Refund Categories:

1. Failure To Provide Enough Information

1.1. When You Will Be Charged:

1.1.1. Failure To Provide A Legitimate Reason For Refund

- 1.1.1.1. The client (office) must provide a logical and explanatory reason behind why the refund should be processed for the patient. If the refund reason is not provided, is inaccurate, or vague, then the client (office) will be charged.
- 1.1.1.2. If the additional refund information is not specific, is vague, or doesn't have a legitimate reason that would actually state a factual reason specifically pertaining to medical conditions that are listed, then this should fall under the failure to provide a legitimate reason policy for refunds.

2. Duplicate Payment(s)

2.1. When You Will Be Charged:

2.1.1. In-Office Payment Collection

2.1.1.1. The client used an incorrect card or preferred to be charged on another card, resulting in a refund, and the office collects the payment in-office.

2.1.2. Pre-Existing Patient

2.1.2.1. The client already has come into the office for a previous other treatment requires you to treat the patient as we consider this to be a client reactivation so if you process a refund for this patient you will be billed.

2.2. When You Will Not Be Charged:

2.2.1. Intentional Duplicate Transaction(s):

- 2.2.1.1. The patient attempted to claim additional treatments through the offer for additional savings, violating the promotion's terms and conditions.
- 2.2.2. Unintentional Duplicate Transaction:

2.2.2.1. The patient unintentionally claimed additional treatments through the offer, violating the promotion's terms and conditions.

2.3. Additional Notes:

2.3.1. All duplicate payments are processed for refunds automatically by our team via an internal notification system.

3. Distance Related / Patient Too Far Away

3.1. When You Will Be Charged:

3.1.1. Less Than 1 Hour Away

3.2. When You Will Not Be Charged:

3.2.1. Further Than One Hour Away

3.3. Additional Notes:

3.3.1. Travel time and patient location are based on the average travel time at noon on Tuesdays using Google Maps to the authenticated zipcode from the payment method at the time of the transaction.

4. Medical Condition Preventing Treatment

4.1. When You Will Be Charged:

4.1.1. False Reporting Of Conditions:

4.1.1.1. False reporting of patients' medical conditions to prevent being charged for the actual reason the refund was being processed.

4.1.2. Inaccurate Reporting Of Conditions:

4.1.2.1. Inaccurate or exaggerated reporting of patients' medical conditions to prevent being charged for the actual reason the refund was being processed.

4.2. When You Will Not Be Charged:

4.2.1. Skin Sensitivity / Lupis

4.2.1.1. Conditions causing heightened sensitivity to light or other therapy modalities.

4.2.2. Cancer / Chemotherapy Patient

4.2.2.1. Undergoing chemotherapy or radiation treatment may affect the body's response to additional treatments.

4.2.3. Epilepsy

4.2.3.1. Especially if there's a risk that the treatment could trigger seizures.

4.2.4. Pregnancy

4.2.4.1. Due to potential unknown risks to the child.

4.2.5. Breastfeeding

4.2.5.1. If there is a risk that the treatment could affect breast milk and, thereby, the child.

4.2.6. Physician Rejected Treatment

4.2.6.1. Treatment is not allowed or suggested to not be completed by the patient's primary care physician.

4.2.7. Severe Infection(s)

4.2.7.1. Severe infection where treatment could spread infection or worsen the patient's condition.

4.2.8. Medication Contraindication

4.2.8.1. Medications that increase light sensitivity or interact adversely with the treatment being offered.

4.2.9. Recent Surgery Preventing Treatment

4.2.9.1. Where treatment could spread infection or worsen the patient's condition.

4.2.10. Immobility / Incapable To Come To Appointment

4.2.10.1. When the patient is physically unable to attend the treatment session due to a lack of mobility or a significant reduction in their inability to travel.

5. Unforeseen Significant Life Event

5.1. When You Will Be Charged:

5.1.1. Sickness

- 5.1.1.1. Minor illnesses that do not result in long-term immobility.
- 5.1.2. Injury

5.1.2.1. Minor injuries that do not result in long-term immobility.

5.1.3. Fired From Job

5.1.3.1. Losing a job due to performance issues or company downsizing.

5.1.4. Job Change

5.1.4.1. Relocating for a job, personal preference, or similar reasons.

5.1.5. Moving

5.1.5.1. Relocating for a job, personal preference, or similar reasons.

5.1.6. Financial Hardship

5.1.6.1. General financial difficulties not caused by sudden catastrophic events.

5.1.7. Personal Relationship Issues

5.1.7.1. Such as breakups or divorces that do not involve immediate danger or legal constraints.

5.1.8. Minor Legal Issues

5.1.8.1. Situations like receiving a traffic ticket or other minor legal matters that don't significantly impact one's ability to fulfill commitments.

5.2. When You Will Not Be Charged:

5.2.1. Immobile / Car Accident

5.2.1.1. Serious accidents resulting in long-term immobility or hospitalization.

5.2.2. Death Of a Family Member

5.2.2.1. The loss of an immediate family member.

5.2.3. Call To Service / Military Deployment

5.2.3.1. Unexpected deployment or call to service, especially if it's on short notice.

5.2.4. Severe Illness Or Injury

5.2.4.1. Major health issues that incapacitate a person or require long-term treatment, such as cancer, heart attack, etc.

5.2.5. Significant Property Loss

5.2.5.1. Severe incidents leading to property loss, such as a house fire or major theft, or impacted financial stability.

5.2.6. Mental Health Crisis

5.2.6.1. Acute mental health issues requiring immediate and intensive treatment.

6. Buyer Remorse / Changed Mind

6.1. Patient Changed Mind After Receiving Partial Treatment

6.1.1. In-Office Downgrade:

6.1.1.1. You Will Be Billed If:

- 6.1.1.1.1. If the patient enters the office, and then cancels the current, past, or future partial treatment and then cancels due to a lack of results, lack of proper service or disservice being provided by the office, the patient didn't see a result or gained inches as a result of the treatment and didn't lose inches.
- 6.1.1.1.2. The patient was unhappy with the service that they received, you will be billed.
- 6.1.1.1.3. They couldn't schedule a future appointment within a reasonable time due to office schedule or office hour constraints, you will be billed.
- 6.1.1.1.4. They couldn't schedule a future appointment due to potential other factors, you will be billed.

6.1.1.2. Requirements To Not Be Billed:

6.1.1.2.1. Under most circumstances, if a patient shows up at the office and then wants a refund, you will most likely be billed.

6.2. <u>Time-Based Charge Parameters</u>

6.2.1. Communication Attempts:

6.2.1.1. You Will Be Billed If:

6.2.1.1.1. Calling and texting are organized into 30-minute blocks. Multiple communications within the same block (e.g., 5 calls or 3 texts) count as one "attempt."

6.2.2. Less Than 24 Hours After Purchase:

6.2.2.1. Requirements To Not Be Billed:

6.2.2.1.1. If a refund request is made by a patient or office in less than one calendar day after the original date of purchase, the office will not be charged.

- 6.2.2.1.2. EX: If the contact's initial date of purchase falls on a saturday or sunday but the date of refund request falls on a Monday, consider this an exception to the 24 hour or one calendar day rule.
 - 6.2.2.1.2.1. For example, if someone submits their information on a Saturday and then a refund is requested that following Monday they would not incur a charge.
 - 6.2.2.1.2.2. If someone submits their information on a Friday and then a refund is requested that following Monday, they would incur a charge.

6.2.3. 2-7 Days After Purchase:

6.2.3.1. Requirements To Not Be Billed:

- 6.2.3.1.1. Two (2) phone call attempts or notes of phone call attempts on different days.
- 6.2.3.1.2. Two (2) manual text messages.
- 6.2.3.1.3. One (1) email since their purchase.

6.2.3.2. You Will Be Billed If:

- 6.2.3.2.1. Only one (1) phone call has been made.
- 6.2.3.2.2. Two (2) or more calls or texts have been made within the same attempt window.
- 6.2.3.2.3. Two (2) of two (2) calls have not had a voicemail left for the lead.
 - 6.2.3.2.3.1. If you aren't using GHL to call, you must leave a note and state that you left a voicemail message.
- 6.2.3.2.4. Retroactive note-taking/notes were not left as the actions were made.

6.2.4. 8-30 Days After Purchase:

6.2.4.1. Requirements To Not Be Billed:

- 6.2.4.1.1. Six (6) phone call attempts or notes of phone call attempts on different days.
- 6.2.4.1.2. Six (6) manual text messages.
- 6.2.4.1.3. Three (3) emails since their purchase.

6.2.4.2. You Will Be Billed If:

- 6.2.4.2.1. Less than six (6) phone calls have been made.
- 6.2.4.2.2. Two (2) or more calls or texts have been made within the same attempt window.
- 6.2.4.2.3. Four (4) or less of six (6) calls have not had a voicemail left for the lead.

- 6.2.4.2.3.1. If you aren't using GHL to call, you must leave a note and state that you left a voicemail message.
- 6.2.4.2.3.2. If the lead is not called in 7 days and then the patient changes their mind, you will be billed.
- 6.2.4.2.4. Retroactive note-taking/notes were not left as the actions were made.

6.2.5. 31-60 Days After Purchase

6.2.5.1. Requirements To Not Be Billed:

- 6.2.5.1.1. Ten (10) phone call attempts or notes of phone call attempts on different days.
- 6.2.5.1.2. Ten (10) manual text messages.
- 6.2.5.1.3. Five (5) emails since their purchase.

6.2.5.2. You Will Be Billed If:

- 6.2.5.2.1. Less than ten (10) phone calls have been made.
- 6.2.5.2.2. Eight (8) or less of ten (10) calls have not had a voicemail left for the lead.
 - 6.2.5.2.2.1. If you aren't using GHL to call, you must leave a note and state that you left a voicemail message.
- 6.2.5.2.3. Retroactive note-taking/notes were not left as the actions were made.

6.2.6. Avoid Charges By Following These Simple Rules:

6.2.6.1. Communication Attempts:

6.2.6.1.1. Calling and texting are organized into 30-minute blocks. Multiple communications within the same block (e.g., 5 calls or 3 texts) count as one "attempt."

6.2.6.2. Less Than 24 Hours After Purchase:

6.2.6.2.1. A refund request within this time frame exempts you from being charged if the patient changes their mind.

6.2.6.3. 2-7 Days After Purchase:

- 6.2.6.3.1. At least two phone call attempts.
- 6.2.6.3.2. Two manual text messages.
- 6.2.6.3.3. One email.

6.2.6.4. 8-30 Days After Purchase:

- 6.2.6.4.1. Six phone call attempts.
- 6.2.6.4.2. Six manual text messages.
- 6.2.6.4.3. Three emails.

6.2.6.5. **31-60 Days After Purchase:**

- 6.2.6.5.1. Ten phone call attempts.
- 6.2.6.5.2. Ten manual text messages.
- 6.2.6.5.3. Five emails.

6.2.6.6. Note Taking / External Calling

6.2.6.6.1. External calling is 100% allowed; please make sure to make the note at the time of the action being completed. Retroactive or reactive notation or inaccurate notation will result in being billed.

6.3. Scheduling Conflict / Appointment Rescheduling

6.3.1. Appointment Scheduling Conflict

6.3.1.1. Scheduling & Booking Conflicts

6.3.1.1.1. Requirements To Not Be Billed:

- 6.3.1.1.1.1. Do not refund patients that you're attempting to contact but have not responded to your contact attempts.
- 6.3.1.1.1.2. Patients have been rescheduled for non-emergency last-minute cancellations over 3x.
- 6.3.1.1.1.3. Appointments must be tracked through GoHighLevel for any booked appointments.
- 6.3.1.1.1.4. Lead Follow Up Tracking statuses must be updated to track the patient's progress through the system.
- 6.3.1.1.1.5. Patients are given a two-time non-emergency last minute reschedule grace period for appointment rescheduling.
 - 6.3.1.1.1.5.1. Patients must be allowed to reschedule up to two times and have any notes documented for the client.

6.3.1.1.2. You Will Be Billed If:

- 6.3.1.1.2.1. Double booked patient that ends up needing a refund.6.3.1.1.2.2. Patient rescheduled and then eventually wants a refund without rescheduling attempts.
- 6.3.1.1.2.3. Patient stating that they didn't get intake forms or didn't do necessary steps before coming into the office for their treatment.
- 6.3.1.1.2.4. Patient is refunded because we were unable to contact the patient after a certain number of attempts so someone from the office decided to just process the refund.
- 6.3.1.1.2.5. Patient states that the office was unable to accommodate them or find a time that's convenient, or couldn't make an appointment time work due to potential lack of office hours or schedule flexibility.
- 6.3.1.1.2.6. Patient is looking for lunch time or reasonable after-work hours.
 - 6.3.1.1.2.6.1. Reasonable work hours can be considered Monday-Friday 9-5 or 6PM.

7. Unable To Provide Service To Patient or Customer

7.1. Office Is No Longer Providing These Services

7.1.1. You Will Be Billed If:

- 7.1.1.1. Your office is no longer offering red light or body contouring services.
- 7.1.1.2. Your office is closed and will not be open for any period of time that would prevent a patient from being able to receive their paid treatment.
- 7.1.1.3. The office is closed for business.
- 7.1.1.4. The office lost a staff, team member, or independent contractor that was involved with the treatment process.

7.2. Contouring Machine or Device Broken Or Needs Repairing

7.2.1. You Will Be Billed If:

- 7.2.1.1. The device used for treatments is partially or fully not working.
- 7.2.1.2. The device is broken but the office is waiting for new parts or for someone to come and install the parts and as a result, the patient wants a refund because they are unwilling to wait.

7.2.1.2.1.1.1.

8. Payment Chargebacks / Disputes / Pre-Dispute Alerts / RDR

8.1. Overview

- 8.1.1. Due to the nature of our service and the requirement of the office to track, notate, and keep us as the service provider up to speed with patients, regardless of the patient follow up tracking status, unless previously requested a refund that was not processed, you will be assessed the full amount plus any applicable fees.
- 8.1.2. Consumer fraud is something that we are unable to combat as they have committed fraud with you and your business, not my team, and as a result, the patient is costing you as a business funds for services they're claiming to have never received.
 - 8.1.2.1. For any disputes, chargebacks, alerts, RDR's, etc. there are no partial refunds or undoing of charges, the fees we incur are non-refundable and pass those fees to you.
 - 8.1.2.1.1. For patients that have a follow up tracking showing they've booked for an appointment, have shown up to the office, or even purchased additional services within the office is consumer fraud and we'd suggest following up with the patient directly to re-collect the amount owed and associated fee that has been passed to you.
 - 8.1.2.1.1.1. Typically this is considered friendly fraud, most patients will not recognize the statement showing a payment or multiple payments to BHT or Body Health Team is your service even though we've communicated this to them multiple times throughout the purchase, confirmation pages, confirmation text messages, and other formats throughout their payment process, these funds still will also need to be re-captured by your office directly and the fees that we've collectively been assessed can not be undone or refunded or fought.

8.2. Payment Chargebacks / Disputes

- 8.2.1. The patient can complete up to two payments through our system and file a chargeback or dispute on either of these payments at any time.
 - 8.2.1.1. Each dispute will be for the full value of the transaction plus an additional \$35 fee per transaction.
 - 8.2.1.1.1. EX: If a total of \$164 is disputed, there would be two (2)
 \$35 charges assessed as a fee which would total \$70 in additional chargeback or dispute fees totaling \$234 on your billable refund invoice.

8.2.1.2. Disputed payments are not covered or reduced under any circumstances and the office will be charged for this in full plus the full \$35 fee per transaction.

8.3. Pre-Dispute Alerts (Ethoca and Verifi Alerts)

- 8.3.1. A pre-dispute alert like Verifi or Ethoca is a notification service that warns merchants of potential disputes, giving them the opportunity to resolve issues before they escalate into formal chargebacks.
 - 8.3.1.1. Ethoca Pre-Dispute Alerts (Mastercard)
 - 8.3.1.1.1. With Ethoca, any payment flagged by its system in real time as potentially problematic prevents a dispute from occurring, but the merchant is assessed a \$35 fee for each payment identified and is prevented from becoming a dispute.
 - 8.3.1.1.1.1. If you have transactions of \$37 and \$127 flagged by Ethoca's system, it would result in two separate fees, amounting to a total of \$70 in fees for the prevention of disputes on these transactions.
 - 8.3.1.2. Verifi Pre-Dispute Alerts (Visa)
 - 8.3.1.2.1. With Verifi, any payment flagged by its system in real time as potentially problematic prevents a dispute from occurring, but the merchant is assessed a \$35 fee for each payment identified and is prevented from becoming a dispute.
 - 8.3.1.2.1.1. If you have transactions of \$37 and \$127 flagged by Verifi's system, it would result in two separate fees, amounting to a total of \$70 in fees for the prevention of disputes on these transactions.

8.4. Rapid Dispute Resolution (RDR) By Visa

- 8.4.1.1. Rapid Dispute Resolution (RDR)
 - 8.4.1.1.1. Through Visa's Rapid Dispute Resolution (RDR), payments identified in real time as potentially disputable are halted before they can escalate into formal disputes. For this preemptive action, merchants are charged a fee of \$35 for each flagged transaction.
 - 8.4.1.1.1.1 If transactions of \$37 and \$127 are detected by the system, the merchant incurs two separate fees, leading to an aggregate of \$70 in charges. This fee structure is designed to offset potential disputes, transferring the cost of resolution to the merchant while avoiding the dispute process.