



REWIRED THE VALUE TEST:

MAKE AI EARN ITS
PLACE IN HEALTHCARE



The Value Test: Make AI Earn Its Place in Healthcare

AI is landing in healthcare with tools that promise speed, scale, and smarter decisions. Health systems face harder constraints: tight budgets, stretched workforces, and the high price of late, fragmented care. **So, the question is not what AI can do, but what value it creates and whether that value is worth paying for.**

Value is improvement in pathway performance that shifts outcomes and total cost, for example earlier detection that prevents an avoidable admission. That kind of value can be budgeted and sustained.

Two things must be true before any AI use case is worth pursuing. First, it must create clear value in the pathway. Second, it must plug into the rewired system so that value can be executed and captured. Without both, the tool may be interesting, but not transformative.

AI creates value when it triggers coordinated action: the right person identified, the right next step taken, and follow-up completed. That only happens when AI is connected to shared digital foundations such as identity, data exchange, and payment rails, and to a rewired system's shared records, registries, and workflows.

With those conditions in place, evaluation starts from the care pathway, not the model. It asks four questions:

- **Right patient:** are we finding and prioritising the people most likely to be missed, early enough to prevent complications and change the cost curve?
- **Right provider:** are we routing tasks to the safest effective level, so scarce clinician time is reserved for the people who need it most?
- **Right time:** are we reducing delays for the patients at highest risk, where delay drives harm and expense?
- **Right care:** are we delivering guideline-aligned decisions and reliable follow-through for everyone, not only the easiest to reach?

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When these are answered, **value becomes visible and measurable. The questions test value; the rewired system makes value real.**

The four “rights” also define ROI: the pathway change, the near-term metric shift, the economic value created, the three-year cost, and who captures value versus who pays.

Two examples show how this works in practice.

Micro-coaching is short, workflow-embedded guidance for community health workers at the point of care. It provides structured prompts aligned to protocols so routine care becomes more consistent at scale.

The value question is whether micro-coaching improves the few critical actions that drive outcomes and downstream cost. For example, does it increase correct risk classification and completion of the next step (a referral or follow-up) for the patients who need it most? When those actions slip, patients return sicker and the system pays more.

Evaluation should define those critical actions upfront and compare completion with and without micro-coaching. Early signals should appear quickly: higher completion, more appropriate referrals, and better follow-up. Then translate to system value: fewer avoidable visits, fewer repeat encounters, and more patients safely managed earlier.

If clinicians save minutes per encounter, that time must become capacity the system can count: more patients seen or more time on higher-risk decisions. If documentation becomes more structured and reliable, execution should improve, for example fewer missed follow-ups because next steps are consistently captured and tracked. The economics should be explicit.

Translate minutes saved into capacity created, and link better documentation to measurable follow-up completion and care-gap closure. Include full multi-year operating costs—software, workflow change, training, optimisation—or a popular tool becomes unaffordable at scale.

If AI is going to deliver transformation health systems need one rule: start every AI initiative with an ROI model anchored in pathway performance. **Use that value case to decide what to adopt, what to stop, and what to scale.** That discipline reshapes procurement, pilot design, and measurement and it forces the hard questions early: who captures the value and who pays.

In a rewired system, that value case can be proven and captured at scale. That is the difference between pilots that impress and capabilities that last. Start with value, wire it in, and make AI earn its budget line.

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