

TOP 10 WAYS DMS PROVIDES INDUSTRY LEADING DSH MANAGEMENT AND 340B REVENUE MANAGEMENT SERVICES

- 1. Full Cycle DSH/340B Revenue/Expense Management**
 - Retrospective, Concurrent and Prospective Management
 - 2. Fully Operational, Deployed and Integrated Industry Leading System**
 - 24 Hospital Clients in 8 States
 - 700,000 line Sql-server ASP with 4 years/ 20,000 man hours of design, development and deployment basis
 - Integration of Federal, State and regional data feeds and mandated health benefit regulatory guidelines
 - 3. Concrete, Precise and Transparent Financial Results**
 - Full corroborating detail for all calculations and data values
 - "Drill-down" capability from hospital-year to claim level view
 - 4. Extensive cyclic real-time Out-of-State Medicaid EDI data exchange**
 - Additional days for retrospective/concurrent DSH/340B calculations
 - Capture of retrospective eligibility determination/corrections
 - 5. Direct (DMS client) real-time access to the Medicare 270/271 eligibility database**
 - Medicare secondary payer identification
 - Identification of lifetime reserve days and YTD deductible balances
 - Medicare Advantage membership history and current status
 - 6. EDI functionality built into MDSS®**
 - Elimination of expensive and unnecessary 3rd party expense
 - No limitation on the number/type of EDI eligibility queries via DMS "direct submitter" status
 - DMS actively exchanging/testing EDI transactions with 28 States
 - 7. Robust Mother-Newborn matching algorithms**
 - "Fuzzy" logic based on multiple demographic and clinical/procedure data to identify relationship and "deemed" automatic 12 month Title XIX eligibility for newborn(s) where Mother had Title XIX coverage at delivery
 - 8. Supplemental Title XIX revenue product line**
 - Timely identification of out-of-state Medicaid eligible members provides for capture of fee-for-service billing opportunity
 - Option offered for clients for full-cycle EDI-based automatic billing/remittance management services for out-of-state Medicaid members
 - 9. Quantification of damages for the Medicare/SSI lawsuit**
 - Multiple analytic and data-based approaches to identifying Medicare/SSI claims not included in the CMS calculation of the SSI DSH ratio
 - Focus on accuracy of the Medicare covered days component through erroneous inclusion of MSP days and Medicare Part A exhausted days
 - 10. Provision of Medicaid and Medicare/SSI membership management tools**
 - Periodic reports identifying Title XIX members losing coverage due to "technical" denials
 - Recognition of likely Title XVI (SSI) members through clinical and payer based analysis and affiliation with multiple firms to assist patients through the SSI application process
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- DMS is:**
- Endorsed as the preferred vendor for DSH/340 management services by the Tennessee Hospital Association's THA Solution Group.
 - Endorsed by the Virginia Hospital and Healthcare Association as their preferred vendor for DSH/340B full cycle revenue management.
 - Endorsed by the Mississippi Hospital Association as their preferred vendor for DSH management services.
 - Selected by a \$500M NYSE hospital "turnaround" firm as the sole "outsourced" vendor for DSH/340B management services.