### HealthCatalyst

### Al in Healthcare: Hype, Hope, and Missed Opportunities

Jason Jones, Jessica Curran

## Agenda

- Sample explorations with generative AI
- Purposeful AI for everyday decisions
- Improving human-computer interactions
- Next step? Purposeful AI for large levers and high stakes

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## Let's Ask ChatGPT...

DischargeMont	h LoS
6/30/2020	3.041666
7/31/2020	2.833333
8/31/2020	2.875
9/30/2020	2.833333
•••	
4/30/2023	2.833333
5/31/2023	2.791666
6/30/2023	3

Here is my length of stay data by month. What is my baseline performance? Has anything changed?

### The Answer...

I apologize for the inconvenience. Since I'm an AI language model, I can't directly execute code with graphics or visualizations. However, I can show you the numerical results from the code that calculates the baseline performance. Here are the results:

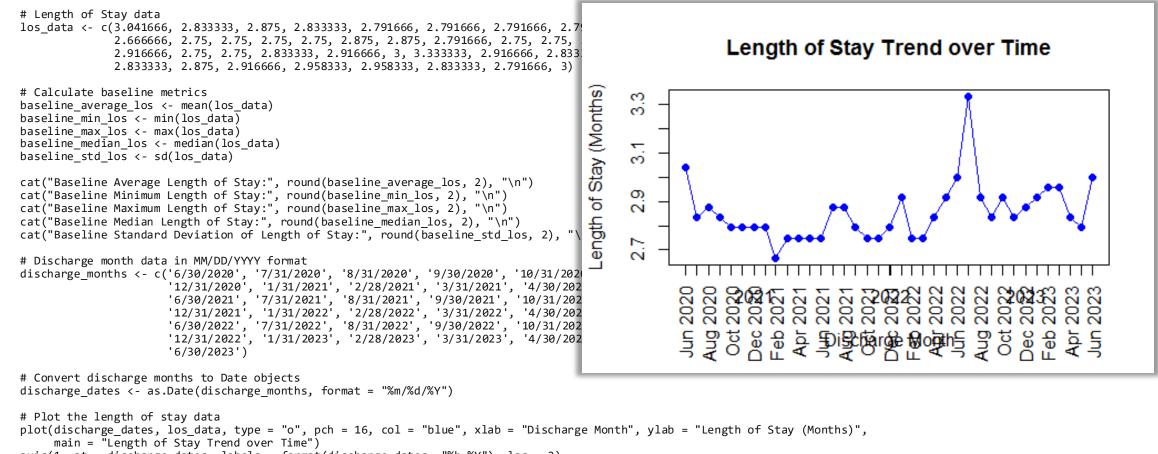
Baseline Average Length of Stay: 2.85 Baseline Minimum Length of Stay: 2.67 Baseline Maximum Length of Stay: 3.33 Baseline Median Length of Stay: 2.83 Baseline Standard Deviation of Length of Stay: 0.13

These results give us an overview of the baseline performance for the length of stay data. The average length of stay is approximately 2.85 months, with the minimum being 2.67 months and the maximum being 3.33 months. The median length of stay is 2.83 months, and the standard deviation is 0.13 months.

If you need to visualize the length of stay trend over time, you can use the code provided in the previous response and run it using a Python environment or IDE that supports plotting libraries like Matplotlib. This will generate a line graph displaying the trend in the length of stay over the given time period.

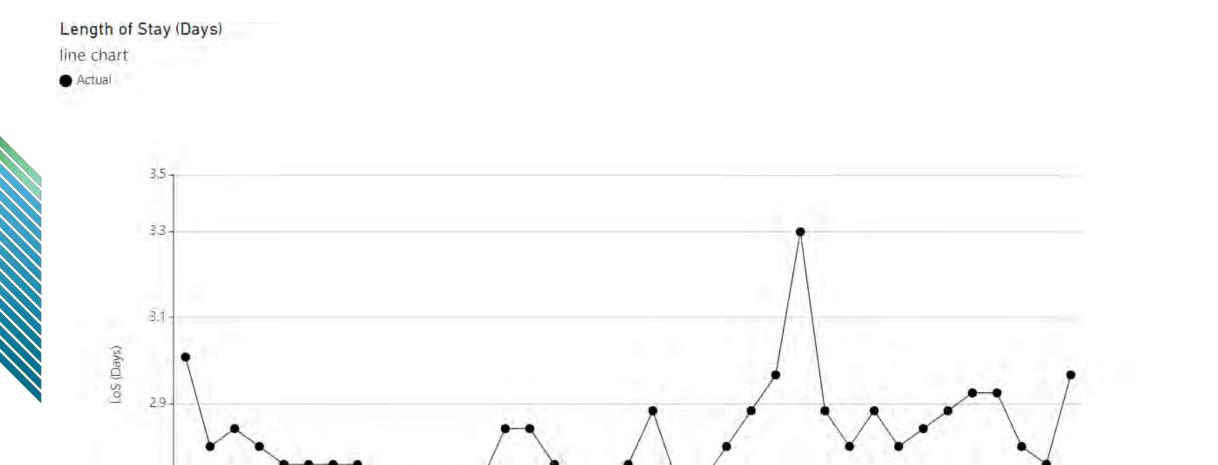


### Can you give me R code...



axis(1, at = discharge\_dates, labels = format(discharge\_dates, "%b %Y"), las = 2)

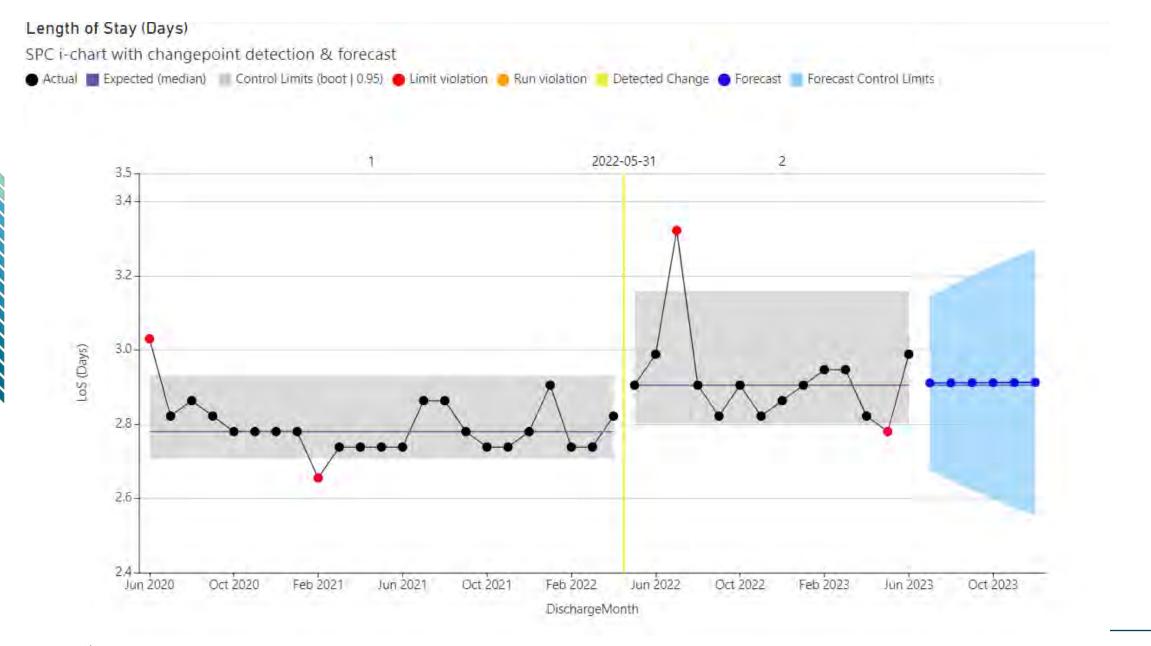
grid()



2.5 L Jun 2020 Sep 2020 Dec 2020 Mar 2021 Jun 2021 Sep 2021 Dec 2021 Mar 2022 Jun 2022 Sep 2022 Dec 2022 Mar 2023 Jun 2023 DischargeMonth

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2.7



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### Length of Stay (Days)

Stastical Process Control i-chart with change point detection & forecast

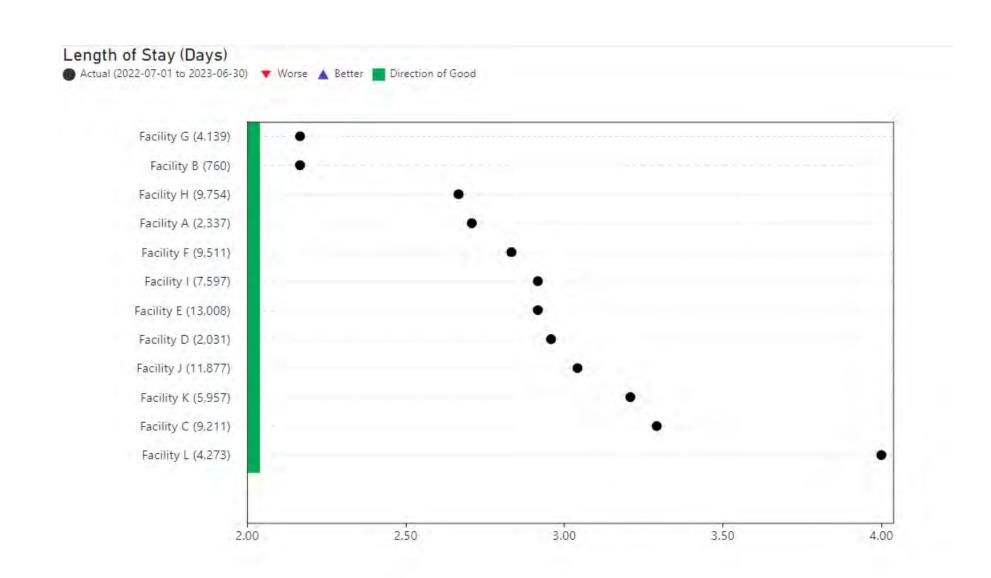
Persistent ₩ Worse 3,4 May 2022 3.2 Forecast 3.0 LoS (days) 2.8 2.9 Median 2.8 Median 2,6 M Better 24 jul 2022 Dec 2022 Jun 2020 Nov 2020 Apr 2021 Sep 2021 Feb 2022 May 2023 -- Actual - Median ---- Forecasted - Unusual point (Quiside normal variation) Persistent shift Forecasted variation Expected variation (95% confidence interval) Direction of improvement

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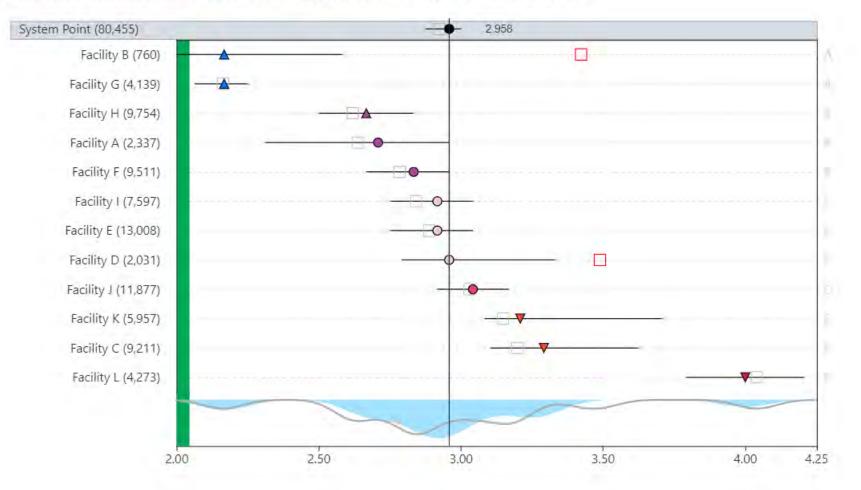
### **Poll Question #3**

# How would you compare the current and possible new version of the charts?



#### Length of Stay (Days)

🔴 Actual (2022-07-01 to 2023-06-30) 🌹 Worse 🛕 Better 📘 Direction of Good 🔲 Forecast (1-12 months) 🗛 Cluster



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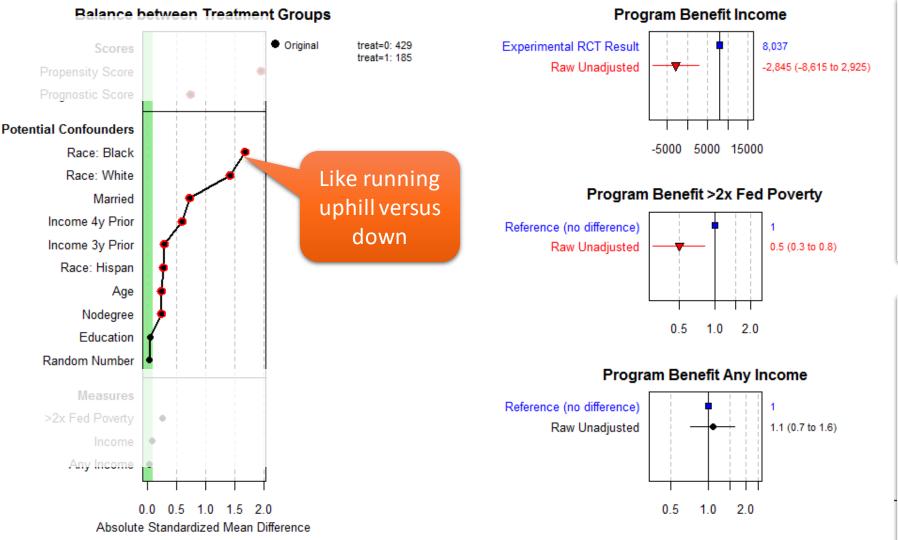
# Next step? Causal Analyisis



### Large Levers, High Stakes

- Program evaluation: Should we continue/expand/alter/stop X (with a vendor)?
- Drug/device selection: Is X benefiting patients/people relative to the cost?
- Process change: How well is our innovative approach working?

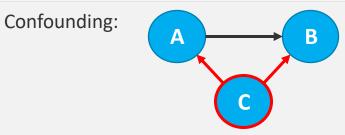
### Should we expand our work training program? Typical "comparison group" is not a good comparison (apples and oranges)



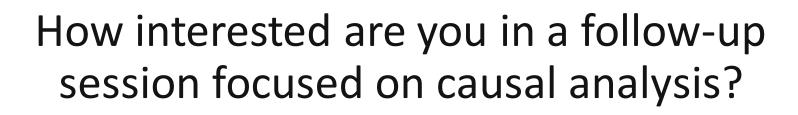
Love Plot shows important

"imbalances" (potential confounding):

- Both treatment group (propensity score) and outcome (prognostic score) can be predicted by other characteristics
- Important differences in race, marital status, prior income, age, an having no degree
- Small differences in education level
- Random number has no difference...as expected



- Want to draw a conclusion about how "A" (e.g., training) impacts "B" (e.g., income)
- But a Confounder (e.g., prior income) is related to both A and B





# **Questions?**

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Would you like to win a complimentary pass to HAS 24?



