



PATIENT STATEMENTS

# Spend Less Time Billing and Increase Patient Collections

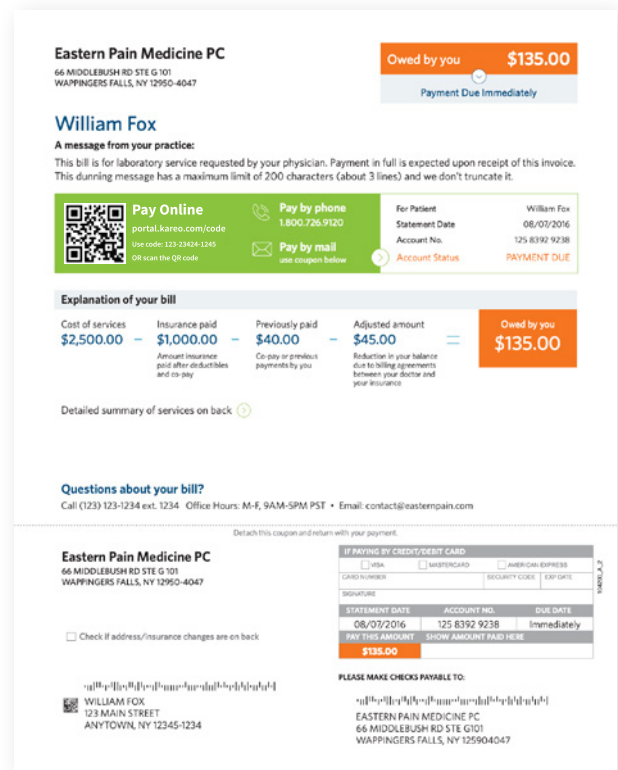
As the patient payments portion of your practice's collections continues to grow, it is crucial to collect what you're owed by patients. Accelerate your patient collections, save staff time and cut processing costs by using Kareo's patient statement mailing service.

## Improve Productivity



Reduce time spent managing patient statements by automating their delivery. With a few mouse clicks you can easily send a batch of patient statements at any time.

## Get Paid More, Faster

Increase patient collections with statements designed to reduce patient confusion, clearly present payment options, facilitate online payments, and show amounts paid and outstanding balances.



## Patient Statement Options at a Glance

Manually Printing Statements	  <b>PATIENT STATEMENTS</b>
<p>Manually printing and sending statements wastes precious time that could be spent elsewhere on your practice.</p> <ul style="list-style-type: none"> <li>• \$5-\$7 per statement</li> <li>• Use a manually-intensive print and mail process</li> <li>• Send generic black and white statements</li> <li>• Increase calls from patients about statements<sup>1</sup></li> <li>• Reduce patient collections to as low as 20%<sup>2</sup></li> </ul>	<p>Kareo can print, process and mail your statements, saving time and getting you paid faster.*</p> <ul style="list-style-type: none"> <li>• Save time – just press send!</li> <li>• QR Codes for speedy payments</li> <li>• Send intuitive, patient-friendly color statements</li> <li>• Reduce billing-related questions by 50%<sup>3</sup></li> <li>• Increase collections by 6% - that's \$7K per provider per year!<sup>4</sup></li> </ul>



It only takes 3 minutes to set up. Get started today at [www.kareo.com/Statements](http://www.kareo.com/Statements) or call 866-231-2871!

# The Anatomy of an Intuitive Patient Statement

Move to a more effective patient statement designed to reduce confusion and improve your collections.

## 1. Clear amount owed

Patient total is derived from the sum of all encounters included in the current statement.

## 2. Friendly instructional message

Configure your custom message in Kareo Billing.

## 3. Convenient payment options

Set up online payments to have the QR code prominently featured in your statements.

## 4. Intuitive explanation of bill at-a-glance

Patients can see cost of services, insurance paid, previously paid (by patient) and adjusted amount.

## 5. Quickly get questions answered

Set up custom practice contact methods.

## 6. Clear credit card options

Set credit cards accepted for pay by mail.

**Eastern Pain Medicine PC**  
66 MIDDLEBUSH RD STE G 101  
WAPPINGERS FALLS, NY 12950-4047

**Owed by you \$135.00**  
Payment Due Immediately

**William Fox**  
A message from your practice:  
This bill is for laboratory service requested by your physician. Payment in full is expected upon receipt of this invoice. This dunning message has a maximum limit of 200 characters (about 3 lines) and we don't truncate it.

**Pay Online**  
portal.kareo.com/code  
Use code: 123-23424-1245  
OR scan the QR code

**Pay by phone**  
1.800.726.9120

**Pay by mail**  
use coupon below

For Patient: William Fox  
Statement Date: 08/07/2016  
Account No.: 125 8392 9238  
Account Status: PAYMENT DUE

**Explanation of your bill**

Cost of services	Insurance paid	Previously paid	Adjusted amount	<b>Owed by you</b>
\$2,500.00	\$1,000.00	\$40.00	\$45.00	<b>\$135.00</b>

Amount insurance paid after deductibles and co-pay  
Co-pay or previous payments by you  
Reduction in your balance due to billing agreements between your doctor and your insurance

Detailed summary of services on back

**Questions about your bill?**  
Call (123) 123-1234 ext. 1234 • Office Hours: M-F, 9AM-5PM PST • Email: contact@easternpain.com

Detach this coupon and return with your payment.

**Eastern Pain Medicine PC**  
66 MIDDLEBUSH RD STE G 101  
WAPPINGERS FALLS, NY 12950-4047

Check if address/insurance changes are on back

**IF PAYING BY CREDIT/DEBIT CARD**

VISA  MASTERCARD  AMERICAN EXPRESS

CARD NUMBER \_\_\_\_\_ SECURITY CODE \_\_\_\_\_ EXP DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

STATEMENT DATE	ACCOUNT NO.	DUE DATE
08/07/2016	125 8392 9238	Immediately

PAY THIS AMOUNT: **\$135.00** SHOW AMOUNT PAID HERE

**PLEASE MAKE CHECKS PAYABLE TO:**

WILLIAM FOX  
123 MAIN STREET  
ANYTOWN, NY 12345-1234

EASTERN PAIN MEDICINE PC  
66 MIDDLEBUSH RD STE G101  
WAPPINGERS FALLS, NY 129504047



Introducing Kareo into the practice was a seamless transition. We never had a delay in claims and our patients are much happier with the statements.

— **Kyra Gabelman**, DeWitt Physical Therapy



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\*Standard service fee will apply when sending batches of patient statements to Kareo-affiliated processor for printing and mailing (postage is included).  
1. Medical Group Management Association (MGMA), "Perspective on Patient Payments" April 2010  
2. ACA International's Top Collection Markets Survey, Jan. 1 – Dec. 31, 2013.  
3. Professional Office Services, Inc., "Fighting Increasing Patient A/R Levels Caused by High Deductible Health Plans."  
4. Medical Group Management Association (MGMA), "Perspective on Patient Payments" April 2010