Top 3 Trends in Revenue Cycle

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Ambient AI – Speech and Beyond

Denials Management

Outsourcing vs Insourcing

KLAS Research Overview

KLAS is entirely dedicated to improving healthcare, including the **provider** and **payer** markets

3,100	**Healthcare customer executives** (VP & C-Level) who actively participate by sharing their experiences. They also benefit from accessing KLAS data and reports.
5,400+	**Healthcare organizations worldwide** represented in the KLAS data through the participation of their employees each year who share their voices and experiences.
27,000+	**Interviews** conducted each year. Over 90% are person-to-person interviews with current customers.
900+	**Healthcare IT products and services** measured by KLAS.
420+	**Vendors** measured and highlighted in KLAS reports.
27,839	**Downloads** of KLAS specialty reports published last year by healthcare customers. Average of 400–500 healthcare customer downloads per report.
28	**Years operating**

Industry Events and Summits

Upcoming Events

Middle East Summit 2025
January 24-25, 2025
Dubai, UAE

Best In KLAS Show 2025
March 3, 2025
Las Vegas, NV

Patient & Consumer Innovation Summit 2025
April 15-16, 2025
Salt Lake City, UT

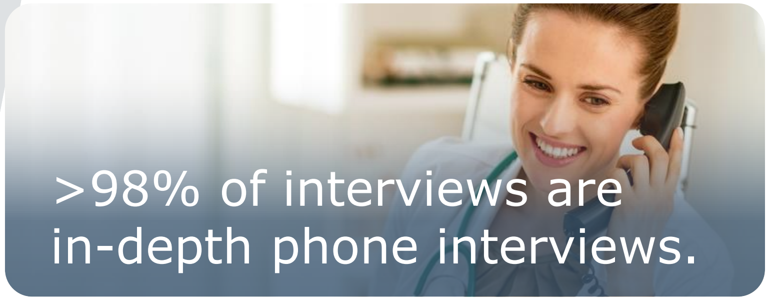
K2 Payer/Provider Collaborative Summit 2025
May 20-21, 2025
Salt Lake City, UT

Global Summit 2025
June 2-4, 2025
Athens, Greece

In-Depth Interviews

Across 120+ Healthcare Technology and Services Markets

In 2023, KLAS conducted **27,056 interviews** with individuals at different healthcare organizations.



- 340B Management Syst
- Acute Care EMR
- Acute Care EMR - Global
- Advanced Visualization
- Ambulatory EMR
- Ambulatory RCM Services
- Ambulatory Specialty EMR
- Application Hosting
- Automated Dispensing Cabinets
- Behavioral Health
- Business Decision Support
- Business Solutions Implementation Services
- Cardiology
- Cardiology Hemodynamics
- Care Management Solutions (Payer)
- Claims & Clearinghouse
- Clinical Communications
- Clinical Decision Support - Care Plans & Order Sets
- Clinical Decision Support - Point-of-Care Clinical Reference
- Clinical Documentation Improvement
- Clinical Optimization
- Complex Claims Services
- Computer-Assisted Coding (CAC)
- Computer Assisted Physician Documentation (CAPD)
- Credentialing
- Customer Relationship Management (CRM)
- Data Archiving
- Data Visualization and Reporting
- Digital Pathology (Non-US)
- Digital Rounding
- Drug Diversion Monitoring
- Eligibility Enrollment Services
- Emerging Technology Solutions
- EMR-Centric Virtual Care Platforms
- Enterprise Imaging
- Enterprise Resource Planning (ERP)
- Enterprise Software Suite Solutions
- Extended Business Office
- Extensive IT Outsourcing
- Financial Improvement Consulting
- Go-Live Support
- Healthcare Artificial Intelligence - Data Science Solutions
- Healthcare Business Intelligence & Analytics
- Healthcare IoT Security
- Healthcare Management Consulting
- Healthcare Safety, Risk and Compliance Management
- HIT Advisory Services
- HIT Implementation Leadership (Large)
- HIT Implementation Leadership (Small)
- HIT Staffing
- Home Health EHR
- Hospice
- Human Capital Consulting
- Identity & Access Management
- Image Exchange
- Infection Control & Monitoring
- Integration Engines
- Interactive Patient Systems
- Interoperability Platforms
- IV Workflow Management
- Long-Term Care
- Medication Inventory Management
- Mobile Charge Capture
- Oncology - Medical
- Oncology - Radiation
- Oncology Treatment Planning
- Other KLAS Validated Services
- Other KLAS Validated Software
- Outsourced Coding
- PACS
- PACS - Global
- Partial IT Outsourcing
- Patient Access
- Patient Accounting & Patient Management
- Patient Education
- Patient Financial Engagement
- Patient Financing Services
- Patient Flow
- Patient Intake Management
- Patient Outreach
- Patient Portals
- Patient Privacy Monitoring
- Payer Claims & Administration Platforms
- Payer IT Consulting Services
- Payer Quality Analytics
- Pharmacy Automation - Dispensing Robotics
- Pharmacy Automation – IV Robots
- Pharmacy Surveillance
- Physician Advisory Services
- Population Health Management
- Practice Management
- Quality Management
- Radiation Therapy - Equipment
- Real-Time Location Systems (RTLS)
- Release of Information
- Remote Patient Monitoring
- Revenue Cycle – Charge Capture
- Revenue Cycle – Chargemaster Management
- Revenue Cycle – Claims Management
- Revenue Cycle – Contract Management
- Revenue Cycle Optimization
- Revenue Cycle Outsourcing
- Revenue Integrity/Underpayment Services
- Risk Adjustment and Analytics
- Robotic Process Automation
- Scheduling - Nurse & Staff
- Scheduling - Physician
- Security and Privacy Consulting Services
- Security and Privacy Managed Services
- Small Practice Ambulatory EMR/PM (10 or fewer Physicians)
- Smart Pumps
- Social Determinants of Health Networks
- Speech Recognition - Front-End EMR
- Speech Recognition - Front-End Imaging
- Strategy, Growth & Consolidation Consulting
- Talent Management
- Technical Services
- Time & Attendance
- Transcription Services
- Value-Based Care Consulting
- Value-Based Care Managed Services
- Video Conferencing Platforms
- Virtual Care Platforms (Non-EMR)
- Worksite Health Services

Industry Reports: US EMR Market Share

US Hospital EMR Market Share 2023

Market Energy Driven Mostly by Small Organizations

Oracle Health (Cerner) Achieves Double-Digit Hospital Growth with Small Hospital Wins; Large Hospital Losses Leads to Decline in Beds

In 2022, **Oracle Health (Cerner)** saw their first double-digit net gain in hospitals since 2018. Unlike in previous years, in which growth was fueled by expansion from large customers, Oracle Health's hospital gains in 2022 were driven primarily by small standalone hospitals opting for the CommunityWorks platform—49 of their 50 acute care wins were for hospitals under 200 beds (this is the fifth consecutive year Oracle Health signed the most hospitals of this size), and almost three-fourths were for CommunityWorks. However, due to the disparity in size between the small hospitals they gained and the larger hospitals they lost, Oracle Health still saw a significant overall decline in beds, the most of any vendor in this report. Due to ongoing revenue cycle challenges, larger Oracle Health customers are leaving; smaller hospitals continue to use the platform, though some share concerns about their experience with Cerner Patient Accounting/CommunityWorks Financials.

2022 US Acute Care Hospital Wins & Losses—By Vendor

Vendors ordered by net change in acute care hospital market share

Industry Reports:

Latin America EHR 2024:
Look at Market Share & Vendor Performance

K2 Collaborative Summit 2024:
Improving Healthcare Efficiency by Encouraging Shared Payer/Provider Goals

Global (Non-US) EHR Market Share 2024:
Large Regional Decisions Impacted a Broad Number of Hospitals

Enterprise Imaging 2024:
ndors and Providers Driving Market Progress

Clinical Mobility Shared Smart Devices 2024:
How Well Do Retail & Commercial-Grade Devices Meet Healthcare-Specific Needs?

Ambulatory EHR/PM Mindshare 2024:
Which Vendors Are Seen as Poised for Market Share Growth?

Scan to share feedback and Access data:

2024 KLAS Emerging Solutions Top 20

New technologies and companies continue to be developed to enhance healthcare, flooding provider organizations with options for technology and services. Amid all the development, vendor partners with significant potential to benefit organizations may be missed. Based on the opinions of 49 industry thought leaders, KLAS' annual Emerging Solutions Top 20 report seeks to help healthcare organizations identify the new technologies best positioned to impact the Quadruple Aim of Healthcare. This includes (1) ranking emerging solutions by their potential to disrupt the healthcare market and (2) providing insights from participating healthcare leaders into what innovation themes organizations should be aware of as they seek to provide optimal patient care.

2024
Emerging Solutions
TOP 20
KLAS RESEARCH

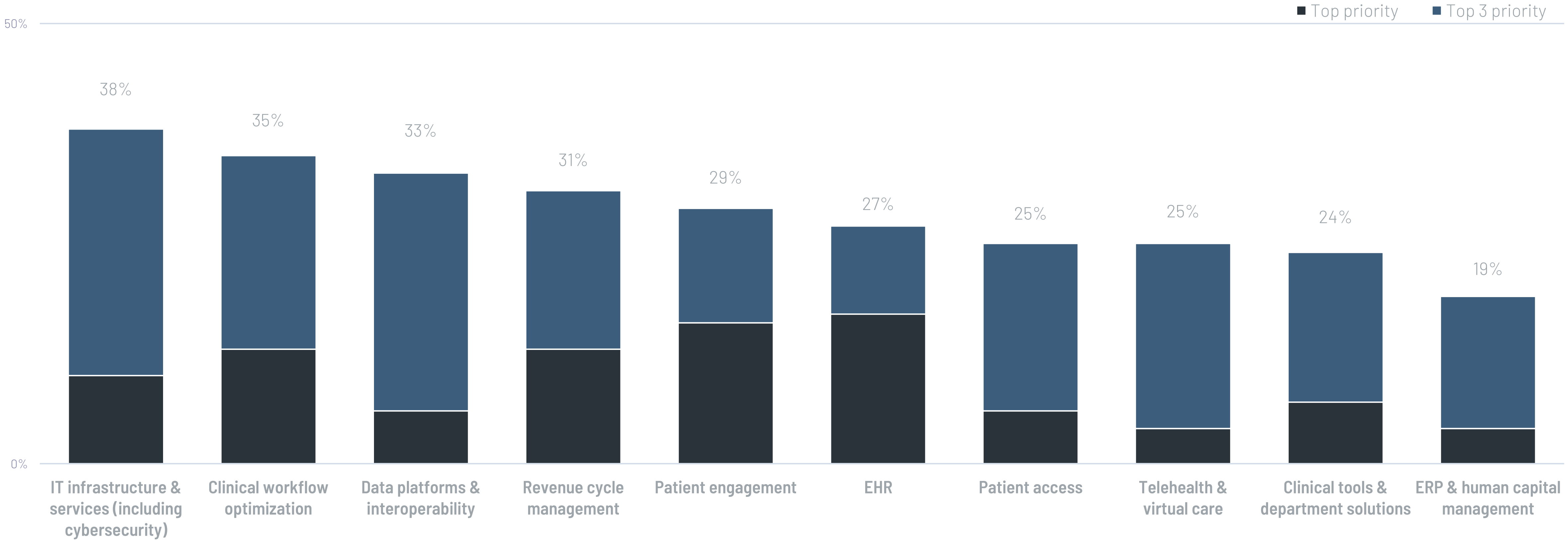
Scan to Access the Report:

Overview of Market Trends

Providers cite IT infrastructure & services and clinical workflow optimization as their top IT priorities for 2024

Percentage of Providers Citing Top 3 Software and Digital Technology Investment Priorities for 2024

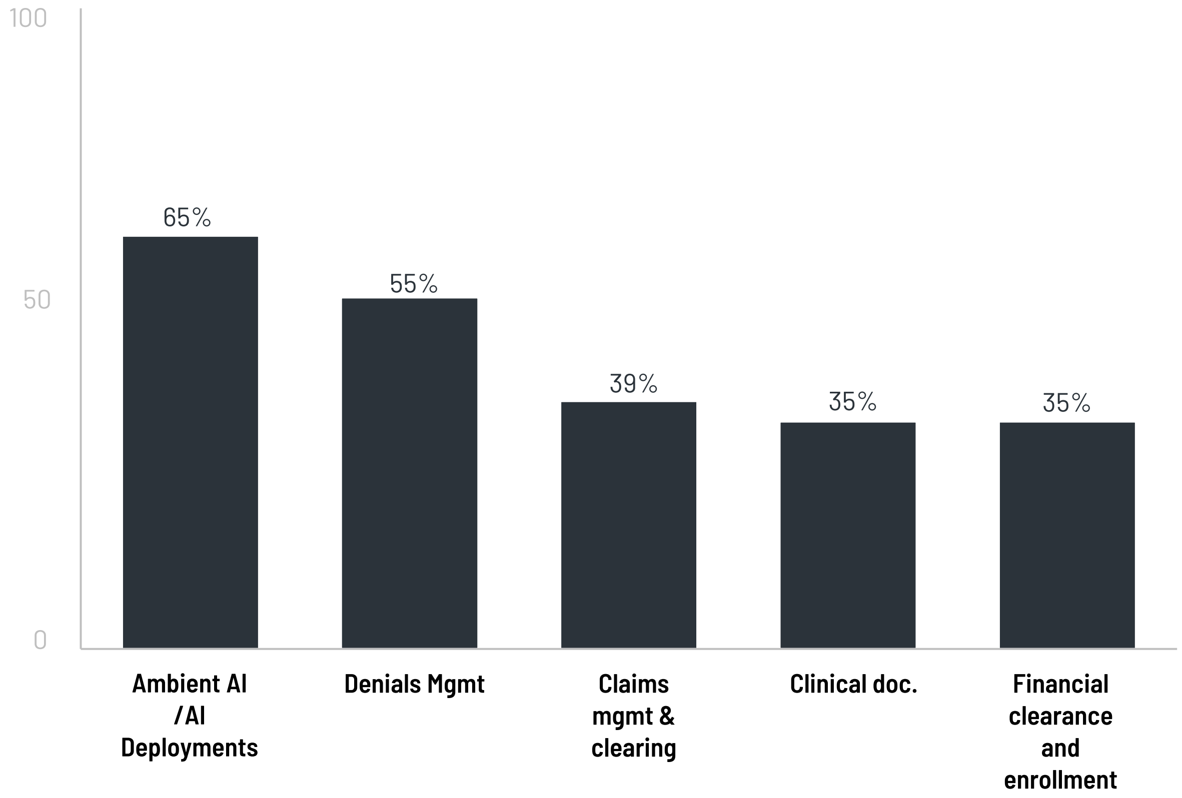
(n=100)



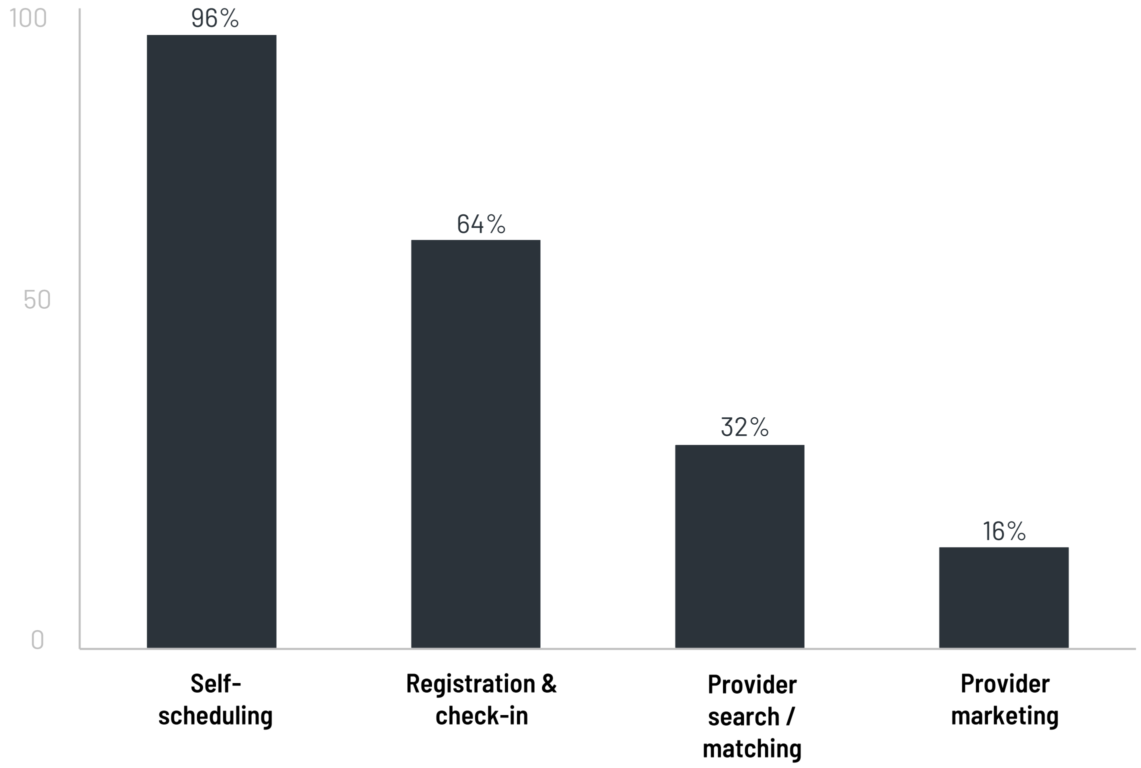
Note: Chart excludes priorities selected by <10% respondents: VBC enablement and governance, risk & compliance
Source: Bain Provider & Payer HCIT survey (n=150)

Healthcare C-Suite investment priorities over the next 12 months

Revenue Cycle Management



Patient Access



Source: Bain Provider & Payer HCIT survey (n=150)

In the wake of COVID, healthcare payer and provider organizations alike are looking to balance newly learned agility and alignment with sustainable effort and governance

Pre-2020

Previously Held Beliefs:

- ROI can be soft or vague
- Slow pace of development
- Reactive mindset from IT teams
- High levels of governance for any initiatives
- Low visibility into what is happening in the market

2020–2023

Complications and Adaptations:

- Rapid experimentation, innovation, and development
- "MacGyver" attitude
- Cutting through red tape, but also bypassing governance
- Both staff and patients exposed to remote work and telehealth

2024

New Reality:

- Organizations know they can move fast but are trying to find a middle ground between speed and governance
- Greater focus on employee wellbeing and burnout
- IT wants to be more proactive and aligned within organization
- Organizations ascribing value to things they've never had to before

Healthcare providers identify denials, AI and automation, prior authorization as most addressable challenges with revenue cycle technology

Most Addressable Challenges in Revenue Cycle

1. **Denials Management & Prevention**
   (i.e., increasing volumes, longer processing, preventable denials)

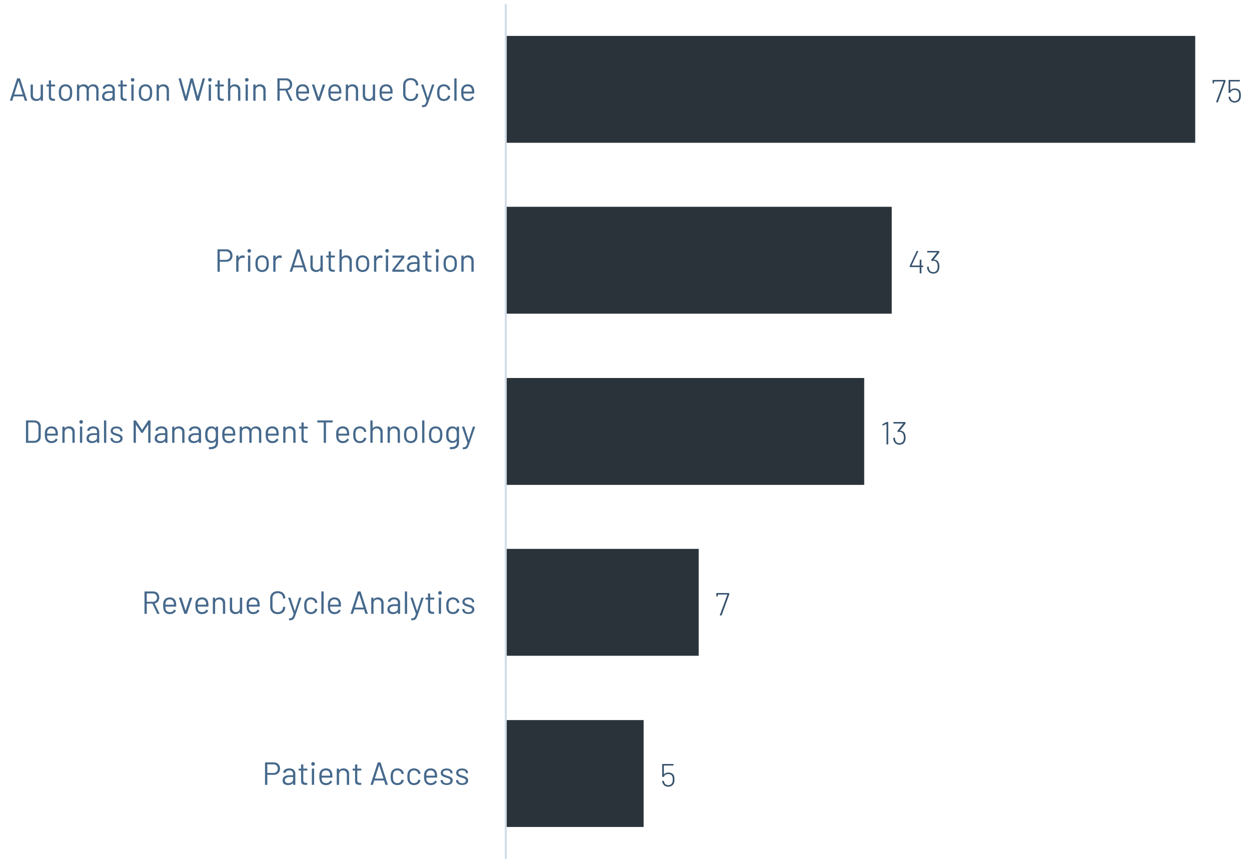
2. **Automation & AI Deployments**
   (i.e., adoption of new technologies, utilizing to accommodate staffing challenges, handling increased volumes)
   - Address Provider Burnout

3. **Prior authorization**

4. **Patient responsibility & collections**
   (i.e., upfront collections, self-pay, no surprise act, etc.)

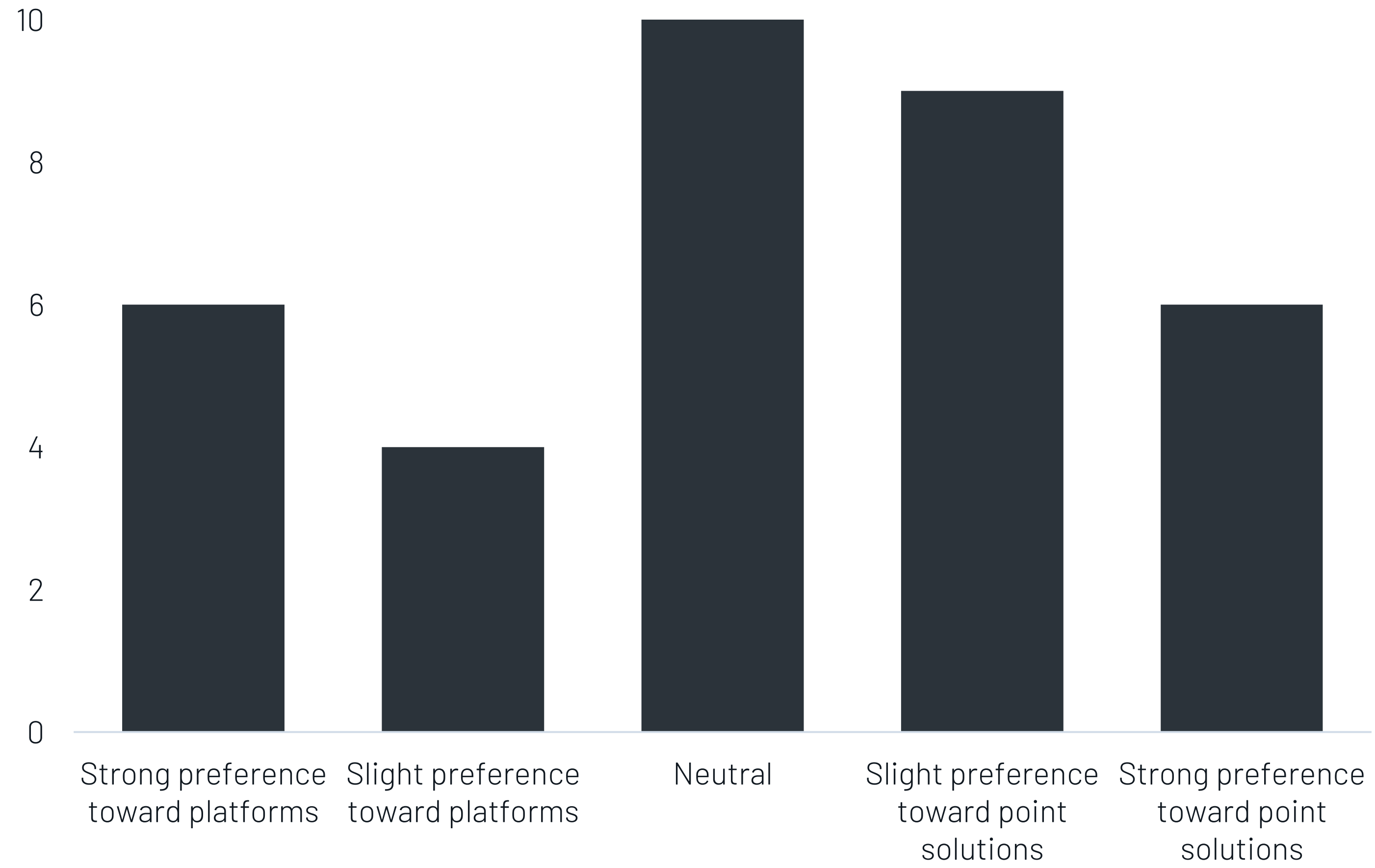
5. **Changes in payer behavior**
   (i.e., payment challenges, reimbursement contracting, etc.)

Revenue Cycle Technology/Services with Potential to Drive Greatest Impact in next 12-24 months



Respondents’ feelings about RCM platforms vary widely; the majority have no strong preference either way

Preference Between Platform and Point Solutions



Strong preference for platforms:

“We need to have all our systems integrated and point solutions increase support, contracting, vendors, and risk.”

Strong preference for point solutions:

“For me, finding a solution likely will drive the platform. At the end of the day, we want to know if something can meet the need, and then we can talk about how that platform looks. In some cases, we can adjust the platform. But sometimes, ***if we have a platform and we haven't gotten to the solution, that's a much tougher problem to solve.”***

A shift is occurring in the selection process to better accommodate the needs of an organization with the technology they already have

Organizationally, by default, if we can have our EHR vendor do something, we let them do it. It helps maintain the integrity of the data. We have one source of truth. But with that said, we have added on a specialized vendor for analytics. That gives us a little bit of a broader picture and we can switch it up a little bit different.

I would say ***we're slightly mixed on our sentiment toward point solutions and platforms.*** *Organizationally, if one vendor can do it, let's focus on that, but if we have a need to do something else, we're not opposed to it.*

Senior Director of Revenue Cycle

Vendor selection processes through RFPs have changed. As opposed to selecting the number one vendor that meets every need, the challenge in that approach frequently is that vendor may offer a lot of things that you don't really want anyways.

One of the things I recognized when I got to my organization is ***there was a lot of software that was either sitting on a shelf, or there was software that the full potential value wasn't being realized*** *of what was contracted for, because what that software solution offered was far beyond what they truly needed for that scenario.*

We're focusing on trying to get the needs assessments much more accurate, which aligning with being able to get ***better contracting and better ROI matching*** *for what our CFO expects us to be able to achieve.*

CIO

Financial pressures are forcing providers to consider solutions that promise ROI and to weigh incremental benefits over existing suites

Two Paths to Value & Outcomes

Future Facing Impact

Rigorous evaluation of business cases and speed-to-ROI for new IT purchases and deployment

We really have to have a compelling ROI to spend the money on a bolt-on.

—VP

Does our EHR vendor have the capability we need? Can we wait six months? If we can't, we need to get the value now because it's available with a competitive product.

—CIO

Immediate Impact

Raise the outcomes/ROI bar for technology partners and optimize value

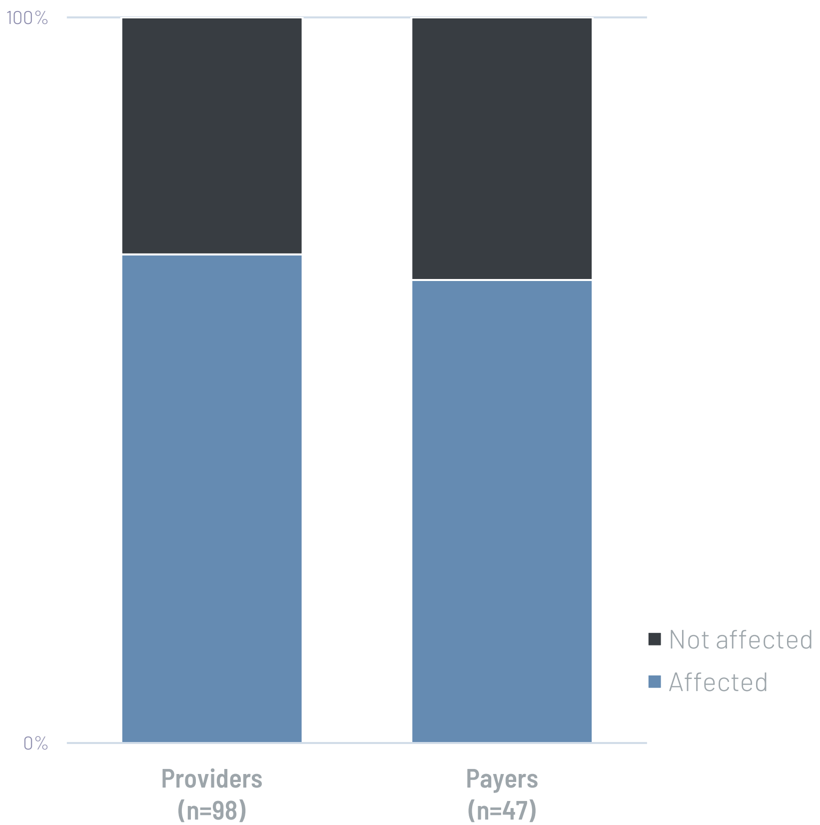
If the value is reasonably well quantified, then it's going to be pretty straightforward. Where are we going to see it in the P&L? It doesn't have to be direct, but we have to be able to connect the dots."

—CIO

Cybersecurity

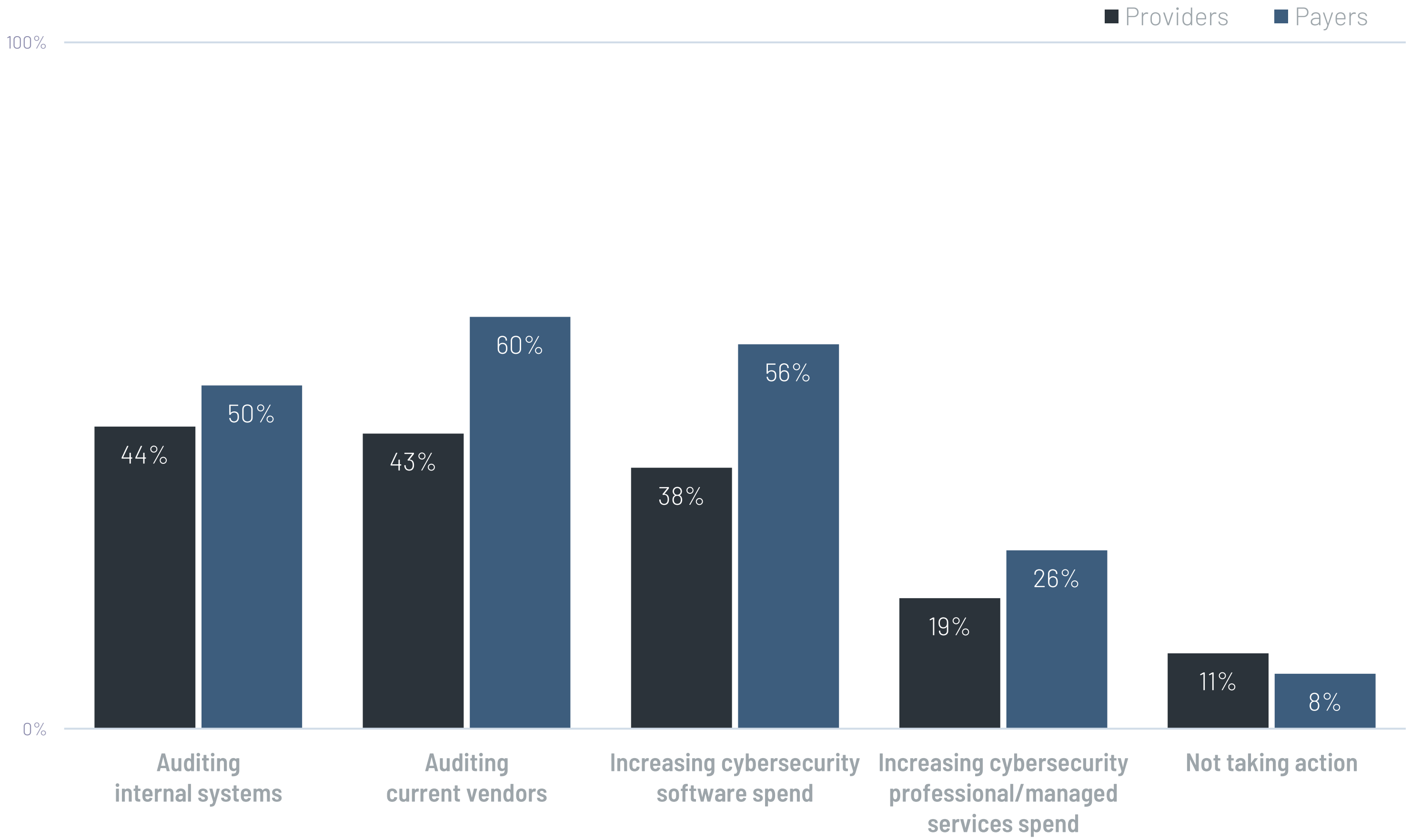
Most organizations have been impacted by the change healthcare cybersecurity incident; many are taking action to strengthen IT infrastructure against threats

Percentage Affected by the Change Healthcare Cybersecurity Incident



Note: Excludes "I don't know" responses
Source: Bain Provider & Payer HCIT survey (n=150)

Percentage Adopting Response to the Change Healthcare Security Incident



Majority of healthcare organizations impacted by Change Healthcare incident either directly or indirectly; Rise in internal and external security evaluations

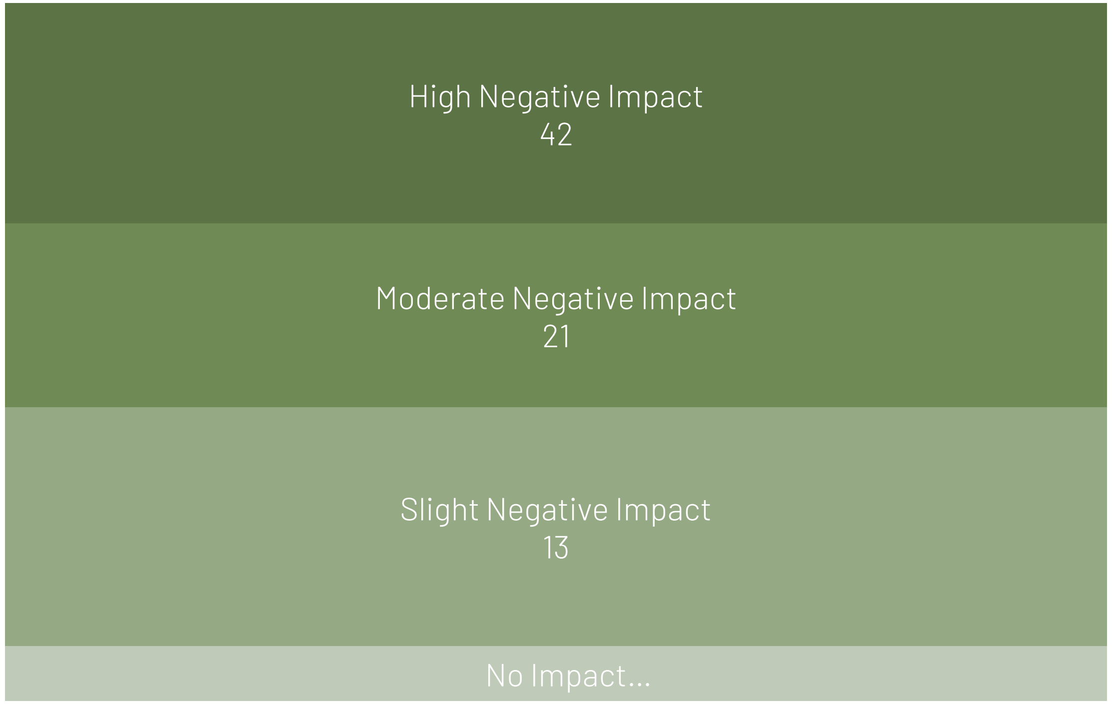
Most common actions taken in response to Change Healthcare incident

1. Changed technology vendors
   *"**We immediately pivoted to another partner and have continued to stay with them** to continue majority of our billing and follow up work as to not majorly impact cash."*

2. Implemented a secondary/backup system
   *"We quickly **pivoted to another claims platform**, adjusted strategy to have **multiple partners set up as back up**, and **splitting claims processing in various ways so we are not solely dependent on a single claims partner**."*

3. Internal & external auditing and addition of more cybersecurity guardrails
   *"It makes you very aware and looking at what you're doing and **making sure that any connections we have are safe** and that we have **good downtime procedures in place**, should something happen."*

Level of Impact Change Healthcare Incident had on Organization



Regulatory Impacts HTI-2 vs. Chevron

- HHS is busy proposing sweeping new regulatory frameworks (e.g. HTI-2 on the tail of HTI-1) … meanwhile, the impact of Chevron decision and the election is up in the air
- Will we have *more or less* regulatory involvement in HIT, interoperability, RCM policies? Impact on investments?

How the Supreme Court's blockbuster 'Chevron' ruling puts countless regulations in jeopardy CNN Politics

HHS Proposes HTI-2 Rule to Improve Patient Engagement, Information Sharing, and Public Health Interoperability

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Ambient Speech Performance Insights

"I got into medicine because I have a passion for confirming people's birthdays."

Why Healthcare Organizations Are Excited About Ambient Speech AI

"My experience with my ambient speech solution has been very positive and has helped me tremendously. ***If it were not for this product, I probably would have left medicine because of the administrative burden I was experiencing previously.*** *Before we had this product, my work had inefficiencies, and there was a lack of focus on patient care and more of a focus on metrics and getting tasks done.* ***It has helped me focus more on the actual relationships with the patients; those relationships are critical for me. The product allows me to see my patients without being tethered to the computer the whole time and worrying about what I need to be documenting."***

-Physician

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Why Healthcare Organizations Are Excited About Ambient Speech AI

"Our ambient speech solution has improved workflow. The physicians don't have to wait around. The information goes directly into the EMR, and then the physicians just sign off on it. Also, ***our billing quality has improved. Our physicians are more comprehensive in their medical records, so our denials have decreased because there is a lot more information when we are submitting.*** *In billing, we do a code, and it has to be supported by the medical record. Now in the medical record, the quality is better, so we are getting lower denials. Before, when physicians were typing and doing medical transcriptions, they weren't capturing everything.* ***But because we have a live conversation that is being recorded, the information is more comprehensive. We get money faster and a higher amount of money."***

-COO

KLAS' 2024-25 Roadmap for Ambient Speech

Individual Performance Reports & Arch Measurements	Decision Insights Report	KLAS RCM Summit	Market Performance Report	Vendor Impact Report
In Progress/Ongoing	Q3 2024	Oct. 29-30, 2024	Q1 2025	Q1 2025
• Spotlight reports that explore early customer experience for individual ambient speech products. • Arch Collaborative measurements* examining impact of ambient speech solutions within member healthcare organizations.	• Focused on what is driving the decision making for healthcare organizations in the ambient speech market.	• Core topic of the summit. Bringing together vendor and provider leaders to discuss benefits, best practices, opportunities for space to evolve, etc.	• Examine ambient speech product performance side-by-side. • Planning on a single report that has solutions split into product-type categories (i.e., fully automated, human in the loop).	• Analyze the adoption and impact of ambient speech solutions at healthcare organizations. • Leverage both KLAS vendor performance and Arch Collaborative data.

KLAS Perception Insights - Ambient Speech Decision-making Themes

Retention & Recruiting

In addition to the prospect of increasing efficiencies, keeping talent and brining in new talent are core motivators for organizations looking at ambient speech AI.

Start-up vs. Established Vendor

Many healthcare organizations want a vendor who can be flexible but are concerned about eventual market consolidation.

Piloting Multiple Products

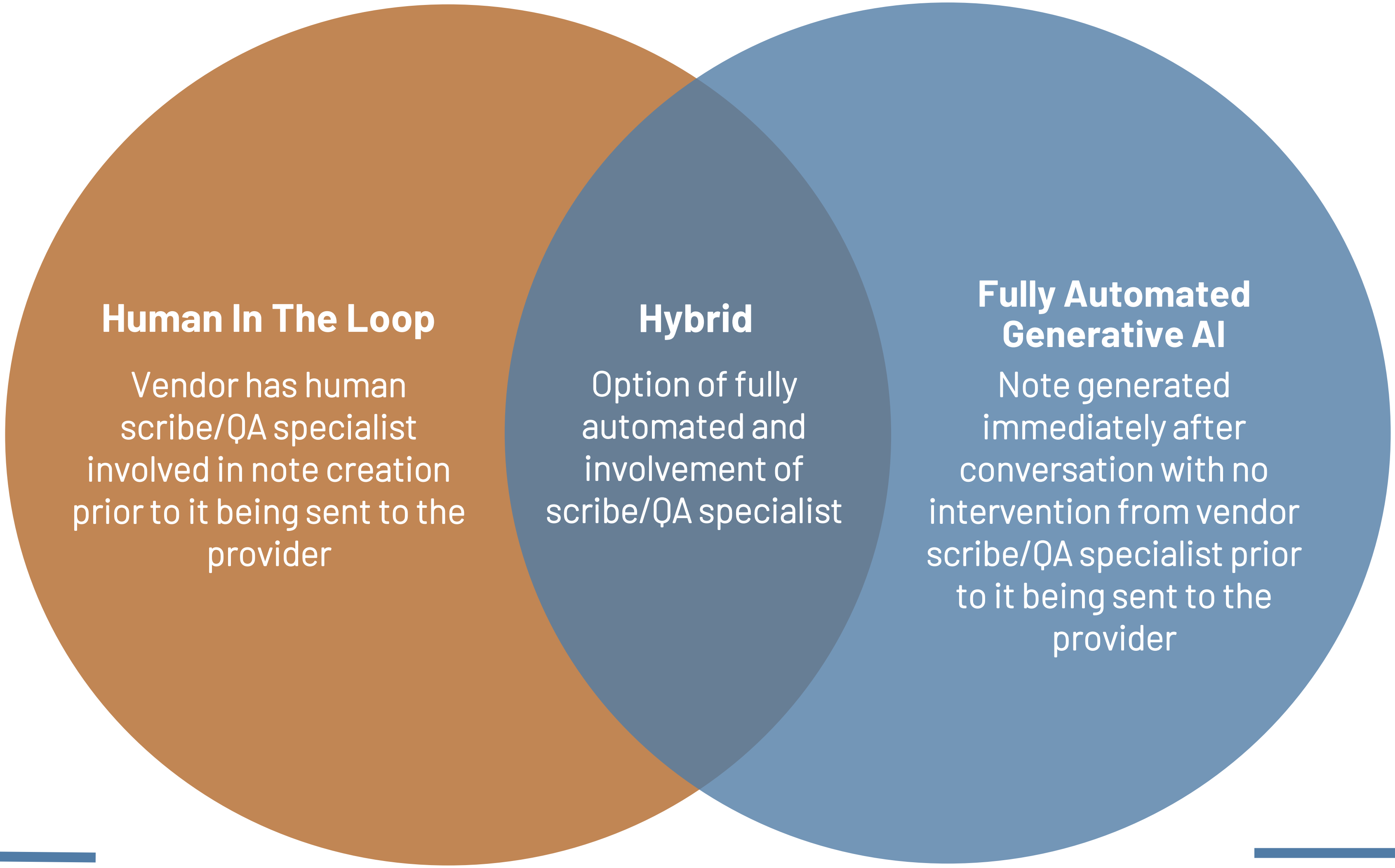
Some anticipate selecting a single solution while others are considering having multiple due to specialty-specific needs or to allow physicians their preference.

Retention of Traditional Documentation Solutions

Many anticipate initially retaining varying degrees of traditional documentation solutions to allow clinicians to use what works best for them.

Evolution of the Ambient Speech Product Landscape

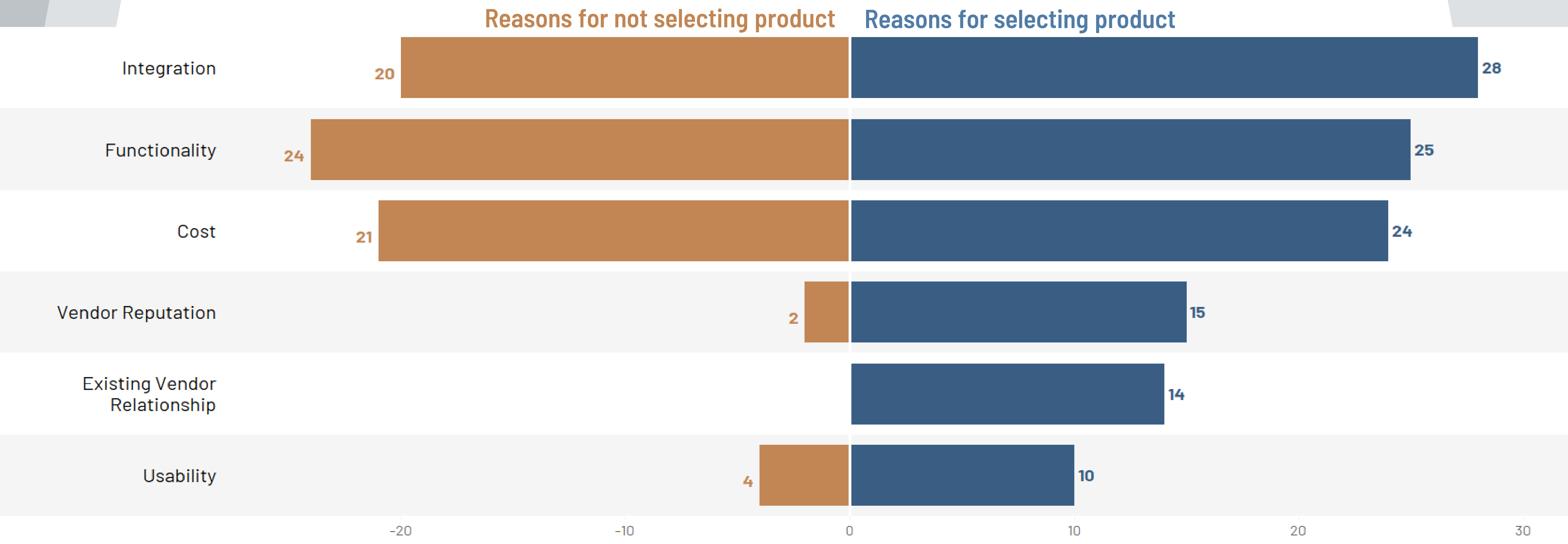
Voice-enabled, AI-powered solutions that listen to and capture clinician-patient encounters to generate clinical notes.



Top Reasons for *Selecting* or *Not Selecting* Ambient Speech Solutions

Ambient Speech Decision Insights

n=80 healthcare provider organizations; surveys collected between Jan. 2024 – Aug. 2024



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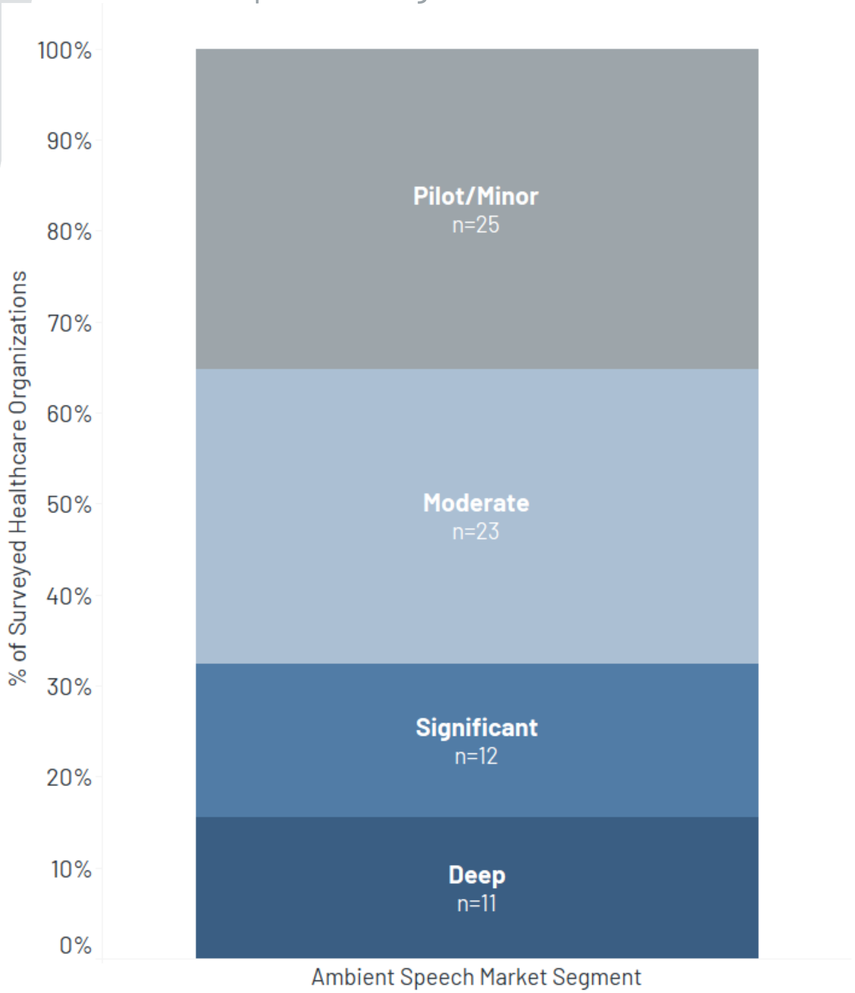
Clinician Adoption of Ambient Speech Solutions Anticipated to Quickly Accelerate

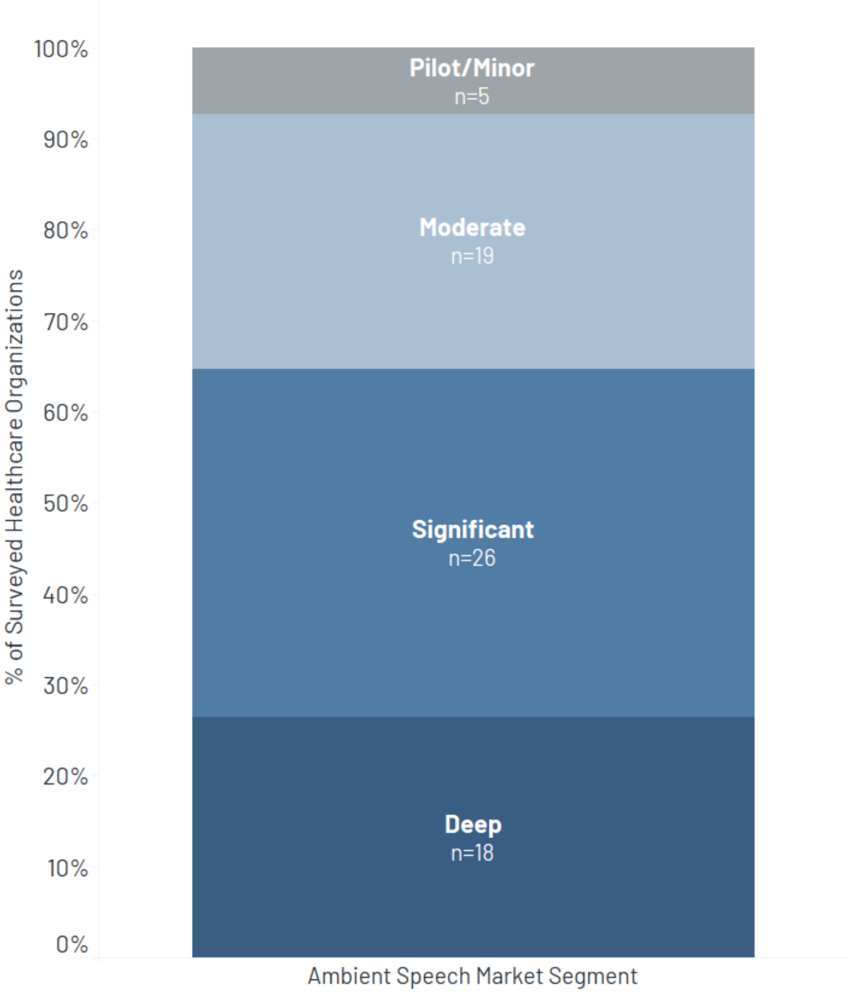
Current Clinician Adoption Rates

n=71 healthcare provider organizations



Projected Clinician Adoption Rates in 6 Months

n=68 healthcare provider organizations



Clinician Adoption

(% of active users vs. total clinicians)

- Pilot/Minor = 1%-15%
- Moderate = 16%-50%
- Significant = 51%-85%
- Deep = 86%-100%

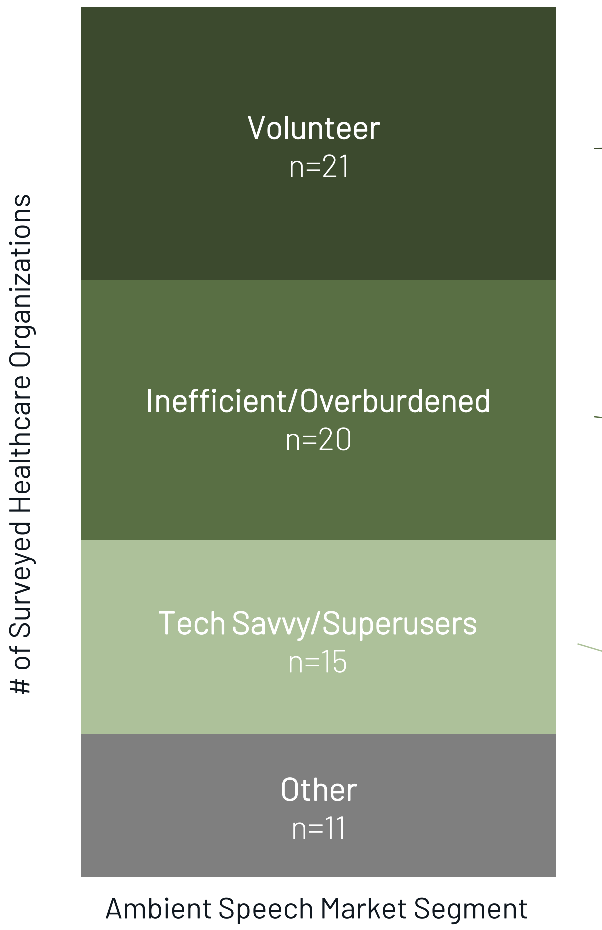
**Excluded "Unknown" responses, and no organization responded 0% future adoption.*

KLAS RESEARCH

Ambient Speech Products Consistently Delivering on Efficiencies and Reduction to Clinician Burnout; User Selection Process has Some Influence on Which Outcomes Are Achieved

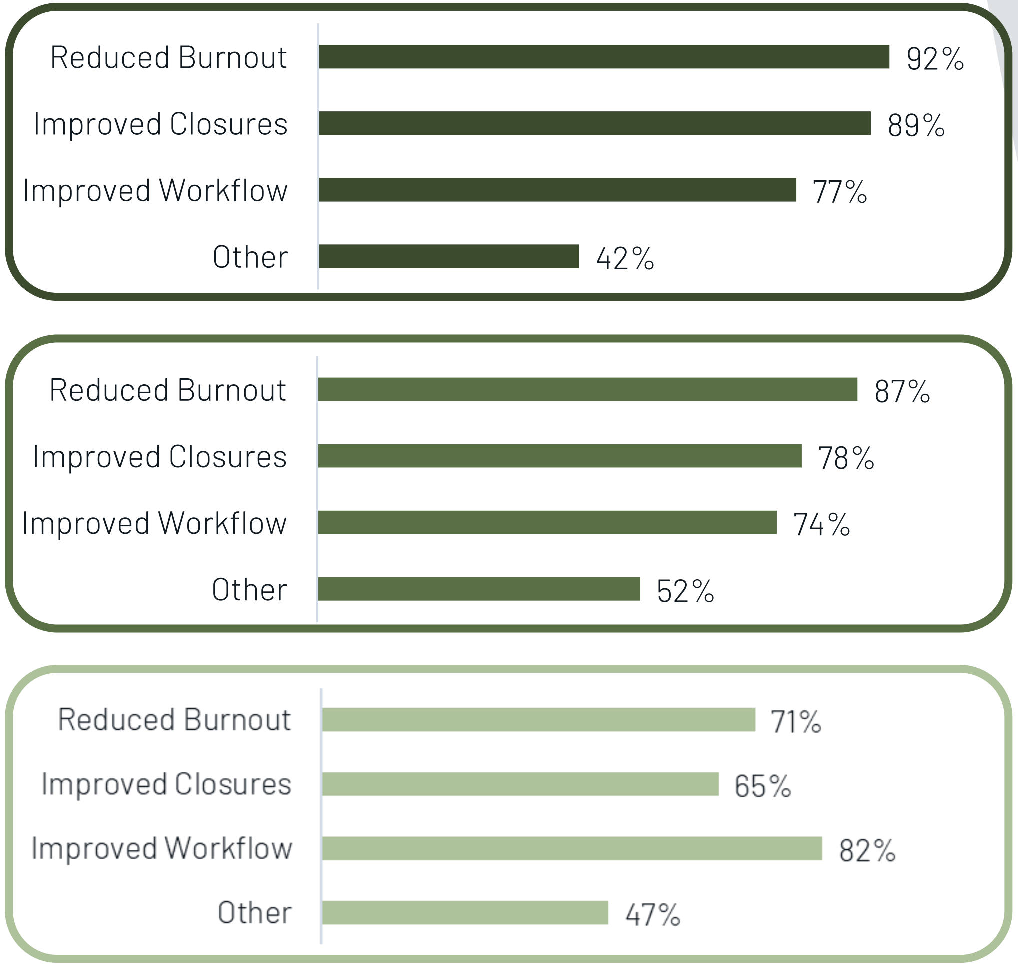
How Healthcare Organizations Selected Initial Users

n=61 healthcare provider organizations; Organizations could identify multiple methods



Outcomes Achieved Through Ambient Speech Solution

Percent of respondents that indicated achieving specific outcome



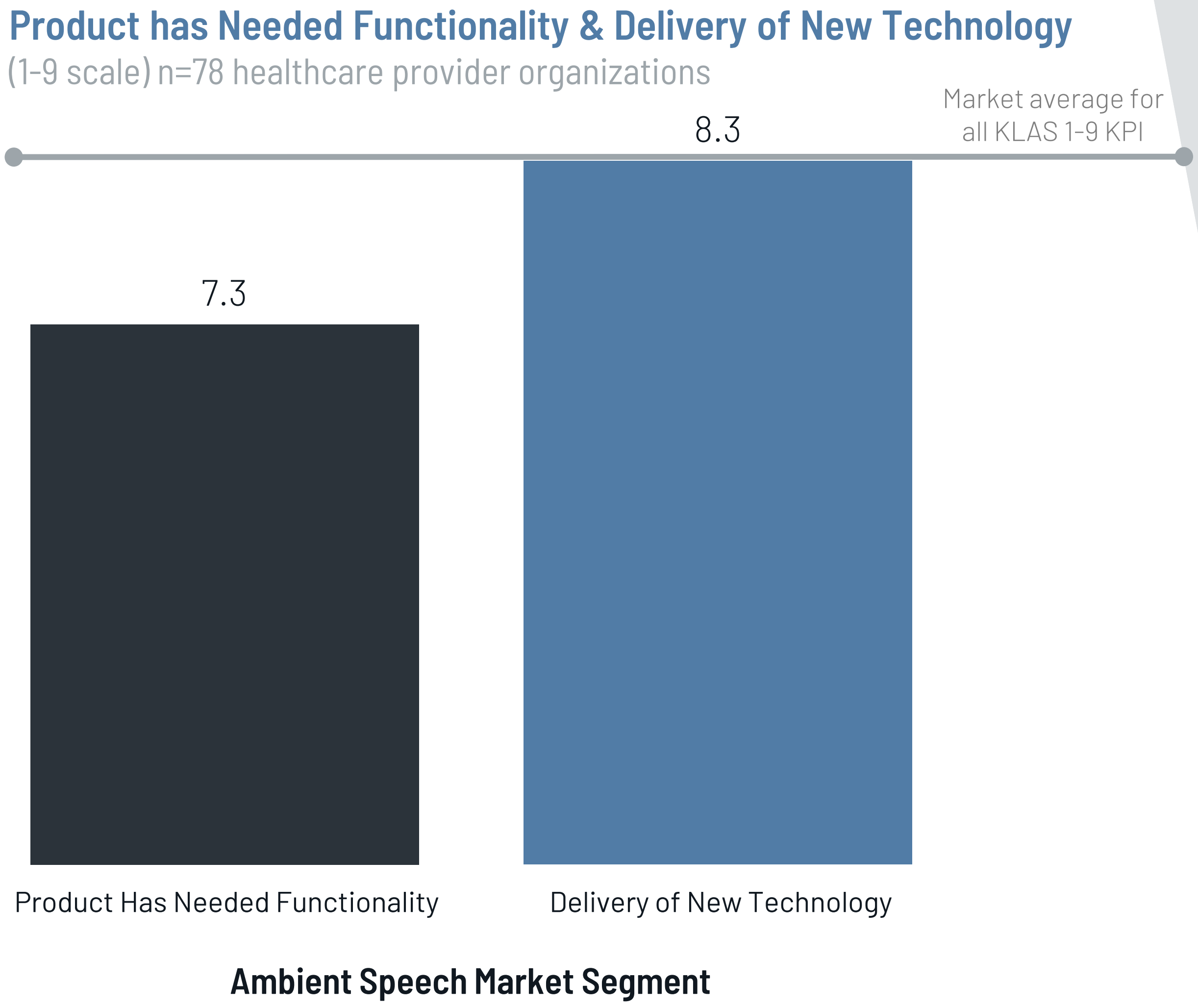
Healthcare Organizations and Vendor Partners Have Dynamic Vision for Ambient Speech AI Capabilities

User-indicated Technology Requests

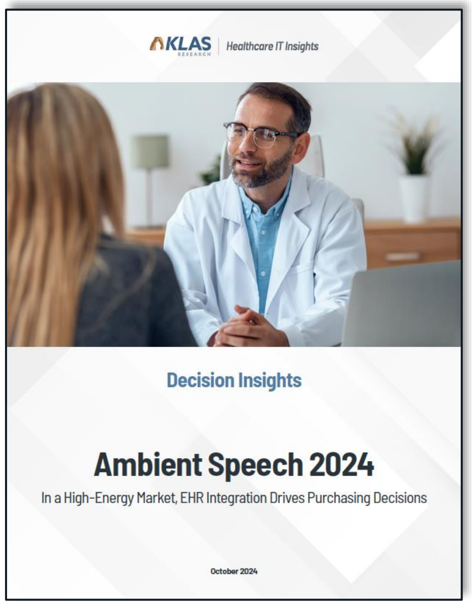
- Improved specialty-specific notes and expanded use cases
- User-specific personalization
- Submit orders/additional visits
- Pull in patient history & labs/diagnostic information
- Analytics/reporting to validate ROI
- Expansion of features to do more outside medical note (i.e., code suggestion, CDI, etc.)

Vendors Developing Trust With Customers

- Products rapidly evolving
- Users felt heard
- Roadmaps and innovative initiatives being clearly communicated



KLAS Research Ambient Speech Insights & Reports



Panel: Navigating Ambient Speech for Today and Tomorrow







Shiv
Rao

CEO & Co-Founder

Abridge

Nikhil
Buduma

Chief Scientist, Co-Founder

Ambience Healthcare

Ian
Shakil

Founder/CSO

Augmedix/Commure

Matthew
Ko

CEO

DeepScribe AI

Rizwan
Pasha

Chief Medical Officer, Health & Life Sciences

Microsoft/Nuance

Punit
Soni

CEO

Suki

Moderator:

Adam
Gale

CEO

KLAS Research

KLAS RESEARCH

Panel: Navigating Ambient Speech for Today and Tomorrow

Downstream Impact of Ambient Speech AI

Denials Management

Denials Management Services 2024

Which Firms Are Helping Overturn & Prevent Denials?

Healthcare organizations continue to face challenges with getting reimbursements, due in part to large volumes of complex medical claim denials issued by payer organizations. To access expertise in managing the appeals process, many healthcare organizations are engaging denials management services firms, who utilize multidisciplinary teams (e.g., legal, clinical, coding) to review accounts and submit appeals. This report—KLAS' first on denials management services—examines which firms consistently deliver strong execution, expected overturn rates, expertise, and partnership in denials prevention.

Firms at a Glance

Ordered by overall performance score

Overall performance score (100-point scale); Market average; 50.0–100.0

Distribution of overall performance score (100-point scale): Highly satisfied (90.0–100.0), Satisfied (80.0–89.9), Dissatisfied (<80.0). Based on individual respondents, not unique organizations. 0%–100%

Denials management-specific metrics (1–9 scale): Highly satisfied (8.0–9.0), Satisfied (7.0–7.9), Dissatisfied (<7.0)

Respondent organization size: 1–500 beds, 501–1,000 beds, 1,001+ beds. Based on individual respondents, not unique organizations. 0%–100%

Estimated client base: 51+, 26–50, 1–25

Firm	Overall performance score	Highly satisfied	Satisfied	Dissatisfied	Ability to quickly handle appeals	Clinical expertise in appeals process	Legal/regulatory expertise in appeals process	1–500 beds	501–1,000 beds	1,001+ beds	Estimated client base
Aspirion	(n=19) 92.1	17	1	3	Highly satisfied (n=12)	Highly satisfied (n=11)	Highly satisfied (n=12)	8	2	9	51+
R1 RCM	(n=16) 87.5	13	2	5	Satisfied (n=13)	Satisfied (n=11)	Highly satisfied (n=13)	5	3	8	26–50
*Limited data											
Revecore	(n=9) 95.0*	7	1	1	Highly satisfied (n=6)	Insufficient data†	Insufficient data†	4	2	3	1–25
Xsolis	(n=7) 81.4*	5		3	Satisfied (n=7)	Highly satisfied (n=7)	Satisfied (n=7)	5		2	1–25

KLAS RESEARCH

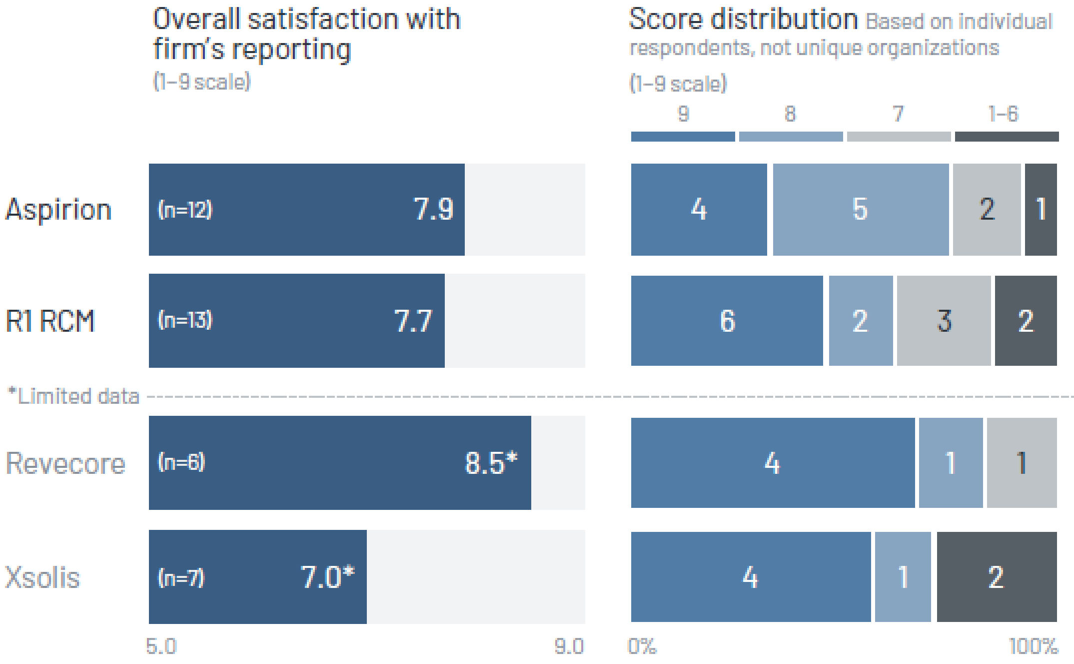
Across the Market, Firms Have Opportunity to Enhance Consistency & Depth of Reporting

Across clients from all measured firms, there is a common desire for more trending data (i.e., payer, claim type) and more granularity around performance insights. Even respondents who are currently satisfied with their firm's reporting have asked for additional insights to help them navigate the payer landscape and their own operations. While each firm is generally delivering on these requests, this trend points to a process that is currently more reactive than proactive, contributing to inconsistent reporting experiences for clients.

Note: KLAS began asking about client sentiments toward their firm's reporting in July 2023. Thus, the sample size is smaller than elsewhere in the report. KLAS will continue to monitor and report on client satisfaction with reporting.

Satisfaction with Firm's Reporting

Ordered by overall satisfaction score



Bottom line on firm's reporting

Aspirion: Respondents are mostly satisfied with the detailed reporting, though a few would like more transparency into the firm's performance and internal statuses. Some have mentioned recent improvements in reporting and anticipate additional enhancements.

R1 RCM: Respondents feel the firm is nimble and willing to enhance reporting or provide more specific insights on request. Some feel the base reporting could be more robust and include more detailed performance data and denials prevention insights.

Revecore: Respondents feel the base reporting meets expectations and the firm delivers on additional requests. One respondent desires more trending insights.

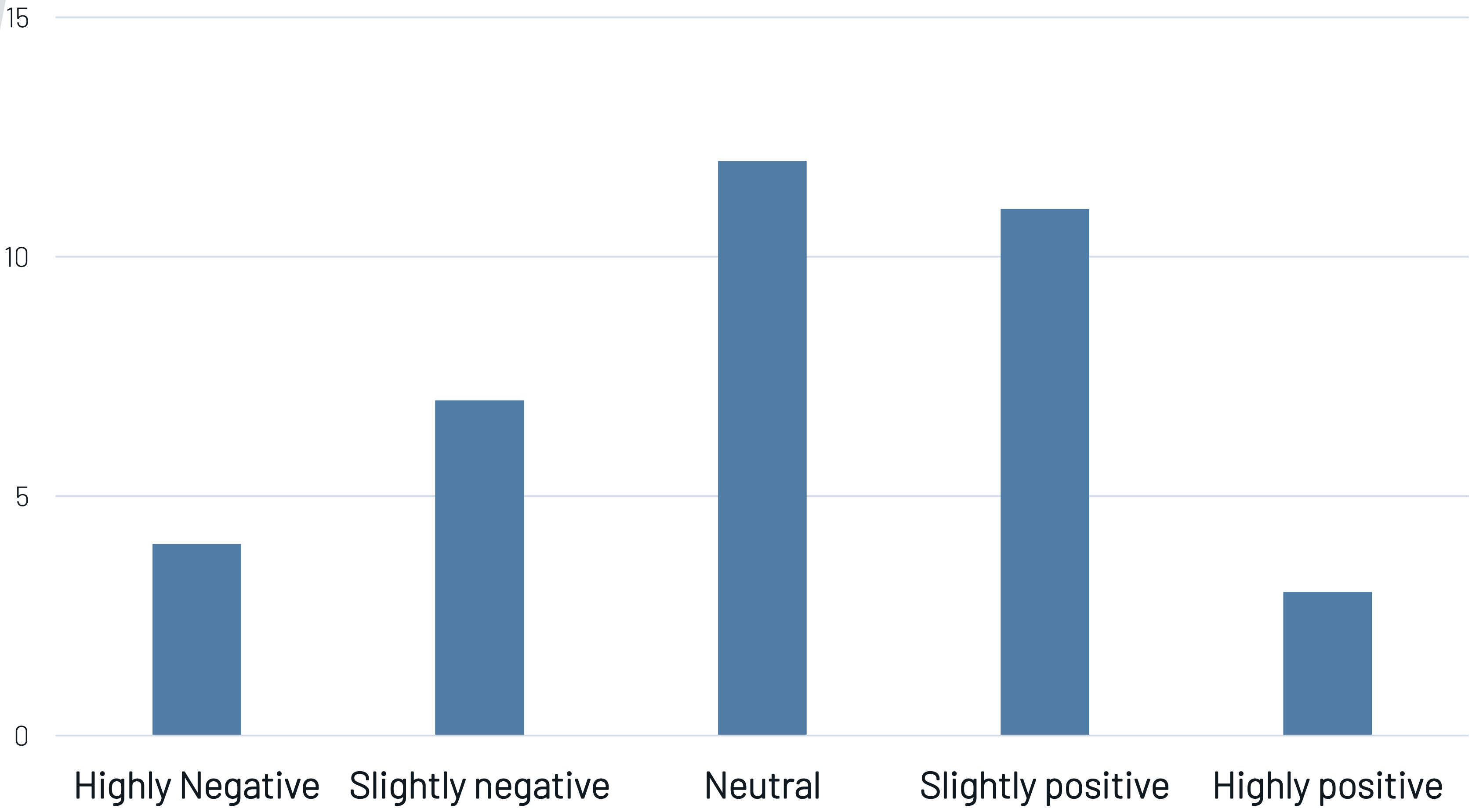
Xsolis: Respondents note the firm fulfills requests and updates the reporting to clients' benefit. The respondents dissatisfied with the reporting cite limitations with trending and performance data.

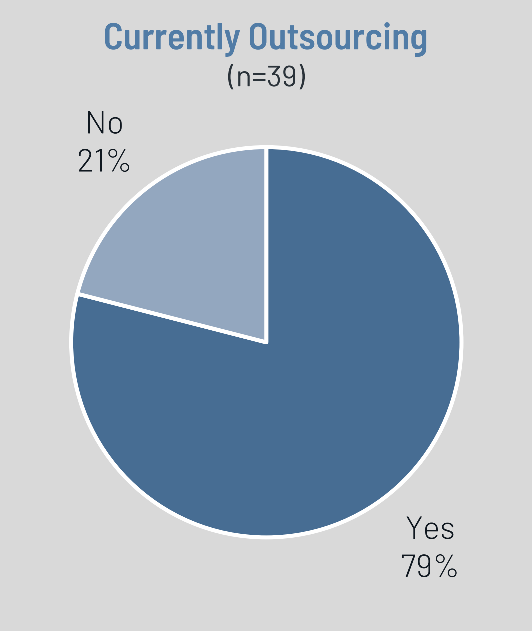
Outsourcing vs Insourcing

Feelings about outsourcing are varied despite most respondents currently outsourcing part of their revenue cycle to a third party

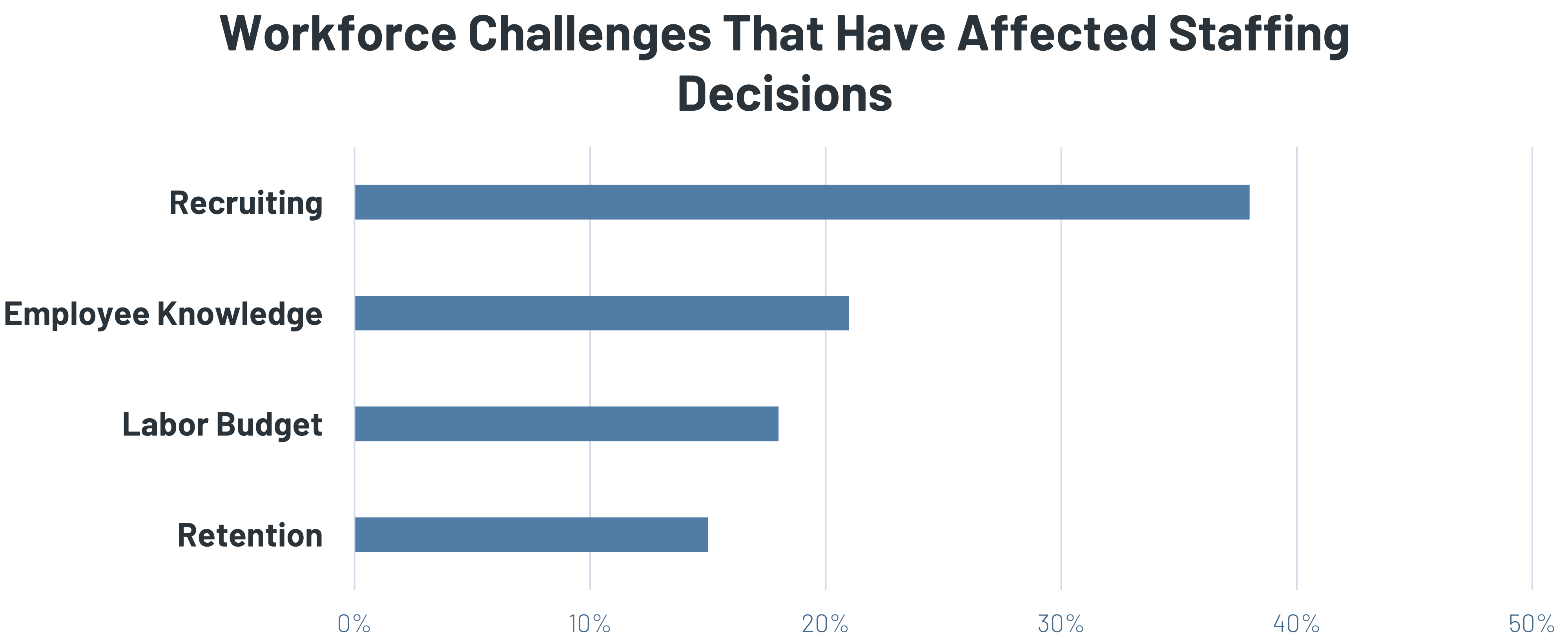
Sentiment Toward Outsourcing

Responses from the Revenue Cycle Management Summit (n=37)





Workforce Challenges Continue

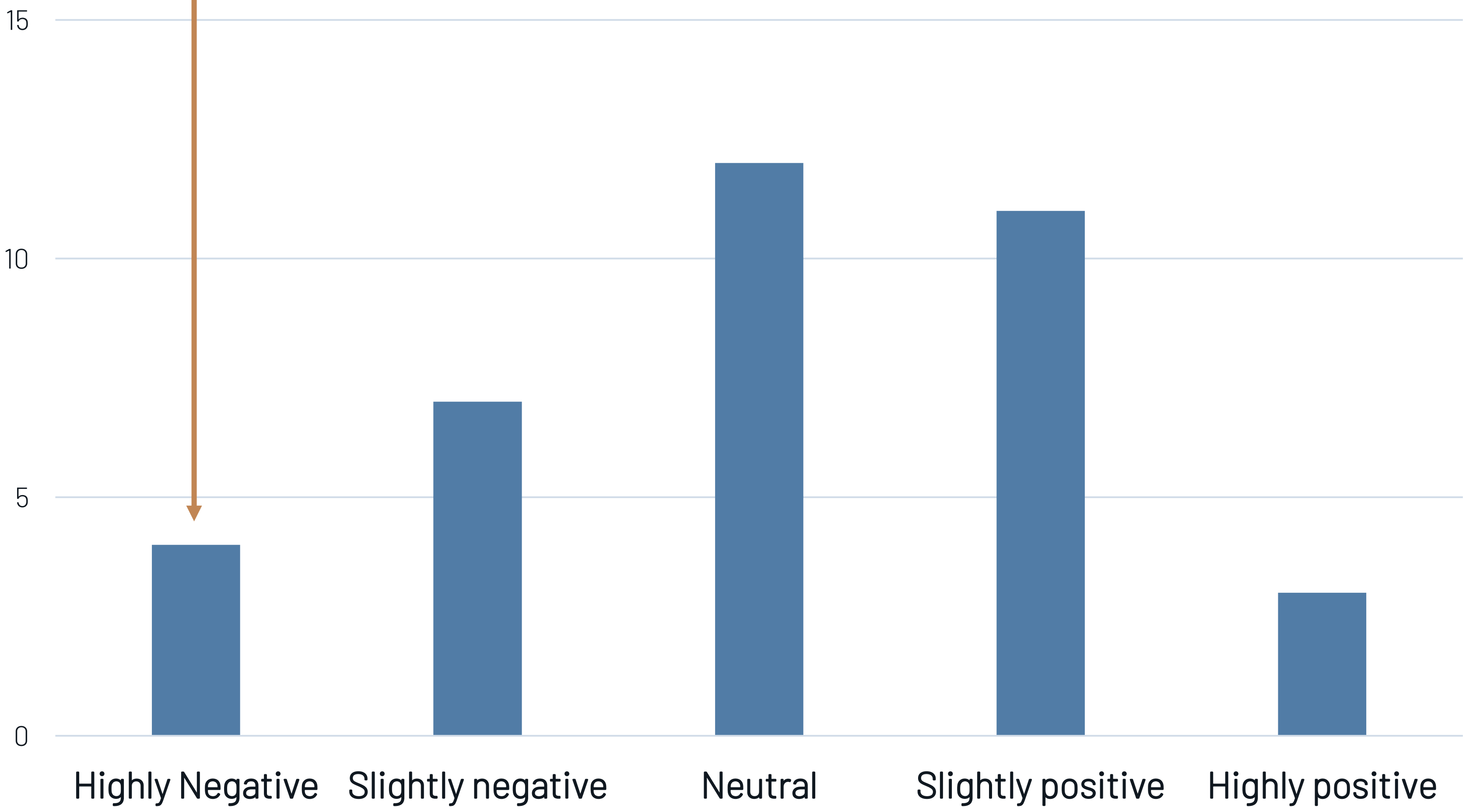


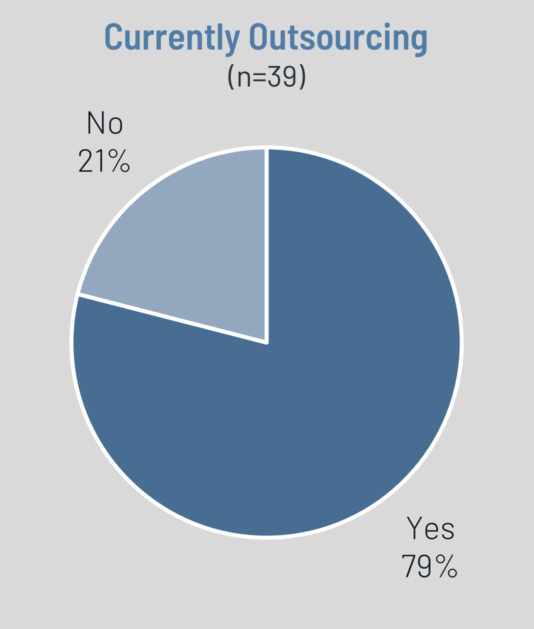
"It's always better to be able to do something in-house if you can. But now I'm dealing realistically with what everybody else is having to deal with, like staffing, and retaining staff. ***We're not in the ideal world where we could just go and pluck out the right people internally and put them here.****"*

Chief Financial Officer (neutral)

"**Costs are not contained** as well, and there's a **loss of control** on quality expectations."

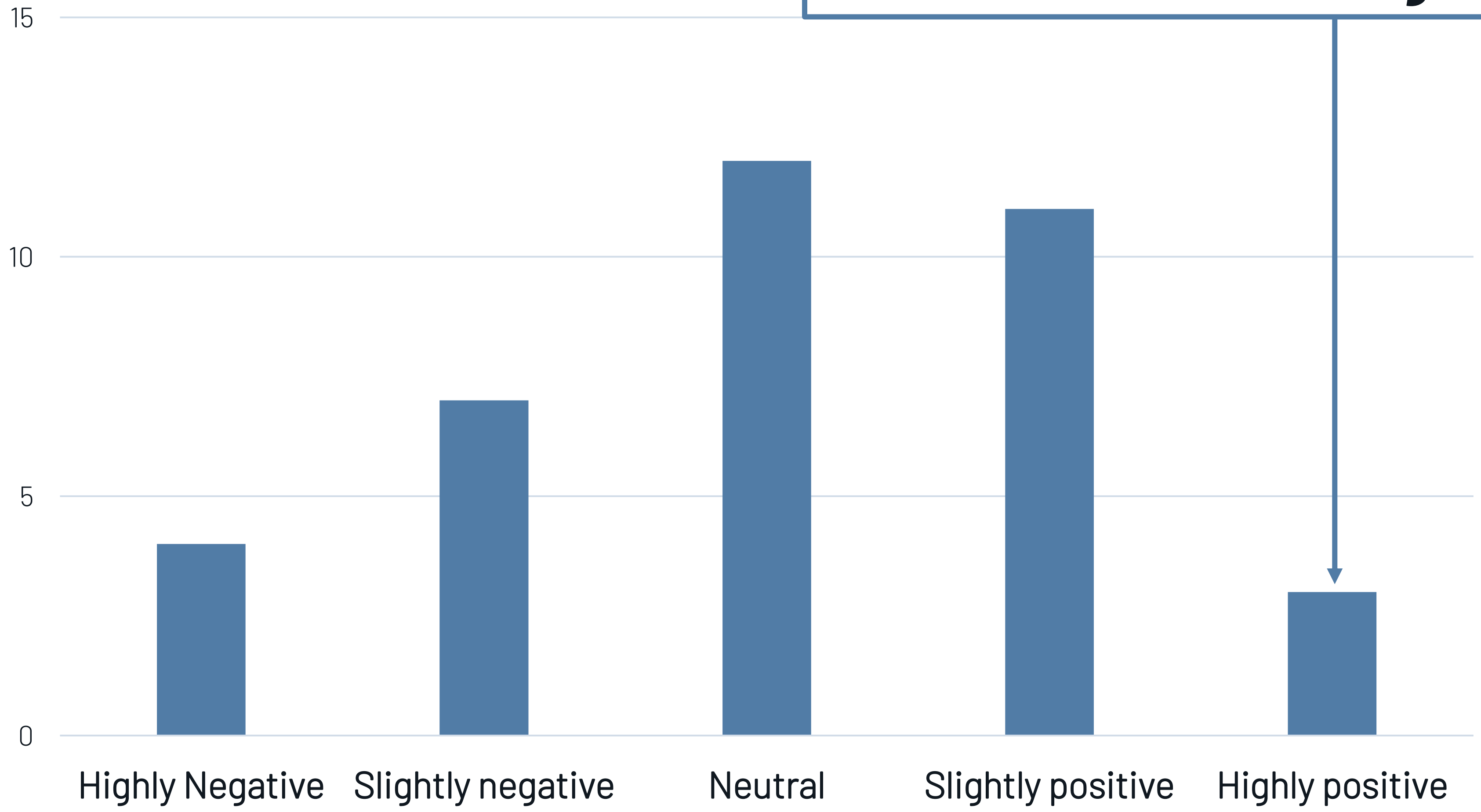
"**No one** works your hospital's accounts as well as your own employees"

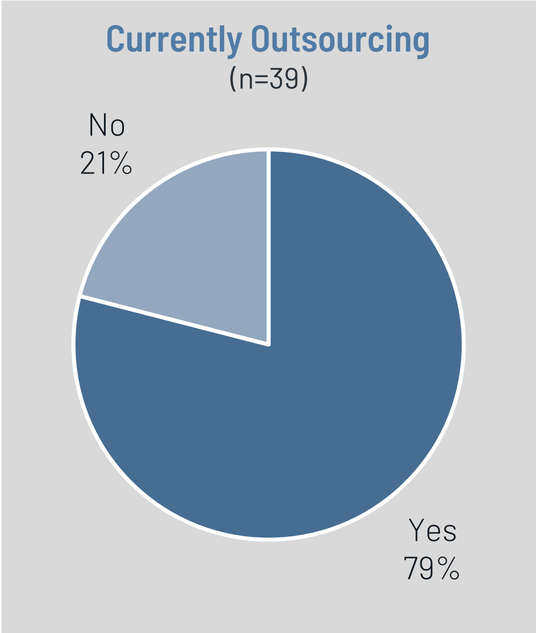




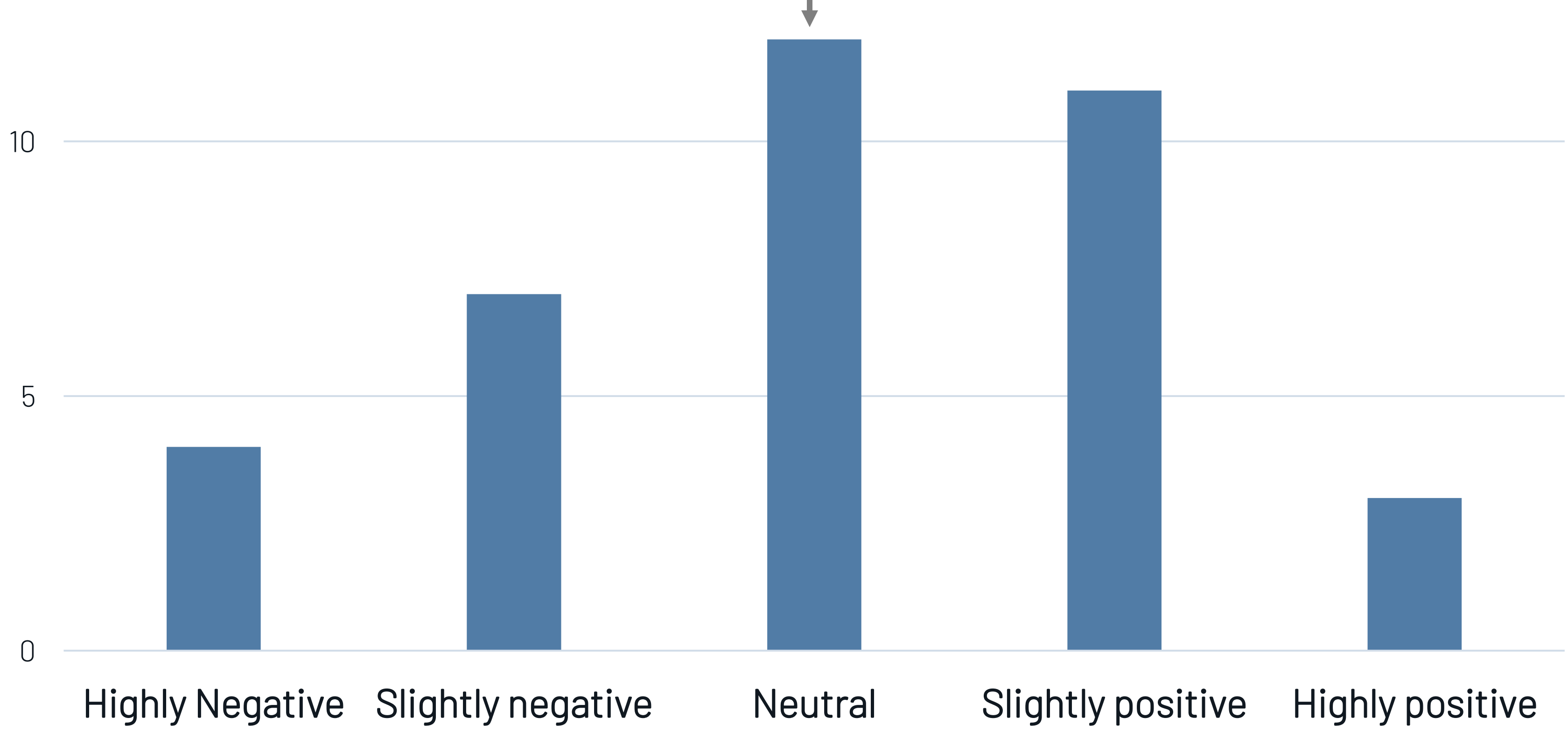
“With some parts of the revenue cycle, ***you can buy better and cheaper than you can build*** *them.”*

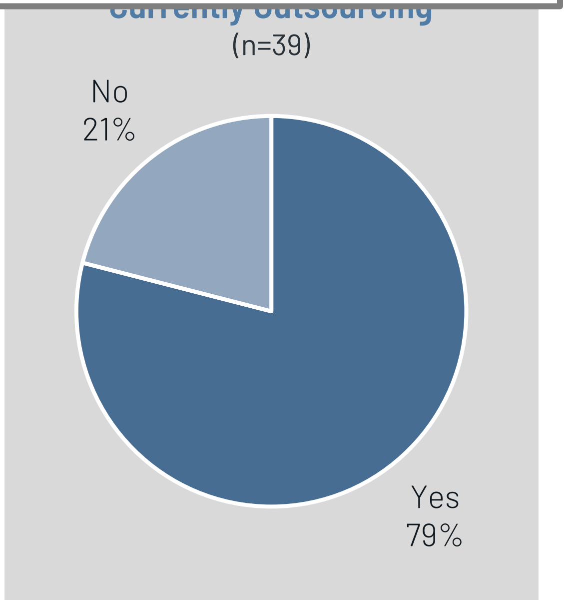
I have had positive experiences with outsourcing; in each instance, ***we experienced increased collections while holding cost to collect steady.***





I wouldn't necessarily be totally opposed to using a third-party, but a lot of that would have to do with the visibility. ***I'd need to see the control I have over it.*** *I'm not necessarily a fan of full outsourcing, where the firm takes the work and just communicates about it with someone.* ***I feel like we lose visibility that way. I feel like you lose a little bit of control of what's going on within your revenue cycle. You're relying on somebody else to do it right or do it the way that your facility does.***





True Success Goes Beyond Just Completing the Work

I'm not married to outsourced or insourced. I am more married to whomever is going to ***be thoughtful, to question the norm, to do analysis, to provide true analytics so that you can drive improvements.***

At the end of the day, I know not everything is going to get paid, but ***I really need the work that is happening to help me improve on the front end. It's about taking the data and making it into actionable information…*** *Regardless of who the outsourcing firm is,* ***they all need to be able to provide the analytics and true suggestions on how to improve.***

Chief Revenue Cycle Officer (neutral)

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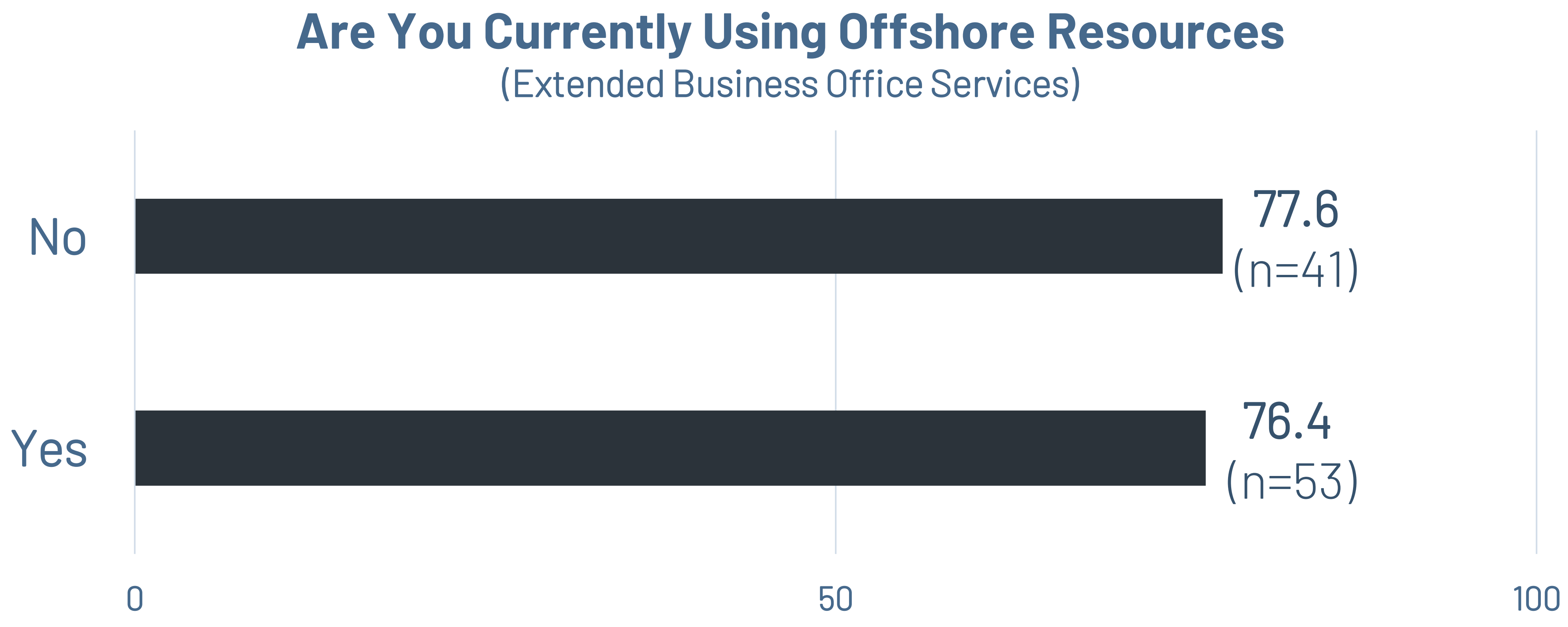
Some Key Questions to Ask an Outsourcing Firm...

- What degree of control will I have over my revenue cycle?
- How do you utilize analytics to identify opportunities to improve my revenue cycle?
- How does your reporting provide insight into the metrics that are most important to me?
- How will you engage with me to provide guidance and feedback?
- What guidance can you provide around change management needed with the parts of revenue cycle being outsourced?

Be transparent around the outcomes you expect—not only tangible outcomes (e.g. accuracy, cash, AR days) but also intangible outcomes (feedback, guidance, expertise, optimization).

What about outsourcing to offshore/global resources?

Overall Score Comparison of Those *Utilizing* vs. *Not Utilizing* Offshore Resources



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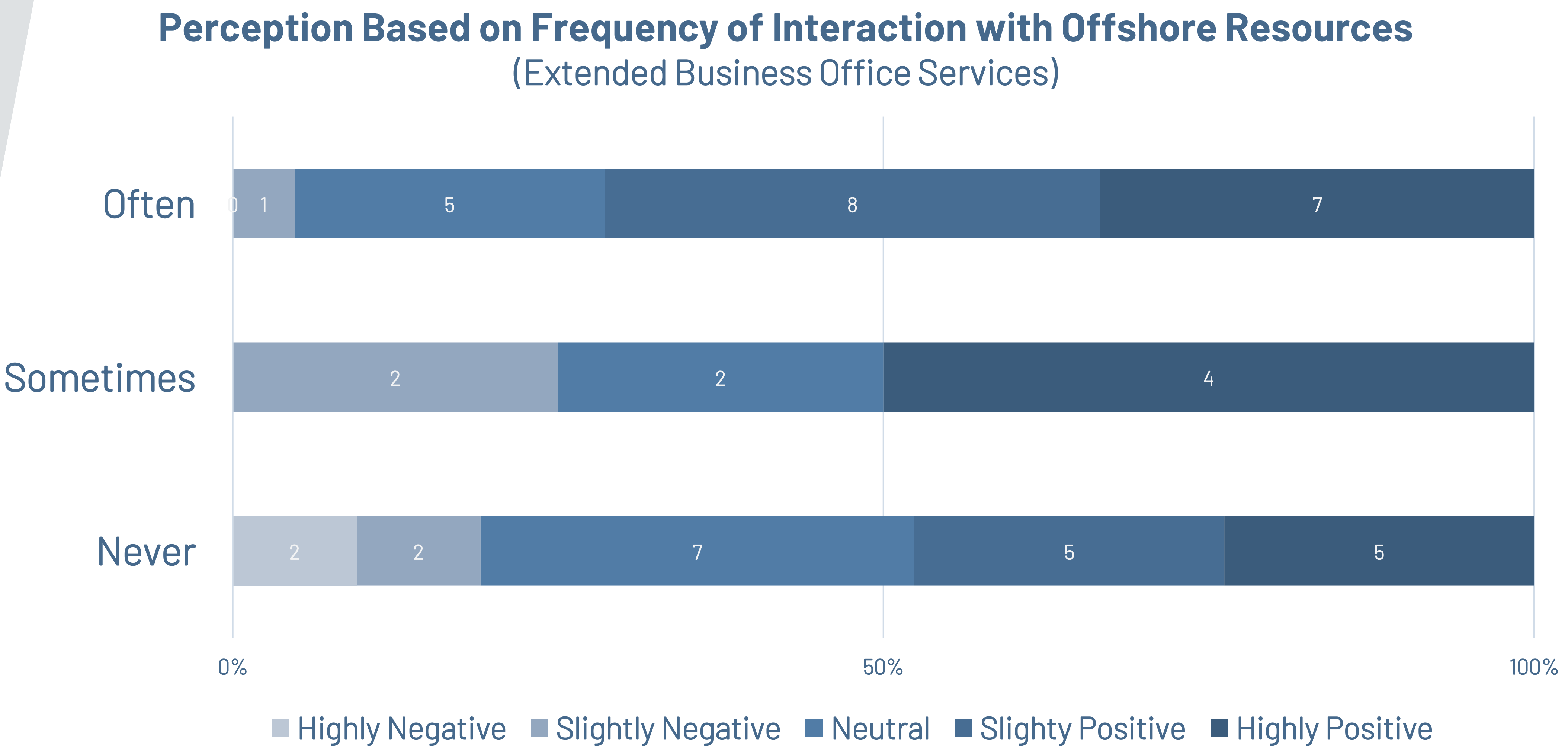
What about interacting directly with offshore resources?



Success with Offshore Resources Largely Depends on How Well a Firm...

- Carefully **manages client expectations** around the knowledge and ability of the resources
- Proactively **monitors the quality of work**, and engages quickly when key metrics slip or there's an issue with a resource (not waiting for the client to complain)
- **Fosters partnership** through transparency and responsiveness
- **Trains staff to handle complexities** and think outside of rigid processes ("outside the box")
- **Anticipates and limits turnover**, onboarding quickly with limited impact on the relationship and the work being performed

Areas Where KLAS Measures RCM Services and Outsourcing

- Ambulatory RCM (both EHR-associated and EHR-agnostic)
- Complex Claims
- Debt Collection
- Denials Management
- Eligibility and Enrollment
- End-to-end Revenue Cycle Outsourcing
- Extended Business Office
- Government Reimbursement
- Outsourced Coding
- Patient Financing
- Physician Advisory
- Transcription
- Underpayment Recovery
- Virtual Scribing

Revenue Cycle Summation

- AI has great promise - *IF* – Governance and deployments are thoughtful and applied in appropriate high value areas
- Automation in Denials and Documentation can result in efficiency gains
- Outsourcing offers benefits when used in balance with other resources