

2019

AED 5,000,000 Paid-up Capital

# IRIS HEALTH SERVICES LLC

## COMPANY PROFILE



HEALTH SERVICES

*You Matter.*

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## IRIS HEALTH SERVICES LLC OVERVIEW

**IRIS HEALTH SERVICES LLC**, is a registered company providing professional medical benefit and claims administration services. With a paid-up capital of AED 5 Million and a turnover of USD 22 Million, IRIS has had tremendous growth and recognition since it commenced its operations in late 2014 and currently services over 350,000 insured members in UAE only.

Apart from its head office in Dubai, **IRIS** also has a registered offices in Abu Dhabi and Muscat, Oman.

**IRIS HEALTH SERVICES** with the strength of its team, experience and expertise provides an unparalleled end to end claims management solution. Our team of over 80 multinational professionals ensure that it's not just about claims processing but rather about managing medical claims.

Our cutting edge software platform fundamentally changes the dynamics of managing medical portfolios. As a result, our Clients benefit from many features that provide unparalleled efficiency that includes managing your medical claims, trend analysis and monitoring for fraud.

We assist:

- Insurers exploring ways to more efficiently service their medical products;
- Reinsurers seeking markets for new product lines
- Organizations seeking to control insurance costs through self-funding; and
- Companies striving to enhance their current self-funding plan through more effective administration and further cost containment measures.
- Organisations seeking to review and audit claims on an independent basis

Ezyclaim, the online claims knowledge management suite gives our services total transparency, allowing our Clients monitor and review performance of the schemes.

We are the piece in the healthcare insurance industry puzzle that brings together medical service providers, policy holders, and insurance companies and self-funded organizations to function under a mutually beneficial umbrella.

As an **ISO 9001:2008** certified company, our quality policy is "Quality through operational excellence, team work and efficiency."

Our service offerings reach beyond mere provision of administrative support for healthcare products and are enhanced by support in health insurance product design, medical risk evaluation, medical management, medical service provider panel (network) management, training and consulting services.

- **Professional medical benefit and claims administration**
- **Experienced management team**
- **Individualized approach to each Client**
- **Help control insurance costs**
- **Fraud and abuse Protection**
- **Provide cost effective solutions**

With sister companies in India and Singapore that service over 600,000 members, IRIS draws on the experiences of the group to enhance proficiency in its service.



We are **ISO 27001:2013** thereby conforming to the highest standards of information security, data security and patient health information confidentiality.

IRIS has also received the Committee on Operating Rules for Information Exchange (CORE®) **PHASE I, II, III & IV** Endorser Seal, demonstrating its commitment to streamlining electronic healthcare administrative data exchange.

In recognition of our standards of service, **IRIS HEALTH SERVICES LLC** has received the “Most Innovative Service Provider” at the MENAIR Insurance Awards, 2018 and the “Most Innovative Insurance Claims Software, UAE” from International Financial Magazine.

Iris provides medical third party and audit services to a list of prestigious clientele in the UAE including

- Oman Insurance Company
- RAK Insurance Company
- Abu Dhabi National Insurance Company
- Al Fujairah Insurance Company
- Dubai Islamic Insurance & Reinsurance Company (AMAN)
- Union Insurance Company

Apart from these Insurers, Iris works with leading reinsurers including syndicates at Lloyd’s of London and Peak Reinsurance Company.

Iris through its specialized arm has provided Medical Claims Financial Audit Services to the Lloyd’s of London.

## Our Mission

To be the **preferred Claims Management Partner** in the GCC through innovation and exceptional service.

In a market where health insurance penetration and medical needs are both consistently increasing, we provide specialized health insurance administration and management services which protect the interests of the risk carriers while facilitating access to quality healthcare with no compromise on the quality of care.

Customer service is the key to our operations. Our customers and clients include insurance companies, reinsurance companies, self-insured clients, medical service providers and insureds alike. We ensure that all members of the health insurance ecosystem are handled with utmost care and understanding.



We also make the difference when it comes to providing know how to the insurance companies or self-funding schemes in terms of defining the methodology of designing, protecting and underwriting, distributing and managing healthcare schemes utilizing our team's versatile experience in health insurance TPA industry.

Our main ethos is to create value for our customers and clients and provide extraordinary services that stand out from amongst the rest.

## Our Vision

We intend to provide quality medical insurance administration services with a focus on innovation and customer satisfaction thereby allowing ourselves to become the preferred choice to Insurance Companies, Reinsurance Companies, Insureds and Medical Service providers.

## Our Claim Philosophy

To provide prompt and efficient claims management services through innovative technology and to promote and ensure a mutually beneficial business relationship with clients and partners.

## Innovation in Service Delivery

IRIS Health Services is a company that is focused on innovation in service delivery.

IRIS is the first company in the medical insurance space to provide real time patient and claim tracking at Medical Service Providers through its smart platform called ‘Ezyclaim’. The platform monitors provider performance through real-time waiting time tracking and reviews.

To the Physician, IRIS Health offers **Physician Support Engine** which assists treating physicians in assigning the appropriate ICD codes.

Apart from this, IRIS has been recognized for being the **first to introduce the National ID of the United Arab Emirates, the Emirates ID** as the default medical Insurance card. All service delivery is facilitated through a valid National ID.

The **Customer Service Centre** of IRIS is an independent unit that focuses on the different aspects of service delivery from three perspectives and through three units

- Patient Voice – the independent team that obtains patient feedback and monitors quality of service rendered
- Provider Engagement – a team independent of the network department that focuses on Provider experience in its relationship with IRIS
- Cost Containment Unit – this team focuses on maximizing savings for Insurers, reinsurers and self insured corporates without any compromise in the quality of care rendered to beneficiaries.



Iris Health Services has been recognized in the insurance industry having received the “**Most Innovative Service Provider**” Award at the MENAIR Insurance Awards, 2018 and the “Most Innovative Insurance Claims Software, 2018” from International Finance Awards.



## Our Value Proposition

For Insureds	<ul style="list-style-type: none"> <li>• One stop shop</li> <li>• Excellent customer service and capacity for high quality administration</li> <li>• Wide provider network</li> <li>• Strong financial backing through local and international partners</li> </ul>
For Insurers and Reinsurers	<ul style="list-style-type: none"> <li>• Excellent customer service and capacity for high quality administration</li> <li>• Wide provider network</li> <li>• Cost containment and risk mitigation</li> <li>• Audit Services</li> </ul>
For Providers	<ul style="list-style-type: none"> <li>• Training of medical staff on all health insurance plans and processes on admission</li> <li>• Reduce wait time with a fast internal authorization unit</li> <li>• Increasing public health awareness</li> <li>• Increasing the volume of patients, hence generating more revenue for the providers</li> <li>• Short claim submission-payment cycle</li> </ul>



## Key Success Factors

The pillars of our success can be attributed to the factors mentioned below

Health Care Provider Relations	<ul style="list-style-type: none"><li>• Experience and skill in managing providers relations</li><li>• Offering reliable services to healthcare providers</li><li>• Negotiations under way with major recognized hospitals, clinics, pharmacies and laboratories.</li></ul>
Customer Service	<ul style="list-style-type: none"><li>• Providing quality and reliable services to customers, especially in the fields of 24/7call centre, fast turnaround time and consistency in administration</li></ul>
Operational Excellence	<ul style="list-style-type: none"><li>• Know How and hub logistics.</li><li>• Specialization in all matters of Health Insurance Management including policy administration services, claims handling and processing, portfolio analysis, trend analysis, claims auditing, fraud and abuse detection and handling</li></ul>
Management	<ul style="list-style-type: none"><li>• The Management Team represents an aggregation of almost 60 years of experience in Health Insurance, TPA services, financial service and management. Moreover, at Iris Health Services LLC , we encourage a culture of diversity. Therefore, Iris Health LLC is composed of individuals from different nationalities enabling accommodation with any kind of environment, especially in the GCC/MENA region, with all the mixture of cultures.</li></ul>
Technology	<ul style="list-style-type: none"><li>• Iris Health Services LLC's information system delivers a cost-effective electronic solution to healthcare schemes, streamlining processes and ensuring competitiveness and profitability. Relying on Internet communication technology, all players are trained and connected to communicate, exchange information and perform transactions on-line with ultimate efficiency and transparency.</li></ul>



## Key Performance Indicators

The following represents the key performance indicators for Iris Health Services

- End Consumer (groups and/or individuals) satisfaction
- Developing Quality Standards for the delivery of services
- Protecting the interests of the risk carriers (insurers, reinsurers and self-insured organizations) through claims management processes and audits
- Minimize insurance abuse and identify, flag and report cases of insurance fraud
- Provide adequate training and support to all members of the Iris Health Services team to ensure quality of service and confidentiality of data
- Enhancing Staff Skills in dealing with Stakeholders
- Creating an organizational environment that maintains high motivation, productivity and performance among employees

## Management Team

### **FAREED LUTFI, CHAIRMAN OF THE BOARD**

Mr. Lutfi is the Secretary General, Emirates Insurance Association and Secretary General of Gulf Insurance Association . He was earlier the Group Director, Insurance Services, Dubai Holdings and one of the best-known insurance personalities in the GCC.

He previously served as General Advisor of Dubai Islamic Insurance and Reinsurance Co. and was the Chief Executive Officer of Alliance Insurance, Dubai. Mr. Lutfi was a Founder Board Member and Advisor of Dubai International Financial Centre across the spectrum of insurance and reinsurance issues.

He was a Member of the finance working group for the Dubai United Kingdom Trade and Economic Committee (DUKTEC).

Mr. Lutfi continues to work tirelessly as a powerful lobbyist for the cause of insurance and correct insurance practice across the UAE and the GCC.



### **MRS. LAILA AL JASSMI**

#### **BOARD MEMBER**

Ms Laila is the former CEO of Health Policy and Strategy sector at Dubai Health Authority (DHA). She was responsible for the development of the policy and legislation for the health system in the Emirate of Dubai driven from Dubai Strategic Plan (DSP) 2015 . She oversaw the implementation of the DHA Health strategy and conducted sector planning and forecasting. This was to ensure that Dubai develops a world class healthcare system.

She has extensive knowledge of the healthcare systems, Health reforms, strategic direction, planning and delivery of healthcare services. She was leading the process of the Dubai health reform that took place in 2007.

Laila has lead the Dubai medical tourism initiative which was started in 2012 to place Dubai in the world health tourism map.

Laila is a graduate from the College of Allied Health Science and Nursing in Kuwait University and in 2007 secured her Masters in Executive Healthcare Administration from Zayed University. She is a graduate of Sheikh Mohammed Bin Rashid leadership program 2003.

She has been awarded certificates of appreciation including the Dubai Government Excellence Award (distinguished employee in 2009) and the Sheikh Rashid Award for Scientific Outstanding (2008). She was also awarded the Feigenbaum Excellence Leadership Award for Women's leaders in 2011.



**ANIL NAIR, MBA****CHIEF EXECUTIVE OFFICER & BOARD MEMBER**

Anil Nair is a savvy operations leader and majority shareholder of the company with an indelible reputation for delivering inventive business strategies and client-focused solutions that improve margins. Anil has over two decades of hands on experience gained from variety of industries including insurance, education and service industries. Recognized for transforming global operation systems profitably and productively.

His entrepreneurial spirit has enabled him to lead companies from start up to profitability. He mobilizes top-tier talent to create high performing cultures that consistently achieve in volatile markets.

He has over 10 years of experience in the UAE insurance sector in multiple areas such as managed care services, IT service provision, consultancy services to insurers, reinsurers and TPAs, audit services to risk carriers including Lloyd's of London.



**DR. ANN JACOB, MBBS, Dip CII (Claims), ANZIIF (Snr Assoc) CIP, Cert CII (Health & Protection), DIA, DHP, HIA, CMTF**

**CHIEF OPERATING OFFICER & BOARD MEMBER**

Ann Jacob is a qualified medical doctor with clinical experience in India and the United Kingdom. She has over 10 years of experience in the Middle East and International insurance market. She is a qualified insurance professional with a specialization in claims handling. She is also a significant shareholder in the company.

Ann's areas of expertise include underwriting and claims management. She is a member of the Chartered Institute of Insurers. Her designations also include Disability Income Associate, Disability Healthcare Professional and Health Insurance Associate from USA.

She has the distinction of being one of the few members certified by the Medical Tourism Association(U.S.A) for the region of Middle East and North Africa.

