

MEDICARE BENEFITS & DIGITAL HEALTH DIVISION  
Supplementary Estimates Hearings October 2025

Artificial Intelligence in Healthcare

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- The department also partnered with the Australian Commission on Safety and Quality in Health Care (the commission) to develop [AI guidance for clinicians](#), which provide advice on the use of AI in clinical settings.

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- Many AI products, such as AI medical scribes, fall outside this framework and have little oversight, raising concerns about the use of these tools within healthcare settings. Anecdotally, some are marketed as outside regulatory levers (e.g., not a medical device) or as privacy-compliant, often with limited transparency. Some suppliers may be unaware their cloud platforms send data outside Australia, raising risks for patient data security.
- Some scribe suppliers advertise directly to health professionals that they can achieve a 30% revenue increase with no additional hours or patient consultations, which has implications for MBS costs.
- The AI clinical use guide, developed with the Australian Commission on Safety and Quality in Health Care, advises clinicians remain accountable for the accuracy of any AI-generated clinical notes and must understand the risks involved in using AI scribes at the point of care.

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**1. Productivity**

- AI enables productivity gains through the augmentation of labour and the automation of low complexity tasks. For example, AI scribes are already automating clinical note taking.
- Our team has estimated that, if primary care GPs in Australia saved just 10 minutes per day on administration tasks, this would be equivalent to 4,295,918 additional consultations per year.
- As at November 2025, the Royal Australian College of General Practitioners (RACGP) estimated 40% of GPs are using AI scribes.
- Outputs from generative AI have implications for patient safety, and data quality held within digital health infrastructure which necessitates ongoing quality assurance.
- We would be interested in seeing the research you have done on productivity in health.

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## AI EAG 13 April 2026 – Agenda Item 7 – AI scribes

### Current use of AI scribes

- We continue to see a rapid uptake of AI medical scribes in clinical settings
- As of November 2025, the Royal Australian College of General Practitioners (RACGP) estimates approximately 40% of GPs are using AI scribes.

### Perceived opportunities for clinicians

- Productivity and efficiency gains are the most commonly cited benefits of AI scribes.
- Other benefits include reduced burnout due to automation of administrative tasks and enabling clinicians to spend more time delivering high-quality care.
- There is limited broad scale, peer reviewed evidence of benefits available currently.

### Key concerns and risks

- Medical scribes are developed on Large Language Models so are impacted by the same limitations in terms of quality and accuracy.
- This has implications for patient safety, clinical accountability, and the integrity of data held within national digital health infrastructure.
- Quality assurance relies on clinicians reviewing scribe outputs for accuracy before uploading consultation notes to a patient's record.
- There is also significant variation in how clinicians and clinical practices are gaining consent for AI scribe use.
- Our position is that informed consent requires consumers to understand the benefits and limitations of the technology to which they are consenting.

### Possible government levers

- There is a strong framework already for the regulation of Software as a Medical Device, including where that software uses AI (i.e., when the software is used to diagnose, treat, monitor, predict, prevent, or alleviate a disease, injury or disability)
- Key levers for risk mitigation where scribes do not meet the threshold for medical device software include both clinician and consumer capability and literacy uplift.
- The Commission and department have worked together to develop AI guidance for clinicians which includes an AI medical scribe use case.
- Ahpra and the National Boards have also released guidance for clinicians on scribe use.