

Practice-Web Inc.
P. O. Box 4678
El Dorado Hills, CA 95762
(800) 845-9379 Sales/Fax



Serving Dental Community since 1988

Practice-Web Upgrades & Support Agreement (ACH)

This Practice-Web Upgrades & Support (ACH) Agreement (this “**Agreement**”) is entered into on [redacted], 2018 (the “**Effective Date**”), by and between Practice-Web Inc. (“**Practice-Web**”) on the one hand, and Dr. [redacted] and his or her dental practice - [redacted] located at [redacted] (collectively, “**Client**”) on the other hand.

Practice-Web agrees to provide Client toll-free telephone support (Monday-Friday 8:00 AM- 5PM PST except holidays), and past and future software upgrades for the Practice-Web software (collectively, the “**Service**”) beginning on the Effective Date and continuing until this Agreement is terminated as provided below (collectively, the “**Term**”).

During the Term, Client will receive following products as part of the Service.

- Past and future Practice-Web software upgrades.
- Online Patient Registration.
- Automated email reminders.
- On-demand texting.
- Graph Analyzer.

Client agrees to pay the following for the Service: (i) \$795 upon the Effective Date; and (ii) \$99 per month beginning in the seventh month of this Agreement (collectively, the “**Purchase Price**”). Client authorizes Practice-Web to debit Client’s bank account in the amount of the Purchase Price pursuant to the attached Repetitive ACH Authorization.

If Client terminates this agreement during the first 12 months of the Term, a cancellation fee of \$549 will apply. After the first 12 months of the Term, Client may terminate this Agreement by providing 30-day advance written notice to Practice-Web. Practice-Web may terminate this Agreement at any time upon written notice to Client.

If Client’s debit transaction is declined and payment is past due, a \$20 fee will apply to that month’s payment. If two consecutive transactions are declined, a late fee of \$40 will apply.

The Business Associate Agreement attached as Appendix A is hereby agreed to by the parties and incorporated by reference herein for compliance with the HIPAA Regulations.

“Client”

Sign: [redacted]

Name: Dr. [redacted],

Individually and on behalf of [redacted] (Practice Name)

Date: [redacted]



Repetitive ACH Authorization

 New Payment Plan

 Change an Existing Plan

PATIENT/CLIENT NAME	PATIENT/ACCOUNT ID
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RESPONSIBLE PARTY (Name on the checking account)	
NAME (FIRST-MIDDLE-LAST)	SOCIAL SECURITY NUMBER - -
HOME PHONE ()	EMAIL ADDRESS

FINANCING INFORMATION: Monthly payment will be paid directly from your bank account.					
BALANCE DUE	PAYMENT	TRANSACTION FEE	TOTAL PAYMENT	PLEASE CHECK BOX FOR YOUR PAYMENT DATE(S)	START DATE
		+ \$2.50 =		<input type="checkbox"/> 3 RD <input type="checkbox"/> 10 TH <input type="checkbox"/> 18 TH <input type="checkbox"/> 25 TH	

"I hereby agree to the 'Terms & Conditions' shown below and authorize the automatic debiting of my bank account according to the above payment schedule until the 'Balance Due' shown above is paid in full. **I agree to provide notice of any change to my bank information at least 1 week in advance of the next payment date.**"

SIGNATURE OF RESPONSIBLE PARTY	DATE
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EITHER ATTACH VOIDED CHECK OR LIST BANK INFORMATION BELOW. (Do NOT use a deposit slip!)

Bank Name _____	Phone _____									
Bank Address _____										
City _____	State _____ Zip _____									
<input type="checkbox"/> Checking Account <input type="checkbox"/> Savings Account	Check # (from sample check) _____									
BANK ROUTING NUMBER:	ACCOUNT NUMBER:									
<table border="1"> <tr> <td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td> </tr> </table>										
<p>TIPS TO IDENTIFY ROUTING AND ACCOUNT NUMBERS: There are three sets of numbers along the bottom line of your check the Bank Routing Number, the Account Number, and the check number. The easiest way to identify each of these is through the process of elimination. First, eliminate the check number. This will leave the Routing number and account number. The [: symbols will always be at the beginning and end of the 9 digit Routing Number. The account number is what is left over and will be anywhere from 5 to 16 digits</p>										
<p>⑆ 1 2 3 4 5 6 7 8 9 ⑆ 1 2 3 4 1 2 3 4 5 6 7 8 9 8 7</p>										



FAX COMPLETED FORM TO 800-481-0946

TERMS AND CONDITIONS

DOCPAY is a trade name of Complete Systems, Inc. and has been authorized by the Doctor's Practice to administer this payment plan. The transaction fee indicated above is applied each time the Responsible Party's account is debited. Should there be insufficient funds in the account, additional debits may need to be processed. **There is a return charge of \$10.00 for all returned items.** Upon default of the above payment schedule due to insufficient funds, withdrawal of the authorization, nonpayment or bankruptcy, the entire unpaid balance may, at the option of the Doctor's Practice, be declared immediately due and owing. In such cases Responsible Party agrees to pay the reasonable cost of collection and/or attorneys fees as permitted by the governing laws of the state. Neither the Practice, Depository nor Complete Systems, Inc. is liable for any incidental or consequential damages stemming from the transfer of funds unless due to fraud or willful misconduct. Responsible Party should receive a monthly statement from the above listed bank showing funds transferred. DOCPAY does not collect insurance payments.

REQUIRED INFORMATION - PAY PLAN CANNOT BE PROCESSED WITHOUT THIS!

PRACTICE NAME (REQUIRED)	PRACTICE I.D. CODE	PHONE # (REQUIRED)
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Your monthly payment will appear on your bank statement showing **DOCPAY ACH** as the payee.
 In the event a payment is rejected or returned unpaid, a \$10.00 NSF fee will be added to your account.
 If you change your bank account, you must notify Practice at least one week prior to your next payment date.
 For account changes or any other questions regarding your account please call your practice.

FORM DISTRIBUTION- MAKE COPY FOR PATIENT - Keep a copy in patient chart - Fax to DOCPAY

APPENDIX A

BUSINESS ASSOCIATE AGREEMENT

THIS BUSINESS ASSOCIATE AGREEMENT (this "**BAA**") is entered into on the Effective Date by and between Practice-Web and Client.

WHEREAS, Client has engaged Practice-Web to provide certain services to Client (the "**Services**") as set forth in certain services agreement(s) between Practice-Web and Client (the "**Underlying Agreements**"), which may involve the Use and Disclosure of Protected Health Information and Electronic Protected Health Information (collectively, "**PHI**"); and

WHEREAS, Practice-Web and Client are required to protect the privacy of and provide for the security of PHI Disclosed to Practice-Web in compliance with the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 ("**HIPAA**"), the Health Information Technology for Economic and Clinical Health Act (the "**HITECH Act**"), Public Law 111-005, and the regulations promulgated thereunder; 45 C.F.R. Parts 160 and Part 164, Subparts A, C, D and E (Subpart E, together with the definitions in Subpart A is known as the "Standards for Privacy of Individually Identifiable Health Information" (the "**Privacy Rule**") and Subpart C, together with the definitions in Subpart A, is known as the "Security Standards for the Protection of Electronic Protected Health Information" (the "**Security Rule**") Subpart D, together with the definitions in Subpart A is known as the "Breach Notification Rule" ("**Breach Notification Rule**") (the Privacy Rule, Breach Notification Rule and the Security Rule are collectively called the "**HIPAA Regulations**"); and

WHEREAS, the HIPAA Regulations require Client to enter into a Business Associate Agreement with Practice-Web containing certain requirements for Business Associates as detailed in the HIPAA Regulations with respect to Practice-Web's creation, receipt, maintenance or transmission of PHI received for or from Client; and

NOW, THEREFORE, in consideration of the mutual promises and other consideration contained herein, the sufficiency of which is hereby acknowledged, the parties agree as follows:

1. Definitions. Unless otherwise defined herein, capitalized terms have the definitions given to them in the HIPAA Regulations.

2. Permitted Uses and Disclosures.

2.1. Pursuant to this BAA, Practice-Web may Use and Disclose PHI created, received, maintained or transmitted for or from Client to provide the Services, or as otherwise permitted under this BAA. Practice-Web may not use or disclose protected health information in a manner that would violate Subpart E of 45 C.F.R. Part 164 if done by Client.

2.2. Practice-Web may also Use PHI it creates, receives, maintains or transmits for or from Client as required for Practice-Web's proper management and administration (including, but not limited to, Practice-Web's internal operations and refinement of its business methods) or to carry out Practice-Web's legal responsibilities. Practice-Web may Disclose such PHI as necessary for Practice-Web's proper management and administration or to carry out Practice-Web's legal responsibilities if (i) the Disclosure is Required by Law, or (ii) Practice-Web obtains reasonable assurance, evidenced by written contract, from any person or entity to which Practice-Web will Disclose such PHI that the person or organization will (a) hold the PHI in confidence and Use or further Disclose the PHI only for the purpose for which Practice-Web Disclosed it to the person or organization or as Required by Law, and (b) notify Practice-Web (who will in turn notify Client as described in Section 6 below) of any instance of which the person or organization becomes aware in which the Confidentiality of such PHI was Breached.

2.3. To the extent that Practice-Web is to carry out any of Client's obligations that are regulated by HIPAA, Practice-Web shall comply with the HIPAA requirements that apply to Client in the performance of such obligation.

3. Minimum Necessary Information. To the extent required by the HIPAA Regulations, Practice-Web shall Use and Disclose on behalf of Client only the minimum amount of PHI necessary to provide the Services. Minimum Necessary shall have the meaning ascribed to it in the HIPAA Regulations or in any later guidance issued by the Secretary of Health and Human Services ("HHS").

4. Information Safeguards. Practice-Web will use appropriate administrative, technical and physical safeguards consistent with the size and complexity of Practice-Web's operations, and comply, where

applicable, with Subpart C of 45 C.F.R. Part 164 with respect to PHI in electronic form, to prevent Use or Disclosure of PHI other than as provided for by this BAA.

5. Client Representations

5.1 Client shall not request Practice-Web to Use or Disclose PHI in any manner that would not be permissible under Subpart E of 45 C.F.R. Part 164 if done by Client.

5.2 Client represents that it has obtained any necessary consents and Authorizations from any patients to which the PHI pertains to enable Practice-Web to provide the Services hereunder.

5.3 Client shall notify Practice-Web of any limitation(s) in the Notice of Privacy Practices of Client under 45 C.F.R. 164.520, to the extent that such limitation may affect Practice-Web's Use or Disclosure of PHI.

5.4 Client shall notify Practice-Web of any changes in, or revocation of, the permission by an Individual to Use or Disclose his or her PHI, to the extent that such changes may affect Practice-Web's Use or Disclosure of PHI.

5.5 Client shall notify Practice-Web of any restriction on the Use or Disclosure of PHI that Client has agreed to or is required to abide by under 45 C.F.R. 164.522, to the extent that such restriction may affect Practice-Web's Use or Disclosure of PHI.

6. Incident Reporting. Practice-Web shall report to Client any Use or Disclosure of PHI not provided for by the BAA of which it becomes aware, including Breaches of Unsecured PHI as required at 45 C.F.R. 164.410, and any Security Incident of which it becomes aware, provided, however, that for purposes of this Security Incident reporting requirement, the term "Security Incident" shall not include inconsequential incidents that occur on a daily basis, such as scans, "pings" or other unsuccessful attempts to penetrate computer networks or servers containing electronic PHI maintained by Practice-Web.

7. Subcontractors. Practice-Web may use subcontractors to perform the Services hereunder. Practice-Web shall ensure that any subcontractors that create, receive, maintain, or transmit PHI on behalf of Practice-Web agree to the same restrictions, conditions, and requirements that apply to Practice-Web with respect to such information in

accordance with 45 C.F.R. 164.502(e)(1)(iii) and 45 C.F.R. 164.308(b)(2) to the extent applicable.

8. Availability of Books and Records. Practice-Web shall permit the Secretary and other regulatory and accreditation authorities to audit Practice-Web's internal practices, books and records at reasonable times as they pertain to the Use and Disclosure of PHI received from, or created or received by Practice-Web on behalf of, Covered Entity in order to ensure that Covered Entity or Practice-Web is in compliance with the requirements of the Privacy Rule.

9 Patient Rights.

9.1 Practice-Web acknowledges that the HIPAA Regulations require Client to provide patients with a number of privacy rights. To assist Client Entity in complying with these requirements, Practice-Web agrees to the following:

9.1.1 Patient Access. To the extent required by the HIPAA Regulations, Practice-Web will make available PHI in a Designated Record Set, if a Designated Record Set is maintained by Practice-Web, to the Client as necessary to satisfy Client's obligations under 45 C.F.R. 164.524.

9.1.2 Amendment. To the extent required by the HIPAA Regulations, Practice-Web shall make any amendment(s) to PHI in a Designated Record Set, if a Designated Record Set is maintained by Practice-Web, as directed or agreed to by Client pursuant to 45 C.F.R. 164.526.

9.1.3 Accounting of Disclosures. To the extent required by the HIPAA Regulations, Practice-Web will maintain and make available the information required to provide an Accounting of Disclosures to the Client as necessary to satisfy Client's obligations under 45 C.F.R. 164.528.

9.2 Requests Received by Practice-Web. If Practice-Web receives a patient request for PHI held by Practice-Web on behalf of Client, or receives a patient request to exercise any other patient rights, Practice-Web shall notify Client of such request and forward the request to Client. Practice-Web shall then assist Client in responding to the request, in accordance with the above provisions.

10. Term and Termination.

10.1 Term. The term of this BAA shall continue until termination of all of the Underlying

Agreements or termination by either party in accordance with Section 10.2.

10.2 Material Breach. Where either party has knowledge of a material breach of this BAA by the other party and cure is possible, the non-breaching party shall provide the breaching party with an opportunity to cure. Where said breach is not cured within ten (10) business days of the breaching party's receipt of notice from the non-breaching party of said breach, the non-breaching party shall, if feasible, terminate this BAA and the portion(s) of the Underlying Agreement affected by the breach. Where either party has knowledge of a material breach by the other party and cure is not possible, the non-breaching party shall, if feasible, terminate this BAA and the portion(s) of the Underlying Agreement affected by the breach.

10.3 Return of Destruction of PHI. Upon termination, cancellation, expiration or other conclusion of this BAA, for any reason, Practice-Web shall, if feasible, return or destroy all PHI, in whatever form or medium, which Practice-Web created or received for or from Client. To the extent that Practice-Web decides that any return or destruction of PHI is not feasible, the parties agree that the requirements set forth in this BAA with respect to the PHI shall survive termination of this BAA, and Practice-Web shall extend the protections of this BAA to such PHI and shall not use or disclose such PHI other than for the purposes for which such PHI was retained and subject to the same conditions, restrictions and limitations set out in this BAA, for as long as Practice-Web maintains such PHI.

11. Limitation of Liability. IN NO EVENT SHALL PRACTICE-WEB'S LIABILITY FOR ANY BREACH OF THIS AGREEMENT EXCEED THE AMOUNT OF FEES PAID BY CLIENT TO PRACTICE-WEB FOR THE SERVICES FOR THE PERIOD OF THREE (3) MONTHS PRIOR TO THE OCCURRENCE OF SUCH BREACH. WITHOUT LIMITATION TO THE FOREGOING, PRACTICE-WEB SHALL NOT BE RESPONSIBLE OR HELD LIABLE FOR ANY CONSEQUENTIAL, SPECIAL, PUNITIVE, EXEMPLARY, INDIRECT OR INCIDENTAL LOSSES OR DAMAGES RELATED TO THE SUBJECT MATTER HEREOF OR FOR ANY BREACH OF THIS AGREEMENT, EVEN IF PRACTICE-WEB HAS BEEN ADVISED OF THE POSSIBILITY OF SUCH DAMAGES.

12. Miscellaneous.

12.1 Notice. All notices, requests, demands and other communications required or permitted to be given or made under this BAA shall be in writing, shall be effective upon receipt or attempted delivery, and shall be sent by (i) personal delivery; (ii) certified or registered United States mail, return receipt requested; (iii) overnight delivery service with proof of delivery; or (iv) electronic mail. Notices shall be sent to the addresses below. Neither party shall refuse delivery of any notice hereunder. Either party may change its address by delivery of notice of such change pursuant to this Section 12.1.

CLIENT:
At Client's address on record with Practice-Web.

PRACTICE-WEB:
Practice-Web Inc.
P.O. Box 4678
El Dorado Hills, CA 95762
email: sales@practice-web.com

12.2 Waiver. No failure on the part of either party to exercise, and no delay in exercising, any right or remedy hereunder shall operate as a waiver thereof; nor shall any single or partial exercise of any right or remedy hereunder preclude any other right or remedy or further exercise thereof or the exercise of any other right or remedy granted herein.

12.3 Assignment. Practice-Web shall have the right to assign its rights and obligations hereunder to any entity that is an affiliate or successor of Practice-Web, without the prior approval of Client.

12.4 Severability. Any provision of this BAA that is determined to be invalid or unenforceable will be ineffective to the extent of such determination without invalidating the remaining provisions of this BAA or affecting the validity or enforceability of such remaining provisions.

12.5 Entire Agreement; No Third Party Beneficiaries. This BAA constitutes the complete agreement between Practice-Web and Client relating to the matters specified in this BAA, and supersedes all prior representations or agreements, whether oral or written, with respect to such matters. No oral modification or waiver of any of the provisions of this BAA shall be binding on either party. No obligation on either party to enter into any transaction is to be implied from the execution or delivery of this BAA. This BAA is for the benefit of, and shall be binding upon the parties, their affiliates and respective successors and assigns. No third party shall be considered a third-party beneficiary

under this BAA, nor shall any third party have any rights as a result of this BAA.

12.6 Governing Law. This BAA shall be governed by and interpreted in accordance with the laws of the State of California, excluding its conflicts of law provisions. Venue for any dispute relating to this Agreement shall be in Sacramento County, California.

12.7 Nature of Agreement; Independent Contractor. Nothing in this BAA shall be construed to create (i) a partnership, joint venture or other joint business relationship between the parties or any of their affiliates, or (ii) a relationship of employer and employee between the parties. Practice-Web is an independent contractor, and not an agent of Client.

12.8 Counterparts; Electronic Contract. This BAA may be executed in any number of counterparts, each of which shall be deemed an original and all of which together shall constitute one and the same agreement. In proving this BAA, it shall not be necessary to produce or account for more than one such counterpart signed by the party against whom enforcement is sought. All facsimile signatures (whether transmitted by telecopier, electronic mail or otherwise) shall be treated as originals under this BAA. This BAA may be accepted by Client electronically by accepting the underlying agreement agreed to by Client or by utilizing the Services. This action creates an electronic signature that has the same legal force and effect as a handwritten signature on a written contract under any applicable law or regulation, and is equally binding.

12.9 Interpretation, Changes in Law. Any ambiguity in this BAA shall be resolved to permit Client and Practice-Web to comply with the HIPAA Regulations. Upon the effective date of any final regulation or amendment to final regulations promulgated by HHS, this BAA shall automatically amend such that the obligations they impose on Practice-Web and Client remain in compliance with these regulations and guidance.

12.10 Survival. The following Sections shall survive termination of this BAA; Sections 10, 11, 12.