



## **A Practical, Outcome-driven View of AI Adoption for Federally Qualified Health Centers – by Lisa Tejada, MHI, BSN, RN**

For many health centers unsure where to start, AI adoption can feel overwhelming. This guide focuses on concrete, measurable outcomes in access, equity, and workforce sustainability, aligned with how Federally Qualified Health Centers (FQHC) leadership and funders (like HRSA and NACHC) are framing priorities, rather than chasing technology types.

### **Common Challenges for Health Centers**

- Persistent, non-stop operational pressures post-COVID: staffing constraints, workflow inefficiencies, access gaps, and shifting patient needs. As new technologies emerge, health centers can feel tempted to conquer everything at once, which is unsustainable.
- Focus on core pain points that affect care delivery and outcomes: Operational efficiency, patient access, provider productivity, staff burnout, revenue optimization, and language access. These aren't new issues, but the scale and urgency have intensified.
- Complexity that doesn't need to stay complex: Longstanding, entrenched processes slow progress. The question isn't "more tools" but "better processes." Start small, prove value, then scale.
- Skepticism and governance challenges around AI: Early fears about automation replacing humans or creating new risks persist. Guardrails, governance, and safety measures are essential to responsible adoption.
- Language and cultural accessibility: A multilingual patient population adds layers to access and equity, areas where AI can help if designed and deployed carefully.

### **The Opportunity to Utilize AI Tools**

**Consider strategic principles that align with how FQHC leadership and funders (like HRSA and NACHC) frame AI priorities:**

- A catalyst for rethinking operations: AI can help health centers step back from routine habits and reimagine how care is delivered, focusing on efficiency, equity, and sustainability rather than merely automating the old way.
- Impact on patients and staff as the north star: Any AI initiative should be judged by real-world effects on access, care quality, and staff experience. If it doesn't move the needle on these outcomes, reconsider.
- Potential to address key pain points at scale: From scheduling and triage to language access and documentation, AI can target the bottlenecks that most limit outcomes.

- A structured path to growth: The aim is not “buy a tool and hope for a miracle.” It’s a deliberate sequence; start small, demonstrate value, and scale with governance and rigorous evaluation.

## Where to Start?

**Important principle: Define the objective of the solution or the problem to solve, then identify a solution.**

- 1) Anchor your effort in the mission and actionable pain points
  - Tie AI priorities to access, equity, and workforce sustainability. Identify a handful of high-impact, measurable problems aligned with your center’s mission.
- 2) Start small, demonstrate value, then scale
  - Choose a pilot with clear success metrics (e.g., reduce no-show rates by a defined percentage, improve documentation quality, or shorten patient wait times) and learn before expanding.
- 3) Build governance and guardrails up front
  - Establish data-use policies, privacy safeguards, clinician oversight, and patient consent considerations early in the journey.
- 4) Focus on foundational readiness
  - Ensure data quality, interoperability, and baseline analytics capabilities; prepare your EHR and other systems for AI-enabled workflows.
- 5) Prioritize responsible, human-centered use cases
  - Favor use cases that augment clinician and staff capabilities without de-skilling the workforce, such as decision-support that guides care rather than replaces judgment.
- 6) Integrate change management and staff engagement
  - Engage front-line teams in planning, pilots, and evaluation; address concerns early and ensure transparent communication about goals and outcomes.
- 7) Embrace a culture of digital curiosity
  - Promote ongoing learning, experimentation, and iterative improvement rather than one-off deployments.
- 8) Measure, learn, and scale responsibly
  - Define success with robust metrics, publish learnings, and adjust based on real-world feedback and data.

## Wondering What AI Solutions are Being Implemented?

Here is a snapshot of AI use cases shaping current and emerging practice at FQHCs based on Industry research & market surveys, real-world FQHC case studies and vendor partnerships, HRSA & NACHC programs, and market observation & RFP patterns.

### Current Top 10 FQHC AI Use Cases

1. Patient Outreach & Engagement Automation
2. No-Show Prediction & Scheduling Optimization
3. Risk Stratification & Clinical Decision Support

4. Quality Measure Reporting & Compliance (UDS/HEDIS)
5. Revenue Cycle & Billing Optimization
6. Social Determinants of Health (SDOH) Analytics
7. Virtual Front Desk / Contact Center Automation
8. Predictive Care Coordination
9. Behavioral Health Screening & Early Intervention
10. Workforce Productivity & Staffing Analytics

#### Emerging FQHC AI Use Cases

1. Clinical Documentation (Ambient Scribes)
2. Language Translation & Multilingual Communication
3. Grant & Reporting Automation (e.g., HRSA, UDS+ Data Prep)
4. Patient Sentiment & Feedback Analysis
5. AI-Driven Health Literacy Adaptation

### **What this Means for Your Health Center**

- Align AI pilots with mission-critical outcomes: Access, equity, and workforce sustainability should anchor every project. Measure success with concrete, auditable metrics (e.g., appointment adherence, patient satisfaction, documentation accuracy, provider burnout indicators).
- Start with pilots that demonstrate tangible value quickly: Small, well-scoped pilots reduce risk and build confidence for broader rollouts.
- Invest in governance and data readiness early: Responsible AI requires clear policies, privacy safeguards, and stakeholder involvement from the outset.
- Leverage a multi-stakeholder approach: Include clinicians, front-line staff, administrators, and patients (where feasible) in design, testing, and evaluation.
- Leverage federal and vendor ecosystems: Programs from HRSA and NACHC can provide funding, guidance, and peer benchmarks; vendor partnerships offer pragmatic paths to production-ready solutions.

### **A Call to Action for Leaders**

The journey to AI-enabled transformation in FQHCs is less about chasing the newest tool and more about aligning technology with mission, people, and measurable impact. By starting with small, value-driven pilots, building governance, and embracing a culture of digital curiosity, health centers can improve patient access, staff satisfaction, and financial health.

## Key takeaways

- Focus AI efforts on measurable outcomes in access, equity, and workforce sustainability, not just technology types.
- Begin with high-impact, manageable pilots anchored in your center's mission.
- Build governance and data readiness early to support responsible, scalable adoption.
- Leverage emerging use cases in clinical documentation, translation, and reporting automation to extend reach and reduce staff burden.
- Use federal programs/ vendor ecosystems as accelerators for learning, piloting, and scaling.

## How We Can Help

**If your center is just starting this journey, FASTx AI Advisory Services can help with flexible options that create a practical, scalable pathway:**

- One-Time AI Strategy Session: define objectives, align stakeholders, and establish a clear path forward.
- AI Readiness & Roadmap: evaluate your environment, identify high-impact use cases, and deliver a practical implementation plan with milestones.
- Ongoing AI Advisory Support: fractional governance leadership, vendor vetting, pilot project oversight, and executive education to sustain momentum and governance.

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