

Ambient AI Assistant Transforms the Primary Care Experience

An Ambient AI Assistant fundamentally shifts physicians' interactions from the EHR back to their patients — reducing burnout, improving satisfaction, and giving primary care physicians their time back.

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SAMPLE

N=116 physicians · 37 locations

AI TOOL EVALUATED

Suki AI Assistant

SERIES

AI Evaluation in Primary Care

KEY FINDINGS — PRIMARY CARE VITAL SIGNS®

60%

Reduction in physician burnout

$p < 0.001$ · statistically significant

41%

Decrease in documentation time per note

13.8 min → 8.2 min · $p < 0.001$

81%

Increase in physician practice satisfaction

37% → 68% satisfied · $p < 0.001$

37%

Reduction in after-hours EHR time

2.2 hrs → 1.4 hrs/day · $p < 0.001$

About Phyx Primary Care

Phyx Primary Care is a non-profit innovation lab dedicated to improving the primary care experience. We evaluate emerging AI technologies and payment models in primary care. Phyx does not receive any funding or support from the lab partners we work with, and our evaluations are conducted objectively to provide unbiased insights to the healthcare community.

Phyx evaluates innovations using the **Primary Care Vital Signs®**, a set of self-reported measures that assess physician wellbeing based on the state of their primary care experience. The vital signs include: level of burnout, practice satisfaction, scheduled time for routine visits, adequacy of time for patient care, and EHR time spent after hours.

The Problem

Primary care is based on deep physician-patient relationships that require time and attention. Primary care physicians often describe their practice as being "on a hamster wheel" — always running, feeling rushed, and never catching up. To survive financially under Fee for Service (FFS), family physicians must often see as many as 20 to 30 patients a day, with typical visit lengths under 20 minutes.

This time constraint leads to burdens associated with documenting and coding the visit optimally, which can take up to half of that visit time and much of the physician's focus — often requiring physicians to finish notes after hours. These burdens are a root cause of physician burnout and professional dissatisfaction.

For every 8 hours of patient visits, primary care physicians spent 5.3 hours in their EHR. Nearly 40% of that time — 2.1 hours — was on clinical documentation.

Arndt et al., Annals of Family Medicine, January 2024

Ambient AI Assistants

Ambient AI Assistants are innovative products designed to eliminate physicians' need to actively document encounter notes. They are mobile and web-based applications that listen passively to a patient visit and craft a visit note for the physician to review and complete. The physician does not have to prompt the assistant or issue commands — the assistant captures the entire physician-patient verbal interaction and uses generative AI to summarize the clinically relevant information into the appropriate clinical note format.

Leading innovators have invested heavily in EHR data integration and interoperability — the "plumbing" needed to support broad assistance across documentation, chart review, coding, inbox management, ordering, and medication reconciliation. These AI platforms continuously learn from data, expand their use of large language models, and upgrade with additional skills.

Innovation Lab Partner: Suki

Phyx assessed the companies in this category to find a partner for the lab. Suki was chosen because its AI platform combines proven voice and AI technologies in a representative solution of this emerging category. Suki's mission aligns closely with the lab's goals — primarily focused on helping physicians dedicate more time to caring for their patients. The platform is software-only, requiring no costly hardware, and is fully compliant with healthcare regulations.

Methods

The lab surveyed primary care providers who had used the Suki AI Assistant for more than 30 days. The cohort included **116 respondents across 37 practice locations nationwide**, representing a mix of small independent practices, primary care organizations, and large health systems.

The online survey assessed the AI Assistant's impact on the Primary Care Vital Signs® and on documentation workflow, time, and burden. It also included a Net Promoter Score and three open-ended qualitative questions:

- Why did you choose to purchase or start using your AI Assistant?
- Please describe how your documentation has changed since you began using an AI Assistant.
- What would you say to a colleague who asked you about your assistant?

Results

Primary Care Vital Signs®

PRIMARY CARE VITAL SIGNS®	BEFORE	AFTER	% CHANGED	P VALUE
Burnout (% reporting burnout)	61	24	↓ 60%	<0.001
Satisfaction (% satisfied)	37	68	↑ 81%	<0.001
Visit Time (minutes)	19.7	18.6	↓ 5%	0.198 (ns)
Care Time Rating (1-4 scale)	2.4	2.8	↑ 20%	<0.001
After-hours Time (hours/day)	2.2	1.4	↓ 37%	<0.001
Satisfaction with After-hours Work	2.3	3.4	↑ 46%	<0.001

Burden-Specific Metrics

BURDEN METRIC	BEFORE	AFTER	% CHANGE	P VALUE
Time per Note (minutes)	13.8	8.2	↓ 41%	<0.001
Documentation Burden (1-5 scale)	3.9	2.9	↓ 27%	<0.001
% Visits Feeling Rushed	51.7%	35.0%	↓ 32%	<0.001

BURDEN METRIC	BEFORE	AFTER	% CHANGE	P VALUE
% Notes Done Before Next Patient	36.7%	53.7%	↑ 46%	<0.001
% Notes Completed Same Day	56.8%	75.7%	↑ 33%	<0.001
Patient Visits per Day	20.5	21.0	↑ 2%	0.549 (ns)

All results based on T-test. Statistically significant at $P < 0.001$. ns = not significant.

Associated Improvements (Scale 1-4)

<p>3.3 / 4</p> <p>Note Quality — 54% reported improvement "to a great extent"</p>	<p>3.1 / 4</p> <p>Patient Interaction — 44% reported improvement "to a great extent"</p>	<p>2.8 / 4</p> <p>Patient Satisfaction improvement rating</p>	<p>2.5 / 4</p> <p>Reimbursement improvement rating</p>
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Demographic Results

EHR Used: 79.8% used athenahealth, 12.9% used Epic, and the remaining ~7% used a variety of other EHRs including Oracle/Cerner, Meditech, Elation, and Point and Click.

Primary Goal: 48% said their primary goal was to reduce after-hours time, 35.2% to increase note-taking efficiency, and 8% to increase note accuracy.

Frequency of Use: 47.6% used their AI Assistant for every patient, and 36.3% used it every day.

Discussion

The Causal Chain: How the AI Assistant Improved Outcomes

The results showed dramatic improvement across all Primary Care Vital Signs®. We believe the improvement followed this causal chain:

1

The AI Assistant directly reduced time and documentation burden

- Note time reduced by 41%
- Documentation burden reduced by 27%
- Note quality improved "to a great extent" — 54%
- Patient interaction improved "to a great extent" — 44%

2

This relief improved the Primary Care Vital Signs®

- Time on patient care increased by 20%
- After-hours EHR time decreased by 37%

3

Fundamental changes in time and focus transformed the experience

- Those reporting burnout decreased by 60%
- Those satisfied with their practice increased by 81%

Faster, More Efficient Documentation

The assistant's impact on time, workflow, and burden were all statistically significant. Documentation burden and its associated pressure were eased, allowing physicians to step off the hamster wheel.

"I can be more intentional about note completion at point of care."

"Documentation has been much less burdensome. Much less of an albatross around the neck of myself and my providers. Has decreased cognitive burden and warded off burnout."

"It's been huge for me. I see 25+ patients per day and it has improved my note taking substantially. No more carpal tunnel!"

After-hours Documentation Decreased

Respondents reported a 37% decrease in after-hours time — from 2.2 hours to 1.4 hours per day, a savings of 48 minutes. They also reported a 46% improvement in satisfaction with after-hours work. Inbox and messaging burden may now be the major remaining contributor to after-hours time.

"Better Notes" — Improved Documentation Quality

Note quality improved with a score of 3.3 out of 4. Being a by-product of the actual visit conversation, the notes produced by the assistant were reportedly better than what physicians had created before — more accurate, more detailed, better formatted, and more complete. Ambient notes derived directly from the physician-patient conversation are representative of the actual complexity of the visit, which leads to better coding and better reimbursement.

"More accurate... more detailed... more succinct... more comprehensive... better formatted... more robust... more organized... more personalized... more accurate coding... more thorough... much less forgetting."

"My documentation is more thorough, especially for more complicated histories, physical exam findings, and complex plans."

"The notes now include a section on medical decision-making that helps my coders bill more appropriate codes for the level of care I provide."

Net Promoter Score — Burnout Cohort (N=61)

Among physicians who reported burnout before using the AI Assistant:

62

Net Promoter Score

70%

PROMOTERS (9-10)

21%

PASSIVES (7-8)

8%

DETRACTORS (0-6)

"Gamechanger" — Shifting the Physician-Patient Interaction

Multiple respondents described the Ambient AI Assistant as a "Gamechanger." The assistant allows physicians to shift their focus from the EHR to the patient — no longer having to remember, formulate, and manually enter note text during the visit. The richer the patient interaction, the richer the clinical note.

"It has fundamentally changed my approach to seeing patients. I don't worry about getting details documented during the visit because I know the AI is doing it for me. I can sit and face the patient most of the time. They like that better."

"It has significantly helped to increase quality time with my family and frees up time for things I want to do, including more time with my patients."

"There is hope for the future of primary care."

Conclusion

This Innovation Lab showed that an Ambient AI Assistant significantly decreased the time and burden associated with visit documentation — resulting in physicians being less rushed, completing notes more timely, and dramatically reducing after-

hours documentation burden. It stabilized the Primary Care Vital Signs® by providing more time for patient care, decreasing burnout, and increasing satisfaction.

Documentation shifts from being a burdensome task to being a direct output of the actual visit — virtuous rather than punitive. The richer the patient interaction, the richer the clinical note, and the better the primary care experience. We believe AI applied as a clinical assistant can help support physician-patient relationships and restore primary care physicians' professional satisfaction: their autonomy, mastery, and purpose.

Limitations

There is a potential for selection bias, though all primary care physicians from the lab partner's client base were invited to participate. Results are based on physician self-reported attitudes, and recollection of baseline experiences could be subject to recall bias.

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