RAINTECH
Cloud. Security. Support. **Results.**

Artificial Intelligence: Beyond EMR

Leveraging AI for Compliant, Operational Excellence

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RAINTECH

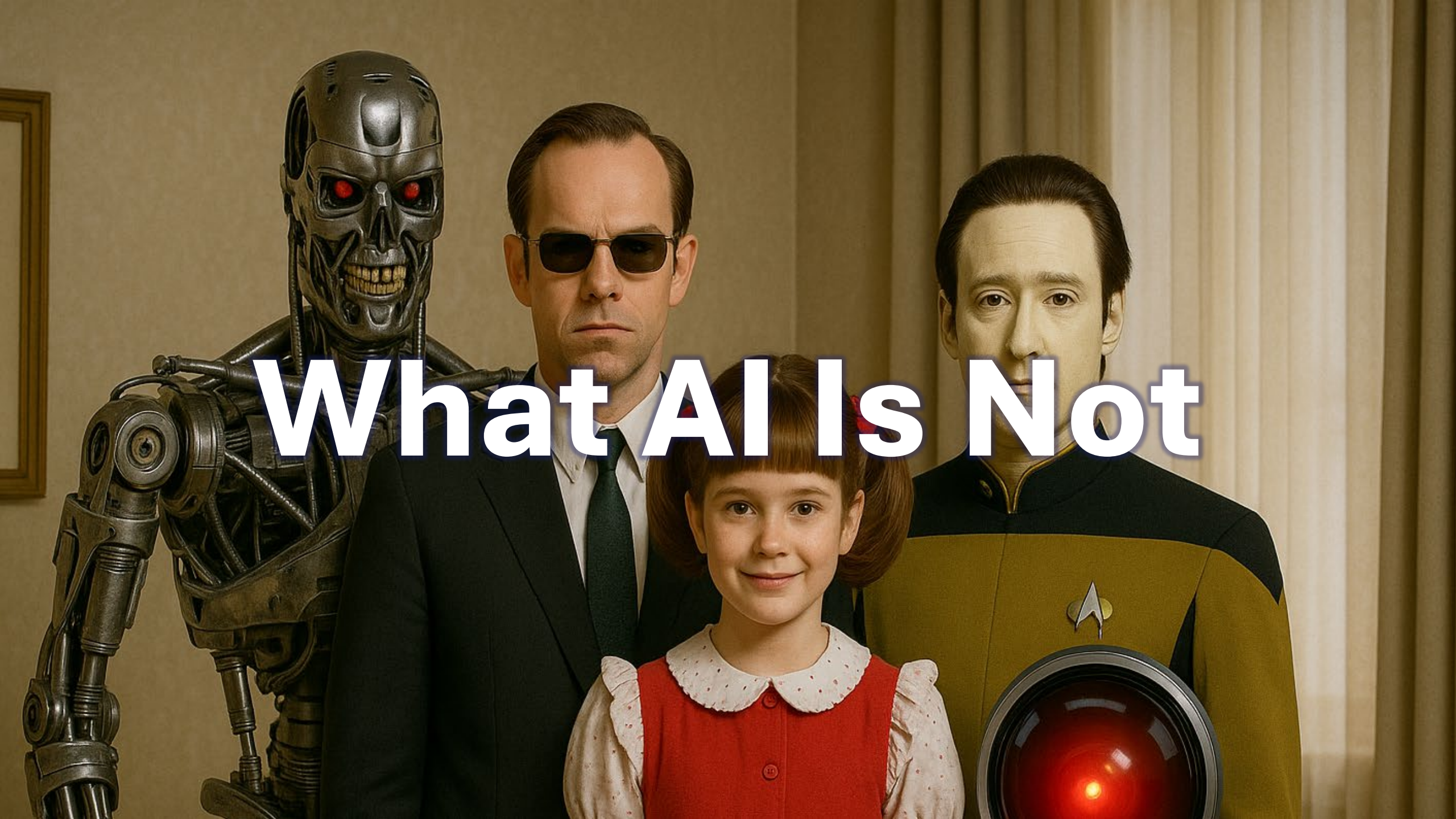
Cloud. Security. Support. **Results.**

Our purpose is to cultivate experiences where individuals thrive, empowered to connect, grow, and lead together.

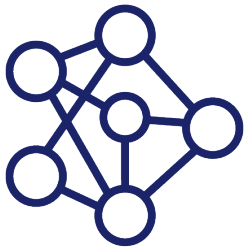
People ~~First~~, PERIOD.™

What do you think of when you hear

AI


What AI Is Not

What AI Is

</> + 

Traditional Code

- Humans write explicit instructions
- E.g. A thermostat *"If temperature < 68°F, turn heat ON. If > 72°F, turn heat OFF."*
- Always predictable
- Same input = same output

LLM (Large Language Model)

- Learns patterns from massive text data, then generates new content by predicting what comes next
- E.g. You type "Write a bedtime story about a dragon who loves gardening" → it creates a unique story each time
- Creative and flexible
- Same input can produce different outputs
- Different inputs can produce same outputs

AI Agent Types

Conversational

Knowledge and Insights

Document Processing

Workflow Orchestration

Decision Support

Compliance and Guardrail

Creative/ Generative

Monitoring and Alerting

Task Execution

Compliance Requirements That Apply

HIPAA

Security Rule
(45 CFR §164.308(a)(7))

Safeguarding PHI

HRSA

Program Requirements

Operational and compliance integrity

42 CFR

Part 2

Substance use data confidentiality

BAAs

(Business Associate Agreements)

Vendor accountability accessing PHI

Every AI project starts with risk and compliance. This isn't optional.

The goal is to unlock efficiency while reducing risk and improving security and compliance.

Two Technical Guardrails

Guardrail 1

Data Loss Prevention (DLP)/ De-Identification

- Strip PHI before it leaves (names, DOB, MRN, etc.)
- AI processes the safe data
- Re-identify upon return inside the secure environment

Two Technical Guardrails

Guardrail 2

Offline / Private LLMs

- Isolated model runs inside your facility or with a BAA'd vendor
- PHI never leaves a controlled environment
- PHI is encrypted in transit and at rest

AI Development Process

1. Analysis
2. Baseline Time/ Cost Calculation
3. Design/Enhance
4. Estimate Savings
5. Deployment
6. Measure Impact

Example Health Center

AI Use Cases

Example Health Center AI Use Case 1

Grant Seeking & Writing

AI monitors and alerts for newly posted grants based on health center's criteria

→

AI drafts grant narratives and compiles compliance sections based on past submissions and HRSA guidelines

→

Natural Language Generation tools reframe existing data into required formats (progress reports, budget narratives)

Impact: Faster submissions, fewer missed deadlines, more time for program execution.

Example Health Center AI Use Case 2

HR Onboarding & Training Automation

AI chatbot/avatar delivers interactive policy training, quizzes, and scenario-based learning

AI auto-tracks Security Awareness Training and completions and flags compliance gaps

Impact: Consistent training, reduced HR/admin burden, stronger audit evidence.

Example Health Center AI Use Case 3

Policy & Procedure Management

AI aggregates existing regulations and monitors for new changes

→

Compares existing policies to new regulations, highlights gaps, and drafts updated language

→

Provides redlined suggestions for compliance officer review

Impact: Cuts weeks of policy review and revision work, keeps FQHC always audit-ready.

Example Health Center AI Use Case 4

Call Center / Patient Scheduling Support

Virtual assistant handles inbound scheduling inquiries, prescription refill requests and outbound appointment reminders

Sentiment analysis detects frustrated callers and escalates to live staff

Impact: Fewer staff hours required for repetitive scheduling, higher patient satisfaction, reduced no-shows.

Example Health Center AI Use Case 5

Finance & Procurement Optimization

AI agent automates invoice data entry and expense categorization

Monitors invoices and delivery metrics for contract compliance

Impact: Reduced accounting staff hours, improved cash flow, fewer audit findings.

Case Study

Service Desk

Case Study: Service Desk

The Challenge

➡ Manual triage was a major service bottleneck

- Dispatcher role was hard to staff and retain
- Tickets sat in limbo, disrupting SLAs and technician focus
- Triage took 10+ minutes on average just to begin; and another 4 minutes to complete
- Duplicate tickets from multiple users wasted more time for technicians tracking down and consolidating them
- Created stress, burnout, and degraded client experience
- Dispatch inefficiencies drained productivity and morale

Case Study: Service Desk

The Solution

➡ RainTech deployed an AI-powered Triage Bot

- Secure AI now triages 60+ tickets/day in less than a minute each
- Automatically completes contact details, severity, priority, and links related tickets
- Zero technician involvement required = no triage delays
- Runs at $0.75/hour (~$150/month) — highly cost-effective
- Frees up 87+ hours/month of technician time

~28x ROI 🤯

Case Study: Service Desk

The Outcome

Boosted performance, satisfaction, and work-life balance

- Achieved **100% SLA triage compliance** — every ticket, every time
- **CSAT rose to 100%** during transition
- **Reduced stress**, increased technician satisfaction, and lowered turnover
- Reinforced RainTech's **"People ~~First~~, *PERIOD*."** mission in practice

Time savings enabled a
32-hour workweek
with no decrease in compensation,
productivity or customer satisfaction.

Key Challenges in AI Adoption

Budget Limitations

Most AI ‘platforms’ price for hospitals, not non-profit health centers

Staff Engagement

Job security concerns

Myth-Understanding

Everything is scary in the dark – dispel fear with light

How AI Implementation Works... and When Fails

What Success Looks Like

- Adoption is intentional and inclusive
- People and culture are the focus
- Fears are addressed head-on
- Strategy is holistic, not piecemeal
- Plan for success – reskill, upskill, reassign
- Right-sized solutions
- Support is ongoing

➡ AI is more production-ready than people assume. Start small and scale.

What To Avoid

- Top-down rollout with no buy-in
- Mismatched solutions/providers
- Chasing hype over need
- No clear goals or success metrics
- Ignoring the human element
- Underestimating support needs
- One-size-fits-all platforms
- Treating AI like a product, not a process

Interactive Exercise

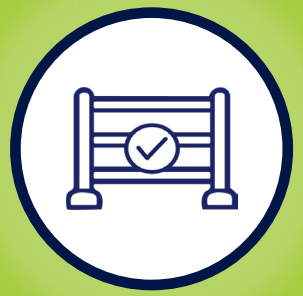
Considerations for AI Agent Implementation

- Tasks that are repetitive, manual, or prone to human error
- Areas where staff time is used inefficiently or unnecessarily
- Information that’s slow to access, aggregate, or act on
- Points in workflows where patients or staff experience delays
- Opportunities to improve internal and external communication
- Frequently asked questions that could be handled automatically
- Consistent workflows that are safe and easy to automate

Key Takeaways

AI can reduce burden and scale impact in FQHCs

Compliance is not a blocker, it's the enabler



Guardrails (DLP, offline LLMs, BAAs) make AI safe

Start with high-impact, low-cost use cases

Thank You!

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