





Labs have become exorbitantly more expensive for many patients to obtain. If they are drawn in the office and sent off to a national or locally independent lab, they are subjected to whatever charge and expense the lab passes on to them. Most commonly they have no way to know what that expense might be ahead of time. Neither does their healthcare provider. These labs are almost always steep / overpriced.

If they go to a hospital those typical lab charges are an even significantly higher expense to the patient. In the past, people with 'good health insurance' had excellent coverage for lab work. Anymore these days, business employees and individual patients frequently have plans that require meeting a significant deductible before the plan will pay for laboratory services, or the payor only pays for certain services and not others. Self-pay patients are simply at the mercy of the labs' business practices.

This is what they typically receive some time after the lab services have been drawn and performed:

"After your claim is processed, you'll receive an Explanation of Benefits (EOB) from your insurance company. The EOB will tell you how much your insurance will pay for your lab services. You will be responsible for the balance."

It is frustrating for many healthcare providers to see their patients suddenly battling against unavoidable yet expensive laboratory bills. These financial burdens all-too-often have patients deciding to not have the services performed. **MESH Network** helps remove those financial frustrations.

**MESH** brings **DRAMATIC** financial savings with up front transparent pricing. Because of MESH's significant volume of testing in the past, we have received preferred pricing from a national laboratory which we can pass on to patients and providers. This is especially impactful for self pay patients. Our typical savings to date average **73** % to 82% (less than the usual expected expense).

The process is straightforward. The provider decides what labs will be needed and staff fills out the "Provider Lab Referral Order Template. The pricing (and savings) is obvious to staff and to patients. They immediately know exactly how much their lab evaluations will cost. The order template is sent to MESH. We review the form and contact the patient for payment and instructions. All communications are HIPAA compliant.

Paying for their invoiced labs is simple and affordable. We have multiple options for payments. MESH accepts credit cards, allows PayPal "PayIn4" and "buy now pay later" plans. We even have links for Quick2Lend and RocketLoans for patients to easily finance their lab payments and have easy lower monthly payments on our already low prices.

## Give us a call to help you start saving your money on lab tests!

We are always more than happy to answer any questions you may have about the process or MESH itself.

Our **phone number** and main **email address** are at the top of the page.

**Print the Provider Lab Referral Order Template** page below, have it filled out, and email it to MESH. We will quickly contact you and get the process moving. Results are next business day after blood draws.



## **MESH Network Broker Labs**

(859) 618-6205

## Provider Lab Referral Order Template

(All communications via phone, text, fax, email are HIPAA compliant)

Simply fill out the entire form, sign where indicated, and email/fax to MESH Network - <a href="mailto:admin@meshnetwork.expert">admin@meshnetwork.expert</a> or (833) 833-1862 {fax}. We will verify the content of the form and email the office to let them know we

have received and are processing the orders. We will contact the patient for invoicing and instructions for completing their lab process through Labcorp. If they choose, we will instruct them on creating a Labcorp account so they always have access to their own labs. Do not hesitate to contact us if you have questions.

Patient Last Name	Pa	tient First Name	DOB
Street Address	c	ity, State, Zip	Date of order
Patient Phone Number		Patient Email Address	
· ·	•	ler, White/Caucasian, Black or Hispanic/Latino, not Hispanic/	•
Gender: (solely for purpo	ses of correct norma	I values ranges for labs) N	lale / Female
Requesting Provider NPI:		_ Practice Email Address:	
Practice Phone Number	:	Practice fax number:	
Provider First Name:		Provider Last Name:	
Provider Signature:	Professional Degree / Designation:		
Diagnosis Code for Pati	ent: (reason for labs	? Z00.00 used for annual exa	m normal)
Test Name (from LIST)	MESH Pricing	Test Name (from LIST)	MESH Pricing
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$

<sup>\*</sup> MESH's fee of \$50.00 is added to every order \*