BLOG POST

Are tech gaps draining your revenue? Here's what you need to know

By Michelle McNickle   •   April 16, 2025

We broke down the top payment pitfalls stopping you from realizing revenue and value-based care reimbursements.

Clinical   Operations   Patient Engagement   Value-Based Care

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Healthcare payments are at a crossroads.

Leaders looking to develop and maintain financial sustainability in 2025 have their work cut out for them. Resource constraints, value-based care reporting, increased patient expectations and impending policy changes have created a critical juncture which will no doubt shape the future of care delivery.

And, of course, let's not forget about technology.

In a saturated market with many claiming to "optimize and streamline," organizations are instead finding themselves victims of subpar solutions that don't cut it when it comes to closing gaps. Although some believe more is better, it's become common to maneuver around tech stacks made up of multiple vendors who still can't deliver on processes that truly generate revenue.

Instead, clunky interfaces and a lack of true automation have exacerbated care gaps when it comes to data gathering, patient engagement and collections, creating more of a burden for leaders looking to create financial viability. In turn, full reimbursements and revenue aren't realized—a predicament no practice can afford in the current healthcare climate.

Mind the gaps: Why revenue and reimbursements fall short

Today's care gaps are multifaceted and require patient engagement at all points of the care journey: before, during and after their visit. Layer in the move from fee-for-service to value-based care—along with a tech vendor who can't quite deliver—and care gaps are only magnified.

Patient engagement is the cornerstone of success when it comes to value-based care contracts, making it critical for practices to prioritize access, communication and education to maximize incentives. However, organizations often sacrifice dollars due to:

- Lack of regular communication or proactive outreach
- Long wait times
- Cumbersome scheduling
- Under-used patient portals, limiting care management
- Inaccurate or incomplete data collection

Gaps in data also hinder revenue generation for practices pursuing value-based care contracts or collections in general. Complete data collection and detailed reporting is needed to demonstrate compliance with quality measures and outcomes. This makes it essential for tech vendors to create tools that engage and promote consistent use among patients. Plug-and-play doesn't cut it anymore, while automation in its truest form is a rarity.

Instead, to actually close gaps in care when it comes to engagement, data collection and payment, organizations need functionality that truly delivers within a value-based care climate. For instance, high patient usage rates, customization, dedicated support—and of course, automation—are just a few things that a best-in-class solution should offer to close various care gaps and successfully drive revenue—while creating a partnership that results in realized reimbursements.

Is your **tech stack leaving $$** on the table?
GET OUR CHECKLIST
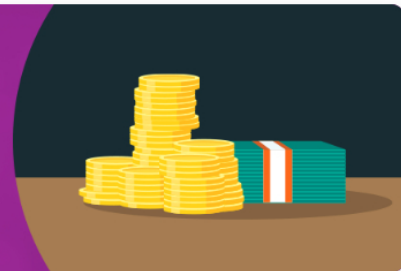
Engage. Schedule. Profit.

Plainly put, communications and access to care are make-or-break when it comes to getting paid. Getting patients in the door is the critical first step for care to be delivered. Gaps in engagement and communications translate into no-shows and lost revenue, while missed appointments means less uptake of preventive care—and, of course, less reimbursements paid out.

For practices looking to collect the most dollars that they can, their suite of communication tools and patient engagement strategy needs to deliver...on a lot. For example, email and text is now table stakes when it comes to patient communication, along with self-scheduling functionality that doesn't include a portal log-in. Did you know:

- 61% of patients **admit to skipping appointments** because of "scheduling hassles"
- 70% claim they tried to make appointments online via apps, portals or websites and are instead redirected to call a phone number

Best-in-class solutions enable patients to schedule on their own time, while also employing AI to fill open appointment slots and rebook cancellations or no-shows. In turn, access is promoted, and patients are seen earlier.

Although scheduling capabilities are touted among many of today's top tech vendors, Phreesia understands the importance of **access and engagement at the right point of care**. This creates the lowest barrier to entry for patients looking to schedule. And while patients can easily request or self-schedule online, providers also maintain control of their calendars through Phreesia's customizable logic.

Phreesia's online forms direct patients to the right visit type, provider and location for their needs. Plus, users can assign question sets to unique self-scheduling links.

The right tech vendor also facilitates custom form builds and offers curated content

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Simplify data collection, supercharge PROs

Gaps in data and PROs connect directly to payer reimbursements—without the right information and outcomes to report, organizations can't collect. Gathering patient information is easier said than done, while automation is now considered a best practice since it makes the process of fulfilling contracts easier.

Today's payer data requirements are truly cumbersome, but thankfully, Phreesia's **data collection functionality** makes us pros at collecting PROs—patient reported outcomes, that is. Our library of more than 100 PROs and clinical screening tools allows users to collect clinical data in the most efficient way possible since questions are administered during intake. Phreesia also lets users make questions required so they can dictate what's necessary to meet certain value-based care measures.

Collecting and scoring PROs ahead of time saves users around three hours of staff time for every 100 questionnaires administered through our platform.

Maximize collections and drive quality measures

Lastly, delayed or missed patient payments disrupt cash flow, while staff time is spent chasing down what's owed. Gaps in workflows create more administrative work and less transparency. The climbing costs of today's supplies and wages make it crucial for organizations to maximize all revenue streams—beyond value-based care agreements—and look for ways to improve profitability.

Easy payment options and insight into copays **strongly influence various value-based care goals**; satisfied patients are often the most engaged, while flexible payment options reduce financial barriers to care. Providing clear billing information and flexible payment methods builds trust and reduces confusion, while also helping practices manage operational costs effectively.

Phreesia **verifies patients' insurance coverage** and presents patients with clear copay and balance information before, during and after their visit. Payments are made easier for patients through digital statements that are sent via email and text as soon as they become due. Not to mention, automated reminders help keep balances top of mind.

Patients have access to simple payment options through Phreesia, like:

- Card stored on file
- Apple Pay
- Google Pay
- Payment plans

Bridge gaps and achieve your goals

Closing gaps, meeting quality measures and getting reimbursed is a tall order for primary care practices and healthcare organizations, making their tech vendor of choice a critical component of their strategy. Payment pitfalls occur all too easily because of a lack of automation, cumbersome data collection and dated ways of communicating and engaging with patients. Instead, Phreesia acts as a true partner in meeting value-based care measures by collaborating with clients to realize reimbursements—all while closing gaps in care.

Are your solutions making the cut?

Request a demo

Let us show you how Phreesia provides the modern, convenient healthcare experience your patients want and your staff expect.

Type of organization*

First name*

Last name*

Work email address*

Work phone number*

Name of organization*

Which systems does your organization use?*

How did you hear about Phreesia?*

What challenges are you hoping to solve?
- ☐ Reduce staff burnout
- ☐ See more patients
- ☐ Increase revenue
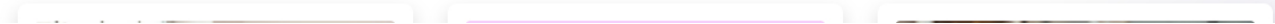- ☐ Better patient experience

Are you a patient? ◯ NO

SUBMIT

If you're a patient, do not submit this form. Instead, please visit our **Patient FAQ**.

By submitting this form, you agree to Phreesia's **Privacy Policy**

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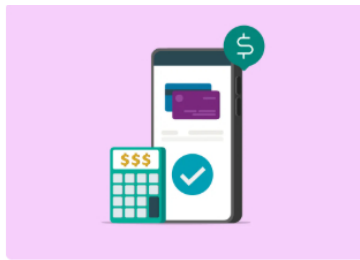
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