

# Healthcare Digital Services

## Payer Digital Transformation Services

A research report comparing provider strengths,  
challenges and competitive differentiators

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Report Author: Ron Exler

### Digital services improve health outcomes and business results

The COVID-19 pandemic has caused 1.6 million deaths in the U.S. as of this writing. While death rates are falling, the physical and mental consequences for individual health outcomes will continue for decades. Long COVID-19 symptoms might last a lifetime, while much remains unknown about longer-term health effects. As was the rest of the society, the U.S. healthcare system was unprepared for the rapid change in demand for care, hospital beds, equipment and personal protective equipment (PPE). The industry is making changes to respond to the disease and to accommodate the increasing demand for healthcare services. Digital transformation and IT services are helping stakeholders in all parts of the healthcare ecosystem deal with the present and be future ready.

Among the service providers we communicated with, we repeatedly heard they are meeting clients where they are, rather than pushing specific agendas. Where they are, from a technology perspective, is reflected in recent ISG research that shows relatively low levels of adoption for many technologies (Figure 1).

Where the healthcare organizations are headed is reflected in the industry trends that emerge from this research:

- Increasing focus on health equity
- Industry convergence and interconnection
- Better stakeholder experiences
- IT modernization to reach desired outcomes
- Evolving economics of healthcare

U.S. healthcare  
industry is slowly  
**evolving** to  
**face complex**  
**challenges.**



## Executive Summary

### Increasing focus on health equity

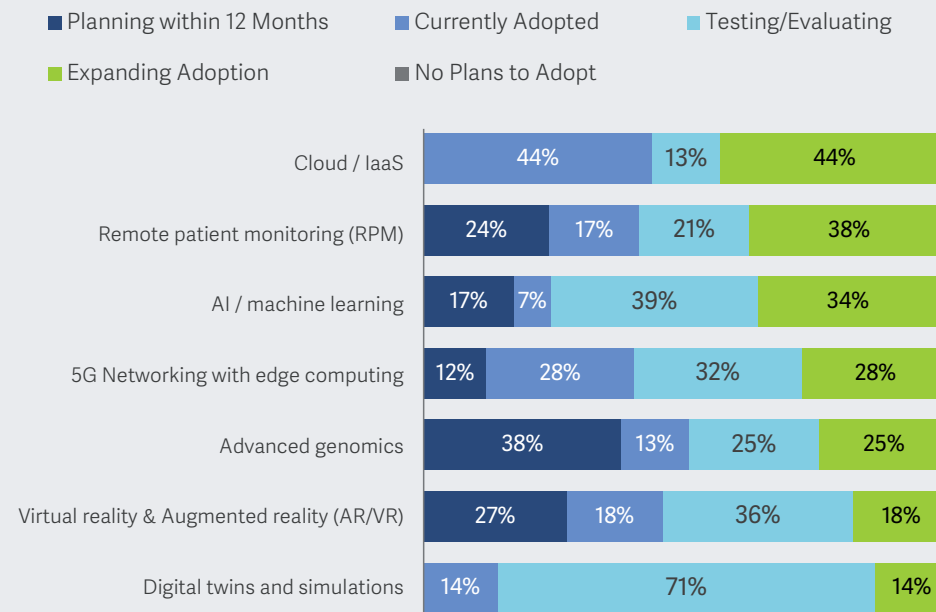
People and institutions in the U.S. are driving the healthcare industry to focus on equity and recognition of the social determinants of health (SDOH). Traditional company roles are no longer relevant. Payers are moving beyond benefits administration to sharing the responsibility of overall health with their members. Favorable health outcomes start with behavior change. Providers see how health is affected by everything that people do. They are also challenged to proactively identify people who are the most vulnerable. Thus, they seek ways to engage and interact at homes, workplaces and in the broader community, leading to an increased focus on using electronic medical records (EMRs) and SDOH through descriptive and predictive analytics, machine learning and NLP. Public health promotion programs

and self-care awareness are critical to improving individual and population health outcomes.

At the same time, there is a desire to treat individuals as unique. Awareness of behavioral and mental health is higher now, leading to a recognition of the need for proactive care. An increased focus on treating people as individuals drives uses of advanced data models and algorithms for early diagnosis and prevention. Integrated health uses a whole-patient approach while incorporating knowledge from SDOH.

Payers use a growing number of value-based care (VBC) agreements because Medicaid and Medicare programs provide incentives and rewards for positive health outcomes. Reluctant providers are slowly accepting both upside and downside risks. The transition from fee-for-service to VBC increases the focus on wellness, prevention, early detection and

### Figure 1: Technology Adoption Status



Source: ISG Research 2022 Healthcare and Life Sciences Survey



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the management of chronic and acute diseases. VBC remains a small but growing portion of the healthcare business.

### Industry convergence and interconnection

Payers and providers are crossing into each other's traditional businesses. The value proposition of health plans is eroding while providers consolidate to face threats from new entrants. Large healthcare players, such as Anthem, CVS and UnitedHealth Group, invest more in acquisitions and models such as "payviders." Some payers are diversifying by acquiring their hospitals, while providers are adopting insurance models. Consumers of healthcare services seek unified consumer experiences. Payers want to connect to patient EMRs, usually for use cases such as prior authorization and complex case management. Providers use APIs to exchange data with online

portals and mobile apps that help them have a complete view of their patient health data.

The need to better connect with the healthcare ecosystem is leading to a focus on improving data management and governance; integrating payer and provider systems is one of the most dynamic aspects of the healthcare market today. Integration and cooperation between payers and providers are essential to improve disease prevention and to have a better focus on therapies that deliver better health outcomes.

To enable this convergence, along with compliance with government mandates, a seamless flow of clinical and non-clinical information must occur across the healthcare ecosystem. When health information systems are better integrated, payers can develop an enhanced understanding of their utilization rates and better demand for services.

### Better stakeholder experiences

Healthcare in the U.S. continues to receive low customer satisfaction ratings, according to research from the American Customer Satisfaction Index. Healthcare consumers and employees seek:

- Improved access to doctors and hospitals
- Better call center services
- More insurance plans with price transparency
- Easier claims submission
- Timelier claims processing

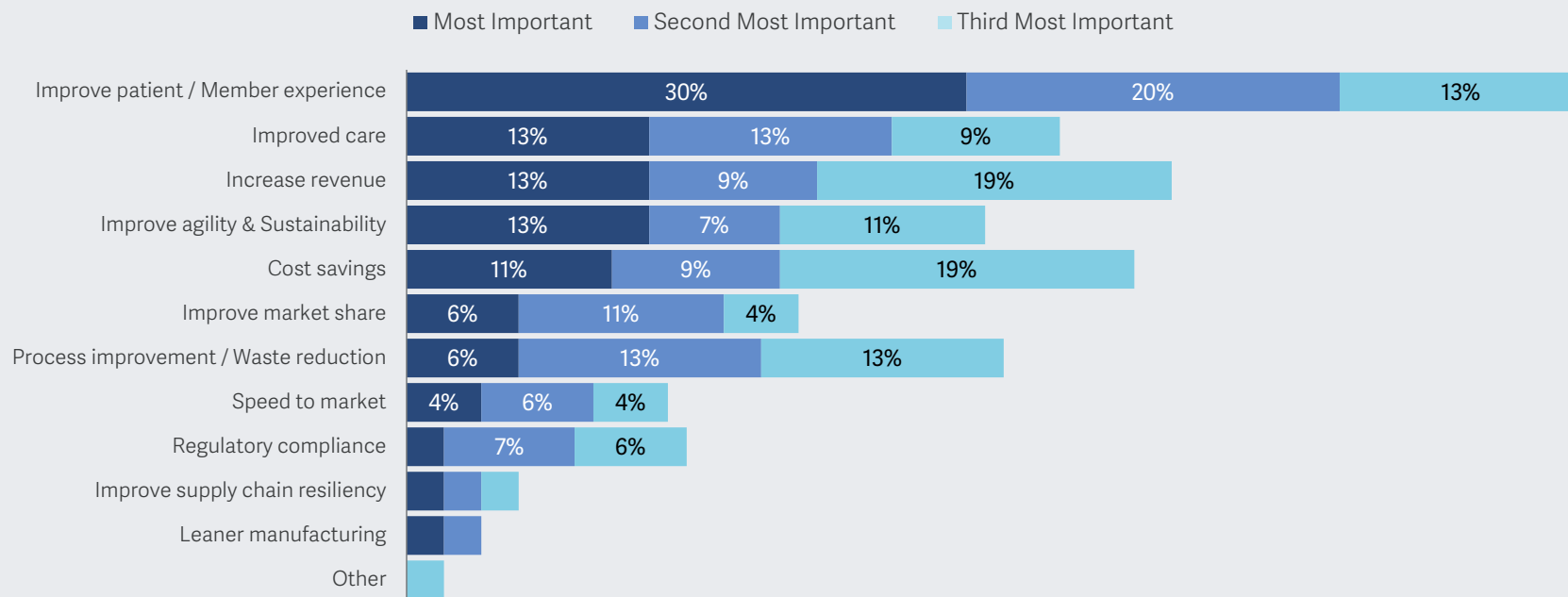
People want to be active participants in their healthcare and coordination. They expect a multi-touch, digitally enabled healthcare experience that demands the payer segment to aggressively move toward a technologically advanced

service model. For example, people contacting member services expect their representatives to have access to all their information and historical data from past inquiries. They also expect online access or access via a mobile app.

To meet consumer expectations, there is an increase in the number of digital engagement initiatives enabling virtual care and personalization of care (Figure 2). A shifting population mix, along with unprecedented consumer acceptance and desire for digital engagement during the pandemic, boosted the demand for modern experiences in the healthcare sector. Changing care delivery is also driven by the entry of big technology and retail companies into the market. Legacy providers are changing their business models to compete better.

Another driver of experience change is the trend of care moving from hospital walls into ambulatory and home settings. Virtual



**Figure 2: Top 3 Transformation Motivations**

Source: ISG Research 2022 Healthcare and Life Sciences Survey



care gained significant traction during the pandemic, and the momentum continues with telemedicine, remote patient monitoring, digital therapeutics and home care services. Payers and providers are revamping their online portals to become self-service digital front doors, implementing chatbots and mobile apps for improved engagement. Physicians and patients continue to embrace virtual solutions and resulting benefits in terms of access, cost and health outcomes.

### IT modernization to reach desired outcomes

Digital transformation requirements are driving IT modernization spending in healthcare. Improving healthcare enterprises' legacy architecture or decreasing technical debt through modernization is helping enterprises address interoperability challenges, poor data quality and lower operational costs (Figure 3).

Meanwhile, part of modernizing involves using the cloud for data sharing and protection. In healthcare, there is a preference for hybrid or private clouds over the public cloud, especially because of the anticipated cost savings and ease of use associated with the hybrid or private cloud. As a result, there is increased demand for multicloud adoption and monitoring tools for management. There are differences within the industry in the adoption of and proficiency with cloud technology for managing healthcare data. Due to legacy investments, several firms in the healthcare sector have stayed digitally inactive. These old infrastructure systems may not have the scalability and flexibility needed to handle the data explosion occurring across client ecosystems, even though they appear to be tied to earlier investments.

AI and analytics speed up digital transformation, which results in better patient care and experiences. Automation

improvements using AI, machine learning and RPA affect core process optimization as well as automatic approvals and related initiatives for prior authorization and claims processing. The adoption of advanced analytics is also spurring innovations in:

- Population health
- Revenue cycle management (RCM)
- Payment integrity
- Member and patient engagement
- Application of human genomic data

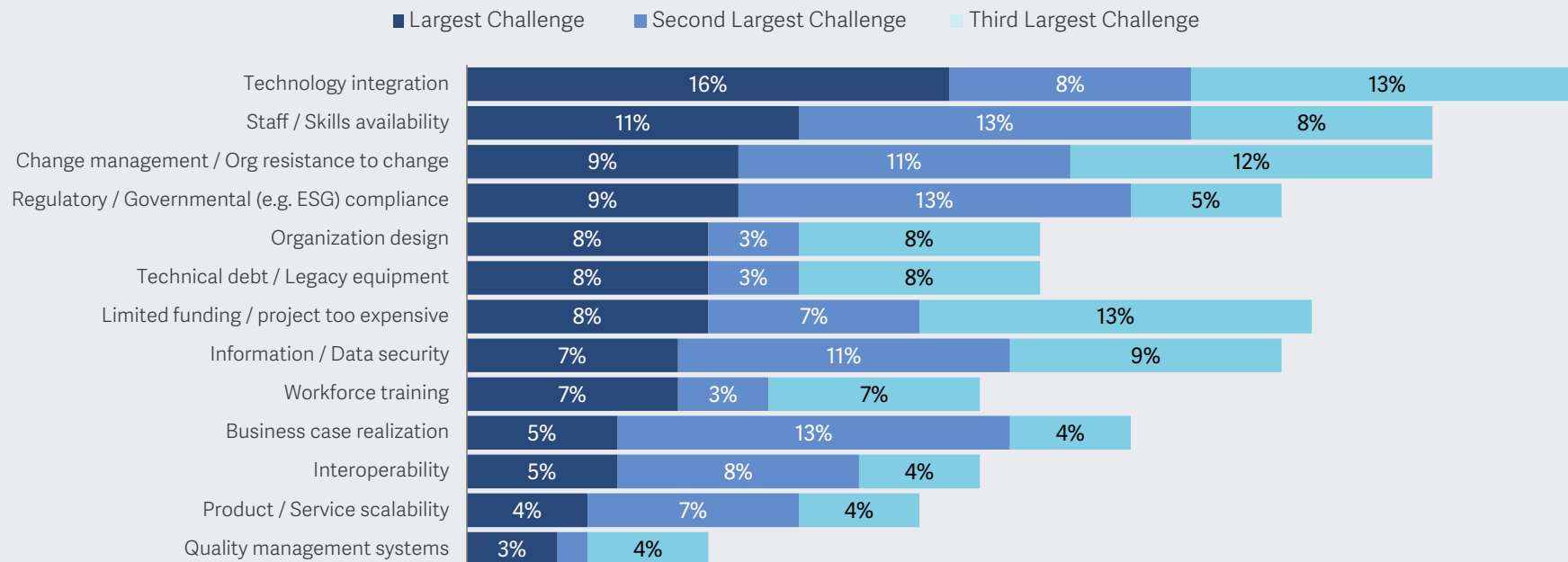
Furthermore, AI and analytics enable new mobile capabilities in healthcare, including consumer engagement via mobile devices such as wearables. However, these need proper data management foundations as well as clinical and operational business intelligence competencies to enable data-driven decision-making.

Another trend in the healthcare sector in the U.S. is the integration of AI and machine learning into legacy-rule-based workflows to ease administrative functions. Workflow automation helps ensure staff well-being, task quality and cost management efficiency and lessens challenges such as staffing shortages and an aging workforce. Precision medicine uses digitally enabled prescriptions supplemented with analytics and virtual platforms to improve diagnostics and prognostics.

Cybersecurity remains a top focus because of the nature and value of medical records and other personal data, including digital health data, interoperable data and customer engagement data. The WannaCry ransomware reportedly hit 40 percent of healthcare organizations. Furthermore, Internet of medical things (IoMT) wearable and implantable devices constantly feed sensitive patient data. The U.S. FDA recently directed stricter cybersecurity guidelines for device makers.



Figure 3: Top 3 Transformation Challenges



Source: ISG Research 2022 Healthcare and Life Sciences Survey



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A HIMMS survey shows that 59 percent of healthcare organizations increased their cybersecurity budgets this year, compared to last year.

### Evolving economics of healthcare

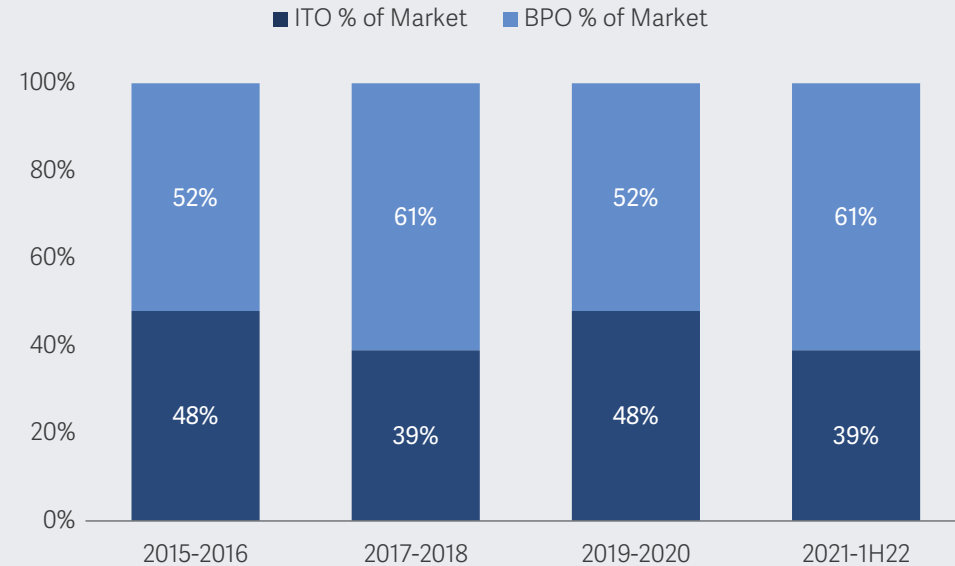
Demographic shifts and lifestyle changes, inflation and the pandemic continue to add cost pressure to healthcare ecosystems. Rising costs are leading to the need for cost optimization and workforce transformation. There is a growing focus on operational efficiencies, which encourages the adoption of cloud, process automation and application modernization initiatives, including mobility and remote workforce management.

The current adverse economic environment means modest to flat growth for commercial plans. Payers look to increase the member lifetime value, and government plans are expected to grow,

including both Medicare Advantage, due to an aging U.S. population, and Medicaid, with factors such as a rise in unemployment. Moreover, healthcare organizations are giving higher priority to environmental, social and governance (ESG) goals and measures. To deal with these economic changes, the healthcare delivery model is seeking operational improvements enabled by digital transformation.

Meanwhile, government mandates and regulations are driving digital projects. In the U.S., the Office of the National Coordinator for Health Information Technology (ONC) and the Centers for Medicare & Medicaid Services (CMS) have created structured data standards and other mandates that electronic health records (EHRs) must adhere to. CMS and ONC guidelines require that patients have access to their healthcare data and provider directories via APIs. The No Surprises Act is meant to prevent

**Figure 4: Healthcare Market Split: ITO vs. BPO**



Source: ISG, 2022; Awards with > \$5M Annual Contract Value



## Executive Summary

surprise medical bills. There are also new regulations on interoperability address security; payer-to-payer data exchange; and admission, discharge and transfer event notifications.

Foreseeing the potential for a recession, healthcare leaders are aggressively pursuing effective cost optimization strategies, which reflects:

- A continual drive for better patient experiences and engagements
- Judicious cost increases
- Restructuring cost for effective allocation
- Applying agile methodologies
- Some strategic cost takeout measures
- Leveraging industry cloud platforms

This study evaluates the service providers working with U.S. healthcare payers and providers. Over time, as ISG Index data illustrates below, there has been a shift to a higher percentage of business process outsourcing (BPO) deals than IT outsourcing (ITO).

**Healthcare expertise and tools are essential to digital services.**



## Provider Positioning

Page 1 of 4

	Payer Digital Transformation Services	Provider Digital Transformation Services	Healthcare Interoperability Services and Solutions	Value-based Care Services and Solutions
Accenture	Leader	Leader	Not In	Leader
Atos	Product Challenger	Leader	Product Challenger	Contender
Capgemini	Product Challenger	Market Challenger	Leader	Market Challenger
CitiusTech	Product Challenger	Product Challenger	Leader	Rising Star ★
Coforge	Product Challenger	Not In	Product Challenger	Contender
Cognizant	Leader	Leader	Leader	Leader
Conduent	Product Challenger	Not In	Product Challenger	Not In
Deloitte	Rising Star ★	Product Challenger	Leader	Leader
emids	Product Challenger	Product Challenger	Not In	Not In
EXL	Leader	Product Challenger	Product Challenger	Not In



## Provider Positioning

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	Payer Digital Transformation Services	Provider Digital Transformation Services	Healthcare Interoperability Services and Solutions	Value-based Care Services and Solutions
Firstsource	Leader	Not In	Not In	Not In
GAVS	Not In	Product Challenger	Contender	Not In
Genpact	Product Challenger	Product Challenger	Market Challenger	Market Challenger
HARMAN	Not In	Contender	Product Challenger	Contender
HCLTech	Leader	Leader	Leader	Market Challenger
Hexaware	Product Challenger	Rising Star ★	Not In	Not In
Hitachi Vantara	Not In	Product Challenger	Not In	Not In
HTC Global	Contender	Contender	Contender	Market Challenger
IBM	Market Challenger	Leader	Not In	Not In
Infinite	Product Challenger	Product Challenger	Product Challenger	Product Challenger



## Provider Positioning

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	Payer Digital Transformation Services	Provider Digital Transformation Services	Healthcare Interoperability Services and Solutions	Value-based Care Services and Solutions
Infosys	Leader	Leader	Leader	Leader
LTIMindtree	Leader	Product Challenger	Rising Star ★	Leader
Mphasis	Product Challenger	Product Challenger	Product Challenger	Product Challenger
NTT DATA	Leader	Leader	Leader	Leader
Optum	Leader	Leader	Not In	Leader
Persistent Systems	Product Challenger	Product Challenger	Product Challenger	Product Challenger
PWC	Market Challenger	Market Challenger	Market Challenger	Not In
Quantiphi	Not In	Not In	Not In	Contender
Rackspace	Not In	Product Challenger	Not In	Not In
Sutherland	Contender	Contender	Not In	Not In



## Provider Positioning

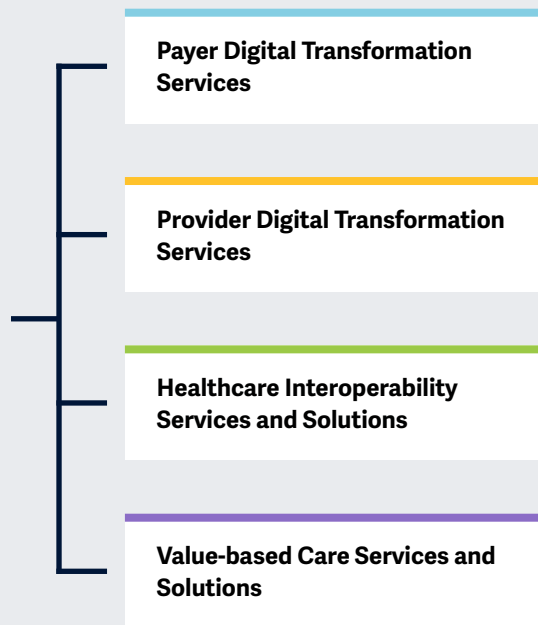
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	Payer Digital Transformation Services	Provider Digital Transformation Services	Healthcare Interoperability Services and Solutions	Value-based Care Services and Solutions
TCS	Leader	Leader	Leader	Leader
Tech Mahindra	Product Challenger	Leader	Leader	Product Challenger
UST	Leader	Product Challenger	Product Challenger	Not In
Virtusa	Not In	Not In	Contender	Market Challenger
Wipro	Leader	Leader	Leader	Leader
WNS	Contender	Not In	Not In	Not In



# This study focuses on significant Digital Services in Healthcare.

Simplified Illustration Source: ISG 2022



## Definition

The healthcare industry continues to be under pressure from customers, governments and other stakeholders to increase investments. The pandemic continues to affect industry practices. The public seeks better healthcare outcomes at lower costs, price transparency, appropriate data sharing and access to their own records. The U.S. healthcare industry must comply with new regulations and engage in mergers and acquisitions while adapting to the needs of an aging population. Furthermore, consumers expect advanced and convenient digital service delivery across the care continuum. Many companies and government agencies struggle to stay apace with the growing demand for their services, and in the private sector, they struggle to deal with the mounting competitive pressures.



### Scope of the Report

In this ISG Provider Lens™ quadrant study, ISG includes the following four quadrants: Payer Digital Transformation Services, Provider Digital Transformation Services, Healthcare Interoperability Services and Solutions, and Value-based Care Services and Solutions.

This ISG Provider Lens™ study offers IT-decision makers:

- Transparency on the strengths and weaknesses of relevant providers
- A differentiated positioning of providers by segments
- Focus on regional market

Our study serves as the basis for important decision-making in terms of positioning, key relationships and go-to-market considerations. ISG advisors and enterprise clients also use information from these reports to evaluate their existing vendor relationships and potential engagements.

### Provider Classifications

The provider position reflects the suitability of providers for a defined market segment (quadrant). Without further additions, the position always applies to all company sizes classes and industries. In case the IT service requirements from enterprise customers differ and the spectrum of IT providers operating in the local market is sufficiently wide, a further differentiation of the IT providers by performance is made according to the target group for products and services. In doing so, ISG either considers the industry

requirements or the number of employees, as well as the corporate structures of customers and positions IT providers according to their focus area. As a result, ISG differentiates them, if necessary, into two client target groups that are defined as follows:

- **Midmarket:** Companies with 100 to 4,999 employees or revenues between \$20 million and \$999 million with central headquarters in the respective country, usually privately owned.
- **Large Accounts:** Multinational companies with more than 5,000 employees or revenue above \$1 billion, with activities worldwide and globally distributed decision-making structures.

The ISG Provider Lens™ quadrants are created using an evaluation matrix containing four segments (Leader, Product Challenger, Market Challenger and Contender), and the providers are

positioned accordingly. Each ISG Provider Lens quadrant may include service providers that ISG believes have strong potential to move into the Leader quadrant. This type of provider can be classified as a Rising Star.

### Number of providers in each quadrant:

ISG rates and positions the most relevant providers according to the scope of the report for each quadrant and limits the maximum of providers per quadrant to 25 (exceptions are possible).





### Provider Classifications: Quadrant Key

**Product Challengers** offer a product and service portfolio that reflect excellent service and technology stacks. These providers and vendors deliver an unmatched broad and deep range of capabilities. They show evidence of investing to enhance their market presence and competitive strengths.

**Contenders** offer services and products meeting the evaluation criteria that qualifies them to be included in the IPL quadrant. These promising service providers or vendors show evidence of rapidly investing in products/services and a follow sensible market approach with a goal of becoming a Product or Market Challenger within 12 to 18 months.

**Leaders** have a comprehensive product and service offering, a strong market presence and established competitive position. The product portfolios and competitive strategies of Leaders are strongly positioned to win business in the markets covered by the study. The Leaders also represent innovative strength and competitive stability.

**Market Challengers** have a strong presence in the market and offer a significant edge over other vendors and providers based on competitive strength. Often, Market Challengers are the established and well-known vendors in the regions or vertical markets covered in the study.

★ **Rising Stars** have promising portfolios or the market experience to become a Leader, including the required roadmap and adequate focus on key market trends and customer requirements. Rising Stars also have excellent management and understanding of the local market in the studied region. These vendors and service providers give evidence of significant progress toward their goals in the last 12 months. ISG expects Rising Stars to reach the Leader quadrant within the next 12 to 24 months if they continue their delivery of above-average market impact and strength of innovation.

**Not in** means the service provider or vendor was not included in this quadrant. Among the possible reasons for this designation: ISG could not obtain enough information to position the company; the company does not provide the relevant service or solution as defined for each quadrant of a study; or the company did not meet the eligibility criteria for the study quadrant. Omission from the quadrant does not imply that the service provider or vendor does not offer or plan to offer this service or solution.





# Payer Digital Transformation Services

### Who Should Read This

This quadrant report is relevant to healthcare payer enterprises across the U.S. for evaluating service providers offering digital transformation services to improve patient and member services.

In this quadrant, ISG highlights the current market positioning of service providers that offer digital transformation services to payers in the U.S. and shows how each provider addresses the rising demands and key challenges in the country.

Due to frequent regulatory changes, evolving customer expectations, varying claim volumes and a dynamic shift in the healthcare technology landscape, payers cannot control the fundamental factors that determine healthcare operations' quality and profitability. This challenge has left payers with no choice but to embrace digital transformation and innovation

to provide more effective outcomes for end-users. Leading service providers are focusing on the adoption of analytics to reduce administrative burden and costs and improve quality through automation and by increasing digital capabilities to meet payers' needs.

In the U.S., leading service providers are delivering digital transformation services to healthcare payers to address the ongoing challenges and prepare them to meet the upcoming shifts in the market. At the same time, payers seek providers, with digital expertise, that can offer a comprehensive, end-to-end solution that meets all market and regulatory challenges.



**Business professionals** should read this report to understand the relative positioning and capabilities of providers and thus effectively plan and select appropriate digital services and solutions. The report also shows how the technical and integration capabilities of a service provider are compared to the rest of the market.



**Technology professionals** should read this report to understand how providers of healthcare digital transformation services fit in their digital transformation initiatives and how they are compared with one another.



**Digital professionals** should read this report to develop a better understanding of the current landscape of service providers' digital transformation offerings and understand how each of the providers have leveraged the latest technologies to meet healthcare payers' needs in the U.S. market.



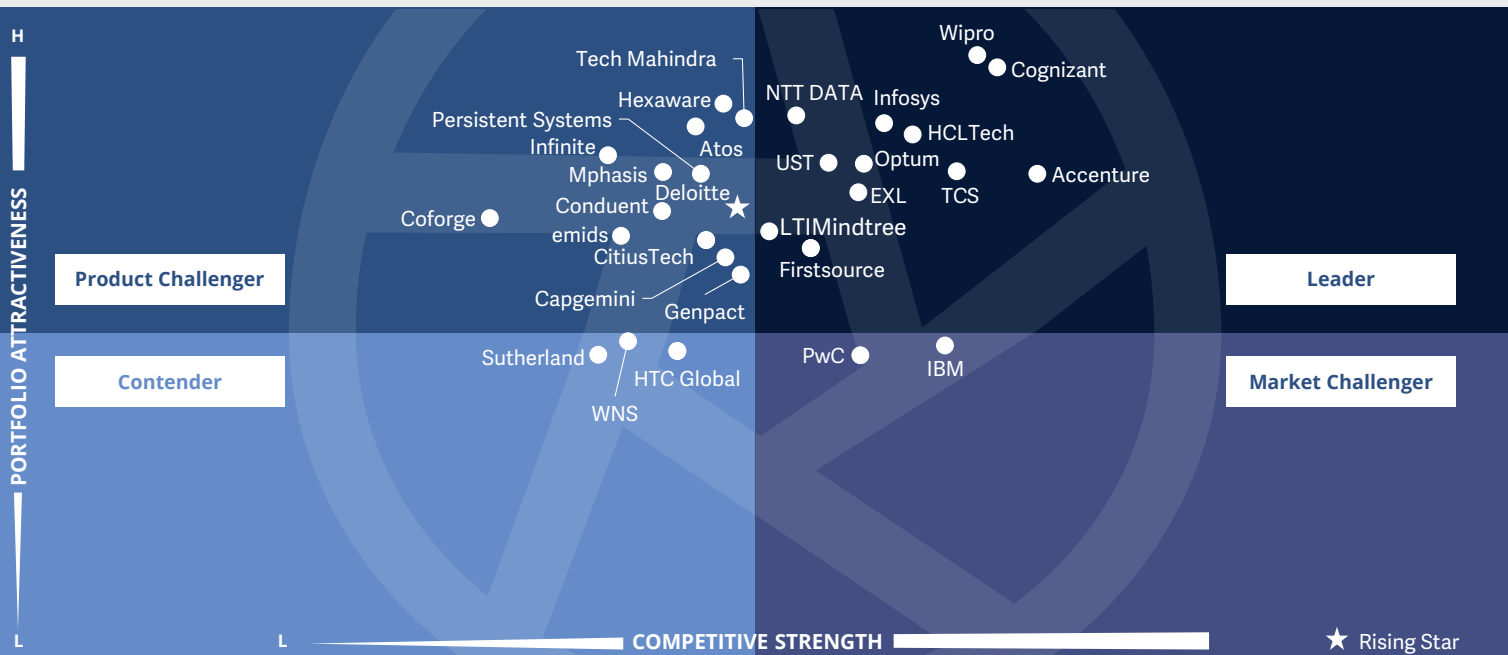
**Cybersecurity professionals** should read this report to understand how service providers address the significant challenges of compliance and security, without compromising patient privacy and experience.



**\*ISG Provider Lens™**  
**Healthcare Digital Services**  
**Payer Digital Transformation Services**

Source: ISG RESEARCH

U.S. 2022



This quadrant evaluates service providers' ability to **deliver digital transformation** services to payers in the U.S. healthcare sector, including consulting, process and system **modernization and member experience improvement.**

Ron Exler



### Definition

Leading service providers in the healthcare industry have diverse digital offerings that can help payers and providers identify new ways of working together, while also assisting them in designing innovative products and service offerings to improve patient and member services. These service providers offer a combination of technology, process, and business expertise to aid payers and providers in their digital journeys. This quadrant assesses a service provider's ability to deliver digital transformation services to payers, also known as insurance plan companies in the U.S. Digital transformation services help payers progressively prioritize a digital-first pathway to improve patient care.

The services should help these insurance companies reach out to and serve members wherever they are located, via computers, remote monitoring devices, smartphones and other mobile devices. In addition, the services should address operational processes for payers, such as claims processing, member verification and enrollment, and their modernization capabilities should be clear.

### Eligibility Criteria

1. **Technology consulting for the use of appropriate traditional and emerging healthcare technologies**, with the ability to plan, develop and implement **consumer-grade interfaces** for employee systems and member information sources, including mobile apps
2. Established or emerging basic or standard relationships with **trusted partners**, including innovative startups
3. Ability to provide **services for the digitalization of processes** while navigating regulation complexities
4. Ability to **provide consultation services on the development of models** using AI, machine learning and analytics
5. Capabilities in the **modernization of payer systems**, including cloud migration, data center consolidation and application portfolio management experience in **large transition projects** that include consolidation of merged companies and the modernization of systems and applications



## Payer Digital Transformation Services

### Observations

Healthcare insurance companies, known as health plans or payers, face tremendous pressure, which is forcing them to drive digital transformation. Legacy systems and processes carry unnecessary costs and frustrate employees and providers, and government mandates for price transparency and data sharing are forcing system changes. Payer customers, also called members, consider their interactions with these companies frustrating.

Leaders in this quadrant exhibit significant involvement with payer customers in the U.S. Most offer a full range of services to help payers control costs, while improving member experience. Leaders repeatedly and consistently address the complex challenges of claims processing and modernization. However, all the companies in this study meet the eligibility

criteria and could be right for a healthcare payer seeking service providers with specific strengths.

Most of the companies we talked with for this study mentioned that their digital services for healthcare payers grew by double-digit percentages in 2022. Services go beyond managed services, extending into strategic assessments and collaborative innovation.

Compared to the 2021 study, the 2022 study's Payer Digital Transformation Services quadrant has several new entrants, including CitiusTech, HTC Global, PwC and WNS. The study reflects minor position movements among those included in both years' studies. Since many, if not most, provider-client relationships within this quadrant are long term, the shift is mainly due to the expansion of incumbent relationships and partly due to providers taking clients from one another.

From the 37 companies assessed for this study, 30 have qualified for this quadrant, with 12 being Leaders and one Rising Star.

### accenture

**Accenture** offers U.S. payers services ranging from strategy and assessment to implementation. It helps payers move workers to remote offices and teams with innovative healthcare technologies, focusing on improved healthcare outcomes. Accenture Strategy now has expanded its healthcare coverage, due to the recent acquisition of The Beacon Group, a growth strategy consultant company.



**Cognizant** builds on its widely used TriZetto solutions, which include extensive coverage for payer business needs, with interoperability capabilities to connect with other parts of the converging healthcare ecosystem. Cognizant brings digital technologies to healthcare, applying AI, automation, blockchain, cloud, IoT and other emerging technologies.

### Deloitte

**Deloitte** (Rising Star) builds and manages scalable and flexible digital experiences for payers, using human-centered design and innovative technologies. Its offerings help payers achieve net-zero carbon goals and contribute to the U.S. Department of Health and Human Services' pledge to reduce emissions. To deliver services, Deloitte combines its thought leadership and products with those from partners and acquisitions.



### EXL

**EXL** approaches payers with a focus on data. It combines its extensive expertise in data management, analytics and AI with healthcare domain knowledge to help payers improve member experiences and business outcomes. Digital operations and payment integrity are successful use cases.



**Firstsource** starts with business process improvement and operational efficiency services to help payers reach their goals. Its digital-first operating model helps payers reduce risks and lower costs as they improve member experiences. Technology enablers include process mining and simulation, as well as low-code automation and conversational AI.

### HCLTech

**HCLTech** is a Leader in this quadrant, with significant growth in the number of clients and revenue momentum. Its domain-led solutions, combined with dedicated practice and delivery teams, complement its strategic investments in cybersecurity, payer center of excellence and enhanced hyperscaler partnerships.



**Infosys** applies its Live Enterprise Suite to payers to deliver persona-first, digital-powered, future-ready solutions. It built an enrollment simplification solution to improve member experiences for traditionally difficult processes. Its AI-first strategy via the Healthcare Live Enterprise Framework (HELIX) helps payer-operations-handling professionals make faster and more informed decisions.



To assist payers with claims administration, **LTIMindtree** uses automation. It is scalable to swiftly address peak loads. Both value-based healthcare and population health analytics make use of automated intelligence. The newly formed company should bring more digital power to large client engagements.

### NTT DATA

To help payers manage digital interactions with members, employers and brokers, **NTT DATA** has developed a digital health solution by combining its own and partner technologies in automation, document processing, RPA and business process management. NTT DATA also converts unstructured data, such as physician notes, into useful, structured data.

### Optum

**Optum** delivers digital transformation to payers, with a focus on product growth and enablement, cloud optimization and wisely used intelligent automation. Utilizing workflow integration, digital clinical data sharing, intervention identification and intervention optimization, it also collaborates with payers to close the historical and problematic gaps with providers.



**TCS** enables digital services in payer contact centers and claims processing. Its capabilities include real-time claim adjudication, quote-to-card transformation, billing, claims and intelligent benefits transformation. TCS Healthcare Analytics gives payers a model to identify gaps in care, thereby enabling payers to improve patient and staff experiences, leading to improved healthcare outcomes.



## Payer Digital Transformation Services

### U • S T

**UST** offers end-to-end digital transformation as well as transformation services and platforms for benefit coding, claims processing, enrollment and member portals. UST's MyDoc digital platform connects patients, payers and providers to deliver insights and coordinate care. UST is a HealthEdge implementation partner for administration and care coordination solutions.



**Wipro's** payer platform combines proprietary and partner technologies to provide intelligent platforms that leverage AI, cloud and blockchain. Service offerings are claims administration, member and provider management, healthcare management and administration. For Medicaid, it partners with Salesforce and HealthEdge. Its Medicare enrollment platform has new Appeals and Grievances modules.



# NTT DATA



"NTT DATA has decades of payer experience, advanced technologies and expert professionals."

*Ron Exler*

## Overview

NTT DATA is headquartered in Tokyo and operates in more than 55 countries. It has over 140,000 employees across 208 global offices. In FY22, NTT DATA was combined with NTT Ltd., under the name NTT DATA Inc., with total revenue exceeding \$30 billion. NTT DATA aims to deliver end-to-end process automation by applying analytics, AI, and intelligent automation across the healthcare value chain.

## Strengths

**Midmarket fit:** NTT DATA's end-to-end services are most valuable to regional and Blue Cross Blue Shield companies, which account for more than 75% of clients, while 24% of its customers are large national health plan clients.

**Digital health technologies:** NTT DATA's digital health solution combines its own and partner technologies in automation, document processing, RPA and business process management to help payers manage their digital interactions with members, employers and brokers. Healthcare providers can also use the solution to manage their contracts, check claims and submit

documentation to payers. In addition to this, NTT DATA offers services for the measurement of customer experience.

**Automating unstructured clinical information:** NTT DATA has the proprietary Clinical Language Pro (CLP) to help transform unstructured clinical information, codes, terms and concepts such as physician notes and lab reports, into usable, structured data. It uses NLP with AI to process standard coded insights for medical reviews, risk adjustment analysis, quality measure reporting and detection of fraud, waste and abuse.

## Caution

NTT DATA needs to pay closer attention to client retention, as the digital services market for healthcare payers is highly competitive.





# Appendix

## Methodology & Team

The ISG Provider Lens™ 2022 – Healthcare Digital Services analyzes the relevant software vendors/service providers in the U.S. market, based on a multi-phased research and analysis process, and positions these providers based on the ISG Research methodology.

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The research and analysis presented in this report includes research from the ISG Provider Lens program, ongoing ISG Research programs, interviews with ISG advisors, briefings with services providers and analysis of publicly available market information from multiple sources. The data collected for this report represents information that ISG believes to be current as of November 2022, for providers who actively participated as well as for providers who did not. ISG recognizes that many mergers and acquisitions have taken place since that time, but those changes are not reflected in this report.

All revenue references are in U.S. dollars (\$US) unless noted.

The study was divided into the following steps:

1. Definition of Healthcare Digital Services market
2. Use of questionnaire-based surveys of service providers/vendor across all trend topics
3. Interactive discussions with service providers/vendors on capabilities & use cases
4. Leverage ISG's internal databases & advisor knowledge & experience (wherever applicable)
5. Use of Star of Excellence CX-Data
6. Detailed analysis & evaluation of services & service documentation based on the facts & figures received from providers & other sources.
7. Use of the following key evaluation criteria:
  - \* Strategy & vision
  - \* Tech Innovation
  - \* Brand awareness and presence in the market
  - \* Sales and partner landscape
  - \* Breadth and depth of portfolio of services offered
  - \* CX and Recommendation



## Author & Editor Biographies

*Lead Author*



**Ron Exler**  
**Director and Principal Analyst**

Ron Exler is a principal analyst with the ISG Provider Lens (IPL) service, a part of ISG Research, leading IPL studies including Internet of Things (IoT) and Healthcare Digital Services. Ron has led product management at enterprise software companies, run enterprise research advisory services, and advised, built and deployed innovative technology inside large enterprises.

Ron holds a master of science degree in cartography from the University of Wisconsin as well as a bachelor of science degree from Oregon State University. Ron also holds the ISG Digital Xpert certification.

*Research Analyst and Author, VBC*



**Sneha Jayanth**  
**Senior Research Analyst**

Sneha Jayanth is a senior research analyst at ISG. She supports and co-authors Provider Lens™ studies on contact center, healthcare digital services, healthcare platform studies and procurement services and platforms.

She also provides enterprise perspectives and contributes to global summary reports. For ISG clients, Sneha offers expertise in technology, business and market research. She previously worked with a research firm specializing in IoT, cloud,

AI and analytics, delivering market intelligence and authoring reports. In various consulting projects, Sneha conducted market research, analyzed data, and collaborated with internal stakeholders to provide deep market insights to the clients.



## Author & Editor Biographies



*IPL Product Owner*

**Jan Erik Aase**  
**Partner and Global Head – ISG Provider Lens™**

Mr. Aase brings extensive experience in the implementation and research of service integration and management of both IT and business processes. With over 35 years of experience, he is highly skilled at analyzing vendor governance trends and methodologies, identifying inefficiencies in current processes, and advising the industry. Jan Erik has experience on all four sides of the sourcing and vendor governance lifecycle - as a client, an industry analyst, a service provider and an advisor.

Now as a research director, principal analyst and global head of ISG Provider Lens™, he is very well positioned to assess and report on the state of the industry and make recommendations for both enterprises and service provider clients.



## About Our Company & Research

### Provider Lens™

The ISG Provider Lens™ Quadrant research series is the only service provider evaluation of its kind to combine empirical, data-driven research and market analysis with the real-world experience and observations of ISG's global advisory team. Enterprises will find a wealth of detailed data and market analysis to help guide their selection of appropriate sourcing partners, while ISG advisors use the reports to validate their own market knowledge and make recommendations to ISG's enterprise clients. The research currently covers providers offering their services across multiple geographies globally.

For more information about ISG Provider Lens research, please visit this [webpage](#).

### Research™

ISG Research™ provides subscription research, advisory consulting and executive event services focused on market trends and disruptive technologies driving change in business computing. ISG Research delivers guidance that helps businesses accelerate growth and create more value.

ISG offers research specifically about providers to state and local governments (including counties, cities) as well as higher education institutions. Visit: [Public Sector](#).

For more information about ISG Research subscriptions, please email [contact@isg-one.com](mailto:contact@isg-one.com), call +1.203.454.3900, or visit [research.isg-one.com](https://research.isg-one.com).

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ISG (Information Services Group) (Nasdaq: IHI) is a leading global technology research and advisory firm. A trusted business partner to more than 800 clients, including more than 75 of the world's top 100 enterprises, ISG is committed to helping corporations, public sector organizations, and service and technology providers achieve operational excellence and faster growth. The firm specializes in digital transformation services, including automation, cloud and data analytics; sourcing advisory; managed governance and risk services; network carrier services; strategy and operations design; change management; market intelligence and technology research and analysis.

Founded in 2006, and based in Stamford, Conn., ISG employs more than 1,300 digital-ready professionals operating in more than 20 countries—a global team known for its innovative thinking, market influence, deep industry and technology expertise, and world-class research and analytical capabilities based on the industry's most comprehensive marketplace data. For more information, visit [www.isg-one.com](https://www.isg-one.com).





**DECEMBER, 2022**

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**REPORT: HEALTHCARE DIGITAL SERVICES**