

402 W. Wheatland, Suite 150
Duncanville, Texas 75116
800-720-9667 Phone
972-780-8546 Fax

CONSULTING AGREEMENT

This agreement governs the terms and conditions for providing professional consulting services to you, the Client.

Scope of Services. Rose & Associates has agreed to provide services in connection with Medicare reimbursement, coding, documentation, and other practice management matters. These services may include medical chart audits, seminars and training programs, on-going maintenance, hearings and appeals, and other special projects involving compliance with government regulations. Details of certain services may be spelled out in a separate document. Rose & Associates staff has extensive experience in this area and is qualified to provide these services to you.

Access to Resources. In turn, you agree to provide Rose & Associates with timely access to resource information as necessary and appropriate for us to perform the services.

Charges and Payment for Services. In consideration of our performance of services, you agree to pay our current hourly rate of \$100-\$225 per hour, in increments of 0.1 hours, for actual time spent on your behalf plus agreed to expenses for general consulting services. Fees for chart audits, appeals, hearings, and special projects will be quoted in advance in a written proposal. In most cases, our services are priced according to pre-published amounts which we believe are in line with industry standards and adequately represent the work involved. Consulting services performed at our hourly rate are billed monthly and are due upon receipt. For chart audit services, a deposit is required in advance, and the remainder of the fee is due at the time service is rendered. Itemized invoices will be sent to you at the address below unless otherwise directed.

Confidentiality. In most cases, it is necessary for us to access confidential information concerning your practice patterns and specific patient information contained in your medical records. We realize the need to treat all information as confidential, and shall not disclose to any party not a part of this agreement confidential or proprietary information unless preauthorized by you.

In the same regard, a great deal of the information we furnish during the course of our consulting services is considered proprietary or confidential and, oftentimes, copyrighted. As a result, you agree to maintain the proprietary nature of any information we provide you and are prohibited from releasing, copying, or sharing this information with any other practice or entity without our written permission.

Term and Termination. This Agreement shall commence as of the date shown below and shall continue until terminated by either party. You have the right to terminate the Agreement at any time, verbally or in writing. Upon termination, you will be responsible for any charges incurred in connection with any work performed up to the date of termination. We may also terminate the Agreement with you for any reason, including non-payment of fees. Your signature below indicates your acceptance of the terms of this agreement which will remain in effect until terminated by either party.

For Rose & Associates:

For Client:

E. Ann Rose, President

Name of Organization

Date

Billing Address

City, State and Zip

Signature of Authorized Person

Print Name and Title