

Everest Group Clinical and Care Management (CCM) Operations PEAK Matrix® Assessment 2025

Focus on Accenture September 2025



Introduction

The Clinical and Care Management (CCM) market faces mounting pressures that complicate the delivery of seamless, patient-centric care. Fragmented data across EHR, claims, and lab systems leave care teams scrambling for a complete picture of each patient's journey, while persistent workforce shortages amplify the coordination burden and heighten burnout. Rising acuity, staffing constraints, and financial risk together underscore the urgency to modernize CCM operations.

In response, payers and providers are turning to specialized CCM partners that blend deep clinical expertise with next-generation technology. Generative AI and predictive risk models sift real-time multi-modal data to flag high-risk members, recommend evidence-based interventions, and automate follow-up tasks. By aligning proven workflows with intelligent automation, enterprises can boost productivity, elevate patient satisfaction, and accelerate progress toward value-based targets.

In the report, we present an assessment of 20 clinical and care management operations providers featured on the Clinical and Care Management (CCM) Operations PEAK Matrix® Assessment 2025.

This assessment is based on Everest Group's annual RFI process for the calendar year 2024, interactions with leading clinical and care management operations providers, client reference checks, and ongoing analysis of the clinical and care management operations market.

The full report includes the profiles of the following 20 leading clinical and care management providers featured on the CCM operations PEAK Matrix:

- Leaders: Accenture, Cognizant, Evolent Health, EXL, and Optum
- Major Contenders: Accolade, CareCentrix, Carenet Health, EviCore, Health Advocate, Magellan Health, Sagility, Shearwater Health, Telligen, Toney Healthcare, Wipro, and WNS
- Aspirants: Brighton Health Plan Solutions, Comagine Health, and Wellcove

Scope of this report

Geography: US

Industry: healthcare

Services: CCM operations

Everest Group's view of the clinical and care management value chain

Population data management and analytics

- Health risk assessment intake services
- Population health analytics including SDoH

Utilization management

- Pre-review
- Prior authorization
- Concurrent review
- Retrospective review and appeals

Care coordination

- · Care program enrollment and referral
- Nurse triage
- Medication adherence
- Wellness and lifestyle coaching

- Patient navigation
- Case and disease management
- Remote patient monitoring
- Telehealth

Quality improvement services

- Healthcare Effectiveness Data and Information Set (HEDIS) support
- Star rating optimization
- Risk adjustment



CCM operations PEAK Matrix® characteristics

Leaders

Accenture, Cognizant, Evolent Health, EXL, and Optum

- Leaders in CCM continue to differentiate through robust clinical talent pools, combining deep domain expertise with scalable delivery models across onshore and offshore locations
- They are advancing their offerings by embedding Al and automation into core workflows, enabling faster decision-making, reducing manual interventions, and improving consistency in clinical operations
- These providers are increasingly adopting outcome- and risk-based pricing models, aligning financial incentives with performance metrics and strengthening their value proposition for health plans

Major Contenders

Accolade, CareCentrix, Carenet Health, EviCore, Health Advocate, Magellan Health, Sagility, Shearwater Health, Telligen, Toney Healthcare, Wipro, and WNS

- To move closer to the Leaders in CCM, Major Contenders are investing in modular care management platforms, embedding automation and AI to streamline workflows and enhance clinical throughput. Many are aligning solutions with value-based care goals by integrating member engagement, predictive analytics, and social determinant insights
- While they may not yet offer fully scaled, end-toend CCM solutions across all buyer segments, Major Contenders are building credibility through performance in specialized domains. Many focus on payer-only engagements and mostly US-based delivery, which supports quality assurance but may limit cost flexibility and cross-segment applicability

Aspirants

Brighton Health Plan Solutions, Comagine Health, and Wellcove

- Aspirants in CCM typically serve niche market segments such as small and regional payers or publicsector plans, with focused offerings in areas such as care coordination, utilization review, or long-term care management. Their scale and delivery models are tailored to the needs of lower-complexity buyer groups
- While technology enablement and risk-based pricing remain areas for development, Aspirants are actively investing in outcome visibility and selective innovation to improve positioning and expand into broader care management scopes over time



Everest Group PEAK Matrix®

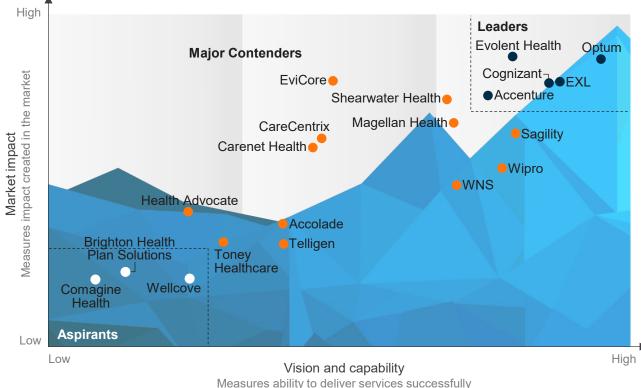
Clinical and Care Management (CCM) Operations PEAK Matrix® Assessment 2025 | Accenture is positioned as a Leader

Everest Group Clinical and Care Management (CCM) Operations PEAK Matrix® Assessment 2025^{1,2}

Leaders

Major Contenders

Aspirants



Measures ability to deliver services successfully

2 Analysis for Accolade is based on capabilities prior to its merger with Transcarent Source: Everest Group (2025)



¹ Assessments for Accolade, Brighton Health Plan Solutions, CareCentrix, Carenet Health, EviCore, Evolent Health, Health, Health, Health, Health, Health, Health, Optum, Telligen, Toney Healthcare, and Wellcove exclude provider inputs and are based on Everest Group's proprietary Transaction Intelligence (TI) database, provider public disclosures, and interactions with buyers

Accenture

Everest Group assessment – Leader

Measure of capability: Low







Market impact

Market adoption	Portfolio mix	Value delivered	Overall	Vision and strategy	Scope of services offered	Innovation and investments	Delivery footprint	Overall
	•	•	•			•	•	

Strengths

- Accenture has made substantial investments in advanced technologies, with a particular focus on gen AI to strengthen its CCM capabilities. These efforts are bolstered by a robust ecosystem of strategic partners, which enables Accenture to build a secure, Al-enabled digital core that drives scalable innovation
- To maintain a steady pipeline of clinical talent, Accenture supplements market hiring with its in-house United States Registered Nurse (USRN) build program, which enables consistent development and onboarding of US-registered nurses at scale
- Accenture is recognized for its strong client partnership approach, marked by a high degree of flexibility, responsiveness, and a proactive stance in identifying opportunities for process improvement. Clients particularly appreciate its ability to tailor solutions to specific needs and its effective use of analytics to drive informed decision-making

Limitations

• While Accenture has strong Utilization Management (UM) capabilities and a wellestablished payer presence, enterprises seeking cross-segment clinical solutions may find its provider-focused offerings comparatively less mature

Vision and capability

 Although clients acknowledge Accenture's strong capabilities, there is an opportunity to further strengthen onboarding and training processes to ensure consistent knowledge transfer and faster ramp-up for new team members

Market trends

Key drivers for the CCM market

Rising Medical Loss Ratios (MLRs)	Inflation, aging populations, and chronic disease prevalence are driving up MLRs, increasing cost pressure and forcing payers to optimize care management		
Shift to Value- based Care (VBC)	Growing VBC adoption is pushing enterprises toward outcome-tied clinical services and proactive population health strategies		
Declining Star Ratings in Medicare Advantage plans	Tighter CMS benchmarks and administrative complexity are lowering quality scores, prompting health plans to invest in care improvement initiatives		
Regulatory pressures and interoperability mandates	New rules (e.g., CMS's Interoperability & Prior Auth Rule) are compelling electronic processes, real-time APIs, and enhanced data security		

Key challenges in the CCM market

Fragmented systems and data silos	Poor interoperability and disjointed platforms and solutions hinder timely clinical decisions and care continuity, limiting the impact of even the most advanced analytics or Al solutions				
Lagging innovation in next-generation solutions	Buyers cite slow progress on next- generation automation and analytics, with service providers struggling to meet expectations for Al-driven, future- ready care management solutions				
Shortage of clinical workforce	Persistent shortages of skilled nurses and care managers are straining operational capacity, impacting service quality, and slowing scale-up of care management programs				

Key opportunities in the CCM market

Al-powered modernization	Generative and agentic AI are enabling real-time decision-making, risk stratification, and autonomous workflows, transforming clinical efficiency and personalization across the value chain				
Shift toward integrated, modular platform solutions	Health plans are replacing siloed systems with modular, interoperable platforms that unify UM, care coordination, risk, and analytics, enabling real-time data exchange, and smarter workflows				
Risk-based and delegated care models	Delegation of high-acuity services (e.g., behavioral health, imaging, pharmacy) and outcome-linked contracts open doors for service providers to deliver specialized, performance-aligned care at scale				



Provider landscape analysis

Market share analysis of the providers¹

2024; Percentage of covered market share of CCM



Provider market share by YoY growth¹

YoY growth from 2023-24 in %



¹ Providers are listed alphabetically within each range



Key buyer considerations

Key sourcing criteria

High



Cost of care reduction

Buyers seek partners who can directly lower clinical and administrative spend through AI, automation, and innovative care delivery models



Domain expertise

Buyers are seeking providers that demonstrate deep clinical knowledge to ensure accurate decisions, regulatory compliance, and efficient care execution



Buyers favor service providers with Al-powered, modular solutions that enable intelligent, compliant, and outcome-aligned care management



Skilled talent pool

Access to clinically trained, scalable talent, especially offshore is critical to support complex workflows and maintain delivery quality



Relationship management

A collaborative, responsive, and solution-oriented account approach is essential to drive long-term value and operational continuity

Low



Summary analysis

Buyers are increasingly seeking partners who can balance cost of care and talent priorities with advanced tech capabilities to support scalable, compliant, and valuebased care delivery models.

Relationship strength and clinical expertise remain critical differentiators, with vendors expected to act as strategic collaborators and bring deep domain knowledge to navigate regulatory, operational, and quality-driven complexities.

The sourcing bar has risen; service providers must now deliver across efficiency, innovation, and care impact to stay competitive in the evolving CCM landscape.

Key takeaways for buyers

As CCM shifts from transactional to outcome-based, buyers need future-ready partners with clinical depth, Al maturity, and risk-bearing capabilities that support transformation at scale



Tech maturity is now table stakes

Buyers must prioritize partners with Al-powered, modular solutions that embed human oversight to meet evolving compliance, cost, and outcome requirements



Strategic delegation yields scale and compliance



Delegating high-acuity services such as behavioral health or utilization management to specialized vendors can ensure parity, scalability, and audit readiness



Value-based models require shared accountability

Buyers should seek vendors ready to engage in sharedrisk, outcomes-tied contracts to align incentives across the care journey

Appendix

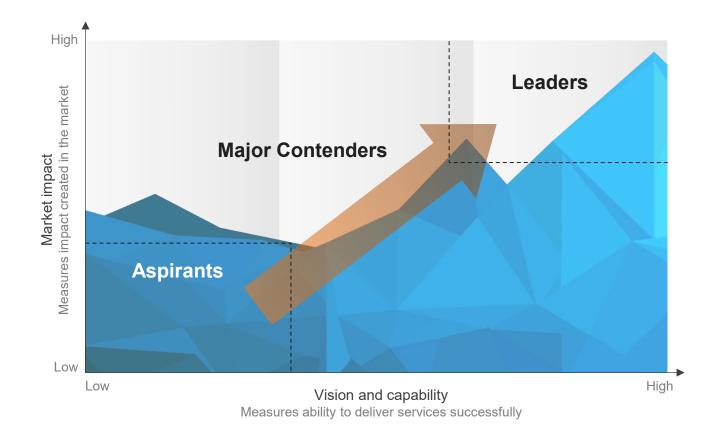
PEAK Matrix® framework

FAQs



Everest Group PEAK Matrix® is a proprietary framework for assessment of market impact and vision and capability

Everest Group PEAK Matrix





Services PEAK Matrix® evaluation dimensions

Measures impact created in the market captured through three subdimensions

Market adoption

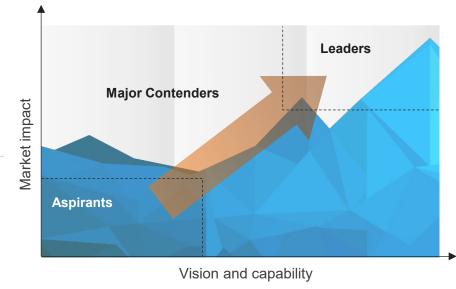
Number of clients, revenue base, YoY growth, and deal value/volume

Portfolio mix

Diversity of client/revenue base across geographies and type of engagements

Value delivered

Value delivered to the client based on customer feedback and transformational impact



Measures ability to deliver services successfully. This is captured through four subdimensions

Vision and strategy

Vision for the client and itself: future roadmap and strategy

Scope of services offered

Depth and breadth of services portfolio across service subsegments/processes

Innovation and investments

Innovation and investment in the enabling areas, e.g., technology IP, industry/domain knowledge, innovative commercial constructs, alliances, M&A, etc.

Delivery footprint

Delivery footprint and global sourcing mix



FAQs

- Q: Does the PEAK Matrix® assessment incorporate any subjective criteria?
- A: Everest Group's PEAK Matrix assessment takes an unbiased and fact-based approach that leverages provider / technology vendor RFIs and Everest Group's proprietary databases containing providers' deals and operational capability information. In addition, we validate/fine-tune these results based on our market experience, buyer interaction, and provider/vendor briefings.
- Q: Is being a Major Contender or Aspirant on the PEAK Matrix, an unfavorable outcome?
- A: No. The PEAK Matrix highlights and positions only the best-in-class providers / technology vendors in a particular space. There are a number of providers from the broader universe that are assessed and do not make it to the PEAK Matrix at all. Therefore, being represented on the PEAK Matrix is itself a favorable recognition.
- Q: What other aspects of the PEAK Matrix assessment are relevant to buyers and providers other than the PEAK Matrix positioning?
- A: A PEAK Matrix positioning is only one aspect of Everest Group's overall assessment. In addition to assigning a Leader, Major Contender, or Aspirant label, Everest Group highlights the distinctive capabilities and unique attributes of all the providers assessed on the PEAK Matrix. The detailed metric-level assessment and associated commentary are helpful for buyers in selecting providers/vendors for their specific requirements. They also help providers/vendors demonstrate their strengths in specific areas.
- Q: What are the incentives for buyers and providers to participate/provide input to PEAK Matrix research?
- A: Enterprise participants receive summary of key findings from the PEAK Matrix assessment For providers
 - The RFI process is a vital way to help us keep current on capabilities; it forms the basis for our database - without participation, it is difficult to effectively match capabilities to buyer inquiries
 - In addition, it helps the provider/vendor organization gain brand visibility through being in included in our research reports

- Q: What is the process for a provider / technology vendor to leverage its PEAK Matrix positioning?
- A: Providers/vendors can use their PEAK Matrix positioning or Star Performer rating in multiple ways including:
 - Issue a press release declaring positioning; see our citation policies
 - Purchase a customized PEAK Matrix profile for circulation with clients, prospects, etc. The package includes the profile as well as quotes from Everest Group analysts, which can be used in PR
 - Use PEAK Matrix badges for branding across communications (e-mail signatures, marketing brochures, credential packs, client presentations, etc.)

The provider must obtain the requisite licensing and distribution rights for the above activities through an agreement with Everest Group; please contact your CD or contact us

- Q: Does the PEAK Matrix evaluation criteria change over a period of time?
- A: PEAK Matrix assessments are designed to serve enterprises' current and future needs. Given the dynamic nature of the global services market and rampant disruption, the assessment criteria are realigned as and when needed to reflect the current market reality and to serve enterprises' future expectations.

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