Everest Group®

Everest Group Healthcare Payer Intelligent Operations PEAK Matrix® Assessment 2026

Focus on Accenture

February 2026

PEAK MATRIX®

Introduction

Health plans are operating under sustained pressure from volatile medical costs, constrained premium growth, and fragmented legacy cores. At the same time, regulatory and quality requirements are intensifying, with CMS advancing interoperability and real-time prior authorization mandates, and NCQA raising standards for provider data accuracy and governance. These challenges are compounded by persistent staffing constraints, driving rework, leakage, and inconsistent service across core operations.

Healthcare payers are moving away from traditional FTE-led BPO models toward intelligent, technology-led operations. They are prioritizing end-to-end journey orchestration, outcome-linked commercials, and the production use of gen and agentic AI across areas such as document processing, provider data management, guided interactions, and knowledge retrieval. In response, providers are differentiating through cross-functional teams that integrate operations expertise with automation, increased focus on BPaaS and platform-led models, deeper hyperscaler partnerships, and verticalized AI strategies.

In the report, we present an assessment of 33 service providers featured on the Healthcare Payer Intelligent Operations PEAK Matrix® Assessment 2026.

This assessment is based on Everest Group's RFI process for the year 2025 (period of assessment being from July 2024 to June 2025), interactions with leading healthcare payer operations service providers, client reference checks, and ongoing analysis of the payer back-office operations market.

The full report includes the profiles of the following 33 leading payer operations providers featured on the Healthcare Payer Intelligent Operations PEAK Matrix :

- **Leaders:** Accenture, Cognizant, Conduent, EXL, Firstsource, NTT DATA, Optum, Sagility, and Wipro
- **Major Contenders:** Acentra Health, Carenet Health, Concentrix, ECLAT Health Solutions, Evolent Health, Gainwell Technologies, Genpact, HCLTech, IBM, Infosys, Mphasis, Omega Healthcare, Shearwater Health, Smart Data Solutions, SS&C Health, Sutherland Global Services, TTEC, UST Healthproof, WNS, and XBP Global
- **Aspirants:** Access Healthcare, Hexaware, Vee Healthtek, and Viaante

Scope of this report

Geography: US

Industry: healthcare payer

Services: healthcare payer back-office intelligent operations

Scope of the evaluation

Evaluating provider performance across healthcare payer intelligent operations

Geography

The analysis is focused on service providers catering to the US health plan market.

Segments in scope

This includes a complete coverage of all vertical-specific back-office operations of a health plan (as mentioned in the value chain).

Functions assessed

This includes plan development, member engagement, provider network management, care and clinical operations, claims management, and risk and compliance functions.

Service providers

33 service providers have been positioned as Leaders, Major Contenders, or Aspirants on the Healthcare Payer Intelligent Operations PEAK Matrix® Assessment 2026.

Key points considered

Technology (platform, automation, and analytics)-enabled intelligent business process operations for health plans' back-office, with an application of gen AI and agentic AI components is included in the scope

Excluded from scope

- IT services and standalone technology products (SaaS license based) for healthcare payer operations
- Front-office or customer service operations for the health plans

Healthcare Payer Intelligent Operations PEAK Matrix® characteristics

Leaders

Accenture, Cognizant, Conduent, EXL, Firstsource, NTT DATA, Optum, Sagility, and Wipro

- Leaders are investing in technology through proprietary platforms and strategic partnerships, combining process expertise with evolving BPaaS constructs. They are also shifting from standalone RPA bots to embedded, end-to-end workflow automation, along with human-in-the-loop oversight
- The providers here have a centralized AI enablement strategy, with some Leaders taking a verticalized approach by building an AI-first layer over core platforms to bring in ease of standardization. However, others are prioritizing embedding gen AI and agentic AI components in specific functions, to accelerate measurable outcomes without overhauling the full stack

Major Contenders

Acentra Health, Carenet Health, Concentrix, ECLAT Health Solutions, Evolent Health, Gainwell Technologies, Genpact, HCLTech, IBM, Infosys, Mphasis, Omega Healthcare, Shearwater Health, Smart Data Solutions, SS&C Health, Sutherland Global Services, TTEC, UST Healthproof, WNS, and XBP Global

- The majority of Major Contenders are approaching intelligent AI operations through modular, point-based interventions rather than end-to-end process transformation. They are leading with drop-in components, such as document AI, workflow routing, rules engines, and analytics workbenches, solving specific bottlenecks
- Most of the Major Contenders are primarily niche specialists rather than end-to-end providers. Their expertise is concentrated in specific back-office towers such as risk-adjusted coding, provider credentialing, clinical operations, and claims, instead of managing the full payer operations stack
- The providers here are also focusing on high-growth small and mid-sized health plans with leaner and more agile operating models

Aspirants

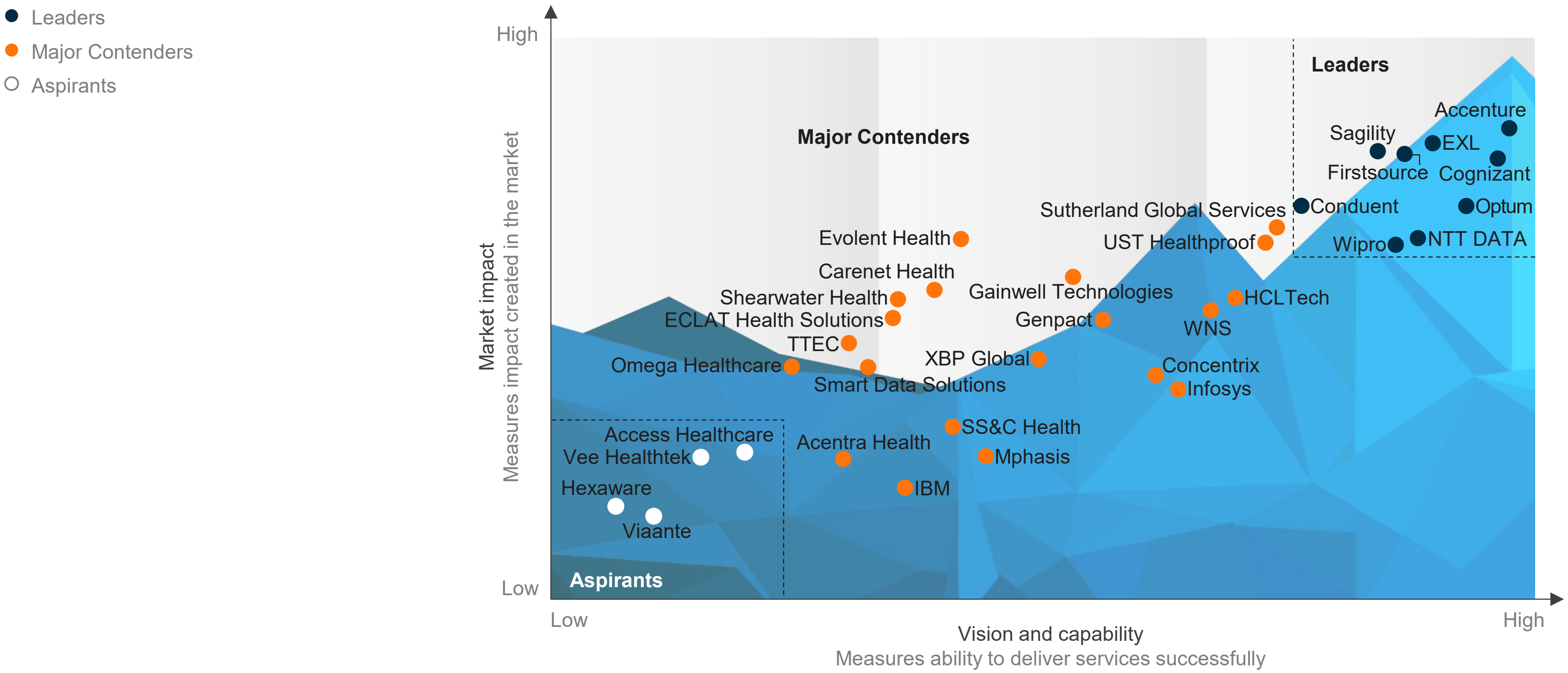
Access Healthcare, Hexaware, Vee Healthtek, and Viaante

- Aspirants are typically execution-focused delivery partners for defined back-office towers. They have a modest operating scale and flexible staffing for functions
- Their delivery approach is largely offshore-centric, resulting in a relatively cost-effective service delivery model, needed for high-volume process-driven engagements
- The technology advancements of the providers are relatively limited, with less evident gen AI or agentic capabilities and payer-specific platforms

Everest Group PEAK Matrix®

Healthcare Payer Intelligent Operations PEAK Matrix® Assessment 2026 | Accenture is positioned as a Leader

Everest Group Healthcare Payer Intelligent Operations PEAK Matrix® Assessment 2026[1]



1 Assessments for Access Healthcare, Acentra Health, Evolent Health, Gainwell Technologies, Genpact, Hexaware, Mphasis, Optum, Shearwater Health, Smart Data Solutions, SS&C Health, and Vee Healthtek exclude provider inputs and are based on Everest Group's proprietary Transaction Intelligence (TI) database, provider public disclosures, and interactions with buyers
Note: Evaluation of WNS does not reflect Capgemini's capabilities, as the acquisition was completed after the evaluation period
Source: Everest Group (2026)

Accenture

Everest Group assessment – Leader

Measure of capability: Low High

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

Strengths

- Accenture offers solutions across the payer back-office value chain, with scaled delivery in claims, enrollment, provider management, utilization management, and clinical operations, backed by domain-aligned talent and automation-enabled platforms
- Accenture's AI-First Reinvention (ART) methodology, enabled by SynOps, offers an integrated transformation backbone, spanning reimagination of work and an intelligent workbench redesign, helping clients achieve measurable OpEx reduction and faster time-to-value
- Referenced buyers highlight satisfaction with Accenture’s flexibility, collaboration, and technical expertise, supported by mature delivery mechanisms
- To bring in differentiation, Accenture has expanded its technology as well as domain partnerships, including NVIDIA for the prioritization of AI use cases, along with acquisitions for augmenting health consultancy and AI capabilities, such as Consus Health, Cognosante, and Ammagamma

Limitations

- Accenture continues to be viewed as a premium player by buyers, with service cost being highlighted as an area with a scope for improvement
- Opportunities exist for further development in dedicated payment integrity services, with proprietary assets and scaled deployments, as compared to other specialists in this space

Market trends

Cost pressure, regulatory scrutiny, and talent gaps are pushing healthcare payers toward intelligent, AI-enabled back-office operations

Market size and growth

- The healthcare payer back-office business process operations market is estimated to be valued at US$26-28 billion in 2025
- Further, it is expected to grow at a CAGR of 5–6% between 2025 and 2027, as healthcare payers grapple with rising Medical Loss Ratio (MLR), margin pressures, and workforce shortages along with fragmented legacy core systems

Key drivers in the payer intelligent operations market

Administrative cost takeout	Payers are under sustained margin pressure from rising medical costs, competitive pricing, and increasing administrative complexity, requiring an operating model redesign and tech-led simplification to bend the admin cost curve without compromising service levels.
Regulatory changes	Regulatory changes are creating a recurring pressure to update policies, configure systems quickly, strengthen governance, and improve reporting/traceability across functions.
Talent shortages and workflow transformation	Increasing workforce churn is causing payers to redesign work around human+automation, invest in faster onboarding/knowledge enablement, and build more flexible capacity models to maintain SLAs and quality.

Challenges

Fragmented platform and data silos	Core admin, claims, UM, CRM, payment integrity, and provider systems often do not share data cleanly. This creates rework, inconsistent decisions, and limited end-to-end visibility for members and providers.
Complex operating model across products, LoBs, and states	Different rules for Medicare/Medicaid/Commercial, state-specific requirements, and employer customizations create an environment where standardization is hard. Teams end up running multiple mini-factories, increasing costs and the risk of errors.
Trust, governance, and risk in AI adoption	Using AI for decisions introduces concerns around explainability, bias, PHI security, and auditability. Without strong governance, it may be difficult for pilots to scale.

Provider landscape analysis

Accenture, Cognizant, Conduent, Evolent Health, Gainwell Technologies, and Optum stand out as the largest service providers in terms of market share

Market share analysis of the providers[1,2]

July 2024 – June 2025

1 Providers are listed alphabetically within each range

2 The analysis is based on the above mentioned 33 service providers

Key buyer considerations

Buyers prioritize measurable savings and operational resilience, backed by strong domain expertise and AI-enabled delivery at scale

Key sourcing criteria

Priority: High → Low

Cost reduction / Savings

Buyers look for partners who can deliver measurable cost savings through operational efficiencies or process improvements

BCP / Risk mitigation strategies

Buyers expect strong continuity planning that ensures that critical operations continue during unexpected disruptions, with tested playbooks and clear accountability for incident response

Technical expertise

Buyers look for partners with strong data, analytics, and automation/AI capabilities to modernize payer workflows at scale

Domain expertise

Buyers prioritize the depth of industry knowledge and process understanding, such that the provider can deliver context-aware healthcare operations

Client/Account management

Buyers want effective relationship management with consistent responsiveness, issue handling, and account flexibility

Implementation management

Buyers look for smooth transition execution, including rigorous planning, complete knowledge transfer, and minimal disruption to business-as-usual during go-live

Summary analysis

- Buyers are anchoring decisions based on the expected savings generated through process efficiency and advanced technology applications, along with risk mitigation strategies. They want partners who can be cost effective, while safeguarding day-to-day continuity
- Domain expertise and client management remain key separators. Providers are expected to bring deep industry and process knowledge, along with technical expertise, to manage the relationship with responsiveness, strong issue handling, and flexibility
- The net result is a higher sourcing bar with providers demonstrating end-to-end efficiency, resilience, and targeted innovation to remain competitive

Key takeaways for buyers

As sourcing shifts from transactional to outcome-driven models, buyers should prioritize partners that prove operational efficiency, demonstrate tested business continuity, and bring domain depth, underpinned by pragmatic AI and platform-led execution

AI-enabled operations with measurable impact

Payers should prioritize partners that go beyond pilots and point solutions and focus on outsourcing models where **AI is embedded into core operations –** such as MLR improvement, productivity gains, and accuracy uplift – rather than standalone automation or analytics initiatives

Explore BPaaS models to fast-track transformation

Payers should increasingly evaluate **platform- and BPaaS-led models** that bundle technology, data, and operations to drive faster time-to-value

Outcome-aligned commercials to align incentives

As transformation risk increases, payers should increasingly adopt **outcome-based and gainshare-led commercial models** that tie provider compensation to delivered business results, improving accountability while sharing upside

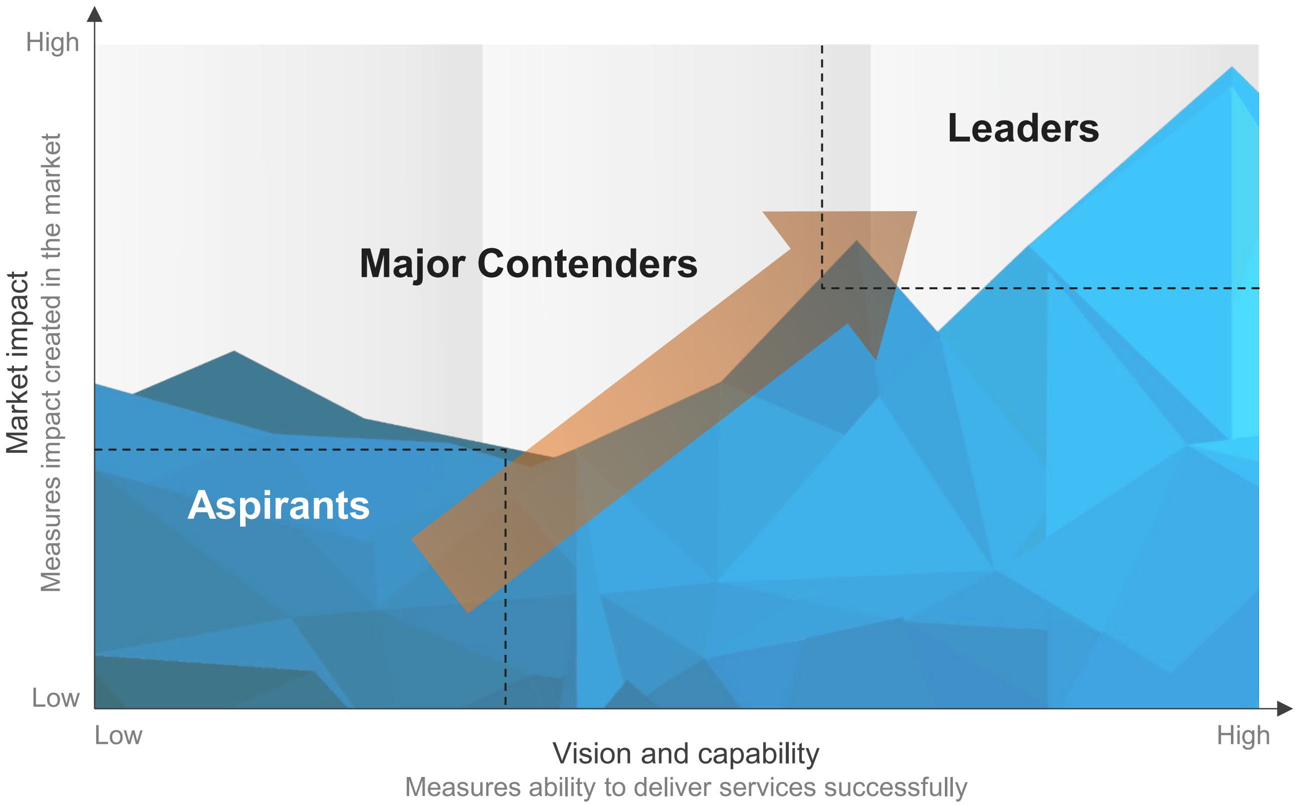
Appendix

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



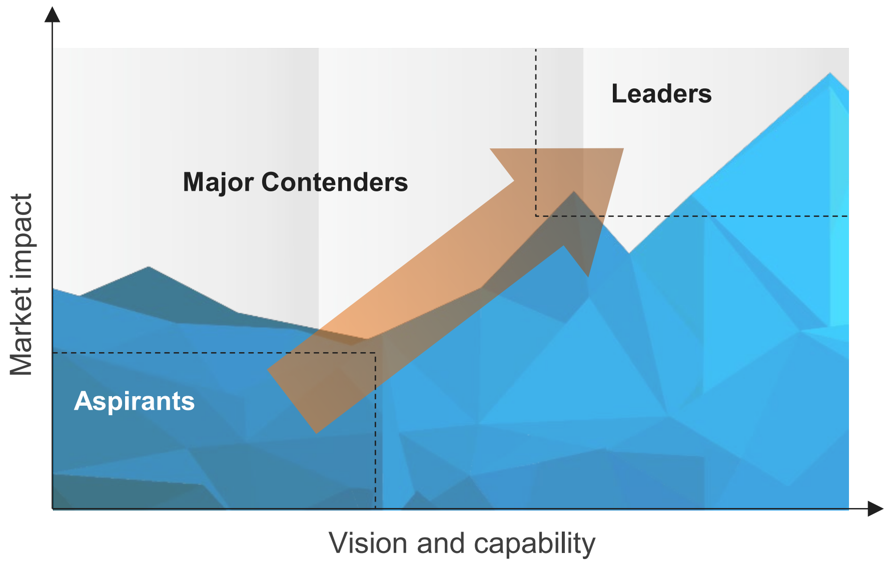
Services PEAK Matrix® evaluation dimensions

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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