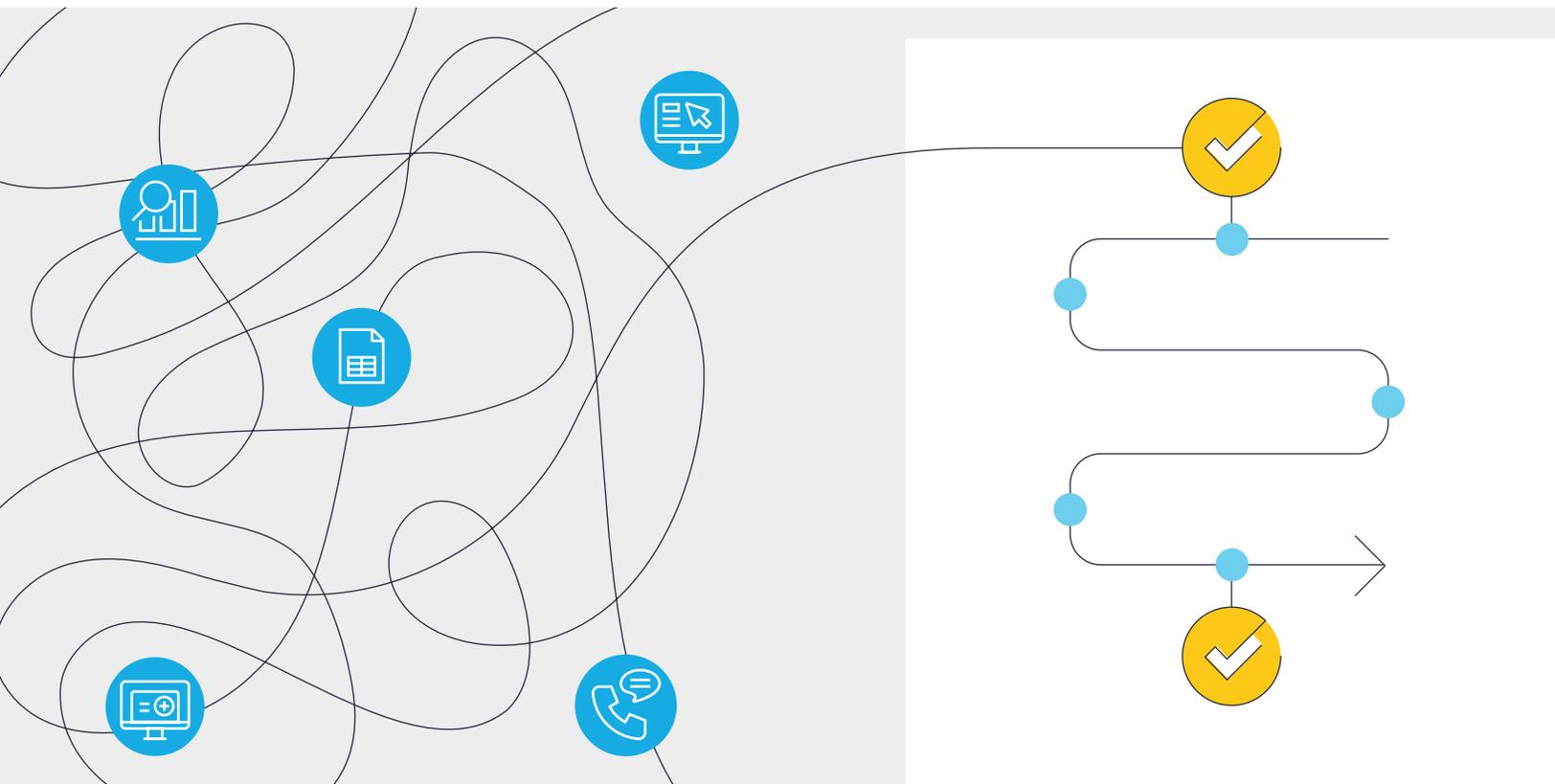


EBOOK



# Taming RCM Vendor Complexity



## Executive Summary

Adding RCM vendors can feel like forward motion—a way to address gaps and strengthen revenue cycle operations. But the reality for many health systems is a growing storm of complexity: overlapping partners, unclear accountabilities, and rising costs. Too often, what started as progress turns into complexity disguised as performance.

This e-book explores how vendor sprawl happens, why it persists, and how to shift from reactive management to strategic clarity. Spoiler: there's no single fix—but there is a path forward grounded in visibility and alignment.



## When Vendors Multiply Without Strategy

Untangling vendor complexity can feel overwhelming—chaotic at first glance, but ultimately revealed as layers of misaligned processes and scattered ownership.

If you've ever tried to untangle your RCM vendor landscape, you know the feeling.

### A Fragmented Reality



**A recent report found that 73% of leading health systems are using four or more RCM vendors.**

That's a lot of moving parts, and, let's be honest, a lot of contracts to manage. What appears to be progress can quickly turn into complexity and confusion.

It's common for different vendor services to overlap. In fact, it's more common than not. One vendor manages pre-auth. Another helps with denials. A third cleans up bad debt. But what if your denial problem isn't actually a denial problem at all? It's a pre-auth issue that was never addressed upstream.

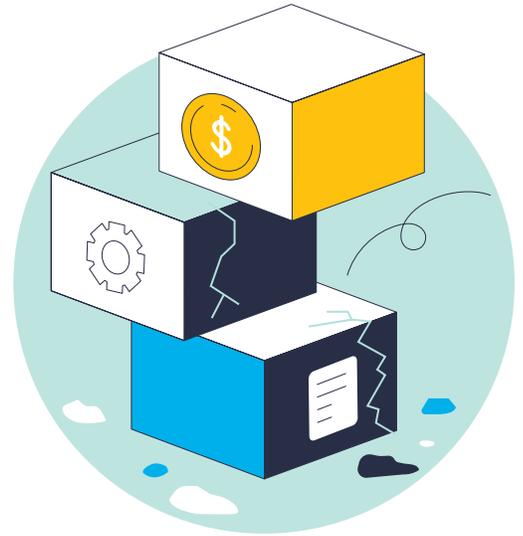
Layering in more vendors can treat the symptom without touching the root cause. And suddenly, you're paying multiple companies to chase the same issue from different angles.

# Introducing: Vendor Debt

Vendor debt is the RCM version of [technical debt](#): too many patches, not enough architecture. It builds up when new solutions are stacked on top of old ones without a clear plan. Over time, no one remembers:

- **Why a vendor was brought in**
- **Whether they're delivering value**
- **Who's accountable for outcomes**

You're left with a list of partners, but is there partnership? And what do you do about that lingering sense that something isn't working without a clear path forward?



## How Vendor Debt Happens

Revenue cycle leaders are tasked with solving incredibly complex problems under enormous pressure. But they aren't vendor management experts—and they shouldn't have to be. Too often, decisions are made based on whether a solution can pass through IT security parameters and squeeze into the budget. That's a necessary filter, but it's not a strategy.

**Vendor Debt can come from a whole host of reasons, including:**



### 01 People Turnover

Respondents to a [recent survey](#) reported turnover rates for administrative roles related to patient access, RCM, and the patient experience in the double digits, significantly higher than the U.S. average turnover rate.

How does that translate to RCM vendor management? RCM leaders leave, and their vendor decisions leave with them. "Bill built that." "Karen brought that in." No documentation, no ownership—just legacy contracts and unclear value.

### 02 No Succession Planning

New leaders inherit the vendor roster like a house with hidden crawlspaces. There are patches everywhere, but no blueprint on file. Small decisions made in isolation become expensive problems over time.

### 03 Siloed Procurement

Without a connected strategy, vendors sometimes get approved based on who can pass security or slide under a budget threshold rather than whether they solve the greater challenge.

### 04 Vague Contracts, Fuzzy Value

Different terms, pricing models, and KPIs. Many vendors aren't great at explaining what they do, and even fewer tie it back to meaningful results.

## The Hidden Cost of Complexity

More vendors don't necessarily equal more value. In fact, they often create blind spots:

- **Redundancy and duplication**
- **Gaps in accountability**
- **Inefficiencies that drain performance**
- **A foggy picture of what's working**

When there's no system-wide visibility, things fall through the cracks—or get paid for twice.



## The Strategic Path Out

The solution is clarity, accountability, and the discipline to align vendors with strategy.

Every contract is more than the cost. It's a signal about how your organization operates. Right now, health systems can't afford bloat disguised as performance.

You've discovered the problem—now it's time to act.

### Don't Wait for Permission

Start grassroots. Bring answers, not just questions. Demonstrate to the CFO how you can consolidate contracts, reduce spending, and increase performance. That's how trust is built and how momentum starts.

**Use this checklist to guide your team through the next phase: strategic cleanup.**



## TOOLKIT

# Vendor Clarity Checklist

## Breaking Free from RCM Vendor Debt: A Practical Guide

Before adding another vendor, pause. Use this checklist to bring discipline, visibility, and alignment to your vendor strategy.

### 01 Inventory Every Vendor

Don't rely on memory or procurement lists. Pull data from IT, Finance, and Operations.

- Who are we paying?
- For what specific service?
- Under what terms?

### 02 Assess What's Working (and What's Not)

Each vendor should have a defined goal, an owner, and a measurable budget. Review not just whether a vendor delivers what they promised, but whether that's still what you need.

- Why were they brought in?
- Who is managing them?
- Are we tracking outcomes?
- What are their KPIs?
- Is their performance lagging behind, meeting, or exceeding expectations?
- Is the service still needed?

### 03 Identify Overlaps & Redundancies

Cross-reference responsibilities and outcomes.

- Are two vendors solving the same issue?
- Who is underperforming?
- Where is the overlap?

### 04 Look for Untapped Capabilities and Areas for Consolidation

You may already be paying for more than you use.

- Are there features/modules we're ignoring?
- Can this vendor replace others?

### 05 Assess Automation Opportunities

What can be digitized to save costs or streamline workflows?

- What's still manual?
- Could automation replace vendor labor?

### 06 Create a Vendor Succession Plan

Document everything from purpose to results.

- Who brought the vendor in?
- What problem were they solving?
- What's the transition plan?

### 07 Prepare a Strategic Business Case

Use real numbers to make your case.

- What would we save by consolidating?
- What performance gains could we expect?

### 08 Revisit Annually—Not Just at Renewal

Make vendor management a living part of your RCM strategy.

- Have our needs evolved?
- Is this vendor evolving with us?

# It's Time to Get Your Arms Around Vendor Debt

At Revology, we help health systems bring clarity and confidence to their RCM strategy. It's not about adding more complexity—it's about making deliberate choices that drive real performance.

**CONNECT WITH REVOLGY**

to build an RCM strategy  
that delivers results.



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