



MEDICAL AND OPERATIONAL TRENDS

Driving Healthcare Outsourcing in
Small Medical Practices

A White Paper for Physicians and Practice Operations Leaders

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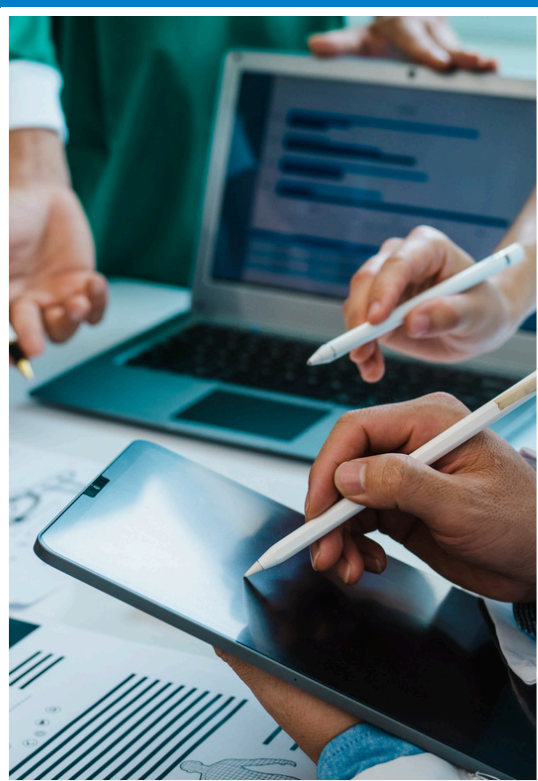
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Executive Summary

Running a small medical practice today means operating under constant pressure. Staffing gaps, payer delays, and expanding administrative demands now compete directly with time for patient care.

The administrative burden has grown so large that resident doctors typically spend nearly four hours on paperwork for every hour of patient care. Meanwhile, administrative overhead accounts for nearly a quarter of U.S. healthcare spending. The result is significant operational drag on organizations already managing tight margins.

For small and mid-sized practices, each vacancy or billing delay can disrupt schedules, cash flow, and patient communication within days. With lean teams and rising labor costs, many physician owners and practice managers are turning to healthcare outsourcing to regain stability.



Outsourcing does not replace in-house staff—it reinforces them. Transferring repetitive, execution-heavy administrative tasks to specialized partners allows practices to ease operational strain, protect clinical time, and maintain service quality without adding headcount.

This white paper explores the trends that drive this shift and outlines how small practices can implement outsourcing responsibly while maintaining control, compliance, and quality patient care.

Introduction



Small medical practices are facing structural operational strain. Tight margins, staffing shortages, payer complexity, and escalating patient expectations have made it increasingly difficult to sustain performance solely with internal teams.

An American Medical Association (AMA) report shows physicians manage more than 40 prior authorizations each week, with 94% reporting delays in patient care. With rising labor costs and turnover, the pressure can quickly become unsustainable.

Strategic healthcare outsourcing can stabilize operations without expanding payroll. By delegating billing follow-ups, eligibility verification, and patient communication to trusted partners, small practices can reduce time spent on non-clinical tasks and achieve more predictable revenue cycle results and staffing continuity.

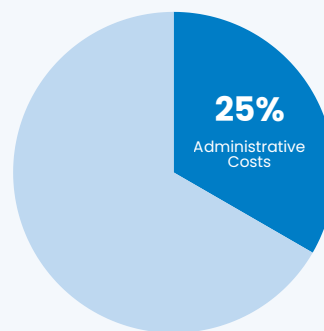
This white paper examines the workforce, financial, and technological trends driving the shift toward outsourcing and offers a framework for adopting it effectively. When governed well, it helps practices maintain visibility and refocus their teams on quality patient care.

The Administrative Burden on Small Medical Practices

Clinical vs. Administrative Time



Where Healthcare Spending Goes



Administrative work accounts for a significant share of total healthcare spending.



1 vacancy can **disrupt** operations within days.



Small practices operate with little to no redundancy.



Administrative work reduces time for patient care.

Workforce Shortages and Rising Turnover in Healthcare

Workforce shortages remain one of the most pressing challenges in healthcare today, and small medical practices feel this pressure most acutely. When a staff member leaves, it can affect scheduling, billing, and patient communication almost immediately.

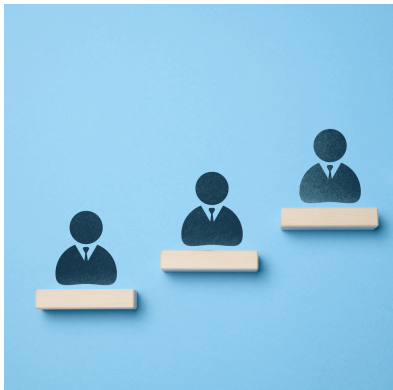
Unlike large health systems with dedicated departments and backup resources, smaller practices operate with lean teams and overlapping roles, leaving little room for disruption.



Vacancies now take longer to fill as competition for qualified staff intensifies. The Bureau of Labor Statistics projects 1.9 million healthcare job openings annually across occupations.⁴ Meanwhile, physician supply is struggling to keep pace with rising demand driven by an aging population, growing chronic disease burden, and expanded care access. Even with nearly 1 million active physicians in the U.S., projections suggest a shortage of 141,160 full-time equivalent physicians by 2038—a persistent and widening gap between staffing needs and available talent.⁵

Healthcare outsourcing can safeguard the practice against operational breakdowns. Delegating critical but repeatable tasks, such as appointment scheduling and eligibility checks, to external teams enables small practices to maintain workflow continuity during staffing gaps. This prevents burnout among existing employees and sustains patient care standards even amid workforce volatility.

Why Staffing Gaps Hit Small Practices Harder



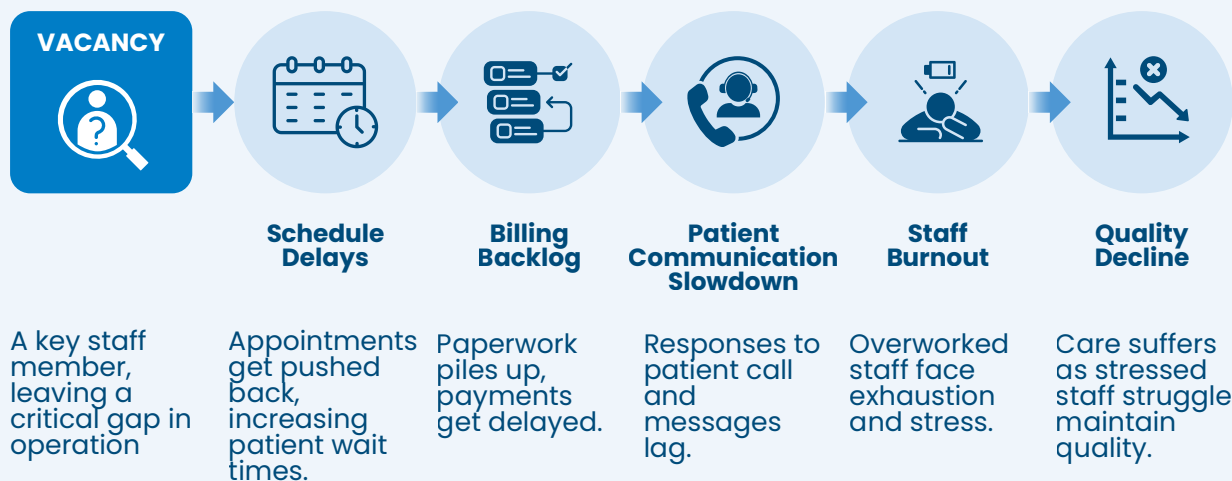
Large health systems have built-in buffers: dedicated departments, float staff, and backup coverage. Small practices lack such structural support. When a single front desk coordinator or biller leaves, appointments get rescheduled, claim submissions fall behind, and frontline staff take on extra duties just to keep the practice running.

Overlapping responsibilities mean every absence compounds the strain. A medical assistant starts verifying insurance, while the practice manager handles billing follow-ups between patient calls. What begins as a temporary workaround quickly becomes the norm, leading to exhaustion, errors, and declining morale.

Hiring relief often takes weeks. By the time a new hire is fully up to speed, the rest of the team might already be fatigued or at risk of turnover.

Offloading repetitive, non-clinical tasks helps small teams avoid burnout and maintain quality even when internal resources are strained. Rather than serving as a stopgap, outsourcing functions as a continuity strategy while the practice rebuilds capacity.

How One Vacancy Ripples Across the Entire Practice



Administrative Burden on Clinical and Non-Clinical Staff

Even when staffing levels stabilize, the workload keeps growing. Administrative demands, from payer coordination and documentation to compliance reporting and patient communication, consume a larger share of every workday. These tasks, while essential, often crowd out clinical priorities and extend well beyond scheduled hours.

The 2025 study showing resident doctors spend about four hours on administrative work for each hour of patient interaction reveals an imbalance that now extends across roles: front desk staff chase authorizations, medical assistants manage electronic health record (EHR) updates, and practice managers juggle claims and compliance.⁶ This results in fragmented focus and mounting fatigue.

For small medical practices, every hour spent on administration is an hour lost to patient consultations and care planning. By delegating defined tasks to specialized partners, practices can reduce administrative overhead while maintaining accuracy and control.

The goal is not to eliminate responsibility, but to distribute it wisely. Outsourcing helps restore focus across the team, allowing providers and staff to dedicate more time to direct patient care rather than mounting administrative work.



Administrative Overload and Burnout Risk



Administrative overload does not fall on a single role but spreads across the entire practice. In a small medical practice, the same people manage everything, from scheduling and documentation to billing and compliance. Phones ring while claims queue up, and inboxes fill faster than they can be cleared. Over time, consistent multitasking leads to fatigue and errors that directly affect patient experience.

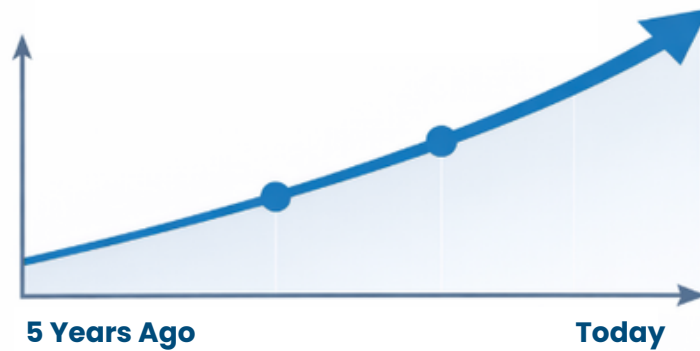
The Commonwealth Fund links much of this pressure to insurance complexity, challenges in EHRs, and growing regulatory demands.⁷ The cumulative strain manifests as burnout, reduced engagement, slower turnaround times, and staff turnover.

Outsourcing helps break that pattern. By offloading high-volume, time-sensitive functions, such as appointment reminders and overflow call management, practices can relieve administrative pressure where it is highest. Beyond increasing efficiency, this model gives staff the breathing room to focus on their primary responsibilities.

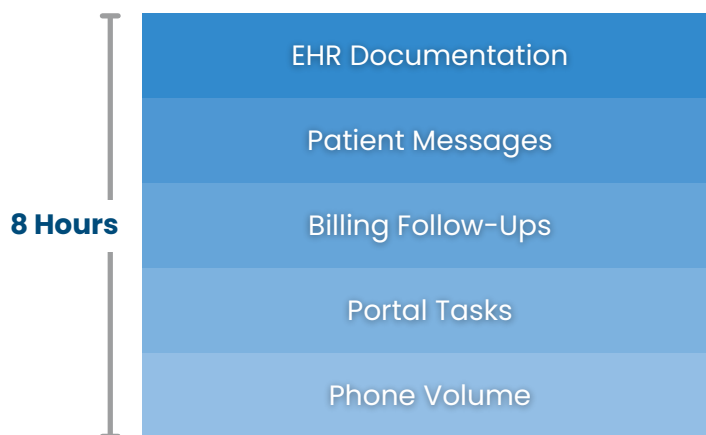
Outsourcing serves as both an administrative solution and a workforce sustainability strategy. It provides small practices with the capacity to protect their people, maintain quality, and operate at a realistic pace.

Where Staff Time Really Goes

Rising Administrative Burden Over 5 Years



A Typical Staff Day



Payer Complexity and Follow-Up Demands

Navigating payer requirements has become one of the most time-consuming aspects of running a medical practice. Each insurer brings different rules, documentation standards, and online portals. Even straightforward cases can get stuck in cycles of prior authorizations, eligibility checks, and claim follow-ups, draining staff who are already managing full workloads.

According to the AMA, physicians and staff spend an average of 12 hours per week on prior authorizations alone, delaying care and core operations. For small practices working without a dedicated revenue cycle team, these administrative hurdles translate directly into slower cash flow and increased frustration for both patients and staff.

Strategic healthcare outsourcing can help restore control and consistency. Partnering with specialized teams for revenue cycle functions turns payer management from a fragmented, manual exercise into a repeatable process, reducing backlogs and financial uncertainty.

For small practices, outsourcing reinforces oversight, protecting revenue and patient access to timely care.



The Operational Cost of Getting Paid



For many small medical practices, payment delays expose underlying inefficiencies in daily operations. Getting reimbursed involves more than sending clean claims. It relies on constant coordination, tedious follow-up, and near-daily system checks. Even minor inefficiencies or delayed denial reviews can build into major revenue challenges.

The Medical Group Management Association (MGMA) identifies billing inefficiency and claim denials as top financial risks for practices. For practices that rely on timely reimbursements to cover payroll and rent, even minor undercoding can produce outsized consequences.

For example, 13% of MGMA respondents cited coding as their biggest revenue leak.¹⁰ Even minor undercoding, such as missed codes and documentation gaps, delays payments and increases denials, straining cash flow and daily operations.

Engaging trained external teams for claim tracking, verification audits, and denial follow-ups introduces consistency. These specialists operate within defined performance metrics to help ensure every step of the revenue cycle happens on schedule and in compliance.

When implemented under strong governance, healthcare outsourcing replaces sporadic effort with process reliability. Payments arrive more predictably, and error rates fall. Staff can then redirect their energy from payment bottlenecks to patient questions.

Case Study: Stabilizing Insurance Verification Through Healthcare Outsourcing

In a growing small practice, insurance verification had become a persistent bottleneck. Staff were spending hours each day checking eligibility, correcting patient records, and waiting for payer responses. The work was necessary, but repetitive and increasingly difficult to keep up with.

As patient volume increased, delays became more visible. Eligibility errors led to billing issues. Follow-ups pulled front desk staff away from patients. What should have been a routine process began affecting both workflow and cash flow.



A dedicated external team handled eligibility checks, payer communication, and discrepancy resolution. Work was structured around clear benchmarks for accuracy, turnaround time, and consistency.

Within a short period, verification became more predictable. Errors decreased, and fewer issues reached the front desk.

The practice recovered an estimated 10–30 hours per week, reduced administrative strain, and improved revenue cycle consistency—without adding headcount.

The process didn't change; the execution did. Verification was completed on time, follow-ups were consistent, and staff were able to refocus on patient-facing work. For small practices, that shift creates stability where it's needed most.

Rising Patient Expectations for Access and Communication

Patients now expect the same responsiveness from their healthcare providers that they experience with retail or banking apps: fast replies, simple scheduling, and proactive follow-ups.

For small practices juggling manual scheduling, high call volume, and limited staff coverage, meeting those standards is increasingly difficult. As a result, calls go unanswered, and patients lose confidence in the practice's availability.

By delegating healthcare communication tasks to specialized partners, such as appointment confirmations or follow-up reminders, practices can maintain consistent outreach even when in-house capacity fluctuates.



Outsourced communication is structured. Practices set the scripts and service standards, while partners maintain timeliness and completeness. This results in reliable patient engagement that strengthens trust and retention, without stretching internal teams beyond their limits.

Communication as an Operational Bottleneck

In many clinics, communication shortfalls are not due to inattention but to competing demands. Staff must triage in-person patients and handle administrative requests simultaneously. When demand spikes, real-time responsiveness suffers.

The smallest delay (e.g., an unanswered call or late callback) can quickly compound into missed appointments and frustrated patients. Over time, communication lapses lead to measurable revenue losses and damage the practice's reputation.

Healthcare outsourcing stabilizes communication flow by assigning defined, non-clinical contact functions, such as appointment confirmations or call overflow, to off-site teams in accordance with the clinic's communication policies.

With defined ownership over each communication task, patient messages receive consistent, timely responses regardless of in-house capacity. At the same time, practices retain full control over protocols and tone, while gaining the reliability of trained service specialists. The outcome: steadier call metrics and improved patient confidence, which are primary drivers of retention.



Financial Pressure and Margin Compression



Even with steady patient volume, small medical practices face persistent financial pressure, as operating costs continue to rise. The MGMA reports that practice expenses climbed approximately 11% in 2025 compared to the prior year, with staffing costs as the biggest driver. However, reimbursement rates have failed to keep pace, leaving margins increasingly compressed.

Unlike large health systems, independent practices cannot offset rising expenses across multiple departments or locations. Every new hire or billing delay directly affects margins. This leaves little room for error; a single inefficiency or turnover event can quickly strain resources.

Outsourcing offers a practical way to control costs without compromising quality. By shifting segments of administrative workload to scalable external teams, practices transform fixed labor costs into variable operating expenses. This enables responsiveness to seasonal patient demand or temporary staff shortages without committing to permanent payroll growth.

Outsourcing allows practices to align costs with actual demand without sacrificing care standards.



Outsourcing as Cost Control, not Cost Cutting

Too often, outsourcing is misunderstood as a way to indiscriminately reduce costs. For physician practices, its strategic purpose is different: control and flexibility. By externalizing predictable, process-driven work, leadership can scale support during demand surges and contract it when volume subsides, preserving both cash flow and morale.

Beyond direct labor savings, **specialized outsourcing curbs hidden costs:**



- Recruiting and onboarding delays that stall productivity
- Overtime from overstretched teams during absences
- Rework due to task saturation or fatigue
- Revenue disruption from slow follow-up or errors

When these inefficiencies are quantified, the model's stabilizing value becomes evident. It does not replace managerial oversight; it extends it. This allows leaders to direct internal focus toward strategic initiatives, innovation, and patient-relationship building rather than clearing day-to-day operational disruptions.

Cybersecurity Risk and IT Compliance Burden

Digitization has expanded healthcare operations, but has also increased risk. Ransomware attacks, phishing, and data-handling errors can suspend practice operations with little warning. Smaller organizations are particularly vulnerable precisely because they lack full-time security teams and enterprise firewalls.

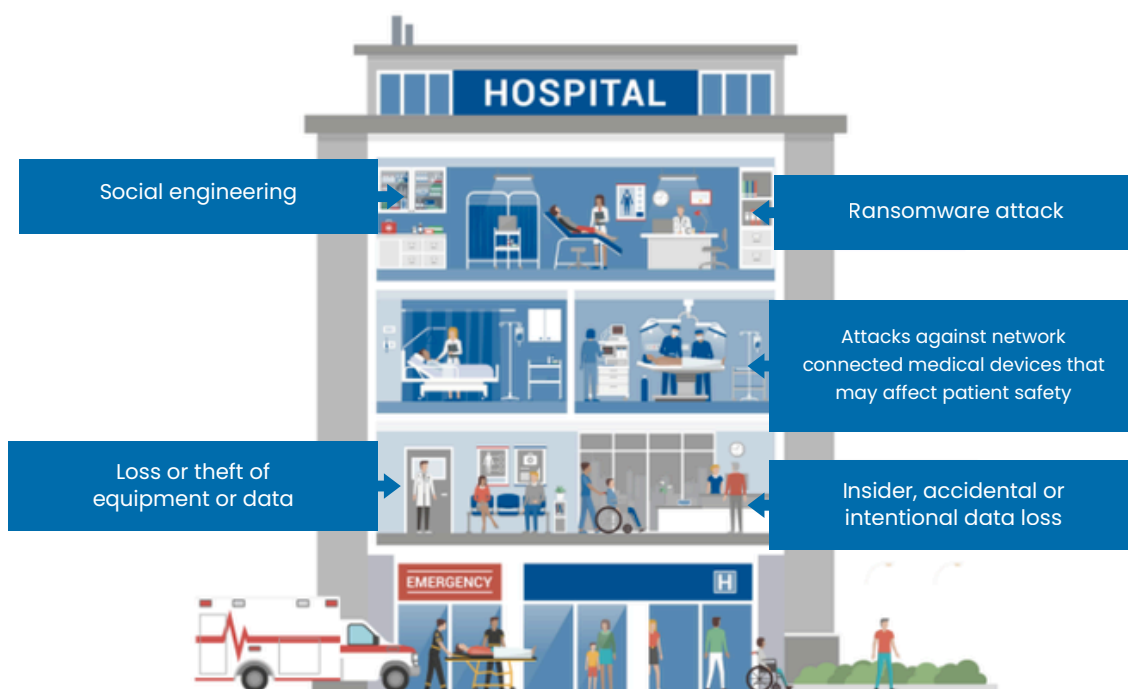


The U.S. Department of Health and Human Services (HHS) reports that large breaches in personal health information (PHI) increased by more than 100% between 2018 and 2023, driven primarily by hacking and ransomware attacks. Each incident triggers costly reporting requirements, fines, and reputational strain.

Meanwhile, compliance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and Health Information Technology for Economic and Clinical Health Act (HITECH) has evolved from periodic checklists to continuous oversight. These frameworks require documented risk assessments, training, and incident response plans. But these demands can exceed what lean internal teams can consistently manage.

Partnering with managed security and compliance specialists can help implement essential protections without building a full internal IT department. Examples include regular updates, multi-factor authentication, encrypted storage, and monitored backups.

This partnership reframes cybersecurity from an afterthought to a primary function that preserves patient trust and operational continuity.



Why This Burden Falls Heaviest on Small Practices



Large health systems distribute IT and compliance responsibilities across dedicated teams with defined roles. Small practices lack that structure. Office managers or lead physicians often assume security responsibilities in addition to their clinical and administrative duties, typically without formal cybersecurity training or, in many cases, any prior relevant experience.

This knowledge gap compounds the risk. Even minor oversights, such as an expired firewall subscription, unsecured Wi-Fi, or inconsistent user permissions, can expose protected data. Without a trained eye, these vulnerabilities often go undetected until an incident occurs.

Recognizing that small healthcare organizations operate under fundamentally different resource constraints, HHS developed separate cybersecurity guidance tailored to their needs.¹⁵ Even so, implementing those recommendations consistently requires dedicated attention that most small practices cannot sustain internally.

By engaging specialized external partners, small practices gain uniform safeguards, automated backups, role-based access control, and threat monitoring. Healthcare outsourcing extends that capacity, allowing internal leaders to maintain oversight without becoming part-time IT administrators.

Outsourcing as a Risk Management Strategy

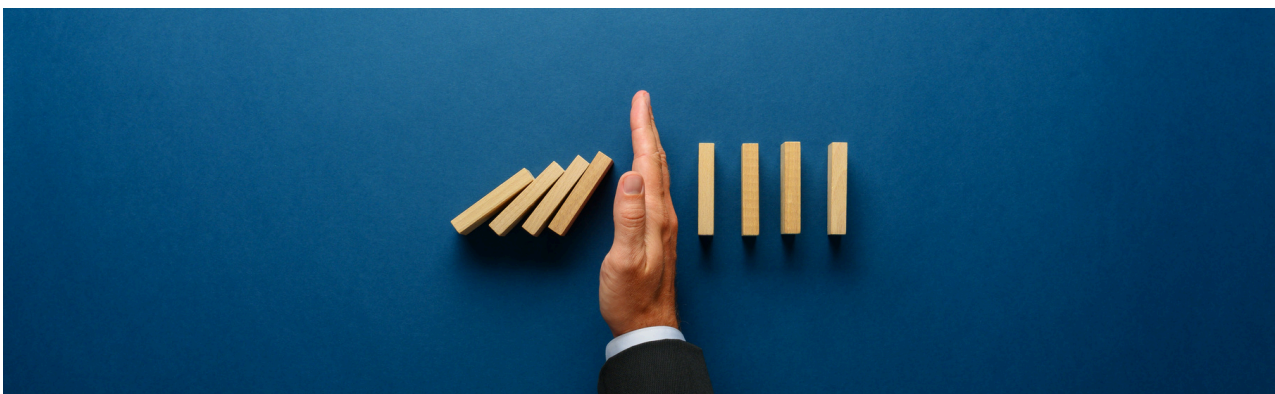
For small medical practices, cybersecurity and compliance management are business-critical. Yet maintaining secure systems, backup protocols, and ongoing monitoring often exceeds what lean internal teams can handle consistently.

Structured external support can be a strategic form of risk management. Partnering with managed IT and compliance specialists provides access to enterprise-level protection at a scale small practices can afford. These partners help implement essential safeguards, such as regular patching, data encryption, access control, and phishing awareness training, while maintaining comprehensive audit trails and documentation.



Frameworks such as NIST SP 800-66 outline best practices for HIPAA compliance, but implementation requires discipline. Outsourcing delivers that steadiness by bringing structure to otherwise inconsistent internal routines.

When supported by clear governance, business associate agreements (BAAs), and escalation protocols, outsourcing enhances control. It enables practices to proactively manage risk to support data integrity, operational continuity, and compliance readiness.



Technology Fragmentation and Digital Tool Sprawl



Most small practices did not plan to build a complex tech stack—it happened gradually. They built one EHR system, another for billing, and a separate patient portal, then added scheduling tools, telehealth platforms, and messaging apps over time. Each tool solves a problem individually, but together, they often create new ones.

When systems lack clean integration, staff end up coordinating manually: moving between platforms, re-entering data, and double-checking information. Unlike larger organizations, small practices lack IT teams managing integrations. When systems fail to sync or require manual workarounds, the fix typically falls to the same staff already managing patient flow and administrative tasks.

By engaging third-party partners, practices can centralize coordination across tools and standardize how data moves between systems. External teams bring structure and predictability, reducing administrative friction and freeing clinical and administrative staff to focus on quality care.

Hidden Costs of Digital Complexity



Disconnected systems slow workflows and quietly drain resources. Licensing overlap, redundant software, staff training, and manual data transfers contribute to significant hidden costs. For small practices already stretched thin, even minor tech issues can stall billing, documentation, or scheduling.

Instead of adding more tools, many practices find relief through healthcare outsourcing. By partnering with external teams that manage record retrieval and referral tracking, they streamline operations without overhauling their tech stack.

This model transforms digital sprawl into an organized process, reducing both waste and frustration while improving the return on existing technology investments.

Outsourcing as an Operational Stabilizer

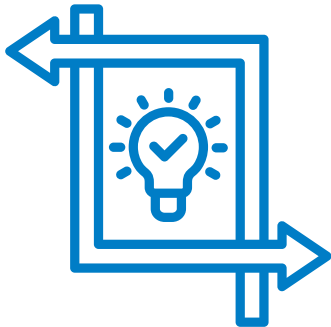
For small practices, disconnected systems and growing workloads create friction that disrupts daily output. Outsourcing offers a practical way to regain stability without adding internal complexity. By assigning structured, repeatable tasks to specialized partners, practices gain consistency and predictability.

Because third-party teams handle specific, defined tasks, they maintain accuracy and turnaround even when internal workflows are fragmented across platforms. For small practices, this means access to the operational discipline and consistency of larger health systems without the overhead of expanding headcount.



Reframing Healthcare Outsourcing as a Sustainability Strategy

The market forces driving small-practice outsourcing, which include labor shortages, payer friction, and technology expansion, are structural. Attempting to absorb them solely through continual hiring or longer hours is unsustainable.



Forward-thinking practices now treat healthcare outsourcing as a component of operational design. The hybrid model aligns responsibilities by relative strengths:

- Internal teams retain control of clinical care, compliance oversight, and patient relationship management.
- External partners handle standardized, execution-heavy functions under measurable performance criteria.

This structure preserves decision-making authority while improving consistency and capacity. Over time, outsourcing becomes a deliberate operational strategy, even as reimbursement and regulatory demands evolve.

The hybrid model blends control with scalability. Clinical, compliance, and leadership functions remain internal, while high-volume workflows are supported externally under clear performance and accountability standards.

The Hybrid Operating Model for Modern Small Practices

Internal Control

- Clinical Decisions
- Compliance
- Patient Communication Rules
- Financial Oversight



Governance



Accountability



Performance Metrics

External Execution

- Eligibility Checks
- Reminders
- Claims Follow-Up
- Record Retrieval
- Call Overflow

A central question for leadership is not whether the model works but how to implement it without introducing new complexity. The answer is to start small and expand in stages.

1. Start with Low-Risk, High-Volume Work

The safest entry point for healthcare outsourcing is routine, rule-based work that strains staff but does not require clinical judgment. Examples include eligibility verification, appointment reminders, claims follow-ups, and records requests. These functions are ideal for third-party execution because they prioritize accuracy and speed over direct patient interaction.

- **Keep in-house:** Patient-specific decisions, clinical triage, and financial oversight that require discretion.
- **Outsource confidently:** High-volume administrative processes that need accuracy and timeliness.
- **Actionable takeaway:** Start with one workflow where delays are already visible. Then measure turnaround time, error rate, and staff satisfaction after 60 days. A positive change signals readiness to expand scope.



This hybrid model protects clinical and financial integrity while building scalable capacity. Starting with a narrow scope builds trust and clarifies boundaries, demonstrating how outsourcing complements rather than competes with internal teams.

2. Establish Clear Governance and Boundaries

Governance succeeds on structure, not assumption. Without clear ownership, even the best partners can create confusion or duplicate work. Every outsourced process requires an internal sponsor who owns accountability for quality, compliance, and integration.



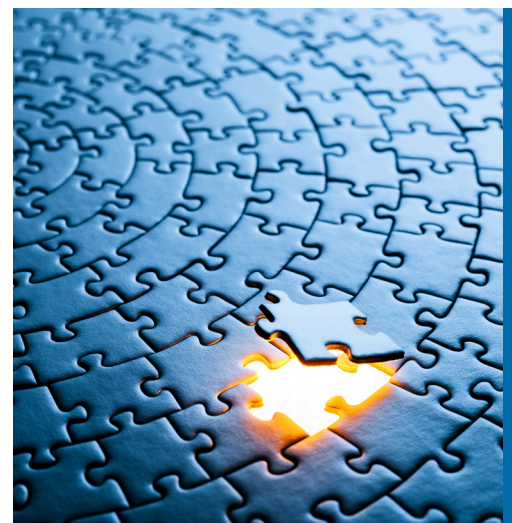
- **Keepin-house:** Compliance approvals, patient communication guidelines, and audit reviews.
- **Outsource confidently:** Executable components, such as data entry, claims tracking, or call handling, within defined service-level expectations.
- **Actionable insight:** Develop a responsibility matrix that maps who approves, performs, and reviews each task.

Transparent governance preserves oversight and prevents duplication. The result is a cooperative hybrid model in which internal and external teams function as a well-synchronized system.

3. Measure What Actually Matters—and Scale Carefully

Outsourcing strengthens a practice only when it tangibly reduces operational strain. Quantitative feedback helps ensure that the strategy remains a solution rather than a source of overhead. Success indicators include turnaround time, error reduction, revenue improvements, and reclaimed staff hours.

- **Keepin-house:** Strategic oversight, patient experience tracking, and decision-making to maintain clinical and brand alignment.
- **Outsource confidently:** Activities with repeatable benchmarks, such as claim closure time or reminder completion rate.
- **Actionable insight:** Conduct joint monthly reviews and stabilize quality before adding new workstreams. Expand only when governance and outcomes remain steady.



Measured growth helps ensure that outsourcing enhances stability rather than introducing complexity. By scaling carefully, small practices gain sustainable capacity, better patient service, and the confidence that operational improvements truly support care rather than just shift workloads.

3-Stage Outsourcing Adoption Path for Small Practices

Stage 1



Low-Risk, High-Volume Workflows

Stage 2



Governance + Boundaries

Stage 3



Measurement + Scaling

If you want to benchmark your approach, Unity Communications offers practical resources on [healthcare revenue cycle management outsourcing](#) and [medical billing outsourcing](#) to help map outsourcing opportunities against your current workflows.





The Bottom Line

Staff shortages, payer complexity, and rising costs are no longer temporary pressures for small practices—they are the baseline, placing immediate strain on lean teams. Through healthcare outsourcing, practice leaders can delegate repetitive administrative tasks to specialized external partners while the internal team retains clinical judgment, compliance oversight, and financial control.

This model stabilizes workflows and frees clinical staff for patient care. The practice can also better absorb operational pressure without compromising care quality during periods of growth or shifting demand.

If you want to manage operational strain through healthcare outsourcing, Unity Communications can help you build a hybrid model that fits your size, specialty, and goals. Visit Unity Communications to explore [case studies](#) or request an outsourcing assessment.

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A WHITE PAPER FOR PHYSICIANS AND PRACTICE
OPERATIONS LEADERS

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