



Pricing Policy

Pricing & Billing Policies for your Tebra Account

General Terms

Billing Frequency and Methods

Billing	Frequency and Method
Subscription fees	Billed monthly in advance
Transactional fees (electronic claims, eligibility checks, electronic remittance advice, paper claims, patient statements)	Billed monthly in arrears
Data storage fees	Billed monthly in arrears
Data import fees	Billed monthly in arrears
Professional services (training, credentialing)	Billed monthly in arrears
Onboarding fees	one-time fee; billed at sign up

- **Adding or Removing Providers.** New (activated) Providers will be charged on a pro-rata monthly basis, but removed (deactivated) Providers are charged for the last full month in advance.
- **Provider** means any provider of billable medical services to patients who is an employee, customer, or has an employment, contractor, or agent relationship with a Customer, for which the Service organizes information and provides clinical, billing, marketing, and managed billing services.
- **Physician Provider** means an *individual* Provider that is authorized to directly bill Medicare or commercial insurance companies for professional healthcare services rendered to patients, and holds a degree of, including but not limited to, DDS, DO, DMD, DPM, MD, ND, NMD, or OD.
- **Therapist** means any physical therapists (PT), occupational therapists (OT), speech language pathologists (SLP), marriage and family therapists (MFT), social worker (LCSW, MSW), psychologists.



- **Non-Physician Provider** means any individual Provider other than a Physician Provider or Therapist. This includes, but is not limited to, acupuncturists, audiologists, chiropractors, mid-wives, nurse practitioners, physician assistants or registered dietitians.
- **Supervising Provider** means a Physician Provider who monitors and aids Non-Physician Providers by signing/counter-signing notes, as well as prescribing medications. A Provider that has duties in addition to the foregoing shall not constitute a Supervising Provider.
- **Facility Provider** means an organization, facility, or lab that is authorized to directly bill Medicare or commercial insurance companies for institutional healthcare services rendered to patients.
- **Fees:** All fees charged by Tebra are described in Tebra's Pricing Policy page and are determined by the subscription level selected and specific provider characteristics (example, Essentials, Plus, Pro, Physician or Non-Physician Provider, full-time or part-time, or specialty). All prices may change with 30 days electronic notice. You are responsible for keeping your email address updated with Tebra. Mailing fees (example, for mailings like paper insurance claims or paper patient statements) may be increased at any time to reflect a change in the USPS postage or processing costs.

Billing Transaction means , in connection with subscription pricing based on billing transaction volume, any of the following: (i) electronic claims, (ii) eligibility checks and (iii) each request/claim submitted, paid and/or denied within an electronic remittance advice (ERA).

Billing & Other Terms

- **Notice of Non-Renewal.** To prevent renewal of a Customer Agreement, either party must give written notice of non-renewal and this written notice must be received no more than ninety (90) days but no less than sixty (60) days in advance of the end of the Customer Agreement then in effect. If Customer decides not to renew, Customer must send the notice of non-renewal by contacting the assigned Account Manager directly or via the communications methods in Tebra's Support Policy. Any notice received with less than sixty (60) days' notice will result in auto-renewal of the Customer Agreement for an additional Renewal Term.
- **No Refunds/Credits:** All fees are nonrefundable and non-cancellable. Tebra does not refund or credit subscription fees for partial months, or any portion of a prepaid plan upon a deactivation of a Provider or account cancellation. Customer is responsible for all fees (including any monthly minimum) for the entire term of the applicable order or subscription agreement.



- **Practices:** Must have at least one active Provider within a Practice for the Practice to remain active.
- **Minimum Fee:** There is a minimum monthly fee of \$150 for any account that has not activated a Provider. When a Provider is activated, subscription fees will be charged accordingly.
- **Excess Claims by Facility Provider:** Tebra may modify the monthly fee after 30 days' notice if Customer exceeds 500 claims per month for any Facility Provider.
- **Tebra Platform:** Price is for the three module bundle of Tebra Clinical, Tebra Billing and Tebra Engage only. If one or more modules are canceled at any time, remaining modules revert to full price.
- **Multi-Practice Provider:** Providers activated within multiple practices within a single Tebra account will be charged one subscription fee, at the highest applicable subscription level (e.g., Essentials, Plus or Pro), subject to the Provider using and correctly inputting the same name, NPI, and other user information in connection with all relevant practices.

Reactivation Fee: Tebra reserves the right to assess a \$49 reactivation fee to Customers whose accounts are suspended based on late payments received more than fifteen (15) days following the payment due date.

Customer Support Plans & Fees

Phone, Email and Live Chat Support

- All subscription levels include unlimited access to customer support by email, live chat and phone.

Assisted Enrollment Service

- Assisted enrollment services include clearinghouse sign-up and setup of electronic services with insurance companies.
- Unlimited number of payers on your initial enrollment. Subsequent payers are not included.
- Assisted enrollments are included for all customers without additional fees.

Electronic Clearinghouse Services & Fees

Electronic Claims Submission (ANSI 837)

- Electronic claims submission service includes sending electronic claims in the ANSI 837 format to Tebra's Clearinghouse.
- \$0.99 per electronic claim, per provider, per month for Low-Volume subscription plans beginning after the first 50 claims. No charge for other subscription levels.

Electronic Remittance Advice (ANSI 835)



- Electronic remittance advice service includes receiving electronic remittance advice messages from Tebra’s Clearinghouse in the ANSI 835 format.
- No charge for all subscription levels.

Electronic Real-Time Insurance Eligibility Services (ANSI 270/271)

- Electronic real-time insurance eligibility services include performing electronic verification of insurance benefits from Tebra’s Clearinghouse in the ANSI 270/271 format.
- No charge for all subscription levels.
- **Termination of Remittance Services:** In the event that Customer desires to discontinue electronic remittance services, then Customer must contact the insurance companies directly to request termination.

Paper Claims Mailing Services

Jopari (Workers Compensation and Auto Only) Paper Claims Mailing Services

- \$0.99 for the first page, postage is included.
- \$0.20 for each additional page.
- No fee for printing of paper claims to your own printer from Tebra.

Non-Jopari Clearinghouse Paper Claims Mailing Services

- \$0.99 per paper claim printed and mailed, postage is included.
- No fee for printing paper claims to your own printer from Tebra.

Patient Payment Credit Card Services

Pricing	Per Transaction Fee
Credit Card Flat Rate	2.75% + \$0.30
Processing Fee	Individual credit card payments above \$5,000 will incur a 2% processing fee.

Patient Statement Mailing Service Fees

- Sending batches of patient statements to Tebra-affiliated processor for printing and mailing (postage is included).
- **First Page:** \$0.99/statement.
- **Additional Pages:** \$0.24/page.



- **Undeliverable Mail:** Statements rejected by the USPS as undeliverable are charged at the normal rate. A report with each reject and an explanation of the error will be provided so that address can be updated for future mailings.
- No fee for printing of patient statements to your own printer from Tebra.

Data Storage

- **Monthly Allowance:** For customers on Essentials, Plus, Pro, Platform, Standard, PT/OT/SLP, and Billing Company editions, each account is provided 250 gigabytes of data storage per Provider within the Practice. Any data storage that exceeds the amount provided will be billed at \$0.15 per gigabyte monthly. For customers on other editions, please click [here for data storage fees](#).

Data Import & Migration Fees

Data Import

- Data import is available for the following areas: Patient Demographics, Appointments, Patient Case (Insurance Policy), Payer List, Provider List, Service Locations, Patient Balances Forward, Scanned Documents (Clinical and Non-Clinical), Fee Schedule, and Care Summary Document (C-CDA).
- Fees for data imports are determined based on the data sets requested and volume of the specific import and are quoted through by Tebra’s data services team.

Data Migration

- Moving practice data from a multi-practice account (e.g. a billing company) into a newly created customer account.
- May include all of the data within the practice, including but not limited to, patients, appointments, encounters, claims, payments, documents, settings, and clinical data.
- Permission: Requires written permission from the company administrator whose account the data originates.
- Fees for data migration are determined based on the details for the specific migration and are quoted through by Tebra’s data services team.

What types of files can we accept data in?

Data Set	Format
Demographics	XLS, CSV



Insurance Companies, Plans, and Policy Info	XLS, CSV
Referring Providers	XLS, CSV
Service Locations	XLS, CSV
Fee Schedules	XLS, CSV
Service Locations	XLS, CSV
Appointments	XLS, CSV
Providers	XLS, CSV
Balance Forward	XLS, CSV
Fee Schedules	XLS, CSV
Journal Notes	XLS, CSV
Scanned Documents	PDF, doc, docx, gif, jpg, jpeg, html, png rtf, tif, txt
Clinical Document CCDA Discrete	XML

Robotic Process Automation Services Fees

Billing	Frequency and Method
Subscription fees	Billed monthly in advance on a per practice basis
Onboarding Fees	Billed in advance on a per practice basis



Transactional Fees (Smart Connector for HL7 & Patient Data; Automated Clinical Note Creation)	Billed monthly in arrears for each transaction/encounter above the standard monthly allotment
Transactional Fees (PDF Note Creation)	Billed monthly in arrears for each transaction

- Subscription Fee Structure
 - Per month per practice
 - ERA Processing
 - Unapplied Payments
- Setup & Monthly Transaction Fee Structure:
 - AR Courtesy Calls
 - Transaction fee: packaged by minutes/texts per month
 - Smart Connector for HL7 & Patient Data
 - Setup fee: per practice for a single file or transaction feed
 - Transaction fee: packaged per any appropriate patient and/or billing data for a single encounter per month
 - Automated Clinical Note Creation
 - Transaction fee: packaged by encounter per month
 - PDF Note Creation
 - Transaction fee: packaged per note created each month

Electronic Prescribing of Controlled Substances using Tebra EHR

- Tebra charges a one-time application fee for e-prescribing of controlled substances of \$75.00.
- Prescription Drug Monitoring Program (PDMP) Add-On Service: (i) one-time implementation and setup fee of \$500 per Facility; and (ii) \$50/year per Authorized User

Fee Changes

- For Customers with month to month agreements, all fees may be changed with sixty (60) days’ notice to Customer.
- For all Customers, Tebra reserves the right to increase its prices by no greater than 4.9% at any one time, no more frequently than once per 12 month period, upon thirty (30) days’ notice to the Customer. This provision shall not apply to RPA customers.



- For all Customers, Tebra may increase fees to cover the cost of postage rate increases as well as regulatory, compliance, and other cost increases imposed by changes to applicable federal and state rules. Tebra will automatically apply the rate increase to all services impacted by the change with thirty (30) days' notice to the Customer.

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