



Automation with AI tools: Empowering today's medical services professionals

On the Radar webinar series

September 2026



The webinar will start
at the top of the hour.

MONTHLY INSIGHTS

Webinar schedule & topics

THE 3RD THURSDAY OF EVERY MONTH:

10AM Pacific, 1PM Eastern

TODAY

Automation with AI tools

OCTOBER

One outcome, many drivers: A collaborative approach to mortality improvement

Past webinars available for streaming



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Greeley

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On the Radar

Chartis and Greeley explore practical and future-focused topics in quality, regulatory & medical staff.



UPCOMING WEBINAR

Seconds to contaminate, years to recover

Apr 09, 2026

This session will examine regulatory standards governing high-level disinfection and sterilization, with emphasis on how surveyors interpret and apply those requirements in acute and procedural settings.

Navigating the Zoom interface

Handouts:

Check the chat function for copies of the slides for note taking and any other handouts.

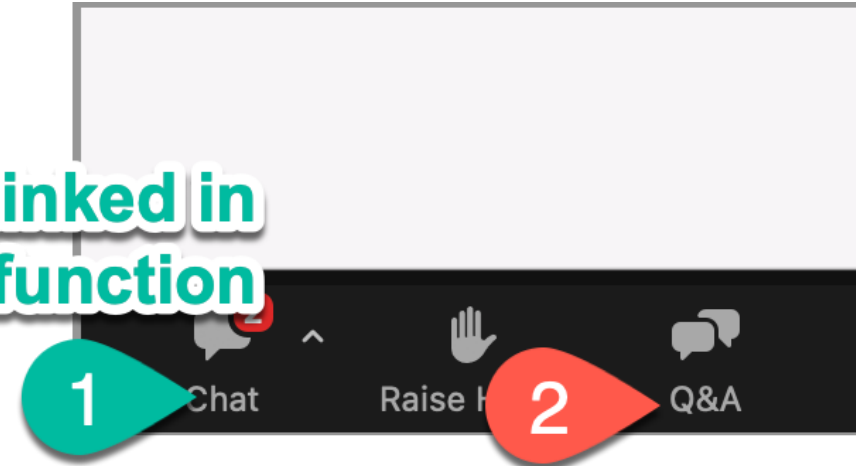
Questions and comments:

Please participate in the discussion by asking question through the Q&A function during the webinar.

There will also be a survey you will receive immediately after the webinar that will give you an opportunity to ask additional questions or make comments.

Any questions not answered during the webinar will be addressed in a follow-up email or posting.

Handouts are linked in the “chat” function

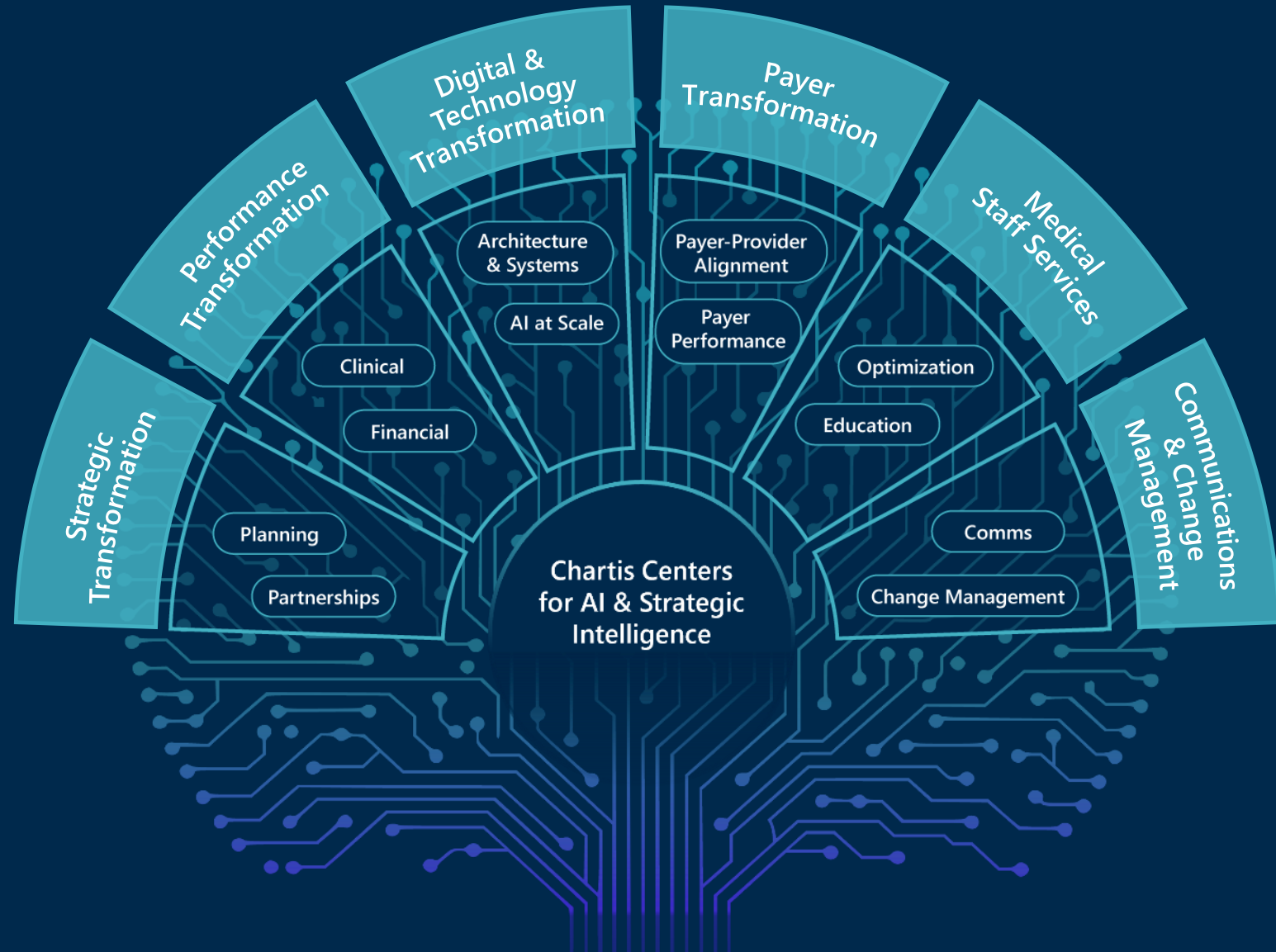


Please ask questions by clicking on “Q&A”

Chartis is uniquely built to *deliver the last mile*.

Our **integrated lines of business** work alongside the Chartis Centers for AI & Strategic Intelligence to deliver against the last mile necessary to **transform healthcare delivery**.

Connected capabilities.
Real healthcare transformation.



High reliability care

UNPARALLELED BREADTH AND DEPTH

Our clients are all striving toward the same goal of providing safe, high-quality care—something that's becoming even more important with the many distractions and disruptions in healthcare today. We help clients achieve their organizational reliability, quality, and safety goals, leading to results in areas that matter most—improved care outcomes, staff engagement, operational stability, and total cost of care, enhanced reputation, and better patient experience.

High Reliability Organization (HRO)

- High reliability organizational design and infrastructure
- Quality, Value, and Performance Improvement
- Quality ratings and rankings optimization
- Patient safety / harm reduction / safety and reliability culture
- Adverse event response and remediation / RCA
- High fidelity measurement / Clinical Documentation Integrity (CDI)
- Care facilitation

Clinical Compliance, Regulatory, and Physical Environment Solutions

- Adverse event response
- Adverse action regulatory response and remediation
- Accrediting body readiness assessment
- Regulatory readiness rehearsal / mock surveys
- Life safety and environment of care assessment
- Policy simplification
- Infection prevention program

Bylaws, Rules and Regulations, and Peer Review

- Bylaws and rules and regulations assessment and redesign
- Peer review assessment and redesign
- Medical staff / medical director structure and governance
- Credentialing, OPPE

External Peer Review

- Physician/advanced practice professional external peer review
- Focused Professional Practice Evaluation (FPPE)
- Ongoing case review in support of OPPE/FPPE
- Medical necessity reviews
- Patient safety/carequality case reviews

MEMBERSHIP AND PROFESSIONAL EDUCATION SERVICES

Today's *discussion*

The digital shift is here and MSPs are at the center of it. AI enabled automation is transforming credentialing, privileging, onboarding, and performance monitoring.



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Today's *agenda*

Understanding the automation landscape

Real-world applications in the MSP workflow

Navigating challenges & ethical considerations

*Questions should be posted in the webinar interface throughout the presentation.
We will respond to any unanswered questions in writing following the webinar.*

Understanding the automation landscape

Empowering, not replacing, the MSP

Beyond the buzzwords: What automation really means

Key points

- Automation removes repetitive, rules-based work so MSPs can focus where they add the most value: critical thinking, professional judgment, and patient safety.
- Everyday targets include credentials file review for completeness, meeting management support, privileging requirement tracking, KPI dashboards, and application management.
- MSPs get time back to evaluate information, resolve discrepancies, collaborate with providers, and ensure compliance.
- This is not a new conversation—web crawlers and electronic applications raised the same concerns. Automation doesn't replace expertise; it creates more opportunities to apply it.



What's accelerating automation with AI adoption



Provider networks are expanding and credentialing data is growing more complex.



MSPs are asked to accomplish more without adding staff, while expectations keep rising.



Organizations must demonstrate compliance quickly and accurately.



Leadership expects real-time visibility into credentialing status, turnaround times, and operational performance.



Thoughtful automation has already proven itself in onboarding, duplicate process reduction, and clinical competency tracking.



Evolution of the tools (accessible, user friendly, trust)



Automation isn't replacing compliance—it helps organizations maintain it while supporting better decisions.

Where automation ends and judgment begins

Technology handles the process. MSPs provide the analytical expertise and know when and how to act on the findings.

Automation

WHAT TECHNOLOGY HANDLES

Processes and organizes information

Generates reminders and tracks deadlines

Flags potential issues and inconsistencies

The MSP

WHAT JUDGMENT REQUIRES

Understands context and asks follow-up questions

Interprets regulations and resolves discrepancies

Decides what findings mean and how urgently to act

The Result

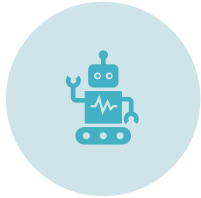
WHY IT MATTERS

Administrative burden is removed

MSPs practice at the top of their expertise

Trusted advisors and guardians of credentialing quality

The automation-ready organization



It isn't the newest technology—it's readiness to **use current technology at the top of its capabilities.**



A culture of continuous learning: teams **stay informed** on emerging tools and adapt workflows as technology evolves.



Internal champions and subject-matter experts who evaluate new tools and educate colleagues.



Collaboration with peers and industry leaders instead of reinventing solutions that already exist.



Mission first: **technology should support** safer credentialing, stronger compliance, better provider experience, and improved patient care.



Above all, understand the rules, risks, and ethics of these tools—which is where we go next.

Navigating challenges & ethical considerations

Culture, policy, governance, and ethics

Culture & organizational readiness



- People first
- Build trust
- Assess readiness
- Manage concerns

Culture & organizational readiness



- AI adoption requires clear governance and guardrails:
 - Acceptable Use
 - Data Protection
 - Accountability
 - Oversight

Culture & organizational readiness



- AI supports decisions; people remain accountable
- Ensure:
 - Human review
 - Trusted sources
 - Auditable processes
 - Transparent use

Culture & organizational readiness



■ AI adds value:

- Summarization
- Pattern recognition
- Content creation
- Task automation

■ People lead:

- Judgment
- Context
- Relationships
- Leadership

Real-world applications in the MSP workflow

Automation with AI building around a facility's existing capabilities

Framework for AI adoption

■ Phase 1: Assess Understand Readiness

- Evaluate organizational culture and openness to technology adoption
- Identify existing IT and Legal policies related to AI use

■ Phase 2: Optimize – Maximize What's Already Available

- Identify automation and AI tools already in place but underutilized
- Leverage existing investments in Teams, Zoom, and Microsoft 365

■ Phase 3: Advance – Guide Strategic AI Integration

- Introduce advanced AI capabilities including Copilot and API integrations
- Embed AI into credentialing, peer review and operational decision making
- Establish governance frameworks aligned with accreditor expectations (TJC, URAC, NCQA)

AI Adoption Maturity Model

From Basic Automation to Advanced Intelligence

ENTRY LEVEL

Basic Automation

- Automated reminders & notifications
- Appointment alerts & scheduling support
- Meeting summaries (non-PHI)
- Simple workflow automation

➤ Quick wins with minimal risk

MID-LEVEL

Integrated AI - M365

- Email summarization & drafting
- Task organization & prioritization
- Document summarization
- Workflow streamlining

➤ Reduces administrative burden

ADVANCED

Autonomous Intelligence

- Data analysis & trend identification
- Actionable insight generation
- Deep workflow integration
- Copilot & API integrations

➤ Drives strategic decision-making

Real-world applications in the MSP workflow

Four workflows where MSPs see
immediate, measurable value

1

Credentials Verification Organization (CVO)

Application screening, verification, privileging prep

2

Medical Staff Services (MSS)

Compliance, FPPE tracking, meeting management

3

Payer Enrollment

Requirement tracking, revalidation alerts, roster reconciliation

4

Immediate Wins

Low-risk use cases you can start with today

The CVO bottleneck



THE PROBLEM

CVO coordinators spend significant time on manual, rules-based tasks:

- Screening applications for red flags (employment gaps, NPDB matches, OIG exclusions)
- Verifying credentials against source data
- Tracking expiring items (30+ days past, 60+ days upcoming)
- Preparing files for committee handoff (50+ pages → 1-page brief)

RESULT: High-value judgment work gets squeezed into overtime hours.



THE SOLUTION

Automated workflows:

1. **INTAKE AUTOMATION**
Upload application → AI scans for red flags
Instant NPDB + OIG + SAM cross-reference
2. **VERIFICATION SUPPORT**
Validates credentials against source docs
Flags discrepancies
Drafts verification follow-ups
3. **CREDENTIALS FILE PREP**
Compares against specialty criteria
Identifies missing documentation
4. **EXPIRABLES MONITORING**
Tracks all dates
Generates compliance reports



THE IMPACT



Faster application screening
■ (Screening: 15 min → 6 min per file)

✓ Identify Red flags earlier
■ (More time to investigate)



Streamlined file preparation



More time for provider-focused review and decision-making

MSS hidden time sink



THE PROBLEM

MSS staff juggle compliance across multiple manual systems:

- Bylaws review & gap analysis
(Comparing against federal and state regulations and accrediting organization's requirements — manually)
- Survey readiness prep
(Building checklists and crosswalks for audits)
- FPPE & monitoring plan generation
(One-off documents per specialty, per volume level)
- Committee meeting minutes & attendance
(Recording, transcribing, drafting by hand)

RESULT: MSS time savings on documentation that can be automated.



THE SOLUTION

Automated compliance:

1. **BYLAWS & POLICY LIBRARY**
Compares against federal and state reqs
Auto-generates gap reports
Tracks review dates and ownership
2. **SURVEY READINESS**
Auto-generates compliance checklists
Builds crosswalks (practice → standard)
3. **MONITORING PLAN GENERATION**
Builds specialty-specific FPPE criteria
Generates templates by procedure, volume, risk level
4. **MEETING MANAGEMENT**
Records, transcribes, drafts minutes
Auto-captures attendance, decisions, action items

Stores in centralized channel



THE IMPACT

Streamlined documentation:

- Less manual drafting and duplication
 - More consistent meeting records
- ✓ Policy compliance proactive, not reactive
- (Gaps caught before survey)
- 📋 Consistent FPPE practices
- Standardized templates across specialties
 - Clear monitoring documentation
- 👥 More Capacity for Strategic Work:
- Analyzing OPPE/FPPE trends
 - Committee and board support

Payer enrollment: The complexity tax



THE PROBLEM

Enrollment teams manage dozens of payers, each with unique requirements:

- Payer requirement comparison (Medicare vs. Medicaid vs. commercial—all different)
- Roster management (Internal roster vs. 12 payer directories—manual reconciliation)
- Delegated agreement management (25+ agreements: different audit requirements, schedules, reporting)
- Demographic change management (One change → 10+ payers, manually updated per portal)

Result: Administrative complexity creates duplication of effort, increases the risk of discrepancies, and limits time available for payer relationship management.



THE SOLUTION

Payer intelligence automation:

- 1. PAYER REQUIREMENT MASTER**
Maintains a centralized repository of payer requirements. Auto-highlights overlaps and conflicts. Generates compliance checklists
- 2. ROSTER RECONCILIATION**
Compares internal roster vs all payer directories
Flags mismatches (name, NPI, location, status)
- 3. REVALIDATION FORECASTING**
Auto-generates 30/60/90-day look-ahead reports. Flags PECOS, CAQH, payer-specific renewal dates
- 4. DEMOGRAPHIC CHANGE MANAGEMENT**
One input → Automated updates for all payer portals. Tracks completion status
- 5. DELEGATED AGREEMENT TRACKING**
Compares agreements side-by-side
Generates audit readiness checklists



THE IMPACT



Reduced manual portal work

- Centralized management of payer data
- Fewer repetitive updates across multiple systems

✓ Improved renewal readiness

- Upcoming requirements identified earlier
- Greater visibility into payer-specific deadlines



Rosters stay clean

- Consistent roster management
- Faster identification of discrepancies



Greater focus on payer relations:

- Managing exceptions
- Supporting delegated agreements
- Strengthening payer partnership's

Key takeaways & open discussion

MSPs are strategic digital leaders—positioned to guide how automation is adopted, not sidelined by it.

AI tools empower human judgment—they augment, rather than replace, the expertise of the MSP.

Successful AI adoption requires three things in parallel: understanding the change management, establishing governance and ethics, and starting with high-impact, low-risk workflows.

Greeley builds practical solutions around a facility's existing capabilities rather than forcing a rip-and-replace.

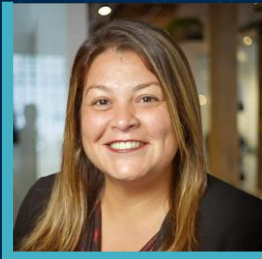
What questions do YOU have?



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Thank *you*

