

UNLOCKING DIGITAL PERFORMANCE  
**2025 OUTLOOK | HEALTHCARE INDUSTRY**



**Enhanced Patient Experiences,  
Operational Efficiency, and  
Data-Driven Outcomes**





# Healthcare in 2025

The confluence of aging populations, rising demand for healthcare services, clinician burnout, workforce shortages across the board, and significant and growing financial pressure at both provider and payer levels are creating a pivotal moment for healthcare in 2025.

Providers are looking to stretch scarce resources and simultaneously provide the quality care patients need, while payers are searching for ways to streamline and modernize processes that are still largely manual. Against the backdrop of an industry push towards value-based care with patients at the core, patients today are still struggling with long waitlists, health coverage changes, and experiences that can often feel non-intuitive and lacking the personalization they've come to expect from other industries.

For payers and providers, an AI-first transformation approach will be a critical starting point to drive the operational efficiencies they need to ease the burden of staff shortages. Deeper integration of AI can not only automate manual, repetitive, and time-consuming administrative tasks like credentialing or claims processing for payers, but also optimize clinical processes, such as patient flow and staffing, for providers.

Enabling better outcomes in these areas will, in turn, positively impact patient experiences, reshaping how they engage with medical services – from finding the right coverage and understanding when they should see a doctor and what it'll cost, to how they access and manage their health more generally. In fact, almost two-thirds (62%) of healthcare leaders believe consumer engagement and experience are the areas where AI will have the most impact.<sup>1</sup>

However, while healthcare leaders are eager to invest in AI adoption, there have been common roadblocks for both payers and providers. To assist the industry in moving from proof-of-concept pilots to in-production use cases, those roadblocks need to be overcome – and focus given to the pathways and core technological building blocks that can deliver immediate, tangible value and drive long-term growth.

All three of the focus areas are interconnected – with each impacting patient outcomes, the overall experience, and cost and profitability.

## Three Focus Areas for Healthcare in 2025

- **Data interoperability and predictive modeling:** Using connected, real-time data will drive smarter, more informed decisions that optimize operations and result in better outcomes.
- **Customer-centric, enhanced patient experiences:** Personalizing patient care and insurance plans will enable a better patient experience and again, improve healthcare and business outcomes.
- **Operational efficiency and automation:** Automating processes and streamlining workflows will reduce operational costs and improve efficiency across the sector. AI and ML in healthcare will deliver net savings of up to \$360 billion.<sup>2</sup>





# Data Interoperability and Predictive Modeling

For both payers and providers, capitalizing on the wealth of data they hold by embracing a data-driven model is key to driving better patient outcomes and operational efficiencies. However, with the vast amounts of sensitive health and patient data at stake, this is a tricky undertaking.

Data interoperability has long been a challenge for healthcare, like most industries. And while compliance with complex and rapidly changing industry regulations around coverage, care models, authorization, and plan performance undoubtedly plays a part, solving the underlying challenges

posed by legacy systems, lack of standards around collection and transmission, data quality, security, and governance will become critical for healthcare transformation.

Investing in a strong data foundation, and layering predictive analytics on top, can help healthcare organizations unlock insights from previously inaccessible formats including disorganized medical records, clinical notes, and physician and patient information. These insights can significantly improve decision-making.

For providers, this can mean better diagnosis, treatment planning, and outcomes such as increased care coordination, value-based care, and health equity. For payers, it means improved risk management in flagging high-risk patients – such as those at risk of developing chronic conditions – fraud detection and prevention, claims management, and agility in identifying and responding to trends.

The industry as a whole needs to break down silos, introducing strong data governance and using predictive analytics not just to drive new operational efficiencies but to improve the quality of care being delivered. Adoption will have its challenges, but getting ahead of the curve will deliver significant benefits.

Many payers and providers recognize the potential value and are already planning to increase their investments in modernizing systems and using data analytics to enhance quality care and reduce costs. The industry itself has seen the impact data-driven insights can have and is mandating transformation. For example, by January 2027, APIs facilitating real-time data exchange between patients, providers, and payers will become enforceable, setting a new standard for seamless information sharing.





To unlock better outcomes, healthcare payers and providers should consider the following areas:

**Data and analytics:** In a sector as heavily regulated as healthcare, the governance and security of data are non-negotiable. It must be clean, accurate, structured – and, above all, protected to ensure compliance with HIPAA, which introduced more stringent patient privacy protections in 2024.

- Healthcare payers and providers must prioritize end-to-end excellence by setting up a centralized data layer supported by a robust data governance architecture that allows for real-time data access, cleansing, and structuring.

**Application modernization:** Legacy systems present a clear hurdle to transformation. Payers with legacy enrollment, credentialing, claims processing, and provider data management (PDM) systems still face the challenge of finding and managing the information they need in a way that is efficient and scalable. This means less accuracy when predicting data and inadequate pricing and fee structures. Providers meanwhile are struggling with the inability to structure data to deliver the level of support needed to give nuanced patient insights for better outcomes.

- Implement, test, and refine AI models based on feedback and new data to create a continuous feedback loop that will improve predictive capabilities, further increasing accuracy, efficiencies, and support.

**Cloud infrastructure:** Adopting hybrid cloud solutions will be important for better data management. Nearly half (49%) of healthcare organizations globally plan to increase spending on cloud-based customer data platforms over the next 12 months.<sup>3</sup>

- Invest in cloud-based architectures to reduce complexities associated with maintaining and integrating on-premise and disparate systems, enhancing agility, and bolstering the security posture of healthcare organizations.

**Cybersecurity:** Investments in new, unified data strategies and architecture must be complemented by a strong cybersecurity strategy. Healthcare companies must consider implementing robust patch management processes, tracking audits, standardizing encryption, and strengthening networks with firewalls and intrusion detection systems to secure all endpoints.

- Employ strict access controls using the principle of least privilege, frequent adjustments to permissions, as well as comprehensive risk assessments.



# Customer Centricity and the Enhanced Patient Experience

Healthcare in the US is moving towards a value-based model, with the patient at its center. Both providers and payers must adapt. That means not just offering better care overall, but understanding and anticipating patient needs, as well as working with patients to improve their health and wellbeing.

Adapting effectively will require implementing analytics to facilitate data-driven insights around patients. On the payer side, harnessing analytics will help identify high-risk patients, track quality metrics, and measure the effectiveness of care interventions, while providers can leverage electronic health records and analytics platforms to streamline care coordination and improve decision-making.

Taking these insights and turning them into actionable intelligence to

personalize care presents a significant opportunity. Providers will need to put in place engagement strategies based on individual patient data to improve outcomes, delivering sophisticated remote monitoring, virtual care services, and disease management. Payers will have to improve member and provider experiences and offer tailored benefits or care options for higher satisfaction – and retention – rates.

The overall goal is to drive greater patient satisfaction through tailored experiences, and AI will be a critical strategic enabler in automating and scaling personalized interactions. Getting this right is already a core focus within the industry. 64% of payers, for example, say improving member engagement is a top priority for their digital initiatives, including mobile apps, telemedicine solutions, and more.<sup>4</sup>

Focusing efforts on the following building blocks and outcomes will help:

**Data and analytics:** AI-powered analytics will be crucial in the shift to delivering value-based care outcomes.

- For providers, AI can generate a treatment plan that’s more likely to be effective by analyzing a patient’s medical history, lifestyle, and preferences.
- With a centralized data layer in place, payers will be able to fully aggregate member and provider data from multiple sources to deliver more personalized healthcare plans.

**Application modernization:** Integrating AI capabilities can help brands deliver on ever-increasing patient expectations for more personalized, seamless experiences when managing their health needs.

- Consider employing APIs to facilitate the creation of innovative digital health products and services, such as real-time appointment scheduling. This shift towards API adoption is driven not only by the necessity for patient-centric solutions, but also agility, quicker time-to-market, and the pursuit of new revenue opportunities.
- Providers should consider integrating advanced chatbot functionality into their digital platforms to enable appointment management, collect patient feedback, send medication reminders, and provide responsive support.



# Enhancing the Patient Experience With AI and AR



A leading children’s hospital wanted to explore how digital technology could help children familiarize and come to terms with their environment and treatment.

Sutherland’s Insight & Design Labs partnered with the client to develop Xploro®, a health information platform that uses AR, gameplay, and AI to deliver health information to young patients. It harnesses features such as chatbot advisors that suit the linguistic, cognitive, and contextual needs of children who are patients.

## THE IMPACT:



Reduced patient  
anxiety



Improved clinical  
outcomes



Reduction in repeat  
procedures



# Operational Efficiency and Automation

Rising costs, administrative inefficiencies, and workforce shortages are putting immense pressure on both healthcare payers and providers to find ways to do more with less – without sacrificing quality of care.

AI-first transformation offers a powerful solution: by automating routine tasks, streamlining workflows, and improving accuracy, healthcare organizations can not only reduce operational costs and human error, but also reallocate resources to more strategic, patient-centric activities.

For providers, this means reducing administrative burden, whether that’s automating credentialing, scheduling, billing, and revenue cycle management (RCM) or using AI-powered tools to manage medical records. For payers, this means automating claims processing, member support, and other operational workflows – unlocking 13-25% cost savings by streamlining processes that are still largely manual today.<sup>5</sup>

It’s clear that the healthcare industry has an opportunity to optimize costs and enhance operational resilience through AI-powered automation. However, integrating AI into existing workflows can be complex, and scaling AI solutions beyond pilot projects remains a key challenge.

25% of healthcare payers, for example, said the biggest challenge with AI and other technologies is scaling automation use cases from pilot to production.<sup>6</sup> For healthcare organizations as a whole, only 10% of interactions are fully resolved with advanced chatbots without the subsequent need to interact with a live agent.

To unlock AI’s full potential, organizations must focus on high-impact areas where automation delivers the most value – such as claims processing, RCM, and provider credentialing. At the same time, it will be critical to invest in new digital processes and workforce training.

Healthcare organizations should consider the following:

**Application modernization:** Legacy systems often lack the agility needed to fully integrate AI-driven automation. By modernizing applications and infrastructure, healthcare organizations can seamlessly embed AI into core operational processes.

- AI-powered tools like intelligent document processing and virtual assistants can help providers and payers reduce manual errors and increase efficiency across functions.

**Cloud infrastructure:** Scaling automation across the enterprise requires a robust, cloud-based foundation that enables seamless AI deployment. Cloud-based automation solutions allow for real-time data exchange, helping payers and providers achieve operational agility.

**Cybersecurity:** As organizations expand AI-powered automation, they must ensure strong governance, security, and compliance to protect patient data and maintain regulatory alignment.

- AI security frameworks must address patient data privacy, bias mitigation, and ethical AI deployment, ensuring that automation enhances efficiency without introducing new risks.

**Digital operations:** AI-driven automation reduces administrative workloads, streamlines claims processing and revenue cycle management, and enables faster, more efficient member support.

- To maximize impact, payer and provider organizations must prioritize solutions that offer tangible, near-term ROI such as SmartCred™ for provider credentialing, which simplifies verification processes and enhances compliance.



# Accelerating Credentialing With Intelligent Automation

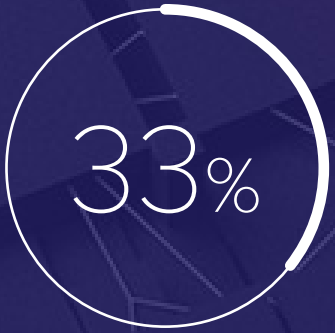
One of the largest commercial health plans in the US was struggling with legacy infrastructure that impacted processing times and accuracy, and contributed to high operating costs, provider churn, and network data gaps.

Sutherland deployed a suite of AI-driven solutions to introduce automation to our client’s operations: first leveraging our proprietary credentialing platform, SmartCred™, to create a tailored solution for automating provider data cleansing and credentialing, and then implementing our automation platform, Sutherland Robility®, to optimize processing times, improve accuracy, and streamline administrative tasks such as job scheduling.

## THE IMPACT:



faster credentialing than  
the industry average



processing with no  
human touch



reduction in  
non-response rates





# The Future of Healthcare in 2025 and Beyond

Healthcare remains a sector ripe for transformation, from patient to doctor, doctor to provider, provider to payer, and payer back to patient. Early adopters of AI technologies – and those who take steps in 2025 to establish the core technological building blocks – will gain a competitive edge, helping drive better patient outcomes through data-driven insights, enhance the patient experience, and streamline critical health processes.

The healthcare providers and payers that leverage AI effectively – and apply it across the value chain – will be well positioned to leapfrog their competitors by reimagining operational processes and enhancing service delivery to move towards a value-based model with patients at its heart.

## Unlocking Digital Performance. Delivering Measurable Results.

At Sutherland, we are a leading global business and digital transformation partner. We work with iconic brands worldwide in Healthcare, Insurance, Banking & Financial Services, Communications, Media & Entertainment, Technology, Travel & Hospitality, Logistics, Retail, Energy & Utilities industries. We bring our clients a unique value proposition through market-leading technology and business process excellence. Leveraging our advanced products and platforms, we drive digital transformation, optimize critical business operations, reinvent experiences, and pioneer new solutions, all provided through a seamless “as a service” model. For each company, we tailor proven and rapid formulas to fit their unique DNA. We bring together human expertise and artificial intelligence. In short, we do digital chemistry. It unlocks new possibilities, great client partnerships, and transformative outcomes.

