

Healthcare Fraud Analytics Market - Forecast from 2026 to 2031

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Abstracts

Healthcare IT Integration Market, at a 9.54% CAGR, is projected to increase from USD 5.190 billion in 2025 to USD 8.968 billion in 2031.

The healthcare fraud analytics market is expanding as organizations invest substantially in advanced tools to curb fraudulent medical claims. Governments worldwide are implementing stricter regulations and allocating funds to fraud prevention initiatives. Analytics providers are innovating AI-driven systems capable of identifying suspicious billing patterns, identity theft, and over-treatment. North America continues to lead, supported by widespread adoption of sophisticated detection and monitoring technologies.

Healthcare fraud analytics employs advanced data techniques and algorithms to identify patterns, anomalies, and suspicious activities that signal fraud, including billing irregularities, identity theft, and unnecessary procedures. These systems enable proactive detection and prevention, significantly mitigating financial losses estimated at 3% to 10% of global healthcare expenditure annually according to the NHCAA. By safeguarding resources and upholding industry integrity, fraud analytics solutions deliver substantial cost containment benefits and foster trust in healthcare systems.

Segmentation analysis highlights cost containment and financial loss prevention as core drivers. The imperative to reduce fraud-related expenditures propels demand for robust analytics capable of delivering measurable savings through early intervention.

Growing awareness and emphasis on fraud prevention further accelerate market momentum. Heightened recognition of fraud's systemic impact is spurring innovation and broader deployment of preventive measures.

Government initiatives and regulations play a pivotal role. Authorities are strengthening enforcement through dedicated anti-fraud units, increased funding for detection programs, and legislation imposing deterrents and penalties. Collaborative efforts with industry stakeholders promote best practices, information sharing, and transparency in claims processing, enhancing overall system resilience and patient protection.

The rising adoption of electronic health records (EHRs) and digital health systems significantly influences the sector. Widespread digitization provides vast datasets for real-time monitoring, pattern recognition, and anomaly detection, enabling identification of issues such as erroneous coding or fraudulent billing as they occur.

Geographically, North America maintains leadership, attributable to stringent regulatory environments, elevated healthcare spending, prevalent fraud incidents, and a mature infrastructure prioritizing compliance and prevention. The region's proactive integration of cutting-edge analytics solidifies its dominant position.

Leading solutions include IBM's fraud detection systems, which utilize machine learning and artificial intelligence to analyze extensive claims, billing, and patient data for anomalous patterns indicative of fraud.

Optum delivers real-time monitoring and alerting platforms that continuously scan transactions using rule-based algorithms to flag potential issues for immediate response.

LexisNexis Risk Solutions provides identity verification tools leveraging comprehensive databases and algorithms to authenticate patients, providers, and entities, countering identity theft risks.

Optum also offers provider network analysis capabilities that map interconnections among stakeholders to uncover coordinated schemes, improper billing, or organized fraud rings.

Prominent companies shaping the landscape include IBM, Optum, and LexisNexis Risk Solutions, driving advancements in AI-enabled, real-time, and network-based analytics to address evolving fraud tactics.

Overall, the market exhibits strong growth potential, fueled by financial imperatives, regulatory reinforcement, digital transformation, and technological innovation,

positioning fraud analytics as indispensable for sustainable healthcare delivery.

Key Benefits of this Report:

Insightful Analysis: Gain detailed market insights covering major as well as emerging geographical regions, focusing on customer segments, government policies and socio-economic factors, consumer preferences, industry verticals, and other sub-segments.

Competitive Landscape: Understand the strategic maneuvers employed by key players globally to understand possible market penetration with the correct strategy.

Market Drivers & Future Trends: Explore the dynamic factors and pivotal market trends and how they will shape future market developments.

Actionable Recommendations: Utilize the insights to exercise strategic decisions to uncover new business streams and revenues in a dynamic environment.

Caters to a Wide Audience: Beneficial and cost-effective for startups, research institutions, consultants, SMEs, and large enterprises.

What do businesses use our reports for?

Industry and Market Insights, Opportunity Assessment, Product Demand Forecasting, Market Entry Strategy, Geographical Expansion, Capital Investment Decisions, Regulatory Framework & Implications, New Product Development, Competitive Intelligence

Report Coverage:

Historical data from 2021 to 2025 & forecast data from 2026 to 2031

Growth Opportunities, Challenges, Supply Chain Outlook, Regulatory Framework, and Trend Analysis

Competitive Positioning, Strategies, and Market Share Analysis

Revenue Growth and Forecast Assessment of segments and regions including countries

Company Profiling (Strategies, Products, Financial Information, and Key Developments among others.

Healthcare Fraud Analytics Market Segmentation

By Component

Software

Services

By Application

Insurance Claims Review

Payment Integrity

Identity & Access Management

Others

By Deployment

On-Premises

Cloud-Based

By End-User

Healthcare Payers

Healthcare Providers

Government Agencies

Others

By Geography

North America

USA

Canada

Mexico

South America

Brazil

Argentina

Others

Europe

Germany

France

United Kingdom

Spain

Others

Middle East and Africa

Saudi Arabia

UAE

Others

Asia Pacific

China

India

Japan

South Korea

Indonesia

Thailand

Others

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