2025 Predictions
The Increasing Importance of Connected Health in 2025

As medical practices face increasing costs and demands for services, tech-enabled solutions like wearables, AI, and "virtual care teams" provide game-changing cost efficiency and flexibility.

Healthcare providers are under unprecedented pressure in 2025.

Rising labor costs, increased administrative burdens, and tighter reimbursements are shrinking margins, while patients expect more accessible and personalized care.

However, forward-thinking practices are thriving by leveraging Connected Health technologies, including Remote Patient Monitoring (RPM), Chronic Care Management (CCM), and telehealth solutions.

Connected Health offers innovative solutions to drive efficiency, improve patient outcomes, and increase profitability.

Challenge #1: Retailers like WalMart Health and VillageMD learned what providers already knew: healthcare is hard.

They came in like a flash and left just as quickly: retail healthcare providers are the giants that have rocked the primary care field in recent years. Their recent shut-downs have left the rest of us wondering who can succeed - and how.

Key Lessons from Their Struggles:

- **Thin Margins in Primary Care:** Retail giants underestimated the revenue challenges tied to primary care, which historically operates on razor-thin margins and shrinking CMS MSSP reimbursements.

- **High Operational Costs:** Physical clinic expansions strained budgets, especially in a market with escalating labor costs, real estate costs, and administrative burdens.

- **Need to Nurture Patient Trust:** Medicare-age patients value continuity and personalized care. If they don't trust their provider, they may provide low pat sat scores, switch providers, ignore medical advice, or use unnecessary and costly emergency services.

Takeaway: Success in patient care is not just about convenience or technology. For a practice to succeed, it requires a people-first approach focused on high operational efficiency, personal trust, and administrative expertise.

Solution #1: Modern healthcare players know the future is in flexible care delivery.

Flexible care delivery models are redefining healthcare, emphasizing personalized, patient-centric approaches that reduce costs and improve outcomes.

These models leverage technology to deliver care where and when patients need it, reducing dependency on traditional, in-person visits and creating a more adaptive system for managing chronic conditions, preventing acute incidents, and enhancing recovery. Types include:

Remote Patient Monitoring (RPM)
RPM uses connected devices such as blood pressure cuffs, glucose monitors, and wearable trackers to collect and transmit patient health data to providers in real time. This technology empowers providers to track patient health proactively, addressing issues before they escalate.

Medicare reimburses providers for RPM services, creating a significant revenue stream. Additionally, practices using RPM report reduced hospitalizations, which enhances their performance in Medicare Shared Savings Program (MSSP) participation.

As noted by KLAS Research, "RPM is helping patients with chronic conditions manage their health while allowing providers to monitor patient populations more efficiently, reducing the risk of hospitalization and emergency room visits."

Chronic Care Management (CCM)
CCM focuses on coordinating care for patients with multiple chronic conditions through regular check-ins, care plan management, and education to improve adherence. This approach increases practice revenue through monthly Medicare reimbursements while offering a structured method of care that benefits both patients and providers.

Studies show that CCM enhances medication adherence, reduces hospitalizations, and improves quality of life for patients with complex needs.

> Small practices, with their adaptability and focus on personalized care, are well-positioned to succeed where larger players faltered.

Medify's Winning "People-First Virtual Care" Connected Health Model

Increases Data & Insights	Increases FFS Revenue	Increases Patient Satisfaction	Increases Office Visits	Increases MSSP Payments	Increases Technology
Medify is EHR-agnostic, driving patient data and insights of patient care needs to your existing platform.	Medify virtual care team calls are covered by Medicare, increasing a provider's annual FFS revenue.	Medify seems like an extension of your team, increasing caring outreach from your practice.	Medify's appointment reminders and ongoing coaching increases patient in-office visit adherence.	Medify's preventive care reduces emergencies and increases quality scores, increasing reimbursement.	Medify is a people-first virtual care service based on wearables and related technology, giving your practice a modern edge.

At-home Care

At-home care delivers services such as rehabilitation, health monitoring, and medical check-ins directly in a patient's home. This model allows patients to recover faster and more comfortably while enabling providers to maintain continuity of care without increasing the strain on clinic resources.

At-home care also reduces reliance on costly inpatient settings, significantly lowering the overall cost of care.

Telehealth

Telehealth services enable virtual consultations, allowing providers to assess and treat patients remotely. This approach is especially valuable for routine follow-ups and managing chronic diseases. According to Deloitte Insights, "More than half of surveyed consumers prefer virtual health solutions for convenience and accessibility, especially for routine visits and managing chronic conditions."

Flexible care delivery solutions are more than just tools. They are transformative strategies for healthcare providers facing operational and financial pressures.

Flexible Care Revenue Growth and Cost Savings

- Medicare reimbursement for RPM ranges from $54-$118 per patient per month. Practices with 100 Medicare patients on RPM could generate over $100,000 annually.
- CCM services can bring in $40-$50 per enrolled patient monthly, adding tens of thousands in recurring revenue.
- Practices using telehealth and RPM report reduced no-show rates and fewer unnecessary hospital admissions, cutting costs significantly.

A rural family practice integrated RPM and CCM for its Medicare patients, reducing hospital readmissions by 25% and generating an additional $150,000 annually. Telehealth adoption further expanded patient access without increasing physical office strain.

Other Flexible Care Benefits:

- **Managing Rising Patient Volumes:** As Medicare beneficiaries grow in number, RPM and telehealth allow providers to serve more patients without overwhelming their staff.
- **Enhancing Efficiency and Reducing Burnout:** Automating data collection and care coordination alleviates administrative workloads, helping providers focus on patient care and maintain work-life balance.
- **Improving Patient Loyalty:** Patients receiving personalized, technology-enabled care are more satisfied and less likely to seek services elsewhere.
- **Driving Financial Sustainability:** Reimbursement opportunities for RPM, CCM, and telehealth provide stable revenue streams that offset rising costs.

When combined, RPM, CCM, telehealth, and in-office visits create a comprehensive care delivery ecosystem. This integrated approach ensures patients receive proactive, continuous, and convenient care—driving better outcomes and stronger financial performance for practices.

Flexible care delivery models are not just the future—they are today's imperative. Adopting these solutions is critical for providers to remain competitive and profitable in an evolving healthcare landscape.

Challenge #2: Administrative requirements and staffing shortages risk provider burnout.

Healthcare providers are facing mounting administrative demands, driven by regulatory requirements, patient expectations, and legal pressures. These challenges are disproportionately affecting smaller practices, which lack the administrative support available to larger systems. Administrative burdens in 2025 include:

Increased CMS Reporting Requirements

The Centers for Medicare & Medicaid Services (CMS) is introducing expanded reporting requirements under the Medicare Shared Savings Program (MSSP) and other value-based care initiatives. Reporting on Social Determinants of Health (SDoH), patient-reported outcomes, and interoperability compliance are becoming mandatory. Practices must now track and report additional metrics on quality, outcomes, and patient engagement, requiring more desk time for data collection and submission.

Increased Demands for Data Analysis

The increasing popularity of wearable health devices and mobile apps has led to a surge in patient-generated health data (PGHD). Wearable devices like glucose monitors, cardiac monitors, and smart watches transmit real-time data. Patients increasingly expect their providers to review this data during visits or between appointments.

Malpractice Claims and Documentation

Malpractice claims continue to rise, driven in part by increased patient expectations and the complexity of care delivery. Providers are spending more time documenting encounters to protect themselves from litigation.

A 2023 study published by the American Medical Association (AMA) reported that 32% of primary care physicians increased their documentation time to reduce liability risks.

Staffing Shortages: A Crisis Across Industries

The U.S. labor force is experiencing broad shortages due to demographic shifts, early retirements, and post-pandemic labor market dynamics.

Healthcare, with its physically and emotionally demanding roles, is among the hardest hit. Large retail healthcare players like Walmart and VillageMD cite labor costs and clinician shortages as major reasons for their strategic pivots or exits from healthcare delivery.

> "The healthcare workforce shortage has reached critical levels, impacting every aspect of patient care delivery, from frontline nurses to administrative staff."
> — American Hospital Association (AHA) Workforce Report, 2023

By 2025, the U.S. will face a shortage of up to 48,000 primary care physicians, according to the Association of American Medical Colleges (AAMC). The remaining physicians additionally have to manage staff shortages among health professionals such as nurses, and also high turnover in administrative staff..

Solution #2: Physicians are increasingly adopting technology to assist with workload.

Technology enhancements streamline workflows, automate time-consuming tasks, and enhance patient care. Medify Health exemplifies how technology and services can support a practice from patient care to administration.

How Medify Health Reduces Provider Workload

- **Seamless Integration into Existing EHR:** Providers can continue using their preferred systems without disruption while Medify's tools operate in the background.
- **Proactive Data Mining:** Using HIPAA-compliant security protocols, Medify flags patients predicted to benefit from enrolling in Medify's connected health services.
- **Patient Outreach:** Medify's team invites, enrolls, and trains eligible patients so providers don't need to dedicate staff time to providing Medify's enhanced patient services.
- **Seamless Wearables Data Integration:** Medify collects and analyzes data from wearables, adding patient notes to the EHR and configuring alerts to facilitate timely action.
- **Provider-Branded Virtual Patient Visits:** Medify staff conducts virtual patient visits under the practice's name, creating the sense of a virtual "army" of caregivers.
- **Documentation Processing:** Medify processes all required documentation for its services, ensuring compliance with CMS reporting requirements and streamlining reimbursement. Other Tech Solutions Relieving Provider Workloads

Other Technology Examples

In addition to Medify's services, many platforms aim to streamline practice workload.

- **Patient Visit Recording Technology:** Systems use voice recognition and natural language processing (NLP) to transcribe patient visits, saving providers hours on charting.
- **AI-Powered Billing and Coding:** Platforms like automate medical coding and billing, ensuring accurate claims submissions, reducing revenue losses from denied claims.
- **Digital Appointment and Patient Engagement Platforms:** Multiple EMRs and many standalone platforms allow patients to self-schedule, receive automated reminders, and access health records, and check-in for appointments via portals, reducing the workload for front-office staff.

Technology is not only alleviating administrative burdens but is also transforming how providers deliver care.

Challenge #3: There are more Medicare beneficiaries today, visiting the doctor more often.

The healthcare system is facing unprecedented demand from Medicare beneficiaries, driven by both the increasing size of the population and their greater healthcare needs.

From 2015 to 2030, the number of Medicare beneficiaries is increasing by nearly 50%. This surge significantly increases healthcare demand: Medicare beneficiaries average 6-7 visits per year compared to 3-4 visits for individuals aged 18-64.

Nearly 80% of Medicare beneficiaries have at least one chronic condition, and 68% have two or more. Conditions like diabetes, hypertension, heart disease, and COPD require continuous monitoring and follow-ups, significantly increasing the demand for healthcare services.

Older adults are also more likely to require emergency services, hospitalizations, and transitional care after acute incidents.

While Medicare reimbursement rates are declining, the **rising patient volume does not always translate into higher revenue** due to the time-intensive nature of managing chronic conditions and acute-care recovery.

Solution #3: Connected Health helps both Medicare patients and their providers thrive.

As the Medicare population grows in size and frequency of healthcare visits, Connected Health services allow healthcare providers to manage more patients while improving outcomes, patient satisfaction, and financial performance.

For example, virtual consultations make care more accessible for patients with mobility challenges or those in rural areas. Virtual visits are ideal for routine follow-ups, medication adjustments, and initial assessments.

These virtual visits are covered by Medicare, generating increased FFS revenue for the practice. Improved quality scores and preventive care also drive improved MSSP reimbursements.

Improved Quality Scores and Outcomes

- Practices implementing telehealth for Medicare patients report a **25% increase** in appointment volume and improved satisfaction scores.
- RPM programs have shown a **38% reduction** in hospitalizations for Medicare beneficiaries.
- Patients enrolled in CCM programs are **20% less likely** to be hospitalized.
- Providers using RPM and CCM had a **15% reduction in total healthcare costs** for their for their Medicare population, translating into significant shared savings.

> A practice with 200 Medicare patients enrolled in Medify's RPM and CCM programs generated $240,000 annually in new revenue while improving patient satisfaction scores by 15%.

The increasing demands of modern healthcare, particularly from a growing Medicare population and shrinking margins, are challenges that no practice can afford to ignore. However, these challenges also present immense opportunities for those who are willing to adapt.

By adopting flexible care delivery models such as Connected Health and virtual care services, practice owners can transform their operations into more efficient, patient-centered, and financially sustainable systems.

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