INDUSTRY REALITIES

The Healthcare Industry Has Normalized Broken

7 operational realities facing ambulatory healthcare

nextgen HEALTHCARE



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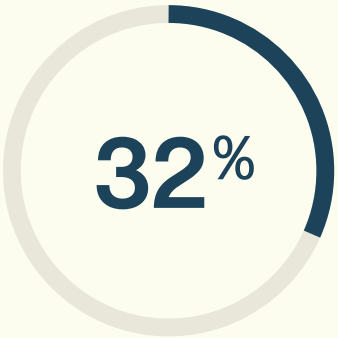
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What if *normal* was the problem all along?

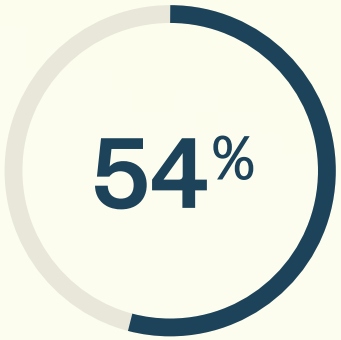
Healthcare leaders have become experts at adapting. But somewhere along the way temporary workarounds became status quo—permanent yet flawed operational models. With the market changing faster than ever, healthcare leaders are no longer asking whether AI belongs in healthcare, they're asking how quickly they can operationalize it and measure the return.

This brief guide will explore the seven operational realities ambulatory healthcare leaders have accepted—and why it's time to redefine what's normal.

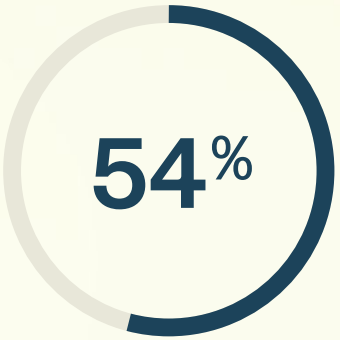
Did you know?



32% of physicians now prioritize AI over EHR usability when evaluating technology[1]



54% of all digital health investment is now captured by healthcare AI[2]



54% of healthcare organizations expect measurable AI ROI within 12 months[3]



2.3x average AI use cases per physician deployed every single day[4]

The problem isn't healthcare. The problem is what we've *expected as normal.*

REALITY 1

Provider Burnout Has Become Expected

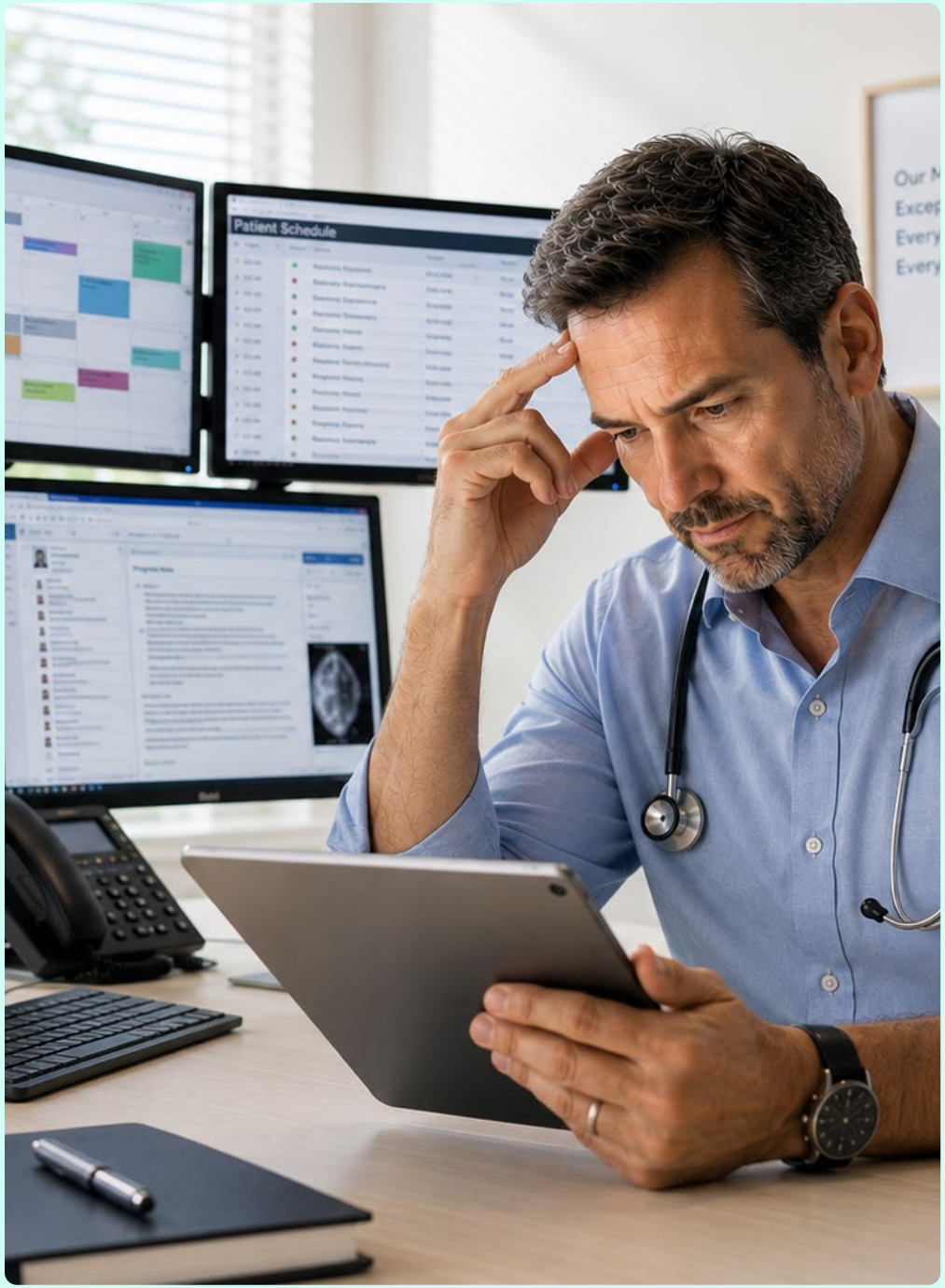
Healthcare has accepted after-hours documentation as the cost of delivering quality care. Providers routinely spend evenings finishing charts instead of time with family. Burnout has become expected.

What this costs

- Accelerated staff turnover
- Reduced provider productivity
- Diminished patient access
- Declining morale across teams
- If documentation disappeared tomorrow, how much more patient care could your providers deliver?

If documentation disappeared tomorrow, how much more patient care could your providers deliver?





REALITY 2

Too Many Systems Have Become the Norm

Modern practices often rely on a patchwork of platforms—scheduling, practice management, EHR, billing, RCM, patient engagement, analytics, and communication tools. Every additional system creates another handoff, another login, and another opportunity for failure.

The Complexity Tax

Each system demands training, maintenance, integration costs, and dedicated support—silently consuming resources that should serve patients.

The Compounding Effect

Disconnected systems mean disconnected data. Decisions get made without full context, and errors propagate across the entire care continuum.

The Core Truth

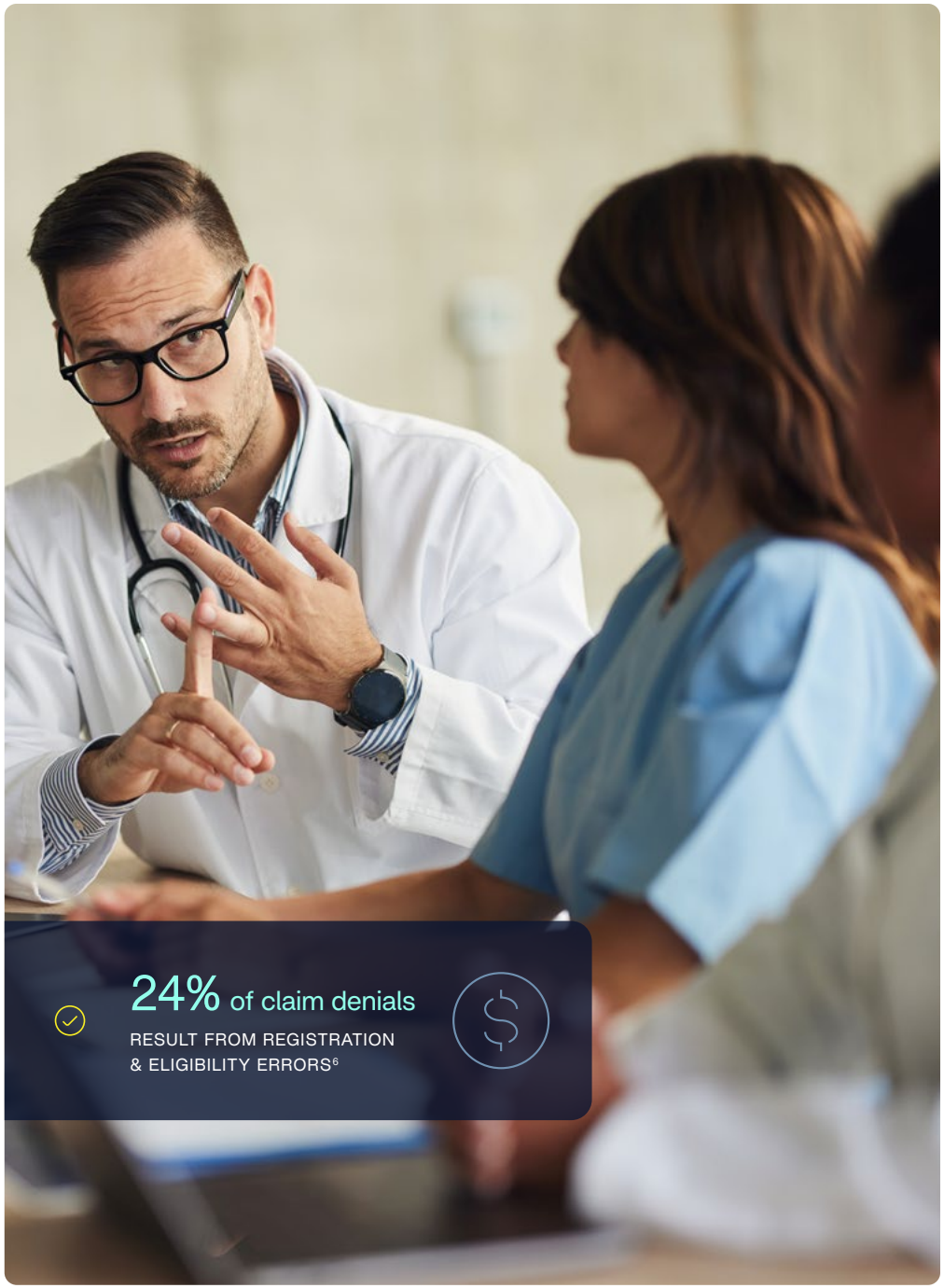
Better technology shouldn't require more technology. Reflection: How many systems does your team touch during a single patient visit?

REALITY 3

Revenue Leakage Is Accepted as Inevitable

Not every revenue problem announces itself. Small inefficiencies quietly compound—missed referrals, denied claims, scheduling gaps, coding errors, patient no-shows, and delayed reimbursement. Each seems manageable in isolation. Together, they become millions in lost opportunity.

1. **Missed referrals** – patients fall out of network
2. **Denied claims** – coding errors and incomplete documentation
3. **Scheduling gaps** – unfilled slots and last-minute cancellations
4. **Coding errors** – undercoding and missed modifiers
5. **Patient no-shows** – lost visit revenue and idles provider time
6. **Delayed reimbursement** – cash flow disruption and follow-up costs





REALITY 4

Administrative Burden Is Business as Usual

Healthcare professionals didn't enter medicine to spend their day clicking through software. Yet administrative work continues to consume more time than direct patient care—prior authorizations, documentation compliance, inbox management, and billing reconciliation all compete for the same finite hours.

Automation should eliminate work—not create more of it. If your technology is adding steps, it isn't working for you.

Which administrative task frustrates your staff the most—and how long has it been that way?

REALITY 5

Limited Visibility Has Become the Status Quo

Leaders shouldn't need ten reports to understand practice performance. If problems only become visible after financial results decline, your organization is already reacting—not leading. Healthy organizations operate with confidence because they have real-time, contextual visibility into performance.

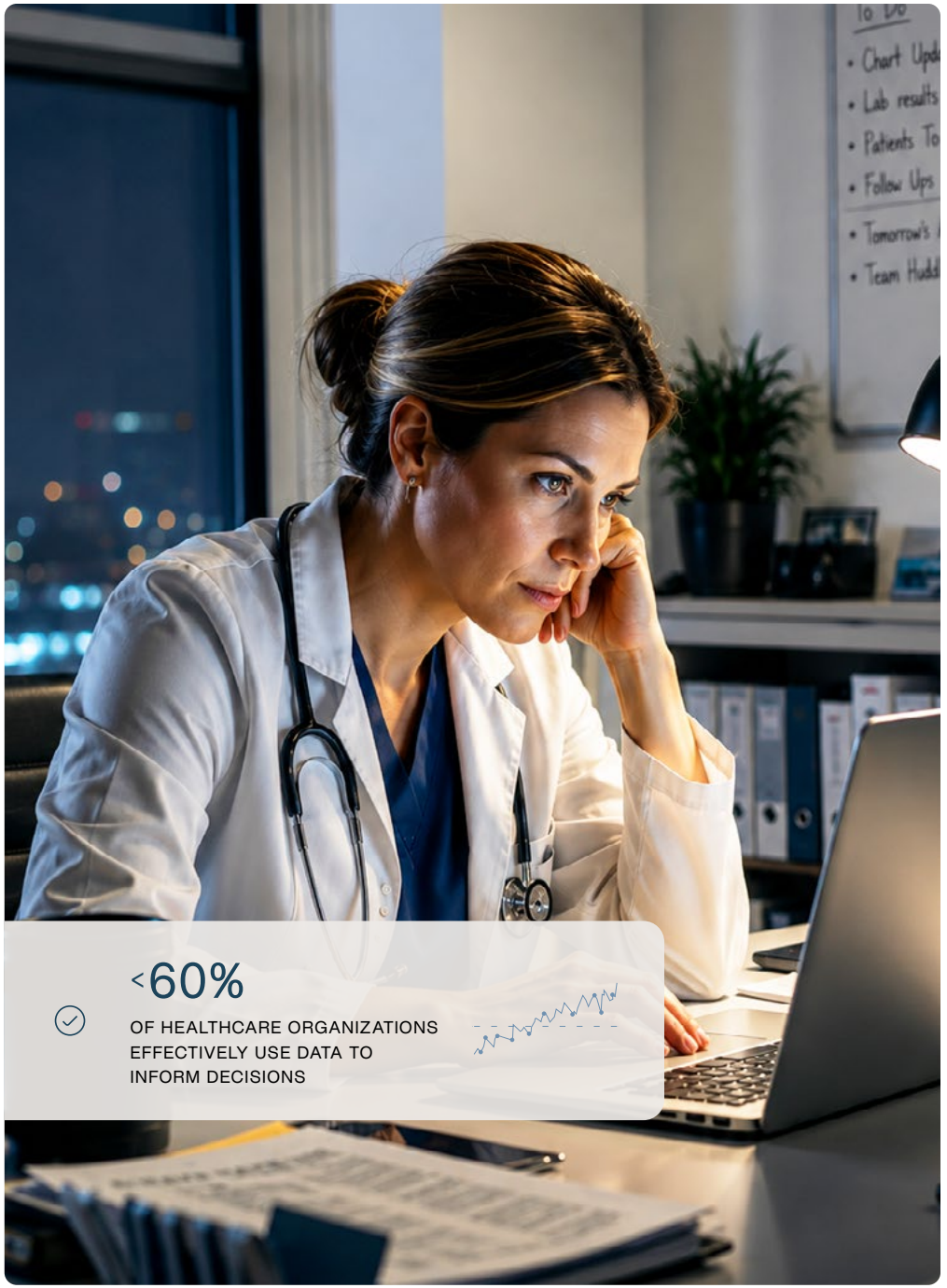
Operating Blind

- Decisions based on stale data
- Issues surfaced in monthly reviews, not daily operations
- No single source of operational truth
- Leaders managing by feel, not fact

Operating with Confidence

- Real-time dashboards at every level
- Predictive alerts before problems escalate
- Performance tied directly to patient outcomes

Could your leadership team identify today's biggest operational issue in under five minutes?





REALITY 6

Fragmented Patient Experiences Are Commonplace

Patients don't care which department owns a process. They simply experience the entire journey. Disconnected scheduling, repeated paperwork, poor communication, and delayed follow-up aren't internal system problems—they are the patient experience.

Disconnected scheduling

Patient navigate multiple portals and phone trees to book, confirm, and reschedule appointments.

Repeated paperwork

Patients re-enter the same information at every touchpoint—clinical and administrative alike.

Delayed follow-up

Results, referrals, and care instructions fall through the cracks of disconnected workflows.

Does your patient journey feel connected, or stitched together?

REALITY 7

“Good Enough” Has Become Acceptable

Perhaps the most dangerous normalization of all. “We’ve always done it this way” is a statement of comfort, not strategy. Healthcare has changed. Patients have changed. Technology has changed. The regulatory and competitive landscape has changed. Leadership must change too.

Organizations That Adapt

They refine existing processes and manage complexity more efficiently.

Organizations That Transform

They redefine expectations for staff, patients, and the industry at large.

What has your organization accepted as “normal” that shouldn’t be?

What Better Looks Like

The path forward isn't about working harder within a broken model. ***It's about building a better one.***

Clinical

Streamlined workflows that keep providers focused on patients, not paperwork.

Operational

Unified systems that eliminate friction and power every team across the practice.

Financial

Accelerated revenue cycles with fewer denials, less leakage, and faster closure.

Connected

A seamless patient journey from first contact through ongoing care management.



NextGen Healthcare Is Redefining What's Normal

We understand that it isn't about buying more technology. It's about consolidating around intelligent, connected platforms with ***measurable results.***



Clinical Excellence

Embedded AI documentation, streamlined workflows, and tools that help providers practice at the top of their license.

Learn More >



Operational Excellence

Unified scheduling, patient engagement, and administrative automation that eliminates friction across every team.

Learn More >



Financial Performance

Intelligent RCM, automated coding support, and real-time revenue visibility that closes the gap between care delivered and dollars collected.

Learn More >



AI-Powered Workflows

AI embedded at every point of care—not bolted on—sointelligence becomes invisible infrastructure, not an added task.

Learn More >

Real-World Results That Matter

Better isn't theoretical; it's measurable. These outcomes reflect what real-world NextGen Healthcare clients are seeing when they shift from fragmented systems and operations to connected, intelligent platforms.

↓57%
reduction in after-hours work

~2.5
hours saved per provider, per day

45%
faster claim resolution

75%
automated correction rate

↓40%
reduction in no-shows

2x
faster referral loop closure

5–10
more patients seen per day

UP TO 95%
automated call resolution

Technology Should Remove Complexity—Not Create It

We aren't just a software vendor. We're an operating partner—built specifically for ambulatory care, with one mission: to help practices perform at their highest potential, every day.

Take the Next Step

Discover where operational friction exists across your clinical, operational, and financial workflows—and explore practical, high-impact opportunities to improve efficiency, provider satisfaction, and financial performance.

No obligation. No generic pitch. Just a real conversation about what's possible for your practice.



Clinical Review

Assess documentation burden, AI readiness, and provider workflow efficiency.

Operational Review

Identify system redundancies, scheduling gaps, and administrative friction points.

Financial Review

Uncover revenue leakage, denial patterns, and reimbursement acceleration opportunities

Talk to an expert today.

Partner with us at 855-510-6398 or results@nextgen.com

Find out how your organization stacks up against key clinical, financial, and operational measures. Take a quick assessment and get your **Practice Confidence Score >**

1 www.mgma.com/mgma-stat/ai-tools-supplant-ehr-usability-as-top-tech-priority-of-2025. **2** www.healthcaredive.com/news/digital-health-funding-2025-boosted-ai-rock-health/809449. **3** www.healthcaredive.com/spons/how-healthcare-ai-is-closing-the-revenue-gap/822195. **4** www.ama-assn.org/press-center/ama-press-releases/ama-ai-usage-among-doctors-doubles-confidence-technology-grows. **5** https://www.ama-assn.org/practice-management/digital-health/five-physician-specialties-spend-most-time-ehr?utm_source=chatgpt.com. **6** https://www.homrcm.com/blogs/healthcare-revenue-leakage-problem. **7** https://www.ama-assn.org/practice-management/prior-authorization/exhausted-prior-auth-many-patients-abandon-care-ama-survey. **8** https://www.jmir.org/2025/1/e60472/?utm_source=chatgpt.com

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