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Crossing the Einstein Divide

Transforming healthcare marketing in an AI era

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OVERVIEW

At BPD, we spend our days partnering with healthcare marketing and communications leaders across the country. This year, a single topic has come to dominate our conversations: Artificial Intelligence. The excitement is palpable, but so is the uncertainty. While everyone is eager to harness the power of AI, most don't know where to start—and they're missing a huge piece of the puzzle.

The headlines around AI primarily focus on saving time and costs. And in the rush to automate, we've noticed the conversation is focused almost exclusively on efficiency and effectiveness.

But what if that's only the beginning?

This paper aims to inspire marketers to dream bigger. It's an invitation to ask, "What can we do that's never been done before?"

To answer that question, it helps to first **imagine what that future could look like.**

Letter from the Future

It's 2035. You're a Chief Marketing Officer for a large health system with hospitals in several states. This is a day in your life.

8:03 AM

After my morning workout, my AI agent sends me a notification: *"Cardiology volume is declining. I've noticed a statistically significant dip in scheduled procedures. Overnight, I scanned patterns in voice search, conversational data, market sentiment, and wearable data in the market. Based on these findings I went ahead and adjusted our always-on patient acquisition programs with fresh targeting, messages and creative. I also increased marketing spend for this effort over the next week and doubled down on your provider referral marketing program. Stay tuned for performance updates."*

I thank my AI agent and head to my first meeting of the day.

10:24 AM

I walk into a leadership meeting with the C-suite and board of the health system. Today, we're reviewing projections from our organization's digital twin that simulates clinical, financial and behavioral dynamics. The system forecasts market share, volume, contribution margin and other key metrics 12 to 18 months out. A new data layer, emotional AI, detects patient anxiety through tone, language and movement. With it we can trigger nurse navigators in real time, adjust in-hospital messaging on the fly and even anticipate HCAHPS scores before they drop.
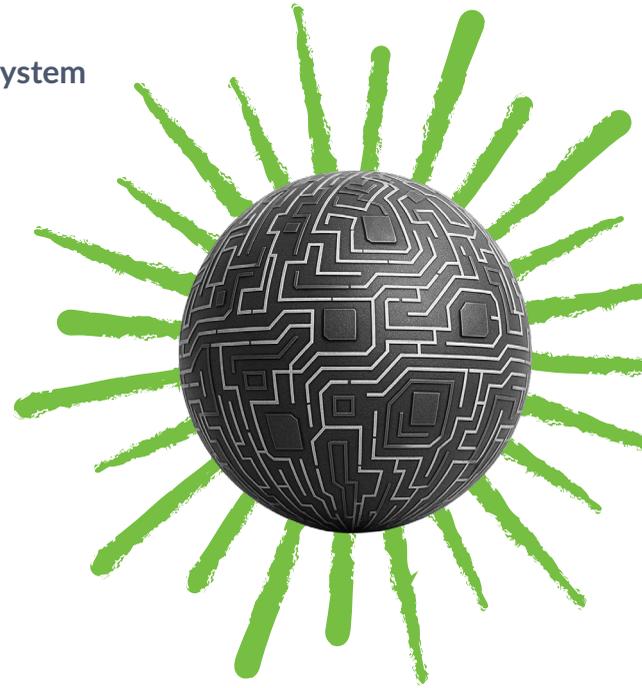
12:41 PM

I have lunch with my Narrative Architect, a role that didn't exist just a few years ago. Her team is training recovery avatars, which show up on hospital room digital displays and on patients' devices during moments when they need clinical information, but clinicians aren't available. The avatars adjust in real time based on the patient's diagnosis, procedure, health literacy, language preferences and stress levels. One speaks in the patient's native language. Another translates complex clinical jargon into kid-friendly language. The days of static discharge materials are long gone.
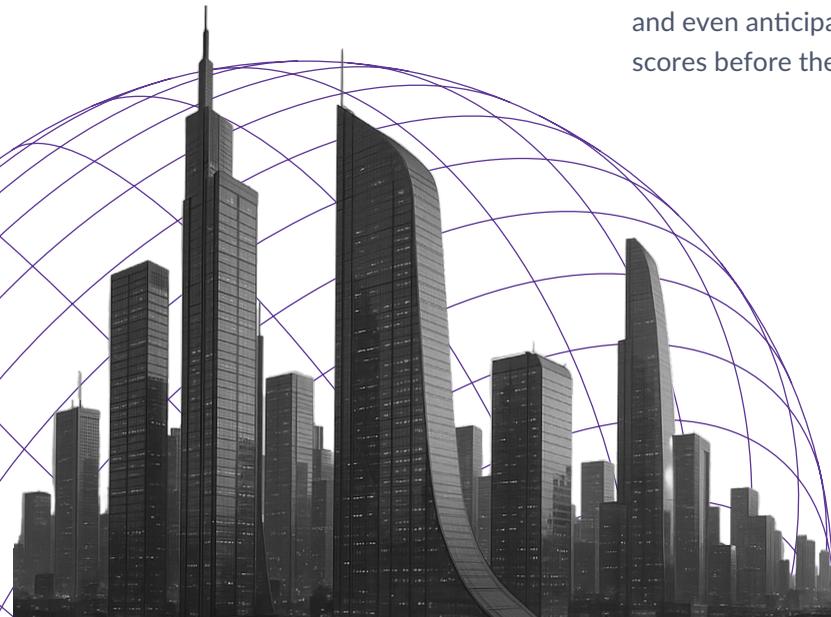
2:36 PM

Now, I'm meeting with the CHRO and her team. We just launched an AI-powered recognition experience for our hospital's 125th anniversary. Instead of a town hall or email, employees are greeted with dynamic displays and personalized messages as they enter the building. Each story is based on tenure, role and engagement history. A nurse sees her unit's biggest milestones. A 30-year healthcare veteran sees a story that reflects her entire career. The employee engagement spike is instant and measurable.

4:24 PM

My day is coming to a close. My AI agent gives me a heads-up: *"Cardiology appointments are trending up after this morning's adjustments. From today's adjustments alone, 27 new appointments have been scheduled, and projected downstream contribution margin is $300K."* The agent notes that it will continue to optimize the program over the next few days but will watch capacity and shift spend if appointments fill up.

I ask my AI agent to summarize a quick share-out with the service-line leader and close out a successful day.
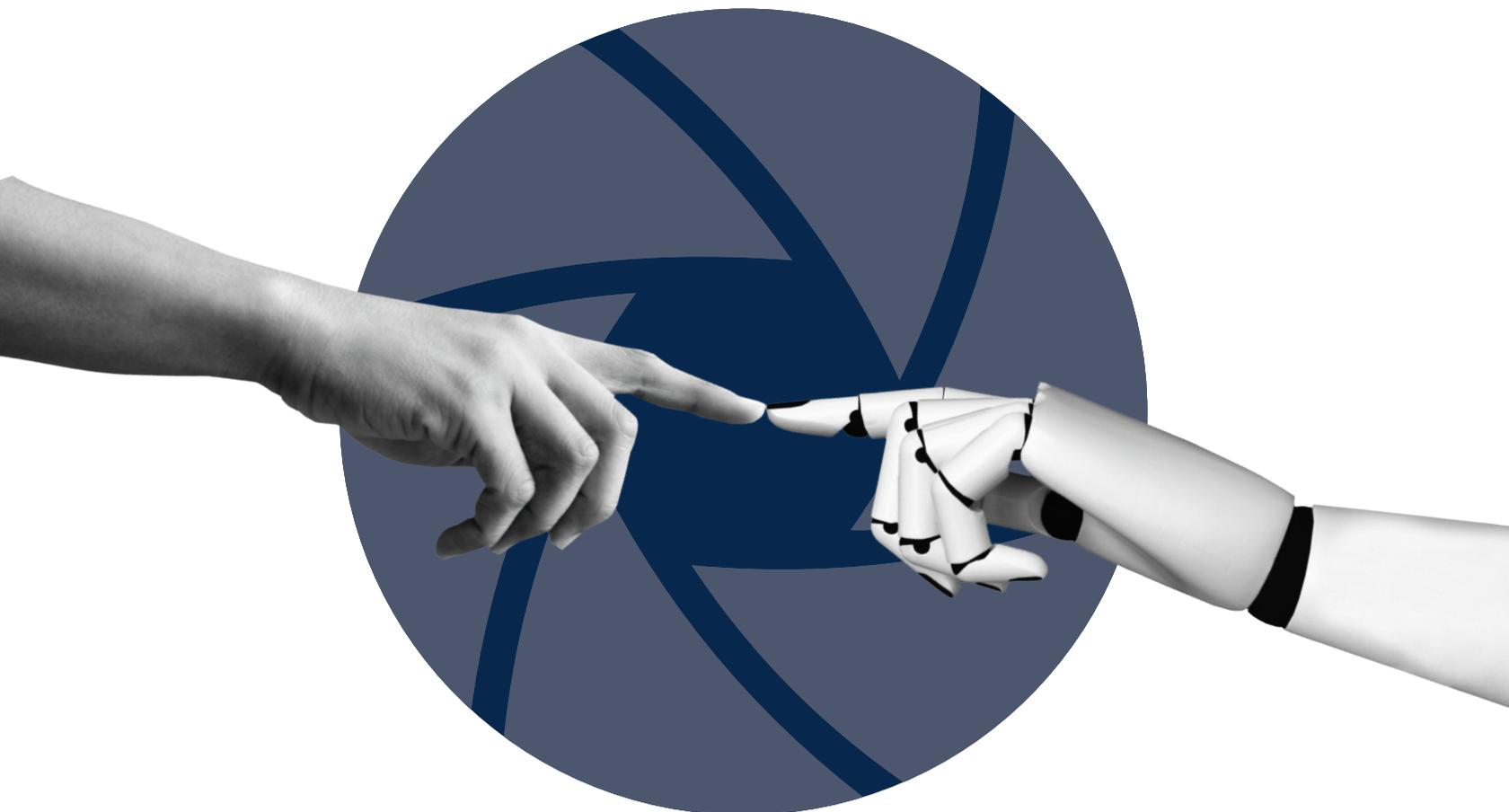
The State of AI Marketing & Communications in 2025

The above letter from the future may sound a bit sci-fi, but the infrastructure is now fully in place to make it a reality. What's holding us back from creating it is less technological and more cultural: our own imaginations, the skillsets of our collective teams and our ability to shift team priorities and culture.

To figure out how to go from today's reality to this far-off future, let's start by examining where we are today.

As we come to the end of 2025, AI and machine learning have moved from a novel curiosity to a competitive asset. Across industries, they're being used for marketing purposes: to create content at scale, personalize experiences on the fly and solve customer service issues.

- Coca-Cola stirred up the creative world a year ago with the *Real Holiday Magic* campaign: an AI-generated TV spot and invitation for fans to co-create art with AI, turning the best submissions into billboards in Times Square.[1]

- Starbucks uses AI for better customer experiences. The coffee company built an AI algorithm called *Deep Brew* to analyze data from the app and loyalty program—purchase history, time of day, local weather, etc. Then, it created personalized marketing messages, tailored offers and drink recommendations.[2]

- Wells Fargo launched an AI-powered virtual banking assistant named *Fargo,* where customers can ask questions like, "What bills are due?" or "How much did I spend on groceries this month?" As of April 2025, the AI assistant has handled 245M interactions with no sensitive data exposed.[3]

As this future pans out, we'll look back at 2025 and think,"Remember when we were excited about AI writing emails for us?"

And healthcare MarComs teams are beginning to infuse AI into their programs.

We're seeing health systems activate AI in a few ways:

- **UCHealth** deployed Livi, its AI-powered virtual assistant, to provide patients with conversational, human-like help 24/7.[4]

- **Renown Health** used AI to translate its entire website and handle patient inquiries in multiple languages in real time, expanding access for the community.[5]

- **Cleveland Clinic** has scaled generative AI across MarCom workflows, drafting copy, streamlining podcast production and mining data for competitive insights.[6]
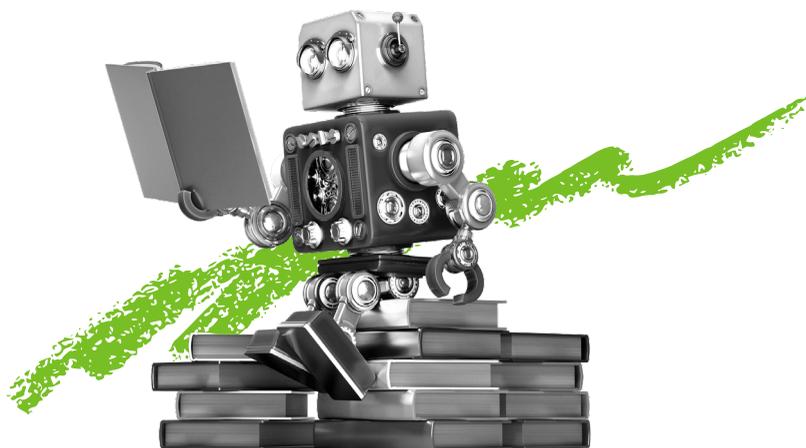
As Cleveland Clinic's former Chief Marketing Officer, Paul Matsen has noted, "We believe these generative AI tools have the potential to transform the way we work in the future."[7]

Organizations like Cleveland Clinic are on the forefront of AI transformation. And their marketing leaders see it as the most critical job to be done today, even more so than brand-building or service-line marketing. They're rethinking how their teams work and how tasks are done in an AI era.

And of that group of leaders, most are doing so with the goal of time cost savings. Which makes sense— with tightening budgets and rising consumer expectations, efficiency is no longer a luxury.

But here lies the missing link.

To date, the vast majority of AI adoption in marketing has been focused on efficiency and effectiveness: doing the same tasks faster, cheaper, and at a greater scale.

According to Marketing AI Institute's 2025 State of Marketing AI Report, 82% of marketers say their primary goal with AI is reducing time spent on repetitive, data-driven tasks; underscoring that adoption today is overwhelmingly focused on efficiency rather than transformation.[8]

Applying AI for tasks like video creation, language translation or faster content creation is valuable. But they're all predicated on the goal of scaling existing marketing tasks and built for today's user behavior.

For example, in Q4 of 2025, most health systems are deep in the throes of rethinking their search engine marketing practice, knowing that AI is stealing website traffic. According to Eddie Cue, SVP, Services at Apple, Google searches fell in Safari for the first time in 22 years, a dip attributed to rising use of AI assistants like ChatGPT, Perplexity and Gemini.[9]

Because of this shift in user behavior, one of the most common questions we get is, *"How can we update our website SEO approach to capture searches in AI engines?"* But what if we also asked the longer-term, more mind-blowing question: *"What will healthcare marketing look like when websites are no longer the center of the ecosystem?"*

In short, "Why are we busy optimizing how we make cars when the future is air travel?"

To understand the shift required, let's time travel again—this time to the past—where we can learn from two brilliant scientists who completely redefined innovation.

A Tale of Two Scientists

We'll travel back in time more than 100 years. Imagine two rooms.

Edison and the Light Bulb

In room one, it's 1879 in Menlo Park in New Jersey. Thomas Edison and his team are running yet another experiment. The electric lightbulb has been around for decades, but it has an extremely short lifespan, uses too much energy and is way too expensive. Edison and his team of inventors get to work on perfecting the filament—testing different materials, tweaking and relentlessly iterating. Their hands-on persistence ultimately pays off, not just with a cheaper and longer lasting light bulb, but with improvements to generators, wiring and the entire system needed to scale electric light.[10]

We'll call this the "Edison Mode" of innovation.

Now, come with us to room two...
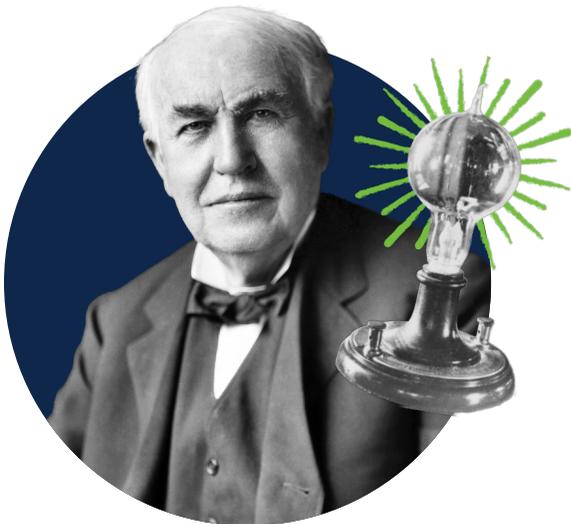
Einstein and Gravity, Time and the Speed of Light

It's 1905, and Albert Einstein is staring out a window, imagining something wild: "What would it be like to ride alongside a beam of light?" He imagines how light would react... and what would happen to time. He wonders if the speed of light is constant, if the concept of time is static and later, how gravity works.[11]

Starting with these far-reaching imaginations, he comes up with the groundbreaking theory of special relativity ($E=mc^2$) and changes how we see the universe forever.

Einstein went where no one had gone before. He completely rethought the universe. His breakthroughs didn't come from a laboratory, but from "thought experiments" (in his native German, "gedankenexperimenten"). By asking fundamental, seemingly wild 'what if' questions, he completely redefined our understanding of space and time.

This is the "Einstein Mode" of innovation.
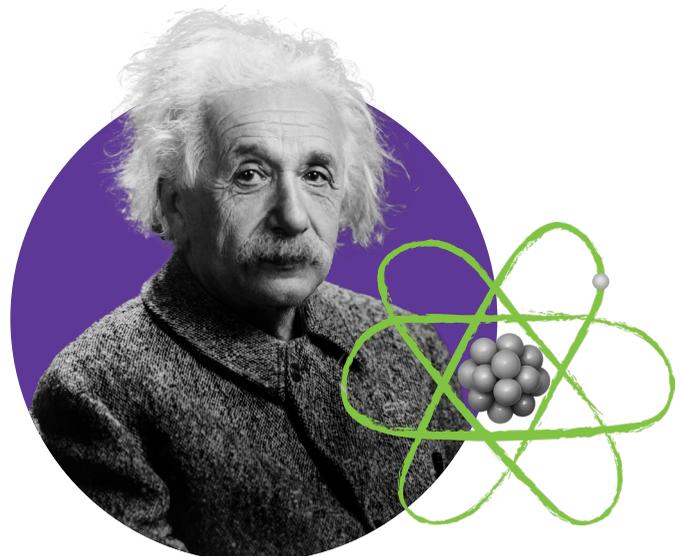
Edison = Iteration

Einstein = Imagination

That's the divide.

Today, marketers are diligently working to create better, faster and more efficient 'light bulbs' for branding, reputation management or content.

But we aren't seeing many Einsteins—the leaders willing to step back and ask: *What if we could reimagine the fundamental laws of how we communicate? What will the health system of the future look like? What if bedrock strategies like branding, campaigns or even marketing itself were no longer needed to achieve our business goals?*

For the rest of this paper, we'll focus on the Einstein mode and the value of embracing it.

	Edison Mode (Efficiency)	Einstein Mode (Reinvention)
Core Question	How can we do our current work better, faster or cheaper?	What are entirely new things we could do that were never possible before?
Goal	Do more with less	Create new forms of value
Focus	Workflow optimization Automation Incremental improvement	Reimagination Future Proofing
Sample Marketing AI Application	Synthetic research Personalized web content Email optimization Data analysis	Generative journey modeling Predictive experience design Simulated worlds for patient education
Impact	Linear gains in productivity and cost savings	Exponential leaps in brand differentiation, patient loyalty and market share

AI Thought Experiments

To bridge the gap between today's realities and the AI-powered future outlined earlier, let's run a few thought experiments. Philosophy professor, John D. Norton at the University of Pittsburgh, has shared guidance for this method of discovery, encouraging professionals to strip down complexity and test ideas in new ways—while always grounding them in empirical evidence.[12] To be useful, a thought experiment might start with a wild idea, but must be firmly anchored in the known truths about the market and what technology can actually achieve.

These thought experiments aren't predictions about the future; they're provocations designed to stretch how we think about marketing's role in healthcare.

Experiment 1:
The End of Campaigns as We Know Them

If AI can be always-on, researching, strategizing, creating and optimizing in real time... then will 'campaigns' even be a thing in the future? A campaign is a time-constrained, bookended program that is predicated on today's systems, required because of real limits in resources, our ability to focus and our lack of ability to flow with real-time organizational and market needs. We encapsulate our efforts in a "campaign" because we have to. In the future, wouldn't we rather have the following scenarios?

- Marketers train an AI system to constantly aggregate data, create personalized messaging and content, constantly optimize and reallocate spend and share progress in real-time.

- The time-boxed 'campaign' disappears. In its place is an always-on, self-optimizing system.

- Your role shifts from running campaigns to setting goals, ethics, guardrails and optimizing the system, all while AI executes at machine speed.

How would you rebuild your MarCom function's task in this scenario?

Experiment 2:
Down with the Digital Front Door

In the near future, patients may never need to view your website, portal or app. Picture a world where health content, information about care and service options live everywhere, seamlessly woven into daily life.

For example:

- A smartwatch detects a fall and automatically pre-registers the patient at the nearest urgent care before they even get back on their feet.

- A connected pill dispenser notices missed doses and triggers an outreach from the health system's care team.

- A fridge, synced with biometrics, orders iron-rich groceries when anemia risk ticks up.

In this world, the digital front door disappears. Patients don't "find" care; it finds them.

These kinds of scenarios have been explored in-depth in the Copernican Consumer prediction of BPD's Joe Public 2030 book.[13] With the advancements of AI, we're getting closer and closer to this being a reality.

How would you rethink your channel ecosystem for this world?

Experiment 3:
The Adaptive Message

Marketers often approve assets in a vacuum: shiny decks, scrutinized pixels and carefully word-smithed copy to maximize results. But once those messages hit the real world, they collide with 10,001 unpredictable forces.

A neurology care ad might land differently depending on:

- A patient's fear after diagnosis

- The influence of a spouse's well-meaning advice

- A viral TikTok video promising a miracle cure

- The financial weight of a potential bill

- The sheer exhaustion of daily life

- The weather (yes, the weather!)

As Daniel Kahneman explores in *Noise: A Flaw in Human Judgment,*[14] factors as subtle as mood, time of day and even whether someone has recently eaten can alter judgment in ways no marketer can anticipate.

Until now, this chaos has been unsolvable. But AI introduces the possibility of adaptive messaging—communication that senses context and adjusts form in real time. The static brochure becomes a living message, shifting tone, format and delivery to ensure it lands with maximum clarity and empathy.

What new opportunities would this kind of technology bring to your organization?

Applying the Einstein Approach

The thought experiments above are only the beginning of what's possible in an AI future. With AI executing tasks quickly and efficiently, marketing & communications professionals' roles become far more strategic. Your job is to innovate in novel ways, faster than your competitors. And that requires a new kind of thinking.

Here are three principles to use when rethinking everything.

Principle #1:
Practice Lateral Thinking

When trying to ideate, most people start with the challenges and then brainstorm from there. The problem with that is that it typically limits the expanse of the ideas. If you start at point A, you might get to B or C, or maybe D if you're really creative. One of the best ways to approach a problem is by starting somewhere completely different—rather than start at point A, start at point W, somewhere completely disassociated from the issue at hand. By starting at point W and working backwards to the issue, you may land on points H or G, which are far more innovative than C or D. The idea of lateral thinking was coined by Edward de Bono, a physician and author of the books "Lateral Thinking" and "Six Thinking Hats method."[15] He contrasts this with linear thinking, which tries to 'push through' a wall, while the lateral thinker ignores the wall and looks for an open window.

This is exactly the kind of thinking that Einstein used in his thought experiments. When trying to figure out why existing theories about the speed of light contradicted each other, he didn't try to calculate the speed of light through physical experiments in a lab. Instead, he viewed this through a unique angle—the imaginative POV of riding on a light beam shooting through space.
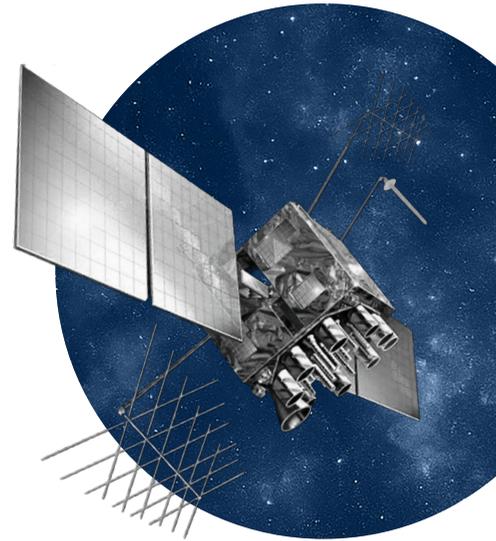
Consider a classic problem: gain more physician referrals to a health system.

- **Linear Approach:** Address the problem head on, optimizing the current system.
  - Host more events and dinners for referring physicians. Target referring physicians with ads. Make the referral process easier.

- **Lateral Approach**: Start far from the problem and come at it from a unique angle.
  - What if referrals didn't start in the clinic at all?

This approach leads to a very different set of solutions. Examples range from predictive models that flag patient needs before a physician visit and route them to navigators for follow-up; self-referral tools for services where patients are already allowed to enter care directly (like behavioral health, imaging or urgent care); or community touchpoints from pharmacies to wearables that, with patient consent, prompt connections into the system.

Lateral thinking forces us to challenge the common framing and ask counterintuitive questions about where referrals could begin.

Principle #2:
Ask Beautiful Questions

In a world where AI can provide answers with astonishing speed, the most valuable human skill is no longer having the right answers, but asking the right questions. One method for asking better questions is what author, Warren Berger, calls 'beautiful questions.'[16] A beautiful question is one that challenges assumptions, is ambitious in scope, and creates an entirely new set of possibilities.

We are conditioned to ask practical, 'ugly' questions that optimize the status quo. But this principle is about the quality and ambition of the question itself. While the referral example in Principle #1 reframes the problem, a beautiful question fundamentally changes the problem itself.

- **Ugly Question:** "How do we increase bariatric surgery volume next quarter?"
  - This question is incremental. It focuses on a short-term, linear goal.

- **Beautiful Question**: "How do we become the lifelong partner for people managing weight, where bariatric surgery is just one option in a set that includes prevention, counseling, coaching and care?"
  - This question is ambitious in scope and helps you to reimagine the journey.

The quality of your answers is determined entirely by the quality of your questions.

Principle #3:
Apply First-Principles Thinking

Most people, most of the time, reason by analogy. We do things because they are like something we (or someone else) have done before. In healthcare, this is our default state. We launch new service-line campaigns based on the ones that worked last year. We design a website to look and function like the website of another health system. We're iterating on previous ideas.

First-principles thinking is the antidote. It is the practice of breaking down a complex problem or a system into the fundamental things we know to be true—and then reasoning up from there.

Like him or not, Elon Musk is the modern champion of first-principles thinking. When he set out to build rockets, he ignored conventional wisdom about cost and instead asked, "What are the raw materials? Aluminum, titanium, copper, carbon fiber. They totaled only about two percent of a finished rocket's price. By starting from first principles, SpaceX reimagined the process, creating a new kind of rocket."[17]

How do we apply this? We start by taking our most common challenges and stripping them down to their core truths.

- **Reasoning by Analogy:**
  "How can we build a better patient portal?"
  - This approach would likely lead to an incremental update like UI improvements or a new feature.

- **Reasoning from First Principles**:
  "What are the fundamental truths here?"
  - A person who is sick or worried needs timely, accurate information.
  - They need to communicate with a trusted expert.
  - They need the process to be as simple and frictionless as possible.

Reasoning up from these truths, you might not design a portal at all. You might design a proactive AI companion or a dedicated navigator for every patient. By abandoning the assumption ("we need a portal"), you open up a universe of new solutions.

Making Space for Imagination

Operating in Einstein Mode requires more than new, shiny tool logins or Friday afternoon workshops. As we've been training MarCom teams, the biggest challenge we've found so far isn't AI literacy or ability to leverage AI tools; it's culture. You can have all the ChatGPT, Gemini and CoPilot licenses in the world. But if you don't change your culture, you'll never see real progress.

These are the big cultural shifts needed to move from Edison to Einstein mode:

Leadership Mindset Shifts

Leaders must champion the idea that not all ROI is immediate or easily quantifiable. They must create a culture that values dreaming, asking "what if" and learning as much as incremental wins. This starts with sharing a bold vision that prioritizes building the future as much as achieving today's business objectives.

Structuring Time and Budget for Creativity

One way to make space for innovation is to allocate a portion of your budget to experimental projects that don't have a guaranteed outcome. Nicole Baxter, Chief Brand Officer at HCA Healthcare, recently highlighted the importance of budgeting for experiments in a recent episode of BPD's *The No Normal Show*.[18] She and her team draw from Coca-Cola's famous 70-20-10 innovation model: 70% of effort and budget goes to proven strategies; 20% goes toward ongoing tests; and 10% goes to net new, unknown prototypes.[19]

But as noted in the points above about mindset shifts, this structure must also be reinforced by culture. Nicole said on the show, "If someone says 'I have a crazy idea,' they're getting invited to my office." That's the kind of top-down leadership that gives people permission to think big.[18]

Cultural Permission to Experiment

Speaking of thinking big, one signal that inspires out-of-the-box thinking is to celebrate smart failures. When an experiment doesn't work, the question shouldn't be, "Why did it fail?" but "What did we learn, and how can we apply it?" Consider adding learning objectives to every project, encouraging the team to go beyond the standard learnings (e.g., A/B tests that optimize headlines). Instead, gather learnings that reveal new paths forward (e.g., insights about unmet patient needs, unexpected behaviors or new ideas to test next time). In Joe Public III: The End of Hospital Marketing, former CMO of Penn Medicine, Suzanne Sawyer, noted that her team conducted "grand rounds" on new ideas specifically to create a culture of experimentation.[20] This is the kind of ritual that will help teams build innovation muscle.

Share Early and Often

Don't wait to share ideas until the solution is ready for primetime. Create a muscle of constantly sharing ideas among your team and partners, and merchandising your vision and progress to your C-suite. You never know what you will inspire.

Getting Started: Building Your Einstein Strategy

So... what does this look like, practically? You may be thinking that rethinking marketing and communications feels completely overwhelming when your day is already chaotic and high-pressure. And that's absolutely fair. But AI transformation is the most critical opportunity in front of healthcare marketers today.

The first thing to address is that there's plenty of time to leap ahead. In an early 2025 McKinsey study on AI use among organizations, almost all companies invest in AI, but just 1% believe they are at maturity.[20]

So, if you're just getting started, it's not too late. Here are a few practical steps.

Build AI Literacy Across Your Team

Before you can get to true AI transformation, you first need AI fluency. Every team member should be using AI tools in their daily roles, understand what's possible (and what's not) with AI and know how consumer behavior is changing.

As Renown Health's Marketing Technology Manager, Nardeep Singh, recently shared with Becker's, "The biggest challenge today is adoption; teaching the team how to use AI in a safe and thoughtful way."[21]

To ensure safety, you'll need an AI Policy, an AI Council, approved tools and significant training on use cases and prompt engineering. The Marketing AI Institute is a great starting place for these steps.[22]

Andy Chang, CMO of UChicago Medicine, recently joined BPD's "The Future of the Health System Chief Marketing Officer" webinar and noted, "You cannot [lead the way on AI] until your own team understands the benefits and implications of AI."[23]

This, alone, is a massive cultural shift. Most teams get stuck here, struggling to turn around the Titanic. You'll encounter fear from the team and resistance to change. But pushing through this stage is mission critical, not just for competitive advantage, but for individual team members' growth.

Reimagine Your Org Strategy & Org Design

In the Letter from the Future section earlier, we mentioned a "Narrative Architect" role. It was tongue-in-cheek, but it makes a real point: the roles we'll need tomorrow won't look like the roles we have today. Imagine titles like *Consent Strategist* or *Journey Simulator*. These may never actually show up on your HR site, but the point is that MarCom work will drastically change in an AI-driven world.

An innovative vision requires a new kind of team. Your org chart should reflect your vision for the future, and that might mean breaking some things. Today's org charts and job descriptions were born in the railroad and factory era of the 19th and early 20th centuries. Think railroads and automotive assembly lines. They weren't built for the adaptive, cross-functional needs of the AI era. Rishad Tobaccawola notes in his recent book, *Rethinking Work*, that org charts are the corporate equivalent of horse-drawn carriages— familiar, but no longer fit for today's realities.[24]

Now is the time to start ongoing "thought experiments" about what kind of team, skills and roles will be needed in the future. You'll need to fold in new capabilities that go well beyond the traditional toolkit. Identify the skills you'll need— like deeper data science & analytics, experience design, AI ethics and governance, compliance and change management—and map out a plan to grow or partner with that kind of talent.

While it remains to be seen exactly what the roles of the future will be, it's clear that roles will change. According to Deloitte's 2025 report, *The State of Generative AI in the Enterprise*, "Nearly 75% of leaders are looking to change their talent strategies in the next two years because of AI, with a focus on altering work processes and upskilling or reskilling."[25]

Some of these new skills will be ones you'll build internally. Others you'll borrow through partners. Either way, your org chart should reflect where you're going, not where you've been.

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When CMOs Become Enterprise AI Leaders

The most forward-thinking CMOs are going beyond MarCom transformation. They're raising their hands to lead AI transformation for the organization. By using MarCom as the testing ground, their sights are set on bigger business priorities: reducing costs, creating differentiated patient experiences that drive loyalty and fueling organizational growth.

Not only have we seen this trend among health system CMOs, Gartner's VP Analyst, Nicole Green, noted in 2024 that AI is opening the door for CMOs to elevate their roles, given that "Nearly 70% of marketers are experimenting with or have already implemented generative AI technology, compared with less than 54% of business executives in non-IT functions."[26] You may not feel like it today, but marketing leaders are actually out in front.

During "The Future of Health System CMOs" webinar, Christine Kotler, CMCO of Baptist Health South Florida, shared how her team has become the AI leaders in the broader organization: "First, don't defer your learning, understanding or ownership of AI to IT. We quickly developed an entire learning series for the entire MarCom function and tied it to performance evaluations. Now, we are not just at the table, but we're getting tapped left and right—we're the AI resource for all departments who are coming to MarCom for help in their respective departments. Talk about bringing value."[23]

So, how do you do this? In the same conversation, Andy Chang, CMO of UChicago Medicine, gave guidance:

"If you frequently share with your boss what you are doing with AI on a personal and professional level to show everyone what is possible, you become a front-runner to moving the enterprise ahead with AI."[23]

If you take the reins here, you'll be uniquely prepared to elevate the conversation from "AI as a marketing tool" to "AI as business strategy" by bringing the CEO enterprise opportunities like:

- **Financial Performance:** Where can AI take out costs or optimize resources?

- **Patient Experience & Loyalty:** Where can AI create moments of differentiation that create patient loyalty?

- **Growth:** Where can AI create new revenue pathways?

In BPD's recent report, "The Future of the CMO,"[27] we highlighted how AI is one of five critical opportunities during what feels like volatile times. And CMOs increasingly see it this way too. According to McKinsey, as CMO duties continue to pile up, 74% see generative AI as "more of an opportunity than a risk." Yet at the moment, only ~5% of marketing orgs are actively scaling AI, so there's wide-open space for leaders to seize the opportunity.[28]

Leading AI transformation grounded in business priorities is one way CMOs earn a seat at the table as enterprise leaders moving forward. Marketing becomes the pilot lab for innovation, and the results can shape how the system adopts and scales AI from a non-clinical standpoint.

Establish Metrics for Transformation

Edison mode is measured by efficiency metrics like cost per lead and time saved. Einstein mode requires a different lens. These metrics shouldn't just reward novelty or innovation for its own sake. They should tie directly to long-term business impact. This is about uncovering new, unexpected ways to drive exponential results: outpacing competitors, deepening loyalty and better serving patients, employees and audiences.

To make that shift, CMOs need to track transformation against metrics like:

- **Likelihood to Recommend:** Have you enhanced the patient experience enough to improve NPS scores?

- **Patient Lifetime Value:** Are your AI-driven experiences increasing loyalty?

- **Speed-to-Market:** Are you able to shorten the time in which you create pilot programs, launch them and report back on learnings?

- **Brand Advocacy:** Are you creating experiences so remarkable that people actively share them?

- **Employee Engagement:** Are you enhancing the employee experience in demonstrable ways with AI?

These would tie back to the business objectives prioritized in point #2.

This may be obvious, but actually tying efforts to these kinds of metrics will require a far deeper sophistication in data, analytics and measurement than in the past. Which brings us back to point #3: rethinking and reimagining functional capabilities.

CONCLUSION

The AI era is upon us, and it presents a fundamental choice for marketing leaders. We can continue down the well-trodden path, using powerful new tools to optimize the familiar. It is a safe path, and a necessary path. But ultimately, it is a path that leads to parity.

Or we can embrace imagination as an imperative. We can use AI to build entirely new operating systems— ones that anticipate, adapt and care for people in ways we are only just beginning to imagine.

In 2023, when AI was just beginning to make mass media headlines, the idea of efficiency was novel. Moving into 2026, efficiency is no longer optional; it's table stakes. The future will not belong to the marketing teams who apply best practices and surpass existing benchmarks, but to those who set completely new standards.

The future belongs to those who have the courage to cross the Einstein Divide.
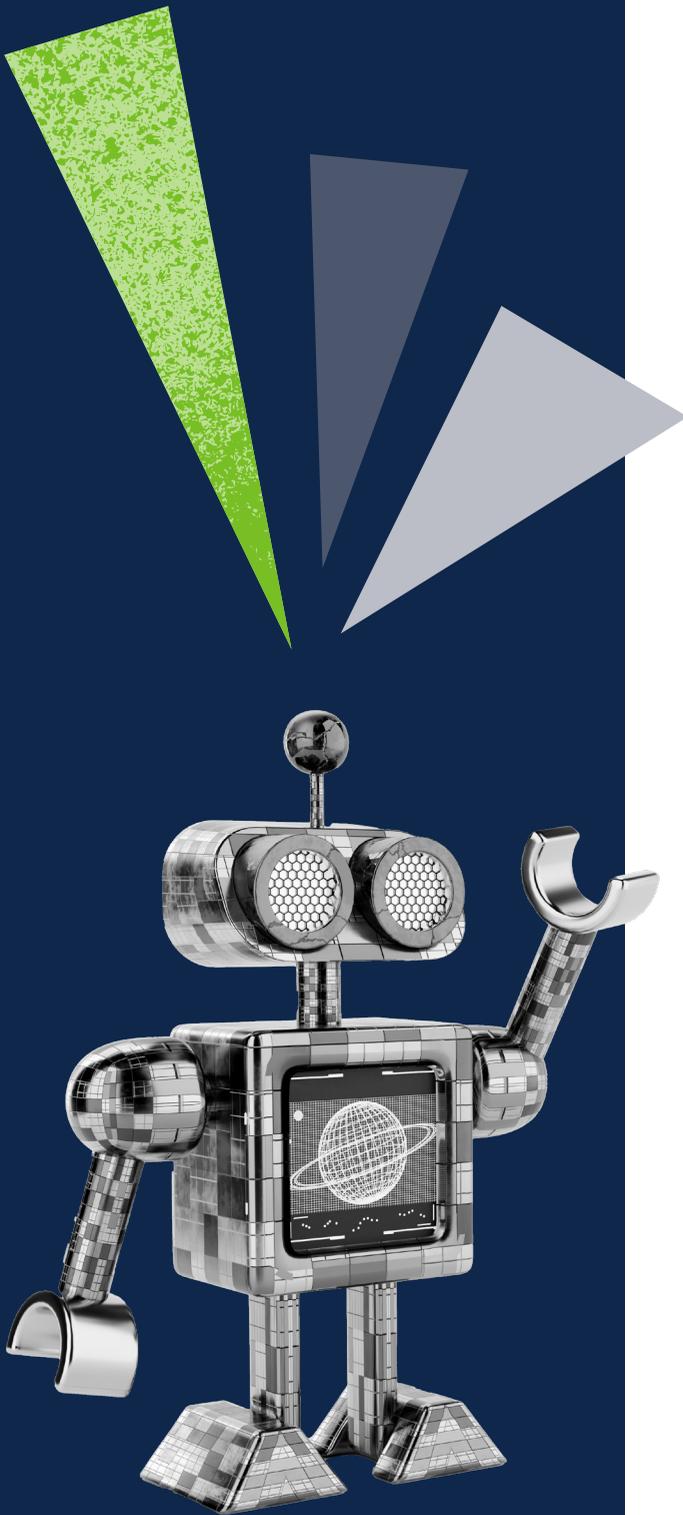
About BPD

At BPD, we deliver the future to healthcare's leading brands. And that includes leading MarCom leaders through full AI transformation. We help health systems and healthcare organizations reimagine marketing, communications and growth for the AI age.

BPD's AI-focused services include:

- **AI Learning Labs:** A fast-track educational curriculum for teams needing to improve AI literacy.

- **AI Transformation Workshops:** Hands-on sessions to reimagine strategy and execution.

- **Org Strategy & Design for the AI Era:** Build the structures and skills needed for lasting change.

- **Precision Marketing:** Uses BPD's proprietary data and AI to target the right patients with the right message for service-line programs, driving measurable volume growth and 5–10x ROI.

- **Studio.ai:** AI-driven production for imagery, video and content at scale.

Where to connect with us:

- AI Learning Lab at HCIC 2025 (Las Vegas, November 2025)

- eHealthcare's AI in Healthcare Marketing Week (Virtual, December 2025)

- The AI Dream at the Joe Public Retreat (South Beach in Miami, February 2026)

Have a question about how to leverage AI today?
Shoot us a note at info@bpdhealthcare.com.

Learn more about BPD here.

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