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General Terms

We appreciate your selection of Medpharm Services, LLC ('Medpharm') as your trusted partner. This agreement outlines the terms governing the Value-Added Services ('VAS') integrated with our Intelligent Medical Software ('IMS'). We appreciate your business and are committed to offer you (“Client”) the best Electronic Medical Record in the market.

This document details specific terms and conditions applicable to the Value Added Services (“VAS”) that Medpharm currently integrates with IMS, and is hereby expressly made a part of Client’s IMS License Agreement (“License Agreement”) as fully as if set forth at length therein. Nothing set forth in this document is intended, nor shall any of its provisions be construed, to limit or exclude any definition, restriction, limitation or other term or condition of each of the VAS listed herein.

A License Agreement must be previously executed, Client shall remain in compliance with all terms and conditions of the IMS License Agreement and this Agreement to avail the described services. By signing the License Agreement, Client is solely responsible for ensuring their hardware, software, and IMS accounts are up to date to enable the proper functioning of the services provided; and to review and comply with all the terms and conditions of each one of those VAS.

Some VAS are provided by third-parties. Medpharm shall not be responsible for third-party’s failure to provide the VAS on time or as requested. Medpharm shall not be liable to the Client for any indirect, incidental, consequential, punitive, or special damages, including but not limited to loss of revenue, profits, or data, arising from the Client’s use of the Value-Added Services or the submission of data to CMS. Clients assume full responsibility for the accuracy and completeness of all submitted data.All services are provided 'as is,' and Medpharm shall not be held liable for any errors, delays, or omissions caused by third-party providers.

Requests for changes and/or cancellation of VAS must be sent to their Account Managers and the request shall be subject to the terms and conditions of the License Agreement and shall be deemed effective thirty (30) days after such a request is made and approved by MedPharm. No refunds will be given for prepaid fees.

All these terms and conditions are subject to change at any time. Not all VAS listed in this document might be available at all times or are provided to Client. Client's failure or delay to enforce any of these terms and conditions shall not constitute a waiver of that provision. MedPharm reserves the right, in its sole discretion, to terminate any VAS at any time, for any reason and without notice, except where prohibited. Additional fees and other restrictions may apply.

Appointment Booking System (ABS)

- **IMS Prerequisites:** IMS Build 35 or later is required to support the Appointment Booking System (ABS). Clients currently on an older build or version, will be required to upgrade IMS to a compatible Build.
- With IMS Build 38 or later, Televisit Booking is also supported in the Appointment Booking System (ABS).
- LogMeIn or RDP (Remote Desktop Protocol) should be available on the computer.
- Client can either choose to go with imscare.com domain or they can go with their domain like care.myclinic.com
    - If client choose to go with imscare.com, our IT team or Deployment team will create new C type record and bind it with cname_prod.imscare.com
    - Otherwise client's IT need to bind their selected dns record with cname_prod.imscare.com.
- RMQ client service is a light weight service which needs to be deployed by Meditab's deployment team to the client's server.
- **Note**: With the new ABS, License structure has been changed. Now for every Provider/Room clinic has to purchase an individual license for mapping.

Care Management Module

- **IMS Prerequisites:** IMS Build 19 or later is required for the Care Management Module. Clients currently on an older build or version, will be required to upgrade IMS to a compatible Build.
- Meditab will not be responsible for submission of any kind of data.
- Meditab's sole responsibility is to set up the reporting modules of Care Management in IMS. Client is responsible for submission of the data to CMS/Medicare in order to be eligible for the incentives.
- Enhancements to the Care Management module will be provided by Meditab whenever needed.

eCQM and Primary Care First (PCF)

- IMS is able to provide the reporting capabilities for below programs through integration with 3rd party:
    1. **eCQMs-** IMS is capable of recording, calculating, analyzing and generating reports for both individual and group reporting in the following formats: QRDA I/ QRDA III
    2. **PCF-**Primary Care First: IMS is capable of recording, calculating, analyzing and generating reports in required file formats. - Includes PCF Practice site and APM Entity Identifier (MIPS_APMENTITY)
- Additional features to help clients improve their scores:
    i. **Drilldown:** Drilldown provides the list of patients evaluated for any specific measure. It also provides a detailed drill down at patient level which shows how measure conditions are met or not met.
    ii. **Benchmarks:** The benchmarks are used to score measure performance, domain performance and calculate each ACO's quality score.
- *IMS Teams can guide and help the clients to generate the reports. However, it is the client's responsibility to submit the generated reports to the required registry/CMS.

Custom Reports

- Custom Reports format shall be previously approved by Client.
- Additional fees shall apply for requests for changes in the Custom Report Format after the final report has been generated and deployed by Meditab.

Data Conversion Services

A. For data import into IMS:

- All the legal documents including the BAA, should be signed with Meditab before requesting data import into IMS
- The Client is responsible for providing Meditab with the data to be converted into an ASCII tab/comma delimited file.
- Alternatively, the Client may provide written authorization for Meditab to access the database server containing the data to be converted; please note that additional fees may apply.
- The Client must also provide Sample Index Headers, Data Feeds, and/or Sample Document Images, along with an explanation of how the data feeds map to the images/documents in IMS.
- Support for data conversion will only be available for fifteen (15) days following the live conversion. After this period, any requests for support or modifications will be treated as separate chargeable requests and may be denied at Company's sole discretion.

B. For data export from IMS:

- Upon the Client's request, Meditab's Accounting team will send a Data Conversion Services Proposal.
- Once the Client accepts the proposal and pays the corresponding fees for Data Conversion Services (see Invoice attached), the Data Conversion team shall extract the data from IMS and will provide it in a delimited file format (e.g., CSV).
- The Data Conversion team will export "Patient Documents" in the original format uploaded to IMS, along with an index file mapping Patient Documents to their corresponding names.
- The Data Conversion team will provide the visit note data for patients in PDF format. For each encounter, a separate PDF file will be provided. An index file indicating mapping of extracted PDF with their corresponding names shall be provided in a delimited file format.
- Data export support will only be provided for fifteen (15) days following the full data extraction. After this period, any requests for support or modifications will be treated as separate chargeable requests and may be denied at Company's sole discretion.

Drug Formulary

- Clients are required to sign up at least the same number of providers for Drug Formulary as there are for eRx.
- Drug Formulary shall be provided by a third-party solution, Meditab shall not be responsible for interruptions in the services resulting from third-party vendors end.
- Meditab, shall make every effort to work with the third-party vendor in resolving issues occurring from the third party vendor's side. Meditab shall not provide guaranteed timelines for resolutions for such issues.
- IMS Build 19 and above will support the latest Drug Formulary.

Electronic Prescription of Controlled Substances ("EPCS")

Providers can use either hard tokens or soft or both the type of tokens to e-prescribe controlled substances.

- Upon purchasing the EPCS One-Time Password Hardware Token ("Token") from Meditab, Client shall be responsible for ordering Token(s) from IMS ClientConnect ("IMSCC"). Client shall be responsible for providing accurate NPI and shipping information for ordering Token(s). If the information submitted to the third-party Token provider while placing an order for Token(s) is incorrect, there will be discrepancies during the identity verification process that will invalidate the Token(s). In this case, Client will be obligated to purchase new Token(s) from Meditab without refund.
- Upon receiving the Token(s), the Client will be responsible for performing the identity proofing process within the required time period.
- If the Token(s)is lost/stolen, Client will be responsible for contacting Meditab Support and requesting a replacement Token(s). Client must deactivate the lost/stolen/damaged Token, before requesting a replacement Token(s). Client will only be provided one (1) replacement Token and in the event the replacement Token(s)is lost/stolen, Client will be responsible for purchasing a new Token.
- If the Token(s)is delivered with physical damage and is nonfunctional, Client must contact Meditab Support directly. The damaged Token(s)shall be replaced at no additional cost and the replacement Token(s) shall not be considered the one (1) free replacement provided Token(s) ordered.
- Client will be responsible for renewing EPCS service annually.
- Client will be responsible for ordering at least one Token within thirty-six (36) months after receiving EPCS [Token].
- End-users will be responsible for abiding by all practitioner responsibilities set forth by the Drug Enforcement Administration ("DEA") with regard to EPCS.
- If at any point Client is notified that IMS is non-compliant with the Electronic Prescription Application Requirements set forth by the DEA, then the end-users must immediately cease to issue electronic controlled substance prescriptions using IMS and ensure that all individuals designated to set access controls terminate their access for EPCS.
- The end-user must retain sole possession of Token, where applicable, and must not share the password, other knowledge factor, or biometric information, with any other person. The end user must not allow any other person to use Token or enter the knowledge factor or other identification means to sign prescriptions for controlled substances.

- If it is discovered that Token has been lost, stolen, or compromised or the authentication protocol has been otherwise compromised, then the end-user will be responsible for notifying the individuals designated to set access controls within one (1) business day to terminate access for signing controlled substance prescriptions and Token must be deactivated immediately. Client will be responsible for informing Meditab Support of such instances.
- IMS Prerequisites: OnChit Build. Clients currently on an older build or version, will be required to upgrade to a compatible Build before setting up EPCS.
- Clients who already have Hard Tokens can Download the Authy App from the Google App or App Store. Login into the App with a phone number. (It can be any number not necessarily USA's) The phone should have an active data connection for doing authentication. The user will be able to add an additional number or delete the existing number here.

Use of Soft token for New clients:

- Users need to Sign up for EPCS Service as usual. But, do not have to wait for the hard token to be shipped.
- The user can login in ICC and start the authentication process.
- While authenticating, the user can skip the part of Registering hardware One-Time Password Token and directly authenticate for the soft token.

Mentioned are the Spare Token terms and Conditions:

- Additional Token(s)should be ordered after the original and the replacement Token(s) has been utilized.
- Token(s) cannot be binded to users for whom the EPCS service has been inactivated.
- Ordering an additional Token(s) does not have any effect on the renewal date. Renewal date will be in accordance with the original token order date.
- In any case, if both original and replacement tokens are damaged/lost/not in usable condition then the user will be able to bind the spare token only if either his/her mobile credentials or Authy app is active. If both of these authenticating channels are not present the user needs to inactivate the EPCS service and order a new token.
- Clients will be able to track shipping details of the original tokens and not the spare tokens.

Health Information Exchange (HIE)

- **IMS Prerequisites:** IMS 2016 build or later is required for SureScript HIE. Clients currently on an older build or version will be required to upgrade to a compatible Build before setting up of HIE. IMS build 18.1.0 or later is required to add multiple user ID's for a provider.
- Direct Address shall be generated only for providers whose Information have been submitted in the SureScript HIE Sign Up Form filled up after purchasing the services.
- Clients will be solely responsible to ensure that data provided in the HIE Sign Up form is accurate and correct. Meditab shall not be responsible for delays occurring in the SureScript HIE Setup due to inaccurate data provided by Client in the HIE sign-up form.
- SureScript HIE is a third-party solution. Meditab shall not be responsible, nor will be liable to Client, for interruptions in SureScript HIE services . Meditab, however, shall make every effort to work with SureScript HIE to solve issues coming from their end. Meditab shall not provide guaranteed timelines for resolutions for such issues.

IMS Care Portal

A. Prerequisites

- **IMS Prerequisites:** IMS V14.0 SP1 Build 25 or later is required for IMS CarePortal. Clients currently on an older build or version will be required to upgrade to a compatible Build before installing IMS CarePortal.
- Upgrade costs will vary according to the SyBase upgrade pricing. Clients should contact its sales representative for any inquiry into upgrading the system.

B. Workstation or Server Must Satisfy the Following Specifications:

- Be in a network and not virtual;
- LogMeIn or RDP (Remote Desktop Protocol) availability;
- 2.4 GHz or higher dual core 32-bit (x86) or 64-bit (x64) processor;
- 8 GB of system memory or RAM (12 GB of system memory RAM shall be required if IMSGo, IMS PatientApp, IMS OnArrival and IMS CarePortal are hosted on the same server 40 GB of available disk space);
- 1 GB Network Interface Card (NIC) for network connectivity;
- 100 Mbps Network Interface Card (NIC) for network connectivity;
- 30 GB of available disk space;
- 4 GB of system memory or RAM;
- One static IP or a fixed external IP must be forwarded to the Patient Portal (web server) machine;
- The internet speed should be at least 5 Mbps or more;
- Port 80 and 443 is open and unused by any other application;
- Windows Server 2012 (64-bit) as the operating system;
- Patient Portal requires SSL;
- Domain/subdomain Registration;
- Binding of static IP with Domain/Subdomain; and
- Dedicated web server machine. No other software should be installed in the same computer and the machine should not be put to daily use.

All prerequisites and specifications must be met at the latest within twenty-one (21) days after the implementation begins. In case of new clients, the ninety (90) days expiration period of IMS Care Portal Licenses will commence from the IMS Go-Live date.

C. Implementation

IMS CarePortal shall be implemented upon Client's request and prior payment of associated fees as detailed in the proposal provided to Client. Additional fees might apply for Client's Policy upload on IMS CarePortal.

The implementation process will be as outlined in an Implementations Plan presented to the Client. Meditab will assign an IMS CarePortal implementation manager who will serve as a single point of contact between Meditab and Client during the implementation process.

FACTORS AFFECTING IMPLEMENTATION. Client understands and acknowledges that implementation of the IMS CarePortal and the provision of any related Implementation Services might be affected by numerous factors that may alter or delay the dates of completion thereof, including without limitation: hardware procurement and installation, third party software installation, telecommunication connectivity, fax lines, practice size, number of locations, and Client changes.

D. Implementation Schedule

Week 1 - 3 Prerequisite Gathering

During these weeks of implementation, CLIENT shall gather all the hardware requirements for the IMS CarePortal, including separate web server, static IP address, sub domain name, SSL certificates, and Email parameters.

Week 4 - 5 Implementation and Configuration

Once the connection details and technical details of the patient portal become available, Meditab will install IMS CarePortal on the web server and will configure it within IMS on DB server. Quality Control testing will be performed to confirm that the portal is working properly.

Week 5 - 6 Training

Meditab shall conduct training for the client. Training Session shall include: Orientation session, Patient form customization and mapping, sending out the patient form and importing it back into IMS, Creating credentials for the patients Go-Live on Portal.

Client shall be responsible for allocating the recommended training time for the required staff prior to Go-Live Date. Training schedule shall be mutually agreed upon by Meditab and Client.

Client will be billed for any scheduled training cancelled with less than forty-eight (48) hours of the training date or if more than three (3) scheduled trainings are cancelled.

E. Estimated Dates and Delays

All proposed ImplementationDates including completion of training and Go-Live date), are estimates only and are subject to change from time to time. Meditab shall not be responsible for any delays in implementation due to factors out of Meditab's control or for Client's non compliance with the Implementation Schedule.

Meditab reserves the right to cancel the implementation of IMS CarePortal if the project is not initiated within ninety (90) days after the payment of the fees, or if Client substantially changes the scope of the project. Under such circumstances, Client will have to re-purchase IMS CarePortal Services. Pre-paid fees are not refundable and shall be credited upon future purchases.

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G. Client Responsibilities

Client acknowledges that any delays in performing Client's responsibilities related to Implementation Dates shall result in a delay in the proposed Training Schedule and Go-Live Date.

Client agrees to pay for any costs incurred by Meditab resulting from Client-initiated changes to the implementation schedule.

IMS Care Portal Platinum - Clinic Policy Update:

Additional fees are applicable to Client's requests to add a customized **Clinic Policy** on IMS CarePortal.

IMS Care Web

A. Prerequisites

- **IMS Prerequisites:** IMS Build 34 or later is required for IMS Care. Clients currently on an older build or version will be required to upgrade to a compatible Build before installing IMS Care.
- Upgrade costs will vary according to the SyBase upgrade pricing. Clients should contact its sales representative for any inquiry into upgrading the system.
- RMQ client service is a light weight service which needs to be deployed by Meditab's deployment team to the client's server.
    - Minimum required server configuration 4GB RAM and 4-Core CPU.
- Supported platforms for IMS Care:
    - iPhone and iPad
        - Recommended browser: Safari
        - Minimum supported version 15
    - Android phone
        - Recommended browser: Chrome
        - Minimum supported version 90
    - Desktop
        - Recommended browsers: Google Chrome [Windows], Safar [Mac]
        - Minimum supported Chrome version 90
        - Minimum supported safari version 16
    - Screen Resolutions
        - Minimum supported screen resolution in desktop is 1024*768 px
        - Best supported screen resolution for desktop is 1920*1080 px

B. Implementation

IMS Care shall be implemented upon Client's request and prior payment of associated fees as detailed in the proposal provided to Client.

The implementation process will be as outlined in an Implementations Plan presented to the Client. Meditab will assign an IMS CarePortal implementation manager who will serve as a single point of contact between Meditab and Client during the implementation process.

FACTORS AFFECTING IMPLEMENTATION. Client understands and acknowledges that implementation of the IMS CarePortal and the provision of any related Implementation Services might be affected by numerous factors that may alter or delay the dates of completion thereof, including without limitation: hardware procurement and installation, third party software installation, telecommunication connectivity, fax lines, practice size, number of locations, and Client changes.

D. Implementation Schedule

Step 1: Prerequisite Gathering

- Confirm the domain/URL where the IMS Care will be hosted.
- Email parameters through which email would be sent.
- IMS Care URL to be updated on client's website.

Step 2: Configuration

Once the pre-requisites are confirmed, Meditab will install RMQ on the client's server and will configure IMS Care. Quality Control testing will be performed to confirm that the portal is working properly.

Step 3: Training and Configuration

Meditab shall conduct training for the client. Training Session shall include: Orientation session, detailed explanation of IMS Care features (speciality wise), sending out the patient form and importing it back into IMS, creating credentials for the patients Go-Live on Portal.

All the configurations for IMS Care required by the client will be done by the Meditab team.

Client shall be responsible for allocating the recommended training time for the required staff prior to Go-Live Date. Training and configuration schedule shall be mutually agreed upon by Meditab and Client.

Clients will be billed for any scheduled training cancelled within less than forty-eight (48) hours of the training date or if more than three (3) scheduled trainings are cancelled.

E. Estimated Dates and Delays

All proposed ImplementationDates including completion of training and Go-Live date, are estimates only and are subject to change from time to time. Meditab shall not be responsible for any delays in implementation due to factors out of Meditab's control or for Client's non compliance with the Implementation Schedule.

Meditab reserves the right to cancel the implementation of IMS Care if the project is not initiated within ninety (90) days after the payment of the fees, or if Client substantially changes the scope of the project. Under such circumstances, clients will have to re-purchase IMS CarePortal Services. Pre-paid fees are not refundable and shall be credited upon future purchases.

G. Client Responsibilities

Client acknowledges that any delays in performing Client's responsibilities related to Implementation Dates shall result in a delay in the proposed Training Schedule and Go-Live Date.

Client agrees to pay for any costs incurred by Meditab resulting from Client-initiated changes to the implementation schedule.

IMS Care App

- **IMS Prerequisites:** IMS 34 build or later is required for IMS Care App. Clients currently on a previous build or version, will be required to upgrade to a compatible Build before being able to install IMS PatientApp.
- Clients need to upgrade IMS and IMS Care Web according to the current compatible Build of IMS Care App. Upgrade costs will vary according to the Sybase upgrade pricing.
- Minimum Device Operating System Requirements:
    - For Android
        - Android version 11.0 or later
        - Screen size 6” or bigger for optimum performance
        - At least 5 mbps of internet speed for optimum performance
    - For iOS
        - iOS version 15 or later
        - Screen size 6” or bigger for optimum performance
        - At least 5 mbps of internet speed for optimum performance
    - At least 4 GB of RAM for optimum performance for all devices.
- All prerequisites should be fulfilled within fifteen (15) days of execution of the IMS PatientApp Agreement. Implementation should begin no later than twenty-one (21) days from the execution of the IMS PatientApp Agreement.
- RMQ client service is a light weight service which needs to be deployed by Meditab’s deployment team to the client's server.
    - Minimum required server configuration 4GB RAM and 4-Core CPU.

IMS Chat And Bi-Directional Texting Feature

IMS Chat (Desktop Application) Prerequisites

- Client agrees to comply with all the terms and conditions of the License Agreement, and the applicable attachments/schedules referenced thereto.
- IMS 22 or later is required. Clients currently on an older build or version will be required to upgrade to a compatible Build before installing IMS Chat Desktop application.
- IMS Chat Application is available for both Windows and iOS users.
- IMS Chat Desktop application is a per user application(exe) or dmg file.
- Installation on/for all the systems/users in the same network can be done by the client IT. Meditab will not be able to set up the same.
- IMS Chat Desktop application will be automatically updated by Meditab.
- Two or more users using the same system(workstation) cannot use the same login/access credentials.
- Client will be able to access the chat history for the last three (3) months. A longer time frame of the chat history might be available upon client's request and additional storage charges might apply.
- Clients migrating from IMS Chat Inbuilt version to Desktop application, will not be able to migrate chat history of the older version.

Bi-Directional Texting Feature Pre-requisites

- IMS Build 35 (35.1.1) or later and Intouch SMS license is required. Clients currently on a previous build or version of IMS, will be required to upgrade to a compatible Build to enable this feature.
- The overages will be billed in the monthly overages as per the InTouch SMS plan of the client.
- Additionally, IMS Intouch SMS prerequisites and IMS Chat prerequisites will be applicable.
- The url **https://<client_id>sms.imscareportal.com** should be whitelisted on the machines where the IMS Chat application is installed.
- Port **8849** should be opened for communication:
    - on the **Intranet** if the users are using the IMS Chat app from within the clinic's network.
    - on the **Internet** if the users are using the IMS Chat app from outside the clinic's network.

IMS FaxCloud

A. Prerequisites

IMS Prerequisites: IMS v14.0 SP1 Build 10232017 or later is required for IMS FaxCloud. Clients currently on a previous build or version will be required to upgrade to a compatible Build before being able to install IMS FaxCloud. Upgrade costs shall vary according to the SyBase upgrade pricing. Clients shall contact its sales representative for any inquiry into upgrading their current system.

Further to enhance Fax generate logic and improve the quality of fax, we have made few technical changes in IMS 35 & 37 Builds, that are supported on Windows 2012 R2 and later Windows Server OS.

B. If Assigning a New Number:

The fax number with the fax cloud setup can be generated either as a **toll-free number** or as a **local number** based on the **area code** provided by the client. If a local number is preferred, the client will need to specify the desired area code.

If the client wishes to update the **caller ID** and **caller name** for the toll-free fax number, this information must be provided **prior to the fax cloud setup**.

There is no upfront fee for assigning new numbers. Meditab will provide a new number (Toll Free #) to the client within max of (2) business days.

C. If Porting an Existing Number:

- In order to port an existing number into IMS FaxCloud, Client shall submit a Letter of Authorization (LOA) to Meditab from their existing Fax Cloud Service Provider authorizing the transfer of the number and the latest invoice. Upon submission of the LOA and the invoice, Meditab will confirm whether the number provided is portable or not.
- It is the Client's responsibility to ensure that the information provided in the LOA is accurate. Inaccurate information may lead to cancellation of porting and will cause subsequent delays for which Meditab shall not be responsible.
- Clients should not cancel their current Fax Service at any time during the time of porting an existing number. Meditab will notify the client once the porting process is completed.

- Meditab is able to port existing numbers from almost any telecommunications company; however, some fax service providers won't allow porting out an existing number. Therefore, Meditab does not guarantee that an existing number shall be ported in all cases. Client must confirm with its current fax service provider that their existing number can be ported away and confirm that it is not connected to a DSL circuit or any other line that may be at risk of cancellation due to the porting process.
- If the client wishes to port the fax number out from IMS, they need to contact their new phone provider for details. It is not Meditab's responsibility to port out the fax number. Clients need to provide their fax invoice to the new service provider.
- To port the fax number out from IMS Fax Cloud: The client needs to contact their new phone provider informing them that they want to port the fax number to them and they will provide the LOA that needs to be filled by the client. Meditab\VAR partner accounting needs to provide the latest bill of the client. Clients need to fill the LOA based on the bill. Please note only authorized persons need to sign the LOA. If any additional details are required in the LOA then contact issupport@meditab.com.

D. SLA:

IMS FaxCloud is a third-party solution. Therefore, Meditab shall not be responsible for interruptions in the services resulting from third party vendors end. Meditab, however, shall make every effort to work with the third-party vendor in resolving issues occurring from the third party vendor's side. Meditab does not guarantee any timelines for the resolutions of any issues.

E. URLs which need to be white-listed:

- api.medpharmservices.com
- portal.medpharmservices.com
- mps.auth0.com
- *.googleapis.com

F. Pricing:

Fax pricing is based on the destination. Standard Plan(s) includes and is currently supported for the USA and Canada only.

IMS InTouch

A. Prerequisites

IMS Prerequisites: IMS Build 25 or later is required for IMS InTouch. Clients currently on a previous build or version, will be required to upgrade to a compatible Build before being able to install IMS InTouch.

With Build 28 update, client IT will have to whitelist the https://ims-it.com URL.

B. General terms

- Pricing for IMS InTouch will be based on a quote sent to Client by a Meditab sales representative. Client shall thoroughly review the quote, sign it and submit it to Meditab.
- SMS pricing is based on the destination and type of message the user is sending, as well as the carrier to which the SMS is being sent. Standard plan(s) includes USA and Canada only. For any additional locations, clients need to reach out to their Account Manager/Sales Rep. Additional charges may be applicable.
- If Client has been offered a special pricing under any current or previous offer, then that pricing will be subject to change per the terms of the previous agreement.
- Billing shall be based on the amount of messages sent, not requests.
- Maximum character count per message is 160. Messages containing more than 160 characters will split and fees per each message shall apply. Most devices supporting SMS will reassemble them into a single message. Note that a special header needs to be appended to handle linked messages, therefore each segment of the message can only contain up to 153 characters.
- Overage charges, charged over and above the minimum number of SMSs provided in the purchased plan.

  *1 SMS(text) = 160 characters

- As part of the SMPP(Short Message Peer-to-Peer) specifications, when we receive a request that includes more than 160 characters we must split up the messages in order to send them. They will then be reassembled into a single message on most handsets.

- We will bill per message, not per request. For example, if the client sends a message with 200 characters to a US mobile number, they are charged for 2 messages. Note that a special header needs to be appended to handle concatenated messages, so each segment can only contain up to 153 characters.

- Messages with one or more non-GSM characters have to be sent using UCS-2 encoding and can only contain 67 characters per segment for multi-part messages. Therefore, sending a message with 150 characters that include a non-GSM character would be considered 3 messages in the said example.
- Unicode characters include characters from different alphabets, symbols, as well as some punctuation commonly created by word processing applications, including "long dashes" and "curly apostrophes". Example: "Ã" is considered Unicode. Messages which contain any Unicode may only be 70 characters in length, not 160 like a normal SMS message.
- When the client SMS message is sent to our system, our code evaluates whether or not the message contains Unicode characters. If there are Unicode characters present, the message is sent using Unicode encoding. If not, the message is sent using GSM 3.38 encoding.
- We will send Unicode-encoded messages up to 160 characters long, but the message will split into roughly 70 character long chunks.
- To avoid messages from being split in the future you may want to avoid composing SMS messages in word processing programs, and use simple text editors instead, but any special characters such as the above will always be considered Unicode.

C. Cancellation or Change of Service

- Requests for cancellation must be sent to accounting@meditab.com. No refunds will be given for prepaid fees.
- Any request for changes of an SMS plan needs to be made directly with the respective account manager. Changes in SMS plans shall be deemed effective thirty (30) days after such a request is made.

D. Practice Points

- Get opt-in consent from each end user before sending any communication to them, particularly for marketing or other non-essential communications**.**
- Only communicate during an end user's daytime hours unless it is urgent.
- SMS campaigns should support HELP/STOP messages, and similar messages, in the end user's local language.
- Do not contact end users on do-not-call or do-not-disturb registries.

IMS OnArrival

- **IMS Prerequisites:** IMS 29.1.0 Build or later is required for IMS OnArrival. Clients currently on a previous build or version, will be required to upgrade to a compatible Build before being able to install IMS OnArrival.
- Hardware requirements might apply depending on the Value Added Services acquired. Clients should consult with a Meditab representative for further details.
- If IMS OnArrival, IMSGo, IMS PatientApp, and IMS CarePortal are hosted on the same server, 12 GB of RAM are recommended for optimum functionality.
- From Build 29 (General) onwards
    1) Minimum Android version is 9.0 and we are recommended to use Android version 13 for long-term use and compatibility.
    2) For iOS devices, the minimum IOS version 13.0 is required though we recommend iOS 16 or later.
    3) A device with screen size of at least 8.9 inch and 720 x 960 pixels resolution is recommended for optimum performance. **Phablets are not supported.**
- Ports 80 and 443 must be open on the system and unused by any other application.
- Public IP of the server is required to access it outside the domain.
- Quick Note setup and Customization needs to be purchased, if patient records will be completed within the App.
- At least 4GB of RAM for optimum use for all devices.
- Recommended FrontCamera: 5 MP and RearCamera: 8MP
- At least 5 mbps of internet speed for optimum use.

IMSGo

- **IMS Prerequisites:** IMS 29 build or later is required for IMSGo. Clients currently on a previous build or version will be required to upgrade to a compatible Build before being able to install IMSGo.
- Available for Android (9.0 or later). A device with screen size of at least 6" and at least 5 mbps of internet speed are recommended for optimum performance.
- Available for Apple iOS (14 or later). A device with screen size of at least 6" and at least 5 mbps of internet speed are recommended for optimum performance.
- At least 4GB of RAM is recommended for optimum performance in all devices.
- Clients using IMSGo, IMS PatientApp, IMS OnArrival and IMS CarePortal hosted on the same server should have at least 12 GB of RAM available for optimum performance. For other configurations, at least 8 GB of RAM (i.e. 4 GB for IMSGo and another 4GB for IMS PatientApp and IMS OnArrival combined) is recommended. A sales representative and/or a technical support team member should be contacted to determine which are the minimum recommendations needed for optimum performance of the applications depending on Client's current configuration.

Workstation or Server Must Satisfy the Following Specifications:

- Be in a network and not virtual;
- LogMeIn or RDP (Remote Desktop Protocol) availability;
- Windows Server 2012 (64-bit) or later as the operating system;
- Port 80 and 443 is open and unused by any other application;
- Has a sound card and an audio driver(This is required in case the client has subscribed for Transcription); and
- One static IP or a fixed external IP should be forwarded to the workstation or server. If there is no static IP address, one can be requested from the Internet Service Provider (ISP).
- A public IP of the server is required to access it from an outside domain.

IMS PatientApp

- **IMS Prerequisites:** IMS 29 build or later is required for IMS PatientApp. Clients currently on a previous build or version, will be required to upgrade to a compatible Build before being able to install IMS PatientApp.
- Clients need to upgrade IMS and CarePortal according to the current compatible Build of IMS Patient App. Upgrade costs will vary according to the Sybase upgrade pricing.
- Workstation or Server Must Satisfy the Following Specifications:
  - Be in a network and not virtual;
  - LogMeIn or RDP (Remote Desktop Protocol) availability;
  - 2.4 GHz or higher dual core 32-bit (x86) or 64-bit (x64) processor;
  - 1 Gbps Network Interface Card (NIC) for network connectivity;
  - 40 GB of available disk space;
  - 4 GB of system memory or RAM;
  - One static IP or a fixed external IP must be forwarded to the IMS Patient App (web server) machine;
  - The internet speed should be at least 5 Mbps or more;
  - Port 80 and 443 is open and unused by any other application
  - Windows Server 2012 (64-bit) or later as the operating system;
  - SSL should be mandatorily applied to the IMS Patient App;
  - Domain/subdomain Registration;
  - Binding of static IP with Domain/Subdomain; and
  - It is recommended not to use the web server machine for installation of any other software and must not be put to daily use.
- Minimum Device Operating System Requirements:
  - For Android
    - Android version 9.0 or later
    - Screen size 6” or bigger for optimum performance
    - At least 5 mbps of internet speed for optimum performance
  - For iOS
    - iOS version 14 or later
    - Screen size 6” or bigger for optimum performance
    - At least 5 mbps of internet speed for optimum performance
  - At least 4GB of RAM for optimum performance for all devices.

- All prerequisites should be fulfilled within fifteen (15) days of execution of the IMS PatientApp Agreement. Implementation should begin no later than twenty-one (21) days from the execution of the IMS PatientApp Agreement.
- Clients with IMS CarePortal already implemented, can use the same server for implementation of IMS PatientApp provided that all above prerequisites are met at the time of implementation of IMS CarePortal.
- IMS PatientApp prerequisites are subject to change in the future Build of IMS PatientApp. It shall be Client's sole responsibility to accommodate all the prerequisites to use IMS PatientApp.
- Clients using IMSGo, IMS PatientApp, IMS OnArrival and IMS CarePortal hosted on the same server should have at least 12 GB of RAM available for optimum performance. For other configurations, at least 8 GB of RAM (i.e. 4 GB for IMSGo and another 4GB for IMS PatientApp and IMS OnArrival combined) is recommended. A sales representative and/or a technical support team member should be contacted to determine which are the minimum recommendations needed for optimum performance of the applications depending on Client's current configuration.

IMS EasySign

- **IMS Prerequisites:** IMS 29 build or later is required for IMS EasySign. Clients currently on a previous build or version will be required to upgrade to a compatible Build before being able to install IMS EasySign app..
- Hardware requirements might apply depending on the Value Added Services acquired. Client should consult with a Meditab representative for further details.
- If IMS OnArrival, IMSGo, IMS PatientApp, and IMS CarePortal are hosted on the same server, 12 GB of RAM are recommended for optimum functionality.
- From Build 29 (General) onwards
    - Minimum Android version is 9.0 and we are recommended to use Android version 13 for long-term use and compatibility.
    - For iOS devices, the minimum IOS version 13.0 is required and we recommend using iOS OS version 16 for long term use and compatibility.
    - A device with screen size of at least 640 x 480 pixels (android) and 8.3 inch (iOS) is minimum required for optimum performance. A device with screen size of at least 960 x 720 pixels (android) and 12.9 inch (iOS) is recommended for optimum performance. Phablets are not supported.
- Ports 80 and 443 must be open on the system and unused by any other application.
- Public IP of the server is required to access it outside the domain.
- HTML Setup
- At least 4 GB of RAM is required for the application to work, and we recommend 8GB of RAM for optimum use for all devices.
- At least 5 mbps of internet speed for optimum use.

Interface

- For lab interfaces, Client shall be solely responsible to communicate with the laboratory of its interest to obtain the required interface between that specific lab and IMS. The lab will be the entity paying for the costs incurred by Meditab for developing the interface. If the lab refuses to pay Meditab for developing the interface and Client is still interested in obtaining the interface, Client shall be responsible to pay the costs incurred by Meditab for developing the requested interface.
- For immunization interfaces, it will be Client's responsibility to first complete their registration with the registry of its choosing before requesting Meditab the development of the necessary interface. Client shall be responsible to pay the costs incurred by Meditab for developing the requested interface.
- For device Interfaces, Client shall be solely responsible to contact its respective computer manufacturer IT team to configure the computer as needed according to the interface requirements. Meditab shall not be responsible for any computer malfunction. Client shall be responsible to pay the costs incurred by Meditab for developing the requested interface.
- For third party interfaces, Client will be responsible to communicate with the third party of its interest to obtain the required interface between that specific third party and IMS. Either the client or third party will be the entity paying for the costs incurred by Meditab for developing the interface.
- Client shall be responsible for paying the cost of any support application needed to run the requested interface, if any.
- Client shall be responsible for paying applicable support fees associated with the requested interface.
- It will be the Client’s or the Lab’s IT team to ensure there will be no connectivity issues.
- Meditab represents that the interface developed by Meditab upon Client’s request will substantially perform the intended functions for which it was developed. Clients must notify Meditab in writing of the discovery of any material defects in the interface. Meditab shall provide a correction of any material defects or provide workarounds in a reasonable time frame. Notwithstanding the foregoing, Meditab provides no warranties whatsoever with respect to the interface.
- In no event shall Meditab be liable for any indirect, special, consequential, incidental or exemplary damages, or for any lost profits, savings or revenues of any kind, however such damages and losses may be caused, due to the use of the interface or

for any delay or non performance of the interface due to any customization or development done to the interface without Meditab's approval.

- Meditab shall not be responsible for interface denials from any third parties.
- For any Interface project, Meditab will follow-up three (3) times via email or will call two (2) times to Lab/Third party. If no communication is received, the Client shall be responsible to communicate with the Lab/Third Party.
- Any proposed timeline for the development of an Interface shall be solely for implementation and testing purposes. "Go live" date will be subject to the Client's confirmation. For lab interfaces, a timeline shall be established once a lab project manager is assigned.

Pre-requisites:

S/No	Type of Interface	Name of interface	Limitation/Prerequisites	Timeline (in days)
1	Lab interface	Quest(Uni & Bi)	• Client server should have 3.5 .net framework version Minimum Build of IMS required is Build 10232017 Database Server should be accessible for Meditab Team	10
		Labcorp(Uni & Bi)	• Minimum Build of IMS required is Build 10232017 Database Server should be accessible for Meditab Team	14
		Custom(Uni & Bi)	• Client server should have 3.5 .net framework version Minimum Build of IMS required is Build 10232017 Database Server should be accessible for Meditab Team	14
2	Immunization Interface	State-wise Registry(Export) - Unidirectional	• Client server should have a 3.5 .Net framework version. • Database Server should be accessible for Meditab Team Meditab supports this interface for all the IMS Build, however, the latest IMS Build would be	10

			the preferred and recommended Build to the client.	
		Bidirectional interface	• Minimum Build of IMS required is Build 10232017 Database Server should be accessible for Meditab Team	21
3	Hospital Interface	ADT: Export	• Database Server should be accessible for Meditab Team	10
		ADT: Import	• Meditab supports this interface for all the builds, but it would be better if the client is updated with the latest Build. Database Server should be accessible for Meditab Team	14
		DFT: Export (Single/batch)	• No limitations for single export. For batch export: Minimum Build of IMS required is Build 10232017 Database Server should be accessible for Meditab Team	10
		DFT: Import	• Meditab supports this interface for all Builds, however, the latest Build is recommended.	14
		SIU: Export	• No limitations	10
		SIU: Import	• Meditab supports this interface for all Builds, however, the latest Build is recommended.	14
4	Device Interface	Ultrasound/Dicom Interface (SonixTouchQ+)	• Meditab supports GE, Siemens, BK Ultrasound interface. Other vendor's capability and support shall be subject to confirmation. • Client should be updated with latest Build	14

		Roche	• Confirm with the machine vendor. Meditab supports Cobas E-411.with Cobas protocol. • Roche IT should be onsite while Meditab performs testing. • A separate system is required for the Roche interface. That system should be directly connected to the Roche device via ethernet cable. • Machine support and contact number and machine serial number should be given as soon as the contract is signed	21
		Immulite	• Immulite 1000, Immulite 2000 supported by Meditab. Other machine vendors will require confirmation. • A separate system is required which should be directly connected with Immulite Device via Ethernet Cable. • Machine support and contact number and machine serial number should be given as soon as the contract is signed.	21
		Tosoh	• Tosoh AIA-360, AIE-900 supported by Meditab. Other machine vendors will require confirmation. • A separate system is required which should be directly connected with Tosoh Device via Ethernet Cable.	21
		Hamilton Thorne	• Confirmation required in order to proceed.	14
		Phillips Affiniti 70	• Meditab supports Affinity 70.	14
		Midmark	• 1) For hosting clients, they must reach out to Midmark for the software Midmark IQPath RDP or Citrix must be purchased through Midmark. Additional charges may apply. 2) From IMS Build 25, Midmark v10 is supported by IMS. 3) Electronic request:	1

			http://www.midmark.com/how-to-buy Phone: 1-800-MIDMARK (643-6275). 4) Midmark has discontinued the Spirometer product from October 7, 2022 and will only provide support to current customers through 2027 or until components are no longer available.	
		Compas2	● Clients should agree to the ComPAS2 system requirements. ● A separate SQL and App Server is preferred. If a combined server is used, minimum combined requirements must be met. ● If the current server does not meet the resource requirements, the client will bear the additional cost for upgrading resources. ● **Resource Requirements (Separate Servers)**: — *SQL Server*: 1–10 users: 2 vCPUs / 12 GB RAM 11–20 users: 3 vCPUs / 24 GB RAM 21+ users: 4 vCPUs / 32 GB RAM — *App Server*: 1–10 users: 3 vCPUs / 12 GB RAM 11–20 users: 4 vCPUs / 24 GB RAM 21+ users: 6 vCPUs / 32 GB RAM ● **Resource Requirements (Combined Server)**: 1–10 users: 4 vCPUs / 24 GB RAM 11–20 users: 6 vCPUs / 32 GB RAM 21+ users: 6 vCPUs / 48 GB RAM	14
		NOAH	● Clients must coordinate with their IT team to provide **admin access to the NOAH server**. ● **.NET Framework 4.8** must be installed on the NOAH server — this is the **client's IT responsibility**. ● The client must notify Meditab **before performing any NOAH updates**, as interface verification is required. ● The following **ports must be open and accessible on NOAH server**: » 8000	14

			» 8001 » 8080 » 8081 ● **Deployment Scenarios**: — If a **single NOAH server** is used with multiple NOAH client machines, the **client is responsible for managing all NOAH client installations and configurations** across workstations. — If **separate NOAH servers** are used per workstation, each must meet the above requirements individually.	
		Feno	● Supported by Meditab in all devices and for all the builds.	14
5	CCDA	CCDA-Export	● Requirements will vary depending on the registry/third party. . ● Client should be on the latest IMS Build.	14
6	Third Party Interfaces	Import/Export	● Requirements will vary depending on the third party capabilities.	21

MIPS – Per Provider

Plus Package - Reporting for 2024 (365 days)

Medpharm's Registry Reporting Service ("Registry") will assist clients to choose at least six (6) CMS Quality measures; the Promoting Interoperability Measures and at least two (2) improvement activities to be reported for one (1) year. This package includes four (4) hours of training on how to report the chosen category and to set up Data validation and submission to CMS. Assistance in the attestation is also part of the package

> Services

1. Assist Client with choosing Quality measures applicable to their practice (at least six (6))
2. Education/Training on how to achieve all categories
3. Attestation for IA
4. Attestation for PI
5. Data submission for Quality

> Terms & Conditions

1. Medpharm will assist clients with choosing Quality, Improvement Activities and Promoting Interoperability measures to use.
2. Four (4) hours of training will be included in this package. Additional training hours will be charged accordingly.
3. Report analysis will be done and feedback will be given based upon the analysis.
4. Medpharm will submit the required file to CMS for the Quality and IA and assist in attestation for Promoting Interoperability.
5. Medpharm makes no claim that by submitting the files, Eligible Professionals (EP) will not be subjected to 2026 payment adjustment.
6. Medpharm does not and will not edit any content before submitting the files to CMS. The EP is solely responsible for managing and validating the count of the measures and other parameters required pursuant to the attestation. In no event will Medpharm be liable to the Client for any damages arising from or relating to the content submitted.
7. Client is solely responsible for providing the correct information needed in the attestation. In no event will Medpharm be liable to the Client for any damages arising from or relating to the information provided.
8. Medpharm can submit the data via Qualified Registry or EHR only
9. Medpharm will submit data gathered for one (1) year from the chosen category.

10. This contract will remain in effect up to the submission deadline of MIPS program 2024.
11. Performance feedback is provided at least four times per performance period, for which client is responsible to provide acknowledgement through email on receiving it.
12. Medpharm reserves the right to terminate this agreement and discontinue services at any time.

Standard Package Quality and Improvement Activities (IA) - Reporting for 2024 (365 days)

Medpharm's Registry Reporting Service ("Medpharm Registry") will assist clients with choosing at least six (6) Quality measures applicable to their practice to report for 365 days. This package includes two (2) hours of training on how to report the chosen category and the set up. Data validation and submission of data to CMS is also part of the package.

> Services

1. Assist Clients with choosing Quality measures applicable to their practice (at least six (6)).
2. Education/Training on how to report the chosen measures.
3. Data validation for Quality measures.
4. Data submission for the Quality measures and Improvement Activities.

> Terms & Conditions

1. Medpharm will assist clients in choosing Quality measures to use.
2. Two (2) hours of training on how to report the measures will be included in this package. Additional training hours will be charged accordingly.
3. Report analysis will be done and feedback will be given based upon the analysis.
4. Medpharm will submit the required file to CMS.
5. Medpharm makes no claim that by submitting the file Eligible Professionals (EP) will not be subjected to 2026 payment adjustment.
6. Medpharm does not and will not edit any content before submitting the file to CMS. The EP is solely responsible for managing and validating the count of the measures and other parameters required pursuant to the attestation. In no event will Medpharm be liable to the Client for any damages arising from or relating to the content submitted.
7. Client is solely responsible for providing the correct information needed in the attestation. In no event will Medpharm be liable to the Client for any damages arising from or relating to the information provided.
8. Medpharm will submit the data via Qualified Registry or EHR only.
9. Medpharm will submit data gathered for 365 days from the measures chosen.

10. Clients can upgrade to another package if desired. Assistance will be given based on the new package.
11. This contract will remain in effect up to the submission deadline of MIPS 2024.
12. Performance feedback is provided at least four times per performance period, for which client is responsible to provide acknowledgement through email on receiving it.
13. Medpharm reserves the right to terminate this agreement and discontinue services at any time.

Standard Package Quality and Promoting Interoperability (PI) - Reporting for 2024 (365 days)

> Services

1. Assist Clients with choosing Quality measures applicable to their practice (at least six (6) .
2. Education/Training on how to report chosen measures.
3. Attestation for PI.
4. Data submission for Quality.

> Terms & Conditions

1. Medpharm will assist clients with choosing Quality and Promoting Interoperability measures to use.
2. Two (2) hours of training will be included in this package. Additional training hours will be charged accordingly.
3. Report analysis will be done and feedback will be given based upon the analysis.
4. Medpharm will submit the required file to CMS for the Quality and assist in attestation for Promoting Interoperability.
5. Medpharm makes no claim that by submitting the files, Eligible Professionals (EP) will not be subjected to 2026 payment adjustment.
6. Medpharm does not and will not edit any content before submitting the files to CMS. The EP is solely responsible for managing and validating the count of the measures and other parameters required pursuant to the attestation. In no event will Medpharm be liable to the Client for any damages arising from or relating to the content submitted.
7. Client is solely responsible for giving the correct information needed in the attestation. In no event will Medpharm be liable to the client for any damages arising from or relating to the information provided.
8. Medpharm can submit the data via Qualified Registry or EHR only.
9. Medpharm will submit data gathered for one year from the chosen category.

10. This contract will remain in effect up to the submission deadline of MIPS program 2024.
11. Performance feedback is provided at least four times per performance period, for which client is responsible to provide acknowledgement through email on receiving it.
12. Medpharm reserves the right to terminate this agreement and discontinue services at any time.

Standard Package Promoting Interoperability (PI) and Improvement Activities (IA) - Reporting for 2024 (90 - 365 days)

1. *This is for clients reporting under ACO/APM.
2. Medpharm's Registry Reporting Service ("Medpharm Registry") will assist clients with meeting the Promoting Interoperability measures and the Improvement Activities applicable to their practice to report for up to 365 days. This package includes two (2) hours of training on how to report the chosen category and the set up. Data validation and submission of data to CMS is also part of the package.

> Services

1. Assist Clients with the setup of PI and IA measures applicable to their practice.
2. Education/Training on how to report the chosen measures.
3. Data validation for PI measures.
4. Data submission for the PI measures.

> Terms & Conditions

1. Medpharm will assist clients with setting up measures to use.
2. Two (2) hours training on how to report the measures will be included in this package. Additional training hours will be charged accordingly.
3. Report analysis will be done and feedback will be given based upon the analysis.
4. Medpharm will submit the required file to CMS.
5. Medpharm makes no claim that by submitting the file Eligible Professionals (EP) will not be subjected to 2026 payment adjustment.
6. Medpharm does not and will not edit any content before submitting the file to CMS. The EP is solely responsible for managing and validating the count of the measures and other parameters required pursuant to the attestation. In no event will Medpharm be liable to the Client for any damages arising from or relating to the content submitted.

7. Client is responsible for giving the correct information needed in the attestation. In no event will Medpharm be liable to the Client for any damages arising from or relating to the information provided.
8. Medpharm will submit the data via Qualified Registry or EHR only.
9. Medpharm will submit data gathered for 90 to 365 days from the measures chosen.
10. Clients may upgrade to a higher-tier package at any time during the term of the Agreement, subject to applicable fees and terms. Downgrades to lower-tier packages are not permitted once the Agreement has commenced.
11. This contract will remain in effect up to the submission deadline of MIPS program year 2024.
12. Medpharm reserves the right to terminate this agreement and discontinue services at any time.

Basic Package: Promoting Interoperability (PI) Only (Per Provider, Per Database)

Medpharm Registry will generate the file for Promoting Interoperability chosen by the client. This package includes generation of file, validation and submission or attestation of data to CMS only.

> Services

1. File generation from IMS for PI.
2. Data submission/Attestation.
3. This contract will remain in effect up to the submission deadline of MIPS program 2024.
4. Performance feedback for at least four (4) times within the reporting period.

> Terms & Conditions

1. Under this package, clients will choose Quality measures they want to report.
2. Medpharm will generate the file and validate the data using the CMS tool.
3. Medpharm will submit the required file to CMS.
4. Medpharm makes no claim that by submitting the file Eligible Professionals (EP) will not be subjected to 2026 payment adjustment.
5. Medpharm does not and will not edit any content before submitting the file to CMS. The EP is solely responsible for managing and validating the count of the measures and other parameters required pursuant to the attestation. In no event will

Medpharm be liable to the Client for any damages arising from or relating to the content submitted.

6. Client shall be solely responsible for giving the correct information needed in the attestation. In no event will Medpharm be liable to the Client for any damages arising from or relating to the information provided.
7. Medpharm will submit data gathered for 90 days to one year from the measures chosen.
8. Medpharm can submit the data via Qualified Registry or EHR only.
9. Clients may upgrade to a higher-tier package at any time during the term of the Agreement, subject to applicable fees and terms. Downgrades to lower-tier packages are not permitted once the Agreement has commenced.
10. This contract will remain in effect up to the submission deadline of MIPS 2024.
11. Performance feedback is provided at least four times per performance period, for which client is responsible to provide acknowledgement through email on receiving it.
12. Medpharm reserves the right to terminate this agreement and discontinue services at any time.

Quality, Improvement Activities (IA) and Promoting Interoperability (PI) Enhanced Submission Only (Per Provider, Per Database)

Medpharm's Registry Reporting Service ("Medpharm Registry") will generate the file, validate and submit for Quality measures, PI and IA chosen by Client to report. This package includes generation of file, validation and submission of data to CMS only.

> Services

1. File generation from IMS for Quality measures, PI and IA.
2. Data validation for Quality measures, PI and IA.
3. Performance feedback for at least four (4) times within the reporting period.
4. Data submission for all categories.
5. Assisting in attestation for PI and IA if the client will opt to choose attestation as method of submission.
6. This contract will remain in effect up to the submission deadline of MIPS program 2024.

Quality & Improvement Activities Enhanced Submission Only (Per Provider, Per Database)

Medpharm Registry will generate the file, validate and submit Quality measures and Improvement Activities chosen by the client to report. This package includes generation of file, validation and submission of data to CMS only.

> Services

1. File generation from IMS for Quality measures and IA.
2. Data validation for Quality measures and IA.
3. Performance feedback for at least four (4) times within the reporting period.
4. Data submission for the Quality measures.
5. Assisting in attestation for Improvement Activities if Client will opt to choose attestation as method of submission.
6. This contract will remain in effect up to the submission deadline of MIPS program 2024.

Quality & Promoting Interoperability Enhanced Submission Only (Per Provider, Per Database)

*This is for clients reporting under ACO/APM

Medpharm Registry will generate the file, validate and submit Improvement Activities and Promoting Interoperability measures chosen by Client to report. This package includes generation of file, validation and submission of data to CMS only.

> Services

1. File generation from IMS for PI and IA.
2. Data validation for PI and IA.
3. Performance feedback for at least four (4) times within the reporting period.
4. Data submission for PI and IA.
5. Assisting in attestation if Client will opt to choose attestation as method of submission.
6. This contract will remain in effect up to the submission deadline of MIPS program 2024.

> Terms & Conditions - For Enhanced Submission Only Packages

1. Under this package, Client will choose Quality measures they want to report.
2. Medpharm will generate the file and validate the data using the CMS tool.
3. Medpharm will submit the required file to CMS.
4. Medpharm makes no claim that by submitting the file Eligible Professionals (EP) will not be subjected to 2024 payment adjustment.

5. Medpharm does not and will not edit any content before submitting the file to CMS. The EP is solely responsible for managing and validating the count of the measures and other parameters required pursuant to the attestation. In no event will Medpharm be liable to the Client for any damages arising from or relating to the content submitted.
6. Client shall be solely responsible for giving the correct information needed in the attestation. In no event will Medpharm be liable to the Client for any damages arising from or relating to the information provided.
7. Medpharm will submit data gathered for 90 days to one year from the measures chosen.
8. Medpharm can submit the data via Registry, QCDR or EHR only.
9. Clients may upgrade to a higher-tier package at any time during the term of the Agreement, subject to applicable fees and terms. Downgrades to lower-tier packages are not permitted once the Agreement has commenced.
10. This contract will remain in effect up to the submission deadline of MIPS 2024.

>Pricing

1. Pricing will be determined by the quote sent to the client by a Medpharm sales representative. Client shall ensure receipt of the quote for MIPS 2024, and thoroughly review the pricing, terms and the offers. Clients must sign the quote and submit it to Medpharm directly. Medpharm reserves the right to change the pricing for the recurring fees at its own discretion. Medpharm shall provide one (1) month prior written notice before any pricing changes are implemented.
2. If a client has been offered a special pricing under any current or previous offer, that pricing might be subject to change as per the terms of the offer.

>Cancellation of Service

1. If Client desires to cancel report extraction for a specific EP, then Client shall contact their Account Managers for such cancellation. Clients will not be eligible for any refund of prepaid fees. Cancellation requests are required for each individual EP. Upon receipt of the cancellation request, the extraction for that EP will be stopped. Please note that all cancellation requests need to be put in by 10th March 2025. Any cancellation request put forward past the mentioned date shall not be taken into consideration.
2. Medpharm may cancel its services at any time, and Client will be entitled to a refund of unused prepaid fees.

MIPS – Per Group

Group Reporting requires a minimum of 2 providers. An additional fee per provider is applicable for more than 2 providers. Below are the packages:

PLUS Package (Full MIPS Participation for one (1) year) (Per Group, Per Database)

Medpharm's Registry Reporting Service ("Medpharm Registry") will assist clients to choose at least 6 CMS Quality measures; the Promoting Interoperability Measures and at least 4 improvement activities to be reported for 1 year. This package includes 4 hours training on how to report the chosen category and the set up Data validation and submission of data to CMS and assistance in the attestation is also part of the package.

> Services

1. Assist Client with choosing Quality measures applicable to their practice (at least 6)
2. Education/Training on how to achieve all categories
3. Attestation for IA
4. Attestation for PI
5. Data submission for Quality

> Terms & Conditions

1. Medpharm will assist clients with choosing Quality, Improvement Activities and Promoting Interoperability measures to use.
2. Four hours training will be included in this package. Additional training hours will be charged accordingly.
3. Report analysis will be done and feedback will be given based upon the analysis.
4. Medpharm will submit the required file to CMS for the Quality and IA and assist with the attestation for Promoting Interoperability
5. Medpharm makes no claim or warranty that by submitting the files, eligible professionals (EP) will not be subjected to 2026 payment adjustment.
6. Medpharm does not and will not edit any content before submitting the files to CMS. The EP shall be solely responsible for managing and validating the count of the measures and other parameters required pursuant to the attestation. In no event will Medpharm be liable to the Client for any damages arising from or relating to the content submitted.

7. Client shall be solely responsible for providing the correct information needed for the attestation. In no event will Medpharm be liable to the Client for any damages arising from or relating to the information provided.
8. Medpharm can submit the data via Qualified Registry or EHR only 9. Medpharm will submit data gathered for one year from the chosen category.
10. Clients may upgrade to a higher-tier package at any time during the term of the Agreement, subject to applicable fees and terms. Downgrades to lower-tier packages are not permitted once the Agreement has commenced.
11. This agreement will remain in effect up to the submission deadline of MIPS program 2024.
12. Medpharm reserves the right to terminate this agreement and discontinue services at any time.
13. Performance feedback is provided at least four times per performance period, for which client is responsible to provide acknowledgement through email on receiving it.

Standard Package Quality and Promoting Interoperability (PI) - Reporting for 2024 (365 days) (Per Group, Per Database)

Medpharm's Registry Reporting Service ("Medpharm Registry") will assist Client with choosing at least 6 Quality measures applicable to their practice to report for 365 days and Promoting Interoperability Measures. This package includes the set up and two (2) hours of training on how to report the chosen category. Data validation and submission of data to CMS is also included in the package.

> Services

1. Assist Clients with choosing Quality measures applicable to their practice. Provide Education/Training on how to report the chosen measures
2. Data validation for Quality and Promoting Interoperability measures
3. Data submission for the Quality and Promoting Interoperability measures

> Terms & Conditions

1. Medpharm will assist clients with choosing Quality Measures and Promoting Interoperability measures to use.
2. Two (2) hours of training on how to report the measures will be included in this package. Additional training hours will be charged accordingly.
3. Report analysis will be done and feedback will be given based upon the analysis.
4. Medpharm will submit the required file to CMS.
5. Medpharm makes no claim or warranty that by submitting the file eligible professionals (EP) will not be subjected to 2026 payment adjustment.

6. Medpharm does not and will not edit any content before submitting the file to CMS. The EP shall be solely responsible for managing and validating the count of the measures and other parameters required pursuant to the attestation. In no event will Medpharm be liable to the Client for any damages arising from or relating to the content submitted.
7. Client shall be solely responsible for providing the correct information needed in the attestation. In no event will Medpharm be liable to the Client for any damages arising from or relating to the information provided.
8. Medpharm will submit the data via Qualified Registry or EHR only.
9. Medpharm will submit data gathered for at least 90 days for Promoting Interoperability categories.
10. Clients may upgrade to a higher-tier package at any time during the term of the Agreement, subject to applicable fees and terms. Downgrades to lower-tier packages are not permitted once the Agreement has commenced.
11. This agreement will remain in effect up to the submission deadline of MIPS 2024.
12. Medpharm reserves the right to terminate this agreement and discontinue services at any time.
13. Performance feedback is provided at least four times per performance period, for which client is responsible to provide acknowledgement through email on receiving it.

Standard Package Quality and Improvement Activities (IA) - Reporting for 2024 (365 days) - (Per Group, Per Database)

Medpharm's Registry Reporting Service ("Medpharm Registry") will assist Client with choosing at least 6

Quality measures and 4 Improvement Activities (IA) applicable to their practice to report for 365 days. This package includes the set and up to two (2) hours of training on how to report the chosen category. Data validation and submission of data to CMS is also part of the package.

> Services

1. Assist Clients with choosing Quality and IA measures applicable to their practice.
2. Education/Training on how to report the chosen measures.
3. Data validation for Quality measures.
4. Data submission for the Quality measures.

> Terms & Conditions

1. Medpharm will assist clients with choosing Quality and IA measures to use.

2. Two (2) hours of training on how to report the measures will be included in this package. Additional training hours will be charged accordingly.
3. Report analysis will be done and feedback will be given based upon the analysis.
4. Medpharm will submit the required file to CMS.
5. Medpharm makes no claim or warranty that by submitting the file eligible professionals (EP) will not be subjected to 2026 payment adjustment.
6. Medpharm does not and will not edit any content before submitting the file to CMS. The EP shall be solely responsible for managing and validating the count of the measures and other parameters required pursuant to the attestation. In no event will Medpharm be liable to the Client for any damages arising from or relating to the content submitted.
7. Client shall be solely responsible for providing the correct information needed in the attestation. In no event will Medpharm be liable to the Client for any damages arising from or relating to the information provided.
8. Medpharm will submit the data via Qualified Registry or EHR only.
9. Medpharm will submit data gathered for 365 days from the measures chosen.
10. Clients may upgrade to a higher-tier package at any time during the term of the Agreement, subject to applicable fees and terms. Downgrades to lower-tier packages are not permitted once the Agreement has commenced.
11. This agreement will remain in effect up to the submission deadline of MIPS 2024.
12. Medpharm reserves the right to terminate this agreement and discontinue services at any time.
13. Performance feedback is provided at least four times per performance period, for which client is responsible to provide acknowledgement through email on receiving it.

Standard Package PI / IA - reporting for 2024 (180 - 365 days) (Per Group, Per Database)

*Clinicians reporting under ACO/APM.

Medpharm's Registry Reporting Service ("Medpharm Registry") will assist clients with meeting the Promoting Interoperability measures and the Improvement Activities applicable to their practice to report for up to 365 days. This package includes the set up and two (2) hours of training on how to report the chosen category. Data validation and submission of data to CMS is also part of the package.

> Services

1. Assist Clients with the setup of PI and IA measures applicable to their practice.
2. Education/Training on how to report the chosen measures.
3. Data validation for PI measures.
4. Data submission for the PI measures.

> Terms & Conditions

1. Medpharm will assist clients with setting up the measures to be used.
2. Two (2) hours of training on how to report the measures will be included in this package. Additional training hours will be charged accordingly.
3. Report analysis will be done and feedback will be given based upon the analysis.
4. Medpharm will submit the required file to CMS.
5. Medpharm makes no claim or warranty that by submitting the file eligible professionals (EP) will not be subjected to 2026 payment adjustment.
6. Medpharm does not and will not edit any content before submitting the file to CMS. The EP shall be solely responsible for managing and validating the count of the measures and other parameters required pursuant to the attestation. In no event will Medpharm be liable to the Client for any damages arising from or relating to the content submitted.
7. Client shall be solely responsible for providing the correct information needed in the attestation. In no event will Medpharm be liable to the Client for any damages arising from or relating to the information provided.
8. Medpharm will submit the data via ,Attestation, Qualified Registry or EHR only.
9. Medpharm will submit data gathered for 90 to 365 days from the measures chosen.
10. Clients may upgrade to a higher-tier package at any time during the term of the Agreement, subject to applicable fees and terms. Downgrades to lower-tier packages are not permitted once the Agreement has commenced.
11. This agreement will remain in effect up to the submission deadline of MIPS program year 2024.
12. Medpharm reserves the right to terminate this agreement and discontinue services at any time.
13. Performance feedback is provided at least four times per performance period, for which client is responsible to provide acknowledgement through email on receiving it.

Quality, Improvement Activities and Promoting Interoperability Enhanced Submission Only (Per Group, Per Database)

Medpharm's Registry Reporting Service ("Medpharm Registry") will generate the file, validate and submit for Quality measures, PI and Improvement Activities chosen by Client to report. This package includes generation of file, validation and submission of data to CMS only.

> Services

1. File generation from IMS for Quality measures, PI and IA.
2. Data validation for Quality measures, PI and IA.
3. Performance feedback for at least four (4) times within the reporting period.
4. Data submission for all categories.
5. Assisting in attestation for PI and IA if Client elects attestation as method of submission.

Quality & Improvement Activities Enhanced Submission Only (Per Group, Per Database)

Medpharm Registry will generate the file, validate and submit Quality measures and Improvement Activities chosen by Client to report. This package includes generation of file, validation and submission of data to CMS only.

> Services

1. File generation from IMS for Quality measures and IA.
2. Data validation for Quality measures and IA.
3. Performance feedback for at least four (4) times within the reporting period.
4. Data submission for the Quality measures.
5. Assisting with the attestation for Improvement Activities if Client elects attestation as method of submission.

Quality & Promoting Interoperability Enhanced Submission Only (Per Group, Per Database)

Medpharm's Registry Reporting Service ("Medpharm Registry") will generate the file, validate and submit Quality measures and Promoting Interoperability chosen by Client to

report. This package includes generation of file, validation and submission of data to CMS only.

> Services

1. File generation from IMS for Quality measures and PI.
2. Data validation for Quality measures and PI.
3. Performance feedback for at least four (4) times within the reporting period.
4. Data submission for the Quality measures.
5. Assisting with the attestation for Promoting Interoperability if Client elects attestation as method of submission.

> Terms & Conditions - For Enhanced Submission Only Packages

1. Client shall choose the Quality measures they want to report.
2. Medpharm will generate the file and validate the data using the CMS tool.
3. Medpharm will submit the required file to CMS.
4. Medpharm makes no claim or warranty that by submitting the file eligible professionals (EP) will not be subjected to 2024 payment adjustment.
5. Medpharm does not and will not edit any content before submitting the file to CMS. The EP shall be solely responsible for managing and validating the count of the measures and other parameters required pursuant to the attestation. In no event will Medpharm be liable to the Client for any damages arising from or relating to the content submitted.
6. Client shall be solely responsible for providing the correct information needed in the attestation. In no event will Medpharm be liable to the Client for any damages arising from or relating to the information provided.
7. Medpharm will submit data gathered for ninety (90) days to one (1) year from the measures chosen.
8. Medpharm can submit the data via Registry, QCDR or EHR only.
9. Clients may upgrade to a higher-tier package at any time during the term of the Agreement, subject to applicable fees and terms. Downgrades to lower-tier packages are not permitted once the Agreement has commenced.
10. This contract will remain in effect up to the submission deadline of MIPS 2024.
11. Medpharm reserves the right to terminate this agreement and discontinue services at any time.

MIPS Registry File Extraction– Export Only

1. Medpharm's Registry Reporting Service ("Medpharm Registry") is only available to clients who are under an existing IMS License Agreement and are not in

default of any term or condition therein. Medpharm Registry will only export the MIPS data in Qualified Registry (.JSON) file from IMS and will provide it to the Client as requested.

2. In no event will Medpharm be liable to the Client for any damages arising from or relating to the file extracted.
3. IMS supports Qualified Registry Reporting.
4. Medpharm does not and will not edit any content before and after the data is extracted.
5. Medpharm Qualified Registry and Medpharm make no claim that by providing the Qualified Registry (.JSON) file, eligible professionals (EP) will not be subjected to 2026 payment adjustment.
6. Client shall be solely responsible for providing the correct National Provider Identifier (NPI), Tax Identification Number (TIN), corresponding Email, Qualified Registry name and ID needed in the file.
7. Medpharm's Qualified Registry program is per practice per database and is a yearly subscription. This contract will be valid for 2024 reporting only.

Pricing

a. Pricing will be determined by the quote sent to the client by a Medpharm sales representative. Client shall ensure receipt of the quote for Qualified Registry 2024, and thoroughly review the pricing, terms and the offers. Clients must sign the quote and submit it to Medpharm directly. Medpharm reserves the right to change the pricing for the recurring fees at its own discretion. Medpharm shall provide one (1) month prior notice before any pricing changes are implemented.
b. If Client has been offered a special pricing under any current or previous offer, then that pricing will be subject to change as per the terms of the offer.

Cancellation of Service

a. If Client wishes to cancel Qualified Registry extraction for the group, then the group shall contact their Account Managers. Clients will not be eligible for any refund of prepaid fees. A cancellation request is required for the group. Upon receipt of the cancellation request, the extraction for that group will be stopped. Please note that all cancellation requests must be placed by March 10, 2025. Any cancellation request placed past the mentioned date shall not be taken into consideration.
b. Medpharm may terminate this agreement and the services provided hereunder at any time, and Client will be entitled to a refund of unused prepaid fees.

Meditab Offsite Backup

- Meditab recommends an Internet speed of at least five (5) Mbps for better uploading process. In case of cancellation of the backup service, the data will remain with Meditab for forty five (45) days after the effective date of termination. Afterward, the data will be deleted permanently.
- Additional fees, including shipping and handling fees, shall apply for physical restoration of data. The external storage device shall be provided by the Client.
- Clients shall follow the restoration protocol provided by Meditab.
- Client must inform the Meditab Support team of any restoration of data on Client's end by sending an email from the office manager or physician requesting the restoration of data. The email should also state the server details on which the restoration is to be done.
- Meditab will initiate the restoration process only after receiving a formal request as previously described. Meditab will not be responsible for any delays due to non receiving the restoration request email. Meditab will not do data restoration on a server outside of the Clinic's network.
- During the initial setup of the backup service, a decryption key will be provided to the Client. Meditab shall not be liable or responsible for the maintenance or safekeeping of the decryption key. Client shall be solely responsible for maintaining and providing the key when required during the time of restoration.
- Client acknowledges that during the time of data backup the internet speed may slow down, which might affect other Client's tasks dependent on the internet. Client shall be solely responsible to inform Meditab the best time to schedule the backup processes.
- List of documents and folders for which back-up is taken by default:
    - IMS database
    - IMS folders
        - Patient documents
        - Templates documents
        - Billing documents
        - Fax documents
        - Updates folders
        - Lab documents
        - HL7 bills
        - Archives
        - Email documents

- Surescripts documents

- Client shall inform Meditab about any add-on folders or files to be included in the Offsite Backup.

Prescription Drug Monitoring Program (PDMP)

- **IMS Prerequisites:** IMS 20 build or later is required for PDMP. Clients currently on a previous build or version, will be required to upgrade to a compatible Build before being able to install PDMP.
- Client shall be solely responsible for providing the correct National Provider Identifier (NPI).
- Each prescribing provider or End-User shall be solely responsible for abiding by all practitioner responsibilities set forth by the Drug Enforcement Administration ("DEA") with regard to PDMP.
- Upgrade costs will vary according to the SyBase upgrade pricing. Please contact your sales representative for any inquiry into upgrading your system.
- Client shall pay the setup and maintenance fees.
- Third party fees may apply and may be billed directly to Client. Third Party terms and conditions may apply.

Proxy Portal

IMS Prerequisites: IMS 25 build or later is required for Proxy Portal. Clients currently on a previous build or version, will be required to upgrade to a compatible Build before being able to install Proxy Portal.

A. Workstation or Server Must Satisfy the Following Specifications:

- Be in a network and not virtual;
- LogMeIn or RDP (Remote Desktop Protocol) availability;
- 2.4 GHz or higher dual core 32-bit (x86) or 64-bit (x64) processor;
- 8 GB of system memory or RAM;
- 40 GB of available disk space;
- 1 GB Network Interface Card (NIC) for network connectivity;
- 100 Mbps Network Interface Card (NIC) for network connectivity;
- One static IP or a fixed external IP must be forwarded to the Patient Portal (web server) machine;
- The internet speed should be at least 5 Mbps or more;
- Port 80 and 443 is open and unused by any other application
- Windows Server 2012 (64-bit) as the operating system;
- SSL should be mandatorily applied to the Patient Portal;
- Domain/subdomain Registration;
- Binding of static IP with Domain/Subdomain; and
- It is recommended not to use the web server machine for installation of any other software and must not be put to daily use.

C. Client Responsibilities

- Client acknowledges that any delays in performing Client's responsibilities related to Implementation Dates shall result in a corresponding delay in the proposed Training Schedule and Go-Live Date. In addition, Client agrees to pay for any costs incurred by Meditab resulting from Client-initiated changes to the implementation schedule.
- Client will be responsible for giving access to their patient data to third parties.
- Patient shall be solely responsible to control the access rights to Proxy Portal and shall be solely responsible for the actions of third parties with authorized access to Proxy Portal. Meditab shall not be liable for actions taken by third parties with authorized access to Proxy Portal.

Quick Note

- **IMS Prerequisites:** IMS 19.1.0 build or later is required for Quick Note. Clients currently on a previous build or version, will be required to upgrade to a compatible Build before being able to install Quick Note.
- Quick note forms will be available on IMS, IMSGo (Only Android Tablet & iPad) and IMS OnArrival (Only Android Tablet). All three should be on the same build. Client shall be responsible to make sure that prerequisites for mobile devices/platforms are also met.
- Quick Note forms require high speed internet connectivity. The loading of the forms will be dependent on the speed of the internet connection.
- Workstation or Server must satisfy the following specifications (in case Patient Portal is not present):
    - Be in a network and not virtual;
    - LogMeIn or RDP (Remote Desktop Protocol) availability;
    - 2.4 GHz or higher dual core 32-bit (x86) or 64-bit (x64) processor;
    - 8 GB of system memory or RAM;
    - 40 GB of available disk space;
    - 1 GB Network Interface Card (NIC) for network connectivity;
    - 100 Mbps Network Interface Card (NIC) for network connectivity;
    - One static IP or a fixed external IP must be forwarded to the web server machine;
    - The internet speed should be at least 5 Mbps or more;
    - Port 80 and 443 is open and unused by any other application;
    - Windows Server 2012 (64-bit) as the operating system;
    - SSL should be mandatorily applied to the Patient Portal;
    - Domain/subdomain Registration;
    - Binding of static IP with Domain/Subdomain; and
    - It is recommended not to use the web server machine for installation of any other software and must not be put to daily use.

All prerequisites should be met within twenty-one (21) days after the implementation begins. Meditab shall not be responsible for implementation delays due to Client's failure to meet all prerequisites within the time frame stipulated herein.

TeleVisit

- **Prerequisites for Televisit:**
  - IMS Prerequisites: IMS 25 build or later is required for TeleVisit. Clients currently on a previous build or version, will be required to upgrade to a compatible Build before being able to install TeleVisit.
  - To use Televisit, it is recommended to have the following product versions:
    - IMS Build 25.1.1 or a later build.
    - IMSGo 25.1.0 or a later version.
    - IMS CarePortal 25.1.2 or a later version.
    - IMS Patient App 25.1.0 or a later version.
    - Televisit Portal 25.1.0 or a later version.
  - Any of the following combination of the above mentioned versions will work:
    - IMS - IMS PatientApp
    - IMS- IMS CarePortal
    - IMSGo - IMS PatientApp
    - IMSGo - IMS CarePortal
    - Televisit Portal- IMS Patient App
    - Televisit Portal- IMS CarePortal
  - Televisit supports many-to-one connection between client and the patient.

- **Limitations of the Televisit Feature:**
  - Televisit cannot be used if IMS is running on a remote connection or if IMS is set up on a hosting environment. However, it can be used in the following combination:
    - IMSGo - IMS PatientApp
    - IMSGo - IMS CarePortal
    - Televisit Portal- IMS Patient App
    - Televisit Portal- IMS CarePortal
  - Client's IT Team support might be needed during setup.
  - Televisit is supported only by the following browsers:
    - Google Chrome
    - Mozilla Firefox
  - For laptops and desktops, Google Chrome is the ideal browser to use for Televisit. One can also use Televisit on the latest versions of Mozilla Firefox and Microsoft Edge.
  - If one has an Android device, Google Chrome is the ideal browser to use for Televisit in IMS CarePortal.

- If one has an iOS device, Safari is the ideal browser to use for Televisit in IMS CarePortal.
- Video Quality depends on the Internet Connectivity of both the provider and the patient. It is recommended to have a minimum of 1.5 Mbps Internet speed for both parties.

- **Prerequisites for Televisit Portal:**

For using Televisit Portal, it is necessary to have the following:

- **IMS Prerequisites:** IMS 29 build or later is required for Televisit Portal. Clients currently on a previous build or version, will be required to upgrade to a compatible Build before being able to install Televisit Portal.
- Care Portal setup would be mandatory though if they don't have a license for care portal it will work.
- Televisit Portal supports a many-to-one system connection between Client and the patient.

- **Limitations of the Televisit Feature**:

- Client's IT Team support might be needed during setup.
- Televisit Portal is supported only by the following browsers:
  - Google Chrome
  - Mozilla Firefox
- For laptops and desktops, Google Chrome is the ideal browser to use for Televisit Portal. One can also use Televisit Portal on the latest versions of Mozilla Firefox and Microsoft Edge.
- If one has an Android device, Google Chrome is the ideal browser to use for Televisit Portal.
- If one has an iOS device, Safari is the ideal browser to use for Televisit Portal.
- Video Quality depends on the Internet Connectivity of both the provider and the patient. It is recommended to have a minimum of 1.5 Mbps Internet speed for both parties.

IMS Call

- **Prerequisites for IMS Call:**
  - **IMS Prerequisites:** IMS 22 build or later is required for IMS Call. Clients currently on a previous build or version, will be required to upgrade to a compatible Build before being able to use IMS Call.
  - This feature currently works only with Vonage phone system integration.
  - Third party fees (Vonage) are applicable and will be billed directly to the Client. Third Party terms and conditions may apply.
  - Windows media player should be present on the system where IMS call feature is used.
  - To receive Voicemail in IMS, setup must be done on MPS portal.

Lead Management Module

- **Prerequisites for Lead Management Module:**
  - **IMS Prerequisites:** IMS 32 build or later is required for Lead Management Module. Clients currently on a previous build or version, will be required to upgrade to a compatible Build before being able to use Lead Management Module.

HEDIS Set up and Training Package

Services:

- Set up the HEDIS measures in IMS to alert the Providers and other Health Care staff of the patient's health gaps.
- Includes 1 hour Training to the providers and the clinic staff on the measure requirements and how to document properly in IMS

Terms & Conditions:

- Includes setup for up to 21 HEDIS measures in IMS and setting the necessary alerts in the visit notes, chart view and check-in/check-out screen of IMS.
    a. The client is responsible to provide the list of HEDIS measures based on the requirements by the payers.
    b. In case, the client is unaware of the required measures, Meditab will set up the default 21 measures and filter the same by the payers.
- Includes 1 hour training on "How to fulfil the measures and how to document in IMS". Additional training hours will be chargeable.
- Submission of report or assistance in attestation is not included in this package.
- Assistance in medical records audit is not included in this package.
- The client can upgrade to another package by paying the differential fee.
- The client will not be eligible for any refund of prepaid fees.
- Meditab does not provide any tool for HEDIS reporting.
- Meditab makes no claim that by assisting in the attestation, providers will get HEDIS program incentives.
- This contract will remain in effect up to December 31, 2021.

HEDIS Complete Package

Meditab will provide assistance in attestation, uploading supporting documents and medical record audit. Meditab does not provide any tool for HEDIS reporting. The client will be required to do the reporting.

Services:

- Set up the HEDIS measures in IMS to alert the Providers and other Health Care staff of the patient's health gaps.
- Includes 1 hour Training to the providers and the clinic staff on the measure requirements and how to document properly in IMS
- Send feedback report to the client on monthly basis.
- Assist client in attestation
- Assist client in uploading supporting documents on the payer's portal.

- Assist in medical records audit of the current year (2021).

Terms & Conditions:

- Includes setup for up to 21 HEDIS measures in IMS and setting the necessary alerts in the visit notes, chart view and check-in/check-out screen of IMS.
    a. The client is responsible to provide the list of HEDIS measures based on the requirements by the payers.
    b. In case, the client is unaware of the required measures, Meditab will set up the default 21 measures and filter the same by the payers.
- Includes 1 hour training on "How to fulfil the measures and how to document in IMS". Additional training hours will be chargeable.
- Meditab shall provide feedback based on the analysis of the report.
- Meditab makes no claim that by assisting in the attestation, providers will get HEDIS program incentives.
- The Eligible Professional (EP) is responsible for managing and validating the documents and other parameters required pursuant to the attestation. In no event will Meditab be liable to the client for any damages arising from or relating to the content submitted. Meditab will not be editing any documentation.
- The client is responsible for giving the correct information needed in the attestation. In no event will Meditab be liable to the client for any damages arising from or relating to the information provided.
- Meditab will assist in the attestation on the date set by the payer.
- Meditab will assist in uploading supporting documentation in the payer's portal to close open health care gaps
- Meditab will provide assistance in HEDIS medical records audit, not including audit of the previous year.
- The client can upgrade to another package by paying the differential fee. The client cannot downgrade to other packages.
- The client will not be eligible for any refund of prepaid fees.
- Meditab does not provide any tool for HEDIS reporting.
- Meditab makes no claim that by assisting in the attestation, providers will get HEDIS program incentives.
- This contract will remain in effect up to December 31, 2021.

HEDIS Full Time Package

Meditab will provide one full time remote resource who will work with the client to meet HEDIS requirements. This package includes measures set up, training, assistance in HEDIS

attestation and audit of the current year. This also includes coordination with payers and outreach teams and provides HEDIS star reports monthly and quarterly or as needed in the reporting year.

Services:

- Set up the HEDIS measures in IMS to alert the Providers and other Health Care staff of the patient's health gaps.
- Includes 1 hour Training to the providers and the clinic staff on the measure requirements and how to document properly in IMS
- Meditab will ensure standardized tools in accordance to HEDIS requirements are available for provider to use in IMS
- Meet regularly with the clinic's Outreach team to review open gaps and review timeline
- Provide the gap in care report monthly
- Meditab will provide feedback reports monthly and quarterly or as needed
- Coordinate with payers in regards to updated incentive for provider and patient programs, health events, gap in care report, medical record audit, the portal access.
- Coordinate with the billers to ensure HEDIS measures are coded accurately.
- Assist client in attestation
- Assist client in uploading supporting documents on the payer portal.
- Assist in HEDIS medical records audit of the current year.

Terms & Conditions:

- Includes setup for up to 21 HEDIS measures in IMS and setting the necessary alerts in the visit notes, chart view and check-in/check-out screen of IMS.
    a. The client is responsible to provide the list of HEDIS measures based on the requirements by the payers.
    b. In case, the client is unaware of the required measures, Meditab will set up the default 21 measures and filter the same by the payers.
- Training on how to report the measures will be included in this package.
- Meditab will ensure standardized tools in accordance to HEDIS requirements are available for provider to use in IMS
- Meditab will meet regularly with the clinic's Outreach team to review open gaps and review timeline
- Meditab will provide gap in care report monthly

- Meditab will coordinate with payers in regards to updated incentives for provider and patient programs, health events, gap in care report, medical record audit, and portal access.
- Meditab will coordinate with billers to ensure HEDIS measures are coded accurately.
- Meditab will assist in the HEDIS attestation on the date set by the payer.
- The client is responsible for giving the correct information needed in the attestation for HEDIS. In no event will Meditab be liable to the client for any damages arising from or relating to the information provided.
- Meditab makes no claim that by assisting in the attestation, providers will get HEDIS program incentive
- Meditab will assist in uploading supporting documentation in the payer's portal to close open HEDIS gaps
- Meditab will provide assistance in HEDIS medical records audit, not including audit of the previous year.
- The client can upgrade to another package by paying the differential fee. The client cannot downgrade the package once purchased.
- The client will not be eligible for any refund of prepaid fees.
- Meditab does not provide any tool for HEDIS reporting.
- Meditab makes no claim that by assisting in the attestation, providers will get HEDIS program incentives.
- This contract will remain in effect up to the submission deadline of MIPS and HEDIS i.e December 31, 2021.

Pricing Terms:

- Pricing will be determined by the quote sent to you by a Meditab sales representative. Client shall ensure receipt of the quote for HEDIS 2021, and thoroughly review the pricing, terms and the offers.
- Client must sign the quote and submit it to Meditab directly. Meditab reserves the right to change the pricing for the recurring fees at its own discretion. Meditab shall provide one (1) month prior notice before any pricing changes are implemented.
- If Client has been offered a special pricing under any current or previous offer, then that pricing will be subject to change as per the terms of the offer.

Cancellation of Service

- If the Client wishes to cancel report extraction for a specific EP, then he/she shall contact Meditab accounting at accounting@meditab.com. The client will not be eligible for any refund of prepaid fees. Cancellation requests are required for each individual EP. Upon receipt of the cancellation request, the extraction for that EP will be stopped. Please note that all cancellation requests need to be put in by 10th

March March <attestation year>. Any cancellation request put forward past the mentioned date shall not be taken into consideration.

- Meditab may cancel its services at any time, and the Client will be entitled to a refund of unused prepaid fees.

IMS-Quickcap Integration for Authorization-Referral

Service: This will be useful to submit the auth/referrals electronically from IMS to Quickcap/IPAs who are using QC and update the auth/referral status and details automatically in IMS.

IMS Prerequisites: Build 22 or higher, Software version 14.0 SP1

QC Prerequisites (for IPAs the client wants to connect to): For QC-IMS Auth integration only, required version is 7.20.3.0 or above

If there are any other steps or client training needed, requesting you to coordinate with the respective teams.

IMS Transcript

- **IMS Prerequisites**: IMS Build and IMSGo version 34 (General) or later is required for the Transcription module. Clients currently on an older build or version, will be required to upgrade to a compatible build/version.
- The Transcription module can only be accessed via IMSGo. IMSGo License required.
- **Supported Languages:** Transcripts can be recorded and processed in both **English** and **Spanish**, accommodating diverse language needs.
- The module leverages specialty-specific models in the following areas to generate accurate transcript summaries based on the recorded conversations:
    - General Medicine
    - Cardiology
    - Psychiatry
    - Diet
    - Psychology
- In addition to the transcript summary, the module can also generate corresponding **diagnosis codes**, helping to streamline clinical documentation and coding.
- Enhancements to the Transcription module will be provided by IMS whenever needed.
- **Though AI Automation tools make it easier to complete complex tasks, No AI technology can guarantee 100% accurate output.**
- **Human review and intervention is required to get precise and accurate results from the IMS Transcript module.**

Health Data Network Exchange

IMS Prerequisites:

IMS 37 build or later is required. Clients currently on a previous build or version, will be required to upgrade to a compatible build before being able to use Health Data Network Exchange.

NOAH Interface

Minimum IMS Version Requirement for NOAH Interface service:

- For use of the NOAH Interface service, IMS V14.0 SP1 Build 37 or later is required. Clients currently running an older version or build of IMS will need to upgrade to a compatible version or build of IMS before requesting access to the NOAH Interface service.

NOAH Site License:

- A site license from NOAH is required for each location. Clients are responsible for purchasing such licenses and providing confirmation to the IMS team(s).

NOAH Software Upgrade Considerations:

- At this time, IMS will support NOAH 4.14 for the interface.
- If Clients upgrade to a version higher than NOAH version 4.14, IMS shall not be responsible for making immediate changes to accommodate the upgrade. Additionally, IMS will not be held responsible for any issues arising from upgrading to a version that is incompatible with IMS.

IT Responsibilities:

- It is the client's responsibility to ensure that proper access rights and authorizations--required for NOAH utility to run--are granted. Additionally, it is the Client's responsibility to ensure that firewalls and necessary ports are correctly configured to allow the interface function.