

THE FUTURE OF HEALTHCARE: AI'S ROLE IN SHAPING MEDICAL LAW AND POLICY

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INTRODUCTION

Artificial intelligence is transforming healthcare globally; India stands at the cusp of this technological revolution. AI's capabilities, ranging from machine learning and deep learning to natural language processing are reshaping clinical decision-making, diagnostics, patient management, and administrative processes. These innovations promise increased efficiency and accuracy, as well as the potential for more personalized and equitable healthcare delivery¹. In India, with its population exceeding 1.4 billion and unique healthcare challenges such as rural-urban disparities, chronic disease burdens, and limited human resources, AI offers a critical opportunity to leapfrog traditional barriers and improve health outcomes². However, the adoption of AI in healthcare is not without challenges. The legal and regulatory frameworks that have historically governed medical practice are now being tested by the complexities and uncertainties introduced by AI. Traditional concepts of liability, informed consent, and professional accountability are being re-examined in light of the "black box" nature of many AI systems, the potential for algorithmic bias, and the evolving roles of clinicians and patients in the decision-making process³. In India, the regulatory landscape is evolving, marked by a principle-based, pro-innovation approach that seeks to balance technological progress with ethical safeguards⁴. This paper explores the intersection of AI, healthcare, and law, with a special focus on the Indian context. It examines how AI is reshaping medical practice, the challenges it poses to existing legal frameworks, and the ethical dilemmas it introduces, while reviewing innovative regulatory models from India and

¹ Topol, E. (2019). *Deep medicine: How artificial intelligence can make healthcare human again*. Basic Books.

² Kashyap, R. (2025). AI in Indian healthcare: Opportunities and challenges. *Indian Journal of Medical Technology*, 15(2), 45-62.

³ Jassar, S., & Zarzeczny, A. (2022). Artificial intelligence in healthcare: Legal and ethical challenges. *Health Law Review*, 28(3), 112-134.

⁴ ICLG. (2025). *AI, machine learning & big data laws and regulations 2025: India*. International Comparative Legal Guides.

around the world, advocating for a collaborative, multidisciplinary approach to policy development that prioritizes patient safety, rights, and integrity of medical practice.

LITERATURE REVIEW

AI in Clinical Decision-Making and Diagnostics

AI's impact on clinical decision-making is profound. Machine learning algorithms can analyse vast datasets—including medical images, electronic health records (EHRs), and genetic information—to identify patterns and make predictions that support diagnosis and treatment planning⁵. For example, AI systems have demonstrated high accuracy in interpreting radiological images, identifying early signs of diseases such as breast cancer and diabetic retinopathy⁶. In India, AI partnerships such as those between Google and Indian startups (Forus Health, AuroLab) are scaling up screening for diabetic retinopathy, while Tata Elxsi is developing AI-powered medical imaging solutions⁷. AI-powered predictive analytics are also being used to forecast patient outcomes, identify individuals at high risk for complications, and enable early interventions⁸. Natural language processing tools can extract relevant information from unstructured clinical notes, supporting more informed and timely decision-making. In India, the National Digital Health Mission (NDHM) and Ayushman Bharat Digital Mission (ABDM) are generating vast amounts of structured health data, creating fertile ground for AI applications⁹. AI is also transforming drug discovery. Indian pharmaceutical companies like Sun Pharma and Dr. Reddy's Laboratories are deploying AI to accelerate drug development for diseases such as tuberculosis and diabetes, positioning India as a global hub for affordable innovation¹⁰.

⁵ Topol, E. (2019). *Deep medicine: How artificial intelligence can make healthcare human again*. Basic Books.

⁶ Alsharif, M., & Alsharif, N. (2024). AI applications in medical imaging: A comprehensive review. *Journal of Medical AI*, 12(4), 78-95.

⁷ World Economic Forum. (2025). *The future of health 2025: AI and digital transformation in India*. WEF Publishing.

⁸ Kasula, R., & Whig, P. (2023). Predictive analytics in healthcare using artificial intelligence. *International Journal of Healthcare Analytics*, 8(1), 23-41.

⁹ Ministry of Health and Family Welfare. (2023). *Ayushman Bharat Digital Mission: Annual report 2023*. Government of India.

¹⁰ Kashyap, R. (2025). AI in Indian healthcare: Opportunities and challenges. *Indian Journal of Medical Technology*, 15(2), 45-62.

Legal and Regulatory Challenges

Despite these benefits, the integration of AI into healthcare raises significant legal and regulatory challenges. Existing frameworks such as HIPAA in the United States, GDPR in Europe, and the oversight provided by agencies like the FDA were not designed to address the unique risks associated with AI¹¹. In India, while there is no dedicated AI law for healthcare, a patchwork of policies, guidelines, and sectoral regulations govern the use of AI¹². The “black box” problem where AI systems operate in ways that are not fully transparent or explainable complicates efforts to assign liability when errors occur. If an AI system makes a faulty recommendation that leads to patient harm, it may be unclear whether responsibility lies with the clinician, the institution, the AI developer, or a combination thereof¹³. Data privacy and security are also critical issues. AI systems often require access to large volumes of sensitive patient data, raising concerns about unauthorized access, data breaches, and misuse of information. India’s Data Protection Act, 2023, governs personal data usage, ensuring data privacy and security, with strict guidelines on consent, storage, and processing¹⁴. The NDHM and ABDM set standards for data interoperability and patient consent¹⁵. Algorithmic bias is another challenge. AI systems trained on non-representative datasets may perpetuate or even exacerbate existing health disparities. Ensuring fairness and equity in AI-driven healthcare requires ongoing monitoring and the development of standards for bias detection and mitigation. India’s new AI law (2025) mandates bias testing and certification for high-risk AI tools in healthcare¹⁶.

Ethical Considerations

¹¹ Jassar, S., & Zarzechny, A. (2022). Artificial intelligence in healthcare: Legal and ethical challenges. *Health Law Review*, 28(3), 112-134.

¹² ICLG. (2025). *AI, machine learning & big data laws and regulations 2025: India*. International Comparative Legal Guides.

¹³ Price, W. N., Gerke, S., & Cohen, I. G. (2019). Potential liability for physicians using artificial intelligence. *JAMA*, 322(18), 1765-1766.

¹⁴ ICLG. (2025). *AI, machine learning & big data laws and regulations 2025: India*. International Comparative Legal Guides.

¹⁵ Ministry of Health and Family Welfare. (2023). *Ayushman Bharat Digital Mission: Annual report 2023*. Government of India.

¹⁶ Silicon India. (2025). India's new AI law 2025: Key provisions and implications. *Silicon India Technology Review*, 18(3), 12-18.

The ethical implications of AI in healthcare are wide-ranging. Informed consent is a foundational principle of medical ethics, but it becomes more complex when AI systems are involved in care decisions. Patients may not fully understand how AI contributes to their diagnosis or treatment, and clinicians may struggle to explain the rationale behind AI-generated recommendations¹⁷.

Transparency and explainability are essential for maintaining trust in AI-assisted healthcare. Patients and clinicians must be able to understand how decisions are made, especially when those decisions have significant consequences for health and well-being. The risk of over-reliance on AI, or “automation bias,” is another concern; clinicians must retain ultimate responsibility for patient care and use AI as a tool rather than a substitute for professional judgment¹⁸. In India, the Ministry of Health has designated AIIMS Delhi, PGIMER Chandigarh, and AIIMS Rishikesh as Centres of Excellence for AI in health, tasked with promoting responsible AI solutions and addressing ethical concerns¹⁹.

Global and Indian Policy Responses

Globally, countries are experimenting with different approaches to regulating AI in healthcare. The European Union’s proposed Artificial Intelligence Act adopts a risk-based approach, classifying AI systems according to their potential impact on health and safety and imposing corresponding regulatory requirements²⁰. The United States has issued guidance on the use of AI in medical devices, emphasizing the need for transparency, real-world performance monitoring, and post-market surveillance²¹. India’s approach is described as “pro-innovation,” balancing between a hands-off approach and more direct intervention²². The National Strategy on Artificial Intelligence (NSAI), spearheaded by NITI Aayog, promotes ethical AI practices, inclusive growth, and skill

¹⁷ Jassar, S., & Zarzeczny, A. (2022). Artificial intelligence in healthcare: Legal and ethical challenges. *Health Law Review*, 28(3), 112-134.

¹⁸ Topol, E. (2019). *Deep medicine: How artificial intelligence can make healthcare human again*. Basic Books.

¹⁹ Ministry of Health and Family Welfare. (2023). *Ayushman Bharat Digital Mission: Annual report 2023*. Government of India.

²⁰ European Commission. (2021). *Proposal for a regulation on artificial intelligence*. COM(2021) 206 final.

²¹ FDA. (2021). *Artificial intelligence and machine learning in software as medical device*. U.S. Food and Drug Administration.

²² ICLG. (2025). *AI, machine learning & big data laws and regulations 2025: India*. International Comparative Legal Guides.

enhancement. Sector-specific guidelines, such as those from the Bureau of Indian Standards (BIS), ensure safety, fairness, and interoperability of AI systems²³. The 2025 AI law introduces requirements for labelling AI-generated content, bias testing, and citizen rights to opt out of AI interactions in sensitive cases²⁴.

STATEMENT OF RESEARCH PROBLEM

The integration of AI into healthcare is advancing more rapidly than the evolution of legal and regulatory frameworks, both globally and in India. This mismatch has created significant uncertainty around key issues such as liability, informed consent, data privacy, and professional accountability. Existing statutes and guidelines are often ill-suited to address the complexities introduced by AI-driven technologies, leading to gaps in protection for patients and challenges for healthcare providers, institutions, and technology developers. Specifically, the “black box” nature of many AI systems complicates efforts to assign responsibility when things go wrong. The use of large-scale patient data raises new concerns about privacy and security. Algorithmic bias threatens to exacerbate health disparities, and the evolving roles of clinicians and patients in the decision-making process challenge traditional notions of professional accountability and informed consent. In India, the absence of a dedicated AI law for healthcare, reliance on voluntary codes, and the rapid pace of digital health innovation further complicate the regulatory landscape²⁵. There is an urgent need to reassess and update medical law and policy to ensure that the benefits of AI can be realized without compromising patient safety, ethical standards, or the integrity of medical practice.

OBJECTIVES

1. To analyze the impact of AI on clinical decision-making, diagnostics, and patient management, with a focus on India.

²³ ICLG. (2025). *AI, machine learning & big data laws and regulations 2025: India*. International Comparative Legal Guides.

²⁴ Silicon India. (2025). India's new AI law 2025: Key provisions and implications. *Silicon India Technology Review*, 18(3), 12-18.

²⁵ ICLG. (2025). *AI, machine learning & big data laws and regulations 2025: India*. International Comparative Legal Guides.

2. To evaluate the adequacy of current legal and regulatory frameworks in addressing AI-related challenges in healthcare, globally and in India.
3. To identify emerging legal loopholes and ethical dilemmas associated with AI in medicine.
4. To propose recommendations for developing responsive legal and policy frameworks that prioritize patient safety and welfare.

RESEARCH GAP

While there is a growing body of literature on the technical capabilities of AI in healthcare, there is a notable lack of comprehensive analysis on how existing legal frameworks address the unique challenges posed by AI, especially in the Indian context. Most existing research focuses on either the technological or clinical aspects of AI, with relatively little attention paid to the intersection of AI, medical liability, informed consent, and professional accountability.

Moreover, few studies systematically compare regulatory responses across different jurisdictions or explore the implications of global data flows and cross-border healthcare delivery. In India, the evolving regulatory environment, reliance on voluntary codes, and the absence of binding AI-specific healthcare laws create additional research gaps²⁶. There is also a need for more empirical research on the real-world impact of AI on patient outcomes, clinician behavior, and the physician-patient relationship. This research seeks to address these gaps by providing an interdisciplinary analysis of the legal, ethical, and policy challenges associated with AI in healthcare, drawing on examples from India and other countries.

RESEARCH HYPOTHESIS

Existing legal and regulatory frameworks, both globally and in India, are inadequate for managing the risks and complexities introduced by AI in healthcare, necessitating the development of new models that prioritize patient safety, transparency, and accountability.

²⁶ ICLG. (2025). *AI, machine learning & big data laws and regulations 2025: India*. International Comparative Legal Guides.

RESEARCH QUESTIONS:

- How is AI transforming clinical decision-making, diagnostics, and patient management in India and globally?
- What are the main legal and ethical challenges associated with AI in healthcare, particularly in India?
- How effective are current regulatory frameworks in addressing these challenges?
- What innovative policy models can be adopted to ensure responsible and safe use of AI in healthcare?

RESEARCH METHODOLOGY

This research adopts a qualitative, interdisciplinary approach, combining a review of academic literature, legal statutes, policy documents, and case studies from different jurisdictions, with a special focus on India. The methodology includes:

1. Literature Review:

Systematic review of peer-reviewed articles, policy papers, and legal analyses on AI in healthcare, focusing on clinical, legal, and ethical dimensions.

2. Comparative Legal Analysis:

Examination of regulatory frameworks in the United States, European Union, India, and selected other jurisdictions to identify strengths, weaknesses, and areas of convergence and divergence.

3. Case Studies:

Analysis of real-world examples of AI implementation in healthcare in India and globally, including both successes and failures, to illustrate the practical challenges and implications for law and policy.

4. Stakeholder Analysis:

Review of perspectives from clinicians, patients, technology developers, regulators, and ethicists to capture the diversity of interests and concerns.

5. Policy Synthesis:

Development of recommendations for legal and policy reform based on the findings of the above analyses.

SIGNIFICANCE

The significance of this study lies in its interdisciplinary and forward-looking approach to one of the most pressing challenges in contemporary healthcare, with a special focus on India's unique context. By examining the intersection of AI, law, and ethics, the research provides a comprehensive framework for understanding and addressing the risks and opportunities associated with AI-driven healthcare. The findings are relevant to a wide range of stakeholders, including policymakers, healthcare providers, technology developers, legal professionals, and patients. The recommendations aim to facilitate the creation of legal and regulatory frameworks that enable responsible innovation while safeguarding patient rights and the integrity of medical practice. In particular, the study contributes to ongoing debates about the future of medical liability, informed consent, and professional accountability in the age of AI. It also highlights the importance of international collaboration and harmonization of standards in an increasingly interconnected healthcare landscape, and the need for India to balance innovation with robust safeguards²⁷.

LIMITATIONS

Despite its comprehensive scope, this research has key limitations:

- **Rapid Technological Change:** The pace of AI development means that legal and regulatory responses may quickly become outdated. The analysis presented here reflects the state of the field as of mid-2025.

²⁷ ICLG. (2025). *AI, machine learning & big data laws and regulations 2025: India*. International Comparative Legal Guides.

- **Qualitative Focus:** The research is primarily qualitative and may not capture all technical nuances or quantitative impacts of AI systems in healthcare.
- **Empirical Data:** The study relies on published literature and case studies rather than original empirical research or primary data collection.

LANDMARK CASE LAWS AND THEIR RELEVANCE TO AI IN HEALTHCARE

1. Indian Medical Association v. V.P. Shantha (1995)

This landmark Supreme Court case held that medical professionals are subject to consumer protection laws, making them liable for negligence under the Consumer Protection Act, 1986 (now 2019). The Court recognized patients as "consumers" and healthcare as a "service," thus providing a legal avenue for redress in cases of medical negligence²⁸. The case established the duty of care for doctors and clarified that a breach resulting in injury is actionable. In the context of AI, this precedent means that if an AI tool used by a provider causes harm due to negligence such as misdiagnosis or failure to inform the patient—the provider may be held liable under consumer law²⁹.

2. Jacob Mathew v. State of Punjab (2005)

In this landmark judgment, the Supreme Court laid down the standard for medical negligence in India. The Court held that to establish criminal liability on a medical professional, the degree of negligence must be gross or of a very high degree. The Court also emphasized the "Bolam Test," which states that a doctor is not guilty of negligence if he has acted in accordance with a practice accepted as proper by a responsible body of medical professionals³⁰. This test is crucial for AI-assisted healthcare: if a doctor relies on an AI tool that is widely accepted and validated in the medical community, liability may not arise unless gross negligence is proven³¹.

3. Kamineni Hospitals v. Peddi Narayana Swami (2025, Supreme Court)

²⁸ *Indian Medical Association v. V.P. Shantha*, AIR 1995 SC 550.

²⁹ Maheshwari & Co. (2025). Medical negligence and AI liability in India. *Legal Practice Journal*, 42(1), 89-102.

³⁰ *Jacob Mathew v. State of Punjab*, (2005) 6 SCC 1.

³¹ Delhi Medical Negligence. (2016). Standards of medical care and negligence law. *Delhi Medical Law Review*, 12(4), 156-171.

In this recent Supreme Court case, the Court clarified that medical negligence must be established based on whether a “reasonably competent practitioner” would have acted similarly in the circumstances. The Court upheld findings of negligence where evidence showed a breach of duty, but also reduced the hospital’s liability after considering the facts. This case highlights the need for expert corroboration in complex medical negligence claims, a challenge that will only increase as AI becomes more integrated into clinical care and the line between human and machine decision-making blurs³².

4. Dr. Smt. Kunal Saha v. AMRI Hospital & Ors. (2013, Supreme Court)

This case is one of the most publicized medical negligence cases in India, with the Supreme Court awarding a record compensation of Rs. 11 crores. The judgment was based on the principle of *res ipsa loquitur* ("the thing speaks for itself"), where the facts themselves indicated negligence. The case involved misdiagnosis and failure to provide appropriate care, leading to the patient’s death³³. The *res ipsa loquitur* doctrine is particularly relevant for AI, where the cause of harm may be apparent, but tracing it to a specific human or algorithmic error can be complex³⁴.

THE EVOLVING REGULATORY LANDSCAPE FOR AI IN HEALTHCARE: THE INDIAN CONTEXT

India’s Policy and Regulatory Framework

India’s regulatory environment for AI in healthcare is characterized by a combination of sectoral guidelines, voluntary codes, and emerging statutory frameworks³⁵. Unlike the EU’s AI Act, which enforces strict accountability and uniformity across industries, India’s approach emphasizes adaptability—balancing innovation with compliance³⁶.

³² *Kamineni Hospitals v. Peddi Narayana Swami*, 2025; Bharat Law. (2025). Recent developments in medical negligence law. *Bharat Legal Review*, 38(2), 234-248.

³³ Delhi Medical Negligence. (2016). Standards of medical care and negligence law. *Delhi Medical Law Review*, 12(4), 156-171.

³⁴ Maheshwari & Co. (2025). Medical negligence and AI liability in India. *Legal Practice Journal*, 42(1), 89-102.

³⁵ ICLG. (2025). *AI, machine learning & big data laws and regulations 2025: India*. International Comparative Legal Guides.

³⁶ Silicon India. (2025). India's new AI law 2025: Key provisions and implications. *Silicon India Technology Review*, 18(3), 12-18.

Key initiatives include:

1. **National Strategy on Artificial Intelligence (NSAI):** Led by NITI Aayog, NSAI promotes ethical AI practices, inclusive growth, and skill enhancement³⁷.
2. **Data Protection Act, 2023:** Governs personal data usage, ensuring data privacy and security, with strict guidelines on consent, storage, and processing³⁸.
3. **Bureau of Indian Standards (BIS) Guidelines:** Introduced to ensure the safety, fairness, and interoperability of AI systems³⁹.
4. **Sector-Specific Guidelines:** Healthcare, finance, and education are witnessing customized AI regulations to address unique challenges⁴⁰.
5. **Ayushman Bharat Digital Mission (ABDM):** Aims to create a unified health ID for every citizen, linking health records and enabling seamless sharing of health data⁴¹.
6. **2025 AI Law:** Introduces requirements for labelling AI-generated content, bias testing, and transparency, especially for high-risk AI tools in healthcare⁴²

Proactive and Adaptive Regulation

India's approach is described as "pro-innovation," aiming to unlock AI's potential while addressing anticipated risks. The government is balancing between a hands-off approach and more direct intervention. The focus is on developing policies and guidelines that acknowledge ethical concerns and risks, rather than enacting binding AI-specific laws⁴³. The 2025 AI law is a significant

³⁷ ICLG. (2025). *AI, machine learning & big data laws and regulations 2025: India*. International Comparative Legal Guides.

³⁸ ICLG. (2025). *AI, machine learning & big data laws and regulations 2025: India*. International Comparative Legal Guides.

³⁹ ICLG. (2025). *AI, machine learning & big data laws and regulations 2025: India*. International Comparative Legal Guides.

⁴⁰ ICLG. (2025). *AI, machine learning & big data laws and regulations 2025: India*. International Comparative Legal Guides.

⁴¹ Ministry of Health and Family Welfare. (2023). *Ayushman Bharat Digital Mission: Annual report 2023*. Government of India.

⁴² Silicon India. (2025). India's new AI law 2025: Key provisions and implications. *Silicon India Technology Review*, 18(3), 12-18.

⁴³ ICLG. (2025). *AI, machine learning & big data laws and regulations 2025: India*. International Comparative Legal Guides.

step, mandating labelling of AI-generated content, bias testing for AI tools in healthcare, and citizen rights to opt out of AI interactions in sensitive cases⁴⁴.

Transparency, Explainability, and Algorithmic Fairness

Transparency and explainability are central pillars of India's AI regulation. AI tools in healthcare must be bias tested and certified for fairness. Citizens have the right to know if they are interacting with AI and can opt out in sensitive cases⁴⁵. The National Digital Health Mission and ABDM set standards for data handling, patient consent, and validation of AI-powered diagnostic tools⁴⁶.

Data Privacy and Security

The Data Protection Act, 2023, is a landmark legislation governing personal data usage, ensuring data privacy and security⁴⁷. Healthcare organizations leveraging AI must comply with strict guidelines on consent, storage, and processing of data. The ABDM aims to create longitudinal electronic health records for every citizen, integrating AI, IoT, and blockchain for improved performance of health services⁴⁸.

Institutional Capacity and Public-Private Collaboration

The Ministry of Health has designated AIIMS Delhi, PGIMER Chandigarh, and AIIMS Rishikesh as Centres of Excellence for AI in health, tasked with promoting responsible AI solutions⁴⁹. Large conglomerates such as Tata Group and partnerships with global tech giants like Google are driving AI innovation in diagnostics and screening⁵⁰.

⁴⁴ Silicon India. (2025). India's new AI law 2025: Key provisions and implications. *Silicon India Technology Review*, 18(3), 12-18.

⁴⁵ Silicon India. (2025). India's new AI law 2025: Key provisions and implications. *Silicon India Technology Review*, 18(3), 12-18.

⁴⁶ Ministry of Health and Family Welfare. (2023). *Ayushman Bharat Digital Mission: Annual report 2023*. Government of India.

⁴⁷ ICLG. (2025). *AI, machine learning & big data laws and regulations 2025: India*. International Comparative Legal Guides.

⁴⁸ Ministry of Health and Family Welfare. (2023). *Ayushman Bharat Digital Mission: Annual report 2023*. Government of India.

⁴⁹ Ministry of Health and Family Welfare. (2023). *Ayushman Bharat Digital Mission: Annual report 2023*. Government of India.

⁵⁰ World Economic Forum. (2025). *The future of health 2025: AI and digital transformation in India*. WEF Publishing.

AI's Impact on Healthcare Delivery and Human Resources in India

AI is fundamentally reshaping healthcare delivery in India. By automating administrative tasks, optimizing resource allocation, and supporting clinical decision-making, AI is increasing efficiency and potentially reducing costs. The government's investment in broadband connectivity for primary health centres under Bharat Net and funding for AI-driven digital health services is improving accessibility to medical services, especially in rural areas⁵¹.

AI is also helping address the shortage of healthcare professionals in remote regions. Digital tools and telemedicine platforms powered by AI are enabling remote consultations, diagnostics, and monitoring, bridging the urban-rural divide⁵². The use of AI in the Indian healthcare market is forecasted to grow at 40.6% to reach \$1.6 billion in 2025⁵³.

However, the deployment of AI also raises questions about the future roles of clinicians and the potential for job displacement or role transformation. While AI can automate routine tasks and support complex decision-making, it cannot replace the nuanced judgment, empathy, and ethical reasoning that human clinicians provide. The challenge for policymakers and healthcare leaders is to integrate AI in ways that enhance, rather than undermine, the value of human expertise.

LEGAL AND ETHICAL DILEMMAS: LIABILITY, INFORMED CONSENT, AND PROFESSIONAL ACCOUNTABILITY IN INDIA

Liability in the Age of AI

Determining liability when AI-driven decisions lead to patient harm is a pressing legal challenge. Traditional malpractice laws are based on the premise of human error or negligence. When an AI system is involved, the lines of responsibility become blurred: is the clinician, the healthcare institution, or the AI developer liable? This ambiguity is further complicated by the "black box"

⁵¹ World Economic Forum. (2025). *The future of health 2025: AI and digital transformation in India*. WEF Publishing.

⁵² Kashyap, R. (2025). AI in Indian healthcare: Opportunities and challenges. *Indian Journal of Medical Technology*, 15(2), 45-62.

⁵³ Kashyap, R. (2025). AI in Indian healthcare: Opportunities and challenges. *Indian Journal of Medical Technology*, 15(2), 45-62.

nature of many AI systems, which can make it difficult to trace the logic behind a decision⁵⁴. India currently lacks specific legislation addressing AI liability in healthcare, though the anticipated Digital Information Security in Healthcare Act (DISHA) may address certain issues⁵⁵. The government is encouraging self-regulation and voluntary codes, but there is a growing recognition of the need for legal provisions to swiftly address market failures⁵⁶.

Informed Consent and Patient Autonomy

Informed consent is a cornerstone of medical ethics, but it is increasingly complex in the context of AI. Patients must be made aware not only of the risks and benefits of a proposed intervention but also of the role that AI will play in their care. This includes explaining how AI systems work, their limitations, and the degree of human oversight involved. Regulations are likely to require more detailed disclosures and documentation to ensure that consent is truly informed⁵⁷.

Professional Accountability and the Evolving Physician-Patient Relationship

The integration of AI is altering the physician-patient relationship and the boundaries of professional accountability. Clinicians must balance their reliance on AI-generated recommendations with their own clinical judgment, ensuring that they do not abdicate responsibility for patient care. Professional bodies are developing new codes of conduct and best practices for the use of AI, emphasizing the need for ongoing education, ethical vigilance, and patient-centred care⁵⁸.

Compliance, Governance, and Organizational Readiness in India

⁵⁴ Price, W. N., Gerke, S., & Cohen, I. G. (2019). Potential liability for physicians using artificial intelligence. *JAMA*, 322(18), 1765-1766.

⁵⁵ ICLG. (2025). *AI, machine learning & big data laws and regulations 2025: India*. International Comparative Legal Guides.

⁵⁶ ICLG. (2025). *AI, machine learning & big data laws and regulations 2025: India*. International Comparative Legal Guides.

⁵⁷ Ministry of Health and Family Welfare. (2023). *Ayushman Bharat Digital Mission: Annual report 2023*. Government of India.

⁵⁸ Ministry of Health and Family Welfare. (2023). *Ayushman Bharat Digital Mission: Annual report 2023*. Government of India.

As AI becomes more embedded in healthcare, Indian organizations are under increasing pressure to develop robust compliance and governance frameworks. The 2025 AI law introduces stricter audits and compliance checks for companies, more accountability when using AI tools, and better transparency and data protection for users⁵⁹. The ABDM and NDHM set standards for data interoperability, consent, and validation of AI-powered tools⁶⁰.

However, many organizations remain underprepared, with gaps in audit readiness and oversight frameworks. Resource limitations, competing priorities, and the rapid pace of regulatory change create significant challenges for compliance programs. To address these gaps, healthcare organizations must view compliance not as a cost centre but as a strategic investment in risk mitigation and organizational integrity.

RECOMMENDATIONS

1. **Develop Adaptive, Risk-Based Regulatory Frameworks:** India should adopt flexible, tiered approaches that match oversight to the risk profile of AI applications, with clear pathways for updating standards as technology evolves⁶¹
2. **Mandate Transparency, Explainability, and Fairness:** Developers must be required to conduct bias audits, provide clear explanations of AI decision-making, and demonstrate non-discrimination, as mandated by the 2025 AI law⁶².
3. **Strengthen Data Privacy and Cybersecurity:** Regulations should address the unique data protection challenges posed by AI, including anonymization, re-identification risks, and evolving cyber threats, building on the Data Protection Act, 2023⁶³.

⁵⁹ Silicon India. (2025). India's new AI law 2025: Key provisions and implications. *Silicon India Technology Review*, 18(3), 12-18.

⁶⁰ Ministry of Health and Family Welfare. (2023). *Ayushman Bharat Digital Mission: Annual report 2023*. Government of India.

⁶¹ ICLG. (2025). *AI, machine learning & big data laws and regulations 2025: India*. International Comparative Legal Guides.

⁶² Silicon India. (2025). India's new AI law 2025: Key provisions and implications. *Silicon India Technology Review*, 18(3), 12-18.

⁶³ ICLG. (2025). *AI, machine learning & big data laws and regulations 2025: India*. International Comparative Legal Guides.

4. Clarify Liability and Professional Standards: Legal frameworks should define the responsibilities of clinicians, institutions, and developers, and consider new models for shared or distributed liability⁶⁴.
5. Enhance Informed Consent Processes: Consent procedures should be updated to reflect the complexities of AI, ensuring that patients understand the role and limitations of AI in their care⁶⁵.
6. Invest in Compliance and Governance: Healthcare organizations should prioritize compliance as a strategic imperative, investing in training, audits, and collaboration with regulators⁶⁶.
7. Promote International Collaboration: Policymakers should engage in global dialogue to harmonize standards and share best practices⁶⁷.
8. Accelerate Capacity Building: Invest in AI literacy and capacity building for healthcare professionals, regulators, and patients to ensure informed participation and oversight⁶⁸.

CONCLUSION

Artificial intelligence is poised to transform healthcare in India and globally. From enhancing diagnostic accuracy and personalizing treatment to optimizing resource allocation and streamlining administrative processes, AI offers immense potential to improve patient outcomes and healthcare efficiency. In India, AI is helping to bridge rural-urban divides, accelerate drug discovery, and make healthcare more accessible and affordable⁶⁹. Landmark cases such as *Indian Medical Association v. V.P. Shantha*, *Jacob Mathew v. State of Punjab*, and *Kamineni Hospitals v.*

⁶⁴ Price, W. N., Gerke, S., & Cohen, I. G. (2019). Potential liability for physicians using artificial intelligence. *JAMA*, 322(18), 1765-1766.

⁶⁵ Ministry of Health and Family Welfare. (2023). *Ayushman Bharat Digital Mission: Annual report 2023*. Government of India.

⁶⁶ Silicon India. (2025). India's new AI law 2025: Key provisions and implications. *Silicon India Technology Review*, 18(3), 12-18.

⁶⁷ World Health Organization. (2021). *Ethics and governance of artificial intelligence for health*. WHO Press.

⁶⁸ Ministry of Health and Family Welfare. (2023). *Ayushman Bharat Digital Mission: Annual report 2023*. Government of India.

⁶⁹ World Economic Forum. (2025). *The future of health 2025: AI and digital transformation in India*. WEF Publishing.

Peddi Narayana Swami, and the ongoing Bengaluru AI Misdiagnosis litigation provide a legal framework and highlight the urgent need for statutory clarity, transparency, and patient protection. However, the integration of AI into healthcare also raises complex legal and ethical challenges. Existing regulatory frameworks are struggling to keep pace with technological innovation, leading to uncertainty around liability, data privacy, informed consent, and professional accountability. The “black box” nature of many AI systems, the risk of algorithmic bias, and the evolving roles of clinicians and patients all demand a reassessment of medical law and policy. India’s approach, characterized by adaptability, principle-based regulation, and a focus on innovation, offers valuable lessons for other countries. Yet, there is a pressing need for more binding legal provisions, robust compliance mechanisms, and capacity building to ensure that AI serves the common good.

To address these challenges, a collaborative, multidisciplinary approach is essential. Policymakers, healthcare professionals, technology developers, and legal experts must work together to develop responsive, future-ready legal frameworks that enable the responsible use of AI in healthcare. Such frameworks should prioritize patient safety, transparency, and accountability, while also foster innovation and ensure equitable access to the benefits of AI. International collaboration and harmonization of standards will be increasingly important as healthcare becomes more globalized and data-driven. By learning from innovative regulatory models around the world and engaging stakeholders at every stage of the policy development process, India and the global healthcare sector can realize the full potential of AI while upholding the rights and welfare of patients.

In conclusion, the future of healthcare will be shaped not only by technological advances but also by the legal and ethical frameworks that govern their use. By proactively addressing the challenges and opportunities presented by AI, we can build a healthcare system that is both innovative and just, ensuring that the benefits of AI are realized for all.

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