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MultiPlan and Viant to Join Forces

Transaction Will Deliver Enhanced Medical Cost Management Services to a Market Facing Unprecedented Costs and Competition

New York, NY and Naperville, IL, August 3, 2009 - MultiPlan, Inc. and Viant, Inc. today announced that MultiPlan will acquire Viant, bringing together the considerable expertise and complementary solutions of both companies to produce the industry's most comprehensive provider of medical cost management services. MultiPlan will continue to operate Viant's distinct product line, creating an electronic gateway for clients to efficiently leverage the strengths of each company's provider networks and non-network cost management services.

The transaction is expected to close before the end of the year, subject to satisfaction of closing conditions including customary regulatory approvals. Financial terms were not disclosed.

Founded in 1980, MultiPlan is a provider of PPO network and related transaction-based solutions that reduce the per-unit costs of medical claims. MultiPlan contracts directly with over 5,000 hospitals, 115,000 ancillary care facilities and 625,000 practitioners who participate in the company's national primary and complementary PPO networks.

Established in 1990 as Preferred Payment Systems, Inc., Viant today offers PPO networks, network management, pre-payment and post-payment services to commercial and government clients. Viant's networks represent approximately 5,400 hospitals, 95,000 ancillary facilities and 600,000 practitioners.

Both companies offer their networks and services to health plans, and do not themselves assume insurance risk or deliver medical care.

"Viant joins the MultiPlan family at a time when medical costs have never been higher, and the need for innovative technology and comprehensive solutions to reduce those costs has become the nation's priority," said Mark Tabak, MultiPlan's Chief Executive Officer. "In this tough economic climate, our companies together can more effectively enable the value exchange between healthcare providers and payers that helps more Americans get the most from their healthcare dollar."

Added Dan Thomas, Chief Executive Officer of Viant, “Our companies have highly complementary solutions that enable us to immediately enhance the value we offer to our respective customers. It is also clear that this transaction will benefit providers as the companies integrate and consolidate administrative functions to produce greater efficiencies and cash flow for providers. In addition, Viant’s recent entrée into the public sector is expected to be one of the meaningful growth drivers for the combined organization.”

Together, MultiPlan and Viant offer healthcare payers an end-to-end solution for managing healthcare unit costs on a pre- and post-payment basis. In 2008, the companies reduced the cost of over \$20 billion in billed claim charges for commercial healthcare payers and their primary PPO enrollees.

About MultiPlan

MultiPlan, Inc. is the industry’s most comprehensive provider of healthcare cost management solutions. The company provides over 2,300 clients with a single gateway to a host of primary, complementary and out-of-network strategies for managing the financial risks associated with healthcare claims. Clients include large and mid-sized insurers, third party administrators, self-funded plans, HMOs and other entities that pay claims on behalf of health plans. Incorporated in 1980, MultiPlan is owned by a group of investors led by the Carlyle Group. For more information, visit www.multiplan.com.

About Viant

Viant, Inc. (through its subsidiaries including Texas True Choice and national PPO network, Beech Street) provides healthcare payment solutions through primary and complementary networks, integrated network and contract management, non-network cost management services and post payment audit and recovery services to the U.S. commercial and public health insurance sectors. Viant's comprehensive and effective cost management strategies focus on timely, accurate and fair payment for providers, payers and patients.

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