

Ambient Documentation

Presented to:

Vermont House Healthcare Committee, January 13th, 2026

Presented by:

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What is Ambient?

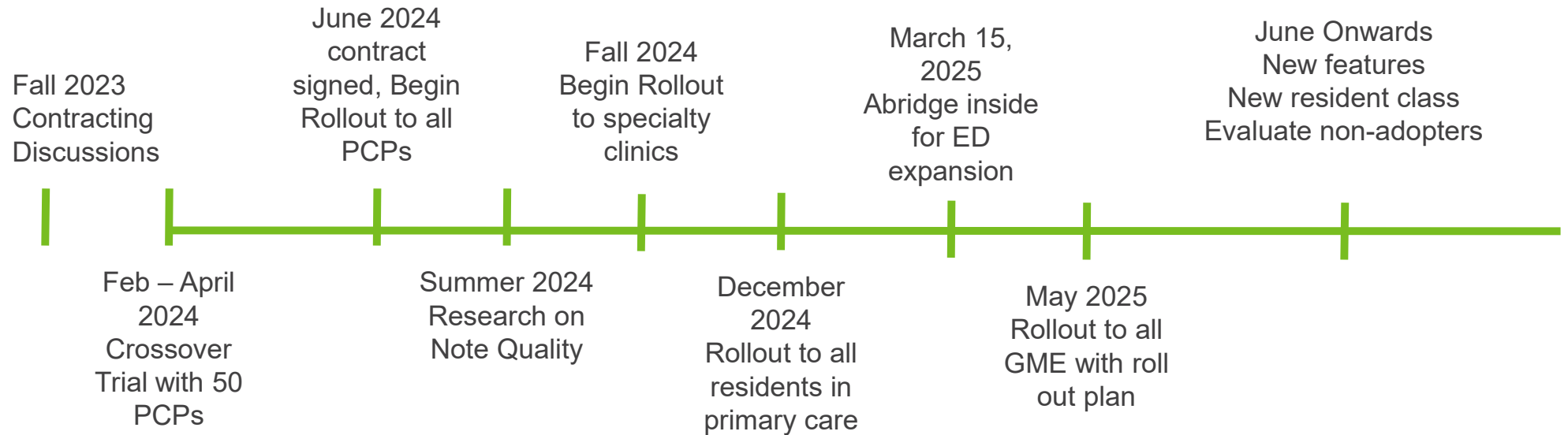
- ▶ At its core, technology utilizing artificial intelligence (AI) which is trained and prompted to generate a clinical note based on audio input.
- ▶ The solution set provided within these tools is not static and continues to expand and evolve
 - ▶ Subspecialties supported
 - ▶ Languages
 - ▶ Visit types
 - ▶ Personalization of documentation templates
 - ▶ Orders
 - ▶ Coding Recommendations

High Level Workflow

Workflows can be different by provider and specialty

1. Obtain permission from the patient to record the visit for the purposes of documentation, answer any questions they may have
2. Conduct the interview and physical exam
3. Submit recording for processing
4. Work within the EMR
5. Processing complete, review and edit the note and/or patient friendly instructions
6. Sign note, complete encounter

Timeline of Ambient Rollout UVM Health



Growth Visits and Users

Ambient Encounters

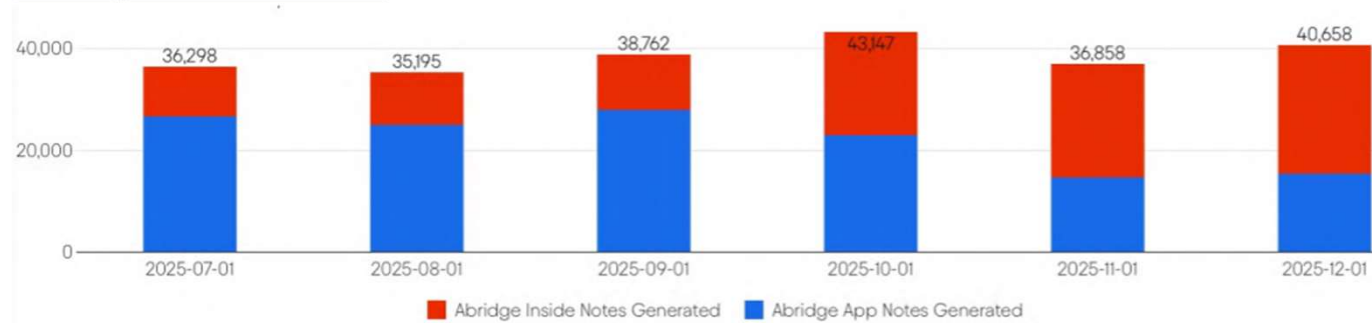


Recording Users

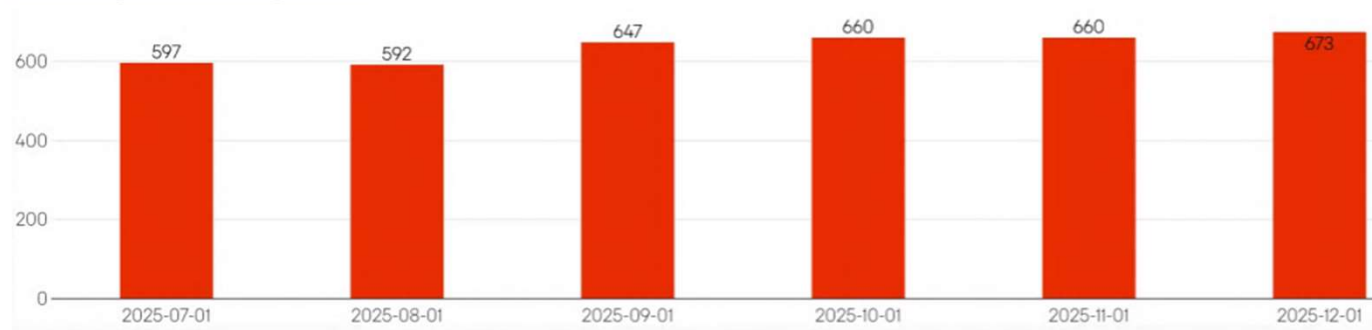


Growth Visits and Users

Monthly Notes Generated



Monthly Recording Users



Ambient and Note Quality

AHEC Summer Research

- "Comparison of Provider-Generated vs Artificial Intelligence-Generated " by Edward Harrington, Francisco Cordero et al.

[Edward Harrington](#), University of Vermont
[Francisco Cordero](#), University of Vermont
[Michelle Cangiano MD](#), University of Vermont Health Network
[Alicia Jacobs MD](#), University of Vermont Health Network



Note Quality Categories
Accurate and correct
Thorough
Useful
Organized and complete
Comprehensible
Succinct and consider
Synthesized with contingency and clinical assessment
Internally consistent
Free from hallucinations
Free from bias
Readability

Results

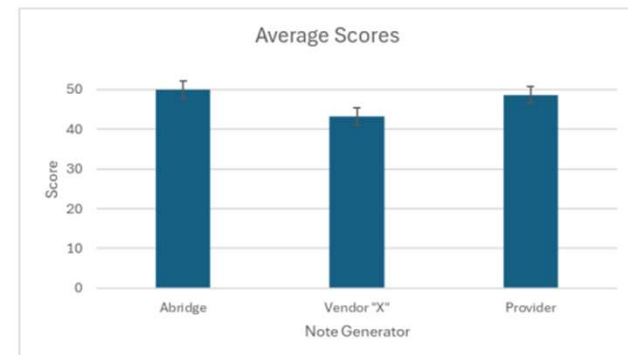
The means of the note scores from the provider-generated notes were compared to those of the AI-generated notes using a paired t-test.

Note Quality Results:

Training Set Results	Average Score	Standard Deviation
Abridge-generated	49.0	2.21
Provider-generated	49.4	3.53

Note Generator	Average Score	Standard Deviation
Abridge	50.0	2.16
Vendor "X"	43.2	2.20
Provider	48.6	2.06

Comparison	t-value	p-value
Abridge vs. Provider	1.48	0.16
Abridge vs. Vendor "X"	4.92	0.0008



Provider Outcomes: Burnout and Professional Fulfilment

Follow up of the initial 50 pilot participants

	Pre	8 week	4 month	1 Year	Change pre to 1 year (%)
Single Question Burnout Rate	69%	38%	24%	36%	-48%

Stanford Professional Fulfilment					
	Pre	8 week	4 month	1 Year	Change (%)
% Fulfilled	42%	57%	58%	58%	+ 38%

Security and Privacy

Core to what we do

- ▶ All IT Applications at UVM Health undergo a security and privacy assessment prior to contracting.
- ▶ Technology which involves artificial intelligence is assessed by our AI Council
- ▶ Contract language is closely reviewed to ensure patient privacy, security and data use.
- ▶ Recordings and Transcripts for ambient are retained for 30 days to allow for the editing process by the provider.
 - ▶ Abridge uses de-identified data for improvement of their system and can not utilize the data for any other purposes.

Questions before demonstration?

Ambient and Telehealth

HR-84

- ▶ Why: Under **18 V.S.A. § 9361 and § 9362**,
"Neither a health care provider nor a patient shall create or cause to be created a recording of a provider's telemedicine consultation with a patient."
 This applies to both **telemedicine (audio-video)** and **audio-only telephone consultations**. The prohibition was added ~ 2017
- ▶ The current statute precludes the use of Ambient in telehealth encounters if the provider or patient are in Vermont
- ▶ This creates additional documentation burden for telehealth visits and has been a frequent question from our physicians and APPs when they can use Ambient for these visit types.



Please Support H.84

Recorded Telehealth Appointments = Informed Patients + Content Clinicians

Allowing patients to consent to the recording of their telehealth appointment gives clinicians the ability to use HIPAA-regulated transcription tools, reducing the hours providers spend charting after their workday and decreasing burnout while improving care.

Why H.84 will improve both the patient and provider experience



57% of clinicians say the electronic health record (EHR) is a top source of burnout.



Research consistently shows that patients forget much of what they hear in medical appointments.



Many patients now use unregulated apps to record visits outside of HIPAA protections.



Patients agreed and strongly agreed that the ABRIDGE notes had few errors and were of high quality.

A pilot use of AI scribe technology (Abridge) by PCPs at UVM Health Network studied in August 2024 showed a 48% reduction in burnout and a 38% increase in professional satisfaction.

“This pilot has removed so much documentation burden that I can focus on other work and feel excited – rather than overwhelmed – to see patients. It’s made my days better.”

“I typically stay late on Friday nights. With Abridge, I have left at 5pm on Friday nights and most nights of the week. This is incredible. And the notes are so well written and easy to understand for the patient and for other clinical staff. Please do not take it away!”



When secure, patient-consented recordings are permitted, clinical documentation can be streamlined and strengthened. When providers no longer need to capture every detail in real time, they can focus better on the patient in front of them, improving communication and strengthening trust, leading to better outcomes.



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