

Future Health Summit

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AI in healthcare: Navigate the path from promise to practice



Foreword

The Future Health Summit by World Health Expo (WHX) provided critical insights into the role of artificial intelligence (AI) in healthcare.

The findings are both promising and challenging, highlighting the transformative potential of AI while underscoring the need for robust structural frameworks to ensure its safe and equitable implementation.

The evidence from deployed systems, such as in radiology, ambient clinical documentation, population health, and drug discovery, confirms that AI delivers measurable productivity gains, diagnostic improvements, and new clinical possibilities.

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We are just at the start of what AI is going to be. There are elements we have not even considered yet in terms of its applicability to saving people's lives, improving affordability, improving outcomes.”

Tarek Abdelhameed

GM – Solutions Architecture & Lifecycle Management (LATAM, APAC & EMEA), GE Healthcare

The question is no longer whether AI belongs in medicine. It is whether healthcare systems can build the structural conditions for AI to operate safely, equitably, and at scale.

This report features findings and policy recommendations from four executive roundtables convened at the Future Health Summit, drawing on the perspectives of C-suite healthcare leaders, clinicians, technologists, and regulators across the Middle East, Europe, and Africa.

Stakeholders at the Future Health Summit

- Chief AI Officers and Chief Technology Officers
- Managing Directors – Data and Artificial Intelligence
- Directors – Digital Health and Life Sciences
- Healthcare & Lifesciences Partners
- Business Development Managers
- Health Tech Innovators
- Health Business Experts



Key findings



Deployment is real, but uneven

Radiology is the proven frontier, with AI-enabled tool usage growing from roughly 30% to 70% of clinical tasks within a few years at leading institutions. Voice recognition and ambient health tools are the next wave. However, deployment remains concentrated in well-resourced settings.



Jobs in healthcare are secure

The observed effect is productivity augmentation, not replacement. However, participants cautioned that role requirements are changing, and that institutions that do not invest in workforce literacy risk a growing competency gap.



The payment system is the primary obstacle to scale

Value-based care models that align incentives with outcomes are the natural home for AI adoption. Yet activity-based reimbursement, which dominates many health systems, creates perverse disincentives. Restructuring payment architecture is as important as deploying the technology.



Insurers must be brought into the equation

Across all four roundtables, insurance companies were identified as an indispensable and currently absent partner. Without insurer participation in risk-sharing models, the financing of AI adoption will remain fragmented and underpowered.



Trust is the master variable

Every discussion returned, at some point, to trust, whether it is patient trust in data-sharing, clinician trust in model outputs, institutional trust in governance frameworks, and public trust in the equitable distribution of AI's benefits. Trust is not a soft concern but an enabling condition for everything else.



Data security and interoperability are existential constraints

Healthcare data silos, legacy infrastructure, and cybersecurity vulnerabilities threaten to undermine AI investments before they can deliver value. Governance frameworks for data sharing must be built at an international level, not just national.



The Gulf region has a structural advantage

Government-backed AI investment strategies in the UAE and wider GCC create enabling conditions. The region has political will, capital, and appetite for innovation, conditions that are absent in many other markets. Participants called for this advantage to be translated into evidence-based, sustainable healthcare AI programmes.

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Nobody has lost their job because they introduced AI in the clinical setting. We see more productivity. We see better outcomes, better decision-making.”

Lina Shadid

Partner, ME Health Industries Lead,
PwC Middle East





AI augmentation in the workforce

Role requirements are changing. The analogy to digital transformation is instructive: the adoption of electronic health records and hospital management systems did not eliminate clinical roles, but it fundamentally changed what those roles entailed and created new demands for digital literacy that not all workers could readily meet.

Imperatives for workforce preparation

The roundtable identified **three** strategic responses that institutions must implement:



Workflow integration

AI tools must be embedded directly within existing clinical processes, not presented as parallel systems. Clinicians who must exit their primary workflow to consult an AI tool will not adopt it consistently.



Data literacy investment

Clinicians do not need to become data scientists. They do need sufficient conceptual understanding of how AI models are built, trained, and evaluated to interrogate outputs intelligently and recognise the conditions under which a model's confidence should be questioned.



Patient-led pressure management

Patients are arriving at consultations with AI-generated research, symptom analyses, and treatment hypotheses. Clinicians who have not engaged with the same tools risk being perceived as less informed than their patients. This is a reputational and patient-safety challenge that institutions must address proactively.

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The technology itself is not stopping the adoption. It is a question of structure, the payments and incentives.”

Tarek Abdelhameed

GM – Solutions Architecture & Lifecycle Management (LATAM, APAC & EMEA), GE Healthcare



Five trust layers for safe clinical AI operations





Strategic outlook

The following recommendations are addressed to healthcare institution leaders, government policymakers, regulators, and insurers, and reflect the collective judgement of the summit's participants.



For healthcare institution leaders

AI readiness audit

Establish a clear baseline on which AI tools are already in use across your institution. Find out what governance structures exist and where the highest-value opportunities exist. Many institutions lack this inventory. Build it.

Governance before strategy

- Define approval processes for new AI tools and establish monitoring and evaluation requirements.
- Designate accountability for AI-related clinical decisions and create mechanisms for workforce input.

700+

**FDA-cleared AI algorithms
for radiology as of 2023**
(American College of Radiology)

Workforce literacy

Clinical staff need to be literate in data science; administrative staff need it to manage procurement, governance, and risk, while board members must be educated enough provide meaningful oversight.

Interoperability

Data silos are a strategic liability. Invest in data standards, API architecture, and cross-institutional data sharing agreements.



For government policymakers

National AI regulatory frameworks for healthcare

Frameworks must be risk-proportionate, internationally harmonised, and subject to regular review as technology evolves.

Accelerate AI adoption in public health systems

Pension fund capital, sovereign wealth investment, and outcome-contingent procurement models all represent mechanisms for funding AI infrastructure that traditional capital budgets cannot support.

Equity requirements in all AI health programmes

Include provisions for equitable deployment across income levels, geographic areas, and population groups in policy frameworks.

Engage insurers as strategic partners

- Adopt a co-investment model for preventive AI.
 - Design a sustainable regulatory and incentive framework.
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For insurers

Create risk-sharing models

Develop outcome-contingent payment models to enjoy a structural advantage in emerging markets.

Enable access to open data

Make longitudinal health data accessible with appropriate governance for AI training and population health analytics to accelerate the development of models that reduce the claims the insurer ultimately pays.



For regulators

AI certification standards

Set clear, actionable guidance on what evidence is required to deploy an AI tool in a clinical setting, and what ongoing monitoring is required after deployment.

Global harmonisation of AI medical device standards

Standardise national frameworks to stimulate the market, adopt fast innovation, and remove compliance burdens that disproportionately affect smaller developers.

Mandate transparency and explainability requirements

- Remove black-box models from high-stakes clinical environments.
- Ensure AI tools used in clinical decision-making are explainable to the clinician who relies on them.

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The regulatory framework's maturity is important for us to be able to trust that these systems are the right systems for us.

Lina Shadid

Partner, ME Health Industries Lead,
PwC Middle East



Conclusion

The Future Health Summit's participants closed their discussions with genuine optimism. The technology works. The evidence is accumulating. The will, among leaders across the health ecosystem, is present. What is missing is the structural architecture that will allow AI's clinical and economic potential to be realised at population scale.

If that analogy holds, then the task before health system leaders is not to evaluate AI's potential. It is to build the grid, namely the payment systems, governance frameworks, data infrastructure, workforce capabilities, and regulatory standards that will determine who benefits from AI's power, and who does not.

"There is nowhere better to do this than this region, because the countries here are already invested in AI. Now it is the other arm, how do we build it into healthcare with an evidence base that will sustain?" said Lina Shadid, Health Industries Leader, PwC.

For the executives who participated in the Future Health Summit, the work begins not next year, or next quarter, but next soon, as one of the participants said. It is when the CEO calls to ask what the institution is doing about AI.

The answer must be ready. The governance must be set and the strategy must be grounded in evidence. And the workforce must be brought along, not left behind. The technology will not wait, concluded the healthcare professionals.

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AI will be as transformative and as universal as electricity. Not a specialised tool for specialised settings, but the invisible substrate of every future process.”

Christophe Jauquet

Moderator of Future Health Summit
and Founder of #healthenthusiasm



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Future Health Summit

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> Innovation meets impact

The Future Health Summit is an exclusive, invitation-only leadership forum uniting senior healthcare executives, policymakers, innovators, and investors to shape the future of AI in global health systems.

Gain privileged access to closed-door roundtables addressing critical challenges, policy frameworks, and scalable AI adoption – insights reserved for industry leaders.

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