

Section 1

Billing Statements - Paper and Electronic

QUICK STEPS

1. Click on a name in the Patient List.
2. Click the Statement Button located on the left edge of the Patient List window.
3. To print multiple statements, click the All Statements button at the top of the Patient List.



ShrinkRapt® offers a great deal of flexibility when it comes to preparing and sending billing statements. Statement style, detail, and appearance can all be customized so you present the image you want, and provide your patients with the information they need. Statements can be printed on plain paper, **preprinted forms available from Saner Software**, or saved as a PDF to be emailed to patients. ShrinkRapt is designed so you can customize the statement to the needs of your practice.

Figure 7.1 Account Page

Abby, Fred W.

Address Setup **Account** Sessions CMS Patient Info Policy Medications Treatment

Display On Screen ☐ Client Transactions ☒ All Transactions
Send Statement ☒ Yes ☐ No Statement Style
Transaction Type ☐ Client Balance Only ☒ All Transactions

Start-up Balance \$0.00
Date 00/00/0000
Client Portion \$0.00

Date	Statement	Claim	Patient	Description	Check #	Y	Credit	Debit
07/13/16			Abby, Fred W.	Psychotherapy, 45 minutes with patient ar		F	\$95.00	
07/06/16			Abby, Fred W.	Psychotherapy, 45 minutes with patient ar		F	\$95.00	
06/29/16			Abby, Fred W.	Psychotherapy, 45 minutes with patient ar		F	\$95.00	
06/22/16			Abby, Fred W.	Psychotherapy, 45 minutes with patient ar		F	\$95.00	

Customizable For Each Patient

Modify Delete Print

Totals \$0.00 \$380.00
Balance \$380.00

Statement Message

Age Balance Over 90 \$0.00 61-90 \$0.00 31-60 \$0.00 0-30 \$0.00

Cancel OK & Next

Three distinct statement types are available to choose from and you can mix and match the type of statements used by each patient. The statement types are Detailed, Simple, and Patient Balance Only.

Simple Statement

The simple statement choice prints fees, adjustments and payments from patients and insurance companies. This is a good statement choice if the patient is self pay. If you do not accept insurance, this statement provides all the info needed for the patient to submit a claim to their insurance.company

Figure 7.2 Simple Plain Paper Statement

Associates In Family Counseling
2345 North Michigan
Suite 345
St. Charles, IL 60175

(708) 555-1212
FEIN - 59-5555555
Please make checks payable to: Associates In Family Counseling

For Professional Services of:
Barris D Jones M.A.M.F.C/M.A.R.E.
State License #

Under the supervision of:
Samual C. Elliot M.D.
State License # 09314

Gail S Masterson
1400 Park #116
Naperville, IL 60594

Statement Date: 07/21/16

Billing Period: 1/1/16 to 7/21/16

ICD Code 10: F4323

Previous Balance: \$0.00

Date	CPT	Description	Fee	Payment	Balance
5/30/16		Client Courtesy		\$45.00	\$-45.00
5/30/16		Payment		\$40.00	\$-85.00
6/6/16		Client Courtesy		\$45.00	\$-130.00
6/6/16		Payment		\$40.00	\$-170.00
6/13/16	90834	Masterson, Gail S. - Psychotherapy, 45 minutes with	\$85.00		\$-85.00
6/13/16		Client Courtesy		\$45.00	\$-130.00
6/13/16		Payment		\$40.00	\$-170.00
6/20/16	90834	Masterson, Gail S. - Psychotherapy, 45 minutes with	\$85.00		\$-85.00
6/20/16		Client Courtesy		\$45.00	\$-130.00
6/20/16		Payment		\$40.00	\$-170.00
6/30/16	90791	Masterson, Gail S. - Psychiatric diagnostic evaluation	\$85.00		\$-85.00
7/6/16	90834	Masterson, Gail S. - Psychotherapy, 45 minutes with	\$85.00		\$0.00
New Balance				\$0.00	

Over 90 Days \$0.00 61-90 Days \$0.00 31-60 Days \$0.00 0-30 Days \$0.00

Detailed Statement

For patients with insurance, who want to see exactly what the insurance paid and adjusted, the Detailed Statement offers the most information. Providing a high level of detail on the billing statement can reduce billing phone inquires from patients.

Figure 7.3 Detailed Plain Paper Statement

Associates In Family Counseling
2345 North Michigan
Suite 345
St. Charles, IL 60175

(708) 555-1212
FEIN - 59-5555555
Please make checks payable to: Associates In Family Counseling

For Professional Services of:
Samual C. Elliot M.D.
State License # 09314

Fred W. Abby
302 E Owens
Ford, IL 60523-1000

Statement Date: 07/21/16

Billing Period: 1/1/16 to 7/21/16

ICD Code 10: F4323

Previous Balance: \$0.00

Date	Patient	CPT	Description	Explanation of Benifits			Fees Payments Adjusts		Balance
				Deduct	Adjusted	Paid	Charges	Credits	
6/22/16	Fred W.	90834	Psychotherapy, 45 min	\$0.00	\$19.00	\$66.00	\$95.00		\$95.00
6/22/16			Co-Payment					\$25.00	\$70.00
6/29/16	Fred W.	90834	Psychotherapy, 45 min	\$0.00	\$19.00	\$66.00	\$95.00		\$165.00
6/29/16			Co-Payment					\$25.00	\$140.00
7/6/16	Fred W.	90834	Psychotherapy, 45 min				\$95.00		\$235.00
7/6/16			Co-Payment					\$25.00	\$210.00
7/13/16	Fred W.	90834	Psychotherapy, 45 min				\$95.00		\$305.00
7/13/16			Co-Payment					\$25.00	\$280.00
7/19/16			Insurance Adjustment					\$38.00	\$242.00
7/19/16			Insurance Payment					\$132.00	\$110.00
New Balance				\$110.00					

Over 90 Days \$0.00 61-90 Days \$0.00 31-60 Days \$0.00 0-30 Days \$110.00

Patient Balance Only

Sometimes the most simple is the best. If you want a statement that shows the patient only the amount they owe and excludes the insurance detail, the Patient Balance Only statement is the one to choose.

Preprinted Forms

A preprinted billing statement form is available from Saner Software for use with the simple and patient balance only statement type. These form can be bought online at www.shop.sanersoftware.com.

Figure 7.4 Patient Balance Only Statement

Associates In Family Counseling
2345 North Michigan
Suite 345
St. Charles, IL 60175

(708) 555-1212
FEIN - 59-5555555
Please make checks payable to: Associates In Family Counseling

For Professional Services of:
Samual C. Elliot M.D.
State License # 09314

Fred W. Abby
302 E Owens
Ford, IL 60523-1000

Statement Date: 07/24/16

Billing Period: 1/1/16 to 7/24/16

Date	CPT	Description	Fee	Payment	Balance
6/22/16		Visit Charge	\$25.00		\$25.00
6/22/16		Co-Payment		\$25.00	\$0.00
6/29/16		Visit Charge	\$25.00		\$25.00
6/29/16		Co-Payment		\$25.00	\$0.00
7/6/16		Visit Charge	\$25.00		\$25.00
7/6/16		Co-Payment		\$25.00	\$0.00
7/13/16		Visit Charge	\$25.00		\$25.00
7/13/16		Co-Payment		\$25.00	\$0.00
New Balance					\$0.00

Over 90 Days \$0.00 61-90 Days \$0.00 31-60 Days \$0.00 0-30 Days \$0.00

Figure 7.5 Pre-Printed Billing Statement

ITEMIZED BILLING STATEMENT

To:

Billing Period: to Previous Balance

Date	CPT Code	Description	Fee	Payment	Balance
					New Balance

Emailing Statements

When printing statements you can choose to save the statement as a PDF rather than printing it to paper. The Save As PDF feature is part of your computer's operating system. After saving the statement as a PDF, you can send it to your patient as an attachment to an email.

IMPORTANT - If you choose to email statements to patients, it is important that you make yourself aware of HIPAA laws for patient email. [Click here](#) to visit the HHS web page that discusses email communication requirements.

As of this writing, HIPAA does NOT require you to use encrypted email to send patient communication. It does require you to reasonably protect privacy by limiting the amount of information disclosed.

In ShrinkRapt you can limit the information printed on a billing statement to protect patient privacy. You can choose to remove ICD and CPT codes so all that is shown is the visit charge and payments.

Customizing The Billing Statement

Billing statements can be customized so they include or exclude the following information:

- ICD and CPT Codes.
- A line showing what part of the balance is over 30, 60, and 90 days old
- A Dunning Message for balances over 30 days old
- A line saying, "For the Professional Services of: your name and credentials".
- A line saying, "Under the Supervision of: the name and credentials of a Supervising Practitioner".
- A line saying, "Make checks payable to: the name of your practice".
- The patient's name on each line; This is important when one responsible party is paying for more than one patient's visits

As you can see, ShrinkRapt provides a great deal of flexibility to set up a billing statement to look exactly the way you want it to look!