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Dickinson Law

Ethical & Legal Considerations for Biomedical AI

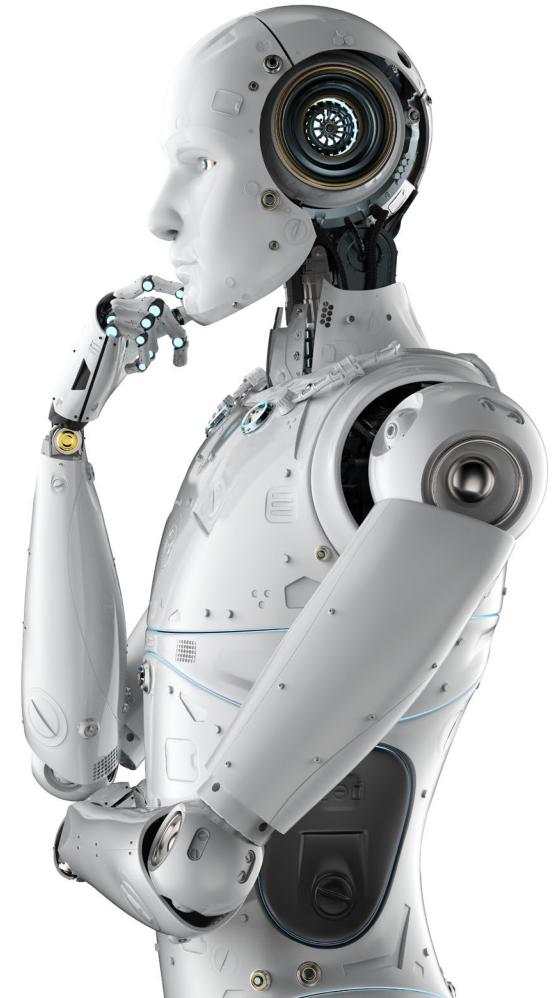
BMI 702 – April 18, 2024

Sara Gerke

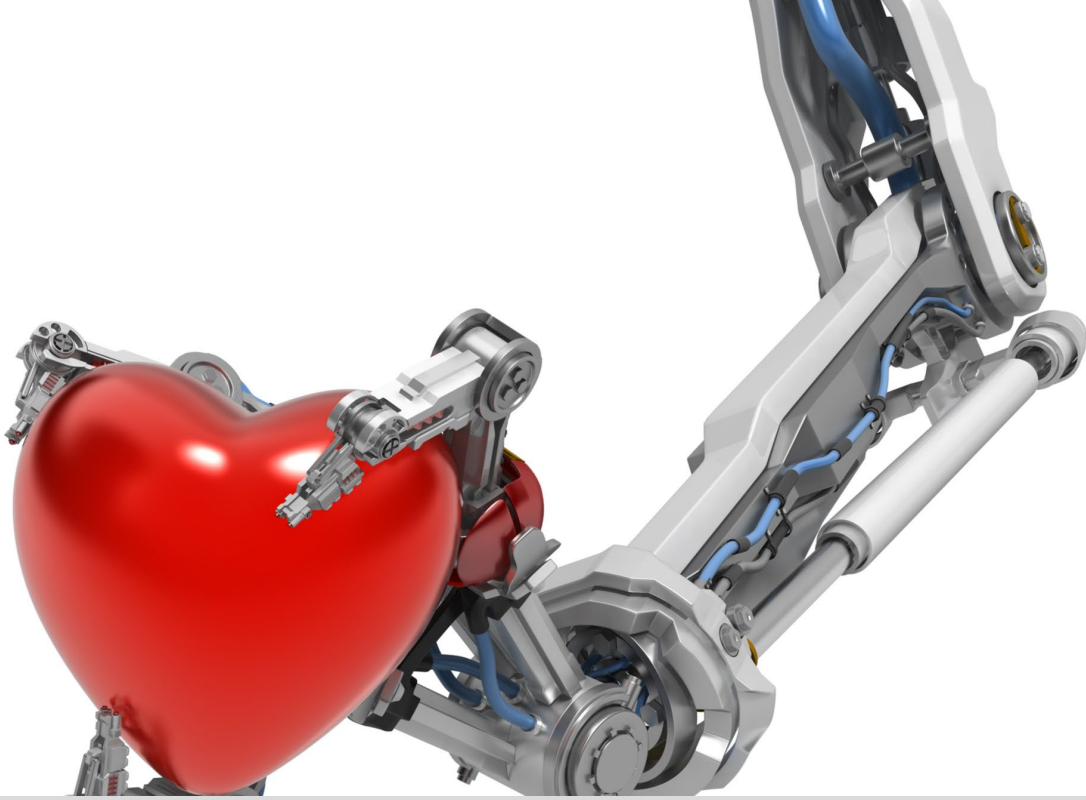
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Outline

- Ethical Frameworks
- Data Privacy
- Regulation of AI/ML
- Liability



Ethical Frameworks



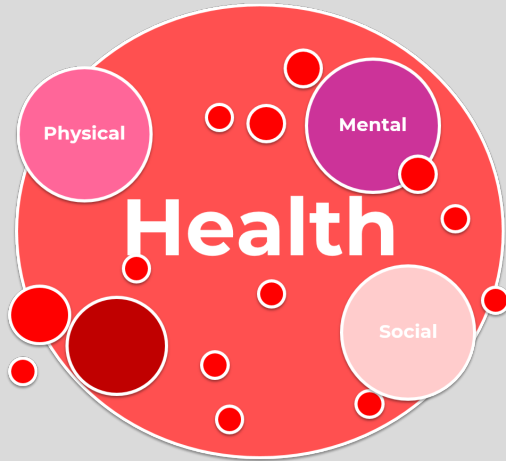
1.

What Is Health AI Ethics?

Health AI Ethics

Application and analysis of ethics to contexts in health in which AI is involved

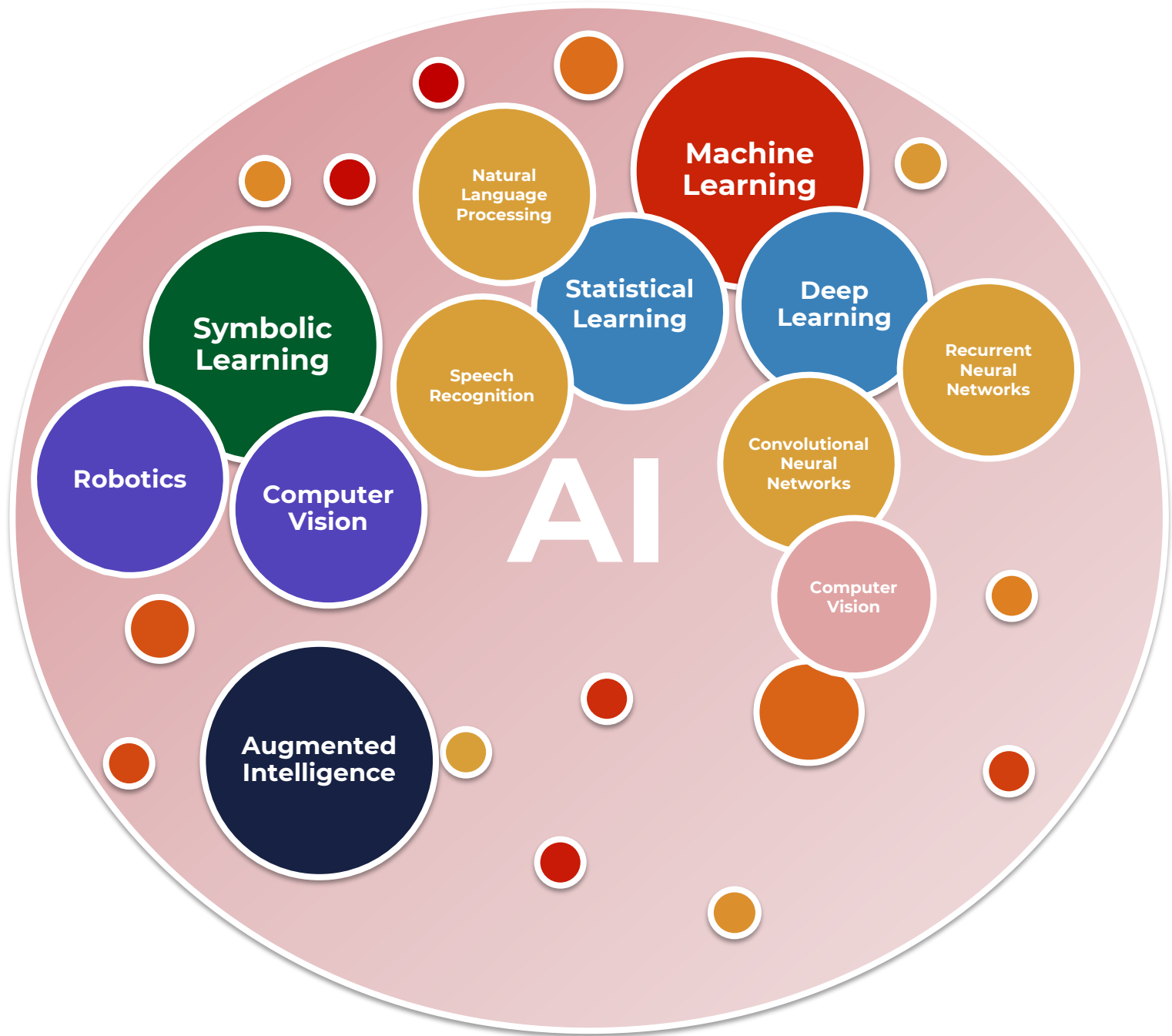




A state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.

World Health Organization. Constitution.

<https://www.who.int/about/governance/constitution>.



Ethics

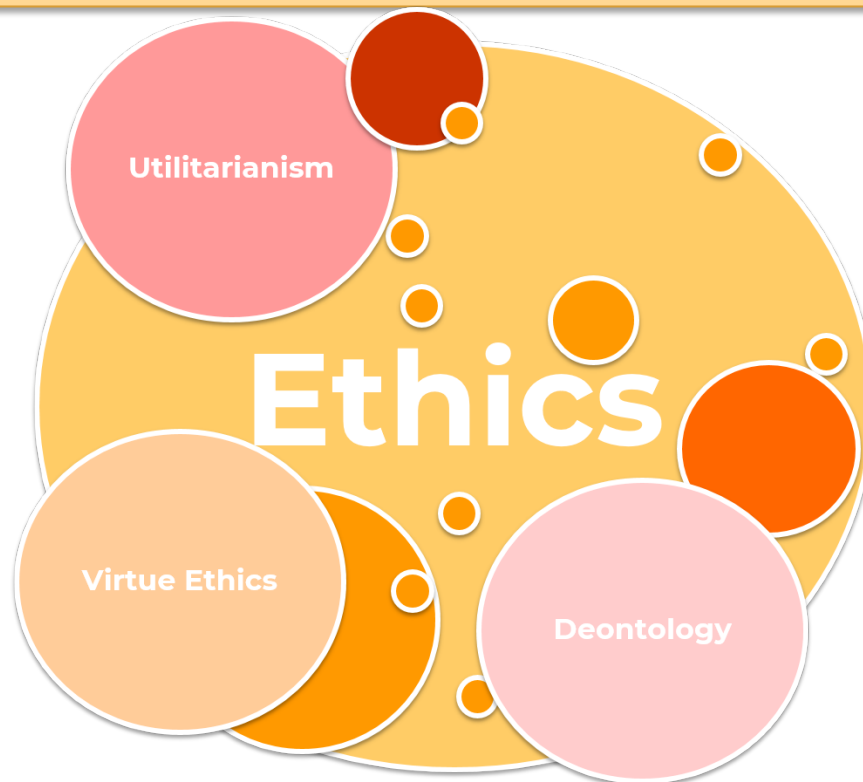
Normative Ethics

Metaethics

Applied Ethics

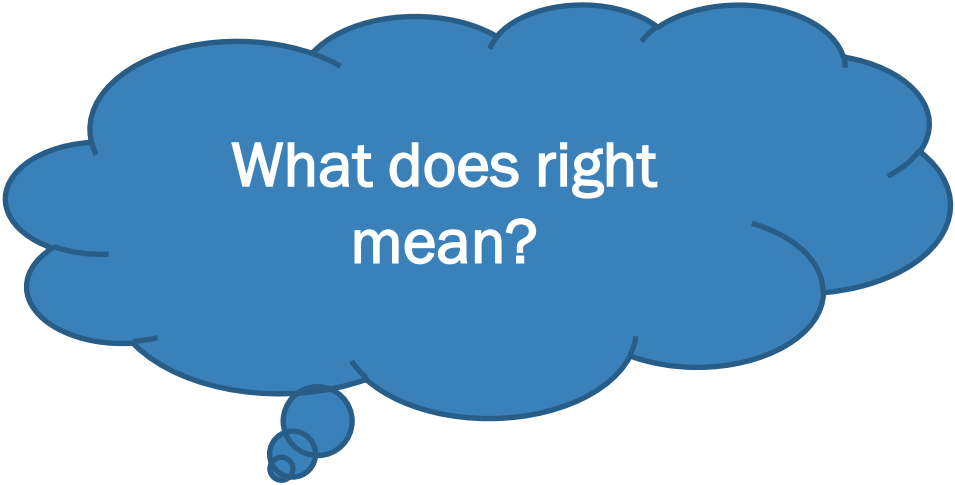
Normative Ethics

- Tries to answer questions about the right way to act.



Metaethics

- Addresses questions about the nature of right and wrong



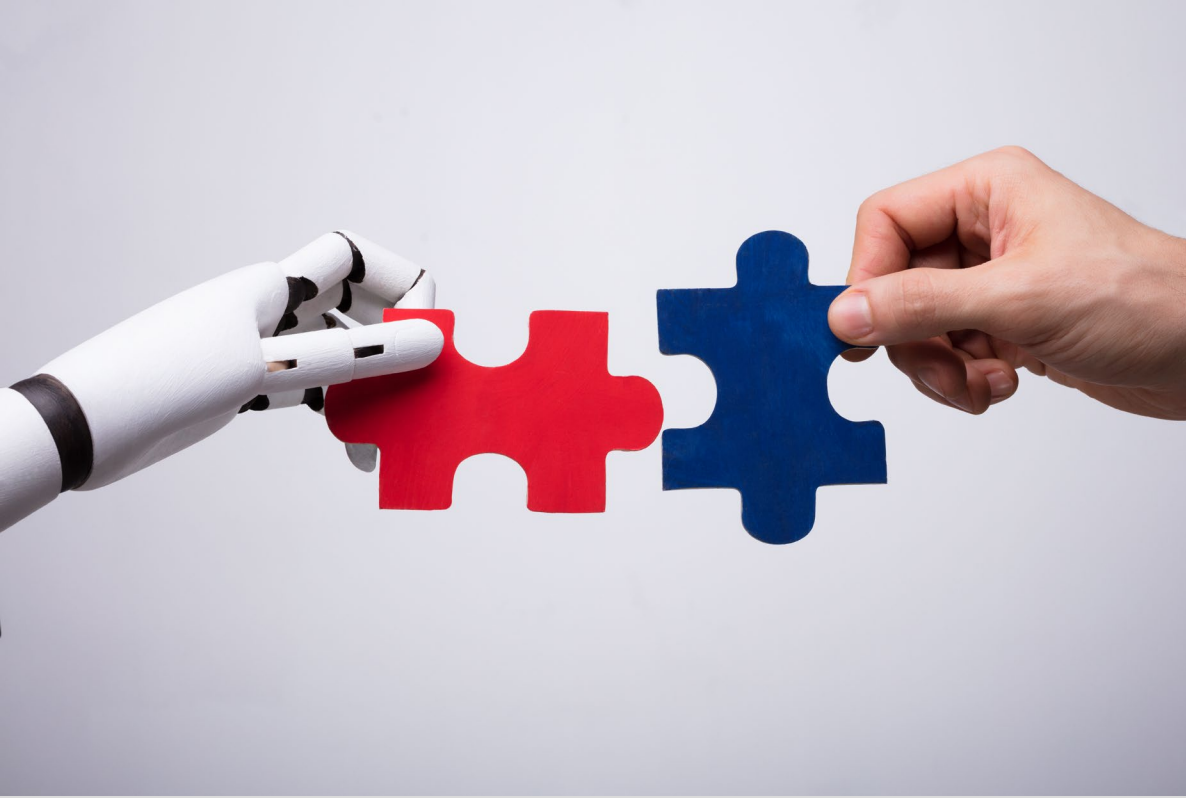
What does right mean?

Applied Ethics

- Deals with applying ethical theories or principles to specific, real-life issues

Principles of Biomedical Ethics by
James F. Childress and Tom L.
Beauchamp

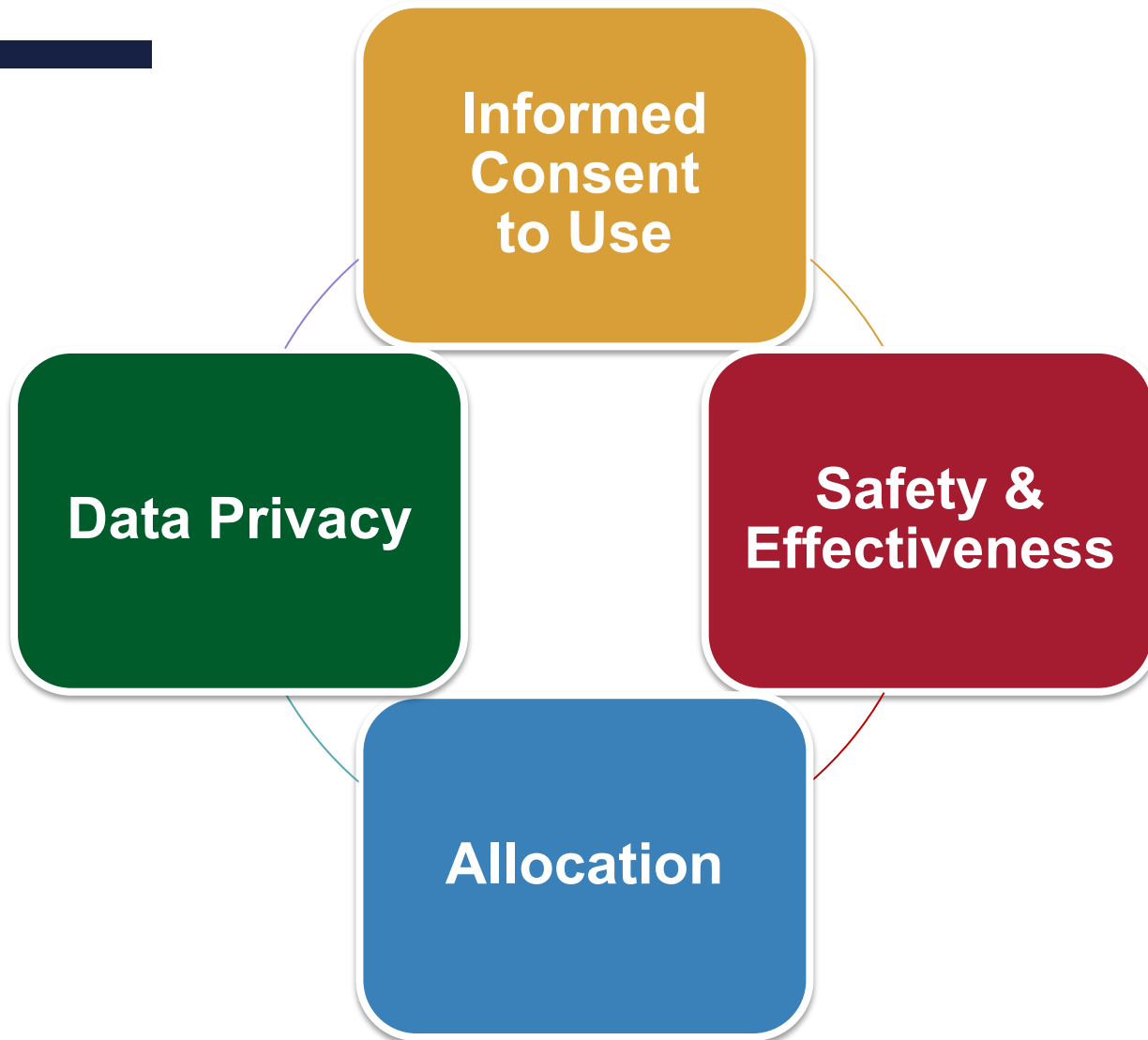




2.

Ethical Issues

Ethical Issues



Informed Consent to Use



Need to examine under what circumstances (if at all) the **principles of informed consent** should be deployed in the clinical AI space.



Especially challenging to answer in cases where the AI operates using “**black-box**” algorithms.



Health AI apps & chatbots raise questions about **user agreements** & their relationship to informed consent.

**Safety &
Effectiveness**

**Reliability &
Validity of the
Data Sets &
Algorithms**

**Some Amount of
Transparency**

Safety & Effectiveness



**Reliability & Validity
of the Data Sets &
Algorithms**

Training Data

Algorithmic

Contextual

Unconscious



Ethics by Design

Sara Gerke, Timo Minssen & I. Glenn Cohen, *Ethical and Legal Challenges of Artificial Intelligence-Driven Healthcare*, in *Artificial Intelligence in Healthcare* 295 (Adam Bohr & Kaveh Memarzadeh eds., Elsevier 2020).

Timo Minssen, Sara Gerke, Mateo Aboy, Nicholson Price & I. Glenn Cohen, *Regulatory Responses to Medical Machine Learning*, *J. L. BIOSCI. Isaa002* (2020).

Gali Katznelson & Sara Gerke, *The Need for Health AI Ethics in Medical School Education*, *Advances in Health Sciences Education* 26, 1447–1458 (2021).

Sara Gerke, Timo Minssen, Helen Yu & I. Glenn Cohen, *Ethical and Legal Issues of Ingestible Electronic Sensors*, *2 NATURE ELECTRON.* 329 (2019).

Safety & Effectiveness

Some Amount of Transparency

E.g., shortcomings of the software



Trust



Allocation



SCIENCE

WHAT HAPPENS WHEN AN ALGORITHM CUTS YOUR HEALTH CARE

By [Colin Lecher](#) | [@colinlecher](#) | Mar 21, 2018, 9:00am EDT

Illustrations by [William Joel](#); Photography by [Amelia Holowaty Krales](#)

   SHARE



or most of her life, Tammy Dobbs, who has cerebral palsy, relied on her family in Missouri for care. But in 2008, she moved to Arkansas,

Photo Credit: <https://www.theverge.com/2018/3/21/17144260/healthcare-medicaid-algorithm-arkansas-cerebral-palsy>

Case Problem

The Patient With Diabetes

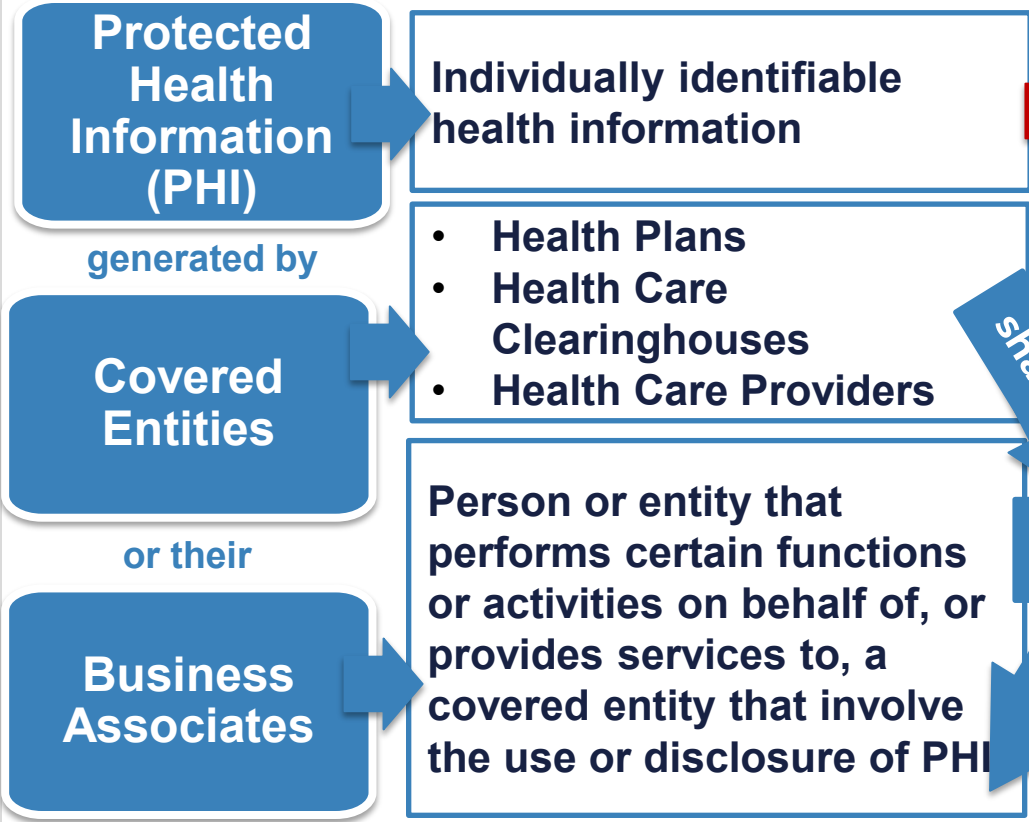
Data Privacy



Health Insurance Portability and Accountability Act

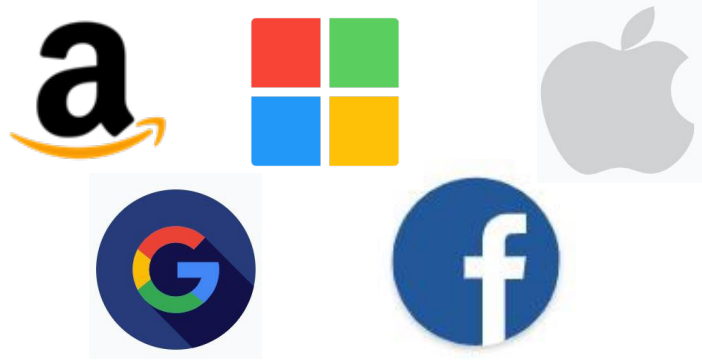


Data Triangulation



De-Identified Health Information
e.g., removal of 18 identifiers

Health Information Generated by Entities Not Covered by HIPAA



Data Privacy



**New Legal
Developments
to Protect
Privacy**



- Has been applied since **25 May 2018** in all **EU Member States**
- **Protects fundamental rights and freedoms of natural persons** and in particular their **right to the protection of personal data** (Art. 1(2))
- **Broad material & territorial scope** (Arts. 2, 3)
 - **Impact on U.S. entities** (e.g., processing activities are related to the offering of goods or services to data subjects in the EU)

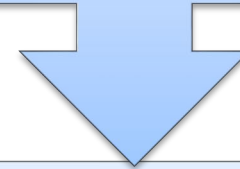
Data Privacy



New Legal
Developments
to Protect
Privacy in the
U.S.



Became effective on **January 1, 2020**



Grants various rights to California residents with regard to personal information that is held by businesses

Case Problem

The Patient With Diabetes – Part 2

Regulation of AI/ML

Regulation of AI/ML

Medical Device Definition, FDCA Section 201(h)(1)

(...) an instrument, apparatus, implement, machine, contrivance, implant, in vitro reagent, or other similar or related article, including any component, part, or accessory, which is—

(A) recognized in the official National Formulary, or the United States Pharmacopeia, or any supplement to them,

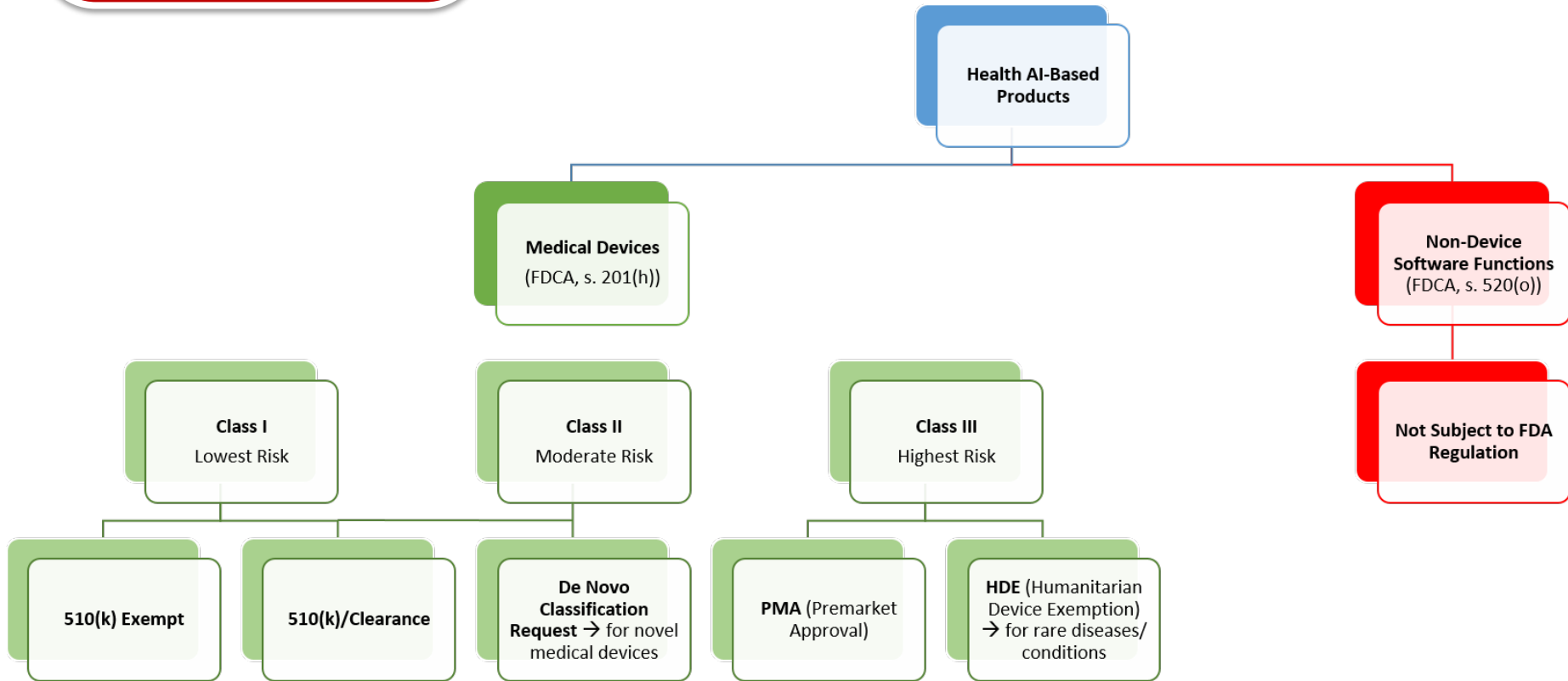
(B) intended for use in the diagnosis of disease or other conditions, or in the cure, mitigation, treatment, or prevention of disease, in man or other animals,
or

(C) intended to affect the structure or any function of the body of man or other animals, and

which does not achieve its primary intended purposes through chemical action within or on the body of man or other animals and which is not dependent upon being metabolized for the achievement of its primary intended purposes. The term “device” does not include software functions excluded pursuant to section 520(o).

Regulation of AI/ML

Regulatory Pathways



Adapted from Sara Gerke et al., *Regulatory, Safety, and Privacy Concerns of Home Monitoring Technologies During COVID-19*, 26 NATURE MED. 1176 (2020).

Regulation of AI/ML

Non-Device Software Functions, FDCA Section 520(o)

1. For administrative support of a health care facility

2. For maintaining or encouraging a healthy lifestyle

3. To serve as electronic patient records

**4. For transferring, storing, converting formats, or displaying
clinical laboratory test or other device data and results**

5. To support certain clinical decisions

Regulation of AI/ML



Update Problem

AI/ML-Based SaMD

(Artificial Intelligence/Machine Learning-Based Software as a Medical Device)



Software intended to be used for **one or more medical purposes** that perform these purposes **without being part of a hardware medical device.**



Those purposes that are **intended to treat, diagnose, cure, mitigate, or prevent disease or other conditions.**



Regulation of AI/ML



Update Problem

“Locked” Algorithm



“Adaptive” Algorithm



An algorithm that provides **the same result** each time **the same input** is applied to it and **does not change with use.**

An algorithm that **may change** as it is **applied to new data.**

FDA (2019) Proposed Regulatory Framework for Modifications to Artificial Intelligence/Machine Learning (AI/ML)-Based Software as a Medical Device (SaMD), <https://www.fda.gov/media/122535/download>.

Regulation of AI/ML



Update Problem



Proposed Regulatory Framework for Modifications to Artificial Intelligence/Machine Learning (AI/ML)-Based Software as a Medical Device (SaMD)

Discussion Paper and Request for Feedback



Photo Credit: <https://www.fda.gov/media/122535/download>

Total Product Lifecycle (TPLC) Regulatory Approach



Predetermined Change Control Plan



Continuous Risk Monitoring



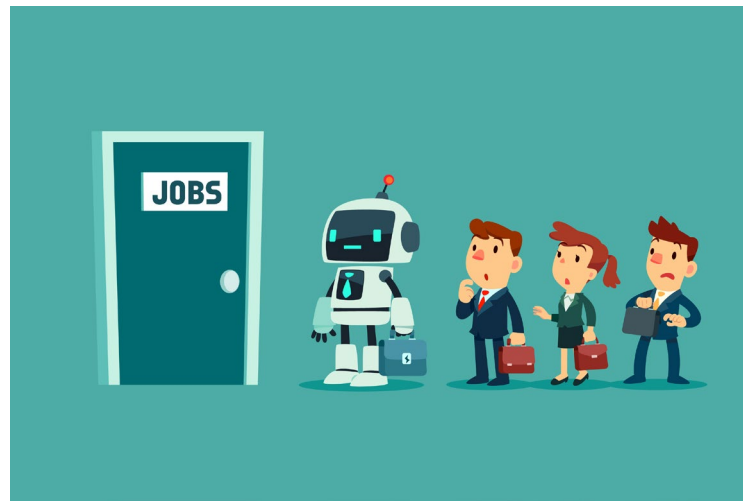
Focus on new risks due to AI/ML characteristics.

**Regulation of
AI/ML**



System View

- Regulators like the FDA need to **widen their scope** from evaluating medical AI/ML-based products to **assessing systems**.



Regulation of AI/ML

The FDA's New Action Plan



Further developing the proposed regulatory framework, including issuing draft guidance on a predetermined change control plan

Supporting the development of **good machine learning practices** to evaluate and improve machine learning algorithms

Fostering a **patient-centered approach**, including device transparency to users

Developing methods to **evaluate and improve machine learning algorithms**; and

Advancing **real-world performance monitoring** pilots.

Regulation of AI/ML



Predetermined Change Control Plans for Machine Learning-Enabled Medical Devices: Guiding Principles

October 2023

In 2021, the U.S. Food and Drug Administration (FDA), Health Canada, and the U.K.'s Medicines and Healthcare products Regulatory Agency (MHRA) jointly identified [10 guiding principles](#) that can inform the development of Good Machine Learning Practice (GMLP). GMLP supports the development of safe, effective, and high-quality artificial intelligence/machine learning technologies that can learn from real-world use and, in some cases, improve device performance.

In this document, FDA, Health Canada, and MHRA jointly identified 5 guiding principles for predetermined change control plans. These principles draw upon the overarching GMLP guiding principles, in particular principle 10, which states that deployed models are monitored for performance and re-training risks are managed.

Advancements in digital health technologies include [artificial intelligence/machine learning-enabled medical devices \(MLMD\)](#). Regulatory expectations that are aligned with best practices for development and change management, such as those described in the [GMLP Guiding Principles](#), can help to support the quality of such devices. Ultimately, this can lead to patient benefits such as earlier access to innovative technologies or more accurate diagnoses.

<https://www.fda.gov/medical-devices/software-medical-device-samd/predetermined-change-control-plans-machine-learning-enabled-medical-devices-guiding-principles>

Marketing Submission Recommendations for a Predetermined Change Control Plan for Artificial Intelligence/Machine Learning (AI/ML)-Enabled Device Software Functions

Draft Guidance for Industry and Food and Drug Administration Staff

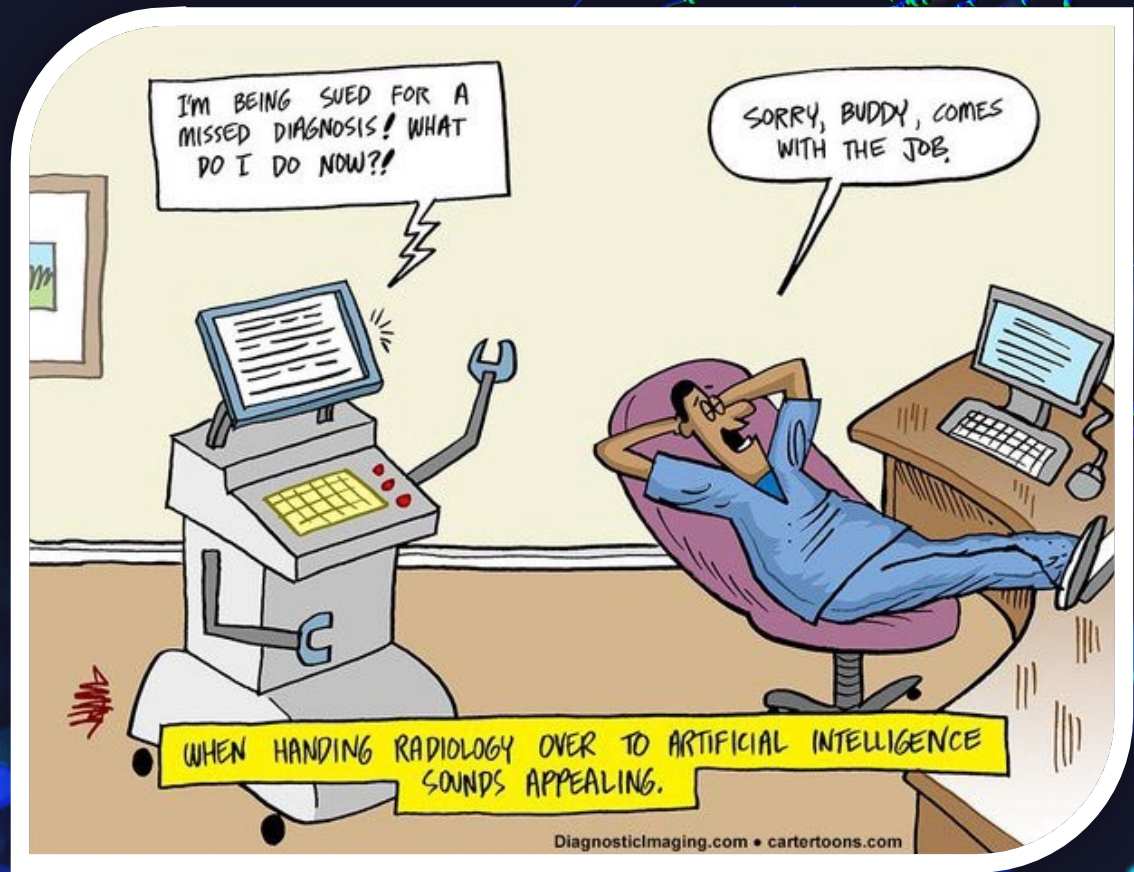
DRAFT GUIDANCE

This draft guidance document is being distributed for comment purposes
only.

Document issued on April 3, 2023.

<https://www.fda.gov/regulatory-information/search-fda-guidance-documents/marketing-submission-recommendations-predetermined-change-control-plan-artificial>

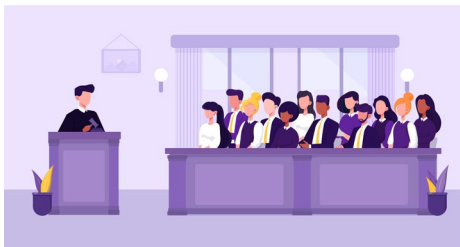
Liability



Examples of Potential Legal Outcomes Related to AI Use in Clinical Practice

Scenario	AI recommendation	AI accuracy	Physician action	Patient outcome	Legal outcome (probable)
1	Standard of care	Correct	Follows	Good	No injury and no liability
2			Rejects	Bad	Injury and liability
3		Incorrect (standard of care is incorrect)	Follows	Bad	Injury but no liability
4			Rejects	Good	No injury and no liability
5	Nonstandard care	Correct (standard of care is incorrect)	Follows	Good	No injury and no liability
6			Rejects	Bad	Injury but no liability
7		Incorrect	Follows	Bad	Injury and liability
8			Rejects	Good	No injury and no liability

W. Nicholson Price II, Sara Gerke & I. Glenn Cohen, *Potential Liability for Physicians Using Artificial Intelligence* 322 JAMA 1765 (2019).



W. Nicholson Price II, Sara Gerke & I. Glenn Cohen, *How Much Can Potential Jurors Tell Us about Liability for Medical Artificial Intelligence?*, 62 THE JOURNAL OF NUCLEAR MEDICINE 15 (2021).

Generative AI



VIEWPOINT

AI IN MEDICINE

Generative AI in Health Care and Liability Risks for Physicians and Safety Concerns for Patients

Mindy Duffourc, JD, BA
Project CLASSICA: Validating AI in Classifying Cancer in Real-Time Surgery, Penn State Dickinson Law, Carlisle, Pennsylvania.

Sara Gerke, Dipl-Jur Univ, MA
Penn State Dickinson Law, Carlisle, Pennsylvania.



Generative artificial intelligence (AI) is a quickly emerging subfield of AI that can be trained with large data sets to create realistic images, videos, text, sound, 3-dimensional models, virtual environments, and even drug compounds. It has gained more attention recently as chatbots such as OpenAI's ChatGPT or Google's Bard display impressive performance in understanding and generating natural language text. Generative AI is being heralded in the medical field for its potential to ease the long-lamented burden of medical documentation by generating visit notes, treatment codes, and medical summaries. Physicians and patients might also turn to generative AI to answer medical questions about symptoms, treatment recommendations, or potential diagnoses.¹ While these tools may improve patient care, the liability implications of using AI to generate health information are still in flux. To date, no court in the United States has considered the question of liability for medical injuries caused by relying on AI-generated informa-

The ability of black-box generative AI systems to provide users with quick health-related information raises the question of whether, and if so how, health care professionals, such as physicians, and patients should use this technology. To answer this question, it is important to understand the potential liability risks for physicians using generative AI in health care and the risks for patients seeking medical advice from such tools.

Liability Risks for Physicians Using Generative AI Crucially, no generative AI systems, including ChatGPT and Bard, have been reviewed by the US Food and Drug Administration (FDA) so far. These systems could trigger FDA review if they are "intended for use in the diagnosis of disease or other conditions, or in the cure, mitigation, treatment, or prevention of disease" and do not fall under a medical device exception laid out in the Federal Food, Drug, and Cosmetic Act (see sections 201[h][1] and 520[o]).³ It currently appears that while ChatGPT

ferential diagnoses in response if symptoms, it also warns users medical professional. But what if is a medical professional? Can I assist them in making medical s? :nAI's terms of use warn that I can "result in incorrect [o]t does not accurately reflect real places, or facts."⁴ ChatGPT also tat "it can occasionally produce t answers...and may also occa- produce harmful instructions or - - - - - 5 Additionally, ChatGPT

You
Are you a medical device?



ChatGPT

No, I'm not a medical device. I'm an AI language model created by OpenAI, designed to assist with information retrieval, conversation, and various tasks like text generation and answering questions.



<https://chat.openai.com/> (generated on April 14, 2024); Mindy Duffourc & Sara Gerke, [Generative AI in Health Care and Liability Risks for Physicians and Safety Concerns for Patients](#), 330 JAMA 313 (2023).

Ecosystem of Liability



- Physicians
- Hospital Systems
- AI Makers
- Payers

W. Nicholson Price II, Sara Gerke & I. Glenn Cohen, *Potential Liability for Physicians Using Artificial Intelligence* 322 JAMA 1765 (2019).

Recent Developments in the EU



Brussels, 28.9.2022
COM(2022) 496 final
2022/0303 (COD)

Proposal for a

DIRECTIVE OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL

**on adapting non-contractual civil liability rules to artificial intelligence
(AI Liability Directive)**

(Text with EEA relevance)

{SEC(2022) 344 final} - {SWD(2022) 318 final} - {SWD(2022) 319 final} -
{SWD(2022) 320 final}

https://commission.europa.eu/system/files/2022-09/1_1_197605_prop_dir_ai_en.pdf



Brussels, 28.9.2022
COM(2022) 495 final
2022/0302 (COD)

Proposal for a

DIRECTIVE OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL

on liability for defective products

(Text with EEA relevance)

{SEC(2022) 343 final} - {SWD(2022) 315 final} - {SWD(2022) 316 final} -
{SWD(2022) 317 final}

https://single-market-economy.ec.europa.eu/system/files/2022-09/COM_2022_495_1_EN_ACT_part1_v6.pdf

Recent Developments in the EU

Decoding U.S. Tort Liability in Healthcare's Black-Box AI Era: Lessons from the European Union

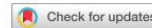
Mindy Duffourc* & Sara Gerke**

npj | digital medicine

www.nature.com/npjdigitalmed

27 STAN. TECH. L. REV. 1 (2024)

PERSPECTIVE OPEN



The proposed EU Directives for AI liability leave worrying gaps likely to impact medical AI

Mindy Nunez Duffourc^{1,2} and Sara Gerke^{1✉}

Two newly proposed Directives impact liability for artificial intelligence in the EU: a Product Liability Directive (PLD) and an AI Liability Directive (AILD). While these proposed Directives provide some uniform liability rules for AI-caused harm, they fail to fully accomplish the EU's goal of providing clarity and uniformity for liability for injuries caused by AI-driven goods and services. Instead, the Directives leave potential liability gaps for injuries caused by some black-box medical AI systems, which use opaque and complex reasoning to provide medical decisions and/or recommendations. Patients may not be able to successfully sue manufacturers or healthcare providers for some injuries caused by these black-box medical AI systems under either EU Member States' strict or fault-based liability laws. Since the proposed Directives fail to address these potential liability gaps, manufacturers and healthcare providers may have difficulty predicting liability risks associated with creating and/or using some potentially beneficial black-box medical AI systems.

npj Digital Medicine (2023)6:77; <https://doi.org/10.1038/s41746-023-00823-w>

<https://www.nature.com/articles/s41746-023-00823-w>

ABSTRACT

Development of sophisticated artificial intelligence (“AI”) tools in healthcare opens new possibilities for improving medical treatment and diagnosis. However, currently, such AI tools can perform a wide range of health-related tasks, including specialized autonomous systems that diagnose diabetic retinopathy and generative models like ChatGPT that answer users’ questions. On the other hand, significant liability concerns arise

https://papers.ssrn.com/sol3/papers.cfm?abstract_id=4569698



Thanks!



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