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www.philips.com/respironics

Caution: U.S. federal law restricts these devices to
sale by or on the order of a physician.

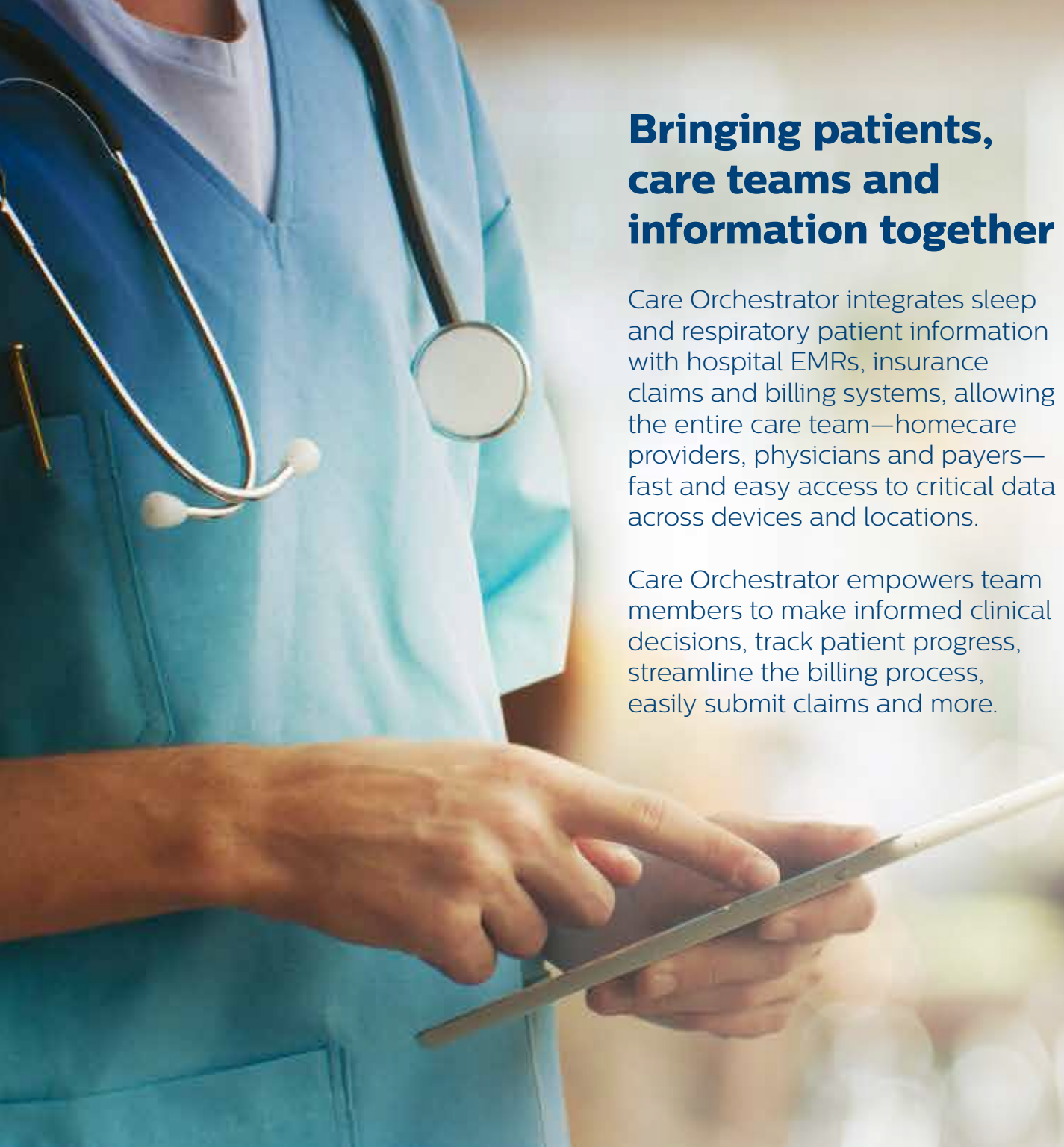
RRDPGH ML 4/15/20 PN 1145893 MCI 4109713 v00
1010 Murry Ridge Lane, Murrysville, PA 15668
800 345 6443 • 724 387 4000

PHILIPS
RESPIRONICS

Care Orchestrator

A male doctor in a white lab coat and a striped tie is looking down at a tablet computer. Overlaid on the scene is a futuristic digital interface. It features a wireframe human figure in the center, surrounded by various data visualization elements: a bar chart, a line graph, a circular gauge, and several glowing lines and nodes, suggesting a complex data integration or patient monitoring system.

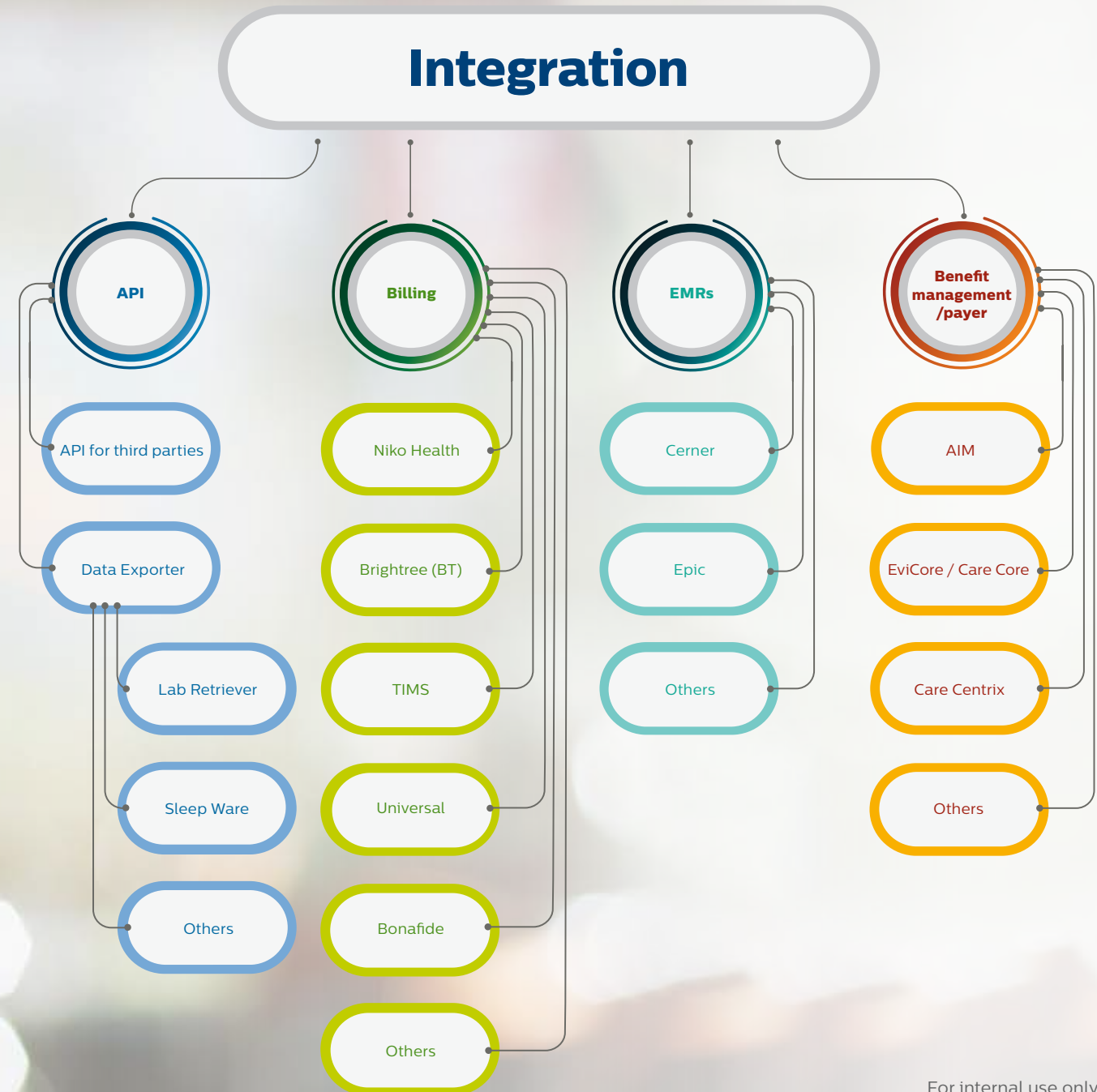
Integration package



Bringing patients, care teams and information together

Care Orchestrator integrates sleep and respiratory patient information with hospital EMRs, insurance claims and billing systems, allowing the entire care team—homecare providers, physicians and payers—fast and easy access to critical data across devices and locations.

Care Orchestrator empowers team members to make informed clinical decisions, track patient progress, streamline the billing process, easily submit claims and more.



For internal use only

Application program interface (API)



Description

With Care Orchestrator's application program interface you can retrieve therapy reports, summarize compliance data and, through patient rules, receive updates and notifications if the patient has achieved compliance. Also, you can insert and/or update patient demographics by allowing external applications to access your CO database.



Time frame

Approximately one week after agreement is signed



Benefit

By entering patients into one platform you can save time, minimize errors and optimize workflows



Process

1. Account manager initiates the process, by having customer review, complete and sign interoperability services addendum agreement
2. Agreement internal check
3. Account manager receives account and API document from Philips integration team and sends to customer



Features

- Full customization of patient fields (check the API document)
- Assign device
- Check patient compliance
- Retrieve pdf reports
 - Best 30-day compliance report option
- Add/retrieve patient notes
- Assign external entities (like physicians)
- Retrieve authorized physician list
- Retrieve reminders and tasks



Cost

- Bundled



Organizational type

- DME provider
- Physician

API process

- 1 Account manager/program manager (AM/PM) initiates the API process:
 - AM emails sales enablement (SE) with account name and number requesting interoperability services addendum for API
 - Email subject line should read "(Region)—CO—DME name—Sold to number"
- 2 AM/PM receives customized interoperability services addendum from SE
 - AM reviews and assists customer to complete and signs agreement

Note: Complete customer integration has been requested in the services section (2.1) and account info to create the integration key is in the payment section (3) of the agreement
- 3 AM/PM sends completed interoperability services addendum to SE team: (SRC.salesenablement@Philips.com) for confirmation (approximately one day)
- 4 SE sends completed interoperability services addendum to customer support for documentation (approximately one day)
- 5 Integration team (dl_PH_XYS_Encore_Integration_Team@philips.com) creates the account and document, sends to AM/PM (approximately two days)
- 6 AM/PM sends account info and API document to customer



Data exporter



Description

Data exporter can generate patient therapy data for a given time period within your database



Time frame

Approximately two weeks after agreement is signed



Benefit

Customers can receive data in the format of their choice to import into another system



Process

1. Account manager initiates the process by having customer review, complete and sign Interoperability services addendum agreement
2. Agreement internal check
3. Operation team generates report template (approximately one week)
4. Integration support team notifies the exporter function and accesses SFTP to account manager (approximately two days)
5. Account manager sends info to customer



Features

- XML Export
- CSV Export
- Secure File Transfer Protocol (SFTP)
- Usage, AHI and other key data fields
- Customizable data range



Cost

- Bundled

Data exporter

- 1 Account manager/program manager (AM/PM) initiates the API process:
 - AM emails sales enablement (SE) with account name and number requesting interoperability services addendum for API
 - Email subject line should read “(Region)—CO—DME name—Sold to number”
- 2 AM/PM receives customized interoperability services addendum from SE
 - AM reviews and assists customer to complete and signs agreement

Note: Complete customer integration has been requested in the services section (2.1) and account info to create the integration key is in the payment section (3) of the agreement
- 3 AM/PM sends completed interoperability services addendum to SE team: (SRC.salesenablement@Philips.com) for confirmation (approximately one day)
- 4 SE sends completed interoperability services addendum to customer support for documentation (approximately one day)
- 5 Operation team generates report template (approximately one week)
- 6 Integration support team notifies the exporter function and accesses SFTP to AM (approximately two days)
- 7 AM/PM helps customer to set up data exporter in CO



For internal use only

Electronic medical records (EMR)



Description

EMR is a healthcare informatics solution that affects all areas of the healthcare environment by connecting across clinical and non-clinical domains. EMR addresses challenges with patient care, safety, hospital management, supply and financials.



Time frame

Approximately two to three months based on customer bandwidth



Benefit

By entering patients into one platform you can save time, minimize errors and optimize workflow



Process

1. Account manager initiates the process by having customer review, complete and sign interoperability services addendum agreement
2. Integration support team communicates with customers for details



Features

- Entire pdf download report(s) of your choice can be routed into a specified patient Epic folder
- Text fields can also be routed into specific patient folders and this is helpful for research and/or retrospective analysis
- 25 therapy data fields (usage, leak, pressure settings) are provided as data in Care Orchestrator (CO)
- Provides patient support for standardized workflows and clinical decision support
- EMR integration is offered in Care Orchestrator
- Provides patient support for standardized workflows and clinical decision support
- Integrated operations such as scheduling and bed management
- Create patients in CO when sleep therapy is ordered



Cost

- \$5,000 for initial start up
- \$2,500 annually

EMR process

- 1 Account manager/program manager (AM/PM) initiates the API process:
 - AM emails sales enablement (SE) with account name and number requesting interoperability services addendum for API
 - Email subject line should read “(Region)—CO—DME name—Sold to number”
- 2 AM/PM receives customized interoperability services addendum from SE
 - AM reviews and assists customer to complete and signs agreement

Note: Complete customer integration has been requested in the services section (2.1) and account info to create the integration key is in the payment section (3) of the agreement
- 3 AM/PM sends completed interoperability services addendum to SE team: (SRC.salesenablement@Philips.com) for confirmation (approximately one day)
- 4 SE sends completed interoperability services addendum to customer support for documentation (approximately one day)
- 5 Integration team contacts customer for details (account manager, program manager as coordinator)



For internal use only

Billing integration



Description

Integration for Brightree, TIMS, Universal (still in beta), Bonafide and Niko Health



Time frame

If vendor is already integrated with Care Orchestrator (CO), approximately two weeks after agreement is signed; if not, our integration team will meet with the third-party vendor to determine next steps



Benefits

- Generate patient therapy reports from billing system in CSV or XML format
- Receive indication when patient has achieved CMS compliance
- Remove duplicate entries for billing in CO



Process

1. Account manager initiates the process by having customer review, complete and sign Interoperability services addendum agreement
2. Agreement internal check
3. Account manager receives account and API document from Philips integration team and sends to customer
4. For Brightree, account manager needs to get authorization from Brightree



Features

One button click to create patients in CO by pulling fields from billing system

- Patient demographics (Name, DOB, address, phone, e-mail, insurance number)
- Device serial number
- Notes
- Clinician, PCP, sleep doctor, sleep lab, custom fields*



Cost

- Brightree - \$15 per patient/month with a minimum of 35 patients or flat rate of \$1,000/month
- All others - \$250/month

*Check interoperability services addendum for the full list of billing systems, or ask integration team for check

Billing integration process

- 1 Account manager/program manager (AM/PM) initiates the API process:
 - AM emails sales enablement (SE) with account name and number requesting interoperability services addendum for API
 - Email subject line should read “(Region)—CO—DME name—Sold to number”
- 2 AM/PM receives customized interoperability services addendum from SE
 - AM reviews and assists customer to complete and signs agreement

Note: Complete customer integration has been requested in the services section (2.1) and account info to create the integration key is in the payment section (3) of the agreement
- 3 AM/PM sends completed interoperability services addendum to SE team: (SRC.salesenablement@Philips.com) for confirmation (approximately one day)
- 4 SE sends completed interoperability services addendum to customer support for documentation (approximately one day)
- 5 Integration team (dl_PH_XYS_Encore_Integration_Team@philips.com) creates the account and document, sends to AM/PM (approximately two days)
- 6 AM/PM sends account info and API document to customer
- 7 AM/PM send key and authorization form to Brightree and gets confirmation from them (only for Brightree)
- 8 AM/PM can ask integration team for training material if available

Get authorization from Brightree:

- 1 Account manager: send key received from integration team and form below to therapyssetup@brightree.com
- 2 Brightree: complete the info and send to main point connector program manager, then send to individual program manager

Email subject: Philips Respironics Integration Request

Integrator user: ABC DME

Integrator key: _____

Customer: ABC DME

Address: _____

Main contact: _____

Title: _____

Email: _____

Phone: _____

brightree
EncoreAnywhere Customer Authorization
 Consent to Share Brightree Database Information, including Patient Information

As you know, EncoreAnywhere has been built to be able to extract data from your database in the Brightree solution. It is our policy to obtain written consent from each of our customers before we allow their data to be shared with another vendor. We have a business associate agreement in place with you, and we have been informed by Responder, Inc. that they also have a business associate agreement in place with you for the protection of that information.

Please complete the required fields below and return this form authorizing us to pass your information back and forth between the Brightree BSP Services and the EncoreAnywhere solutions.

By signing below, I hereby grant my consent to the passage of data between the Brightree BSP Services and the EncoreAnywhere solutions.

Company Name	
Signature	
Name Printed	
Title	
Email	
Phone	
Date	
On Brightree Database: @	

** Please note that all above fields are required.

1735 North Bruce Road, Suite 500 - Lawrenceville, Georgia 30043 - Phone: (770) 963-1800 - Fax: (770) 963-1004 - www.brightree.com

Sample of training materials that account manager/program manager sends to customer

Dear Customer,

AIM, CareCentris and eviCore have been enabled on your Care Orchestrator account. Below are instructions on how to indicate in CO that a patient is with one of these companies in order for that company to be able to pull compliance data without your staff having to supply the reports.

- **eviCore** - The Subscriber ID# number is located on the first page after the cover letter of your pre-authorization that they send you. This Subscriber ID# must be entered into the Care Orchestrator External services field.
- For AIM or CareCentris, enter the Member ID# from the insurance card into the Care Orchestrator External services field.
- Be sure to have the patient first name, last name, and DOB entered correctly.
- It takes up to 48 hours after entering a patient for eviCore to be able to see the data they need so if you connect an eviCore patient today and get a call for a report tomorrow, it does not mean they don't have access. It's always best practice to get the patient entered in Care Orchestrator as close to the setup date as possible.

Enter the Subscriber ID (eviCore) or Member ID# here in the patient Identity Tab under Member ID and then select **eviCore**, **CareCentris**, or AIM in the External Services field.
IMPORTANT - Click on the actual words Select External Services as highlighted below to see the drop-down selections. If you click on the down arrow at the end of that field, the selections do not display.

eviCore one-approval form example:

Benefit management (insurance/payers)

Benefit management (insurance/payers)



Description

Provides easy access to compliance data for insurance provider to verify and reimburse Care Orchestrator (CO) customers



Time frame

Approximately one week to enable access after agreement is signed



Benefit

Ability to share information with insurance providers to streamline reimbursement process



Process

1. Account manager initiates the process by having customer review, complete and sign interoperability services addendum agreement
2. Agreement internal check
3. Integration team will give approval for access to the insurance companies
4. Account manager helps customer to set up through CO



Features

- When DME submits claim for reimbursement, insurance agencies will be able to automate insurance checks
- Enable insurance companies access for customers to streamline reimbursement when compliance is met



Cost

- Bundled

Benefit management process

- 1 Account manager/program manager (AM/PM) initiates the API process:
 - AM emails sales enablement (SE) with account name and number requesting interoperability services addendum for API
 - Email subject line should read “(Region)—CO—DME name—Sold to number”
- 2 AM/PM receives customized interoperability services addendum from SE
 - AM reviews and assists customer to complete and signs agreement

Note: Complete customer integration has been requested in the services section (2.1) and account info to create the integration key is in the payment section (3) of the agreement
- 3 AM/PM sends completed interoperability services addendum to SE team:
(SRC.salesenablement@Philips.com) for confirmation (approximately one day)
- 4 SE sends completed interoperability services addendum to customer support for documentation (approximately one day)
- 5 Integration team provides final approval for access to the insurance companies
- 6 AM/PM helps customer to set up through CO platform



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Other 3rd parties

Other third parties



Description

• Philips has the ability to connect with a variety of third parties, such as Sonmoware, Itamar and Medaddept, for providing solutions



Time frame

• Approximately two weeks after paper work is signed



Benefits

- Varies by platform due to connectivity
- Philips provides access to utilize API so third party can take advantage of the following features
 - Generate patient therapy reports from billing system
 - Receive indication when patient has achieved CMS compliance
 - Remove duplicate entries for billing in Care Orchestrator



Features

- Automated workflows
- In-lab or home sleep testing options
- Single sign-on for physicians
- Patient and device tracking



Process

If Philips works with vendor

1. Account manager initiates the process by having customer review, complete and sign interoperability services addendum agreement
2. Agreement internal check
3. Account manager gets account and API document from Philips integration team and sends them to customer

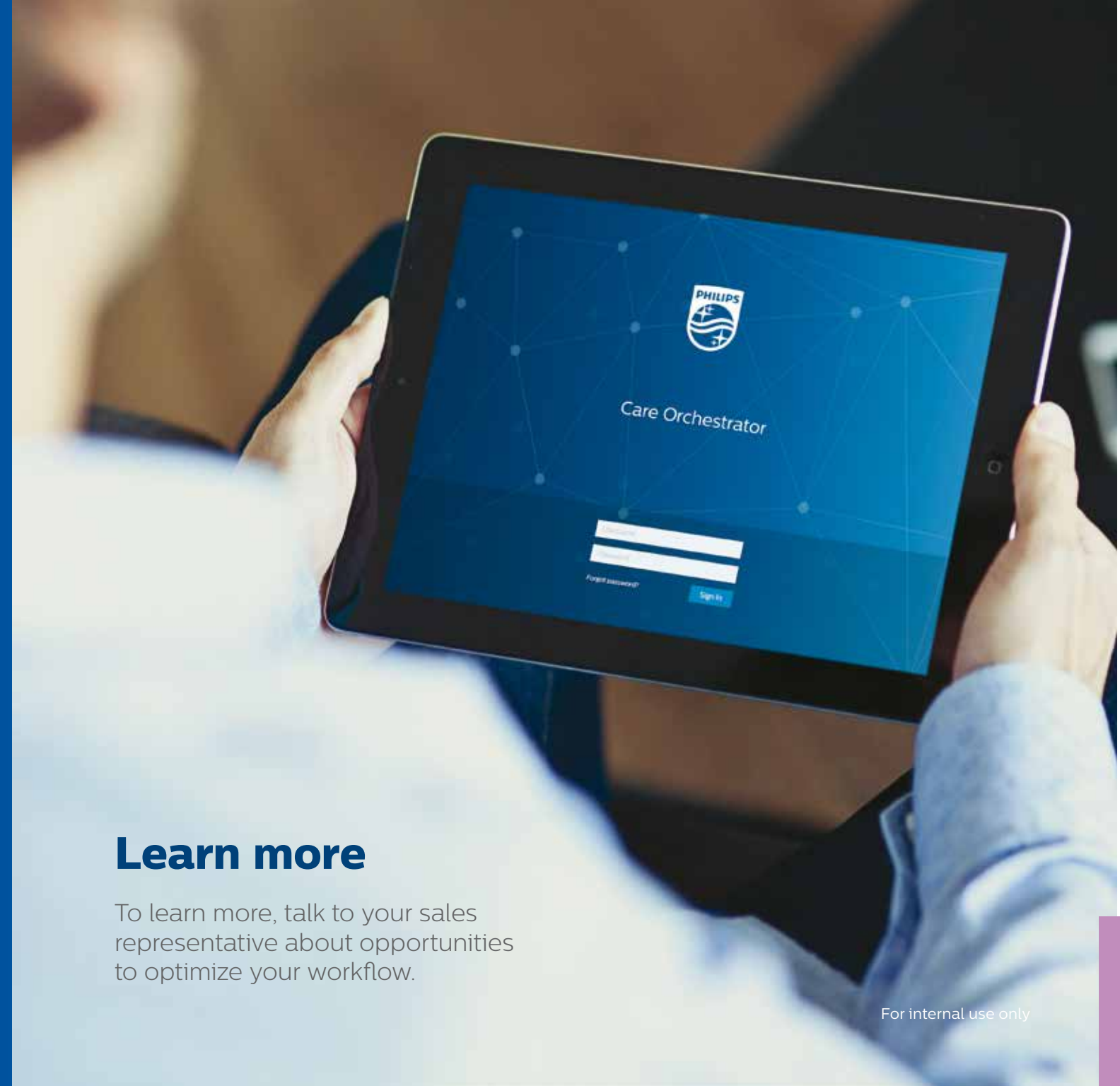
If Philips does not work with vendor

1. Talk with integration team



Cost

- \$250 per month
- Payment will vary due to the strategic partnership with Philips



Learn more

To learn more, talk to your sales representative about opportunities to optimize your workflow.

For internal use only

Appendix

Interoperability services addendum

2. SERVICE OFFERINGS.

2.1. The Services.

Service Selections*	
<input type="checkbox"/> Electronic Communications @ <input type="checkbox"/> Data Exporting Web Services** @ <input type="checkbox"/> Company Merger*** @ <input type="checkbox"/> Company Split**** @ <input type="checkbox"/> Batch Export Utility** @ <input type="checkbox"/> CareCore/eviCore Addendum to BAA @ <input type="checkbox"/> EMR HL7 format <input type="checkbox"/> Other approved software @ _____ <input type="checkbox"/> Other approved software	<p style="text-align: center;">Billing Integration (select one)</p> <input type="checkbox"/> Bonafide Integration <input type="checkbox"/> Brightree Integration# <input type="checkbox"/> TIMS Integration <input type="checkbox"/> Universal Integration <input type="checkbox"/> Other approved Integrations _____
<p>*Service option descriptions are set forth in Exhibit A, attached hereto. ** See Exhibit C for additional necessary customer information if selected ***See Exhibit B for additional necessary customer information if selected ****See Exhibit A for additional necessary customer information if selected @ Pricing does not apply # Pricing for Brightree Integration is offered at a discounted rate for users of PAMS. The discount shall apply only to the period during which the Customer uses both Brightree Integration and PAMS. See your representative for details.</p>	

3. PAYMENT.

3.1. Pricing for Services. Pricing for Services selected in Section 2.1, if applicable, shall be as set forth on the then-current US Purchaser List Price unless otherwise offered by Philips Respironics. Philips Respironics may revise pricing at any time, if applicable.

3.2. Invoice. Respironics will invoice the Customer for charged services as indicated above, and payment shall be due as indicated thereon. Respironics shall invoice Customer monthly and Customer shall pay such invoices in accordance with Customer's current payment terms with Respironics. Customer represents that its current account information with Respironics is as follows:

Account Name:	Click here to enter Account Name
Account Number:	Click here to enter Account Number
Account Mailing Address:	Click here to Account Mailing Address
Account Representative:	
Open Purchase Order Number*:	Click here to enter Open Purchase Order Number

(*Not required for Brightree Integration.)