Everest Group Healthcare Payer Digital Services PEAK Matrix® Assessment 2026

Focus on TCS
July 2026

Introduction

Healthcare payers are positioning digital transformation as a core lever for operational efficiency, cost optimization, and superior member experiences. As the industry evolves, payers are increasingly leveraging digital services to address strategic priorities such as social health equity, population health management, regulatory compliance, and medical cost reduction through improved care coordination to lower Medical Loss Ratios (MLRs).

In response, service providers are strengthening payer-specific capabilities through strategic partnerships, targeted acquisitions, Centers of Excellence (CoEs), and innovation-led investments.

Everest Group's Healthcare ITS research program addresses this need by delivering actionable insights into market dynamics, payer priorities, and service provider differentiation across the healthcare payer digital landscape.

Everest Group's Healthcare Payer Digital Services PEAK Matrix® Assessment 2026 evaluates service providers on market impact, innovation, payer-specific expertise, delivery capabilities, and the value delivered to clients. The assessment also highlights key market trends shaping payer digital transformation, including AI operationalization, interoperability readiness, phased modernization, and platform-led transformation models.

This report profiles leading healthcare payer digital service providers supporting commercial, Medicare Advantage, Medicaid, and Blues plans through targeted digital transformation services and solutions.

The full report includes the profiles of the following 31 leading healthcare payer digital service providers featured on the Healthcare Payer Digital Services PEAK Matrix:

- **Leaders:** Accenture, CitiusTech, Cognizant, Deloitte, HCLTech, Infosys, NTT DATA, Optum, TCS, and Wipro
- **Major Contenders:** Atos, Brillio, Capgemini, DXC Technology, Emids, EXL, IBM, Infinite Computer Solutions, Innova Solutions, LTM, Mphasis, Persistent Systems, Publicis Sapient, Tech Mahindra, UST, and Virtusa
- **Aspirants:** Coforge, EPAM, Kyndryl, Sutherland and Zensar Technologies

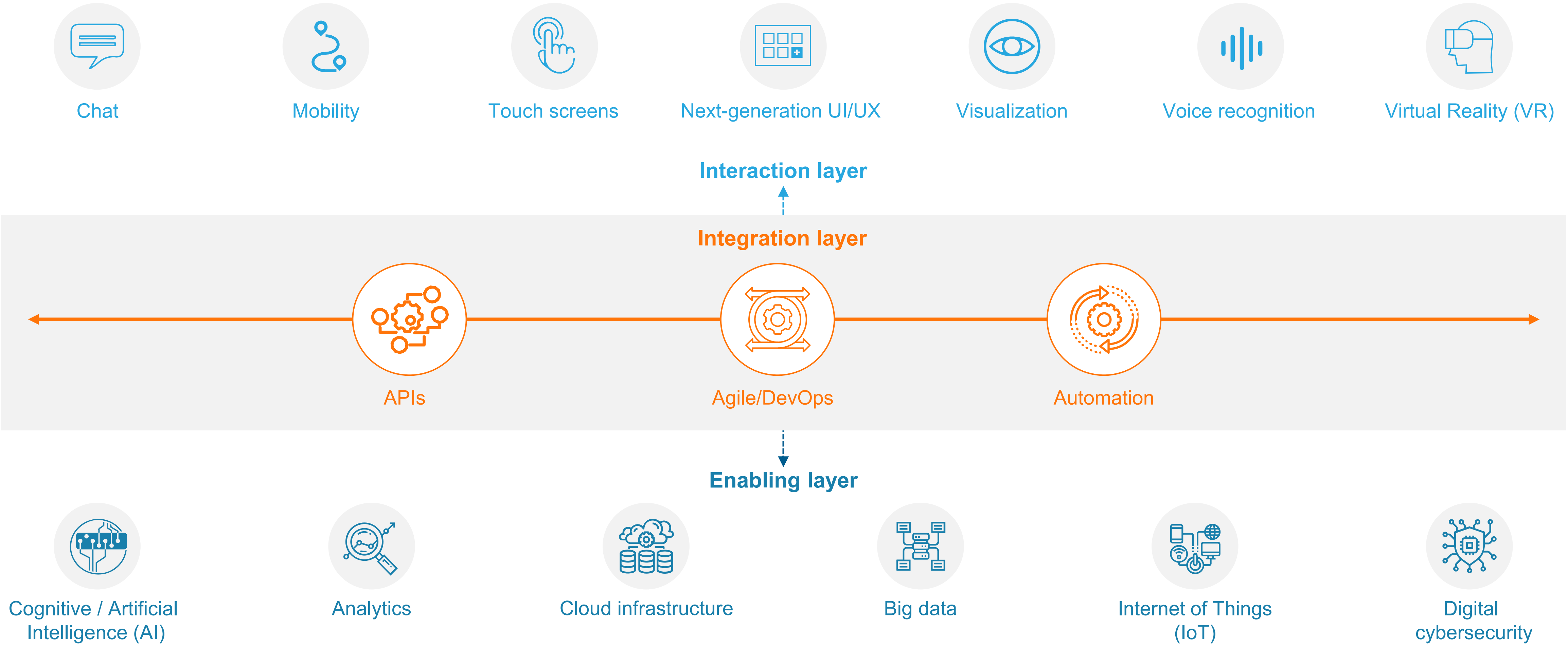
Scope of this report

Geography: global

Industry: healthcare payers

Services: healthcare digital services

Everest Group’s definition of digital services



Our view of the healthcare payer landscape

Product development	Policy servicing	Network management	Care management	Claims management
Data-driven plan development	Endorsements and renewals	Provider credentialing	Disease management	Initial claims processing
Underwriting	Billing and collections	Provider contract management	Utilization management	Claims adjudication
Agent/Broker engagement	Records management and HIX support	Records management	Population health management	Claims disbursements
Actuarial assessment	Enrollment support	Support for PBMs ana TPAs	Telehealth / Remote monitoring	Fraud detection and management
	Member portals	Convergence-led business models	Wearables / Fitness trackers	Subrogation
	HEDIS and STAR ratings		Risk adjustment	Claims recovery

Healthcare Payer Digital Services PEAK Matrix® characteristics

Leaders

Accenture, CitiusTech, Cognizant, Deloitte, HCLTech, Infosys, NTT DATA, Optum, TCS, and Wipro

- Leaders have established themselves as front-runners to support large payer accounts in their digital transformation journeys across various areas of the payer value chain such as member engagement, care management, claims management, and provider network management
- They differentiate themselves through balanced portfolios, strong thought leadership, innovative digital solutions, and continued investments in technology and service capability development (internal IP/tools, CoEs, etc.)
- Leaders are also able to forge strategic partnerships with hyperscalers to co-innovate and develop joint Go-to-Market (GTM) offerings to enhance market presence

Major Contenders

Atos, Brillio, Capgemini, DXC Technology, Emids, EXL, IBM, Infinite Computer Solutions, Innova Solutions, LTM, Mphasis, Persistent Systems, Publicis Sapient, Tech Mahindra, UST, and Virtusa

- The service offerings of Major Contenders are not as well-rounded as those of Leaders and often lack comprehensive coverage of the payer value chain. Nevertheless, Major Contenders are actively working to narrow the gap with Leaders by investing in initiatives such as forming partnerships with niche vendors and establishing innovation labs to expand their services and enhance their value proposition
- Major Contenders have made cost-effectiveness and strong client responsiveness the major pillars of their engagements with healthcare payers, helping them to retain a loyal base of satisfied customers for their healthcare provider digital services

Aspirants

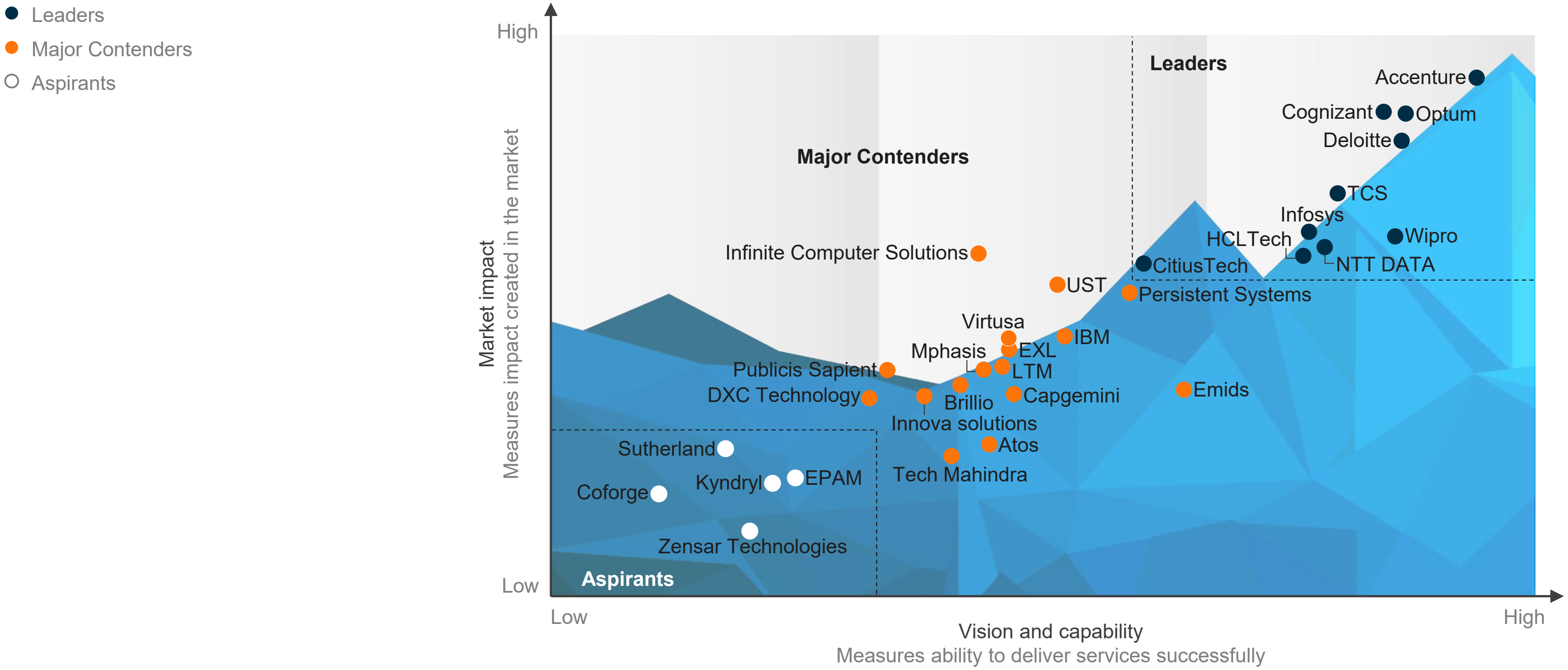
Coforge, EPAM, Kyndryl, Sutherland and Zensar Technologies

- The majority of the Aspirants offer vertical-agnostic offerings applicable to healthcare payers. However, building healthcare-specific solutions and investing in healthcare-specific partnerships and acquisitions can enhance their solutions by addressing multiple areas within the provider value chain
- It is essential for Aspirants to build a more robust technology partnership ecosystem and make investments to expand their digital capabilities and develop healthcare-focused offerings
- To strengthen their brand recall and mindshare in the payer market, Aspirants should invest in marketing initiatives supported by relevant case studies and proof points

Everest Group PEAK Matrix®

Healthcare Payer Digital Services PEAK Matrix® Assessment 2026 | TCS is positioned as a Leader

Everest Group Healthcare Payer Digital Services PEAK Matrix® Assessment 2026[1]



1 Assessments for Deloitte, EPAM, IBM, Optum, and UST excludes service provider inputs and are based on Everest Group's proprietary Transaction Intelligence (TI) database, provider public disclosures, and Everest Group's interactions with healthcare payers
Note: The source of all content is Everest Group unless otherwise specified
Source: Everest Group (2026)

TCS

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

- TCS demonstrates strong end-to-end capabilities across the payer value chain, spanning product development, member engagement, provider management, care management, claims, and regulatory reporting
- It takes an IP-led approach to address payer needs through a broad set of verticalized solutions such as TCS QuBit and TCS HealthCare Analytics. These solutions enable payment integrity analytics, interoperability, and workflow automation
- TCS has built a robust partnership ecosystem with hyperscalers and BigTechs such as (Salesforce, Pega, and ServiceNow). Its partnerships with healthcare AI start-ups and innovation partners further support joint GTM, co-innovation, and AI-led modernization
- It demonstrates strong interoperability and regulatory modernization capabilities through accelerators such as TCS Data Integrator and TCS Prior Authorization. These enable HL7-/FHIR-based data exchange, CMS compliance, and near-real-time authorization processing across payer-provider ecosystems

Limitations

- While TCS has strong capabilities across agentic AI, it should further improve its articulation of realized business outcomes from agentic AI initiatives through published case studies showcasing scaled production deployments and measurable impact across payer clients
- It has a strong presence among large buyers; however, there is an opportunity to further expand its client base within the SMB segment
- Clients cite concerns around pricing competitiveness and turnaround times, which may affect satisfaction in time-sensitive transformation initiatives
- TCS could strengthen its market visibility through more targeted thought leadership, including webinars, blogs, and industry content on emerging healthcare payer and digital transformation themes

Market trends

Digital front door investments, AI-led automation, and modular platform upgrades are gaining momentum as healthcare payers balance margin pressure and member expectations while navigating regulatory complexity, interoperability requirements, and RoI discipline

Market size and growth

- The healthcare payer digital services market is estimated at ~US$30-32 billion in 2026 and is expected to grow at a CAGR of 4-4.5%
- Healthcare payers are accelerating investments in AI-led modernization, interoperability, utilization management, and digital member engagement to address rising MLRs and regulatory complexity
- Priorities such as payer-provider collaboration, Value-Based Care (VBC), price transparency, and prior authorization automation are driving the demand for cloud-native and analytics-driven digital transformation initiatives

Key drivers for healthcare payer digital services

Cost containment	Rising MLRs are accelerating AI-led automation across claims and servicing, with investments increasingly linked to measurable cost and productivity outcomes.
Digital experience and core modernization	Payer expectations and legacy system constraints accelerate digital and core modernization across payers. Investments in omnichannel digital experiences and modular cloud-based core platforms enable real-time processing, seamless integration, and AI-driven decision capabilities.
AI embedded in core workflows	Payers are scaling AI across utilization management, risk adjustment, quality, and claims operations, prioritizing production-grade automation to bring down costs.
Value-based and personalized care	The expansion of value-based care and population health models is driving the demand for advanced analytics, real-time insights, and integrated care management capabilities.
Regulatory-driven interoperability and ecosystem convergence	Centers for Medicare & Medicaid Services (CMS) mandates and Fast Healthcare Interoperability Resources (FHIR) adoption are driving investments in cloud-native data platforms, secure interoperability frameworks, and scalable digital infrastructure.

Opportunities and challenges

AI-led core administration modernization	Investments in AI platforms, automation, and core administration modernization are expanding opportunities across claims, care management, and policy servicing.
Interoperability and data foundation gaps	Fragmented legacy systems and limited FHIR maturity constrain real-time data exchange across payer–provider ecosystems, slowing automation and advanced analytics adoption.
Platform-centric and BPaaS transformation models	The shift toward IP-led platforms and outcome-linked engagements is improving scalability, defensibility, and margin resilience, while accelerating time-to-value.
Regulatory, security, and governance complexity	CMS mandates, HIPAA compliance, AI governance, and cybersecurity requirements increase implementation complexities and risk exposure, especially in cloud migration and AI deployments.
RoI uncertainty and operating model constraints	Unclear business cases, fragmented ownership across IT, operations, clinical, and compliance functions, along with talent gaps and limited AI readiness, increase transformation risk and delay enterprise-wide digital adoption.

Service provider landscape analysis

Accenture, Cognizant, Deloitte, and Optum stand out as the largest service providers in terms of market share

Market share analysis of the providers[1,2]
2025

>10%
accenture, cognizant, Deloitte., Optum

3-5%
Infosys, NTT DATA, TCS Tata Consultancy Services, wipro

1-3%
DXC Technology, EXL, HCLTech, IBM, infinite, UST

<1%
Capgemini, CitiusTech, kyndryl, Mphasis The Next Applied, publicis sapient, virtusa

Atos, brillio, Coforge, EMIDS, <epam>, innova solutions, LTM, Persistent, SUTHERLAND, TECH mahindra, zensar

1 Service providers are listed alphabetically within each range
2 The analysis is based on the above mentioned 31 service providers

Key buyer considerations

Cost efficiency, AI operationalization, interoperability readiness, phased legacy modernization, execution scalability, and strategic provider alliances define healthcare payer sourcing strategy

Key sourcing criteria

High

Priority

Low

Domain depth and regulatory capabilities
Prioritize service providers with deep healthcare payer capabilities and proven regulatory execution across CMS mandates, HIPAA, and interoperability requirements, supported by end-to-end delivery capabilities

Cost-aligned commercial models
Evaluate service providers on shared savings, and value-based pricing constructs that tie transformation outcomes to MLR improvement, administrative cost reduction, and member experience KPIs

Proprietary platform and accelerators
Give preference to service providers with mature, payer-specific platforms and accelerators, as stronger platform maturity reduces transition risk and accelerates claims and enrollment modernization

Enterprise-grade AI integration
Assess service providers on scaled AI and gen AI deployments across adjudication support, prior authorization, payment integrity, fraud, risk adjustment, and contact centers, with measurable cost, productivity, and turnaround time improvements

Delivery capability
Assess global delivery scale, payer-focused CoEs, AI talent maturity, and ecosystem alliances; large providers offer end-to-end scale, while specialists provide niche domain or platform depth

Summary analysis

Buyers prioritize service providers with strong payer domain depth and regulatory expertise.

Production-scale AI embedded in core claims and care workflows is a key selection driver.

Platform maturity and outcome-linked pricing tied to MLR and cost efficiency are increasingly shaping modernization outcomes and vendor selection.

Delivery scale and strategic partnerships are critical for large, complex digital transformations.

Key takeaways for payers

Healthcare payers prioritize service providers with domain expertise, production-scale AI, and mature payer platforms. Measurable care outcomes and administrative cost improvement, regulatory strength, and scalable execution remain key selection criteria.

RoI-led modernization

Anchor digital initiatives to measurable business outcomes, including MLR improvement and cost reduction, supported by structured business case articulation and governance frameworks

Phased, risk-managed modernization

Adopt API-driven integration models to enable incremental transformation across claims, enrollment, and care operations while mitigating transformation risk

Data and interoperability readiness

Establish unified data layers, FHIR-aligned interoperability, and governance frameworks to enable enterprise-scale AI and real-time decisioning

Value-driven portfolio selection

Evaluate incumbents alongside specialized or mid-sized service providers based on platform maturity, transformation capability, and regulatory expertise over short-term pricing advantage

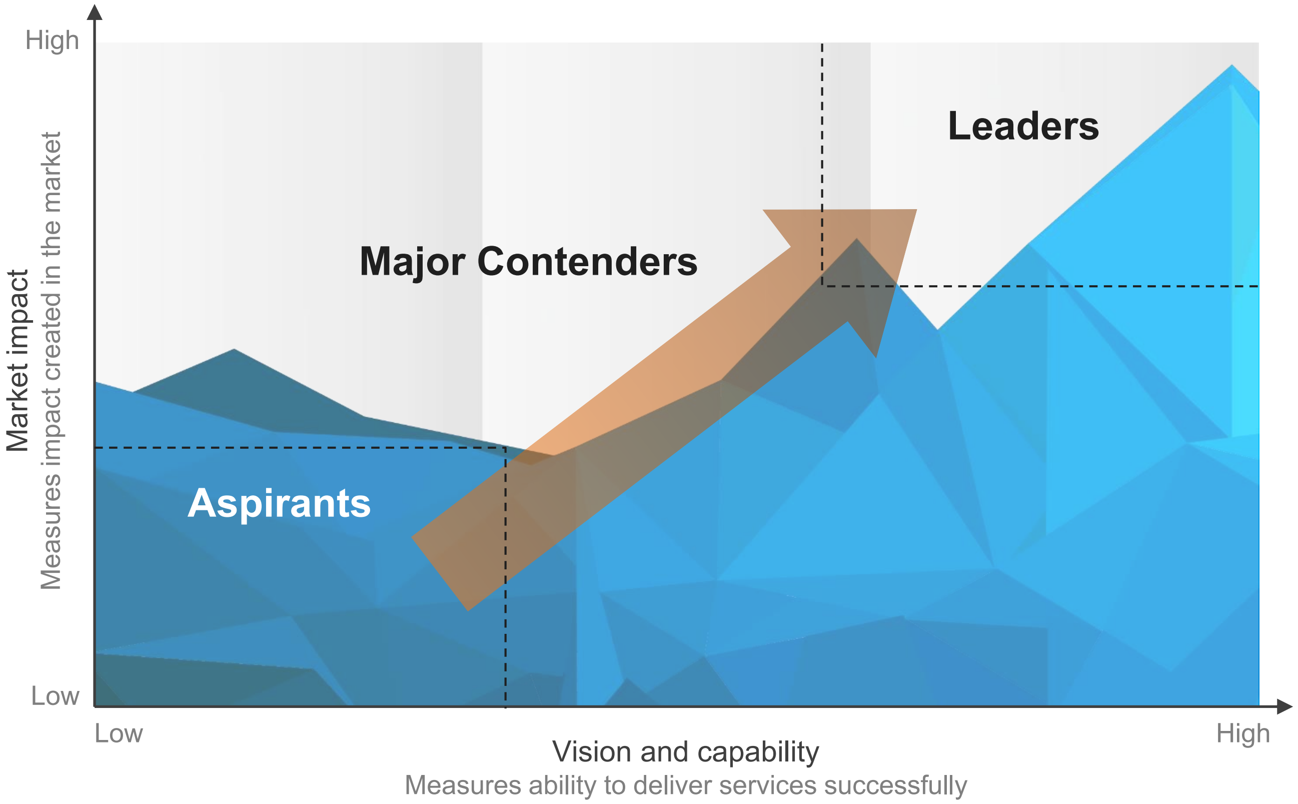
Appendix

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



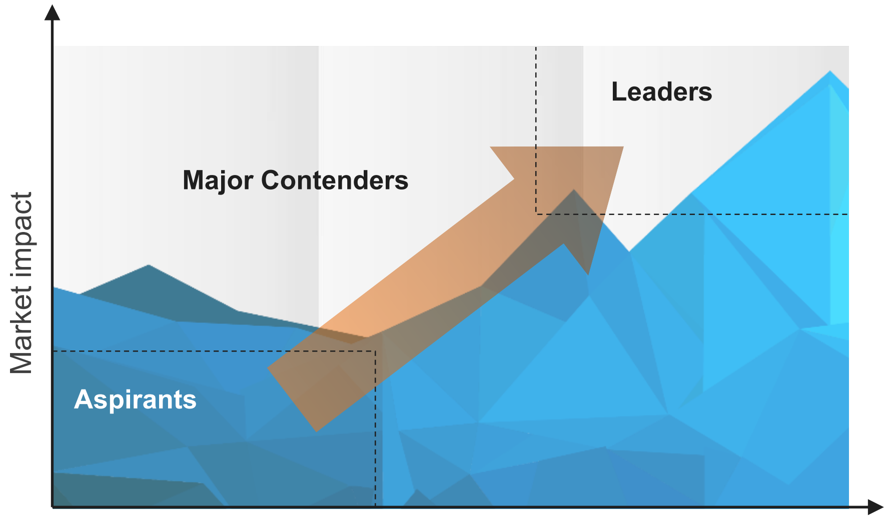
Services PEAK Matrix® evaluation dimensions

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



Vision and capability

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, for example, 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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