



**FOR IMMEDIATE RELEASE**  
**2015**

**September 24,**

## **Certive Introduces Its Strategy to Address Growing Opportunities in the U.S. Healthcare Industry**

***Recent Acquisitions Enable Access to an Expanded Addressable Market With Comprehensive Solutions for Improving the Financial Efficiency of Hospitals***

***Acquisitions Increase Customer Base by 150% in 2015, Setting the Stage for Accelerating Growth***

**Vancouver British Columbia, and Scottsdale Arizona** - Certive Solutions Inc. (CSE: CBP, FWB: 5CE, OTCQB: CTVEF) (“Certive” or the “Company”), a provider of revenue cycle management solutions to the U.S. healthcare market, today unveiled an expanded strategy benefitting from two acquisitions which have strategically positioned Certive as the emerging leader in helping hospitals improve their financial performance and address growing industry wide challenges.

The complexities associated with healthcare reform in the U.S. has placed increasing economic and compliance pressures upon a system already burdened with significant difficulties in reimbursement to providers, and in particular hospitals, by government and commercial payers. Approximately 15% of every healthcare dollar goes to claims processing, payments, billing, revenue cycle management, and bad debt according to a recent McKinsey report. In a \$3.7 trillion healthcare market, this equates to in excess of \$550 billion in lost revenue. Of this total, the estimated value of Certive’s near-term addressable market is approximately \$5 billion. The pending adoption of ICD 10, the latest revision of the International Statistical Classification of Diseases and Related Health Problems (ICD), is expected to add to this complexity when it becomes the industry standard in October 2015. The Centers for Medicare & Medicaid Services projects that in the early stages of ICD 10 implementation, healthcare claim denial rates will increase between 100% and 200%, and that payment delays, will grow by 20% to 40%, significantly growing the current market opportunity. It is believed that nearly 40% of all hospitals are considering end-to-end outsourcing for business process functions to improve efficiency, creating a significant, and largely untapped, market opportunity which Certive is uniquely poised to exploit.

Certive provides outsourced revenue cycle management services to the U.S. healthcare market. The Company’s revenue integrity analytics ensure providers get paid for the care they provide. Certive identifies categories of opportunity within traditional revenue cycle for hospitals and, on an outsourced basis, provides effective recovery of revenue on claims that are retrospectively assessed as underpaid or missed in the billing process.

Certive’s rapid growth opportunity is in aggregating specialty niche players for footprint expansion, layering in Certive technology and resources to grow, and then leveraging that

footprint with an expanding value proposition addressing opportunities as a result of the trends towards outcome based reimbursement healthcare revenue models.

During the past year, Certive has acquired two companies, Titan Health Management LLC and Omega Technology Solutions, LLC, with long-term customer relationships representing a footprint of over 150 hospitals in the United States. The Company has expanded its service offerings and increased the number of customer relationships from 20 in June 2014 to more than 70 customer relationships as of today's date. Certive's recurring revenues have grown quarter over quarter, increasing 27% from approximately \$903,000 for the quarter ended August 2014 to \$1.1 million for the quarter ended May 31, 2015, demonstrating demand for the Company's solutions and validating the acquisitions. To meet growing demand, Certive has more than doubled staffing levels since June 2014.

Certive is adept at identifying new opportunities not easily identified by other participants in revenue cycle management. The Company leverages trusted relationships that have matured over many years with its customers, which is a key component of the long-term strategy. The Company's management firmly believes that addressing the challenges facing the U.S. healthcare industry, especially in the area of revenue recognition, will require not only services to providers and payers alike, but also the definition of new information landscapes that will emerge and provide solutions that enable managers of large hospital systems to better predict financial outcomes for services rendered. Certive continues to approach customers with this unique culture and identity and we are encouraged by the response.

Through the acquisition of Omega, the Company now has proprietary software to create an increasingly comprehensive service based model that can be outsourced by Certive's customers to improve their operating performance. This service model delivers a substantive return on investment for Certive and its customers by provisioning services, technologies, and analytical tools with no direct cost to the customer. At the same time, the Company intends to offer services using our information management tools and workflows that connect disparate data, as the mandate for success becomes the interoperability associated with consolidating this data into usable information.

Certive has identified new lines of services that will be offered to the entire existing base of Certive customers over the remainder of 2015. Management has also successfully integrated technologies developed by Omega into the Titan division with seamless accuracy and scalable new results.

Certive's goals are simple: The Company intends to grow its hospital footprint by acquiring companies with trusted customer/hospital relationships, to achieve a total footprint of approximately 400 hospitals nationwide by the end of calendar 2015. With a growing customer base Certive can sell more services and cross sell offerings between and among those customers. More importantly, this growing customer base, along with expanded offerings, will create opportunities to leverage the Company's analytical capabilities to identify missing information links within the revenue cycle, possibly disrupted by ICD 10, and create new service and product offering uniquely tailored to the changes impacting healthcare delivery and payment.

Van Potter, President and Chief Executive Officer of the Company commented that "we see tremendous opportunities to accelerate our growth. Our revenues are all recurring in nature and with technologies acquired or built, we intend to be a dominant contender in this industry."

Management has targeted four additional acquisitions that will secure Certive's footprint this calendar year. With the appropriate funding in place, the Company will be positioned to close on these acquisitions in calendar 2015.

**For more information please see [www.certive.com](http://www.certive.com), contact Certive directly at 480-922-5327.**

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### **About Certive Solutions Inc.**

Certive Solutions Inc. (Scottsdale, Arizona) provides revenue cycle management solutions to the U.S. healthcare market. Certive's claim audit and recovery services, billing services, and software solutions help providers work with payers to efficiently manage the reimbursement process and improve financial performance. Certive's highly skilled and experienced management team, combined with proprietary workflow and analytics, audits and identify, bill and collect underpayments in accordance with contractual obligations between the public or commercial insurance carrier and the designated provider. The healthcare market is changing. Certive works with clients to provide efficient and effective solutions aligned with reform initiatives to improve healthcare and reduce costs.

### **FORWARD-LOOKING AND OTHER STATEMENTS**

This press release contains forward-looking statements. These statements relate to future events or future performance and reflect our expectations and assumptions regarding our growth, results of operations, performance and business prospects and opportunities. Such forward-looking statements reflect our current beliefs and are based on information currently available to us. In some cases, forward-looking statements can be identified by terminology such as “may”, “would”, “could”, “will”, “should”, “expect”, “plan”, “intend”, “anticipate”, “believe”, “estimate”, “predict”, “potential”, “continue” or the negative of these terms or other similar expressions concerning matters that are not historical facts.

A number of factors could cause actual events, performance or results, including those in respect of the foregoing items, to differ materially from the events, performance and results discussed in the forward looking statements.

Factors that could cause actual events, performance or results to differ materially from those set forth in the forward-looking statements include, but are not limited to:

- the effect of continuing operating losses on our ability to obtain, on satisfactory terms, or at all, the capital required to remain a going concern;
- the ability to obtain sufficient and suitable financing to support operations, development and commercialization of our services;
- the risks associated with the development of our technology;
- the risks associated with the increase in operating costs from additional development costs and increased staff;
- the timing and nature of feedback from customers; and
- our ability to successfully compete in our targeted markets.

Although the forward-looking statements contained in this press release are based on what we consider to be reasonable assumptions based on information currently available to us, there can be no assurance that actual events, performance or results will be consistent with these forward-looking statements, and our assumptions may prove to be incorrect. These forward-looking statements are made as of the date of this press release. Forward-

looking statements made in this press release are made as of the date of the original document and have not been updated by us except as expressly provided for in this press release. As required by securities legislation applicable to reporting issuers, it is our policy to update, from time to time, forward-looking information in our periodic management discussions and analyses and provide updates on our activities to the public through the filing and dissemination of news releases and material change reports.