Keep Seniors In-Network.
Improve Outcomes.
Strengthen Revenue.

Each year, Medicare plan changes are challenging for patients and health systems alike, but they don't have to be. With Healthpilot, Medicare transitions become an opportunity to reduce patient leakage, protect continuity of care, and drive better revenue performance. We help patients choose coverage that fits their health needs while keeping them connected to the health system and providers they trust.

How Healthpilot Helps

Healthpilot provides unbiased, patient-first Medicare guidance that supports both patients and providers.

Protect & Grow Revenue

Healhpilot enables health systems to **grow accounts receivable revenue by 5%**[1] by aligning patients to plans that support in-network care.

Enhance Patient Experience

Nearly 90% of seniors are in the wrong Medicare plan[2]. Partnering with Healthpilot enables health systems to act as a trusted Medicare advisor: guiding patients to coverage that preserves trusted patient-provider relationships, reduces delayed or deferred care, and delivers an **average patient savings of $1,052 annually**[3].

Improve Patient Outcomes

Healthpilot recommends the most cost-effective prescription coverage options, which can **improve patient medication adherence 5-15%**[4].

Reduce Provider Burnout & Admin Costs

89% of physicians say lengthy claims processes cause burnout[5]. By keeping members in network, Healthpilot helps reduce out-of-network claim denials and can **save health systems an average of $48 in administrative costs per denied claim**[6] - freeing up time and helping alleviate provider burden.

Getting Started

We work directly with your team to provide your patients access to personalized plan recommendations across Medicare Advantage, Medigap, and Prescription Drug Plans, with ~70% supply nationwide.

Partnering is simple:

Contact our team partnerships@healthpilot.com

Healthpilot®

**Keep patients connected
Support better care
Build better relationships**

1. https://www.techtarget.com/revcyclemanagement/news/366600189/Medicare-Advantage-Denials-Jump-56-Commercial-Denials-20
2. https://www.nber.org/system/files/working_papers/w27038/w27038.pdf
3. https://cs-qa.healthpilot.com/study/cost-savings/
4. https://www.aha.org/education-events/sing-data-retain-patients-your-network-improved-quality-care
5. https://www.ajmc.com/view/ama-survey-highlights-growing-burden-of-prior-authorization-on-physicians-patients
6. https://www.fiercehealthcare.com/providers/providers-wasted-106b-2022-overturning-claims-denials-survey-finds