



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

ARTIFICIAL INTELLIGENCE (AI) STRATEGY



We are making HHS
the template for the

UTILIZATION OF AI

– Health and Human Services
Secretary Robert F. Kennedy, Jr.



ARTIFICIAL INTELLIGENCE (AI) STRATEGY

Department of Health and Human Services

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ARTIFICIAL INTELLIGENCE (AI) STRATEGY

Department of Health and Human Services

Introductory Letter from the Deputy Secretary

Artificial Intelligence (AI) is the most transformative technology of the twenty-first century; it is beginning to improve science, health care, business, and government. The United States is committed to supporting and encouraging this transformation.

Here at HHS, we're all in. For too long, our Department has been bogged down by bureaucracy and busy-work; even the most productive public servants are mired in paperwork and process. Across our mission space – from research, to health care delivery, to public health – we've layered administrative red tape on innovators. It is time to tear down these barriers to progress and unite in our use of technology to Make America Healthy Again. We will harness AI technologies to streamline operations and enhance support for care delivery throughout the entire health care industry. We call it OneHHS.

In his AI Action Plan, the President called on agencies to ensure that “all employees whose work could benefit from access to frontier models have access to, and appropriate training for, such tools.” Following the President’s direction, our Chief Information Officer and I made ChatGPT available to everyone in the Department. We led the federal government in this effort, but this is just the beginning.

We are working as one to accelerate AI innovation to ensure Americans live robust lives, free from the burden of chronic illness. We will use AI to supercharge rigorous science and expand access to shared tools and data, accelerating drug and biologic approvals at the FDA, claim adjudication at CMS, and grant review throughout the department. We will also provide our workforce with the tools necessary to advance with these technologies and ensure transparency with citizens. Wherever possible, and while upholding privacy and security, HHS will share how we are working towards a healthier America with AI.

We are excited to introduce version 1.0 of the HHS AI Strategy, which presents our vision for accelerating AI innovation across health care and human services delivery and supercharging internal operations through an AI-empowered workforce. AI is advancing faster than any technology we've ever seen, and we are committed to adapting our goals as paradigms shift to strengthen our nation's health and well-being.

By guiding innovation toward patient-focused outcomes, this administration has the potential to deliver historic wins for the public – wins that lead to longer, healthier lives.

JIM O'NEILL
Deputy Secretary of Health and Human Services



ARTIFICIAL INTELLIGENCE (AI) STRATEGY

Department of Health and Human Services

Introductory Letter from the HHS Chief AI Officer

Artificial Intelligence (AI) is transforming the landscape of health and human services, offering unprecedented opportunities to improve lives. At HHS, we will continue to advance the use of AI to address the nation's most pressing health challenges and to advance our mission of enhancing the well-being of all Americans.

HHS is driving AI innovation and adoption by the Federal workforce to maximize return on investment for the American public. HHS is providing AI tools that will augment and empower employees to support our mission. By establishing AI-enabling infrastructure we are streamlining processes and reducing inefficiencies. In parallel, we are training our workforce to use AI at all levels, to update workflows, and automate tedious tasks. We will better deliver health care and human services through this AI-equipped workforce.

We are also spurring American innovation with our partners in the private sector. HHS is driving reproducible research – supporting development of AI-enabled tools that accelerate breakthroughs in precision medicine, drug development, and public health. This paradigm shift will unleash a new era of well-being for a healthier America.

HHS is focused on bringing the many benefits of AI to health care and human services delivery. We are equally committed to ensuring that AI-use is secure and appropriate. To maintain your trust, HHS is committed to the highest standards of transparency and accountability around how, when, and why we deploy AI. Together, we can harness the transformative power of this technology to build a healthier future for all.

CLARK MINOR

Chief Information Officer, Acting Chief Artificial Intelligence Officer
Health and Human Services

EXECUTIVE SUMMARY

The U.S. Department of Health and Human Services (HHS) will lead a whole-of-department transformation to make Artificial Intelligence (AI) a practical layer of value to improve public health, health care delivery, biomedical research, human services, and agency operations. First, the Strategy focuses on strengthening governance, risk management, and public trust through clear roles, comprehensive inventories of AI use cases, transparent risk-management practices, and respect for Americans' rights to their health information. Second, it will spur development of a OneHHS AI-integrated Commons that provides shared data resources (where legally permissible), computing power, models, and testbed environments to Divisions within the Department, enabling rapid and reusable AI innovation at lower cost. Third, it will equip the HHS workforce with the necessary skills and fit-for-purpose AI tools to reduce administrative burdens and increase mission impact. Fourth, it seeks to accelerate research, translation, and reproducibility by embedding the principles of Gold-Standard Science¹ into AI development and deployment. Finally, it aims to support an outcomes-first approach to integrating AI to modernize care and public health infrastructure to improve health at the individual and population levels. Each pillar of this Strategy includes specific goals and potential metrics to track progress.

¹ Restoring Gold Standard Science <https://www.federalregister.gov/documents/2025/05/29/2025-09802/restoring-gold-standard-science>

SECTION 1: INTRODUCTION, PURPOSE, AND GUIDING PRINCIPLE

Digital technologies and advances in sharing information have profoundly changed the landscape of health and human services. American innovations, from the personal computer to the internet, and now rapidly evolving AI have promised to expedite the discovery of new cures and increase quality of life. It is time to proactively address the nation's health challenges using the full potential of emerging technology, including AI.

HHS's vision is to invest in and pioneer AI to maximize Departmental effectiveness and help catalyze innovation to advance the health and well-being of all Americans. In line with the Administration's AI Action Plan², Executive Orders (including EO 14179 Removing Barriers to American Leadership in Artificial Intelligence³), and the Office of Management and Budget's (OMB) implementation guidance in memorandum M-25-21⁴ and M-25-22⁵, this Strategy lays out HHS's framework to establish robust HHS-wide AI infrastructure, accelerate AI innovation, and promote and ensure AI security throughout the health care and human services sector while respecting the privacy of Americans' identifiable information and complying with applicable law on the privacy and security of such information. The Strategy establishes a foundational assessment of HHS's AI maturity (see assessment approach in Section 3) along axes critical to achieving this vision and charts a path to success through the President and Secretary's bold goals of Making America Healthy Again.

HHS is a large and multifaceted Department. Comprising the Administration for Children and Families (ACF), the Centers for Disease Control and Prevention (CDC), the Centers for Medicare & Medicaid Services (CMS), the Food and Drug Administration (FDA), Indian Health Services (IHS), the National Institutes of Health (NIH), and many other Divisions, the Department is entrusted by the American people to bolster health and quality of life. Together, these Divisions drive innovation in health care and human services delivery, both directly (e.g., NIH and IHS provide health care to patients) and in shaping the sector (e.g., FDA approves medical therapies and CMS policies may affect how they are reimbursed). Efforts are underway to highlight and scale successes across the Divisions while also better sharing resources and expertise. AI technologies are evolving rapidly across this landscape. Consistent with applicable law, HHS is embracing a "OneHHS" approach to AI, uniting Divisions by eliminating information silos where appropriate and coordinating and collaborating without friction.

² America's AI Action Plan <https://www.whitehouse.gov/wp-content/uploads/2025/07/Americas-AI-Action-Plan.pdf>

³ EO 14179 Removing Barriers to American Leadership in Artificial Intelligence <https://www.federalregister.gov/documents/2025/01/31/2025-02172/removing-barriers-to-american-leadership-in-artificial-intelligence>

⁴ M-25-21 Accelerating Federal Use of AI through Innovation Governance and Public Trust <https://www.whitehouse.gov/wp-content/uploads/2025/02/M-25-21-Accelerating-Federal-Use-of-AI-through-Innovation-Governance-and-Public-Trust.pdf>

⁵ M-25-22 Driving Efficient Acquisition of Artificial Intelligence in Government <https://www.whitehouse.gov/wp-content/uploads/2025/02/M-25-22-Driving-Efficient-Acquisition-of-Artificial-Intelligence-in-Government.pdf>

The pillars underlying the HHS AI Strategy going forward include:

1. Ensure Governance and Risk Management for Public Trust
2. Design Infrastructure and Platforms for User Needs
3. Promote Workforce Development and Burden Reduction for Efficiency
4. Foster Health Research and Reproducibility through Gold-Standard Science
5. Enable Care and Public Health Delivery Modernization for Better Outcomes

While AI has existed in some form since the mid-20th century, new, exciting forms have proliferated rapidly in recent years. This Strategy conveys HHS's commitment to both lean-in to the revolutionary opportunities that AI tools currently present and rapidly pivot as needs evolve.

SECTION 2: HHS AI MATURITY — PRELIMINARY ASSESSMENT

HHS Divisions both deliver health care and human services and guide industry across the sector through grant funding, regulation, and convening broad sets of stakeholders to drive innovation. For the purposes of the overall strategy, HHS will describe paths forward to mature both its internal use and how it influences the sector. As a part of this strategy, OMB M-25-21 directs HHS to develop a method to assess maturity of internal AI use cases that HHS Divisions directly develop, manage, oversee, and sunset. This section lays out how HHS will perform these case-by-case assessments, which will be published later this year.

HHS Divisions have many areas of complementary and interdependent responsibilities. However, these Divisions have operated through federated governance, which has led to inefficiencies, including redundant use of resources and diminished sharing across the Department. Despite this challenge, many parts of the Department have embraced the potential of AI through use cases that empower the HHS workforce to achieve HHS's mission to, “enhance the health and well-being of all Americans by providing for effective health and human services and by fostering sound, sustained advances in the sciences underlying medicine, public health, and social services.”

In moving to a OneHHS approach to information and technology (IT), and to ensure compliance with OMB M-25-21, HHS will increase transparency and share related information in accordance with applicable law. HHS's method of assessing AI maturity highlights the HHS AI use cases that exemplify this approach and align with the Administration's vision to enhance America's global AI dominance to promote human flourishing, economic competitiveness, national security, and to Make America Healthy Again⁶. The assessment aligns these aspirations with opportunities to eliminate unnecessary information silos and barriers that inhibit data findability, accessibility, interoperability (ability for data to work across different systems), and reusability (FAIR) and bolster protections that enhance data security and privacy. These successes and opportunities underpin the goal to mature the Department's use and adoption of AI. HHS's current approach to assessing maturity and impact is tied to the stages of use case development established by OMB and will evolve in conjunction with Department-specific practices for managing possible risk from their implementation. These stages include:

- **Latent / Pre-deployment:** The HHS Acting Chief AI Officer (CAIO) works with corresponding AI and other technical leaders to assess the expected level of return on use cases under development or acquisition status. Work done through AI councils and AI governance has enabled more agile information sharing from procurement to implementation.
- **Emerging / Developing:** Working with Division leaders and teams, HHS leadership evaluates the performance of use cases that have been recently deployed or are operating in a pilot capacity. Where a solution demonstrates superior value through

⁶ Make America Healthy Again <https://www.whitehouse.gov/maha/>

comprehensive evaluation of technical capabilities, business impact, cost-effectiveness, and strategic alignment, efforts are made to either sunset or modify suboptimal or outdated approaches.

- Realizing / Deployed: Use cases supporting the functions or mission of an agency, HHS AI leadership will continue to be evaluated on an annual or bi-annual basis.
- Leading: HHS has identified best-in-class solutions and is aggressively working to scale them – where appropriate – for use across the Department.

In FY2024, HHS had 271 active or planned implementations of AI. HHS expects utilization of tools to continue to grow, with early estimates of new use cases to support Department-wide innovation projected to increase by ~70% for FY25 (based on annual inventory currently in development). The Department continues to empower leadership to invest in AI-enabling innovation. HHS Leadership – starting with Secretary Kennedy and Deputy Secretary O'Neill – is committed to building on the successes to date and accelerating them. Below, HHS categorizes current use cases and defines future goals towards increased AI-maturity.

SECTION 3: HHS AI Pillars

Pillar 1. Ensure Governance and Risk Management for Public Trust

Vision

HHS will institutionalize forward-leaning AI governance practices that both accelerate innovation and build public trust in the use and deployment of AI. The Department recognizes that good governance (clear policies, oversight mechanisms, and stakeholder engagement) is essential to harness AI effectively while managing its potential risks. To this end, HHS has empowered a Department-wide Governance Board to unify AI efforts across the Divisions consistent with legal requirements. This governance structure will streamline approvals for new AI projects, sustain comprehensive up-to-date inventories of AI use cases, and implement transparent, risk-proportionate controls that promulgate operational integrity. Controls will be especially stringent for “high-impact” AI applications (as defined in OMB M-25-21) that could significantly affect health outcomes, individual rights, or public trust. Ultimately, the goal is to have a nimble AI governance system that allows beneficial innovations to move quickly into practice, while maintaining a strong check on potential misuses, breaches or failures to mitigate risk, and improve public trust.

Strategic Goals

- Establish standardized minimum risk practices for high-impact AI including pre-deployment testing, AI impact assessments, independent review, monitoring, and safe termination if non-compliant.
- Maintain an AI use-case inventory, designating high-impact AI, and publishing plain-language summaries as appropriate.

Metric Examples

- Governance Throughput: percent of high-impact use cases with completed assessments and independent reviews.
- Transparency and Reproducibility: number of public summaries of determinations and waivers as applicable.
- Safety and Trust: mean time to response and/or repair (MTRR); number of corrective actions completed, stakeholder satisfaction.

Ongoing Activities

HHS has established an AI Governance Board that includes senior leaders from Divisions. This Board is expected to meet at least twice per year and will, as necessary, confer further across Divisions on a more frequent basis on matters pertaining to IT

policy, cybersecurity, data governance and procurement. HHS has also convened a group comprising senior leaders responsible for AI-related training, deployment, and innovation in their respective Divisions. The Acting CAIO and Governance Board consult with these leaders about matters pertaining to the governance, procurement, development and implementation of AI to align towards mission delivery. Together, these groups synthesize top-down direction from the Administration and HHS Office of the Secretary with bottom-up innovation to implement HHS's vision for AI.

To date, HHS has modeled its internal guidance for risk management on the National Institute of Standards and Technology (NIST) AI Risk Management Framework (RMF)⁷. The Department continues to monitor updates to this Framework and best practices in risk-management as they become available and is working to develop its approach to risk management as part of internal assessments of AI, including for potential high-impact AI use cases.

Pillar 2. Design Infrastructure and Platforms for User Needs

Vision

HHS aims to deliver a reusable “value layer” of AI infrastructure and platforms that every Division across the Department can leverage. The idea is to develop a common suite of secure computing resources, scalable data repositories, model hosting services, evaluation testbeds, and orchestration tools for AI, so that individual teams do not have to reinvent the wheel for each new AI project. By building this OneHHS AI-integrated Commons, the Department will ensure that new AI solutions can be developed, tested, and deployed rapidly, with the ability to operate in different environments and across different systems. In constructing this shared infrastructure, HHS will prioritize American-made technologies and solutions, in line with federal directives to support domestic innovation and security. The Department will favor open-source tools, open standards, and transparent frameworks whenever possible, except where restrictions (like privacy or national security, trade secret, or confidential commercial information) require a more closed approach.

Strategic Goals

- Support an HHS data infrastructure aligned to FAIR data principles. This infrastructure should emphasize centralization of data and governance to cut costs, reduce duplication, and enable secure, privacy-preserving, AI-ready access to HHS extramural and intramural studies, EHR, claims, cohorts, registries, surveillance, and human services data.
- Integrate governance and embed monitoring for cost effectiveness.

⁷ Artificial Intelligence Risk Management Framework (AI RMF 1.0) <https://nvlpubs.nist.gov/nistpubs/ai/NIST.AI.100-1.pdf>

Metric Examples

- AI infrastructure adoption: number of FAIR datasets published for AI; number of AI models trained and reused across Divisions; number of AI evaluations run and number of AI adoptions across Division.
- Efficiency: reduction in time to access and prepare datasets; decrease in duplicative datasets; cost savings from centralized infrastructure; and faster development cycles for AI models.
- Security and compliance: compliance rate with HHS privacy, security, and governance standards.

Ongoing Activities

AI-enabling infrastructure is an area of ongoing development. HHS Divisions have made significant advancements in their use of AI. However, scaling AI use across HHS will benefit from a OneHHS approach. Within the Department, HHS is streamlining AI-oriented investments and consolidating IT and procurement policies to reduce burden, support innovation, and build operational excellence. HHS has implemented AI with Divisions taking the following actions:

- Employing AI tools tailored to mission and security-needs for staff and leadership to drive impact both internally and for patients, providers, and partners in the sector.
- Collaborating to leverage existing investments and models with an emphasis on building data quality, access, and information integrity for immediate regulatory and research impact.
- Scaling leading examples of AI-use and leveraging General Services Administration (GSA)-sourced tools⁸ to bolster workforce capacity.

HHS Divisions have several efforts in progress to unlock use of AI across the sector through foundational standards and infrastructure. For example, Divisions are:

- Advancing health data interoperability and utility, while preserving privacy and security.
- Activating industry by promoting the use of AI to deliver personalized, context-aware health guidance to patients by securely accessing and interpreting their medical records in real time.
- Improving and streamlining how AI and technology is regulated in care delivery.

There are several near-term opportunities for HHS to mature AI enabling infrastructure across the Department and to support the sector. Internally, HHS is implementing guidance from OMB M-25-22 to streamline IT procurement and clarify IT roles and processes. Inventorying IT resources, systems, and business data across the Department will be foundational to AI-driven efficiencies. For the health and human services sector, HHS can lead by example, establishing norms that maximize utility and cost effectiveness of tools, while preserving optionality for component Divisions to procure or

⁸ USAi <https://www.usai.gov/>

build AI tools that are fit for mission purposes. As “best of platform” tools emerge, HHS may unify around their use and eliminate less effective or underutilized solutions.

Within Department efforts on data management and sharing, HHS is finalizing policies and directives that address the following areas:

- Data infrastructure modernization and management including clarifying ownership of HHS data and repositories separate from data and datasets owned and managed by industry partners.
- Standardization and reuse of data sharing resources and governance that inform both model use and performance and internal decision making.
- Digitization and curation of data where possible and appropriate to enable machine-readability and accessibility to AI models, and across the Department.

Also in alignment with EO 14179 and M-25-21 and M-25-22, HHS is committed to ensuring its vendors and partners adhere to more robust data management and standardization thresholds. HHS is:

- Fostering data standards and datasets to bolster their usability for AI-empowered health care and human services delivery solutions.
- Championing efforts to integrate real world data with electronic health records towards precision medicine and public health, while maintaining individual privacy.

HHS’s efforts aim to keep pace with industry and bolster the quality and security of all data developed, used, and stored for Department-driven priorities.

Pillar 3. Promote Workforce Development and Burden Reduction for Efficiency

Vision

HHS will empower its workforce at every level with the skills and tools needed to use AI responsibly and effectively. The vision is to have an AI-ready workforce where employees understand how to leverage AI in their roles and are supported by secure, approved AI assistants or “copilots” in their day-to-day tasks. By deploying fit-for-purpose AI tools and embracing a “try-first” culture, the Department aims to empower our workforce and enhance staff's capacity to stay focused on measurably improving health and human services delivery. Ultimately, HHS envisions a work environment where AI is seamlessly integrated into operations, augmenting human capabilities, increasing productivity, and improving job satisfaction, all while maintaining the high standards of quality, accuracy, and accountability that HHS’s mission demands.

Strategic Goals

- Establish role-based training pathways (introductory to advanced) aligned to mission roles (e.g., clinician, regulator, analyst, grants manager).
- Deploy secure, approved AI tools integrated with HHS systems and data, while systematically tracking key performance and security metrics.
- Stand up service desks and libraries for common tasks and prompts.
- Recruit and retain top AI and data talent; leverage existing talent, explore rotational assignments and fellowships, and utilize public-private partnerships for rapid upskilling.
- Develop rigorous tracking mechanisms to evaluate quality and value of deployed solutions.

Metric Examples

- Burden reduction: percent time saved per role; cycles eliminated; automation coverage.
- Adoption, satisfaction, and proficiency: active users; reuse of successful implementations.

Ongoing Activities

The Department's collective workforce continues to express interest in achieving greater levels of AI-literacy across job function and skill level. Enthusiasm is growing as is the appetite to learn. To encourage AI adoption and upskilling, HHS leadership has developed and procured training that meets employees at their level of technical expertise. Enabling power users will surface nascent opportunities, which they can share through peer-to-peer learning bolstered by baseline training for all. By fostering a culture that supports all HHS staff, the Department ensures existing subject matter expertise is maximized to build a more technically robust AI-ready workforce.

HHS is enabling employees to securely integrate AI in their workflows to augment and more effectively perform their duties. Consistent with legal requirements (e.g., Health Insurance Portability and Accountability Act (HIPAA)⁹ protections for Personal Health Information (PHI)), HHS encourages use of AI wherever it allows individuals to automate standardized administrative tasks and analyses, so that they may allocate their time to higher impact areas that require human brainstorming, interpretation, decision making, review, and program improvement. Within the Department HHS is:

- Enabling workflows that help employees integrate AI where appropriate in their workflows to augment and more effectively perform their duties through access to general and fit-for-purpose AI tools.
- Formalizing and disseminating AI-related training for those who are first interacting with generative AI to advanced practitioners building and refining bespoke models.

⁹ Health Insurance Portability and Accountability Act (HIPAA) <https://www.hhs.gov/hipaa/index.html>

- Supporting appropriate sharing of information and cross-fertilization through AI communities of practice and enabling AI champions for peer-to-peer coaching.

HHS's current posture is to train, retain, and empower existing employees at all levels. While each of HHS's Divisions is addressing mission specific needs, a OneHHS approach surrounding them all offers opportunities to better coordinate and share resources. For example, some Divisions have integrated approved content for use in the HHS Learning Management System (LMS) and HHS could better curate and share this content. As the Department finds ways to onboard new experts, HHS will continue to support existing staff to share knowledge and resources across disciplines and missions.

Pillar 4. Foster Health Research and Reproducibility Through Gold Standard Science

Vision

HHS aims to fund science programs that set the global benchmark for the use of AI in biomedical research and development. These programs should not only push the leading edge of discovery but should establish robust standards for monitoring and evaluating AI tools over time and in the real world. Achieving this will involve infusing Gold Standard Science principles (e.g., reproducibility of results, transparency of methods, and unbiased peer review) into every stage of AI-augmented research, from initial discovery through testing and regulatory approval. In practical terms, this means that whether AI is being used for drug development and discovery, medical diagnostics, therapeutic development, or improving clinical trials, the approach will be scientifically rigorous and openly accountable.

Strategic Goals

- Work towards centralized approaches for research and development (R&D) shared services for HHS-funded research where possible, while leveraging federated approaches where necessary.
- Promote open-weight and open-interface models and open datasets when lawful and safe; prioritize pre-competitive collaboration with industry and academia.
- Facilitate reproducible pipelines (pre-registration, protocol standardization, data standardization, code and/or data release when feasible) to expedite validation.
- Update procurement language for enforcement, in line with M-25-22, where applicable and appropriate.

Metric Examples

- Share of funded projects meeting reproducibility and/or documentation thresholds; time-to-reproducibility.
- Translational outputs: tools adopted in trials and care delivery; safety signals detected; regulatory submissions aided by AI evidence packages.

Ongoing Activities

Several HHS Divisions administer robust research and discovery programs. For example, NIH's Intramural Research Program¹⁰ (IRP) supports ~1200 biomedical research laboratories that interrogate different biological and clinical research questions including through development of AI models, FDA staff research¹¹ drives enhancements in safety and quality of drugs, biologics, and medical devices, and CDC conducts mission-driven public health research and surveillance to detect, characterize, and respond to health threats in near and real time. These investigators are developing and integrating AI tools that touch every facet of the research and innovation pipeline. For example, across HHS, many are:

- Augmenting the scientific process through AI-based tools (e.g. Google Colab¹², Anthropic's AI for Science program¹³) and biological models (e.g., AlphaFold¹⁴ for protein structure prediction).
- Developing and deploying evaluation methodologies for assessing AI performance both in premarket and real-world settings to reasonably ensure the safety and effectiveness of novel AI algorithms.
- Streamlining and standardizing data management and sharing for rapid discovery.
- Leveraging partnerships and shared resources (e.g., compute, cloud access) from across the U.S. Government to support AI use and large-scale computational needs.
- Using AI to enhance scientific communication of highly technical results to broad audiences.

Pillar 5. Enable Care and Public Health Delivery Modernization for Better Outcomes

Vision

HHS provides health care to patients (e.g., in IHS clinics across the country) and influences the broader ecosystem through rulemaking and grant funding. HHS aims to increase the use of AI so it can be used to deliver measurable improvements in both population health and individual patient outcomes. Importantly, AI will augment clinicians, caseworkers, and public health professionals, serving as a supportive tool that enhances human decision-making and efficiency without compromising the essential human touch (i.e., to build trust and to validate use of the tool) in health care and human services delivery.

Strategic Goals

- Identify priority conditions and public health issues (e.g., heart disease, cancer, diabetes, maternal health, autoimmune disease, and overdose) that could be

¹⁰ <https://irp.nih.gov/>

¹¹ <https://www.fda.gov/science-research>

¹² <https://colab.research.google.com/>

¹³ <https://www.anthropic.com/news/ai-for-science-program>

¹⁴ <https://deepmind.google/science/alphafold/>

addressed through the use of AI-enabled tools.

- Promote the adoption of AI tools for applications such as clinical decision support, early-warning, risk stratification, and proactive outreach.
- Centrally coordinate, with clearly defined responsibilities for Divisions, streamlined activities to avoid duplication, and unified messaging to guide stakeholders on HHS's strategy and each Division's specific role.
- Support continuous monitoring of AI to drive accountability and inform strategic decision making.

Metric Examples

- Clinical and public health risk adjusted outcomes: hemoglobin A1c reduction; risk-adjusted hospital readmissions; reduced unnecessary Emergency Department revisits; diminished sepsis mortality; overdose deaths averted; improved maternal and infant outcomes.
- Operational outcomes (for tracking and incentivization): time-to-deploy; adoption rate by site; administrative time savings.

Ongoing Activities

HHS has a critical role in spurring research and discovery across the sector. The Department funds leading edge research programs that develop and employ AI to speed discovery of knowledge and cures. Additionally, HHS supports investigators leveraging automation where appropriate so they can redeploy their effort to high-value research activities. Examples include:

- Convening external partners from relevant disciplines and throughout the innovation pipeline to consider and evaluate the safety and efficacy of products that use AI for health care and human services delivery.
- Encouraging development of reliable and secure AI-assistants and conversational tools (i.e., that deliver guidance to patients with appropriate disclaimers and distinguish educational content from clinical guidance).
- Funding programs, coordinated and aligned across HHS Divisions and with external partners for maximal impact, towards:
 - o Designing and deploying tools to evaluate AI models for interpretability and generalizability of results, output quality, and usability over time.
 - o Establishing guidelines that maximize potential benefits of use of AI in research and discovery and sustain trustworthiness of tools by minimizing security and privacy risks (e.g., for personal health data).
 - o Supporting and investing in technology-enabled care and AI to improve health outcomes and control costs.

Cross-Cutting Enablers

Some enablers cut across the pillars of this strategy. HHS is undertaking new approaches to planning, surfacing, monitoring, and enabling future AI investments. The annual HHS AI Use Case Inventory is the starting point for this effort. In the future, further adopting and operationalizing horizon scanning methods to continuously monitor this, and other emerging technological landscapes will be critical for continued success.

HHS will streamline how it buys and manages AI by following OMB Memorandum M-25-22 and best practices. Cross functional teams that include contracting, technical, legal, privacy and civil rights experts, and end users will plan procurements to surface issues early. Solicitations will strongly encourage model auditability, transparency, and clear data and intellectual property (IP) rights. Contracts will embed privacy and civil rights protections, avoid vendor lock-in through open and portable solutions, and bar any use of HHS data to train separate models without explicit consent. These steps reduce risk and set clear market expectations.

HHS will fund shared, reusable platforms rather than independent siloed systems. Budget proposals will emphasize cross-program value. Modular contracting will break work into phases so teams can adapt as technology evolves. Health and AI Tech Sprints and use of many types of contract vehicles will help attract nontraditional vendors and speed pilots. Smart budgeting will keep strategy agile as needs change.

HHS will partner across government through the Chief AI Officer Council, and work across the Department and with other U.S. Government partners (i.e., the Department of Commerce (DOC), Department of Veterans Affairs (VA)) to co-develop evaluations.

SECTION 4: CONCLUSION

HHS recognizes the enormous potential for AI. At this early stage in what may be an inflection point for the sector, the Department will continue to align its Divisions towards the common goals of prioritizing AI innovation, infrastructure, and security. Under the direction of the Secretary, HHS components will work together to share data, tools, infrastructure, knowledge and outcomes freely and wherever legally permissible with the public to strengthen confidence, ensure reproducibility, and uphold Gold Standard Science. By adopting this OneHHS approach HHS will leverage AI to Make America Healthy Again.



THIS STRATEGY WAS ISSUED ON SEPTEMBER 30, 2025, BY HHS DEPUTY SECRETARY
JIM O'NEILL AND ACTING CHIEF ARTIFICIAL INTELLIGENCE OFFICER CLARK MINOR
CONSISTENT WITH OMB MEMORANDUM M-25-21 & M-25-22.