



Everest Group Care Management Platforms for Payers PEAK Matrix® Assessment 2025

Focus on Cognizant
September 2025



Background of research

Payers in the healthcare industry are rapidly evolving to meet the growing demand for Value-based Care (VBC), proactive population health management, and improved member outcomes. Care management platforms have emerged as strategic enablers in this transformation, offering tools that unify member data, streamline clinical workflows, and enhance engagement across medical and social domains. These platforms now serve as foundational infrastructure to manage chronic conditions, reduce total cost of care, and support regulatory reporting such as HEDIS® and Star ratings.

In recent years, care management platform providers have accelerated investments in next-generation technologies including generative AI for care plan drafting, agentic AI for real-world interventions, and data interoperability frameworks that connect disparate sources such as Electronic Health Records (EHRs), Social Determinants of Health (SDoH) inputs, and wearables. Despite progress, payers continue to face challenges related to EHR integration, limited automation of functions such as prior authorization, and slower-than-expected adoption of emerging capabilities. As a result, buyers increasingly prioritize scalability, real-time analytics, User Experience (UX), and ecosystem partnerships in their platform selection.

In the research, Everest Group presents a comprehensive assessment of 19 care management platform providers featured on the [Care Management Platforms for Payers PEAK Matrix® Assessment 2025](#). Each provider profile highlights its care management capabilities, technological investments, and alignment with payer expectations. The evaluation is based on Everest Group's annual Request for Information (RFI) process, interactions with platform vendors, buyer interviews, and ongoing market analysis of care management technology for payers.

This report includes the profiles of the following 19 leading care management platform providers featured on the Care Management Platforms for Payers PEAK Matrix:

- **Leaders:** Cognizant, Optum, ZeOmega, and Zyter|TruCare
- **Major Contenders:** Carenet Health, Elligint Health, enGen, EXL CareRadius™, Gainwell Technologies, HealthEdge, Innovaccer, MHK, Oracle, Pega, and Salesforce
- **Aspirants:** Arcadia, Autonomize AI, Datos Health, and Medecision

Scope of this report

Geography: global

Industry: market activity and investments of 19 leading care management platform providers; healthcare

Domain: care management

Use cases: 19 enterprises in the care management space

Scope of the evaluation

Everest Group's definition of care management platforms

[NOT EXHAUSTIVE]

Focus of research



Care outcomes improvement

- Disease management and decision-making support
- Mental and behavioral health
- Care coordination
- Referral management
- Care planning and management



Population health management

- Value-based care
- Health and wellness management



Utilization management

- Prior authorization
- Utilization review

Platform tenets



Modular and scalable



Unified data integration layer



Interoperable (API integration and microservices architecture)



Secure and compliant



User-centric design

Technology enablers



Cloud



Data management



Reporting and analytics



IT security



Mobility



Automation



AI

Source: Everest Group (2025)

Care Management Platforms for Payers PEAK Matrix® characteristics

Leaders

Cognizant, Optum, ZeOmega, and Zyter|TruCare

- Leaders have a strong vision to enhance care management capabilities with next-generation functionalities, leveraging vertical expertise and technical strengths, and driving strong adoption across large-payer accounts
- They also provide robust support services to assist enterprises in implementation, change management, customization, and ongoing issue resolution
- Leaders demonstrate balanced strengths across utilization, disease, and population health management, supported by strong EHR interoperability and FHIR-based data exchange
- They differentiate through advanced automation (OCR/NLP, and agentic AI), payer-core integration, and behavioral health/quality management depth, alongside prescriptive care plans, low-/no-code workflows, automated rules engines, conversational AI-driven UI, real-time insights, and automated reporting

Major Contenders

Carenet Health, Elligint Health, enGen, EXL CareRadius™, Gainwell Technologies, HealthEdge, Innovaccer, MHK, Oracle, Pega, and Salesforce

- Major Contenders provide broad functional coverage and have strong traction among mid-market and regional payers, though adoption among large enterprises remains more limited
- Many rely on partner ecosystems (EHR vendors, hyperscalers, analytics firms, and system integrators) to enhance platform capabilities and support delivery, while others depend heavily on internal resources for customization and services
- They demonstrate growing investment in AI, analytics, and SDoH integration, and some are making progress in leveraging behavioral and social health data. However, gaps remain in critical areas such as prior authorization, behavioral health, and referral management
- Clients recognize Major Contenders' configurability and value-for-money positioning, but also cite challenges with deployment complexity, service consistency, and limited flexibility in engagement models

Aspirants

Arcadia, Autonomize AI, Datos Health, and Medecision

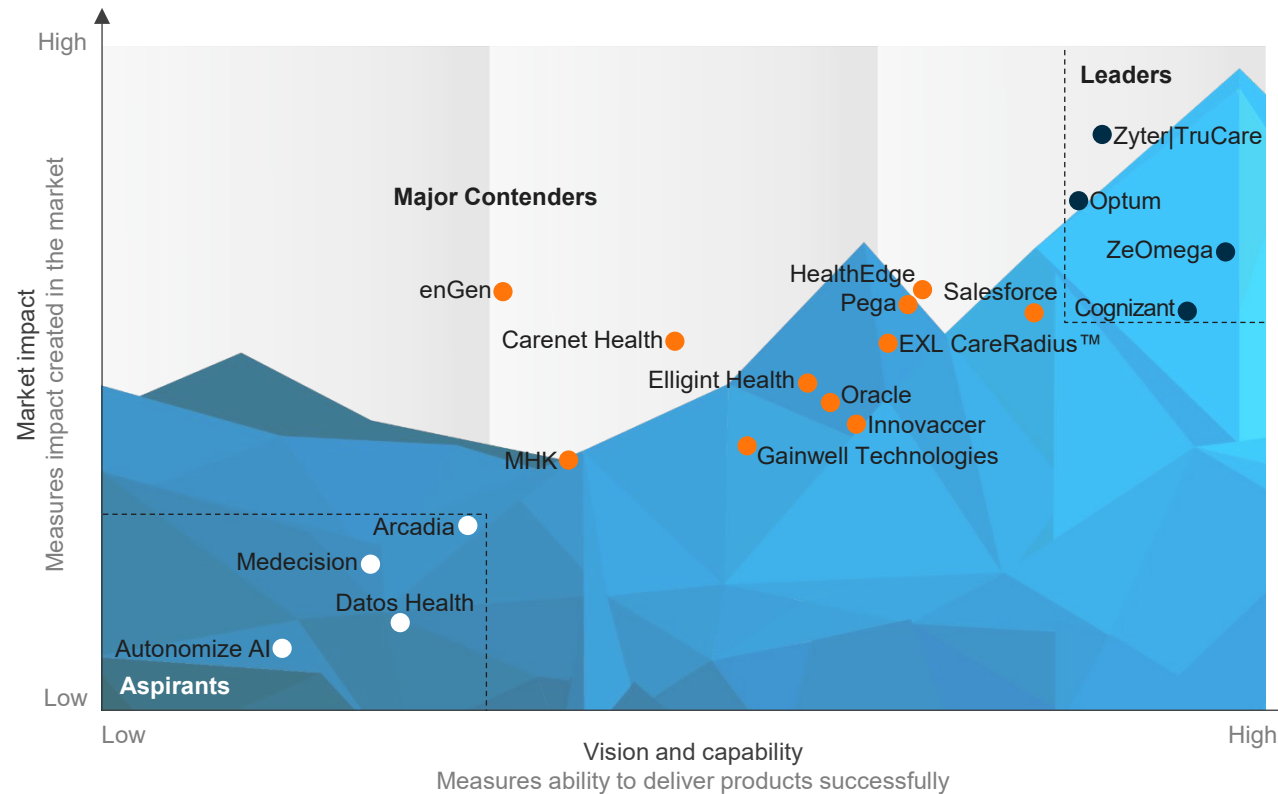
- Aspirants focus on specialized areas, such as population health management, AI-driven automation, or social care coordination, but lack the full breadth of end-to-end care management functionality
- They are recognized for innovation in AI, data interoperability, and low-/no-code tools, but adoption remains more concentrated among smaller payer accounts
- Aspirants face challenges in scaling deployments, publishing large-payer case studies, and building brand recognition when compared with more established competitors
- To advance, Aspirants will need to broaden platform coverage, strengthen outcome-focused commercial constructs, and enhance implementation and support services

Everest Group PEAK Matrix®

Care Management Platforms for Payers PEAK Matrix® Assessment 2025 | Cognizant is positioned as a Leader

Everest Group Care Management Platforms for Payers PEAK Matrix® Assessment 2025¹

- Leaders
- Major Contenders
- Aspirants



¹ Assessments for Carenet Health, Datos Health, Elligint Health, Gainwell Technologies, HealthEdge, Medecision, MHK, Optum, Oracle, and Salesforce excludes platform provider inputs and are based on Everest Group's proprietary Transaction Intelligence (TI) database, provider public disclosures, and Everest Group's interactions with care management healthcare buyers
Source: Everest Group (2025)

Cognizant

Everest Group assessment – Leader

Measure of capability:  Low  High

Market impact				Vision and capability					
Market adoption	Portfolio mix	Value delivered	Overall	Vision and strategy	Technology capability	Flexibility and ease of deployment	Engagement and commercial model	Support	Overall
									

Strengths

- Cognizant offers a modular suite of care management solutions spanning utilization management, disease management, and population health management through its CareAdvance® platform, which can operate as stand-alone modules or integrate for end-to-end care management
- Its TriZetto® Payer Prior Authorization Solution delivers strong automation capabilities, streamlining end-to-end workflows and reducing manual effort. It leverages HL7 FHIR for interoperability, integrates with QNXT and Facets, and offers a configurable rules engine to support both standard clinical guidelines and custom business logic
- It leverages OCR and NLP technologies to automate fax-based intake processes and streamline the completion of authorization forms, improving efficiency and reducing manual effort
- It leverages its deep service provider heritage and strong partnerships with BigTech firms and major hyperscalers such as Google for generative AI and AWS for analytics model enhancement to strengthen its care management platform
- Clients cite its support services and integration capabilities as outperforming peers and being key differentiators, highlighting the platform’s ability to connect with diverse systems and enable efficient, scalable data exchange

Limitations

- While Cognizant offers a broad range of functionalities, clients cite that the platform’s UI feels outdated and occasionally encounters glitches or crashes
- Clients also report frequent technical workarounds for document uploads and downloads, impacting system stability and slowing performance, underscoring the need for modernization
- It is perceived as a premium-priced provider, which may limit its appeal among cost-sensitive payers and highlights an opportunity to improve price competitiveness
- Additional training is required for certain modules such as disease management and utilization management due to their complexity and the learning curve involved for optimal use, as cited by clients

Market trends

Payers are accelerating investments in care management platforms to address rising cost pressures, enable VBC, and enhance member outcomes, yet challenges around data, AI adoption, and workflow complexity create both urgency and opportunity

Market size and growth

The payer care management platform market is estimated to be valued between \$5.5 billion and \$6.5 billion in 2024, and is expected to grow at a CAGR of 13.5% to 16.5% over the next five years.

This growth is largely driven by rising demand for better member outcomes, improved care coordination, enhanced population health, more robust quality reporting, and automation of prior authorization workflows.

Key drivers for care management platforms for payers

Escalating cost and value pressures

- Rising healthcare expenses, broader shift to VBC models, and the aging population make proactive and coordinated care management essential
- Payers recognize that effective care management can reduce costs, while improving member outcomes

Regulatory compliance and meeting member expectations

- Payers are leveraging care management platforms to meet compliance mandates and improve HEDIS® and Star performance, directly impacting reimbursement and accreditation
- Improving communication and engagement through these platforms supports higher member satisfaction and aligns with broader quality and performance objectives

Demand for real-time analytics and operational insights

- Payers require platforms that offer near real-time intelligence, supporting informed decisions, regulatory compliance, and quality tracking, especially around HEDIS® and Star ratings
- This becomes even more critical amid evolving payer-provider collaboration needs

Opportunities and challenges

Interoperability remains a barrier, but also a key differentiator

- Many platforms still struggle to integrate cleanly across EHRs, labs, claims, and SDoH data
- However, solving for seamless, real-time data exchange presents a major opportunity to deliver unified member records and coordinated care at scale

AI adoption is limited, yet ripe for targeted expansion

- Adoption of generative AI and agentic AI remains limited across enterprises due to data-readiness, trust, and integration concerns
- However, providers that can operationalize AI in areas such as care plan automation, medical necessity checks, and Star ratings optimization present low-risk, high-impact opportunities for adoption

Workflow complexity hinders automation

- Payer-specific variability in processes such as prior authorization and care transitions makes standardization difficult
- This opens opportunity for providers to offer modular, configurable platforms that meet diverse client needs while laying the groundwork for scalable automation

Key buyer considerations

Payers are setting a high bar for care management platforms, prioritizing interoperability, automation, configurability, UX, and continuous innovation as core selection criteria

Key sourcing criteria

High



Robust interoperability across the healthcare ecosystem

Payers now view seamless interoperability with EHRs, claims systems, and health plan infrastructure as non-negotiable to enable unified data access, real-time insights, and coordinated care delivery across the ecosystem.



Automation of manual processes

Platform providers are increasingly expected to embed automation, rules engines, and AI to streamline high-volume workflows, reduce administrative burden, and deliver measurable gains in operational efficiency.



Customization of platform

Off-the-shelf platforms are no longer sufficient as payers expect deep configurability that allows flexible adaptation of workflows, assessments, and rulesets to support rapidly evolving care models and compliance needs.



Intuitive, user-centric design and configurable interfaces

A modern, user-friendly interface is a baseline requirement, as payers seek guided experiences that enhance usability, shorten onboarding time, and empower frontline teams with embedded intelligence and self-service tools.



Continuous support and platform innovation

Payers now demand continuous provider engagement, timely upgrades, and a forward-looking roadmap aligned to trends such as VBC, SDoH, and AI, elevating innovation from a nice-to-have to a core differentiator.

Priority

Low

Summary analysis

Payers now view seamless data exchange and intelligent automation as table stakes. They expect care management platforms to integrate effortlessly with core systems, while reducing manual effort through embedded AI and rules-based engines.

Beyond connectivity, payers are looking for platforms that can adapt to evolving care models with deep configurability and offer intuitive interfaces that improve usability and empower care teams.

Continuous provider partnerships, timely upgrades, and alignment with emerging trends, such as VBC, SDoH integration, and AI, are no longer optional, as they define long-term differentiation.

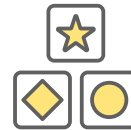
Key takeaways for buyers

Buyers should prioritize platforms that go beyond legacy functions to enable automation, real-time decisioning, and seamless integration. Generative AI-driven care planning, support for complex populations, and mature data integration (EHR, claims, and SDoH) are key differentiators in vendor evaluation.



Shifts in provider capabilities

Previously, care management platform vendors focused primarily on functional breadth and workflow digitization. However, priorities are now shifting as platform providers are strengthening domain-specific capabilities (for example, chronic care and behavioral health), accelerating investments in generative AI-led delivery and automation to ease administrative burden, and pivoting toward modular, configurable innovation. This shift reflects the industry's move toward outcome-driven, AI-powered orchestration.



Differentiation across provider types

Platform providers are differentiating through AI maturity, clinical decision support, and alignment to NCQA / Star ratings and complex populations. While some offer full-suite capabilities, others specialize in high-impact modules such as utilization management or population health management. EHR integration remains a major hurdle as platform providers with seamless interoperability have a distinct edge. Buyers should align vendor selection to their care priorities and technical needs.



Key innovations

Generative AI is emerging as the new user interface (UI) layer, enabling conversational prompts, care plan automation, and next-best-action support. Platform providers are also advancing real-time Star ratings optimization and exploring practical agentic AI use cases such as prior authorization, making these critical metrics for vendor tracking and performance evaluation.

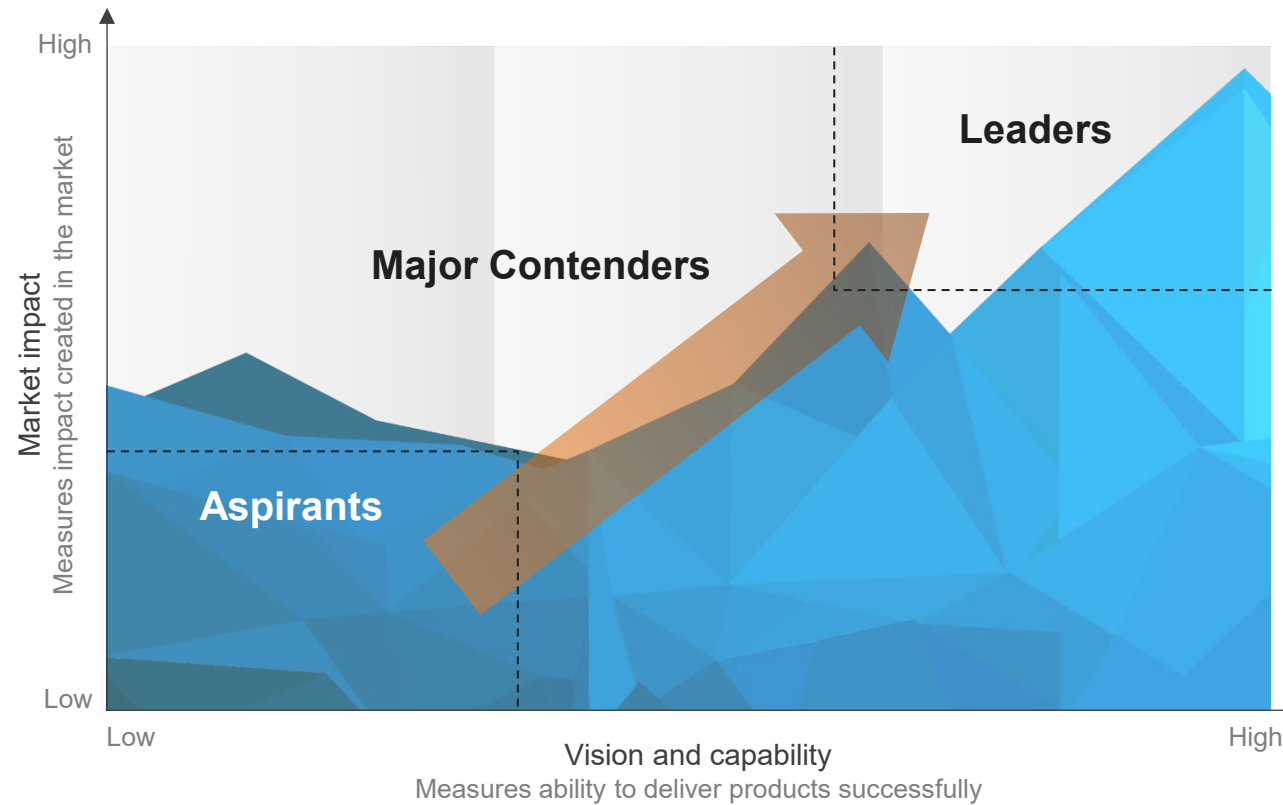
Appendix

PEAK Matrix® framework

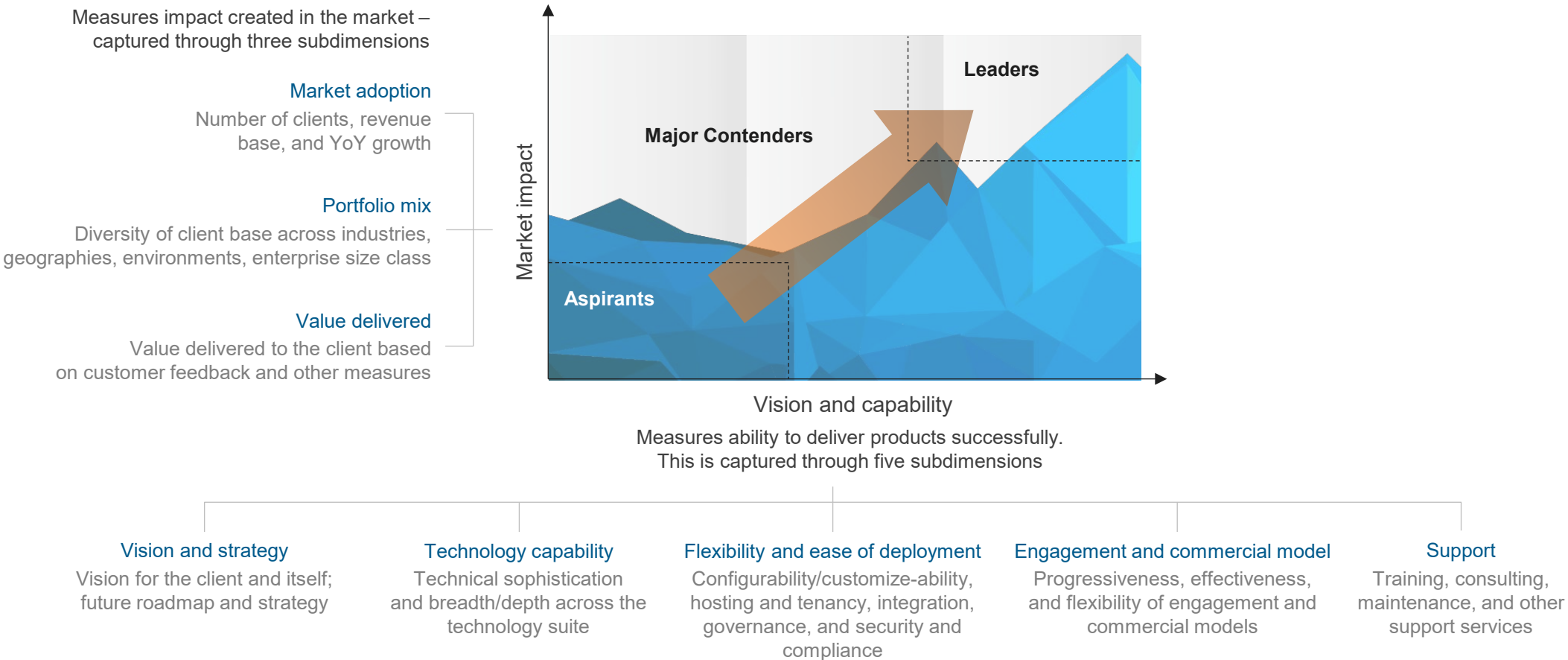
FAQs

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

Everest Group PEAK Matrix



Products PEAK Matrix® evaluation dimensions



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 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.

Stay connected

Dallas (Headquarters)

info@everestgrp.com
+1-214-451-3000

Bangalore

india@everestgrp.com
+91-80-61463500

Delhi

india@everestgrp.com
+91-124-496-1000

London

unitedkingdom@everestgrp.com
+44-207-129-1318

Toronto

canada@everestgrp.com
+1-214-451-3000

Website

everestgrp.com

Blog

everestgrp.com/blog

Follow us on



Everest Group is a leading research firm helping business leaders make confident decisions. We guide clients through today's market challenges and strengthen their strategies by applying contextualized problem-solving to their unique situations. This drives maximized operational and financial performance and transformative experiences. Our deep expertise and tenacious research focused on technology, business processes, and engineering through the lenses of talent, sustainability, and sourcing delivers precise and action-oriented guidance. Find further details and in-depth content at www.everestgrp.com.

Notice and disclaimers

Important information. Please read this notice carefully and in its entirety. By accessing Everest Group materials, products or services, you agree to Everest Group's Terms of Use.

Everest Group's Terms of Use, available at www.everestgrp.com/terms-of-use, is hereby incorporated by reference as if fully reproduced herein. Parts of the Terms of Use are shown below for convenience only. Please refer to the link above for the full and official version of the Terms of Use.

Everest Group is not registered as an investment adviser or research analyst with the U.S. Securities and Exchange Commission, the Financial Industry Regulation Authority (FINRA), or any state or foreign (non-U.S.) securities regulatory authority. For the avoidance of doubt, Everest Group is not providing any advice concerning securities as defined by the law or any regulatory entity or an analysis of equity securities as defined by the law or any regulatory entity. All properties, assets, materials, products and/or services (including in relation to gen AI) of Everest Group are provided or made available for access on the basis such is for informational purposes only and provided "AS IS" without any warranty of any kind, whether express, implied, or otherwise, including warranties of completeness, accuracy, reliability, noninfringement, adequacy, merchantability or fitness for a particular purpose. All implied warranties are disclaimed to the extent permitted by law. You understand and expressly agree that you assume the entire risk as to your use and any reliance upon such.

Everest Group is not a legal, tax, financial, or investment adviser, and nothing provided by Everest Group is legal, tax, financial, or investment advice. Nothing Everest Group provides is an offer to sell or a solicitation of an offer to purchase any securities or instruments from any entity. Nothing from Everest Group may be used or relied upon in evaluating the merits of any investment. Do not base any investment decisions, in whole or part, on anything provided by Everest Group.

Everest Group materials, products and/or services represent research opinions or viewpoints, not representations or statements of fact. Accessing, using, or receiving a grant of access to Everest Group materials, products and/or services does not constitute any recommendation by Everest Group to (1) take any action or refrain from taking any action or (2) enter into a particular transaction. Nothing from Everest Group will be relied upon or interpreted as a promise or representation as to past, present, or future performance of a business or a market. The information contained in any Everest Group material, product and/or service is as of the date prepared and Everest Group has no duty or obligation to update or revise the information or documentation.

Everest Group collects data and information from sources it, in its sole discretion, considers reliable. Everest Group may have obtained data or information that appears in its materials, products and/or services from the parties mentioned therein, public sources, or third-party sources, including data and information related to financials, estimates, and/or forecasts. Everest Group is not a certified public accounting firm or an accredited auditor and has not audited financials. Everest Group assumes no responsibility for independently verifying such information.

Companies mentioned in Everest Group materials, products and/or services may be customers of Everest Group or have interacted with Everest Group in some other way, including, without limitation, participating in Everest Group research activities.