When the claims process curbs, consumer satisfaction falls and insurer costs climb. A simple equation that insurers have to deal with on a daily basis. What your consumers want is a quick case resolution, a clear status update, and a "no-touch" claims resolution. With MediFox, you are guaranteed a flawless process for your medical claims. Thanks to automation and digitization, you will be able to streamline steps in the claims process, set the foundation for an enhanced customer centric experience, and ultimately, ensure a fraud-free operation.

87%

29%











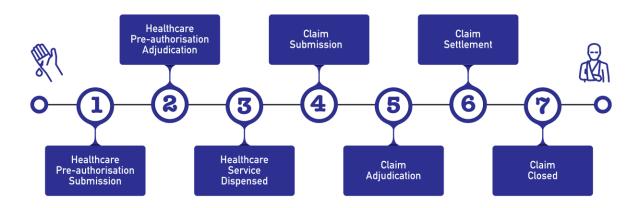
87% believe the claims experience impacts their decisions to remain with insurers.

\$2.30 per manual transaction – versus only \$0.04 per electronic transaction.

29% lower cost on claims management in five years.

73% of health plan leaders cite improving IT capabilities as a key component to success.

Claims management solutions market is expected to reach **\$5,213 million** by 2022.



OVERVIEW

MediFox will enable you to balance the competing imperatives of financial performance and customer satisfaction. From pre-authorization submission and management, to claims automatic submission and reconciliation, healthcare providers network management, and doctors' prescriptions submission, MediFox covers it all. MediFox offers online services to consumers like claims tracking, medicine home delivery, e-payments and e-consultation.

FEATURES

- Servicing instant authorization
- Instant claim approval responses
- Auto-escalations & reviewers intervention
- Processing-time tracking
- Automatic notifications
- Optimized claim administration
- Automated rule-based clinical support tools
- Data enrichment
- KPIs and cost analysis
- Fraud and abuse detection
- · Prescriptions forecasting

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