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Reinventing Medical Care Through Responsible AI: The AIGP Vision

Authors:

- Dr Nicholas Chia (Co-Founder, AIGP Health)
- Dr Prateet Singh, (Co-Founder & Head of Operations, AIGP Health)
- Dr Anindita Santosa (Co-Founder & CEO , AIGP Health)
- Dr Yudara Kularathne (Co-Founder & CTO, AIGP Health)



Executive Summary

Singapore's healthcare system is evolving rapidly to meet the challenges of an ageing population, rising chronic disease burden, and growing demand for personalized, accessible care.

But these pressures are not unique. Across Asia-Pacific and globally, health systems face similar strains. The World Health Organization estimates that by 2030, one in six people worldwide will be over 60 years old, with the population aged 60+ expected to double by 2050 ^[1]. In Singapore, the ageing pace is sharper: by 2030, nearly one in four Singapore residents will be aged 65 or older ^[2].

Meanwhile, chronic diseases continue to escalate, accounting for over 74% of global deaths ^[3]. In Singapore, chronic conditions such as diabetes, hypertension, and hyperlipidemia drive over 80% of the total disease burden ^[4]. The prevalence of diabetes alone is projected to reach one in four adults by 2050 ^[5]. This growing clinical complexity, coupled with limited consultation time, puts significant pressure on healthcare providers.

Clinicians are bearing the brunt of this transformation. Rising administrative load, driven by expanding documentation and electronic health record requirements, contributes heavily to burnout. Physician burnout rates have exceeded 50% in several high-income countries, including Singapore ^[6]. This increasing burden reduces time for patient engagement, contributes to fragmented care, and undermines patient satisfaction.

AIGP Health is an AI-powered platform developed by healthcare professionals for healthcare professionals. It addresses these systemic pressures by embedding intelligent co-pilots and conversational agents directly into care workflows.

74%
Global chronic disease deaths

50%
Physician Burnout Rate increase



AIGP enhances clinical productivity, strengthens patient engagement, and integrates seamlessly with existing healthcare infrastructure. Built with deep frontline clinical insight combined with technical expertise, AIGP offers a scalable, clinically grounded solution designed to augment care delivery while maintaining safety, transparency, and trust. The platform reflects a rare combination of clinician-founders who bring both real-world care delivery experience and technological vision, an increasingly valuable asset in designing AI for complex healthcare environments.

This white paper outlines AIGP's purpose-built architecture, key components, clinical and regulatory alignment, evaluation metrics, and scalability roadmap. With a focus on safety, explainability, and local relevance, AIGP is designed to support a more resilient, efficient healthcare system for Singapore and other health systems facing similar global challenges.



1. Introduction:

The Case for AI in Everyday Healthcare



Frontline healthcare is the foundation of a resilient and sustainable health system. Across care settings — from general practice to outpatient specialties, community clinics, and ancillary health services — healthcare professionals play a critical role in managing chronic diseases, detecting early warning signs, and delivering continuous patient care. Yet they operate in increasingly time-constrained environments, burdened by growing cognitive and administrative demands.

In Singapore, general practitioners manage approximately 80% of primary care consultations, often handling patients with multiple chronic conditions within 10 to 15-minute appointment windows ^[2]. The administrative workload associated with these visits has grown substantially. Globally, physicians now spend nearly twice as much time on documentation and clerical tasks as they do on direct patient care ^[7]. This imbalance contributes significantly to clinician burnout, with over 50% of doctors in Singapore reporting symptoms of emotional exhaustion and depersonalization ^[6].

The consequences are tangible. In 2022, Singapore's Ministry of Health reviewed multiple cases where administrative backlog contributed to missed follow-up appointments in polyclinic chronic care programs. Several patients with uncontrolled

The Administrative & Burnout Crisis in Frontline Care

80%

primary care visits in
Singapore managed in
TIME-LIMITED CONSULTATIONS

> 50%

physicians in Singapore
report
BURNOUT SYMPTOMS

2:1

ratio of documentation time
vs patient care



uncontrolled diabetes and hypertension were identified only after significant deterioration of their condition, highlighting the risk to patient outcomes when care teams are overwhelmed. These are not isolated events but symptoms of a broader systemic strain on frontline care delivery.

While AI has shown considerable promise across healthcare, most solutions have been designed for tertiary care, radiology, or narrow diagnostic use cases. However, everyday clinical practice requires a fundamentally different approach—one that adapts to real-world workflows, aligns with local regulations, addresses multilingual patient populations, and integrates seamlessly into diverse healthcare delivery models.

AI GP Health is more than a platform. It represents a movement shaped by clinician-builders determined to reimagine the future of care. Born in Singapore, at the intersection of frontline clinical insight and advanced technology, AI GP is a modular AI ecosystem designed to elevate every moment of the clinical journey. It extends beyond workflow optimization to redefine what is possible in healthcare delivery. By reducing administrative burden and restoring the human connection at the heart of medicine, AI GP empowers clinicians to practice at the top of their license and enables patients to feel seen, heard, and fully cared for. This is healthcare, redefined for a new era.



2. Challenges:

Challenges in Today's General Practice



Healthcare professionals today stand at the frontline of escalating clinical complexity paired with relentless operational demands. In general practice, physicians juggle acute illnesses, chronic disease management, preventive care, and mental health — often within consultations lasting as little as 6 to 10 minutes ^[8]. Specialized care offers no relief, layering on additional expectations for coordination, documentation, and patient communication, even as caseloads grow and patient needs become more personalized.

This strain reverberates across the entire care team. Nurses, allied health professionals, and administrative staff face mounting clerical workloads and fragmented processes, contributing to widespread fatigue, rising turnover, and persistent inefficiencies ^[9].

Hidden Cost of Administrative Complexity

> 30%

EMR data entry involves redundant or duplicated information across fragmented systems

6—10 MINUTES

repave average consultation length in Singapore primary care
TO MANAGE CHRONIC ILLNESS

> 40%

physician time consumed by documentation tasks
ntation time vs patient care

The administrative load remains one of the most significant contributors to this crisis. Tasks such as generating medical certificates (MCs), preparing referral letters, managing patient recalls, and manually entering notes into non-integrated EMR systems consume disproportionate amounts of time. Studies show that documentation tasks alone can occupy over 40% of a physician's working hours ^[7]. The consequence is predictable: reduced face-to-face time with patients, cognitive overload, after-hours work, and professional burnout.



In Singapore, a recent study by the Institute of Mental Health revealed that 82% of primary care doctors experience burnout symptoms, with over 20% reporting clinical anxiety or depression ^[10]. Doctors in polyclinics were disproportionately affected, citing intense workload, prolonged use of personal protective equipment during the pandemic, financial pressures, and reduced access to locum relief as key factors.

Beyond documentation, communication gaps present another compounding challenge. Essential elements such as medication counselling, procedural instructions, and patient education are often inconsistently delivered due to staffing shortages and time constraints. The absence of standardized follow-up processes leaves many patients unclear about their care plans. For elderly or lower-literacy populations, language barriers further exacerbate misunderstandings, leading to poor adherence, preventable complications, and avoidable readmissions ^[11].

Adding to this is the fragmentation of digital infrastructure. Existing systems — EMRs, laboratory portals, imaging platforms, and scheduling software — often lack interoperability, forcing clinicians to toggle between platforms, manually re-enter data, and risk omissions. This disjointed digital landscape undermines continuity of care and delays real-time decision-making, obstructing the vision of a connected, proactive healthcare ecosystem ^[12].

The cumulative effect is clear: without responsible, scalable AI solutions built around the realities of daily clinical practice, these systemic inefficiencies will continue to compromise both clinician well-being and patient outcomes. Only a clinician-centric AI approach can meaningfully bridge these operational gaps while respecting the complexities of modern healthcare delivery.



3. AIGP Platform Overview



3.1 Technological Foundation

AIGP Health is architected as an elegant, modular, and secure platform that integrates seamlessly into real-world healthcare environments. Its design reflects both clinical realities and modern software engineering best practices:

- **Hybrid deployment flexibility** (cloud-based or on-premise) for adaptable hosting based on institutional needs.
- **API-first architecture** enabling smooth integration with existing EMR systems, clinical infrastructure, and third-party digital health tools.
- **Role-based access control and end-to-end encryption** to ensure secure, compliant access across multiple user profiles.
- **Full audit trails** and logging to support traceability, medico-legal defensibility, and compliance with data governance standards.
- **Alignment with key regulatory frameworks** and certifications, including:
 1. ISO 13485 (Medical Device Quality Management Systems)
 2. HSA Software as Medical Device (SaMD) guidance (Class A/B/C)
 3. Singapore's Personal Data Protection Act (PDPA)
- **Real-time failover** mechanisms for high availability, ensuring continuous system uptime critical for clinical operations.

This foundation allows AIGP to be confidently deployed across both high-performance enterprise health systems and smaller practice environments, while remaining compliant with evolving regulatory landscapes.



3.2 Scalability and System Integration

AIGP Health is intentionally built for flexible, real-world adoption across varied healthcare delivery models:

- Supports **multilingual**, **multi-site**, and **multi-specialty** workflows.
- **Adapts** to telehealth, in-person clinics, hybrid care models, and population health initiatives.
- **Minimal IT disruption** during implementation due to its API-based, plug-and-play design.
- Designed for both **vertical scalability** (adding new AI-driven features) and **horizontal scalability** (expanding across sites, institutions, and regional systems).

This scalability allows AIGP to grow alongside evolving healthcare needs — from solo general practitioners and PHPC clinics to national-level population health programs.

3.3 AIGP Feature Offerings

- Digital history-taking prior to appointments.
- Medication counselling, chronic disease outreach, appointment reminders, and procedural instructions.
- Multilingual capabilities, currently operating in English with active development underway for Mandarin, Malay, and Tamil support.
- Intelligent escalation for symptom monitoring, with clinician oversight for safety.
- All interactions logged and summarised for clinician review, ensuring auditability.

Anzu — Conversational AI for Patient Engagement

Anzu automates pre- and post-consultation interactions via voice and text interfaces (including WhatsApp integration)



DocAssist — AI Clinical Co-Pilot

DocAssist functions as an AI-powered assistant throughout the clinician's workflow

- Structured digital intake capturing relevant data prior to the consultation.
- Real-time decision support during the encounter, including differential diagnoses, red flag alerts, and medication safety checks aligned with local protocols.
- Post-consultation generation of structured EMR-ready SOAP notes, standardized templates for referrals, medical certificates, and follow-ups.
- Full clinician editorial control at every step, preserving ultimate medical judgment.

3.4 Unified, Agentic Ecosystem

The core strength of AIGP Health lies in its unified agentic architecture, with Anzu and DocAssist operating as complementary AI agents within a shared knowledge and data layer:

- Centralized clinical context allows continuity of care across patient touchpoints.
- Explainable AI design ensures transparency and traceability in every generated recommendation.

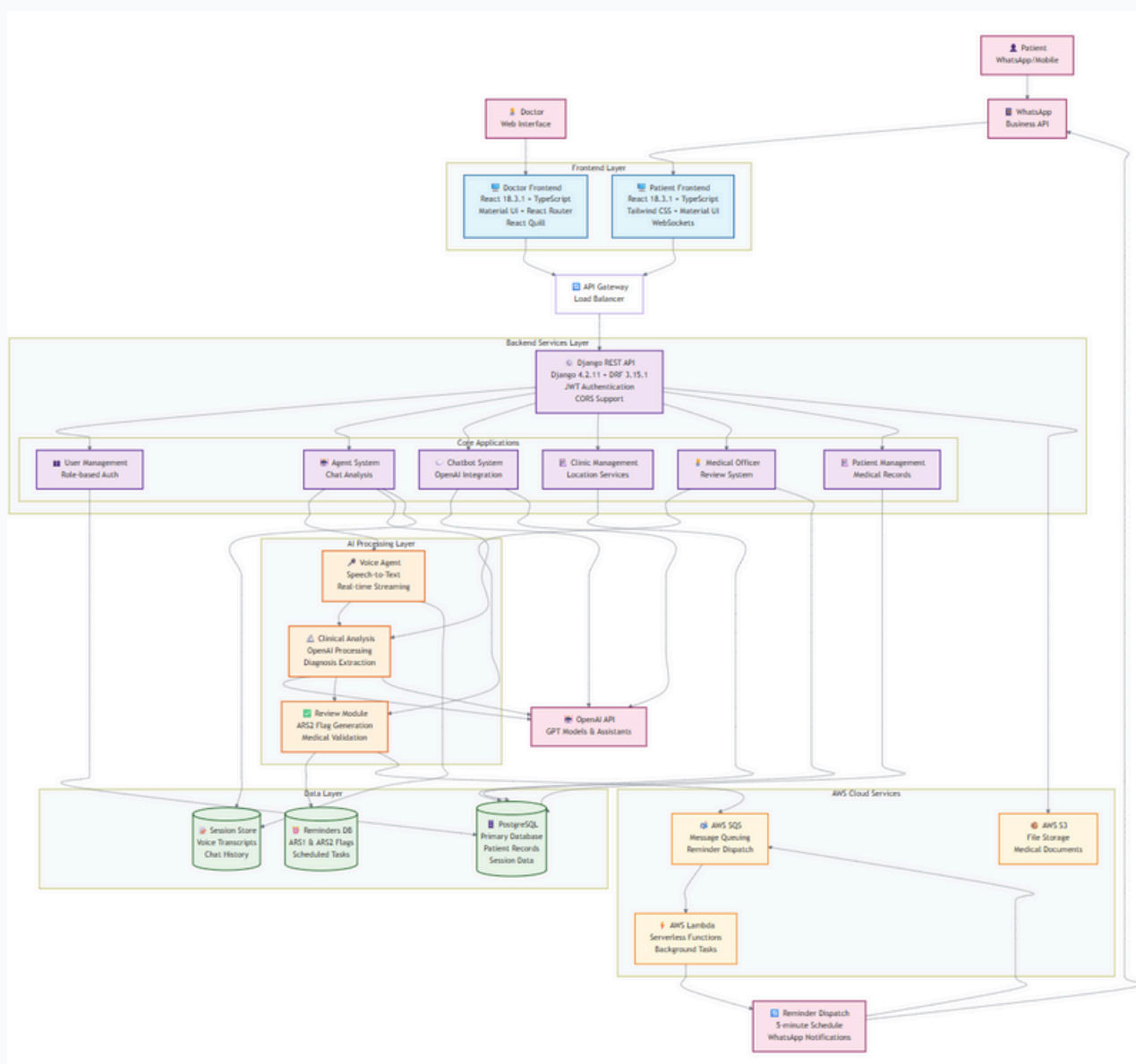


Figure 1. AIGP Health: Modular, Agentic AI Platform Architecture

- Streamlined documentation reduces clerical overhead, freeing clinicians to focus on care.
- Enhanced patient-provider communication fosters stronger engagement and adherence.

Whether deployed as standalone modules or integrated together, AIGP Health aligns with the real-world complexities of modern healthcare delivery.



4. Comparative Analysis

**AI GP Health vs Traditional
Systems and Emerging
Competitors**



4.1 Comparative Positioning Against Emerging Competitors

AI-powered clinical tools are rapidly expanding across healthcare, but most remain focused on isolated tasks, such as documentation transcription or passive note summarization. Traditional EMRs, static templates, and even newer AI transcription solutions often fail to address the full operational reality of daily clinical practice. They deliver partial relief but do not fundamentally resolve the clinician's dual burden of administrative complexity and real-time clinical decision-making.

AI GP Health was architected from inception to address this gap. It integrates deeply into frontline clinical workflows, combining administrative automation with embedded real-time clinical intelligence across the entire care continuum — before, during, and after the consultation.

4.2 Strategic Differentiation of AI GP Health

Unlike transcription-focused solutions, AI GP Health delivers:

- **End-to-End Clinical Workflow Integration:** Extends beyond documentation to include pre-consult intake, intra-consult clinical intelligence, post-consult patient education, and chronic disease management workflows.
- **Real-Time Active Clinical Intelligence:** Embeds differential diagnosis suggestions, red flag alerts, medication dosing checks, and safety guardrails directly into the clinician's workflow.
- **Clinician-Designed Agentic Architecture:** Developed by practicing physicians, directly reflecting frontline operational demands, cognitive load realities, and clinical governance standards.



4.1 Comparative Positioning Against Emerging Competitors

Dimension	Nuance DAX	Nabla	Heidi	Hippocratic AI	AIGP Health
Primary Focus	Ambient scribe transcription	Post-consult AI note summarization	Limited real-time clinical prompts	Remote asynchronous nurse agents	Fully embedded, agentic clinical workflow co-pilot
Care Continuum Coverage	Intra-consult only	Post-consult only	Limited consult support	Remote care	Full longitudinal care: pre-consult intake, intra-consult decision support, post-consult outreach
Clinical Decision Intelligence	None	Minimal summarization logic	Early-stage clinical prompts	Rule-based triage	Real-time active co-pilot: differential diagnoses, red flag alerts, dosing checks
Integration Model	Vendor-hosted, EHR-integrated (Epic/Cerner)	API integrations	Limited EHR integration	Platform-level	API-first, modular, full interoperability across systems
Multilingual Adaptation	English only	Limited	Limited	Limited	Multilingual: English, Mandarin, Malay, Tamil
Regulatory Readiness	HIPAA	GDPR	GDPR	HIPAA	HSA SaMD (Class A/B/C), PDPA, ISO 13485, ISO 27001



- **Multilingual Operational Readiness:** Specifically designed for complex multicultural systems like Singapore and broader Asia-Pacific contexts.
- **Regulatory Compliance Built-In:** Fully aligned with Singapore's regulatory frameworks, enabling deployment readiness in tightly governed health systems.

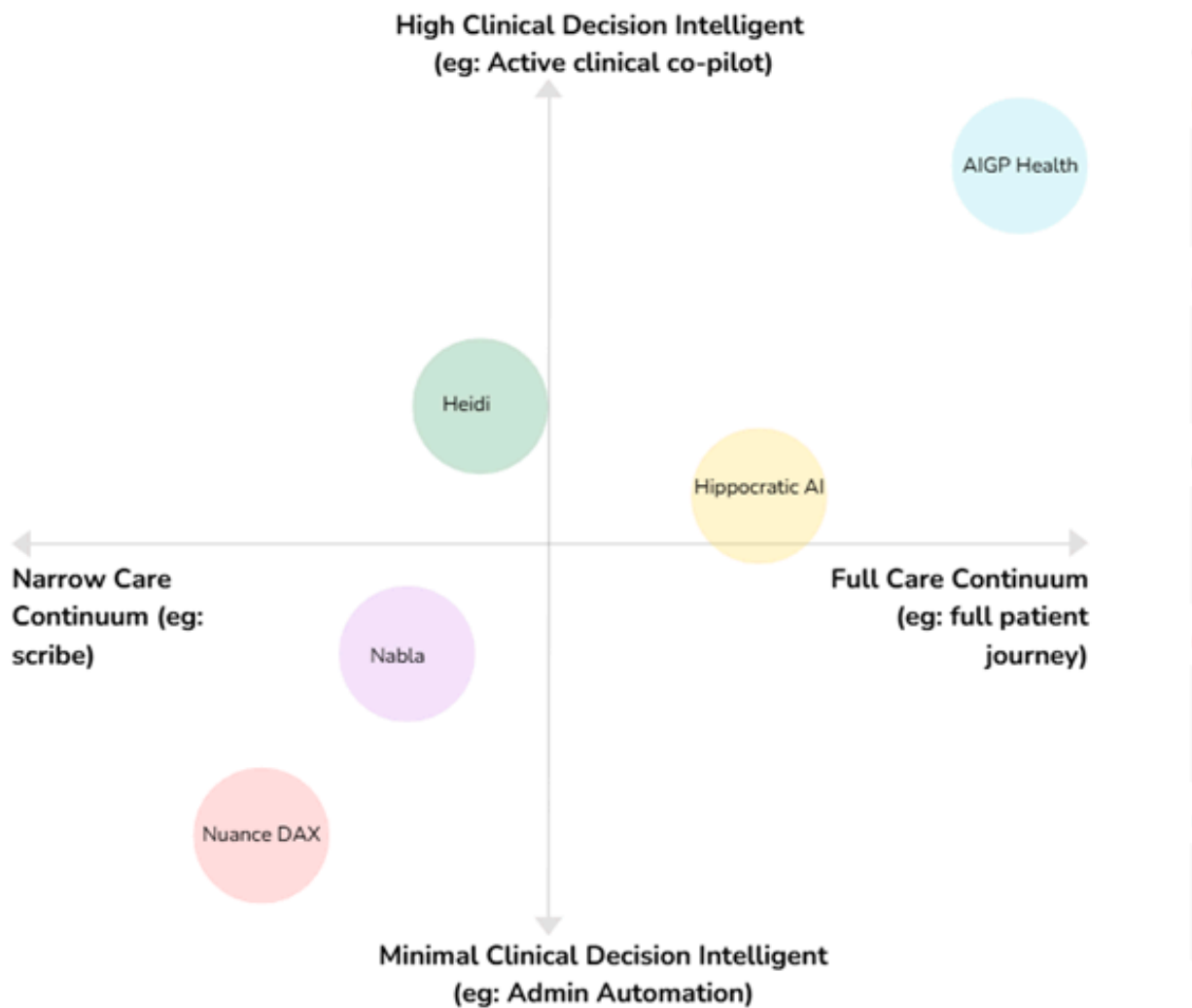


Figure 2 AIGP Health: Strategic Positioning in Clinical AI

AIGP Health uniquely occupies the top-right leadership quadrant, offering both **broad care continuum coverage** and **advanced clinical intelligence** embedded directly into the patient care.



4.3 Preliminary Performance Evaluation

A preliminary evaluation of the AIGP system was conducted with approximately 50 participants across both patients and clinicians as part of initial early adopters. Formal large-scale clinical pilot studies are currently being planned.

Key findings from the preliminary study include:

- **Over 80% of doctors** evaluating AIGP agreed that the platform would meaningfully reduce administrative workload, particularly for documentation and follow-up scheduling.
- **Approximately 90% of participants** indicated they would recommend AIGP's AI-powered system to others based on their user experience.

These early indicators suggest strong acceptance and operational potential, while full clinical validation studies will provide formal outcome data at scale.



5. Clinical Safety, Governance & Trust



5.1 Human-Centred Safety by Design

Clinical safety forms the core foundation of AIGP Health's platform philosophy. The system is built around a strict **human-in-the-loop** model where qualified healthcare professionals retain full oversight and final control over every AI-generated output — from consultation notes and follow-up scripts to clinical prompts and summaries.

AI-generated content is always presented as draft recommendations, allowing clinicians to review, modify, approve, or override suggestions in real-time. This design approach ensures that safety, accountability, and professional responsibility remain firmly anchored with the healthcare team.

5.2 Transparent Oversight & Clinical Accountability

Every module within AIGP Health is engineered for **traceability and auditability**. Comprehensive audit trails capture timestamps, user actions, overrides, and edit histories. This supports:

- Transparent quality assurance
- Legal defensibility
- Internal compliance monitoring

Clinicians have full visibility into every AI-generated suggestion and remain empowered to exercise professional judgment at every stage of care.



5.3 Active Risk Mitigation in Real-Time

AIGP Health incorporates embedded **real-time safety protocols that proactively flag clinical risks and support timely escalation** when necessary. For example, if a patient reports concerning symptoms during pre-consult intake or digital outreach, the system automatically generates structured clinician alerts for review.

The platform continuously monitors for:

- Missed medications or appointments
- Signs of disease progression or deterioration
- Unsafe symptom-drug combinations
- At-risk behaviours flagged through structured patient input

Escalation pathways follow predefined clinical service level agreements (SLAs), ensuring timely intervention.

5.4 Ethical Governance & Responsible AI

AIGP Health's commitment to responsible AI extends beyond technical safeguards into broader ethical, legal, and social considerations:

- Full clinician control over all AI-generated content
- Transparent, explainable AI outputs with flagged suggestions
- Continuous bias monitoring through diverse training datasets
- Inclusive design principles to support equitable access
- Strict adherence to clinical boundary rules: AIGP never acts autonomously in diagnosis or prescription

This ethical framework is embedded into product design, ongoing clinician co-development, and governance reviews.



5.5 Trust Through Continuous Co-Development

Clinician trust is not an assumption — it is continuously earned through AIGP's collaborative development approach. Key elements include:

- Structured clinician onboarding and guided rollouts
- Real-time feedback collection within the platform
- Iterative design reviews with clinical advisory boards
- Transparent version control and change management processes

This continuous co-creation model ensures that AIGP Health evolves responsibly alongside clinical practice realities and regulatory expectations.

5.6 Compliance Alignment

AIGP Health's platform architecture is **fully aligned with Singapore's data privacy, cybersecurity, and medical device governance frameworks**. Comprehensive adherence to **internationally recognized standards** — including health software cybersecurity, data protection, privacy management, and information security — is maintained through ongoing independent audits and external compliance reviews.



6. Regulatory Pathway & Compliance Readiness



AI GP Health was designed with a proactive regulatory, safety, and security-first approach, ensuring responsible deployment across diverse clinical environments from the outset.

6.1 Current SaMD Classification Status

AI GP's modular platform components are carefully aligned to current Singapore regulatory frameworks under the Health Sciences Authority (HSA) Software as a Medical Device (SaMD) guidance:

- **Anzu** is presently classified as **Class A SaMD**, supporting protocol-guided patient communication through structured history-taking, education, and follow-up management. It does not perform diagnosis, triage, or therapeutic recommendation, keeping it firmly within Class A parameters.
- DocAssist operates exclusively under direct clinician supervision, functioning as a clinical documentation assistant without direct patient-facing or therapeutic action. Under current guidance, it does not require SaMD classification.

This deliberate classification approach ensures that initial deployments focus on safe, highly controlled functions while establishing a solid regulatory foundation.

6.2 Security, Cloud Hosting & Data Protection

AI GP Health operates on secure cloud infrastructure hosted on Singapore-based sovereign AWS cloud environments, ensuring data residency and compliance with national data protection laws.

Key data protection and cybersecurity safeguards include:

- End-to-end encryption across data transit (TLS 1.3) and data storage (AES-256)
- Role-based access controls ensuring least-privilege data handling
- Immutable audit logging of user actions, AI outputs, and clinical overrides



- Continuous threat monitoring, vulnerability patching, and incident response protocols

All operational security practices are designed to meet globally recognized healthcare IT security standards

6.3 Future Regulatory Pathway & International Standards Alignment

As AIGP expands its capabilities toward more advanced, autonomous features—including remote patient education, triage support, and longitudinal chronic care outreach—future modules may enter Class B SaMD classification domains.

In preparation for these next phases, AIGP is proactively building its regulatory readiness through:

- Ongoing upgrades to the Quality Management System toward full certification under internationally recognized medical device standards
- Preparation of comprehensive technical documentation across:
 - Risk management protocols
 - Software development lifecycle governance
 - Clinical evaluation frameworks
- Planned formal clinical evaluation studies to support regulatory submissions for advanced use cases
- Structured post-market surveillance mechanisms to ensure safety, monitor real-world performance, and continuously evolve product safety governance

This forward-looking approach allows AIGP Health to scale responsibly across both local and international healthcare markets, while maintaining patient safety, clinician trust, and regulatory transparency.



7. Evaluation & Pilot Metrics



7.1 Early User Study: Preliminary Evaluation with Patients and Clinicians

Prior to formal clinical deployment, AIGP Health conducted structured early adopter surveys with a total of 50 participants

- **44 patients** who completed structured surveys evaluating AIGP's proposed AI onboarding, education, and follow-up features, based on described functionality and sample scenarios
- The patient participants represented **adults receiving care through private GP clinics for common chronic and preventive care needs**, including hypertension, diabetes, minor infections, preventive screenings, and routine follow-ups. This cohort reflects typical outpatient encounters in primary care settings.
- **6 doctors** who provided structured feedback on AIGP's AI-powered documentation support and administrative automation features based on presented system descriptions.
- Participating clinicians included **practicing general practitioners** evaluating AIGP's clinical documentation and administrative support capabilities within the context of their daily workflow.

These early studies aimed to gather frontline feedback to identify areas for system refinement before live pilot deployment.



Key Early Findings

Metric	Patients (N=44)	Doctors (N=6)
Found AI onboarding more efficient	100% (44/44)	—
Agreed AI-assisted follow-ups improve experience	>80% (approx. 36/44)	—
Would recommend AIGP system to others	~90% (approx. 40/44)	—
Believe AI reduces admin workload	—	100% (6/6)
Emphasized need for clinical oversight	—	100% (6/6)

Figure 4 Summary of Early Adopter Survey Results (N = 50 participants) (Source: AIGP Early Adopter Surveys, 2024)



Early Feedback Themes & Updates

“Desire for clearer AI explanation of diagnosis and treatment plans.”

“Request for escalation pathways to human doctors for complex questions.”

“Interest in transparent data privacy disclosures regarding AI decision-making”



Patients

Doctors



“Full clinician oversight and editable AI-generated outputs considered essential.”

“Seamless EMR integration highlighted as critical to prevent duplication.”

“Concern raised around medico-legal defensibility of AI-generated documentation.”



Based on these insights, AIGP Health implemented several design enhancements prior to pilot deployment:

- **Enhanced AI disclaimers** to clarify clinician authority over AI-generated content.
- **Integrated human escalation pathways** to allow direct clinician involvement for complex patient queries.
- **Strengthened clinician oversight layers** through editable templates, version tracking, and full audit trails of AI-generated outputs.



7.2 Planned Pilot Evaluation Framework

Building on this foundation, AIGP Health will conduct formal clinical pilot studies involving 20 to 30 live patient consultations. This structured evaluation will capture quantitative and qualitative performance metrics through before-and-after comparisons.

Key Evaluation Domains:

Clinical Workflow Efficiency

- Measure time savings across intake, documentation, and follow-up workflows.
- Use time-stamped data to compare pre-AIGP vs post-AIGP documentation times.
- Target: Up to **50% reduction** in administrative workload.

Documentation Accuracy & Clinical Oversight

- Evaluate physician acceptance of AI-generated draft notes.
- Target: **≥90% full or partial acceptance** after clinical review.

Patient Engagement & Compliance

- Monitor response rates to AI-driven recalls, education modules, and chronic care follow-up prompts.

Operational Clinic Impact

- Quantify weekly administrative hours saved across pilot clinics.

User Experience & Continuous Improvement

- Capture structured feedback via Net Promoter Scores (NPS), usability scores, and in-platform feedback.



The upcoming pilot phase will generate real-world clinical evidence on AIGP Health's operational impact, clinical accuracy, and user adoption. Results will inform regulatory submissions, platform refinement, and broader deployment strategy.

AIGP Health remains committed to ongoing clinician co-development to ensure safe, responsible AI adoption aligned with frontline healthcare realities.



8. Business Model, Go-To-Market & Deployment Strategy



8.1 Monetization & Pricing Model

AI GP Health operates as a SaaS subscription platform, offering predictable recurring revenue across solo practitioners, group clinics, and enterprise healthcare networks. The platform is modular, allowing progressive adoption of AI features aligned with clinic size, digital maturity, and operational needs.

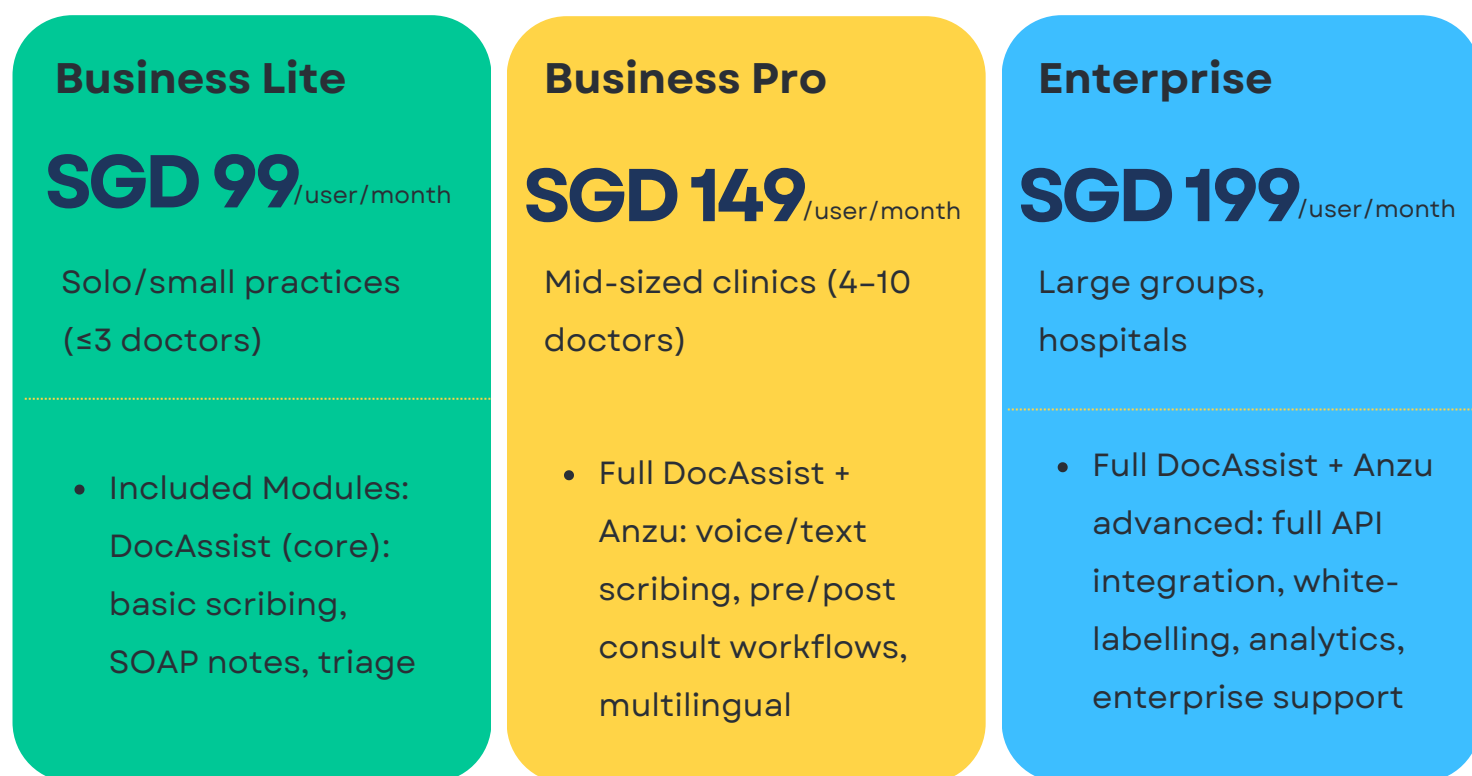


Figure 5 Pricing Tiers (SGD per user per month)

Revenue is driven primarily through SaaS subscriptions, with additional monetization via:

- Enterprise licensing
- API integration partnerships (e.g., EMR vendors)
- Custom implementation services
- Potential value-based pricing pilots linked to measurable clinical outcomes (e.g., improved recall adherence, documentation efficiency, patient engagement)



8.2 Unit Economics & Financial Model

The SaaS model allows capital-efficient, scalable growth with healthy margins and short payback periods.

Metric	Lite	Pro	Enterprise
Monthly Revenue	SGD 495	SGD 894	SGD 597
COGS	SGD 87.50	SGD 200	SGD 400
Gross Margin	82%	78%	33%
CAC	SGD 350	SGD 375	SGD 550
LTV (24–36 months)	SGD 9,780	SGD 20,820	SGD 7,092
Payback Period	0.86 mo	0.54 mo	2.79 mo
Pilot Conversion Rate	25%	25%	25%

Figure 6 Illustrative Unit Economics (Per Clinic Type)

8.3 Market Opportunity

ALGP addresses a fast-growing, digitally underserved segment of outpatient care, initially targeting Singapore, then Southeast Asia, and global expansion thereafter.

Region	Total Clinics (TAM)	Serviceable (SAM)	Target Clinics (SOM: 5-Year Goal)	Revenue Potential (ARR)
Singapore	2,200	1,500	450	SGD 2.6M ARR
Southeast Asia	120,000	60,000	10,000	SGD 74.9M ARR
Global	1.5M	800,000	100,000	SGD 797.8M ARR

Figure 7 Estimated Market Target (Source: MOH Singapore, WHO Global Observatory, ASEANStats, World Bank, OECD)



8.4 Go-To-Market Strategy

AI GP's GTM approach focuses on B2B direct sales with segmentation by clinic size and ecosystem partnership:

	Solo / Small Clinics	Group Practices & Specialist Chains	Enterprise Health Systems
Adoption & Delivery Model	Business Lite SaaS onboarding	Business Pro tier with AI documentation + patient engagement	Enterprise tier: full integration, white-labeling, population health modules
Go-To-Market Channels	Private GP networks, PHPCs	Channel partnerships with EMR vendors, Specialist chains	National health ministries, polyclinic networks, telehealth platforms, private hospitals

Figure 8 AI GP Health: Customer Segments & Adoption Strategy

Procurement Strategy

- SaaS licensing agreements with monthly billing
- Optional enterprise SLAs, custom integration support, and bundled onboarding services
- Flexible phased adoption with low IT disruption via AI GP's API-first design



8.5 Deployment & Integration Approach

Deployment remains modular and minimally disruptive, starting with:

- Anzu onboarding modules for digital intake and patient communication
- DocAssist modules for clinician documentation support
- Seamless integration with existing EMRs, lab portals, scheduling systems, and government infrastructure (SingPass, Active Directory via Synapse Tandem)

Real-time dashboards provide clinics with ongoing visibility into:

- Documentation time savings
- Patient outreach response rates
- System usage metrics
- Operational ROI

Low-code configuration tools allow clinics to customize outreach workflows without engineering dependency.

8.6 Long-Term Strategic Positioning

AIHP Health's defensible moat is built on:

- Clinician-built agentic architecture
- Full care continuum integration (pre-, intra-, post-consult)
- Multilingual, multicultural operational readiness (Singapore, SEA)
- Regulatory alignment in highly governed healthcare systems
- Enterprise-grade security and data governance infrastructure

The platform is uniquely positioned to scale from Singapore into wider regional and global markets as healthcare systems seek scalable AI solutions that respect clinical governance while improving operational efficiency.



9. Future Directions : Building the Clinical AI Infrastructure



AI GP Health's vision extends beyond clinician productivity — we are building the foundational agentic AI infrastructure to power regulated healthcare systems across Asia.

Today, we are starting with primary care. But tomorrow, AI GP's platform can underpin multi-specialty coordination, autonomous care pathways, population health outreach, and national-scale interoperability — all while embedding clinician-led safety, explainability, and governance at its core.

“

**What if every 6-minute
GP consultation in
Southeast Asia was
powered by AI GP?**

”

This is not simply a documentation assistant — it's the foundation for a scalable, compliant, multilingual healthcare AI operating system across diverse clinical settings.

9.1 Cross-Specialty Collaboration & Specialist Modules

Beyond general practice, AI GP is developing cross-specialty modules that enable:

- Streamlined referrals and shared care pathways
- Co-managed chronic disease coordination
- Specialist outpatient tools, including:
 - Condition-specific digital intake forms
 - Pre-procedure preparation workflows
 - Longitudinal patient summaries
 - Automated follow-up protocols for fields such as dermatology, endocrinology, internal medicine

Embedding AI support across specialties ensures standardized, efficient care throughout the patient journey.



9.2 Safe Autonomous Workflows for Repetitive Tasks

AIGP is actively piloting safe autonomous workflows for well-defined, lower-risk clinical operations, including:

- Chronic disease recalls
- Post-vaccination monitoring
- Medication adherence check-ins

Each autonomous workflow is designed with:

- Full clinician override authority
- Structured escalation protocols for red-flag cases
- Transparent audit trails for all AI-driven decisions

These capabilities also support AIGP's regulatory pathway toward eventual Class B SaMD classification.

9.3 Population Health Scale-Up

We also aspire for AIGP's Anzu outreach module to eventually enable national-scale population health campaigns:

- Preventive screenings
- Chronic disease education
- Vaccination reminders
- Public health engagement

Using multilingual, multi-channel delivery across WhatsApp, SMS, and voice, AIGP allows public health teams to target communications based on:

- Demographics
- Clinical risk profiles
- Patient preferences

This positions AIGP as a critical public health engagement platform for Asia's multilingual, multicultural populations.



9.4 Deep Integration with National Health Infrastructure

AIGP Health is building robust integrations with key national healthcare platforms in Singapore, including:

- HealthHub
- National Electronic Health Record (NEHR)
- Next Generation EMR (NGEMR)
- SingPass authentication via Synapse

These integrations enable secure bi-directional data flow across clinics, hospitals, and government systems — establishing AIGP as an interoperable clinical AI layer across Singapore's entire healthcare ecosystem.

9.5 Strengthening AI Governance & Safety Assurance

To maintain trust as capabilities scale, AIGP's governance model includes:

- Continuous model version control & performance monitoring
- Structured clinician override tracking for every AI-generated suggestion
- Explainability layers to ensure transparent AI outputs
- Embedded clinician feedback loops to drive ongoing system learning

AIGP Health is committed to remaining at the forefront of responsible, regulated, auditable clinical AI — aligned with both national health regulators and frontline clinical realities.



9.6 Vision: Asia's Regulated Clinical AI Operating System

ALGP Health is not just solving clinician burnout. We are laying the foundation for regulated clinical AI infrastructure across Asia — combining:

- Multilingual care continuum coverage
- Real-time agentic clinical intelligence
- National-level interoperability
- Clinician-first safety governance
- Scalable enterprise integration models

Our Vision:

“To power every regulated clinical workflow across ASEAN, becoming the trusted infrastructure partner for governments, health systems, and enterprise health platforms”



10. Call to Action



The future of healthcare demands solutions that are clinically grounded, ethically governed, and technologically scalable. AIGP Health is positioned to meet that future — empowering healthcare professionals with AI tools designed to reduce administrative burden, enhance clinical precision, strengthen patient engagement, and build system-wide resilience.

We invite:

- **Clinicians, nurses, allied health teams, and administrators** to collaborate with us in shaping practical, safe, and effective AI workflows that support real-world daily care.
- **GP practices, specialist clinics, polyclinics, telehealth providers, and community health centers** to partner with AIGP's modular platform, designed to integrate seamlessly into existing workflows with minimal disruption.
- **Digital health platforms, EMR vendors, pharmacy networks, and care coordination services** to leverage AIGP's open API architecture for integrated, patient-centered care ecosystems.
- **Regulators, public health agencies, and hospital systems** to co-develop transparent, auditable, and trustworthy AI governance frameworks that ensure clinical accountability at every level.
- **Investors, grant-makers, and research collaborators** who share our vision for sustainable healthcare transformation to join us as we scale AIGP across Singapore, Southeast Asia, and beyond.

The clinical need is clear. The technology is ready. What remains is collective execution.

Let's reimagine healthcare — not by replacing the human touch, but by protecting and amplifying it through responsible, human-centered AI.



About the Authors

This white paper was authored by the founding team of AIGP Health — a Singapore-based healthtech startup led by clinicians, engineers, and clinical informatics experts. Built by healthcare professionals who understand the operational realities of frontline care, AIGP Health is committed to reshaping healthcare through safe, responsible AI innovation.

Contact: hi@aigp.health

Founding Team:

Dr Anindita Santosa
Co-Founder & CEO, AIGP Health

Dr Yudara Kularathne
Co-Founder & CTO, AIGP Health

Dr Nicholas Chia
Co-Founder, AIGP Health

Dr Prateet Singh
**Co-Founder & Head of
Operations, AIGP Health**

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