



## Veradigm Survey: Independent Practices Rely on Technology to Stay Independent

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*Almost 80% say technology is essential for independent practices to stay independent*

CHICAGO--(BUSINESS WIRE)--May 6, 2026-- Veradigm® (OTCMKTS: MDRX), a leading provider of clinical and revenue cycle solutions for independent practices, today released findings from a nationally distributed survey of 360 independent practice leaders, conducted in March 2026. The survey respondents resolved to remain independent and are counting on technology as a critical lever to drive practice performance.

### Technology Is Critical to Support Independent Practice Growth

The survey found that despite real and growing pressures with rising costs, shrinking reimbursements, and mounting administrative burden, independent practices remain optimistic. They see technology, not consolidation, as the path forward:

- **79%** say technology is very or extremely important to their practice's ability to remain independent
- **57%** believe better automation would provide significant or major improvement to their practice
- **Top technology priorities** include reduced administrative burden (prior auth, documentation, billing), better revenue cycle visibility and faster denial resolution, and improved payer data visibility for value-based care readiness

"Our mission at Veradigm is to help independent practices stay independent," said Donald Trigg, CEO of Veradigm. "In our survey, almost 80% say technology is pivotal to their long-term financial and operational performance. We are committed as ever to delivering solutions that can help practices deliver high quality, affordable care."

### Operational Efficiency, Revenue Cycle Are Major Focus

"The healthcare industry's ability to secure higher reimbursement rates is constrained, so as costs rise, our most reliable lever is operational efficiency—streamlining processes to decrease and control expenses while maintaining quality," said Juliet Breeze, MD, CEO & Founder Next Level Medical.

The survey indicates revenue cycle performance is a critical focus, and a key area where practices are actively seeking solutions:

- **68%** have only moderate or limited real-time visibility into their accounts receivable status, leaving practices unable to respond quickly to revenue cycle erosion
- **48%** report increased claim denial volumes
- **41%** do not learn about denied claims for one to two weeks, and only 8% receiving real-time notification

### Value-Based Care Preparedness Is High, Operational Infrastructure Is the Opportunity

The survey reveals that while independent practices are engaged with value-based care, the gap between willingness and operational capacity to participate in value-based programs remains wide. The core obstacle is not motivation, but manageability:

- **62%** report feeling prepared to succeed in value-based or risk-based reimbursement models
- **56%** rate payer collaboration as very or extremely effective
- **49%** cite administrative requirements as their top barrier to VBC participation

Practices also point to limited data sharing, difficulty tracking quality measures, and inadequate analytics as compounding challenges. Many practices describe their visibility into payer requirements, quality metrics, and care-gap opportunities as only moderate or limited, making performance management reactive rather than proactive.

### About the Survey

The survey was conducted in March 2026 among 360 independent practice leaders across the United States. Respondents included physicians and physician owners (59%) and practice administrators, VPs, and C-suite executives (41%), representing 11 specialties and four geographic regions. All respondents were screened to confirm they were not affiliated with any hospital system, health system, or integrated delivery network.

[Click here](#) to read the full survey report.

### About Veradigm®

Veradigm has a proven history of delivering clinical and revenue cycle solutions that help independent practices improve outcomes and financial performance. Our AI-forward data and technology also help over 20,000 provider practices connect with health plans and biopharma to eliminate inefficiencies, close care gaps, and create a more affordable health system.

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