

Scope of Agreement: This Master Services Agreement ("Agreement") serves as the general terms and conditions governing non-clinical administrative support, benefit investigations, coverage verifications, and prior authorization coordination provided to medical practices, physician networks, and healthcare facilities.

1. PARTIES & EFFECTIVE DATE

This Agreement is entered into by and between True USA Senior Concierge, L.L.C. ("Provider") and the healthcare practice, physician group, clinic, or medical organization executing an accompanying Order Form or Statement of Work ("Client"). This Agreement becomes effective on the date of execution by both parties or as specified in the applicable Order Form.

2. PURPOSE & NON-CLINICAL SCOPE

Provider delivers non-clinical administrative support designed to streamline revenue cycle management and administrative workflows. Services include Benefit Investigation Reports (BIR), insurance eligibility and coverage verification, prior authorization document coordination, and administrative follow-up.

Non-Clinical Status: Provider acts strictly as an independent administrative service vendor. Provider does not render medical advice, diagnose conditions, evaluate medical necessity, select clinical protocols, or make clinical treatment decisions. All clinical, diagnostic, and prescribing decisions remain under the sole discretion and authority of Client and its licensed healthcare providers.

3. SERVICE MODELS & INTAKE ENGAGEMENT OPTIONS

Client may submit requests and engage Provider through any of the following operational models, as designated in an Order Form:

- **Per-Unit / On-Demand BIR Engagement:** Executed per single or ad-hoc Benefit Investigation Report request without minimum volume commitments.
- **Recurring Weekly / Monthly Subscriptions:** Scheduled administrative intake allocations designed for predictable practice volume.
- **Annual Master Service Agreement:** Year-long practice integration providing streamlined billing, dedicated account support, and tiered volume discounts.

4. TURNAROUND TIMES & ENGAGEMENT TIERS

When submitting a Benefit Investigation Report (BIR) or authorization request, Client may elect one of the following turnaround options:

Service Tier	Standard Turnaround Time	Base Rate	Description & Operational Scope
Standard BIR	24 to 48 Business Hours	\$35.00 / report	Standard non-clinical benefit investigation and coverage verification report.
Expedited BIR	Same-Day / Expedited	\$60.00 / report (\$35 + \$25 surcharge)	Priority processing for urgent clinical or patient scheduling needs.

5. LONG-TERM B2B PROVIDER CONTRACTS & CUSTOMIZED COMMITMENTS

For healthcare practices seeking comprehensive ongoing administrative coverage, Provider offers long-term B2B contract options:

- **Structure:** Long-term contracts may be established on a quarterly, semi-annual, or annual term as specified in the Order Form.
- **Volume Pricing:** Tiered discounts and fixed monthly retainer structures are available for practices exceeding threshold monthly BIR volumes.
- **Dedicated Support:** Long-term contracts include dedicated account coordination, custom reporting formats, and priority intake handling.

6. BILLING, FEES & PAYMENT TERMS

Unless otherwise modified in an Order Form:

- **Invoicing:** Invoices are issued weekly or monthly based on engagement tier and are due within thirty (30) calendar days of receipt.
- **Administrative Fee Basis:** Fees compensate Provider strictly for administrative research and documentation performed. Fees are entirely independent of payer reimbursement decisions, prior authorization approvals, or patient clinical outcomes.

7. TERM, RENEWAL & CANCELLATION OPTIONS

- **Term:** This Agreement remains in effect until terminated in accordance with this Section.
- **Standard Cancellation (On-Demand / Monthly):** Either party may cancel standard or monthly recurring services upon thirty (30) days' written notice.
- **Long-Term Contract Cancellation:** Long-term annual or multi-month contracts may be terminated (a) upon mutual written agreement, (b) for uncured material breach following fifteen (15) days' written notice, or (c) as otherwise specified in the applicable Order Form.

8. HIPAA, BAA & PATIENT PRIVACY

When Provider acts as a Business Associate under HIPAA, the parties shall execute and maintain a separate Business Associate Agreement (BAA). Client warrants that it has secured all necessary patient consents and legal authorizations required to share health details for administrative verification purposes.

9. LIMITATIONS OF LIABILITY & GOVERNING LAW

Provider uses commercially reasonable efforts to deliver accurate administrative research. Provider does not guarantee payer approval or claim payment. This Agreement shall be governed by and construed under the laws of the State of Maryland.

10. EXECUTION & SIGNATURES

IN WITNESS WHEREOF, the parties have executed this Master Services Agreement as of the dates set forth below.

TRUE USA SENIOR CONCIERGE, L.L.C.

Master Services Agreement — Provider Administrative Support

PROVIDER:

True USA Senior Concierge, L.L.C.

By: _____

Title: Authorized Representative

Date: _____

CLIENT / PRACTICE:

Legal Name: _____

By (Physician/Authorized Signer): _____

Title: _____

Date: _____