

Transforming the Future of Healthcare with AI Automation

Empower Your Health Insurance Operations with Pypestream's Autonomous Intelligence Platform

In today's competitive healthcare landscape, health insurance companies face increasing pressure to improve customer service, optimize claims processing, and reduce operational costs. **Pypestream's Autonomous Intelligence Platform (AIP)** helps health insurers automate and streamline complex processes with AI-powered microagents, providing an enhanced experience for members, providers, and back-office operations.

With **TriWest** and the **VA** as leading reference customers, Pypestream has proven success in transforming healthcare operations, improving satisfaction, and driving significant ROI.

216. AI Personal Assistant

Powered by **pypestream**

Hi, I'm your Pypestream Digital Assistant.

How can I help you?

[Check order status](#) [Manage account](#)

738. Policy Administration

\$21,500.00

Your Card
***234 437 1278

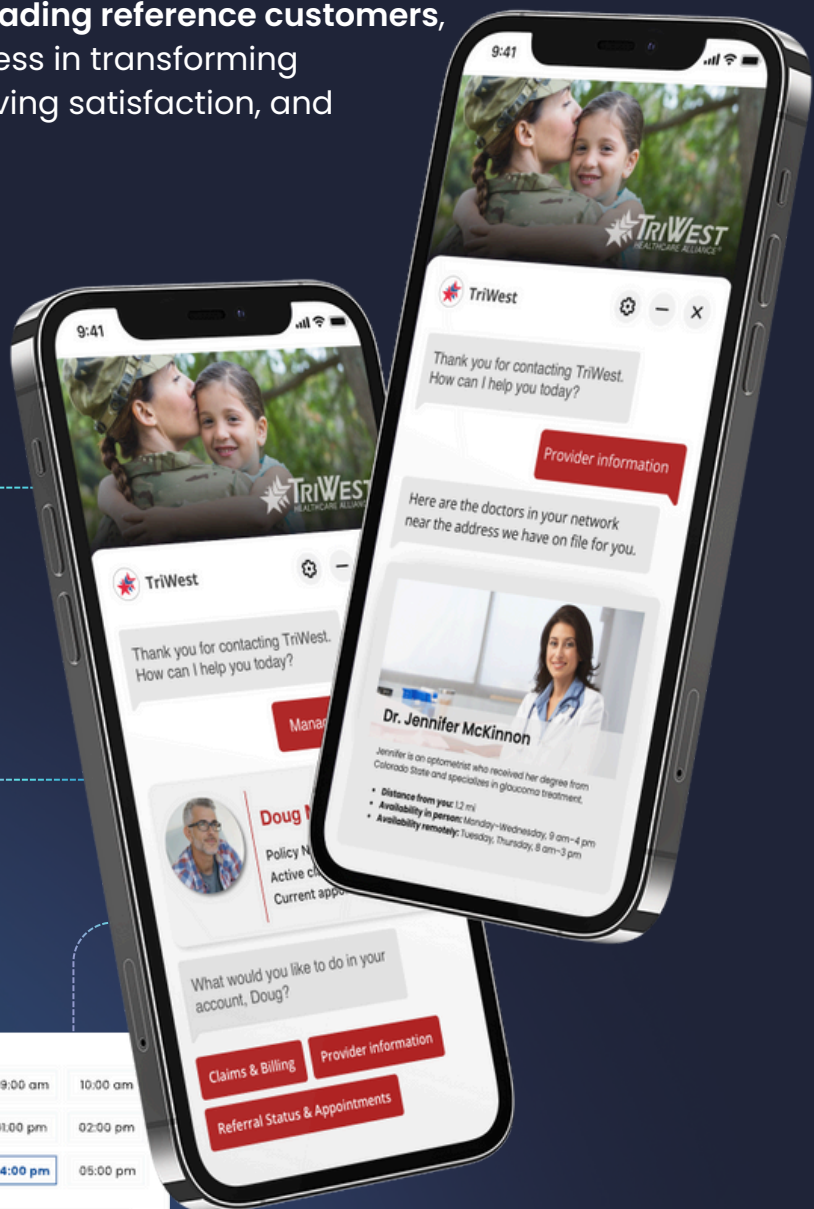
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← September 2024 →

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BOOK NOW



Why Partner with Pypestream?



Accelerate AI Adoption Without Internal Overhead

By integrating Pypestream's Autonomous Intelligence Platform, health insurers can quickly deploy AI-powered solutions without the slow development times and resource constraints of in-house solutions.



Drive Enhanced Value for Insurers and Members

Pypestream helps health insurance companies reduce costs, improve operational efficiency, and provide 24/7 personalized member support across all channels, including chat, voice, and mobile.



Automate Claims and Customer Service Workflows

Use AI microagents to automate common processes like claims handling, billing inquiries, and policy management, freeing up your agents to focus on more complex issues.



Proven Success with Leading Healthcare Providers

TriWest and the VA have already benefitted from Pypestream's AI-powered automation, showing a 30% improvement in claims processing speed and 40% reduction in call center volume.



Seamless Integration

Easily integrates with existing claims management systems, CRM platforms, member portals, and third-party software, allowing for smooth deployment and immediate impact on existing workflows.

How Pypestream Can Help Health Insurers

CLAIMS AUTOMATION

Automate Claims Submission and Claims Processing

Pypestream automates the claims submission and claims verification processes, reducing the time it takes to process claims and improving overall accuracy.

Key Benefits:

- 40% reduction in claims processing time.
- Faster resolution for members with real-time updates and enhanced compliance.
- Increased efficiency for claims adjusters, allowing them to focus on complex cases.



AI- POWERED VIRTUAL ASSISTANTS

Streamline Member Services with AI-Powered Virtual Assistants

Pypestream's virtual assistants provide real-time support for member inquiries, benefit explanations, eligibility checks, and coverage details.

Key Benefits:

- 30% reduction in call center volume and faster service.
- 24/7 personalized support, enhancing member satisfaction and engagement.
- Seamless benefits management, helping members understand and maximize their coverage.

REAL-TIME PROVIDER SUPPORT

Enhance Provider Support with Real-Time Assistance

We automate maintenance requests, vendor communications, and parts procurement, optimizing airline operations at a lower cost.

Key Benefits:

- **Faster Maintenance Turnaround:** Automatically track and resolve issues as they arise.
- **Improved Vendor Relationships:** Automate communication for invoice approvals, procurement, and scheduling.
- **Cost Reduction:** Avoid delays and ensure timely maintenance by automating manual tasks.

How Pypestream Can Help Health Insurers

PERSONALIZATION

Improve Member Engagement with Personalized Outreach

Pypestream's AI-powered microagents automate outreach to members for wellness programs, open enrollment, and personalized health reminders.

Key Benefits:

- 25% increase in program participation and member engagement.
- Real-time notifications for preventive care and wellness activities.
- Better member retention through proactive outreach.

BENEFITS OPTIMIZATION

Optimize Benefits Management and Plan Enrollment

Pypestream automates the benefits enrollment process, guiding members through plan options, coverage selection, and documentation submission.

Key Benefits:

- 30% reduction in enrollment errors and manual administrative tasks.
- Faster member onboarding and benefits enrollment.
- Improved member understanding of plan details and coverage options.

EMPLOYEE SUPPORT

Employee Support Automation

Pypestream automates HR processes for health insurance employees, including payroll inquiries, employee benefits management, and IT support for internal staff.

Key Benefits:

- 30% reduction in HR-related inquiries.
- Faster resolution of IT issues and employee requests.
- Enhanced productivity and reduced internal administrative burden.

PROACTIVE OUTREACH

Proactive Outreach with Microagents

Pypestream uses proactive outreach microagents to send members personalized reminders for annual check-ups, health screenings, and prescription refills. These microagents help reduce missed appointments and improve member health outcomes.

Key Benefits:

- 20% increase in member compliance with wellness programs.
- Reduced healthcare costs through preventative care.
- Enhanced member engagement by keeping them informed and active in their healthcare journey.

Third-Party Software Integrations

Claims
Management
Systems



CRM
Systems



Provider
Networks



Eligibility and
Benefits
Verification



EHR
Systems



Analytics
and Reporting



Integrating with EPIC

Pypestream integrates with EPIC to automate the process of verifying member eligibility and claims status in real-time. This allows health insurers to proactively notify members of claim statuses and eligibility, as well as streamline workflows between insurers and healthcare providers.

Key Benefits:

- Faster claims processing with real-time data exchange between EPIC and claims systems.
- Reduced errors by automating eligibility checks based on up-to-date EPIC records.
- Enhanced member satisfaction with quicker claim resolution and proactive notifications about coverage and benefits.

The Pypestream Advantage

3,000+ Microagents Built:

Tailored to handle specific challenges across health insurance workflows—from claims handling to customer service.

2 Million Problems Solved Monthly:

Scalability that ensures we can handle millions of claims, inquiries, and member interactions for large health insurers.

Seamless Integration

Easily integrates with claims management systems, CRM platforms, member portals, and third-party software like EPIC, ensuring smooth deployment without disrupting existing workflows.

Military-Grade Security:

Fully compliant with HIPAA and other healthcare data protection standards, ensuring the security of member data.

Usage-Based Pricing

Flexible, scalable pricing model, allowing health insurers to pay only for the services they use, ensuring cost-efficiency.



Imagine the Possibilities

By partnering with Pypestream, health insurers can:

- **Automate Claims Processing:** Speed up claims processing while improving accuracy.
- **Enhance Member Support:** Provide 24/7, personalized virtual assistance to members and providers.
- **Optimize Benefits Management:** Simplify enrollment and benefits management for a better member experience.
- **Reduce Operational Costs:** Automate workflows across the organization, reducing overhead and freeing up resources.

Let's Partner for Success

Take the first step in transforming your market. Contact us today to explore how white-labeling Pypestream can unlock new opportunities and revenue streams for your business.

Learn more at Pypestream.com/insurance