Accelerate financial performance with an RCM platform strategy

Perspectives from leading health systems

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2024

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REPORT OVERVIEW

Profile of participating health systems

30 participating health systems represent leading voices in healthcare

The Health Management Academy (THMA) in partnership with Waystar set out to understand revenue cycle management (RCM) and software consolidation strategies at Leading Health Systems (LHS) — defined as innovative integrated delivery systems with over $2 billion in total operating revenue.

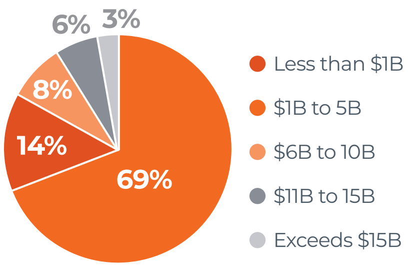
This research captures perspectives from 36 CXOs across 36 unique health systems, representing a significant share of the Leading Health System[1] market. Additional details on the research methodology and participating health systems are included here. As data is presented throughout the report, the portion of data utilized will be clarified.

RESEARCH METHODOLOGY IN BRIEF

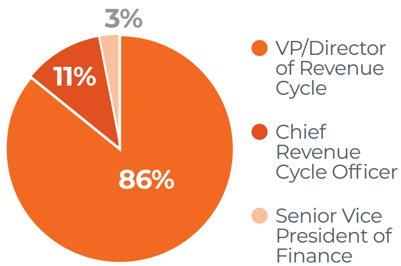
Surveyed 30 CXOs from Leading Health Systems[2]

Collected secondary data, completed an applied literature review

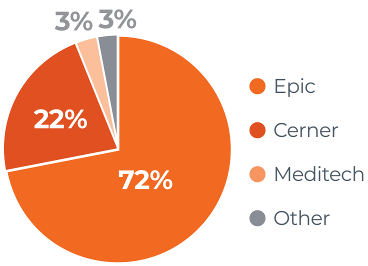
Health system size (NPR)



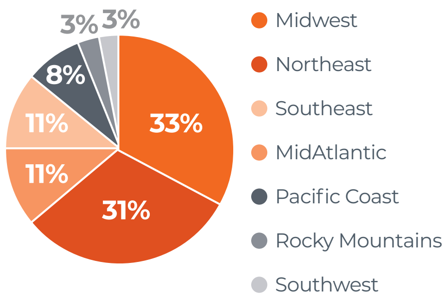
Participants by CXO title



Participants by EHR partner



Health system geographic region



1 Leading Health Systems (LHS) are defined as innovative integrated delivery systems with over $2B in total operating revenue.
2 Quantitative survey and qualitative interviews; n=36 leading health system leaders.

The growing complexity of revenue cycle management necessitates an evolved strategy

LHS rely on revenue cycle management (RCM) partnerships to support their revenue cycle needs, improve cash flow and cost management, and allow them to focus on delivering high-quality care. Given the importance of RCM, LHS have invested heavily in the area, making it one of the most mature in terms of capability and performance.[3]

And yet, with ongoing margin pressures and increasing scrutiny from payers, there is still room to improve efficiency and outcomes in RCM. In line with broader trends towards greater systemization and consolidation, LHS are being more selective about the partners who can support their RCM needs.

Currently, the majority of LHS (73%) have more than four partners, suggesting there is ample opportunity to streamline and consolidate their RCM software. Utilizing fewer platforms can help revenue and productivity leakage, both critical goals for LHS.

Average number of technology partners to manage revenue cycle functions
Percent of executives selecting response[4]

73%
of LHS have **4+ vendors** to manage revenue cycle administrative functions

70%
Increase in LHS who are using an **end-to-end** platform RCM solution[5]

3 2023 Technology Investment Market Outlook.
4 2023 Survey of Leading Health System revenue cycle leaders; n=30.
5 2022, 2023 Survey of Leading Health System revenue cycle leaders; n=5.

Getting buy-in for platform consolidation requires a renewed focus on performance and efficiency. LHS prioritize four factors when assessing software partnerships which will dictate the future state of RCM investments:

Top factors for LHS considering RCM software platform strategy[6,7,8]

Significantly improve revenue performance	Successful partnership reduces inefficiencies and drives outcomes, such as net patient revenue, costs, and patient experience.
Increase operational efficiency	Fewer partners can eliminate operational redundancies and variation and drive care delivery and outcomes for patients, providers, and staff.
Significant cost reduction when multiple solutions purchased	A comprehensive RCM partner can complement an EHR across the revenue cycle and provide cost savings when relying on one partner.
Ability to replace/reduce multiple vendors	As RCM partners continue to innovate, fewer partners may be sufficient to address LHS' RCM needs.

6 n=21 Leading Health Systems.
7 Top RCM factors measured using the question "What factors would make you reconsider an end-to-end RCM solution?"
8 See appendix (page 29) for full data on RCM factors.

RCM partners showcase ability to bridge gaps

Although electronic health records (EHRs) are enhancing revenue cycle capabilities, critical gaps in actionable data, insights, and workflows continue to exist. RCM partners offer valuable expertise to bridge these gaps, providing solutions to optimize financial processes, improve results, and drive outcomes for LHS. Prospective partners can utilize their expertise across the revenue cycle to complement the EHR's existing technology.

RCM partners support core LHS revenue cycle needs

Financial Clearance	Patient Financial Care	Clinical Integrity + Revenue Capture	Claim + Payer Payment Management	Denial Prevention + Recovery	Analytics + Reporting
Learn more >	Learn more >	Learn more >	Learn more >	Learn more >	Learn more >

Pre-Service

- Eligibility verification
- Patient cost estimate
- Prior authorization approval
- Estimate + co-pay collection

RCM partners can support LHS to better financially clear a patient with real-time technology that delivers improved accuracy of benefits, prior authorization, and price transparency to keep scheduled patients on-time and reduce upfront issues that impact revenue flow.

Mid-Cycle

- Charge reconciliation
- Missing charges + undercoding error detection

RCM partners bring years of expertise in coding optimization technology and analytics support to ensure code accuracy, support compliance, secure appropriate reimbursement, and reduce revenue leakage for optimal payment.

Post-Service

- Claim submission
- Claim monitoring
- Remittance from payer
- Denial resolution

RCM partners' experience with specialized services and developed analytics and technology stack help LHS optimize the financial process after patient discharge.

Patient

RCM partners support patients throughout the revenue cycle with multiple touchpoints, such as in registration, consolidated billing, and patient portals.

EXECUTIVE SUMMARY

Key lessons on RCM partnerships + winning with a platform strategy

LHS rely on trusted vendor partnerships to manage the complexities of RCM and ensure the optimal financial health of the organization.

1

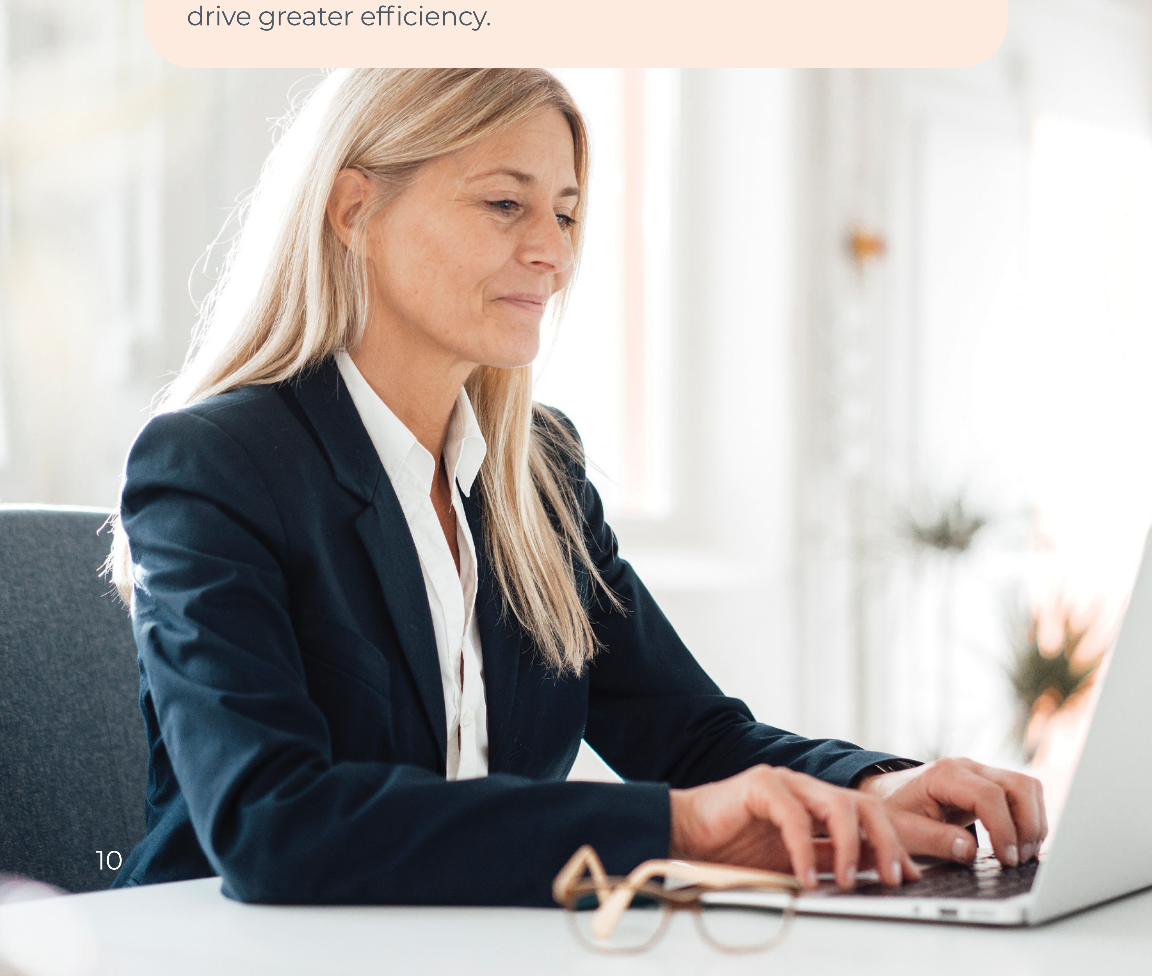
Willingness to consolidate RCM software for a platform approach is driven by financial return

The primary motivation for LHS to move towards fewer RCM technology partners is an ability to demonstrate significant hard dollar return on investment (ROI). The majority of LHS currently partner with four or more RCM partners which can lead to inefficiency, leakage, and a poor patient experience. While there are ample promises in the market to consolidate RCM software to a single-platform approach, LHS are focused on identifying partners who will drive the greatest return, optimize team efficiency, and reduce costs.

2

Trust and domain expertise are critical for successful RCM partnership

Trust is key to any successful partnership, and it is exceptionally important in RCM. Given the complexity of health systems' RCM needs, they select partners who can help support them across the care continuum and at each stage of the revenue cycle. LHS can seek out RCM partners who differentiate themselves by bringing strong domain expertise and leading in automation and AI adoption to drive greater efficiency.



3

Enterprise-wide implementation is becoming preferred approach for LHS and industry partners

Enterprise-wide adoption, rather than pilot then expand, strategy is becoming the preferred method of RCM rollout for industry partners and LHS because it is more efficient and cost effective. This approach, however, requires additional upfront planning and change management. Partnership support through this process helps build trust and makes implementation much smoother, setting everyone up for success.

4

RCM software platform strategy shows positive ROI

Across tech-enabled solutions, LHS are interested in consolidating vendor partnerships and reducing the number of point solutions they have in place. RCM is no exception and of those who have moved towards a single software platform for their RCM, the majority (60%) indicate they've seen financial gains and the remainder expect to see returns within 1-2 years.[9]

9 2023 Survey of Leading Health Systems on an end-to-end solution, n=5.

SECTION 1

Choosing the right RCM partner for software consolidation

Financial impact remains top factor for RCM partner selection

As LHS continue to rely on RCM solutions to optimize the revenue cycle, they weigh a variety of factors to select the right partner. Margin pressures put heightened scrutiny on short-term ROI — making 'financial impact' the most important factor for LHS in selecting an RCM partner — which is consistent with how LHS are evaluating partners across the board.

'Interoperability with EHR' and 'technology and automation' emerge as the other top priorities, signaling the ongoing importance of seamless integration into existing workflows and LHS' drive to optimize efficiency in RCM processes.

Of LHS who ranked 'interoperability with EHR' and 'technology and automation' in their top three important factors for selecting partners, 18% and 47% (respectively) indicated it was the most important decision driver.[10]

The least important factors include 'industry award rankings', 'prior partnerships', and 'patient-centric processes'.

10 2023 Survey of Leading Health System revenue cycle leaders; n=30.

"Everything is going to be clear return on investment decision making — whether that's financial return or some other outcome that might not be financial return but is in support of what we're trying to accomplish — either as an organization or as a division within the overall organization."

–

Chief Revenue Officer, Leading Health System

Most important factors for selecting an RCM partner[11,12]
Percent of executives ranking each of the top factors[13,14]

60%
Financial impact
High priority among executives[15]

57%
Interoperability with EHR
High priority among executives[16]

50%
Technology and automation
High priority among executives[17]

40%
RCM expertise and services
High priority among executives[18]

11 Top RCM factors measured using the question "What three factors are most important when choosing a vendor to support RCM?"
12 See appendix (page 22) for full data on RCM factors.
13 n=30 Leading Health Systems.
14 Percent of executives who selected as their first or second most important factor. Sample size varies, not all responses selected.
15 n=18 Leading Health System CXOs.
16 n=17 Leading Health System CXOs.
17 n=15 Leading Health System CXOs.
18 n=12 Leading Health System CXOs.

Capabilities to automate process and secure data are top-of-mind

With a variety of options in the market, RCM partners can set themselves apart by having robust automation, artificial intelligence (AI), and data security capabilities. LHS are feeling a sense of urgency to expand automation and AI enablement across the revenue cycle, so they seek a partner with experience in these areas.

Technology and automation were the third most important factor for LHS when selecting an RCM partner. "Technology" can encompass a variety of things, but advanced technology optimizes RCM, increases operational efficiency, and supports revenue growth. LHS understand that the question is less about if AI is a priority now but how much and when could they implement AI-enabled solutions. Across the C-suite, LHS executives see automation and AI strategy as a higher priority in 2024 compared to past years — and revenue cycle is one of the top three areas where LHS expect to put out RFPs/RFIs.[19]

> "I need to do everything I'm doing better, cheaper, and faster — and with automation."
>
> –
>
> Chief Revenue Officer, Leading Health System

Data security is a top priority amid push for automation

While automation has proven to have significant capabilities — and as use cases expand and become more advanced through AI — questions arise around data security and ensuring patient information remains private and safe. LHS need partners who understand both the reward and risk and are committed to security and mitigating risk. This is particularly salient, as many LHS' revenue cycle departments are in a hybrid work environment opening potential outside risks. Despite not emerging as a top-three priority, data security was the fifth most important factor when selecting an RCM partner by LHS executives. Across all priorities for 2024, finance, operations, and technology leaders ranked cyber detection and security as a top priority indicating a clear focus across the C-suite.[20]

"Our current state is not our desired future state, and we are slowly working our way through this transition. It's still heavily people-dependent and we've been making purposeful investments over the last couple of years to try to lean into automation"

–

Chief Revenue Officer, Leading Health System

Trust and mission alignment foundational for successful partnership

Mission alignment central to LHS operations and selection

Given the high investment (e.g., time, financial, social capital) in an RCM partner, LHS seek to consolidate the number of partners to establish long-term relationships that prioritize trust and mission alignment. Mission alignment is especially important for faith-based health systems. Having the necessary expertise and demonstrable outcomes are table stakes when choosing a partner, so industry partners can differentiate themselves by aligning with the health system's broader strategy and mission.

"We try to pick a partner that aligns very well with us from a values perspective and competence perspective and then we invest a lot of effort in those relationships to make sure that it's a true partnership and it's going to be a long-term relationship."

–

Chief Revenue Cycle Officer, LHS

19 THMA's Technology Investment Outlook, 2023.
20 THMA' 2024 CXO Priorities Survey Database.

Trust further strengthens LHS-industry relationships

In addition to mission alignment, mutual trust is a bedrock to a successful partnership. LHS must have faith in their partners that they are able to improve the RCM process and handle sensitive data. LHS executives also voiced the importance of transparency in their industry partnerships. There needs to be an open flow of communication, whether it is about solving a complex challenge or celebrating a success. Being open and honest from the beginning of the partnership is a key piece in creating a productive relationship and establishing trust.

Establishing trust and a long-standing partnership can help advance a range of key performance indicators. Some examples of different metrics LHS track are included below:

Hard metrics
- Increased net revenue
- Decreased operational expenses
- Accelerated payments
- Saved time

Soft metrics
- Patient satisfaction
- Staff satisfaction
- Staff flexibility/scalability

LHS' strategic assessments central to choosing the right RCM partner

When selecting a prospective RCM software partner, LHS assess potential partners to make an informed decision. These assessments provide useful information on evaluating a partner's capabilities and gauge the financial and operational impact of the RCM software. While LHS may utilize a variety of assessments, four are used almost universally: technical assessment (90%), financial impact analysis (90%), review of existing technology and vendors (83%), and a security assessment (80%).

21 Top RCM assessments measured using the question "What assessments did your organization conduct before adopting RCM technology solutions?"
22 n=30 Leading Health System CXOs.

Top RCM assessments for health systems[21]
Percent of executives selecting response[22]

90% **Technical assessment** Evaluation of compatibility with existing systems	**90%** **Financial impact analysis** Comparison of expected expenditures and revenues
83% **Review of existing technology/vendors** Determination of partner consolidation, cost savings, and contract timelines	**80%** **Security assessment** Review partner adherence of established organizational security standards

Assessments as a critical catalyst for consolidation

Assessments provide a valuable opportunity for LHS to evaluate their current processes to support efficiency. Especially for LHS that work across multiple states and hospitals, executives may not be aware of all the processes in place for their revenue cycle or there may be some differences or disorganization across different sites. Conducting internal assessments before selecting a new RCM partner provides a unique opportunity to audit what is currently being done and identify areas for efficiency improvement, such as consolidation.

Platform strategy allows for LHS to refocus their energy away from managing multiple relationships to improving their existing relationships and getting leaner with their RCM operations. LHS look for RCM partners who can demonstrate their ability to automate time-consuming tasks and allow staff to work top-of-license and support revenue growth. When RCM staff can save time doing tedious tasks and instead devote energy to more complicated RCM functions, LHS can increase their net revenue and improve efficiency.

Buy-in from finance, revenue cycle leaders remains critical in RCM partnership decisions

Given the criticality of revenue cycle for LHS business and operations, they rely on a diverse set of decision makers to select and oversee RCM partnerships. The primary decision makers tended to be the Chief Financial Officer, Chief Revenue Cycle Officer, and Director/VP of Revenue Cycle, with all of them being a member of the committee that evaluates investments. The VP of Finance, Chief Information Officer, and Chief Operating Officer, while often part of the evaluation conversations, are not making the ultimate decision on partnership.

It is important for LHS to bring together people with varied backgrounds who provide useful input in the selection process and oversee the partnership.

The missing patient experience perspective

Interestingly, **the VP/Chief Patient Experience Officer was not involved, or involved only partially, in the RCM solution decision-making process.** Sixty percent of surveyed LHS did not involve the position at all. The quantitative data contrasts with qualitative interviews where CXOs did include their Chief Patient Experience Officers but still only in part of the process with minimal decision-making power.

The exclusion of the Chief Patient Experience Officer is a missed opportunity since they provide a valuable perspective to support LHS on their consumer-centric journey. If a patient has a positive patient financial experience, such as being financially cleared on time, transparent communication about authorization approval, or knowing the expected costs, they may be inclined to continue care within the health system, ultimately supporting the organization's revenue growth.

Level of influence in strategic decisions around RCM partnerships[23]
Executives selecting response[24,25]

Executive	Primary decision makers	Member of committee that evaluates options and makes final decisions	Part of evaluation process but not part of final decisions
CFO	●	●	
CRO	●	●	
VP Revenue Cycle	●	●	
COO		●	●
VPF		●	●
CIO		●	●
VP Patient Experience Officer			●

23 Percent of executives who reported level of influence in key decisions related to end-to-end RCM solutions.
24 Percent of executives who reported level of influence in key decisions by role.
25 n=5 Leading Health System CXOs.

SECTION 2

RCM success relies on collaborative planning and execution

Expertise in revenue cycle and its complexity a key differentiator

LHS have always relied on their software partners to bring domain expertise and market perspective. There are two market dynamics making RCM more complex for health systems today and where they are turning to their partners for support.

1. **Site-of-care shift.** An increasing number of high-cost procedures (e.g., joint replacement, imaging, infusion, etc.) are moving outside the hospital, making it more complicated to navigate RCM. LHS need to rely on their software partners with strong revenue cycle domain expertise to ensure they are optimizing reimbursement and delivering a positive experience for patients and staff across the continuum.

2. **Staffing support.** When implementing a new RCM solution, LHS are relying on partners to support staff training and serve as an extension of their own teams to fill staffing gaps and bolster support for implementation.

When it comes to implementation support, LHS value partners who can support them with strong domain expertise (93%) and staffing training resources (93%).[26] The latter is particularly important in today's environment where LHS are struggling to fill entry-level roles and competition for IT and data expertise is making it difficult for them to win talent.

Point-in-time training a big value-add

"We need to put the resources in peoples' hands in the moment. We can't rely on a training next month to learn what you need to do at your desk today."

–

VP, Revenue Cycle Management, LHS

Perceived importance of RCM partner implementation support[27,28]

Percent of executives selecting 'important' or 'very important'[29]

93%	Strong revenue cycle domain expertise
93%	Comprehensive staff training resources (e.g., course materials, vendor support)
90%	Access to IT to augment resource constraints
87%	Data migration services
87%	Workflow redesign

26 2023 Survey of Leading Health System revenue cycle leaders; n=30.
27 Top support measured using the question "How would you rate the importance of implementation support from an RCM partner/vendor?"
28 See appendix (page 26) for full data on RCM implementation support.
29 n=30 Leading Health Systems.

LHS look for partners to support thoughtful implementation strategy

A critical aspect of RCM software partnership is the ability to scale across the organization, which requires a thoughtful implementation strategy. LHS have always been large, complex organizations, and the site-of-care shift underway promises to make revenue cycle operations more critical than ever to optimize organization-wide performance.

For LHS moving towards a RCM platform approach, they need a strategy that will account for their unique organization's structure, delivery platform, and goals — starting with how to go live.

LHS moving towards enterprise-wide rollouts

Regarding RCM rollout, LHS executives tend to fall into one of two camps: a phased rollout or an enterprise-wide implementation.

Phased rollout tends to prioritize sites with complex billing and coding requirements for initial adoption (63%), followed by sites with high patient volume, diverse patient population, and size of pilot site (all at 43%).[30]

When identifying how to sequence, LHS should work with their RCM partner to consider often overlooked areas, especially those with high revenue potential, patient volume, and patient leakage. This allows LHS to focus on regaining lost revenue and increase their cash flow to support patient care.

Enterprise-wide implementation is becoming a more common approach for both LHS and RCM partners. LHS who have opted for enterprise-wide implementation cite two main reasons:

1 | Cost

It is easier to negotiate preferred pricing across the entire system versus having to come back to the table as different sites come online, which also cuts down on time spent in legal, which adds to the expense.

2 | Efficiency

Shifting all at once means less disruption for staff and patient workflows.

Top factors for selecting an access point for initial rollout[31,32]

- **63%** Site with complex billing and coding requirements
- **43%** Site with high patient volume
- **43%** Site with diverse patient population
- **43%** Size of pilot site
- **23%** Site with patient leakage
- **10%** Other (please specify):
  - Good change agents
  - Stability of existing location, leadership, engagement, ROI
  - None of the above; the decision was made for the entire enterprise

Cost concerns + implementation fatigue remain challenges amid consolidation efforts

Half (50%) of LHS are open to consolidating their RCM partners and software within the next one to five years[33] signaling significant opportunity in the market. Strategic RCM partners should play a critical role in advancing consolidation efforts while helping LHS address barriers or concerns, which according to CXOs are largely related to cost (60%), workforce implications (50%), the process of switching vendors (47%), and related workflow disruptions (also 47%).

Aside from cost, implementation fatigue remains the top concern when transitioning to a single-platform approach with a software partner. This is due to the longevity of implementation, which can span up to 18 months, and the impact this has on a fatigued

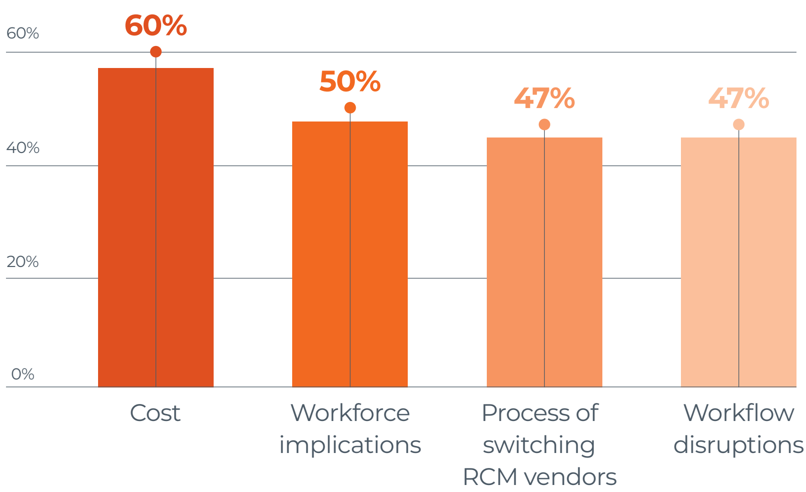
30 2023 Survey of Leading Health System revenue cycle leaders; n=30.
31 Top factoring for selecting an access point measured using the question "When implementing RCM technology through a vendor, what factors were important when selecting an access point to support the initial rollout?"
32 See appendix (page 24) for full data on RCM implementation support.
33 2023 Survey of leading health system revenue cycle leaders; n=30.

healthcare labor market (which extends to non-clinical roles). Notably, the right partner should streamline the implementation process and help execute LHS' strategies to maintain engagement, support, and success across teams.

To get ahead of potential challenges and confirm that software partners can support the transition, it's essential to conduct thorough technical and operational evaluations (e.g., ROI, security, etc.) during the RFP process. Strategic RCM partners should be able to alleviate these concerns by demonstrating their reliability and sector-specific expertise, emphasizing the significance of sustained partnerships.

50% of LHS are receptive to consolidating RCM partners and software in the next 1-5 years[34]

Top challenges for seamless RCM solution adoption[35,36]
Percent of executives selecting 'important' or 'very important'[37,38]

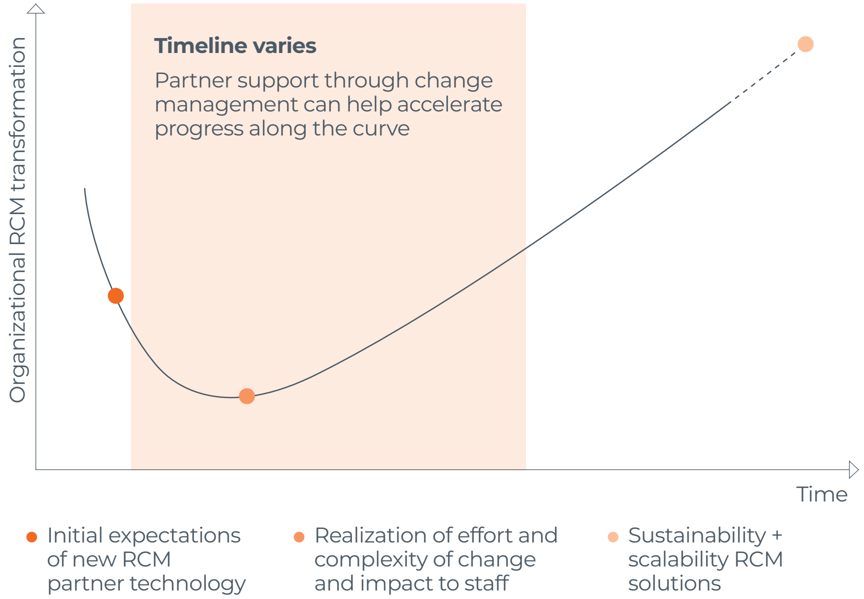


34 Future RCM consolidation measured by the question "Would you ever consider purchasing an end-to-end RCM solution?"
35 Top challenges for RCM solution adoption measured using the question "What are the key challenges for seamless RCM solution adoption?"
36 See appendix (page 28) for full data on RCM implementation support.
37 n=30 Leading Health Systems.
38 Percent of executives who selected as their first or second challenge. Sample size varies, not all responses selected.

Evergreen change management practices address gaps, support transition

Consolidating partners to improve RCM efficiency involves introducing new automation, processes, and structures which can disrupt current workflows infrastructure, requiring a thoughtful change management strategy. Revenue cycle leaders shared that insufficient communication about revenue cycle changes have resulted in financial losses, delayed implementation timeline, and workforce attrition. For every month that change management processes are ignored or not prioritized, LHS risk accruing unnecessary costs and missing revenue. There's an opportunity to educate LHS CXOs on effective change management strategies in the context of RCM.

Change management curve to support RCM partner integration



Effective change management for RCM adoption relies on strong communication and engagement with key stakeholders. Consider these four steps for success:

1

Communicate

Communicate the change early while clearly connecting the dots on "what's-in-it-for-me?" How will it help individuals and departments meet their goals and make their day-to-day easier? How does this help patients? How does it connect back to the broader health system mission and strategy (e.g., enhancing patient financial experience, improving operational efficiency, etc.)?

2

Build confidence and competence

Focus on trainings and reinforce the skills necessary for successful adoption.

3

Define success

Focus on which outcomes will be monitored and how ROI is going to be measured, with an emphasis on bringing awareness to leadership to ensure buy-in and support.

4

Proactively address resistance head-on

Whether from leadership or at the front lines, provide avenues for discussion and close the loop on areas where staff have provided feedback.

SECTION 3

Key expectations for RCM software partners to enable success

Cash flow, denial rate among top metrics to monitor success

After selecting an RCM software partner and implementing the solution, LHS are eager to monitor success and track their progress. The top three metrics to evaluate success of RCM solution implementation are net AR days (90%), cost-to-collect (83%), and avoidable denial write-off rate (73%).[39]

90%

Net AR days

High priority among 90% of executives

AR provides insights into the efficiency of the revenue cycle. RCM partners who can support a lower net AR days value indicates a more streamlined and effective billing and collection process.

83%

Cost-to-collect

High priority among 83% of executives

Cost-to-collect evaluates the financial impact of the RCM solution and expenses incurred in the collection of revenue. A lower cost-to-collect signifies cost-effectiveness and financial efficiency.

73%

Avoidable denial write-off rate

High priority among 73% of executives

By minimizing avoidable denials, healthcare organizations can enhance revenue realization, reduce financial losses, and ensure the overall success of the RCM solution implementation.

39 2023 Survey of Leading Health System revenue cycle leaders; n=30.

Top metrics to evaluate success of RCM solution implementation[40,41]

Percent of executives selecting response[42]

Net AR days	90%
Cost-to-collect	83%
Avoidable denial write-off rate	73%
Overall denial rate	67%
Clean claim rate	67%
Initial denial rate	63%

RCM executive's outlook on performance measures

Executive qualitative responses, direct quotes

"Cash is king — always!"

"Cash collections and cash yield."

"Net collection ratio."

"Terminal bad debt write-off rates."

40 Top metrics to measure RCM success measured using the question "Which metrics does your organization use or plan to use to evaluate the success of RCM solution implementation?"
41 See appendix (page 26) for full data on RCM metrics of successful implementation.
42 n=30 Leading Health Systems.

Prove value: RCM partners must continue to demonstrate positive ROI

For health systems considering consolidation, particularly those interested in a platform RCM partner, the primary incentive to switch partners remains revenue improvement (86%).[43] Unsurprisingly, revenue enhancement remains the primary focus due to the inherent goals of RCM and given the ubiquitous financial constraints impacting the market. Other key motivators align with the general nature of consolidation and/or rationalization: better operational efficiency (76%), significant cost reduction when multiple solutions are purchased (71%) (i.e., cost savings from solution bundling), and the ability to replace/reduce multiple vendors (62%).

Data suggests that consolidating to a single platform or partnership can produce a positive ROI, largely through revenue enhancement and/or cost reduction generated through rationalization. Almost all who are on a consolidated platform have positive ROI and 60% reported positive ROI expected in the next one to two years.

Platform consolidation provides a unique opportunity for LHS and RCM partners to work together to drive greater value across a platform of complimentary solutions that support operational efficiency, increase revenue, and improve patient and caregiver experience.

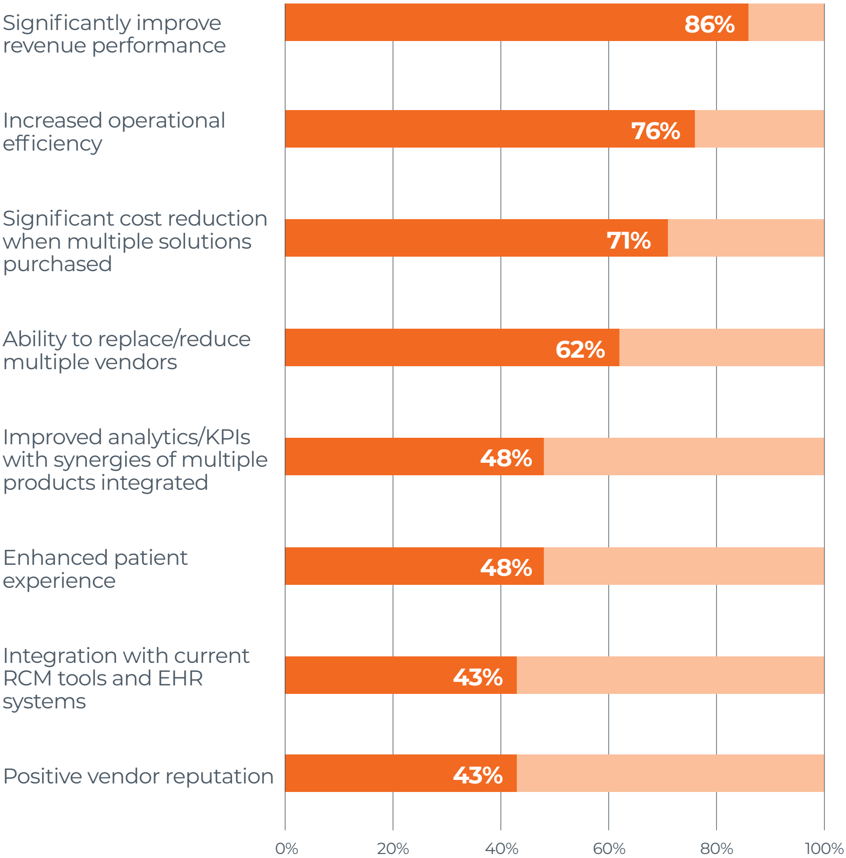
Promising ROI for platform strategy, end-to-end RCM solutions[44]
Percent of executives selecting response[45]

60% of LHS on an end-to-end solution reported positive ROI and the remainder expect positive returns in next 1-2 years

43 2023 Survey of Leading Health System revenue cycle leaders; n=21.
44 ROI for end-to-end solutions measured using the question "What is your current assessment of the value/return on investment (ROI) for your end-to-end RCM solution?"
45 n=5 Leading Health Systems.

Factors to consider for reevaluating end-to-end solutions[46,47]

Percent of executives selecting response[48]



46 Top factors for reconsidering end-to-end solutions measured using the question "What factors would make you reconsider an end-to-end RCM solution?"

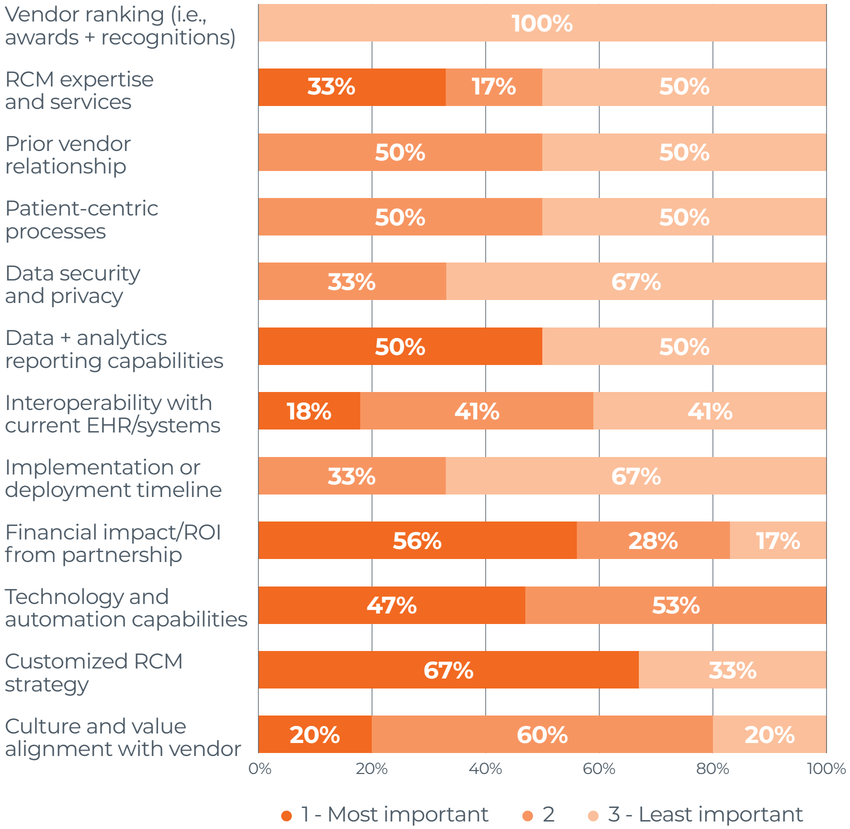
47 See appendix (page 29) for full data on reevaluating end-to-end solutions.

48 n=21 Leading Health Systems.

Data appendix

Additional data: Graph 1

Top factors when choosing an RCM partner
Percent of executives selecting response, n=30*

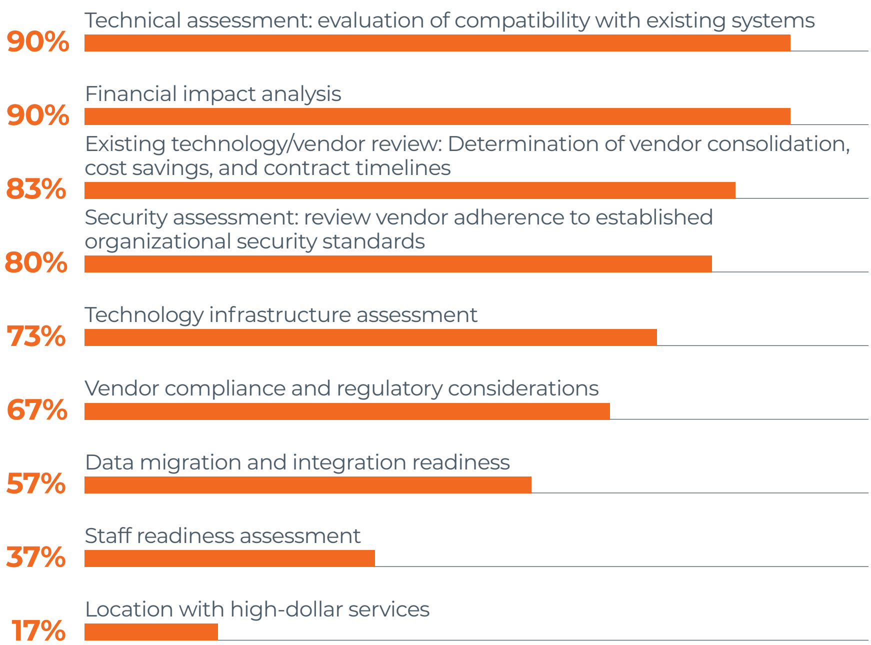


*Sample size varies across category. Percentages may not equal 100% due to rounding.

Additional data: Graph 2

Top assessments conducted before adopting RCM technology solutions

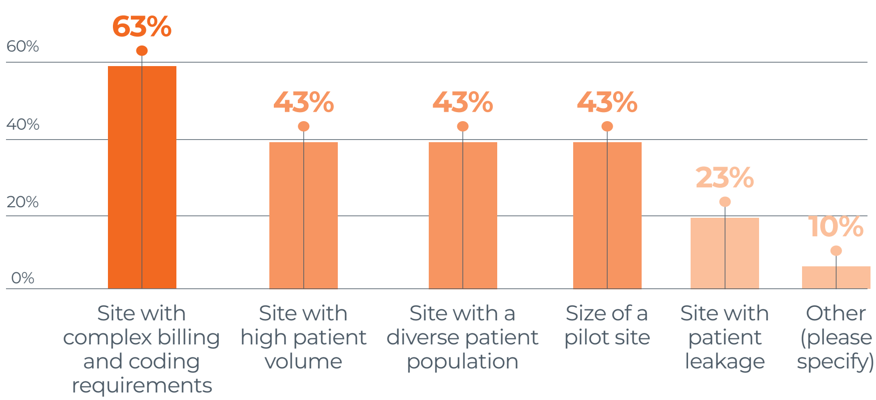
Percent of executives selecting response, n=30



Additional data: Graph 3

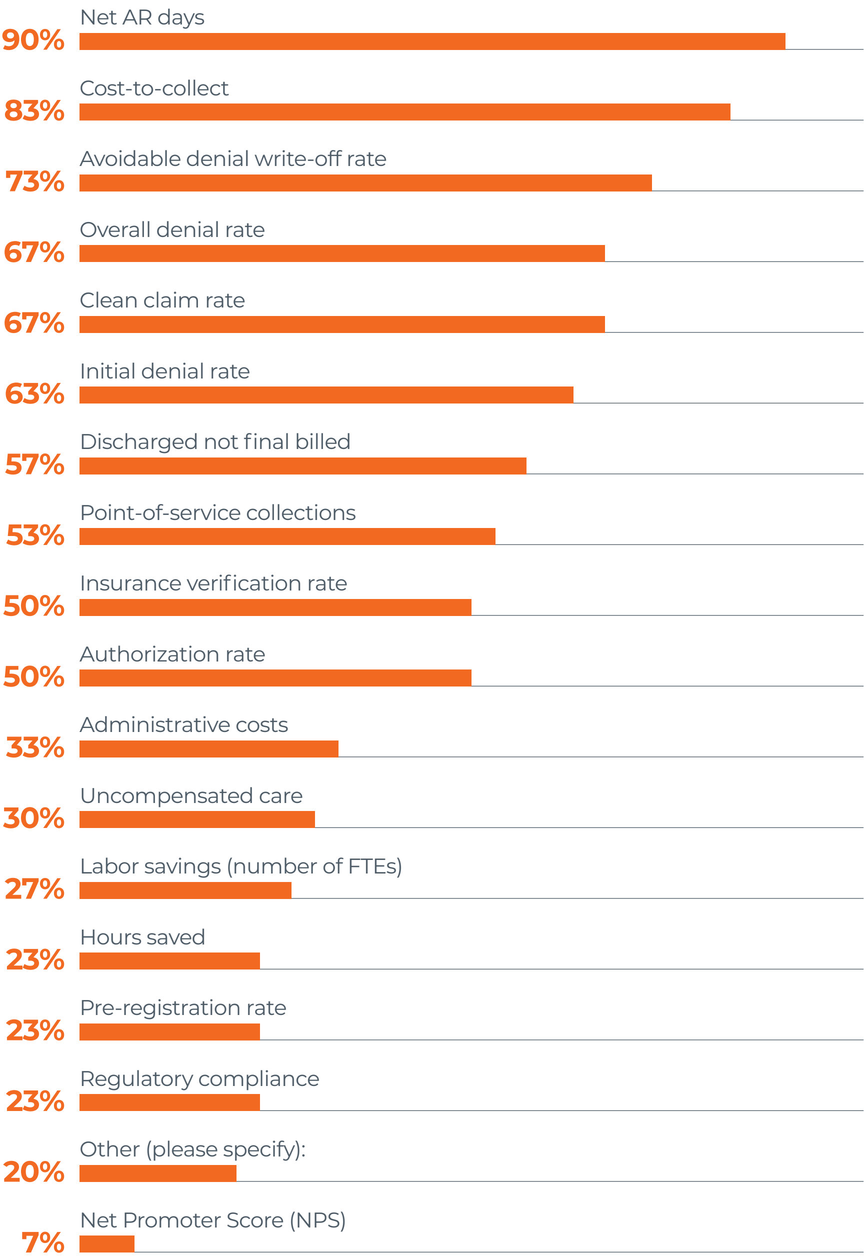
Top factors for selecting an access point for initial rollout

Percent of executives selecting response, n=30



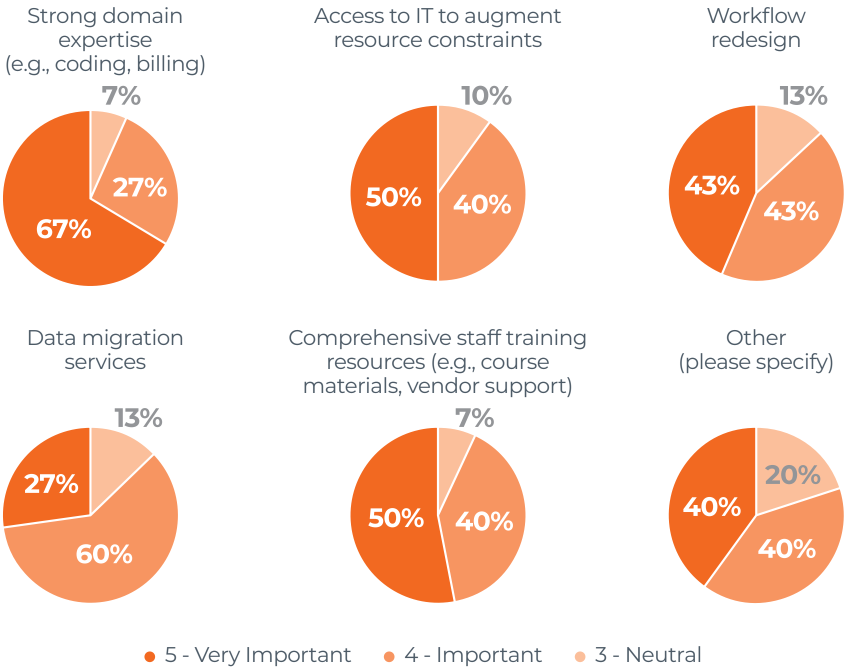
Additional data: Graph 4

Top metrics for evaluating RCM solution implementation success
Percent of executives selecting response, n=30



Additional data: Graph 5

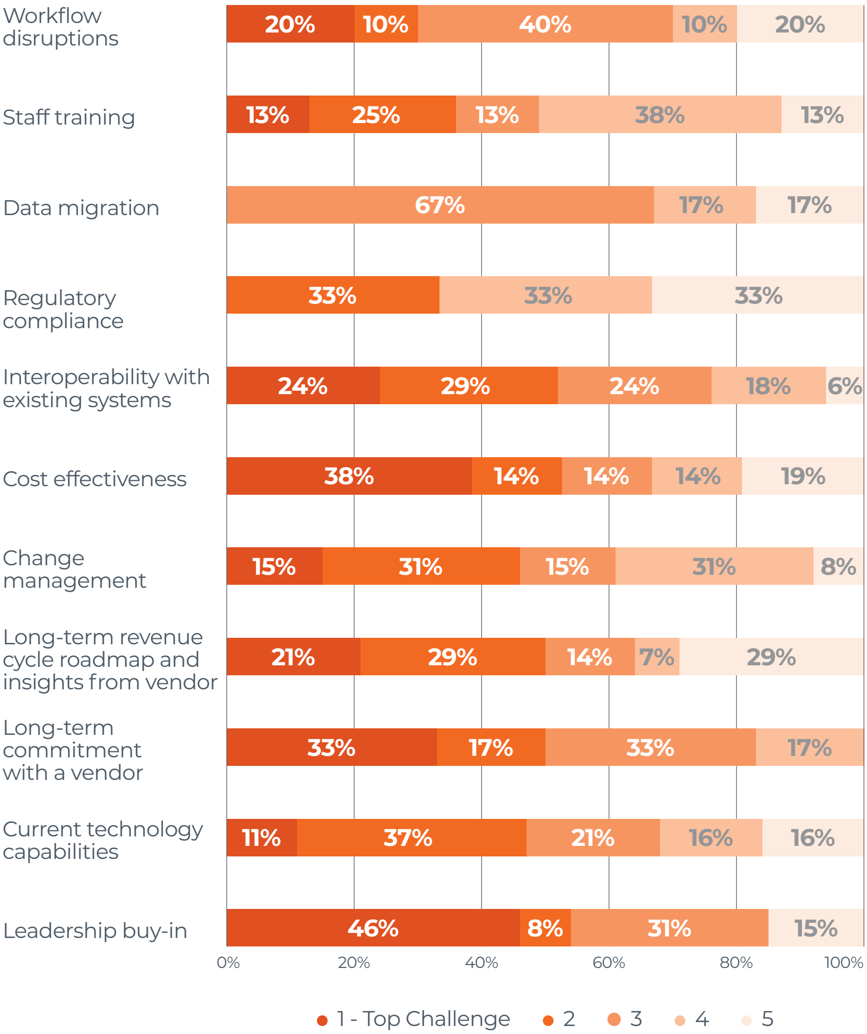
Top implementation support from an RCM partner
Percent of executives selecting response, n=30*



*Sample size varies across category. Percentages may not equal 100% due to rounding.

Additional data: Graph 6

Key challenges for seamless RCM solution adoption
Percent of executives selecting response, n=30*

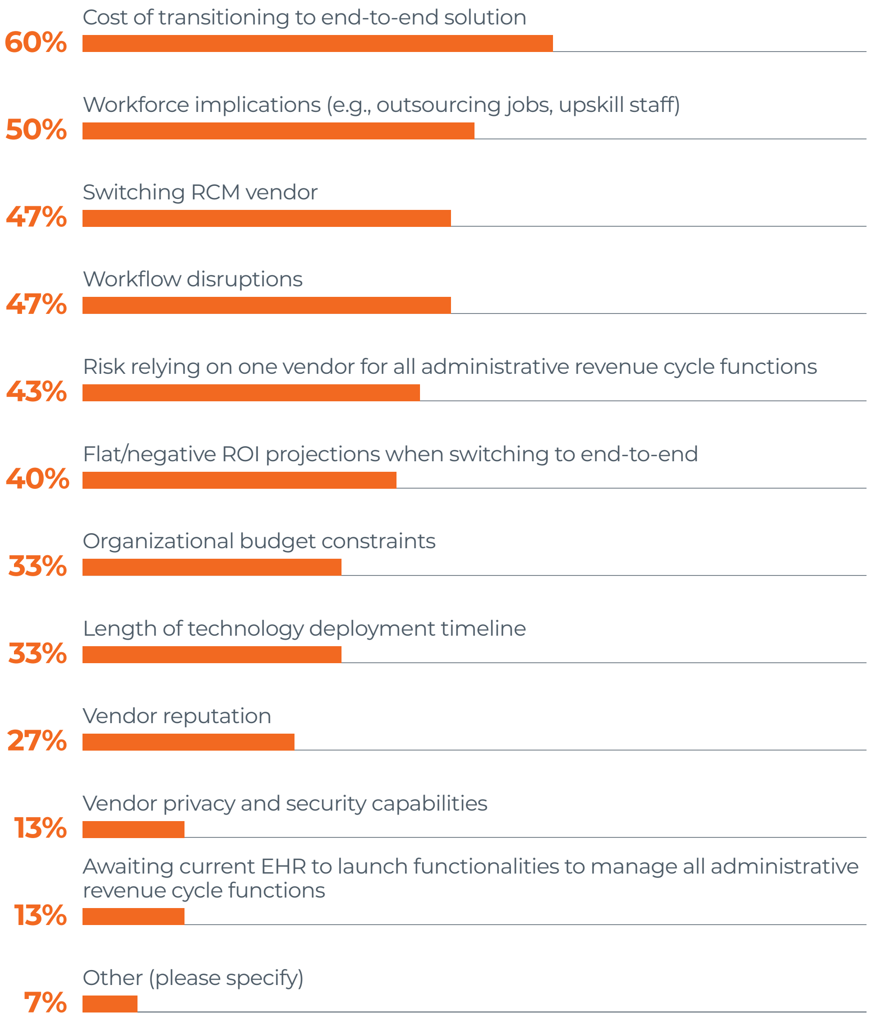


*Sample size varies across category. Percentages may not equal 100% due to rounding.

Additional data: Graph 7

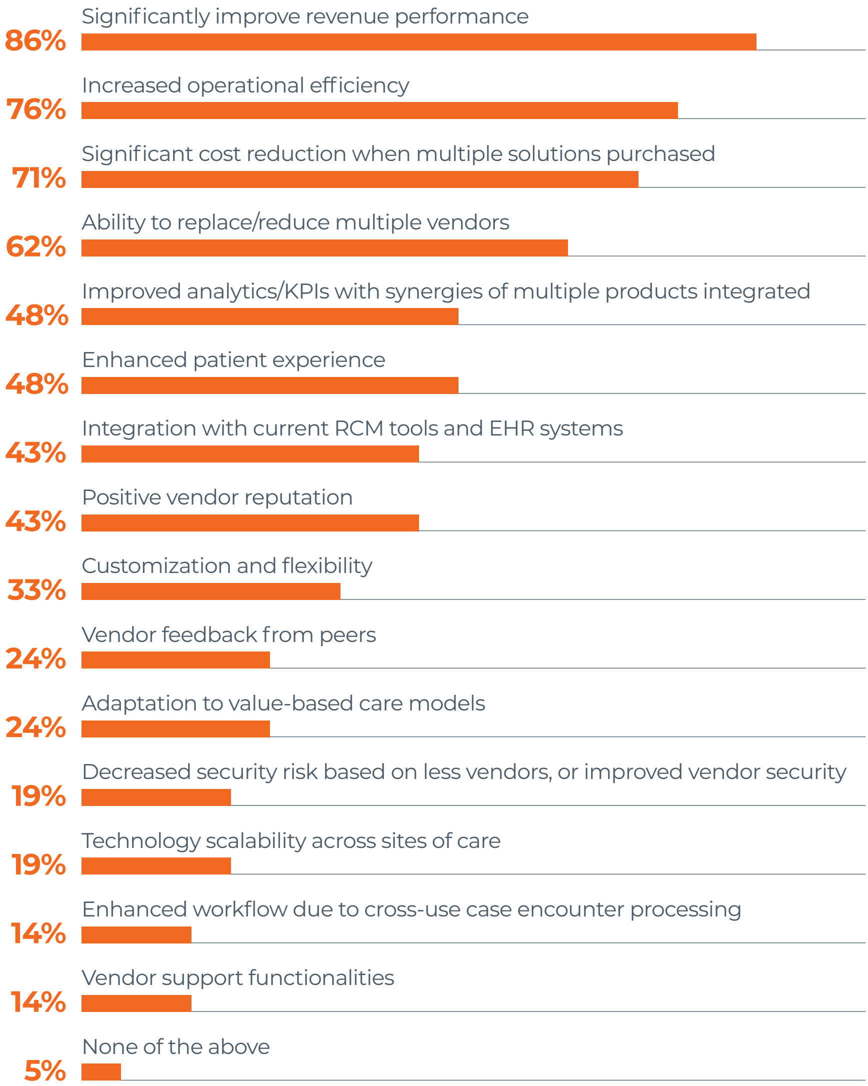
Top barriers/concerns for pursuing an end-to-end RCM partnership

Percent of executives selecting response, n=30



Additional data: Graph 8

Top factors for considering an end-to-end RCM solution
Percent of executives selecting response, n=21



Methodology

In 2023, The Health Management Academy conducted qualitative interviews and administered a quantitative survey to Leading Health System executives regarding their perspective on revenue cycle management partners and platform consolidation. The 30 quantitative survey responses and 6 qualitative insight conversations represent 36 total executives and 36 unique health systems.

Respondent roles included: Chief Revenue Cycle Officer, VP/Director of Revenue Cycle, and Senior Vice President of Finance.

The Academy Project Team

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