



finding a better way

NEWS RELEASE

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FOR IMMEDIATE RELEASE**

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HDM CORP. AND TC³ HEALTH, INC. ANNOUNCE PARTNERSHIP

Omaha, NE – HDM Corp. and TC³ Health, Inc. announce their partnership to offer HDM Corp. clients fully integrated loss control, discovery and recovery services on overpaid health care claims due to fraudulent and abusive coding of medical claims.

Because of the seriousness of abusive coding and fraudulent billing of medical claims, state, federal and commercial payers are now requiring anti-fraud and abusive coding discovery and recovery programs. For example, CMS will soon be awarding four regional contracts under their Medicare RAC program (Recovery Audit Contractor). In response to the growing need, HDM Corp. and TC³ Health, Inc. will work together to provide HDM Corp. payer clients with advanced technology and services that detect overpayments and handle recoveries on claims with abusive coding or fraudulent patterns. The savings generated will help clients manage their health care expenses by product.

Lisa Lechowicz, CEO and Founder of HDM Corp. stated, “We are pleased to be working with TC³ Health, Inc. on this partnership to improve the bottom line results of our clients’ health care products. TC³ Health Inc.’s claims management, fraud and abuse expertise and technology drives claims costs lower. Further, aligning with a partner who uses technology and seasoned fraud and abusive coding experts for results supports our mission to ***find a better way*** to administer health care.”

George Bregante, Chairman of TC³ Health, Inc. notes, “We too are pleased to work with HDM Corp. and their clients to discover and recover medical claim overpayments resulting from fraudulent and abusive coding of medical claims. A report published in the Journal of American Medical Association disclosed that 54% of physicians surveyed reported using deception of payers to obtain benefits and 39% of physicians surveyed reported exaggeration of a patient’s condition, diagnosis or symptoms to obtain further

benefit. The problem is real and HDM and TC³ are up to the task of discovering and recovering such overpayments that reduce HDM Corp.'s clients medical cost.”

HDM Corp., founded in 1996, is a woman-owned Omaha-based company dedicated to helping its nationwide clients ***find a better way*** to administer health care transactions. HDM Corp. processes over 30 million health care transactions annually and seeks customized solutions for its clients, whether they are payers (insurance companies, TPAs, Taft-Hartley administrators, self-insured employers, and health plans) or providers. For more information on HDM Corp., go to www.hdmcorp.com.

TC³ Health, Inc., founded in 2001, is a growth-stage Delaware Corporation providing integrated claims management and loss control services to approximately 50 U.S. health care payer organizations. TC³'s integrated loss control model, the TC³ Funnel, enables payers to sequence multiple cost containment technologies through a single connectivity source, assuring payment integrity while reducing paid medical exposure by up to 3-10% annually. The TC³ Funnel includes the following components: Integrated Prepay and/or Postpay Fraud & Abuse Detection with Investigations, Clinical Coding Compliance and Duplicate Detection, AccessPlus Supplemental PPO Repricing Program, Cost-to-Charge Benchmarking and Fee Negotiations, Web-Enabled Data Analytics and Decision Support. TC³ Health, Inc. has offices in two states, California and Minnesota. For more information please visit www.tc3health.com.