

Healthcare's Silent Revenue Collapse

Why Choosing the Wrong Patient Financing Partner Is Putting Your Health System at Risk

Executive Summary

Healthcare organizations are quietly bleeding revenue, and many don't realize how close they are to a breaking point.

Patient balances are rising faster than collections, consumer financial resilience is collapsing, and outdated financing models are leaving providers dangerously exposed. Health Systems typically collect in the 30% to 50% level of what is owed by patients. And patient revenue accounts for 30%+ of total revenue.¹ What was once a revenue challenge has become an existential threat: unchecked bad debt, abandoned care, and eroding patient trust - all leading to mounting operational strain.

The hard truth? Most patient financing strategies were built for a healthcare economy that no longer exists.

These legacy approaches don't just underperform, they increase risk, delay care, and damage the long-term financial stability of both patients and providers.

Health systems that fail to address issues and modernize patient financing now risk falling behind permanently. Delivering a seamless patient experience now means removing financial barriers while protecting revenue, compliance, and operational efficiency.

With a dynamic, non-recourse approach designed for today's healthcare finance needs, Curae is leading a fundamental shift in how health systems can safeguard both affordability of care and financial performance in an increasingly volatile financial landscape.

The Financial Pressure Facing Healthcare Today

Healthcare is no longer approaching a financial crisis, it's in one.

Rising patient responsibility, uncertainty surrounding government safety-net programs, and decades-old financing models are converging to create mounting pressure on providers. The days of stable, predictable patient revenue are gone, and with it, a piece of financial security many

¹ HFMA. "Patients as Payers. Five Ways to Improve the Patient Experience." February 10, 2023.
<https://www.hfma.org/revenue-cycle/patients-as-payers-five-ways-to-improve-the-patient-experience/>

health systems once relied on.

Hospitals can no longer afford to “wait and see” when (or if) patients will pay.

The reason? Patients are more financially responsible for care than ever before, and traditional billing cycles and in-house payment plans are misaligned with today’s healthcare consumer reality. Patients are reaching their financial breaking point. According to a U.S. News survey, 42% of Americans have no emergency savings, and 40% cannot cover a \$1,000 unexpected expense.² For millions, a medical bill isn’t an inconvenience, it’s a financial crisis.

For providers, this creates a dangerous combination: rising demand for care paired with declining ability to collect.

Health systems are expected to continue to deliver high-quality, compassionate care while assuming greater financial risk than ever before. In this environment, patient financing is no longer a back-office function, it is a necessity that directly impacts revenue integrity, patient experience, and organizational survival.

Providing modern, patient friendly financing isn’t optional anymore. It’s the difference between financial resilience and revenue collapse.

Why Traditional Financing Models Fall Short

As uncertainty stretches into 2026 and beyond, the limitations of traditional patient financing models are becoming impossible to ignore.

In-house payment plans and legacy vendor solutions are consistently failing to adapt to meet the needs of both patients and providers.^{3 4}

- Low approval rates that exclude large portions of the patient population
- Poor utilization - even among approved patients
- High administrative burden driven by reapplications, manual workflows & lack of technology
- Rigid payment terms, disconnected from patient financial reality
- Limitations from financial backers
- Increased regulatory and compliance exposure

² U.S. News & World Report. “2025 Financial Wellness Survey.” January 22, 2025.
<https://www.usnews.com/banking/articles/2025-financial-wellness-survey>

³ HFMA “New data points to financial upsides in rethinking patient payment plans”; July 24, 2025
[New data points to financial upsides in rethinking patient payment plans | HFMA](#)

⁴ Becker’s Hospital Review. “Patient Collections Fall to 48%”; February 29, 2024
[Patient collections fall to 48% | Becker's](#)

These models create friction when patients are most vulnerable, introducing confusion, anxiety, and distrust - ultimately leading to an unsatisfactory patient experience.

For providers, the consequences are severe: growing bad debt, missed revenue opportunities, ballooning operational costs, and weakened patient relationships.

The uncomfortable truth is that health systems are shouldering the cost of care without a viable path to payment.

When Was the Last Time You Gave Your Patient Financing Partner a “Check Up”?

Choosing the wrong partner will quietly undermine an organization’s financial security, while failing to regularly evaluate a current partner can be just as devastating. These 5 critical categories should be examined regularly:

1. Access & Utilization

Are approval rates high enough (80%+) to meaningfully reduce bad debt?
What percentage of approved patients actually transact and engage?

2. Operational Efficiency

Are patients forced to reapply for each episode of care?
Does the solution integrate seamlessly into EHRs and patient portals?

3. Transparency & Patient Trust

Are there hidden fees or penalties?
Is the program easy for patients to understand?
Is patient data fully protected?

4. Financial & Compliance Risk

Is the model recourse or non-recourse?
Who carries the risk of default?
How quickly are funds delivered?
Is regulatory compliance independently validated?

5. Stability & Scalability

Is funding dependent on private equity?
Can the partner scale across service lines and patient populations?
Is ROI customizable to organizational goals?



If your current partner underperforms in **any** of these areas, your organization is carrying risk and losing revenue, something that must be addressed immediately.

Curae was built to help providers adapt to today's healthcare economy and provide greater financial access to care.

Curae approves over 90% of applicants, including subprime and lower-income patients, providing expanded financial access to care. *More approvals mean more payments.*

Flexible, Transparent Financing

Patients are offered 0% interest financing with no application or early repayment fees.* A revolving line of credit up to \$10,000 allows them to manage multiple episodes of care without reapplying, which can improve patients' experience and confidence throughout their patient financing journey.

Non-Recourse Funding

Curae can fund 100% of patient responsibility upfront and absorbs the risk of default.* Providers usually receive payment within 48 hours, without balance sheet exposure or reserve requirements.

Regulatory Compliance

Curae's patient financing program complies with applicable laws and regulations, including Reg B & Reg Z to help provide the best patient financial experience. Other patient financing vendors may not.

Seamless EHR Integration

Direct integration into all major EHRs streamlines workflows, reduces staff burden, and enables a fully digital patient experience.

A Comprehensive Financial Ecosystem

From insurance discovery to patient financing and insurance premium sponsorship, Curae eliminates the need for multiple vendors while complementing existing partners where appropriate.

Results That Matter

Health systems partnering with Curae see measurable impact:

- Maximize percentage of patient revenue actually paid
- 22% reduction in patient bad debt



- 2x–3x improvement in patient collections
- 90%+ of patients approved and offered financing*
- Non-recourse funding with zero balance-sheet risk*
- \$50M–\$100M in incremental patient revenue over three years**
- Improved patient satisfaction, loyalty and NPS results

These are not marginal gains, they are *structural improvements*.

The High Cost of Standing Still

Modernizing patient financing is essential for provider survival. Every day that a health system delays, risk compounds and results suffer. Bad debt grows quietly. Patients disengage silently. Revenue erodes gradually, until it's too late.

Curae enables health systems to remove barriers to care, stabilize revenue performance, and protect long-term viability.

The question is no longer *if* a patient financing partner is needed; it is, *can your organization afford to wait?*

Interested in how Curae can improve your bottom line? Request your ROI today by using: <https://curaercm.com/roi-calculator/> or reach out to schedule a discussion.

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*Curae's patient financing program is managed by Curae and its affiliated companies, offering and servicing consumer credit accounts issued by a federally regulated bank to patients. Net of Curae's discount applied against the balance liquidated, based on each individual's risk profile.

**Actual results may vary and are dependent on implementing best practices, the patient population served, and local demographics.

Curae credit lines are issued by The Bank of Missouri, Perryville, MO.

