

IDC MarketScape

IDC MarketScape: U.S. Value-Based Care Strategic Consulting Services 2025-2026 Vendor Assessment

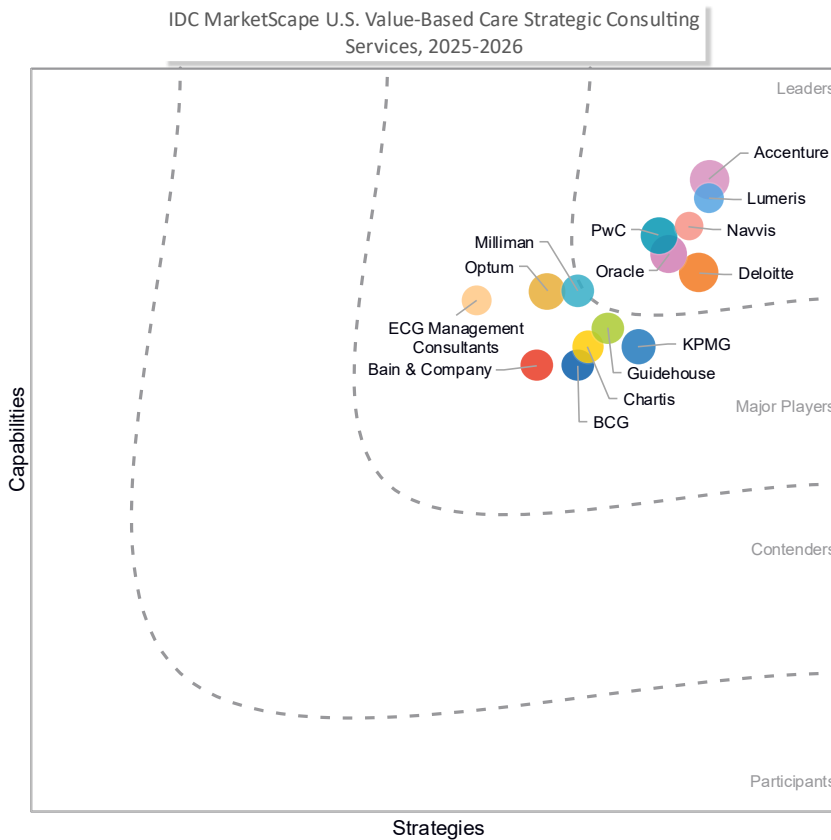
Jennifer Eaton

THIS EXCERPT FEATURES LUMERIS AS A LEADER

IDC MARKETSCAPE FIGURE

FIGURE 1

IDC MarketScape U.S. Value-Based Care Strategic Consulting Services Vendor Assessment



Source: IDC, 2025

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

ABOUT THIS EXCERPT

The content for this excerpt was taken directly from IDC MarketScape: U.S. Value-Based Care Strategic Consulting Services 2025-2026 Vendor Assessment (Doc # US53010025).

IDC OPINION

Value-based care (VBC) continues to reshape how providers, payers, and systems align care quality with financial performance. While technology such as advanced analytics, artificial intelligence (AI), and automation drives data-driven decision-making, advisory and consulting services remain critical to translating technology investments into measurable outcomes.

Technology alone cannot deliver the transformation VBC demands. Advisory partners guide organizations through strategic planning, governance design, and operational change to ensure that new tools align with clinical and business objectives. They help define outcome-based performance models, structure value-based contracts, and embed analytics into workflows that advance quality, efficiency, and equity.

AI and machine learning (ML) have expanded the scope of insights available to healthcare organizations, from predicting adverse events to improving patient adherence. However, applying these insights effectively requires context and oversight. Consulting partners provide frameworks for ethical deployment, workflow optimization, and staff training to ensure insights lead to action.

Advisory services also help organizations harness data on social determinants of health (SDOH), bridging insights with community-based solutions that address the root causes of health disparities. By integrating strategy, analytics, and execution, consulting firms support scalable value creation across the healthcare ecosystem. Ultimately, value-based care succeeds when technology enablement is coupled with strategic guidance. Consulting services provide the alignment, governance, and transformation expertise necessary to convert digital capabilities into sustainable health and financial outcomes.

IDC MARKETSCOPE VENDOR INCLUSION CRITERIA

Most vendors considered for inclusion in this IDC MarketScape for U.S. value-based care strategic consulting services offer outsourced and/or advisory services aimed at VBC excellence. IDC Health Insights' vendor inclusion criteria for this 2025-2026 IDC MarketScape for U.S. value-based care consulting services include the following:

- **Readiness and risk assessment:** Ability to systematically evaluate organizations' capacity for value-based care, including risk exposure analysis, process mapping, and actionable transition plans
- **Clinical workflow redesign:** Proven capabilities in reengineering clinical workflows to support value-based objectives such as care coordination and real-time data capture at the point of care
- **Population health management:** Demonstrated experience in population segmentation, risk stratification, and intervention deployment focused on coding/documentation accuracy, quality measures, cost control, and health equity
- **Data analytics interpretation:** Guidance on analytic infrastructure and outcomes for performance measurement, predictive modeling, and outcomes analysis to drive decisions within value-based frameworks
- **Technology enablement:** Support of technology tools that enable real-time outcome measurement, reporting, and continuous quality improvement in care delivery
- **Care model design and transformation:** Expertise in redesigning care delivery models to achieve value-based outcomes, including bundled payments and risk-based arrangements
- **Regulatory compliance and advisory:** Ability to guide clients through regulatory changes, compliance requirements, and industry standards relevant to value-based contracting
- **Change management and training:** Track record of enabling sustainable adoption of new practices and technologies through structured change management and staff training programs
- **Payer-provider contracting:** Experience in facilitating payer-provider negotiations, contract design, and incentive alignment in value-based arrangements
- **Use of VBC services:** Vendors that have U.S. clients that are using or have used the vendor's VBC services within the past six months
- **Provision of VBC services:** Vendors that have provided VBC services to a minimum of five U.S. customers for at least six months
- **Commitment and agree to IDC project timelines:** Vendors that should commit to making the required resources available to the IDC analyst and agree to maintain IDC project timelines

ADVICE FOR TECHNOLOGY BUYERS

VBC service buyers should:

- **Align advisory strategy with enterprise outcomes:** Engage consulting partners that tailor strategies to your organization's clinical, financial, and patient experience priorities. The right advisor should help define performance measures that directly support your value-based contracts, network performance goals, and operational readiness.
- **Pair technology investments with delivery transformation:** Do not view analytics, AI, or workflow platforms as standalone solutions. Seek advisory firms that combine digital enablement with process redesign, staffing models, and governance structures to embed technology into daily care delivery and value realization.
- **Turn data into insight-driven operations:** Prioritize consultants with the expertise to operationalize data from claims, electronic health records (EHRs), and social determinants of health. Successful advisors help design predictive workflows, care coordination triggers, and performance dashboards that drive timely interventions and measurable outcomes.
- **Facilitate stakeholder and contract alignment:** Choose partners skilled at aligning payer-provider relationships, incentive structures, and clinical practices under shared accountability. Effective advisory support ensures all stakeholders, from finance to frontline clinicians, coalesce around consistent value objectives and risk-sharing frameworks.
- **Institutionalize continuous improvement and health equity:** Work with advisors who champion iterative value-based model refinement, supported by data transparency and equity-driven design. The ideal partner helps your organization sustain improvement cycles, address disparities, and evolve programs in response to policy, market, and population shifts.

VENDOR SUMMARY PROFILES

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

Lumeris

Lumeris is positioned in the Leaders category in this 2025-2026 IDC MarketScape for U.S. value-based care strategic consulting services.

Lumeris is a private, physician-founded healthcare transformation company headquartered in Missouri, with origins dating back to 2008 and VBC services being launched in 2010 after establishing the Essence Healthcare Medicare Advantage plan. Employing approximately 1,000 professionals, including clinicians, engineers, and healthcare specialists, Lumeris is primarily based in St. Louis and Boston, with a growing national footprint across 13 states. Its network has over 1.2 million value-based patient lives and \$10 billion in medical spend under management, partnering with health systems, hospitals, multispecialty physician groups, payers, and "payviders" nationwide.

Key Solutions

- **Population Health Management Platform:** An integrated, AI-powered technology solution for risk adjustment, ACO management, reporting, and care coordination (Lumeris supports native workflow integration with major EHRs, including Epic and Cerner, with options for direct and indirect data feeds, and interfaces via HL7, FHIR, and C-CDAs.)
- **Value-Based Care Enablement:** Lumeris partners with health systems, physician organizations, and payers to accelerate success in value-based care. Acting as a long-term operating partner rather than a traditional consultant, Lumeris brings a "performance partnership" model that combines strategic alignment, data-driven insight, and hands-on execution. Through this approach, Lumeris helps partners improve quality, lower total cost of care, and enhance physician engagement while managing risk across multiple populations and payer arrangements.
- **TOM:** Proprietary, omni-channel, primary care-as-a-service, cloud-based platform powering predictive analytics, workflow automation, and AI-driven next best actions (EHR data, payer claims, HIE, pharmacy, lab, device, SDOH, and other sources are aggregated to create data pipelines for a 360-degree patient view.)
- **Essence Healthcare:** A Medicare Advantage plan demonstrating Lumeris' VBC approach in action

Key Features

- **Comprehensive VBC enablement portfolio:** Lumeris provides advisory and operational services across the VBC continuum, including strategy, technology enablement, care transformation, population health management, risk management, operational improvement, financial modeling, compliance, and

regulatory support. Each engagement is supported by multidisciplinary teams, including clinicians, actuaries, engineers, and population health managers (PHMs) who work side by side with client teams.

- **Operational partnership and shared accountability:** Lumeris operates side by side with clients, sharing both upside and downside risks by contracting directly with payers on behalf of their partners through accountable risk organizations (AROs) and joint governance models. This includes jointly developing operating plans and deploying activation teams, population health managers, in-house coders, and other dedicated resources.
- **Proprietary AI-enabled technology-backed solutions:** Advisory and operational offerings are bolstered by a proprietary platform and tools for real-time data analytics, risk adjustment, reporting, and care coordination, automated patient outreach, and next best actions, all designed to be integrated with clients' EHRs and existing workflows.
- **Multidisciplinary expertise:** Teams of experienced clinicians, consultants, engineers, actuaries, and operational experts conduct client engagements; address digital maturity; and support education, workflow redesign, and technical implementation.
- **Structured risk and readiness assessment:** Advisory projects begin with a structured VBC readiness and risk assessment, leveraging frameworks and analytics to evaluate clinical, operational, and financial exposure and to develop transition road maps.
- **Outcomes-focused approach:** Lumeris tracks client success using defined metrics/KPIs for risk mitigation, workflow efficiency, quality improvements, coding/documentation accuracy, and cost reduction.
- **EHR-agnostic flexibility:** Advisory and operational services can be integrated with any EHR, supporting a client's existing IT. Optimized value is achieved when clients adopt Lumeris' integrated platform and analytics for predictive modeling, attribution, forecasting, automated patient outreach, and reporting.
- **Change management and education:** Lumeris deploys a structured approach to change management (using frameworks such as Kotter, Lewin, or Prosci), including customized education, peer-to-peer learning, knowledge retention tracking, and ongoing feedback mechanisms. Dedicated PHMs are embedded within client organizations to drive practice transformation. These PHMs provide hands-on coaching, workflow optimization, and data-driven performance reviews, supported by ongoing training, peer learning, and feedback programs to promote sustainable adoption.
- **Provider-payer contracting sophistication:** Lumeris has experience in supporting risk-based contracting, including capitation, shared savings, and

value-based incentives, with a focus on improved negotiations, incentive alignment, and sustaining long-term payer-provider partnerships.

Lumeris describes itself as an "all in" partner, meaning that success is measured through joint outcome achievement, not just advice, and partnership models are flexible to accommodate clients' current maturity, technical environment, and priorities. The company's "crawl, walk, run" change management and bespoke annual operating plans underscore its commitments to long-term, sustainable transformation.

Strengths

- **Physician-first philosophy:** Deep roots in primary care and physician engagement, focusing on bedrock alignment at every organizational level; serves Lumeris' clients well when physician engagement is a strategic imperative
- **Integrated, AI-powered technology and analytics:** A mature, HER-agnostic platform for population health and value-based analytics, fully embedded in provider workflows allowing for efficiency gains and workflow enhancements that minimize clinician disruption
- **Shared risk/incidence model:** Willingness to partner through joint governance, sharing upside and downside, ensuring alignment of incentives creates a foundation for achievable and impactful change
- **End-to-end enablement:** Lumeris delivering across the full value-based journey, strategy, ops, analytics, compliance, financials, and technology enablement
- **Customization and market agility:** Focuses on finding "the right partners" and tailoring operating plans to individual client needs rather than operating a one-size-fits-all model

Challenges

- **High-touch, resource-intensive approach:** Lumeris' approach requires operational and leadership alignment, up-front engagement, and ongoing onsite presence, making its model better suited for organizations willing to invest considerable time and resources.
- **Integration and technology reliance:** Success with Lumeris is highly dependent on clients' capacity to integrate and fully utilize Lumeris' proprietary technology stack and data insights. While adaptable to clients' existing technology environments, optimal outcomes are achieved when Lumeris' analytics, workflows, and predictive models are embedded within the client's EHR and operations, posing challenges for organizations with limited IT resources or ongoing system transformations.
- **Expansion into broader markets:** The company has begun to extend capabilities and best practices beyond primary care into specialty care

transformation and new contracting models, as appetite for value-based models increases among specialists. This emerging area not only offers substantial opportunity for innovation and revenue but also presents operational complexity, requiring further tailoring of tools, incentives, and change management protocols to fit specialty workflows and priorities.

Consider Lumeris When

Lumeris is better suited for buyers that have strong leadership alignment on the value and role of primary care in the VBC space, a clear strategy for VBC transformation, and a commitment to deep partnership beyond surface-level consulting and those open to hands-on, joint governance models. Organizations seeking to accept risk or that are aiming for high contract performance, especially those needing operational, analytics, and payer contracting expertise, will find alignment with Lumeris' offering.

APPENDIX

Reading an IDC MarketScape Graph

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

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

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

The size of the individual vendor markers in the IDC MarketScape represents the market share of each individual vendor within the specific market segment being assessed. It's important to recognize that a vendor's market share, as represented in this study, is a snapshot in time and may not reflect its near-term growth or consider its experience and success with related legacy products.

Vendors in the Leader category may not be the best fit for all organizations. Successful vendor selection is often dependent on the articulation of the priorities and strategy of the purchasing organization and the vendor's ability to align with those criteria.

The IDC MarketScape is a valuable representation by a neutral third party of a vendor's current capabilities and future strategy. The IDC MarketScape should not be used in a vacuum but rather as one of several inputs to short-listing vendors.

IDC MarketScape Methodology

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

Market Definition

Value-based care advisory and consulting services refer to specialized business offerings that aid healthcare providers, payers, and related entities in moving toward reimbursement mechanisms linked to patient health outcomes rather than service volume. Core services include strategic planning for value-based model implementation, care delivery redesign, digital transformation (such as EHR and telehealth integration), data analytics, financial modeling for risk-based contracts, quality metric design, compliance audits, workforce education, and outsourced operational support for all stages of the value-based care life cycle.

Key service segments include:

- **Strategy consulting:** Defining transition plans, market entry, and growth opportunities in value-based payment models
- **Operations and process optimization:** Assisting organizations in workflow redesign, revenue cycle management, and cost-control initiatives
- **IT and digital transformation:** Facilitating integration of analytics platforms, remote patient monitoring, and interoperability solutions for value-based care
- **Compliance and regulation:** Ensuring that contracts and arrangements meet evolving regulatory requirements, including Stark Law and Anti-Kickback Statute
- **Outsourced services:** Providing as-needed operational and management support, including coding, documentation, billing, and staffing resources to meet outcomes-based criteria

Related Research

- *IDC FutureScape: Worldwide Healthcare 2026 Predictions* (IDC #US53860725, October 2025)
- *IDC ProductScape: U.S. Value-Based Healthcare Analytics, 2025* (IDC #US53816025, September 2025)
- *IDC MarketScape: U.S. Value-Based Healthcare Analytics 2025 Vendor Assessment* (IDC #US53765825, September 2025)

Synopsis

This IDC MarketScape evaluates the U.S. value-based care (VBC) strategic consulting services market. The current value-based care advisory and consulting services market is both mature and rapidly evolving, driven by an increased industry focus on cost efficiency, quality outcomes, and regulatory compliance within alternative payment models. A broad array of vendors, from specialized healthcare consultancies to large, multidisciplinary firms, now compete to support payers, providers, and hybrid payvider organizations in their journey from traditional fee for service to VBC arrangements.

"An emerging theme in this market is the shift from one-size-fits-all advisory work toward tailored, iterative engagements that reflect the unique risk tolerance, capabilities, and motivations of individual healthcare organizations. Vendors that can meet this need are poised to emerge as effective and impactful partners." — Jennifer Eaton, research director, Value-Based Healthcare IT Transformation Strategies

ABOUT IDC

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

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