ZAAX CONSULTING | Since 1994

ENTERPRISE HEALTHCARE PLATFORM

Health Insurance Claims Processing Software

For TPAs, HMOs & Insurers

95%+ Auto-Adjudication, AI Fraud Prevention, Multi-Country Compliance

ZAAX Consulting provides enterprise-grade Health Insurance Claims Processing Software designed specifically for Third Party Administrators (TPAs), Health Maintenance Organizations (HMOs), and health insurance companies. Our platform enables end-to-end management of health insurance operations with high automation, regulatory compliance, and real-time control across India, UAE, and Saudi Arabia.

95%+	400M+	30+	3
Claim Auto-Adjudication Rate	Claims Processed	Years of TPA Heritage	Global Regulatory Regimes

BUILT FOR MULTI-COUNTRY REGULATORY ENVIRONMENTS

- HAAD / DOH / Shafafiya (Abu Dhabi)
- DHA (Dubai)
- CHI (Saudi Arabia)
- Indian TPA Regulations

See it in action

Schedule a technical demonstration with ZAAX Consulting.

Request a Demo

THE CHALLENGE

Why Health Insurance Companies Need Specialized Claims Processing Software

Health insurance is one of the fastest-growing sectors in India and the Middle East. Modern TPAs and HMOs require software that can handle high claim volumes, enforce medical necessity rules, prevent leakage, and remain fully compliant with regional regulations such as HAAD, DOH, Shafafiya (Abu Dhabi), DHA (Dubai), and CHI (KSA).

Regulatory Compliance

Built for HAAD, DOH, DHA, Shafafiya & CHI KSA — full regional compliance out of the box.

High-Volume Automation

95%+ auto-adjudication reduces manual review overhead and accelerates claim turnaround.

Fraud & Leakage Prevention

400M+ claims processed with AI-powered fraud detection and dynamic rule hierarchies.

Key Capabilities of Health Insurance Claims Processing Software

Integrating specialized intelligent decision-making logic natively within both authorization and final claim workflows.

Advanced Pre-Auth Audit Engine

Instantly cross-references patient clinical charts, medical necessity documentation, and itemized provider estimates to intercept operational leakage before it registers on the ledger.

- Flag diagnostic mismatches automatically
- Stop provider price over-estimation
- Reading scanned PDF documents in any language
- Validating ICD codes, CPT codes, and ICD PCS codes for medical compatibility

Intelligent Post-Discharge Claim Audit Engine

Autonomous multi-point checks across complex clinical notes and final hospital billing files to catch ledger discrepancies and line-item billing leakage in seconds.

- Ironclad Reconciliation Determinations
- Analyze Discharge Summaries in Seconds

PLATFORM AT A GLANCE

Proven at Scale

Three decades of processing the world's most complex health insurance claims — now powered by production-grade AI.

95%+	400M+	30+	3
Claim Auto-Adjudication Rate	Claims Processed	Years of TPA Heritage	Global Regulatory Regimes

AI BILL PROCESSING

AI Itemized Hospital Bill Processing

Hospital claims frequently contain hundreds of billing entries. Our software structures and evaluates itemized bills using AI extraction and deterministic adjudication rules.

Line-Item Validation

Evaluate Room, ICU, Surgery & Pharmacy against tariffs, negotiated rates, and policy limits automatically.

Exception Detection

Detect duplicate billing items, package violations, quantity limits, and tariff mismatches in real-time.

Standard Treatment Workflow Validation

Evaluate whether the treatment submitted with an authorization or claim is consistent with the diagnosis and expected treatment pathway:

THE CLINICAL CHAIN



Potential deviations are highlighted for medical review, helping identify unnecessary investigations or unusual treatment sequences.

Regulatory Compliance

The platform is built for multi-country regulatory environments and currently supports:

HAAD / DOH / Shafafiya

Abu Dhabi

DHA

Dubai

CHI

Saudi Arabia (KSA)

Indian TPA Regulations

India

Who Is This Software For?

- Third Party Administrators (TPAs)
- Health Maintenance Organizations (HMOs)
- Health Insurance Companies
- Insurance Brokers
- Healthcare Providers & Hospital Networks
- Re-Insurers
- Corporate Group Health Administrators

CORE PLATFORM

Core Platform Capabilities

Rules-driven claim processing, AI document intelligence, and full regulatory compliance.

1. **95%+ Automated Claim Processing**
   Rules-driven auto-adjudication with predictive intelligence
2. **AI-Powered Claim Documents Reader**
   Extracts data from unstructured hospital documents
3. **AI Fraud Prevention**
   Over 400 million processing and fraud detection rules
4. **Real-time Pre-Authorization & Claims Audit**
   Instant cross-referencing of clinical charts and medical necessity
5. **Electronic Data Interchange (EDI)**
   For approvals and claims with provider networks
6. **Network Hospital & Tariff Management**
   Granular hospital contract, fee schedule, and copay control
7. **Capitation Module**
   For TPA/HMO operations and provider payments
8. **Policy Management & Underwriting**
   Complete ecosystem for insurers, brokers, and corporates
9. **Claims Intimation & Authorization**
   End-to-end claim lifecycle management
10. **Audit Trail & Document Management**
    Persistent cryptographic audit trails on every transaction
11. **Finance & Accounts Module**
    Integrated ledger matching and financial reporting
12. **CRM for Insured Persons**
    Member portal with real-time status and history
13. **Performance & TAT Monitoring Dashboard**
    Real-time operational visibility and SLA tracking
14. **Corporate & Broker Management**
    Multi-channel partner and corporate administration
15. **MIS & Comprehensive Reporting**
    Regulatory and business intelligence reports
16. **AI-Powered Email Engine**
    Automated correspondence and notification workflows

MODULE LIST

Complete Module List

Every module of the platform — from underwriting and claims to AI engines, finance, and multi-channel notifications.

Underwriting	Policy, Insurer, Policy Collection, Data Entry & Verification
Complete Ecosystem	Insurers, Brokers, Providers, Re-Insurers and Corporates
Health Cards & Records	Digital health cards and member records management
Claims Process	Claim Intimation, Claim Authorization workflows
95%+ Auto-Processing	Rules-driven autonomous claim adjudication
ML & AI Engines	Machine learning and artificial intelligence modules
AI Document Reader	Intelligent extraction from hospital documents
AI Fraud Prevention	400M+ claim/auth processing and fraud rules
AI Email Engine	Automated correspondence and notifications
Network Hospital & Tariff	Hospital contract and fee schedule management
Audit Trail	Cryptographic audit trails on every transaction
Accounts / Finance	Integrated financial accounting and ledger
CRM for Insured	Member-facing portal with case tracking
MIS Reports	Insurance, Float, Premium, Claims analytics
Document Management	Full lifecycle document control
Workflow Management	Configurable business process workflows
Grievance System	Complaint and dispute resolution tracking
Trouble Ticket System	Issue tracking and resolution management
Electronic Data Interchange	EDI for approvals and claims
Capitation Module	TPA/HMO provider payment management
Corporate Management	Corporate customer administration
Correspondence Management	Automated letters, emails, and notifications
Performance & TAT	SLA and turnaround time monitoring
Executive Dashboard	Task push features and real-time metrics
Investigation Management	Case investigation and fraud analysis
Multi-Channel Notifications	Auto SMS, WhatsApp, Email alerts

TECHNICAL ARCHITECTURE

Technical Architecture

Modular MVC Architecture
Stable, maintainable codebase using template engine patterns

Multi-Database Support
Oracle, SQL Server, MySQL — platform independent

Enterprise Security
Role-based access, audit trails, data privacy protocols

High Scalability
Designed for high-volume claim processing workloads

Cloud & On-Premise
Deployable on AWS, Azure, GCP, Oracle Cloud or on-premise

API-First Design
REST, SOAP, GraphQL for seamless integrations

ASSURE TECH PRO

Frequently Asked Questions

1. **What is Assure Tech Pro?**
Assure Tech Pro is an AI-powered health insurance administration and claims processing platform for TPAs, HMOs, insurers, and other healthcare payers. It combines policy administration, pre-authorization, claims adjudication, provider management, AI document processing, medical validation, fraud controls, accounting, CRM, and reporting.

2. **How does AI automate health insurance claims?**
AI can extract information from claim documents and hospital bills and convert unstructured medical information into structured claim data. Assure Tech Pro then applies configured policy, benefit, tariff, medical, fraud, and adjudication rules to process eligible cases and route exceptions for human review.

3. **Can Assure Tech Pro read authorization PDFs?**
Yes. Its AI-assisted document processing can extract member, provider, diagnosis, procedure, and other relevant information from authorization documents. Extracted information can then be matched against member, policy, provider, and benefit records.

4. **Can AI read claims PDFs?**
Yes. Assure Tech Pro can extract structured information from claim PDFs and associated medical documents, including member and provider information, diagnosis and procedure information, dates, charges, and relevant medical coding where available.

5. **Does Assure Tech Pro support ICD and CPT validation?**
The platform can use ICD diagnosis and CPT procedure information, together with other supported coding systems such as CDT and ICD-PCS where applicable, to perform configured medical and claims validation checks.

6. **Can AI calculate health insurance claim payability?**
Assure Tech Pro combines extracted claim information with policy benefits, exclusions, limits, tariffs, deductibles, copayments, authorization information, and configured adjudication rules to calculate applicable payable and non-payable amounts.

7 Can Assure Tech Pro analyze itemized hospital bills?
Yes. Hospital bill items can be extracted and categorized and then evaluated against provider tariffs, packages, policy benefits, quantities, deductibles, copayments, and other configured rules.

8 Can the platform validate hospitalization length of stay?
Yes. Configurable hospitalization rules can use diagnosis and other clinical information to establish expected or authorized length-of-stay parameters. Cases exceeding those parameters can be flagged for medical review.

9 How does Assure Tech Pro detect health insurance fraud?
The platform can apply configurable fraud, utilization, medical, billing, tariff, duplicate, and historical rules to identify potentially abnormal claims. Suspicious cases can be escalated to audit or investigation teams rather than being automatically treated as fraudulent.

10 Does Assure Tech Pro include a WhatsApp bot?
The platform can integrate with an AI-powered WhatsApp assistant that allows authenticated members to access supported information such as claims, authorizations, benefits, medication history, pharmacy/provider information, and other member services.

11 Does AI automatically reject claims?
Not necessarily. Assure Tech Pro supports human-in-the-loop workflows. Claims that fail configured rules can be routed to claims processors, doctors, auditors, investigators, or supervisors for further review.

12 Is Assure Tech Pro suitable for TPAs?
Yes. The platform covers core TPA operations including member management, provider networks, pre-authorizations, claims, medical adjudication, tariffs, capitation, finance, CRM, grievances, reporting, and regulatory workflows.

13 Is Assure Tech Pro suitable for HMOs?
Yes. HMOs can use the platform for member administration, provider network management, authorization, claims processing, capitation, utilization management, customer service, and financial operations.

14 Can Assure Tech Pro integrate with an existing insurance system?
Yes. Its API-driven architecture is designed to support integration with insurer, broker, hospital, provider, mobile, portal, payment, and other approved third-party systems.

15 Which countries does Assure Tech Pro support?
Assure Tech Pro is designed for health insurance operations across markets including India, the UAE, and Saudi Arabia, with country-specific workflows and configurable regulatory integrations.

16 Can Assure Tech Pro be deployed on-premise?
Yes. Depending on the implementation architecture, the platform can support cloud, private-cloud, on-premise, and hybrid deployment models.

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SCHEDULE A TECHNICAL DEMONSTRATION

Ready to Transform Your Claims Operations?

Looking for reliable Health Insurance Claims Processing Software that combines deep domain expertise with modern AI capabilities? Contact ZAAX Consulting to schedule a technical demonstration and discuss deployment options.

Request a Demo | **View Assure Tech Pro** | **Review Technical Portfolio**

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