

Trusted Context for Healthcare Payers

Powered by Informatica IDMC, MuleSoft, Data 360, and Agentforce Health

The Challenge: AI Is Only as Trustworthy as the Data Behind It

Healthcare payers are deploying AI agents to autonomously process prior authorizations, adjudicate claims, drive member outreach, and close HEDIS quality gaps at scale. But when autonomous AI makes a single mistake on fragmented data, it **scales** that mistake exponentially across every member it touches.

Most payers have member information fragmented across three or more system identifiers: one for individual coverage, one for employer-sponsored plans, and one for Medicaid. This identity fragmentation leads to the **Reimbursement Integrity Gap**, a structural vulnerability that causes:

- Costly “benefit hallucinations” where agents act on stale or conflicting member data
- HIPAA and CMS compliance exposure from ungoverned data access
- Prior authorization delays spanning days instead of hours
- Missed HEDIS quality gaps driving unnecessary ER utilization
- Administrative cost overruns inflating the Medical Loss Ratio (MLR)

The Solution: Trusted Context Architecture

Trusted Context is the strategic framework that closes the gap between fragmented backend data and front-office AI action. It transforms siloed payer data (claims, enrollment, PBM, care management, and clinical feeds) into a governed, real-time foundation that Agentforce agents can safely act upon.

The Trusted Context solution for payers is built on four integrated layers:

Informatica IDMC

The Governance Layer The industry’s first headless AI-powered data management cloud – now part of Salesforce.

MuleSoft

The Connectivity Layer API-led integration connecting EHR/EMR systems to the modern AI stack.

Data 360

The Activation Layer Unified member profiles enriched with real-time behavioral and engagement signals.

Agentforce Health

The Action Layer Autonomous agents grounded in a Golden Member Record and real-time clinical context, executing high-stakes payer workflows – prior authorization, claims integrity, HCC closure, and HEDIS gap management – at enterprise scale, with the auditability CMS compliance demands.

Informatica IDMC: The Foundation of Trusted Context

Informatica IDMC is the governance engine at the heart of the Trusted Context architecture. It is the difference between *moving* payer data and *governing* it.

As a headless architecture, IDMC operates as the invisible governance engine beneath your AI stack, processing, mastering and governing data at the infrastructure layer, without requiring a separate UI-driven workflow for every data action. AI agents and front-office applications consume trusted context without ever touching raw source data.

Four Core IDMC Pillars for Payers

Pillar	What It Does	Why It Matters for Payers
Data Integration & ETL	Ingests and transforms data from legacy claims engines (Facets, QNXT), PBM feeds, FHIR APIs, HIEs, and CMS sources using 10,000+ pre-built connectors	Ensures the Trust Layer has access to a comprehensive, real-time stream of enterprise payer data
Agentic Multidomain Master Data Management (MDM)	AI-powered matching, merging, and deduplication to create a Golden Record for members, providers, brokers, and groups	Payer organizations may exist across dozens of systems with conflicting identifiers — MDM reconciles them into one trusted entity
Data Quality (CDQ)	Cleanses, standardizes, and enriches data before it reaches Agentforce	Accelerating AI consumption of untrained payer data at scale only amplifies errors
Data Governance (CDGC)	Captures lineage, relationships, and transformation from inputs to insights	Every agent action can be traced to its source — the auditability payers need for CMS compliance

The Golden Member Record

Agentic Multidomain MDM resolves fragmented member identities; unifying subscriber, dependent and provider data across every line of business, automatically cleansing and standardizing into a single source of truth before it reaches the AI agent.

BCBS of Massachusetts deployed Informatica MDM and Cloud Data Integration on IDMC to consolidate disparate customer data into a trusted Customer 360 view, enabling rapid cloud migration, CMS interoperability, risk adjustment, and claims operations across members, providers, and business units.

“Informatica IDMC improves operational efficiency and member satisfaction through consolidated, standardized, and mastered data.”

— Blue Cross Blue Shield of Massachusetts

Gartner Recognition (Informatica IDMC)

- **Leader** — 2026 Magic Quadrant™ for Augmented Data Quality Solutions
 - **Leader** — 2026 Magic Quadrant™ for Data & Analytics Governance Platforms
 - **Leader** — 2026 Magic Quadrant™ for Master Data Management Solutions
 - **Leader** — 2025 Magic Quadrant™ for Data Integration Tools
 - **Leader** — 2025 Magic Quadrant™ for Metadata Management Solutions
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MuleSoft: Connectivity & Compliance Enforcement

MuleSoft securely bridges legacy claims engines to the modern AI stack, enforcing **real-time HIPAA policy controls** so agents only access what they're authorized to see. Via API-led connectivity and Model Context Protocol (MCP), MuleSoft:

- Connects ERP, QMS, HIE, FHIR, and clearinghouse data without custom middleware
 - Governs API access with a unified security and compliance layer
 - Enables Agent Fabric for multi-agent orchestration across payer ecosystems
 - Automates data discovery and protection of PII/PHI across the payer enterprise
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Data 360: Activation at Scale

Salesforce Data 360 consumes IDMC-mastered Golden Records and overlays them with real-time engagement signals, including portal clicks, benefit inquiries, and care program interactions, to build a Unified Member Profile. That trusted context is then activated across:

- **Agentforce Health** — autonomous payer workflows for PA, claims, and member engagement
- **Tableau** — population health and operational analytics
- **Customer-facing apps** — personalized member engagement at every touchpoint

Informatica MDM is the upstream system of record that creates the Golden Record. Data 360 is the system of activation that turns that record into intelligent payer action.

Key Provider Use Cases

1. Prior Authorization (PA) Management

Agentforce agents grounded in a Golden Member Record autonomously review PA requests, surface clinical policy guidelines, and execute approvals. This cuts decision time from days to hours, while MuleSoft enforces real-time CMS medical necessity policy controls.

IDMC’s headless governance layer ensures the Golden Member Record is always current,so the PA agent never waits on a data refresh or human curation cycle to get accurate context.

What this enables:

- Autonomous PA review and approval grounded in trusted member and clinical records
- Real-time CMS policy enforcement via MuleSoft without custom middleware
- Reduction in prior authorization turnaround time and administrative overhead

Metrics that matter:

- Prior authorization cycle time reduction (hours)
- Administrative cost per PA reduction (%)
- Agent approval accuracy tied to trusted member context

2. Member 360 & Omnichannel Engagement

Agentforce agents grounded in a clean, deduplicated Golden Member Record drive personalized outreach across enrollment, claims, PBM, and care management, which improves Star Ratings and CAHPS scores through consistent, context-aware member experiences. Primary sources – NPPES, DEA, state licensing boards – surface real-time status updates directly into Epic/Cerner scheduling workflows via MuleSoft, cutting privileging cycles from weeks to days.

What this enables:

- Unified member identity across all lines of business surfaced to Agentforce via MuleSoft
- Personalized omnichannel outreach triggered by real-time engagement signals in Data 360
- Tableau dashboards tracking Star Rating drivers, CAHPS performance, and member satisfaction by segment

Metrics that matter:

- Star Rating improvement (CMS quality measure performance)
- CAHPS score improvement (%)
- Member outreach response rate increase

3. Risk Adjustment & HCC Suspect Condition Closure

FHIR-connected clinical and claims data are unified through IDMC, which identifies undercoded Hierarchical Condition Categories (HCCs) before year-end submission, protecting revenue and improving risk score accuracy through Agentforce-driven prospective closure workflows.

What this enables:

- Automated HCC suspect identification across longitudinal member histories in IDMC
- Agentforce-driven outreach to providers and care managers for prospective gap closure
- Tableau dashboards tracking RAF score accuracy, HCC closure rates, and revenue impact by cohort

Metrics that matter:

- Risk Adjustment Factor (RAF) score accuracy improvement
- HCC recapture rate (%)
- Net revenue protection from improved risk adjustment accuracy

4. Claims Integrity & Payment Accuracy

Agentforce agents grounded in real-time MDM governance monitor claims intake for fraud, waste, and abuse (FWA) which triggers automated review and appeals workflows before improper payments are issued, with Tableau dashboards surfacing FWA patterns by provider and claim type.

Headless, real-time MDM governance means FWA signals are detected and flagged the moment a claim enters the system, not the morning after running a batch process.

What this enables:

- Real-time FWA detection grounded in Golden Member and Provider Records via IDMC
- Automated appeals and remediation workflows integrated into claims engines via MuleSoft
- Tableau dashboards tracking payment accuracy, denial rates and FWA recovery by line of business

Metrics that matter:

- Improper payment rate reduction (%)
- Claims processing accuracy improvement
- FWA recovery ROI

5. Proactive HEDIS Gap Closure

Population health agents identify at-risk members and proactively close care gaps, driven by longitudinal member histories unified across clinical, claims, and pharmacy data, before costly ER visits occur and before HEDIS measurement windows close.

What this enables:

- Population health agents grounded in unified IDMC data identifying at-risk members in real time
- Proactive outreach and care program enrollment triggered by Data 360 risk stratification signals
- Tableau dashboards tracking HEDIS measure performance, gap closure rates, and ER utilization trends

Metrics that matter:

- HEDIS measure performance improvement (%)
- Preventable ER visit reduction
- Care gap closure rate vs. measurement window deadline

6. Provider Network Management & Credentialing

Unified provider golden records are mastered across NIPR, NPPES, MCG, and internal credentialing systems, ensuring accurate provider directories for real-time CMS compliance and network adequacy reporting, surfaced via MuleSoft into authorization and scheduling workflows.

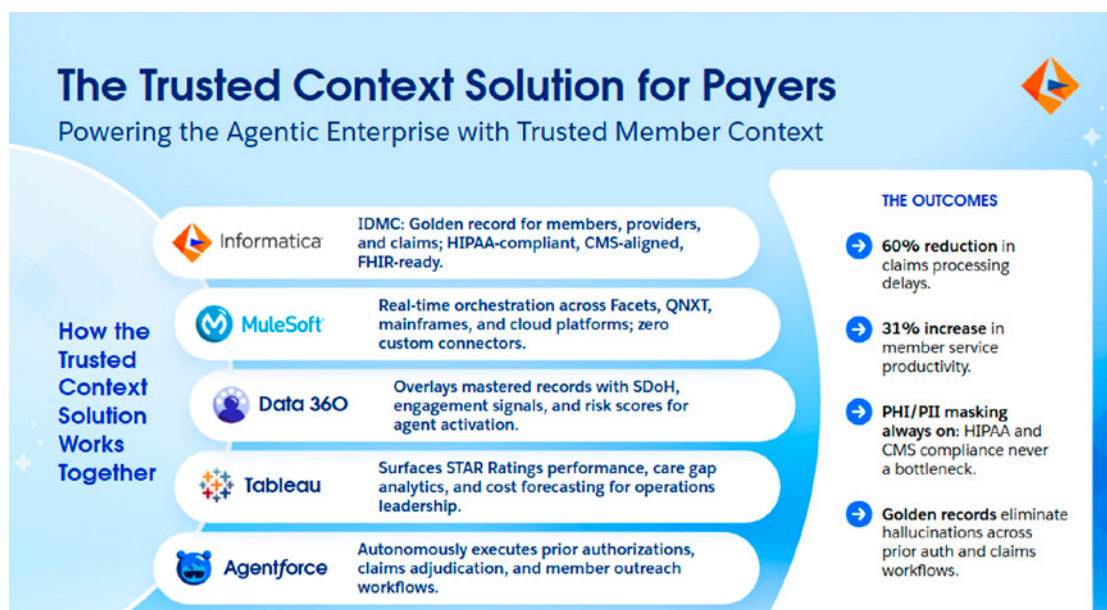
What this enables:

- Automated provider credential verification against primary sources via IDMC MDM
- Real-time provider directory accuracy updates surfaced to claims and authorization systems via MuleSoft
- Tableau dashboards tracking directory accuracy rates, network adequacy gaps, and credentialing cycle times

Metrics that matter:

- Provider directory accuracy rate (%)
- CMS network adequacy compliance rate
- Credentialing cycle time reduction (days)

How Trusted Context Powers Agentforce Health for Payers



Why Salesforce + Informatica — and Why Now

This is **one platform**, not a patchwork of integrations. Salesforce completed its acquisition of Informatica in November 2025, making IDMC a native part of the Salesforce Trusted Context portfolio, alongside MuleSoft, Data 360, Tableau, and Agentforce.

CMS interoperability mandates, the No Surprises Act, ACA risk adjustment deadlines, and the expansion of payer-provider data sharing under FHIR R4 create both the regulatory pressure and the technical pathway for a trusted data foundation investment.

Trust is the currency of the Agentic Enterprise. Informatica IDMC provides the Trusted Context – clean, governed, and real-time data – that allows Agentforce to move from simple chatbots to autonomous agents safely executing complex payer workflows.

Informatica IDMC's headless architecture is what makes this possible at enterprise scale – data governance that operates at the speed of AI, without slowing down agents or requiring human curation at every step.

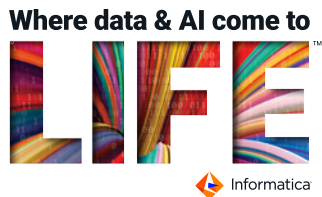
For payers evaluating AI readiness, the question is no longer whether to invest in agentic AI. It's whether your data foundation is ready to support it. Organizations that invest in the Trusted Context Layer today will be the ones whose AI agents close the loop between data and action at enterprise scale, from enrollment through the last mile of the member journey.

Recommended Next Steps

Discovery Workshop – Assess current member matching rates, provider directory accuracy, and prior authorization denial patterns

Proof of Value – 30-day Member 360 MDM pilot integrated into existing claims platform via MuleSoft sandbox

Executive Briefing – CMO/CIO/CDO alignment session with Tableau demo on claims integrity and HEDIS ROI



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About Informatica

Informatica from Salesforce is a leader in AI-powered enterprise cloud data management. Its Intelligent Data Management Cloud (IDMC) platform enables organizations to connect, manage and unify AI-ready data across the enterprise. With capabilities spanning data cataloging, integration, governance, quality, privacy, metadata management and master data management, Informatica supports a broad partner ecosystem and helps customers unlock the full value of their data and AI initiatives.

About Salesforce

Salesforce is the #1 AI CRM, empowering companies to connect with their customers in a whole new way through the power of artificial intelligence, data and trust. For more information about Salesforce (NYSE: CRM), visit: www.salesforce.com.

IN26-5398-0726

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