

COMPLEX SCHEDULING

One request, every rule.

Complex scheduling requests make up a large share of the calls into your contact center. Your agent searches several systems while the patient waits, and the rules that decide whether the appointment is even valid are spread across those same places. Calls run long, patients call back to finish what was started, and the appointment that does get booked is not always the right one.

TWO AI AGENT SOLUTIONS, ONE FOUNDATION

Two ways to resolve the same request

In one, AI agents handle the request without your staff. In the other, they handle the rules alongside them.

Voice AI

Takes the call.

AI agents work the request from start to finish. They ask your clinical qualification questions, check referral and authorization status, and search availability against every applicable constraint. The booking is written to your EHR during the call, and the patient is confirmed and enrolled in reminders. Around the clock, at any call volume.

Contact Center AI

Works alongside your staff.

AI agents run the same checks with your agent and surface the rules and logic that govern the request, rather than leaving your agent to search for them. Prerequisites and multi-step appointments are flagged as the request develops, so the set your agent books is complete and does not come back as rework.

What that looks like on one call

A parent scheduling a cardiology appointment for a 16-year-old. What the request depends on:

The check	What the AI agent found
Referral on file	✓ Confirmed, with the referring physician on record.
Age meets provider criteria	→ Patient is 16. Adult cardiology begins at 18. Request reassigned to pediatric cardiology.
New patient hours only	✓ This provider sees new patients Tuesday and Thursday mornings.
In network at this location	✓ Covered at the requested location.
Echo completed first	! Not on file. Required before the consult.

OUTCOME

Both appointments were booked in sequence on the same call, the echocardiogram first and the cardiology consult after, and confirmed before the caller hung up.

One of those checks changed the provider. Another was unmet, and prompted the agent on the call to schedule the echocardiogram with the patient before the consult could be booked. Without that prompt, the prerequisite is not discovered until later. The consult has to be rebooked, or the patient arrives for a visit that cannot proceed.

WHAT GETS CHECKED

Every request is governed by three sets of rules

Every request has to clear the rules your operation runs on. SpinSci AI agents check all of them during the call.

Your decision logic

- ✓ Existing decision trees
- ✓ Department decision trees
- ✓ Smart questions
- ✓ Scheduling protocols
- ✓ Clinical questionnaires
- ✓ Specialty-specific routing

Scheduling constraints

- ✓ Provider preferences
- ✓ Visit type
- ✓ Resource availability
- ✓ Equipment and procedure room
- ✓ Block schedules
- ✓ Age restrictions and prerequisites

Referral validation

- ✓ Referral exists
- ✓ Referral status
- ✓ Referral expiration
- ✓ Authorization
- ✓ PCP requirements

Availability is the last of these, not the first. Everything above determines which slots are eligible.

HOW IT WORKS

Healthcare AI Fabric

Same context. Same rules. Same answer.

Your scheduling rules are not written down in one place, and most were never built to be automated.

Healthcare AI Fabric is a rules orchestration layer that connects EHR workflows, payer requirements, referral rules, and departmental protocols, so AI agents can validate and execute scheduling requests in real time.

It reads the rules where they actually live

Scheduling logic sits in EHR decision trees, department protocols, and payer requirements, along with the spreadsheets, PDFs, and shared drive pages around them. HCAF ingests these sources together and normalizes them into a form an AI agent can reason over.

It keeps them maintainable

Static decision trees are brittle and expensive to change. When a department adjusts new patient hours or a payer changes an authorization requirement, the update is made in the fabric rather than rebuilt in the tree.

It orchestrates the agents

One rule set drives an autonomous Voice AI call and an assisted call in Contact Center AI, integrated natively with your EHR and contact center platform. That is why a call can move from an AI agent to your staff with the checks already cleared and the appointments sequenced.

GOVERNANCE AND EXCEPTION HANDLING

Exceptions route to your staff

When eligibility data is missing, rules conflict, or clinical review is required, the agent pauses automation, records the reason, and routes the request to the appropriate staff member with the relevant context.

Every decision is traceable

AI agents apply only your approved scheduling logic, maintain an audit trail of the checks performed, and support human review and override. The solution reduces scheduling friction without replacing clinical judgment.

MULTI-APPOINTMENT SCHEDULING

Specialty scheduling is never one appointment

One request can require several encounters, booked in the right order. A consult creates a procedure. A screening creates a follow-up. SpinSci AI agents handle the full set on the call rather than leaving the rest to a callback.

Linked appointments

Booked together as one set, so the patient is not scheduled for half of what the visit requires.

Dependent appointments

Sequenced so prerequisites come first and the later appointment is valid when the patient arrives.

Cascading scheduling

Once one appointment is booked, the agent is prompted to take the next required step with the patient.

Cardiology → echo

Mammogram → ultrasound

Oncology consult → infusion

MRI → follow-up

New patient → labs

Sleep consult → sleep study

When only part of the set gets booked, the rest falls to a callback queue, the patient waits longer for care, and held capacity goes unused.

67%+

of eligible scheduling requests handled end to end, with no staff involved

<60 sec

average handle time

No hold

time for the patient

24/7 ACCESS
NATURAL VOICE
EHR INTEGRATED