

Healthcare AI & Automation Readiness Checklist: From Curiosity to Execution: A CFO & CEO Self-Assessment

This checklist is designed for healthcare leaders operating under margin pressure, regulatory scrutiny, and private equity timelines. It helps assess whether your organization is truly positioned to operationalize automation and AI — or whether foundational gaps will limit returns.

1. Financial Process Maturity

- Provider compensation calculations are automated (wRVUs, quality, call pay, contract-specific terms)
- Compensation logic is standardized and documented, not spreadsheet-driven
- Revenue recognition is rules-based and repeatable across FFS, capitation, and value-based models
- Close cycles are predictable and not dependent on significant manual reconciliation
- Audit documentation can be produced without “fire drills”

Red flag: Finance outcomes depend on individual knowledge rather than system logic.

2. Data Alignment & Integrity

- Financial, clinical, payroll, RCM, and contract data reconcile to a single source of truth
- Definitions for productivity, margin, utilization, and performance are standardized
- EMR and financial systems are integrated without heavy manual intervention
- Historical data is clean enough to support trend analysis and forecasting
- Data latency does not delay executive decision-making

Red flag: Leadership debates whose numbers are “right” instead of what actions to take.

3. Governance, Compliance & Audit Readiness

- Contract logic is embedded into systems to alert leadership of potential concerns
- Provider compensation models can withstand regulatory and buyer scrutiny
- Revenue and compensation decisions are traceable and defensible
- AI and automation outputs are reviewed under human-in-the-loop controls
- Data access, PHI handling, and security policies are clearly enforced

Red flag: Compliance depends on manual reviews late in the process.

4. Executive Visibility & Decision Support

- Executives have real-time visibility into margins by provider, location, and service line
- Performance benchmarks are live, not static PDFs or weekly snapshots
- Predictive indicators surface risks before they hit the P&L
- Scenario modeling is used for payer mix, staffing, and reimbursement changes
- Board reporting is timely, consistent, and confidence-building

Red flag: Leadership discussions are reactive and backward-looking.

5. AI & Automation Readiness (Reality Check)

- Core financial and operational processes are standardized before applying AI
- Data quality has been assessed and rationalized across systems
- AI use cases are tied to specific financial outcomes, not experimentation
- Governance exists for where AI can and cannot be used
- AI augments professional judgment rather than replacing it

Red flag: AI tools are being tested on top of broken processes or bad data.

6. Talent & Execution Capacity

- Internal teams have clear ownership of data, automation, and analytics
- Capability gaps (data engineering, automation, AI readiness) are acknowledged
- Leadership has decided where to build internally vs. partner externally
- Transformation initiatives are actively managed, not side projects
- Execution timelines align with PE, board, or growth expectations

Red flag: Strategy exists, but execution stalls due to capacity or skill gaps.

Scoring Your Readiness

- **24–30 checks:** Positioned for scalable execution and AI-enabled value creation
- **15–23 checks:** Progress underway, but foundational gaps will constrain returns
- **Below 15 checks:** High risk of margin erosion, compliance exposure, and execution drag

Executive Next Step

Organizations seeing real returns from automation and AI are not doing more pilots, they are fixing foundations, standardizing execution, and aligning data, technology, and governance with financial outcomes.

This checklist is a starting point, not a verdict.

If your results surfaced questions your board is already asking, the next step is clarity.

- *Request a readiness discussion to pressure-test your current state or a live demo to see how high growth healthcare organizations are operationalizing these principles today.*

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