MEDX GLOBAL

1 Med-X Global's insurance verification team insures access to the most up-to-date eligibility and benefits data increasing clean claims rates, eliminating costly resubmissions and accelerating reimbursement

2 Abroad patient receives medical treatment in international hospital

3 International hospital sends secure patient invoice and medical records to Med-X

4 Med-X's team properly translates and codes patient's invoice

5 Med-X's in-house legal team and coders review invoices for accuracy

6 Med-X's lawyer's negotiate invoice payment with insurance executives

7 Insurance company sends payment to Med-X

8 Med-X collects on invoice and sends payment to international hospital

INSURANCE VERIFICATION

Before you provide medical care, it's imperative to confirm how a patient will pay for your services. Even if patients are covered by an insurance plan, it's equally vital to verify their insurance eligibility before you provide any treatment. Failing to do so could leave you with an unpaid claim by the insurance company or a patient responsibility that cannot be met. Med-X Global's insurance verification team insures access to the most up-to-date eligibility and benefits data increasing clean claims rates, eliminating costly resubmissions and accelerating reimbursement.

MEDICAL TOURISM

Medical tourism is gaining mainstream acceptance, transforming into a billion-dollar industry attracting both patients and healthcare providers alike. This growing industry is enticing millions of people to travel abroad in search of affordable healthcare and prompting insurance companies to explore the idea of including medical tourism as a part of their coverage. Med-X Global's relationships with insurance companies and their top level executives have paved the way for our clients to be the recipients of these members seeking their care abroad, and ensuring that the attached insurance benefits are delivered and reimbursed appropriately.

CERTIFIED PROFESSIONAL CODERS

Get Paid Faster

Med-X employs a team of experts specializing in hospital claims management. Our staff is composed of CERTIFIED PROFESSIONAL CODERS experienced in international claims management. Med-X's coders are highly trained to meet the intricate world of medical compliance requirements that American insurance and travel assistance companies uphold. The result of such compliance and management expertise is the clean and accurate submission of medical claims on behalf of clients producing higher and faster reimbursements.

MED-X INSURES:

- HIPAA Compliance
- Accurate Itemization of Claims
- Reduction in Billing Errors and Denials
- Expert Billing Compliance
- Increase Revenue Per Claim

REVENUE CYCLE MANAGERS

Hospitals need to do everything in their power to collect and keep as much of their money as possible. Med-X has successfully developed and renegotiating managed care contracts. This is revenue that is available but is lost because management does not have the time or knowledge required to renegotiate their payer contracts. Med- X has the tools necessary to provide you with quantifiable results that directly impact your bottom line.

MED-X REVENUE-CYCLE SERVICES:

- Negotiate provider agreements with European, Canadian, Middle Eastern, Asian, and U.S. insurance carriers
- Handles all claims processing and negotiations
- Handles all contractual negotiations with American and travel insurance companies

INCREASE YOUR HOSPITAL'S REVENUE

Increased Cash Flow Per Claim

Med-X's extensive experience and solid benchmarks from international hospitals promote workflows and action plans that enable clients to consistently optimize hospital revenue. Historically, revenue management efforts such as coding, billing, and collections have garnered the majority of a client's time investment, but have failed to produce substantial improvements. Med-X focuses on these deficiencies, and develops revenue cycle solutions that increases their client's collections.

TARGET AREAS INCLUDE:

- In depth employee training
- Individual claim analysis and follow-up
- Aggressive claims management resulting in 90% collection rate