healthcare Management from Oregon Health & Science University, and an MBA from The Ohio State University. His certifications include Certified Healthcare CIO (CHCIO), Certified Digital Health – Executive (CDH-E), and Certified Professional in Healthcare Information & Management Systems (CPHIMS).

Shekar Ramanathan manages AI integration across seven hospitals to solve complex clinical problems. He successfully implemented ambient voice, message routing, and a virtual medical assistant for patient outreach while establishing robust AI governance frameworks. By focusing on prescriptive workflows and scalable pilots, his work provides industry value by reducing clinician burden and controlling costs. Shekar envisions a hybrid future of Agentic AI that automates administrative tasks. He predicts technology will finally "rehumanise" medicine by allowing providers to prioritise direct patient care and improve meaningful outcomes for every single patient visit.

"I think the next big thing is going to be Agentic AI. It's the next evolution as things become more and more autonomous."
- Shekar Ramanathan

Highlights of the episode

- AI should be integrated via frameworks and governance that support existing business and clinical strategies.
- Wide rollouts often fail; success needs prescriptive, verified prompts in narrow workflows to save time, not add friction.
- Healthcare must adopt agile, iterative vendor models to match tech evolution.
- Organizations must assess predictive accuracy and biases in "black box" AI, beyond marketing hype.
- Agentic AI can offload administrative tasks, fulfilling EHRs' promise and restoring physician-patient connection.

Episode 164

VIVID HEALTH

Patrick Mobley

Co-Founder and CEO
Vivid Health

We Believe in Provider-led AI Where Clinicians Have the Final Say

Patrick is Founder and CEO of Vivid Health, a generative AI care management platform serving risk-bearing providers, payers, and post-acute facilities. He previously served as President of the Mid-Atlantic for Bright Health, where he led one of the nation's largest exchange plans, growing membership by over 500% within two years.

Prior to Bright, Patrick led Aledade's largest national market in North Carolina, guiding independent providers in adopting value-based care strategies and expanding the local value-based care network by over 200% within 10 months. His executive experience also includes several senior roles at Evolent Health: as Market President for Virginia, he managed one of the nation's largest full-risk ACOs; as Managing Director for Payer Partnerships, he oversaw the company's entire value-based care portfolio; and as Senior Director for Business Innovations, he led new market implementations nationwide. Patrick's career began in consulting, working with Deloitte and Grant Thornton, among other firms. He earned a degree in Psychology with a minor in Public Policy from the University of North Carolina at Chapel Hill, and holds an MBA from East Carolina University.

Patrick Mobley pioneered a provider-led AI platform that automates clinical workflows from intake to care planning. His organisation delivers immense value by achieving a fifty percent reduction in documentation time and a hundred percent reduction in outreach labour for home health and primary care. This shifts the focus back to direct care coordination while improving patient engagement honesty. Patrick envisions a future where AI agents handle all non-clinical calls and EHRs serve merely as "file cabinets". He predicts that AI will accelerate value-based care by significantly lowering operational costs.

"We own the trademark to 'provider-led AI' because we believe that for all the good AI can create, the provider still has the final say." - Patrick Mobley

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Highlights of the episode

- Clinicians must retain final control over AI, which is why Mobley uses "Provider-Led AI."
- Automating the 27-page Oasis form cut documentation time by 50%, letting nurses focus on patients.
- Patients report mental and physical symptoms more honestly via AI text or voice than to live clinicians.
- Qualified Health Information Networks let AI access nearly any EMR, making deep integration essential.
- AI agents lowering chronic care costs could raise independent providers' savings from 50% to 80%.

Episode 165

Alvin Liu, MD

Inaugural Director of AI Innovation Center
Johns Hopkins Medicine

Scaling With Autonomous AI for Diabetic Retinopathy Screening

Dr. T. Y. Alvin Liu is the James P. Gills Jr. MD and Heather Gills Rising Professor of Artificial Intelligence in Ophthalmology. He completed his education at Phillips Exeter Academy, Cornell University (B.A.), and Columbia University (MD), and his ophthalmology residency and vitreoretinal fellowship training at the Wilmer Eye Institute at Johns Hopkins University (JHU). He was named an "Emerging Vision Scientist" by the National Alliance for Eye and Vision Research in 2020. Currently, he holds dual faculty appointments at the JHU School of Medicine and School of Engineering. He is also the Inaugural Director of the James P. Gills Jr. MD and Heather Gills Artificial Intelligence Innovation Center, the first dedicated endowed ($10 million) AI center at the JHU School of Medicine.

As an interdisciplinary strategist, he specializes in the implementation and scaling of healthcare AI technologies in clinical and operational domains, including autonomous AI for diabetic retinopathy screening and generative AI for revenue cycle management. He has operational experience across stakeholder alignment, IT integration, workflow design, KPI development, and change management. He serves in leadership roles in AI governance at both health system and national levels, including as co-chair of the Johns Hopkins Medicine AI and Data Trust Council and as a member of the American Academy of Ophthalmology AI Committee.

Dr. Alvin Liu pioneered autonomous AI for diabetic retinopathy screening and generative AI for revenue cycle management, improving screening adherence among disadvantaged populations and reducing administrative friction in prior authorizations. He led the creation of a clinician-led AI governance framework for safe, responsible implementation. He predicts "oculomics" using retinal biomarkers to detect systemic diseases and envisions integrated health systems and startups collaborating to accelerate responsible innovation, rehumanize medicine, and reduce patient suffering.

"AI will change medicine and society as we know it and that's something that I want to dedicate the rest of my life to."
- Dr. Alvin Liu

Highlights of the episode

- Autonomous diabetic retinopathy screening improved adherence among African American and Medicaid populations, closing care gaps.
- Future diagnostics may use "oculomics," AI analysis of retinal biomarkers, to predict systemic risks like cardiovascular disease, kidney damage, and dementia.
- Johns Hopkins' task force enforces seven principles, with physicians leading implementation for clinically-led, responsible AI.
- Startups often underestimate $3–5M FDA approval costs and CPT code complexities.
- AI development outpaces traditional health system decision-making, creating a major bottleneck.

Episode 166

cohere HEALTH

Siva Namasivayam

Chief Executive Officer
Cohere Health

Transforming Prior Authorization with AI

In his third entrepreneurial healthcare venture, **Siva Namasivayam** is passionate about building companies focused on improving the healthcare system.

Prior to co-founding Cohere Health and serving as its CEO since 2019, Siva was a founder and CEO of SCIO Health Analytics - a healthcare predictive analytics company for health plans, providers, life sciences, and pharmacy benefit managers. The company was acquired by EXL for $250M in 2018.

Siva has more than 20 years of experience in utilizing technology and data to improve healthcare processes. He holds a master's in computer science from the University of Pittsburgh, as well as an M.B.A. from the University of Michigan.

Siva transformed prior authorisation by building an AI-native platform that automates eighty-five percent of approvals in real-time. By employing fifty physicians to validate algorithms, he ensures clinical accuracy while reducing administrative "abrasion" for payers and providers. This work delivers industry value by slashing patient wait times from fourteen days to nearly instantaneous decisions, significantly lowering healthcare waste. Siva envisions a future where Agentic AI eliminates legacy manual processes entirely. He predicts technology will soon shrink all remaining complex clinical reviews to under two days.

"Eighty to eighty-five percent of the requests are usually approved, so we said, let's use AI to approve things faster, not to deny things." - Siva Namasivayam

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Highlights of the episode

- Cohere automates 80–85% of approvals, with all potential denials manually reviewed to ensure fairness.
- Fifty physicians across specialties validate AI algorithms to maintain clinical relevance and trust.
- AI summarization compresses reviews from up to 14 days to 1–2 days.
- Cohere's AI-native platform reduces reliance on manual portals, faxes, and calls, easing patient burden.
- Prior authorization ensures high-cost procedures, like MRIs, are performed only when clinically necessary.

Episode 167

AbsoluteCare
BEYOND MEDICINE

Rob Posner

Chief Technology Officer
AbsoluteCare

When Technology Meets Care Management, Outcomes Improve

Rob Posner is leading digital transformation as the Chief Technology Officer for AbsoluteCare. AbsoluteCare is a leading organization delivering primary and wrap around care to high utilization and acuity managed Medicaid members. Addressing health equity is a primary mission which drives our digital transformation agenda.

Previously, Mr. Posner was SVP for Pediatric Associates and led their technology transformation as it grew to become the national leader in office-based pediatrics. Prior to that, he established Envision Healthcare's corporate Transformation Office integrating its merger of Envision and Sheridan Healthcare resulting in the largest hospital-based physician practice in the US.

Rob Posner transformed care for the nation's most vulnerable by integrating a bespoke care management system with traditional EMRs. He successfully deployed a mobile tech stack and ambient AI, significantly reducing clinician administrative burdens. His work provides immense industry value by proving how technology-enabled, full-risk models improve outcomes for high-acuity Medicaid populations. Rob envisions a future where Agentic AI and automation eliminate routine "multi-click" tasks. He predicts healthcare has reached an inflection point where unified business-technology strategies will finally rehumanise medicine by prioritising direct member engagement to deliver superior outcomes.

"The goal of AI is to take work off the clinician's plate so they can spend more time with the patient." – Rob Posner

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Highlights of the episode

- Traditional EMRs suit office visits, not full-risk longitudinal care; dedicated care management systems are essential for high-acuity populations.
- Home care requires a mobile workforce with 5G laptops and iPhones for bedside scheduling and real-time data.
- Autonomous AI for diabetic retinopathy delivers instant results, motivating follow-ups and preventing complications.
- Digital transformation needs executive involvement, steering committees, and accountability.
- Ambient note-taking lets clinicians spend more time in meaningful patient interactions.

Episode 168

ARCADIA

Aneesh Chopra

Chief Strategy Officer
Arcadia

Reimagining Healthcare From Meaningful Use of Data to AI-Driven Equity

Aneesh Chopra is Chief Strategy Officer at Arcadia, a healthcare data platform, advocating interoperability and data-driven approaches that help providers, payers, and employers succeed in value-based care. He has extensive public-sector technology experience, serving as the first U.S. Chief Technology Officer under the Obama Administration, leading initiatives to modernize healthcare through EHRs and health information exchanges. He also served as Virginia's Secretary of Technology under Governor Tim Kaine.

As a public servant, he promoted public-private collaboration, a theme central to his 2014 book, Innovative State: How New Technologies Can Transform Government. His contributions to technology and healthcare have cemented his reputation as a forward-thinking leader leveraging technology for public good. Aneesh serves on the U.S. Department of Commerce's National AI Advisory Committee and the boards of Trimedx, IntegraConnect, Virginia Center for Health Innovation, and the George Mason Innovation Advisory Council. He holds a master's in public policy from Harvard Kennedy School and a bachelor's in health policy from Johns Hopkins University.

Aneesh Chopra oversees data platforms for 150+ health systems to build longitudinal patient records. His work delivers immense industry value; notably, his conversational AI initiatives helped one provider jump from two to four stars, yielding $6 million in bonuses. Aneesh advocates for a "Health Information Fiduciary" model where AI apps prioritise patient interests over corporate profits. He envisions an "innovative state" driven by public-private handoffs, predicting that integrated AI co-pilots and real-time APIs will soon democratise high-quality, low-cost care for all citizens.

"Healthcare has not seen the benefits of productivity, been as modernized with respect to technology adoption and use, but we have the greatest opportunity to democratize high-quality care if we could close that gap." – Aneesh Chopra

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Highlights of the episode

- The industry is shifting from "Meaningful Use" to technology supporting longitudinal care and clinical outcomes.
- Automated agents can close thousands of care gaps, improving quality ratings and generating millions in incentive bonuses.
- A new app marketplace prioritizes patient interests, avoiding corporate steering.
- Standardized APIs let clinicians detect condition changes in 5–6 days versus 60 days for claims data.
- Solving healthcare challenges needs a "third way" with public-private collaboration and open government data.

Episode 169

Vishisht Mehta, MD, FCCP

Director, Interventional Pulmonology
Comprehensive Cancer Centers of Nevada
Department Chairman, Pulmonology
MountainView Hospital

Advancing Pulmonology with AI and Functional Imaging

Dr. Vishisht Mehta is Director of Interventional Pulmonology at the Lung Center of Nevada, part of Comprehensive Cancer Centers, and Chair of Pulmonology at MountainView Hospital in Las Vegas. He is also a Clinical Assistant Professor at the Kirk Kerkorian School of Medicine. Fellowship-trained in Interventional Pulmonology, he specializes in minimally invasive diagnosis and treatment of lung disease.

Dr. Mehta has authored and reviewed scholarly publications and presented and moderated sessions at international conferences. He has received research awards and grants and holds Fellow status with the College of Chest Physicians (CHEST) and the American Thoracic Society, and is a Diplomate of the American Association of Bronchology & Interventional Pulmonology. He serves on the Nevada Leadership Board of the American Lung Association, the Executive Board of the Nevada Cancer Coalition, and the Nevada chapter of the American Lung Association. He founded the Nevada Lung Foundation and Pulmonary.ai and was named to Vegas Inc.'s "40 Under 40" in 2023.

His expertise includes AI applications in pulmonology, particularly early lung cancer detection. He earned his MBBS in India, completed Internal Medicine residency at Creighton University, Pulmonary & Critical Care fellowship at Memorial Sloan Kettering Cancer Center, and Interventional Pulmonology fellowship at Henry Ford Hospital.

Vishisht Mehta integrates AI to revolutionise lung cancer detection. He identifies high-risk smokers and lung nodules through automated scan analysis, drastically improving early diagnosis potential. Dr. Mehta created the educational platform Pulmonary.ai to bridge the clinician knowledge gap regarding emerging digital tools. His work provides immense industry value by addressing the massive screening gap for eligible patients. He envisions a future of functional imaging where AI captures respiratory dynamics beyond static pictures. Dr. Mehta predicts technology will evolve rapidly, requiring physicians to master data literacy.

"I don't know if everyone definitely needs AI, but I think the conversation should definitely be had to see whether AI software is the right fit for the workflow." – Vishisht Mehta

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Highlights of the episode

- While breast and colon cancer screenings reach 70–80%, only 5–6% of eligible patients get lung cancer screenings, a major gap in preventive care.
- AI can detect lung spots on scans done for other reasons, ensuring life-saving findings aren't missed.
- Emerging tech lets clinicians observe breathing phases for dynamic lung data beyond static imaging.
- Physicians must understand validation and data types to avoid poor implementations.
- Pulmonary.ai offers a centralized, non-commercial resource on AI for peers.

Episode 170

Providence

Sara Vaezy

Chief Transformation Officer
Providence

Designing AI-Native Healthcare with Innovation, Automation, and Responsible AI

Sara Vaezy serves as chief transformation officer for Providence. She is responsible for leading the Office of Transformation, which is accountable for driving Providence's responsible adoption of AI to enable the delivery system of the future. Additionally, she oversees marketing, brand, digital — including developing and investing in next-generation innovations and forging partnerships to scale sustainable technology solutions — and virtual care.

Prior to Providence, Sara was at The Chartis Group, advising clients on enterprise strategy, payer-provider partnership, and the development of population health companies. She serves as a National Committee for Quality Assurance board director, AARP Services Inc. board director, Praia Health board director, and a board observer for DexCare.

Sara is also a Harvard Executive Education faculty member. Sara holds dual master's degrees in health policy and health care administration from the University of Washington and bachelor's degrees in physics and philosophy from the University of California, Berkeley.

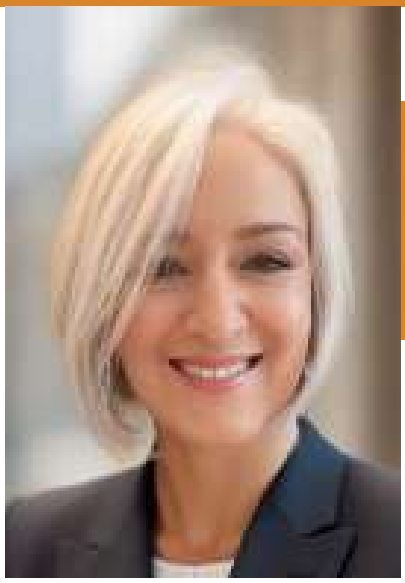
Sara Vaezy lead AI adoption and digital experiences for five million patients. She successfully pioneered "message deflection" platforms, reducing clinician in-basket volumes by thirty percent while enhancing patient access. Her work delivers value by spinning out innovative startups like DexCare and Praia Health to solve complex supply-demand and personalisation challenges. Sara envisions shifting towards "AI-native" business processes rather than simple task automation. She predicts a future focused on responsible AI monitoring and sustainable energy solutions to power models, ensuring healthcare remains ethical during rapid technological change.

"With AI agents, it's not just about automating the dull work — it's about doing things better. We don't want to just automate things; we want to improve them. As an industry, we shouldn't treat this as merely substitutive. We have to think about it more materially." – Sara Vaezy

Highlights of the episode

- Using intent recognition and AI agents, Providence redirects 30% of patient messages, letting individuals self-serve for tasks like scheduling or financial counseling.
- True transformation requires redesigning business processes; automating dull tasks alone underutilizes AI.
- Success relied on multi-year investments: single EHR (Epic), cloud migration (Azure), and an enterprise data warehouse.
- Providence manages the full customer experience from discovery to delivery.
- Resisting AI is like "fighting gravity"; focus on responsible, humane, ethical implementation.

Episode 171



Alicia Abella

AI Product Lead
Novo Nordisk

Aligning AI Fundamentals with User Experience in Pharma

Alicia Abella, Ph.D., is the AI Product Lead at Novo Nordisk where responsibilities include developing strategic vision and guiding ethical AI applications in the healthcare sector.

Prior to this role, Alicia served as Chair of the Technical Advisory Council and Executive Board Member at the Consumer Technology Association, contributing to key strategic initiatives and industry leadership. At Google, Alicia held positions as Global Practice Director for AI/ML and Managing Director for Telecom, Media & Entertainment Industry Solutions, focusing on sales strategies and innovative solutions. Alicia's extensive career at AT&T Labs included leadership roles in advanced technology realization and operational automation. Educational credentials include a PhD in Computer Science from Columbia University and a BS in Computer Science from New York University.

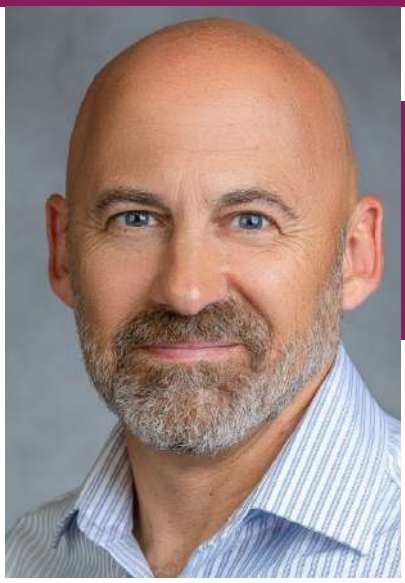
Alicia Abella leverages her research experience from Bell Labs and Google to transform pharmaceutical commercialization. She launched an AI Ambassador Program to demystify technology and foster peer-to-peer learning. By applying a "product mindset" and integrating legal early, she ensures scalable, compliant innovation. Her work accelerates drug time-to-market via automated market research and personalized content. Alicia envisions AI combining core technology with intuitive experiences and predicts LLMs will gain human-like contextual awareness.

"It'll be interesting for how we see these large language models evolving, so that they go beyond just maybe text, image, and video, and start to bring in more contextual knowledge." – Alicia Abella

Highlights of the episode

- Peer-to-peer learning beats top-down mandates; internal champions find high-impact use cases.
- AI shouldn't be built just because it can; a disciplined lifecycle—design, test, monitor, iterate—maximizes business value.
- Involving legal and compliance early sets guardrails without blocking innovation.
- Beyond drug discovery, AI automates knowledge search and speeds marketing campaigns.
- The "iPhone moment" for AI comes from simplifying complex models into intuitive interfaces, like ChatGPT.

Episode 172



dayton children's

J.D. Whitlock

Chief Information Officer
Dayton Children's Hospital

Building Value Through Real-World AI and Smart Technology Adoption

J.D. Whitlock is CIO at Dayton Children's, leading a team of 140 across Infrastructure & Operations, Data Services, Cybersecurity, Project Management, Workday ERP, and Epic EHR for an $800M pediatric integrated delivery network. Previously, he was VP, Enterprise Intelligence at Bon Secours Mercy Health, a $9B network, leading Enterprise Data Warehouse, Epic Analytics, Population Health BI, and Data Management teams. He began in group practice and managed care before moving into healthcare IT, gaining 30 years of experience across government, vendor, and provider organizations.

A retired USAF Lieutenant Colonel, J.D. started as a Navy Surface Warfare Officer for seven years, serving as Gunnery Officer on USS Paul F. Foster (DD-964) during Desert Storm. After a master's in healthcare administration, he joined the Air Force Medical Service Corps, serving in various management roles, including commanding the Patient Administration Division at Bagram Airfield, Afghanistan, supporting Operation Enduring Freedom in 2007. He owns Whit's End Consulting, providing after-hours HealthTech and digital health advisory services from a CIO's perspective. J.D. holds a BA in Mass Communication from George Washington University, an MPH in Health Policy and Management from UCLA, and an MBA in Management Information Systems from the University of Georgia.

J.D. Whitlock manages enterprise technology, leveraging Epic and Workday to drive clinical innovation. He focuses on being a "fast follower," adopting proven AI features rather than chasing "shiny objects." His work shows small systems can deliver high-quality care with fewer resources via ambient AI and autonomous coding. He predicts AI will be essential for physician recruitment, especially pediatric specialists, and envisions unified data architectures and ethical governance enabling safe, scalable innovation and democratized advanced diagnostics.

"Almost every system implementing ambient hears dramatic stories from providers. The soft ROI is real, but you still have to be judicious. You can't buy everything just because it feels good." – J.D. Whitlock

Highlights of the episode

- Smaller health systems benefit more as "fast followers," adopting proven solutions to avoid the "trough of disillusionment."
- Ambient AI is now expected by clinicians; without it, recruiting pediatric specialists from larger centers is harder.
- AI evaluation should be integrated into existing procurement to block "shiny objects" that don't fit enterprise architecture.
- Beyond financial ROI, reducing physician burnout via ambient listening offers powerful soft ROI.
- Pediatric systems often wait longer for AI tools as most research targets adult medicine.

Episode 173

UNITED CHURCH HOMES
Celebrating the Spirit

Michael Hughes

Senior EVP, Chief Transformation and Innovation Officer
United Church Homes

Transforming Wellness-First Senior Communities Through AI and Social Determinants

Mike is the Senior EVP, Chief Transformation and Innovation Officer at United Church Homes (UCH) – non-profit provider of housing and services that support the health and wellness of older adults no matter where they call home. In his role, Mike leads the development of new product and service offerings using Human Centered Design principles that take a 'problem first' approach to investigation. Mike also oversees all innovation pilots at UCH as well as the development of its online platforms. Prior to joining UCH, Mike held executive leadership positions in the home care space and with AARP where he developed supportive programs for family caregivers and worked to integrate non-clinical supportive care into managed care programs.

As a passionate advocate for older Americans, Mike champions common sense, practical approaches to engagement – recognizing the harmful effects of ageism when it comes to self-management and one's potential to age independently at home. He frequently champions the opportunity to measure the impacts of motivation, engagement, health literacy, community and spiritual wellness within patient-centered care models. Mike holds a BA in Economics from McMaster University and an MBA from McGill University with ongoing executive education at the Harvard School of Management, MIT and IDEO.

Mike Hughes has revolutionized senior living by shifting from housing to a health and wellness model. He successfully implemented service coordination for affordable housing, dramatically reducing hospitalizations and skilled nursing transfers. His work brings immense value by addressing social determinants of health, proving non-clinical support prevents expensive medical crises. Mike predicts a future where Agentic AI automates administrative friction and machine learning models the efficacy of social care for payers. He envisions a democratized innovation landscape where developers co-create technology alongside residents.

"Clinical care is really not what's most important for the health and wellness of older people. It really is the non-clinical care and functional support." – Mike Hughes

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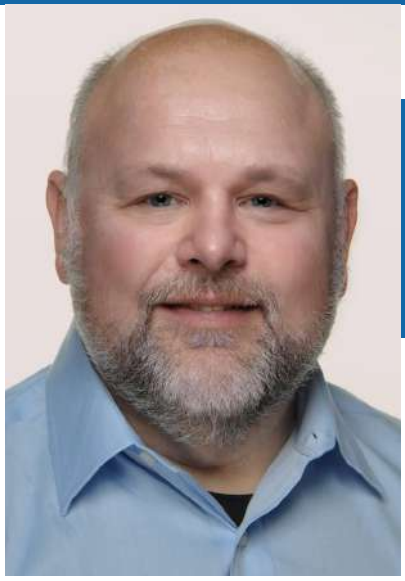
Highlights of the episode

- Clinical care drives only 10% of health outcomes, while SDOH like housing, transport, and functional support account for 70%.
- ML is used to model non-clinical interventions, enabling senior living providers to join managed care risk models.
- Developers shadow staff for two weeks to co-create solutions via human-centered design.
- Care focuses on personal motivations, not just adherence.
- Future AI should automate "life frictions," freeing time for human-to-human interaction.

Episode 174



Sutter Health

Michael Marchant

Director of Digital Applications
Sutter Health

Interoperability and AI Adoption are the Pillars of Healthcare

Michael Marchant is a seasoned healthcare technology executive with 30+ years of leadership experience. His expertise lies in the strategic implementation and integration of enterprise systems and workflows across diverse healthcare environments. Michael has held pivotal roles with technology vendors, government contractors, and healthcare provider organizations, providing him with a well-rounded perspective on industry challenges and opportunities.

Passionate about advancing healthcare interoperability, Michael actively contributes to shaping the future of the industry through his leadership roles in various organizations. He serves as Chair of Epic's Care Everywhere Governing Council, Board Member for eHealth Exchange and Co-Chair of the Carequality Advisory Committee. Additionally, previously served as Co-Chair of the AAMC's Diversity and Inclusion Workgroup, two-time member of the HIMSS Interoperability Committee, member of the SDoH workgroup and Blockchain Task Force as well as several HL7 FHIR Accelerator workgroups. Currently, Michael is the Director of Digital Applications at Sutter Health, where he leads the Sutter Community Connect and Enterprise Data Integration teams, driving innovation and collaboration to enhance patient care and data sharing.

Michael Marchant spearheads enterprise interoperability and community data integration. He has successfully implemented ambient AI and inbox agents, significantly reducing clinician administrative burdens and "pajama time." His work provides immense industry value by advancing "data liquidity" and expanding national networks like TEFCA to include long-term care and social services. Michael envisions a future where AI-native interfaces are abstracted from legacy EMRs, prioritising clinical workflow over billing documentation. He predicts AI will transition from assistive to autonomous in low-risk administrative tasks while democratising personalised medicine.

"The technology is moving incredibly fast, but healthcare organizations move at a very different pace." – Michael Marchant

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Highlights of the episode

- Ambient AI lets physicians focus on patients, reducing after-hours charting.
- FHIR APIs unlock EMR data, enabling developers to build intuitive apps on existing structures.
- TEFCA aims to include the 30% of organizations currently excluded from data exchange, like nursing homes and public health agencies.
- AI in radiology and ophthalmology prioritizes abnormal screenings for high-risk patients.
- High-risk decisions remain human-led; low-risk tasks like claims and routine outreach are becoming fully autonomous.

Episode 175

HSS

Dr. Ashis Barad

Chief Digital Technology Officer
Hospital for Special Surgery (HSS)

AI If Done Right Can Rehumanize Healthcare

Dr. Ashis Barad is a nationally recognized physician-executive and digital health innovator, serving as Chief Digital & Technology Officer at the Hospital for Special Surgery (HSS) in New York, the world's leading musculoskeletal health institution. He leads enterprise-wide technology initiatives and digital operations, collaborating with HSS leaders to enhance care delivery, patient experience, and clinical outcomes. A board-certified pediatric gastroenterologist, Dr. Barad has over 18 years of clinical experience and has driven digital transformation and healthcare modernization.

Previously, he was Chief Information & Digital Officer at Allegheny Health Network, leading EHR optimization, remote patient monitoring, AI integration, and patient-facing technology. He also held digital leadership roles at Baylor Scott & White Health, designing virtual care programs, early telehealth initiatives, remote monitoring, and digital health platforms that improved access during COVID-19. Dr. Barad earned his MD from Texas Tech University Health Sciences Center, completed a pediatrics residency at Dell Medical School, University of Texas at Austin, and a fellowship in pediatric gastroenterology at Northwestern University.

Dr. Ashis Barad is pioneering "Agentic AI" to orchestrate complex musculoskeletal care workflows. He implemented a Lakehouse data architecture and partnered with Palantir to move beyond siloed point solutions. His work provides industry value by democratising world-class clinical expertise and shortening the seventeen-year lag in adopting medical evidence. Dr. Barad envisions AI "rehumanising" healthcare by automating administrative friction, allowing clinicians more patient time. He predicts technology will shift focus from mere efficiency to "effectiveness," ensuring patients receive the right care globally while prioritising movement and longevity today.

"The only two things that we should be talking about in healthcare right now is Agentic AI and change management." - Dr. Ashis Barad

Highlights of the episode

- Healthcare should move from "point solutions" to agentic orchestrators managing full clinical workflows.
- AI must focus on the "two Es": efficiency and effectiveness for better patient outcomes.
- LLMs need context; a centralized Lakehouse is key for intelligent agentic decisions.
- Codifying expertise at HSS allows world-class care pathways to reach rural and global patients.
- Low-code/no-code platforms let frontline staff build secure, compliant workflows without central IT.

Episode 176

ENGLEWOOD HEALTH

Inderpal Kohli

Healthcare Executive Leader (Englewood Health, HSS, and CUMC)

Digital Twins Could Be a Game-Changer for Scalable Healthcare Innovation

Inderpal Kohli is a mission-driven CIO with over 25 years of experience transforming complex healthcare systems through digital innovation, AI enablement, and operational excellence. He has deep expertise in strategic planning and deploying enterprise information systems to support centralized clinical and business operations. Most recently, as VP of IT and CIO at Englewood Health, he led technology strategy across an acute care hospital, 100+ locations, and 700+ physicians on a single EMR. Leading 160+ staff with a $50M budget, initiatives included digital transformation, enterprise cybersecurity, Zoom-based unified communications, Epic expansion, and a cloud-based Enterprise Imaging solution.

Previously, Kohli was Assistant VP at Hospital for Special Surgery, overseeing enterprise systems including Epic and pioneering a digital pathology solution enabling integrated diagnostics. At Columbia University Medical Center, he designed flexible IT infrastructure for clinical research, contributing to one of the nation's largest genetic databases.

Kohli is an active speaker and contributor in healthcare technology, earning the 2024 NJBIZ Leaders in Digital Technology Award. He holds a master's in Technology Management from Columbia University and a bachelor's in Computer Science from India and taught healthcare informatics at Weill Cornell Medical College, mentoring future IT leaders.

Inderpal Kohli has led digital transformations at HSS and Columbia, launching the nation's first digital pathology program with 70% digital diagnosis during COVID. His work cuts clinician "pajama time" by 40% via ambient AI and boosts preventive screening through digital campaigns. He envisions ambient AI replacing dictation and Agentic AI automating back-office tasks, predicting digital twins will revolutionize healthcare, enabling rapid testing and advancing personalized medicine, profoundly reshaping care delivery.

"AI won't replace clinicians, but clinicians who use AI will outperform those who don't." - Inderpal Kohli

Highlights of the episode

- Ambient AI for real-time documentation cut after-hours charting by 40%, reducing clinician burnout.
- Kohli led the first US digital pathology implementation at HSS, enabling better image correlation for research and second opinions.
- Automated SMS campaigns via Epic CRM raised mammogram screening to 21% and lung cancer to 10%.
- Technical debt often comes from EMR design choices that hinder future digital transformation.
- Kohli supports digital twins to replace long pilots, enabling rapid simulations to production-ready solutions.

Episode 177

HOLISTIC HEART CENTERS

Dr. Regina Druz
Founder and CEO
Holistic Heart Centers

AI and the Future of Longevity-Driven Personalized Care

Dr. Regina Druz is not just a cardiologist — she's a trailblazer in the movement toward precision-based, longevity-focused medicine. As CEO and founder of Holistic Heart Centers™, she is redefining heart health through a cutting-edge fusion of integrative cardiology, functional medicine, and digital innovation. With a medical degree from Cornell University, board certification in cardiology, and advanced training in functional medicine, Dr. Druz brings scientific depth and systems-thinking to every patient encounter. Her proprietary program, Fit in Your GENES®, personalizes care through genetic and metabolic profiling, offering clients a transformative roadmap to vitality and healthspan extension.

After earning a dual Executive MBA and Master of Health Policy and Research from Cornell, she went on to lead value-based cardiology transformation at the national level. Today, she applies that strategic vision to build scalable models of care that are personalized, proactive, and precision-driven. Driven by data, powered by purpose, and rooted in compassion — Dr. Druz helps patients and healthcare systems move beyond risk management to true health optimization.

Dr. Regina Druz, a cardiologist and entrepreneur, is redefining heart health through personalised precision medicine and longevity strategies. She has shifted from institutional cardiology to an "N of 1" model addressing root causes via integrative and functional medicine. Using digital tools like mobile ECGs and ultrasound-on-a-chip, she overcomes telemedicine exam limits. She envisions Agentic AI automating pre-authorisations and predictive AI identifying heart failure and Alzheimer's years earlier, making personalised medicine the global standard over population-based metrics.

"We are going to see in the next five years a rapid emergence of Agentic AI in all verticals of healthcare." – Dr. Regina Druz

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Highlights of the episode

- Population-based metrics fail to explain why some older patients have better cardiac reserves; personalised medicine uses systems biology to find individual root causes.
- Ambient AI scribes go beyond documentation, generating patient summaries and next steps that boost engagement.
- A divide is emerging as high-agency individuals who can iterate with AI outperform those who cannot.
- Ultrasound-on-a-chip and mobile ECGs bring hospital-grade diagnostics to phones.
- AI can predict heart failure or breast cancer years before symptoms, enabling prevention.

Episode 178

zakipoint Health

Ramesh Kumar

CEO and Co-Founder
zakipoint Health

Price Transparency, Data, and AI for a Better Healthcare Experience

Ramesh Kumar is the CEO and Co-Founder at zakipoint Health. He helps Healthcare Benefit Administrators deliver value to their self-funded employers through data driven cost containment and high impact member experience that steers the population.

With over two decades of experience in healthcare analytics, Ramesh helps self-funded employers optimize healthcare programs, reduce costs, and enhance care quality. His focus on personalization, patient engagement, and benchmarking provides insights that improve transparency and allow employees to better manage their healthcare expenses. Throughout his career, he has led business development, marketing, and product innovation to simplify healthcare, delivering tools that lead to lower costs and better outcomes.

Ramesh Kumar addresses healthcare's "data conundrum" by unifying fragmented information into a seamless member experience. Inspired by his father's health journey, he built a platform offering real-time price transparency, quality ratings, and predictive "next best action" insights. His work gives plan sponsors a strategic cockpit to manage population risk and costs while reducing TPA friction. He envisions Agentic AI automating complex administrative jobs like parsing 200-page plan documents and predicts mobile tools will democratise high-quality care globally.

"AI can actually be that unifying place where you can go off and get answers, get the work done, and serve the member in fundamentally different ways." – Ramesh Kumar

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Highlights of the episode

- Healthcare is fragmented, with repeated questions and immobile data; unification is key to better member engagement.
- New rules require payers to publish machine-readable contracted rates so members see true out-of-pocket costs.
- AI's near-term impact is automating admin tasks like coverage exceptions and voice-based intent detection.
- Innovation must solve a specific problem for a paying stakeholder through close co-creation.
- Moving beyond fee-for-service and using mobile tech, AI can expand access to global populations.

Episode 179

Hackensack Meridian *Health*

Sameer Sethi

SVP, Chief AI & Insights Officer
Hackensack Meridian Health

Using AI to Ease Clinician Burden and Deliver Real Value in Healthcare

Sameer Sethi is SVP and Chief AI & Insights Officer at Hackensack Meridian Health. He is a seasoned healthcare data and analytics leader with a strong track record of using data and advanced analytics to drive differentiation and transformative impact. His career has focused on data, technology, and innovation for healthcare providers. Beginning in EMR implementations, Mr. Sethi was motivated to unlock the value of digitized medical data to improve patient care, influence clinical workflows, and optimize provider network operations. He has since worked at the intersection of healthcare and technology to improve quality, access, and cost of care.

Previously, Mr. Sethi held data and analytics leadership roles at Mount Sinai Health System, McKinsey, and Bon Secours Mercy Health. These experiences across consulting and health systems give him a broad perspective on challenges in data enablement and technology adoption. At Hackensack Meridian Health, he and his team focus on accelerating AI and ML to deliver high-quality, affordable, accessible, and efficient healthcare. He was recently recognized by Becker's Hospital Review as a leading chief data and analytics officer making an impact.

Sameer Sethi manages a digital portfolio across 18 hospitals, spanning data analytics, AI, RPA, and custom software. He has deployed 200+ automations and specialty GenAI summarization to cut clinician "pajama time." His work creates industry value through a governance pyramid and six board-approved pillars that curb "shiny objects" and ensure ROI. He envisions Agentic AI orchestrating technologies to complete complex admin tasks and predicts digital-ready consumers will help rehumanise care using data.

"The value is in embedding these technologies into the workflows. Giving somebody access to conversational AI is one thing—but finding the sweet spot of how this is customized to a clinician at the time of care is what matters." – Sameer Sethi

Highlights of the episode

- Sameer sees a shift from point solutions to Agentic AI orchestrating RPA, software, and LLMs to complete multi-step tasks like insurance denials.
- Hackensack uses GenAI summaries tailored to 15 specialties so clinicians see context-specific data.
- Predictive ML, not GenAI, flags mortality risk and chronic disease for actionable alerts.
- Six board-approved focus areas filter AI use cases and prevent demand overload.
- AI serves as decision support; clinicians retain final judgment and feedback refines models.

Episode 180

Michael Docktor, MD

Co-founder and CEO
Dock Health

AI, Design, and the Future of Operational Workflows in Unlocking Healthcare Efficiency

Michael Docktor, MD, is the co-founder and CEO of Dock Health, the first AI-powered productivity platform purpose-built to solve healthcare's operational challenges — from referral management to task automation and workflow orchestration. A practicing pediatric gastroenterologist at Boston Children's Hospital, Docktor previously served as the hospital's clinical director of innovation and director of clinical mobile solutions.

With nearly two decades of experience at the intersection of clinical care and digital transformation, he is focused on bringing clarity, accountability, and efficiency to the work behind care.

Dr. Michael Docktor is transforming healthcare administration by bridging clinical care and operational productivity. He spun out a platform from Boston Children's Hospital that acts as a productivity hub alongside the EHR, automating labor-intensive processes like referral management and patient intake still handled by faxes and spreadsheets. His work tackles the $1 trillion wasted on administrative "nonsense," reducing clinician burden and improving accountability. He envisions an agentic future where AI handles most operations, allowing physicians to focus on patients within five years.

"AI has accelerated our roadmap by five to ten years. Within the next three to five years, the bulk of administrative and operational work in healthcare will be automated by AI agents orchestrating workflows." - Dr. Michael Docktor

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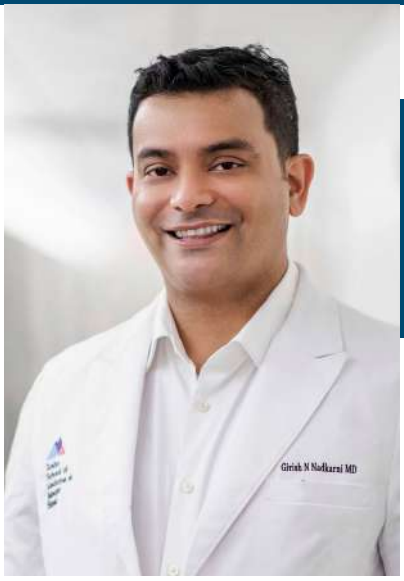
Highlights of the episode

- About 25% of the $5T spent on healthcare is consumed by administrative challenges due to reliance on faxes, paper checklists, and spreadsheets.
- EHRs support billing and documentation but were not designed for task or project management, requiring separate productivity platforms.
- AI has accelerated roadmaps by 5–10 years, shifting from task creation to automated workflows and autonomous agents.
- To reduce hallucinations, AI systems must show their work and allow clinician review before EHR entry.
- Ambient scribes and AI agents can refocus care on patients and restore the joy of medicine.

Episode 181



Mount Sinai

Dr. Girish N. Nadkarni

Chief AI Officer
Mount Sinai Health System

AI in Healthcare is an Arbitrage of Knowledge for Time

Dr. Girish N. Nadkarni is the Fishberg Professor of Medicine, Chair of the Windreich Department of Artificial Intelligence and Human Health, and Chief AI Officer of the Mount Sinai Health System. A physician-scientist and clinical informaticist, he leads transformative AI research in cardiovascular and kidney care, including the first FDA-approved AI-bioprognostic for kidney disease.

Dr. Nadkarni has over 460 publications, 40,000 citations, and an h-index of 93. As PI on ~$40M in grants and contracts, he also co-founded multiple FDA-cleared AI startups. He serves nationally in AI leadership and mentors future faculty leaders, earning numerous awards for research and innovation.

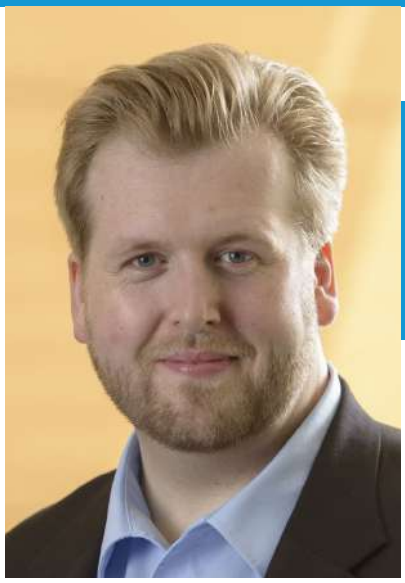
Girish Nadkarni bridges clinical research and operational scale. He defines AI as an "arbitrage of knowledge for time," using compressed human knowledge to give clinicians more time for decision-making and patient engagement. His work delivers major industry value through predictive models that identify patient deterioration in adult wards and neonatal ICUs hours before crises occur. Nadkarni envisions a future of proactive medicine, shifting care from treating illness to preventing it. He predicts AI will become a multimodal collaborator, integrating text, video, and sensory data to mirror human clinical cognition.

"Healthcare is probably one of the industries where trust between a provider and a patient, Trust between the system and the larger system in which it works, be it social, cultural people is paramount. And we should do everything that we can to safeguard that trust." - Girish Nadkarni

Highlights of the episode

- Ambient scribes cut documentation from 10 minutes to 30 seconds, freeing physicians for patients or personal time.
- AI shifts care from reactive "sick care" to proactive intervention, predicting risk—even in premature babies—before symptoms.
- Reducing bias requires a governance pyramid with an Assurance Lab and Risk, Ethics, and Policy committee.
- Success balances financial returns, workforce impact, provider satisfaction, and patient experience.
- Clinical AI will expand beyond text LLMs to video and sensors, observing patient behavior and mental state like clinicians.

Episode 182



Thomas J. Fuchs
Chief AI Officer
Eli Lilly and Company

AI Innovation Across Healthcare and Pharma

Thomas J. Fuchs, Dr.sc., joined Eli Lilly and Company as its first chief AI officer in 2024. In this role, Fuchs provides vision, strategic direction and overall leadership of AI initiatives across Lilly, including drug discovery, clinical trials, manufacturing, commercial activities and internal functions. He also identifies, builds and manages AI and machine learning solutions to help Lilly provide medicines to patients around the world.

Before Lilly, Fuchs was dean and inaugural department chair for AI and Human Health at Mount Sinai, director of the Hasso Plattner Institute for Digital Health at Mount Sinai, and endowed Barbara T. Murphy professor for AI and computational pathology at the Icahn School of Medicine at Mount Sinai. Prior, Fuchs held positions at Memorial Sloan Kettering Cancer Center, NASA's Jet Propulsion Laboratory and the California Institute of Technology. He also founded three companies, including Paige AI. Fuchs holds a doctoral degree in machine learning from ETH Zurich and a master's degree in technical mathematics from Graz Technical University in Austria.

Thomas Fuchs is a pioneer in machine learning who moved from founding startups like Paige to leading AI strategy at a global pharmaceutical company. He oversees more than 1,000 AI initiatives spanning de novo drug discovery, lab-in-the-loop research, and vision-based manufacturing quality control. Thomas emphasises co-development and transparency, building AI tools alongside scientists and clinicians rather than delivering finished solutions in isolation. He envisions agentic orchestration and synthetic data accelerating life-saving drug delivery and sees his work as using code to combat the world's most devastating diseases and democratise global health.

"What never works is building something very cool outside and then throwing it over the fence. You have to co-develop with people from the beginning—that's how you build trust." - Thomas Fuchs

Highlights of the episode

- Lilly uses "lab in the loop" setups, generating synthetic and real-world data to train frontier models beyond real-world limits.
- LLMs suit orchestration and chatbots, but de novo molecule design needs specialized models co-built by biologists and chemists.
- AI must be co-developed with end users; isolated tools fail.
- With 100,000-page submissions, AI speeds data exchange and review.
- Lilly mandates AI certification and change champions to ensure AI is a statistical tool, not magic.

Episode 183

GE HealthCare

Jan Beger

Global Head of AI Advocacy
GE HealthCare

Bridging the AI Gap in Healthcare with AI Literacy and Trust

Jan Beger, Global Head of AI Advocacy at GE HealthCare, is on a mission to transform AI in healthcare from a conceptual promise into a practical, high-impact reality by equipping healthcare professionals with the knowledge and skills to drive change. With over 20 years in healthcare informatics, medical imaging, and AI, Jan bridges cutting-edge technology and real-world application, making AI accessible, understandable, and actionable.

As Executive Director of HelloAI, supported by EIT Health, he enhances AI literacy among professionals, students, researchers, and IT specialists. The program, reaching 3,500+ participants across 70+ countries, offers self-paced learning and live online events, empowering integration of AI into clinical and operational workflows. Jan founded Edison Accelerator, connecting providers, industry leaders, and startups to co-develop AI solutions, and GR4AI. Academy, a non-profit helping children understand AI's societal impact. He advances AI literacy and adoption, enabling professionals to leverage AI effectively—optimizing workflows, enhancing decisions, and improving healthcare delivery for patients.

Jan Beger is dedicated to shifting AI from a conceptual promise into high-impact clinical reality. He champions the human side of technology, focusing on change management and AI literacy to overcome adoption barriers. Jan led internal literacy programs for GE's 51,000 employees and pioneered "Hello AI," educating 5,000+ healthcare professionals globally. His work democratizes specialized diagnostics, like AI-guided handheld ultrasound, and he envisions AI deployed strategically, urging healthcare workers to rethink roles for an AI-enabled era.

"I believe we have not focused enough on one important aspect and this is making sure that those clinicians, those healthcare professionals we expect to use AI technologies, we take them with us on this technology journey." – Jan Beger

Highlights of the episode

- Jan defines AI literacy through three pillars: collaborate responsibly, explain outputs, and critically evaluate them.
- AI-integrated handheld scanners guide probe movement, helping less experienced operators capture high-quality images.
- GE's AI learning platform, developed with partners, offers free or low-cost modules to clinicians in 70+ countries.
- AI tools need ongoing effort to maintain knowledge and updates.
- With 70% of skills changing by 2030, the industry must shift to adaptability, systems thinking, and tech fluency.

Episode 184

Google

Dr. Andreas Michaelides

Shaping Clinical AI with Google
Ex-Noom Chief of Psychology

Transforming Behavioral Health by Merging Psychology with AI

Andreas Michaelides, Ph.D. Global Head of AI Advocacy at is a clinical psychologist and health-tech expert working at the intersection of behavior change and artificial intelligence. As the former Chief of Psychology at Noom, he founded the company's coaching and behavioral science teams — scaling the coaching program from 0 to over 3,000 coaches and leading the development of the first fully digital, CDC-recognized Diabetes Prevention Program.

Today, he's shaping the future of health at Google, building AI-powered systems designed to drive real-world behavior change. With over 20 years of experience in behavior science and more than a decade integrating psychology, technology, and leadership, Andreas is focused on making wellness smarter, scalable, and deeply human.

Dr. Andreas Michaelides pioneers the fusion of behavioral science and digital platforms to drive scalable health outcomes. At Noom, he built coaching teams that used accountability and bite-sized education to achieve milestones like CDC recognition for diabetes prevention. His work turns complex psychology into personalized, adaptive digital interventions. He envisions multimodal AI and wearables as a superpower for predictive, life-saving care and sees AI as essential to addressing the global mental health crisis.

"My passion has always been merging psychology with technology in whatever unique way possible" - Dr. Andreas Michaelides

Highlights of the episode

- With ~10,000 patients per provider globally, human-led therapy cannot scale; well-trained, ethically governed LLMs are needed to democratise mental health care.
- Future AI will assess readiness for change, knowing when silence is the best intervention.
- Future generations will form native therapeutic relationships with AI, despite current skepticism.
- Wearables may replace phones, linking internal health data with the external world.
- Innovation requires unlearning traditional models and applying behavioural science in real-world contexts.

Episode 185

Paul Yi, MD

Associate Member in Radiology,
Section Chief of Intelligent Imaging Informatics (I3)
St. Jude Children's Research Hospital

Advancing Pediatric Care with AI in Radiology and Virtual Trials

Paul Yi, MD is an Associate Member, Department of Radiology and Section Chief of Intelligent Imaging Informatics (I3) at St. Jude Children's Research Hospital. Dr. Yi is a practitioner of diagnostic imaging. The field of radiology and diagnostic imaging has been a proving ground for medical applications of artificial intelligence for a number of years.

As a physician-scientist, Dr. Yi's research interests include the development and application of AI and deep learning towards medical imaging applications, with special interest in evaluating the trustworthiness and fairness of deep learning models.

Dr. Paul Yi is a body radiologist and clinician-scientist bridging the “code to clinic” gap in paediatric oncology. With eight years at the intersection of computer science and medicine, he uses AI to automate radiology from intelligent protocoling to enhancing image reconstruction. His work drives value through interdisciplinary synergy and “safety check marks” for trustworthy generative AI. Dr. Yi envisions multimodal AI integrating imaging, labs, and vitals, and predicts rapid translation of in silico clinical trials that save time, money, and lives.

“AI can touch every aspect of the patient’s journey, and by extension, every aspect of a physician or other clinician’s workflow.”
- Paul Yi, MD

Highlights of the episode

- Generative AI can create virtual patient populations for in silico trials, testing imaging strategies without human subjects, reducing cost and ethical concerns.
- AI automates protocoling, reviewing EMRs to order MRI/CT sequences based on a child’s cancer history.
- Bridging computer science and clinical expertise ensures tools solve real-world needs.
- Experts harmonise data across legacy systems for interoperability.
- Multimodal AI will integrate imaging, labs, and reports, mimicking holistic physician decision-making.

Episode 186

RUSH

Anil Saldanha

Chief Innovation Officer
Rush University System for Health

Empowering Patients and Closing Health Gaps with AI and Connected Care

Anil Saldanha is the Chief Innovation Officer at Rush University System for Health. With a background in business and technology, Anil has the advantage of having learned skills and experiences in non-healthcare fields to now transform healthcare at Rush. He operates at the intersection of public health, community health, and delivery.

Anil was a founding team member of Tempus AI in Chicago and has held leadership roles at companies such as GoSecure Inc., Trustwave Inc., Red Hat Inc., and Sun Microsystems. He is a strategic advisor on innovation and transformation to clinical, research, and technology leadership at Rush.

Anil Saldanha works at the intersection of public health, community health, and delivery, bridging technology and clinical excellence. Leveraging a background in Silicon Valley tech and big data, he leads initiatives addressing Chicago's 16–30 year life expectancy "death gap." His work shifts healthcare from reactive treatment to proactive, subscription-based virtual care and early cancer detection. Saldana envisions a "connected care ecosystem" where empowered patients partner in care, supported by transparent AI and hospital-at-home models.

"AI can be the reset that the healthcare industry is looking for."
– Anil Saldanha

Highlights of the episode

- Rush aims to cut Chicago's life expectancy gap by 50% by 2030, targeting social determinants and chronic conditions like hypertension in underserved areas.
- A $18/month subscription offers 24/7 virtual access and specialty referrals for younger patients.
- In partnership with MD Anderson, Rush offers the Grail multi-cancer early detection test.
- Socrates, an AI kiosk, supports veterans with PTSD using multi-agent AI.
- A $7.5M data warehouse maps chronic care "hot zones" using clinical, census, and wearable data.

Episode 187

Franciscan HEALTH

Charles E. Christian

Vice President of Technology and CTO
Franciscan Health

Technology Must Remain Invisible, Yet Empower Caregivers to Deliver Care Better

Mr. Charles (Chuck) Christian is the Vice President of Technology and CTO for Franciscan Alliance, a 13-hospital system in Indiana and Illinois. Previously, he served as VP of Technology and Engagement at the Indiana Health Information Exchange, the nation's largest and oldest HIE, and as VP/CIO at St. Francis Hospital, GA, and Good Samaritan Hospital, IN, where he worked nearly 24 years. Earlier, he held management and implementation roles at Compucare and Baxter Travenol and began his career as a Registered Radiologic Technologist. He holds a degree in Radiology Technology from Gadsden Community College and studied natural sciences at UAB. Mr. Christian has authored "Make I.T. Known," blogged on Irreverent-CIO, contributed to textbooks, and is frequently published in Modern Healthcare.

A Life Fellow of HIMSS, he is past Chair of the HIMSS Board and Executive Committee and served on the HIMSS Analytics Board. He is a Life Fellow and charter member of CHIME, credentialed as CHCIO and Certified Digital Health Executive. He has held leadership and advisory roles across HIMSS, CHIME, SHIEC, KLAS, CDW-Healthcare, AHA, Symantec, and currently serves on multiple advisory boards including Virtustream, Hyland, Fortinet, and the Indiana Hospital Association Information Management Council.

Charles Christian, a 50-year healthcare veteran, began as an X-ray technician before becoming a self-taught coder and IT leader. He oversees technology for a mission-driven Catholic health system serving underserved populations in Indiana and Illinois. Charles drives industry value by promoting "invisible" technology that aids clinicians without friction and by taking a governance-first approach to AI. He envisions a future where technology informs care while preserving the human touch and patient-provider relationship.

"Technology needs to be invisible. If it gets in the way of people being able to do their job, then it's a problem." - Charles E. Christian

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Highlights of the episode

- Technology fails if it hinders care; EHRs often prioritise billing over clinician needs.
- Franciscan Health takes a risk-averse approach, with strict governance and separate clinical/operational AI use cases.
- A Tech Innovation Lab allows "fail fast" testing of new tools before live deployment.
- Virtual mentoring helps new nurses navigate complex procedures, improving care and retention.
- Interoperable data ensures clinicians see the full patient journey.

Episode 188

Chris Gallagher, MD
Founder and Chief Strategy Officer
Access TeleCare

Virtual-First Care Starts with Making Technology Effortless

Chris Gallagher, MD, is the Founder and Chief Strategy Officer of Access TeleCare. As a cardiologist in rural Texas, Dr. Gallagher saw that timely care was critical for favorable patient outcomes, yet inconsistently delivered across hospitals. Seeking a virtual solution and finding none, he built one. Access TeleCare, the nation's largest high-acuity telemedicine provider, leverages his internal medicine and cardiology expertise to create tech-enabled clinical networks. It operates virtual care programs across all 50 states in 8 specialties, reaching over 216 million Americans (65% of the U.S.) across 15,000+ zip codes, and was recognized as a 2024 Top Remote Workplace.

As CSO, Dr. Gallagher drives innovation, forges strategic partnerships, and guides the company's growth strategy.

He trained at UT Southwestern for Internal Medicine Residency and Cardiology Fellowship, earned his MD from Texas Tech University School of Medicine, and is a fellow of the American College of Cardiology, as well as a member of the American Association of Cardiovascular and Pulmonary Rehabilitation, American Medical Association, and Texas Medical Association.

Dr. Chris Gallagher, a pioneer in high-acuity virtual care, moved from heart rhythm therapy to building Texas' first virtual ICU in 2013. His work addresses physician distribution, augmenting in-person staffing to ensure 24/7 coverage and reduce clinician burnout. By delivering specialty care locally, his models cut costs—avoiding $5,000 transfer expenses per virtual visit—and build trust in technology. Dr. Gallagher envisions a "virtual-first" future where AI expedites time-to-bedside and automates complex clinical load-balancing.

"When you start new things, you're just throwing everything at the wall and you'll see what sticks. That's just kind of par for the course when it comes to innovation and technology." - Dr. Chris Gallagher

Highlights of the episode

- The healthcare crisis is often distribution, not doctor shortages; virtual care adds fractional support to prevent burnout.
- Leading systems use virtual care for baseline non-procedural specialties, layering in-person teams for procedures or high-volume needs.
- Success requires "push-button" simplicity; early models failed with high friction.
- Dr. Gallagher uses AI to route 1M+ annual video encounters, cutting time-to-bedside by 20%.
- Access TeleCare serves 70% urban patients, bridging specialty gaps in city hospitals.

Episode 189

AI-Powered Women

Dr. Felicia Newhouse

Founder
AI-Powered Women

Human Centered Leadership is the Real Unlock for AI in Healthcare

With over 20 years as a product tech executive, three successful startup exits, and a PhD focused on women's leadership and transformational learning, **Felicia Newhouse** curates spaces where technical fluency meets inner evolution.

Drawing on her work as an energy practitioner and mindfulness-based leader, she integrates evidence-based approaches to human transformation with a deep understanding of consciousness and systemic change.

Through the AI-Powered Women Academy and the annual MIT Summit, Felicia unites visionary educators, researchers, and changemakers ahead of their time to ensure women don't just adapt to the age of AI—they lead it and evolve it with clarity, confidence, and consciousness.

Felicia Newhouse is a former product executive and technologist advocating a shift toward human-centred AI leadership. After a near-death experience during childbirth, she pivoted to explore neuroscience, systems thinking, and regenerative leadership. She delivers industry value by exposing a leadership gap—women make up ~67% of healthcare's workforce yet remain underrepresented at the top—and by offering tools like the "Immunity Framework" to navigate chaos. Newhouse envisions a future where humans and AI collaborate as a hybrid species, calling for a slower pace of change so technology reflects empathy and wisdom, not extraction.

"AI has its own brilliance to offer, and we have ours. The future is a hybrid collaboration between humans and intelligent systems."
- Felicia Newhouse

Highlights of the episode

- "Systems feeling" lets leaders sense complex systems emotionally, not just intellectually.
- AI reflects its creators' values; extraction-focused systems lack the human perspective for sustainable innovation.
- Women, who form most of the health workforce, face burnout and exclusion from AI strategy, requiring human-centered leadership.
- True innovation stems from "awe" and psychological safety.
- Felicia sees AI as a "toddler species" to automate draining work so humans focus on their unique genius.

Episode 190

dexcare

Matthew Blosl

Chief Executive Officer
DexCare

Solving Healthcare's Trilemma with Focus, Co-Innovation, and AI

Matthew Blosl is Chief Executive Officer and a board member of DexCare, the leading digital platform for orchestrating patient demand and care access. With more than 20 years of executive leadership experience in technology-driven organizations, Blosl is known for building high-performing teams, scaling commercial operations, and driving strategic growth that delivers measurable customer and enterprise value. Before joining DexCare, Blosl held a senior leadership role at Experity, where he led commercial initiatives that expanded the company's market presence and strengthened its leadership position in urgent care.

Throughout his career, he has fostered cultures of operational excellence and innovation, consistently delivering results in high-growth environments.

Blosl holds an engineering degree from the University of Michigan and completed his business education at Stanford Graduate School of Business. He brings a blend of technical rigor and strategic acumen, grounded in a passion for transforming healthcare access and outcomes. At DexCare, Blosl is guiding the company's next phase of growth by expanding platform innovation, including AI-driven capabilities, and deepening adoption across leading U.S. health systems to improve how patients access the right care at the right time.

Matt Blosl, a veteran of seven private equity–backed ventures, now leads the Providence Health spin-out through its next growth phase. He focuses on care orchestration, matching patients with the right providers to tackle rising volumes, provider shortages, and shrinking margins. Rejecting one-size-fits-all SaaS, he champions co-innovation at scale, tailoring technology to workflows and data maturity. Matt envisions AI-driven prototyping and cross-industry collaboration driving more healthcare evolution in three years than decades before.

"AI will increasingly act as an invisible layer in healthcare—supporting decisions in the background rather than trying to replace people at the front lines." - Matt Blosl

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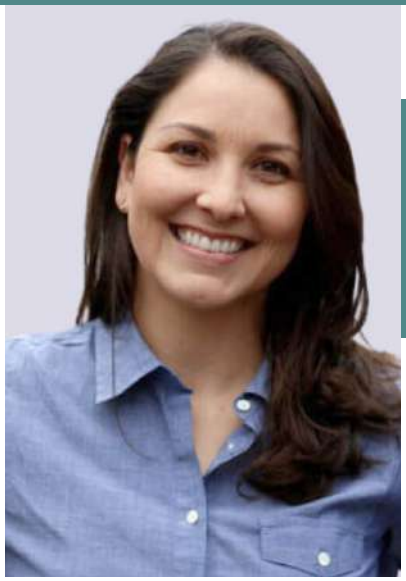
Highlights of the episode

- Healthcare faces a perfect storm: more patients (11,000 entering Medicare/Medicaid daily), fewer doctors, and thinner margins.
- DexCare avoids static products, innovating for each client and treating customization at scale as a strategic advantage.
- AI is core infrastructure, improving operations, code, and roadmaps.
- Leaders must be Focused, Fearless, and Fast, embracing a "fail more" mindset.
- AI accelerates prototyping, but focus on areas like care orchestration ensures real value.

Episode 191



UNITED STATES of CARE

Lisa Hunter

Senior Director of Federal Policy & Advocacy
United States of Care

Rural Health Transformation and the Future of Patient-First Care

In her role as Senior Director of Federal Policy & Advocacy at USofCare, **Lisa** leads a team of policy experts and strategists to advance the organization's health advocacy agenda with Congress and the administration. Her work largely focuses on affordability, access, and translating what people want and need from the health care system into policy solutions for federal uptake. Lisa brings to the USofCare almost twenty years of experience working to expand access to affordable health care through roles in the federal government, nonprofits, electoral campaigns, and the private sector.

Most recently, Lisa led strategic partnerships at Families USA, and oversaw advocacy and government affairs at the Better Medicare Alliance. Prior to joining the advocacy community, Lisa spent several years as a consultant with Avalere Health helping clients operationalize regulations with respect to the Affordable Care Act and Medicare Advantage. Early in her career she served as a political appointee at the U.S. Department of Health and Human Services during the Obama Administration, as a Congressional staffer, and as a Peace Corps volunteer teaching literacy at a primary school in Guyana. Lisa's expertise on health policy implications for everyday people appear in media outlets such as the New York Times, Axios, Politico, Inside Health Policy, The Hill, Fierce Healthcare, and others.

Lisa Hunter works to ensure healthcare policy reflects real-world patient experiences. She focuses on implementing the Rural Health Transformation Program, a landmark $50B federal investment to strengthen rural health infrastructure and address inequities. Her work highlights a growing "trust deficit" around AI as it moves closer to diagnosis and the human body. Lisa envisions a shift from fee-for-service to Patient-First Care focused on coordination and whole-person health, elevating the patient voice to overcome barriers to sustainable, high-quality care.

"We are starting to see that there's a real trust deficit when it comes to how people perceive AI in healthcare." - Lisa Hunter

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Highlights of the episode

- Patients remain wary of AI; the closer it gets to the body or physician role, the greater the distrust.
- A $50B, five-year investment supports payment innovation, workforce needs, and rural data interoperability.
- Patients associate "value" with low quality; "Patient-First Care" better reflects coordinated, whole-person health.
- Rural providers remain fee-for-service due to limited upfront capital.
- Advocacy must turn patient listening into clear, actionable data reflecting real clinical friction.

Episode 192

MERCK

Dr. Gregory Goldmacher

AVP in Clinical Research
Head of Clinical Imaging & Pathology
Merck Research Laboratories

AI Improves Endpoints and Evidence in Clinical Trials

Dr. Gregory Goldmacher is currently Associate Vice President in Clinical Research, and Head of Clinical Imaging & Pathology at Merck Research Laboratories. With his team of physicians and scientists he oversees the use of imaging and clinical pathology assessments in approximately 300 clinical trials across all therapeutic areas. In addition, he leads multi-disciplinary research efforts in artificial intelligence, tumor modeling, novel oncology response criteria, and other innovative approaches in drug development. He also supports business development, strategic venture investments, data standardization, and educational initiatives.

Prior to Merck, he was a senior medical director and Head of Oncology Imaging at ICON. He has held leadership positions in numerous collaborative groups across industry and academia focused on clinical trial methods, artificial intelligence, quantitative imaging, and data standards. Greg received his bachelor's degree from the University of Chicago, his MD and PhD in Neuroscience from the UT Southwestern Medical Center, and his MBA from Temple University's Fox School of Business. He did his clinical training in diagnostic radiology, with fellowships in neuroscience and neuroimaging at the Massachusetts General Hospital and Thomas Jefferson University. He lives in the Boston area.

Dr. Greg Goldmacher leads clinical imaging and pathology, overseeing how scans and tissue assessments drive trial success across therapeutic areas. A physician-scientist and radiologist, he advocates AI to address high costs, long timelines, and limits of human observation in clinical trials. His work advances beyond 2D tumor measures to AI-driven 3D assessments and pixel-pattern recognition that better predict survival. Dr. Goldmacher envisions faster drug development and more efficient operations through AI, applied with scientific and regulatory rigor.

"AI allows us to make better measurements for better decisions. Endpoints are measurements, and making the right measurement can drive the right decision in clinical trials." - Dr. Greg Goldmacher

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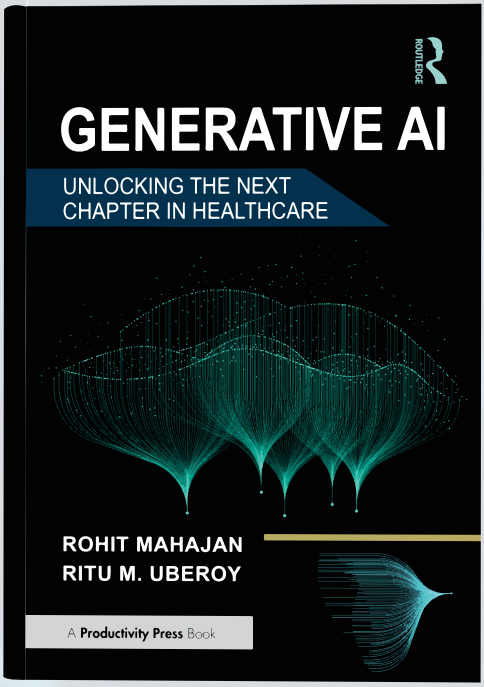
Highlights of the episode

- Clinical trials have heavy HR costs; AI improves efficiency by automating documents and reconciling data across legacy systems.
- AI extracts pixel patterns like necrosis or inflammation, creating non-invasive biomarkers unseen by the eye.
- AI enables full 3D tumor-burden mapping beyond average tumor measures.
- 2024 FDA guidance requires early regulator engagement and risk-based evidence.
- Biopharma AI success requires collaboration between engineers, clinicians, and statisticians to prevent data over-training.

Generative AI: Unlocking the Next Chapter in Healthcare



Written for clinicians, executives, innovators, policymakers, and patients, this definitive volume distills insights from industry pioneers into a practical, accessible roadmap. Generative AI: Unlocking the Next Chapter in Healthcare explores how generative and Agentic AI are transforming clinical workflows, research, and patient engagement through real-world case studies. Readers learn how to implement GenAI responsibly, protect privacy, build trust through ethical governance, and use AI to amplify not replace human empathy in diagnostics, personalized medicine, and care delivery.

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"Generative AI: Unlocking the Next Chapter in Healthcare is more than just a book; it is a call to action. It invites readers to envision a future where AI is an integral part of healthcare."

- Ed Marx

THE BIG UNLOCK
Decoding Healthcare Transformation Through AI

Hosts

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Rohit Mahajan is the author of Quantum Care: A Deep Dive into AI for Health Delivery and Research, a #1 Amazon bestseller on AI's impact on healthcare. He is the Founder and Managing Partner at Saviance Technologies, and CEO at BigRio and Damo. Rohit hosts The Big Unlock Podcast with Ritu M. Uberoy and was honored with the 2025 GHLF Global Impact Award for Digital Health Innovation. He is a Wharton Fellow and a Harvard Business School graduate.

Ritu M. Uberoy
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Ritu M. Uberoy is a technology executive and entrepreneur with 25+ years of experience across the U.S. and India. She is the Founder of Saviance Technologies and Managing Partner at BigRio and Damo Consulting. Ritu hosts The Big Unlock podcast and leads the Generative AI Center of Excellence at BigRio, helping healthcare organizations advance GenAI-driven transformation. A passionate advocate for applied AI education, Ritu has hosted and facilitated GenAI webinars, workshops, and in-person events with healthcare executives and innovators across the US and online.

About the Podcast

The Big Unlock podcast keeps you at the forefront of healthcare's digital transformation, featuring candid conversations with C-suite leaders on AI adoption, digital health innovation, and emerging technologies. Season 6 spotlighted real-world insights on embedding AI into clinical workflows, reducing clinician burden, and rehumanizing care. With over 190 episodes, the podcast continues to unlock fresh perspectives shaping the future of healthcare.

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