HENRY SCHEIN®
PRACTICE SOLUTIONS

Easy Start
New Office Implementation Guide

easydental®

easydental®

2008

Easy Start
New Office Implementation Guide

HENRY SCHEIN®
PRACTICE SOLUTIONS

727 E. Utah Valley Drive, American Fork, UT 84003
Phone: (800) 824-6375, option 3, 1
Fax: (801) 847-3660
Email: traininginoffice@henryschein.com
www.easydental.com/training

April 2008

COPYRIGHT

LICENSES AND TRADEMARKS

EASY DENTAL AND MICROSOFT WINDOWS

Easy Dental operates in a graphic environment called Microsoft Windows, created by Microsoft Corporation. Microsoft Windows gives a standard look and feel to Easy Dental and all other Windows applications. To run Easy Dental and Microsoft Windows, you need to license and install Microsoft Windows

EASY DENTAL AND MICROSOFT WORD FOR WINDOWS

Easy Dental can share its database with Word for Windows, a word processing product created by Microsoft Corporation. To use Easy Dental with Word for Windows, you need to license and install Microsoft Word for Windows.

Table of Contents

Contents

Chapter 1: Computer Basics

Chapter 2: Practice Setup

Chapter 3: Patients Module

Contents

Contents

Chapter 10: Management Reports

Chapter 11: Solutions

About This Manual

Thank you for purchasing Easy Dental. Over the course of your software implementation, this guide will help you learn how to use Easy Dental to complete the day-to-day tasks in your office.

Each chapter covers one broad topic or set of related topics. Chapters are arranged by the different Easy Dental modules and by different management techniques.

Each chapter is organized into explanatory topics with steps-by-step instructions of how each feature works. These topics provide the information you need to master Easy Dental. At the end of each chapter, this guide provides activities to "Check Your Understanding" and "Apply Your Knowledge." You may either complete these activities with your trainer or save them for a later time and complete them on your own.

The "Check Your Understanding" questions test your comprehension of the preceding chapter. These questions are objective and have only **ONE** correct answer. You can find the answers to these questions in the Solutions chapter at the back of the guide.

The "Apply Your Knowledge" activities allow you to apply the topics learned in the guide in real-world situations. These activities are subjective, so there may be more than one way to accomplish the task correctly. The Solutions chapter at the back of the guide outlines one of the ways to accomplish each activity.

Each chapter of this guide contains the vocabulary used in the chapter. Though you may be familiar with many of the terms, read each definition carefully to ensure your definition matches the definition used in the chapter.

Any method of instruction is only as effective as the time and effort you invest in it. For this reason, you are encouraged to spend time reviewing the topics and activities in this guide.

How to Get Help

After your trainer leaves, you may have additional questions. You may be able to find the answers to your questions in this manual or you can consult the Easy Dental 2008 User's Guide. If you cannot find the answer, contact the Easy Dental Software Support staff at:

1-800-824-6375, option 2, 1

When you call, be near your computer and have your copy of the Easy Dental User's Guide available. The Support staff may ask you certain questions about your system setup.

Important Information

Keep this page at hand when calling Easy Dental. In order for most departments to offer assistance, they must have this information:

Practice Name: _____

Doctor's Name: _____

Serial Number: _____

Customer ID Number: _____

Number of Computers in Office: _____

Operating System on Server: _____

Operating System on Workstations: _____

eTrans Username: _____

eTrans Password: _____

Telephone Numbers

Here is a list of useful numbers when calling Easy Dental:

- Easy Dental Support: (800) 824-6375, option 2, 1
- eServices: (800) 735-5518, option 2, 3
- Easy Image and Scholar Support: (800) 824-6375, option 2, 4

- Sales: (800) 824-6375, option 1
- Training: (800) 824-6375, option 3
- Order Processing: (800) 824-6375, option 4
- Operator: (800) 824-6375, option 9

Icons Serve as Cues

Topic:

Represents the beginning of a topic.

Student Note:

A margin note that highlights information regarding the features in 2007 and how it may affect your database.

Quick Tip:

A margin note that represents a tip, shortcut, or additional way to do something.

Warning:

A margin note that represents a caution when performing a task.

Check Your Skills:

Represents a Check Your Skills practice.

Apply Your Knowledge:

Represents an Apply Your Knowledge activity.

Notes

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Computer Basics

Overview

A foundation must be built before a program can be learned. In the case of Easy Dental, you must review both computer and Windows basics. This chapter will cover basic computer terminology. Please review these terms carefully before moving to the next chapter.

Objectives

Once you have completed this chapter, you should be able to:

- Understand Basic Computer Terminology
- Understand the Recommended Backup Procedures
- Identify the Windows Desktop
- Create Shortcuts on the Windows Desktop
- Access Programs from the Windows Desktop
- Switch Between the Different Easy Dental Modules
- Cancel Print Jobs

Computer Basics

Terminology

Byte: The unit of measurement used by computers to indicate the size of a file. For example:

- Kilobyte (KB): 1000 Bytes
- Megabyte (MB): 1,000,000 Bytes
- Gigabyte (GB): 1,000,000,000 Bytes

Computer Processor: This is the brains of your system. It controls how fast your computer will run.

Hard Drive/Disk: Your hard drive stores the programs installed on your computer. Hard drives are categorized according to how much storage space they have.

System Memory: RAM (Random Access Memory). System memory is used to perform operations and contains information that has been temporarily copied from the hard drive. The size of RAM varies on different computers. However, the more RAM you have installed, the faster your computer will run open programs.

Operating System: The computer software program that allows users to communicate with the computer's hardware. The operating system translates the user's request and commands (entered with a keyboard or mouse) into a binary language used by the computer (i.e. Microsoft Windows 2000 or XP).

Network: Allows separate computers to communicate with one another and share resources (i.e., files, printers, etc.).

System Requirements

Because Easy Dental's hardware specifications often change, it is suggested that you call the Easy Dental Support department at (800) 336-8749, option 21 to find out about the current system requirements. Easy Dental Support can fax you the most updated specifications. These specifications can also be found at http://www.easydental.com/support/system_requirements.asp.

Backup Procedures

Why Backup?

You spend days, months, or even years building up your database. Unfortunately, this data is very vulnerable to power surges or other unexpected disasters. To alleviate this danger, it is recommended that offices consistently back up their data.

There are three main reasons to backup:

1. Protect Against Data Loss

    • Backing up prevents a true disaster in terms of data loss caused by computer hardware issues.

2. Archive Data

    • Backing up is a way to keep copies of information that you no longer need immediate access to. Information can be archived on backup media, then saved until the information is needed.

3. Increase System Performance

    • Archiving data deletes unnecessary files, thereby freeing up valuable disk space.

Backup Guidelines

Although there are no set rules for when a backup should be done and what should be backed up, Easy Dental recommends that backups be done on daily, weekly, monthly, and quarterly intervals (see Figure 1-1).

	Daily	**Weekly**	**Monthly**	**Quarterly**
Data Folder (C:\Program Files\Ezdental\Data\)	☑			
Easy Dental Folder (C:\Program Files\Ezdental\)		☑		
Hard Drive (C:\)			☑	
Store Off Site	☑	☑	☑	☑
Legal Copy				☑

Figure 1-1: Recommended Backup Schedule.

Easy Dental does not recommend incremental tape/media backups. Easy Dental recommends doing a full backup whether it is a daily, weekly, monthly, or quarterly backup.

Each day, a backup of the data directory (C:\Program Files\Ezdental\Data\ or C:\Ezdental\Data\, depending on the location of your data) should be performed. The most critical files in the Data folder include those with the following extensions:

- *.dat
- *.idx
- *.inf

At the end of the work week, you should backup the Easy Dental folder (C:\Program Files\Ezdental\ or C:\Ezdental\, depending on the location of your files). This will include all of your program files and the following subdirectories:

- C:\Program Files\Ezdental\Data\
- C:\Program Files\Ezdental\Doc\
- C:\Program Files\Ezdental\Eclaims\
- C:\Program Files\Ezdental\Image\

On a monthly basis, the entire server C:\ drive (or the location of the Easy Dental program) should be backed up.

On a quarterly basis, it is a good idea to take your monthly backup and store it with a legal source (i.e., an accountant or lawyer). Placing the tape in the care of a legal source helps to make the tape a legal document. This may help prevent problems if the office's treatment or care was called into question. Check with your local officials for guidelines.

7-Tape Rotation Cycle

Easy Dental recommends using a 7-tape rotation system for backing up. This assumes that the office works a 5-day work week. If the office works more days than 5, add one tape for each additional day. If the office works less than 5 days a week, you should subtract one tape for each day the office is not open. The 7-tape rotation system allows you to always have at least 2 weeks of recent data backed up (see Figure 1-2 on the next page). This is especially useful as sometimes you will not discover that you have to restore a backup until days or weeks after the original problem occurred.

The 7 tapes should be used as follows:

- **Tapes 1-5:** Five of the tapes should be used as your daily backup. Label each of the 5 tapes with the day of the week you will use that tape to backup. When you have finished, you will have a Monday, Tuesday, Wednesday, Thursday, and Friday tape.

- **Tape 6:** Label the sixth tape Friday #2 (or the last day of the week you work). You will now have 2 Friday tapes. Each Friday, you should alternate use of these tapes.

- **Tape 7:** The last day of the month, use tape #7 as your replacement tape for that day of the week. If the last day of the month is Tuesday, use tape #7 instead of the Tuesday tape. Make absolutely certain that this tape is stored somewhere safe, preferably off site.

	Tape 1	Tape 2	Tape 3	Tape 4	Tape 5	Tape 6	Tape 7
Monday	✓						
Tuesday		✓					
Wednesday			✓				
Thursday				✓			
1st Friday					✓		
2nd Friday						✓	
3rd Friday					✓		
4th Friday						✓	
Monthly							✓

Figure 1-2: Recommended Tape Rotation Schedule.

On a quarterly basis, take your monthly tape (i.e., #7) and store it with a legal source. Another option would be to mail this tape to yourself and do not open it. You will need to purchase a replacement tape #7. After another quarter has passed and you have stored the second quarter tape, you can reuse the first quarter tape. At the end of the year, however, you should permanently archive your monthly tape as your backup for that year.

Check Your Skills 1.2

1. Name one of the three reasons it is important to backup your data.

_____

2. True or False? Easy Dental recommends a 5-tape rotation cycle for a 5-day work week.

_____

3. Which tape should be used for your monthly backup?

_____

4. Which of the following is **NOT** one of the files that need to be backed up from the Data directory? (Circle correct answer.)

   a. *.inf

   b. *.wmf

   c. *.idx

   d. *.dat

It is recommended that you purchase a backup option from a vendor of your choice. Easy Dental Systems does not guarantee any backup software, other than eBackup. (For more information regarding eBackup, please call 800-734-5561 to talk with an NIS representative.)

If you decide to go with a program other than eBackup, it is recommended that the program you choose have a report to show whether the backup was completed successfully. It is also recommended that your backup program allows you to make a scheduled backup and an as-needed backup. The "as-needed" backup will enable you to backup before working with technical support.

Windows Basics

What is the Desktop?

When using Windows 2000 or XP, you can navigate between different programs from the Desktop and different windows inside the programs. This section will cover the basic operation to help you use your computer.

When you first turn on your computer, you will come to a screen that displays the main icons; this is called the Desktop. Before viewing the Desktop, you may be prompted to enter your username and password; enter them if necessary and click OK.

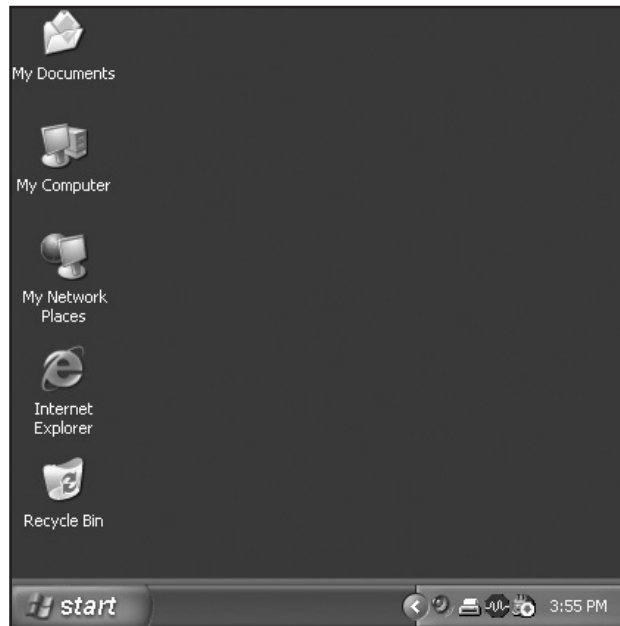Your Desktop may look similar to Figure 1-3.

Figure 1-3: The Windows Desktop.

Customizing the Windows Desktop

To change the look and feel of the Desktop, do the following:

1. Right-click the background of the Desktop. A screen similar to Figure 1-4 will appear.

Figure 1-4: The Windows Desktop right-click menu.

2. Select **Properties**.

3. The Display Properties screen, similar to Figure 1-5, will open.
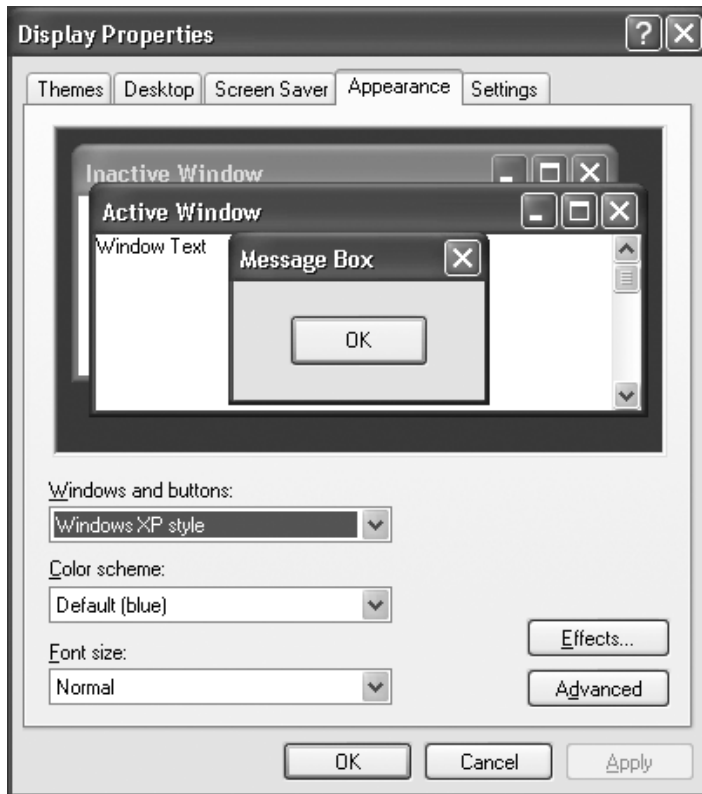
Figure 1-5: The Display Properties window.

4. Refer to your Windows User's Guide for assistance on changing colors, backdrops, wallpaper, etc.

Accessing Programs in Windows

There are two ways to access programs. One is through the Start menu using the Start button. The second is using a shortcut icon on the Desktop.

To access a program in Windows by using the Start menu, do the following:

1. Click the **Start** button.

2. Select **Programs**.

3. Select **Easy Dental**.

Creating Shortcuts

To access a program in Windows by using a shortcut on the Desktop, double-click the desired shortcut. If the desired shortcut icon does not exist, do the following:

1. Select **Start | Programs | Easy Dental**.

2. Right-click the Easy Dental icon.

3. Select **Send To | Desktop (create shortcut)** (see Figure 1-6 on the next page).

4. Click Yes.
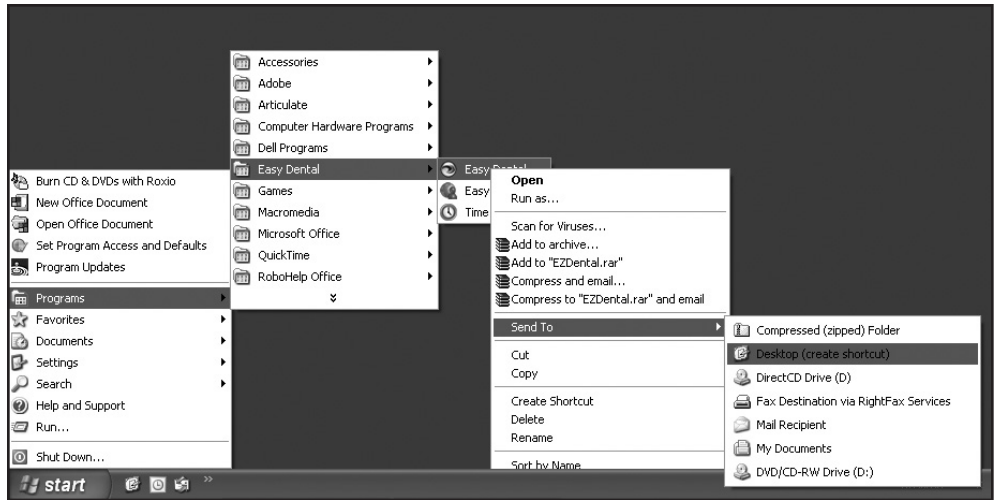
Figure 1-6: Creating a shortcut on the Desktop.

Switching to Another Easy Dental Module

Although you can easily create a shortcut icon for Easy Dental, Easy Dental also gives you the flexibility to navigate all Easy Dental modules from within itself. Click any of the quick icons to open the desired module (see Figure 1-7).

Figure 1-7: The quick icons found on the left side of Easy Dental.

Check Your Skills 1.3

1. What is the most important function of the Desktop?

Cancelling Print Jobs

Cancelling Print Jobs

Occasions may arise when you wish to cancel a print job (i.e., wrong information, not enough information, printing the wrong document, etc.). If your print job only has one copy to print, it is easiest to let the printer finish the job. If you have multiple pages being printed and you do not want to waste the paper or the time, here are a few steps that will assist you in cancelling print jobs.

1. First take out the paper tray or remove the paper from the paper tray. This will immediately stop the printing, so you can cancel the print job.

2. To cancel the print job, select **Start | Settings | Printers**.

3. Double-click the printer you are using.

4. Highlight the document you want to cancel.

5. Select **Document | Cancel**.

You can cancel the printing of all documents on a printer that is attached to your computer. If you are using a network printer, you can cancel only your own documents. Once they begin printing, documents can only be cancelled from the print server.

Apply Your Knowledge

Activities

1. Create a shortcut on your Desktop for Easy Dental.
2. Switch from the Schedule module to the Patients module.

Practice Setup

Overview

In this chapter, you will learn about practice setup, provider setup, staff member setup, operatory setup, password setup, procedure code setup, e-claims setup, and many additional items that will assist you in using Easy Dental as efficiently as possible.

Objectives

Once you have completed this chapter, you should be able to:

- Enter Your Practice, Provider/Staff Member, and Operatory Information
- Set up Passwords
- Set up Procedure Codes and Explosion Codes
- Customize Practice Definitions
- Customize Practice Defaults
- Enter Your Fee Schedules
- Set up and Print Patient Surveys
- Set up Your Preferences
- Perform Electronic Processing Using Easy Dental

Practice Setup

Practice Setup

Setting up your practice information is a great place to start customizing Easy Dental for your practice needs. Follow the steps below to set up Easy Dental.

1. Open the Reports module.

2. Click ▓ **(Practice Setup) | Practice Resource Setup**. A screen similar to Figure 2-1 will open.
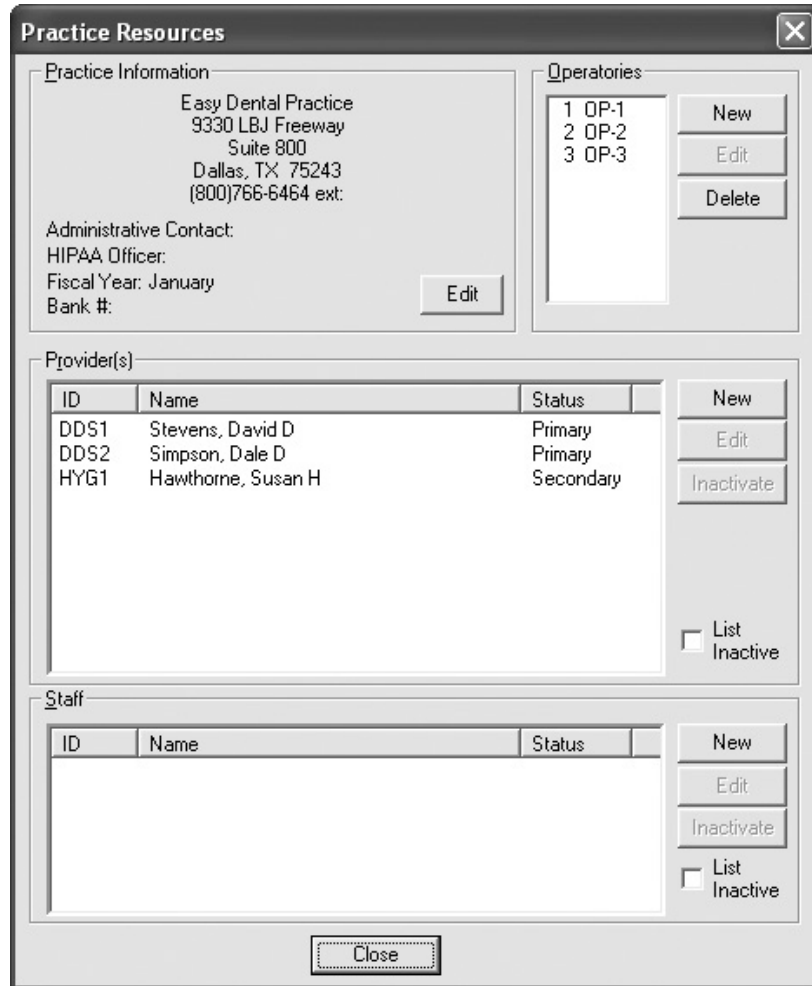
Figure 2-1: The Practice Resources window.

3. Click the **Edit** button in the Practice Information section. A screen similar to Figure 2-2, on the next page, will open.

4. Enter a **Title** and address for the practice.

5. Select an **Administrative Contact** and **HIPAA Officer** for the practice.

6. Enter the **Bank Deposit Number** if you wish to have the number print on the practice's daily deposit slip.

7. Enter the month that the practice fiscal year begins in the **Fiscal year's beginning month (1-12)** field.

8. Mark the desired statement option:

The fiscal year defaults to January. If you have a different starting month for the fiscal year, change the number to the corresponding month.

Figure 2-2: The Practice Information window.

- **Use Practice Info on Statements** will always print the information that you have entered in this screen on your billing statements.

- **Use Provider Info on Statements** will print the patient's default provider information on their billing statements. If your practice is setup to keep collection separate for each provider, this option will work best.

9. Click **OK**.

Provider Setup

To set up a new provider, do the following:

1. Open the Reports module.

2. Click ⬛ **(Practice Setup) | Practice Resource Setup** (see Figure 2-1 on page 12).

3. Click the **New** button in the **Provider** section to add a new provider. The screen in Figure 2-3, on the next page, will open.

4. Enter the provider's name in the fields provided.

5. Enter a provider **ID**.

   - The ID must be unique.

   - The ID must be 4 characters.

   - The ID can have A - Z and/or 0 - 9.

6. Enter the provider's **Title** and select their **Specialty**.

7. Enter the provider's business **Address**. This information is used for all correspondence.

8. Enter the provider's **Phone** number (optional).

If you are sending electronic claims, an administrative contact will need to be selected for your office. This will give insurance companies a specific person to speak with about patient information.

A ten-digit phone number will need to be entered for each provider/staff member in order for them to be listed in the Administrative Contact and HIPAA Officer selection box.

Figure 2-3: The Provider Information window.

Non-Person is used for adding a provider alias or an ID that is not a person, such as your practice information when wanting to keep separate IDs for insurance purposes.

Primary, under Class, must be selected if the provider is going to be sending claims to insurance. Secondary is for hygiene, associates, etc.

If you want the provider's name to print on insurance forms rather than their signature, check the "Print Provider's Signature Using" and mark the desired option.

For more information on fee schedule functionality, please see the Insurance Estimates topic in Chapter 4: Insurance Management.

9. Select a **Fee Schedule** if the provider uses a different fee schedule from the normal practice fees.

10. Highlight the operatory assigned to this provider if desired.

11. Enter the corresponding ID numbers that will be used when printing insurance claims.

12. Click the **Provider ID Setup** button to set up insurance-specific provider numbers.

    a. Select the insurance plan to attach to the provider number to and click **OK**. Figure 2-4 will open.

Figure 2-4: The Provider ID Setup window.

If a provider number is no longer valid, you can click Clear Provider IDs and choose to clear that number for this plan only or for all plans the number is attached to.

Insurance provider numbers can be customized as needed. Highlight the number to be changed, make the necessary change, and click Change.

    b. In the **Provider ID Code** field, select the appropriate code type for the provider number.

    c. In the **Provider ID Number** field, enter the Provider Number and click **Add**.

    d. Repeat steps 5 - 6 for all other **Provider ID Code** types and click **Close** once you are finished.

13. Click **OK** to save and exit

Staff Member Setup

To add a new staff member, do the following:

1. Open the Reports module.
2. Click ![icon] **(Practice Setup) | Practice Resource Setup**.
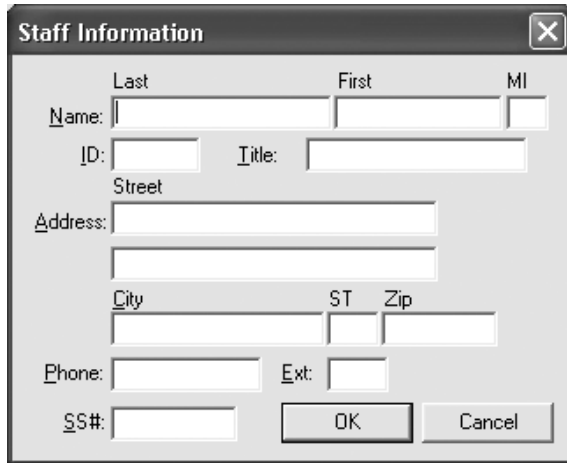3. Click **New** in the **Staff** section. The screen in Figure 2-5 will open.

Figure 2-5: The Staff Information window.

4. Enter the staff member's name in the fields provided.
5. Enter a staff **ID**.
   - The ID must be unique.
   - The ID must be 4 characters.
   - The ID can have A - Z and/or 0 - 9.
6. Enter the staff member's **Address**, **Phone** number, and social security number (optional).
7. Click **OK** to save and exit.

Inactivating a Provider/Staff Member

If a provider or staff member leaves the practice, you have the ability to inactivate them. This allows you to remove a provider from all reports without creating problems with totals in the database. To inactivate a provider or staff member, do the following:

1. From the Reports module, click ![icon] **(Practice Setup) | Practice Resource Setup** (see Figure 2-1 on page 12).
2. Highlight the provider or staff member that you would like to inactivate and click the **Inactivate** button.
   - If you are inactivating a provider, Figure 2-6, on the next page, will open.

The Provider ID Code field will be populated with many choices, such as, State License Number, Blue Cross Provider Number, Blue Shield Provider Number, Clinic Number, etc.

Figure 2-6: The Inactivate Provider window.

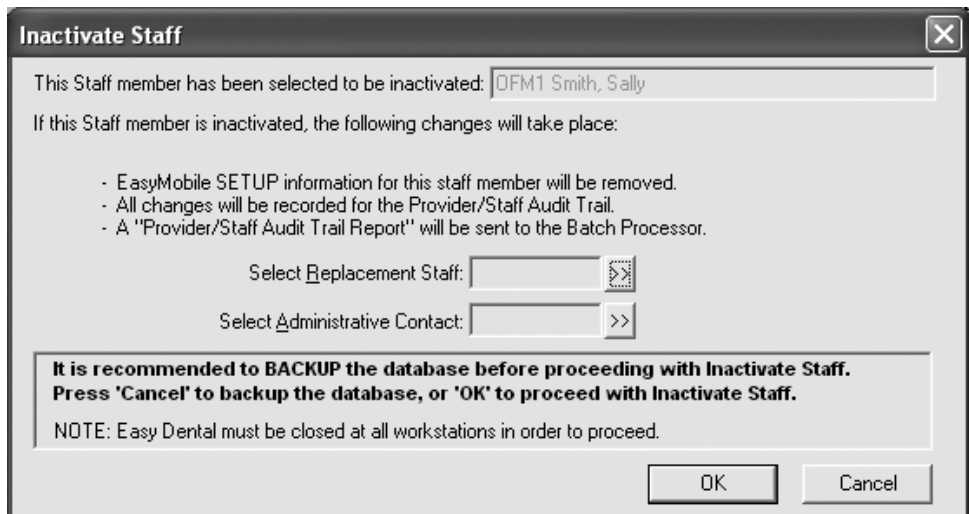- If you are inactivating a staff member, Figure 2-7 will open.

Figure 2-7: The Inactivate Staff window.

3. Near the bottom of the inactivate window, click the **Search** button next to **Select Replacement Provider** or **Select Replacement Staff**.

4. Highlight the provider or staff member that will replace the person you are inactivating and click **OK**.

5. Click **OK** to perform the inactivation.

Activating a Provider/Staff Member

If for some reason, you need to activate a provider or staff member, it is simple enough to do. Because the provider or staff member was detached from all patients they were originally attached to, you will need to re-set up the records for those patients; Easy Dental will not do it for you. To activate a provider or staff member, do the following:

1. From the Reports module, click ![icon] **(Practice Setup) | Practice Resource Setup** (see Figure 2-1 on page 12).

2. Check **List Inactive** to show all inactivated providers or staff members.

3. Highlight the person you would like to activate and click **Activate**. Figure 2-8 will open.
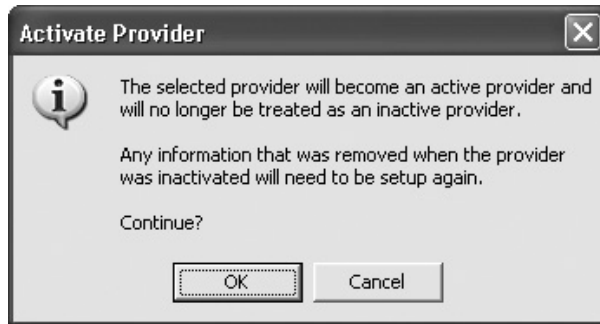
Figure 2-8: The Activate Provider window.

4. Click **OK** to activate the provider or staff member.

Operatory Setup

To add a new operatory, do the following:

1. Open the Reports module.

2. Click ![icon] **(Practice Setup) | Practice Resource Setup** (see Figure 2-1 on page 12).

3. Click **New** in the **Operatories** section. The screen in Figure 2-9 will open.
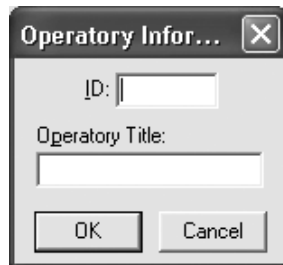
Figure 2-9: The Operatory Information window.

4. Enter the operatory **ID**.
   - The ID must be unique.
   - The ID must be 4 characters.

5. Enter the **Operatory Title**.

6. Click **OK** to save changes and exit.

Operatories are displayed alphanumerically by ID in the Schedule module. So, if you have certain operatories that you would like to see first, make sure that they come first numerically, and then alphabetically.

Check Your Skills 2.1

1. Where would you go to change your practice name and address?

2. What are the three criteria when choosing a staff ID for one of your staff members?

3. True or False? By inactivating a provider, all financial information will be moved to the replacement provider.

4. True or False? When a provider is inactivated, all Time Clock data for that provider will be removed from the system.

5. Which option allows you to view financial information for an inactivated provider when running reports?

6. In the Provider Setup window, which option tells Easy Dental to print a provider's name on insurance claims?

7. Where would you go to activate an inactive staff member?

8. In which window of Easy Dental would you enter your practice's fiscal year's beginning month, so that your totals are calculated correctly?

9. If a provider/staff member is not listed as an option when choosing a HIPAA officer, what could be the culprit?

Passwords

Password Setup

Passwords can be a great tool in an office to avoid unauthorized use of certain sensitive features within Easy Dental. Passwords, when used with the Standard Audit Trail Report, can give useful information about changes made in the system and which provider/staff member made the change. To set up passwords, do the following:

1. Open the Reports module.

2. Click ▩ **(Practice Setup) | Passwords | Setup Practice for Passwords**. A screen similar to Figure 2-10 will open.
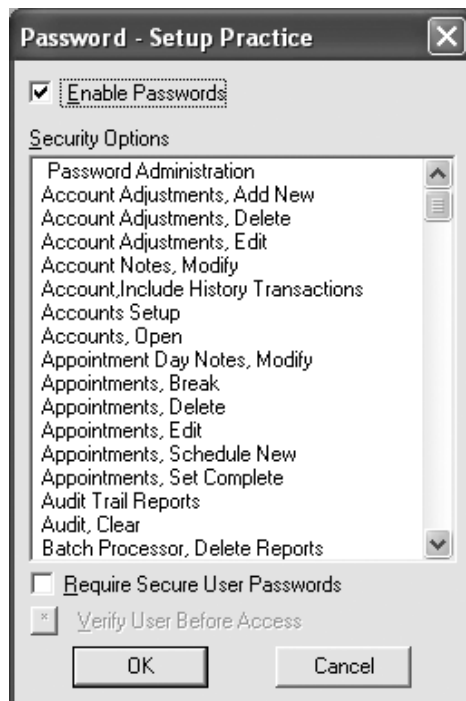
Figure 2-10: The Password - Setup Practice window.

3. Check the **Enable Passwords** box.

4. Select the features for which Easy Dental must verify appropriate user rights before granting access.

5. Click the button next to **Verify User Before Access**.

6. Check **Require Secure User Passwords** if desired.

7. Click **OK**. If you have never set up password before, the Password Administration will open (see Figure 2-11 on the next page). If you have set up passwords before, you will need to click ▩ **(Practice Setup) | Passwords | Setup Users for Passwords** from the Reports module.

8. Highlight the provider/staff **User ID** that you would like to set up rights for. This will list the available rights.

9. Select the rights for the user by checking each category or clicking the ⊞ **(Expand)** button to select specifics rights within a category.

10. If you want to assign all of the rights to a user, click the **Select All** button.

11. Click the **Setup Password** button and you will be able to enter in a password for each user.

Before enabling passwords, make sure you have a current backup and that every user has an ID set up in the Practice Resource Setup.

A secure password must be at least seven characters in length and must contain a mix of alphabetic, numeric, and special characters (i.e., !@#$, etc.).

If you were not using secure passwords before, Easy Dental will not require you to change your password to meet the secure password requirements. From this point on, if a user changes their password, they will be required to choose a password that meets the secure password requirements.
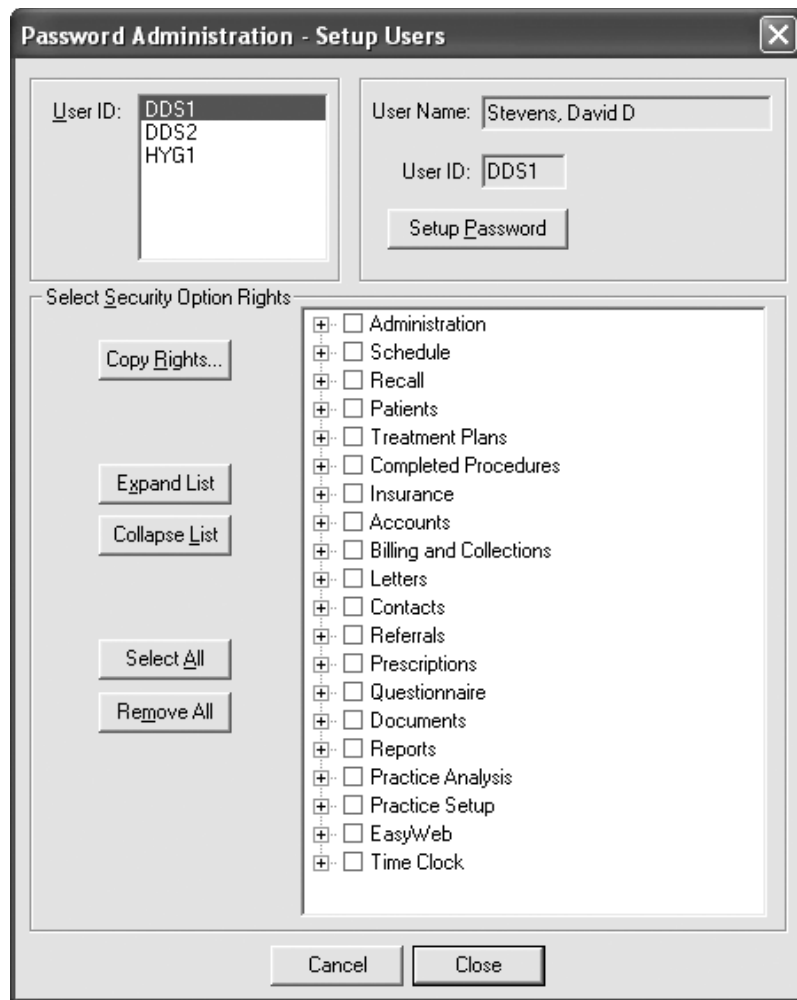
Figure 2-11: The Password - Setup Users window.

12. If there is more than one user with the same rights, then after setting up the first of these users, do the following:

    a. Highlight the next user with the same rights.

    b. Click the **Copy Rights From** button and select the user that you first set up.

    c. Click the **Copy** button.

13. When you are done with passwords, click the **Close** button.

14. If Easy Dental prompts you to save changes, click **Yes**.

Changing Passwords

Easy Dental has provided a way for all users to change their own password without having access to the security rights for themselves or other users. The user will not have access to change other user's passwords either. To change your password, do the following:

1. Log into Easy Dental as yourself.

2. From the Reports module, click 📇 **(Practice Setup) | Passwords | Change Password**. Figure 2-12, on the next page, will open.

3. Your username should display in the **User ID** field. If it does not, close and re-open Easy Dental on the computer and log in again.

4. In the **Current Password** field, enter your current password.

5. In the **New Password** field, enter the desired password.
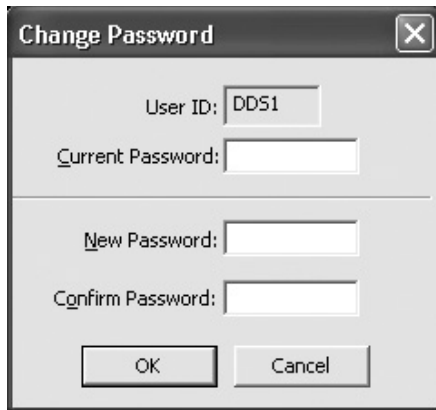
Figure 2-12: The Change Password window.

6. In the **Confirm Password** field, enter your new password again.

7. Click **OK**.

Password Recommendations

Easy Dental recommends that the main dentist(s) or practice owner(s) be given rights to all operations. Be sure to assign these users the Password Administration right, so that they will have to ability to edit rights and passwords at will.

Easy Dental recommends that the office manager be assigned access to all operations, **EXCEPT** for Password Administration and Audit, Clear.

Easy Dental recommends that these staff members have access to all operations, **EXCEPT**:

- • Password Administration
- • Appointments, Delete
- • Appointments, Purge
- • Audit, Clear
- • Audit Trail Reports
- • Clinical Notes, Add Signature
- • Fee Schedules Setup
- • Finance/Late Charges
- • Month End - Update
- • Payment Plans, Add New/Edit Info
- • Practice Definitions Setup
- • Practice Analysis
- • Practice Resource Setup
- • Print Billing Statements
- • Print Payroll Report
- • Print Time Punch Report
- • Time Clock, Edit Punches/Notes
- • Time Clock, Setup
- • Utility Administration

*A user does not need the Password Administration right in order to change their **OWN** password.*

Although the initial setup for passwords is important, as long as the Password Administration and module rights are given to someone in the office, passwords can be customized at anytime.

All users must be granted the Open right for each module (i.e., Patients, Open, etc.) in order to open Easy Dental.

Call Easy Dental Support, (800) 336-8749, option 21 for a more detailed description of each user right.

Check Your Skills 2.2

1. Which of the following is **NOT** considered a secure password? Circle the correct answer.

   a. EasyDental1!

   b. Yatbpwictd1!

   c. Ia#1wictd

   d. !eolc

2. True or False? Easy Dental recommends that all staff members be given access to all operations within Easy Dental.

3. As a recommendation from Easy Dental, which two password rights should **NOT** be given to the office manager?

4. Where would you go to change your own password in Easy Dental without having access to assigning rights to other users?

5. Which of the following is a good type of word to use when thinking up a password? Circle the correct answer.

   a. An acronym

   b. A word that can be found in the dictionary

   c. A familial name

   d. A birth date

6. Before enabling passwords, what two things should you make sure have been done?

Procedure Code Setup

Procedure Code Setup

To set up a new or edit an existing procedure, do the following:

1. Open the Reports module.

2. Click ⚙ (**Practice Setup) | Procedure Code Setup**.

3. Highlight the desired category.

4. Select a code, then click **Edit** or, if creating a code, click **New**. A screen similar to Figure 2-13 will open.

Figure 2-13: The Procedure Code Editor window.

5. If you are creating a new code, then you will need to enter an **ADA Code**, **Description**, and an abbreviated description.

6. Enter/edit the fees for the procedure code:

   a. Highlight the fee schedule to which you want to assign a fee.

   b. Click the **Edit Fee** button.

   c. Enter the dollar amount.

   d. Click the ▨ (**Accept Change**) button to accept the changes.

7. Check the desired **Treatment Flags**.

   • **Difficult Procedure** will print an asterisk on the Day Sheet indicating a phone call should be made at the end of the day.

   • **Condition** will only post the procedure to the Chart module and no fee will be charged.

   • **Remove Tooth** will remove a selected tooth from the Chart module. This is applicable for extractions and missing teeth.

   • **Show in Chart** will display the procedure under the category button in the Chart module.

For more information on fee schedule functionality, please see the Insurance Estimates topic in Chapter 4: Insurance Management.

8. If desired, select the recall type that you want attached to the procedure under **Auto Recall**.

9. Select the **Procedure Time**. This is the amount of time, based on the Schedule module unit, needed to complete the procedure.

10. Select the **Treatment Area**:

    • **Mouth** is used for cleanings, x-rays, exams and any other procedure that does not required a tooth, surface, etc.

    • **Tooth** is used for crowns, sealants, root canals, extractions, etc.

    • **Surface** is used for amalgams and resin fillings.

    • **Quadrant** and **Sextant** are used for perio procedures.

11. The **Paint Type** will determine how the procedure will be painted on a tooth when it is posted in the Chart module.

12. Check **Do Not Bill to Dental Insurance** if you never want to bill this procedure to insurance companies and do not want it to show on the Procedures Not Attached to Insurance Report.

13. Click **Edit Note**. The screen in Figure 2-14 will appear.

Figure 2-14: The Edit Procedure Code Notes window.
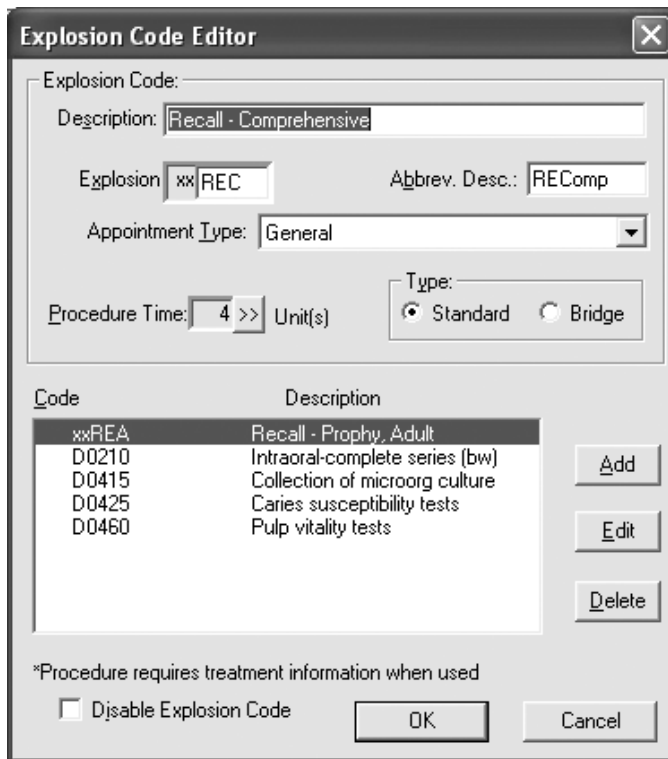
a. Enter **Procedure Code Notes** for the procedure you are working on.

b. Mark the desired option as to where to copy the procedure note to when the procedure is completed:

    • **Copy to Procedure Note** will copy the note in the Note field of a procedure. A chevron (>>) will be displayed in the Description column of a procedure Chart or Accounts modules when a note is present.

    • **Copy to Clinical Note** will copy the note to the Clinical Notes for the day that the procedure was completed. This will copy each time a procedure is completed. Therefore, if you complete the same code several times within the same day (i.e., full-mouth restoration, etc.), you will need to delete the extra notes from the patient's Clinical Notes.

    • **Do Not Copy** will not copy the note to any area within Easy Dental.

c. Enter **Recommendation Notes** as desired (care instructions).

d. Check **Print Note on Walkout** to print the recommendation notes on the Walkout statement.

e. Click **OK** to save and exit.

14. Click **Save** and click **Close** when you are finished.

Explosion Code Setup

An explosion code allows you to post several procedures simultaneously by grouping together procedure codes that are typically scheduled at the same time, such as a root canal and crown, or prophy and exam, etc. To set up an explosion code, do the following:

1. Open the Reports module.

2. Click ![icon] **(Practice Setup) | Explosion Code Setup**.

3. Click **New** to set up a new explosion code. The screen in Figure 2-15 will open.

Figure 2-15: The Explosion Code Editor window.

4. Enter a **Description** for the explosion code. The description can be up to 31 characters in length.

5. Enter a unique five-digit **Explosion code**. Easy Dental automatically assigns the first two digits as xx.

6. Enter an abbreviated description for the explosion code.

7. If the explosion code will post a bridge, mark **Bridge**; otherwise, mark **Standard**.

8. Set the **Procedure Time** required to complete this group of procedures.

9. Add procedure codes to the explosion code. You can add up to 8 procedure codes including other explosion codes.

a. Click **Add**. Enter the ADA procedure code in the field provided.

b. If the procedure code you selected requires the entry of additional information, another field will appear allowing you to pre-define a surface, a quadrant, or sextant.

c. Click **OK**.

10. Repeat steps 9 - 10 to add any additional codes.

11. Click **OK**.

12. Click **Close** to exit the Explosion Code Editor window.

Check Your Skills 2.3

1. When setting up procedure codes, which option will print an asterisk on the Day Sheet indicating a phone call should be made to the patient at the end of the day?

2. True or False? When setting up procedure codes, if you check Do Not Bill to Dental Insurance, this particular procedure will never be billed to any insurance carrier.

3. After entering a fee for a procedure, which button must you click in order to save that fee?

Customizing Defaults

Practice Definitions

Practice definitions are set up in Easy Dental to organize patients, payments, adjustments, and many other categories that your dental office may need to track on reports. The Practice Definitions will need to be customized for your office before you start using Easy Dental. To access the Practice Definitions window, follow the steps listed below.

1. Open the Reports module.

2. Click ![icon] **(Practice Setup) | Definitions**. The screen in Figure 2-16 will open.
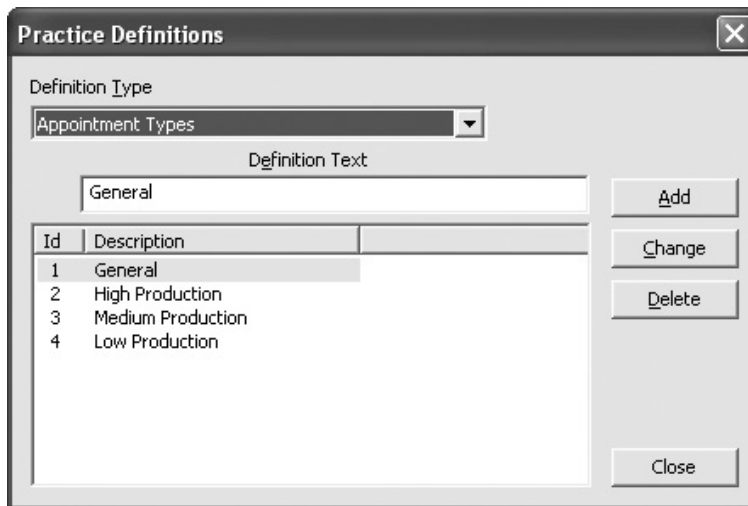
Figure 2-16: The Practice Definitions window.

3. You can then use the **Definition Type** field to change the types of definitions listed.

Customizing Practice Definitions

To customize your definitions, do the following:

1. Open the Reports module.

2. Click ![icon] **(Practice Setup) | Definitions** (see Figure 2-16).

3. Click the down arrow next to the **Definition Type** field to select the type you want to customize.

4. There are three changes that can be made:

   • To change a definition, highlight the type to be changed and replace the existing description with a new description in the **Definition Text** field. Click the **Change** button and then click **Yes** to the message that appears to save the new description.

   • To add a new definition, replace the existing description with a new description in the **Definition Text** field and click **Add**. The new definition will be added in the next available spot.

   • To delete a definition, click **Delete**.

5. Click **Close** when finished.

*Do **NOT** delete definitions. This will leave Easy Dental in an unstable state and can cause areas of Easy Dental to not work properly.*

When editing definitions, remember that any changes will affect all previous entries with that definition's ID. For example, if you change Credit Card Payment to Master Card Payment, all of the existing credit card payments will now be listed as, Master Card Payment.

All definition types have a limit as to how many of that type can be entered into the system. Here is a list of the most common definition limits:
99 - billing types
64 - medical alerts
40 - payment/adjustment types
20 - appointment reasons

Call the Easy Dental Support department for more information on practice definition limits.

Practice Defaults

To set up your practice defaults, do the following:

1. Open the Reports module.

2. Click ![icon] **(Practice Setup) | Practice Defaults**. The screen in Figure 2-17 will open.
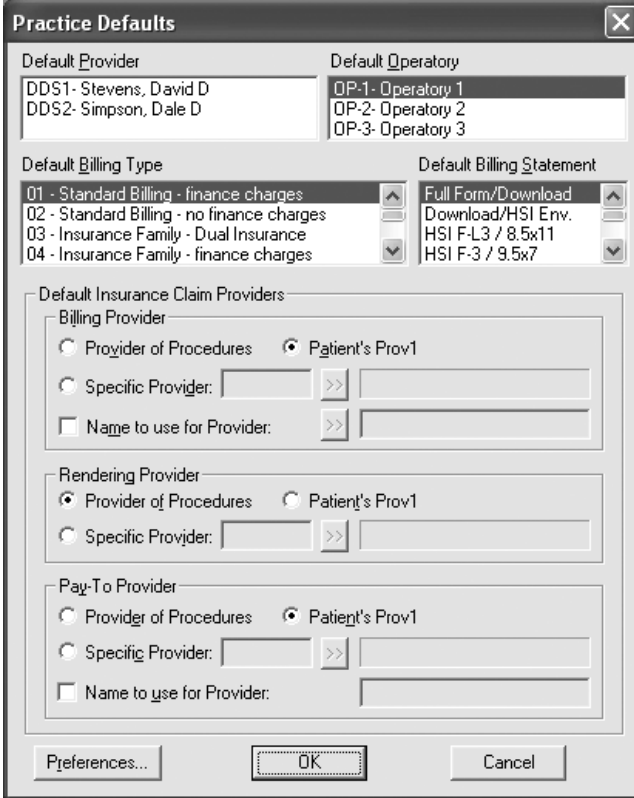
Figure 2-17: The Practice Defaults window.

3. Select the **Default Provider** to be automatically assigned to each new patient that is entered.

4. Select the **Default Operatory** to be automatically assigned to each new appointment scheduled using the **Schedule Appointment** icon in the Schedule module.

5. Select the **Default Billing Type** to indicate the billing type to be automatically assigned to each new head-of-house.

6. Select the **Default Billing Statement** to indicate which form will be used when printing billing statements.

7. Select the **Default Insurance Claim Providers**:

   • **Billing Provider** will show when the claim is printed and will be listed as the billing dentist on the claim.

   • **Rendering Provider** is the provider who actually did the work or provided the service for the patient. This is only used for e-claims, except when using the new CDT-5 claim form.

   • **Pay-To Provider** is the provider who is designated to receive payment for the claim. This is only used for e-claims, except when using the new CDT-5 claim form.

8. Click **OK** to exit and save changes.

Automatic Fee Schedule Changes

The Automatic Fee Schedule Changes utility allows you to change an entire fee schedule rather than changing one fee at a time. To use the Automatic Fee Schedule Changes utility, do the following:

1. Open the Reports module.

2. Click ![Maintenance icon] **(Maintenance) | Fee Schedule**. The screen in Figure 2-18 will open.
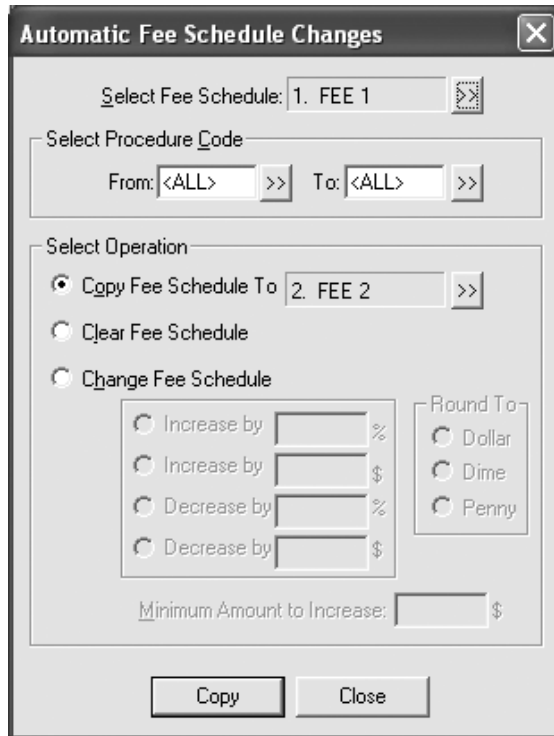
Figure 2-18: The Automatic Fee Schedule Changes window.

3. Select the fee schedule you wish to change by clicking the **Search** button next to the **Select Fee Schedule** field.

4. Select the procedure code range you wish to change.

5. Mark the operation you want to use to change the fee schedule:

    •   **Copy Fee Schedule To** allows you to copy the selected fee schedule to the fee schedule selected for this operation.

    •   **Clear Fee Schedule** allows you to make each amount in the selected fee schedule $0.

    •   **Change Fee Schedule** allows you to increase or decrease the selected fee schedule by a dollar amount or a percentage.

6. Click **Copy/Clear/Change**, depending on the operation selected in step 5.

7. Make changes to the individual fees by double-clicking the amount to change, entering the new amount and clicking the ☑ **(Accept Change)** button to accept the new fee as part of the new fee schedule.

8. Repeat step 7 for any other fees that need to be changed.

9. Click **Accept** to accept the fee schedule or click **Reject** to reject the changes you made to fee schedule.

10. Click **Close** to exit.

For more information on fee schedule functionality, please see the Insurance Estimates topic in Chapter 4: Insurance Management.
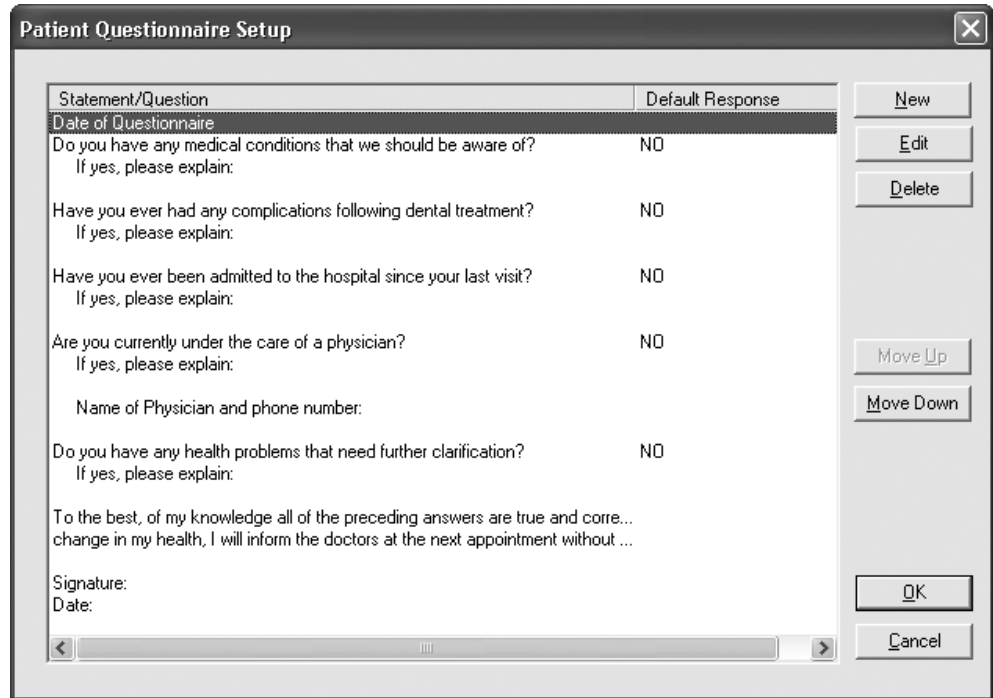
To save time when entering procedure fees, you can press the Tab key after entering the amount for a procedure to move on to the next procedure in the list. Once you are done entering the fees for all procedures, click the Accept Change button to accept the fees.

Survey Setup

The Survey allows you to create a custom set of questions that can be printed out for your patients to answer. This is designed to replace the new patient forms, health histories, and other forms used in your office. To set up the Patient Survey, do the following:

1. Open the Reports module.

2. Click ![icon] (**Practice Setup) | Survey Setup**. The screen in Figure 2-19 will open.
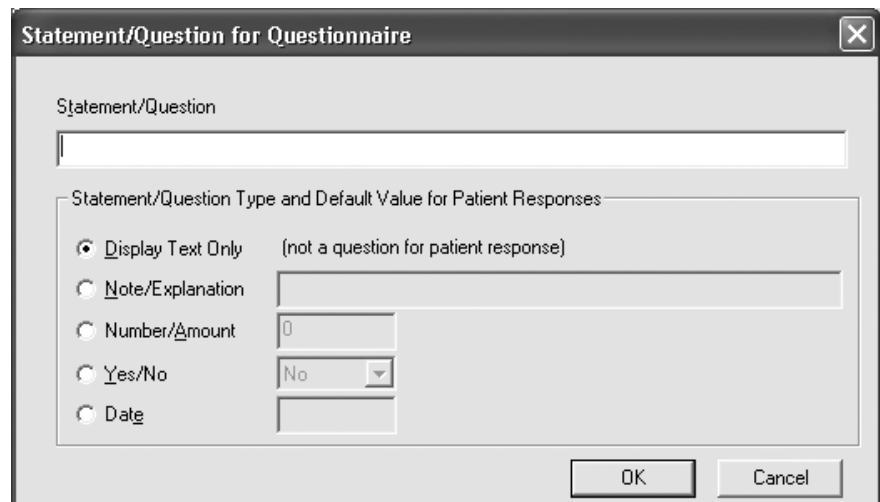
Figure 2-19: The Patient Questionnaire Setup window.

3. Click **New**. The screen in Figure 2-20 will open.

Figure 2-20: The Statement/Question for Questionnaire window.

4. Enter the **Statement/Question**.

5. Select the **Statement/Question Type and Default Value for Patient Responses**:

   - **Display Text Only** is used for statements.

   - **Note/Explanation** is used with questions that require a note or explanation.

- **Number/Amount** is used with questions that require a number be used in the answer.
  - **Yes/No** is used with questions that will be answered either, yes or no.
  - **Date** is used with questions that will be answered with a date.
6. Click **OK** to save changes.
7. Repeat steps 3 – 5 to add any other statements/questions to the survey.
8. Click **OK**.

Printing the Patient Survey

To print the Patient Survey, do the following:

1. In the Patients module, click the ☑ **(Patient Survey)** icon.
2. Click **Print**.
   - If the Patient Survey has not been filled out, a blank one will print, so that the patient can fill it out.
   - If the Patient Survey has been filled out, it will print with the patient's answers.

Chart Number Setup

Easy Dental has a unique numbering system for all patients called, chart numbers. Similar to a file number, this number will be attached to the patient's file in Easy Dental and can be used to search for patients. To set up chart numbers, follow these steps.

1. Open your Reports module.
2. Click 🔧 **(Practice Setup) | Auto Chart Number Setup**. The screen shown in Figure 2-21 will open.
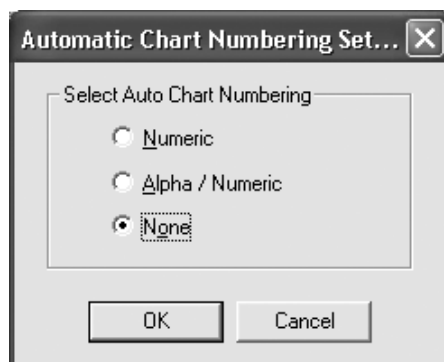
Figure 2-21: The Automatic Chart Numbering Setup window.

3. Mark the type of numbering. Your choices are, **Numeric**, **Alpha/Numeric**, and **None**.
   - **Numeric:** This will give you a six-digit chart number assigned automatically by Easy Dental.
   - **Alpha/Numeric:** This will assign the first two digits as the first two letters of the patient's last name and then assign four numbers.
   - **None:** If you do not want to assign a chart number, mark **None**.
4. When you have marked an option, click **OK**.

Reports Fonts

Easy Dental has the ability to customize fonts by which reports print out. There are many different fonts for a variety of reports. To customize your report fonts, follow these steps.

1. Open the Reports module.

2. Click ![wrench] **(Maintenance) | Report Fonts**. The screen shown in Figure 2-22 will open.
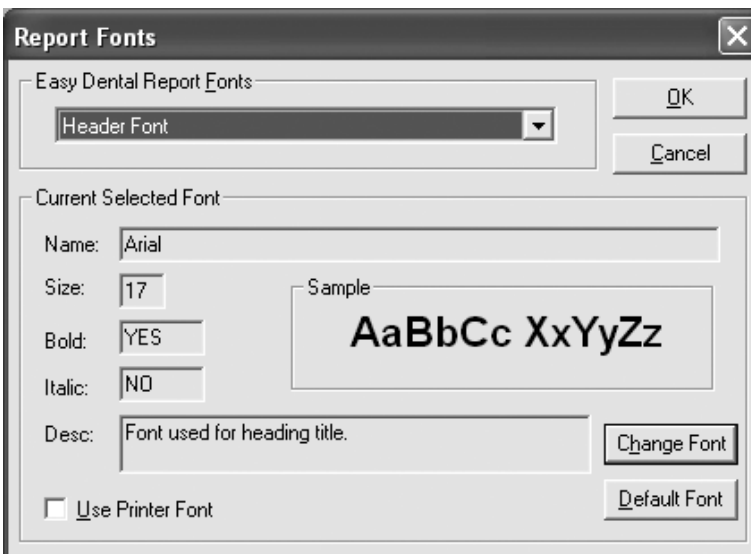
Figure 2-22: The Report Fonts window.

3. Select the report font you would like to change by clicking the drop-down in the **Easy Dental Report Fonts** frame.

4. To change the selected font, click the **Change Font** button and then highlight the desired font name, size, and properties for your selected font, and click **OK**.

5. If the font you selected appears in the **Current Selected Font** section of the Report Fonts window, click **OK**.

Preferences

Preferences allows you to customize features important to your office's needs, such as report options, statement forms, etc. There are four tabs in Preferences: General Options, Print Options, Statement Forms, and Paths. To customize the features in Preferences, do the following:

1. Open the Reports module.

2. Click ![wrench] **(Maintenance) | Preferences**.

3. Click the **General Options** tab and choose from the following options (see Figure 2-23 on the next page).

   • Mark the module that you would like Easy Dental to display when it is first opened in the **Initial Window to Launch** field.

   • Mark either **Family** or **Current Patient** under **Default Assignment of Payments/Adjustments to**.

   • Check to **Suspend Patient Alerts** on this workstation if desired.

   • Check **Start Time Clock on System Startup** if you would like the Time Clock icon to display in the System Tray each time the computer is turned on.
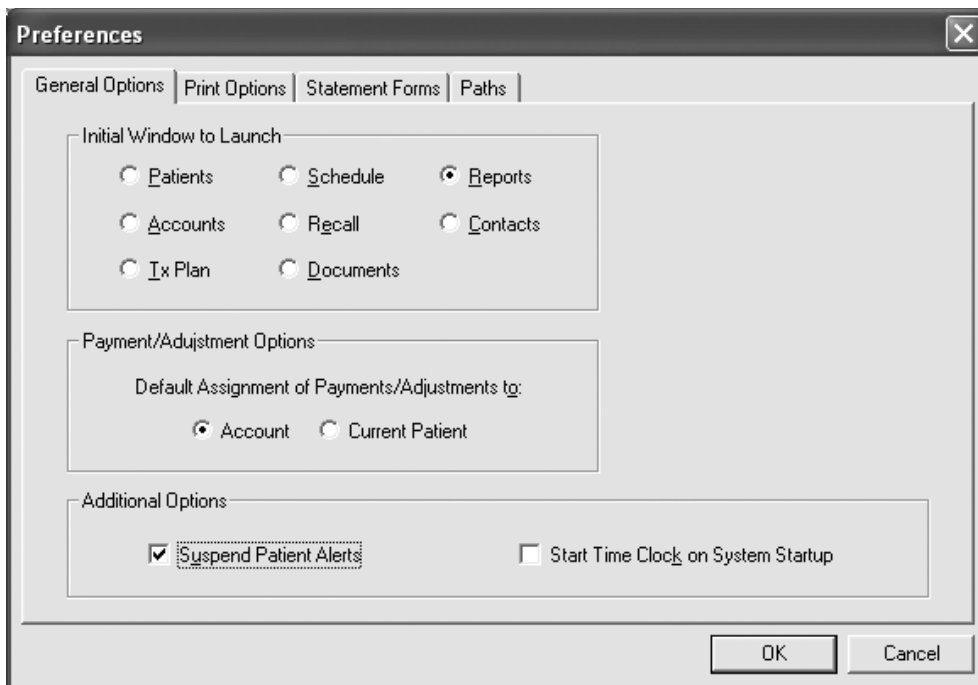
Figure 2-23: The General Options tab of the Preferences window.

4. Click the **Print Options** tab and choose from the following options (see Figure 2-24).
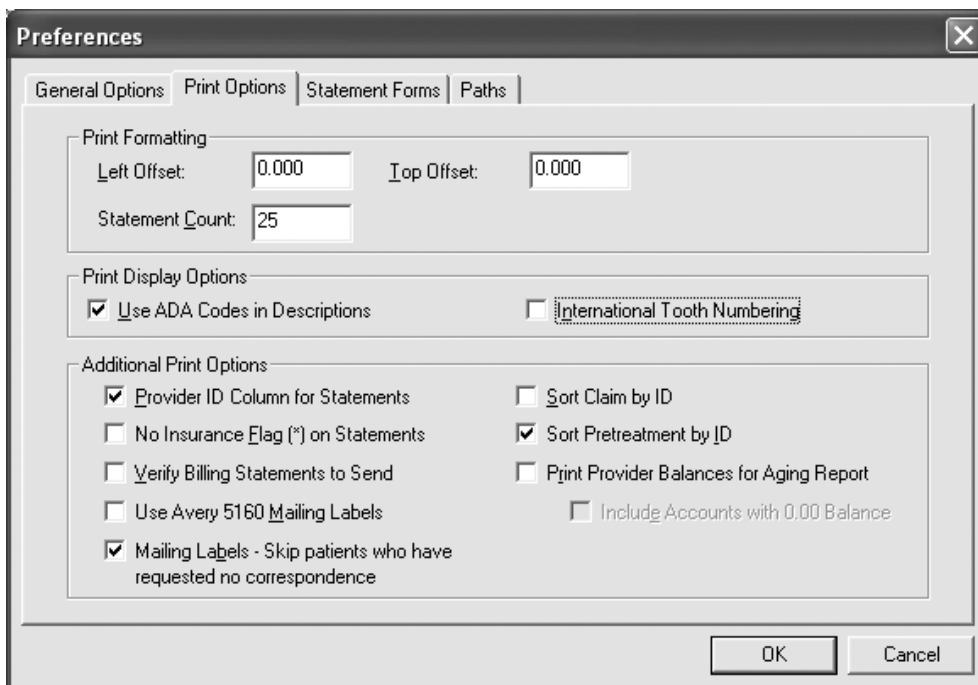
Figure 2-24: The Print Options tab of the Preferences window.

- Change the different **Print Formatting** options to adjust the alignment of pre-printed insurance claims and statement forms as needed.

- Check **Use ADA Codes in Descriptions** to print the ADA code next to the descriptions on the Walkout statement.

- Check **International Tooth Numbering** to switch the Chart module to international number usage.

- Check **Provider ID Column for Statements** to print the provider for transactions on the billing statement.

- Check **Sort Claim by ID** to print procedures on the insurance claims in the order the procedures were attached to a claim.

- Check **No Insurance Flag (*) on Statements** to remove the asterisk that indicates the procedure has been billed to insurance.

- Check **Sort Pre-Treatments by ID** to print procedures on pre-estimate claims in the order the procedures were posted as treatment-planned items.

- Check **Verify Billing Statements to Send** to preview the billing statements before printing or sending electronically.

- Check **Print Provider Balances for Aging Report** to print the provider balances on the Aging Report. You may also check **Include Accounts with 0.00 Balance** if desired.

- Check **Use the Avery 5160 Mailing Labels** to print labels with three columns and ten rows.

- Check **Mailing Labels - Skip patients who have requested no correspondence** to skip patients with "No correspondence" checked in the Patients module.

5. Click the **Statement Forms** tab and check each of the statement forms that the practice will be using.

6. Click the **Paths** tab to set the **Database Path**, **Letter Template Path**, and **EZPort Path** on this workstation (see Figure 2-25).
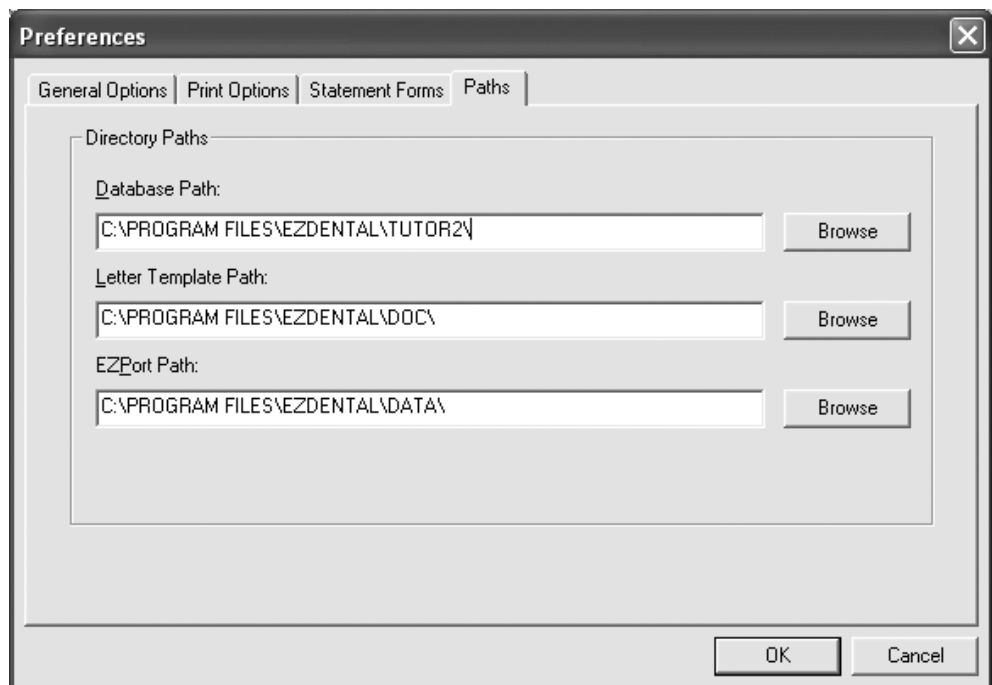
Figure 2-25: The Paths tab of the Preferences window.

7. Click **OK** to exit and save changes.

Check Your Skills 2.4

1. True or False? You should never delete a definition.

2. Where would you assign a default provider to your practice?

_____

3. True or False? Once a patient has filled out their patient survey and it has been entered into the database, the Survey will print blank.

_____

4. Which option should you mark if you do not want to use Easy Dental's chart numbering feature?

_____

5. In Preferences, which option prints the provider's ID on billing statements?

_____

6. True or False? You can increase an entire fee schedule by five percent within the Easy Dental system.

_____

7. Which button in the Report Fonts window will allow you to restore a font to its original setting?

_____

Electronic Processing

Electronic Processing through Easy Dental

Because the NIS Enrollment Department receives changes and registration forms from many Easy Dental offices, they require a 24-hour grace period before changes take affect on the NIS servers.

Every primary provider in the practice must be registered with NIS to avoid rejections when using eTrans.

If you are going to be sending your claims electronically to insurance companies, or using QuickBill to send your statements electronically to your patients, you will first need to do the following:

1. Register with NIS to allow your claims and statements to get past NIS' servers by sending in a registration form and also a Practice Organization List.

    *   To obtain a copy of the eTrans and QuickBill registration forms, contact the NIS Sales department at (800) 336-8749, option 233.

    *   The Practice Organization List can be generated from **Reports module | Reports | Reference | Practice Organization List**.

2. You then must install the eTrans and QuickBill software. (See the eTrans and QuickBill Installation Guides for help.)

3. Once the eTrans and QuickBill software is installed, they must be configured to work with Easy Dental.

eTrans Setup

To configure eTrans, do the following:

1. Open the Reports module.

2. Click 🔧 **(Practice Setup) | Electronic Claims Setup**. Figure 2-26 will open.
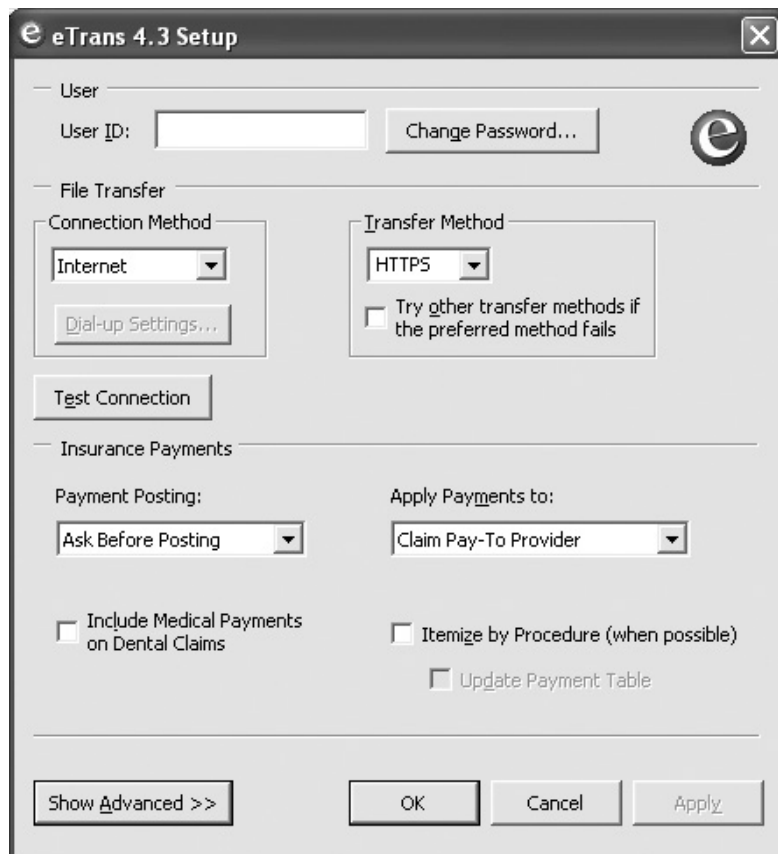
Figure 2-26: The eTrans Setup window.

3. Enter the **User ID** provided by **NIS** in the enrollment process.

4. Enter the password by clicking the **Change Password** button, entering the password twice, and clicking **OK**.

5. Select the **Connection Method** for the connection that you are using. You have two choices: **Dial-up** and **Internet**.

6. Select the **Transfer Method** to use. You have four choices: **FTP**, **PFTP**, **HTTP**, and **HTTPS**. To help you choose the method that is right for your practice, use the explanations of each below as a guide.

   • **FTP**: File Transfer Protocol is a point to point transfer.

   • **PFTP:** This is a firewall friendly version of FTP. Offices with a firewall should be able to use this option without having to open additional ports.

   • **HTTP:** Hyper Text Transfer Protocol is a method that uses the internet to transfer your claims.

   • **HTTPS:** This is an encrypted version of HTTP. Data is transmitted in an encrypted format that is only readable by NIS and the insurance company.

7. Check **Try other transfer methods if the preferred method fails** if you want Easy Dental to try another method in the event of a transmission failure.

8. Click the **Test Connection** button ensure that you are able to connect to the NIS servers without problem.

9. Select the **Payment Posting** option you wish to use. You have three choices: **Ask Before Posting**, **Post Automatically**, and **Post Manually**. To help you choose the option that is right for your practice, use the explanations of each below as a guide.

   • **Ask Before Posting:** Easy Dental will always ask you whether you want have any electronic insurance payments posted automatically or manually to the patient's Accounts module.

   • **Post Automatically:** All electronic insurance payments will be posted automatically to the patient's Accounts module.

   • **Post Manually:** All electronic insurance payments will need to be entered manually into the patient's Accounts module.

10. Select the desired option in the **Apply Payments to** field.

11. Check **Include Medical Payments on Dental Claims** if desired.

12. Check **Itemize by Procedure (when possible)** to itemize the payment by procedure and **Update Payment Table** to update the Payment Table when a payment is itemized by procedure.

13. Click **OK** to save and exit.

QuickBill Setup

To configure QuickBill, do the following:

1. Open the Reports module.

2. Click ▣ (**Practice Setup) | Electronic Billing Setup**. Figure 2-27, on the next page, will open.

3. Select the **Connection Method** for the connection that you are using. You have two choices: **Dial-up** and **Internet**.

4. Select the **Transfer Method** to use. You have four choices: **FTP**, **PFTP**, **HTTP**, and **HTTPS**. To help you choose the method that is right for your practice, use the explanations of each below as a guide.

   • **FTP**: File Transfer Protocol is a point to point transfer.

In order to set up QuickBill, you will need your QuickBill ID provided by NIS through the registration process. This ID is unique to your office and allows you to connect to the QuickBill servers. If you do not remember your ID, call NIS Support at (800) 824-6375, option 231.
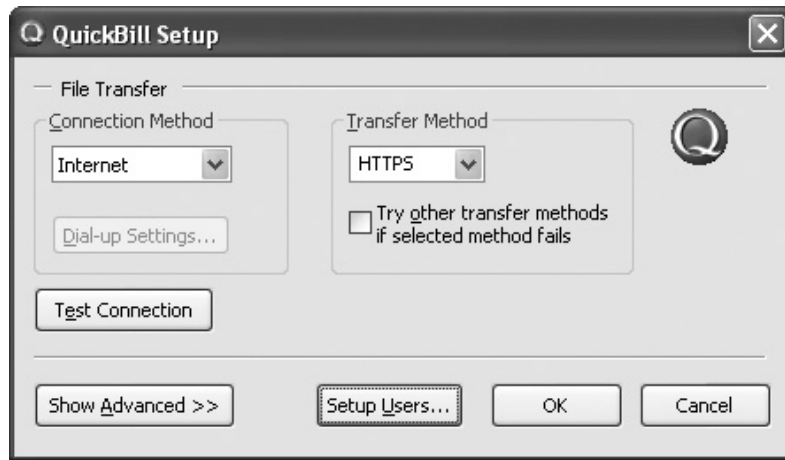
Figure 2-27: The QuickBill Setup window.

- **PFTP:** This is a firewall friendly version of FTP. Offices with a firewall should be able to use this option without having to open additional ports.

- **HTTP:** Hyper Text Transfer Protocol is a method that uses the internet to transfer your claims.

- **HTTPS:** This is an encrypted version of HTTP. Data is transmitted in an encrypted format that is only readable by NIS and the insurance company.

5. Check **Try other transfer methods if the preferred method fails** if you want Easy Dental to try another method in the event of a transmission failure.

6. Click the **Test Connection** button ensure that you are able to connect to the NIS servers without problem.

7. Click **Setup Users** to set up the different users for QuickBill. A screen similar to Figure 2-28 will open.
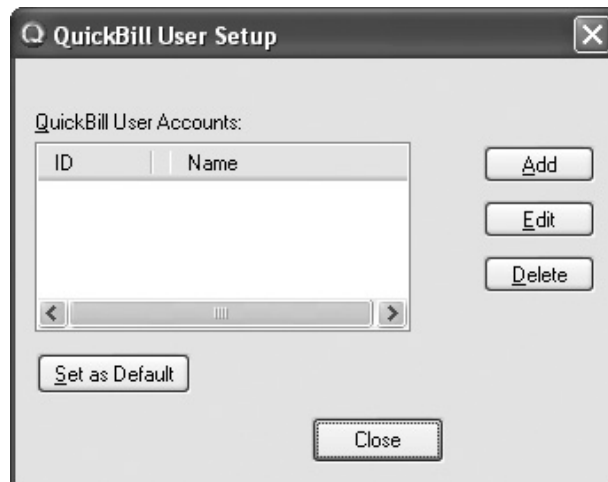
Figure 2-28: The QuickBill User Setup window.

8. Click **Add** to add a new user. The window in Figure 2-29, on the next page, will open.

9. Enter the **QuickBill ID**.

10. Enter the **Name** of the user.

11. Enter the user's password in the **New Password** field and re-enter the password in the **Confirm New Password** field.

12. Check **Include Inserts** if desired.

13. Check **Request Address Service** if desired.

14. Click **Terms and Pricing** to review the terms and pricing for using QuickBill.
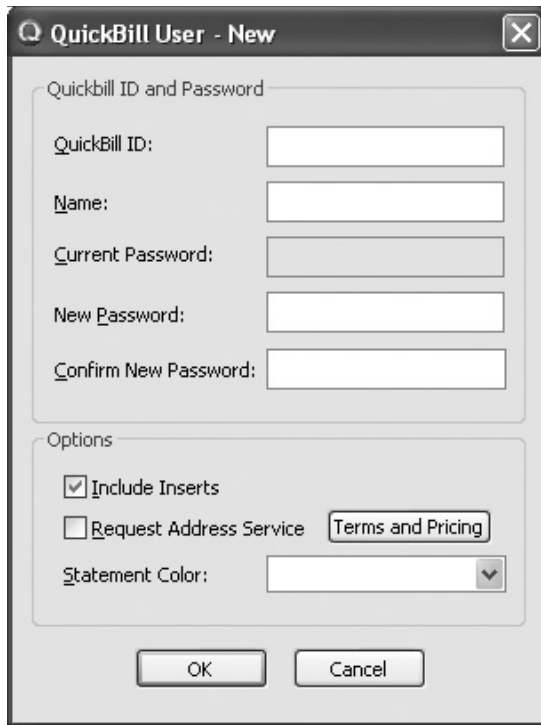
Figure 2-29: The QuickBill User - New window.

15. Select the desired **Statement Color**.

16. Click **OK**.

17. Repeat steps 8 - 16 for any other users.

18. Click **Close** to close the QuickBill User Setup window.

19. Click **OK** to save and exit.

Check Your Skills 2.5

1. What are the two connection methods when setting up eTrans?

2. If you want to make sure that your User ID, Password, and system is connecting to the NIS servers without problem, which button should you click?

3. If you have problems while sending e-claims or e-billing statements, which support department should you call?

Apply Your Knowledge

Switch to the Tutor Database

Before performing any of the following activities, switch to the Tutor database to ensure that your live data will not be compromised. To switch to the Tutor database, do the following:

1. Open the Reports module and click ▨ (**Maintenance**) | **Preferences | Paths**.
2. Make a note of the current path in the **Database Path** field, so you can switch back to your live data after you are done with the activities.
3. Click the **Browse** button next to the **Database Path** field.
4. Browse to the location of your Tutor folder. In most cases, **C:\Program Files\ Ezdental\Tutor** will be your path.
5. Click **OK**.
6. Click **OK** to the message that appears and close Easy Dental.

If you are not sure where your Tutor folder is located, ask your trainer for help or call Easy Dental Support at (800) 824-6375.

Activities

1. Add the following provider and his information into the system:
   - Name: Martin C. Edwards, DMD
   - ID: DMD1
   - Title: DMD
   - Address: Your Practice Address
   - Phone: Your Practice Phone
   - Assigned Operatories: OP-3
   - Fee Schedule: FEE 5
   - Social Security Number: 999-99-9999
2. Inactivate DDS1 and use DMD1 as the replacement provider.
3. Assign HYG1 as the HIPAA Officer for the practice.
4. Add an additional operatory with OP-4 as the ID.
5. Change the Paint Type for D2750 (Crown-porc fuse high noble mtl) to Crown - Solid.
6. Add a procedure note to D2750 and make sure that it will be added to the Clinical Notes each time it is posted.
7. Create an explosion code for an all porcelain bridge.
8. Add Pre-medicate to your list of medical alerts.
9. Change the medical alert for Growths to Allergy - Latex.
10. Decrease FEE 5 by 10% for all codes.
11. Set up Easy Dental to use Avery 5160 labels whenever you print labels from any module.

Patients Module

Overview

The Easy Dental Patients module stores both patient and family information. Information regarding the patient's insurance, recall, account balance/aging, personal notes and much more is easily accessible through this one module.

Objectives

Once you have completed this chapter, you should be able to:

- Enter New Patients/Families
- Enter Important Patient Information
- Archive Patients
- Editing Family Relationships
- Create Patient Alerts
- Add Patient Pictures

Patients Module Basics

Terminology

Head-of-House: The person in the family that is responsible for the account. Correspondence for the family is sent to this person.

Insurance Subscriber: The person in the family that subscribes to an insurance policy. The insurance subscriber does not have to be the head-of-house or guarantor.

Guarantor: The person in a family who is financially responsible for the account. The guarantor is the same person as the head-of-house.

Subscriber ID: This is a number assigned to each insured person for identification purposes. A person's subscriber ID **MAY** be the same as their Social Security number. Social Security numbers are unique records; there can only be one patient with a particular Social Security number in the Easy Dental database, whereas a subscriber ID can be attached to as many patients in the database as necessary.

Status: This indicates whether this person is a patient, inactive or a non-patient. Inactive indicates those patients that have not been seen in at least 18 months. Non-patients are those who are not patients of record, but are added to Easy Dental for insurance and/or billing purposes.

Release of Information: This indicates that the patient has signed a consent form, allowing their records to be released to the insurance company.

Initial Balance: This is a family's existing balance transferred from an old system and entered into the Easy Dental system as part of the initial setup.

Assignment of Benefits: This indicates that the patient wishes the benefits to be assigned to the dental office. Thus, when an insurance claim is sent to the insurance company, they will send the payment to the dental office and not the patient.

Fee Schedule: This allows you to enter the dollar amount that the patient or members of an insurance plan will be charged for certain procedures. A fee schedule can also be used to show how much an insurance company is going to pay for a procedure. This amount will usually not be charged on the Accounts module; instead, it will be copied to the Payment Table and used to help insurance estimates calculate more accurately.

Billing Type: This is a numerical type assigned to each family to help categorize patients for billing and reporting purposes within Easy Dental.

Recall: This is Easy Dental's recall system. It is a sophisticated system for tracking patients who need to be seen on a continuing basis.

Navigating the Patients Module

Understanding the basic navigation of the Patients module is crucial to the successful operation of the entire Easy Dental program. Figure 3-1 illustrates the different functions of the Patients module.

Double-click a family member's name to quickly switch to their file without using the Select Patient icon each time.

Double-click here to add/edit this patient's medical alerts.

Double-click here to edit the patient's information.

Double-click here to set/edit this patient's recall.

Double-click here to assign an employer to this patient.

Double-click here to assign a referral source to this patient.

Double-click here to assign an insurance plan to this patient.

Double-click here to enter/edit a note for the patient.

Figure 3-1: The Patients module.

Topic 2

New Patients/Families

Selecting an Existing Patient

To select an existing patient in the database, do the following:

1. Open the Patients module.

2. Click the 🔳 (**Select Patient/New Family**) icon. A screen similar to Figure 3-2 will open.
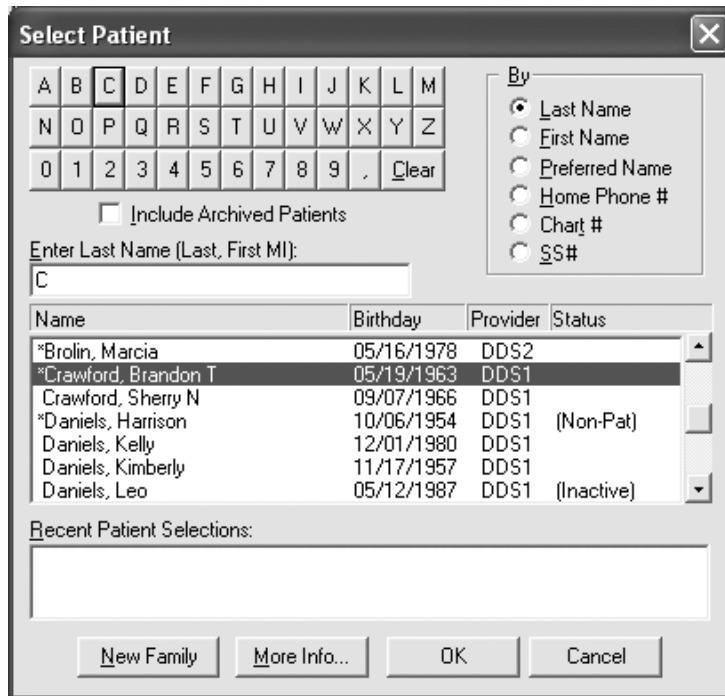
Figure 3-2: The Select Patient window.

3. Select the desired method to search **By**.

4. Enter the first few letters/numbers of the selected search in the field provided.

5. Highlight the desired patient from the list.

6. Click **OK**.

Adding a New Patient/Family

To add a new patient/family into Easy Dental, do the following:

1. Open the Patients module.

2. Click the 🔳 (**Select Patient/New Family**) icon.

3. In the bottom, left side of the Select Patient window (shown in Figure 3-2), click the **New Family** button. A screen similar to Figure 3-3, on the next page, will open.

4. Enter the last name of the patient who will be the head-of-house for the family.

5. Press the **Tab** key to advance to the next field and enter the head-of-house's first name.

6. Using the **Tab** key, advance to each field and enter the appropriate information.

Figure 3-3: The Head-of-House Information window.

7. Click **OK** to save and exit.

Adding a Patient to an Existing Family

To add a patient to an existing family, do the following:

1. Select the head-of-house for the patient you are going to add.
2. From the toolbar, click the ⊞ **(Add New Family Member)** icon.
3. Enter the patient's information in the New Patient Information window.
4. Click **OK** to exit.

Check Your Skills 3.2

1. If a patient does not want to be contacted by the office, which option, when adding a new patient or editing an existing one, will allow you to block certain information from being seen in all modules, except the Patients module?

_____

2. True or False? When entering a patient's Social Security number, you must enter the number with the dashes in order for Easy Dental to recognize it.

_____

Easy Dental will automatically capitalize the first letters of the first name, last name, address, middle initial, city, and state.

Social Security numbers can be entered without the dashes; Easy Dental will automatically insert them for you.

Dates entered in a two-digit format will automatically be formatted to the correct format (i.e., Easy Dental will change 010903 to 01/09/2003).

Easy Dental keeps track of cities and states assigned to zip codes. When you are entering a zip code not yet entered in the system, Easy Dental will prompt you to enter the information for that zip code.

Easy Dental will automatically insert today's date as the First Visit Date and Consent Date. If you wish to change these dates, place your cursor in the correct field, delete the existing date and then enter the desired date. It is recommended to enter these dates accurately for reporting purposes.

Topic 3

Medical Alerts

Adding Medical Alerts to a Patient

To assign medical alerts to a patient, do the following:

1. Select the desired patient.

2. Double-click the **Medical Alerts** field.

3. Click the **Edit** button and a screen similar to Figure 3-4 will open.
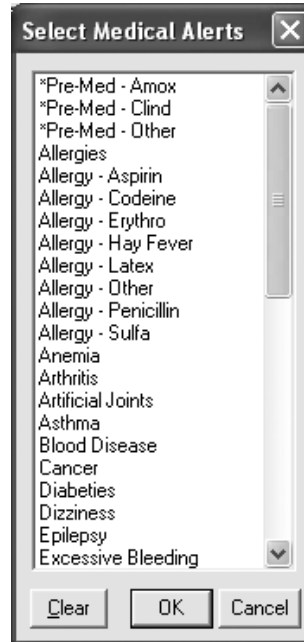
Figure 3-4: The Select Medical Alerts window.

When in the Patients module, the Select Medical Alerts screen always sorts alphabetically. So, if you want an alert to show at the top of a list (i.e., Pre-medicate), you can add an asterisk in front of the alert as you add or change them in Definitions.

You can have up to 64 medical alerts.

4. Highlight the desired alerts and click **OK** and then click **Close** to save and exit.

Adding New Medical Alerts to the List

To add a medical alert to your medical alerts list, do the following:

1. Open the Reports module.

2. Click ☒ (**Practice Setup) | Definitions**. A screen similar to Figure 3-5, on the next page, will open.

3. In the **Definition Type** field, select **Medical Alerts**.

4. In the **Definition Text** field, enter the medical alert you wish to add.

5. Click **Add**.

6. Repeat steps 4 - 5 to add any other medical alerts that you need to add to Easy Dental.

7. Click **Close** to exit.

*Do **NOT** delete definitions. This will leave Easy Dental in an unstable state and can cause areas of Easy Dental to not work properly.*

Figure 3-5: The Practice Definitions window.

Check Your Skills 3.3

1.   Rather than deleting an existing alert that you no longer wish to use, you should do what?

2.   True or False? If you change the medical alert for Growths to Allergy - Latex, every patient attached to the Growths medical alert will now be attached to the Allergy - Latex medical alert.

3.   In Figure 3-4 on page 46, why are the PRE-MED alerts showing at the top of the list? Is the list supposed to sort alphabetically?

Topic 4

Employers

Attaching an Employer to a Patient

To assign an employer to a patient, do the following:

1. From the Patients module, double-click the **Employers** field. A screen similar to Figure 3-6 will open.

Figure 3-6: The Employer Information window.

2. In the **Employer Name** field, enter the first few letters of the patient's employer.

3. Click the **Search** button to determine if the employer is already in the system. (This will help avoid duplicates.)

   • If you see the employer listed, do the following:

      a. Highlight the employer and click **OK**.

   • If you do not see the employer listed, do the following:

      a. Click **Cancel**.

      b. Enter the **Employer Name**.

      c. Enter the employer's **Address**.

      d. Enter the **Employer Phone** number.

4. Click **OK** to save and exit.

Employers can also be entered into Easy Dental from the Employer Maintenance window of the Reports module. In the Reports module, click Maintenance | Employer Maintenance.

Referrals

Adding Referrals (Referred By)

The Patient Referrals window allows you to see who a patient was referred by and referred to at the same time. By being able to see both referral types at the same time, you can easily view the patient's referral status. To add a referred by source to a patient, do the following:

1. Select a patient in the Patients module.

2. Double-click the **Referred By** field. A screen similar to Figure 3-7 will open.
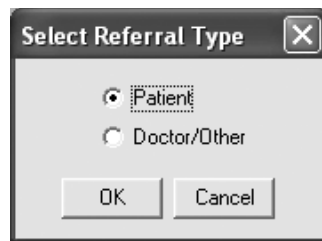
Figure 3-7: The Select Referral Type window.

3. Mark whether the referral will be by a **Patient** or a **Doctor/Other** source and click **OK**.

   • If you mark **Patient**, search for the patient in the Select Patient window. (The patient must be entered in the database to show in this list.) Once you have selected the correct patient, click **OK**.

   • If you mark **Doctor/Other**, highlight the name of the referring doctor or advertisement and click **OK**. If the referral source is not listed, do the following:

      a. Click **New** to add a new source.

      b. In the Referred By Information window, enter the information for the referral source in the fields provided.

      c. Click **OK** to save and exit.

      d. Highlight the newly added referral source and Click **OK**.

4. Click **Close** to return to the Patients module.

Adding Referrals (Referred To)

To add a referred to source to a patient, do the following:

1. Select a patient in the Patients module.

2. Double-click the **Referred To** field. A screen similar to Figure 3-8, on the page, will open.

3. Highlight the name of the doctor that you are referring your patient to and click **OK**. If the referral source is not listed, do the following:

   a. Click **New** to add a new source.

   b. In the Referred To Information window, enter the information for the referral source in the fields provided.
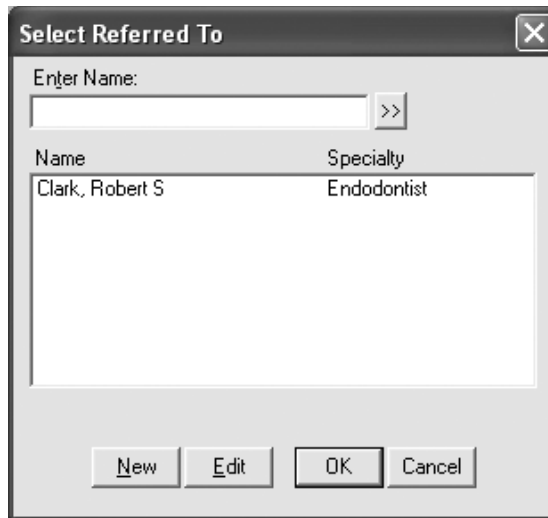
Figure 3-8: The Select Referred To window.

      c.   Click **OK** to save and exit.

      d.   Highlight the newly added referral source and click **OK**.

4.   Click **Close** to return to the Patients module.

Check Your Skills 3.5

1.   What are the two options when adding a referred by source?

2.   True or False? You can select a patient that is not in the database to be a referred by source.

Archiving Patients

Archiving a Patient

Archiving patients will simplify your patient database and make patient selection faster and easier. To archive a patient, do the following:

1. From the Patients module, select the patient you wish to archive.

2. Double-click the **Patient Information** field.

3. Select **Archived** from the drop-down menu of the **Status** field (see Figure 3-9).

Figure 3-9: The Patient Information window.

4. Click **OK** to any messages that appear.

5. Click **Yes** to confirm the actual archiving of the patient.

Re-activating an Archived Patient

To re-activated a patient, do the following:

1. Click the **(Select Patient/New Family)** icon in the Patients module.

2. Check the option to **Include Archived Patients** (see Figure 3-10 on the next page).

3. Select the patient that is to be re-activated.

4. Double-click the **Patient Information** field.

5. Click **OK** to the message that appears and the status will change from **Archived** to **Patient**.

6. Click **OK** to save and exit.

7. At this point, you will need to re-enter any information stored in the Contacts module and/or Patient Notes field into their corresponding areas of Easy Dental.

Before you can archive a patient, they must have a zero patient balance. If you wish to archive a head-of-household, all other family members must be archived first and there can be no outstanding charges on the account.

When a patient is archived some of their information is either deleted and stored in the Contacts module and/or the Patient Notes field. This allows you to re-activate a patient in the future. While the patient is archived, their information cannot be edited.

Upon archiving a patient, all appointments for the patient will be deleted and an entry will be added to their Contacts module.

All recall, employer, insurance, and referral information is cleared from their corresponding fields and copied to the Patient Notes field when archiving a patient.

Upon archiving a patient, Address, procedures, insurance claims, payments, adjustments, medical alerts, prescriptions, Survey information, and Contacts module entries all remain intact.

Archived patients will appear in the Patients module's Select Patient window only and only if the option Include Archived Patients is checked.
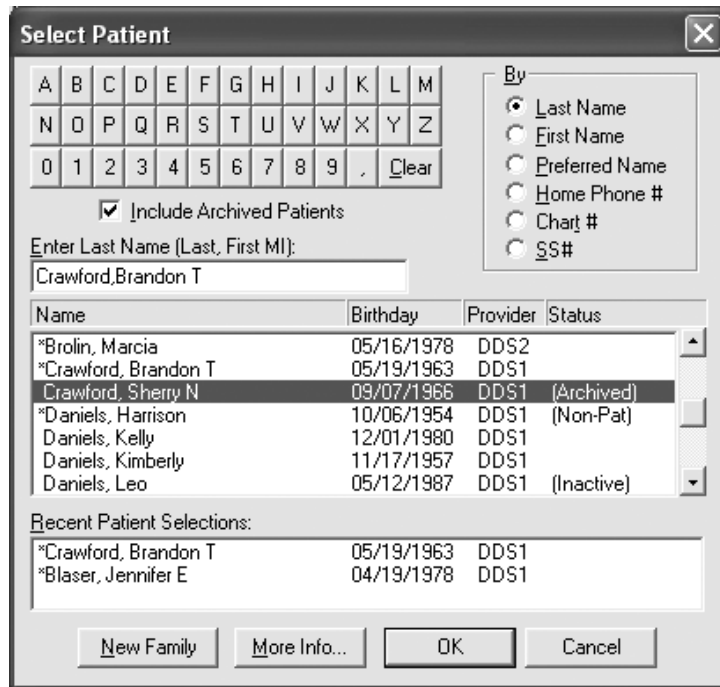
Figure 3-10: The Select Patient window.

✓ Check Your Skills 3.6

1. True or False? You can archive a head-of-household at any time, meaning there are no restrictions that may apply.

2. If you want to view archived patients, from which module can you do this? Which option must be selected in order to see those patients?

Family Editing

Changing the Head-of-house

To change the head-of-house, do the following:

1. Close Easy Dental all computers.

2. Open the Patients module and select the desired family.

3. Click 🖉 **(Edit) | Family Relations**. A screen similar to Figure 3-11 will appear.

Figure 3-11: The Edit Family window.

4. Highlight the patient that is the new head-of-house.

5. Click **Set HofH 1**.

6. Click **OK**.

Separating a Family

If a divorce occurs or a child moves out on their own, it is necessary to reflect the change in family structure within Easy Dental. To separate a family, do the following:

1. Close all Easy Dental modules on all computers.

2. Open the Patients module and select the desired family.

3. Click 🖉 **(Edit) | Family Relations** (see Figure 3-11).

4. Click **Family 2**. The Select Guarantor window, similar to the Select Patient window, will appear.

5. Click **New Family** at the bottom. A screen similar to Figure 3-12 will appear.

Figure 3-12: The Edit Family window.

The insurance subscriber and the head-of-house do not have to be the same person. The head-of-house should be the family member responsible for paying the bill.

You cannot move the head-of-house to another account unless you move the entire family (i.e., two families are being combined due to a marriage). You must first switch the head-of-house to another person.

If you receive any warning/error messages while performing the family edit, please refer to Common Messages During a Family Edit on page 54.

6. On the Family 1 side, highlight the family member to separate from the current family.

7. Click the right arrow button. The patient is now on the Family 2 side.

8. Click **OK**.

Combining a Family

Once a family has been separated or combined, you may need to add or remove insurance from some of the family members. Check the balances of both accounts and make the necessary adjustments, change the status of the affected patients (i.e., from married to single or vice versa, etc.), and change addresses/phone numbers if needed.

If two patients in the practice get married, it is necessary to reflect the change in family structure within Easy Dental by combining their accounts. To combine two families, do the following:

1. Close Easy Dental on all computers.

2. Open the Patients module and select the desired family.

3. Click [icon] **(Edit) | Family Relations** (see Figure 3-11 on the previous page).

4. Click **Family 2**. The Select Guarantor window, similar to the Select Patient window, will appear.

5. Select the family to combined (see Figure 3-12 on the previous page).

6. Highlight each family member on the Family 1 side and click the right arrow button until all patients are on the Family 2 side.

7. Click **OK**.

Common Messages During a Family Edit

There are several different messages that may appear while performing a family edit. These messages should help you understand why you are unable to continue with the family edit or what will happen when you complete the process.

The message in Figure 3-13 will appear when you try to perform a family edit without closing all Easy Dental modules on all computers. In order to continue with the family edit process, you must close all modules on all computers.
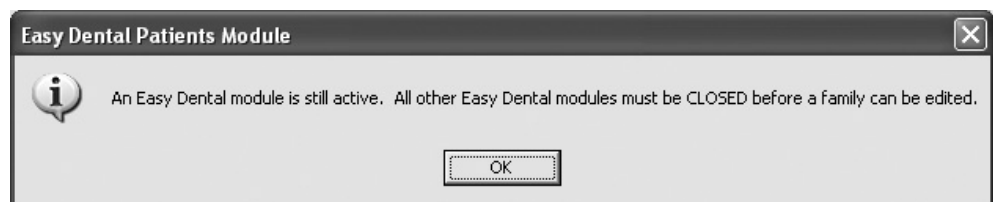
Figure 3-13: This message appears when you try to perform a family edit without closing Easy Dental on all computers.

You will receive the message in Figure 3-14 (on the next page) when the patient or the family has current transactions in their Chart module and Accounts module. This message informs you that, depending how you are allocating your patient payments, the balances of the accounts may be affected. If the balances are affected, you will need to post adjustments on the accounts to transfer the balance from one to the other. This message does not stop you from continuing with the family edit process.
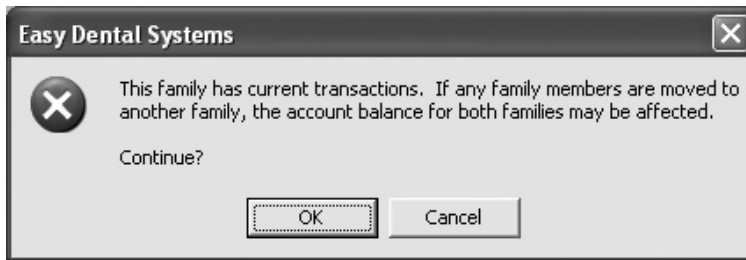
Figure 3-14: This message appears when one or more of the family members involved in the family edit process has a current transaction in the Chart or Accounts modules.

In order for a patient to be covered by an insurance plan in Easy Dental, that patient must be on the same account as the insurance subscriber. Easy Dental will not allow you to attach insurance from one account to another. For this reason, patients with pending claims cannot be moved to a new family nor cannot have another patient combined with their family. If you try to perform the family edit with a pending claim in the mix, you will receive the message in Figure 3-15. In order to continue with the family edit process, you must either wait until the payments for those claims are received and entered, post a $0 payment to the claim and then delete it once the patient has been moved, or delete the pending claims and then re-create them after the family edit has been completed.
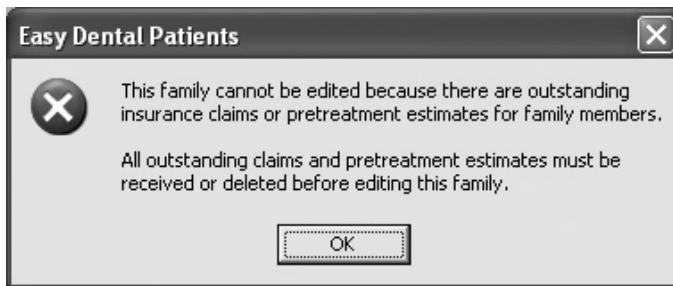
Figure 3-15: This message appears if there is a pending claim attached to any of the family members involved in the family edit process.

The message in Figure 3-16 will appear if the patient you are trying to move is the insurance subscriber. Easy Dental will allow you to move the patient to the other account; however, the insurance coverage for all dependents will be cleared. This message does not stop you from continuing with the family edit process.
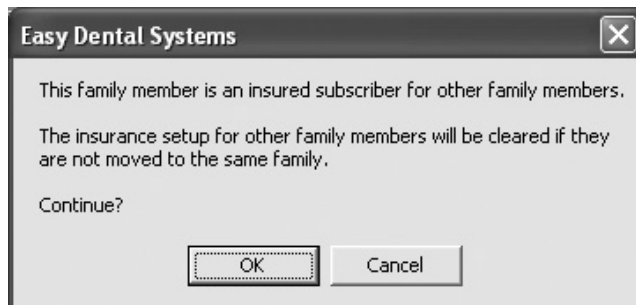
Figure 3-16: This message appears if the patient you are moving is the insurance subscriber for other family members on the account.

The message in Figure 3-17 (on the next page) will appear if the patient you are trying to move is covered by the subscriber's insurance plan. Easy Dental will allow you to move the patient to the other account; however, the insurance coverage for this patient will be cleared unless the subscriber is moved to the other account as well. This message does not stop you from continuing with the family edit process.

Figure 3-17: This message appears if the patient you are moving is attached to an insurance plan and is not the subscriber.

You will receive the message in Figure 3-18 if the patient you are trying to move is the head-of-house and there are no other members in the family. This messages informs you that the account will no longer exist after the family edit is completed. This message does not stop you from continuing with the family editing process.
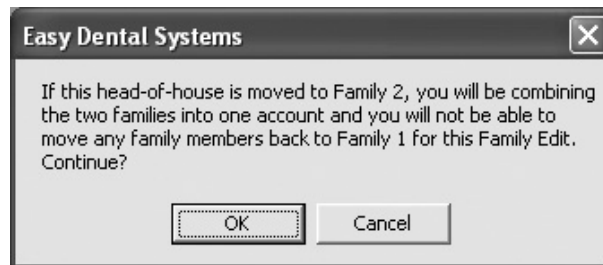
Figure 3-18: This message appears if the patient is the only patient on the account.

Although you are able to move the head-of-house to another account when there are no other family members in the family, you will not be able to move the head-of-house to another account if there are other members in the family. If you try to move the head-of-house to another family when there are other family members on the account, the message in Figure 3-19 will appear. In order to continue with the family edit process, you will need to change the head-of-house to a different family member.

Figure 3-19: This message appears if the patient is the head-of-house for an account with multiple family members.

✓ Check Your Skills 3.7

1. True or False? You must close Easy Dental on all computers in order to separate a family.

2. Name two of the four things you may have to check after a family edit has been performed.

_____

3. Name one of the three things that will stop you from performing a family edit.

_____

4. True or False? If you run into the pending claim issue when performing a family edit, you can post a $0 payment to the claim, as a workaround, move the patient, and then delete the $0 payment.

_____

Alerts and Notes

Adding Patient Alerts

Patient alerts can be attached to patients to flag accounts for certain conditions. Alerts pop up whenever certain information for that patient is accessed. Each patient can have up to ten alerts. To create a patient alert, do the following:

1. From the Patients, Accounts, or Schedule module, select a patient.

2. From the toolbar, click the 🚩 **(Patient Alerts)** icon. A screen similar to Figure 3-20 will open if a previous alert has already been added to this patient.

Patient alerts can be edited or deleted at any time from any the Patients, Accounts, and Schedule modules.

If a previous patient alert does not exist for the patient, the Create Patient Alert window (see Figure 3-21) will automatically open, allowing you to bypass step 3.
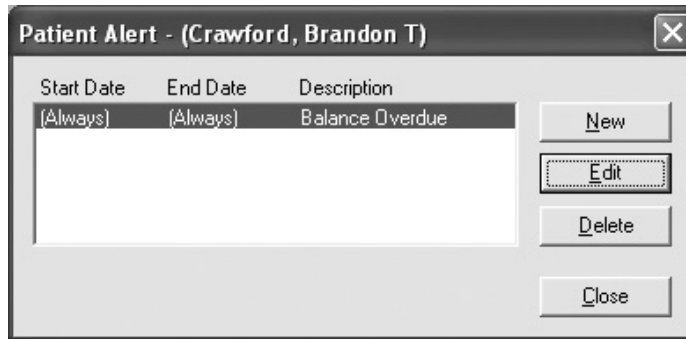
Figure 3-20: The Patient Alert window.

3. Click **New** to create a new patient alert. A screen similar to Figure 3-21 will open.
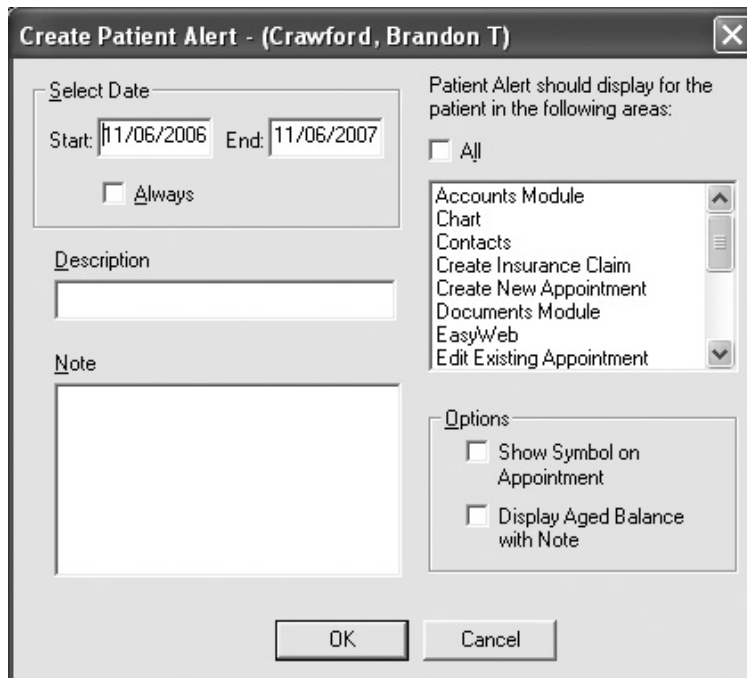
Figure 3-21: The Create Patient Alert window.

4. Enter a date range for when you would like to have the patient alert pop up or check **Always** to permanently display this alert.

5. Enter the **Description** for the patient alert (i.e., Collections, Pre-Medicate, etc.).

6. Enter a detailed description of the alert in the **Note** field.

7. Highlight the areas of Easy Dental where you would like this patient alert to pop up when accessed or check **All** to have the alert pop up when accessing any and all areas of Easy Dental.

8. Check any additional **Options** for this alert if desired. You will have two choices, **Show Symbol on Appointment** and **Display Aged Balance with Note**.

9. Click **OK** to save.

10. Click **Close** to exit. The **Patient Alert** icon will change from red to blue.

Suspending Patient Alerts

You have the option to suspend all patient alerts on a specific workstation in Preferences. When the option is checked, all patient alerts will be ignored and not pop up on this workstation. To suspend all patient alerts on a workstation, do the following:

1. From the Reports module, click ![icon] **(Maintenance) | Preferences | General Options**. A screen similar to Figure 3-22 will open.
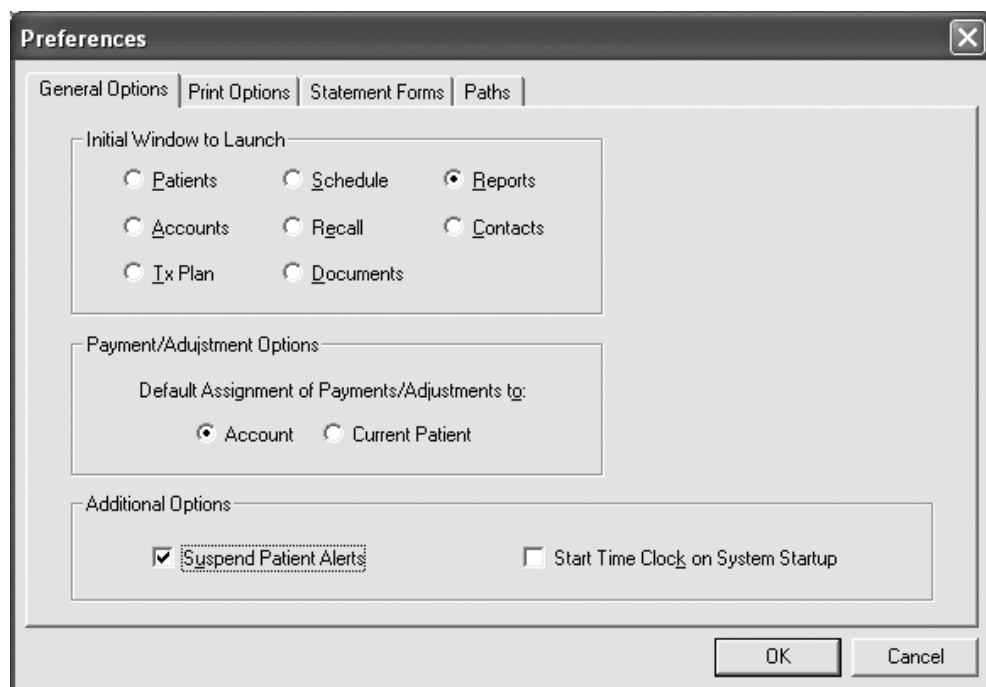
Figure 3-22: The Preferences window.

2. Check **Suspend Patient Alerts**.

3. Click **OK** to save and exit.

Adding a Patient Note

To add a note to a patient's file, do the following:

1. Open the Patients module and select your patient.

2. Double-click the **Patient Notes** field. A screen similar to Figure 3-23, on the next page, will open.

3. Click **Insert Dateline** to insert today's date and enter your note.

4. Click **OK** to save and exit.

If Show Symbol on Appointment is checked, a yellow flag will show on the patient's appointment in the Schedule module.

If Display Aged Balance with Note is checked, the family's aged balance will show at the bottom of the alert when it pops up.

When an alert pops up for a patient, you can check the option, Do Not Show this Alert Again Today. This option will affect all computers in your office for that day.

If you have passwords set up, you will need to make sure that each provider/staff member has rights to view the Patient Note.

Easy Dental has a built-in safety feature to prevent patients from accidentally seeing their patient notes. When you open the Patients module for a patient, the Patient Note field is automatically hidden. To reveal any notes you have previously written, you can either double-click the Patient Notes field or click the Open button. When you are finished viewing the note, click the Close button and the note will be hidden again.
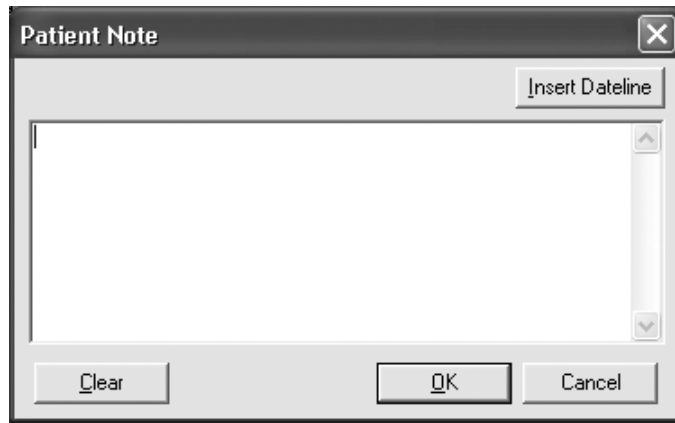
Figure 3-23: The Patient Note window.

Check Your Skills 3.8

1. Each patient can have how many patient alerts?

2. True or False? A patient alert can be edited/deleted at any time.

3. Which option will show the family's balance each time the alert appears?

4. True or False? Checking the "Do Not Show this Alert Again Today" option when an alert appears will only affect the computer it was check on.

5. A patient note was added to a patient's Patients module. However, whenever you open the Patients module, the note never shows. What must you do in order to see the patient's note?

Patient Pictures

Adding a Patient Picture (Digital Camera)

Easy Dental has the ability to house pictures in the patient's file, which can be very useful when trying to recall a patient or a face. To add a patient picture to a patient's file using a digital camera, do the following:

1. From the Patients, Chart, or Schedule module, select a patient.
2. Click the 🔲 **(Patient Picture)** icon. A screen similar to Figure 3-24 will open.

Your camera must be TWAIN-compliant in order to show as a listed source.

Figure 3-24: The Patient Picture window.

3. Click the 🔲 **(Select Source)** icon and highlight the camera that you want to use in the listed sources.
4. Click the 🔲 **(Acquire New Image)** icon and follow the directions included with your camera for taking pictures.

Adding a Patient Picture (From a File)

To add a patient picture to a patient's file by accessing an existing image on your hard drive, do the following:

1. From the Patients, Chart, or Schedule module, select a patient.
2. Click the 🔲 **(Patient Picture)** icon (see Figure 3-24).
3. Click the 🔲 **(Select Existing Image)** icon.
4. Locate and select the desired image.
5. Click **OK**.
•   If you would like to move the image from its current location to the Patpics folder in the Data folder on the server, click **Move**.

- If you would like to leave the image in its current location and create a copy to the Patpics folder, click **Copy**.

Viewing a Patient Picture

To view a patient picture once it has been attached to a patient, do the following:

1. From the Patients module, Chart module, or Schedule module, select a patient.

2. Click the ▣ **(Patient Picture)** icon and the patient's picture will be displayed as shown in Figure 3-30.
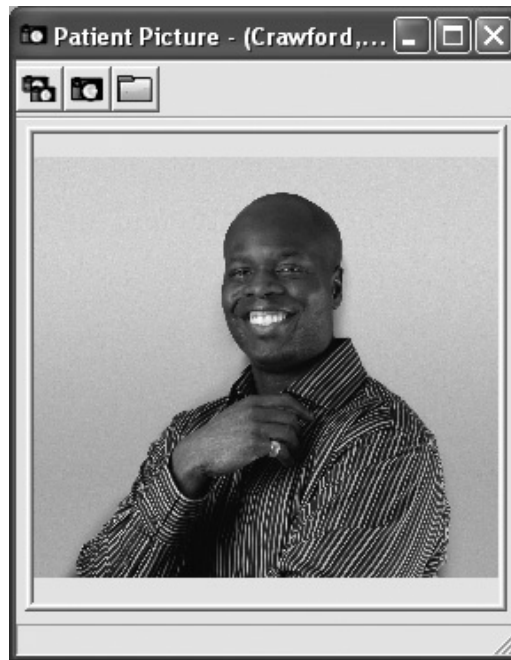
Figure 3-24: The Patient Picture window.

✓ Check Your Skills 3.9

1. If you want to use a digital camera to take patient pictures, what requirement must the camera meet in order to work with Easy Dental?

2. When adding a patient picture to someone's file using an existing file saved on the hard drive, which option will move the picture from its current location to the Patpics folder in the Data folder on the server?

3. True or False? To view a patient picture, you can click the Patient Picture icon on any module's, except the Reports module, toolbar.

Apply Your Knowledge

Switch to the Tutor Database

Before performing any of the following activities, switch to the Tutor database to ensure that your live data will not be compromised. To switch to the Tutor database, do the following:

1. Open the Reports module and click ⚒ (**Maintenance**) | **Preferences** | **Paths**.

2. Make a note of the current path in the **Database Path** field, so you can switch back to your live data after you are done with the activities.

3. Click the **Browse** button next to the **Database Path** field.

4. Browse to the location of your Tutor folder. In most cases, **C:\Program Files\ Ezdental\Tutor** will be your path.

5. Click **OK**.

6. Click **OK** to the message that appears and close Easy Dental.

Activities

1. Select Brandon Crawford in the Patients module and add the following person to his family:

   - Name: Jeremy E. Crawford
   - Preferred Name: Jerry
   - Status: Patient, Male, and Child
   - Birth date: September 3, 1987
   - Special Requests: Does not want to be contacted by phone

2. Add the following person as a new family:

   - Name: Abigail Smith
   - Preferred Name: Abby
   - Status: Patient, Female, Single
   - Birthday: March 26, 1972
   - Social Security Number: 149-26-0168
   - Address: 144 W. 400 N. Provo, UT 84601
   - Home Phone: (801) 377-0192
   - Work Phone: (801) 763-9300
   - Primary Provider: DMD1

3. Add Pre-Medicate as a medical alert.

4. Abigail (from Activity 2) is pregnant and must pre-medicate before receiving any dental treatment. Indicate this in her file.

5. Abigail works for the following company. Please assign this company to her account.

   - Name: Easy Dental Systems, Inc.
   - Address: 727 E. Utah Valley Drive, Suite 600 American Fork, UT 84003
   - Phone Number: (801) 847-7000

6. Abigail was referred to your office by a billboard ad.

7. Annette Griffin has passed away and needs to be archived in the database, so that she is not accidentally assigned to something that may be sent to her husband, Greg Griffin.

8. Kimberly Daniels is always late for her appointments and you would like a reminder indicating that she is late when scheduling any new appointments. Create a patient alert for her that will always appear whenever someone creates a new appointment or edits an existing appointment.

9. Add a note to Greg Griffin's account indicating that his wife, Annette, has passed away, so that the office staff does not ask him how she is doing.

Insurance Management

Overview

In this chapter, you will learn how to manage insurance within Easy Dental. When done correctly, this will greatly increase both your office efficiency as well as the accuracy of your insurance information. Easy Dental contains many tools to assist you and your office in maintaining all of the necessary insurance records.

Objectives

Once you have completed this chapter, you should be able to:

- Assign Primary/Secondary Insurance for a Subscriber/Dependent
- Add a New Insurance Carrier into the System
- Know How Insurance Estimates are Calculated
- Set up the Coverage Table
- Create Primary/Secondary Insurance Claims
- Create Primary/Secondary Pre-estimates
- Add/Delete Attachments to Claims
- Send Claims Electronically
- Post Insurance Payments

Assigning Insurance

Assigning Insurance to a Subscriber

To assign primary insurance to a subscriber, do the following:

1. Open the Patients module.

2. Select the patient that is the insurance subscriber.

3. Double-click the **Primary Dental Insurance** field. A screen similar to Figure 4-1 will open.

Before you add new family members, it is advantageous to assign the insurance to the head-of-house if he/she is the insurance subscriber for the family. Easy Dental will automatically attach the head-of house's insurance to all family members added to the family after the head-of-house.

The insurance subscriber and the head-of-house do not have to be the same person.

Figure 4-1: The Insurance Information window.

4. The subscriber's name should already be listed in the **Subscriber** field in the **Primary Insurance** section. If it is not, click the **Search** button and then click the **Current Patient** button.

5. Click the **Search** button next to the **Carrier** field and enter the first few letters of the carrier name in the **Enter Carrier** field to bring up a list of matching insurance carriers. A screen similar to Figure 4-2 will open.

Figure 4-2: The Select Primary Dental Insurance Plan window.

6. Use the following as a guide to verify that the correct insurance carrier is selected.

   • If the insurance carrier is listed, highlight it and click **OK**.

   • If the insurance carrier is not listed, click the **New** button. At this point, refer to the instructions for adding a new insurance carrier.

7. Verify that the **Subscriber ID** is correct.

8. Check **Release of Information**, indicating that the subscriber has signed a release form to send the necessary information to the insurance carrier.

9. If the office wishes to receive the payments from the insurance carrier, check **Assignment of Benefits**.

10. Verify that the **Relation to Subscriber** is correct.

11. Click **OK** to save and exit.

Assigning Insurance to a Dependent

To assign primary insurance to a dependent, do the following:

1. Open the Patients module.

2. Select the desired patient.

3. Double-click the **Primary Dental Insurance** field (see Figure 4-1 on the previous page).

4. Click the **Search** button next to the **Subscriber** field in the **Primary Insurance** section. A screen similar to Figure 4-3 will open.

Figure 4-3: The Select Primary Subscriber (Insured Party) window.

5. Highlight the patient's insurance subscriber.

6. Click **OK** to the return to the Insurance Information window.

7. All of the subscriber's insurance information should automatically be added to the patient in their corresponding fields.

8. Verify that the **Subscriber ID** is correct.

9. Check **Release of Information**, indicating that the subscriber has signed a release form to send the necessary information to the insurance carrier.

10. If the office wishes to receive the payments from the insurance carrier, check **Assignment of Benefits**.

11. Verify that the **Relation to Subscriber** is correct.

12. Click **OK** to save and exit.

Assigning Secondary Insurance

To assign secondary insurance to a subscriber or dependent, do the following:

1. From the Insurance Information window, click the **Search** button next to the **Subscriber** field in the **Secondary Insurance** section. A screen similar to Figure 4-4 will open.

Figure 4-4: The Select Secondary Subscriber (Insured Party) window.

2. Use the following as a guide in verifying the correct subscriber:

   - If the subscriber for the secondary insurance is not the patient that is currently selected and is listed, then do the following:

     a. Highlight the subscriber's name and click **OK**.

     b. All of the subscriber's insurance information should automatically be added to the patient in their corresponding fields.

   - If the subscriber for the secondary insurance is not the patient that is currently selected and is not listed, then you will need to refer to the instructions for assigning primary insurance to a subscriber first.

   - If the subscriber for the secondary insurance is the patient that is currently selected, then do the following:

     a. Click the **Current Patient** button and the patient's name will be listed in the **Subscriber** field.

     b. Click the **Search** button next to the **Carrier** field.

     c. Enter the first few letters of the carrier name in the **Enter Carrier** field to bring up a list of matching insurance carriers (see Figure 4-2 on page 66).

        - If the insurance carrier is listed, highlight it and click **OK**.

        - If the insurance carrier is not listed, click the **New** button. At this point, refer to the instructions for adding a new insurance carrier.

3. Verify that the **Subscriber ID** is correct.

4. Check **Release of Information**, indicating that the subscriber has signed a release form to send the necessary information to the insurance carrier.

5. If the office wishes to receive the payments from the insurance carrier, you must check **Assignment of Benefits**.

6. Verify that the **Relation to Subscriber** is correct.

7. Click **OK** to save and exit.

Check Your Skills 4.1

1. True or False? The subscriber must be the head-of-household for the account.

2. True or False? The same person can be a subscriber for both primary and secondary insurance.

3. Which option in the Insurance Information window tells Easy Dental that all insurance payments should come to the office instead of going to the patient?

4. Which button allows you to assign the same person as the primary and secondary insurance subscriber for the actual subscriber when selecting the subscriber?

Insurance Carriers

Adding a New Insurance Carrier

To add a new insurance plan into Easy Dental, do the following:

1. In the Patients module, select the desired insurance subscriber.

2. Double-click the **Primary Dental Insurance** field.

3. Verify that the **Subscriber** is correct and then click the **Search** button next to the **Carrier** field (see Figure 4-2 on page 66).

4. Click **New** located in the bottom, left corner of the window. A screen similar to 4-5 will open.

Figure 4-5: The Dental Insurance Plan Information window.

5. Enter the **Carrier Name** for the plan.

6. Enter the **Group Plan** name for the plan.

7. Enter the carrier's address and **Phone** number in the corresponding fields.

8. If desired, enter the **Contact** for the insurance carrier.

9. Enter the group number for the plan.

10. If the plan is a Union plan, enter the **Local Number**.

11. The **Last Update** field is used to keep track of the last time the insurance information was updated by the office. Easy Dental will not update this field automatically.

12. Select the month that the yearly insurance benefits renew in the **Benefits Renewal** field.

13. Select the **Claim Format**.

14. If the insured patients should be charged a fee other than your UCR, select the appropriate **Fee Schedule** in the corresponding field.

15. Payer IDs are used for electronic claims. To select a payer ID, click the **Search** button next to the **Payer ID**, highlight the insurance carrier and click **OK**. If the insurance carrier is not listed, you can manually enter the ID into the field.

16. The **Source of Payment** field has been added to help facilitate the processing of special classes of claims when sending them electronically. This is automatically selected when a payer is chosen from the Payer ID list.

17. Click **OK** to save and exit.

Check Your Skills 4.2

1. In which two modules of Easy Dental can you add a new insurance plan into the database?

2. In which field of the Dental Insurance Plan Information window, would you select the date that an insurance plan renews benefits for their patients?

Certain insurance companies require a certain claim format in order to process the information correctly. For instance, the claim format "HCFA" is the standard AMA form.

Some insurance companies do not accept claims unless they are on the required form with the information in the correct fields. This can cause delay of payment from the insurance company. If you need a specific claim format, please contact the Easy Dental Support department.

Creating Claims

Creating Primary Insurance Claims

Once you have assigned insurance to a patient, you can create insurance claims for the procedures posted in their Accounts module. To create a primary insurance claim, do the following:

1. Open the Accounts module.

2. Post the procedures to be billed to the insurance.

3. Create a claim by doing one of the following:

   - If the procedures for the claim were posted today, click the **INS** (**Create Insurance Claim**) button.

   - If the procedures were posted on another day, highlight those procedures and click the **INS** (**Create Insurance Claim**) button.

4. Close the claim and click **Send to Batch**, **Send Electronically**, or **Print** (see Figure 4-7 on page 73) depending how the claim will be sent to the insurance. A claim will be created and shown on the Accounts module as, **Prim Claim – Sent** in the **Description** column.

Creating Secondary Insurance Claims

To create a secondary insurance claim, do the following:

1. From the Accounts module, double-click the primary claim associated with the procedures that need to be sent to secondary insurance. A screen similar to Figure 4-6 will open.

Figure 4-6: The Primary Insurance Claim window.

2. Click the **Q** (**Create Secondary**) button on the claim toolbar.

3. Close the claim. A screen similar to Figure 4-7 will open.

Figure 4-7: The Insurance Claim Print window.

4. Click **Send to batch**, **Send Electronically**, or **Print**. A secondary claim will be created and shown in the Accounts module as **Sec Claim – Sent** in the **Description** column.

Creating a Primary Pre-Estimate

At times, it is often necessary to get pre-authorization from an insurance company to verify that they will indeed pay for the procedure to be completed. To create a pre-estimate, do the following:

1. Post the recommended procedures to the treatment plan.

2. In the Treatment Plans module, create an insurance pre-estimate by doing one of the following:

   - If all procedures in the patient's treatment plan need to be included on the authorization claim, click the **INS** (**Create Insurance Estimate**) button.

   - If only certain procedures in the patient's treatment plan need to be included on the authorization claim, highlight those procedures and click the **INS** (**Create Insurance Estimate**) button.

4. Close the claim and click **Send to batch**, **Send Electronically**, or **Print** (see Figure 4-7) depending how the claim will be sent to the insurance. A pre-estimate will be created and shown in the Treatment Plans module as **Prim PreEst – Sent** in the **Description** column.

Creating a Secondary Pre-Estimate

To create a secondary pre-estimate, do the following:

1. From the Treatment Plans module, double-click the primary pre-estimate associated with the procedures that need to be sent for authorization.

2. Click the **Q** (**Create Secondary**) icon on the claim toolbar.

3. Close the claim and click **Send to batch**, **Send Electronically**, or **Print** (see Figure 4-7). A pre-estimate will be created and shown on the Treatment Plans module as **Sec PreEst – Sent** in the **Description** column.

Check Your Skills 4.3

1. How do you create a claim for a procedure that was not performed today?

2. To select more than one procedure when creating a claim for procedures not performed today, which two keyboard buttons do you use?

Attachments

Claim Attachments

Sometimes it is necessary to send an attachment with a claim, so the insurance company knows why a procedure was performed. Easy Dental makes it easy to create attachments for claims and enables you to send them electronically as well. To add an attachment to a claim, do the following:

1. Double-click the appropriate claim in the Accounts module (see Figure 4-6 on page 72).

2. Double-click the **Claim Information** field. A screen similar to Figure 4-8 will open.

Figure 4-8: The Insurance Claim Information window.

3. Check the appropriate attachment option and enter the number of attachments enclosed in the corresponding **How Many** field.

4. Click **Include Attachment(s)**. A screen similar to Figure 4-9, on the next page, will open.

5. Click the desired attachment type, select the file and click **OK**. Use the following as a guide when adding attachments:

    •   **Documents** allows you to attach a document from the Documents module.

    •   **Import File** allows you to attach an existing file from a specified location. You can only import .txt and .rtf files.
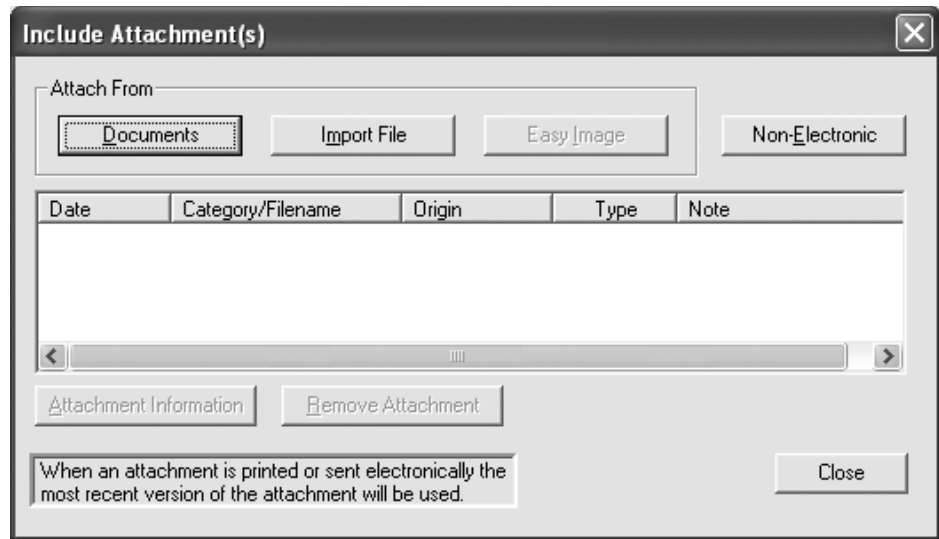
Figure 4-9: The Include Attachment(s) window.

- **Easy Image** allows you to attach any images in the Easy Image program. Easy Image must be installed for this option to be available.

6. If desired, you can add a note to the attachments as well. This can be done for both non-electronic and electronic attachments.

- To add a note for electronic attachments, do the following:

  a. Highlight the desired attachment and click the **Attachment Information** button.

  b. Enter the desired note in the **Attachment Note** field.

  c. Select the appropriate **Attachment Type**.

  d. Click **OK** to save and exit.

- To add a note for non-electronic attachments, do the following:

  a. Click the **Non-Electronic** button.

  b. Enter the desired note in the **Attachment Note** field.

  c. Select the appropriate **Attachment Type**.

  d. Select the appropriate **Transmission Code**.

  e. If desired, enter the **Control Number**.

  f. Click **OK** to save and exit.

7. Click **Close** to return to the Insurance Claim Information window.

8. Click **OK** to return to the claim.

9. Click **Print** from the toolbar.

10. Click either **Send to batch**, **Send Electronically**, or **Print** (see Figure 4-7 on page 73).

11. Select **File | Exit** to close.

Deleting Claim Attachments

At times, it may be necessary to delete a claim attachment. To delete an attachment from a claim, do the following:

1. Open the Accounts module.

2. Double-click the claim that has the attachment.

3. Double-click the **Claim Information** field (see Figure 4-9).

4. Click the **Include Attachment(s)** button.

5. In the Include Attachment(s) window, highlight the attachment to be deleted and click **Remove Attachment**.

Check Your Skills 4.4

1. True or False? You can send claim attachments electronically.

2. Name two of the four ways you can import attachments to attach them to a claim.

3. Where would you add a note for a claim attachment?

4. True or False? Once you attach an attachment to a claim, you can never delete it.

5. True or False? You can attach a Microsoft Word document to a claim.

Topic 5

Electronic Claims

Sending Electronic Claims

To send claims electronically to the insurance carrier, do the following:

1. Make sure that the desired claims are in the Batch Processor in the Reports module.

2. Click the 🄴 **(Electronic Claim Submission)** icon on the Reports module's toolbar. A screen similar to Figure 4-10 will open.
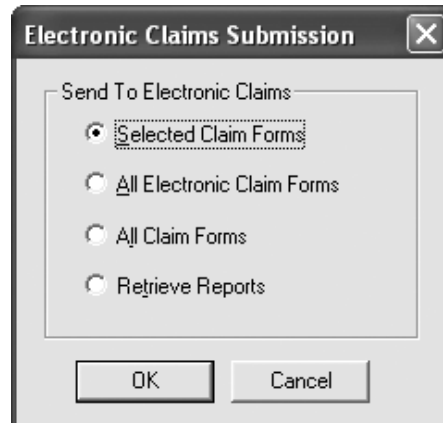
Figure 4-10: The Electronic Claims Submission window.

3. Mark the desired **Send to Electronic Claims** option.

4. Click **OK** and allow the transmission to complete all of its processes.

5. Once completed, an **eClaims Validation Report** and an **eTrans Transmission Report** should show in the Batch Processor.

   • The **eClaims Validation Report** shows you missing information on a claim. This informs you of claims rejected due to the missing information.

   • The **eTrans Transmission Report** shows you rejected claims.

Insurance Estimates

Insurance Estimate Overview

In Easy Dental, insurance estimates are based on different factors. The first factor is the actual fee being posted for the procedure, which is based on the fee schedule assigned to the patient. The second factor is the way the Coverage Table is setup. The third factor is whether there is any information entered in the Payment Table. The final factor is whether the patient has met any of their deductibles and/or their maximum. Each of these factors will be discussed individually in this topic.

Fee Schedules

A fee schedule allows you to enter the dollar amount a patient will be charged for a specific procedure. There are three different ways a fee schedule can be attached to a patient: through their Patients module, the insurance plan they are attached to, or their primary provider.

Easy Dental will first check the patient's Patients module for a fee schedule. If there is no fee schedule attached, it will check the insurance plan. If the insurance plan does not have a fee schedule attached to it, Easy Dental will use the fee schedule attached to the patient's primary provider.

Because the provider is at the bottom of the fee schedule hierarchy, there must be a fee schedule attached to the provider in the Practice Resource Setup.

You can have up to 999 fee schedules.

The Coverage Table

The Coverage Table is used to enter how much an insurance plan will cover for a particular procedure or group of procedures. You can also enter any deductibles relevant to the insurance plan. To set up the Coverage Table for an insurance plan, do the following:

1. From the Insurance Information window, click the **Cov Table** button. A screen similar to Figure 4-11 will open.

Figure 4-11: The Insurance Coverage window.

2. Enter the correct **Deductible** amounts in their corresponding fields.

3. Enter the **Annual Maximum Benefit** in its corresponding field.

4. In the lower-right corner of the window, click the **Search** button next to **Select Table**, highlight the table that is the most similar to the coverage table used by the insurance company, and click **OK**.

5. If you want the patient portion of a balance to be figured by subtracting the insurance estimate from the total balance (i.e., total balance – insurance estimate = patient portion), then leave **Co-Payment Calculations for Ins Portion** unchecked.

6. Click **OK** to save changes.

7. Click **OK** to the message that appears (see Figure 4-12).
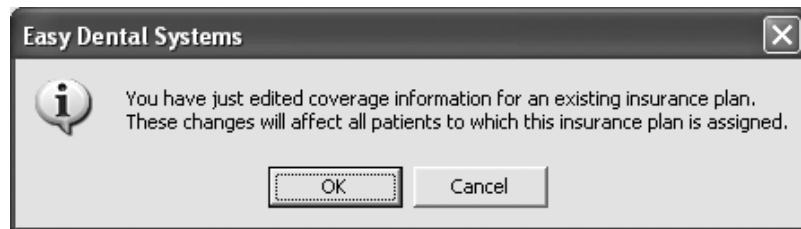
Figure 4-12: This message appears when you edit the Coverage Table for an insurance plan.

Each insurance plan has their own Coverage Table. If you make a change to the coverage for one patient, that change will affect all patients attached to the plan as indicated in the message in Figure 4-12. However, the update will not affect other insurance plans.

For more information on how the Payment Table is updated when posting an insurance payment, see the Payments topic in this chapter.

If a procedure is in the Coverage Table and the Payment Table, the amount in the Payment Table will override the Coverage Table.

The Payment Table

The Payment Table allows you to enter the dollar amount the insurance plan will pay for specific procedures. To access the Payment Table, do the following:

1. From the Insurance Information window, click the **Pmt Table** button. A screen similar to Figure 4-13 will open.
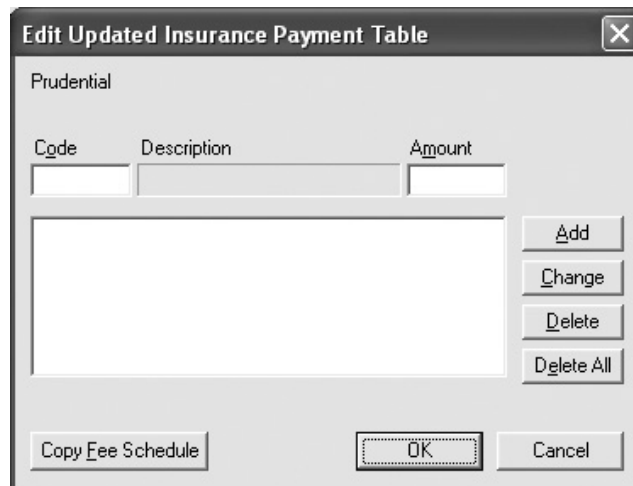
Figure 4-13: The Edit Updated Insurance Payment Table window.

As payments come back from the insurance, you may choose to update the insurance coverage. Easy Dental stores the actual payment information in the Payment Table. Therefore, you can enter procedures into the Payment Table manually or you can have Easy Dental do it for you when you post a payment to a claim. To enter a procedure manually, do the following:

1. Open the Payment Table.

2. Enter the procedure code in the **Code** field and the amount the insurance will pay for the procedure in the **Amount** field.

3. Click **Add**.

4. Click **OK** to save.

Patient Benefits

Benefits play a big part in insurance estimates. If the patient has used most of their maximum and/or has not met their deductible, then their insurance estimate may not be as high as it normally would be. If an insurance estimate seems low, it is a good practice to check how much of the maximum the patient has used and whether the patient has met their deductible. To check the patient's benefits, do the following:

1. Open the Patients module and select a patient.

2. In the **Primary Dental Insurance** area of the Patients module, Easy Dental will list the patient's coverage and deductible and will show how much the patient has used/met (see Figure 4-14).

Figure 4-14: The Patients module.

Many times patients will come to the practice after some or all of their insurance benefits are used. In order for Easy Dental to calculate insurance estimates properly, this information needs to entered into the patient's account. To modify benefits used for a patient, do the following:

1. In the Accounts module, double-click a claim (see Figure 4-6 on page 72).

2. Double-click the **Patient/Insurance Information** area of the claim. A screen similar to Figure 4-15, on the next page, will appear.

3. Enter the amount of the deductible that has been paid in the proper deductible field(s).

4. Enter the amount of benefits used for the patient in the **Individual Benefits Applied** field.

5. Click **OK** to save.

Figure 4-15: The Patient/Insurance Information window.

How Insurance Estimates are Calculated

When a procedure is posted, Easy Dental goes through a process to determine what the estimated insurance portion will be. Follow the flow chart in Figure 4-16 to determine how much Easy Dental will assign as the estimated insurance portion.
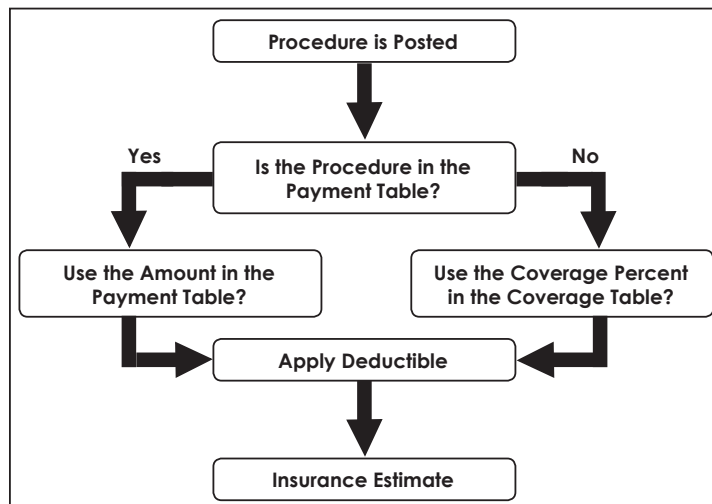
Figure 4-16: A flow chart illustrating how Easy Dental calculates estimates.

When Easy Dental applies the deductible to a procedure, it uses two formulas to calculate the insurance portion.

- If the procedure is not in the Payment Table, Easy Dental uses the following formula: **Insurance Portion = (Procedure Fee - Deductible) x Coverage Table Percent**

- If the procedure is in the Payment Table, Easy Dental uses the following formula:
  Insurance Portion = Payment Table Amount - (Deductible x Coverage Table Percent)

For example, if the patient is having an amalgam done for $250 with a $50 deductible and the insurance will cover 80% of the cost, the insurance portion can be figured out using the first formula and will be:

- Insurance Portion = (250 - 50) x .80 = $160

Whereas, if the patient is having an amalgam done for the same $250 with a $50 deductible and the insurance will cover 80% of the cost, but the Payment Table has the insurance paying $180 for the procedure, the insurance portion can be figured out using the second formula and will be:

- Insurance Portion = 180 - (50 x .80) = $140

To figure out the patient portion, subtract the insurance portion from the procedure fee.

Check Your Skills 4.6

1. True or False? Editing the Coverage Table for an insurance plan will only affect the patient selected in the Patients module.

2. Name two of the four things that affect insurance estimates.

3. True or False? The Coverage Table overrides the Payment Table.

4. Name one of the two ways you can update the Payment Table.

5. If the patient is having a crown done for $600 with a $50 deductible and the insurance will cover 60% of the cost, what will the patient portion be?

Topic 7

Payments

Posting an Insurance Payment

In order for an insurance claim to be considered received or no longer pending, an insurance payment must be posted to it. To post an insurance payment in Easy Dental when there is a claim present on the Accounts module, do the following:

1. Open the Accounts module and select the desired patient.

2. Double-click the appropriate claim.

3. Click the ▭ (**Enter Payment**) and select one of the following two choices:

   • If you select **Itemize by Procedure**, do the following: (A screen similar to Figure 4-17 will open.)

Figure 4-17: The Insurance Coverage Update window.

   a. Enter the **Amount Paid** for the procedure highlighted on the claim.

   b. If you want to update the Payment Table, mark **Yes**.

   c. Click **OK** and repeat steps a - b for all procedures attached to the current claim.

   d. Once the amount for each procedure has been entered, a screen similar to Figure 4-18 will open.

Figure 4-18: The Total Insurance Payment window.

Easy Dental has taken advantage of artificial intelligence to make insurance estimations as accurate as possible. If payments return different than what Easy Dental estimates, Easy Dental learns from those inaccuracies. The next time that specific procedure is completed for patients with that insurance coverage, Easy Dental will know the correct estimate amount. This is done by updating the Payment Table when receiving insurance payments.

The Payment Table overrides the Coverage Table and could potentially cause Easy Dental to estimate the insurance portion much lower or higher than it should be. Therefore, be cautious when updating the Payment Table.

If the insurance is paying less than they normally would because the deductible is included in the payment, do not update the Payment Table.

If the insurance is paying less than they normally would because the patient's maximum is being met by the payment, do not update the Payment Table.

e. Enter the check and bank/branch numbers in their corresponding fields.

f. Enter any deductible amounts being applied to this claim in the fields provided.

g. Click **OK/Post** to post the payment.

• If you select **Total Payment Only**, do the following (see Figure 4-15):

a. Enter the check and bank/branch numbers in their corresponding fields.

b. Highlight the provider the payment is for and click **Edit**.

c. Enter the **Amount Paid** and click **OK**.

d. Enter any deductible amounts being applied to this claim in the fields provided.

e. Click **OK/Post** to post the payment.

4. Click the ▦ **(Exit)** icon to return to the Accounts module. Once a payment has been posted, the **Description** for the claim will show as, **Prim** or **Sec Claim – Rec'd**.

Insurance Payments for Claims Not in Easy Dental

If your office has converted balances from a different system, you will be receiving insurance payments for claims that are not in Easy Dental. To post a payment for an insurance claim not in Easy Dental, do the following:

1. Open the Reports module and click ▦ **(Practice Setup) | Definitions | Payment Types**.

2. Create a payment type called **Pre-EZD Ins Payment**.

3. Open the Accounts module.

4. Enter the payment as a guarantor payment, using the **Pre-EZD Ins Payment** type.

*Eventually the Pre-EZD Ins Payment type will not be used. However, to avoid creating errors with totals and an unstable database, do **NOT** delete it!*

Guarantor payments are explained in greater detail in the Accounts module chapter.

Check Your Skills 4.6

1. Which option would you select if you wanted to post how much the insurance carrier paid for each procedure attached to the claim?

2. In which circumstance should you not update the Payment Table when posting an insurance payment?

3. True or False? There is a way to indicate whether a deductible was applied to a claim.

4. If the insurance carrier sends you the total payment for a claim without an itemized list of payments for each procedure, which option would you select to post that payment?

Apply Your Knowledge

Switch to the Tutor Database

Before performing any of the following activities, switch to the Tutor database to ensure that your live data will not be compromised. To switch to the Tutor database, do the following:

1. Open the Reports module and click **(Maintenance) | Preferences | Paths**.
2. Make a note of the current path in the **Database Path** field, so you can switch back to your live data after you are done with the activities.
3. Click the **Browse** button next to the **Database Path** field.
4. Browse to the location of your Tutor folder. In most cases, **C:\Program Files\ Ezdental\Tutor** will be your path.
5. Click **OK**.
6. Click **OK** to the message that appears and close Easy Dental.

If you are not sure where your Tutor folder is located, ask your trainer for help or call Easy Dental Support at (800) 824-6375.

Activities

1. Abigail Smith is the subscriber for her insurance. Assign Ameritas as her primary dental insurance.
2. Assign Prudential as Abigail's secondary dental insurance.
3. Add the following insurance carrier into the database:
   - Name: Brokers National
   - Street Address: PO Box 1028, Houston, TX 77251
   - Phone Number: (800) 653-4427
   - Contact: Robert Spartan
   - Group Number: BR11022
   - Benefit Renewal: September
4. In Brandon Crawford's Accounts module, highlight all the procedures performed on 07/07/2000 and create a claim for those procedures. Next, post a payment for the claim using the Itemize by Procedure feature. If Easy Dental prompts you to create a secondary claim, create it.
5. For Metropolitan, change the coverage for crowns from 50% to 80%. (Brandon Crawford is attached to this plan.)

Chart Module

Overview

The Chart module is a complete chair-side tool used to simplify record-keeping while offering the newest technical innovations in dentistry. The Chart module provides a quick and easy way to enter existing, recommended, and completed treatments or conditions.

Objectives

Once you have completed this chapter, you should be able to:

- Set up Procedure and Category Buttons
- Set up Chart Colors
- Post Existing, Recommended, and Completed Treatment or Conditions
- Edit/Delete Existing Procedures
- Use the Clinical Notes and Procedure Notes
- Change Dentition
- Print the Different Reports in the Chart

Chart • 87

Chart Module Basics

Terminology

Procedure Buttons: These are 24 buttons that can be assigned a procedure code or explosion code used in posting work quickly to the Chart.

Category Buttons: Each of the 14 category buttons contain specific procedure codes that correspond with the button title. Each category can be customized to only contain the codes that are needed in your office.

Procedure Notes: These are notes attached to procedures, which describe treatment in patient-specific detail.

Progress Notes: This area of the Chart module shows the description of the procedures posted to the patient's chart.

Navigating the Chart Module

Understanding the basic navigation of the Chart module is crucial to the successful implementation of paperless charting in your office. Figure 5-1 illustrates the different areas of the Chart module.

The procedure buttons make it easy to quickly post procedures performed on a daily basis.

The status buttons allow you to post treatment with the desired status quickly and efficiently.

The Graphic Chart makes it easy to see existing, recommended and completed treatment.
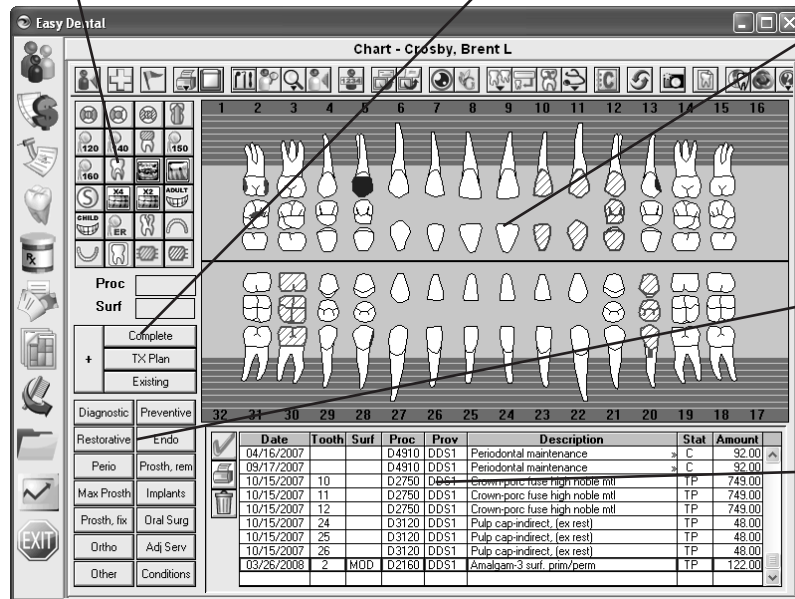
The category buttons can be customized to include only the procedures you use most often.

The Progress Notes show you the details of each procedure, such as the provider, amount, etc.

Figure 5-1: The Chart module.

Chart Module Setup

Procedure Button Setup

Procedure buttons can be very useful when posting work in the Chart module. They should be reserved for procedures your office performs on a daily basis, other than procedures done on a continuing basis, such as prophylaxis, bitewings, etc., as they will be taken care of with the recall system. To set up your procedure buttons, do the following:

1. Open the Chart module.

2. Click the 🎰 **(Setup Procedure Buttons)** icon. The screen in Figure 5-2 will open.
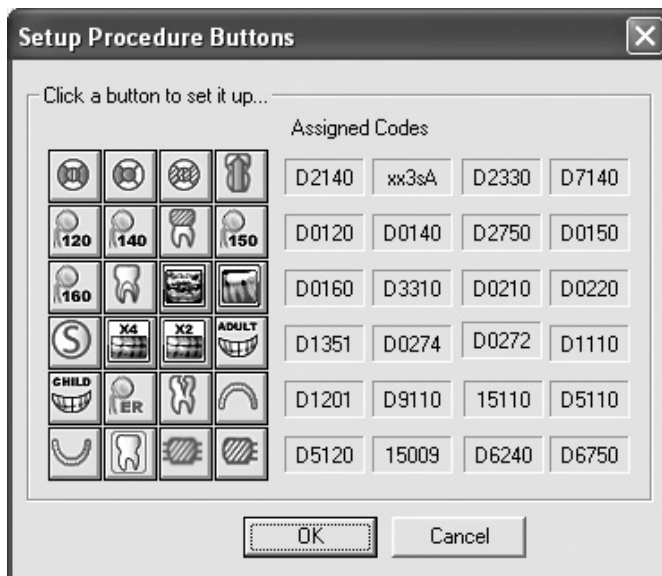
Figure 5-2: The Setup Procedure Buttons window.

3. Click the button you want to change. The screen in Figure 5-3 will open.
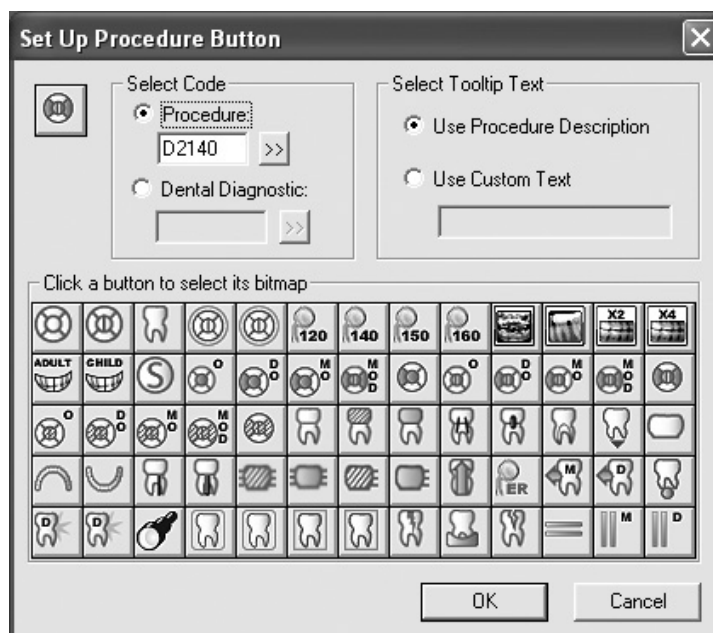
Figure 5-3: The Set Up Procedure Button window.

Procedure buttons are workstation-specific. You must set them up on each workstation.

There is a limit of 24 procedure buttons that can be set up on each workstation.
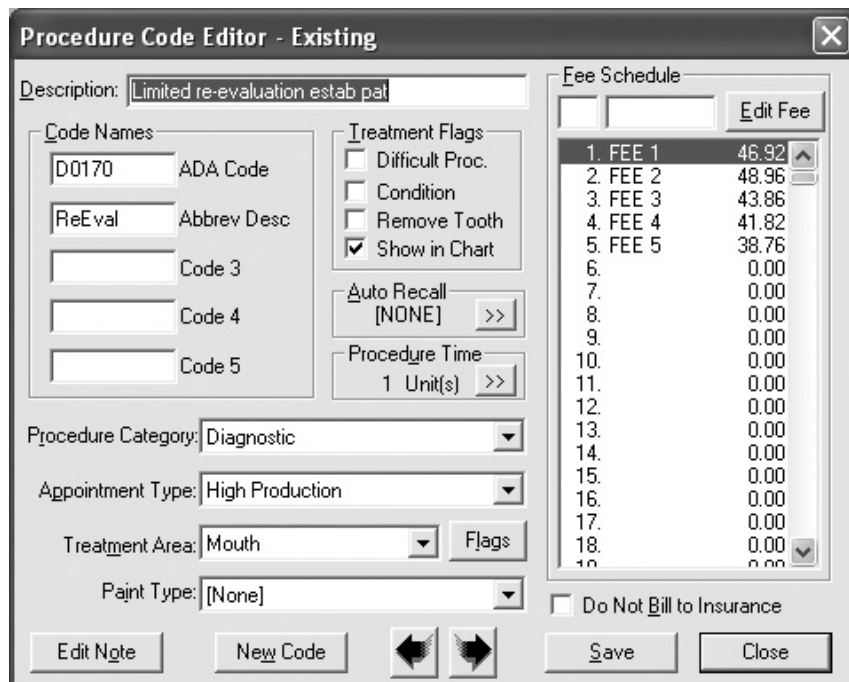
Easy Dental is pre-programmed with treatment flags set up for each procedure code. When posting a procedure, these flags will determine whether a procedure code is changed to reflect the correct posting conditions (i.e., primary/permanent, number of surfaces, anterior/posterior, etc.). For example, if you post a MOD amalgam on a tooth using the one-surface amalgam procedure code, Easy Dental will actually post the amalgam with the procedure code for three surfaces not the code for one surface.

Chart • 89

4. In the **Select Code** field, enter the code you wish to assign to this button. You can also click the **Search** button next to **Procedure** to search for the code.

5. If you would like a different picture for the button, click the bitmap at the bottom of the window that best matches the code you are assigning to this button.

6. Click **OK**.

7. Repeat steps 3 - 6 for any other button(s) you wish to change.

8. Click **OK** to save and exit.

Category Button Setup

Category buttons allow you to view fewer codes than are actually in the system when posting work. You can choose which codes to be included in the category. To modify the content of a category button, do the following:

1. Open the Reports module.

2. Click ![icon] **(Practice Setup) | Procedure Code Setup**.

3. Highlight the **Procedure Code Category** that contains the code you wish to add/remove.

4. Highlight the code in the list and click **Edit**. A screen similar to Figure 5-4 will open.

Figure 5-4: The Procedure Code Editor - Existing window.

5. In the Procedure Code Editor window, do one of the following:

   • To add a code to the category button, check **Show in Chart**.

   • To remove a code from the category button, uncheck **Show in Chart**.

6. Click **Close**.

7. Click **Yes** to save changes.

8. Repeat steps 3 - 7 for any other procedure codes.

9. Click **Close** to return to the Reports module.

Chart Color Setup

The colors in the Chart module, including the Graphic Chart display and paint colors, can be customized to match the needs of your office. To customize the Chart module colors, do the following:

1.   Open the Chart module.
2.   Click 🔍 **(View Options) | Set Chart Colors**. The screen in Figure 5-5 will open.
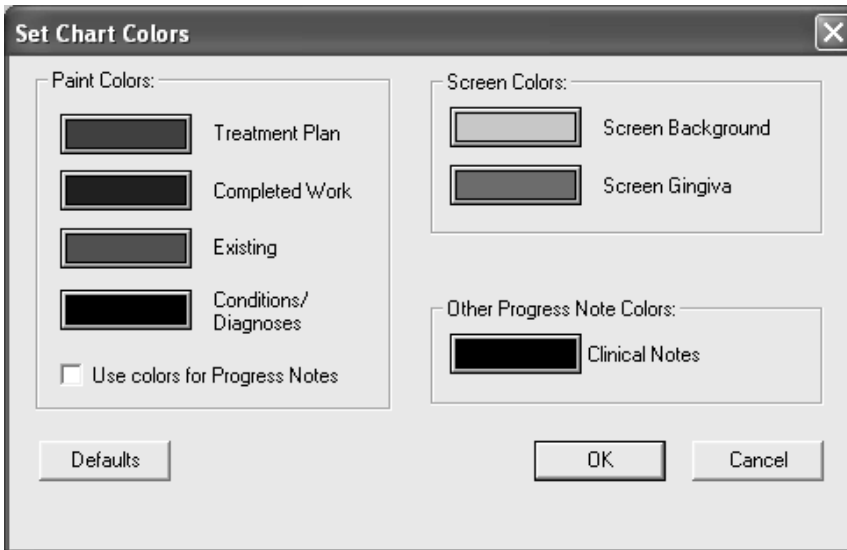
Figure 5-5: The Set Chart Colors window.

3.   Click the colored box next to **Treatment Plan** and select the desired color.
4.   Click **OK**.
5.   Repeat step 3 - 4 for all other **Paint Colors**.
6.   Click **OK** to save and exit.

Check Your Skills 5.2

1.   How many procedure buttons can you have set up on one workstation?

2.   From which module do you customize the procedures shown in the different category buttons? Which option allows you to add or remove the procedure from the corresponding category button?

Chart • 91

Posting Work

Posting Work in the Chart

To post work to the Chart, do the following:

1. Open the Chart module.

2. Select your patient.

3. Highlight the tooth/teeth that you want to post work on.

4. To choose the procedure that you want to post to the tooth/teeth, do one of the following:

   • Click the procedure button that corresponds to the code you want to post.

   • Click the category button that contains the code you want to post, highlight the **Code**, and click **OK**.

   • Click the ▥ (**All Procedures**) icon, highlight the **Category** containing the code you want to post, highlight the code from the **Procedure Code List**, and click **OK**.

   • Click the ▨ (**Explosion Codes**) icon, highlight the **Code**, and click **OK**.

5. Click the desired status button for this procedure, using the following as a guide:

   • **Complete**: This is completed work.

   • **Tx Plan (Treatment Plan)**: This is work recommended by the provider.

   • **Existing**: This is work done by another provider or by the current provider, but is only now being entered into the Chart. For example, work completed before using Easy Dental should be posted as existing, so that the patient is not charged for the work again.

6. Enter any additional information using the following as a guide:

   • **Surface(s):** If you selected a procedure that requires surfaces (i.e., amalgam, composite, etc.), Easy Dental will prompt you to select the applicable surfaces (see Figure 5-6). To select surfaces, do the following:
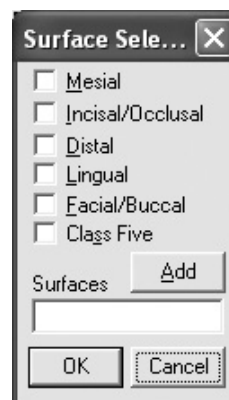
Figure 5-6: The Surface Select window.

   a. Check the desired surface(s).

   b. Click **OK**.

Easy Dental is pre-programmed with treatment flags set up for each procedure code. When posting a procedure, these flags will determine whether a procedure code is changed to reflect the correct posting conditions (i.e., primary/permanent, number of surfaces, anterior/posterior, etc.). For example, if you post a MOD amalgam on a tooth using the one-surface amalgam procedure code, Easy Dental will actually post the amalgam with the procedure code for three surfaces not the code for one surface.

If you use a procedure button to post work, step 6 will come before step 5 in the Posting Work in the Chart topic.

If you want to post a condition, click the Conditions category button, highlight the code, and click any of the status buttons. The condition will then be posted to the Chart.

- **Quadrant(s):** If you selected a procedure that requires quadrants (i.e., perio scale and root planing, etc.), Easy Dental will prompt you to select the applicable surface (see Figure 5-7). To select quadrants, do the following:

Figure 5-7: The Quadrant Select window.

   a.   Check the desired quadrant(s).

   b.   Click **OK**.

7.   The procedure will be posted to the Graphic Chart as well as the Progress Notes.

Completing Treatment Plans

If you do not complete a treatment-planned procedure, but instead re-post the work as Completed, the work will show as both treatment-planned and completed. You should **NOT** complete treatment-planned work by double-clicking the procedure and changing the status to Completed. This will change the procedure to completed, but it will not reflect the change in date. To complete a treatment-planned procedure from the Chart module, do the following:

1.   Open the Chart module.

2.   Select your patient.

3.   In the Progress Notes, highlight the desired procedure(s).

4.   Click the ☑ **(Set Complete)** button on the left side of the Progress Notes.

To select more than one procedure at a time, hold the right mouse button or the Ctrl key and click each procedure to be completed with the left mouse button.

Using the Auto-State Button

The Auto-State button is the plus sign next to the status buttons. Using this button can save you a lot of time by not having to choose the status of a procedure each time it is posted. To use the Auto-State button, do the following:

1.   Open the Chart module.

2.   Select your patient.

3.   Click the ⋅ **(Auto-State)** button. The button should change to a minus sign (⋅), indicating the button has been activated.

4.   By default, the **TX Plan** button will be depressed, indicating that it is the desired status to be given to the procedures posted. To change to a different status, click the corresponding button.

5.   Highlight the tooth/teeth you want to post work on.

6.   To choose the procedure you want to post to the tooth/teeth, do one of the following:

   •   Click the procedure button that corresponds to the code you want to post.

   •   Click the category button that contains the code you want to post, highlight the code, and click **OK**.

Chart • 93

- Click the 🔳 **(All Procedures)** icon, highlight the **Category** containing the code you want to post, highlight the code from the **Procedure Code List**, and click **OK**.
- Click the 🔲 **(Explosion Codes)** icon, highlight the **Code**, and click **OK**.

7. Repeat steps 5 - 6 for all procedures to be posted with the same status.

8. When you are finished entering treatment, click once on the **Auto-State** button to de-activate it.

Deleting Work NOT Completed

At times, it may be necessary to delete procedures from the patient's chart. To delete treatment-planned work, existing work, and/or conditions, do the following:

1. From the Progress Notes in the Chart module, highlight the procedure(s) you wish to delete.

2. Click the 🗑 **(Delete)** button on the left side of the Progress Notes. The message in Figure 5-8 will appear.
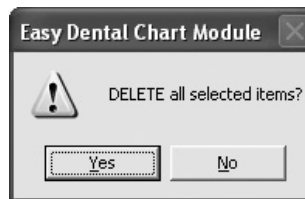
Figure 5-8: A delete confirmation window.

3. Click **Yes** to delete the selected procedures.

Deleting Completed Work

To delete completed procedures, do the following:

1. From the Progress Notes in the Chart module, double-click the procedure you wish to delete and one of the following will happen:

- If you see Figure 5-9, click the **Delete** button and click **Yes** to delete the procedure.
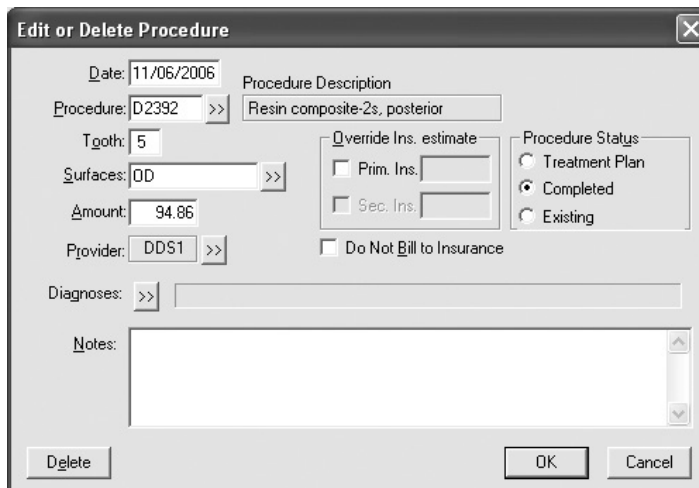
Figure 5-9: The Edit or Delete Procedure window.

Before you can delete a completed procedure, you must ensure any claims linked to the procedure have been deleted. If there is a claim linked to the procedure, where the Delete button would normally be (see Figure 5-8), the following note will appear, "Procedures attached to an Insurance Claim may not be changed until the Claim has been deleted."

If you discover a mistake in a patient's chart after the procedure has been moved to history, you can no longer delete the procedure. If you wish to make changes, you must invalidate the procedure. Invalidating a procedure removes it from showing on the Graphic Chart, but it does not remove the charge from the Accounts module.

• If you see Figure 5-10, mark **Invalidate Procedure** and click **OK**.

Figure 5-10: The Validate/Invalidate Procedure in History window.

Editing a Procedure in the Chart

If you discover you have made a mistake when charting a procedure (treatment-planned, completed, or existing), then do the following to edit it:

1. Double-click the procedure from the Progress Notes in the Chart module (see Figure 5-9).

2. Make the desired changes.

3. Click **OK** to save and exit.

Changing Dentition

At times, it may be necessary to change dentition on a patient's Chart to reflect their primary/permanent teeth. To change dentition, do the following:

1. Open the Chart module.

2. Select your patient.

3. Click the **(Primary/Permanent)** icon.

4. To change all of the teeth, choose **Change All**.

Procedures in history cannot be edited.

If you only need to change certain teeth to show mixed dentition in the patient's mouth, then first highlight the tooth/ teeth to be changed and click Primary/Permanent | Change Selected.

Chart • 95

✓ Check Your Skills 5.3

1. True or False? It is okay to complete a procedure by double-clicking it and changing the status from Treatment Plan to Completed.

2. Which status would you use for work performed by the doctor in the office, but completed before Easy Dental was installed?

3. True or False? You can delete completed work using the Delete button at the top of the Progress Notes panel.

4. True or False? Procedures in history can be edited at any time.

5. If you need to show that a patient has mixed dentition, which Primary/Permanent option would you use?

Clinical Notes

Clinical Notes

Clinical Notes are free-form notes that can be entered any time during an exam. Clinical Notes are designed to offer a method of entering notes for an exam that are not necessarily specific to a procedure. To add a Clinical Note, do the following:

1. Open the Chart module.

2. Select your patient.

3. Click the 🄲 (**Clinical Notes**) icon. The screen in Figure 5-11 will open.
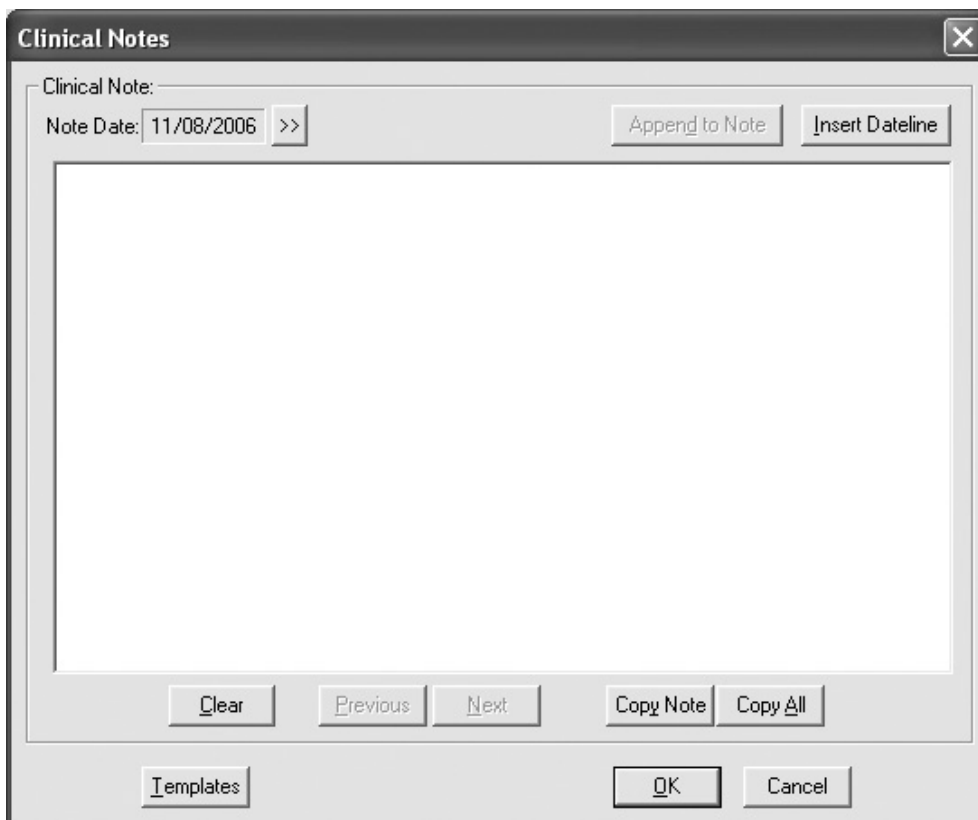
Figure 5-11: The Clinical Notes window.

4. Click **Insert Dateline** to insert today's date and enter your note. There is a limit of 4,000 characters in the **Clinical Note** field.

5. Click **OK** to save and exit.

Appending a Clinical Note in History

To append a note to a Clinical Note in history, do the following:

1. Open the Chart module.

2. Select your patient.

3. Click the 🄲 (**Clinical Notes**) icon (see Figure 5-11).

4. To choose the note you wish to append, do one of the following:

Each note has a limit of 4,000 characters.

Once a Clinical Note is in history, it cannot be edited or deleted. However, a note may be add an addendum to a Clinical Note in history.

Chart • 97

- If you know the date of the note, click the **Search** button next to the **Note Date** field, find the date and click **OK**.
- Click the **Previous** or **Next** button to find the desired note.

5. Click the **Append to Note** button. The screen in Figure 5-12 will open.
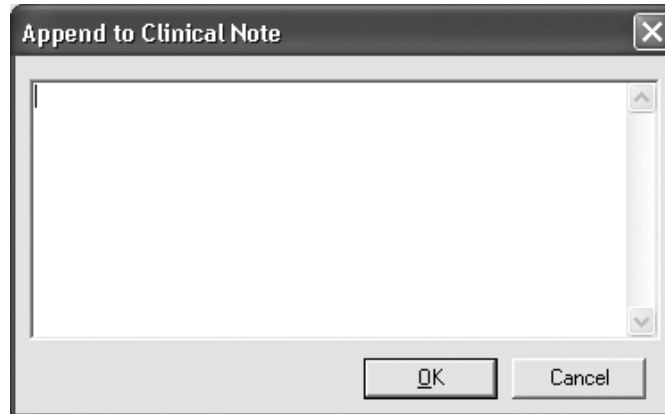
Figure 5-12: The Append to Clinical Note window.

6. Click **Insert Dateline** to insert today's date and enter your note.
7. Click **OK** and **Yes** to the message that appears to append the note.
8. Click **OK** to save and exit.

Once you click Yes to append a note in history, the appended portion of the note is automatically moved into history and can no longer be edited or deleted.

Check Your Skills 5.4

1. Up to how many characters can be entered in one Clinical Note?

2. If a Clinical Note is in history, which option can you use to add something to that note?

Printing the Dental Chart

To print the Dental Chart, do the following:

1. Click ![icon] **(Print Dental Chart) | Dental Chart**. The screen in Figure 5-13 will open.
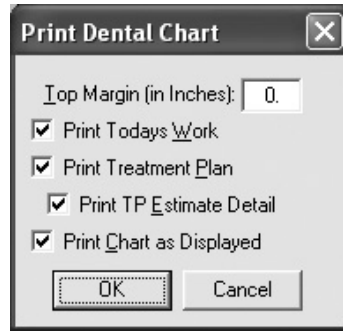
Figure 5-13: The Print Dental Chart window.

2. Check the items you wish to print and click **OK**.

Printing the Dental Chart with Progress Notes

To print the Chart with the Progress Notes, do the following:

1. Click ![icon] **(Print Dental Chart) | Progress Notes with Chart** or click the ![icon] **(Print Progress Notes with Chart)** button located to the right of the Progress Notes. The screen in Figure 5-14 will open.
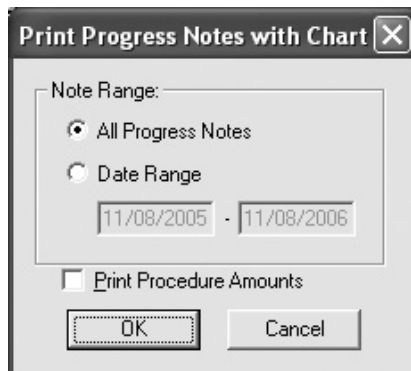
Figure 5-14: The Print Progress Notes with Chart window.

2. Mark the desired **Note Range**.
3. Click **OK**.

Chart • 99

Check Your Skills 5.5

1. True or False? Both icons used to print in the Chart module will print the same report.

_____

2. When printing the Progress Notes with the Chart module, which option allows you to choose a certain date range?

_____

Apply Your Knowledge

Switch to the Tutor Database

Before performing any of the following activities, switch to the Tutor database to ensure that your live data will not be compromised. To switch to the Tutor database, do the following:

1. Open the Reports module and click ⚒ (**Maintenance) | Preferences | Paths**.

2. Make a note of the current path in the **Database Path** field, so you can switch back to your live data after you are done with the activities.

3. Click the **Browse** button next to the **Database Path** field.

4. Browse to the location of your Tutor folder. In most cases, **C:\Program Files\ Ezdental\Tutor** will be your path.

5. Click **OK**.

6. Click **OK** to the message that appears and close Easy Dental.

Activities

1. Replace the following existing procedure buttons with the following new buttons: (Choose a bitmap that corresponds the best with the new procedure.)

   • Replace D0120 (second row, second column) with D5211 (maxillary partial denture).

   • Replace D0140 (second row, third column) with D5212 (mandibular partial denture).

2. At the moment, within the Endodontics category button, D3430 is showing within the list. Remove this procedure from showing in this category.

3. At the moment, D1320 is not showing in the Preventive category button. Add this procedure, so that it shows in this category.

4. Abigail Smith came into the office today complaining that one of her teeth was hurting. After the doctor looked at her tooth, he noticed that she has decay on the Occlusal and Lingual surfaces. He suggests that he fill that tooth while she is in the office today. Post the decay and the completed resin in her chart for tooth 18.

5. Please post the following existing treatment done for Abigail:

   • Tooth 1, 16, 17, and 32: Extracted

   • Tooth 14: OD Amalgam

   • Tooth 15: MO Amalgam

   • Tooth 2: O Amalgam

   • Tooth 30: Missing for more than a year (condition)

6. Please post the following treatment that Abigail needs done:

   • Tooth 20 and 21: MOD Resin

   • Tooth 30: Implant

   • Tooth 29 - 31: Bridge

7. Brandon Crawford came into the office today and had his root canal completed. Indicate this on his chart.

Chart • 101

8. Marla and Mary Reese are children and need to have their charts show that they have primary dentition instead of permanent. Indicate this in their charts.

9. Enter Clinical Note for Abigail Smith. (At this point, it does not matter what you enter.)

10. Print a Dental Chart for Abigail.

11. Print the Progress Notes with Abigail's chart.

Estimator

Overview

The Estimator is a module that allows you to present a treatment plan to a patient. The Estimator will let you show what the insurance will cover on the procedures in the patient's treatment plan. You can also set an order to which the treatment plans should be completed and organize them into alternate treatment plan options.

Objectives

Once you have completed this chapter, you should be able to:

- Change the View Options
- Set Orders to Treatment Plans
- Set up the Display Options for the Treatment Plans
- Update Treatment Plan Fees

Topic 1

Estimator Basics

Navigating the Estimator

Understanding the basic navigation of the Estimator is crucial to the successful implementation of paperless treatment plan options. Figure 6-1 illustrates the different areas of the Estimator module.

This area of the Estimator displays important information regarding each treatment-planned procedure, similar to the Progress Notes.

This area of the Estimator shows the totals for the patient's treatment plan, including the actual cost and estimated totals.

This area of the Estimator displays important information about the patient's and their family's insurance benefits.

Ord	Th	Surf	Description	Fee	Pat	Pri Ins	Sec Ins	Pre-Est
?	1		D7140:Extract,erupted th/exposed rt	499.80	99.96	399.84	0.00	
?	15		D2750:Crown-porc fuse high noble mtl	500.00	250.00	250.00	0.00	
?	15		D3330:Root canal therapy - molar	425.00	85.00	340.00	0.00	
?	16		D7140:Extract,erupted th/exposed rt	499.80	99.96	399.84	0.00	
?	17		D7140:Extract,erupted th/exposed rt	499.80	349.48	150.32	0.00	
?	29		D6750:Retainer crn-porc fused-hi nob	510.00	510.00	0.00	0.00	
?	30		D6240:Pontic-porcelain fused to hnob	510.00	510.00	0.00	0.00	
?	30		D6010:Surg place implant: endosteal	1020.00	1020.00	0.00	0.00	
?	30		D6059:Abtmt supp porc fused to hi-nob	400.86	400.86	0.00	0.00	
?	30		D2750:Crown-porc fuse high noble mtl	510.00	510.00	0.00	0.00	
?	31		D6750:Retainer crn-porc fused-hi nob	510.00	510.00	0.00	0.00	
?	32		D7140:Extract,erupted th/exposed rt	499.80	499.80	0.00	0.00	

Treatment Plan Total	6,385.06
Estimated Deductible to be Applied	50.00
Estimated Insurance Payment	1,500.00
Estimated Patient's Portion	4,885.06

Dental Insurance Benefits		Patient		Family	
		Primary	Secondary	Primary	Secondary
Annual Plan Benefits		1,500.00	0.00		0.00
Paid Benefits YTD		0.00	0.00	0.00	0.00
Pending Insurance Est. YTD		0.00	0.00	0.00	0.00
Est. Benefits Remaining YTD		1,500.00	0.00		0.00
Benefits Expire		12/31/06		12/31/06	
Deductible Owed YTD	Standard	50.00	0.00	150.00	0.00
	Preventive	0.00	0.00	0.00	0.00
	Other	0.00	0.00	0.00	0.00

Primary Dental Insurance: Metropolitan

NOTE: All insurance estimates are based only on the patient's Dental insurance plans

Figure 6-1: The Estimator.

View Options

Estimator View Options

The Estimator will display all of the treatment-planned procedures for that patient as well as the insurance estimates and benefits. The Estimator is useful for showing patients exactly how much they will have to pay. The View icon allows you to add or remove certain columns from the display. This is useful if you would like to only present certain information to the patient. To show/hide information from displaying in the Estimator do the following:

1. Open the Estimator by clicking the 📇 **(Estimator)** icon from the Chart or Accounts module's toolbar.

2. Click the 🔍 **(View)** icon.

3. Choose the desired option to hide/display the information by using the following as a guide:

   - **Procedure Progress Notes** will display any notes entered in the Notes field for each of the treatment-planned procedures.

   - **Fee** will display the fee for each of the treatment-planned procedures.

   - **Patient Portion** will display the estimated patient portion for each of the treatment-planned procedures.

   - **Primary Dental Insurance Estimate** will display the estimated primary insurance portion for each of the treatment-planned procedures.

   - **Secondary Dental Insurance Estimate** will display the estimated secondary insurance portion for each of the treatment-planned procedures.

   - **Treatment Plan Totals** will display the Treatment Plan Total below the Progress Notes area of the Estimator.

   - **Treatment Plan Estimated Totals** will display the Estimated Deductible to be Applied, Estimated Insurance Payment, and Estimated Patient's Portion totals below the Progress Notes area of the Estimator.

   - **Family Dental Insurance Benefits** will display the family benefits for the patient's insurance plan.

   - **Dental Insurance Benefits** will display the patient's benefits for their insurance plan.

Treatment Plan Orders

Easy Dental gives you the ability to quickly sequence treatment-planned procedures in the order each will be completed. Once ordered, the different groups can be displayed or hidden to help patients estimate their portion for each visit. It also can prevent overwhelming your patients by not displaying all treatment-planned procedures at once. To set the order of a treatment-planned procedure, do the following:

1. Open the Estimator by clicking the 📇 **(Estimator)** icon from the Chart or Accounts module's toolbar.

2. Highlight the procedure(s) to which you want to give an order.

3. Click the ☰ **(Set Order)** icon and choose the desired order for the selected procedures. The order will display in the **Ord** column and the list will sort numerically, starting with procedures that do not have an order.

For more information on how insurance estimates are calculated, see the Insurance Estimates topic in Chapter 4: Insurance Management.

The deductible is not figured into any one procedure, so it will not be reflected in the patient portion in the Pat column. However, the Estimated Insurance Payment and Estimated Patient's Portion totals do calculate the deduction.

If the Estimated Insurance Payment is higher than the Annual Plan Benefits, click View | Use Dental Plan Maximums.

To select more than one procedure at a time, hold the right mouse button or the Ctrl key and click each procedure to be completed with the left mouse button.

Using the Set Order feature, you can assign an order to a procedure, or group of procedures, and then assign the appropriate letter to an alternate treatment plan. For example, if the treatment plan order is 1, then the alternate plan could be 2 or A. This way you can present a treatment plan in a way that the patient feels that they have more than one option.

Displaying/Hiding Treatment Plans

Once you have assigned an order to treatment-planned procedures, Easy Dental will allow you to display procedures of certain orders and hide the rest. The Treatment Plan Total and the estimated totals will only calculate the amounts for the treatment-planned procedures currently being displayed. To show/hide treatment-planned procedures assigned to a specific order, do the following:

1. Open the Estimator by clicking the ![Estimator icon] **(Estimator)** icon from the Chart or Accounts module's toolbar.

2. Click the ![Display Orders icon] **(Display Orders)** icon. The screen in Figure 6-2 will appear.
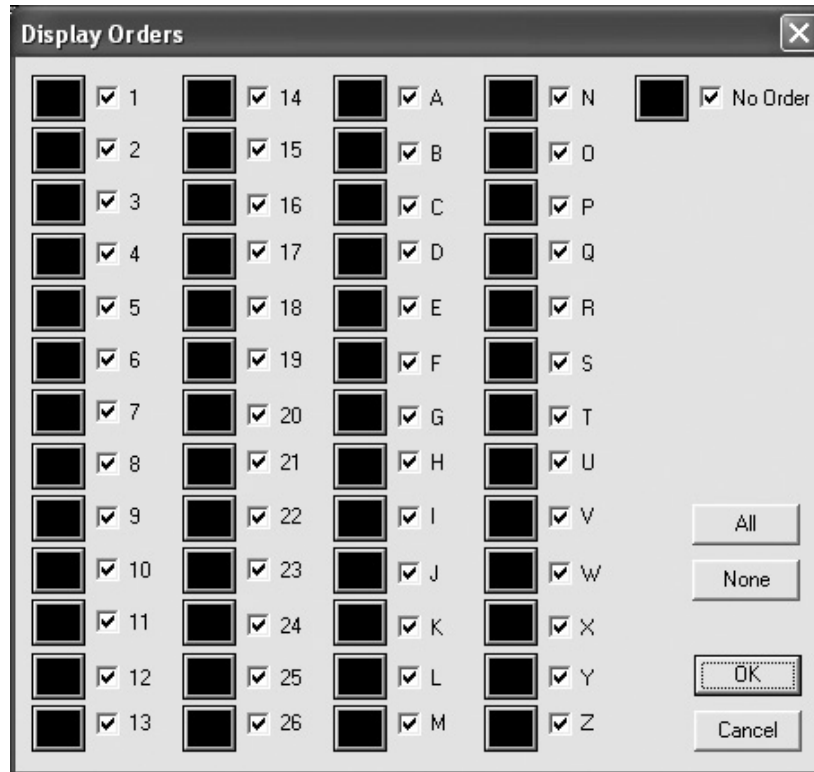
Figure 6-2: The Display Orders window.

3. Click **None** to deselect all the orders and then check only the orders you want to display.

4. Click **OK**.

Order Colors

You can change the colors for each order, making it easier to see treatment-planned procedures in a specific order. To change the order colors, do the following:

1. Open the Estimator by clicking the ![Estimator icon] **(Estimator)** icon from the Chart or Accounts module's toolbar.

2. Click the ![Display Orders icon] **(Display Orders)** icon (see Figure 6-2).

3. Click the square to the left of the order that you want to change.

4. Select the desired color and click **OK**.

5. Repeat steps 3 - 4 for all orders.

6. Click **OK** to return to the Estimator.

Check Your Skills 6.2

1. True or False? Because the deductible is applied to the first procedure listed in the Progress Notes area of the Estimator, the patient portion will be higher than normal in the Pat column.

2. True or False? You can hide treatment-planned procedures that have not been assigned an order yet.

3. If the Estimated Insurance Payment is higher than the Annual Plan Benefits, which option would you choose to fix the estimate?

Fee Schedule Changes

Updating Treatment Plan Fees

When you raise the fees in your office, Easy Dental will not automatically update the fees of any treatment-planned procedures already in the system. Easy Dental assumes that you still want to honor the original price quoted to the patient. However, Easy Dental has the ability to update treatment plan fees based on meeting certain criteria. To update treatment plan fees, do the following:

1. Open the Estimator by clicking the **(Estimator)** icon from the Chart or Accounts module's toolbar.

2. Click the **(Update Fees)** icon. The screen in Figure 6-3 will appear.
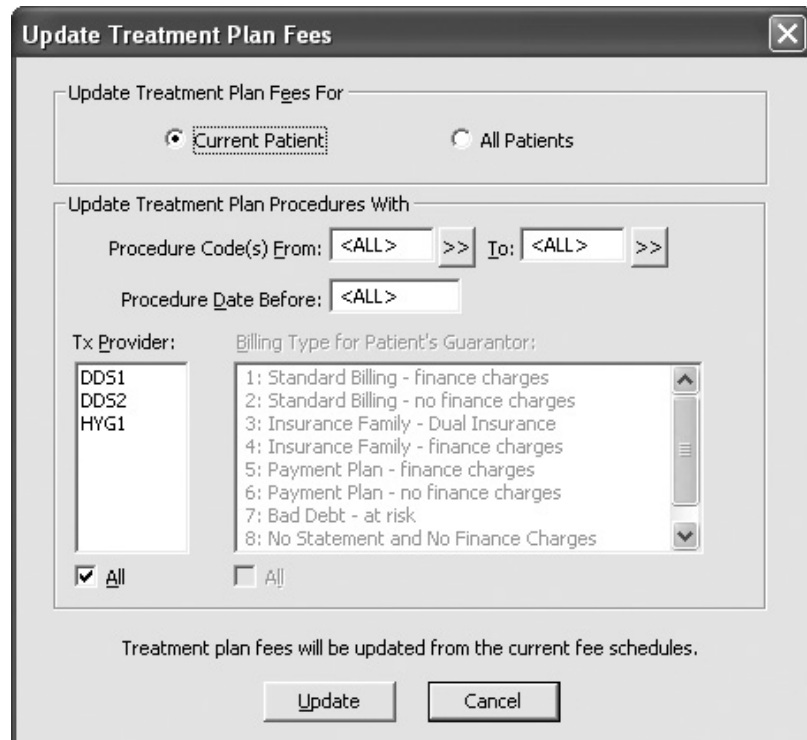
Figure 6-3: The Update Treatment Plan Fees window.

3. In the **Update Treatment Plan Fees for** field, mark **Current Patient** to update the treatment plan fees for only the patient selected or mark **All Patients** to update the treatment plan fees for all patients in the database.

4. If desired, select the desired procedure code range to update only those fees for treatment-planned procedures within the range selected.

5. If desired, enter a **Procedure Date Before** to update only those fees for treatment-planned procedures that were treatment-planned before the date entered.

6. Highlight the desired **Tx Provider** or check **All** to update only those fees for treatment-planned procedures attached to the selected provider(s).

7. If **All Patients** was marked in step 3, highlight the desired billing type(s) or check **All** to update only those fees for patients with the selected billing type(s).

8. Click **Update** to update the fees.

Reports

Default Notes

You can set up a default note to print on all treatment plans. To enter a default note, do the following:

1. Open the Estimator by clicking the ![icon] **(Estimator)** icon from the Chart or Accounts module's toolbar.

2. Click the ![icon] **(Default Note for Printing)** icon. The screen in Figure 6-4 will appear.
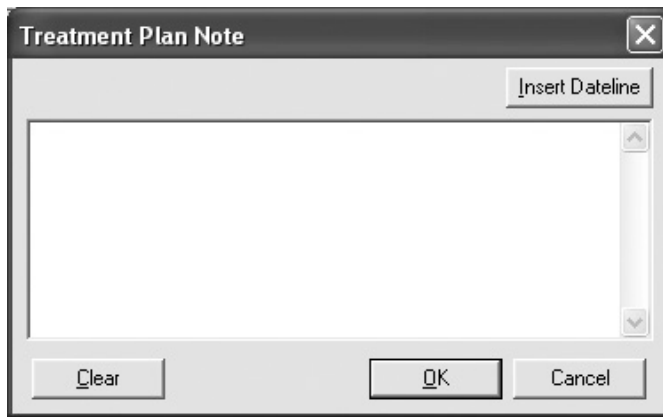
Figure 6-4: The Treatment Plan Note window.

3. If desired, click **Insert Dateline** to insert today's date.

4. Enter the desired note.

5. Click **OK** to save and exit.

Printing the Estimator

To print the Estimator, do the following:

1. Open the Estimator by clicking the ![icon] **(Estimator)** icon from the Chart or Accounts module's toolbar.

2. Click the ![icon] **(Print)** icon. The screen in Figure 6-5 will appear.
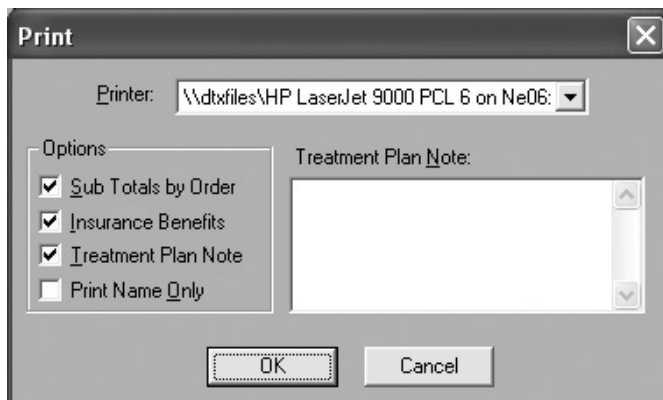
Figure 6-5: The Print window.

Because there is not an area to sign the print out of the Estimator, you can create a signature line in the default note using the Underscore (_) key on your keyboard. You may have to tweak it until it prints out just right.

3. Select the **Printer** from the list provided.

4. Check **Sub Totals by Order** to print a sub-total for each order in the treatment plan.

5. Check **Insurance Benefits** to print the patient's and their family's insurance benefits.

6. Check **Treatment Plan Note** to print the default note.

7. Check **Print Name Only** to exclude the patient's birth date, chart number, and social security number on the print out.

8. Make any changes to the default note for this patient only in the **Treatment Plan Note** field.

9. Click **OK** to print.

Apply Your Knowledge

Switch to the Tutor Database

Before performing any of the following activities, switch to the Tutor database to ensure that your live data will not be compromised. To switch to the Tutor database, do the following:

1. Open the Reports module and click ![icon] (**Maintenance**) | **Preferences** | **Paths**.

2. Make a note of the current path in the **Database Path** field, so you can switch back to your live data after you are done with the activities.

3. Click the **Browse** button next to the **Database Path** field.

4. Browse to the location of your Tutor folder. In most cases, **C:\Program Files\ Ezdental\Tutor** will be your path.

5. Click **OK**.

6. Click **OK** to the message that appears and close Easy Dental.

If you are not sure where your Tutor folder is located, ask your trainer for help or call Easy Dental Support at (800) 824-6375.

Activities

1. Select Abigail Smith in the Chart module and open the Estimator.

2. Make sure that Easy Dental will use insurance maximums when calculating insurance and patient estimates.

3. Set the order for Abigail's MOD resins as order 1, the procedures for the implant as order A, and the procedures for the bridge as order B.

4. Enter a default note for all treatment plans. (At this point, it does not matter what you enter.)

5. Print the Estimator, making sure that the default note will print, a sub-total for each order, and only the patient's name displays on the print out.

Notes

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Accounts Module

Overview

The Accounts module is the key to all transactions posted to the patient's/family's account. For each transaction, the Accounts module lists the date, patient or guarantor name, tooth number, procedure code or transaction type, description, amount, provider, and it will indicate whether insurance has or has not been billed. In the Accounts module, both completed and treatment-planned procedures are recorded. You will also create insurance claims and post all payments. The Accounts module will also display valuable information, such as the aged balance, last guarantor payment amount and date, last insurance payment amount and date, last billing date, and the patient/insurance portions of the balance.

Objectives

Once you have completed this chapter, you should be able to:

- Set up the Colors in the Accounts Module
- Set up and Use the Easy Checkout Option
- Enter Procedures
- Enter Payments
- Post a Credit Card Payment with PowerPay
- Enter Adjustments
- Apply/Delete Finance Charges
- Close the Month

Topic 1

Accounts Module Basics

Terminology

Guarantor: The person in the account who is responsible for all charges on the account.

Balance Forward: The balance amount still owed from the previous 30 days.

History Transactions: Transactions over 30 days old or since the last month end; they cannot be edited or deleted.

Running Balance: This is a per transaction accounting of the balance.

Credit Adjustment: This is an adjustment that decreases the balance.

Debit Adjustment: This is an adjustment that increases the balance.

Month End Update: This is a utility run at the end of the month that moves current transactions into history and creates a balance forward.

Navigating the Accounts Module

Understanding the basic navigation of the Accounts module is crucial to the successful operation of all the transactions entered in the Accounts module. Figure 7-1 illustrates the different areas of the Accounts module.

This area shows important transaction details, such as the date, patient name, description, etc.

This area shows the family balance and the aging that each portion of the balance is in.

This is the Today's Charges area. It shows the balance and estimated patient and insurance portions of the transaction's charged today.

This area shows payment agreement information, such as monthly payment amount, etc.

This area shows important details about the family's billing, such as last payment amount , etc.

Figure 7-1: The Accounts module.

Accounts Module Setup

Accounts Color Setup

The Accounts module colors help you quickly and easily recognize the different transaction types on a patient's account. To set up colors, do the following:

1. Click 🖺 **(Setup) | Set Accounts/Tx Plans Colors**. A screen similar to Figure 7-2 will open.
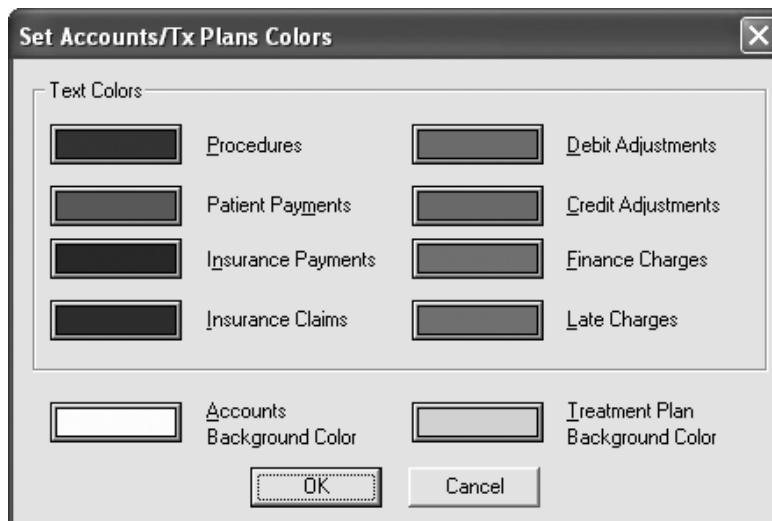
Figure 7-2: The Set Accounts/TX Plans Colors window.

2. Click the colored box next to **Procedures** and select the color you wish to assign this transaction type.

3. Click **OK**.

4. Repeat steps 2-3 for all other transaction types.

5. Click **OK** to save and exit.

Easy Checkout Options

The Easy Checkout button is a great tool that will save you time when checking out a patient. This button allows you to create a claim, post a payment, and print a walkout statement all with the click of a button. Before you can use this button, however, you must first set it up. To set up the Easy Checkout button, do the following:

1. Click 🖺 **(Setup) | Easy Checkout Options**. A screen similar to Figure 7-3, on the next page, will open.

2. If you would like to be prompted to enter a payment, check **Enter Account Payment**.

3. If you would like an insurance claim created, then check **Create Insurance Claim** and then mark **Batch** or **Print**.

4. If you would like a walkout statement created, check **Walkout** and then mark **Batch** or **Print**.

5. Click **OK** to save and exit.
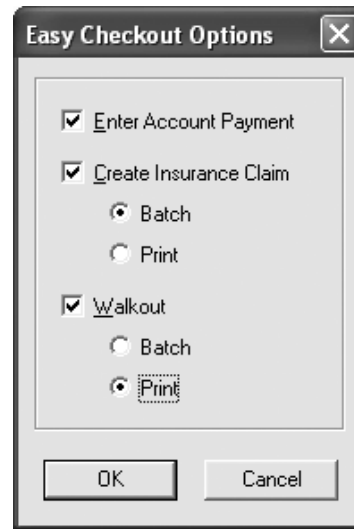
Figure 7-3: The Easy Checkout Options window.

✓ Check Your Skills 7.2

1. True or False? The Easy Checkout button allows you to create a claim, enter a payment, and print a walkout all at once.

Balance/Billing Types

Adding an Initial Balance

Initial balances are used to transfer a family's existing balance to the Easy Dental system. To add an initial balance to an account, do the following:

1. In the Accounts module, select the desired family.

2. Click ⬡ the **(Billing/Payment Plan)** icon. A screen similar to Figure 7-4 will open.

Figure 7-4: The Billing/Payment Plan Information window.

3. Enter the desired dollar amount in each of the aging fields (i.e., 0-30, 31-60, etc.).

4. If you would like the Accounts module to show the correct **Last Payment Amount** and **Last Payment Date**, enter the correct information in the corresponding fields.

5. Click **OK** to save and exit.

Modifying Billing Types

Billing types can be modified to fit the needs of your practice. If you like the billing types that are standard with Easy Dental, then you do not need to make modifications and you can skip to the next section. However, if you wish to modify the list, you should do the modifications as part of your initial setup. To set up billing types, do the following:

1. Open the Reports module.

2. Click ⬛ **(Practice Setup) | Definitions | Billing Types**. A screen similar to Figure 7-5, on the next page, will open.

If the patient has had any activity posted in the Chart or Accounts module, including treatment plans and primary/ permanent teeth changes, the option to enter an initial balance will not be available.

Before changing a billing type, make sure it has not been assigned to any patients. If you change a billing type in the system, it will change the type for everyone with that specific type.

Practice Definitions

Definition Type

Billing Types

Definition Text

Standard Billing - finance charges

Id	Description
1	Standard Billing - finance charges
2	Standard Billing - no finance charges
3	Insurance Family - Dual Insurance
4	Insurance Family - finance charges
5	Payment Plan - finance charges
6	Payment Plan - no finance charges
7	Bad Debt - at risk
8	No Statement and No Finance Charges

Add

Change

Delete

Close
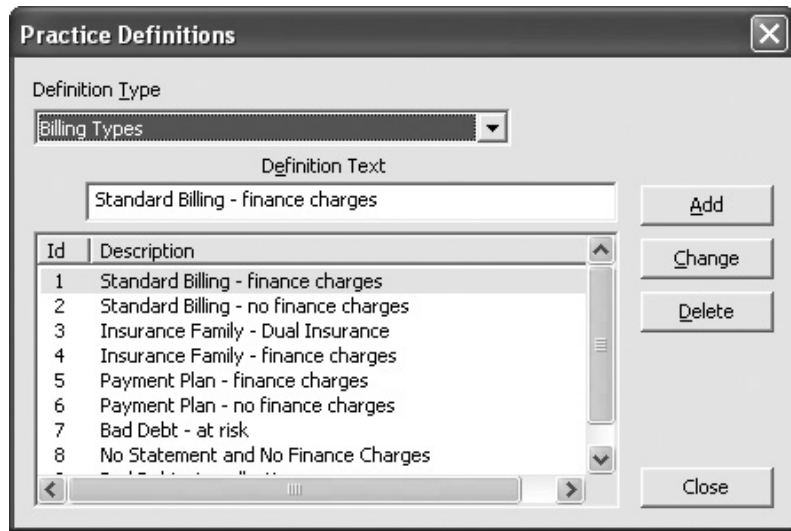
Figure 7-5: The Practice Definitions window.

3. From the list of billing types, highlight the one that you wish to change.

4. In the **Definition Text** field, erase the old type and replace it with one you wish to add.

5. Click the **Change** button on the right side of the window.

6. Click **Yes** to the message that appears to save the changes to the new billing type.

7. Click **Close** to exit.

Assigning a Billing Type to a Family

To assign a billing type to a family, do the following:

1. From the Accounts module, select the head-of-house for the family that you wish to assign a billing type to.

2. Click the ▧ (**Billing/Payment Plan**) icon. A screen similar to Figure 7-4, on the previous page, will open.

3. Highlight the **Billing Type** you wish to assign to this family.

4. Click **OK** to save and exit.

✓ Check Your Skills 7.3

1. What two reasons might cause you to not be able to enter or modify an initial balance?

2. When should you modify your billing types?

3. True or False? You can assign a different billing type to each family member.

Transactions

Entering Procedures

Most of the time, you will post procedures through the Chart module or by completing an appointment. However, every now and then, you may need to post a procedure in the Accounts module. To post procedures in the Accounts module, do the following:

1. Open the Accounts module.

2. Select a patient.

3. Click ⊞ **(Enter Procedure)**. The screen in Figure 7-6 will open.

Figure 7-6: The Enter Procedure(s) window.

4. In the **Procedure** field, enter the code or click the **Search** button to search for the code.

5. Additional information may need to be entered for the procedure code, such as:

   • **Tooth:** If a tooth number is required, Easy Dental will automatically prompt for it. Enter the number in the field provided.

   • **Surfaces:** If a surface is required, Easy Dental will automatically prompt for it. Click the **Search** button, check the desired surface(s) and click **OK**.

   • **Quadrant:** If a quadrant is required, Easy Dental will automatically prompt for it. Mark the desired quadrant.

6. When the code is listed in the **Procedure** field, the **Amount** is automatically entered, but can be changed if needed.

7. Select the **Provider**.

8. Click **Add** to add the procedure code to the **Procedure List**.

9. Repeat steps 4 - 8 for any other procedures.

10. Click the **OK/Post** button to post the procedure(s) to the Accounts module.

For more information on fee schedule functionality, see the Insurance Estimates topic in Chapter 4: Insurance Management.

Entering Patient Payments

To enter a payment made by the patient and/or guarantor, do the following:

1. Open the Accounts module.

2. Select a patient.

3. Click ![icon] (**Enter Payment**). The screen in Figure 7-7 will open.
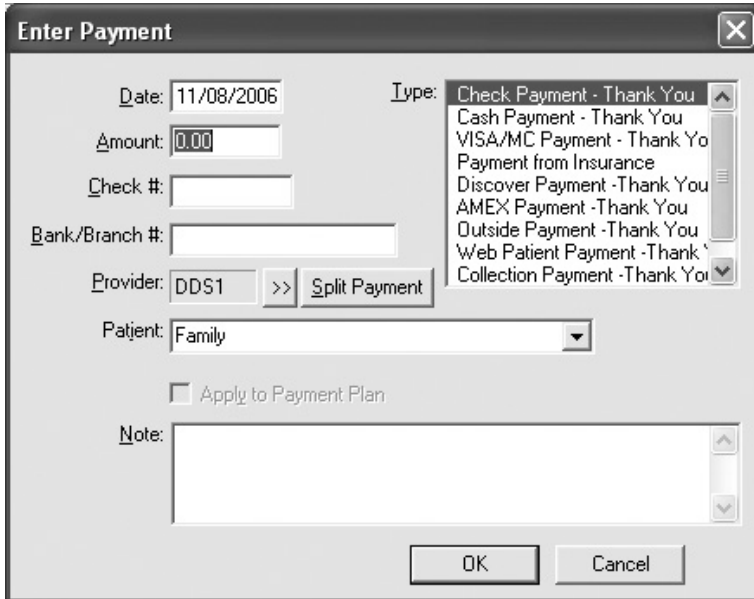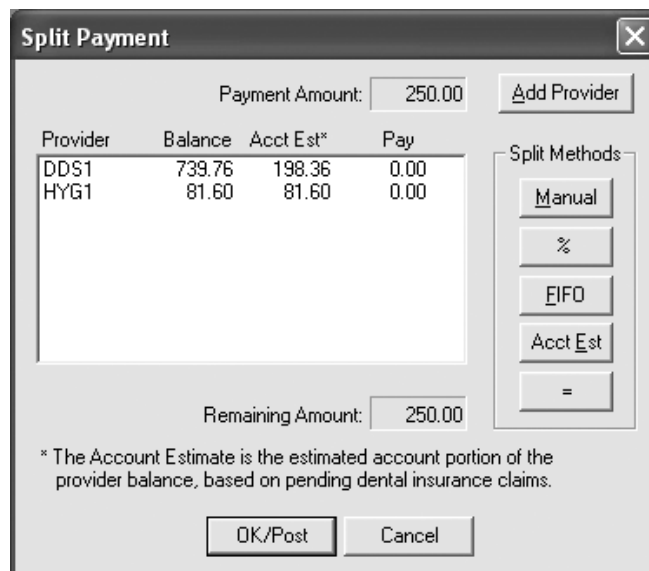
Figure 7-7: The Enter Payment window.

4. Enter the **Amount** of the payment.

5. Highlight the payment **Type**.

6. Enter the check and bank/branch numbers in their corresponding fields if applicable.

7. Select the **Provider**.

8. Select the **Patient** for which this payment is for.

9. You may also split the payment between two or more providers. To do this, click **Split Payment** and choose from the following options: (A screen similar to Figure 7-8 will open.)

Figure 7-8: The Split Payment window.

- **Manual** allows you to enter the specific amount or portion of the payment to each provider.

- **%** splits the payment on a percentage basis among each of the providers with a balance.

- **FIFO** (First In First Out) directs the payment toward the oldest balance on the account.

- **Guar Est** (Guarantor Estimate) calculates according to guarantor estimates, disregarding the deductible.

- **=** splits the payment equally between the providers listed.

10. Click **OK/Post** to post the payment.

Posting a Credit Card Payment with PowerPay 4.5

If a patient pays with a credit card, you can post the payment in Accounts module using the PowerPay feature. PowerPay allows you to charge/process the patient's credit card through the computer and then automatically posts a payment transaction type in the Accounts module. To use PowerPay to post a payment, do the following:

1. Open the Accounts module.

2. Select a patient.

3. Click the 🖳 **(PowerPay)** button on the Accounts module's toolbar. A screen similar to Figure 7-9 will open.

PowerPay is an add-on product through NIS. To learn more about purchasing this product, speak with your trainer.
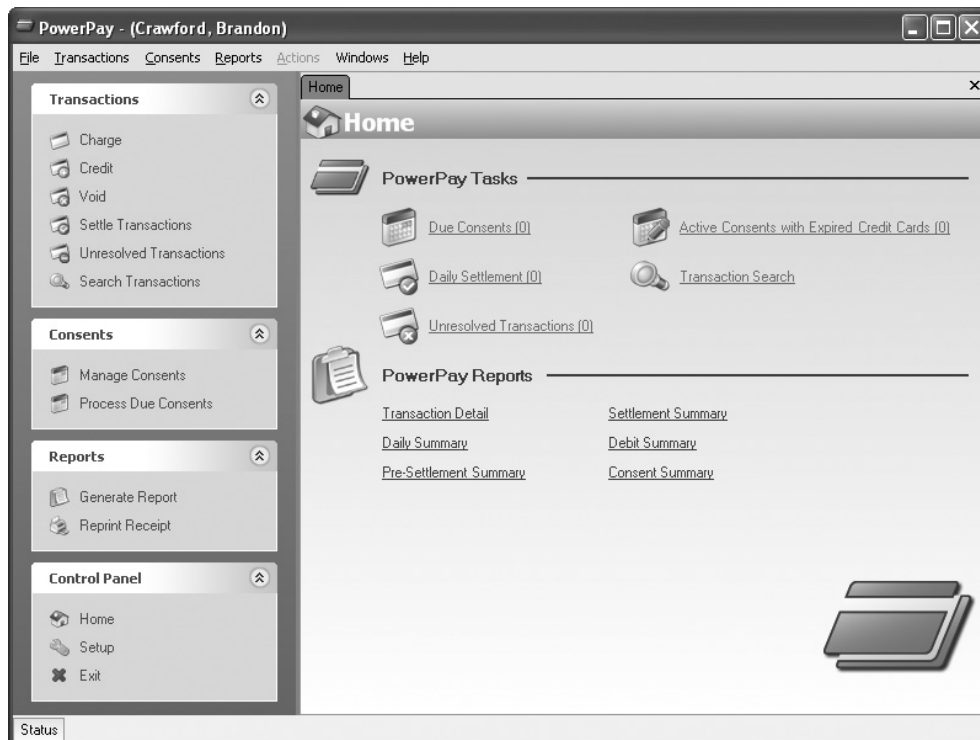
Figure 7-9: The PowerPay window.

4. Click **Charge** in the **Transactions** section. A screen similar to Figure 7-10, on the next page, will open.

5. At this point, you have two options, swipe the card or do a manual transaction.

- If you swipe the patient's credit card, all of the information will be filled in their corresponding fields, except the charge amount. You will need to enter the amount in the **Amount** field.

Figure 7-10: The Charge area of the PowerPay window.

- If you do not have the card because the patient sent in a statement with the number on it, you can do the following:

    a. Enter the charge in the **Amount** field.

    b. Select a **Merchant**.

    c. Select the **Permission** from the list.

    d. Enter the **Credit Card Information** in the fields provided.

    e. Enter the **Credit Card Verification** information in the fields provided.

6. Click the 🗔 (**Process**) button in the top, right corner of the **Charge** area. This will send the transaction to the acquiring bank. When approved by the bank, the approval status and authorization code will be displayed in the **Status** panel at the bottom of the PowerPay window and the form will be cleared. The Enter PowerPay PC Payment window will appear.

7. Click **Yes** to print a charge receipt if prompted to do so.

8. Click **OK** to post the payment to the patient's Accounts module.

Entering Adjustments

At times, it may be necessary to post an adjustment to a patient's Accounts module. To enter an adjustment, do the following:

1. Open the Accounts module.

2. Select a patient.

3. Click 🖳 (**Enter Adjustment**). A screen similar to Figure 7-11, on the next page, will open.

4. Enter the **Amount** of the adjustment.

5. Highlight the desired adjustment **Type**.

6. Select the **Provider**.

7. Select the **Patient** which this adjustment is for.

Figure 7-11: The Enter Adjustment window.

8. If desired, enter a **Note** as to why this adjustment is being posted.

9. Click **OK** to post the adjustment.

Using the Easy Checkout Button

As stated in the Accounts Module Setup topic, the Easy Checkout button can save you time by allowing you to create a claim, post a payment, and print a walkout all with the click of a button. Now that the button has been set up, follow the steps below to use it:

1. Open the Accounts module.

2. Select a patient.

3. Post all work completed today.

4. Click the 🔲 (**Easy Checkout**) button on the Accounts module's toolbar.

Check Your Skills 7.4

1. Which split payment option allows you to pay the oldest balance first?

_____

2. Which split payment options allows you to split the payment equally among all providers listed in the Split Payment window.

_____

3. If you receive the following message, "This patient does not have dental insurance," when using the Easy Checkout button, what should you do?

_____

The options checked In the Easy Checkout Options window will determine the prompts that will appear. Follow each prompt as directed.

If the patient does not have insurance, the following message will appear, "This patient does not have dental insurance." Click OK and the Easy Checkout will proceed to the next step.

If a claim has already been created for today's procedures or if there are no procedures for today, the following message will appear, "There are no procedures for a new insurance claim. An insurance claim was not created." Click OK and the Easy Checkout will proceed to the next step.

If this patient did not make a payment, when the screen to make a payment appears, click Cancel to proceed to the next step without making a payment.

Month End Procedures

Applying Finance Charges

It is strongly recommended that you complete a backup of the entire Easy Dental database before applying finance charges. To apply finance charges, do the following:

1. Close Easy Dental on all computers.

2. Open the Accounts module and click 🖩 **(Month End) | Finance Charge | Apply Finance Charge**. A screen similar to Figure 7-12 will open.
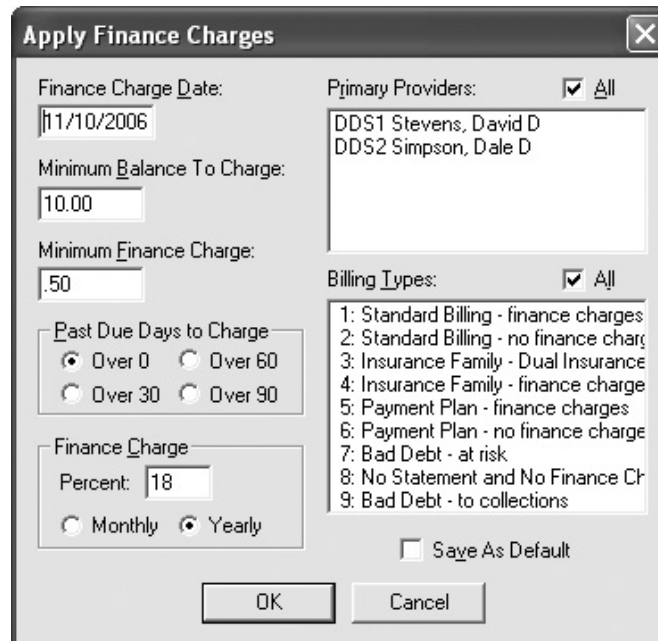
Figure 7-12: The Apply Finance Charges window.

3. Enter the **Minimum Balance To Charge** in the field provided.

4. Enter the **Minimum Finance Charge** amount.

5. Mark the desired **Past Due Days to Charge** option.

6. Enter the **Percent** of the family balance to use when calculating the finance charge and mark **Monthly** or **Yearly**.

7. Highlight the desired **Primary Providers** and **Billing Types** or check **All**.

8. If desired, check **Save As Default** to save these settings, so the next time you run finance charges, you will not have to set them up again.

9. Click **OK** and then click **OK** to the message that appears to apply the finance charges.

Deleting Finance Charges

At times, it may be necessary to delete the finance charges that were posted to accounts due to a mistake made in the setup process. To delete finance charges, do the following:

1. Close Easy Dental on all computers.

2. Open the Accounts module and click 🖩 **(Month End) | Finance Charge | Delete Finance Charge**. A screen similar to Figure 7-13, on the next page, will open.

Figure 7-13: The Delete Finance Charges window.

3. Enter the **Finance Charge Date** for the charge(s) you wish to delete.

4. Click **OK** and then click **OK** to the message that appears to delete the finance charges.

Closing the Month

It is strongly recommended that you complete a backup of the entire Easy Dental database before closing the month. Month end is a very important part of Easy Dental. By running month end, you will move current transactions into history, age account balances, and reset insurance benefits for those plans that need to be reset. To run month end, do the following:

1. Close all Easy Dental on all computers.

2. Open the Accounts module and click ▦ (**Month End**) | **Update**. A screen similar to Figure 7-14 will open.

Figure 7-14: The Close Out Month window.

3. If desired, check **Appointment Purge** to permanently delete all appointments previous to the date listed. This date defaults to one year previous to the current month, but can be changed.

4. By checking **Reset Insurance Benefits for [month]**, Easy Dental will reset the insurance benefits for any insurance plan whose benefit renewal date is the month listed.

5. Click **OK**.

6. Easy Dental will remind you about having a backup. If you do have a backup, click **OK**. If you do **NOT** have a backup, it is highly recommended that you click **Cancel**.

Check Your Skills 7.5

1. Before applying finance charges, what does Easy Dental recommend you do?

___

2. What is the first step to running the Month End Update?

___

3. True or False? You should have a current backup of the entire Easy Dental database before running the Month End Update.

___

4. If today is January 28, 2007, is it possible to close the month of January?

___

Apply Your Knowledge

Switch to the Tutor Database

Before performing any of the following activities, switch to the Tutor database to ensure that your live data will not be compromised. To switch to the Tutor database, do the following:

1. Open the Reports module and click ![icon] **(Maintenance) | Preferences | Paths**.
2. Make a note of the current path in the **Database Path** field, so you can switch back to your live data after you are done with the activities.
3. Click the **Browse** button next to the **Database Path** field.
4. Browse to the location of your Tutor folder. In most cases, **C:\Program Files\ Easy Dental\Tutor** will be your path.
5. Click **OK**.
6. Click **OK** to the message that appears and close Easy Dental.

If you are not sure where your Tutor folder is located, ask your trainer for help or call Easy Dental Support at (800) 824-6375.

Activities

1. Change the Treatment Plan background color, so it is a light gray instead of white.
2. Set up the Easy Checkout button to create a claim and send it to batch, post a payment and print a walkout.
3. In any patient's account, post an extraction on tooth 4.
4. In Brandon Crawford's account, post a check payment. However, before actually posting the payment, check to see if there is more than one provider that needs to be paid. If there is, pay the oldest balance first.
5. Enter a 10% Professional Courtesy for Brandon Crawford.
6. Apply finance charges to all accounts that have at least a $5.00 balance.
7. Close a month and make sure that insurance benefits will renew.

Notes

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Schedule Module

Chapter

8

Overview

Created to facilitate the "productivity scheduling" concept endorsed by practice management consultants everywhere, the Easy Dental Schedule module is the standard by which all other electronic schedulers are judged. Convenient toolbars help you navigate through the book, search for open times, organize appointments and notes, and handle all common tasks that you need to perform throughout the day. You can schedule appointments, record broken appointments, and print route slips. Overall, the Schedule module helps your office maximize a provider's valuable time by rapidly filling the work schedule weeks in advance.

Objectives

Once you have completed this chapter, you should be able to:

- Navigate the Schedule Module
- Set up the Practice and Provider Hours
- Set Holidays and Vacation Days
- Set up Different Schedule Module Views
- Automatically and Manually Search for Available Times
- Schedule an Appointment for an Existing Patient and for New Patients
- Create a Patient File Using a New Patient Appointment
- Use the Clipboard
- Reschedule an Appointment
- Locate an Existing Appointment
- Break an Appointment
- View Medical Alerts, Patient Alerts, and Patient Notes from an Appointment
- Change Appointment Statuses
- Complete an Appointment
- Use the ASAP, Open, and Unscheduled Lists
- Set up and Use Easy Day Planning (Time Blocks)

Topic 1

Schedule Module Basics

Navigating the Schedule module

Understanding the basic navigation of the Schedule module is crucial to the successful operation of paperless scheduling. Figure 8-1 illustrates the different areas and features of the Schedule module.

In this area, you can see all of the appointments scheduled for the day that you are currently viewing.

This is the date of the schedule that you are currently viewing. Below the date, are the operatory titles.

The search arrows, Clipboard, and the Day, Week, and Month views allow you to quickly and easily schedule or move appointments.
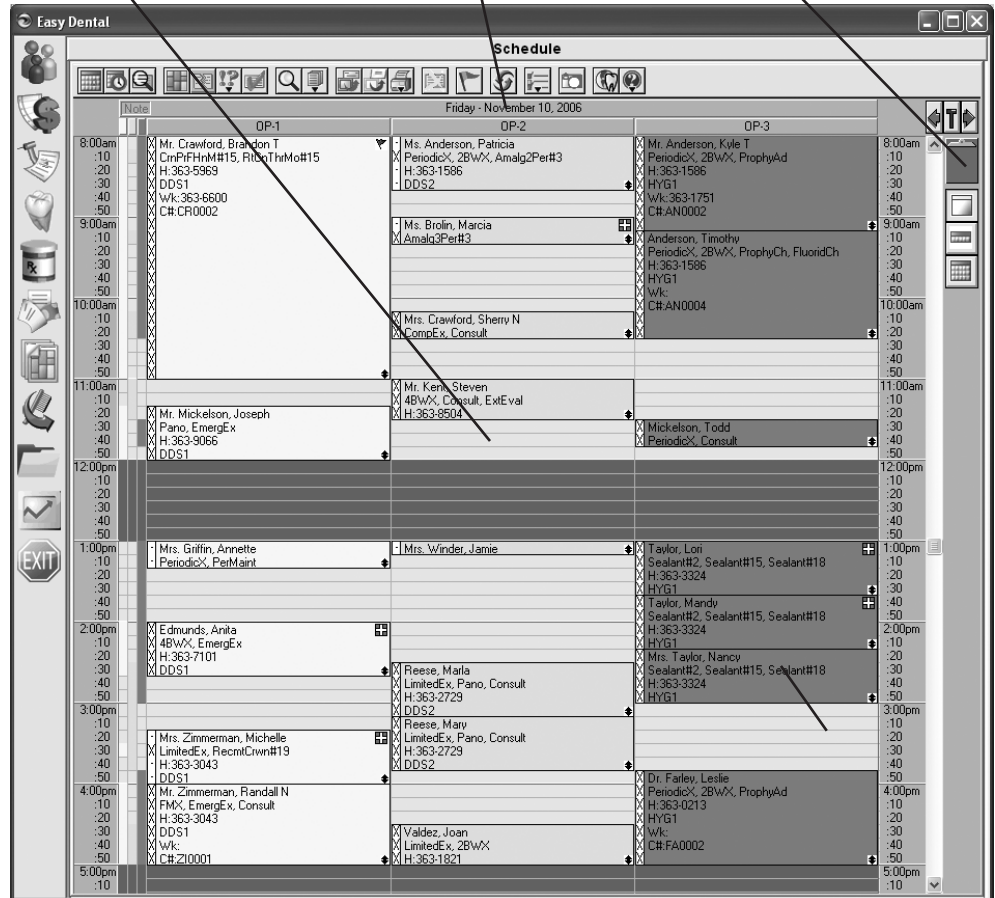
Figure 8-1: The Schedule module.

Schedule Module Setup

Practice Setup

Before you can use the Schedule module, you must first set up your office hours. To set up the Schedule module, do the following:

1. Open the Schedule module.

2. Click ▤ **(Setup) | Practice Setup**. A screen similar to Figure 8-2 will open.
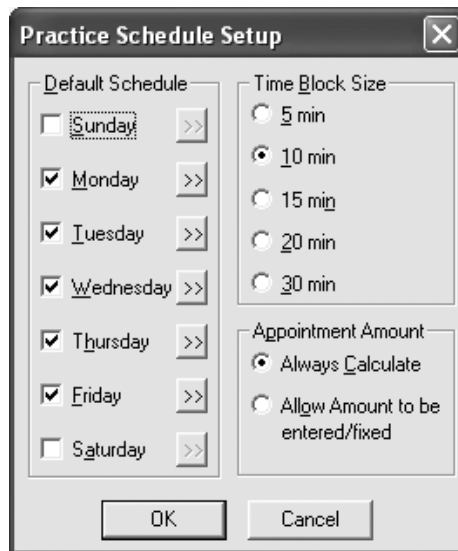
Figure 8-2: The Practice Schedule Setup window.

3. Enter your **Default Schedule** by doing the following:

    a. Uncheck the days of the week when your office is not open and make sure that the days of the week when your office is open are checked.

    b. Click the **Search** button next to the "open" day(s).

    c. Enter the hour you open as the **Start Time** and the time you close for the day as the **End Time**.

    d. Click **OK** to return to the Practice Appointment Setup window.

4. Mark the desired **Time Block Size**.

5. If desired, edit the **Appointment Amount** settings by using the following as a guide:

    • Mark **Always Calculate** if you would like Easy Dental to enter the amount of the appointment based on the patient's fee schedule. You will **NOT** be able to edit this amount.

    • Mark **Allow Amount to be entered/fixed** if you would like Easy Dental to enter the amount of the appointment based on the patient's fee schedule while allowing you to edit the amount if needed.

6. Click **OK** to save and exit.

The Default Schedule needs to be set to the practice's default hours. Individual day changes are made in the Practice Schedule, which is covered later in this topic.

Practice Schedule

Once the default schedule has been created, individual days can be edited using the Practice Schedule. To edit the Practice Schedule, do the following:

1. Open the Schedule module.

2. Click ▦ **(Setup) | Practice Schedule**. A screen similar to Figure 8-3 will open.
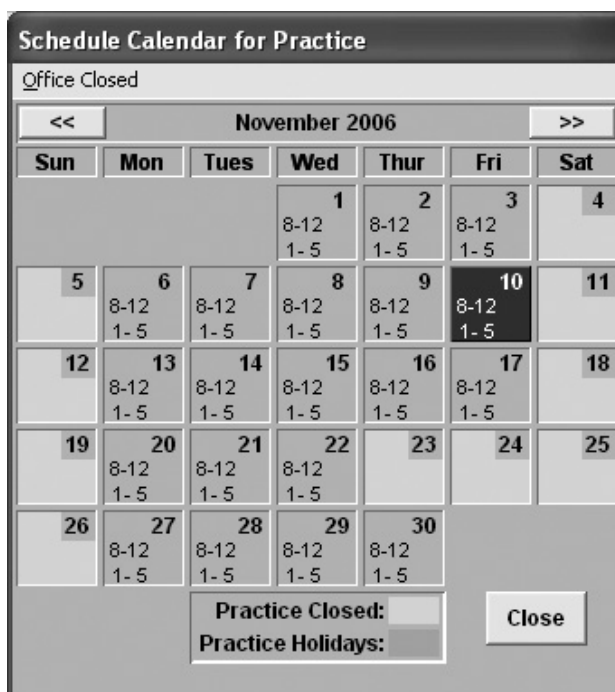
Figure 8-3: The Schedule Calendar for Practice window.

3. Choose the following operations to edit the schedule:
   - To close a day completely, do the following:
     a. Highlight the desired date.
     b. Select **Office Closed | Close Office on Selected Date**.
   - If you have previously closed a day in the Practice Schedule, you can open the day by doing the following:
     a. Highlight the closed day.
     b. Select **Office Closed | Open Office**.
   - To add a holiday to the schedule, do the following:
     a. Highlight the desired date.
     b. Select **Office Closed | Set Yearly Holiday on selected day**.
   - If you have previously created a holiday in the Practice Schedule, you can delete the holiday, so that your office is open, by doing the following:
     a. Highlight the holiday.
     b. Select **Office Closed | Delete Holiday**.
   - To edit the schedule for a day, do the following:
     a. Double-click the desired date.
     b. Edit the times as necessary.
     c. Click **OK**.

4. Repeat for any other days.

5. Click **Close** when finished making adjustments to the schedule.

The Open Office option will not open days that are normally closed in the Schedule module, such as Saturdays and Sundays. If your office is open one Saturday a month, then in the Practice Setup, you need to check Saturday and enter 12:00 am as the Start Time, and 1:00 am as the End Time. Then, in the Practice Schedule, you can edit the hours for the Saturdays that you are open.

Yearly holidays must be on the same day each year. For example, Thanksgiving should not be set up as a yearly holiday since the date changes each year, whereas Christmas is always on December 25 and can be considered a yearly holiday.

Provider Setup

Once you have the practice set up, it is necessary to set up the hours for individual providers. If your providers work the same hours as your office, then you will not need to edit their hours as the days and hours will be identical to the practice hours unless edited. To set up a provider, do the following:

1. Open the Schedule module.

2. Click ▦ **(Setup) | Provider Setup**. A screen similar to Figure 8-4 will open.
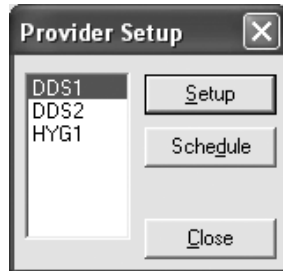
Figure 8-4: The Provider Setup window.

3. Highlight the provider and click **Setup**. A screen similar to Figure 8-5 will open.
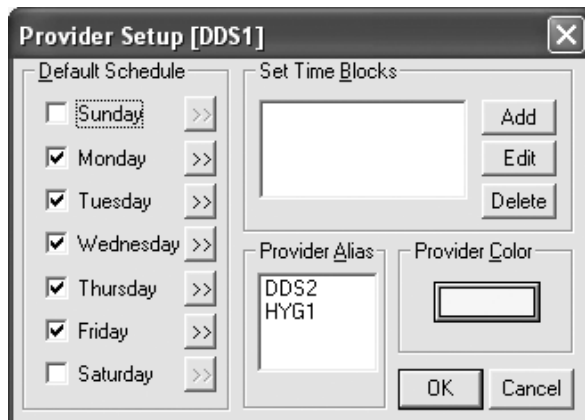
Figure 8-5: The Provider Setup [provider] window.

4. Enter your **Default Schedule** by doing the following:

   a. Uncheck the days of the week when the provider is not in the office and make sure that the days of the week when the provider is in the office are checked.

   b. Click the **Search** button next to the "open" day(s).

   c. Enter the hour the provider comes in as the **Start Time** and the time that they leave for the day as the **End Time**.

   d. Click **OK** to return to the Provider Setup window.

5. Highlight a **Provider Alias** if desired. The alias will only be used when a provider has been added to the computer with two different ID's. For example, the dentist likes to keep the type of work separate when looking at production and collections, so he/she is set up as DDS1 and DDS3.

6. If desired, change the **Provider Color** by clicking the colored box, highlighting the desired color, and clicking **OK**.

7. Click **OK**.

8. Repeat steps 3 - 7 for all other providers.

9. Click **Close** when finished.

Provider Schedule

Once the default schedule has been created for each provider, individual days can be edited using the Provider Schedule. To edit the Provider Schedule, do the following:

1. Open the Schedule module.

2. Click ▤ **(Setup) | Provider Setup** (see Figure 8-4 on the previous page).

3. Highlight the provider and click **Schedule**. A screen similar to Figure 8-6 will open.
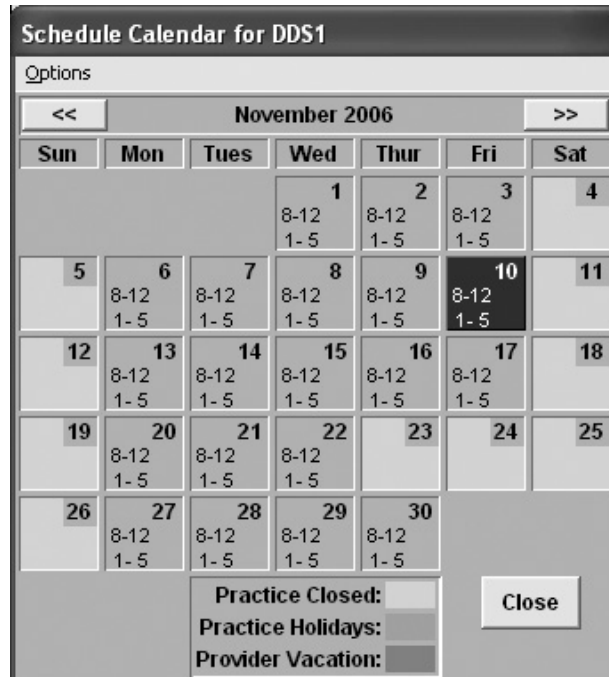
Figure 8-6: The Schedule Calendar for [provider] window.

4. Choose the following operations to edit the schedule:

    • To set up a vacation day for a provider, do the following:

        a. Highlight the desired date.

        b. Select **Options | Set Vacation** on selected date.

    • If you have previously set up a vacation day for the provider in the Practice Schedule, you can delete the vacation day, so that the provider is coming in that day, by doing the following:

        a. Highlight the vacation day.

        b. Select **Options | Delete Vacation day**.

    • To edit the schedule for a day, do the following:

        a. Double-click the desired date.

        b. Edit the times as necessary.

        c. Click **OK**.

5. Repeat for any other days.

6. Click **Close** when finished making adjustments to the schedule.

Setting up Views

Views allow you to display or hide items on the face of the Schedule module. The Schedule module offers view versatility, including the ability to look at the provider's schedule and hygiene schedule separately. To set up views in the Schedule module, do the following:

1. Open the Schedule module.
2. Click 🔍 **(View)** from the menu.
3. Click **New**. A window similar to Figure 8-7 will open.
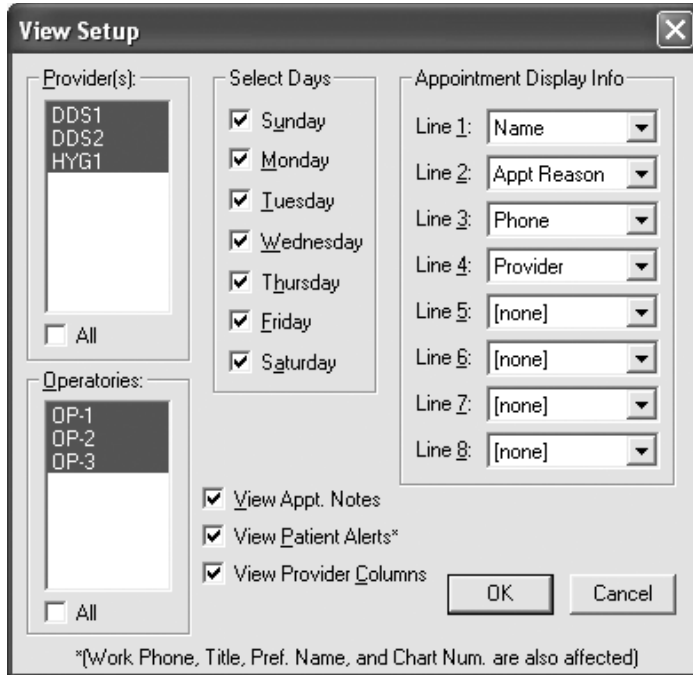
Figure 8-7: The View Setup window.

4. Highlight the providers you wish to view in the **Provider(s)** field.
5. Highlight the operatories you wish to view in the **Operatories** field.
6. Check the days of the week you wish to see when you are using the Week and/or Month views.
7. If you would like a notepad to appear on the appointment when the patient has notes entered in their file, check **View Appt. Notes**.
8. If you would like a red cross to appear on the appointment when the patient has medical alerts, check **View Alerts**.
9. Change the **Appointment Display Info** as desired. This will change the order that the appointment information is displayed on each appointment.
10. Click **OK**.
11. Repeat steps 3 - 10 to set up additional views as desired.
12. Highlight the view you would like to use and click **OK** to save and exit.

You can quickly switch between views by pressing the function keys assigned to each view (i.e., F1, F2, F3, etc.).

Check Your Skills 8.2

1. In your office, you do not want anyone to change anything in the Amount field of an appointment. Which option in the Practice Schedule Setup window allows you to do that?

2.   True or False? To mark off all Thanksgiving holidays, you would use the Set Yearly Holiday on the selected day feature in the Practice Schedule.

3.   True or False? You can set up more than one vacation day for a provider at a time.

4.   To switch quickly between the views set up in your Schedule module, which keys on the keyboard would you press?

Appointments

Automatically Searching for Available Times

You can find available appointments automatically and manually. To find an available appointment time automatically, do the following:

1. Click the (**Find New Appointment Time**) icon. A screen similar to Figure 8-8 will open.

Figure 8-8: The Find New Appointment Time window.

2. Highlight provider(s) and operatories that will be associated with the appointment in their corresponding fields.

3. Check the days of the week that the patient can come in for their appointment.

4. The Schedule module will look for available times after the date entered in the **Start Date** field. Change as necessary.

5. Enter the time length for the appointment in the **Appt. Length** field, so that Easy Dental knows that you need at least that amount of available time.

6. If desired, select **Start** and **End** times, so that Easy Dental will only look for those times available within the specified hours.

7. Click **Search/View**.

8. Highlight a time and click **View** to see the available appointment time.

9. When you find a time you like, click **Select** and schedule the appointment.

Manually Searching for Available Times

To search for an available appointment time manually, use the following methods:

- You can use the search arrows located in the top-right of the Schedule module to move forward and/or backward in the schedule. (This is much the same as manually flipping through an actual appointment book.)

- You can also use the **Week** and **Month** view buttons to find available times.

Scheduling an Appointment

To schedule an appointment, do the following:

1. Open the Schedule module.

2. Find an available appointment time.

3. Double-click that time in the desired operatory.

4. Select the patient you wish to schedule and click **OK**. The screen in Figure 8-9 will open.

Figure 8-9: The New Appointment Information window.

5. Select the **Provider** for the appointment.

6. Choose one of the following methods to add procedure(s) to the appointment:

   • If the appointment is for a procedure that you do frequently, do the following:

      a. Click **Initial**.

      b. Highlight all the procedures to be done during the appointment.

      c. Click **OK**.

   • If the appointment is for a procedure that has been treatment-planned or if it needs to be added to the treatment plan, do the following.

      a. Click **Tx**.

      b. Highlight the treatment plan procedures to be done during the appointment.

      c. Click **OK**.

7. Edit the description if needed.

8. Click the **Search** button next to **Length** to edit the length of the appointment if needed. Not only can you edit the appointment length, you can also edit the provider, assistant and chair time, by clicking the time unit boxes. There are three choices: **X**, **/**, or blank. Use the following explanations as a guide:

   - **X** indicates provider time.

   - **/** indicates assistant time.

   - A blank box indicates chair time.

9. The **Amount** of the appointment should appear automatically if there are procedures in the **Reason** field.

10. Select the desired **Status**, **Type**, and **Schedule** in their corresponding fields.

11. The **Op**, **Date** and **Time** fields should automatically be filled in because you double-clicked the appointment time on the date and in the operatory for the appointment in step 3. If you wish to make a change, click the **Search** button next to each field and make your change.

12. Enter any notes specific to this appointment in the corresponding field.

13. Click **OK** to schedule the appointment.

Scheduling New Patient Appointments

To schedule an appointment for a new patient, do the following:

1. Open the Schedule module.

2. Find an available appointment time.

3. Double-click that time in the desired operatory.

4. From the bottom of the Select Patient window, click **New Patient**. The screen in Figure 8-10 will open.

Figure 8-10: The Enter New Patient Information window.

5. Enter the **Name**, **Phone**, and **Address** information for the patient.

6. Click **OK**.

7. Enter the appointment information as described in the previous section.

8. Click **OK** to schedule the appointment.

Use the Wait/Will Call button to save the appointment information without actually scheduling the appointment. The appointment information is automatically moved to the Unscheduled List. If a patient wants to call back to schedule, you can pull the appointment from the Unscheduled List. This saves you from having to re-input all of the information.

You can use the Clipboard button to find an appointment date and time after you have started scheduling the appointment. (See Using the Clipboard later in this topic.)

The Ins Claim Info button will open the Insurance Claim Information window and will save information for all future claims regarding student status, disabilities, accident information, etc. for this patient.

Creating a Patients module from a New Patient Appointment

When a new patient arrives for the appointment, do the following to create a file in the Patients module for them:

1. Highlight the new patient appointment. (A NP will show in front of the patient's name on a new patient appointment.)

2. Switch to the Patients module.

3. Click the ▨ (**New Patient With Appointment**) icon. A screen similar to Figure 8-11 will open.

Figure 8-11: The For New Patient window.

4. Mark one of the following options.

   • **Create New Family** will create a brand new family and this patient will be entered as the guarantor for the family.

   • **Add To Current Family** will add the patient to the currently selected family.

   • **Select Family** will allow you to select the family to add the patient to.

5. Click **OK**.

6. Enter the patient's information and click **OK** to create the file.

Using the Clipboard

If you do not want to find an available time before scheduling an appointment, you can use the Clipboard to find a time for the appointment. To use the Clipboard, do the following:

1. From the Appointment Information window, click **Clipboard**.

2. Search for an available appointment time using any of the methods described earlier in this topic.

3. Once you find an available time, drag the appointment from the Clipboard to the specified time.

4. Click **Yes** to schedule the appointment.

Rescheduling an Appointment

If a patient calls reschedule an appointment, Easy Dental makes it easy to move the appointment to a new time. To move an appointment, do the following:

1. Drag the appointment to the **Clipboard**.

2. Search for an available appointment time using any of the methods described earlier in this topic.

3. Once you find an available time, drag the appointment from the Clipboard to the specified time.

4.   Click **Yes** to move the appointment.

Locating an Existing Appointment

Reminding patients of their appointment time can be very important and will help avoid "no shows." Easy Dental makes it easy to find an existing appointment. To locate an existing appointment, do the following:

1.   Click the (**Find Appointment**) icon.

2.   Enter the first few letters of the patient's last name in the field provided.

3.   Click the **Search** button. A screen similar to Figure 8-12 will open.
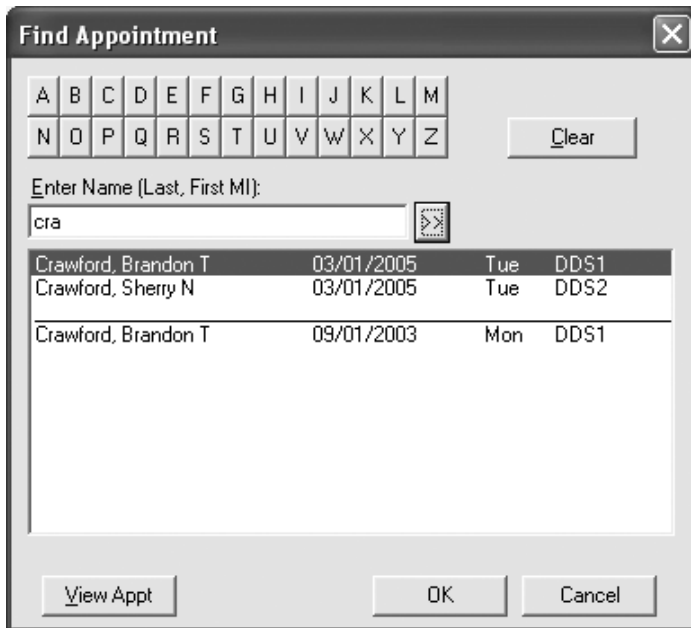
Figure 8-12: The Find Appointment window.

4.   Highlight the appointment.

5.   Click **View Appointment** and Easy Dental will take you to the day and time the appointment is scheduled.

Breaking an Appointment

If a patient calls to cancel or is a "no show" patient, you will want to keep track of all the times when the patient has cancelled. By breaking an appointment in the Schedule module, Easy Dental will put the last missed appointment date in the Patients module and will also update the number of times a patient has missed an appointment. The appointment will also be put on the Unscheduled List, so when the patient calls to reschedule, you do not have to re-enter their appointment information. To break an appointment, do the following:

1.   Find and highlight the appointment.

2.   Click the (**Broken Appointment**) icon.

3.   Click **Yes** to break the appointment and send it to the Unscheduled List.

Viewing Medical Alerts and Patient Notes

You can quickly view medical alerts and notes for a patient from their scheduled appointment. To view an alert or note, do the following:

1. Locate the appointment.

2. Click the red cross or notepad bitmap in the top-right corner of the appointment. A screen similar to Figure 8-13 will open.
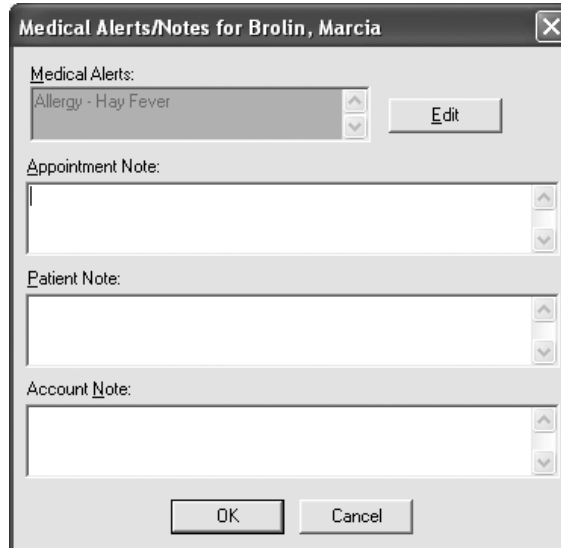
Figure 8-13: The Medical Alerts/Notes for [patient] window.

3. Notes can be entered or edited in this window.

4. Click **OK** to exit.

Viewing Patient Alerts from an Appointment

You can also quickly view patient alerts for a patient from their scheduled appointment. To view a patient alert, do the following:

1. Locate the appointment.

2. Click the blue flag bitmap in the top-right corner of the appointment. A window similar to Figure 8-14 will open.
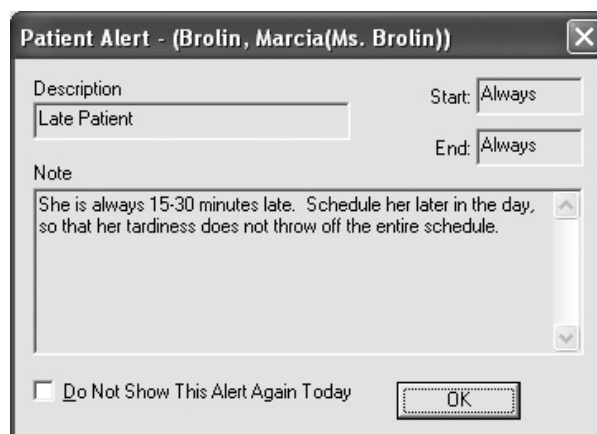
Figure 8-14: The Patient Alert window.

3. Click **OK** to exit.

Appointment Statuses

To make it easier for each of staff member in the office, Easy Dental has an appointment status feature allowing you to change the status of an appointment based on the progress of the appointment (i.e., patient ready for operatory, treatment in progress, etc.). When the status is changed, the white column in front of the colored part of the appointment will change color. Appointment statuses can be modified in the Practice Definitions window. To change the status of an appointment, do the following:

1. Highlight the appointment.
2. Click **(Status)** from the menu.
3. Select the desired status.

Completing an Appointment

To complete an appointment and post the procedures attached to the appointment to the patient's account, do the following:

1. Highlight the appointment.
2. Click the **(Set Complete)** icon.
3. Highlight the procedure(s) that were completed during the appointment.
4. Click **Set Complete**.

To see additional information about the appointment, you can point to the appointment, press the Shift key and hold down the right mouse button.

Check Your Skills 8.3

1. Which icon in the Schedule module allows you to search by provider, date, and time for an available appointment time?

_____

2. If you click the Wait/Will Call button while scheduling an appointment, where can you find the appointment?

_____

3. From an appointment, how can you enter the patient's student status?

_____

4. True or False? You do not have to do anything special to schedule a new patient appointment.

_____

5. When creating a patient file in the Patients module from a new patient appointment, which option allows you to put the patient in their own file?

_____

6. Name two types of notes that you can view from an appointment.

_____

7. If a patient calls and asks when their next appointment is, which icon on the Schedule module's toolbar will help you find the appointment?

_____

Appointment Lists

Using the ASAP List

The Schedule module has several lists that can assist you in filling holes in your schedule. To use the ASAP List, do the following:

1. Open the Schedule module.

2. Click ▤ **(Lists) | ASAP List**. A screen similar to Figure 8-15 will open.
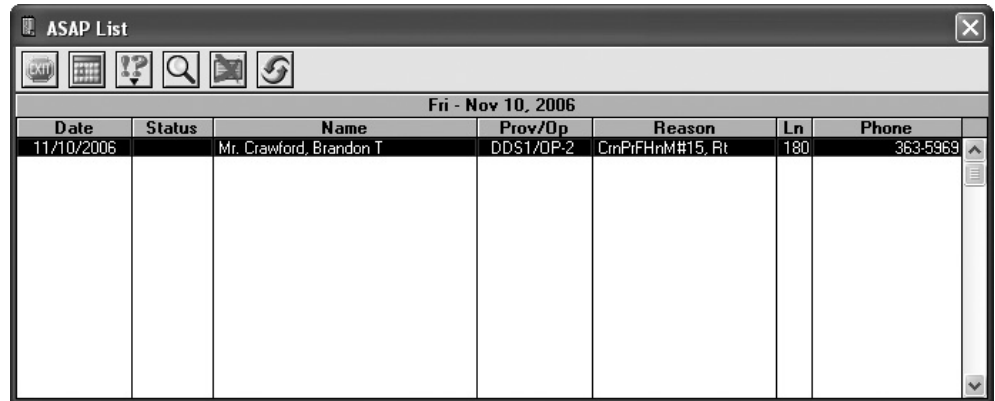
Figure 8-15: The ASAP List window.

3. By default, the list will show all patients scheduled within the next 7 days that have been marked as ASAP patients. To see more than 7 days, do the following:

   a. Click 🔍 **(View)** from the menu.

   b. Change the **Span of Search**. (You can view up to 99 days at a time.)

   c. Click **Save as Default**.

4. Using the list, call patients to see if you can fill your holes. Once you have a patient for the available appointment time, do the following:

   a. Double-click the patient's name.

   b. Change the **Schedule** to **Fixed** and click **Clipboard**.

   c. Drag the appointment from the Clipboard to the available time.

   d. Click **Yes** to move the appointment.

Using the Open List

To use the Open List to fill available times, do the following:
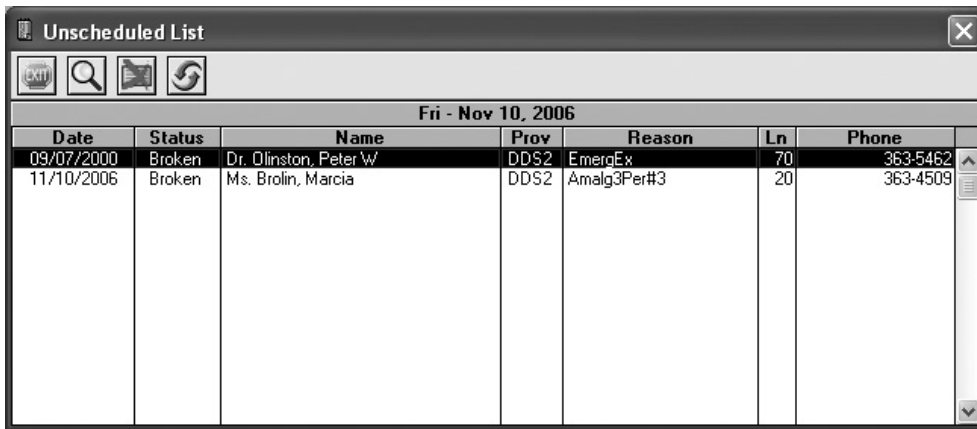
1. Open the Schedule module.

2. Select ▤ **(Lists) | ASAP List** (see Figure 8-15).

3. By default, the list will show all patients scheduled within the next 7 days that have been marked as ASAP patients. To change to the Open List and to see more than 7 days, do the following:

   a. Click 🔍 **(View)** from the menu.

   b. Mark **Open** for the **Type of Search**.

   c. Change the **Span of Search**. (You can view up to 99 days at a time.)

   d. Click **OK**.

4. Using the list, call patients to see if you can fill your holes. Once you have a patient for the available appointment time, do the following:

   a. Double-click the patient's name.

   b. Change the **Schedule** to **Fixed** and click **Clipboard**.

   c. Drag the appointment from the Clipboard to the available time.

   d. Click **Yes** to move the appointment.

Using the Unscheduled List

The Unscheduled List is a powerful tool that assists you in managing your broken appointments and filling your schedule. When you break an appointment, it gets placed on the Unscheduled List. To use the Unscheduled List to fill available times, do the following:

1. Open the Schedule module.

2. Click 📋 **(Lists) | Unscheduled List**. A screen similar to Figure 8-16 will open.

Date	Status	Name	Prov	Reason	Ln	Phone
09/07/2000	Broken	Dr. Olinston, Peter W	DDS2	EmergEx	70	363-5462
11/10/2006	Broken	Ms. Brolin, Marcia	DDS2	Amalg3Per#3	20	363-4509

Figure 8-16: The Unscheduled List window.

3. Using the list, call patients to see if you can fill your holes. Once you have a patient for the available time, do the following:

   a. Double-click the patient's name.

   b. Click **Clipboard**.

   c. Drag the appointment from the Clipboard to the available time.

   d. Click **Yes** to move the appointment.

Check Your Skills 8.4

1. True or False? To access to the Open List, you must first open the ASAP List.

2. By default, how many days does the ASAP List allow you to view into the future for appointments marked as ASAP?

There are two ways for an appointment to be placed on the Unscheduled List, one is to break the appointment and the other is to click the Wait/Will Call button in the Appointment Information window.

If you attempt to schedule an appointment for a patient with an appointment on the Unscheduled List, Easy Dental will prompt you that he/she has an appointment on the Unscheduled List, and then allows you to view the appointment. This allows you to quickly reschedule the appointment.

3. True or False? Whenever you re-schedule an appointment from the Open or ASAP List, you should always change the Schedule back to Fixed.

4. True or False? Breaking an appointment is the only way to get an appointment on the Unscheduled List.

Easy Day Planning

What is Easy Day Planning?

Many practice management consultants advocate a strategy of scheduling the "Perfect Day". A perfect day consists of just the right balance of high, medium, and low production procedures. Easy Dental helps to achieve that perfect balance by allowing you to reserve certain times during the day by blocking them for the scheduling of specific procedure types (i.e., high production, low production, etc.).

Setting up Time Blocks

A time block allows you to block times in the Schedule module for certain appointment types (i.e., crowns, exams, etc.). Once Easy Day Planning has been set up and activated, you will see a colored border with the time block name and the provider assigned to that block. Anyone attempting to schedule an incorrect procedure during the blocked time will be warned and prompted to override. Each provider can have six time blocks. To set up time blocks, do the following:

1. Open the Schedule module.
2. Click ▤ (**Setup**) | **Provider Setup**.
3. Highlight the provider you wish to set up a time block for and click **Setup**.
4. Click **Add** in the Set Time Blocks section. A screen similar to Figure 8-17 will open.
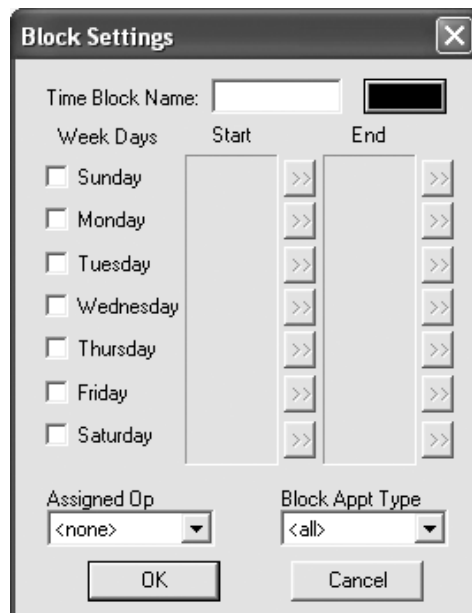
Figure 8-17: The Block Settings window.

5. Enter the **Time Block Name**.
6. Click the colored box to the right of the **Time Block Name** field, highlight the desired color and click **OK**.
7. Select the day(s) and time(s) that you wish to block, by doing the following:
   a. Check the day(s) of week that you wish to set the time block for.

8. Set up the desired **Start** and **End** time for each day by doing the following:

   a. Click the **Search** button next to **Start** and **End**.

   b. Select the time by clicking the left button to decrease the time or the right button to increase the time.

   c. Click **OK**.

9. Select the desired operatory for this time block in the **Assigned Op** field.

10. Select the desired appointment types for this time block in the **Block Appt Type** field.

11. Click **OK** to save and exit.

12. Repeat steps 4 - 11 for any other time blocks.

Activating Easy Day Planning

To display the scheduled time blocks, Easy Day Planning must be activated in the Schedule module on each workstation. If it has not been activated, you will not be prompted while scheduling an appointment with an incorrect procedure during the specified time block. To activate Easy Day Planning, do the following:

1. Click the ▦ (**Easy Day Planning**) icon.

Moving Times Blocks

You can move a time block within the **SAME** operatory. To move a time block, do the following:

1. Drag it to the desired time without overlapping another time block.

Re-sizing Time Blocks

You can also re-size a time block. To re-size a time block, do the following:

1. Click the bottom border of the time block and drag up to decrease the size or drag down to increase the size of the time block.

Easy Dental will automatically enter the appointment type assigned to the procedures attached to the appointment. If more than one procedure code is selected, the appointment type for the first procedure code selected will be assigned to the appointment. You may also change the appointment type as needed.

When using the Find option to search for available time blocks, there is no need to highlight providers, operatories, select the days, or times as the time block will already take that information consideration.

Finding an Available Time Block

To find an available time block, do the following:

1. Double-click an available time.

2. Select a patient and click **OK**.

3. Enter the appointment information as described in the previous section and click **Find** (see Figure 8-8 on page 137).

4. The Schedule module will look for available times after the date entered in the **Start Date** field. Change as necessary.

5. Check **Search By Time Block** and highlight the desired time block.

6. Click **Search/View**.

7. Highlight a time and click **View** to see the appointment time available.

8. When you find the time you like, click **Select**.

Check Your Skills 8.5

1. True or False? Easy Day Planning must be activated on each workstation.

---

2. How many time blocks can each provider have?

---

3. True or False? Re-sizing time blocks is much like re-sizing appointments; you click the bottom of the block and drag up to decrease the size and drag down to increase the size.

---

4. How can you prevent office staff from de-activating Easy Day Planning?

Apply Your Knowledge

Switch to the Tutor Database

Before performing any of the following activities, switch to the Tutor database to ensure that your live data will not be compromised. To switch to the Tutor database, do the following:

1. Open the Reports module and click **(Maintenance) | Preferences | Paths**.
2. Make a note of the current path in the **Database Path** field, so you can switch back to your live data after you are done with the activities.
3. Click the **Browse** button next to the **Database Path** field.
4. Browse to the location of your Tutor folder. In most cases, **C:\Program Files\ Ezdental\Tutor** will be your path.
5. Click **OK**.
6. Click **OK** to the message that appears and close Easy Dental.

If you are not sure where your Tutor folder is located, ask your trainer for help or call Easy Dental Support at (800) 824-6375.

Activities

1. Set up the Schedule module using the following hours for the practice:
   - Monday through Thursday: 7:00 am - 6:00 pm
   - Friday: 8:00 am - 12:00 pm
2. Close the following holidays for 2007 and 2008:
   - New Year's Day
   - Memorial Day
   - Independence Day
   - Labor Day
   - Thanksgiving
   - Christmas
3. Close the office for the following days:
   - July 2 - 6, 2007
   - November 23, 2007
   - December 24 - 28, 2007
   - July 3, 2008
   - November 21, 2008
   - December 26, 2008 - January 2, 2009
4. Set up the following provider schedules:
   - DMD1
       - Monday through Thursday: 9:30 am - 6:00 pm with a 30-minute lunch starting at 1:00 pm
5. DMD1 has the following vacation days:
   - May 29 - June 1, 2007
   - September 4 - 7, 2007

6. Set up the following views and try switching between them using the function keys assigned to each view:
    *   View 1:
        *   Providers: All
        *   Operatories: All
        *   Month Time View: 7:00 am - 6:00 pm
        *   Days: Monday - Friday
    *   View 2:
        *   Providers: DDS2 and DMD1
        *   Operatories: OP-1 and OP-2
        *   Everything else should mimic View 1

7. Schedule an appointment for Abigail Smith on February 22, 2007 at 9:30 am with DMD1 for a root canal on tooth 14.

8. Create a new patient appointment for the following patient on February 26, 2007 at 1:30 pm with DMD1 for a new patient exam:
    *   Name: Charles A. Smith
    *   Home Phone: (801) 377-0192
    *   Address: 144 W. 400 N. Provo, UT 84601

9. Add Charles to Abigail's account using his scheduled appointment.

10. Find one of Brandon Crawford's existing appointments.

11. Set up the following time block:
    *   DMD1:
        *   Name: Lunch
        *   Color: Dark Blue
        *   Days: Monday - Thursday
        *   Times: 1:00 - 1:30 pm
        *   Operatory: OP-2

12. Activate Easy Day Planning and remove the Easy Day Planning icon from the Schedule module's toolbar.

Notes

Recall

Overview

Practice management experts estimate that it costs five times as much to recruit a new patient as it does to keep an existing one. Keeping patients you currently have is what recall is all about. This chapter will demonstrate the importance of an effective program. You will also learn how to set up and manage recall for individual patients. Recall is a system that, if set up correctly, will help your practice offer good patient follow-up while contributing to the practice's bottom line.

Objectives

Once you have completed this chapter, you should be able to:

- Edit Recall Defaults
- Attach Recall to a Patient, Procedure, and Appointment
- Set a Recall Appointment Complete
- Use the Recall Module
- Set up Recall Views
- Create Recall Reminder Cards

Topic 1

Recall Setup

Recall Overview

Your recall program is potentially one of the highest revenue-generating programs you can implement in your office. It is through the Recall exam that most of your restorative production will be generated.

Consequently, it is vital that your Recall program be capable of accurately tracking and reminding patients of their recall needs. Easy Dental helps you to maximize your recall program through its Recall module.

Editing Recall Defaults

In order to use the Recall features in Easy Dental, you should first set up the defaults. To see what the default settings are, do the following:

1. Open the Reports module.
2. Click 📇 (**Practice Setup**) | **Recall Setup**.
3. Highlight the recall **Type** and click **Edit**. A screen similar to Figure 9-1 will open.

Each patient set up on recall will automatically receive these settings. To change the defaults for an individual patient, you will need to make the change in the Patients module.

The Provider area refers to the provider the appointment will be assigned to when the recall type is attached to the appointment. For example, if the hygienist will be the provider that will do the hygiene appointments, you can mark Spec and then select the hygienist's ID. This way when a recall procedure is attached to the appointment, the provider will automatically change to the hygienist.

Figure 9-1: The Edit Recall Type window.

4. Make changes as necessary and click **OK** to save and exit.

Manually Attaching Recall to a Patient

There are two ways to attach recall to a patient, automatically and manually. Most of the time, you will let Easy Dental automatically set up patients on recall. With this in mind, it is still important to know how to manually set someone up and change their settings.

In the Patients module, there is a Recall field. If that field is blank, the patient is not set up on recall. If there is a date and a recall type in the field, the patient has been set up for that type. To manually set up a patient on Recall, do the following:

1. Open the Patients module.

2. Select a patient.

3. Double-click the **Recall** field.

4. Highlight the **Type** that you want to set up.

5. Click **Set**. A screen similar to Figure 9-2 will open.

Figure 9-2: The Set Recall - [patient] window.

6. Edit the **Due Date** and **Provider** information as needed.

7. Click **OK** to save and exit.

8. Click **Close** to return to the Patients module.

Automatically Attaching Recall to a Patient

By posting certain procedures to a patient's account, Easy Dental can automatically set up patients on recall. To understand this better, do the following:

1. Open the Patients module.

2. Select a patient.

3. Verify that they are not set up on recall. If the patient is set up, clear the recall by doing the following:

    a. Double-click the **Recall** field.

    b. Highlight the **Type** that you want to clear.

    c. Click **Clear** and then click **OK**.

4. Switch to the Accounts module and post a prophy (D1110).

5. Switch back to the Patients module and look at the **Recall** field.

The patient should now be attached to recall. The next section will explain why Easy Dental automatically attached recall to the patient when the prophy was posted to the Accounts module.

Attaching Recall to a Procedure

In the previous example, a prophy was posted in a patient's account and Easy Dental automatically set them up on the PROPHY Recall type; it also gave them a due date six months from today.

How does Easy Dental know that when you post a prophy, it should set this patient up on the PROPHY recall type? The answer is that the procedure code is attached to the PROPHY recall type. To verify this, do the following:

1. Open the Reports module.
2. Click ▓ (**Practice Setup**) | **Procedure Code Setup**.
3. Highlight the **Preventive** category.
4. Highlight the prophy **ADA** code (D1110).
5. Click **Edit**.
6. In the **Auto Recall** field, **PROPHY** should be listed.

When a procedure code is attached to recall and that code is posted, Easy Dental will set that patient up on the attached recall type according to the defaults set up in the Reports module.

Figure 9-3 is a flow chart that demonstrates the steps Easy Dental takes when a procedure is posted to determine whether the patient needs to be set up on recall.
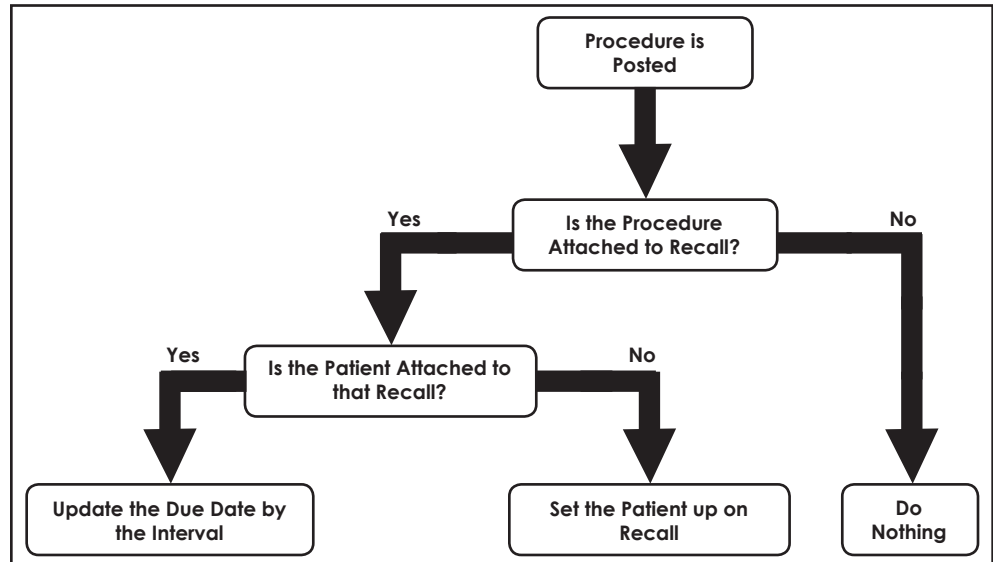
Figure 9-3: This flow chart describes how patients are automatically set up on recall.

Check Your Skills 9.1

1. True or False? You cannot edit the individual defaults for each patient's recall.

2. If you want all procedures attached to the PROPHY recall type to be done automatically by the hygienist in the practice, which Provider option should you use in the Edit Recall Type window?

3. When looking at Brandon Crawford in the Patients module, you notice that 08/19/05 PROPHY is in red. What does this indicate?

_____

4. Jane Wilson was due for her cleaning on January 13, 2006. She came in for her cleaning appointment on February 14, 2006. Which date will Easy Dental assign as her new due date if the interval is set as 6 months + 1 day?

_____

5. From which window in Easy Dental can you verify whether a recall type is attached to the right procedure code?

_____

Topic 2

Recall Appointments

Attaching Recall to an Appointment

In order for Easy Dental to know that the patient has an appointment for their recall visit, you must attach Recall to the appointment. To attach Recall to an appointment, do the following:

1. Open the Schedule module.

2. Double-click an available time.

3. Select a patient and click **OK**.

4. When selecting procedures to be attached to this appointment, as long as they are attached to recall and the **Use Reason to Auto Update Recall** is checked, Easy Dental will automatically attach recall to the appointment. The following are different situations that may occur when recall is attached to an appointment:

   • If the patient is not set up on recall, you will receive the message in Figure 9-4. You will need to the following:

Easy Dental Recall

One or more of the selected procedures is attached to a Recall Type that was not setup for this patient. Setup Recall for this patient using the default settings?

[Yes]   [No]

Figure 9-4: This message appears when you schedule an appointment for recall and the patient is not already set up on recall.

   a. Click **Yes** to set that patient up on recall.

   • If the patient is set up on recall and recall is not attached to the appointment, you will not receive any type of message.

   • If the recall type is already attached to another appointment, you will receive the message in Figure 9-5. You will need to do the following:

Easy Dental Recall

The PROPHY Recall for this patient is already attached to another appointment. Would you like to attach it to this appointment instead?

[Yes]   [No]
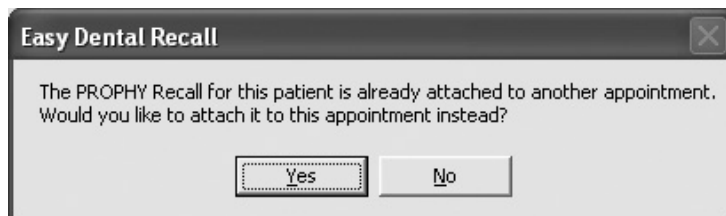
Figure 9-5: This message appears when you schedule an appointment for a recall type that is already attached to another appointment.

   a. Click **Yes** to re-attach it to the current appointment or click **No** to leave it attached to the original appointment.

Setting a Recall Appointment Complete

When you set an appointment complete that is attached to recall, Easy Dental will ask you whether you want to set up the next recall appointment. If you click Yes, then the Schedule module will advance the schedule according to the interval and will open the Appointment Information window for a brand new appointment.

Figure 9-6 is a flow chart that demonstrates the steps that Easy Dental takes when an appointment is set complete to determine whether the patient needs to have another appointment scheduled.
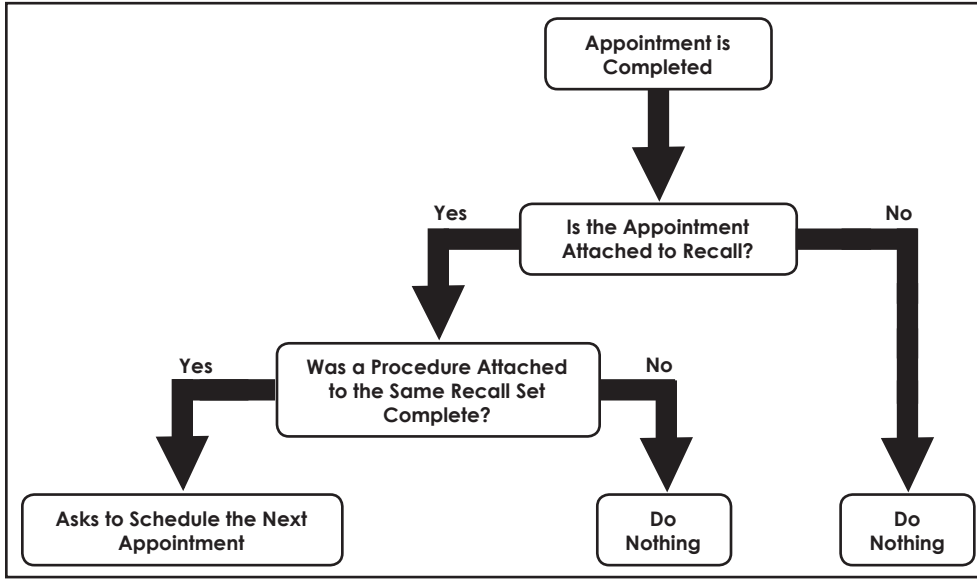
Figure 9-6: This flow chart describes when a user will be prompted to schedule the next recall appointment.

Check Your Skills 9.2

1. Which option should always be checked if you want Easy Dental to automatically attach recall to appointments when the procedure is attached to a recall type?

2. You receive a message that states a recall type is already attached to another appointment when creating a recall appointment. You want this recall type to remain attached to the original appointment, what should you do?

3. Other than making sure that an appointment is attached to recall, in order for Easy Dental to ask you whether you want to set up a new recall appointment, what needs to be done?

Recall Lists

Recall Module

After the initial setup of recall is done, you will be able to run a list of patients to find out which ones are due within a certain date range. You will do this from the Recall module (see Figure 9-7).

Figure 9-7: The Recall module.

The Recall module has several different columns full of information. Here are explanations of each column:

- **Date:** The patient's due date

- **Type:** The type of recall

- **Appt?:** The date of the patient's recall appointment

- **Status:** The status of the recall

- **Prior Treat.:** The date of the last time the patient was in for the recall type

- **Name:** The name of the patient

- **Age:** The age of the patient

- **Provider:** The patient's recall provider

- **Phone:** The patient's phone number.

If the Appt? column has a plus sign (+), that means the patient has an appointment, but it is not attached to recall. If there is a date with a plus sign, then the patient has an appointment attached to recall as well as an appointment that is not attached to recall.

Recall Views

In the Recall module, you can create different views that will allow you to generate lists based on different conditions. A view is just another way to look at the patients in the database. You can create a recall view that will find a list of patients that are due within a certain month or those who have appointments scheduled.

When you save a new recall view, you are only saving the settings. This enables you to re-use the view at a later time. For example, if you create a recall view that will find all patients due within a month, you can use that view for January, February, March, etc. because Easy Dental is looking for patients due within the current month. In order to set up a new recall view, do the following:

1. Open the Recall module (see Figure 9-7 on the previous page).

2. Click 🔍 **(Views) | Setup**.

3. Click **New**. A screen similar to Figure 9-8 will open.

Figure 9-8: The New Recall View window.

4. Enter a **View Name**.

5. Select the desired **Type**, **Status**, and **Sched. Appt?**.

6. To change the sort order of the list, do the following:

   a. Highlight the order that you would like to sort by and press **Page Up** until the order is at the top of the list.

7. In the **Due Date Span** field, you are able to enter conditions that will be used according to today's date that Easy Dental will use to find patients that meet those conditions. For example, if you set the span as **Before 1 Day** and **After 1 Month** and today is January 1, 2007, Easy Dental will look one day before January 1, 2007 until one month after January 1, 2007.

8. If desired, select a **Prior Treatment Date Span**.

9. If desired, select a **Last Visit Date Span**.

10. If desired, select a **Provider** range.

11. If desired, select a **Billing Type** range.

12. Click **OK** to save and exit.

13. To use a pre-set view, click 🔍 **(Views)** from the toolbar and select the desired view.

Check Your Skills 9.3

1. What does the plus sign in the Appt? column of the Recall module mean?

To change the reference date that the span uses, select File | Set Date from the Recall toolbar.

The Sort Order is a hierarchy list, meaning that Easy Dental will sort by the top order first, the second order second, and so on.

With Easy Dental, you are able to classify Recall by status. To change the status of a Recall type, highlight the patient's name in the Recall List, select Status and select the desired status.

You can use the status to keep track of patients that have been contacted and patients that need to be contacted. Once a patient has a status attached to their Recall, you can filter the list to show only patients that have that Recall status.

Topic 4

Recall Cards

Recall Cards for Patients Without Appointments

After viewing the Recall list, you can quickly and easily send recall cards to those patients that appeared on your list. This is a simple task using the letter merge feature of Easy Dental. To print reminder cards for patients that are due within a date range, but do not have an appointment scheduled, do the following:

1. From the Reports module, click ✉ **(Letters) | Recall**.

2. Highlight **Recall Cards - ezdlm41.doc**.

3. Click **Edit**. A screen similar to Figure 9-9 will open.
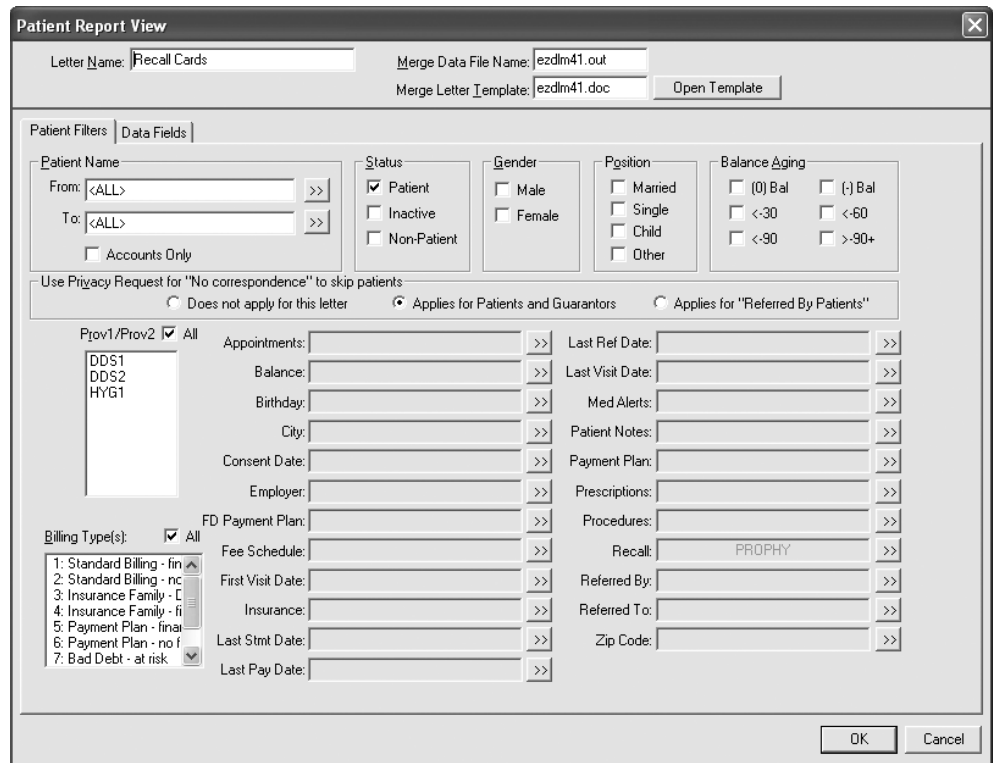
Figure 9-9: The Patient Report View window.

4. Click the **Search** button next to the **Recall** field. A screen similar to Figure 9-10, on the next page, will open.

5. Highlight the desired **Recall Type**.

6. Enter the date range in the **Due Date** field.

7. Mark **Without Attached Appointment**.

8. Click **OK**.

9. Click **OK** again.

10. Click the **Create/Merge** button.

11. Mark **Create Data File and Merge Letters**.

12. Click **OK**.
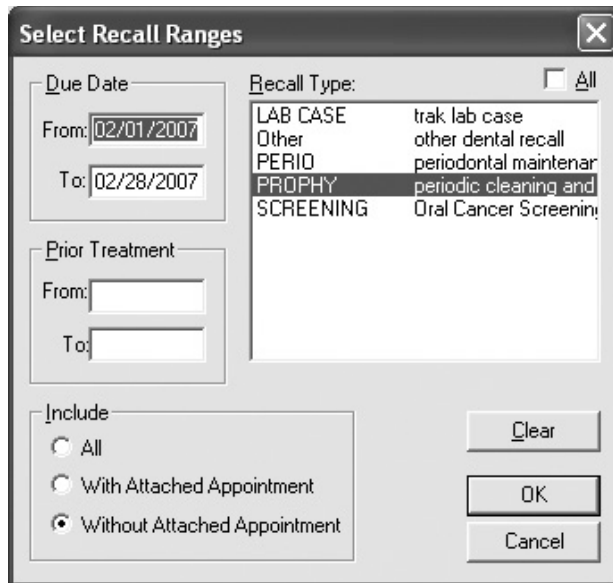
Figure 9-10: The Select Recall Ranges window.

Recall Cards for Patients With Appointments

To print reminder cards for patients that have a scheduled recall appointment within a date range, do the following:

1. From the Reports module, click 🖾 **(Letters) | Recall**.

2. Highlight **Recall Reminder Cards - ezdlm42.doc**.

3. Click **Edit** (see Figure 9-9 on the previous page).

4. Click the **Search** button next to the **Recall** field (see Figure 9-10).

5. Highlight the desired **Recall Type**.

6. Leave the **Due Date** and **Prior Treatment** fields blank.

7. Mark **With Attached Appointment**.

8. Click **OK**.

9. Click the **Search** button next to the **Appointments** field. A screen similar to Figure 9-11, on the next page, will open.

10. Mark **Appointment Date Range**.

11. Enter the **Date Range** in the fields provided.

12. Mark **Existing Patients with appointment in date range**.

13. Mark **0 or more** for the **Select # of Appts Missed**.

14. Click **OK**.

15. Click **OK** again.

16. Click the **Create/Merge** button.

17. Mark **Create Data File and Merge Letters**.

18. Click **OK**.
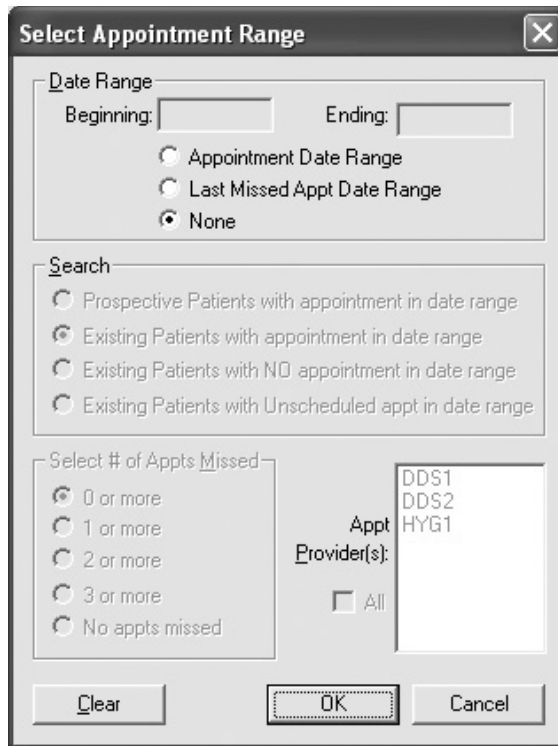
Figure 9-11: The Select Appointment Range window.

Once you have clicked the Create/Merge button, Easy Dental starts the process of searching through the database for the patients that meet the conditions specified. While Easy Dental is searching, you will see a window that will tell you the number of patients that have been searched and how many have been found. Figure 9-12 is an example of this window. The number on the left is the number of patients Easy Dental has searched and the number on the right is the number of patients that match the search criteria.
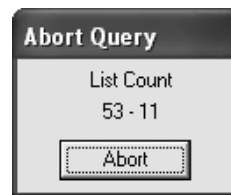
Figure 9-12: The Abort Query window.

Once Easy Dental has searched the database, Microsoft Word will launch and begin to merge the patients that were found. Once this process is completed, the cards will be displayed in Microsoft Word (see Figure 9-13 on the next page). At this point, you should load the card stock into your printer and select File | Print.
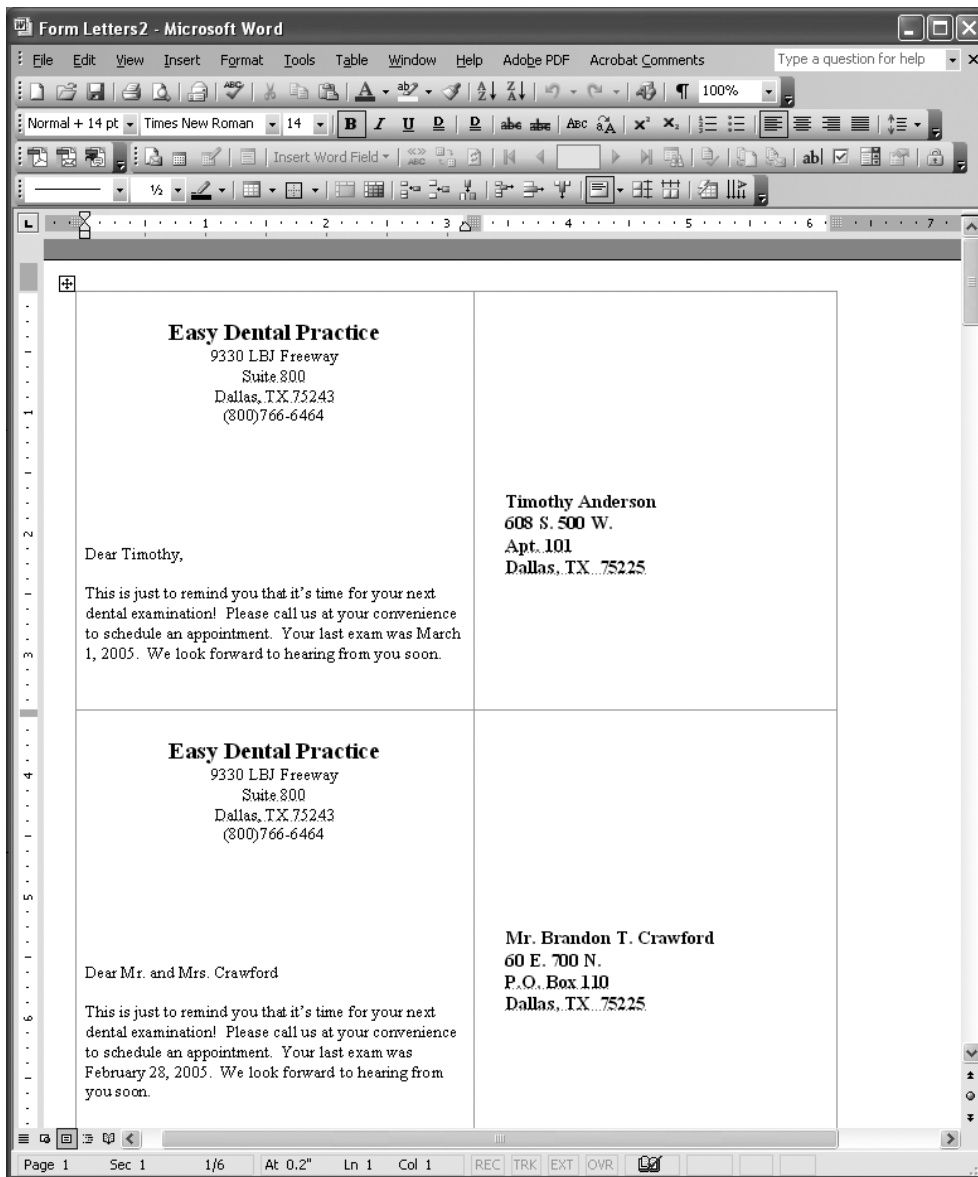
Figure 9-13: Recall cards without appointment in Microsoft Word.

Check Your Skills 9.4

1. True or False? When running recall cards for patients that have an appointment, you should always enter a Due Date range in the Recall field.

2. Which letter is used for running recall cards for patients that are due for recall?

Apply Your Knowledge

Switch to the Tutor Database

Before performing any of the following activities, switch to the Tutor database to ensure that your live data will not be compromised. To switch to the Tutor database, do the following:

1. Open the Reports module and click ![icon] **(Maintenance) | Preferences | Paths**.

2. Make a note of the current path in the **Database Path** field, so you can switch back to your live data after you are done with the activities.

3. Click the **Browse** button next to the **Database Path** field.

4. Browse to the location of your Tutor folder. In most cases, **C:\Program Files\ Ezdental\Tutor** will be your path.

5. Click **OK**.

6. Click **OK** to the message that appears and close Easy Dental.

If you are not sure where your Tutor folder is located, ask your trainer for help or call Easy Dental Support at (800) 824-6375.

Activities

1. Make sure that Bitewings-two films (D0272) is attached to the BITEWINGS Recall type.

2. Create an appointment for Adam Perry for bitewings making sure that Adam will be set up with the Bitewings recall defaults set up in the Reports module.

3. Abigail Smith needs to come in every four months instead of every six months to have her cleanings done.

4. Run a recall list for all patients that have an appointment for bitewings within the next year.

5. Run recall cards for all patients that are due for their cleanings within the last year.

Management Reports

Overview

This chapter covers a list of management reports that your practice should print to help keep track of total production/collections as well as manage your billing cycle better.

Objectives

Once you have completed this chapter, you should be able to:

- Run the Day Sheet
- Use the Batch Insurance Claims Utility
- Run the Procedures Not Sent to Insurance Report
- Run the Referred by Doctor/Other Report
- Run the Referred by Patient Report
- Run the Referred to Doctor Report
- Run the Finance Charge Report
- Run Billing Statements
- Submit Billing Statements Electronically
- Run the Aging Report
- Run the Practice Analysis Reports
- Run the Insurance Aging Report
- Purge Exported Report Files for HIPAA Compliance

Topic 1

Daily Reports

Day Sheet

The Day Sheet is a report that will show all transactions entered for a given date range. To print a Day Sheet, do the following:

1. Open the Reports module.
2. Click ▨ (**Management Reports) | Day Sheet (Charges and Receipts)**. A screen similar to Figure 10-1 will open.
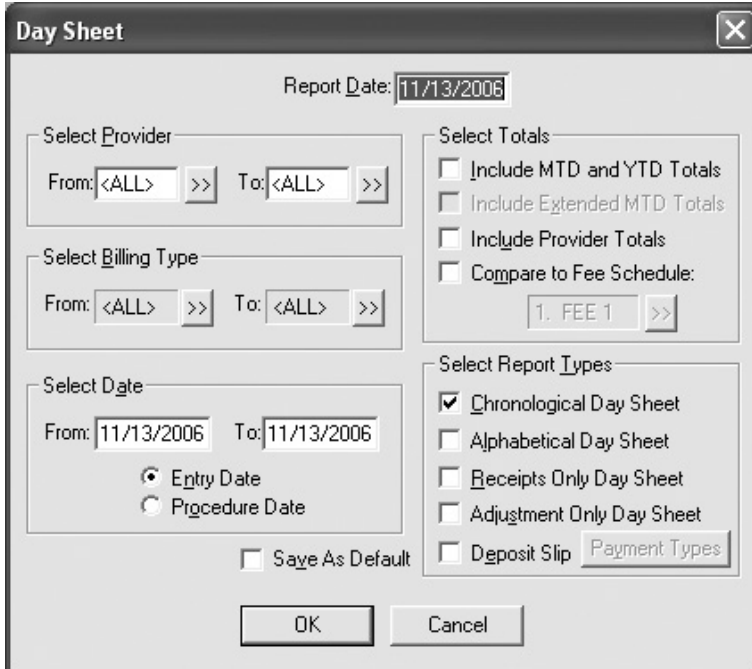
Figure 10-1: The Day Sheet window.

3. Select the provider range.
4. Select the billing type range.
5. Enter the date range in the **Select Date** field and mark **Entry Date** or **Procedure Date**. Use the following as a guide:

   • **Entry Date:** This will include all transactions that were entered into the database within the date range. The Day Sheet will also include both an Entry Date and Procedure Date column as well as an amount for the Previous Balance, Balance as of, and Net Change.

   • **Procedure Date:** This will include all transactions that have a date in the Accounts module within the date range. (Most of the time, the Entry Date and Procedure Date will be the same. However, they will differ when you backdate a procedure.)

6. Check the desired **Select Totals** options by using the following as a guide:

   • **Include MTD and YTD Totals** will print a running balance for the month and year.

   • **Include Extended MTD Totals** will print the average production per patient and average charge per procedure.

   • **Include Provider Totals** will print the production and collection for each individual provider.

- **Compare to Fee Schedule** allows you to select a fee schedule to compare with the charges for the day selected.

7. Check the desired **Select Report Types** options by using the following as a guide:

- **Chronological Day Sheet** prints payments, procedures, and adjustments for the date range specified. Procedures are listed by the order they were entered into Easy Dental.

- **Alphabetical Day Sheet** prints payments, procedures, and adjustments alphabetically by patient last name for the date range specified.

- **Receipts Only Day Sheet** prints the payments for the date range specified.

- **Adjustments Only Day Sheet** prints the adjustments for the date range specified.

- **Deposit Slip** prints the payment types specified in a form accepted by most banks. If you check **Deposit Slip**, you have the option of including certain payments by doing the following:

   a. Click **Payment Types**.

   b. Highlight all types that you would like to include on the Deposit Slip or check **All**.

   c. Click **OK**.

8. Check **Save As Default** to save these settings.

9. Click **OK** to send the report to the Batch Processor.

To select more than one payment type at a time, hold the right mouse button or the Ctrl key and click each type to be included on the report with the left mouse button.

The following report in Figure 10-2 is an example of the Alphabetical Day Sheet.

DAY SHEET (ALPHABETICAL)
Easy Dental Practice
03/02/2005

Date: 03/02/2005   Page: 1

ENTRY DATE	PROCEDURE DATE	PATIENT NAME	TH	CODE	DESCRIPTION	CHARGES	PAYMENTS	BT	PROV	PHONE #
03/02/2005	03/02/2005	Anderson, Kyle T			Cash Payment - Thank You		-5.35	4	DDS2	( )363-1586
03/02/2005	03/02/2005	Anderson, Kyle T			Cash Payment - Thank You		-69.65	4	HYG1	( )363-1586
03/02/2005	03/01/2005	Anderson, Kyle T		D0120	Periodic oral evaluation	25.50		4	HYG1	( )363-1586
03/02/2005	03/01/2005	Anderson, Kyle T		D0272	Bitewings-two films	21.42		4	HYG1	( )363-1586
03/02/2005	03/01/2005	Anderson, Kyle T		D1110	Prophylaxis-adult	48.96		4	HYG1	( )363-1586
03/02/2005	03/02/2005	Anderson, Patricia			Insurance Payment		-108.12	4	DDS2	( )363-1586
03/02/2005	03/01/2005	Anderson, Patricia	3	D2150	Amalgam-2 surf. prim/perm	76.50		4	DDS2	( )363-1586
03/02/2005	03/01/2005	Anderson, Patricia		D0120	Periodic oral evaluation	25.50		4	DDS2	( )363-1586
03/02/2005	03/01/2005	Anderson, Patricia		D0272	Bitewings-two films	21.42		4	DDS2	( )363-1586
03/02/2005	03/01/2005	Brolin, Marcia	3	D2160	Amalgam-3 surf. prim/perm	90.00		3	DDS2	( )363-4509
03/02/2005	03/02/2005	Crawford, Brandon T			Insurance Payment		-590.00	3	DDS1	( )363-5969
03/02/2005	03/02/2005	Crawford, Brandon T			Insurance Payment		-81.60	3	HYG1	( )363-5969
03/02/2005	03/01/2005	Crawford, Brandon T	15	D2750	Crown-porc fuse high noble mtl	500.00		3	DDS1	( )363-5969
03/02/2005	03/01/2005	Crawford, Brandon T	15	D3330	Root canal therapy - molar	425.00		3	DDS1	( )363-5969

GRAND TOTALS:

	CURRENT	MONTH-TO-DATE	YEAR-TO-DATE	PREVIOUS MONTH
CHARGES:	3057.00	3057.00	3057.00	0.00
PAYMENTS:	-470.50	-470.50	-470.50	0.00
CREDIT ADJUSTMENTS:	0.00	0.00	0.00	0.00
CHARGE ADJUSTMENTS:	0.00	0.00	0.00	0.00
FINANCE CHARGES:	516.15	516.15	516.15	0.00
LATE CHARGES:	0.00	0.00	0.00	0.00
CHARGES BILLED TO INSURANCE:	267.00	267.00	267.00	0.00
NEW PATIENTS OF RECORD:	1	1	1	0
PATIENTS SEEN:	4	4		
AVG PROD PER PATIENT:	764.25	764.25		
AVG CHG PER PROCEDURE:	277.91	277.91		
PREVIOUS BALANCE	449.00			
BALANCE AS OF 01/11/2005	3551.65			
NET CHANGE	3102.65			

Figure 10-2: An example of the Day Sheet.

The following report in Figure 10-3, on the next page, is an example of the Deposit Slip.

DEPOSIT SLIP
Easy Dental Practice
01/11/2005

Date: 01/11/2005   **Page:**   1

CHECK PAYMENT - THANK YOU

DATE	BT	PROV	NAME	BANK	CHECK #	AMOUNT
01/11/2005	6	DDS1	Anderson, Kyle T		5484	86.50
					TOTAL:	86.50

1 ITEM

DENTAL INS. CHECK PAYMENT

DATE	BT	PROV	NAME	BANK	CHECK #	AMOUNT
01/11/2005	3	DDS2	Aetna			117.60
01/11/2005	3	DDS1	Lincoln National			266.40
					TOTAL:	384.00

2 ITEMS

3 TOTAL ITEMS	**TOTAL CHECK PAYMENT :**	86.50
	TOTAL DENTAL INS. CHECK PAYMENT:	384.00
PAID IN BY	**TOTAL DEPOSIT:**	470.50

Easy Dental Practice
FOR CREDIT OF

BANK ACCOUNT

Figure 10-3: An example of the Deposit Slip.

Batch Insurance Claims Utility

This utility can be used to create all primary insurance claims for procedures posted throughout the day. To batch all claims that have not yet been created, do the following:

1. In the Reports module, click the **INS** (**Create Insurance Claims**) button. A window similar to Figure 10-4 will open.

Figure 10-4: The Create Batch Primary Insurance Claims window.

2. Enter the date range in the **Enter Procedure Date** field.

3. Click **OK** to send the claims to the Batch Processor.

If you have any claims in the Accounts module with a Not Sent status, this utility will send those claims to the batch and change the status to Sent.

A claim is considered "Not Sent" if it was not printed or sent to the Batch Processor when it was created.

Check Your Skills 11.1

1. True or False? Most of the time, the Entry Date and Procedure Date for a transaction will be the same.

2. Name two types of day sheet reports.

Weekly Reports

Procedures Not Attached to Insurance Claims Report

The Procedures Not Attached to Insurance Claims report will print a list of all procedures entered in the Accounts module, during a specified data range, that are not attached to an insurance claim. To print the Procedures Not Attached to Insurance Claims report, do the following:

1. Open the Reports module.

2. Click 📄 **(Account Reports) | Procedures Not Attached To Insurance**. A window similar to Figure 10-5 will open.
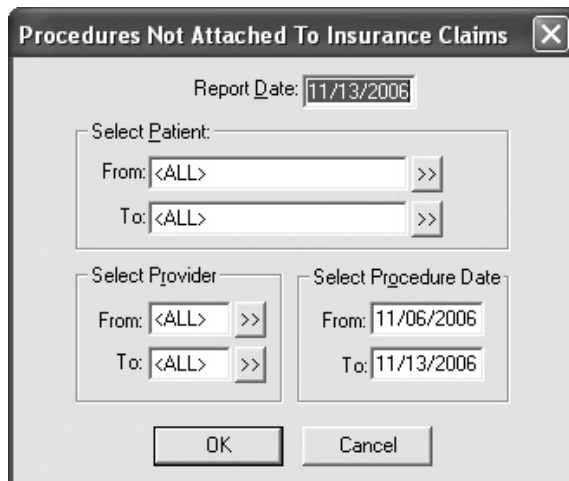
Figure 10-5: The Procedures Not Attached To Insurance Claims window.

3. Select the desired patient, provider, and procedure date ranges.

4. Click **OK**.

If there are procedures that should not be billed to insurance, check the "Do Not Bill to Insurance" option when posting a procedure code. Otherwise, these procedures will appear on the report.

Check Your Skills 11.2

1. If a procedure appears on the Procedures Not Attached to Insurance Claims report and it should not, which option should be checked to remove them from the report?

Referred by Doctor/Other Report

The Referred by Doctor/Other report will print a list of all patients referred by a doctor or another source to your practice. This report includes a list of procedures done for those patients within a given date range. To print the Referred by Doctor/Other report, do the following:

1. Open the Reports module.
2. Click ▤ (**Management Reports**) | **Referred BY Doctor/Other Report**. A screen similar to Figure 10-6 will open.

Figure 10-6: The Referred BY Doctor/Other Report window.

3. Select the desired provider range.
4. Enter the production date and referral date ranges.
5. If desired, select the desired referring doctor/other and procedure code ranges.
6. Click **OK**.

Referred by Patient Report

The Referred by Patient report will print a list of all patients referred by another patient to your practice. This report includes a list of procedures done for those patients within a given date range. To print the Referred by Patient report, do the following:

1. Open the Reports module.
2. Click ▤ (**Management Reports**) | **Referred BY Patient Report**. A screen similar to Figure 10-7, on the next page, will open.
3. Select the desired provider range.
4. Enter the referral date and production date ranges.
5. Select the desired referring patient range.
6. Check the desired **Select Report Type** options.
7. Click **OK**.
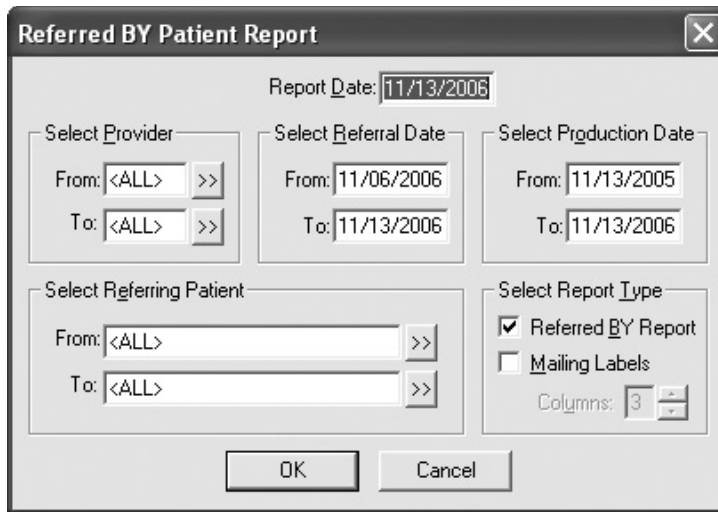
Figure 10-7: The Referred BY Patient Report window.

Referred to Doctor Report

The Referred to Doctor report will print a list of all patients referred to another practice by your practice. To print the Referred to Doctor report, do the following:

1. Open the Reports module.

2. Click ▥ (**Management Reports) | Referred TO Doctor Report**. A screen similar to Figure 10-8 will open.
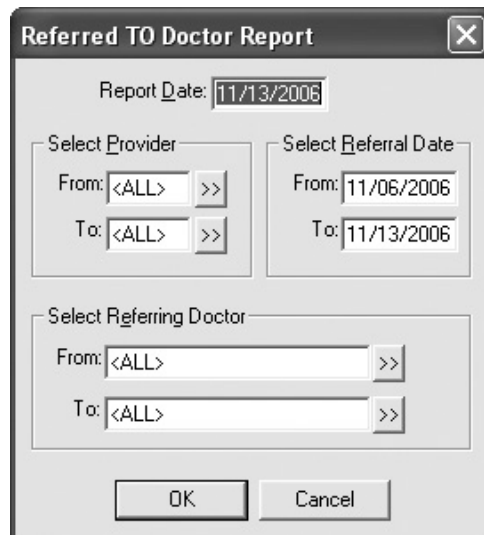
Figure 10-8: The Referred TO Doctor Report window.

3. Select the desired provider range.

4. Enter referral date range.

5. Check the desired **Select Report Type** options.

6. Select the desired referring doctor and procedure code ranges.

7. Click **OK**.

Finance Charge Report

After you have closed the month and have run finance charges, you can print a Finance Charge report to see all accounts that received a finance charge. To print the Finance Charge report, do the following:

1. Open the Reports module.

2. Click ▧ **(Management Reports) | Finance Charge Report**. A screen similar to Figure 10-9 will open.
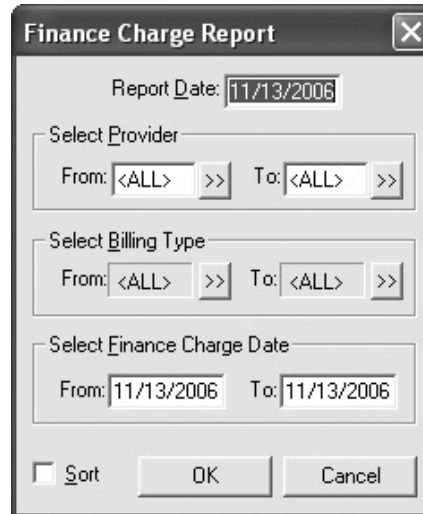
Figure 10-9: The Finance Charge Report window.

3. Select the desired provider and billing type ranges.

4. Enter the finance charge date range.

5. Check **Sort** to alphabetize the report. Otherwise, the report will sort by largest finance charge to the smallest.

6. Click **OK**.

Billing Statements

To print billing statements, do the following:

1. Open the Reports module.

2. Click ▧ **(Billing Statements)**. A screen similar to Figure 10-10, on the next page, will open.

3. The **Statement Date** will default to today's date; there is no need to change this.

4. The **Balance Forward Date** will default to a month prior to today's date. If you want to include procedures older than a month, change this date to the desired cut off date.

5. Select the desired guarantor, provider, and billing type ranges.

6. Enter the **Minimum Balance to Bill**.

7. Check **Include Credit Balances** if you wish to send a statement to patients with a credit balance.

8. If you wish to add a message to all of your statements, enter the message in the **Statement Message** field.

Figure 10-10: The Billing Statements window.

9. Check the desired **Options** by using the following as a guide:

- If **Skip Accounts With Claim Pending** is checked, Easy Dental will not
create a billing statement for an account with outstanding insurance claims,
unless the patient portion of the balance is over the amount specified.

- If **Include Procs With Claim Pending** is checked, Easy Dental will print all
those procedures billed to insurance that have not yet been paid, even if they
were posted before the **Balance Forward Date**.

- If **Print Insurance Estimate** is checked, Easy Dental will print the estimated
insurance coverage on the bottom of the statement.

- If **Print Agreed Payment** is checked, Easy Dental will print the estimated
patient portion of the balance in a **Please Pay this Amount** box at the bottom
of the statement. If the patient has a payment plan, the payment plan amount
will print instead of the estimated patient portion.

  - If **Exclude Outstanding To Insurance** is checked, the entire amount of
all outstanding claims will be excluded from the Please Pay this Amount
portion of the statement.

- **Print Practice Information** is only an option if a pre-printed form is selected
in the Practice Defaults window.

- If **Print Account Aging** is checked, Easy Dental will print the account's aging
on the statement.

- If **Allow Credit Card** is checked, Easy Dental will print a credit card payment
option on the billing statement.

- If the option, **If not Billed Since** is checked, Easy Dental will exclude
accounts that have received a statement within the last month. This is useful if
your office prints a statement when an insurance payment has been received or
does cyclical billing.

- If **Only Bill Accounts Aging** is checked, Easy Dental will only create a billing statement for those accounts that have a balance over the specified aging option. The aging as of the last closed month is used to determine whether a statement will be created.

10. Check the desired report type options.

11. Check **Save As Default** to save these settings.

12. Click **OK**.

Electronic Billing Statements

To send your statements electronically, do the following:

1. Open the Reports module.

2. Create billing statements by following the instructions in the previous section.

3. Highlight the statements in the Batch Processor.

4. Click the ![icon] **(Quick Bill)** icon. A screen similar to Figure 10-11 will open.

5. Mark **Selected Billing Statements** or **Retry Previous Submission**.
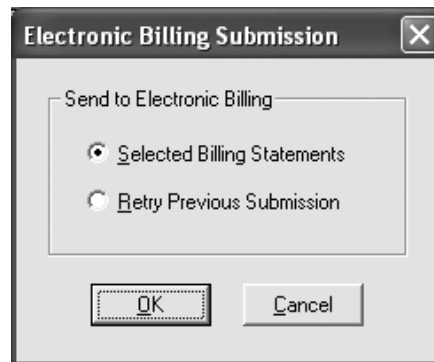
Figure 10-11: The Electronic Billing Submission window.

6. Click **OK** and allow the submission process to complete.

Aging Report

The Aging Report will print a report of every account with a balance. To print the Aging Report, do the following:

1. Open the Reports module.

2. Click ![icon] **(Account Reports) | Aging Report**. A screen similar to Figure 10-12, on the next page, will open.

3. Select the desired guarantor, provider, and billing type ranges.

4. Mark the desired **Minimum Days Past Due** option.

5. Mark the desired **Sort Options**.

6. Check the desired report types by using the following as a guide:

   - The **Standard Aging** option prints all accounts that have a balance.

   - The **Credit Balances** option prints all accounts that have a credit balance.

   - The **Provider Credits** option prints all accounts that have had their payments allocated to the wrong provider.

7. Check **Print Account Note** if desired.
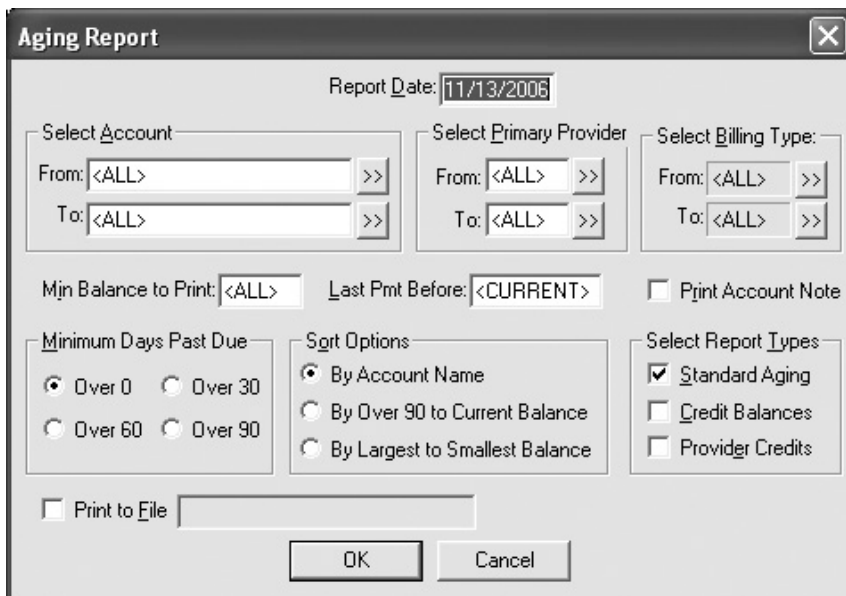
Figure 10-12: The Aging Report window.

8.   Click **OK**.

Practice Analysis Reports

Depending on the options that are selected, the Practice Analysis will give you a detailed report of each procedure code category or individual procedures performed, payments, adjustments made, and/or patients seen during the specific date range. To print the Practice Analysis reports, do the following:

1.   Open the Reports module.

2.   Click ▤ (**Management Reports**) | **Practice Analysis**. A screen similar to Figure 10-13 will open.
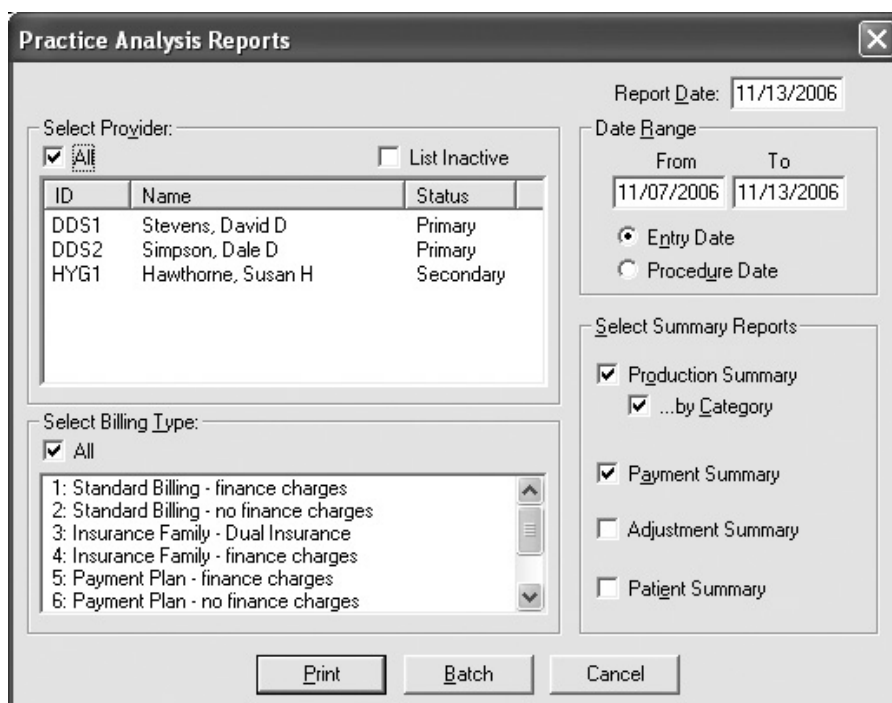
Figure 10-13: The Practice Analysis Reports window.

3. Highlight the desired provider(s) and billing type(s) or check **All**.

4. Enter the desired **Date Range** and mark **Entry Date** or **Procedure Date**.

5. Check the desired **Select Summary Reports** by using the following as a guide:

   - The **Production Summary** gives you a detailed report of each procedure code performed during a specified date range.

     - If **by Category** is checked, the report will show procedure code categories (i.e., Preventive, Diagnostic, Restorative, etc.) rather than individual procedure codes.

   - The **Payment Summary** gives you a detailed report of each payment made within the specified date range.

   - The **Adjustment Summary** gives you a detailed report of adjustment made within the specified date range.

   - The **Patient Summary** gives you a report that includes numbers of active patients, new patients, etc.

6. Click **Print** or **Batch**.

Insurance Aging Report

To print the Insurance Aging report, do the following:

1. Open the Reports module.

2. Click ▨ (**Account Reports**) | **Insurance Aging Report**. A screen similar to Figure 10-14 will open.

Figure 10-14: The Insurance Claim Aging Report window.

3. Select the desired patient, provider and insurance carrier ranges.

4. Mark the desired **Minimum Days Past Due** option.

5. Check **Print Status Notes** if you want the individual claim status notes to print on the report.

6. Click **OK**.

Check Your Skills 11.3

1. Which referral report(s) will give you a list of all patients referred to your office from an outside source?

   _____

2. True or False? By checking the Sort option when running the Finance Charge Report, the report will sort from the largest to the smallest finance charge.

   _____

3. True or False? Billing statements can be run at any time during the month, but it is recommended that they be run around the same time of the month each time they are run.

   _____

4. If you do not want to send a statement to all accounts with outstanding insurance claims, which statement option should you check? If this option is checked, what determines whether an account will be skipped?

   _____

5. True or False? The Print Agreed Payment option is only used for accounts set up with payment agreements.

   _____

6. To avoid double-billing when sending your statements electronically, what should you do?

   _____

7. Which report allows you to get a list of all accounts that have had payments allocated to the incorrect provider?

   _____

8. Which report gives you a detailed list of all procedures posted within a specific time frame?

   _____

9. True or False? Easy Dental does not have a report that allows you to keep track of outstanding insurance claims.

   _____

Topic 4

Other Routines

Purge Exported Files Utility

All exported data is put into an Exports folder located within the Doc directory on the server. Due to HIPAA regulations, you should not leave plain readable or unencrypted text files on the hard drive. So, to meet this regulation, a purge exported files utility has been created in the Reports module that will purge all files within this new folder. To purge exported files, do the following:

The location of the Doc directory can be found in the Letter Template Path field of the Paths tab in Preferences (Reports | Maintenance | Preferences | Paths).

It is a good idea to use this as one of your management routines. You do not necessarily need to do this daily, weekly, or even monthly. You should purge exported files in a reasonable amount of time.

1. From the Reports module, click 🛠 **(Maintenance) | Purge Exported Files**. Figure 10-15 will open.

Figure 10-15: The Purge Exported Files window.

2. Check the desired options.

    • Check **Purge data files for Letters/Quick Letters** if you want to purge all data files created when doing letter merges.

    • Check **Purge exported text and log files (from reports and utilities)** to purge all saved *.txt files (i.e., Aging Report, etc.) and utilities report files.

3. Click **OK** to perform the purge. A window similar to Figure 10-16 will open.

*The Purge Exported Files Utility will **NOT** purge any reports in the Batch Processor. This utility only purges externally exported text files created when performing a utility, letter merge or checking Print to File when printing reports.*

Figure 10-16: The Purge Exported Files window.

4. Click **Yes** if you wish to purge the listed files.

Check Your Skills 11.4

1. Which utility was created to allow you to purge all unencrypted files with PHI on your hard drive?

   _____

2. How often should you purge the files within in the Exports folder?

   _____

3. True or False? By running the Purge Exported Files Utility, all reports within the Batch Processor will be deleted from the system.

   _____

Apply Your Knowledge

Switch to the Tutor Database

Before performing any of the following activities, switch to the Tutor database to ensure that your live data will not be compromised. To switch to the Tutor database, do the following:

1. Open the Reports module and click ⚒ (**Maintenance) | Preferences | Paths**.
2. Make a note of the current path in the **Database Path** field, so you can switch back to your live data after you are done with the activities.
3. Click the **Browse** button next to the **Database Path** field.
4. Browse to the location of your Tutor folder. In most cases, **C:\Program Files\ Ezdental\Tutor** will be your path.
5. Click **OK**.
6. Click **OK** to the message that appears and close Easy Dental.

If you are not sure where your Tutor folder is located, ask your trainer for help or call Easy Dental Support at (800) 824-6375.

Activities

1. Purge the dtxlm41.out file located with the Exports folder from Easy Dental.
2. Run a report that will give you a list of all outstanding claims within the database.
3. Run a deposit slip only showing payments made in cash.
4. Run a list of all patients that you have referred to a different practice.

Solutions

Overview

In this chapter, you will find all of the solutions to the "Check Your Skills" and "Apply Your Knowledge" activities throughout the manual. Remember, the "Check Your Skills" activities are objective and will have an exact answer, whereas the activities found in the "Apply Your Knowledge" sections are subjective and may have several ways to accomplish a task correctly.

Objectives

Once you have completed the "Check Your Skills" and "Apply Your Knowledge" activities, you should check your answers. After checking your answers, you should be able to:

- Learn from your mistakes by learning the proper way to perform a task
- Apply the skills acquired throughout this manual to real-life situations

Chapter 1

Computer Basics

Check Your Skills 1.2

1. You should backup your data to protect against data loss, archive data, and increase system performance.

2. False. Easy Dental recommends a 7-tape rotation cycle for a 5-day work week.

3. Tape 7.

4. B.

Check Your Skills 1.3

1. The Desktop gives you access to the programs that you use.

Apply Your Knowledge 1

1. To create a shortcut for Easy Dental on your Desktop, do the following:

    a. Select Start | Programs.

    b. Right-click the Easy Dental icon.

    c. Select Send To | Desktop (create shortcut) from the menu that appears.

2. To switch between the Schedule and the Patients module, do the following:

    a. Click the Patients module icon on the left toolbar of the Easy Dental shell.

Practice Setup

Check Your Skills 2.1

1. In the Reports module, click Practice Setup | Practice Resource Setup, then click the Edit button next to the Practice Information area.

2. The ID must be unique, at least 4 characters in length, and can have alphanumeric characters.

3. False. All financial information will remain with the inactivated provider.

4. False. Even though the screen that appears when inactivating a provider shows that all Time Clock data will be removed, it actually will remain in the system.

5. By checking List Inactive wherever available, you will have the ability to view all information assigned to the inactivated provider, including financial information.

6. The Provider's Name option in the Print Provider's Signature Using field of the Provider Information window.

7. In the Reports module, click Practice Setup | Practice Resource Setup, check List Inactive in the Staff area, highlight the inactivated staff member, and click Activate.

8. The Practice Information window.

9. The provider/staff member probably does not have a 10-digit phone number entered in their profile.

Check Your Skills 2.2

1. D. It is not at least 7 characters in length and does not contain a number.

2. False. Only the main dentist(s) and/or practice owner(s) should be given rights to all operations within Easy Dental.

3. The Password Administration and Audit, Clear right.

4. In the Reports module, click Practice Setup | Passwords | Change Password.

5. A.

6. The office should have a current backup and should make sure that every user has an ID set up in the Practice Resource Setup.

Check Your Skills 2.3

1. The Difficult Procedure option in the Treatment Flags area will print an asterisk on the Day Sheet indicating that a phone call should be made to the patient at the end of the day.

2. True.

3. The Accept Change button.

Check Your Skills 2.4

1. True.

2. In the Reports module, click Practice Setup | Practice Defaults and highlight the desired provider in the Default Provider field.

3. False. Once you enter the patient's answers into the Patient Survey area of their file, it will print the patient's answers every time it is sent to the printer. You will only get a blank Patient Survey if there is no information entered for that patient.

4. You should mark None to have Easy Dental not assign chart numbers to patient files.

5. The Provider ID Column Statements option in the Print Options tab of Preferences will print the provider's ID on billing statements.

6. True.

7. By clicking the Default Font button in the Report Fonts window, you can restore any font to its original setting.

Check Your Skills 2.5

1. Internet and Dial-up are the two connection methods when setting up eTrans.

2. You should click the Text Connection button to ensure that you are connecting to the NIS servers without problem.

3. You should contact the NIS Support department at (800) 336-8749, option 231.

Apply Your Knowledge 2

1. To add a provider, do the following:
   a. In the Reports module, click Practice Setup | Practice Resource Setup.
   b. Click New in the Provider area of the Practice Resources window.
   c. Enter the information in the fields provided and click OK to save and exit.

2. To inactivate DDS1, do the following:
   a. In the Reports module, click Practice Setup | Practice Resource Setup.
   b. Highlight DDS1 in the Provider area and click Inactivate.
   c. In the Inactivate Provider window, click the Search button next to Select Replacement Provider, select DMD1, and click OK.
   d. Click OK to inactivate.

3. To assign HYG1 as the HIPAA Officer for the practice, do the following:
   a. In the Reports module, click Practice Setup | Practice Resource Setup.
   b. Click the Edit button in the Practice Information area of the Practice Resources window.
   c. In the Settings area of the Practice Information window, click the Search button next to HIPAA Officer, select HYG1, and click OK.
   d. Click OK to save and exit.

4. To add an additional operatory, do the following:
   a. In the Reports module, click Practice Setup | Practice Resource Setup.
   b. Click New in the Operatories area of the Practice Resources window.

    c.   Enter OP-4 as the ID and enter a title for the operatory, if desired.

    d.   Click OK to add.

5.   To add a recommendation note to a procedure, do the following:

    a.   In the Reports module, click Practice Setup | Procedure Code Setup.

    b.   Highlight the Restorative category and highlight D2750 in the list of procedure codes.

    c.   Click Edit.

    d.   Click Edit Note and enter the procedure note in the Recommendation Note area.

    e.   Click OK.

    f.   Click Save and OK to exit.

6.   To create an explosion code for an all porcelain bridge, do the following:

    a.   In the Reports module, click Practice Setup | Explosion Code Setup.

    b.   Click New.

    c.   Enter the Description and Explosion code. (You can also enter an Abbrev. Desc. if desired.)

    d.   In the Type field, mark Bridge.

    e.   In the Bridge Codes area, click the Search button next to Pontic Procedure Code.

    f.   Enter D6245 in the ADA Code field or search for the desired code by clicking the Search button and clicking OK.

    g.   Click the Search button next to Retainer Procedure Code.

    h.   Enter D6750 in the ADA Code field or search for the desired code by clicking the Search button and clicking OK.

    i.   Click OK to save and exit.

7.   To add a medical alert, do the following:

    a.   In the Reports module, click Practice Setup | Definitions | Medical Alerts.

    b.   Highlight any alert already listed and enter Pre-medicate in the Definition Text field.

    c.   Click Add to add the alert to the bottom of the list.

8.   To change an existing medical alert, do the following:

    a.   In the Reports module, click Practice Setup | Definitions | Medical Alerts.

    b.   Highlight Growths from the list and enter Allergy - Latex in the Definition Text field.

    c.   Click Change and Yes to change the alert.

9.   To decrease an entire fee schedule, do the following:

    a.   In the Reports module, click Maintenance | Fee Schedules.

    b.   Click the Search button next to Select Fee Schedule, highlight FEE 5, and click OK.

    c.   In the Select Operation area, mark Change Fee Schedule.

    d.   Mark Decrease by _ % and enter 5 in the field provided.

    e.   Click Change.

    f.   Once the new fees are brought up, click Accept to accept the changes and Close to exit.

10. To set up Easy Dental to use Avery 5160 labels each time you print labels from any module, do the following:

    a. In the Reports module, click Maintenance | Preferences | Print Options.

    b. Check Use Avery 5160 Mailing Labels in the Additional Print Options area.

    c. Click OK to save and exit.

Patients Module

Check Your Skills 3.2

1. The Privacy Requests in the Patient Information window allow you to indicate whether a patient wants to be contacted by phone, mail, or via Easy Web.

2. False. You can enter the 9-digit number in the SS# field. Once you move to the next field, Easy Dental will automatically format the Social Security number with the hyphens in the correct places.

Check Your Skills 3.3

1. You should replace the unwanted alert with an alert you want to use in your office.

2. True.

3. The PRE-MED alerts are showing at the top of the medical alerts list because there is an asterisk in front of the alert.

Check Your Skills 3.5

1. When adding a referred by source, you have the option of choosing whether the source is another doctor or a patient in the database.

2. False. In order to be a referral source, a patient must already be entered in the database.

Check Your Skills 3.6

1. False. You cannot archive a head-of-household unless all other family members are archived and the account has a zero balance.

2. You can only view archived patients in the Select Patient window of the Patients module. You must check Include Archived Patients in order to see archived patients in the patient list.

Check Your Skills 3.7

1. True.

2. After a family edit has been performed, you may need to add or remove insurance from some of the family members, check the balances of both accounts and make necessary adjustments, change the status of the affected patients, and change addresses/phone numbers in needed.

3. You will not be able to continue the family edit process if Easy Dental is open on another computer, if any of the family members of the patient being edited has a pending insurance claims, or if you are trying to move the head-of-house when there are other patients in the family.

4. True.

Check Your Skills 3.8

1. Each patient can have up to 10 patient alerts.

2. True.

3. When setting up the patient alert, check Display Aged Balance with Note to view the family balance each time the alert appears.

4. False. If you check Do Not Show this Alert Again Today, the patient alert will not appear on any computer. Do not check this alert if anyone in the office needs to use it.

5. You must click the Open button in the Patient Notes field in order to see a patient's note.

Check Your Skills 3.9

1. The digital camera must be TWAIN-32 compliant.

2. By clicking Move when selecting a picture from a file, Easy Dental will move the file from its current location to the Patpics folder.

3. False. You can only view a patient picture from the Patients, Chart, and Schedule modules.

Apply Your Knowledge 3

1. To add a new family member to Brandon Crawford's account, do the following:

   a. In the Patients module, click the Select Patient icon and select Brandon Crawford.

   b. Click the Add New Family Member icon and enter the information in the fields provided.

   c. Once you have finished, click OK.

2. To create a new family, do the following:

   a. In the Patients module, click the Select Patient icon and click New Family at the bottom of the window.

   b. Enter the information in the fields provided.

   c. Once you have finished, click OK.

3. To add a medical alert into the system, do the following:

   a. In the Reports module, click Practice Setup | Definitions | Medical Alerts.

   b. Highlight an existing alert and enter Pre-medicate in the Definition Text field.

   c. Click Add.

   d. Click Close.

4. To add a medical alert to a patient, do the following:

   a. In Abigail's file, double-click the Medical Alerts field.

   b. Click the Edit button.

   c. Highlight Pregnancy and Pre-medicate.

   d. Click OK and Close.

5. To assign an employer to a patient, do the following:

   a. In Abigail's file, double-click the Employer field.

   b. Enter Eas as the Employer Name and click the Search button next to the field.

   c. Because Easy Dental Systems, Inc. is not listed, click Cancel.

   d. In the Employer Name field, finish entering the entire employer's name.

   e. Enter the address and phone information in the fields provided.

   f. Click OK.

6. To add a referral source to a patient's file, do the following:

   a. In Abigail's patient file, double-click the Referred By field.

   b. Mark Doctor/Other and click OK.

   c. Because Billboard Ad is not an option, click New.

   d. In the Referred By Information window, enter Billboard Ad as the name of the referral.

   e. Click OK.

   f. Highlight Billboard Ad in the list provided and click OK.

   g. Click OK to return to the Patients module.

7. To archive a patient, do the following:

   a. In Annette Griffin's file, double-click the Patient Information field.

   b. In the first Status field select Archived.

   c. Click OK to any messages that appear.

   d. Click Yes to archive Annette Griffin's file.

8. To create a patient alert for a patient, do the following:

   a. In Kimberly Daniels' patient file, click the Patient Alert icon.

   b. In the Create Patient Alert window, check Always.

   c. Enter a description and note for the alert in the fields provided.

   d. Highlight Create New Appointment and Edit Existing Appointment and click OK.

9. To add a patient note to a patient's account, do the following:

   a. In Greg Griffin's patient file, double-click the Patient Notes field.

   b. Enter the desired note and click OK.

Chapter 4 — Insurance Management

Check Your Skills 4.1

1. False. Any family member can be a subscriber.

2. True.

3. The Assignment of Benefits option tells Easy Dental whether to send insurance payments to the office or directly to the patient.

4. The Current Patient button allows you to assign the same person as both the primary and secondary insurance subscriber for the actual subscriber. If this button is not used and you select the subscriber in the list provided, both primary and secondary dental insurance will always be the same.

Check Your Skills 4.2

1. You can add a new insurance plan from the Patients and/or the Reports modules.

2. The Benefits Renewal field is where you select the month that the yearly insurance benefits renew.

Check Your Skills 4.3

1. To create a claim for a procedure that was not performed today, you would need to highlight those procedures and click the Create Insurance Claim icon.

2. To select more than one procedure in the Accounts module, you need to hold the Ctrl key on the keyboard.

Check Your Skills 4.4

1. True, as long as the insurance carrier is accepting electronic claim attachments. Verify with NIS Support to ensure that a particular carrier is accepting electronic claim attachments.

2. You can import a claim attachment from the Documents module, Easy Image, or from a file.

3. Once an attachment as been attached to the claim, highlight it and click Attachment Information or Non-Electronic. Within the corresponding windows, there will be an Attachment Note field. Enter the desired note in this field.

4. False. You can remove any attachment attached to a claim as long as the claim is not in history.

5. False. You can only attach .txt and .rtf files to claims.

Check Your Skills 4.6

1. False. If you change the Coverage Table for any insurance plan, the change will affect all patients covered by that plan.

2. Fee schedules, the Coverage Table, the Payment Table, and remaining benefits affect insurance estimates.

3. False. The Payment Table overrides the Coverage Table.

4. You can update the Payment Table manually or by posting an insurance payment to a claim.

5. The patient portion is $270. To figure the insurance portion, subtract the deductible from the crown fee and multiply the result by the coverage percent. To figure the patient portion, subtract the insurance portion from the fee of the crown.

   • Insurance Portion = ($600 - $50) x .60 = $330

   • Patient Portion = $600 - $330 = $270

Check Your Skills 4.7

1. When posting the individual amounts an insurance carrier paid on a claim, use the Itemize by Procedure option.

2. You should not update the Payment Table if there is a deductible being applied or the patient has met or will meet their maximum with this claim.

3. True.

4. Use the Total Payment Only option if you do not receive an itemized list of payment made for each procedure attached to the claim.

Apply Your Knowledge 4

1. To assign primary insurance to a subscriber, do the following:
   a. In Abigail's file, double-click the Insurance Information field.
   b. Abigail's name should already be in the Subscriber field. If it is not, click the Search button next to Subscriber and click Current Patient.
   c. Click the Search button next to Carrier.
   d. Find and highlight Ameritas and click OK.
   e. At this point, you can verify that the subscriber ID number is correct, check the desired options for Signature on File, and verify that the Relation to Subscriber is correct.
   f. Once you are finished, click OK.

2. To assign secondary insurance to the same primary subscriber, do the following:
   a. In Abigail's file, double-click the Insurance Information field.
   b. Click the Search button next to Subscriber and click Current Patient.
   c. Click the Search button next to Carrier.
   d. Find and highlight Prudential and click OK.
   e. At this point, you can verify that the subscriber ID number is correct, check the desired options for Signature on File, and verify that the Relation to Subscriber is correct.
   f. Once you are finished, click OK.

3. Use the Reports module or the Patients module to add a new insurance plan into the database. For this example, this will be done from the Reports module, using the following steps:

   a. From the Reports module, click Maintenance | Insurance Maintenance.

   b. Click New.

   c. Enter the insurance carrier's information in the corresponding fields.

   d. Click OK.

   e. Click Close.

4. To create a claim and post an itemized insurance payment, do the following:

   a. In Brandon Crawford's account, highlight all of the procedures performed on 07/07/2000 using the Ctrl key on the keyboard.

   b. Click the Create Insurance Claim icon.

   c. Double-click the claim that was created in Step b.

   d. Click Enter Payment | Itemize by Procedure.

   e. Since the actual EOB does not exist, click OK to each procedure attached.

   f. If desired, enter the check and bank/branch number in the Total Insurance Payment window.

   g. Enter a deductible, if desired.

   h. Click OK.

   i. If you are prompted to create a secondary claim, click OK to the message that appears.

   j. Click Create Secondary.

   k. Close the claim and click Send to Batch.

5. To change the coverage percent for an insurance carrier, do the following:

   a. In Brandon Crawford's file, double-click the Insurance Information field.

   b. Click the Cov Table button for Metropolitan.

   c. Highlight Crowns in the Coverage Table area.

   d. In the field underneath the names of each column of the Coverage Table, change the 50 in the Cov% column to 80.

   e. Click Change.

   f. Click OK.

   g. Click OK again.

Chart Module

Check Your Skills 5.2

1. You can have 24 procedure button set up in the Chart module.

2. Use the Reports module to customize which procedures show in the category buttons. The option in the Procedure Code Editor window is the Show in Chart option under the Treatment Flags area.

Check Your Skills 5.3

1. False. You should always complete treatment using the Set Complete button. So the treatment plan date is updated to today's date.

2. You would use the Existing status to post work performed by the doctor in the office, but completed before Easy Dental was installed.

3. False. You can only delete completed treatment by double-clicking the procedure and clicking the Delete button. This can only be done when the procedure is not attached to a claim or is in history.

4. False. Procedures in history can never be edited because they are considered a legal document.

5. To show mixed dentition, highlight the teeth that need to be changed, click the Primary/Permanent icon, and select the Change Selected option.

Check Your Skills 5.4

1. Each Clinical Note can have up to 4,000 characters.

2. To add something to a Clinical Note in history, click the Append to Note button.

Check Your Skills 5.5

1. False. The icon on the Chart module's toolbar will print both the Dental Chart and the Progress Notes with Chart, whereas the print icon to the left of the Progress Notes will only print the Progress Notes with Chart.

2. Marking Date Range will allow you to choose a certain date range when printing the Progress Notes with Chart.

Apply Your Knowledge 5

1. To set up procedure buttons, do the following:

    a. From the Chart module, click Setup Procedure Buttons.

    b. Click the button for D0120.

c. In the Select Code field, enter D5211.

d. Click the bitmap that looks most like a denture.

e. Click OK.

f. Repeat steps b - e to change D0140 to D5212.

g. Click OK.

2. To remove a procedure from showing a category button, do the following:

a. From the Reports module, click Practice Setup | Procedure Code Setup.

b. Highlight the Endodontics category and find D3910.

c. Highlight D3910 and click Edit.

d. In the Treatment Flags area, uncheck Show in Chart.

3. To add a procedure to a category button, do the following:

a. From the Reports module, click Practice Setup | Procedure Code Setup.

b. Highlight the Preventive category and find D1320.

c. Highlight D1320 and click Edit.

d. In the Treatment Flags area, check Show in Chart.

4. To post a condition and completed procedure in the Chart module, do the following:

a. From Abigail's Chart file, highlight tooth 18.

b. Click the Conditions category button.

c. Highlight 15105 and click OK.

d. Check Incisal/Occlusal and Lingual.

e. Click OK.

f. Click any status button.

g. Highlight tooth 18 again.

h. Click the Resin procedure button.

i. Check Incisal/Occlusal and Lingual.

j. Click OK.

k. Click the Complete button.

5. To post existing work performed by another office, do the following:

a. Highlight the tooth with work and click the category button that includes the desired procedure.

b. Highlight the procedure and click OK.

c. Enter surface information if needed.

d. Click the Existing button.

e. Repeat steps a-d for all existing other work.

6. To post treatment-planned work, follow the steps in Activity 5 for all procedures, but click the Tx Plan button to treatment plan the procedures.

7. To set treatment-planned work completed, do the following:

a. In Brandon Crawford's Chart file, highlight his root canal and amalgam.

b. Click the Set Complete button to the left of the Progress Notes.

8. To change permanent dentition to primary dentition, do the following:

a. In Marla and/or Mary Reese's Chart file, click Primary/Permanent | Change All.

9. To enter a Clinical Note, do the following:

a. From Abigail's Chart file, click the Clinical Notes button.

b. Enter the desired note and click OK.

10. To print the Dental Chart, do the following:

a. In Abigail's Chart file, click Print | Dental Chart.

b. Check the desired options.

c. Click OK to print.

11. To print the Progress Notes with Chart, do the following:

a. In Abigail's Chart file, click the Print icon to the left of the Progress Notes.

b. Mark the desired option.

c. Check Print Procedure Amounts, if desired.

d. Click OK to print.

Estimator

Check Your Skills 6.2

1. False. The deductible is not applied to any one procedure, therefore the amount in the Pat column will not be affected.

2. True.

3. Click View | Use Dental Plan Maximums if the Estimated Insurance Payment is higher than the Annual Plan Benefits.

Apply Your Knowledge 6

1. In the Chart module, click the Select Patient icon, select Abigail Smith, click OK, and then click the Estimator icon to open the Estimator.

2. Click View and make sure there is a check next to Use Dental Plan Maximums.

3. To set an order to procedure(s), do the following:
   a. In Abigail's Estimator file, highlight the MOD resins and click Set Order | 1.
   b. Repeat step a for the implant and bridge procedures, but assign the implant procedures to order A and the bridge procedures to order B.

4. To enter a default note, do the following:
   a. In Abigail's Estimator file, click the Default Note for Printing icon.
   b. Enter the desired note and click OK.

5. To print the Estimator, do the following:
   a. Click Print.
   b. Check Treatment Plan Note.
   c. Check Sub Totals by Order.
   d. Check Print Name Only.
   e. Click OK to print.

Accounts Module

Check Your Skills 7.2

1. True.

Check Your Skills 7.3

1. This patient may already have activity posted to the Accounts or Chart module or their dentition may have been changed in the Chart module using the Primary/Permanent option.
2. You should always modify your billing types as part of your initial setup.
3. False. Billing types can only be assigned to an entire family.

Check Your Skills 7.4

1. FIFO allows you to pay off the oldest balance first when splitting a payment.
2. To equally divide a payment among all the providers listed in the Split Payment window, you should click the = button.
3. If you receive, "This patient does not have dental insurance," when using the Fast Checkout button, you should click OK and Easy Dental will take you to the next step.

Check Your Skills 7.5

1. Before applying finance charges, Easy Dental recommends that you have a current backup of the entire Easy Dental database.
2. The first step to closing a month is to close Easy Dental on ALL workstations.
3. True. Never close a month without a backup!
4. No, you must wait until February 1, 2005 before you can close January.

Apply Your Knowledge 7

1. To change the Treatment Plan background color, do the following:
   a. From the Accounts module, click Setup | Set Accounts/TX Plans Colors.
   b. Click the colored box next to Treatment Plan Background Color.
   c. Highlight the desired color and Click OK.
   d. Click OK.
2. To set up the Easy Checkout button, do the following:
   a. From the Accounts module, click Setup | Easy Checkout Options.

  b. Make sure that Create Insurance Claims, Enter Payment, and Walkout are all checked.

  c. Mark Batch under Create Insurance Claim and Print under Walkout.

3. To post a procedure, do the following:

  a. From any patient's account, click Enter Procedure.

  b. In the Procedure field, enter D7140 and press the Tab key on the keyboard.

  c. Enter 4 as the tooth number.

  d. Click Add.

  e. Click OK/Post.

4. To post a payment, do the following:

  a. In Brandon Crawford's account, click Enter Payment.

  b. In the Type field, select Check Payment - Thank You.

  c. Enter the amount in the Amount field.

  d. Click Split Payment.

  e. If there is more than one provider, click FIFO and then OK/Post. If there is only one provider, click OK/Post.

5. To post an adjustment, do the following:

  a. In Brandon Crawford's account, click Enter Adjustment.

  b. Enter the amount and make sure Professional Courtesy is selected in the Type field.

  c. Click OK.

6. To apply finance charges, do the following:

  a. Normally, you would close Easy Dental on all computers. However, because you are the only one in the Tutor database, you do not have to worry about this step.

  b. From the Accounts module, click Month End | Finance Charges | Apply Finance Charges.

  c. In the Minimum Balance To Charge field, enter 5.00.

  d. Click OK and then OK to the message that appears.

7. To close a month, do the following:

  a. Normally, you would close Easy Dental on all computers. However, because you are the only one in the Tutor database, you do not have to worry about this step.

  b. From the Accounts module, click Month End | Update.

  c. Make sure Reset Insurance Benefits for [month] is checked.

  d. Click OK.

  e. Click OK to the backup reminder.

Schedule Module

Check Your Skills 8.2

1. If you do not want anyone to change the amount of an appointment, you need to mark Always Calculate in the Appointment Amount area of the Practice Appointment Setup window.

2. False. Because Thanksgiving is never on the same day each year, the Set Yearly Holiday on selected day option will not work. You need to highlight each Thanksgiving for each year and select the Close Office on Selected Date option.

3. False. You can only set a vacation day one day at a time as Easy Dental will only let you highlight one day at a time.

4. To quickly switch between views, you can press the corresponding function key on the keyboard.

Check Your Skills 8.3

1. The Find Available Time icon will allow you to search for available appointment times by provider, date, and time.

2. If you click the Wait/Will Call button while scheduling an appointment, it will end up on the Unscheduled List.

3. False. You should always schedule new patient appointments by clicking New Patient from the Select Patient window. This allows you to delete the appointment and not have the patient's information clogging up the Patients module if he/she does not show up for the appointment.

4. To create a new file from a new patient appointment, so that he/she is on his/her own account, you should use the Create New Family option.

5. You can view a patient's medical alerts, appointment note, patient note, and account note from a patient's appointment.

6. To find an appointment quickly, you can use the Find Appointment icon.

7. False. If you change the status, that is all you are doing. The procedures in the appointment are not set complete and posted to the Accounts module. The appointment does not gray out either. You should always complete an appointment by clicking the Set Complete icon from the Schedule module's toolbar.

Check Your Skills 8.4

1. True.

2. By default, you can view up to 7 days in the future for appointments marked as ASAP from the ASAP List.

3. True. If you do not change the Schedule back to Fixed, the appointment will remain on the list to be re-scheduled.

4. False. An appointment can get put on the Unscheduled List either by breaking it or by clicking the Wait/Will Call button in the Appointment Information window.

Check Your Skills 8.5

1. True. Although you do not need to set up Easy Day Planning on each workstation, you must activate it on each workstation.

2. Each provider can have up to 6 time blocks.

3. True.

4. To help prevent office staff from de-activating Easy Day Planning, you can remove the Easy Day Planning icon from the Schedule module's toolbar on each workstation.

Apply Your Knowledge 8

1. To set up practice hours in the Schedule module, do the following:

   a. From the Schedule module, click Setup | Practice Setup.

   b. Check the days that the office is open and click the Search button next to each day to set up the times the office is open each day.

   c. Click OK.

2. To set up holidays for the practice, do the following:

   a. From the Schedule module, click Setup | Practice Schedule.

   b. Highlight each holiday that falls on the same day each year and select Office Closed | Set Yearly Holiday on selected day.

   c. Highlight Thanksgiving in 2005 and select Office Closed | Close Office on selected date.

   d. Click Close.

3. To close the office on certain days, do the following:

   a. From the Schedule module, click Setup | Practice Schedule.

   b. Highlight each day to be closed and select Office Closed | Close Office on selected date.

   c. Click Close.

4. To set up provider schedules, do the following:

   a. From the Schedule module, click Setup | Provider Setup.

   b. Highlight the provider and click Setup.

   c. Check the days that the provider works and click the Search button next to each day to set up the times the provider works each day.

   d. Click OK.

   e. Click Close.

5. To set up provider vacation days, do the following:

   a. From the Schedule module, click Setup | Provider Setup.

   b. Highlight the provider and click Schedule.

   c. Highlight each day the provider is on vacation and select Options | Set Vacation on selected day.

   d. Click Close twice.

6. To set up a view, do the following:

   a. From the Schedule module, click View from the menu.

   b. Click New.

c. Highlight the providers you wish to view in the Provider(s) field.

d. Highlight the operatories you wish to view in the Operatories field.

e. Check the desired days in the Select Days field.

f. Click OK twice.

7. To schedule an appointment, do the following:

a. From the Schedule module, find an available appointment time.

b. Double-click that time in the desired operatory.

c. Select the patient you wish to schedule and click OK.

d. Select the provider for the appointment.

e. Click Tx.

f. Highlight the treatment plan procedures to be done during the appointment. (If the procedure is not listed, you will need to enter the procedures into the Treatment Plans module first.)

g. Click OK.

h. Click OK to schedule the appointment.

8. To schedule a new patient appointment do the following:

a. From the Schedule module, find an available appointment time.

b. Double-click that time in the desired operatory.

c. Click New Patient.

d. Enter the Name, Phone, and Address information for the patient.

e. Click OK.

f. Enter the appointment information.

g. Click OK to schedule the appointment.

9. To create a file using a new patient appointment, do the following:

a. From the Schedule module, highlight the new patient appointment.

b. Switch to the Patients module.

c. Click New Patient With Appointment.

d. Mark Create New Family and select the family that the patient will be added to.

e. Click OK, enter the patient's information and click OK to create the file.

10. To find an existing appointment, do the following:

a. From the Schedule module, click the Find Appointment icon.

b. Enter the first few letters of the patient's last name in the field provided.

c. Click the Search button.

d. Highlight the appointment.

e. Click View Appointment.

11. To set up time blocks, do the following:

a. From the Schedule module, click Setup | Provider Setup.

b. Highlight the provider you wish to set up a time block for and click Setup.

c. Click Add in the Set Time Blocks section.

d. Enter the Time Block Name.

e. Click the colored box to the right of the Time Block Name field, highlight the desired color and click OK.

f. Check the days that you wish to block.

g. Click the Search button next to Start and End for each day to set up the times you wish to block

h. Click OK.

i. Select the desired operatory for this time block in the Assigned Op field.

j. Click OK to save and exit.

k. Click Close.

12. To activate Easy Day Planning, click the Easy Day Planning icon and then right-click the icon and select Remove Button to remove it from the Schedule module's toolbar.

Recall

Check Your Skills 9.1

1. False. You can edit individual patient Recall defaults from their file in the Patients module. This allows you to change the provider and interval for each patient's need.

2. If you want all procedures attached to the Prophy Recall type to always be done by the hygienist, you should mark Spec. in the Provider area of the Edit Recall Type window and select the hygienist's ID.

3. The red 12/18/06 PROPHY on Brandon Crawford's file indicates that he is overdue for his cleaning and that 12/18/06 was his due date.

4. Because Jane did not come in until 02/14/06, her new cleaning due date will not be until 08/15/06 because Easy Dental always updates as of the day that the patient comes in not necessarily from their old due date.

5. To verify whether a Recall type is attached to the right procedure, you should check the Procedure Code Setup from the Reports module and make sure that the type is listed in the Auto Recall field.

Check Your Skills 9.2

1. In order for Easy Dental to recognize whether it should prompt you to create a new recall appointment, a recall type must be attached to the appointment and the procedure attached to that type must be completed when the appointment is completed.

Check Your Skills 9.3

1. If you see a plus sign in the Appt column of the Recall module, this means that the patient has an appointment scheduled in the Schedule module. However, that appointment is NOT attached to Recall.

Check Your Skills 9.4

1. False. Because a patient does not always come in when they are due for their recall, you should always leave the Due Date range blank and go with the appointment date range.

2. Ezdlm41.doc is the template used to run recall cards for patients that are due for their recall type.

Apply Your Knowledge 9

1. To attach a recall type to a procedure, do the following:

   a. From the Reports module, click Practice Setup | Procedure Code Setup.

   b. Highlight the desired procedure and click Edit.

   c. Make sure that the recall type is selected in the Auto Recall field and click OK.

   d. Click Close.

2. To create an appointment that is attached to Recall, do the following:

   a. From the Schedule module, double-click an available time slot and select the desired patient.

   b. Attach the recall procedure in the Reason field and finish making the appointment.

   c. Click the Search button next to the Recall Attached field and highlight the correct recall type. (If the recall type is not listed, you will need to manually attach it to the patient's file in the Patients module.)

   d. Click OK to schedule the appointment.

3. To set up an individual recall interval for a patient, do the following:

   a. From the Patients module, select the desired patient.

   b. Double-click the Recall field.

   c. Highlight the desired type and click Set/Edit, depending whether the patient is already set up on that recall type.

   d. Click the Search button in the Due Date field.

   e. Make the desired change to the interval and click OK.

   f. Click OK.

   g. Click Close.

4. To run a recall list for patients with recall appointments, do the following:

   a. From the Recall module, click Views | Temporary View.

   b. Highlight the desired Type and Status.

   c. Select Only WITH in the Sched. Appt field.

   d. Enter the desired due date span.

   e. Click OK.

5. To run recall cards for patients that are due for their recall appointment, do the following:

   a. From the Reports module, click Letters | Recall | Recall Cards and click Edit.

   b. Make sure that all filters are blank and click the Search button next to the Recall field.

   c. Enter the desired Due Date range and make sure Without Attached Appointment is marked in the Include field and click OK.

   d. Click OK.

   e. Click Create/Merge, mark Create Data Fields and Merge Letters and click OK.

Management Reports

Check Your Skills 10.1

1. True. Unless a procedure is back-dated, meaning that it is entered for a date other than today's date, the entry and procedure dates will be the same for the transaction posted.

2. You can run a chronological, alphabetical, receipts, and/or adjustments day sheet. You can also run a deposit slip from the Day Sheet window as well.

Check Your Skills 10.2

1. You should check the Do Not Bill to Insurance option when posting a procedure if you do not want the procedure to show on the Procedures Not Attached to Insurance Claims Report.

Check Your Skills 10.3

1. The Referred by Doctor/Other and Referred by Patient reports give you a list of all patients referred to your office from an outside source.

2. False. By checking the Sort option when running the Finance Charge report, the report will be sorted alphabetically.

3. True.

4. If you do not want to send a billing statement to all accounts with pending claims, you should check the Skip Accounts With Claim Pending option. However, an account will only be skipped if the patient portion is less than the amount specified.

5. False. The Print Agreed Payment option will also print the estimated patient portion if the account is not set up on a payment agreement.

6. To verify whether electronic billing statements were sent through properly and to help avoid double-billing, the office should contact the NIS Support department.

7. The Provider Credits report found within the Aging Report will print all accounts with payments allocated to the wrong provider.

8. When the Procedure Code Summary report is run without by Category checked, this report will give you a detailed list of all procedures posted within a specified period of time.

9. False. You can keep track of pending claims using the Insurance Aging Report.

Check Your Skills 10.4

1. The Purge Exported Files Utility was created to help you purge files within the Exports folder, so that you can remain HIPAA-compliant by not having unencrypted data with PHI on your server's hard drive.

2. You should run the Purge Exported Files Utility within a reasonable amount of time. This could be daily, weekly, or even monthly.

3. False. The Purge Exported Files Utility will only purge those files located within the Exports folder of the Doc directory on the server. Everything in the Batch Processor will remain in the Batch Processor until they are deleted manually.

Apply Your Knowledge 10

1. To purge the ezdlm41.out file from the Exports folder, do the following:

   a. From the Reports module, click Maintenance | Purge Exported Files.

   b. Check Purge data files for Letters/Quick Letters and click OK.

   c. Highlight ezdlm41.out and click Yes.

2. To run a report of all outstanding claims within the database, do the following:

   a. From the Reports module, click Account Reports | Insurance Aging Report.

   b. Leave all options at their default and click OK.

3. To run a deposit slip with cash payments only, do the following:

   a. From the Reports module, click Management Reports | Day Sheet (Charges and Receipts).

   b. Under Select Report Types, check Deposit Slip.

   c. Click Payment Types and highlight, Cash Payment - Thank You.

   d. Click OK twice.

4. To get a list of all patients that you have referred to a different practice, do the following:

   a. From the Reports module, click Management Reports | Referred TO Doctor Report.

   b. Enter the desired Select Referral Date and leave all other options at their default.

   c. Click OK.