

Automated Electronic Patient Statements Client Setup Packet

August 2023





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NOTICE

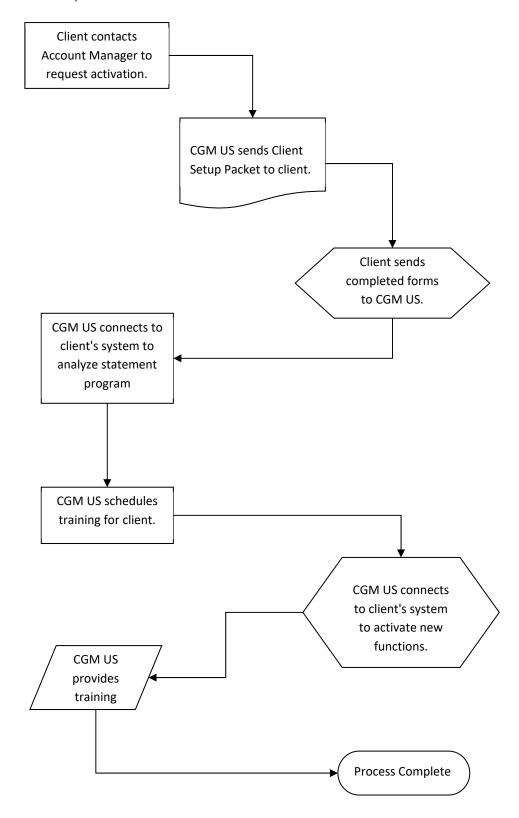
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CLIENT SETUP INFORMATION

Activation and Setup Process





General Practice Information

Complete the following and return the document to your Implementation Consultant. This information is required a minimum of two weeks prior to the estimated *go-live* date to ensure a smooth setup.

Practice Name		Clien	·	
Address			ST Zip	
Contact Person	1	Conta	act Phone #	
Contact Email		Fax #		
Statement C	ycle Information			
Database:				
Which Statemer	nt Type do you use?	☐ 6		
What time of da	y do you typically send state	ement files?		
-	rently print/send stmts? If	· · · · ·	lling Groups, complete th	ne
statement cycle	information for each Billin	g Group.		
All Billing Gro	upsSelect Billing Gro	ups (Billing Group Code	2 & Name:)
Frequency:	Daily			,
	Weekly - Specific Day of	Week (M-F)		
	Monthly - Specific Date	of the Month		
	Other:			
From Patient:				
	:	-		
Min Balance		-		
All Billing Gro	upsSelect Billing Gro	ups (Billing Group Code	e & Name:)
	Daily			,
	Weekly - Specific Day of	Week (M-F)		
	Monthly - Specific Date	of the Month		
	Other:			
From Patient:		-		
Through Patient	:	-		
Min Balance		_		



All Billing Grou	psSelect Billing Groups (Billing Group Code & Name:)
Frequency:	Daily	
	Weekly - Specific Day of Week (M-F)	
	Monthly - Specific Date of the Month	
	Other:	
From Patient:		
Through Patient:		
Min Balance		
All Billing Grou	psSelect Billing Groups (Billing Group Code & Name:	١
		/
rrequericy.	Weekly - Specific Day of Week (M-F)	
	Monthly - Specific Date of the Month	
From Patient:	Other:	
Min Balance		
IVIIII Balance		
All Billing Grou	psSelect Billing Groups (Billing Group Code & Name:)
	ally	
,.	Weekly - Specific Day of Week (M-F)	
	Monthly - Specific Date of the Month	
	Other:	
From Patient:		
Through Patient:		
Min Balance		
All Billing Grou	psSelect Billing Groups (Billing Group Code & Name:)
Frequency:	Daily	
	Weekly - Specific Day of Week (M-F)	
	Monthly - Specific Date of the Month	
	Other:	
From Patient:		
Through Patient:		
Min Balance		