



New Research Reveals Healthcare Leaders Who Unite Financial and Clinical Data Recover Millions in Previously Missed Revenue

Healthcare leaders show unanimous interest in a single AI-powered platform connecting the mid-cycle to the final claim — yet 86% are still leaving revenue on the table

LEHI, Utah, and LOUISVILLE, Ky., June 8, 2026 — Waystar (Nasdaq: WAY), a provider of leading healthcare payment software, today released *The State of the Mid-Revenue Cycle* report. The new research found unanimous interest among healthcare finance leaders in a single AI-powered platform connecting the mid-cycle to the final claim, yet 86% lack true integration between those systems, relying instead on manual data transfers or disconnected solutions across the revenue cycle.

The spring 2026 market survey of 50 healthcare finance, revenue cycle, and mid-cycle leaders underscores the pressure behind those numbers: 82% say they cannot keep pace with rapidly changing payer clinical policies, and 56% are not satisfied with their ability to predict and prevent denials before a claim is generated. The accompanying analysis of data from hundreds of hospitals using Waystar's platform demonstrates how a connected, AI-powered mid-cycle can deliver millions of dollars of incremental revenue, improve quality scores, and reduce denial risk.

“The mid-cycle is the critical intersection where financial and clinical data converge to improve clarity and performance,” said Matt Hawkins, Chief Executive Officer of Waystar. “Our research shows that when providers connect this data across previously siloed workflows, they recover millions in revenue that would otherwise be lost, improve operational efficiency, and strengthen ROI. These results reflect the power of the autonomous revenue cycle, connecting intelligence with action across the platform.”

The analysis of Waystar client performance further quantifies the impact of a connected, AI-powered mid-cycle enabled by the Waystar platform:

- **Waystar Clinical Documentation Integrity delivers 3x greater financial impact and improves care quality:** Organizations fully leveraging Waystar's integrated clinical documentation integrity (CDI) workflows achieve an 87% increase in CDI program impact, generate \$2.17 million in incremental reimbursement per 10,000 discharges, and improve Patient Safety Indicator Composite (PSI-90) scores by an average of 8.4 points, demonstrating how connected financial and clinical intelligence strengthens both reimbursement

and care quality.

- **Waystar Utilization Management increases observation-to-inpatient conversion rates by 13%, captures more revenue, and mitigates denial risk:** Providers using Waystar’s advanced utilization management workflows predict inpatient status within the first hour of a patient visit 82% of the time, increase observation-to-inpatient conversion rates by 13%, and reduce medical-necessity denial rates to less than 2%, demonstrating the value of real-time intelligence tied to downstream revenue outcomes.
- **Waystar Anomaly Detection protects against revenue leakage before the claim is generated and unlocks up to \$3 million in incremental revenue per 10,000 admissions based on early adopter results:** Organizations utilizing Waystar’s automated charge, coding, and documentation reviews can capture millions in additional revenue, with net rebilled dollars for coding anomalies increasing by 90% per 10,000 discharges compared with 2024 results.

The report finds that improving mid-cycle performance requires a unified, end-to-end, AI-powered platform and outlines five actionable strategies organizations can use to improve visibility, prevent revenue leakage earlier, and deliver stronger ROI.

The State of the Mid-Revenue Cycle report is available on [Waystar’s website](#) and will also be available at the 2026 HFMA Annual Conference, where Waystar will host the panel “The Path to the Autonomous Revenue Cycle: Key Components to Turn AI Promise into Reality” on June 9 at 8:10 a.m. ET at the Gaylord National Resort & Convention Center. Attendees can also visit Waystar at booth 143 throughout the conference.

About Waystar

Waystar’s mission-critical software is purpose-built to simplify healthcare payments so providers can prioritize patient care and optimize their financial performance. Waystar serves over 30,000 clients, representing over 1 million distinct providers, including 16 of 20 institutions on the U.S. News Best Hospitals list. Waystar’s enterprise-grade platform annually processes over 7.5 billion healthcare payment transactions, including over \$2.4 trillion in annual gross claims and spanning approximately 60% of U.S. patients and one in three U.S. hospital discharges. Waystar strives to transform healthcare payments so providers can focus on what matters most: their patients and communities. Discover the way forward at [waystar.com](#).

Media Contact

Kristin Lee

kristin.lee@waystar.com

Investor Contact

investors@waystar.com