

Healthcare BPO Market by Payer Services (Claims Management Services [Claims Adjudication Services, Claims Settlement Services, Information Management Services, Claims Repricing, Claims Investigation Services, Claims Indexing Services, Fraud Detection and Management], Integrated Front Office and Back Office Operations, Member Management, Product Development and Business Acquisition Services, Provider Management Services, Care Management, Billing and Accounts Management Services,), Provider Services (Revenue Cycle Management, Patient Enrolment, Patient Care (Medical Transcription and Device Monitoring), and Others), and Pharmaceutical Services (Research & Development, Manufacturing, Non-Clinical Services [Supply Chain Management & Logistics and Sales and Marketing Services],) Forecast till 2032

Market Reprt | 2025-01-07 | 171 pages | Market Research Future

To place an Order with Scotts International:

- ☐ - Print this form
- ☐ - Complete the relevant blank fields and sign
- ☐ - Send as a scanned email to support@scotts-international.com

ORDER FORM:

Select license	License	Price
	Single User Price	\$4950.00
	Enterprisewide Price	\$7250.00

Scotts International. EU Vat number: PL 6772247784

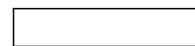
tel. 0048 603 394 346 e-mail: support@scotts-international.com

www.scotts-international.com

Scotts International. EU Vat number: PL 6772247784

tel. 0048 603 394 346 e-mail: support@scotts-international.com

www.scotts-international.com



Scotts International. EU Vat number: PL 6772247784

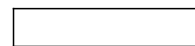
tel. 0048 603 394 346 e-mail: support@scotts-international.com

www.scotts-international.com

Scotts International. EU Vat number: PL 6772247784

tel. 0048 603 394 346 e-mail: support@scotts-international.com

www.scotts-international.com



*Please circle the relevant license option. For any questions please contact support@scotts-international.com or 0048 603 394 346.
☐** VAT will be added at 23% for Polish based companies, individuals and EU based companies who are unable to provide a valid EU Vat Numbers.

Email*		Phone*	
First Name*		Last Name*	
Job title*			
Company Name*		EU Vat / Tax ID / NIP number*	
Address*		City*	
Zip Code*		Country*	
		Date	2026-02-17
		Signature	