2026 KPMG Global Healthcare CEO Outlook



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Foreword

Healthcare leaders have been living with trade-offs for years: balancing a scarcity of people, money or beds against increasing demand. AI is a once-in-a-lifetime opportunity to change what is possible within those constraints. It will not eliminate scarcity, but, combined with the redesign of care pathways and operating models, it can help expand capacity, improve access and ease some of the trade-offs that have long defined healthcare.

Perhaps not surprisingly, rising demand creates different pressures across different parts of the healthcare ecosystem. Public providers may face more patients without matching funding, for example, while private providers may gain revenue but still need additional workforce and capacity.

Public or private, meeting that demand means funding more care. And without offsetting productivity gains or care redesign, the population's overall cost of care rises. That means higher government health spending, higher insurance premiums or higher copayments. But regardless of who pays, the overall affordability problem remains: how to fund the long-term need to transform care and improve productivity alongside the need to invest in technology, equipment and estates.

The workforce is expected to shoulder some of that load. In fact, this research finds that 91 percent of healthcare leaders expect their headcount to grow over the next three years, while some roles will experience longer-term decline. The problem is that demand is growing far faster than the available labor pool. And most healthcare CEOs now recognize they can't train or hire enough skilled people to fill the gap.

AI is no longer simply moving up the agenda; it is moving rapidly into healthcare operations. Many see it as a productivity lever — helping close the workforce capacity gap by augmenting skills and automating routine work. But in reality, its initial benefit has been to reduce the clinician administrative burden (a.k.a. "pajama time") which, in turn, helps to alleviate burnout and improve work-life balance — whether it also improves attrition rates, only time will tell.

In part, progress will depend on healthcare leaders' ability to square away their data challenges. Many express confidence in their data readiness, yet the findings also reveal practical challenges with data quality, governance and interoperability. At the same time, they will need to think more boldly. Realizing AI's broader potential requires leaders to redesign how care is provided and the operating model that supports it, rather than simply adding technology to existing pathways.

Indeed, while AI use cases are being added to the current operating model, in most systems patients still need to travel to a clinic and sit in a crowded waiting room to see a doctor. Wait times are getting longer. Patients are getting sicker. Clinical staff is burning out. Meeting rising demand sustainably requires reinvention alongside targeted improvements in today's services.

Ultimately, I believe that healthcare now needs to change in a way it has not in the last 50 or 60 years. That takes leaders with the ambition and investment to move from individual improvement programs to connected, enterprise-wide transformation. This report is intended to help those visionaries find their focus.

To learn more about the findings in this report, or to discuss your organization's unique opportunities, I encourage you to contact your local KPMG member firm.

> "Healthcare now needs to change in a way it has not in the last 50 or 60 years."



Beccy Fenton
Global Head of Healthcare
KPMG International

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About the research

The 12th edition of the KPMG CEO Outlook, conducted with 1,400 CEOs between 11 August 2026 and 21 September 2026, provides unique insight into the mindset, strategies and planning tactics of CEOs.

This report focuses exclusively on the 100 healthcare CEOs surveyed. All respondents oversee companies with annual revenues over US$500 million and a third of the companies surveyed have more than US$10 billion in annual revenue. Healthcare structures, funding models and definitions of growth vary considerably across markets, with different implications for public and private healthcare organizations. Throughout this report, we distinguish these implications where relevant.

The complete survey included CEOs from 12 key markets (Australia, Canada, China, France, Germany, India, Italy, Japan, Netherlands, Spain, United Kingdom and United States) and 13 key industry/sectors (Asset Management, Automotive, Banking and Capital Markets, Consumer, Retail and Leisure, Energy and Natural Resources, Healthcare, Infrastructure and Transportation, Insurance, Industrial Manufacturing, Life Sciences, Media, Technology, and Telecommunications).

Note: Some figures may not add up to 100 percent due to rounding.

- 1,400 CEOs surveyed worldwide
- 100 healthcare CEOs (71 publicly traded and 29 privately held)
- 12 key markets
- 13 industry sectors

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Key findings

Meeting rising demand



are confident in their company's growth prospects over the next three years.



of healthcare CEOs say rising costs or inflationary pressures will affect their organization's prosperity over the next three years.

While healthcare CEOs expect rising demand and growth, they recognize that capacity constraints and rising costs are making growth more challenging.

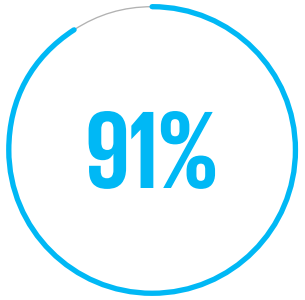
Scaling AI into care

54% say they have deployed or fully scaled AI in multiple areas and are beginning to see tangible positive outcomes. (52% at the scaling stage and 2% fully scaled.)

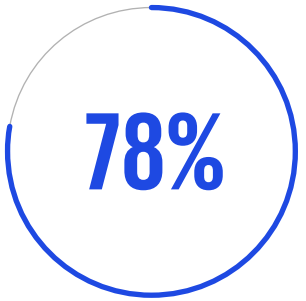
23% expect a return on their AI investment within six months to a year.

Targeted AI applications can deliver early benefits. The most value of AI will come once healthcare organizations truly transform.

Expanding workforce capacity



expect their organization's headcount to increase over the next three years.



are hiring new talent with AI and tech capabilities, up from 56 percent in 2025.

Healthcare CEOs are doubling down on their focus on the employee experience as they work to retain and retrain their existing employees and hire new ones.

Strengthening resilience

51%

are making end-to-end visibility through data, AI or digital tools their top supply chain priority.

55%

improved threat detection and security posture among the top three benefits of implementing AI.

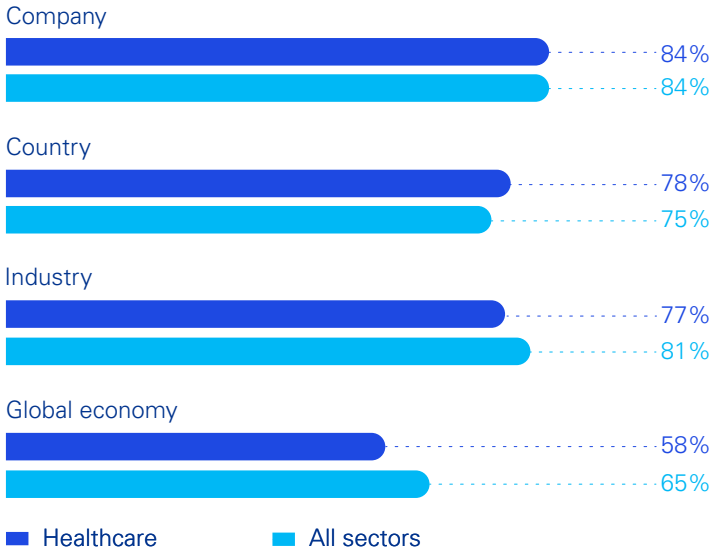
AI and digital transformation act as a double-edged sword, creating new risks but also significant new opportunities to enhance resilience and cybersecurity.

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Meeting rising demand

Against a backdrop of sagging confidence in the global economy, healthcare CEOs believe their organizations will grow over the next three years. Indeed, while 84 percent say they are confident in their company's growth prospects, confidence in the industry is lower at 77 percent, and confidence in the global economy sits at just 58 percent, suggesting that healthcare CEOs place more trust in what they can control than in the wider system around them.

Confidence in growth levels over the next three years (percent of CEOs)



Source: KPMG 2026 Healthcare CEO Outlook, KPMG International, November 2026.

"Public sector organizations don't necessarily get paid for growth and private sector organizations can't necessarily scale up fast enough to meet an increase in demand," says Beccy Fenton, Global Head of Healthcare, KPMG International. "Growth and an increase in demand can sometimes be a disadvantage when you're working with fixed capacity, fixed workforce and fixed funding."

Not surprisingly, therefore, rising costs are increasingly viewed as a pressing challenge in healthcare, where many public systems cannot raise prices to offset them. More than three-quarters (78 percent) of healthcare CEOs say they feel under more pressure to ensure the long-term prosperity of their business. And 68 percent say rising costs or inflationary pressures will affect that prosperity over the next three years.

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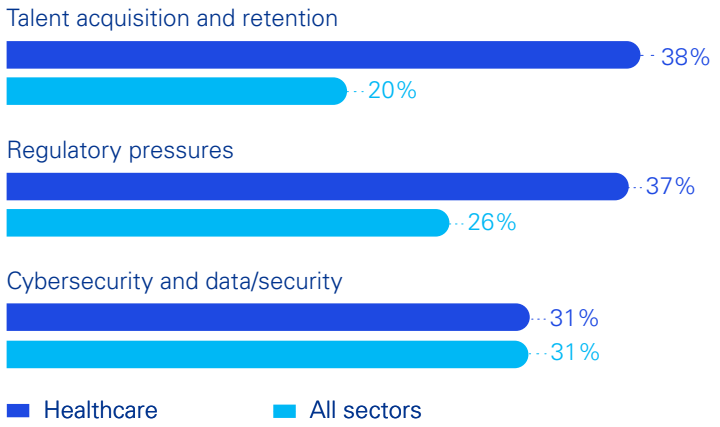
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Care remains dependent on skilled people, even as technology changes how their time and expertise are used. Workforce supply therefore remains central to healthcare capacity and growth plans. Healthcare CEOs seem more attuned to that fact. Thirty-eight percent say talent acquisition and retention is among the risks posing the greatest threat to their organization's growth, compared with 20 percent of CEOs across sectors. Regulatory pressures follow closely, cited by 37 percent.

78% of healthcare CEOs feel under more pressure to ensure the long-term prosperity of their business.

"There's an increased sense among CEOs that they need to deal with more risk," says Lydia Lee, Partner, National Digital Health Leader, KPMG Canada. "They need to be more strategic, make decisions faster, and be seen to be in the driver's seat when it comes to these higher-risk, higher-pressure situations."

Risks posing the greatest threat to growth over the next three years — where Healthcare risk exposure either equals or exceeds the market (percent of CEOs)



Source: KPMG 2026 Healthcare CEO Outlook, KPMG International, November 2026.

While it would be easy to simply focus on cutting costs, the data suggests that healthcare CEOs are focusing on the employee and patient experience as a route to growth. Asked to choose a single top operational priority to achieve their growth objectives from 12 options, 14 percent chose improving the customer experience, up from 2 percent in 2025. And 12 percent chose the employee value proposition to attract and retain top talent, three times the share of CEOs across sectors.

Healthcare CEOs are three times as likely as CEOs across sectors to identify strengthening their employee value proposition to attract and retain top talent as a top operational priority.

In certain markets, acquisitions remain part of the growth plan, with half of the healthcare CEOs in our survey saying they expect to make deals with a moderate impact on their organization. At the same time, 13 percent say organic growth is their top operational priority, suggesting that while deals may deliver some scale, many health systems continue to look to productivity and efficiency gains as a route to growth. For healthcare leaders, the test is not simply whether activity grows, but whether additional demand can be met without worsening waiting times, workforce pressure or patient experience. Growth therefore needs to be measured in usable capacity and access as well as financial performance.

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Key takeaways from this chapter:

1. **Plan capacity for rising demand.** Model how demographic change and chronic disease will affect demand over the next three years, then compare it with available staff, facilities and equipment to identify bottlenecks and prioritize investment or care redesign.
2. **Treat workforce supply as a growth risk.** Review workforce supply and regulatory exposure with the board, test whether recruitment, retention and training can support growth plans, and agree contingencies for staffing shortfalls, including task redesign and technology-enabled capacity.
3. **Build patient experience into growth targets.** Set targets for waiting times, ease of access and patient-reported experience, and review them alongside financial performance.

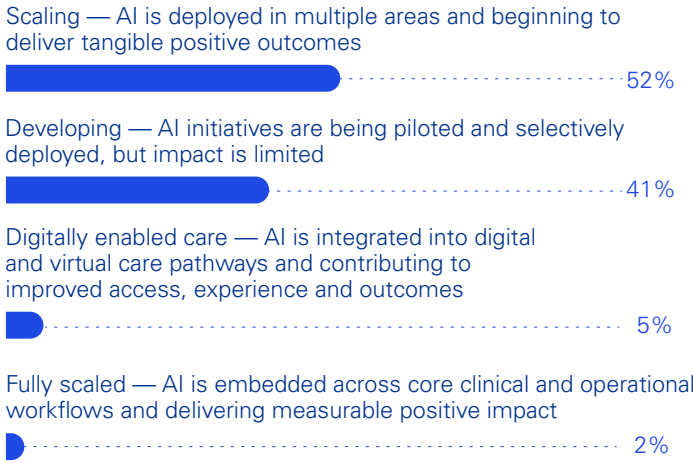
Meeting rising demand therefore requires more than isolated capacity initiatives. Leaders need to consider workforce, care models, technology and operating models together, so that improvements in one part of the organization translate into greater capacity across the system.

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Scaling AI into care

Healthcare CEOs are taking AI beyond back-office pilots and into wider use across clinical and operational areas. Many are seeing early results. In fact, more than half (54 percent) say they have deployed or fully scaled AI in multiple areas and are beginning to see tangible positive outcomes. Nearly six in ten say agents are already having a transformational or significant impact on their organization.

Organization's maturity in scaling AI from experimentation to delivering real-world impact across clinical and operational areas (percent of CEOs)



Source: KPMG 2026 Healthcare CEO Outlook, KPMG International, November 2026.

Perhaps not surprisingly, therefore, 83 percent of healthcare CEOs say that AI will be a top investment priority for their organization over the next three years, despite ongoing economic uncertainty.

Many seem to expect quick wins, with 23 percent saying they anticipate a return on their AI investment within six months to a year, up from 13 percent in 2025. In part, that likely reflects many of the first gains coming from targeted uses such as ambient voice technology (AVT). The leadership challenge is therefore to distinguish between benefits that can be realized quickly from targeted applications and those that depend on broader changes to workflows, workforce and care delivery.

59% of healthcare CEOs say agents are having a transformational or significant impact on their organization.

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"Adding AVT to an outpatient consultation may save a doctor time, but it leaves the care model unchanged," says KPMG International's Beccy Fenton. "Unlocking AI's full value requires transforming the whole care pathway — from prevention and diagnosis through treatment, recovery and ongoing support — and the operating model behind it. The opportunity is to reinvent care, not simply make today's consultations more efficient."

In the future, for example, care could anticipate needs earlier, combine proactive monitoring, AI-supported clinical decisions and care at home, virtually or in person according to patients' needs, with clinical oversight throughout. Time saved can reduce workload and improve staff experience. It becomes additional service capacity when it can be redeployed and other bottlenecks are addressed.

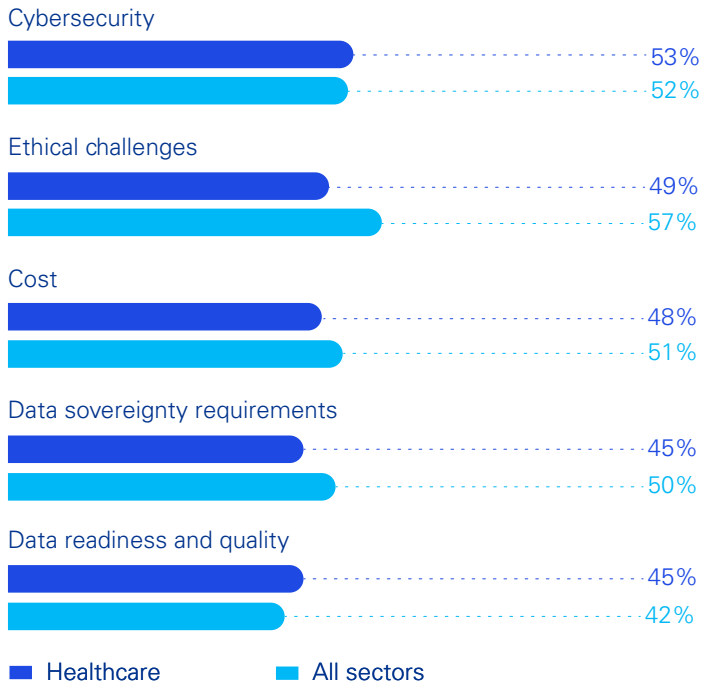
23% of healthcare CEOs expect to see a return on their AI investment within six months to a year.

While AI may be at the top of the agenda, healthcare CEOs recognize it as part of a wider digital agenda. When asked to choose their top operational priority to achieve their growth objectives, advancing digitization and connectivity across the business ranked first.

With that wider focus on digitization and connectivity comes greater appreciation for the foundations that underpin adoption and drive outcomes. And the data suggests that many healthcare CEOs feel confident in those foundations, even though they admit there is still significant room to improve.

"You can't successfully build AI on top of a manual process," says Chris Gibbons, Global Healthcare AI Lead, KPMG International. "Successfully scaling AI in healthcare requires leaders to put sustained investment into the core platforms that deliver the foundations, not just into discrete AI tools and agents."

Challenges to implementing AI in organizations (percent of CEOs)



Source: KPMG 2026 Healthcare CEO Outlook, KPMG International, November 2026.

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Take data, for example. Eighty-one percent of healthcare CEOs say they are confident in the readiness and quality of their data as they safely and effectively integrate AI (notwithstanding the fact that only 11 percent strongly agree). At the same time, 45 percent say that data readiness and quality is a challenge when implementing AI. And 62 percent say AI and data sovereignty are increasing their focus on internal data governance and control, suggesting a growing tension between perceived readiness and practical delivery. That makes data readiness a use-case decision, not simply an enterprise-level judgment: leaders need to know whether the right data is sufficiently complete, accessible and governed for the specific outcome they are trying to achieve.

62%

of healthcare CEOs say AI and data sovereignty are increasing their focus on internal data governance and control.

Key takeaways from this chapter:

1. **Build reusable foundations.** Identify shared platform and data needs across digital and AI use cases, then fund the foundations, agree common standards and assign ownership for delivery.
2. **Test your data before you scale.** Set data-quality requirements for each AI use case, test readiness against them and resolve critical gaps before deployment or expansion.
3. **Redesign care to address priority constraints.** Bring clinical, operational and technology teams together to redesign one core pathway end to end, using AI where it supports intended outcomes and testing results with clinical oversight before scaling.

The opportunity is therefore not simply to scale individual AI use cases, but to connect technology, data, workforce and care-pathway redesign as part of a wider transformation of how care is delivered.

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Expanding workforce capacity

In most healthcare settings, people are a precious resource. It is not surprising, therefore, that sector CEOs are keen to grow their workforces, with 91 percent saying they expect their organization's headcount to increase over the next three years.

In the near term, they also expect less disruption than most, with just 29 percent of healthcare CEOs saying they expect AI to lead to workforce reductions over the next 12 months, compared with 41 percent of CEOs across sectors. Over a longer horizon, however, more change is expected. Looking two to five years ahead, 59 percent say they are planning for workforce reduction in some areas as they adapt their workforce strategy to AI. These findings point to a changing workforce mix, rather than a simple choice between growth and reduction. Leaders need to plan which roles and skills to expand, where tasks may change and how retraining and redeployment will support future capacity.

91% of healthcare CEOs expect their organization's headcount to increase over the next three years.

"In today's talent-constrained environment, you simply can't grow your workforce by only thinking about a human strategy," says Lydia Lee from KPMG in Canada. "Leaders need to start thinking quite differently and creatively about workforce models, care delivery models and how they organize to meet that demand."

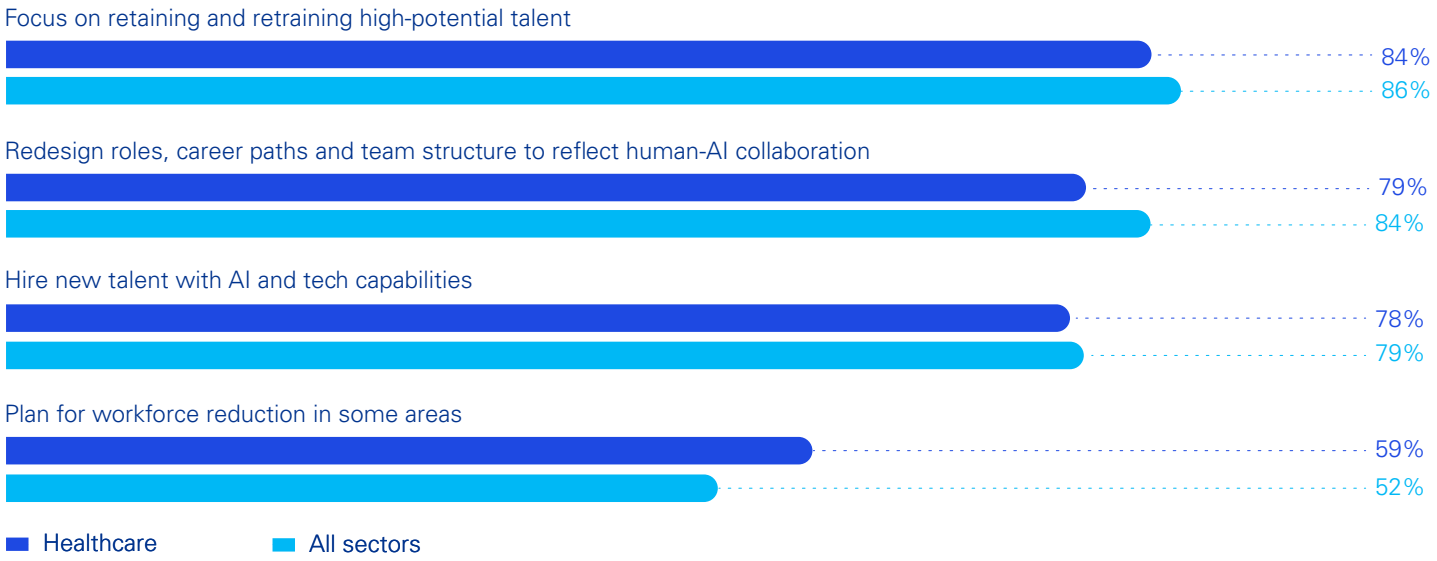
Yet more than half — 58 percent — say that skills gaps are among their organization's biggest workforce challenges. And 83 percent of healthcare CEOs say the integration of AI has made them rethink the skills required for entry-level roles.

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That is forcing many healthcare CEOs to reassess their long-term workforce strategies with AI in mind. Retaining and retraining is high on the agenda with 84 percent of healthcare CEOs saying they are focusing on that over the next two to five years, up from 71 percent in 2025. And 78 percent are hiring new talent with AI and tech capabilities, up from 56 percent in 2025. Leaders therefore need to decide where released capacity should be redeployed to support future care needs.

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How are organizations' long-term workforce strategies (2–5 years) changing in response to AI (percent of CEOs)?



Source: KPMG 2026 Healthcare CEO Outlook, KPMG International, November 2026.

While building, buying and borrowing AI-capable talent is key to helping encourage adoption and transformation, the reality is that making AI stick in health systems often depends on traditional change management and on preparing people to work with the technology.

"People go from learning a functional skill, such as clicking buttons in a system, to learning a new capability: working with technology, and working with an agent," says Chris Gibbons from KPMG in the UK. "They are having to learn to use judgment with technology."

Perhaps the biggest selling feature of AI for most healthcare workers is the technology's potential to create a better work environment and better outcomes for patients. Those benefits are top of mind for CEOs too. Sixty-three percent rank increased efficiency and productivity among the top three benefits of implementing AI and 36 percent expect AI to help remove administrative burdens from their workforce.

63%

of healthcare CEOs rank increased efficiency and productivity among the top three benefits of implementing AI.

To better unlock that value, healthcare CEOs are placing significant importance on their workforce analytics and planning tools as well as on AI-enabled clinical support and the automation of non-clinical tasks — all areas where digital solutions can help extend existing capacity. The most useful measure may therefore not be hours saved alone, but what happens to those hours: whether they reduce workload, create additional clinical capacity or allow staff to spend more time on higher-value care.

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Confidence in the importance of digital solutions in augmenting workforce capacity within healthcare systems or organizations (Extremely/Very important — percent of CEOs)



Source: KPMG 2026 Healthcare CEO Outlook, KPMG International, November 2026.

Key takeaways from this chapter:

1. **Plan the human and digital workforce together.** Map future demand against staffing and tasks AI could support, then test realistic gains before setting targets for the share of new capacity digital tools and AI can provide.

2. **Train for judgment.** Use role-specific examples to teach clinical and administrative staff to check and challenge AI outputs, spot errors and recognize when to escalate concerns in their daily work.

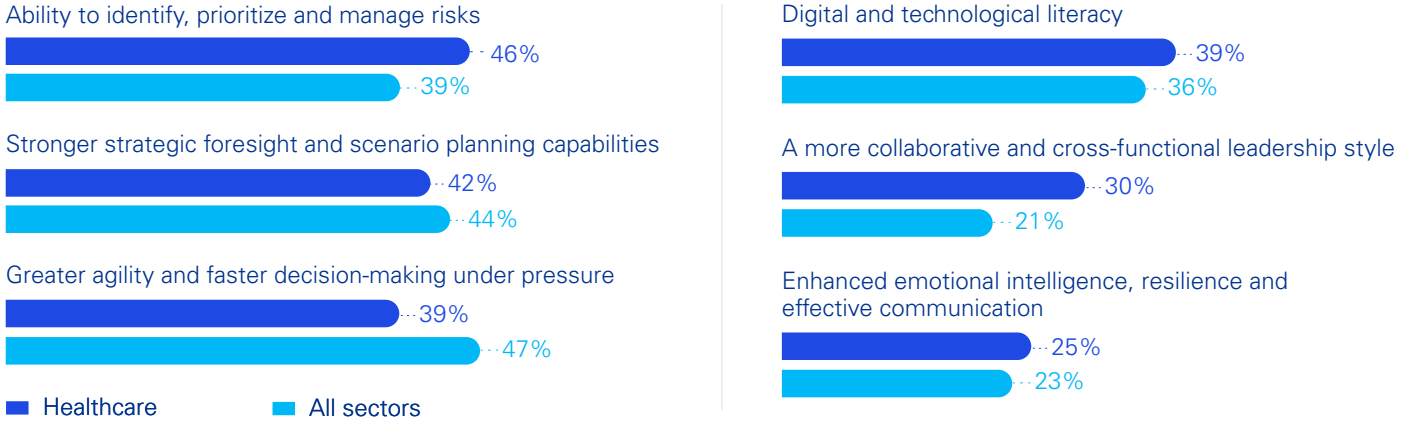
3. **Measure what released time delivers.** Compare task times by role and service before and after deployment, including checking and rework, then track how released time affects workload, usable capacity, access and quality.

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Strengthening resilience

Healthcare CEOs are treating resilience as a key growth capability, with 46 percent saying their ability to identify, prioritize and manage risks will be essential in today's fast-changing and unpredictable environment.

Which leadership capabilities are becoming most essential in today's fast-changing and unpredictable environment (percent of CEOs)



Source: KPMG 2026 Healthcare CEO Outlook, KPMG International, November 2026.

Resilience concerns are clearly high up the agenda. Almost all healthcare CEOs say they are concerned about their organization's vulnerability to cyberattacks. And 51 percent say cyber risk is a top leadership priority. That is not surprising. Healthcare data is arguably some of the most valuable data in the world, and AI is widening the attack surface around it.

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While AI may be changing the threat itself, some health systems are exploring AI-supported tools intended to improve threat detection and response times. Indeed, 55 percent of healthcare CEOs rank improved threat detection and security posture among the top three benefits of implementing AI, compared with 45 percent of CEOs across sectors.

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That being said, this research suggests the lens on resilience is opening wider. "Healthcare resilience isn't just about defending against cyber threats," says Chris Gibbons from KPMG in the UK. "It's about designing organizations that can anticipate disruption, absorb shocks, adapt under pressure and continue delivering safe, critical care whatever happens."

Resilience also depends on getting critical supplies and equipment to where care is delivered. And 51 percent of healthcare CEOs are making end-to-end visibility through data, AI or digital tools their top supply chain priority to improve resilience over the next 12 months, compared with 37 percent of CEOs across sectors.

51% of healthcare CEOs are making end-to-end visibility through data, AI or digital tools their top supply chain priority, compared with 37 percent of CEOs across sectors.

On the cost and sustainability resilience side, 47 percent of healthcare CEOs say they are planning to reduce their energy needs through efficiency measures over the next three to five years (79 percent agree that AI has the potential to support their efforts to reduce emissions and improve energy efficiency).

They are also prioritizing workforce resilience. Consider this: when asked where they have increased investment to mitigate pressing business risks over the next three years, 29 percent of healthcare CEOs say talent acquisition and retention strategies, compared with 19 percent of CEOs across sectors. And 24 percent say workforce upskilling and AI readiness. They were also twice as likely as CEOs across sectors to say employee well-being and mental health.

The common denominator is continuity of care: whether a disruption starts in technology, the supply chain, energy infrastructure or the workforce, leaders need to understand which critical services would be affected first and how long they could continue safely.

> "The pandemic reinforced the importance of resilient supply chains, and while progress has been made, there is an opportunity to go further. With the scope for disruption continuing to evolve and expand, resilience, in all its forms, should be at the very top of the healthcare CEO agenda."

Beccy Fenton
Global Head of Healthcare
KPMG International

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Targeted investments to mitigate pressing business risks over the next three years — where healthcare focus either equals or exceeds the market (percent of CEOs)



Source: KPMG 2026 Healthcare CEO Outlook, KPMG International, November 2026.

Key takeaways from this chapter:

1. **Take cyber decisions at executive level.** Make cyber risk a standing executive and board agenda item, reviewing threats to care delivery and agreeing executive owners, mitigation priorities, funding and escalation triggers.

2. **Think holistically about resilience.** Map dependencies across technology, supplies, energy and workforce, then test how disruption in one area affects the others to identify, mitigate and monitor interconnected risks.

3. **Protect your most critical services first.** Rank services by the impact of disruption on patients, agree minimum operating requirements, and fund and test fallback and recovery plans for those that must continue through cyberattacks, pandemics or supply failures.

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Key takeaways

As the gap between healthcare demand and capacity widens, CEOs recognize that hiring and isolated efficiency improvements will not be enough. AI and digital technology, combined with redesign of care pathways and operating models, can help expand usable capacity, improve access and make better use of scarce resources. The opportunity is not to eliminate scarcity, but to ease the constraints and trade-offs that limit what healthcare can deliver.

91 percent

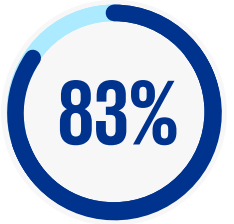
of healthcare CEOs expect their organization's headcount to increase over the next three years.

Meeting more demand within constrained resources requires leaders to retain and develop their workforce, redesign care pathways and operating models, deploy AI where it adds measurable value, and protect continuity of care.

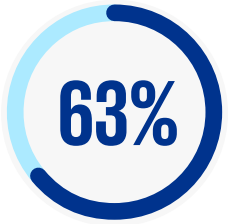
23 percent

of healthcare CEOs expect to see a return on their AI investment within six months to a year.

What healthcare CEOs are prioritizing



say AI is a top investment priority.



rank efficiency and productivity among the top three benefits of implementing AI.



are making end-to-end visibility through data, AI or digital tools their top supply chain priority.

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Five priorities for healthcare CEOs

Taken together, these priorities call for a single transformation agenda, with investment and delivery decisions guided by the outcomes healthcare needs — not separate programs competing for resources. Progress should be judged by whether patients can access care sooner, staff can use their time more effectively and critical services can withstand disruption.

01

Redesign care and operating models with AI

Select a priority pathway and define the access, quality and capacity outcomes sought, then coordinate changes to AI, workforce roles, workflows and governance around the future care model before scaling.

02

Convert productivity gains into measurable value

Verify net time released, address remaining bottlenecks and adjust workflows and schedules where appropriate, then measure improvements in access, quality, staff workload or affordability rather than assuming time saved becomes additional capacity.

03

Modernize the digital foundations

Map shared platform, data and security needs across the enterprise, then prioritize investment against transformation goals.

04

Expand capacity through workforce redesign

Map demand, skills gaps and workload, then target recruitment, retention, retraining, redeployment and removal of avoidable administrative work where they can contribute most to sustainable capacity.

05

Take a risk-based view of resilience

Map critical services and their dependencies across technology, supply chains, energy and workforce, then rank disruption risks and direct investment and continuity testing to those most likely to stop care.

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How KPMG can help

For many leaders, the challenge is no longer identifying the need to transform, but deciding where to start: why AI investment is not yet translating into capacity, which care pathways offer the greatest opportunity for redesign, how workforce plans need to change as roles and skills evolve, and which risks most threaten continuity of care.

Around the world, governments, insurers and healthcare providers turn to KPMG firms because of our wide breadth and depth of sector knowledge. We make the difference by combining deep clinical, operational, workforce, technology and financial expertise to help clients deliver care-pathway redesign, drive workforce and operating-model change, build digital foundations and unlock measurable value.

KPMG uses a multidisciplinary approach, which allows us to pull resources from across geographies, disciplines, and areas of expertise from a network of 5,000 dedicated professionals focused on healthcare in more than 70 countries, territories, and jurisdictions.

This network also includes almost 200 clinicians who have a wealth of frontline health and care experience from work as physicians, nurses, paramedics, social workers and other professions.

By collaborating globally, we are able to help ignite transformative change by leveraging a "global-local" approach that combines knowledge of domestic healthcare systems and their stakeholders with global insights, leading industry practices and subject matter experts, and a suite of market-tested digital health solutions.

Contact your local KPMG member firm to find out how we can help your organization.

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