



NEWS RELEASE

MultiPlan Rolls Out Updated Payment and Revenue Integrity Services; Helping Payors Prevent, Correct, and Recover Throughout Claims Lifecycle

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February acquisition fuels expansion of payment and revenue integrity service line

NEW YORK--(BUSINESS WIRE)-- MultiPlan Corporation (NYSE:MPLN), a leading provider of data analytics and technology-enabled cost management, and payment and revenue integrity solutions to the U.S. healthcare industry, announced today it has completed the branding and service offering update of its Payment and Revenue Integrity services that resulted from the acquisition of Discovery Health Partners in February. The expanded service offering is focused on helping payors convert recoveries into future correction and prevention opportunities throughout the lifecycle of a healthcare claim.

Paying claims quickly and accurately continues to be a critical priority for MultiPlan's healthcare payor customers. Even with interventions, payors' ability to navigate the complex healthcare system is challenged by multiple and legacy technologies, changing regulations, and member churn, resulting in missed opportunities to catch errors within the total lifecycle of a healthcare claim. These factors contribute to incorrectly paid claims, improper reimbursements, or claims that shouldn't be paid at all.

MultiPlan's Payment and Revenue Integrity services analyze eligibility and claims data to ensure claims are paid correctly the first time. MultiPlan combines its award-winning machine learning capabilities with the human intelligence of its seasoned teams to offer the best available solutions to help clients achieve payment integrity success. MultiPlan's services include:



- Pre-Payment Clinical Review - Corrects billing errors before payment and eliminates wasteful claims spending
- Coordination of Benefits - Identifies instances of other health insurance and determines primacy to maximize recoveries and drive future cost avoidance.
- Data Mining - Analyzes claims data to identify and resolve incorrectly paid claims, as well as addressing root-cause issues for future error prevention.
- Post-Payment Clinical Audits - Corrects billing errors after payment and eliminates wasteful claims spending.
- Subrogation - Maximizes recoveries from third party liability with improved identification.
- Revenue Integrity - Finds and restores premium dollars owed for managing Medicare Advantage members.

For additional information about MultiPlan's enhanced and growing Connected Payment and Revenue Integrity Services, visit <https://www.multiplan.us/services/payment-and-revenue-integrity>.

About MultiPlan

MultiPlan is committed to helping healthcare payors manage the cost of care, improve their competitiveness and inspire positive change. Leveraging sophisticated technology, data analytics and a team rich with industry experience, MultiPlan interprets clients' needs and customizes innovative solutions that combine its payment and revenue integrity, network-based and analytics-based services. MultiPlan is a trusted partner to over 700 healthcare payors in the commercial health, government and property and casualty markets. For more information, visit www.multiplan.com.

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