From Commitment to Execution:

Operationalizing AI Governance in Healthcare

How organizations are moving **from AI governance discussions to enterprise-wide execution.**

WEEK 4: VIRTUAL SUMMER SERIES

JULY 15 | 12:00 - 1:00 PM CT

Clearwater

Meeting Logistics

Microphones

All attendees are on mute.

Questions

Type your questions in the Q&A box.

Resources

Upcoming events, slides & resources linked.

Recording

Recording will be provided after event.

Survey

Survey will prompt at the end of webinar.

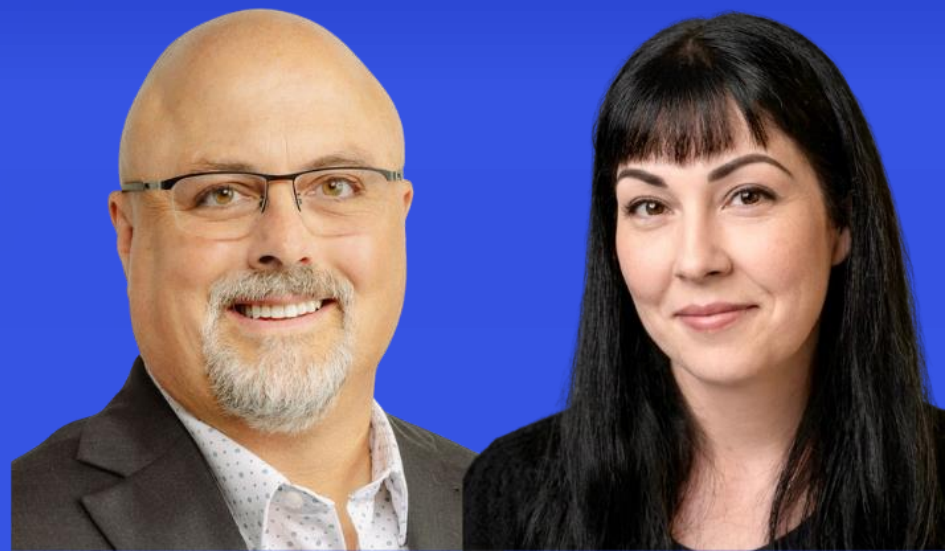
Agenda

- Welcome + Introductions
- Presentation Content: From Commitment to Execution: Operationalizing AI Governance in Healthcare
- Q+A

FEATURING:

Dave Bailey EMBA, CISSP Vice President, Consulting Solutions & Strategy

Cate Ciccolone, Associate Director, Commercial Health IT Advisory Guidehouse



From Commitment to Execution: Operationalizing AI Governance in Healthcare

Clearwater

You have a governance framework.

What you may not have is governance.

Three Ways Governance Breaks Down After Go-Live

No one is watching	Approved once - Running forever	Policies don't touch production
Everyone owns AI risk	Risk assessed at intake	Your inventory is in a doc
No one owns the model	The AI kept changing	Your SIEM doesn't know it exists

Clearwater

Four Pillars of Operational AI Oversight

Continuous Inventory & Risk Tiering

Know every AI in your environment — and rank it by impact.

Monitoring & Drift Detection

Set a baseline. Know the moment it shifts.

Human-in-the-Loop Controls

Someone must be able to say stop — with real authority.

Metrics, Reporting & Cadence

If leadership can't see it, it won't get fixed.

Clearwater

Continuous Inventory & Risk Tiering

Know every AI in your house. All of them.

Pillar 1

One inventory. Every model — vendor tools, embedded features, shadow AI.

Tier by impact, not just sensitivity. The question: what happens when it's wrong?

Re-tier on a trigger, not a calendar. Vendor update. Scope change. New data source.

Connect to existing systems. CMDB. BAA workflow. Not a new spreadsheet.

Monitoring & Drift Detection

Uptime isn't monitoring. Drift is.

Pillar 2

Baseline before go-live. Define "normal" output, accuracy, and latency before the model runs.

Watch for drift, not just downtime. Data drift, concept drift, degrading performance.

Automate the threshold. Don't rely on someone happening to notice.

Vendor-hosted AI included. Performance attestations belong in the contract.

Human-in-the-Loop Controls

A disclaimer is not an override.

Pillar 3

Match review to risk tier. High-impact clinical AI needs a named reviewer. Not a checkbox.

Override authority must be real. Define who can pause or roll back a model. Write it down.

Escalation paths before the incident, not during it.

Log every override. Regulators will ask. Have the evidence.

Metrics, Reporting & Cadence

Governance you can't measure isn't governance.

Pillar 4

Five indicators to track: Inventory completeness. Re-tiering activity. Drift incidents. Override rate. Escalation time.

Speak risk, not IT. Translate monitoring data into language your governance committee understands.

Same report, same cadence. AI risk alongside your other security metrics. Not a separate process.

Set the cadence. Hold to it. Quarterly minimum. Monthly for high-risk tiers.

A Phased Path to Maturity

1

Phase 1 · Days 0–90

Inventory & Baseline

Catalog every AI asset.
Assign initial risk tiers.

2

Phase 2 · Months 3–6

Monitoring Build-Out

Drift thresholds.
Escalation paths defined.

3

Phase 3 · Months 6–12

Integration

Connect AI oversight to GRC + vendor risk.

4

Phase 4 · Ongoing

Continuous Improvement

Re-tier. Review metrics.
Report to leadership.

Clearwater

What to Take With You

Governance ≠ oversight. Build both. The framework is where you start — not where you stop.

AI intake is a starting line, not a finish line. The model keeps changing after you approve it.

Name an owner. If no one is accountable, no one is watching.

Start where risk is highest. You don't need every pillar mature on day one. Prioritize.

Clearwater

Q&A

Clearwater

Coming Next

State of AI in Healthcare:
Where the Industry Actually Is

WEEK 5: VIRTUAL SUMMER SERIES

JULY 22 | 12:00 - 1:00 PM CT

We are here to help.

Moving healthcare organizations to a more secure, compliant, and resilient state so they can achieve their mission.

Clearwater

Healthcare – Secure, Compliant, Resilient

www.ClearwaterSecurity.com

800.704.3394

LinkedIn | linkedin.com/company/clearwater-security-llc/

Legal Disclaimer

Although the information provided by Clearwater Security & Compliance LLC may be helpful in informing customers and others who have an interest in data privacy and security issues, it does not constitute legal advice. This information may be based in part on current federal law and is subject to change based on changes in federal law or subsequent interpretative guidance. Where this information is based on federal law, it must be modified to reflect state law where that state law is more stringent than the federal law or other state law exceptions apply. This information is intended to be a general information resource and should not be relied upon as a substitute for competent legal advice specific to your circumstances. YOU SHOULD EVALUATE ALL INFORMATION, OPINIONS AND RECOMMENDATIONS PROVIDED BY CLEARWATER IN CONSULTATION WITH YOUR LEGAL OR OTHER ADVISOR, AS APPROPRIATE.

Copyright Notice

*The existence of a link or organizational reference in any of the following materials should not be assumed as an endorsement by Clearwater Security & Compliance LLC.