



Healthcare Payer BPS in the U.S.

Market Analysis
Abstract

December 2015
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Who Is This Report For?

NelsonHall's "Targeting Healthcare Payer BPS in the U.S." report is a comprehensive market assessment report designed for:

- Sourcing managers investigating sourcing developments within the healthcare payer services market
- Vendor marketing, sales and business managers developing strategies to target service opportunities within the healthcare payer services market
- Financial analysts and investors specializing in the healthcare payer services sector.

Scope of the Report

The report analyzes the U.S. market for outsourced healthcare payer services and addresses the following questions:

- What is the current and future market for outsourced healthcare payer services, including both commercial payers and public sector payers?
- What is the size and growth of the U.S. outsourced healthcare payer services market?
- Within outsourced healthcare payer services, which service segments are emerging strongly?
- What are the market segments for outsourced healthcare payer services, and their characteristics? What are the issues, drivers and benefits for each segment? What are vendor capabilities by segment?
- What are vendor challenges and critical success factors by market segment?
- How are vendor offerings and delivery capabilities changing to meet emerging market needs?
- How are vendors positioned within each outsourced healthcare payer services market segment?



Key Findings & Highlights

NelsonHall's market analysis of the healthcare payer BPS market in the U.S. consists of 45 pages. The report focuses on healthcare payer services, looking overall and at each service offering individually.

The market for outsourced healthcare payer services is changing, driven by a number of trends. These include:

- The concern with rising healthcare costs and the desire to reduce administration costs in the delivery of claims and member services
- The mandate for payers to comply with the new HIX regulations on health plan presentation and premium transparency for insurance premiums
- The Affordable Care Act (ACA) driving an expected increase in the number of members enrolled in Medicaid and Medicare
- The emergence of new payment models beyond fee-for-service, such as outcome based reimbursements, for which payers will need infrastructure to handle
- The growth in demand for claims analytics and predictive modeling of member population segments, as well as customer engagement
- This report investigates the impact of these trends on the U.S. healthcare payer services market, to identify both the precise change in customer requirements and the change in vendor offerings and delivery capabilities that are being put in place to respond to these requirements.

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2. Changing Shape of the healthcare payer BPS market
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8. Critical Success factors
9. Appendix I – Vendors researched

Report Length

45 slides, consisting of 8 chapters

Vendors Researched

This report includes revenue information for: Cognizant, Concentrix, CSC, Dell, EXL, Genpact, HGS, HPE, Infosys, Xerox, MAXIMUS, Palmetto, National Government Services, Molina, Noridian, Accenture, and Novitas.

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