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Indirect spend and purchased services

Indirect spend trends continue to reflect investment in workforce support, infrastructure modernization, and service-based operating models. Human resources remains the largest indirect spend category, while spending on construction, patient care, and support services increased in relative importance.

Spending patterns suggest health systems continue to balance workforce-related costs with investments that support capacity, access, and operational continuity. At the same time, infrastructure requirements, service model changes, and rising energy costs are increasing the visibility and strategic importance of indirect spend across the enterprise.

Top 10 indirect spend and purchased services spend categories

Rank	Product spend category	Portion of spend (%), summer 2026	Portion of spend (%), winter 2026[a]	Percentage point change[b]
1	Human resources	20.5	21.0	-0.5 ↓
2	Construction management	15.2	14.9	+0.3 ↑
3	Information technology	13.3	13.6	-0.3 ↓
4	Financial and accounting	13.2	13.5	-0.3 ↓
5	Patient care services	12.9	12.6	+0.3 ↑
6	Healthcare technology management	7.6	7.4	+0.2 ↑
7	Support services	3.3	3.0	+0.3 ↑
8	Facilities	3.0	3.0	—
9	Revenue cycle	2.6	2.5	+0.1 ↑
10	**Utilities**	**2.1**	—	**new**

Source: Vizient Purchased Services Analytics, March 2025–February 2026
[a] Previously ranked in the winter 2026 Outlook, with data analyzed from October 2024–September 2025.
[b] Arrows indicate increase (↑) or decrease (↓) since the winter 2026 edition.

Category movements

Increases in spend

- **Construction management (+0.3%):** Construction management increased as a share of indirect spend, reflecting continued investment in renovation, infrastructure modernization, and access expansion. Health systems are balancing capital discipline with the need to support ambulatory growth and optimize existing capacity. Rising project complexity, regulatory requirements, and sustained construction cost pressures are contributing to higher relative spend.

- **Patient care services (+0.3%):** Patient care services gained share, reflecting continued reliance on purchased services to support patient throughput and care delivery. Persistent workforce constraints and variability in patient demand are driving selective use of outsourced or supplemental clinical services, particularly in areas critical to maintaining access and capacity.

- **Support services (+0.3%):** Support services increased as organizations continue to evaluate outsourcing for non-clinical operations. Labor constraints, inflation in service contracts, and efforts to redirect internal resources toward core clinical activities are driving this shift.

Decreases in spend

- **Human resources (-0.5%):** Human resources declined in relative share but remains the largest indirect spend category. The decrease reflects slower growth relative to other categories as use of premium labor and external staffing moderates from prior peak levels. However, this shouldn't be interpreted as reduced labor pressure.

New to the top 15

- **Utilities:** Utilities entered the top 10 spend categories, displacing food and nutrition services. This change reflects energy price volatility and the energy-intensive nature of healthcare operations, rather than a change in operational strategy. Around-the-clock care delivery, aging infrastructure, and rising electricity and natural gas costs are increasing the visibility and impact of utilities within indirect spend.

Learn more about how these category movements connect to broader trends by visiting the **Spend Management Outlook**.