Healthcare Digital Services
U.S. 2021

Quadrant Report

A research report comparing provider strengths, challenges and competitive differentiators

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About this Report

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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 September 2021, 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.

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EXECUTIVE SUMMARY

Healthcare in the U.S. continues to be a difficult course to navigate, whether one is a provider or a consumer of related services. A combination of the ongoing pandemic, changing regulations, technological advances, rising costs and new entrants mean the choppy waters will continue into 2022. All these factors point to a growing need for service providers, such as the ones in this study, to plan and deliver the digital transformation services vital for healthcare companies to land safely. The data reflects that growth assertion. The ISG Index measured through Q3 2021 for the U.S. Healthcare and Pharma sector, annual contract value bookings shows the combined markets of managed services and “as a service” up by 10% to US$3.6 billion in 2021.

Looking across the findings for this study, ISG notes several overarching changes/themes that drive or affect digital transformation in healthcare: the COVID-19 pandemic, value-based care, information access and business model disruption. We discuss each below, identifying the associated uncertainties.

Learning from the COVID-19 pandemic, the U.S. healthcare system evolved in 2021, with increased focus on social determinants of health and healthcare equity, supply chain issues, workforce challenges, deferred/missed care and the long-term repercussions of COVID-19 on both patients and the healthcare ecosystem. Other uncertainties related to the pandemic include:

- Care complexity, including support for an increasing number of patients with chronic conditions that are not yet back to pre-pandemic conditions
- Unclear societal response to Delta, Omicron and other possible variants in the future

- Effects on balance sheets, assets and resources
- Insurance coverage and plan shifts

Value-based care continues to take center stage, with a growing focus on remote/virtual care, including telehealth. Related to this is the consumerization of healthcare, with more convenience and easy access to information and services. Concurrently, mental health issues have become more visible with growing recognition that healthcare needs to address the overall well-being of those affected, by considering physical as well as emotional well-being. Patient-centric care using digital tools continues to spread and gain significance, for both healthcare personalization and enhanced data collection. These tools are improving with the use of AI and real-time analytics, but they still need integration with in-person care (Figure 1). Another aspect of value-based care is the emergence of payment models not dependent on insurance such as the direct primary care model. Future uncertainties around value-based care include:

- Data-related issues, including transparency, privacy, algorithm bias and data fragmentation/consistency
- Equity of access for those with limited broadband or lack of modern connected technologies
- Delivery of care to an aging population
- Consistency of reimbursement for remote care
- Risk sharing between payers and providers
Use of technology including analytics and IoT to personalize healthcare is gaining traction

- Wearables such as medical implants and tracking devices help monitor patient health
- Effective use of data analytics help understand and improve efficacy of treatments
- Mobile apps help to monitor patient status and manage diseases better
- Digital channels can also be used for social influence and promote a culture of wellness
- Patients are becoming vocal to influence the course and make choices regarding their own care
Wrapped up with the pandemic and value-based care is the need to access and share medical information that can help improve patient expectations and outcomes. In the U.S., the healthcare system is evolving to ensure cost transparency to consumers and enable improved access to medical data needed by the various stakeholders (including the patient) involved in patient care. The federal government has mandated some access and sharing regulations that rely on improving interoperability. In this study, ISG asked service providers about their interoperability services. Although these providers offer expert advice and tools, the uptake of interoperability services in 2021 was less than expected. The uncertainties that continue to plague interoperability are related to the following:

- The magnitude of regulatory oversight concerning the future of healthcare, at all government levels
- Enforcement of additional regulations and standards
- Clarification on government and industry requirements related to reporting and quality measures
- Access of legacy health tech solutions and data, some of which is moving to cloud platforms

The final category of major change in the healthcare ecosystem is the continuing disruption triggered by technology companies, retailers, telecom providers and banks, as well as consolidations via mergers and acquisitions. Basic primary care is being provided by big-box stores and pharma chains. Provider and employer arrangements with payers are changing the nature of partnerships with insurance companies, or "payviders" as they are now often described. Future uncertainties in the ecosystem include the long-term commitment of new entrants, the market responses to them, and the outcomes of the mergers and acquisitions.

The four categories of change (mentioned above) lead to the following challenges in digital transformation for payers and healthcare providers:

- **Regulation:** Government oversight, deadlines and modifications require significant attention. Payers and healthcare providers continue to modify business practices involving information exchange and delivery of electronic health information.
- **Technology:** Systems in healthcare reflect complexity, disparity, aging and disconnection. The result is fragmented patient member data that is untenable for digitization.
- **Financial ambiguity:** Demographic shifts and lifestyle changes are intensifying cost pressures on healthcare systems. The losses related to COVID-19, among hospitals and other healthcare providers, have been substantial. Payers find it difficult to predict their costs and revenue. All entities continue to search for operational cost takeout.
- **Organization change management:** Healthcare organizations resist change, avoid risks and suffer technical debt. The industry has complex processes and multifaceted product mixes. Another layer of risk management is related to privacy and security requirements and concerns.

This study reveals that many service providers are available to help healthcare organizations with these challenges. The companies have the skills, industry expertise, tools and partnerships to assist in healthcare digital transformation. Across this cohort of service providers, the study affirms experience in several key areas:
Business and engineering transformation: ISG notes that despite the availability of these services, healthcare clients focus predominantly on tactical versus strategic initiatives. Nonetheless, market dynamics are compelling healthcare payers and providers to reassess their roles, which is expected to lead to the engagement of more strategic services in 2022.

Healthcare domains: Expertise is available in healthcare markets, care coordination, partnerships, platforms and technologies (including advanced/emerging ones). ISG sees that the healthcare market underestimates service provider capabilities. However, with growing awareness of market complexities, ISG expects healthcare companies to seek an increasing number of services from providers that understand and can help manage this complexity.

Interoperability and integration: Service providers offer approaches and solutions that address the mandates and also go beyond to offer added value through their integration capabilities. Here, too, ISG notices that the market is slow in seeking services despite the existing mandates but expects demand to pick up momentum in 2022.

Modernization: Technology solution modernization, replacement and cloud migration are among the fastest growing initiatives in the healthcare ecosystem. ISG observes that many healthcare organizations and service providers focus on the “digital front door” to give people access to services. Such apps and portals drive digital transformation activities built on existing and new infrastructures.

Centers of excellence: Leading service providers for healthcare have centers of excellence that consolidate expertise, technology and research. Some offer centers of excellence for leading electronic health record (EHR) systems. ISG also sees large investments by service providers in next-generation tools and intellectual property, including patents, grants, frameworks, benchmarks and accelerators. Centers of excellence are innovating in areas such as the Internet of Medical Things (IoMT), automation, AI and analytics.
Challenges in Healthcare

- Inconsistent patient records
- Lack of standards for sharing information between health systems
- Information blocking by vendors
- Operational and technological complexity

Benefits of Interoperability

- Reduced medical errors and improved outcomes
- Improved staff productivity
- Enhanced patient security and experience
- More transparency in providers and payer communication
- Low healthcare expenses

Source: ISG Research, Centers of Medicare & Medicaid Services (CMS), Office of the National Coordinator (ONC)
Introduction

Definition

The healthcare industry continues to be under pressure to change. In 2021, the pandemic and public demand for more effective outcomes mandate actions to better meet care lifecycle requirements and build patient-centric business models. All segments of the healthcare industry are being compelled to comply with new regulations, engage in competitive mergers and acquisitions, and adapt to the needs of an aging population. Also, consumers expect advanced and convenient digital service delivery. At the same time, many companies are struggling to stay apace with the growing demand for their services and mounting competitive pressures.

As companies adopt new business approaches in keeping with the changing market environment, regulatory hurdles and cost pressures are at an all-time high. The competitive landscape has never been more dynamic or universal. In this context, innovation is imperative. The explosion of virtual care in 2020 led to the rapid increase in connected technology deployments for telehealth, a trend that ISG expects will continue.
Achieving interoperability is key to expanding not only virtual care, but also modernizing overall healthcare. 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 application programming interfaces (APIs). Other new regulations on interoperability address security; payer-to-payer data exchange; and admission, discharge and transfer event notifications.

In the U.S. almost half of the population is a part of the public healthcare program, a growth from about one-third since before the COVID-19 pandemic. This shift means payers are enrolling and catering to more people than ever through Medicaid for the low-income group, Medicare for seniors and the disabled, and the Child Health Insurance Program (CHIP) for children that do not qualify for Medicaid.

Successful organizations in the healthcare industry have been meeting these challenges with the following:

- Driving targeted investments and continuous cost control
- Using advanced technologies and digital operating models
- Focusing on improved and innovative patient engagements
- Building, buying and improving data sharing processes and tools
- Shifting to digital platforms for rapid modernization and adjustment to changing care environment

Digital transformation helps combat many of the ongoing and anticipated industry challenges. In the healthcare industry in the U.S., digital transformation of services helps payer and provider segments evolve to better serve their constituents. As healthcare payers and providers are
Definition (cont.)

shifting the focus of purchase decisions to business outcomes, finance and other business leaders are driving digital transformation. While some enterprises do it on their own, others use business process-as-a-service (BPaaS) solutions.

Participating service providers in the Healthcare Digital Services 2021 study are evaluated on how effective they are as an extension of a client's technology organization and involved in creating blueprints, architecture frameworks and management processes. They are assessed on factors such as brand recognition in the markets studied, market reach, and the number and quality of clients. In addition, they are evaluated on thresholds of annual revenue, assigned employee numbers/skills and R&D investments.

Scope of the Report

The ISG Provider Lens™ study offers technology decision makers:
- Transparency on the strengths and weaknesses of relevant providers
- A differentiated positioning of providers by segments
- Perspective on different markets

Our study serves as an important decision-making basis for positioning, key relationships and go-to-market considerations. ISG advisors and enterprise clients also use information from these reports to evaluate their current vendor relationships and potential engagements.
Provider Classifications

The provider position reflects the suitability of IT 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 US$20 million and US$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 US$1 billion, with activities worldwide and globally distributed decision-making structures.
Provider Classifications

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

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.

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.

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.

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 both products and services and a sensible market approach with a goal of becoming a Product or Market Challenger within 12 to 18 months.
Provider Classifications (cont.)

Each ISG Provider Lens™ quadrant may include a service provider(s) which ISG believes has 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).

Rising Star

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

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.
## Healthcare Digital Services - Quadrant Provider Listing 1 of 3

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Healthcare Digital Services Quadrants
ENTERPRISE CONTEXT

Payer Digital Transformation Services

This quadrant report is relevant to healthcare payer enterprises across the U.S. for evaluating providers offering digital transformation services such as back-office automation services and clinical data management services to healthcare payer enterprises.

ISG highlights the current market positioning of service providers that offer digital transformation services to healthcare organizations in the U.S. and how each provider addresses the key challenges faced in the region.

Digital technologies such as robotic process automation (RPA) and artificial intelligence (AI) have opened a wide range of opportunities for payers to achieve unprecedented gains in efficiency while improving patient engagement. Healthcare payers have swiftly adopted next-gen technologies such as advanced analytics and intelligent automation for claims management systems, and they have achieved unprecedented levels of operational efficiencies and driven down costs.

Compared with other industries, healthcare payers often have less control over factors that are fundamental to their operations and profitability. Frequent regulatory changes, peaks and valleys in claims volume, and healthcare innovations all have a significant influence on the industry. In the face of these challenges, health insurers are constantly on the lookout for areas where they can optimize.

In the U.S., some service providers offering digital transformation services to healthcare payers also offer provider digital transformation services and payer business process as a service (BPaaS). Enterprises are looking for trustworthy and committed partners that can address the challenges and provide a roadmap for setting up an optimal IT infrastructure.

Healthcare payers and IT and technology leaders should read this report to understand the relative positioning and capabilities of providers and thus effectively plan and select the appropriate digital services and solutions. The report also shows how the technical and integration capabilities of a service provider compare with the rest of the market.

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

Government, procurement and vendor management professionals should read this report to develop a better understanding of the current landscape of service providers offering digital transformation for healthcare payers in the U.S.

Security leaders should read this report to see how service providers address the significant challenges of compliance and security without compromising patient privacy and experience.
**PAYER DIGITAL TRANSFORMATION SERVICES**

**Definition**

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 and serve members wherever they are located via computers, remote monitors, smartphones and other mobile devices. Also, the services should address operational processes for payers such as claims processing, member verification and enrollment. Service modernization capabilities should also be clear.
Observations

- **Accenture** continues to focus on digital health offerings for payers to modernize processes and systems. It also emphasizes workplace transition services with plans for central office work suspended due to the pandemic. The company continues to aggressively acquire companies with expertise in digital strategy and marketing, cloud, AI and management consulting.

- **Cognizant** supplements its widely adopted TriZetto solutions with diverse digital expertise for payers. The acquisitions in 2021 have bolstered its capabilities in IoT, data and analytics.

- **EXL** leads with its AI:OS framework that operationalizes AI, analytics and the cloud to enable a data-driven approach that helps payer business outcomes in a population along with risk analysis, digital health and analytics, payment analytics, and data management.

- **Firstsource** has grown its payer business in the U.S. by focusing on business process improvements for payer operations and customer experience.

- **HCL** works with many of the Blue Cross Blue Shield (a.k.a Blues) and other regional health plans, using its claims processing, healthcare analytics and member engagement platform. In 2021, HCL expanded its strategic partnership with Google Cloud to jointly launch healthcare and life sciences solutions.

- **IBM** continues to offer leading digital transformation services to payers. It acquired several companies in 2021 that are relevant to payers, including companies specializing in hybrid cloud, DevOps and AI.
PAYER DIGITAL TRANSFORMATION SERVICES

Observations (cont.)

- **Infinite** offers specialized payer solutions, addressing common functions such as population health, secure collaboration, communication and digital engagement.

- **Infosys** uses its new Infosys Live Enterprise framework to work with payers to strike a balance between cost, service quality and data access by using a combination of business technology and partnerships and by focusing on business outcomes.

- **NTT DATA** complements its decades of payer experience with a solid digital health platform to manage all its digital interactions with members, employers and brokers. It also offers an automation toolkit for claims adjudication.

- **Optum’s** services for payers focus on data-driven decision-making via advisory services, systems integration, security and compliance. The IT Performance Services business has new as-a-Service offerings, including support for the Epic Payer Platform.

- **TCS** offers a machine-first delivery model (MFDM) that enables digital channels across the payer value chain, including member engagement as well as automation in claims processing.

- **UST** offers its comprehensive payer digital transformation services with the MyDoc digital healthcare platform, which connects patients, payers and providers to deliver insights from healthcare data and coordinate care.

- **Wipro** focuses on ensuring that payers embrace a "new age" strategy to provide a personalized member experience.

- **Conduent** (Rising Star) engenders loyalty from its U.S. payer clients with its modernization guidance, regulatory compliance capabilities, digital innovation and service delivery model.
WIPRO

Overview

Wipro, headquartered in Bengaluru, India, is a large global IT services provider. It has a strong data center outsourcing service practice in the U.S., with a focus on large enterprises. The company has a significant presence in the healthcare and pharmaceuticals verticals, followed by banking and financial services, manufacturing, and energy sectors. In FY2021, Wipro generated revenue of $1.2 billion from its healthcare and life sciences business, and it employs more than 18,000 healthcare professionals across 50 countries.

Strengths

Focus on personalized member experience: Wipro's central message to payers is to establish a digital payer as-a-service platform to support transformation focused on improving the member experience. A unified payer platform combines its proprietary technologies with those offered by its partners to provide intelligent platforms that leverage AI, the cloud and blockchain to keep costs competitive. The main categories of service offerings are claims administration, member management, provider management, healthcare management and administration.

"New Age" payer strategy: Wipro tackles market changes with a strategy that helps payers create a personalized member experience at competitive costs by combining a digital payer platform and total operation transformation. This strategy helps payers prepare for a digital-centric future. The significant investment areas include platforms/solutions for core administration platforms, revenue cycle management, provider lifecycle management, telehealth/remote monitoring, intelligent automation and interoperability. Its Designit Strategic Design business specializes in creating transformative product-services experiences. Its partners for claims include Plexis and HealthEdge.

Total operation transformation: Wipro offers payers a combination of technology, process and business expertise, integrated with its business operations. It develops payer operations that leverage AI and automation. Software tools including HOLMES, its AI platform, produce data-driven insights for payers with digitalized operations and digital experiences. To supplement HOLMES, Wipro partners with Automation Anywhere, Blue Prism, Pega and UiPath.

Caution

Wipro is seeing high attrition rates in the IT services sector and will need to pursue aggressive retention and recruiting programs.

2021 ISG Provider Lens™ Leader

Wipro’s extensive experience with U.S. health payers at all levels — combined with its digital transformation strategies, talent and solutions — qualifies it as a Leader.
ENTERPRISE CONTEXT

Payer Business Process as a Service

This quadrant report is relevant to healthcare payers in the U.S. for evaluating service providers of payer business process as a service (BPaaS).

ISG highlights the current market positioning of service providers offering payer BPaaS to enterprises in the U.S. and how each service provider addresses the key challenges faced in the region.

BPaaS is increasingly becoming an elegant strategic option for payers. With the pandemic crisis, plan members and healthcare providers are more willing to pursue and adopt to change. Adopting BPaaS strategies can help drive efficiency across the operations landscape, support connections and orchestrate data flows, enabling payers to operate their businesses more effectively and intelligently.

As the BPaaS model continues to evolve, service providers are developing their offerings to meet the growing requirements of healthcare payers and to demonstrate agility in transforming the way healthcare is experienced by its constituents — members, providers, brokers/agents and regulators.

Some payer BPaaS providers in the U.S. also offer digital transformation services to payers and other providers. Enterprises are looking for trustworthy and committed partners that can address challenges and provide a roadmap for setting up an optimal IT infrastructure.

Digital transformation and IT professionals should read this report to understand how providers of payer BPaaS fit in with their digital transformation initiatives, IT architectures and cloud strategies.

Business strategy leaders, through this report, will gain knowledge of providers’ product portfolio capabilities, which in turn can support the selection of services to enable a streamlined workflow and enhance functionality.

Procurement and vendor management professionals should read this report to develop a better understanding of the current landscape of healthcare service providers in the U.S. for digital transformation. The report also shows how the technical and integration capabilities of a service provider compare with the rest of the market.
Definition

This quadrant assesses providers of healthcare payer BPaaS engaged in end-to-end outsourcing of business processes across the technology stack with the aim to improve business outcomes. A service provider integrates services, processes, applications and infrastructure into a comprehensive service, with the clear objective of cost control. Apart from cost savings, BPaaS also supports improved member and provider experience, operational insights, improved quality of care and regulatory compliance.
PAYER BUSINESS PROCESS AS A SERVICE

Observations

- **Accenture** offers payer BPaaS via its Intelligent Health BPS for common processes and its Advanced Health Analytics platform. The company also employs thousands of dedicated BPS professionals for healthcare clients.

- **Cognizant's** TriZetto solutions are a part of its BPaaS offering, including the TriZetto Facets core administration platform. The offering is continually undergoing updates with a focus on new regulatory and business requirements, including adherence to Transparency in Coverage and the No Surprises Act.

- **Genpact** serves payers with a strong BPaaS offering that has evolved from Genpact's BPO heritage, a growing focus on enhancing digital transformation capabilities and deep domain expertise in the healthcare ecosystem. In January 2021, to bolster its U.S. operations, it acquired Enquero, a small California-based firm that offers data engineering and data-led digital transformation services.

- **NTT DATA's** mature and proven BPaaS offerings include the digital solutions needed to improve engagement with members and providers. The company is also enhancing its BPaaS to address touchpoints between payers and providers to deliver services in a faster, streamlined and cost-effective way.

Eligibility Criteria

- Ability to advise, with focus on outcomes, via member engagement and financial value metrics
- Ability to support any application or platform, including legacy systems
- Possesses established protocols and technologies for integrated security
- Ability to implement appropriate intelligent automation specific to business processes
- Experience in implementing and expanding health plan analytics
- Ability to support back-office, middle-office and front-office business processes
- Competencies in integrated governance and performance service management
- Established or emerging partnerships with application providers, platform companies and infrastructure firms
Observations (cont.)

- **UST's** Healthcare-in-a-Box is an integrated offering focused on enrollment as a service. It includes the Payer Core Administration Platform Services (CAPS) platform, using UST and partner solutions, including population health solutions engineered with UST healthcare domain, engineering and systems expertise.

- **Wipro** offers a payer-in-a-box solution via modular platform as a service (PaaS) and BPaaS solutions as well as value-based care as a service.

- **Conduent's** (Rising Star) BPaaS offering includes end-to-end capabilities to meet the needs across the payer value chain, including member engagement, network management, care management and claims management.

- **Firstsource** (Rising Star) offerings include core administration BPaaS, a functional as-a-service model, Medicare Plan in a Box, Medicaid Plan in a Box and custom “ground-up” BPaaS.
Wipro headquartered in Bengaluru, India, is a large global IT services provider. It has a strong data center outsourcing service practice in the U.S. that focuses on large enterprises. Wipro has a significant presence in the healthcare and pharmaceuticals verticals, followed by the banking and financial services, manufacturing and energy sectors. In FY2021, Wipro generated revenue of $1.2 billion from its healthcare and life sciences business, and it employs more than 18,000 healthcare professionals across 50 countries.

**Overview**

Wipro delivers a payer-in-a-box solution via modular platform-as-a-service (PaaS) and BPaaS solutions (Exchange Link, Sales link, Loyalty link, M360). It includes multiple offerings for individuals and the exchange market, Medicare & Medicaid segment, and provider lifecycle management and value-based care. The Digital Payer platform, leveraging partner solutions from HealthEdge and Change Healthcare, enhances member and provider experiences across individual and Medicare plans. Wipro’s approach emphasizes design at the beginning of the initiative. Its Enterprise Medicaid as a Service (EMaaS®) is the next-generation digital platform to support Medicaid.

**Strengths**

- **Payer-in-a-box**: Wipro delivers a payer-in-a-box solution via modular platform-as-a-service (PaaS) and BPaaS solutions (Exchange Link, Sales link, Loyalty link, M360). It includes multiple offerings for individuals and the exchange market, Medicare & Medicaid segment, and provider lifecycle management and value-based care. The Digital Payer platform, leveraging partner solutions from HealthEdge and Change Healthcare, enhances member and provider experiences across individual and Medicare plans. Wipro’s approach emphasizes design at the beginning of the initiative. Its Enterprise Medicaid as a Service (EMaaS®) is the next-generation digital platform to support Medicaid.

- **Value-based care**: Wipro's value-based care as a service is an end-to-end service platform that offers a digital experience in collaboration with partners. The service includes clinical and cost analytics, along with BPO services such as care coordination, remote patient monitoring and patient education. With this offering Wipro can run an end-to-end value-based care or Accountable Care Organization (ACO) in-a-box program.

- **Robust payer BPaaS roadmap**: Wipro plans to add features to help payers improve Medicare Advantage enrollment, financial audit compliance, provider lifecycle management, billing and remote care.

**2021 ISG Provider Lens™ Leader**

Wipro’s Payer-in-a-Box provides the U.S. health plans with integrated coverage across the value chain and a comprehensive roadmap, including additional services to deal with pandemic-driven changes.

**Caution**

Wipro is seeing high attrition rates, which is common in the IT services sector and will need to continue with its aggressive retention and recruiting programs.
ENTERPRISE CONTEXT

Provider Digital Transformation Services

This quadrant report is relevant to healthcare provider enterprises in the U.S. for evaluating suppliers of digital transformation services.

ISG highlights the current market positioning of providers that offer digital transformation services to healthcare providers in the U.S. and how each provider addresses the key challenges faced in the region.

Healthcare providers are accelerating the speed of technology adaptation and are focusing on providing smart health solutions to their patients. With more consumerization, automation and consolidation of health systems, healthcare providers have realized that running a medical practice is not just about patient treatment anymore. It is also about enriching the patient experience and driving improved health outcomes.

For their part, service providers are focusing on digital transformation services related to smart healthcare diagnosis through cloud computing, back-end operations, augmented reality (AR) and virtual reality (VR) to make timely and informed decisions. They are also building their virtual health platforms with a focus on enhancing the telehealth capabilities.

Healthcare providers seek trustworthy and committed partners that can address the challenges and provide a roadmap for digital services.

Healthcare professionals and IT and technology leaders should read this report to understand the relative positioning and capabilities of service providers and thus effectively plan and select the appropriate services and solutions. The report also shows how the technical and integration capabilities of a service provider and its market presence compare with the rest of the market.

Digital transformation professionals should read this report to understand how suppliers of digital transformation services for healthcare providers fit in with their initiatives and how they compare with one another.

Government, procurement and vendor management professionals should read this report to develop a better understanding of the current landscape of providers offering digital transformation services to healthcare providers in the U.S.

Security leaders should read this report to see how service providers address the significant challenges of compliance and security without compromising the patient experience.
**Definition**

This quadrant assesses service providers that offer digital transformation services to healthcare providers such as hospital systems and independent healthcare providers. They should be responsible for processes and systems pertaining to patient relations and care such as patient intake, physician referral management, ambulatory and chronic care, and post-acute care. The services should also include employee systems such as information portals, scheduling and collaboration.
Eligibility Criteria

- Ability to plan, develop and implement consumer-grade interfaces of hospital and office systems and patient information and monitoring sources, including mobile apps for wellness, medical reference and fitness
- Capability to offer guidance on selecting and deploying telehealth solutions, including measures for cybersecurity
- Established or emerging basic/standard relationships with trusted partners, including emerging disruptors with new models of care delivery
- Ability to advise on workforce development, including upskilling, to support digital and private data protection
- Consulting on the development of models, using AI and analytics for screening, diagnostics and treatment
- Platform consulting for the use of appropriate emerging healthcare technologies such as telehealth services, remote patient monitoring (through IoT and wearables), blockchain for data sharing, robotics and electronic prescription services
- Experience in large transition projects that include consolidation of merged companies and modernization of systems and applications

Observations

- **Accenture** works with its healthcare provider clients to increase automation, address scalability and offer cloud-based virtual care and, consequently, build trust in digital solutions.
- **Atos** focuses on building digital hospitals of the future to improve care quality while managing costs and improving patient engagement. The company also emphasizes the connections between healthcare and environment to help reduce the carbon footprint of healthcare providers.
- **Cerner** is leveraging its relationships with its U.S. clients that use its EHR technology to expand into digital transformation services. Acquisition by Oracle should lead to better support for Oracle infrastructure and applications.
- **Cognizant** provides healthcare providers with revenue cycle management services and solutions, using RPA to improve outcomes. It also focuses on services for virtual care and core administration.
- **HCL’s** centers of excellence enable fast onboarding and support for healthcare provider clients. The key functions include clinical analytics, remote health, intelligent automation and EHR, and creating accelerators and other reusable assets.
- **IBM** offers healthcare providers tools, insights, workflows and a flexible technology infrastructure to foster system interoperability. It has recently introduced the IBM Imaging AI Orchestrator, which is a cloud-based AI service that provides imaging organizations with scalable access to AI applications that adhere to regulatory standards.
Observations (cont.)

- **NTT DATA** leads with a broad set of services, including its Nucleus for Healthcare framework that helps providers create and manage a digital front door for healthcare.

- **Optum** works to bridge the payer-provider divide, with a focus on analytics and interoperability as well as on Epic support services.

- **TCS** is investing in genomics and translational research to accelerate the development of preventive, personalized medicine.

- **Tech Mahindra** has virtual care support capabilities, including telekiosk, telehealth, remote patient monitoring, virtual hospital, senior care and population health.

- **Wipro** supports patient management; care/case management; diagnostics, treatment and monitoring; and financial and network management. Its COVID-19-focused offerings include contact center, personal protective equipment (PPE) surveillance and compliance, and contact tracing.

- **Infosys** (Rising Star) services address core clinical operations, ancillary departments, corporate services and operations, encompassing the healthcare provider value chain. It also enables connected care delivery through the Infosys Helix AI-first solutions.
Wipro, headquartered in Bengaluru, India, is a large global IT services provider. It has a strong data center outsourcing service practice in the U.S., with a focus on large enterprises. The company has a significant presence in the healthcare and pharmaceuticals verticals, followed by banking and financial services, manufacturing and energy sectors. In FY2021, the company generated revenue of US$1.2 billion from its healthcare and life sciences business, and it employs more than 18,000 healthcare professionals across 50 countries.

**Community healthcare platform strategy:** Wipro assists healthcare providers in creating an end-to-end experience for their communities, beginning with customer journey mapping and leading to the development of cost-effective operations and IT management through outsourcing, optimization and automation. Following that, it collaborates with the provider to enable digital health systems aimed at improving patient health outcomes, using a connected healthcare ecosystem and the development of a digital medicine platform. Wipro integrates with EMR vendors and co-creates platforms with partners to provide better community, therapy and patient insights.

**Broad offerings, including some in response to COVID-19:** For healthcare providers across the value chain, Wipro supports patient management; care/case management; diagnostics, treatment and monitoring; and financial and network management. Its COVID-19-focused offerings include contact center, personal protective equipment (PPE) surveillance and compliance, and contact tracing. It also enables cost-efficient care through RCM offerings and by enabling the modernization of existing platforms by leveraging cloud and full stack technologies. Wipro also helps healthcare providers secure patient data through a next-generation offering on cloud security and compliance assurance.

**Value-based care management:** Wipro assists providers in improving patient health outcomes by leveraging insights from a connected health ecosystem. For example, it collaborated with Raziel Health to develop a HIPAA-compliant and secure cloud-based telehealth platform. This is especially important for high-risk populations, including in rural areas for people with health impairments or multiple chronic conditions. Population stratification, real-time alerts, secure messages, one-click video consultation, progress reports, and curated educational materials are among the solutions Wipro offers.

Because U.S. healthcare providers are rebuilding themselves financially due to the pandemic, Wipro needs to be flexible in its pricing, offerings and contracts.

Wipro offers U.S. healthcare providers a variety of digital transformation services, supported by a community healthcare platform strategy with broad operational and patient management solutions.
ENTERPRISE CONTEXT

Healthcare Cloud Migration Services

This quadrant report is relevant to healthcare payers and providers enterprises in the U.S. for evaluating suppliers of cloud migration services.

ISG highlights the current market positioning of service providers that offer healthcare cloud migration solutions to healthcare payers and providers in the U.S. and how each service provider addresses the key challenges faced in the region.

The healthcare industry is on an innovation journey toward providing high-quality digital health. Many healthcare organizations, payers and providers are looking at transitioning to the cloud to securely store enormous volumes of records in a flexible yet cost-effective method. Today, healthcare cloud migration is in full swing with providers worldwide using the cloud to manage emails and electronic medical records (EMRs) efficiently and make real-time data accessible to healthcare professionals.

Service providers in the healthcare cloud migration space have a well-defined framework for healthcare payers and providers to migrate their legacy systems to the cloud. With the rising concern about patients’ data security, service providers are enhancing their security capabilities along with acquiring the required security standards certifications. This transformation journey is led by the cloud computing aspect.

Healthcare professionals and IT and technology leaders should read this report to understand the relative positioning and capabilities of service providers and thus effectively plan and select the appropriate services and solutions. The report also shows how the technical and integration capabilities of a service provider and its market presence compare with the rest of the market.

Digital transformation professionals should read this report to understand how suppliers of digital transformation services for healthcare providers fit in with their initiatives and how they compare with one another.

Government, procurement and vendor management professionals should read this report to develop a better understanding of the current landscape of providers offering digital transformation services to healthcare providers in the U.S.

Security leaders should read this report to see how service providers address the significant challenges of compliance and security without compromising the patient experience.
HEALTHCARE CLOUD MIGRATION SERVICES

Definition

Introduced in 2021, this new quadrant assesses a service provider’s ability to deliver services to U.S. healthcare providers and payers that take advantage of hyperscaler platforms. Some of the cloud platforms — including AWS, Google, Microsoft, IBM, Oracle and Salesforce — offer healthcare-specific capabilities. The services should help payers and providers modernize their systems to improve processes and business outcomes.

Source: ISG Research 2021
HEALTHCARE CLOUD MIGRATION SERVICES

Eligibility Criteria

- Platform consulting for the use of the appropriate emerging healthcare technologies, with the ability to plan, develop and implement consumer-grade interfaces of employee systems and patient and member information services, including mobile apps
- Established partnerships with one or more hyperscalers and employees with appropriate skills
- Contracts for services with payer and provider clients in the U.S., both in progress and planned
- Experience using specific healthcare tools offered by the cloud platforms, including AWS for Health, Google Health, Microsoft Healthcare Cloud, IBM Watson Health, Oracle Health Insurance and Salesforce Health Cloud
- Ability to provide consultation services for the development of custom capabilities on the platforms
- Experience with related offerings (for example, AI, machine learning and IoT) from the hyperscalers and in other industries

Observations

- Accenture focuses on rapid cloud migration at scale through its cloud-first initiative.
- Capgemini's customized cloud portfolio in healthcare centers on patient experience enhancement.
- Cognizant leverages its 6R analysis to help healthcare clients migrate to the cloud.
- HCL provides innovative cloud migration services for healthcare clients through its cloud smart solution.
- Hexaware's cloud migration offering in healthcare is a combination of agility and experience.
- Infinite is dedicated to improving bulk cloud migration for healthcare clients through its multi-cloud management platform.
- Infosys delivers next-gen cloud migration capabilities in healthcare by leveraging its strategic partner ecosystem.
- NTT DATA helps its healthcare clients migrate to the cloud through its Nucleus cloud management platform.
TCS focuses on enhancing the cloud infrastructure of its healthcare clients.

Wipro heavily invests in improving its overall capabilities in cloud technologies.

ATOS (Rising Star) is committed to expanding its partner ecosystem in the cloud migration domain.
WIPRO

Overview

Wipro, headquartered in Bengaluru, India, is a large global IT services provider. It has a strong data center outsourcing service practice in the U.S., with a focus on large enterprises. The company has a significant presence in the healthcare and pharmaceuticals verticals, followed by banking and financial services, manufacturing and energy sectors. In FY2021, Wipro generated revenue of $1.2 billion from its healthcare and life sciences business and employs more than 18,000 healthcare professionals, globally, across 50 countries.

Strengths

Business-first approach: Wipro has been involved in several U.S.-based client engagements where it leveraged next-gen cloud transformation technologies and outcome-based and/or gain sharing models. The company has changed its go-to-market strategy and has been marketing itself as a partner that can assist businesses to improve their business outcomes by leveraging a variety of technologies, rather than becoming a technology services provider.

Large investments: Wipro has recently unveiled its FullStride Cloud Services and is committed to investing $1 billion in cloud technologies over the next three years. This will bring together the full portfolio of its cloud-related capabilities, offerings, and talent with its industry-leading cloud solutions, combining them with a high-touch, business-first approach to better orchestrate the cloud journey of its clients.

Robust partner ecosystem: Wipro has an established partner ecosystem with the hyperscalers IBM, SAP, Oracle, and is a preferred partner of AWS, Google Cloud Platform and Microsoft Azure. The Wipro Ventures division incubates startups to develop industry-specific transformation solutions. These startups have deep domain knowledge about the functionalities of industry cloud solutions and industry-specific regulations.

Caution

Wipro's recent investment in FullStride Cloud Services has the potential to increase its healthcare market share as the demand for services pertaining to cloud migration is increasing. The company could be flexible in pricing to acquire a greater share in healthcare market in the U.S.

2021 ISG Provider Lens™ Leader

Wipro's distinct portfolio of cloud migration services and focus on transformation strategies has empowered healthcare clients to achieve their business outcomes rapidly and more efficiently.
ENTERPRISE CONTEXT

Healthcare Interoperability Services & Solutions

This quadrant report is relevant to healthcare payer and provider enterprises in the U.S. for evaluating providers of healthcare interoperability services and solutions.

ISG highlights the current market positioning of providers that offer healthcare interoperability services and solutions to healthcare payers and providers in the U.S. and how each service provider addresses the key challenges faced in the region.

Interoperability in healthcare aims at simplifying the exchange of health information across the healthcare landscape while still shielding individual privacy. As more emphasis is given toward value-based care healthcare, organizations are strategizing the execution timeline for adhering to HL7 Fast Healthcare Interoperability Resources (FHIR) standards.

The main objective of IT service providers is to ensure that the healthcare IT systems can enhance their capability to exchange, process and interpret shared health data between devices, applications and systems. These service providers are enhancing their healthcare platform capabilities and creating a holistic solution offering for the healthcare ecosystem.

Healthcare payers and providers seek trustworthy and committed partners that can address the challenges and provide a roadmap for healthcare interoperability services and solutions.

Healthcare professionals and IT and technology leaders should read this report to understand the relative positioning and capabilities of service providers and thus effectively plan and select the appropriate services and solutions. The report also shows how the technical and integration capabilities of a service provider and its market presence compare with the rest of the market.

Digital transformation professionals should read this report to understand how suppliers of digital transformation services for healthcare providers fit in with their initiatives and how they compare with one another.

Government, procurement and vendor management professionals should read this report to develop a better understanding of the current landscape of providers offering digital transformation services to healthcare providers in the U.S.

Security leaders should read this report to see how service providers address the significant challenges of compliance and security without compromising the patient experience.
HEALTHCARE INTEROPERABILITY SERVICES & SOLUTIONS

Definition

Introduced in 2021, this new quadrant assesses providers of solutions and services that enable improved data sharing across the healthcare continuum. For the U.S., service providers should understand and advise clients about the CMS and ONC guidelines that mandate patient access to their healthcare data and healthcare provider directories via APIs. Also important are adherence to other new rules requiring interoperability capabilities to address security and payer-to-payer data exchange, as well as admission, discharge and transfer event notifications.
HEALTHCARE INTEROPERABILITY SERVICES & SOLUTIONS

Eligibility Criteria

- Knowledge and experience with the Fast Healthcare Interoperability Resources (FHIR) standard developed for exchanging health information
- Expertise with tools that make it easier for healthcare systems and providers to connect and share data across different sources such as Google Cloud Platform’s Cloud Healthcare API
- Ability to support consultation services for the development of custom capabilities for interoperability solutions
- Ability to build, maintain and scale seamless, personal and secure experiences across APIs.
- Capability in designing user experiences to ease the implementation and use of healthcare interoperability solutions

Observations

- **Capgemini** has a center of excellence dedicated to pushing innovations in FHIR. The solutions are tailored to meeting cutting-edge use cases in pricing innovation, unstructured content analytics, clinical outcomes and treatment effectiveness, as well as EHR integration and FHIR-driven automation around processes such as prior authorization.
- **Cognizant** uses its TriZetto incumbency for ready access to clients needing interoperability and related services, driven by new protocols and regulations including Price Transparency and the No Surprises Act.
- **HCL’s** interoperability services range from strategy development to implementation and support, even as it helps clients adhere to CMS interoperability rules at scale. The recent announced partnership with Innovaccer is expected to enhance HCL’s interoperability capabilities.
- **Infinite** is adding consent management to factor in patient privacy in interoperability workflows. This step will address authentication issues arising from patients accessing their information directly.
- Infosys offers a range of HL7 and FHIR services through an interoperability center of excellence.
- NTT DATA delivers end-to-end healthcare interoperability consulting, architecture, design, implementation and support.
- TCS takes a holistic view to driving interoperability across the U.S. healthcare ecosystem. In addition to offering end-to-end solutions through OPTiX and Health 360, it offers advisory and compliance services, data integration, quality engineering, and data and analytics, as well as service partnering and delivery.
- Wipro and its partners offer data cloud services to get data from enrollment, claims, remits, encounters, clinical data, provider and pharmacy directories, formularies and commonwealth alliance. FHIR APIs are available for the enrollment process, adjudicated claims, encounters, provider directory, pharmacy directory and formulary connections.

- CitiusTech (Rising Star) offers an end-to-end FHIR implementation suite that includes modular products, accelerators and, increasingly, services.
- Tech Mahindra (Rising Star) has almost two decades of experience in EHR implementations with all interfaces, along with familiarity with custom adaptation and compliance with interoperability standards.
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**Overview**

Wipro has the experience, methodologies, services, technologies and partners needed to help organizations meet the CMS interoperability and patient access regulations.

**Strengths**

**CMS interoperability:** Wipro helps payers streamline their processing to meet the CMS mandate deadlines for Patient Access API, Provider Directory API, Provider Formulary API and Plan Coverage API. The company also works with its partners to develop the payer-to-payer exchange required as a part of the 2022 mandate.

**A turnkey solution:** Wipro’s data-driven solutions help providers and payers improve healthcare quality and drive better outcomes. Delivered on the cloud as a SaaS offering, they connect payers and healthcare providers to offer a streamlined experience. The product APIs enable vendors to access data and integrate services. Wipro brings in specialized knowledge and capabilities, including technology, market access, FHIR expertise and credibility.

**Center of excellence on Interoperability:** The center of excellence offers implementation support, providing training and creating a repository to impart knowledge on the program and mandates. As a part of interoperability, Wipro and its partners offer data cloud services to get data from enrollment files, claims and remits, encounters, clinical data, provider and pharmacy directories, formularies and commonwealth alliance. FHIR APIs are available for the enrollment process, adjudicated claims, encounters, provider directory, pharmacy directory and formulary connections.

**Caution**

Wipro will need to execute flawlessly to add value to its clients as they address the U.S. healthcare interoperability mandates, which involve complex APIs, stringent requirements and shifting deadlines.

**2021 ISG Provider Lens™ Leader**

Wipro has the experience, methodologies, services, technologies and partners needed to help organizations meet the CMS interoperability and patient access regulations.
Methodology
METHODOLOGY

The research study “ISG Provider Lens™ 2021 – Healthcare Digital Services 2021” analyzes the relevant software vendors/service providers in the U.S. market, based on a multi-phased research and analysis process. It positions these providers using ISG Research methodology.

The study was divided into the following steps:

1. Definition of the Healthcare market
2. Use of questionnaire-based surveys of service providers/vendor across all trend topics
3. Interactive discussions with service providers/vendors on capabilities and use cases
4. Use of ISG’s internal databases and advisor knowledge and experience (wherever applicable)
5. Detailed analysis and evaluation of services and service documentation based on the facts and figures received from providers and other sources.
6. Use of the following key evaluation criteria:
   - Strategy & vision
   - Innovation
   - Brand awareness and presence in the market
   - Sales and partner landscape
   - Breadth and depth of portfolio of services offered
   - Technology advancements
Ron Exler, Author
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.

Siddhant Prasad, Global Overview and Enterprise Context Analyst
Research Analyst

Sidhanth Prasad J M is a research analyst at ISG and is responsible for supporting and co-authoring Provider Lens™ studies on Digital workplace, retail software and services and healthcare and life sciences digital transformation services. His area of expertise lies in ecommerce, future of workplace and virtual care. During his tenure, he has developed content from an enterprise perspective and authors the global summary report.
Jan Erik Aase, Editor
Partner and Global Head – ISG Provider Lens/ISG Research

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.
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