

# Unlocking Potential: Tackling Workforce Hurdles with Tech-Forward Revenue Cycle Solutions

Perspectives from Leading Health Systems



October 2024

# Report overview and profile of participating health systems

# 30 participating health system leaders represent voices in healthcare

The Health Management Academy (THMA) in partnership with **R1** set out to understand what challenges Leading Health Systems (LHS) face within revenue cycle management and how they make strategic decisions to invest in technology to alleviate workforce burdens. LHS are defined as innovative integrated delivery systems with over \$1 billion in net patient revenue.

This research captures perspectives from 30 survey respondents, representing a significant share of the Leading Health System market. Additional details on the research methodology and participating health systems are included here.

#### **Research Methodology in Brief**



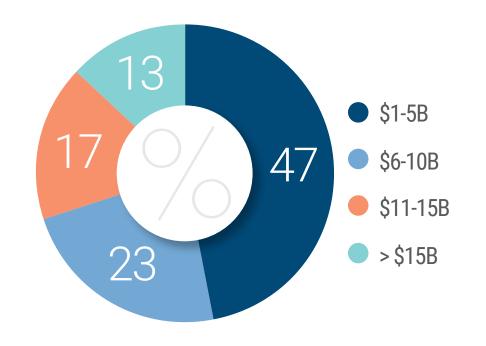
Surveyed 30 senior leaders from Leading Health Systems, representing 28 unique organizations<sup>1</sup>



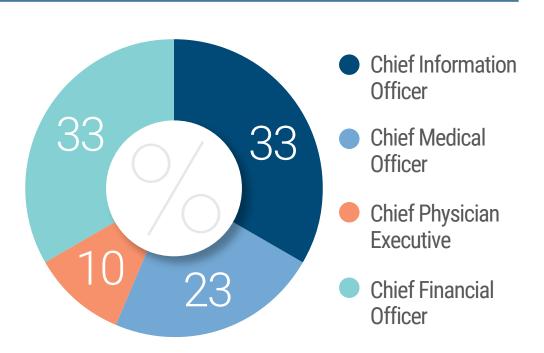
Collected secondary data, completed an applied literature review

- 1. Quantitative survey; n=30 Leading Health System leaders, with 28 distinct and unique organizations represented (two repeat organizations were surveyed).
- 2. Figures exceed 100% since participants could select more than one option.

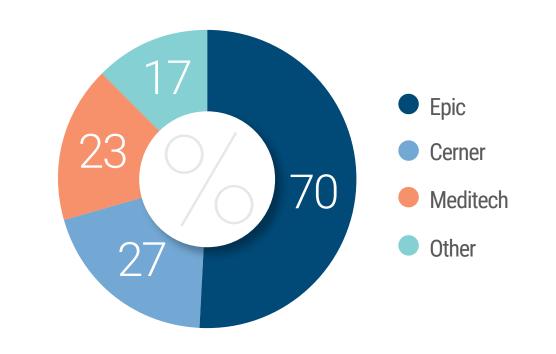
#### **Health system size (NPR)**



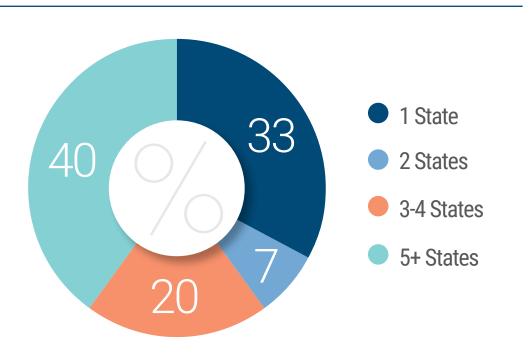
#### **Participants by CXO title**



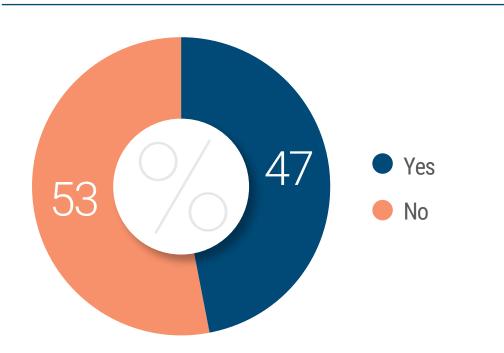
#### Participants by EHR partner <sup>2</sup>



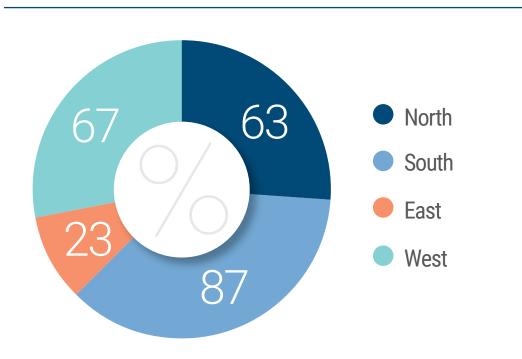
**Health System Size (State Coverage)** 



#### **Academic Medical Center Status**



#### **Health System Location <sup>2</sup>**



### Executive summary



#### CXOs acknowledge the strain of revenue cycle-related duties on their workforce.

Complicated payer relationships, combined with rising staffing and technology costs, are tightening margins for health systems. While certain financial metrics are improving, margins are not likely to reach pre-pandemic levels in the foreseeable future. These challenges create significant strain on both workforce and operational efficiency, particularly in revenue cycle management.



#### CXOs agree that denial and preauthorization challenges from payers continue to plague their revenue cycles.

One commonality felt by all CXOs across clinical, tech, and finance roles surrounded payer relationships, as this rose to the top as the largest revenue cycle challenge area and the most urgent challenge to solve. The strain from these payer relationships is directly linked to administrative burden and workforce pressures.



#### CXOs prioritize addressing administrative burden to tackle payer issues and labor constraints.

Administrative tasks, often tied to payer requirements (e.g., coding, preauthorization), add significant workload, regardless of functional area (clinical, tech, or finance). With 57% of CXOs ranking administrative burden among their top three concerns and 23% placing it as their top priority, resolving these challenges is critical. Labor shortages across IT, revenue cycle, and clinical teams exacerbate administrative challenges, and CXOs anticipate this challenge to persist.



# CXOs prioritize investments in automation / AI solutions for revenue capture and workflow efficiency, guided by complexity, priority, and willingness to partner.

Investment in automation / Al for revenue cycle management is primarily driven by the goals of maximizing revenue capture, with 33% of all CXOs ranking this as their top priority, and improving workflows and efficiencies, with 23% of CXOs selecting as top priority. Despite alignment on prioritization, sequencing of investment in technology solutions varies based on perceived complexity and the health system's willingness to build, buy, or look externally.



#### Unfulfilled potential of automation / Al continues, as adoption lags the widespread interest for revenue cycle management.

There is growing confidence in the ability of automation / AI to alleviate burdens in revenue cycle management, especially in mid-cycle and front-end areas. However, adoption remains slow due to concerns over costs, integration, and unclear effectiveness. While CXOs acknowledge the potential of automation / AI to reduce workforce burdens, only 8% report active use, and less than a quarter of all CXOs find these solutions effective.



# High costs, integration challenges, and varying awareness of effectiveness among CXOs highlight the need for clear success metrics and targeted investments.

CXOs are looking to external vendors for support, but there is hesitation to make capital allocations without clearer success metrics and alignment on an investment strategy. Moreover, over half of CXOs are concerned about the interoperability of new solutions with existing systems, highlighting the need for seamless integration to ensure successful implementation and minimize disruption to daily operations.

# Clinical, Tech, and Finance CXOs all Grapple with Revenue Cycle Challenges, Worsening Workforce Strain

Health systems face tighter margins driven by rising costs and complex payer relationships. While certain financial metrics are improving, margins are not likely to reach pre-pandemic levels in the foreseeable future. These financial challenges create a significant strain on both workforce and operational efficiency, particularly in revenue cycle management (RCM). This is in part due to the **complexities of RCM**, with reimbursement, coding and documentation requirements, payer relationships, and patient expectations evolving over time.

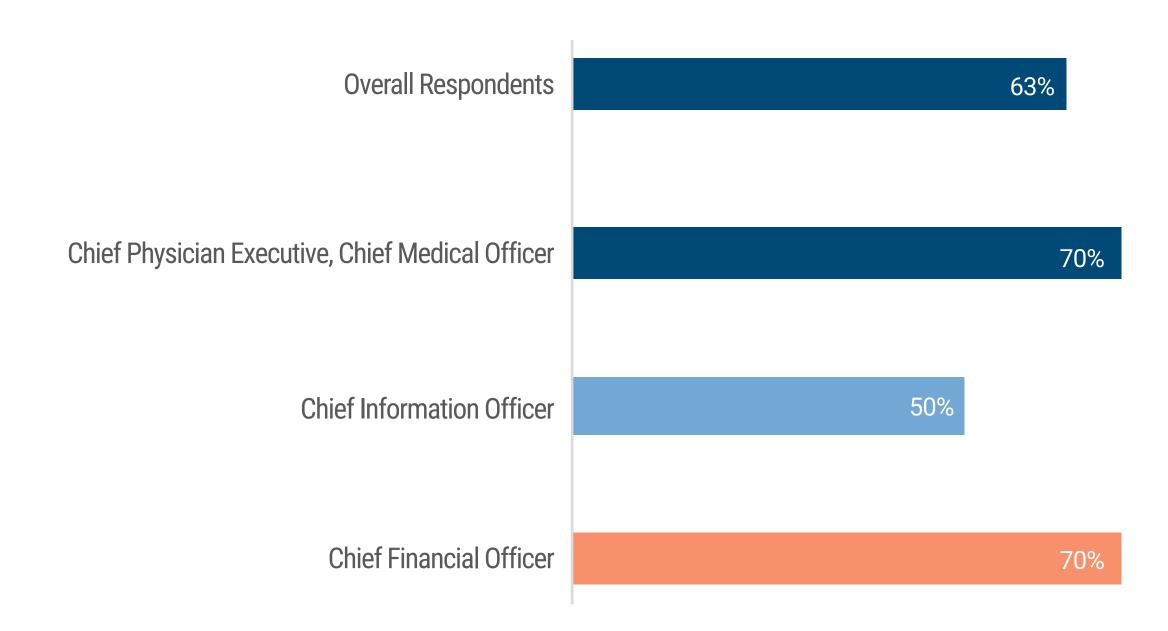
CXOs, across clinical, tech, and finance roles, all agree that revenue cycle struggles place a significant strain on their workforce, reducing productivity and efficiency. THMA's May 2024 survey of 30 CXOs at LHS uncovered that a **majority of clinical**, **tech, and finance CXOs sees revenue cycle as a significant challenge to their teams**, with over half of respondents in each group rating revenue cycle a 9 or 10 overall (with 10 being the biggest challenge).

Over the past few years, **LHS have started deploying AI technology to solve various pain points,** such as denials management and patient flow optimization, in hopes of benefits such as workflow improvements, reduced workforce constraints, increased revenue capture, and improved patient experience.

Deeper insight into how CXO's teams are impacted by various revenue cycle challenges, and how deployed tech solutions can alleviate or exacerbate these challenges, is a critical first step toward improvement.

#### "To What Extent Do Revenue Cycle Areas Represent a Challenge for Your Team's Workforce?" 1





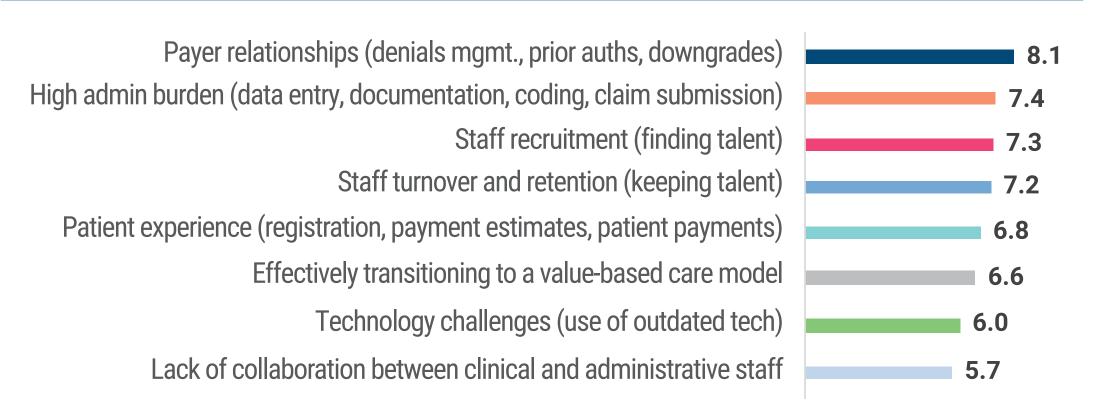
<sup>1.</sup> Respondents were asked "To what extent do the following areas of revenue cycle represent a challenge for your team's workforce? On a scale of 1-10, with 10 being the biggest challenge area. Respondents could choose N/A if the response option did not apply to them. Percentage of response options 9-10 are shown in the graph as an overall comparison.

# Challenges Are Driven by Payer Relationships, Which CXOs Overwhelmingly View as Top Priority to Solve

Payer relationships, which include denials management, prior authorization, and downgrades, were overwhelmingly recognized as the top challenge and priority in revenue cycle by CXOs. 77% of CXOs identified payer relationships as one of their top three priorities to address to relieve their teams' workforce constraints, and 33% ranked it as their number one priority to address. This highlights the increasing tension between providers' ability to adapt to changing payer policies and the pressures these processes create.

"To What Extent Do the Following Areas of Revenue Cycle Represent a Challenge for Your Team's Workforce?" 1

Summary of Overall CXO Respondents Scale of 1-10, with 10 being biggest challenge

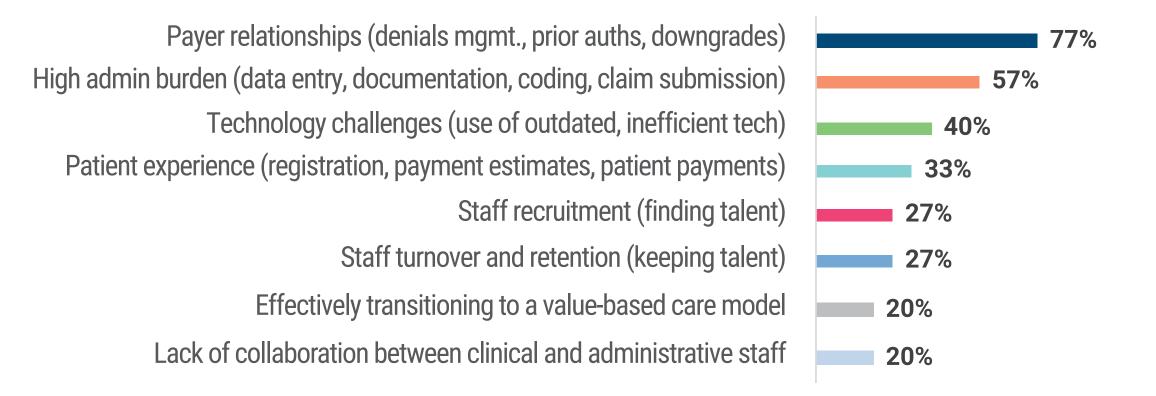


"Payer relationships are especially challenging as contracted rates shrink and our operating margin for hiring and retention is dependent on compensation from contracted payers."

- Chief Information Officer, LHS (May 2024)

# "Which Areas are of the Highest Priority to Solve in Hopes of Reducing Your Team's Workforce Constraints and Challenges?" <sup>2</sup>

Summary of Overall CXO Respondents
Respondents force ranked top 3; Percent of respondents that selected each option in their top 3 is shown



- 1. Respondents could choose N/A if the response option did not apply to them. Average rating out of 10 is shown in graph.
- 2. Respondents were asked "Which areas are of the highest priority to solve in hopes of reducing your team's workforce constraints and challenges?" and were required to force rank their top three.

# Addressing Denials is Critical to Improving Payer Relationships

Denials management has proven to be a significant challenge and area of concern among LHS CXOs. Previous THMA research found that **23% of revenue cycle leaders spend at least half their time on denials management,** and this topic rose as an area of concern in qualitative comments throughout the May 2024 survey. This is in part driven by automated denials and changing preauthorization requirements, which forced LHS to deploy significant resources to preventing, appealing, and overturning denials.

Improving payer relationships is a key priority for CXOs, as doing so is critical for freeing up resources and reducing workforce burdens. However, the complexity of these relationships continues to impose significant administrative burdens, diverting resources and reducing overall productivity.

"The greatest challenge we face right now is the increased activity of denials and other unfavorable behavior related to our payers."

- Chief Information Officer, LHS (May 2024)

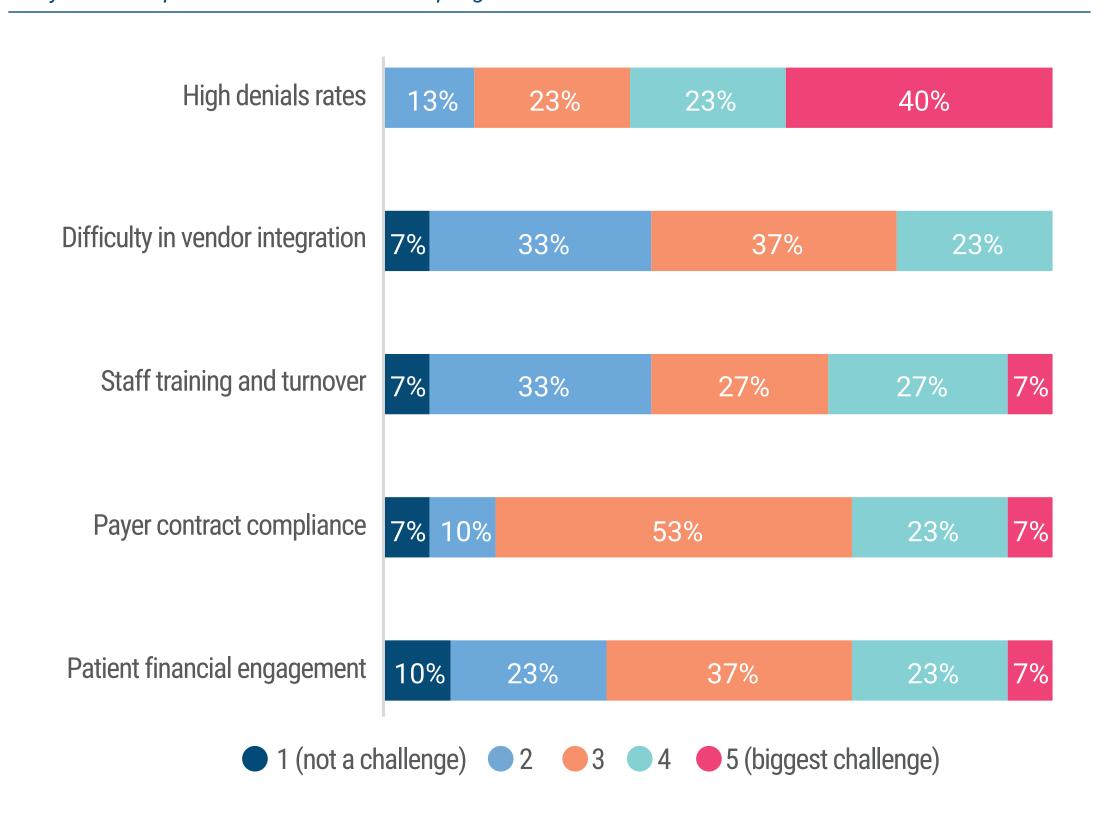
"We need to invest in technology and skills to better address the numerous denials that come from payers."

-Chief Information Officer, LHS (May 2024)

#### Top Back-End Revenue Cycle Management Challenges for LHS <sup>1</sup>

Percent of Executives Selecting Response <sup>2</sup>

Analysis is from previous THMA research in Spring 2024



<sup>1. 1</sup> Percent of executives selecting response for "To what extent has your LHS faced the following challenges with back-end revenue cycle management?" N=30 Leading Health System RCM executives.

<sup>\*</sup> Previous THMA research in Spring 2024 is discussed on this slide.

# High Administrative Burden is Closely Tied to Challenges Posed by Payers

All CXO titles surveyed listed high administrative burden as a key priority to address as part of reducing workforce constraints and challenges. 57% of CXOs rank administrative burden among their top three concerns and 23% of surveyed CXOs voted high administrative burden as their 1st priority, showcasing its critical nature.

The high administrative burden faced by health systems is **not only driven by manual processes, such as data entry and coding, but is also closely linked to payer-related issues like denials and preauthorizations.** For example, coding becomes more burdensome when trying to avoid denials, and preauthorization processes are largely dictated by payer requirements, adding to the administrative load.

#### Highest Priority Revenue Cycle Challenges for CXO Respondents 1

Respondents were asked to force rank top 3
Percent of respondent group that selected each response shown in parentheses

CIO	CMO/CPE	CFO
1. Payer relationships (80%)	1. High admin burden (70%)	1. Payer relationships (90%)
2. High admin burden (50%)	2. Payer relationships (60%)	2. Tech challenges (70%)
3. Patient experience (50%)	3. Staff retention & turnover (40%)	3. High admin burden (50%)

#### **Administrative Burden Impedes Efficiency and Agility at LHS**

"Larger health systems lack agility to implement new processes. This is seen to a greater extent in certain departments due to administrative burden."

- Chief Medical Officer, LHS (May 2024)

"Inefficient revenue cycle process and technology make it expensive to code, bill, and collect."

- Chief Financial Officer, LHS (May 2024)

"The IT team's burdens stem from the need for additional resources to manage multiple projects. For the physician and revenue cycle executives, the lack of data makes it difficult to make decisions that move the needle."

- Chief Information Officer, LHS (May 2024)

<sup>1.</sup> Respondents were asked "Which areas are of the highest priority to solve in hopes of reducing your team's workforce constraints and challenges?" and were required to force rank their top three. Top three response options by respondent group is shown.

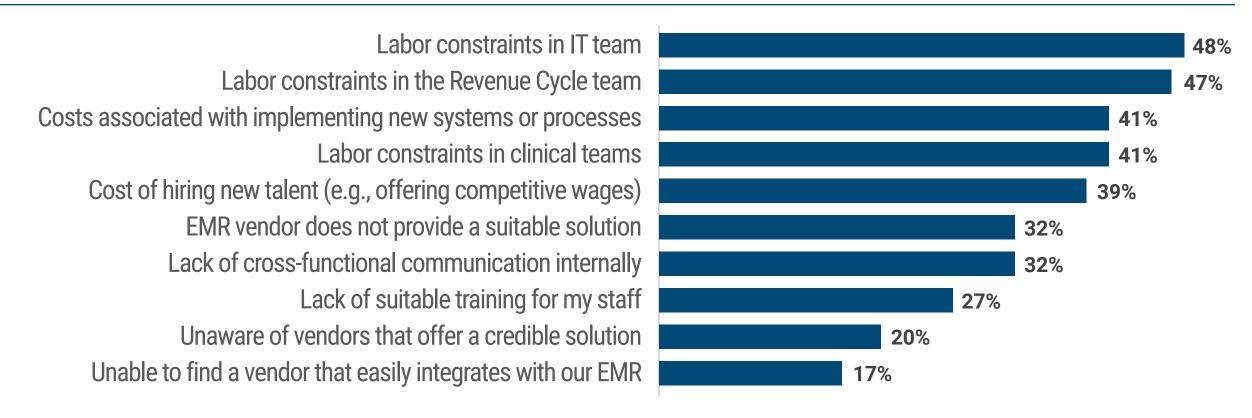
### Labor Constraints Exacerbate Administrative Burdens

CXOs widely acknowledged labor constraints across IT, revenue cycle, and clinical teams. **Nearly half of CXO respondents said that labor constraints in the revenue cycle and IT teams were the primary reasons solving revenue cycle challenges are so difficult,** with labor constraints in clinical teams not far behind.

Labor constraints are unsurprisingly not a newly identified challenge: a 2023 THMA survey showed that **only 44% of executives expected to have enough staff to effectively run revenue cycle in the next five years.** CXOs recognize that current staffing models constrain the ability to solve revenue cycle issues, particularly in IT. With labor as the first and second challenges recognized across all constituents, CXO personas have begun exploring the potential for tech solutions to address these issues.

#### "Why are Your Top Selected Revenue Cycle Challenges Difficult to Solve?" 1

Summary of Overall CXO Respondents
Respondents were asked to select all that apply



# Top Difficulties in Solving Revenue Cycle Challenges for CXO Respondents

#### Respondents were asked to force rank top 3

Most common reasons for difficulty shown below in order of most frequently mentioned, by CXO title



#### **Chief Financial Officer (N=10)**

- 1. Labor constraints in IT team
- 2. Labor constraints in the Revenue Cycle team
- 3. Cost of hiring new talent



#### **Chief Information Officer (N=10)**

- 1. Labor constraints in the Revenue Cycle team
- 2. Labor constraints in IT team
- 3. Costs associated with implementing new systems or processes



#### **Chief Physician Executive / Medical Officer (N=10)**

- 1. Labor constraints in clinical teams
- 2. Labor constraints in IT team
- 3. Costs associated with implementing new systems or processes

<sup>1.</sup> Respondents were asked "Why are the following challenges difficult to solve? Select all that apply." The top 3 responses from the previous question (Which areas are of the highest priority to solve?") were piped in for respondents. The above graph shows the most common responses for reasons for difficulty, regardless of the eight priority areas surveyed.

<sup>\*</sup> Previous THMA 2023 research is discussed on the slide.

# Increased Admin Efficiency and Revenue Capture Top Considerations as CXOs Investigate Automation and Al Solutions

Many CXOs see the potential for automation / AI to address revenue cycle challenges that current staffing models cannot solve. **CXOs, particularly CFOs and Physician CXOs, prioritize tech investments that maximize revenue capture and improve workflows and efficiencies.** 

33% of CXO respondents placed revenue capture as a top investment priority. This aligns with previous THMA research, where 80% of LHS currently using RPA / AI reported improving financial performance as their primary reason for investing.

The second most common response for AI investment was improvement of workflows and efficiencies (23% of CXOs). Interestingly, only 13% selected "address workforce shortages." However, 2023 THMA research found that 16% of health systems currently use or implement automation across all workflows, with a greater percentage (64%) viewing workflows as a mid or high priority for automation in revenue cycle. This demonstrates consistency among LHS goals to improve revenue capture and workflows via automation / AI tech investments.

"With 55-60% of costs tied to labor, you need to look at automation and outsourcing, there's no getting around it."

- Chief Financial Officer, LHS (June 2021)

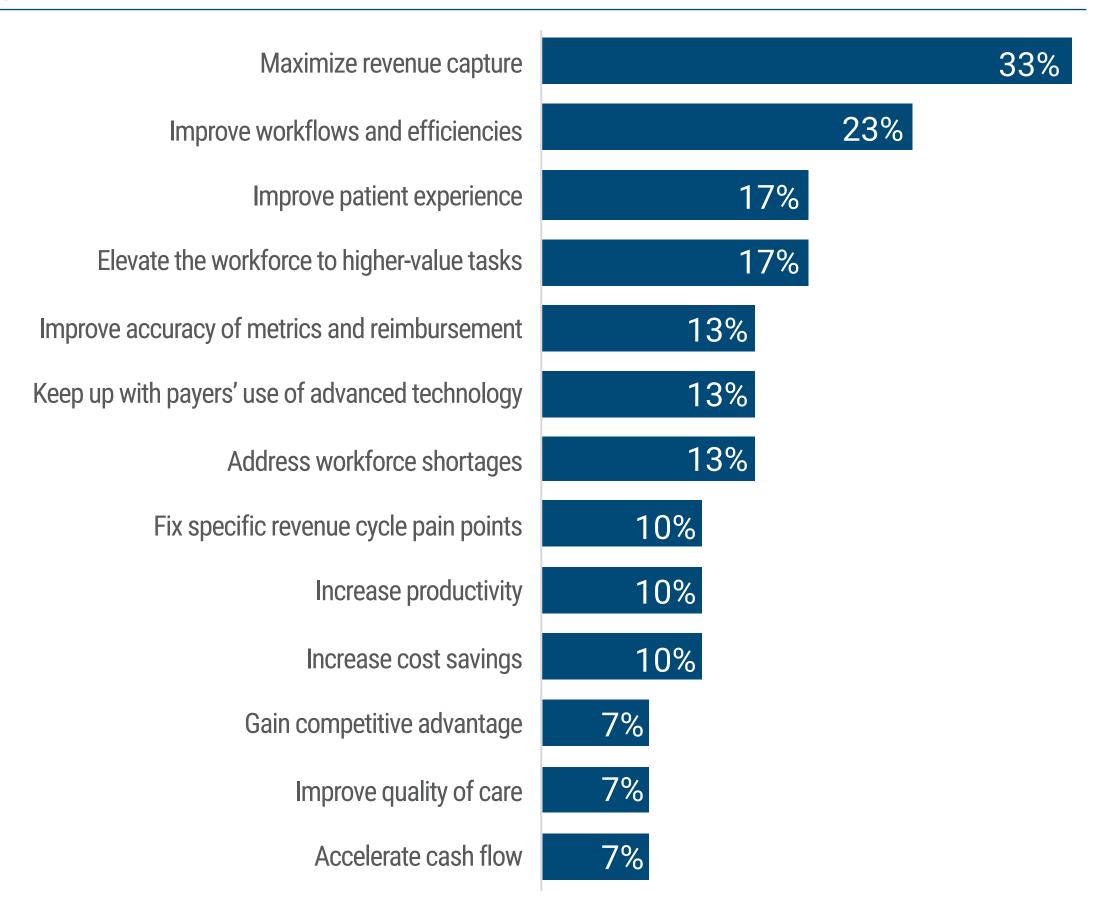
"Revenue Cycle needs to be focused on using AI and ML (machine learning) to streamline processes and free people from the workload so they can be used in a more customer facing role."

- Chief Financial Officer, LHS (May 2024)

#### Reason for Investment in Automation / AI Technology for Revenue Cycle <sup>1</sup>

Summary of Overall CXO Respondents

Respondents were asked to force rank top 3; data shown is percent of respondents choosing each response as one of their top three choices



<sup>1.</sup> Respondents were asked "Why is your organization investing in automation / Al technology for revenue cycle?" and were forced to rank their top three reasons.

<sup>\*</sup> Previous THMA 2023 research is discussed on the slide.

# CXOs Consider Priority, Complexity, and Partnership Potential When Evaluating Revenue Cycle Automation Investments

The sequencing of these investments in automation efforts across the revenue cycle is based on top health system opportunities, perceived complexity, and willingness to partner. While no single factor determined how a health system will sequence revenue cycle automation efforts, two key trends driving their decision-making include:

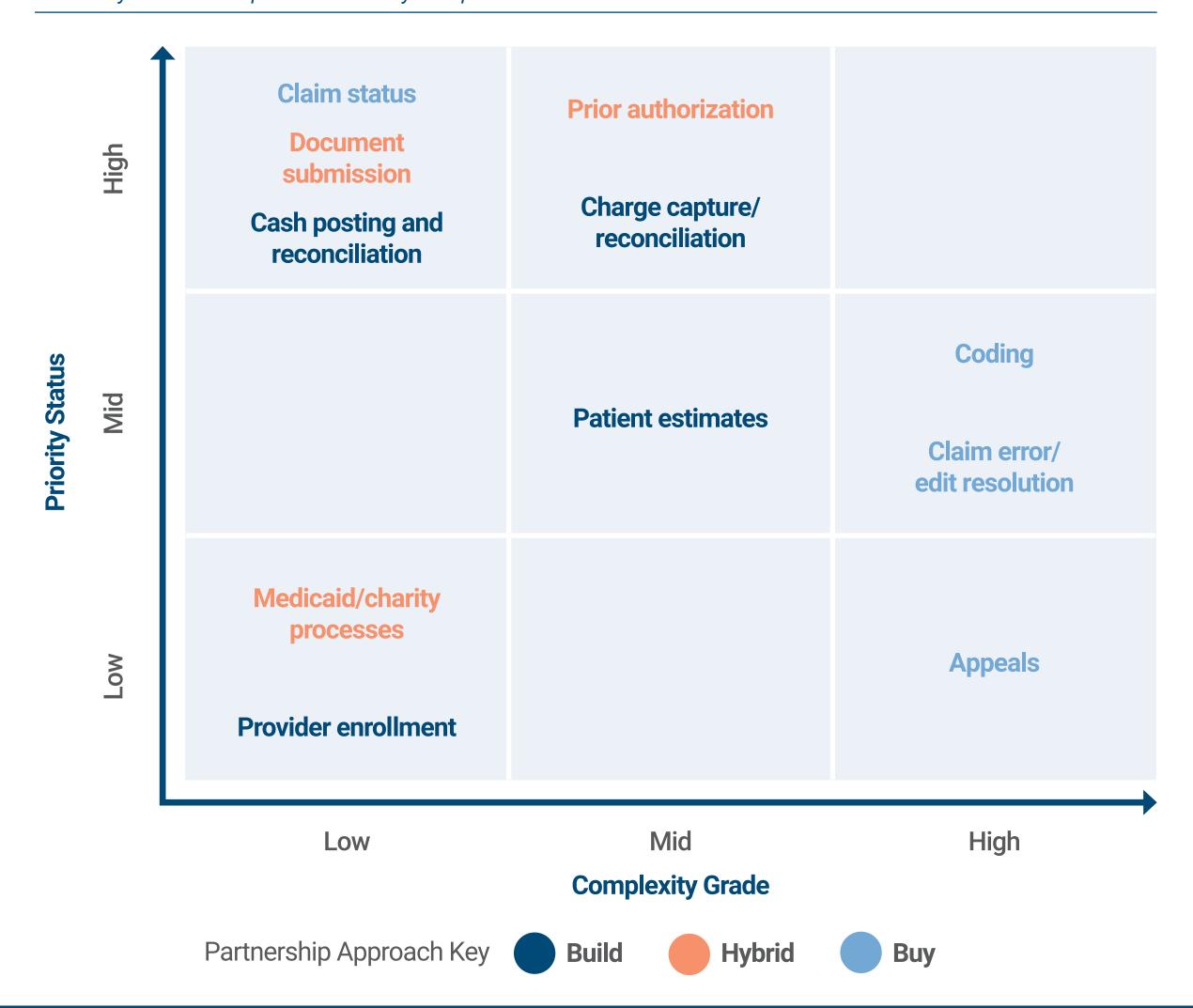
- 1. Financial and workforce-related challenges shape how health systems prioritize which functions to automate. Broadly, workflows that help revenue generation and staff productivity are the most likely to be prioritized for automation.
- 2. The complexity of a workflow influences the decision to build, buy, or partner. Health systems first look to expand their internal capabilities before looking externally for a solution when automating key functions.

Traditionally, a health system's revenue cycle was managed through a combination of internally built technology, their electronic health record system, people processes, and an external partner. While this still applies, many revenue cycle leaders are increasingly looking to external vendors for support with higher complexity priorities. Most health systems (93%) now rely on at least one strategic partner who supports the integration of people, processes, and technology to streamline RCM.

Previous research found that **49% of leaders noted a lack of a cohesive automation strategy as their top concern with moving forward on implementing automation**, despite high prioritization of RCM automation. This alignment on the promise of these solutions has not yet translated to adoption.

#### **Complexity Grade vs. Priority Status of Revenue Cycle Workflows**

Data analysis based on quantitative survey and qualitative interviews



<sup>\*</sup> Previous THMA 2023 research is discussed on the slide.

### Automation and Al Adoption Remains Slow as CXOs Hesitate With These Solutions

Adoption of automation / Al solutions has not caught up with the pace of increased interest. Current adoption rates across the revenue cycle remain modest at best, with only a handful of LHS actively using automation / Al anywhere in the revenue cycle. Among LHS surveyed, just 3% reported currently using it in mid-cycle, 7% in back-end, and 13% in front-end.

Mid-cycle functions are viewed as the most promising revenue cycle area for automation / Al technology, as this area has seen the greatest uptake. However, only 40% of CXOs are either currently using or piloting technology in this space. Many of these pilots cover tasks such as coding support, improved documentation (e.g., ambient listening, clinical documentation integrity), and charge capture and reconciliation.

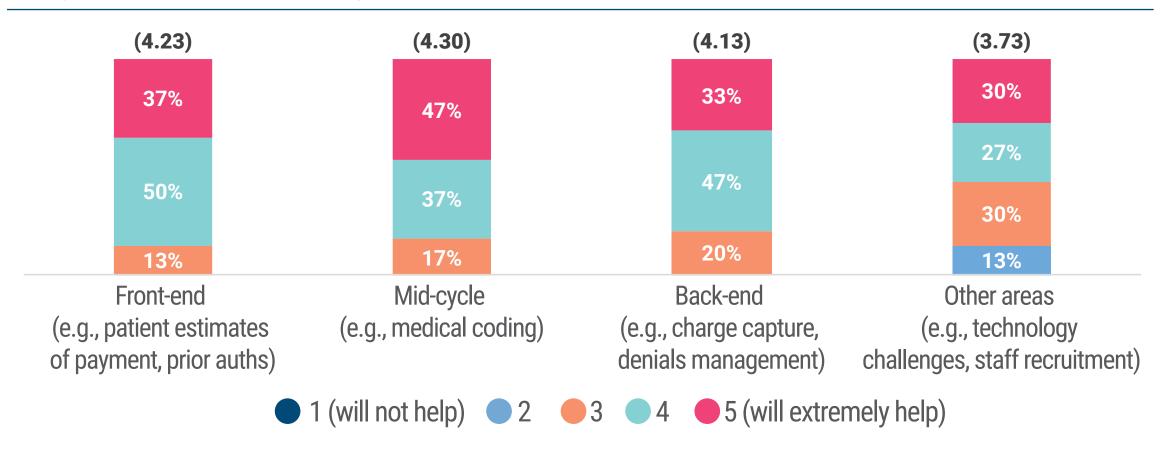
This is followed by front-end functions, with continued burden of price estimates and pre-authorizations making improvements in this area more appealing. The advantage of using tech in front-end revenue cycle processes is that it can fast-track areas like patient eligibility and QA and prior authorizations. This can ultimately prevent costly and complex work from having to take place in the back-end—optimizing the workforce to focus time on higher-value tasks.

While there is clearly interest in automation / AI for revenue cycle, many CXOs remain wary of making the investment in this technology to solve these key challenges.

### "To What Extent Do You Think That Automation / Al Technology Will Help Alleviate the Burden or Reduce Complexity For Your Team?" <sup>2</sup>

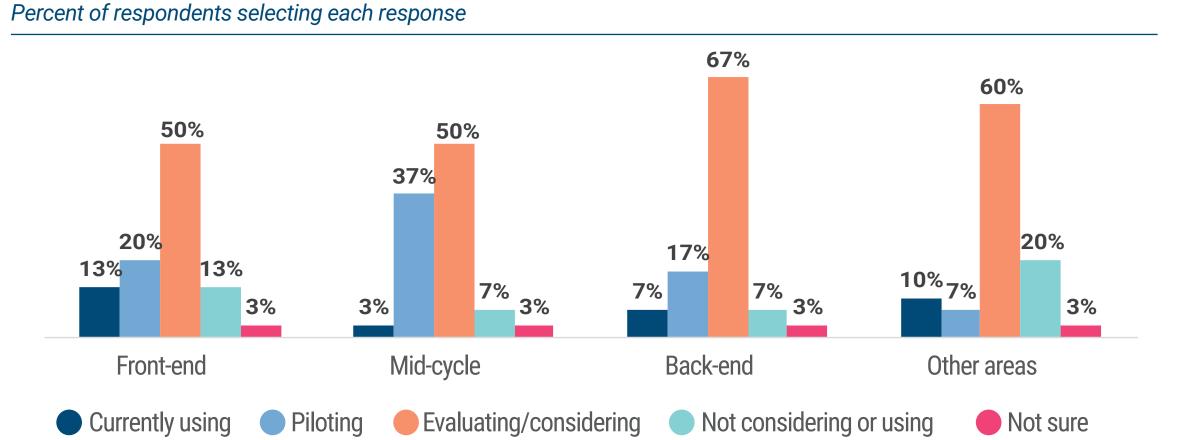
Summary of Overall CXO Respondents

Respondents were asked to rank each response option on a scale of 1-5, with 5 being the most helpful Average for each column is shown in parentheses



#### Current LHS Use of Automation / Al Tech to Address Revenue Cycle Areas 1

Summary of Overall CXO Respondents



<sup>1.</sup> Respondents were asked "To what extent is your health system currently using or considering automaton / Al technology to address the below areas?" The four areas included front-end, mid-cycle, and other areas related to revenue cycle.

<sup>2.</sup> Respondents were asked "To what extent do you think that automaton / Al technology will help alleviate the burden or reduce complexity for your team in each revenue cycle area?" on a scale of 1-5, with 5 as the most helpful. Response options included front-end, mid-cycle, back-end, and other areas. Percentages shown are percent of overall CXO respondents who answered each response option for each rev cycle area (e.g., percent of respondents who said "5" for front-end RC).

### CXOs Prioritize Seamless Integration and Cost in Al Adoption

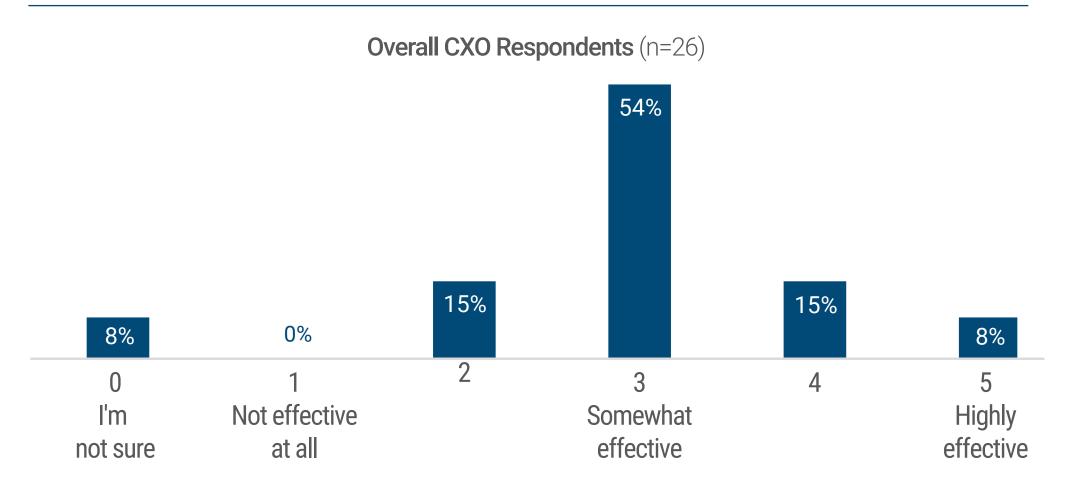
The main barriers to adopting AI and automation are high costs, integration challenges, and differing awareness levels of effectiveness across C-suite roles.

The vast majority of CXOs (87%) felt confident that they know the effectiveness of currently deployed automation / AI technology, and 54% of CXOs felt that this technology was only somewhat effective.

Over half (53%) of the CXOs are most concerned about how new vendor solutions will integrate with their current systems. The next highest-rated challenges (33% of CXOs) were costs of using a vendor solution, change management of internal teams, and having a clearly defined, long-term revenue cycle roadmap from the vendor.

While many CXOs at LHS believe in automation / Al's promise, there is **more work to** be done to prove how it will do so through clearer success metrics, cross-functional collaboration, and investment in high-impact areas.

#### **CXO Rating of Effectiveness of Deployed Automation / AI Technology** <sup>1</sup>

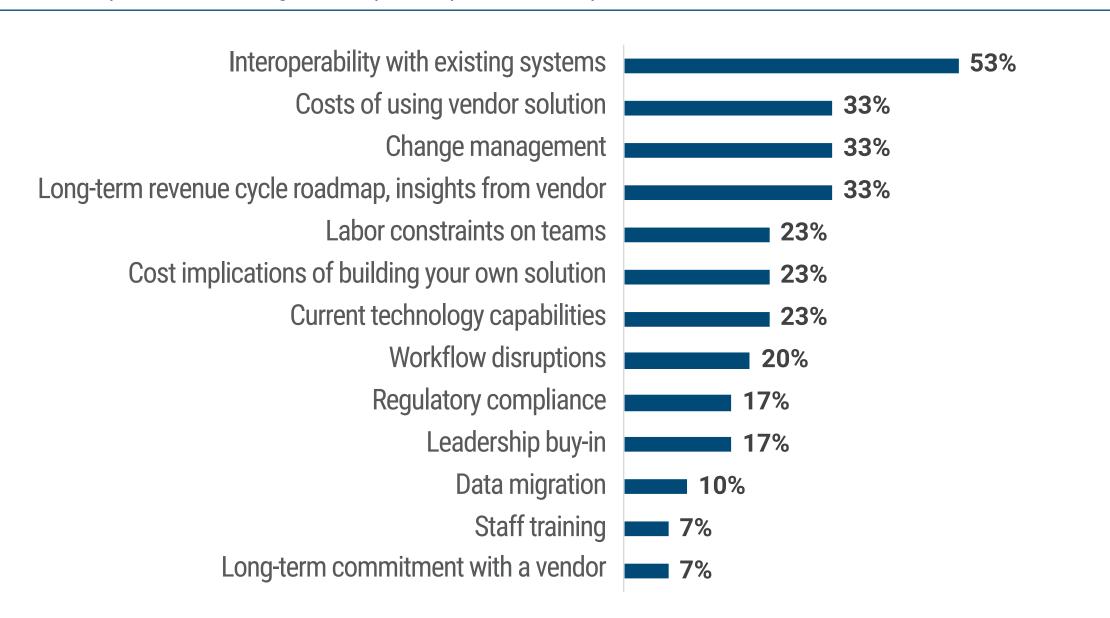


1. Respondents were asked "How would you evaluate the overall effectiveness of automation / AI technology for revenue cycle at your health system?" on a scale of 1-5 (with 5 as highly effective). Responses are shown as a summary of overall CXO respondents and by CXO title. This data represents the opinions of 26 CXOs who said they were aware of the effectiveness of the tech deployed in the previous question.

12 Respondents were asked "What are the key challenges for seamless adoption of automation / Al technology?" and were required to force rank their top three responses

#### **Key Challenges in Seamless Adoption of Automation / Al Technology for Revenue Cycle <sup>2</sup>**

Summary of Overall CXO Respondents
Respondents were forced to rank top 3
Percent of respondents selecting each response option in their top 3



#### Case Study: One LHS' Challenge with AI Documentation Tool Costs

One of the primary use cases for artificial intelligence in healthcare—particularly emerging capabilities in generative Al—is within the physician documentation space. The tools target a core area of focus for Leading Health Systems (LHS)—clinician burnout and efficiency—while representing a fairly low risk for patient safety and quality concerns. Despite the widespread interest in Al-powered documentation tools, the biggest barrier to their use is cost. One LHS highlighted this cost concern by noting that if it opted to give even a less expensive generative Al documentation tool to every clinician on staff—a number somewhere around 8,000 users—the cost would be "in the high 7 figures or low 8 figures" per year.

<sup>\*</sup> Previous THMA 2023 research is discussed on the slide.

Summary: CXOs Believe Advanced Tech Can Help Solve RCM Challenges But Need Clearer Strategy and Success Metrics

There is widespread CXO alignment, regardless of title, on the challenges posed by payer relationships and administrative burden. They understand that, if unaddressed, these factors could have significant financial, operational, and workforce effects on their health systems in the near-term.

Payer relationships are at the core of every health system's revenue cycle management, and with evolving payer behaviors and complex policies that are hard to keep up with, LHS must devote more capital and FTEs to mitigating these challenges. The high administrative burden created by payer relationship challenges demonstrates a greater need to evaluate, pilot, and deploy tech-driven support to reduce labor constraints and elevate individuals to higher-value tasks.

There is the opportunity to address these challenges through leveraging automation / Al effectively. CXOs show clear interest in evaluating significant investments to mitigate challenges but adoption drastically lags interest. Uptake has been slow, even for revenue cycle functions that have seen measurable improvements from automation / Al in the front-end and mid-cycle. To accelerate adoption to address these significant challenges, health systems and their CXOs should look to:

- Develop a cohesive automation / Al roadmap. Alignment on a strategic investment approach that
  evaluates investments against health system priorities, focusing on reducing burdens, improving
  revenue capture, and overcoming integration challenges.
- Set clear success metrics and collaborate cross-functionally. Clearly define measurable success metrics from the outset, ensuring cross-functional alignment on desired outcomes of automation.
- Secure CXO buy-in for a coordinated automation strategy. CXO buy-in on a coordinated approach to automation / AI investment and adoption is critical for solving these key revenue cycle challenges and mitigating financial strain. Additionally, it's important to engage downstream stakeholders, including clinicians, to ensure widespread support and successful adoption of automation and AI initiatives.
- **Leverage strategic partnerships.** Connecting with vendors is becoming increasingly essential where internal capabilities are insufficient. Focus on partners that demonstrate clear ROI and outcome changes related to handling denials, prior authorizations, and downgrades.

# Key Findings



#### **Top Revenue Cycle Priorities**

- 1. Payer Relationships
- 2. High Administrative Burden
- 3. Technology Challenges



#### **Top Difficulties in Solving Revenue Cycle Challenges**

- 1. Labor Constraints in the IT Team
- 2. Labor Constraints in the Revenue Cycle Team
- 3. Costs Associated with Implementing New Systems or Processes



# **Top Reason for Investment in Automation / AI for Revenue Cycle**

- 1. Maximize Revenue Capture
- 2. Improve Workflows and Efficiencies
- 3. Improve Patient Experience



# **Top Challenges for Seamless Integration of Automation / AI for Revenue Cycle**

- 1. Interoperability with Existing Systems
- 2. Cost of Using Vendor Solution
- 3. Change Management

### Research methodology and support

In May 2024, The Health Management Academy administered a quantitative survey to Leading Health System executives and regarding their perspective on revenue cycle challenges. Executives were asked to identify the extent to which certain revenue cycle areas impact their specific team's workforces, as well as their current and expected use of automation / AI technology to alleviate the respective workforce constraints. THMA analyzed the results to compare how various CXOs viewed revenue cycle challenges differently and their approaches to solving respective challenges.

The 30 quantitative survey responses represent 28 distinct health system organizations. Respondent roles included: Chief Financial Officer (10), Chief Physician Executive (3), Chief Medical Officer (7), and Chief Information Officer (10).

#### The Health Management Academy Project Team

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#### **About The Health Management Academy**

The Health Management Academy powers our community to drive health forward. Our community is made up of healthcare's most influential changemakers including executives from the top 150 U.S. health systems and the most innovative industry partners. We power our members by building our community and fostering connections through executive peer learning. We support professional growth through talent and development. We accelerate understanding by delivering timely and actionable data and insights on key challenges. And we catalyze transformation by building alliances in areas where the power of the collective is greater than the power of one.

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# We Power our Community to Drive Health Forward

### Who We Power

#### **Leading Health Systems**

The approximately 150 innovative integrated delivery systems with over \$2B in total operating revenue

#### **Regional Health Systems**

Health systems with less than \$2B and flagship hospitals with >\$100M in total operating revenue.

#### **Industry Partners**

Industry innovators, from early stage to Fortune 50 organizations, that are working alongside health systems to drive health forward

2,000+

LHS Executive Relationships

600+

LHS C-Suite Members 150+

Innovative Industry
Members



Convene exceptional peer groups that facilitate meaningful relationships and knowledge exchange



**Deliver custom services and market insights** supporting new partnership growth between industry and health systems



Produce original research leveraging member insights on healthcare's greatest challenges and opportunities



Create world-class leadership development programs designed to prepare next generation healthcare leaders



Facilitate novel partnerships to address critical industry issues that demand collective action