

AI for Health *Payers.*

Member service, prior authorization, claims attachments, appeals and provider data — instrumented for STARS/HEDIS/CAHPS and CMS-0057-F.

From strategy and pilots to production outcomes.

Genesys Cloud CX

Kore.ai

NICE CXone

Azure OpenAI

Copilot Studio

Core claims platforms

Up to 45%

Containment on claim-status intents

50%

Cycle-time cut on standard appeals

24/7

Member self-service on benefits and claims

2 quarters

To measurable STARS driver lift

What is under pressure today.

Member service, prior authorization, claims attachments, appeals and provider data — instrumented for STARs/HEDIS/CAHPS and CMS-0057-F.

01

Service ratings pressure

STARs, HEDIS and CAHPS all reflect service quality; legacy contact centers are the bottleneck.

02

CMS-0057-F prior auth

API, decision timelines and public reporting requirements now carry compliance exposure.

03

Provider data drift

Directory accuracy is both a compliance risk and a daily provider-abrasion driver.

WHAT GOOD LOOKS LIKE

The outcomes these programs are measured on.

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To measurable STARs driver lift

Ranges reflect outcomes observed across Pronix engagements. Your baseline is measured from your own data in the first two weeks, and every figure we report afterwards is a movement against that baseline.

Our position. We do not open with a percentage promise. We baseline the workflow, instrument it, ship one use case into production and report the delta — before anyone commits to a rollout.

DELIVERED ON YOUR STACK

Certified across the platforms this sector already runs.

**Genesys Cloud CX****Kore.ai****NICE CXone****Azure OpenAI****Copilot Studio****Core claims platforms**

We do not ask you to re-platform to adopt AI. Where a capability is already licensed in your estate, we configure it before we build anything new.

The workflows we deliver.

Named workflows with the delivery platform behind each — every one live in production for enterprises in this sector, with an evaluation harness and audit trail from day one.

kore.ai GENESYS + KORE.AI

Claims-status IVA with member auth

Knowledge-grounded responses on benefits, EOB and denial reasons behind secure member auth.

AZURE OPENAI + COPILOT STUDIO

Prior authorization automation

End-to-end intake and decision support with clinical review, aligned to CMS-0057-F timelines.

AZURE OPENAI

Appeals and grievances drafting agent

Assembles case timeline, cites policy and drafts the decision letter for reviewer approval.

AZURE OPENAI IDP

Claims attachment intake

Extracts fields from op notes, EOBs and itemized bills, aligns to the claim, flags missing data.

NICE NICE ENLIGHTEN

Conversation analytics for STARS and CAHPS

Topic models surface rating drivers and coaching moments across member conversations.

AZURE OPENAI

Provider-data maintenance automation

Continuous directory validation, roster automation and network adequacy checks.

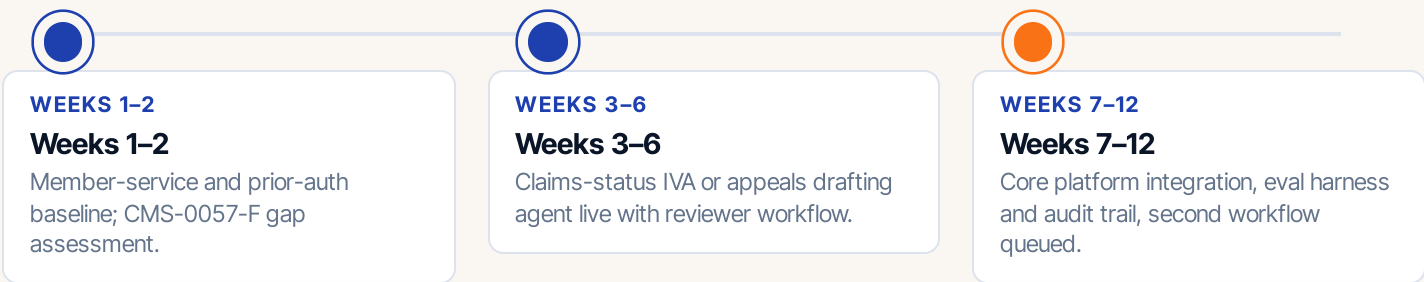
Governance built into delivery, not bolted on afterwards. PHI-aware guardrails, model registry and red-teaming, human review on all coverage-affecting decisions, exam-ready evidence per model version.

How the first workflow reaches production.

A sequenced 90-day plan, an engagement model that matches how you want to buy, and the evidence pack a steering committee needs to fund the next wave.

THE FIRST 90 DAYS

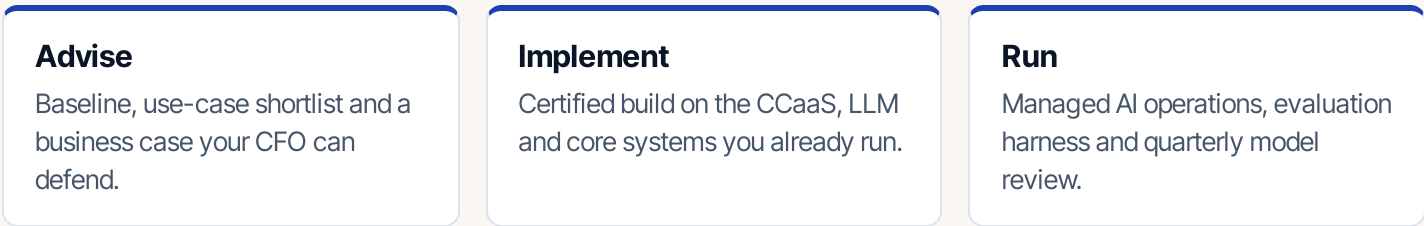
One workflow in production, measured against baseline.



Shadow mode, then A/B by team, then production — with guardrails agreed before build and no SLA movement without evidence.

HOW WE ENGAGE

Three engagement models, one accountable partner.



Outcomes our clients audited.

Selected engagements in this sector — the baseline, what we shipped and the measured result.

CASE STUDY · HEALTH PAYERS

Cutting claim-triage cycle time by 62% at a top-5 US health insurer

Top-5 US health insurer

AMAZON BEDROCK

KORE.AI

SALESFORCE HEALTH CLOUD

Claim-triage was a 7-step human workflow averaging 11 minutes per case, with 22-day backlogs during open enrollment and \$18M/year in avoidable adjudication cost. Prior copilot rollouts had moved the needle by ~9% — nowhere near what was needed.

- Bounded the agent to one intent
- Two-provider routing on Bedrock
- Built the tool layer on existing systems
- HITL as a first-class surface



“pronix.ai treated our regulator like a stakeholder from day one. That is why this shipped — and why it stayed shipped.”

— VP Claims Operations

CASE STUDY · HEALTH PAYERS

46% member-services deflection for a Medicare Advantage payer — CMS-safe agentic AI

Regional Medicare Advantage payer, 1.2M members

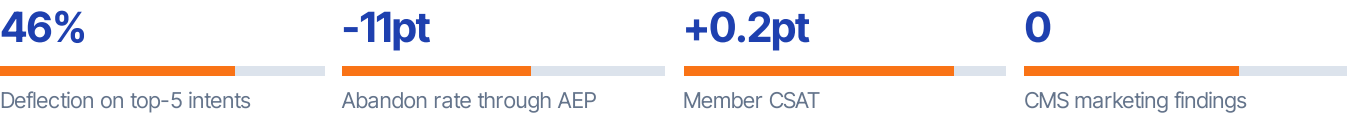
SALESFORCE AGENTFORCE

SALESFORCE HEALTH CLOUD

AMAZON CONNECT

AEP week-one call volume was 4.2x steady state and abandon rates were pushing 18%. Any assistant had to respect CMS marketing rules, never quote plan pricing outside the sanctioned language, and route anything clinical to a licensed agent.

- CMS-safe intent boundary
- Voice + web from day one
- Health Cloud grounded answers
- AEP surge playbook



“AEP week one used to be the worst week of our year. This year the queue held — and members got answers at 10pm.”

— VP Member Services

Where to start.

Start with one workflow. Prove it against baseline. Then scale.

01

Baseline workshop

Two sessions to size volume, cost-to-serve and the quality baseline we will be measured against.

02

Pilot in six weeks

One workflow live in shadow mode, then A/B, with the evaluation harness in place from day one.

03

Scale and operate

Production rollout, integration hardening and managed AI operations against agreed SLAs.

WHAT YOU GET IN THE FIRST 90 DAYS

One workflow live in production

Baseline and measured delta

Evaluation harness and audit trail

Rollout plan costed by line of business

PRONIX AT A GLANCE

200+

Certified engineers & architects

15+

Average years of enterprise delivery experience

9

Named CCaaS/CX, Conversational AI & Cloud partnerships

100+

Enterprise Clients Worldwide

3

Global delivery regions

24x7

Managed operations across three regions

NEXT STEP

Model the business case before you commit.

Run the sector ROI model, or book a working session with the practitioners who ship these programs.

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