IDC MarketScape

IDC MarketScape: U.S. Value-Based Healthcare Analytics 2025 Vendor Assessment

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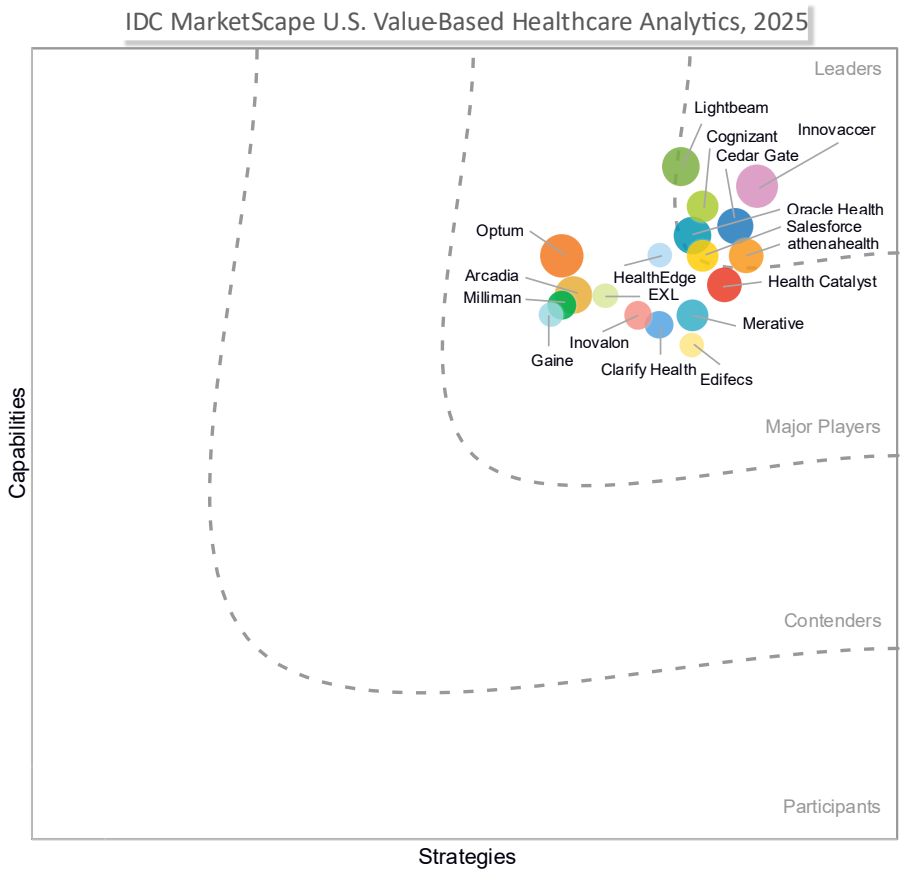
THIS EXCERPT FEATURES COGNIZANT AS A LEADER

IDC MARKETSCAPE FIGURE

FIGURE 1

IDC MarketScape U.S. Value-Based Healthcare Analytics Vendor Assessment



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See the Appendix for detailed methodology, market definition, and scoring criteria.

ABOUT THIS EXCERPT

The content for this excerpt was taken directly from IDC MarketScape: U.S. Value-Based Healthcare Analytics 2025 Vendor Assessment (Doc # US53765825).

IDC OPINION

With the evolution of value-based healthcare (VBH) initiatives and goals, organizations are relying on analytic advancements to offset challenges and spur innovation aimed at better healthcare outcomes for all. Healthcare as a whole continues an uphill climb toward lower-cost and higher-quality care. Recent mergers and acquisitions (M&A) are creating new synergies and collaboration that not only changes the healthcare landscape but also challenges all members of the ecosystem to reimagine how analytics, artificial intelligence (AI)/machine learning (ML), and other technologies can better support scalable and sustainable change.

The U.S. healthcare technology markets in 2025 are being fundamentally reshaped by the convergence of value-based care (VBC) initiatives, advanced data interoperability, analytics, AI, and strategic collaboration across the healthcare ecosystem. This era is defined by the quintuple aim: improved clinical outcomes, cost containment, enhanced patient engagement, improved provider experiences, and increased health equity.

Core Growth Drivers Shaping Value-Based Healthcare Today

- **Accelerated digital transformation:** Data-centric platforms, cloud infrastructures, and application programming interfaces (API)–driven solutions empower real-time analytics and integration of diverse data sources. These capabilities support patient-centered care and enable timely clinical decision-making at the point of care essential for achieving value-based outcomes.
- **Policy, regulatory, and sustainability forces:** Mandates like the 21st Century Cures Act demand interoperability and prohibit information blocking, compelling both vendors and providers to upgrade technology and adopt more agile, data-driven approaches. Sustainability and social determinants of health (SDOH) are now key analytic inputs, guiding health equity interventions and regulatory compliance.
- **Consumer and patient expectations:** Patients increasingly expect transparency, control, and personalized care experiences. Patient-facing apps, interoperable electronic health records (EHRs), and personalized analytics tools are rapidly scaling to meet these demands.

- **Strategic AI and analytics deployment:** AI-powered analytics enable risk stratification, predictive modeling, and workflow optimization, reducing clinicians' administrative burden and supporting proactive interventions in chronic care management and medication adherence.
- **Chronic illness demographics:** The doubling of Americans aged over 50 with chronic disease to 143 million by 2050 exemplifies the urgent need for data-driven population health management. Chronic illness statistics support market forecasts, highlight technology investment priorities, and are instrumental in designing targeted analytic solutions for at-risk groups.
- **Partnerships, M&A, and ecosystem collaboration:** Strategic partnerships and mergers among providers, payers, tech firms, and consulting experts are driving innovation. These relationships support modular solution development, expand benchmarking and best practice sharing, and foster robust data governance.

This 2025 IDC MarketScape for U.S. value-based healthcare analytics evaluates software vendors providing analytics and insights that support the components of the quintuple aim: improved care outcomes, cost containment, enhanced patient engagement, improved provider experience, and increased health equity.

Since the 2023 IDC MarketScape for U.S. population health analytics, there have been notable changes to the capabilities offered by many vendors. The use of AI and ML in healthcare analytics continues to grow and evolve as healthcare specialty analytics vendors support use cases spanning patient engagement/experience to better medication adherence support and more accurate predictive models related to future health events and outcomes. With a heavy emphasis on not just the quantity of data but also the quality and timeliness of the data being used to identify areas of opportunity and better anticipate patients' needs, many vendors are delivering on promises of greater actionable insights at the point of care. Incorporation of SDOH and other health status impacting data is also becoming an increasingly common component of comprehensive patient profiles, which allows value-based health key stakeholders to uncover previously unknown or underrecognized barriers to health.

IDC MARKETSCAPE VENDOR INCLUSION CRITERIA

Most vendors considered for inclusion in this 2025 IDC MarketScape for U.S. value-based healthcare analytics offer an enterprise analytic solution or a specialty niche analytic application to healthcare payers and/or providers. All have the functionality to identify and risk stratify patients based on clinical and financial data and produce actionable insights that support care gap closure, optimization of data insights into care team workflows, as well as the functionality to measure the financial and clinical performance of individual physicians at all organizational levels of the enterprise.

IDC Health Insights' vendor inclusion criteria for this 2025 IDC MarketScape for U.S. value-based healthcare analytics include the following:

- Analytic functionality helps identify and stratify patients and generate performance measurement results for providers/programs at all levels (individual, group, network, etc.). Functionality can be sold as a standalone product or as part of a suite of products or analytic offerings.
- It includes the ability to export analytic results to populate standalone patient registries, care management applications, and/or other workflow tools and populate tools that communicate performance measurement results to clinicians on a periodic basis. Export capabilities may include industry standard applications such as Excel, the vendor's workflow applications, or a third-party application vendor product.
- Referenceable clients (at least two that will speak to IDC Health Insights analysts) are using all or the majority of the product's value-based health service solution functionality. Reference clients must be in production for at least 12 months.
- Technology solution/services must be installed and in production in 10 or more payer or provider (hospital and or physician group practice) organizations for at least 12 months.
- The vendor commits to making the required resources available to meet the research timeline.

There are, of course, vendors that have some capabilities to enable value-based healthcare analytics, but they do not meet this IDC MarketScape criteria.

ADVICE FOR TECHNOLOGY BUYERS

As the value-based healthcare landscape rapidly advances, payers and providers must approach analytics technology purchasing decisions with a rigorous, future-focused mindset. The convergence of AI, real-time data flows, interoperability, and advanced analytics is fundamentally reshaping how stakeholder decisions are made, patient outcomes are optimized, and business value is realized, placing ever greater pressure on buyers and suppliers to adapt effectively.

For healthcare payers and providers evaluating VBC analytics solutions, consider the following guidance:

- **Insist on true data interoperability across platforms.** Confirm vendors natively support FHIR, API, and real-time bidirectional data flows, enabling seamless integration with EHRs, health information exchanges (HIEs), and patient-facing applications for holistic analytics and reporting.

- **Prioritize AI-driven risk stratification and predictive capabilities.** Demand proof that the solution's algorithms can analyze diverse clinical and SDOH data sets, identify high-risk cohorts, and suggest effective, targeted interventions early, demonstrable by predictive success metrics.
- **Vet retrospective and real-time analytical processing.** Evaluate the platform's ability to deliver both multiyear retrospective analyses (utilization, cost, compliance) and close-to-real-time insights (care gaps, readmissions, risk score changes) based on streaming and batch data sources.
- **Assess benchmarking and key performance indicator (KPI) customization options.** Ensure granular, peer group benchmarking and the ability to rapidly customize performance indicators to meet shifting statutory, contractual, and competitive demands in value-based markets.
- **Examine patient engagement and digital enablement features.** Require that analytics dashboards integrate with patient portals, mobile apps, and virtual assistants to support data-driven patient outreach, education, and engagement that align directly with value metrics.
- **Review scalability, automation, and compliance.** Select platforms that automate reporting, streamline prior authorization, and adapt to new regulations, ensuring the solution is future proofed against industry changes and marketplace demands.

VENDOR SUMMARY PROFILES

This section briefly explains IDC's key observations resulting in a vendor's position in the IDC MarketScape. While every vendor is evaluated against each of the criteria outlined in the Appendix, the description here provides a summary of each vendor's strengths and challenges.

Cognizant

Cognizant is positioned in the Leaders category in this 2025 IDC MarketScape for U.S. value-based healthcare analytics.

Cognizant Technology Solutions, headquartered in Teaneck, New Jersey, was founded in 1994 and is a global professional services and technology company with a deep focus on the healthcare sector. The organization's mission is to become the preeminent partner for healthcare clients, advancing science and improving health outcomes worldwide by delivering integrated, data-driven solutions across the healthcare continuum. Cognizant's solutions are implemented in both national payers and provider networks, affecting over 200 million lives and partnering with nearly two dozen top U.S. health plans.

Cognizant's value-based healthcare analytics solution centers on its TriZetto suite, an integrated portfolio of platforms and tools designed to support payers, providers, and "payviders." The core offering includes:

- **TriZetto Facets, QNXT, and QicLink:** Foundational platforms for payer administration, claims processing, and analytics
- **TriZetto NetworX PBA and Analytics:** Purpose built for managing and optimizing episodic and bundled payment programs
- **TriZetto CareAdvance:** Supporting care coordination and quality improvement programs
- **Trizetto ClaimSphere QaaS and ClaimSphere Clinical+:** Driving clinical data integration for performance analytics and regulatory reporting
- **OneCare Platform and Salesforce Health Cloud integration:** Enabling virtual care, remote monitoring, and enhanced patient/provider experience

Key features include data integration (e.g., claims, EHR, SDOH, mobile/wearables), risk stratification models, AI-powered automation (e.g., NLP-driven coding, generative AI for care plans), and integrated quality measure tracking (such as HEDIS and Stars). The suite supports bidirectional interoperability through standards like HL7 and FHIR and offers modular adoption for population risk stratification, performance analytics, care gap management, contract modeling, and patient engagement.

Data-driven personalization and risk stratification include:

- Integrates structured and unstructured data (e.g., claims, EHR, SDOH, remote devices) for longitudinal health insights
- Employs multiple risk stratification models (e.g., Johns Hopkins ACG, CMS-HCC) and client-customized AI models to:
  - Identify high-risk individuals for targeted interventions.
  - Support early detection of patient status changes.
  - Enable tailored care plans and chronic condition management.

Care gap identification and closure include:

- Supports real-time care gap analysis, alerting care teams and providers to opportunities for preventive action
- Utilizes generative AI–powered tools to automate the creation of personalized care plans, referencing clinical guidelines and evolving patient health data
- Provides automated reminders and member education to boost medication adherence and engagement

Population health and quality improvement include:

- Empowers organizations to monitor and stratify patient populations, enabling targeted disease management and preventive care
- Tracks and benchmarks performance against regulatory and quality measures (e.g., HEDIS, Stars, MIPS), supporting continuous improvement and evidence-based practices.
- Enables integrated care across clinical, behavioral, and social domains by surfacing nonclinical risks and including them in care planning logic

Common use cases and integration features include:

- **Clinical data aggregation:** Cognizant's solutions aggregate structured and unstructured data from EHRs, claims, medical charts, and remote patient monitoring devices. This longitudinal data powers risk stratification, care management, and predictive modeling — directly aligning analytics and insights with clinicians' workflows.
- **Integrated dashboards and point-of-care tools:** Data and insights from analytics are surfaced through integrated dashboards and embedded in provider workflows, enabling clinicians and care managers to receive real-time notifications about care gaps, quality alerts, and intervention opportunities within their existing EHR environment.
- **Automated quality reporting:** The platform consolidates care and quality data from disparate EHRs, automatically applies regulatory measure logic (e.g., HEDIS, Stars), and generates reporting for compliance and performance improvement.
- **Customizable care alerts and best practice pathways:** Clients can tailor care alert logic and intervention triggers according to internal standards and contract requirements, ensuring that analytics-driven recommendations are relevant and timely within local workflows.
- **Patient engagement and remote monitoring:** The integration extends to patient mobile applications, wearables, and telehealth platforms, enabling capture and transmission of patient-reported and device-generated data back into EHRs and analytics environments.

Strengths

- **Scalable platform:** Cognizant brings a unified portfolio covering the full spectrum of value-based care analytics, payment modeling, risk adjustment, and care management. The ability to serve both payers and providers through integrated solutions offers clients flexibility in supporting current and future value-based arrangements.
- **AI and automation:** Embedded AI/ML, including generative AI–driven care plan generation, NLP-based clinical coding, and predictive analytics for risk

stratification, unlock operational efficiencies and support proactive, data-driven decision-making.

- **Interoperability:** The platform features integration with EHRs, core payer systems, and data sources such as structured/unstructured clinical data, SDOH, and patient-reported outcomes, enabling bidirectional information flow and alignment of administrative and clinical domains.
- **Proven outcomes and measurable value:** Multiple client case studies substantiate return on investment (ROI), including decreased readmission and complication rates, operational cost savings, and improved quality performance. Key metrics include 30% savings per payment bundle, 70% reduction in readmissions, and notable improvements in HEDIS and Stars quality scores.

Challenges

- **Complex implementation for multifaceted organizations:** Given the breadth and configurability of the TriZetto suite, large-scale deployments can require significant up-front planning, change management, and resource investment, particularly for organizations lacking prior experience with modular, enterprise platforms.
- **Evolving outcome-based pricing models:** While Cognizant engages in some outcome-based risk contracts, defining and attributing outcomes in complex environments can be challenging, presenting obstacles for clients seeking full risk-share partnerships.
- **Dependence on data quality and interoperability maturity:** The effectiveness of advanced analytics, AI models, and automation features may be limited by clients' internal data governance, quality, and interoperability infrastructure.
- **Customization requirements:** The high degree of configuration and tailored stratification, while a strength, may also extend timelines and require robust client involvement to fully realize the personalized potential of care gap logic and innovative analytics.

Consider Cognizant When

Buyers should consider Cognizant when seeking an end-to-end value-based healthcare analytics platform that integrates AI capabilities and supports payers, providers, or payviders through all phases of risk contract management, population health, and quality improvement.

Cognizant's value-based healthcare analytics solution is designed to empower payers, providers, and integrated health networks to deliver better care quality, improve patient outcomes, and realize measurable cost reductions.

APPENDIX

Reading an IDC MarketScape Graph

For the purposes of this analysis, IDC divided potential key measures for success into two primary categories: capabilities and strategies.

Positioning on the y-axis reflects the vendor's current capabilities and menu of services and how well aligned the vendor is to customer needs. The capabilities category focuses on the capabilities of the company and product today, here and now. Under this category, IDC analysts will look at how well a vendor is building/delivering capabilities that enable it to execute its chosen strategy in the market.

Positioning on the x-axis, or strategies axis, indicates how well the vendor's future strategy aligns with what customers will require in three to five years. The strategies category focuses on high-level decisions and underlying assumptions about offerings, customer segments, and business and go-to-market plans for the next three to five years.

The size of the individual vendor markers in the IDC MarketScape represents the market share of each individual vendor within the specific market segment being assessed.

IDC MarketScape Methodology

IDC MarketScape criteria selection, weightings, and vendor scores represent well-researched IDC judgment about the market and specific vendors. IDC analysts tailor the range of standard characteristics by which vendors are measured through structured discussions, surveys, and interviews with market leaders, participants, and end users. Market weightings are based on user interviews, buyer surveys, and the input of IDC experts in each market. IDC analysts base individual vendor scores, and ultimately vendor positions on the IDC MarketScape, on detailed surveys and interviews with the vendors, publicly available information, and end-user experiences in an effort to provide an accurate and consistent assessment of each vendor's characteristics, behavior and capability.

Market Definition

Value-based health analytics is a series of strategies and tactics used to manage patients at risk of poor financial and clinical outcomes. Therefore, the key capabilities required of an analytic application include the following:

- The vendor has the analytic functionality to identify and stratify patients and to generate provider performance measurement results on providers at all levels

(individual, group, network, etc.). The functionality must be sold as a standalone product or as part of a suite of analytic offerings.

- Analytic results can be exported to both populate standalone patient registries, care management applications, and/or other workflow tools and communicate performance measurement results to clinicians electronically on a periodic basis. Export capabilities must include industry-standard applications such as Excel, the vendors' workflow applications, or a third-party application vendor product.

LEARN MORE

Related Research

- *Worldwide GenAI Industry Use Case Early Adoption Trends, 2025: Healthcare Payers* (IDC #US53331725, April 2025)
- *Worldwide GenAI Industry Use Case Early Adoption Trends, 2025: Healthcare Providers* (IDC #US53331625, April 2025)
- *IDC MaturityScape Benchmark: AI-Fueled Organization Worldwide, 2025* (IDC #US53271725, March 2025)
- *IDC TechBrief: GenAI-Enabled Patient Engagement and Enablement Technology for Value-Based Healthcare* (IDC #US53263024, March 2025)
- *IDC MarketScape: U.S. Patient Engagement and Enablement Technology 2024–2025 Vendor Assessment* (IDC #US52721524, December 2024)

Synopsis

This IDC MarketScape evaluates the U.S. value-based healthcare analytics vendor market. The market is evolving as at-risk contracts tied to quality and cost performance mature and become more commonplace. Client needs are also evolving as a growing number of data types and sources such as SDOH become vital to support more robust analytics and AI/ML-supported workflows. Whether supporting enhanced data analytics, risk stratification, interoperability, and/or end-user efficiency, the need for value-based healthcare analytics as the foundation for sustainability and success is becoming clearer.

"The U.S. value-based healthcare technology sector has rapidly evolved from basic population health tools to sophisticated platforms that integrate real-time data, advanced analytics, and seamless care coordination. Today, technology is enabling providers and payers to move beyond retrospective cost savings and focus on proactive risk management, patient engagement, and measurable clinical outcomes, unlocking the full potential of value-based care models in an increasingly complex landscape." — Jennifer Eaton, research director, Value-Based Healthcare IT Transformation Strategies

ABOUT IDC

International Data Corporation (IDC) is the premier global provider of market intelligence, advisory services, and events for the information technology, telecommunications, and consumer technology markets. With more than 1,300 analysts worldwide, IDC offers global, regional, and local expertise on technology, IT benchmarking and sourcing, and industry opportunities and trends in over 110 countries. IDC's analysis and insight helps IT professionals, business executives, and the investment community to make fact-based technology decisions and to achieve their key business objectives. Founded in 1964, IDC is a wholly owned subsidiary of International Data Group (IDG, Inc.).

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