

# Suki Assistant








by Chief Operating Officer (formerly CTO)

AI Ambient Scribes

## Details

Review Date	11/03/2023
Purchase Date	Q2'21
Implementation Time	<2 weeks
Product Still in Use	Yes
Purchase Amount	Annual license agreement with flat monthly fee that covers a pre-determined number of users
Intent to Renew	100%
Review Source	Elion

## Product Rating

Product Overall		5.0
Use Case Fit		5.0
Ease of Use		5.0
API		N/A
Integrations		5.0
Support		5.0
Value		5.0

## About the Reviewer

Purchasing Team Implementation Team  
Product Oversight

## Reviewer Organization

Primary Care Clinic Primary Care

## Reviewer Tech Stack

athenahealth Salesforce Hubspot  
Hint Health

## Other Products Considered

DeepScribe iScribe

## Summary

- **Product Usage:** Suki is used for dictation directly into patient encounter notes and other areas, with additional functionalities for using templates in encounter plans and macros.
- **Strengths:** Suki's main strength is its user-friendly nature, which allows physicians to interact with the product easily and comfortably without needing technical expertise.
- **Weaknesses:** Suki could improve its native application to the same quality level as its enhanced review and further refine the tuning of its ambient mode.
- **Overall Judgment:** Suki serves well as a reliable, user-friendly dictation tool with a helpful support team; its ability to work in various modes is valuable, even though some improvement areas remain.

## Review

**So today we're chatting about Suki and how it's used at your company. Before we jump into that, could you give a brief overview of the company and your role there?**

We are a primary care provider under the concierge model. Our patients pay a membership fee for non-covered clinical services, and we have other value-added services around health and wellness as well. We are in four states with about 32 providers. I'm the Chief Operating Officer; I joined as the Chief Technology Officer and then took on the operations role after the first three or four years.

**What was the primary problem you were looking to solve with a tool like Suki? What functionality were you looking for?**

Eight or nine years ago, we implemented athenahealth, at that point we began using Entrada for dictation. At that time there weren't many offerings on the marketplace. We used Entrada for several years, but after they were acquired by NextGen we started to see feature drift between EMRs. At that point we discovered iScribe and migrated from Entrada to iScribe. We stayed with iScribe for several years, but for several of our providers that created very long notes we were having to send their dictation through the editing process and that was rather costly.

Both products (Suki and iScribe) have/had two main modes: one was basically a cloud-based dictation, which would do voice-to-text into whichever text box you had highlighted on the computer, and the other interfaced with the EMR to pull up a patient note and dictate directly into the encounter. From a cost perspective, iScribe became prohibitively expensive for our more verbose physicians. This expense was due to the editing option where a person, on the iScribe side, would go through the notes after the voice-to-text process and clean them up, which could get extremely expensive, since they charged on a per line basis. We ended up spending \$400–500 per month in editing fees for some of our physicians. At the time Suki bundled their enhanced review offering with their product, so we were able to get a cleaner note for more of our physicians at a much lower price.

In addition, iScribe's review process took about a day to turn around, which became a bit of a choke point for some of our physicians who liked to close their notes out by the end of the day. Suki was able to return their enhanced reviews in a couple hours, which we were pretty pleased by.

Over time we've been able to take advantage of additional functionality in the product as well, such as using templates in encounter plans and macros to speed up the documentation process.

I think at the start the functionality for the tools we tried was about at parity, but Suki has evolved more quickly than some of the other products we looked at.

**Have you looked at any other competitors recently since moving to Suki?**

I have not, for a couple reasons. First, Suki is serving us well. They've taken an approach to this technology where it's one tool that can be used multiple ways, and that serves the individual needs of our physicians very well. Also, they show up as a partner, as opposed to a vendor, and that's huge to me. They're not just trying to sell us a product. They've been very good at working with us to make sure we can get as much use out of the tool as we can, and that's made all the difference in the world.

**How has your experience been with support and account management?**

Again, it feels like a partnership. I always had trouble getting a response from iScribe and ended up having to escalate even up to the CTO to get issues resolved. But with Suki, regardless of who I reach out to, they're always very responsive and make sure to be there to help our physicians and our IT team. We have a point person on our IT team who has a lot of familiarity with the product, and she has a point person on their team.

### **How was the sales and implementation process?**

Implementing it with Athena was very easy: you get a request from Athena and approve it, and then Suki picks up the integration from there. It tends to go very quickly as long as it's not a new custom development. We started by bringing on a couple physicians to try it out. Suki's implementation team works directly with the physician to make sure they have the application loaded on their phone or computer and that it's connecting properly, and they walk the physician through how to use the product. It was a fairly light lift on our side, so much so that if we had to onboard a physician ourselves, we'd struggle because we're typically not involved!

### **How does Suki integrate into your clinical workflow?**

Some physicians are just using the phone application to do basic dictation into the encounter and sending it directly to Athena with no editing. We have other doctors who use it more extensively, inputting the entire encounter in the application and sending it through enhanced review. There's another use case where they can use Suki as a desktop application and dictate into any other program they're using, such as email.

We also have two providers who are piloting the ambient version of Suki; we have had some localized success, and Suki is working with us to tweak it for the way we practice. For us, patient visits can be 30 to 90 minutes long, and they're very conversational: a patient might talk about many topics other than their health during a visit. We tried using DeepScribe a few years ago and it didn't work well for us. We're trying again with Suki's version, and it's working okay, though they're still more productive with the other dictation modes. It would be a perfect use case for one of our physicians, who is a great doctor, but a very sparse documenter. But tuning the tool to our model of practice is going to take some work. They've made some fairly significant strides recently on it though.

### **How did DeepScribe and Suki compare in their ambient products?**

As a bit of background, we started using DeepScribe because we had some doctors that used in-person scribes and they needed an alternative when COVID hit. We found that it didn't capture the "meat" of the encounter very well. I think it's because their orientation was more aligned with specialty care interactions such as orthopedics or cardiology, rather than a conversational primary care setting. The product was more tuned for that type of encounter and it missed a lot in our use cases, and the doctors had to go back and fill in the holes.

We've iterated with Suki as they develop their ambient product. The doctors we have testing it don't pull any punches! And Suki has taken that feedback to heart. At first it was trying to create too concise of a note, and wasn't capturing the breadth of the conversations. They've since tuned their engine a bit to create a more robust note, and we're trying to find where we want to land on that continuum from concise to robust.

### **What strengths and weaknesses do you see with Suki?**

The main strength is that, even though they've evolved the product over time, they haven't changed how the physician interacts with it. That can be a huge hurdle for any practice: your physicians aren't generally technical people, so you

only want to teach them how to use a product once. Suki has done a very good job of keeping the interaction the same and just changing into different modes.

Another strength is the people. We have a person who comes onsite to our offices once a quarter or so, and sits with our physicians to help them use more of Suki's features and functionality, and to onboard new users. That's huge for us.

It's tough for me to think of weaknesses; I think the product works really well. I'd love for their native application to work as well as the enhanced review, and they've made some strides toward that. I think that their vision is to remove the enhanced review eventually once the native mode is at parity from a note quality perspective. And then tuning the ambient mode properly is another area to improve, which is an interesting dilemma. Every physician wants to document differently and with a different amount of detail, so finding that level for each physician will be a challenge.

### **How is the product from a UI or reliability standpoint?**

I don't use the product much myself since I'm not a clinical person, but I haven't heard a lot of negative feedback from our physicians about their struggling to use it. And I don't think we've had many outages in the product itself. Where we've had challenges, it's usually a problem in our network, how we've configured the connection to their data centers, or running into bandwidth constraints.

### **To what degree is Suki integrated into the rest of your tech stack?**

It's not integrated with any of our other tools, except for the bidirectional integration with Athena, where it can pull schedules and drop notes in. The dictation mode is usable with any text box on a computer, but there aren't any other API connections.

### **Do you think you made the right decision going with Suki?**

Absolutely. And we tried enough other products that weren't the right solution to really confirm that!

### **Would you highlight any key areas of growth?**

I think there are more forward-looking areas to grow, such as more integration of AI into the tool, but I don't have any specific areas. In the short term, it's more around the ambient mode and tuning that for specific practices and physicians.

### **Do you have any advice for buyers looking for a dictation solution?**

Ask the questions. That's how we've been able to get what we need and find a partner, is by not being shy about raising issues or concerns, things we want to see in the product, and ways we want to be supported in our journey.