Alithya 2026

Healthcare Provider trends and analysis report

Growth amidst friction: Leveraging AI, cybersecurity, and technology to balance operational reality



Alithya



Introduction

Healthcare providers are entering 2026 with strong expectations for organizational growth, but with performance increasingly linked to their ability to manage systemic risk, workforce strain, and operational pressure. Providers' technology agendas are converging around AI, cybersecurity, and infrastructure, with transformation efforts increasingly driven by operational risk, compliance demands, and ROI clarity rather than experimentation. While organizations remain optimistic and committed to change, structural friction across cost, data, infrastructure, and workforce readiness continues to slow scaled modernization.

About this report

This report is based on a survey of over **125 US healthcare executives** conducted by Alithya. The cohort includes leadership across clinical, financial, and corporate operational functions, representing organizations of varying size and digital maturity. By capturing a cross-section of perspectives from those responsible for budgets, clinical outcomes, and digital transformation, this analysis provides a directional roadmap for the industry. The findings offer a deep look into executive sentiment, organizational readiness, and execution priorities for 2026.

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Key insights



Growth expectations remain strong

with 54% of providers anticipating organizational performance above the healthcare industry's projected 8% Compound Annual Growth Rate (CAGR). This suggests confidence is not rooted in post-pandemic recovery but in expectations of operational improvement, market demand, and provider realignment.

Cybersecurity and AI disruption are dual top-of-mind risks for providers,



each cited by **45.1%** as leading 2026 challenges, reflecting both rising threat exposure and uncertainty surrounding AI-driven operational change. The combination signals that digital progress is occurring alongside heightened vulnerability, not reduced risk.



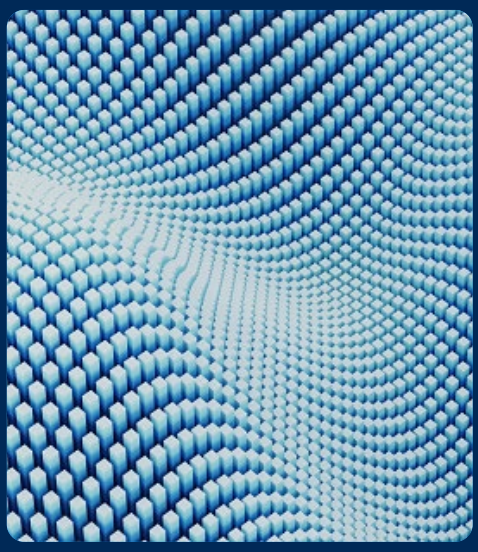
Data and AI-driven transformation is accelerating

75.2% **of providers plan to adopt Agentic AI**

Data and AI-driven transformation is accelerating, with 75.2% of providers planning to adopt Agentic AI, 57.5% pursuing data modernization, and 54.0% investing in cloud enablement. This demonstrates a pivot away from point solutions toward integrated intelligence systems that require scalable infrastructure and governance.

AI value chain confirmed

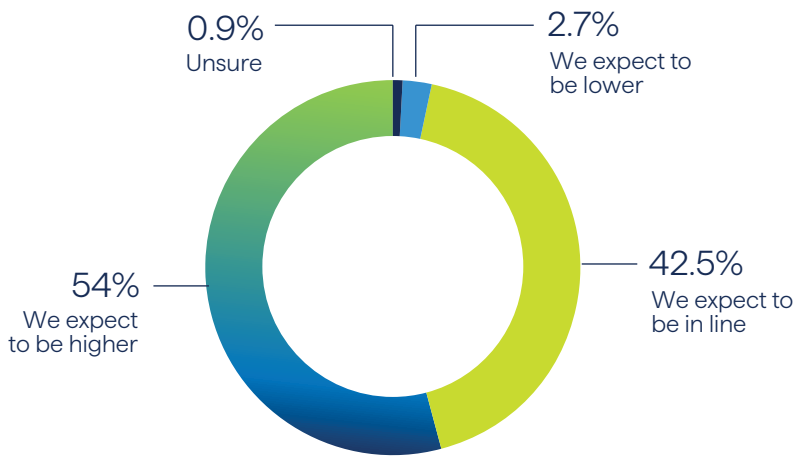
The 2026 technology agenda is prioritizing the prerequisites for advanced automation, with high planned adoption for Agentic AI (75.2%) driving foundational investment in Data Modernization (57.5%) and Cloud Enablement (54.0%). This confirms a market strategy where the pursuit of autonomous intelligence and next-gen workflows is absolutely dependent on building clean, accessible data and scalable infrastructure.



AI governance maturity is advanced relative to AI execution

79.2% report models in place or in development, but few have scaled execution pathways.

1 In 2025, the healthcare industry's compound annual growth rate (CAGR) was forecasted to be 8%. How did your organization's expected growth rate compare to this average?



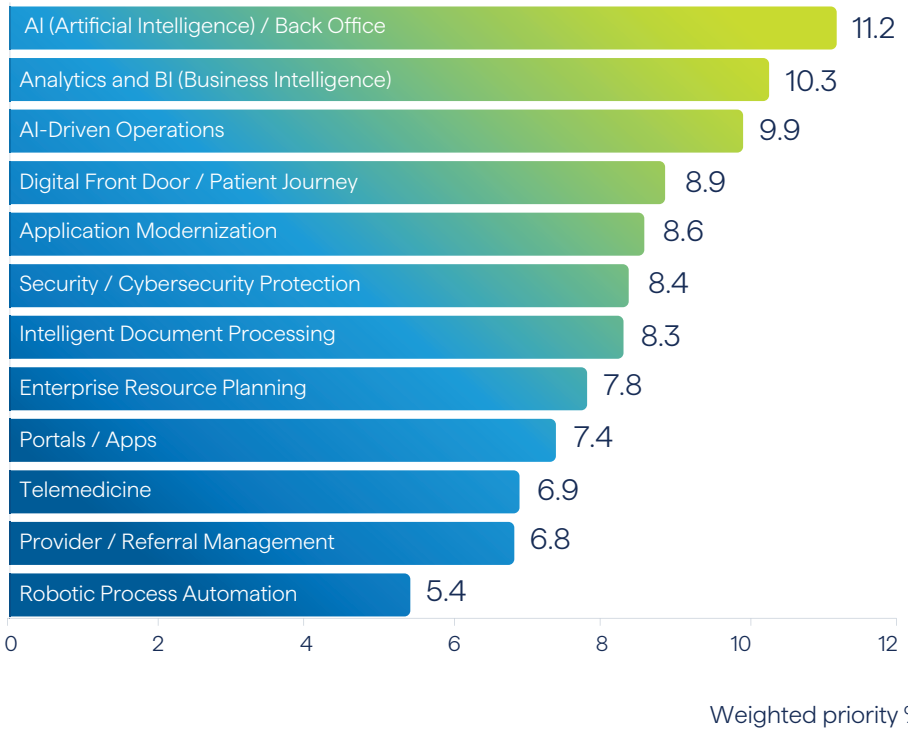
Summary of the results

A clear majority of healthcare providers (54%) expect their organization's growth to outpace the 2025 industry benchmark CAGR of 8%, while another 42.5% believe they will perform on par. Very few anticipate underperformance (2.7%), and fewer still are unsure (0.9%). This suggests that providers remain largely optimistic about continued demand recovery, patient volume stabilization, and digitally enabled growth in care delivery.

Industry analysis

Recent projections support provider optimism. According to Kaufman Hall's 2024 Hospital Flash Report[1], hospital and health system margins have steadily improved, with many organizations benefiting from elective procedure rebounds, revenue cycle optimization, and AI-assisted productivity. Furthermore, PwC's 2025 Health Industry Outlook[2] notes that providers are aggressively investing in virtual care, patient access tools, and clinical automation to drive scale and operating efficiency. These trends validate provider expectations of growth that exceeds the broader healthcare industry average.

2 Thinking about your organization's technology priorities, rank in order of importance.



Summary of the results

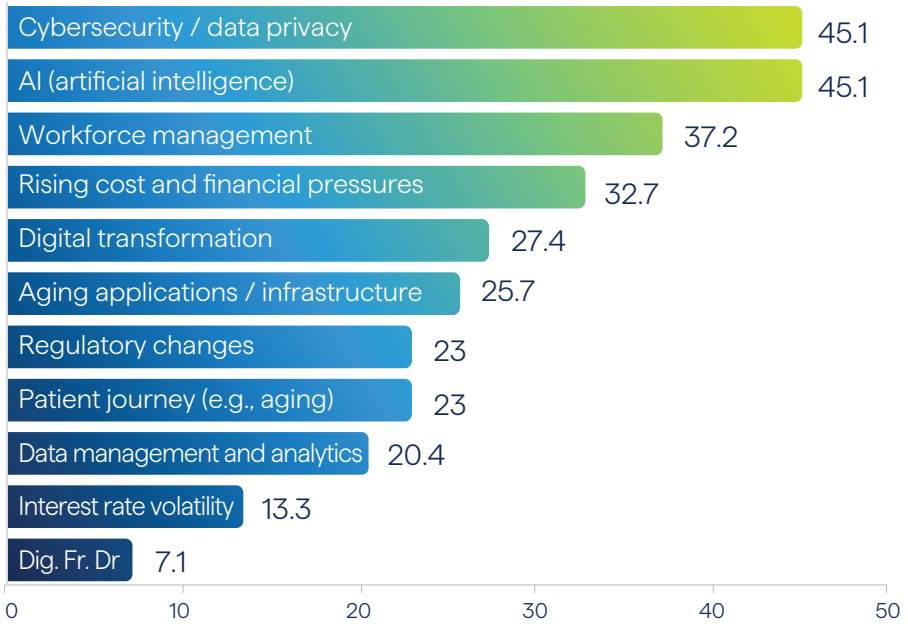
Providers place the greatest emphasis on AI applied to back-office and financial operations, followed closely by analytics and business intelligence and AI-driven operations, underscoring a strong focus on efficiency, automation, and data-driven decision-making. Mid-tier priorities—including digital front door initiatives, application modernization, and security/cybersecurity protection—reflect continued investment in patient access, core system renewal, and risk management, though with less urgency than AI-enabled efficiency gains. Lower-ranked areas such as robotic process automation, provider/referral management, and telemedicine suggest these capabilities are either more mature or viewed as incremental improvements rather than primary transformation drivers in the near term.

Industry analysis

The executive ranking of technology priorities reveals a critical, immediate focus on financial mitigation, with AI for back-office and finance use and AI-driven operations dominating executive minds. This high prioritization confirms an industry strategy focused on achieving scale through augmentation and automation, leveraging advanced capabilities to counter rising resource costs and persistent labor shortages. As the Bain & Company's 2025 Healthcare IT Investment Report[3] suggests, providers are moving AI and predictive analytics from pilot programs into full production for areas like revenue cycle management and administrative workflows, which promise immediate ROI by reducing manual workload and improving cash flow. Consequently, essential support capabilities like analytics and business intelligence rank highly as the necessary foundation for AI success.

In contrast, digital initiatives like application modernization, cybersecurity protection, and the Digital Front Door fall into the mid-tier priority range, signaling a shift from initial build-out to a phase of strategic optimization. For the Digital Front Door, this is a critical pivot: it is not being deferred but rather being leveraged as the future delivery platform for the current top-priority AI. The operational and financial AI projects (back-office automation, revenue cycle management) are actively building the clean data and automated workflows required to eventually transform the Digital Front Door from a static patient portal into a proactive, intelligent, and highly personalized digital concierge. Therefore, executives are focusing new investment on execution and near-term returns—automating the administrative tasks that consume labor—while simultaneously building the underlying intelligent engine that will make the Digital Front Door a far more powerful and scalable asset down the line.

3 What do you project as your top three challenges in 2026?



Summary of the results

Providers anticipate a challenging operating environment heading into 2026, defined by security risk, workforce management pressure, and financial strain. Security and compliance (45.1%) and AI-related disruption (45.1%) represent immediate critical risk vectors, which must be addressed to ensure operational integrity and regulatory stability. This is set against persistent structural pressures in the form of workforce strain (37.2%) and cost pressure (32.7%), which indicate sustained stress on capacity and margins. Mid-level concerns—including aging infrastructure, regulatory complexity, and the aging patient population—suggest that modernization is needed but often constrained by resources. Lower mentions of Digital Front Door (7.1%) and interest-rate volatility (13.3%) imply consumer experience and macroeconomic risk are secondary to operational stability.

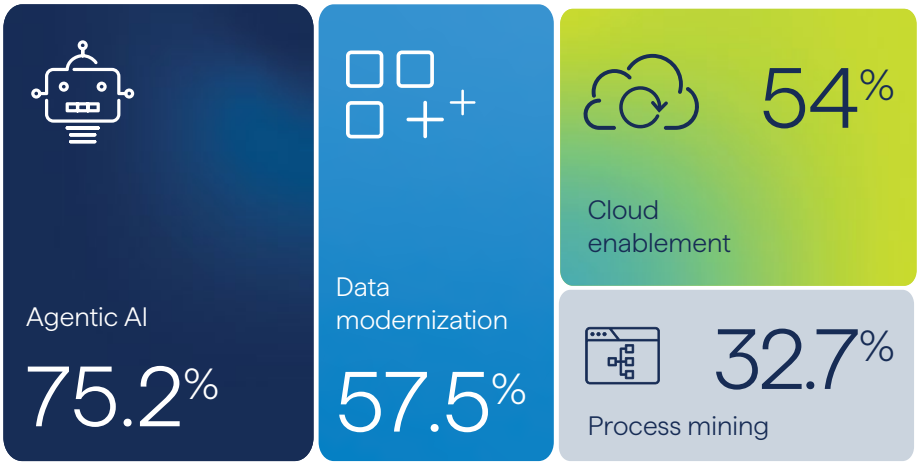


Industry analysis

Healthcare continues to experience the highest breach costs globally, averaging **$9.77M per incident in** 2024, reinforcing why leaders place cybersecurity at the top of their risk agenda[4]. Workforce shortages are also structural; US forecasts show a 124,000-physician shortfall by 2033 and a continued need for ~200,000 nurses annually to meet demand. Persistent inflation and labor cost escalation have pushed many health systems toward negative or minimal margins, validating why modernization is overshadowed by cost control and risk mitigation[5].

In a market under siege by security risk, workforce strain, and margin compression, consumerism is the trojan horse. While many investment plans do not reflect the priority of the Digital Front Door, the winners will be those who recognize its potential to operationalize convenience and automation to offset cost pressure and workforce gaps. The ability to scale patient engagement digitally will be the new norm.

4 What emerging technologies do you anticipate adopting in your organization in 2026?



Weighted priority %

Summary of the results

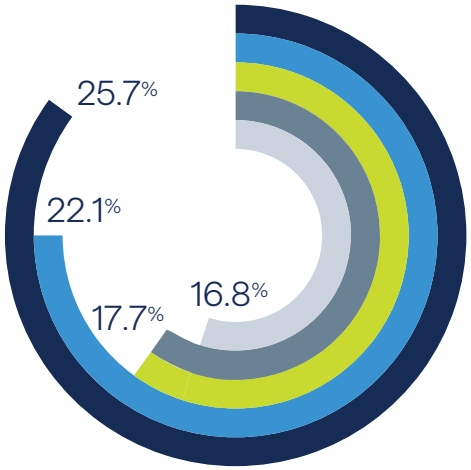
Providers are planning a data and AI-heavy technology agenda for 2026. Agentic AI leads, with 75.2% of respondents indicating plans to adopt, suggesting strong interest in more autonomous, workflow-aware assistants to support clinicians and staff. Data modernization (57.5%) and cloud enablement (54.0%) sit just behind, pointing to a recognition that AI value depends on cleaner, more accessible data and scalable infrastructure. Process mining (32.7%) is a second-wave priority, with roughly one in three providers planning to use it to analyze flows and bottlenecks once foundational data and cloud work is in place.

Industry analysis

Recent research supports this pattern: data modernization and cloud are now seen as prerequisites for effective AI in healthcare. A 2024 "State of Data Healthcare" report[6] found 51% of healthcare organizations say they need to modernize their data stack "a great deal", and 74% intend to centralize on a cloud platform within two years, reflecting the same focus on cloud and data infrastructure your respondents show. At the same time, healthcare AI is shifting from isolated tools toward more modular, agent-like systems that orchestrate workflows and data, which aligns with providers' strong interest in Agentic AI specifically[7].

5 How would you describe your organization's current approach to managing and measuring cybersecurity risk?

- **Integrated with IT governance**
  Cybersecurity is embedded in broader IT strategy with continuous monitoring, staff training, and measurable SLAs.
- **Proactive and data-driven**
  We leverage real-time analytics, AI/ML tools, and cyber risk scoring to anticipate, measure, and respond to threats dynamically across all systems
- **Basic monitoring**
  We have antivirus, firewalls, and compliance checks, but limited enterprise-wide measurement or risk scoring.
- **Reactive**
  We primarily respond to threats after they occur; cybersecurity is handled as incidents arise.
- **Defined program**
  We have a formal cybersecurity strategy, conduct regular risk assessments, and track select KPIs (e.g., incident counts, system downtime).



Summary of the results

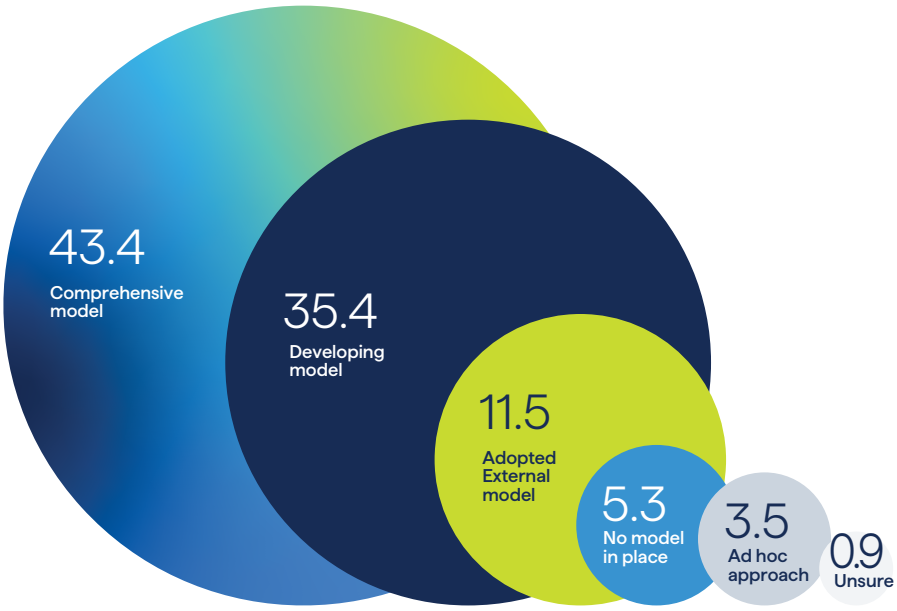
Providers exhibit a fragmented cybersecurity maturity posture, with only a minority of organizations report achieving true maturity. Just 25.7% have cybersecurity fully integrated with IT governance strategies, continuous monitoring, and measurable SLAs, and even fewer (22.1%) utilize proactive, real-time analytics with cyber risk scoring to dynamically anticipate and respond to threats. This strategic gap is underscored by the fact that nearly one-third of providers still rely on highly reactive methods—either basic monitoring (17.7%) or incident management after threats occur (17.7%)—suggesting persistent deficiencies in enterprise-wide governance and readiness. While the presence of defined programs (16.8%) shows progress, the overall data implies that cybersecurity execution remains largely operational rather than strategic, with inconsistent formal measurement and risk scoring across the organization.

Industry analysis

Cyberthreat activity against healthcare remains high: in 2024 the healthcare sector recorded more cyberthreat incidents than any other critical-infrastructure industry, including 238 ransomware events and 206 data breaches[8]. The financial stakes are large, according to the 2024 IBM "Cost of a Data Breach Report", average breach costs in healthcare reached US $9.77 million, far above the global average of US $4.88 million[9]. At the same time, adoption of comprehensive cybersecurity frameworks remains inconsistent. The HHS / Health Sector Coordinating Council (HSCC) voluntary framework—405(d) Health Industry Cybersecurity Practices (HICP)—continues to be promoted as a baseline for covering common threats (e.g., ransomware, social engineering, and device/network vulnerabilities), yet many organizations remain under-covered in areas such as asset/third party[10]. This combination—rising attack frequency and cost, coupled with uneven security maturity—suggests that without more widespread and consistent adoption of frameworks such as HICP, many providers remain vulnerable.



6 Which of the following best describes your organization's approach to developing or adopting AI governance models for integrating new solutions?



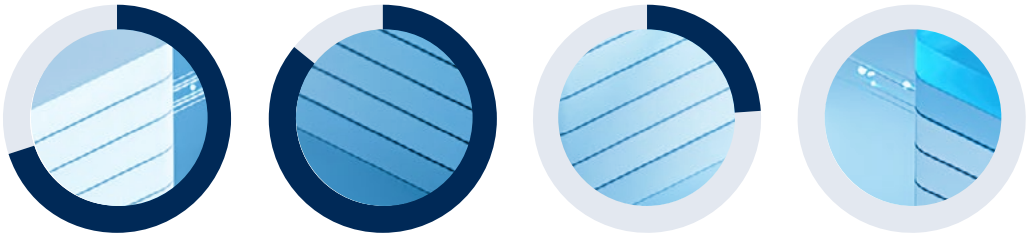
Summary of the results

Providers report a relatively mature but still evolving approach to AI governance. Nearly half say they have a comprehensive AI governance model in place (43.4%), and another third are developing a model that is not yet fully implemented (35.4%). A smaller group have adopted an external governance model (11.5%), while the remainder operate with ad hoc approaches (5.3%), no model in place (3.5%), or are unsure (0.9%). Overall, the data suggests that most providers recognize the need for formal AI governance, but a meaningful minority are still early in their governance journey.

Industry analysis

A 2025 survey of 233 US health systems[11] found that about 80% had little or no formal AI governance in place, despite actively using AI tools, underscoring how common immature governance remains in the sector. At the same time, professional bodies and researchers are pushing toward more structured frameworks: the WHO's 2025 guidance on ethics and governance for generative AI in health, and new governance frameworks proposed in peer-reviewed work (including a five-level Healthcare AI Governance Readiness Assessment model) both emphasize multidisciplinary oversight, risk stratification, and clear accountability for AI deployment[12]. This shows that governance is becoming a strategic capability, and providers that already have comprehensive or developing models are better positioned to scale AI safely than peers still relying on ad hoc or absent approaches.

7 How quickly can your organization go from business case to execution for new technology?



70%	85%	23%	0
Very fast within months	Moderate within a year	Slow over several years	Very slow rarely adopts

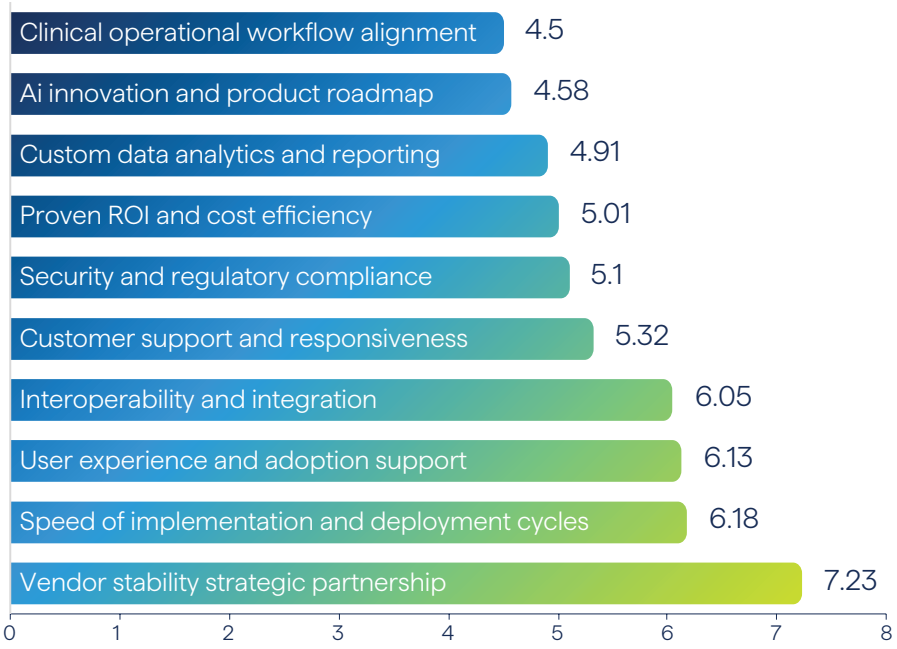
Summary of the results

Providers report relatively agile technology implementation, with over half able to move from business case to execution within a year, and more than two-fifths able to do so within months, indicating a strong operational capacity for digital transformation. Only a small minority face multiyear cycles, suggesting that while budget and governance constraints exist, most organizations are capable of time-bound execution.

Industry analysis

This aligns with national data showing that US health systems are accelerating digital adoption timelines as part of operational transformation: a 2024 McKinsey survey[13] found that 75% of healthcare leaders plan to increase technology investments within 12–18 months, driven by cost pressure, workforce constraints, and digital care models, but often struggle to scale projects beyond pilots due to data, funding, and governance barriers.

8 Which vendor capabilities are most important to you?



Weighted priority. The lower the rank, the higher the priority.

Summary of the results

Providers are signaling that strategic enablement wins over "tablestakes" execution. The highest-ranked capabilities—clinical and operational workflow alignment (4.50), AI innovation and product roadmap (4.58), and custom data analytics and reporting (4.91)—reflect demand for partners that can change how work gets done, demonstrate a credible path to continuous innovation, and translate data into measurable operational and financial outcomes. Proven economics—ROI and cost efficiency (5.01)—remain a gating requirement alongside Security and Regulatory Compliance (5.10). Foundational capabilities such as interoperability, UX and adoption support, and speed of implementation are expected, but no longer serve as meaningful differentiators.

Industry analysis

The high executive prioritization of clinical and operational workflow alignment and AI Innovation within the survey reflects a critical industry inflection point: providers are moving away from technology experimentation toward solutions that drive structural resilience in the face of escalating labor costs and constrained resources. This mirrors a broader industry trend, where, as a 2024 McKinsey analysis[14] found, US health systems are allocating a larger share of technology investment toward core operational platforms, data integration, and near-term ROI. The survey data reinforces this pivot, showing that executives prioritize proven ROI and cost efficiency alongside strategic capabilities like custom data analytics to ensure new technology is safe, interoperable, and delivers measurable financial and clinical value within strict regulatory frameworks and strained budgets. Ultimately, technology adoption is no longer a path to marginal efficiency but the core lever for achieving financial stability through enhanced workflow and workforce productivity. Ultimately, foundational capabilities are assumed, while improvements in workflow efficiency and workforce productivity have become the primary lever for financial stability.

Conclusion:

The 2026 results show the US healthcare provider sector is engaged in a complex effort to balance ambitious transformation with operational realism. The technology agenda is overwhelmingly centered on financial mitigation and operational scale, confirming a strategic pivot toward using autonomous intelligence to counter persistent workforce strain and cost pressure. This pursuit is defined by the AI value chain: the high interest in next-generation workflows, like Agentic AI, is driving foundational, correlated investments in data modernization and cloud enablement. This market strategy reflects an industry consensus that true automation and integrated intelligence are impossible without clean, centralized data and the flexible, scalable infrastructure to support it.

The pace of this digital progress, however, is being regulated by two urgent, structural forces: risk and vendor accountability. The deep concern over cybersecurity and AI-related disruption reflects an executive realization that digital transformation inherently increases vulnerability, making security an existential prerequisite rather than an IT task. With many organizations exhibiting a fragmented security posture, the urgent mandate is to move from reactive incident management to proactive, data-driven governance. This focus on risk translates directly to vendor demands: executives are done with experimentation and are prioritizing partners based on proven ROI, cost efficiency, and clinical/operational workflow alignment. Success in 2026 will belong to providers that manage to formalize their governance and demand that every technology investment—from cloud to AI—delivers verifiable financial and operational resilience.

Align technology strategy and financial stability with a trusted partner

The journey toward 2026 is defined by the critical need to balance ambitious Agentic AI growth with operational realism, heightened cybersecurity risk, and financial demands. With transformation now essential to resilience, success requires a strategic partner focused on delivering measurable value against these pressures.

Alithya empowers healthcare providers by focusing on three core mandates: establishing the prerequisites to deploy Agentic AI at scale, building operational resilience and financial stability, and driving verifiable ROI.

Connect with Alithya today to discuss securing the verifiable financial and operational resilience your organization needs to thrive amid persistent workforce shortages, volatile reimbursement models, and intensifying regulatory scrutiny.

Contact us

References

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Securing financial stability through workforce enablement



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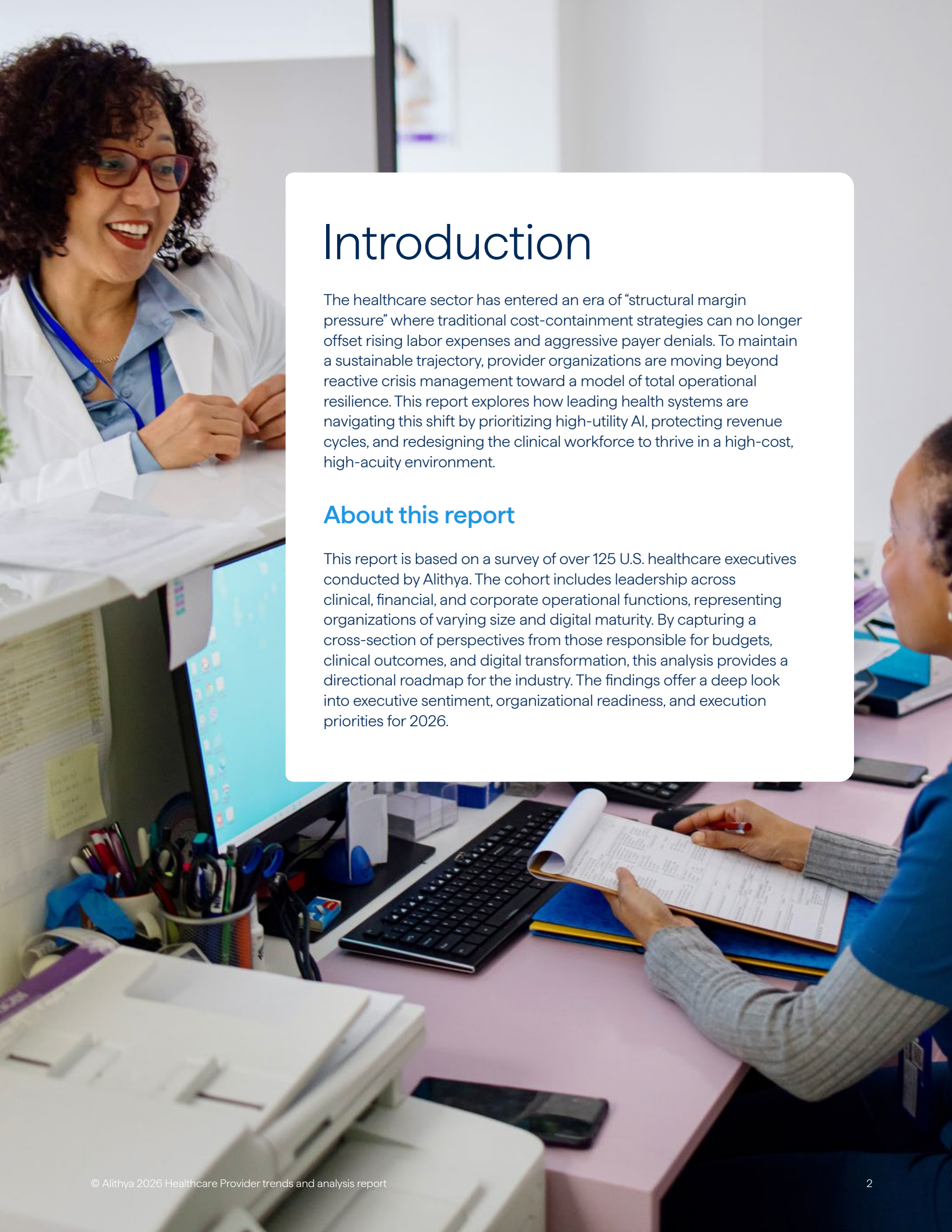

Introduction

The healthcare sector has entered an era of "structural margin pressure" where traditional cost-containment strategies can no longer offset rising labor expenses and aggressive payer denials. To maintain a sustainable trajectory, provider organizations are moving beyond reactive crisis management toward a model of total operational resilience. This report explores how leading health systems are navigating this shift by prioritizing high-utility AI, protecting revenue cycles, and redesigning the clinical workforce to thrive in a high-cost, high-acuity environment.

About this report

This report is based on a survey of over 125 U.S. healthcare executives conducted by Alithya. The cohort includes leadership across clinical, financial, and corporate operational functions, representing organizations of varying size and digital maturity. By capturing a cross-section of perspectives from those responsible for budgets, clinical outcomes, and digital transformation, this analysis provides a directional roadmap for the industry. The findings offer a deep look into executive sentiment, organizational readiness, and execution priorities for 2026.

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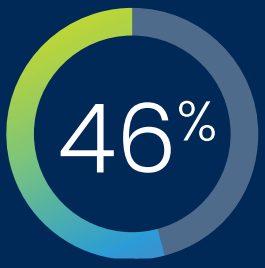
Key insights

68% **of healthcare leaders report confidence in managing labor costs**

yet escalating wages, productivity declines, and reliance on contract staff indicate potential performance overestimation.







Focus on labor cost management

With 46% of leaders focused on labor cost management, systems are shifting toward structural workforce redesign to offset expenses that now grow twice as fast as reimbursement rates.

AI-powered productivity

Nearly half of all organizations are now prioritizing AI-powered productivity to automate administrative strain, signaling a permanent move away from headcount-heavy growth models.



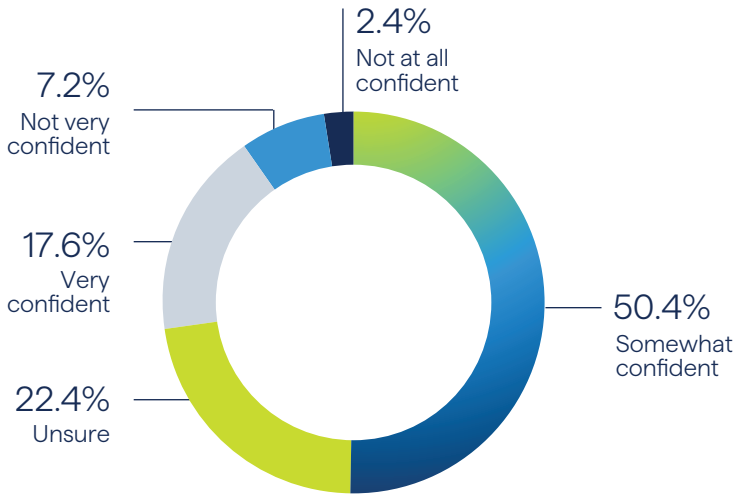
Billing efficiency and revenue diversification

Providers are insulating margins by focusing on billing efficiency (34%) and revenue diversification (32%) as a strategic defense against record-level payer denials.

Focus on internal upskilling

The focus on internal upskilling (43%) is replacing expensive external recruitment, creating a sustainable talent hedge against a market facing a projected shortage of millions of workers.

1 How confident are you in your organization's ability to manage labor costs and productivity?



Summary of the results

More than two-thirds (68.0%) of U.S. healthcare organizations report being either "very confident" or "somewhat confident" in their ability to manage labor costs and boost productivity. Only a small share (9.6%) indicates lack of confidence ("not very" or "not at all"), while 22.4% remain neutral or unsure. This suggests that while most organizations believe they are reasonably prepared for labor-cost and productivity pressures, a meaningful minority lack strong assurance, and a significant segment is ambiguous about their readiness.

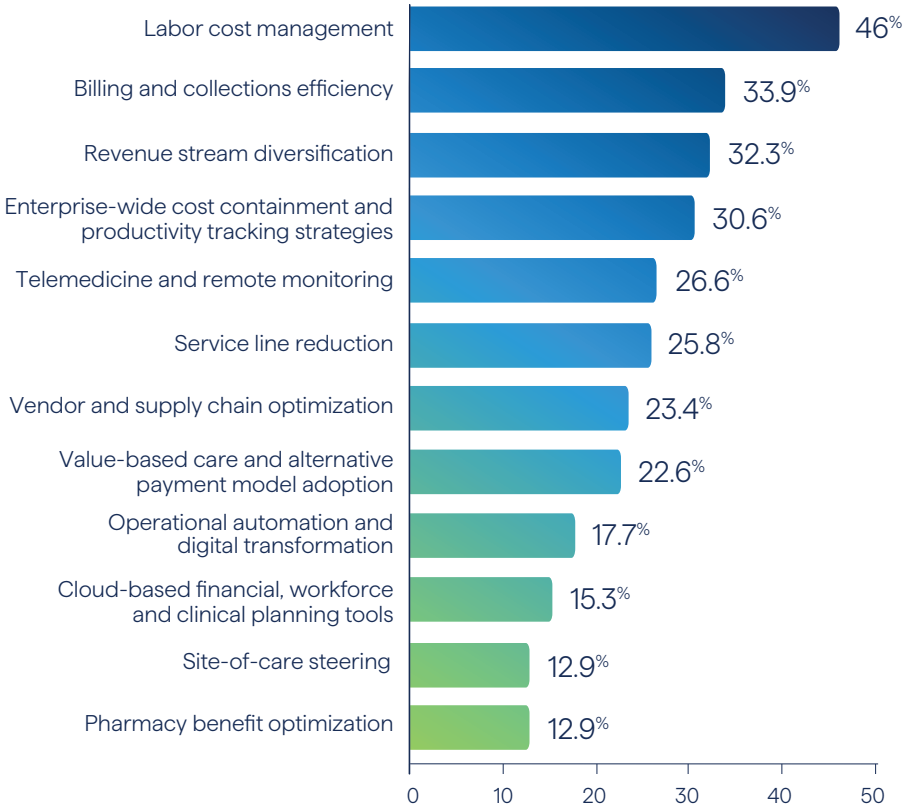
Industry analysis

The prevailing sense of confidence across the sector indicates a decisive move away from the "agency-labor" era that drained hospital margins between 2021 and 2023. This shift is rooted in a fundamental change in strategy; rather than chasing short-term staffing fixes, leaders are leaning into long-term operational resilience. According to the American Hospital Association, labor remains the primary driver of hospital expenses, representing over half of all operating costs as we enter 2026[1]. Organizations that feel prepared have likely pivoted toward "top-of-license" care models and AI-integrated workflows, aligning with industry-wide research that shows nearly two-thirds of executives are now prioritizing automation to bridge the productivity gap[2].

This optimism isn't universal, however, as a notable portion of the industry still finds itself on shaky ground. For many community and rural providers, "productivity" feels more like a moving target than an achievable goal because they often lack the capital to compete with the technology-heavy playbooks of larger systems. Data from Kaufman Hall shows that while labor markets have cooled, median operating margins have remained razor-thin, dipping below 2% for many regional players late last year[3]. When you combine these tight margins with a projected shortage of 100,000 nurses by 2030, the ambiguity among some leaders becomes clear: the macro-environment might be recovering, but the structural talent crisis is far from over.



2 A major theme in healthcare is managing surging healthcare costs. What measures are being taken to ensure financial sustainability of the healthcare system?



Summary of the results

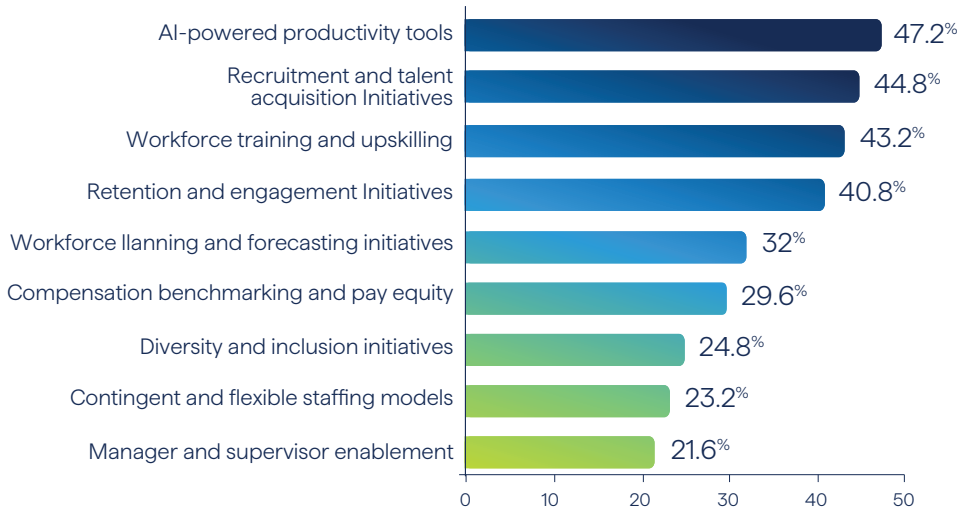
The results show that healthcare organizations are prioritizing a mix of workforce, operational, and revenue-cycle measures to address rising costs. Labor cost management is the most frequently selected strategy (46.0%), reflecting ongoing pressure to stabilize staffing and overtime. Financial performance levers also rank highly, with billing and collections efficiency (33.9%) and revenue stream diversification (32.3%) indicating a strong focus on improving cash flow and expanding revenue sources. Core cost-control efforts—such as enterprise-wide productivity and cost tracking (30.6%)—remain central, while telemedicine and remote monitoring (26.6%) highlight the continued role of virtual care in lowering delivery costs. Other actions, including supply chain optimization, value-based care adoption, and automation, show moderate but meaningful uptake as organizations pursue a more sustainable financial footing.

Industry analysis

The math of US healthcare has fundamentally shifted, forcing providers to trade old-school cost-cutting for a complete operational overhaul. With labor cost management leading the survey results, organizations are moving beyond temporary staffing fixes toward structural workforce redesign. This mirrors the AHA 2026 Costs of Caring Report, which notes that workforce expenses now account for the majority of hospital spending while total expenses grow at twice the rate of hospital prices[4].To stay ahead, providers are leaning into productivity and cost tracking to align staffing with actual patient demand—a strategy that Vizient's 2026 Outlook suggests is essential as patient acuity and complexity continue to climb[5].

The high priority on billing and collections efficiency marks an aggressive defensive stance against a deteriorating payer mix and rising denials. Recent data from the Kaufman Hall National Hospital Flash Report indicates that while margins have stabilized, "bad debt" and revenue leakage remain significant threats in this "new normal"[6]. Organizations are responding by diversifying revenue streams, shifting focus from high-overhead inpatient care toward ambulatory and retail health models. This transition is supported by the prioritization of telemedicine and remote monitoring as critical tools for moving care to lower-cost settings without sacrificing the volume needed for financial solvency[7].

3 Workforce challenges continue to mount for healthcare provider organizations. What are the top three areas your organization is focusing on to help deal with these challenges for the next 12–18 months?



Summary of the results

AI-powered productivity tools emerged as the most prioritized area at 47.2%, signaling that health systems are turning to automation and augmentation to relieve workforce strain rather than relying solely on additional headcount. Recruitment and talent acquisition followed at 44.8%, reflecting ongoing competition for skilled clinical and administrative talent. Meanwhile, 43.2% of organizations are focused on workforce training and upskilling, indicating that capability development is as important as filling vacancies. Retention and engagement scored 40.8%, highlighting that organizations recognize the risks associated with turnover, burnout, and disengagement. Other focus areas, including workforce planning (32.0%), compensation benchmarking (29.6%), diversity and inclusion (24.8%), contingent staffing (23.2%), and manager enablement (21.6%), appear to be secondary strategic levers. Collectively, the data suggest that health systems are prioritizing a blend of technology enablement and talent pipeline development, rather than relying exclusively on compensation-based or short-term staffing tactics.

Industry analysis

The traditional staffing playbook has been torn up, as US healthcare leaders realize that simply adding headcount is no longer a viable solution to the chronic labor shortage. With AI-powered productivity tools leading the survey as the top priority, organizations are pivoting toward a "human-augmented" workforce strategy. This shift aligns with the AHA 2026 Workforce Scan, which highlights that leading systems are moving beyond AI pilots to wholesale job redesign, using ambient documentation and predictive scheduling to pull clinicians out of administrative "death by a thousand clicks"[8]. By automating the "paperwork" of medicine, providers are attempting to close the Human-AI Synergy Gap—the disconnect between rapid tech deployment and the workforce's ability to actually use it to reduce burnout[9].

While recruitment and talent acquisition remain high priorities, the focus has matured from "hiring at any cost" to building sustainable internal pipelines through upskilling and training. This move toward "grow-your-own" talent models is a direct response to a market where RN pay has risen nearly 12% and the U.S. faces a projected shortage of millions of healthcare workers by 2026[10]. Forward-thinking leaders are now prioritizing skills-based workforce planning over rigid job titles, a trend ADP's 2026 HR analysis suggests provides the agility needed to staff emerging care models like hospital-at-home[11]. By investing in career ladders and micro-credentials, organizations are not just filling vacancies—they are creating a culture of development that acts as a primary hedge against the high cost of turnover and clinician disengagement.



Conclusion:

The results of this survey confirm that the era of "volume at any cost" has been replaced by a mandate for "value through efficiency." Success is now defined by an organization's ability to extract maximum performance from its existing resources through smart automation and site-of-care optimization. While the sector shows cautious optimism, long-term sustainability requires a fundamental commitment to fixing the "digital plumbing" and closing the gap between technology deployment and frontline adoption. The organizations that lead this transition will transform their workforce from their largest expense into their most resilient strategic advantage.

Let's Build Your Path to Operational Resilience

Innovation is only as valuable as the margin it protects. As you navigate the shift from reactive cost-cutting to structural redesign, Alithya helps you move beyond the "AI pilot" phase into true operational value. We specialize in optimizing your digital infrastructure to automate administrative burdens, secure your revenue cycle against volatility, and allow your team to focus on what matters most—the patient.

Whether you are scaling AI-powered productivity tools or diversifying revenue streams, we provide the technical expertise to turn your digital strategy into a strategic advantage.

Connect with Alithya today to stabilize your margins and build the resilient infrastructure your organization needs to thrive in a high-cost, high-acuity environment.

Contact us

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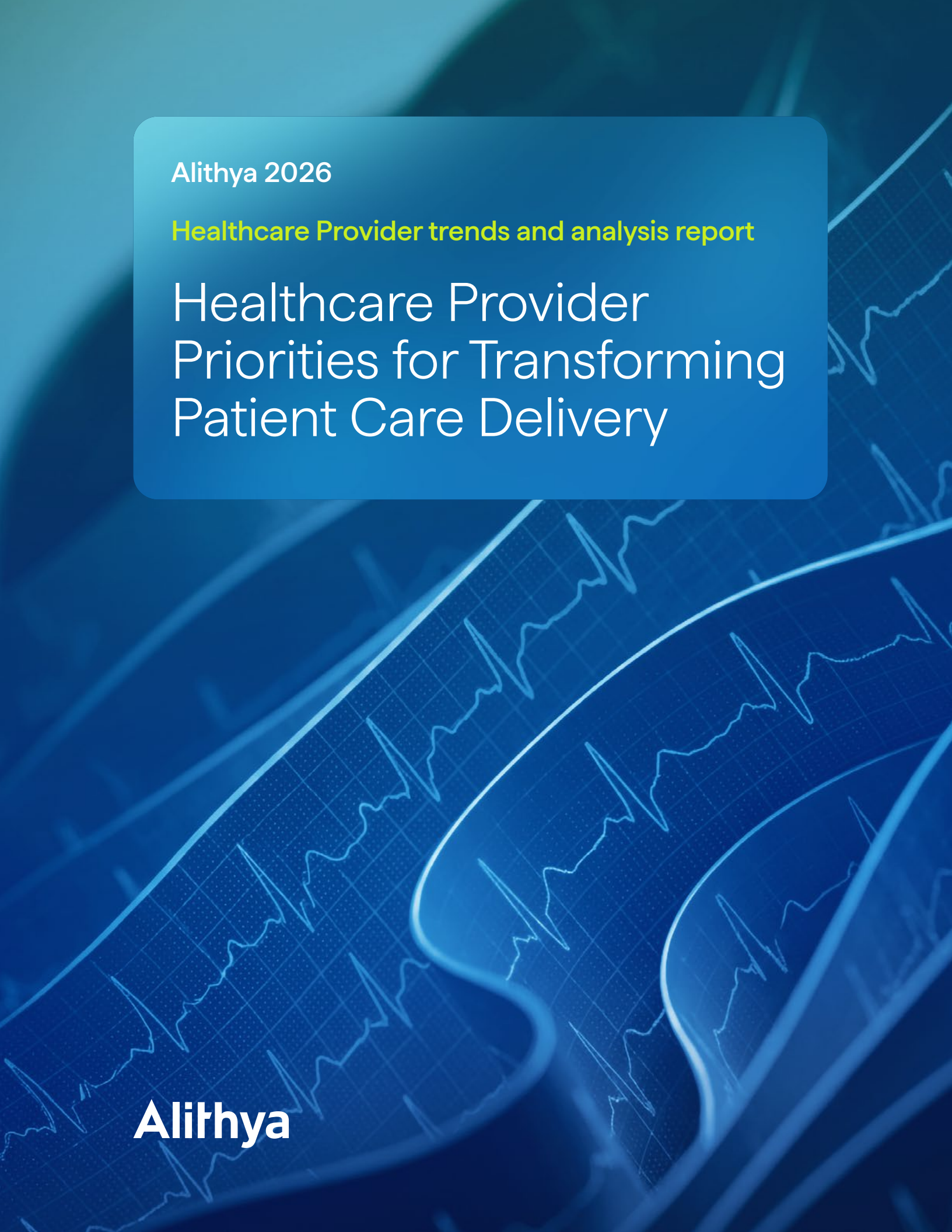
Healthcare Provider Priorities for Transforming Patient Care Delivery



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Introduction

Healthcare providers are operating in an environment where every strategic decision carries greater operational and financial consequences than ever before. Rising costs, workforce shortages, evolving patient expectations, and increasing pressure to demonstrate measurable outcomes are reshaping how health systems define success. Growth is no longer measured solely by expanding services or adopting new technologies, but by an organization's ability to deliver coordinated, efficient, and patient-centered care while maintaining long-term financial sustainability.

The findings in this report highlight where healthcare executives are concentrating their investments to meet these challenges. From expanding service lines and modernizing core technology to strengthening patient engagement through analytics and care coordination, the results reveal a common theme: providers are prioritizing the foundational capabilities that enable sustainable transformation. Rather than pursuing innovation for its own sake, healthcare leaders are focusing on the operational, clinical, and digital investments that create lasting improvements in both organizational performance and patient outcomes.

About this report

Alithya surveyed 125 U.S. healthcare provider executives across clinical, financial, and operational leadership roles to understand the priorities shaping the future of healthcare delivery. The research explores how organizations are approaching growth, technology investment, and patient experience improvements while navigating ongoing pressures around cost, workforce capacity, and care quality.

The findings reveal where healthcare leaders are focusing their efforts to build more connected, efficient, and patient-centered health systems.

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Key insights

80% rate service line expansion as important to patient care



Nearly eight in ten healthcare leaders rate service line expansion as important to patient care, signaling that portfolio strategy has moved from a growth tactic to a core clinical quality lever.

Under 5% of responses combined were dismissive, indicating industry-wide consensus that static, single-focus care models are no longer viewed as viable for competitive or clinical relevance.



EHR functionality

EHR functionality remains the dominant near-term technology priority, with 40% ranking it #1 and 61.6% placing it in the top two, signaling that foundational data infrastructure, not emerging innovation, is still the primary constraint executives are working to solve.

Executive priorities

Analytics-driven insight (cited by 53.6%) and **care coordination** (52.8%) top the list, ahead of more visible "front door" investments like digital experiences, cited by just 24.0%, showing executives are prioritizing understanding and fixing the care experience internally before investing in external-facing engagement tools.



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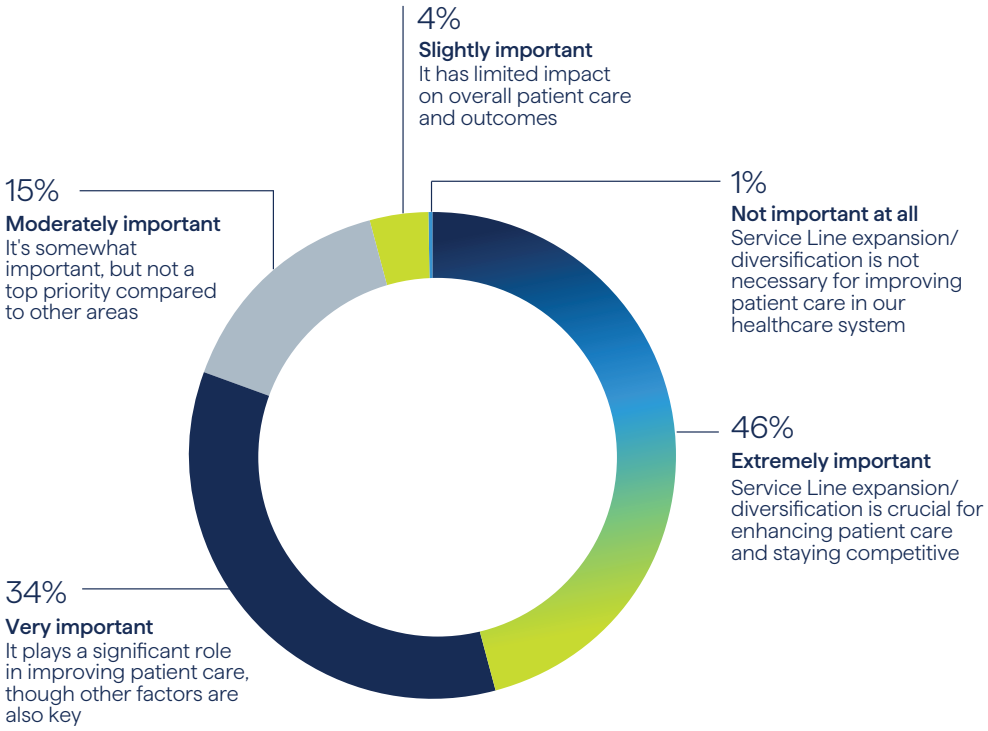
1 How important do you believe service line expansion or diversification is for improving patient care and outcomes in your healthcare system?



Summary of the results

The survey reveals overwhelming executive alignment on the strategic value of service line diversification, with 45.6% rating it “Extremely Important” and another 34.4% rating it “Very Important” — a combined majority of 80%. Only a small minority (15.2%) view it as merely “Moderately Important,” and fewer than 5% consider it to have limited or no bearing on patient care outcomes. This distribution shows a tight clustering at the high end of the importance scale, with virtually no long tail of skepticism. The pattern suggests that service line strategy has become a mainstream operational priority rather than a differentiator reserved for large academic medical centers or urban health systems. Leaders appear to be linking clinical breadth directly to patient outcomes, not just financial performance. This convergence of opinion across a diverse respondent base points to a structural shift in how health systems define competitiveness and quality simultaneously.

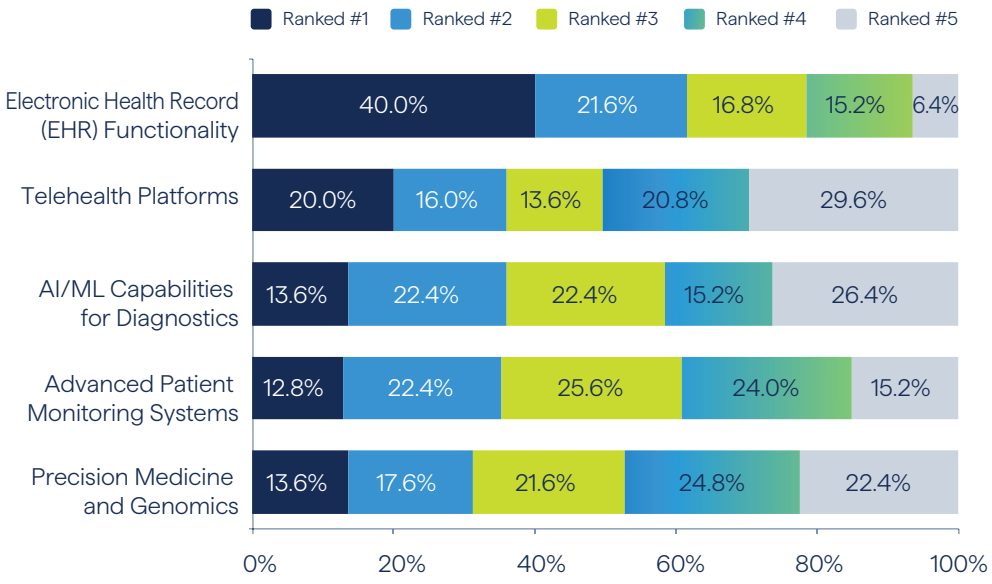
Industry analysis

This finding reflects a shift in how executives view service line strategy: from a revenue diversification play to a clinical necessity. Fragmented care offerings force patients into referral leakage and disjointed coordination, which erodes both outcomes and experience[1]. This tracks with the broader shift documented in clinical literature: service lines historically built for market differentiation and volume growth are now being redesigned to be patient-centric and market-facing, spanning care settings rather than sitting inside a single hospital.

The C-suite implication is that service line planning can no longer sit solely with business development; it must be co-owned with clinical and quality leadership. Industry data shows hospital expense growth has significantly outpaced governmental support and reimbursement growth in recent years, including Medicare, Medicaid and other public funding mechanisms. Driven largely by labor, supply, and contract staffing pressures, this means expansion must be paired with workforce and cost discipline or it will erode the margin gains it's meant to produce[2]. Other market research points to leading systems making large, disciplined bets on outpatient and ambulatory expansion, citing better access, lower cost, and higher satisfaction as the payoff, the model this survey data points toward.[3] The mandate to invest is clear; the risk lies in execution that isn't financially disciplined or workforce-feasible.



2 What technological advancements are being prioritized to enhance healthcare delivery



Summary of the results

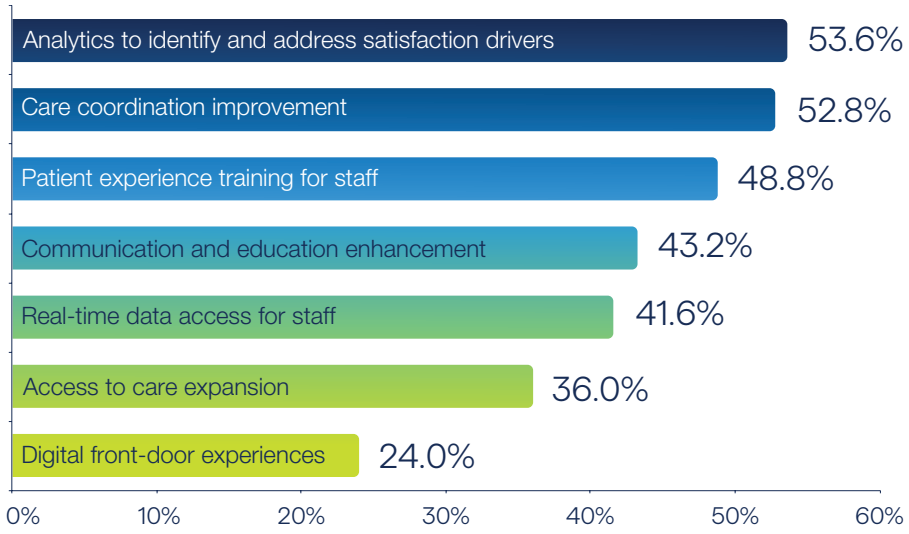
Electronic Health Record functionality is the clear top priority, with 40.0% of respondents ranking it first and over 60% placing it in the top two ranks, far ahead of any other category. Telehealth platforms show a polarized pattern: 20.0% rank it first, the second-highest Rank 1 share, but 29.6% also rank it last, suggesting divergent strategic postures across organizations. AI/ML capabilities for diagnostics and Precision Medicine & Genomics both skew toward lower-priority rankings, with the largest share of respondents placing each in Rank 4 or 5. Advanced Patient Monitoring Systems land in the middle of the distribution, with responses fairly evenly spread across Ranks 2 through 4. Overall, the data shows a clear hierarchy: foundational infrastructure first, care-access tools second, and advanced clinical AI and genomics further down the roadmap.

Industry analysis

The dominance of EHR functionality as the top-ranked priority signals that most health systems have not yet resolved core infrastructure challenges, even after more than a decade of EHR investment nationally[4]. Recent HIMSS research puts a hard number on this gap: [88]% of surveyed organizations say their infrastructure fully supports electronic health records, but only [18]% say they're actually ready to deploy AI in care delivery. That's not a small gap; it's the entire story behind why EHR functionality still beats AI/ML diagnostics in this survey's rankings.

The lower rankings for AI/ML diagnostics and precision medicine point to a gap between industry narrative and operational readiness, not a lack of interest. Most systems are still building the infrastructure AI depends on, even as enthusiasm for its potential runs high[5]. Investing in AI ahead of that readiness tends to produce low ROI and clinician distrust, while treating EHR modernization as pure compliance spend misses the chance to build it as the foundation AI actually needs. Infrastructure readiness, more than enthusiasm, is what should be setting the pace of AI investment right now.

3 Patient engagement and satisfaction are key topics healthcare is focused on. What are your top three focus areas to drive this initiative?



Summary of the results

Analytics to identify and address satisfaction drivers leads at 53.6%, narrowly ahead of care coordination improvement at 52.8%, indicating that measurement and internal process fixes are the top two priorities. Patient experience training for staff (48.8%) and communication/education enhancement (43.2%) follow closely, reinforcing a people- and process-first orientation. Real-time data access for staff (41.6%) rounds out the upper-middle tier, while access to care expansion (36.0%) and digital front-door experiences (24.0%) trail as lower relative priorities. The gap between the top-ranked analytics focus and the lowest-ranked digital front door spans nearly 30 points, a meaningful separation. The results show a clear preference for operational and workforce-facing investments over consumer-facing digital tools.

Industry analysis

Patient satisfaction is becoming increasingly recognized as an operational outcome rather than solely a customer service metric. The strong emphasis on analytics and care coordination indicates that healthcare executives are looking beyond traditional patient experience initiatives to understand the systemic factors that influence satisfaction, including care transitions, communication gaps, appointment delays, and fragmented workflows. As reimbursement models continue shifting toward value-based care, organizations are under growing pressure to improve both patient outcomes and patient-reported experiences while controlling costs. Advanced analytics allow providers to identify patterns across clinical, operational, and patient feedback data, enabling more targeted interventions instead of relying on broad experience improvement programs. Research continues to show that organizations with stronger care coordination experience better patient outcomes, lower avoidable utilization, and improved patient satisfaction, making these investments strategically important for both quality performance and financial sustainability[6].

The comparatively lower prioritization of digital front-door initiatives is equally revealing. While digital scheduling, online registration, and patient portals remain important consumer expectations, providers appear to recognize that technology alone cannot compensate for operational inefficiencies or inconsistent care experiences. Nearly half of respondents instead prioritized staff training, communication, and real-time access to information, suggesting executives view frontline employees as the primary drivers of patient engagement. This reflects a broader industry shift toward enabling clinicians and care teams with integrated data and streamlined workflows that reduce administrative burden while supporting more personalized patient interactions. As workforce shortages persist and care delivery becomes increasingly complex, organizations that combine interoperable data, actionable analytics, and workforce enablement will be better positioned to improve patient loyalty, clinical outcomes, and performance under value-based reimbursement models.



Conclusion:

Across each area explored in this report, a clear pattern emerges: healthcare providers are taking a disciplined, pragmatic approach to transformation. Respondents consistently prioritized investments that strengthen core operations, improve care delivery, and enable better decision-making before pursuing more advanced innovations. Whether through service line expansion, modernization of foundational technology, or improving patient engagement with analytics and coordinated care, executives are focused on building capabilities that produce measurable value across clinical, operational, and financial outcomes.

The findings also reinforce that the future of healthcare will depend less on individual technology investments and more on how effectively organizations connect people, processes, and data. Success will increasingly be defined by an organization's ability to integrate clinical and operational intelligence, empower frontline teams, and continuously improve the patient experience while navigating ongoing financial and workforce pressures. For healthcare leaders, the opportunity is not simply to adopt new tools, but to build a resilient operating model capable of adapting to the changing demands of care delivery for years to come.

Build the capabilities behind better care delivery

From service line optimization and technology modernization to patient experience improvement, Alithya helps healthcare providers build the operational foundation needed to deliver better outcomes.

Explore how we can help

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About Alithya

We are trusted advisors who leverage AI and the latest technologies in our strategic consulting and digital transformation services. We help solve business challenges that enable our clients to unlock new opportunities, modernize processes, and gain efficiencies. We leverage a world-class team of passionate industry experts, AI-based IP solutions, the latest digital technologies, a solid understanding of mission critical business applications, and a partner ecosystem to accelerate results. We've built a foundation of success that includes a specialized global delivery network to provide end-to-end solutions.

Our HITRUST-certified and HIPAA-compliant solutions deliver this impact across the modern healthcare enterprise:

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- / AI-powered workforce management
- / Enterprise modernization
- / Cost of care analytics
- / Alithya Rapid Suite
- / Digital front door

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- Project operations
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- Custom applications development
- Control/software engineering

Business enablement

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- Managed services
- Change enablement
- Quality engineering
- AI continuous improvement

The Alithya team

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