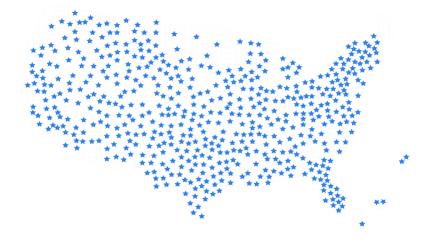
# **CLEAR**

# **Comprehensive Legal and Ethical AI Roadmap**

# **Designed for**





#### 1. Introduction

Al enhances decision-making in diagnosis, treatment, and resource allocation, aiming to improve quality and patient outcomes. However, biases in algorithms can cause unequal treatment, misdiagnoses, and loss of trust, raising ethical issues around transparency, accountability, and fairness. For instance, biased models may underdiagnose certain groups, and lack of transparency can undermine trust among providers and patients.

Purpose of this guidebook, **CLEAR**, is to educate CureMD's AI developers and stakeholders with guidelines for creating ethical, unbiased models and to enable action through practical steps for bias mitigation and compliance.

Scope includes AI predictive models in healthcare, addressing ethical and bias challenges, providing mitigation methodologies, and ensuring compliance with standards like HIPAA, GDPR, WHO, FAVES, NIST, and UNESCO frameworks. CLEAR aims to ensure CureMD's AI systems are fair, accountable, and effective for all patients.

# 2. Understanding Ethical AI and Bias

## 2.1 Defining Bias in Al

Bias in AI means that the system makes unfair mistakes that negatively affect certain groups of people. This can happen due to flawed data or algorithm design.

In healthcare, Al systems are especially prone to bias because medical data often includes historical inequalities and imbalances among different demographic groups.

# 2.2 Types of AI Bias

Bias in healthcare AI can be categorized into three main types:

#### 2.2.1 Systemic Bias

Bias rooted in societal, institutional, or structural inequities. For example, medical datasets may underrepresent minority populations due to disparities in access to healthcare. This can cause predictive models to perform poorly for these groups.

#### 2.2.2 Statistical Bias

Bias caused by skewed or unbalanced datasets during training, leading to unfair outcomes. For example, an AI model trained on all female patients may overlook the prevalence of the disease in male patients, leading to misdiagnosis.

#### 2.2.3 Human Bias

Bias introduced by subjective decisions, such as how data is labeled, collected, or used. For example, a dataset on chronic pain may reflect underreporting of pain symptoms in women, as healthcare providers historically dismissed their complaints.

# 2.3 Real-World Examples of Al Bias in Healthcare

To emphasize the consequences of bias, lets highlight real-world examples where biased AI has impacted healthcare:

#### 2.3.1 Racial Bias in Disease Predictions

A widely used AI tool in the U.S. was found to underestimate the health risks of Black patients compared to White patients because it used healthcare spending as a proxy for health needs. Since Black populations often receive less care, the AI concluded they required fewer resources.

# 2.3.2 Gender Bias in Heart Disease Diagnosis

Many predictive models for heart disease have been trained predominantly on male patients. This has led to underdiagnosis of heart attacks in women because their symptoms often differ from men's.

# 2.3.3 Bias Against Minority Groups in Imaging

An AI model for skin cancer detection performed worse on patients with darker skin tones due to a lack of diversity in the training dataset. This caused diagnostic errors and delayed treatment.

## 2.4 Defining Ethics

In AI, ethics involve creating systems that respect human rights, promote fairness, and prevent harm.

# 2.4.1 Key Ethical Principles in AI for Medicine

#### Fairness

Al should treat all patient groups equally, avoiding discrimination based on race, gender, age, or other characteristics.

#### Transparency

Transparency reflects the extent to which information about an AI system and its outputs is available to individuals interacting with such a system – regardless of whether they are even aware that they are doing so. Healthcare professionals and patients need to know how decisions are made to trust and effectively use AI tools.

#### Accountability

There must be clear responsibility for AI-driven decisions.

### Privacy

Protecting patient data is essential. Ethical AI respects confidentiality and complies with regulations like HIPAA to safeguard personal health information.

# Respect for Law and Act with Integrity

Al use must respect human dignity, rights, and freedoms, fully complying with legal standards and policies that protect privacy, civil rights, and liberties.

#### Protect Autonomy

Al should support human judgment, especially in decisions that affect individual rights or freedom.

### 2.4.2 Impact and Importance of Ethical AI

Following ethical standards helps organizations meet legal requirements, maintain a positive reputation and enhances trust among patients and healthcare professionals.

# 3. Global Regulations and Standards

# **3.1** WHO Guidance on Al Ethics and Governance

### 3.1.1 Data Privacy and Security

- Patient data must be encrypted and accessed only by authorized personnel.
- Never upload data to public platforms like Google Drive or share it via email attachments.
- Remove all direct and indirect identifiers like name and location to ensure data anonymity.
- Violation may lead to lawsuits and legal penalties for failure to protect patient data.

#### 3.1.2 Bias Detection and Fairness

- Conduct bias detection tests before deployment to ensure performance across genders, ethnicities, and age groups.
- Include minority and underserved groups in training data to ensure fairness.
- Document data sources, fairness tests, assumptions, and limitations to ensure transparency.

# 3.1.3 Role Definition and Accountability

 Clearly define roles for developers, healthcare providers, and deployers. For example, establish that AI developers are responsible for initial bias mitigation, while

- healthcare providers monitor AI outcomes in practice.
- Clients should be able to initiate contact in case of a problem. Set up an incident reporting system to flag AI errors or unfair predictions.

### 3.1.4 Protect Human Autonomy

- Design AI to assist medical providers and patients in making informed decisions, not override human judgment.
- Avoid overstating the AI model's abilities.

# 3.1.5 Transparency and Explainability

- Provide documentation on model assumptions, operating protocols, and data properties (collection, processing, labeling).
- Balance explainability with accuracy where necessary.

### 3.1.6 Legal and Ethical Redress

- Establish accessible complaint mechanisms for patients to report harm caused by AI.
- Offer clear legal pathways for patients to seek compensation for AI errors.

### 3.1.7 Recommendations for Violations

- Conduct a root cause analysis and stop further use of compromised data immediately.
- GDPR: Report breaches to regulators within 72 hours.
- HIPAA: Notify affected patients and authorities within 60 days.
- Design a corrective plan to retrain staff, fix compliance issues, and improve data security.
- Disclose testing results and provide compensations and apologies to affected individuals.
- Retrain models to address identified biases and harms.

# 3.2 UNESCO's Recommendations on Ethics of AI

# 3.2.1 Inclusivity and Human Rights

- Al systems must not harm any individual or community physically, mentally, or economically.
- Ensure inclusion of individuals regardless of race, color, descent, gender, age, language, or religion.
- Al models must strictly avoid violating human rights.
- Al must be based on rigorous scientific foundations.

# 3.2.2 Transparency and Explainability

- Provide meaningful explanations for decisions, especially when the outcomes are high-risk, irreversible, or difficult to reverse.
- Localize explanations in languages that are understandable to end-users. For example, a healthcare app must explain predictions in the user's native language.

### 3.2.3 Decision Oversight and Autonomy

- In life-and-death or critical scenarios, human oversight must be the final authority.
- Al must assist in decision-making by offering multiple options instead of imposing a single action.
- Maintain decision logs with manual override records for all critical tasks to ensure accountability.

# 3.2.4 Efforts to Combat Discrimination

- Compare datasets against population demographics to ensure equal representation of gender, race, and age groups.
- Document efforts to avoid discrimination, including data diversity

measures and model limitations, in publicly accessible reports.

# 3.2.5 Contesting AI Decisions

- Allow users to contest AI decisions through clearly defined, accessible redress mechanisms.
- Ensure accountability for all outcomes and provide users with a pathway to challenge decisions.

#### 3.2.6 Recommendations for Violations

- If the AI system performs poorly for specific demographics like gender or minority groups, identify the root cause of the source of bias. Then, retrain the AI models with datasets that represent all demographics equitably.
- If the users cannot understand how Al decisions are made, refine outputs to ensure predictions are understandable and localized in user's language.
- If AI decisions result in harmful outcomes such as incorrect medical diagnosis or financial loss, halt system operations, notify affected individuals and document the issue along with corrective actions taken.
- In case of privacy breach like data leakage or personal identifiers, notify HIPAA or GDPR and ensure future compliance.

# 3.3 NIST AI Risk Management Framework (AI RMF)

#### 3.3.1 Data Governance

- Data lineage including origins and transformations must be documented.
- Collect only essential data for the system's functionality.

### 3.3.2 Bias Detection and Mitigation

 Bias assessments must be performed at every stage of an AI system's lifecycle.  All steps taken to mitigate bias must be documented.

#### 3.3.3 Explainability

 Al decision-making should be interpretable to clinicians, regulators, and patients.

### 3.3.4 Monitoring and Evaluation

- Al systems should be valid and reliable for a given time interval under given conditions.
- Continuously monitor Al outputs for performance drift and emerging biases due to changing data distributions.

#### 3.3.5 Recommendations for Violations

- If bias is detected after deployment, retrain the AI model, document and disclose corrective measures in public reports.
- In case of data breach, notify the regulators and strengthen security measures like access control.
- In case of data drift, recalibrate models to align with changing contexts.

# 4. Specific Compliance Requirements for Healthcare AI

# 4.1 ONC Health IT Certification Program – Decision Support Interventions (DSI) Framework

Developer must provide the following:

- Details of the AI system including intended purpose, data sources, input features and outputs.
- Descriptions of situations where user is cautioned against using the AI system, known risks and limitations.
- Exclusion and inclusion criteria that influenced the training dataset.
- Description of relevance of training dataset to intended deployment setting.
- Approaches to manage and reduce bias.

- Data source other than the source of training and test data which is used for external validation.
- Details of external validation process.
- Quantitative measures of performance.
- Description of process and frequency by which the AI system's validity is monitored.

# 4.2 HIPAA (Health Insurance Portability and Accountability Act)

- Maintain a record of who accessed the data, when and for what purpose.
- Remove direct and indirect identifiers like names, social security numbers, phone numbers and email addresses.
- Clearly define inclusion/exclusion criteria for training dataset. For example, the dataset includes patients aged 18-65 diagnosed with hypertension and residing in US.
- Maintain a list of known risks and limitations.
  For example, the model performs less accurately for patients over 75 years of age or the system is not validated for diagnosing rare conditions.
- Failures to may comply lead to hefty financial penalties.