



## **FOR IMMEDIATE RELEASE**

### **MPV Announces New Contracts with Six Medical Groups to Audit Reimbursement and Reduce Patient Bad Debt**

*Use of MPV Contract Management will enable groups to verify reimbursement at line-item level and monitor payer compliance*

AUSTIN, Texas. – May 19, 2009 – Medical Present Value, Inc. (MPV) today announced six medical groups have selected MPV Contract Management, a Web-based application that enables practices to audit reimbursement and payer performance based on individual client contract terms, the latest payment rules and payer adjudication logic.

The healthcare organizations, which range in size and specialty, include:

- Florida Cancer Specialists, a Ft. Myers, Fla. group with 63 providers in 26 locations;
- Will County Medical Associates, S.C., a 33-physician, Joliet, Ill.-based multi-specialty group;
- Panorama Orthopedics & Spine Center, a practice with 23 providers located in Golden, Colo.;
- Webster Orthopaedic Medical Group, a 14-physician practice based in San Ramon, Calif.;
- Mid-Maryland Musculoskeletal Institute, a Frederick, Md.-based group with 11 physicians; and
- Vail Summit Orthopaedics, a nine-provider practice with locations in Vail, Frisco and Edwards, Colo.

“In today's medical reimbursement environment, it is important for us to ensure that we receive accurate payment for the services we provide, and our current manual process leaves a margin for error that can negatively impact our bottom line,” said Eric Worthan, CEO of Panorama Orthopedics & Spine Center. “MPV’s knowledge and experience in this complex environment make them the perfect partner. By utilizing MPV Contract Management, we will improve the accuracy with which we identify underpayments.”

With MPV Contract Management, the physician practices will be able to improve payer contract performance and better monitor payer compliance by verifying claims at the line-item level. Additionally, they will be able automate processes related to payer adjudication management and oversight, including payer variance appeals and evaluation of new and proposed contract terms. By modeling proposed payer contract terms in the system, groups are able to develop negotiation strategies based on the services that will have the greatest impact on reimbursement.

“We knew there was significant opportunity to recover underpayments from our payers, but we needed a tool that would automate the process so that we did not tie up valuable resources,” said Christine Pope, CFO of Will County Medical Associates. “It became clear that MPV Contract Management was the tool we need to efficiently

pursue even the smallest payment variance, optimize our revenue and ensure that we are being paid according to contract terms.”

MPV Contract Management also enables healthcare organizations to determine a patient’s out-of-pocket expenses prior to service, leading to improved patient-provider communications and reduced patient bad debt.

**About MPV**

MPV helps medical groups to maximize practice revenue and meet the demands of healthcare consumers by combining technology and consultative services to fully automate eligibility verification; reduce patient write-offs; monitor payer contract compliance; recover underpayments and negotiate better contracts.

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