

Claim Acknowledgement. We work to ensure that the claims we submit get to the payer. If the payer provides electronic acknowledgement that it has received your claims into its adjudication system, we will retrieve it and attach it to the claim. If we expect to receive an acknowledgement and do not, we will contact the payer or intermediary to request one. Not all payers or intermediaries provide acknowledgement reports, so claim acknowledgements will not be available for all payers.

Patient Statements. athenahealth sends statements to your patients when they have open balances due to you. Statements are mailed six times a week. By default, we will not send more than one statement every 35 calendar days; you may send more frequent statements for an additional fee. Your phone number will be on each statement, and you are responsible for handling patient inquiries. If the patient has filed a change-of-address form with the post office, then we will change the address on the statement as it goes out and update the address in athenaNet, unless you tell us otherwise. If you have an eCommerce merchant ID, returned mail will be routed to athenahealth, and athenahealth will place a statement hold on the patient's account and create an unpostable for you to address. Otherwise, returned mail goes to your office. athenahealth will not contact your patients to inquire about the status of unpaid statements. Statement rates will increase with U.S. postage rates.

Timely Claim Filing. We track timely filing limits for many payer entities and will automatically force drop claims to paper for timely submission and denial prevention. A default timely filing limit of 60 days will be applied in the event that a specific payer filing limit requirement is not available or validated. The force drop will apply 15 days prior to the filing limit, even if claims are in an active hold status due to claim Rules or kick codes. Timely filing functionality will not force drop claims for payers that only accept electronic submission, as claims may lack fundamental data elements, leading to possible rejections.

We routinely monitor claim submission outcomes to discover opportunities to improve our athenaOne service offering, including our Rules Engine and follow-up services. The number of claims that we submit without prior notification will not exceed 0.5 percent of your monthly claim volume, and we will not drop any claim holding for a Client-specific local or Custom Rule. This will enable athenahealth to monitor the outcomes of these claims to determine how we can improve our athenaOne service offering, including our Rules Engine and follow-up services.

5.4 Receiving and Processing Payments

athenahealth receives, scans, catalogs, and forwards for deposit all payments, except those payments collected at your locations. During onboarding and configuration, athenahealth contacts your payers and instructs them to send payments to a P.O. Box assigned by athenahealth but dedicated to you. The mail from that P.O. Box comes to athenahealth, and is opened and scanned. Checks are collected and passed to our banking partner, U.S. Bank, for deposit into a bank account in your name and under your control, your "Lockbox Account." If you receive payments via electronic funds transfer (EFT), we will contact your payers and have those funds routed to your Lockbox Account as well. From there, you can log in to U.S. Bank's web portal and move the money into your operating account via an Automated Clearinghouse (ACH) transaction. You may not use the Lockbox Account as an operating bank account; you may transfer money from the Lockbox Account to your operating account, but you must not withdraw cash or pay bills from the Lockbox Account.

Official record. Your U.S. Bank statement is the official record of your cash deposits. The information in athenaNet is advisory.

Electronic Funds Transfer (EFT) as Default Payment Method. When athenahealth contacts a payer with instructions on where to send your payments, we will request that payments be made by EFT to your Lockbox Account (unless that payer does not offer EFT payments). On occasion, we may need you to sign a document or fill out a form so that we can complete this process; you must address these requests in a timely manner.

Shared Tax ID. athenahealth strongly encourages you to transmit all the charges for your tax identification number through athenaNet; otherwise, we won't know how to post those payments when they come. Sometimes when an organization shares a tax identification number with another organization for billing purposes, and we have deemed that organization as serviceable despite the shared tax identification number, Electronic Remittance Advice (ERA) may not be supported by certain payers and may not be used as the default method for remittance information. In these cases, athenahealth will instruct the payer to send remittance detail via paper explanation of benefits (EOB) to your dedicated athenahealth P.O. Box. athenahealth may be able to build ERA linkages to reduce the effort of splitting remittance or implement a workflow that allows you to upload ERA files in athenaNet.

If we cannot avoid multiple systems for the tax identification number, such as for some Rural Health Clinics that are required to bill under a hospital's tax identification number, then we may charge you a small fee for processing all the remittance detail that comes to us but can't be posted because the claims are in another system. If you have a shared tax identification number, please notify us. We may ask you to complete a contract amendment in this scenario.

Electronic Remittance Advice (ERA) as Default Remittance Detail Method. When athenahealth contacts a payer with instructions on where to send your remittance detail, we will request that remittance detail be delivered via ERA (unless that payer does not offer ERA). In order for athenahealth to receive ERA on your behalf, we will instruct payers to recognize us as your authorized billing service. Sometimes, we need you to sign a document or fill out a form so we can complete this process; you must turn these requests around in a timely manner.

Time of Service (TOS) Payments. Payments collected using athenahealth's integrated credit card processing are recorded in athenaNet and deposited into your Lockbox Account. Other payments (e.g., cash, checks) collected by you at your office locations are your responsibility to track in athenaNet and deposit to your bank.

Included U.S. Bank Services. The cost of the following U.S. Bank services is included in your athenaOne Service Fee:

- Lockbox Account setup, maintenance, and a P.O. Box for each of your tax identification numbers.
- Unlimited deposits of funds received by athenahealth. Funds are generally available within three business days after receipt by U.S. Bank.
- Returned item fees.
- Web portal to view previous day account information and order next day funds transfer via ACH to a linked operating account at a bank of your choice in the U.S.
- Creation and maintenance of U.S. Bank Daily Statement.

U.S. Bank Fees. We will pass fees for other services (e.g., wire transfers, replacement paper statements) on to you via your monthly invoice.

Patient Statement Payments. Patient statement payments will come to athenahealth. Patients can pay via check and we will pass the checks on to U.S. Bank for deposit into your account. If they send cash, we securely process this cash and then remit payment to your U.S. Bank account via check. Patients can also pay online with a credit card via athenahealth's "QuickPay Portal," which will be automatically enabled for you if you use the required services listed below. Patients will be able to make full or partial payments on their balance.

To use the QuickPay functionality, the organization must use the following Services:

- athenaCollector
- U.S. Bank Lockbox Account
- athenaMailbox Service
- athenahealth's integrated credit card processing with e-commerce merchant ID (MID) enabled

Retention of Paper and Image Quality Assurance. Commercial paper checks and remittance related work will be securely held for at least 90 days prior to destruction. Patient Payment paper checks and statements will be securely held for at least 14 days prior to destruction. We review the images created from these documents during posting, but it's your responsibility to examine for readability any other non-remittance related images that might be scanned. All scanned Images will remain online and accessible to you for at least three years and will stay in athenahealth archives indefinitely after that.

5.5 Posting Payments to Charges

Payment and Detail Routing. Remittance detail usually accompanies the payment, but as the industry moves to electronic data exchange, that is less and less the case. Since we cannot post the payment before the remittance detail arrives, we will contact the payer to follow up. The money will be available to you, but it won't be attributed to the appropriate claim until the detail arrives. If the payer can't or won't provide the remittance detail, or the payer's duplicate remittance fee is greater than 4 percent of the payment, we will check to see if you received it and may require your help to access it. To ensure all the remittance details and payments are routed correctly, we rely on you to deposit all of your paper checks into your U.S. Bank Lockbox Account, so that we know when it's clear to post. It is also very important that you do not make any changes to your remittance records with payers, but instead let athenahealth do that for you.

Missing Payment. Sometimes, athenahealth receives the remittance detail but not the accompanying payment. If the remittance detail indicates that payment was made to your athenaMailbox account, we will locate the