

4 tips for successful EHR integration during M&A

Mergers and acquisitions (M&A) in healthcare introduce complex challenges when it comes to integrating electronic health record (EHR) systems. EHR integration is not just an IT project, but a multifaceted process that touches nearly every aspect of clinical and operational workflows.

Whether one organization is acquiring another or two are merging as equal partners, the success of the integration depends on a strategy that accounts for data migration, system compatibility, regulatory compliance, staffing, and governance. To deliver the best care for patients while new tools are being adopted and standardized, healthcare organizations must begin planning early, involve key stakeholders across departments, and implement a cohesive road map that prepares them for going live and beyond.

Read on for four insights into navigating EHR integration during mergers and acquisitions, from early planning and governance to staffing and decision-making frameworks.

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1. M&A involves more complexity than a one-organization conversion, so start the process early.

Integrating EHR systems presents several common challenges, particularly the data conversion process. To ensure that data can be easily located in the new EHR, organizations must map both systems and correctly label critical data — such as patient information, appointments, and clinical data — before migrating. How health systems approach this challenge depends on their size, the capabilities of both EHR systems, and available staffing. Migrating images and archiving charts can take months to finalize, making an early start and a well-defined scope crucial for success.

When the two EHR systems being integrated are different, the acquiring organization decides which one to adopt before the acquisition is announced. But even when both organizations have the same EHR system, each instance can be different depending on how a health system has chosen to maintain and customize it, making even these transitions challenging because users and providers are accustomed to specific configurations and workflows.



Each EHR instance can differ depending on how a health system structures and maintains it. Going from one instance to another can be hard, because providers in each system have gotten used to how that instance works.

EHR integration also involves transferring ownership of legal medical records from one entity to another, ensuring that patient data is secure, all entities remain HIPAA compliant, and patients have consented to the transfer.¹ This process is time-consuming and continues well beyond the date the new EHR system goes live, so health systems should begin early in the process.

2. Involve both operations and IT teams in governance.

Most organizations already have a standard IT governance structure and will benefit from involving IT teams in governance committees from the start. They can address not only the technical aspects of EHR integration but also respond to how operational protocols might be affected. For instance, when discussing protocols for medications like insulin, IT teams can help leaders and staff understand how these protocols are built into the EHR, identify when legacy protocols and workflows are not in alignment with the new system, and address issues with adopting systems into existing workflows. IT teams can also provide valuable insight into staffing and technical support needs, ensuring that the transition is well-coordinated and effective.

It is equally important to establish operational governance. Integrating EHR systems involves significant operational changes, such as switching suppliers, third-party vendors, and medication wholesalers. By involving operations experts from both organizations — such as pharmacy directors — from day one, organizations can get a head start working on process changes and standardization. By involving both IT and operational teams in the governance structure, organizations can achieve a more seamless integration of EHR systems during M&A.

3. Don't neglect the role of staffing during and after integration.

EHR integration can have huge impacts on staffing. First, larger health systems that acquire smaller entities, such as critical access hospitals, must address operational differences in job roles and functionalities. To illustrate, in larger systems, staff may have specialized roles, whereas in smaller hospitals, individuals often perform multiple roles. A nurse in a critical access hospital might take on various responsibilities, from ICU duties to perioperative duties to administrative tasks — all within the same week. Understanding and integrating these diverse roles into the new system is a complex and time-consuming process that takes careful planning.

The need for additional staff to support the EHR system is frequently neglected during M&A. During acquisitions, consider the size of the entity being acquired and whether incremental staff are needed to support the new system, especially if there are specific changes or special builds related to the merger or acquisition. Ensuring that the organization is staffed and equipped to handle these decisions is essential for a smooth transition.



Clinicians play a key part in operational governance groups, because they help to determine how much change we introduce during mergers and acquisitions and how we manage the change. Sometimes we push changes off until after go-live, because we want to feel comfortable with how many we implement in terms of safe patient care.

4. Create a clear path forward for managing requests and decisions.

Without well-defined guidelines for managing requests and making decisions, one-off decisions and approvals can quickly escalate. In many cases, adopted workflows are based on existing health system standards, unless there is a valid reason for exceptions, and every system has its own acceptable ranges of deviation from the implementation plan. Using processes like SBAR (situation, background, assessment, and recommendation) can help leaders make informed decisions about which deviations are necessary. For instance, when working with some EHR systems, the 80/20 rule is often applied, meaning at least 80% of the workflows are adopted from current standards, with 20% variation at most. This approach helps maintain consistency while allowing for necessary adjustments.

Setting up operational touchpoints for qualified decision-makers to discuss, adjust, and sign off on deviations is vital. This collaborative approach ensures that all aspects of the transition are considered, and any potential challenges are addressed proactively.

Final thoughts

Successfully integrating EHR systems during a merger or acquisition requires early planning, cross-functional collaboration, and a strategic approach to both technical and operational challenges. From data conversion and system selection to legal record ownership and staffing considerations, each step demands careful coordination. Involving both IT and operations teams in governance ensures that decisions are informed and workflows are standardized while clear guidelines help manage requests and deviations effectively. By prioritizing these elements, healthcare organizations can navigate the complexities of M&A with greater confidence and deliver seamless, high-quality care throughout the transition.

Need help with your EHR transition during M&A?

Combining organizations is complex — your EHR shouldn't make it harder. Optum Advisory works alongside your team to simplify system consolidation, enhance interoperability, and safeguard data integrity. Together, we'll create a road map that minimizes disruption and supports your strategic goals.

Contact us at: advisory.com/optum-support

Endnotes

1. [Legal Process and Electronic Health Records](#). The American Health Information Management Association. Published November 11, 2024. Accessed September 25, 2025.



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