WHITEPAPER

Outlook 2026:
The Agentic Healthcare Provider

Introduction:
The Current State of Play

Healthcare providers are facing unprecedented pressure from every direction, putting financial performance under strain.
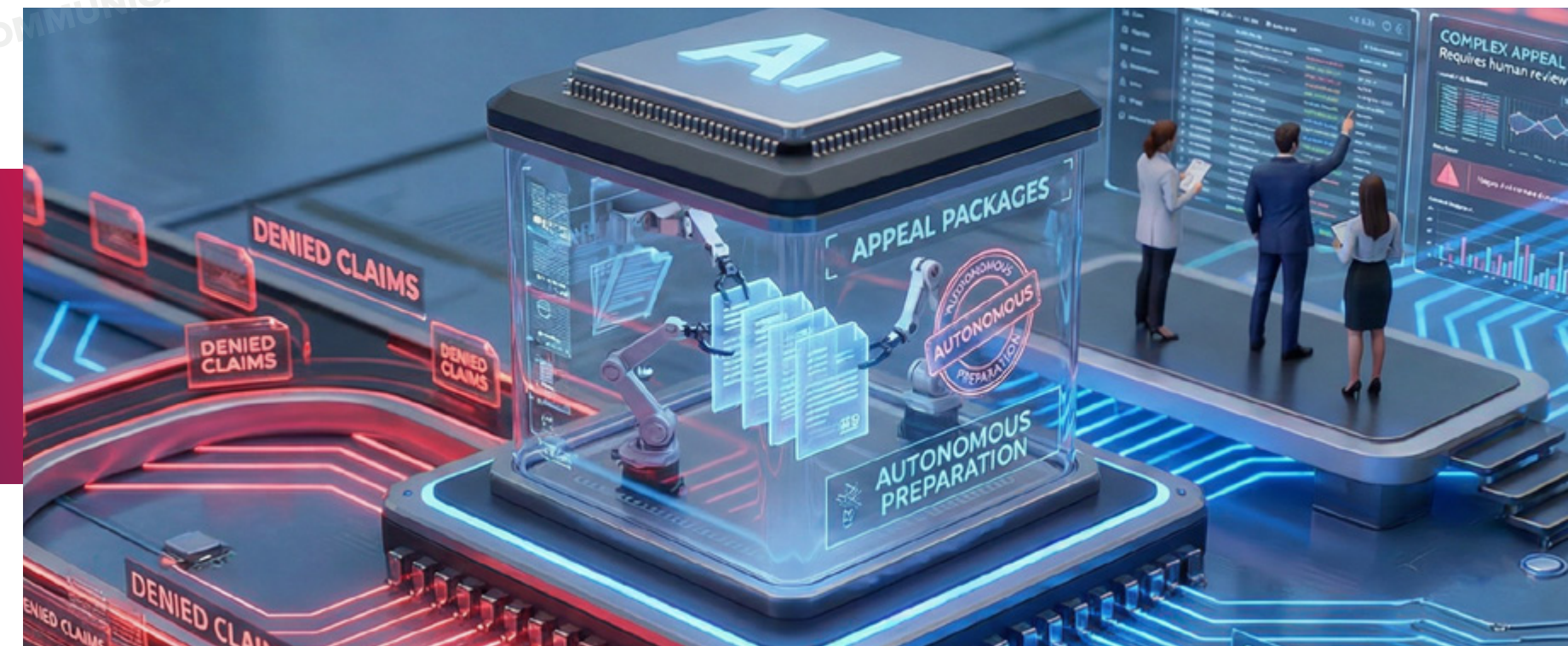
Reimbursement rates are declining. Denial rates are rising. And labor costs are escalating, all while patient expectations continue to grow.[1] At the same time, core revenue cycle operations remain stubbornly manual. Coding, claims submission, prior authorization, and denial management all bottleneck at the human layer.

For many health systems, operating margins are razor-thin or negative, leaving little room for the investments needed to modernize, grow, and enhance patient offerings. And, against this backdrop, the workforce and labor shortage crisis has reached breaking point.[2]

Clinicians spend more time on documentation than with patients,[3] and increasing demands are fueling provider burnout.[4] This exhaustion, in turn, drives turnover, further increasing operating costs, and threatening care quality.[5] Administrative staff are stretched equally as thin, chasing authorizations and appeals while patient volumes grow. In short, the talent pipeline can't keep pace with demand.

Patients have changed too. They expect seamless, digital-first experiences. That means easy scheduling, transparent billing, and proactive communication. When they don't get it, they seek care elsewhere. In a market where consumer choice increasingly shapes healthcare decisions, patient experience has become a competitive differentiator. Yet fragmented systems and siloed data make personalized, connected care difficult to deliver.

> Only 40% of healthcare organizations have an AI strategy in place, even as financial pressure, workforce shortages, and patient expectations accelerate.

1 https://www.modernhealthcare.com/providers/mh-physician-reimbursement-fee-schedule-kaufman-hall/
2 https://nihcm.org/newsletter/rising-healthcare-workforce-shortage
3 https://pmc.ncbi.nlm.nih.gov/articles/PMC8387128/
4 https://pmc.ncbi.nlm.nih.gov/articles/PMC12013355/
5 https://medcoresolutions.com/the-cost-of-turnover-in-healthcare-and-how-medcore-solves-it/

The industry needs a solution, and it isn't as simple as delivering more headcount or incremental efficiency gains. Instead, it's a fundamental reimagining of how operations run: from insight to action, from reactive to autonomous, and from AI-assisted to AI-native.

And that's where agentic AI comes in — intelligent systems that sense, decide, and act autonomously across the revenue cycle, clinical operations, and patient engagement.

Unlike traditional automation, which follows scripts, agentic AI adapts continuously. It learns from each interaction, improving accuracy over time. It connects fragmented workflows into a single intelligent flow, acting without waiting for human handoffs.

The following sections explore three high-impact opportunity areas where healthcare providers can transform, with practical starting points to build momentum.

3 Agentic Opportunities for Healthcare Providers

Opportunity 1:
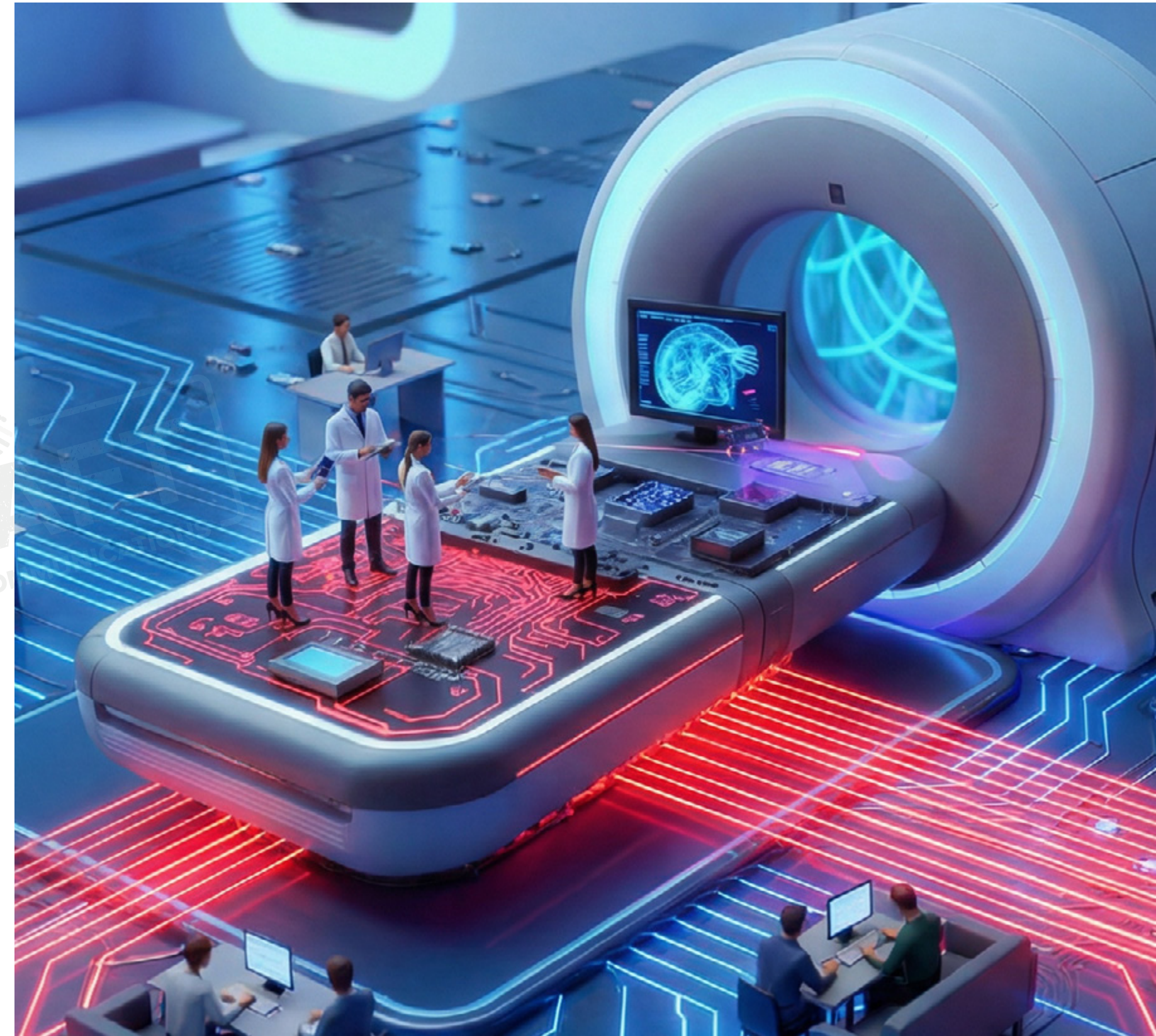### Agentic Revenue Cycle Management

The Challenge

The revenue cycle is the financial backbone of every health system, but it remains labor-intensive, error-prone, and slowed by friction at multiple points:

- Coding teams manually review clinical documentation.

- Eligibility verification requires constant back-and-forth with payers.

- Prior authorization consumes hours of staff time for routine procedures.

- Claims get submitted without sufficient documentation, leading to denials – and the management of those denials remains a manual, reactive process.

The result is far from ideal, causing delays and revenue leakage.

The numbers tell the story: denial rates are increasing, with some payers now rejecting up to 19% of claims on first submission.[6] Appeals require significant amounts of staff time, and many valid claims are never recovered. Meanwhile, provider credentialing delays mean new physicians can't bill for services, which leaves revenue on the table for months.

Legacy systems weren't built for this complexity. The result is high days in accounts receivable, inconsistent cash flow, and finance teams stuck chasing payments instead of planning strategically.
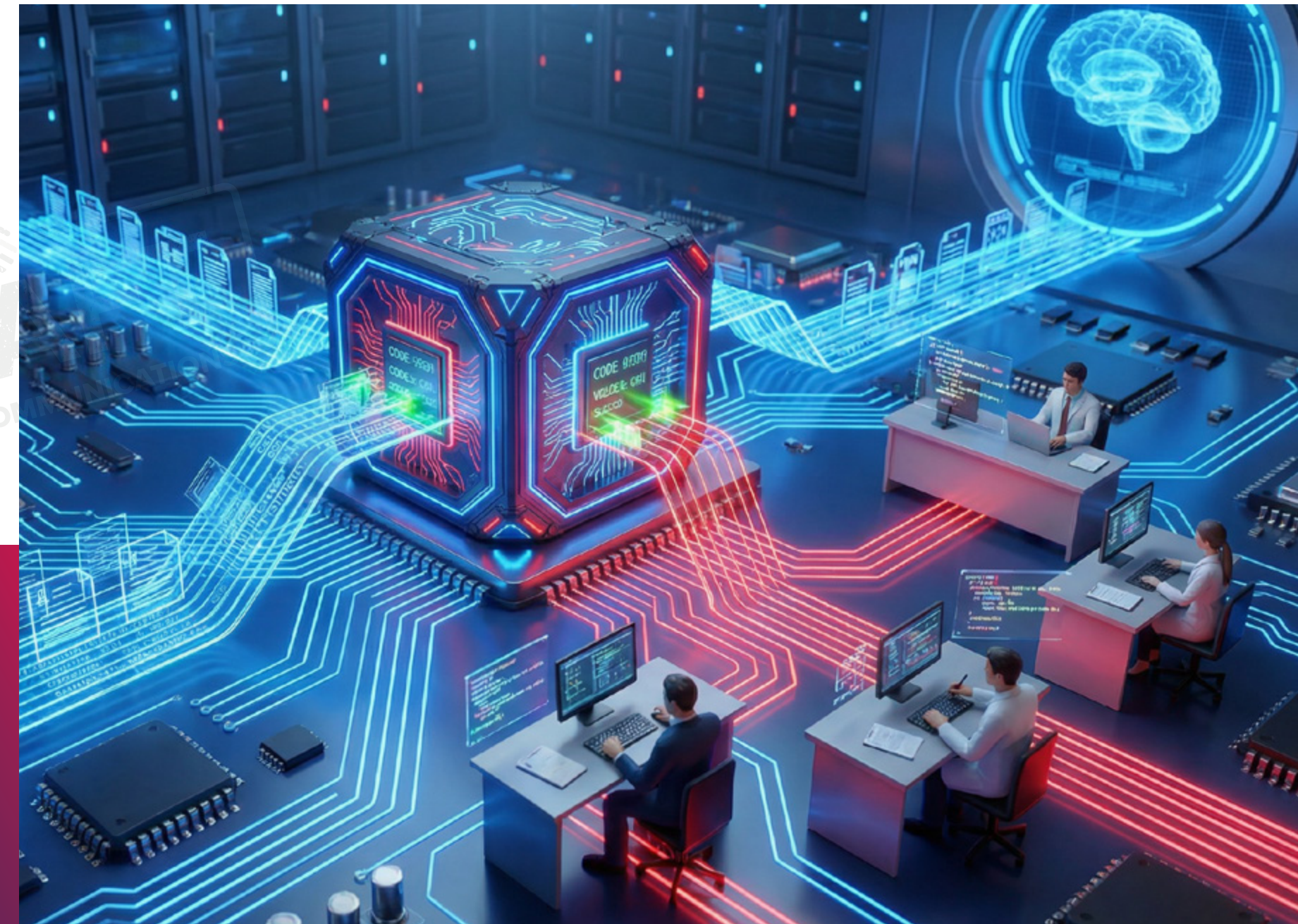
The Agentic AI Opportunity

Agentic revenue cycle management doesn't stop at flagging issues. Rather, it acts across the entire financial workflow:

- **Autonomous coding agents** can review clinical documentation, assign appropriate codes, and flag exceptions for human review, learning from coder feedback to improve accuracy over time.

- **Claims intelligence agents** can predict denial risk before submission, automatically correcting common errors and routing high-risk claims for pre-submission review.

- **Denial management agents** can analyze rejection patterns, prepare appeals with supporting documentation, track outcomes, and continuously refine submission practices to prevent future denials.

- **Credentialing agents** can orchestrate provider enrollment across multiple payers simultaneously, tracking documentation, managing follow-ups, and dramatically reducing turnaround time.

These agents don't operate in isolation. Instead, an orchestration layer coordinates end-to-end, so that when a claim is denied, the system automatically analyzes the reason, prepares an appeal, and tracks resolution without waiting on manual intervention.
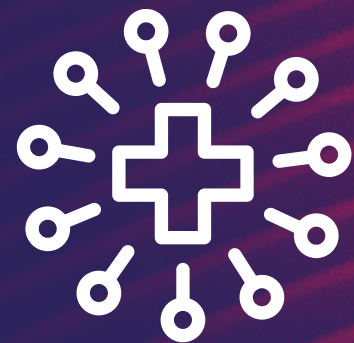

Sutherland's SmartCred® platform cut provider enrollment turnaround by approximately 70% for a major health system with 20+ hospitals, 1,000+ outpatient facilities, and 15,000+ physicians, transforming a cumbersome, paper-based process into an efficient, standardized workflow.[7]

Practical Actions for Provider Leaders

Start with high-friction RCM pain points first. Examples include time-consuming processes like prior authorization, denial appeals, and credentialing, where volume is high and rules are well-defined. These are ideal candidates for AI agents that can act autonomously on straightforward cases while escalating exceptions. Use a digital assessment and advisory framework to identify where autonomy will deliver the fastest margin impact.

Deploy AI pre-submission review. The goal is to catch coding errors and documentation gaps before claims go out. First-pass acceptance rates improve when errors are corrected proactively. This requires unified, high-quality billing and clinical data enabled through data engineering foundations.
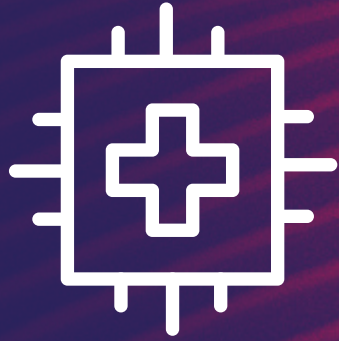
Automate provider enrollment and credentialing: Replace manual, paper-heavy workflows with standardized, AI-orchestrated credentialing, enabling faster payer onboarding, fewer follow-ups, and dramatically shorter time-to-bill for new providers.

Establish feedback loops. Ensure that human coders and billers review AI decisions and train the models. This human-in-the-loop approach builds trust while continuously improving accuracy.

Create a real-time provider–payer exchange layer: Improve eligibility verification, authorization tracking, and claim status visibility by automating healthcare data exchange through an E-Hub platform, reducing delays caused by fragmented payer portals and manual outreach.

Integrate AI agents with existing EHR and practice management systems via APIs. Legacy system integration is often the first hurdle; modernization and migration strategies can address this systematically.

Define success metrics. These metrics may include first-pass claim acceptance rate, days in AR, denial overturn rate. Tangible improvements in your KPIs translate directly to margin gains.

Opportunity 2:
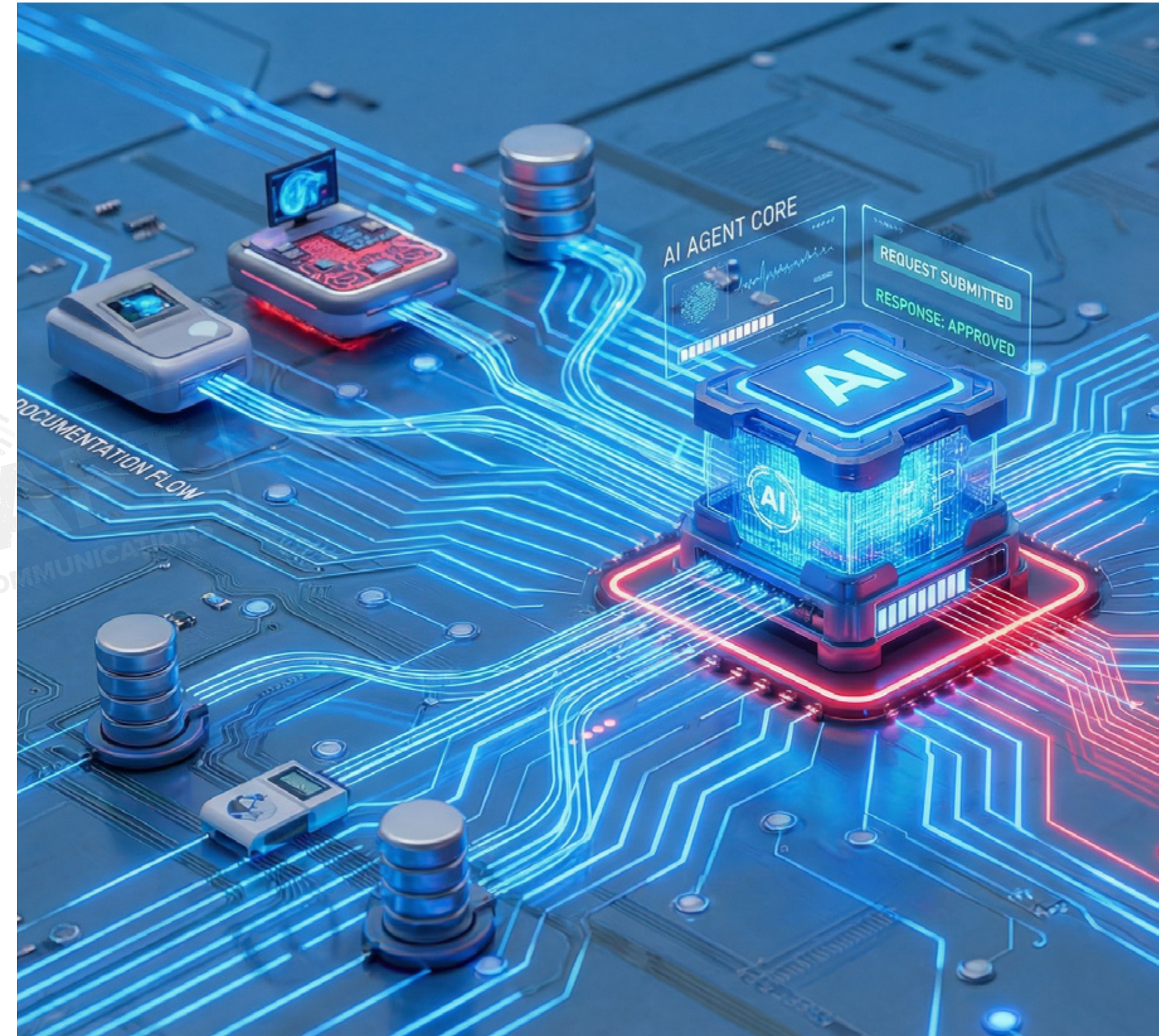## Agentic Clinical and Administrative Operations

The Challenge

Clinicians are drowning in administrative work, and it's damaging the healthcare industry from the inside.

Documentation has become the dominant activity of clinical practice. Some physicians spend more time on EHRs than with patients, and the "pajama time" problem of finishing notes at home after hours has become endemic.[8]

Moreover, prior authorization requirements force clinical and administrative staff to spend hours on the phone with payers for routine procedures, and scheduling inefficiencies lead to no-shows and underutilized capacity.

Meanwhile, quality reporting, compliance documentation, and regulatory requirements add layer upon layer of administrative burden. Workforce shortages mean fewer people to handle growing demands. Burnout drives turnover, which increases the load on those who remain. It's a cycle that traditional approaches can't break.

The Agentic AI Opportunity

Agentic clinical operations act across administrative workflows instead of simply providing surface insights.

- **Ambient AI documentation agents** can capture clinical encounters in real time, generate notes, and update EHRs, returning documentation time to direct patient care.

- **Prior authorization agents** can autonomously gather required clinical documentation, submit requests, track status, and escalate only when human judgment is truly needed.

- **Intelligent scheduling agents** can predict no-shows based on historical patterns, optimize provider schedules, match patient needs to available slots, and proactively reach out to fill gaps.

- **Compliance and quality agents** can monitor for documentation completeness, flag missing quality measures, and ensure regulatory requirements are met continuously rather than scrambling at audit time.

> Organizations moving toward agentic clinical workflows report measurable reductions in documentation time and improvements in clinician satisfaction, addressing burnout at its administrative root.

These agents work together, coordinated by an orchestration layer that ensures nothing falls through the cracks.

Practical Actions for Provider Leaders

Pilot ambient documentation. Start in high-volume specialties where the documentation burden is greatest. Primary care, emergency medicine, and hospitalist programs are strong candidates. Deploy agents that generate notes in real time while clinicians retain final review, supported by digital assurance to validate accuracy and safety.

Mix automation with human assessment. Automate prior authorization for routine, rules-based requests while preserving human review for complex cases. The goal is to eliminate unnecessary friction, not bypass clinical judgment.
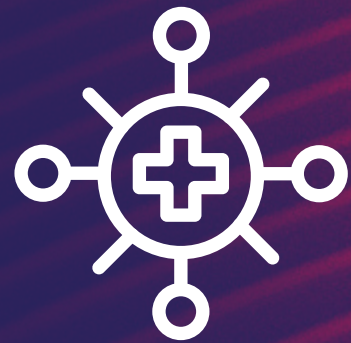
Leverage smart scheduling. Deploy scheduling agents that learn from historical no-show patterns and patient preferences. Proactive outreach to fill cancellations improves capacity utilization without adding staff.

Modernize clinical and administrative systems for agent access: Legacy EHR and scheduling platforms often block real-time action. Use the modernization and migration framework to expose workflows and data via APIs so agents can operate safely within clinical guardrails.

Account for secure scalability. Ensure your cloud environment can scale securely as AI workloads expand. Clinical data demands the highest standards of performance, compliance, and security. Build and optimize secure environments for agentic workloads using cloud infrastructure designed for regulated healthcare data.

Measure workforce impact. Measure documentation time, overtime hours, clinician satisfaction, and turnover rates to quantify how agentic operations reduce burnout and stabilize the workforce over time.
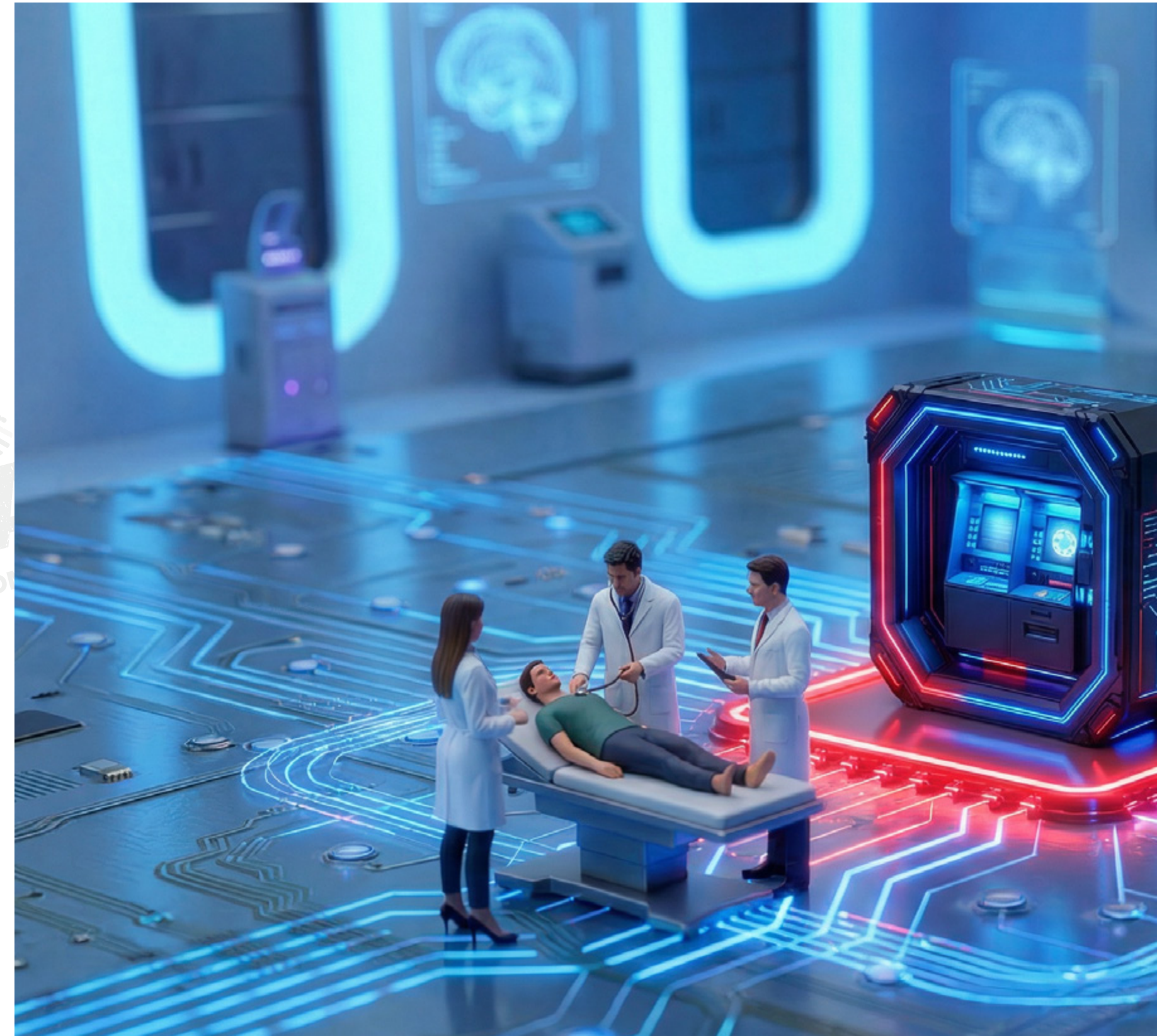
Opportunity 3:
Agentic Patient Access and Experience

The Challenge

Patients have been trained by their interactions in every other industry to expect seamless digital experiences, but healthcare is struggling to deliver.

Care navigation is fragmented, with patients struggling to find the right provider, schedule appointments, understand their bills, and coordinate across specialists. Access is also inconsistent, resulting in long wait times, limited digital self-service options, and phone trees that test patience.

Unsurprisingly, support teams are overwhelmed, and patients feel like they're starting from scratch at every touchpoint.

No single system sees the whole patient journey. Scheduling, clinical, and billing systems operate in silos, each with a partial view. This makes personalized engagement nearly impossible and the kind of proactive outreach that keeps patients engaged exceedingly rare. The result is missed appointments, incomplete care journeys, and patients who disengage entirely.

The Agentic AI Opportunity

Agentic engagement orchestrates patient access and experience across channels, 24/7.

- **Digital front door agents** can guide patients from symptom to scheduled appointment: triaging needs, recommending appropriate providers, handling scheduling autonomously, and answering common questions in real time.

- **Care navigation agents** can help patients understand their care journey, coordinate across specialists, send proactive reminders, and intervene when patients fall off track.

- **Billing and financial experience agents** can explain charges, offer payment plans, and resolve billing questions, reducing call volume and patient frustration.

- **Proactive engagement agents** can detect disengagement, such as missed appointments, incomplete care plans, or lapsed follow-ups, and intervene with personalized outreach.

Sutherland built a virtual care coordinator model for a large U.S. physical therapy provider with 200+ clinics, blending trained human representatives with AI-powered digital workflows across voice, chat, and SMS. The result was that missed-session rates dropped below 5%, and patient satisfaction averaged 4.9 out of 5.

These agents learn which interventions work. They adapt communication channel, timing, and tone to individual patient preferences. And they hand off seamlessly to human staff when complexity requires it, with full context preserved.

Practical Actions for Provider Leaders

Deploy conversational AI. Use contextualized automation and self-service capabilities for patient intake, scheduling, and FAQ resolution. This frees up staff for complex inquiries while providing patients with immediate, always-available service.

Integrate patient access systems. Connect scheduling, EHR, and billing, so AI agents have full context at every touchpoint. This often requires modernizing or connecting legacy applications. Application modernization strategies can bridge these gaps.
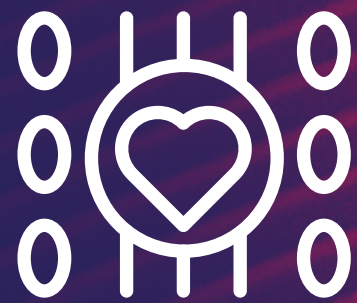
Build a true digital front door. Create or extend applications that orchestrate the patient journey from first touch to follow-up. Custom application development can create these capabilities tailored to your patient population.

Operationalize personalized engagement: Adapt outreach timing, channel, and tone based on patient behavior and preferences, learning what interventions reduce missed appointments and drop-offs. Leverage interaction data through AI-powered analytics to continuously refine engagement strategies.

Establish clear escalation paths. When AI can't resolve an issue, handoff to human staff should be seamless and include full context. Patients should never have to repeat themselves.

Track patient experience metrics. Monitor access wait times, digital engagement rates, and satisfaction scores. In a competitive market, these numbers predict growth.

The Road to the Agentic Healthcare Provider

The agentic healthcare provider isn't a far-off vision. It's already emerging Industry disruptions — managing revenue cycle complexity, addressing workforce burnout, meeting patient expectations for digital-first experiences — are daunting. But they present an opportunity to lead healthcare's next evolution. In every age of healthcare transformation, provider organizations that innovated in delivering care and operational efficiency captured and held the advantage. This era is no different, except the innovation isn't a new treatment or facility; it's a new mode of operating, where intelligence becomes operational and adaptive in every process.

Agentic capability relies on the right foundational elements. Explore Outlook 2026: The Road to the Agentic Enterprise **for the fundamentals every organization needs.**

Start with high-impact pilots:

- Deploy an AI coding and denial management engine in the revenue cycle.

- Pilot ambient documentation with a high-volume clinical specialty.

- Roll out a patient access chatbot for scheduling and FAQs.

Tangible wins in efficiency, accuracy, and experience will build momentum for broader transformation. Targeted initiatives will yield immediate ROI while laying the groundwork for scaled capabilities.

Healthcare providers that thrive in 2026 and beyond will be the ones driving change, not reacting to it. Agentic AI turns the revenue cycle, clinical operations, and patient experience in your favor, if you're willing to pull the lever.

Disruption is inevitable. Make it intentional.

Artificial Intelligence. Automation. Cloud Engineering. Advanced Analytics. For Enterprises, these are key factors of success. For us, they're our core expertise.

We work with global iconic brands. We bring them a unique value proposition through market-leading technologies and business process excellence. At the heart of it all is Digital Engineering Services — the foundation that powers rapid innovation and scalable business transformation.

We've created 363 unique and independent inventions, 250 of which are AI-based and rolled up under several patent grants in critical technologies. Leveraging our advanced products and platforms, we drive digital transformation at scale, optimize critical business operations, reinvent experiences, and pioneer new solutions, all provided through a seamless "as-a-service" model.

For each company, we provide new keys for their businesses, the people they work with, and the customers they serve. With proven strategies and agile execution, we don't just enable change — we engineer digital outcomes.

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