

Achieve Your Quality, Efficiency, and Performance Goals with a Single Solution

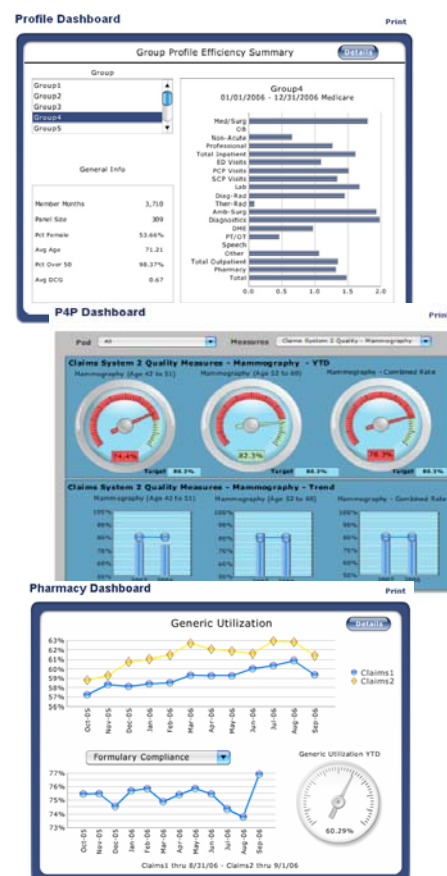
MedVentive's industry-leading P4P program, fully customized for California, provides everything you need to succeed in your P4P program:

- **Aggregate all your data** including encounters, claims, prescriptions, lab results, EMR and scheduling data, & more
- **Calculate and track IHA** and customized clinical measures
- **Drill-down access to any level of detail** – organization, group, physician and/or patient.
- Deliver patient specific recommendations through **population based campaigns** and at the **point of care**

With MedVentive you improve patient care throughout the year. Integrated exception reporting coupled with self reporting ensures that your P4P payments reward your true performance.

Key features:

- **Interactive P4P dashboards** display your up-to-date P4P performance throughout the year.
- **Menu-driven reports with dynamic multilevel drill-down** provide sophisticated **severity adjusted** reports and profiles. **Cognos® cubes** and data **warehouse access** give you the ultimate in custom reporting for your P4P and capitated programs.
- Automated, Web-based tools identify patients out of compliance with P4P metrics. Implement **efficient population management** sending **patient-specific quality improvement** and **prescribing recommendations** to patients and/or their physicians.
- **Integrated physician feedback loop for real-time exception reporting** improves tracking of ineligible patients, thereby reflecting true performance and maximizing revenue.
- **Interactive registries** with integrated auto-populated **work queues** support guideline compliance at the **point of care**.
- **Web-based access for unlimited users**, including physicians, other caregivers, care managers, centralized staff and more.
- MedVentive's **P4P Adjudicator** allows you to audit plan P4P payments and distribute payments across your organization according to criteria you set.



Proud Sponsor - California Association of Physician Groups and IHA

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