Application Rationalization



What Are Your Legacy Applications Really Costing?

Cyber Risk. Financial Drag. Operational Complexity. Hidden Opportunity Cost.

Outdated EMRs such as MEDITECH Magic, Client Server 5.x/6.x, Epic, Oracle Health and/or legacy departmental systems frequently remain live solely to provide historical data access. While operationally minimal, these legacy systems continue to increase cost and infrastructure capacity while also creating unnecessary risk. Each year a redundant system remains online, its cumulative cost compounds – without contributing measurable strategic, clinical, or financial return.

Many legacy systems are maintained in "read-only" mode. But "read-only" does not mean:

- Risk-free
- Cost-neutral
- Operationally invisible.

Even inactive platforms require:

- Licensing and maintenance renewals
- Server, storage, power, and cooling
- Backup and disaster recovery coverage
- IT skills and labor for patching, access management, and troubleshooting
- Audit, compliance, and retention oversight.

In capital-constrained environments, maintaining non-strategic platforms represents both direct expense and opportunity cost.

Financial & Operational Impact (Industry Benchmarks)*

Structured application rationalization initiatives in healthcare commonly demonstrate:

- Five- to six-figure annual savings per retired application
- Seven-figure annual savings in large health systems conducting portfolio-wide rationalization
- 12-24-month ROI in many decommissioning initiatives
- 15-30% infrastructure footprint reduction following consolidation efforts.

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*Sources: Gartner IT Key Metrics – Healthcare Provider Industry; Gartner Application Portfolio Rationalization Research; IDC Health Insights; KLAS Research; IBM Security Cost of a Data Breach Report.

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Executive Takeaway

If a system would not materially disrupt clinical operations if retired – but continues to affect cost and risk – it warrants evaluation.

The actual cost of a legacy application is not just what appears on the invoice. It is the compounded financial, operational, and strategic drag carried each year it remains online.

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Strategic Value Beyond Cost Reduction

Retiring legacy applications enables organizations to:

✓ Reduce the cyber-attack surface
✓ Simplify disaster recovery and business continuity planning
✓ Improve EMR usability by eliminating siloed access points
✓ Streamline audit and compliance processes
✓ Reallocate capital toward AI, analytics, interoperability, and digital front door initiatives.

This is not IT housekeeping. It is way to reduce risk and save money.

5-Point Checklist For Application Rationalization

This checklist is designed to help your organization take structured, defensible steps toward safely retiring legacy applications – while preserving secure, compliant access to historical patient data.

1) Inventory Your Estate

- ☐ What legacy applications are still running?
- ☐ What versions?
- ☐ Are they hosted or on-premises?

2) Assess Risk & Cost

- ☐ Which systems are unsupported, unpatched, or costly?
- ☐ Which offer quick savings?

3) Define Data Needs

- ☐ What must be retained (e.g. labs, notes, imaging, scanned documents)?
- ☐ How long must they be retained? And for whom?

4) Plan Access Strategy

- ☐ Can legacy data be accessed via the current EMR or centralized viewer quickly?
- ☐ If so, is the data provided via a context-aware launch?

5) Identify Stakeholders For Digital Transformation

- ☐ CIO
- ☐ CMIO
- ☐ CFO
- ☐ Director of IT, Applications
- ☐ HIM Director

Smart Leaders Validate Before They Commit

Before kicking off a MEDITECH upgrade, system replacement, or M&A activity, connect with Mark, Cassie & Bobby for a brief, independent strategy review to look at ways you can reduce risk, contain cost, and streamline efficiencies by addressing your current and future legacy application estate.

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