

# **Healthcare Fraud Analytics Market Size, Share, and Outlook, 2025 Report- By Type (Predictive Analytics, Prescriptive Analytics, Descriptive Analytics), By Application (Insurance Claims Review, Pharmacy Billing Misuse, Payment Integrity, Identity & Case Management, Others), By End-User (Private Insurance Payers, Government Agencies, Others), By Component (Software, Services), 2018-2032**

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## **Abstracts**

### Healthcare Fraud Analytics Market Outlook

The Healthcare Fraud Analytics Market size is expected to register a growth rate of 21.3% during the forecast period from \$4.65 Billion in 2025 to \$18 Billion in 2032. The Healthcare Fraud Analytics market is a thriving business that is poised to keep growing and presents potential growth opportunities for companies across the industry value chain.

The comprehensive market research report presents 12-year historic and forecast data on Healthcare Fraud Analytics segments across 22 countries from 2021 to 2032. Key segments in the report include By Type (Predictive Analytics, Prescriptive Analytics, Descriptive Analytics), By Application (Insurance Claims Review, Pharmacy Billing Misuse, Payment Integrity, Identity & Case Management, Others), By End-User (Private Insurance Payers, Government Agencies, Others), By Component (Software, Services). Over 70 tables and charts showcase findings from our latest survey report on Healthcare Fraud Analytics markets.

## Healthcare Fraud Analytics Market Insights, 2025

The Healthcare Fraud Analytics Market is advancing with the adoption of AI-powered automated fraud detection, automation-enhanced real-time claims monitoring, and machine learning-driven predictive fraud risk scoring. Companies such as Optum, SAS Institute, IBM Watson Health, and Cotiviti are leading with AI-enhanced automated fraud pattern recognition, blockchain-backed medical transaction security, and IoT-integrated real-time claims validation. The expansion of automation-powered AI-driven anomaly detection in Medicare and Medicaid billing, AI-enhanced cloud-native pre-payment fraud prevention, and AI-driven real-time provider fraud analytics is improving fraud mitigation efforts. However, regulatory challenges in AI-powered fraud detection compliance, cybersecurity risks in automation-enhanced healthcare transaction monitoring, and technical limitations in AI-driven real-time fraud risk assessment present concerns. Additionally, CMS and DOJ regulations on AI-powered healthcare fraud analytics, evolving insurance industry standards on automation-enhanced claims integrity, and corporate investment in AI-driven fraud detection platforms are shaping market growth.

### Five Trends that will define global Healthcare Fraud Analytics market in 2025 and Beyond

A closer look at the multi-million market for Healthcare Fraud Analytics identifies rapidly shifting consumer preferences across categories. By focusing on growth and resilience, leading Healthcare Fraud Analytics companies are prioritizing their investments across categories, markets, and geographies. The report analyses the most important market trends shaping the new landscape to support better decisions for the long and short-term future. The impact of tariffs by the US administration also significantly impact the profitability of Healthcare Fraud Analytics vendors.

### What are the biggest opportunities for growth in the Healthcare Fraud Analytics industry?

The Healthcare Fraud Analytics sector demonstrated remarkable resilience over the past year across developed and developing economies. Further, the market presents significant opportunities to leverage the existing momentum towards actions by 2032. On the other hand, recent macroeconomic developments including rising inflation and supply chain disruptions are putting pressure on companies. The chapter assists users to identify growth avenues and address business challenges to make informed commercial decisions with unique insights, data forecasts, and in-depth market analyses.

## Healthcare Fraud Analytics Market Segment Insights

The Healthcare Fraud Analytics industry presents strong offers across categories. The analytical report offers forecasts of Healthcare Fraud Analytics industry performance across segments and countries. Key segments in the industry include%li%By Type (Predictive Analytics, Prescriptive Analytics, Descriptive Analytics), By Application (Insurance Claims Review, Pharmacy Billing Misuse, Payment Integrity, Identity & Case Management, Others), By End-User (Private Insurance Payers, Government Agencies, Others), By Component (Software, Services). The largest types, applications, and sales channels, fastest growing segments, and the key factors driving each of the categories are included in the report.

Forecasts of each segment across five regions are provided from 2021 through 2032 for Asia Pacific, North America, Europe, South America, Middle East, and African regions. In addition, Healthcare Fraud Analytics market size outlook is provided for 22 countries across these regions.

## Market Value Chain

The chapter identifies potential companies and their operations across the global Healthcare Fraud Analytics industry ecosystem. It assists decision-makers in evaluating global Healthcare Fraud Analytics market fundamentals, market dynamics, and disruptive trends across the value chain segments.

## Scenario Analysis and Forecasts

Strategic decision-making in the Healthcare Fraud Analytics industry is multi-faceted with the increased need for planning across scenarios. The report provides forecasts across three case scenarios%li%low growth, reference case, and high growth cases.

## Asia Pacific Healthcare Fraud Analytics Market Analysis%li%A Promising Growth Arena for Business Expansion

As companies increasingly expand across promising Asia Pacific markets with over 4.5 billion population, the medium-to-long-term future remains robust. The presence of the fastest-growing economies such as China, India, Thailand, Indonesia, and Vietnam coupled with strengthening middle-class populations and rising disposable incomes drive the market. In particular, China and India are witnessing rapid shifts in consumer

purchasing behavior. China is recovering steadily with optimistic forecasts for 2025. Further, Japanese and South Korean markets remain stable with most companies focusing on new product launches and diversification of sales channels.

### The State of Europe Healthcare Fraud Analytics Industry 2025%li%Focus on Accelerating Competitiveness

As companies opt for an integrated agenda for competitiveness, the year 2025 presents optimistic scenarios for companies across the ecosystem. With signs of economic recovery across markets, companies are increasing their investments. Europe is one of the largest markets for Healthcare Fraud Analytics with demand from both Western Europe and Eastern European regions increasing over the medium to long-term future. Increasing omnichannel shopping amidst robust consumer demand for value purchases shapes the market outlook. The report analyses the key Healthcare Fraud Analytics market drivers and opportunities across Germany, France, the United Kingdom, Spain, Italy, Russia, and other Europe.

The US Healthcare Fraud Analytics market Insights%li%Vendors are exploring new opportunities within the US Healthcare Fraud Analytics industry.

Easing inflation coupled with strengthening consumer sentiment is encouraging aggressive actions from the US Healthcare Fraud Analytics companies. Market players consistently focusing on innovation and pursuing new ways to create value are set to excel in 2025. In addition, the Canadian and Mexican markets offer lucrative growth pockets for manufacturers and vendors. Focus on private-brand offerings and promotions, diversified sales channels, expansion into niche segments, adoption of advanced technologies, and sustainability are widely observed across the North American Healthcare Fraud Analytics market.

Latin American Healthcare Fraud Analytics market outlook rebounds in line with economic growth.

Underlying demand remains higher among urban consumers with an optimistic economic outlook across Brazil, Argentina, Chile, and other South and Central American countries. Increased consumer spending has been reported in Q1 -2025 and the prospects remain strong for rest of 2025. Aggressive ecosystem moves to create new sources of income are widely observed across markets in the region. Marketing activities focused on customer insights, operations, and support functions are quickly gaining business growth in the region.

## Middle East and Africa Healthcare Fraud Analytics Markets%li%New Opportunities for Companies Harnessing Diversity

Rapid growth in burgeoning urban locations coupled with a young and fast-growing population base is attracting new investments in the Middle East and African Healthcare Fraud Analytics markets. Designing expansion and marketing strategies to cater to the local consumer base supports the market prospects. In addition to Nigeria, Algeria, South Africa, and other markets, steady growth markets in Ethiopia, Rwanda, Ghana, Tanzania, the Democratic Republic of Congo, and others present significant prospects for companies. On the other hand, Middle Eastern Healthcare Fraud Analytics markets including the UAE, Saudi Arabia, Qatar, and Oman continue to offer lucrative pockets of growth.

## Competitive Landscape%li%How Healthcare Fraud Analytics companies outcompete in 2025?

The ability to respond quickly to evolving consumer preferences and adapt businesses to niche consumer segments remains a key growth factor. The report identifies the leading companies in the industry and provides their revenue for 2024. The market shares of each company are also included in the report. Further, business profiles, SWOT analysis, and financial analysis of each company are provided in detail. Key companies analyzed in the report include CGI Inc, Cotiviti Inc, DXC Technology, HCL Technologies Ltd, IBM Corp, McKesson Corp, Optum Inc, SAS Institute Inc, SCIOInspire Corp, Wipro Ltd.

## Healthcare Fraud Analytics Market Segmentation

### By Type

Predictive Analytics

Prescriptive Analytics

Descriptive Analytics

### By Application

Insurance Claims Review

Pharmacy Billing Misuse

Payment Integrity

Identity & Case Management

Others

By End-User

Private Insurance Payers

Government Agencies

Others

By Component

Software

Services

Leading Companies

CGI Inc

Cotiviti Inc

DXC Technology

HCL Technologies Ltd

IBM Corp

McKesson Corp

Optum Inc

SAS Institute Inc

SCIOInspire Corp

Wipro Ltd

### Reasons to Buy the report

Make informed decisions through long and short-term forecasts across 22 countries and segments.

Evaluate market fundamentals, dynamics, and disrupting trends set to shape 2025 and beyond.

Gain a clear understanding of the competitive landscape, with product portfolio and growth strategies.

Get an integrated understanding of the entire market ecosystem and companies.

Stay ahead of the competition through plans for growth in a changing environment for your geographic expansion.

Assess the impact of advanced technologies and identify growth opportunities based on actionable data and insights.

Get free Excel spreadsheet and PPT versions along with the report PDF.

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**Predictive Analytics**

**Prescriptive Analytics**

**Descriptive Analytics**

### **By Application**

**Insurance Claims Review**

**Pharmacy Billing Misuse**

**Payment Integrity**

**Identity & Case Management**

**Others**

### **By End-User**

**Private Insurance Payers**

**Government Agencies**

**Others**

### **By Component**

**Software**

**Services**

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**IBM Corp**

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**SAS Institute Inc**

**SCIOInspire Corp**

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