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Existing Regulatory Frameworks for AI Systems in Health and Foreseen Gaps

July 2025 | Manila, Philippines

Dr. Ricardo Baptista Leite, M.D.

CEO | Health AI - The Global Agency for Responsible AI in Health

Founder & President | UNITE Parliamentarians Network for Global Health

Chair | Harvard-Charité Global Health Policy Lab

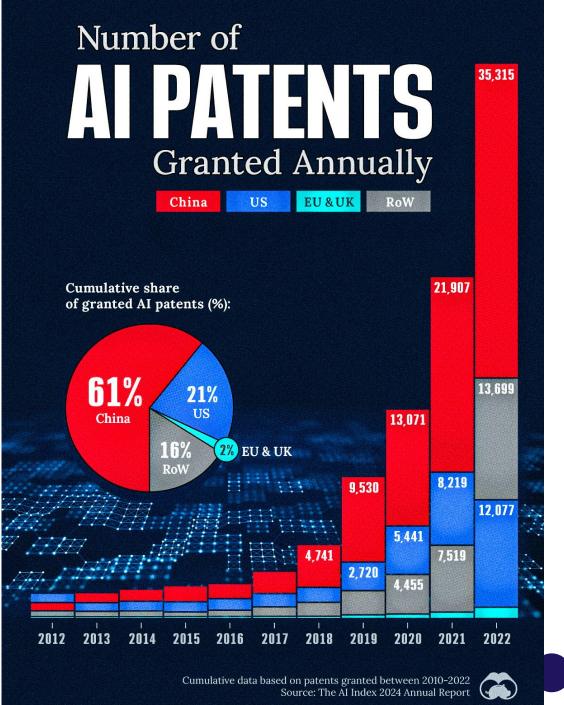
Chair | NOVA Center for Global Health

City Council of Sintra | Former 4-term Member of Parliament (Portugal) | Former Deputy Mayor of Cascais ricardo.baptistaleite@healthai.agency | @RBaptistaLeite

Insights and Forecasts of Patents for Al and ML

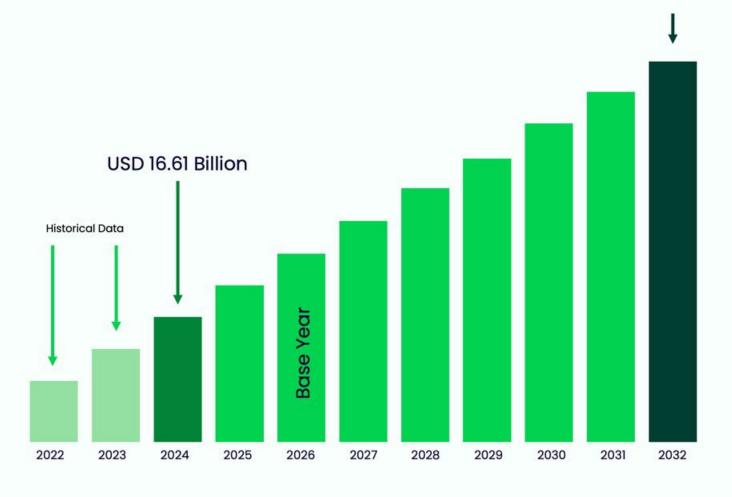
 Total number of published patents doubled yearly from 2015 to 2022

Source: The Al Index 2024 Annual Report



Global Ai in Healthcare Market







USD 421.18 Billion

Al in Healthcare: Market Trends

Private investment in AI by country
Total for the years 2013 to 2022, in billions of US Dollars







Why use Artificial Intelligence?

'5 Commandments of Health Management'If you're not doing one of the following, what are you doing?

PREVENT

CURE

Efficiency

MANAGE

MINIMIZE



Rising Healthcare Costs and Rising Burden of Disease

vernment health expenditure as a share of GDP, 1920 to 2021

Our World in Data

captures spending on government funded health care systems and social health insurance, as well as alth insurance.



Risks of Unsustainability



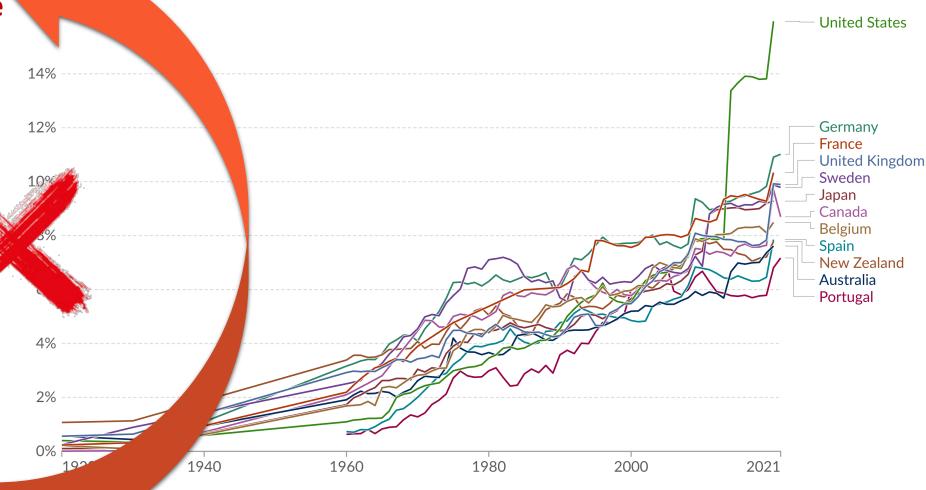
Universal Health Coverage



Worse health - mainly for most vulnerable populations

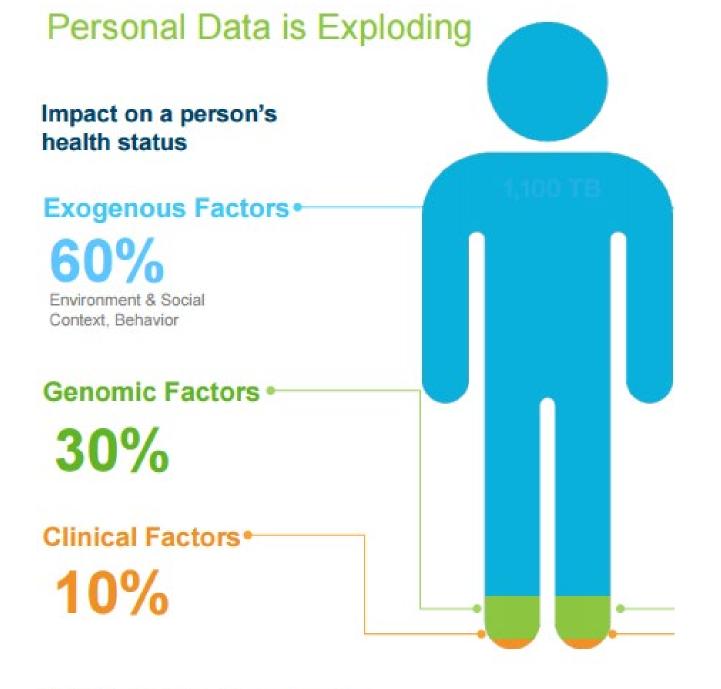


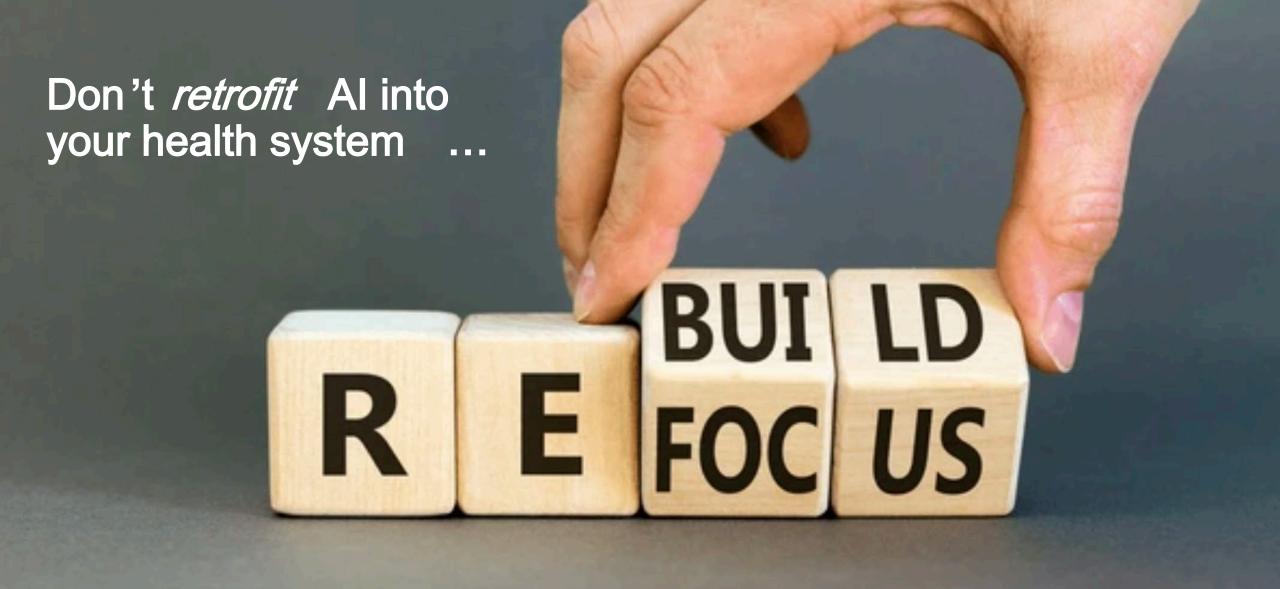
Rise of inequalities and poverty



World In Data based on Lindert (1994), OECD (1993), OECD Stat OurWorldinData.org/financing-healthcare | CC BY an spending includes final consumption of health care goods and services (i.e. current health expenditure). This excludes and services (i.e. current health expenditure). This excludes are goods and services (i.e. current health expenditure). This excludes are goods and services (i.e. current health expenditure).







Al across the Health Value Chain

Research & Development Manufacturing & Distribution

Population Health & Delivery of Care Post - Care & Monitoring Admin & Info Management



Drug Discovery:

Accelerates candidate identification

Clinical Trials: Optimizes trial design

Genomic Sequencing: Speeds analysis of genetic data

Virtual Patient Simulations: Reduces need for early - stage human trials

Systems Medicine: Designs complex therapies



Supply Chain

Optimization: Reduces waste, improves delivery

Quality Control: Ensures product safety at scale

Inventory Management: Optimizes stock levels

Autonomous Manufacturing: **Enhances** efficiency, reduces error

Predictive Maintenance for Equipment: Minimizes downtime



Diagnostic Assistance:

Improves accuracy of diagnostics

Treatment Personalization: Tailors treatment plans

Robotic Surgery: Aids in precise surgeries

Remote Surgery: Expands access to expert surgical care

Real - Time Population & Patient Monitoring: Identifies, anticipates and prevents threats, diseases and complications



Remote Monitoring: Monitors patient health remotely

Rehabilitative Al Tools: Provides feedback during rehabilitation

Predictive Risk Modeling: Aids preventative care efforts

Personal Health Assistants: Offers personalized health management

Mental Health Interventions: Provides real - time therapy support



Billing & Claims Processing: Automates administrative

tasks

Patient Data Management: Improves data security and compliance

Resource Allocation: Optimizes use of healthcare resources

Al-driven Policy & Compliance: Suggests efficiency improving policies and semi - automates compliance

Fraud Detection: Detects and prevents fraudulent activities



Prim a ry Be n e fit:



The 'Duality' of AI in Healthcare

- An existing ecosystem of standards and guidelines

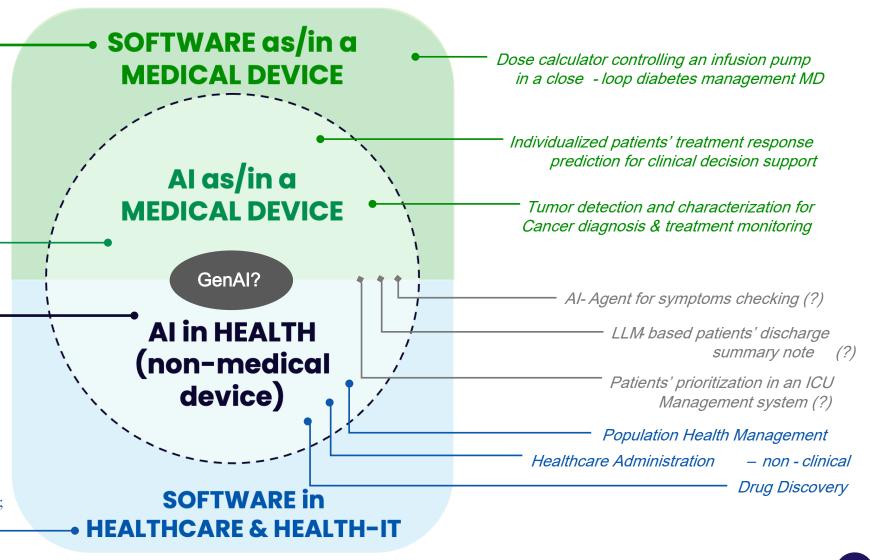
and regional regulations

MD Regulators / IMDRF

- Standards and Guidance for Medical Devices risk, quality, and product lifecycle management, as well as clinical evaluation
- Standards and Guidance specific to AI-enabled Medical Devices

OECD/WHO/ITU -AI4H

- ISO & CTA standards dedicated to Al management system, cybersecurity of Al systems, and their use in healthcare
- ISO standards for the general use of software in healthcare; in form a tion security, cybersecurity, and protection; and device interoperability









United States of America

- FDA has harmonized its regulatory framework for SaMD with IMDRF guidelines while taking US legislation and context into account.
- Since 2019, FDA has put forth:
 - Regulatory considerations for AI/ML-SaMD
 - Good ML Practice for Medical Device Development (jointly published with Health Canada and UK MHRA)
 - Predetermined change control plans where during pre-market clearance, manufacturers could provide details on predicted planned modifications
 - Dec 2024: FDA released the final marketing submission recommendations for a PCCP for AIenabled device software functions
 - Ensuring transparency for AI/ML-SaMD
- Currently, no other wider AI legislation in place that would apply to the health sector
 - President's Executive Order on Safe, Secure and Trustworthy AI (emphasizes the creation of new standards for AI safety and security) – Revoked by President Trump





European Union

Area of Consideration	Interplay between EU AI Act and EU MDRs
Risk classification	Both adopt a risk-based approach but apply different classification criteria: MDRs use specific medical-related criteria based on intended use and potential risk of harm to users while AI Act employs broader criteria that considers the impact of the AI systems on fundamental rights and safety. AI/ML-SaMD that fall under risk classes IIa, IIb or III under the MDRs are automatically classified as high risk AI systems under the AI Act.
Regulatory target	MDRs regulate medical devices as a whole, including AI/ML-SaMD, while the AI Act specifically targets the AI component within those devices.
Regulatory requirements	There are overlaps between both legislation in areas like risk management, technical documentation and post-market surveillance. However, clinical evaluation is mandated under the MDRs, while the AI act has additional requirements with regards to data governance, human oversight, transparency, accuracy, robustness and cybersecurity.
Conformity assessment	The AI Act aims to integrate its conformity assessment procedures with the MDRs, allowing for a single assessment by NB authorized for both legislations. In terms of technical documentation, a single set of documentation for both legislation is permitted.





- MHRA has established the «Software and Al as a Medical Device Change Programme» in 2021.
- UK Regulatory Horizons Council published «The Regulation of AI as a Medical Device» in November 2022, complementing MHRA's efforts.
- In May 2024, MHRA launched a pilot regulatory sandbox (Al-Airlock for AlaMD).
- With regards to broader Al legislation, UK government issued a white paper «A proinnovation approach to Al regulation» in 2023
 - Highlighted UK's sector-specific regulatory approach to AI, instead of a cross-sectoral one.
- In July 2024, new UK government outlined plans for AI regulation
 - King's speech: Government (will seek to establish the appropriate legislation to place requirements on those working to develop the most powerful AI models.)





People's Republic of China

- Since 2019, CMDE under NMPA has released several important regulatory guidelines:
 - Elements for the review of deep learning-assisted decision-making software for medical devices
 - Guiding principles for defining classification of AI medical software products
 - Guidelines for the review of AI medical device registrations
 - Latest guidelines outlined standards for quality management systems covering the total product lifecycle
 - Considerations on cyber- and data security and human factors design to improve usability.
- In terms of horizontal AI legislation, the Cyberspace Administration of China, along with 6
 other Chinese regulators issued the "Interim Measures for the Mangement of Generative AI
 Services".
 - In effect since 15 August 2023 and apply to medical applications
 - Introduced a "classified and graded" regulatory approach but specific classifications yet to be released
 - Strong emphasis on balancing innovation and security



Regulatory Challenges for AI in Healthcare





Trust



3 HEALTH A

The Global Agency for Responsible AI in Health



HealthAl Summary

HealthAI serves as a bridge between normative bodies and national and regional regulatory bodies to strengthen capacity and provide qualification of members of our Global Regulatory Network.

Normative Bodies

Set global standards



Regulatory BodiesValidate Al solutions



Promotes recognized
Standards and
Guidance



Builds Capacity



Qualifies members of our GRN

Facilitates and Stewards

Community of Practice

Global Regulatory Network

Global Public Repository of validated Al solutions for health

HealthAI DOES NOT validate AI tools for health systems

HealthAI DOES NOT define standards





Global Governance Forum



HealthAl
Community of
Practice

Join Now V



02 December, 2025 Nairobi, Kenya

HealthAl Team





Dr. Peiling Yap
CHIEF SCIENTIST



Dr.Sc. Alberto-Giovanni Busetto CHIEF AI OFFICER



Silvana Lisca CHIEF OPERATING & PEOPLE OFFICER



Dr. Paul Campbell CHIEF REGULATORY OFFICER





Amanda Leal
AI GOVERNANCE &
POLICY SPECIALIST



Irene Rey Landeira PROJECT COORDINATOR



Stéphane Dupré HEAD OF COMMUNICATION



IMPACT MANAGER



Rado Andrian HEAD OF GLOBAL AI PROGRAMS



Quentin Brown ADMINISTRATIVE ASSISTANT





Yi-Roe Tan COUNTRY IMPLEMENTATION MANAGER



Robin Eede
FINANCE MANAGER



Léa Ferré FUNDRAISING & PARTNERSHIPS ASSISTANT



Jhon Magkilat KNOWLEDGE & TRAINING ADVISOR



Antoine Bourrier PRODUCT OWNER GLOBAL PORTAL



Nadia Masarelli HR GENERALIST



Thank you

https://www.healthai.agency/

ricardo.baptistaleite@healthai.agency

