

# eStatement

## Quick Reference Guide

Navicure statements allows patients to pay their bills online with a few clicks. Instead of writing a check, putting it in an envelope, finding a stamp and taking time to get the payment in the mail. The e-statements feature is a cost effective alternative to paper statements. When the email is added into Navicure Payments on the patient's profile, the patient will receive an email from [noreply-payments@navicure.com](mailto:noreply-payments@navicure.com) with the clinic information and an eStatement link.

The user will click on the blue eStatement link to be taken to the login page



Your eStatement for Smart Clinic's patient born in 1901 is ready to view. Follow the link to access your [eStatement](#). This link will expire 45 days (11/03/2017) from the notification date.

If you have any questions, contact us at 336-274-6515

### Portal Login Screen

The exact information in the patient's profile must be used to access eStatement; email address, patient date of birth and the patient zip code.

Once login is completed, click view to review details and pay the statement.

Welcome to Smart Clinic Patient Payments

Please log in with your email address and the patient's date of birth and zip code.

Email Address

Patient Date of Birth

Patient Zip Code

Log In »

Eagle Physicians & Associates, PA  
(336)274-6515

TEL: [redacted]

Receipts Care Estimates **eStatements**

eStatements Welcome, Test Kristi | Log Out

Print Table	First Name	Last Name	Location	Date Generated	Statement Status	Amount	Action
	Test	Kristi	Smart Clinic	09/19/2017	Unpaid	\$150.00	<a href="#">View</a>

Eagle Physicians & Associates, PA  
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Receipts Care Estimates **eStatements**

eStatements Welcome, Test Kristi | Log Out

Patient: Test Kristi 30097 Bill To: [redacted]

Patient ID: 111111111  
Statement ID: 2908  
Date Processed: 09/19/2017

Date of Service	Description	Charged Amount	Payments & Adjustments	Patient Total
09/19/2017	Office Visit	\$150.00	\$0.00	\$150.00

Charged Amount: \$150.00  
Payments & Adjustments: \$0.00  
Amount to Pay: \$150.00

Additional Notes:  
Thank you!


If you have any questions about this statement, contact us at 555554444.  
Pay the full amount now or set up a payment plan to pay over time.

[Pay Now](#) [Set Up a Payment Plan](#)

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## Making a Payment

Enter any notes along with the Payment Method and select Pay to complete the transaction.

**EAGLE PHYSICIANS**Eagle Physicians & Associates, PA  
TEL: (336)274-6515

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Receipts Care Estimates eStatements

### eStatements

Welcome, Test Kristi | [Log Out](#)  
Print Statement

Patient: Test Kristi  
30097

Bill To:

Patient ID: 111111111  
Statement ID: 2908  
Date Processed: 09/19/2017

Go to All Statements  
Payment due upon receipt

Date of Service	Description	Charged Amount	Payments & Adjustments	Patient Total
09/19/2017	Office Visit	\$150.00	\$0.00	\$150.00

Charged Amount	\$150.00
Payments & Adjustments	\$0.00
Amount to Pay	\$150.00

Additional Notes:  
Thank you!

If you have any questions about this statement, contact us at 5555554444.  
Pay the full amount now or set up a payment plan to pay over time.

Pay Now Set Up a Payment Plan

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A confirmation and receipt will be received via email once completed.