

# RB Weekly AI Brief - Issue 2 - 14.04.2026

Covering the week of 14.04.2026 · Issue 2 of the RB Weekly AI Brief

## AI News Roundup

### Regulatory & HTA Signals

No qualifying HTA news items identified this week. This section requires stories from official HTA body sources or specialist health policy outlets — general AI regulation stories are excluded.

### Regulation & Policy

#### White House Releases National AI Policy Framework with Federal Preemption Guidelines

The White House released its National Policy Framework for Artificial Intelligence on March 20, 2026, outlining legislative recommendations for Congress to establish unified federal AI regulation. The framework proposes federal preemption of state AI laws deemed 'unduly burdensome,' signaling aggressive federal efforts to create a nationally standardized approach to AI governance.

*So what? A unified federal AI regulatory framework could streamline how AI-derived clinical evidence and real-world data are governed across states, potentially simplifying compliance for biotech companies generating AI-based safety dossiers and health technology assessment submissions.*

Ropes & Gray LLP

#### Multiple State AI Laws Take Effect with Healthcare and Election Applications

Thirty-eight states passed AI legislation in 2025, with multiple laws taking effect in 2026 including California's SB 53 (Transparency in Frontier AI) and AB 2013 (training data transparency). These laws specifically address AI use in healthcare and elections, creating a fragmented regulatory landscape despite federal preemption efforts.

*So what? State-level AI transparency mandates will require pharmaceutical and biotech companies to document AI training data and methodologies in clinical submissions and real-world evidence studies, affecting how HTA bodies can validate AI-generated evidence in coverage decisions.*

NBC News

### Healthcare & Life Sciences

#### NVIDIA-Eli Lilly Launch \$1 Billion AI Co-Innovation Lab for Drug Discovery

NVIDIA and Eli Lilly announced a five-year, \$1 billion co-innovation lab based in the San Francisco Bay Area focused on AI-accelerated drug discovery. The lab will co-locate Eli Lilly domain experts with NVIDIA AI engineers to generate large-scale datasets and build models accelerating medicine development.

*So what? Pharmaceutical companies investing in AI co-innovation labs can generate robust real-world evidence and AI-derived biomarker data that strengthen regulatory dossiers and facilitate faster HTA submissions with higher confidence in efficacy and safety predictions.*

NVIDIA

#### Eli Lilly Commits \$2.75 Billion to Insilico Medicine for AI Drug Discovery

On March 29, 2026, Eli Lilly committed \$2.75 billion to Insilico Medicine for AI-discovered drug candidates. The partnership's first compound advanced from target identification to Phase I in under 30 months, compared to traditional pharma timelines of 4-6 years. As of early 2026, over 173 AI-discovered programs are in clinical development.

*So what? AI-accelerated development timelines mean regulatory agencies and HTA bodies will increasingly evaluate novel compounds with shorter clinical evidence histories, requiring AI-driven synthetic control arms and predictive models to support market access and reimbursement decisions.*

MedCity News

## Models & Research

### Meta Launches Muse Spark as First Major AI Model from Superintelligence Labs

Meta announced Muse Spark, its first major AI model developed by the newly formed Superintelligence Labs under Chief AI Officer Alexandr Wang. The proprietary model represents a strategic shift in Meta's AI strategy, with the company signaling plans to open-source future model versions.

***So what?** The emergence of specialized foundation models optimized for different domains creates opportunities for biotech firms to develop tailored AI systems for clinical trial design and regulatory evidence synthesis, though proprietary models may limit transparency in HTA submissions.*

CNBC

### Google Releases Gemini 3.1 Ultra with 2M-Token Multimodal Context Window

Google launched Gemini 3.1 Ultra on April 2, 2026, featuring a 2-million token context window with native multimodal capabilities across text, image, audio, and video. The model was designed from training to reason across all modalities simultaneously without transcription intermediaries.

***So what?** Dramatically expanded context windows enable AI systems to process comprehensive clinical trial datasets and multi-source patient evidence in single inferences, potentially accelerating evidence synthesis for regulatory submissions and improving HTA dossier quality.*

Crescendo AI

---

## Academic Paper Summaries

Selected from PubMed · Published within the last 12 months · New selections each week

Domain Paper — HEOR / Health Economics / Market Access

### New insights in preanalytical quality.

Plebani M, Scott S, Simundic AM, et al. · *Clinical chemistry and laboratory medicine* · 2025

[#PatientOutcomes](#) · [#Regulation](#)

This paper reviews how errors that occur before lab tests are actually performed (like improper blood collection or sample handling) affect test quality and patient safety. The authors highlight new opportunities to reduce these errors through automation, sustainable practices, and better blood sampling methods, while connecting these improvements directly to patient outcomes and healthcare costs.

PMID: 40266896

[PubMed →](#)

[DOI →](#)

AI Research Paper 1

### Navigating ethical considerations in the use of artificial intelligence for patient care: A systematic review.

Badawy W, Zinhom H, Shaban M · *International nursing review* · 2025

[#ClinicalAI](#) · [#Regulation](#)

This systematic review examines the ethical challenges nurses face when using artificial intelligence in patient care, including concerns about data privacy, who is responsible when AI makes mistakes, and whether patients truly understand and consent to AI involvement. The findings emphasize that while AI improves clinical decisions and efficiency, healthcare organizations must address these ethical issues to maintain patient trust and human-centered care.

PMID: 39545614

[PubMed →](#)

[DOI →](#)

AI Research Paper 2

### The role of AI in emergency department triage: An integrative systematic review.

El Arab RA, Al Moosa OA · *Intensive & critical care nursing* · 2025

[#ClinicalAI](#) · [#PatientOutcomes](#)

This review evaluates how artificial intelligence and machine learning can help emergency departments triage patients faster and more accurately to reduce overcrowding and wait times. The study examines which AI models work best, what factors they use to predict patient risk, and what practical challenges hospitals face when implementing these systems in real-world settings.

PMID: 40306071

[PubMed →](#)

[DOI →](#)

This document was automatically generated using AI. Readers are encouraged to verify information via the source links provided.