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2026

Healthcare AI Agent Benchmark Report

Evaluating AI Agent Performance in Healthcare Call Centers

MAY 2026

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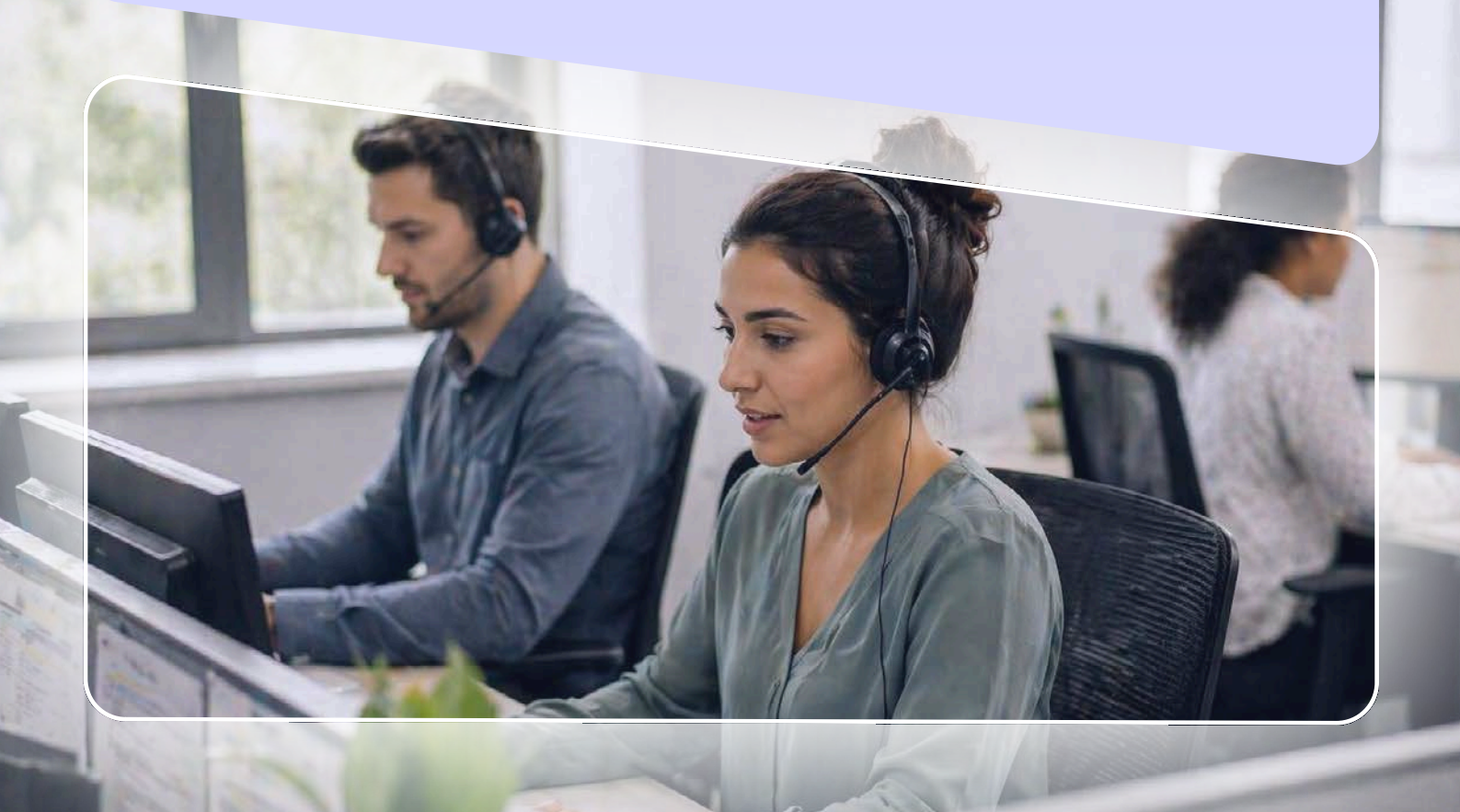
2026 Healthcare AI Agent Benchmark Report



Introduction

AI agents are no longer an emerging technology. They are a core part of healthcare call center operations. What was a "nice-to-have" just a few years ago is now an operational baseline. Most health systems are evaluating vendors or actively deploying solutions, focusing first on patient-facing use cases that expand workforce capacity. For many health systems, the initial goal has been clear: use agentic AI to improve patient access, reduce pressure on staff, and modernize the patient experience. As a result, AI agents are now firmly embedded in how health systems operate.

As adoption scales, the conversation is shifting. Just having an AI agent is no longer enough to stand out. Performance varies widely between implementations, and many organizations are finding that what was promised in demos does not always translate into real outcomes. The industry needs clarity: how well are these systems performing, and what does "good" look like in practice?

That's exactly what this report answers. It provides a structured benchmark for evaluating AI agent performance in call centers. By grounding the conversation in real data and comparative analysis, this report helps health systems better understand where they stand, identify performance gaps, and make more informed decisions as the market moves into its next phase: away from just surviving call volumes and toward driving actual, measurable ROI.

AI agent performance varies widely between implementations, and many organizations are finding that what was promised in demos does not always translate into real outcomes.

Methodology

To better understand the adoption and performance of patient-facing AI agents in healthcare call centers, we surveyed 387 senior healthcare leaders from the United States working within healthcare provider organizations. Every participant was director level or above and represented a mix of functions, including IT (IT, Innovation, Digital, AI Product/Service Owners), Marketing (Marketing, Digital, Access), and Patient Care (Engagement, Access, Support, Experience).

Administered by independent research firm Global Surveyz, respondents were screened to ensure they directly manage or oversee AI agents in the contact center. This ensures our benchmarks are based on actual performance data, rather than subjective opinions.

The survey was conducted between January and March 2026.

Audience
387 senior healthcare leaders, Director level and above

Methodology
Independent research by Global Surveyz

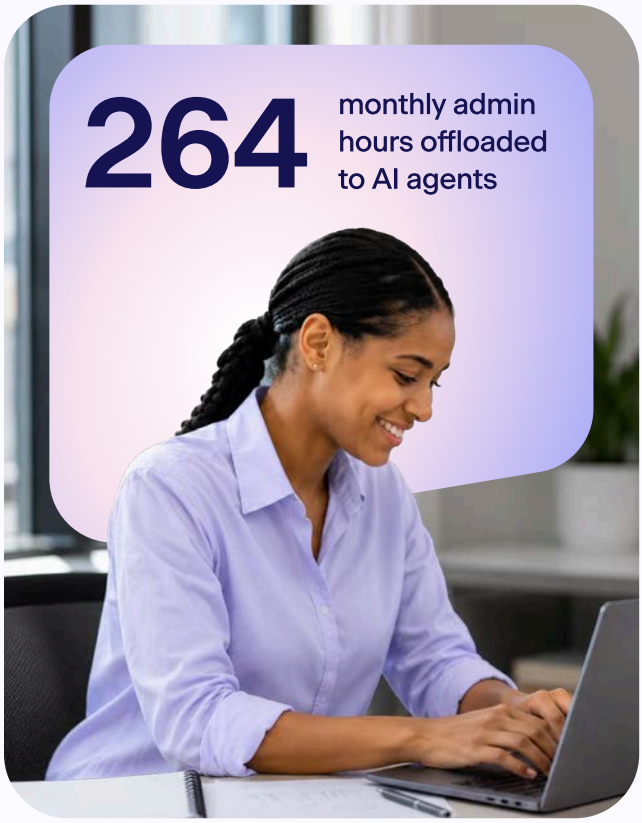
Timeline
Survey conducted between January and March 2026

Key Findings

Measure with Precision or Fall Behind

Once deployed, the value of agentic AI is undeniable. **94%** of current users consider the technology a critical piece of their patient-facing operations. The catch? Only **59%** have real measurement frameworks in place, leaving **40%** relying on informal or ad hoc approaches. As agentic AI becomes non-negotiable for daily operations, this gap signals a clear risk: without consistent data, you cannot track with the intent to optimize, or prove the ROI of a massive technology investment.

94% of users say AI agents are a critical piece of patient-facing operations

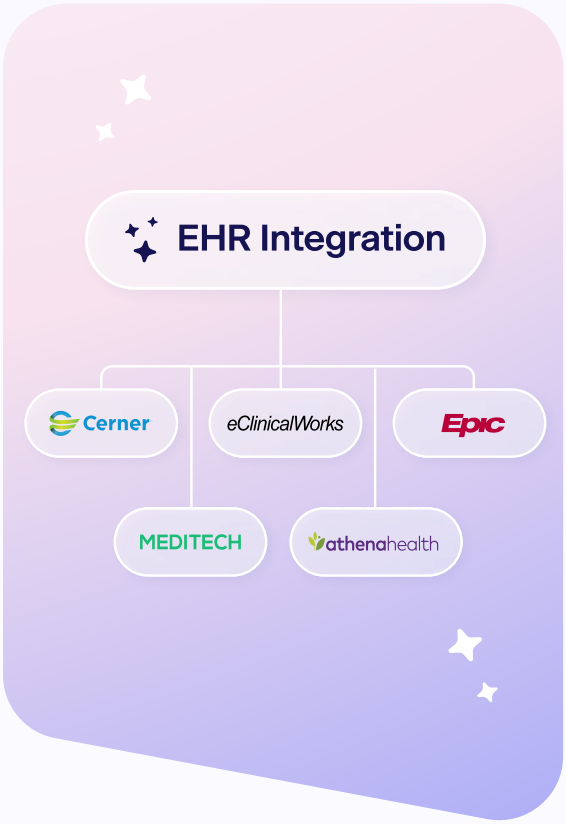


Real Relief for Short-Staffed Teams

Staffing shortages drove **41%** of health systems to invest in AI agents. The good news? It's actually working. On average, the technology is offloading **264** administrative hours per month, consistently improving capacity across frontline teams. This confirms that early investments in agentic AI are successfully addressing one of healthcare's most pressing operational challenges.

The Competitive Edge Lives in Advanced Automation

Everyone is automating the basics. With more than **94%** of health systems deployed with agentic AI using the technology for rescheduling, cancellations, and appointment verification, these capabilities are officially table stakes. But there's a steep drop-off in adoption when it comes to the advanced workflows: waitlist management (**28%**), referral management (**24%**), new patient registration (**19%**), and new patient scheduling (**17%**). The reality is simple: checking the "AI box" with simple tasks is no longer enough to stand out. Real differentiation opportunities lie in automating the complex workflows.

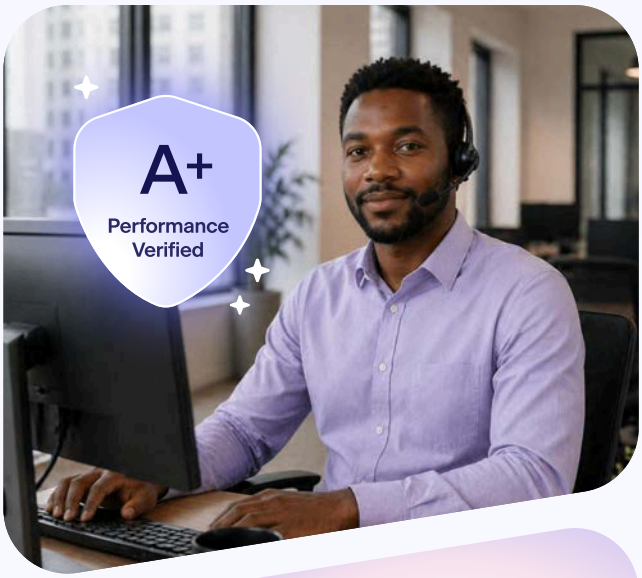


EHR Integration Dictates Automation Potential

How your agentic AI connects to your EHR is the difference between basic and robust automation. **93%** of health systems using advanced, configurable integrations are hitting the highest automation benchmarks, significantly outperforming standard connections like FHIR APIs, where only **57-79%** saw the same level of success. The data proves the point: beyond adoption, the depth of your integration drives the potential of your AI agent.

The ROI of Deep Interoperability

Not all integrations deliver the same outcomes. **82%** of health systems using AI agents with deep, configurable EHR integrations report annual ROI exceeding **$500K**, compared to just **18%** of those relying on standard API-based connections such as FHIR. For the **$1M+** category, the difference widens from **15%** to just **1%**. This highlights a clear pattern: deeper interoperability with your patient data is what drives the bottom line.



82% of health systems with deep EHR integrations exceed $500K in annual ROI

> This highlights a clear pattern: deeper interoperability with your patient data is what drives the bottom line.

The Next Frontier: From Adoption to Measurement Maturity

The AI Agent Measurement Gap

Deploying AI agents is no longer just a pilot project; it is the new industry standard. Among current users, **94%** rank the technology as indispensable to operations in **2026**. The market has rapidly matured, shifting the conversation past basic implementation. Agentic AI is no longer about if or how you deploy it—it's about how rigorously you measure its impact and prove its value.

But this widespread adoption is not yet matched by measurement maturity. While **59%** of organizations use standardized processes to track success, **40%** still rely on informal gut checks, and **1%** aren't tracking performance at all.

The industry has reached a pivotal turning point. As agentic AI becomes a core part of operations, the ability to measure its impact has never mattered more. Organizations that rely on guesswork risk losing ground to peers who are already using performance data to drive tangible results.

Figure 1: Importance of AI Agents to 2026 Call Center Operations Strategy

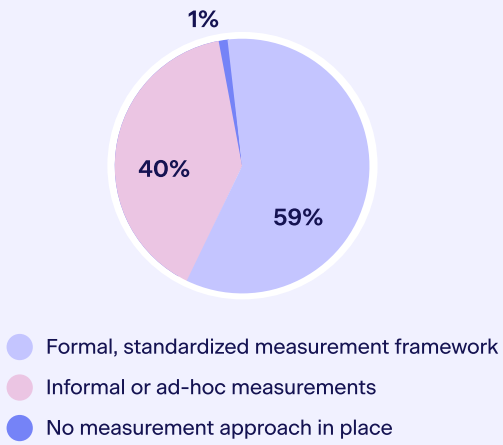
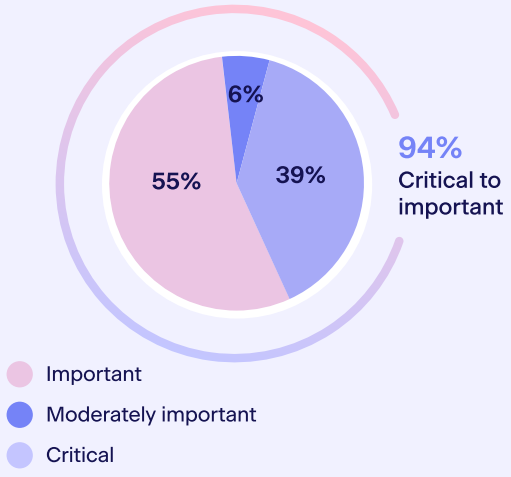


Figure 2: Current Organizational Approach to Evaluating AI Agent Performance



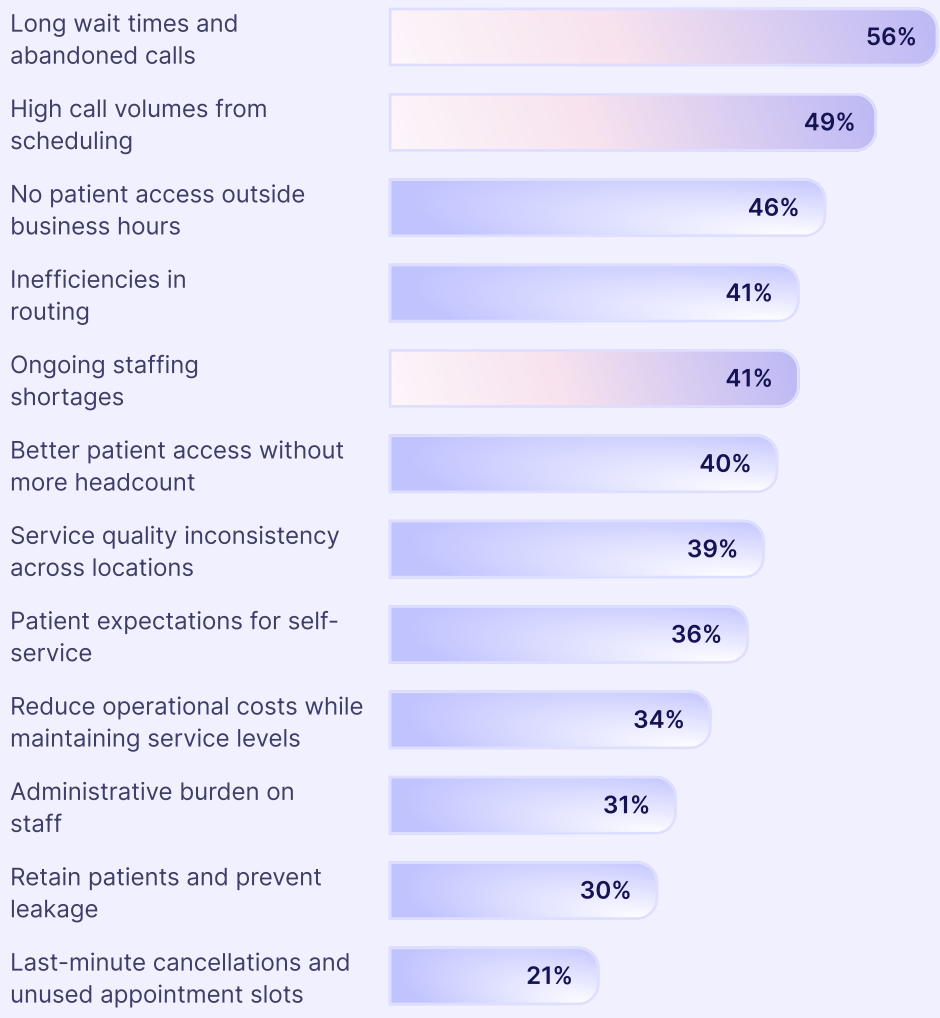
> As agentic AI becomes a core part of operations, the ability to measure its impact is critical.

From Capacity Fix to Competitive Differentiator

The initial wave of AI agent investment was driven by clear and immediate operational pressures. Health systems turned to agentic AI to offset staffing shortages (**41%**), manage high call volumes (**49%**), reduce long patient wait times (**56%**), and extend access beyond traditional business hours (**46%**). As a tool to stabilize call center operations, it worked—improving responsiveness and relieving overburdened teams.

But mere survival isn't the end goal. Health systems are now shifting their focus toward strategic, revenue-generating and investment protecting use cases. Preventing patient leakage to competitors (**30%**) and stopping costly last-minute cancellations (**21%**) are rapidly gaining traction. This marks a clear evolution: agentic AI is moving from defensive operational play intended to manage demand, into an offensive play that optimizes the bottom line, retention, and patient engagement.

Figure 3: Factors Driving Organizational Investment in AI Agents for Call Center Use Cases

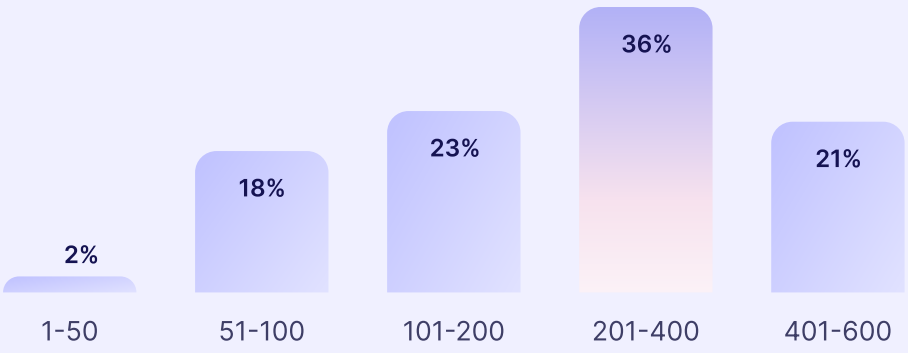


Delivering on the Promise of Capacity at Scale

When it comes to staff capacity, AI agents are living up to the hype. Health systems are saving an average of **264** staff hours per month. The majority are seeing consistent returns: **36%** save between **200** and **400** hours monthly, and **21%** report even greater gains of **400** to **600** hours. Only **20%** of respondents are saving fewer than **100** hours per month, proving that for most organizations, the efficiency benefits are reliable.

These results directly validate the primary reason many health systems initially invested in AI agents: to address capacity constraints. So, what's next? As agentic AI actively creates additional operational bandwidth across administrative teams, what began as a response to staffing shortages and high call volumes can now deliver even greater opportunities for ROI.

Figure 4: Monthly Staff Hours Saved by AI Agents Across Administrative and Patient-Support Teams



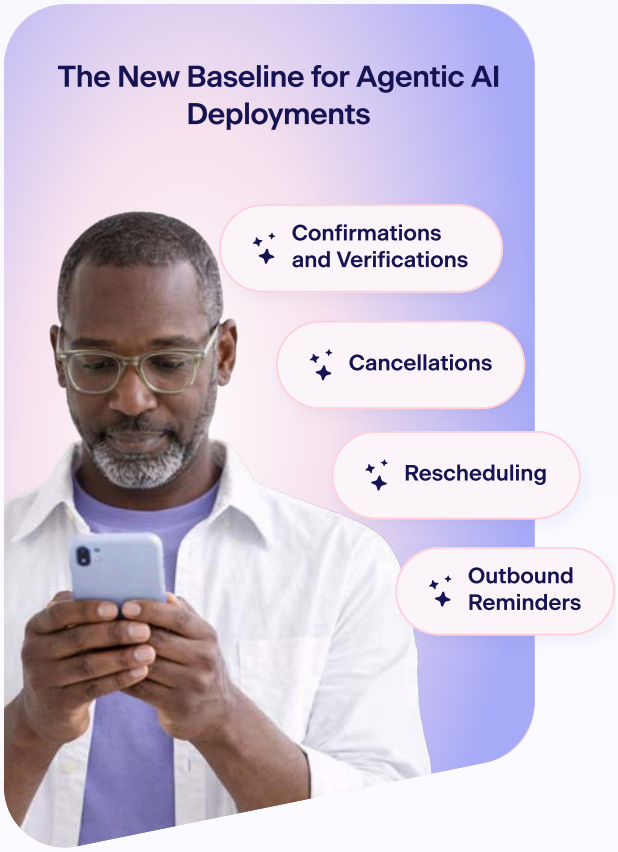
> AI agents are living up to the hype. Health systems are saving an average of **264** staff hours per month.

From Innovation to Expectation

Core Appointment Tasks Are Now Table Stakes

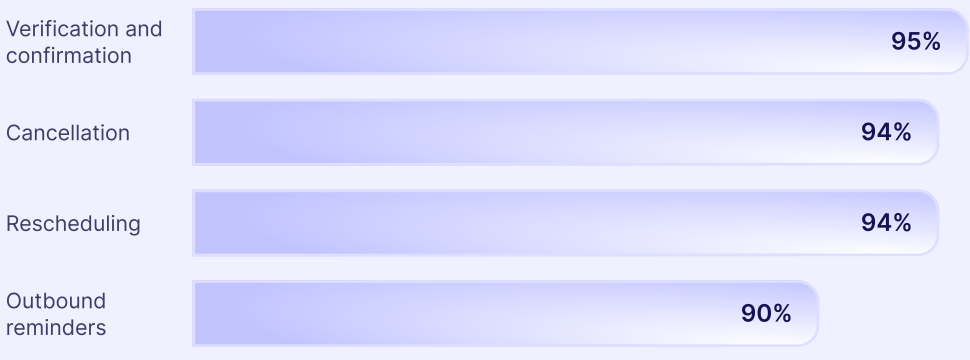
Appointment and scheduling inquiries are the heaviest burden on healthcare call centers, so naturally, that's where most health systems start. As a result, the basics are now widely deployed: appointment confirmations and verifications (**95%**), cancellations (**94%**), rescheduling (**94%**), and outbound reminders (**90%**).

Because these use cases are relatively easy to implement and deliver fast value, the majority of the market has already automated them. They are no longer differentiators—they are simply the new baseline for agentic AI deployments.



This shift raises the bar for the patient experience. Patients increasingly expect to manage appointments and scheduling from start to finish through seamless, self-service workflows. Health systems that stop at the basics risk creating immediate friction—forcing patients back into hold queues for scheduling tasks that should be fully automated.

Figure 5: Voice AI Agent Use Cases Currently Live in Production: Appointment Management



The True Mark of a Market Leader

The health systems separating themselves from the pack are doing so through advanced use cases. We are seeing an initial expansion beyond basic scheduling into more advanced scheduling capabilities such as waitlist management (**28%**), referral coordination (**24%**), and new patient registration (**19%**).

Additional use cases like billing and insurance are also gaining traction as the next frontier of automation. On the far end of the spectrum, complex use cases like prescription management and outbound care gap closures remain less common. If your organization is already executing these, you are setting the pace for the industry.

We are entering a new phase. Today, market leadership isn't defined by simply turning an AI agent on — it is defined by your ability to fully automate complex workflows.

Reaching this level of capability requires organizational buy-in, and just as importantly, a vendor partner with the technology to truly execute it.

Figure 6: Voice AI Agent Use Cases Currently Live in Production

The AI Agent Evaluation Framework: Benchmarking Deployments

The Market Breakdown

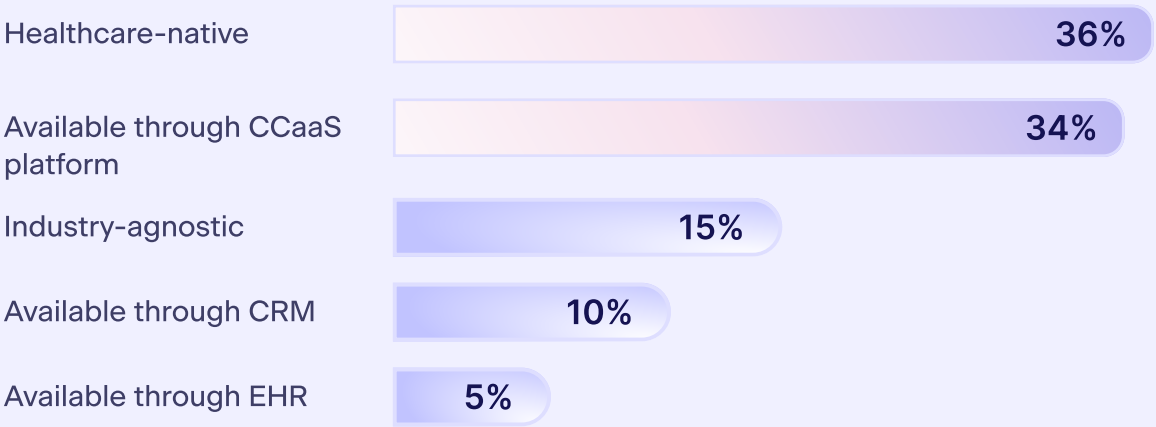
The patient-facing agentic AI market is currently dominated by a few distinct architectures. The largest segment of health systems (**36%**) rely on healthcare-native, purpose-built AI agents, closely followed by solutions embedded directly into CCaaS platforms (**34%**). The remainder of the market is fragmented across industry-agnostic vendors (**15%**), CRM integrations (**10%**), or EHR-native tools (**5%**).

This provides a clear snapshot of how health systems are structuring their tech stacks. The data shows exactly where they are placing their confidence—and their budgets.

By breaking down the survey responses by vendor category, we can strip away the marketing claims and analyze the actual data. Which architectures deliver tangible ROI, and how are health systems meeting KPIs?

This evaluation framework provides an objective performance index to evaluate how your current vendor — or the one you are about to buy — stacks up against the industry standard.

Figure 7: Primary Type of AI Agent Solution Used in Call Centers



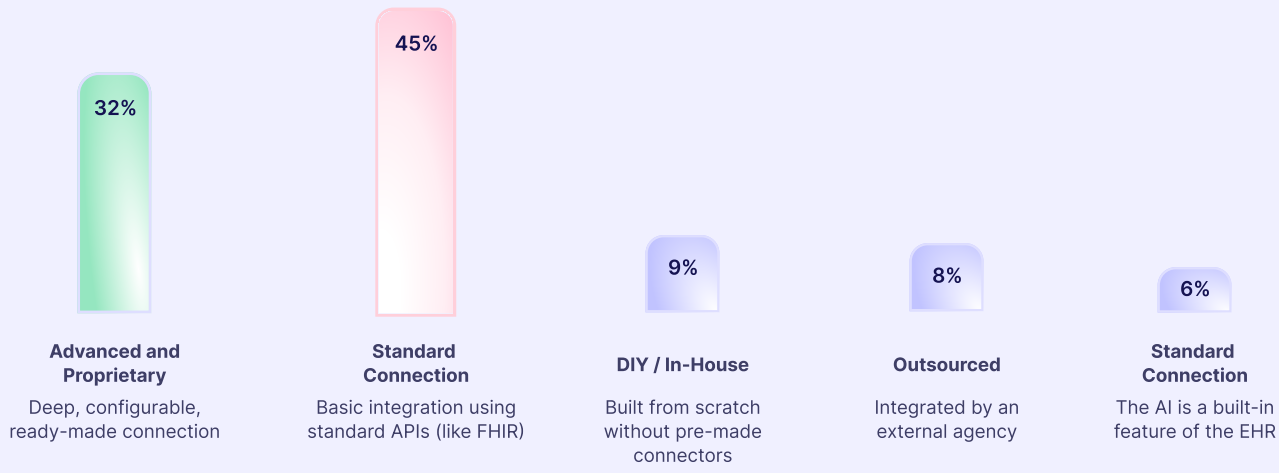
The EHR Approach: Standard vs. Advanced Integration

The way your AI agent connects to your EHR dictates what it can actually do. Right now, the market relies heavily on the basics: **45%** of organizations use standard API integrations (like FHIR). However, a growing segment is moving past this baseline. Nearly a third (**32%**) are deploying with vendors who offer advanced, highly configurable integrations that allow for deep, customized access to patient data.

This isn't just an IT detail; it is the defining factor in your AI agent's performance and alignment with existing patient access workflows.

In the following sections, we split benchmark data by these integration types to reveal the truth: standard connections might be easier to deploy, but advanced integrations are what actually deliver complex automation and ROI.

Figure 8: Integration Approach for Voice AI Agent Connection to EHR or Patient Data



> **45%** of organizations use standard API integrations (like FHIR). However, a growing segment is moving past this baseline.

The Race to Realize Meaningful Operational Value

Across the market, a benchmark is emerging for how quickly health systems should realize value from AI agents. On average, this takes 5 months, with **84%** of organizations seeing measurable impact within 6 months.

However, speed to value varies wildly depending on your underlying architecture. Healthcare-native AI agents are the highest performers, with just **8%** exceeding the 6-month mark. On the other hand, solutions via CRM and EHR platforms are lagging significantly, with **35%** and **37%**, respectively in the **7-12**-month range.

For healthcare leaders, understanding this gap is consequential. Delayed time-to-value isn't just a nuisance; it means prolonged periods of burning capital without an operational return and declining internal confidence. Your choice of vendor directly dictates your timeline, and waiting a year for value means you are leaving significant ROI on the table.

Benchmark Grades: Time-to-Value

A+

Healthcare-Native AI Agents

92% realize operational value within 6 months.

B

CCaaS & Industry Agnostic AI Agents

Sitting right at the industry benchmark within the 6 month window.

C

CRM & EHR AI Agents

Lagging significantly. Over a third of these deployments realize value between 7 to 12 months.

Figure 9: Timeframe to Realize Meaningful Operational Value from AI Agent Deployment

Figure 10: Time-to-Value by Primary Type of AI Agent Use in Call Centers

	1-3 Months	4-6 Months	7-12 Months
All responses	22%	62%	16%
Healthcare-native	27%	65%	8%
Industry-agnostic	15%	70%	15%
Existing CCaaS platform	26%	59%	15%
Existing CRM	14%	51%	35%
Existing EHR	16%	42%	37%

Who Gets Routing Right and Who Doesn't

Accurate call routing is the baseline for AI agent performance. Today, the industry averages a **78%** accuracy rate in correctly routing patients to the appropriate department or automated workflow. This metric directly impacts both operational efficiency and patient experience, making it one of the most important indicators of how well an AI agent functions in practice.

However, the industry baseline still leaves nearly a quarter of your patients misrouted, causing inevitable frustration. And when we look for true precision, the numbers drop significantly. Only **21%** of organizations report routing accuracy in the **91–99%** range.

Benchmark Grades: Routing Accuracy

A+

Healthcare-Native AI Agents

The undisputed winner. Nearly half perform at the highest accuracy.

B

CCaaS & Industry-Agnostic AI Agents

Functional, but average. They manage to hit the 78% industry baseline but struggle to push into the elite 91–99% tiers.

C

EHR & CRM AI Agents

Missing the mark. 3% of CRM AI agents and 5% of EHR AI agents experience accuracy as low as 1-50%.

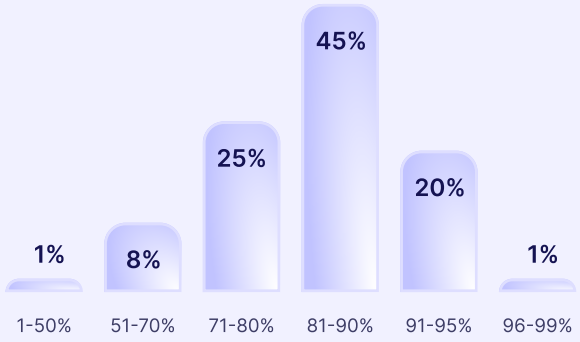
Industry Average: 78% Accuracy Rate

These differences underline the importance of domain-specific capability in driving more accurate routing and, ultimately, better overall AI agent performance.

Figure 11: Routing Accuracy by Primary Type of AI Agent Use in Call Centers

Solution Type	1-50%	51-70%	71-80%	81-90%	91-95%	96-99%
All responses	1%	8%	25%	45%	20%	1%
Healthcare-native	-	3%	9%	40%	44%	4%
Industry-agnostic	-	5%	26%	62%	7%	-
Existing CCaaS platform	-	10%	37%	49%	4%	-
Existing CRM	3%	14%	30%	40%	13%	-
Existing EHR	5%	26%	53%	16%	-	-

Figure 12: Rate of Patient Calls Correctly Routed by AI Agents



What Real Resolution Looks Like

On average, AI agents successfully resolve **52%** of the patient administrative interactions they are deployed to automate. The majority of organizations are seeing results within a realistic middle range, reporting successful resolution rates between **40%** and **60%**.

This gives the market a highly practical benchmark. Meaningful automation impact is absolutely achievable, but it typically sits below what can sometimes be inflated figures often associated with vendor demos or headline claims.

That is why comparing performance against the **40–60%** range is often a far more practical measure of success than expecting **85%** or higher across the board. The true goal is not full automation at any cost, but effective automation that balances efficiency with the appropriate escalation.

Keep in mind, these numbers reflect use cases already live in production—meaning these are the exact workflows these systems are designed to execute. This distinction matters. Resolution rates should be judged in the context of real healthcare operations. This means that some interactions will always require human involvement, whether a situation is clinically complex or emotionally sensitive.

Benchmark Grades: Resolution Rate

A+ — Healthcare-Native AI & CRM Agents

The clear leaders. Drive highest resolution rates, exceeding industry averages and hitting elite 61-80% bracket.

B — Industry-Agnostic AI Agents

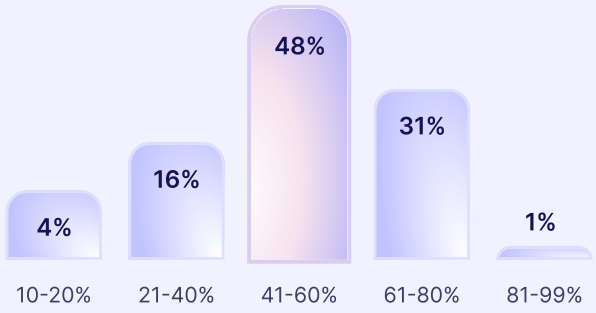
Solid, but standard. Generally sit comfortably at the industry average.

C — CCaaS & EHR AI Agents

Noticeably lagging. Below the industry average and only 17% of CCaaS solutions reach 61–80% resolution.

Industry Average: 52% Resolution Rate

Figure 13: Rate of Automated Patient Interactions Successfully Resolved by AI Agents



	1-9%	10-20%	21-40%	41-60%	61-80%
All responses	58%	53%	47%	54%	46%
Healthcare-native	0%	0%	6%	52%	41%
Industry-agnostic	0%	0%	16%	57%	28%
Existing CCaaS platform	0%	7%	20%	55%	17%
Existing CRM	0%	11%	14%	22%	51%
Existing EHR	5%	0%	42%	21%	32%

The Rescheduling Reality: Adoption ≠ Performance

Appointment rescheduling and cancellations are among the most widely adopted AI agent use cases in healthcare today. However, widespread adoption does not equal performance. On average, AI agents are fully resolving **24%** of these interactions end-to-end. Although nearly every health system deployed with AI agents has these capabilities live, few are seeing impressive outcomes.

When we look at the vendor type breakdown, the divide becomes obvious. Healthcare-native AI agents consistently deliver stronger results. On the flip side, solutions routed through existing platforms—specifically CCaaS—show severe inconsistencies.

This variability points to a key risk: if your AI agent lacks the right underlying architecture, even the most standard workflows will fail to perform.

Figure 14: Average Resolution Rate for AI Agent Appointment Rescheduling and Cancellations

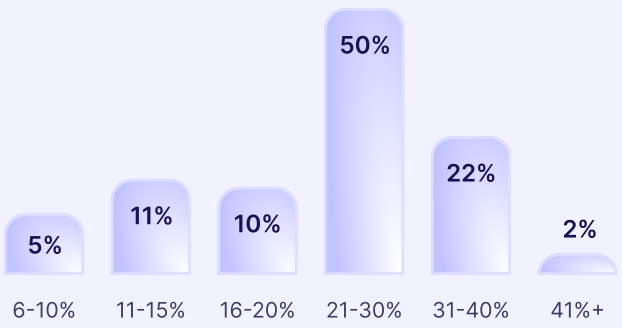


Figure 15: Average Resolution Rate for AI Agent Appointment Rescheduling and Cancellations by AI Agent Type

	6-10%	11-15%	16-20%	21%+
All responses	5%	11%	10%	74%
Healthcare-native	0%	1%	6%	93%
Industry-agnostic	-	7%	17%	75%
Existing CCaaS platform	15%	27%	6%	52%
Existing CRM	3%	5%	16%	66%
Existing EHR	5%	5%	26%	64%

Benchmark Grades: Rescheduling and Cancellation Resolution

A+

Healthcare-Native AI Agents

Undisputed winner. 93% of deployments achieve resolution rates above 21%, and zero fall below 10%.

B

Industry-Agnostic, CRM, & EHR AI Agents

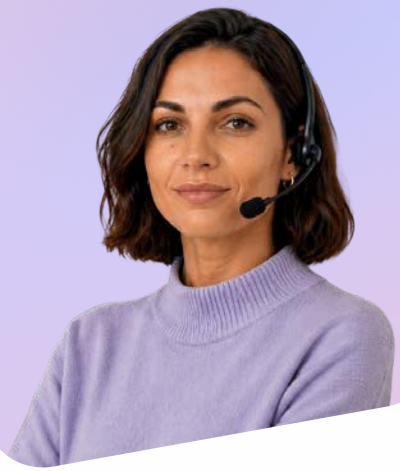
Functional. Performing just at or below the industry average, with resolution rates of 23.8%, 22.3%, and 22.7% respectively.

C

CCaaS AI Agents

Severe inconsistencies. 15% of these organizations are stuck with resolution rates under 10%.

Industry Average:
23% Resolution Rate



New Appointments: The Integration Depth Test

New appointment scheduling remains one of the most challenging use cases for health systems deploying agentic AI, averaging **23%** resolution rate. While overall adoption remains low, the few health systems actively using this feature see a wide range of performance results.

Although vendors heavily pitch scheduling as a core feature, the data proves that resolution is mostly restricted to simple scenarios. Today, only **11%** of health systems are successfully automating more than **40%** of new appointment calls.

Scheduling as a use case is heavily reliant on patient and scheduling data, often housed by EHRs and CRMs themselves. It is therefore no surprise that these systems have an easier time initially resolving these calls.

However, healthcare-native AI agents should not be discounted entirely. While CCaaS platforms have historically lacked deep healthcare integrations, healthcare-native vendors are increasingly investing in proprietary integrations to better support scheduling workflows.

As a category, they may still trail CRM and EHR-based solutions, but those with advanced integrations are clearly outperforming standard API approaches: **65%** achieve **21%+** scheduling resolution rates, compared to just **43%** using standard API integrations.

Benchmark Grades: Scheduling Resolution Rate

A+

CRM & EHR-Based AI Agents

Data = performance. Access to patient data enables outcomes. 89% achieve scheduling resolution rates of 21%+.

B

Healthcare-Native & Industry Agnostic AI Agents

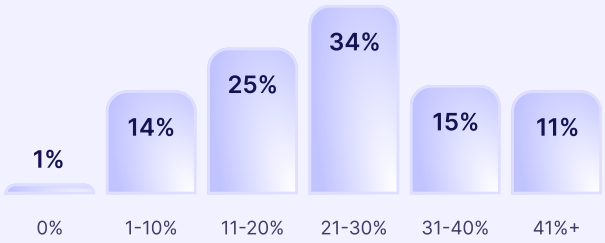
Performance follows integration maturity, with most performing at average.

C

CCaaS AI Agents

Limited healthcare integration constrains performance, with many resolving fewer than 15% of calls.

Figure 16: Rate of New Appointment Scheduling Calls Partially or Fully Resolved via AI Agents



Solution architecture	1-10%	11-20%	21%+
Healthcare-native	0.7%	33%	66%
Industry-agnostic	10%	12%	78%
Existing CCaaS platfor	33%	28%	39%
Existing CRM	5%	5%	89%
Existing EHR	5%	5%	89%
EHR Integration Method			
Advanced and configurable integratio	2%	33%	65%
Standard integration	27%	31%	43%

Industry Average: 23% Resolution Rate

High Growth or Low Baseline? The Truth About Optimization

On average, health systems report a **5%** quarterly improvement in AI agent resolution rates. At face value, a higher number seems like the goal, but context is everything.

Resolution rate growth isn't just a measure of how much an agent is improving—it's an indicator of where it started. Solutions that launch with poor baseline performance naturally show outsized gains quarter over quarter. That isn't a sign of superior technology. It reflects a weak starting point.

Generalized solutions force the health system to shoulder the burden of performance optimization and AI implementation best practices.

To reach a functional baseline, you must dedicate FTEs to continuous tuning. This delays your time-to-value, turning an efficiency win into a resource drain.

Benchmark Grades: Quarterly Optimization Rate

A+

Healthcare-Native AI Agents

High baseline, steady optimization. A 4.2% quarterly improvement reflects strong initial resolution performance.

B

Industry-Agnostic & CCaaS AI Agents

Consistent operational improvement. These solutions show estimated quarterly gains at the industry average, reflecting reliable progress.

C

CRM & EHR AI Agents

Misleading metric. Shows the highest estimated quarterly improvement at 5.9%, reflecting lower starting performance and need for ongoing FTE investment.

Industry Average:
5% Quarterly Improvement

Figure 17: Quarterly Improvement in AI Agent Successful Resolution Rate

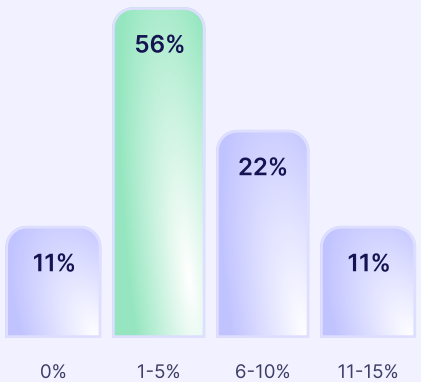


Figure 18: Quarterly Improvement in AI Agent Successful Resolution Rate by AI Agent Type

	Average	1-2%	3-5%	6-10%	10%+
All responses	4.8%	11%	56%	22%	11%
Healthcare-native	4.2%	2%	81%	10%	7%
Industry-agnostic	5.0%	5%	59%	24%	12%
Existing CCaaS platform	4.9%	27%	49%	26%	8%
Existing EHR	5.9%	22%	40%	38%	16%
Existing CRM	5.2%	5%	42%	48%	5%

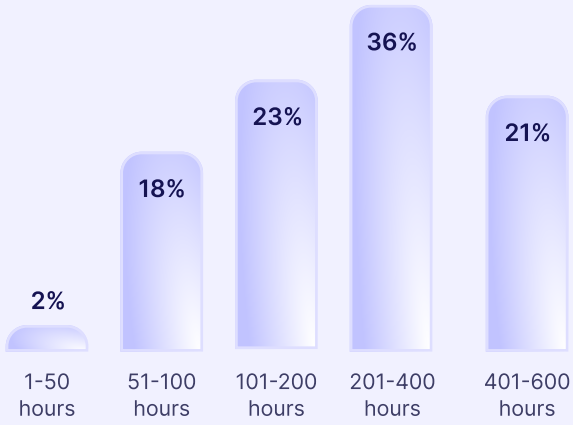
The First Phase of Value: Staff Capacity Gained

As highlighted earlier, the capacity impact of agentic AI is no longer theoretical. On average, health systems save **264** monthly staff hours across administrative and support teams.

These early wins are driven by high-volume, repeatable workflows like basic appointment management. By automating the most time-intensive interactions, organizations are quickly reducing workloads and freeing up desperately needed staff capacity.

But your architecture dictates your scale ceiling. Generalist platforms heavily skew toward the bottom, while purpose-built platforms unlock substantial capacity. These early wins are just the start. When agentic AI graduates from basic tasks to complex workflows, it doesn't just save time—it can fundamentally amplify how you scale.

Figure 19: Monthly Staff Hours Saved by AI Agents



Industry Average: 264 Hours Saved

Benchmark Grades: Staff Capacity Gains

A+

Healthcare-Native & CRM AI Agents

Unlocks significant capacity. Over a quarter of these solutions save more than 400 hours.

B

EHR AI Agents

Consistent capacity. Also exceed the industry benchmark, though they fall short at the 400+ monthly hours mark.

C

CCaaS & Industry-Agnostic AI Agents

Skew toward lower capacity. Most of these general-purpose deployments save well below the 264-hour industry benchmark.

Solution architecture	1-50	51-100	101-200	201-400	401+
Healthcare-native	0%	1%	22%	51%	27%
Industry-agnostic	0%	35%	26%	24%	16%
Existing CCaaS platform	4%	37%	30%	14%	14%
Existing CRM	3%	3%	8%	57%	30%
Existing EHR	0%	5%	5%	68%	21%

Agentic AI ROI Is Real, but It Isn't Equal

Agentic AI is delivering undeniable financial impact. On average, health systems are seeing an annual ROI of **$586K**, with **86%** of the market generating between **$250K** and **$1M**.

Only **8%** of organizations exceed the **$1M** mark, but this may reflect the industry's focus on basic, foundational use cases. As the industry moves toward advanced capabilities, those million-dollar returns will become the new standard.

But ROI is far from equal across the board. Your financial impact is directly tied to the type of solution you choose and how it integrates with your EHR.

The deciding factor is integration depth. An overwhelming **82%** of organizations with advanced EHR integrations report an annual ROI above $500K. For health systems relying on standard API-based connections like FHIR, that drops to just **18%**.

At the highest tier, the contrast is undeniable: **15%** of advanced integrations exceed **$1M** in ROI, compared to a staggering **1%** of standard connections.

Realizing seven-figure ROI doesn't happen by accident and isn't about simply adopting agentic AI. It's about how deeply it connects to your existing patient workflows and data.

Benchmark Grades: Annual ROI

A+ — **Healthcare-Native & EHR AI Agents**
Leaders in financial performance. Highest annual ROI at $719K and $708K respectively.

B — **CRM AI Agents**
Moderate financial returns. Consistently reach the $250K–$1M range, but lack deep EHR connectivity for higher ROI.

C — **CCaaS & Industry-Agnostic AI Agents**
Underperform financially. These solutions report below-average ROI overall and rarely exceed the $500K threshold.

Figure 21: Estimated Annual ROI by AI Agent Type or EHR Integration Method

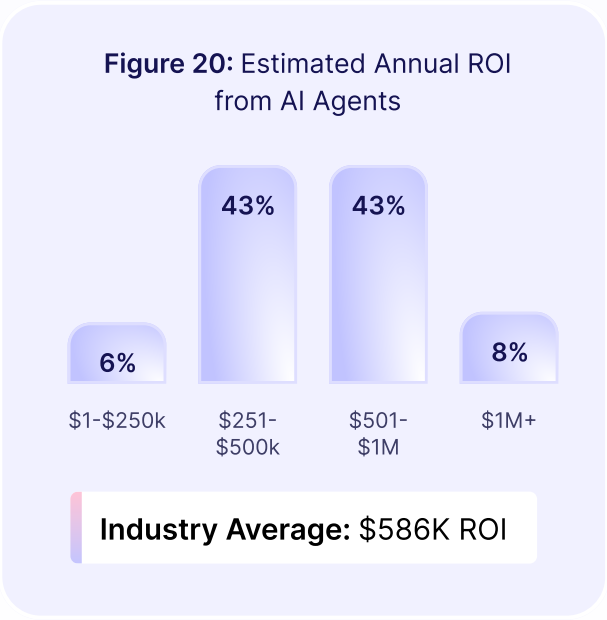


Figure 20: Estimated Annual ROI from AI Agents

	$1–$250K	$251–$500K	$501K–$1M	$1M+
All responses	6%	43%	43%	8%
Healthcare-native	1%	21%	65%	13%
Industry-agnostic	0%	74%	19%	7%
Existing CCaaS platform	18%	61%	17%	4%
Existing EHR	3%	24%	60%	13%
Existing CRM	-	42%	58%	-
EHR Integration Method				
Advanced and configurable	1%	17%	67%	15%
Standard connection	12%	70%	17%	1%

Setting the New Standard for AI Agents

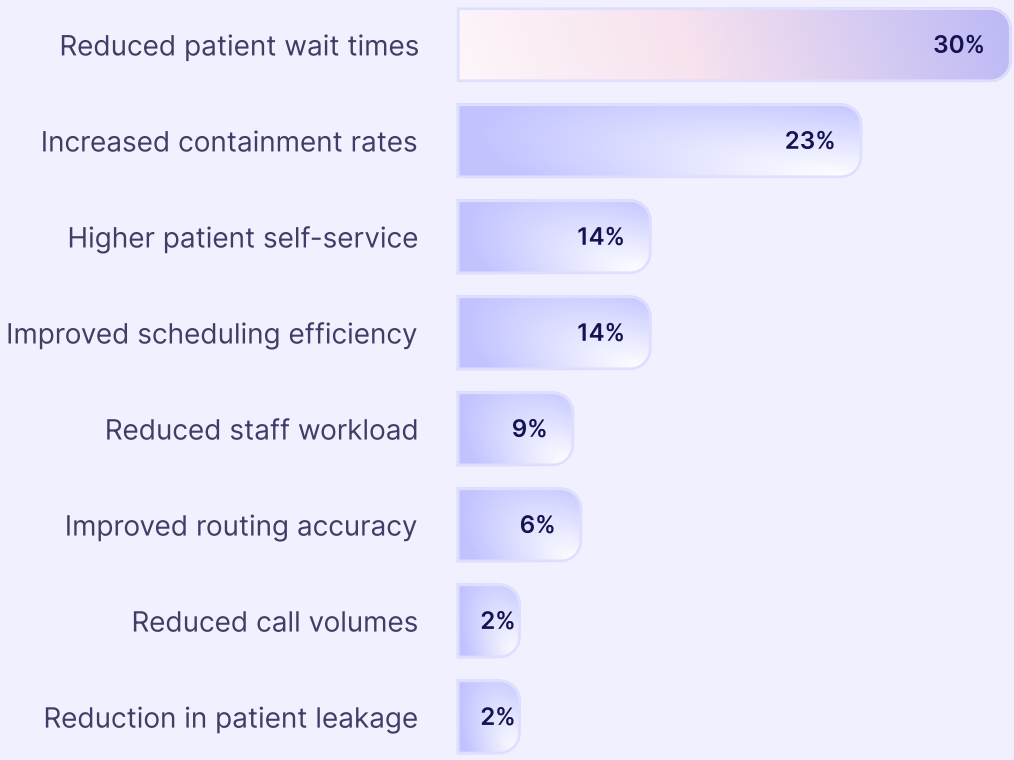
Phase One: Capacity. Phase Two: Revenue

When health systems deploy AI agents, the first measurable wins are almost always operational. Currently, **30%** of organizations cite reduced patient wait times as their top early sign of success.

These metrics prove immediate value, showing that the technology is actively fixing access bottlenecks. But stopping your measurement there is a mistake. If you only track easily measurable outcomes like wait times, you are artificially capping the perceived value of your investment.

Organizations quickly hit their initial capacity goals, yet leave the deeper, strategic value completely unmeasured. The new standard requires tracking advanced metrics that move the business forward—like scheduling efficiency and patient retention, metrics that have a real revenue impact.

Figure 22: First Measurable Indicator of Value from AI Agent



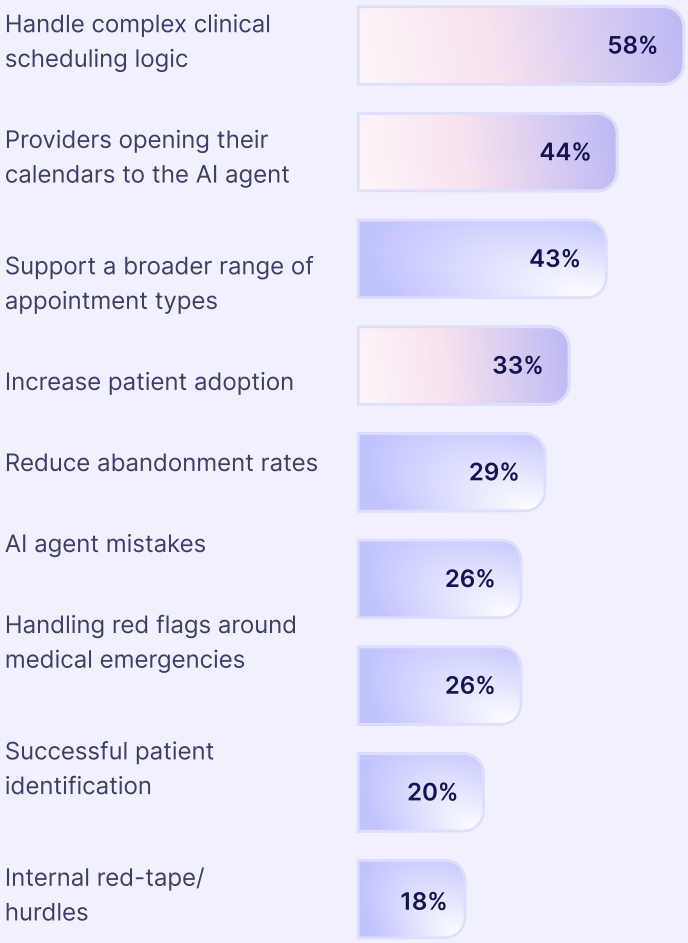
The Scheduling Bottleneck: Why Automation Stalls

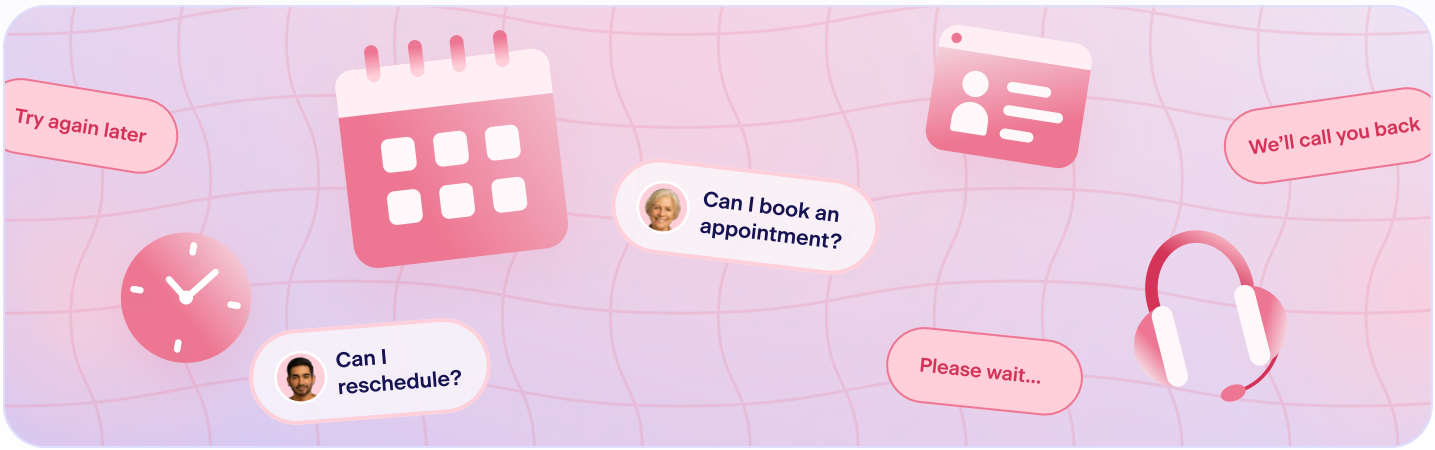
The challenge of successfully automating scheduling isn't just one-dimensional. It is a two-front battle across operational readiness and technical capability.

On the operational side, health systems are fighting human barriers. **44%** of organizations point to providers refusing to open their calendars, while **33%** cite difficulty driving patient adoption. These roadblocks ultimately come down to trust and behavior.

But even if you solve the human equation, automation will instantly stall if your tech stack isn't ready. Technical limitations are major blockers. **58%** of organizations say handling complex clinical scheduling logic is their biggest pain point, emphasizing the need to select vendors who understand the complexity of healthcare.

Figure 23: Key Pain Points in Successfully Automating Scheduling Calls with AI Agents



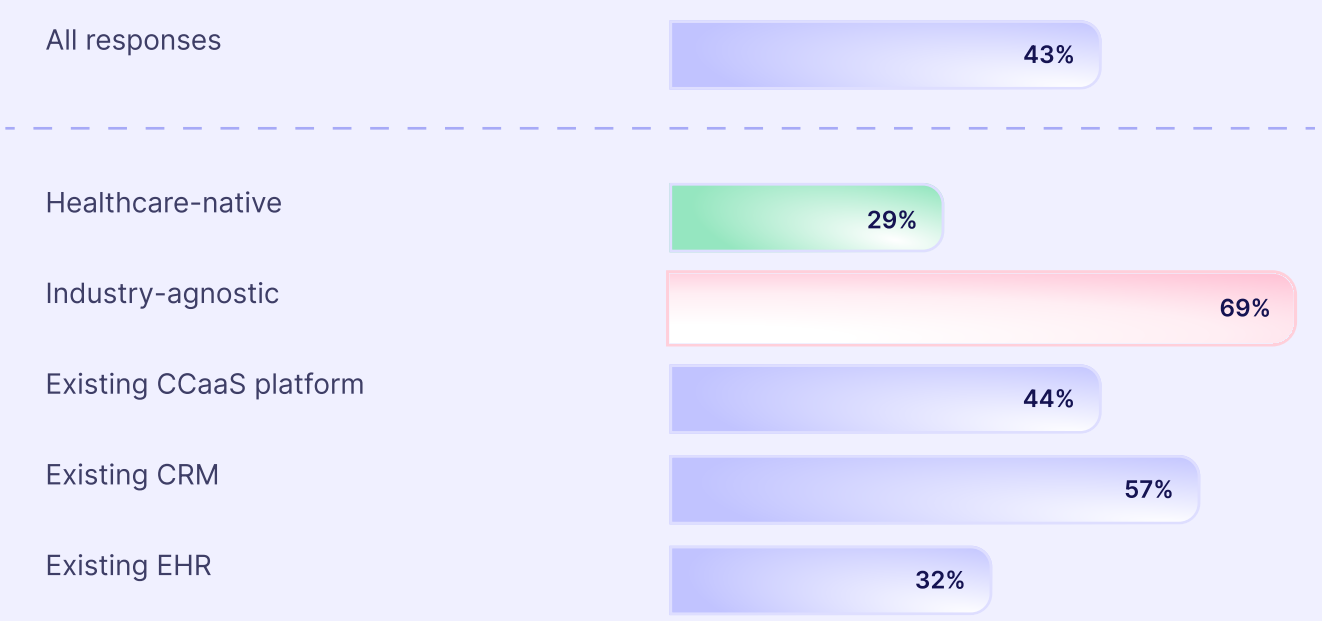


Scheduling Bottleneck Drill Down: Appointment Types

At **43%**, one of the top challenges cited by health systems is a vendor's ability to support a broad range of appointment types. This is where differences in vendor capability become most apparent. Expanding appointment types remains a major blocker for organizations using industry-agnostic platforms (**69%**) and CRM-based tools (**57%**). Among health systems using healthcare-native agentic AI, that number drops to just **29%**.

The data is clear: generalized tools simply cannot handle the nuances of clinical scheduling. Unlocking the full value of agentic AI requires more than just driving adoption—it requires technology purpose-built for the complexity of healthcare.

Figure 24: Key Pain Point Drill Down by AI Agent Type - Supporting a Broader Range of Appointment Types



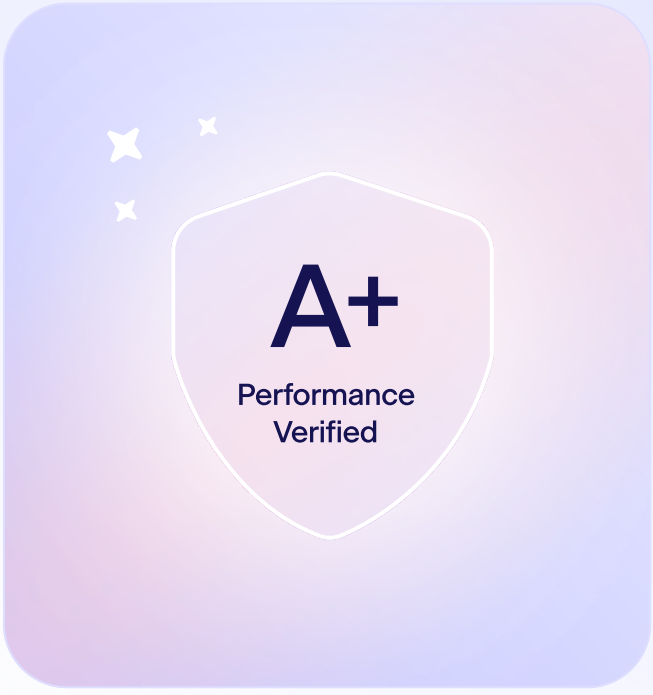
CONCLUSION

The Benchmark Is Now Set

Demos are compelling, but production data tells **the truth.**

The first wave of AI agents was all about survival—buying basic automation to plug staffing holes and reduce wait times. That era is officially behind us.

Today, widespread adoption is masking a widening performance gap. As the data proves, checking the box with a generic, industry-agnostic solution is a guaranteed path to stalled automation and drained resources.



Healthcare has entered a new phase of accountability. The true market leaders don't treat agentic AI as a digital band-aid. They are demanding healthcare-native architecture, tackling complex scheduling, and driving seven-figure returns.

Choosing the easiest solution is no longer a viable strategy.

> It’s time to stop measuring hype, and start measuring outcomes.

About Hyro

Hyro, the leading Responsible AI Agent Platform for healthcare, enables healthcare organizations to safely automate workflows and conversations across voice and digital channels, including call centers, websites, SMS, mobile apps, and more.

Trusted by more than 50 health systems, Hyro empowers its customers with AI agents that are fully HIPAA-compliant, fast to deploy, easy to maintain, and simple to scale—generating better conversations, successful patient outcomes, and revenue-driving insights.

Hyro's platform delivers voice and chat AI agents that automate high-volume inbound and outbound interactions, enabling end-to-end appointment scheduling, prescription refills, smart routing, and answers to common patient questions, as well as proactive outreach such as reminders, confirmations, and notifications at scale.

To learn more, visit hyro.ai

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