

Return this sheet today for a  
Free Revenue Realization™ opportunity assessment  
Courtesy of MMC 20/20

## *Opportunity Evaluator*

<i>Plan Information</i>	
<i>Organization</i>	
<i>Name</i>	
<i>Title</i>	
<i>Phone</i>	
<i>E-mail</i>	
<i>H-Number (s)</i>	
<i>Monthly Membership Report Information (for all noted H-Numbers)</i>	
<i>Payment Month</i>	
<i>Total M+C Membership</i>	
<i>Average Payment Per Member</i>	
<i>Number of Out of Area Members</i>	
<i>Number of Members with one or more HCCs</i>	
<i>Number of ESRD Members</i>	
<i>Working Aged Factor (April 04 MMR)</i>	
<i>Number of Institutional Members</i>	
<i>Number of Medicaid Members</i>	
<i>Monthly Membership Report (data format) and transaction reply report (data format) availability</i>	
<i>How many months does your plan have available in electronic format?</i>	

*Please note: All plan specific information will be treated as confidential*

*Please Return to:*

Andrea Seebaum  
MMC 20/20, Inc.  
1117 Perimeter Center West  
Suite 310 East  
Atlanta, GA 30338

*Questions?*

e: aseebaum@mmc2020.com  
p: 678.775.1141  
f: 770.234.5527