NEWS RELEASE



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PERFORMANT HEALTHCARE SOLUTIONS RE-AWARDED CMS MEDICARE SECONDARY PAYER COMMERCIAL REPAYMENT CENTER CONTRACT

LIVERMORE, Calif., December 19, 2022—(BUSINESS WIRE)—Performant Healthcare Solutions (Nasdaq: PFMT), ("Performant", "the Company"), a leading provider of technology-enabled payment integrity, eligibility and related analytics services, today announced that the Centers for Medicare and Medicaid (CMS) awarded Performant the Medicare Secondary Payer (MSP) Recovery Audit contract also known as the Commercial Repayment Center (CRC) for a 6-year term consisting of one base year and five option years. The is a contingency fee contract; CMS pays Performant a percentage of overpayment recoveries returned to the Medicare Trust Fund. Performant has been the incumbent MSP CRC contractor since September 2017 and since then through the end of FY 2021 the Company has increased recoveries to the Medicare Trust Fund by nearly 340% per year.

"This contract win is an affirmation of our demonstrated history of continuous improvement that has resulted in annually increasing and record setting recoveries to the MSP CRC program," stated Simeon Kohl, President of Performant. "We are honored to serve CMS as one of our longest healthcare partners. And we are excited to be recognized by CMS as a best value contractor on multiple, national programs. These programs afford Performant a unique view of the national healthcare landscape and trends."

Under the program, Performant is responsible for identifying and recovering payments in situations where CMS should not be the primary payer of healthcare claims because a beneficiary has other forms of insurance coverage, such as through an employer Group Health Plan or certain other payers.

In addition to the MSP CRC contract, Performant also serves as the CMS Recover Audit Contractor (RAC) for Regions 1, 2 and the nationwide Region 5 for Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) and Home Health and Hospice (HH&H) claims. Further, Performant was recently selected as the sole national medical reviewer for the Health and Humans Services Office of the Inspector General.

ABOUT PERFORMANT HEALTHCARE SOLUTIONS

Performant Healthcare Solutions is a leading provider of technology-enabled audit, recovery, and analytics services in the United States with a focus in the healthcare payment integrity industry. Performant works with healthcare payers through claims auditing and eligibility-based (also known as coordination-of-benefits) services to identify improper payments. The Company engages clients in both government and commercial markets. The Company also has a call center which serves clients with complex consumer engagement needs. Clients of the Company typically operate in complex and highly regulated environments and contract for their payment integrity needs in order to reduce losses on improper healthcare payments.

Powered by a proprietary analytic platform and workflow technology, Performant also provides professional services related to the recovery effort, including reporting capabilities, support services, customer care and stakeholder training programs meant to mitigate future instances of improper payments. Founded in 1976, Performant is headquartered in Livermore, California.

To learn more, please visit https://www.performanthealth.com