Pixel Health
Healthcare technology. Human perspective.

CHIME and Pixel Health convened a panel of executive-level digital health experts during the 2025 Innovation Summit held at the Baptist Health Innovation Center in Jacksonville, Florida. Alongside moderator **Keith Fraidenburg**, EVP, Chief Operating & Innovation Officer, CHIME, and Pixel Health's **Barbara Casey**, President of Strategy & Transformation, and **Jill McCormick**, EVP of Design and Product Thinking, the roundtable attendees included:

Karen Marhefka
Deputy CIO
RWJ Barnabas Health

Chris Paravate
SVP and CIO
Northeast Georgia Health System

Bernie Rice
SVP & CIO
Nemours Children's Health

Emily Warr
System Administrator
Center for Telehealth
Medical University of South Carolina

Jodi Frei
Director of Data Services
OneCare Vermont

Vincent Vitali
CIO
Borland Groover Clinic PA

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SUMMARY

The latest wave of digital tools, including those powered by artificial intelligence (AI), have promised a revolution in the way that patients-slash-consumers interact with the administrative side of the healthcare experience.

From smart chatbots that help navigate a maze of potential specialists to automated insurance verification to simple online scheduling processes without the traditional game of phone tag, patients have long been looking forward to how their healthcare partners will deploy innovative technologies to ensure access to necessary services in a timely manner.

Unfortunately, the rollout hasn't been as smooth and seamless as desired. While some organizations have successfully implemented a limited number of self-service options, many are still struggling to integrate next-generation technologies with deeply entrenched legacy systems – and legacy workflows – to offer a truly modernized experience.

At this transitional moment in the healthcare industry's evolution, when organizations are facing a stronger imperative to compete on the experiences surrounding the delivery of care, it's more important than ever for healthcare leaders to zero in on how to best bridge the divide between what technology can offer and what really happens when a patient begins their healthcare journey.

Together, these CHIME members discussed the complex landscape in front them, including the imperative to reduce fragmentation, overcome cultural barriers, and leverage digital tools more efficiently to shift to a fully patient-centric model that prioritizes seamless experiences and timely interactions with care teams.

FINDING A WAY THROUGH FRAGMENTATION AND CULTURAL MISALIGNMENT

Care access and the patient experience have been hot topics of conversation for several years now, but health systems are still struggling to fight the inertia of an industry fundamentally designed around business needs and clinician preferences, not patient satisfaction.

"The health system is often more physician-centric than patient-centric," noted Vince Vitali, Chief Information Office at Borland Groover Clinic, a gastroenterology practice in Florida. "That makes sense in some contexts, but not all of them. When it turns into physicians believing that they can set up hoops to jump through before they'll see certain patients, or that they 'own' patients in a way that creates barriers instead of fostering positive relationships, that becomes a problem."

If not managed carefully, this type of misalignment can slow down innovation and create barriers to staff engagement and adoption of new workflows and technology tools, cautioned Bernie Rice, SVP & CIO at Nemours Children's Health.

"We introduced the FastPass system, which allows waitlisted patients to quickly take advantage of cancellations or openings," he stated. "This resulted in significant improvements, reducing appointment wait times by up to 100 days in some cases. However, certain practices within the system were not utilizing it. The reason? There was some reluctance towards this new way of scheduling, and practices were permitted to opt out if they chose. This highlights the importance of a good change management process, working with operational leadership and cultural acceptance. For these automated tools to work effectively, we must standardize our procedures and emphasize these enhancements that are intended to improve the patient experience, not take away the autonomy of individual clinicians."

Leaders need to find a way to balance and blend competing priorities – and that starts by understanding the reasons why those conflicts exist in the first place, said Emily Warr, System Administrator, Center for Telehealth at the Medical University of South Carolina.

"It's challenging, because too much of the physician experience is out of their control due to administrative requirements, financial pressures, and other issues," she said. "Their schedule is one of the only things they feel like they can control, so implementing something like self-scheduling for patients might feel like a threat to the physician's autonomy. It's a misalignment in how we're viewing the interconnected pathways of the physician journey and the patient journey."

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>
> **Chris Paravate**
> SVP and CIO
> **Northeast Georgia Health System**

Chris Paravate, SVP and CIO at Northeast Georgia Health System, agreed that leaders need to collect feedback from all stakeholders to understand where and why resistance occurs, and how to overcome it in a way that assists with achieving shared goals around patient care.

"The biggest challenge for fixing cultural misalignment around patient access isn't the money or even the technology," he stressed. "It's overcoming the status quo and changing the operational business model inside of the house. It's about choreographing what the patient experience should look like, regardless of the channel. Right now, for example, the digital experience doesn't match the call center experience. There's no predictability or consistency. We need everyone to sit at the same table and rethink how we're interacting with the community before we can improve it."

APPLYING TECHNOLOGY TO CREATE A FULLY PATIENT-CENTRIC EXPERIENCE

"Patient access is a critical determinant of patient experience, health outcomes, and organizational success," Fraidenburg said, adding "It's a lot more complex than it might seem on the surface." He noted most health systems are turning to technology to speed up the process: "Patient access models are evolving very rapidly. AI is ushering in some of that transformation, but also some unprecedented opportunities."

A THOUGHT LEADERSHIP ROUNDTABLE
Championing Patient Access: Bridging the Gap Between
Digital Capabilities and Operational Realities

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Artificial intelligence (AI) has rapidly become a hugely popular tool for reshaping patient experience and finding new strategies for expanding access to important services.

For example, at RWJ Barnabas Health in New Jersey, Deputy Chief Information Officer Karen Marhefka has overseen several pilots of ambient listening technologies to support more efficient, more personalized interactions between providers and patients.

"Feedback from providers after our pilot programs has been extremely positive, because it allows them to have a conversation that doesn't sound cold and clinical," she said. "It's a huge change in the dynamic. We've even heard from our recruiters that prospective physician employees are asking if we have it, because they want it, too. As an organization, however, we need to be as inclusive as we can regarding the return on investment (ROI) opportunities and be mindful that it's much more than an opportunity to add additional patients to an already loaded panel, running the risk of burning up the benefits in a different way. But we're excited about its possibilities."

At Nemours Children's Health, Rice shared that agentic AI is helping to keep patients connected in innovative ways.

"We developed a chatbot to address school absenteeism in the Delaware area," he explained. "We're tightly integrated with school systems, enabling us to be alerted when a child begins to have attendance issues. The chatbot works with the parent or guardian to identify potential causes and offer assistance. There are so many opportunities for these purpose-built agents to enhance how patients interact with the health system, whether it is on the administrative side, the clinical side, or around the social determinants of health. The turnaround time can be quicker, and they increase our capacity to manage volume without overwhelming our human staff."

And at Borland Groover Clinic, Vitali is leveraging AI to automate the referral process.

"Most of our referrals are still faxed right now," he said. "We are piloting an RPA tool to look at the faxes, classify the documents, extract the data, and create a task in our EMR that our clinical team retrieves and acts on. We also want to close the loop with the primary care physician that referred the patient by sending them a notification that the patient was booked for a specialty appointment. We're also using AI agents to triage calls into the call center so that people are always connected to the right human in the right area based on their needs. That's been very promising so far."

BUILDING A BETTER DIGITAL FRONT DOOR

AI agents and ambient listening tools are certainly playing a role in transforming the patient access equation, but organizations also need to look at the basic pillars of their patient-facing infrastructure to make sure they're maximizing the value of existing assets, said the panelists.

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> President of Strategy & Transformation
> Pixel Health

"For too long, healthcare has lagged in leveraging data and strategic insights to create truly personalized and accessible experiences," said Barbara Casey, President of Strategy & Transformation at Pixel Health, who said out loud what many were thinking. "It's time we bring the same level of sophistication to understanding and serving patients that other industries like retail and consumer goods have long applied to their customers. The good news is that we now have the tools and the urgency to bridge that gap and ensure that patient access is as seamless and intuitive as any other modern consumer interaction."

It may be common to think such huge improvements require big swings, but smaller steps might be more realistic and can add up to big gains.

"We often start the transformation process by looking at the biggest, most expensive, hardest problems to solve. But sometimes, it's the everyday projects that actually have the biggest impact," said Marhefka. "Our website is a great example. Health system websites, in general, are not good. Our site had issues, and so do the sites of our closest competitors. But that's the digital front door for patients, and it needs to be easy to understand and intuitive to navigate. It's so easy to catch the bug with AI and all that fancy stuff, but sometimes it's the simple things that will really change the way patients interact with you."

Borland Groover is also giving their website a facelift and is also taking some time to invest more in social media channels that haven't been given adequate attention in recent years, Vitali acknowledged.

"Of course, we're planning to embed AI into the next iteration of our website to help with things like scheduling, education, and getting prep instructions," he added. "We're also integrating more measurement and analytics to understand how patients are using the site and what they want from it to guide our decision-making."

For Paravate, it's all about making sure that all digital roads go to the right place, every time. "That's the least that patients can expect from us," he said, "and it's the foundation of ensuring that services are accessible to everyone at every time, no matter what their health literacy level or digital savvy."

LOOKING TOWARD A FUTURE OF SEAMLESS, INTUITIVE ACCESS TO CARE

Pushing past existing barriers is possible, and leading health systems are already making changes that have the potential to radically alter the way patients and providers collaborate around care delivery.

"The hill I'll die on is that the quality of service we offer patients must match the quality of care we deliver," said Jill McCormick, EVP of Design and Product Thinking at Pixel Health. "That has to be our standard."

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The attendees agreed that strong governance will be crucial for accelerating these improvements, especially when it comes to the implementation of AI tools that may bring risks to privacy, security, and patient consent, as well as challenges around ethics, bias, and equity.

When asked what their ideal future state would look like, if they had a magic wand to wave, the panel had a variety of top priority items to share.

Jodi Frei, Director of Data Services at OneCare Vermont, an accountable care organization (ACO), said she wants to see same-day access for everyone who wants or needs it. "As ACO, that would be an incredible shift in our ability to deliver preventive care and better manage chronic conditions in the primary care setting," she said. "We want to ensure that patients feel empowered and cared for, and a lot of that entails reducing the friction of timely access. Timely treatment reduces the risks of non-compliance due to delays in putting the next steps into action, or even just the frustration with getting answers in a timely manner. Same-day access would have an outsized impact on keeping patients engaged."

For Vitali, it's the elimination of artificial barriers to access. "There are so many administrative and regulatory protocols that are directly contrary to the principles of a positive patient experience. Scheduling shouldn't be so hard. Period. So many times, it's not really a lack of capacity, it's just a lack of strong, clear, consistent processes that maximize the use of the time and resources we have. We urgently need to rethink those."

And for Warr, the real next step for the health system would be building detailed personas for patients to personalize care.

"My health system should know that I like virtual visits over in-person appointments, and I like them in the afternoon between 2 and 5 because that fits my schedule," she said. "As a health system, we should be able to tailor the healthcare journey based on those types of factors. But in order to get there, we really have to take a step back and make some wholesale, sustainable changes in the way we gather and leverage data – and just as importantly, in the way we view the patient experience from beginning to end."

Overall, health systems are committed to making care more accessible and patient-centered through a mix of operational and culture changes and technology initiatives. Close the gaps between the two will be critical for achieving a vision for a future in which patients can easily access the care they need, when and where they need it, through whatever channel best meets their preferences.

"Patient experience is such a strong predictor of clinical and financial success," concluded Frei. "Its importance simply cannot be overstated. We need to take a hard look at ourselves, as organizations, and how we think about the business of healthcare to better align our operations with the imperative to offer exceptional experiences and care. If we can do that, through technology and through internal improvements, we'll be able to really move the needle on our overarching goals."

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