

# Global Healthcare Fraud Analy Market 2023 by Company, Regions, Type and Application, Forecast to 2029

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## Abstracts

The market growth of medical fraud analysis can be attributed to the large amount of fraudulent activity in healthcare, the increasing number of patients seeking health insurance; high return on investment; and the increasing number of fraud related to pharmacy claims. The market is segmented by solution type, delivery model, application and end user. According to the app, the market is divided into insurance claim review, pharmacy billing abuse, payment integrity and other apps. The insurance claims review segment dominates the medical fraud analysis market. With the increasing number of patients seeking health insurance, the increasing number of fraudulent claims, and the increasing popularity of advance payment review models, it is expected to drive growth in this area in the coming years.

According to our (Global Info Research) latest study, the global Healthcare Fraud Analy market size was valued at USD million in 2022 and is forecast to a readjusted size of USD million by 2029 with a CAGR of % during review period. The influence of COVID-19 and the Russia-Ukraine War were considered while estimating market sizes.

This report is a detailed and comprehensive analysis for global Healthcare Fraud Analy market. Both quantitative and qualitative analyses are presented by company, by region & country, by Type and by Application. As the market is constantly changing, this report explores the competition, supply and demand trends, as well as key factors that contribute to its changing demands across many markets. Company profiles and product examples of selected competitors, along with market share estimates of some of the selected leaders for the year 2023, are provided.

Key Features:

Global Healthcare Fraud Analy market size and forecasts, in consumption value (\$ Million), 2018-2029

Global Healthcare Fraud Analy market size and forecasts by region and country, in consumption value (\$ Million), 2018-2029

Global Healthcare Fraud Analy market size and forecasts, by Type and by Application, in consumption value (\$ Million), 2018-2029

Global Healthcare Fraud Analy market shares of main players, in revenue (\$ Million), 2018-2023

The Primary Objectives in This Report Are:

To determine the size of the total market opportunity of global and key countries

To assess the growth potential for Healthcare Fraud Analy

To forecast future growth in each product and end-use market

To assess competitive factors affecting the marketplace

This report profiles key players in the global Healthcare Fraud Analy market based on the following parameters - company overview, production, value, price, gross margin, product portfolio, geographical presence, and key developments. Key companies covered as a part of this study include IBM, Optum, SAS Institute, Change Healthcare and EXL Service Holdings, etc.

This report also provides key insights about market drivers, restraints, opportunities, new product launches or approvals, COVID-19 and Russia-Ukraine War Influence.

Market segmentation

Healthcare Fraud Analy market is split by Type and by Application. For the period 2018-2029, the growth among segments provide accurate calculations and forecasts for consumption value by Type and by Application. This analysis can help you expand your business by targeting qualified niche markets.

## Market segment by Type

Descriptive Analytics

Predictive Analytics

Prescriptive Analytics

## Market segment by Application

Public and Government Agencies

Private Insurance Payers

Third-party Service Providers

Employers

## Market segment by players, this report covers

IBM

Optum

SAS Institute

Change Healthcare

EXL Service Holdings

Cotiviti

Wipro Limited

Conduent

Pondera Solutions

LexisNexis

Market segment by regions, regional analysis covers

North America (United States, Canada, and Mexico)

Europe (Germany, France, UK, Russia, Italy, and Rest of Europe)

Asia-Pacific (China, Japan, South Korea, India, Southeast Asia, Australia and Rest of Asia-Pacific)

South America (Brazil, Argentina and Rest of South America)

Middle East & Africa (Turkey, Saudi Arabia, UAE, Rest of Middle East & Africa)

The content of the study subjects, includes a total of 13 chapters:

Chapter 1, to describe Healthcare Fraud Analy product scope, market overview, market estimation caveats and base year.

Chapter 2, to profile the top players of Healthcare Fraud Analy, with revenue, gross margin and global market share of Healthcare Fraud Analy from 2018 to 2023.

Chapter 3, the Healthcare Fraud Analy competitive situation, revenue and global market share of top players are analyzed emphatically by landscape contrast.

Chapter 4 and 5, to segment the market size by Type and application, with consumption value and growth rate by Type, application, from 2018 to 2029.

Chapter 6, 7, 8, 9, and 10, to break the market size data at the country level, with revenue and market share for key countries in the world, from 2018 to 2023. and Healthcare Fraud Analy market forecast, by regions, type and application, with consumption value, from 2024 to 2029.

Chapter 11, market dynamics, drivers, restraints, trends, Porters Five Forces analysis, and Influence of COVID-19 and Russia-Ukraine War

Chapter 12, the key raw materials and key suppliers, and industry chain of Healthcare Fraud Analy.

Chapter 13, to describe Healthcare Fraud Analy research findings and conclusion.

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