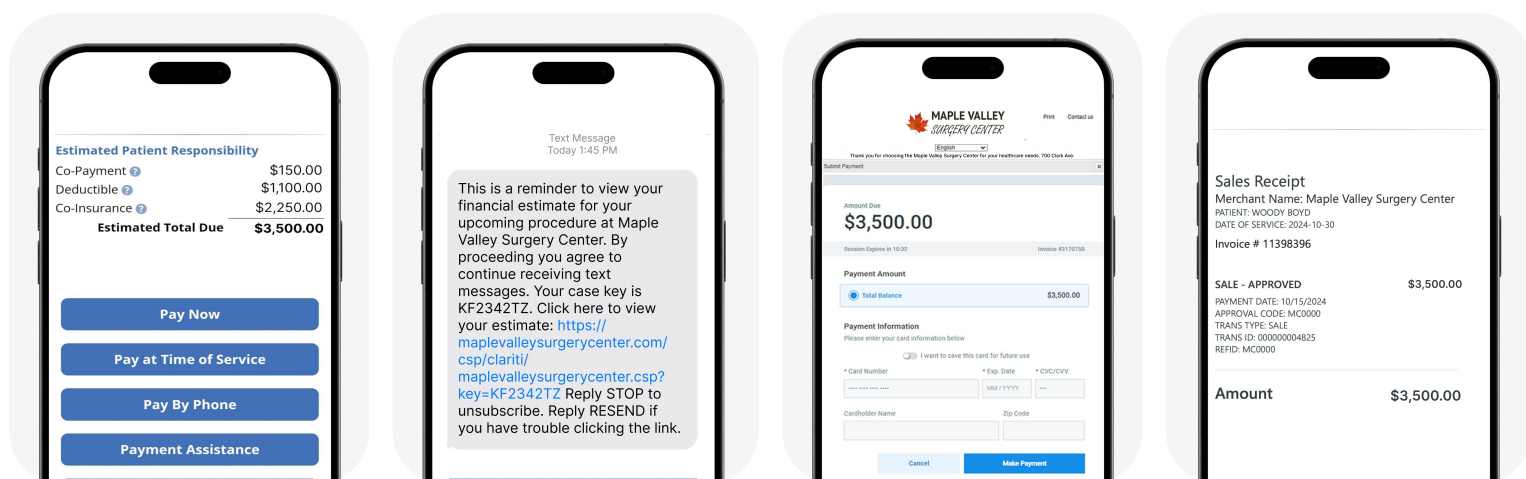


Transforming Financial Clearance for ASCs

Give your ASCs an accurate way to create patient estimates and a simple way to collect payments. With HST's financial clearance solution, cut down on administrative tasks, improve denial rates, and boost patient satisfaction.

An Easy Way for Patients to Know their Costs and to Pay



1. Receives an Estimate

2. Gets Payment Reminder

3. Makes a Payment

4. Payment Confirmation is Sent

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Our upfront collections increased significantly. On average, we are able to collect annually an additional million dollars upfront, which drives down the number of accounts we are sending to collection. Annually we were sending roughly \$1.1 million to collections. After using HST Clariti, that has gone down to 550k.

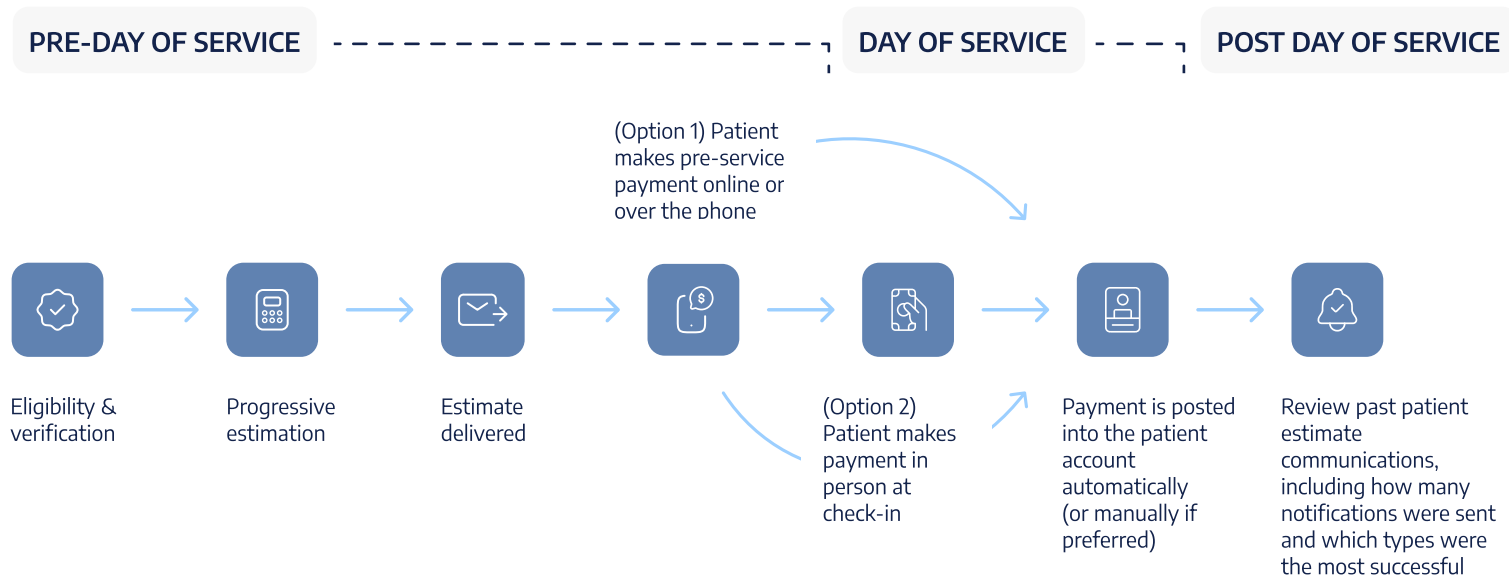
RUTH ORTIZ
Benefits Specialist Coordinator
The Urology Group

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With HST Pay for us, what we were looking for, especially today in 2026, is automation. Correct automation and easy automation and that so far, things like HST Pay has been able to provide that. And also provide confidence in our accounting staff that the information is correct, it's reportable, and it's traceable from an audit standpoint.

BECKY FARMER
CEO
Center for Sports Medicine & Orthopaedics

Optimize Your Center's Efficiency with HST's Patient Estimates & Payments



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The ability to send estimates via text or email and track when patients view them has been a game-changer. It's reduced payment disputes and made upfront collections much easier, lowering our patient accounts receivable by 75%.

LEANNE CLAYBURN
Business Office Manager
Advanced Vision Surgery

Proactive Financial Clearance Reporting for Your Center's Success

- Explore how patients' benefits have been applied to their cases.
- Examine total anticipated charges, allowed amounts, adjustments, and patient responsibilities for upcoming cases.
- Review and print all estimates for cases scheduled today or tomorrow with outstanding payments.
- See which patients have received their estimate, but have not yet viewed it.
- Identify upcoming cases with non-covered procedures.
- Determine which upcoming cases still need attention regarding patient responsibility or benefits.