



The Role of AI in Medical Staff Services

Hype or Help?

Speaker



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Principal Customer
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I specialize in credentialing, privileging, and compliance with 15+ years in medical staff services. I'm dual certified (CPCS, CPMSM) and as Principal Customer Success Manager at Applied Statistics & Management, Inc. (DBA MD-Staff), I partner with hospitals and health systems nationwide to implement data-driven credentialing solutions that streamline workflows and enhance provider experiences. I'm known for bridging technology and operations to turn complex requirements into practical, sustainable processes, and I regularly speak at national conferences while striving to advance the medical staff professional community.

Objectives



- Explore the Definition and History of AI
- AI's Role within Healthcare and Credentialing
- Deep-Dive into the Risks and Challenges
- Best Practices Adoption



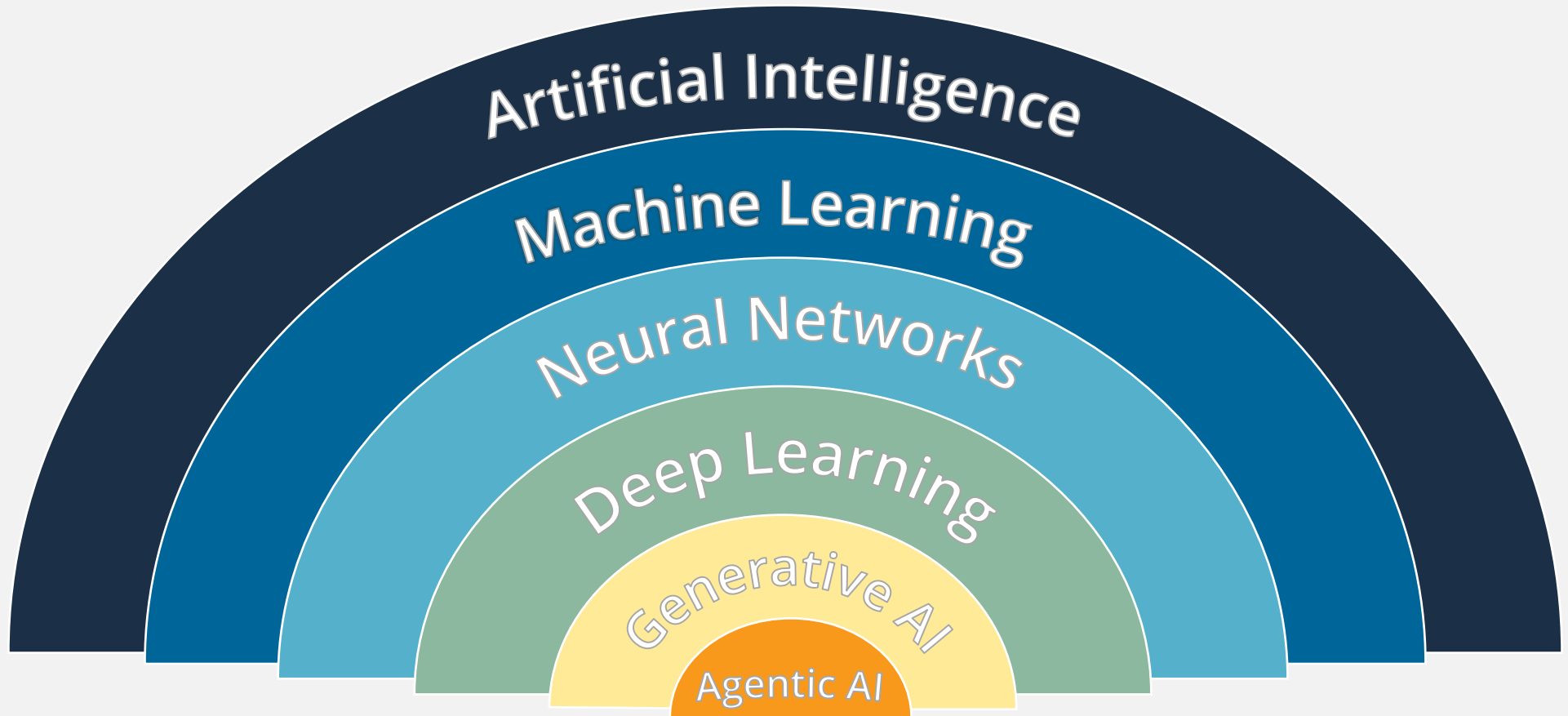
What do you think of when you hear AI?



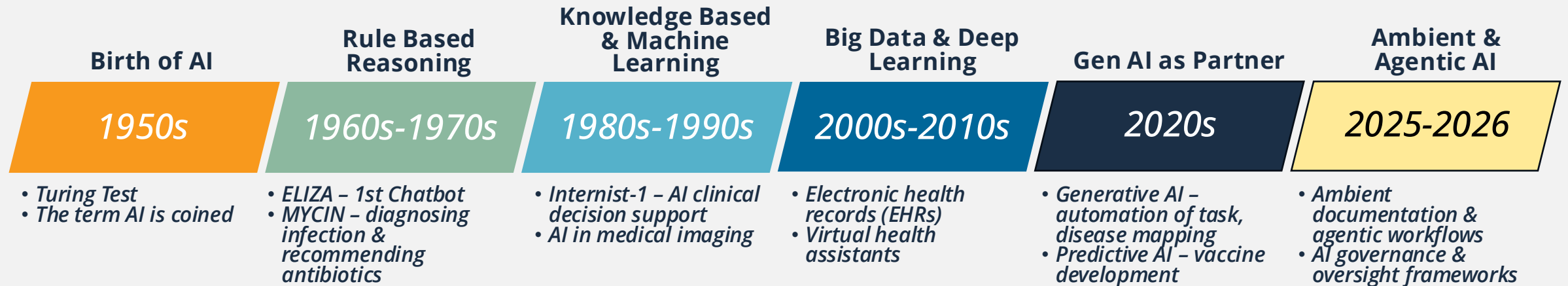
History of AI

What is AI?

AI Hierarchy



History of AI in Healthcare





AI Role in Healthcare

How does AI apply to us?

AI Tech You'll Actually See



Automated Rules

- Route files by specialty/state/payer
- Required-items checklist
- Expiration reminders
- Block submission if missing items



Document Reading (OCR)

- Extract license #/dates
- Detect missing signatures
- Classify docs (DEA/COI/CV)
- Flag mismatches across forms



Continuous Monitoring

- License status changes
- Sanctions/exclusions checks
- Malpractice/DEA expirations
- Directory mismatch alerts

AI Tech You'll Actually See



Predict & Recommend (triage only)

- “Likely to pend/deny” score – prioritizes, never decides
- SLA-risk score for queue prioritization
- Recommend senior review for complex files



Connect the Dots (Relationships)

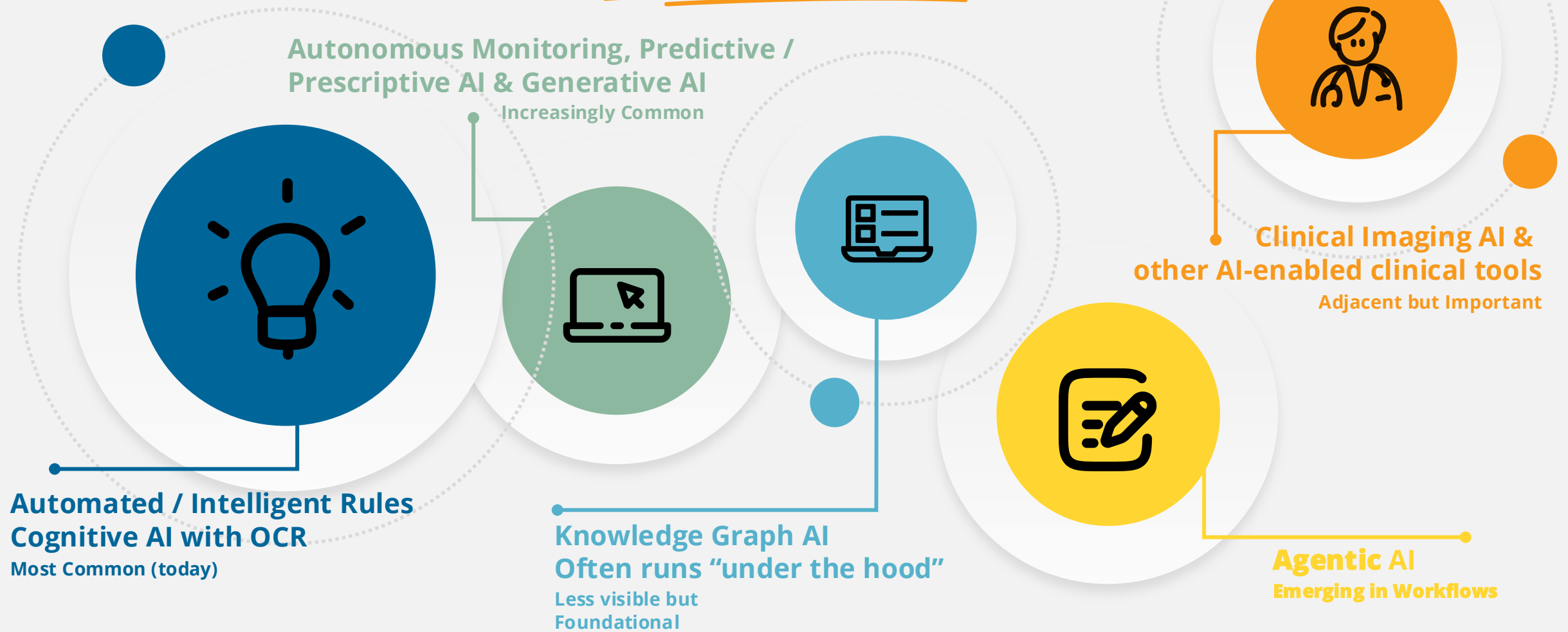
- Duplicate provider detection
- Facility-specific privilege rules
- Trace approvals to verifications/decisions



Draft & Summarize (Generative AI)

- Missing-items outreach emails
- Committee packet summaries
- SOP drafts
- Meeting minutes/action items

Most Common & Emerging AI Trends



Understanding Large Language Models (LLMs)

- AI systems designed for natural language processing — now multimodal, handling text, images, and documents
- Utilize datasets to learn language patterns and generate human-like text
- Reasoning models work through a problem step by step before answering
- Context limits cap how much they can hold at once — long files may get truncated
- Translation, deep web searches with linked sources, summarization, question answering, etc.

Understanding Agentic AI

Agentic AI builds on Generative AI by adding the ability to perceive, reason, use external tools, and learn

Perceive
The system collects
real-time data

Reason and Plan
Breaks it down into a
logical strategy and
decides what to do
next.

Act
The system uses
connections to
execute the steps

Learn
Adjusts its future
choices to improve
performance.

Private vs. Public LLMs

Feature	Private LLM Microsoft 365 Copilot EDP	Public, Consumer LLM ChatGPT (Free Tier)
Prompt/Data Logging	No	Yes (free tier default)
Training on User Data	No	Yes (free tier default)
Admin & Org Controls	Yes	No
SSO & Access Management	Yes	No
Data Storage and Sharing	Enterprise level data protection	Data stored on secure servers owned by Open AI
Enterprise Compliance Support	Partial	None
Encryption in Transit/At Rest	Yes	Yes – but can be subpoenaed
Data Used for Improvements	No	Yes (free tier)



Safe Use, Governance & Risk Management

AI in health care sounds risky, how can we make it safe?

Safe vs Unsafe Use of AI



Safe Uses

- Auto-populating fields
- Rules-based checks
- Routing & reminders
- Data Sync & reporting
- Predictive scoring for triage



Unsafe Uses

- Privilege decisions
- Clinical interpretation
- Autonomous approvals
- Predictive scoring that decides

Cautions and Limitations



Accuracy & Clinical Context

Information must be highly accurate & context-sensitive
Always review and approve content



Confidentiality & Compliance

HIPAA (in the U.S.)
No sensitive patient data unless encryption is in place



Medical Jargon

Guide AI to maintain the correct tone and complexity



Ethical Considerations

AI lacks the nuanced judgment required for sensitive situations



Legal Liability

Legal review is essential to mitigate risks

ADDITIONAL CAUTION



Balance LLM Use with Critical Thinking!

- Early preprint evidence (MIT, not yet peer reviewed) hints at **possible skill atrophy** if critical thinking isn't practiced
- **Tools, not replacements** for expert human critical thinking
- MSS training should emphasize **critical review & source verification**

Best Practices



Use as a Drafting Tool



Keep Humans in the Loop



Ensure Privacy & Security



Monitoring & Feedback

Reliability & Safety Checklist



Provenance & Grounding - no source, no trust



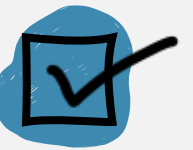
Bias & Fairness - if you wouldn't say it out loud to a committee, don't let AI write it



Drift & Updates - AI output ages faster than policy, review it accordingly



PHI/PII Contracts - same data, same rules, no exceptions



Human Review - if no human reviewed it, it's incomplete

What Regulators & Accreditors Expect in 2026



NIST AI RMF - Govern, Map, Measure, Manage — your governance backbone



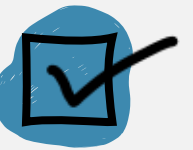
ASTP/ONC HTI-1 - certified decision support must disclose its source attributes



Joint Commission - 2025 responsible-AI guidance; voluntary AI certification in 2026



NCQA & URAC - standards updated 2025; URAC accredits AI governance



State AI laws - Texas and California laws effective Jan 1, 2026 — check your states



Practical Application

I'm sold; how do I get started? Is AI going to take my job?

Ways LLMs Can Help



Drafting Standard Documents

- Policy Documents & Protocols
- Privileges
- Training Materials
- Meeting Minutes / Reports



Internal Communications

- Emails / Notices
- Clinical Announcements

Prompt Blueprint

Role/Perspective

You are a **[role or persona]**

Goal/Objective

Your task is to **[clearly state the main objective]**

Audience

Write for **[target audience]**

Scope & Key Details

Include **[specific points, facts, or requirements]**

Format

Present the information in **[format]**

Tone & Style

Use a **[tone]** and **[style]**

Constraints

Avoid **[things to exclude]**, Keep length to **[word count or time limit]**.

Preserving the Human Element

Empathy & Emotional Intelligence
Presence, Networking, & Connectedness
Opinion, Judgement, & Ethics
Creativity & Imagination
Hope, Vision, & Leadership





AI or Not?

Game Time – Tinder Style!

 **Swipe Right = AI-generated**

 **Swipe Left = Not AI (real/human)**

No overthinking... trust your gut

We'll reveal the answer after each one

AI or Not?

👉 Swipe Right = AI

👉 Swipe Left = Not AI

A reference letter is perfectly written, highly detailed, and completely generic.



Tying Everything Together

& Closing Thoughts

Session Takeaways



AI is not new to the scene! It dates to Turing's 1950 test and the term coined in 1956.

A year ago Generative AI was only the latest iteration. Now Agentic AI is the newest.

AI is a tool, a partner, not a replacement!

Make yourself invaluable!
Use your brain to do the real work.

Reference Sources

IBM (What is artificial intelligence (AI?): [Article](#)

Calls9 (The History of AI: A Timeline from 1940 to 2023 + Infographic): [Article](#)

Time.com (ChatGPT May Be Eroding Critical Thinking Skills, According to a New MIT Study): [Article](#)

MIT Sloan School (These human capabilities complement AI's shortcomings): [Article](#)

MIT Sloan School (When humans and AI work best together — and when each is better alone): [Article](#)

ASTP/ONC HTI-1 Final Rule Q&A (Algorithm Transparency / DSI): [PDF overview](#) | [AHIMA DSI attributes](#)

FDA Draft Guidance (AI in regulatory decision-making): [Guidance page](#) | [Federal Register notice](#)

FDA/CDS context & wellness products (Jan 2026): [AHA summary](#) | [STAT coverage](#)

NIST AI RMF & Generative AI Profile: [AI RMF portal](#)

NIST Cyber AI Profile (prelim draft, Dec 2025): [Legal analysis](#)

HIPAA + AI NPRM commentary: [Bradley \(legal\)](#) | [NatLawReview](#) | [McGuireWoods](#)

Joint Commission: Responsible Use of AI in Healthcare guidance & certification (2025–2026)

NCQA credentialing standards update (2025) | URAC Health Care AI Accreditation

State AI laws effective Jan 1, 2026 (TX TRAIGA, CA SB 53) – disclosure rules vary by state

LLM limitations & safety: [Nature adversarial hallucinations](#) | [ACL medical hallucination survey](#) | [Frontiers review](#)

Prompt engineering in healthcare: [HealthTech](#) | [MDPI](#) | [BastionGPT guide](#)

Microsoft 365 Copilot EDP & architecture: [Microsoft Learn](#) | [Petri EDP intro](#) | [Privacy explainer](#)

NAMSS resources: [ICS 2025 \(PDF\)](#) | Conference schedule | [QGenda NAMSS takeaways](#)

Adoption reality check: [KLAS summary \(Becker's\)](#)

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