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## **Q&A with Michael Swartz, President of MediXall Group Inc. providing a revolutionary Healthcare Marketplace for People with High Deductibles and Uninsured People Paying out of Pocket enabling them to Search and Find for Medical Service where they Live, see the Price, Reviews and then Book and Pay all on One Platform**

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**CEOCFO: *Mr. Swartz, what is the concept behind MediXall™ Group Inc?***

**Mr. Swartz:** The concept is a healthcare marketplace for people that have high deductibles or are uninsured or they have been paying out of pocket to search for a medical service, see all the options around where they live or whatever zip code they want to look for, see the price, see reviews and then book and pay for the service all on the platform. We kind of think of it as “Expedia for healthcare”. The same process you pay booking a flight or a hotel, you would pay booking an MRI.

**CEOCFO: *Are most people ready for that less personal encounter with healthcare? Are people moving away from wanting their own doctor?***

**Mr. Swartz:** It is almost two-fold. On one side consumers/patients; they are now thinking about price. Where five years ago someone would go to the doctor and they would not have any idea or not even care what the price was because they were not the customer of healthcare, fast forward the past couple of years and you get higher and higher deductibles. Now people are paying out of pocket and that has made them transition from almost the third party, not the ones getting to service, to them now being the customer of healthcare. Therefore, they are acting more as a consumer. However, they have no avenue to shop around. In terms of “Are people ready to shop around”, they need to be educated that they can shop around. That is why we have been working with providers or doctors to have them be the one to hand-hold their patient to educate them on how to shop around. With MRI, CT Scan, physical therapy; all these prescriptions or referral-based services, we are bringing in the doctors to have them send their patients to MediXall.com whenever they are concerned about price. It gives a way for the consumer who might not know that they can shop around to actually have that bid and have that guide. We have been using doctors. In terms of the personal aspect, I think that in the end it is personal because you are meeting with that doctor. This is not telemedicine, you are not on the phone or on a video. What you are doing is simplifying and creating a more seamless experience to reserve that appointment. It is the same concept that before Travelocity or before Expedia people would call their travel agent to book a flight; call the airlines to book a flight or the hotel to book their hotel room. Then Travelocity came out and Expedia and Price Line and all of these different things and nobody ever looked back. It was not the end result, but just a better way to go about getting to that result.

**CEOCFO: *How have you put together the providers of the various services you offer?***

**Mr. Swartz:** Initially, we did a controlled launch of the platform in March 2018, this year. We really focused on getting as many different specialties as we could in the South Florida area test market. We were focusing on chiropractors and internal medicine and imaging; anything we could get our hands on and signed up about three hundred fifty to four

hundred doctors in different specialties to a thirty-page agreement. We were getting their pricing and services and credentialing them, which is an expansive background check. It is the same approach that a health plan would take if a provider wants to get reimbursed by that health plan. We learned a lot during that time. What we learned is that each specialty is very unique and most of the time very different than other specialties in terms of how pricing works, in terms of how a patient finds and ends up at the doctor of their choosing. Many times, you also have the situation where the doctor has no idea how much it is going to cost the patient. Therefore, when we are asking for the pricing and services, we get a whole gamut from “Here is every single service I have, and it is all billing codes and it is ten pages of services and pricing,” to “I do have that.” We had to work with many of them to create a more consumer friendly pricing/service. That led us to take a step back. During that time, we were introduced to a company called CoreChoice. CoreChoice is the leading provider PPO for imaging centers. They have twenty-two thousand centers and facilities across all fifty states. We ended entering into a strategic partnership with them. The strategic partnership allowed us to, almost at a snap of the fingers, (not really a snap of the fingers because it took us a while to come to an agreement). Once we made that partnership, we now had access to the twenty-two thousand providers and facilities across all fifty states and all of these providers are credentialed. Therefore, instead of spending one hundred, one hundred and fifty dollars to sign up one provider, we were able to really, at scale, bring in a whole credentialed network of providers. With that we decided to focus in on imaging at first. We took the same approach Amazon did and that is not launching a specialty or a different service until we truly understand it. Amazon, they started just on books, but it led to much more. With MediXall, we focused in on imaging services and are constantly expanding. However, we will not jump into a specialty until we know that we have an expert in it and we truly understand the mechanics. Over the past two months we brought in Rx Discount Card. We have brought in lab testing, and we are in negotiations with Dental and other specialty networks. However, we are very deliberate about how we launch a specialty, but what we know is that we need to be able to scale. With the strategy and the approach of tapping into these already filled out, credentialed networks, we are able to scale throughout the nation much quicker and more cost effectively than our initial model.

**“MediXall is the way to go because people need to have an avenue to shop around... We have created a platform to give the tools to the patient, to the consumer, to be able to navigate their own healthcare instead of leaving in the hands of a third party.”- Michael Swartz**

**CEOCFO: *How do you help the patient make a choice? What information do you provide? How do you provide it in a way that it easy yet complete?***

**Mr. Swartz:** We fully credential all of our providers. Credentialing, for us, and the reason we required it, is it is a way to maintain a certain level of quality. What I mean by quality is not that you are going to have a great experience when you go to the doctor, but that when you go to the doctor you will be assured that that doctor is what he says he is and can offer the service that he does. That was the first step. The second is that because we credential, we have very valuable data; pretty much anything and everything on that doctor, including education history, do they have any flags, malpractice; whatever it may be. We offer enough information so that the patient does not have to go to multiple places to find that information. Then we have an aspect of user review and over time user reviews will build up. Today many people in our society have more trust and believe in the opinion of their peers many times. Therefore, by bringing in an aspect of user reviews it is the same focus that Yelp was built on. It is that people want to hear from other people who have experience in it. You have seen many companies since Yelp use user reviews to maintain a quality of and refinement, just based off of the social validations. Take Uber for example, which has two-way reviews, and not only does the rider rate the driver to provide that drivers rating, but the driver actually rates that rider. That is a way to make sure that that you do not have one bad apple spoiling the whole bunch. We really take that same all-encompassing approach. To tell you the truth, I think that over time we will identify other ways to make the consumer or patient feel more comfortable and give the information and what that patient is asking for. We only know what we know right now based on the data that we have taken as well as the data that is out there in the public, such as what ZocDoc has provided to consumers and what academic studies have provided. However, over time that information will evolve to exactly what the patient is asking for. Therefore, right now we are using the information we have, that aspect of user review, but I am pretty confident that over time, as more users, more patients use and as more doctors use our platform, we will evolve and grow that knowledge base and tap into the exact pieces of information that will give that patient confidence when shopping around.

**CEOCFO: *Who has been using this service? What is the demographic?***

**Mr. Swartz:** The demographic, as most people expect, is kind of twofold. The first and most obvious is millennials. Millennials would rather use the phone or the computer than to actually have real life social interactions. Let me just state, I am a millennial as well, so I am not dogging, I am just stating facts. However, in the other side of it we are seeing a wider range of people. We have thirty, forty and fifty-year old's that are using our platform because they are paying more out of pocket. Where we are not seeing it is sixty-five and up, which are Medicare and Medicaid. You will not find value in our platform right now, but with most people getting their health coverage through work and that becoming a company's

biggest business expense, they are passing the risk along to their employees and that is resulting in higher and higher deductibles. Demographically our platform is really for anyone who feels the pinch of out of pocket expenses. Therefore, we do not look at millennial's verses Baby Boomers to Generation Z and all the different generations. We do it in a sense of marketing and messaging. However, we look at our platform as targeted to any consumer, patient, whatever you want to call it, that is currently feeling the pinch of out of pocket expenses and that is a good majority of America.

**CEOCFO: *Doctors often have relationships with, let us say, imaging centers that they recommend people to. Is there reluctance from a doctor to give up whatever relationships they have for something more open like this or do you find that it is not a stumbling block at all?***

**Mr. Swartz:** I think there are two sides to that, one that is more various, than the other that is more realistic and kinder of the bad side of healthcare. It is that there are many doctors out there that are still getting kickbacks, which is illegal in the state of Florida and pretty much the nation. They are getting paid when they send patients to a specific imaging center or they own the imaging center and they are making money off of that patient going there. That is something we cannot really overcome. The only thing that can overcome that is more stringent and more regulatory oversight. There is always going to be that aspect of people that are just making money off of what they are doing. The other side of that is that these doctors see what is happening in the market. Many times, they got into becoming a physician to provide care and not always run a business. Therefore, sometimes with these technologies, they might find it hard to implement or do not really know how to bring that technology to the patient, so we offer a way to really streamline and improve that patient experience. The sum of that is increasing patient loyalty with their patients and their new patients, because their experience is better. They are caring for that patient's specific financial insuring situation as compared to just sending them to the person down the street, because that is the only relationship that they have. We have seen a lot of excitement from the doctor's side in terms of this referral program. That is because they are excited to be able to have access and be able to facilitate a conversation with their patient about cost and quality and in the end insure that patient is getting the quality care that they need, even when they walk out of the doctor's office.

**CEOCFO: *Would you tell us about being a public company and what has been the response in the marketplace?***

**Mr. Swartz:** We are a public company, but we are a public company that is public more on the aspect of transparency. We want to make sure that anyone that is looking at the company can see anything and everything. If you look at our company right now you will see that there is not much volume. That is because we are not focused on what is happening with the stock price. Currently, we are solely focused on executing our business model and executing on the implementation of the foundation to support growth of our company operations. Even though we are public, we use it as a way to bring that transparency. We are more focused on building our platform and our foundation, so that we can, at the right time, uplift to the major exchanges, to the NASDAQ, to the NYSE, to those bigger exchanges. Therefore, even though we are a public company we are not focused on the stock price. We are focused on the fundamentals.

**CEOCFO: *What regulatory issues do you need to be concerned with? I am guessing HIPAA is one? How do you cover all bases that you need to in the regulatory arena?***

**Mr. Swartz:** Yes, HIPAA is definitely a very, very big one. However, there are just so many regulations and it is so complex that we would rather be safe than sorry. Every time we are launching a new model specialty, we put a lot of money and time into working with council to really figure out what structure is needed in terms the agreement with the provider, the agreement with the patient and it goes on a state by state basis as well. The regulations in Florida most likely vary from the regulations in New York or the regulations in California, so we take the regulatory aspect very seriously. We know what we know, and we know what we do not know. That involves us, even though it is not always the most fun to deal with and it is not the cheapest, but we know that if we want to truly disrupt healthcare that we cannot sink the ship due to a regulatory issue. Therefore, we are very positive and very deliberate in working with council to identify the right model, the right mechanics of every piece of our business.

**CEOCFO: *Why is MediXall Group Inc the way to go?***

**Mr. Swartz:** MediXall is the way to go because people need to have an avenue to shop around. We have created a model to search for your medical services and purchase and book in the same way that they use Expedia, the same way that they use Amazon and the same way they use Open Table. That means that they will be able to go on and understand exactly how to do this. Therefore, why people should use us is because if they feel the pinch of out of pocket expenses, they need to be able to make sure that they are not going to end up with that one hundred-thousand-dollar price medical bill. We have created a platform to give the tools to the patient, to the consumer, to be able to navigate their own healthcare instead of leaving in the hands of a third party.