

OfficeMate Administration User's Guide

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Getting Started

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- Logging into OfficeMate, 18
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- Setting Up ExamWRITER, 109
- Encrypting & Decrypting the Database, 126
- Auditing Activities, 128
- Changing Your Password, 132

Choosing OfficeMate to record and manage your eyecare practice records is the first step in creating a fully automated medical practice. This guide will show you how to use OfficeMate to maintain patient demographic and inventory information, create Rx and lab orders, generate fee slips and receipts, process insurance information, and generate practice and patient reports.

Finding More Information

In addition to the *OfficeMate Administration User's Guide*, the following tools are available to you to help you better understand and use OfficeMate:

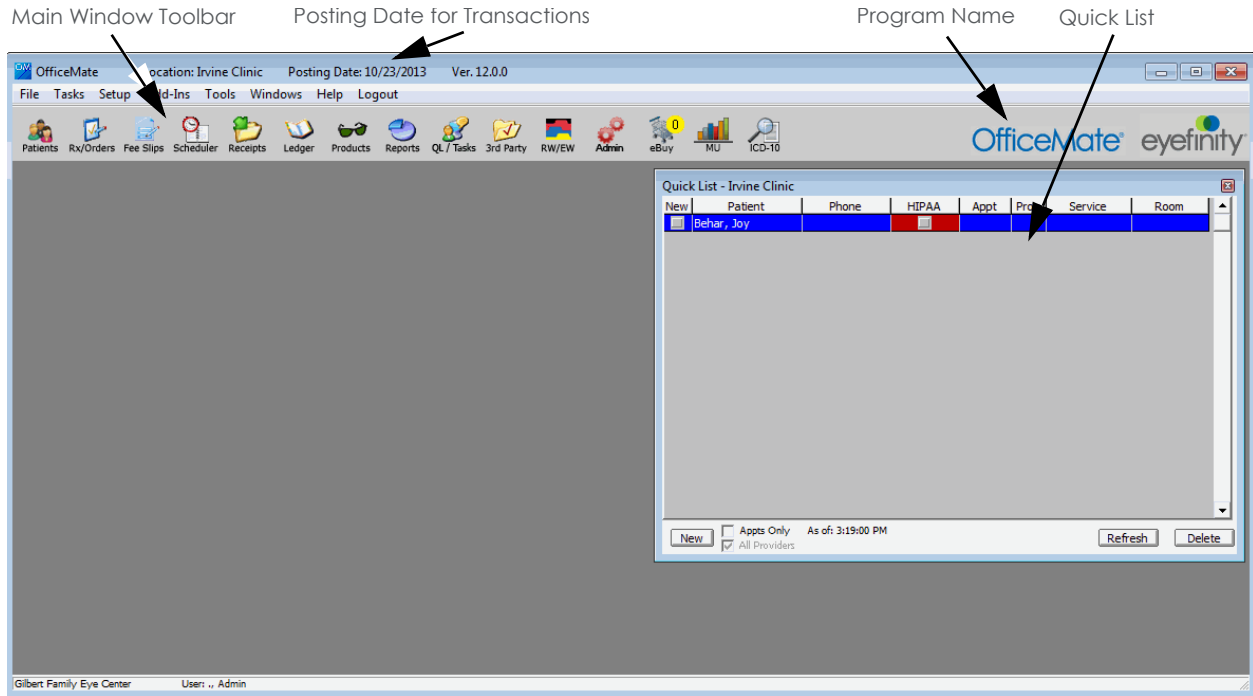
- *Training Videos*. These Internet-based, prerecorded training videos should be viewed by all OfficeMate users. Go to www.eyefinity.com/training-and-support/Support-Community.html and log into the Eyefinity Support Community to view OfficeMate training sessions.
- *Eyefinity Support Community*. In this community, you can create and update support cases, access our growing knowledge base of information, ask questions and get answers from your peers, and contribute your ideas to improving Eyefinity products. Go to www.eyefinity.com/training-and-support/Support-Community.html to access the Eyefinity Support Community.
- *Online Help*. To access online help for OfficeMate, click **Help** on the OfficeMate main window and select **OfficeMate Help Topics**. The OfficeMate help system opens. You can also access online help by pressing the **F1** key anywhere in OfficeMate.

OfficeMate Overview

Your OfficeMate software manages all of your patient, practice, and product information in a secure database that is easy to modify and use. This section includes the following topics:

- [Explanation of Interface Elements, 16](#)
- [Explanation of Navigation Schemes, 16](#)

Explanation of Interface Elements



Explanation of Navigation Schemes

OfficeMate has many unique navigation schemes. Eyefinity highly recommends familiarizing yourself with the OfficeMate navigation schemes in order to more quickly and efficiently navigate through OfficeMate and perform tasks.

This section tells you how to use the various navigation schemes in OfficeMate, including how

- [To use right-click functionality, 16](#)
- [To add and maintain list box selections \(F12\), 17](#)
- [To search for patients and guarantors \(F2\), 17](#)
- [To use other keyboard shortcuts, 18](#)

► To use right-click functionality

- ❖ Right-click the Patient Demographic, Eyewear Order, Soft Lens Order, Hard Lens Order, Fee Slip, Patient Ledger, and Receipts & Adjustments window title bars or on a patient in the Quick List window to open a shortcut window with options to open the current patient's Patient Demographic, Rx Eyewear,

For more information on navigating in OfficeMate, watch the "[Navigation and Help](#)" video.

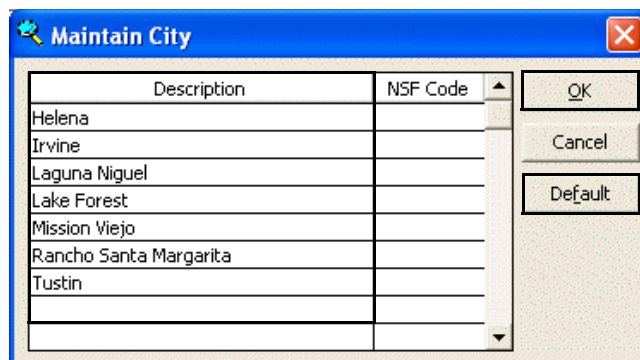
Soft Lens, Hard Lens, Schedule, and Receipts windows. You can also open ExamWRITER, print labels and documents, and change the patient's room location by right-clicking on these title bars.



- For example, right-click on the Patient Demographic window title bar and select **Ledger**. The Patient Ledger window opens and displays the ledger information for the same patient displayed on the Patient Demographic window.
- For example, right-click on the Patient Ledger window title bar, click **Label**, and select **Mailing Label**. The Print Labels window opens, allowing you to print a label.

► **To add and maintain list box selections (F12)**

- Press the **F12** key when your cursor is in a drop-down box to open a **Maintain** window and add new items to the drop-down menu selections.
- For example, press **F12** while your cursor is in the **City** drop-down box in the **Patient Demographic** window. The **Maintain City** window opens. Type a city in the **Description** column and click **OK** to add the city to the drop-down menu selections or select a city and click **Default** to make that city the default selection in the drop-down menu.



► **To search for patients and guarantors (F2)**

- ❖ Press the **F2** key in the Patient Demographic, Eyewear Order, Soft Lens Order, Hard Lens Order, Fee Slip, Appointment Scheduling, Receipts &

Adjustments, and Patient Ledger windows to open the Find Patient/Guarantor window and search for a patient or guarantor.

► **To use other keyboard shortcuts**

- Press the **Alt** key and the underlined letter in a button or tab to open the window that would open if you clicked the button or tab with your mouse.
 - For example, press the **Alt** and **L** keys at the same time in the Fee Slip window to open the Patient Ledger window.
 - For example, press the **Alt** and **C** keys at the same time in the Patient Demographic window to open the Correspondence History tab on the Patient Demographic window.
- Press the **Tab** key to move your cursor to the next text box in a window.
 - For example, while your cursor is in the Last Name text box in the Patient Demographic window, press the **Tab** key to move your cursor to the First Name text box.
- Press the **Esc** key to close a window.

Logging into OfficeMate

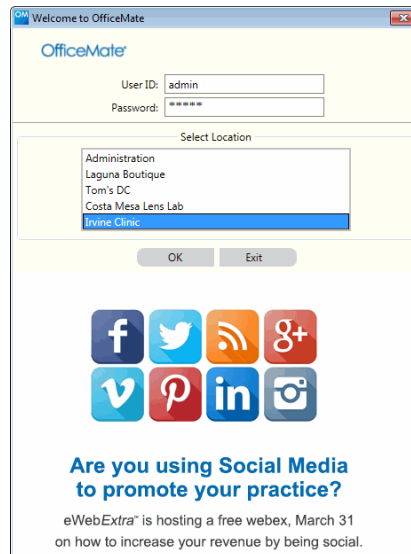
Before you can log into OfficeMate or OfficeMate Administration, you must be set up as a provider or staff member and have appropriate security privileges assigned to you. For information on setting up providers and staff members, go to [To modify or add provider information on page 51](#). For information on assigning security privileges, go to [Setting Up Security on page 96](#). Also, before you can log into OfficeMate, you must have all of the locations set up that users will be logging

into. For information on setting up locations, go to [Maintaining Locations](#) on page 24.

NOTE

If you are logging into OfficeMate for the first time, read the “Opening OfficeMate” instructions in the [Installing & Activating OfficeMate/ExamWRITER for New Users](#) document.

1. Double-click the **OfficeMate** icon on your desktop.
2. Type your user ID in the **User ID** text box.
3. Type your password in the **Password** text box.
4. Click **OK**.
5. If you have access to more than one location, select a location from the list that is displayed and click **OK**.



When the program opens, OfficeMate or Administration will appear on the icon bar, depending on whether you selected Administration or a location.

Setting up OfficeMate

You can set up OfficeMate before you use it, or you can change your setup options anytime while you are using the program. This section includes the following topics:

- [Changing the Posting Date, 20](#)
- [Setting Up the Printer, 21](#)
- [Maintaining Locations, 24](#)
- [Maintaining Business Names, 32](#)
- [Maintaining Vendors, 33](#)
- [Customizing OfficeMate, 36](#)
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- [Setting Up Sales Tax Codes, 83](#)
- [Setting Up Location Inventory Preferences, 85](#)
- [Setting Up Discounts & Packages, 89](#)

Changing the Posting Date

All OfficeMate transactions are recorded on the posting date. The Daily Transaction Audit report is the only report that displays all transactions that occurred on a specific calendar date regardless of the posting date. All other reports display transactions that occurred on the posting date. If you change the posting date to record backdated transactions, be sure to change the posting date back to today's date after you are finished recording backdated transactions.

NOTES

- When you open OfficeMate, the posting date is the same as your computer date. If you change the posting date, it will revert back to the computer date when you close OfficeMate or log out of OfficeMate. Changing the posting date on your computer does not affect the computer date on your computer or other computers on your network.
- The Change Posting Date feature is not available if you are using the General Ledger Interface.
- The Change Posting Date feature is only available in OfficeMate Administration if the **Allow Posting date to be changed in Administration** preference is set to Yes. The feature is only available in OfficeMate if the **Allow Posting date to be changed in Locations** preference is set to Yes.

1. From the OfficeMate Administration main window, click **Tasks**, and select **Change Posting Date**.

NOTE

If you are in OfficeMate, click **File** and select **Change Posting Date**.

The Posting Date window opens.

2. Change the posting date using one of the following methods:
 - Type the new posting date in the **Posting Date** text box.
 - Click the **Posting Date** pop-up menu arrow to choose a date on the calendar.
 - Click **Today** to change the posting date to today's date.



3. Click **OK**.

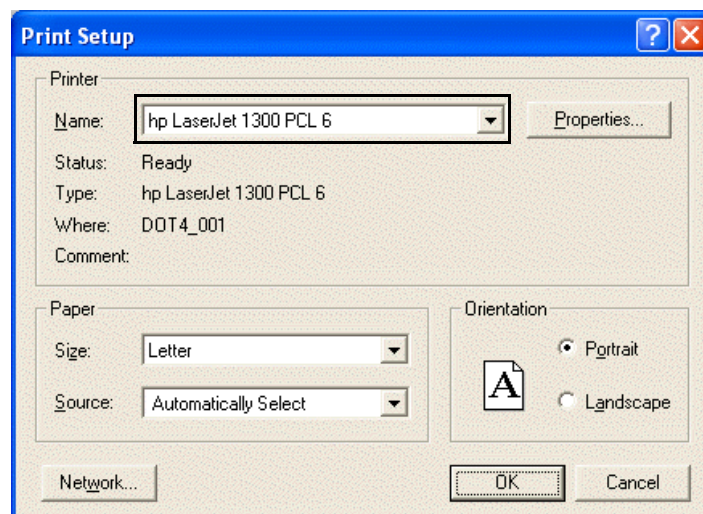
Setting Up the Printer

This section tells you how to set up the printer, including how

- [To select a printer, 21](#)
- [To change the printer's document properties, 22](#)
- [To select the paper size and source, 22](#)
- [To change the paper orientation, 23](#)

► To select a printer

1. From the OfficeMate main window, click **File**, and select **Printer Setup**. The Print Setup window opens.
2. Select the printer's name that you want to use from the **Name** drop-down menu.

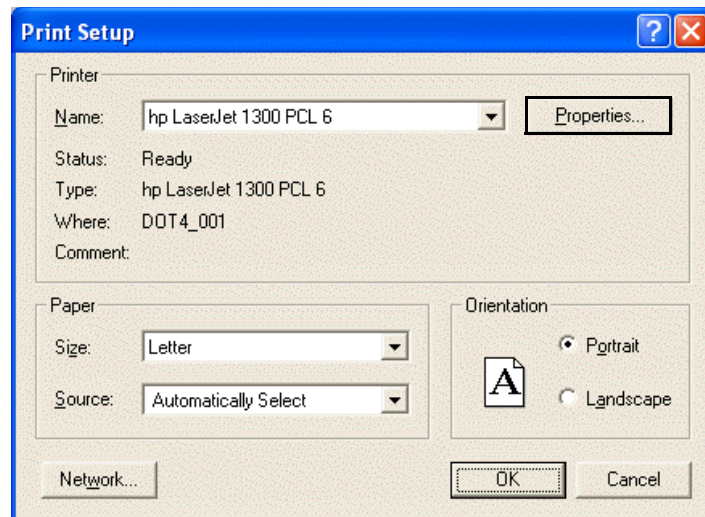


For more information on changing the printer's document properties, refer to the manual that came with the printer or computer operating system.

3. Click **OK** to close the Print Setup window.

► To change the printer's document properties

1. From the OfficeMate main window, click **File**, and select **Printer Setup**. The Print Setup window opens.
2. Click **Properties** to change the printer's document properties.



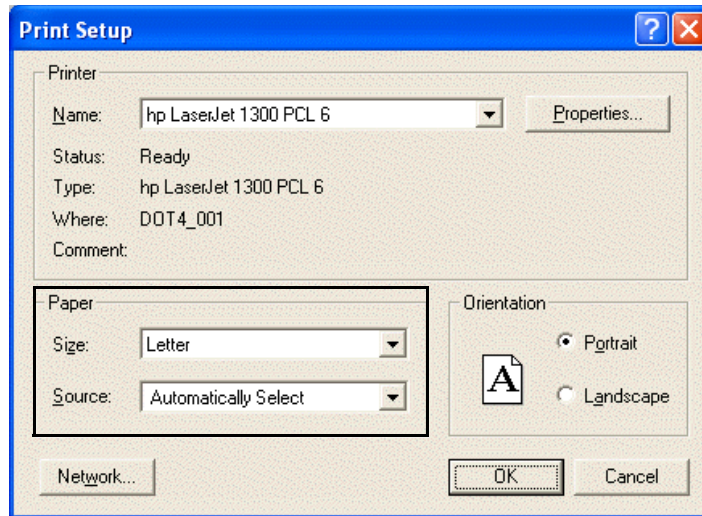
The Document Properties window opens.

3. Click on the tabs and change the printer's document properties.
4. Click **OK** to close the Document Properties window.
5. Click **OK** to close the Print Setup window.

► To select the paper size and source

1. From the OfficeMate main window, click **File**, and select **Printer Setup**. The Print Setup window opens.
2. Select the paper size from the **Size** drop-down menu.

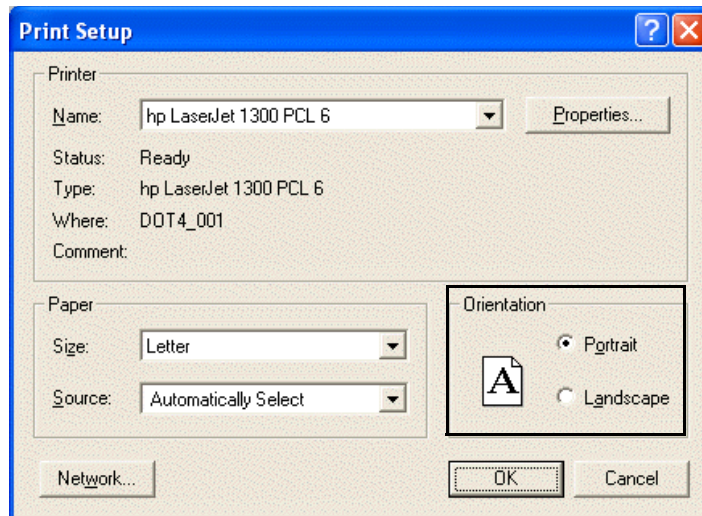
3. If activated, select the paper source from the **Source** drop-down menu.



4. Click **OK** to close the Print Setup window.

► **To change the paper orientation**

1. From the OfficeMate main window, click **File**, and select **Printer Setup**. The Print Setup window opens.
2. Select the **Portrait** or **Landscape** orientation radio button.



3. Click **OK** to close the Print Setup window.

Maintaining Locations

For more information on maintaining locations, watch the "Location Maintenance and Business Names" video.

This section tells you how to set up such locations as an administrative location, stores, distribution centers, and labs, that are internal to your practice including how

- To open the Location Maintenance window, 24
- To maintain location information, 24
- To add a company lab to the vendor list, 32

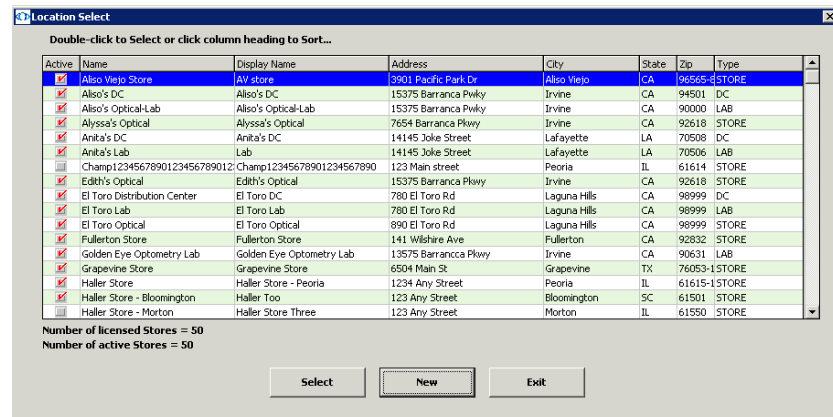
► To open the Location Maintenance window

1. From the OfficeMate Administration main window, click **Setup** and select **Location Maintenance**.

The Location Select window opens.

NOTE Click on the column headings to sort the columns in ascending or descending order.

2. Complete one of the following tasks:
 - Click **New** to create a new location (if the number of active locations does not equal the number of licensed locations).
 - Double-click a location to modify it.
 - Highlight a location and click **Select** to modify it.



The Location Maintenance window opens. If you are a single-location practice, your office address is displayed as the administrative location.

► To maintain location information

1. Create a new location or select an existing location to edit in the Location Maintenance window. For information on creating a new location or opening

an existing location, go to [To open the Location Maintenance window on page 24](#).

2. Enter the appropriate address and contact information for this location in the text boxes.

NOTES

- If you are using the VSP interface to send claims to VSP electronically, you must enter the same phone number that Eyefinity has on file for this location. If the phone number does not match Eyefinity's records, your claims will be rejected.
- If you are sending claims in the ANSI 5010 format, you must enter physical address and ZIP+4 information. Post office boxes and five-digit ZIP codes will result in claim errors.

3. If you are creating a new location, select a location type from the **Location Type** drop-down menu; otherwise, go to step 4.

NOTES

- Ensure that you have selected the correct location type for the new location. After saving the new location, you cannot modify the location type. The location types and definitions are listed below:
 - *Administration*. This location type can perform all set up functions record adjustments to the ledger, receive payments, schedule appointments, process third party insurance claims, create purchase orders, perform inventory functions, modify patient records, and create reports. This location type *cannot* perform end-of-day processes, create lab and Rx orders, create and edit fee slips, and record sales, although it can view lab and Rx orders.
 - *Location*. This location type can perform end-of-day processes, record adjustments to the ledger, receive payments, create lab and Rx orders, create fee slips, record sales, schedule appointments, process third party insurance claims, create purchase orders, perform inventory functions, modify patient records, and create reports. This location type *cannot* perform any set up functions.
 - *Distribution Center*. This location type can view lab and Rx orders, perform inventory functions, create purchase orders, and create reports. This location type *cannot* create lab or Rx orders, create fee slips, record sales, perform end-of-day processes, modify patient records, and perform any set up functions.
 - *Lab*. This location type can view lab and Rx orders, perform inventory functions, create purchase orders, modify patient records, and create reports. This location type *cannot* create lab or Rx orders, create fee slips, record sales, perform end-of-day processes, and perform any set up functions.
- If a company lab and distribution center share a single location, create a single location in OfficeMate and select Lab from the Location Type drop-down menu. Setting up the lab and distribution center as a single location will enable you to more easily track products in transit and save steps in the ordering process.

4. Select the **Active** check box if the location is active, or leave the **Active** check box deselected if the location is not active.
5. Type a name in the **Display Name** text box. The name in the Display Name field displays on screen only and does not appear on patient statements or insurance claims.

6. If this is an administrative location and if you use Essilor Visioffice, type the password in the **Visioffice** text box to activate the ability to record Visioffice measurements on OfficeMate lab orders.
7. Select the location's region from the **Region** drop-down menu.

NOTE Press the **F12** key when your cursor is in the Region drop-down box to open a **Maintain** window and add new regions to the drop-down menu selection.

8. Select a city from the **Default City** drop-down menu that will default on the Patient Demographic window when new patients are added at this location.
9. Select a state from the **Default State** drop-down menu that will default on the Patient Demographic window when new patients are added at this location.
10. If the location will be printing barcode labels, set the **Bar Code Output Path** by clicking the ... (ellipsis) button and selecting a folder on the network.
11. Select a network printer that the location will use to print medical prescriptions from the **Medical Rx** drop-down menu.
12. Select a network printer that the location will use to print ophthalmic lens prescriptions from the **Oph Rx** drop-down menu.
13. Type the location's website address in the **Website** text box.
14. Type the location's tax identification in the **Tax ID** text box.

NOTE The Tax ID is required for sales tax to be calculated and if you are using the VSP Interface.

15. Select appropriate tax locations from the **State Tax**, **County Tax**, and **Local Tax** drop-down menus. For information on adding tax locations to the Tax drop-down menus, go to [Setting Up Sales Tax Codes on page 83](#).

16. Enter the **Claims Information** for this location:
- a. Select a qualifier from the **Qualifier (32b)** drop-down menu.

NOTE

Ensure that you are selecting the appropriate qualifier description and ANSI code in the Qualifier (32b) drop-down menu, as listed below:

- Blue Cross Provider Number - 1A
- Blue Shield Provider Number - 1B
- CHAMPUS Identification Number - 1H
- Clinical Lab. Improvement Amendment Number - X4
- Federal Tax Payer's Identification Number - TJ
- Location Number - LU
- Medicaid Provider Number - 1D
- Medicare Provider Number - 1C
- Provider Commercial Number - G2
- Provider Plan Network Identification Number - N5
- Provider UPIN Number - 1G
- State Industrial Accident Provider Number - X5
- State License Number - 0B

- b. Type your facility ID in the **Facility ID (32b)** field.
- c. Type the facility's billing name in the **Billing Name (33)** field.
- d. Type your service facility NPI number (either your group NPI number or your provider NPI number) in the **NPI Num (33a)** field.

NOTES

- You *must* record an NPI number for each location.
- If you are using the VSP Interface, the NPI number is required.

- e. Type the four-character code that represents the type of bill in the **Type of Bill UB04 FL4** field.
17. If you are integrating OfficeMate with another practice management system, and your practice has purchased the HL7 Interface, enter the information

required by your practice management system in the **HL7 Integration** fields; otherwise, skip to step 22:

- a. Type the name or number that identifies the location in the practice management system in the **Location ID** field.

NOTE	The Location ID must be the same as the location identifier used in the HL7 settings of the practice management system.
-------------	---

- b. Select the **Production** radio button to run the interface in production mode or click the **Test** radio button to run the interface in test mode.
- c. Type the control group identifier in the **Control Group** field, as needed.
- d. Type the sending application identifier in the **Sending App** field, as needed.
- e. Type the sending facility identifier in the **Sending Fac** field, as needed.
- f. Type the receiving application identifier in the **Rec. App** field, as needed.
- g. Type the receiving facility identifier in the **Rec. Fac.** field, as needed.

NOTES	<ul style="list-style-type: none"> • The Control Group, Sending App, Sending Fac, Rec App, Fac App., information comes from your practice management system's HL7 interface settings. Not all of these fields are required by all practice management systems. • If you are using or planning to use Eyefinity EHR, the Migration Wizard will complete the HL7 interface information for you. • The Charge Interface On check box is not functional at this time.
--------------	--

18. If you submit claims to VSP electronically, enter your Eyefinity login information in the **VSP Integration** fields; otherwise, skip to step 17:

- a. Type the username (Rid) that Eyefinity Customer Care gave to you in the **User ID** text box. The username is the same as your Eyefinity login ID.
- b. Type the password (Rpw) that Eyefinity Customer Care gave to you in the **Password** text box. The password is the same as your Eyefinity login password.
- c. Click **Get Office ID** to automatically retrieve your office ID.

NOTE	If the office ID cannot be found, type the office ID (Oid), including any spaces, that Eyefinity Customer Care gave to you in the Office Id text box.
-------------	---

19. If you are using the OfficeMate Lab Interface, select the location's default lab from the **Default Lab** drop-down menu.

For more information on setting up the OfficeMate VSP Interface, go to [Setting Up the OfficeMate VSP Interface Manually](#) on page 516.

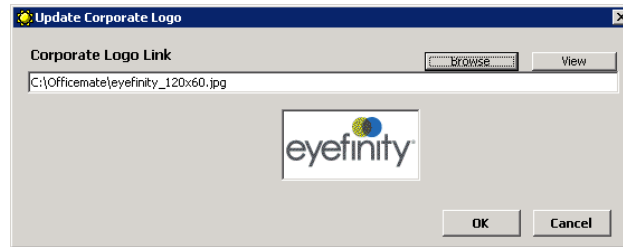
20. If you use the General Ledger Interface, type the location ID in the **G/L Location ID** text box.

NOTES

- The G/L Location ID may be any number of letters or numbers, but you must be consistent from location to location. The G/L Location ID must fit within the parameters for the location segment length that are established in the General Ledger Setup window.
- The G/L Location ID field is not visible if the General Ledger Interface has not been enabled.
- For more information about General Ledger setup go to [Using the General Ledger Interface on page 765](#).

21. Click **Update Logo** to browse for and select a corporate logo. This logo appears on the Price Quote with Insurance Coverage document that you can print from the Price Order window.

NOTE Browse to and select a .bmp, .jpg, .ico, or .wmf file that uses a resolution of 120x60 pixels so that it displays well on the Price Quote with Insurance Coverage document.



Location Maintenance

Name: Irvine Store
 Address 1: 38 Discovery
 Address 2: Suite 250
 City, State, Zip: Irvine, California, 92618
 Phone: (800) 942-5353, Default Area Code: 949, FAX:
 Contact: Practice Manager
 Location type: Location, Posting Date: 01/10/2012
 Display Name: Irvine Store, Active:
 Region: , Default City: , Default State: California
 Bar Code Output Path: , Medical Rx: HP LaserJet 1022 (redirected 2), Oph Rx: HP LaserJet 1022 (redirected 2)
 Sales Tax: Tax ID: 9514382566669, State Tax: California, County Tax: , Local Tax:
 Claims information: Qualifier (32b): , Facility ID (32b): , Billing Name (33): , NPI Num (33a): NP19876, Type of Bill: UB04 FL4
 HL7 Integration: Location ID: , Processing Type: Production, Control Group: , Sending App: , Sending Fac: , Rec. App: , Rec. Fac: , Charge Interface On:
 VSP Integration: User ID: 8009425353, Password: ****, VSP Phone: (800) 942-5353, Get Office ID: , Office ID: 5581275051, You must setup each location individually
 Lab Orders: Default Lab:
 Corporate Logo: eyefinity, Update Logo
 General Ledger Interface: G/L Location ID:
 Buttons: Delete, Cancel, Save/Exit, Credit Card Processing Setup

22. Click **Save/Exit**.

NOTE The Credit Card Processing button is disabled. This feature will be enabled in a future version of OfficeMate.

► To add a company lab to the vendor list

NOTE Adding a lab to the vendor list in this manner copies the address, phone, and contact information to the Vendor Maintenance window and allows the lab to be selected as the vendor on eyewear and contact lens orders.

1. Open a lab by selecting it from the Location Select window. For information on creating a new location or opening an existing location, go to [To open the Location Maintenance window on page 24](#).

2. Click **Add to Vendor List**.

A dialog box displays informing you that the lab has been added to the vendor list.

NOTE The Add to Vendor List button is not available on the Location Maintenance window when you initially create a lab. You must save the lab, exit the Location Maintenance window, and reopen the lab to enable the Add to Vendor List button.

3. Click **OK** to close the dialog box.
4. Close the Location Maintenance and Location Select windows.
5. Open the Vendor Maintenance window to edit the lab's vendor information. For more information about editing vendor information, go to [Maintaining Vendors on page 33](#).

Maintaining Business Names

For more information on maintaining business names, watch the "[Location Maintenance and Business Names](#)" video.

1. On the OfficeMate Administration main window, click **Setup**, and select **Business Names**.

The Business Names window opens. If you are a single-location practice, your office address is displayed as the business location.

- Update or add information in the **Fax #** and **Contact** text boxes.

NOTES

- If you submit ANSI insurance claims, you must type a contact name in the **Contact** text box.
- You cannot modify your practice name, address, or phone number from within the Business Names window in OfficeMate Administration. If you need to modify this information, call Eyefinity at 800.269.3666.

- Click **OK** to save the business name information and exit the Business Names window.

Maintaining Vendors

For more information on maintaining vendors, watch the “Vendor and Location Settings” video.

This section describes how to set up and maintain contact lens, frame, and accessory vendors, including how

- [To add or modify vendors, 33](#)
- [To add or modify vendor location settings, 35](#)
- [To modify lab settings, 36](#)

► To add or modify vendors

NOTE

If you are adding an internal company lab as a vendor, go to [To add a company lab to the vendor list on page 32](#).

- On the OfficeMate Administration main window, click **Setup**, and select **Vendor Maintenance**.

The Vendor Maintenance window opens.

- Click **New** to add a new vendor.

OR

Select a vendor from the **Vendor Name** drop-down menu to modify a vendor.

NOTE

You should only delete vendors if they are *not* linked to any exams.

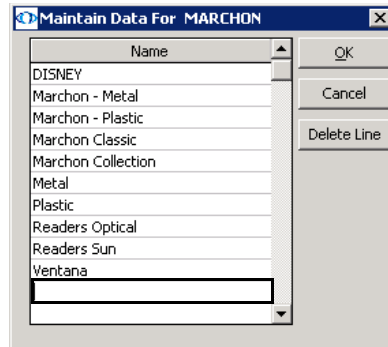
- Type text into the text boxes and choose appropriate options from the drop-down menus and check boxes.

NOTE

If you selected Lab from the Products/Services Provided box and you have purchased the OfficeMate Lab Interface, refer to the *Setting Up & Using the OfficeMate Lab Interface* document for information about setting up labs in OfficeMate Administration.

4. Click **Frame Designers/Collections**, if available, to open the Maintain Data window and modify and delete the vendor's frame designers and collections.
 - To add a frame collection, type the name of the collection in the first blank line and click **OK** when you are finished.
 - To delete a frame collection, select the line and click **Delete**.

NOTE Do not delete frame collections that are linked to an exam.



5. Select the **Suppress Purchase Orders for Vendor** check box to prevent purchase orders from being generated for this vendor automatically based on fee slips or quantity on hand.

NOTE You will still be able to create manual purchase orders for this vendor.

6. Select the **Stocking Levels and Reorder Points are Maintained for Inventoried Products** check box to create a PO to fulfill patient orders.

NOTE Selecting the check box causes purchase orders to be created for the vendor only from quantities on hand. If this check box is not selected, a purchase order may be created to replenish stock (on-hand and not-on-hand) that is sold on fee slips.

7. To record vendor account numbers for individual locations, go to [To add or modify vendor location settings on page 35](#).
8. Click **OK** when you are finished.

► To add or modify vendor location settings

The location settings allow you to record the account numbers the vendor may have assigned to the individual locations.

NOTE A corporate account number can be recorded in the Account # field on the Vendor tab. You do not need to record the corporate account number for each individual location.

1. On the OfficeMate Administration main window, click **Setup**, and select **Vendor Maintenance**.

The Vendor Maintenance window opens.

2. Select a vendor from the **Vendor Name** drop-down menu.
3. Click the **Locations Settings** tab.
4. Type the account numbers in the **Account No.** column for each location that has been assigned an account number by the vendor.

5. When you are finished, click **OK**.

► To modify lab settings

The lab settings in the Vendor Maintenance window are used to configure OfficeMate to interface with internal or external labs that use the DVI, Innovations, Labzilla, Omics, or Optifacts lab systems.

If you have purchased the OfficeMate Lab Interface, refer to the *Setting Up & Using the OfficeMate Lab Interface* document for information about setting up labs in OfficeMate Administration.

If you are interested in a demonstration of the OfficeMate Lab Interface, call Eyefinity at **800.269.3666**.

Customizing OfficeMate

Although you can customize OfficeMate at any time, we suggest that you complete the customization instructions before you start using OfficeMate to

record and store practice management records. This section tells you how to customize OfficeMate, including how

- To add list box selections, 37
- To modify list box selections, 38
- To add ZIP code shortcuts, 39
- To modify ZIP code shortcuts, 40
- To create new recall schedules, 41
- To modify recall schedules, 42
- To delete recall schedules, 43
- To select preferred languages, 44
- To create new service agreement renewal plans, 45
- To modify service agreement renewal plans, 46
- To delete service agreement renewal plans, 47
- To identify contact lens duplication fees, 48
- To maintain marketing groups, categories, & costs, 49

For more information on adding and modifying list box selections, watch the "[List Box Selections](#)" video.

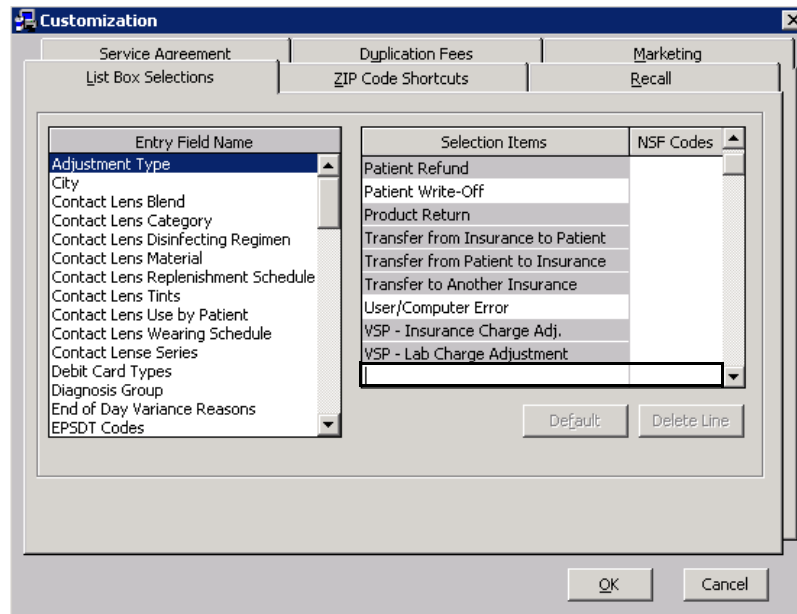
► **To add list box selections**

NOTE

You can add new selections to a list box while you are working in OfficeMate Administration by pressing the F12 key any time your cursor is in a list box.

1. On the OfficeMate Administration main window, click **Setup**, and select **Customization**.
The Customization window opens.
2. Select an item in the **Entry Field Name** box.

- Place your cursor in the first blank line at the bottom of the **Selection Items** box.



- Type the new selection item or NSF code.

NOTE

- To make an item the default item in the list, select the item in the Selection Items box and click **Default**.
- To deselect a default item in the list, select the default item in the Selection Items box and click **UnDefault**.

- Click **OK** to save the new list box selection and exit the Customization window.

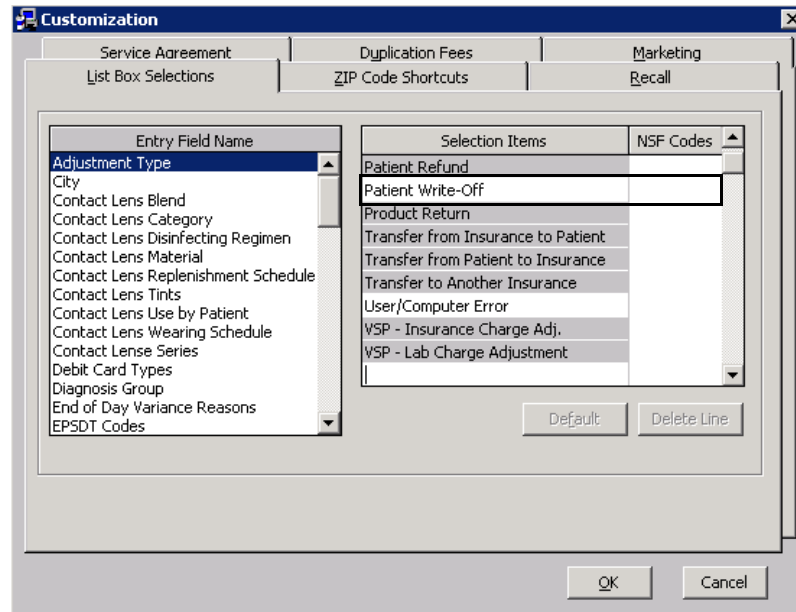
► **To modify list box selections**

NOTE

You can modify list box selections while you are working in OfficeMate Administration by pressing the F12 key any time your cursor is in a list box.

- On the OfficeMate Administration main window, click **Setup**, and select **Customization**.
The Customization window opens.
- Select an item in the **Entry Field Name** box.

- Click the item that you want to modify in the **Selection Items** box.



- Type your changes.

NOTE

- To make an item the default item in the list, select the item in the Selection Items box and click **Default**.
- To deselect a default item in the list, select the default item in the Selection Items box and click **UnDefault**.
- You should only delete list box selections if they are *not* linked to any records.

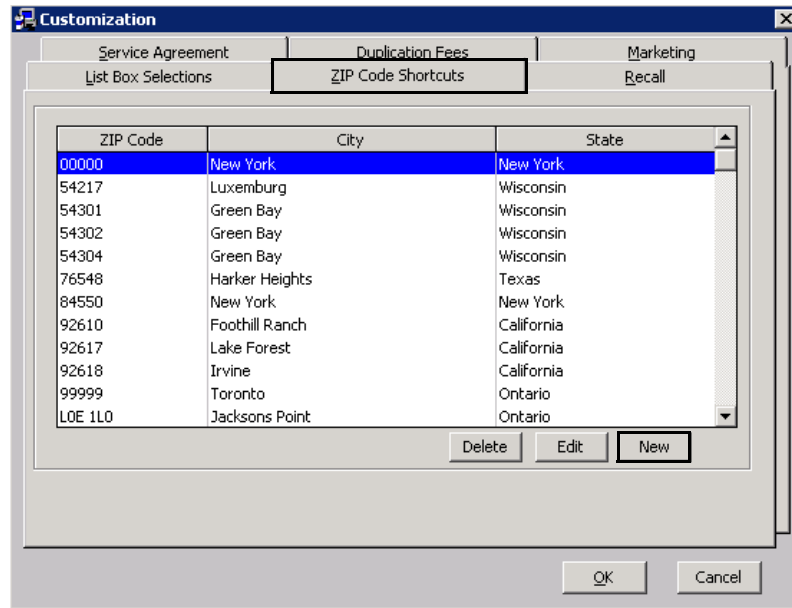
- Click **OK** to save the modified list box selection and exit the Customization window.

For more information on adding and modifying zip code shortcuts, watch the "Zip Code Shortcuts" video.

► **To add ZIP code shortcuts**

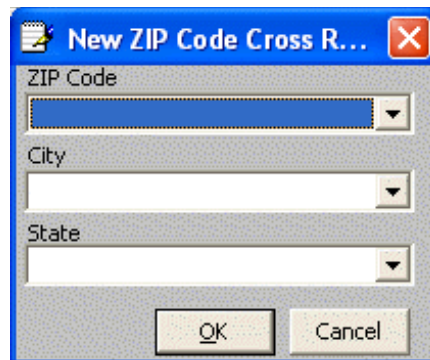
- On the OfficeMate Administration main window, click **Setup**, and select **Customization**.
The Customization window opens.
- Click the **ZIP Code Shortcuts** tab.

- Click **New**.



The New ZIP Code Cross Reference window opens.

- Select a ZIP code, city, and state from the **ZIP Code**, **City**, and **State** drop-down menus.



NOTES

- If the ZIP code, city, or state that you want to add is not available in the drop-down menus, press the **F12** key to add it to the drop-down menus and click **OK**.
- To add a ZIP code, city, or state as a default option, press the **F12** key; type or select the ZIP code, city, or state; click **Default**; and click **OK**.

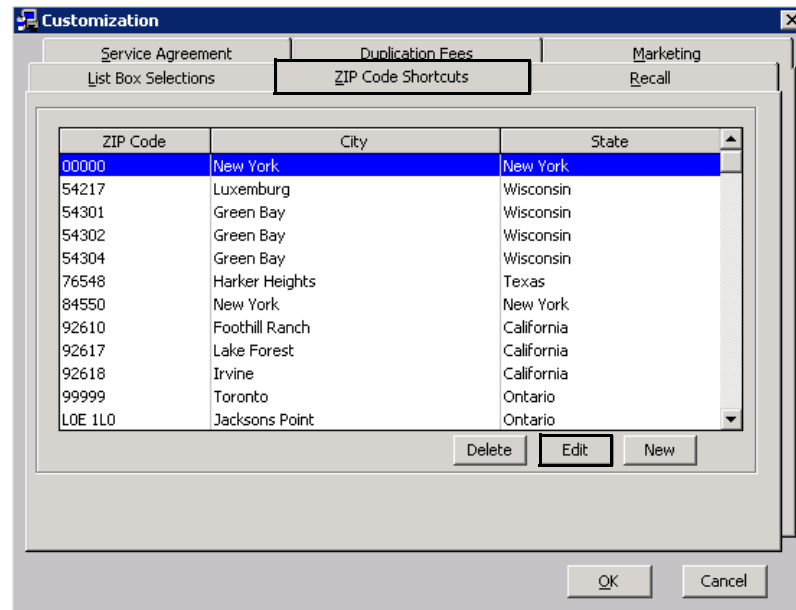
- Click **OK** to close the New ZIP Code Cross Reference window.
- Click **OK** to close the Customization window.

► To modify ZIP code shortcuts

- On the OfficeMate Administration main window, click **Setup**, and select **Customization**.

The Customization window opens.

- Click the **ZIP Code Shortcuts** tab.
- Click **Edit**.



The New ZIP Code Cross Reference window opens.

- Select a ZIP code, city, or state from the **ZIP Code**, **City**, and **State** drop-down menus.
- Press the **F12** key.
The Maintain window opens.
- Modify the ZIP code, city, or state and click **OK**.

NOTES

- To add a ZIP code, city, or state as a default option click **Default**.
- To deselect a default ZIP code, city, or state, click **UnDefault**.

- Click **OK** to close the New ZIP Code Cross Reference window.
- Click **OK** to close the Customization window.

► To create new recall schedules

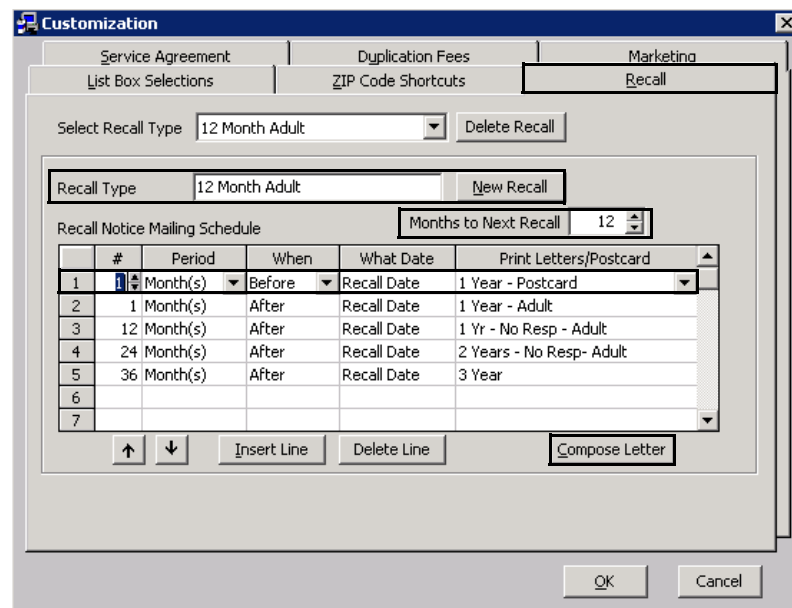
- On the OfficeMate Administration main window, click **Setup**, and select **Customization**.
The Customization window opens.
- Click the **Recall** tab.
- Click **New Recall**.
- Type the name of the new recall schedule in the **Recall Type** text box.
- Type the number of months until the patient will be recalled in the **Months to Next Recall** text box.

For more information on creating and modifying recall schedules, watch the "Recall" video.

6. Type the number of weeks or months between the patient's recall date and the notice that you are creating in the Renewal Notice Mailing Schedule # column.
7. Select **Month(s)** or **Week(s)** from the **Period** column drop-down menu.
8. Select **After** or **Before** from the **When** column drop-down menu.
9. Select the type of recall letter or postcard to print from the **Print Letters/Postcard** column drop-down menu.

NOTE

If there is no appropriate letter or postcard to select from the Print Letters/Postcard column drop-down menu, click **Compose Letter** to open CARE or the Maintain Documents window and compose a letter.



10. Repeat steps 3–9 to create additional new recall schedules.

OR

Click **OK** to close the Customization window.

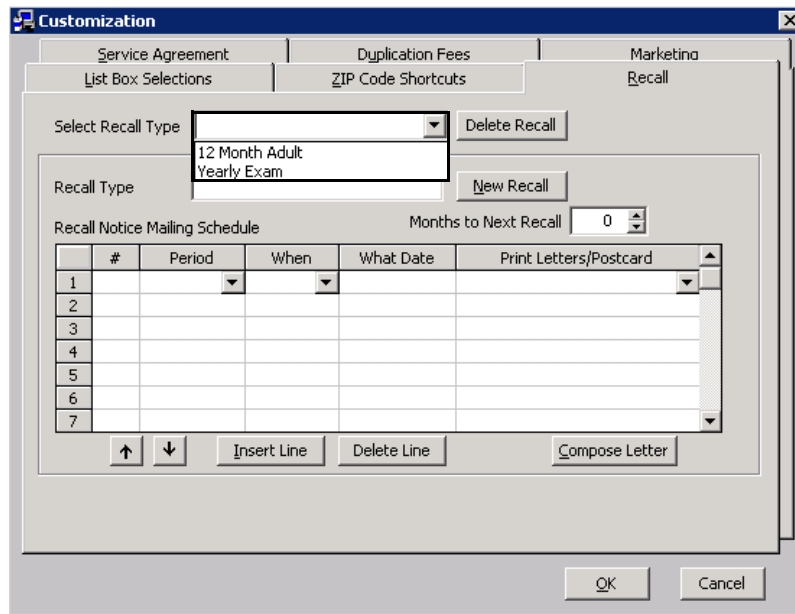
NOTE

To insert a new blank line above a completed line, select the completed line that you want to insert a new blank line above and click **Insert Line**.

► **To modify recall schedules**

1. On the OfficeMate Administration main window, click **Setup**, and select **Customization**.
The Customization window opens.
2. Click the **Recall** tab.

3. Select a recall type from the **Select Recall Type** drop-down menu.



4. Modify the **Recall Type** and **Months to Next Recall**.
5. See [To create new recall schedules on page 41](#), steps 5–9, to modify the information in the **Recall Notice Mailing Schedule** table.
6. To delete a mailing schedule, select a line and click **Delete Line**.
7. To insert a new blank line above a completed line, select the completed line that you want to insert a new blank line above and click **Insert Line**.
8. Repeat steps 3–7 to modify additional recall schedules.

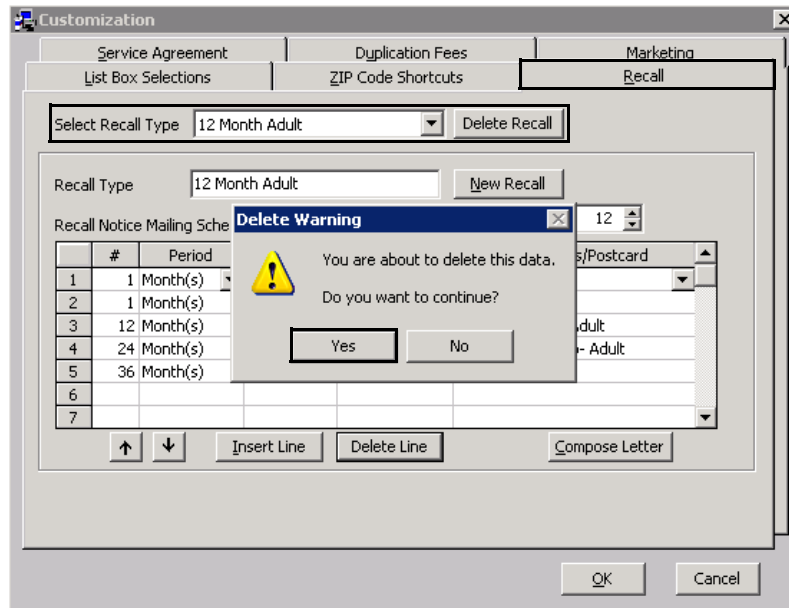
OR

Click **OK** to close the Customization window.

► To delete recall schedules

1. On the OfficeMate Administration main window, click **Setup**, and select **Customization**.
The Customization window opens.
2. Click the **Recall** tab.
3. Select a recall type from the **Select Recall Type** drop-down menu.
4. Click **Delete Recall**.
The Delete Warning window opens.

5. Click **Yes** to continue.

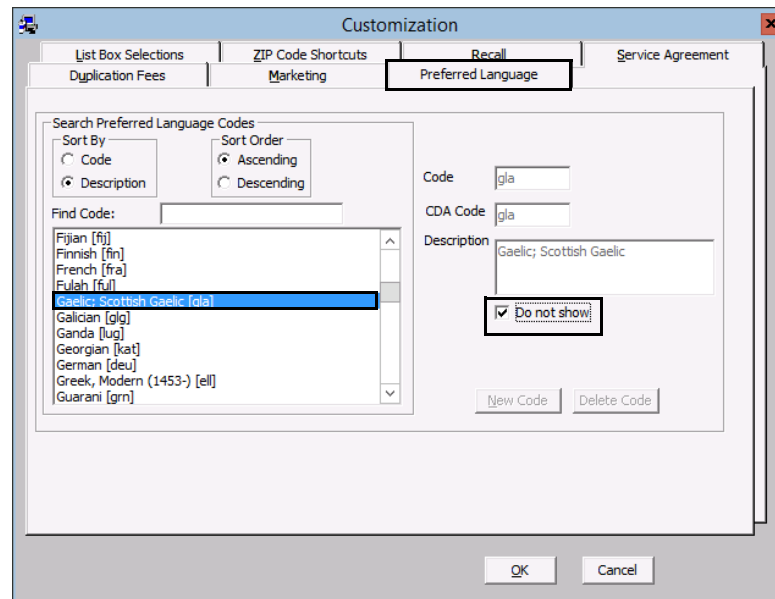


6. Click **OK** to close the Customization window.

► **To select preferred languages**

1. On the OfficeMate Administration main window, click **Setup**, and select **Customization**.
The Customization window opens.
2. Click the **Preferred Language** tab.
3. Select a language in the left column.

- Select the **Do Not Show** check box to hide that language from the Preferred Language drop-down on the Demographics window.



- Click **OK** to close the Customization window.

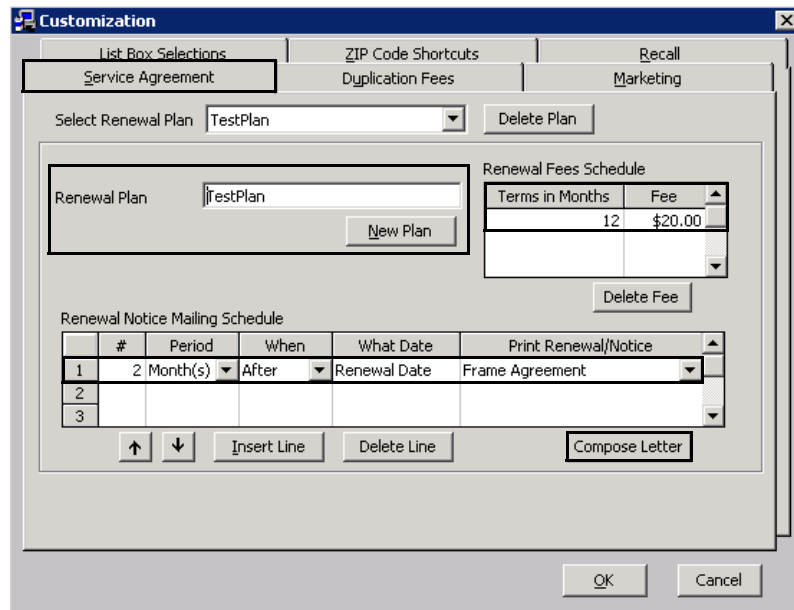
For more information on creating and modifying service agreement renewal plans, watch the [“Service Agreement/Duplication Fees”](#) video.

► To create new service agreement renewal plans

- On the OfficeMate Administration main window, click **Setup**, and select **Customization**.
The Customization window opens.
- Click the **Service Agreement** tab.
- Click **New Plan**.
- Type the name of the new service agreement in the **Renewal Plan** text box.
- Place your cursor in the Renewal Fees Schedule **Terms in Months** box and select the number of months for each renewal year you offer.
- Place your cursor in the Renewal Fees Schedule **Fee** box and type the fee that corresponds to the renewal plan.
- Type the number of weeks or months between the patient’s renewal date and the notice that you are creating in the Renewal Notice Mailing Schedule **#** column.
- Select **Month(s)** or **Week(s)** from the **Period** column drop-down menu.
- Select **After** or **Before** from the **When** column drop-down menu.

10. Select the type of renewal letter or postcard to print from the **Print Renewal/Notice** column drop-down menu.

NOTE If there is no appropriate letter or postcard to select from the Print Renewal/Notice column drop-down menu, click **Compose Letter** to open CARE or the Maintain Documents window and compose a letter.



11. Repeat steps 3–10 to create additional new renewal schedules.

OR

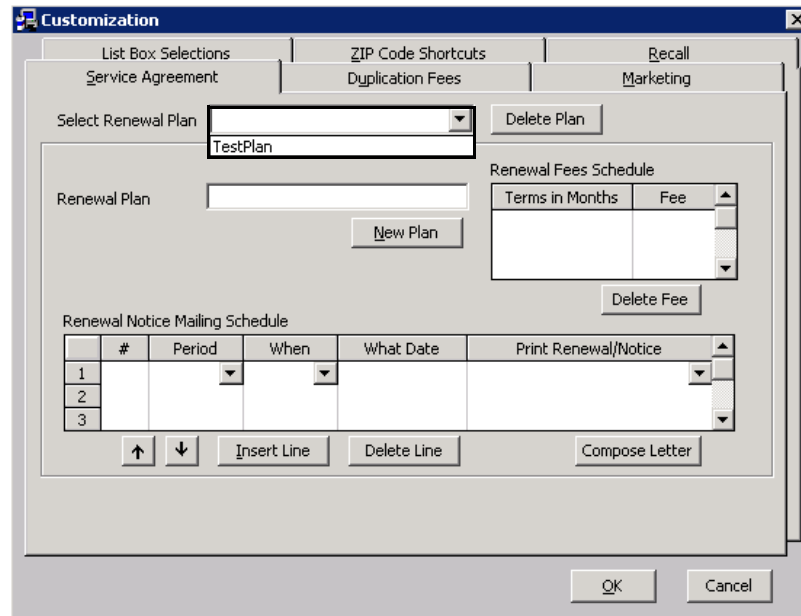
Click **OK** to close the Customization window.

NOTE To insert a new blank line above a completed line, select the completed line that you want to insert a new blank line above and click **Insert Line**.

► **To modify service agreement renewal plans**

1. On the OfficeMate Administration main window, click **Setup**, and select **Customization**.
The Customization window opens.
2. Click the **Service Agreement** tab.

3. Select a renewal type from the **Select Renewal Plan** drop-down menu.

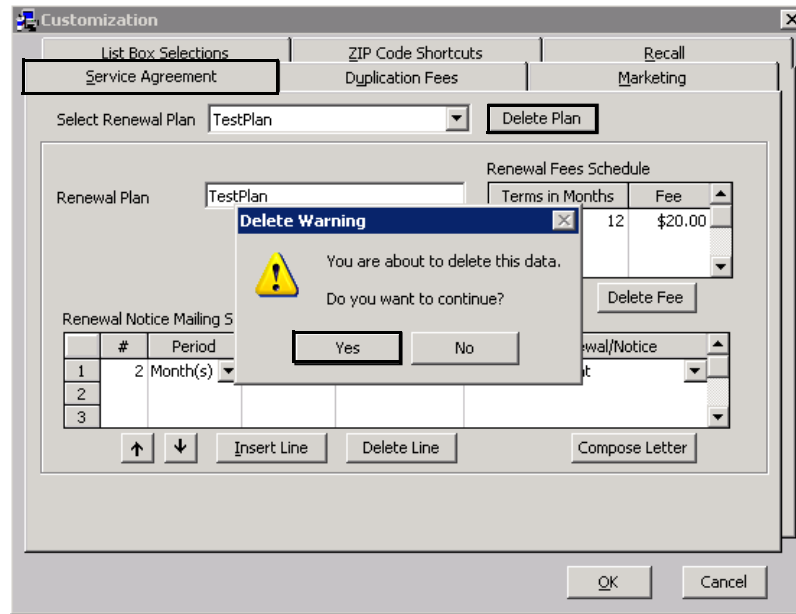


4. Modify the **Renewal Plan**.
 5. See [To create new service agreement renewal plans on page 45](#), steps 5–10, to modify the information in the **Renewal Notice Mailing Schedule** table.
 6. To delete a Renewal Fees Schedule Fee, select the fee that you want to delete and click **Delete Fee**.
 7. To delete a mailing schedule, select a line and click **Delete Line**.
 8. To insert a new blank line above a completed line, select the completed line that you want to insert a new blank line above and click **Insert Line**.
 9. Repeat steps 3–8 to modify additional recall schedules.
- OR
- Click **OK** to close the Customization window.

► **To delete service agreement renewal plans**

1. On the OfficeMate Administration main window, click **Setup**, and select **Customization**.
The Customization window opens.
2. Click the **Service Agreement** tab.
3. Select a renewal type from the **Select Renewal Plan** drop-down menu.
4. Click **Delete Plan**.
The Delete Warning window opens.

- Click **Yes** to continue.



- Click **OK** to close the Customization window.

► To identify contact lens duplication fees

Identify duplication fees when a service agreement is used for contact lenses.

- On the OfficeMate Administration main window, click **Setup**, and select **Customization**.
The Customization window opens.
- Click the **Duplication Fees** tab.
- Select the contact lens from the **Contact Lens Name** column drop-down list.

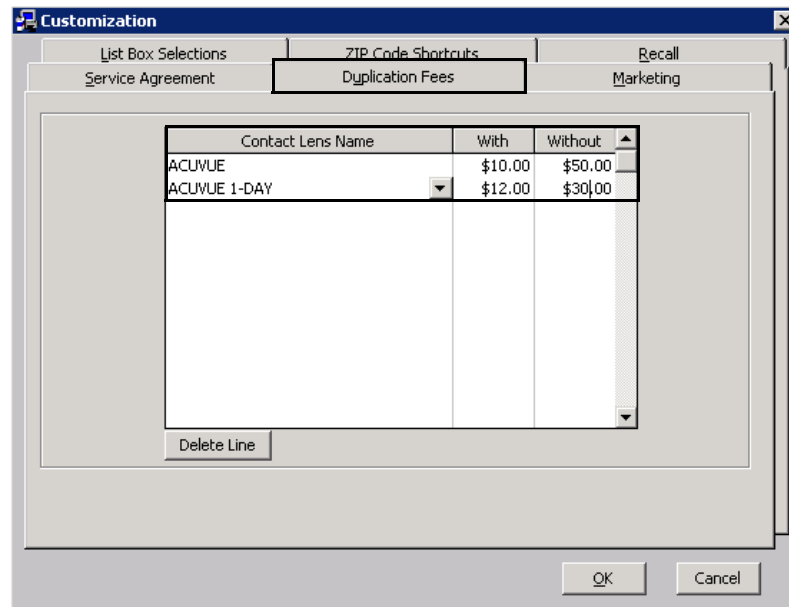
NOTE

If there is no appropriate contact lens to select from the Contact Lens Name column drop-down menu, place your cursor in a blank row in the Contact Lens Name column and type a contact lens name. The contact lens name and fees are added to your list of products.

- Type the patient's duplication fee with a service agreement in the **With** column.

For more information on identifying duplication fees, watch the "Service Agreement/Duplication Fees" video.

5. Type the patient's duplication fee without a service agreement in the **Without** column.



6. Click **OK** to close the Customization window.

For more information on using the Marketing tab, watch the "Marketing" video.

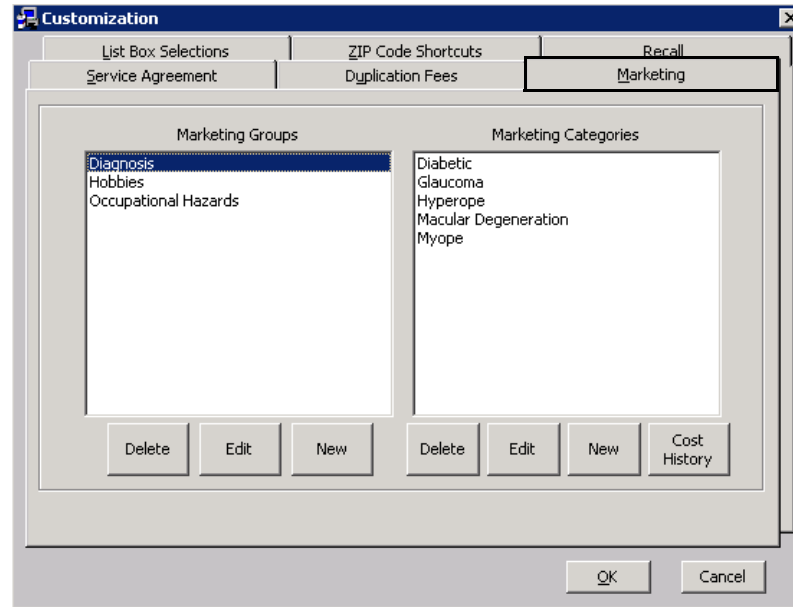
► **To maintain marketing groups, categories, & costs**

1. On the OfficeMate Administration main window, click **Setup**, and select **Customization**.
The Customization window opens.
2. Click the **Marketing** tab.
3. Select a marketing group and click **Delete** to delete the group or click **Edit** to edit the group's name.
OR
Click **New** to add a new marketing group.

4. Select a marketing category and click **Delete** to delete the category or click **Edit** to edit the category's name.

OR

Click **New** to add a new marketing category to the marketing group.



5. To capture the marketing effectiveness of money spent on media sources, perform the following steps:
- Click **Cost History**.
 - Type the monthly dollar amounts spent on media sources in the month columns.

Marketing Category	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
ABC	1,200	0	1,200		5,000								7,400
CBS	1,200		1,000		10,000								12,200
NBC	500		0		0								500
FOX	300		0		0								300
Totals	3,200	0	2,200		15,000								20,400

- Click **OK** to save the cost history.

NOTE

After you capture the marketing effectiveness of monthly dollar amounts spent on media sources and you record marketing data for patients on the Marketing tab on the Patient Demographic window and the Referred By patient or professional on the Demographic tab on the Patient Demographic window, you can create and print the Source & Referral Effectiveness report. For more information, go to [Source & Referral Effectiveness on page 710](#).

- Click **OK** to save the new marketing groups and categories and exit the Customization window.

Maintaining Providers, Staff, & Other Resources

This section tells you how to maintain resources, including how

- To modify or add provider information, 51
- To modify or add staff information, 55
- To modify or add referring doctors, 56
- To modify or add appointment schedule resources, 58
- To modify or add doctors to whom your practice refers patients, 59

► To modify or add provider information

For more information on maintaining resources, watch the “[Resource Setup](#)” video.

NOTE Many insurance companies and clearinghouses are no longer accepting claims with legacy numbers and prefer to rely on the NPI number. Check with your clearinghouse or insurance carriers to determine if you should include legacy numbers on your CMS 1500 or UB-04 claims.

- On the OfficeMate Administration main window, click **Setup**, and select **Resource Setup**.
The Resources Setup window opens.
- Click the **Provider** tab.
- Click **New** to add a new provider.
OR
Select a provider from the table at the top of the window to modify a provider.

NOTE You should only delete provider names if they are *not* linked to any records.

- Type the provider's last name in the **Last Name (Box 33)** text box.
- Type the provider's first name in the **First Name (Box 33)** text box.
- Type the provider's middle name in the **Middle Name (Box 33)** text box.
- Type the provider's phone and fax number in the **Phone # (Box 33)** and **Fax #** text boxes.
- Type the login name in the **User ID** text box.
- Select the default location for the provider or staff member from the **Default Location** drop-down menu.
- Select a provider type from the **Provider Type** drop-down menu.
- Type the provider's license number in the **License #** text box.
- Type your individual provider NPI number in the **NPI Number (Box 24j)** text box.

NOTE You *must* record an NPI number for each provider.

13. Type the doctor ID (Did) in the **VSP Doc ID** text box. Depending on how you signed up with Eyefinity, your doctor ID is either your social security number or EIN number.

NOTE The VSP Doc ID is required if the VSP interface is turned on. If you have a non-VSP doctor in your practice, enter the doctor's EIN or SSN in the VSP Doc ID text box.

14. Type the HL7 identifier for the provider in the **HL7 Provider ID** text box, as needed.
15. Type your Department of Public Safety number, if required by your state, in the **DPS #** text box.

NOTE The DPS number is printed on ExamWRITER medical prescriptions if you record it in the DPS # text box and it is required by your state.

16. Select the provider's specialty from the Specialty drop-down menu. The provider's specialty is included on continuity of care record (CCR) documents that you create in ExamWRITER.

The screenshot shows the 'Resources Setup' dialog box with the 'Provider' tab selected. The dialog is divided into several sections:

- Provider List:** A table with columns: Provider Name, Provider Type, NPI, SSN, Default Location, and Active. The row for 'Doctor, Johnny' is selected.
- Provider Information Form:**
 - Provider Id: 18
 - Last Name (Box 33): Doctor
 - First Name (Box 33): Johnny
 - Middle Name (Box 33):
 - Business (Box 33): OfficeMate Softwar
 - Phone # (Box 33): (800) 942-5353
 - Fax #:
 - User ID: JOHNNY
 - Professional Sig. (Box 31):
 - Default Location: Irvine
 - Provider Type: Corporation
 - License #: LIC1234
 - UPIN #:
 - TPA #:
 - DEA #:
 - EMC Submitter Id:
 - SSN Number (Box 25):
 - EIN Number (Box 25): 98765432
 - NPI Number (Box 24): NP19876
 - VSP Doc ID: 000001234
 - HL7 Provider ID:
 - DPS #:
 - Specialty:
 - Active: Yes No
 - Commissionable: Yes No
 - HIPAA Privacy Training Date:
 - Commission Override:
 - Method: Gross% Margin%
 - Rate: 0.00 % Spiff: \$0.00
- Buttons:** Insurance Info..., Signature Link, Browse, Save, Cancel, New, Delete.

17. If you want to enter HIPAA information, follow the instructions below:
 - a. Type the EIN (or TIN) number in the **EIN Number** text box.

NOTES

- If the provider you selected in step 3 submits ANSI insurance claims, you must type a number in the **EIN Number** text box.
- If you are using the VSP Interface, the EIN number is required.

- b. Select a date from the **Privacy Training Date** menu.
 - c. Select the HIPAA Privacy Officer **Yes** radio button if the provider or staff member is a HIPAA Privacy Officer.
18. If you want to set up a commission for a provider or staff member, follow the instructions below:
 - a. Select the Commissionable **Yes** radio button.
 - a. Select **Gross%** or **Margin%** as a commission Method.
 - b. Type the commission rate in the **Rate** text box.
 - c. Type the special incentive amount in the **Spiff** text box, if applicable.

NOTES

- The gross percentage commission is based on the product gross minus write offs.
- The margin percentage commission is based on product gross minus product cost and write offs.

19. If the doctor plans to process insurance claims, click the **Insurance Info** button and follow the instructions below:
- Select insurance companies to which the doctor plans to bill insurance claims from the **Insurance Company** drop-down menus.
 - Type the insurance company PIN numbers in the **Pin #** column, as needed.
 - Type the insurance company group numbers in the **Group #** column.
 - Type the insurance company submitter IDs in the **Submitter ID** column, as needed.

NOTES

- If you are processing insurance claims through McKesson, type the billing ID and submitter ID that was assigned to you by McKesson in the **Submitter ID** column (as one number).
- If you are processing VSP claims, you do not need to enter any information on the Insurance Information window for VSP.

- e. Click **OK**.

Insurance Company	Pin # (Box 24j/33b)	Group # (Box 33b)	Submitter ID (24i)
JFN Ansi Comm Max Allot	12334	1234	1234
JFN GW Medicare DB	4321	4321	4321
JFN Print Group Percent	5678	5678	5678
VSP			

OK Cancel Delete Line

20. If you want to save a default signature for the provider or staff member that will print on medical prescriptions, click **Browse**, navigate to the signature, and click **Open**.

NOTES

- Eyefinity recommends saving all signatures in the eDocuments folder.
- All signatures must be saved using the JPEG graphic format.
- Some states require an original signature on medical prescriptions. Check with your state regulatory agency to find out if printing a signature on prescriptions is legal in your state.

21. Click **Save** to save the provider information and exit the Resources Setup window.

NOTES

- Before the provider can log into OfficeMate, you must select the provider's security role(s) and initial password. For more information, go to [Assigning Roles and Passwords to Users on page 106](#).
- Before the provider can exchange secure message with patients or other providers, you must establish the provider's secure messaging account. For more information, go to [To edit provider portal settings on page 724](#)

► To modify or add staff information

1. On the OfficeMate Administration main window, click **Setup**, and select **Resource Setup**.

The Resources Setup window opens.

2. Click the **Staff** tab.
3. Click **New** to add a new staff member.

OR

Select a staff member from the table at the top of the window to modify a staff member.

NOTE

You should only delete staff member names if they are *not* linked to any records.

4. Type text in the text boxes.
5. Type the login name in the **User ID** text box.

6. Select the default location for the staff member from the **Default Location** drop-down menu.

The screenshot shows the 'Resources Setup' window with the 'Staff' tab selected. A table lists staff members with columns for Staff Name, License #, SSN, Default Location, and Active status. The row for 'Brookter, Anita' is highlighted. Below the table is a form for editing staff member information, including fields for Last Name, First Name, Middle Name, Business, Phone #, Fax #, License #, User ID, Default Location, and SSN #. There are also radio buttons for 'Active' and 'Commissionable', and a section for 'HIPAA' information (EIN Number, Privacy Training Date, HIPAA Privacy Officer) and 'Commission Override' (Method, Rate, Spiff).

Staff Name	License #	SSN	Default Location	Active
Benoy, Bruce			Covington Eye Designs	<input checked="" type="checkbox"/>
Brady, Marsha	licensenum		Jessica's Store	<input checked="" type="checkbox"/>
Brookter, Anita			Anita's Optical	<input checked="" type="checkbox"/>
Chapman, Patti				<input checked="" type="checkbox"/>
Clark, Diane	C-1773	123-45-6789	Diane's Dapper Eyewear	<input checked="" type="checkbox"/>
Demo2, Demo2				<input checked="" type="checkbox"/>
Demo3, Demo3				<input checked="" type="checkbox"/>
Duck, Daffy			Irvine Optical	<input checked="" type="checkbox"/>

7. If you want to enter HIPAA information, follow the instructions below:
 - a. Type the EIN (or TIN) number in the **EIN Number** text box.
 - b. Select a date from the **Privacy Training Date** menu.
 - c. Select the HIPAA Privacy Officer **Yes** radio button if the provider or staff member is a HIPAA Privacy Officer.
8. If you want to set up a commission for a provider or staff member, follow the instructions below:
 - a. Select the Commissionable **Yes** radio button.
 - a. Select **Gross%** or **Margin%** as a commission Method.
 - b. Type the commission rate in the **Rate** text box.
 - c. Type the special incentive amount in the **Spiff** text box, if applicable.
9. Click **Save** to save the provider information and exit the Resources Setup window.

NOTE

Before the staff member can log into OfficeMate, you must select the staff member's security role(s) and initial password. For more information, go to [Assigning Roles and Passwords to Users on page 106](#).

► **To modify or add referring doctors**

1. On the OfficeMate Administration main window, click **Setup**, and select **Resource Setup**.
The **Resources Setup** window opens.
2. Click the **Referring Dr.** tab.

3. Click **New** to add a new referring doctor.
OR
Select a referring doctor from the table at the top of the window to modify a referring doctor.
4. Type text into the text boxes.
5. Type the referring provider's NPI number in the **NPI Number (Box 17b)** text box.

NOTE You *must* record an NPI number for each referring doctor.

6. Select a qualifier from the **Qualifier (Box 17a)** drop-down menu.

NOTE Ensure that you are selecting the appropriate qualifier description and ANSI code in the Qualifier (17a) drop-down menu, as listed below:

Blue Shield Provider Number - 1B
 CHAMPUS Identification Number - 1H
 Employer's Identification Number - EI
 Location Number - LU
 Medicaid Provider Number - ID
 Medicare Provider Number - 1C
 Provider Commercial Number - G2
 Provider Plan Network Identification Number - N5
 Provider UPIN Number - 1G
 Social Security Number - SY
 State Industrial Accident Provider Number - X5
 State License Number - 0B

7. Type the other ID in the **Other ID (Box 17a)** text box.

The screenshot shows the 'Resources Setup' window with the 'Referring Dr.' tab selected. The window contains a table of referring doctors and a form for editing a selected doctor's information.

Referring Dr. Name	UPIN/USIN	NPI	EIN	Active
Blackburn O.D., James		NPI123456		<input checked="" type="checkbox"/>
D2, R2				<input checked="" type="checkbox"/>
Dr. Denis Lunne,				<input checked="" type="checkbox"/>
Draves, Lyle				<input checked="" type="checkbox"/>
Kreviatz M.D., Chantelle				<input checked="" type="checkbox"/>
LeBlanc O.D., James		NPI3454		<input checked="" type="checkbox"/>
LEE, BEN	44444	55555	66666	<input checked="" type="checkbox"/>
Schwarzenegger, Arnold	570164	7097889213		<input checked="" type="checkbox"/>
Seuss, Thaddeus		1113332222		<input checked="" type="checkbox"/>

The form below the table contains the following fields:

- Last Name (Box 17): Blackburn O.D.
- First Name (Box 17): James
- Address 1: 45 Linda Lane
- Address 2:
- City: Irvine
- State: California
- ZIP Code: 92618
- Phone #: (866) 345-6789
- Fax #:
- Pager:
- E-Mail:
- Active: Yes No
- UPIN/USIN #:
- NPI Number (Box 17b): NPI123456
- EIN Number:
- Qualifier (Box 17a): Location Number
- Other ID (Box 17a): 1111
- Title: Dr.
- Salutation: Dear:
- Note:

Buttons at the bottom: Save, Cancel, **New**, Delete. A 'Referral History...' button is also present.

- Click **Referral History**, if active, to view the referral history information for a selected doctor.

The screenshot shows a window titled "The Eye Surgery Institute Referrals Info...". It contains a "Referred In" section with two fields: "# of Patients" with the value "2" and "\$ Generated" with the value "\$6201.98". Below this is a table with two columns: "Patient Name" and "Date In". The table contains two rows of data:

Patient Name	Date In
Underwood, Jennifer	06/30/2004
Ressler, Margaret	02/13/2002

At the bottom right of the window is a "Close" button.

- Click **Save** to save the referring doctor information and exit the Resources Setup window.

► **To modify or add appointment schedule resources**

- On the OfficeMate Administration main window, click **Setup**, and select **Resource Setup**.

The Resources Setup window opens.

- Click the **Other Resources** tab.
- Click **New** to add a new resource and type the resource name in the **Resource Name** text box.

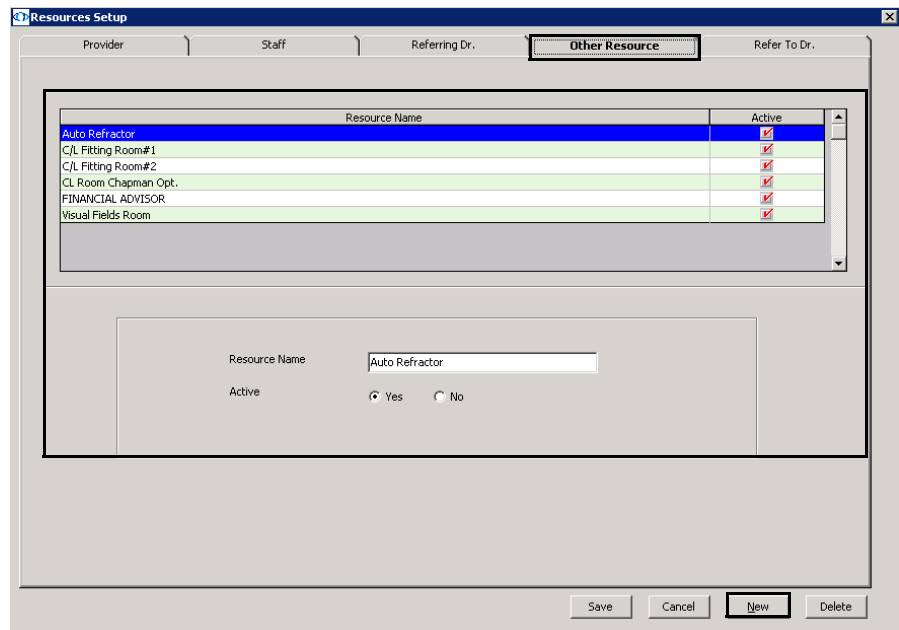
OR

Select a resource from the table at the top of the window to modify a resource.

NOTE

You should only delete resources if they are *not* linked to any appointments.

- Select the **Active** Yes or No radio button, depending on whether or not the resource is active or inactive.



- Click **Save** to save the other resource information and exit the Resources Setup window.

► **To modify or add doctors to whom your practice refers patients**

- On the OfficeMate Administration main window, click **Setup**, and select **Resource Setup**.

The Resources Setup window opens.

- Click the **Refer To Dr.** tab.
- Click **New** to add a new doctor.

OR

Select a doctor from the table at the top of the window to modify a doctor.

- Type text in the text boxes.

- Select the **Active** Yes or No radio button, depending on whether or not the doctor is active or inactive.

The screenshot shows the 'Resources Setup' window with the 'Refer To Dr.' tab selected. A table lists several doctors with their contact information and an 'Active' checkbox. The first row, 'Alder, John', is selected. Below the table is a form for editing the selected doctor's information, including fields for Last Name, First Name, Address, City, State, ZIP Code, Phone #, Fax #, Pager, E-Mail, and an Active radio button set to 'Yes'.

Refer To Dr. Name	Phone	Fax	Pager	Active
Alder, John	7145002525	7142501414		<input checked="" type="checkbox"/>
BOND, M.D., PAUL	9999999999	8888888888	7777777777	<input checked="" type="checkbox"/>
Cullen, Carlisle				<input checked="" type="checkbox"/>
cullen, esme				<input checked="" type="checkbox"/>

Form fields for 'Alder, John':

- Last Name: Alder
- First Name: John
- Address 1: 125 Medical Center Dr
- Address 2:
- City: Costa
- State:
- ZIP Code: 98989
- Phone #: 7145002525
- Fax #: 7142501414
- Pager:
- E-Mail:
- Active: Yes No

- Click **Save** to save the doctor information and exit the Resources Setup window.

Maintaining Add-In Programs

Add-ins are programs that you can add to the OfficeMate main window toolbar and quickly and easily open while you are using OfficeMate. OfficeMate is installed with the Windows Calculator, Explorer, and Wordpad add-in programs already set up. To add, delete, or modify add-in programs, follow the instructions below:

- From the OfficeMate Administration main window, click **Setup**, and select **Add-Ins**.

The Maintain Add-Ins window opens.

- Type a new program name in a blank row in the **Program Name** column.

OR

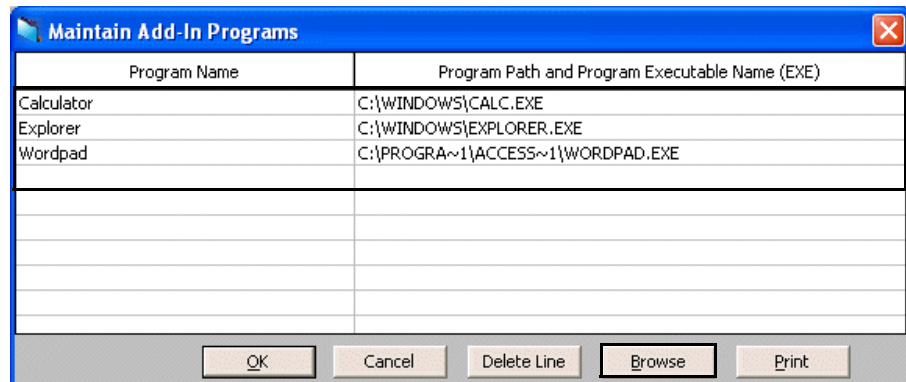
Place your cursor in a program name in the **Program Name** column and edit it or click **Delete Line** to delete the program from the OfficeMate main window toolbar Add-Ins menu.

- Type the new program's path and executable (exe) file in the **Program Path and Program Executable Name (EXE)** column.

OR

Click **Browse**, navigate to the program's executable file, and click **Open**.

NOTE You can only add new add-in programs that exist on your computer's hard drive.



- Click **Print** to print a the Maintain Add-Ins Program window.
- Click **OK**.
- From the OfficeMate main window, click **Add-Ins**, and select the add-in program to open it.

Setting Up Preferences

This section tells you how to set up preferences in OfficeMate, including how

- [To set up patient preferences, 61](#)
- [To set up financial preferences, 62](#)
- [To set up miscellaneous preferences, 68](#)
- [To set up label printer preferences, 70](#)
- [To set up one-click document preferences, 71](#)
- [To set up statement preferences, 72](#)
- [To set up lab order preferences, 75](#)
- [To set up centralized preferences, 79](#)
- [To define and change payment restriction preferences, 80](#)
- [To define and change perpetual inventory preferences, 81](#)

NOTE You can change your OfficeMate preferences at any time.

For more information on setting up patient preferences, watch the "Patient" video.

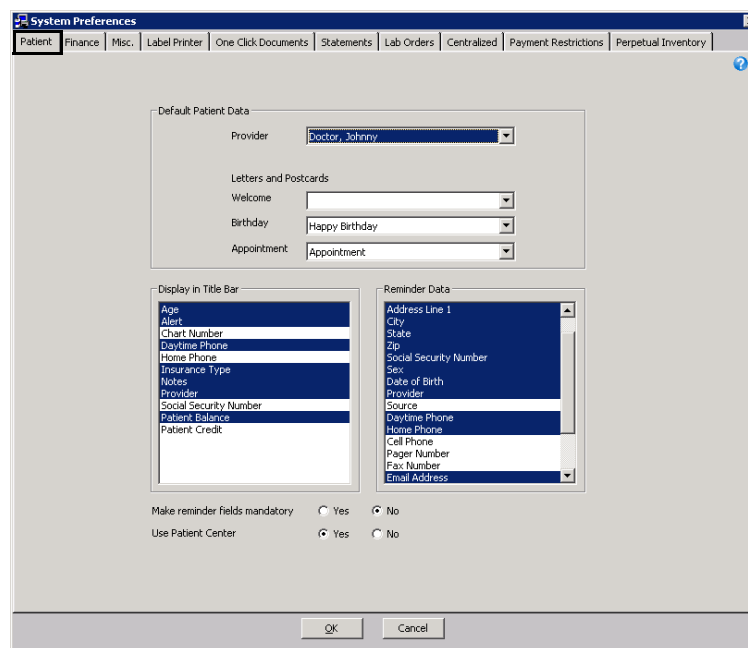
► To set up patient preferences

- From the OfficeMate Administration main window, click **Setup**, and select **Preferences**.
The System Preferences window opens.

- From the **Provider** drop-down menu, select the default provider that is assigned to new patients when their demographic data is recorded in OfficeMate.
- From the **Welcome**, **Birthday**, and **Appointment** drop-down menus, select the default letters and postcards.

NOTE You can view and edit the letters and postcards that are available or create new ones. For more information, go to [Maintaining Documents on page 833](#).

- Select or deselect items in the **Display in Title Bar** box to choose the information that you want to display next to the patient's name in the Patient Demographic window title bar.



- Select or deselect items in the **Required Data** box to choose the information that you want to appear in yellow in the Patient Demographic window.

NOTE The items that you choose are only a visual prompt to remind you what information you require for patients; however, a patient record can be created without completing all of the required data fields in the Patient Demographic window.

- Select the Make reminder fields mandatory **Yes** radio button to require that the items displayed in the Reminder Data box are completed on the Patient Demographic window.
- Click **OK** to save your preferences and close the System Preferences window.

► To set up financial preferences

- From the OfficeMate Administration main window, click **Setup**, and select **Preferences**.
The System Preferences window opens.

For more information on setting up financial preferences, watch the ["Finance"](#) video.

2. Click the **Finance** tab.
3. Select the **Yes** and **No** radio buttons to choose the other options.

Preference	Setting to Yes...	Setting to No...
Apply fee slip overpayment to oldest balance	Automatically applies any overpayments to the patient's oldest open balance.	Does not automatically apply overpayments. Users are prompted to apply the overpayment manually.
Apply patient unapplied amount from fee slip	Automatically applies any unapplied balances from the patient's receipt history when recording new or edited fee slips.	Does not automatically apply any unapplied balances from the patient's receipt history when recording new or edited fee slips.
Default All Same Guarantor	Selects the All Same Guarantor check box on the Receipts & Adjustments window by default. This allows payments made by one patient to be applied to other patients within the same family.	Does not select the All Same Guarantor check box by default on the Receipts & Adjustments window.
Display warning msg for handwritten products	Displays a warning message when a user manually types a product on a fee slip that does not match any product in the database. The warning does not prevent the user from manually entering a product.	Does not display a warning when handwritten products are entered on the fee slip.
Show voided fee slips on billing history	Displays voided fee slips on the Billing History report.	Does not display voided fee slips on the Billing History report.
Display reminder for level II codes	Displays a warning to remind the user to select a PQRS code when an eligible diagnosis code is selected on the fee slip.	Does not display a warning to remind users to select a PQRS code.
Print patient DOB on fee slip	Includes the patient's date of birth on the printed patient's receipt.	Does not include the date of birth on the patient's receipt.

Preference	Setting to Yes...	Setting to No...
Default Co-Pay to be checked on Refund Window	Selects the Refund Co-Pay check box by default on the Fee Slip Item Return window. The Refund Co-Pay check box can be deselected by the user as needed.	Does not select the Refund Co-Pay check box by default. Users have to manually check this box if necessary when processing a return.
Pop-Up Copay/Eligibility information on Fee Slip	Automatically opens the Authorization/Copay window when the user selects the patient's insurance on the Fee Slip window.	Does not automatically open the Authorization/Copay window. Users will have to click the Auth/Copay button on the Fee Slip window to view and edit copay and eligibility information.
Express End of Day	Activates an "express" end-of-day process to close the financial activity for the day and start a new day. The "express" process does not require you to reconcile your cash drawer or print reports.	Deactivates the express option. Users will need to reconcile the cash drawer and print reports in order to complete end-of-day process.
Activate Patient Open Charges button	Displays the Open Charges button on the Fee Slip window, which allows users to open a list of open charges and allows users, whose security settings permit, to post the charges to the fee slip, leave open, or close patient open charges.	Does not display the Open Charges button on the Fee Slip window.
Pop-Up Open Charges window on Fee Slip	Automatically opens the Open Charges window when a fee slip is created for a patient who has open charges. This preference is only available if the Activate Patient Open Charges button preferences is set to Yes.	Does not automatically open the Open Charges window. Users can click the Open Charges button to manually open the Open Charges window if the Activate Patient Open Charges button preferences is set to Yes.

Preference	Setting to Yes...	Setting to No...
Allow Fee Slips to be changed before End of Day	Allows users, whose security settings permit, to edit fee slips before the end-of-day process is completed. If you choose to edit fee slips before completing the end-of-day process, perpetual inventory counts and reports may not be accurate.	Once a fee slip is recorded, users are unable to make any changes to the fee slip. If changes are necessary, the original fee slip will need to be voided and a new, accurate fee slip will need to be created.
Activate Detailed Benefits and Max Allotment Calculations	<p>Activates the detailed benefits and maximum allotments methods for setting up insurance plans and calculating patient eligibility and copays.</p> <p>This preference is only available to practices that upgraded from OfficeMate Enterprise 2.0, or OfficeMate 9.0, 9.5, or 10.0 and had at least one insurance plan that used either of these two methods.</p> <p>For more information about detailed benefits, go to Setting Up Plan Detailed Benefits on page 168. For information about maximum allotments, go to Setting Up Plan Maximum Allotments on page 193.</p>	Deactivates the detailed benefits and maximum allotments methods. All insurance plans will be set up using the percentage method.

Preference	Setting to Yes...	Setting to No...
Activate Discounts and Packages	Activates discounts and packages, which enables users, whose security privileges allow, to create discounts and packages in OfficeMate Administration or apply discount and package promotions to fee slips in OfficeMate. For more information about discounts and packages, go to Setting Up Discounts & Packages on page 89 .	Deactivates discounts and packages.
Send VSP Claims and Lab Orders Immediately upon Completion	Sends VSP claims and lab orders electronically to Eyefinity when the fee slip is recorded.	Sends VSP claims to the Third Party Processing window to be processed like other insurance claims. VSP lab orders must also be processed as you process other lab orders.
Enable the General Ledger Interface	<p>Enables the General Ledger Interface, which allows users to export general ledger (G/L) transactions to such external, business-grade accounting systems as Sage Software MAS 90 and MAS 200. The General Ledger Interface also enables users to export journal entries into Intuit QuickBooks 2005–2010.</p> <p>For information about the General Ledger Interface, go to Using the General Ledger Interface on page 765.</p> <p>This setting automatically disables preferences listed hereafter.</p>	<p>Disables the General Ledger Interface, and therefore, the ability to export financial data to MAS 90, MAS 200, or QuickBooks.</p> <p>Enables the preferences listed hereafter.</p>

Preference	Setting to Yes...	Setting to No...
Allow Fee Slips to be changed before and after End of Day	Allows users, whose security settings permit, to edit fee slips before and after the end-of-day process is completed. Because modifying records after the end-of-day process may result in data conflicting with that exported to accounting software, the General Ledger Interface is disabled if this preference is set to Yes. Allowing the fee slip to be edited after the end-of-day may result in inaccurate inventory counts and reporting.	Users will not be able to make changes to the fee slip after the end-of-day process. Users may be able to make changes to fee slips prior to the end-of-day, if the Allow Fee Slips to be changed before End of Day preference (above) is set to Yes. If changes are necessary, the original fee slip will need to be voided and a new, accurate fee slip will need to be created
Allow Posting Date to be changed in Administration	Allows the posting date to be changed in OfficeMate Administration to allow for adjustments on prior dates. Because changing the posting date may result in data conflicting with that exported to accounting software, the General Ledger Interface is disabled if this preference is set to Yes. Allowing the posting date to be changed may result in inaccurate inventory counts and reporting.	The posting date cannot be changed in OfficeMate Administration. Once the end-of-day process is complete, transactions can no longer be recorded for that day.

Preference	Setting to Yes...	Setting to No...
Allow Posting Date to be changed in Locations	Allows the posting date to be changed in OfficeMate locations to allow for adjustments on prior dates. Because changing the posting date may result in data conflicting with that exported to accounting software, the General Ledger Interface is disabled if this preference is set to Yes. Allowing the posting date to be changed may result in inaccurate inventory counts and reporting.	The posting date cannot be changed in OfficeMate locations. Once the end-of-day process is complete, transactions can no longer be recorded for that day.
Allow Payment Method to be modified	Allows the method of payment to be changed in the ledger's Receipts History window. Because changing the payment method may result in data conflicting with that exported to accounting software, the General Ledger Interface is disabled if this preference is set to Yes.	Does not allow users to modify the payment method once it is posted. To correct the payment method, the user must void and recreate the fee slip with the proper payment method.

- Click **OK** to save your preferences and close the System Preferences window.

► **To set up miscellaneous preferences**

- From the OfficeMate Administration main window, click **Setup**, and select **Preferences**.
The System Preferences window opens.
- Click the **Misc** tab.
- Select the **VisionWeb Integration** check box if you are integrating with VisionWeb.
- Select the **External Patient Communication Integration** check box if you are using a supported third-party service to communicate with your patients.

NOTE

The Patient Demographic window, Correspondence Hx tab displays the vendor name to indicate which service was used to send a particular correspondence to a patient.

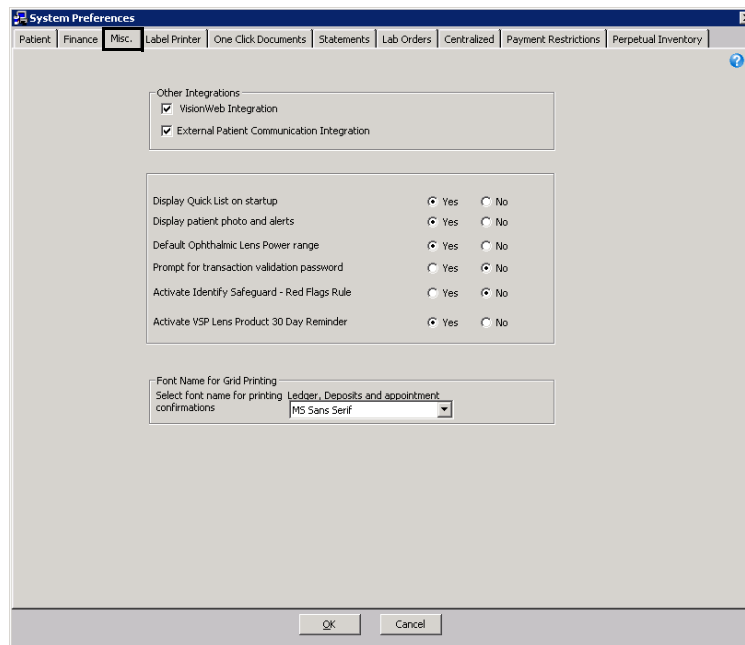
- Select the **Yes** and **No** radio buttons to choose the other options.

For more information on setting up miscellaneous preferences, watch the "Misc" video.

Preference	Setting to Yes...	Setting to No...
Display Quick List on startup	Displays the Quick List window when OfficeMate is launched.	Does not display the Quick List. Users will have to open the Quick List manually.
Display patient photo and alerts	Displays the patient photo and alerts on the Patient Center window.	Does not display the option to add a patient photo to the Patient Center window.
Default Ophthalmic Lens Power Range	Defaults the low sphere and cylinder to 0.00 and the high sphere and cylinder to 99.00.	No default is applied to the low or high sphere and cylinder for lens products.
Prompt for transaction validation password	Requires a password when a user makes a change on the Fee Slip, Eyewear Order, Soft Lens Order, Hard Lens Order, Receipts & Adjustments, and Patient Ledger windows. You will only be prompted for your user ID and password once when you select a new patient or insurance company on the Receipts & Adjustments window. If you do not type a valid password and user ID in the Validate User window, then you will be prompted to type a valid password and user ID in the Validate User window when you complete the transaction and click Record.	There will be no user validation when processing transactions on the Fee Slip, Eyewear Order, Soft Lens Order, Hard Lens Order, Receipts & Adjustments, and Patient Ledger windows.
Activate Identify Safeguard - Red Flags Rule	Activates the Safeguard - Red Flags rule feature, which complies with the Federal Trade Commission (FTC) and the National Credit Union Administration (NCUA) to ensure the security and confidentiality of your patients' information.	Deactivates the Safeguard - Red Flags rule feature.

Preference	Setting to Yes...	Setting to No...
Activate VSP Lens Product 30 Day Reminder	Tuns on a reminder in OfficeMate Administration to prompt you to download the latest lens product lists using the Lens Product Loader. Clicking OK in the reminder window opens the Lens Product Loader and downloads the latest lists.	Deactivates the reminder.

6. Select a font type from the **Font Name for Grid Printing** drop-down menu.



7. Click **OK** to save your preferences and close the System Preferences window.

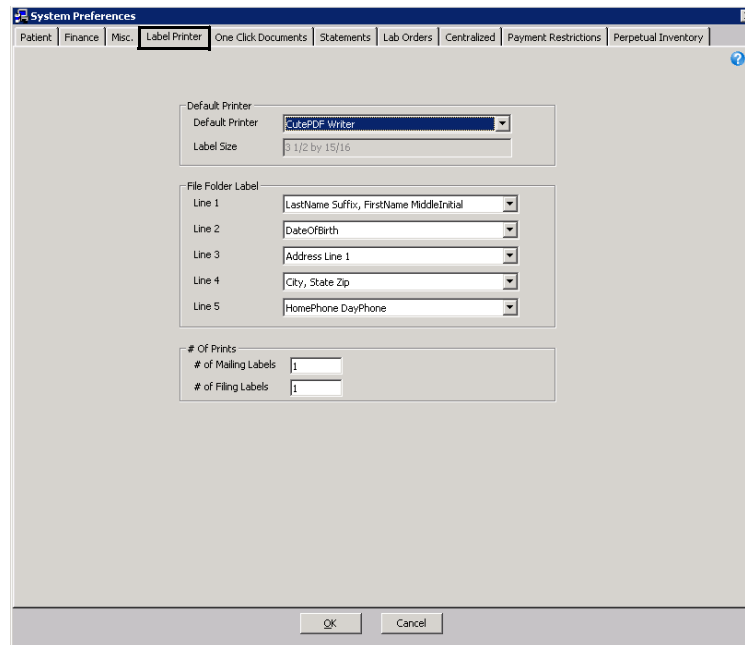
► To set up label printer preferences

NOTE You must complete the instructions in this section before you print mailing or filing folder labels.

- From the OfficeMate Administration main window, click **Setup**, and select **Preferences**.
The System Preferences window opens.
- Click the **Label Printer** tab.
- Select the default printer and label size from the **Default Printer** box drop-down menus.
- Select file folder label lines from the **File Folder Label** drop-down menus.

For more information on setting up label printer preferences, watch the "Label Printer" video.

5. Type the number of mailing and filing labels to print in the **# of Prints** box text boxes.



6. Click **OK** to save your preferences and close the System Preferences window.

For more information on setting up one-click document preferences, watch the “[One-Click Documents](#)” video.

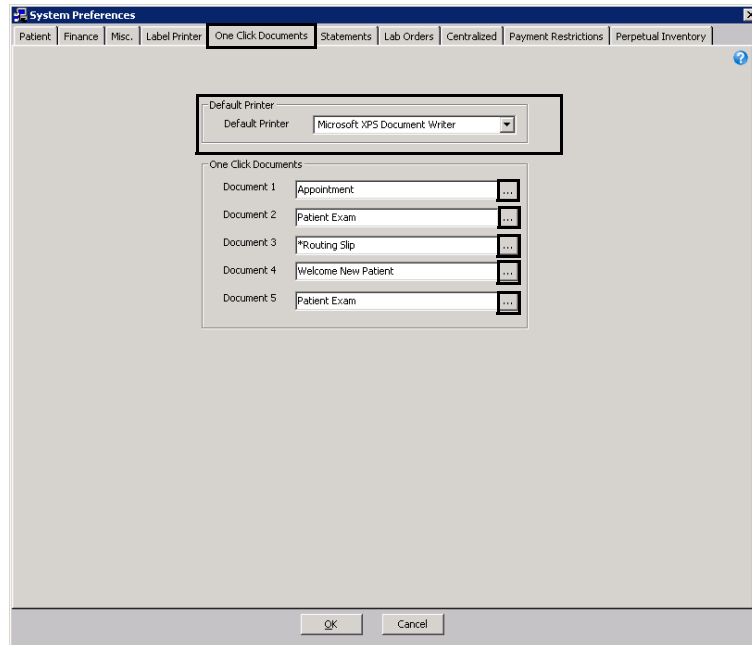
► To set up one-click document preferences

NOTES

- One-click documents are letters and forms that you can easily print from many windows within OfficeMate. For more information, refer to the *OfficeMate User's Guide*.
- For information on creating and editing one-click documents, go to [Maintaining Documents on page 833](#).

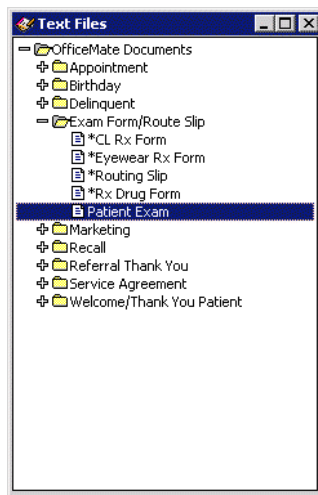
1. From the OfficeMate Administration main window, click **Setup**, and select **Preferences**.
The System Preferences window opens.
2. Click the **One Click Documents** tab.
3. Select the default printer from the **Default Printer** box drop-down menu.

- Click the ... (ellipses) in the **One Click Documents** box to select which letters and postcards you want to be available as one-click documents.



The Text Files window opens.

- Click the + next to OfficeMate Documents to expand the folder.



- Navigate to and double-click the document that you want to select as a one-click-document.
- Click **OK** to save your preferences and close the System Preferences window.

► **To set up statement preferences**

- From the OfficeMate Administration main window, click **Setup**, and select **Preferences**.
The System Preferences window opens.
- Click the **Statements** tab.

For more information on setting up statement preferences, watch the "Statements" video.

3. Select the **Yes** and **No** radio buttons to choose the statement options.

NOTE Select the No radio button next to the **Print provider license & tax/EIN on Statement** preference if you are centrally administering your billing from the administrative location.

Preference	Setting to Yes...	Setting to No...
Use "Do not print on patient statement"	Enables the "Do not print on patient statement" check box in the Fee Slip Item Adjustment window and prevents ledger items marked as DNP from printing on patient statements.	Disables the "Do not print on patient statement" check box in the Fee Slip Item Adjustment window so that future adjustments cannot be marked as DNP. Any ledger items previously marked as DNP will still not print on patient statements.
Print provider license & NPI on statement	Prints the provider's license and NPI on patient statements.	Does not print the provider's license and NPI on patient statements.

4. Type the number of days that you want to be displayed in detail on your statements in the **Display # days from period end** text box.
5. Select the **Yes** and **No** radio buttons to choose the statement options.

Preference	Setting to Yes...	Setting to No...
Print insurance charges/payments	Prints amounts charged to insurance and/or the amounts the insurance has paid.	Does not print insurance information on the statements.
Print reason for insurance denial	Prints the reason for insurance denial on the patient statement.	Does not print the reason for insurance denial on the patient statement.
Print credit card payment information	Prints credit card payment information on the patient statement.	Does not print credit card payment information on the patient statement.

6. If you want to calculate late charges for patients, follow the instructions below; otherwise, go to step 7.
- Select the **Calculate late charges** check box.
 - Type the late charge amount, the amount at which late charges should begin to be calculated, the grace period, and a description of the late charge.
 - Select the **Fee Slip Date** radio button if you want to calculate finance charges for insurance transfers based on fee slip dates or select the

Transfer Date radio button if you want to calculate finance charges for insurance transfers based on transfer dates.

7. If you want to calculate finance charges for patient, follow the instructions below; otherwise, go to step 8.
 - a. Select the **Calculate finance charges** check box.
 - b. Type the monthly percentage, grace period, and a description of the finance charge.
 - c. Select the **Fee Slip Date** radio button if you want to calculate finance charges for insurance transfers based on fee slip dates or select the **Transfer Date** radio button if you want to calculate finance charges for insurance transfers based on transfer dates.
8. Type a message in the **Print this message at bottom of Statement** text box.
9. Determine whether statement aging should begin from the date of the fee slip or when the charges are transferred from the insurance to the patient by selecting the **Fee Slip Date** or **Transfer Date** radio button.

Preference	Setting to Yes...	Setting to No...
Print administration address on statement/fee slip	Prints the address of the home office for multilocation practices. For single location practices, administration address is usually the same as the practice address.	Prints the address of the office where the services were performed.
Print zero dollar line items on statement/fee slip	Prints all items that appear on the claim, including such zero-dollar line items as level II CPT codes.	Suppresses zero-dollar items from printing on the statements and fee slips.

- Click **OK** to save your preferences and close the System Preferences window.

For more information on setting up lab order preferences, watch the “Lab” video.

► To set up lab order preferences

- From the OfficeMate Administration main window, click **Setup**, and select **Preferences**.
The System Preferences window opens.
- Click the **Lab Orders** tab.
- Select the **Full Page** or **Half Page** radio button to print your lab orders on a full or half pages.

4. Select the **Yes** and **No** radio buttons to choose lab order preferences.

Preference	Setting to Yes...	Setting to No...
Print Patient ID on Eyewear Lab Orders	Prints the patient's ID number in OfficeMate on the lab order.	Does not print the patient's ID number on the lab order.
Allow lab order to be printed if not billed	Allows the lab order to be printed even if the fee slip has not been recorded.	Does not allow the lab order to be printed if a fee slip has not been recorded.
Allow lab order edits after fee slip has been billed	Enables the Edit Lab Order button on the order windows and allows users whose security roles include access rights to Edit Lab Orders after Fee Slip Billed to edit lab orders after a fee slip has been recorded.	Disables the Edit button on the order windows and does not allow users to edit lab orders after a fee slip has been recorded.
Allow Eyewear Orders without Frame Details	Allows eyewear orders to be recorded with lens information but without frame information.	Requires lens and frame information to be recorded on eyewear orders. If you use the VSP interface, select the No radio button.
Validate Promise Date	<p>Causes the user to be prompted to enter a promise date if one has not been entered when the lab order is recorded. It is important to record a promise date on every lab order for the following reasons:</p> <ul style="list-style-type: none"> • The promise date enables your practice to manage which patients may be coming to pick up their orders on any given day. • The promise date allows you to pull up a list of orders in the Rx Status window for any given day based on promise date. 	Allows users to record lab orders without entering a promise date.

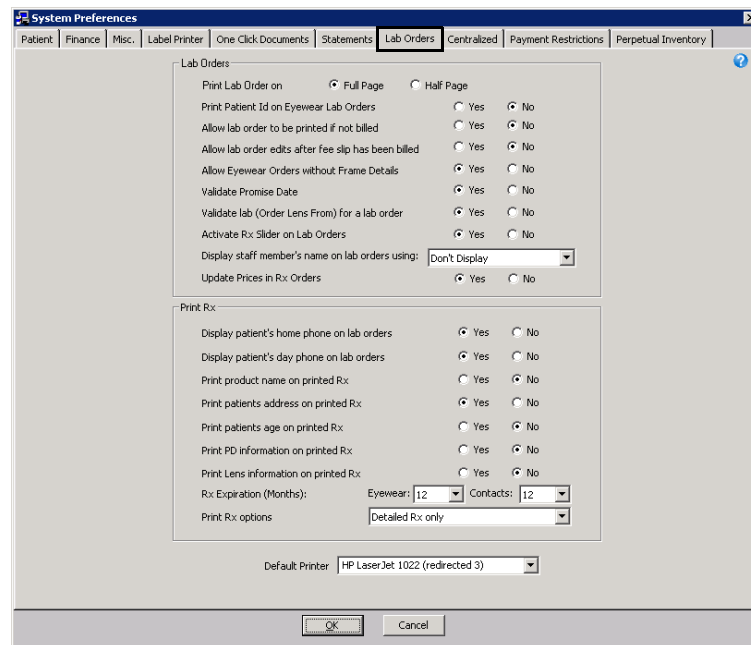
Preference	Setting to Yes...	Setting to No...
Validate lab (Order Lens From) for a lab order	Requires users to select a lab if one is not selected when the lab order is created.	Allows users record lab orders without selecting a lab.
Activate Rx Slider on Lab Orders	Gives users the option to record eyewear, hard lens, and soft lens order measurements using a slider rather than manually entering measurements	Disables the slider option, requiring users to enter measurements manually.
Update Prices in Rx Orders	Gives users, whose security settings permit, the ability to price lens attributes on an eyewear order if the selected lens is missing attribute pricing. When a user selects a lens that contains attributes that have not been priced on an eyewear order, a pop-up window prompts the user to enter the missing price information.	Prevents users from adding missing attribute pricing. Eyewear orders are recorded without prompting the user for missing prices.

5. Select which staff member's name, if any, appears on the lab order from the **Display staff member's name on lab order using** drop-down menu.
6. Select the **Yes** and **No** radio buttons to choose printed prescription preferences.

Preference	Setting to Yes...	Setting to No...
Display patient's home phone on lab orders	Prints the patient's home phone number on lab orders. this may be useful if the orders are shipped directly to the patient.	Does not print the patient's home phone number on lab orders.
Display patient's day phone on lab orders	Prints the patient's day-time phone number on lab orders. this may be useful if the orders are shipped directly to the patient.	Does not print the patient's day-time phone number on lab orders.
Print product name on printed Rx	Prints product names on printed eyewear, hard lens, or soft lens prescriptions.	Does not print product names on printed prescriptions.

Preference	Setting to Yes...	Setting to No...
Print patient's address on printed Rx	Prints the patient's address on printed eyewear, hard lens, or soft lens prescriptions.	Does not print the patient's address on printed prescriptions.
Print patient's age on printed Rx	Prints the patient's age on printed eyewear, hard lens, or soft lens prescriptions.	Does not print patient's age on printed prescriptions.
Print PD information on printed Rx	Prints the pupillary distance on printed eyewear, hard lens, or soft lens prescriptions.	Does not print pupillary distance on the printed prescriptions.
Print lens information on printed Rx.	Prints the lens information on printed eyewear, hard lens, or soft lens prescriptions.	Does not print the lens information on printed prescriptions.

- Select the appropriate default Eyewear and Contacts **Rx Expiration (Months)**.
- Select the Rx printing size from the **Print Rx options** drop-down menu.
- Select the default lab order printer from the **Default Printer** drop-down menu.



- Click **OK** to save your preferences and close the System Preferences window.

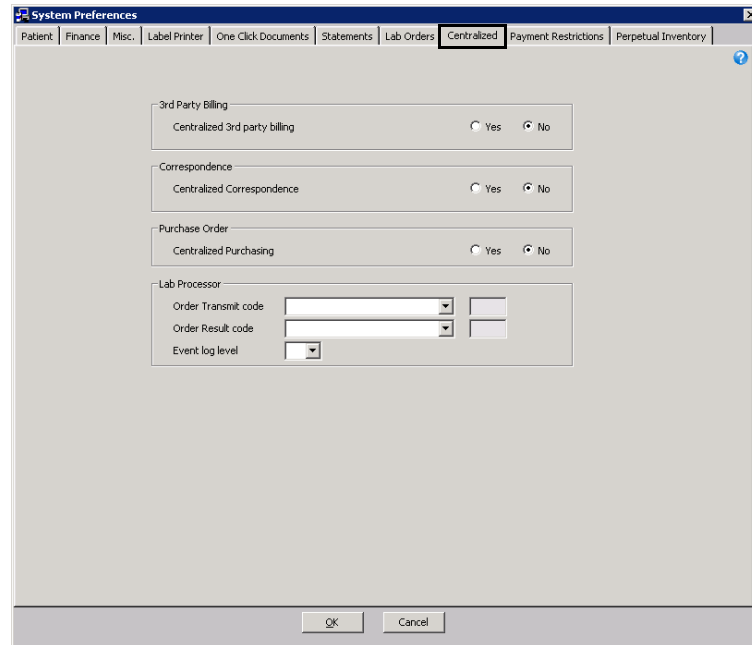
For more information on setting up centralized preferences, watch the "Centralized" video.

► **To set up centralized preferences**

1. From the OfficeMate Administration main window, click **Setup**, and select **Preferences**.
The System Preferences window opens.
2. Click the **Centralized** tab.
3. Select the **Yes** and **No** radio buttons to choose 3rd Party Billing, Purchase Order, and Correspondence options.

Preference	Setting to Yes...	Setting to No...
Centralized 3rd party billing	Allows the administrative location to process all third party billing. All third party billing must be processed in OfficeMate Administration.	Allows each store location to process their own third party billing within OfficeMate. Enables third party processing in OfficeMate for single-location practices.
Centralized correspondence	Allows the administrative location to process all correspondence. All correspondence must be generated in OfficeMate Administration.	Allows each store location to generate their own patient correspondence within OfficeMate. Enables correspondence in OfficeMate for single-location practices.
Centralized purchasing	Allows the administrative location to process all purchase orders. If you elect to centralize your purchasing, ensure that you have created a distribution center. Centralized purchasing must be done from a distribution center. For information on creating a distribution center, go to Maintaining Locations on page 24 . The Purchase Order and Receive Purchase Order menu items are disabled at store locations.	Allows each store location to process their own purchase orders within OfficeMate. Does not require single or multilocation practices to set up a distribution center in OfficeMate.

4. Select appropriate lab processing preferences from the **Order Transmit code**, **Order Result code**, and **Event log level** drop down menus.



5. Click **OK** to save your preferences and close the System Preferences window.

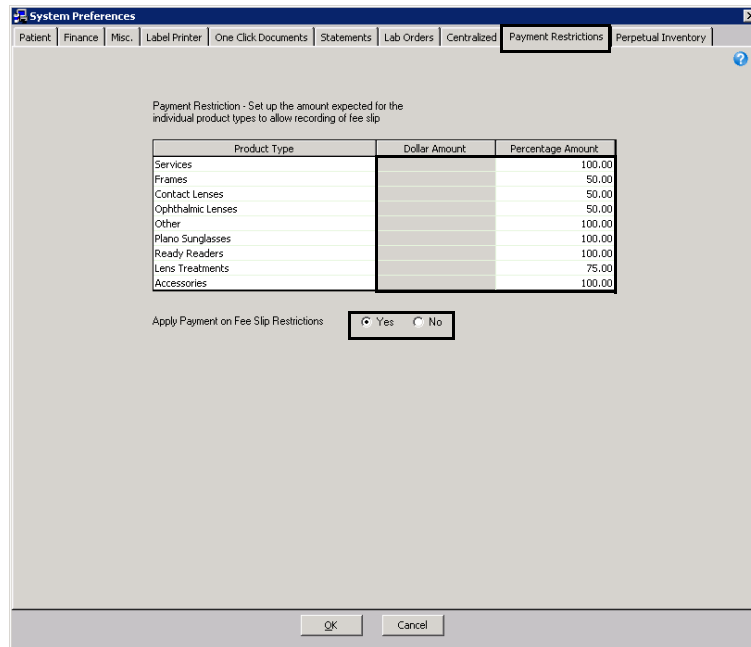
For more information on defining and changing payment restriction preferences, watch the "[Payment Restrictions](#)" video.

► To define and change payment restriction preferences

The Payment restriction preference allows you to specify the minimum dollar amount or percentage that must be paid at the time the fee slip is recorded. If the minimum payment restrictions are not met, the fee slip cannot be recorded and orders associated with the fee slip will not be processed. Users who have a security role assigned to them that allows them to override payment restrictions may enter a user name and password to override the payment restriction and record the fee slip. For more information on enabling payment override restrictions, go to [Setting Up Security on page 96](#).

1. From the OfficeMate Administration main window, click **Setup**, and select **Preferences**.
The System Preferences window opens.
2. Click the **Payment Restrictions** tab.
3. For each product type, type a dollar amount or percentage amount in the table grid.

- Select the **Yes** radio button for **Apply Payment on Fee Slip Restrictions** to enable fee slip restrictions. Select **No** to disable fee slip restrictions, as needed.



- Click **OK** to save your changes.

NOTE

When the user enters an amount on the fee slip that is less than the minimum set in the Payment Restrictions tab, the fee slip displays a warning, and an override is required to record the fee slip if the amount is not corrected.

► **To define and change perpetual inventory preferences**

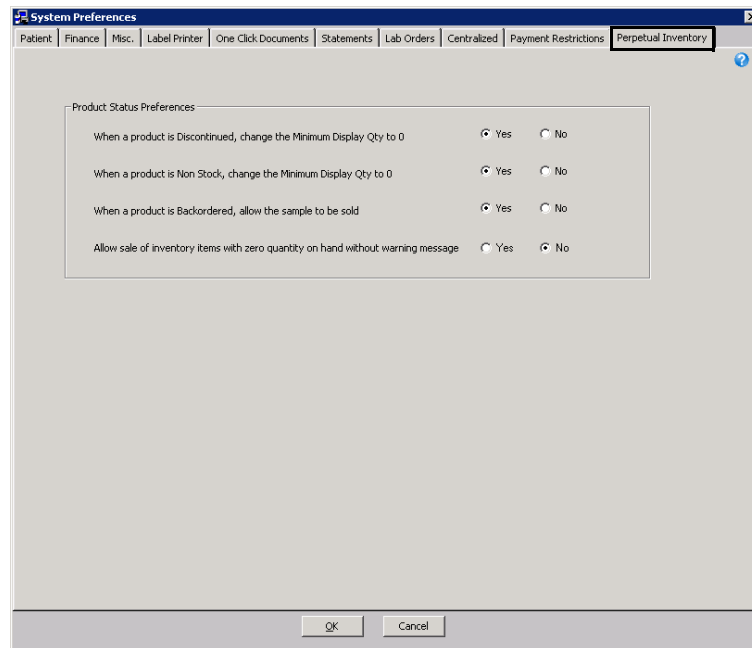
For more information on setting up perpetual inventory preferences, watch the "[Preferences> Perpetual Inventory Tab](#)" video.

Use the perpetual inventory preference to adjust how display, or sample, products are counted and sold.

- From the OfficeMate Administration main window, click **Setup**, and select **Preferences**.
The System Preferences window opens.
- Click the **Perpetual Inventory** tab.

3. Select the **Yes** or **No** radio buttons to choose your perpetual inventory options.

Preference	Setting to Yes...	Setting to No...
When a product is Discontinued, change the Minimum Display Qty to 0	Automatically sets the minimum number of samples to zero when a product is discontinued. If you are maintaining perpetual inventory, select Yes .	Leaves the number of samples or display quantities on record when a product is discontinued.
When a product is Non Stock, change the Minimum Display Qty to 0	Automatically sets the minimum number of samples to zero when a product is marked as nonstock. If you are maintaining perpetual inventory, select Yes .	Leaves the number of samples or display quantities on record when a product is no longer kept in stock.
When a product is Backordered, allow the sample to be sold	Allows product samples to be sold when the quantity available is zero. If you are maintaining perpetual inventory, select Yes .	Prevents product samples from being sold when available quantities are exhausted.
Allow Sale of Inventory Items with Zero Quantity on Hand without Warning Message	Disables the warning message that displays when an item that is not in stock is sold. If you are maintaining perpetual inventory, select No . If this preference is set to Yes, perpetual inventory on-hand, on-order, and committed counts will be inaccurate.	Displays a warning message when an item that is not in stock is sold. Selecting the Allow Sale of Inventory Items with Zero Quantity on Hand without Warning Message radio button will cause your inventory counts to be incorrect. If you are maintaining perpetual inventory, select No .

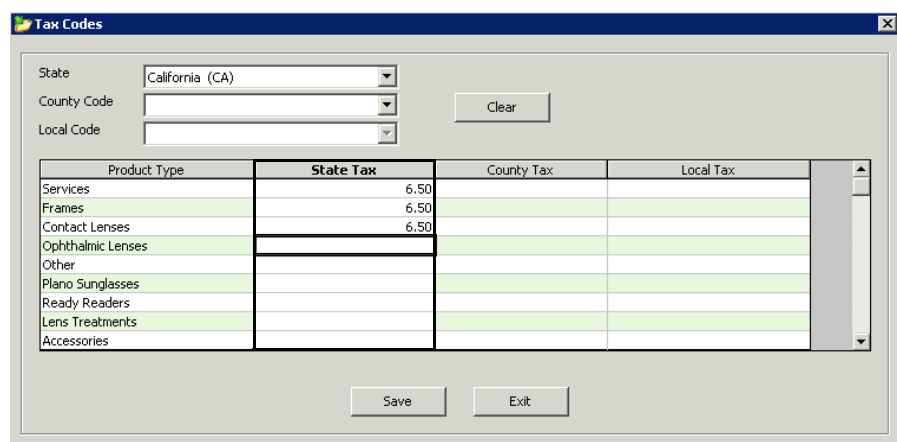


- Click **OK** to save your changes.

Setting Up Sales Tax Codes

For more information on setting up sales tax codes, watch the "Sales Tax Codes" video.

- From the OfficeMate Administration main window, click **Setup**, and select **Sales Tax Codes**.
The Tax Codes window opens.
- Select a state from the **State** drop-down menu.
- Type the state sales tax percentages for the various product types in the **State Tax** column.



- Place your cursor in the **County Code** drop-down menu and press **F12**.
The State-County-Local Maintenance window opens.

5. Type the state's counties in the **County** column and click **Save**.

The screenshot shows the 'State-County-Local Maintenance' window. The 'State' dropdown is set to 'California (CA)'. Below it is a table with three columns: 'County', 'Code', and 'Delete'. The 'County' column contains the following entries: Orange, Riverside, San Diego, Los Angeles, and several empty rows. The 'Code' and 'Delete' columns are empty. At the bottom of the window, there are three buttons: 'Save', 'Delete', and 'Cancel'. The 'Save' button is highlighted with a black border.

6. Select a county from the **County Code** drop-down menu.
7. Type the county sales tax percentages for the various product types in the **County Tax** column.
8. Place your cursor in the **Local Code** drop-down menu and press **F12**.
The **State-County-Local Maintenance** window opens.
9. Type the state's counties in the **Local** column and click **Save**.
10. Select a local area from the **Local Code** drop-down menu.
11. Type the local sales tax percentages for the various product types in the **Local Tax** column.

The screenshot shows the 'Tax Codes' window. It has three dropdown menus: 'State' (California (CA)), 'County Code' (Los Angeles ()), and 'Local Code' (Hollywood ()). There is a 'Clear' button next to the County Code dropdown. Below the dropdowns is a table with four columns: 'Product Type', 'State Tax', 'County Tax', and 'Local Tax'. The table contains the following data:

Product Type	State Tax	County Tax	Local Tax
Services	6.50	1.00	0.25
Frames	6.50	1.00	0.15
Contact Lenses	6.50	1.00	
Ophthalmic Lenses			
Other			
Plano Sunglasses			
Ready Readers			
Lens Treatments			
Accessories			

At the bottom of the window, there are two buttons: 'Save' and 'Exit'.

12. Click **Save**.

13. Select other states, counties, and local areas and record tax amounts using the instructions above.
14. Click **Exit** to close the Tax Codes window.

Setting Up Location Inventory Preferences

For more information on setting up location inventory preferences, watch the "Location Preferences" video.

The Location Preferences window allows you to set the default inventory ordering preferences for all locations and the inventory ordering preferences for each location. This section tells you how to set up location inventory preferences, including how

- [To select frame order preferences, 85](#)
- [To select soft contact order preferences, 86](#)
- [To select hard contact order preferences, 88](#)

► To select frame order preferences

1. From the OfficeMate Administration main window, click **Setup**.
2. Select **Location Preferences**.

The Location Preferences window opens.

3. Select **All** from the **System Preferences For** drop-down menu to set the default preferences for all store locations.

OR

Select a store from the **System Preference For** drop-down menu to set the preferences for an individual location.

NOTES

- If your practice is setting up location inventory preferences for the first time, select All to set defaults for all locations. Later, select the individual stores to change only those defaults that are different from other locations.
- Changes made to these preferences do not take effect until OfficeMate is closed and reopened at the location.

4. Click the **Frame Order** tab.
5. If you selected a store from the System Preference For drop-down in step 3, select only those Location Override check boxes (the check boxes on the left side of the window) that correspond to store preferences that will deviate from the preferences set for all locations; otherwise, go to step 6.
6. To allow users to adjust product quantity on hand from the Eyewear Order window, select **Yes** from the **Display the Adjust Quantity On Hand Button** radio buttons.
7. To allow users to sample frames when all other inventory is exhausted, select **Yes** from the **Allow Sample Frames to Be Sold** radio buttons.

NOTE

A dialog will display warning the user that he or she is selling the sample.

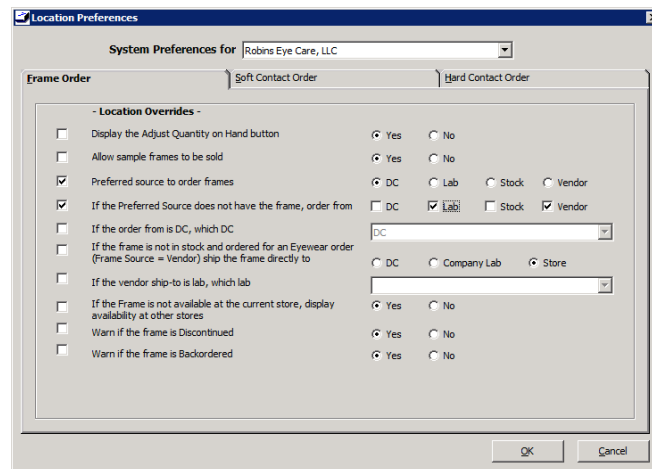
8. Select the default source for frame orders by selecting one of the **Preferred Source to Order Frames** radio buttons.

9. Select any alternative frame sources from the **If the Preferred Source Does not Have the Frame, Order From** check boxes.
10. Select an internal distribution center from the **If the Order from Is DC, which DC** drop-down menu, as needed.
11. If the frame is not in stock and must be ordered from the vendor, select the location to which the frame should be sent from the **If the Frame...Ship the Frame Directly To** radio buttons.
12. Select an internal lab from the **If the Vendor Ship-to Is Lab, which Lab** drop-down menu, as needed.
13. Select **Yes** from the **If the Frame...Display Availability at Other Stores** radio buttons to display all store locations' inventories if the frame is out of stock at your location.

NOTE

If you are a single-location practice, select **Yes** to enable staff to view inventory levels within the Eyewear Order window.

14. Select **Yes** from the **Warn if the Frame is Discontinued** radio buttons to display a dialog box when a discontinued frame is recorded on an eyewear order.
15. Select **Yes** from the **Warn if the Frame is Backordered** radio buttons to display a dialog box when a backordered frame is recorded on an eyewear order.
16. Click **OK** to save your changes.



► **To select soft contact order preferences**

1. From the OfficeMate Administration main window, click **Setup**.
2. Select **Location Preferences**.
The Location Preferences window opens.

3. Select **All** from the **System Preferences For** drop-down menu to set the default preferences for all store locations.

OR

Select a store from the **System Preference For** drop-down menu to set the preferences for an individual location.

NOTES

- If your practice is setting up location inventory preferences for the first time, select All to set defaults for all locations. Later, select the individual stores to change only those defaults that are different from other locations.
- Changes made to these preferences do not take effect until OfficeMate is closed and reopened at the location.

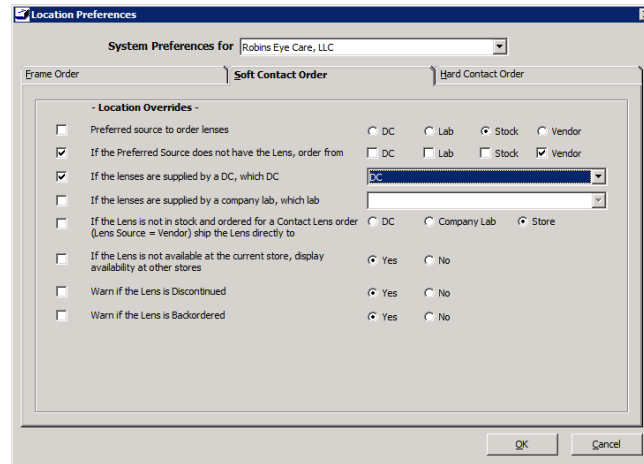
4. Click the **Soft Contact Order** tab.
5. If you selected a store from the System Preference For drop-down in step 3, select only those **Location Override** check boxes (the check boxes on the left side of the window) that correspond to store preferences that will deviate from the preferences set for all locations; otherwise, go to step 6.
6. Select the default source for soft lens orders by selecting one of the **Preferred Source to Order Lenses** radio buttons.
7. Select any alternative soft lens sources from the **If the Preferred Source Does not Have the Lens, Order From** check boxes.
8. Select an internal distribution center from the **If Lenses Are Supplied by a DC, which DC** drop-down menu, as needed.
9. Select an internal lab from the **If the Lenses Are Supplied by a Company Lab, which Lab** drop-down menu, as needed.
10. If the lens is not in stock at the internal distribution center or internal lab, and it must be ordered from the vendor, select the location to which the vendor should send the lens from the **If the Lens...Ship the Lens Directly To** radio buttons.
11. Select **Yes** from the **If the Lens...Display Availability at Other Stores** radio buttons to display all store locations' inventories if the lens is out of stock at your location.

NOTE

If you are a single-location practice, select **Yes** to enable staff to view inventory levels within the Soft Lens Order window.

12. Select **Yes** from the **Warn if the Lens is Discontinued** radio buttons to display a dialog box when a discontinued lens is recorded on an eyewear order.
13. Select **Yes** from the **Warn if the Lens is Backordered** radio buttons to display a dialog box when a backordered lens is recorded on an eyewear order.

- Click **OK** to save your changes.



► **To select hard contact order preferences**

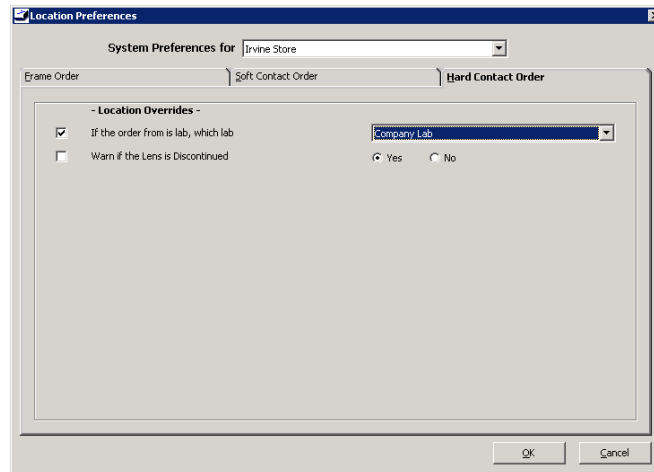
- From the OfficeMate Administration main window, click **Setup**.
- Select **Location Preferences**.
The Location Preferences window opens.
- Select **All** from the **System Preferences For** drop-down menu to set the default preferences for all store locations.
OR
Select a store from the **System Preference For** drop-down menu to set the preferences for an individual location.

NOTES

- If your practice is setting up location inventory preferences for the first time, select All to set defaults for all locations. Later, select the individual stores to change only those defaults that are different from other locations.
- Changes made to these preferences do not take effect until OfficeMate is closed and reopened at the location.

- Click the **Hard Contact Order** tab.
- If you selected a store from the System Preference For drop-down in step 3, select only those **Location Override** check boxes (the check boxes on the left side of the window) that correspond to store preferences that will deviate from the preferences set for all locations; otherwise, go to step 6.
- Select an internal lab from the **Lab to Supply Hard Contact Lens Orders** drop-down menu, as needed.
- Select **Yes** from the **Warn if the Lens is Discontinued** radio buttons to display a dialog box when a discontinued lens is recorded on an eyewear order.

- Click **OK** to save your changes.



Setting Up Discounts & Packages

NOTE Prior to setting up discounts and packages, ensure that discounts and packages are enabled in the System Preferences window, Finances tab. For more information, go to [Setting Up Preferences on page 61](#).

This section tells you how to set up discounts in OfficeMate Administration, including how

- [To open the Discount & Package Setup window, 89](#)
- [To select discount products, 90](#)
- [To build discount groups, 91](#)
- [To set up discounts and packages, 93](#)

For more information on setting up discounts and packages, watch the “[Discount and Package Setup](#)” video.

► To open the Discount & Package Setup window

1. From the OfficeMate Administration main window, click **Setup**.
2. Select **Discount & Package Setup**.

The Discount & Package Setup window opens.

► **To select discount products**

NOTES

- You must set up detailed product and service type discounts and packages on the Discount/Package Filters tab before clicking the Discount/Package tab and finalizing discounts.
- Discounts are applied to products containing *any* of the attributes selected on the Discount/Package Filters tab.

1. Open the Discount & Package Setup window. For information on opening the Discount & Package Setup window, go to [To open the Discount & Package Setup window on page 89](#).
2. Click the **Discount/Package Filters** tab.
3. Click **New**.

OR

Select an existing discount filter from the list

4. Select a product type from the **Product Type** drop-down menu.
5. Select product attributes from the **Base, Color, Lens Type, Material, Options, Type, and Other** drop-down menus as needed.

NOTES

- The attribute drop-down menus change depending on the product type selected in step 4.
- As you add more product attributes, product costs, and product fee information to the discount filter, fewer products will qualify for the discount.
- To select specific products, rather than filter the products by attributes, costs, and fees, go to step 10.

6. Select the **Prod. Fee** radio button to filter products by fee range or select the **Prod. Cost** radio button to filter products by cost range as needed.
7. Type a low dollar cost or fee in the **From** field as needed.
8. Type a high dollar cost or fee in the **To** field as needed.
9. Type the maximum quantity of product to which the discount may apply in the **Qty Limit** field as needed.
10. Select a product group from the **Product Group** drop-down menu as needed.

OR

Click **Group Builder** to create a new product group. For information on creating discount groups, go to [To build discount groups on page 91](#).

11. Record the discount information:
 - a. Select the method of discount from the **Method** drop-down menu.

NOTE

- Select **Subtract** to subtract the percent or dollar amount from the product fee.
- Select **Equals** to make the product fee an exact dollar amount or to set a specific percentage amount.
- Select **Distribute** to apply a discount amount to multiple products. The discount is applied to the specified products until the amount is exhausted.

- b. Select the **Percent** radio button if the discount is a percentage or select the **Amount** radio button if the discount is a fixed amount.
- c. Type the percent or dollar amount in the text box.

Code	Product Group	L Price	H Price	Method	%Amt	\$Amt
*1		0.00	999.00	Subtract	0	25.00
*2	EASY CARE LENS CREDIT	0.00	0.00	Subtract	0	75.00
CONTACT LENSES						
C1		0.00	0.00	Subtract	15	0.00
C2		0.00	0.00	Subtract	10	0.00
FRAMES						
F1		0.01	999.00	Subtract	0	25.00

12. Click **Save** to record the discount filter.
13. To continue setting up discounts and packages, go to [To set up discounts and packages on page 93](#).

► **To build discount groups**

1. Open the Discount & Package Setup window. For information on opening the Discount & Package Setup window, go to [To open the Discount & Package Setup window on page 89](#).
2. Click the **Discount/Package Filters** tab.
3. Create a new discount filter or select an existing discount filter from the list.
4. Click **Group Builder**.

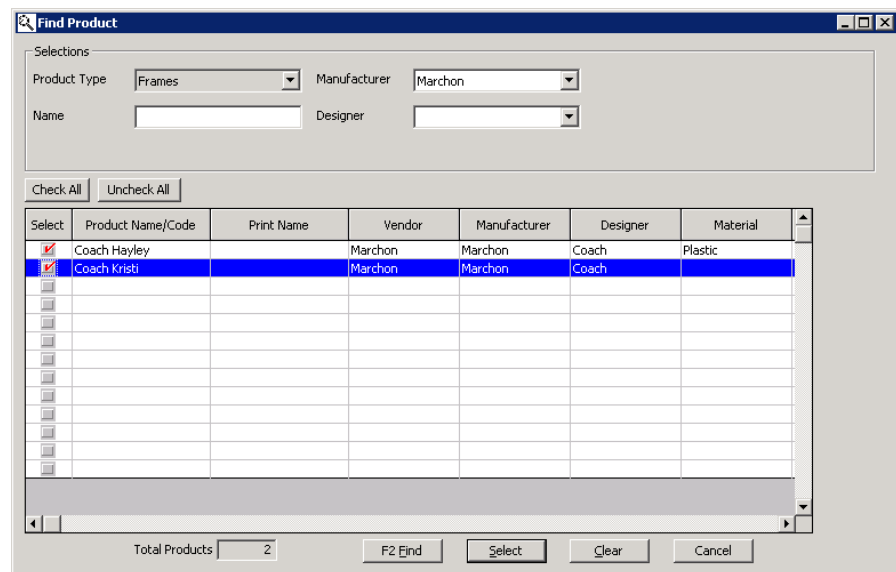
The Discount Group Builder window opens.

- Click **New Group** to create a new discount group and type a group name in the **Product Group** text box.

OR

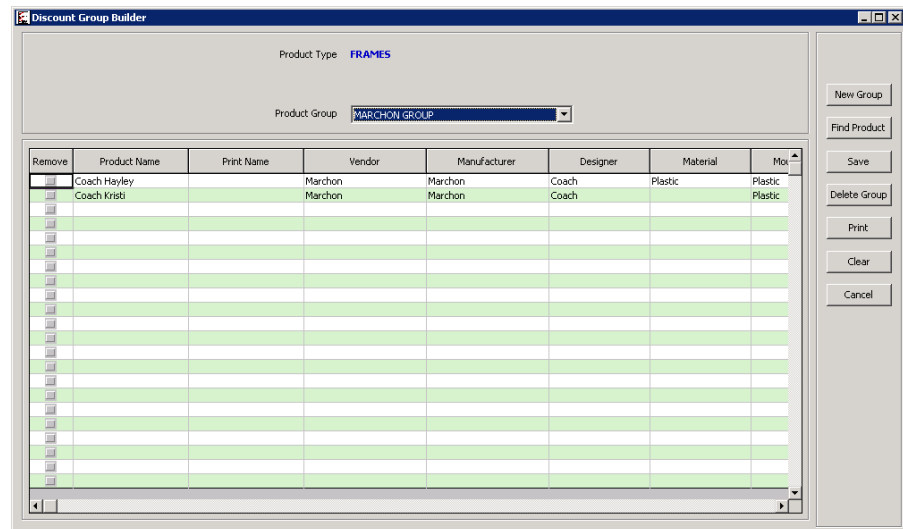
To edit an existing discount group, select the group from the **Product Group** drop-down menu.

- Click **Find Products** to locate products to add to the discount group.
The Find Product window opens.
- Type the first few letters of the name of the product(s) that you want to find in the **Name** field as needed.
- Select a manufacturer from the **Manufacturer** drop-down menu if it is available and if it is needed to refine your search.
- Select a designer from the **Designer** drop-down menu as needed.
- Click **F2 Find** to locate the product(s).
- Select the check boxes next to the product(s) that you want to add to the group.
OR
Click **Check All** to select all of the products in the results list.
- Click **Select** to save your selections.
- Repeat steps 7–12 to add additional products to the group as needed.



- Close the Find Product window when you are finished.
The products you selected are displayed in the Discount Group Builder window.
- If you need to add products to the group, click **Find Products** and repeat steps 7–14.

16. If you need to remove any products from the list, select the check box next to the product name.



17. Click **Save** to save the Group.

NOTE

If you selected any check boxes in step 16, those products are removed from the group when the group is saved.

18. Close the Discount Group Builder window.

► **To set up discounts and packages**

NOTE

You must set up discount filters prior to setting up discounts and packages. For information about setting up discount filters, go to [To select discount products on page 90](#).

1. Open the Discount & Package Setup window. For information on opening the Discount & Package Setup window, go to [To open the Discount & Package Setup window on page 89](#).
2. Click **New** and type the discount or package name in the **Discount/Package Name** text box.

OR

Select an existing discount or package from the list.

NOTE

To filter the list of discounts and packages, select the **List Filters** radio buttons.

3. Select the Discount radio button to create a discount or select the Package radio button to create a package.

NOTES

- Packages are applied to the fee slip prior to insurance payments. Packages affect both patient and insurance charges. Packages are special pricing for bundles of products or discounts that are applied to combinations of products, for example, *buy a frame and ophthalmic lenses and get a free scratch coat*.
- Discounts are applied to the fee slip after insurance payments. Discounts affect only patient charges.
- Discounts and packages are applied separately on the fee slip. Discounts are only visible in the Discounts window, and packages are only visible in the Packages window. For information about applying discounts to fee slips, go to [To apply discounts on page 164](#). For information about applying packages to fee slips, go to [To apply package discounts on page 167](#).

4. Select the **Active** check box to allow users in the locations to apply the discount or package to fee slips.
5. Select the **Password Protected** check box to require an authorized password to apply the discount or package.
6. Select the **Manual Over-ride** check box to allow users in the locations to manually edit the dollar amount or percentage of the discount or package.

NOTE

When the discount or package allows for manual overrides, the user in the location may edit the discount dollar amount or percentage for individual line items on the fee slip.

7. Select the **Rx Order Level Only** check box if the products must be on the same lab order to qualify as a package.
8. Select the **Line Item Enabled** check box if the discount can be applied as a line item discount.
9. Select the **Line Item Only** check box if the discount can *only* be applied as a line item discount.
10. Select the **Exclusive** checkbox if the discount cannot be applied with other discounts.
11. For Required Products, select the **Any** radio button to apply the discount if any one of the products on the fee slip is eligible or select the **All** radio button to apply the discount only if all of the products appear on the fee slip.
12. Select the type of product being discounted or included in the package from the **Product Type** drop-down menu.

13. Select the discount code that applies to this discount or package from the **Disc/Pack Code** drop-down menu.

NOTES

- Discount codes are assigned by OfficeMate Administration when a discount filter is created. For information about creating and editing discount filters, go to [To select discount products on page 90](#).
- If you need to delete a product type and product code, click in the row you want to delete and click **Delete Line**.

14. Repeat steps 12–13 for each product type and discount code needed to complete the discount or package.
15. To set up specific dates during which the discount or package is available:
 - a. Select the **Use Date Range** check box.
 - b. Type or select the beginning date in the **Start** field.
 - c. Type or select the end date in the **End** field.
16. If the discount or package is available only to members of a specific group or organization, for example, AARP members, or if you want to use the discount or package as a coupon, set up validation codes to ensure the patient's member number falls within a specific range:
 - a. Select the **Use Validation Codes** check box.
 - b. Type the lowest possible member number in the **Start** field.
 - c. Type the highest possible member number in the **End** field.

Active	Type	Name	Discount/Package Codes	PWord	Ord Lvl	Over-Ride	LI Enable	LI Only	Exclusive	Require	Use
<input checked="" type="checkbox"/>	D	Relative Discount		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any	<input type="checkbox"/>
<input checked="" type="checkbox"/>	D	Newspaper Ad Discount		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any	<input type="checkbox"/>
<input checked="" type="checkbox"/>	D	Senior Citizen Discount		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any	<input type="checkbox"/>
<input checked="" type="checkbox"/>	D	Employee Discount		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any	<input type="checkbox"/>
<input checked="" type="checkbox"/>	D	Marketing Discount		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any	<input type="checkbox"/>
<input checked="" type="checkbox"/>	D	Cash discount		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any	<input type="checkbox"/>
<input checked="" type="checkbox"/>	D	Insurance Discount		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any	<input type="checkbox"/>
<input checked="" type="checkbox"/>	D	Frames Promo Discount	F2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any	<input type="checkbox"/>
<input checked="" type="checkbox"/>	D	SV Lens Discount	L1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any	<input type="checkbox"/>

17. Click **Save** to save the discount or package.

Setting Up Security

For more information on setting up security preferences, watch the "[Setting Up and Maintaining Security](#)" video.

This section tells you how to assign or modify security preferences in OfficeMate, including how to change a user's password. Security is always active in OfficeMate. Setting up security will take dedication and time, so be sure to set aside some planning and implementation time before you begin using OfficeMate.

This section includes the following topics:

- [Understanding Security, 96](#)
- [Creating, Modifying, & Copying Security Roles, 98](#)
- [Assigning Roles and Passwords to Users, 106](#)
- [Setting Up Security Preferences, 107](#)

Understanding Security

Security is an important component in safeguarding patient data and complying with HIPAA rules and regulations. OfficeMate requires that you set up security so that each user must log in to view or maintain patient information.

OfficeMate leverages a role-based security system, which allows you to control how loosely or how tightly security is implemented in your practice.

A *role* is a job or a function within your practice. For example, front desk is a function within your practice that generally requires entering patient demographic data, scheduling appointments, receiving copayments, etc. You can easily think of a list of tasks within your own practice that the front desk role would need to perform as well as those of biller, office manager, and optician. OfficeMate allows you to establish which sections of the software each role can access.

It is not uncommon for one person in your practice to fill multiple roles. For example, a single person in your practice may work in the capacity of front desk, biller, and optician. OfficeMate allows you to assign multiple roles to each

individual in your practice, thereby enabling users to access the various portions of the software that they need to perform their various job functions.

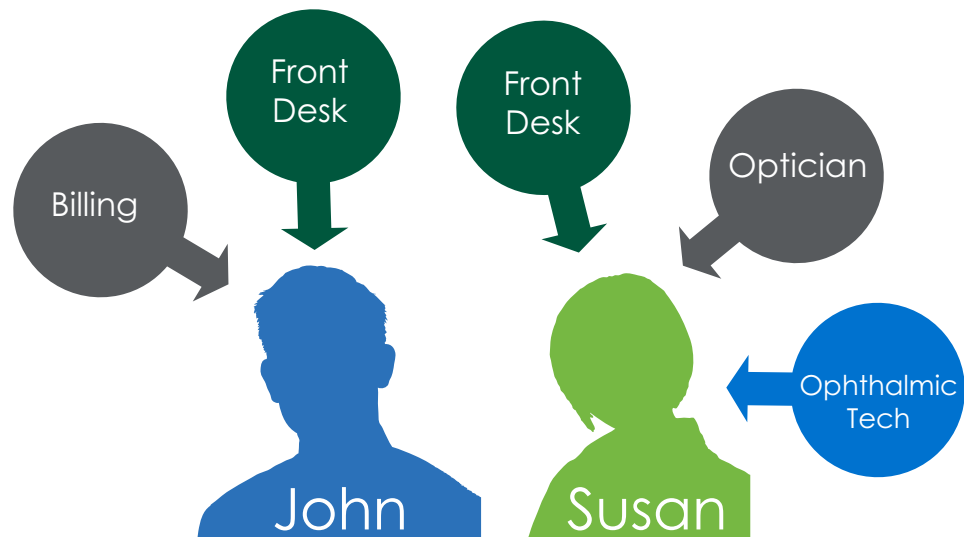


Figure 1-1: Security Roles. As illustrated here by John and Susan, multiple security roles can be assigned to each provider or staff member. The same security role can be assigned to multiple staff members when their duties overlap. In this case, both John and Susan are assigned to the Front Desk role. OfficeMate comes preloaded with several security roles that you can customize to the needs of your practice.

Each security role is made up of building blocks, which determine which parts of the software a person with that security role can access and if the role can access, modify, or delete data. You might think of role details as all the various tasks that someone filling that role would need to perform.

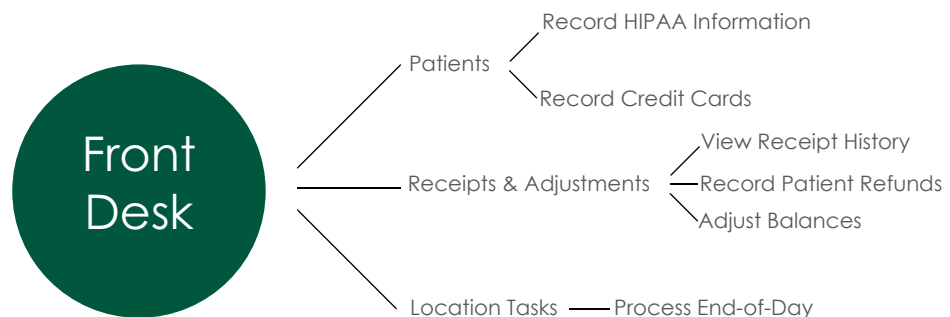


Figure 1-2: Security Role Details. The security role details are made up of building blocks that grant the user access to sections of the software, specific tasks, and levels of access. In this example, any users who are assigned the Front Desk security role can record HIPAA information, record credit cards, etc.

NOTE

OfficeMate makes setting up roles easy by including several sample roles. You can modify or delete the sample roles to your practice's needs.

For information on creating security roles, go to [Creating, Modifying, & Copying Security Roles on page 98](#).

Creating, Modifying, & Copying Security Roles

For more information on setting up security preferences, watch the “[Setting Up and Maintaining Security](#)” video.

OfficeMate leverages a role-based security system, which allows you to control how loosely or how tightly security is implemented in your practice. Before proceeding any further, read [Understanding Security on page 96](#) for a brief overview of role-based security.

This section tells you how to work with security roles in OfficeMate Administration, including how

- [To create a role, 99](#)
- [To change the name of a role, 101](#)
- [To copy a role, 101](#)
- [To define role details, 102](#)

NOTE	If you upgraded from OfficeMate 9.5 or earlier or OfficeMate Enterprise 1.0 or 2.0, security roles are created based on your existing security settings. You may need to adjust the new security roles to ensure users have access to the appropriate functions.	
	If...	Then...
	Security was off in your prior version of OfficeMate	All users are assigned to the Admin Role, enabling them to access all areas of the software.
	Security was on and users' security included Access All	Those users are assigned to the Admin Role, enabling them to access all areas of the software.
	Security was on and users' security included limited access	A new security role is created for each user with limited access. The new role names are based on the users' names. The sample roles that are installed with OfficeMate are marked as inactive.

NOTES

- If your practice requires only minimal security, assign all users to Administration Role. Go to [Assigning Roles and Passwords to Users on page 106](#) for more information.
- Prior to setting up security roles, complete each of the following tasks:
 - Ensure that all of your locations are set up. For more information on setting up locations, go to [Maintaining Locations on page 24](#).
 - Ensure that your staff and provider(s) are set up with user IDs. For more information on setting up staff and provider user IDs, go to [Maintaining Providers, Staff, & Other Resources on page 51](#).
 - Print a copy of the sample security roles to help you get started. Go to www.eyefinity.com/dam/eyefinity/documentation/OM/Security-Roles.pdf to download a list of the preinstalled sample roles. Remember, you can modify or delete the sample roles to your practice's needs.
 - Make a list of all of the jobs for which you and your employees are responsible (i.e., front desk tasks, optician, lab orders, medical technician tasks, contact lens orders, physical inventory, receiving purchase orders, pricing products, insurance processing, administration, recording exam records, etc.). These jobs will be your "roles" in OfficeMate.
 - Write each employee's name next to the jobs for which they are responsible. If some employees are responsible for more than one job, write their names next to multiple jobs.

► **To create a role**

1. Click **Setup** and select **Security**.
2. Click the **Roles** tab.

NOTES

- OfficeMate comes preloaded with example roles. Eyefinity highly recommends that you modify or copy these roles according to the needs of your practice. You are not required to use the sample roles, but rather they are there to help you get started with security roles.
- To delete an existing role that has not been assigned to any users, select the role and click **Delete**.

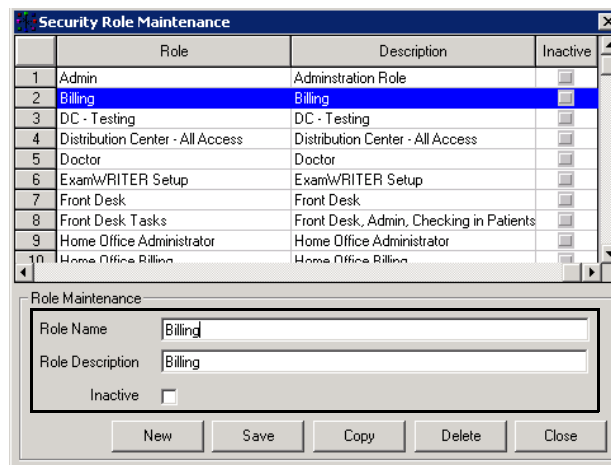
3. Create the role by performing the following steps:
 1. Click the Ellipses (...) next to the Role text box.
The Security Role Maintenance window opens.

2. Type the name of a job function in the **Role Name** text box.

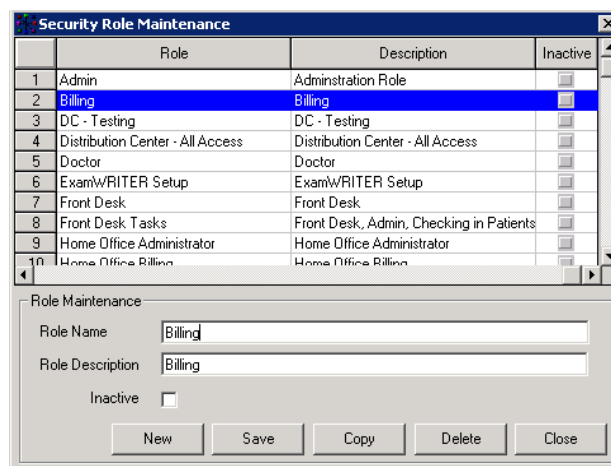
NOTE

When it comes to role names, think in general terms. Do not type the name of an employee who is responsible for the job or the exact title of people who hold that job. For example, type, "Front Desk Tasks," *not* "Suzie's Tasks."

3. Type a description of the new role in the **Role Description** text box.
4. If you don't want the role to be assigned to anyone yet, select the **Inactive** check box.



5. Click **Save**.
6. Repeat steps 2–5 to create roles for all of the job functions in your office.
7. Click **Close** to close the Security Role Maintenance window.



The roles that you created now appear in the Security Roles list on the left side of the Security window.

8. Continue by defining the role details. For information about defining role details, go to [To define role details on page 102](#).

► **To change the name of a role**

1. Click **Setup** and select **Security**.
2. Click the **Roles** tab.

NOTES

- OfficeMate comes preloaded with example roles. Eyefinity highly recommends that you modify or copy these roles according to the needs of your practice. You are not required to use the sample roles, but rather they are there to help you get started with security roles.
- To delete an existing role that has not been assigned to any users, select the role and click **Delete**.

3. Click the Ellipses (...) next to the Rule text box.
The Security Role Maintenance window opens.
4. Select the role that you want to modify from the list.
5. Type the new name of the role in the **Role Name** text box.

NOTE

When it comes to role names, think in general terms. Do not type the name of an employee who is responsible for the job or the exact title of people who hold that job. For example, type, "Front Desk Tasks," *not* "Suzie's Tasks."

6. Type a description of the new role in the **Role Description** text box.
7. If you don't want the role to be assigned to anyone yet, select the **Inactive** check box.
8. Click **Save**.
9. Repeat steps 4–8 to modify additional roles.
10. Click **Close** to close the Security Role Maintenance window.
11. Continue by defining the role details. For information about defining role details, go to [To define role details on page 102](#).

► **To copy a role**

1. Click **Setup** and select **Security**.
2. Click the **Roles** tab.

NOTES

- OfficeMate comes preloaded with example roles. Eyefinity highly recommends that you modify or copy these roles according to the needs of your practice. You are not required to use the sample roles, but rather they are there to help you get started with security roles.
- To delete an existing role that has not been assigned to any users, select the role and click **Delete**.

3. Click the Ellipses (...) next to the Rule text box.
The Security Role Maintenance window opens.
4. Select the role that you want to copy from the list.

5. Click **Copy**.
The Copy a Security Role window opens.
6. Type the name of the new role in the **New Role Name** text box.

NOTE

When it comes to role names, think in general terms. Do not type the name of an employee who is responsible for the job or the exact title of people who hold that job. For example, type, "Front Desk Tasks," *not* "Suzie's Tasks."

7. Type a description of the new role in the **Role Description** text box.
8. If you don't want the role to be assigned to anyone yet, select the **Inactive** check box.
9. Click **OK**.
10. Repeat steps 4–9 to copy additional roles.
11. Click **Close** to close the Security Role Maintenance window.
12. Continue by defining the role details. For information about defining role details, go to [To define role details on page 102](#).

► **To define role details**

Define the areas of access for a role by editing the role details. The role details determine which areas of the software a user can access and the

levels of access. Think of role details as all the various tasks that someone filling that role would need to perform.

To define the areas of access for a role, you will select progressively narrower areas of the software and then select the actions the role can perform.

NOTES

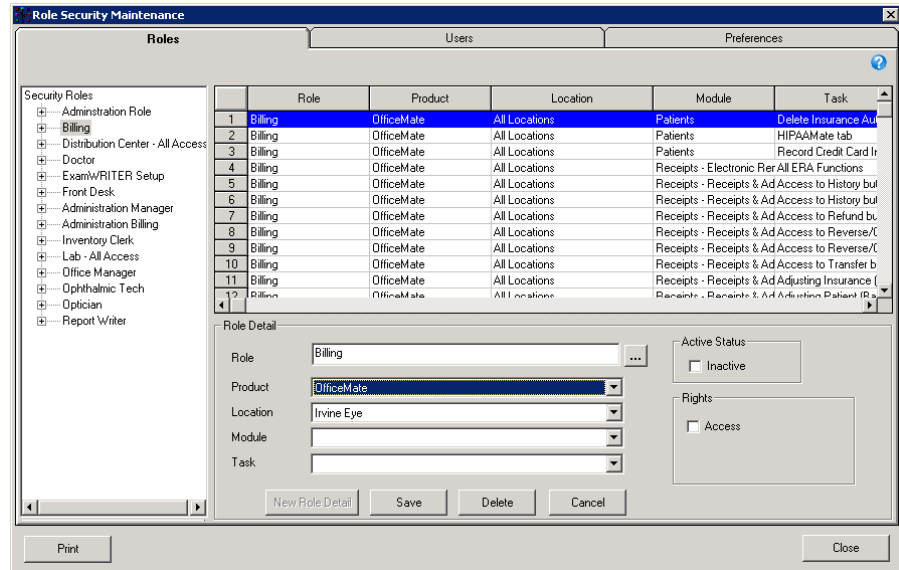
- The areas of access that you assign to a role can be as broad or limiting as you desire.
- You can assign multiple functions to a role so that a single role can access various parts of the software.
- You can assign multiple roles to a user, so you don't need to squeeze all of an individual's access into one role.
- To delete an existing role's details that have not been assigned to any users, click **Delete**.
- Eyefinity recommends printing the Security Roles report to see how roles are broken down, gain an understanding of which tasks are found in the various sections of the software, and help you plan the roles needed for your practice:
 - To print Security Roles report, click **Print** on the Security window.
 - To print the sample roles that were preinstalled in your OfficeMate software, go to www.eyefinity.com/dam/eyefinity/documentation/OM/Security-Roles.pdf.

1. Click **Setup** and select **Security**.
2. Click the **Roles** tab.
3. Select a role from the **Security Roles** list on the left side of the window.
4. Click **New Role Detail** to create a new area of access.

OR

Select an existing detail from the list.

- Select the software program that people using this role will need to access from the **Product** drop-down menu.

**NOTE**

The Product drop-down menu allows you to select the general area in which a person with this role would need access. Use the following table to help you decide which product to select.

Select this product...**If a person with this role...**

OfficeMate	Performs general business tasks within the practice.
ExamWRITER	Performs tasks within the examination room or records diagnostic testing.
ReportWRITER	Performs tasks related to medical reports.
Administration	Performs tasks that require setting up or customizing the software.
Distribution Center	Performs tasks within an internal distribution center. Most practices will not use this option.
Lab	Performs tasks within an internal lab. Most practices will not use this option.
All Products	Requires blanket access to all programs.

Remember that you are able to assign multiple areas of access to a role and multiple roles to an individual staff member or provider, so you are able to assign access to multiple software products to an individual user.

6. Select the location that people using this role and product will need to access from the **Location** drop-down menu.

NOTES

- Most practices will not need to select a location; the location populates automatically when you make a selection from the Product drop-down menu. Only multilocation practices or practices with multiple internal labs or internal distribution centers need to select a location.
- Multilocation practices will generally select All Locations for the sake of consistency. Select a specific location only if a particular store, lab, or distribution center must have a unique operating procedure.

7. Select the module in the product that people using this role and product will need to access from the **Module** drop-down menu.

NOTE

The module represents the specific area of the software that you want to allow individuals with this security role to access.

8. Select the task in the module that people using this role and product will need to access from the **Task** drop-down menu.

NOTE

The task represents the specific task that you want to allow individuals with this security role to access.

9. Select the **Access**, **Delete**, **Override**, and **Print** check boxes in the Rights box to select the level of access for the role.

NOTE

The Rights represent the specific actions that you want to allow individuals with this security role to access.

Select this checkbox...	To allow users to...
Access	View, add, and modify information associated with the task.
Delete	Delete information (when deletion is possible).
Override	Access or perform specific functions in restricted areas after entering their password.
Print	Print items when possible within the task.

10. Select the **Inactive** check box in the Active Status box to deactivate the selected task, if desired.

11. Click **Save**.

12. Click **New Role Detail** and repeat steps 5–11 to record additional areas of access that someone with the selected role would need to carry out his or her duties.

Assigning Roles and Passwords to Users

Click the Users tab to assign users to the roles that you created. You can assign as many roles as desired to users. All users are initially assigned to a default administrator role, which allows them access to all products, modules, and tasks in all locations, until you modify their role assignments.

NOTE

If your practice requires minimal security, assign all users to Administration Role. The Administration Role requires users to log in with a username and password and allows them to access all areas of the software.

To assign roles to users, perform the following steps:

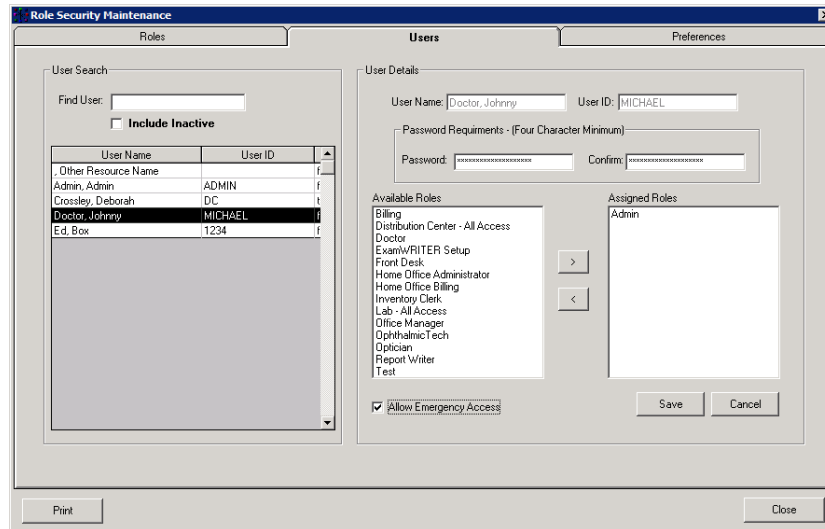
1. Click **Setup** and select **Security**.
2. Click the **Users** tab.
3. Select a user on the left side of the window; or, search for a specific user by typing all or part his or her name in the Find User text box. To find an inactive user, select the Include Inactive check box.
4. If a password does not exist for the user that you selected, type a password for the user in the **Password** and **Confirm** text boxes. The password must contain at least four characters.
5. Double-click the roles in the **Available Roles** box to move them to the Assigned Roles box and assign them to the user that you selected. You can also select the roles in the Available Roles box (press the **Ctrl** key to select multiple roles) and click the arrow button to move them to the Assigned Roles box and assign them to the user that you selected. If you assign multiple, overlapping roles to a user, the role with the highest level access will override the roles with lower levels of access. For example, if you assign one role to a user that allows him or her to print the schedule and one role that does not allow him or her to print the schedule, the user will be able to print the schedule.
6. Select the **Allow Emergency Access** check box to allow a user who does not normally have access to ExamWRITER to open patient exams in read-only mode in emergency situations.

NOTE

Emergency accesses are recorded in the Audit Log. for more information about the Audit Log, go to [Auditing Activities on page 128](#).

7. Click **Save**.

- Repeat steps 3–7 to assign all of your users roles.



Setting Up Security Preferences

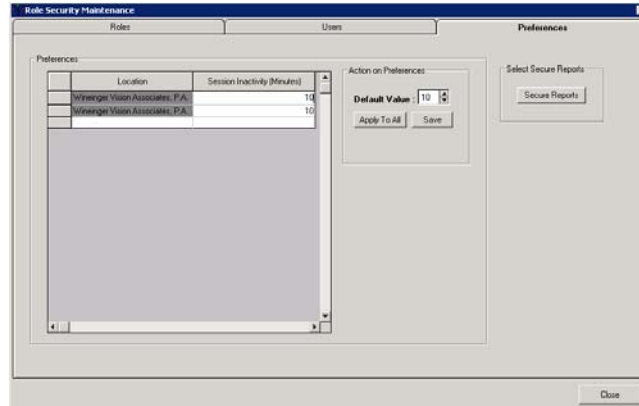
Security preferences allow you to control, globally or by location, the amount of time a user may be inactive before being logged out of the software and establish which reports are secure. This section tells you how to set up security preferences including how

- [To set up inactivity periods, 107](#)
- [To secure reports, 108](#)

► To set up inactivity periods

- Click **Setup** and select **Security**.
- Click the **Preferences** tab.
- Place your cursor in the cell next to a location and type the number of inactive minutes after which you want users to be logged off the OfficeMate Suite.
- Repeat step 3 for each location; or, if you want all users to be logged off the OfficeMate Suite after the same number of inactive minutes, type or select the default number of inactive minutes in the Default Value box and click **Apply To All**.

5. Click **Save**.



6. Click **Close** to close the Security window.

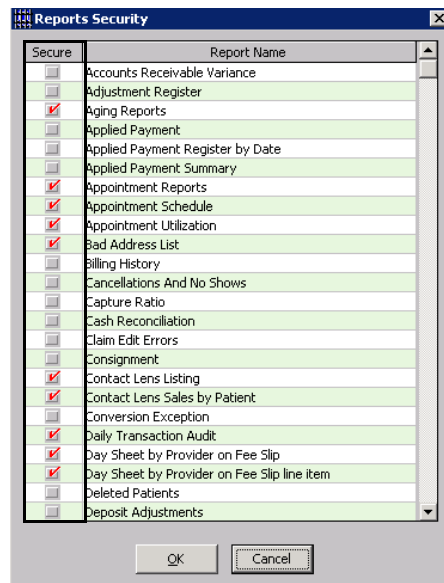
► **To secure reports**

1. Click **Setup** and select **Security**.
2. Click the **Preferences** tab.
3. Click **Secure Reports** to restrict user access to reports.
The Reports Security window opens.

- Select the check box in the **Secure** column next to each report that you want to restrict access.

NOTES

- Selected reports can be viewed and printed only by users whose security roles include Secured Reports.
- To allow a user to view and print secured reports create a role, or assign an existing role, that includes the OfficeMate or OfficeMate Administration product, Reports module, and Secured Reports task. For more information about creating roles, go to [Creating, Modifying, & Copying Security Roles on page 98](#). For information about assigning roles, go to [Assigning Roles and Passwords to Users on page 106](#).
- Deselected reports are not secured and can be viewed and printed by any user.



- Click **OK** to close the Reports Security window.
- Click **Close** to close the Security window.

Setting Up ExamWRITER

ExamWRITER offers many ways for you to customize your EMRs. Before you begin creating, modifying, and viewing EMRs, customize ExamWRITER by setting up your preferences and medication information to your practice needs. This section includes the following topics:

- [Setting Up Preferences, 110](#)
- [Maintaining Medication Information, 117](#)
- [Customizing Exam Data, Exam Text, & Auto Letter Sequences, 123](#)

Setting Up Preferences

This section tells you how to set up preferences in ExamWRITER, including how

- To set up general preferences, 110
- To set up report settings preferences, 112
- To set up default preferences, 113
- To set up copy forward preferences, 115
- To set up Rx print option preferences, 116

For more information on setting up ExamWRITER preferences, watch the "Preferences" video.

NOTE

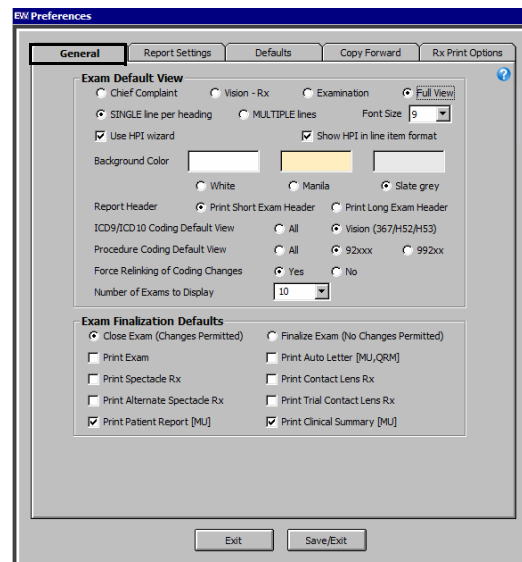
You can change your ExamWRITER preferences any time you are *not* in an exam record. Close all exam records in the ExamWRITER chart window before changing ExamWRITER preferences.

► To set up general preferences

1. From the OfficeMate Administration main window, click **Setup**, select **ExamWRITER**, and then select **Preferences**.

The Preferences window opens.

2. Click the **General** tab.



3. Select the appropriate **Exam Default View** radio buttons:
 - a. Select which tab initially displays when an exam is opened:
 - **Chief Complaint**
 - **Vision-Rx**
 - **Examination**
 - **Full View**
 - b. Select how text displays on the exam:
 - **SINGLE line per heading** displays observations in paragraph form.
 - **MULTIPLE lines per heading** displays observations in a vertical list.The default views are Full Exam View and MULTIPLE lines.
4. If you want to use the HPI Wizard to more easily and accurately document HPI information, select the **HPI wizard** check box. If you select this check box, select the **Show HPI in line item format** check box if you want to document HPI information on an exam record in a vertical, multiline format (leave the check box deselected if you want to document HPI information on an exam in a horizontal, narrative format).

The default preference does not have the HPI wizard check box selected.
5. Select an exam display font size from the **Font Size** drop-down menu.

The default font size is 10.
6. Select the appropriate **Exam Background Color** of White, Manila, or Slate grey.

The default exam background color is Slate grey.
7. Select the appropriate **Exam Report Format** to Print Short Exam Headers or Print Long Exam Headers.

The default format is Print Long Exam Header.

NOTE

Printing a short exam header will print the patient's name, DOB, age, exam date, occupation, and chart number. Printing a long exam header will print the patient's name, DOB, age, exam date, occupation, social security number, chart number, address, and phone number.

8. Select a default ICD-9 coding or ICD-10 coding and default procedure coding view for the Diagnosis/Procedure Coding window from the **ICD9/ICD10 Coding Default View** and **Procedure Coding Default View** radio buttons.

The default view is All.
9. Select the appropriate **Force Relinking of Coding Changes** radio button to open a window in the Diagnosis/Procedure Coding window to remind you to review linked codes.

The default selection is Yes.
10. Select how many exams to display in the Exam History drop-down menu on the ExamWRITER chart window from the **Number of Exams to Display**

drop-down menu. This preference is especially helpful if you have patients with many exams over many years.

The default selection is 10.

11. Select the appropriate **Exam Finalization Defaults** to Close Exam (Changes Permitted), Finalize Exam (No Changes Permitted), Print Exam, Print Auto Letter, Print Spectacle Rx, Print Contact Lens Rx, Print Alternate Spectacle Rx, Print Trial Contact Lens Rx, and Print Patient Report, and Print Clinical Summary.

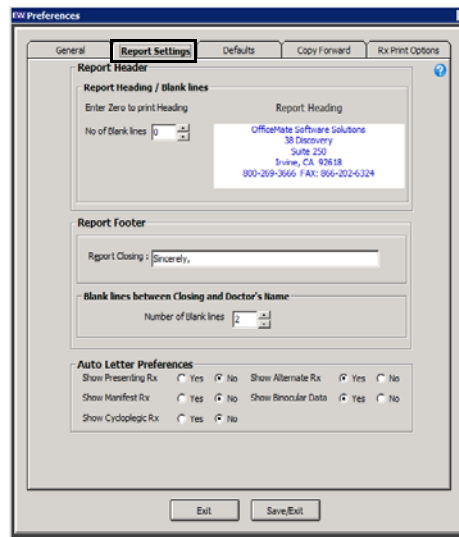
NOTES

- If you select Finalize Exam (No Changes Permitted), you cannot make changes to the exam after it is finalized and closed. You will only be able to add information to the exam in an addendum.
- If you select Print Auto Letter and you are using ECR Vault, then the exam and auto letter is automatically saved in ECR Vault.

12. If you are using the standalone version of ExamWRITER (without OfficeMate) and a selected third party practice management software system, select the location of your BIDEAS folder in the **ExamWRITER Import/Export Directory** box.
13. Click **Save/Exit** to save your changes and close the Preferences window.

► To set up report settings preferences

1. From the OfficeMate Administration main window, click **Setup**, select **ExamWRITER**, and then select **Preferences**.
The Preferences window opens.
2. Click the **Report Settings** tab.



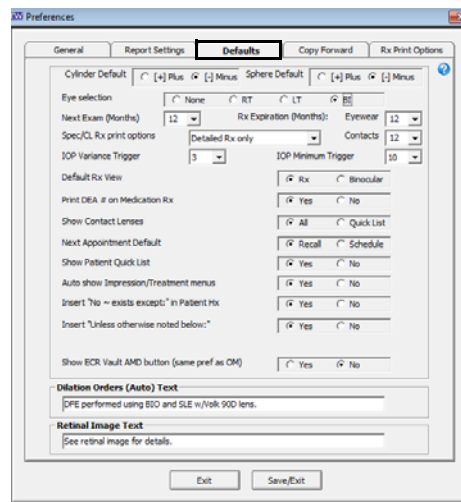
- Enter the number of blank lines that you want to appear in your report header.

NOTE If you are not using your office stationary and you want to print a report heading, enter 0 as the number of blank lines.

- Type the **Report Closing** that you want to appear in your report footer.
- Enter the number of blank lines that you want to appear between the closing and doctor's name.
- Select appropriate **Auto Letter Preferences** Yes or No radio buttons to display or hide the presenting Rx, manifest Rx, cycloplegic Rx, and alternate Rx on auto letters.
- Click **Save/Exit** to save your changes and close the Preferences window.

► To set up default preferences

- From the OfficeMate Administration main window, click **Setup**, select **ExamWRITER**, and then select **Preferences**.
The Preferences window opens.
- Click the **Defaults** tab.



- Select the appropriate default **Cylinder Default Sign**.
The default is [-] Minus.
- Select the appropriate default **Sphere Default Sign**.
The default is [-] Minus.
- Select the appropriate default **Eye selection** to view ExamWRITER text data for None, RT, LT, or BI.
The default is None, although we recommend selecting BI.
- Select a default recall date from the **Next Exam (Months)** drop-down menu.
The default is 12 months.

7. Select a default eyewear and contact lens Rx expiration date from the **Rx Expiration (Months)** drop-down menus.
The defaults are 12 months.
8. Select the default spectacle and contact lens Rx print option from the **Spec/CL Rx print options** drop-down menu.
The default is Wallet size Rx only.
9. Select an IOP variance range between 1 and 20 from the **IOP Variance Trigger** drop-down menu.
If the most recently recorded IOP value in a patient's exam deviates from any IOP value in the patient's history more than the IOP variance trigger, it will be highlighted in red in the IOP table in the Exam - Special Tests tab.
10. Select a minimum IOP trigger between 10 and 40 from the **IOP Minimum Trigger** field drop-down menu.
If the most recently recorded IOP value in the patient's exam is greater than the trigger value, that cell in the IOP grid turns red.
11. Select the appropriate **Default Rx View**.
The default is Rx.
12. Select the appropriate default **Print DEA # on Medication Rx** radio button.
The default is Yes.
13. Select the appropriate default **Show Contact Lenses** radio button to choose whether you want to view all contact lenses or only the lenses that are in your Quick List in the Select Contact Lens window.
The default is All.
14. Select the appropriate **Next Appointment Default** radio button to choose whether you want to assign a recall date or schedule an appointment in the Follow-Up window.
The default is Recall.

NOTES

- If you select **Recall**, the recall will be recorded in the EMR and OfficeMate.
- If you select **Schedule**, the appointment will be recorded in the EMR, but no appointment will be scheduled in OfficeMate.

15. Select the appropriate **Show Patient Quick List** radio button to choose whether you want to always display or hide the Quick List.
The default is Yes.
16. Select the appropriate **Auto show Impression/Treatment menus** radio button to choose whether you want to automatically open impression and treatment windows after selecting examination exceptions.
The default is Yes.
17. Select the appropriate **Insert "No ~ exists except:" in Patient Hx** radio button to choose whether you want to automatically insert the "No ~ exists

except:" text in the exam record when an exception is selected in the Patient History window.

The default is Yes.

18. Select the appropriate **Insert "Unless otherwise noted below:"** radio button to choose whether you want to automatically select the "Unless otherwise noted below:" check box on the Patient History, Review of Systems, External Exam, Slit-Lamp Exam, and Routine Ophthalmoscopy windows

The default is Yes.

19. Select the appropriate **Show ECR Vault AMD button (same pref as OM)** radio button to choose whether you want to display the ECR AMD button in the Patient Demographics window in OfficeMate and on the exam chart window in ExamWRITER.

The default is No.

20. Type the default **Dilation Orders (Auto)** in the text box.

The default is DFE performed using BIO and SLE w/Volk 90D lens.

21. Type the default **Retinal Image** text in the text box.

The default is See retinal image for details.

22. If you are using the standalone version of ExamWRITER (without OfficeMate) and a selected third party practice management software system, select the **On Third Party Interface** radio button to export exam files to your BIDEAS folder or select the Off radio button if you do not want to export exam files to your BIDEAS folder.

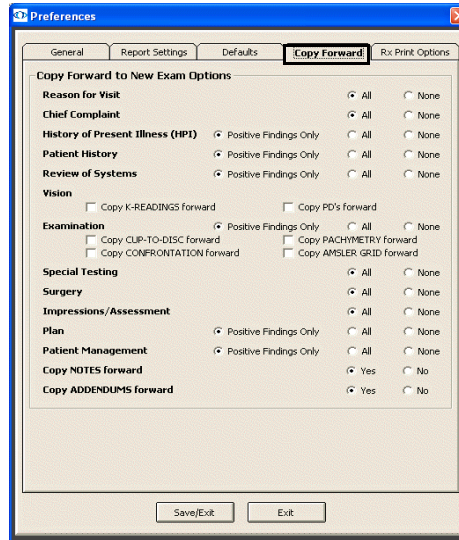
23. Click **Save/Exit** to save your changes and close the Preferences window.

► **To set up copy forward preferences**

1. From the OfficeMate Administration main window, click **Setup**, select **ExamWRITER**, and then select **Preferences**.

The Preferences window opens.

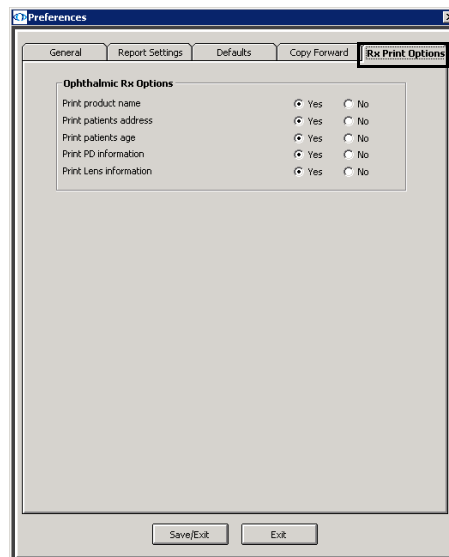
- Click the **Copy Forward** tab.



- Select the appropriate **Copy Forward To New Exam Options** to copy former patient specific exam template information to a new patient exam.
- Click **Save/Exit** to save your changes and close the Preferences window.

► **To set up Rx print option preferences**

- From the OfficeMate Administration main window, click **Setup**, select **ExamWRITER**, and then select **Preferences**.
The Preferences window opens.
- Click the **Rx Print Options** tab.



- Select appropriate **Ophthalmic Rx Options**.
- Click **Save/Exit** to save your changes and close the Preferences window.

Maintaining Medication Information

This section tells you how to maintain medication information in ExamWRITER, including how

- [To maintain medication information, 117](#)
- [To add new medication information, 119](#)
- [To delete medication information, 121](#)

NOTE

You can customize and maintain medication information at any time while you are entering information into an EMR. To access the Medications Maintenance window from within an EMR, follow the instructions below:

1. Click the **Patient Hx – ROS** tab.
2. Click the **Patient History** bar.
The Patient History window opens.
3. Select the **Medications - Systemic/Ocular** check box and click **Process**.
The Patient SYSTEMIC Medications window opens.
4. Right-click on a medication to customize or maintain it.
The Medications Maintenance window opens.

For more information on maintaining medication information, watch the "[Medication Maintenance](#)" video.

► To maintain medication information

1. On the OfficeMate Administration main window, click **Setup**, select **ExamWRITER**, and then select **Medications Maintenance**.
The Medications Maintenance window opens with a list of the most commonly prescribed medications.

- Type text in the **Name Search** text box to search for a medication.
OR
Select a group from the **Group to view** drop-down menu.

NOTE Click on a column heading to sort the column in ascending order.

Name	Generic	Strength	Dosage	Route	Frequency
4 AP (Amino Puridine)					
Abilify					
Accolate	Zafirlukast				
Accupril	Quinapril HCL				
Accutane	Isotretinoin				
ace inhibitor					
Acetaminophen	Acetaminophen				
acetamide ointment					
Acid reflux - unknown					
Aciflex	Rabeprazole				
Aciphex					
ACNE					
actagall					
Activel					
ACTIVELLA					
Actonel	Risedronate				

- Double-click the medication that you want to modify.
The medication information appears in the text boxes at the top of the Medications Maintenance window.
- Click the **Yes** radio button to show the medication in the Quick List of medications.
OR
Click the **No** radio button to keep the medication in the database, but hide it in the Quick List of medications.
- Modify the **Category, Name, Generic, Indications, Group,** and **Default Values** information.

- Click **Save** to save your changes and keep the Medications Maintenance window open.

OR

Click **Save/Exit** to save your changes and close the Medications Maintenance window.

EW Medication/Allergen Maintenance

Category: Systemic
 Name: acetamide ointment
 Generic:
 Indications:
 Group: Systemic
 Show on Quick List: Yes No
 RxNorm Code:
 Category: OTC Narcotic

Default Values
 Allow substitution: Yes No
 Refills: 2
 Quantity: 3 ml
 Strength: 0.03% Dose: 1 Drop (1gt)
 Route: Orally
 Frequency: 8xd
 Duration: 1 hours

New Delete Cancel Save Save/Exit Exit

Medication/Allergen View
 Name Search:
 Click Heading to sort...
 Group to view: (All)

Name	Generic	Strength	Dosage	Route	Frequency
4 AP (Amino Puridine)					
Abilify					
Accolate	Zafirlukast				
Accupril	Quinapril HCL				
Accutane	Isotretinoin				
ace inhibitor					
Acetaminophen	Acetaminophen				
acetamide ointment					
Acid reflux - unknown					
Aciflex	Rabeprazole				
Aciphex					
ACNE					
actagall					
Activel					
ACTIVELLA					
Actonel	Risedronate				

► To add new medication information

- On the OfficeMate Administration main window, click **Setup**, select **ExamWRITER**, and then select **Medications Maintenance**.

The Medications Maintenance window opens with a list of the most commonly prescribed medications.

- Click **New**.

EW Medication/Allergen Maintenance

Category: Systemic
 Name: Accupril
 Generic: Quinapril HCL
 Indications: Hypertension
 Group: Systemic

Show on Quick List: Yes No
 RxNorm Code: 4568

Category:
 OTC
 Narcotic

Default Values:
 Allow substitution: Yes No
 Refills: [dropdown]
 Quantity: [dropdown]
 Strength: [dropdown] Dose: [dropdown]
 Route: [dropdown]
 Frequency: [dropdown]
 Duration: [dropdown]

Buttons: New, Delete, Cancel, Save, Save/Exit, Exit

Medication/Allergen View

Name Search: [text box] Click Heading to sort... Group to view: (All)

Name	Generic	Strength	Dosage	Route	Frequency
4 AP (Amino Puridine)					
Abilify					
Accolate	Zafirlukast				
Accupril	Quinapril HCL				
Accutane	Isotretinoin				
ace inhibitor					
Acetaminophen	Acetaminophen				
acetamide ointment					
Acid reflux - unknown					
Aciflex	Rabeprazole				
Aciphex					
ACNE					
actagall					
Activel					
ACTIVEVELLA					
Actonel	Risedronate				

- Click the **Yes** radio button to show the medication in the Quick List of medications.
OR
Click the **No** radio button to keep the medication in the database, but hide it in the Quick List of medications.
- Add information to the **Category, Name, Generic, Indications, Group,** and **Default Values** text boxes and drop-down menus.

- Click **Save** to save your changes and keep the Medications Maintenance window open.

OR

Click **Save/Exit** to save your changes and close the Medications Maintenance window.

Name	Generic	Strength	Dosage	Route	Frequency
4 AP (Amino Puridine)					
Ablify					
Accolate	Zafirlukast				
Accupril	Quinapril HCL				
Accutane	Isotretinoin				
ace inhibitor					
Acetaminophen	Acetaminophen				
acetamide ointment					
Acid reflux - unknown					
Aciflex	Rabeprazole				
Aciphex					
ACNE					
actagall					
Activel					
ACTIVEVILLA					
Actonel	Risedronate				

► To delete medication information

- On the OfficeMate Administration main window, click **Setup**, select **ExamWRITER**, and then select **Medications Maintenance**.

The Medications Maintenance window opens with a list of the most commonly prescribed medications.

- Type text in the **Name Search** text box to search for a medication.
OR
Select a group from the **Group to view** drop-down menu.

NOTE Click on a column heading to sort the column in ascending order.

BW Medication/Allergen Maintenance

Category: Systemic
 Name: Accupril
 Generic: Quinapril HCL
 Indications: Hypertension
 Group: Systemic
 Show on Quick List: Yes No
 Rx:Norm Code: 4568
 Category: OTC Narcotic

Default Values:
 Allow substitution: Yes No
 Refills: [dropdown]
 Quantity: [dropdown]
 Strength: [dropdown] Dose: [dropdown]
 Route: [dropdown]
 Frequency: [dropdown]
 Duration: [dropdown]

Buttons: New, Delete, Cancel, Save, Save/Exit, Exit

Medication/Allergen View

Name Search: [text box] Click Heading to sort... Group to view: (All)

Name	Generic	Strength	Dosage	Route	Frequency
4 AP (Amino Puridine)					
Abilify					
Accolate	Zafirlukast				
Accupril	Quinapril HCL				
Accutane	Isotretinoin				
ace inhibitor					
Acetaminophen	Acetaminophen				
acetamide ointment					
Acid reflux - unknown					
Aciflex	Rabeprazole				
Aciphex					
ACNE					
actagall					
Activel					
ACTIVELLA					
Actonel	Risedronate				

- Double-click the medication that you want to delete.
The medication information appears in the text boxes at the top of the Medications Maintenance window.

- Click **Delete**.

NOTE

Deleting a medication does not remove it from a patient record; instead, deleting a medication removes it from the ExamWRITER database.

EW Medication/Allergen Maintenance

Category: Systemic
 Name: acetamide ointment
 Generic:
 Indications:
 Group: Systemic
 Show on Quick List: Yes No
 RxNorm Code:
 Category: OTC Narcotic

Default Values
 Allow substitution: Yes No
 Refills: 2
 Quantity: 3 ml
 Strength: 0.03% Dose: 1 Drop (1gt)
 Route: Orally
 Frequency: 8xd
 Duration: 1 hours

Buttons: View, Delete, Cancel, Save, Save/Exit, Exit

Medication/Allergen View
 Name Search:
 Click Heading to sort...
 Group to view: (All)

Name	Generic	Strength	Dosage	Route	Frequency
4 AP (Amino Puridine)					
Abilify					
Accolate	Zafirlukast				
Accupril	Quinapril HCL				
Accutane	Isotretinoin				
ace inhibitor					
Acetaminophen	Acetaminophen				
acetamide ointment					
Acid reflux - unknown					
Aciflex	Rabeprazole				
Aciphex					
ACNE					
actagall					
Activel					
ACTIVELLA					
Actonel	Risedronate				

- Click **Exit** to close the Medications Maintenance window.

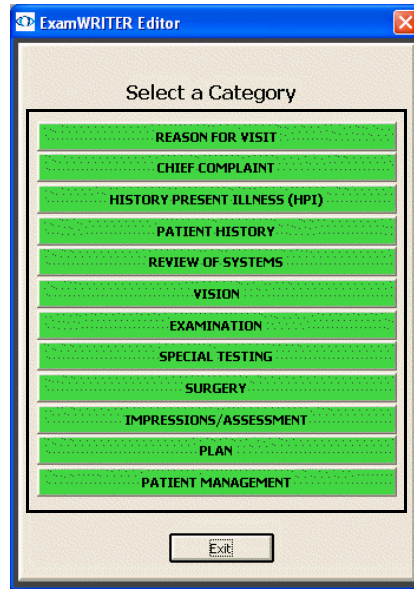
Customizing Exam Data, Exam Text, & Auto Letter Sequences

For more information on using the Menu Editor, watch the "Menu Editor" video.

- On the OfficeMate Administration main window, click **Setup**, select **ExamWRITER**, and then select **Menu Editor**.

The ExamWRITER Editor window opens.

- Select the category in which you want to customize exam data and auto letter sequences.

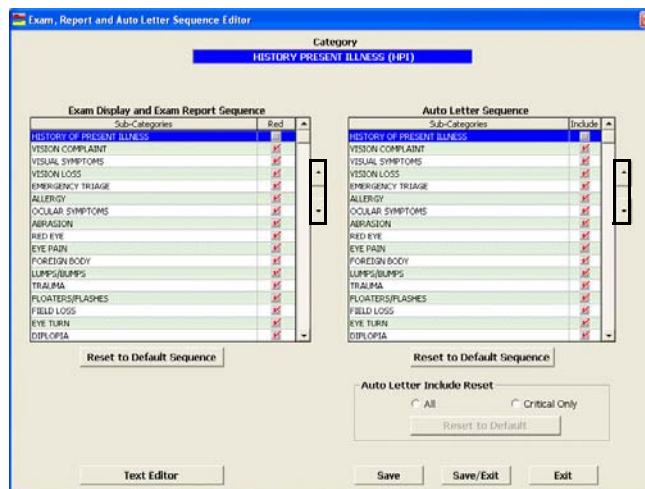


The Exam, Report and Auto Letter Sequences Editor window opens.

- Modify the sequence of exams and auto letters using the arrow buttons on the right side of the Exam Display and Exam Report Sequence box and Auto Letter Sequence box.

NOTES

- You can only resequence subcategories within a selected category.
- Editing subcategory sequences only modifies subcategories in current and new exams; resequencing modifications will *not* be visible in previous exams.



- Select the **red** check boxes in the Exam Display and Exam Report Sequence box to display subcategories in red text on the ExamWRITER chart window.

5. Deselect the **Include** check boxes in the Auto Letter Sequence box to exclude data from auto letters.

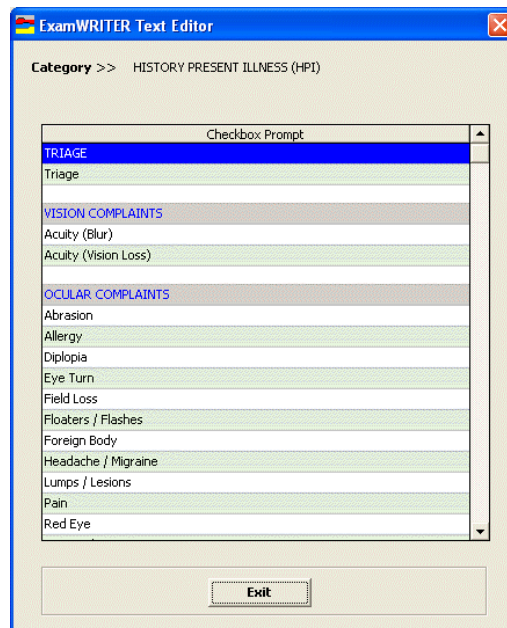
NOTES

- Click the **Reset to Default Sequence** buttons to reset the Include and Red check boxes to the default settings.
- Select the appropriate **Auto Letter Include Reset** radio button to print all exam information or only critical exam information. The default format is Critical Only. Printing critical information will only print medical information in the category that appears in red text in the exam record.

6. Click **Text Editor** to customize descriptive exam text; otherwise, go to step 11.

The ExamWRITER Text Editor window opens.

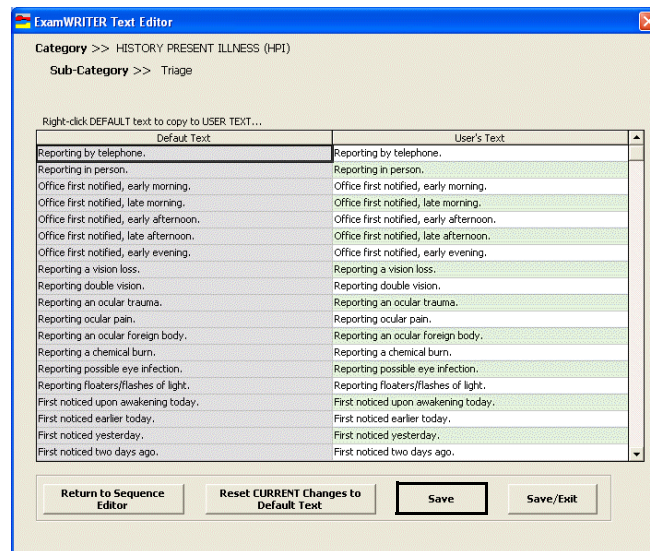
7. Double-click a subcategory to customize the exam text within the category.



8. Double-click on a string of **User's Text**, modify the text, and click **Save**.

NOTES

- Modifying text within subcategories does not alter check box prompts in ExamWRITER windows; instead, it populates the Expanded Description text box in ExamWRITER windows with your modified subcategory text.
- Editing text within subcategories only modifies text in current and new exams; text modifications will *not* be visible in previous exams.
- Right-click on a string of Default Text and select **Copy Default Text** to copy the default text to the User's Text.
- Click **Reset CURRENT Changes to Default Text** to reset the sequences to the default settings prior to clicking Save or Save/Exit. After you save the text, you cannot reset the modified text back to your default text.
- Click **Return to Sequence Editor** to return to the Exam, Report and Auto Letter Sequence Editor window.



9. Click **Save/Exit** to close the ExamWRITER Text Editor window.
10. Double-click on another subcategory in the ExamWRITER Text Editor window and repeat steps 8–9 or click **Exit** to close the window.
11. Click **Save/Exit** to close the Exam, Report and Auto Letter Sequence Editor window.
12. Click **Exit** to close the ExamWRITER Editor window.
13. Close and reopen ExamWRITER to view your changes in the ExamWRITER chart window.

Encrypting & Decrypting the Database

By default, OfficeMate/ExamWRITER encrypts patient and provider protected health information (PHI) in your database. If you need to disable or re-enable encryption, perform the following steps.

NOTE Passwords are encrypted within the database regardless of whether the rest of the database is encrypted or not; this functionality requires no action on your part.

This section describes how

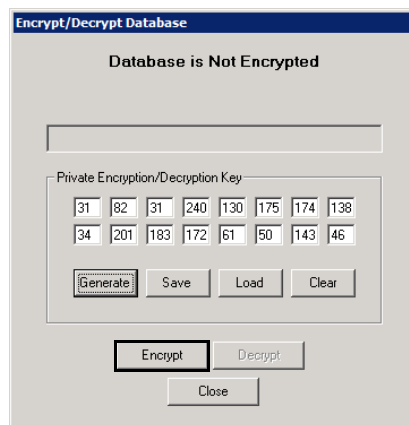
- To encrypt the database, 127
- To decrypt the database, 128

► **To encrypt the database**

NOTES

- You *must* back up your database prior to encrypting or decrypting it. If the encryption or decryption process is interrupted due to a power outage, disk failure, system error, or any other reason, the database will become irreparably damaged. Protect your practice: Back up your data!
- If you are using 4PatientCare, do *not* encrypt your database.
- You cannot encrypt the database if any other users are logged in.

1. Click **Setup** and select **Encrypt/Decrypt Database**.
The Encrypt/Decrypt Database window opens.
2. Click **Encrypt** to encrypt the database.



3. Click **Close** when the encryption process is completed.
4. Close and reopen OfficeMate Administration.

► To decrypt the database

NOTES

- You *must* back up your database prior to encrypting or decrypting it. If the encryption or decryption process is interrupted due to a power outage, disk failure, system error, or any other reason, the database will become irreparably damaged. Protect your practice: Back up your data!
- You cannot decrypt the database if any other users are logged in.

1. Click **Setup** and select **Encrypt/Decrypt Database**.
The Encrypt/Decrypt Database window opens.
2. Click **Decrypt** to decrypt the database.
3. Click **Close** when the decryption process is completed.
4. Close and reopen OfficeMate Administration.

Auditing
Activities

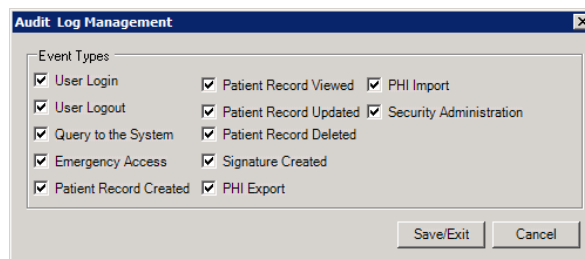
For more information on using the audit log, watch the "Audit Log" video.

The Audit Log Review window is a feature of OfficeMate Administration that allows you to view the activities of the OfficeMate and ExamWRITER users in your practice, to track changes made to a particular patient's record, or view changes made to a specific exam. This section explains how

- [Managing Auditable Transactions, 128](#)
- [Viewing & Printing Audit Logs, 129](#)
- [Understanding the Audit Log, 130](#)

Managing Auditable Transactions

1. Click **Setup** and select **Audit Log Management**.
The Audit Log Management window opens.
2. Select only the check boxes that correspond to the types of transactions that are important to your practice and deselect those that are unimportant.

**NOTE**

- Deselecting check boxes disables an audit trail from being created, and those transactions will not be auditable.
- Select only those transactions for which auditing is important to your practice. Each transaction that you select adds to the size of your database as each occurrence is recorded and timestamped.

3. Click **Save/Exit**.

Viewing & Printing Audit Logs

1. Click **Setup** and select **Audit Log Review**.
The Audit Log Review window opens.
2. Select only the check boxes that correspond to the types of transactions that are important to your practice and deselect those that are unimportant.
3. Narrow your search results by typing or selecting the beginning and ending dates and times in the **Start Time** and **End Time** fields, as needed.
4. To see the activity of a specific user, type the user ID in the **User ID (Number)** text box. To determine the user ID, look at the Provider ID or Id# field on the Resource Setup window.
5. To see the activity on a specific patient, type the patient ID in the Patient ID (Number) text box. To determine the patient ID, look at the Patient ID field on the Patient Center window.
6. To see the activity on a specific exam, type the exam number in the Exam ID (Number) text box. To determine the exam number, look at the Exam History tab on the Patient Center window.
7. To see a specific type of activity, select an activity from the **Event Type** drop-down menu.
8. Narrow your search results by the completion or attempt of transactions:
 - Select the **Success** radio button to see only successfully completed transactions.
 - Select the **Failure** radio button to see only attempted transactions.
 - Select the **All** radio button to see all transactions.
9. Click **Search** to display the audit log transactions that match the search criteria. For a description of the information displayed in the audit log, go to [Understanding the Audit Log on page 130](#).
10. Perform the following steps as needed:
 - Double-click an entry to view it in the Audit Log Entry window.
 - Click any column heading to sort in ascending order. Click twice to sort in descending order.
 - Click **Print** to print the audit log search results, as needed.

11. To verify that an audit log entry has not been tampered or forged, perform the following steps:

- Double-click an entry to view it in the Audit Log Entry window.
- Click **Validate**.

OfficeMate validates the information in the entry against the log hash file and displays true if the entry is valid or false if it appears the entry has been altered.

- Click **OK** to close the Integrity Check window.
- Click **Close** to close the Audit Log Entry window.

The screenshot shows the 'Audit Log Review' window with a search interface and a table of log entries. The search criteria are: Start Time: January 12, 2011 09:58:16; End Time: January 19, 2011 09:58:16; User ID (Number): 26; Event Type: UserLogin. The table contains the following data:

logID	logTime	userID	clientIP	clientName	eventTypeID	eventDescription	patientID	examID	description
107	1/19/2011 8:34 AM	26	fe80-ca9-4045-4e5f-7cb31:21	QATS01	1	User Login	0	0	User 26
106	1/19/2011 8:25 AM	26	fe80-ca9-4045-4e5f-7cb31:21	QATS01	1	User Login	0	0	User 26
98	1/18/2011 2:40 PM	26	fe80-ca9-4045-4e5f-7cb31:21	QATS01	1	User Login	0	0	User 26
80	1/18/2011 11:27 AM	26	fe80-ca9-4045-4e5f-7cb31:21	QATS01	1	User Login	0	0	User 26
62	1/18/2011 9:14 AM	26	fe80-ca9-4045-4e5f-7cb31:21	QATS01	1	User Login	0	0	User 26
57	1/14/2011 1:56 PM	26	fe80-ca9-4045-4e5f-7cb31:21	QATS01	1	User Login	0	0	User 26
7	1/14/2011 9:14 AM	26	fe80-ca9-4045-4e5f-7cb31:21	QATS01	1	User Login	0	0	User 26
6	1/14/2011 9:11 AM	26	fe80-ca9-4045-4e5f-7cb31:21	QATS01	1	User Login	0	0	User 26

Understanding the Audit Log

Since the audit log offers a glimpse into transactions that are recorded in the OfficeMate database, some explanation is required in order for you to understand the information displayed in the audit log results.

Audit Log

Column	Description
logID	The log identification number. Each logged activity is recorded and number sequentially.
logTime	The date and time of the transaction.
userID	The provider or staff identification number. OfficeMate assigns an ID number sequentially as each provider or staff member as they are added to the Resource Setup window. Cross-reference ID numbers in the Audit Log with the ID numbers in the Resources Setup window.
clientIP	The IP or IPv6 address of the workstation used to complete the transaction.

Column	Description
clientName	The name of the workstation used to complete the transaction.
eventTypeID	The identification number of the type of transaction performed. Refer to the next column for a description of the transaction. For more information, refer to Event Types on page 131 .
eventDescription	A description of the transaction performed. For more information, refer to Event Types on page 131 .
patientID	The patient identification number. OfficeMate assigns an ID number sequentially as each patient as they are added to the Patient Demographics window. Cross-reference ID numbers in the Audit Log with the ID numbers in the Patient Center window. The Patient ID is 0 if the transaction did not involve a patient record.
examID	The exam number or chart number.ExamWRITER assigns an ID number sequentially as each exam is created. Cross-reference ID numbers in the Audit Log with the ID numbers in the Control Center window in ExamWRITER. The Exam ID is 0 if the transaction did not involve an exam.
description	A short description of the transaction including the name of the person completing the transaction and the name of the patient if applicable.
Result	A check mark means the transaction was completed successfully.
logHash	A string of characters that OfficeMate uses to validate the integrity of the log entry.

Event Types

Event Type	Description
User Login	The user successfully logged in to OfficeMate, Administration, or ExamWRITER.
User Logout	The user successfully logged out to OfficeMate, Administration, or ExamWRITER.
Query to the System	The user ran a report.
Emergency Access	The user has evoked emergency access to view patient information he or she normally cannot view. A user name and password are required to evoke emergency access.
Patient Record Created	The user created a new patient.

Event Type	Description
Patient Record Viewed	The user displayed the patient's information.
Patient Record Updated	The user updated the patient's information.
Patient Record Deleted	The user deleted a patient.
Signature Created	The user finalized an exam in ExamWRITER.
PHI Export	The user exported a continuing care record from ExamWRITER.
PHI Import	The user imported a continuing care record.
Security Administration	The user modified security settings.
Patient Appointment Scheduled	The user scheduled an appointment.
Posting Date Changed	The user changed the posting date to backdate a transaction.
Account Lockout	The user exceeded the maximum number of login attempts, and the account was disabled.
Order	The user recoded an eyewear, hard lens, or soft lens order.
Alert Message Acknowledged	The software displayed a dialog box, and user acknowledged the message by clicking OK.

Changing Your Password

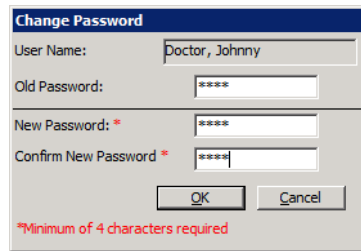
To change your own password, follow the instructions below:

1. On the OfficeMate Administration main window, click **Change Password**. The Change Password window opens.
2. Type your old password in the **Old Password** text box.

NOTES

- Users who are assigned a role that allows access to the Setup module and Security task in OfficeMate Administration can change any user's password in the Security window. For more information on modifying a user's password, go to [Setting Up Security on page 96](#).
- If the old password has been forgotten, an OfficeMate Administration user will have to change your password in the Security window.
- If the OfficeMate Administration password has been forgotten, and no other user has access to OfficeMate Administration, the licensed owner of the software must call the OfficeMate Customer Care team at 800.942.5353.

3. Type your new password in the **New Password** text box.
4. Type your new password in the **Confirm New Password** text box.



The screenshot shows a dialog box titled "Change Password". It contains the following fields and controls:

- User Name:** A text box containing "Doctor, Johnny".
- Old Password:** A password field containing four asterisks (****).
- New Password: *** A password field containing four asterisks (****).
- Confirm New Password *** A password field containing four asterisks (****).
- Buttons:** "OK" and "Cancel" buttons.
- Footnote:** A red asterisk followed by the text "*Minimum of 4 characters required".

5. Click **OK**.

Setting Up Insurance Carriers & Plans

2

For more information on setting up insurance carriers and plans, watch the “Insurance Setup” and “Third Party Setup” videos.

In this chapter:

- [Understanding the Insurance Carriers & Plans, 135](#)
- [Setting Up Insurance Codes, Modifiers, & Attributes, 137](#)
- [Setting Up MIPS Reporting Options, 148](#)
- [Setting Up Insurance Carriers, 149](#)
- [Setting Up Insurance Plans, 158](#)
- [Setting Up Plan Detailed Benefits, 168](#)
- [Setting Up Plan Maximum Allotments, 193](#)
- [Setting Up Plan Percentages, 197](#)
- [Attaching Electronic Documents to Insurance Carriers & Plans, 198](#)

The insurance plan features in OfficeMate enable your stores to immediately and accurately calculate patients’ insurance benefits based on insurance carrier, plan, and practice billing rules. The insurance plan setup is dynamic and scalable. You can put as much or as little effort into setting up and maintaining insurance plans as needed by your practice.

The more detail you are able to add to each insurance plan, the more accurate the fee slip information will be when the patients check out.

Understanding the Insurance Carriers & Plans

NOTE

This information is only applicable to practices that upgraded from OfficeMate Enterprise 2.0 or OfficeMate 9.0, 9.5, or 10.0, and had at least one insurance plan that used either the Detailed Benefits or Maximum Allotments pricing methods.

OfficeMate is designed to allow you to reconcile all of the funds you receive so you know exactly how much each insurance plan will pay for products sold and services rendered, how much you will need to write off, and how much patients need to pay out of pocket before they leave the location.

OfficeMate is designed to allow you to record as much or as little insurance carrier and plan information as needed by your practice. The more insurance plan details entered in OfficeMate Administration, the more streamlined the check out and billing process and the fewer opportunities for error at the location level.

OfficeMate offers three methods for entering insurance plan details. Use the table below to determine which pricing method best suits the needs of your practice.

For this much detail...	Select this pricing method...	Go to this section for more information...
Most detail	Detailed Benefits	Setting Up Plan Detailed Benefits on page 168
Moderate detail	Maximum Allotments	Setting Up Plan Maximum Allotments on page 193
Least detail	Percentage	Setting Up Plan Percentages on page 197

Additionally, OfficeMate allows you to select a product and populate the insurance claim form with the product's basic attributes so that you can charge the insurance carrier for each allowable benefit. For example, you could describe a lens as polycarbonate, polarized, with a scratch coat, and with an antireflective coat, and each of those attributes translates into a billable code on the insurance claim form as illustrated below.

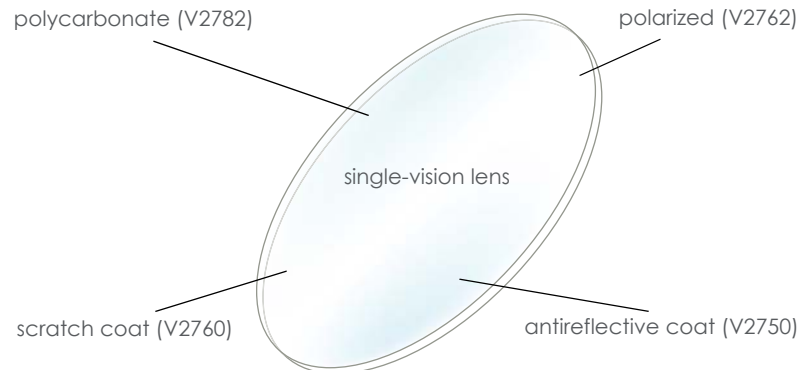


Figure 2-3: An example of the attributes that make up a lens. OfficeMate allows you to select a product and automatically populate the insurance claim with the product's basic attributes.

Alternatively, OfficeMate can combine individual attributes into a single product for less complex insurance plans. Anything added to the product after it is manufactured is an add-on, and not an attribute.

Setting Up Insurance Codes, Modifiers, & Attributes

This section tells you how to set up detailed codes that drive insurance billing, including how

- [To open the Third Party Setup window, 137](#)
- [To add & modify procedure codes, 137](#)
- [To add & modify diagnosis codes, 139](#)
- [To add & modify procedure modifiers, 141](#)
- [To add & modify attributes, 141](#)
- [To add & modify additional attributes, 143](#)
- [To add & modify places of service, 144](#)
- [To set up lens power range codes, 145](#)
- [To set up SNOMED codes, 147](#)

► To open the Third Party Setup window

1. From the OfficeMate Administration main window, click **Setup**.
2. Select **Third Party Setup**.

The Third Party Setup window opens.

► To add & modify procedure codes

Setting up procedure codes enables you to associate CPT codes, costs, and fees with services that you bill.

1. Open the Third Party Setup window. For information on opening the Third Party Setup window, go to [To open the Third Party Setup window on page 137](#).
2. Click **New Code** to create a new code.
OR
Select a code from the list.
 - Select a **Filter** radio button to narrow the list of codes as needed.
 - Type a description or code in a **Find** field to narrow the list of codes as needed.
 - Select the **Include Inactive** check box to include inactive codes in the list as needed.
3. In the **Code (Box 24d)** field, type the CPT/HCPCS or carrier-specific code.
4. In the **Description** text box, type a short description for the code.
5. From the **Type of Service** drop-down menu, select a service type.

For more information on setting up procedure codes, watch the [“Procedure Codes”](#) video.

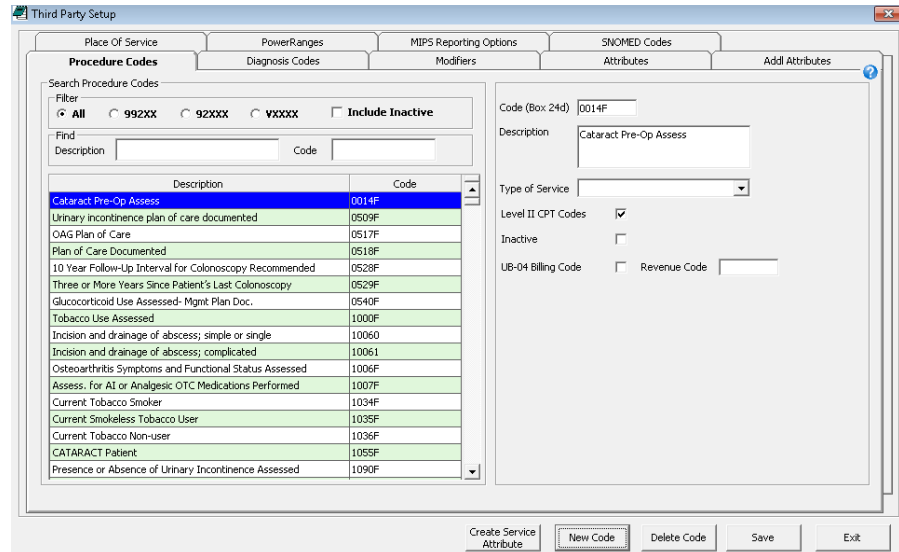
6. Select the **Level II CPT Codes** check box to designate the procedure code as a level II procedure code for the CMS Physical Quality Reporting System (PQRS).

NOTES

- For more information about the PQRS, go to the Centers for Medicare and Medicaid Services Web site at www.cms.hhs.gov.
- After designating PQRS diagnosis codes and level II procedure codes and selecting to auto populate PQRS codes for select insurance companies, you will not receive a reminder on fee slips with level II procedure codes and \$0 fees, and you will not receive the “Line Item cannot have ZERO” error in the Third Party Processing window. If all of the items on an insurance claim are level II procedure codes, then you can submit a \$0 balance insurance claim. For more information on designating PQRS diagnosis codes, go to [To add & modify diagnosis codes on page 139](#). For more information on auto populating PQRS codes, go to [To set up insurance billing preferences on page 153](#).

7. Select the **Inactive** check box if the procedure code is no longer in use.
8. Select the **UB-04 Billing Code** check box to designate the UB-04 as the suitable claim form for the procedure code if this code is a surgical procedure.
9. If you have designated the UB-04 as the suitable claim form for the procedure code, type the revenue code for the procedure code in the **Revenue Code** text box, if desired. The revenue code is populated in box 42 on the UB04 form.
10. If you want to be able to assign cost and fee information to a procedure code, select the procedure code and click **Create Service Attribute**.
The selected procedure code is now available under the Services Product Type (Exam Cat./Base category) on the Attributes tab. For more information on adding and modifying attributes, go to [To add & modify attributes on page 141](#).
11. Click **Save** when you are finished.

- Repeat steps 2–11 to add or modify additional procedures as needed.



- Click **Exit** to close the Third Party Setup window.

► To add & modify diagnosis codes

For more information on setting up diagnosis codes, watch the “[Diagnosis Codes](#)” video.

- Open the Third Party Setup window. For information on opening the Third Party Setup window, go to [To open the Third Party Setup window on page 137](#).
- Click the **Diagnosis Codes** tab.
- Click **New Code** to create a new code.

OR

Select a code from the list.

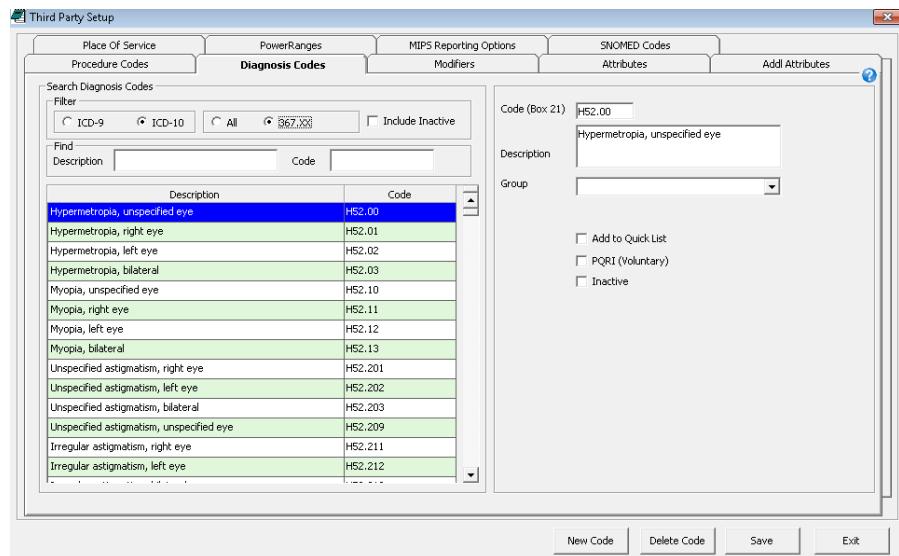
- Select a **Filter** radio button to narrow the list of codes as needed.
 - Type a description or code in a **Find** field to narrow the list of codes as needed.
 - Select the **Include Inactive** check box to include inactive codes in the list as needed.
- In the **Code (Box 21)** field, type the ICD-9 or ICD-10 code.
 - In the **Description** text box, type a short description for the diagnosis code.
 - From the **Group** drop-down menu, select a category for the diagnosis code.
 - Select the **Add to Quick List** to add the diagnosis code to the Quick List of frequently used codes.

- Select the **PQRI (Voluntary)** check box if the diagnosis is designated as a PQRS measure.

NOTES

- For more information about the PQRS, go to the Centers for Medicare and Medicaid Services Web site at www.cms.hhs.gov.
- After designating PQRS diagnosis codes and level II procedure codes and selecting to auto populate PQRS codes for select insurance companies, you will not receive a reminder on fee slips with level II procedure codes and \$0 fees, and you will not receive the “Line Item cannot have ZERO” error in the Third Party Processing window. If all of the items on an insurance claim are level II procedure codes, then you can submit a \$0 balance insurance claim. For information on designating level II procedure codes, go to [To add & modify procedure codes on page 137](#). For more information on auto populating PQRS codes, go to [To set up insurance billing preferences on page 153](#).

- Select the **Inactive** check box if the diagnosis code is no longer in use.
- Click **Save** when you are finished.
- Repeat steps 3–10 to add or modify additional procedures as needed.

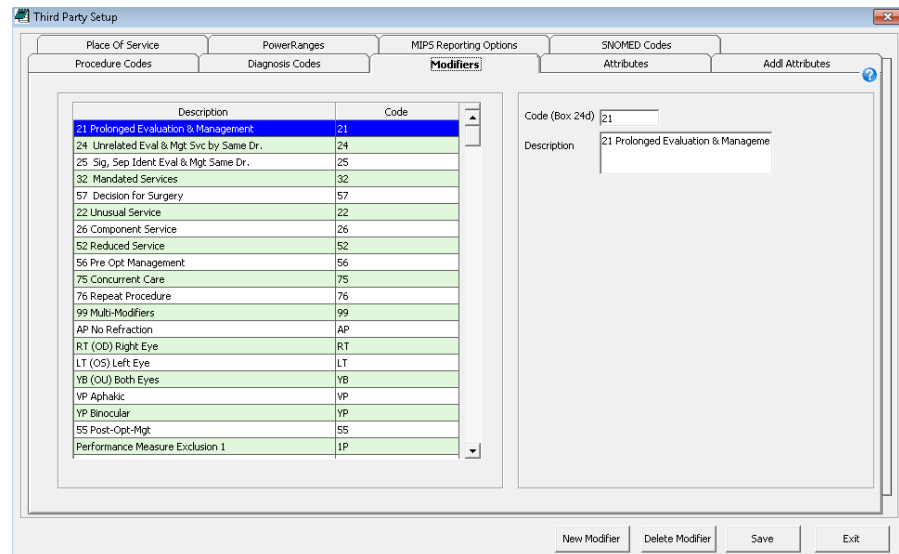


- Click **Exit** to close the Third Party Setup window.

Modifiers provide extra descriptions about procedures and appear on insurance claims. Modifiers can be attached to services or selected on fee slips. For more information on setting up modifiers, watch the "Modifiers" video.

► To add & modify procedure modifiers

1. Open the Third Party Setup window. For information on opening the Third Party Setup window, go to [To open the Third Party Setup window on page 137](#).
2. Click the **Modifiers** tab.
3. Click **New Modifier** to create a new code.
OR
Select a code from the list.
4. In the **Code (Box 24d)** field, type the procedure modifier code.
5. In the **Description** text box, type a short description for the modifier.
6. Click **Save** when you are finished.
7. Repeat steps 3–6 to add or modify additional procedures as needed.



8. Click **Exit** to close the Third Party Setup window.

► To add & modify attributes

For more information on setting up attributes, watch the "Attributes" video.

Attributes are the individual qualities and characteristics that define a product (e.g., color, material, lens type). Attributes are inherent to the product; add-ons are not attributes. For example, an ophthalmic lens may be described by the following attributes: a progressive lens type; plastic, high index material; transition gray in color; with a Crizal coating. Product attributes translate directly to billable codes on the CMS 1500 claim form and patient statement.

1. Open the Third Party Setup window. For information on opening the Third Party Setup window, go to [To open the Third Party Setup window on page 137](#).
2. Click the **Attributes** tab.
3. Select an Attribute Category from the tree. Expand the category by clicking the **plus (+)** sign.

4. Click **New Attribute** to create a new attribute.
OR
Select an attribute from the list to modify it.
5. Select a procedure code from the **CPT** drop-down menu.

NOTES

- You do not need to select a CPT code for the ophthalmic Lens Cat./Base attributes. CPT codes are assigned based on the prescription recorded on the Eyewear Order window.
- With services, several possible CPT codes can be associated to a single attribute. Do not select a CPT for these types of services. For example, surgery should not have any CPT association. On each service product, associate the surgery attribute and select the appropriate CPT code at the product level.

6. In the **Cost** and **Fee** columns, type the additional cost and fee for the attribute.

OR

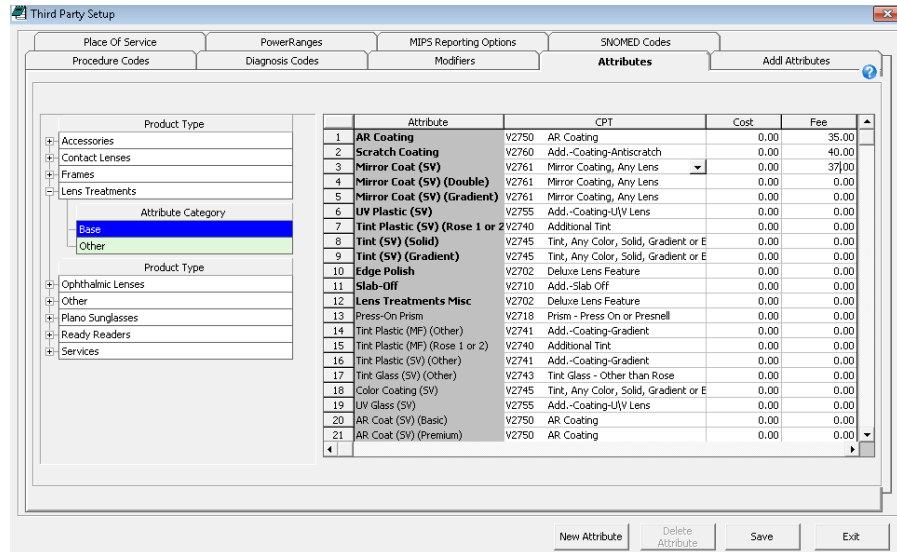
For ophthalmic material, color, or other attributes, type the additional fees associated with single-vision, bifocal, trifocal, and progressive lenses. If the fees are the same for each of these columns, enter the fee in the **All Fee** column only.

NOTES

- The cost and fee associated with the attribute are added to the base cost and fee of the product set up in the Products & Services window.
- Ophthalmic lens attributes are priced per lens. Lens treatment attributes are priced per pair.
- If you are updating the cost and fee, the change will only apply to products that are created after the change is saved. For information on updating the attribute cost or fee for individual products, go to [To maintain product attributes on page 272](#). For information on updating the attribute cost or fee for multiple products, go to [Updating Many Products & Services on page 289](#).
- If many of your costs and fees are the same, select a fee or cost, press **Ctrl+C** to copy, place your cursor in the next cell, and press **Ctrl+V** to paste. Once you copy a cost or fee, you can paste it many times.
- The costs and fees significantly effect the general ledger and accounting.

7. Click **Save** when you are finished.

8. Repeat steps 4–7 to add or modify additional procedures as needed.



9. Click **Exit** to close the Third Party Setup window.

► To add & modify additional attributes

Often there are additional material or lab costs for high-power lenses, oversized lenses, and other prescription needs that need to be calculated into the patient's fee slip. By recording additional attribute information, you ensure that OfficeMate automatically includes those fees on fee slips and insurance claims when they are applicable.

1. Open the Third Party Setup window. For information on opening the Third Party Setup window, go to [To open the Third Party Setup window on page 137](#).
2. Click the **Add Attributes** tab.
3. In the **Prism** group, enter the diopter range for each cost or fee point.
4. Type the **Prod Cost** and **Addl Fee** information for each measurement range *per lens*.
5. Repeat steps 3–4 for the **BF Add Power**, **TF Add Power**, and **Oversize** groups. Enter cost and fee information *per pair*.
6. In the **Customized Measurements**, enter the **Prod Cost** and **Addl Fee** information. Enter cost and fee information *per pair*.
7. Click **Save** when you are finished.

OfficeMate confirms that you want to overwrite the pricing for these attributes on all ophthalmic lenses in the database.

8. Click **Yes** to confirm.

9. Click **Exit** to close the Third Party Setup window.

NOTE

To adjust an individual lens' additional attribute pricing, open the Products & Services window and click the Additional Attributes tab. For more information go to [To maintain ophthalmic lens additional attributes on page 278](#).

► **To add & modify places of service**

For more information on setting up places of service, watch the "Place of Service" video.

1. Open the Third Party Setup window. For information on opening the Third Party Setup window, go to [To open the Third Party Setup window on page 137](#).
2. Click the **Place of Service** tab.
3. Click **New POS** to create a new place of service.
OR
Select a place from the list.
4. Enter the place of service location information in the appropriate fields:
 - Name 1 (Box 32)
 - Name 2
 - Address 1 (Box 32)
 - Address 2 (Box 32)
 - City (Box 32)
 - State (Box 32)
 - ZIP Code (Box 32)
5. Type the name of the primary contact person in the **Contact** field as needed.
6. Select the type of facility from the **Facility Type** drop-down menu.
7. Type the place's telephone number in the **Phone #** field as needed.
8. Type the place's fax number in the **Fax #** field as needed.

9. Type the place's NPI number in the **NPI # (Box 32a)** field.
10. Select a qualifier from the **Qualifier (Box 32b)** drop-down menu as needed.

NOTE

Ensure that you are selecting the appropriate qualifier description and ANSI code in the Qualifier (Box 32b) drop-down menu, as listed below:

Blue Cross Provider Number - 1A
 Blue Shield Provider Number - 1B
 CHAMPUS Identification Number - 1H
 Clinical Lab. Improvement Amendment Number - X4
 Federal Tax Payer's Identification Number - TJ
 Location Number - LU
 Medicaid Provider Number - ID
 Medicare Provider Number - 1C
 Provider Commercial Number - G2
 Provider Plan Network Identification Number - N5
 Provider UPIN Number - 1G
 State Industrial Accident Provider Number - X5
 State License Number - 0B

11. Type the place's facility ID in the **Facility ID (Box 32b)** as needed.
12. Select the **Inactive** check box if the place is no longer active.
13. Click **Save** when you are finished.

The screenshot shows the 'Third Party Setup' window. At the top, there are tabs for Procedure Codes, Diagnosis Codes, Modifiers, Attributes, and Add Attributes. Below these are sub-tabs for Place Of Service, PowerRanges, MIPS Reporting Options, and SNOMED Codes. A table lists providers with columns for Name, Address, City, State, ZIP Code, NPI #, and Qualifier. The first row is highlighted in blue and contains the following data: Kaiser, 6640 Alton Pkwy., Irvine, California, 92618, 321654987, and 1. Below the table is a form for editing a provider's details. The form includes fields for Name 1 (Kaiser), Name 2, Address 1 (6640 Alton Pkwy.), Address 2, City (Irvine), State (California), ZIP Code (92618), Contact (Joe), Facility Type (Emergency Room - Hospital), Phone # ((321) 654-9877), Fax #, NPI # (321654987), Qualifier (a dropdown menu), Facility ID, and an Inactive checkbox.

14. Click **Exit** to close the Third Party Setup window.

► **To set up lens power range codes**

For more information on setting up lens power range codes, watch the "[Power Ranges](#)" video.

The Power Ranges tab allows you to assign CPT/HCPCS codes to specific power ranges for each ophthalmic lens type. The power ranges themselves

(low sphere to high sphere and low cylinder to high cylinder) cannot be changed.

1. Open the Third Party Setup window. For information on opening the Third Party Setup window, go to [To open the Third Party Setup window on page 137](#).
2. Click the **Power Ranges** tab.
3. Click **New** to set up a new power range.
4. Select a lens type from the **Lens Category** drop-down menu.

The table on the left updates to reflect the power ranges that have been set up for the selected lens type.

5. Select a power range from the **Sphere** drop-down menu.
6. Select a procedure code from the **CPT/HCPCS Code** drop-down menu.
7. Type the additional cost and fee associated with the selected lens type and power range in the **Add to Base Cost** and **Add to Base Fee** fields.
8. Click **Save**.
9. Repeat steps 2–8 to add additional power ranges as needed.

NOTE

After you set the CPT/HCPCS code for a power range and lens type, you cannot modify it. You may, however, select the power range from the list, click **Delete** to remove that line, and then follow steps 2–8 to add a power range with the correct CPT/HCPCS code.

The screenshot shows the 'Third Party Setup' window with the 'Power Ranges' tab selected. The window has several tabs: Procedure Codes, Diagnosis Codes, Modifiers, Attributes, and Add Attributes. Under 'Power Ranges', there are sub-tabs for Place Of Service, MIPS Reporting Options, and SNOMED Codes. The main area contains a table with columns: Low Sph, High Sph, Low Cyl, High Cyl, CPT/HCPCS Code, Add Cost, and Add Fee. The table lists 14 rows of power ranges. To the right of the table is a form for adding a new power range. The form includes a 'Lens Category' dropdown menu (set to 'Blended Bifocals'), a 'Low Sphere' to 'High Cyl' dropdown menu (set to '0.00 4.00 0.00 0.00'), a 'CPT/HCPCS Code' dropdown menu (set to 'V2200'), and two input fields for 'Add to Base Cost' (set to '\$5.00') and 'Add to Base Fee' (set to '\$7.00'). There is an 'Export To Lenses' button below the form. At the bottom of the window are buttons for 'New', 'Delete', 'Save', and 'Exit'.

Low Sph	High Sph	Low Cyl	High Cyl	CPT/HCPCS Code	Add Cost	Add Fee
0.00	4.00	0.00	0.00	V2200	0.00	0.00
4.12	7.00	0.00	0.00	V2201	0.00	0.00
7.12	99.00	0.00	0.00	V2202	0.00	0.00
0.00	4.00	0.12	2.00	V2203	0.00	0.00
0.00	4.00	2.12	4.00	V2204	0.00	0.00
0.00	4.00	4.12	6.00	V2205	0.00	0.00
0.00	4.00	6.12	99.00	V2206	0.00	0.00
4.12	7.00	0.12	2.00	V2207	0.00	0.00
4.12	7.00	2.12	4.00	V2208	0.00	0.00
4.12	7.00	4.12	6.00	V2209	0.00	0.00
4.12	7.00	6.12	99.00	V2210	0.00	0.00
7.12	12.00	0.12	2.00	V2211	0.00	0.00
7.12	12.00	2.12	4.00	V2212	0.00	0.00
7.12	12.00	4.12	6.00	V2213	0.00	0.00
12.12	99.00	0.00	99.00	V2214	0.00	0.00

10. To export the power range costs and fees to the products in OfficeMate, perform the following steps:
 - a. Select a lens type from the **Lens Category** drop-down menu.
 - b. Click **Export to Lenses**.

NOTE The costs and fees exported will replace any existing power range costs and fees.

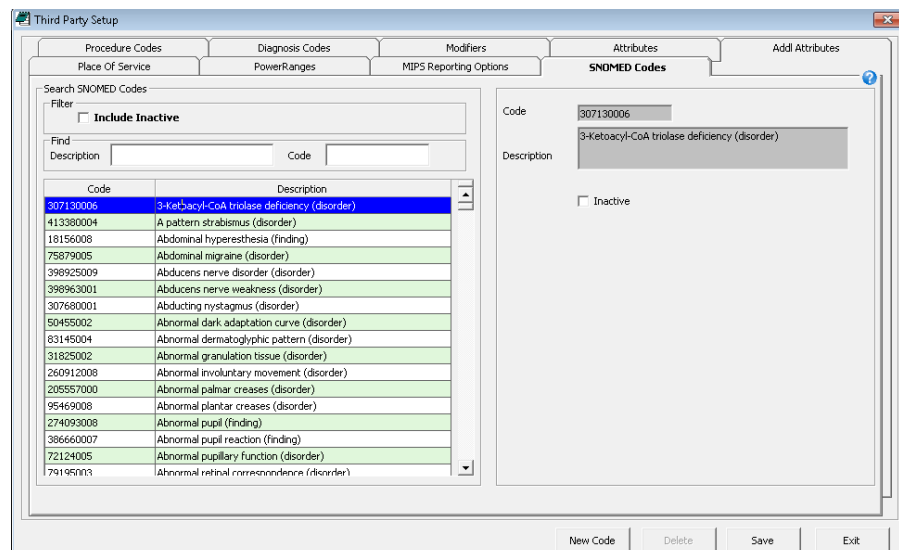
- c. Repeat steps a–b for each lens type as needed.
11. Click **Exit** to close the Third Party Setup window.

NOTE To adjust an individual lens' power range pricing, open the Products & Services window and click the Product Details tab. For more information go to [To itemize product details on page 269](#).

► To set up SNOMED codes

SNOMED codes are required for CPOE, health information exchange, lab results, and other meaningful use applications. Eyefinity has populated a list of SNOMED codes for you. You can add new SNOMED codes and delete SNOMED code that you have added, but you cannot edit the default SMNOMED codes.

1. Open the Third Party Setup window. For information on opening the Third Party Setup window, go to [To open the Third Party Setup window on page 137](#).
2. Click the **SNOMED Codes** tab.
3. Click **New Code**.
4. Type the SNOMED number in the **Code** text box.
5. Type a name for the diagnosis in the **Description** text box.
6. Click **Save**.



7. Click **Exit** to close the Third Party Setup window.

Setting Up MIPS Reporting Options

CMS regulations allow eligible clinicians to set up reporting options for the MIPS program.

NOTES

- For more information about the MIPS program, go to <https://qpp.cms.gov/learn/qpp>. For more information about reporting meaningful use in OfficeMate/ExamWRITER, go to [Reporting MIPS Information on page 757](#).
- Currently, these preferences are only saved in the OfficeMate database; they do not yet impact any of the MIPS reporting processes.

1. Open the Third Party Setup window. For information on opening the Third Party Setup window, go to [To open the Third Party Setup window on page 137](#).
2. Click the **MIPS Reporting Options** tab.
3. Select the length of your MIPS data reporting period in 2017 from the **Pick Your Pace for MIPS Data Reporting in 2017** drop-down menu.
4. Select to submit MIPS data as an individual or as a group from the **Submission Type** drop-down menu. Group reporting is based on the group NPI number.
5. Select if you will submit your Clinical Practice Improvement Activities MIPS data manually, through your EHR, or through the AOA MORE registry from the **Clinical Practice Improvement Activities** drop-down menu.
6. Select if you will submit your Advancing Care Information (meaningful use) MIPS data manually, through your EHR, or through the AOA MORE registry from the **Advancing Care Information** drop-down menu.
7. Select if you will submit your Quality (PQRS) MIPS data on insurance claims, through your EHR, or through the AOA MORE registry from the **Quality** drop-down menu.

Third Party Setup

Procedure Codes | Diagnosis Codes | Modifiers | Attributes | Add Attributes

Place Of Service | PowerRanges | **MIPS Reporting Options** | SNOMED Codes

CMS regulations allow eligible clinicians to Select or Delete the following options:

Pick Your Pace for MIPS Data Reporting in 2017 [Dropdown] ⓘ

I have a low volume status of Medicare Part B patients/claims.

Submission Type [Dropdown] ⓘ

Reporting Mechanism in Performance Categories: ⓘ

Clinical Practice Improvement Activities [Dropdown]

Advancing Care Information [Dropdown]

Quality [Dropdown]

Claims-Based
EHR
AOA MORE

New Code | Delete Code | Save | Exit

8. Click **Save**.

Setting Up Insurance Carriers

The more information you build into your insurance carriers and plans the more streamlined and more accurate your insurance and patient billing will be. Since the payments from patients and insurance are very important to your practice, you are encouraged to build the most complete insurance carriers and plans in OfficeMate Administration as possible.

Setting up insurance carriers and plans may seem complex and intimidating. Many insurance plans, however, especially within the same carrier, are so similar, that you can use the copy function to duplicate plans and modify the specifics of the plan to reduce your work.

For more information on setting up insurance carriers, watch the "Carrier Tab" video.

This section tells you how to set up insurance carriers, including how to

- [To open the Insurance Billing Initial Setup window, 149](#)
- [To add & modify insurance carriers, 150](#)
- [To set up insurance billing preferences, 153](#)
- [To combine lines on insurance claims, 154](#)
- [To add & modify insurance carrier notes, 155](#)
- [To create & modify insurance modifiers, 156](#)
- [To copy insurance carriers, 157](#)

► To open the Insurance Billing Initial Setup window

1. From the OfficeMate Administration main window, click **Setup**.
2. Select **Insurance Setup**.

The Insurance Billing Initial Setup window opens.

The screenshot shows the 'Insurance Billing - Initial Setup' window. The 'Insurance Carrier' tab is selected, displaying a form with the following fields:

- Carrier Name: Consolidated Life
- Brief Name: CL
- Address 1: 1234 Main St
- Address 2:
- City: Irvine
- State: California
- ZIP Code: 92618
- Attn: Claims Processing
- Phone #: (800) 269-3666
- Fax #:
- HL7 ID:
- Activation Date: 01/01/2012
- Termination Date: 12/31/2021
- Revision Date:
- Contact: John Doe
- Job Title: VP Claims Management
- Contact Phone #: (800) 269-3666
- Contact Email: jdoe@consolidatedlife.com
- Web Address:

The 'Claim Form' tab is also visible, showing the following options:

- Box 1 Insurance Type: Commercial Insurance Company
- Box 9d Populate with Secondary Ins. Yes No
- Box 17 Auto Populate Yes No
- Box 17 Populate Billing Provider Referring Dr.
- Box 25 Tax ID: Location Tax ID
- Box 27 Accept Assignment Yes No
- Box 29 Indicate Patient Payment on Claim Yes No
- Secondary Claim Recipient, remaining charges only? Yes No
- Box 29 Populate patient's & primary insurance payment Yes No
- UB04 not applicable. Use CMS 1500 only Yes No
- Output Format: CMS 1500 Form
- E-Claim Processor: GatewayEDI - ANSI 837
- E-Claim Path: D:\DATA\EMC

► **To add & modify insurance carriers**

1. Open the Insurance Billing Initial Setup window. For information on opening the Insurance Billing Setup window, go to [To open the Insurance Billing Initial Setup window on page 149](#).
2. Select an insurance carrier from the **Carrier** drop-down menu.
OR
Click **New** to add an insurance carrier.

NOTE If you are creating a carrier that is similar to one that you have already created, click Copy to duplicate the carrier, and adjust the carrier setup. Go to [To copy insurance carriers on page 157](#) for more information.

3. Type the insurance carrier's name, address, and telephone information in the fields provided.

NOTES

- If you are filing DMERC claims in an ANSI format for this insurance carrier, the insurance carrier's name must have "DMERC" in it. For example, if the insurance carrier is Medicare, type "Medicare DMERC" in the Name text box.
- If the insurance carrier is VSP, you must enter a valid VSP address, including all spaces and punctuation.

4. Type the HL7 identifier for the insurance carrier in the **HL7 ID** field as needed.
5. Type a date in the **Activation Date** field or select a date from the drop-down menu.
6. Type a date in the **Termination Date** field or select a date from the drop-down menu.

NOTE The activation and termination dates are determined by your contract with the insurance carrier and control when products and services can be billed to the insurance carrier.

7. Type the main contact information for the insurance carrier in the following fields as needed:
 - Contact
 - Job Title
 - Contact Phone #
 - Contact Email
 - Web Address
8. Select the type of insurance from the **Box 1 Insurance Type** drop-down menu.

NOTES

- You must select an insurance type to process insurance claims.
- If the carrier is VSP, select **VSP** from the Insurance Type drop-down menu.

9. Select **Yes** from the **Box 9d Populate with Secondary Ins.** radio buttons to populate the CMS 1500 with the patient's secondary insurance when this insurance is the primary. Select **No** to not populate the CMS 1500 with the patient's secondary information.

NOTE The default for new insurance carriers is No. The default for insurance carriers that were included in data that was converted from OfficeMate 8.0 and below or OfficeMate Enterprise 1.0 and below is Yes.

10. Select **Yes** from the **Box 17 Auto Populate** radio buttons to display the name of the referring provider on the CMS 1500. Select **No** to not populate box 17 on the CMS 1500.
11. If you opted to populate box 17 with the referring provider in step 10, select the **Billing Provider** or Referring Dr. radio button.

NOTE If you select the Billing Provider radio button, the provider that you select from the Provider drop-down menu at the top of the fee slip will populate in box 17.

12. Select the type of provider identifier that displays on the CMS 1500 from the **Box 25 Tax ID** drop-down menu.

NOTES

- The default for insurance carriers that were included in data that was converted from OfficeMate 8.0 and below or OfficeMate Enterprise 1.0 and below is Location Tax ID.
- If the carrier is VSP, select Doctor's EIN from the **Box 25 Tax ID** drop-down menu.

13. Select **Yes** from the **Box 27 Accept Assignment** radio buttons to accept agreed upon payments directly from the insurance carrier. Click **No** to not accept the assignment.
14. Select **Yes** from the **Box 29 Indicate Patient Payment on Claim** radio buttons to populate the CMS 1500 form with the patient's payment. Click **No** to not include the patient's payment.
15. Select **Yes** from the **Secondary Claim Recipient, remaining charges only** radio buttons to display only the remaining charges on the CMS 1500 when this insurance is the secondary. Select **No** to populate the CMS with the original charges.
16. If you opted to show the original charges on a secondary claim in step 15, select **Yes** from the **Populate Patient's & primary insurance payment** radio buttons to include payments received from the patient and primary insurance on the CMS 1500.
17. Select **Yes** from the **UB04 not applicable. Use CMS 1500 only** radio buttons if this insurance carrier does not accept UB-04 claim forms.
18. If you selected Medicare Part A or Medicare Part B from the Box 1 Insurance Type drop-down menu. select a policy from the **Medicare Secondary Policy Type** drop-down menu.

19. Select an output for claims to this carrier from the **Output** drop-down menu.

NOTE If the carrier is VSP, select **CMS 1500 Form** from the Output Format drop-down menu.

20. Select an electronic clearinghouse from the **E-Claim Processor** drop-down menu.

NOTES

- To print all claims for this insurance carrier, select **Print to Paper** as the processor.
- If the carrier is VSP, select **VSP Interface** from the E-Claim Processor drop-down menu.
- Until you are ready to send VSP claims, select **Commercial Insurance** from the **Box 1 Insurance Type** drop-down menu and select **Print to Paper** from the **E-Claim Processor** drop-down menu. Later, when you're ready to send claims, return to the Insurance Billing Initial Setup window and reselect **VSP** and **VSP Interface** from these drop-down menus.

21. Click **Save** to save your changes.

NOTE The yellow highlighted fields are required. If any one of these fields is empty, the insurance carrier will not be saved, and OfficeMate Administration will prompt you to complete the required fields.

The insurance carrier is saved, and the other tabs on the Insurance Billing Initial Setup window become active.

► **To set up insurance billing preferences**

1. Open the Insurance Billing Initial Setup window. For information on opening the Insurance Billing Setup window, go to [To open the Insurance Billing Initial Setup window on page 149](#).
2. Select an insurance carrier from the **Carrier** drop-down menu.
OR
Click **New** to add an insurance carrier. For information on adding insurance carriers, go to [To add & modify insurance carriers on page 150](#).
3. Click the **Preferences** tab.
4. Select **Yes** from the **Insurance Carrier is tax exempt** radio buttons if the insurance carrier is exempt from sales tax in your state. Select **No** if the insurance carrier is subject to sales tax.
5. Select **Yes** from the **Tax only patient charges + covered benefits** radio buttons to assess tax on the patient and insurance charges. Select **No** to assess tax on only the patient charges.
6. If you opted to assess tax on the patient and insurance charges in step 5, select **Yes** from the Tax patient's covered benefit net W/O radio buttons to tax the benefit amount minus the write-off amount.
7. Select **Yes** from the **Tax patient on Co pay amount** radio buttons to collect taxes on patient copays. Select **No** if the copay is not taxable.
8. Select **Yes** from the **Display Sales tax on CMS** radio buttons to include sales tax on the CMS 1500. Select **No** to exclude sales tax.
9. If you opted to include sales tax on the CMS 1500 in step 8, select one of the following radio buttons:
 - **Include total amount with sales tax to line item**
 - **Display sales tax as a separate line item**
 - **Display total sales tax of fee slip items as one item**
10. Select **Automate PQRI** to automatically apply PQRS codes on exams in ExamWRITER for patients who use this insurance carrier as their primary insurance carrier.

NOTE

After designating PQRS diagnosis codes and level II procedure codes and selecting to auto populate PQRS codes for select insurance companies, you will not receive a reminder on fee slips on which the insurance company is billed, level II procedure codes are recorded, and \$0 fees are billed. Also, you will not receive the "Line Item cannot have ZERO" error in the Third Party Processing window. If all of the items on an insurance claim are level II procedure codes, then you can submit a \$0 balance insurance claim. For more information on designating PQRS diagnosis codes, go to [To add & modify diagnosis codes on page 139](#). For information on designating level II procedure codes, go to [To add & modify procedure codes on page 137](#).

11. Select the date that you want to begin submitting ICD-10 codes from the **ICD-10 Start Date** calendar.

NOTES

- This date overrides the cutover date that you set up on the Third Party Setup window and can be different for each insurance carrier, based on their readiness and requirements. Prior to October 1, 2015, fee slips that use the selected insurance carrier will default to use ICD-9 or ICD-10 diagnosis codes based on your preference setting. If you do not select an ICD-10 start date for an insurance carrier in the Insurance Billing Initial Setup window, then the ICD-10 start date will default to the cutover date that you selected in the Third Party Setup window, or October 1, 2015, if no date is selected in the Third Party Setup window. For more information on setting up the cutover date, go to [Setting Up MIPS Reporting Options on page 148](#).
- For more information about ICD-10 codes, go to the Centers for Medicare and Medicaid Services Web site at www.cms.gov/ICD10.

12. Click **Save** to save your changes.

► **To combine lines on insurance claims**

1. Open the Insurance Billing Initial Setup window. For information on opening the Insurance Billing Setup window, go to [To open the Insurance Billing Initial Setup window on page 149](#).
2. Select an insurance carrier from the **Carrier** drop-down menu.
OR
Click **New** to add an insurance carrier. For information on adding insurance carriers, go to [To add & modify insurance carriers on page 150](#).
3. Click the **Modifiers/Combos** tab.

4. For each of the pairs of radio buttons, select **Yes** or **No**.

NOTES

- If the carrier is VSP, ensure that all **Ophthalmic Lenses** and **Lens Treatment** radio buttons are set to **No**.
- Selecting the Yes radio button combines two or more items with the same CPT code onto one line on the insurance claim. The quantity on the claim reflects the number of items, and the charges on the claim reflects the sum of the charges for the individual items.
- Selecting the No radio button lists each item as a separate line item on the insurance claim.
- Selecting the Yes radio buttons in the RT and LT Modifiers section combines ophthalmic lens items that are listed twice (once for each eye with RT and LT modifiers) on the insurance claim. The quantity on the claim is 2, and the charges on the claim reflects the sum of the charges for the individual items.
- Selecting the No radio buttons in the RT and LT Modifiers section lists each item as a separate line item on the insurance claim. The item with the RT modifier always appears first.

► **To add & modify insurance carrier notes**

1. Open the Insurance Billing Initial Setup window. For information on opening the Insurance Billing Setup window, go to [To open the Insurance Billing Initial Setup window on page 149](#).
2. Select an insurance carrier from the **Carrier** drop-down menu.
OR
Click **New** to add an insurance carrier. For information on adding insurance carriers, go to [To add & modify insurance carriers on page 150](#).
3. Click the **Notes** tab.

4. Click **New Note** to add a timestamp.
 Today's date and your name are inserted at the top the notes text box.
5. Type your notes in the space provided.
6. Click **Save** when you are finished.
7. Click **Print Notes** to print the notes as needed.

Date	Entered By	Type	Notes	Expires On	Link
09/19/2007	Johnson Janet				<input checked="" type="checkbox"/>
09/11/2007	Johnson Janet				<input checked="" type="checkbox"/>

NOTE

For information on attaching eDocuments (e.g., insurance contracts, plan descriptions), go to [Attaching Electronic Documents to Insurance Carriers & Plans on page 198](#).

► **To create & modify insurance modifiers**

Modifiers populate box 24D on the CMS 1500 claim form. Up to four modifiers can populate box 24D. Perform the following steps to create and modify insurance modifiers.

1. Open the Insurance Billing Initial Setup window. For information on opening the Insurance Billing Setup window, go to [To open the Insurance Billing Initial Setup window on page 149](#).
2. Select an insurance carrier from the **Carrier** drop-down menu.
 OR
 Click **New** to add an insurance carrier. For information on adding insurance carriers, go to [To add & modify insurance carriers on page 150](#).
3. Click the **Modifiers** button.
 The Insurance Modifiers window opens.
4. Select a product type from the **Product Type** drop-down menu.

- Click **New** to create a new insurance modifier.

OR

Select a product from the tree to modify an insurance modifier.

NOTE If you are creating an insurance modifier that is similar to one that you have already created, click **Copy** to duplicate the existing insurance modifier, and adjust the details as needed.

- Select a procedure code from the **CPT/HCPCS** drop-down menu.
- Select a diagnosis code from the **ICD-9 / 10** drop-down menu as needed.
- Select up to four modifiers from the drop-down menus in the **Covered** column as needed.
- Select four noncovered modifiers from the drop-down menus in the **Non-Covered** column as needed.

NOTE By default, the modifiers in the Covered column will populate box 24D of the CMS 1500. However, if an insurance plan is set to include noncovered items, the modifiers in the Non-Covered column will populate box 24D. For information on setting up insurance plan preferences, go to [To set up insurance plan preferences on page 162](#).

- Click **Save** to save the insurance modifier.
- Repeat steps 4–10 to add additional insurance modifiers.

The screenshot shows the 'Insurance Modifiers' window for 'Carrier: Vision Service Plan' and 'Product Type: FRAMES'. It features a table for 'CLAIM CODES [COMBOS]' and a detailed configuration panel on the right.

CLAIM CODES [COMBOS]	Covered				Non-Covered				
	CPT/HCPCS	Mod1	Mod2	Mod3	Mod4	Mod1	Mod2	Mod3	Mod4
V2025 + 238.42		25	25	24	32	80	53	74	2P

The configuration panel on the right includes:

- CPT/HCPCS: V2025 Deluxe Frame
- ICD-9 / 10: H35.70 Unspecified separation of retinal layers
- Covered** modifiers:
 - Mod1: 25 Sig. Sep Ident Eval & Mgt Same Dr.
 - Mod2: 25 Component Service
 - Mod3: (empty)
 - Mod4: (empty)
- Non-Covered** modifiers:
 - Mod1: (empty)
 - Mod2: (empty)
 - Mod3: (empty)
 - Mod4: (empty)

Buttons at the bottom: New, Copy, Print, Save, Delete, Cancel.

► To copy insurance carriers

- Open the Insurance Billing Initial Setup window. For information on opening the Insurance Billing Setup window, go to [To open the Insurance Billing Initial Setup window on page 149](#).
- Click **Copy**.
The Copy Insurance window opens.
- Select an insurance carrier from the **Select Carrier** drop-down menu.

4. Select a plan from the results list.
5. Select the check boxes that correspond to the information you want to copy into the new insurance carrier.

If the insurance plan that you selected in step 4 uses the detailed benefits pricing method, and if you select the Pricing method check box from the Copy Plan options, the Copy Pricing Method options will appear. The Copy Pricing Method options allow you to specify the product categories the you want to copy to the new insurance.

6. Select the check boxes that correspond to the pricing methods that you want to copy into the new insurance carrier, if the Copy Pricing Method options are available.
7. Click **OK**.
8. Modify the insurance carrier as needed. For information on modifying insurance carrier information, go to [To add & modify insurance carriers on page 150](#).

Insurance Name	Plan Name	Pricing Method	Output Format	E-Claim Processor
Aetna	Aetna	Percentage	CMS 1500 form	GatewayEDI - ANSI 837
Aetna	Elect Choice	Percentage	CMS 1500 form	GatewayEDI - ANSI 837
Aetna	Managed Choice	Percentage	CMS 1500 form	GatewayEDI - ANSI 837
Aetna	Open Access Managed Choice	Percentage	CMS 1500 form	GatewayEDI - ANSI 837
Aetna	Open Choice	Percentage	CMS 1500 form	GatewayEDI - ANSI 837
Aetna	Traditional Choice	Percentage	CMS 1500 form	GatewayEDI - ANSI 837

Copy Insurance

Address/Contact info
 Pref/Claim info/Modifier
 Modifiers

Copy Plan

Address/Contact info
 Pref/Claim/Dispensing Fee info
 Pricing method

OK Cancel

Setting Up Insurance Plans

This section tells you how to set up insurance plans, including how to

- [To open the insurance Plan tab, 159](#)
- [To add & modify insurance plans, 159](#)
- [To set up insurance plan preferences, 162](#)
- [To set up insurance plan dispensing fees, 164](#)
- [To set up insurance plan notes, 165](#)
- [To add & modify at-a-glance information, 166](#)
- [To copy insurance plans, 167](#)

For more information on setting up insurance plans, watch the "Plan Tab" video.

► **To open the insurance Plan tab**

1. Open the Insurance Billing Initial Setup window. For information on opening the Insurance Billing Setup window, go to [To open the Insurance Billing Initial Setup window on page 149](#).
2. Select an insurance carrier from the **Carrier** drop-down menu.
OR
Add an insurance carrier. Go to [To add & modify insurance carriers on page 150](#) for information about adding insurance carriers.
3. Click the **Plan** tab.

► **To add & modify insurance plans**

1. Open the Plan tab on the Insurance Billing Initial Setup window. For information on opening the Plan tab, go to [To open the insurance Plan tab on page 159](#).
2. Select an insurance plan from the **Select Plan** drop-down menu.
OR
Click **New** to add a plan.

NOTE If you are creating a plan that is similar to one that you have already created, select the existing plan, click Copy to duplicate the plan, and adjust the details as needed. For information on copying insurance plans, go to [To copy insurance plans on page 167](#).

3. Type the insurance plan's name, address, and telephone information in the fields provided.
OR
Select the **Same as Insurance** checkbox to copy the insurance carrier's address.

NOTE If the insurance carrier is VSP, you must enter a valid VSP address, including all spaces and punctuation.

4. Type the HL7 identifier for the insurance plan in the **HL7 ID** field as needed.
5. Type a date in the **Activation Date** field or select a date from the drop-down menu.
6. Type a date in the **Termination Date** field or select a date from the drop-down menu.

NOTE The activation and termination dates are determined by your contract with the insurance plan and control when products and services can be billed to the insurance carrier.

7. Select a pricing method from the **Pricing Method** drop-down menu.

NOTES

- Select the pricing method depending on the needs of your practice and how much detail you want to record for each plan. The more detail you enter for each plan, the more streamlined your check-out and billing process will be.
- Use the table below to determine which pricing method best suits the needs of your practice.

For this much detail...	Select this pricing method...	Go to this section for more information...
Most detail	Detailed Benefits	Setting Up Plan Detailed Benefits on page 168
Moderate detail	Maximum Allotments	Setting Up Plan Maximum Allotments on page 193
Least detail	Percentage	Setting Up Plan Percentages on page 197

- Even though the Detailed Benefits and Maximum Allotments pricing methods require more work to set up, you can save time by using the copy feature, which allows you to quickly duplicate plans and adjust details as needed.
- If the carrier is VSP, select **Percentage** from the Pricing Method drop-down menu.

8. Type the main contact information for the insurance carrier in the following fields as needed:
- Contact
 - Job Title
 - Contact Phone #
 - Contact Email
9. Select **Yes** from the **Create Claim** radio buttons to generate claims for this insurance plan. Select **No** if you do not accept this plan, and the patient is responsible for submitting a claim.
10. Select **Yes** from the **Hold Claim until product is delivered** radio buttons to prevent the claims from being printed or transmitted until the order has been filled. The claim will be available for billing when the Dispensed radio button is selected on the Rx Order window. Select **No** to print or transmit the claims immediately.
11. Select **Yes** from the **Suppress Claim Edits at POS** radio buttons to prevent the claims from being edited at the location level. Select **No** to allow edits to be made to the claims.
12. Select **Carrier**, **Plan**, or **None** from the **Name and Address on Claim** form radio buttons to control what address populates the receiver's portion of the claim.

13. Select the fee that populates box 24F on the CMS 1500 form from the **Box 24f Price Charges** drop-down menu.

NOTES

- If you converted from OfficeMate Enterprise 1.x or OfficeMate 8.x or below to 9.x or above, the default selection for the Box 24f Price Charges drop-down menu is Product Fee; if your products and services do not have fees assigned to them, then \$0.00 appears in box 24F on the CMS 1500 form.
- If you selected No from the Secondary Claim Recipient, remaining charges only radio button in [To add & modify insurance carriers on page 150](#) and you select to populate the Feeslip Fee in box 24F, then the transferred items' fee is displayed on the CMS 1500 form. If you selected No from the Secondary Claim Recipient, remaining charges only radio button in [To add & modify insurance carriers on page 150](#) and you select to populate the Product Fee in box 24F, then the original charges billed on the fee slip are displayed on the CMS 1500 form.

14. Select **Yes** from the **Include non-covered items on Claim** radio buttons to include items that are not covered under the plan on the claim form. Select **No** to prevent items that are not covered from appearing on the claim.
15. Select provider or facility from the **Box 31 Source** drop-down menu according to the plans requirements for box 31.
16. Select **Location** or **Corp.** from the **Box 32 Print Address** radio buttons to print either the location's address or the home office's address.
17. Select **Yes** from the **Box 33 Print Corporate Address** radio buttons to print the home office's address on the claim. Select No to suppress the home office's address.
18. From the **Box 33 Billing Entity** drop-down menu, select the biller information that should appear in box 33 on the CMS 1500.
19. In the **Enter the number of Claim copies to print** field, type the number of copies of the claim form to print.
20. Type the information provided by your electronic claims company or clearinghouse in the following fields as needed:
- Destination ID
 - Payor ID
 - Payor Sub ID

NOTE

- If you are entering a destination ID for NSF files, type the destination ID provided by your electronic claims company or clearinghouse or type **000**.
- If the insurance carrier is VSP, type **000** in the Destination ID text box.
- If you are processing insurance claims through McKesson, type the CPID in the **Payor ID** text box.

21. Click **Save** to save your changes.

► To set up insurance plan preferences

1. Open the Plan tab on the Insurance Billing Initial Setup window. For information on opening the Plan tab, go to [To open the insurance Plan tab on page 159](#).
2. Select an insurance plan from the **Select Plan** drop-down menu.
OR
Click **New** to add a plan. For information on adding plans, go to [To add & modify insurance plans on page 159](#).
3. Click the **Preferences** tab.

NOTE

If the carrier is VSP, ensure that all **Discounts and Eligibility** and **Combining Attributes** radio buttons are set to **No**.

4. Select **Yes** from the **Prevent Discount on Fee Slip** radio buttons to prevent discounts over and above any discounting that is part of this insurance plan that could cut into your margin. Select **No** to allow additional discounts.
5. Select **Yes** from the **Eligibility Required** radio buttons if an eligibility number is required for this plan. Select **No** if eligibility is not required.
6. Select Yes from the Authorization Required radio buttons to require patients' authorization ID on the Eligibility window. After you set up this preference, you must ensure that patients using this insurance plan have their authorization ID recorded on the Carrier window. Select No if authorization is not required.

7. For each of the pairs of radio buttons in the Combining Attributes group, select **Yes** or **No**.

NOTES

- Selecting the Yes radio button combines two or more items with the same CPT code onto one line on the insurance claim. The quantity on the claim reflects the number of items, and the charges on the claim reflects the sum of the charges for the individual items.
- Selecting the No radio button lists each item as a separated line item on the insurance claim.

8. Select **Yes** from the **Split Frame** radio buttons to split the frame cost to two lines on the CMS 1500. Select **No** to list frames as a single line item on the CMS 1500 and go to step 10.

NOTE

When the frame cost is split, the first line is entered on the CMS 1500 with a V2020 code. Any amount above the price point you select in step 9 is split onto the second line with another code, usually V2025.

9. If you selected to split the frame cost in step 8, type the price point at which the frame is split in the **Split @** field and select a billing code from the **CPT/HCPCS** drop-down menu.
10. Select the frame and contact pricing range that appears on the CMS 1500 from the **Pricing Range** radio buttons.
11. In the **Exam Elig. Period** spin box, type the number of months in which the plan states the patient may return.
12. From the **Recall Type** drop-down menu, select the recall type for the plan.
13. Select **Yes** from the **Transfer Co-Pay to Secondary Insurance** radio buttons if the plan allows a secondary insurance to pay the copay. Select **No** if the copay cannot be transferred to a secondary insurance.

14. Select **Yes** from the **Secondary Recipient, accept Co-Pay transfer** radio buttons if the insurance plan pays the copay when it is secondary. Select **No** if the plan does not pay the copay.

► To set up insurance plan dispensing fees

1. Open the Plan tab on the Insurance Billing Initial Setup window. For information on opening the Plan tab, go to [To open the insurance Plan tab on page 159](#).
2. Select an insurance plan from the **Select Plan** drop-down menu.
OR
Click **New** to add a plan. For information on adding plans, go to [To add & modify insurance plans on page 159](#).
3. Click the **Dispensing Fees** tab.
4. Click **New** to create a new dispensing fee.
OR
Select an existing dispensing fee from the list to edit a dispensing fee.
OR
Select an existing dispensing fee from the list and click **Copy** to duplicate a dispensing fee.
5. Select a product type from the list.
6. Select a billing code from the **Code** drop-down menu.
7. Type the fee in the **Fee** field.
8. Click **Save** to save your changes.
9. Repeat steps 4–8 for each dispensing fee you want to add to this insurance plan.
10. Select **Yes** from the **Display Dispensing Fees on Patient's Fee Slip/Statements** radio buttons to include the dispensing fees on fee slips and statements. Select **No** to suppress the dispensing fees on the fee slips and statements.

- Click **Save** on the Plan tab to save your changes.

The screenshot shows the 'Insurance Billing Initial Setup' window with the 'Plan' tab selected. The 'Carrier' is set to 'Aetna'. The 'Plan Name' is 'Elect Choice'. The address is 'P.O. Box 981107', 'El Paso', 'Texas', '79998-1107'. The phone number is '(800) 555-1212'. The activation date is '12/4/2008' and the termination date is '12/2/2019'. The pricing method is 'Percentage' and the coverage percentage is '0'. The 'Dispensing Fees' table is visible, showing two entries: '11640 ACCESSORIES + CONTACT LENSES' with a fee of '200.00' and '11442 FRAMES' with a fee of '200.00'. A list of product types is shown on the right, including 'ACCESSORIES', 'CONTACT LENSES', 'FRAMES', 'LENS TREATMENTS', 'OPHTHALMIC LENSES', 'OTHER', 'PLANO SUNGLASSES', and 'READY READERS SERVICES'. The window has buttons for 'New', 'Copy', 'Cancel', 'Save', 'Delete', and 'Glance'.

► To set up insurance plan notes

- Open the Plan tab on the Insurance Billing Initial Setup window. For information on opening the Plan tab, go to [To open the insurance Plan tab on page 159](#).
- Select an insurance plan from the **Select Plan** drop-down menu.
OR
Click **New** to add a plan. For information on adding plans, go to [To add & modify insurance plans on page 159](#).
- Click the **Notes** tab.
- Click **New Note** to add a timestamp.
Today's date and your name are inserted at the top the notes text box.
- Type your notes in the space provided.
- Click **Save** when you are finished.

- Click **Print Notes** to print the notes as needed.

The screenshot shows the 'Insurance Billing Initial Setup' window with the 'Plan' tab selected. The 'Carrier' is 'Humana Vision Benefits' and the 'Plan' is 'Humana V15 204 Plan'. The 'Revision Date' is '7/21/2008'. The 'Plan Name' is 'Humana V15 204 Plan'. The address is '4205 West Atlantic Avenue, Delray Beach, Florida 33445'. The phone number is '(456) 453-3444'. The activation date is '9/6/2007' and the termination date is '9/6/2017'. The pricing method is 'Maximum Allotments'. The contact information is empty. The 'Notes' field contains the text: '07/21/2008: [Doctor, Johnny]: Effective Nov. 1, 2007, all claims sent electronically via Gateway EDI Systems.' The 'eDocuments' table has one entry:

Date	Entered By	Type	Notes	Expires On	link
10/30/2007	Dohnson Janet	Plan Contract	Humana V15 200 Plan	10/31/2017	

NOTE

For information on attaching eDocuments (e.g., insurance contracts, plan descriptions), go to [Attaching Electronic Documents to Insurance Carriers & Plans on page 198](#).

► **To add & modify at-a-glance information**

The Insurance at a Glance window is informational only. Information entered in the glance window does not affect insurance billing. Insurance billing information does not affect the information entered on the Glance window. The Glance window provides free-form information as a summary of the plan details. Opticians may refer to the insurance glance information on the Insurance tab on the Patient Demographic window while assisting patients.

- Open the Plan tab on the Insurance Billing Initial Setup window. For information on opening the Plan tab, go to [To open the insurance Plan tab on page 159](#).
- Select an insurance plan from the **Select Plan** drop-down menu.
OR
Click **New** to add a plan. For information on adding plans, go to [To add & modify insurance plans on page 159](#).
- Click **Glance**.
The Insurance at a Glance window opens.
- Type information in the text boxes as needed.
- If you have an electronic or scanned copy of the insurance plan information, perform the following steps:
 - Save the file to a folder within the OfficeMate folder on the network so the file is accessible to everyone.
 - Type the path to the file in the **Document Path** field.
- Click **Save** when you are finished.
- Click **Print** to print the glance information as needed.

8. Click **Preview** to view the print preview of the glance information as needed.
The **Preview** window opens and displays the glance information in a format suitable for printing. If you attached an electronic document in step 5, that document will open after the Preview window.
9. Click **Exit** to close the Insurance at a Glance window.

The screenshot shows the 'Insurance at a Glance' window with the following details:

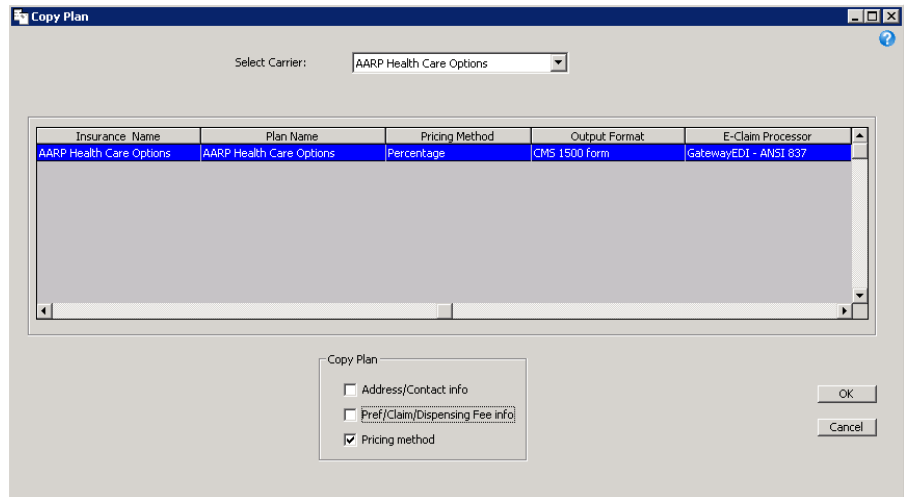
- Processing Information:**
 - Eligibility: ALL BASED ON CALENDAR YEAR
CALL FOR ELIGIBILITY: 800-555-5555
 - Eye exam: 12 months
 - Eyewear: 12 months lenses 24 months frames
 - Claim Form: CMS 1500
 - ID Card: Patient must show valid ID card
 - Lab: Eyewear: Essilor Lab C/L: ABB
 - Procedures: Usual & customary
 - Date Issued: 10/29/2008
- Schedule of Benefits:**
 - Details: INSURANCE MAX ALLOTMENT: \$200
 - Eye Exam: Comprehensive
 - Eyewear:
 - Lenses: SV CR-39 or reg. Glass
 - BF28 CR-39 or reg. Glass
 - TF28 CR-39 or reg. Glass
- Document Path:** C:\OfficeMate\InsuranceDocs\faceless_plan_b.pdf

Buttons on the right side: Save, Print, Preview, Exit.

► To copy insurance plans

1. Open the Plan tab on the Insurance Billing Initial Setup window. For information on opening the Plan tab, go to [To open the insurance Plan tab on page 159](#).
2. Click **Copy**.
The Copy Plan window opens.
3. Select an insurance carrier from the **Select Carrier** drop-down menu.
4. Select a plan from the results list.
5. Select the check boxes that correspond to the information you want to copy into the new insurance carrier.
If the insurance plan that you selected in step 4 uses the detailed benefits pricing method, and if you select the Pricing method check box from the Copy Plan options, the Copy Pricing Method options will appear. The Copy Pricing Method options allow you to specify the product categories the you want to copy to the new insurance.
6. Select the check boxes that correspond to the pricing methods that you want to copy into the new insurance carrier, if the Copy Pricing Method options are available.
7. Click **OK**.

8. Modify the insurance plan as needed. For information on modifying insurance plan information, go to [To add & modify insurance plans on page 159](#).



Setting Up Plan Detailed Benefits

The detailed benefits pricing method allows you to set up complex insurance plan benefits for precise billing. Use the detailed benefits pricing method to set up schedules of benefits for individual attributes and combinations of attributes, set the order in which payments are calculated, and set the maximum allotments.

NOTES

- The Detailed Benefits pricing method is only available to practices that upgraded from OfficeMate Enterprise 2.0 or OfficeMate 9.0, 9.5, or 10.0, and had at least one insurance plan that used either the Detailed Benefits or Maximum Allotments pricing methods.
- If your practice does not require a complex insurance plan setup, go to [Setting Up Plan Maximum Allotments on page 193](#) or [Setting Up Plan Percentages on page 197](#) for additional options.

This section explains how to set up detailed benefits, including how

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► To open the Detail Benefits window

1. Open the Plan tab on the Insurance Billing Initial Setup window. For information on opening the Plan tab, go to [To open the insurance Plan tab on page 159](#).
2. Select an insurance plan from the **Select Plan** drop-down menu.
OR
Click **New** to add a plan. For information on adding plans, go to [To add & modify insurance plans on page 159](#).
3. Select **Detailed Benefits** from the **Pricing Method** drop-down menu.
4. Click **Detail Benefits**.

The Detail Benefits window opens.

► **To set up accessory detailed benefits**

1. Open the Detail Benefits window. For information on opening the Detail Benefits window, go to [To open the Detail Benefits window on page 169](#).
2. Select **Accessories** from the **Product Type** drop-down menu.
3. Click **New** to add a new detailed benefit group.

OR

Select a detailed benefit group from the list to modify it.

NOTE

If you are creating a detailed benefit that is similar to one that you have already created, click Copy to duplicate the plan, and adjust the details as needed. For information on copying maximum allotments, go to [To copy detailed benefits on page 188](#).

4. Select the **Base** information if required by the plan benefit:
 - a. Select an attribute from the **Attributes** drop-down menu.
 - b. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
 - c. Select a modifier from the Modifier drop-down menu. After you record attributes with modifiers on fee slips, they appear in box 24D in the first modifier column on the CMS 1500 form.
5. Select the **Other 1** information if required by the plan benefit as needed:
 - a. Select an attribute from the **Attribute** drop-down menu.
 - b. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
 - c. Select a modifier from the Modifier drop-down menu. After you record attributes with modifiers on fee slips, they appear in box 24D in the first modifier column on the CMS 1500 form.

NOTE

If the option to combine attributes for accessories is selected on the plan Preferences tab, the Other 1 drop-down menus will not be available.

6. Select a product group from the **Product Group** drop-down menu as needed.

NOTES

- If the option to combine attributes for accessories is selected on the plan Preferences tab, the Product Group drop-down menus will not be available.
- To add detailed benefit groups, go to [To add & modify detailed benefit groups on page 186](#).

7. Select the **All Attributes Inclusive** check box if products included in the product group with multiple attributes will should have all attributes included in the schedule of benefits.
8. Click **Save**.

The detail benefit group you created or the changes you made appear in the tree on the left side of the window.

- Repeat steps 3–8 for each of the detailed benefits covered in the plan.

► **To set up contact lens detailed benefits**

- Open the Detail Benefits window. For information on opening the Detail Benefits window, go to [To open the Detail Benefits window on page 169](#).
- Select **Contact Lenses** from the **Product Type** drop-down menu.
- Click **New** to add a new detailed benefit group.

OR

Select a detailed benefit group from the list to modify it.

NOTE If you are creating a detailed benefit that is similar to one that you have already created, click Copy to duplicate the plan, and adjust the details as needed. For information on copying maximum allotments, go to [To copy detailed benefits on page 188](#).

- Select the nature of the lens' use from the **Elective**, **Non-Elective**, or **None** radio buttons.

NOTE If you select the None radio button, OfficeMate will prompt the user to select Elective or Non-Elective when a product matching the contact lens category is invoiced on a VSP order.

- Select the **Lens Cat./Base** information if required by the plan benefit:
 - Select an attribute from the **Attributes** drop-down menu.
 - Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
 - Select a modifier from the Modifier drop-down menu. After you record attributes with modifiers on fee slips, they appear in box 24D in the first modifier column on the CMS 1500 form.

6. Select the **Lens Type** information if required by the plan benefit as needed:
 - a. Select an attribute from the **Attribute** drop-down menu.
 - b. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
 - c. Select a modifier from the Modifier drop-down menu. After you record attributes with modifiers on fee slips, they appear in box 24D in the first modifier column on the CMS 1500 form.

NOTE If the option to combine attributes for contact lenses is selected on the plan Preferences tab, the Lens Type drop-down menus will not be available.

7. Select the **Other 1** information if required by the plan benefit as needed:
 - a. Select an attribute from the **Attribute** drop-down menu.
 - b. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
 - c. Select a modifier from the Modifier drop-down menu. After you record attributes with modifiers on fee slips, they appear in box 24D in the first modifier column on the CMS 1500 form.

NOTE If the option to combine attributes for contact lenses is selected on the plan Preferences tab, the Other 1 drop-down menus will not be available.

8. Enter the **Pricing Range** information if required by the plan benefit as needed:
 - a. Type the bottom of the price range in the **Low** field as a dollar amount.
 - b. Type the top of the price range in the **High** field as a dollar amount.

NOTES

- The Pricing Range radio buttons are not active. To set the price range to retail or to cost, go to the plan Preference tab. For information about the plan Preference tab, go to [To open the insurance Plan tab on page 159](#).
- If the option to combine attributes for contact lenses is selected on the plan Preferences tab, the Oversize drop-down menus will not be available.

9. Select a product group from the **Product Group** drop-down menu as needed.

NOTES

- If the option to combine attributes for contact lenses is selected on the plan Preferences tab, the Product Group drop-down menus will not be available.
- To add detailed benefit groups, go to [To add & modify detailed benefit groups on page 186](#).

10. Select the **All Attributes Inclusive** check box if products included in the product group with multiple attributes will should have all attributes included in the schedule of benefits.
11. Click **Save**.

12. Repeat steps 3–11 for each of the detailed benefits covered in the plan.

► **To set up frame detailed benefits**

1. Open the Detail Benefits window. For information on opening the Detail Benefits window, go to [To open the Detail Benefits window on page 169](#).
2. Select **Frames** from the **Product Type** drop-down menu.
3. Click **New** to add a new detailed benefit group.

OR

Select a detailed benefit group from the list to modify it.

NOTES

- If you are creating a detailed benefit that is similar to one that you have already created, click Copy to duplicate the plan, and adjust the details as needed. For information on copying maximum allotments, go to [To copy detailed benefits on page 188](#).
- The Split Frame radio buttons are not active. To enable or disable splitting frame costs, go to the plan Preference tab. For information about the plan Preference tab, go to [To open the insurance Plan tab on page 159](#).

4. Select the **Frame Cat./Base** information if required by the plan benefit:
 - a. Select an attribute from the **Attributes** drop-down menu.
 - b. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
 - c. Select a modifier from the Modifier drop-down menu. After you record attributes with modifiers on fee slips, they appear in box 24D in the first modifier column on the CMS 1500 form.

5. Select the **Options** information if required by the plan benefit as needed:
 - a. Select an attribute from the **Attribute** drop-down menu.
 - b. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
 - c. Select a modifier from the Modifier drop-down menu. After you record attributes with modifiers on fee slips, they appear in box 24D in the first modifier column on the CMS 1500 form.

NOTE

If the option to combine attributes for frames is selected on the plan Preferences tab, the Other 1 drop-down menus will not be available.

6. Enter the **Pricing Range** information if required by the plan benefit as needed:
 - a. Type the bottom of the price range in the **Low** field as a dollar amount.
 - b. Type the top of the price range in the **High** field as a dollar amount.

NOTES

- The Pricing Range radio buttons are not active. To set the price range to retail, cost, or Frame Facts, go to the plan Preference tab. For information about the plan Preference tab, go to [To open the insurance Plan tab on page 159](#).
- If the option to combine attributes for frames is selected on the plan Preferences tab, the Oversize drop-down menus will not be available.

7. Select a product group from the **Product Group** drop-down menu as needed.

NOTES

- If the option to combine attributes for frames is selected on the plan Preferences tab, the Product Group drop-down menus will not be available.
- To add detailed benefit groups, go to [To add & modify detailed benefit groups on page 186](#).

8. Select the **All Attributes Inclusive** check box if products included in the product group with multiple attributes will should have all attributes included in the schedule of benefits.
9. Click **Save**.

10. Repeat steps 3–9 for each of the detailed benefits covered in the plan.

► **To set up lens treatment detailed benefits**

1. Open the Detail Benefits window. For information on opening the Detail Benefits window, go to [To open the Detail Benefits window on page 169](#).
2. Select **Lens Treatments** from the **Product Type** drop-down menu.
3. Click **New** to add a new detailed benefit group.

OR

Select a detailed benefit group from the list to modify it.

NOTE

If you are creating a detailed benefit that is similar to one that you have already created, click Copy to duplicate the plan, and adjust the details as needed. For information on copying maximum allotments, go to [To copy detailed benefits on page 188](#).

4. Select the **Base** information if required by the plan benefit:
 - a. Select an attribute from the **Attributes** drop-down menu.
 - b. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
 - c. Select a modifier from the Modifier drop-down menu. After you record attributes with modifiers on fee slips, they appear in box 24D in the first modifier column on the CMS 1500 form.

5. Select the **Other 1** information if required by the plan benefit as needed:
 - a. Select an attribute from the **Attribute** drop-down menu.
 - b. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
 - c. Select a modifier from the Modifier drop-down menu. After you record attributes with modifiers on fee slips, they appear in box 24D in the first modifier column on the CMS 1500 form.

NOTE

If the option to combine attributes for lens treatments is selected on the plan Preferences tab, the Other 1 drop-down menus will not be available.

6. Select a product group from the **Product Group** drop-down menu as needed.

NOTES

- If the option to combine attributes for lens treatments is selected on the plan Preferences tab, the Product Group drop-down menus will not be available.
- To add detailed benefit groups, go to [To add & modify detailed benefit groups on page 186](#).

7. Select the **All Attributes Inclusive** check box if products included in the product group with multiple attributes will should have all attributes included in the schedule of benefits.
8. Click **Save**.
9. Repeat steps 3–8 for each of the detailed benefits covered in the plan.

► **To set up ophthalmic lens detailed benefits**

1. Open the Detail Benefits window. For information on opening the Detail Benefits window, go to [To open the Detail Benefits window on page 169](#).
2. Select **Ophthalmic Lenses** from the **Product Type** drop-down menu.

3. Click **New** to add a new detailed benefit group.

OR

Select a detailed benefit group from the list to modify it.

NOTE	If you are creating a detailed benefit that is similar to one that you have already created, click Copy to duplicate the plan, and adjust the details as needed. For information on copying maximum allotments, go to To copy detailed benefits on page 188 .
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4. Select one of the following from the **Power Ranges** radio buttons.
 - Select **Yes** to automatically populate the claim form with the CPT/HCPCS code based on the lens' power range.
 - Select **No** to populate the claim form with the CPT/HCPCS of the base lens.
5. Select the **Cat./Base** information if required by the plan benefit:
 - a. Select an attribute from the **Attributes** drop-down menu.
 - b. Select a procedure code from the **CPT/HCPCS Code** drop-down menu.

NOTE	If you selected Yes from the Power ranges radio buttons in step 4, the CPT/HCPCS Code drop-down menu will not be available.
-------------	---

- c. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
 - d. Select a modifier from the Modifier drop-down menu. After you record attributes with modifiers on fee slips, they appear in box 24D in the first modifier column on the CMS 1500 form.
6. Select the **Single Vision**, **Multifocal**, or **None** radio button as needed.

NOTE	The Single Vision, Multifocal, and Name radio buttons are only available if the Lens Cat./Base field is blank. If you selected the Lens Cat./Base information in step 5, these radio buttons will not be available.
-------------	---

7. Select the **Lens Type** information if required by the plan benefit as needed:
 - a. Select an attribute from the **Attribute** drop-down menu.
 - b. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
 - c. Select a modifier from the Modifier drop-down menu. After you record attributes with modifiers on fee slips, they appear in box 24D in the first modifier column on the CMS 1500 form.

NOTE	If the option to combine attributes for ophthalmic lenses is selected on the plan Preferences tab, the Lens Type drop-down menus will not be available.
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8. Select the **Material** information if required by the plan benefit as needed:
 - a. Select an attribute from the **Attribute** drop-down menu.
 - b. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
 - c. Select a modifier from the Modifier drop-down menu. After you record attributes with modifiers on fee slips, they appear in box 24D in the first modifier column on the CMS 1500 form.

NOTE

If the option to combine attributes for ophthalmic lenses is selected on the plan Preferences tab, the Material drop-down menus will not be available.

9. Select the **Color** information if required by the plan benefit as needed:
 - a. Select an attribute from the **Attribute** drop-down menu.
 - b. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
 - c. Select a modifier from the Modifier drop-down menu. After you record attributes with modifiers on fee slips, they appear in box 24D in the first modifier column on the CMS 1500 form.

NOTE

If the option to combine attributes for ophthalmic lenses is selected on the plan Preferences tab, the Color drop-down menus will not be available.

10. Select the **Other 1** information if required by the plan benefit as needed:
 - a. Select an attribute from the **Attribute** drop-down menu.
 - b. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
 - c. Select a modifier from the Modifier drop-down menu. After you record attributes with modifiers on fee slips, they appear in box 24D in the first modifier column on the CMS 1500 form.

NOTE

If the option to combine attributes for ophthalmic lenses is selected on the plan Preferences tab, the Other 1 drop-down menus will not be available.

11. Select the **Prism** information if required by the plan benefit as needed:
 - a. Select an attribute from the **Attribute** drop-down menu.
 - b. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
 - c. Select a modifier from the Modifier drop-down menu. After you record attributes with modifiers on fee slips, they appear in box 24D in the first modifier column on the CMS 1500 form.

12. Select the **Add Power** information if required by the plan benefit as needed:
 - a. Select an attribute from the **Attribute** drop-down menu.
 - b. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
 - c. Select a modifier from the Modifier drop-down menu. After you record attributes with modifiers on fee slips, they appear in box 24D in the first modifier column on the CMS 1500 form.
13. Select the **Oversize** information if required by the plan benefit as needed:
 - a. Select an attribute from the **Attribute** drop-down menu.
 - b. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
 - c. Select a modifier from the Modifier drop-down menu. After you record attributes with modifiers on fee slips, they appear in box 24D in the first modifier column on the CMS 1500 form.
14. Select a product group from the **Product Group** drop-down menu as needed.

NOTE

To add detailed benefit groups, go to [To add & modify detailed benefit groups on page 186](#).

15. Select the **All Attributes Inclusive** check box if products included in the product group with multiple attributes will should have all attributes included in the schedule of benefits.
16. Click **Save**.
17. Repeat steps 3–16 for each of the detailed benefits covered in the plan.

Carrier: Vision Service Plan
Plan: Vision Service Plan

Product Type: OPTHALMIC LENSES

ATTRIBUTE [LENS TYPE]				
HCPCS	REPL.	ATTRIBUTES	PRODUCT/GROUP	MODIFIER
V2219	1034F	BF Seg > 28mm		25

ATTRIBUTE [COMBOS]				
HCPCS	REPL.	ATTRIBUTES	PRODUCT/GROUP	MODIFIER
ALL		Glass H-Index 1.60 + Prism		

Power Range: Yes No

Attributes: [Dropdown] CPT/HCPCS Code: [Dropdown] Replace Code: [Dropdown] Modifier: [Dropdown]

Single Vision Multifocal None

Lens Type: [Dropdown] Material: Glass H-Index 1.60 [Dropdown] Y2782 [Dropdown]

Color: [Dropdown] Other 1: [Dropdown]

Prism: Prism [Dropdown] Y2715 [Dropdown]

Add Power: [Dropdown] Oversize: [Dropdown]

Product Group: [Dropdown] Group Builder: [Dropdown] Modifier: [Dropdown]

All Attributes Inclusive

New Print Copy Save Delete Cancel

► **To set up other detailed benefits**

1. Open the Detail Benefits window. For information on opening the Detail Benefits window, go to [To open the Detail Benefits window on page 169](#).
2. Select **Other** from the **Product Type** drop-down menu.

3. Click **New** to add a new detailed benefit group.

OR

Select a detailed benefit group from the list to modify it.

NOTE

If you are creating a detailed benefit that is similar to one that you have already created, click Copy to duplicate the plan, and adjust the details as needed. For information on copying maximum allotments, go to [To copy detailed benefits on page 188](#).

4. Select the **Base** information if required by the plan benefit:
 - a. Select an attribute from the **Attributes** drop-down menu.
 - b. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
 - c. Select a modifier from the Modifier drop-down menu. After you record attributes with modifiers on fee slips, they appear in box 24D in the first modifier column on the CMS 1500 form.
5. Select the **Other 1** information if required by the plan benefit as needed:
 - a. Select an attribute from the **Attribute** drop-down menu.
 - b. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
 - c. Select a modifier from the Modifier drop-down menu. After you record attributes with modifiers on fee slips, they appear in box 24D in the first modifier column on the CMS 1500 form.

NOTE

If the option to combine attributes for other is selected on the plan Preferences tab, the Other 1 drop-down menus will not be available.

6. Select a product group from the **Product Group** drop-down menu as needed.

NOTES

- If the option to combine attributes for other is selected on the plan Preferences tab, the Product Group drop-down menus will not be available.
- To add detailed benefit groups, go to [To add & modify detailed benefit groups on page 186](#).

7. Select the **All Attributes Inclusive** check box if products included in the product group with multiple attributes will should have all attributes included in the schedule of benefits.
8. Click **Save**.

9. Repeat steps 3–8 for each of the detailed benefits covered in the plan.

► **To set up plano sunglass detailed benefits**

1. Open the Detail Benefits window. For information on opening the Detail Benefits window, go to [To open the Detail Benefits window on page 169](#).
2. Select **Plano Sunglasses** from the **Product Type** drop-down menu.
3. Click **New** to add a new detailed benefit group.

OR

Select a detailed benefit group from the list to modify it.

NOTE

If you are creating a detailed benefit that is similar to one that you have already created, click Copy to duplicate the plan, and adjust the details as needed. For information on copying maximum allotments, go to [To copy detailed benefits on page 188](#).

4. Select the **Base** information if required by the plan benefit:
 - a. Select an attribute from the **Attributes** drop-down menu.
 - b. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
 - c. Select a modifier from the Modifier drop-down menu. After you record attributes with modifiers on fee slips, they appear in box 24D in the first modifier column on the CMS 1500 form.

5. Select the **Other 1** information if required by the plan benefit as needed:
 - a. Select an attribute from the **Attribute** drop-down menu.
 - b. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
 - c. Select a modifier from the Modifier drop-down menu. After you record attributes with modifiers on fee slips, they appear in box 24D in the first modifier column on the CMS 1500 form.

NOTE	If the option to combine attributes for ophthalmic lenses is selected on the plan Preferences tab, the Other 1 drop-down menus will not be available.
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6. Enter the **Pricing Range** information if required by the plan benefit as needed:
 - a. Type the bottom of the price range in the **Low** field as a dollar amount.
 - b. Type the top of the price range in the **High** field as a dollar amount.

NOTES	<ul style="list-style-type: none"> • The Pricing Range radio buttons are not active. To set the price range to retail, cost, or Frame Facts, go to the plan Preference tab. For information about the plan Preference tab, go to To open the insurance Plan tab on page 159. • If the option to combine attributes for plano sunglasses is selected on the plan Preferences tab, the Oversize drop-down menus will not be available.
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7. Select a product group from the **Product Group** drop-down menu as needed.

NOTES	<ul style="list-style-type: none"> • If the option to combine attributes for ophthalmic lenses is selected on the plan Preferences tab, the Product Group drop-down menus will not be available. • To add detailed benefit groups, go to To add & modify detailed benefit groups on page 186.
--------------	---

8. Select the **All Attributes Inclusive** check box if products included in the product group with multiple attributes will should have all attributes included in the schedule of benefits.
9. Click **Save**.

10. Repeat steps 3–9 for each of the detailed benefits covered in the plan.

► **To set up ready reader detailed benefits**

1. Open the Detail Benefits window. For information on opening the Detail Benefits window, go to [To open the Detail Benefits window on page 169](#).
2. Select **Ready Readers** from the **Product Type** drop-down menu.
3. Click **New** to add a new detailed benefit group.

OR

Select a detailed benefit group from the list to modify it.

NOTE

If you are creating a detailed benefit that is similar to one that you have already created, click Copy to duplicate the plan, and adjust the details as needed. For information on copying maximum allotments, go to [To copy detailed benefits on page 188](#).

4. Select the **Base** information if required by the plan benefit:
 - a. Select an attribute from the **Attributes** drop-down menu.
 - b. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
 - c. Select a modifier from the Modifier drop-down menu. After you record attributes with modifiers on fee slips, they appear in box 24D in the first modifier column on the CMS 1500 form.

5. Select the **Other 1** information if required by the plan benefit as needed:
 - a. Select an attribute from the **Attribute** drop-down menu.
 - b. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
 - c. Select a modifier from the Modifier drop-down menu. After you record attributes with modifiers on fee slips, they appear in box 24D in the first modifier column on the CMS 1500 form.

NOTE

If the option to combine attributes for ready readers is selected on the plan Preferences tab, the Other 1 drop-down menus will not be available.

6. Select a product group from the **Product Group** drop-down menu as needed.

NOTES

- If the option to combine attributes for ready readers is selected on the plan Preferences tab, the Product Group drop-down menus will not be available.
- To add detailed benefit groups, go to [To add & modify detailed benefit groups on page 186](#).

7. Select the **All Attributes Inclusive** check box if products included in the product group with multiple attributes will should have all attributes included in the schedule of benefits.
8. Click **Save**.
9. Repeat steps 3–8 for each of the detailed benefits covered in the plan.

► **To set up service detailed benefits**

1. Open the Detail Benefits window. For information on opening the Detail Benefits window, go to [To open the Detail Benefits window on page 169](#).
2. Select **Services** from the **Product Type** drop-down menu.

3. Click **New** to add a new detailed benefit group.

OR

Select a detailed benefit group from the list to modify it.

NOTE

If you are creating a detailed benefit that is similar to one that you have already created, click Copy to duplicate the plan, and adjust the details as needed. For information on copying maximum allotments, go to [To copy detailed benefits on page 188](#).

4. Select the **Exam Cat./Base** information if required by the plan benefit:
 - a. Select an attribute from the **Attributes** drop-down menu.
 - b. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
 - c. Select a modifier from the Modifier drop-down menu. After you record attributes with modifiers on fee slips, they appear in box 24D in the first modifier column on the CMS 1500 form.
5. Select the **Type** information if required by the plan benefit as needed:
 - a. Select an attribute from the **Attribute** drop-down menu.
 - b. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
 - c. Select a modifier from the Modifier drop-down menu. After you record attributes with modifiers on fee slips, they appear in box 24D in the first modifier column on the CMS 1500 form.

NOTE

If the option to combine attributes for other is selected on the plan Preferences tab, the Other 1 drop-down menus will not be available.

6. Select the **Other 1** information if required by the plan benefit as needed:
 - a. Select an attribute from the **Attribute** drop-down menu.
 - b. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
 - c. Select a modifier from the Modifier drop-down menu. After you record attributes with modifiers on fee slips, they appear in box 24D in the first modifier column on the CMS 1500 form.

NOTE

If the option to combine attributes for other is selected on the plan Preferences tab, the Other 1 drop-down menus will not be available.

7. Select a product group from the **Product Group** drop-down menu as needed.

NOTES

- If the option to combine attributes for other is selected on the plan Preferences tab, the Product Group drop-down menus will not be available.
- To add detailed benefit groups, go to [To add & modify detailed benefit groups on page 186](#).

8. Click **Save**.
9. Repeat steps 3–8 for each of the detailed benefits covered in the plan.

HCPCS	REPL.	ATTRIBUTES	PRODUCT/GROUP	MODIFIER
92284	0517F	Adaptation-Dark		24
65860	1035F	Anterior chamber, incision		26

► To add & modify detailed benefit groups

1. Open the Detail Benefits window. For information on opening the Detail Benefits window, go to [To open the Detail Benefits window on page 169](#).
2. Select a product type from the **Product Type** drop-down menu.
3. Click **Group Builder**.
The Plan Group Builder window opens.
4. Click **New Group** and type a name for the group in the **Product Group** field.
OR
Select a group from the **Product Group** drop-down menu.

NOTE

If you are creating a detailed benefit group that is similar to one that you have already created, even if it's for different insurance plan, click Copy to duplicate the group, and adjust the details as needed. For information on copying detailed benefit groups, go to [To copy detailed benefit groups on page 187](#).

5. Click **Find Product** to find and add products to the group.
The Find Product window opens.
6. Type the first few letters of the name of the product(s) that you want to find in the **Name** field as needed.

7. Select a manufacturer from the **Manufacturer** drop-down menu if it is available and if it is needed to refine your search.
8. Select a designer from the **Designer** drop-down menu as needed.
9. Click **F2 Find** to locate the product(s).
10. Select the check boxes next to the product(s) that you want to add to the group.
OR
Click **Check All** to select all of the products in the results list.
11. Click **Select** to save your selections.
12. Repeat steps 6–11 to add additional products to the group as needed.

Select	Product Name/Code	Print Name	Vendor	Manufacturer	Designer	Material
<input checked="" type="checkbox"/>	DISNEY 53	DISNEY 53	Marchon	Marchon	DISNEY	
<input checked="" type="checkbox"/>	DISNEY 53CT	DISNEY 53CT	Marchon	Marchon	DISNEY	
<input checked="" type="checkbox"/>	DISNEY 81	DISNEY 81	Marchon	Marchon	DISNEY	
<input checked="" type="checkbox"/>	DISNEY 81 CLIP-ON	DISNEY 81 CLIP-ON	Marchon	Marchon	DISNEY	
<input checked="" type="checkbox"/>	DISNEY 82	DISNEY 82	Marchon	Marchon	DISNEY	
<input checked="" type="checkbox"/>	DISNEY 82 CLIP-ON	DISNEY 82 CLIP-ON	Marchon	Marchon	DISNEY	
<input checked="" type="checkbox"/>	DISNEY 85	DISNEY 85	Marchon	Marchon	DISNEY	
<input checked="" type="checkbox"/>	DISNEY 85 CLIP-ON	DISNEY 85 CLIP-ON	Marchon	Marchon	DISNEY	
<input checked="" type="checkbox"/>	DISNEY 86	DISNEY 86	Marchon	Marchon	DISNEY	
<input checked="" type="checkbox"/>	DISNEY 86 W/CC	DISNEY 86 W/CC	Marchon	Marchon	DISNEY	
<input checked="" type="checkbox"/>	DISNEY 87	DISNEY 87	Marchon	Marchon	DISNEY	
<input checked="" type="checkbox"/>	DISNEY 87 W/CC	DISNEY 87 W/CC	Marchon	Marchon	DISNEY	
<input checked="" type="checkbox"/>	DISNEY 88	DISNEY 88	Marchon	Marchon	DISNEY	
<input checked="" type="checkbox"/>	DISNEY 89	DISNEY 89	Marchon	Marchon	DISNEY	
<input checked="" type="checkbox"/>	DISNEY 91	DISNEY 91	Marchon	Marchon	DISNEY	

13. Close the Find Product window when you are finished.
14. If you need to remove any products from the list, select the check box next to the product name.
15. Select a modifier from the Modifier drop-down menu, if desired. After you record groups with modifiers on fee slips, they appear in box 24D in the first modifier column on the CMS 1500 form.
16. Click **Save** to save the Group.

NOTE

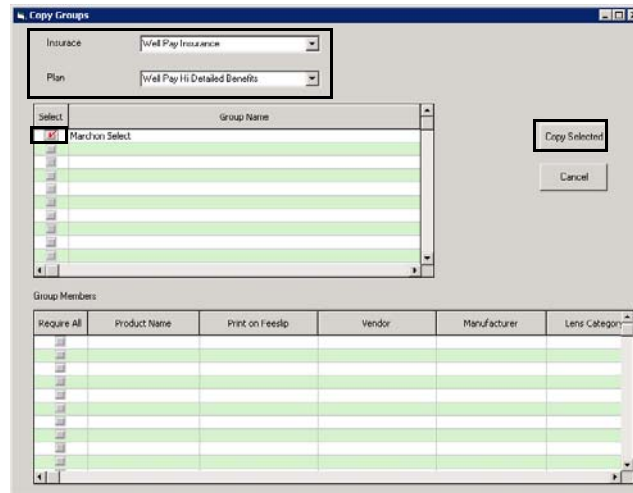
If you selected any check boxes in step 14, those products are removed from the group when the group is saved.

17. Close the Plan Group Builder window.

► **To copy detailed benefit groups**

1. Open the Detail Benefits window. For information on opening the Detail Benefits window, go to [To open the Detail Benefits window on page 169](#).
2. Select a product type from the **Product Type** drop-down menu.

3. Click **Group Builder**.
The Plan Group Builder window opens.
4. Click **Copy**.
The Copy Groups window opens.
5. Select an insurance carrier from the **Insurance** drop-down menu.
6. Select an insurance plan from the **Plan** drop-down menu.
7. Select the check boxes next to the groups that you want to copy.
8. Click **Copy Selected**.



► To copy detailed benefits

1. Open the Detail Benefits window. For information on opening the Detail Benefits window, go to [To open the Detail Benefits window on page 169](#).
2. Click **Copy**.
The Copy Detailed Benefits window opens.

NOTE

A confirmation may appear asking you if you want to overwrite any existing detailed benefits in this insurance plan. Select one of the following options:

- Click **Yes** to erase all of the plan's detailed benefits and replace them with those you are about to copy.
- Click **No** to keep the current detailed benefits and not copy detailed benefits from another plan.

3. Select an insurance carrier from the Select Carrier drop-down menu.
All plans under that carrier with a detailed benefit pricing method appear in the results list.
4. Select a plan from the list.

- Click **OK**.

Insurance Name	Plan Name	Pricing Method	Output Format	E-Claim Processor
Faceless Insurance	Plan B	Detailed Benefits	CMS 1500 Form	GatewayEDI - ANSI 837
Faceless Insurance	Plan C - Detailed Benefits	Detailed Benefits	CMS 1500 Form	GatewayEDI - ANSI 837

- Modify the detailed benefits as needed. For information on modifying maximum allotment information, go to [To set up accessory detailed benefits on page 170](#), [To set up contact lens detailed benefits on page 171](#), [To set up frame detailed benefits on page 173](#), [To set up lens treatment detailed benefits on page 175](#), [To set up ophthalmic lens detailed benefits on page 176](#), [To set up other detailed benefits on page 179](#), [To set up plano sunglass detailed benefits on page 181](#), [To set up ready reader detailed benefits on page 183](#), or [To set up service detailed benefits on page 184](#).

► **To set up a schedule of benefits**

- Open the Detail Benefits window. For information on opening the Detail Benefits window, go to [To open the Detail Benefits window on page 169](#).
- Click the **Schedule of Benefits** tab.
- Select a product type from the **Product Type** drop-down menu.
- Select a product from the tree.

NOTES

- Only those products or combination of products set up on the Detailed Benefits Setup tab appear in the tree. For information on setting up products on the Detailed Benefits Setup tab go to [To add & modify detailed benefit groups on page 186](#).
- If you are creating a schedule of benefits that is similar to one that you have already created, click Copy to duplicate the plan, and adjust the details as needed.

5. Set the sequence in which products and services are paid under the plan by typing a number (between 1 and 5) in the **Discount**, **Out of Pocket**, **Co-Pay**, **T/P Reimbursement**, and **Balance** fields.

NOTES

- This is where you account for 100% of the product and service fees. All the fees charged by the practice will fall into these five categories: discount, patient out of pocket, copay, insurance reimbursement, and balance write off.
- Enter the number in which each category should be executed in the sequence and type each number only once. For example, if the patient's copay must be covered before any other calculations, type 1 in the Co-Pay field. If a discount must be applied to the entire balance before the copay is deducted from the total, type 1 in the Discount field and type 2 in the Co-Pay field.
- Discount must be first in the sequence or last in the sequence depending on whether the discount is to be applied before or after.
- Co-Pay must precede T/P Reimbursement in the sequence.

6. For the **Discount** category, perform the following steps:
- a. Select the **Before** radio button if a discount should be applied to the balance before the patient payment or select the **After** radio button if a discount should be applied after the patient payment.
 - b. Select the **\$ Amt** radio button if the discount is a dollar amount or select the **% Amt** radio button if the discount is a percent.
 - c. Type the amount or percent of the discount.
7. For the **Out of Pocket** category, perform the following steps:
- a. Select the **\$ Amt**, **% Amt**, **Benefit**, or **Balance** radio button depending on the insurance plan's patient benefit.

NOTES

- The dollar and percentage amounts are amounts that may be specified by the insurance plan.
- The Benefit amount is the patient's allowance. The patient is responsible for any amount above the benefit amount.
- The Balance radio button indicates that the patient is responsible for any amount above the third party reimbursement.
- If you select the Balance radio button, the Out of Pocket category must be last in the sequence. Type 4 for the Out of Pocket sequence number and leave the Balance category blank.

- b. Type the amount or percent of the discount or type the amount of the patient's benefit.

8. For the **Co-Pay** category, perform the following steps:
 - a. Select the **\$ Amt**, **% Amt**, or **Balance** radio button depending on the insurance plan's requirements.

NOTES

- The dollar and percentage amounts are amounts that are specified by the insurance plan.
- The Balance radio button indicates that the patient is responsible for any amount above the third party reimbursement.
- If you select the Balance radio button, the Co-Pay category must be last in the sequence. Type 4 for the Co-Pay sequence number and leave the Balance category blank.

- b. Type the amount or percent of the copay as needed.

9. For the **T/P Reimbursement** category, perform the following steps:
 - a. Select the **\$ Amt**, **% Amt**, or **Balance** radio button.

NOTES

- The dollar and percentage amounts are amounts that are specified by the insurance plan.
- The Balance radio button indicates that the insurance plan pays any amount above the patient's copay and discount.
- If you select the Balance radio button, the T/P Reimbursement category must be last in the sequence. Type 4 for the T/P Reimbursement sequence number and leave the Balance category blank.

- b. Type the amount or percent of the insurance reimbursement as needed.

10. For the **Balance** category, select the **Write-Off** or **Secondary -> W/O** radio button, depending on the insurance plan's requirements.

NOTES

- Select Write-Off to write off any balance not covered by the patient, insurance, or any discounts. The gap between the insurance plan's coverage and the patient's allowance is a balance that is typically written off.
- Select Secondary -> W/O if the insurance plan allows you to bill a secondary insurance before writing off any balances not covered by the insurance or discounts. If this option is selected, and the patient has a secondary insurance that accepts transfers, a claim will be generated for the secondary insurance.

11. Enter the maximum allowed by the insurance carrier for the attribute:
 - a. Type the maximum copay in the **Co-Pay** text box.
 - b. Type the maximum quantity in the **Limit** text box.
12. Click **Save** to save the schedule of benefits.

13. Repeat steps 3–12 for each product type.

The screenshot shows the 'Detail Benefits' window with the 'Schedule of Benefits' tab selected. The window title is 'Detail Benefits'. Below the title bar, there are three tabs: 'Detailed Benefit Setup', 'Schedule of Benefits', and 'Max Detail Benefits'. The 'Max Detail Benefits' tab is active. The window displays a table of benefits for 'OPHTHALMIC LENSES'. The table has columns for HCP/CS, REPL., OPHTHALMIC LENSES, PROD/GRP, and various financial fields like \$Amt, %Amt, \$Ben, Bal, etc. The 'Maximum' section at the bottom right includes fields for Co-Pay (5.00) and Limit (2).

► **To set up maximum detailed benefits**

1. Open the Detail Benefits window. For information on opening the Detail Benefits window, go to [To open the Detail Benefits window on page 169](#).
2. Click the **Max Detail Benefits** tab.
3. Click **New** to add a product or combination of products to the maximum allowance list.

OR

Select a product or combination of products from the list to modify it.

NOTE

If you are creating a set of maximum allowances that is similar to one that you have already created, click Copy to duplicate the plan, and adjust the details as needed.

4. Select a product type from the **Product Type** list.

NOTE

Select more than one product type from the list to create a combination. For example, many insurance plans have a different pricing structure for frames and ophthalmic lenses when purchased together than when purchased separately.

5. If you selected multiple products from the Product Type list, select the Any or All Required Products radio button to choose whether any of the selected product types recorded on a fee slips are included in the combination or all of the selected product types recorded on a fee slip are included in the combination.
6. In the **Maximum Patient Allowance** fields, enter the following information:
 - a. Enter the patient's allowance in the **\$ Amount** field.
 - b. If there is a limit to the quantity of this product type, enter the quantity in the **Limit** field.

7. Type the maximum amount the insurance plan will pay in the **Maximum T/P Reimbursement**.
8. Type the discount that the patient receives on any remaining balance over his or her allowance in the **% Discounts Before/After Allowance** field and select the Before or After radio button to specify if you want the discount to be applied before or after the allowance is applied.
9. Type the patient's copay in the **Maximum Co-Pay** field.
10. Click **Save** to save your changes.

The maximum allowance information is added to the tree on the left side of the window.

11. Repeat steps 3–10 to add additional maximum allowance settings.

PRODUCT TYPES	Allowance \$AMT	LIMIT	%DISC	T/P Reimb. \$AMT	Co-Pay \$AMT
ACCESSORIES			40.00		100.00
FRAMES + OPHTHALMIC LENSES				100.00	

Setting Up Plan Maximum Allotments

The maximum allotment pricing method allows you to set up the maximum insurance plan benefits for individual attributes and combinations of attributes.

NOTES

- The Maximum Allotments pricing method is only available to practices that upgraded from OfficeMate Enterprise 2.0 or OfficeMate 9.0, 9.5, or 10.0, and had at least one insurance plan that used either the Detailed Benefits or Maximum Allotments pricing methods.
- If your practice requires a more complex insurance plan setup, go to [Setting Up Plan Detailed Benefits on page 168](#). If your practice requires a less complex insurance plan setup, go to [Setting Up Plan Percentages on page 197](#).

This section explains how to set up maximum allotments, including how

- [To open the Maximum Allotments window, 194](#)
- [To add & modify maximum allotments, 194](#)
- [To copy maximum allotments, 196](#)

► **To open the Maximum Allotments window**

1. Open the Plan tab on the Insurance Billing Initial Setup window. For information on opening the Plan tab, go to [To open the insurance Plan tab on page 159](#).
2. Select an insurance plan from the **Select Plan** drop-down menu.
OR
Click **New** to add a plan. For information on adding plans, go to [To add & modify insurance plans on page 159](#).
3. Select **Maximum Allotments** from the **Pricing Method** drop-down menu.
4. Click **Maximum Allotments**.
The Maximum Allotments window opens.

► **To add & modify maximum allotments**

1. Open the Maximum Allotments window. For information on opening the Maximum Allotments window, go to [To open the Maximum Allotments window on page 194](#).
2. Click **New** to add a product or combination of products to the maximum allotments list.
OR
Select a product or combination of products from the list to modify it.

NOTE

If you are creating a set of maximum allotments that is similar to one that you have already created, click Copy to duplicate the plan, and adjust the details as needed. For information on copying maximum allotments, go to [To copy maximum allotments on page 196](#).

3. Select a product type from the **Product Type** list.

NOTE

Select more than one product type from the list to create a combination. For example, many insurance plans have a different pricing structure for frames and ophthalmic lenses when purchased together than when purchased separately.

4. Select a code from the **Replace Code** drop-down menu if the insurance carrier requires a code other than the standard CPT/HCPCS code.
5. Select one of the **% Discounts** radio buttons:
 - Select **Before** if the insurance plan mandates that a discount be applied before the patient's payment and type the amount of the discount as a percent.
 - Select **After** if the insurance plan mandates that a discount be applied after the patient's payment and type the amount of the discount as a percent.
 - Select **None** if the insurance plan does not mandate a discount.

6. Select one of the **Patient Allotments** radio buttons:
 - Select **Percent** if the insurance plan entitles the patient to a benefit in the form of a percent and type the amount of the allotment as a percent. Type the maximum dollar amount covered in the **Max \$ Value** field.
 - Select **Amt** if the insurance plan entitles the patient to a specific amount and type the amount of the allotment as a dollar amount.

NOTE Any amount above the patient's allotment, will be applied to the patient's out-of-pocket costs.

7. If there is a limit to the quantity of this product type, enter the quantity in the **Limit** field.
8. Select one of the **Co-Pay** radio buttons:
 - Select **Percent** if the patient's copay is a percentage and type the amount of the copayment as a percent and type the maximum dollar amount in the **Max \$** field.
 - Select **Amt** if the patient's copayment is a specific amount and type the amount of the copayment as a dollar amount.
 - Select **None** if the patient does not have a copay.
9. Select one of the **T/P Reimbursement** radio buttons:
 - Select **Percent** if the insurance plan covers a percent of the patient allotment and type the amount covered as a percent. Type the maximum dollar amount covered in the **Max \$ Value** field.
 - Select **Amt** if the insurance plan covers a specific amount of the patient allotment and type the amount covered as a dollar amount.
10. Select one of the **Balance** radio buttons:
 - Select **Write-Off** to write off the balance that is not covered by the insurance plan and for which the patient is not responsible.
 - Select **Secondary -> W/O** to bill a secondary insurance for the uncovered balance.
11. Click Save to save your changes.
12. Repeat steps 2–11 to add additional maximum allotment settings.

13. Close the window when you are finished adding maximum allotments.

► **To copy maximum allotments**

1. Open the Maximum Allotments window. For information on opening the Maximum Allotments window, go to [To open the Maximum Allotments window on page 194](#).
2. Click **Copy**.

The Copy Maximum Allotment window opens.

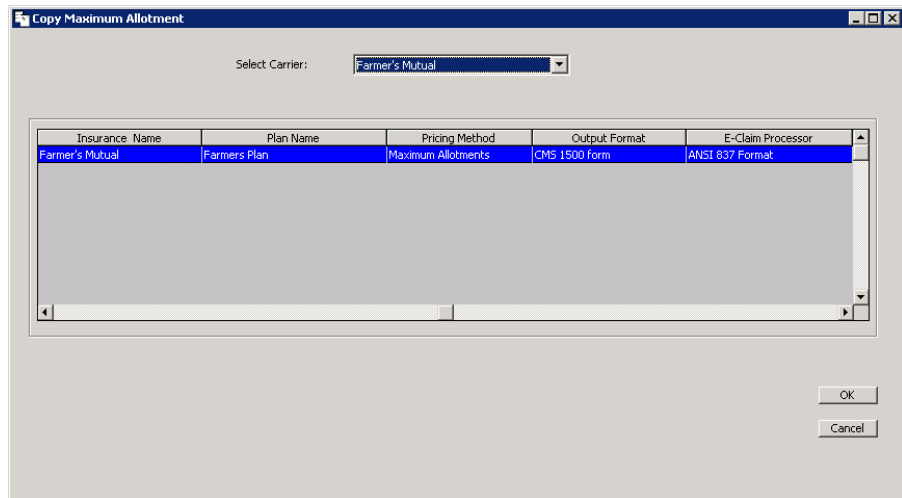
NOTE

A confirmation may appear asking you if you want to overwrite any existing maximum allotments in this insurance plan. Select one of the following options:

- Click **Yes** to erase all of the plan's maximum allotments and replace them with those you are about to copy.
- Click **No** to keep the current maximum allotments and not copy maximum allotments from another plan.

3. Select an insurance carrier from the Select Carrier drop-down menu.
 All plans under that carrier with a maximum allotment pricing method appear in the results list.
4. Select a plan from the list.

- Click **OK**.



- Modify the maximum allotments as needed. For information on modifying maximum allotment information, go to [To add & modify maximum allotments on page 194](#).

Setting Up Plan Percentages

The percentage pricing method allows you to set up a general insurance plan benefit and a general patient copayment. The percentage pricing method also allows you to set up a general fee schedule for products and services.

This section explains how to set up percentages, including how

- Open the Plan tab on the Insurance Billing Initial Setup window. For information on opening the Plan tab, go to [To open the insurance Plan tab on page 159](#).
- Select an insurance plan from the **Select Plan** drop-down menu.
OR
Click **New** to add a plan. For information on adding plans, go to [To add & modify insurance plans on page 159](#).
- Select **Percentage** from the **Pricing Method** drop-down menu.
- Type the percentage of cost that the plan covers in the **Coverage %** text box.

NOTES

- If the insurance carrier has a fee schedule, type **100** in the Coverage % text box.
- If the carrier is VSP, type **100** in the Coverage % text box.

- Select either the **Percent** or **Amount** radio button, depending how the plan has structured the patient's copay.
- Type the actual percent or amount of the patient's copay in the **Co-Pay** field.
- Click **Fee Schedule** as needed.
The Insurance Fee Type window opens.
- Select a product or service from the **Insurance Fee Type** drop-down menu.

9. Type the amount covered by the insurance plan in the Amount column.
10. Repeat steps 8–9 for each of the products and services covered under the plan.
11. Click **OK** when you are finished.
12. Click **Save** on the **Insurance Billing Initial Setup** window to save the changes you made to the insurance plan.

Insurance Fee Type	Amount
Coating - UV MF	\$25.00
Coating - AR	\$27.00
Dispensing Fee	\$10.00
Polycarbonate - MF	\$35.00
BF Executive	\$30.00
Progressive Standard	\$47.00

Attaching Electronic Documents to Insurance Carriers & Plans

For more information on using your scanner to scan documents into your computer, see the manual that came with your scanner.

Follow the instructions below to store and organize links to electronic documents in OfficeMate. If you are scanning documents and saving them on your computer so that you can link them to insurance carriers and plans, select a standard naming convention (i.e., insurance carrier name or number) to use when naming the documents and save the documents in your OfficeMate\DATA\eDocuments folder (if you are a new user or were an OfficeMate Enterprise user who upgraded to OfficeMate 9.0 or above) or OMATE32\DATA\eDocuments folder (if you were an OfficeMate user who upgraded to OfficeMate 9.0 or above).

1. Select the Notes tab.

NOTES

- To view an electronic document, select the document and click **View**.
- To delete an electronic document, select it and then click **Delete**.
- To print a list of the insurance carrier or plan's electronic documents, click **Print List**.

2. Click **Add** to add a new document or double-click an existing document to edit it.

The Insurance EDocuments Information window opens.

3. Select a form from the **Document Type** menu.

NOTE

Press the **F12** key to open a Maintain window and add new items to the Document Type menu.

4. Type or select an expiration date in the **Expires on Date** text box as needed.
5. If you want to add notes to the form, type them in the **Notes** text box.

6. Click **Browse** to navigate to and select an electronic document to link to the insurance carrier or plan and go to step 8.

OR

Click **Scan** to scan documents directly into OfficeMate and save them as an eDocument in the insurance carrier or plan.

NOTES

- Because all documents scanned directly into OfficeMate must be saved as a PDF file, you must have Adobe Reader installed on your computer. Go to www.adobe.com to install Adobe Reader for free.
- Eyefinity does not recommend a specific scanner brand or model; you can use any scanner that can create an electronic document with the OfficeMate eDocuments feature. For more information on scanners, go to <http://www.officemate.net/omkb/article.aspx?id=10958>, or consult your hardware technician.
- Eyefinity does not support your hardware and highly suggests consulting your hardware technician before purchasing a scanner to use with your computer. For installation, support, and troubleshooting issues related to your scanner, contact the scanner's manufacturer.

The screenshot shows the 'Insurance Billing - Initial Setup' window. The 'Insurance Carrier' tab is active, and the 'Select Carrier' dropdown is set to 'Humana Vision Benefits'. The carrier details are filled out, including address, phone numbers, and dates. An 'Insurance EDocuments Information' dialog box is overlaid on top, showing 'Form Type' set to 'Contract' and 'Expires On Date' set to '12/08/2018'. The dialog has 'Scan', 'Browse', and 'View' buttons. The main window has a 'New' button at the bottom left.

7. If you clicked Scan in step 6, follow the instructions below; otherwise, skip to step 8:

- a. Select the following Scan Options on the Scan Document(s) window:

B/W if you want to scan the document in black and white.

Greyscale if you want to scan the document in greyscale.

Color if you want to scan the document in color.

Duplex if you want to scan two sides of a document (and if it is

supported by the scanner).

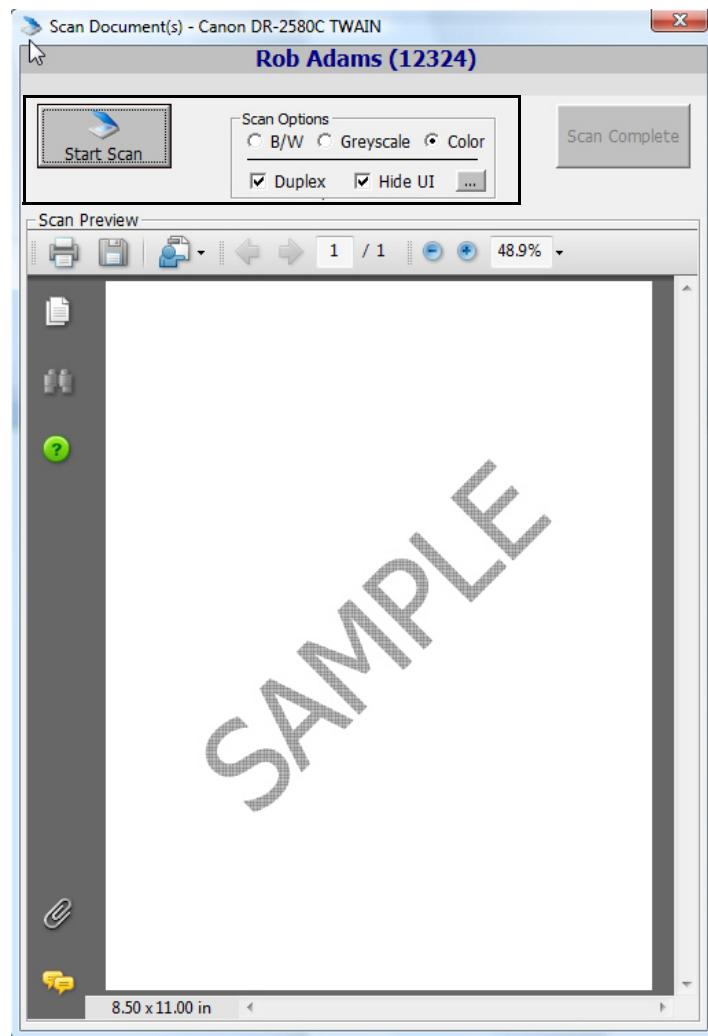
Hide UI if you want to hide the scanner's user interface. If you deselect this check box then the scanner's interface will open with additional scanning options. For information about these additional options, view the scanner's documentation.

- b. Click the ... (ellipsis) button in the Scan Options box to open the Select Source window and select a scanner.

NOTE

If you select a scanner different from the one that is already displayed on the blue title bar in the Scan Document(s) window, the window will close and you will have to reopen it by clicking Scan on the EDocuments Information window.

- c. Click **Start Scan** to scan the document.



- d. Click **Scan Complete** after the document is finished scanning.

NOTE

Do *not* click the Save icon in the Scan Preview section of the Scan Document(s) window to save the document. You *must* click the Scan Complete button to properly save the document.

OfficeMate automatically names the document using the current date and saves it as a PDF file in the OfficeMate\DATA\eDocuments folder (if you are a new user or were an OfficeMate Enterprise user who upgraded to OfficeMate 9.0 or above) or OMATE32\DATA\eDocuments folder (if you were an OfficeMate user who upgraded to OfficeMate 9.0 or above).

8. Click **OK**.

Creating, Modifying, & Deleting Patient Records

3

In this chapter:

- [Creating & Opening Patient Records, 203](#)
- [Recording Patient Information, 207](#)
- [Attaching Electronic Documents to Patient Records, 233](#)
- [Attaching a Photo to Patient Records, 238](#)
- [Printing Patient Labels, 239](#)
- [Viewing All Patient Information, 241](#)
- [Viewing Patient Appointments, 243](#)
- [Viewing Patient Exams, 243](#)
- [Viewing & Recording Patient Referrals to Other Providers, 244](#)
- [Deleting Patient Records, 245](#)
- [Closing Patient Open Charges, 246](#)
- [Printing Patient Welcome Forms, 247](#)

Patient records contain demographic, insurance, marketing, recall, financial, correspondence history, HIPAA, and exam information. The amount of information that you record for each patient depends on your office's policies and procedures.

Creating & Opening Patient Records

This section tells you how to create and open patient records in OfficeMate and includes the following topics:

- [Creating Patient Records, 203](#)
- [Opening Patient Records, 204](#)

Creating Patient Records

1. Open the Add New Patient Record window using one of the following methods:
 - Click the **Patients** icon to open the Find Patient/Guarantor window.
 - Click **Tasks** on the main window toolbar and select **Patients** to open the Find Patient/Guarantor window.

2. Click **New**.

The Add New Patient Record window opens.

3. Follow the instructions in [Recording Patient Information on page 207](#) to record new patient information in the Demographic, Insurance, Marketing, Notes, Recall, Financial Info, Correspondence Hx, and HIPAA tabs. Follow the instructions in [Attaching Electronic Documents to Patient Records on page 233](#) to record information in the eDocuments tab.

Opening Patient Records

1. Open the Patient Demographic window using one of the following methods:
 - Click the **Patients** icon to open the Find Patient/Guarantor window.
 - Click **Tasks** on the main window toolbar and select **Patients** to open the Find Patient/Guarantor window.

2. Enter search information in the **Selection Criteria** text boxes.
3. Select the Include Inactive check box to include inactive patients and guarantors in the search results.
4. Select the **Include Other** check box to include the names of people who are neither patients nor guarantors, but are recorded in the database as other insured parties.
5. Click **F2 Find**.

NOTE

If your database is encrypted, PHI (protected health information) such as patient SSNs, addresses, phone numbers, and chart numbers will be greyed out and not visible when you are searching for patients.

The screenshot shows the 'Find Patient / Guarantor' window. It features a 'Selection Criteria' section with input fields for Last Name, First Name, Nickname, Social Security No, Date Of Birth, and Default Location. There are also fields for Address, City, Home Phone, Patient No, and Chart No. Checkboxes for 'Include inactive' and 'Include Other' are present. A 'F2 Find' button is prominent, along with 'Clear', 'New', 'Select', and 'Cancel' buttons. Below the search criteria is a table with columns: Name, Address / City, Home Phone, SS No, DOB, Patient, HIPAA, and Location. The table contains several rows of data, with some cells greyed out. A 'Patients Found' label is at the bottom left.

Name	Address / City	Home Phone	SS No	DOB	Patient	HIPAA	Location

6. Click on the patient and then click **Select** or double-click on the patient. The Patient Center window opens and displays important patient information, including the patient's ID, date of birth, phone numbers, email address, last exam date, expected referral return date, chart number, next appointment date, default provider, insurance carriers, balance, credit, the average amount spent per visit, and photo/notes (if applicable).

For information on using the Patient Center, watch the "Patient Center" video.

NOTES

- The Average \$ text box displays the average dollar amount of all of the patient's fee slips divided by the number of fee slips. The calculation for the average dollars spent is based on fee slip product fees and does not take into account packages, discounts, amounts billed to patients or insurance carriers, adjustments, and returns.
- To add or update a patient's photo, go to [Attaching a Photo to Patient Records](#) on page 238.
- To hide the patient's photo and notes for privacy reasons, click **Hide Notes/Photo**.
- To open the Scheduler, Patient Ledger, Receipts & Adjustments, and Rx Order window or the ExamWRITER program, click the appropriate button in the middle of the window.
- To view linked family members' Patient Center windows, double-click on the family member on the **Family Members** tab at the bottom of the window.
- To view the patient's appointment history, click the Appointment History tab at the bottom of the window.
-
- To view the patient's diagnosis/problem list, procedures, and medications, click the **Medical History** tab at the bottom of the window.

7. Click **Demographics**.

The screenshot shows the Patient Center window for Patient, Sally. The window is titled "Patient Center" and contains the following information:

Patient, Sally
 141 W Wilshire Ave
 Fullerton, CA 92832

Financial Data:
 Balance: 240.00
 Credit: .00
 Average \$: 120.00

Demographics:
 Patient ID: 17625
 Day phone: (913) 111-2222
 eMail: Sally@patient.com
 Last Exam: 06/17/2011
 Chart No.: 1003750
 Provider: Doctor, Johnny
 Primary Ins.: Vision Service Plan/Vision Service Plan
 Secondary: AARP Health Care Options/AARP Health Care Options

Family Members Table:

Name	Relationship To Insured	DOB	Age	Last Exam
Patient, Sally	Self	9/14/1982	28	6/17/2011

The window also includes buttons for "Update Photo", "Show Notes/Photo", "Demographics", "Schedule", "Fee Slip", "Ledger", "Receipts", "Rx/Orders", "ExamWRITER", and "Exit".

8. Click Orders to view scheduled orders recorded in ExamWRITER, but not yet posted in the Task Manager. For more information about posting scheduling tasks recorded in ExamWRITER in the Task Manager, go to [To post scheduling tasks recorded in ExamWRITER](#) on page 804.

9. Follow the instructions in [Recording Patient Information on page 207](#) to record new patient information in the Demographic, Insurance, Marketing, Notes, Recall, Financial Info, Correspondence Hx, and HIPAA tabs. Follow the instructions in [Attaching Electronic Documents to Patient Records on page 233](#) to record information in the eDocuments tab.

NOTE

Click the arrows in the bottom right corner of the window to move to the next, last, previous, or first patient's record. The records that are displayed are based on the search criteria you entered in the Find Patient/Guarantor window.

Recording Patient Information

This section tells you how to record patient information, including how

- [To record demographic information, 208](#)
- [To record insurance information, 215](#)
- [To record additional insurance claim information, 219](#)
- [To record insurance eligibility and authorizations, 220](#)
- [To record marketing information, 222](#)
- [To record patient notes, 224](#)
- [To record and review recall information, 224](#)
- [To record financial information, 225](#)
- [To view and print correspondence history, 227](#)
- [To record HIPAA Information, 227](#)
- [To select letters to send to a patient, 233](#)

NOTES

- To streamline the process of recording patient information in OfficeMate, add frequently used information to list box selections. For more information on adding list box selections, see [To add list box selections on page 37](#).
- To highlight the patient information fields that are required to be complete in your office and to choose the information to display in the Patient Demographic window title bar, modify your OfficeMate patient preferences. For more information, see [To set up patient preferences on page 61](#).

For information on recording demographic information, watch the "Demographic Tab" video.

► **To record demographic information**

NOTE

If you are an ExamWRITER user, any modifications or additions that you make to patient demographic information in OfficeMate will be reflected in ExamWRITER. Likewise, any modifications or additions that you make to patient demographic information in ExamWRITER will be reflected in OfficeMate.

1. Click the **Demographic** tab on the Patient Demographic window or the **Demographics** button on the Patient Center window.

NOTE

Click the arrows in the bottom right corner of the window to move to the next, last, previous, or first patient's record.

2. To change the patient's guarantor, click the button next to Guarantor and follow the instructions below:

NOTES

- A guarantor is the person who is responsible for paying the patient's account bills.
- If the patient is responsible for paying his or her own account bills, the guarantor is Self.
- Typically, family members have the same guarantor.
- If you link a patient's address to a guarantor and you modify the guarantor's address, the patient's address and all other family members' addresses linked to that guarantor will also be modified.

- a. If the patient's current guarantor is Self, enter search information in the Last Name, First Name, and SS No text boxes and click **F2 Find** to find

and select an existing guarantor or click **New** and go to step b to create a new guarantor for the patient.

Name	Address/City	Home Phone	SS No

- b. If the patient's current guarantor is *not* Self, or if you are creating a new guarantor for the patient, complete the information in the Guarantor Information window or click **F2 Find** to find and select a different guarantor.

Last Name: Patient
 First Name: Michael Initial: R
 Title/Suffix: Mr.
 Nickname: Mike
 Address1: 118 W Wilshire Ave
 Address2:
 City: Fullerton
 State/ZIP: California 92832
 Home Phone: (800) 269-3666
 Daytime Phone:
 Social Security: 333-66-9999 Bad Address
 Employer:
 Salutation: Dear Michael:

Sex: Male Female
 Date of Birth: 01/13/1980

Mailing Options
 Head of Household
 Mailing List

Actions
 Copy Last Name to Patient
 Link Address to Patient
 Unlink as Guarantor
 Add as a New Patient

Linked Patients
 Patient, Sally J
 Patient, William

NOTES

- Select the **Bad Address** check box if the guarantor's address is incorrect and you do not have a correct address on file.
- Select one or more **Mailing Options**. Selecting the **Head of Household** check box designates the guarantor as the person making decisions in the household. Selecting the **Mailing List** check box indicates that the guarantor is on your correspondence mailing list.
- Select one or more of the following **Actions**.
 - Selecting **Copy Last Name to Patient** copies the guarantor's last name to the patient's last name.
 - Selecting **Link Address to Patient** copies the guarantor's address to the patient's address.
 - If applicable, selecting **Unlink as Guarantor** removes the guarantor from the patient's record.
 - If you are going to bill an insurance company for this patient's services or products, select **Add as a New Patient** to add the guarantor as an OfficeMate patient. You must also record the guarantor's information in the Demographic and Insurance tabs in the Patient Demographic window. For more information on recording information in the Demographic and Insurance tabs see [To record demographic information on page 208](#) and [To record insurance information on page 215](#).
- A list of patients who are linked to the guarantor is displayed in the **Linked Patients** box.

3. Select or type the patient's name, address, phone number, email, and default location information in the appropriate yellow highlighted text boxes.

NOTES

- To streamline the process of recording ZIP codes in OfficeMate, add frequently used ZIP codes to the ZIP code shortcut list. For more information on adding ZIP code shortcuts, see [To add ZIP code shortcuts on page 39](#).
- Select the **Texting OK** check box to indicate that the patient is willing and able to receive text messages from your practice on his or her cell phone. If you use the Websystem2 interface, appointment reminders, recall notices, and product-ready notifications are sent to the patient's cell phone. If you are not using the Websystem2 Interface, the Texting OK check box is informational only.
- Click the button next to the patient's email address to open your default email client and send an email message to the patient. You must set up your computer permissions properly in order to successfully send email messages through your email client.

4. Select the **Self** or **Guarantor** radio button to link the patient's address to themselves or the patient's guarantor's address.
5. If the patient's address is incorrect and you do not have a correct address on file for the patient, select the **Bad Address** check box.
6. Select the patient's default location from the **Default Location** drop-down as needed.
7. If the patient was referred to your office by another patient, follow the instructions below; otherwise, go to step 8 if the patient was referred to your office by a professional, or go to step 9 if the patient was not referred by anyone.
 - a. Select the Referred By **Patient** radio button.
 - b. Click the button next to Referred Name to open the Find Patient window.
 - c. Enter search information in the **Selection Criteria** text boxes and click **F2 Find**.
 - d. Click a patient's name and then click **Select**.

8. If the patient was referred to your office by a professional, follow the instructions below; otherwise, go to step 9 if the patient was not referred by anyone.

NOTE

If you select the name of a referring professional, the information from the Referred Name field will *not* automatically populate in box 17 on the CMS 1500 form; however, the information from the Referred Name field will be displayed in the Referrals report and other communications. For more information about recording the referring physician, which will populate in box 17 on the CMS 1500 form, go to [To record additional insurance claim information on page 219](#). For more information about creating the Referrals report, go to [Referrals on page 708](#).

- Select the Referred By **Professional [MU]** radio button.
- Click the button next to Referred Name to open the Find Professional Referral window.
- Click on a name and then click **Select** to select the professional as the patient's referring doctor or go to step d to create or edit a referring professional.

NOTE

If applicable, click **F2 Find** to search for a professional referral.

Name	Address/City	Bus. Phone
Institute, The Eye Surge	234 Lauderdale Drive, Newport Beach	
Scott, M.D., Jason	45698 Jamboree, Newport Beach	949 555 8632

Total Records 2

F2 Find Select Clear Cancel New/Edit

- Click **New/Edit** to open the Maintain Referring Professionals window and add or edit a referring professional.

9. If the patient was not referred to your office by anyone, select the Referred By **None** radio button.
10. Select or type the patient's sex, date of birth, social security number, provider, marital status, employment status, employer, occupation, referral source, and preferred language in the appropriate yellow highlighted text boxes.

NOTES

- If the patient is a dependent student, you must select Full-Time Student from the Emp. Status (Box 8) drop-down menu.
- The default selection for the Marital Status (Box 8) and Emp. Status (Box 8) drop-down menus is Unknown. For information on modifying the default selection, go to [To modify list box selections on page 38](#).

11. If the patient is not an active patient, deselect the **Active** check box.
12. Type the patient's salutation, chart number, and medical alerts in the appropriate text boxes.
13. Select the patient's preferred language from the **Preferred Language** drop-down menu.

NOTE

To add languages to the Preferred Language drop-down menu, open the Customization window and click the **Preferred Languages** tab. For more information, go to [To select preferred languages on page 44](#).

14. Click in the **Race** field. Select the check boxes for each racial group with which the patient identifies. Press **Tab** or click in any other field to exit the race selection.
15. Select the patient's ethnicity from the **Ethnicity** drop-down menu.
16. Select the patient's communication preference (secure messaging, email, mail, telephone, etc.) from the **Communication Pref.** drop-down menu.

NOTE

Press the **F12** key when your cursor is in the Communication Pref. drop-down menu to open a Maintain window and add new selections to the drop-down menu.

17. If the patient has a paper chart, type or select the patient's last exam date in the **Last Exam** date field.

NOTE

The Last Exam date field is automatically updated when the following actions occur:

- You record a fee slip that includes a service that has the Update Last Exam check box selected in the Products window.
- You close or finalize an exam in ExamWRITER that includes a service that has the Update Last Exam check box selected in the Products window.
- You record an Rx order in which you have recorded an Exam Date.

You cannot manually update the Last Exam date field to a past date if a more current exam date has been recorded on an Rx order or through a service on a fee slip.

The screenshot shows a patient information form with the following data:

- Guarantor:** Self
- Sex:** Male
- Last Name (Box 2):** Patient
- Date of Birth (Box 3):** 09/14/1982
- Age:** 28
- First Name (Box 2):** Sally
- Initial:** [Empty]
- Social Security:** 111-22-3333
- Active:**
- Title:** [Empty]
- Suffix:** [Empty]
- Provider:** Doctor, Johnny
- Marital Status (Box 8):** Divorced
- Nickname:** [Empty]
- Link Addr To:** Self
- Emp. Status (Box 8):** Employed Full-Time
- Address (Box 5):** 141 W Wilshire Ave
- Employer:** [Empty]
- City (Box 5):** Fullerton
- Occupation:** Carpenter
- State/ZIP (Box 5):** California 92832
- Salutation:** Dear Sally:
- Home Ph # (Box 5):** (949) 390-8320
- Chart No:** 1003750
- Daytime Phone:** (913) 111-2222
- Source:** Patient Referral
- Cell Phone No:** [Empty]
- Alert:** [Empty]
- Pager Number:** [Empty]
- Preferred Language:** English
- Fax Number:** [Empty]
- Race:** Asian
- E-Mail Address:** sally@patient.com
- Ethnicity:** Not Hispanic or Latino
- Default Location:** Irvine Store
- Communication Pref.:** Postal
- Referred By:** Professional [MU]
- Last Exam:** 06/17/2011
- Referred Name:** Keith Warren

18. Click **OK** to close the Patient Demographic window or click any tab to continue adding or modifying patient information.

NOTES

If a **List of Duplicate or Similar patient(s)** window opens, you have entered a patient name that is similar or identical to a name already stored in OfficeMate. Complete one of the following tasks to close the window:

- Click **Print** to print the list of patients.
- Click **Save as New Patient** to save the patient that you are entering into OfficeMate as a new patient.
- Click on a patient's name and then click **Update Patient** to update the patient that you are entering into OfficeMate with the selected duplicate patient's information.
- Click **Cancel Save** to cancel entering and saving the patient's information and close the List of Duplicate or Similar patient(s) and Patient Demographic window.

Name	Address/City	Home Phone	SS No
Davis, Steven	343 Haverford Ave., Laguna Nigue	(949) 555-7463	343 34 3579

Buttons: Print, Save as New Patient, Update Patient, Cancel Save

► **To record insurance information**

For information on recording insurance information, watch the “[Insurance Tab](#)” video.

NOTES

- You must record a patient's insurance information before you bill the insurance company for any products or services that the patient purchased.
- You can record up to 99 insurance carriers for each patient, but you should *not* change existing insurance carriers. Changing existing insurance carriers will affect prior insurance claims.

1. Open the Patient Demographic window. For more information about opening the Patient Demographic window, go to [Opening Patient Records on page 204](#).
2. Ensure that you have recorded the patient's name, address, home phone number, sex, date of birth, social security number, marital status, and employment status in the Demographic tab.

3. Click the **Insurance** tab in the Patient Demographic window.

NOTE Do not delete or modify an insurance carrier if you have already billed it for any patient charges. Deleting or modifying an insurance carrier that you have already billed will affect prior insurance claims. Instead, select the **Deactivate** check box to indicate that the patient is no longer subscribed to the insurance plan.

4. If the patient has more than one insurance carrier, you can rearrange the carries as needed by selecting a carrier from the list and clicking the up and down arrows as needed.

NOTE Arrange the patient's insurance plans in the order in which they should be billed. The primary insurance should be in the first row, the secondary insurance should be in the second row, etc.

The screenshot shows the 'Insurance' tab in a patient demographic window. At the top, there are buttons for 'New Ins.', 'Delete', 'Ins. Glance', 'Notes', 'Add! Info', 'CMS Form', 'UB04 Form', and a 'Deactivate' checkbox. Below these is a table with columns: Insurance Name, Insurance ID No, Address, Plan Name, Inactive, and Notes. Two rows are visible: 1. Vision Service Plan, P.O. Box 997100, Sacramento, Vision Service Plan, [checkbox], [checkbox]; 2. AARP Health Care Options, United HealthCare Claim Division, AARP Health Care Options, [checkbox], [checkbox]. Below the table are two main sections. The left section contains dropdowns for 'Insurance Name' (Vision Service Plan), 'Insured ID (Box 1a)' (111223333), 'Plan Name (Box 11c)' (Vision Service Plan), 'Policy Group (Box 11)', 'Relationship to Insured (Box 6)' (Self), and 'Type' (Vision/Medical). It also has fields for 'Signature On File', 'Date' (06/16/2011), 'Signature Source' (Both CMS-1500 and Auth. f), and 'Release Information?' (06/16/2011). The right section is for 'Insured Party' and includes fields for 'Last Name' (Patient), 'First Name' (Sally), 'Address1 (Box 7)' (141 W Wilshire Ave), 'Address2 (Box 7)', 'City (Box 7)' (Fullerton), 'State/ZIP (Box 7)' (California, 92832), 'Home Ph # (Box 7)' (949) 390-8320, 'Employer (Box 11b)', 'Sex (Box 11a)' (Male/Female/Bad Address), and 'DOB (Box 11a)' (09/14/1982). A 'Linked Patients' section is at the bottom right. A vertical toolbar on the far right contains buttons: Patient # 17625, HIPAA, OK, Cancel, New, F2 Find, Letters, Ledger, Label, Glance, ExamWRITER, Find Appts, Open Charges, and Orders.

5. Click **New Ins** to add a new insurance plan.

OR

To modify an insurance plan, select the insurance plan, select the **Deactivate** check box, and click **New** to add the plan as a new plan.

NOTE Do not delete or modify an insurance carrier if you have already billed it for any patient charges.

6. Select the patient's insurance carrier from the **Insurance Name** drop-down menu.

NOTE

If you created a fee slip for the patient using the insurance name selected in the Insurance Name drop-down menu, you can click **Claims** to open, update, refresh, and print the CMS 1500 insurance form. For more information on modifying the CMS 1500 form, go to [Recording Additional Information on the CMS 1500 Form & ANSI File on page 462](#).

7. Type the insured ID number in the **Insured ID (Box 1a)** text box or select the **Patient SSN** check box to use the patient's social security number as entered on the Demographic tab.
8. Select the insurance plan's name from the **Plan Name (Box 11c)** drop-down menu.
9. Type the policy group number in the **Policy Group (Box 11a)** text box as needed.
10. Select the patient's relationship to the insured party from the **Relationship to Insured (Box 6)** drop-down menu.
11. Select either the **Vision** or **Medical** radio button to indicate the type of insurance plan being used.
12. If the patient has a signature on file with your office, follow the instructions below; otherwise, go to step 13.
 - a. Select the **Signature On File** check box.
 - b. Select the date the signature was filed from the **Date** calendar.
 - c. Select the signature source from the **Signature Source** drop-down menu.
13. If the patient has authorized the release of his or her medical information to the insurance company so that the insurance company can process the patient's claims, select the **Release Information** check box and then select

the date the patient released the information from the date calendar next to the check box.

14. Enter the Insured Party information.
 - If you selected Self from the Relationship to Insured drop-down menu, the patient's information is automatically populated.
 - If the guarantor assigned to the patient on the Demographic tab is the insured party, select the **Guarantor** check box, and the guarantor's information is automatically populated.
 - If the insured party is neither the patient nor the patient's guarantor, click **F2 Find**. If the insured party is another patient, select the **All Patients** check box. Enter search criteria and click **F2 Find**. If the insured party cannot be found in the database, click **New** to create a new insured party.
15. Perform the following only as needed:
 - To view the most recent CMS 1500 claim form for this patient and the selected insurance plan, click **CMS Form**.
 - To view the most recent UB-04 claim form for this patient and the selected insurance plan, click **UB04 Form**.
 - To view or type notes about the selected insurance carrier, click **Notes**. If a note exists for an insurance carrier, the Notes column in the table at the top of the window will have a check mark next to the insurance name.
 - To view and print a summary of the insurance plan, click **Ins. Glance** as needed.

The Insurance Glance window opens and displays a summary of the insurance plan and any attached documents. If there is no information to display, no glance information was entered in the Insurance Billing Initial Setup window. For information about adding insurance glance information, go to [To add & modify at-a-glance information on page 166](#).

For information on recording detailed insurance information, watch the "Insurance Tab" video.

16. Click **OK** to close the Patient Demographic window or follow the instructions in the sections below to continue adding or modifying patient information.

► **To record additional insurance claim information**

1. Open the Patient Demographic window. For more information about opening the Patient Demographic window, go to [Opening Patient Records on page 204](#).
2. Ensure that you have recorded the patient's name, address, home phone number, sex, date of birth, social security number, marital status, and employment status in the Demographic tab.
3. Click the **Insurance** tab in the Patient Demographic window.
4. Select an insurance plan from the list or add a new insurance plan. For more information on adding insurance plan, go to [To record insurance information on page 215](#).
5. Click **Add'l Info** to add additional insurance information.
The **Additional Claim Information** window opens.
6. Select a referring physician by clicking **Not Assigned** as needed.

NOTES

- The referring physician you select is only used for this patient and this insurance plan. To record a referring professional to whom you want to send referral letters and other communications, go to [To record demographic information on page 208](#).
- If you select the name of a referring physician and you select the **Yes** radio button next to the Box 17 Auto Populate preference and the Referring Dr. radio button next to the Box 17 Populate preference in the Insurance Billing Initial Setup window, the referring physician will automatically populate box 17 on the CMS 1500 form. To set up your insurance carrier preferences, go to [To add & modify insurance carriers on page 150](#).

7. To clear the referring physician, click **Clear Referring Physician** as needed.
8. If the patient is replacing an item that was lost or stolen, perform the following steps:
 - a. Select a product type from the **Replacement Category** drop-down menus as needed.
 - b. Select a reason from the **Reason for replacement** drop-down menus as needed.
9. If the patient is coming in for surgery, perform the following steps:
 - a. Select the date or dates of surgery from the **Box 19** drop-down menus as needed.
 - b. Select the **Assumed Date** check box and select a date from the drop-down menu.
 - c. Select the **Relinquished Date** check box and select a date from the drop-down menu.

10. If the patient is receiving services at an alternative location, complete the CMS 1500 Box 32 information as follows:
 - a. Select a location from the **Facility Name** drop-down menu.
 - b. Enter the facility's address in the appropriate fields if the information did not automatically populate.
 - c. Select a qualifier from the **Qualifier (Box 32b)** drop-down menu.
 - d. Type the facility ID in the **Facility ID (Box 32b)** field.

The screenshot shows a software window titled "Carrier: Vision Service Plan Plan: Vision Service Plan Patient: Sally Patient". The window contains several form sections:

- Referring Physician (Box 17):** A text field containing "Not Assigned".
- Replacement Information:** A section with three rows of "Replacement Category" and "Reason for replacement" dropdown menus. The first row has "Spectacle Lenses" and "20 Degree or .5 Diop Sp/Cyl Change".
- Dates of Surgery:** A section with "Box 19" dropdown, "Assumed and Relinquished Care Dates" checkboxes, and date input fields.
- CMS Box 32:** A section with a checkbox "Replace Box 32 with this Name & Location Info" and several input fields: "Facility Name" (dropdown), "Address 1", "Address 2", "City" (dropdown), "State/Zip" (dropdowns), "NPI#" (text), "Qualifier (Box 32b)" (dropdown), and "Facility ID (Box 32b)" (text).

At the bottom of the window are "Save" and "Exit" buttons.

11. Click **Save** to save the changes.
12. Click **Exit** to close the Additional Claim Information window.

► To record insurance eligibility and authorizations

NOTE

If the patient's insurance is VSP, go to [To obtain VSP member eligibility and authorization information on page 535](#).

1. Open the Patient Demographic window. For more information about opening the Patient Demographic window, go to [Opening Patient Records on page 204](#).
2. Ensure that you have recorded the patient's name, address, home phone number, sex, date of birth, social security number, marital status, and employment status in the Demographic tab.
3. Click the **Insurance** tab in the Patient Demographic window.
4. Select an insurance plan from the list or add a new insurance plan. For more information on adding insurance plan, go to [To record insurance information on page 215](#).
5. Click **Eligibility/Authorization** to record or view eligibility and authorization information.

The **Eligibility/Authorization** window opens.

- Click **New** to add a new authorization, eligibility, and copayment information.
OR

To add only notes about the patient's eligibility, type the eligibility or authorization notes in the **Comments** text box and skip to step 15.

NOTE

If you add only eligibility or authorization notes, the Eligibility/Authorization window will open when the fee slip is created and the patient's insurance is selected. Copayment information will need to be entered at that time.

- Make selections from the **Checked By** and **Effective Date** drop-down menus if the information did not automatically populate.
- Type comments in the **Comments** field as needed.
- Type the authorization code received from the insurance plan in the Authorization **ID** field.
- Type the total amount authorized in the **Total Remaining Allotment** field.
- Select the check box for each of the product types authorized.
- Select the date on which the authorization expires from the **Expires On** drop-down menus as needed.
- Type the amount the patient is required to pay in the **CoPay** fields as needed.
- If the patient is limited in the number of units of a product, type the number in the **Qty** fields as needed.

Authorization ID	Issued Date	Benefit	Effective Date	Expiration Date	Link
123456	4/19/2011	(Accessories) Contact Lenses	04/19/2011	06/30/2011	

Checked By: Doctor, Johnny Effective Date: 04/19/2011

Comments: _____

Authorization ID: 123456 Location: Irvine Eye

Total Remaining Allotment: \$0.00

	Expires On	Last Used	CoPay	\$ Zero	Qty
Accessories <input checked="" type="checkbox"/>	06/30/2011		\$20.00	<input type="checkbox"/>	2
Contact Lenses <input checked="" type="checkbox"/>	06/30/2011		\$20.00	<input type="checkbox"/>	6
Frames <input type="checkbox"/>			\$0.00	<input type="checkbox"/>	
Lens Treatments <input type="checkbox"/>			\$0.00	<input type="checkbox"/>	
Ophthalmic Lenses <input type="checkbox"/>			\$0.00	<input type="checkbox"/>	
Other <input type="checkbox"/>			\$0.00	<input type="checkbox"/>	
Plano Sunglasses <input type="checkbox"/>			\$0.00	<input type="checkbox"/>	
Ready Readers <input type="checkbox"/>			\$0.00	<input type="checkbox"/>	
Services <input type="checkbox"/>			\$0.00	<input type="checkbox"/>	

- Click **Save** to save your changes.
- Click **Exit** to close the **Eligibility/Authorization** window.

► To record marketing information

For information on recording marketing information, watch the "Marketing & Notes, Tabs" video.

OfficeMate allows you to record patient marketing information and send optometric practice marketing materials to patients who have similar characteristics. Follow the instructions below to record marketing information for your patients.

NOTE To maintain marketing groups and categories in OfficeMate, see [To maintain marketing groups, categories, & costs on page 49](#).

1. Click the **Marketing** tab in the Patient Demographic window.
2. Select marketing groups and categories from the Marketing/Lifestyle Data box's **Group** and **Category** column drop-down menus.

NOTE To delete a group or category, select it and click **Delete Line**.

3. Select one or more of the following **Mailing Information** options.
 - Select the **Mailing List** check box to indicate that the patient is on your correspondence mailing list.
 - Select the **Head of Household** check box to designate the patient as the person making decisions in the household.
4. Select an insurance type from the **Insurance Type** drop-down menu.
5. If the patient is deceased, select the **Deceased** check box and type or select the patient's date of death.
6. If the patient is retired, select the **Retired** check box and type or select the patient's retirement date.
7. If the patient's spouse is retired, select the **Spouse Retired** check box and type or select the spouse's retirement date.

The screenshot shows the OfficeMate Patient Demographic window for Roger Wineinger, D.D. The Marketing tab is active. The Marketing/Lifestyle Data section has a table with columns for Group and Category. The Mailing Information section has checkboxes for Mailing List and Head of Household. The Other section has dropdown menus for Insurance Type, Race, Ethnicity, and Communication Preference. The Service Agreements & Lens Duplication Fees section has a table with columns for Plan Name, Eff. Date, Months, Exp. Date, Contact Lens Name, F, With, and W/O.

Group	Category
Diagnosis	Diabetic
Hobbies	Needlepoint

Plan Name	Eff. Date	Months	Exp. Date	Contact Lens Name	F	With	W/O
					OD		
					OS		
					OD		
					OS		

8. Follow the instructions below to record marketing service agreements and contact lens duplication fees in the **Service Agreements & Lens Duplication Fees** table:

NOTES

- To set up your service agreements, see [To create new service agreement renewal plans on page 45](#).
- To modify your service agreements, see [To modify service agreement renewal plans on page 46](#).
- To identify contact lens duplication fees, see [To identify contact lens duplication fees on page 48](#).

- Select a service agreement from the **Plan Name** drop-down menu.
- Type the date the service agreement becomes effective in the **Eff. Date** column or double-click your cursor in the Eff. Date column to open and select a date from a calendar.
- Type or select the number of months for each renewal year in the **Months** column.
- Type the date the service agreement expires in the **Exp. Date** column or double-click your cursor in the Exp. Date column to open and select a date from a calendar.
- Select a contact lens to duplicate in the **Contact Lens Name** drop-down menu.
- Click your cursor in the **With** and **W/O** columns to automatically populate them with the information that you set up when you customized your OfficeMate service agreements.

NOTE

To delete a service agreement, select the plan name and click **Delete Line**.

Patient: atnJe aaasmP 43 (949) 112-4845 PPO [NOTES] Roger Wineinger, O.D. Balance: \$0.00

Demographic | Insurance | Marketing | Notes | Recall | Financial Info | Correspondence Hx | HIPAA | gDocuments | Patient Exams

Marketing / Lifestyle Data

Group	Category
Diagnosis	Diabetic
Hobbies	Needlepoint

Delete Line

Mailing Information

Mailing List

Head of Household

Other

Insurance Type: PPO

Race: Asian

Ethnicity: Hispanic or Latino

Communication Preference: Email

Service Agreements & Lens Duplication Fees

Plan Name	Eff. Date	Months	Exp. Date	Contact Lens Name	F	With	W/O
Disposable Lens Plan	09/09/2010	6	03/09/2011	1-92310	OD	20.00	35.00
					OS		
					OD		
					OS		

Delete Plan

Patient # 13634

HIPAA

OK

Cancel

New

F2 Find

Letters

Ledger

Label

Glance

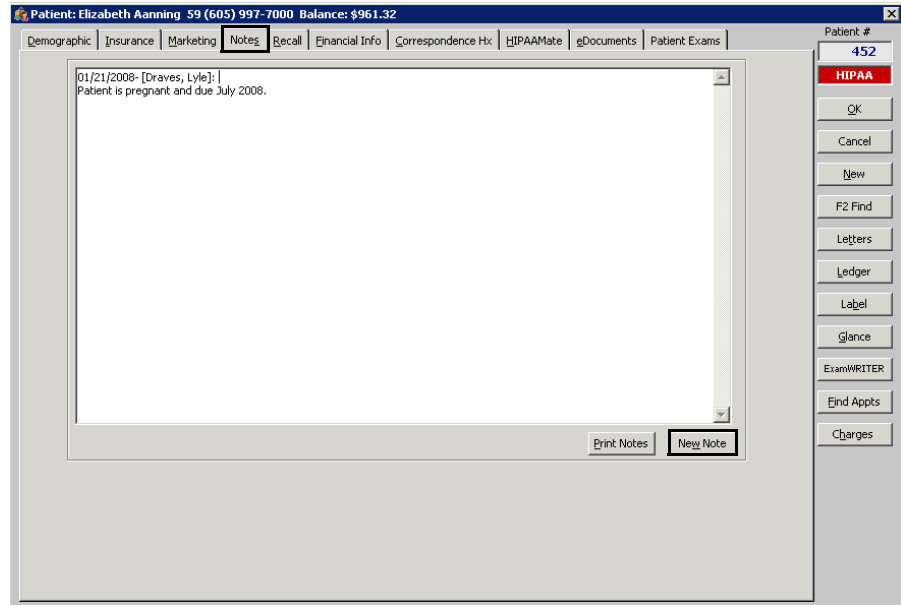
Find Appts

3D-Eye Home

For information on recording notes, watch the “Marketing & Notes Tabs” video.

► **To record patient notes**

1. Click the **Notes** tab in the Patient Demographic window.
2. Click **New Note** to type a new patient note or place your cursor in a previous note to edit or delete it.



NOTE To print notes, click **Print Notes**.

► **To record and review recall information**

You can assign up to three recall schedules to a patient in the Patient Demographic window.

1. Click the **Recall** tab in the Patient Demographic window.

NOTE You can view the recall history for the patient in the **Recall History** box.

2. Select recall types from the **Recall Type** drop-down menus.
3. To change the recall date, type or select the number of months until the next recall in the **Months to Recall** text box or type or select a recall date in the **Next Recall** text box.

NOTE If the patient has an insurance plan with an eligibility period, the number of eligible months between exams will appear in the **Eligibility (months)** text box after you select a recall type.

For information on recording recall information, watch the “Recall Tab” video.

- Select the location to which you are recalling the patient from the **Location** drop-down menu.

Recall For Martha Darren

Recall Type	Months to Recall	Next Recall	Eligibility (months)	Location
12 Month Adult	12	02/13/2008		Foothill Store
CL Recheck 6 Months	6	08/13/2007		Foothill Store
	0			

Recall History

Print Date	Recall Type	Document Printed	Notice #	Location #

► To record financial information

NOTE

After you indicate whether or not you have verified that the patient's identity matches the types of identification listed on the EDocuments Information, Fee Slip, or Receipts & Adjustments window, the verification information appears on the Financial Info tab on the Patient Demographic window. The current date is populated in the Last Checked field and the person who recorded the verification of information is populated in the Recorded By field. For more information on verifying the patient's identity in the EDocuments Information window, go to [Attaching Electronic Documents to Patient Records on page 233](#). For more information on verifying the patient's identity in the Fee Slip window, go to [To record payments on page 161](#). For more information on verifying the patient's identity in the Receipts & Adjustments window, go to [Applying Payments to Patient Receivables on page 354](#).

For information on recording financial information, watch the "Financial Info & Correspondence Hx Tabs" video.

- Click the **Financial** tab in the Patient Demographic window.
- Select the patient's fee classification from the **Patient Fee Type** drop-down menu.
- Select the **Send Statement** check box if you want to send financial statements to the patient.
- Select the **Credit Limit** check box if the patient has a limit on the balance that they can owe you. Type or select the amount that you will risk on their account in the **Amount** text box.
- Select the **Cash Only** check box if you only accept cash payments from this patient.

6. Select the **Send to Collection** check box if you have sent the patient's account to your collection agency.
7. Select the **Apply Finance Charge** check box to charge the patient a percentage of their overdue balance when you send them a financial statement.
8. Select the **Apply Late Charge** check box to add an additional amount to the patient's statements with outstanding balances.

9. Type and select the patient driver's license number, expiration date, and state in the **Driver's License** box.
10. Click **Credit Card** and enter the patient's credit card number, cardholder name, credit card type, and expiration date in the **Credit Card Information** box.
11. Select the Possible Identity Theft check box and click Save if you have received a notification that the patient's identity may have been stolen.
A red "RFR" box appears in the Patient Center, Fee Slip, Receipts & Adjustments, and Patient Demographic (Financial Info tab) window to quickly indicate to you the identity theft status of the patient's security and identity information.
12. To add notes about the patient's security and identity information, click New Notes to date and time stamp the note, type text in the **Notes** text box, and click Save.

For information on recording patient identity and security information, watch the "[Red Flags Rule Use](#)" video.

NOTE

Click Print Notes to print the notes about the patient's security and identity information.

For information on viewing and printing correspondence history information, watch the "Financial Info & Correspondence Hx Tabs" video.

► To view and print correspondence history

1. Click the **Correspondence Hx** tab in the Patient Demographic window.
2. Select the correspondence history type that you want to view from the **Correspondence Type** drop-down menu.
3. Type or select a date range in the **From Date** and **To Date** text boxes.
4. Click **Display**.

Patient: Jennifer Underwood 44 [ALERT] [NOTES] Balance: \$498.99 Credit: \$0.00

Demographic | Insurance | Marketing | Notes | Recall | Financial Info | **Correspondence Hx** | HIPAA | eDocuments | Patient Exams

Correspondence Type: All From Date: To Date:

Date	Document Type	Document Printed / Viewed	Location	Vendor
07/27/2011	Monthly Statement	Monthly Statement	HO-OfficeMate Software So	
02/13/2009	Monthly Statement	Monthly Statement	OfficeMate Software Solut	
02/13/2009	CMS Printing	Printed HCFAs For Eye Care Plan Of Amer	OfficeMate Software Solut	
02/13/2009	CMS Printing	Printed HCFAs For Medical Eye Services	OfficeMate Software Solut	
02/05/2009	Monthly Statement	Monthly Statement	OfficeMate Software Solut	
01/16/2009	Monthly Statement	Monthly Statement	OfficeMate Software Solut	
01/02/2009	Monthly Statement	Monthly Statement	OfficeMate Software Solut	
12/10/2008	Spectacle Rx (EMR)	Exam #111 Final, OM Lab #49	OfficeMate Software Solut	
11/10/2008	CMS Printing	Printed HCFAs For Medical Eye Services	OfficeMate Software Solut	
01/26/2006	Monthly Statement	Monthly Statement	OfficeMate Software Solut	

Total Correspondence: 32

Display Print

Patient # 5
HIPAA
OK
Cancel
New
F2 Find
Letters
Ledger
Label
Glance
Find Appts
Open Charges

The correspondence history appears in the **Correspondence History** box.

NOTE

If you are an ECR Vault User, the ECR Retrieve window opens and displays the correspondence.

5. Click **Print** to print the patient's correspondence history.

► To record HIPAA Information

Record HIPAA information to help your office comply with HIPAA regulations.

1. Click the **HIPAA** tab in the Patient Demographic window.
2. Select the **Read and Understand Notice** check box if the patient has read and understood your office's privacy practices.

The color-coded HIPAA box on the right side of the Patient Demographic window changes from red to green. The Date Recorded and the Recorded By user appears.

3. Select the **Modified Form on File** check box if you updated a paper HIPAA file for the patient.

For information on recording HIPAA information, watch the "HIPAA & eDocuments Tabs (including scanning)" video.

4. To record patient privacy, consent, and authorization forms, follow the instructions below:

NOTES

- To modify existing patient privacy, consent, or authorization forms, double-click the form, type your **User ID** and **Password** in the Access Secured Function window, and click **OK** (if you do not already have access to this area). You must be a HIPAA Privacy Officer to modify forms. For more information on setting up HIPAA Privacy Officers in OfficeMate, see [To modify or add provider information on page 51](#).
- To view a Patient Privacy, Consent, or authorization form, select the form and click **View**.
- To delete patient privacy, consent, or authorization forms, select the form, click **Delete**, type your **User ID** and **Password** in the Access Secured Function window, and click **OK** (if you do not already have access to this area). You must be a HIPAA Privacy Officer to delete forms. For more information on setting up HIPAA Privacy Officers in OfficeMate, see [To modify or add provider information on page 51](#).
- To print a list of the patient's privacy, consent, and authorization forms, click **Print List**.

- Click **Add** in the Patient Privacy, Consent and Authorization Forms box to open the **HIPAA Form Information** window.
- Select a form from the **Document Type** menu.
- Type or select an expiration date in the **Expires on Date** text box.

- If you want to add notes to the form, type them in the **Notes** text box.
- Click **Browse** to navigate to and select an electronic document to link to the patient's privacy, consent, and authorization forms or click **Scan** to

scan documents directly into OfficeMate and save them as an eDocument in the patient's record.

NOTES

- Because all documents scanned directly into OfficeMate must be saved as a PDF file, you must have Adobe Reader installed on your computer. Go to www.adobe.com to install Adobe Reader for free.
- Eyefinity does not recommend a specific scanner brand or model; you can use any scanner that can create an electronic document with the OfficeMate eDocuments feature. For more information on scanners, go to www.officemate.net/omkb/article.aspx?id=10958, or consult your hardware technician.
- Eyefinity does not support your hardware and highly suggests consulting your hardware technician before purchasing a scanner to use with your computer. For installation, support, and troubleshooting issues related to your scanner, contact the scanner's manufacturer.

5. If you clicked Scan in step 4 step e, follow the instructions below; otherwise, skip to step 6:

a. Select the following Scan Options on the Scan Document(s) window:

B/W if you want to scan the document in black and white.

Greyscale if you want to scan the document in greyscale.

Color if you want to scan the document in color.

Duplex if you want to scan two sides of a document (and if it is supported by the scanner).

Hide UI if you want to hide the scanner's user interface. If you deselect this check box then the scanner's interface will open with additional

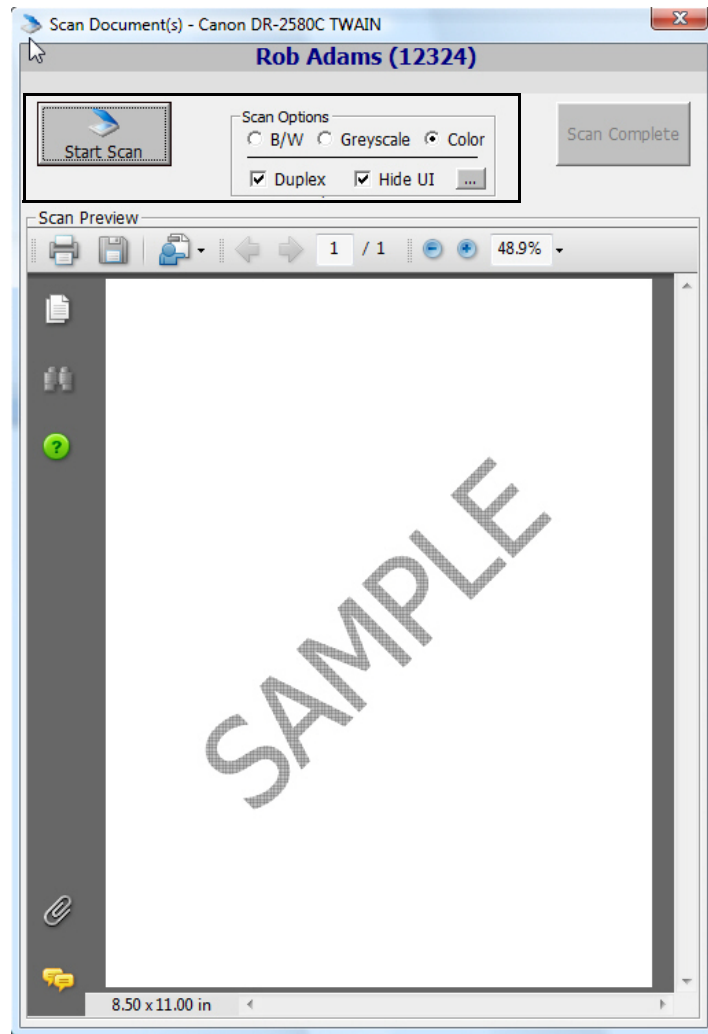
scanning options. For information about these additional options, view the scanner's documentation.

- b. Click the ... (ellipsis) button in the Scan Options box to open the Select Source window and select a scanner.

NOTE

If you select a scanner different from the one that is already displayed on the blue title bar in the Scan Document(s) window, the window will close and you will have to reopen it by clicking Scan on the HIPAA Form Information window.

- c. Click **Start Scan** to scan the document.



- d. Click **Scan Complete** after the document is finished scanning.

NOTE

Do *not* click the Save icon in the Scan Preview section of the Scan Document(s) window to save the document. You *must* click the Scan Complete button to properly save the document.

OfficeMate automatically names the document using the current date and saves it as a PDF file in the OfficeMate\DATA\eDocuments folder (if you are

a new user or were an OfficeMate Enterprise user who upgraded to OfficeMate 9.0 or above) or OMATE32\DATA\eDocuments folder (if you were an OfficeMate user who upgraded to OfficeMate 9.0 or above).

e. Click **OK** to close the HIPAA Form Information window.

Patient: John Patient 30 (949) 594-5000 Minnie Mouse 333-44-5555 Balance: \$0.00

Demographic | Insurance | Marketing | Notes | Recall | Financial Info | Correspondence Hx | HIPAA | eDocuments | Patient Exams

Notice of Privacy Practices
 Read and Understood Notice Date Recorded: 03/05/2010 Recorded By: O, Michael Modified Form on File
 View Print List Add Delete

Date	Entered By	Type	Notes	Expires On	Link
03/05/2010	O Michael	Privacy			

Patient Privacy, Consent and Authorization Forms
 View Print List Add Delete

Date	Entered by	Reason	Recipient	PHI Disclosed	Link

Patient Privacy and Security Notes
 Print Notes New Notes

Patient # 21093
 HIPAA
 OK
 Cancel
 New
 F2 Find
 Letters
 Ledger
 Label
 Glance
 ExamWRITER
 Find Appts

6. To record patient PHI disclosures, follow the instructions below:

NOTES

- To modify existing patient PHI disclosures, double-click the form.
- To delete patient PHI disclosures, select the form and then click **Delete**.
- To view a Patient PHI Disclosure, select the form and click **View**.
- To print a list of the patient's PHI disclosures, click **Print List**.

- Click **Add** in the Patient PHI Disclosures box to open the **Patient PHI Disclosure** window opens.
- Type a reason for the disclosure in the **Reason** text box.
- Type the name of the recipient in the **Recipient** text box.

- Type information on the disclosed PHI in the **PHI Disclosed** text box.
- Click **Browse** to navigate to and select an electronic document to link to the patient's PHI disclosure.
- Click **OK** to close the Patient PHI Disclosure window.

Date	Entered By	Type	Notes	Expires On	Link
03/05/2010	O Michael	Privacy			<input checked="" type="checkbox"/>

Date	Entered by	Reason	Recipient	PHI Disclosed	Link
03/05/2010	O Michael	Surgery	Hospital		<input checked="" type="checkbox"/>

- Click **New Notes** to type new notes in the Patient Privacy and Security Notes box or place your cursor in a previous note to edit it.

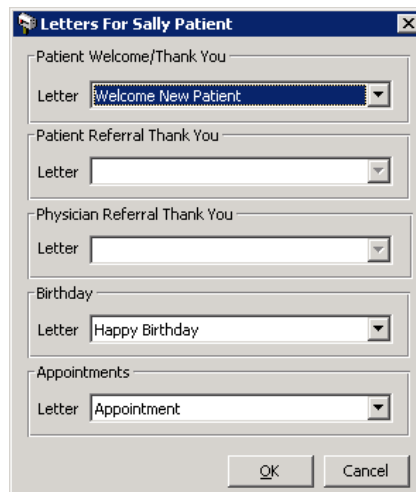
NOTE To print the Patient Privacy and Security Notes, click **Print Notes**.

► **To select letters to send to a patient**

Follow the instructions below to select welcome, thank you, birthday, and appointment letters to send to a patient.

NOTE Before you select letters to send to a patient, ensure that you have set up your patient letter preferences. To set up your preferences, see [To set up patient preferences on page 61](#).

- Click **Letters** on the Patient Demographic window.
The **Letters** window opens.
- Select letters from the Patient Welcome/Thank You, Referral Thank You, Birthday, and Appointments Letter drop-down menus.



- Click **OK**.

Attaching Electronic Documents to Patient Records

Follow the instructions below to store and organize links to electronic documents in OfficeMate. If you are scanning documents and saving them on your computer so that you can link them to patients' OfficeMate records, select a standard naming convention (i.e., patient name or number) to use when naming the documents and save the documents in your OfficeMate\DATA\Documents folder (if you are a new user or were an OfficeMate Enterprise user who upgraded to

OfficeMate 9.0 or above) or OMATE32\DATA\eDocuments folder (if you were an OfficeMate user who upgraded to OfficeMate 9.0 or above).

For information on using the eDocuments tab, watch the "HIPAA & eDocuments Tabs (including scanning)" video.

NOTES

The following information pertains to ECR Vault users:

- To scan documents, open the Patient Demographic or Patient Center window and click **ECR Scan** (or press **F9**) to open the ECR Capture window. For more information about scanning documents, refer to the *ECR Vault User's Guide*.
- To search for and view documents, open the Patient Demographic or Patient Center window and click **ECR Retrieve** (or press **F10**) to open the ECR Vault Client window. For more information about searching for and viewing documents, refer to the *ECR Vault User's Guide*.
- To locate the *ECR Vault User's Guide*, click **Start**, select **Programs**, select, **Comsquared**, select **ECR Vault**, and select **ECR Vault User Guide.pdf**.

For more information on using your scanner to scan documents into your computer, watch the manual that came with your scanner and the "HIPAA & eDocuments Tabs (including scanning)" video.

1. Click the **eDocuments** tab in the Patient Demographic window.

NOTES

- To view an electronic document, select the document and click **View**.
- To delete an electronic document, select it and then click **Delete**.
- To print a list of the patient's electronic documents, click **Print List**.

2. Click **Add** to add a new document or double-click an existing document to edit it.

The **EDocuments Information** window opens.

3. Select a form from the **Document Type** menu.

NOTE

Press the **F12** key to open a **Maintain** window and add new items to the Document Type menu.

4. Type or select an expiration date in the **Expires on Date** text box.
5. If you want to add notes to the form, type them in the **Notes** text box.
6. If you have activated the Safeguard - Red Flags Rule feature, select the appropriate Credit Card, Driver's License/Photo ID, and Insurance Card check boxes to indicate whether or not you have verified that the patient's identity matches the types of identification listed.

NOTES

- To activate the Safeguard - Red Flags Rule feature, go to [To set up financial preferences on page 62](#).
- If you have received a notification that the patient's identity may have been stolen, go to [To record financial information on page 225](#) to record the notification.

For information on recording patient identity and security information, watch the "Red Flags Rule Use" video.

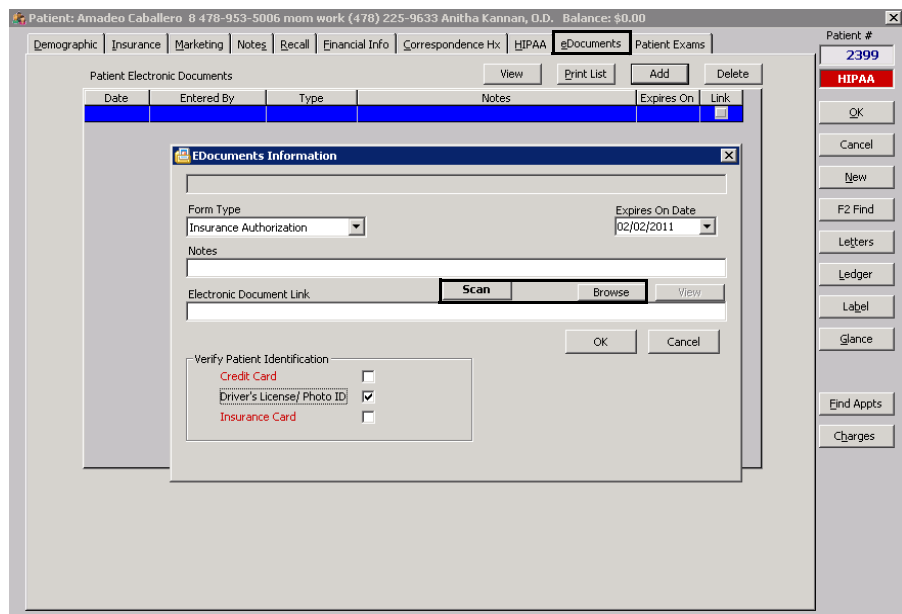
7. Click **Browse** to navigate to and select an electronic document to link to the patient's record and skip to step 9.

OR

Click **Scan** to scan documents directly into OfficeMate and save them as an eDocument in the patient's record.

NOTES

- Because all documents scanned directly into OfficeMate must be saved as a PDF file, you must have Adobe Reader installed on your computer. Go to www.adobe.com to install Adobe Reader for free.
- Eyefinity does not recommend a specific scanner brand or model; you can use any scanner that can create an electronic document with the OfficeMate eDocuments feature. For more information on scanners, go to www.officemate.net/omkb/article.aspx?id=10958, or consult your hardware technician.
- Eyefinity does not support hardware and highly suggests consulting your hardware technician before purchasing a scanner to use with your computer. For installation, support, and troubleshooting issues related to your scanner, contact the scanner's manufacturer.



8. If you clicked Scan in step 7, follow the instructions below; otherwise, skip to step 9:

- a. Select the following Scan Options on the Scan Document(s) window:

B/W if you want to scan the document in black and white.

Grayscale if you want to scan the document in grayscale.

Color if you want to scan the document in color.

Duplex if you want to scan two sides of a document (and if it is supported by the scanner).

Hide UI if you want to hide the scanner's user interface. If you deselect this check box then the scanner's interface will open with additional

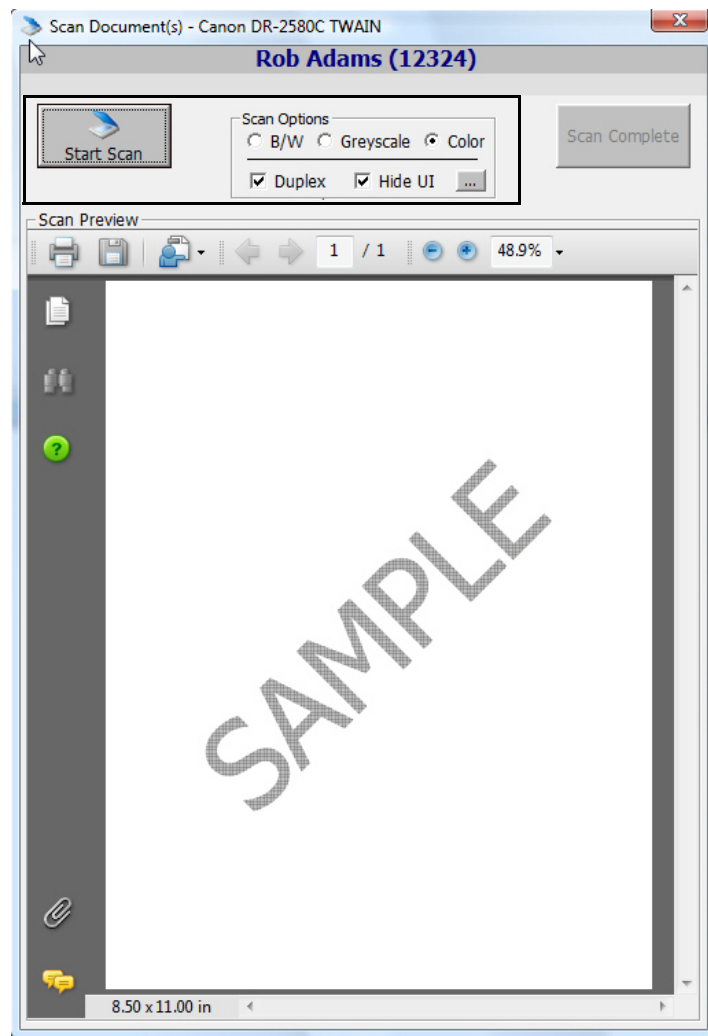
scanning options. For information about these additional options, view the scanner's documentation.

- b. Click the ... (ellipsis) button in the Scan Options box to open the Select Source window and select a scanner.

NOTE

If you select a scanner different from the one that is already displayed on the blue title bar in the Scan Document(s) window, the window will close and you will have to reopen it by clicking Scan on the EDocuments Information window.

- c. Click **Start Scan** to scan the document.



- d. Click **Scan Complete** after the document is finished scanning.

NOTE

Do *not* click the Save icon in the Scan Preview section of the Scan Document(s) window to save the document. You *must* click the Scan Complete button to properly save the document.

OfficeMate automatically names the document using the current date and saves it as a PDF file in the OfficeMate\DATA\eDocuments folder (if you are

a new user or were an OfficeMate Enterprise user who upgraded to OfficeMate 9.0 or above) or OMATE32\DATA\eDocuments folder (if you were an OfficeMate user who upgraded to OfficeMate 9.0 or above).

9. Click **OK**.

Attaching a Photo to Patient Records

Follow the instructions below to attach or update a patient's picture to a patient's record.

1. Open a patient's Patient Center window. For more information on opening a Patient's Patient Center window, see [Opening Patient Records on page 204](#).

The screenshot shows the 'Patient Center' window for a patient named Sally. The window is divided into several sections:

- Patient Information:** Patient ID: 17625, DOB: 09/14/1982, Age: 28, HIPAA status: HIPAA. Address: 141 W Wilshire Ave, Fullerton, CA 92832. Day phone: (913) 111-2222, Cell phone: [blank], eMail: Sally@patient.com. Last Exam: 06/17/2011, Expected referral return date: [blank].
- Financial Data:** Balance: 240.00, Credit: .00, Average \$: 120.00.
- Medical Information:** Chart No.: 1003750, Next Appt.: [blank], Provider: Doctor, Johnny, Primary Ins.: Vision Service Plan/Vision Service Plan, Secondary: AARP Health Care Options/AARP Health Care Options.
- Navigation:** Buttons for Demographics, Schedule, Fee Slip, Ledger, Receipts, Rx/Orders, Exam/WRITER.
- Family Members Table:**

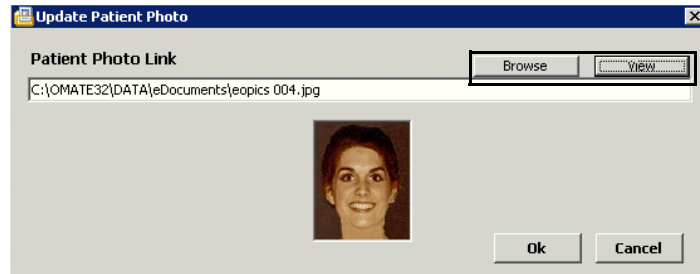
Name	Relationship To Insured	DOB	Age	Last Exam
Patient, Sally	Self	9/14/1982	28	6/17/2011

2. Click **Update Photo**.
The **Update Patient Photo** window opens.
3. Click **Browse** and navigate to the patient's photo on your computer.

NOTE

Browse to and select a .bmp, .jpg, ico, or .wmf photo file that uses a resolution of 120x60 pixels so that it displays well in OfficeMate.

- Click **View** to view the patient's photo in the Update Patient Photo window.



- Click **Ok** to update or add the patient's photo to his or her Patient Center window.

NOTE

To hide the patient's photo and notes for privacy reasons, click **Hide Notes/Photo**.

Printing Patient Labels

Follow the instructions below to print individual mailing labels and file folder labels for patients in OfficeMate.

NOTES

- Before you print mailing labels and file folder labels, ensure that you have set up your printer and defined your label preferences. To set up your printer, see [Setting Up the Printer on page 21](#). To define your label preferences, see [To set up label printer preferences on page 70](#).
- Print labels using Avery 5261 compatible white mailing labels or Dymo LabelWriter 400 address labels (SKU 30252). You can purchase the Avery 5261 from Avery at www.avery.com. You can purchase the Dymo LabelWriter 400 labels from Dymo at www.dymo.com.

- Click **Label** on the Patient Demographic window to open the Print Labels window and go to step 2.

OR

Right-click on the Patient Demographic, Eyewear Order, Soft Lens Order, Hard Lens Order, Fee Slip, Patient Ledger, or Receipts & Adjustments window title bar or on a patient in the Quick List window, select **Label**, and

then select **Mailing Label** or **File Folder Label** to automatically print a mailing or file folder label.

The screenshot shows a patient record form for Sally Patient. The 'ExamWRITER' menu is open, and the 'Label' option is selected, which has opened a sub-menu with 'Mailing Label' and 'File Folder Label' options. The form contains various fields for patient information, including name, address, contact numbers, and insurance details.

2. Select the **Mailing Label** and/or **File Folder Label** check box.
3. Type the number of labels that you want to print in the **# of Mailing Labels** and/or **# of File Folder Labels** text box.

The 'Print Labels' dialog box is shown. In the 'Printer Set Up' section, the 'Mailing Label' checkbox is checked, and the '# of Mailing Labels' is set to 10. The 'File Folder Label' checkbox is unchecked, and the '# of File Folder Labels' is set to 1. The printer selected is 'hp LaserJet 1300 PCL 6' and the label size is '3 1/2 by 15/16'. Buttons for 'Eject Page', 'Cancel', 'Test Print', and 'Print' are visible at the bottom.

4. Click one of the following buttons:
 - **Test Print** to print a sample label.
 - **Print** to print all of the labels that you selected.

NOTE

File folders labels will print the information that you set up in your OfficeMate preferences only if that information is available in the patient record.

Viewing All
Patient
Information

Follow the instructions below to view, print, and export all of the information in a patient's record.

1. Click **Glance** on the Patient Demographic window.

Patient: Sally Patient 28 (913) 111-2222 [NOTES] Johnny Doctor Balance: \$240.00

Demographic | Insurance | Marketing | Notes | Recall | Financial Info | Correspondence Hx | HIPAA | Documents | Patient Exams

Guarantor: Self

Last Name (Box 2): Patient

First Name (Box 2): Sally Initial: []

Title: [] Suffix: []

Nickname: []

Link Addr To: Self Guarantor Bad Address

Address (Box 5): 141 W Wilshire Ave

Address (Box 5): []

City (Box 5): Fullerton

State/ZIP (Box 5): California 92832

Home Ph # (Box 5): (949) 390-8320

Daytime Phone: (913) 111-2222

Cell Phone No: [] Texting OK

Pager Number: []

Fax Number: []

E-Mail Address: sally@patient.com

Default Location: Irvine Store

Referred By: Patient Professional [MU] None

Referred Name: Keith Warren

Sex: Male Female [MU] Added On: 10/17/1997

Date of Birth (Box 3): 09/14/1982 [MU] Age: 28

Social Security: 111-22-3333 Active

Provider: Doctor, Johnny

Marital Status (Box 8): Divorced

Emp. Status (Box 8): Employed Full-Time

Employer: []

Occupation: Carpenter

Salutation: Dear Sally:

Chart No: 1003750

Source: Patient Referral

Alert: []

Preferred Language: English [MU]

Race: Asian [MU]

Ethnicity: Not Hispanic or Latino [MU]

Communication Pref.: Postal [MU]

Last Exam: 06/17/2011

Buttons: OK, Cancel, New, F2 Find, Letters, Ledger, Label, **Glance**, End Appts, Open Charges

The **OfficeMate Patient Data Sheet** opens and displays print and export buttons.

OfficeMate Patient Data Sheet

1 of 1 | 100% | Total 14 | 100% | 14 of 14

Patient Data Sheet for Davis, Steven
 Provider: Miller, D.D., Michael
 Date: 12/02/2004
 Time: 2:48 pm
 Chart No: []

HIPAA - Read & Understood Yes No
 HIPAA - Modified Form on File No

Personal Information

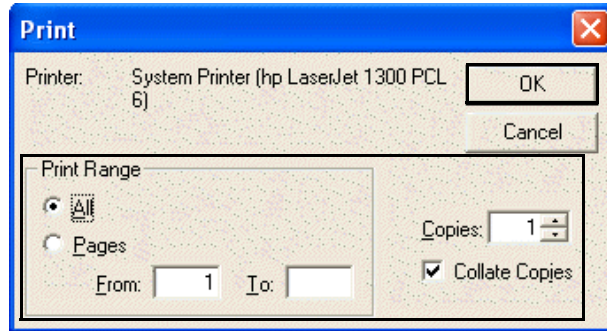
Davis, Steven
 343 Haverford Ave,
 Laquana Niquel, California 92653

Gender: Male
Birthdate: 06/02/1953
Home Phone: (949) 555-7463
Daytime Phone: []
No. of Referrals: 0
Guarantor: Self

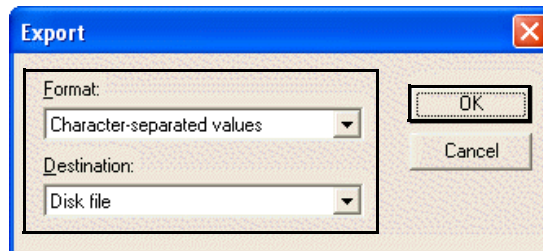
Nickname: []
Title: Mr.

Age: 51
Salutation: Dear Steven
Social Security Number: 343 34 3579
Ref. Sales: []

2. To print the data sheet, follow the instructions below:
 - a. Click the printer button to open the Print window.
 - b. Select the Print Range, number of Copies, and whether or not you want to Collate Copies.
 - c. Click **OK**.



3. To export the data sheet, follow the instructions below:
 - a. Click the export button to open the Export window.
 - b. Choose an export format and destination from the **Format** and **Destination** drop-down menu.
 - c. Click **OK**.



- d. Specify the values requested or choose an export file to export the data sheet.

Viewing
Patient
Appoint-
ments

To view a list of a patient's appointments, click **Find Appts.** The **Patient Appointments** window opens.

Patient: Sally Patient: 28 (913) 111-2222 [NOTES] Johnny Doctor Balance: \$240.00

Demographic | Insurance | Marketing | Notes | Recall | Financial Info | Correspondence Hx | HIPAA | eDocuments | Patient Exams

Guarantor: Self Sex: Male [MU] Added On: 10/17/1997

Last Name (Box 2): Patient Date of Birth (Box 3): 09/14/1982 [MU] Age: 28

First Name (Box 2): Sally Initial: Social Security: 111-22-3333 [Active]

Title: Patient Appointments

Nickname: Appointment For: Sally Patient

Link Addr To: Home Phone Number: (949) 390-8320

Date	Time	Location	Resource	Notes
6/17/2011	2:00:00 PM	Irvine Store	Wineinger, O.D., Roger	

Address (Box 5): 141 V
Address (Box 5):
City (Box 5): Full
State/ZIP (Box 5): Calif
Home Ph # (Box 5): (949)
Daytime Phone: (913)
Cell Phone No:
Pager Number:
Fax Number:
E-Mail Address: sally@patient.com
Default Location: Irvine Store
Referred By: Professional [MU]
Referred Name: Keith Warren

Race: Asian [MU]
Ethnicity: Not Hispanic or Latino [MU]
Communication Pref.: Postal [MU]
Last Exam: 06/17/2011

Buttons: OK, Cancel, New, F2 Find, Letters, Ledger, Label, Glance, ExamWRITER, Find Appts, Open Charges

Viewing
Patient Exams

For information on viewing patient exams, watch the "Patient Exams Tab" video.

To view a patient's exams in ExamWRITER, click the **Patient Exams** tab.

Patient: Susan Patient: 30 (478) 789-9874 111-22-3333 Balance: \$0.00

Demographic | Insurance | Marketing | Notes | Recall | Financial Info | Correspondence Hx | HIPAA | eDocuments | Patient Exams

Exam Date	Exam #	Primary Procedure	Provider	Status	Location

Patient Referrals to Other Providers

Referring Provider: Doctor, Johnny
Refer To Provider: Chambers, Carrie [Maintain]
Reason: Conjunctival consult
Date referred: 01/25/2011
Expected return date: 01/25/2012
Actual return date: []

Buttons: OK, Cancel, New, F2 Find, Letters, Ledger, Label, Glance, Find Appts

Viewing & Recording Patient Referrals to Other Providers

To view or record patient referrals to other providers, perform the following steps:

1. From the Patient Demographic window, click the **Referral** tab.
2. Click **New Referral** to add a new patient referral.
3. Select the internal provider from **Referring Provider** drop-down menu.
4. Select the external provider to whom the patient is being referred from the **Refer to Provider** drop-down menu. If the provider is not listed in the drop-down menu, click **Maintain** and go to [To modify or add doctors to whom your practice refers patients on page 59](#) for information on adding the provider.
5. Select a referral reason from the **Reason** drop-down menu.
6. Select or type the date of the referral in the **Date Referred** field.
7. Select or type the date by which the patient is expected to return to your practice in the **Expected Return Date** field.
8. Select or type the date on which the patient returned to your practice in the **Actual Return Date** field as needed.
9. Click **Save** to save your changes.

The screenshot shows a software window titled "Patient: Joy Behar 1" with a "Referral" tab selected. A dialog box titled "Patient Referrals to Other Providers" is open in the center. The dialog box contains the following fields and controls:

- Referring Provider:** A dropdown menu with "Farina, O.D., Dennis" selected.
- Refer To Provider:** An empty dropdown menu with a "Maintain" button to its right.
- Reason:** A dropdown menu with "Cataract consult" selected.
- Date referred:** A date field containing "04/02/2015" and a calendar icon.
- Expected return date:** An empty date field with a calendar icon.
- Actual return date:** An empty date field with a calendar icon.
- At the bottom of the dialog box are three buttons: "Save", "Delete", and "Exit".

The background window shows a sidebar with various patient management options such as "OK", "Cancel", "New", "F2 Find", "Letters", "Ledger", "Label", "Glance", "Exam WRITER", "Find Appts", "Open Charges", and "Orders".

Deleting
Patient
Records

Follow the instructions below to delete a patient record from OfficeMate.

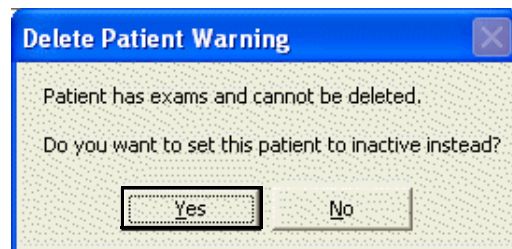
NOTES

- You cannot delete a patient's record if the patient has an open balance or an insurance balance, scheduled future appointment, an existing exam record in ExamWRITER, is a guarantor for another patient, or is the insured party for another patient.
- If you do not want to delete the patient record, you can mark the record inactive by deselecting the **Active** check box in the Patient Demographic window. Deselecting this check box indicates that service to this patient has been discontinued.

1. Open a patient record. For more information on opening a patient record, see [Opening Patient Records on page 204](#).
2. Click **Tasks** on the OfficeMate Administration main window toolbar.
3. Select **Delete Patient**.
The Delete Warning window opens.
4. Click **Yes** to delete the patient record from OfficeMate.



5. If the patient has an open balance or has exams recorded in ExamWRITER, the Delete Patient Warning window opens because the patient record cannot be deleted. Select **Yes** to set the patient record as inactive.



Closing Patient Open Charges

Follow the instructions below close open patient charges.

NOTES

To close patient open charges, you must set up the following information:

- From OfficeMate Administration, click **Setup**, select **Preferences**, click the **Finance** tab, select the **Yes** radio button next to the **Activate Patient Open Charges Button** preference, and click **OK**. For more information on setting up this preference, go to [To set up financial preferences on page 62](#).
- From OfficeMate Administration, click **Setup**, select **Security**, and ensure that the user has a role assigned to him or her that allows him or her to close patient open charges. For more information on setting up this security preference, go to [Setting Up Security on page 96](#).

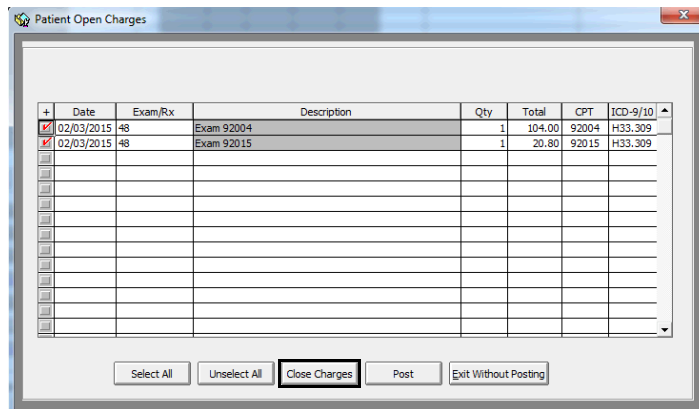
1. Open a patient record. For more information on opening a patient record, see [Opening Patient Records on page 204](#).
2. Click **Open Charges**.

The Patient Open Charges window opens.

- Click on the red check marks to deselect items that you do not want to delete and then click **Close Charges** to delete the selected open charges.

NOTE

Deselected items will continue to appear in the Patient Open Charges window until they are posted on a fee slip or deleted. For more information on posting open charges on a fee slip, go to [Creating & Opening Fee Slips on page 150](#).



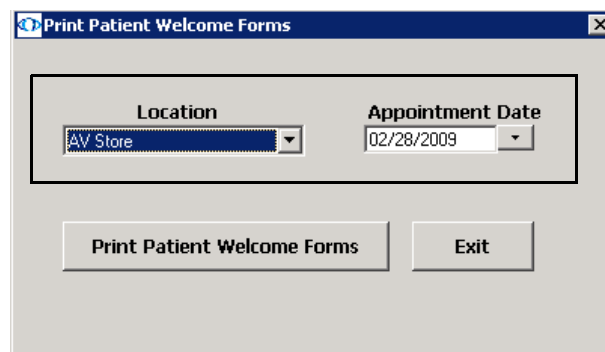
Printing Patient Welcome Forms

The patient welcome form displays basic patient demographic and insurance information. A patient welcome form is printed for each patient with a confirmed appointment on a given day. Follow the instructions below to print patient welcome forms.

NOTE

OfficeMate prints patient welcome forms only for appointments that have been confirmed.

- Click **Tasks** on the OfficeMate Administration main window toolbar and select **Print Patient Welcome Forms**.
The Print Patient Welcome Forms window opens.
- Select your location from the **Location** drop-down menu if it is not selected already.
- Type or select a date in the **Appointment Date** field.



- Click **Print Patient Welcome Forms**.
The Preview Window opens.

5. Complete one or more of the following tasks:
 - Click the **Print Report** icon to open the Print window and print the patient welcome forms.
 - Click the **Export Report** icon to open the Export window and choose a format and destination for your exported patient welcome forms.

NOTE

If you are exporting the report to a Microsoft Windows application, such as Excel, select the **MS Excel 97-2000 (Data Only)** format and **Disk file** destination in the Export window and click **OK**. Select the **Column width based on objects in the Details** radio button and *all* the check boxes in the Excel Format Options window and click **OK**.

6. Close the Preview Window.
7. Click **Exit** to close the Print Patient Welcome Forms window.

Maintaining Product & Service Information

4

For information on maintaining products and services, watch the "Entering and Maintaining Products and Services" video.

In this chapter:

- [Setting Up Product & Service Information, 249](#)
- [Loading Lens Products into OfficeMate, 256](#)
- [Opening the Products Window, 261](#)
- [Finding Products & Services, 261](#)
- [Recording Product Information, 263](#)
- [Recording Service Information, 280](#)
- [Updating Many Products & Services, 289](#)

Maintaining product and service information in OfficeMate allows you to generate sales and production reports; automatically transfer price, product, and insurance information into fee slips; generate accurate information on eyewear and contact lens Rx order forms; and provide services to use in the Appointment Scheduler. You can set up and record as little or as much product and service information in OfficeMate as is necessary for your practice.

Setting Up Product & Service Information

You can set up as little or as much product and service information in OfficeMate as is necessary for your practice. This section tells you how to set up product and service information in OfficeMate Administration, including how

- [To set up product types, 249](#)
- [To set up product preferences, 252](#)
- [To set up barcode label options, 253](#)
- [To set up commission classes, 254](#)

NOTE

Press the **F12** key when your cursor is in a drop-down box to open a **Maintain** window and add new items to the drop-down menu selections. For more information on using the F12 key, go to [To add and maintain list box selections \(F12\) on page 17](#).

► To set up product types

Products or services that share similar characteristics are grouped by product type. When you add a new product or service to OfficeMate Administration in the

Products window, the product type defaults set up using the instructions below apply to the new item.

1. Click **Setup** on the OfficeMate Administration main window and select **Product Setup**.
The Product Setup window opens.
2. Select one of the nine product types from the **Product type** drop-down menu.
3. Deselect the **Maintain Perpetual inventory** check box if you do *not* want to maintain inventory for this product type.
4. Select the product's unit of measure from the **Sales Unit of Measure** drop-down menu.
5. Select the frequency of the inventory cycle for this product type from the **Physical Inventory Cycle** drop-down menu.

6. If you are maintaining perpetual inventory, enter quantities in the **Stocking Level**, **Minimum Reorder Point**, and **Minimum Reorder Quantity** text boxes.

NOTE The Stocking Level, Minimum Reorder Point, and Minimum Reorder Quantity are copied to each new product that is created from this point forward and applied to each location including the administrative location and distribution centers. If you do not want these quantities applied to each new product, do not enter quantities in these fields.

This field...	Controls this function...
Stocking Level	The desired number of units to keep on hand excluding sample (display) units. This field is informational only and does not affect reordering.
Minimum Reorder Point	The point at which the product should be added to a PO. When the location's inventory reaches this point, the product is added to the PO (when PO from Qty on Hand is selected from the Products menu).
Minimum Reorder Quantity	<p>The number of units to add to the PO. Typically, this number would be a multiple of the number of units shipped in a case or the number of units required to qualify for a discount rate. For example, if saline solution ships in cases of 12, the Minimum Reorder Quantity would be 12, 24, 36, etc.</p> <p>The Minimum Reorder Point plus the Minimum Reorder Quantity often equal more than the Stocking Level.</p> <p>The Minimum Reorder Quantity is set for all products of this type added to inventory at all locations.</p>

7. If you want to allow discounts on services, select the **Allow Discount On Services** check box.
8. If your lens treatments are priced by the pair, select the **Use Half Fee on Single Lens Transactions** check box to reduce the fee for single lens treatments.

NOTE You can still apply discounts to line items on fee slips if the **Allow Discount On Services** check box is deselected by clicking **Line Add'l Data** on the Fee Slip window. For more information about adding data to fee slips, go to [Recording Information on Fee Slips on page 151](#).

9. Enter the Provider Commission Method:
 - a. Select the % of **Gross** or % of **Margin** radio button.
 - b. Type the commission rate in the **Commission rate** text box.

NOTE If you have set up a commission for a specific provider, it will take precedence over a commission set up for a product type.

- c. Type a special incentive amount for the product type in the **SPIFF Amount** text box.
10. Enter the Staff Commission Method:
 - a. Select the % of **Gross** or % of **Margin** radio button.
 - b. Type the commission rate in the **Commission rate** text box.

NOTE If you have set up a commission for a specific staff member, it will take precedence over a commission set up for a product type.

- c. Type a special incentive amount for the product type in the **SPIFF Amount** text box.

11. Click **Print** to print the product type information.
12. Click **OK** to close the Product Setup window.

► To set up product preferences

NOTE These preferences affect all product types and inventory cycles.

1. Click **Setup** on the OfficeMate main window and select **Product Setup**. The Product Setup window opens.

2. Click the **Preferences** tab.
3. Type the date of the first inventory period in the **Start date of first periods** text box.
4. Type the current inventory year in the **Current calendar year** text box.
5. Type the number of the current inventory cycle in the **Current inventory period** text box.
6. Type the total number of inventory cycles your practice undergoes per year in the **# of periods in a year**.
7. Select how you would like to group products when performing physical counts from the **Will physical count be stored by board location?** radio buttons.
 - Yes. Products are organized by board location.
 - No. Products are listed in alphabetical order.

► **To set up barcode label options**

For more information on using your SATO barcode printer, see the "Scanning and Printing Barcodes With OfficeMate" document.

NOTE	The SATO CX208, CX400, CG408TT, and CG408e barcode printers are the only barcode printers that are compatible with OfficeMate. To purchase a SATO barcode printer, contact OfficeMate Sales at 800.269.3666.
-------------	--

1. Click **Setup** on the OfficeMate main window and select **Product Setup**. The Product Setup window opens.
2. Click the **Preferences** tab.
3. Select the **UPC** or **Product Code** radio button to print a UPC or product code column on barcode labels.
4. Select your barcode printer from the **Bar Code Printer** drop-down menu.

NOTE	Select Sato CX400 if you are using the CX400, CG408TT, or CG408e printer and select CX208 if you are using an older printer.
-------------	--

5. If you selected Output to Label Matrix from the Bar Code Printer drop-down menu, perform the following steps:
 - a. Click the **ellipsis (...)** next to the Bar Code printer program path field to browse for the application that generates the barcode labels.
 - b. Click the **ellipsis (...)** next to the Bar Code printer output path field to browse for the location of the barcode label file.
6. Type the communication port to which your barcode printer is connected in the **Comm. Port for Barcode Printer** text box.

7. Select up to five lines of information to print on barcode labels from the **Barcode Label Options** list.

Product Setup

Product Type | **Preferences** | Commission Class

These Preferences apply to ALL Product Types.

Start date of first periods: 01/20/2006

Current calendar year: 2010

Current inventory period: 10

of periods in a year: 12

Will physical count be stored by board location? Yes No

Barcode Label Options

Column on bar code: UPC Product Code

Bar Code Printer: Sato CX400

Bar Code printer program path: []

Bar Code printer output path: []

Comm Port for Barcode Printer: 1

Description (1 Line, 1st 24 chrs.): Yes No

Manufacturer: Yes No

Designer Series: Yes No

Color Description: Yes No

Board Location: Yes No

Date Received: Yes No

Fee: Yes No

Eye Size/Bridge Size/Temple Size: Yes No

You may select 5 lines of data for label.

OK | New | Delete | Print | Cancel

8. Click **OK** to close the Product Setup window.

► To set up commission classes

Set up commission classes for products for which you use the same commission method and rate. After you set up commission classes, go to [To add additional information to products on page 268](#) and [To add additional information to services on page 284](#) to select a commission class for individual products and services. If you want to add or update the commission class for many products or services at one time, go to [Updating Many Products & Services on page 289](#).

1. Click **Setup** on the OfficeMate main window and select **Product Setup**. The Product Setup window opens.
2. Click the **Commission Class** tab.
3. Select a commission class from the **Commission Class** drop-down menu.
OR
Click **New** to set up a new commission class.

4. If you are setting up a new commission class, type the name of the commission class in the **New Commission Class** window and click **OK**; otherwise, skip to step 5.

5. Enter the commission class for providers:
 - a. Select the % of **Gross** or % of **Margin** Commission method radio button.
 - b. Type the percent or dollar amount in the **Commission rate** text box.
 - c. Type the special incentive dollar amount, if applicable, in the **SPIFF Amount** text box.

6. Enter the commission class information for staff members:
 - a. Select the % of **Gross** or % of **Margin** Commission method radio button.
 - b. Type the percent or dollar amount in the **Commission rate** text box.
 - c. Type the special incentive dollar amount, if applicable, in the **SPIFF Amount** text box.
7. Click **Print** to print the commission class.

NOTE Click **Delete** to delete a commission class.

8. Click **OK** to close the Product Setup window.

Loading Lens Products into OfficeMate

For information on the using the Lens Product Loader, watch the “Ophthalmic Lenses” and “Lens Treatments” video.

Downloading lens product lists gives you access to an up-to-date, comprehensive list of lens and lens treatments, from which you can choose which products you want to load into OfficeMate.

The Lens Product Loader window loads a comprehensive list of over 3,000 lens products and add-ons provided by VSP into the OfficeMate products database. This section explains how to use the Lens Product Loader, including how

- [To download lens product lists, 256](#)
- [To load lens products into OfficeMate, 258](#)
- [To understand the ophthalmic lens descriptions, 260](#)

NOTES

- If you are using the VSP Interface, you *must* use the Lens Product Loader to ensure that VSP patient out-of-pocket expenses are calculated correctly.
- If you are not using the OfficeMate VSP Interface, using the Lens Product Loader is optional, but highly recommended, and will save you countless hours of creating lens products manually.
- To keep your lens products up to date, Eyefinity recommends running the Lens Product Loader every two weeks.
- Prior to running the Lens Product Loader for the first time, ensure that your product attribute pricing is complete. For more information about product attributes, go to [To add & modify attributes on page 141](#) and [To add & modify additional attributes on page 143](#).

► To download lens product lists

NOTE

As you maintain your products, you should download an updated lens list each month. Refer to the Last Retrieved Date field to determine how recently the lens list was updated.

1. Click **Tasks** and select **Lens Product Loader**.

A dialog box displays advising you to deactivate your existing lens products.

2. Click **Yes** to deactivate your existing lens products.

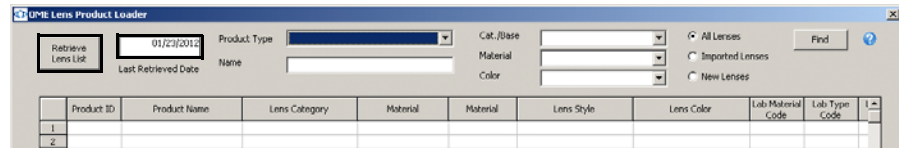
OR

Click **No** keep your current lens products active.

NOTES

- Deactivating all of your existing lens products prevents your opticians from accidentally selecting a lens product that may cause errors with your claims and lab orders.
- If you are loading lens products in small groups, however, you may want to deactivate only a few of your lens products at a time in the Product Maintenance window. For example, deactivate your existing bifocal lenses as you load bifocal lenses from the Lens Product Loader.
- If you later decide that you want to reactivate your lens products, you must do so manually using the Product Maintenance or Products & Services window.

- Click **Retrieve Lens List** to download updated products from VSP to OfficeMate.



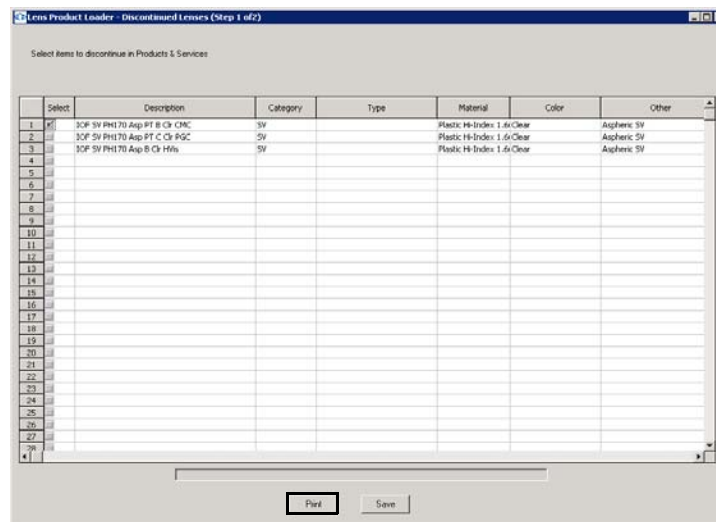
The updated products download. This may take several minutes. OfficeMate compares the product lists against the products you may have loaded in the past and displays the modified, discontinued, and new lens products.

- For each window that opens, perform the following steps:
 - Review the list for lens products that your practice may sell.
 - Click **Print** to print the list as needed.

NOTES

- The printed list will help you later to find and select the products that you want to load into OfficeMate.
- The lens product descriptions are comprised of a series of descriptions. For information on interpreting these descriptions, go to [To understand the ophthalmic lens descriptions on page 260](#).

- In the case of discontinued products, select the check boxes that correspond to the discontinued products that you want to remove from the OfficeMate products database and click **Save**.
- Click **Exit**.



- Continue by loading lens products into OfficeMate. For more information go to [To load lens products into OfficeMate on page 258](#).

The lens products that you select and load are copied to the OfficeMate products database and will be available for creating lab orders and billing on fee slips and insurance claims.

► **To load lens products into OfficeMate**

1. Open the Lens Product Loader and download the latest lens product lists. For more information, go to [To download lens product lists on page 256](#).
2. Select **Lens Treatments** or **Ophthalmic Lenses** from the **Product Type** drop-down menu.
3. Narrow your search results to work with a small group of products at a time:
 - a. If you want to search for a specific product, type part of the product description in the **Product Name** text box.
 - b. Select the lens type from the **Cat./Base** drop-down menu as needed.
 - c. Select the lens material from the **Material** drop-down menu as needed.
 - d. Select a tint from the **Color** drop-down menu as needed.
 - e. Select the **Imported Lenses** radio button to display only the products previously imported into the OfficeMate database or the **New Lenses** radio button to display only the products that have not been imported; otherwise, select the **All Lenses** radio button to display all the products that meet your other search criteria
4. Click **Find**.
5. Select the **Use Default Attribute Pricing** check box to import default costs and fees for ophthalmic lens attributes, including prism, add power, and oversize to the OfficeMate product database.

- Select the check boxes in the **Select** column to select the products that you want to load into OfficeMate.

OR

Click **Select all** to select all of the products in the results list.

NOTES

- The lens product descriptions are comprised of a series of descriptions. For information on interpreting these descriptions, go to [To understand the ophthalmic lens descriptions on page 260](#).
- Lens products may appear in rows of various colors. Use the table below to help you understand the different row colors.

This row color... Means this lens product...

White Has not been imported into OfficeMate.

Green Has been imported into OfficeMate.

Gray Has been discontinued.

- Attributes that appear in red text are missing pricing information. Enter the missing attribute information prior to importing the affected lens products. For information about editing attributes, go to [To add & modify attributes on page 141](#).

Select	Description	Category	Type	Material	Color	Other	Other
<input checked="" type="checkbox"/>	DOF SV PH160 Asp D Cr CZAvSG	Single Vision	VSP DOF Lens - Aspheric AR (D)	Plastic HI L.60	Clear	Aspheric SV	A/R Coating (Premium)
<input checked="" type="checkbox"/>	DOF SV PH160 Asp D TrGy CZAvSG	Single Vision	VSP DOF Lens - Aspheric AR (D)	Plastic HI L.60	Transitions Gray	Aspheric SV	A/R Coating (Premium)
<input checked="" type="checkbox"/>	DOF SV PH160 Asp H8Cr Cr	Single Vision	VSP DOF Lens - Aspheric Hard-Co Plastic HI L.60	Plastic HI L.60	Clear	Aspheric SV	
<input checked="" type="checkbox"/>	DOF SV PH160 Asp Prem C Cr	Single Vision	VSP DOF Lens - Aspheric w/ Premi Plastic HI L.60	Plastic HI L.60	Clear	Aspheric SV	
<input checked="" type="checkbox"/>	DOF SV PH160 Asp 20A Cr	Single Vision	VSP DOF Lens - Aspheric w/ Stanc Plastic HI L.60	Plastic HI L.60	Clear	Aspheric SV	
<input checked="" type="checkbox"/>	DOF SV PH160 Sph C Cr CzAz	Single Vision	VSP DOF Lens - Spherical AR (C)	Plastic HI L.60	Clear		A/R Coating (Premium)
<input checked="" type="checkbox"/>	DOF SV PH160 Sph H8Cr Cr	Single Vision	VSP DOF Lens - Spherical Hard-Co Plastic HI L.60	Plastic HI L.60	Clear		
<input checked="" type="checkbox"/>	DOF SV PH160 Sph 20A Cr	Single Vision	VSP DOF Lens - Spherical w/ Stanc Plastic HI L.60	Plastic HI L.60	Clear		
<input checked="" type="checkbox"/>	DOF SV PH167 Asp C Cr CzAz	Single Vision	VSP DOF Lens - Aspheric AR (C)	Plastic HI L.67	Clear	Aspheric SV	A/R Coating (Premium)
<input checked="" type="checkbox"/>	DOF SV PH167 Asp C Cr H8wVP	Single Vision	VSP DOF Lens - Aspheric AR (C)	Plastic HI L.67	Clear	Aspheric SV	A/R Coating (Premium)
<input checked="" type="checkbox"/>	DOF SV PH167 Asp D Cr CZAvSG	Single Vision	VSP DOF Lens - Aspheric AR (D)	Plastic HI L.67	Clear	Aspheric SV	A/R Coating (Premium)
<input checked="" type="checkbox"/>	DOF SV PH167 Asp D TrGy CZAvSG	Single Vision	VSP DOF Lens - Aspheric AR (D)	Plastic HI L.67	Transitions Gray	Aspheric SV	A/R Coating (Premium)
<input checked="" type="checkbox"/>	DOF SV PH167 Asp H8Cr Cr	Single Vision	VSP DOF Lens - Aspheric Hard-Co Plastic HI L.67	Plastic HI L.67	Clear	Aspheric SV	
<input checked="" type="checkbox"/>	DOF SV PH167 Asp H8Cr TrGy	Single Vision	VSP DOF Lens - Aspheric Hard-Co Plastic HI L.67	Plastic HI L.67	Transitions Gray	Aspheric SV	
<input checked="" type="checkbox"/>	DOF SV PH167 Asp Prem C Cr	Single Vision	VSP DOF Lens - Aspheric w/ Premi Plastic HI L.67	Plastic HI L.67	Clear	Aspheric SV	
<input checked="" type="checkbox"/>	DOF SV PH167 Asp 20A Cr	Single Vision	VSP DOF Lens - Aspheric w/ Stanc Plastic HI L.67	Plastic HI L.67	Clear	Aspheric SV	
<input checked="" type="checkbox"/>	DOF SV PH167 Sph C Cr CzAz	Single Vision	VSP DOF Lens - Spherical AR (C)	Plastic HI L.67	Clear		A/R Coating (Premium)
<input checked="" type="checkbox"/>	DOF SV PH167 Sph H8Cr Cr	Single Vision	VSP DOF Lens - Spherical Hard-Co Plastic HI L.67	Plastic HI L.67	Clear		
<input checked="" type="checkbox"/>	DOF SV PH170 Asp B Cr H8w	Single Vision	VSP DOF Lens - Aspheric AR (B)	Plastic HI L.70	Clear	Aspheric SV	A/R Coating (Premium)
<input checked="" type="checkbox"/>	DOF SV PH170 Asp B Cr CMC	Single Vision	VSP DOF Lens - Aspheric w/ Premi Plastic HI L.70	Plastic HI L.70	Clear	Aspheric SV	A/R Coating (Premium)
<input checked="" type="checkbox"/>	DOF SV PH170 Asp PT C Cr PGC	Single Vision	VSP DOF Lens - Aspheric w/ Premi Plastic HI L.70	Plastic HI L.70	Clear	Aspheric SV	A/R Coating (Premium)
<input checked="" type="checkbox"/>	DOF SV PH174 Asp D Cr CZAvSG	Single Vision	VSP DOF Lens - Aspheric AR (D)	Plastic HI L.74	Clear	Aspheric SV	A/R Coating (Premium)
<input checked="" type="checkbox"/>	DOF SV PH174 Asp SupCh B Cr	Single Vision	VSP DOF Lens - Aspheric Super Cl Plastic HI L.74	Plastic HI L.74	Clear	Aspheric SV	
<input checked="" type="checkbox"/>	DOF SV PL Sph B Cr Cr CzAz	Single Vision	VSP DOF Lens - Spherical w/ Crta Plastic CR-39	Plastic CR-39	Clear		A/R Coating (Premium)
<input checked="" type="checkbox"/>	DOF SV PL Sph B Cr H8w	Single Vision	VSP DOF Lens - Spherical AR (B)	Plastic CR-39	Clear		A/R Coating (Premium)
<input checked="" type="checkbox"/>	DOF SV PL Sph C Cr CzAz	Single Vision	VSP DOF Lens - Spherical AR (C)	Plastic CR-39	Clear		A/R Coating (Premium)
<input checked="" type="checkbox"/>	DOF SV PL Sph C Cr CzAz	Single Vision	VSP DOF Lens - Spherical AR (C)	Plastic CR-39	Transitions Gray		A/R Coating (Premium)
<input checked="" type="checkbox"/>	DOF SV PL Sph Cr	Single Vision	VSP DOF Lens - Spherical	Plastic CR-39	Clear		A/R Coating (Premium)

- Click **Load**.

The selected products are loaded into the OfficeMate. After a product is loaded into OfficeMate, the product and description are highlighted green.

► **To understand the ophthalmic lens descriptions**

- ❖ Use the table below to help you understand the ophthalmic lens product name descriptions.

Ophthalmic Lens Product Name Abbreviations		
Details	Abbreviation	Description
Finishing	IOF	VSP Vision Care Finishing
Lenstype	SV	Single Vision
	BF	Bifocal
	TF	Trifocal
	DS	Double Seg
	LBF	Lenticular Bifocal
	LSV	Lenticular Single Vision
	NVF	Near Variable Focus
	PG	Progressive
Material	PL	Plastic
	PO	Polycarbonate
	PM	Plastic Mid-Index (followed by a number indicating the index of refraction)
	PH	Plastic Hi-Index (followed by a number indicating the index of refraction)
	TR	Trivex
	GL	Glass
	GH	Glass Hi-Index (followed by a number indicating the index of refraction)
Brand Name	Varies	Varies
Color	Varies	Varies
Coating	Varies	Varies

NOTE

Products loaded from the Lens Product Loader are assigned generic names on the fee slip. For example "SV GH160 SV Clr" prints as "Any SV Glass" on the fee slip. The generic fee slip names are assigned only to new ophthalmic loaded from the Lens Product Loader.

Opening the Products Window

Open the Products window using one of the following methods:

NOTE Only users in distribution centers and the administrative location can modify information in the Products window.

- Click the **Products** icon and select **Products and Services**.
- Click **Tasks** on the main window toolbar and select **Products and Services**.

Finding Products & Services

NOTE Only users in distribution centers and the administrative location can modify information in the Products window.

1. Open the Products window. For more information on opening the Products window, go to [Opening the Products Window on page 261](#).

The **Products** window opens.

NOTE

To conduct an advanced search for a product, click **Advanced Search** to open the Find Product window and search for a product using additional criteria. Right-click on a product in the Find Product window to view the product's inventory by location.

The screenshot shows the 'Find Product' window with the following search criteria:

- Product Type: Contact Lenses
- Name: (empty)
- Color: (empty)
- Eye Size: (empty)
- CPT: (empty)
- Manufacturer: (empty)
- Product Code: (empty)
- DBL Size: (empty)
- Attribute: (empty)
- Designer: (empty)
- UPC: (empty)
- Temple Size: (empty)

The 'Include Inactive Items' checkbox is checked. The product list below shows the following columns: Product Name/Code, Print Name, CPT, Total Product Qty, Color, DC, Dia, Sphere, Cyl, Axis, Add, LIPC, and On Hand.

Product Name/Code	Print Name	CPT	Total Product Qty	Color	DC	Dia	Sphere	Cyl	Axis	Add	LIPC	On Hand
100 CL [Accesscode]	CL		60.00	Demibrown	0.00	0.00	0.00	0.00	0	0.00	Accesscode	-21
50 CL	CL		25.00	Demibrown	0.00	0.00	0.00	0.00	0	0.00		-2
ACUVUE	ACUVUE	V0250 CL Soft -	25.00	Blue	0.00	0.00	0.00	0.00	0	0.00		-39
ACUVUE	ACUVUE	V0250 CL Soft -	25.00	Clear	0.00	0.00	0.00	0.00	0	0.00		-5
ACUVUE	ACUVUE	V0250 CL Soft -	35.00	Demibrown	0.00	0.00	0.00	0.00	0	0.00		-22
ACUVUE	ACUVUE	V0250 CL Soft -	0.00	Demigrey	0.00	0.00	0.00	0.00	0	0.00		-9
ACUVUE 1-DAY	ACUVUE 1-DAY		0.00		0.00	0.00	0.00	0.00	0	0.00		-7
ACUVUE 2	new-ACUVUE		0.00		0.00	0.00	0.00	0.00	0	0.00		-2
ACUVUE BIFOCAL	ACUVUE BIFOCAL		0.00		0.00	0.00	0.00	0.00	0	0.00		-8
ACUVUE COLORS OPAQUES	ACUVUE COLORS OPAQUES		0.00		0.00	0.00	0.00	0.00	0	0.00		2
ACUVUE COLOURS ENHANC	ACUVUE COLOURS ENHANC		0.00		0.00	0.00	0.00	0.00	0	0.00		-1
ACUVUE TONIC	ACUVUE TONIC	V0252 CL Soft -	30.00		0.00	0.00	0.00	0.00	0	0.00		-43
Acuvue-12	Acuvue-12		0.00		0.00	0.00	0.00	0.00	0	0.00		-4
ALGES BIFOCAL	ALGES BIFOCAL		0.00		0.00	0.00	0.00	0.00	0	0.00		-1
Anita's Contact Lens	Anita's Contact Lens		0.00		0.00	0.00	0.00	0.00	0	0.00		2

Total Products: 340

To add a new product or service through the Find Product window, follow the instructions below:

- a. Select a product type from the **Product Type** drop-down menu.
- b. Click **Add Product**.

The **Products** window opens.

- c. Add additional product or service information before recording this product or service on a fee slip or maintaining inventory for this product. For more information on recording product or service information, go to [Recording Product Information on page 263](#) or [Recording Service Information on page 280](#).

2. Select a product or service from the **Product Type** drop-down menu.

NOTES

- Frame and lens add-ons are included in the Other and Lens Treatment product types.
- To add a new product or service, click **New Product** and go to [Recording Product Information on page 263](#) or [Recording Service Information on page 280](#).

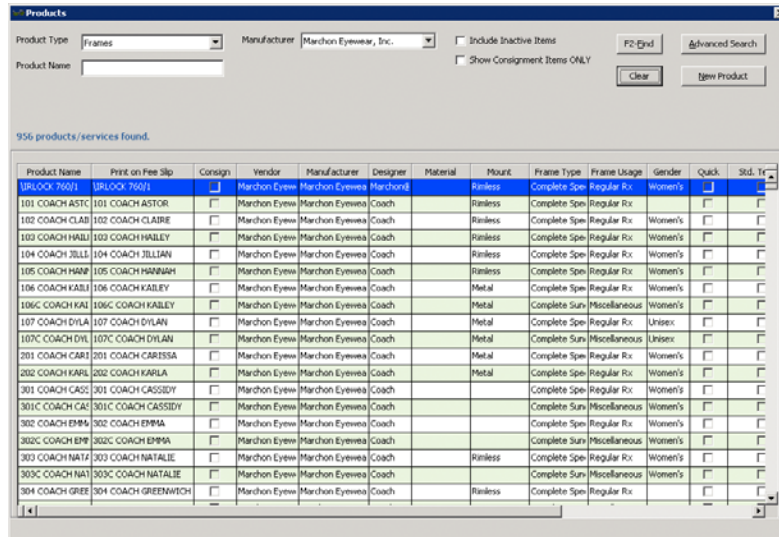
3. Select a product manufacturer from the **Manufacturer** drop-down menu or select a service **CPT** code radio button.
4. If you are searching for ophthalmic lenses, select search criteria from the **Color, Material, or Cat/Base** drop-down menus.
5. Type a product or service name in the **Product Name** text box.
6. Select the Show Consignment Items ONLY check box if you want to maintain product or service information for consignment items.
7. Select the **Include inactive products** check box if you want to maintain product or service information for inactive products or services.
8. Click **F2-Find** to search for a product or service.

The screenshot shows a software window titled "Products". At the top, there are search criteria: "Product Type" (a dropdown menu), "Manufacturer" (a dropdown menu), and a checkbox labeled "Include Inactive Items". To the right of these are buttons for "F2-Find", "Advanced Search", "Clear", and "New Product". Below the search criteria is a table with the following columns: Product ID #, Product Name, Print on Fee Slip, Stocking Type, Lens Category, Manufacturer, Tint, Material, and UOM. The table is currently empty.

9. Double-click a product or service to view or modify information. For more information on recording or modifying product or service information, go to

Recording Product Information on page 263 or Recording Service Information on page 280.

NOTE You can drag and drop column headings to rearrange column views.



Recording Product Information

NOTE Only users in distribution centers and the administrative location can modify information in the Products window.

You can record as little or as much product information in OfficeMate as is necessary for your practice. This section tells you how to record products in OfficeMate, including how

- To add or modify products, 264
- To add additional information to products, 268
- To itemize product details, 269
- To maintain product attributes, 272
- To maintain location inventory details, 274
- To maintain product cost information, 277
- To maintain ophthalmic lens additional attributes, 278
- To maintain ophthalmic lens VSP product mapping, 279

NOTES

- If you are using the FRAMES SPEX UPC, FRAMES Quarterly CD-ROM, or Marchon Frames Diskette, go to [Using FrameMate on page 421](#) for instructions on how to use FrameMate to transfer frame information into OfficeMate.
- Before you add products to OfficeMate, set up your insurance fee schedule information and procedure codes. To set up insurance information, go to [To modify or add appointment schedule resources on page 58](#). To set up procedure codes, go to [To add & modify procedure codes on page 137](#).
- Press the **F12** key when your cursor is in a drop-down box to open a **Maintain** window and add new items to the drop-down menu selections. For more information on using the F12 key, go to [To add and maintain list box selections \(F12\) on page 17](#).

► To add or modify products
NOTES

- Only users in distribution centers and the administrative location can modify information in the Products window.
- All of the fields in the steps in this section are not applicable for all products. Record the applicable information for your product type. You can record as little or as much product information in OfficeMate as is necessary for your practice.

For information on recording product information, watch the “[Product Setup](#)” video.

1. Open the Products window. For more information on opening the Products window, go to [Opening the Products Window on page 261](#).
2. Select a product or service from the **Product Type** drop-down menu.

NOTE

Frame and lens add-ons are included in the Other and Lens Treatment product types.

3. Complete one of the following tasks:
 - a. Click **New Product** to add a new product.
 - b. Enter additional search criteria and click **F2 - Find** to search for and find an existing product. For more information on finding products, go to [Finding Products & Services on page 261](#).

NOTES

- Click **Delete** to delete a product if it is *not* linked to a fee slip, Rx order, or purchase order.
- Click **Next** and **Previous** to add or modify the previous or next product in your database.

4. Click **Copy** to copy the product details and then make changes to them to record a new product.

OR

Type the product name in the **Product Name** text box.**NOTE**

Name the product a short name (for ease and simplicity) or a number or CPT code with more than one digit.

5. Select a description to print on fee slips from the **Print on Fee Slip** drop-down menu as needed.
6. Select a stocking type from the **Stocking Type** drop-down menu.
7. Select a gender from the **Gender** drop-down menu, if applicable.
8. Select a lens category from the **Lens Category** drop-down menu, if applicable.

NOTE

You must assign contact lenses to a lens category in order for them to appear in the Select Contact Lens window in ExamWRITER.

The screenshot shows a software window titled "Products: Frames - Coach Hayley". The "Product Name" field is highlighted with a red box. The window contains various input fields and tables for product configuration. The "Insurance Groups" section contains a table with columns for Carrier, Plan, and Group. The "Patient Fees" section contains a table with columns for Patient Fee Type and Fee. The "HCFA - 1500 Additional Information" section contains fields for Place of Service, EPSTD, and EMG. The "Notes" section contains a text area. The "Medicare Allowable Fee" and "Wholesale Cost" fields are set to \$0.00. The "Commission Class" field is empty.

9. Select an item type from the **Item Type** drop-down menu, if applicable.

10. Select a manufacturer from the **Manufacturer** drop-down menu.
11. Select an appropriate **Frame and Lens Add On Type** radio button, if applicable.
12. Select a designer series from the **Designer Series** drop-down menu, if applicable.
13. Select a material from the **Material** drop-down menu, if applicable.
14. Select a mount from the **Mount** drop-down menu, if applicable.
15. Select a tint from the **Tint** drop-down menu, if applicable.
16. Select the finish from the **Finish** drop-down menu, if applicable.
17. Select an insurance fee type from the **Ins. Fee Type** drop-down menu.
18. Select the unit of measure from the **Unit of Measure** drop-down menu.
19. Select a vendor from the **Vendor** drop-down menu.
20. If the product is a contact lens, select a series from the **Series** drop-down menu.
21. Type the product number in the **Product Number** text box, if applicable.
22. Type the product cost in the **Product Cost** text box.
23. Type the usual and customary product fee in the **Product Fee** text box.

NOTE

You can assign exceptions to the Product Fee you entered on the Products tab. Perform the following steps to assign fees to individual locations:

- a. Click the Ellipses (...) next to the Product Fee field. The Location Fee Maintenance window opens.
- b. Select a location from the **Location** drop-down menu.
- c. Type the product or service fee in the **Fee** column.
- d. Repeat steps b–c for each location with an exception to the fee entered on the Products tab.
- e. Click Save when you are finished.

Location	Fee	Update Date
Fullerton Store	250.00	11/2/2007
Marchon Store	275.00	11/2/2007

24. Select a frame type from the **Frame Type** drop-down menu, if applicable.
25. Select the frame usage from the **Frame Usage** drop-down menu, if applicable.

26. Select the number of lenses per pack of contacts from the **Lenses per Pack** drop-down menu, if applicable.
27. Click the **Trial Lens Inventory** check box, if applicable.
28. Click the **On Consignment** check box, if applicable.
29. Select the **Standard Temple** check box, if applicable.
30. Select the **Inactive** check box if the product or service is inactive.
31. Select the **Quick List** check box if you are *not* maintaining inventory for this product and you want to add it to your Product Quick List window.
32. If you need to associate the product with the specific pricing of a particular insurance plan, perform the following steps:
 - a. Select an insurance carrier from the **Carrier** drop-down menu.
 - b. Select a plan from the **Plan** drop-down menu.
 - c. Select a service group from the **Group** drop-down menu.
 - d. Click **Save Line** to save the product's association with the insurance group.

NOTE

The insurance group information is only available to practices that upgraded from OfficeMate Enterprise 2.0 or OfficeMate 9.0, 9.5, or 10.0, and had at least one insurance plan that used either the Detailed Benefits or Maximum Allotments pricing methods.

The screenshot displays the 'Products: Frames - Coach Hayley' window. The 'Product Details' tab is active, showing the following fields:

- Product Name: Coach Hayley
- Print on Fee Slip: [dropdown]
- Stocking Type: Stock
- Gender: Women's
- Manufacturer: Marchon
- Designer Series: Coach
- Material: Plastic
- Mount: Plastic
- Ins. Fee Type: [dropdown]
- Unit of Measure: Each
- Vendor: Marchon
- Frame Type: Women's Plastic
- Frame Usage: Plastic
- New Since: 11/21/2008
- Inactive:
- Quick List:
- Standard Temple:
- On Consignment:

The 'Insurance Groups' table is empty:

Carrier	Plan	Group

Other sections include:

- Discount Fees:**

Patient Fee Type	Fee
Employee Fee	55.00
- HCFA - 1500 Additional Information:**
 - Place of Service: Office
 - EPSDT:
 - EMG:
- Financial Group:** Ophthalmic Materials Sales
- Production Group:** Designer Frames Fees
- Notes:** [text area]
- Commission Class:** Staff

33. If you want to add more information to the product, go to [To add additional information to products on page 268](#), [To itemize product details on page 269](#); otherwise, click **Save** and select one of the following options:
 - **Save** to save the information and keep the Products window open.
 - **Save and New** to save the information and create a new product.
 - **Save and Exit** to close the Products window.

► **To add additional information to products**

1. Open the Products window. For more information on opening the Products window, go to [Opening the Products Window on page 261](#).
2. Select a product or service from the **Product Type** drop-down menu.

NOTE Frame and lens add-ons are included in the Other and Lens Treatment product types.

3. Complete one of the following tasks:
 - Click **New Product** to add a new product. For more information on adding new products, go to [To add or modify products on page 264](#).
 - Enter additional search criteria and click **F2 - Find** to search for and find an existing product. For more information on finding products, go to [Finding Products & Services on page 261](#).

NOTES

- Click **Copy** to copy the product details and then make changes to them to record a new product.
- Click **Next** and **Previous** to add or modify the previous or next product in your database.

4. If you want to assign different patient fees for different types of patients, follow the instructions below; otherwise, go to step 5.
 - a. Select a patient fee type from the **Patient Fee Type** drop-down menu.
 - b. Type a fee in the **Fee** text box.

NOTE To delete an additional fee, select the line and click **Delete Line**.

5. Type the Medicare allowable fee in the **Medicare Allowable Fee** text box, if applicable.

6. Type the FRAMES cost, your wholesale cost, or your buying group cost in the **Wholesale Cost** text box, if applicable.

NOTE The Wholesale Cost overrides the product Fee on fee slips when you bill to VSP insurance.

7. Select a default place of service from the **Place of Service** drop-down menu if the product is typically sold off-site.
8. Type **Y** in the **EPSDT** text box if the product is part of an early periodic screening and diagnostic test.

NOTE The EPSDT is automatically entered on the CMS 1500 form in box 24H.

9. Type **Y** in the **EMG** text box if the product is related to an emergency or type **N** in the **EMG** text box if the product is not related to an emergency.

NOTE The EMG is automatically entered on the CMS 1500 form in box 24I.

10. Select a financial group from the **Financial Group** drop-down menu if the CPT code and financial group are not already linked to each other. To modify CPT codes and their associated financial groups, go to [To add & modify procedure codes on page 137](#).

NOTE The financial group you select can significantly effect the general ledger and accounting. You are required to make a selection from the Financial Group drop-down menu if you are using the General Ledger Interface.

11. Select a production group from the **Production Group** drop-down menu, if the CPT code and production group are not already linked to each other. To modify CPT codes and their associated production groups, go to [To add & modify procedure codes on page 137](#).
12. Type notes in the **Notes** box.
13. Select a commission class from the **Commission Class** drop-down menu. To add or modify commission classes, go to [To set up commission classes on page 254](#).
14. If you want to itemize product details, go to [To itemize product details on page 269](#); otherwise, click **Save** and select one of the following options:
 - **Save** to save the information and keep the Products window open.
 - **Save and New** to save the information and create a new product.
 - **Save and Exit** to close the Products window.

► To itemize product details

If you are *not* maintaining inventory and you want to itemize the size and color of frames or lenses with the same name, complete the instructions below. If you are

maintaining inventory, go to [Recording Product Inventory Details on page 439](#) to add product details.

1. Open the Products window. For more information on opening the Products window, go to [Opening the Products Window on page 261](#).
2. Select a product or service from the **Product Type** drop-down menu.

NOTE Frame and lens add-ons are included in the Other and Lens Treatment product types.

3. Complete one of the following tasks:
 - Click **New Product** to add a new product. For more information on adding new products, go to [To add or modify products on page 264](#).
 - Enter additional search criteria and click **F2 - Find** to search for and find an existing product. For more information on finding products, go to [Finding Products & Services on page 261](#).
4. Click the **Product Details** tab.

NOTES

- Click **Copy** to copy the product details and then make changes to them to record a new product.
- Click **Next** and **Previous** to add or modify the previous or next product in your database.

5. If you downloaded ophthalmic lenses from the Lens Product Loader and you want to quickly import multiple power ranges for the lenses into the table, click **Import Power** and follow the instructions below.
 - a. Click **New** and type the power range per diopter in the table cells.
 - b. Repeat step a for *every* power range with sphere and cylinder measurements, otherwise, the lens will not display on Rx orders.
 - c. Click **Save**.
 - d. Select the line with the default 0.00 to 99.00 power range and click **Delete**.
 - e. Click **Import**.

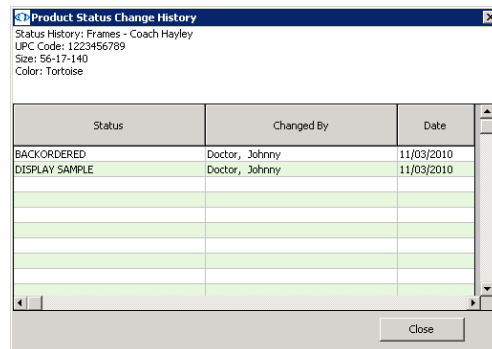
Low Sphere	High Sphere	Low Cylinder	High Cylinder
0.00	4.00	0.00	0.00
4.12	7.00	0.00	0.00
7.12	99.00	0.00	0.00
0.00	4.00	0.12	2.00
0.00	4.00	2.12	4.00
0.00	4.00	4.12	6.00
0.00	4.00	6.12	99.00
4.12	7.00	0.12	2.00
4.12	7.00	2.12	4.00
4.12	7.00	4.12	6.00
4.12	7.00	6.12	99.00
7.12	12.00	0.12	2.00
7.12	12.00	2.12	4.00
7.12	12.00	4.12	6.00
12.12	99.00	0.00	99.00

6. Select a line in the table to modify product details already recorded.

NOTE Select a line and click **Delete** to delete the line if it is *not* linked to a fee slip, Rx order, or purchase order.

7. Select the product's status:
 - Select the **Stock/Inline** radio button if the product is regularly kept in inventory at store locations and is available for sale.
 - Select the **Non Stock/Not Inline** radio button if the item is not regularly kept in inventory at the store locations, but is ordered from a vendor when a unit is sold.
 - Select the **Inactive** radio button if the product is not regularly kept in inventory at the store locations, nor is it ordered from a vendor when a unit is sold. Items marked as inactive do not appear in product order search results.
 - Select the **Discontinued** radio button if the product is no longer available. Items marked as discontinued do not appear in product order search results.
 - Select the **Backordered** check box if the item is not currently available from the vendor or manufacturer and type the date in which the item is again expected to be available in the **ETA** text box. This date can also be entered on the Receive PO window. In the event two different dates are entered, the latest date is displayed.
 - Select the **Display Sample** check box to indicate that there are sample or display units of this product. The minimum display quantity for the product is set to one. You can change the minimum sample quantity on the All Locations Inventory tab.
8. To view the history of status changes for the selected product, click **Status Changes**; otherwise go to step 10.

The Product Status Change History window opens.



9. Click **Close** when you are finished reviewing the status change history.
10. Type the product size information in the appropriate fields. The Product window displays the appropriate fields based on the type of product:
 - Contact lens: **BC**, **Dia**, **Sph**, **Cyl**, **Axis**, and **Add** text boxes.
 - Frames, plano sunglasses, and ready readers: **Eye**, **Bridge**, **Temple**, **DBL**, **A**, **B**, and **ED** text boxes.
 - Ophthalmic lenses: **Low Sphere**, **High Sphere**, **Low Cyl**, and **High Cyl** text boxes.
 - Accessories, lens treatments and other products do not require size information.

11. Type the base cost and base fee in the **Base Cost** and **Base Fee** text boxes.

NOTE The base cost and base fee significantly effect the general ledger and accounting. For more information on recording product costs, go to [To maintain product cost information on page 277](#).

12. Type the product code in the **Product Code** text box.
 13. Type the UPC code in the **UPC Code** text box.
 14. Type or select a color from the **Color** drop-down menu, if applicable.
 15. If the product is an ophthalmic lens, select a code from the **Prod. CPT/HCPCS Code** drop-down menu.

NOTE The code that you select will only be used if do *not* use Rx orders. If you use Rx orders, the CPT code will automatically be populated on the fee slip according to the prescription in the Rx order.

16. Click **Save** and select one of the following options:
- **Save** to save the information and keep the Products window open.
 - **Save and New** to save the information and create a new product.
 - **Save and Exit** to close the Products window.

► To maintain product attributes

For information on the attributes, watch the “[Attributes](#)” video.

Attributes are inherent characteristics of a product. For example, you could describe an ophthalmic lens as polycarbonate, polarized, and with scratch coat and antireflective coat, and each of those attributes translates into a billable code (V-code) on the insurance claim.

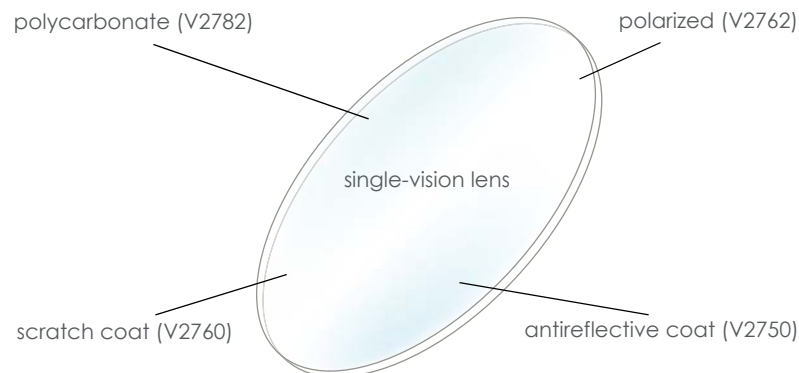


Figure 4-4: An example of the attributes that make up a lens. OfficeMate allows you assign multiple attributes to a product, which enables you to find products by attribute, assign a cost to each attribute, and add billable codes to each attribute.

Attributes are only those characteristics that are inherent to a product as it is manufactured. Add-ons are not attributes. For example, a scratch coat that is added to the lens at the lab is not an attribute.

Product attributes are used in inventory counting, insurance claims, retail and third-party pricing, and reporting. Once your products are assigned attributes, it is possible to update the costs and fees of many products at once based on their attributes.

NOTE

To help understand attributes, let's put them into perspective. If you were selling cars instead of eyewear, you might be inclined to describe and sort your products by means other than make and model. For example, you might sort your cars by such attributes as two-door or four-door, convertible or hardtop, color, and engine type. Think of all the terms you might use to describe the details of a car, and each of those terms could be considered an attribute.

This same principle applies to the lenses, frames, and other products that you sell in OfficeMate.

Set up the product attributes in the Products window. The attribute information in the Products window is later matched against the insurance plan's allowable benefit when the fee slip is created. Each attribute associated with a product that falls within the plan's allowable benefits translates into increased revenue for your practice.

1. Open the Products window. For more information on opening the Products window, go to [Opening the Products Window on page 261](#).
2. Select a product or service from the **Product Type** drop-down menu.

NOTE

Frame and lens add-ons are included in the Other and Lens Treatment product types.

3. Complete one of the following tasks:
 - Click **New Product** to add a new product. For more information on adding new products, go to [To add or modify products on page 264](#).
 - Enter additional search criteria and click **F2 - Find** to search for and find an existing product. For more information on finding products, go to [Finding Products & Services on page 261](#).

NOTES

- Click **Copy** to copy the product details and then make changes to them to record a new product.
- Click **Next** and **Previous** to add or modify the previous or next product in your database.

4. Click the **Product Details** tab.
5. Select a product from the list.
6. Select the product's attributes from the **Attributes** drop-down menus. The CPT/HCPCS Code, Product Cost, and Product Fee fields automatically populate based on the attribute selected. For information on associating

procedure codes, costs, and fees with attributes, go to [To add & modify attributes on page 141](#).

NOTES

- Some product attributes, such as Lens Cat./Base and Material, may already be assigned based on selections made on the Products tab of the Product window. For information on changing these attributes, go to [To add or modify products on page 264](#).
- The list of attributes that is available in each drop-down menu is maintained in the Third Party Setup window in OfficeMate Administration. For more information about adding and modifying attributes, go to [To add & modify attributes on page 141](#).

7. Repeat steps 5–6 to apply attributes to each of the products listed at the top of the window.

Discontinued	All Locations	Low Sphere	High Sphere	Low Cyl.	High Cyl.	Base Cost	Base Fee	Total Prod Fee	Product Code	UPC Code
		0.00	99.00	0.00	99.00	15.00	40.00	76.00	897097	

Product Sizes: Low Sphere: 0.00, High Sphere: 99.00, Low Cyl.: 0.00, High Cyl.: 99.00

Base Cost: \$15.00, Cost Changed: 11/19/2008, Prod Code: 8970978987

Base Fee: \$40.00, Fee Changed: 11/19/2008, UPC Code: , Avg Cost: \$0.00

Attributes	CPT/HCPS Code	Prod. Cost	Prod. Fee	Cost Changed	Fee Changed
Lens Cat./Base: BF Executive		\$15.00	\$40.00	11/19/2008	11/19/2008
Lens Type: Progressive - Standard	v2781	\$5.00	\$15.00	11/19/2008	11/19/2008
Material: Polycarbonate	v2784	\$4.00	\$10.00	11/19/2008	11/19/2008
Color: Photochromic	v2744	\$3.00	\$7.00	11/19/2008	11/19/2008
Other: A/R Coating (Basic)	v2750	\$2.00	\$4.00	11/19/2008	11/19/2008
Other:		\$0.00	\$0.00		
Other:		\$0.00	\$0.00		

8. Click **Save** and select one of the following options:
 - **Save** to save the information and keep the Products window open.
 - **Save and New** to save the information and create a new product.
 - **Save and Exit** to close the Products window.

► To maintain location inventory details

If you are *not* maintaining inventory and you want to itemize the size and color of frames or lenses with the same name, complete the instructions below. If you are

maintaining inventory, go to [Recording Product Inventory Details on page 439](#) to add product details.

1. Open the Products window. For more information on opening the Products window, go to [Opening the Products Window on page 261](#).
2. Select a product or service from the **Product Type** drop-down menu.

NOTE Frame and lens add-ons are included in the Other and Lens Treatment product types.

3. Complete one of the following tasks:
 - Click **New Product** to add a new product. For more information on adding new products, go to [To add or modify products on page 264](#).
 - Enter additional search criteria and click **F2 - Find** to search for and find an existing product. For more information on finding products, go to [Finding Products & Services on page 261](#).

NOTES

- Click **Copy** to copy the product details and then make changes to them to record a new product.
- Click **Next** and **Previous** to add or modify the previous or next product in your database.

4. Click the **Product Details** tab.
5. Click the **All** Locations Inventory tab.

6. For each product, enter the following information as needed for each location:
 - Type the **Board Location** as needed.
 - Type the **Base Cost** for each location if it varies from the Base Cost on the Product Details tab.
 - Type the **Base Fee** for each location if it varies from the Base Fee on the Product Details tab.
 - Type the quantity the location should have on hand in the **Stock Level** field.
 - Type the quantity on hand that triggers the product to be reordered in the **Min Reorder Point** field.
 - Type the quantity to reorder in the **Min Reorder Qty** field.
 - Type the number of display or sample items each location has on hand in the **Min Display Qty** field.

NOTE

- When the quantity on hand drops below the minimum reorder point, OfficeMate adds the product to a purchase order when the purchase order is created from the quantity on hand. For information on creating purchase orders based on quantity on hand, refer to [on page 449](#).
- The Avg Cost field is informational only and displays the average cost of the product. The average cost is weighted, based on the cost of the product at the time each unit was received into inventory.
- The Qty on Order field represents the quantity on order when a purchase order is created. Compare the Qty on Order to the Qty Committed to know what is available as stock and is not already committed.
- The Qty Committed field represents the quantity of a product sold that was not on hand, is currently on order, and is still owed to a patient. This eliminates the previous quantity going negative. The only way to clear this quantity is to mark the product as Dispensed on the Order window.
- The Qty In Process field represents items that have not been dispensed to the patient. The only way to clear this quantity is to mark the product as Dispensed on the Order window.

- Select the Discontinued check box to discontinue the product at the individual location.
7. Click **Save** and select one of the following options:
 - **Save** to save the information and keep the Products window open.
 - **Save and New** to save the information and create a new product.
 - **Save and Exit** to close the Products window.

► To maintain product cost information

NOTE The base cost and base fee significantly effect the general ledger and accounting.

1. Open the Products window. For more information on opening the Products window, go to [Opening the Products Window on page 261](#).
2. Select a product or service from the **Product Type** drop-down menu.

NOTE Frame and lens add-ons are included in the Other and Lens Treatment product types.

3. Complete one of the following tasks:
 - Click **New Product** to add a new product. For more information on adding new products, go to [To add or modify products on page 264](#).
 - Enter additional search criteria and click **F2 - Find** to search for and find an existing product. For more information on finding products, go to [Finding Products & Services on page 261](#).

NOTES

- Click **Copy** to copy the product details and then make changes to them to record a new product.
- Click **Next** and **Previous** to add or modify the previous or next product in your database.

4. Click the **Product Details** tab.
5. Select a product from the list.
6. Type the base cost of the product in the **Base Cost** text box.
7. Type the base fee of the product in the **Base Fee** text box.

The screenshot displays the 'Products: Frames - Coach Hayley' application window. The main area contains a table with the following data:

	Stock/Inline	Non Stock/Not Inline	Discontinued	Inactive	Backordered	Backordered ETA	Display Sample	Color	Eye	Bridge	Temple	Base Cost	Base Fee	Total Fee	Product Code
1								Tortoise	56	17	140	\$55.00	\$110.00	\$110.00	
2															
3															
4															
5															

Below the table, the 'Product Details' section shows the following information:

- Base Cost: \$55.00
- Base Fee: \$110.00
- Fee Changed: 11/3/2010
- Product Code: 1223456789
- Color: Tortoise

The 'Product Attributes' section shows a table with the following data:

Cat./Base	Attributes	CPT/HCPCS Code	Prod. Cost	Prod. Fee	Fee Changed
	Ophthalmic Frame	N2020	\$55.00	\$110.00	11/3/2010
Options			\$0.00	\$0.00	
Options			\$0.00	\$0.00	
Options			\$0.00	\$0.00	
Options			\$0.00	\$0.00	
Options			\$0.00	\$0.00	
Options			\$0.00	\$0.00	

NOTES

- The Base Cost and Base Fee entered here automatically populates base attribute product cost and product fee on the Product Attributes tab.
- To record base costs and fees by location, perform the following steps:
 - a. Click the **All Locations Inventory** tab.
 - b. Type the cost and fee information in the **Base Cost** and **Base Fee** fields for each location, as needed.
- If the Base Cost and Base Fee information is blank or set to zero on the All Locations Inventory tab, OfficeMate looks to the Product Details tab for base cost and fee information.
- The Avg Cost field is a read-only field that displays the average cost of the product throughout its lifetime.

8. Adjust the **Prod. Cost** and **Prod. Fee** fields on the Product Attributes tab as needed.
9. Adjust the **Base Cost** and **Base Fee** fields on the All Locations Inventory tab as needed.
10. Repeat steps 5–9 to apply costs and fees to each of the products listed at the top of the window.
11. Click **Save** and select one of the following options:
 - **Save** to save the information and keep the Products window open.
 - **Save and New** to save the information and create a new product.
 - **Save and Exit** to close the Products window.

► **To maintain ophthalmic lens additional attributes**

NOTES

- Often, there are additional material or lab costs for high-power lenses, oversized lenses, and other prescription needs that need to be calculated into the patient's fee slip. By recording additional attribute information, you ensure that OfficeMate automatically includes those fees on fee slips and insurance claims when they are applicable.
- You can update the additional attributes for all ophthalmic lenses in the Third Party Setup window. Changes made in Third Party Setup overwrite any changes made in the Products window. For more information about maintaining additional attributes for all ophthalmic lenses, go to [To add & modify additional attributes on page 143](#).

1. Open the Products window. For more information on opening the Products window, go to [Opening the Products Window on page 261](#).
2. Select **Ophthalmic Lenses** from the **Product Type** drop-down menu.

3. Complete one of the following tasks:
 - Click **New Product** to add a new product. For more information on adding new products, go to [To add or modify products on page 264](#).
 - Enter additional search criteria and click **F2 - Find** to search for and find an existing product. For more information on finding products, go to [Finding Products & Services on page 261](#).

NOTES

- Click **Copy** to copy the product details and then make changes to them to record a new product.
- Click **Next** and **Previous** to add or modify the previous or next product in your database.

4. Click the **Additional Attributes** tab.
5. In the **Prism** group, enter the measurement range for each cost or fee point.
6. Type the **Prod Cost** and **Addl Fee** information for each measurement range *per lens*.
7. Repeat steps 5–6 for the **Add Power** and **Oversize** groups. Enter cost and fee information *per pair*.

The screenshot shows the 'Additional Attributes' tab in the 'Products : Ophthalmic Lenses - BF GL CT 25 Clr' window. It contains three sections for entering product details:

- Prism:** A dropdown menu is set to 'Prism'. The table below it has columns for 'To', 'Prod. Cost', and 'Addl Fee'. The first row shows a range from 0.12 to 99.00 with a Prod. Cost of \$0.00 and an Addl Fee of \$0.00.
- Add Power:** A dropdown menu is set to 'BF Add Power'. The table below it has columns for 'To', 'Prod. Cost', and 'Addl Fee'. The first row shows a range from 3.25 to 4.50 with a Prod. Cost of \$0.00 and an Addl Fee of \$0.00.
- Oversize:** A dropdown menu is set to 'Over 57mm A_Box'. The table below it has columns for 'To', 'Prod. Cost', and 'Addl Fee'. The first row shows a range from 58.00 to 99.00 with a Prod. Cost of \$0.00 and an Addl Fee of \$0.00.

Each section also includes a 'Delete Line' button and checkboxes for 'Cost Changed' and 'Fee Changed'.

8. Click **Save** and select one of the following options:
 - **Save** to save the information and keep the Products window open.
 - **Save and New** to save the information and create a new product.
 - **Save and Exit** to close the Products window.

► **To maintain ophthalmic lens VSP product mapping**

1. Open the Products window. For more information on opening the Products window, go to [Opening the Products Window on page 261](#).
2. Select **Ophthalmic Lenses** from the **Product Type** drop-down menu.

3. Complete one of the following tasks:
 - Click **New Product** to add a new product. For more information on adding new products, go to [To add or modify products on page 264](#).
 - Enter additional search criteria and click **F2 - Find** to search for and find an existing product. For more information on finding products, go to [Finding Products & Services on page 261](#).

NOTES

- Click **Copy** to copy the product details and then make changes to them to record a new product.
- Click **Next** and **Previous** to add or modify the previous or next product in your database.

4. Click the **VSP Product** tab.
5. Select options that apply to the lens from the **Vision Type**, **Material**, and **Lens** drop-down menus.

NOTE

Options may already be selected based on information recorded on the Products tab.

6. Click **Save** and select one of the following options:
 - **Save** to save the information and keep the Products window open.
 - **Save and New** to save the information and create a new product.
 - **Save and Exit** to close the Products window.

You can record as little or as much service information in OfficeMate as is necessary for your practice. This section tells you how to record services in OfficeMate, including how

- [To add or modify services, 281](#)
- [To add additional information to services, 284](#)
- [To itemize service details, 286](#)
- [To maintain service attributes, 287](#)

NOTES

- Before you add services to OfficeMate, set up your insurance fee schedule information and procedure codes. To set up insurance information, go to [To modify or add appointment schedule resources on page 58](#). To set up procedure codes, go to [To add & modify procedure codes on page 137](#).
- Press the **F12** key when your cursor is in a drop-down box to open a **Maintain** window and add new items to the drop-down menu selections. For more information on using the F12 key, go to [To add and maintain list box selections \(F12\) on page 17](#).

For information on recording service information, watch the "Services" video.

► **To add or modify services**

1. Open the Products window. For more information on opening the Products window, go to [Opening the Products Window on page 261](#).
2. Select **Services** from the **Product Type** drop-down menu.
3. Complete one of the following tasks:
 - Click **New Product** to add a new service.
 - Enter additional search criteria and click **F2 - Find** to search for and find an existing service. For more information on finding services, go to [Finding Products & Services on page 261](#).

NOTES

- Click **Delete** to delete a service if it is *not* linked to a fee slip, Rx order, or purchase order.
- Click **Next** and **Previous** to add or modify the previous or next service in your database

4. Click **Copy** to copy the service details and then make changes to them to record a new service.

OR

Type the service name in the **Product Name** text box.

NOTE

Name the service a short name (for ease and simplicity) or a number or CPT code with more than one digit.

5. Select a description to print on fee slips from the **Print on Fee Slip** drop-down menu.
6. Select a stocking type from the **Stocking Type** drop-down menu.

7. Select modifiers from the **First Modifier** and **Second Modifier** drop-down lists as needed.

NOTE

Modifiers will automatically be recorded on the CMS 1500 form in box 24D when the service is billed to an insurance carrier.

8. Select the type of service from the **Type of Service** drop-down menu.
9. Select a fee type from the **Ins. Fee Type** drop-down menu, if applicable.
10. Type or select the duration in minutes for the service in the **Duration in Min.** text box, if applicable.
11. Type or select the units or days of the service in the **Units or Days** text box, if applicable.
12. Select the **Inactive** check box if the service is inactive.
13. Select the **Quick List** check box to add the service to your Product Quick List window.
14. Select an insurance fee type from the **Ins. Fee Type** drop-down menu.
15. Select the **Recall Reminder** check box if you want to be reminded to schedule the patient for a recall when this service is billed on a fee slip.
16. Select the **Update Last Exam** check box if you want to update a patient's last exam date when this service is billed on a fee slip.

17. If you need to associate the service with the specific pricing of a particular insurance plan, perform the following steps:
 - a. Select an insurance carrier from the **Carrier** drop-down menu.
 - b. Select a plan from the **Plan** drop-down menu.
 - c. Select a service group from the **Group** drop-down menu.
 - d. Click **Save Line** to save the service's association with the insurance group.

NOTE

The insurance group information is only available to practices that upgraded from OfficeMate Enterprise 2.0 or OfficeMate 9.0, 9.5, or 10.0, and had at least one insurance plan that used either the Detailed Benefits or Maximum Allotments pricing methods.

NOTE

Only the insurance plans that are set up in the Detailed Benefits window will be available from the drop-down menus. For information on setting up the insurance detailed benefits, go to [To open the Detail Benefits window on page 169](#).

18. If you want to add more information to the service, go to [To add additional information to services on page 284](#) and [To itemize service details on page 286](#); otherwise, click **Save** and select one of the following options:
 - **Save** to save the information and keep the Products window open.
 - **Save and New** to save the information and create a new service.
 - **Save and Exit** to close the Products window.

► **To add additional information to services**

1. Open the Products window. For more information on opening the Products window, go to [Opening the Products Window on page 261](#).
2. Select **Services** from the **Product Type** drop-down menu.
3. Complete one of the following tasks:
 - Click **New Product** to add a new service. For more information on adding new services, go to [To add or modify services on page 281](#).
 - Enter additional search criteria and click **F2 - Find** to search for and find an existing service. For more information on finding services, go to [Finding Products & Services on page 261](#).

NOTES

- Click **Copy** to copy the service details and then make changes to them to record a new service.
- Click **Next** and **Previous** to add or modify the previous or next service in your database.

4. If you want to assign different patient fees for different types of patients, follow the instructions below; otherwise, go to step 5.
 - a. Select a patient fee type from the **Patient Fee Type** drop-down menu.
 - b. Type a fee in the **Fee** text box.

The screenshot shows the 'Products : Services - 65600' window. The 'Discount Fees' section is highlighted with a red box. It contains a table with two columns: 'Patient Fee Type' and 'Fee'. The 'Patient Fee Type' dropdown is open, showing a list of options: 'Employee Fee', 'Relative Fee', 'Senior Citizen Fee', and 'Usual and Customary Fee'. The 'Fee' column is currently empty. Below the table, there are two text boxes: 'Medicare Allowable Fee' and 'Frames/Buying Group Cost', both containing '\$0.00'. A 'Delete Line' button is located at the bottom right of the table.

NOTE

To delete an additional fee, select the line and click **Delete Line**.

5. Type the Medicare allowable fee in the **Medicare Allowable Fee** text box, if applicable.
6. Type the buying group cost in the **Frame/Buying Group Cost** text box if applicable.

- Type Y in the **EPSDT** text box if the service is part of an early periodic screening and diagnostic test.

NOTE The EPSDT is automatically entered on the CMS 1500 form in box 24H.

- Type Y in the **EMG** text box if the service is related to an emergency or type N in the **EMG** text box if the service is not related to an emergency.

NOTE The EMG is automatically entered on the CMS 1500 form in box 24C.

- Select a financial group from the **Financial Group** drop-down menu if the CPT code and financial group are not already linked to each other. To modify CPT codes and their associated financial groups, go to [To add & modify procedure codes on page 137](#).

NOTE The financial group you select can significantly effect the general ledger and accounting. You are required to make a selection from the Financial Group drop-down menu if you are using the General Ledger Interface.

- Select a production group from the **Production Group** drop-down menu, if the CPT code and production group are not already linked to each other. To modify CPT codes and their associated production groups, go to [To add & modify procedure codes on page 137](#).

- Type notes in the **Notes** box.
- Select a commission class from the **Commission Class** drop-down menu. To add or modify commission classes, go to [To set up commission classes on page 254](#)

13. If you want to itemize service details, go to [To itemize service details on page 286](#); otherwise, click **Save** and select one of the following options:
 - **Save** to save the information and keep the Products window open.
 - **Save and New** to save the information and create a new service.
 - **Save and Exit** to close the Products window.

► To itemize service details

If you want to itemize details for your services, complete the instructions below.

1. Open the Products window. For more information on opening the Products window, go to [Opening the Products Window on page 261](#).
2. Select **Services** from the **Product Type** drop-down menu.
3. Complete one of the following tasks:
 - Click **New Product** to add a new service. For more information on adding new services, go to [To add or modify services on page 281](#).
 - Enter additional search criteria and click **F2 - Find** to search for and find an existing service. For more information on finding services, go to [Finding Products & Services on page 261](#).

NOTES

- Click **Copy** to copy the service details and then make changes to them to record a new service.
- Click **Next** and **Previous** to add or modify the previous or next service in your database.

4. Click the **Product Details** tab.
5. Click **New** to add new service details or select in a line in the table to modify service details already recorded.

NOTE

Select a line and click **Delete** to delete the line if it is *not* linked to a fee slip, Rx order, or purchase order.

6. Type the base cost of the service in the **Base Cost** text box.
7. Type the base fee of the service in the **Base Fee** text box.

NOTES

- The Base Cost and Base Fee entered here automatically populates base attribute product cost and product fee on the Product Attributes tab.
- To record base costs and fees by location, perform the following steps:
 - a. Click the **All Locations Inventory** tab.
 - b. Type the cost and fee information in the **Base Cost** and **Base Fee** fields for each location, as needed.
- If the Base Cost and Base Fee information is blank or set to zero on the All Locations Inventory tab, OfficeMate looks to the Product Details tab for base cost and fee information.
- The Avg Cost field is a read-only field that displays the average cost of the service throughout its lifetime.

8. Adjust the **Prod. Cost** and **Prod. Fee** fields on the Product Attributes tab as needed.
9. Adjust the **Base Cost** and **Base Fee** fields on the All Locations Inventory tab as needed.
10. Type the product code in the **Prod Code** text box.
11. Type the UPC code in the **UPC Code** text box.
12. Select a procedure code from the **CPT** drop-down menu.

NOTE

The CPT code is automatically entered on the CMS 1500 form in box 24D.

The screenshot shows the 'Products : Services - 65600' window. It has two tabs: 'Products' and 'Product Details'. The 'Product Details' tab is active, showing a table with columns: Base Cost, Base Fee, Total Fee, Product Code, UPC Code, and CPT. The first row has values: 0.00, 0.00, 0.00, 65600, and 65600. Below this is a section for 'Base Cost', 'Cost Changed', 'Base Fee', 'Fee Changed', 'Product Code', 'UPC Code', and 'CPT' with input fields. The 'Product Attributes' tab is also visible, showing a table with columns: Exam Cat./Base, Attributes, CPT/HCPCS Code, Prod. Cost, Prod. Fee, and Fee Changed. The 'Attributes' dropdown is set to 'Tattoo Cornea', and the 'CPT/HCPCS Code' is '65600'. The 'Prod. Cost' and 'Prod. Fee' are both '\$0.00', and the 'Fee Changed' date is '8/22/2002'. On the right side of the window, there are buttons for 'Save', 'Cancel', 'Delete', 'New', 'Copy', and 'Create Barcodes'.

13. Click **Save** and select one of the following options:
 - **Save** to save the information and keep the Products window open.
 - **Save and New** to save the information and create a new service.
 - **Save and Exit** to close the Products window.

► **To maintain service attributes**

For information on the attributes, watch the “Attributes” video.

Attributes are characteristics of a service that translate into billable codes on the insurance claim. Set up the service attributes in the Products window. The attribute information in the Products window is later matched against the insurance plan’s allowable benefit when the fee slip is created. Each attribute associated with a service that falls within the plan’s allowable benefits translates into increased revenue for your practice.

1. Open the Products window. For more information on opening the Products window, go to [Opening the Products Window on page 261](#).
2. Select **Services** from the **Product Type** drop-down menu.

3. Complete one of the following tasks:
 - Click **New Product** to add a new service. For more information on adding new services, go to [To add or modify services on page 281](#).
 - Enter additional search criteria and click **F2 - Find** to search for and find an existing service. For more information on finding services, go to [Finding Products & Services on page 261](#).

NOTES

- Click **Copy** to copy the service details and then make changes to them to record a new service.
- Click **Next** and **Previous** to add or modify the previous or next service in your database.

4. Click the **Product Details** tab.
5. Ensure that the **Exam Cat.Base Attribute** drop-down menu displays the same description as the CPT drop-down menu.
6. Select additional attributes from the **Attributes** drop-down menus as needed.

The CPT/HCPCS Code, Product Cost, and Product Fee fields automatically populate based on the attribute selected. For information on associating procedure codes, costs, and fees with attributes, go to [To add & modify attributes on page 141](#).

The screenshot shows the 'Products: Services - 65600' window. The 'Product Details' tab is active. At the top, there is a table with columns: Base Cost, Base Fee, Total Fee, Product Code, UPC Code, and CPT. The first row shows values: 0.00, 0.00, 0.00, and 65600. Below the table are input fields for Base Cost (\$0.00), Cost Changed, Base Fee (\$0.00), Fee Changed (8/22/2002), Product Code, and UPC Code. The CPT dropdown is set to '65600 Tattoo Cornea'. The 'Product Attributes' section has a table with columns: Attributes, CPT/HCPCS Code, Prod. Cost, Prod. Fee, and Fee Changed. The 'Exam Cat./Base' dropdown is set to 'Tattoo Cornea', and the 'Attributes' dropdown is also set to 'Tattoo Cornea'. An arrow points from the 'Exam Cat./Base' dropdown to the 'Attributes' dropdown.

7. Click **Save** and select one of the following options:
 - **Save** to save the information and keep the Products window open.
 - **Save and New** to save the information and create a new service.
 - **Save and Exit** to close the Products window.

Updating Many Products & Services

For information on updating many products and services, watch the "Product Maintenance" video.

OfficeMate allows you to update information for multiple products and services at one time by using the Product Maintenance window. For example you can increase the product fee, change the attributes, or inactivate several products or services at the same time.

NOTE

You cannot undo changes made in the Product Maintenance window. If you make a mistake, you can return to the Product Maintenance window and make additional changes that counteract the mistake; however, not all mistakes can be easily fixed.

The Product Maintenance window takes you through a series of steps in which you select the search criteria, select the products you wish to update, and then select the product information that you wish to update. This section describes the steps to maintain product information, including how

- [To select products & services to update, 289](#)
- [To update products & services, 292](#)

► To select products & services to update

1. Open the Products window using one of the following methods:

NOTE

Only users in distribution centers and the administrative location can modify information in the Product Maintenance window.

- Click the **Products** icon and select **Product Maintenance**.
 - Click **Tasks** on the main window toolbar and select **Product Maintenance**.
2. Select a product type from the **Product Type** drop-down menu.

3. Enter search criteria in the remaining fields as needed. You must enter at least one search criterion. Enter as much or as little search criteria as needed. The more criteria you add, the narrower your search results.
 - a. Type a name in the **Product Name** field to limit the search to products with that name.

NOTE	For the best results, type only the first few characters of the product name.
-------------	---

- b. Type a name in the **Print on FS** field to limit the search to products with that name.

NOTE	For the best results, type only the first few characters of the fee slip name.
-------------	--

- c. Select a manufacturer from the **Manufact** drop-down menu.
 - d. Type a product code in the **Prod Code** field.

NOTE	For the best results, type only the first few characters of the product code.
-------------	---

- e. Select a financial group from the **Fin Group** drop-down menu.
 - f. Select a production group from the **Prod Group** drop-down menu.
 - g. Select a procedure code from the **CPT/HCPCS** drop-down menu, if applicable.
 - h. Type the **Sphere Low** and **High** values, if applicable.
 - i. Type the **Cylinder High** and **Low** values, if applicable.
 - j. Select the **Inactive** check box to limit the search results to inactive products.
 - k. Select the **On Consignment** check box to limit the search results to consignment items.
 - l. Select a store from the **Location** drop-down menu and enter the minimum and maximum quantity on hand in the **Qty on Hand** text boxes

- to limit your search to products of certain quantities at a specific location.
- m. Select beginning and ending dates from the **Entered** and **To** fields to limit your search to products entered during a specific date range.
 - n. Select a designer from the **Designer** drop-down menu, as needed.
 - o. Select a stocking type from the **Stocking Type** drop-down menu, as needed.
 - p. Select a service location from the **POS** drop-down menu, as needed.
 - q. Select a commission class from the **Comm. Class** drop-down menu, as needed. To add or modify commission classes, go to [To set up commission classes on page 254](#)
 - r. Type Y or N in the **EPSDT** text box to refine by early diagnosis and treatment products and services, as needed.
 - s. Type Y or N in the **EMG** text box to refine by emergency products and services, as needed.
 - t. Depending upon the product type you selected, enter the product-specific search criteria as needed.
 - u. Select product attributes from the **Attributes** drop-down menus as needed.
 - v. Select either the **Prod. Fee** or **Prod. Cost** radio button to limit the search results to a specific price range.
 - w. If you selected the Prod. Fee or Prod. Cost radio button, enter a price range in the **From** and **To** fields for each attribute as needed.

The screenshot shows the 'Product Maintenance' window with the following details:

- Product Type:** Contact Lenses
- Product Name:** (empty)
- Print on Fee Slip:** (empty)
- Manufacturer:** Z vendor
- Product Code:** (empty)
- Financial Group:** (empty)
- Production Group:** (empty)
- CPT/HCPCS:** (empty)
- Inactive:** **On Consignment:**
- Location:** (empty)
- Qty on Hand:** (empty)
- Attributes:** Lens Cat./Base: Soft Toric; Lens Type: (empty); Other 1-5: (empty)
- CPT/HCPCS Code:** V2521
- Price Range:** Prod. Fee; Prod. Cost. From: \$0.00; To: \$0.00
- Buttons:** Search, Clear, Print, Cancel, Continue>>
- Summary:** Select All, Unselect All, No. of items selected: 0
- Table Headers:** Product ID #, Selected, Product Name, Print on Fee Slip, CPT, TotalProdFee, Manufacturer, LensCategory, Material, LowSphere, HighSphere

4. Click **Search**.

The search results are displayed at the bottom of the Product Maintenance window.

5. From the search results, select the products that you want to update using one of the following methods:
 - Deselect the check boxes next to the products you do not want to update.
 - Click **Unselect All** and select the check boxes of the products you want to update.
 - Click **Select All** to select all of the check boxes.

The screenshot shows the 'Product Maintenance' window with 'Contact Lenses' selected as the Product Type. The window contains several input fields for product details and a table of search results. The table has the following data:

Select	Product	Print on Fee Slip	CPT/HCPC	Total Prod	Manufacturer	Lens Category	Base	Dia.	Shpere	Cyl.	Axis	Add	Color
<input checked="" type="checkbox"/>	ACUVUE TORIC	ACUVUE TORIC	V2521	44.00	Z vendor	Soft Toric	8.40	13.70	0.00	0.00	0.00	0.00	
<input checked="" type="checkbox"/>	ACUVUE TORIC	ACUVUE TORIC	V2521	44.00	Z vendor	Soft Toric	8.20	14.00	0.00	0.00	0.00	0.00	
<input type="checkbox"/>	ACUVUE TORIC	ACUVUE TORIC	V2521	44.00	Z vendor	Soft Toric	8.40	14.00	0.00	0.00	0.00	0.00	

6. Click **Clear** to clear the search criteria and search results if you wish to start over.
7. Click **Print** to print a list of the search results as needed.
8. Once you have selected the products from the search results that you want to update, click **Continue** to open the Maintenance Update window and go to [To update products & services on page 292](#).

► To update products & services

1. Open the Product Maintenance window and search for the products or services that you want to update. For information on opening the Product

Maintenance window and searching for products or services, go to [To select products & services to update on page 289](#).

2. Enter the general product information that you want to update:

NOTES

- Enter only the information that needs to be updated for all of the products selected on the Product Maintenance window.
- The information you enter on the Maintenance Update window will overwrite any information saved in the individual products. Do not enter information that should remain unique for each product selected on the Product Maintenance window.
- Do not enter product information that does not need to be updated.

- Select the **Manufacturer** check box and select a manufacturer from the drop-down menu to update the manufacturer for all of the selected products.
- Select the **Designer** check box and select a designer from the drop-down menu to update the designer for all of the selected products.
- Select the **Print on Fee Slip** check box and type a fee slip description to update the description for all of the selected products.
- Select the **Financial Group** check box and select a financial group from the drop-down menu to update the financial group for all of the selected products.

NOTE

The financial group you select can significantly effect the general ledger and accounting.

- Select the **Production Group** check box and select a production group from the drop-down menu to update the production group for all of the selected products.
 - Select the **Inactive** check box and select the **True** radio button to mark the selected products as inactive. Select the **False** radio button to mark all of the selected products as active.
 - Select the **On Consignment** check box and select the **True** radio button to mark the selected products as consignment items. Select the **False** radio button to remove the consignment indicator from the selected products.
3. Enter the attribute information that you want to update:
 - a. Select the check box(es) that corresponds with the attribute(s) you want to update.
 - b. Select the appropriate attribute from the drop-down menu(s) as needed.

4. Enter the pricing information that you want to update:

NOTES

- You cannot undo changes made in the Product Maintenance window. If you make a mistake, you can return to the Product Maintenance window and make additional changes that counteract the mistake; however, not all mistakes can be easily fixed.
- Changing the cost and fee of attributes on the Maintenance Update window only effects the attributes of the products selected on the Product Maintenance window. For information on changing the cost or fee of attributes for all new products, go to [To add & modify attributes on page 141](#).

- Select the check box(es) that corresponds with the attribute cost(s) or fee(s) you want to update.
- Select the **Percent** radio button to update the product cost or fee by a percentage, or select the **Amount** radio button to change the product cost of fee by a specific amount.
- From the **Math** drop-down menus, select the operation you wish to perform. Refer the table below for a description of each of the Math operators.

Operator	Description
+	Adds the percentage or amount specified to the existing product cost or fee.
-	Subtracts the percentage or amount specified from the existing product cost or fee.
=	Resets the cost or fee to the specified amount regardless of the cost or fee currently associated with the products.

- Type the percent or amount of the cost or fee change.
- Select the **Update Prod. Cost** radio button to update the product cost information, or select the **Update Prod. Fee** radio button to update the product fee information.
- If you want all of the product costs and fees to end with the same amount of cents (for example, maybe your costs or fees end with 99 cents: \$1.99, \$2.99, \$3.99, etc.), type the number of cents in the **End** text box.

NOTE

Be sure to type the cents after the decimal point.

- If you entered any cents in step f, select the **Up** radio button to round the price up to the cents you entered in step f, or select the **Down** radio button to round the price down to the cents you entered in step f.

- Review your changes for accuracy.
- If you need to clear your changes, click **Clear**.
- Click **Save and Continue** to save your changes.

A dialog box appears confirming how many products were updated.

8. Click **OK**.

For more information on setting up recalls, watch the “Recall” video.

In this chapter:

- [Creating New Recall Schedules, 297](#)
- [Modifying Recall Schedules, 298](#)
- [Deleting Recall Schedules, 299](#)
- [Assigning Recall Dates to Patients, 300](#)
- [Creating Recall Letters, 301](#)
- [Printing Recall Correspondences, 303](#)

Recall schedules describe when a patient will be selected for a recall and, if they do not respond, how often and when to make other recall attempts.

Creating New Recall Schedules

1. On the OfficeMate main window, click **Setup**, and select **Customization**. The Customization window opens.
2. Click the **Recall** tab.
3. Click **New Recall**.
4. Type the name of the new recall schedule in the **Recall Type** text box.
5. Type the number of months until the patient will be recalled in the **Months to Next Recall** text box.
6. Type the number of weeks or months between the patient's recall date and the notice that you are creating in the Renewal Notice Mailing Schedule **#** column.
7. Select **Month(s)** or **Week(s)** from the **Period** column drop-down menu.
8. Select **After** or **Before** from the **When** column drop-down menu.

- Select the type of recall letter or postcard to print from the **Print Letters/Postcard** column drop-down menu.

The screenshot shows the 'Customization' window with the 'Marketing' tab selected. The 'Recall' sub-tab is active. The 'Select Recall Type' dropdown is set to '12 Month Adult'. Below it, the 'Recall Type' is also '12 Month Adult' and the 'Months to Next Recall' is '12'. A table titled 'Recall Notice Mailing Schedule' is displayed with the following data:

#	Period	When	What Date	Print Letters/Postcard
1	1 Month(s)	Before	Recall Date	1 Year - Postcard
2	1 Month(s)	After	Recall Date	1 Year - Adult
3	12 Month(s)	After	Recall Date	1 Yr - No Resp - Adult
4	24 Month(s)	After	Recall Date	2 Years - No Resp - Adult
5	36 Month(s)	After	Recall Date	3 Year
6				
7				

Buttons at the bottom of the table include 'Insert Line', 'Delete Line', and 'Compose Letter'. The 'Compose Letter' button is highlighted.

NOTE

If there is no appropriate letter or postcard to select from the Print Letters/Postcard column drop-down menu, click **Compose Letter** to open the Maintain Documents window and compose a letter.

- Repeat steps 3–9 to create additional new recall schedules.

OR

Click **OK** to close the Customization window.

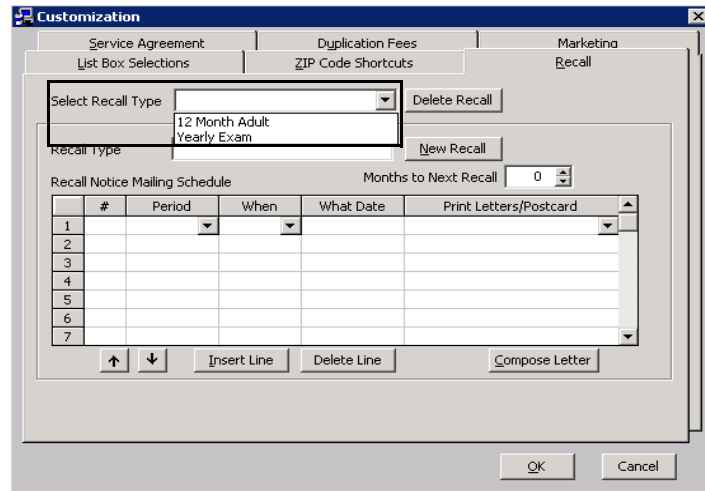
NOTE

To insert a new blank line above a completed line, select the completed line that you want to insert a new blank line above and click **Insert Line**.

Modifying Recall Schedules

- On the OfficeMate main window, click **Setup**, and select **Customization**. The Customization window opens.
- Click the **Recall** tab.

3. Select a recall type from the **Select Recall Type** drop-down menu.



4. Modify the **Recall Type** and **Months to Next Recall**.
5. See [Creating New Recall Schedules on page 297](#), steps 5–9, to modify the information in the **Recall Notice Mailing Schedule** table.
6. To delete a mailing schedule, select a line and click **Delete Line**.
7. To insert a new blank line above a completed line, select the completed line that you want to insert a new blank line above and click **Insert Line**.
8. Repeat steps 3–7 to modify additional recall schedules.

OR

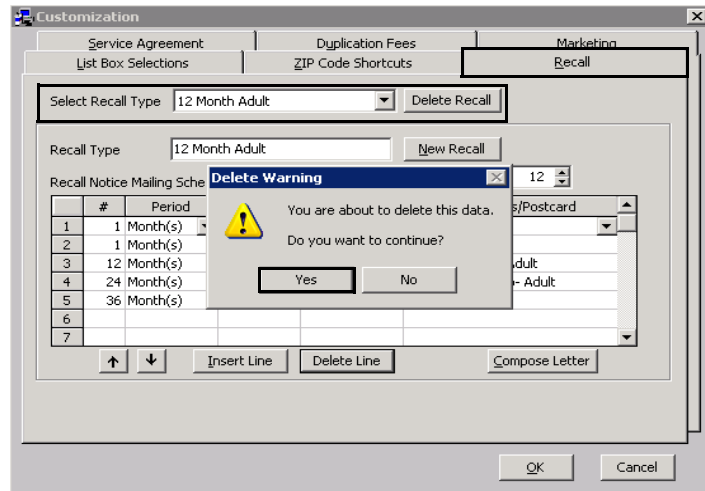
Click **OK** to close the Customization window.

Deleting Recall Schedules

NOTE You can only delete recall schedules that are *not* linked to patients.

1. On the OfficeMate main window, click **Setup**, and select **Customization**. The Customization window opens.
2. Click the **Recall** tab.
3. Select a recall type from the **Select Recall Type** drop-down menu.
4. Click **Delete Recall**. The Delete Warning window opens.

- Click **Yes** to continue.



- Click **OK** to close the Customization window.

Assigning Recall Dates to Patients

You can assign up to three recall schedules to a patient in the Patient Demographic window.

NOTE Before you assign recall schedules to a patient, see [Creating New Recall Schedules on page 297](#) to create a new recall schedule or [Modifying Recall Schedules on page 298](#) to modify an existing recall schedule.

- Open a patient record. For more information, see [Creating & Opening Patient Records on page 203](#).
- Click the **Recall** tab in the Patient Demographic window.

NOTE You can view the recall history for the patient in the **Recall History** box.

- Select recall types from the **Recall Type** drop-down menus.

- To change the recall date, type or select the number of months until the next recall in the **Months to Recall** text box or type or select a recall date in the **Next Recall** text box.

NOTE

If the patient has an insurance plan with an eligibility period, the number of eligible months between exams will appear in the **Eligibility (months)** text box after you select a recall type.

Creating Recall Letters

For more information on creating recall letters using the Maintain Documents window, go to [Maintaining Documents on page 833](#).

This section tells you how to create recall letters to send to your patients including how

- [To create a new recall letter, 301](#)
- [To modify a recall letter, 302](#)

► To create a new recall letter

- Click **Tasks** on the main window toolbar and select **Maintain Documents**.
OR

Select a recall schedule and click **Compose** in the Customization window's Recall tab. For more information, see [Creating New Recall Schedules on page 297](#).

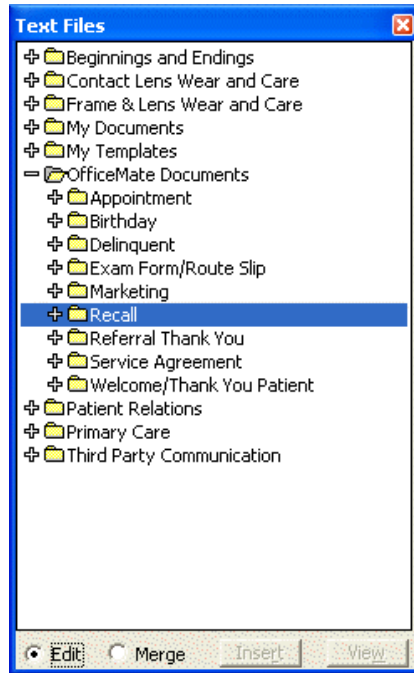
The Maintain Documents window opens.

- Click **Setup** and select **Letters or Postcards**.

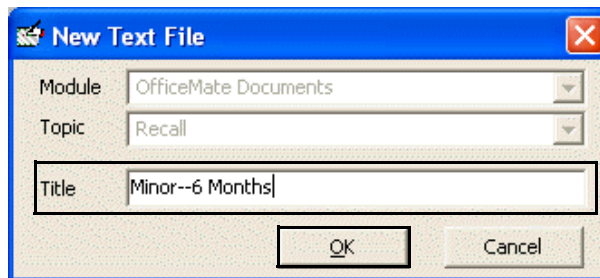
The Setup Letters or Setup Postcards window opens.

- Click the **OfficeMate Documents** folder.

- Click the **Recall** folder.



- Click **File** on the CARE from OfficeMate or Maintain Documents window toolbar and select **New**.
 The New Text File window opens.
- Type a title for the new text file in the **Title** box.
- Click **OK**.



- Type the letter in the word processing window.
- Click **File** on the Maintain Documents window toolbar and select **Save**.

► **To modify a recall letter**

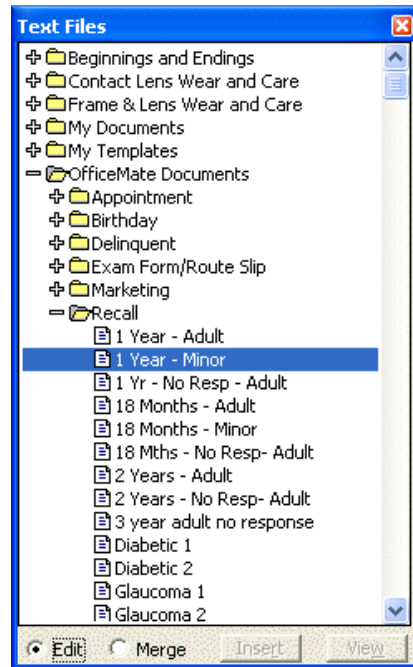
- Click **Tasks** on the main window toolbar and select **Maintain Documents**.

OR

Select a recall schedule and click **Compose** in the Customization window's Recall tab. For more information, see [Creating New Recall Schedules on page 297](#).

The Maintain Documents window opens.

2. Click **Setup** and select **Letters or Postcards**.
The Setup Letters or Setup Postcards window opens.
3. Click the **OfficeMate Documents** folder.
4. Click the **Recall** folder.
5. Click on the name of the text file that you want to modify.



6. Edit the text in the word processing window.
7. Click **File** on the CARE from OfficeMate or Maintain Documents window toolbar and select **Save**.

Printing Recall Correspondences

You can print recall correspondences any time that it is convenient. Follow the instructions below

- [To print recall correspondence, 304](#)
- [To print a list of patients that you want to recall, 307](#)
- [To print labels for patients that you want to recall, 310](#)

► To print recall correspondence

NOTE Print recall correspondence using 8½" × 11" paper stock or office letterhead, or postcard stock with four cards on 8½" × 11" sheets.

1. Click **Tasks** on the main window toolbar, select **Correspondence [MU]**, and then select **Recall [MU]**.

The Process Recalls window opens.

NOTES

- Click **History** to view the recall correspondence printing history.
- Click **Printer Setup** to set up the printer or select a printer other than the default OfficeMate printer. For more information on setting up the printer, go to [Setting Up the Printer on page 21](#).

2. Select a location for which you want to print recall correspondences from the **Location** drop-down menu.
3. Select a communication preference for the recall correspondences from the **Communication Preference** drop-down menu. To select communication preferences for patients, go to [To record demographic information on page 208](#).

- Type or select dates in the **Selection Range From** and **To** boxes and click **Start Selection** to find patients in the selected date range to whom you can send recall correspondences.

NOTE

To further narrow your selection, deselect the **Select all names** check box, select a filter option from the **Filter By** radio buttons, and type a letter (if you are filtering patients by last name) or number (if you are filtering patients by ZIP code) in the **Starting Last Name** or **Starting Zip Code** text box to print recall correspondence for patients meeting your selection criteria. For example, if you type "G" in the Starting Last Name text box, OfficeMate will print recall correspondences for patients with last names that begin with G–Z.

The screenshot shows the 'Process Recalls' dialog box. At the top, the 'Location' is set to 'Irvine Store'. The 'Selection Range' is defined from '07/22/2011' to '07/22/2011'. The 'Start Selection' button is highlighted. Below this, the 'Select all names' checkbox is checked. The 'Filter By' section has radio buttons for 'Last Name' and 'ZIP Code'. The 'Starting Lastname' text box is empty. The 'Communication Preference' dropdown is set to 'Postal'. At the bottom, there are 'Select All', 'Unselect All', and 'Total Selected:' buttons. Below these is a table with columns 'Print', 'Patient Name', 'Print Letter/Postcard', and 'Location'. At the very bottom, there are 'Printing Options' including checkboxes for 'Do Not Print Letters / Postcards', 'Print Labels', and 'Print Listing', and radio buttons for 'Order Letters/Postcards By:' and 'Order Labels and Listings By:'.

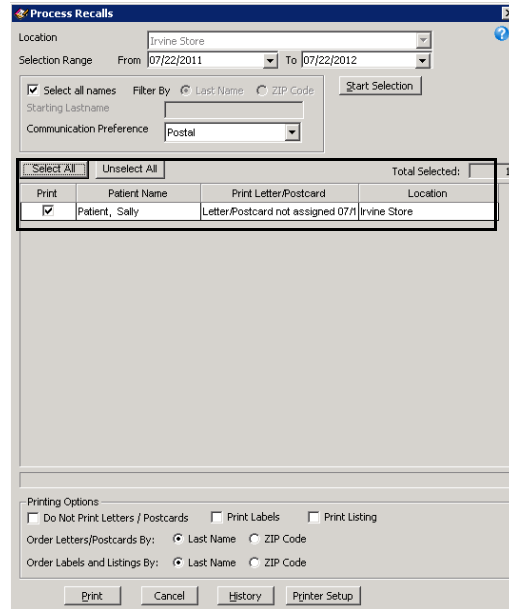
A list of patients meeting your selection criteria is displayed.

- Select or deselect patients by clicking the check box in the **Print** column.

NOTE

You can also click **Select All** to select all patients or **Unselect All** to deselect all patients.

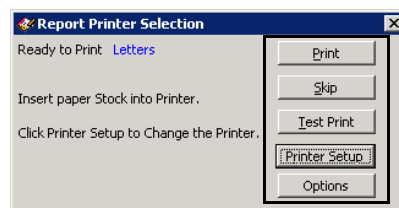
6. Select the **Last Name** or **ZIP Code** Order Letters/Postcards By radio button to sort the recall correspondences that you are printing by last name or ZIP code.



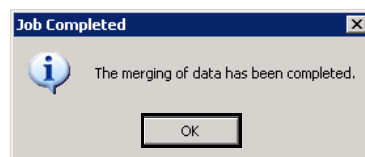
7. Click **Print** to print the recall correspondences.

The Report Printer Selection window opens. Click one of the following buttons:

- **Print** to print the recall correspondences for the selected patients.
- **Skip** to skip the current print selection and go to the next print selection.
- **Test Print** to print a sample recall correspondence.
- **Printer Setup** to set up the printer. For more information on setting up the printer, see [Setting Up the Printer on page 21](#).
- **Options** (for postcards) to select a printing method.

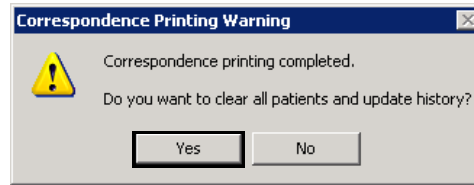


8. Click **OK** in the Job Completed window.



The Correspondence Printing Window opens.

- Click **Yes** in the Correspondence Printing Warning window if you are finished printing this group of recall correspondence and you want to update the patient demographic information and recall history.



► **To print a list of patients that you want to recall**

NOTE Print lists using 8½" × 11" paper stock.

- Click **Tasks** on the main window toolbar, select **Correspondence [MU]**, and then select **Recall [MU]**.

The Process Recalls window opens.

NOTES

- Click **History** to view the recall correspondence printing history.
- Click **Printer Setup** to set up the printer or select a printer other than the default OfficeMate printer. For more information on setting up the printer, go to [Setting Up the Printer on page 21](#).

- Select a location for which you want to print a recall list from the **Location** drop-down menu.
- Select a communication preference for the recall list from the **Communication Preference** drop-down menu. To select communication preferences for patients, go to [To record demographic information on page 208](#).

- Type or select dates in the **Selection Range From** and **To** boxes and click **Start Selection** to find patients in the selected date range to include in the recall list.

NOTE

To further narrow your selection, deselect the **Select all names** check box, select a filter option from the **Filter By** radio buttons, and type a letter (if you are filtering patients by last name) or number (if you are filtering patients by ZIP code) in the **Starting Last Name** or **Starting Zip Code** text box to include patients meeting your selection criteria. For example, if you type "G" in the Starting Last Name text box, OfficeMate will include patients with last names that begin with G–Z.

A list of patients meeting your selection criteria is displayed.

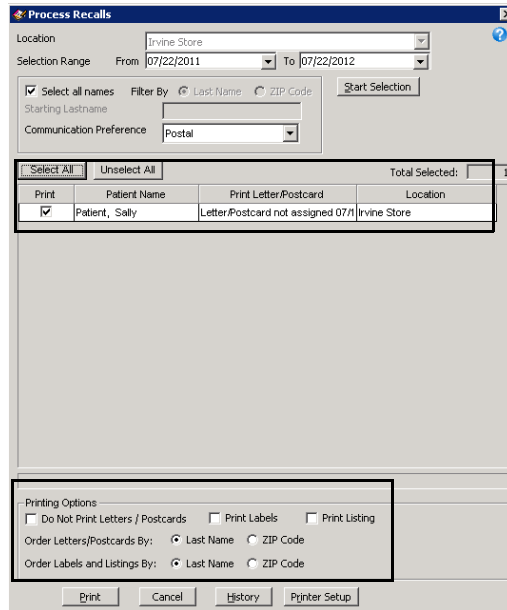
- Select or deselect patients by clicking the check box in the **Print** column.

NOTE

You can also click **Select All** to select all patients or **Unselect All** to deselect all patients.

- Select the **Print Listing** check box and select the **Last Name** or **ZIP Code** Order Labels and Listings By radio button to sort the recall list that you are printing by last name or ZIP code.

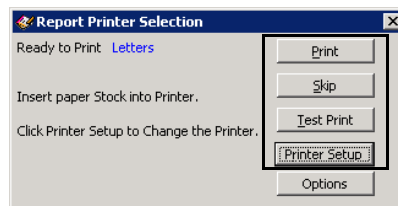
7. Select the **Do Not Print Letters/Postcards** check box.



8. Click **Print** to print the recall list.

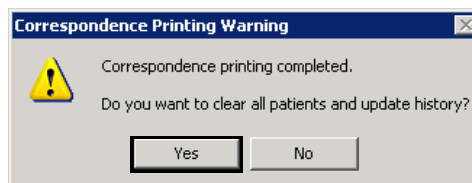
The Report Printer Selection window opens. Click one of the following buttons:

- **Print** to print the recall list for the selected patients.
- **Skip** to skip the current print selection and go to the next print selection.
- **Test Print** to print a sample recall list.
- **Printer Setup** to set up the printer. For more information on setting up the printer, see [Setting Up the Printer on page 21](#).



The Correspondence Printing Window opens.

9. Click **Yes** in the Correspondence Printing Warning window if you are finished printing this recall list and you want to update the patient demographic information and recall history.



► To print labels for patients that you want to recall

NOTE Print labels using Avery 5260 compatible white rectangular labels.

1. Click **Tasks** on the main window toolbar, select **Correspondence [MU]**, and then select **Recall [MU]**.

The Process Recalls window opens.

NOTES

- Click **History** to view the recall correspondence printing history.
- Click **Printer Setup** to set up the printer or select a printer other than the default OfficeMate printer. For more information on setting up the printer, go to [Setting Up the Printer on page 21](#).

2. Select a location for which you want to print recall labels from the **Location** drop-down menu.
3. Select a communication preference for the recall labels from the **Communication Preference** drop-down menu. To select communication preferences for patients, go to [To record demographic information on page 208](#).

- Type or select dates in the **Selection Range From** and **To** boxes and click **Start Selection** to find patients in the selected date range for whom you can print recall labels.

NOTE

To further narrow your selection, deselect the **Select all names** check box, select a filter option from the **Filter By** radio buttons, and type a letter (if you are filtering patients by last name) or number (if you are filtering patients by ZIP code) in the **Starting Last Name** or **Starting Zip Code** text box to print recall labels for patients meeting your selection criteria. For example, if you type "G" in the Starting Last Name text box, OfficeMate will print recall labels for patients with last names that begin with G–Z.

A list of patients meeting your selection criteria is displayed.

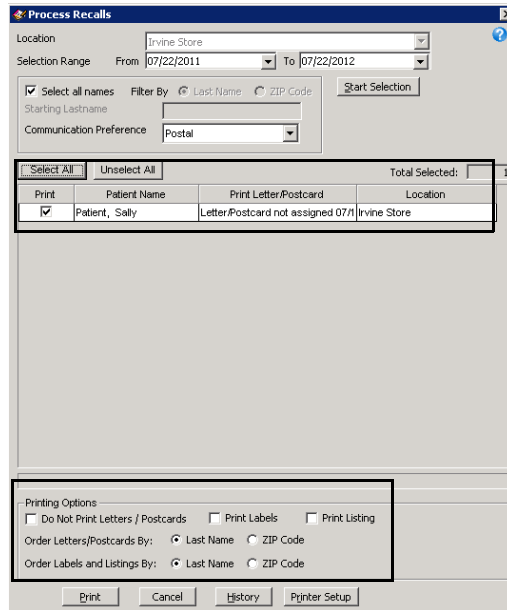
- Select or deselect patients by clicking the check box in the **Print** column.

NOTE

You can also click **Select All** to select all patients or **Unselect All** to deselect all patients.

- Select the **Print Labels** check box and select the **Last Name** or **ZIP Code** Order Labels and Listings By radio button to sort the recall labels that you are printing by last name or ZIP code.

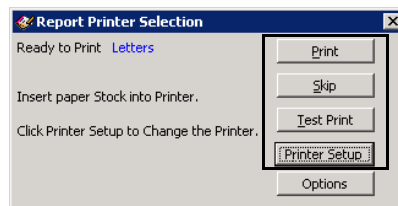
7. Select the **Do Not Print Letters/Postcards** check box.



8. Click **Print** to print the recall labels.

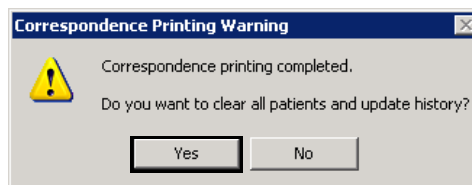
The Report Printer Selection window opens. Click one of the following buttons:

- **Print** to print the recall labels for the selected patients.
- **Skip** to skip the current print selection and go to the next print selection.
- **Test Print** to print a sample recall label.
- **Printer Setup** to set up the printer. For more information on setting up the printer, see [Setting Up the Printer on page 21](#).



The Correspondence Printing Window opens.

9. Click **Yes** in the Correspondence Printing Warning window if you are finished printing this group of recall labels and you want to update the patient demographic information and recall history.



Scheduling Appointments

6

For information on setting up and using the Appointment Scheduler, watch the "Appointment Scheduler Setup" and "Appointment Scheduler Functions" videos.

In this chapter:

- [Opening & Viewing the Appointment Scheduler, 313](#)
- [Setting Up the Appointment Scheduler, 317](#)
- [Searching for Appointments, 332](#)
- [Scheduling Appointments, 336](#)
- [Recording Patients Shows and No Shows, 344](#)
- [Rescheduling Appointments, 345](#)
- [Copying Appointments, 346](#)
- [Canceling Appointments, 347](#)
- [Deleting Appointments, 348](#)
- [Confirming Appointments, 349](#)
- [Printing Patient Welcome Forms, 351](#)

Schedule, move, change, and cancel new and existing patient appointments using the Appointment Scheduler's daily and work week views. Only the administrative location and locations can schedule, move, and cancel appointments.

Opening & Viewing the Appointment Scheduler

This section tells you how to open the Appointment Scheduler and modify your viewing options, including how

- [To open the Appointment Scheduler, 314](#)
- [To view resources in the Appointment Scheduler, 314](#)
- [To view locations in the Appointment Scheduler, 315](#)
- [To modify viewing options in the Appointment Scheduler, 316](#)

NOTE

Click **Refresh** to refresh the Appointment Scheduler at any time with the most up-to-date appointment information.

For information on using the Appointment Scheduler, watch the "Scheduler Overview" video.

► **To open the Appointment Scheduler**

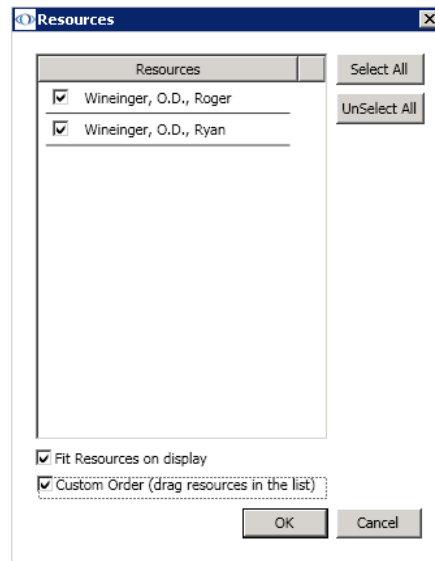
Use one of the following methods to open the Appointment Scheduler:

- Click the **Scheduler** icon.
- Click **Tasks** on the main window toolbar and select **Schedule**.
- Right-click on a patient in the Quick List window and select **Schedule**.
- Right-click on the Patient Demographic, Hard Lens Order, Soft Lens Order, Eyewear Order, Fee Slip, Receipts & Adjustments, or Patient Ledger window title bar and select **Schedule**.
- Click on a patient's name in the Quick List window and drag and drop the patient on the **Schedule** icon.

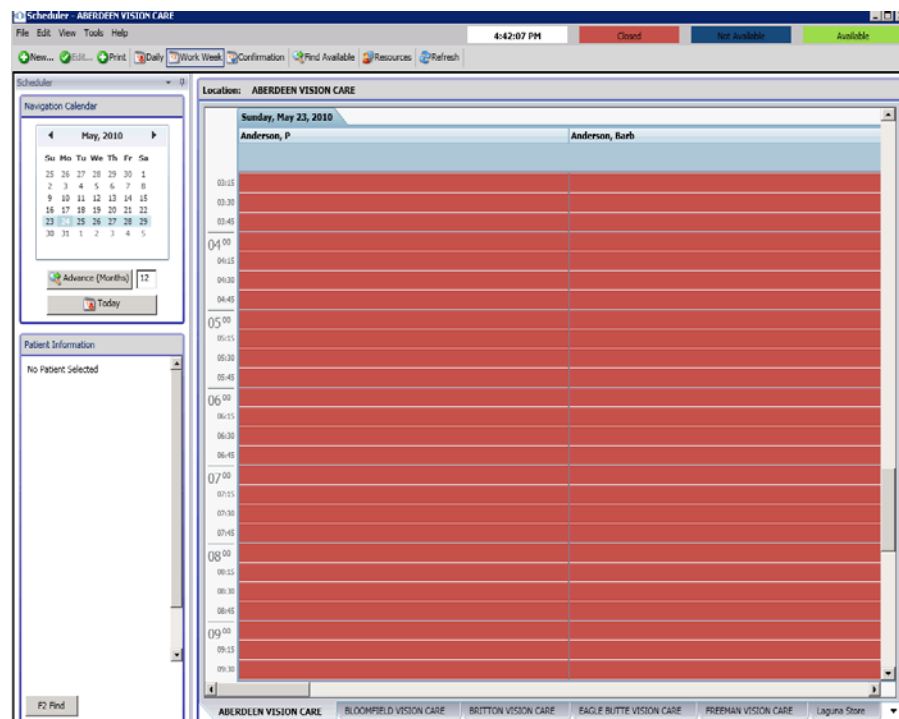
► **To view resources in the Appointment Scheduler**

1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to [Opening & Viewing the Appointment Scheduler on page 313](#).
2. Click **View** and select **Resources**.
OR
Click the **Resources** button on the Appointment Scheduler toolbar.
The Resources window opens.
3. Select the resources that you want to view on the daily and work week views.
4. Select the **Fit Resources on display** check box if you want the resources that you selected to all be visible in the daily and work week views without scrolling.
5. Select the **Custom Order (drag resources in the list)** check box to select the order in which the providers are displayed in the daily and work week views and then drag and drop the resources listed in the order that you want them to appear in the Appointment Scheduler. The resource at the top of the list will appear on the left side of the Appointment Scheduler and the resource at the bottom of the list will appear on the right side of the Appointment Scheduler.

- Click **OK**.



The Appointment Scheduler views will display the resources that you selected.



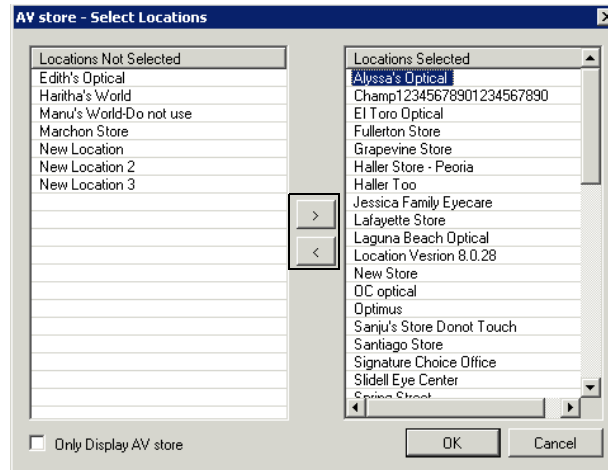
► To view locations in the Appointment Scheduler

- Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to [Opening & Viewing the Appointment Scheduler on page 313](#).
- Click **View** and select **Locations**.
The Select Locations window opens.

- Use the arrows in the middle of the window to move locations to the Locations Not Selected and Locations Selected columns. Locations in the Locations Selected column will be visible in the Appointment Scheduler.

NOTE

If you only want to display the location to which you are currently logged into, click the **Only Display <current location>** check box.



- Click **OK**.

The Appointment Scheduler views will display the locations that you selected in tabs at the bottom of the window. Click on the location's tab to view the appointment schedule for that location.

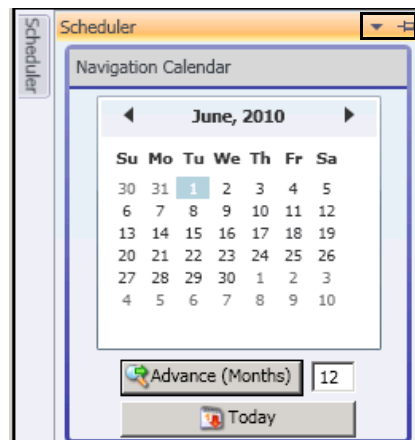
► **To modify viewing options in the Appointment Scheduler**

- To modify your Appointment Scheduler view, click **View** and select **Daily** or **Work Week**. You can also modify your Appointment Scheduler view by clicking the **Daily** or **Work Week** buttons in the Appointment Scheduler toolbar.
- To hide the Navigation Calendar in the top left corner of the Appointment Scheduler, click the thumbtack icon, or if you have the auto hide feature on,

click in the main Appointment Scheduler calendar. To display the Navigation Calendar after it has been hidden, click the Scheduler tab.

NOTES

- To turn on the auto hide feature, click the down arrow and select **Auto Hide**.
- To turn on the docking feature, which allows you to drag the Navigation Calendar and Patient Information boxes to the left and right sides of the window and drop them on the center arrows, click the down arrow and deselect **Auto Hide**, which will automatically select **Dockable**.



Setting Up the Appointment Scheduler

Before you begin using OfficeMate to schedule, move, change, and cancel patient appointments, set up the Appointment Scheduler. This section tells you how to set up the Appointment Scheduler, including how

- [To set up preferences, 317](#)
- [To set up services, 320](#)
- [To set up provider & resource hours, 321](#)
- [To set up service templates, 323](#)
- [To set up & edit provider & resource exceptions, 328](#)
- [To set up service reminders, 330](#)
- [To set up insurance reminders, 330](#)
- [To set up appointment icons, 331](#)

NOTE

You must set up the Appointment Scheduler before you begin scheduling appointments.

For information on setting up Appointment Scheduler preferences, watch the "[Scheduler Preferences](#)" video.

► To set up preferences

1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to [Opening & Viewing the Appointment Scheduler on page 313](#).
2. Click **Tools** and select **Scheduler Preferences**.
The Scheduler Preferences window opens.

3. Select one of the following options from the **Phone number** box to denote your preference for recording patients' home phone numbers when scheduling appointments:
 - Not Required
 - Warn If Missing
 - Always Required
4. Select one of the following options from the **Insurance** box to denote your preference for recording patients' insurance information when scheduling appointments:
 - Not Required
 - Warn If Missing
 - Always Required
5. Select one of the following options from the **Patient For Appointment** box to denote your preference for recording patients when scheduling appointments (for example, if you select "Not Required," then you will be able to schedule time for non-patient appointments, such as office meetings and breaks):
 - Not Required
 - Warn If Missing
 - Always Required
6. If you want to change the colors used to denote appointments and available time periods, select new colors from the Closed, Available, or Not Available drop-down menus in the System Colors box.
7. Select a starting day for the calendar in the top left corner of the Appointment Scheduler from the **Calendar Starting Day** box.
8. If you want to allow scheduling overrides, select one or more of the following overrides from the **Overrides** box:
 - Overbook Limits

NOTE If you allow overbook limit overrides, you can schedule appointments even if the overbooking limit has been exceeded. If you want to allow overbooking for select providers, go to [To set up provider & resource hours on page 321](#).

- Closed/Unavailable Times
- Service Warnings
- Insurance Warnings

9. Select one of the following default scheduling views from the **Default Schedule View** box:
 - Daily View
 - Weekly View

10. Click **OK**.

For information on setting up office hours, watch the “Office Hours” video.

► **To set up office hours**

1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to [Opening & Viewing the Appointment Scheduler on page 313](#).
2. Click **Tools** and select **Office Hours**.
The Office Hours window opens.
3. Select the location for which you want to set up office hours from the **Locations** list.
4. Select **Closed?** check boxes next to days that the office is closed.

- Select or type the hours that the office is open in the **Open From** and **Open To** text boxes.

Closed?	Open from:	Open to:
<input checked="" type="checkbox"/> Sunday	10:00 AM	7:00 PM
<input type="checkbox"/> Monday	8:30 AM	6:00 PM
<input type="checkbox"/> Tuesday	9:00 AM	6:00 PM
<input type="checkbox"/> Wednesday	9:00 AM	6:00 PM
<input type="checkbox"/> Thursday	9:00 AM	9:00 PM
<input type="checkbox"/> Friday	9:00 AM	5:00 PM
<input checked="" type="checkbox"/> Saturday	10:00 AM	7:00 PM

- Click **OK**.

► To set up services

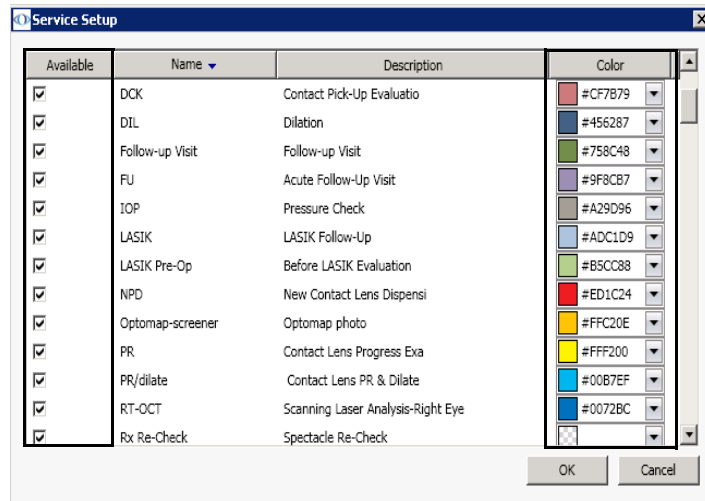
For information on setting up services, watch the "Services" video.

NOTES

- You can set up any of the services that you have defined in the Products window to schedule in OfficeMate. For more information on setting up services in the Products window, go to [To add or modify services on page 281](#).
- The service duration is set in Customization window. For more information on setting service durations, go to [To add & modify procedure codes on page 137](#).

- Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to [Opening & Viewing the Appointment Scheduler on page 313](#).
- Click **Tools** and select **Services**.
The Service Setup window opens.
- Select the check boxes in the **Available** column next to services for which you want to schedule appointments.

- If you want to select a color to represent a service, click the drop-down menu next to the service in the Color column and select a color.



- Click **OK**.

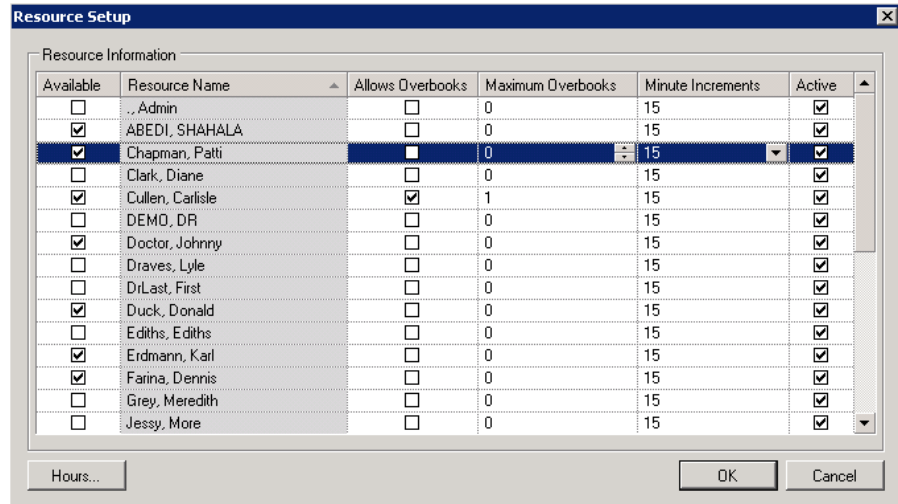
► To set up provider & resource hours

For information on setting up provider and resource hours, watch the "Providers and Resources" video.

NOTE To add or delete provider names in OfficeMate, go to [To modify or add provider information on page 51](#).

- Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to [Opening & Viewing the Appointment Scheduler on page 313](#).
- Click **Tools** and select **Providers And Resources**.
The Resource Setup window opens.
- Select the **Available** check box next to resources that are available.
- Select the **Allows Overbooks** check box next to resources if you want to allow the Appointment Scheduler to overbook appointments for the resource.
- If you selected the Allows Overbooks check box for a resource, select the maximum number of overbookings that are allowed in each time period for that resource from the **Maximum Overbooks** column.
- Select the number of minutes in which the Appointment Scheduler should increment appointments for the resource from the **Minute Increments** column.

7. Select the **Active** check box next to resources that are active.



8. Select a resource and then click **Hours** to set up location hours for the resources.

The Location Hours window opens.

9. Select a location from the list of **Locations**.

NOTE

If you are scheduling a provider or resource at more than one location, you must set up the hours for each resource at each location individually.

10. Select an available date range from the **Description** drop-down menu.

NOTE

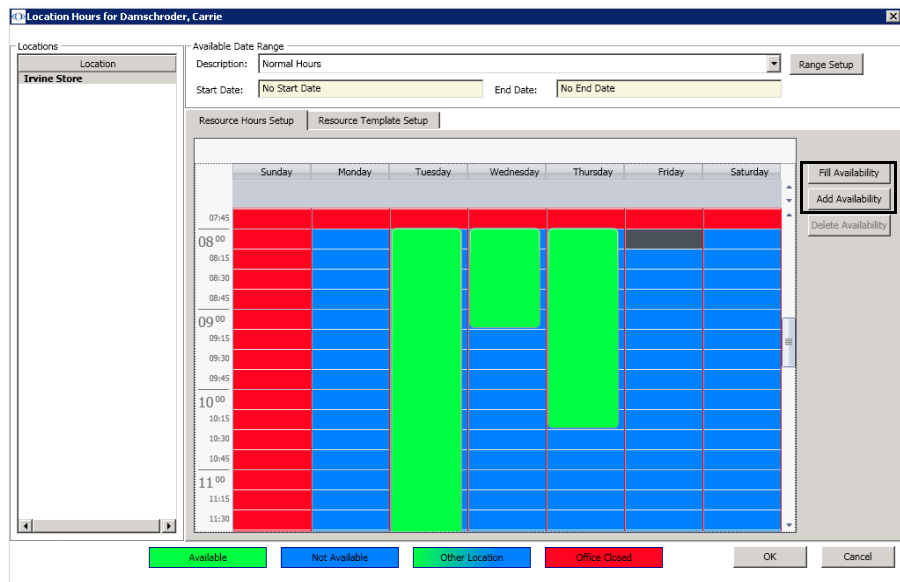
- The default date range is Normal Hours, which is not limited by a beginning date or an ending date.
- Select another date range only for temporary adjustments to the normal schedule such as holiday hours, limited hours due to renovation, etc.
- To add a date range, click **Range Setup**.

11. Complete one of the following actions to mark the resource as being available:
- Click and drag your mouse cursor over the day and time that you want to mark the resource as being available and then right-click the schedule grid and select **Add Availability** or click the **Add Availability** button.
 - Right-click on a date that has *no* availability already recorded and select **Fill Availability** or click the **Fill Availability** button to quickly fill a

resource's availability for a day so that it is the same as the location's hours.

NOTES

- The office must be open during the days and times you select in order to set up location hours and times.
- To delete location hour availability for resources within a timeslot on which you have filled availability, select the currently available day and time and then either right-click and select **Delete Availability** or click the **Delete Availability** button.



12. Click **OK** to close the Location Hours window.
13. Click **OK** to close the Resource Setup window.

► To set up service templates

For information on setting up service templates, watch the "[Range Setup and Resource Templates](#)" video.

Use appointment templates to restrict the types of services that can be scheduled for a given provider during specific days and times. Templates created for one provider can be copied to other providers, enabling you to quickly create complex scheduling restrictions or recommendations.

1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to [Opening & Viewing the Appointment Scheduler on page 313](#).
2. Click **Tools** and select **Providers And Resources**.
The Resource Setup window opens.
3. Select a resource and then click **Hours**.
The Location Hours window opens.
4. Select a location from the list of **Locations**.
5. Click the **Resource Template Setup** tab.

6. Click and drag your mouse cursor over the day and time on which you want to set up the service template and then complete one of the following actions:
 - Right-click the schedule grid and select **Add Template**.
 - Click the **Add Template** button.

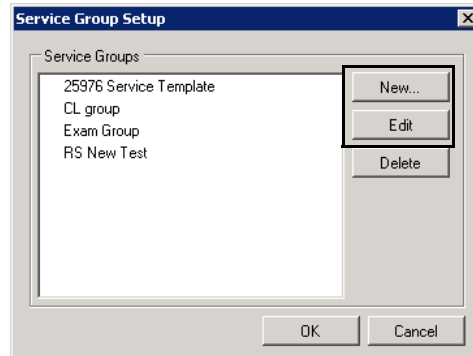
NOTES

- To remove an existing service template, select the template, right-click on it, and select **Delete Template**, or click the **Delete Template** button.
- To edit an existing service template, select the template, right-click on it, and select **Edit Template**, or click the **Edit Template** button.
- To use templates with the same name and service groups in multiple timeslots, select the template, right-click on it, and select **Copy Template**. Then, place your cursor over the day and time on which you want to paste the service template, right-click, and select **Paste Template**.

The Service Template Setup window opens.

7. Type a name in the **Name** text box.
8. Type a description in the **Description** text box.

9. Click **Service Group** to select the services that may be scheduled during the template hours. To set up new service groups or edit existing service groups, follow the instructions below:
 - a. Click **New** to create a new service group or select a service group from the list and click **Edit** to modify an existing service group.

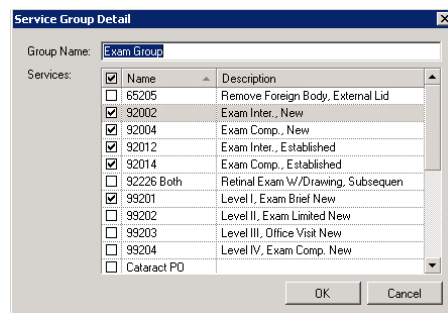


- b. Type a name for the group in the **Group Name** field.
- c. Select the check boxes for the services you want to add to the service group.

NOTES

- Only services that are available to schedule appear in the Service Group Setup window. For information on making services available, go to [To set up services on page 320](#).
- At least one service must be selected to create a service group.

- d. Click **OK** to save the service group.



- e. Click **OK** on the Service Group Setup window when you are finished.
10. Select the **Restrict Template to Service Group** check box to force appointments scheduled within the time frame of the template to be restricted to only those services included in the selected service group.

NOTE

If you do not select the Restrict Template to Service Group check box, appointments will not be restricted to only those services included in the service group. The services in the group will appear in bold to indicate that they are recommended when the appointment is being recorded.

11. In the Template Pattern Setup box, select the check box next to the days of the week in which the services are available.
12. Type or select the **Start** Time.
13. Type or select the number of minutes allocated for the service in the **Duration of service (minutes)** field.

NOTE The duration of service in minutes must be equal to or greater than the minute increments set up for the resource in the Resource Setup window and displayed on the Appointment Scheduler.

14. Type or select the number of minutes between appointment start times in the **Minutes between services** field.

NOTE To schedule down time between appointments, type or select more minutes in the Minutes between services field than the Duration of service field.

15. Type or select the **End** Time.

The screenshot shows the 'Service Template Setup' dialog box. The fields are as follows:

- Location: Robins Eye Care, LLC
- Resource: Horton, June
- Available Date Range: Normal Hours
- Day of the Week: Tuesday
- Template Name: New Exam
- Description: New Exam
- Service Group: New Exams
- Restrict Template to Service Group:
- Start Time: 11:00 AM
- Duration of service (minutes): 15
- Minutes between services: 0
- End Time: 11:15 AM

Buttons: OK, Cancel

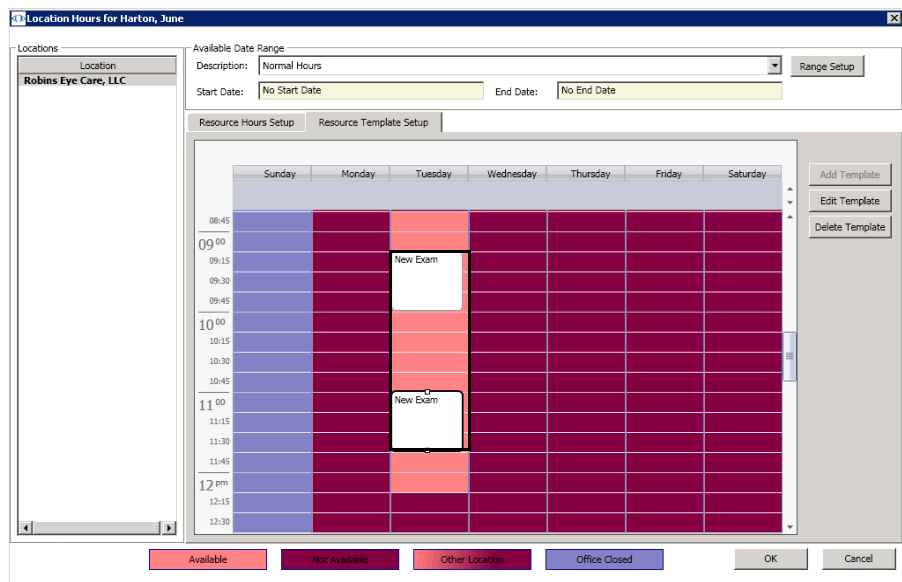
16. Click **OK** when you are finished.
17. Click **Close** to close the Service Template Setup window.

18. When you are finished adding templates, click **OK** on the Location Hours window and click **OK** on the Resource Setup window.

The template(s) that you added now appear on the provider or resource's schedule in the Location Hours window.

NOTE

If you scheduled appointments for multiple providers with different minute increments for their appointments (for example, 15 and 30), then the schedule will be displayed with the fewest minute increments for all providers (15). If you scheduled a template for a provider who has longer minute increments for his or her appointments (30), then the template that you scheduled will be displayed multiple times in the timeslot (twice; once in each 15 minute timeslot).



For information on setting up provider and resource exceptions, watch the "Range Setup and Resource Template" video.

► **To set up & edit provider & resource exceptions**

NOTES

- You must set up resource hours before you set up resource exceptions. To set up resource hours, go to [To set up provider & resource hours on page 321](#).
- If you allow closed and unavailable time overrides, you can schedule appointments even if the office is closed or the provider is unavailable. To allow overrides, go to [To set up preferences on page 317](#).
- You can create unavailable exceptions in timeslots when the provider or resource is unavailable. This feature is useful if a resource is only available in multiple small blocks of time throughout the day.

1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to [Opening & Viewing the Appointment Scheduler on page 313](#).
2. Complete one of the following tasks:
 - If you are creating a new exception, click **File** and select **New Schedule Exception** or right-click on the time grid and select **New Schedule Exception**.
 - If you are editing an existing exception, click **Edit** and select **Edit Selected Exception** or right-click on the time grid and select **Edit Selected Exception**.

The Resource Availability Exception or Resources Exception Details window opens.

3. Select whether the new resource availability exception type denotes time that is **Available** or **Not Available**.
4. Select the resource for which you are scheduling the availability exception from the **Resource** drop-down menu.
5. Select the location at which you are scheduling the availability exception from the **Location** drop-down menu.
6. Select the starting date of the availability exception from the **Start Date** drop-down menu.
7. Select the start time of the availability exception from the **Start Time** box.

8. Select or type the duration of the availability exception in the **Duration** text box.

9. If you want to record a recurrence of this resource availability exception, click **Recurrence** and follow the instructions below; otherwise, go to step 10:
 - a. Select daily, weekly, or monthly recurrence options from the **Recurrence** box.
 - b. Select the range of the recurrence from the **Range of Recurrence** box.

NOTE You cannot create reoccurring exceptions with an end date that is more than two years in the future.

- c. Click **OK**.

10. Type or select a reason for the resource's exception in the **Reason** text box.
11. Click **OK** to save the resource availability exception.

The exception is outlined in black on the Appointment Scheduler and displays the reason in the timeslot and when you place your cursor over it.

For information on setting up service reminders, watch the “Reminders” video.

► To set up service reminders

Set up service reminders to restrict scheduling appointments for patients who are scheduling a specific service. If you set up your preferences to allow overrides for service warnings, you will still be able to schedule appointments despite any service reminders and restrictions. For more information on allowing overrides, go to [To set up preferences on page 317](#).

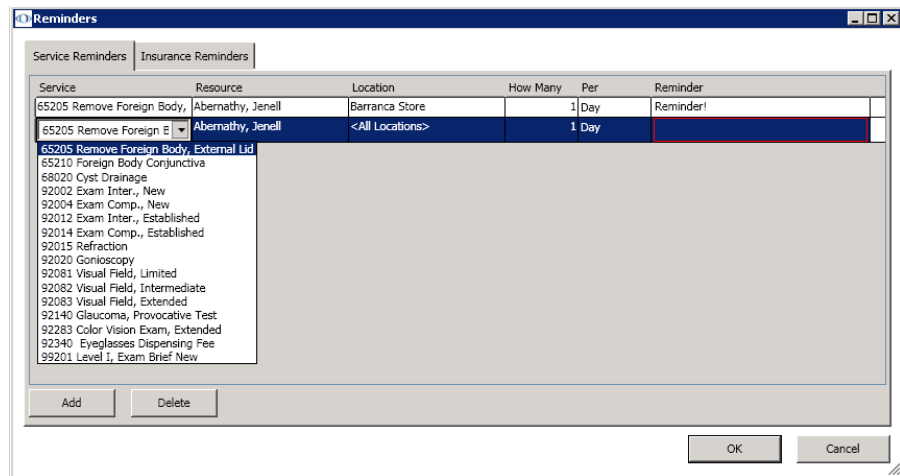
1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to [Opening & Viewing the Appointment Scheduler on page 313](#).

2. Click **Tools** and select **Reminders**.

The Reminders window opens.

NOTE If you want to delete a service reminder, select the service and click **Delete**.

3. Click **Add** to add a service reminder.
4. Select a service from the **Service** column drop-down menu.



NOTE To add or delete services in OfficeMate, go to [To set up services on page 320](#).

5. Select a resource from the **Resource** column drop-down menu.
6. Select a location from the **Location** column drop-down menu.
7. Select or type the maximum number of times that you want to schedule the service in the **How Many** box.
8. Select Week, Day, or Month from the **Per** drop-down menu.
9. Type the message that you want to appear in the service reminder in the **Reminder** box.
10. Click **OK**.

► To set up insurance reminders

Set up insurance reminders to control the scheduling of appointments for patients who are covered by a specific insurance plan. If you set up your preferences to allow overrides for insurance warnings, you will still be able to schedule

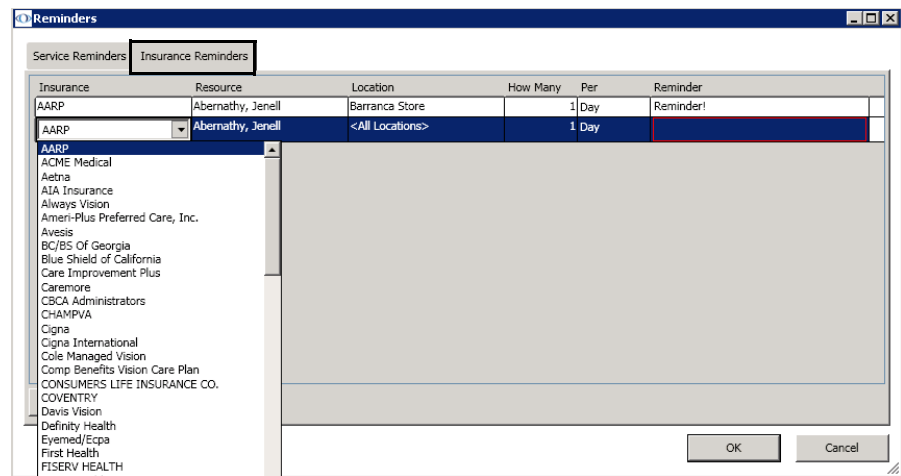
For information on setting up insurance reminders, watch the “Reminders” video.

appointments despite any insurance reminders and restrictions. For more information on allowing overrides, go to [To set up preferences on page 317](#).

1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to [Opening & Viewing the Appointment Scheduler on page 313](#).
2. Click **Tools** and select **Reminders**.
The Reminders window opens.
3. Click the **Insurance Reminders** tab to set up insurance reminders.

NOTE If you want to delete an insurance reminder, select the insurance plan and click **Delete**.

4. Click **Add** to add an insurance reminder.
5. Select an insurance plan from the **Insurance** drop-down menu.



NOTE To add insurance plans in OfficeMate, go to [To modify or add appointment schedule resources on page 58](#).

6. Select a resource from the **Resource** column drop-down menu.
7. Select a location from the **Location** column drop-down menu.
8. Select or type the maximum number of times that you want to schedule the insurance plan in the **How Many** box.
9. Select Week, Day, or Month from the **Per** drop-down menu.
10. Type the message that you want to appear in the insurance reminder in the **Reminder** box.
11. Click **OK**.

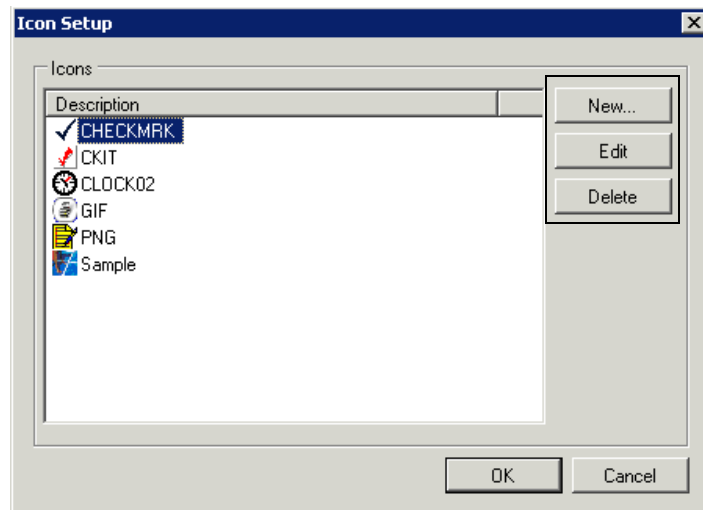
► To set up appointment icons

You can set up appointment icons to use when you are scheduling patient appointments to denote new or established patients, the status of a patient in the

For information on setting up appointment icons, watch the ["Appointment Icons"](#) video.

office, patients who need more attention, etc. To assign icons to patient appointments, go to [Scheduling Appointments on page 336](#).

1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to [Opening & Viewing the Appointment Scheduler on page 313](#).
2. Click **Tools** and select **Appointment Icons**.
The Icon Setup window opens.
3. Complete one of the following tasks:
 - Click **New**, select an icon from the OMATE32\Icons folder or OfficeMate\Icons folder, and click **OK** to add the icon to your list of available icons to use when scheduling appointments.
 - Select an icon and type a new name for the icon, if desired.
 - Select an icon, click **Delete**, and click **OK** to delete the icon from your list of available icons to use when scheduling appointments.



4. Click **OK** to close the Icon Setup window.

Searching for Appointments

This section tells you how to search for appointments in the Appointment Scheduler, including how

- [To search for an available new appointment time, 332](#)
- [To find an existing appointment time, 334](#)

► To search for an available new appointment time

1. Click **Tools** and select **Find Open Appointments**.

OR

Click the **Find Open Appointments** button in the Appointment Scheduler toolbar.

The Find Open Appointments window opens.

2. Select a location from the **Location** drop-down menu.

3. Select a resource from the **Resource** drop-down menu.
4. Select a service from the **Service** drop-down menu.

OR

Type the number of minutes normally reserved for the appointment for which you are searching in the **Duration** text box.

NOTE Your services should be set up with a duration already defined. If you have not set up your services and corresponding durations, go to [To add or modify services on page 281](#).

5. If the patient has insurance, select an insurance provider from the **Insurance** drop-down menu.
6. Select one or more of the following search criteria:
 - Number of months or weeks until the appointment will be scheduled in the **Appoint In** text box and the **Weeks** or **Months** radio button.
 - Month from the **Month** drop-down menu.
 - Morning, Afternoon, or Evening from the **Period(s)** box.
 - One or more days of the week from the **Day(s) of Week** box.

The screenshot shows a software window titled "Open Appointment Search". It is divided into two main panes: "Search Criteria" on the left and "Search Results" on the right. The "Search Criteria" pane contains several input fields and checkboxes:

- Location:** Barranca Store (dropdown)
- Resource:** [All] (dropdown)
- Service:** 65210 (dropdown)
- Duration:** 15 Minutes (spinners)
- Insurance:** Aetna (dropdown)
- Appoint In:** 3 (spinners) with radio buttons for **Weeks** (selected) and **Months**.
- Month:** (dropdown)
- Period(s):** Morning, Evening, Afternoon
- Day(s) of Week:** Monday, Tuesday, Wednesday, Thursday, Friday, Saturday, Sunday

 A "Search" button is located at the bottom left of the "Search Criteria" pane. The "Search Results" pane is currently empty, with a table header showing columns for "Location", "Resource", and "Start Time". At the bottom right of the window, there are "Select" and "Cancel" buttons.

7. Click **Search** to search for available appointment times that meet your search criteria.
8. Select an available appointment time that meets your search criteria and click **Select** or double-click it to open the Appointment Detail window and

schedule an appointment in that timeslot. For more information on scheduling appointments, go to [Scheduling Appointments on page 336](#).

Location	Resource	Start Time
Barranca Store	Abernathy, Jenell	6/4/2010 11:00:00 AM
Barranca Store	Abernathy, Jenell	6/4/2010 11:15:00 AM
Barranca Store	Abernathy, Jenell	6/4/2010 11:30:00 AM
Barranca Store	Raj, Mallik	6/4/2010 10:00:00 AM
Barranca Store	Raj, Mallik	6/4/2010 10:15:00 AM
Barranca Store	Raj, Mallik	6/4/2010 10:30:00 AM
Barranca Store	Raj, Mallik	6/4/2010 10:45:00 AM
Barranca Store	Raj, Mallik	6/4/2010 11:00:00 AM
Barranca Store	Raj, Mallik	6/4/2010 11:15:00 AM
Barranca Store	Raj, Mallik	6/4/2010 11:30:00 AM
Barranca Store	Raj, Mallik	6/4/2010 11:45:00 AM
Barranca Store	Raj, Mallik	6/4/2010 12:00:00 PM
Barranca Store	Raj, Mallik	6/4/2010 12:15:00 PM
Barranca Store	Raj, Mallik	6/4/2010 12:30:00 PM
Barranca Store	Raj, Mallik	6/4/2010 12:45:00 PM
Barranca Store	Abernathy, Jenell	6/4/2010 11:45:00 AM
Barranca Store	Abernathy, Jenell	6/4/2010 12:00:00 PM
Barranca Store	Abernathy, Jenell	6/4/2010 12:15:00 PM
Barranca Store	Abernathy, Jenell	6/4/2010 12:30:00 PM
Barranca Store	Abernathy, Jenell	6/4/2010 12:45:00 PM
Barranca Store	Abernathy, Jenell	6/4/2010 1:00:00 PM
Barranca Store	Abernathy, Jenell	6/4/2010 1:15:00 PM
Barranca Store	Abernathy, Jenell	6/4/2010 1:30:00 PM
Barranca Store	Abernathy, Jenell	6/4/2010 1:45:00 PM
Barranca Store	Abernathy, Jenell	6/4/2010 2:00:00 PM
Barranca Store	Abernathy, Jenell	6/4/2010 2:15:00 PM

► To find an existing appointment time

1. Click **Tools** and select **Find Existing Appointments**.

The Find Existing Appointments window opens.

2. If you want to find a specific patient's existing appointment, follow the instructions below:
 - a. Click **F2 Find**.
 - b. Enter search criteria in the Find Patient window and click **F2 Find**.
 - c. Select a patient and click **Select** or double-click the patient's name.

Name	Address/City	Home Phone	SSN	DOB	Patien	HIPAA	Location
Patient, Michael R	118 W Wilshire Ave, F	(800) 269-3666	333-66-9999	01/13/1980	✓	✓	Robins Eye Car
Patient, Sally J	118 W Wilshire Ave, F	(800) 269-3666	222-55-8888	09/14/1982	✓	✓	Robins Eye Car
Patient, William	118 W Wilshire Ave, F	(800) 269-3666	111-44-7777	06/19/2003	✓	✓	Robins Eye Car

3. Select appropriate search criteria from the **Search Criteria** box.

Existing Appointment Search

Search Criteria

F2 Patient: Ablay, Skyler Resource: Payne, Bob

Location: Barranca Store Include Past Appointments in Search

Find Clear

Search Results

Date	Start Time	Name	Resource	Location	Home Phone	Notes	Cancelled	Deleted
------	------------	------	----------	----------	------------	-------	-----------	---------

Edit Close

4. Click **Find** to find existing appointment times that meet your search criteria.
5. Select an appointment and click **Edit** to open the Appointment Detail window and edit the existing appointment in that timeslot. For more information on modifying appointments, go to [To modify scheduled appointments on page 343](#).

Existing Appointment Search

Search Criteria

F2 Patient: Resource: Find

Location: Barranca Store Include Past Appointments in Search Clear

Search Results

Date	Start Time	Name	Resource	Location	Home Phone	Notes	Cancelled	Deleted
10/11/2010	11:30:00 AM	Ablay, Skyler	Kannan, O.D., Aritha	Barranca store	(478) 442-1502		No	No

Edit Close

Scheduling Appointments

You can schedule, move, change, and cancel appointments for patients using the Appointment Scheduler's Daily and Work Week views. This section tells you how to schedule appointments, including how

- [To schedule a new appointment, 336](#)
- [To modify scheduled appointments, 343](#)

NOTES

- You must set up the Appointment Scheduler before you begin scheduling appointments. For more information on setting up the Appointment Scheduler, go to [Setting Up the Appointment Scheduler on page 317](#).
- Click **Refresh** to refresh the Appointment Scheduler with the most up-to-date appointment information.

For information on scheduling appointments, watch the "Scheduling Appointments" video.

► To schedule a new appointment

1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to [Opening & Viewing the Appointment Scheduler on page 313](#).
2. To find a patient for whom you want to schedule an appointment, follow the instructions below; otherwise, go to step 3.
 - a. Click **Tools** and select **Search For Patient** or click the **F2 Find** button in the bottom left corner of the Appointment Scheduler to open the Find Patient window.
 - b. Enter search criteria and click **F2 Find**.

NOTE

If you want to add a new patient to OfficeMate, click **New** and go to [Recording Patient Information on page 207](#) to record the patient's demographic and insurance information and record patient notes.

- c. Select a patient and click **Select** or double-click on the patient.

Name	Address/City	Home Phone	SSN	DOB	Patien	HIPAA	Location
Patient, Michael R	118 W Wilshire Ave, F	(800) 269-3666	333-66-9999	01/13/1980	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Robins Eye Care
Patient, Sally J	118 W Wilshire Ave, F	(800) 269-3666	222-55-8888	09/14/1982	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Robins Eye Care
Patient, William	118 W Wilshire Ave, F	(800) 269-3666	111-44-7777	06/19/2003	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Robins Eye Care

NOTE

After you select a patient, you can click on the following buttons in the bottom left corner of the Appointment Scheduler to complete other patient-related tasks.

- If you want to view, open, or edit other appointments that have been scheduled for the patient, click **Appt History**, select an appointment, and click **Edit**.
- If you want to edit the patient's demographic information, click **Pat. Demo.** and go to [Recording Patient Information on page 207](#) to record the patient's demographic and insurance information, record patient notes, and view the patient's VSP history.
- If you want to clear the patient's information and select another patient, click **Clear Patient**.
- If you want to select another patient, click **F2 Find**.

3. Search for and select an available new appointment time. For more information on searching for available appointment times, go to [To search for an available new appointment time on page 332](#)

OR

Click and drag your mouse cursor over an available timeslot on the time grid.

NOTES

- To quickly advance the Appointment Scheduler to a future month, type the number of months that you want to advance the Appointment Scheduler in the text box next to the **Advance (Months)** button in the Navigation Calendar and then click the **Advance (Months)** button.
- To view today's Appointment Scheduler, click the **Today** button in the Navigation Calendar.

- Click **File** or right-click on the schedule and select **Schedule Selected Patient** (if you selected a patient in step 2) or **New Appointment** (if you did not select a patient in step 2).

OR

Click the **New** button on the Appointment Scheduler toolbar.

The Appointment Details window opens.

- Select a resource from the **Resource** drop-down menu, if the correct resource is not already selected.
- Select a location from the **Location** drop-down menu, if the correct location is not already selected.
- Type or select a start date for the appointment from the **Start Date** drop-down menu.
- Type or select a starting time for the appointment from the **Start Time** text box.
- Type or select the duration of the appointment (in minutes) in the **Duration** text box.

Appointment Details

Appointment Information

Resource: Doctor, Johnny

Location: Irvine Store

Start Date: Thursday, July 21, 2011

Start Time: 1:00 PM Duration: 30 Minutes

Recurrence: No recurrences

Notes:

Appointment Timestamp

Creation: Thursday, July 21, 2011 12:26 PM
User: Johnny Doctor Computer: QATS03R2E32

Modification: Thursday, July 21, 2011 12:26 PM
User: Johnny Doctor Computer: QATS03R2E32

Patient Information

F2 Patient Sally Patient

Service Type: CL Fit Contact Lens Fitting

Insurance: Vision Service Plan

Pre-Appointment Eligibility/Authorization

Confirmation Information

Confirmed
 Left Message
 Not Available
 None

Initials:

Show Status

None No Show Show

Find Open Appointment... Icons... OK Cancel

10. If you want to record a recurrence of this appointment, click **Recurrence** and follow the instructions below:
 - a. Select daily, weekly, or monthly recurrence options from the **Recurrence** box.
 - b. Select the range of the recurrence from the **Range of Recurrence** box.
 - c. Click **OK**.

Appointment Recurrence

Recurrence

Recur every week(s) on:

None Sunday Monday Tuesday Wednesday

Daily Thursday Friday Saturday

Weekly

Monthly

Range of Recurrence

No End Date

End After occurrence(s)

End By

11. If you want to add notes to the patient's appointment, type text into the **Notes** text box.
12. To find a patient for whom you want to schedule an appointment, follow the instructions below; if you already selected a patient in step 2 above, go to step 13.
 - a. Click **F2 Patient**.
 - b. Enter search criteria and click **F2 Find**.

NOTE

If you want to add a new patient to OfficeMate, click **New** and go to [Recording Patient Information on page 207](#) to record the patient's demographic and insurance information, record patient notes, and view the patient's VSP history.

- c. Select a patient and click **Select** or double-click on the patient.

Find Patient

Selection Criteria

Last Name Address

First Name City

Social Security No Home Phone

Nickname Patient No

Date Of Birth Chart No

Default Location Include Inactive

Name	Address/City	Home Phone	SSN	DOB	Patien	HIPAA	Location
Patient, Michael R	118 W Wilshire Ave, F	(800) 269-3666	333-66-9999	01/13/1980	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Robins Eye Car
Patient, Sally J	118 W Wilshire Ave, F	(800) 269-3666	222-55-8888	09/14/1982	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Robins Eye Car
Patient, William	118 W Wilshire Ave, F	(800) 269-3666	111-44-7777	06/19/2003	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Robins Eye Car

Patients Found

13. Select a service from the **Service Type** drop-down menu.

NOTE

- To set up the services that you want to schedule, go to [To set up services on page 320](#).
- If not all services are available, a template may be applied to the provider's or resource's schedule that restricts the types of services available. If the service you want to select is not available, choose a different time or a different provider. If you must schedule a service that is unavailable, click the lock icon to select services outside of the prescribed service groups. A username and password with sufficient security access is required for each override.

The screenshot shows a 'Patient Information' form. At the top, there are two tabs: 'F2 Patient' and 'Patient, Sally'. Below the tabs, there are three fields: 'Service Type:' with a dropdown menu, 'Insurance:' with a dropdown menu showing 'Aetna of California', and a checkbox for 'Pre-Appointment'. A lock icon is visible next to the Service Type dropdown.

- Bold services listed in the Service Type drop-down menu are services that are recommended, but not required, by a template or they are services within the prescribed groups while an override is in place.

The screenshot shows the same 'Patient Information' form, but with the Service Type dropdown menu open. The list of services includes: '92004 Exam Comp., New', '92014 Exam Comp., Established', '99201 Level I, Exam Brief New', 'Exam of V1.0.39 Exam of V1.0.39', '65205 Remove Foreign Body, External Lid', '92226 Both Retinal Exam w/Drawing, Subsequen', '99202 Level II, Exam Limited New', and '99203 Level III, Office Visit New'. Below the dropdown, there are radio buttons for 'Confirmed', 'Left Message', 'Not Available', and 'None' (which is selected). There is also an 'Initials:' field.

- For information about creating and modifying appointment templates, go to [To set up service templates on page 323](#).

14. If the patient has insurance, select the patient's insurance provider from the **Insurance** drop-down menu.

NOTES

- To add insurance plans in OfficeMate, go to [To modify or add appointment schedule resources on page 58](#).
- If you selected Vision Service Plan from the Insurance drop-down menu, click the VSP button to obtain member information, eligibility information, and authorizations and view existing authorizations. For more information about obtaining and viewing VSP information, go to [Getting Member Eligibility & VSP Authorization on page 534](#).

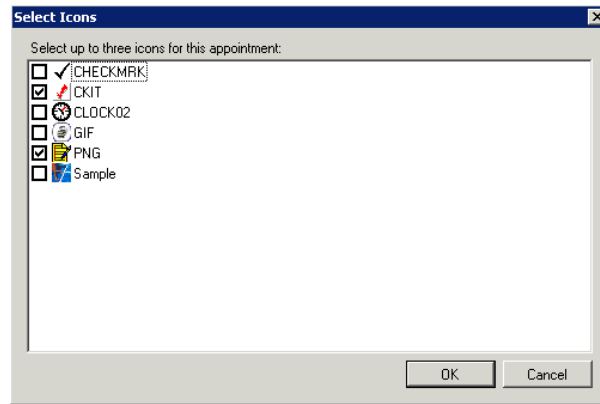
15. If you are pre-appointing an appointment, select the **Pre-Appointment** check box.

A **(p)** appears next to the patient's name in the Appointment Scheduler and a check mark appears in the Pre Appt box on the Confirmation tab to notify you that this appointment has been pre-appointed.

16. If you did not select an available new appointment time in step 3 above, click **Find Avail** and go to [To search for an available new appointment time on page 332](#) to find and select an available new appointment time.

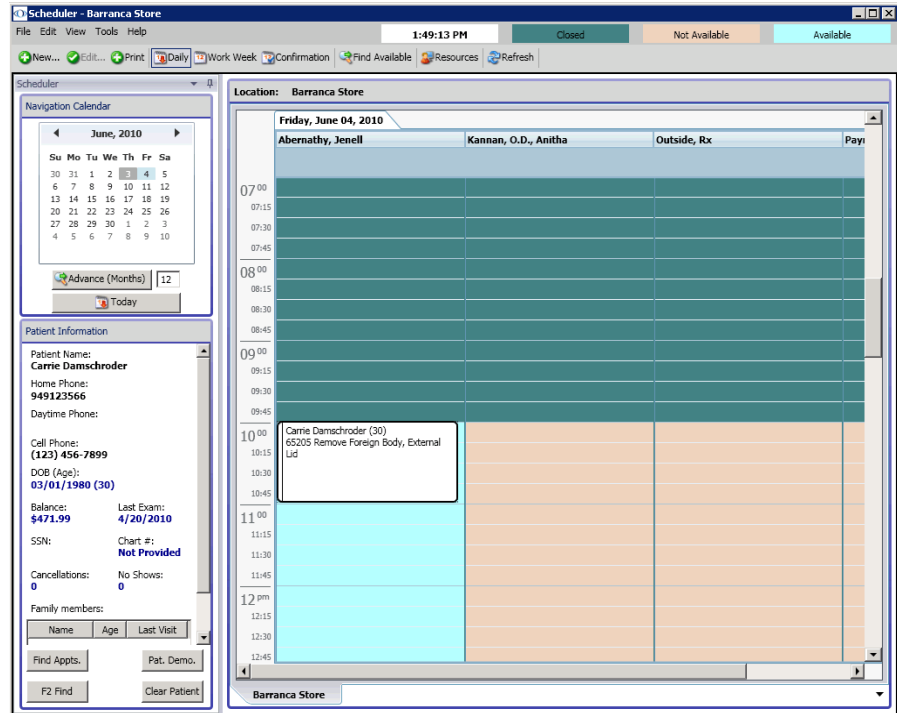
17. If you want to select icons to represent this appointment, click **Icons**, select icons on the Appointment Icons window, and click **OK**.

NOTE To add icons in OfficeMate, go to [To set up appointment icons on page 331](#).



18. Click **OK** to save the new appointment details.

The patient's name appears on the time grid in the Appointment Scheduler and in the Quick List window on the day the appointment is scheduled.



NOTES

- After you schedule an appointment, right-click on the appointment in the time grid and then click **Edit** to open the Appointment Details window and view information about the creation and modification of the appointment.
- To schedule an appointment for an existing patient's linked family member, click on an appointment that you have already scheduled in the time grid and then double-click on a family member's name in the Family Members box or right-click on a family member's name and select **Select as Active Patient** in the Family Members box.

For information on modifying appointments, watch the "Modifying Appointments" video.

► To modify scheduled appointments

1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to [Opening & Viewing the Appointment Scheduler on page 313](#).
2. Find an existing appointment. For more information on finding an existing appointment, go to [To find an existing appointment time on page 334](#).

3. Select the existing appointment that you want to edit and complete one of the following tasks:
 - Click **Edit** and select **Edit Selected Appointment**.
 - Click **Edit** on the Appointment Scheduler toolbar.
 - Right-click on the appointment and select **Edit Selected Appointment**.
 The Appointment Details window opens.
4. Edit appointment information using the instructions in steps 5–18 in [To schedule a new appointment on page 336](#).

Recording Patients Shows and No Shows

For information on recording no shows, watch the “[No Shows and Cancels](#)” video.

NOTE To print a report of all no show appointments, go to [Cancellations And No Shows on page 644](#).

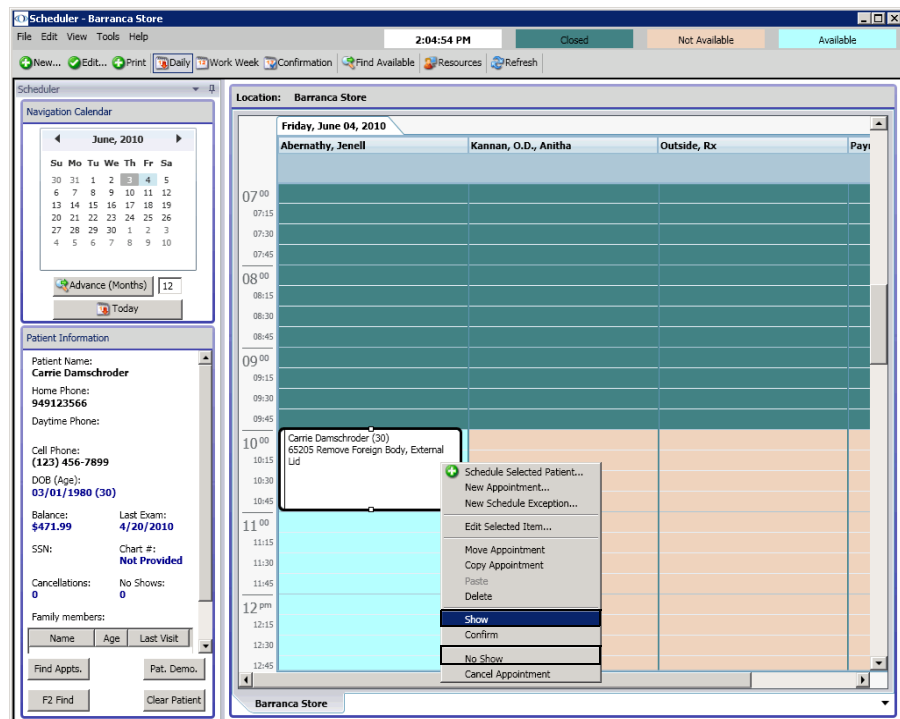
1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to [Opening & Viewing the Appointment Scheduler on page 313](#).
2. Find an existing appointment. For more information on finding an existing appointment, go to [To find an existing appointment time on page 334](#).

3. Select the appointment that you want to denote as an appointment where the patient showed or did not show and complete one of the following tasks:
 - Click **Edit** and select **Show** or **No Show**.
 - Right-click on the appointment and select **Show** or **No Show**.

NOTE

You can also denote when a patient showed or did not show at his or her appointment by finding and selecting the appointment, right-clicking on the appointment and selecting **Edit**, and selecting appropriate options in the **Show Status** box on the Appointment Detail window.

A green check mark or red “X” appears next to the patient’s name.



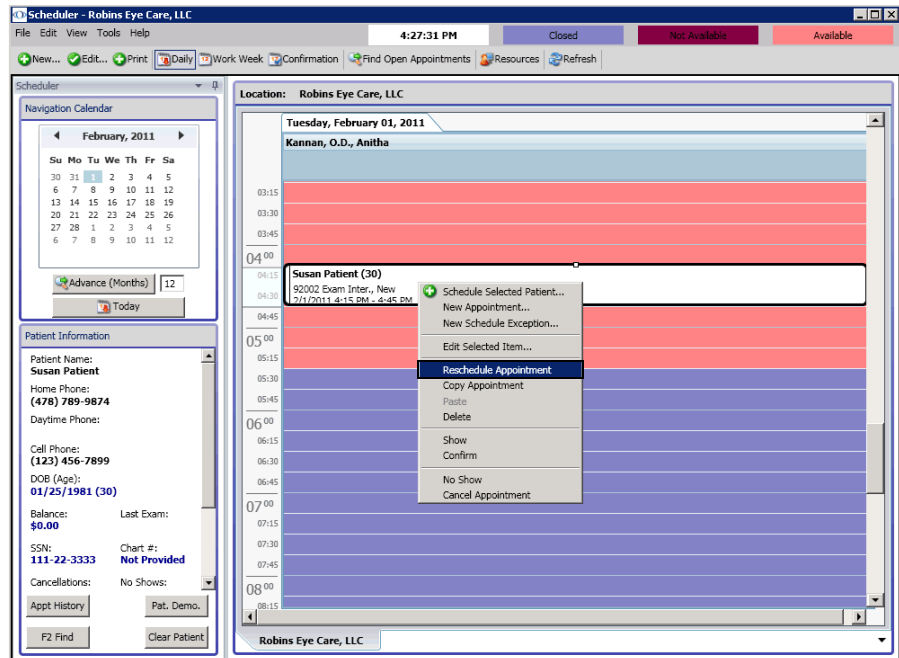
Rescheduling Appointments

1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to [Opening & Viewing the Appointment Scheduler on page 313](#).
2. Find an existing appointment. For more information on finding an existing appointment, go to [To find an existing appointment time on page 334](#).

3. Select the appointment that you want to reschedule and complete one of the following tasks:
 - Click **Edit** and select **Reschedule Appointment**.
 - Right-click on the appointment and select **Reschedule Appointment**.
 - Drag it to a new time in the time grid.

NOTE

In OfficeMate 9.0 and above, you cannot drag appointments from one provider to another provider; this feature will be available in a future version.

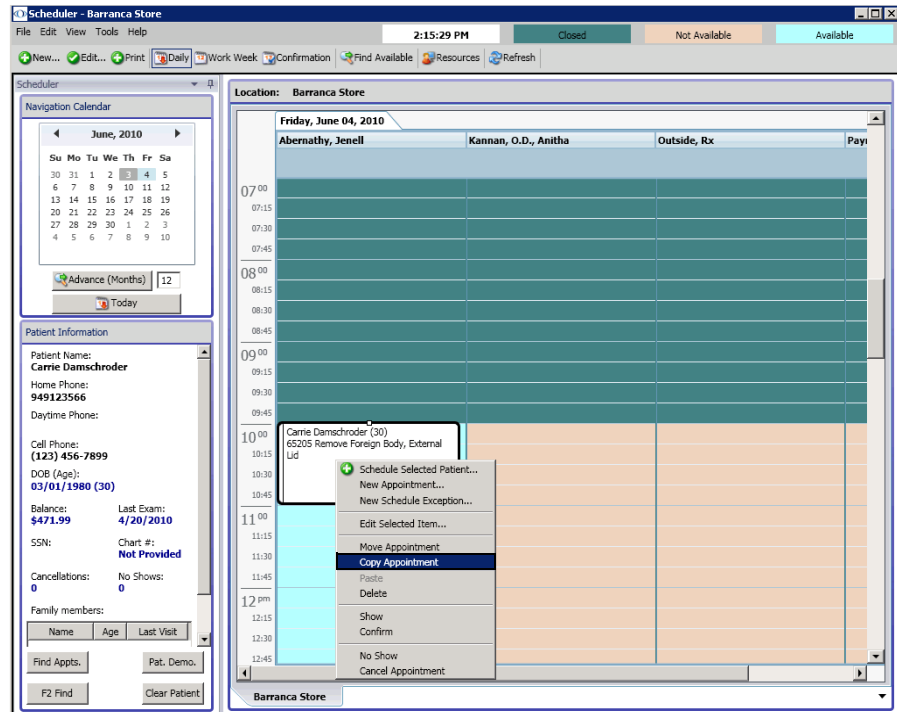


4. If you did not drag the appointment to a new time in the time grid, click on a new time in the time grid to reschedule the patient's appointment to the new time and complete one of the following tasks:
 - Click **Edit** and select **Paste**.
 - Right-click on the appointment and select **Paste**.

Copying Appointments

1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to [Opening & Viewing the Appointment Scheduler on page 313](#).
2. Find an existing appointment. For more information on finding an existing appointment, go to [To find an existing appointment time on page 334](#).

3. Select the appointment that you want to copy and complete one of the following tasks:
 - Click **Edit** and select **Copy Appointment**.
 - Right-click on the appointment and select **Copy Appointment**.



4. Click on a new time in the time grid to which you want to copy the patient's appointment and complete one of the following tasks:
 - Click **Edit** and select **Paste**.
 - Right-click on the appointment and select **Paste**.

Canceling Appointments

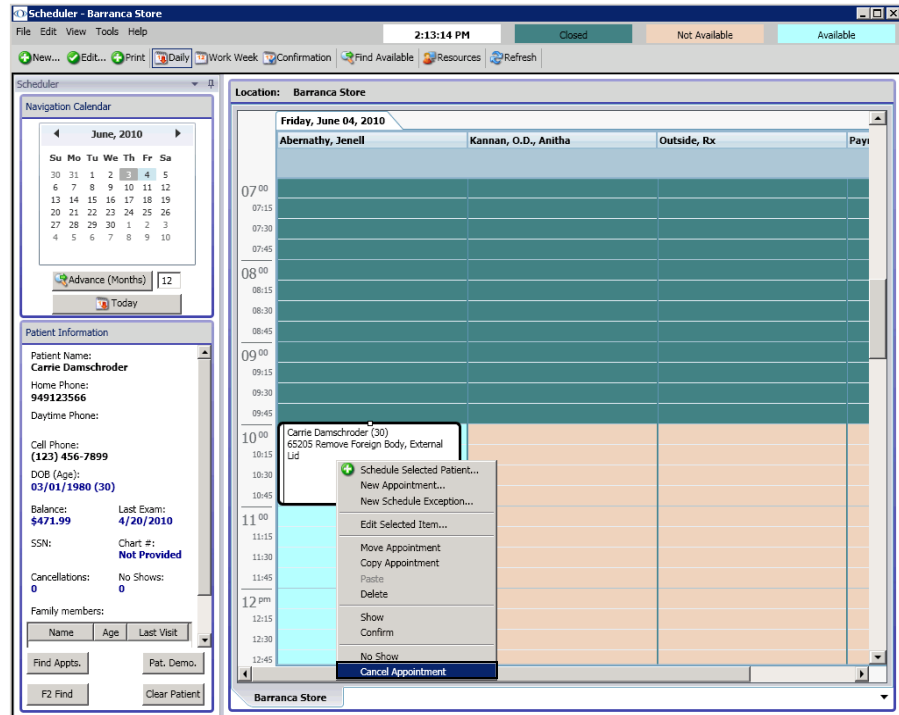
NOTES

- To print a report of all canceled appointments, go to [Cancellations And No Shows on page 644](#).
- If you plan on deleting a patient from your patient demographic database, you cannot cancel any of the patient's appointments; instead you must delete the appointments. For more information on deleting appointments, go to [Deleting Appointments on page 348](#).

For information on cancelling appointments, watch the "No Shows and Cancels" video.

1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to [Opening & Viewing the Appointment Scheduler on page 313](#).
2. Find an existing appointment. For more information on finding an existing appointment, go to [To find an existing appointment time on page 334](#).

3. Select the appointment that you want to cancel and complete one of the following tasks:
 - Click **Edit** and select **Cancel Appointment**.
 - Right-click on the appointment and select **Cancel Appointment**.



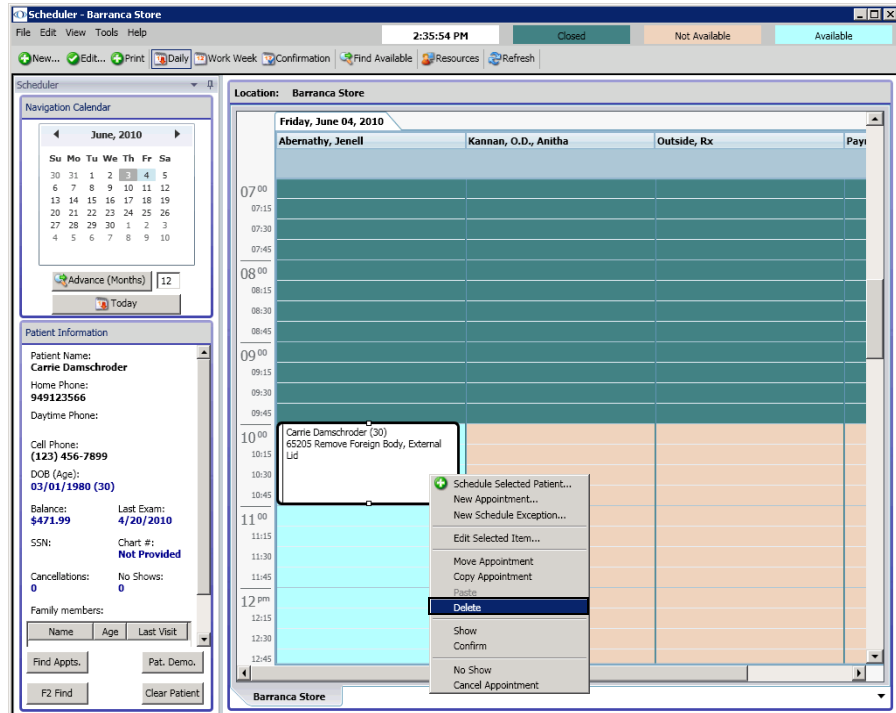
4. Click **OK** to cancel the appointment.

Deleting Appointments

NOTE Deleted appointments are *not* tracked in OfficeMate. If you want to track appointments that you are removing from the Appointment Scheduler, go to [Canceling Appointments on page 347](#).

1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to [Opening & Viewing the Appointment Scheduler on page 313](#).
2. Find an existing appointment. For more information on finding an existing appointment, go to [To find an existing appointment time on page 334](#).

3. Select the appointment that you want to delete and complete one of the following tasks:
 - Click **Edit** and select **Delete**.
 - Right-click on the appointment and select **Delete**.



4. Click **OK** to delete the appointment.

Confirming Appointments

For information on confirming appointments, watch the “Confirming Appointments” video.

You can view and print a list of patient appointments that need to be confirmed using the Appointment Scheduler’s Confirmation button.

1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to [Opening & Viewing the Appointment Scheduler on page 313](#).

NOTE Click **Refresh** to refresh the Appointment Scheduler with the most up-to-date appointment information.

2. Click the **Confirmation** button on the Appointment Scheduler toolbar.
3. Select a location from the tabs at the bottom of the window.
4. Select a date from the calendar.

OR

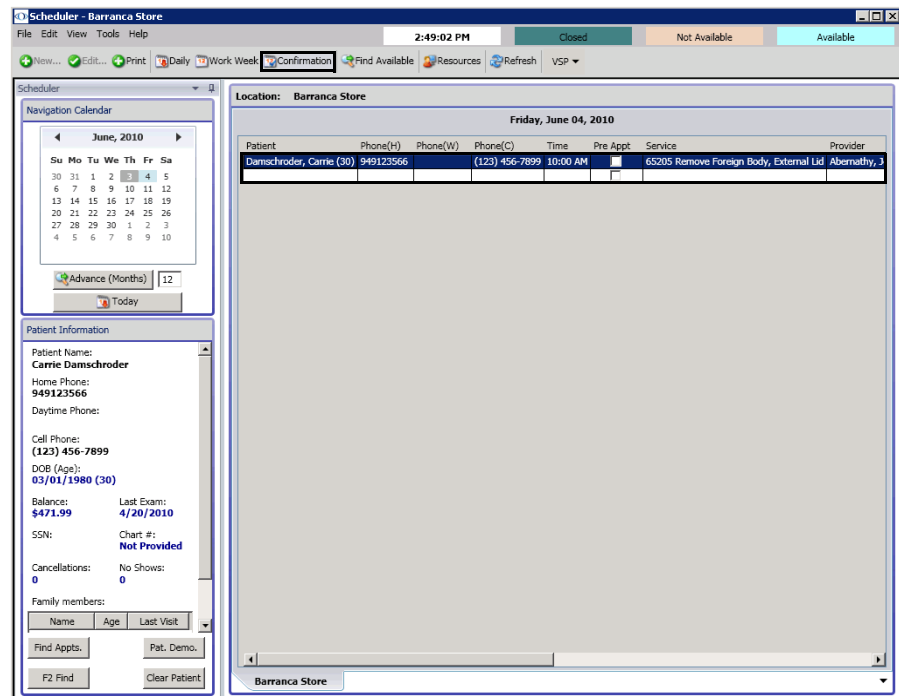
Click the **Today** button on the Appointment Scheduler toolbar to view today’s appointment schedule.

- If you want to view existing VSP eligibility or authorization information for patient, select the patient, click the **VSP** drop-down menu, and select **Eligibility** or **Authorization**.
- Click the **Print** button on the Appointment Scheduler toolbar to print a list of appointments scheduled for the date that you selected.

NOTE

If you do not want to print all of the columns displayed in the window, right-click on the confirmation grid and deselect column names that you do not want to print.

- Call the patients on the printed list and confirm their appointments.
- Complete one or more of the following tasks:
 - Select the **Confirmed** check box if you confirmed the patient's appointment.
 - Select the **Msg** check box if you left a message for the patient.
 - Select the **N/A** check box if you were unable to confirm the patient's appointment.



- Type your initials in the **Init.** text box.
- Type notes in the **Notes** text box, if necessary.
- To verify a patient's insurance eligibility, double-click the row in which the patient's name appears.

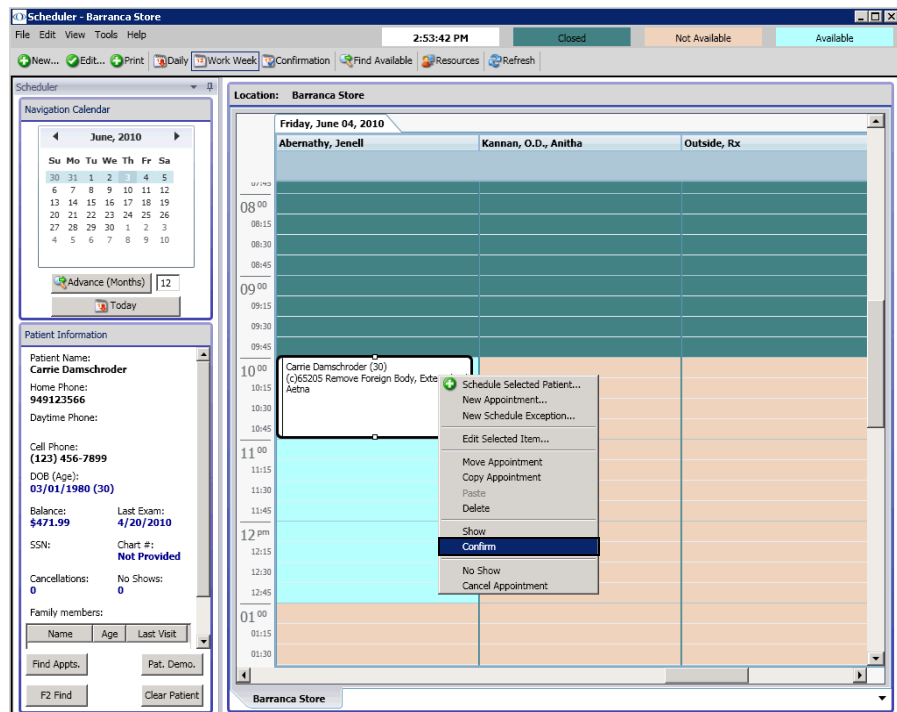
The Insurance Detail window opens. If you need to make any changes to the patient's insurance information, go to [To record additional insurance claim information on page 219](#). Close the Insurance Detail window when you are finished.

12. To denote a patient's appointment as being confirmed, complete the following tasks:
 - a. Find the existing appointment. For more information on finding an existing appointment, go to [To find an existing appointment time on page 334](#).
 - b. Select the appointment that you want to confirm.
 - c. Click **Edit** and select **Confirm**.
OR
Right-click on the appointment and select **Confirm**.

NOTE

You can also denote a patient's appointment as being confirmed by finding and selecting the appointment, right-clicking on the appointment and selecting **Edit Selected Appointment**, and selecting appropriate options in the Confirmation Information box on the Appointment Detail window.

A check box calendar icon appears next to the patient's name.



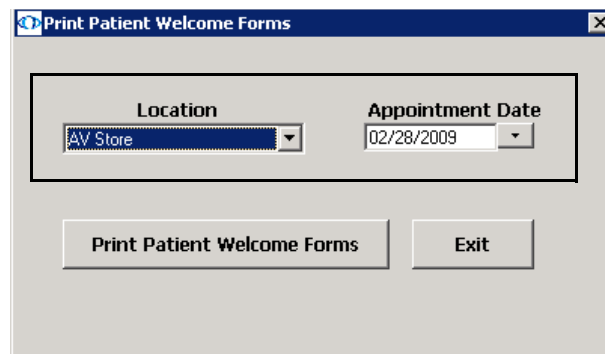
Printing Patient Welcome Forms

The patient welcome form displays basic patient demographic and insurance information. A patient welcome form is printed for each patient with a confirmed

appointment on a given day. Follow the instructions below to print patient welcome forms.

NOTE OfficeMate prints patient welcome forms only for appointments that have been confirmed. For information about confirming appointments, go to [Confirming Appointments on page 349](#).

1. Open the Appointment Scheduler. For more information on opening the Appointment Scheduler, go to [Opening & Viewing the Appointment Scheduler on page 313](#).
2. Click **Tools** and select **Print Patient Welcome Forms**.
The Print Patient Welcome Forms window opens.
3. Select your location from the **Location** drop-down menu if it is not selected already.
4. Type or select a date in the **Appointment Date** field.



5. Click **Print Patient Welcome Forms**.
The Preview Window opens.
6. Complete one or more of the following tasks:
 - Click the **Print Report** icon to open the Print window and print the patient welcome forms.
 - Click the **Export Report** icon to open the Export window and choose a format and destination for your exported patient welcome forms.

NOTE If you are exporting the report to a Microsoft Windows application, such as Excel, select the **MS Excel 97-2000 (Data Only)** format and **Disk file** destination in the Export window and click **OK**. Select the **Column width based on objects in the Details** radio button and *all* the check boxes in the Excel Format Options window and click **OK**.

7. Close the Preview Window.
8. Click **Exit** to close the Print Patient Welcome Forms window.

Recording Receipts & Adjustments

7

For information on receipts and adjustments, watch the “Basic Financial Transactions” and “Advanced Financial Transactions” videos.

In this chapter:

- [Opening a Patient's Receipts & Adjustments, 353](#)
- [Applying Payments to Patient Receivables, 354](#)
- [Refunding Patient Credits, 362](#)
- [Applying Insurance Payments to Any Open Balances, 363](#)
- [Applying Insurance Payments to Only Specific Patients, 367](#)
- [Recording Insurance Payments Using Electronic Remittance Advice, 370](#)
- [Recording Insurance Chargebacks, 383](#)
- [Adjusting, Transferring, & Writing Off Charges, 386](#)
- [Modifying Payments Using the Receipt History, 405](#)

After you create and record fee slips you can apply payments from patients and insurance companies, make adjustments to charges, apply credits, and transfer unpaid balances to patients and insurance companies.

Opening a Patient's Receipts & Adjustments

1. Open a patient's receipts and adjustments using one of the following methods:
 - Click the **Receipts** icon and select **Receipts and Adjustments**.
 - Click **Tasks** on the main window toolbar, select **Receipts**, and select **Receipts and Adjustments**.
 - Right-click on the Patient Demographic, Hard Lens Order, Soft Lens Order, Eyewear Order, Fee Slip, or Patient Ledger window title bar and select **Receipts**.
 - Right-click on a patient in the Quick List window and select **Receipts**.
 - Click on a patient's name in the Quick List window and drag and drop the patient on the **Receipts** icon.
 - Click Receipts on the Patient Center window.

- Enter search information in the Patient Last/First name text boxes and click **F2 Find** to find and select a patient.

NOTES

- If the patient has been sent to collection, the Collection Warning message appears. You can remove the patient from collection after you record a payment and click **Yes** on the Collection Message window.
- Click **Ledger** to open the Patient Ledger window and review the ledger. For more information on reviewing the ledger, go to [Using the Patient Ledger on page 409](#).

Applying Payments to Patient Receivables

This section tells you how to apply payments to patient receivables, including how

- [To apply payments to patient receivables, 354](#)
- [To record prepayments, 357](#)
- [To pay open items with credit amounts, 359](#)

► To apply payments to patient receivables

- Open a patient's receipts and adjustments. For more information on opening a patient's receipts and adjustments, go to [Opening a Patient's Receipts & Adjustments on page 353](#).
- Select one of the following payment Method radio buttons:
 - Check**
 - Cash**
 - Debit Card**
 - Credit Card**
 - Other**
- If you have activated the Safeguard - Red Flags Rule feature, select the appropriate Credit Card (only available when you select the Credit Card method of payment) and Driver's License/Photo ID check boxes in the Verify Patient Identification box to indicate whether or not you have verified that the patient's identity matches the types of identification listed.

NOTES

- If you select the cash payment method, the Verify Patient Identification box will not appear for you to verify that the patient's identity matches the types of identification listed.
- If a red "RFR" box appears in the Receipts & Adjustments window, the patient's identity has possibly been stolen.
- To activate the Safeguard - Red Flags Rule feature, go to [To set up financial preferences on page 62](#).
- If you have received a notification that the patient's identity may have been stolen, go to [To record financial information on page 225](#) to record the notification.

- Type the payment amount in the **Amount Paid** text box.

For information on recording patient identity and security information, watch the "[Red Flags Rule](#)" video.

5. Apply the payment amount using one of the following methods:
 - If you are applying a check payment, type the check number for your deposit ticket in the **Check #** text box.
 - If you are applying a cash payment, type the cash amount tendered in the **Tendered** text box. The change amount (if applicable) appears in the **Change** text box.
 - If you are applying debit card payment, select the card type from the **Type** drop-down menu.
 - If you are applying a credit card payment, select the card type from the **Type** drop-down menu.
 - If you are applying another type of payment, select the payment type from the **Type** drop-down menu.
6. Select the person recording the transaction from the **Recorded By** drop-down menu, if this field is not locked.
7. If you want to apply this payment amount to other family members, select the **All With Same Guarantor** check box to view information on all of the guarantor's family members.

NOTES

- The payment will be recorded on the patient's receipt history.
- To automatically select the All With Same Guarantor check box, select the **Yes** radio button next to the Default All Same Guarantor other system preference. For more information on modifying other system preferences, go to [To set up financial preferences on page 62](#).

8. Apply the amount in the Total to Apply text box using one of the following methods:
 - Click **Apply to Oldest** to apply the amount to the oldest item.
 - Click in an item's **Payment** text box to apply the amount to a specific item.

NOTES

- The amount is applied to the item as soon as you click in the item's Payment text box.
- Typing a partial payment amount in the Payment text box will display an amount in the Balance box next to the item. The next time you open the Receipts & Adjustments window for this patient, this item's remaining balance and any new fee slip charges are displayed.

Receipts & Adjustments Patient: Sally Patient DOB: 8/9/1981

Apply to Patient Receivable

Apply to Insurance

Patient Last/First: Patient Sally F2 Find

Method: Check Cash Debit Card Credit Card Other

Amount Paid: \$100.00 Type: [Dropdown]

Amount Applied: \$0.00 Check #: 1234

Refunded Amount: \$0.00 Bank #: 322270356

Total to Apply: \$100.00

Date: 5/10/2007

Receipt No: 0

Unapplied: \$17.00

All With Same Guarantor:

To Apply: \$100.00

Recorded By: Doctor, Joe

Date	Slip #	Patient	Code/Name	Open	Payment	Balance	Refund	Location
5/2/2007	454	Sally Patient	Marchon Frame	100.00	\$100.00	0.00		Mission Viejo - South Sto
				Totals	100.00	100.00	.00	.00

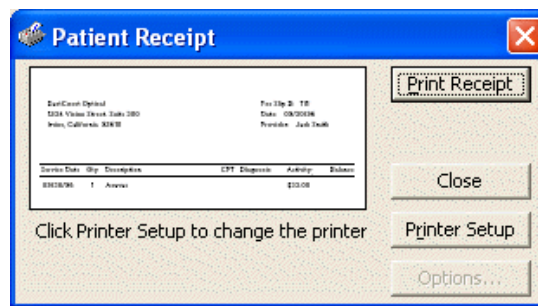
History Delete Record Print Cancel New Adj Ledger

9. If you want to adjust a charge, go to [Adjusting, Transferring, & Writing Off Charges on page 386](#).
10. Click **Print** if you want to print the list of patient receivables.

11. Click **Record** and follow the instructions below to record the payment and print a receipt.
 - Click **Print Receipt** to print a receipt.
 - Click **Printer Setup** to set up the printer or select a printer other than the default printer. For more information on setting up the printer, go to [Changing the Posting Date on page 20](#).
 - Click **Close** to close the Patient Receipt window.

NOTE

After you record a payment, the payment is assigned a receipt number. To view and change payments, click **History**. For more information on viewing and changing payments, go to [Modifying Payments Using the Receipt History on page 405](#).



► **To record prepayments**

A prepayment results in a credit (or unapplied payment) on the patient's account.

NOTE

- To use all or part of the prepayment credit to pay open charges, go to [To pay open items with credit amounts on page 359](#).
- To automatically apply unapplied patient amounts from fee slips to new fee slip charges in the Fee Slip window, select the **Yes** radio button next to the Apply patient unapplied amount from fee slip financial system preference. For more information on modifying other system preferences, go to [To set up financial preferences on page 62](#).

1. Open a patient's receipts and adjustments. For more information on opening a patient's receipts and adjustments, go to [Opening a Patient's Receipts & Adjustments on page 353](#).
2. Select one of the following payment Method radio buttons:
 - **Check**
 - **Cash**
 - **Debit Card**
 - **Credit Card**
 - **Other**
3. If you have activated the Safeguard - Red Flags Rule feature, select the appropriate Credit Card (only available when you select the Credit Card method of payment) and Driver's License/Photo ID check boxes in the Verify

For information on recording patient identify and security information, watch the "Red Flags Rule" video.

Patient Identification box to indicate whether or not you have verified that the patient's identity matches the types of identification listed.

NOTES

- If you select the cash payment method, the Verify Patient Identification box will not appear for you to verify that the patient's identity matches the types of identification listed.
- If a red "RFR" box appears in the Receipts & Adjustments window, the patient's identity has possibly been stolen.
- To activate the Safeguard - Red Flags Rule feature, go to [To set up financial preferences on page 62](#).
- If you have received a notification that the patient's identity may have been stolen, go to [To record financial information on page 225](#) to record the notification.

4. Type the payment amount in the **Amount Paid** text box.
5. Apply the payment amount using one of the following methods:
 - If you are applying a check payment, type the check number for your deposit ticket in the **Check #** text box.
 - If you are applying a cash payment, type the cash amount tendered in the **Tendered** text box. The change amount (if applicable) appears in the **Change** text box.
 - If you are applying debit card payment, select the card type from the **Type** drop-down menu.
 - If you are applying a credit card payment, select the card type from the **Type** drop-down menu.
 - If you are applying another type of payment, select the payment type from the **Type** drop-down menu.

Date	Slip #	Patient	Code/Name	Open	Payment	Balance	Refund	Location
5/2/2007	454	Sally Patient	Marchon Frame	100.00	\$100.00	0.00		Mission Viejo - South Sto
				Totals	100.00	100.00	.00	.00

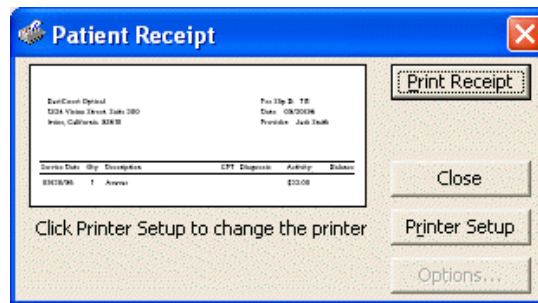
6. Select the person recording the transaction from the **Recorded By** drop-down menu, if this field is not locked.
7. Click **Print** if you want to print the list of patient receivables.
8. Click **Record** and follow the instructions below to record the payment and print a receipt.

NOTE If you applied a partial payment amount, the **Receipts Payment Warning** window opens. Click **Yes** to create a patient credit or click **No** to apply the payment to a fee slip.

- Click **Print Receipt** to print a receipt.
- Click **Printer Setup** to set up the printer or select a printer other than the default printer. For more information on setting up the printer, go to [Changing the Posting Date on page 20](#).
- Click **Close** to close the Patient Receipt window.

The prepayment is displayed in the Credit box in the Patient Ledger window and in the Unapplied box in the Receipts & Adjustments window.

- NOTES**
- After you record a payment, the payment is assigned a receipt number. To view and change payments, click **History**. For more information on viewing and changing payments, go to [Modifying Payments Using the Receipt History on page 405](#).
 - View the prepayment in the Receipt History window and on the Patient Receipt History tab in the Patient Ledger window.



► To pay open items with credit amounts

NOTE To automatically apply unapplied patient amounts from fee slips to new fee slip charges in the Fee Slip window, select the **Yes** radio button next to the Apply patient unapplied amount from fee slip other system preference. For more information on modifying other system preferences, go to [To set up financial preferences on page 62](#).

1. Open a patient's receipts and adjustments. For more information on opening a patient's receipts and adjustments, go to [Opening a Patient's Receipts & Adjustments on page 353](#).
2. Click **History**.
The Receipt History window opens.

3. Select a receipt with an unapplied balance and click **Select**.

Rec. No	Date	Amount	Check #	Type	Unapplied	Refunded	Location
1	5/11/2007	28.80		Visa	.00	.00	Mission Viejo Mall store
Totals		28.80			.00	.00	

The Receipts & Adjustments window is populated with information from the unapplied balance.

4. Select the person recording the transaction from the **Recorded By** drop-down menu, if this field is not locked.
5. If you want to apply this payment amount to other family members, select the **All With Same Guarantor** check box to view information on all of the guarantor's family members.

NOTES

- The payment will be recorded on the patient's receipt history.
- To automatically select the All With Same Guarantor check box, select the **Yes** radio button next to the Default All Same Guarantor financial system preference. For more information on modifying other system preferences, go to [To set up financial preferences on page 62](#).

6. Apply the amount in the Total to Apply text box using one of the following methods:
 - Click **Apply to Oldest** to apply the amount to the oldest item.
 - Click in an item's **Payment** text box to apply the amount to a specific item.

NOTE

Typing a partial payment amount in the Payment text box will display an amount in the Balance box next to the item. The next time you open the Receipts & Adjustments window for this patient, this item's remaining balance and any new fee slip charges are displayed.

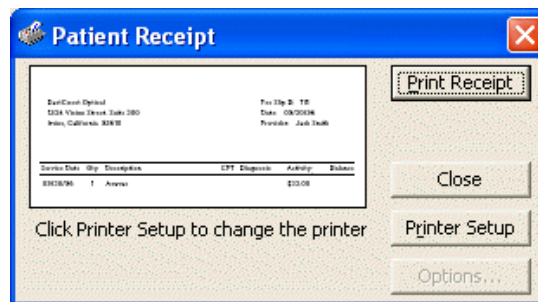
Date	Slip #	Patient	Code/Name	Open	Payment	Balance	Refund	Location
5/2/2007	454	Sally Patient	Marchon Frame	100.00	\$100.00	0.00		Mission Viejo - South Sto
				Totals	100.00	100.00	.00	.00

7. If you want to adjust a charge, go to [Adjusting, Transferring, & Writing Off Charges on page 386](#).
8. Click **Print** if you want to print the list of patient receivables.

9. Click **Record** and follow the instructions below to record the payment and print a receipt.
 - Click **Print Receipt** to print a receipt.
 - Click **Printer Setup** to set up the printer or select a printer other than the default printer. For more information on setting up the printer, go to [Setting Up the Printer on page 21](#).
 - Click **Close** to close the Patient Receipt window.

NOTES

- The amount in the Unapplied box is updated after you refresh the Receipts & Adjustments window.
- After you record a payment, the payment is assigned a receipt number. To view and change payments, click **History**. For more information on viewing and changing payments, go to [Modifying Payments Using the Receipt History on page 405](#).



Refunding Patient Credits

NOTES

- You cannot delete a patient credit after it has been refunded.
- You can only refund unapplied amounts, for example, for returned products where the refund amount was kept on account or items with adjusted amounts. For more information about product returns and refunds, go to [Returning Products on page 413](#). For information about adjusting charges, go to [Adjusting, Transferring, & Writing Off Charges on page 386](#).

1. Open a patient's Receipts & Adjustments window. For more information on opening Receipts & Adjustments window, go to [Opening a Patient's Receipts & Adjustments on page 353](#).
2. Click **History**.
The Receipt History window opens.

3. Select a receipt and click **Refund**.

Rec. No.	Posting Date	Check #	Check/REF/DATE	Batch #	Type	Deposit Amt.	Dep. Corrections	Corrected Amt.	Unapplied
10153	1/25/2011			N/A	Check	150.00	0.00	150.00	0
10151	1/20/2011			N/A	Check	80.00	0.00	80.00	0
10150	1/20/2011			N/A	Patient Return	110.00	0.00	110.00	110
10149	1/20/2011			N/A	Cash	110.00	0.00	110.00	0

The Refund Patient Credit window opens.

4. Complete the fields in the **Patient Refund** section.

Refund Patient Credit

Receipt Details
Dep. Date: 1/20/2011 Receipt No: 10150
Patient last/First: Patient Sally
Amount Paid: \$110.00 Check #: Bank #
Adjustments: \$0.00 Method: Check Cash Debit Card Credit Card Other
Adjusted Amt: \$110.00 Type: Patient Return
Applied Amount: \$0.00
Refunded Amount: \$0.00 Unapplied Amount: \$110.00

Previous Refund Details

Date	Refund Method	Check# / Type	Refund Amount	Reason	Recorded By

Patient Refund

Patient Balance: \$0.00 Date: 1/25/2011
 Check Cash Debit Card Credit Card Other
 Type:
 Check #: 55589
 Refund Amount: \$110.00
 Reason: Patient changed mind.
 Recorded By: Doctor, Johnny
 Refund Cancel

5. Click **Refund**.

The refunded amount appears in the Refunded column on the Receipt History tab and in the Patient Refund of Unapplied Amounts report. For more information on the Patient Refund of Unapplied Amounts report, go to [Patient Refund of Unapplied Payments on page 682](#).

Applying Insurance Payments to Any Open Balances

1. Open the Receipts & Adjustments window. For more information on opening the Receipts & Adjustments window, go to [Opening a Patient's Receipts & Adjustments on page 353](#).
2. Click the **Apply to Insurance** tab.
3. Select an insurance company from the **Insurance** drop-down menu.
4. Type or select dates in the **Dates of Service** boxes if you want to view patients that are reflected on date-specific EOBs.

- Click **Display Charges** and select **Display Summary View** or **Display Detail View**.

NOTES

- If you view the insurance charges in the summary view, you can post payments by patient total balances.
- If you view the insurance charges in the detail view, you can post payments by line item.

- Type the payment amount in the **Amount Paid** text box.
- Select one of the following payment Method radio buttons:
 - **Check**
 - **EFT**
 - **Credit Card**
- If you selected check or EFT as the payment method, select the check or EFT date from the Check/EFT Date calendar.
- Apply the payment amount using one of the following methods:
 - If you are applying a check or EFT payment, type the check or EFT number for your deposit ticket in the **Check #** or **EFT #** text box.
 - If you are applying another type of payment, select the payment type from the **Type** drop-down menu.
- Select the person recording the transaction from the **Recorded By** drop-down menu, if this field is not locked.

- Click in an item's **Payment** text box and type the payment amount to apply the amount to a specific item.

NOTES

- Typing a partial payment amount in the Payment text box will display an amount in the Balance box next to the item. If you only record a partial payment, you can post the remainder of the insurance payment at a later time.
- You may type a negative number for VSP insurance payments, but not for other insurances. To record chargebacks for other insurances, go to [Recording Insurance Chargebacks on page 383](#).
- Click **Adj** to transfer the balance to another insurance company or patient, adjust the amount, or write off the balance. For more information on adjustments, go to [Adjusting, Transferring, & Writing Off Charges on page 386](#).

Receipts & Adjustments

Apply to Patient Receivable Apply to Insurance

Insurance: Aetna Display Charges Location: (All) Date: 6/23/2009

Date of Service: Recorded By: Doctor, Johnny Receipt No: 0

Amount Paid: \$0.00 Unapplied: \$60.40 Dep. Location: Ins. ChargeBack

Amount Applied: \$0.00 Method: Check EFT Credit Card Last Name:

Amount Transf'd: \$0.00 Check #: First Name: Search

To Apply: \$0.00 Batch #: Fee Slip #: Clear

Type: Patient ID:

Ref #	Patient Name	Open Charges	Payments	Balance	Transf'd
+ 0031	Adkins, Byron	9.25	0.00	9.25	
+ 203-45-6712	Ant, Adam	43.50	0.00	43.50	
+ 0411	Azhdari, Ebrahim	43.50	0.00	43.50	
- 222-11-3333	Bloom, Leopold	16.25	0.00	16.25	

Feeslip No	Service Date	Patient Name	CPT	Units	Service Description	Open	Payments	Item Bal.	Location
83	4/21/2009	Bloom, Leopold	92004	1	92004 (Medical)	16.25	0.00	16.25	Newport Beach Store

Ref #	Patient Name	Open Charges	Payments	Balance	Transf'd
+ 250-60-1515	Buster, Colin	275.82	0.00	275.82	
+ 520-32-0000	Hunt, Amanda	20.00	0.00	20.00	
+ 456-45-6546	Mark, Burns	22.50	0.00	22.50	
+ 200-25-2100	Mayo, Debra	77.23	0.00	77.23	
+	Test, Five	94.25	0.00	94.25	

Totals: 602.30 | .00 | 602.30 | .00

History Delete Global Adjustment Record Print Cancel New Adj

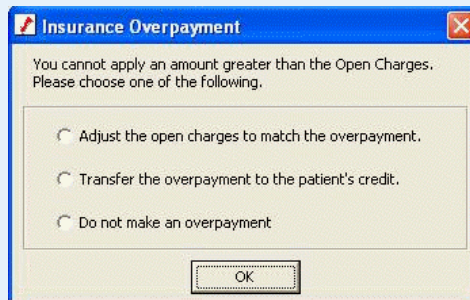
- If you want to adjust a charge, go to [Adjusting, Transferring, & Writing Off Charges on page 386](#).
- Click **Print** if you want to print the list of patient insurance receivables.

14. Click **Record** to apply the payments.

NOTE

If you try to record a payment on a line item in the detailed view that is higher than the open charges, the Insurance Overpayment window opens. Choose to adjust the open charges to match the overpayment amount, transfer the overpayment to the patient's credit, or not make the overpayment.

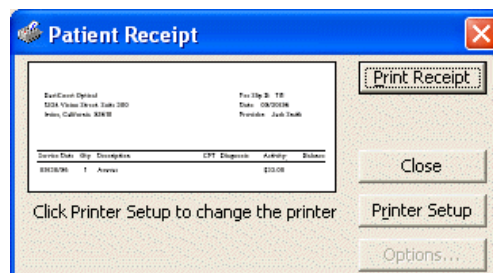
- If you adjust the open charges to match the overpayment amount, OfficeMate automatically increases the balance to match the overpayment. The amount in the Patient's Ledger will display "(ADJ)" next to it.
- If you transfer the overpayment to the patient's credit, the correct amount is credited to the line item and the overpayment is transferred to the patient.
- If you do not make an overpayment, the payment will automatically be corrected to be the same amount as the open charges.



- Click **Print Receipt** to print a receipt.
- Click **Printer Setup** to set up the printer or select a printer other than the default printer. For more information on setting up the printer, go to [Setting Up the Printer on page 21](#).
- Click **Close** to close the Patient Receipt window.

NOTE

After you record a payment, the payment is assigned a receipt number. To view and change payments, click **History**. For more information on viewing and changing payments, go to [Modifying Payments Using the Receipt History on page 405](#).



Applying Insurance Payments to Only Specific Patients

For more information on applying payments to insurance balances, watch the "Posting Insurance Payments" video.

1. Open the Receipts & Adjustments window. For more information on opening the Receipts & Adjustments window, go to [Opening a Patient's Receipts & Adjustments on page 353](#).
2. Click the **Apply to Insurance** tab.
3. Select an insurance company from the **Insurance** drop-down menu.

NOTE	Do not click Display Charges as you would when listing all open balances for a particular insurance carrier.
-------------	--

4. Type the payment amount in the **Amount Paid** text box.
5. Select one of the following payment Method radio buttons:
 - **Check**
 - **EFT**
 - **Credit Card**
6. If you selected check or EFT as the payment method, select the check or EFT date from the Check/EFT Date calendar.
7. Apply the payment amount using one of the following methods:
 - If you are applying a check or EFT payment, type the check or EFT number for your deposit ticket in the **Check #** or **EFT #** text box.
 - If you are applying another type of payment, select the payment type from the **Type** drop-down menu.
8. Select the person recording the transaction from the **Recorded By** drop-down menu, if this field is not locked.
9. Type the first few letters of the patient's last name in the **Last Name** text box.

NOTE	Alternatively, you can search for the patient by typing the first few letters of the patient's first name, typing the fee slip number, or typing the patient number.
-------------	--

10. Click **Search** to locate open insurance balances that match your search criteria.

- Click in an item's **Payment** text box and type the payment amount to apply the amount to a specific item.

NOTES

- Typing a partial payment amount in the Payment text box will display an amount in the Balance box next to the item. If you only record a partial payment, you can post the remainder of the insurance payment at a later time.
- Click **Adj** to transfer the balance to another insurance company or patient, adjust the amount, or write off the balance. For more information on adjustments, go to [Adjusting, Transferring, & Writing Off Charges on page 386](#).

The screenshot shows the 'Apply to Insurance' window. The 'Insurance' dropdown is set to 'Aetna'. The 'Amount Paid' is \$100.00, and the 'Unapplied' amount is \$180.40. The 'Amount Applied' is \$81.75. The 'To Apply' amount is \$18.25. The 'Method' is 'Check'. The 'Check #' is 123, and the 'Batch #' is 200920101. The 'Date' is 7/20/2009. The 'Recorded By' is 'Doctor, Johnny'. The 'Receipt No' is 40. The 'Patient ID' is 'a'. The table below shows the following data:

Ref #	Patient Name	Open Charges	Payments	Balance	Transf'd
+ 297-62-0031	Adkins, Byron	9.25	9.25	0.00	
+ 203-45-6712	Ant, Adam	134.43	0.00	134.43	
+ 0411	Azhdari, Ebrahim	43.50	0.00	43.50	
Totals		187.18	9.25	177.93	.00

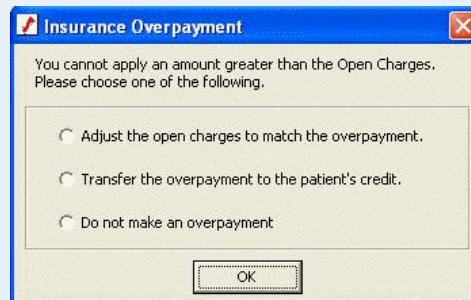
- Repeat steps 9–11 for each patient for whom the payment should be applied.
- If you want to adjust a charge, go to [Adjusting, Transferring, & Writing Off Charges on page 386](#).
- Click **Print** if you want to print the list of patient insurance receivables.

15. Click **Record** to apply the payments.

NOTE

If you try to record a payment on a line item in the detailed view that is higher than the open charges, the Insurance Overpayment window opens. Choose to adjust the open charges to match the overpayment amount, transfer the overpayment to the patient's credit, or not make the overpayment.

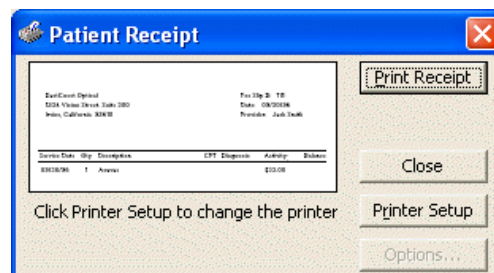
- If you adjust the open charges to match the overpayment amount, OfficeMate automatically increases the balance to match the overpayment. The amount in the Patient's Ledger will display "(ADJ)" next to it.
- If you transfer the overpayment to the patient's credit, the correct amount is credited to the line item and the overpayment is transferred to the patient.
- If you do not make an overpayment, the payment will automatically be corrected to be the same amount as the open charges.



- Click **Print Receipt** to print a receipt.
- Click **Printer Setup** to set up the printer or select a printer other than the default printer. For more information on setting up the printer, go to [Setting Up the Printer on page 21](#).
- Click **Close** to close the Patient Receipt window.

NOTE

After you record a payment, the payment is assigned a receipt number. To view and change payments, click **History**. For more information on viewing and changing payments, go to [Modifying Payments Using the Receipt History on page 405](#).



Recording Insurance Payments Using Electronic Remittance Advice

The Electronic Remittance Advice (ERA) feature saves time and improves the accuracy of your billing records by automatically adjudicating payments, overpayments, underpayments, write-offs, lab chargebacks, patient transfers, and secondary insurance transfers.

This section tells you how to apply payments to insurance receivables through ERA, including how

- [To open the Insurance Remittance Advice Entry window, 370](#)
- [To load the electronic remittance advice file, 371](#)
- [To review the ERA information, 373](#)
- [To process interest payments and provider adjustments, 378](#)
- [To resolve nonexistent line items, 378](#)
- [To resolve overpayments, 380](#)
- [To resolve lab chargeback entries, 381](#)
- [To resolve irreconcilable entries, 383](#)

For more information on using the ERA feature, watch the “Using the Electronic Remittance Advice” video.

NOTES

- **Do not record an ERA until you are completely finished reviewing, processing, and resolving any issues in it! If you record an ERA prior to completing these tasks, the ERA will close, you will not be able to reload it, and you will need to manually record insurance payments.**
- In order to begin using the ERA functionality, complete one of the following tasks below:
 - If you are a VSP user, ensure that the location’s VSP Integration information is recorded correctly on the Location Maintenance window and Eyefinity Customer Care (877.448.0707) has turned on your electronic remittance advice functionality. Go to [Maintaining Locations on page 24](#) for information about recording VSP Integration information.
 - If you are a non- user, ensure that your clearinghouse is saving ERA data files in the OfficeMate\DATA\EMC\ERA folder. Refer to your clearinghouse’s website for more information.
 - If Gateway is your clearinghouse, you must include `|era%.rmt` at the end of the path you enter on Gateway’s website. For example, **C:\OfficeMate\DATA\EMC\ERA\era%.rmt**.

Using the ERA, an insurance check that used to take hours to record and balance will now only take you about thirty minutes or less!

► To open the Insurance Remittance Advice Entry window

1. Click the **Receipts** icon and select **ERA**.
OR
Click **Tasks** on the main window toolbar, select **Receipts**, and select **ERA**. The Insurance Remittance Advice Entry window opens.
2. Continue by loading the ERA file. For more information about loading the ERA file, go to [To load the electronic remittance advice file on page 371](#).

► **To load the electronic remittance advice file**

1. If VSP is your clearinghouse, go to step 2; otherwise, go to your clearinghouse's website and download the ERA file to the OfficeMate\DATA\EMC\ERA folder.

NOTE

If Gateway is your clearinghouse, you must include `lera%.rmt` at the end of the path you enter on Gateway's website. For example, **C:\OfficeMate\DATA\EMC\ERA\lera%.rmt**.

2. Open the Insurance Remittance Advice window. For more information, go to [To open the Insurance Remittance Advice Entry window on page 370](#).
3. Click **Load ERA File**.

OfficeMate looks for available batch claim payments on VSP's secured server or located in the OfficeMate\DATA\EMC\ERA folder and displays the available claim payments in the Select Remittance File window.

Date	Provider	Insurance	Claims	Payment
11/19/2008	EYE ASSOCIATES	DC BCBS/CAREFIRST	14	\$1,380.53
12/09/2008	EYE ASSOCIATES	VA MEDICARE/TRAILBLAZE...	371	\$37,574.98

4. Select a batch to process and click **OK**.

NOTES

- You can select only one batch to process at a time.
- OfficeMate displays only those batches that have not been processed.

OfficeMate analyzes the ERA file and matches the claims in the file to claims in OfficeMate.

5. Review any error messages that appear and perform the following steps:
 - a. Click **Yes** to search for the patient.
The Find Patient window opens.
 - b. Select the patient from the results list and click **Select**.

NOTE

If you choose to not search for the patient, or if the patient cannot be found in the Find Patient window, you can locate the patient after adjudicating the payments for patients that can be found. For information on processing the patients that could not be found, go to [To resolve irreconcilable entries on page 383](#).

The Insurance Remittance Advice Entry window populates with information about the payment and lists all of the patients and claims covered in the payment.

S	Pat #	Fee Slip	Ref #	Patient Name	Billed	PatPaid	Open	Allowed	Patient	SecInsur	Payments	Adjust	To Pat	To Sec	Balance																																																																																										
<input checked="" type="checkbox"/>	P	25	27	1732465900	BCSENPXTLJ, M2OO	883.95	0.00	863.95	120.00	0.00	0.00	120.00	743.95	0.00	0.00																																																																																										
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<input checked="" type="checkbox"/>	P	27	17	1732486100	CFEXFMM, NBSJPO	745.00	0.00	745.00	120.00	0.00	0.00	120.00	625.00	0.00	0.00																																																																																										
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6. Review the information displayed in the Insurance Remittance Advice Entry window. For more information on Reviewing the ERA information go to [To review the ERA information on page 373](#).

The claims with green check marks are fully adjudicated. The claims without check marks could not be matched to items on fee slips and require manual intervention. The line items that require attention are bold, and the text of the line items are different colors, depending on the nature of the mismatch.

7. Resolve any line items in bold text.

NOTES

- For information on resolving line items, go to the appropriate section for more information:

For this type of line item	Refer to this section
Red, bold text	To resolve nonexistent line items on page 378
Black, bold text	To resolve overpayments on page 380
Green, bold text	To resolve lab chargeback entries on page 381
Red, bold text	To resolve lab chargeback entries on page 381

- Although nonexistent line items and lab chargebacks both appear in red, bold text, you can easily tell the difference between the two. The nonexistent line items will have a product listed in the Description column, while lab chargebacks have Lab Chargeback listed in as the description.

► **To review the ERA information**

- Ensure that the Insurance Remittance Advice Entry window is open and an ERA file is loaded. For information on opening the Insurance Remittance Advice Entry window and loading an ERA file, go to [To open the Insurance Remittance Advice Entry window on page 370](#).

The Insurance Remittance Advice Entry window populates with information about the payment in the upper portion of the window and lists all of the patients and claims covered in the payment in the lower portion of the window.

- Click the following buttons, as needed:
 - Click **No Detail** to view only the header of each claim, which gives a summary of each claim as a single line. You cannot edit or adjudicate claims within the header row.
 - Click **All Detail** to view the detail of each claim by showing all of the line items.
 - Click **Unchecked Detail** to view the detailed line items for only those claims that require your attention. Claims that do not require your attention will display only the header row.

3. Review the information in the header rows.

NOTE

Use the following table to understand the information displayed in the header rows and where the information comes from:

This column	Displays this information														
check box	Indicates whether the claim was automatically adjudicated. A green check mark indicates that the claim was fully adjudicated. If the check box does not have a green check mark, one or more items in the claim require your attention.														
S	Displays the status of the claim. Refer to the following table to determine the status of the claim.														
	<table border="1"> <thead> <tr> <th>Status</th> <th>Meaning</th> </tr> </thead> <tbody> <tr> <td>P</td> <td>Primary</td> </tr> <tr> <td>PX</td> <td>Primary crossover</td> </tr> <tr> <td>S</td> <td>Secondary</td> </tr> <tr> <td>I</td> <td>Informational</td> </tr> <tr> <td>R</td> <td>Reversal</td> </tr> <tr> <td>D</td> <td>Denied</td> </tr> </tbody> </table>	Status	Meaning	P	Primary	PX	Primary crossover	S	Secondary	I	Informational	R	Reversal	D	Denied
Status	Meaning														
P	Primary														
PX	Primary crossover														
S	Secondary														
I	Informational														
R	Reversal														
D	Denied														
Pat #	Displays the patient number from OfficeMate.														
Fee Slip	Displays the fee slip number associated with the claim.														
Ref #	Displays the reference number assigned to the claim by the clearinghouse.														
Patient Name	Displays the patient's name.														
Billed	Displays the insurance amount billed on the fee slip in OfficeMate.														
PatPaid	Displays the amount the patient paid, as recorded in OfficeMate.														
Open	Displays the open charges for the claim, as recorded in OfficeMate.														

NOTE, CONT.	This column	Displays this information
	Allowed	Displays the amount covered by insurance according to the ERA.
	Patient	Displays the amount for which the patient is responsible.
	SecInsur	Displays the amount for which the secondary insurance is responsible (crossover).
	Payment	Displays the insurance payment from the ERA. This field can be edited.
	Adjust	Displays the amount of any adjustments that are made to reconcile the payment to the amount billed on the fee slip. this field can be edited.
	To Pat	Displays the amount that is assigned to the patient according to the ERA. This field can be edited.
	To Sec	Displays the amount that is assigned to the secondary insurance. This field can be edited.
	Balance	Displays any amount that is not covered under the Adjust, To Pat, and To Sec

4. Review the information in the claim detail rows.

NOTE

Use the following table to understand the information displayed in the detail rows and where the information comes from:

This column	Displays this information
Service Date	Displays the service date recorded on the fee slip.
CPT	Displays the CPT code either from the fee slip or, if the line is a nonexistent item, from the ERA file.
Units	Displays the number of items billed with that row's CPT code.
Description	Displays the product description from the fee slip.
Billed	Displays the amount billed on the claim in OfficeMate.
PatPaid	Displays the amount the patient paid, as recorded in OfficeMate.
Open	Displays the open charges for the claim, as recorded in OfficeMate.
Allowed	Displays the amount covered by insurance according to the ERA.
Patient	Displays the amount for which the patient is responsible.
SecInsur	Displays the amount for which the secondary insurance is responsible (crossover)
Payment	Displays the insurance payment from the ERA. This field can be edited.
Adjust	Displays the amount of any adjustments that are made to reconcile the payment to the amount billed on the fee slip. this field can be edited.
To Pat	Displays the amount that is assigned to the patient according to the ERA. This field can be edited.
To Sec	Displays the amount that is assigned to the secondary insurance. This field can be edited.
Balance	Displays any amount that is not covered under the Adjust, To Pat, and To Sec amounts.

- Click the button at the far right of the detail rows to view additional details and remarks for individual line items.

Insurance Remittance Advice Entry (Rev. 40)

Insurance: Load ERA File

Date:

Amount Paid: Method: Check EFT

Interest Paid: Check #:

Provider Adjustment: Bank #:

To Apply: Skipped: Applied: Undo No Detail All Detail Unchecked Detail

S	Pat #	Fee Slip	Ref #	Patient Name	Billed	PatPaid	Open	Allowed	Patient	SecInsur	Payments	Adjust	To Pat	To Sec	Balance																																																																																										
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01/15/09	V2756	1	Eyeless Case	20.00	0.00	20.00	0.00	0.00	0.00	0.00	20.00	0.00	0.00	0.00																																																																																											
<input checked="" type="checkbox"/>	P	21	14	1732485500	BMGBSP, KPSHF	455.00	0.00	435.00	130.00	0.00	0.00	130.00	305.00	0.00	0.00																																																																																										
<table border="1"> <thead> <tr> <th>Service Date</th> <th>CPT</th> <th>Units</th> <th>Description</th> <th>Billed</th> <th>PatPaid</th> <th>Open</th> <th>Allowed</th> <th>Patient</th> <th>SecInsur</th> <th>Payment</th> <th>Adjust</th> <th>To Pat</th> <th>To Sec</th> <th>Balance</th> </tr> </thead> <tbody> <tr> <td>01/14/09</td> <td>99213</td> <td>1</td> <td>99213</td> <td>75.00</td> <td>0.00</td> <td>75.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>75.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> </tr> <tr> <td>01/14/09</td> <td>V2520</td> <td>1</td> <td>Acuvue Oasys for Astigmatism</td> <td>190.00</td> <td>0.00</td> <td>170.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>170.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> </tr> <tr> <td>01/14/09</td> <td>V2520</td> <td>1</td> <td>Acuvue Oasys for Astigmatism</td> <td>190.00</td> <td>0.00</td> <td>190.00</td> <td>130.00</td> <td>0.00</td> <td>0.00</td> <td>130.00</td> <td>60.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> </tr> </tbody> </table>																Service Date	CPT	Units	Description	Billed	PatPaid	Open	Allowed	Patient	SecInsur	Payment	Adjust	To Pat	To Sec	Balance	01/14/09	99213	1	99213	75.00	0.00	75.00	0.00	0.00	0.00	0.00	75.00	0.00	0.00	0.00	01/14/09	V2520	1	Acuvue Oasys for Astigmatism	190.00	0.00	170.00	0.00	0.00	0.00	0.00	170.00	0.00	0.00	0.00	01/14/09	V2520	1	Acuvue Oasys for Astigmatism	190.00	0.00	190.00	130.00	0.00	0.00	130.00	60.00	0.00	0.00	0.00																														
Service Date	CPT	Units	Description	Billed	PatPaid	Open	Allowed	Patient	SecInsur	Payment	Adjust	To Pat	To Sec	Balance																																																																																											
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01/14/09	V2520	1	Acuvue Oasys for Astigmatism	190.00	0.00	170.00	0.00	0.00	0.00	0.00	170.00	0.00	0.00	0.00																																																																																											
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<input checked="" type="checkbox"/>	P	27	17	1732486100	CFEYFMM, NBSJPO	765.00	0.00	745.00	120.00	0.00	0.00	120.00	625.00	0.00	0.00																																																																																										
<table border="1"> <thead> <tr> <th>Service Date</th> <th>CPT</th> <th>Units</th> <th>Description</th> <th>Billed</th> <th>PatPaid</th> <th>Open</th> <th>Allowed</th> <th>Patient</th> <th>SecInsur</th> <th>Payment</th> <th>Adjust</th> <th>To Pat</th> <th>To Sec</th> <th>Balance</th> </tr> </thead> <tbody> <tr> <td>01/15/09</td> <td>99213</td> <td>1</td> <td>99213</td> <td>75.00</td> <td>0.00</td> <td>75.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>75.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> </tr> <tr> <td>01/15/09</td> <td>V2750</td> <td>1</td> <td>AR Coating (TwinCity)</td> <td>90.00</td> <td>0.00</td> <td>90.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> <td>90.00</td> <td>0.00</td> <td>0.00</td> <td>0.00</td> </tr> </tbody> </table>																Service Date	CPT	Units	Description	Billed	PatPaid	Open	Allowed	Patient	SecInsur	Payment	Adjust	To Pat	To Sec	Balance	01/15/09	99213	1	99213	75.00	0.00	75.00	0.00	0.00	0.00	0.00	75.00	0.00	0.00	0.00	01/15/09	V2750	1	AR Coating (TwinCity)	90.00	0.00	90.00	0.00	0.00	0.00	0.00	90.00	0.00	0.00	0.00																																													
Service Date	CPT	Units	Description	Billed	PatPaid	Open	Allowed	Patient	SecInsur	Payment	Adjust	To Pat	To Sec	Balance																																																																																											
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01/15/09	V2750	1	AR Coating (TwinCity)	90.00	0.00	90.00	0.00	0.00	0.00	0.00	90.00	0.00	0.00	0.00																																																																																											

Print Adj Reason Other Ins Record Cancel

Detail for V2220

Fee	<input type="text" value="\$190.00"/>	Adjustments	Amount	Reason
Allowed Amt.	<input type="text" value="\$0.00"/>	Contractual	<input type="text" value="\$0.00"/>	<input type="text"/>
Deductible	<input type="text" value="\$0.00"/>	Pat. Responsibility	<input type="text" value="\$0.00"/>	<input type="text"/>
CoIns. Amount	<input type="text" value="\$0.00"/>	Correct/Reversal:	<input type="text" value="\$0.00"/>	<input type="text"/>
CoPay Amount	<input type="text" value="\$0.00"/>	Payor Initiated:	<input type="text" value="\$190.00"/>	<input type="text" value="PI42"/>
Open Amounts		Remarks: <input type="text" value="3W"/> <input type="text"/> <input type="text"/>		
Patient	<input type="text" value="\$0.00"/>	Secondary: <input type="text"/>		
Insurance	<input type="text" value="\$190.00"/>			
Total	<input type="text" value="\$190.00"/>			

Close

- Resolve line items that are in bold text. For information on resolving nonexistent line items in red, bold text, go to [To resolve nonexistent line items on page 378](#). For information on resolving overpayments in black, bold text, go to [To resolve overpayments on page 380](#). For information on resolving lab chargebacks in red, bold or green, bold text, go to [To resolve lab chargeback entries on page 381](#).

► **To process interest payments and provider adjustments**

NOTES

- Provider adjustments are payments made by insurance companies but not necessarily applicable to an individual patient. For example, VSP may pay an in-office finishing (IOF) payment, which is a provider incentive.
- To process interest payments or provider adjustments, you must have first set up one fictitious patient to which all interest payments may be applied and one fictitious patient to which all provider adjustments may be applied. For information on creating a patient record, go to [Creating Patient Records on page 203](#).

1. Ensure that the Insurance Remittance Advice Entry window is open and an ERA file is loaded. For information on opening the Insurance Remittance Advice Entry window and loading an ERA file, go to [To open the Insurance Remittance Advice Entry window on page 370](#).
2. Review the information displayed in the Insurance Remittance Advice Entry window. For more information on Reviewing the ERA information go to [To review the ERA information on page 373](#).
3. If an amount appears in the Interest Paid or Provider Adjustment fields, click **Select Account**.
The Find Patient window opens.
4. Find and select the fictitious patient record that was created to accept interest payments or provider adjustment amounts.
The amount of the interest payment or provider adjustment is applied to the fictitious patient's account. To verify, go to the Receipts & Adjustments window. For more information about viewing a patients receipts and adjustments, go to [Opening a Patient's Receipts & Adjustments on page 353](#).

► **To resolve nonexistent line items**

1. Ensure that the Insurance Remittance Advice Entry window is open and an ERA file is loaded. For information on opening the Insurance Remittance Advice Entry window and loading an ERA file, go to [To open the Insurance Remittance Advice Entry window on page 370](#).
2. Review the information displayed in the Insurance Remittance Advice Entry window. For more information on Reviewing the ERA information go to [To review the ERA information on page 373](#).
Nonexistent line items (i.e., items that appear in the ERA file, but were not included on the original claim sent to the insurance company) are listed in red, bold text.

3. For each line item listed in red, bold text, click the **Balance** column to view the available options.
 - Select **Distribute to existing lineitems** to distribute the payment to open line items on the fee slip.
 - Select **Look for other open insurance charges** to apply the overpayment to the open charges for the insurance carrier that may have appeared on another fee slip. The Ledger history will be updated.

NOTES

- Select the Look for other open insurance charges option when two or more fee slips are associated with one payment.
- You cannot undo the Look for other open insurance charges operation.

Insurance Remittance Advice Entry (Rev. 4/0)

Insurance: YSP Date: 12/02/2008

Amount Paid: \$650.25
Interest Paid: \$0.00
Provider Adjustment: \$0.00

Method: Check EFT
Check #: 02629648
Bank #:

Receipt No:
Unapplied:
Location: Embassy Opticians
Recorded By: Doctor, Johnny

To Apply: \$0.00 Skipped: \$80.25 Applied: \$570.00

S	Pat #	Fee Slip	Ref #	Patient Name	Billed	PatPaid	Open	Allowed	Patient	SecInsur	Payments	Adjust	To Pat	To Sec	Balance
P	12	7	1732484600	SB, EYDL TPPO	1108.95	0.00	1193.95	113.40	25.00	0.00	50.40	933.55	110.00	0.00	100.00
	Service Date	CPT	Units	Description	Billed	PatPaid	Open	Allowed	Patient	SecInsur	Payment	Adjust	To Pat	To Sec	Balance
	01/12/09	V2199	1	BF PL Blended 22 Clr	50.00	0.00	50.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	50.00
	01/12/09	V2199	1	BF PL Blended 22 Clr	50.00	0.00	50.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	50.00
	01/12/09	99213	1	99213	75.00	0.00	75.00	0.00	0.00	0.00	0.00	0.00	75.00	0.00	0.00
	01/12/09	V2213	1	BF PL Blended 22 Clr	190.00	0.00	190.00	0.00	0.00	0.00	0.00	0.00	190.00	0.00	0.00
	01/12/09	V2200	1	Lens - Bifocal	340.00	0.00	340.00	21.75	0.00	0.00	21.75	318.25	0.00	0.00	0.00
	01/12/09	V2213	1	BF PL Blended 22 Clr	190.00	0.00	190.00	21.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	01/12/09	V2799	1	BF PL Blended 22 Clr	10.00	0.00	10.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	01/12/09	V2761	1	Solid Gold Mirror	100.00	0.00	100.00	0.00	0.00	0.00	0.00	0.00	100.00	0.00	0.00
	01/12/09	V2799	1	BF PL Blended 22 Clr	10.00	0.00	10.00	0.00	0.00	0.00	0.00	0.00	10.00	0.00	0.00
	01/12/09	V2718	1	Press-On Prism	40.00	0.00	40.00	0.00	0.00	0.00	0.00	0.00	40.00	0.00	0.00
	01/12/09	V2799	1	Lab Charge Back	0.00	0.00	0.00	0.00	0.00	0.00	-38.00	38.00	0.00	0.00	0.00
	01/12/09	V2020	1	Buddy	33.95	0.00	118.95	67.90	25.00	0.00	42.90	-33.95	110.00	0.00	0.00
	01/12/09	V2756	1	Eyeless Case	20.00	0.00	20.00	2.00	0.00	0.00	2.00	18.00	0.00	0.00	0.00

Print Adj Reason Other Ins Record Cancel

4. If you make a mistake, click **Undo** to undo your last action.
5. Resolve other line items that require attention. For information on resolving overpayments in black, bold text, go to [To resolve overpayments on page 380](#). For information on resolving lab chargebacks in red, bold text, go to [To resolve lab chargeback entries on page 381](#).
6. If you are *completely* finished resolving nonexistent line items and recording insurance payments in the ERA, click **Record**.

NOTE

Do *not* record an ERA until you are completely finished reviewing, processing, and resolving any issues in it! If you record an ERA prior to completing these tasks, the ERA will close, you will not be able to reload it, and you will need to manually record insurance payments.

For more information on resolving overpayments, watch the "Insurance Chargebacks and Overpayments" video.

► To resolve overpayments

1. Ensure that the Insurance Remittance Advice Entry window is open and an ERA file is loaded. For information on opening the Insurance Remittance Advice Entry window and loading an ERA file, go to [To open the Insurance Remittance Advice Entry window on page 370](#).
2. Review the information displayed in the Insurance Remittance Advice Entry window. For more information on Reviewing the ERA information go to [To review the ERA information on page 373](#).

Nonexistent line items (i.e., items that appear in the ERA file, but were not included on the original claim sent to the insurance company) are listed in red, bold text.

3. For each line item listed in black, bold text, click the **Balance** column to view the available options.
 - Select **Distribute overpayment to other charges** to distribute the overpayment to open line items on the fee slip. The overpayment is applied to each item on the fee slip, starting with the first item listed and moving down, until the overpayment is exhausted.
 - Select **Adjust the open charge amount to match the overpayment** to add an adjustment line item to the fee slip. The overpayment amount moves from the Balance column to the Adjust column.
 - Select **Transfer the overpayment to the patient's credit** to transfer the overpayment amount to the patient's account.
 - Select **Look for other open insurance charges** to apply the overpayment to the open charges for the insurance carrier that may have appeared on another fee slip.

The screenshot displays the 'Insurance Remittance Advice Entry (Rev. 40)' window. At the top, there are fields for Insurance (WSP), Date (12/02/2008), Receipt No., and Unapplied amount (\$0.00). Below these are fields for Amount Paid (\$550.25), Interest Paid (\$0.00), and Provider Adjustment (\$0.00). A summary row shows: To Apply \$0.00, Skipped \$80.25, Applied \$570.00. The main table lists line items with columns: S, Pat #, Fee Slip, Ref #, Patient Name, Billed, PatPaid, Open, Allowed, Patient, SecInsur, Payments, Adjust, To Pat, To Sec, Balance. A context menu is open over the 'Balance' column of a line item, showing options: 'Distribute overpayment to other charges', 'Adjust the open charge amount to match the overpayment', 'Transfer the overpayment to the patient's credit', and 'Look for other open insurance charges'.

S	Pat #	Fee Slip	Ref #	Patient Name	Billed	PatPaid	Open	Allowed	Patient	SecInsur	Payments	Adjust	To Pat	To Sec	Balance			
P	5	4	1732483900	EPS, NBSJF	600.00	0.00	585.00	200.00	0.00	0.00	200.00	385.00	0.00	0.00	0.00			
				Service Date	CPT	Units	Description	Billed	PatPaid	Open	Allowed	Patient	SecInsur	Payments	Adjust	To Pat	To Sec	Balance
				01/12/09	V2522	1	SynergEyes Multifocal	300.00	0.00	285.00	0.00	0.00	0.00	285.00	0.00	0.00	0.00	0.00
				01/12/09	V2522	1	SynergEyes Multifocal	300.00	0.00	300.00	200.00	0.00	0.00	200.00	100.00	0.00	0.00	0.00
P	6	5	1732484000	EPSB, NBSL	457.95	0.00	542.95	150.40	10.00	0.00	3.40	505.05	95.00	0.00	-60.50			
				Service Date	CPT	Units	Description	Billed	PatPaid	Open	Allowed	Patient	SecInsur	Payments	Adjust	To Pat	To Sec	Balance
				01/12/09	99212	1	99212	55.00	0.00	55.00	0.00	0.00	0.00	55.00	0.00	0.00	0.00	0.00
				01/12/09	V2781	1	PG PH160 Adapter Clr	10.00	0.00	10.00	40.25							0.25
				01/12/09	V2220	1	PG PH160 Adapter Clr	64.50	0.00	64.50	0.00							0.00
				01/12/09	V2781	1	PG PH160 Adapter Clr	10.00	0.00	10.00	40.25							0.25
				01/12/09	V2220	1	PG PH160 Adapter Clr	64.50	0.00	64.50	0.00							0.00
				01/12/09	V2799	1	Edge Coating	30.00	0.00	30.00	0.00	0.00	0.00	30.00	0.00	0.00	0.00	0.00
				01/12/09	V2782	1	PG PH160 Adapter Clr	40.00	0.00	40.00	0.00	0.00	0.00	40.00	0.00	0.00	0.00	0.00
				01/12/09	V2750	1	Sharpview	90.00	0.00	90.00	0.00	0.00	0.00	90.00	0.00	0.00	0.00	0.00
				01/12/09	V2782	1	PG PH160 Adapter Clr	40.00	0.00	40.00	0.00	0.00	0.00	40.00	0.00	0.00	0.00	0.00
				01/12/09	V2799	1	Lab Charge Back	0.00	0.00	0.00	0.00	0.00	-137.00	137.00	0.00	0.00	0.00	0.00
				01/12/09	V2020	1	Kidco #6	33.95	0.00	118.95	67.90	10.00	0.00	57.90	-33.95	95.00	0.00	0.00

4. If you make a mistake, click **Undo** to undo your last action.
5. For information on resolving nonexistent line items in red, bold text, go to [To resolve nonexistent line items on page 378](#). Resolve other line items that

require attention. For information on resolving lab chargebacks in red, bold text, go to [To resolve lab chargeback entries on page 381](#).

6. If you are *completely* finished resolving overpayments and recording insurance payments in the ERA, click **Record**.

NOTE

Do *not* record an ERA until you are completely finished reviewing, processing, and resolving any issues in it! If you record an ERA prior to completing these tasks, the ERA will close, you will not be able to reload it, and you will need to manually record insurance payments.

For more information on resolving chargebacks, watch the "Insurance Chargebacks and Overpayments" video.

► **To resolve lab chargeback entries**

1. Ensure that the Insurance Remittance Advice Entry window is open and an ERA file is loaded. For information on opening the Insurance Remittance Advice Entry window and loading an ERA file, go to [To open the Insurance Remittance Advice Entry window on page 370](#).
2. Review the information displayed in the Insurance Remittance Advice Entry window. For more information on Reviewing the ERA information go to [To review the ERA information on page 373](#).
3. For each line item listed in red, bold text, click the **Balance** column to view the available options.
 - Select **Distribute to existing lineitems** to distribute the negative amount across line items on the fee slip. Payments made to the other line

items in the fee slip will be reduced by the amount of the lab chargeback.

- Select **Insert as an insurance chargeback** to add the chargeback as a new line item to the fee slip. The line turns green and the Ledger history is updated.

NOTE

Lab chargeback entries that are in green, bold text do not require your attention. The green, bold entry simply indicates that the patient's payment matches or exceeds the lab chargeback.

4. If you make a mistake, click **Undo** to undo your last action.
5. Resolve other line items that require attention. For information on resolving nonexistent line items in bold, red text, go to [To resolve nonexistent line items on page 378](#). For information on resolving overpayments in bold, black text, go to [To resolve overpayments on page 380](#).
6. If you are *completely* finished resolving lab chargeback entries and recording insurance payments in the ERA, click **Record**.

NOTE

Do *not* record an ERA until you are completely finished reviewing, processing, and resolving any issues in it! If you record an ERA prior to completing these tasks, the ERA will close, you will not be able to reload it, and you will need to manually record insurance payments.

► To resolve irreconcilable entries

NOTE Occasionally, OfficeMate cannot match claims in the electronic remittance advice file to a fee slip. This mismatch is usually due to the patient's name being different in the insurance carrier's records than the name recorded in OfficeMate.

1. Ensure that the Insurance Remittance Advice Entry window is open and an ERA file is loaded. For information on opening the Insurance Remittance Advice Entry window and loading an ERA file, go to [To open the Insurance Remittance Advice Entry window on page 370](#).
2. Resolve the line items requiring attention. For information resolving line items, go to [To resolve nonexistent line items on page 378](#), [To resolve overpayments on page 380](#), and [To resolve lab chargeback entries on page 381](#).
3. If you are *completely* finished resolving irreconcilable entries and recording insurance payments in the ERA, click **Record** and close the Insurance Remittance Advice Entry window.

NOTE Do *not* record an ERA until you are completely finished reviewing, processing, and resolving any issues in it! If you record an ERA prior to completing these tasks, the ERA will close, you will not be able to reload it, and you will need to manually record insurance payments.

4. Open the Receipts & Adjustments window to record the irreconcilable entries. For more information on opening the Receipts & Adjustments window, go to [Opening a Patient's Receipts & Adjustments on page 353](#).
5. Click the **Apply to Insurance** tab.
6. Apply the insurance payments to open balances. For more information on applying insurance payments to open balances, go to [Applying Insurance Payments to Any Open Balances on page 363](#).

Recording
Insurance
Chargebacks

Insurance audit procedures can result in a patient "chargeback" to collect a previous insurance overpayment or lab fee, or pay an amount higher than a patient's open balance.

NOTE The patient's insurance must have been billed through the Fee Slip window before you post a chargeback to the patient's account. An overpayment or underpayment chargeback can be recorded for patients with or without open balances.

1. Open the Receipts & Adjustments window. For more information on opening the Receipts & Adjustments window, go to [Opening a Patient's Receipts & Adjustments on page 353](#).
2. Click the **Apply to Insurance** tab.
3. Select an insurance company from the **Insurance** drop-down menu.
4. Type or select dates in the **Date Range** boxes if you want to view patients that are reflected on date-specific EOBs.

5. Click **Display Charges** and select **Display Detail View**.
6. Select one of the following payment Method radio buttons:
 - **Check**
 - **Credit Card**
7. Type the payment amount in the **Amount Paid** text box.
8. Apply the payment amount using one of the following methods:
 - If you are applying a check payment, type the check number for your deposit ticket in the **Check #** text box.
 - If you are applying a credit card payment, select the card type from the **Type** drop-down menu.
9. If you want to record a payment for the amount in the Amount Paid text box while you are recording the chargeback, click in an item's **Payment** text box and type the payment amount. For more information on applying insurance payments to open balances, go to [Applying Insurance Payments to Any Open Balances on page 363](#).
10. Right-click on a patient's line item and select **Insurance Charge Back**.

OR

Click **Ins. ChargeBack** and find and select a patient from the Find Patient window.

NOTE

The selected patient must be assigned to the same insurance company that you selected in step 3, above. For more information on assigning insurance companies to patients, go to [To record insurance information on page 215](#).

Ref #	Patient Name	Open Charges	Payments	Balance	Transf'd
+ 6498	Mask, Lilly	79.50	0.00	79.50	
- 333-33-3333	Patient, Sally	535.00	435.00	100.00	
Totals		614.50	435.00	179.50	.00

The ChargeBack window opens.

11. Complete one of the following tasks:
 - Delete the \$ sign and then type a minus sign and a negative amount in the **Amount** text box to record an insurance chargeback.
 - Delete the \$ sign and then type a positive amount in the **Amount** text box to record an insurance overpayment.

12. Click **Record**.

A chargeback is posted and displayed as a line item in the Receipts & Adjustments and Fee Slip windows.

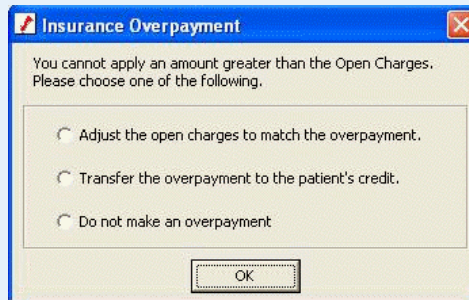
Ref #	Patient Name	Open Charges	Payments	Balance	Transf'd			
- 6498	Mask, Lilly	179.50	100.00	79.50				
Service Date	Patient Name	CPT	Units	Service Description	Open	Payments	Item Bal.	Location
5/15/2007	Mask, Lilly	65770	1	65770	79.50	0.00	79.50	Foothill Ranch Store
5/16/2007	Mask, Lilly		1	Insurance Charge Back	100.00	100.00	0.00	
Ref #	Patient Name	Open Charges	Payments	Balance	Transf'd			
+ 333-33-3333	Patient, Sally	535.00	435.00	100.00				
Totals		714.50	535.00	179.50	.00			

13. Select the person recording the transaction from the **Recorded By** drop-down menu, if this field is not locked. For more information on locking and unlocking this menu, go to [Setting Up Security on page 96](#).
14. Click in the **Payment** text boxes and apply all or part of the amount in the To Apply box to patients' open balances.
15. Click **Print** if you want to print the list of patient insurance receivables.

16. Click **Record** in the Receipts & Adjustments window.

NOTES

- If you try to record a payment on a line item in the detailed view that is higher than the open charges, the Insurance Overpayment window opens. Choose to adjust the open charges to match the overpayment amount, transfer the overpayment to the patient's credit, or not make the overpayment.
 - If you adjust the open charges to match the overpayment amount, OfficeMate automatically increases the balance to match the overpayment. The amount in the Patient's Ledger will display "(ADJ)" next to it.
 - If you transfer the overpayment to the patient's credit, the correct amount is credited to the line item and the overpayment is transferred to the patient.
 - If you do not make an overpayment, the payment will automatically be corrected to be the same amount as the open charges.



- After you record a payment, the payment is assigned a receipt number. To view and change payments, click **History**. For more information on viewing and changing payments, go to [Modifying Payments Using the Receipt History on page 405](#).

Adjusting, Transferring, & Writing Off Charges

When you are recording payments, you can adjust charges due to previous entry errors, transfer amounts, and write off amounts. All adjustments are recorded as separate items and provide a complete history of the changes made to charges.

To adjust charges that have had payments made on them, use the Receipt History window. For more information on using the Receipt History window, go to [Modifying Payments Using the Receipt History on page 405](#).

To adjust prior charges, use the Detail view in the Patient Ledger window. For more information on using the Patient Ledger window, go to [Using the Patient Ledger on page 409](#).

This section includes the following topics:

- [Adjusting Charges, 387](#)
- [Transferring Charges, 397](#)
- [Writing Off Charges, 402](#)

Adjusting Charges

This section tells you how to adjust charges, including how

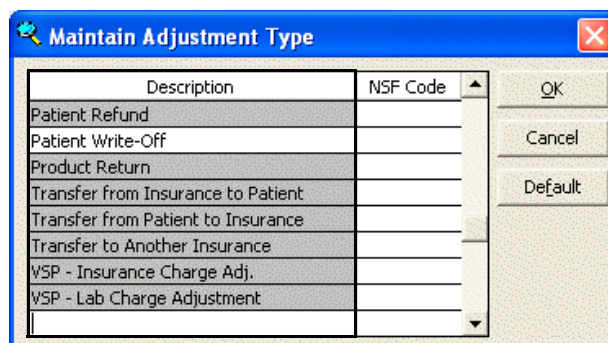
- [To add & modify adjustment types, 387](#)
- [To adjust patients' charges, 388](#)
- [To adjust insurance charges, 390](#)
- [To adjust charges on receipts, 392](#)
- [To record insurance denials, 394](#)

NOTE To adjust previous payments and charges, go to [Modifying Payments Using the Receipt History on page 405](#).

► To add & modify adjustment types

NOTE You can add and modify adjustment types from the Customization window. For more information on adding and modifying adjustment types from the Customization window, go to [To add list box selections on page 37](#) and [To modify list box selections on page 38](#).

1. Open the Receipts & Adjustments window. For more information on opening the Receipts & Adjustments window, go to [Opening a Patient's Receipts & Adjustments on page 353](#).
2. Enter information into the **Apply to Patient Receivable** or **Apply to Insurance** tabs.
3. Click **Adj.**
The Fee Slip Item Adjustment window opens.
4. Press **F12**.
The Maintain Adjustment Types window opens.
5. Add or edit text in the **Description** text boxes.



6. Highlight an adjustment type and click **Default** to select the adjustment type as the default type; or, click **UnDefault** to deselect the adjustment type as the default type.
7. Click **OK**.

► **To adjust patients' charges**

1. Open a patient's receipts and adjustments. For more information on opening a patient's receipts and adjustments, go to [Opening a Patient's Receipts & Adjustments on page 353](#).
2. Select one of the following payment Method radio buttons:
 - **Check**
 - **Cash**
 - **Debit Card**
 - **Credit Card**
 - **Other**
3. Type the payment amount in the **Amount Paid** text box.
4. Apply the payment amount using one of the following methods:
 - If you are applying a check payment, type the check number for your deposit ticket in the **Check #** text box.
 - If you are applying a cash payment, type the cash amount tendered in the **Tendered** text box. The change amount (if applicable) appears in the **Change** text box.
 - If you are applying debit card payment, select the card type from the **Type** drop-down menu.
 - If you are applying a credit card payment, select the card type from the **Type** drop-down menu.
 - If you are applying another type of payment, select the payment type from the **Type** drop-down menu.
5. Select the person recording the transaction from the **Recorded By** drop-down menu, if this field is not locked.
6. Click in the **Payment** text box for the item that you want to adjust.

7. Click **Adj.**

Date	Slip #	Patient	Code/Name	Open	Payment	Balance	Refund	Location
5/16/2007	62	Sally Patient	65410	15.00	15.00	.00		Foothill Ranch Store
				Totals	15.00	15.00	.00	.00

The Fee Slip Item Adjustment window opens.

8. Select an adjustment type from the **Adj. Type** drop-down menu. For more information on adding and modifying adjustment types, go to [To add & modify adjustment types on page 387](#).
9. Select the **Increase** or **Decrease** Balance Effect radio button.

NOTE

To correct a negative balance, select the **Decrease** radio button.

10. Type the amount that you want to increase or decrease the item in the **Amount** text box.
11. Type a reason for the adjustment in the **Reason** text box, if necessary.
12. Select the person recording the transaction from the **Recorded By** drop-down menu, if this field is not locked.
13. If applicable, select the **Do not print on patient statement** check box if you do not want the adjustment to print on the Statements report and then select a line item already on the Patient Ledger to exactly offset the amount of the adjustment that you do not want to print on the Statements report. The offset Patient Ledger line item will not print on the Statements report either.

NOTES

- If you select the **Do not print on patient statement** check box without also selecting items that exactly offset the original adjustment, then the balance on the Statements report will not be correct.
- You must select the **Yes** radio button in the System Preferences window's Statements tab to select the Do not print on patient statement check box in the Fee Slip Item Adjustment window. For more information on selecting Statements system preferences, go to [To set up statement preferences on page 72](#).

14. Click **Record**.

NOTE After you record an adjustment, the adjustment is assigned a receipt number. To view adjustments, click **Ledger**.

15. Click **Record** on the Receipts & Adjustments window.

► **To adjust insurance charges**

1. Open the Receipts & Adjustments window. For more information on opening the Receipts & Adjustments window, go to [Opening a Patient's Receipts & Adjustments on page 353](#).
2. Click the **Apply to Insurance** tab.
3. Select an insurance company from the **Insurance** drop-down menu.
4. Type or select dates in the **Date Range** boxes if you want to view patients that are reflected on date-specific EOBs.
5. Click **Display Charges** and select **Display Detail View**.
6. Select one of the following payment Method radio buttons:
 - **Check**
 - **Credit Card**
7. Type the payment amount in the **Amount Paid** text box.
8. Apply the payment amount using one of the following methods:
 - If you are applying a check payment, type the check number for your deposit ticket in the **Check #** text box.
 - If you are applying a credit card payment, select the card type from the **Type** drop-down menu.

9. Select the person recording the transaction from the **Recorded By** drop-down menu, if this field is not locked.
10. Click in the **Payment** text box for the item that you want to adjust.
11. Click **Adj.**

The Fee Slip Item Adjustment window opens.

12. Select an adjustment type from the **Adj. Type** drop-down menu. For more information on adding and modifying adjustment types, go to [To add & modify adjustment types on page 387](#).
13. Select the **Increase** or **Decrease** Balance Effect radio button.
14. Type the amount that you want to increase or decrease the item in the **Amount** text box.
15. Type a reason for the adjustment in the **Reason** text box, if necessary.
16. Select the person recording the transaction from the **Recorded By** drop-down menu, if this field is not locked.
17. If applicable, select the **Do not print on patient statement** check box if you do not want the adjustment to print on the Statements report and then select a line item already on the Patient Ledger to exactly offset the amount of the

adjustment that you do not want to print on the Statements report. The offset Patient Ledger line item will not print on the Statements report either.

NOTES

- If you select the **Do not print on patient statement** check box without also selecting items that exactly offset the original adjustment, then the balance on the Statements report will not be correct.
- You must select the **Yes** radio button in the System Preferences window's Statements tab to select the Do not print on patient statement check box in the Fee Slip Item Adjustment window. For more information on selecting Statements system preferences, go to [To set up statement preferences on page 72](#).

18. Click **Record**.

19. Click **Record** on the Receipts & Adjustments window.

► **To adjust charges on receipts**

Follow the instructions below to adjust an item that has already been paid:

1. Open a patient's receipts and adjustments. For more information on opening a patient's receipts and adjustments, go to [Opening a Patient's Receipts & Adjustments on page 353](#).
2. Click **History**.
The Receipt History window opens.

- Click on the payment receipt that you want to adjust, click **Select**, and select **Load Summary View** or **Load Detail View**.

Rec. No	Date	Amount	Check #	Type	Unapplied	Refunded	Location
1	5/11/2007	28.80		Visa	.00	.00	Mission Viejo Mall store
Totals		28.80			.00	.00	

- Select the person recording the transaction from the **Recorded By** drop-down menu, if this field is not locked. For more information on locking and unlocking this menu, go to [Setting Up Security on page 96](#).
- Click in the **Payment** text box for the item that you want to adjust.
- Click **Adj**.
The Fee Slip Item Adjustment window opens.
- Select an adjustment type from the **Adj. Type** drop-down menu. For more information on adding, deleting, or modifying adjustment types, go to [To add & modify adjustment types on page 387](#).
- Select the **Increase** or **Decrease** Balance Effect radio button.
- Type the amount that you want to increase or decrease the item in the **Amount** text box.
- Type a reason for the adjustment in the **Reason** text box, if necessary.
- Select the person recording the transaction from the **Recorded By** drop-down menu, if this field is not locked. For more information on locking and unlocking this menu, go to [Setting Up Security on page 96](#).
- If applicable, select the **Do not print on patient statement** check box if you do not want the adjustment to print on the Statements report and then select a line item already on the Patient Ledger to exactly offset the amount of the adjustment that you do not want to print on the Statements report. The offset Patient Ledger line item will not print on the Statements report either.

NOTES

- If you select the **Do not print on patient statement** check box without also selecting items that exactly offset the original adjustment, then the balance on the Statements report will not be correct.
- You must select the **Yes** radio button in the System Preferences window's Statements tab to select the Do not print on patient statement check box in the Fee Slip Item Adjustment window. For more information on selecting Statements system preferences, go to [To set up statement preferences on page 72](#).

13. Click **Record**.

14. Click **Record** on the Receipts & Adjustments window.

► **To record insurance denials**

1. Open the Receipts & Adjustments window. For more information on opening the Receipts & Adjustments window, go to [Opening a Patient's Receipts & Adjustments on page 353](#).
2. Click the **Apply to Insurance** tab.
3. Select an insurance company from the **Insurance** drop-down menu.
4. Type or select dates in the **Date Range** boxes if you want to view patients that are reflected on date-specific EOBs.
5. Click **Display Charges** and select **Display Detail View**.
6. Select one of the following payment Method radio buttons:
 - **Check**
 - **Credit Card**
7. Type the payment amount in the **Amount Paid** text box.
8. Apply the payment amount using one of the following methods:
 - If you are applying a check payment, type the check number for your deposit ticket in the **Check #** text box.
 - If you are applying a credit card payment, select the card type from the **Type** drop-down menu.
9. Select the person recording the transaction from the **Recorded By** drop-down menu, if this field is not locked.
10. Click in the **Payment** text box for the item that you want to adjust.

11. Click **Adj.**

Ref #	Patient Name	Open Charges	Payments	Balance	Transf'd			
- 6498	Mask, Lilly	179.50	100.00	79.50				
Service Date	Patient Name	CPT	Units	Service Description	Open	Payments	Item Bal.	Location
5/15/2007	Mask, Lilly	65770	1	65770	79.50	0.00	79.50	Foothill Ranch Store
5/16/2007	Mask, Lilly		1	Insurance Charge Back	100.00	100.00	0.00	
+ 333-33-3333	Patient, Sally	535.00	435.00	100.00				
Totals		714.50	535.00	179.50		.00		

The Fee Slip Item Adjustment window opens.

12. Select **Insurance Denial** from the **Adj. Type** drop-down menu.
13. Type an amount in the **Amount** text box, or leave the text box blank.
14. Type a reason for the denial in the **Reason** text box, if necessary.

NOTE

If the Print reason for Ins denial statements selection criteria check box is selected, the reason will print on the patient's statement. For more information on printing statements, go to [Statements on page 711](#).

15. Select the person recording the transaction from the **Recorded By** drop-down menu, if this field is not locked.
16. If applicable, select the **Do not print on patient statement** check box if you do not want the adjustment to print on the Statements report and then select a line item already on the Patient Ledger to exactly offset the amount of the

adjustment that you do not want to print on the Statements report. The offset Patient Ledger line item will not print on the Statements report either.

NOTES

- If you select the **Do not print on patient statement** check box without also selecting items that exactly offset the original adjustment, then the balance on the Statements report will not be correct.
- You must select the **Yes** radio button in the System Preferences window's Statements tab to select the Do not print on patient statement check box in the Fee Slip Item Adjustment window. For more information on selecting Statements system preferences, go to [To set up statement preferences on page 72](#).

17. Click **Record**.

18. Click **Record** on the Receipts & Adjustments window.

NOTE

After you record an insurance denial, a line item note is displayed on the Patient/Insurance tab in the Patient Ledger window. This note states why the claim was rejected by the insurance carrier.

Transferring Charges

This section tells you how to transfer unpaid balances between insurance companies and patients, including how

- [To transfer insurance charges, 397](#)
- [To transfer insurance charges to patients, 399](#)
- [To transfer unapplied insurance credits to patients, 401](#)

NOTE You cannot transfer patient balances to other patients.

► To transfer insurance charges

You can transfer all or part of any unpaid insurance charges to another insurance company or to a patient.

1. Open the Receipts & Adjustments window. For more information on opening the Receipts & Adjustments window, go to [Opening a Patient's Receipts & Adjustments on page 353](#).
2. Click the **Apply to Insurance** tab.
3. Select an insurance company from the **Insurance** drop-down menu.
4. Type or select dates in the **Date Range** boxes if you want to view patients that are reflected on date-specific EOBs.
5. Click **Display Charges** and select **Display Detail View**.
If a payment applied to an item creates an open balance and you want to transfer the open balance, complete steps 7–9; otherwise, go to step 10.
6. Select one of the following payment Method radio buttons:
 - **Check**
 - **Credit Card**
7. Type the payment amount in the **Amount Paid** text box.
8. Apply the payment amount using one of the following methods:
 - If you are applying a check payment, type the check number for your deposit ticket in the **Check #** text box.
 - If you are applying credit card payment, select the card type from the **Type** drop-down menu.
9. Select the person recording the transaction from the **Recorded By** drop-down menu, if this field is not locked.
10. Click in the **Payment** text box for the item you want to transfer.
11. Click **Adj**.
The Fee Slip Item Adjustment window opens.

12. Select one of the following adjustment types from the **Adj. Type** drop-down menu:
 - **Transfer from Insurance to Patient** if you are transferring the charge to the patient.
 - **Transfer to Another Insurance** if you are transferring the charge to another insurance company and select an insurance company from the **Insurance** drop-down menu.
13. If you want to transfer part of the open balance, type the amount that you want to transfer in the **Amount** text box.
14. Type a reason for the transfer in the **Reason** text box, if necessary.
15. Select the person recording the transaction from the **Recorded By** drop-down menu, if this field is not locked.

If applicable, select the **Do not print on patient statement** check box if you do not want the adjustment to print on the Statements report and then select a line item already on the Patient Ledger to exactly offset the amount of the adjustment that you do not want to print on the Statements report. The offset Patient Ledger line item will not print on the Statements report either.

NOTES

- If you select the **Do not print on patient statement** check box without also selecting items that exactly offset the original adjustment, then the balance on the Statements report will not be correct.
- You must select the **Yes** radio button in the System Preferences window's Statements tab to select the Do not print on patient statement check box in the Fee Slip Item Adjustment window. For more information on selecting Statements system preferences, go to [To set up statement preferences on page 72](#).

16. If you are transferring a payment to another insurance and you do not want to create a CMS 1500 form in the Third Party Processing window, select the **Do not show on 3rd party** check box.

NOTE

To view and print the CMS 1500 insurance claim, open the patient's Demographic window, click the **Insurance** tab, and then click the **CMS Form** button.

17. If you are transferring the charge to another insurance company, select the name of the insurance company to which you are transferring the charge from the **Insurance** drop-down menu.

NOTE The patient must have an additional insurance company recorded in order for the insurance company to appear in the drop-down menu. For more information on recording additional insurance companies, go to [To record insurance information on page 215](#).

18. Click **Record**.
19. Click **Record** on the Receipts & Adjustments window.

► To transfer insurance charges to patients

You can transfer all insurance charges to a patient. If an insurance company does not pay the full amount of one or more open items, you can transfer the unpaid open items to which you applied payments. If you are transferring insurance charges to patients, the difference between the amount owed and the amount paid is recorded as a general Global Transfer to Patient adjustment. If you want to

track what you are transferring by each insurance company, set up an adjustment type for each company instead of using the Transfer to Patient feature.

NOTE

Consult with your insurance billing accountant to determine if transferring insurance charges to patients is appropriate for your office.

1. Open the Receipts & Adjustments window. For more information on opening the Receipts & Adjustments window, go to [Opening a Patient's Receipts & Adjustments on page 353](#).
2. Click the **Apply to Insurance** tab.
3. Select an insurance company from the **Insurance** drop-down menu.
4. Type or select dates in the **Date Range** boxes if you want to view patients that are reflected on date-specific EOBs.
5. Click **Display Charges** and select **Display Summary View** or **Display Detail View**.
6. Select one of the following payment Method radio buttons:
 - **Check**
 - **Credit Card**
7. Type the payment amount in the **Amount Paid** text box.
8. Apply the payment amount using one of the following methods:
 - If you are applying a check payment, type the check number for your deposit ticket in the **Check #** text box.
 - If you are applying a credit card payment, select the card type from the **Type** drop-down menu.
9. Select the person recording the transaction from the **Recorded By** drop-down menu, if this field is not locked.

- Click in an item's **Payment** text box and type the payment amount to apply the amount to a specific item.

The screenshot shows the 'Receipts & Adjustments' window with the 'Apply to Insurance' tab selected. The 'Unapplied' amount is \$60.40. The summary table below shows the following data:

Ref #	Patient Name	Open Charges	Payments	Balance	Transf'd
+ 0031	Adkins, Byron	9.25	0.00	9.25	
+ 203-45-6712	Ant, Adam	43.50	0.00	43.50	
+ 0411	Azhdari, Ebrahim	43.50	0.00	43.50	
- 222-11-3333	Bloom, Leopold	16.25	0.00	16.25	
Totals		602.30	.00	602.30	.00

- Click **Global Adjustment** and select **Transfer to Patient** to transfer the balance of the items to which you applied payments.

NOTE

- If you are transferring charges in the summary view, clicking **Transfer to Patient** will transfer insurance balances for *all* of the patients displayed.
- If you are transferring charges in the detail view, clicking **Transfer to Patient** will transfer insurance balances *with partially applied payments* for *all* of the patients displayed.

The Transfer to patient confirmation window opens.

- Click **Yes** to continue transferring the balances.
Balances that remained after you posted payments to them are transferred.
Balances with no applied payments are not transferred.

► **To transfer unapplied insurance credits to patients**

NOTE

You cannot delete an insurance credit after it has been transferred.

- Open the Receipts & Adjustments window. For more information on opening the Receipts & Adjustments window, go to [Opening a Patient's Receipts & Adjustments on page 353](#).
- Click the **Apply to Insurance** tab.
- Select an insurance company from the **Insurance** drop-down menu.

4. Type or select dates in the **Date Range** boxes if you want to view patients that are reflected on date-specific EOBs.
5. Click **Display Charges** and select **Display Summary View** or **Display Detail View**.
6. Click **History**.
The Receipt History window opens.
7. Select an item to transfer and click **Transfer**.

Rec. No	Date	Amount	Check #	Type	Unapplied	Transferred	Location
9	5/16/2007	700.00	1234	Check	123.83	.00	Foothill Ranch Store
7	5/16/2007	33.33	33333	Check	.00	.00	Foothill Ranch Store
5	5/16/2007	435.00	5555	Check	-100.00	.00	Foothill Ranch Store
Totals		1168.33			23.83	.00	

The Find Patient window opens.

8. Find and select a patient who has the same insurance carrier that overpaid and to whom you want to transfer the amount.
The Insurance Transfer window opens.
9. Type the transfer amount in the **Amount** text box.
10. Select the person recording the transaction from the **Recorded By** drop-down menu, if this field is not locked.
11. Click **Record**.

Transferring an Insurance Unapplied Amount to
Patient: Mr. Henry A Mitchell
DOB: 04/18/1935 SSN: 222-22-2222

Amount: \$100.00 Recorded By: Franklin, Helen

Record Cancel

NOTE

You can view unapplied insurance credits that were transferred to patients in the patient Receipt History tab on the Patient Ledger window, the Receipts History window, and in the Transferred Unapplied Ins. Amount report.

Writing Off Charges

If an insurance company does not pay the full amount of one or more open items, you can write off the unpaid open balances to which you applied payments. If you are writing off charges, the difference between the amount owed and the amount paid is recorded as a general Global Write-off adjustment. If you want to track

what you are writing off by each insurance company, set up an adjustment type for each company instead of using the Global Write-off.

NOTE Consult with your insurance billing accountant to determine if writing off charges is appropriate for your office.

1. Open the Receipts & Adjustments window. For more information on opening the Receipts & Adjustments window, go to [Opening a Patient's Receipts & Adjustments on page 353](#).
2. Click the **Apply to Insurance** tab.
3. Select an insurance company from the **Insurance** drop-down menu.
4. Type or select dates in the **Date Range** boxes if you want to view patients that are reflected on date-specific EOBs.
5. Click **Display Charges** and select **Display Summary View** or **Display Detail View**.
6. Select one of the following payment Method radio buttons:
 - **Check**
 - **Credit Card**
7. Type the payment amount in the **Amount Paid** text box.
8. Apply the payment amount using one of the following methods:
 - If you are applying a check payment, type the check number for your deposit ticket in the **Check #** text box.
 - If you are applying a credit card payment, select the card type from the **Type** drop-down menu.
9. Select the person recording the transaction from the **Recorded By** drop-down menu, if this field is not locked.

10. Click in an item's **Payment** text box and type the payment amount to apply the amount to a specific item.

Ref #	Patient Name	Open Charges	Payments	Balance	Transf'd
+ 0031	Adkins, Byron	9.25	0.00	9.25	
+ 203-45-6712	Ant, Adam	43.50	0.00	43.50	
+ 0411	Azhdari, Ebrahim	43.50	0.00	43.50	
- 222-11-3333	Bloom, Leopold	16.25	0.00	16.25	

Feeslip No	Service Date	Patient Name	CPT	Units	Service Description	Open	Payments	Item Bal.	Location
83	4/21/2009	Bloom, Leopold	92004	1	92004 (Medical)	16.25	0.00	16.25	Newport Beach Store

Ref #	Patient Name	Open Charges	Payments	Balance	Transf'd
+ 250-60-1515	Buster, Colin	275.82	0.00	275.82	
+ 520-32-0000	Hunt, Amanda	20.00	0.00	20.00	
+ 456-45-6546	Mark, Burns	22.50	0.00	22.50	
+ 200-25-2100	Mayo, Debra	77.23	0.00	77.23	
+	Test, Five	94.25	0.00	94.25	

Totals: 602.30 | .00 | 602.30 | .00

11. Click **Global Adjustment** and select **Write Off** to write off the balance of the items to which you applied payments.

NOTES

- If you are writing off or transferring charges in the summary view, clicking **Write Off** or **Transfer to Patient** will write off or transfer insurance balances for all of the patients displayed to whom insurance payments were applied.
- If you are writing off or transferring charges in the detail view, clicking **Write Off** or **Transfer to Patient** will write off or transfer insurance balances on all of the line items displayed to which *partial insurance payments* were applied.

The Write-Off Confirmation window opens.

12. Click **Yes** to continue writing off the balances.

Balances that remained after you posted payments to them are written off. Balances with no applied payments are not written off.

Modifying Payments Using the Receipt History

OfficeMate assigns each payment a receipt number. The payments from a patient or insurance company can be viewed in the Receipt History window.

This section tells you how to modify payments using the Receipt History window, including how

- [To refund unapplied patient credits, 405](#)
- [To modify recorded payments, 407](#)
- [To pay open items with credit amounts, 407](#)

► To refund unapplied patient credits

1. Open a patient's receipts and adjustments. For more information on opening a patient's receipts and adjustments, go to [Opening a Patient's Receipts & Adjustments on page 353](#).
2. Click **History**.
The Receipt History window opens.
3. Right-click on an item for which you want to refund an unapplied patient credit and select **Refund Patient Credit**.

Rec. No	Date	Amount	Check #	Type	Unapplied	Refunded	Location
332	5/10/2007	35.00		Cash			Viejo - South Sto
243	5/2/2007	18.00		Cash			Viejo - South Sto
219	5/2/2007	225.00		Cash	.00	.00	Mission Viejo - South Sto
Totals		278.00			35.00	.00	

The Refund Patient Credit window opens.

4. Complete the fields in the **Patient Refund** section.

Refund Patient Credit

Receipt No: 10150

Receipt Details

Dep. Date: 1/20/2011

Patient last/First: Patient Sally

Amount Paid: \$110.00 Check #: Bank #

Adjustments: \$0.00 Method: Check Cash Debit Card Credit Card Other

Adjusted Amt: \$110.00 Type: Patient Return

Applied Amount: \$0.00

Refunded Amount: \$0.00 Unapplied Amount: \$110.00

Previous Refund Details

Date	Refund Method	Check# / Type	Refund Amount	Reason	Recorded By

Patient Refund

Patient Balance: \$0.00 Date: 1/25/2011

Check Cash Debit Card Credit Card Other

Type:

Check #: 55589

Refund Amount: \$110.00

Reason: Patient changed mind.

Recorded By: Doctor, Johnny

Refund Cancel

5. Click **Refund** and follow the instructions below to record the refund and print a receipt.
- Click **Print** to print a receipt.
 - Click **Printer Setup** to set up the printer or select a printer other than the default printer. For more information on setting up the printer, go to [Setting Up the Printer on page 21](#).
 - Click **Close** to close the Patient Refund Credit Receipt window.

Patient Refund Credit Receipt

East Coast Optical
 1234 Vantage Park Lane 100
 Westfield, MA 01095

For City #: 123
 Date: 01/25/2011
 Patient: John Smith

Print

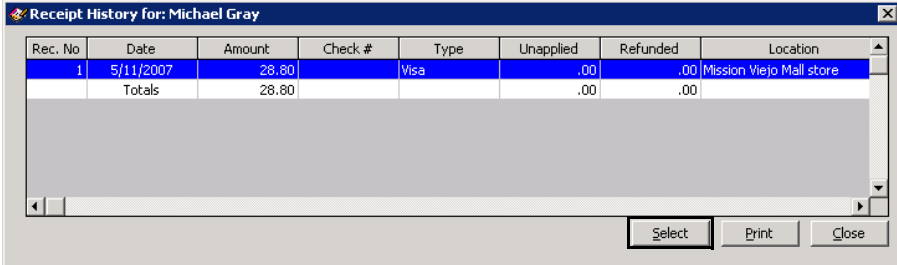
Click Printer Setup to change the printer

Close
 Printer Setup
 Options...

NOTE To view a list of patient credit refunds, print the Patient Refund of Unapplied Amounts report. For more information on the Patient Refund of Unapplied Amounts report, go to [Patient Refund of Unapplied Payments on page 682](#).

► **To modify recorded payments**

1. Open a patient's receipts and adjustments. For more information on opening a patient's receipts and adjustments, go to [Opening a Patient's Receipts & Adjustments on page 353](#).
2. Click **History**.
The Receipt History window opens.
3. Select the payment receipt you want to modify, click **Select**, and select **Load Summary View** or **Load Detail View**.



Rec. No	Date	Amount	Check #	Type	Unapplied	Refunded	Location
1	5/11/2007	28.80		Visa	.00	.00	Mission Viejo Mall store
Totals		28.80			.00	.00	

The receipt information and fee slip charges paid by the receipt appear in the Receipts & Adjustments window.

4. Modify the amount paid, method of payment, the way the payment was applied; or, adjust the charges on the receipt. For more information, go to [To apply payments to patient receivables on page 354](#) and [Adjusting Charges on page 387](#).
- **To pay open items with credit amounts**
- ❖ Go to [To pay open items with credit amounts on page 359](#).

Using the Patient Ledger

8

In this chapter:

- [Opening a Patient's Ledger, 409](#)
- [Viewing Fee Slips, 410](#)
- [Viewing & Modifying Receipts, 411](#)
- [Returning Products, 413](#)
- [Adjusting Charges, 416](#)
- [Adjusting Deposits, 417](#)
- [Adding Additional Data to Fee Slip Line Items, 418](#)
- [Printing the Patient Ledger, 419](#)
- [Viewing & Printing Statements, 420](#)

For information on using the Patient Ledger, watch the "Ledger" video.

After you create and record fee slips and apply payments from patients and insurance companies, you can use the Patient Ledger to view all of a patient's fee slips in summary or detail. You can also edit fee slips, return products, and make adjustments to fee slip charges.

Opening a Patient's Ledger

1. Open the Patient Ledger window using one of the following methods:
 - Click the **Ledger** icon.
 - Click **Tasks** on the main window toolbar and select **Patient Ledger**.
 - Click Ledger on the Patient Center window.
 - Right-click the Patient Demographic, Hard Lens Order, Soft Lens Order, Eyewear Order, Fee Slip, or Receipts & Adjustments window title bar and select **Ledger**.
 - Right-click a patient in the Quick List window and select **Ledger**.
 - Click a patient's name in the Quick List window and drag and drop the patient on the **Ledger** icon.
2. Select the **Open Only** check box if you only want to view charges that are unpaid.
3. Select the **All same guarantor** check box to view information on all of the guarantor's linked family members.
4. Select the **Include archived** check box to view fee slips that you archived using the Fee Slip Archive Utility in order to speed up processing time in the Patient Ledger.
5. Enter search information in the **Last Name** and **First** text boxes and click **F2 Find** to find and select a patient.

- Click the **Patient**, **Insurance**, **Patient/Insurance**, or **Patient Receipt History** tab.
- Click **Details** to view the patient's fee slip item details or click **Summary** to view a summary of the patient's fee slips.

Patient Ledger - Patient Name: Thomas Edison [ALERT] DOB:4/24/1962

Last Name: Edison First: Thomas F2 End Open Only All same guarantor Pat # 21096 Summary Details Chart #

Patient		Insurance			Patient/Insurance		Patient Receipt History	
Fee Slip #	Posting Date	Charges	Payments	Adjustments	Balance	Patient Name	Provider Name	Location
12481	5/18/2010	-10.00	0.00	0.00	-10.00	Thomas Edison	Mouse, Minnie	Barranca Store
DNP		Posting Date	Description	Reference	Amount	Item Balance	Location	
<input type="checkbox"/>	5/18/2010	CREDIT MEMO - 92014		Fee Slip# 12478	0.00	-10.00		
<input type="checkbox"/>	5/18/2010	Co-Pay						
12478	4/28/2010	10.00	0.00	0.00	10.00	Thomas Edison	Mouse, Minnie	Barranca Store
DNP		Posting Date	Description	Reference	Amount	Item Balance	Location	
<input type="checkbox"/>	4/28/2010	92014		Credit memo# 12481	0.00	10.00		
<input type="checkbox"/>	4/28/2010	Co-Pay				10.00		
12459	4/27/2010	295.00	0.00	0.00	295.00	Thomas Edison	Mouse, Minnie	Robins Eye Care, LLC
DNP		Posting Date	Description	Reference	Amount	Item Balance	Location	
<input type="checkbox"/>	4/27/2010	92004			120.00	120.00		
<input type="checkbox"/>	4/27/2010	92250			140.00	140.00		
<input type="checkbox"/>	4/27/2010	2024F			0.00	0.00		
<input type="checkbox"/>	4/27/2010	G8448			0.00	0.00		
<input type="checkbox"/>	4/27/2010	92015			35.00	35.00		

Credit: .00 Balance: 295.00

View Slip Rpt New Slip Receipts Adjustment Returns View Slip Print Statement

NOTES

- The color-coded hierarchal grids in the Patient Ledger window displays red text for open items, blue text for fee slip line items, and green backgrounds for payments.
- Click the + (plus) or - (minus) sign next to a fee slip to view or hide the fee slip's line items.
- Click on column headings to sort the summary and detail grids.
- A [P] in the Reference column in the Patient/Insurance tab denotes a patient adjustment or return.
- An [I] in the Reference column in the Patient/Insurance tab denotes an insurance adjustment or return.
- DNP (Do Not Print) check boxes display items that will not be printed on the Statements report.

Viewing Fee Slips

For more information on fee slips, watch the "Fee Slips" video.

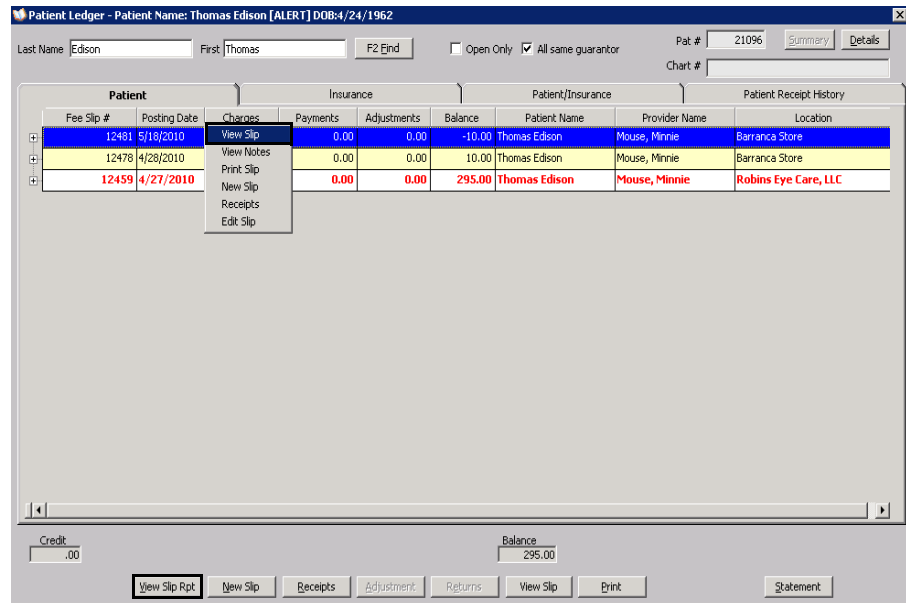
This section tells you how to view fee slips from the Patient Ledger window, including how

- [To view fee slips, 410](#)

▶ To view fee slips

- Open a patient's ledger. For more information on opening a patient's ledger, go to [Opening a Patient's Ledger on page 409](#).

- Select a fee slip and click **View Slip Rpt** or right-click the fee slip in the Patient, Insurance, or Patient/Insurance tab and select **View Slip**.



The Statement of Charges and Payments opens.

NOTE

Click the **Print** icon to print the fee slip or click the **Export** icon to export the fee slip to another destination.

Viewing & Modifying Receipts

For more information on receipts, watch the "Receipts" video.

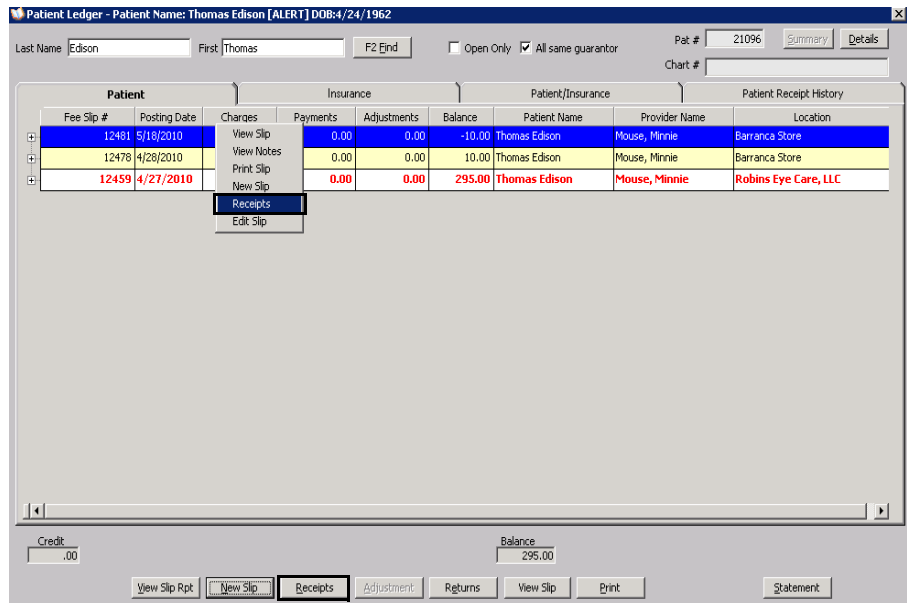
This section tells you how to view and modify receipts in the Patient Ledger window, including how

- To view receipts, 411
- To modify payments on receipts, 412
- To pay open items with credit amounts, 413

► To view receipts

- Open a patient's ledger. For more information on opening a patient's ledger, go to [Opening a Patient's Ledger on page 409](#).

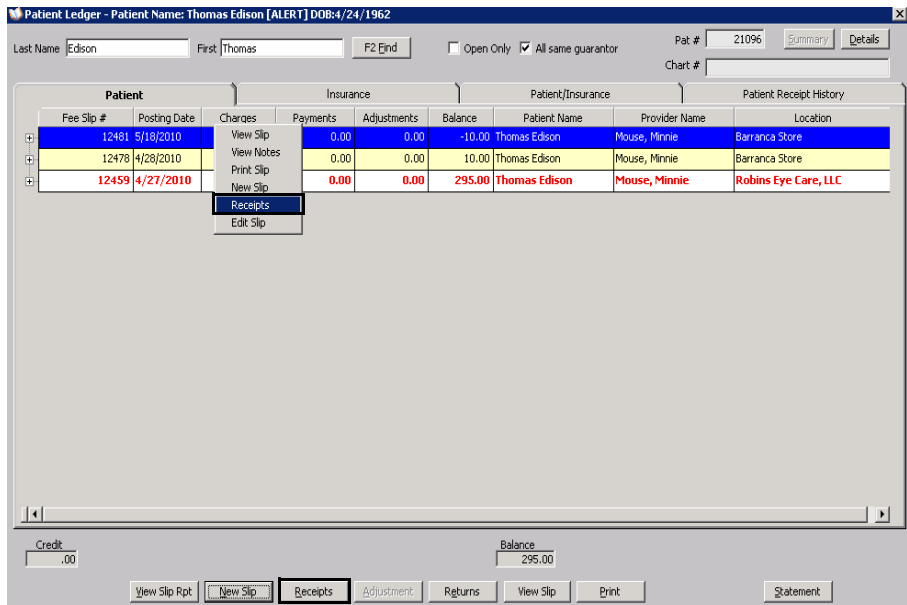
- Select a fee slip and click **Receipts** or right-click the fee slip in the Patient, Insurance, or Patient/Insurance tab and select **Receipts**.



The Receipts & Adjustments window opens.

► To modify payments on receipts

- Open a patient's ledger. For more information on opening a patient's ledger, go to [Opening a Patient's Ledger on page 409](#).
- Select a fee slip and click **Receipts** or right-click the fee slip in the Patient, Insurance, or Patient/Insurance tab and select **Receipts**.



The Receipts & Adjustments window opens.

- Modify payments using the instructions in [Applying Payments to Patient Receivables on page 354](#), [Applying Insurance Payments to Any Open Balances on page 363](#), or [Modifying Payments Using the Receipt History on page 405](#).

► **To pay open items with credit amounts**

NOTE To automatically apply unapplied patient amounts from fee slips to new fee slip charges in the Fee Slip window, select the **Yes** radio button next to the Apply patient unapplied amount from fee slip other system preference. For more information on modifying other system preferences, go to [To set up financial preferences on page 62](#).

- Open a patient's ledger. For more information on opening a patient's ledger, go to [Opening a Patient's Ledger on page 409](#).
- Select a fee slip and click **Receipts** or right-click the fee slip in the Patient, Insurance, or Patient/Insurance tab and select **Receipts**.

Fee Slip #	Posting Date	Charges	Payments	Adjustments	Balance	Patient Name	Provider Name	Location
12481	5/18/2010	View Slip	0.00	0.00	-10.00	Thomas Edison	Mouse, Minnie	Barranca Store
12478	4/28/2010	View Notes	0.00	0.00	10.00	Thomas Edison	Mouse, Minnie	Barranca Store
12459	4/27/2010	Print Slip	0.00	0.00	295.00	Thomas Edison	Mouse, Minnie	Robins Eye Care, LLC

The Receipts & Adjustments window opens.

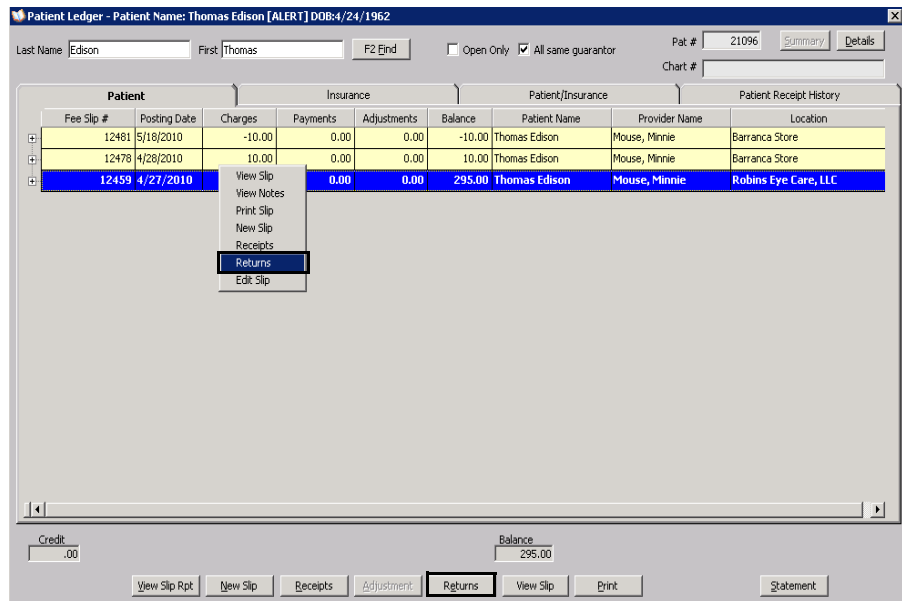
- Pay the open item with a credit amount using the instructions in [To pay open items with credit amounts on page 407](#).

Returning Products

- Open the Fee Slip Item Return window using one of the following methods:
 - Open a patient's ledger. For more information on opening a patient's ledger, go to [Opening a Patient's Ledger on page 409](#). Select a fee slip, fee slip line item, or product refund line and click **Returns** or right-click

on a fee slip or product refund line in the Patient or Patient/Insurance tab and select **Returns** or **Return Item**.

- Click **Tasks** on the main window toolbar and select **Return Product**. Type a fee slip number in the **Fee Slip #** text box and click **Get Slip**.



NOTE

Type a fee slip number in the **Fee Slip #** text box and click **Get Slip** to view other fee slips for the patient, if available.

2. Select the person recording the transaction from the **Recorded By** drop-down menu, if this field is not locked.
3. Select the product(s) to be returned:
 - Click **Select All** to select all products listed on the fee slip.
 - Click **Unselect All** to deselect all products listed on the fee slip.
 - Select the check boxes of the individual product(s) to be returned.

4. For each item selected, perform the following steps as needed:
 - a. Change the number in the **Qty Ret** column if the patient is not returning all of the units originally purchased.
 - b. If there is a nonrefundable amount for this product, type the amount in the **Non-Refundable Amt** column and select a reason for not refunding the entire amount from the **Reason** column drop-down menu.

NOTE	You can record a nonrefundable amount even if the patient has not made a payment. This record creates a patient balance for a nonrefundable amount and displays an amount in the Adjustment column in the Patient Ledger window.
-------------	--

- c. Select the **Do NOT update Inventory** check box to return a product without adding it back into an inventory list.

NOTE	Only products recorded on fee slips can be added back into inventory.
-------------	---

- d. If the patient is eligible to receive a refund on the copayment, select the **Refund Co-Pay** check box.
5. Select a reason for the return from the **Reason for Return** drop-down menu.
6. Select the patient refund method. Select the **On Account** check box to add the returned amount to the patient's credit balance;

OR

Click the **Check, Cash, Debit, Credit,** or **Other** tab and follow the instructions below for the refund method that you selected.

- If you are issuing the refund in the form of a check, type the refund amount and check number in the **Amount** and **Check #** text boxes. Type the bank routing number in the **Bank #** text box as needed.
 - If you are recording a cash refund, type the refund amount, the amount of cash given to the patient, and any change that the patient returned to you in the **Amount, Tendered,** and **Change** text boxes.
 - If you are recording a refund to the patient's debit card, type the refund amount in the **Amount** text box and select the card type from the **Type** drop-down menu.
 - If you are recording a refund to a patient's credit card, type the refund amount in the **Amount** text box and select the credit card type from the **Type** drop-down menu.
 - If you are recording another refund type, type the refund amount in the **Amount** text box and select the refund type from the **Type** drop-down menu.
7. If you are applying a refunded insurance amount to a patient credit, select the **Apply Refund to Patient (On Account)** check box.
 8. Type comments in the **Comments** box, if necessary.

- If the lab order must be canceled, click the **Rx Order Status Mark as 'CANCELLED'** check box and call the lab to cancel the order.

- Click **Record**.

Adjusting Charges

All adjustments are displayed in the Patient Ledger window and provide a complete transaction history of the changes made to fee slips.

- Open a patient's ledger. For more information on opening a patient's ledger, go to [Opening a Patient's Ledger on page 409](#).
- Click **Details**.
- Select a blue fee slip line item or nonproduct line and click **Adjustment** or right-click a fee slip line item or nonproduct line in the Patient, Patient/Insurance, or Insurance tab and select **Adjustments**.

The Fee Slip Item Adjustment window opens.

Adjusting
Deposits

- Adjust the charges using the instructions in [Adjusting Charges on page 387](#).

NOTE You can only adjust deposits at the same location where the payments were originally recorded.

- Open a patient's ledger. For more information on opening a patient's ledger, go to [Opening a Patient's Ledger on page 409](#).
- Click the **Patient Receipt History** tab.
- Select a deposit and click **Reverse/Correct**.

Rec. No.	Posting Date	Check #	CheckOrEFTDate	Batch #	Type	Deposit Amt.	Dep. Corrections	Corrected Amt.	Unapplied	Refund	Location
44459	12/16/2010				Check	236.00	1.00	236.00	1.00	0.00	Irvine Store
44458	12/16/2010			N/A	Cash	240.00	0.00	240.00	0.00	0.00	Irvine Store
44457	12/16/2010			N/A	Check	180.00	0.00	180.00	0.00	0.00	Irvine Store

The Deposit Reversal/Correction window opens.

- Select an adjustment type (**Correct Payment Amount** or **Payment Reversal**) from the **Adjustment Type** drop-down menu.
- Select a recorded by user from the **Recorded By** drop-down menu.
- Click **Record**.

Date	Adjustment Type	Corrected Amount	Reason	Location	Recorded By
12/16/2010	Correct Payment +236.00			Irvine Store	Admin Admin
12/16/2010	Payment Reversal -236.00			Irvine Store	Admin Admin

Adding Additional Data to Fee Slip Line Items

If a product does not have a CPT code or if you want to add item modifiers, remove the sales tax, keep the item from printing on the fee slip receipt, or record additional information for an item on the fee slip, follow the instructions in this section.

1. Open a patient's ledger. For more information on opening a patient's ledger, go to [Opening a Patient's Ledger on page 409](#).
2. Click **Details**.
3. Select and right-click a fee slip line item in the Patient, Patient/Insurance, or Insurance tab and select **Line Additional Data**.

Patient Ledger - Patient Name: Thomas Edison [ALERT] DOB:4/24/1962

Last Name: Edison First: Thomas F2 End Open Only All same guarantor Pat. # 21096 Summary Details

Chart #

Patient			Insurance			Patient/Insurance			Patient Receipt History		
Fee Slip #	Posting Date	Charges	Payments	Adjustments	Balance	Patient Name	Provider Name	Location			
12481	5/18/2010	-10.00	0.00	0.00	-10.00	Thomas Edison	Mouse, Minnie	Barranca Store			
12478	4/28/2010	10.00	0.00	0.00	10.00	Thomas Edison	Mouse, Minnie	Barranca Store			
12459	4/27/2010	295.00	0.00	0.00	295.00	Thomas Edison	Mouse, Minnie	Robins Eye Care, LLC			

DNP	Posting Date	Description	Reference	Amount	Item Balance	Location
<input checked="" type="checkbox"/>	4/27/2010	92004	Return Item	120.00	120.00	
<input type="checkbox"/>	4/27/2010	92250	Line Additional Data	140.00	140.00	
<input type="checkbox"/>	4/27/2010	2024F	Adjustments	0.00	0.00	
<input type="checkbox"/>	4/27/2010	G8448		0.00	0.00	
<input type="checkbox"/>	4/27/2010	92015		35.00	35.00	

Credit: .00 Balance: 295.00

View Slip Rpt New Slip Receipts Adjustment Returns View Slip Print Statement

The Fee Slip Item Additional Data window opens.

4. Add additional data using the instructions in [To add data to fee slip items on page 157](#).

Printing the
Patient
Ledger

1. Open a patient's ledger. For more information on opening a patient's ledger, go to [Opening a Patient's Ledger on page 409](#).
2. Click **Print**.

Patient Ledger - Patient Name: Thomas Edison [ALERT] DOB: 4/24/1962

Last Name: Edison First: Thomas F2 End Open Only All same guarantor Pat # 21096 Summary Details

Chart #

Patient		Insurance			Patient/Insurance		Patient Receipt History	
Fee Slip #	Posting Date	Charges	Payments	Adjustments	Balance	Patient Name	Provider Name	Location
12481	5/18/2010	-10.00	0.00	0.00	-10.00	Thomas Edison	Mouse, Minnie	Barranca Store
DNP		Description			Reference	Amount	Item Balance	Location
<input type="checkbox"/>	5/18/2010	CREDIT MEMO - 92014			Fee Slip # 12478	0.00	-10.00	
<input type="checkbox"/>	5/18/2010	Co-Pay				-10.00		
Fee Slip #	Posting Date	Charges	Payments	Adjustments	Balance	Patient Name	Provider Name	Location
12478	4/28/2010	10.00	0.00	0.00	10.00	Thomas Edison	Mouse, Minnie	Barranca Store
DNP		Description			Reference	Amount	Item Balance	Location
<input type="checkbox"/>	4/28/2010	92014			Credit memo # 12481	0.00	10.00	
<input type="checkbox"/>	4/28/2010	Co-Pay				10.00		
Fee Slip #	Posting Date	Charges	Payments	Adjustments	Balance	Patient Name	Provider Name	Location
12459	4/27/2010	295.00	0.00	0.00	295.00	Thomas Edison	Mouse, Minnie	Robins Eye Care, LLC
DNP		Description			Reference	Amount	Item Balance	Location
<input type="checkbox"/>	4/27/2010	92004				120.00	120.00	
<input type="checkbox"/>	4/27/2010	92250				140.00	140.00	
<input type="checkbox"/>	4/27/2010	2024F				0.00	0.00	
<input type="checkbox"/>	4/27/2010	G8448				0.00	0.00	
<input type="checkbox"/>	4/27/2010	92015				35.00	35.00	

Credit: .00 Balance: 295.00

View Slip Rpt New Slip Receipts Adjustment Returns View Slip **Print** Statement

Viewing &
Printing State-
ments

NOTES

- You cannot print a statement for a patient if the patient does not have an open balance or if the patient has a bad address, the Send Statement check box selected, or the Sent to Collection check box selected. For more information on selecting and de-selecting the Bad Addr, Send Statement, and Sent to Collection check boxes, go to [To record demographic information on page 208](#) and [To record financial information on page 225](#).
- Statements viewed and printed from the Patient Ledger window display 30 days of details. To display more details, view and print statements from the Reports & Statements window. For more information on viewing and printing Statements reports, go to [Creating & Printing Statements on page 563](#).

- Open a patient's ledger. For more information on opening a patient's ledger, go to [Opening a Patient's Ledger on page 409](#).
- Click **Statement**.

Patient Ledger - Patient Name: Thomas Edison [ALERT] DOB:4/24/1962

Last Name: Edison First: Thomas F2 Find Open Only All same guarantor Pat # 21096 Summary Details

Chart #

Patient		Insurance			Patient/Insurance		Patient Receipt History	
Fee Slip #	Posting Date	Charges	Payments	Adjustments	Balance	Patient Name	Provider Name	Location
12481	5/18/2010	-10.00	0.00	0.00	-10.00	Thomas Edison	Mouse, Minnie	Barranca Store
DNP		Description		Reference	Amount	Item Balance	Location	
<input type="checkbox"/>	5/18/2010	CREDIT MEMO - 92014		feeslip# 12478	0.00	-10.00		
<input type="checkbox"/>	5/18/2010	Co-Pay				-10.00		
12478	4/28/2010	10.00	0.00	0.00	10.00	Thomas Edison	Mouse, Minnie	Barranca Store
DNP		Description		Reference	Amount	Item Balance	Location	
<input type="checkbox"/>	4/28/2010	92014		Credit memo# 12481	0.00	10.00		
<input type="checkbox"/>	4/28/2010	Co-Pay				10.00		
12459	4/27/2010	295.00	0.00	0.00	295.00	Thomas Edison	Mouse, Minnie	Robins Eye Care, LLC
DNP		Description		Reference	Amount	Item Balance	Location	
<input type="checkbox"/>	4/27/2010	92004			120.00	120.00		
<input type="checkbox"/>	4/27/2010	92250			140.00	140.00		
<input type="checkbox"/>	4/27/2010	2024F			0.00	0.00		
<input type="checkbox"/>	4/27/2010	G8448			0.00	0.00		
<input type="checkbox"/>	4/27/2010	92015			35.00	35.00		

Credit .00 Balance 295.00

View Slip Rpt New Slip Receipts Adjustment Returns View Slip Print **Statement**

The Statement of Account opens.

NOTE

Click the **Print** icon to print the statement or click the **Export** icon to export the statement to another destination.

In this chapter:

- [Opening FrameMate, 421](#)
- [Using the FRAMES SPEX UPC CD-ROM & On Demand Electronic Download, 421](#)
- [Using the FRAMES Quarterly CD-ROM, 424](#)
- [Using the Marchon Diskette, CD-ROM, & Electronic Download, 425](#)
- [Transferring & Loading Frames into the OfficeMate Products Database, 427](#)
- [Viewing Frame Information, 431](#)
- [Deleting Manufacturers, 432](#)

Loading frames from a subscription service is the fastest and most efficient way to set up frame products in OfficeMate. FrameMate allows you to download frames from the electronic catalogs available from the FRAMES Data SPEX UPC CD-ROM or On Demand electronic download; FRAMES Data Quarterly CD-ROM; and Marchon Frames Diskette, CD-ROM, or electronic download. Use FrameMate to view information about a product and transfer the information into OfficeMate.

NOTE Before you transfer frames into OfficeMate, set up your procedure codes. For more information on setting up procedure codes, go to [To add & modify procedure codes on page 137](#).

Opening FrameMate

Open FrameMate using one of the following methods:

- Click the **Products** icon and select **FrameMate**.
- Click **Tasks** on the main window toolbar and select **FrameMate**

Using the FRAMES SPEX UPC CD-ROM & On Demand Electronic Download

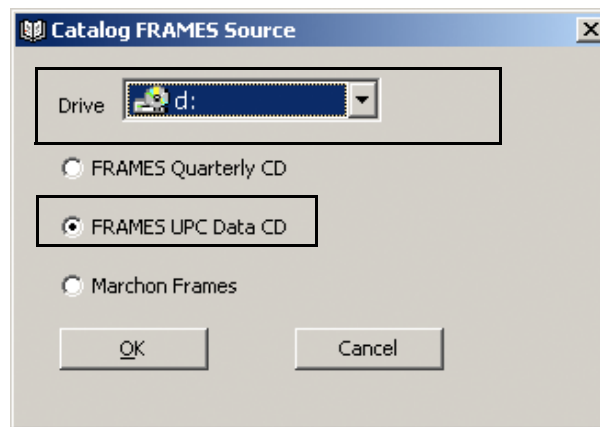
This section tells you how to use the monthly FRAMES SPEX UPC CD-ROM and On Demand monthly electronic download with FrameMate and OfficeMate, including how

- [To open the FRAMES SPEX UPC CD-ROM & On Demand electronic download files in FrameMate, 422](#)
- [To import manufacturers into FrameMate, 422](#)

NOTE If you are looking for information on using the FRAMES Quarterly CD-ROM, go to [Using the FRAMES Quarterly CD-ROM on page 424](#).

► **To open the FRAMES SPEX UPC CD-ROM & On Demand electronic download files in FrameMate**

1. Open FrameMate. For more information on opening FrameMate, go to [Opening FrameMate on page 421](#).
2. Click **Tasks** and select **Select FRAMES Source**.
The Catalog FRAMES Source window opens.
3. If you are using a CD-ROM, insert the FRAMES SPEX UPC CD-ROM into your CD-ROM drive.
4. Select your CD-ROM drive or the drive where your On Demand electronic download files are located from the **Drive** drop-down menu.
5. Click the **FRAMES UPC Data CD** radio button.



6. Click **OK**.
7. Import manufacturers into FrameMate. For information on importing manufacturers, go to [To import manufacturers into FrameMate on page 422](#).

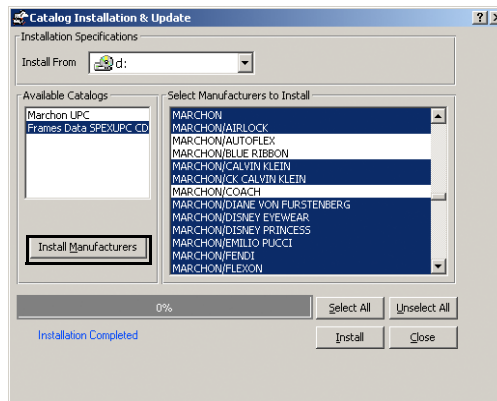
► **To import manufacturers into FrameMate**

NOTE

You must install manufacturers *every time* you receive and install a new Frames SPEX UPC CD or On Demand electronic download. If you do not install manufacturers every time you install a new Frames SPEX UPC CD or On Demand electronic download, you will not see updated manufacturer information in FrameMate and OfficeMate.

1. Open the FRAMES SPEX UPC CD-ROM or On Demand electronic download files. For information on opening the SPEX UPC CD-ROM or On Demand electronic download files in FrameMate, go to [To open the FRAMES SPEX UPC CD-ROM & On Demand electronic download files in FrameMate on page 422](#).
2. Click **Tasks** and select **Install Catalog**.
The Catalog Installation & Update window opens.
3. Select your CD-ROM drive or the drive where your On Demand electronic download files are located from the **Install From** drop-down menu.

4. Select **Frames Data SPEX UPC CD** from the Available Catalogs box.
5. Click **Install Manufacturers**.

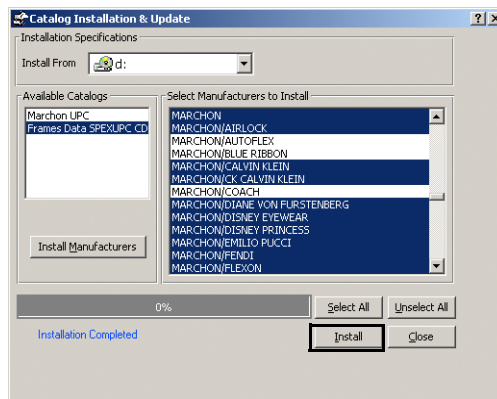


6. Click only on the manufacturers that you want to install.

NOTE

Do *not* click Select All and install the entire frames catalog! This catalog contains over 180,000 frames and if they are all installed or updated, your system will not run properly.

7. Click **Install**.



8. Click **Yes** on the Installation Warning window.
The installation begins.
9. Click **OK** on the Installation Completed window.
10. Transfer product data from the FRAMES SPEX UPC CD-ROM or On Demand electronic download into OfficeMate. For information about transferring product data, go to [Transferring & Loading Frames into the OfficeMate Products Database](#) on page 427.

Using the FRAMES Quarterly CD-ROM

This section tells you how to use the FRAMES Quarterly CD-ROM with FrameMate and OfficeMate, including how

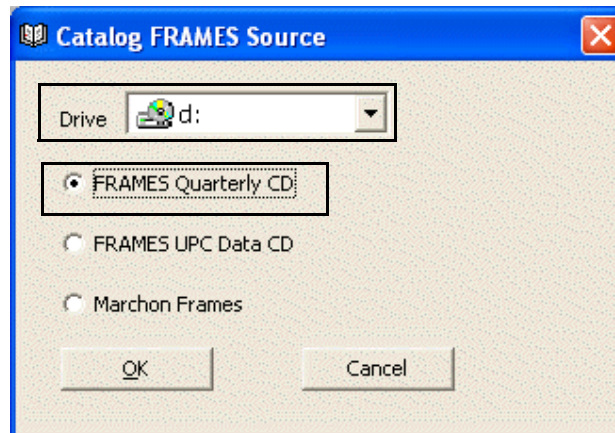
- To open the FRAMES Quarterly CD-ROM in FrameMate, 424

NOTES

- If you are looking for information on using the monthly FRAMES SPEX UPC CD-ROM or On Demand electronic download, go to [Using the FRAMES SPEX UPC CD-ROM & On Demand Electronic Download on page 421](#).
- Unlike the monthly FRAMES SPEX UPC CD-ROM or On Demand electronic download, you are not required to import manufacturers into FrameMate before transferring frames into OfficeMate.

► To open the FRAMES Quarterly CD-ROM in FrameMate

1. Open FrameMate. For more information on opening FrameMate, go to [Opening FrameMate on page 421](#).
2. Click **Tasks** and select **Select FRAMES Source**.
The Catalog FRAMES Source window opens.
3. Insert the FRAMES Quarterly CD-ROM into your CD-ROM drive.
4. Select your CD-ROM drive from the **Drive** drop-down menu.
5. Click the **FRAMES Quarterly CD** radio button.



6. Click **OK**.
7. Transfer product data from the FRAMES Quarterly CD-ROM into OfficeMate. For information about transferring product data, go to [Transferring & Loading Frames into the OfficeMate Products Database on page 427](#).

Using the Marchon Diskette, CD-ROM, & Electronic Download

This section tells you how to use the Marchon Diskette, CD-ROM, and electronic download with FrameMate and OfficeMate, including how

- To open the Marchon Diskette, CD-ROM, & electronic download in FrameMate, 425
- To import manufacturers into FrameMate, 426

NOTE If you are using OfficeMate 7.0 or above and you downloaded frames from the MyMarchon Web site after June 2006, you must use a CD-ROM to transfer the frames into FrameMate. If you downloaded frames from the MyMarchon Web site before June 2006, you can transfer the frames into FrameMate using a diskette.

► To open the Marchon Diskette, CD-ROM, & electronic download in FrameMate

1. Open FrameMate. For more information on opening FrameMate, go to [Opening FrameMate on page 421](#).
2. Click **Tasks** and select **Select FRAMES Source**.
The Catalog FRAMES Source window opens.
3. Complete one of the following tasks:
 - Insert the Marchon Frames diskette into your floppy disk drive.
 - Insert the Marchon Frames CD-ROM into your CD-ROM drive.
 - If you are installing Marchon frames that you have already downloaded to your computer from the MyMarchon Web site, skip this step and go to step 4.

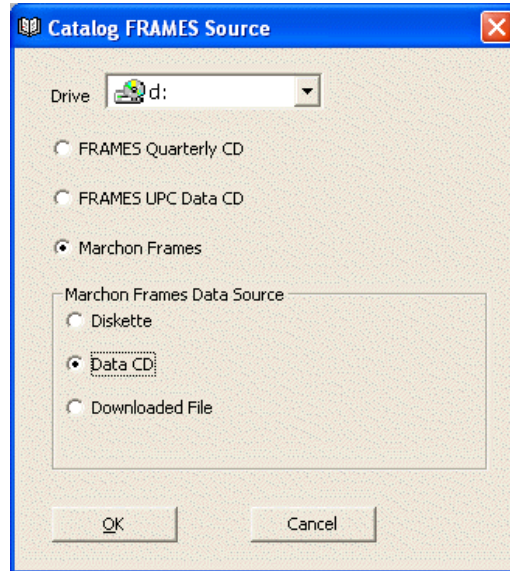
NOTE To request a Marchon Frames diskette or CD-ROM, call Marchon Eyewear at 1.800.645.1300 and ask for the Excess Sales Department or e-mail them at excesssales@marchon.com. You can also go to the MyMarchon Web site at <https://account.mymarchon.com/>, download the Marchon frames, and copy them on to a floppy disk or CD-ROM or save them on to your computer.

4. Select your floppy disk drive, CD-ROM drive, or the drive where you saved your previously downloaded Marchon frames from the **Drive** drop-down menu.

5. Select the **Diskette**, **Data CD**, or **Download File** radio button.

NOTE

If you selected the Download File radio button, navigate to the location where you saved your downloaded Marchon frames.



6. Click **OK**.
7. Import manufacturers into FrameMate. For information on importing manufacturers, go to [To import manufacturers into FrameMate on page 426](#).

► **To import manufacturers into FrameMate**

NOTE

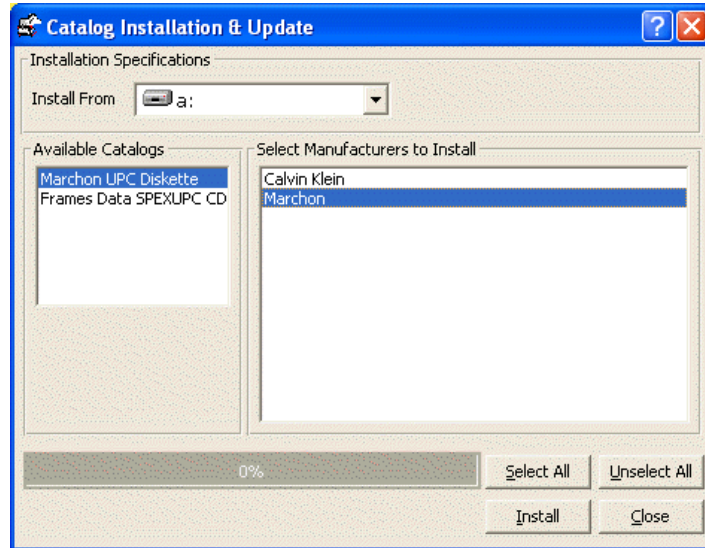
You must install manufacturers *every time* you receive and install a new Marchon diskette, CD, or electronic download. If you do not install manufacturers every time you install a new Marchon Diskette, CD, or electronic download, you will not see updated manufacturer information in FrameMate and OfficeMate.

1. Open the Marchon Diskette, CD-ROM, or Downloaded Source. For information, go to [To open the Marchon Diskette, CD-ROM, & electronic download in FrameMate on page 425](#).
2. Click **Tasks** and select **Install Catalog**.
The Catalog Installation & Update window opens.
3. Select the drive where your Marchon frames are located from the **Install From** drop-down menu.
4. Select **Marchon UPC** from the Available Catalogs box.

- Click only on the manufacturers that you want to install.

NOTE

Do *not* click Select All and install the entire frames catalog! This catalog contains many frames and if they are all installed or updated, your system will not run properly.



- Click **Install**.
- Click **Yes** on the Installation Warning window.
The installation begins.
- Click **OK** on the Installation Completed window.
- Transfer product data from the Marchon Catalog into OfficeMate. For information about transferring product data, go to [Transferring & Loading Frames into the OfficeMate Products Database on page 427](#).

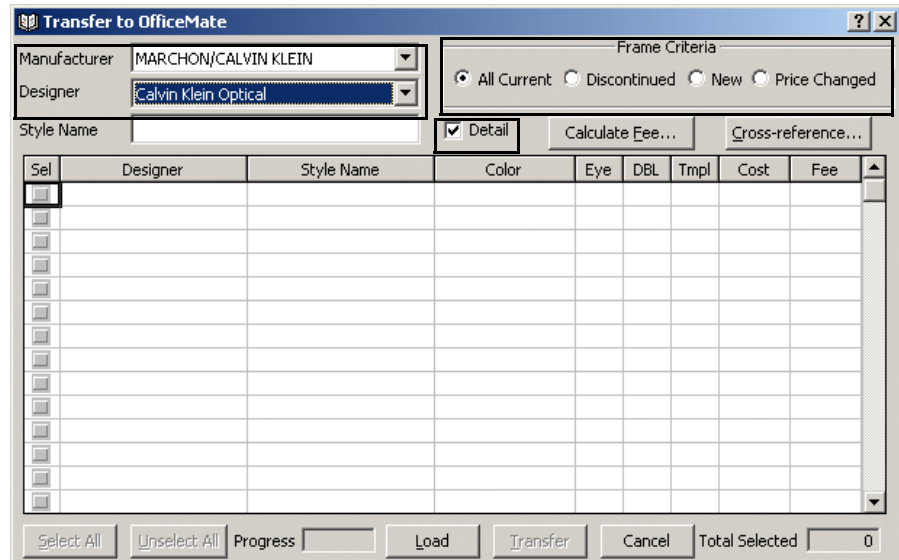
Transferring & Loading Frames into the OfficeMate Products Database

- Open FrameMate. For more information on opening FrameMate, go to [Opening FrameMate on page 421](#).
- Click **Tasks** and select **Transfer Into OfficeMate**.
The Transfer to OfficeMate window opens.
- Select a manufacturer from the **Manufacturer** drop-down menu.
- Select a designer from the **Designer** drop-down menu, if desired.
- Select a **Frame Criteria** radio button.

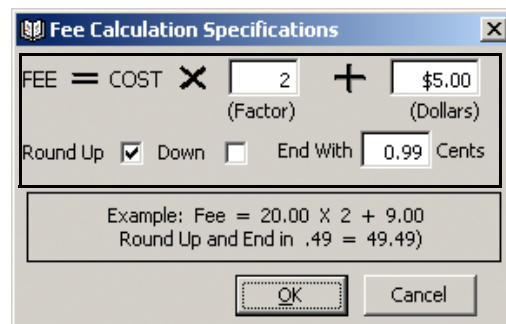
NOTE

You cannot transfer discontinued frames into OfficeMate.

- Select the **Detail** check box if you want to include eye sizes, colors, and product codes in the transfer.



- Click **Calculate Fee**.
The Fee Calculation Specifications window opens.
- Type the markup in the **Factor** text box.
- Type additional markup dollars in the **Dollars** text box.
- Select the **Round Up** or **Down** check box.
- Type the value in the **Cents** text box with which you want the price to end.



- Click **OK**.
- Click **Cross-reference**.

The Cross-Reference Catalog & OfficeMate Data window opens if an exact match for the manufacturer selected for transfer cannot be found in the OfficeMate database.

14. Select a manufacturer from the **OfficeMate Data** drop-down menu.

OR

If the manufacturer is not listed, type the name of the manufacturer and click **Add**.

NOTES

- Use the Cross Reference Catalog & OfficeMate Data window to create new manufacturers in the OfficeMate database, select an existing manufacturer that corresponds to the one you are importing from the FRAMES Data catalog, and assign OfficeMate-specific details to the products you are importing.
- The information that appears under the Catalog Data heading lists the manufacturer and designer(s) you are importing from the FRAMES Data Catalog.
- The information that appears under the OfficeMate Data heading lists the manufacturers, designers, and OfficeMate-specific details from your OfficeMate products database. Use the Add buttons to add new manufacturers or designers.

15. Select designers from the **Designer** drop-down menus.

OR

If the designer is not listed, type the name of the designer and click **Add**.

16. Select the insurance fee type, vendor, stocking type, unit of measure, financial group (if necessary), and production group (if necessary) from the appropriate drop-down menu.

17. Click **OK**.
18. Click **Load**.
19. Select or deselect frames by clicking **Select All**, **Unselect All**, or individually selecting and deselecting **Sel** check boxes.

Sel	Designer	Style Name	Color	Eye	DBL	Tmpl	Cost	Fee
<input checked="" type="checkbox"/>	Calvin Klein	CK488	Light Bronze	54	18	145	104.00	213.99
<input checked="" type="checkbox"/>	Calvin Klein	CK488	Shiny Bordeaux	54	18	145	104.00	213.99
<input checked="" type="checkbox"/>	Calvin Klein	CK488	Shiny Black	52	18	140	104.00	213.99
<input checked="" type="checkbox"/>	Calvin Klein	CK488	Light Bronze	54	18	140	104.00	213.99
<input checked="" type="checkbox"/>	Calvin Klein	CK488	Light Bronze	52	18	140	104.00	213.99
<input checked="" type="checkbox"/>	Calvin Klein	CK488	Olive	54	18	135	104.00	213.99
<input checked="" type="checkbox"/>	Calvin Klein	CK488	Light Bronze	52	18	150	104.00	213.99
<input checked="" type="checkbox"/>	Calvin Klein	CK488	Shiny Black	54	18	145	104.00	213.99
<input checked="" type="checkbox"/>	Calvin Klein	CK488	Olive	54	18	145	104.00	213.99
<input checked="" type="checkbox"/>	Calvin Klein	CK488	Light Bronze	54	18	135	104.00	213.99
<input checked="" type="checkbox"/>	Calvin Klein	CK488	Shiny Black	54	18	140	104.00	213.99
<input checked="" type="checkbox"/>	Calvin Klein	CK488	Shiny Black	52	18	145	104.00	213.99
<input checked="" type="checkbox"/>	Calvin Klein	CK488	Olive	52	18	145	104.00	213.99
<input checked="" type="checkbox"/>	Calvin Klein	CK488	Shiny Blue	52	18	140	104.00	213.99

20. If you did not calculate the fees in step 7, type fees in the **Fee** text boxes.
21. Ensure that the OfficeMate **Products** window is closed.
22. Click **Transfer**.
23. Click **Yes** on the Transfer Warning window.
24. Click **OK** when the transfer is complete.

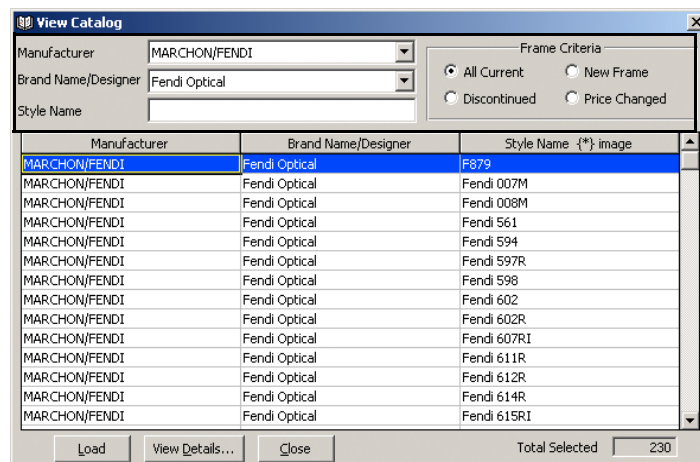
25. Repeat these steps 3–24 for each manufacturer and designer that you want to transfer into your OfficeMate Products database.

NOTES

- If you use the VSP interface, ensure that you map any newly downloaded frames to VSP product. For more information about VSP product mapping, go to [Mapping Products on page 527](#).
- If you use the VSP interface, ensure that each frame includes mount information.

Viewing
Frame Infor-
mation

1. Click **View Frames**.
2. Select a manufacturer from the **Manufacturer** drop-down menu.
3. Select a brand name or designer from the **Brand Name/Designer** drop-down menu.
4. Select one of the **Frame Criteria** radio buttons.
5. Click **Load**.



6. Double-click on a frame.
OR
Select a frame and click **View Details**.

NOTE

FRAMES Quarterly CD-ROM frame styles with an asterisk include an image. Click on the frame image box to view the image.

The Frame Style View window opens.

7. View the frame details using one or more of the following methods:
 - Click **List SKUs** to view the stock keeping unit numbers.
 - Click **Price** to open the Price Information window and view price information.
 - Click **Summary** to view summary details.
 - Click the arrow buttons to view information on other frames.

The screenshot shows the 'Frame Style View' window. It has a title bar with a close button. The main area is divided into several sections:

- Style Summary:** A form with fields for Manufacturer (MARCHON/FENDI), Brand/Designer (Fendi Optical), Style Name (F879), Item Type, Item Usage (Metal), Gender (Female), Material (Metal), Mount, Bridge Size (16), and Axis (134.6).
- Available Colors (*): image:** A list box containing 'Dark Brown', 'DARK GUN', and 'Shiny Rose'.
- Available Sizes:** A table with columns: Eye, A, B, ED, DBL, Temple. The first row has values: 52, 52, 54, 54.4, 16, 135.
- Navigation:** A set of arrow buttons (left, right, double left, double right) and three buttons: 'Close', 'Price', and 'List SKU's'.

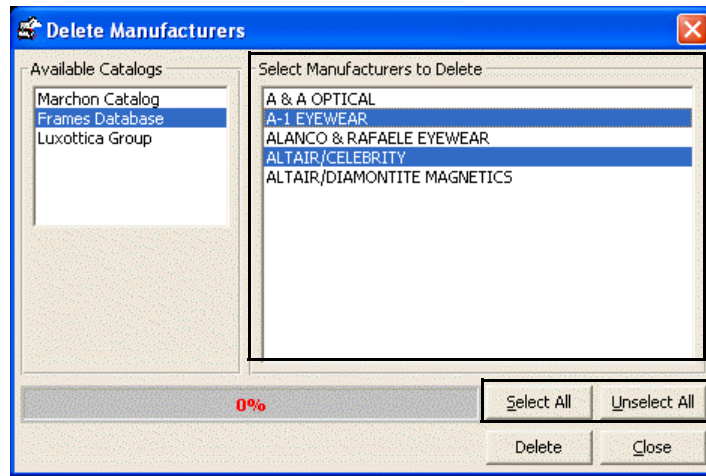
8. Click **Close** to close the Frame Style View window.
9. Click **Close** to close the View Catalog window.

► Deleting Manufacturers

NOTE You can only delete manufacturers from the FRAMES SPEX UPC CD-ROM and the Marchon Diskette. You cannot delete manufacturers from the FRAMES Quarterly CD-ROM.

1. Click **Tasks** and select **Delete Manufacturers**.
The Delete Manufacturers window opens.
2. Select a catalog from the **Available Catalogs** box.

3. Select or deselect manufacturers by clicking **Select All**, **Unselect All**, or individually selecting and deselecting manufacturers.



4. Click **Delete**.
5. Click **OK** on the Deletion Completed window.

In this chapter:

- [Setting Up Inventory, 435](#)
- [Recording Product Inventory Details, 439](#)
- [Maintaining Inventory Information, 443](#)

For more information on maintaining inventory information, watch the “[Inventory Management](#)” videos.

Maintaining inventory information in OfficeMate allows you to track and value items that you have in stock and “on hand.” Additionally, OfficeMate gives you control over inventory management, product flow, and accounting for items in transit between vendors, distribution centers, practice locations, and labs.

NOTES

- It is important that you review the information in this chapter and perform the steps required to set up perpetual inventory. Failure to set up inventory correctly or properly track individual order statuses on the Eyewear Order, Soft Lens Order, and Hard Lens Order windows and job statuses on the Pick ticket and Transfer to Location window will lead to inaccurate inventory counts and valuations.
- If you do not want to maintain perpetual inventory, deselect the Maintain Perpetual Inventory check box for each product type on the Product Setup window. For more information, go to [To set up products for perpetual inventory on page 435](#).

Setting Up Inventory

This section tells you how to set up OfficeMate to track inventory counts and valuations, including how

- [To set up products for perpetual inventory, 435](#)
- [To set up inventory preferences, 437](#)
- [To set up system preferences for perpetual inventory, 438](#)

► To set up products for perpetual inventory

NOTE

Purchase orders can be created manually or automatically based on items sold on fee slips or based on stock levels. You must maintain perpetual inventory for products that you want to be added to purchase orders automatically.

1. From the OfficeMate Administration main window, click **Setup**, and select **Product Setup**.

The **Product Setup** window opens.

2. Select one of the eight product types from the **Product Type** drop-down menu.
3. Select the **Maintain Perpetual Inventory** check box if it not already selected.

NOTES

- Purchase orders can be created manually or automatically based on items sold on fee slips or based on stock levels. You must maintain perpetual inventory for products that you want to be added to purchase orders automatically.
- If you do not want to maintain perpetual inventory for any products, deselect the Maintain Perpetual Inventory check box for each product type.
- If you want to maintain perpetual inventory for some products, deselect the Maintain Perpetual Inventory check box for those product types for which you do not want to maintain inventory.

4. Select the product type's unit of measure from the **Sales Unit of Measure** drop-down menu.
5. Select the inventory cycle from the **Physical inventory cycle** drop-down menu.

Product Setup

Product Type | Preferences | Commission Class

Product type Accessories

Maintain perpetual inventory

Sales Unit of Measure: Each

Physical inventory cycle: Annual Cycle

Stocking Level: 1

Minimum Reorder Point: 1

Minimum Reorder Quantity: 2

Allow Discount On Services

Use Half Fee on Single Lens Transactions

Product Type Commission Defaults

Provider Commission Method

None % of Gross % of Margin

Commission rate: 0

SPIFF Amount: \$0.00

Staff Commission Method

None % of Gross % of Margin

Commission rate: 0

SPIFF Amount: \$0.00

Minimum Reorder Quantity Warning

A Minimum Reorder Quantity greater than zero has been entered.
NOTE: For each product added to inventory with product type of 'Accessories', the Minimum Reorder Quantity will be set to 2 for ALL LOCATIONS.

OK New Delete Print Cancel

6. If you are maintaining perpetual inventory, enter quantities in the **Stocking Level**, **Minimum Reorder Point**, and **Minimum Reorder Quantity** text boxes.

NOTE

The Stocking Level, Minimum Reorder Point, and Minimum Reorder Quantity are copied to each new product that is created from this point forward and applied to each location including the administrative location and distribution centers. If you do not want these quantities applied to each new product, do not enter quantities in these fields.

This field...	Controls this function...
Stocking Level	The desired number of units to keep on hand excluding sample (display) units. This field is informational only and does not affect reordering.
Minimum Reorder Point	The point at which the product should be added to a PO. When the location's inventory reaches this point, the product is added to the PO (when PO from Qty on Hand is selected from the Products menu).
Minimum Reorder Quantity	The number of units to add to the PO. Typically, this number would be a multiple of the number of units shipped in a case or the number of units required to qualify for a discount rate. For example, if saline solution ships in cases of 12, the Minimum Reorder Quantity would be 12, 24, 36, etc. The Minimum Reorder Point plus the Minimum Reorder Quantity often equal more than the Stocking Level. The Minimum Reorder Quantity is set for all products of this type added to inventory at all locations.

7. Click **Print** to print the product type information, if desired.
8. Click **OK** to close the Product Setup window.

► **To set up inventory preferences**

- From the OfficeMate Administration main window, click **Setup**, and select **Product Setup**.
The **Product Setup** window opens.
- Click the **Preferences** tab.

- Type or select the start date of the first period in your inventory calendar in the **Start date of first periods** text box.

NOTE Typically, the start date is the date your fiscal year begins; check with your accountant to confirm the start date of the first period in your inventory calendar.

- Type the current calendar year in the **Current calendar year** text box.
- Type the current inventory period in the **Current inventory period** text box.

NOTE The amount of time between the start and close of the inventory is an inventory period. The length of the current inventory period is entered only at the start of your inventory. The inventory period is automatically advanced when you close the current inventory period.

- Type the number of periods in a year in the **# of periods in a year** text box.
- If you keep your inventory physical count by board location, select the **Yes** radio button next to **Will physical count be stored by board location?**

NOTE The board location is the location of an item within the dispensary. For contact lenses and other items, the location could be a bin, shelf, or drawer.

The screenshot shows the 'Product Setup' window with the 'Preferences' tab selected. The window title is 'Product Setup' and it has three tabs: 'Product Type', 'Preferences', and 'Commission Class'. The 'Preferences' tab is active and contains the following fields and options:

- These Preferences apply to ALL Product Types.**
- Start date of first periods: 01/20/2006 (dropdown)
- Current calendar year: 2010 (text box)
- Current inventory period: 10 (text box)
- # of periods in a year: 12 (text box)
- Will physical count be stored by board location? Yes No
- Barcode Label Options**
 - Column on bar code: UPC Product Code
 - Bar Code Printer: Sato CX400 (dropdown)
 - Bar Code printer program path: (empty text box)
 - Bar Code printer output path: (empty text box)
 - Comm Port for Barcode Printer: 1 (text box)
 - Description (1 Line, 1st 24 chrs.): Yes No
 - Manufacturer: Yes No
 - Designer Series: Yes No
 - Color Description: Yes No
 - Board Location: Yes No
 - Date Received: Yes No
 - Fee: Yes No
 - Eye Size/Bridge Size/Temple Size: Yes No
- You may select 5 lines of data for label.**

At the bottom of the window are buttons for 'OK', 'New', 'Delete', 'Print', and 'Cancel'.

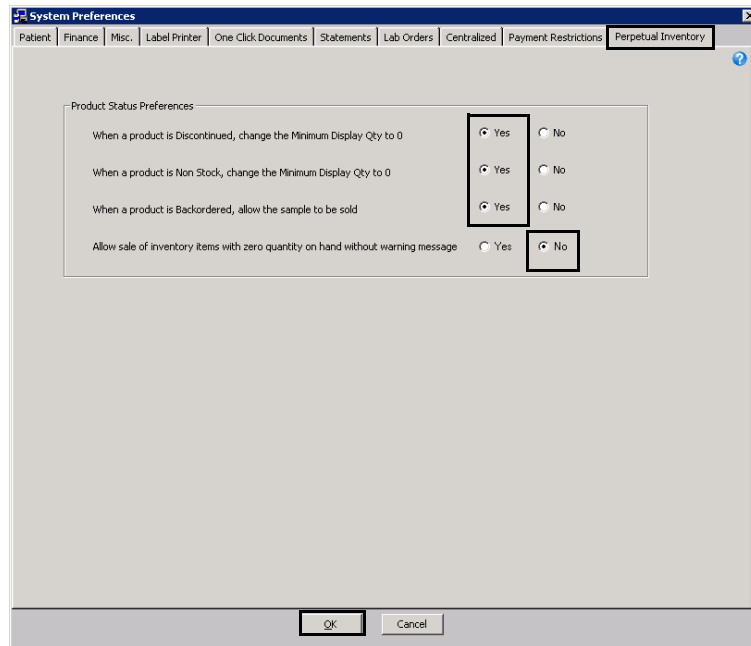
- Click **OK** to close the Product Setup window or go to [To set up product preferences on page 252](#) if you use a barcode printer to print barcode labels.

► To set up system preferences for perpetual inventory

- From the OfficeMate Administration main window, click **Setup**, and select **Preferences**.

The **System Preferences** window opens.

2. Click the **Perpetual Inventory** tab.
3. Select the **Yes** radio buttons for the following:
 - **When a product is Discontinued, change the Minimum Display Qty to 0**
 - **When a product is Non Stock, change the Minimum Display Qty to 0**
 - **When a product is Backordered, allow the sample to be sold**
4. Select the **No** radio button for **Allow sale of inventory items with zero quantity on hand without warning message**.



Recording Product Inventory Details

Before you begin maintaining inventory, record product information and inventory details in OfficeMate. Complete the instructions in this section to record product

inventory details. Go to [Recording Product Information on page 263](#) to record product information.

NOTES

- Only users in distribution centers and the administrative location can open the Products window.
- If you are using the FRAMES SPEX UPC, FRAMES Quarterly CD-ROM, or Marchon Frames Diskette, go to [Using FrameMate on page 421](#) for instructions on how to use FrameMate to transfer frame information into OfficeMate.
- Before you add products to OfficeMate set up your insurance fee schedule information and procedure codes. To set up insurance information, go to [To modify or add appointment schedule resources on page 58](#). To set up procedure codes, go to [To add & modify procedure codes on page 137](#).
- Press the **F12** key when your cursor is in a drop-down box to open a **Maintain** window and add new items to the drop-down menu selections. For more information on using the F12 key, go to [To add and maintain list box selections \(F12\) on page 17](#).

1. Open the Products window. For more information on opening the Products window, go to [Setting Up Product & Service Information on page 249](#).
2. Select a product from the **Product Type** drop-down menu.
3. Select a product manufacturer from the **Manufacturer** drop-down menu.
4. Type a product name in the **Product Name** text box.
5. Click **F2-Find** to search for a product.
6. Double-click on a product for which you want to record product inventory details.
7. Click the **Product Details** tab.
8. Click **New** to add new product details or select a line in the table to modify product inventory details.
9. Select the product's status:
 - Select the **Stock/Inline** radio button if the product is regularly kept in inventory at store locations and is available for sale.
 - Select the **Non Stock/Not Inline** radio button if the item is not regularly kept in inventory at the store locations, but is ordered from a vendor when a unit is sold.
 - Select the **Inactive** radio button if the product is not regularly kept in inventory at the store locations, nor is it ordered from a vendor when a unit is sold. Items marked as inactive do not appear in product order search results.
 - Select the **Discontinued** radio button if the product is no longer available. Items marked as discontinued do not appear in product order search results.
 - Select the **Backordered** check box if the item is not currently available from the vendor or manufacturer and type the date in which the item is again expected to be available in the **ETA** text box. This date can also

be entered on the Receive PO window. In the event two different dates are entered, the latest date is displayed.

- Select the **Display Sample** check box to indicate that there are sample or display units of this product. The minimum display quantity for the product is set to one. You can change the minimum sample quantity on the All Locations Inventory tab.
10. If you are recording information for any product except lens treatments or accessories, type the product size information in the **Product Sizes** fields.
 11. Type the base cost of the product in the **Base Cost** text box.
 12. Type the base fee of the product in the **Base Fee** text box.
 13. Type the product code in the **Product Code** text box.

OR

Type the UPC code in the **UPC Code** text box.

NOTE

If you transfer frame information from a FRAMES Data CD-ROM into OfficeMate, the product UPC code is automatically moved to the Product Code box, and the UPC Code box is left empty. For more information on how to use FrameMate to transfer frame information into OfficeMate, go to [Transferring & Loading Frames into the OfficeMate Products Database on page 427](#).

14. Type or select a color from the **Color** drop-down menu, if applicable.

The screenshot shows the 'Products: Frames - Coach Hayley' window. It features a table with columns for Stock/Inline, Non Stock/Not Inline, Discontinued, Inactive, Backordered, Backordered ETA, Display Sample, Color, Eye, Bridge, Temple, Base Cost, Base Fee, Total Fee, and Product Code. Below the table is a form with fields for Stock/Inline, Non Stock/Not Inline, Inactive, Discontinued, Backordered, ETA, Display Sample, Base Cost, Cost Changed, Product Code, Color, Base Fee, Fee Changed, and UPC Code. There is also a 'Product Sizes' section with fields for Eye, Bridge, Temple, DBL, A, B, and ED. At the bottom, there is a 'Product Attributes' section with a table for Attributes, CPT/NCPCS Code, Prod. Cost, Prod. Fee, and Fee Changed.

15. Click the **All Locations Inventory** tab.

16. To override the default reorder preferences set up in the Products Setup window, enter the following information as needed for each location:
- Type the **Board Location** as needed.
 - Type the quantity the location should have on hand in the **Stock Level** field.
 - Type the minimum reorder point in the **Min Reorder Point** field.
 - Type the minimum reorder quantity in the **Min Reorder** field.
 - Type the number of display or sample items each location has on hand in the **Min Display Qty** field.

NOTE

- When the quantity on hand drops below the minimum reorder point, OfficeMate adds the product to a purchase order when the purchase order is created from the quantity on hand. For information on creating purchase orders based on quantity on hand, refer to [on page 449](#).
- The Avg Cost field is informational only and displays the average cost of the product. The average cost is weighted, based on the cost of the product at the time each unit was received into inventory.
- The Qty on Order field represents the quantity on order when a purchase order is created. Compare the Qty on Order to the Qty Committed to know what is available as stock and is not already committed.
- The Qty Committed field represents the quantity of a product sold that was not on hand, is currently on order, and is still owed to a patient. This eliminates the previous quantity going negative. The only way to clear this quantity is to mark the product as Dispensed on the Order window.
- The Qty In Process field represents items that have not been dispensed to the patient. The only way to clear this quantity is to mark the product as Dispensed on the Order window.

Products - Frames - Autoflex 54

Products | Product Details

	Stock/Inline	Non Stock/Not Inline	Discontinued	Inactive	Backordered	Backordered ETA	Display Sample	Color	Eye	Bridge	Temple	Base Cost	Base Fee	Total Fee	Product Code
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	Gunmetal	53	10	140	74.95	198.00	198.00	MS4A
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	Tortoise/Bronze	55	18		74.95	198.00	198.00	MS4B
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	COFFEE	53	18		74.95	198.00	198.00	MS4C
4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>								
5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>								

Stock/Inline
 Non Stock/Not Inline
 Inactive
 Discontinued
 Backordered ETA
 Display Sample

Product Sizes
 Eye: 53 Bridge: 18 Temple: 140 DBL: 18 A: 53.00 B: 0.00 ED: 53.00

Base Cost: \$74.95 Cost Changed: 3/20/2006 Product Code: MS4A Color: Gunmetal
 Base Fee: \$198.00 Fee Changed: 3/20/2006 UPC Code:

Product Attributes

All Locations Inventory

Location	Board Location	Base Cost	Base Fee	Stock Level	Min Reorder Point	Min Reorder Qty	Avg Cost	Qty On Hand	Qty On Order	Qty In Transit	Qty Committed	Qty In Process	Min
Central Distribution				5	5	10	\$0.00	0	0	0	0	0	0
Company Lab				3	3	6	\$0.00	0	0	0	0	0	0
Home Office				3	3	6	\$0.00	0	0	0	0	0	0
Prime Store				3	3	6	\$0.00	0	0	0	0	0	0
New Lab				3	3	6	\$0.00	0	0	0	0	0	0
Southern Distribution				3	3	6	\$0.00	0	0	0	0	0	0

Buttons: Save, Cancel, Delete, New, Copy, Create Barcodes

Maintaining Inventory Information

For more information on adjusting your inventory, watch the "Inventory Adjustments" video.

17. Click **Save** and select one of the following options:
 - **Save** to save the information and keep the Products window open.
 - **Save and New** to save the information and create a new product.
 - **Save and Exit** to close the Products window.

This section tells you how to record inventory adjustments, purchase orders, physical counts, and period closes, including how

- [To adjust your inventory, 443](#)
- [To create & maintain purchase orders, 445](#)
- [To manually count & record your physical inventory, 449](#)
- [To scan & record your physical inventory, 451](#)
- [To close inventory periods, 453](#)

► To adjust your inventory

You must adjust your inventory in order to record the initial quantity and to modify or delete the quantity of products that you have in stock and on hand.

1. Click the **Products** icon, select **Inventory**, and then select **Adjustment**.
OR
Click **Tasks** on the main window toolbar, select **Inventory**, and then select **Adjustment**.
The **Inventory Adjustment** window opens.
2. Select an adjustment type from the **Adjustment Type** drop-down menu, if applicable.

NOTES

- The **Adjustment** adjustment type allows you to enter a positive or negative adjustment amount.
- The **Receive Inventory** adjustment type allows you to increase your inventory.
- The **Return to Vendor** adjustment type allows you to decrease your inventory.

3. Type comments in the **Comment** text box, if applicable.
4. Select a product to adjust using one of the following methods:
 - Type a product name or code into a **Product Name/Code** text box.
 - Click on the **Product Name/Code** column heading to search for a product. For more information on searching for products, go to [Finding Products & Services on page 261](#).

- Type the adjusted quantity in the **Adjustment** text box.

NOTES

- Type a minus (-) sign in front of the adjustment quantity to record a negative adjustment.
- To remove a product from the inventory worksheet, type 0 in the **Adjustment** text box, ensure that 0 is recorded in the Qty on Hand, Qty On Order, Stock Level, Min Reorder Point, and Min Reorder Qty text boxes in the Product Detail Maintenance window, and select the Inactive check box in the Products window. For more information on the Product Detail Maintenance window, go to [Recording Product Inventory Details on page 439](#). For more information on the Products window, go to [To add or modify products on page 264](#).
- The On Hand column may show a negative number if a product is sold on a fee slip when there are no units of that product on hand.

- Type a new product cost in the **Cost** text box, if applicable, and select the **Update Item Cost** check box.
- Select a reason for the adjustment from the **Reason** drop-down menu.

Product Name/Code...	On hand	Adjustment	Cost	Reason
UNLOCK 760/1 [679516691691]	0	2	89.95	Physical Count Variance

- Click **Record**.
The **Qty on Hand** text box in the Product Detail Maintenance window is updated.
- Optionally, click **Print** to print a record of the adjustment.

For more information on transferring inventory, watch the "Transfers" video.

► To transfer inventory to another location

To send inventory items from your location to another location, you must transfer the inventory in OfficeMate.

1. Click the **Products** icon, select **Inventory**, and then select **Transfer**.

OR

Click **Tasks** on the main window toolbar, select **Inventory**, and then select **Transfer**.

The **Inventory Transfer** window opens.

2. Select a location from the **Location** drop-down menu.
3. Select a location from the **Transfer to** drop-down menu.
4. Type notes in the **Comments** text box, as needed.
5. Select a product to transfer using one of the following methods:
 - Type a product name or code into a **Product Name/Code** text box.
 - Click on the **Product Name/Code** column heading to search for a product. For more information on searching for products, go to [Finding Products & Services on page 261](#).
6. Type the number of units to transfer in the **Quantity** field.
7. Select a reason for the transfer from the **Reason** drop-down menu. If an appropriate reason is not listed, you can add a reason to the drop-down menu by pressing F12. For more information on using the F12 key, go to [To add and maintain list box selections \(F12\) on page 17](#).
8. When you are finished, click **Record & Print**.

OR

Click **Cancel** to disregard the transfer.

NOTE

A transfer ticket is not created if the location from which the transfer originates is the same as the transfer destination location.

► To create & maintain purchase orders

Purchase orders (POs) help you manage your inventory items when products are ordered from vendors. You can create purchase orders to record the initial quantity of products that you have in stock and on hand. You can create purchase orders even if you do not maintain inventory.

For more information on creating and maintaining purchase orders, watch the "Purchase Orders" video.

NOTES

- Do not create manual purchase orders in OfficeMate Administration. Orders cannot be received in OfficeMate Administration; therefore, create orders in OfficeMate locations.
- Locations and labs may be restricted from creating purchase orders by the administrative location.

1. Click the **Products** icon, select **Purchase Order**, and select **Manual PO**.
OR
Click **Tasks** on the main window toolbar, select **Purchase Order**, and select **Manual PO**.

The Purchase Order Search window opens.

NOTE

To maintain an existing purchase order, locate the purchase order by entering search criteria as needed:

- Select a status from the **Status** drop-down menu as needed.
- Select a vendor from the **Vendor** drop-down as needed.
- Narrow the time frame you are searching by entering a beginning date the product is required in the **Date Required from** field and an ending date the product is required in the **Date Required thru** field as needed.
- Narrow the time frame you are searching by entering a beginning date in the **PO Date from** field and an ending date in the **PO Date thru** field as needed.

Click **Refresh** to search for the PO based on the criteria you entered. Once you have located your purchase order, double-click the PO. The Purchase Order window opens. Complete one of the following tasks:

- Update the PO information as needed and click **Save**.
- Click **Cancel PO** to cancel the purchase order.
- Click **Print** to print the purchase order.
- Click **New PO** to create a new purchase order.
- Click **Exit** to close the window.

- To create a new purchase order, click **New PO**.
The Purchase Order window opens.

The screenshot shows the 'Purchase Order' window with a 'PURCHASE ORDER SEARCH' section. The search criteria are: Status: Open, Ship-to Location: Irvine Store, Vendor: (All). There are also fields for PO Date from, PO Date thru, Date Required from, and Date Required thru, each with a 'Clear' button. A 'New PO' button with a help icon is in the top right, along with 'Refresh' and 'Exit' buttons. Below the search section, it says 'Records selected = 8' and 'SEARCH RESULTS'. A table displays the results with columns for PO, PO Date, Date Required, Ship-to, Vendor, and Status.

PO	PO Date	Date Required	Ship-to	Vendor	Status
11	10/28/2010		Irvine Store	Crown Optical	OPEN
10	02/28/2006		Irvine Store	Tura	OPEN
9	05/11/2005		Irvine Store	Firestone	OPEN
7	05/11/2005		Irvine Store	z-Discontinued Marchon	OPEN
6	05/10/2005		Irvine Store	Bausch & Lomb	OPEN
4	04/01/2003		Irvine Store	Firestone	OPEN
2	03/08/2003		Irvine Store	Firestone	OPEN
1	02/25/2003		Irvine Store	Bausch & Lomb	OPEN

- Type the date by which the product is needed in the **Date Required** field.
- Type the reference or tracking information in the **Reference** text box, if available.
- Type the name of the freight carrier in the **Ship Via** text box, if known.
- Type the freight-on-board code or information in the **FOB** text box, as needed.
- Type notes in the **Notes** text box, as needed.
- Click **Find Vendor** to add the vendor information.
The Vendor Select window opens.
- Select the vendor from the list and click **Select**.
The vendor information populates the Name, Phone, Fax, and Terms fields.
- Make sure that the correct shipping information is entered in the **Ship-to Information** box. These fields are automatically populated with information from the Location Maintenance window. For more information on recording your location's shipping address, go to [To maintain location information on page 24](#).

11. Click **Save**.

12. Click the **Purchase Order Details** tab.
13. Select products for the purchase order using one of the following methods:
- Type a product name or code into a **Product Name/Code** text box.
 - Click the **Product Name/Code** column heading to search for and select a product. For more information on searching for products, go to [Finding Products & Services on page 261](#).

NOTE

OfficeMate allows you to enter and search by products offered by the vendor specified on the Purchase Order and Shipping Information tab.

14. Scan or type the number of units that you want to order in the **Order Qty** text box, if necessary.
15. Click the **Patient Name** column heading to search for and select a patient to link to the product, if applicable.

16. Click **Save PO Details**.

Product Name/Code...	Location	Ttl On Hand	Ttl On Order	Order Qty	Cost	Extension	Patient Name...
Nike 4008 Mag-Set [679516863562] 47 19 145 46.9 28	Foothill Ranch Store	0	0	3	129.95	389.85	
Nike 4602 [] 39 19 125 0 0 0 Slate Blue	Foothill Ranch Store	0	0	1	89.95	89.95	
Nike 5506 [] 52 15 140 0 0 0 Tortoise	Foothill Ranch Store	0	0	5	47.95	239.75	Marge Simpson

17. If you are ready to finalize your order, perform the following steps:
- Click the **Purchase Order and Shipping Information** tab.
 - Click **Finalize**.
 - Click **Print**, if needed.
 - Click **Exit** when you are finished.

18.

► To manually count & record your physical inventory

For more information on manually counting and recording your physical inventory, watch the "Physical/Scan Count" video.

Follow the instructions below to manually count and record your physical inventory.

- Click the **Products** icon, select **Inventory**, and select **Physical Count**.

OR

Click **Tasks** on the main window toolbar, select **Inventory**, and select **Physical Count**.

The **Physical Count** window opens.

- Select a location from the **Location** drop-down menu.
- Select the **Yes** radio button to indicate that this is a new inventory cycle.
- Select a manufacturer from the **Manufacturer** drop-down menu, if you are recording your inventory by manufacturer.
- Select an inventory count cycle from the **Select a Count Cycle** drop-down menu.

All of your products are displayed. To record stocking levels for products, go to [Recording Product Inventory Details on page 439](#).

- Type or select the inventory date in the **Inventory Date** field.

7. Select the user recording the physical inventory from the **Recorded by** drop-down menu, if this field is not locked. For more information on locking and unlocking this menu, go to [Setting Up Security on page 96](#).
8. Click **Worksheet** to print the inventory worksheet.
9. Click **Record** to save the inventory cycle.
10. Click **Cancel** to close the Physical Count window.
11. Physically count your inventory and record your inventory counts in the **Count** field on the printed worksheet.

NOTE

While you may record your inventory counts directly in the Physical Count window instead of first writing your counts on the printed worksheet, that method is not very practical and may result in inaccurate counts in your inventory.

12. Click the **Products** icon, select **Inventory**, and select **Physical Count**.
OR

Click **Tasks** on the main window toolbar, select **Inventory**, and select **Physical Count**.

The **Physical Count** window opens.

13. Select the **No** radio button to indicate that this is not a new inventory cycle.
14. Select an inventory count cycle from the **Select a Previous Cycle** drop-down menu.

All of your products that you recorded in your inventory cycle are displayed.

NOTE

To delete a previously created open or closed inventory cycle, click **Delete Worksheet**.

15. Type the actual number of inventory items counted in the **Count** column.

NOTE

The last recorded item's line is highlighted in teal on the **Physical Count Entry window**.

The screenshot shows the Physical Count window with the following data:

Board Loc.	Manufacturer	Product Name/Code	Product Size/Color	Count	On hand	Variance	Unit cost	\$ Variance
Altair	Sigrid Olsen 102 [SO102]	48-17-130 Black Creme		1	0	1	40.50	40.50
Altair	Sigrid Olsen 102 [SO102B]	48-17-130 Tortoise Jade		5	0	5	40.50	202.50
Altair	Sigrid Olsen 103 [SO 103]	52-16-135 BLACK DIAMOND		7	0	7	55.00	385.00
Altair	Sigrid Olsen 103 [SO 103-2]	52-16-135 ravishing red		0	0	0	55.00	0.00
Altair	Sigrid Olsen 104 [SO104]	48-17-130 Dark Wine		0	0	0	50.00	0.00
Altair	Sigrid Olsen 104 [SO104E]	48-17-130 Soft Bronze		0	0	0	50.00	0.00
Altair	Sigrid Olsen 105 [SO105]	50-16-135 Matte Bronze		0	0	0	52.50	0.00
Altair	Sigrid Olsen 105 [SO105E]	50-16-135 Shiny Black		1	0	1	52.50	52.50
Altair	Sigrid Olsen 106 [SO 106]	49-19-130 Antique Plum				0	47.50	
Altair	Sigrid Olsen 106 [SO106]	49-19-130 Antique Pewter				0	47.50	
Altair	Sigrid Olsen 106 [SO106B]	51-19-135 Antique Bronze				0	47.50	
Altair	Sigrid Olsen 106 [SO106B2]	49-19-130 Antique Bronze				0	47.50	
Altair	Sigrid Olsen 107 [SO107]	47-20-130 Pewter				0	47.50	
Altair	Sigrid Olsen 107 [SO107B]	49-20-135 Cafe				0	47.50	
Altair	Sigrid Olsen 110 [SO110A]	49-16-135 Purple Petal				0	47.50	
Altair	Sigrid Olsen 110 [SO110]	49-16-135 Midnight Sly				0	47.50	
Altair	Sigrid Olsen 112 [SO112A]	50-16-135 Onyx Blue				0	45.00	
Altair	Sigrid Olsen 112 [SO112]	50-16-135 Tortoise Shell				0	45.00	
Altair	Sigrid Olsen 116 [SO116]	53-16-130 Graphite				0	50.00	

Number of items loaded = 53 Total Items Counted 13

Buttons: Record, Cancel, Worksheet, Print Variance, Update On-Hand, Delete Worksheet

16. Click **Print Variance** to print the Variance report.
The Variance report prints on your default printer and displays the difference between the inventory you actually have and the inventory recorded in OfficeMate.

17. Click **Record**.

NOTE	If you do not have time to finish recording the actual number of inventory items counted and print the Variance report, you must still click Record . You can continue your work where you stopped by selecting the inventory count cycle from the Select a Previous Cycle drop-down menu.
-------------	--

18. Click **Update On-Hand** to update the quantity of inventory items that you have on hand and close the inventory cycle.

► To scan & record your physical inventory

For more information on manually counting and recording your physical inventory, watch the "Physical/Scan Count" video.

Follow the instructions below to scan and record your physical inventory.

1. Click the **Products** icon, select **Inventory**, and select **Scan Count**.
OR
Click **Tasks** on the main window toolbar, select **Inventory**, and select **Scan Count**.
The **Scan Physical Count** window opens.
2. Select a location from the **Location** drop-down menu.
3. Select the **Yes** or **No** radio button to indicate if this is or is not a new inventory cycle.
4. Select a manufacturer from the **Manufacturer** drop-down menu, if applicable.
5. Select an inventory count cycle from the **Select a Count Cycle** or **Select a Previous Cycle** drop-down menu.

NOTE	To delete a previously created open or closed inventory cycle, click Delete Worksheet.
-------------	--

6. Place your cursor in the **Product Code** text box.

For more information on using your barcode scanner, see the "Scanning and Printing Barcodes with OfficeMate" document.

7. Use your barcode scanner to scan your inventory into the Scan Physical Count window:

- a. Scan the product's barcode.

NOTE The last scanned item's line is highlighted in teal on the **Scan Physical Count** window.

- b. Enter the number of units on hand.
 c. Press **Enter** to return the cursor to the Product Code field.
 d. Repeat steps a–c for all of the products.

8. Click **Print Variance** to print the Variance report.

The Variance report prints and displays the difference between the inventory you actually have and the inventory recorded in OfficeMate.

9. Click **Record**.

NOTE If you do not have time to finish recording the actual number of inventory items and print the Variance report, you must still click **Record**. You can continue your work where you stopped by selecting the inventory count cycle from the **Select a Previous Cycle** drop-down menu.

10. Click **Update On-Hand** to update the quantity of inventory items that you have on hand and close the inventory cycle.

► **To close inventory periods**

An inventory period accumulates until you specifically close it. Close your inventory periods according to your normal accounting practices.

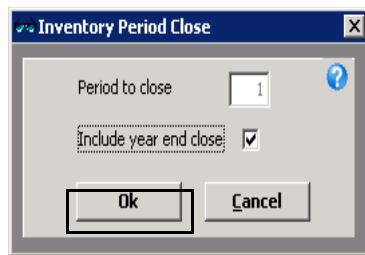
1. Click the **Products** icon, select **Inventory**, and select **Period Close**.

OR

Click **Tasks** on the main window toolbar, select **Inventory**, and select **Period Close**.

The **Inventory Period Close** window opens.

2. Select the **Include year end close** check box if you are at the end of your fiscal year.
3. Click **OK**.



Your period-to-date inventory numbers are moved to year-to-date numbers, or if you included year-end numbers, your inventory numbers are moved to last year in the products' Product Detail Maintenance window.

In this chapter:

- [Processing CMS 1500 Claims, 455](#)
- [Processing UB-04 Claims, 484](#)

Processing CMS 1500 Claims

For more information on processing claims, watch the "Claims Processing" videos.

You can print insurance claims on CMS 1500 forms to mail to insurance companies and you can export claims to print image files, ANSI files, and VSP Interface files to send electronically to insurance companies. You must follow the steps below to properly process printed and electronic insurance claims:

1. If this is the first time Third Party Processing has been used in OfficeMate and you are sending claims electronically, verify that the third-party receiver's information has been set up. For information on setting up third-party receiver information, go to [Maintaining Third-Party Receiver Information on page 457](#).
2. Select insurance claims. For more information on selecting claims, go to [Searching for Insurance Claims on page 458](#).
3. Correct errors in insurance claims. For more information on correcting errors, go to [Correcting Errors in Insurance Claims on page 459](#).
4. Record additional information on CMS 1500 forms. For more information on recording additional information, go to [Recording Additional Information on the CMS 1500 Form & ANSI File on page 462](#).
5. Print or export electronic insurance claims. For more information on exporting insurance claims, go to [Exporting Insurance Claims on page 474](#).
6. Preview and print insurance claims. For more information on previewing and printing insurance claims, go to [Printing Insurance Claims on page 479](#).

7. View insurance claim billing histories. For more information on viewing billing histories, go to [Using the Batch History on page 480](#).

NOTE Before you begin processing insurance claims, set up the following information in OfficeMate:

- Insurance information. For more information on setting up insurance carriers, go to [To modify or add appointment schedule resources on page 58](#). For more information on recording insurance information in a patient's record, go to [To record insurance information on page 215](#).
- Provider information. For more information on setting up provider information, go to [To modify or add provider information on page 51](#).
- Procedure codes. For more information on setting up procedure codes, go to [To add & modify procedure codes on page 137](#).
- Products and services. For more information on setting up products and services, go to [Recording Product Information on page 263](#).
- Electronic claims clearinghouse. Eyefinity recommends using VisionWeb or GatewayEDI to process your insurance claims. If you converted to OfficeMate from RLISYS, you can also use McKesson. For more information on VisionWeb and GatewayEDI, go to www.eyefinity.com/strategic-partners/CertifiedPartners.html.

In addition to setting up the information above, you must also have recorded fee slips with insurance carriers.

This section contains information on the following topics:

- [Opening the Third Party Processing Window, 457](#)
- [Maintaining Third-Party Receiver Information, 457](#)
- [Searching for Insurance Claims, 458](#)
- [Correcting Errors in Insurance Claims, 459](#)
- [Recording Additional Information on the CMS 1500 Form & ANSI File, 462](#)
- [Exporting Insurance Claims, 474](#)
- [Sending Claims to and Receiving Reports from McKesson, 476](#)
- [Printing Insurance Claims, 479](#)
- [Adjusting CMS 1500 Form Margins, 480](#)
- [Using the Batch History, 480](#)
- [Releasing & Closing Claims on Hold, 482](#)

Opening the Third Party Processing Window

Open the Third Party Processing window using one of the following methods:

- Click the **3rd Party** icon and select **CMS Third Party**.
- Click **Tasks** on the main window toolbar, select **Third Party Processing**, and then select **CMS Third Party**.

NOTE

The Third Party Processing options may be disabled in OfficeMate if the administrative location has selected the Centralized 3rd party billing check box in the Preferences window.

Maintaining Third-Party Receiver Information

1. Open the Third Party Processing window. For more information on opening this window, go to [Opening the Third Party Processing Window on page 457](#).
2. Click the **Maintenance & Options** icon.
3. Select a third-party receiver from the **Receiver** drop-down menu.
4. Click **Display**.

The receiver information displays in the lower half of the window.

5. Type **5010A** in the **Version Code-National** and **Version Code-Local** text boxes.

NOTE

5010 is the current standard for the ANSI electronic file format.

6. If you are sending test claims to the third-party receiver, type **TEST** in the **Test/Prod Indicator** field. If you have completed the test stage and are sending actual claim files, type **PROD** in the **Test/Prod Indicator** field.
7. Complete the **Receiver ID**, **Receiver Code**, and **Senders Code** by typing the information sent to you by your third-party receiver.
8. Ensure that the **Carriage Return** check box is selected, unless the receiver specifically instructs you to send files without carriage returns.

- Type the third-party receiver's Web address in the **Website** text box.

The screenshot shows a software window titled "Third Party Processing". At the top, there is a "Receivers" dropdown menu with "GatewayEDI - ANGI 837" selected, a "Display" button, and the URL "http://www.gatewayedi.com/". Below this is a "Carrier Maintenance" section with a sidebar containing icons for "Claims", "Create Claim File", "Batch History", and "Maintenance & Options". The main area contains the following fields: "Carrier Name" (GatewayEDI - ANGI 837), "Version Code-National" (5010A), "Version Code-Local" (5010A), "Test/Prod Indicator" (Test), "Receiver ID", "Receiver Code", "Senders Code", "Carriage Return" (checked), and "Website" (http://www.gatewayedi.com/). A "Save" button is located below the Website field, and a "Cancel" button is at the bottom right of the window.

- Click **Save**.

Searching for Insurance Claims

For more information on searching for insurance claims, watch the "Viewing Claims/Claims Search" video.

This section tells you how to search for claims.

- Open the Third Party Processing window. For more information on opening this window, go to [Opening the Third Party Processing Window on page 457](#).
- Select a format or clearinghouse from the **Receivers** drop-down menu.
- Select a location from the **Location** drop-down menu, as needed.
- Select an insurance carrier from the **Carrier** drop-down menu, as needed.
- Select an insurance plan from the **Plan** drop-down menu, as needed.
- Select the **Include Inactive Carriers** check box to include inactive insurance carriers in your search results, as needed.
- Select the **Include Inactive Plans** check box to include inactive insurance plans in your search results, as needed.
- If you are looking for claims for a particular patient, type your search criteria in the **Last Name**, **First Name**, **Fee Slip #**, and **Patient ID** text boxes, as needed.
- If you are looking for claims from a particular time period, select dates from the **Date of Service**, **Date of Fee Slip**, and **Date Submitted** fields, as needed.
- Select the status of the claims:
 - Select the **Open** radio button to find open claims. Select the **Errors** check box to find claims with errors. Select the **Ready** check box to find only those claims that do not have errors.
 - Select the **On Hold** radio button to find claims on hold. Select the **Pending Delivery** check box to display only those claims that are on hold until the final product is delivered to the patient. Select the **Other**

check box to display claims that are on hold for reasons other than product delivery.

NOTE Claims are held pending delivery only if the **Hold claim until product is delivered** option is selected on the Insurance Plan Claim Form tab. For information on changing the settings on the Claim Form tab, go to [To add & modify insurance plans on page 159](#).

- Select the **Billed** radio button to find claims that were billed. Select the **Elect Submit** check box to display only claims that were submitted electronically. Select the **Print Submit** check box to display only those claims that were submitted on paper.
 - Select the **Closed** radio button to find claims that have been paid or closed. Select the **6 mo.**, **1 yr.**, **2 yr.**, or **All** check boxes to limit the scope of your search.
11. Click **Search** to display the claims that match the search criteria.

The screenshot shows the 'Third Party Processing' application window. At the top, there are search filters for Receivers, Location, Carrier, Plan, Last Name, First Name, Fee Slip #, Patient ID, Date of Service, Date of Fee Slip, Date Submitted, and Status (Open, On Hold, Billed, Closed). There are also checkboxes for 'Include Inactive Carriers' and 'Include Inactive Plans'. A 'Search' button is visible.

The main area displays a table titled 'OPEN CLAIMS - 6' with the following columns: Carrier, Plan, Patient Name, Patient ID, Fee Slip #, Fee Slip Date, Charge, Status - Classification, and Location. The table contains six rows of data, with the second row highlighted in blue.

Carrier	Plan	Patient Name	Patient ID	Fee Slip #	Fee Slip Date	Charge	Status - Classification	Location
Medicare	Medicare	MITCHELL, HENRY	1	112	4002011	\$8.00	OPEN	Emers Discovery Stor
Medicare	Medicare	MITCHELL, HENRY	1	113	4002011	\$8.00	OPEN	Emers Discovery Stor
Medical Eye Services	Medical Eye Services	LOUIS, STEVEN	6	115	4002011	\$23.33	OPEN	Emers Discovery Stor
Medical Eye Services	Medical Eye Services	STANLEY, DOREEN	20	116	4002011	\$23.33	OPEN	Emers Discovery Stor
Medical Eye Services	Medical Eye Services	STANLEY, DOREEN	20	121	4002011	\$5.00	OPEN	Emers Discovery Stor
Eye Care Plan Of America	Eye Care Plan Of America	LANIERWOOD, BRUCE	124	124	4002011	\$71.44	OPEN	Emers Discovery Stor

Below the table, there is an 'Errors' section with the following text: 'Fee on Line Item is equal to zero - Fee Slip V2784', 'Fee on Line Item is equal to zero - Fee Slip V2704', and 'Sales Tax/Tax ID is BLANK - Location Maintenance'. At the bottom, there are buttons for 'Print Errors', 'Print List', 'Refresh All', and 'Cancel'.

Correcting Errors in Insurance Claims

For more information on correcting errors in insurance claims, watch the ["Correcting Errors"](#) video.

After you select ANSI insurance claims, you *must* correct any errors in the claims before you export them and file them electronically. Although correcting errors is not required for you to do before printing and mailing insurance claims and

creating print images, it is highly recommended that you do so. This section tells you how to correct errors in your insurance claims.

NOTE Some errors in insurance claims may be caused by using improper short dates. Ensure that your computer is using the MM/DD/YYYY short date format.

1. Open the Third Party Processing window. For more information on opening this window, go to [Opening the Third Party Processing Window on page 457](#).
2. Search for insurance claims. For more information on searching for insurance claims, go to [Searching for Insurance Claims on page 458](#).

NOTE To find only claims with errors, search for claims with an Open status and select the Errors check box. For information on setting your search options, go to [Searching for Insurance Claims on page 458](#).

3. Select a claim from the results list.

The claim errors are displayed in the Errors box that appears below the search results.

The screenshot shows the 'Third Party Processing' window. At the top, there are search filters for Receivers, Location, Carrier, Plan, Last Name, First Name, Fee Slip #, Patient ID, Date of Service, Date of Fee Slip, Date Submitted, and Status. Below the filters is a table titled 'OPEN CLAIMS - 6'. The table has columns for Carrier, Plan, Patient Name, Patient ID, Fee Slip #, Fee Slip Date, Charge, Status - Classification, Location, and Discovery Star. The table contains several rows of claim data. Below the table is an 'Errors' box with the following text:

```

Errors
Fee on Line Item is equal to zero - Fee Slip V0784
Fee on Line Item is equal to zero - Fee Slip Y2704
Sales Tax/Tax ID is BLANK - Location Maintenance
  
```

At the bottom of the window, there are buttons for 'Print Errors', 'Print List', 'Refresh All', and 'Cancel'. On the right side, there are buttons for 'Electronic', 'Print', 'Classification', 'On-Hold', 'Billed', 'Closed', 'Save', 'View Patient's Claim Updated', 'Fee Slip Updated', 'Claim', 'Fee Slip', 'Pat. Details', 'RX', 'Print CMS', 'Refresh', and 'View Auth.'.

4. Click **Print Errors** to print the list of errors for the selected claim, as needed.
5. Perform one or more of the following tasks to correct the claim errors:
 - Click **Fee Slip** to open the Fee Slip window and correct procedure or diagnosis code errors and add line item additional data on the fee slip. For more information on recording procedure and diagnosis codes on fee slips, go to [To record product & service information on page 152](#).
 - Click **Pat. Details** to open the Patient Demographic window and correct demographic and insurance errors on the patient's record. For more information on recording patient demographic information, go to [To record demographic information on page 208](#). For more information on

recording insurance information, go to [To record insurance information on page 215](#).

NOTE Ensure that the Last Name, First Name, Address, Sex, Date of Birth, Marital Status, and Emp. Status fields in the Patient Demographic window are correctly and completely recorded. Also, ensure that a provider is selected and recorded in the Fee Slip window.

- Click **Rx** to open the Eyewear Order, Soft Lens Order, or Hard Lens Order window and correct order errors. For more information on recording order information, go to [Ordering & Tracking Prescriptions on page 91](#).
- Click **View Auth** to open the Eligibility & Authorization window to view, add, and edit authorization information. Only users in store locations can add or edit authorizations.
- Select the **On-Hold** check box and click **Save** if you do not want to correct the errors on the insurance claim right now and you want to put the claim on hold. For information on releasing or closing claims on hold, go to [Releasing & Closing Claims on Hold on page 482](#).
- Select the **Billed** check box to indicate that this claim has been billed and click **Save**.

NOTE OfficeMate automatically selects the Billed check box when the claim is included in an electronic file. You will only manually select the Billed check box if the claim is individually printed or generated and submitted outside of OfficeMate.

- Select the **Closed** check box to indicate that the claim has been paid or that you no longer want to send or print the claim, and click **Save**.

NOTE OfficeMate automatically selects the Closed check box when the payment is entered for the claim. You should never have to manually select the Closed check box.

- Once you have corrected the information causing the errors, select an insurance claim or a group of claims and select **Refresh** or **Refresh All** to refresh the CMS 1500 form(s) and clear the errors.

NOTE

Clicking Refresh forces the CMS 1500 to, once again, collect information from the various parts of OfficeMate and overwrites any information that you added, modified, or deleted manually on the CMS 1500 form.

The screenshot shows the 'Third Party Processing' window. At the top, there are search filters for Receivers, Location, Carrier, Plan, Last Name, First Name, Fee Slip #, Patient ID, Date of Service, Date of Fee Slip, and Date Submitted. A 'Refresh All' button is highlighted in the bottom center of the window. The main area displays a table of 'OPEN CLAIMS - 6' with the following data:

Carrier	Plan	Patient Name	Patient ID	Fee Slip #	Fee Slip Date	Charge	Status - Classification	Location
Medicare	Medicare	MITCHELL, HENRY	1	112	4/20/2011	68.00	OPEN	Emers Discovery Star
Medicare	Medicare	MITCHELL, HENRY	1	113	4/20/2011	48.79	OPEN	Emers Discovery Star
Medical Eye Services	Medical Eye Services	STANLEY, DOREEN	20	115	4/20/2011	32.39	OPEN	Emers Discovery Star
Medical Eye Services	Medical Eye Services	STANLEY, DOREEN	20	118	4/20/2011	32.39	OPEN	Emers Discovery Star
Medical Eye Services	Medical Eye Services	STANLEY, DOREEN	20	121	4/20/2011	36.00	OPEN	Emers Discovery Star
Eye Care Plan Of America	Eye Care Plan Of America	UNDERWOOD, SHENE	124	124	4/21/2011	471.88	OPEN	Emers Discovery Star

Below the table, there is an 'Errors' section with the following text: 'Fee on Line Item is equal to zero - Fee Slip v2784', 'Fee on Line Item is equal to zero - Fee Slip v2704', and 'Sales Tax/Tax ID is BLANK - Location Maintenance'. At the bottom of the window, there are buttons for 'Print Errors', 'Print List', 'Refresh All', and 'Cancel'.

- If you want to record additional information on a CMS 1500 form, go to [Recording Additional Information on the CMS 1500 Form & ANSI File](#) on page 462; otherwise, go to [Printing Insurance Claims](#) on page 479 or [Exporting Insurance Claims](#) on page 474.

Recording Additional Information on the CMS 1500 Form & ANSI File

You can record and modify information directly on the CMS 1500 form. You can also record additional information in ANSI files. This section tells you how to record and modify information on the CMS 1500 form and add information to the ANSI file, including how

- To record additional information on the CMS 1500 form, 463
- To add additional information to the ANSI file, 472
- To reprocess individual claims, 474

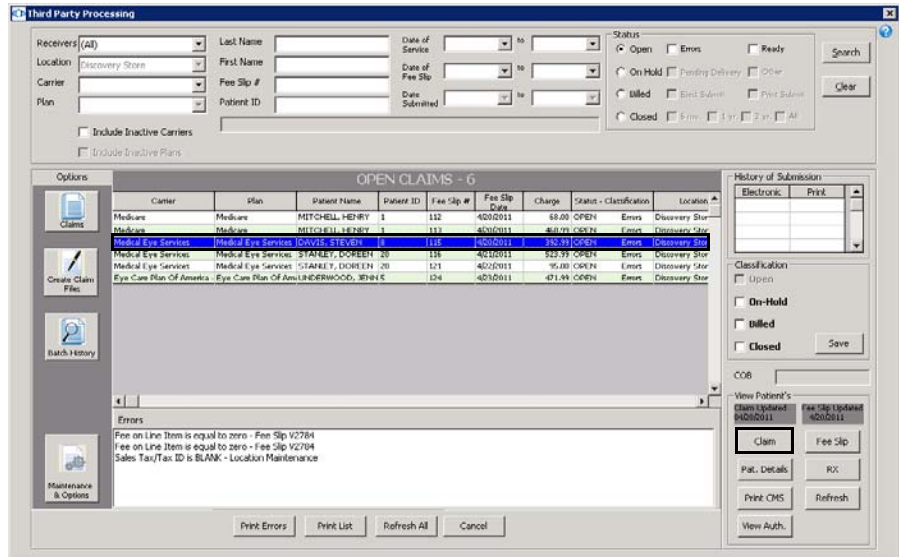
► **To record additional information on the CMS 1500 form**

NOTE

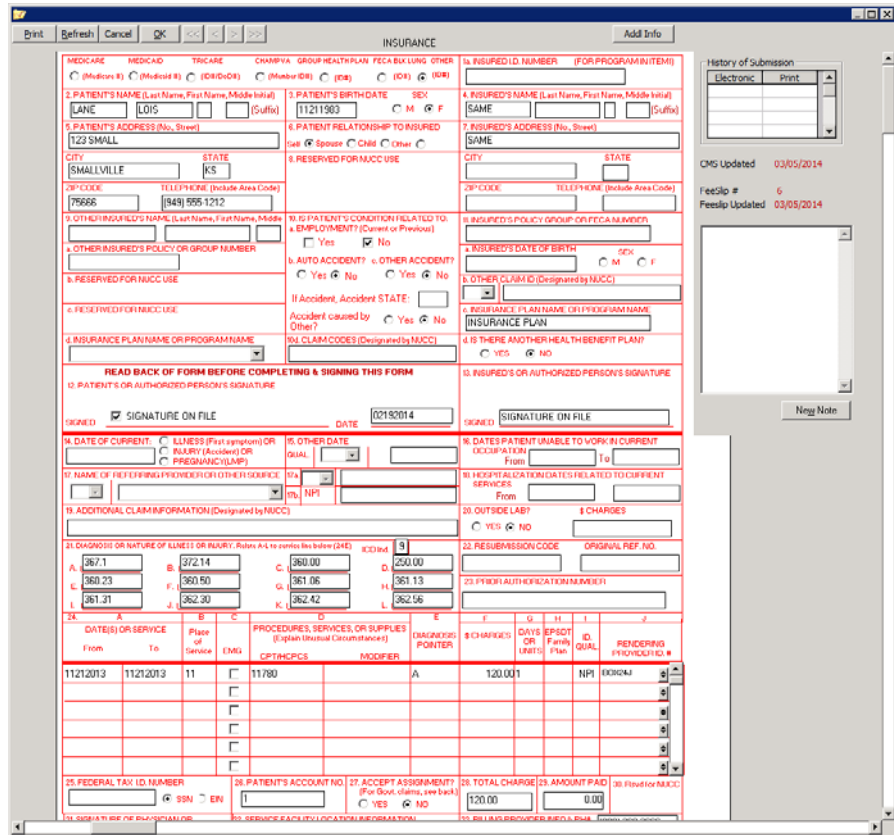
Before you record additional information on the CMS 1500 form, ensure that you have recorded all procedure codes, diagnosis codes, modifiers, service dates, and line item narrative information on the fee slip. If you record this information directly on the CMS 1500 form instead of on the fee slip and then you refresh the CMS 1500 form, all of the information will be deleted.

1. Open the Third Party Processing window. For more information on opening this window, go to [Opening the Third Party Processing Window on page 457](#).
2. Search for open or on-hold insurance claims. For more information on searching for insurance claims, go to [Searching for Insurance Claims on page 458](#).
3. Correct any errors in the insurance claims. For more information on correcting errors, go to [Correcting Errors in Insurance Claims on page 459](#).

- Select an insurance claim and click **Claim**.



The CMS 1500 form opens.



- Modify or add information to the CMS 1500 form, as needed.

NOTE

The following boxes on the CMS 1500 form import information from the corresponding OfficeMate fields. OfficeMate automatically populates the appropriate form fields based on the type of insurance.

- **Box 1: Setup > Insurance Setup > Insurance Carrier tab > Claim Form tab > Box 1 Insurance Type** drop-down menu
- **Box 1A: Patient Center window > Demographics button > Insurance tab > Insured ID (Box 1a)** text box
- **Box 2: Patient Center window > Demographics button > Last Name (Box 2) and First Name (Box 2)** text boxes
- **Box 3: Patient Center window > Demographics button > Sex** radio button and **Date of Birth** text box
- **Box 4: Patient Center window > Demographics button > Insurance tab > Insured Party Last Name and First Name** text boxes (if Other or Guarantor is selected as the insured party)
Paper claims for Medicare: Blank if the Insured Party and Patient are the same.
Paper claims for other insurances: "SAME" if the Insured Party and Patient are the same.
- **Box 5: Patient Center window > Demographics button > Address (Box 5), City (Box 5), State/ZIP (Box 5), and Home Ph # (Box 5)** text boxes
- **Box 6: Patient Center window > Demographics button > Insurance tab > Relationship to Insured (Box 6)** drop-down menu
- **Box 7: Patient Center window > Demographics button > Insurance tab > Insured Party Address, City, State, ZIP, and Home Ph** text boxes (if Other or Guarantor is selected as the insured party)
Paper claims for Medicare: Blank if the Insured Party and Patient are the same.
Paper claims for other insurances: "SAME" if the Insured Party and Patient are the same.
- **Box 8: Patient Center window > Demographics button > Marital Status (Box 8) and Emp. Status (Box 8)** drop-down menus
- **Box 9–9D: Patient Center window > Insurance tab > secondary insurance information**
Secondary insurance information only populates if the preference is set up: **Setup > Insurance Setup > Insurance Carrier tab > Claim Form tab > select the Yes radio button for 9d Populate with Secondary Ins**
- **Box 10:** Defaults to No. Edit directly on the CMS 1500 form.
- **Box 11: Patient Center window > Demographics button > Insurance tab > Policy Group (Box 11a)** text box

For a visual representation of how the CMS 1500 form is populated in OfficeMate, go to www.eyefinity.com/dam/eyefinity/documentation/OM/cms1500_Form_v11.pdf.

**NOTE,
CONT.**

- **Box 11A: Patient Center** window > **Demographics** button > **Insurance** tab > **Insured Party Sex (Box 11a)** radio button and **DOB (Box 11a)** text box (if Other or Guarantor is selected as the insured party)
Paper claims for Medicare: Blank if the Insured Party and Patient are the same.
Paper claims for other insurances: Box A populates if the Insured Party and the Patient are different.
- **Box 11B: Patient Center** window > **Demographics** button > **Insurance** tab > **Insured Party Employer (Box 11b)** drop-down menu (if Other or Guarantor is selected as the insured party)
Paper claims for Medicare: Blank if the Insured Party and Patient are the same.
Paper claims for other insurances: Box B populates if the Insured Party and the Patient are the same and if an employer is recorded.
- **Box 11C: Patient Center** window > **Demographics** button > **Insurance** tab > **Plan Name (Box 11c)** drop-down menu (if Other or Guarantor is selected as the insured party)
Paper claims for Medicare: Blank if the Insured Party and Patient are the same.
Paper claims for other insurances: Box C populates if the Insured Party and the Patient are different.
To maintain insurance plans: **Setup > Insurance Setup > Plan** tab
- **Box 11D:** The default is NO, but it is automatically changed to YES if there is another insurance carrier selected in box 9D.
- **Box 12: Patient Center** window > **Demographics** button > **Insurance** tab > **Signature On File** check box
- **Box 13: Patient Center** window > **Demographics** button > **Insurance** tab > **Signature On File** check box. If the guarantor is not a patient, NO SIGNATURE ON FILE will be displayed in box 13. You can edit this box if necessary.
- **Box 14, Box 15, & Box 16:** Edit directly on the CMS 1500 form.
- **Box 17: Patient Center** window > **Insurance** button > click **Add'l Info** and click the **Not Assigned** button in the **Referring Physician (Box 17)** box to select a referring provider
The referring provider only populates if the preference is set to Yes by for the insurance carrier: **Setup > Insurance Setup > Insurance Carrier** tab > **Claim Form** tab > **Box 17 Populate** radio button
Or, edit directly on the CMS 1500 form
To maintain referring providers: **Setup > Resource Setup > Referring Dr** tab

**NOTE,
CONT.**

- **Box 17A: Setup > Resource Setup > Referring Dr tab > Qualifier (Box 17a) and Other (Box 17a) text boxes** if the referring provider preference is set to Yes by for the insurance carrier: **Setup > Insurance Setup > Insurance Carrier tab > Claim Form tab > Box 17 Populate** radio button
Or, **Setup > Resource Setup > Provider tab > UPIN #** text box if the billing provider is set to Yes by for the insurance carrier: **Setup > Insurance Setup > Insurance Carrier tab > Claim Form tab > Box 17 Populate** radio button
Or, edit directly on the CMS 1500 form.
- **Box 17B: Setup > Resource Setup > Referring Dr tab > NPI Number (Box 17b)** text box
- **Box 18:** Edit directly on the CMS 1500 form.
- **Box 19: Fee Slip window > Line Add'l Data button > Note Reference** drop-down menu and **Item Narrative** text box.
- **Box 20:** Edit directly on the CMS 1500 form.
- **Box 21:** Diagnosis codes in the DIAG fields on the Fee Slip window
- **Box 22:** Edit directly on the CMS 1500 form if you are filing a corrected, replacement, or voided claim:
 - a. In the left text box, enter one of the following numbers: Corrected–6, Replacement–7, Voided–8.
 - b. In the right text box, enter a reference number if required, or else leave blank.
- **Box 23: Patient Center window > Demographics button > Insurance tab > Eligibility/Authorization button > Authorization ID** text box

CMS 1500 form boxes 24A–24J are divided horizontally to accommodate the submission of both the NPI number and another/proprietary identifier during the NPI transition and to accommodate the submission of supplemental information to support the billed service. The top area of the six service lines is shaded and is the location for reporting supplemental information; it is not intended to allow for the billing of 12 lines of service.

- **Box 24A: Fee Slip window > Date of Service**
Or, **Fee Slip window > Line Add'l Data button > Service Date (Box 24a)** drop-down menus

**NOTE,
CONT.**

- **Box 24B:** All Medicare jurisdiction type claims must have box 24b on the CMS 1500 populate with 12. In order to populate box 24b with 12 at the proper time, the place of service is determined in the following order:
 - a. Insurance plan level place of service (if entered in the Plan tab of the Insurance Setup window)
 - If 12 is entered, CMS 1500 boxes 32, 32a, and 32b are blank
 - If 11 is entered, no changes are made to boxes 32, 32a, or 32b
 - b. Product level place of service (if entered in the Products & Services window)
- **Box 24C: Products & Services** window > **Product** tab > **EMG** text box
- **Box 24D: Fee Slip** window > **CPT** field
Or, **Fee Slip** window > click **Line Add'l Data** > **CPT/HCPCS (Box 24d)** and **Modifier(s) (Box 24d)** drop-down menus
The CPT fields for services are extracted from the modifiers recorded on the Products & Services window: **Products & Services** window > **Products** Tab > **First Modifier** and **Second Modifier** drop-down menus
- **Box 24E: Fee Slip** window > **DIAG** drop-down menus
- **Box 24F: Setup > Insurance Setup > Plan** tab > **Claim Form** tab > **Box 24f Price Changes** drop-down menu
Displays fee slip fee, product cost, product fee, or third party reimbursement charges based on your selection from the Box 24f Price Charges drop-down menu. If you converted from OfficeMate Enterprise 1.x or OfficeMate 8.x or below to 9.x, the default amount displayed is the product fee; if your products and services do not have fees assigned to them, then \$0.00 appears in box 24F on the CMS 1500 form.
- **Box 24G: Fee Slip** window > **Qty** text fields
If you are required to report NDC units, click on the arrow on the right side of box 24J and type the appropriate qualifier in the **Box 24 Supplemental Information** text box (F2=International Unit; ML= Milliliter; GR=Gram; UN=Unit).
- **Box 24H: Products & Services** window > **Product** tab > **EPDST** text box
If there is a requirement for you to report a reason code for EPDST, click on the arrow on the right side of box 24J and select the appropriate reason code from the **EPDST Codes** drop-down menu (AV=Available; S2=Under Treatment; ST=New Service Requested; NU=Not Used; Y=Yes; N=No).

**NOTE,
CONT.**

- **Box 24I:** Setup > **Insurance Setup** > **Insurance Carrier** tab > **Claim Form** tab > **Box 1 Insurance Type** drop-down menu, if the type is different than what is already recorded in box 33B. Based on your selection from the Type drop-down menu, the following qualifiers will be populated in the shaded section of the box: Blue Cross–1A, Blue Shield–1B, Medicare–1C, Medicaid–1D, Champus–1H, Commercial–G2, Other–1G.

If required or needed, enter or modify information in box 24I by clicking on the arrow on the right side of box 24J and selecting a qualifier from the drop-down menu.

- **Box 24J:** Setup > **Resource Setup** > **Provider** tab > **NPI Number (Box 24j)** text box
The provider's NPI number appears in the unshaded section of the box only if it is different than the NPI number recorded in box 33A.

To record supplemental information, you must click on the arrow on the right side of box 24 on the CMS 1500. Type supplemental information in the **Box 24 Supplemental Information** text box if you are required to report information not already recorded. Follow payer instructions for using qualifiers; when reporting a service that does not have a qualifier, type two blank spaces before typing the information. Do not enter a space between the qualifier and the number/code/information. Do not enter hyphens or spaces within the number/code. To record more than one supplemental item, type the first item, three blank spaces, and then the next item.

If required or needed, enter or modify information in the shaded portion of box 24J by typing the rendering provider ID in the **Box 24J Rendering Provider ID** text box.

Any supplemental information that you record is populated in the shaded sections of boxes 24A–24G.

- **Box 25:** Setup > **Insurance Setup** > **Insurance Carrier** tab > **Claim Form** tab > **Box 25 Tax ID** drop-down menu
To maintain tax IDs: Setup > **Resource Setup** > **Provider** tab > **SSN Number (Box 25)** and **EIN Number (Box 25)** text boxes
Or, Setup > **Location Maintenance** > **Tax ID** text box

**NOTE,
CONT.**

- **Box 26: Patient Center > Patient ID** field
- **Box 27: Setup > Insurance Setup > Insurance Carrier** tab > **Claim Form** tab > **Box 27 Accept Assignment** radio button
- **Box 28: Fee Slip** window > **Total Charges** field
- **Box 29: Setup > Insurance Setup > Insurance Carrier** tab > **Claim Form** tab > **Box 29 Indicate Patient Payment on Claim** and **Box 29 Populate Patient's & Primary Insurance Payment** radio buttons
- **Box 30: Fee Slip** window > **Total Charges** field
- **Box 31: Setup > Resource Setup > Provider** tab > **Last Name** and **First Name** text boxes
And **Setup > Insurance Setup > Plan** tab > **Box 31 Source** drop-down menu
- **Box 32–32B: Setup > Insurance Setup > Insurance Carrier** tab > **Claim Form** tab > **Box 32 Print Address** radio button
Or, **Patient Center** window > **Demographics** button > **Insurance** tab > **Add'l Info** tab > CMS Box 32 text boxes and drop-down menus
To maintain location information: **Setup > Location Maintenance > Select** button > **Qualifier (32b)** drop-down menu and the **Facility ID (32b)** text box.
- **Box 33–33B: Setup > Insurance Setup > Plan** tab > **Claim Form** tab > **Box 33 Print Administration Address** radio button > **Box 33 Billing Entity** drop-down menu
To maintain billing provider information: **Setup > Resource Setup > Provider** tab > **Last Name (Box 33), First Name (Box 33), Middle Name (Box 33),** and **Phone # (Box 33)** text boxes and the **Business (Box 33)** drop-down menu
To maintain location information: **Setup > Location Maintenance > Select** button > **Billing Name (33)** and **NPI Num (33a)** text boxes.
- If the insurance type is *not* Blue Cross (1A), Blue Shield (1B), Medicare (1C), Medicaid (1D), Champus (1H), or Commercial (G2), Box 33B is populated with the UPIN #: **Setup > Resource Setup > Provider** tab > **UPIN #** text box.

6. If you are processing an ANSI insurance claim and the insurance carrier requires additional replacement information, supplemental information, care

dates, or a prior authorization number, click **Add Info** to open the CMS - Additional Information window and follow the instructions below:

- a. Select a replacement category and reason from the **Replacement information** drop-down menus.
- b. Select the document/report type, transmission code, and attachment control number from the **Claim Supplemental Information** drop-down menus.
- c. Select the appropriate **Assumed** and/or **Relinquished** check box and, if applicable, select or type dates in the date boxes.
- d. If you are processing a CLIA (Clinical Laboratory Improvement Amendment) insurance claim, select the **CLIA** radio button in the Prior Authorization (Box 23) box and type the CLIA number in the **Number** text box. This number will appear in box 23 on the CMS 1500 form and the X4 qualifier will be populated in the ANSI file in loop 2300.
- e. If you need to record a prior authorization (non-CLIA) number on the insurance claim, select the **Authorization Number** radio button in the Prior Authorization (Box 23) box and type the prior authorization number in the **Number** text box. This number will appear in box 23 on the CMS 1500 form and the G1 qualifier will be populated in the ANSI file in loop 2300.

The screenshot shows a dialog box titled "CMS - Additional Information". It is divided into four main sections:

- Replacement Information:** Contains three rows, each with a "Replacement Category" dropdown menu and a "Reason for replacement" dropdown menu.
- Claim Supplemental Information:** Contains three dropdown menus: "Document/Report Type", "Transmission Code", and "Attachment Control #".
- Assumed and Relinquished Care Dates:** Contains two checkboxes: "Assumed Date" and "Relinquished Date". Each checkbox is followed by a date selection dropdown menu.
- Prior Authorization (Box 23):** Contains three radio buttons: "CLIA", "Authorization Number", and "None". Below the radio buttons is a text box labeled "Number:".

At the bottom of the dialog are "OK" and "Cancel" buttons.

- f. Click **OK**.

- g. Click **New Note** and type any notes about the claim in the text box, as needed.

The screenshot shows a software interface for processing insurance claims. The main window displays a CMS 1500 form with various fields for patient and provider information. A 'New Note' button is highlighted in the bottom right corner of the form area. The form includes sections for patient demographics, insurance policy details, and provider information.

NOTE

Do *not* click **Refresh**. Clicking Refresh forces the CMS 1500 to, once again, collect information from the various parts of OfficeMate and overwrites any information that you added, modified, or deleted manually on the CMS 1500 form.

7. Click **Print** to print the CMS 1500 form, as needed.

NOTES

- Printing only creates a copy of the CMS 1500 form for your records, and does not export the claim or mark it as Billed.
- Print CMS 1500 forms using Single Laser Sheet Claim Forms. You can purchase CMS 1500 forms from Dependable Business Products at 800.747.7210.

8. Click **OK** to save and close the CMS 1500 form.
9. If you want to preview or print insurance claims go to [Printing Insurance Claims on page 479](#). If you want to create a batch file and export claims, go to [Exporting Insurance Claims on page 474](#).

► **To add additional information to the ANSI file**

If you are submitting an ANSI file to an insurance company and you want to include line item notes or special instructions in the file, follow the instructions below:

1. Open the Fee Slip window and find and select the patient's fee slip to which you want to add additional information. For more information on opening fee slips, go to [Creating & Opening Fee Slips on page 150](#).
2. Click on a line item and then click **Line Add'l Data**.
The Fee Slip Item Additional Data window opens.
3. To record insurance codes that justify overcharges or undercharges for an item, select modifiers in the **Modifier(s)** box. Use the scroll arrows on the

right side of the box to scroll through the entire list of modifiers; if you need to add additional modifiers to the list, go to [To add & modify procedure modifiers on page 141](#). You can select up to four modifiers per line item. These modifiers will appear in box 24D on the CMS 1500 form.

- To change the service dates for the item so that they are different than the original fee slip date, type or select dates in the **Service Date** text boxes. These dates will appear in box 24A on the CMS 1500 form.

NOTE

If you want to change the service dates for each of the line items on the fee slip and the CMS 1500 form, select a new date from the **Date of Service** drop-down menu in the Fee Slip window.

- To add your own comments to the item, such as a post operative note, select **Additional Information** from the **Note Reference** drop-down menu and type the comment text in the **Item Narrative** text box. This note will appear in box 19 on the CMS 1500 form.

NOTES

- Text typed in the Item Narrative text box will not appear on the CMS 1500 form, but will be submitted in the ANSI file. To include this information on the CMS 1500 form, type it in **Box 19** on the CMS form.
- You must select a Note Reference in order to include the note in the electronic claim file.
- Do not use any punctuation in the Item Narrative text box. You can use spaces, but do not use hard returns, commas, periods, dashes, etc.

The screenshot shows the 'Fee Slip Item Additional Data' dialog box. The fields are as follows:

- Product: 101 COACH ASTOR (679516719029)
- Discount Type: [Dropdown]
- Discount: 0.00 (Amount selected, Percent radio button is selected)
- Sales Tax %: 0.0000, 2nd Tax: 0.0000
- CPT/HCPCS: V2020 Designer Frame
- Modifier(s): 21 Prolonged Evaluation & Manageme, 22 Unusual Service, 24 Unrelated Eval & Mgt Svc by Same, 25 Sig, Sep Ident Eval & Mgt Same Dr
- Provider: Ruiz, M.D., Raymond
- Service Date: 09/21/2006 To 09/21/2006
- Note Reference: Additional Information
- Item Narrative: Additional Information, Goals, Rehab Potential/Discharge Plans, Payment, Third Party Organization Notes
- Do not print on patient statement: [Checked]
- Buttons: OK, Cancel

- Click **OK**.
- Close the Fee Slip window.
- Open the Third Party Processing window. For more information on opening this window, go to [Opening the Third Party Processing Window on page 457](#).

9. Search for the insurance claim to which you added additional information. For more information on searching for insurance claims, go to [Searching for Insurance Claims on page 458](#).
10. Click **Refresh** to ensure that the changes that you made are saved in the claim.
11. If you need to record additional information directly on the CMS 1500 form, go to [To record additional information on the CMS 1500 form on page 463](#).

► **To reprocess individual claims**

NOTE

For information on reprocessing an entire batch of claim files, go to [To reprocess insurance claim batches on page 481](#).

1. Search for insurance claims. For more information on searching for insurance claims, go to [Searching for Insurance Claims on page 458](#).
2. Select a claim from the results list.
3. Select the **Open** check box.
4. Click **Save**.
5. Correct any errors or update the claim information as needed. For information correcting claim errors, go to [Correcting Errors in Insurance Claims on page 459](#).

As long as the claim remains open with no errors, the claim information will be exported to the electronic claim batch file.

Exporting Insurance Claims

You can export claims to print image files, ANSI files, and VSP Interface files to send electronically to insurance companies. OfficeMate automatically sends the claim to the correct electronic file format based on the options selected in the Insurance Setup. For more information on maintaining the claim options in the Insurance Setup window, go to [Setting Up Insurance Carriers on page 149](#).

This section tells you how to export insurance claims to send to insurance companies.

1. Open the Third Party Processing window. For more information on opening this window, go to [Opening the Third Party Processing Window on page 457](#).
2. Search for insurance claims. For more information on searching insurance claims, go to [Searching for Insurance Claims on page 458](#).
3. Correct any errors in the insurance claims. For more information on correcting errors, go to [Correcting Errors in Insurance Claims on page 459](#).
4. View or add additional information to the CMS 1500 forms. For more information on adding information to a CMS 1500 form, go to [Recording Additional Information on the CMS 1500 Form & ANSI File on page 462](#).
5. Click **Create Claim Files**.
The Process Warning dialog box opens and warns you that processing claims can take a few minutes or more.
6. Click **Yes** on the Process Warning dialog box to continue.

7. Click **OK** on the **Print Image Created** window after the print image is created.
8. Click **Yes** on the **Do you want to move Claim records?** window to mark these claims as Billed.

OR

Click **No** to keep the claims marked Open.

NOTES

- Claim files are located in the OfficeMate\DATA\EMC folder (if you are a new user or were an OfficeMate Enterprise user who upgraded to OfficeMate 9.0 or above) or OMA32\DATA\EMC folder (if you were an OfficeMate user who upgraded to OfficeMate 9.0 or above).
- The print image file, PrintImg.txt, is located in the EMC folder. Send the PrintImg.txt file to your insurance carrier. A copy of the print image file is also located in the EMC folder and identified by the first two letters of the insurance carrier's name, the date, and the **.exp** extension.
- The electronic file (ANSIClaim.cnx, MKANSIClaim.cnx, or GWANSIClaim.cnx) is located in the EMC folder. Send the ANSIClaim.cnx or GWANSIClaim.cnx file to your insurance carrier. A copy of the ANSI file is also located in the EMC folder. A copy of the ANSI file is identified by the date and the **.ae** extension. A copy of the GatewayEDI ANSI file is identified by the date and the **.ge** extension.
- If you have multiple users creating insurance claim batch files, or if you otherwise suspect that some batch claims are not being sent to your clearinghouse, send the .ge files in the EMC folder that correspond to the date(s) the batches were created. The .ge file names start with the creation date in the MMDDYY format. For example, if you want to send claims that were batched on July 16, 2010, you would upload all of the files in the EMC folder that have names that start with "071610" and end with ".ge". Send the .ge files rather than sending the .cnx file.

9. Follow the instructions provided by your clearinghouse to transmit or upload the claim files.

OR

If you are using the McKesson clearinghouse, you can send your claim files directly from OfficeMate at this time. For more information about sending files to McKesson, go to [Using the Batch History on page 480](#).

10. To view the billing history of an insurance claim, go to [Using the Batch History on page 480](#).

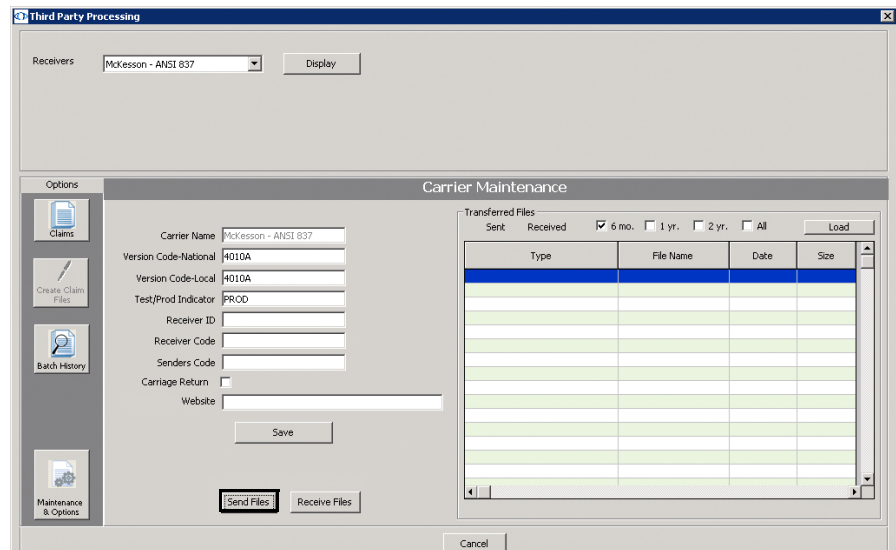
Sending Claims to and Receiving Reports from McKesson

OfficeMate allows you to send claims directly to and receive files from McKesson without having to go to the McKesson website. This section tells you how to send claims and receive reports, including how

- [To send insurance claims to McKesson, 476](#)
- [To receive insurance claim reports from McKesson, 477](#)
- [To view McKesson transferred files, 478](#)

► To send insurance claims to McKesson

1. Open the Third Party Processing window. For more information on opening this window, go to [Opening the Third Party Processing Window on page 457](#).
 2. Search for insurance claims. For more information on searching insurance claims, go to [Searching for Insurance Claims on page 458](#).
 3. Correct any errors in the insurance claims. For more information on correcting errors, go to [Correcting Errors in Insurance Claims on page 459](#).
 4. View or add additional information to the CMS 1500 forms. For more information on adding information to a CMS 1500 form, go to [Recording Additional Information on the CMS 1500 Form & ANSI File on page 462](#).
 5. Export the insurance claims files. For more information on exporting insurance claim files, go to [Exporting Insurance Claims on page 474](#)
 6. Click the **Maintenance & Options** icon.
 7. Select **McKesson - ANSI 837** from the Receiver drop-down menu.
 8. Click **Display**.
- The receiver information displays in the lower half of the window.
9. Click **Send Files** to transmit your McKesson claim files.



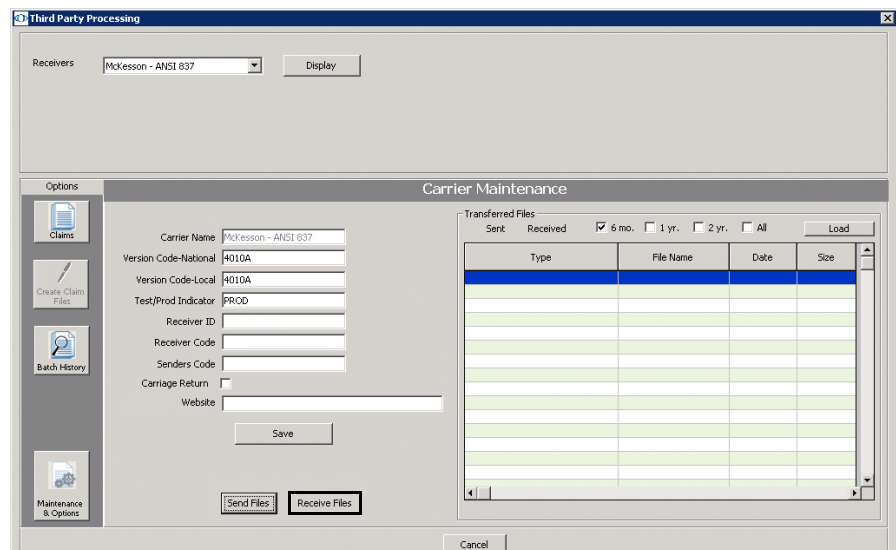
A command prompt window and a McKesson Transfer window open while the files are being sent to McKesson. After the files are sent, the File Transfer window opens.

10. Click **OK**.
11. Go to [To receive insurance claim reports from McKesson on page 477](#) to receive insurance claim reports from McKesson. Go to [To view McKesson transferred files on page 478](#) to view the ANSI files transferred to McKesson and the insurance claim reports you received from McKesson.

► **To receive insurance claim reports from McKesson**

NOTE Wait at least one day after sending insurance claims to McKesson to receive insurance claim reports.

1. Open the Third Party Processing window. For more information on opening this window, go to [Opening the Third Party Processing Window on page 457](#).
2. Click the **Maintenance & Options** icon.
3. Select **McKesson - ANSI 837** from the Receiver drop-down menu.
4. Click **Display**.
The receiver information displays in the lower half of the window.
5. Click **Receive Files** to download your McKesson report files.



A command prompt window and a McKesson Transfer window open while the files are being received from McKesson. After the files are received, the File Transfer window opens.

6. Click **OK**.
7. Go to [To view McKesson transferred files on page 478](#) to view the reports you received from McKesson.

► **To view McKesson transferred files**

If you send insurance claims to McKesson and receive insurance claim reports from McKesson, you can view the sent and received files by following the instructions below:

1. Open the Third Party Processing window. For more information on opening this window, go to [Opening the Third Party Processing Window on page 457](#).
2. Click the **Maintenance & Options** icon.
3. Select **McKesson - ANSI 837** from the Receiver drop-down menu.
4. Click **Display**.
The receiver information displays in the lower half of the window.
5. Click the **Sent** radio button to view claims files uploaded to McKesson
OR
Click the **Received** radio button to view reports downloaded from McKesson.
6. Select the time period you want to display from the **6 mo.**, **1 yr.**, **2 yr.**, or **All** check boxes.
7. Click **Load**.

A list of available claims or reports displays in the table.

The screenshot shows the 'Third Party Processing' window. The 'Receivers' dropdown is set to 'McKesson - ANSI 837'. The 'Carrier Maintenance' section is active, showing fields for Carrier Name, Version Code-National, Version Code-Local, Test/Prod Indicator, Receiver ID, Receiver Code, Senders Code, Carriage Return, and Website. The 'Transferred Files' table is empty, and the '6 mo.' checkbox is selected.

NOTE

The insurance claim report types and associated filenames are listed below. For more detailed information on these reports, go to <http://www.officemate.net/omkb/article.aspx?id=11244>.

- **Claims Acknowledge Report:** Filename begins with "CA"
- **Claims Acknowledge Report:** Filename begins with "UA"
- **Exclusion Claims Report:** Filename begins with "UE"
- **Exclusions Claims Report:** Filename begins with "EC"
- **Font-End 277 Claim Status Report:** Filename begins with "XP"
- **Front-End 277 Claim Status Rejection Report:** Filename begins with "XJ"
- **Front-End Level I, McKesson 997 Report:** Filename begins with "XA"
- **McKesson Acknowledgement Report:** Filename is "REPORT"
- **McKesson Status of Transfer Report:** Filename extension is ".00"
- **Payor Reports:** Filename begins with "SR"
- **Recreate Report:** Filename begins with "FX"

8. Double-click a file or report to open the **View File Data** window and view and print the claim or report.

Printing Insurance Claims

For more information on printing insurance claims, watch the "[Printing Claims/Maintenance & Options](#)" video.

1. Open the Third Party Processing window. For more information on opening this window, go to [Opening the Third Party Processing Window on page 457](#).
2. Search for insurance claims. For more information on searching for insurance claims, go to [Searching for Insurance Claims on page 458](#).
3. Correct any errors in the insurance claims. For more information on correcting errors, go to [Correcting Errors in Insurance Claims on page 459](#).
4. View or add additional information to the CMS 1500 forms, as needed. For more information on adding information to a CMS 1500 form, go to [Recording Additional Information on the CMS 1500 Form & ANSI File on page 462](#).
5. Click **Print CMS**.
6. If you want to create a batch file and export claims electronically, go to [Exporting Insurance Claims on page 474](#).

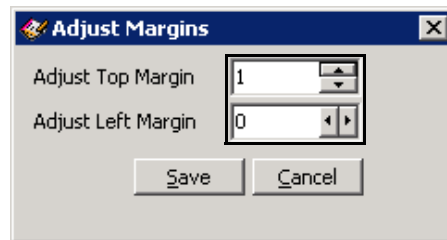
NOTE

To print multiple claims for a specific insurance carrier, the administrative location must designate the E-Claims Processor as **Print to Paper** in the Insurance Billing Initial Setup window. For more information, go to [To add & modify insurance carriers on page 150](#).

7. to [To record additional information on the CMS 1500 form on page 463](#).

Adjusting CMS 1500 Form Margins

1. Open the Third Party Processing window. For more information on opening this window, go to [Opening the Third Party Processing Window on page 457](#).
2. Click the **Maintenance & Options** icon.
3. From the **Receivers** drop-down menu, select **Print to Paper**.
4. Click **Display**.
5. Click **CMS 1500 Margins**.
The Adjust Margins window opens.
6. Type or use the arrows to adjust the top and left margins.



7. Click **Save**.

Using the Batch History

Use the batch history to view the batches of claims submitted, view batch details, and reopen claims within the batch. For information on searching for individual claims, go to [Searching for Insurance Claims on page 458](#). This section tells you how to use the batch history function, including how

- [To view insurance claim histories, 480](#)
- [To reprocess insurance claim batches, 481](#)

► To view insurance claim histories

1. Open the Third Party Processing window. For more information on opening this window, go to [Opening the Third Party Processing Window on page 457](#).
2. Click the **Batch History** icon.
3. Select a location from the **Location** drop-down menu, as needed.
4. Select an electronic receiver from the **Receivers** drop-down menu.
5. Type the beginning and ending dates in the **Date Submitted** fields.
6. Click **Search Batch History**.
Claim batches matching your search criteria are displayed.
7. Click the **Expand** radio button to display the individual claims within the batches, or click the **Collapse** radio button to hide the individual claims.
8. Click the **+** (plus) sign next to the date that you want to view.

- Select a batch from the list and click **Batch Detail**.

Carrier	Patient Name	Patient ID	Fee Slip#	Fee Slip Date	Status - Classification	Location
Aetna	BUSTER, COLIN	9	94	04/16/2009	Billed Elect Submit	AW Store
Aetna	BUSTER, COLIN	9	19	03/06/2009	Billed Elect Submit	AW Store
Aetna	BUSTER, COLIN	9	11	02/24/2009	Billed Elect Submit	AW Store

The Batch Detail window opens and displays information about the batch of claims.

- To view more details about the claim, click **View Data** to view the data file that was sent to the receiver.

OR

Click **View List** to view and print a list of claims and charge amounts.

Group Code	000010	
Transmission Date	04/16/2009	
Insurance Name	Aetna	
Total Batches	1	<input type="button" value="View Data"/>
Total Claims	3	<input type="button" value="View List"/>
Total Charges	367.00	
Data Filename	04160999990006000071.ae	
List Filename	04160999990006000071.al	
Template Name	ANSICOMP	
Status	ANSI file created	

► To reprocess insurance claim batches

NOTE For information on reprocessing individual claims, go to [To reprocess individual claims on page 474](#).

- Open the Third Party Processing window. For more information on opening this window, go to [Opening the Third Party Processing Window on page 457](#).
- Click the **Batch History** icon.

3. Select a location from the **Location** drop-down menu, as needed.
4. Select an electronic receiver from the **Receivers** drop-down menu.
5. Type the beginning and ending dates in the **Date Submitted** fields.
6. Click **Search Batch History**.
Claim batches matching your search criteria are displayed.
7. Click the **Expand** radio button to display the individual claims within the batches, or click the **Collapse** radio button to hide the individual claims.
8. Click the **+** (plus) sign next to the date that you want to view.
9. Select a batch from the list and click **Re-Open**.

Third Party Processing

Location: (All) Search Batch History

Receivers: AHST 837 Format

Date Submitted: to Expand Collapse

Options

Batch History

Batch History						
Batch						
Carrier	Patient Name	Patient ID	Fee Slip#	Fee Slip Date	Status - Classification	Location
Aetna	BUSTER, COLIN	9	54	04/16/2009	Billed Elect Submit	AV Store
Aetna	BUSTER, COLIN	9	19	03/06/2009	Billed Elect Submit	AV Store
Aetna	BUSTER, COLIN	9	11	02/24/2009	Billed Elect Submit	AV Store

Batch History

- + 04/16/2009 13:50 Aetna
- + 04/09/2009 10:17 Aetna
- + 04/08/2009 13:41 Aetna
- + 03/19/2009 09:24 Aetna
- + 03/19/2009 09:01 Aetna
- + 03/19/2009 09:00 Aetna

Batch Detail Re-Open Cancel

10. Click **Claims** and search for open claims.
The claims in the batch that you reopened appear in the list of open claims.
11. Correct any errors or update the claim information as needed. For information correcting claim errors, go to [Correcting Errors in Insurance Claims on page 459](#).

As long as the claims remain open with no errors, the claim information will be exported to the electronic claim batch file.

Releasing & Closing Claims on Hold

This section tells you how to release and close claims on hold, including how to

- [To release claims on hold, 482](#)
- [To close claims on hold, 483](#)

► To release claims on hold

1. Open the Third Party Processing window. For more information on opening this window, go to [Opening the Third Party Processing Window on page 457](#).
2. Search for insurance claims on hold. For more information on searching for insurance claims, go to [Searching for Insurance Claims on page 458](#).

3. Select a claim from the results list.

NOTE Press and hold the **Ctrl** or **Shift** key to select multiple claims.

4. Select the **Open** check box.
5. Click **Save**.

Carrier	Plan	Patient Name	Patient ID	Fee Slip #	Fee Slip Date	Charge	Status - Classification	Location
Aetna	Aetna-Simple	BUSTER, COLIN	3	11	2/24/2009	227.00	On Hold Other	AV Store
Aetna	Aetna-Simple	BLOOM, EUGENE	8	13	4/23/2009	15.50	On Hold Other	Newport Beach
VSP	Protac Safety	TESTING, PROTECOA	41	94	4/24/2009	205.40	On Hold Other	VSP-Protac
VSP	Protac Safety	TESTING, PROTECOA	44	104	4/24/2009	190.00	On Hold Other	VSP-Protac
McKesson	McKesson Plan	NON, VSP	50	105	4/24/2009	214.40	On Hold Other	VSP-Protac

6. Correct any errors or update the claim information as needed. For information correcting claim errors, go to [Correcting Errors in Insurance Claims on page 459](#).

As long as the claim remains open with no errors, the claim information will be exported to the electronic claim batch file.

► To close claims on hold

1. Open the Third Party Processing window. For more information on opening this window, go to [Opening the Third Party Processing Window on page 457](#).
2. Search for insurance claims on hold. For more information on searching for insurance claims, go to [Searching for Insurance Claims on page 458](#).
3. Select a claim from the results list.

NOTE Press and hold the **Ctrl** or **Shift** key to select multiple claims.

4. Select the **Closed** check box.

5. Click **Save**.

Carrier	Plan	Patient Name	Patient ID	Fee Slip #	Fee Slip Date	Charge	Status - Classification	Location
Aetna	Aetna-Simpl	BUSTER, COLIN	3	11	2/24/2009	227.00	On Hold Other	AV Store
Aetna	Aetna-Simpl	BLOOM, JESSICA	8	63	4/24/2009	123.00	On Hold Other	Harvard St
VSP	Protect Safety	TESTING, PROTECA 41	94	4/24/2009	388.40	On Hold Other	VSP-Protect	
VSP	Protect Safety	TESTING, PROTECA 44	104	4/24/2009	190.00	On Hold Other	VSP-Protect	
McKesson	McKesson Plan	NON, VSP	50	105	4/24/2009	214.40	On Hold Other	VSP-Protect

Processing UB-04 Claims

For more information on processing claims, watch the "Claims Processing" videos.

The UB-04 claim form is used to submit claims for surgical procedures to insurance carriers. You can print UB-04 claims or export the claims to print image files to send electronically to insurance companies. OfficeMate automatically generates the UB-04 form for fee slips that meet the following criteria:

- Contains a procedure code designated as a UB-04 billing code in the Customization window For more information on designating UB-04 billing codes, go to [To add & modify procedure codes on page 137](#).
- The "UB04 not applicable. Use CMS 1500 only" radio button on the Claim Form tab (Insurance Carrier tab) on the Insurance Billing Initial Setup window should *not* be selected for the insurance carrier. For more information on the "UB04 not applicable. Use CMS 1500 only" radio button, go to [To add & modify insurance carriers on page 150](#).

NOTE

Your administrative location is responsible for ensuring the proper procedure codes are designated as UB-04 procedure codes and insurance companies are set to accept UB-04 claim forms.

You must follow the steps below to properly process printed and electronic insurance claims:

1. Select insurance claims. For more information on selecting claims, go to [Selecting UB-04 Claims on page 486](#).
2. Correct errors in insurance claims. For more information on correcting errors, go to [Correcting Errors in UB-04 Claims on page 487](#).
3. Record additional information on CMS 1500 forms. For more information on recording additional information, go to [Recording Additional Information on the UB-04 Form on page 489](#).
4. Print or export electronic insurance claims. For more information on exporting insurance claims, go to [Exporting UB-04 Claims on page 493](#).

5. Preview and print insurance claims. For more information on previewing and printing insurance claims, go to [Printing UB-04 Claims on page 494](#).
6. View insurance claim billing histories. For more information on viewing billing histories, go to [Using the UB-04 Billing History on page 495](#).

NOTE

Before you begin processing insurance claims, set up the following information in OfficeMate:

- Insurance information. For more information on setting up insurance carriers, go to [To modify or add appointment schedule resources on page 58](#). For more information on recording insurance information in a patient's record, go to [To record insurance information on page 215](#).
- Provider information. For more information on setting up provider information, go to [To modify or add provider information on page 51](#).
- Procedure codes. For more information on setting up procedure codes, go to [To add & modify procedure codes on page 137](#).
- Products and services. For more information on setting up products and services, go to [Recording Product Information on page 263](#).

In addition to setting up the information above, you must also have recorded fee slips with insurance carriers.

This section contains information on the following topics:

- [Opening the UB-04 Claims Window, 485](#)
- [Selecting UB-04 Claims, 486](#)
- [Correcting Errors in UB-04 Claims, 487](#)
- [Recording Additional Information on the UB-04 Form, 489](#)
- [Exporting UB-04 Claims, 493](#)
- [Printing UB-04 Claims, 494](#)
- [Using the UB-04 Billing History, 495](#)
- [Reopening & Closing UB-04 Claims on Hold, 497](#)

Opening the UB-04 Claims Window

Open the UB04 Claims window using one of the following methods:

- Click the **3rd Party** icon and select **UB04 Third Party**.
- Click **Tasks** on the main window toolbar, select **Third Party Processing**, and then select **UB04 Third Party**.

NOTE

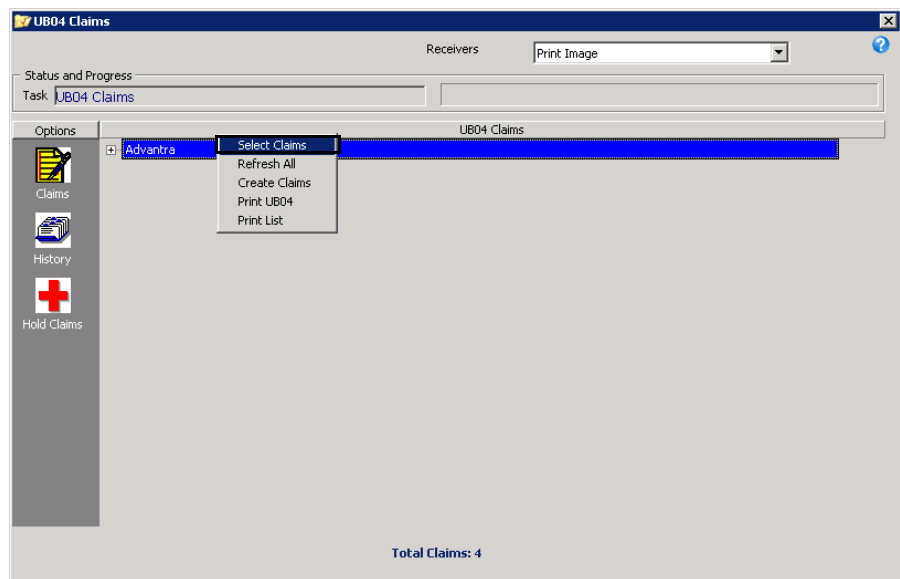
The Third Party Processing options may be disabled in OfficeMate if the administrative location has selected the Centralized 3rd party billing check box in the Preferences window.

Selecting UB-04 Claims

This section tells you how to select claims that you have not already processed.

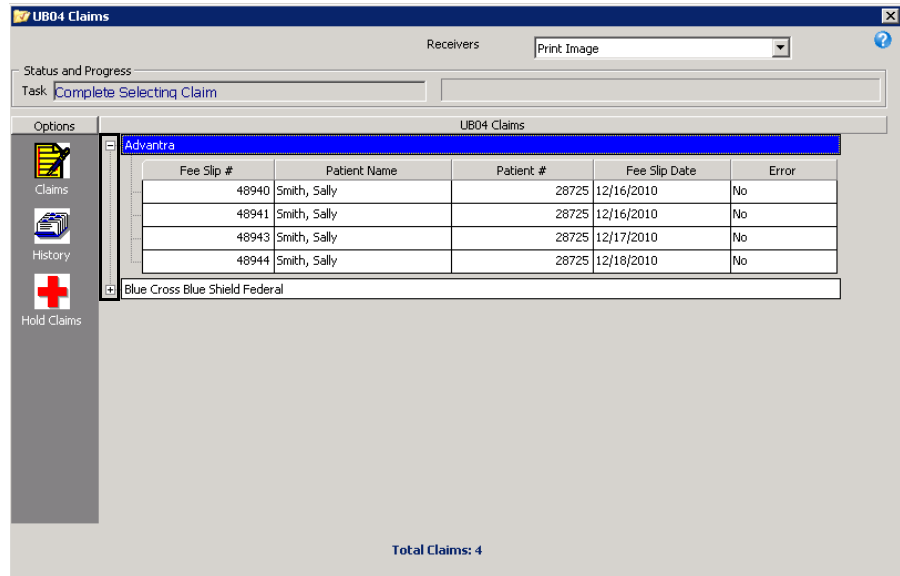
1. Open the UB04 Claims window. For more information on opening this window, go to [Opening the UB-04 Claims Window on page 485](#).
2. Select a third-party receiver from the **Receiver** drop-down menu, as needed.
3. Click the **Claims** icon.
4. Left-click and then right-click on the insurance carrier and select **Select Claims**.

The Process Warning dialog box opens and warns you that processing claims can take a few minutes or more.



5. Click **Yes** on the Process Warning dialog box to continue selecting insurance claims.
The UB-04 insurance claims are selected and displayed on the right side of the window.
6. If you want to print a list of open insurance claims, right-click on an insurance carrier, select **Print List**, and then click **Print** on the View File Data window.

- If you want to check for any errors, click the + (plus) sign to the left of the insurance carrier to view the individual claims. The word Yes appears in the Error column if OfficeMate detects an error in a claim.



- If the insurance claims have errors, go to [Correcting Errors in UB-04 Claims on page 487](#). If the insurance claims do not have any errors, go to [Recording Additional Information on the UB-04 Form on page 489](#), [Printing UB-04 Claims on page 494](#), or [Exporting UB-04 Claims on page 493](#).

Correcting Errors in UB-04 Claims

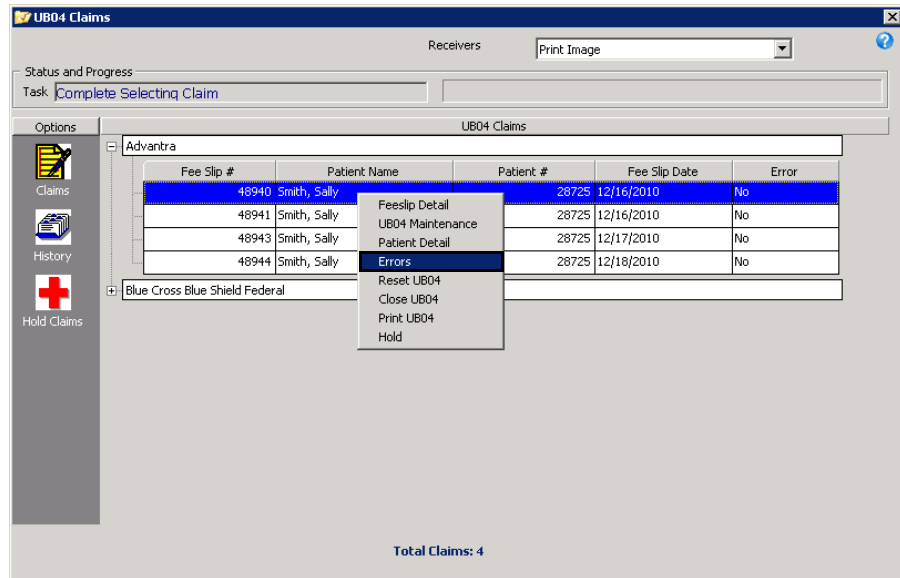
After you select insurance claims, you *must* correct any errors in the claims before you export them and file them electronically. Although correcting errors is not required for you to do before printing and mailing insurance claims and creating print images, it is highly recommended that you do so. This section tells you how to correct errors in your insurance claims.

NOTE

Some errors in insurance claims may be caused by using improper short dates. Ensure that your computer is using the MM/DD/YYYY short date format.

- Select the UB-04 claims. For more information on selecting insurance claims, go to [Selecting UB-04 Claims on page 486](#).
- If you want to check for any errors, click the + (plus) sign to the left of the insurance carrier to view the individual claims. The word Yes appears in the Error column if OfficeMate detects an error in a claim.

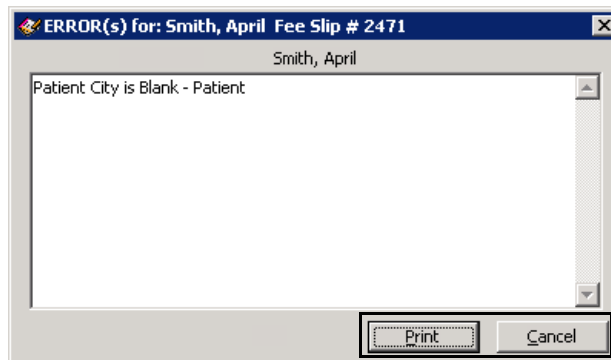
3. Right-click a UB-04 claim with an error and select **Errors**.



The Error(s) window opens.

4. View the list of errors and then click **Cancel** to close the Error(s) window.

NOTE Click **Print** to print the list of errors.



5. Right-click an insurance claim with errors and select one or more of the following options:
- **Fee Slip Detail** to open the Fee Slip window and correct procedure or diagnosis code errors and add line item additional data on the fee slip. For more information on recording procedure and diagnosis codes on fee slips, go to [To record product & service information on page 152](#).
 - **Patient Detail** to open the Patient Demographic window and correct demographic and insurance errors on the patient's record. For more information on recording patient demographic information, go to [To record demographic information on page 208](#). For more information on

recording insurance information, go to [To record insurance information on page 215](#).

NOTE Ensure that the Last Name, First Name, Address, Sex, Date of Birth, Marital Status, and Emp. Status fields in the Patient Demographic window are correctly and completely recorded. Also, ensure that a provider is selected and recorded in the Fee Slip window.

- **Hold** if you do not want to correct the errors on the insurance claim right now and you want to put the claim on hold. For information on releasing or closing claims on hold, go to [Reopening & Closing UB-04 Claims on Hold on page 497](#).
 - **Close UB04** to permanently remove the insurance claim from processing.
6. Right-click an insurance claim or a group of claims and select **Reset UB04** to refresh the UB04 form(s) and clear the errors.

NOTE Clicking Reset forces the UB-04 to, once again, collect information from the various parts of OfficeMate and overwrites any information that you added, modified, or deleted manually on the UB-04 form.

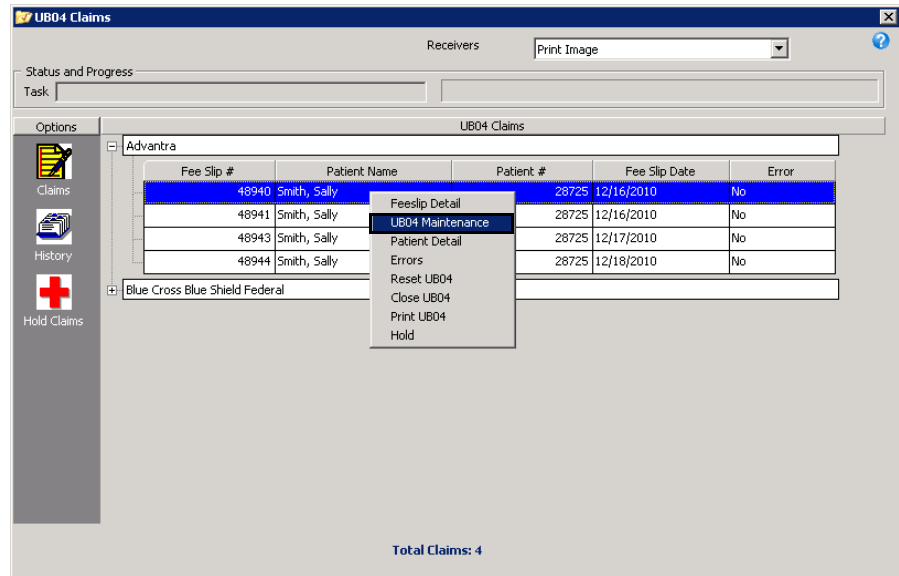
7. If you want to record additional information on a CMS 1500 form, go to [Recording Additional Information on the UB-04 Form on page 489](#); otherwise, go to [Printing UB-04 Claims on page 494](#) or [Exporting UB-04 Claims on page 493](#).

Recording Additional Information on the UB-04 Form

You can record and modify information directly on the UB-04 form. This section tells you how to record and modify information on the UB-04 form.

1. Select the UB-04 claims. For more information on selecting insurance claims, go to [Selecting UB-04 Claims on page 486](#).
2. Correct any errors in the UB-04 claims. For more information on correcting errors, go to [Correcting Errors in UB-04 Claims on page 487](#).

- Left-click and then right-click on an insurance claim and select **UB04 Maintenance**.



The UB-04 form opens.

- Modify or add information to the UB-04 form.

NOTE

The following boxes on the UB-04 form import information from the corresponding OfficeMate fields. OfficeMate automatically populates the appropriate form fields based on the type of insurance.

- **Box 1:** Administrative location address from the Business Names window when centralized third-party processing turned on. Location address from the Location Maintenance window when centralized third-party processing turned off.
- **Box 2:** Blank.
- **Box 3a:** Patient # from the Patient Demographics window. This Number is generated by OfficeMate.
- **Box 3b:** A 20-digit number that identifies the patient and fee slip. The first 10 digits display the Patient # from the Patient Demographics window padded with zeroes, and the last 10 digits display the Fee Slip # from the Fee Slip window, also padded with zeroes.
- **Box 4:** Always 0831.
- **Box 5:** Tax ID from the Location Maintenance window when centralized third-party processing turned on. Location Tax ID from the Location Maintenance window when centralized third-party processing turned off.
- **Box 6:** Fee slip date.
- **Box 7:** Blank.
- **Box 8a:** ID type selected by the UB04 Form Box 8a radio button in the Plan tab of the Insurance Billing Initial Setup window.
- **Box 8b:** Last Name and First Name fields on the Patient Demographics window.
- **Box 9a:** First Address field on the Patient Demographics window.
- **Box 9b:** City field on the Patient Demographics window.
- **Box 9c:** State field on the Patient Demographics window.
- **Box 9d:** ZIP field on the Patient Demographics window.
- **Box 9e:** Blank.
- **Box 10:** Date Of Birth field on the Patient Demographics window.
- **Box 11:** Sex radio button on the Patient Demographics window.
- **Boxes 12–37:** Blank, but you can edit these boxes.
- **Box 38:** Name, Address 1, Address 2, City, State, and ZIP Code fields on the Insurance Carrier tab of the Insurance Billing Initial Setup window.
- **Boxes 39–41:** Blank, but you can edit these boxes.

**NOTE,
CONT.**

- **Box 42:** 0490, unless you record a revenue code for the procedure code in the Third Party Setup window.
- **Box 43:** Print on Fee Slip field on the Products & Services window for the product billed on the fee slip.
- **Box 44:** CPT/HCPCS drop-down menu the Products & Services window for the product billed on the fee slip.
- **Box 45:** Fee slip date. Box 46, Line 23 is the date the UB-04 was created.
- **Box 46:** Qty field on the fee slip for the line item.
- **Box 47:** Fee field on the fee slip for the line item. Box 47, Line 23 is the total of Lines 1–22.
- **Box 48:** Blank, but you can edit this box.
- **Box 49:** Blank.
- **Box 50 (A–C):** Names of the primary, secondary, and tertiary insurance companies assigned on the Patient Demographics window. Lines B and C are blank if no insurance is assigned.
- **Box 51(A–C):** Destination ID field on the Insurance tab of the Business Names window for the primary, secondary, and tertiary insurances assigned to the patient.
- **Box 52(A–C):** Y or N based on the Release Information? check box on the Insurance tab of the Patient Demographics window for the primary, secondary, and tertiary insurances assigned to the patient.
- **Box 53(A–C):** Y or N based on the Accept Assign radio button on the Insurance tab of the Business Names window for primary insurance assigned to the patient.
- **Box 54(A–C):** Blank, but you can edit these boxes.
- **Box 55(A–C):** Blank, but you can edit these boxes.
- **Box 56:** Administrative location NPI from the Location Maintenance window when centralized third-party processing is turned on. Location NPI Number from the Location Maintenance window when centralized third-party processing is turned off.
- **Box 57(A–C):** Blank, but you can edit these boxes.
- **Box 58(A–C):** Patient name, guarantor name, or other name from the Patient Demographics window.
- **Box 59(A–C):** Relationship to Patient drop-down menu on the Insurance tab of the Patient Demographics window.
- **Box 60:** Insured ID field on the Insurance tab of the Patient Demographics window.
- **Box 61:** Plan Name drop-down on the Insurance tab of the Patient Demographics window.

**NOTE,
CONT.**

- **Box 62:** Policy Group No. field Insured ID field on the Insurance tab of the Patient Demographics window.
- **Boxes 63–64:** Blank, but you can edit these boxes.
- **Box 65:** Blank, but you can edit this box.
- **Box 66:** Always 9.
- **Box 67(a–c):** ICD-9 or ICD-10 code assigned on the fee slip.
- **Box 67(d–q):** Blank, but you can edit these boxes.
- **Boxes 68–73:** Blank, but you can edit these boxes.
- **Box 74(a–e):** Procedure codes and dates from the Fee Slip window.
- **Box 75:** Blank, but you can edit this box.
- **Box 76:** Provider field on the Demographic tab of the Patient Demographics window. NPI Number, UPIN # fields on the Provider tab of the Resource Setup window. Qual. is always 1G.
- **Boxes 77–81CC(a–d):** Blank, but you can edit these boxes.

NOTE

Do *not* click **Reset**. Clicking Reset forces the UB-04 to, once again, collect information from the various parts of OfficeMate and overwrites any information that you added, modified, or deleted manually on the UB-04 form.

5. Click **Print** to print the UB-04 form.

NOTE

Since the layout of the fields on the UB-04 is wider than most printers will allow, you must use a printer that supports edge-to-edge printing. If you attempt to print a UB-04 on a printer that does not support edge-to-edge printing, not all of your input will print along the left and right margins.

6. Click **OK** to save and close the UB-04 form.
7. If you want to preview or print UB-04 claims go to [Printing UB-04 Claims on page 494](#). If you want to create a batch file and export claims, go to [Exporting UB-04 Claims on page 493](#).

Exporting UB-04 Claims

You can export claims to print image files to send electronically to insurance companies. This section tells you how to export UB-04 insurance claims to send to insurance companies.

1. Select the UB-04 claims. For more information on selecting insurance claims, go to [Selecting UB-04 Claims on page 486](#).
2. Correct any errors in the UB-04 claims. For more information on correcting errors, go to [Correcting Errors in UB-04 Claims on page 487](#).

3. Add additional information to the UB-04 forms. For more information on adding information to a UB-04 form, go to [Recording Additional Information on the UB-04 Form on page 489](#).
4. Left-click and then right-click on the insurance carrier and select **Create Claims**.
5. Click **Yes** on the **Process Warning** window to proceed.
6. Click **Yes** on the **Do you want to move Claim records?** window to move the claim to the Billing History folder.
7. Click **Yes** on the **Print Image Created** window after the print image is created.

NOTE

The print image file, PrintImg.txt, is located in the OMATE32\DATA\EMC\UB04FILES folder. Send the PrintImg.txt file to your insurance carrier. A copy of the print image file is also located in the OMATE32\DATA\EMC\UB04FILES folder and identified by the first two letters of the insurance carrier's name, the date, and the **.exp** extension.

8. To view the billing history of an insurance claim, go to [Using the UB-04 Billing History on page 495](#).

Printing UB-04 Claims

For more information on printing insurance claims, watch the "[Printing Claims/Maintenance & Options](#)" video.

NOTE

Since the layout of the fields on the UB-04 is wider than most printers will allow, you must use a printer that supports edge-to-edge printing. If you attempt to print a UB-04 on a printer that does not support edge-to-edge printing, not all of your input will print along the left and right margins.

1. Select the UB-04 claims. For more information on selecting insurance claims, go to [Selecting UB-04 Claims on page 486](#).
2. Correct any errors in the UB-04 claims. For more information on correcting errors, go to [Correcting Errors in UB-04 Claims on page 487](#).
3. Add additional information to the UB-04 forms. For more information on adding information to a UB-04 form, go to [Recording Additional Information on the UB-04 Form on page 489](#).
4. Right-click on an insurance claim or insurance carrier and select **Print UB04** to print the UB-04 form and send it to your insurance carrier in the mail.
5. Click **Yes** on the **Do you want to move Claim records?** window if you have already printed or exported the insurance claim and you are ready to move the claim to the Billing History folder.
6. If you want to create a batch file and export claims, go to [Exporting UB-04 Claims on page 493](#).

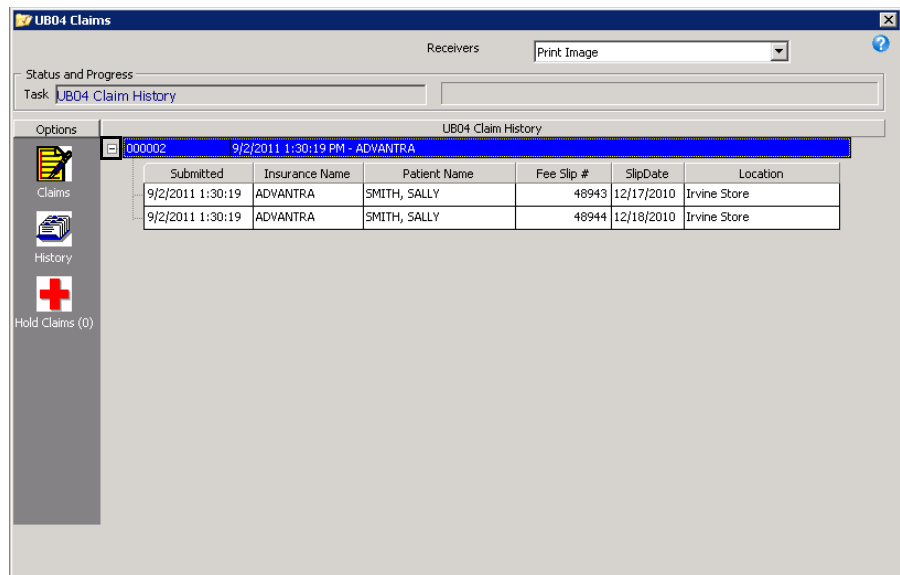
Using the UB-04 Billing History

You can view details about the claims you have processed and reprocess claims using the billing history function in the UB04 Claims window. This section tells you how to use the billing history function, including how

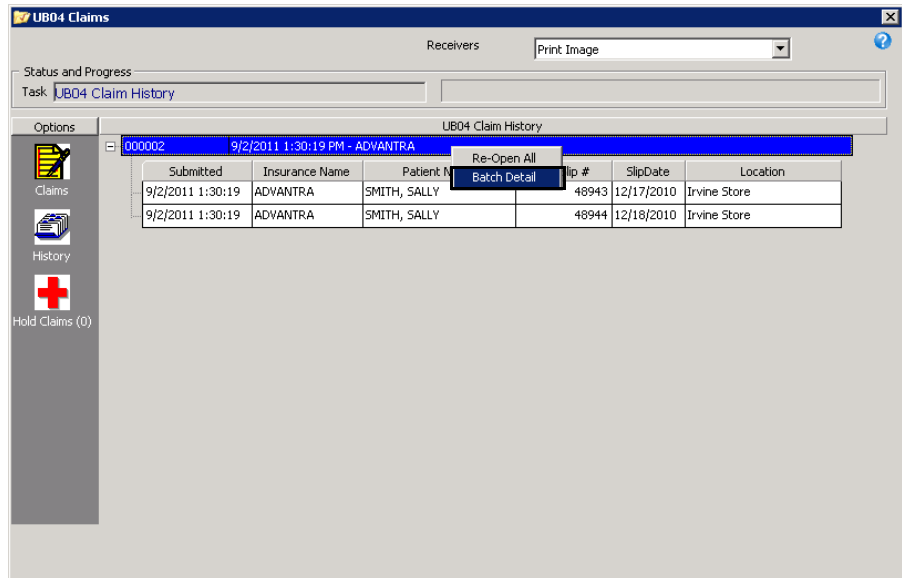
- To view UB-04 claim histories, 495
- To reprocess UB-04 claims, 496

► To view UB-04 claim histories

1. Open the UB04 Claims window. For more information on opening this window, go to [Opening the UB-04 Claims Window on page 485](#).
2. Select a third-party receiver from the **Receiver** drop-down menu, as needed.
3. Right-click the **History** icon and select **Refresh History**.
4. Click **Yes** on the **Process Warning** window to proceed.
5. Click the **+** (plus) sign next to the date and insurance carrier for the claim you want to view.

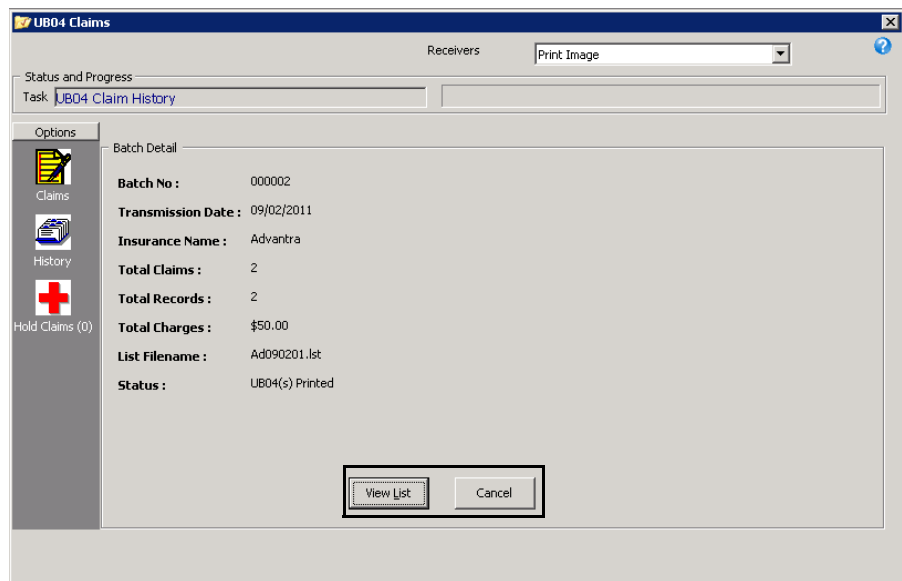


- Left-click and then right-click on the insurance carrier and select **Batch Detail**.



The UB04 Claims window displays the Batch Detail.

- Click **View List** to view and print a list of claims and charge amounts.



► To reprocess UB-04 claims

- Open the UB04 Claims window. For more information on opening this window, go to [Opening the UB-04 Claims Window on page 485](#).
- Select a third-party receiver from the **Receiver** drop-down menu, as needed.
- Click the **History** icon.
- Click the + (plus) sign next to **Print CMS(s)/Date(s)**.

5. Locate the date and insurance carrier for the claim you want to view and click the **+** (plus) sign next to the date that you want to view.
6. Complete one of the following actions, depending on your situation:
 - Left-click and then right-click on an insurance carrier in the left side of the window and select **Re-Open All**.
 - Left-click and then right-click on an individual claim on the right side of the window and select **Open CMS**.
7. Go to [Correcting Errors in UB-04 Claims on page 487](#), [Recording Additional Information on the UB-04 Form on page 489](#), or [Exporting UB-04 Claims on page 493](#) to revise and reprocess your claim.

Reopening & Closing UB-04 Claims on Hold

This section tells you how to reopen and then close UB-04 claims on hold, including how to

- [To reopen UB-04 claims on hold, 497](#)
- [To close UB-04 claims on hold, 498](#)

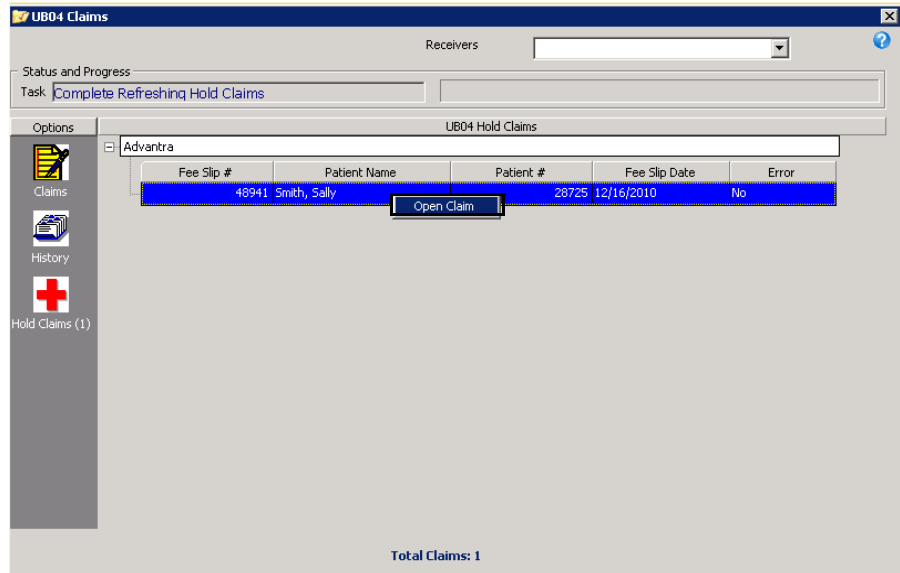
► To reopen UB-04 claims on hold

1. Open the UB-04 Claims window. For more information on opening this window, go to [Opening the UB-04 Claims Window on page 485](#).
2. Select a third-party receiver from the **Receiver** drop-down menu, as needed.
3. Click the **Hold Claims** icon.
4. Locate the insurance carrier for which the claim is on hold and click the **+** (plus) sign to view the claims being held.

5. Complete one of the following actions, depending on your situation:
 - If you are reopening all claims that are on hold, left-click and then right-click on the Hold Claims icon and select **Open All**.
 - If you are releasing one claim that is on hold, left-click and then right-click on the claim and select **Open Claim**.

NOTE

Press and hold the **Ctrl** or **Shift** key to select multiple patient insurance claims.



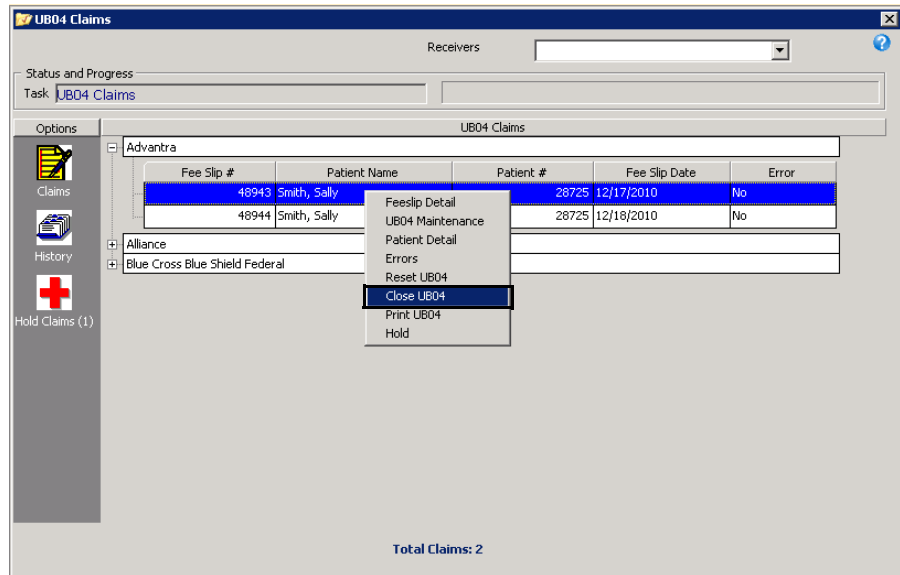
The UB-04 claim(s) can be selected again the next time you select UB-04 claims for processing. For more information on selecting UB-04 insurance claims, go to [Selecting UB-04 Claims on page 486](#).

► **To close UB-04 claims on hold**

1. Open the UB04 Claims window. For more information on opening this window, go to [Opening the UB-04 Claims Window on page 485](#).
2. Select a third-party receiver from the **Receiver** drop-down menu, as needed.
3. Click the **Hold Claims** icon.
4. Reopen the UB-04 claims on hold. For more information on reopening UB-04 claims on hold, go to [To reopen UB-04 claims on hold on page 497](#)
5. Select a third-party receiver from the **Receiver** drop-down menu.
6. Click the **Claims** icon.
7. Select the claims you reopened. For more information on selecting UB-04 claims, go to [Selecting UB-04 Claims on page 486](#).

8. Left-click and then right-click on the UB-04 claim and select **Close UB04**.

NOTE Press and hold the **Ctrl** or **Shift** key to select multiple patient insurance claims.



The UB-04 insurance claim(s) are removed from the UB-04 claims window. If you want to view or print a closed claim, open the UB-04 form from the Fee Slip window or the Insurance tab on the Patient Demographic window. For information on opening the UB-04 form from the Patient Demographic window, go to [To record insurance information on page 215](#). For more information on opening the UB-04 form from the Fee Slip window, go to [Viewing & Printing Claim Forms on page 178](#).

NOTE You cannot edit and refresh closed UB-04 claims that you opened through the Insurance tab on the Patient Demographic window or Fee Slip window. To edit and refresh closed UB-04 claims, reopen the claims from the Billing History. For information on using the Billing History, go to [Using the UB-04 Billing History on page 495](#).

In this chapter:

- [Preparing for the OfficeMate VSP Interface, 502](#)
- [Activating the VSP Interface with Eyefinity, 502](#)
- [Turning the VSP Interface On or Off, 503](#)
- [Using the VSP Setup Assistant, 503](#)
- [Setting Up the OfficeMate VSP Interface Manually, 516](#)
- [Setting Up Product Attribute Pricing, 522](#)
- [Loading Lens Products into OfficeMate, 523](#)
- [Downloading VSP Lists, 524](#)
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For information on using the OfficeMate VSP Interface, watch the [“VSP Interface Overview”](#) videos.

OfficeMate users can submit electronic VSP insurance claims to Eyefinity without re-entering claim information into the Eyefinity website or filing paper claims. OfficeMate obtains authorization and eligibility information directly from Eyefinity so that you can quickly and accurately submit VSP claims. In addition to submitting VSP insurance claims, you can also submit private lab orders and Rx orders to Eyefinity through the OfficeMate VSP Interface. You cannot submit government or commercial claims (non-VSP claims) to Eyefinity through the OfficeMate VSP Interface.

This chapter shows you how to set up the OfficeMate VSP interface; obtain authorization and eligibility information; and submit insurance claims, private lab orders, and Rx orders to Eyefinity through the OfficeMate VSP interface.

Preparing for the Office-Mate VSP Interface

Before you can begin setting up OfficeMate to send VSP claims to Eyefinity, you must ensure that you have everything you need. If your practice has been using OfficeMate, you do not need to collect information already entered in the software.

Item	Notes
Time	The amount of time required to set up the VSP Interface depends on the number of products you have manually entered into OfficeMate.
Continuous internet connection	OfficeMate sends VSP claims and orders instantly. A continuous internet connection such as DSL, cable, or T1 is required to ensure your claims and orders are sent immediately.
VSP User ID VSP Password	Ensure that you have the User ID, Password, and Office ID for each location. If you do not have this information, contact Eyefinity Customer Care at 877.448.0707 or customer care@eyefinity.com .
Location Tax ID	Ensure that you have the Tax ID for each location.
Location NPI Number	Ensure that you have the NPI Number for each location.
Provider's social security number	Ensure that you have the social security number, EIN, and NPI for each provider.
Provider's EIN	
Provider's NPI	
A VSP remittance advice statement	Ensure that you have a VSP remittance advice statement, which contains your account and contact information.

Activating the VSP Interface with Eyefinity

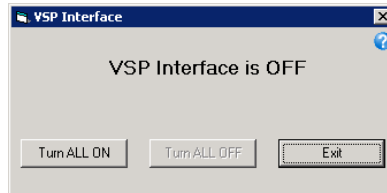
Make sure that, for each practice location, the phone number you provide to Eyefinity is the same phone number that you have recorded in OfficeMate Administration in the VSP Phone text box in the Location Maintenance window.

- ❖ Call Eyefinity at 877.448.0707 to activate your PMI interface. Your PMI activation from Eyefinity is effective after one to two hours.

Turning the VSP Interface On or Off

You have the ability to easily turn the VSP interface on or off, depending on your needs. For example, you may need to turn the VSP interface off to prevent claims and orders from being sent while you initially set up your products.

To toggle the VSP interface on or off, click the **VSP** icon on the OfficeMate Administration select **VSP Interface On/Off**, and click **Turn All On** or **Turn All Off**.



NOTES

- You will not be able to turn the VSP interface on until you have set up a VSP insurance carrier and plan in the Insurance Billing Initial Setup window or VSP Setup Assistant.
- While the VSP interface is turned off, your VSP claims appear in the Third Party Processing window as print-to-paper claims. You will need to enter these claims and lab orders manually into eyfinity.com. Additionally, you will not be able to pull eligibility and authorizations until the VSP interface is turned on.

Using the VSP Setup Assistant

The VSP Setup Assistant walks you through the process of setting up all the information that is required to send VSP claims and lab orders from OfficeMate electronically. This section explains how to use the VSP Setup Assistant, including how

- [To open the VSP Setup Assistant, 504](#)
- [To set up locations, 504](#)
- [To set up providers, 505](#)
- [To set up base attributes, 506](#)
- [To set up lens material attributes, 507](#)
- [To set up lens color attributes, 508](#)
- [To set up other lens attributes, 509](#)
- [To set up lens type attributes, 510](#)
- [To set up lens treatments, 511](#)
- [To set up other products, 512](#)
- [To select VSP labs, 513](#)
- [To set up a VSP insurance carrier and plan, 514](#)
- [To run the Lens Product Loader, 515](#)

The VSP Setup Assistant guides you through the initial setup of the VSP interface. If you have already set up the VSP interface, you can maintain setup information

directly in OfficeMate Administration. For more information, go to [Setting Up the OfficeMate VSP Interface Manually on page 516](#).

► **To open the VSP Setup Assistant**

1. From the OfficeMate Administration main window, click the **VSP** icon.
2. Select **VSP Setup Assistant**.

The VSP Setup Assistant window opens and guides you through the 12 steps required to enter the information required by the VSP interface. You can edit almost all of the information that displays within the VSP Setup Assistant by clicking the field and typing.

You can close the VSP Setup Assistant and return to it at a later time. When you reopen the window, you are taken directly to the step where you left off.

► **To set up locations**

NOTE

If the information is already complete for each location, click **Next** to go to the next step in the VSP Setup Assistant.

1. In the **Location or Doctor Tax ID** column, type your service facility tax ID number (either your group tax ID number or your provider tax ID number).
2. In the **Location or Doctor NPI** column, type your service facility NPI number (either your group NPI number or your provider NPI number).
3. Type the username that Eyefinity Customer Care gave you in the **VSP User ID** column. The username is the same as your Eyefinity login ID.
4. Type the password that Eyefinity Customer Care gave you in the **VSP Password** column. The password is the same as your Eyefinity login password.
5. Type the phone number that Eyefinity has on file for the location in the **VSP Phone** column.
6. Repeat steps 1–5 for each location listed.

- Click **Next** to save your changes and proceed to the next window in the VSP Setup Assistant.

Step 1 - Setting Up Your Location

Complete missing information or edit incorrect information for each location.

Location	VSP Office ID	Location or Doctor Tax ID	Location or Doctor NPI	VSP User ID	VSP Password	VSP Phone
Ipad BV	00000123433361	57788888	1234567	9168514838	****	(916) 851-4838
Irvine	00000123433361	54321	321321123	9168514838	****	(916) 851-4838
OfficeMate Software Solut		12345	2134231			800-269-3666

Step 1 of 12 < Previous Next > Cancel

► To set up providers

- In the **NPI** column, type the provider's NPI number.
- In the **EIN** column, type the provider's EIN number.
- In the **VSP ID** column, type the provider's VSP doctor ID (DID).

NOTES

- The NPI and EIN number must match the numbers the provider furnished when applying to become a VSP provider.
- You only need to add the EIN numbers if you use the EIN on your VSP claims. EIN is often used when multiple doctors are working at a single location.

- Repeat steps 1–3 for each provider listed.

- Click **Next** to save your changes and proceed to the next window in the VSP Setup Assistant.

Step 2 - Setting Up Your Resources

Enter the NPI number for each provider. If you use the provider's EIN on VSP claims, enter the EIN.

Provider Name	NPI	EIN	VSP ID
Crosley, Deb	2222222	6543381	000001234
Doctor OD, Test	5875875879	000001234	000001234
Doctor, Johnny	NPI9876	98765432	000001234
Miller, O.D., Michael	3454324	66456872	000001234
Ruiz, M.D., Raymond	56535465		000001234
Thomas, O.D., David	4344564		000001234

Step 2 of 12 < Previous Next > Cancel

► To set up base attributes

Attributes are the individual qualities and characteristics that define a product (e.g., color, material, lens type). Attributes are inherent to the product; add-ons are not attributes. For example, a single-vision, high-index transition lens has the attributes of single vision, high-index material, and transition coloring. When you submit this lens to the lab, you select the lens "Single Vision high-index Transition"; but when you bill it to the insurance, you want to separate it into its parts, or attributes, so you can collect the full reimbursement from the insurance company.

- In the **Fee** column, type the fee that you charge for the attribute. Pricing is *per lens*.

NOTE

The base fee does not include the fees you might charge for tinting, coating, or other attributes. Those other attributes are priced separately in later steps in the VSP Setup Assistant. The total fee for the lens will be the sum of a lens' base fee plus the fees for any additional attributes.

- If you do not sell a particular lens, deselect the check box in the **Selection** column.
- Repeat steps 1–2 for each attribute listed.

- Click **Next** to save your changes and proceed to the next window in the VSP Setup Assistant.

Step 3 - Pricing Lens Base Attributes

Enter your Fee for lens attributes in the fee column. Pricing is done per lens. Deselect any lenses that you do not sell and would not price. Click the Help button for more information about attributes.

Attribute	Fee	Select
SV	\$30.00	<input checked="" type="checkbox"/>
SV Lenticular	\$31.00	<input checked="" type="checkbox"/>
BF Flat Top	\$40.00	<input checked="" type="checkbox"/>
BF Flat Top Lenticular	\$0.00	<input type="checkbox"/>
BF Curve Top	\$32.00	<input checked="" type="checkbox"/>
BF Round Seg	\$40.00	<input checked="" type="checkbox"/>
BF Round Seg Lenticular	\$50.00	<input checked="" type="checkbox"/>
BF Executive	\$0.00	<input type="checkbox"/>
TF Flat Top	\$50.00	<input checked="" type="checkbox"/>
TF Executive	\$0.00	<input type="checkbox"/>
Blended Bifocals	\$0.00	<input type="checkbox"/>
Progressives	\$50.00	<input checked="" type="checkbox"/>
Occupational Double Segs	\$0.00	<input type="checkbox"/>
Quadrafocals	\$0.00	<input type="checkbox"/>
VDT Multifocals	\$0.00	<input type="checkbox"/>
TF Lenticular	\$0.00	<input type="checkbox"/>

Step 3 of 12 < Previous Next > Cancel

For more information about attributes go to [To maintain product attributes on page 272](#).

► To set up lens material attributes

You may charge different prices for similar products made with different materials. For example, in many offices, there is no additional charge for plastic or glass, but there is for polycarbonate or high-index. In this case, the plastic and glass base material attributes would be deselected and not have a charge. The polycarbonate and high-index attributes would have charges.

- In the **All Fee** column, type the fee that you charge for the lens material provided you charge the same fee for this material regardless of the lens type and skip to step 6; otherwise, if you charge different fees for this material depending on the lens type, leave zero in the All Fees column and go to step 2. Pricing is *per lens*.
- In the **SV Fee** column, type the fee that you charge for this material for a single-vision lens. Pricing is *per lens*.
- In the **BF Fee** column, type the fee that you charge for this material for a bifocal lens. Pricing is *per lens*.
- In the **TF Fee** column, type the fee that you charge for this material for a trifocal lens. Pricing is *per lens*.
- In the **PRG Fee** column, type the fee that you charge for this material for a progressive lens. Pricing is *per lens*.
- If you do not sell a particular lens, deselect the check box in the **Selection** column.
- Repeat steps 1–2 for each material listed.

- Click **Next** to save your changes and proceed to the next window in the VSP Setup Assistant.

VSP Setup Assistant

Step 4 - Pricing Lens Material Attributes

Enter lens material attribute fee. Pricing is done per lens.
If you charge the same price for materials no matter the lens type, enter your fees in the All Fee column. If your charges vary by lens type, leave the All Fees column blank and enter your fees in the remaining columns.

Attribute	All Fees	Sv Fee	BF Fee	TF Fee	PRG Fee	Select
Plastic CR-39	\$0.00	\$5.00	\$10.00	\$15.00	\$20.00	<input checked="" type="checkbox"/>
Plastic Mid-Index 1.54 to 1.59	\$0.00	\$6.00	\$11.00	\$16.00	\$21.00	<input checked="" type="checkbox"/>
Plastic Hi-Index 1.60	\$0.00	\$7.00	\$12.00	\$17.00	\$22.00	<input checked="" type="checkbox"/>
Plastic Hi-Index 1.66>	\$0.00	\$8.00	\$13.00	\$18.00	\$23.00	<input checked="" type="checkbox"/>
Polycarbonate	\$0.00	\$9.00	\$14.00	\$19.00	\$24.00	<input checked="" type="checkbox"/>
Spectralite	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	<input checked="" type="checkbox"/>
Trivex	\$30.00	\$30.00	\$30.00	\$30.00	\$30.00	<input checked="" type="checkbox"/>
Glass 1.50	\$10.00	\$10.00	\$10.00	\$10.00	\$10.00	<input checked="" type="checkbox"/>
Glass Hi-Index 1.60	\$12.00	\$12.00	\$12.00	\$12.00	\$45.00	<input checked="" type="checkbox"/>
Glass Hi-Index 1.66 to 1.79	\$13.00	\$13.00	\$13.00	\$13.00	\$55.00	<input checked="" type="checkbox"/>
Glass Hi-Index 1.80>	\$14.00	\$14.00	\$14.00	\$14.00	\$65.00	<input checked="" type="checkbox"/>

Step 4 of 12 < Previous Next > Cancel

► **To set up lens color attributes**

- In the **Fee** column, type the fee that you charge for the color attribute. Pricing is *per lens*.
- If you do not sell a particular color, deselect the check box in the **Selection** column.
- Repeat steps 1–2 for each color listed.

- Click **Next** to save your changes and proceed to the next window in the VSP Setup Assistant.

Step 5 - Pricing Lens Color Attributes

Enter fee for color attributes. Pricing is per lens.

Attribute	Fee	Selection
Clear	\$0.00	<input checked="" type="checkbox"/>
Rose1	\$8.00	<input checked="" type="checkbox"/>
Rose2	\$8.00	<input checked="" type="checkbox"/>
Grey1	\$10.00	<input checked="" type="checkbox"/>
Grey2	\$12.00	<input checked="" type="checkbox"/>
Grey3	\$14.00	<input checked="" type="checkbox"/>
Green2	\$6.00	<input checked="" type="checkbox"/>
Green3	\$6.00	<input checked="" type="checkbox"/>
Tint Glass (Solid)	\$3.00	<input checked="" type="checkbox"/>
Tint Glass (Gradient)	\$12.00	<input checked="" type="checkbox"/>
Photochromic	\$25.00	<input checked="" type="checkbox"/>
Transition	\$30.00	<input checked="" type="checkbox"/>
Brown3	\$10.00	<input checked="" type="checkbox"/>

Step 5 of 12 < Previous Next > Cancel

► To set up other lens attributes

The Other attribute category is a catch-all category for coatings and other lens treatments that are inherent to the lens. There can be several other attributes applied to a lens by the manufacturer, but they are not to be confused with lens treatments that can be added on to lenses later by the lab.

- In the **Fee** column, type the fee that you charge for the attribute. Pricing is *per lens*.
- If you do not sell a lenses with a particular attribute, deselect the check box in the **Selection** column.
- Repeat steps 1–2 for each attribute listed.

- Click **Next** to save your changes and proceed to the next window in the VSP Setup Assistant.

Step 6 - Pricing Lens Other Attributes

Enter fee for lens 'other' attributes. Prices must be entered for attributes shown.

Attribute	Fee	Selection
Scratch Resistant Coating (Basic)	\$12.00	<input checked="" type="checkbox"/>
UV Coating (Plastic)	\$13.00	<input checked="" type="checkbox"/>
UV Coating (Glass)	\$12.00	<input checked="" type="checkbox"/>
A/R Coating (Premium)	\$18.00	<input checked="" type="checkbox"/>
A/R Coating (Basic)	\$12.00	<input checked="" type="checkbox"/>
Scratch Resistant Coating (Premium)	\$15.00	<input checked="" type="checkbox"/>
Mirror Coating	\$16.00	<input checked="" type="checkbox"/>
Mirror Coating (Double)	\$21.00	<input checked="" type="checkbox"/>
Mirror Coating (Gradient)	\$24.00	<input checked="" type="checkbox"/>
Miscellaneous	\$0.00	<input type="checkbox"/>
Aspheric SV	\$11.00	<input checked="" type="checkbox"/>
Polarized	\$30.00	<input checked="" type="checkbox"/>
Aspheric BF	\$18.00	<input checked="" type="checkbox"/>
Aspheric Other	\$18.00	<input checked="" type="checkbox"/>
Technical Add-on	\$26.00	<input checked="" type="checkbox"/>
Digital Aspheric SV	\$25.00	<input checked="" type="checkbox"/>
Digital Aspheric Other	\$27.00	<input checked="" type="checkbox"/>
Backside UV	\$18.00	<input checked="" type="checkbox"/>

Step 6 of 12 < Previous Next > Cancel

► To set up lens type attributes

The lens type attributes that are defaulted in this list come from the VSP lens catalog. You can add more lens type attributes from this step, but when you import lenses using Lens Product Loader, it will only use the default attributes designated by VSP. Any attributes that you add here will appear in the Other Attributes drop-down menus in the Product Maintenance window, which you can use to categorize and price lenses.

- In the **Fee** column, type the fee that you charge for the attribute. Pricing is *per lens*.
- If you do not sell a lenses with a particular attribute, deselect the check box in the **Selection** column.
- Repeat steps 1–2 for each attribute listed.
- If you need to create additional lens type attributes, perform the following steps:
 - Click the **<Click here to add new attribute>** row.
 - Enter the attribute name and fee.
 - Press the **Enter** key.
 - Repeat steps a–c for each lens type attribute that you want to add.

- Click **Next** to save your changes and proceed to the next window in the VSP Setup Assistant.

Step 7 - Pricing Lens Type Attributes

Enter fee for Lens Type attributes.

Attribute	Fee	Selection
BF Seg > 28mm	\$5.00	<input checked="" type="checkbox"/>
TF Seg > 28mm	\$10.00	<input checked="" type="checkbox"/>
Progressive - Standard	\$75.00	<input checked="" type="checkbox"/>
Progressive - Premium	\$100.00	<input checked="" type="checkbox"/>

Step 7 of 12 < Previous Next > Cancel

► To set up lens treatments

Although it's tempting to create or use your own lens treatments, the default treatments are mapped to VSP products and will be recognized by VSP labs.

- In the **Cost** column, type the cost to your practice for the lens treatment. Pricing is *per pair*.
- In the **Fee** column, type the fee that you charge for the lens treatment. Pricing is *per pair*.
- If you do not sell a particular lens treatment, deselect the check box in the **Selection** column.
- Repeat steps 1–3 for each attribute listed.

- Click **Next** to save your changes and proceed to the next window in the VSP Setup Assistant.

Step 8 - Pricing Lens Treatments

Enter cost and fee for lens treatments.
Lens Treatments are priced as a pair.

Attribute	Cost	Fee	Select
Tint (MF) (Solid)	\$5.00	\$7.00	<input checked="" type="checkbox"/>
Tint (MF) (Gradient)	\$5.00	\$7.00	<input checked="" type="checkbox"/>
Faceted	\$6.00	\$8.00	<input checked="" type="checkbox"/>
Tint Glass (SV) (Rose 1 or 2)	\$6.00	\$8.00	<input checked="" type="checkbox"/>
Tint Glass (MF) (Rose 1 or 2)	\$6.00	\$8.00	<input checked="" type="checkbox"/>
Mirror Coat (MF) (Double)	\$10.00	\$15.00	<input checked="" type="checkbox"/>
Mirror Coat (MF)	\$10.00	\$15.00	<input checked="" type="checkbox"/>
Mirror Coat (MF) (Gradient)	\$10.00	\$15.00	<input checked="" type="checkbox"/>
AR Coat (MF) (Premium)	\$10.00	\$15.00	<input checked="" type="checkbox"/>
AR Coat (MF) (Basic)	\$10.00	\$15.00	<input checked="" type="checkbox"/>
UV Glass (MF)	\$10.00	\$15.00	<input checked="" type="checkbox"/>
UV Plastic (MF)	\$12.00	\$18.00	<input checked="" type="checkbox"/>
Color Coating (MF)	\$12.00	\$18.00	<input checked="" type="checkbox"/>
Mirror Coat (MF) (Custom)	\$15.00	\$25.00	<input checked="" type="checkbox"/>
Tint Glass (MF) (Other)	\$15.00	\$25.00	<input checked="" type="checkbox"/>
Scratch Coat (MF) (Basic)	\$15.00	\$25.00	<input checked="" type="checkbox"/>
Scratch Coat (MF) (Premium)	\$15.00	\$25.00	<input checked="" type="checkbox"/>
Mirror Coat (SV)	\$0.00	\$0.00	<input type="checkbox"/>
Mirror Coat (SV) (Double)	\$0.00	\$0.00	<input type="checkbox"/>
Mirror Coat (SV) (Gradient)	\$0.00	\$0.00	<input type="checkbox"/>
Mirror Coat (SV) (Custom)	\$0.00	\$0.00	<input type="checkbox"/>

Step 8 of 12 < Previous Next > Cancel

► To set up other products

OfficeMate products that are billed to VSP insurance and ordered from VSP labs must be properly mapped before they are billed to VSP or ordered from VSP-approved labs. Mapping products in OfficeMate assigns them a VSP description; this VSP description is then sent to Eyefinity when VSP insurance is billed and VSP labs are used so that Eyefinity can properly process the orders and insurance claims.

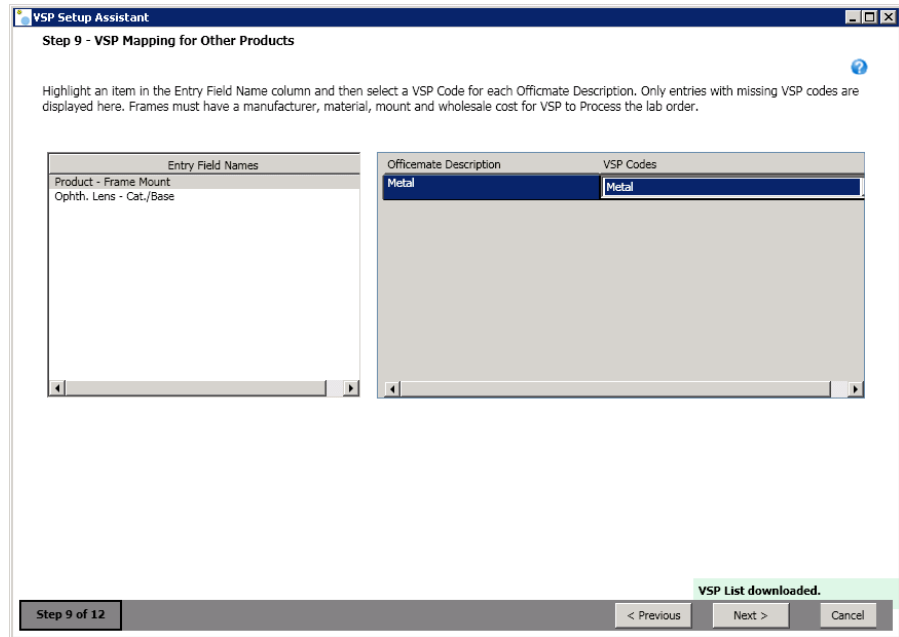
- In the **Entry Field Names** column, select a product attribute category from the list.

NOTE

Only those product attribute categories that require mapping are listed. If no product attribute category is listed in the Entry Field Names column, your products are already mapped to VSP products. You may skip to step 4.

- For each product listed in the OfficeMate Description column, select the most appropriate **VSP Code** from the drop-down menus.
- Repeat steps 1–2 for each attribute listed.

- Click **Next** to save your changes and proceed to the next window in the VSP Setup Assistant.



► To select VSP labs

Select the VSP-approved labs that you want users to be able to select on the Eyewear Order when the VSP Order or VSP Private Lab Order radio button

is selected. Select only those labs to which you want to send lab orders. You must select at least one lab.

- For each VSP lab your practice uses, select the check box in the **Use VSP Approved Labs** column that corresponds to that lab.

OR

If you wish to discontinue a lab, deselect the Use VSP Approved Labs check box.

VSP Setup Assistant
Step 10 - Adding VSP Labs

Select the VSP labs that you use for orders. At least one lab must be selected.

VSP Lab Search

Lab Name	Use VSP Approved Labs
21ST CENTURY OPTICS, INC. - Long Island City, NY **ADVTG/NAT-RNP** **SELECT**	<input checked="" type="checkbox"/>
ADVANCE OPTICAL - Rochester, NY **ADVTG/NAT-RNP** **SELECT**	<input checked="" type="checkbox"/>
ALLENTOWN OPTICAL CORP. - Allentown, PA **ADVTG/NAT-RNP** **SELECT**	<input checked="" type="checkbox"/>
ASPEN OPTICAL - Mesa, AZ **ADVTG/NAT-RNP** **SELECT**	<input type="checkbox"/>
BALESTER OPTICAL COMPANY - Wilkes-Barre, PA **ADVTG/NAT-RNP** **SELECT**	<input type="checkbox"/>
Barnett & Ramel	<input type="checkbox"/>
BARTLEY OPTICAL - Azusa, CA **CA-RNP** **ADVTG/NAT-RNP** **SELECT**	<input type="checkbox"/>
BELL OPTICAL LABORATORY, INC. - Kenova, WV **ADVTG/NAT-RNP** **SELECT**	<input type="checkbox"/>
BELL OPTICAL LABORATORY, INC. - Kettering, OH **ADVTG/NAT-RNP** **SELECT**	<input type="checkbox"/>
BELL OPTICAL LABORATORY, INC. - Twinsburg, OH **CA-RNP** **ADVTG/NAT-RNP** **SELECT**	<input type="checkbox"/>
BELL OPTICAL LABORATORY, INC. - Williamstown, WV **ADVTG/NAT-RNP** **SELECT**	<input type="checkbox"/>
BELL-DUFFENS OPTICAL COMPANY - Indianapolis, IN **ADVTG/NAT-RNP** **SELECT**	<input type="checkbox"/>
BETTER OPTICS - Austell, GA	<input type="checkbox"/>
BRISTOW OPTICAL CO. - Tucson, AZ **SELECT**	<input type="checkbox"/>
BROTHERS' OPTICAL LAB, INC. - Orange, CA **CA-RNP** **ADVTG/NAT-RNP** **SELECT**	<input type="checkbox"/>
CAPITOL OPTICAL COMPANY - Auburn, CA **CA-RNP** **ADVTG/NAT-RNP** **SELECT**	<input type="checkbox"/>
CARL ZEISS VISION B & W - Baltimore, MD **ADVTG/NAT-RNP** **SELECT**	<input type="checkbox"/>
CARL ZEISS VISION CALIFORNIA - Montclair, CA **CA-RNP** **ADVTG/NAT-RNP** **SELECT**	<input type="checkbox"/>
CARL ZEISS VISION CUMBERLAND - Nashville, TN **ADVTG/NAT-RNP** **SELECT**	<input type="checkbox"/>
CARL ZEISS VISION FLORIDA - Clearwater, FL **ADVTG/NAT-RNP**	<input type="checkbox"/>

Step 10 of 12 < Previous Next > Cancel

NOTES

- To find a lab in the list, type the first few letters of the lab name in the **VSP Lab Search** text box and press the **Return** key.
- Labs indicated as “VSP orders only” cannot accept orders for non-VSP patients.

- Click **Next** to save your changes and proceed to the next window in the VSP Setup Assistant.

► To set up a VSP insurance carrier and plan

The VSP Setup Assistant checks your system to determine if any VSP insurance carriers or plans exist in your database. If any VSP carriers or plans are found, they will populate the Select Carrier and Select Plan drop-down menus. Even though your patients may have such different plans

as Signature or Choice, you only need to maintain one active VSP carrier and plan in OfficeMate.

1. If VSP insurance carriers and plans are found, select one of each from the **Select Carrier** and **Select Plan** drop-down menus.

OR

If no VSP carrier and plan exist, select the **Create VSP carrier and plan for me** check box.

NOTE

You can also select the Create VSP carrier and plan for me check box if you would rather the VSP Setup Assistant create a carrier and plan for you than use your existing ones.

2. Depending on your practice's billing policies, select one of the following:
 - Select the **Yes** radio button if claims for all the providers are billed under the location tax ID.
 - Select the **No** radio button if claims are billed under the individual providers' tax IDs.
3. Click **Next** to save your changes and proceed to the next window in the VSP Setup Assistant.

Step 11 - Setting Up VSP Insurance Carrier And Plan

The Setup Assistant will setup your VSP carrier and plan for you. Fields populated by the Setup Assistant are indicated by a checkmark on the Insurance Billing Initial Setup Window.

The Setup Assitant was not certain about your VSP carrier and plan. Use the drop-downs to select your VSP carrier and plan.

Select Carrier: Vision Service Plan
Select Plan: Vision Service Plan

If you have not setup a VSP carrier and plan, check the box and one will be created for you.

Create a VSP carrier and plan for me

Do all providers at each location submit claims to VSP using the same TAX ID?

Yes No

Step 11 of 12 < Previous Next > Cancel

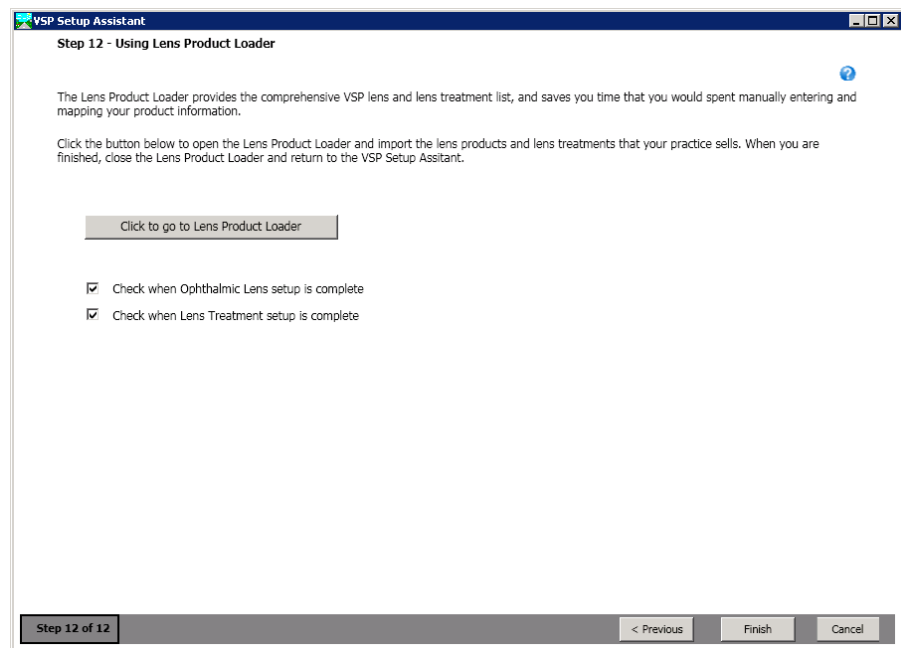
► To run the Lens Product Loader

The Lens Product Loader loads a list of over 3,000 lens products and add-ons into your OfficeMate database. This feature not only saves you and your staff the time and the trouble of manually creating maintaining lens products, but these lens products contain all the information that you need to send on your VSP lab orders and claims.

The process of selecting and importing lenses and lens treatments can take some time, so this final VSP Setup Assistant step is designed so you can

come back and indicate you are finished when all of your lenses and lens treatments are imported.

1. Click the **Click the Go to Lens Product Loader** button.
The Lens Product Loader window opens.
2. Follow the instructions outlined in [Loading Lens Products into OfficeMate on page 256](#).
As you load lens products into your database, they inherit the pricing that you previously entered based on their attributes.
3. Select the **Check when ophthalmic lens setup is complete** and the **Check when lens treatment setup is complete** check boxes as you complete those tasks.



4. Click **Finish** to save your changes and close the VSP Setup Assistant.

Setting Up the OfficeMate VSP Interface Manually

You must set up the OfficeMate VSP Interface before you use it to submit claims and orders to Eyefinity. This section tells you how to set up the OfficeMate VSP Interface, including how

- [To set up locations, 517](#)
- [To set up provider information, 518](#)
- [To set up insurance carrier information, 519](#)
- [To set up insurance plan information, 521](#)

If this is your first time setting up the VSP interface, you should use the VSP Setup Assistant. The VSP Setup Assistant guides you through the initial setup of the VSP interface. For more information, go to [Using the VSP Setup Assistant on page 503](#)

This section calls attention only to the fields and options required for the OfficeMate VSP Interface. For complete information about setting up locations, go to [Maintaining Locations on page 24](#).

► To set up locations

1. Open the Location Maintenance window. For information about opening the Location Maintenance window, go to [Maintaining Locations on page 24](#).
2. In the Sales Tax group, type the location's tax identification in the **Tax ID** text box.
3. In the Claims Information group, type your service facility NPI number (either your group NPI number or your provider NPI number) in the **NPI Num (33a)** text box.
4. In the VSP Integration group, type the username that Eyefinity Customer Care gave to you in the **User ID** text box. The username is the same as your Eyefinity login ID.
5. Type the password that Eyefinity Customer Care gave to you in the **Password** text box. The password is the same as your Eyefinity login password.
6. Type the location's phone number in the **VSP Phone** text box.

NOTE

You must type the same phone number that Eyefinity has on file for this location.

7. Click **Get Office ID** to automatically retrieve your office ID.

NOTE

If the office ID cannot be found, ensure that the User ID, Password, and VSP Phone are correct.

The screenshot shows the 'Location Maintenance' window with the following fields and values:

- Name:** Irvine Store
- Address 1:** 38 Discovery
- Address 2:** Suite 250
- City, State, Zip:** Irvine, California, 92618
- Phone:** (800) 942-5353
- Default Area Code:** 949
- FAX:**
- Contact:** Practice Manager
- Location type:** Location
- Posting Date:** 01/10/2012
- Display Name:** Irvine Store
- Region:**
- Default City:**
- Default State:** California
- Bar Code Output Path:**
- Medical Rx:** HP LaserJet 1022 (redirected 2)
- Oph Rx:** HP LaserJet 1022 (redirected 2)
- Sales Tax:**
 - Tax ID:** 9514382566669
 - State Tax:** California
 - County Tax:**
 - Local Tax:**
- Claims information:**
 - Qualifier (32b):**
 - Facility ID (32b):**
 - Billing Name (33):**
 - NPI Num (33a):** NP19876
 - Type of Bill:** UB04 FL4
- Active:**
- H17 Integration:**
 - Location ID:**
 - Processing Type:** Production (selected), Test
 - Control Group:**
 - Sending App:**
 - Sending Fac:**
 - Rec. App:**
 - Rec. Fac:**
 - Charge Interface On:**
- VSP Integration:**
 - User ID:** 8009425353
 - Password:** ****
 - VSP Phone:** (800) 942-5353
 - Get Office ID:** [Button]
 - Office ID:** 5581275051
 - Note:** You must setup each location individually
- Lab Orders:**
 - Default Lab:**
- Corporate Logo:**
 - eyefinity logo**
 - Update Logo:** [Button]
- General Ledger Interface:**
 - G/L Location ID:**

Buttons at the bottom: Delete, Cancel, Save/Exit, Credit Card Processing Setup.

8. Click **OK**.

- Repeat steps 2–8 for each location in your practice.

► To set up provider information

- Open the Resources Setup window. For information about opening the Resources Setup window, go to [Maintaining Providers, Staff, & Other Resources on page 51](#).
- Click **New** to add a new provider.

OR

Select a provider from the table at the top of the window to modify a provider.

- Type the provider's EIN number in the **EIN Number** text box.

NOTE

Alternatively, enter the provider's social security number in the SSN Number text field, if he or she did not furnish an EIN when applying to become a VSP provider.

- Type your individual provider NPI number in the **NPI Number (Box 24j)** text box.

NOTE

The NPI number must match the one the provider furnished when applying to become a VSP provider.

- Type the doctor ID (Did) in the VSP Doc ID text box. Depending on how you signed up with Eyefinity, your doctor ID is either your social security number or EIN number.

The screenshot shows the 'Resources Setup' window with the 'Provider' tab selected. At the top, there is a table with columns: Provider Name, Provider Type, NPI, SSN, Default Location, and Active. The table contains three rows: 'Crossley, Deb Default, Rx' (Corporation, 2222222, 987, Ipad BV, Active), 'Doctor, Johnny' (Corporation, NPI9876, Irvine, Active), and 'Doctor OD, Test' (Solo Practice, 5875875879, OfficeMate Software, Active). Below the table are various input fields for provider details. The 'EIN Number (Box 25)' field is highlighted with a red box and contains '98765432'. The 'NPI Number (Box 24j)' field contains 'NPI9876'. The 'VSP Doc ID' field contains '000001234'. Other fields include Provider Id (18), Last Name (Doctor), First Name (Johnny), Business (OfficeMate Software), Phone # ((800) 942-5353), User ID (JOHNNY), License # (LIC1234), and Commissionable (Yes selected). At the bottom, there are buttons for 'Save', 'Cancel', 'New', and 'Delete'.

NOTE

You do not need to click the Insurance Info button or enter any information for VSP on the Insurance Information window.

- Click **Save**.

This section calls attention only to the fields and options required for the VSP Interface. For complete information about setting up providers, go to [To modify or add provider information on page 51](#).

This section calls attention only to the fields and options required for the VSP Interface. For complete information about setting up insurance carriers, go to [Setting Up Insurance Carriers on page 149](#).

► To set up insurance carrier information

1. Open the Insurance Billing Initial Setup window. For information on opening the Insurance Billing Setup window, go to [To open the Insurance Billing Initial Setup window on page 149](#).

2. Click **New** to add a new insurance carrier.

OR

Select Vision Service Plan or VSP from the **Select Insurance** drop-down menu to modify an insurance carrier.

3. Type the insurance carrier's name, address, and telephone information in the fields provided.

NOTES

You must enter a valid VSP address, including all spaces and punctuation. Refer to a VSP remittance advice statement for address information.

4. Type a date in the **Activation Date** field or select a date from the drop-down menu.
5. Type a date in the **Termination Date** field or select a date from the drop-down menu.

NOTE

The activation and termination dates are determined by your contract with the insurance carrier and control when products and services can be billed to the insurance carrier.

6. Select **VSP** from the **Box 1 Insurance Type** drop-down menu.
7. Select **No** from the **Box 9d Populate with Secondary Ins.** radio buttons.
8. Select **Doctor's EIN** from the **Box 25 Tax ID** drop-down menu.

NOTE

If you provided VSP with a different type of tax ID number when you applied to be a VSP provider, select that tax ID type instead.

9. Select **Yes** from the **Box 27 Accept Assignment** radio buttons.
10. Select **Other** from the **Policy Type** drop-down menu.

NOTE

If you have converted your claims format to 5010, the Policy Type drop-down menu is not available.

11. Select **CMS 1500 Form** from the **Output** drop-down menu

12. Select **VSP Interface** from the **E-Claim Processor** drop-down menu

The screenshot shows the 'Insurance Billing Initial Setup' window. The 'Insurance Carrier' tab is active, displaying fields for Carrier Name (Vision Service Plan), Brief Name (VSP), Address 1 (P.O. Box 997105), City (Sacramento), State (California), ZIP Code (95899), Phone # ((800) 462-7009), Fax # ((916) 851-5752), Activation Date (10/22/2008), and Termination Date (10/20/2019). The 'Claim Form' tab is also visible, showing various options like 'Insurance Type' (VSP), 'Populate with Secondary Ins.' (No), 'Auto Populate' (No), 'Populate' (Billing Provider), 'Accept Assignment' (Yes), 'Indicate Patient Payment on Claim' (No), 'Secondary Claim Recipient, remaining charges only?' (No), 'Populate patient's & primary insurance payment' (No), 'Policy Type' (Other), 'Output Format' (CMS 1500 Form), and 'E-Claim Processor' (VSP Interface).

13. Click **Save**.
14. Click the **Modifiers/Combos** tab.
15. Ensure that all **Ophthalmic Lenses** and **Lens Treatment** radio buttons are set to **No**.

The screenshot shows the 'Insurance Billing Initial Setup' window with the 'Modifiers/Combos' tab selected. The 'Lens Treatment' section has 'Other' set to 'No'. The 'Ophthalmic Lenses' section has 'Category/Base', 'Lens Type', 'Material', 'Color', and 'Other' all set to 'No'. The 'RT and LT Modifiers' section has 'Category/Base', 'Lens Type', 'Material', 'Color', and 'Other' all set to 'No'.

16. Click **Save**.

This section calls attention only to the fields and options required for the VSP Interface. For complete information about setting up insurance plans, go to [Setting Up Insurance Plans on page 158](#).

► To set up insurance plan information

1. Open the Plan tab on the Insurance Billing Initial Setup window. For information on opening the Plan tab, go to [To open the insurance Plan tab on page 159](#).
2. Select Vision Service Plan or VSP from the **Select Plan** drop-down menu.
OR
Click **New** to add a plan.
3. Type the insurance plan's name in the **Plan Name** text box.
4. Select the **Same as Insurance** check box to copy the insurance carrier's address.
5. Type a date in the **Activation Date** field or select a date from the drop-down menu.
6. Type a date in the **Termination Date** field or select a date from the drop-down menu.

NOTE

The activation and termination dates are determined by your contract with the insurance plan and control when products and services can be billed to the insurance carrier.

7. Select **Percentage** from the **Pricing Method** drop-down menu.
8. Type **100** in the **Coverage %** text box.
9. Select **Yes** from the **Create Claim** radio buttons.
10. Select **Product Fee** from the **Box 24f Price Charges** drop-down menu.
11. Select **Yes** from the **Include all non-covered items on Claim** radio button.
12. Select provider or facility from the **Box 31 Source** drop-down menu according to the plan's requirements for box 31.
13. Select **Location** or **Corp.** from the **Box 32 Print Address** radio buttons to send either the location's address or the administrative location's address.
14. Select **Yes** from the **Box 33 Print Corporate Address** radio buttons to print the administrative location's address on the claim. Select **No** to suppress the administrative location's address.
15. From the **Box 33 Billing Entity** drop-down menu, select the biller information that should be sent to VSP.

16. Type **000** in the **Destination ID** text box.

The screenshot shows the 'Insurance Billing Initial Setup' window with the 'Plan' tab selected. The 'Carrier' is 'Vision Service Plan'. The 'Destination ID' field in the 'Claim Form' section is highlighted with a red box and contains the value '000'. Other fields include Plan Name, Address, City, State, ZIP Code, Phone #, and various pricing and coverage options.

17. Click **Save**.
18. Click the **Preferences** tab.
19. Ensure that all **Discounts and Eligibility** and **Combining Attributes** radio buttons are set to **No**.

The screenshot shows the 'Insurance Billing Initial Setup' window with the 'Preferences' tab selected. The 'Discounts and Eligibility' and 'Combining Attributes' sections are highlighted with a red box. In these sections, radio buttons for 'No' are selected for various options like 'Prevent Discount on Fee Slip', 'Eligibility Required', 'Accessories', 'Contact Lenses', 'Frames', 'Lens Treatments', 'Ophthalmic Lenses', 'Other', 'Plano Sunglasses', 'Ready Readers', and 'Services'. The 'Frames' section has 'Split Frame' set to 'No' and 'Pricing Range' set to 'Retail'. The 'Contact Lens' section has 'Pricing Range' set to 'Retail'. The 'Recalls' section has 'Exam Elig. Period' set to '0' and 'Recall Type' set to a dropdown menu. The 'Co-Pay' section has 'Transfer Co-Pay to Secondary Insurance' and 'Secondary Recipient, accept Co-Pay transfer' both set to 'No'.

20. Click **Save**.
21. Click **OK** to close the Insurance Billing Initial Setup window.

Setting Up Product Attribute Pricing

Attributes are the inherent features of a product. For example, you could describe a lens as polycarbonate, polarized, with a scratch coat, and with an antireflective

coat, and each of those attributes translates into a billable code on the insurance claim form as illustrated below.

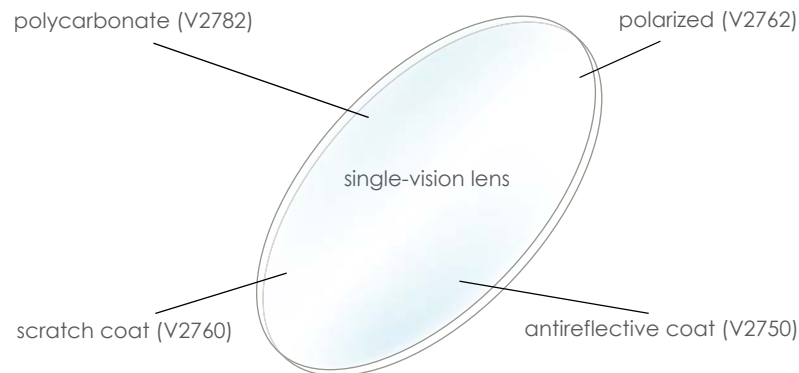


Figure 12-5: An example of the attributes that make up a lens. OfficeMate allows you to select a product and automatically populate the insurance claim with the product's basic attributes.

Anything added to the product after it is manufactured is an add-on, and not an attribute.

For more information about setting up product attribute pricing, refer to the following sections:

- [To add & modify attributes, 141](#)
- [To add & modify additional attributes, 143](#)

Loading Lens Products into OfficeMate

The Lens Product Loader loads a comprehensive list, provided by VSP, of over 3,000 lens products and add-ons into the OfficeMate products database.

Using the Lens Product Loader to import products into your OfficeMate database saves you time and energy that you would otherwise have to spend manually entering product information.

For information on using the Lens Product loader, go to [Loading Lens Products into OfficeMate on page 256](#).

For information on using the Lens Product Loader, watch the “[Ophthalmic Lenses - Lens Product Loader & Manual Entry](#)” and “[Lens Treatment - Lens Product Loader & Manual Entry](#)” videos.

NOTES

- If you are using the VSP Interface, you *must* use the Lens Product Loader to ensure that VSP patient out-of-pocket expenses are calculated correctly.
- If you are not using the OfficeMate VSP Interface, using the Lens Product Loader is optional, but highly recommended, and will save you countless hours of creating lens products manually.
- Ensure that you have entered pricing information for all lens product attributes prior to running the Lens Product Loader for the first time. For more information about pricing product attributes, go to [Setting Up Product Attribute Pricing on page 522](#).
- To keep your lens products up to date, Eyefinity recommends running the Lens Product Loader once a month.
- Prior to running the Lens Product Loader for the first time, ensure that your product attribute pricing is complete. For more information about product attributes, go to [Setting Up Product Attribute Pricing on page 522](#).

Downloading VSP Lists

You must download VSP lists before you can map your products and submit orders and insurance claims to Eyefinity.

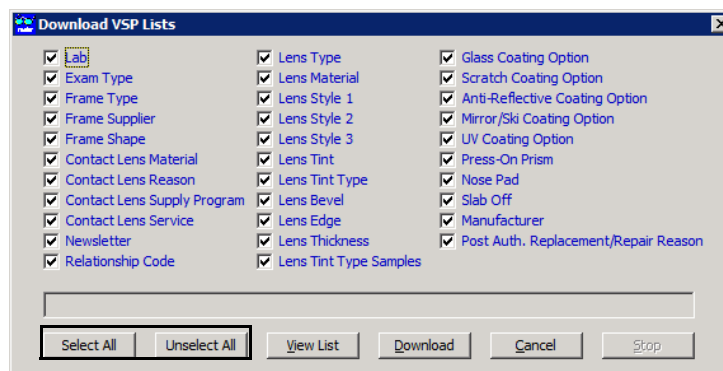
VSP lists are also downloaded when you run the Lens Product Loader. If you recently ran the Lens Product Loader, you do not need to download the VSP lists again. If you need to send orders to a new lab, you can also use the following instructions to download the latest list of labs.

1. Click **Tasks** on the OfficeMate main window and select **VSP Download Lists**.

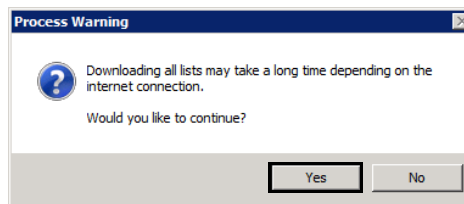
2. Select the VSP lists that you want to download by completing one of the actions below:
 - Click **Select All** to select all of the VSP lists.
 - Click **Unselect All** to unselect all of the VSP lists and then individually select the VSP lists that you want to download.

NOTES

- Eyefinity recommends downloading VSP lists every two weeks.
- If all of your VSP lists are up-to-date, you do not need to download the lists.
- You must download the VSP Lab list in order to select labs and send them Rx orders.



3. Click **Download**.
The Process Warning window opens.
4. Click **Yes** to download the VSP lists that you selected.



The VSP lists download into OfficeMate. To stop this process at any time, click **Stop**. When all of the VSP lists have downloaded successfully, the message “All lists were successfully downloaded.” appears in the status bar on the Download VSP Lists window.

5. If desired, click **View List** on the Download VSP List window and **Yes** on the Process Warning window to view the VSP lists that you downloaded.
The VSP list opens in Notepad.
6. Click **Cancel** to close the Download VSP Lists window.

Loading Frame Products into OfficeMate

Loading frames from a subscription service is the fastest and most efficient way to set up frame products in OfficeMate. FrameMate allows you to download frames from the electronic catalogs available from the FRAMES Data SPEX UPC CD-ROM, FRAMES Data Quarterly CD-ROM, and Marchon Frames Diskette into OfficeMate. This section tells you how:

- [To load frame products into OfficeMate, 526](#)
- [To add missing frame mount information, 526](#)

NOTE

If you do not subscribe to FRAMES Data, you can enter your frame products manually. For more information on adding products manually, go to [Maintaining Product & Service Information on page 249](#).

► To load frame products into OfficeMate

1. For information about loading frame products into OfficeMate, go to [Using FrameMate on page 421](#).
2. Once the frame products have been downloaded, add any missing mount information. For more information, go to [To add missing frame mount information on page 526](#).

► To add missing frame mount information

NOTE

For complete information about the Product Maintenance window, go to [Updating Many Products & Services on page 289](#).

1. Open the Products window using one of the following methods:
 - Click the **Products** icon and select **Product Maintenance**.
 - Click **Tasks** on the main window toolbar and select **Product Maintenance**.
2. Select **Frames** from the **Product Type** drop-down menu.
3. Select **No Mount Entered** from the **Mount** drop-down menu and enter any other search criteria needed to narrow your results.

NOTE

It helps to narrow your search in such a way that the resulting frames will have similar mounts.

4. Click **Search**.
5. In the search results, deselect the check boxes for any frames appearing that you do not want to update or frames that will not match the mount of the others.
6. Click **Continue**.
7. Select the **Mount** check box, select a mount type from the **Mount** drop-down menu.
8. Click **Save and Continue**.

The mount is added to all the frames selected in your search results.

Roughly 70% of the frames loaded from CDs are missing mount information, which is required for VSP orders. You can add mount information to many frames at once through the Product Maintenance window.

Mapping Products

OfficeMate products that are billed to VSP insurance and ordered from VSP labs *must* be properly mapped before they are billed to VSP or ordered from VSP-approved labs.

Mapping products essentially translates your product names into a language VSP can understand by assigning your products a VSP description. This VSP product description is then sent to Eyefinity when VSP insurance is billed so that Eyefinity can properly process the insurance claims. This VSP product description is also sent to VSP labs and ensures that the correct products are fabricated and shipped to you.

This section includes the following topics:

- [Using the VSP Product Mapping Utility to Map Multiple Products, 527](#)
- [Using the Products Module to Map Individual Products, 531](#)

Using the VSP Product Mapping Utility to Map Multiple Products

Complete the instructions in this section if you are mapping OfficeMate products for the first time; if you have already mapped products using these steps and are adding or modifying individual products in your OfficeMate products database, go to [Using the Products Module to Map Individual Products on page 531](#). This section tells you how to map VSP-billed products in OfficeMate using the VSP Mapping Utility, including how

- [To assign VSP codes to OfficeMate product descriptions, 527](#)
- [To map OfficeMate products to VSP definitions, 528](#)
- [To select VSP-approved labs, 530](#)

► **To assign VSP codes to OfficeMate product descriptions**

Before you map your OfficeMate products you must assign VSP codes to your OfficeMate product descriptions.

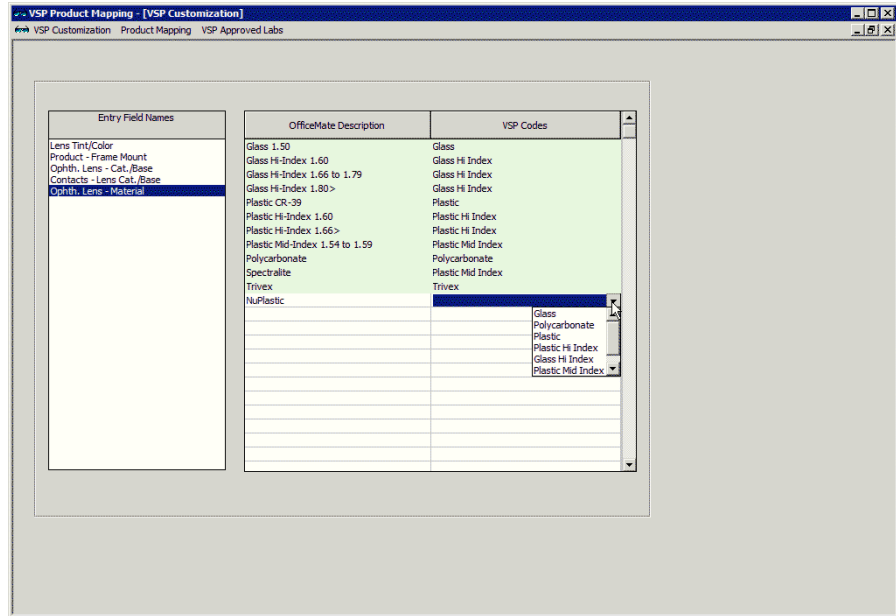
NOTE

If you downloaded ophthalmic lenses and lens treatments using the Lens Product Loader, the VSP Customization tab is completed for you, and you can skip this section and go directly to [To map OfficeMate products to VSP definitions on page 528](#).

For information about downloading products using the Lens Product Loader, go to [Loading Lens Products into OfficeMate on page 523](#).

1. Click the **VSP** icon and select **VSP Product Mapping**.
The VSP Product Mapping window opens.
2. Click the **VSP Customization** tab.
A list of OfficeMate product descriptions and their associated VSP codes are displayed. If a VSP code is already assigned to an OfficeMate product description, the description and code are highlighted green.
3. Click the drop-down arrows in the **VSP Codes** column next to OfficeMate descriptions that are not assigned a VSP code and select an appropriate

VSP code from the drop-down menu. Repeat this step until all of the OfficeMate product descriptions are assigned VSP codes and all of the rows are highlighted green.



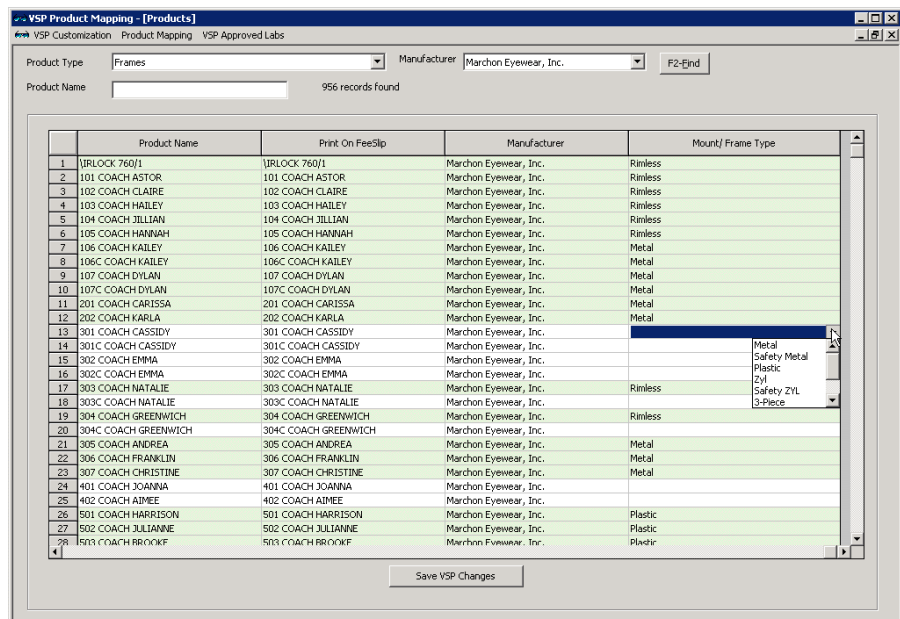
- Click the names in the **Entry Field Names** column on the left side of the window and repeat step 3 for each name until all of the OfficeMate descriptions have been assigned VSP codes.
- Go to [To map OfficeMate products to VSP definitions on page 528](#) to map your OfficeMate products to VSP definitions.

► To map OfficeMate products to VSP definitions

Map your OfficeMate products to VSP definitions so that additional information required for VSP-billed and VSP lab-ordered products is recorded in the OfficeMate products database.

- If you are not already in the VSP Product Mapping window, click **Tasks** on the OfficeMate main window and select **VSP Product Mapping**; otherwise, click the **Product Mapping** tab and go to step 2.
- Select a product type from the **Product Type** drop-down menu.
- If you selected Frames or Ophthalmic Lenses in step 2, select a manufacturer from the **Manufacturer** drop-down menu; if you selected Lens Treatments or Other in step 2, select the **Coating** or **Lens Add On** radio button.
- Type a product name in the **Product Name** text box to search for a specific product.
- Click **F2-Find**.

6. Click the drop-down arrows and select appropriate definitions so that the following OfficeMate products and definitions are mapped:
 - Frames: Mount/Frame Type
 - Lens Treatments: Coating Type and VSP Selections
 - Ophthalmic Lenses: Lens Category, Material, and Lens Style
If the lens style is not listed in the **Lens Style** drop-down menu, select **Other (Indicate Lens Not Listed) - Other** from the menu and type the lens style in the **Lens Not Listed** box.
 - Other: Coating Type and VSP Selections
If you are going to order additional A/R coatings through VSP, you must add the A/R coatings in the Products window. For information on adding products, go to [Using the Products Module to Map Individual Products on page 531](#).
 - Plano Sunglasses: Mount/Frame Type



7. Click **Save VSP Changes** after mapping each product type. When a product name is mapped to VSP definitions, the row will be highlighted green.
8. Repeat steps 2–7 until all VSP-billed product types and names are mapped to VSP definitions.
9. Go to [To select VSP-approved labs on page 530](#) to select the VSP-approved labs to which you want to send orders.

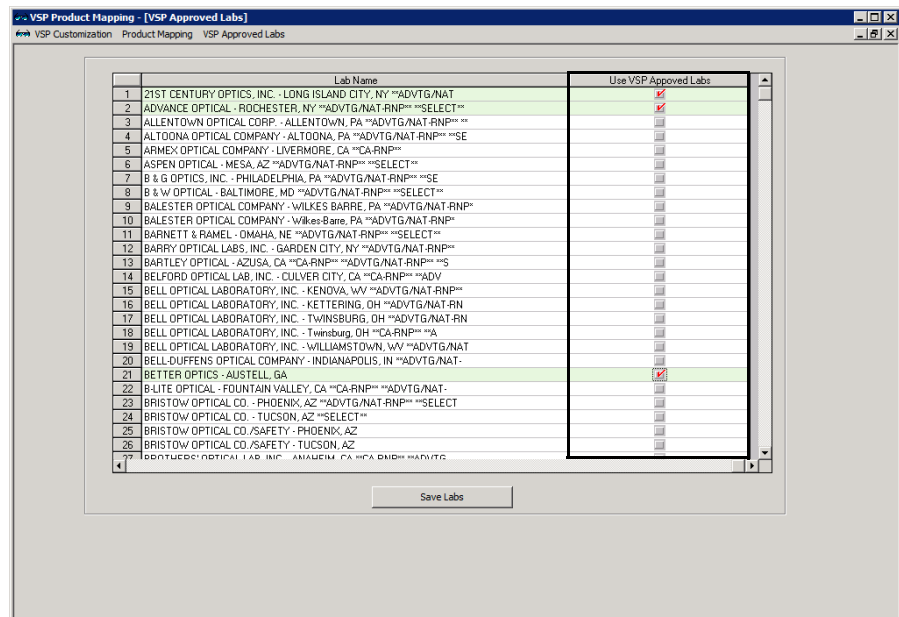
► **To select VSP-approved labs**

Select the VSP-approved labs that you want users to be able to select on the Eyewear Order when the VSP or Electronic Lab Order radio button is selected. Select only those labs to which you want to send lab orders.

1. If you are not already in the VSP Product Mapping window, click **Tasks** on the OfficeMate main window and select **VSP Product Mapping**; otherwise, click the **VSP Approved Labs** tab and go to step 2.
2. For each VSP lab your practice uses, select the check box in the **Use VSP Approved Labs** column that corresponds to that lab.

OR

If you wish to discontinue a lab, deselect the **Use VSP Approved Labs** check box.



NOTE

Labs indicated as "VSP orders only" cannot accept orders for non-VSP patients.

3. Click **Save Labs** to save your changes.
The rows containing labs you selected turn green.
4. Click the **x** in the upper right corner of the window to close the VSP Product Mapping window.

This section calls attention only to the fields and options required for the VSP Interface. For complete information about setting up products, go to [Maintaining Product & Service Information on page 249](#).

Using the Products Module to Map Individual Products

Complete the instructions in this section if you have already used the VSP Product Mapping Utility to map all of your OfficeMate products for the first time and you need to modify or add individual products; if you have not already mapped products using the VSP Product Mapping Utility, go to [Using the VSP Product Mapping Utility to Map Multiple Products on page 527](#).

NOTE Fields highlighted in yellow are required fields.

1. Open the Products window using one of the following methods:
 - Click the **Products** icon and select **Products and Services**.
 - Click **Tasks** on the OfficeMate main window toolbar and select **Products and Services**.
2. Select a product type from the **Product Type** drop-down menu.
3. Search for and select a specific product using the search options or click **New Product** to add a new product to the OfficeMate products database.
4. Depending on the product type that you are modifying or adding, complete one of the tasks below:
 - If you are modifying or adding lens treatments, select the appropriate radio button from the **Frame and Lens Add On Type** box, click the **VSP Product** tab, and select the appropriate radio button and drop-down menu selection.

NOTE If the product does not fit within one of the five radio button categories, the product does not need to be mapped.

- If you are adding or modifying ophthalmic lenses, select a lens category from the **Lens Category** drop-down menu, select a material from the **Material** drop-down menu, click the **VSP Product** tab, and select a lens style from the **Lens** drop-down menu. If the lens style is not listed in the

Lens drop-down menu, select **Other (Indicate Lens Not Listed) - Other** from the menu and type the lens style in the **Lens Not Listed** box.

5. Click **Save** and select one of the following options:
 - **Save** to save the information and keep the Products window open.
 - **Save and New** to save the information and create a new product.
 - **Save and Exit** to close the Products window.

Setting Up Service Attributes

The VSP interface requires that the attribute description must correspond with the CPT code assigned to a service. For each of the services that you might include on a VSP claim, ensure that the description in the Attribute drop-down matches the description in the CPT drop-down menu.

	Base Cost	Base Fee	Total Fee	Product Code	UPC Code	CPT
1	0.00	0.00	0.00			65600
2						
3						
4						
5						

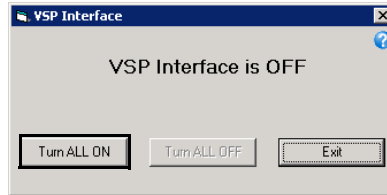
Exam Cat./Base	Attributes	CPT/HCPCS Code	Prod. Cost	Prod. Fee	Fee Changed
	Tattoo Cornea	65600	\$0.00	\$0.00	8/22/2002
Type			\$0.00	\$0.00	
Other			\$0.00	\$0.00	
Other			\$0.00	\$0.00	
Other			\$0.00	\$0.00	
Other			\$0.00	\$0.00	

For more information, go to [To maintain service attributes on page 287](#).

Turning On the VSP Interface

Once you have set up your VSP insurance carrier and plan, product attributes, and ophthalmic lenses, you are ready to begin transmitting lab orders and claims electronically to VSP, and you can now turn the VSP interface on:

1. In the OfficeMate Administration main window, click the **VSP** icon.
2. Select **VSP Interface On/Off**.
The VSP Interface window opens.
3. Click **Turn All On**.

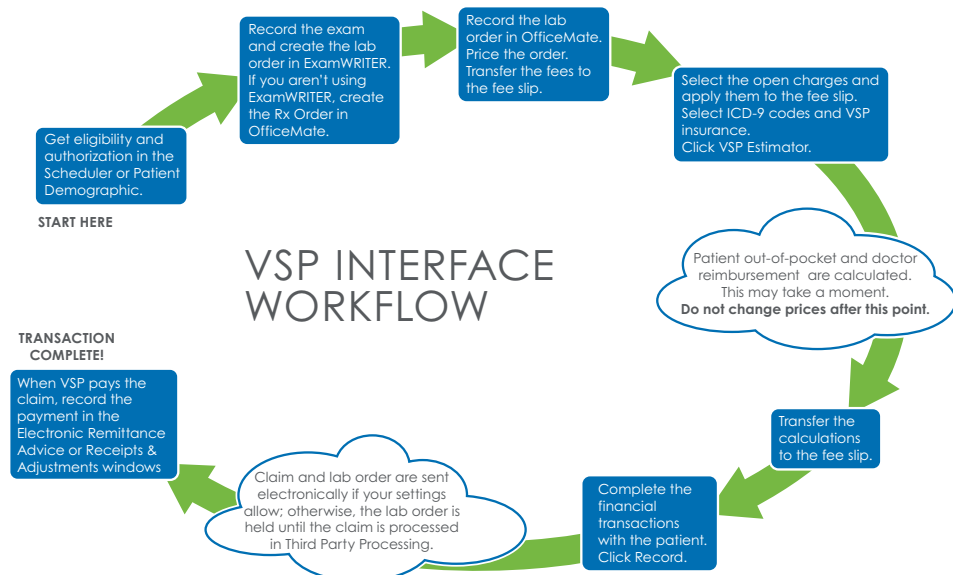


NOTE

You will not be able to turn the VSP interface on until you have set up a VSP insurance carrier and plan in the Insurance Billing Initial Setup window.

Understanding the VSP Interface Workflow

Understanding the workflow of the VSP Interface is just as important as the steps you took in its initial setup. Fortunately, the workflow for VSP patients is not drastically different than the workflow you would implement for any other patient. Ultimately, implementing this workflow enables your practice to streamline your patient encounters and improve the accuracy of your patient out-of-pocket and doctor reimbursement estimates.



Getting Member Eligibility & VSP Authorization

Deviating from this workflow, either by taking shortcuts or changing prices, will result in VSP interface errors, failed claims, and rejected lab orders. The steps in the VSP workflow are detailed in the following sections:

- [Getting Member Eligibility & VSP Authorization, 534](#)
- [Researching VSP Insurance Claims & Lab Orders, 541](#)
- [Recording Insurance Payments Using Electronic Remittance Advice, 370](#)

OfficeMate gives you the ability to get member eligibility and VSP authorization through Eyefinity directly through the Patient Demographic window. This section tells you how to get member eligibility and VSP authorization, including how

- [To set up a patient's VSP insurance, 534](#)
- [To obtain VSP member eligibility and authorization information, 535](#)
- [To view eligibility, doctor reports, and packing slips, 539](#)
- [To view authorizations, 540](#)

NOTE

In the “[Setting Up the OfficeMate VSP Interface Manually](#)” section, you were advised to edit the VSP insurance carrier so the Insurance Type is set to Commercial Insurance and the E-Claim Processor is set to Print to Paper in the Insurance Billing Initial Setup window until you were ready to begin sending claims. You should now, if you have not done so already, edit the VSP insurance carrier so the Insurance Type is set to **VSP** and the E-Claim Processor is set to **VSP Interface**. For more information, go to [To set up insurance carrier information on page 519](#).

This section calls attention only to the fields and options required for the VSP Interface. For complete information about setting up patient insurance information, go to [To record insurance information on page 215](#).

► To set up a patient's VSP insurance

1. Open the Patient Demographic window. For more information about opening the Patient Demographic window, go to [Opening Patient Records on page 204](#).
2. Ensure that you have recorded the patient's name, address, home phone number, sex, date of birth, social security number, marital status, and employment status in the Demographic tab.
3. Click the **Insurance** tab in the Patient Demographic window.
4. Click **New Ins**.
5. Select **Vision Service Plan** or **VSP** from the **Insurance Name** drop-down menu.
6. Type the last four digits of primary member's social security number or unique ID in the **Insured ID (Box 1a)** text box or select the **Patient SSN** check box.

NOTE

Alternatively, you can enter the complete social security number or VSP unique ID number.

7. Select **Vision Service Plan** or **VSP** from the **Plan Name (Box 11c)** drop-down menu.

- Select the patient's relationship to the insured party from the **Relationship to Insured (Box 6)** drop-down menu.

Patient: Sally Patient 28 (913) 111-2222 [NOTES] Johnny Doctor Balance: \$240.00

Demographic Insurance Marketing Notes Recall Financial Info Correspondence Hx HIPAA eDocuments Patient Exams

New Ins. Delete Ins. Glance Notes Addl Info CMS Form UB04 Form Deactivate

	Insurance Name	Insurance ID No	Address	Plan Name	Inactive	Notes
1	Vision Service Plan		P.O. Box 997100, Sacramento	Vision Service Plan	<input type="checkbox"/>	
2	AARP Health Care Options		United HealthCare Claim Division	AARP Health Care Options	<input type="checkbox"/>	

Insurance Name: Vision Service Plan
 Insured ID (Box 1a): 111223333
 Plan Name (Box 11c): Vision Service Plan
 Policy Group (Box 11):
 Relationship to Insured (Box 6): Self
 Type: Vision Medical
 Signature On File:
 Date: 06/16/2011
 Signature Source: Both CMS-1500 and Auth. f
 Release Information?: 06/16/2011

Insured Party
 Last Name: Patient
 First Name: Sally Initial:
 Address1 (Box 7): 141 W Wilshire Ave
 Address2 (Box 7):
 City (Box 7): Fullerton
 State/ZIP (Box 7): California 92832
 Home Ph # (Box 7): (949) 390-8320
 Employer (Box 11b):
 Sex (Box 11a): Male Female Bad Address
 DOB (Box 11a): 09/14/1982
 Linked Patients:

Eligibility/Authorization Edit F2 Find Clear

► To obtain VSP member eligibility and authorization information

NOTE

OfficeMate Administration users can view VSP eligibility and authorizations, but cannot edit this information. Only OfficeMate location users can add and edit VSP eligibility and authorization information.

- Open the VSP member's Patient Demographic window.
- Click the **Insurance** tab.
- Select **Vision Service Plan** or **VSP** from the list of patient insurances.
- If you already have an authorization, click **Enter Existing Authorization** to manually enter and validate an authorization number.
- Click **Eligibility/Authorization**.

NOTES

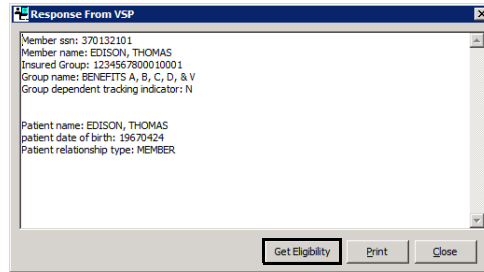
- You must click Eligibility/Authorization even if you entered an existing authorization.
- A check mark next to the Eligibility/Authorization button indicates that the patient has an active VSP authorization that is less than thirty days old.

The VSP Eligibility/Authorization window opens.

- Click **Get Authorization** to retrieve eligibility information, a new authorization, or a back-dated authorization.

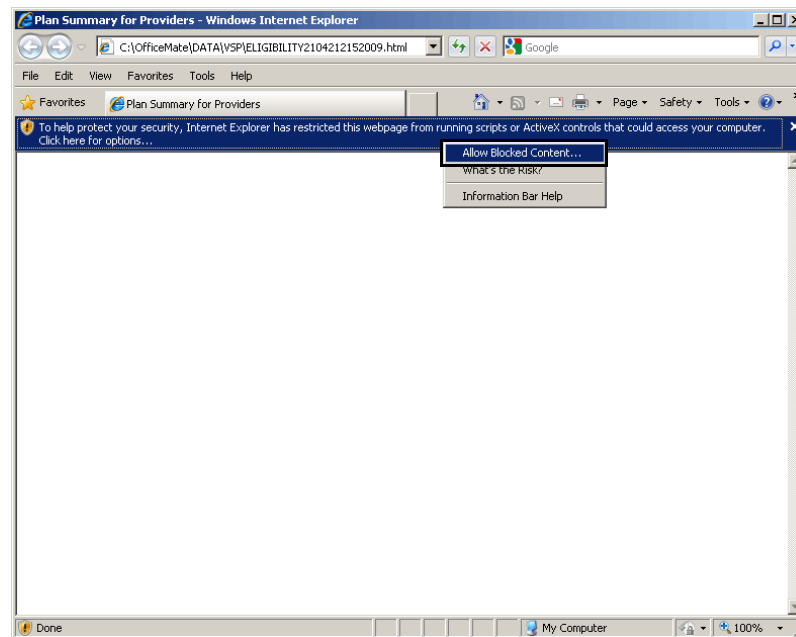
The **Response from VSP** window opens and displays the VSP members(s) and groups(s) that match the information recorded for your patient.

7. If more than one patient or group are displayed, select your patient and the patient's current group and click **Get Eligibility**.



Your Web browser opens to display the patient's eligibility.

8. If a security message appears at the top of the window, click it, select **Allow Blocked Content**, and click **Yes** on the Security Warning window to run the active content.



The Patient Eligibility for Providers Web page opens and displays the plan summary for the patient.

Plan Summary For: GARY			
VSP Program: VSP WellVision® Plan Through a VSP Doctor Print			
Benefit	Coverage	Copay	Frequency
Your Coverage with a VSP Doctor			
WellVision® Exam	• Covered after copay.	\$10.00	Every 12 months.
Description	• Only VSP offers a WellVision Exam, focused on your eyes and overall wellness. Your VSP doctor can see if you have vision problems and signs of other health conditions too.		
Contact Lens Exam	• Covered after copay.	Up to \$60.00	Every 12 months.
Description	• During your contact lens exam, your VSP doctor ensures your contacts fit properly and tests your vision. This exam is in addition to your WellVision Exam.		
Retinal Screening	• Covered after copay.	Up to \$39.00	As needed.
Description	• Retinal images help your VSP doctor find possible signs of eye disease. This is an enhancement to your WellVision Exam.		
Prescription Lenses	• Covered after copay. Single vision, lined bifocal, lined trifocal.	\$25.00	Every 12 months.
Fully Covered Lens Enhancements	<ul style="list-style-type: none"> • Custom Progressive Lenses • Premium Progressive Lenses • Standard Progressive Lenses 		
Lens Enhancements Covered with Additional Copay	• Anti-Reflective Coatings	\$37.00 - \$75.00	
	• Edge Polish	\$32.00	
	• High Index lenses	\$45.00 - \$115.00	
	• Photochromic adaptive lenses	\$62.00 - \$76.00	
	• Tinted (colored) lenses	\$13.00 - \$15.00	
	• Polarized lenses	\$53.00 - \$93.00	
	• Polycarbonate lenses	\$23.00 - \$28.00	
	• Scratch-Resistant Coating	\$15.00 - \$29.00	
	• UV Protection	\$14.00	

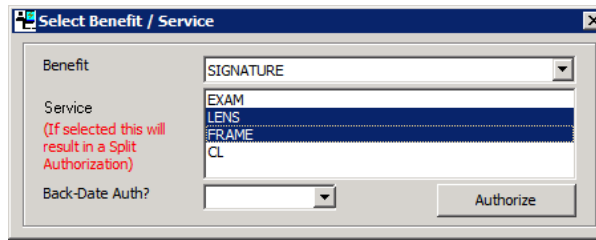
- Click the **x** in the top right corner of the window to close the Patient Eligibility for Providers window after viewing or printing the information.

NOTE

You can view and print the eligibility information at any time from the VSP **Eligibility/Authorization** window. Double-click the authorization that you want to view.

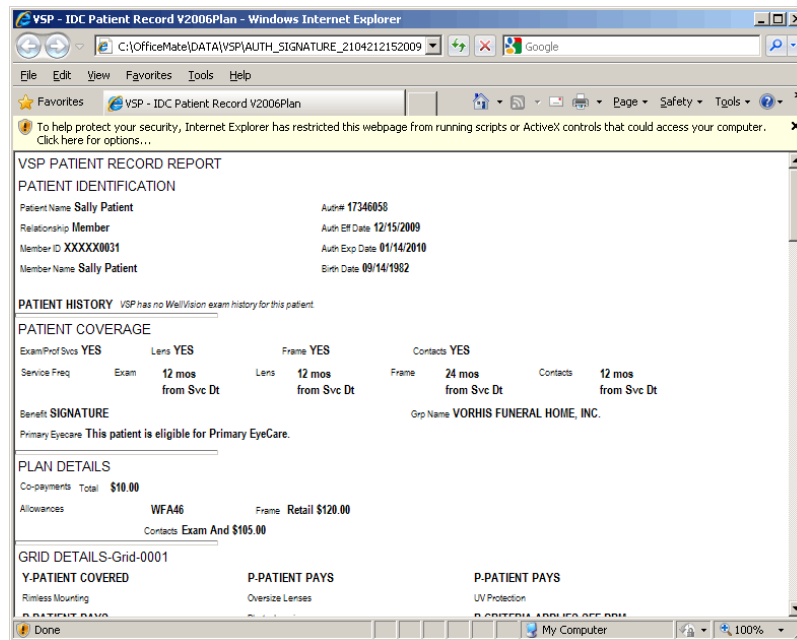
- Select a benefit from the **Benefit** drop-down menu.
A list of services is displayed in the **Service** box.
- If you only want to obtain authorization for a specific service or group of services (split authorization), select them from the **Service** box.
- If this is a back-dated authorization, type the date of the service in the **Back-Date Auth?** field.

- Click **Authorize** to obtain authorization for all of the services listed for the benefit you selected.

**NOTE**

When CL Exam is selected, Lens is also automatically selected because VSP expects a lens to accompany a contact lens exam.

The VSP-IDC Patient Record Web page opens.



- Click the **x** in the top right corner of the window to close the VSP-IDC Patient Record window after viewing or printing the information.
- If you are coordinating benefits between primary and secondary VSP insurances, repeat steps 3–14 for the secondary plan.

NOTE

You can view and print authorizations at any time. For more information on viewing and printing authorizations, go to [To view authorizations on page 540](#).

► **To view eligibility, doctor reports, and packing slips**

You can quickly view eligibility, doctor reports, and packing slips that you have received from Eyefinity on the Patient Demographic window.

1. Open the VSP member's Patient Demographic window.
2. Click the **Insurance** tab.
3. Select **Vision Service Plan** or **VSP** from the list of patient insurances.
4. Click **Eligibility/Authorization**.

The VSP Eligibility/Authorization window opens.

5. Select an authorization from those listed at the top of the window.
6. Click **View Eligibility**, as needed, to view the patient's eligibility that was transmitted from VSP.

NOTE

Eligibility information is not available until an authorization has been received from VSP. For information about obtaining an authorization, go to [To obtain VSP member eligibility and authorization information on page 535](#).

Your Web browser opens to display the eligibility information.

7. If you need to delete an authorization so a new one can be obtained, select the authorization from the list and click **Delete**.

NOTE

Deleting an authorization removes it from OfficeMate and from VSP.

8. Click **Dr. Service Report and Packing Slip** to view reports that are associated with the selected authorization.

NOTE

The doctor service report and packing slip are not available until the claim has been submitted.

Authorization ID	Issued Date	Insured	Benefit	Effective Date	Expiration Date	Link	View
17427116	12/14/2011	Self	SIGNATURE	12/14/2011	01/13/2012	✗	Delete
17426850	11/30/2011	Self	SIGNATURE (Services)Ophthalmic Lens	11/30/2011	12/30/2011	✗	Delete
27836607	11/29/2011	Self	SIGNATURE (Services)Ophthalmic Lens	11/29/2011	12/29/2011	✗	Delete
27835812	11/10/2011	Self	SIGNATURE	11/10/2011	12/10/2011	✗	Delete

Contact Ph#: _____

Patient Coverage: Exam/Prof Svcs: NO Lens: NO Frame: NO Contacts: NO

Co-Payments: Total: _____ Exam/Prof Svcs: \$10.00 Lens: _____ Frame: _____ Material: \$25.00 CL Exam: \$60.00 CL Mat: \$25.00

Allowances: WFA: \$50.00 Retail: \$130.00 Exam and Total: \$999.99

VSP Group Comment Codes: L064 D028

Grid Details: Oversize Lenses Polarized/Laminated Anti-Reflective Low Vision
 Blended Bifocal UV Protection Color Coatings
 Progressive Multifocals Plano Lenses Mirror/Ski Type Coatings
 Polycarbonate Solid Tints and Dyes Edge Treatments (High Luster)
 High and Mid Index Plastic Dyes (Gradient) Rimless Mounting
 Photochromic Lenses Scratch Resistant Coatings Vision Therapy

- Click **Exit** to close the VSP Eligibility/Authorization window.

► **To view authorizations**

- Open the VSP member's Patient Demographic window.
- Click the **Insurance** tab.
- Select **Vision Service Plan** or **VSP** from the list of patient insurances.
- Click **Eligibility/Authorization**.

NOTE A check mark next to the Eligibility/Authorization button indicates that the patient has an active VSP authorization that is less than thirty days old.

The VSP Eligibility/Authorization window opens.

- Double-click an authorization or select an authorization from those listed at the top of the window and click **View**.
- To print a list of the patient's VSP authorizations, click **Print List**.

- Click **Exit** to close the VSP Eligibility/Authorization window.

Coordinating Benefits

Often, patients are eligible for benefits under two concurrent VSP plans. For example, a patient who has VSP benefits through her employer and her spouse's employer may be eligible to coordinate those benefits and, therefore, qualify for more services.

To coordinate VSP benefits, perform the following steps:

- Record both VSP insurance plans on the Patient Demographics window (Insurance tab). For more information, go to [To set up a patient's VSP insurance on page 534](#).
- Record or retrieve an authorization for both plans. For more information, go to [To obtain VSP member eligibility and authorization information on page 535](#).
- Record the order at a store location in OfficeMate.

Researching VSP Insurance Claims & Lab Orders

This section calls attention only to the fields and options particular to the VSP Interface. For complete information about researching insurance claims, go to [Using the Batch History on page 480](#).

4. When prompted on the Rx Order window or Fee Slip window, select the authorization for the patient's primary VSP insurance plan (usually the plan where Self is listed as the insured).
5. Click **COB** on the Fee Slip window to select the second authorization. Since coordinated benefits can be applied an infinite number of ways, you must edit the fee slip pricing to apply the benefits as desired.

Once the fee slip is recorded, the VSP claim and lab order are sent electronically. You can verify the status of your claim and lab order in the Third Party Processing window.

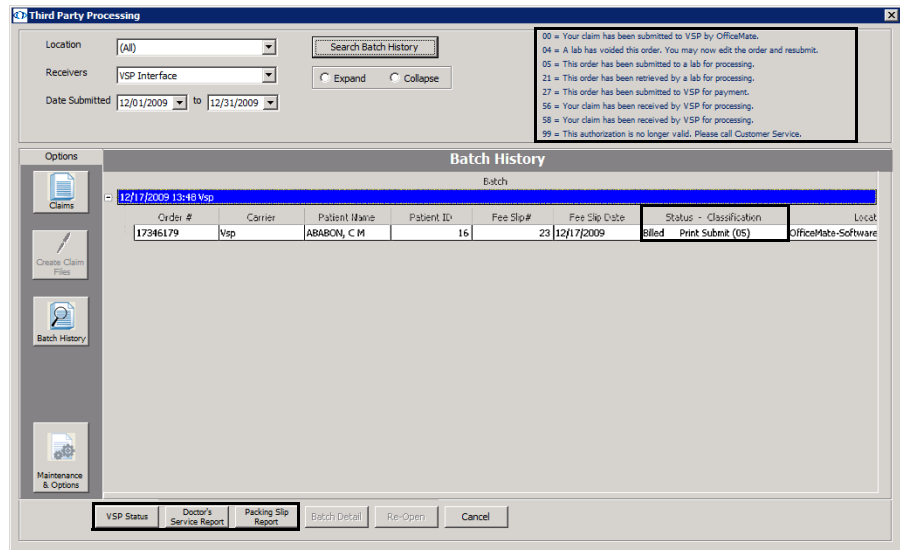
NOTE For information about correcting claims, go to [Correcting Errors in Insurance Claims on page 459](#).

To view the status of VSP claims and lab orders, perform the following steps:

1. From the OfficeMate main window, click the **3rd Party** icon.
The Third Party Processing window opens.
2. Click **Batch History**.
3. Select a store from the **Location** drop-down menu as needed.
4. Select **VSP Interface** from the **Receivers** drop-down menu.
5. Narrow your search by typing beginning and ending dates in the **Date Submitted** fields, as needed.
6. Click **Search Batch History**.
7. Select a claim from the search results.
8. Click **VSP Status**.

The Status Classification column populates with status information received from VSP.

- Compare the number listed in the Status Classification column with the code list displayed at the top of the window.



- Click **Doctor's Service Report** to view the doctor's service report, as needed.
- Click **Packing Slip Report** to view and print the packing slip, as needed.
- Click **Cancel** when you are finished.

Creating & Printing Reports & Statements

13

For more information on creating reports, watch the “Reports” videos.

In this chapter:

- [Opening the Reports & Statements Window, 544](#)
- [Adding & Removing Reports From Tabs, 544](#)
- [Creating & Printing Daily Reports, 549](#)
- [Creating & Printing Weekly Reports, 552](#)
- [Creating & Printing Monthly Reports, 554](#)
- [Creating & Printing Yearly Reports, 557](#)
- [Creating & Printing On Demand Reports, 560](#)
- [Creating & Printing Internal Marketing Reports, 562](#)
- [Creating & Printing Statements, 563](#)
- [Creating & Printing Business Analysis Reports, 568](#)
- [Creating & Printing Custom Reports, 570](#)
- [Viewing the Business Insights Dashboard, *Powered by The EDGE*, 630](#)
- [Creating & Printing the Exam Analysis Report, 630](#)
- [Viewing the Report History, 633](#)
- [List of Reports, 635](#)

You can create and print reports and statements for analyzing your finances, reviewing your marketing strategies, and viewing your sales. You can produce reports daily, weekly, monthly, yearly, or on demand.

NOTES

- Before you create and print reports and statements, set up your security preferences for reports. For more information on setting up security preferences, go to [Setting Up Security on page 96](#).
- Any transactions posted in OfficeMate Administration will only be listed on the OfficeMate Administration reports. To include OfficeMate Administration transactions in a report, select an administrative location or All from the location drop-down menu in the Selection Criteria and Sort Order.
- Eyefinity suggests that you print the following audit reports on a daily or monthly basis to help you effectively manage your practice's finances: [Accounts Receivable Variance](#), [Adjustment Register](#), [Applied Payment Register by Date](#), [Products Sold](#), [Day Sheet by Provider on Fee Slip by Line Item](#), [Deposit Ticket](#), [Discount Register](#), [Fee Slip Detail](#), [Insurance Aging by Patient Detail](#), [Monthly Production Summary](#), [Patient Aging - Detail](#), [Production](#), [Returns And Refunds](#), and [Unapplied Amounts](#).
- Print reports and statements using 8½" × 11" paper stock.

Opening the Reports & Statements Window

Open the Reports & Statements window using one of the following methods:

- Click the **Reports** icon.
- Click the **Reports** menu on the main window toolbar and, depending on the report you want to create, select **OfficeMate** or **ExamWRITER**.
-

If you do *not* have access to the business insights financial dashboard, *powered by* The EDGE, the default tab that will open when you open the Reports & Statements window will be the Daily tab. If you do have access to the business insights financial dashboard, *powered by* The EDGE, the default tab that will open when you open the Reports & Statements window will be the Dashboard tab.

Adding & Removing Reports From Tabs

This section tells you how to add and remove reports from the Daily, Weekly, Monthly, Yearly, and On Demand tabs in the Reports & Statements window, including how

- [To add reports to tabs, 544](#)
- [To remove reports from tabs, 549](#)

► To add reports to tabs

NOTE

You only need to add a report to a tab once; you do not need to add a report to a tab every time you open the Reports & Statements window.

1. Open the Reports & Statements window. For more information on opening this window, go to [Opening the Reports & Statements Window on page 544](#).
2. Click the **Daily**, **Weekly**, **Monthly**, **Yearly**, or **On Demand** tab.

3. Click **Add**.
The Report Listing window opens.

4. Double-click on a report or select it and click **Select**.

NOTE

Click the **+** (plus sign) next to the report category to view and select the reports within the category. Press and hold the **Ctrl** or **Shift** key to select multiple reports. The reports are located in the following categories:

Aging

Frame Aging
 Insurance Aging by Patient Detail
 Insurance Aging by Patient Summary
 Insurance Aging Summary
 Patient Aging - Detail
 Patient Aging - Summary

Conversion

Conversion Exception

Documents

Labels
 Post Card

Financial Transactions

Accounts Receivable Variance
 Adjustment Register
 Applied Payment
 Applied Payment Register by Date
 Applied Payment Summary
 Billing History
 Cash Reconciliation
 Daily Transaction Audit
 Day Sheet by Provider on Fee Slip
 Day Sheet by Provider on Fee Slip Line Item
 Deposit Adjustments
 Deposit Ticket
 Deposit Ticket Summary with Variance
 Discount Register
 Fee Slip
 Fee Slip Audit
 Fee Slip Detail
 Fee Slip Detail by Resource
 Fee Slips On Hold
 Open Charges
 Patient Refund of Unapplied Amounts
 Receipts Journal
 Returns And Refunds
 Sales Tax
 Unapplied Amounts
 Void Fee Slip Register

**NOTE,
CONT.****Insurance Financial Transactions**

Claim Edit Errors
Insurance Analysis
Insurance Audit
Insurance Charge Back
Insurance Charges
Insurance Sales Total
Transferred Unapplied Ins. Amounts

Inventory

Consignment
Frame Stock Status
Inventory Adjustments
Inventory Profitability
Inventory Transfer
Inventory Valuation
Location Inventory
Order Recommendation
Physical Inventory Variance
Product Transaction Details
Purchase Order
Purchase Order - Back Order
Purchase Order Detailed
Purchase Order Summary
Receiving History
Stock Status
Transfer Ticket

Lab Orders

Lab Orders
Lab Orders Outstanding
Lab Orders Patient Follow-Up
Lab Orders Patient Notification
Lab Orders Received & Notified
Re-Do Lab Orders

Lists

Contact Lens Listing
Diagnosis Code Listing
Frame Listing
Ophthalmic Lens Listing
Other Product Listing
Procedure Code Listing
Refer to Doctor Tracking
Service Listing

**NOTE,
CONT.****Patient Demographics**

Bad Address List
Deleted Patients
Inactive Patient List
New Patient Demographics
Patient Demographics
Patient List
Referrals

Product Sales

Contact Lens Sales by Patient
Frame Sales Detail by Manufacturer
Frame Sales Summary
Products Sold
Top Selling Frames - Detail
Top Selling Frames - Summary

Production

Monthly Production Summary
Production
Production Summary by Provider on Fee Slip
Production Summary by Provider on Fee Slip Line Item

Quick List

Patients in Quick List

Recalls

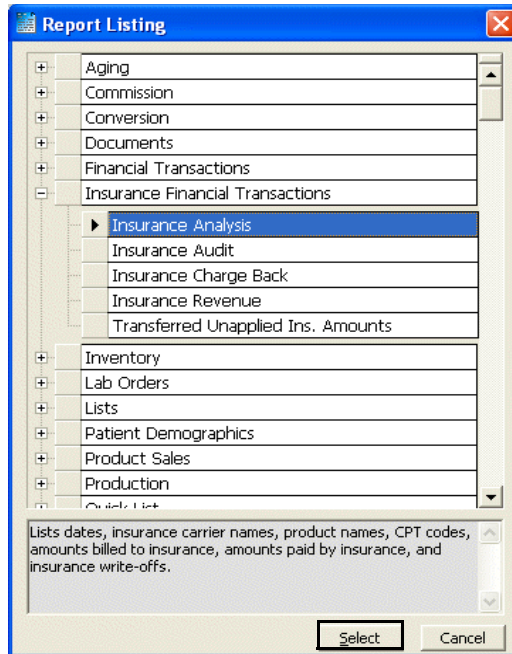
Patients w/No Recall Date
Patients w/Past Due Recall

Scheduler

Appointment Schedule
Cancellations And No Shows

Setup Listings

General Ledger Setup Listing
Insurance Listing
Provider Listing
Referring Physician Listing
Vendor Listing



The report is added to the list of reports in the tab that you selected in step 2.

► To remove reports from tabs

1. Open the Reports & Statements window. For more information on opening this window, go to [Opening the Reports & Statements Window on page 544](#).
2. Click the **Daily**, **Weekly**, **Monthly**, **Yearly**, or **On Demand** tab.
3. Click **Remove**.

The Remove Reports window opens.

4. Click **Yes**.



The report is removed from the list of reports in the tab that you selected in step 2.

Creating & Printing Daily Reports

1. Open the Reports & Statements window. For more information on opening this window, go to [Opening the Reports & Statements Window on page 544](#).

NOTE

If you do *not* have access to the business insights financial dashboard, *powered by* The EDGE, the default tab that will open when you open the Reports & Statements window will be the Daily tab.

2. Add or remove reports from the list of reports. For more information on adding and removing reports, go to [Adding & Removing Reports From Tabs on page 544](#).
3. Click the **Alphabetically** or **By Category** radio button at the bottom of the window to view the list of reports alphabetically or categorically.
4. Select a report to create and print using one of the following methods:
 - Select the **Prt** check box next to the report that you want to create and print.
 - Click **Select All** to select all reports.

NOTE

Click **Unselect All** to deselect all reports.

5. Type or select a date from the **Date** box and click **Set Date**.

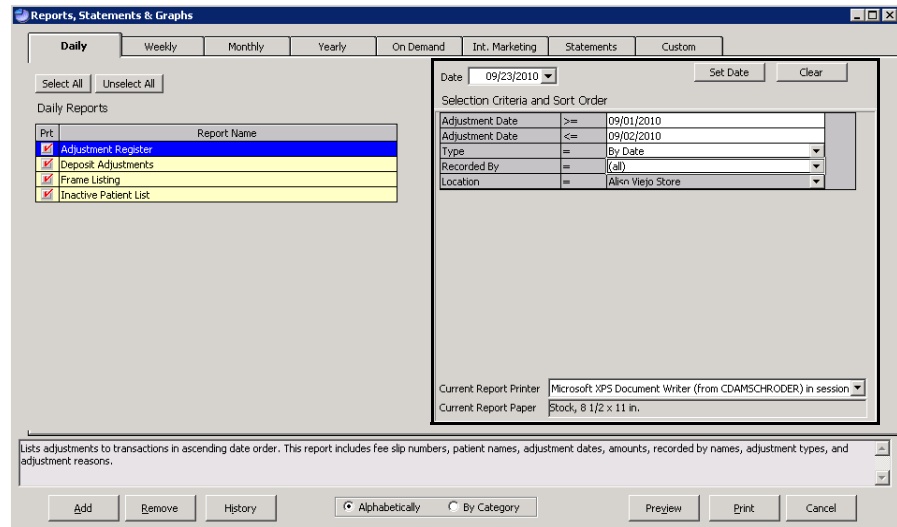
The date in the Date box is transferred to the reports that have selection dates.

NOTE

The date in the Date box is automatically set to the current day.

6. Complete the **Selections Criteria and Sort Order** fields with appropriate information. For more information on completing these fields for the report(s) that you are printing, go to the report(s) in the [List of Reports on page 635](#).

7. Select a printer or fax program from the **Current Report Printer** drop-down menu.



8. Select a report and click **Preview** to preview the report. If you do not want to preview reports, go to step 10.

The Preview Window opens.

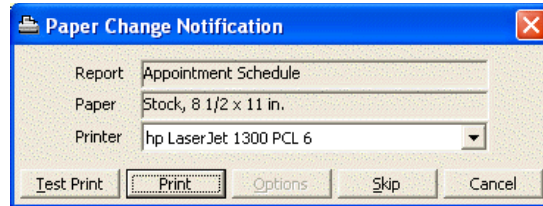
9. Complete one or more of the following tasks:
 - Click the **Print Report** icon to open the Print window and print the report using the current report printer.
 - Click the **Export Report** icon to open the Export window and choose a format and destination for your exported report.

NOTE

If you are exporting the report to a Microsoft Windows application, such as Excel, select the **MS Excel 97-2000 (Data Only)** format and **Disk file** destination in the Export window and click **OK**. Select the **Column width based on objects in the Details** radio button and *all* the check boxes in the Excel Format Options window and click **OK**.

- Close the Preview Window.
10. Click **Print** to print or fax the report(s).
The Print Reports window opens.
 11. Click **Yes** to print or fax all of the reports that you selected in step 4.
The Paper Change Notification window opens.
 12. Select a printer or fax program from the **Printer** drop-down menu.

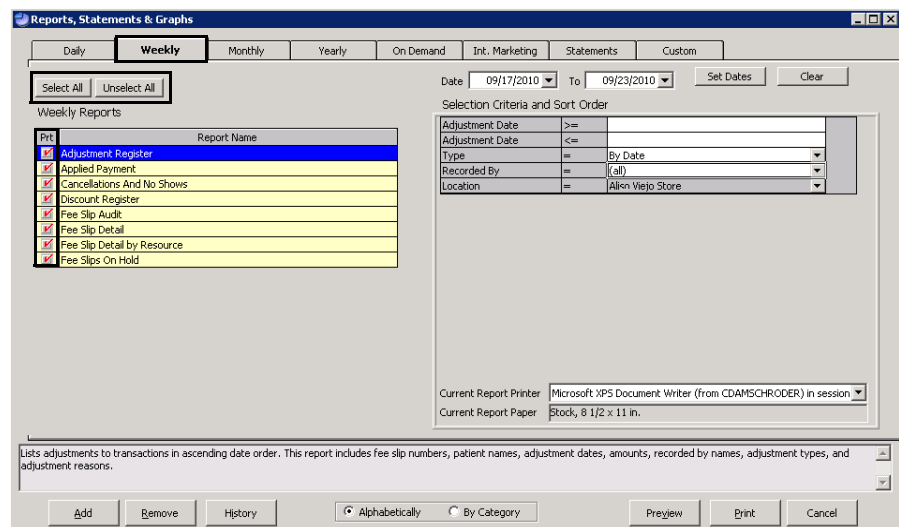
13. Complete one or more of the following tasks:
 - Click **Test Print** to print or fax a test page.
 - Click **Print** to print or fax the report(s).
 - Click **Skip** to skip printing or faxing the report and print or fax the next report that you selected.



Creating & Printing Weekly Reports

1. Open the Reports & Statements window. For more information on opening this window, go to [Opening the Reports & Statements Window on page 544](#).
2. Click the **Weekly** tab.
3. Add or remove reports from the list of reports. For more information on adding and removing reports, go to [Adding & Removing Reports From Tabs on page 544](#).
4. Click the **Alphabetically** or **By Category** radio button at the bottom of the window to view the list of reports alphabetically or categorically.
5. Select a report to create and print using one of the following methods:
 - Select the **Prt** check box next to the report that you want to create and print.
 - Click **Select All** to select all reports.

NOTE Click **Unselect All** to deselect all reports.



6. Type or select dates from the **Date** and **To** boxes and click **Set Dates**.
The date in the Date box is transferred to the reports that have selection dates.

NOTE The date in the Date box is automatically set to seven days before the current day. The date in the To box is automatically set to the current day.

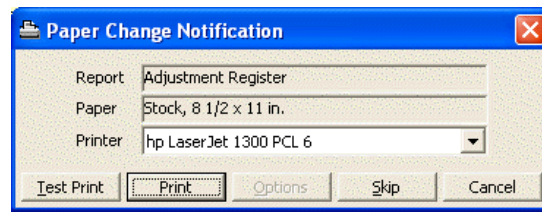
7. Complete the **Selections Criteria and Sort Order** fields with appropriate information. For more information on completing these fields for the report(s) that you are printing, go to the report(s) in the [List of Reports on page 635](#).
8. Select a printer or fax program from the **Current Report Printer** drop-down menu.

9. Select a report and click **Preview** to preview the report. If you do not want to preview reports, go to step 11.
The Preview Window opens.
10. Complete one or more of the following tasks:
 - Click the **Print Report** icon to open the Print window and print the report using the current report printer.
 - Click the **Export Report** icon to open the Export window and choose a format and destination for your exported report.

NOTE If you are exporting the report to a Microsoft Windows application, such as Excel, select the **MS Excel 97-2000 (Data Only)** format and **Disk file** destination in the Export window and click **OK**. Select the **Column width based on objects in the Details** radio button and *all* the check boxes in the Excel Format Options window and click **OK**.

- Close the Preview Window.
11. Click **Print** to print or fax the report(s).
The Print Reports window opens.

12. Click **Yes** to print or fax all of the reports that you selected in step 5.
The Paper Change Notification window opens.
13. Select a printer or fax program from the **Printer** drop-down menu.
14. Complete one or more of the following tasks:
 - Click **Test Print** to print or fax a test page.
 - Click **Print** to print or fax the report(s).
 - Click **Skip** to skip printing or faxing the report and print or fax the next report that you selected.



Creating & Printing Monthly Reports

This section tells you how to create and print monthly reports, including how

- [To create & print monthly reports, 554](#)
- [To balance accounts receivable, 557](#)

► To create & print monthly reports

1. Open the Reports & Statements window. For more information on opening this window, go to [Opening the Reports & Statements Window on page 544](#).
2. Click the **Monthly** tab.
3. Add or remove reports from the list of reports. For more information on adding and removing reports, go to [Adding & Removing Reports From Tabs on page 544](#).
4. Click the **Alphabetically** or **By Category** radio button at the bottom of the window to view the list of reports alphabetically or categorically.

5. Select a report to create and print using one of the following methods:
 - Select the **Prt** check box next to the report that you want to create and print.
 - Click **Select All** to select all reports.

NOTE Click **Unselect All** to deselect all reports.

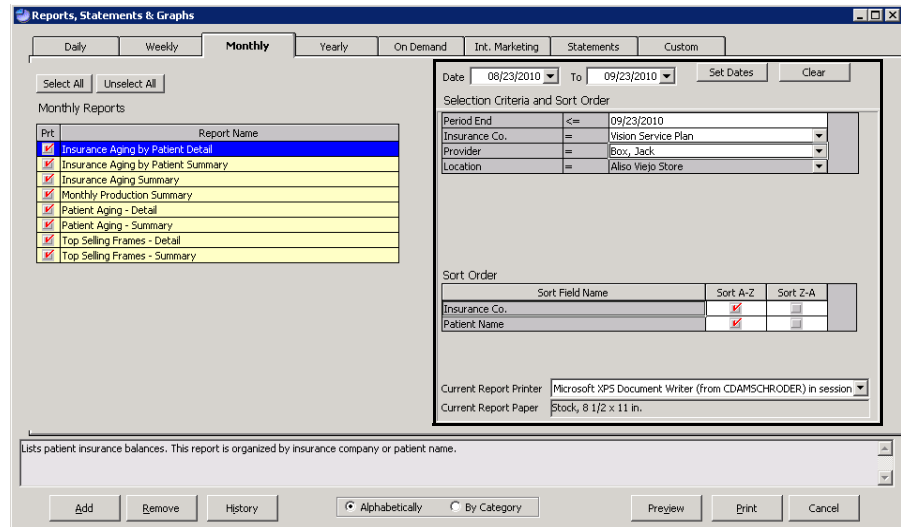
The screenshot shows the 'Reports, Statements & Graphs' dialog box. The 'Monthly' tab is selected. The 'Date' field is set to 08/23/2010 and the 'To' field is set to 09/23/2010. The 'Selection Criteria and Sort Order' section is visible, showing fields for Period End, Insurance Co., Provider, and Location. The 'Sort Order' section shows fields for Sort Field Name, Sort A-Z, and Sort Z-A. The 'Current Report Printer' is set to 'Microsoft XPS Document Writer (from CDAMSCHRODER) in session' and the 'Current Report Paper' is 'Stock, 8 1/2 x 11 in.'

6. Type or select dates from the **Date** and **To** boxes and click **Set Dates**.
The date in the Date box is transferred to the reports that have selection dates.

NOTE The date in the Date box is automatically set to 30 days before the current day. The date in the To box is automatically set to the current day.

7. Complete the **Selections Criteria and Sort Order** fields with appropriate information. For more information on completing these fields for the report(s) that you are printing, go to the report(s) in the [List of Reports on page 635](#).

8. Select a printer or fax program from the **Current Report Printer** drop-down menu.



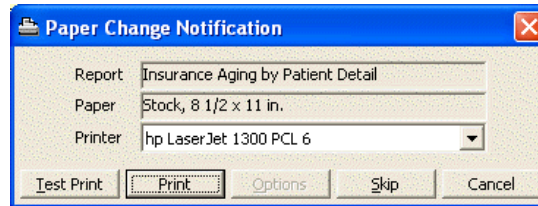
9. Select a report and click **Preview** to preview the report. If you do not want to preview reports, go to step 10.
 The Preview Window opens.
10. Complete one or more of the following tasks:
 - Click the **Print Report** icon to open the Print window and print the report using the current report printer.
 - Click the **Export Report** icon to open the Export window and choose a format and destination for your exported report.

NOTE

If you are exporting the report to a Microsoft Windows application, such as Excel, select the **MS Excel 97-2000 (Data Only)** format and **Disk file** destination in the Export window and click **OK**. Select the **Column width based on objects in the Details** radio button and *all* the check boxes in the Excel Format Options window and click **OK**.

- Close the Preview Window.
11. Click **Print** to print or fax the report(s).
 The Print Reports window opens.
 12. Click **Yes** to print or fax all of the reports that you selected in step 5.
 The Paper Change Notification window opens.
 13. Select a printer or fax program from the **Printer** drop-down menu.

14. Complete one or more of the following tasks:
 - Click **Test Print** to print or fax a test page.
 - Click **Print** to print or fax the report(s).
 - Click **Skip** to skip printing or faxing the report and print or fax the next report that you selected.



► To balance accounts receivable

1. Establish a “Beginning Balance” amount using the following instructions:
 - a. Create the Patient Aging Summary report for the prior period.
 - b. Create the Insurance Aging Summary report for the prior period.
 - c. Add the totals from the Patient Aging Summary report and the Insurance Aging Summary report for the prior period.
 - d. Create the Accounts Receivable Variance report for the prior period and add this total to the total from step c.
2. Create the Patient Aging Summary report for the current period.
3. Create the Insurance Aging Summary report for the current period.
4. Create the Accounts Receivable Variance report for the current period.
5. Add the totals of the reports you created in steps 2–4; this new total is the “New Adjusted A/R Balance” amount.
6. Verify the new open A/R balance using the following instructions:
 - a. Create the Monthly Production Summary report for the current period.
 - b. Add the “Net Change to A/R” amount to the “Beginning Balance.”
 - c. Ensure that the total from step b is the same as the “New Adjusted A/R Balance” amount.

Creating & Printing Yearly Reports

1. Open the Reports & Statements window. For more information on opening this window, go to [Opening the Reports & Statements Window on page 544](#).
2. Click the **Yearly** tab.
3. Add or remove reports from the list of reports. For more information on adding and removing reports, go to [Adding & Removing Reports From Tabs on page 544](#).
4. Click the **Alphabetically** or **By Category** radio button at the bottom of the window to view the list of reports alphabetically or categorically.

5. Select a report to create and print using one of the following methods:
 - Select the **Prt** check box next to the report that you want to create and print.
 - Click **Select All** to select all reports.

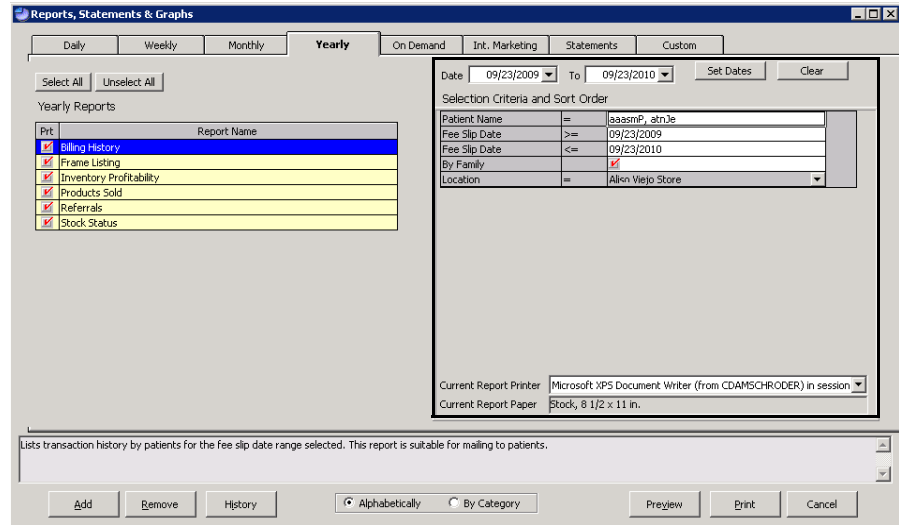
NOTE Click **Unselect All** to deselect all reports.

6. Type or select dates from the **Date** and **To** boxes and click **Set Date**.
 The date in the Date box is transferred to the reports that have selection dates.

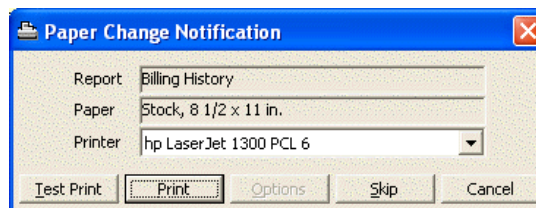
NOTE The date in the Date box is automatically set to one year before the current day. The date in the To box is automatically set to the current day.

7. Complete the **Selections Criteria and Sort Order** fields with appropriate information. For more information on completing these fields for the report(s) that you are printing, go to the report(s) in the [List of Reports on page 635](#).

8. Select a printer or fax program from the **Current Report Printer** drop-down menu.



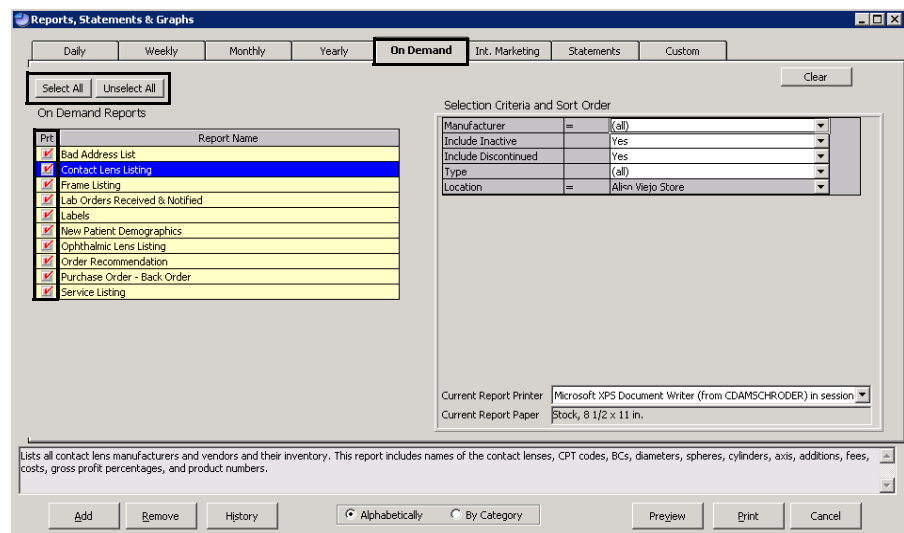
9. Select a report and click **Preview** to preview the report. If you do not want to preview reports, go to step 11.
The Preview Window opens.
10. Complete one or more of the following tasks:
 - Click the **Print Report** icon to open the Print window and print the report using the current report printer.
 - Click the **Export Report** icon to open the Export window and choose a format and destination for your exported report.
 - Close the Preview Window.
11. Click **Print** to print or fax the report(s).
The Print Reports window opens.
12. Click **Yes** to print or fax all of the reports that you selected in step 5.
The Paper Change Notification window opens.
13. Select a printer or fax program from the **Printer** drop-down menu.
14. Complete one or more of the following tasks:
 - Click **Test Print** to print or fax a test page.
 - Click **Print** to print or fax the report(s).
 - Click **Skip** to skip printing or faxing the report and print or fax the next report that you selected.



Creating & Printing On Demand Reports

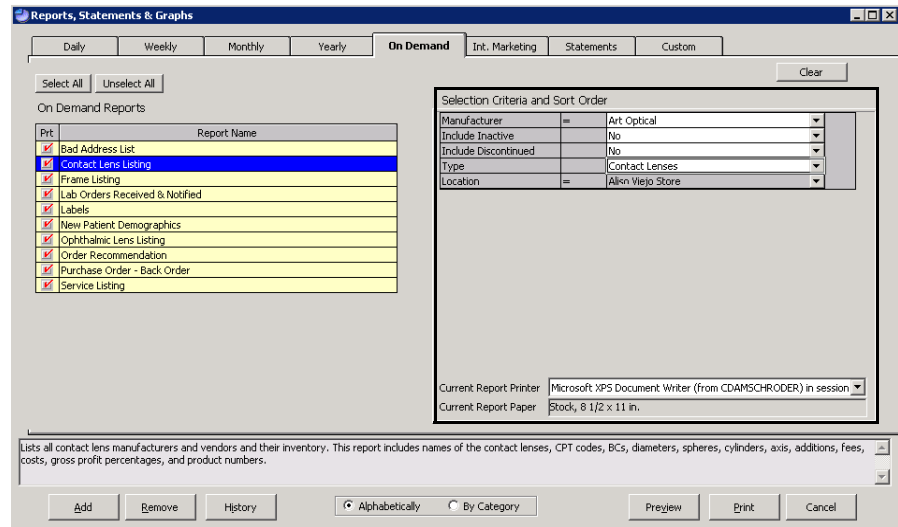
1. Open the Reports & Statements window. For more information on opening this window, go to [Opening the Reports & Statements Window on page 544](#).
2. Click the **On Demand** tab.
3. Add or remove reports from the list of reports. For more information on adding and removing reports, go to [Adding & Removing Reports From Tabs on page 544](#).
4. Click the **Alphabetically** or **By Category** radio button at the bottom of the window to view the list of reports alphabetically or categorically.
5. Select a report to create and print using one of the following methods:
 - Select the **Prt** check box next to the report that you want to create and print.
 - Click **Select All** to select all reports.

NOTE Click **Unselect All** to deselect all reports.



6. Complete the **Selections Criteria and Sort Order** fields with appropriate information. For more information on completing these fields for the report(s) that you are printing, go to the report(s) in the [List of Reports on page 635](#).

7. Select a printer or fax program from the **Current Report Printer** drop-down menu.



8. Select a report and click **Preview** to preview the report. If you do not want to preview reports, go to step 10.

The Preview Window opens.

9. Complete one or more of the following tasks:
 - Click the **Print Report** icon to open the Print window and print the report using the current report printer.
 - Click the **Export Report** icon to open the Export window and choose a format and destination for your exported report.

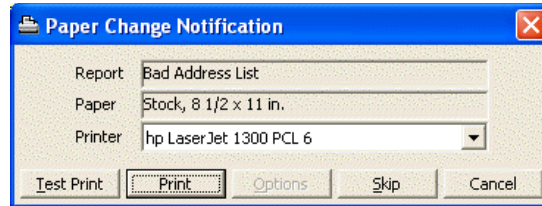
NOTE

If you are exporting the report to a Microsoft Windows application, such as Excel, select the **MS Excel 97-2000 (Data Only)** format and **Disk file** destination in the Export window and click **OK**. Select the **Column width based on objects in the Details** radio button and *all* the check boxes in the Excel Format Options window and click **OK**.

- Close the Preview Window.
10. Click **Print** to print or fax the report(s).
The Print Reports window opens.
 11. Click **Yes** to print or fax all of the reports that you selected in step 5.
The Paper Change Notification window opens.
 12. Select a printer or fax program from the **Printer** drop-down menu.

13. Complete one or more of the following tasks:

- Click **Test Print** to print or fax a test page.
- Click **Print** to print or fax the report(s).
- Click **Skip** to skip printing or faxing the report and print or fax the next report that you selected.



Creating & Printing Internal Marketing Reports

For information on creating Internal Marketing reports, watch the "Internal Marketing" video.

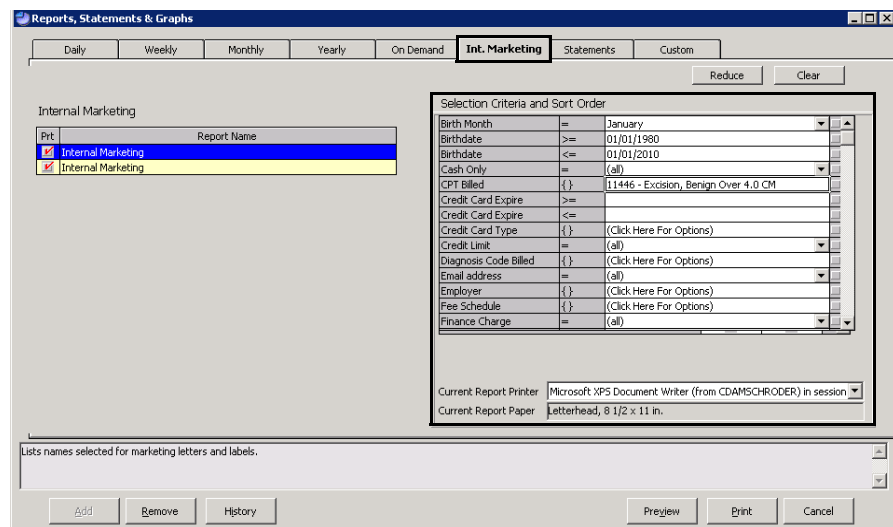
NOTES

- Print internal marketing reports using 8½" × 11" paper stock.
- Print labels using Avery 5260 compatible white rectangular labels.
- Print postcards using postcard stock with four cards on 8½" × 11" sheets.

1. Open the Reports & Statements window. For more information on opening this window, go to [Opening the Reports & Statements Window on page 544](#).
2. Click the **Internal Marketing** tab.
3. Complete the **Selections Criteria and Sort Order** fields with appropriate information. For more information on completing these fields, go to [Internal Marketing on page 670](#).

NOTE

Click **Expand** to expand the Selection Criteria and view the entire list.



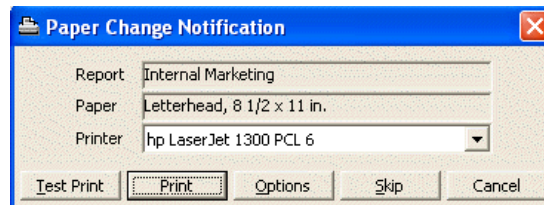
4. Select a printer or fax program from the **Current Report Printer** drop-down menu.
5. Click **Preview** to preview the report. If you do not want to preview the report, go to step 10.

The Preview Window opens.

6. Complete one or more of the following tasks:
 - Click the **Print Report** icon to open the Print window and print the report using the current report printer.
 - Click the **Export Report** icon to open the Export window and choose a format and destination for your exported report.

NOTE If you are exporting the report to a Microsoft Windows application, such as Excel, select the **MS Excel 97-2000 (Data Only)** format and **Disk file** destination in the Export window and click **OK**. Select the **Column width based on objects in the Details** radio button and *all* the check boxes in the Excel Format Options window and click **OK**.

- Close the Preview Window.
7. Click **Print** to print or fax the report.
The Print Reports window opens.
 8. Click **Yes** to print or fax the report.
The Paper Change Notification window opens.
 9. Select a printer or fax program from the **Printer** drop-down menu.
 10. Complete one or more of the following tasks:
 - Click **Test Print** to print or fax a test page.
 - Click **Print** to print or fax the report.
 - Click **Options** to open the Print Options window and select or deselect letter, listing, and label print options.



NOTE If you are printing letters, select a letter from the Correspondence Choices window and click **OK**.

Creating & Printing Statements

This section tells you how to create and print statements, including how

- [To create & print Statements, 564](#)
- [To calculate finance charges, 568](#)

For information on creating statements, watch the "Statements" video.

► **To create & print Statements**

NOTES

- To define and change your Statements report preferences, go to [To set up statement preferences on page 72](#).
- Mail statements using #10 single window envelopes, #10 standard envelopes, or the Envelope for OfficeMate Statements/Invoices. Use #9 standard envelopes as return envelopes. You can purchase the Envelopes for OfficeMate Statements/Invoices from Medical Arts Press at 1.800.328.2179 or www.medicalartspress.com

1. Open the Reports & Statements window. For more information on opening this window, go to [Opening the Reports & Statements Window on page 544](#).
2. Click the **Statements** tab.
3. Type or select a date from the **Date** box and click **Set Date**.
 The date in the Date box is transferred to the Statements report and is automatically set to the current day.
4. If you are calculating and applying late charges, follow the instructions below; otherwise, go to step 5.

NOTE

To define and change your late charge preferences from within the System Preferences window, go to [To set up statement preferences on page 72](#).

- a. Click the **Calculate late charges** check box.
- b. If you did *not* define your late charge preferences in the System Preferences window, skip this step and go to step c. If you already defined your late charge preferences, click **Preview** to view, print, and

export the Late Charge List; click **Apply/Record** to record the late charges on the Patient Ledger window; and go to step 5.

- c. Type the late charge amount in the **Late Charge Amount \$** text box.
- d. Type the amount at which the late charge will be applied in the **Apply if Balance >= \$** text box. Late charges will be applied if the balance is greater than or equal to the amount in this text box.
- e. Type the number of grace period days in the **Grace Period (# days)** text box.
- f. Type the late charge description in the **Late charge description** text box.
- g. Select the **Fee Slip Date** or **Transfer Date** radio button to calculate late charges for insurance transfers using the fee slip date or transfer date.
- h. Click **Preview** to view, print, and export the Late Charge List.
- i. Click **Apply/Record** to record the late charges on the Patient Ledger window.

5. If you are calculating and applying finance charges, follow the instructions below; otherwise, go to step 6.

NOTE

To define and change your finance charge preferences from within the System Preferences window, go to [To set up statement preferences on page 72](#).

- a. Click the **Calculate finance charges** check box.
- b. If you did *not* define your finance charge preferences in the System Preferences window, skip this step and go to step c. If you already defined your finance charge preferences, click **Preview** to view, print,

- and export the Finance Charge List; click **Apply/Record** to record the finance charges on the Patient Ledger window; and go to step 6.
- Type the monthly finance charge percentage in the **Monthly Percentage** text box.
 - Type the number of grace period days in the **Grace Period (# days)** text box.
 - Type the finance charge description in the **Finance charge description** text box.
 - Select the **Fee Slip Date** or **Transfer Date** radio button to calculate late charges for insurance transfers using the fee slip date or transfer date.
 - Click **Preview** to view, print, and export the Finance Charge List.
 - Click **Apply/Record** to record the finance charges on the Patient Ledger window.

The screenshot shows the 'Reports, Statements & Graphs' window with the 'Statements' tab selected. The window is divided into several sections:

- Calculate late charges:** Includes fields for 'Late Charge Amount' (\$20.00), 'Apply if Balance >= \$' (\$100.00), and 'Grace Period (# days)' (31). There are 'Preview' and 'Apply/Record' buttons.
- Calculate finance charges:** Includes fields for 'Monthly Percentage' (10) and 'Grace Period (# days)' (30). There are 'Preview' and 'Apply/Record' buttons.
- Date:** A dropdown menu showing '09/23/2010' with 'Set Date' and 'Clear' buttons.
- Selection Criteria and Sort Order:** A table with columns for criteria and sort order. The table is as follows:

Criteria	Operator	Value
Patient Name	=	
Last Name	>=	
Last Name	<=	
By Family	=	<input checked="" type="checkbox"/>
Period End	=	09/23/2010
Display if balance	>=	
Display details (# days)	=	60
Print Ins charges/payments	=	<input checked="" type="checkbox"/>
Print reason for Tx to Pat.	=	<input checked="" type="checkbox"/>
Location	=	Also Viejo Store
Starting Fee Slip Date	>=	
- Sort Order:** A table with columns for sort field name and sort direction. The table is as follows:

Sort Field Name	Sort A-Z	Sort Z-A
Patient Name	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Patient Name	<input checked="" type="checkbox"/>	<input type="checkbox"/>
- Print this message at bottom of Statement:** A text box containing 'Thank you for choosing North Eye Care'.
- Payment due date:** A drop-down menu showing '04/24/2009'.

At the bottom of the window, there are buttons for 'Add', 'Remove', 'History', 'Preview', 'Print', and 'Cancel'. A footer note states: 'Prints statements for all patients with outstanding balances. Select to print the information on a 30, 60, or 90+ day delinquent statement. This report lists all charges that are still open. A payment coupon is printed on the last page.'

- Type the message that you want to print at the bottom of the Statements reports in the **Print this message at bottom of Statement** text box.
- Type or select the payment due date from the **Payment due date** drop-down menu.

8. Complete the **Selections Criteria and Sort Order** fields with appropriate information. For more information on completing these fields, go to [Statements on page 711](#).

The screenshot shows the 'Reports, Statements & Graphs' dialog box, 'Statements' tab. The 'Date' is set to 09/23/2010. The 'Selection Criteria and Sort Order' table is as follows:

Field	Operator	Value
Patient Name	==	aaasmP, atrJe
Last Name	>=	
Last Name	<=	
By Family		<input checked="" type="checkbox"/>
Period End	==	09/23/2010
Display if balance	>=	
Display details (# days)	==	60
Print Ins charges/payments	==	<input checked="" type="checkbox"/>
Print reason for Tx to Pat.	==	<input checked="" type="checkbox"/>
Location	==	Aliso Viejo Store
Starting Fee Slip Date	>=	

The 'Sort Order' table is as follows:

Sort Field Name	Sort A-Z	Sort Z-A
Patient Name	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Patient Name	<input type="checkbox"/>	<input checked="" type="checkbox"/>

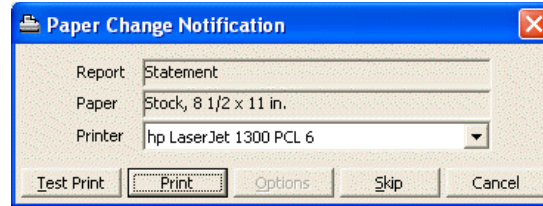
9. Select a printer or fax program from the **Current Report Printer** drop-down menu.
10. Click **Preview** to preview the report. If you do not want to preview the report, go to step 12.
- The Preview Window opens.
11. Complete one or more of the following tasks:
- Click the **Print Report** icon to open the Print window and print the report using the current report printer.
 - Click the **Export Report** icon to open the Export window and choose a format and destination for your exported report.

NOTES

- If you are creating an export file to submit to your vendor, export the statement using the Separated Values (CSV) format.
- If you are exporting the report to a Microsoft Windows application, such as Excel, select the **MS Excel 97-2000 (Data Only)** format and **Disk file** destination in the Export window and click **OK**. Select the **Column width based on objects in the Details** radio button and *all* the check boxes in the Excel Format Options window and click **OK**.

- Close the Preview Window.
12. Click **Print** to print or fax the report.
- The Paper Change Notification window opens.
13. Select a printer or fax program from the **Printer** drop-down menu.

14. Complete one or more of the following tasks:
- Click **Test Print** to print or fax a test page.
 - Click **Print** to print or fax the report.



► To calculate finance charges

Use the following example to learn how to calculate OfficeMate finance charges:

Parameters

Fee Slip Posting Date: 02/19/2005
 (Monthly) Finance Charge: 7%
 Grace Period: 30 days
 Fee Slip Balance: \$62.16

To calculate the finance charge on 12/19/2005:

1. Calculate the daily finance charge.

$$= (\text{Percentage entered}) * (\# \text{ of Days Past Due} - \text{Grace Period} - \text{Days Excluded}) / 30$$

$$= (7/100) * (303-30-0) / 30 = 0.637$$
2. Multiply the daily finance charge and the balance.

$$= 0.637 * 62.16$$

$$= 39.59592$$

Rounded to 39.60

To calculate the number of days past due:

If the finance charge was never calculated on the past due item, subtract the number of days between the posting date of the balance and the current date.

If the finance charge was already calculated on the past due item, subtract the number of days between the date the finance charge was last calculated and the current date.

Creating & Printing Business Analysis Reports

For information on creating business analysis reports, watch the "Business Analysis" video.

1. Open the Reports & Statements window. For more information on opening this window, go to [Opening the Reports & Statements Window on page 544](#).
2. Click the **Bus. Analysis** tab.

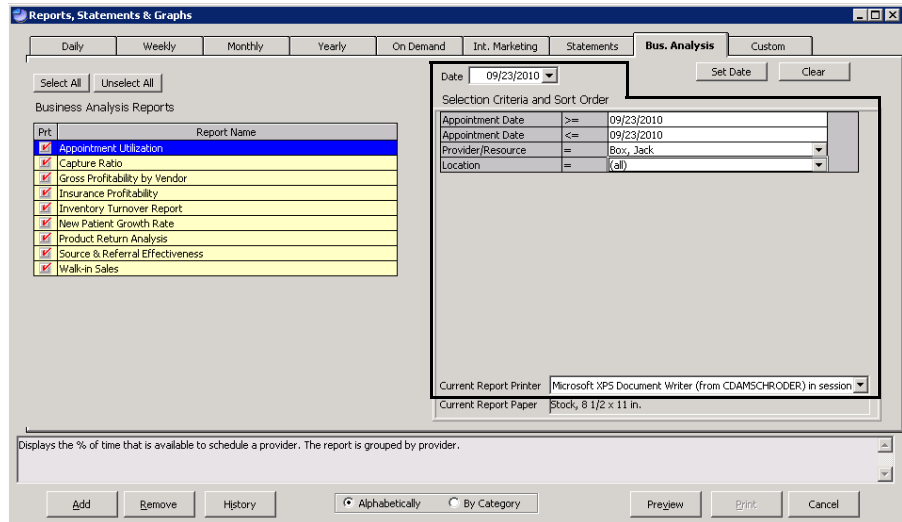
3. Add or remove reports from the list of reports. For more information on adding and removing reports, go to [Adding & Removing Reports From Tabs on page 544](#).
4. Click the **Alphabetically** or **By Category** radio button at the bottom of the window to view the list of reports alphabetically or categorically.
5. Select a report to create and print using one of the following methods:
 - Select the **Prt** check box next to the report that you want to create and print.
 - Click **Select All** to select all reports.

NOTE Click **Unselect All** to deselect all reports.

The screenshot shows the 'Reports, Statements & Graphs' window with the 'Bus. Analysis' tab selected. The window has a menu bar with options: Daily, Weekly, Monthly, Yearly, On Demand, Int. Marketing, Statements, Bus. Analysis, and Custom. Below the menu bar are buttons for 'Select All' and 'Unselect All'. A 'Date' dropdown is set to '09/23/2010' with 'Set Date' and 'Clear' buttons. The main area is titled 'Business Analysis Reports' and contains a table with columns 'Prt' and 'Report Name'. The table lists several reports, with 'Appointment Utilization' selected. To the right is the 'Selection Criteria and Sort Order' section with a table for defining criteria. At the bottom, there are buttons for 'Add', 'Remove', 'History', 'Alphabetically', 'By Category', 'Preview', 'Print', and 'Cancel'. A status bar at the bottom reads: 'Displays the % of time that is available to schedule a provider. The report is grouped by provider.'

6. Type or select dates from the **Date** box and click **Set Date**.
The date in the Date box is transferred to the reports that have selection dates.
- NOTE** The date in the Date box is automatically set to one year before the current day. The date in the To box is automatically set to the current day.
7. Complete the **Selections Criteria and Sort Order** fields with appropriate information. For more information on completing these fields for the report(s) that you are printing, go to the report(s) in the [List of Reports on page 635](#).

8. Select a printer or fax program from the **Current Report Printer** drop-down menu.



9. Select a report and click **Preview** to preview the report.
The Preview Window opens.
10. Complete one or more of the following tasks:
 - Click the **Print Report** icon to open the Print window and print the report using the current report printer.
 - Click the **Export Report** icon to open the Export window and choose a format and destination for your exported report.
 - Close the Preview Window.

Creating & Printing Custom Reports

The custom reports give you the ability to create more dynamic and flexible reports than the traditional reports allow. This section tells you how to create

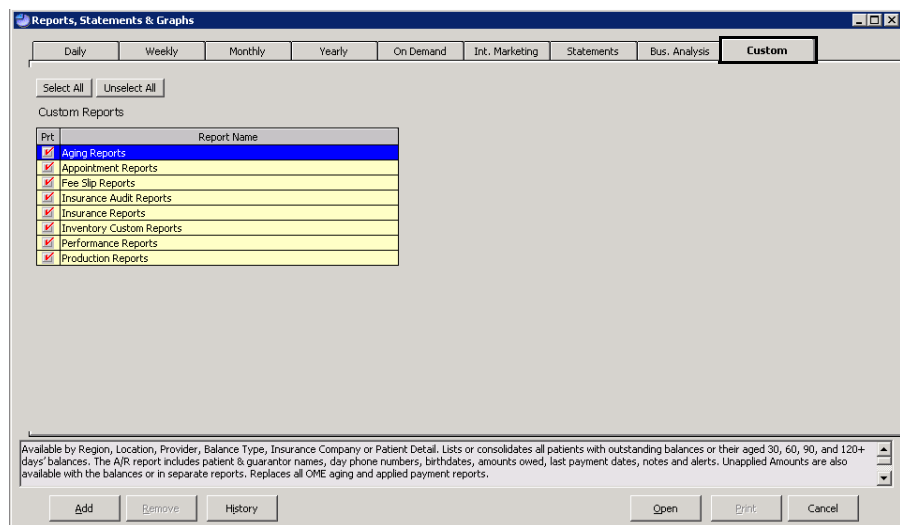
reports, save and load report settings, print reports, and export reports, including how

- To open the Custom Reports window, 571
- To save custom report settings, 572
- To load saved custom report settings, 574
- To modify or delete saved custom report settings, 574
- To find information about reports by name, 575
- To create and print custom aging reports, 576
- To create and print custom appointment reports, 582
- To create and print custom fee slip reports, 589
- To create and print custom insurance audit reports, 596
- To create and print custom insurance reports, 602
- To create and print custom inventory reports, 608
- To create and print custom performance reports, 615
- To create and print custom production reports, 621
- To use the Report Viewer window, 629

For more information on creating custom reports, watch the "Custom Reports" video.

► **To open the Custom Reports window**

1. Open the Reports & Statements window. For more information on opening this window, go to [Opening the Reports & Statements Window on page 544](#).
2. Click the **Custom** tab.



3. Add or remove reports from the list of reports. For more information on adding and removing reports, go to [Adding & Removing Reports From Tabs on page 544](#).
4. Select a report from the Report Name list.
5. Click **Open**.
The Custom Reports window opens.

6. To open previously saved report settings, go to [To load saved custom report settings on page 574](#).
7. Continue by proceeding to the applicable section:
 - [To create and print custom aging reports, 576](#)
 - [To create and print custom appointment reports, 582](#)
 - [To create and print custom fee slip reports, 589](#)
 - [To create and print custom insurance audit reports, 596](#)
 - [To create and print custom insurance reports, 602](#)
 - [To create and print custom inventory reports, 608](#)
 - [To create and print custom performance reports, 615](#)
 - [To create and print custom production reports, 621](#)

► **To save custom report settings**

1. Open the Custom Reports window. For more information, on opening the window go to [To open the Custom Reports window on page 571](#).
2. Modify the report settings, as needed. For information on modifying report settings, go to the appropriate section:
 - [To create and print custom aging reports, 576](#)
 - [To create and print custom appointment reports, 582](#)
 - [To create and print custom fee slip reports, 589](#)
 - [To create and print custom insurance audit reports, 596](#)
 - [To create and print custom insurance reports, 602](#)
 - [To create and print custom inventory reports, 608](#)
 - [To create and print custom performance reports, 615](#)
 - [To create and print custom production reports, 621](#)
3. Type a name for your report settings in the **Report Name** combo box.

4. Select the **Use as Title** check box to use the name of your report settings as the title of the report, as needed.

The screenshot shows the 'OfficeMate Custom Business Analysis Reports' dialog box. The 'Report' section has 'Production Report' selected in the 'Report Name' dropdown, and the 'Use as Title' checkbox is checked. The 'Data Selection' section shows 'Transaction Dates' starting on '8/1/2010' and ending on '8/13/2010', with a comparison period of 'Same Period Prior Year' from '8/1/2009' to '8/13/2009'. The 'Report Options' section includes checkboxes for 'Include Fees', 'Include Receipts', 'Include Applied Payments', 'Gross Fees', 'Patient Deposits', 'Patient Payments', 'Adj., Disc. & Returns', 'Insurance Deposits', 'Insurance Payments', 'Charge Backs', 'Deposit Adjustments', 'Charge Backs', 'Sales Taxes', 'Other Payment Methods', 'Apply Adjustments and Applied Payments to Fee Slip Location', 'List by Payment Method', 'Show Change as Percentage', and 'Combine Groups'. The 'Report Grouping' section has 'Group By' options for 'Region', 'Location', and 'Provider', all of which are unchecked. The 'Output' section has 'Printer' checked and 'Adobe PDF (redirected 3)' selected in the printer dropdown. The 'File Name' is 'ProductionPeriod.csv'. The 'Process' button is highlighted.

5. Type any notes in the text box at the bottom of the Custom Reports window, as needed.
6. Click **Save** to save your settings.

NOTE

The custom report settings that you save are accessible to all users who have access to custom reports.

► **To load saved custom report settings**

1. Open the Custom Reports window. For more information, on opening the window go to [To open the Custom Reports window on page 571](#).
2. Select a report from the **Report Name** drop-down menu.

The report settings load.

NOTE

Loading saved report settings loads a date span (e.g., MTD, Quarter, etc.). Ensure that the beginning and ending dates are within the range that you want to appear on the report.

3. Continue by proceeding to the applicable section:
 - [To create and print custom aging reports, 576](#)
 - [To create and print custom appointment reports, 582](#)
 - [To create and print custom fee slip reports, 589](#)
 - [To create and print custom insurance audit reports, 596](#)
 - [To create and print custom insurance reports, 602](#)
 - [To create and print custom inventory reports, 608](#)
 - [To create and print custom performance reports, 615](#)
 - [To create and print custom production reports, 621](#)

NOTE

For information about saving report settings for future use, go to [To save custom report settings on page 572](#).

► **To modify or delete saved custom report settings**

1. Open the Custom Reports window. For more information, on opening the window go to [To open the Custom Reports window on page 571](#).
2. Select the name of the report that you want to edit or delete from the Report Name drop-down menu.
3. To modify custom report settings, edit the selection criteria and click **Save**.

4. To delete custom report settings, click **Delete**.

NOTE

The saved custom report settings are accessible to all users who have access to custom reports. Ensure that modifying or deleting saved custom report settings does not adversely affect the workflow of other users.

For more information on creating custom reports, watch the "Custom Reports" video.

► **To find information about reports by name**

For information about this report...	Go to...
Accounts Receivable	To create and print custom aging reports on page 576
Aged A/R 30-60-90-120+	To create and print custom aging reports on page 576
Applied Insurance Payment	To create and print custom insurance reports on page 602
Appointments Scheduled with Insurance	To create and print custom appointment reports on page 582
Fee Slip Adjustment and Payment	To create and print custom fee slip reports on page 589
Fee Slip Listing	To create and print custom fee slip reports on page 589
Frame Stock Status	To create and print custom inventory reports on page 608
Insurance Deposit Audit	To create and print custom insurance audit reports on page 596
Insurance Sales Analysis	To create and print custom insurance reports on page 602
Inventory Valuation	To create and print custom inventory reports on page 608
Location Inventory	To create and print custom inventory reports on page 608
Monthly Production Recap	To create and print custom production reports on page 621
Order Recommendation	To create and print custom inventory reports on page 608
Performance - Net Fees	To create and print custom performance reports on page 615
Performance - Net Quantities	To create and print custom performance reports on page 615

For information about this report...	Go to...
Production - Location Comparison	To create and print custom production reports on page 621
Production - Period Comparison	To create and print custom production reports on page 621
Production - Provider Comparison	To create and print custom production reports on page 621
Production - Year-to-Year Comparison	To create and print custom production reports on page 621
Productivity Recap	To create and print custom production reports on page 621
Stock Status	To create and print custom inventory reports on page 608

► **To create and print custom aging reports**

1. Open the Reports & Statements window. For more information on opening this window, go to [Opening the Reports & Statements Window on page 544](#).
2. Click the **Custom** tab.
3. Select **Aging Reports** from the Report Name list.
4. Click **Open**.
The Patient and Insurance Aging Reports window opens.
5. To open previously saved report settings, go to [To load saved custom report settings on page 574](#), and then skip to step 17.
6. Select a report from the **Report Type** drop-down menu.
 - *Accounts Receivable Report*. Lists the balances due at the Period End date with additional patient and insurance information.
 - *Aged A/R Report 30-60-90-120+*. Lists the aged accounts receivable and, optionally, the unapplied amounts.
7. Select the level of detail that you want to display in the report from the **Report Detail** drop-down menu.
8. Type or select a date from the **Period End Date**.

NOTE

If you choose a date earlier than the current date, this report may not match earlier reports printed using this date. Any unapplied amounts applied after the last report printing may not be listed on the most current report.

9. Type or select the minimum number of days overdue to report in the **Minimum Days Outstanding** box.

10. Select a date from the **Exclude Before** box to add a period start date.
11. Refine the report results by selecting the report options, as needed:
 - a. Click the **Report Options** tab.
 - b. Select the **Patient Balances** check box to include patient balances. Enter a last name (or part of a last name) in the **Last Name From** and **Through** fields to refine your report results, as needed. Alternatively, you may also enter a patient number in the **Last Name From** field.
 - c. Select the **Insurance Balances** check box to include insurance balances. Select an insurance carrier and plan from the **Insurance Name** and **Insurance Plan** drop-down menus to refine your report results, as needed. Select the **Show Patient Insurance Details** check box to include the insured ID and claim date. If you selected the patient or fee slip detail level in step 7, selecting the **Show Patient Insurance Details** check box will additionally include the guarantor birth date, day phone number, and last payment date.
 - d. Select the **Fee Slip Balances** check box to display balances due from fee slip charges.
 - e. Select the **Unapplied Deposits** check box to display unapplied amounts. Unapplied deposits are the net of the patient deposits less the deposits applied to open charges.
 - f. If you previously selected the Accounts Receivable report in step 6 and the patient, fee slip, or fee slip line item level of report detail in step 7, select the **Patient Notes**, **Patient Alerts**, **'In Collection' Indicator**, and

'Cash Only' Indicator check boxes to report additional information, as needed.

- g. Select the **Age by Transfer from Insurance Date** check box to use the date the balance was transferred from the insurance to the patient to determine the age of the balance rather than the fee slip date.

The screenshot shows the 'Patient and Insurance Aging Reports' dialog box. The 'Report Options' section is highlighted with a black box. In this section, the 'Age by Transfer from Insurance' date (if applicable) instead of Fee Slip date checkbox is checked. Other options include Patient Balances, Insurance Balances, and various filters for Last Name, Through, and Insurance Company.

Action
 Report Type: Accounts Receivable Report
 Report Detail: Patient

Data Selection
 Period End Date: 2 / 5 / 2010 Minimum Days Outstanding: 30
 Regions: ALL Locations: ALL Providers: ALL

Report Options

Patient Balances
 Last Name From: Smith Through: Tooke

Insurance Balances
 Insurance Company: (All) Insurance Plan: (All)
 (Show Patient Insurance Details (Landscape Mode))

Balance Types
 Fee Slip Balances
 Unapplied Deposits

Additional Patient Data
 Patient Notes
 Patient Alerts
 'In Collection' Indicator
 'Cash Only' Indicator

Age by 'Transfer From Insurance' date (if applicable) instead of Fee Slip date

Report Grouping
 Group By: Region Location Provider Balance Type Insurance Patient Fee Slip

Output
 Printer: Adobe PDF (from MUPS TEEGH) in session 2 Terminal 5
 CSV File Folder: C:\OfficeMate\Export File Name: AR.csv

Buttons: Preview, Close

12. Refine the report results by selecting the regions you want to include, as needed:
 - a. Click the **Regions** tab.
 - b. Select only the regions that you want to include in the report in the **Selected** box.

NOTE

To select more than one region, press and hold the **Ctrl** key and then select multiple regions.

- c. Click the left single arrow (<) to move a region to the **Available** box, and therefore, exclude the region from the report.
- d. Click one of the double arrows (<< or >>) to move all the regions from one box to another.

The screenshot shows the 'Patient and Insurance Aging Reports' dialog box. The 'Action' section has 'Report Type' set to 'Accounts Receivable Report' and 'Report Detail' set to 'Region'. The 'Data Selection' section has 'Period End Date' set to '2/5/2010' and 'Minimum Days Outstanding' set to '30'. The 'Report Options' section has 'Regions - 2 of 3' selected. The 'Available' list contains 'Northern Region'. The 'Selected' list contains 'No Region' and 'Southern Region'. The 'Report Grouping' section has 'Group By' set to 'Region'. The 'Output' section has 'Printer' selected, with 'Folder' set to 'C:\OfficeMate\Export' and 'File Name' set to 'AR.csv'. There are 'Preview' and 'Close' buttons at the bottom right.

13. Refine the report results by selecting the locations you want to include, as needed:
 - a. Click the **Locations** tab.
 - b. Select only the locations that you want to include in the report in the **Selected** box.

NOTE

To select more than one location, press and hold the **Ctrl** key and then select multiple locations.

- c. Click the single left arrow (<) to move a location to the **Available** box, and therefore, exclude the location from the report.
- d. Click one of the double arrows (<< or >>) to move all the locations from one box to another.

The screenshot shows the 'Patient and Insurance Aging Reports' dialog box. The 'Locations' tab is selected, showing two columns: 'Available' and 'Selected'. The 'Available' column contains '019 Irvine Store'. The 'Selected' column contains 'Eye Care Management' and '002 Lake Forest State'. Navigation arrows are visible between the columns. Below the location selection, there are sections for 'Report Grouping' and 'Output'.

Action
 Report Type: Accounts Receivable Report
 Report Detail: Region

Data Selection
 Period End Date: 2/5/2010 Minimum Days Outstanding: 90

Report Options: Regions - 2 of 3 | **Locations - 2 of 3** | Providers - ALL

Select one or more Locations

Available	Selected
019 Irvine Store	Eye Care Management
	002 Lake Forest State

Report Grouping
 Group By: Region Location Provider Balance Type Insurance Patient Fee Sht

Output
 Printer: Adobe PDF (from MDPS (EEGH) in session 21 terminal 9)
 CSV File Folder: C:\OfficeMata\Output
 File Name: AR.csv

Buttons: Preview, Close

14. Refine the report results by selecting the providers you want to include, as needed:
 - a. Click the **Providers** tab.
 - b. Select only the providers or staff members that you want to include in the report in the **Selected** box.

NOTE To select more than one provider, press and hold the **Ctrl** key and then select multiple providers.

- c. Click the single left arrow (<) to move a provider to the **Available** box, and therefore, exclude the provider from the report.
- d. Click one of the double arrows (<< or >>) to move all the providers from one box to another.

15. Select the **Report Grouping** check boxes to sort the report results into groups, as needed. You can select any number of the check boxes that are available. Not all check boxes are available for all reports.
16. If you want to save the report settings for future use, go to [To save custom report settings on page 572](#).
17. To print the report, chart, or graph, perform the following steps:
 - a. Select the **Printer** check box.
 - b. Select a printer from the drop-down menu.
 - c. Click **Process**.
The Report Viewer window opens and displays a preview of the report, chart, or graph.
 - d. Click the **Print Report** icon.
 - e. Close the Report Viewer window when finished.

NOTE For more information about the Report Viewer window, go to [To use the Report Viewer window on page 629](#).

18. To export the data into a CSV file, perform the following steps:
 - a. Select the **CSV File** check box.
 - b. Type a folder location in the **Folder** text box.
 - c. Type a name for the file in the **File Name** text box.
 - d. Click **Process**.
 - e. Click **View File** to view the data in the CSV format.

► **To create and print custom appointment reports**

1. Open the Reports & Statements window. For more information on opening this window, go to [Opening the Reports & Statements Window on page 544](#).
2. Click the **Custom** tab.
3. Select **Appointment Reports** from the Report Name list.
4. Click **Open**.

The Appointment Scheduler Reports window opens.
5. To open previously saved report settings, go to [To load saved custom report settings on page 574](#), and then skip to step 17.
6. Select a report from the **Report Type** drop-down menu.
 - *Appointments Scheduled with Insurance*. Lists the insured patients who have appointments during the given time period. For each listed patient, the report includes the insurance carrier, birth date, information of the insured party, zip code, policy group number, and authorization number.
7. Select the level of detail that you want to display in the report from the **Report Detail** drop-down menu.

8. Select a date range for the appointments you want to include in the report:
 - Select a range from the **Span** drop-down menu and use the left and right arrows to advance the time period.

OR

- Enter beginning and ending dates in the date range fields.

9. Refine the report results by selecting the report options, as needed:
 - a. Click the **Report Options** tab.
 - b. Select the **Select Only Patients with Insurance Requiring Authorization** check box to list patients whose insurance plan requires eligibility. For information about indicating that an insurance plan requires eligibility, go to [To set up insurance plan preferences on page 162](#).
 - c. Select the **Select Only Patients with Missing Authorization** check box to list patients whose insurance plan requires eligibility, but have not received an authorization code. For information about recording authorizations, go to [To record additional insurance claim information on page 219](#).
 - d. Select the **Include Service Type** check box to list the type of service that is scheduled.
 - e. Select the **Include Insurance Notes** check box to display notes recorded for the patients' insurance plans. For information about recording insurance notes, go to [To record additional insurance claim information on page 219](#).
 - f. Select the **Include Eligibility Comments** check box to display any notes that were recorded with the authorization ID. For information about

recording a patient's eligibility and authorization, go to [To record additional insurance claim information on page 219](#).

The screenshot shows the "Appointment Scheduler Reports" dialog box. It is divided into several sections:

- Report:** Includes fields for "Report Name", "Report Type" (set to "Appointments Scheduled with Insurance"), and "Report Detail" (set to "Patient and Authorized Product Type Details"). There are "Save" and "Delete" buttons.
- Data Selection:** Includes "Appointment Dates" with a "Span" set to "5 days (future)" and date pickers for "8/30/2010" and "9/3/2010".
- Report Options:** Includes tabs for "Regions - ALL", "Locations - ALL", "Resources - ALL", and "Insurance - ALL". Under "Report Options", there are checkboxes for:
 - Select Only Patients with Insurance Requiring Eligibility
 - Select Only Patients with Missing Authorization
 - Include Service Type
 - Include Insurance Notes
 - Include Eligibility Comments
- Report Grouping:** Includes "Group By:" options: Region, Location, Resource, Insurance Company, and Insurance Plan. There is also a checkbox for "Page Break for each Insurance Company".
- Output:** Includes a "Printer" dropdown set to "Microsoft XPS Document Writer", a "CSV File" checkbox, and fields for "Folder" and "File Name" (set to "ScheduleWithInsurance.csv").

At the bottom, there are "Preview" and "Close" buttons, and a small text box containing: "A listing of patients with insurance scheduled for an appointment including their Insurance Company, Guarantor, Birthdate, Insured ID #, Policy Group Number, relationship to Insured".

10. Refine the report results by selecting the regions you want to include, as needed:
 - a. Click the **Regions** tab.
 - b. Select only the regions that you want to include in the report in the **Selected** box.

NOTE

To select more than one region, press and hold the **Ctrl** key and then select multiple regions.

- c. Click the single left arrow (<) to move a region to the **Available** box, and therefore, exclude the region from the report.
- d. Click one of the double arrows (<< or >>) to move all the regions from one box to another.

Appointment Scheduler Reports

Report
 Report Name: [Appointments Scheduled with Insurance] Use as Title
 Report Type: Appointments Scheduled with Insurance
 Report Detail: Patient and Authorized Product Type Details

Data Selection
 Appointment Dates: Span: Custom **5 days (future)**
 8/30/2010 - 9/3/2010

Report Options | **Regions - 3 of 6** | Locations - 3 of 6 | Resources - ALL | Insurance - ALL

Select one or more Regions

Available	Selected
(No Region)	Eastern
Central	Northern
Western	Southern

Report Grouping
 Group By: Region Location Resource Insurance Company Insurance Plan
 Page Break for each Insurance Company

Output
 Printer: Adobe PDF (redirected 3)
 CSV File: Folder: [] File Name: ScheduleWithInsurance.csv

A listing of patients with insurance scheduled for an appointment including their Insurance Company, Guarantor, Birthdate, Insured ID #, Policy Group Number, relationship to Insured

11. Refine the report results by selecting the locations you want to include, as needed:
 - a. Click the **Locations** tab.
 - b. Select only the locations that you want to include in the report in the **Selected** box.

NOTE

To select more than one location, press and hold the **Ctrl** key and then select multiple locations.

- c. Click the single left arrow (<) to move a location to the **Available** box, and therefore, exclude the location from the report.
- d. Click one of the double arrows (<< or >>) to move all the locations from one box to another.

Appointment Scheduler Reports

Report
 Report Name: Use as Title
 Report Type: Appointments Scheduled with Insurance
 Report Detail: Patient and Authorized Product Type Details

Data Selection
 Appointment Dates: Span: Custom **5 days (future)**
 < 8/30/2010 - 9/3/2010 >

Report Options: Regions - 3 of 6 | **Locations - 3 of 6** | Resources - ALL | Insurance - ALL

Select one or more Locations

Available	Selected
Baranca Store	Blue GV Store
Robins Eye Care, LLC	HD-Robins Eye Care, LLC
VSP PDEC	

Report Grouping
 Group By: Region Location Resource Insurance Company Insurance Plan
 Page Break for each Insurance Company

Output
 Printer: Adobe PDF (redirected 3)
 CSV File: Folder:
 File Name: ScheduleWithInsurance.csv

A listing of patients with insurance scheduled for an appointment including their Insurance Company, Guarantor, Birthdate, Insured ID #, Policy Group Number, relationship to Insured

12. Refine the report results by selecting the providers you want to include, as needed:
 - a. Click the **Resources** tab.
 - b. Select only the providers that you want to include in the report in the **Selected** box.

NOTE To select more than one provider, press and hold the **Ctrl** key and then select multiple providers.

- c. Click the single left arrow (<) to move a provider to the **Available** box, and therefore, exclude the provider from the report.
- d. Click one of the double arrows (<< or >>) to move all the providers from one box to another.

Appointment Scheduler Reports

Report
 Report Name: Use as Title
 Report Type:
 Report Detail:

Data Selection
 Appointment Dates:
 Span: **5 days (future)**
 < 8/30/2010 - 9/3/2010 >

Report Options: **Resources - 1 of 26**

Select one or more Providers

Available	Selected
<input type="checkbox"/> Autoretactor <input type="checkbox"/> Special Testing <input type="checkbox"/> Abedi, Shahla <input type="checkbox"/> Abernathy, Jenell <input type="checkbox"/> Crossley, Deborah <input type="checkbox"/> Damschroder, Carrie <input type="checkbox"/> Defaul, Fix <input type="checkbox"/> Fains, Dennis <input type="checkbox"/> Hatton, Jane <input type="checkbox"/> Kannan, D.D., Anitha <input type="checkbox"/> McLaurin, Debra	<input type="checkbox"/> Doctor, Johnny

Report Grouping
 Group By: Region Location Resource Insurance Company Insurance Plan
 Page Break for each Insurance Company

Output
 Printer:
 CSV File: Folder:
 File Name:

A listing of patients with insurance scheduled for an appointment including their Insurance Company, Guarantor, Birthdate, Insured ID #, Policy Group Number, relationship to Insured

13. Refine the report results by selecting the insurance carriers you want to include, as needed:
 - a. Click the **Insurance** tab.
 - b. Select only the insurance carriers that you want to include in the report in the **Selected** box.

NOTE To select more than one carrier, press and hold the **Ctrl** key and then select multiple providers.

- c. Click the single left arrow (<) to move an insurance carrier to the **Available** box, and therefore, exclude the insurance carrier from the report.
- d. Click one of the double arrows (<< or >>) to move all the insurance carriers from one box to another.

The screenshot shows the 'Appointment Scheduler Reports' dialog box. The 'Insurance' tab is active. Under 'Data Selection', the 'Appointment Dates' are set to a custom span of 5 days (future), from 8/30/2010 to 9/3/2010. The 'Report Options' section shows 'Insurance - 1 of 68' selected. The 'Available' list contains 11 insurance carriers, and the 'Selected' list contains 'Vision Service Plan'. The 'Report Grouping' section has 'Insurance Company' checked. The 'Output' section has 'Printer' checked and 'Adobe PDF (redirected 3)' selected. At the bottom, there is a preview of the report content: 'A listing of patients with insurance scheduled for an appointment including their Insurance Company, Guarantor, Birthdate, Insured ID #, Policy Group Number, relationship to Insured'.

14. Select the **Report Grouping** check boxes to sort the report results into groups, as needed. You can select any number of the check boxes that are available. Not all check boxes are available for all reports.
15. If you want to save the report settings for future use, go to [To save custom report settings on page 572](#).

16. To print the report, chart, or graph, perform the following steps:
 - a. Select the **Printer** check box.
 - b. Select a printer from the drop-down menu.
 - c. Click **Process**.
The Report Viewer window opens and displays a preview of the report, chart, or graph.
 - d. Click the **Print Report** icon.
 - e. Close the Report Viewer window when finished.

NOTE

For more information about the Report Viewer window, go to [To use the Report Viewer window on page 629](#).

17. To export the data into a CSV file, perform the following steps:
 - a. Select the **CSV File** check box.
 - b. Type a folder location in the **Folder** text box.
 - c. Type a name for the file in the **File Name** text box.
 - d. Click **Process**.
 - e. Click **View File** to view the data in the CSV format.

► **To create and print custom fee slip reports**

1. Open the Reports & Statements window. For more information on opening this window, go to [Opening the Reports & Statements Window on page 544](#).
1. Click the **Custom** tab.
2. Select **Fee Slip Reports** from the Report Name list.
3. Click **Open**.
The Custom Business Analysis Reports window opens.
4. To open previously saved report settings, go to [To load saved custom report settings on page 574](#), and then skip to step 16.
5. Select a report from the **Report Type** drop-down menu.
 - *Fee Slip Adjustment and Payment Report*. Lists fee slip adjustments and payments.
 - *Fee Slip Listing*. Lists fee slip totals or fee slip line items.
6. Select the level of detail that you want to display in the report from the **Report Detail** drop-down menu.
7. Select a date range for the fee slips you want to include in the report:
 - Select a range from the **Span** drop-down menu and use the left and right arrows to advance the time period.

OR

 - Enter beginning and ending dates in the date range fields.

8. To load previously saved report settings, click **Load** and skip to step 16.

NOTE

Previously saved report settings do not affect the selection dates.

OfficeMate Custom Business Analysis Reports

Report
 Report Name: Enter a Custom Report Name or Select from List Load as Type
 Report Type: Fee Slip Adjustment and Payment Report
 Report Detail: Summary

Data Selection
 Transaction Dates:
 Span: MTD August to Date
 8/1/2010 - 8/17/2010

Report Options Regions - ALL Locations - ALL Providers - ALL Products - ALL

Adjustments
 Select one or more Adjustment Types.
 Available: Advanta-adjustment, Applied Payment Adjustment, Balance Adjustment, Cancelled Contact Lenses, Cancelled Glasses, Changed CL quantity, Changed Contact Lens Type, Changed Spectacle Lens Type, Country Discount
 Selected:

Report Grouping
 Group By: Region Location Provider

Output
 Printer: Microsoft XPS Document Writer
 CSV File Folder: J:\OfficeMate\Report
 File Name: AdjustmentSummary.csv

Report Description
 A flexible report where you set the criteria to be selected (Adjustments, Payments, Refunds, Discounts, etc.). Click Other Criteria to select the items.

9. If you selected the Fee Slip Adjustment and Payment report, refine the report results by selecting the report options, as needed; otherwise, skip to step 10:
 - a. Click the **Report Options** tab.
 - b. Select only the adjustment and payment types that you want to include in the report in the **Selected** box.

NOTE To select more than one adjustment or payment type, press and hold the **Ctrl** key and then select multiple items from the list.

- c. Click the single left arrow (<) to move an adjustment or payment type to the **Available** box, and therefore, exclude it from the report.
- d. Click one of the double arrows (<< or >>) to move all the adjustments and payment types from one box to another.

The screenshot shows the 'OfficeMate Custom Business Analysis Reports' dialog box. The 'Report Options' tab is active, displaying a list of adjustment types. The 'Available' list contains: Advance-adjustment, Applied Payment Adjustment, Balance Adjustment, Cancelled Contact Lenses, Cancelled Glasses, Courtesy Discount, Credit for returned contacts, DVC Insurance Adjustment, and Double Charge. The 'Selected' list contains: Changed CL quantity, Changed Contact Lens Type, and Changed Spectacle Lens Type. The 'Data Selection' section shows 'Transaction Dates' from 8/1/2010 to 8/17/2010. The 'Report Grouping' section has 'Group By' set to 'Region'. The 'Output' section has 'Printer' set to 'Microsoft XPS Document Writer' and 'CSV File' folder set to 'C:\OfficeMate\Export'.

10. Refine the report results by selecting the regions you want to include, as needed:
 - a. Click the **Regions** tab.
 - b. Select only the regions that you want to include in the report in the **Selected** box.

NOTE To select more than one region, press and hold the **Ctrl** key and then select multiple regions.

- c. Click the single left arrow (<) to move a region to the **Available** box, and therefore, exclude the region from the report.
- d. Click one of the double arrows (<< or >>) to move all the regions from one box to another.

The screenshot shows the 'OfficeMate Custom Business Analysis Reports' dialog box. The 'Report Options' tab is selected, displaying a list of adjustment types. The 'Available' list contains items such as 'Advantra-adjustment', 'Applied Payment Adjustment', 'Balance Adjustment', 'Cancelled Contact Lenses', 'Cancelled Glasses', 'Courtesy Discount', 'Credit for returned contacts', 'DVC- Insurance Adjustment', and 'Double Charge'. The 'Selected' list contains 'Changed LL quantity', 'Changed Contact Lens Type', and 'Changed Spectacle Lens Type'. Below the lists are buttons for '<', '>>', '<<', and '>'. The 'Report Grouping' section has 'Region' selected. The 'Output' section has 'Printer' selected and 'Microsoft XPS Document Writer' chosen. The 'File Name' is 'AdjustmentSummary.csv'. The 'Process' and 'Close' buttons are at the bottom right.

11. Refine the report results by selecting the locations you want to include, as needed:
 - a. Click the **Locations** tab.
 - b. Select only the locations that you want to include in the report in the **Selected** box.

NOTE To select more than one location, press and hold the **Ctrl** key and then select multiple locations.

- c. Click the single left arrow (<) to move a location to the **Available** box, and therefore, exclude the location from the report.
- d. Click one of the double arrows (<< or >>) to move all the locations from one box to another.

The screenshot displays the 'OfficeMate Custom Business Analysis Reports' dialog box. The 'Report' section at the top has 'Report Name' set to 'Enter a Custom Report Name or Select from List', 'Report Type' set to 'Fee Slip Adjustment and Payment Report', and 'Report Detail' set to 'Summary'. The 'Data Selection' section shows 'Span: MTD' and 'August to Date' with a date range from 9/1/2010 to 9/17/2010. The 'Locations' tab is selected, showing two columns: 'Available' and 'Selected'. The 'Available' column lists 'Fullerton', 'Irvine', and 'Newport Beach'. The 'Selected' column lists 'Also Vesp Store', 'Rancho Cordova', and 'San Diego'. Below the location lists are navigation arrows: '<', '>>', '<<', and '<'. The 'Report Grouping' section has 'Group By:' with radio buttons for 'Region', 'Location', and 'Provider'. The 'Output' section has 'Printer' checked and set to 'Microsoft XPS Document Writer', and 'CSV File' checked with 'Folder' set to 'C:\OfficeMate\Export' and 'File Name' set to 'AdjustmentSummary.csv'. At the bottom, there is a 'Report Description' section with a 'Process' button and a 'Close' button.

12. Refine the report results by selecting the providers or staff you want to include, as needed:
 - a. Click the **Providers** tab.
 - b. Select the **Providers**, **Staff Members**, or **Recorded By** radio button to limit the providers or staff that are available to select.
 - c. Select only the providers or staff members that you want to include in the report in the **Selected** box.

NOTE

To select more than one provider or staff member, press and hold the **Ctrl** key and then select multiple names.

- d. Click the single left arrow (<) to move a provider or staff member to the **Available** box, and therefore, exclude the provider or staff member from the report.
- e. Click one of the double arrows (<< or >>) to move all the providers or staff members from one box to another.

The screenshot shows the 'OfficeMate Custom Business Analysis Reports' dialog box. The 'Report' section has 'Report Name' (text input), 'Report Type' (Free Slip Adjustment and Payment Report), and 'Report Detail' (Summary). The 'Data Selection' section shows 'Transaction Dates' with 'Span' set to 'MTD' and 'August to Date' selected, with dates from 8/1/2010 to 8/17/2010. The 'Report Options' section has tabs for 'Regions - 3 of 6', 'Locations - 3 of 8', 'Providers - ALL' (selected), and 'Products - ALL'. The 'Data Selection' section has radio buttons for 'Providers' (selected), 'Staff Members', and 'Recorded By'. Below are two lists: 'Available' (empty) and 'Selected' (Damschroder, Carrie; Default, Rk; Docter, Johnny; Jure, Halton; Mouse, Mickey; Rosenbaum, Stephen). The 'Report Grouping' section has 'Group By' options for Region, Location, and Provider. The 'Output' section has 'Printer' (Microsoft XPS Document Writer), 'Folder' (C:\OfficeMate\Export), and 'File Name' (4-2010Summary.csv). The 'Report Description' section at the bottom provides a brief explanation of the report.

13. Refine the report results by selecting the products you want to include, as needed:
 - a. Click the **Products** tab.
 - b. Select the **Financial Groups**, **Production Groups**, or **Attributes** radio button to narrow the report results by financial group, production group, or attribute.
 - c. Select only the financial groups, production groups, and attributes that you want to include in the report in the **Selected** box.

NOTE To select more than one product, press and hold the **Ctrl** key and then select multiple products.

- d. Click the single left arrow (←) to move a product to the **Available** box, and therefore, exclude the product from the report.
- e. Click one of the double arrows (⇐ or ⇒) to move all the products from one box to another.

14. Select the **Report Grouping** check boxes to sort the report results into groups, as needed. You can select any number of the check boxes that are available. Not all check boxes are available for all reports.
15. If you want to save the report settings for future use, go to [To save custom report settings on page 572](#).

16. To print the report, chart, or graph, perform the following steps:
 - a. Select the **Printer** check box.
 - b. Select a printer from the drop-down menu.
 - c. Click **Process**.
The Report Viewer window opens and displays a preview of the report, chart, or graph.
 - d. Click the **Print Report** icon.
 - e. Close the Report Viewer window when finished.

NOTE

For more information about the Report Viewer window, go to [To use the Report Viewer window on page 629](#).

17. To export the data into a CSV file, perform the following steps:
 - a. Select the **CSV File** check box.
 - b. Type a folder location in the **Folder** text box.
 - c. Type a name for the file in the **File Name** text box.
 - d. Click **Process**.
 - e. Click **View File** to view the data in the CSV format.

► **To create and print custom insurance audit reports**

1. Open the Reports & Statements window. For more information on opening this window, go to [Opening the Reports & Statements Window on page 544](#).
2. Click the **Custom** tab.
3. Select **Insurance Audit Reports** from the Report Name list.
4. Click **Open**.
The Insurance Audit Reports window opens.
5. To open previously saved report settings, go to [To load saved custom report settings on page 574](#), and then skip to step 16.
6. Select a report from the **Report Type** drop-down menu.
 - *Insurance Audit Deposit Report*. Lists the applied insurance payments, refunds, chargebacks, and reasons for returns for a given time period. The report includes the insurance carriers, patients' names, fee slip numbers, check numbers, and batch numbers.
7. Select the level of detail that you want to display in the report from the **Report Detail** drop-down menu.
8. Select a date range for the transactions you want to include in the report:
 - Select a range from the **Span** drop-down menu and use the left and right arrows to advance the time period.

OR

 - Enter beginning and ending dates in the date range fields.

- To load previously saved report settings, click **Load** and skip to step 16.

NOTE

Previously saved report settings do not affect the selection dates.

The screenshot shows the 'OfficeMate Insurance Reports' dialog box. It is divided into several sections:

- Report:** Includes fields for 'Report Name' (with a dropdown and 'Use as Title' checkbox), 'Report Type' (set to 'Insurance Deposit Audit Report'), and 'Report Detail' (set to 'Detail'). There are 'Save' and 'Print' buttons.
- Data Selection:** 'Transaction Dates' section with 'Start' set to 'Quarter' and 'Q2 2010'. Below are date pickers for '4/1/2010' and '6/30/2010'.
- Report Options:** Includes tabs for 'Regions - ALL', 'Locations - ALL', and 'Recorders - ALL'. Under 'Insurance Payments Criteria', there are dropdowns for 'Insurance', 'Check No.', 'Batch No.', and 'Deposit No.'. A checkbox 'Show only deposits with unapplied amounts.' is present.
- Report Grouping:** 'Group By:' section with checkboxes for 'Region', 'Location', and 'Recorded by'.
- Output:** 'Printer' section with a dropdown set to 'Microsoft XPS Document Writer'. 'CSV File' section includes 'Folder' (F:\OfficeMate\Export) and 'File Name' (InsDepAuditDetail.csv).
- Buttons:** 'Process' and 'Close' buttons at the bottom.
- Report Description:** A small text box at the bottom stating: 'Lists the Applied Insurance Payments, Refunds and Insurance Charge Backs during a selected posting date period including the Insurance Company, Patient Name, Fee Slip Number, Check Number and Batch number.'

10. Refine the report results by selecting the report options, as needed:
 - a. Click the **Report Options** tab.
 - b. Select an insurance carrier from the **Insurance** drop-down menu to narrow the report results, as needed.
 - c. Select a date from the drop-down menu or type a check number in the **Check No.** text box to narrow the report results, as needed.
 - d. Select a date from the drop-down menu or type a batch number in the **Batch No.** text box to narrow the report results, as needed.
 - e. Select a date from the drop-down menu or type a deposit number in the **Deposit No.** text box to narrow the report results, as needed.
 - f. Select the **Show only deposits with unapplied amounts** check box to list only the deposits that have not been applied, as needed.

OfficeMate Insurance Reports

Report
 Report Name: Enter a Custom Report Name or Select from List Use as Title
 Report Type: Insurance Deposit Audit Report
 Report Detail: Detail

Data Selection
 Transaction Dates:
 Span: Quarter **Q2 2010**
 < 4/1/2010 - 6/30/2010 >

Report Options Regions - ALL Locations - ALL Recorders - ALL

Insurance Payments Criteria

Insurance:	AARP Health Care Options		
Check No:	06/21/2010 -	\$5.00	
Batch No:	06/21/2010 - 201022101	\$5.00	201022101
Deposit No:	06/21/2010 - \$721	\$5.00	\$721

Show only deposits with unapplied amounts.

Report Grouping
 Group By: Region Location Recorded By

Output
 Printer: Microsoft XPS Document Writer
 CSV File: Folder: F:\OfficeMate\Export
 File Name: InsDepAuditDetail.csv

Report Description:

Lists the Applied Insurance Payments, Refunds and Insurance Charge Backs during a selected posting date period including the Insurance Company, Patient Name, Fee Slip Number, Check Number and Batch number.

11. Refine the report results by selecting the regions you want to include, as needed:
 - a. Click the **Regions** tab.
 - b. Select only the regions that you want to include in the report in the **Selected** box.

NOTE To select more than one region, press and hold the **Ctrl** key and then select multiple regions.

- c. Click the single left arrow (<) to move a region to the **Available** box, and therefore, exclude the region from the report.
- d. Click one of the double arrows (<< or >>) to move all the regions from one box to another.

OfficeMate Insurance Reports

Report
 Report Name: Enter a Custom Report Name or Select from List Use as Title
 Report Type: Insurance Deposit Audit Report
 Report Detail: Detail

Data Selection
 Transaction Dates:
 Span: Quarter Q3 2010 (future)
 < 7/1/2010 - 9/30/2010 >

Report Options **Regions - 2 of 6** Locations - 3 of 6 Recorders - ALL

Select one or more Regions

Available	Selected
(No Region)	Central
Eastern	Northern
Southern	
Western	

Report Grouping
 Group By: Region Location Recorded By

Output
 Printer: Microsoft XPS Document Writer
 CSV File: Folder: F:\OfficeMate\Export
 File Name: InsDepAuditDetail.csv

Report Description

Lists the Applied Insurance Payments, Refunds and Insurance Charge Backs during a selected posting date period including the Insurance Company, Patient Name, Fee Slip Number, Check Number and Batch number.

12. Refine the report results by selecting the locations you want to include, as needed:
 - a. Click the **Locations** tab.
 - b. Select only the locations that you want to include in the report in the **Selected** box.

NOTE

To select more than one location, press and hold the **Ctrl** key and then select multiple locations.

- c. Click the single left arrow (<) to move a location to the **Available** box, and therefore exclude the location from the report.
- d. Click one of the double arrows (<< or >>) to move all the locations from one box to another.

The screenshot shows the 'OfficeMate Insurance Reports' dialog box. The 'Report' section has 'Report Name' set to 'Enter a Custom Report Name or Select from List', 'Report Type' set to 'Insurance Deposit Audit Report', and 'Report Detail' set to 'Detail'. The 'Data Selection' section has 'Transaction Dates' set to 'Q3 2010 (future)'. The 'Locations' tab is active, showing a list of available locations (Aliso Viejo Store, Newport Beach, San Diego) and a list of selected locations (Fullerton, Irvine, Rancho Cordova). The 'Output' section has 'Printer' selected as 'Microsoft XPS Document Writer'. The 'Process' button is highlighted.

13. Refine the report results by selecting the staff members who record insurance payments, as needed:
 - a. Click the **Recorders** tab.
 - b. Select only the staff members that you want to include in the report in the **Selected** box.

NOTE To select more than one staff member, press and hold the **Ctrl** key and then select multiple staff members.

- c. Click the single left arrow (<) to move a staff member to the **Available** box, and therefore exclude the staff member from the report.
- d. Click one of the double arrows (<< or >>) to move all the staff members from one box to another.

14. Select the **Report Grouping** check boxes to sort the report results into groups, as needed. You can select any number of the check boxes that are available. Not all check boxes are available for all reports.
15. If you want to save the report settings for future use, go to [To save custom report settings on page 572](#).

16. To print the report, chart, or graph, perform the following steps:
 - a. Select the **Printer** check box.
 - b. Select a printer from the drop-down menu.
 - c. Click **Process**.
The Report Viewer window opens and displays a preview of the report, chart, or graph.
 - d. Click the **Print Report** icon.
 - e. Close the Report Viewer window when finished.

NOTE

For more information about the Report Viewer window, go to [To use the Report Viewer window on page 629](#).

17. To export the data into a CSV file, perform the following steps:
 - a. Select the **CSV File** check box.
 - b. Type a folder location in the **Folder** text box.
 - c. Type a name for the file in the **File Name** text box.
 - d. Click **Process**.
 - e. Click **View File** to view the data in the CSV format.

► **To create and print custom insurance reports**

1. Open the Reports & Statements window. For more information on opening this window, go to [Opening the Reports & Statements Window on page 544](#).
2. Click the **Custom** tab.
3. Select **Insurance Reports** from the Report Name list.
4. Click **Open**.
The Custom Business Analysis Reports window opens.
5. To open previously saved report settings, go to [To load saved custom report settings on page 574](#), and then skip to step 16.
6. Select a report from the **Report Type** drop-down menu.
 - *Applied Insurance Payment Report*. Lists applied insurance payments. The report includes patient names, insurance carriers, posting dates, check numbers, fee slip numbers, batch numbers, and references.
 - *Insurance Sales Analysis*. Lists insurance charges, discounts, insurance contractual adjustments, net patient fees, net insurance fees, and insurance write-offs (bed debts).
7. Select the level of detail that you want to display in the report from the **Report Detail** drop-down menu.
8. Select a date range for the transactions you want to include in the report:
 - Select a range from the **Span** drop-down menu and use the left and right arrows to advance the time period.

OR

 - Enter beginning and ending dates in the date range fields.

9. To load previously saved report settings, click **Load** and skip to step 16.

NOTE Previously saved report settings do not affect the selection dates.

10. Refine the report results by selecting the report options, as needed:
- If you selected the Insurance Sales Analysis Report, select an insurance carrier and plan from the **Insurance Company** and **Insurance Plan** drop-down menus.

OR

- If you selected the Applied Insurance Payment Report, select an insurance carrier from the **Insurance** drop-down menu. Then, select a date from the **Check No.** drop-down menu, type a check number into the **Check No.** text box, or type a batch number in the **Batch No.** text box.

11. Refine the report results by selecting the regions you want to include, as needed:
 - a. Click the **Regions** tab.
 - b. Select only the regions that you want to include in the report in the **Selected** box.

NOTE

To select more than one region, press and hold the **Ctrl** key and then select multiple regions.

- c. Click the single left arrow (<) to move a region to the **Available** box, and therefore exclude the region from the report.
- d. Click one of the double arrows (<< or >>) to move all the regions from one box to another.

The screenshot displays the 'OfficeMate Custom Business Analysis Reports' dialog box. The 'Report' section at the top allows for naming the report and selecting a type (Insurance Sales Analysis Report) and detail (Insurance Company). The 'Data Selection' section includes a date range from 8/1/2010 to 8/17/2010. The 'Report Options' section has tabs for 'Regions - 1 of 6', 'Locations - 2 of 8', 'Providers - ALL', and 'Products - ALL'. The 'Regions' tab is active, showing an 'Available' list with 'No Region', 'Eastern', 'Northern', 'Southern', and 'Western', and a 'Selected' list with 'Central'. Navigation arrows are present between the lists. The 'Report Grouping' section has radio buttons for 'Region', 'Location', and 'Provider'. The 'Output' section has a checked 'Printer' option set to 'Microsoft XPS Document Writer' and a 'CSV File' option with a folder path and file name 'InsuranceSales.csv'. A 'Report Description' at the bottom explains the report's purpose.

12. Refine the report results by selecting the locations you want to include, as needed:
 - a. Click the **Locations** tab.
 - b. Select only the locations that you want to include in the report in the **Selected** box.

NOTE To select more than one location, press and hold the **Ctrl** key and then select multiple locations.

- c. Click the single left arrow (<) to move a location to the **Available** box, and therefore exclude the location from the report.
- d. Click one of the double arrows (<< or >>) to move all the locations from one box to another.

The screenshot displays the 'OfficeMate Custom Business Analysis Reports' dialog box. The 'Report' section includes fields for 'Report Name', 'Report Type' (Insurance Sales Analysis Report), and 'Report Detail' (Insurance Company). The 'Data Selection' section shows 'Span: MTD' and 'August to Date' for transaction dates. The 'Locations' tab is active, showing a list of available locations (Aliso Viejo Store, Newport Beach, Rancho Cordova, San Diego) and a selected location (Fullerton Inline). The 'Report Grouping' section has 'Region' selected. The 'Output' section shows 'Printer' selected as the output method, with 'Microsoft XPS Document Writer' as the printer and 'C:\OfficeMate\Export' as the folder. The 'File Name' is 'InsuranceSales.csv'. The 'Process' button is highlighted.

13. Refine the report results by selecting the providers or staff you want to include, as needed:
 - a. Click the **Providers** tab.
 - b. Select the **Providers**, **Staff Members**, or **Recorded By** radio button to limit the providers or staff that are available to select.
 - c. Select only the providers or staff members that you want to include in the report in the **Selected** box.

NOTE

To select more than one provider or staff member, press and hold the **Ctrl** key and then select multiple providers or staff members.

- d. Click the single left arrow (←) to move a provider or staff member to the **Available** box, and therefore exclude the provider or staff member from the report.
- e. Click one of the double arrows (≪ or ≫) to move all the providers or staff members from one box to another.

OfficeMate Custom Business Analysis Reports

Report
 Report Name: Enter a Custom Report Name or Select from List Use as Title
 Report Type: Insurance Sales Analysis Report
 Report Detail: Insurance Company

Data Selection
 Transaction Dates:
 Span: MTD **August to Date**
 < 8/1/2010 8/17/2010 >

Report Options | Regions - 1 of 6 | Locations - 2 of 8 | **Providers - 1 of 9** | Products - ALL

Select: Providers Staff Members Recorded By

Available	Selected
(None)	Doctor, Johnny
Damschroder, Carrie	
Default, Fix	
June, Horton	
Mason, Mickey	
Rosenbaum, Stephen	

Report Grouping
 Group By: Region Location Provider

Output
 Printer: Microsoft XPS Document Writer
 CSV File: Folder: C:\OfficeMate\Report File Name: InsuranceSales.csv

Report Description: Analyzes insurance sales by breaking out patient and insurance charges net of discounts and insurance contractual adjustments. It gives a true picture of the results of your insurance sales.

14. Refine the report results by selecting the products you want to include, as needed:
 - a. Click the **Products** tab.
 - b. Select the **Financial Groups**, **Production Groups**, or **Attributes** radio button to narrow the report results by financial group, production group, or attribute.
 - c. Select only the financial groups, production groups, or attributes that you want to include in the report in the **Selected** box.

NOTE To select more than one product, press and hold the **Ctrl** key and then select multiple products.

- d. Click the single left arrow (←) to move a product to the **Available** box, and therefore exclude the product from the report.
- e. Click one of the double arrows (⇐ or ⇒) to move all the products from one box to another.

15. Select the **Report Grouping** check boxes to sort the report results into groups, as needed. You can select any number of the check boxes that are available. Not all check boxes are available for all reports.
16. If you want to save the report settings for future use, go to [To save custom report settings on page 572](#).

17. To print the report, chart, or graph, perform the following steps:
 - a. Select the **Printer** check box.
 - b. Select a printer from the drop-down menu.
 - c. Click **Process**.
 The Report Viewer window opens and displays a preview of the report, chart, or graph.
 - d. Click the **Print Report** icon.
 - e. Close the Report Viewer window when finished.

NOTE

For more information about the Report Viewer window, go to [To use the Report Viewer window on page 629](#).

18. To export the data into a CSV file, perform the following steps:
 - a. Select the **CSV File** check box.
 - b. Type a folder location in the **Folder** text box.
 - c. Type a name for the file in the **File Name** text box.
 - d. Click **Process**.
 - e. Click **View File** to view the data in the CSV format.

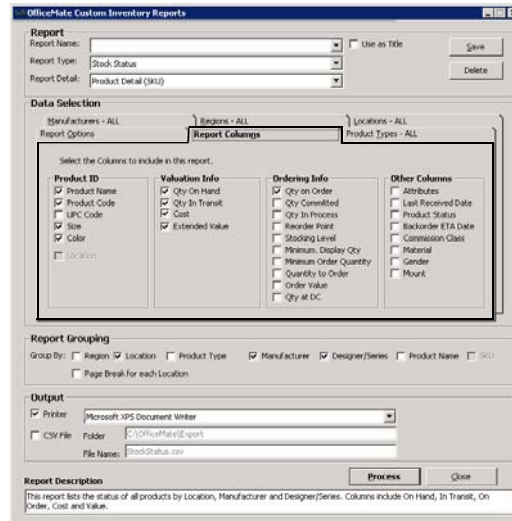
► **To create and print custom inventory reports**

1. Open the Reports & Statements window. For more information on opening this window, go to [Opening the Reports & Statements Window on page 544](#).
2. Click the **Custom** tab.
3. Select **Inventory Custom Reports** from the Report Name list.
4. Click **Open**.
 The Custom Inventory Reports window opens.
5. To open previously saved report settings, go to [To load saved custom report settings on page 574](#), and then skip to step 15.
6. Select a report from the **Report Type** drop-down menu.
 - *Frame Stock Status*. Lists the status of frames, plano sunglasses, and ready readers by location, manufacturer, and designer.
 - *Inventory Valuation*. Lists the valuation of inventory by financial group. Valuations account for on-hand and in-transit inventory.
 - *Location Inventory*. Lists all products by location, including on-hand, stocking level, and minimum order quantity.
 - *Order Recommendation*. Lists recommended product orders based on stocking level, reorder point, reorder quantity, quantity on order, and quantity committed. Use this report to order inventory.
 - *Stock Status*. Lists the status of all products by location, manufacturer, and designer or series.

7. Select the level of inventory totals that you want to display in the report from the **Report Detail** drop-down menu.

8. Narrow the search results to specific types of inventory, as needed:
 - a. Click the **Report Options** tab.
 - b. Select or deselect the **Quantity Options** and **Product Status and Consignment** check boxes.

9. Narrow the report display results to specific information, as needed:
 - a. Click the **Report Columns** tab.
 - b. Select or deselect the **Product ID**, **Valuation Info**, **Ordering Info**, and **Other Columns** check boxes.



OfficeMate Custom Inventory Reports

Report Name: Use as Title

Report Type:

Report Detail:

Data Selection

Manufacturers - ALL | Region - ALL | Locations - ALL

Report Options | **Report Columns** | Product Types - ALL

Select the Columns to include in this report.

Product ID	Valuation Info	Ordering Info	Other Columns
<input checked="" type="checkbox"/> Product Name	<input checked="" type="checkbox"/> Qty On Hand	<input checked="" type="checkbox"/> Qty on Order	<input checked="" type="checkbox"/> Attributes
<input checked="" type="checkbox"/> Product Code	<input checked="" type="checkbox"/> Qty In Transit	<input checked="" type="checkbox"/> Qty Committed	<input checked="" type="checkbox"/> Last Received Date
<input checked="" type="checkbox"/> UPC Code	<input checked="" type="checkbox"/> Cost	<input checked="" type="checkbox"/> Qty In Process	<input checked="" type="checkbox"/> Product Status
<input checked="" type="checkbox"/> Size	<input checked="" type="checkbox"/> Extended Value	<input checked="" type="checkbox"/> Reorder Point	<input checked="" type="checkbox"/> Backorder ETA Date
<input checked="" type="checkbox"/> Color		<input checked="" type="checkbox"/> Stocking Level	<input checked="" type="checkbox"/> Commission Class
<input type="checkbox"/> Location		<input checked="" type="checkbox"/> Minimum Display Qty	<input checked="" type="checkbox"/> Material
		<input checked="" type="checkbox"/> Minimum Order Quantity	<input checked="" type="checkbox"/> Gender
		<input checked="" type="checkbox"/> Quantity to Order	<input checked="" type="checkbox"/> Mount
		<input checked="" type="checkbox"/> Order Value	
		<input checked="" type="checkbox"/> Qty at DC	

Report Grouping

Group By: Region Location Product Type Manufacturer Designer/Series Product Name (all)

Page Break for each Location

Output

Printer:

CSV File: Folder: File Name:

Report Description

This report lists the status of all products by Location, Manufacturer and Designer/Series. Columns include On Hand, In Transit, On Order, Cost and Value.

10. Refine the report results by selecting the product types, financial groups, or production groups you want to include, as needed:
 - a. Click the **Product Types** tab.
 - b. Select the **Product Types**, **Financial Groups**, or **Production Groups** radio button to narrow the report results by product type, financial group, or production group.
 - c. Select only the product types that you want to include in the report in the **Selected** box.

NOTE

To select more than one group, press and hold the **Ctrl** key and then select multiple groups.

- d. Click the single left arrow (<) to move a group to the **Available** box, and therefore, exclude the group from the report.
- e. Click one of the double arrows (<< or >>) to move all the groups from one box to another.

The screenshot shows the 'OfficeMate Custom Inventory Reports' dialog box. The 'Report' section includes fields for 'Report Name', 'Report Type' (set to 'Stock Status'), and 'Report Detail' (set to 'Product Detail (SKU)'). The 'Data Selection' section has tabs for 'Manufacturers - ALL', 'Engines - ALL', and 'Locations - ALL'. Under 'Product Types - 5 of 7', there are radio buttons for 'Product Types', 'Financial Groups', and 'Production Groups'. Below these are two boxes: 'Available' (containing 'Accessories' and 'Ready Readers') and 'Selected' (containing 'Contact Lenses', 'Frames', 'Optometric Lenses', 'Other', and 'Photo Sunlasses'). The 'Report Grouping' section has checkboxes for 'Group By' (Region, Location, Product Type, Manufacturer, Designer/Series, Product Name, SKU) and 'Page Break for each Location'. The 'Output' section has a checked 'Printer' field set to 'Microsoft XPS Document Writer', a 'CSV File' checkbox, and a 'File Name' field set to 'StockStatus.csv'. The 'Report Description' section has a 'Process' button and a 'Close' button.

11. Refine the report results by selecting the manufacturers you want to include, as needed:
 - a. Click the **Manufacturers** tab.
 - b. Select either the **Manufacturers** or **Vendors** radio button to narrow the report results by manufacturer or vendor.
 - c. Select only the manufacturers or vendors that you want to include in the report in the **Selected** box.

NOTE

To select more than one manufacturer or vendor, press and hold the **Ctrl** key and then select multiple manufacturers or vendors.

- d. Click the single left arrow (**<**) to move a manufacturer or vendor to the **Available** box, and therefore, exclude the manufacturer or vendor from the report.
- e. Click one of the double arrows (**<<** or **>>**) to move all the manufacturers or vendors from one box to another.

The screenshot shows the 'OfficeMate Custom Inventory Reports' dialog box. The 'Report' section at the top has 'Report Name' set to 'Stock Status', 'Report Type' set to 'Stock Status', and 'Report Detail' set to 'Product Detail (SKU)'. There are 'Save' and 'Delete' buttons. The 'Data Selection' section has 'Report Options' set to 'Manufacturers - ALL', 'Report Columns' set to 'Region - ALL', and 'Product Types' set to '5 of 7'. Below this, there are radio buttons for 'Vendors' (unchecked) and 'Manufacturers' (checked). There are two list boxes: 'Available' (empty) and 'Selected' (containing several manufacturer names like '21ST CENTURY OPTICS, INC. - LONG ISLAND'). Navigation arrows are between the boxes. Below the lists is a 'Designer/Series' dropdown. The 'Report Grouping' section has 'Group By' options: 'Region' (unchecked), 'Location' (unchecked), 'Product Type' (unchecked), 'Manufacturer' (checked), 'Designer/Series' (unchecked), 'Product Name' (unchecked), and 'SKU' (unchecked). There is also a 'Page Break for each Location' checkbox. The 'Output' section has a 'Printer' dropdown set to 'Microsoft XPS Document Writer', a 'CSV File' checkbox (unchecked), a 'Folder' field set to 'C:\OfficeMate\Report', and a 'File Name' field set to 'StockStatus.csv'. At the bottom, there is a 'Report Description' section with a 'Process' button and a 'Close' button.

12. Refine the report results by selecting the regions you want to include, as needed:
 - a. Click the **Regions** tab.
 - b. Select only the regions that you want to include in the report in the **Selected** box.

NOTE To select more than one region, press and hold the **Ctrl** key and then select multiple regions.

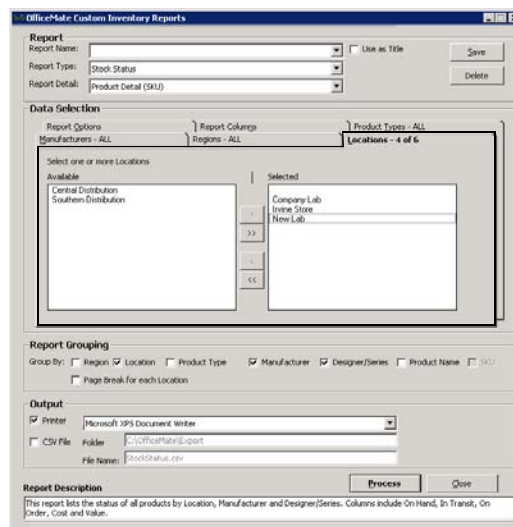
- c. Click the single left arrow (<) to move a region to the **Available** box, and therefore, exclude the region from the report.
- d. Click one of the double arrows (<< or >>) to move all the regions from one box to another.

The screenshot shows the 'OfficeMate Custom Inventory Reports' dialog box. The 'Report' section at the top has 'Report Name' (empty), 'Report Type' set to 'Stock Status', and 'Report Detail' set to 'Product Detail (SKU)'. The 'Data Selection' section is the main focus, with 'Regions - ALL' selected under 'Report Options'. Below this, there are two boxes: 'Available' (empty) and 'Selected' (containing '(No Region)' and 'Southern'). Between these boxes are navigation arrows: a single left arrow (<), a double left arrow (<<), a double right arrow (>>), and a single right arrow (>). The 'Report Grouping' section has 'Group By' options: 'Region' (unchecked), 'Location' (checked), 'Product Type' (unchecked), 'Manufacturer' (checked), 'Designer/Series' (checked), and 'Product Name' (unchecked). There is also a 'Page Break for each Location' checkbox (unchecked). The 'Output' section has 'Printer' checked with 'Microsoft XPS Document Writer' selected, and 'CSV File' unchecked. The 'Folder' is 'C:\OfficeMate\Report' and the 'File Name' is 'StockStatus.csv'. At the bottom, the 'Report Description' states: 'This report lists the status of all products by Location, Manufacturer and Designer/Series. Columns include On Hand, In Transit, On Order, Cost and Value.'

13. Refine the report results by selecting the locations you want to include, as needed:
 - a. Click the **Locations** tab.
 - b. Select only the locations that you want to include in the report in the **Selected** box.

NOTE To select more than one location, press and hold the **Ctrl** key and then select multiple locations.

- c. Click the single left arrow (<) to move a location to the **Available** box, and therefore, exclude the location from the report.
- d. Click one of the double arrows (<< or >>) to move all the locations from one box to another.



14. Select the **Report Grouping** check boxes to sort the report results into groups, as needed. You can select any number of the check boxes that are available. Not all check boxes are available for all reports.
15. If you want to save the report settings for future use, go to [To save custom report settings on page 572](#).
16. To print the report, chart, or graph, perform the following steps:
 - a. Select the **Printer** check box.
 - b. Select a printer from the drop-down menu.
 - c. Click **Process**.
 The Report Viewer window opens and displays a preview of the report, chart, or graph.
 - d. Click the **Print Report** icon.
 - e. Close the Report Viewer window when finished.

NOTE For more information about the Report Viewer window, go to [To use the Report Viewer window on page 629](#).

17. To export the data into a CSV file, perform the following steps:
 - a. Select the **CSV File** check box.
 - b. Type a folder location in the **Folder** text box.
 - c. Type a name for the file in the **File Name** text box.
 - d. Click **Process**.
 - e. Click **View File** to view the data in the CSV format.

► **To create and print custom performance reports**

1. Open the Reports & Statements window. For more information on opening this window, go to [Opening the Reports & Statements Window on page 544](#).
2. Click the **Custom** tab.
3. Select **Performance Reports** from the Report Name list.
4. Click **Open**.

The Custom Business Analysis Reports window opens.
5. To open previously saved report settings, go to [To load saved custom report settings on page 574](#), and then skip to step 15.
6. Select a report from the **Report Type** drop-down menu.
 - *Performance Report - Net Fees*. Lists performance results, based on products sold and services rendered, in terms of net fees.
 - *Performance Reports - Net Quantities*. Lists performance results, based on products sold and services rendered, in terms of net quantities.
7. Select the level of detail that you want to display in the report from the **Report Detail** drop-down menu.

8. Select a date range for the information you want to include in the report.
 - Select a range from the **Span** drop-down menu and use the left and right arrows to advance the time period.

OR

- Enter beginning and ending dates in the date range fields.

The screenshot shows the 'OfficeMate Custom Business Analysis Reports' dialog box. The 'Report' section has 'Report Name' set to 'Performance Report - Net Fees' and 'Report Detail' set to 'Summary'. The 'Data Selection' section has 'Span' set to 'YTD' and 'Dates' set to 'Q1 2010 to date'. The 'Report Options' section has tabs for 'Regions - ALL', 'Locations - ALL', 'Providers - ALL', and 'Products - ALL', and a 'Setup Report' button. The 'Report Grouping' section has 'Group By' options for 'Region', 'Location', and 'Provider'. The 'Output' section has 'Printer' checked and 'CSV File' unchecked. At the bottom, there is a 'Process' button and a 'Close' button, along with a small disclaimer text.

9. Refine the report results by selecting the report options, as needed:
 - a. Click the **Report Options** tab.
 - b. Click **Setup Report**.

The Business Analysis Reports Setup Options window opens.

- c. Click the various tabs on the Business Analysis Reports Setup Options window.
- d. Select items that you want to include as quantities or fees in the column represented by the tab.

NOTES

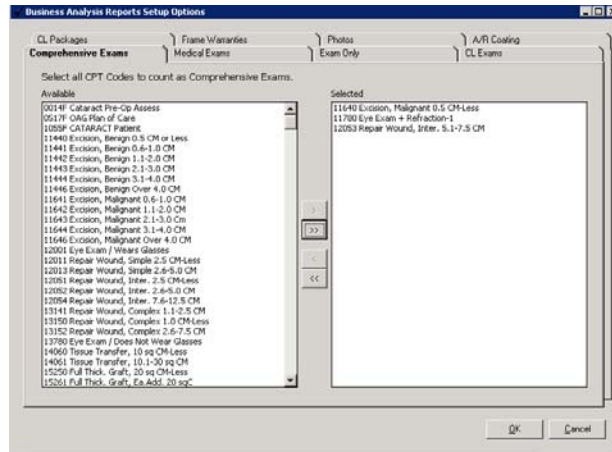
- On the Comprehensive Exams tab, you can select the CPT codes to include as quantities or fees in the Comp. Exam column in the report.
- On the Medical Exams tab, you can select the CPT codes to include as quantities or fees in the Medical Exam column in the report.
- On the Exam Only tab, you can select the CPT codes to include as quantities or fees in the Exam Only column in the report.
- On the CL Exams tab, you can select the CPT codes to include as quantities or fees to calculate the number of contact lens exams performed. This number is then used to calculate the percentage of contact lens packages sold.
- On the CL Packages tab, you can select the contact lens packages sold. For information on setting up contact lens packages, see [Setting Up Discounts & Packages on page 89](#).
- On the Photos tab, you can select the CPT codes to include as quantities or fees in the Photos column in the report.
- On the A/R Coatings tab, you can select the A/R coating attributes that are part of A/R coatings added to lenses. For information on setting up attributes, go to [To add & modify attributes on page 141](#). For information on adding attributes to products, go to [To maintain product attributes on page 272](#).
- On the Frame Warranties tab, you can select production groups that relate to contact lens warranties. For information on setting up a warranty production report group list box selection, go to [To add list box selections on page 37](#).

- e. Click the right arrow (>) to move products to the **Selected** box.
- f. Click one of the double arrows (<< or >>) to move all the products from one box to another.

NOTE

To select more than one item, press and hold the **Ctrl** key and then select multiple items.

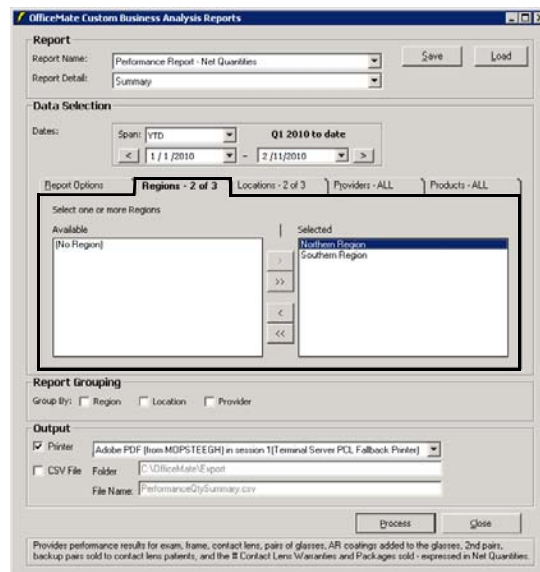
- g. Click **OK**.



10. Refine the report results by selecting the regions you want to include, as needed:
 - a. Click the **Regions** tab.
 - b. Select only the regions that you want to include in the report in the **Selected** box.

NOTE To select more than one region, press and hold the **Ctrl** key and then select multiple regions.

- c. Click the single left arrow (<) to move a region to the **Available** box, and therefore exclude the region from the report.
- d. Click one of the double arrows (<< or >>) to move all the regions from one box to another.



11. Refine the report results by selecting the locations you want to include, as needed:
 - a. Click the **Locations** tab.
 - b. Select only the locations that you want to include in the report in the **Selected** box.

NOTE To select more than one location, press and hold the **Ctrl** key and then select multiple locations.

- c. Click the single left arrow (<) to move a location to the **Available** box, and therefore exclude the location from the report.
- d. Click one of the double arrows (<< or >>) to move all the locations from one box to another.

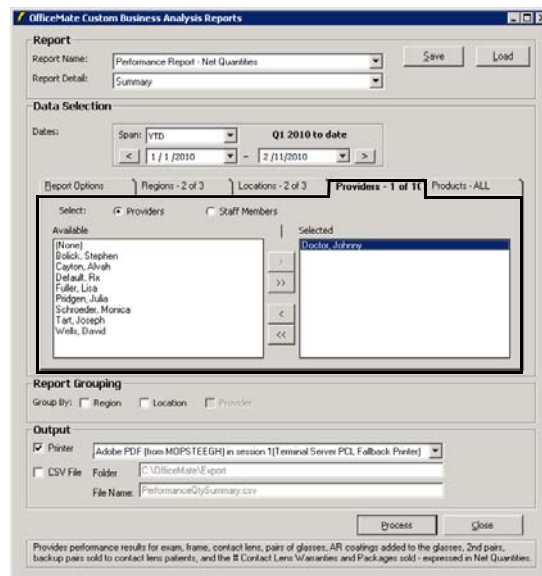
The screenshot shows the 'OfficeMate Custom Business Analysis Reports' dialog box. The 'Locations' tab is selected, displaying two columns: 'Available' and 'Selected'. The 'Available' column lists 'Eye Care Management'. The 'Selected' column lists '019 Irvine Store' and '022 Lake Forest Store'. The 'Data Selection' section shows 'Span: YTD' and 'Q1 2010 to date'. The 'Output' section shows 'Printer: Adobe PDF (from MQPSTEEGH) in session 1 | Terminal Server PCL fallback Printer' and 'Folder: C:\OfficeMate\Export'. The 'File Name' is 'PerformanceQtySummary.csv'. The 'Process' and 'Close' buttons are at the bottom right.

12. Refine the report results by selecting the providers or staff members you want to include, as needed:
 - a. Click the **Providers** tab.
 - b. Select the **Providers**, **Staff Members**, or **Recorded By** radio button to limit the providers or staff that are available to select.
 - c. Select only the providers or staff members that you want to include in the report in the **Selected** box.

NOTE

To select more than one provider or staff member, press and hold the **Ctrl** key and then select multiple providers or staff members.

- d. Click the single left arrow (←) to move a provider or staff member to the **Available** box, and therefore exclude the provider or staff member from the report.
- e. Click one of the double arrows (⇐ or ⇒) to move all the providers or staff members from one box to another.



13. Select the **Report Grouping** check boxes to sort the report results into groups, as needed. You can select any number of the check boxes that are available. Not all check boxes are available for all reports.
14. If you want to save the report settings for future use, go to [To save custom report settings on page 572](#).

15. To print the report, chart, or graph, perform the following steps:
 - a. Select the **Printer** check box.
 - b. Select a printer from the drop-down menu.
 - c. Click **Process**.
The Report Viewer window opens and displays a preview of the report, chart, or graph.
 - d. Click the **Print Report** icon.
 - e. Close the Report Viewer window when finished.

NOTE

For more information about the Report Viewer window, go to [To use the Report Viewer window on page 629](#).

16. To export the data into a CSV file, perform the following steps:
 - a. Select the **CSV File** check box.
 - b. Type a folder location in the **Folder** text box.
 - c. Type a name for the file in the **File Name** text box.
 - d. Click **Process**.
 - e. Click **View File** to view the data in the CSV format.

► **To create and print custom production reports**

NOTES

- Production reports may take a long time to process the first time you preview a report. Subsequent production report processing will be much faster. The first time you run the production reports, select a time period that encompasses the date of the start of business and most current date.

Ensure that locations that are no longer active are marked as inactive in the Location Maintenance window. For more information about marking locations as inactive, go to [Maintaining Locations on page 24](#)

1. Open the Reports & Statements window. For more information on opening this window, go to [Opening the Reports & Statements Window on page 544](#).
2. Click the **Custom** tab.
3. Select **Production Reports** from the Report Name list.
4. Click **Open**.
The Custom Business Analysis Reports window opens.
5. To open previously saved report settings, go to [To load saved custom report settings on page 574](#), and then skip to step 18.

6. Select a report from the **Report Type** drop-down menu.
 - *Production Report - Period Comparison*. Lists sales, discounts, adjustments, returns, receipts, and applied payments grouped by production or financial groups.
 - *Production Report - Location Comparison*. Compares sales, discounts, adjustments, returns receipts, and applied payments between selected locations.
 - *Production Report - Provider Comparison*. Compares sales, discounts, adjustments, returns receipts, and applied payments between selected providers.
 - *Production Report - Year-to-Year*. Compares sales, discounts, adjustments, returns receipts, and applied payments during a selected period and year-to-date and compares to the same period one year prior and prior year-to-date.
 - *Productivity Recap*. Lists Charges, Adjustments, Receipts, or Applied Payments and Refunds for a selected period. Results can be grouped by location then provider or by provider then location.
 - *Monthly Production Recap*. Lists a summary of sales, discounts, adjustments, returns receipts, and applied payments by day.
7. Select the level of detail that you want to display in the report from the **Report Detail** drop-down menu.
8. Select the **Resummarize** check box to recalculate the totals as needed.

NOTES

- Select the **Resummarize** check box only if you have noticed that the Production reports at the Summary and Product Group levels do not match the reports at the Patient and Product Detail levels. Selecting the Resummarize check box greatly lengthens the amount of time it takes to generate the report.
- By default, the Summary and Product Groups reports use the data that was summarized the last time the report ran as a starting point for its calculations. Using the previous summary rather than recalculating from the beginning of your recorded data saves time; however, due to irregularities, the reports may become inaccurate over time. Selecting the Resummarize check box corrects these irregularities.

9. Select a date range for the transactions you want to include in the report:
 - Select a range from the **Span** drop-down menu and use the left and right arrows to advance the time period.

OR

- Enter beginning and ending dates in the date range fields.

The screenshot shows the 'OfficeMate Custom Business Analysis Reports' dialog box. It is divided into several sections:

- Report:** Report Name (dropdown), Report Type (Production Report - Location Comparison), Report Detail (Summary).
- Data Selection:** Transaction Dates, Span (MTD), August to Date (selected), and date range fields (8/1/2010 to 8/17/2010).
- Report Options:** Includes checkboxes for 'Include Fees', 'Include Receipts', 'Include Applied Payments', 'Apply Adjustments and Applied Payments to Fee Slip Location', and 'Show Change as Percentage'.
- Report Grouping:** Group By (Region, Location, Provider).
- Output:** Printer (Microsoft XPS Document Writer), Folder (C:\OfficeMate2\report), File Name (ProductionLocation.csv).

10. If you selected the Production Report - Period Comparison, select a period from the **Comparison Period** drop-down menu.
11. Refine the report results by selecting the report options, as needed:
 - a. Click the **Report Options** tab.
 - b. To include product fees on the report, select the **Include Fees** check box and select the check boxes that correspond to the types of fees you want to include.
 - c. To include payments received on the report, select the **Include Receipts** check box and select the check boxes that correspond to the types of receipts you want to include. If you selected Production Report - Provider Comparison report, you cannot select the Include Receipts check box and corresponding check boxes.
 - d. To include receipts applied to charges on the report, select the **Include Applied Payments** check box and select the check boxes that correspond to the types of payments you want to include.
 - e. Select the **Apply Adjustments and Applied Payments to Fee Slip Location** check box to report adjustments and payments by fee slip location. For example, if a payment or adjustment is recorded in OfficeMate Administration, that payment will be applied to the location of the fee slip rather than to the administrative location.
 - f. If you selected the Production Report - Year-to-Year Comparison report, select the **Show Change as Percentage** check box to include the percentage of change instead of the change in dollars, as needed.
 - g. If you selected the Productivity Recap or Monthly Production Recap reports, select whether you want to run the report for deposits and

receipts or by applied payments, indicate whether you want the report to list payments and adjustments by location, and select whether you want each group to start at the top of new page.

OfficeMate Custom Business Analysis Reports

Report
 Report Name: Enter a Custom Report Name or Select from List Use as Title
 Report Type: Production Report - Location Comparison
 Report Detail: Summary Resummarize Totals

Data Selection
 Transaction Dates:
 Span: MTD August to Date
 8/1/2010 - 8/17/2010

Report Options Regions - ALL Locations - ALL Providers - ALL Products - ALL

Production Report Sections

- Include Fees
 - Gross Fees
 - Adj., Disc & Returns
 - Charge Backs
 - Sales Taxes
- Include Receipts
 - Patient Deposits
 - Insurance Deposits
 - Deposit Adjustments
 - Other Payment Methods
- Include Applied Payments
 - Patient Payments
 - Insurance Payments
 - Charge Backs
- Apply Adjustments and Applied Payments to Fee Slip Location
- Show Change as Percentage
- List by Payment Method
- Combine Groups

Report Grouping
 Group By: Region Location Provider

Output
 Printer: Microsoft XPS Document Writer
 CSV File Folder: C:\OfficeMate\Export
 File Name: ProductionLocation.csv

Report Description
 Compares each locations production for the selected period grouped by the Financial or Production Report Groups. Report outputs are Sales, Discounts, Adjustments and Returns, Receipts and Applied Payments.

12. Refine the report results by selecting the regions you want to include, as needed:
 - a. Click the **Regions** tab.
 - b. Select only the regions that you want to include in the report in the **Selected** box.

NOTE To select more than one region, press and hold the **Ctrl** key and then select multiple regions.

- c. Click the single left arrow (<) to move a region to the **Available** box, and therefore exclude the region from the report.
- d. Click one of the double arrows (<< or >>) to move all the regions from one box to another.

The screenshot shows the 'OfficeMate Custom Business Analysis Reports' dialog box. The 'Report' section at the top has 'Report Name' set to 'Enter a Custom Report Name or Select from List', 'Report Type' set to 'Production Report - Location Comparison', and 'Report Detail' set to 'Summary'. The 'Data Selection' section is active, with 'Transaction Dates' set to 'Span: MTD' from 'August to Date' 8/1/2010 to 8/17/2010. The 'Regions' tab is selected, showing a list of regions: Available (No Region, Eastern, Southern, Western) and Selected (Central, Northern). The 'Report Grouping' section shows 'Group By: Region' selected. The 'Output' section shows 'Printer: Microsoft XPS Document Writer' and 'CSV File: Folder: C:\OfficeMate\Report, File Name: ProductionLocation.csv'. The 'Process' button is highlighted.

13. Refine the report results by selecting the locations you want to include, as needed:
 - a. Click the **Locations** tab.
 - b. Select only the locations that you want to include in the report in the **Selected** box.

NOTE To select more than one location, press and hold the **Ctrl** key and then select multiple locations.

- c. Click the single left arrow (<) to move a location to the **Available** box, and therefore exclude the location from the report.
- d. Click one of the double arrows (<< or >>) to move all the locations from one box to another.

The screenshot displays the 'OfficeMate Custom Business Analysis Reports' window. The 'Report' section at the top allows for naming the report and selecting a type ('Production Report - Location Comparison') and detail ('Summary'). Below this, the 'Data Selection' section includes a date range from 8/1/2010 to 8/17/2010. The 'Report Options' section shows 'Locations - 3 of 8' selected. The 'Available' list contains 'Aliso Viejo Store', 'Newport Beach', and 'San Diego', while the 'Selected' list contains 'None' and 'Rancho Cordova'. The 'Output' section is configured for a printer and a CSV file named 'ProductionLocation.csv'. A 'Report Description' at the bottom explains that the report compares production for selected locations.

14. Refine the report results by selecting the providers or staff members you want to include, as needed:
 - a. Click the **Providers** tab.
 - b. Select the **Providers**, **Staff Members**, or **Recorded By** radio button to limit the providers or staff that are available to select.
 - c. Select only the providers or staff members that you want to include in the report in the **Selected** box.

NOTE

To select more than one provider or staff member, press and hold the **Ctrl** key and then select multiple providers or staff members.

- d. Click the single left arrow (**<**) to move a provider or staff member to the **Available** box, and therefore exclude the provider or staff member from the report.
- e. Click one of the double arrows (**<<** or **>>**) to move all the providers or staff members from one box to another.

The screenshot shows the 'OfficeMate Custom Business Analysis Reports' dialog box. The 'Report' section includes fields for 'Report Name' (with a dropdown), 'Report Type' (set to 'Production Report - Location Comparison'), and 'Report Detail' (set to 'Summary'). There are 'Use as Title', 'Save', and 'Cancel' buttons. The 'Data Selection' section has 'Transaction Dates' set to 'MTD' from '8/1/2010' to '8/17/2010'. Below this are 'Report Options' for 'Regions - 2 of 6', 'Locations - 3 of 8', 'Providers - 6 of 9', and 'Products - ALL'. The 'Providers' tab is active, showing a 'Select:' section with radio buttons for 'Providers' (selected), 'Staff Members', and 'Recorded By'. There are two list boxes: 'Available' (containing '(None)') and 'Selected' (containing 'Danzon, Carrie', 'Dreval, Pia', 'Drover, Johnny', 'June, Matt', 'Mason, Mickey', and 'Rosenbaum, Stephen'). Navigation arrows are between the boxes. The 'Report Grouping' section has 'Group By:' with radio buttons for 'Region', 'Location', and 'Provider'. The 'Output' section has a checked 'Printer' dropdown set to 'Microsoft XPS Document Writer', a 'Folder' field set to 'C:\OfficeMate\Export', and a 'File Name' field set to 'ProductionLocation.csv'. At the bottom, there is a 'Report Description' section with a 'Process' button and a 'Close' button.

15. Refine the report results by selecting the products you want to include, as needed:
 - a. Click the **Products** tab.
 - b. Select the **Financial Groups**, **Production Groups**, or **Attributes** radio button to narrow the report results by financial group, production group, or attribute.
 - c. Select only the financial groups, production groups, or attributes that you want to include in the report in the **Selected** box.

NOTE

To select more than one product, press and hold the **Ctrl** key and then select multiple products.

- d. Click the single left arrow (←) to move a product to the **Available** box, and therefore exclude the product from the report.
- e. Click one of the double arrows (≪ or ≫) to move all the products from one box to another.

16. Select the **Report Grouping** check boxes to sort the report results into groups, as needed. You can select any number of the check boxes that are available. Not all check boxes are available for all reports.
17. If you want to save the report settings for future use, go to [To save custom report settings on page 572](#).

18. To print the report, chart, or graph, perform the following steps:

- a. Select the **Printer** check box.
- b. Select a printer from the drop-down menu.
- c. Click **Process**.

The Report Viewer window opens and displays a preview of the report, chart, or graph.

- d. Click the **Print Report** icon.
- e. Close the Report Viewer window when finished.

NOTE

For more information about the Report Viewer window, go to [To use the Report Viewer window on page 629](#).

19. To export the data into a CSV file, perform the following steps:

- a. Select the **CSV File** check box.
- b. Type a folder location in the **Folder** text box.
- c. Type a name for the file in the **File Name** text box.
- d. Click **Process**.
- e. Click **View File** to view the data in the CSV format.

► **To use the Report Viewer window**

❖ Complete one or more of the following tasks in the Report Viewer window:

- Click the **Toggle Group Tree** icon to view the headings in the Preview tab. Click the **+** (plus sign) next to headings on the **Preview** tab to view the subheadings in the report. Click a heading or subheading to view that section of the report.
- Click the **Search Text** icon to search for a name or amount displayed in the report.
- Click the **Print Report** icon to open the Print window and print the report.
- Close the Report Viewer window.

The screenshot shows the Report Viewer window with a preview of an insurance payment report. The report is titled 'Applied Insurance Payment Report' and is a 'Summary by Location by Provider' for the period '9/1/2009 to 9/17/2009'. The report is organized into a tree structure on the left, with 'Anvi Optical Store' expanded to show 'MINNIE MOUSE' and 'VSP'. The main preview area shows a table of insurance payments.

Insurance Name	Ins. Payment
Anvi Optical Store	
MINNIE MOUSE	
VSP	\$20.00
Total MINNIE MOUSE	\$20.00
Total Anvi Optical Store	\$20.00
Pacific Park Store	
Mickey Mouse	
Aetna	\$159.75
CareMore	\$221.10
Total Mickey Mouse	\$380.85
Total Pacific Park Store	\$380.85
Report Total	\$400.85

Viewing the Business Insights Dashboard, Powered by The EDGE

Watch a [training video](#) on our YouTube channel about how to use the new business insights dashboard, *powered by The EDGE*.

To understand the [terms](#) and [values](#) used in the new business insights dashboard, *powered by The EDGE*, view our corresponding knowledge base articles.

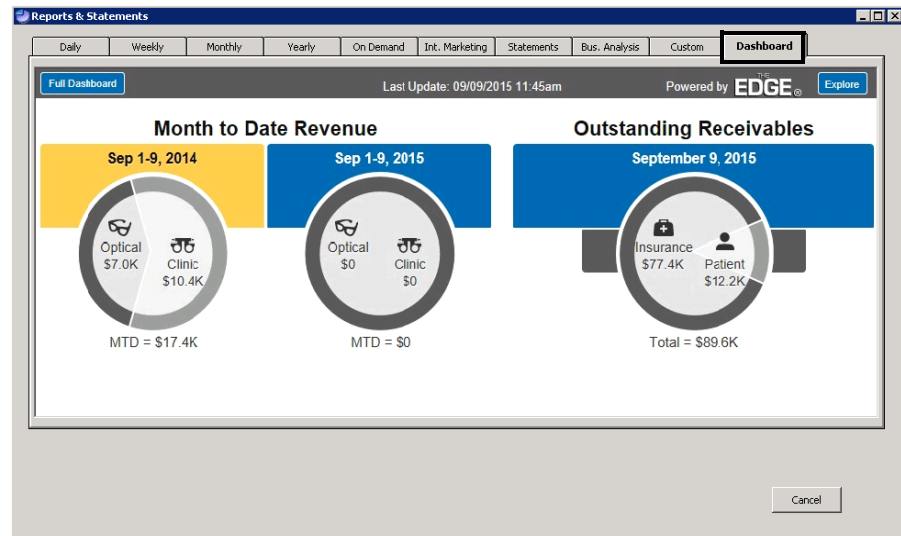
You can view a business insights financial dashboard, *powered by The EDGE*[®], directly from within OfficeMate. This dashboard gives you an overview of month-to-date and year-to-date total clinic and optical revenue, revenue per exam, capture rates, average frame sales, and outstanding receivables in a very easy-to-understand graphical format.

1. Open the Reports & Statements window. For more information on opening this window, go to [Opening the Reports & Statements Window on page 544](#).

NOTE

If you have access to the business insights financial dashboard, *powered by The EDGE*, the default tab that will open when you open the Reports & Statements window will be the Dashboard tab.

2. Click the **Dashboard** tab.
3. Click the blue **Explore** button to learn more about The EDGE, or, if you are a current EDGE subscriber, to access your business's financial data.



Creating & Printing the Exam Analysis Report

1. Open the Exam Analysis window:
 - a. From the OfficeMate Administration main window, click the **Reports** drop-down menu.
 - b. Select **ExamWRITER**, and then select **Exam Analysis**.
The Exam Analysis window opens.
2. Narrow your report results by selecting a date range and report criteria:
 - a. Type the beginning in the **From Date** field.
 - b. Type the ending date in the **Thru Date** field.
 - c. Select a location from the **Location** drop-down menu, as needed, to pull data for a single location.
 - d. Select a provider from the **Provider** drop-down menu, as needed, to pull data for a single provider.

3. Select a **Major Sort Sequence** option:
 - Select the **Location** radio button to sort the data by location and then by provider.
OR
 - Select the **Provider** radio button to sort the data by provider only.
4. Select either the **Detailed** or **Summary** radio button.
5. Select a **Report Output** option:
 - Select the **Printer** radio button to preview and print the report.
OR
 - Select the **Export** radio button to export the data as an XLS spreadsheet file.

6. Click **Continue** to create the report or click **Exit** to cancel.

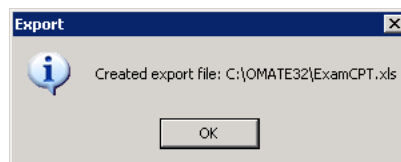
If you selected the Print radio button, the Preview window opens, where you can complete one or more of the following tasks:

- Click the **Print Report** icon to open the Print window and print the report using the current report printer.
- Click the **Export Report** icon to open the Export window and choose a format and destination for your exported report.

NOTE

If you are exporting the report to a Microsoft Windows application, such as Excel, select the **MS Excel 97-2000 (Data Only)** format and **Disk file** destination in the Export window and click **OK**. Select the **Column width based on objects in the Details** radio button and *all* the check boxes in the Excel Format Options window and click **OK**.

If you selected the Export radio button, the report is exported as an XLS spreadsheet file and saved on the server's hard drive in the OfficeMate or OMATE32 folder.

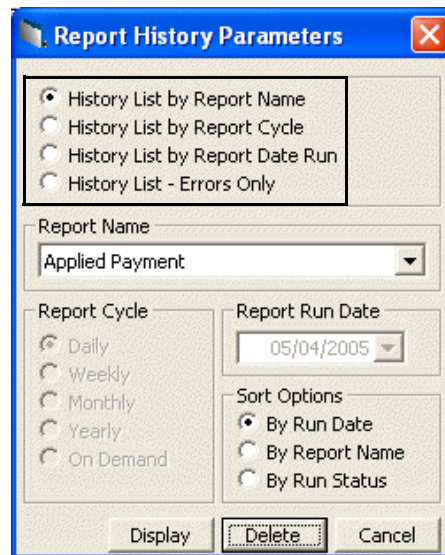


Viewing the Report History

Follow the instructions below to view when a report was created and whether or not the report was created successfully.

NOTE You cannot view the report history of custom reports.

1. Open the Reports & Statements window. For more information on opening this window, go to [Opening the Reports & Statements Window on page 544](#).
2. Click **History**.
The Report History Parameters window opens.
3. Select one of the following parameters in which to view the report:
 - History List by Report Name
 - History List by Report Cycle
 - History List by Report Date Run
 - History List - Errors Only



4. If you selected to view the history list by report name, select a report name from the **Report Name** drop-down menu.
5. If you selected to view the history list by report cycle, select an appropriate **Report Cycle** radio button.
6. If you selected to view the history list by date run, select or type a date in the **Date** box.
7. Select an appropriate **Sort Options** radio button.
8. Click **Display**.
The History Display window opens.

9. Click **Print** to print the history.

OR

Click **Cancel** to close the History Display window.

Run Date	Report Name	From Date	To Date	Run Status
12/30/2004	Billing History	12/30/2004	12/30/2004	There is no information to report in the
12/30/2004	Bad Address List	12/30/2004	12/30/2004	There is no information to report in the
12/30/2004	Applied Payment Register by Dat	12/30/2004	12/30/2004	There is no information to report in the
10/18/2004	Contact Lens Sales by Patient	10/18/2004	10/18/2004	
10/18/2004	Contact Lens Listing	10/18/2004	10/18/2004	
10/18/2004	Cancellations And No Shows	10/18/2004	10/18/2004	
10/18/2004	Appointment Schedule	10/18/2004	10/18/2004	
10/18/2004	Applied Payment	10/18/2004	10/18/2004	
10/18/2004	Adjustment Register	10/18/2004	10/18/2004	

NOTE

Click **Delete** to delete the selected report history.

List of Reports

This section lists all of the reports that you can create and print from within OfficeMate and the select criteria used to create them, including

- [Accounts Receivable, 638](#)
- [Accounts Receivable Variance, 638](#)
- [Adjustment Register, 639](#)
- [Aged A/R 30-60-90-120+, 639](#)
- [Applied Insurance Payment, 640](#)
- [Applied Payment, 641](#)
- [Applied Payment Register by Date, 641](#)
- [Applied Payment Summary, 641](#)
- [Appointment Schedule, 642](#)
- [Appointments Scheduled with Insurance, 642](#)
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Accounts Receivable

The Accounts Receivable report is a custom report that lists the outstanding balances for a selected period by region, location, provider, balance type, insurance company, patient, fee slip, or fee slip line item. You can choose for the report to include fee slip balances, unapplied deposits, or both. To create the Accounts Receivable report, go to [To create and print custom aging reports on page 576](#).

Patient Accounts Receivable Summary				
All Providers, All Locations, Patients from U to V				
Period End: 7/28/2011				
Patient Name [Guarantor]	Birth Date	Day	Phone	
				Last Pmt. Balance
ueFhrnk, Setney (#27449) [leDna ehukFnr]	3/2/1948		(949) 113-8166	4/27/2009 (\$90.00)
uJdd, nstGrah M (#23229)	12/21/1960		(949) 113-4030	4/27/2009 (\$40.00)
unghav, Jkac C II (#18515)	3/29/1978		(949) 112-9706	3/12/2007 \$3.00
ureSpag, verDne (#17007)	6/11/1970		(949) 112-8202	4/27/2009 (\$0.60)
uRezgdoir, denAra R (#22911) [oAhtnny zgoRirude F]	12/17/1993		(949) 113-3743	3/19/2008 \$77.00
Urnba, Ann E (#18299) [oarLdne Ulbran J]	10/8/1947		(949) 112-9491	4/27/2009 (\$64.00)
ulnProin, fyerefJ (#26634)	2/7/1965		(949) 113-5799	4/27/2009 \$170.00
Report Total				\$55.40

Accounts Receivable Variance

The Accounts Receivable Variance report lists backdated payments and adjustments by a given date range. This information is needed to reconcile aging

reports from month to month. Eyefinity suggests creating this report on a monthly basis.

- ❖ To create the Accounts Receivable Variance report, set the date parameters.

06/01/2005 2:19:24 pm		Accounts Receivable Variance Report					
Period end <= 05/01/2005							
Fee Slip	Line Item Date	Posting Date	Amount	Transaction Type	System Date	Recorded by	
21	05/05/2005	04/05/2005	(40.00)	Patient Payment	05/05/2005	Franklin, Helen	
Total Backdated Transactions			(40.00)				

NOTE

If you set the Period End date in the past, you may not receive accurate results. For example, an unapplied amount that was applied to a balance after the report date will not appear in the report regardless of whether or not the unapplied balance was available on the report date.

Adjustment Register

The Adjustment Register report lists adjustments to transactions in ascending date order and includes fee slip numbers, patient names, adjustment dates, amounts, recorded by names, adjustment types, and adjustment reasons. Eyefinity suggests creating this report on a weekly basis.

- ❖ To create the Adjustment Register report, set the date parameters. Optionally, select a sort order type from the **Type** drop-down menu, select a provider or staff member from the **Recorded By** drop-down menu, and select a location from the **Location** drop-down menu.

05/04/2005 4:34:19PM		Adjustment Register					
Adjustment Date >= 04/28/2005							
Adjustment Date <= 05/04/2005							
Type = By Date							
Fee Slip	Patient	Date	Amount	Reason	Type	Recorded By	
45	Radmore, Michelle	05/04/2005	(50.00)	ADJ-	Billing Error	Franklin, Helen	
86	Carter, Sally	05/04/2005	(20.00)	ADJ-	Insurance Write-Off	Franklin, Helen	
Total for 05/04/2005			(70.00)				
Total Adjustments			(70.00)				

Aged A/R 30-60-90-120+

The Aged A/R 30-60-90-120+ report is a custom report that lists the outstanding balances aged 30, 60, 90, and 120+ days. The report can be organized by region, location, provider, balance type, insurance company, patient, fee slip, or fee slip line item.

If you do not select the **Unapplied** check box, then the Unapplied column will not contain any data, even if there are unapplied deposits. Likewise, if you do not select the **Fee Slip Balances** check box, the Current, 31-60, 61-90, 91-120, and >120 columns will not contain any data, even if there are fee slip balances. To

create the Aged A/R 30-60-90-120+ report, go to [To create and print custom aging reports on page 576](#).

AARP Health Care Options A/R Aging Detail						
All Providers, All Locations						
Period End: 7/28/2011						
Patient Name	Balance	Current	31-60	61-90	91-120	> 120 Unapplied
cbald, Nae (#1530) [mJese akIbc L]	\$19.33					\$19.33
Dep# 3429 10/9/2006 C#1100134956	(\$11.00)					(\$11.00)
Leedl, mMad H (#22813)	\$0.03					\$0.03
rhtWg, ryM E (#19896)	\$3.03					\$3.03
Rsoo, raO M (#15401)	\$0.03					\$0.03
senIH, rRbloe (#7987)	\$19.33					\$19.33
Report Total:	\$30.75	\$0.00	\$0.00	\$0.00	\$0.00	\$41.75 (\$11.00)
	100%	0.0%	0.0%	0.0%	0.0%	136%

NOTE

Each percentage in the last row is the percentage that the balance for each column is of the total accounts receivable balance.

Applied Insurance Payment

The Applied Insurance Payment report is a custom report that lists the applied insurance payments, refunds, and insurance chargebacks during the selected posting date period. It includes the insurance company, patient name, fee slip number, check number, and batch number. The checks refer to the original fee slip location where the insurance charges were recorded. The report is grouped by check number and then by patient name. This report can be consolidated in a summary view, created by location with details displayed, or created by selected locations, insurance companies, and providers. To create the Applied Insurance Payment report, go to [Creating & Printing Custom Reports on page 570](#).

Applied Insurance Payment Report	
Summary by Location by Provider	
9/1/2009 to 9/17/2009	
Insurance Name	Ins. Payment
Anvi Optical Store	
MINNIE MOUSE	
VSP	\$20.00
Total MINNIE MOUSE	\$20.00
Total Anvi Optical Store	\$20.00
Pacific Park Store	
Mickey Mouse	
Aetna	\$159.75
CareMore	\$221.10
Total Mickey Mouse	\$380.85
Total Pacific Park Store	\$380.85
Report Total	\$400.85

Applied Payment

NOTE

This report is replaced with the new Applied Payment custom report, located on the Custom tab. The Applied Payment custom report offers more flexible and, therefore, accurate reporting. For more information, go to [Creating & Printing Custom Reports on page 570](#).

Applied Payment Register by Date

The Applied Payment Register by Date report lists money received by each provider or combined providers and the dates money was received. This report includes the total amount received for each service or product for the selected period. It also lists the total revenue percentage for the period and year-to-date totals. Eyefinity suggests creating this report on a monthly basis.

- ❖ To create the Applied Payment Register by Date report, set the date parameters.

05/05/2005 10:36:39AM		Applied Payment Register				
		By Posting Date				
		Posting Date >= 05/05/2004				
		Posting Date <= 05/05/2005				
Patient	Fee Slip	Receipt No.	Product	Amount	Recorded By	
Posting Date 05/04/2005						
Patient Payments						
Mitchell, Henry A	70	87	AR	613.59	Franklin, Helen	
Underwood, Jennifer	76	88	TINTPG	280.71	Franklin, Helen	
Total Patient Payments				<u>894.30</u>		
Patient Refunds						
Carter, Sally	65	0	92014	(75.00)	Franklin, Helen	
Total Patient Refunds				<u>(75.00)</u>		
				Total for 05/04/2005	<u>819.30</u>	
				Report Total	<u>819.30</u>	

Applied Payment Summary

The Applied Payment Summary report lists money received by each provider or combined providers and includes the total amount received for each service or product for the selected period. This report is grouped by payment method and also lists the total revenue percentage for the period and year-to-date totals. Eyefinity suggests creating this report on a weekly basis.

- ❖ To create the Applied Payment Summary report, set the date parameters.

05/05/2005 12:48:56PM		Applied Payment Summary		
		By Provider		
		Posting Date >= 04/29/2005		
		Posting Date <= 05/05/2005		
Receipt Type	Date	Amount		
Michael Miller, O.D.				
Checks	05/04/2005	894.30		
Patient Refund		<u>(75.00)</u>		
		Total for 05/04/2005		
		<u>819.30</u>		
		Provider Total		
		<u>\$819.30</u>		
		Report Total		
		<u>\$819.30</u>		

Appointment Schedule

The Appointment Schedule report lists all patients scheduled for an appointment on the specified day. This report can be created for one provider or for all providers and with or without open time slots. It includes the time of the appointments, patient names, services, and durations of the appointments.

- ❖ To create the Appointment Schedule report, set the date parameters, select a provider from the **Provider** drop-down menu, select a service from the **Service** drop-down menu, and select the **Show All Time Slots** check box if you want all time slots to be displayed in the report. Eyefinity suggests creating this report on a daily basis.

Appointment Schedule								
05/05/2005 1:32:48PM								
Date >= 01/05/2005 Date <= 05/05/2005								
Date & Time	Pat #	Name	Phone	Reason	Min	Insurance	Schedule Notes	Provider
01/05/05 10:00 AM								
01/05/05 10:30 AM								
01/05/05 11:00 AM								
01/05/05 11:30 AM								
01/05/05 12:00 PM								
01/05/05 12:30 PM								
01/05/05 01:00 PM								
01/05/05 01:30 PM								
01/05/05 02:00 PM								
01/05/05 02:30 PM								
01/05/05 03:00 PM								
01/05/05 03:30 PM								
03/11/05 03:45 PM	10	Harper Cde	(949) 555-7896	Unspecified	15	Vision Service Plan		Miller, O.D., Michael
01/05/05 04:00 PM								
01/05/05 04:30 PM								
01/05/05 05:00 PM								
01/05/05 05:30 PM								
01/05/05 06:00 PM								
01/05/05 06:30 PM								
Total Appointments				1				
Total Estimated Minutes				15				

Appointments Scheduled with Insurance

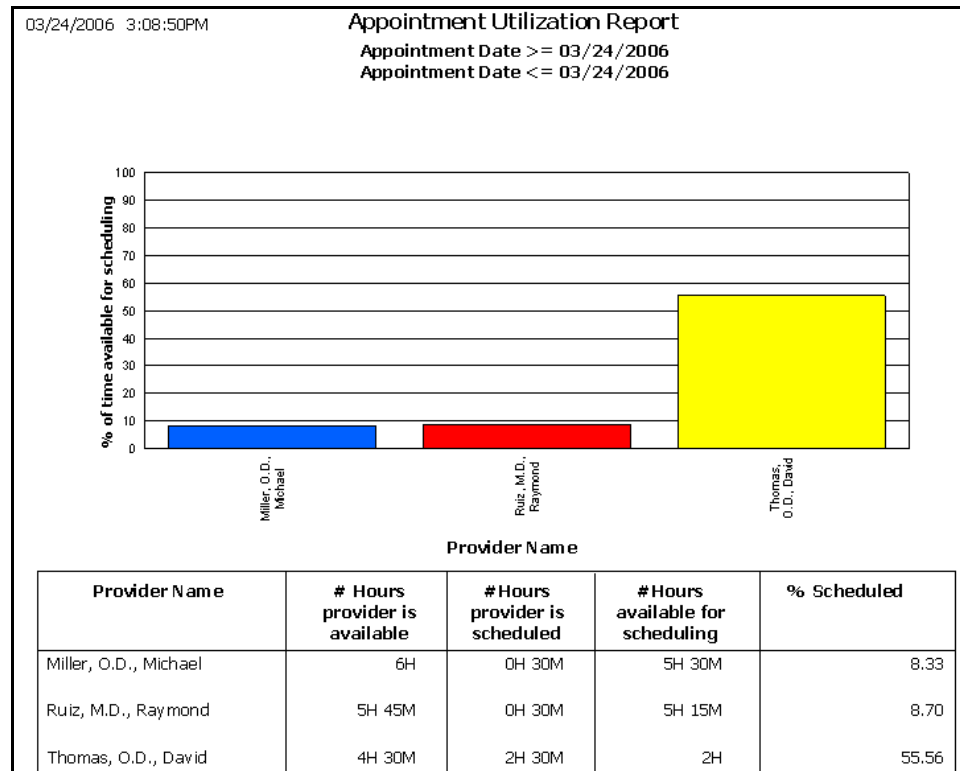
The Appointments Scheduled with Insurance report is a custom report that lists patients with insurance that are scheduled for an appointment during a selected period. The report can include either patients or patients and authorized product type details. The report lists patients, their appointment dates, personal information, and insurance information. To create the Appointments Scheduled with Insurance report, go to [To create and print custom appointment reports on page 582](#).

Appointments Scheduled with Insurance									
All Resources, All Locations/Vision Service Plan									
Monday, 10/10/2005									
Appt Date	Patient Name (Patient #)	Date of Birth	Relation to Insured	Insured Party	Date of Birth	Zip Code	Insured ID #	Policy Group #	Authorization #
Vision Service Plan: (800) 615-1883									
10/10/2005	aDnAc, aRlp P (#3965)	1/25/1944		, (#)					N/A
10/10/2005	aeghmsaret, nelAI (#7025)	8/23/1968	Self		64157	82600003	0811452500010001		88474149
10/10/2005	enSach, ngelInAa (#15656)	8/19/1965	Self		66106	751701157	1224882301010101		91362763
10/10/2005	hrWeele, aevlan K (#19208)	6/17/1951		, (#)					88478840
10/10/2005	kzoTet, naaD M (#18076)	10/9/1972	Self		66226	700712633			N/A
10/10/2005	sdDo, Dladv A (#4602)	8/21/1959	Self		64152	62845851--1	1205822000010001		78547533
10/10/2005	uremrmBe, IrCya (#25259)	9/24/1999	Natural Child	emnuBm, extrK C (#22093)	4/30/1963	66216	0330M3500	1202200601160001	88102607

Appointment Utilization

The Appointment Utilization report displays the percent of time that has been scheduled for specific providers.

- ❖ To create the Appointment Utilization report, set the appointment date parameters and select a provider from the **Provider** drop-down menu.



Bad Address List

The Bad Address List report lists all patients who have the Bad Addr check box selected in the Patient Demographics window. This report includes patient names, addresses, cities, states, Zip codes, and phone numbers. Eyefinity suggests creating this report on demand.

05/05/2005 2:02:39PM

Bad Address Listing

Patient Name	Address	City	State	ZIP Code	Home Phone	Day Phone
Carter, Sally	9696 Calle Dulce	San Juan Capistrano	CA	92675	(949) 555-1236	
Underwood, James	49060 Pacific Heights Drive	Mission Viejo	CA	92692	(949) 555-8631	949 555 7800
Underwood, Jennifer	49060 Pacific Heights Drive	Mission Viejo	CA	92692	(949) 555-8631	
Underwood, Tracy	49060 Pacific Heights Drive	Mission Viejo	CA	92692	(949) 555-8631	

Total Bad Addresses: 4

Billing History

The Billing History report lists transaction history by patients for the fee slip date range selected. This report is suitable for mailing to patients. Eyefinity suggests creating this report on a yearly basis.

- To create the Billing History report, set the fee slip date parameters, click in the **Patient Name** field to find and select a patient, and select the **By Family** check box if you want to sort the report by family name.

OfficeMate Software Solutions 15375 Barranca Pkwy, Bldg L Irvine, CA 92618		Page: 1				
Billing History						
To: Sally Carter 9696 Calle Dulce San Juan Capistrano, CA 92675		Date Printed 05/12/2005 Statement Period 05/12/2004 thru 05/12/2005 Provider Name Michael Miller, O.D. Phone Number 949 727 7080 License 4646-89 Tax ID 66-456872 TPA Number 345-454-234				
Fee Slip No	Transaction Date	CPT	Diagnosis	Description	Insurance	Patient
Sally Carter						
86	04/02/2005			Adj: Billing Error		(20.00)
	04/27/2005	99211	367.1	Level I, Established	25.00	
	04/27/2005	92012		Exam - Intermediate Estab	65.00	
	04/27/2005	92012	367.1	Exam - Intermediate Estab	65.00	
	05/04/2005			Insurance Write-Off from Eye Care Plan Of Americ	(20.00)	
	05/09/2005			Insurance Payment - Ck #	(30.00)	
	05/09/2005			Insurance Payment - Ck #	(25.00)	
87	05/05/2005	A4262	053.22	Temporary Absorbable Plugs		
88	05/03/2005			VOIDED 05/05/2005		
92	05/09/2005	V2020	054.42	\IRLOCK 760/1	107.49	107.50
	05/09/2005			Patient Payment - Cash		(20.00)
Total Due:						67.50

Cancellations And No Shows

The Cancellations And No Shows report lists all patients who have canceled appointments or who did not show up for appointments. This report includes appointment dates and times, patient names, phone numbers, services, and providers. Eyefinity suggests creating this report on a weekly basis.

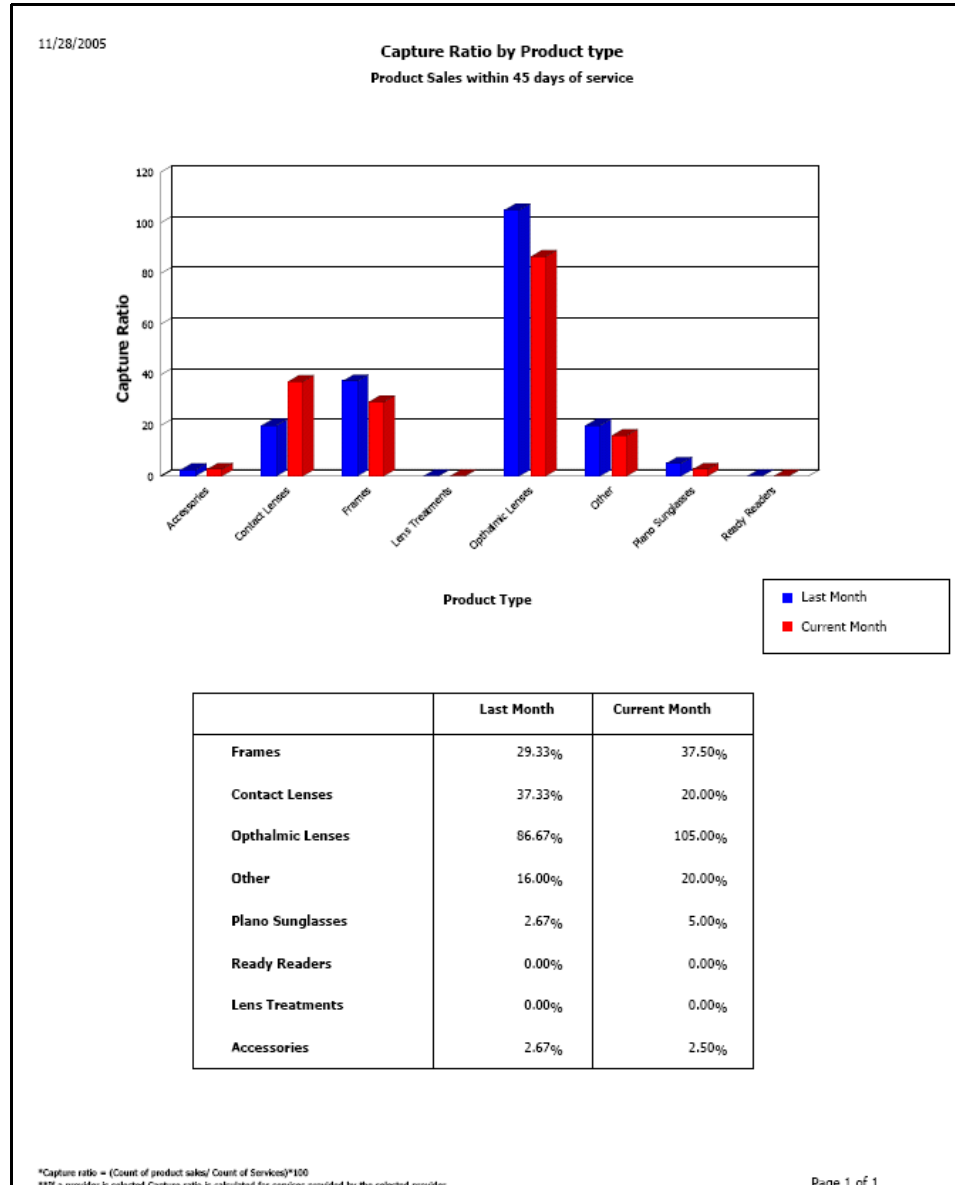
- To create the Cancellations And No Shows report, set the date parameters and choose the appropriate **Patient Name** and **Appointment Date** sort order.

05/05/2005 2:41:41PM		Cancellations and No Shows				
		Date >= 04/29/2004		Date <= 05/05/2005		
Cancelled Appointments						
Appt.	Patient	Phone	Service	Provider	Created	Updated
03/11/05 02:30p	10 Harper Cole	(949) 555-7096	Unspecified	Miller, O.D., Michael	IANCHITABLET1	03/11/05 09:36a IANCHITABLET1 03/11/05 09:37a
Total Cancelled Appointments		1				
No Show Appointments						
Appt.	Patient	Phone	Service	Provider	Created	Updated
05/05/05 05:45p	3 Sally Carter	(949) 555-1236	Unspecified	Miller, O.D., Michael	MY	05/05/05 02:41p MY 05/05/05 02:41p
Total No Show Appointments		1				
Total Appointments		2				
Total Estimated Minutes		30				

Capture Ratio

The Capture Ratio report displays the ratio of products purchased within a given time period after a service was performed.

- ❖ To create the Capture Ratio report, type the number of days within which products were purchased after a service was performed in the **Purchase within (# days)** text box, select a time period from the **Period for Comparison** drop-down menu, and select a provider from the **Provider** drop-down menu.



Cash Reconciliation

The Cash Reconciliation report displays the amounts of cash, checks, credit cards, debit cards, and other forms of payment received in a given day. The

report also shows the amounts of cash, checks, credit cards, debit cards, and other payments that were in the cash drawers at the end of the day and the differences between the recorded and the actual amounts. Use this report to look for patterns in cash shortages and overages.

- ❖ To create the Cash Reconciliation report, set the fee slip date parameters.

8/6/2008 10:38:40AM		Cash Reconciliation Report			
		Posting Date >= 08/04/2008			
		Posting Date <= 08/04/2008			
Location: Fullerton Store					
		<u>Calculated</u>	<u>Entered</u>	<u>Variance</u>	<u>Explanation</u>
Posting Date:	8/4/2008 12:00:00AM				
Recorded By:	Doctor, Johnny				
Update Date:	8/6/2008 10:38:02AM				
Cash		\$0.00	\$2.00	(\$2.00)	Found change on the floor
Checks		\$356.88	\$355.98	\$0.90	Failed to verify check
Credit Cards		\$0.00	\$0.00	\$0.00	
Debit Cards		\$0.00	\$0.00	\$0.00	
Other		\$0.00	\$0.00	\$0.00	
Patient Refunds		\$0.00	\$0.00	\$0.00	
Total of Variances				(\$1.10)	
Total of Variances for Fullerton Store				(\$1.10)	

Claim Edit Errors

The Claim Edit Errors report lists claims that cannot be submitted due to errors within the claim, the nature of the errors, and the amount of revenue associated with the claim.

- ❖ To create the Claim Edit Errors report, set the fee claim date parameters. Select a location from the **Location** drop-down menu as needed. Select a provider from the **Provider** drop-down menu as needed.

12/9/2008 3:05:26PM		Claim Edit Error Report	
		From Claim Date >= 01/01/2008	
		Thru Claim Date <= 12/07/2008	
2.00 Box, Jr	United Health Care	Place of Service on Line Item is Blank - Products V2520 Place of Service on Line Item is Blank - Products V2797	
3.00 Cullen I, Edward	Aetna	Primary Diagnosis is Blank - Fee Slip Procedure Diagnosis on Line Item is Blank Procedure Code on Line Item is Blank Procedure Diagnosis on Line Item is Blank 11444 Procedure Diagnosis on Line Item is Blank V2205 Procedure Diagnosis on Line Item is Blank V2205 Procedure Diagnosis on Line Item is Blank V2702 Procedure Diagnosis on Line Item is Blank Procedure Code on Line Item is Blank Procedure Diagnosis on Line Item is Blank V2799 Procedure Diagnosis on Line Item is Blank 68020 Procedure Diagnosis on Line Item is Blank 92015 Procedure Diagnosis on Line Item is Blank 92083 Procedure Diagnosis on Line Item is Blank Procedure Code on Line Item is Blank Procedure Diagnosis on Line Item is Blank V2521 Procedure Diagnosis on Line Item is Blank V2702 Procedure Diagnosis on Line Item is Blank Procedure Code on Line Item is Blank Procedure Diagnosis on Line Item is Blank V2799	

Consignment

NOTE

This report is replaced with the new Consignment custom report, located on the Custom tab. The Consignment custom report offers more flexible and, therefore, accurate reporting. For more information, go to [Creating & Printing Custom Reports on page 570](#).

Contact Lens Listing

NOTE

This report is replaced with the new Contact Lens Listing custom report, located on the Custom tab. The Contact Lens Listing custom report offers more flexible and, therefore, accurate reporting. For more information, go to [Creating & Printing Custom Reports on page 570](#).

Contact Lens Sales by Patient

The Contact Lens Sales by Patient report lists fee slip dates, patient names, fee slip numbers, contact lens descriptions, and prices. Eyefinity suggests creating this report on demand.

- ❖ To create the Contact Lens Sales by Patient report, set the fee slip date parameters.

05/05/2005 3:19:44PM										
Contact Lens Sales by Patient										
Fee Slip Date >= 05/05/2004										
Fee Slip Date <= 05/05/2005										
Sales Date	Ref No	Patient Name	Fee Slip #	Qty	CL Description	UOM	SalePrice	Discount	Net Total	
03/10/2005	234 34 5797	Cole, Harper	79	1	Multipack Acuvue Lenses	PACK	30.00	0.00	30.00	
03/10/2005	234 34 5797	Cole, Harper	79	1	Multipack Acuvue Lenses	PACK	30.00	0.00	30.00	
03/10/2005	234 34 5797	Cole, Harper	79	1	Bionic RGP	EACH	140.00	0.00	140.00	
03/10/2005	234 34 5797	Cole, Harper	79	1	Bionic RGP	EACH	140.00	0.00	140.00	
03/11/2005	234 34 5797	Cole, Harper	82	1	Multipack Acuvue Lenses	PACK	30.00	0.00	30.00	
03/11/2005	234 34 5797	Cole, Harper	82	1	Multipack Acuvue Lenses	PACK	30.00	0.00	30.00	
03/14/2005	234 34 5797	Cole, Harper	83	1	Multipack Acuvue Lenses	PACK	30.00	0.00	30.00	
03/14/2005	234 34 5797	Cole, Harper	83	1	Multipack Acuvue Lenses	PACK	30.00	0.00	30.00	
03/16/2005	234 34 5797	Cole, Harper	85	1	Acuvue	PACK	30.00	0.00	30.00	
03/16/2005	234 34 5797	Cole, Harper	85	1	Acuvue	PACK	30.00	0.00	30.00	
Totals:							<u>520.00</u>	<u>0.00</u>	<u>520.00</u>	

Conversion Exception

The Conversion Exception report lists posting errors in backdated or changed fee slips. This report displays the actual dates on which items were recorded and the posting dates. Eyefinity suggests creating this report if you are upgrading from version 3.x.

- ❖ To create the Conversion Exception report, set the fee slip date parameters and select a sorting type from the **Type** drop-down menu.

Daily Transaction Audit

The Daily Transaction Audit report lists all activity on a specific date. This report can display transactions grouped by providers. It includes patient names, fee slip

numbers, transaction descriptions, and amounts. Eyefinity suggests creating this report on a daily basis.

- ❖ To create the Daily Transaction Audit report, set the date parameters, select the **By Provider** check box if you want to sort the report by providers, select a provider from the **Provider** drop-down menu, select a recorded by user from the **Recorded by** drop-down menu, and select a location from the **Location** drop-down menu. Also, choose the appropriate **Insurance Co / Patient Name** sort order.

Insurance Co / Patient Name		Fee Slip / Deposit No	Description	Recorded By	Amount
11/13/2006 2:44:18PM Daily Transaction Audit Date >= 11/13/2005 Date <= 11/13/2006					
Carter, Sally M		79	Patient Payment - Cash(O)	Frankline, Helen	(50.00)
		85	Acuvue(O)	Frankline, Helen	30.00
		86	Acuvue(O)	Frankline, Helen	30.00
		87	AIRELON.R AF EV0018(O)	Frankline, Helen	160.99
		88	92020(O)	Frankline, Helen	25.00
		88	92070(O)	Frankline, Helen	0.00
		88	92012(O)	Frankline, Helen	65.00
		88	92014(O)	Frankline, Helen	130.00
		88	92020(O)	Frankline, Helen	25.00
		88	Multipack Acuvue Lenses(O)	Frankline, Helen	60.00
		88	Multipack Acuvue Lenses(O)	Frankline, Helen	60.00
		88	92020(O)	Frankline, Helen	25.00
		88	92081(O)	Frankline, Helen	15.00
		88	92070(O)	Frankline, Helen	0.00
		88	92015(O)	Frankline, Helen	20.00
		88	99204(O)	Frankline, Helen	120.00
		89	Patient Deposit - Cash(O)	Frankline, Helen	50.00
		89	Patient Deposit - Cash (U)	Frankline, Helen	50.00
		90	Patient Deposit - Cash(O)	Frankline, Helen	10.00
		90	Patient Deposit - Cash (U)	Frankline, Helen	10.00
		91	Patient Deposit - Cash(O)	Frankline, Helen	20.00
		91	Patient Deposit - Cash (U)	Frankline, Helen	20.00
Cole, Harper		68	Patient Payment - Cash(O)	Frankline, Helen	(50.00)
Posting Date 03/10/2006					
Patient					
Mitchell, Henry A		88	Patient Deposit - Unapplied Insurance Trans	Frankline, Helen	5.00

NOTE

An "O" appears next to original transactions and a "U" appears next to updated (modified) transactions.

Day Sheet by Provider on Fee Slip

The Day Sheet by Provider on Fee Slip (formerly known as Day Sheet Summary) report lists each patient or insurance transaction made on the selected posting date. Use this report to view money collected, fee slip charges made to patients and insurance, returns, refunds, and adjustments. This report is based on providers on fee slips. Eyefinity suggests creating this report on a daily basis.

- ❖ To create the Day Sheet by Provider on Fee Slip report, set the date parameters, select the **By Provider** check box if you want to sort the report

by providers, and select a provider from the **Provider** drop-down menu. Also, choose the appropriate **Insurance Co / Patient Name** sort order.

Day Sheet by Provider on Fee Slip													
Selected Date 08/04/2008													
Provider = Johnny Doctor													
For location: Fullerton Store													
Provider	Insurance Co / Patient Name	Patient Chart #	Fee Slip	Receipts	Ins. Charge	Patient Charge	Sales Tax	Applied Payments		Ins. Adjust.	Patient Rtrn & Adjust.	Patient Refund	Receipt Type
								Ins.	Patient				
Doctor, Johnny J	Optzeph, Michael R	9133				178.44	13.59		178.44				
Report Total				0.00	0.00	178.44	13.59	0.00	178.44	0.00	0.00	0.00	
Total Charges						178.44							
Total Applied Ins. & Pat. Payments						178.44							
Total Adjustments & Returns						0.00							
Total Patient Returns						0.00							
Total Patient Adjustments						0.00							
Total Adjustments						0.00							

NOTES

- The Applied Receipts column lists the deposit amounts during the day. This column matches the Deposit Ticket, Product, and Production Summary by Provider on Fee Slip reports.
- The Insurance Charge column lists fee slip charge amounts that were incurred by insurance companies.
- The Patient Charge column lists fee slip charge amounts that were incurred by patients.
- The Applied Insurance Payment column lists insurance check amounts that were applied to fee slips.
- The Applied Patient Payment column lists patient payment amounts that were applied to fee slips.
- The Insur. Adjust. column lists insurance adjustment amounts including product returns.
- The Patient Return & Adjust. column lists patient adjustment amounts including product returns.
- The Patient Refund column lists amounts that were refunded to patients.
- The Total Charges amount matches the Fee Slip Detail report.
- The Total Applied Ins. & Pat. Payments amount matches the Applied Payment report.
- The Total Patient Returns amount matches the Returns And Refunds report's Product Return total.
- The Total Adjustments amount matches the Adjustment Register and Production Summary by Provider on Fee Slip reports.

Day Sheet by Provider on Fee Slip by Line Item

The Day Sheet on Fee Slip by Line Item report lists each patient or insurance transaction made on the selected posting date. Use this report to view money collected, fee slip charges made to patients and insurance, returns, refunds, and adjustments. This report is based on providers on fee slip line items. Eyefinity suggests creating this report on a daily basis.

- ❖ To create the Day Sheet by Provider on Fee Slip by Line Item report, set the date parameters, select the **By Provider** check box if you want to sort the

report by providers, and select a provider from the **Provider** drop-down menu. Also, choose the appropriate **Insurance Co / Patient Name** sort order.

8/6/2008 11:18:22AM		Day Sheet by Provider on Fee Slip line item									
Selected Date 08/04/2008											
By Provider											
For location: Fullerton Store											
Provider	Insurance Co / Patient Name	Patient Chart #	Fee Slip	Ins. Charge	Patient Charge	Sales Tax	Applied Payments		Ins. Adjust.	Patient Rtrn & Adjust.	Patient Refund
Doctor, Johnny J	Opsteegh, Michael R	9133			178.44	13.59					
	Opsteegh, Michael R	R#7090						178.44			
		Sub Total		0.00	178.44	13.59	0.00	178.44	0.00	0.00	0.00
		Total Charges			178.44						
		Total Applied Ins. & Pat. Payments			178.44						
		Total Adjustments & Returns			0.00						
		Total Patient Returns			0.00						
		Total Patient Adjustments			0.00						
		Total Adjustments									

NOTES

- The Applied Receipts column lists the deposit amounts during the day. This column matches the Deposit Ticket, Product, and Production Summary by Provider on Fee Slip reports.
- The Insurance Charge column lists fee slip charge amounts that were incurred by insurance companies.
- The Patient Charge column lists fee slip charge amounts that were incurred by patients.
- The Applied Insurance Payment column lists insurance check amounts that were applied to fee slips.
- The Applied Patient Payment column lists patient payment amounts that were applied to fee slips.
- The Insur. Adjust. column lists insurance adjustment amounts including product returns.
- The Patient Return & Adjust. column lists patient adjustment amounts including product returns.
- The Patient Refund column lists amounts that were refunded to patients.
- The Total Charges amount matches the Fee Slip Detail report.
- The Total Applied Ins. & Pat. Payments amount matches the Applied Payment report.
- The Total Patient Returns amount matches the Returns And Refunds report's Product Return total.
- The Total Adjustments amount matches the Adjustment Register and Production Summary by Provider on Fee Slip reports.

Deleted Patients

The Deleted Patients report lists all deleted patients and other insured parties. Eyefinity suggests creating this report on demand.

- ❖ To create the Deleted Patients report, set the date parameters.

05/06/2005 4:29:30PM		Deleted Patient Listing					
		Date Deleted >= 04/30/2005					
		Date Deleted <= 05/06/2005					
Patient Name	Address	City	State	ZIP Code	Home Phone	Day Phone	Date Deleted
Carrie, Darochroder	North Street	Helena	OH	43435		(949) 987-1111	05/06/2005
Total Deleted Patients:		1					

Deposit Adjustments

The Deposit Adjustments report lists the deposit adjustments (payment reversals and deposit corrections) made on a particular day in the Receipts & Adjustments window. Eyefinity suggests creating this report on demand.

- ❖ To create the Deposit Adjustments report, set the adjustment date parameters and select the By Recorded By check box and select a recorded by user from the Recorded By drop-down menu to organize the report by recorded by user.

09/23/2010 9:27:20AM		Deposit Adjustments					
		Adjustment Date >= 09/22/2010					
		Adjustment Date <= 09/22/2010					
		For location: All					
Date	Patient/Insurance Name	Description	Amount	Reason	Location		
Patient Deposit Adjustments							
09/22/2010							
09/22/2010	Babb, Billy J	Ck-	\$220.00		Jones Home Office		
09/22/2010	Babb, Billy J	Ck-	(\$2,200.00)		Jones Home Office		
09/22/2010	Addington, Anna Marie	Ck-	(\$1,100.00)		Jones Home Office		
Total			(\$3,080.00)				
Total Patient Deposit Adjustments			(\$3,080.00)				
Grand Total			(\$3,080.00)				

Deposit Ticket

The Deposit Ticket report lists all deposits made on a particular day. This report includes payments made by cash, check, or other methods and lists them by

patient or insurance company name. Eyefinity suggests creating this report on a daily basis.

- ❖ To create the Deposit Ticket report, set the date parameters.

Insurance Company or Patient Name		Receipt No	Check No	Bank No	Amount
Checks					
04/05/2005					
Radmore, Michelle		90			40.00
05/02/2005					
Mitchell, Henry A		91			20.00
05/03/2005					
Carter, Sally		89			90.00
05/04/2005					
Mitchell, Henry A		87			613.59
Underwood, Jennifer		88			280.71
Total Checks					1,044.30
Cash					
05/04/2005					
Carter, Sally		86			20.00
Total Cash					20.00
Total Deposit					1,064.30

NOTES

- The Total Deposit amount matches the Daily Production and Production reports.
- The Total Credit Card Refunds amount matches the Credit Card Return amount on the Day Sheet report.

Deposit Ticket Summary with Variance

The Deposit Ticket Summary with Variance report has been removed.

Diagnosis Code Listing

The Diagnosis Code Listing report lists all diagnosis codes that are setup in the Customization window. Eyefinity suggests creating this report on demand.

- ❖ To create the Diagnosis Code Listing report, select a diagnosis group from the **Diagnosis Group** drop-down menu and choose the appropriate **Diagnosis Code** and **Diagnosis Description** sort order preferences.

05/09/2005 10:13:30AM		Diagnosis Code Listing	
Code	Description	Group	
052.9	Chickenpox (varicella Virus) Without Complications	General/Symptoms/Contrib. Diseases	
053.20	Lids: Herpes Zoster Dermatitis	Eyelids	
053.21	Keratoconjunctivitis, Herpes Zoster	Cornea	
053.22	Iridocyclitis, From Herpes Zoster	Anterior Chamber	
053.29	Herpes Zoster W/ Ophthalmic Complications, Unspecifi	Globe	
054.40	Herpes Simplex W/ Ophthalmic Complications,unspecif	General/Symptoms/Contrib. Diseases	
054.41	Lids: Dermatitis, From Herpes Simplex	Eyelids	
054.42	Keratitis, Dendritic, From Herpes Simplex	Cornea	
054.43	Keratitis, Disciform, From Herpes Simplex	Cornea	
054.44	Iridocyclitis, From Herpes Simplex	Anterior Chamber	
055.71	Keratoconjunctivitis, From Measles	Cornea	
056.9	Rubella, Without Mention Of Complication	General/Symptoms/Contrib. Diseases	
076.0	Trachoma, Initial Stage	Cornea	
076.1	Trachoma, Active Stage	Cornea	
076.9	Trachoma, Unspecified	Cornea	
077.0	Conjunctivitis, Inclusion	Conjunctive & Sclera	
077.1	Keratoconjunctivitis, Epidemic	Cornea	
077.2	Conjunctivitis, Pharyngoconjunctival Fever	Conjunctive & Sclera	
077.3	Conjunctivitis, Adenoviral	Conjunctive & Sclera	
077.4	Conjunctivitis, Epidemic Hemorrhagic	Conjunctive & Sclera	
077.8	Conjunctivitis, Viral, Other	Conjunctive & Sclera	
077.98	Conjunctivitis, Chlamydial, Unspecified	Conjunctive & Sclera	
077.99	Conjunctivitis, Viral, Unspecified	Conjunctive & Sclera	
078.0	Molluscum Contagiosum	Eyelids	
078.1	Viral Warts	Eyelids	
090.3	Keratitis, Syphilitic Interstitial	Cornea	
091.0	Syphilis, Primary	General/Symptoms/Contrib. Diseases	
091.3	Syphilis, Secondary	General/Symptoms/Contrib. Diseases	
091.50	Uveitis, Syphilitic, Unspecified	Globe	
091.51	Chorioretinitis, Syphilitic, Secondary	Retina	
091.52	Iridocyclitis, Syphilitic, Secondary	Anterior Chamber	
094.83	Retinochoroiditis, Disseminated, Syphilitic	Retina	
094.84	Optic Nerve Atrophy, From Neurosyphillis	Optic Nerve	

Discount Register

The Discount Register report lists fee slip numbers, patient names, transaction dates, fee totals, discount amounts, who recorded the transactions, and the type

of discount that was recorded. Eyefinity suggests creating this report on a weekly basis.

- ❖ To create the Discount Register report, set the date parameters and select a sort order type from the **Type** drop-down menu.

Fee Slip	Patient	Date	Fee	Discount	Recorded By
<p>05/09/2005 10:37:08AM Discount Register Date >= 05/03/2004 Date <= 05/09/2005 Type = By Type</p>					
Employee Discount					
	90 Radmore, Michelle	05/09/2005	100.00	(1.00)	Franklin, Helen
Total for: Employee Discount				(1.00)	
Total Discounts				(1.00)	

NOTE

The Total Discounts amount matches the Production Summary by Provider on Fee Slip and Fee Slip Detail reports.

Exam Analysis

The Exam Analysis report lists examinations performed by location or by provider. The Exam Analysis report also lists the names of the patients for whom the examinations were given, the diagnosis codes, and procedure codes.

- ❖ To create the Exam Analysis report, go to [Creating & Printing the Exam Analysis Report](#) on page 630 for more information.

Exam #	Date	Patient	DOB	Id.	Procedures	ICD-9 Codes
<p>12/21/2007 OfficeMate Software Examination/CPT Analysis by Location From: 12/01/2007 Thru: 12/21/2007 Location selected: (All) Provider selected: (All)</p>						
<p>Location: Alysa's Optical Provider: Struble, Mark D.</p>						
239	12/03/2007	Aasby, Thelma			11440	36721,3674
<p>Number of exams for Provider = 1 Number of exams for Location = 1</p>						
<p>Location: AV store Provider: Anderson, P Steven.</p>						
241	12/04/2007	Parkinson, Doreen	01/11/1940		92021	36751
242	12/04/2007	Parkinson, Doreen	01/11/1940		92021	36751
252	12/07/2007	Gakowski, JoAnna	11/02/1972		92060	36751
253	12/07/2007	Gakowski, JoAnna	11/02/1972		92060	36751
257	12/11/2007	Lefdal, Ben	08/20/2004		92014	36721,3674,37845
260	12/12/2007	Gakowski, JoAnna	11/02/1972		92060	36751
262	12/12/2007	Lefdal, Ben	08/20/2004		92014	36721,3674,37845
<p>Number of exams for Provider = 7</p>						

Fee Slip

The Fee Slip report reprints a previously recorded fee slip. Eyefinity suggests creating this report on demand.

- ❖ To create the Fee Slip report, click in the **Patient Name** text box and search for and select a patient, set the fee slip date parameters, or type a fee slip number in the **Fee Slip Number** text box. After you click **Preview**, the Fee

Slip Comments Text window opens. Type appropriate descriptions in the text boxes and click **Save** or **OK**.

OfficeMate Software Solutions 15375 Barranca Pkwy, Bldg L Irvine, CA 92618		Statement of Charges and Payments					
To: Sally Carter 9696 Calle Dulce San Juan Capistrano, CA 92675		Fee Slip Number: 87					
		Date Printed: 05/09/2005					
		Provider: Michael Miller, O.D.					
		Office Phone: 800-269-3666					
		License: 4646-89					
		Tax ID: 66-456872					
		TPA Number: 345-454-234					
		Patient: Sally Carter					
		Next Appt:					
Service	Date	Qty	Description	CPT	Diagnosis	Amount	Patient Balance
	05/05/2005	1	Temporary Absorbable Plugs	A4262	053.22	0.00	
Balance Due							0.00
Other Open Items							(130.00)
CREDIT Do Not Pay							<u>(130.00)</u>

Fee Slip Adjustment and Payment

The Fee Slip Adjustment and Payment report is a custom report that lists adjustments by location, insurance applied payments by provider, patient and insurance applied payments by provider, or product returns by provider, depending on the criteria that you select. For example, if you want to create a report that lists all adjustments and refers them back to their original fee slip locations, click the **Other Criteria** tab on the Business Analysis Custom Reports window and select the adjustments that you want to include in the report (Patient Payment, Insurance Payment, Patient Refund, and Insurance Refund for an applied payment report). The amounts listed on the report refer to the original fee slip location where the charges were recorded. This report can be consolidated or created by location with details displayed or hidden. You can use this report to research the Adjustment Register report and determine to which locations the OfficeMate Administration adjustments are related or track applied patient and insurance payments by location. For more information on the Adjustment Register

report, go to [Adjustment Register on page 639](#). To create the Fee Slip Adjustment and Payment report, go to [Creating & Printing Custom Reports on page 570](#).

Fee Slip Adjustment and Payment Report	
Summary by Location by Provider	
9/1/2009 to 9/17/2009	
Product Group	Amount
Anvi Optical Store	
Mickey Mouse	
Transfer to Another Insurance	\$0.00
Total Mickey Mouse	\$0.00
MINNIE MOUSE	
Insurance Payment	\$20.00
Patient Payment	\$72.00
Transfer to Patient from Ins.	\$72.00
Transfer from Ins. to Patient	(\$72.00)
Transfer to Another Insurance	\$0.00
Total MINNIE MOUSE	\$92.00
Total Anvi Optical Store	\$92.00
AV Store	
Mickey Mouse	
Patient Payment	\$113.81
Total Mickey Mouse	\$113.81
Total AV Store	\$113.81
Costa Mesa Store	
Donald Duck	
Patient Payment	\$600.00
Patient Refund	(\$300.00)
Product Return	\$300.00
Total Donald Duck	\$600.00
Total Costa Mesa Store	\$600.00
Pacific Park Store	
Dennis Farina	
Finance Charge	(\$39.93)
Late Charge	(\$2.00)
Total Dennis Farina	(\$41.93)
Mickey Mouse	
Finance Charge	(\$1,259.83)
Insurance Adjustment	\$20.00
Insurance Denial	\$20.00
Insurance Payment	\$380.85
Insurance Reimbursement Tax Write-Off	\$0.80
Insurance Reimbursement Write-Off	\$93.68
Late Charge	(\$22.00)
Patient Payment	\$1,502.90

Fee Slip Audit

The Fee Slip Audit report lists in detail all fee slips recorded during a specific period. Eyefinity suggests creating this report on a weekly basis.

- ❖ To create the Fee Slip Audit report, set the fee slip date parameters, select the **By Provider** check box if you want to sort the report by providers, select

a provider from the **Provider** drop-down menu, and select a staff member from the **Recorded By** drop-down menu.

11/12/2008 11:10:56AM		Fee Slip Audit										
		Fee Slip Date >= 11/12/2007										
		Fee Slip Date <= 11/12/2008										
		By Provider										
		For Location: All										
Service	Slip	Patient	Product Name	Description	Insurance Co.	Coverage %	Qty	Ins Chg	Pat Chg	Pat Pmt	Pat Adj	Pat Bal
Daisy, Duck												
Short Date	2	Solo, Han	100 Frame	JRN FRW/E	Jfn Ansi Gmm Max Allot		1	70.00	19.00	(29.00)		(10.00)
CPT:	V2020	Diagnosis 1: 10	2: 3: 4:	Modifier 1:	2: 3: 4:							
	2		Transfer Insurance Corre		Jfn Ansi Gmm Max Allot		(0)	(20.00)				
CPT:		Diagnosis 1:	2: 3: 4:	Modifier 1:	2: 3: 4:							
	2		100 Frame	JRN FRW/E	Jfn Ansi Gmm Max Allot		1	20.00				
CPT:	V2020	Diagnosis 1: 10	2: 3: 4:	Modifier 1:	2: 3: 4:							
							1	70.00	19.00	(29.00)	0.00	(10.00)
Short Date	10	Lea, Princess	Dispensing Fee For FRW/		Jfn Ansi Gmm Max Allot		1	2.00				
CPT:	11440	Diagnosis 1: 10	2: 3: 4:	Modifier 1:	2: 3: 4:							
	10		100 Frame	JRN FRW/E	Jfn Ansi Gmm Max Allot		1	70.00	19.00	(29.00)		(10.00)
CPT:	V2020	Diagnosis 1: 10	2: 3: 4:	Modifier 1:	2: 3: 4:							
							2	72.00	19.00	(29.00)	0.00	(10.00)
Short Date	15	Lea, Princess	100 Frame	JRN FRW/E	Jfn Ansi Gmm Max Allot		1	70.00	19.00	(29.00)		(10.00)
CPT:	V2020	Diagnosis 1: 7	2: 3: 4:	Modifier 1:	2: 3: 4:							
	15		100 Lens Tx	100 Lens Tx	Jfn Ansi Gmm Max Allot		1	90.00		(10.00)		(10.00)
CPT:	V2745	Diagnosis 1: 7	2: 3: 4:	Modifier 1:	2: 3: 4:							
	15		Dispensing Fee For FRW/		Jfn Ansi Gmm Max Allot		1	2.00		(0.25)	0.25	
CPT:	11440	Diagnosis 1: 7	2: 3: 4:	Modifier 1:	2: 3: 4:							
	15		100 CL	CL	Jfn Ansi Gmm Max Allot		1	72.00	20.00	(23.00)		(3.00)
CPT:	V2520	Diagnosis 1: 7	2: 3: 4:	Modifier 1:	2: 3: 4:							
	15		100 SV	100 SV	Jfn Ansi Gmm Max Allot		1		100.00	(100.00)		
CPT:	V2100	Diagnosis 1: 7	2: 3: 4:	Modifier 1:	2: 3: 4:							
	15		100 SV	100 SV	Jfn Ansi Gmm Max Allot		1	68.40	19.00	(26.60)		(7.60)
CPT:	V2100	Diagnosis 1: 7	2: 3: 4:	Modifier 1:	2: 3: 4:							
							6	302.40	158.00	(188.85)	0.25	(30.68)
Short Date	15	Lea, Princess	100 SV	100 SV			1		110.00	(110.00)		
CPT:	V2100	Diagnosis 1:	2: 3: 4:	Modifier 1:	2: 3: 4:							
	15		100 SV	100 SV			1		110.00	(110.00)		
CPT:	V2100	Diagnosis 1:	2: 3: 4:	Modifier 1:	2: 3: 4:							
	15		100 SV	100 SV			1		110.00	(110.00)		

Fee Slip Detail

The Fee Slip Detail report lists fee slips, patients, products, posting dates, fees, discounts, sales tax, totals, and recorded by names. Eyefinity suggests creating this report on a weekly basis.

- ❖ To create the Fee Slip Detail report, set the posting date parameters and select a sort order type from the **Type** drop-down menu.

Fee Slip		Patient	Product	Posting Date	Gross Fees Invoiced	Discount	Sales Tax	Total Charges	Recorded By
	21	Radmore, Michelle	99213	05/05/2005	69.00			69.00	Miller, O.D., Michael
	87	Carter, Sally	A4262	05/05/2005	0.00			0.00	Franklin, Helen
				Total Fee Slips	69.00	0.00	0.00	69.00	
				Adjustments	0.00				
				Returns	0.00				
				Net Fees Invoiced	69.00				
	89	Mitchell, Henry A	A4262	05/06/2005	100.00			100.00	Franklin, Helen
				Total Fee Slips	100.00	0.00	0.00	100.00	
				Adjustments	0.00				
				Returns	0.00				
				Net Fees Invoiced	100.00				
	90	Radmore, Michelle	A4262	05/09/2005	100.00	(1.00)		99.00	Franklin, Helen
				Total Fee Slips	100.00	(1.00)	0.00	99.00	
				Adjustments	0.00				
				Returns	0.00				
				Net Fees Invoiced	99.00				
Report Total					269.00	(1.00)	0.00	268.00	

NOTES

- The Gross Fees Invoiced column matches the Production and Production Summary by Provider on Fee Slip reports. This column does *not* include discounts or sales tax.
- The Discount column matches the Discount Register report and the discount amount on the Production Summary by Provider on Fee Slip report.
- The Sales Tax column matches the sales tax amount on the Production Summary by Provider on Fee Slip and Production reports.
- The Total Charges column matches the total charges amount on the Day Sheet report.

Fee Slip Detail by Resource

The Fee Slip Detail by Resource report groups fee slips by resource lists products, posting dates, fees, discounts, and totals.

- ❖ To create the Fee Slip Detail by Resource report, set the posting date parameters, select a location from the **Location** drop-down menu, as needed, and select a resource type from the **Type** drop-down menu.

12/24/2007 9:39:21AM		Fee Slip Detail by Resource			
		By Provider			
		Posting Date >= 12/01/2007			
		Posting Date <= 12/31/2007			
		For location: All			
Product	Fee Slip	Date Posted	Charges	Discount	Net Charges
Duck, Happy					
Z Frame 3	2651	12/20/2007	20.00		20.00
Z Frame 2	2652	12/20/2007	20.00		20.00
92004	2653	12/20/2007	132.00		132.00
Ready Readers	2656	12/20/2007	55.00		55.00
Z Frame 4		12/20/2007	20.00		20.00
Lens Treatment		12/20/2007	10.00		10.00
ACUVUE		12/20/2007	24.25		24.25
Piano Sunglasses		12/20/2007	130.00		130.00
Accessory		12/20/2007	2.00		2.00
Other		12/20/2007	5.00		5.00
Total Duck, Happy			<u>408.25</u>	<u>0.00</u>	<u>408.25</u>
		Adjustments	0.00		
		Returns	0.00		
		Net Fees Invoiced	408.25		

Fee Slip Listing

The Fee Slip Listing report is a custom report that lists the details of fee slips that were recorded during a selected time period. Specifically, it lists gross sales, discounts, patient amounts, insurance amounts, taxes, professional fees, optical fees, and copay amounts. This report can be created by region, location, and provider and can be consolidated in a summary view or created with details

displayed to list the products sold and their respective amounts. To create the Fee Slip Listing report, go to [Creating & Printing Custom Reports on page 570](#).

Fee Slip Listing									
9/1/2009 to 9/17/2009									
All Providers, Select Locations									
Fee Slip #	Patient (Patient #)	Gross Sales	Discount	Patient Amount	Insurance Amount	Tax	Professional Fees	Optical Fees	CoPay Amount
9/1/2009									
Pacific Park Store									
448	Favre, Brett (115)	\$227.00	\$0.00	\$113.50	\$113.50	\$0.00	\$0.00	\$227.00	\$0.00
449	Favre, Brett (115)	\$189.49	\$0.00	\$62.37	\$127.12	\$0.00	\$0.00	\$189.49	\$15.00
450	Parker, Jessica (113)	\$249.99	\$0.00	\$102.50	\$147.49	\$0.00	\$0.00	\$249.99	\$15.00
	Pacific Park Store	\$666.48	\$0.00	\$278.37	\$388.11	\$0.00	\$0.00	\$666.48	\$30.00
	9/1/2009	\$666.48	\$0.00	\$278.37	\$388.11	\$0.00	\$0.00	\$666.48	\$30.00
9/10/2009									
Pacific Park Store									
468	Mayo, Debra (99)	\$88.00	\$0.00	\$50.00	\$38.00	\$0.00	\$88.00	\$0.00	\$50.00
469	Preston, Kelly (121)	\$165.00	\$0.00	\$100.75	\$64.25	\$0.00	\$165.00	\$0.00	\$10.00
470	Parker, Jessica (113)	\$88.00	\$0.00	\$50.00	\$38.00	\$0.00	\$88.00	\$0.00	\$50.00
	Pacific Park Store	\$341.00	\$0.00	\$200.75	\$140.25	\$0.00	\$341.00	\$0.00	\$110.00
	9/10/2009	\$341.00	\$0.00	\$200.75	\$140.25	\$0.00	\$341.00	\$0.00	\$110.00
9/12/2009									
Pacific Park Store									
471	Parker, Jessica (113)	\$125.90	\$0.00	\$125.90	\$0.00	\$0.00	\$0.00	\$125.90	\$0.00
472	Parker, Jessica (113)	\$135.90	\$0.00	\$85.90	\$50.00	\$0.00	\$0.00	\$135.90	\$10.00
473	Parker, Jessica (113)	\$200.00	(\$20.00)	\$105.00	\$75.00	\$0.00	\$0.00	\$180.00	\$5.00
474	Parker, Jessica (113)	\$155.00	(\$12.00)	\$98.00	\$45.00	\$0.00	\$0.00	\$143.00	\$20.00
475	Buster, Colin (9)	\$88.00	\$0.00	\$0.00	\$88.00	\$0.00	\$88.00	\$0.00	\$0.00
476	Buster, Colin (9)	\$88.00	\$0.00	\$27.60	\$60.40	\$0.00	\$88.00	\$0.00	\$10.00
477	Parker, Jessica (113)	\$270.00	\$0.00	\$74.40	\$221.10	\$25.50	\$0.00	\$295.50	\$15.00
	Pacific Park Store	\$1,062.80	(\$32.00)	\$516.80	\$539.50	\$25.50	\$176.00	\$880.30	\$60.00
	9/12/2009	\$1,062.80	(\$32.00)	\$516.80	\$539.50	\$25.50	\$176.00	\$880.30	\$60.00
9/14/2009									
Pacific Park Store									
478	Moore, Jim (123)	\$188.00	\$0.00	\$0.00	\$197.40	\$9.40	\$92.40	\$105.00	\$0.00
479	Mayo, Debra (99)	\$100.00	\$0.00	\$20.00	\$84.00	\$4.00	\$0.00	\$104.00	\$20.00
	Pacific Park Store	\$288.00	\$0.00	\$20.00	\$281.40	\$13.40	\$92.40	\$209.00	\$20.00

Fee Slips on Hold

The Fee Slips on Hold report lists fee slips that were placed on hold. Print this report to review the fee slip status and check whether or not the fee slips on hold should be on hold. Eyefinity suggests creating this report on a weekly basis.

- ❖ To create the Fee Slips on Hold report, select the **By Provider** check box if you want to sort the report by providers and then select a provider from the **Provider** drop-down menu.

05/09/2005 1:59:53PM											
Fee Slips On Hold											
Service	Slip Patient	Product Name	Description	Qty	Insurance Co.	Coverage %	Ins Chg	Pat Chg	Pat Pmt	Pat Adj	Pat Bal
05/09/2005	91 Carter, Sally	A262	Temporary/Absorbable Plugs	1	Eye Care Plan Of America - Regior	100	150.00	50.00			50.00
				1			150.00	50.00	0.00	0.00	50.00
Grand Total				1			150.00	50.00	0.00	0.00	50.00

Frame Aging

The Frame Aging report lists the dates frames were received and sold, the quantity on hand, and the number of days since the last sale. Eyefinity suggests creating this report on demand.

NOTE You will only be able to create the Frame Aging report if you are maintaining inventory in OfficeMate.

- ❖ To create the Frame Aging report, choose the appropriate **Product Name** and **Last Received Date** sort order preferences.

05/09/2005 2:51:23PM		Frames Aging Report													
Product Name / Product Code	PO Number	Last Date Received	Last Date Sold	Days Since Last Sold	Qty On Hand	PTD					YTD				
						Qty Sold	Qty Return	Amount Sold	COGS Sold	Gross Profit	Qty Sold	Qty Return	Amount Sold	COGS Sold	Gross Profit
101 COACH ASTOR / 679516	3	05/09/2005		NO SALES	8	0	0	\$0.00	\$0.00	\$0.00	0	0	\$0.00	\$0.00	\$0.00

Frame Listing

NOTE This report is replaced with the new Frame Listing custom report, located on the Custom tab. The Frame Listing custom report offers more flexible and, therefore, accurate reporting. For more information, go to [Creating & Printing Custom Reports on page 570](#).

Frame Sales Detail by Manufacturer

The Frame Sales Detail by Manufacturer report lists the dates all frames were sold and sorts the frames by manufacturer. This report includes frame details, unusual fees, actual fees, actual fees changed, gross profit percentages, and month-to-date and year-to-date quantities sold. Eyefinity suggests creating this report on demand.

- ❖ To create the Frame Sales Detail by Manufacturer report, set the date parameters.

05/09/2005 3:04:58PM		Frame Sales Detail by Manufacturer													
Date of Sale >= 05/09/2004 Date of Sale <= 05/09/2005															
Manufacturer: Marchon Eyewear, Inc.															
Designer: Coach															
Name	Color	Size		Retail	Actual	Cost	Profit	GP%	PTD	YTD					
101 Coach Astor	BLACK	52	140	178.99	178.99	59.95	119.04	66.51	1	1					
101 Coach Astor	GUNMETAL	52	140	178.99	178.99	59.95	119.04	66.51	1	1					
101 Coach Astor	COFFEE	52	140	357.98	357.98	119.90	238.08	66.51	2	2					
101 Coach Astor	ANTIQUE BLUE	52	140	178.99	178.99	59.95	119.04	66.51	1	1					
102 Coach Claire	LILAC	49	135	190.99	190.99	64.95	126.04	65.99	1	1					
Designer: Marchon® Collection															
Name	Color	Size		Retail	Actual	Cost	Profit	GP%	PTD	YTD					
Wlock 760/1	GUNMETAL	53	140	214.99	214.99	89.95	125.04	58.16	1	1					
				1,300.93	1,300.93	454.65	846.28		7	7					

Frame Sales Summary

The Frame Sales Summary lists the number of frames sold. Eyefinity suggests creating this report on demand.

- ❖ To create the Frame Sales Summary report, set the date parameters and select a sort order type from the **Type** drop-down menu.

05/09/2005 3:15:24PM		Frame Sales Summary by Age		
Date of Sale >= 05/05/2003				
Date of Sale <= 05/05/2005				
<u>Manufacturer</u>	<u>Designer</u>	<u>Age</u>	<u>Units</u>	<u>%</u>
Marchon Eyewear, Inc.	Coach	41 - 55	6	600.00
Totals			<u>6</u>	<u>600.00</u>

Frame Stock Status

NOTE

This report is replaced with the new Frame Stock Status custom report, located on the Custom tab. The Frame Stock Status custom report offers more flexible and, therefore, accurate reporting. For more information, go to [To create and print custom inventory reports on page 608](#).

General Ledger Setup Listing

The General Ledger Setup Listing report lists the general ledger accounts associated with each financial group, insurance carrier, transaction type, and system accounts.

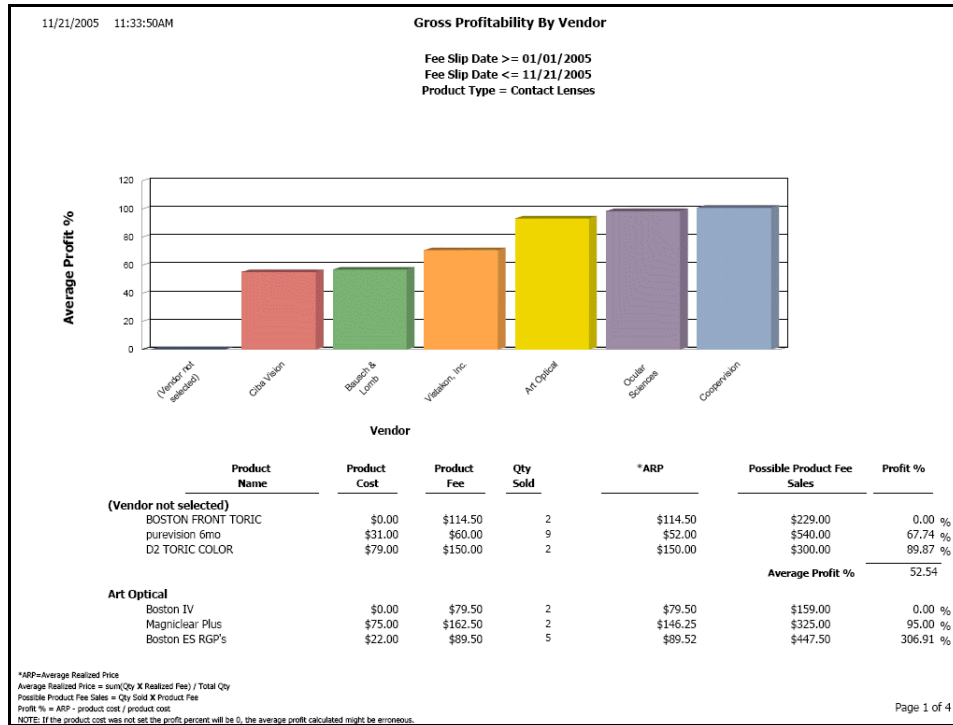
- ❖ To create the General Ledger Setup Listing report, elect the types accounts you would like to include on the report by selecting the check boxes.

12/10/2008 8:32:59AM		General Ledger Setup Report	
<u>G/L Setting</u>	<u>Account Number</u>	<u>Account Name</u>	
Financial Group: Contact Lens Fees			
Inventory	1234-00	GL Account Test Name	
Cost of Goods Sold	1234-00	GL Account Test Name	
Sales	1234-00	GL Account Test Name	
Returns	1234-00	GL Account Test Name	
Adjustments	1234-00	GL Account Test Name	
Purchases	1234-00	GL Account Test Name	
Inventory In Transit	1234-00	GL Account Test Name	
Financial Group: Diagnostic Services Fees			
Inventory		----	
Cost of Goods Sold		----	
Sales		----	
Returns		----	
Adjustments		----	
Purchases		----	
Inventory In Transit		----	

Gross Profitability by Vendor

The Gross Profitability by Vendor report displays the gross profitability by vendor.

- ❖ To create the Gross Profitability by Vendor report, set the fee slip date parameters, select a product type from the **Product Type** drop-down menu, and select a vendor from the **Vendor** drop-down menu.



Inactive Patient List

The Inactive Patient List report lists all patients who are marked as inactive on the Patient Demographic window. Eyefinity suggests creating this report on demand.

- ❖ To create the Inactive Patient List report, select a location from the **Location** drop-down menu, as needed.

12/24/2007 11:10:29AM		Inactive Patient Listing				
Default Location: All						
Patient Name	Address	City	State	ZIP Code	Home Phone	Day Phone
Mogck, Miles						
Alm, Fr						
Alv, Jo						
Arens, Dale	54916 887 rd	Crofton	NE	68730	(402) 388-2416	
Arnett, Barney F	1234 West First Street, P.O. Box 1234	Pekin	IL	61554	(309) 353-1234	(309) 353-4321
Arnett, James T	1234 West First Street, P.O. Box 1234	Pekin	IL	61554	(309) 353-1234	
Arnold, Beth T	1060 Alberta Lane, PO Box 164	Metamora	IL	61548	(309) 367-1234	
Bauman, Michelle	1905 Douglas St.	Yankton	SD	57078	(605) 665-9979	(605) 665-9979
Bies, Marc					(605) 664-0490	(605) 664-0490
Birkard, Julie	409 S. Academy	Lennox	SD	57039	(605) 647-3087	(605) 647-2236
Bla, Ka						
Boouza, Rhonda					(605) 583-4272	
Borgstrom, Annette						
Bottolfsen, Megan A	46003 Timber Road	Vermillion	SD	57069	(605) 624-5358	(605) 624-5358
Bottolfsen, Beth						(605) 624-2673
Bush, George	12345, address 1, Address2	Freeman	SD	57029	(605) 222-5555	(605) 222-5252
Bush, Onetwin	12345, address 1, Address2	Freeman	SD	57029	(605) 222-5555	

Insurance Aging by Patient Detail

NOTE

This report is replaced with the new Insurance Aging by Patient Detail custom report, located on the Custom tab. The Insurance Aging by Patient Detail custom report offers more flexible and, therefore, accurate reporting. For more information, go to [To create and print custom aging reports on page 576](#).

Insurance Aging by Patient Summary

NOTE

This report is replaced with the new Insurance Aging by Patient Summary custom report, located on the Custom tab. The Insurance Aging by Patient Summary custom report offers more flexible and, therefore, accurate reporting. For more information, go to [To create and print custom aging reports on page 576](#).

Insurance Aging Summary

NOTE

This report is replaced with the new Insurance Aging Summary custom report, located on the Custom tab. The Insurance Aging Summary custom report offers more flexible and, therefore, accurate reporting. For more information, go to [To create and print custom aging reports on page 576](#).

Insurance Analysis

The Insurance Analysis report lists dates, insurance carrier names, product names, CPT codes, amounts billed to insurance, amounts paid by insurance, and insurance write-offs. Eyefinity suggests creating this report on demand.

- ❖ To create the Insurance Analysis report, set the fee slip date parameters, select an insurance carrier from the **Insurance Co.** drop-down menu, and choose to group the report by insurance carrier or CPT code using the **Group by** drop-down menu.

05/10/2005 8:51:10AM		Insurance Analysis Report										
		Fee Slip Date >= 01/01/2004										
		Fee Slip Date <= 05/05/2005										
Service Date	Slip	Patient	Product Name	CPT Code	Qty	Product Fee	Coverage %	Ins Chg	Pat Chg	Ins Pmt	Ins Write Off / Adj	Ins Bal
Eye Care Plan Of America - F												
04/27/2005	86	Carter, Sally	93211	93211	1	25.00	100	25.00		(55.00)		(30.00)
	86		92012	92012	1	65.00	100	65.00			(20.00)	45.00
	86		92012	92012	1	65.00	100	65.00				65.00
					3	155.00			0.00	(55.00)	(20.00)	80.00
			Grand Total for Eye Care Plan Of America - F		3	155.00		155.00	0.00	(55.00)	(20.00)	80.00
Medicare												
03/16/2005	85	Cole, Harper	Acuvue	V5520	1	30.00	80	24.00	6.00			24.00
	85		Acuvue	V5520	1	30.00	80	24.00	6.00	(24.00)		
					2	60.00		48.00	12.00	(24.00)	0.00	24.00
			Grand Total for Medicare		2	60.00		48.00	12.00	(24.00)	0.00	24.00
Vision Service Plan												
03/11/2005	80	Cole, Harper	93214	93214	1	105.00	100	105.00			0.00	105.00
					1	105.00		105.00	0.00		0.00	105.00
03/11/2005	81	Cole, Harper	93213	93213	1	69.00	100	69.00				69.00
					1	69.00		69.00	0.00		0.00	69.00
03/14/2005	83	Cole, Harper	93214	93214	1	105.00	100	105.00			0.00	105.00
					1	105.00		105.00	0.00		0.00	105.00
03/16/2005	84	Cole, Harper	93214	93214	1	105.00	100	105.00			0.00	105.00
					1	105.00		105.00	0.00		0.00	105.00
			Grand Total for Vision Service Plan		4	384.00		384.00	0.00	0.00	0.00	384.00
			Grand Total		9	599.00		587.00	12.00	(79.00)	(20.00)	488.00

Insurance Audit

The Insurance Audit report lists insurance payments, transfers, adjustments, write-offs, and the patients to whom the transactions were applied. Eyefinity suggests creating this report on demand.

- ❖ To create the Insurance Audit report, set the posting date parameters and select an insurance carrier from the **Insurance Co.** drop-down menu.

05/10/2005 9:05:44AM		Insurance Audit List						
		Insurance Co. = Eye Care Plan Of America - Region 1						
		Posting Date >= 01/01/2004						
		Posting Date <= 05/05/2005						
Date	Patient	Fee Slip	CPT	Product	Type	Ref. #	Amount	
05/04/2005	Carter, Sally	86	92012	92012	Insurance Write-Off		(20.00)	
						Total Activity	(20.00)	

Insurance Charge Back

NOTE

This report is replaced with the new Insurance Charge Backs custom report, located on the Custom tab. The Insurance Charge Backs custom report offers more flexible and, therefore, accurate reporting. For more information, go to [To create and print custom insurance reports on page 602.](#)

Insurance Deposit Audit

The Insurance Deposit Audit report is a custom report that lists all transactions against insurance deposits, including applied and unapplied insurance payments, transfers to and from patients and insurance companies, chargebacks, and reasons for returns for a selected period. The report also includes batch numbers, check numbers, deposit numbers, and fee slip numbers. The report can display transactions by patients or insurance companies. To create the Insurance Deposit Audit report, go to [To create and print custom appointment reports on page 582](#).

Insurance Deposit Audit Report							
Summary							
2010							
Posting Date	Patient Name (#)	Deposit Amt.	Amount to Apply	Applied	Trans. to (Patient) Insurance	Charge Back	Recorded By
Aetna							
Batch#:	201031301 Chk #: Dep #:	\$25.00	\$25.00	\$0.00	\$0.00	\$0.00	
Total Aetna		\$25.00	\$25.00	\$0.00	\$0.00	\$0.00	
Vision Service Plan							
Batch#:	Chk #: 03084454 Dep #:	\$4,143.23	\$2,067.16	(\$1,993.71)	(\$82.36)	\$0.00	
Total Vision Service Plan		\$4,143.23	\$2,067.16	(\$1,993.71)	(\$82.36)	\$0.00	
Report Total		\$4,168.23	\$2,092.16	(\$1,993.71)	(\$82.36)	\$0.00	

Insurance Listing

The Insurance Listing report lists all insurance companies. This report includes names, addresses, contacts, phone numbers, and fax numbers. Eyefinity suggests creating this report on demand.

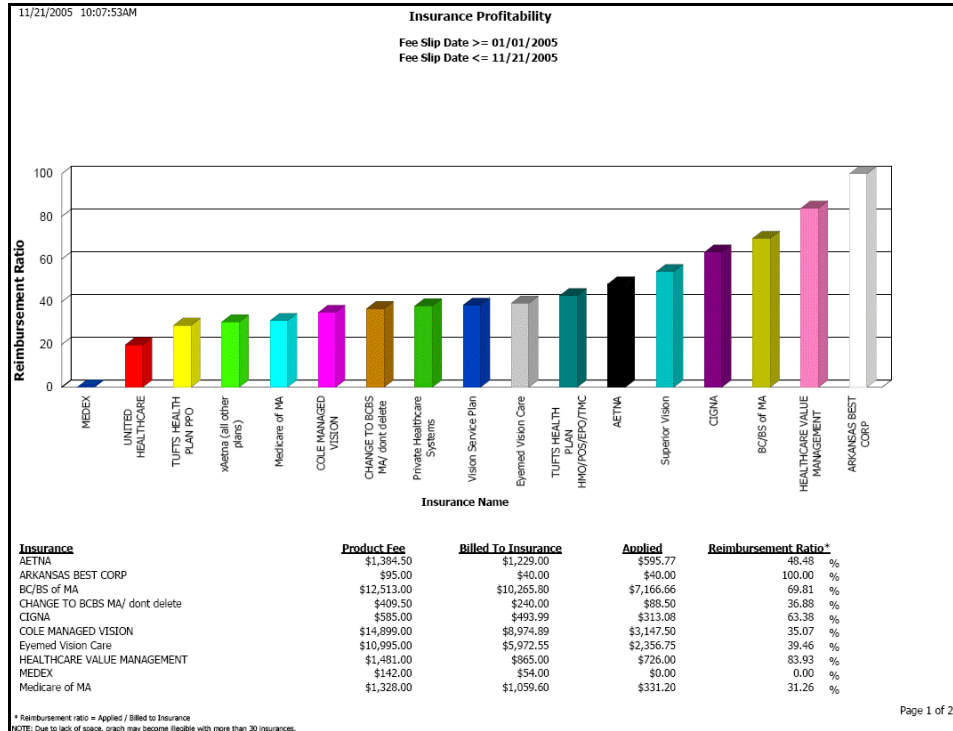
- ❖ To create the Insurance Listing report, select an insurance carrier from the **Insurance Co.** drop-down menu and choose an appropriate **Insurance** sort order.

05/10/2005 10:11:26AM		Insurance Company Listing	
Eye Care Plan Of America - Region 1		Contact	
7776 S. Pointe Parkway West		Phone	800-426-5481
Suite 150		Fax	
Phoenix, Arizona 85044			
Medical Eye Services		Contact	
234 Highway 12		Phone	818 456 8503
Arcadia, California 92567		Fax	
Medicare		Contact	Joann Wilson
2343 Wilshire Blvd.		Phone	310 555 6486
Los Angeles, California 98565		Fax	310 555 6487
Vision Service Plan		Contact	
3333 Quality Drive		Phone	800 852-7600
Rancho Cordova, California 95670-7985		Fax	916 851-4855

Insurance Profitability

The Insurance Profitability report displays the percent of the amount received from an insurance company versus the usual and customary product fee.

- ❖ To create the Insurance Profitability report, set the fee slip date parameters and choose appropriate insurance company and profit percentage sort order options from the Sort Order box.



Insurance Charges

The Insurance Charges report lists the amounts billed to insurance companies and patients. Eyefinity suggests creating this report on demand.

- ❖ To create the Insurance Charges report, set the posting date parameters.

8/27/2009 12:38:47PM		Insurance Charges Report	
		Posting Date >= 06/01/2009	
		Posting Date <= 06/30/2009	
		For location: All	
	<u>Billed</u>	<u>% of Total</u>	
Insurance Company			
Aetna	156.16	1.37	
Anthem Blue Cross and Blue Shield	343.40	3.02	
Assurant Insurance	701.97	6.17	
Beech Street	554.00	4.87	
CareMore	200.80	1.77	
Cigna	102.50	0.90	
DMERC	270.90	2.38	
Healthnet	127.50	1.12	
McKesson	555.00	4.88	
Medicare	85.00	0.75	
United Healthcare	613.75	5.40	
VisionWeb	847.00	7.45	
VSP	5,264.40	46.28	
WebMD	1,230.00	10.81	
Wellpoint Insurance	322.50	2.84	
Total Insurance Charges	<u>11,374.88</u>		
Patient Charges			
Patient Charge	10,120.76	100.00	
Total Patient Charges	<u>10,120.76</u>		
Report Total	<u><u>21,495.64</u></u>		
Percentage Billed To Insurance	52.92 %		
Percentage Billed To Patient	47.08 %		

Insurance Sales Analysis

The Insurance Sales Analysis report is a custom report that lists patient and insurance charges. All amounts listed are net of sales tax. To be included in the report, a fee slip must have a portion charged to an insurance carrier. Specifically, this report lists gross fees, dispensing fees, non-insurance related discounts, insurance related discounts, insurance contractual adjustments, net patient fees, net insurance fees, and a memo with insurance bad debts. This report can be created to display the details for insurance carriers, insurance plans, and patients

whose accounts comprise the amounts during the period. To create the Insurance Sales Analysis report, go to [Creating & Printing Custom Reports on page 570](#).

Insurance Sales Analysis Report													
9/1/2009 to 9/17/2009													
All Providers, Select Locations													
Insurance Name	Gross Fees	Dispensing Fees	Returns	Non-Ins Discounts	Ins Related Discounts	Ins Contract Adjustment	Total Net Fees	Net Fees %	Net Patient Fees	Net Patient Fees %	Net Insurance Fees	Net Ins. Fees %	-Memo- Ins. Bad Debt
Total Mouse	\$0.00	\$0.00	(\$337.99)	\$0.00	\$0.00	(\$93.68)	(\$481.67)	\$17.10	\$0.00	0.0	(\$93.68)	0.0	(\$40.00)
Total Pacific Park Store	\$2,977.35	\$5.00	(\$337.99)	\$0.00	(\$32.00)	(\$93.68)	\$2,518.68	\$5.7	\$894.62	83.5	\$1,972.05	86.1	(\$40.00)
Phernell's Vision Center													
Donald Duck													
Anthem Blue Cross and Blue Shield													
Anthem Blue Cross and Blue Shi	\$100.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$100.00	\$100.0	\$55.00	100.0	\$45.00	100.0	\$0.00
Total Anthem Blue Cross on	\$100.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$100.00	\$100.0	\$55.00	100.0	\$45.00	100.0	\$0.00
Total Donald Duck	\$100.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$100.00	\$23.8	\$55.00	31.4	\$45.00	13.5	\$0.00
MINNIE MOUSE													
Phernell ABC Plan													
Phernell Full Benefit	\$407.99	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$407.99	\$100.0	\$119.99	100.0	\$288.00	100.0	\$0.00
Total Phernell ABC Plan	\$407.99	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$407.99	\$100.0	\$119.99	100.0	\$288.00	100.0	\$0.00
Total MINNIE MOUSE	\$407.99	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$407.99	\$97.1	\$119.99	68.6	\$288.00	86.5	\$0.00
MOUSE													
Phernell ABC Plan													
Phernell Full Benefit	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$88.00)	(\$88.00)	\$100.0	\$0.00	0.0	(\$88.00)	0.0	\$0.00
Total Phernell ABC Plan	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$88.00)	(\$88.00)	\$100.0	\$0.00	0.0	(\$88.00)	0.0	\$0.00
Total MOUSE	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$88.00)	(\$88.00)	(\$21.00)	\$0.00	0.0	(\$88.00)	0.0	\$0.00
Total Phernell's Vision Centra	\$507.99	\$0.00	\$0.00	\$0.00	\$0.00	(\$88.00)	\$419.99	\$14.3	\$174.99	16.5	\$245.00	13.9	\$0.00
Total No Region	\$3,485.34	\$5.00	(\$337.99)	\$0.00	(\$32.00)	(\$181.68)	\$2,938.67	\$100.0	\$1,059.61	100.0	\$2,217.05	100.0	(\$40.00)
Report Total	\$3,485.34	\$5.00	(\$337.99)	\$0.00	(\$32.00)	(\$181.68)	\$2,938.67	\$100.0	\$1,059.61	100.0	\$2,217.05	100.0	(\$40.00)

NOTES

- The Gross Fees column represents the gross fee charged net of sales tax.
- The Dispensing Fees column represents dispensing fees to be paid by the insurance carrier. These fees are automatically calculated by OfficeMate and are based on the information set up about the insurance carrier.
- The Non-Ins Related Discounts column represents the package and regular discounts that you recorded.
- The Insurance Related Discounts column represents discounts that are automatically calculated by OfficeMate and are based on the information set up about the insurance carrier (for example, insurance discounts before or after allotments).
- The Insurance Contractual Adjustments column represents insurance reimbursement write-off amounts that are automatically calculated by OfficeMate and are based on the information set up about the insurance carrier.
- The Net pat Fees column represents the total amount of fees charged to the patient net of all discounts before adjustments.
- The Net Ins Fees column represents the total amount of fees charged to the insurance carrier net of all discounts and contractual adjustments before other adjustments.
- The Memo - Ins. Bad Debts column represents all adjustments made to insurance balances exclusive of insurance reimbursements write-off amounts (contractual adjustments) (for example, insurance write-offs and denials).

Insurance Sales Total

The Insurance Sales Total report lists the amounts billed to insurance carriers by location for a given period of time.

- ❖ To create the Insurance Sales Total report, set the posting date parameters and select a location as needed.

1/27/2009 8:21:13AM		Insurance Sales Total Report						
		Posting Date >= 12/01/2008						
		Posting Date <= 12/31/2008						
		For location: Fullerton Store						
Insurance Name	Plan Name	Product Fee	Insurance Charge	T/P Reimbursement	Patient Discount	Patient Charge	Avg. Net Percentage	
Location: Fullerton Store								
Beech Street	BS Max Allotment	220.00	0.00	25.00	6.00	0.00	11.36	
Ulysses Insurance Co	Allotments Plan	427.50	231.00	216.32	0.00	39.00	59.72	
Ulysses Insurance Co	Detailed Plan	220.00	0.00	95.00	0.00	0.00	43.18	
Total for Location: Fullerton Store		867.50	231.00	336.32	6.00	39.00	38.09	

Internal Marketing

The Internal Marketing report lists names selected for marketing letters, labels, and postcards. Eyefinity suggests creating this report on demand.

- ❖ To create the Internal Marketing report, select appropriate criteria from the Selection Criteria and Sort Order box and choose appropriate patient sort order options from the Sort Order box.

NOTE

Click **Expand** to expand the Selection Criteria and Sort Order box.

05/12/2005		Correspondence Report							
		Birth Month = January							
		Birthdate >= 01/01/1950							
		Birthdate <= 12/31/1970							
		Recall Date >= 01/01/1947							
		Recall Date <= 09/13/2004							
Pat.#	Last Name	First Name	Address	City	State	Zip	Day Phone	Home Phone	email
4	Wiega	Valerie	16 Sandpiper	Irvine	CA	92718		(949) 525-4733	

Inventory Adjustments

The Inventory Adjustments report lists the adjustments that were made to inventory through the Inventory Adjustment window. Eyefinity suggests creating this report on demand.

- ❖ To create the Inventory Adjustments report, select a transaction type from the **Transaction Type** drop-down menu, set the transaction date

parameters, and select a transaction reason from the **Transaction Reason** drop-down menu.

Inventory Adjustment Report - By Type										
Transaction Date >= 01/01/2008										
Transaction Date <= 08/12/2008										
8/13/2008 10:00:42AM										
Location Name Fullerton Store										
Transaction Type Receive										
Product	Product Code	Comment	Size	Color	Date	Qty.	Cost	Reason	Created By	Extended
DISNEY 91		Receive Inventory from PO	43-17-120	Blue	8/6/2008	3	39.95		Doctor, Johnny	119.85
Elliot	716463215386	Receive Inventory from PO	55-14-140	Grey	8/6/2008	5	54.95		Doctor, Johnny	274.75
Folding Halfeye	883121263437	Receive Inventory from PO	51-0-145	(714)GEP	8/6/2008	1	44.95		Doctor, Johnny	44.95
Vistakon Lenses	890763135458	Receive Transfer	0.00,0.00,0.00,0.00,0.00	Clear Clear	7/9/2008	2	8.00		Farina, Dennis	16.00
Receive Total										455.55
Transaction Type Returns										
Product	Product Code	Comment	Size	Color	Date	Qty.	Cost	Reason	Created By	Extended
Elliot	716463215386	Fee Slip Return	55-14-140	Grey	8/11/2008	1	54.95		Doctor, Johnny	54.95
Elliot	716463215386	Fee Slip Return	55-14-140	Grey	8/11/2008	1	54.95		Doctor, Johnny	54.95
Elliot	716463215386	Fee Slip Return	55-14-140	Grey	8/12/2008	1	54.95		Doctor, Johnny	54.95
Returns Total										164.85

Inventory Profitability

The Inventory Profitability report displays inventory profitability by manufacturer. Eyefinity suggests creating this report on a yearly basis.

- ❖ To create the Inventory Profitability report, set the date parameters and select a provider from the **Provider** drop-down menu.

Inventory Profitability Report																		
Selected Date 05/10/2005																		
Provider = Michael Miller, O.D.																		
Type/Manufacturer Name	Prod Fee	Pat Fee	Today's Totals Cost	Profit	%	Qty	Month-To-Date Totals Prod Fee	Pat Fee	Cost	Profit	%	Qty	Year-To-Date Totals Prod Fee	Pat Fee	Cost	Profit	%	Qty
Contact Lenses																		
Specialty CLs													280	280	90	190	68	2
\$ Rpt: PGP																		
Total Specialty CLs	0	0	0	0	0	0	0	0	0	0	0	0	280	280	90	190	68	2
Vistakon, Inc.																		
Acryle													60	60	32	28	47	2
\$ Rpt: Acryle Lenses													180	180	96	84	47	6
Total Vistakon, Inc.	0	0	0	0	0	0	0	0	0	0	0	0	240	240	128	112	47	8
Total Contact Lenses	0	0	0	0	0	0	0	0	0	0	0	0	520	520	218	302	47	10
Frames																		
Marchon Eyewear, Inc.																		
\$ Rpt: 159/1							215	215	90	125	58	1	215	215	90	125	58	1
101 COACH ASTOR							179	179	60	119	67	1	1,074	1,074	360	714	67	6
102 COACH CLAIRE													191	191	65	126	66	1
Total Marchon Eyewear, Inc.	0	0	0	0	0	0	394	394	150	244	62	2	1,480	1,480	515	965	65	8
Total Frames	0	0	0	0	0	0	394	394	150	244	62	2	1,480	1,480	515	965	65	8
Ophthalmic Lenses																		
(no vendor)							250	250		250	100	2	1,750	1,750		1,750	100	14
\$ Rpt: 25-28																		
Total (no vendor)	0	0	0	0	0	0	250	250	0	250	100	2	1,750	1,750	0	1,750	100	14
Total Ophthalmic Lenses	0	0	0	0	0	0	250	250	0	250	100	2	1,750	1,750	0	1,750	100	14
Other																		
(no vendor)							138	110	22	88	80	2	552	524	88	436	83	8
\$ Rpt:																		
Total (no vendor)	0	0	0	0	0	0	138	110	22	88	80	2	552	524	88	436	83	8
Total Other	0	0	0	0	0	0	138	110	22	88	80	2	552	524	88	436	83	8

NOTES

- The Prod Fee column represents the gross product fee.
- The Pat Fee column represents the actual fee charged to the patient after discounts.

Inventory Transfer

The Inventory Transfer report lists inventory transferred between locations by date and by location.

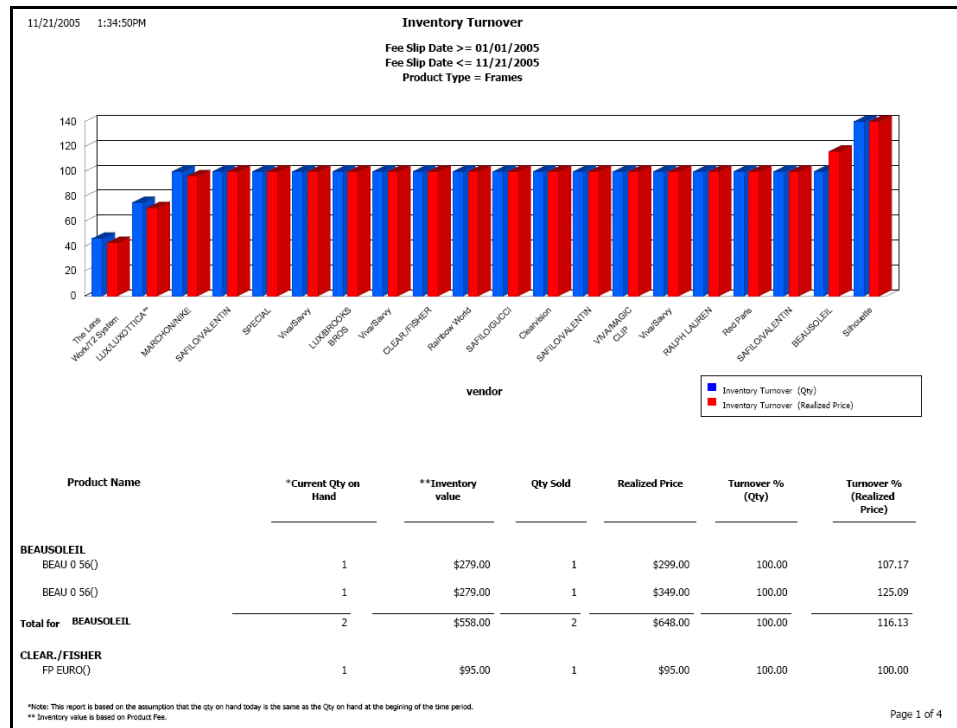
- ❖ To create the Transfer Inventory report, set the date parameters, select the location from which the inventory originated from the **Transfer From Location** drop-down menu, select the destination location from the **Transfer To Location** drop-down menu, and select the status from the **Transfer Status** drop-down menu, as needed.

3/11/2009 12:01:24PM		Inventory Transfer Report							
		Transfer Date >= 01/01/2009							
		Transfer Date <= 03/31/2009							
		From Location: All							
		To Location: All							
Transfer Date: 2/24/2009									
Product	Product Code	Size	Color	Transfer Status	Transfer Ticket	Transfer Quantity	Cost	Extended	
Transfer From: Long Beach DC									
Transferred By: Dennis Farina									
Transfer To: Grapevine Boutique Store									
82026 Plano Sun	790321679870	0-0	Black	Received	7	1	\$20.00	\$20.00	
Transfer Date: 2/25/2009									
Product	Product Code	Size	Color	Transfer Status	Transfer Ticket	Transfer Quantity	Cost	Extended	
Transfer From: Home Office Irvine									
Transferred By: Dennis Farina									
Transfer To: Newport Beach Store									
82026 Accessories	570064567067		Gold	Received	10	1	\$1.00	\$1.00	
82026 Frame	506546701277	0-0	Violet	Received	10	1	\$25.00	\$25.00	
82026 Ophthalmic Lenses	657009490182	0.00,0.00,0.00,0.00		Received	10	1	\$23.00	\$23.00	
82026 Plano Sun	790321679870	0-0	Black	Received	10	1	\$20.00	\$20.00	
82026 Contact Lenses	469078964064	0.00,0.00,0.00,0.00,0.00,0.00	Handing Tint Clear	Received	10	1	\$12.00	\$12.00	
82026 Lens Treatment	423060705457		Demigrey	Received	10	1	\$9.00	\$9.00	
82026 Other Product	370987061357		Mauve	Received	18	1	\$13.00	\$13.00	
82026 Readers	575605616087	0-0	Tortoise	Received	18	1	\$11.00	\$11.00	

Inventory Turnover

The Inventory Turnover report displays the inventory turnover for each vendor within the given date range.

- ❖ To create the Inventory Turnover report, set the fee slip date parameters, select the product type from the **Product Type** drop-down menu, and select the **Details** check box to display products by vendor.



Inventory Valuation

NOTE This report is replaced with the new Inventory Valuation custom report, located on the Custom tab. The Inventory Valuation custom report offers more flexible and, therefore, accurate reporting. For more information, go to [To create and print custom inventory reports on page 608.](#)

Lab Orders

The Lab Orders report prints lab orders.

- ❖ To create the Lab Orders report, set the order date parameters, click in the **Patient Name** text box to search for and select a patient, type an order

number in the **Order Number** text box, and select an order type from the **Type** drop-down menu.

Eyewear Order														
From:	OfficeMate Software Solutions 15375 Barranca Pkwy, Bldg L Irvine CA 92618							Order #:	28					
							Tray Number							
							Entry Date:	07/30/2003						
							Patient:	Justin R. Crawford D.D.S						
							Office Phone:	800-269-3666						
							Office FAX:	949-727-7479						
							Print Date:	05/10/2005						
To:	Essilor Of America, Inc. 2400 118th Ave. N. St. Petersburg, FL 33716							Account #:	800-The-Eyes					
							Vendor Phone:							
							Vendor FAX:							
	DPD	NPD	Sph	Cyl	Axis	Add	Seg Ht	BC	HPrism	BS	VPrism	BS	CT	OC
OD	32.00	30.00	+3.25	-2.25	180	+2.25	18.00		1.00	I	2.00	U		
OS	34.00	32.00	+2.25	-2.00	10	+0.25	18.00		1.00	I	2.00	U		
	Category	Material	Name		Uncut	Color	Density	Shading						
OD	Progressive	Polycarbonate	var		No	Grey	10%	Solid						
OS	Progressive	Polycarbonate	var		No	Grey	10%	Solid						
	Frame Information				Frame Status:		Lens only							
	Manufacturer	Name	Color	Eye	DBL	A	B	ED	Temple					
	(Not Entered)	CK 245	525	46.00	18.00	45.80	30.10	46.50	135					
	Add-Ons							Special Instructions						
	(AR) Anti-reflective Coating													

Lab Orders Outstanding

The Lab Orders Outstanding report lists the status of lab orders including patient names, ages, phone numbers, job dispensers, and the dates the jobs were promised. Eyefinity suggests creating this report on demand.

- ❖ To create the Lab Orders Outstanding report, select the lab order status from the **Lab Order Status** drop-down menu, select a vendor from the **Order**

From drop-down menu, set the promised date parameters, and select a lens type from the **Lens Type** drop-down menu.

NOTE

To create the Lab Orders Outstanding report, you must have a lab selected in the Order Lens From box in the Eyewear Order window and the Supplier box in the Soft Order or Hard Lens Order window. To set up a vendor as a lab, go to [Maintaining Vendors on page 33](#). In addition to specifying the lab, you must also record a promise date in the Promise Date box, select the Fit By and Ordered radio buttons, and select a name and date from the Name and Date drop-down menus in the Rx Order window.

05/10/2005 3:28:36PM		Lab Orders Outstanding					
		Promised Date >= 01/01/2003					
		Promised Date <= 05/05/2005					
		Lens Type = Eyewear					
Patient Name	Age	Day Phone	Home Phone	Lab Order #	Dispensed By	Dispensed	Promised
Lab Name: In Office Lab							
Phone:							
Harper Cole	55	(949) 433-7896	(949) 555-7896	39	Tom Duncan	03/10/2005	03/17/2005
Harper Cole	55	(949) 433-7896	(949) 555-7896	40	Tom Duncan	03/11/2005	03/18/2005
Harper Cole	55	(949) 433-7896	(949) 555-7896	42	Tom Duncan	03/14/2005	03/17/2005

Lab Orders Patient Follow-Up

Use the Lab Orders Patient Follow-Up report to contact patients after their frames have been delivered to ensure that their frames fit well. This report lists patient names, phone numbers, dispenser names, and delivery names. Eyefinity suggests creating this report on demand.

- ❖ To create the Lab Orders Patient Follow-Up report, select the lab order status from the **Lab Order Status** drop-down menu, set the delivered date parameters, select the person who delivered the order from the Delivered By

drop-down menu, and select a lens type from the **Lens Type** drop-down menu.

NOTE

To create the Lab Orders Patient Follow-Up report, you must have a lab selected in the Order Lens From box in the Eyewear Order window and the Supplier box in the Soft Order or Hard Lens Order window. To set up a vendor as a lab, go to [Maintaining Vendors on page 33](#). In addition to specifying the lab, you must also record a promise date in the Promise Date box, select the Fit By, Ordered, Received, Notified, and Delivered radio buttons, and select a name and date from the Name and Date drop-down menus in the Rx Order window.

05/10/2005		3:45:40PM		Lab Orders Patient Follow-Up		
Delivered Date >= 01/01/2001 Delivered Date <= 05/05/2005 Delivered By = Tom Duncan Lens Type = Eyewear						
Patient Name	Age	Home Phone	Day Phone	Dispensed By	Delivered By	
Harper Cole	55	(949) 555-7896	(949) 433-7896	Tom Duncan	Duncan, Tom	
Henry A. Mitchell	70	(949) 588-6321		Tom Duncan	Duncan, Tom	

Lab Orders Patient Notification

Use the Lab Orders Patient Notification report to notify patients to pick up frames that have been received. This report lists patient names, phone numbers, receivers, and dates received. Eyefinity suggests creating this report on demand.

- ❖ To create the Lab Orders Patient Notification report, select the lab order status from the **Lab Order Status** drop-down menu, set the received date parameters, and select a lens type from the **Lens Type** drop-down menu.

NOTE

To create the Lab Orders Patient Notification report, you must have a lab selected in the Order Lens From box in the Eyewear Order window and the Supplier box in the Soft Order or Hard Lens Order window. To set up a vendor as a lab, go to [Maintaining Vendors on page 33](#). In addition to specifying the lab, you must also record a promise date in the Promise Date box, select the Fit By, Ordered, and Received radio buttons, and select a name and date from the Name and Date drop-down menus in the Rx Order window.

05/12/2005		4:04:48PM		Lab Orders Patient Notification		
Received Date >= 01/01/1997 Received Date <= 12/31/2000 Lens Type = Eyewear						
Patient Name	Age	Home Phone	Day Phone	Received By	Received	
Michelle Radmore	39	(949) 565-8874		Tom Duncan	09/08/1999	
DISPOSITION: <input type="checkbox"/> Left Message <input type="checkbox"/> NO Answer <input type="checkbox"/> Confirmed						

Lab Orders Received & Notified

Use the Lab Orders Received & Notified report to review the inventory that you have manufactured and about which you have notified patients, but that is still in your office. Lists the patient names, ages, phone numbers, and notification dates. Eyefinity suggests creating this report on demand.

- ❖ To create the Lab Orders Received & Notified report, select the lab order status from the **Lab Order Status** drop-down menu, set the delivered date parameters, select the person who received the order from the Received By drop-down menu, and select a lens type from the **Lens Type** drop-down menu.

NOTE

To create the Lab Orders Received & Notified report, you must have a lab selected in the Order Lens From box in the Eyewear Order window and the Supplier box in the Soft Order or Hard Lens Order window. To set up a vendor as a lab, go to [Maintaining Vendors on page 33](#). In addition to specifying the lab, you must also record a promise date in the Promise Date box, select the Fit By, Ordered, Received, and Notified radio buttons, and select a name and date from the Name and Date drop-down menus in the Rx Order window.

05/12/2005 4:21:56PM		Lab Orders Received & Notified			
Received Date >= 01/01/1995					
Received Date <= 05/12/2005					
Lens Type = Eyewear					
<u>Patient Name</u>	<u>Age</u>	<u>Home Phone</u>	<u>Day Phone</u>	<u>Notified By</u>	<u>Notified</u>
Henry A. Mitchell	70	(949) 588-6321		Michael Miller, O.D.	05/12/2005

Labels

The Labels report prints labels. Eyefinity suggests printing labels on demand. Print labels using Avery 5260 compatible white rectangular labels.

- ❖ To create labels, select a city from the **City** drop-down menu, select a state from the **State** drop-down menu, select the **One Per Family** check box if you want to print one label per family, and select a format type from the **Type** drop-down menu. Choose appropriate **Last Name** and **ZIP Code** sort order options.

C M Abadon 25 MAIN ST IRVINE, CA 92618
C M Abadon 6925 MAIN ST Las Vegas, NY 92618
James Abel 0526 main st Las Vegas, NY 92618
Byron Adkins 15375 Barranca Pkwy Las Vegas, CA 92618

Location Inventory

NOTE

This report is replaced with the new Location Inventory custom report, located on the Custom tab. The Location Inventory custom report offers more flexible and, therefore, accurate reporting. For more information, go to [To create and print custom inventory reports on page 608](#).

Monthly Production Recap

The Monthly Production Recap report is a custom report that lists the production, by day, for the selected period. Receipts, and applied payments are displayed on the report. To create the Monthly Production Recap report, go to [Creating & Printing Custom Reports on page 570](#).

NOTES

- Discounts and adjustments are grouped by financial or production groups to indicate the amount and percentage of discounts that are being deducted by the group. To view this information by type (for example, insurance discount), create the Production, Discount Register, or Adjustment Register report. For more information on creating the Production report, go to [Production on page 695](#), for more information on creating the Discount Register report, go to [Discount Register on page 653](#), and for more information on creating the Adjustment Register report, go to [Adjustment Register on page 639](#).
- When creating a report that will display information from a large period, an hourglass appears and then the report displays before the entire report has been processed. When a magnifying glass appears, you will know that the report has finished processing.
- Unapplied Insurance Transfers in the Applied Payment section of the report are previously unapplied insurance amounts that were transferred to the patient's account and applied to open outstanding balances.
- All OfficeMate Administration transactions refer to the original fee slip location where the transactions were recorded.
- Use this report with data that was recorded in OfficeMate, not in a prior system that was then converted to OfficeMate.

Monthly Production Summary

NOTE

This report is replaced with the new Monthly Production Summary custom report, located on the Custom tab. The Monthly Production Summary custom report offers more flexible and, therefore, accurate reporting. For more information, go to [To create and print custom production reports on page 621](#).

New Patient Demographics

The New Patient Demographics report lists all new patients entered during the month. This report is categorized by age, Zip code, gender, insurance type, and city. Eyefinity suggests creating this report on demand.

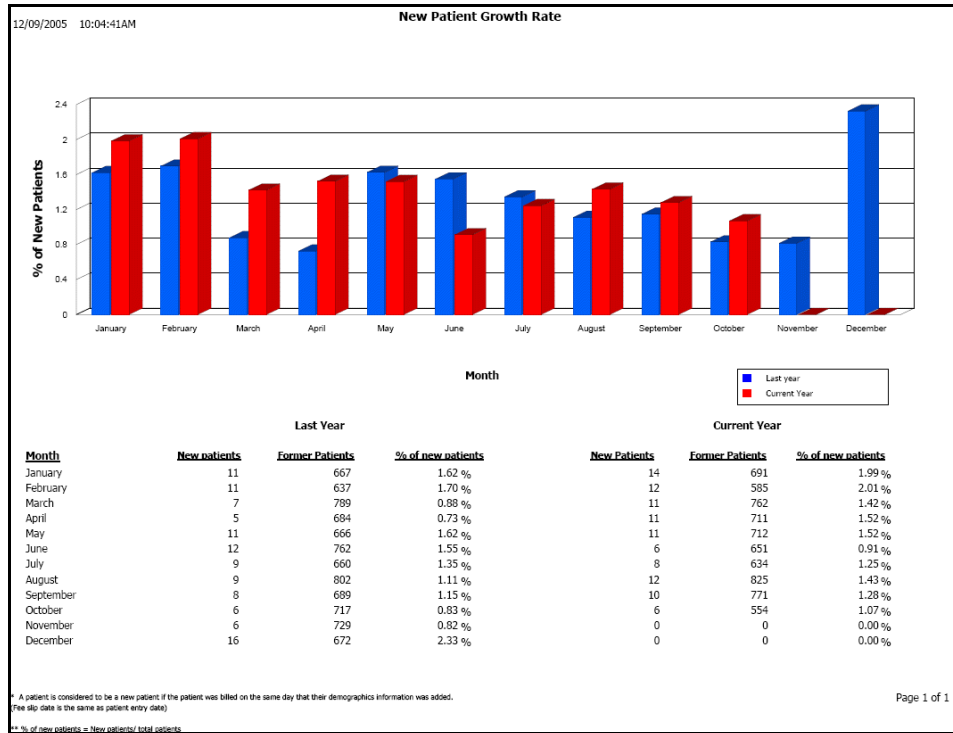
- ❖ To create the New Patient Demographics report, select a month from the **Month Patient Added** drop-down menu.

05/10/2005 5:20:38PM												
New Patient Demographics												
Month Patient Added = May												
	This Year				Last Year				Change In Patients			
	Month #	%	Year #	%	Month #	%	Year #	%	Month Totals #	%	Year Totals #	%
Age												
30 - 39	1	100	1	100					1	100	1	100
Total Age	1	100	1	100					1	100	1	100
Gender												
Male	1	100	1	100					1	100	1	100
Total Gender	1	100	1	100					1	100	1	100
Source												
Patient Referral	1	100	1	100					1	100	1	100
Total Source	1	100	1	100					1	100	1	100
Insurance Type												
(none)	1	100	1	100					1	100	1	100
Total Insurance Type	1	100	1	100					1	100	1	100
City												
Henderson	1	100	1	100					1	100	1	100
Total City	1	100	1	100					1	100	1	100
ZIP Code												
92048	1	100	1	100					1	100	1	100
Total ZIP Code	1	100	1	100					1	100	1	100

New Patient Growth Rate

The New Patient Growth Rate report displays the percentage of new patients versus former patients. New patients are those who incur any of the following new

exam CPT codes on a fee slip: 92002, 92004, 99201, 99202, 99203, 99204, 99205, 99241, 99242, 99243, 99244, 99245, 99251, 99252, 99253, 99254, 99255.



Open Charges

The Open Charges report displays ExamWRITER charges that have not been recorded on a fee slip in OfficeMate. Eyefinity suggests creating this report on demand.

- ❖ To create the Open Charges report, set the date parameters and click in the **Patient Name** text box to search for and select a patient.

05/30/2006 2:16:18PM

Open Charges
Date >= 05/30/2005
Date <= 05/30/2006
Patient Name = Sally Carter

Patient Name	Date	Description	Order #	Unit Price	Qty	Total
Sally Carter	03/23/2006	Exam 11111	0	0.00	1	0.00
Sally Carter	05/30/2006	101 COACH ASTOR	44	178.99	1	178.99

Ophthalmic Lens Listing

The Ophthalmic Lens Listing report lists all ophthalmic lenses and their inventory. This report includes manufacturer names, descriptions, CPT codes, fees, costs, gross profit percentages, and product numbers. Eyefinity suggests creating this report on demand.

- ❖ To create the Ophthalmic Lens Listing report, select a manufacturer from the **Manufacturer** drop-down menu, select the **Inactive only** check box if you

only want to display inactive lenses, and select the **Discontinued only** check box if you only want to display discontinued lenses.

05/30/2006 12:47:40PM		Ophthalmic Lens Listing											
Manufacturer:													
Name	Description	CPT	Size	BC	Sub	Cyl	Add	Fee	Cost	GP %	Product No	Active	Discontinued
BFFT25-28	Bifocal Lens	V2200						125.00		100.0	789	True	False
CR39	Single Vision Plastic Len							65.00	32.00	50.8		True	False
OSMF	Overize Lens	V2780	56									True	False
OSV	Overize Single Vision Lens											True	False
PROSTD	Progressive Standard Lens	V2200										True	False
TFFT25-28	Trifocal Lens	V2300										True	False
var	Varifux Progressive	V2200						88.00	65.00	26.1		True	False
VIP	Sola VIP											True	False
VSPMF	Standard Plastic/Glass Le							50.00		100.0		True	False
VSPSV	Standard Plastic/Glass Lens							44.00		100.0		True	False

Order Recommendation

NOTE

This report is replaced with the new Order Recommendation custom report, located on the Custom tab. The Order Recommendation custom report offers more flexible and, therefore, accurate reporting. For more information, go to [To create and print custom inventory reports on page 608](#).

Other Product Listing

The Other Product Listing report lists all other products and their inventory. This report includes manufacturers, names, descriptions, CPT codes, fees, costs, gross profit percentages, and product numbers. Eyefinity suggests creating this report on demand.

- ❖ To create the Other Product Listing report, select a manufacturer from the **Manufacturer** drop-down menu, select the **Inactive only** check box if you only want to display inactive products, and select the **Discontinued only** check box if you only want to display discontinued products.

05/30/2006 12:50:05PM		Other Products Listing										
Manufacturer:												
Name	Description	CPT	Fee	Cost	GP %	Product No	Active	Discontinued				
Accessories												
11440	Exdsion, Benign 0.5 CM or Less	11440					True	False				
Other												
AR	Anti-reflective Coating		69.00	11.00	84.1		True	False				
	Gift Certificate						True	False				
TINT	Tint - Plastic Solid	V2741	26.00	9.00	65.4		True	False				
TINTPG	Tint - Plastic Gradient		29.00	7.00	75.9		True	False				
UV	UV coating	V2755	23.00		100.0		True	False				

Patient Aging - Detail

NOTE

This report is replaced with the new Patient Aging Detail custom report, located on the Custom tab. The Patient Aging Detail custom report offers more flexible and, therefore, accurate reporting. For more information, go to [To create and print custom aging reports on page 576](#).

Patient Aging - Summary

NOTE

This report is replaced with the new Patient Aging Summary custom report, located on the Custom tab. The Patient Aging Summary custom report offers more flexible and, therefore, accurate reporting. For more information, go to [To create and print custom aging reports on page 576](#).

Patient Refund of Unapplied Payments

The Patient Refund of Unapplied Payments report displays the credits and unapplied amounts that were refunded to patients in the Patient Credit Refund window and allows you to refund a patient credit. This report is an audit of all credit refunds. Eyefinity suggests creating this report on demand.

- ❖ To create the Patient Refund of Unapplied Payments report, set the refund date parameters, click in the **Patient Name** text box and find and select a patient, and select the **By Provider** check box if you want to sort the report by providers.

9/11/2009 4:37:13PM		Patient Refund of Unapplied Payments					
		Refund Date >= 09/11/2008					
		Refund Date <= 09/11/2009					
		For location: All					
Date	Patient Name	Type	Description	Amount	Reason	Location	Recorded By
7/30/2009							
7/30/2009	Buster, Colin	Check		\$75.00		AV Store	Duck, Donald
7/30/2009	Buster, Colin	Check		\$75.00		AV Store	Duck, Donald
			Total	\$150.00			
6/8/2009							
6/8/2009	Mayo, Debra	Credit Card	Mastercard	\$10.00		Pacific Park Store	Duck, Donald
			Total	\$10.00			
2/24/2009							
2/24/2009	Patient, Test	Check	11111	\$10.00	without reason - test	OSS Store	., Admin
2/24/2009	Patient, Test	Check	11111	\$10.00	testing reason	OSS Store	., Admin
2/24/2009	Patient, Test	Check	11111	\$10.00	testing reason	OSS Store	., Admin
			Total	\$30.00			
			Grand Total	\$190.00			

Patient Demographics

The Patient Demographics report lists all patients in your database and categorizes them by age, Zip code, gender, source, insurance type, and city. Eyefinity suggests creating this report on demand.

Patient Demographics		
	Patient Total	Percent of Total
Age		
10 - 19	1	9
30 - 39	4	36
40 - 49	2	18
50 - 59	3	27
70 - 79	1	9
Total Age	11	100
Gender		
Female	6	55
Male	5	45
Total Gender	11	100
Source		
Patient Referral	4	36
Professional Referral	5	45
Walk in Patient	1	9
Yellow Pages	1	9
Total Source	11	100
Insurance Type		
(none)	3	27
Champus	1	9
Medicare	1	9
PPO	5	45
Private Pay	1	9
Total Insurance Type	11	100
City		
Henderson	1	9
Irvine	1	9
Laguna Niguel	2	18
Lake Forest	2	18
Mission Viejo	4	36
San Juan Capistrano	1	9
Total City	11	100
ZIP Code		
92048	1	9
92630	2	18
92653	2	18
92675	1	9
92692	4	36
92718	1	9
Total ZIP Code	11	100

Patient List

The Patient List report lists all patients in your database including their cities, states, ZIP codes, home phone numbers, day phone numbers, patient numbers, and chart numbers. Eyefinity suggests creating this report on demand.

- ❖ To create the Patient List report, select ZIP code parameters from the ZIP Code drop-down menus, select a city from the **City** drop-down menu, select the **By Provider** check box if you want to sort the report by providers, and

select a provider from the **Provider** drop-down menu. Choose appropriate **Last Name**, **City**, and **ZIP Code** sort order options.

05/11/2005 11:37:05AM		Patient Listing					
Patient Name	Address	City	State	ZIP Code	Home Phone	Day Phone	Acct Chart #
Abdul, Dandan	40388 County Road 2	Henderson	NE	92049		(856) 969-9999	14
Carter, Sally	9696 Calle Dulce	San Juan Capistrano	CA	92675	(949) 555-1236		3
Cole, Harper	990 Pleasant Valley Run	Laguna Niguel	CA	92653	(949) 555-7896	(949) 433-7896	10
Crawford D.D.S, Justin F	1006 Carlota	Lake Forest	CA	92630	(949) 555-8523	(949) 421-6000	12
Davis, Steven	343 Haverford Ave,	Laguna Niguel	CA	92653	(949) 555-7463		8
Mitchell, Henry A	663 Tressle Way	Lake Forest	CA	92630	(949) 558-6321		1
Radmore, Michelle	343 Sierra Lane	Mission Viejo	CA	92692	(949) 565-8974		2
Ressler, Margaret	33991 Festivo	Mission Viejo	CA	92692	(949) 365-8974		9
Underwood, Jennifer	49060 Pacific Heights Drive	Mission Viejo	CA	92692	(949) 555-8631		5 78070-97
Underwood, Tracy	49060 Pacific Heights Drive	Mission Viejo	CA	92692	(949) 555-8631		11
Wega, Valerie	16 Sandpiper	Irvine	CA	92718	(949) 525-4733		4

Total Patients: 11

Patients in Quick List

Use the Patients in Quick List report as an audit report to compare patients accessed in OfficeMate to those charged during the day. This report lists all patients in the Quick List window at the time the report is created and printed. Eyefinity suggests creating this report on demand.

05/11/2005 11:47:21AM		Patients In Quick List				
New	Last Name	First Name	Initial	Phone	HIPAA	Appt Time
No	Abdul	Dandan		(856) 969-9999	Not Read	

Patients w/No Recall Date

The Patients w/No Recall Date report lists patients in your database who do not have recall dates. Eyefinity suggests creating this report on demand.

05/11/2005		Patients w/NO Recall Date			12:05 pm
Last Name	First Name	Initial	Home Phone	Day Phone	
Abdul	Dandan			(856) 969-9999	

Patients w/Past Due Recall

The Patient w/Past Due Recall report lists patients in your database who have recall dates that are past due.

- ❖ To create the Patient w/Past Due Recall report, set the recall date parameters. Eyefinity suggests creating this report on demand.

05/11/2005		Patients with Past Due Recall				1:31 pm
		Recall Date >= 01/01/2001				
		Recall Date <= 05/10/2005				
Last Name	First Name	Initial	Phone	Recall Date	Recall Type	
Crawford	Justin	R	(949) 421-6000	05/16/2004	Glaucoma	
Crawford	Justin	R	(949) 421-6000	02/18/2005	12 Month	
Davis	Steven			07/30/2004	Diabetic 12 month	
Mitchell	Henry	A		08/21/2003	12 Month	
Radmore	Michelle			01/30/2004	Q1 recheck - 6 months	
Radmore	Michelle			07/30/2004	12 Month	
Petzler	Margaret			07/30/2004	12 Month	
Underwood	Jennifer			07/30/2004	12 Month	
Underwood	Tracy			08/21/2003	12 Month	
Viega	Valerie			12/03/2001	12 Month	

Performance - Net Fees

The Performance - Net Fees report is a custom report that displays columns and data (net fees) that are defined by you. All fees are net of refunds, write-off amounts, adjustments, and returns. This report provides exam, frame, contact lens, and applied payment performance information. It displays information about the pairs of glasses, anti-reflective coatings added to glasses, second pairs of glasses, backup glasses, and the contact lens warranties and packages sold. Additionally, this report displays the performance results for comprehensive exams, medical exam, and exams performed without additional items being sold. For all items sold, it calculates the average transaction fee. You can use this report to determine how well providers and staff are selling items, how many photos are being added to exams, if anti-reflective coatings are being added to pairs of lenses sold, and other performance information. This report can be organized by region, location, and provider and consolidated in a summary view or created

with details visible. To create the Performance - Net Fees report, go to [Creating & Printing Custom Reports](#) on page 570.

NOTES

- If you are comparing the total amounts in the Performance - Net Fees report to the total amounts in other reports, you may notice differences in the amounts because all amounts in the Performance - Net Fees report are rounded to the nearest whole dollar.
- If you create a report that displays the applied payments by provider, the payments displayed are the payments received for the provider recorded on the fee slip.
- There is no Contact Lens Exams column in the Performance - Net Fees report. To view the fees generated by the contact lens exam CPT codes that you set up in the CL Exams tab on the Business Analysis Reports Setup Options window, create the Detail Listing report.

Performance Report - Fees																
9/1/2009 to 9/17/2009																
All Providers, Select Locations																
Provider	Comp. Exams	Exam Only	Medical Exams	Photos Fees	Photos %	CL Pks Fees	CL Pks %	Backup Glasses	Pairs of Glasses	Average Trans.	Warranty Fees	Warranty %	AR Coat %	2nd Pairs	Applied Payments Patient	Insurance
No Region																
Anvi Optical Store																
Mickey Mouse	\$0	\$0	\$0	\$0	---	\$0	---	\$0	\$0	---	\$0	---	---	\$0	\$0	\$
MINNIE MOUSE	\$0	\$0	\$0	\$0	---	\$0	---	\$0	\$0	---	\$0	---	---	\$0	\$72	\$21
Anvi Optical Store Total:	\$0	\$0	\$0	\$0	---	\$0	---	\$0	\$0	---	\$0	0%	---	\$0	\$72	\$21
AV Store																
Mickey Mouse	\$0	\$0	\$0	\$0	---	\$0	---	\$0	\$0	---	\$0	---	---	\$0	\$114	\$
AV Store Total:	\$0	\$0	\$0	\$0	---	\$0	---	\$0	\$0	---	\$0	0%	---	\$0	\$114	\$
Costa Mesa Store																
Donald Duck	\$0	\$0	\$0	\$0	---	\$0	---	\$0	\$0	---	\$0	---	---	\$0	\$300	\$
Costa Mesa Store Total:	\$0	\$0	\$0	\$0	---	\$0	---	\$0	\$0	---	\$0	0%	---	\$0	\$300	\$
Pacific Park Store																
Mickey Mouse	\$0	\$0	\$0	\$0	---	\$0	---	\$0	\$126	---	\$0	0%	0%	\$0	\$973	\$38
Dennis Farina	\$0	\$0	\$0	\$0	---	\$0	---	\$0	\$0	---	\$0	---	---	\$0	\$0	\$
Pacific Park Store Total:	\$0	\$0	\$0	\$0	---	\$0	---	\$0	\$126	---	\$0	0%	0%	\$0	\$973	\$38
Phernell's Vision Center																
MINNIE MOUSE	\$0	\$0	\$0	\$0	---	\$0	---	\$0	\$408	---	\$0	0%	0%	\$0	\$0	\$
Donald Duck	\$0	\$0	\$0	\$0	---	\$0	---	\$0	\$0	---	\$0	---	---	\$0	\$0	\$
Phernell's Vision Center Total:	\$0	\$0	\$0	\$0	---	\$0	---	\$0	\$408	---	\$0	0%	0%	\$0	\$0	\$
No Region Total:	\$0	\$0	\$0	\$0	---	\$0	---	\$0	\$534	---	\$0	0%	0%	\$0	\$1,459	\$40
Grand Total:	\$0	\$0	\$0	\$0	---	\$0	---	\$0	\$534	---	\$0	0%	0%	\$0	\$1,459	\$40

NOTES

- The Comprehensive Exams column represents the total amount billed during the period for the specified CPT codes on the fee slip. If there is more than one CPT code on the fee slip, the fee will include the total amount. Refunds are related to the fee slip date. The total fee at the bottom of this column is used to calculate the Photos % and Average Transaction Fee columns.
- The Exam Only column represents the total amount billed during the period for the specified CPT codes on the fee slip. Only the exams recorded on a fee slip that do not also have products on the fee slip will be displayed. If there is more than one CPT code on the fee slip, the fee will include the total amount. Refunds are related to the fee slip date.
- The Medical Exams column represents the total amount billed during the period for the specified CPT codes on the fee slip. If there is more than one CPT code on the fee slip, the fee will include the total amount. Refunds are related to the fee slip date.
- The Photos % column represents the photo fees divided by the comprehensive exam fees. Refunds are related to the fee slip date.
- The CL Package column represents the total amount of all services and products included in the contact lens packages sold. Set up packages in the Discount & Package Setup window. For more information on setting up packages, go to [To set up discounts and packages on page 93](#).
- The CL Package % column represents the fees generated by the total contact lens package divided by the contact lens exam fee. The percent may be greater than 100% if the package generated more fees than the exam fee. View the contact lens exams used in the calculation in the Detail Listing.

**NOTES,
CONT.**

- The Backup Glasses column represents the backup glasses net fees generated. Glasses are considered to be “backup glasses” when a contact lens exam is billed and one or more pairs of glasses or plano sunglasses are also purchased on the same fee slip. Refunds are related to the fee slip date.
- The Pairs of Glasses column represents the net fees of all items included in the eyewear order (for example, frames, lenses, AR coatings, etc.) and invoiced and recorded on a fee slip during the period. The fees include warranty frame fees. Refunds are related to the fee slip date.
- The Average Trans column represents the average payments, which equals the total applied payments divided by comprehensive exams.
- The Warranty column represents the number of warranties sold as defined by the Warranty production group. Refunds are related to the fee slip date.
- The Warranties % column represents the warranties sold during the period divided by the number of pairs of glasses sold during the period.
- Plano sunglasses are included when they are added to a fee slip. Refunds are related to the fee slip date.
- The % AR Coatings column represents the number of AR coatings divided by pairs of single vision, bifocal, trifocal, or progressive lenses specified in a lab order. AR coatings are set up by attributes. Refunds are related to the fee slip date.
- The 2nd Pairs column represents the number of glasses or plano sunglasses that are purchased on a fee slip when the number is greater than one. The pairs of glasses must be recorded on an eyewear order.
- The Qty column represents the total number of pairs of frames (glasses and lenses or frame packages) sold during the period and recorded in an eyewear order. Plano sunglasses are not included.
- The Fee column represents the net fees of the frame sold.
- The Applied Payments column represents the total amount applied to charges during the period. The amount includes insurance chargebacks and nonrefundable adjustments. User defined adjustments that affect applied payments are not included. Applied payments are reflected on the date on which they were applied.

Performance - Net Quantities

The Performance - Net Quantities report is a custom report that displays columns and data (net quantities) that are defined by you. All quantities are net of refunds, write-off amounts, adjustments, and returns. This report provides exam, frame, contact lens, and applied payment performance information. It displays

information about the pairs of glasses, anti-reflective coatings added to glasses, second pairs of glasses, backup glasses, and the contact lens warranties and packages sold. Additionally, this report displays the performance results for comprehensive exams, medical exam, and exams performed without additional items being sold. For all items sold, it calculates the average transaction fee. You can use this report to determine how well providers and staff are selling items, how many photos are being added to exams, if anti-reflective coatings are being added to pairs of lenses sold, and other performance information. This report can be organized by region, location, and provider and consolidated in a summary

view or created with details visible. To create the Performance - Net Quantities report, go to [Creating & Printing Custom Reports on page 570](#).

NOTES

- If you are comparing the total amounts in the Performance - Net Quantities report to the total amounts in other reports, you may notice differences in the amounts because all amounts in the Performance - Net Quantities report are rounded to the nearest whole dollar.
- If you create a report that displays the applied payments by provider, the payments displayed are the payments received for the provider recorded on the fee slip.
- There is no Contact Lens Exams column in the Performance - Net Fees report. To view the quantity of contact lens exam CPT codes that you set up in the CL Exams tab on the Business Analysis Reports Setup Options window, create the Detail Listing report.

Performance Report - Quantities																
9/1/2009 to 9/17/2009																
All Providers, Select Locations																
Provider	Comp. Exams	Exam Only	Medical Exams	Photos		CL Pks.		Backup Glasses	Pairs of Glasses	Average Trans.	Warranty		AR Coat %	2nd Pairs	Applied Payments	
				Qty.	%	Qty.	%				Qty.	%			Patient	Insurance
No Region																
Anvi Optical Store																
Mickey Mouse	0	0	0	0	...	0	...	0	0	...	0	...	...	0	\$0	\$
MINNIE MOUSE	0	0	0	0	...	0	...	0	0	...	0	...	...	0	\$72	\$20
Anvi Optical Store Total:	0	0	0	0	...	0	...	0	0	...	0	0%	...	0	\$72	\$20
AW Store																
Mickey Mouse	0	0	0	0	...	0	...	0	0	...	0	...	...	0	\$114	\$
AW Store Total:	0	0	0	0	...	0	...	0	0	...	0	0%	...	0	\$114	\$
Costa Mesa Store																
Donald Duck	0	0	0	0	...	0	...	0	0	...	0	...	...	0	\$300	\$
Costa Mesa Store Total:	0	0	0	0	...	0	...	0	0	...	0	0%	...	0	\$300	\$
Pacific Park Store																
Mickey Mouse	0	0	0	0	...	0	...	0	1	...	0	0%	0%	0	\$73	\$38
Dennis Farina	0	0	0	0	...	0	...	0	0	...	0	...	...	0	\$0	\$
Pacific Park Store Total:	0	0	0	0	...	0	...	0	1	...	0	0%	0%	0	\$73	\$38
Phernell's Vision Center																
MINNIE MOUSE	0	0	0	0	...	0	...	0	1	...	0	0%	0%	0	\$0	\$
Donald Duck	0	0	0	0	...	0	...	0	0	...	0	...	...	0	\$0	\$
Phernell's Vision Center Total:	0	0	0	0	...	0	...	0	1	...	0	0%	0%	0	\$0	\$
No Region Total:	0	0	0	0	...	0	...	0	2	...	0	0%	0%	0	\$1,453	\$40
Grand Total:	0	0	0	0	...	0	...	0	2	...	0	0%	0%	0	\$1,453	\$40

NOTES

- The Comprehensive Exams column represents the number of CPT codes billed during the period specified in the Comprehensive Exams tab on the Business Analysis Reports Setup Options window. If more than one CPT code is recorded on a fee slip, the quantity will be one. The total number at the bottom of this column is used to calculate the Photos % and Average Transaction Fee columns.
- The Exam Only column represents the number of selected CPT codes without frames, contact lenses, and all other product types purchased. Only the exams recorded on a fee slip that do not also have products on the fee slip will be displayed. If more than one CPT code is recorded on a fee slip, the quantity will be one.
- The Medical Exams column represents the number of CPT codes billed during the period specified in the Medical Exams tab on the Business Analysis Reports Setup Options window.
- The Photos % column represents the number of photos divided by the number of comprehensive exams.
- The CL Package column represents the number of contact lens packages sold.
- The CL Package % column represents the number of contact lens packages sold divided by the number of contact lens exams performed as specified in the CL Exams tab on the Business Analysis Reports Setup Options window. View the contact lens exams used in the calculation in the Detail Listing.
- The Backup Glasses column represents the number of backup glasses sold. Glasses are considered to be “backup glasses” when a contact lens exam is billed and one or more pairs of glasses or plano sunglasses are also purchased on the same fee slip.
- The Pairs of Glasses column represents the number of pairs of frames (frames and two lenses or frame packages with a frame and two lenses) created on an eyewear order and invoiced and recorded on a fee slip during the period.
- The Average Trans column represents the average payments, which equals the total applied payments divided by comprehensive exams.
- The Warranty column represents the number of warranties sold as defined by the Warranty production group. Refunds are related to the fee slip date.
- The Warranties % column represents the warranties sold during the period divided by the number of pairs of glasses sold during the period.
- Plano sunglasses are included when they are added to a fee slip. Refunds are related to the fee slip date.

**NOTES,
CONT.**

- The % AR Coatings column represents the number of AR coatings divided by pairs of single vision, bifocal, trifocal, or progressive lenses specified in a lab order. AR coatings are set up by attributes. Refunds are related to the fee slip date.
- The 2nd Pairs column represents the number of glasses or plano sunglasses that are purchased on a fee slip when the number is greater than one. The pairs of glasses must be recorded on an eyewear order.
- The Qty column represents the total number of pairs of frames (glasses and lenses or frame packages) sold during the period and recorded in an eyewear order. Plano sunglasses are not included.
- The Fee column represents the net fees of the frame sold.
- The Applied Payments column represents the total amount applied to charges during the period. The amount includes insurance chargebacks and nonrefundable adjustments. User defined adjustments that affect applied payments are not included. Applied payments are reflected on the date on which they were applied.

Physical Inventory Variance

The Physical Inventory Variance report lists discrepancies between the physical count and recorded inventory. Eyefinity suggests creating this report on demand.

Product		Product Code	Size	Color	On Hand Quantity	Physical Quantity	Quantity Variance	Unit Cost	Cost Variance
Cycle No./ Name	Date	Location	Recorded By						
4 Monthly Cycle	10/2/2007	Laguna Beach Optical	Mouse-P, Mickey P						
Bausch & Lomb									
			0.00,0.00,0.00,0.00,0.00		0	1	1	\$32.00	\$32.00
			0.00,0.00,0.00,0.00,0.00		0	1	1	\$32.00	\$32.00
			0.00,0.00,0.00,0.00,0.00		0	1	1	\$29.99	\$29.99
			0.00,0.00,0.00,0.00,0.00		0	1	1	\$74.99	\$74.99
			0.00,0.00,0.00,0.00,0.00		0	1	1	\$128.99	\$128.99
			0.00,0.00,0.00,0.00,0.00		0	65	65	\$28.00	\$1,820.00
			0.00,0.00,0.00,0.00,0.00		0	1	1	\$33.00	\$33.00
			0.00,0.00,0.00,0.00,0.00		0	34	34	\$30.00	\$1,020.00
			0.00,0.00,0.00,0.00,0.00		0	3	3	\$35.50	\$106.50
			0.00,0.00,0.00,0.00,0.00		0	132	132	\$12.75	\$1,683.00
			0.00,0.00,0.00,0.00,0.00		0	1	1	\$12.75	\$12.75
			0.00,0.00,0.00,0.00,0.00		0	1	1	\$19.50	\$19.50
			0.00,0.00,0.00,0.00,0.00		0	1	1	\$30.00	\$30.00
					0	249			\$5,022.72

Post Card

The Post Card report prints postcards. Eyefinity suggests creating postcards on demand. Print postcards using postcard stock with four cards on 8½" x 11" sheets.

- ❖ To print postcards, select a city from the **City** drop-down menu, select a state from the **State** drop-down menu, select the **One Per Family** check box if you only want to print one postcard per family, and select a printing type from the **Type** drop-down menu. Choose appropriate **Last Name** and **ZIP**

Code sort order options. After you click **Preview**, type the postcard text in the Post Card Message window and click **Save**.

Dear Patient:

Your next appointment is scheduled for 11/11/05.
Please call our office if you have a conflict with this date. Thank you!

Dandan Abdul
40388 County Road 2
Henderson, NE 68048

Procedure Code Listing

The Procedure Code Listing report lists all procedure codes that are setup in the Customization window. Eyefinity suggests creating this report on demand.

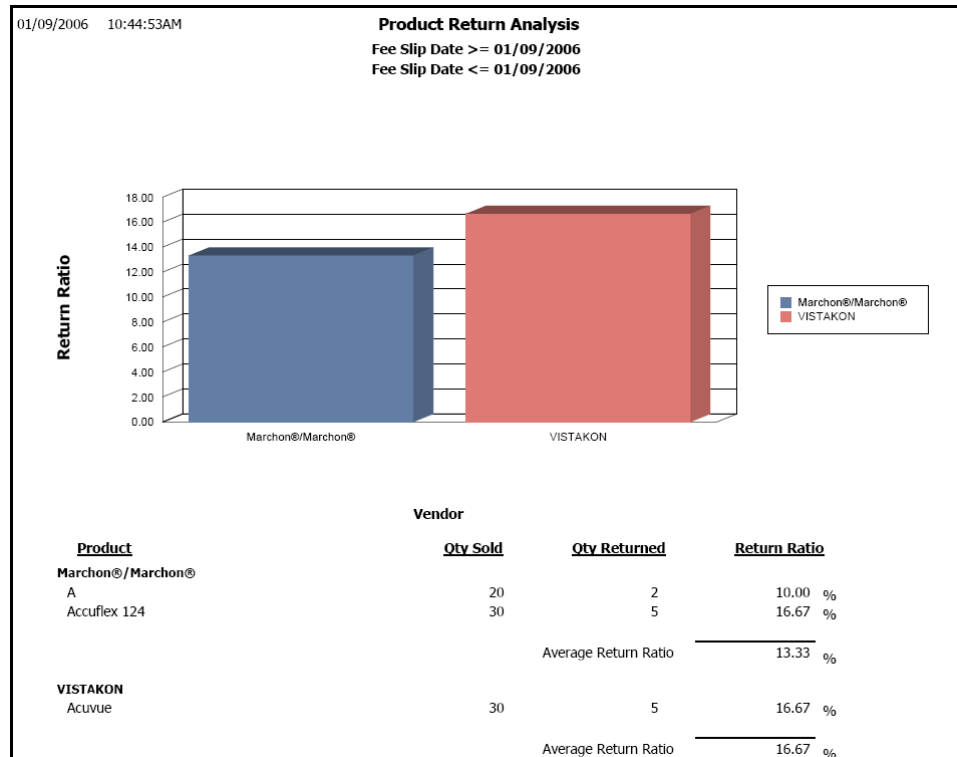
- ❖ To create the Procedure Code Listing report, select appropriate **Procedure Code** and **Procedure Description** sort order options.

05/11/2005 2:33:35 PM		Procedure Code Listing				
Code	Description	Type of Service	Min	Units	Financial Group	Production Group
11440	Excision, Benign 0.5 CM or Less	Medical Care	0	1		
11441	Excision, Benign 0.6-1.0 CM	Medical Care	0	1		
11442	Excision, Benign 1.1-2.0 CM	Medical Care	0	1		
11443	Excision, Benign 2.1-3.0 CM	Medical Care	0	1		
11444	Excision, Benign 3.1-4.0 CM	Medical Care	0	1		
11446	Excision, Benign Over 4.0 CM	Medical Care	0	1		
11640	Excision, Malignant 0.5 CM-Less	Medical Care	0	1		
11641	Excision, Malignant 0.6-1.0 CM	Medical Care	0	1		
11642	Excision, Malignant 1.1-2.0 CM	Medical Care	0	1		
11643	Excision, Malignant 2.1-3.0 CM	Medical Care	0	1		
11644	Excision, Malignant 3.1-4.0 CM	Medical Care	0	1		
11646	Excision, Malignant Over 4.0 CM	Medical Care	0	1		
11780	Eye Exam + Refraction	Medical Care	0	1		
12001	Eye Exam / Wears Glasses	Medical Care	0	1		
12011	Repair Wound, Simple 2.5 CM-Less	Medical Care	0	1		
12013	Repair Wound, Simple 2.6-5.0 CM	Medical Care	0	1		
12051	Repair Wound, Inter. 2.5 CM-Less	Medical Care	0	1		
12052	Repair Wound, Inter. 2.6-5.0 CM	Medical Care	0	1		
12053	Repair Wound, Inter. 5.1-7.5 CM	Medical Care	0	1		
12054	Repair Wound, Inter. 7.6-12.5 CM	Medical Care	0	1		
13141	Repair Wound, Complex 1.1-2.5 CM	Medical Care	0	1		
13150	Repair Wound, Complex 1.0 CM-Less	Medical Care	0	1		
13152	Repair Wound, Complex 2.6-7.5 CM	Medical Care	0	1		
13780	Eye Exam / Does Not Wear Glasses	Medical Care	0	1		
14060	Tissue Transfer, 10 sq CM-Less	Medical Care	0	1		
14061	Tissue Transfer, 10.1-30 sq CM	Medical Care	0	1		
15250	Full Thick. Graft, 20 sq CM-Less	Medical Care	0	1		
15261	Full Thick. Graft, Ea.Add. 20 sqC	Medical Care	0	1		
15820	Blepharoplasty, Lower Lid	Medical Care	0	1		
15821	Blepharoplasty, Lower Lid w/ Skin	Medical Care	0	1		
15822	Blepharoplasty, Upper Lid	Medical Care	0	1		
15823	Blepharoplasty, Upper Lid w/ Fat	Medical Care	0	1		
46625	Peripheral Iridectomy	Medical Care	0	1		
46680	Repair Iris, CB (dialysis)	Medical Care	0	1		
46682	Suture Iris CB (SP)	Medical Care	0	1		
65091	Evisceration, w/o implant	Medical Care	0	1		
65093	Evisceration, w/ implant	Medical Care	0	1		
65101	Enucleation, w/o implant	Medical Care	0	1		

Product Return Analysis

The Product Return Analysis report displays the ratio of products returned to products sold.

- ❖ To create the Product Return Analysis report, set the fee slip date parameters, select a product type from the **Product Type** drop-down menu, and select a vendor from the **Vendor** drop-down menu.



Product Transaction Details

The Product Transaction Details report lists product descriptions, UPCs, sizes, colors, transaction dates, transaction types, quantities, costs, and extended costs. Eyefinity suggests creating this report on demand.

- ❖ To create the Product Transaction Detail report, set the transaction date parameters.

05/11/2005 2:56:04PM		Product Transaction Detail Report						
		Transaction Date >= 05/01/2005						
		Transaction Date <= 05/11/2005						
Product	Product Code/UPC	Size	Color	Date	Type	Qty	Cost	Extended
UNLOCK 760/1	679516691691	53.0,140.53,37.5,55.5	GUNMETAL	05/09/2005	Sale	1	89.95	89.95
								89.95
101 COACH ASTOR	679516719302	52.0,140.52,29.5,54.5	SAND	05/09/2005	Adjustment	5	59.95	299.75
101 COACH ASTOR	679516719289	50.0,140.50,28.5,52.5	SAND	05/09/2005	Adjustment	5	59.95	299.75
101 COACH ASTOR	679516719043	52.0,140.52,29.5,54.5	GUNMETAL	05/09/2005	Adjustment	5	59.95	299.75
101 COACH ASTOR	679516719029	50.0,140.50,28.5,52.5	GUNMETAL	05/09/2005	Adjustment	5	59.95	299.75
101 COACH ASTOR	679516719173	52.0,140.52,29.5,54.5	COFFEE	05/09/2005	Adjustment	5	59.95	299.75
101 COACH ASTOR	679516719159	50.0,140.50,28.5,52.5	COFFEE	05/09/2005	Adjustment	5	59.95	299.75
101 COACH ASTOR	679516719302	52.0,140.52,29.5,54.5	SAND	05/09/2005	Receive	3	59.95	179.85
101 COACH ASTOR	679516718916	52.0,140.52,29.5,54.5	BLACK	05/09/2005	Sale	1	59.95	59.95
								2,038.30
CINDERELLA	679516757649	42.0,115.41,28.41.5	PINK	05/09/2005	Adjustment	1	44.95	44.95
CINDERELLA	679516757625	40.0,115.39,26,39.5	PINK	05/09/2005	Adjustment	1	44.95	44.95
CINDERELLA	679516757601	38.0,110.37,24,37.5	PINK	05/09/2005	Adjustment	1	44.95	44.95
CINDERELLA	679516757151	38.0,110.37,24,37.5	MOCHA	05/09/2005	Adjustment	1	44.95	44.95
								179.80
								Report total 2,308.05

Production

NOTE

This report is replaced with the new Production custom report, located on the Custom tab. The Production custom report offers more flexible and, therefore, accurate reporting. For more information, go to [To create and print custom production reports on page 621](#).

Production - Location Comparison

The Production - Location Comparison report is a custom report that lists the production for the selected period between locations. Sales, discounts, adjustments, returns, receipts, and applied payments are displayed on the report. This report can be consolidated in a summary view or created with the product group details, product details, or patient details displayed. To create the

Production - Location Comparison report, go to [Creating & Printing Custom Reports on page 570](#).

NOTES

- Discounts and adjustments are grouped by financial or production groups to indicate the amount and percentage of discounts that are being deducted by the group. To view this information by type (for example, insurance discount), create the Production, Discount Register, or Adjustment Register report. For more information on creating the Production report, go to [Production on page 695](#), for more information on creating the Discount Register report, go to [Discount Register on page 653](#), and for more information on creating the Adjustment Register report, go to [Adjustment Register on page 639](#).
- When creating a report that will display information from a large period, an hourglass appears and then the report displays before the entire report has been processed. When a magnifying glass appears, you will know that the report has finished processing.
- Unapplied Insurance Transfers in the Applied Payment section of the report are previously unapplied insurance amounts that were transferred to the patient's account and applied to open outstanding balances.
- All OfficeMate Administration transactions refer to the original fee slip location where the transactions were recorded.
- Use this report with data that was recorded in OfficeMate, not in a prior system that was then converted to OfficeMate.

Production - Period Comparison

The Production Period Comparison report is a custom report that lists the production for the selected period and the year-to-date total amounts grouped by financial or production report groups. Sales, discounts, adjustments, returns, receipts, and applied payments are displayed on the report. This report can be consolidated in a summary view or created with the product group details,

product details, or patient details displayed. To create the Production Period Comparison report, go to [Creating & Printing Custom Reports on page 570](#).

Production Report - Financial Groups Summary			
9/1/2009 to 9/17/2009			
All Providers, Select Locations			
Product Group	Period		
	Qty	Amount	%
No Region			
Anvi Optical Store			
MOUSE			
Applied Payments			
Applied Payments - Patient			
Cash		(\$72.00)	100.0%
Total Applied Payments - Patient		(\$72.00)	100%
Applied Payments - Insurance			
Other		(\$20.00)	100.0%
Total Applied Payments - Insurance		(\$20.00)	100%
Total Applied Payments		(\$92.00)	
Total MOUSE		(\$92.00)	
Total Anvi Optical Store		(\$92.00)	
AV Store			
Mouse			
Applied Payments			
Applied Payments - Patient			
Debit Card		(\$113.81)	100.0%
Total Applied Payments - Patient		(\$113.81)	100%
Total Applied Payments		(\$113.81)	
Total Mouse		(\$113.81)	
Total AV Store		(\$113.81)	
Costa Mesa Store			
- No Provider -			
Receipts			
Patient Deposits			
Check		\$100.00	33.3%
Credit Card		\$200.00	66.7%
Total Patient Deposits		\$300.00	100%
Total Receipts		\$300.00	
Total - No Provider -		\$300.00	
Donald Duck			
Fees			
Gross Fees			
- Handwritten & No Group -	6	\$600.00	100.0%
Total Gross Fees	6	\$600.00	100%
Total Fees	6	\$600.00	

NOTES

- Discounts and adjustments are grouped by financial or production groups to indicate the amount and percentage of discounts that are being deducted by the group. To view this information by type (for example, insurance discount), create the Production, Discount Register, or Adjustment Register report. For more information on creating the Production report, go to [Production on page 695](#), for more information on creating the Discount Register report, go to [Discount Register on page 653](#), and for more information on creating the Adjustment Register report, go to [Adjustment Register on page 639](#).
- When creating a report that will display information from a large period, an hourglass appears and then the report displays before the entire report has been processed. When a magnifying glass appears, you will know that the report has finished processing.
- Unapplied Insurance Transfers in the Applied Payment section of the report are previously unapplied insurance amounts that were transferred to the patient's account and applied to open outstanding balances.
- All OfficeMate Administration transactions refer to the original fee slip location where the transactions were recorded.
- Use this report with data that was recorded in OfficeMate, not in a prior system that was then converted to OfficeMate.

Production - Provider Comparison

The Production - Provider Comparison report is a custom report that lists the production for the selected period between providers. Sales, discounts, adjustments, returns, receipts, and applied payments are displayed on the report. This report can be consolidated in a summary view or created with the product group details, product details, or patient details displayed. To create the

Production - Provider Comparison report, go to [Creating & Printing Custom Reports on page 570](#).

NOTES

- Discounts and adjustments are grouped by financial or production groups to indicate the amount and percentage of discounts that are being deducted by the group. To view this information by type (for example, insurance discount), create the Production, Discount Register, or Adjustment Register report. For more information on creating the Production report, go to [Production on page 695](#), for more information on creating the Discount Register report, go to [Discount Register on page 653](#), and for more information on creating the Adjustment Register report, go to [Adjustment Register on page 639](#).
- When creating a report that will display information from a large period, an hourglass appears and then the report displays before the entire report has been processed. When a magnifying glass appears, you will know that the report has finished processing.
- Unapplied Insurance Transfers in the Applied Payment section of the report are previously unapplied insurance amounts that were transferred to the patient's account and applied to open outstanding balances.
- All OfficeMate Administration transactions refer to the original fee slip location where the transactions were recorded.
- Use this report with data that was recorded in OfficeMate, not in a prior system that was then converted to OfficeMate.

Production - Year-to-Year Comparison

The Production - Year-to-Year Comparison report is a custom report that lists the production for the selected period and compares production to the prior year and prior year-to-date. Sales, discounts, adjustments, returns, receipts, and applied payments are displayed on the report. This report can be consolidated in a summary view or created with the product group details, product details, or

patient details displayed. To create the Production - Year-to-Year Comparison report, go to [Creating & Printing Custom Reports on page 570](#).

NOTES

- Discounts and adjustments are grouped by financial or production groups to indicate the amount and percentage of discounts that are being deducted by the group. To view this information by type (for example, insurance discount), create the Production, Discount Register, or Adjustment Register report. For more information on creating the Production report, go to [Production on page 695](#), for more information on creating the Discount Register report, go to [Discount Register on page 653](#), and for more information on creating the Adjustment Register report, go to [Adjustment Register on page 639](#).
- When creating a report that will display information from a large period, an hourglass appears and then the report displays before the entire report has been processed. When a magnifying glass appears, you will know that the report has finished processing.
- Unapplied Insurance Transfers in the Applied Payment section of the report are previously unapplied insurance amounts that were transferred to the patient's account and applied to open outstanding balances.
- All OfficeMate Administration transactions refer to the original fee slip location where the transactions were recorded.
- Use this report with data that was recorded in OfficeMate, not in a prior system that was then converted to OfficeMate.

Production Summary by Provider on Fee Slip

The Production Summary by Provider on Fee Slip lists the production summary organized by the provider listed at the top of the fee slip. This report also includes the production category, discounts and adjustments, collections and refunds by the provider recorded on the day's fee slips, today's fees and percentage total, and month-to-date fees and percentage total. Eyefinity suggests creating this report on a daily basis.

- ❖ To create the Production Summary by Provider on Fee Slip report, set the date parameters, select the **By Provider** check box if you want to sort the

report by providers, and select a provider from the **Provider** drop-down menu.

06/27/2009 12:03:26PM		Production Summary by Provider on Fee Slip			
		Selected Date 06/18/2009		For Location: All	
		Today's Amount	% of Total	MTD Amount	% of Total
Fee Summary by Production Group					
Handwritten & No Group		249.99	100.00	12,997.92	93.82
Plastic Frame Fees				280.80	2.03
Soft CL Revenues				575.00	4.15
	Gross Fees Invoiced	<u>249.99</u>	<u>100.00</u>	<u>13,853.72</u>	<u>100.00</u>
Discounts, Adjustments & Returns					
Adjustments				(460.99)	
Returns				<u>(250.00)</u>	
	Total Discounts, Adjustments & Returns	<u>0.00</u>		<u>(710.99)</u>	
Net Fees					
	Net Fees Invoiced	<u>249.99</u>		<u>13,142.73</u>	
Deposits					
Cash				185.00	
Checks				40.00	
Credit Card-American Express				2,537.50	
Debit Card-Master Card				200.00	
Insurance Receipts				<u>604.50</u>	
	Total Deposits	<u>0.00</u>		<u>3,567.00</u>	
Other					
Gift Certificate				300.00	
Money Order				<u>100.00</u>	
	Total Other	<u>0.00</u>		<u>400.00</u>	
Refunds					
Pat Refund of Unapplied Pmt				(10.00)	
	Total Refunds	<u>0.00</u>		<u>(10.00)</u>	
	Net Receipts	<u>0.00</u>		<u>3,957.00</u>	

NOTES

- The Gross Fees Invoiced amount matches the Fee Slip Detail and Production reports.
- The Adjustments amount matches the Adjustment Register and Production reports and the Day Sheet report's Total Adjustments amount.
- The Discount amount matches the Discount Register report.
- The Returns amount matches the Product Return column on the Returns and Refunds report and the Sales Tax on Return amount minus the Discount on Return amount on the Daily Production report.
- The Sales Tax amount matches the Fee Slip Detail and Production reports.
- The Sales Tax on Return amount is also available on the Production report.
- The Net Fees Invoiced amount matches the Production Summary and Fee Slip Detail reports.
- The Deposits amount matches the Day Sheet, Deposit Ticket, and Production reports.
- The Refunds amount matches the Returns and Refunds and Production reports.

Production Summary by Provider on Fee Slip Line Item

NOTE

This report is replaced with the new Production Summary by Provider - Fee Slip Line Item custom report, located on the Custom tab. The Production Summary by Provider - Fee Slip Line Item custom report offers more flexible and, therefore, accurate reporting. For more information, go to [To create and print custom production reports on page 621](#).

Productivity Recap

The Productivity Recap report is a custom report that lists the production for the selected period between locations. Sales, discounts, adjustments, returns, receipts, and applied payments are displayed on the report. Results can be grouped by location then provider or by provider then location. To create the Productivity Recap report, go to [Creating & Printing Custom Reports on page 570](#).

NOTES

- Discounts and adjustments are grouped by financial or production groups to indicate the amount and percentage of discounts that are being deducted by the group. To view this information by type (for example, insurance discount), create the Production, Discount Register, or Adjustment Register report. For more information on creating the Production report, go to [Production on page 695](#), for more information on creating the Discount Register report, go to [Discount Register on page 653](#), and for more information on creating the Adjustment Register report, go to [Adjustment Register on page 639](#).
- When creating a report that will display information from a large period, an hourglass appears and then the report displays before the entire report has been processed. When a magnifying glass appears, you will know that the report has finished processing.
- Unapplied Insurance Transfers in the Applied Payment section of the report are previously unapplied insurance amounts that were transferred to the patient's account and applied to open outstanding balances.
- All OfficeMate Administration transactions refer to the original fee slip location where the transactions were recorded.
- Use this report with data that was recorded in OfficeMate, not in a prior system that was then converted to OfficeMate.

Products Sold

The Products Sold report lists the products that were sold for the entered date range. Eyefinity suggests creating this report on a yearly basis.

- ❖ To create the Products Sold report, set the fee slip date parameters and select a product type from the **Type** drop-down menu.

05/11/2005 3:10:21PM		Contact Lenses Sold										
		Fee Slip Date >= 05/10/2004 Fee Slip Date <= 05/10/2005										
Manufacturer: Specialty CIs												
Vendor: Specialty CIs												
Category: Rigid Bitoric												
Qty	Name	Unit	BC	Dia	Sph	Cyl	Axis	Add	Tint	Product Code	Unit Cost	Extended Cost
2	Bitoric RGP	Each							Handling Tint		45.00	90.00
<u>2</u>												<u>90.00</u>
Manufacturer: Vistakon, Inc. [800-874-5278]												
Vendor: Vistakon, Inc. [800-874-5278]												
Category: Soft Sphere Disposable												
Qty	Name	Unit	BC	Dia	Sph	Cyl	Axis	Add	Tint	Product Code	Unit Cost	Extended Cost
7	Aovue	Pack							Clear		15.99	111.93
1	Aovue	Pack	8.8	14.0	-1.00				Clear	733905100079	15.99	15.99
<u>8</u>												<u>127.92</u>

Provider Listing

The Provider Listing report lists all providers and their details that are setup in the Business Names window. Eyefinity suggests creating this report on demand.

- ❖ To creating the Provider Listing report, select a provider from the **Provider** drop-down menu and select an appropriate **Provider** sort option.

05/11/2005 5:20:37PM		Provider Listing					
Name	Duncan, Tom	Tax Id No.		Type			
Phone		UPIN No.		NPI No.			
Fax		TPA No.		EIN No.			
License		Sub Id		HIPAA Officer	No		
Provider	No	Active	Yes	HIPAA Training	No		
Name	Franklin, Helen	Tax Id No.		Type			
Phone		UPIN No.		NPI No.			
Fax		TPA No.		EIN No.			
License		Sub Id		HIPAA Officer	Yes		
Provider	No	Active	Yes	HIPAA Training	No		
Name	Miller, O.d., Michael	Tax Id No.	66-456872	Type	Solo Practice		
Phone	949 727 7080	UPIN No.	123646	NPI No.			
Fax	949 727 7479	TPA No.	345-454-234	EIN No.			
License	4646-89	Sub Id		HIPAA Officer	No		
Provider	Yes	Active	Yes	HIPAA Training	No		
Name	Ruiz, M.d., Raymond	Tax Id No.	234 33 4556	Type	Corporation		
Phone	(949) 754-5000	UPIN No.	24332	NPI No.			
Fax	(949) 727-7479	TPA No.	TCA23555554	EIN No.			
License	CA89751	Sub Id		HIPAA Officer	No		
Provider	Yes	Active	Yes	HIPAA Training	No		
Name	Thomas, O.d., David	Tax Id No.	454 77 1234	Type	Clinic		
Phone	949 727 7080	UPIN No.	341343	NPI No.			
Fax	949 727 7479	TPA No.		EIN No.			
License	4524245	Sub Id		HIPAA Officer	No		
Provider	Yes	Active	Yes	HIPAA Training	No		

Purchase Order

The Purchase Order report allows you to print or reprint a purchase order. Eyefinity suggest printing or reprinting purchase orders on demand.

- ❖ To print or reprint a purchase order, set the PO date parameters.

Qty	Product Description	Patient	Unit Price	Total
5	101 COACH ASTOR, 679516719302, 52,0,140,52,29,5,54.5, SAND		59.95	299.75
			Total :	\$299.75

05/11/2005 5:27:08PM **Purchase Order**

Ordered By : Helen Franklin 15375 Barranca Pkwy, Bldg L Irvine CA 92618	Purchase Order : 3 Reference No: Account No: Date Issued: 05/09/2005 Office Phone: 800-269-3666
To : Marchon Eyewear, Inc. 35 Hub Drive Melville, NY 11747	Ship To : OfficeMate Software Solutions 15375 Barranca Pkwy, Bldg L Irvine CA 92618

Authorized Signature : _____

Purchase Order - Back Order

The Purchase Order - Back Order report lists back ordered purchase orders. Eyefinity suggests creating this report on demand.

- ❖ To create the Purchase Order - Back Order report, set the back order date parameters.

Vendor	Product	Product Code/UIC	Size	Color	Patient	BO Date	PO No	Qty	Cost	Extended
05/11/2005 5:33:33PM Purchase Order - Back Order Report										
Back Order Date >= 03/07/2001										
Back Order Date <= 06/07/2005										
Marchon Eyewear, Inc.										
	VRLOCK 760/1	679516691691	53,0,140,53,37,5,55,5	GUNMETAL	Dandn Abdul	6/1/2005	4	1	89.95	89.95
									Total Vendor	89.95
									Total Product	89.95

Purchase Order Detailed

The Purchase Order Detailed report lists purchase orders in detail. Eyefinity suggests creating this report on demand.

- ❖ To create the Purchase Order Detailed report, click in the **Vendor Name** text box to select a vendor, select a purchase order status from the **PO Status** drop-down menu, and set the PO date parameters.

Product	Product Code/UPC	Size	Color	Qty Ordered	Qty Received	Cost	Extended Cost Value	Back Order Date	Patient Name		
05/12/2005 9:36:13AM Purchase Order - Detailed All Orders PO Date >= 01/01/2001 PO Date <= 05/11/2005											
Vendor Name: Marchon Eyewear, Inc. Order No: 3 Note: Status: In Process								Order Date: 5/9/2005			
101 COACH ASTOR	679516719302	52,0,140,52,29,5,54,5	SAND	5	3	59.95	299.75				
Vendor Name: Marchon Eyewear, Inc. Order No: 4 Note: Status: In Process										Order Date: 5/11/2005	
LOCK 760/1	679516691691	53,0,140,53,37,5,55,5	GUNMETAL	1	0	89.95	89.95	06/01/2005	Dandan Abdul		
Total Vendor							389.70				
Total Report							389.70				

Purchase Order Summary

The Purchase Order Summary report summarizes purchase orders. Eyefinity suggests creating this report on demand.

- ❖ To create the Purchase Order Summary report, click in the **Vendor Name** text box to select a vendor, select a purchase order status from the **PO Status** drop-down menu, and set the PO date parameters.

Order No	Order Date	Vendor	Status	Total Cost	Note
05/12/2005 9:53:40AM Purchase Order - Summary All Orders PO Date >= 01/01/2001 PO Date <= 05/11/2005					
3	5/9/2005	Marchon Eyewear, Inc.	In Process	\$299.75	
4	5/11/2005	Marchon Eyewear, Inc.	In Process	\$89.95	

Receipts Journal

The Receipts Journal report lists all payments received for the selected posting date range. Payors (individuals or insurance companies) are listed in alphabetic

order and display the date, payment type description, and amount. Eyefinity suggests creating this report on a daily basis.

- ❖ To create the Receipts Journal report, set the posting date parameters.

7/2/2009 2:28:30PM		Receipts Journal					
		Posting Date >= 01/01/2009 Posting Date <= 06/23/2009 Location = Anvi Optical Store					
Payor	Date	Payment Type	Check No	Bank No	Batch No	Amount	
5/28/2009							
Anvi Optical Store							
Aetna	5/28/2009	Check			200915401	25.00	
Smith, James	5/28/2009	Check				5.00	
Total for location: Anvi Optical Store						\$30.00	
Total for : 5/28/2009						30.00	
6/7/2009							
Anvi Optical Store							
Abel, James	6/7/2009	Cash				30.00	
Total for location: Anvi Optical Store						\$30.00	
Total for : 6/7/2009						30.00	
6/17/2009							
Anvi Optical Store							
Aetna	6/17/2009	Check			200916901	5.00	
Total for location: Anvi Optical Store						\$5.00	
Total for : 6/17/2009						5.00	
6/19/2009							
Anvi Optical Store							
Aetna	6/19/2009	Check	5568		200917001	15.00	
Smith, James	6/19/2009	Check	564			127.98	
Rani, Sudha	6/19/2009	Cash				57.00	
Total for location: Anvi Optical Store						\$199.98	
Total for : 6/19/2009						199.98	
Report Total						264.98	

Receiving History

The Receiving History report lists all of the products received within a given time frame by location.

- ❖ To create the Receiving History report, set the date parameters and select a location from the **Location** drop-down menu, as needed.

12/24/2007		Receiving History						
12:51:36PM		Received Date >= 07/01/2007 Received Date <= 12/31/2007 For Location: Fullerton Store						
Vendor Name: Sax								
Order No: 242								
Note:								
Status: None								
Recvd Date	Product	Product Code/UPC	Size	Color	Qty Ordered	Qty Received	Cost	Extended Cost Value
11/19/2007	Blk/Silver Swirls Hdc	600024			2	2	13.00	26.00
11/19/2007	Blue Paisley Buckle E	4424			2	2	10.95	21.90
11/19/2007	Eyeglass Chain BE07	600409		Shiny Gold	2	2	4.95	9.90
11/19/2007	Mirror Purse	600418		Tee-Time	2	2	6.95	13.90
Total Vendor							71.70	
Total Report							71.70	

Re-Do Lab Orders

The Re-Do Lab Orders report displays a list of lab orders that were redone. Eyefinity suggests creating this report on demand.

- ❖ To create the Re-Do Lab Orders report, set the order date parameters.

11/12/2008 11:01:58AM		Re-Do Lab Order							
		Order Date >= 11/12/2006							
		Order Date <= 11/12/2008							
		Type = Eyewear							
		For Location: All							
Patient Name	Order #	Order Date	Re-Do Of (Order #, Date, Recorded by, Provider)		Special Instructions	Recorded by	Reason	Location	
Nicholson, Jack	69	9/24/2008	68	9/24/2008	Not Recorded	Mickey Mouse	Not Recorded	Not Recorded	Aliso Viejo Store
			B2011 Frames		\$90.00				
			B2011 Ophthalmic Lenses		\$65.00				
			B2011 Ophthalmic Lenses		\$65.00				
			Edge Treak-Painted Groove		\$0.00				
			Order Total		\$220.00				
Shambrook, Ted V	85	9/30/2008	40	9/30/2008	Not Recorded	Minnie M. Mouse, C	Not Recorded	Not Recorded	Diane's Dapper
			COACH PENNY 421AF		\$0.00				
			SV PO SV Asph Cr		\$44.50				
			SV PO SV Asph Cr		\$44.50				
			Grizal Alize (AR Coating C)		\$0.00				
			Order Total		\$89.00				
Nicholson, Jack	125	10/8/2008	72	10/8/2008	Not Recorded	Mickey Mouse	This is a redo lab orders	Not Recorded	Not Recorded
			B2011 Frames		\$90.00				
			B2011 Ophthalmic Lenses		\$65.00				
			B2011 Ophthalmic Lenses		\$65.00				
			Order Total		\$220.00				
King, Larry	131	10/8/2008	130	10/8/2008	Not Recorded	Mickey Mouse	Not Recorded	Not Recorded	Grapevine Bouti
			Anita's Frame		\$0.00				
			BF GH170 FT 28 Cr		\$0.00				
			BF GH170 FT 28 Cr		\$0.00				
			Press-on Prism		\$0.00				
			Lab Choice (AR Coating A)		\$30.00				
			Order Total		\$30.00				
Gale, Carl	144	10/17/2008	118	10/17/2008	Not Recorded	Dennis Farina	Not Recorded	Not Recorded	Anita's Optical

Refer to Doctor Tracking

The Refer to Doctor Tracking report lists all of the patients that your practice has referred to outside providers, who referred the patient, the date the patient was referred, the date the patient is or was expected to return to your practice, and the actual date the patient returned. This report is based on information entered on the Patient Exams tab in the Patient Demographic window.

- ❖ To create the Refer to Doctor Tracking report, narrow your results by selecting search criteria, as needed, from the **Location**, **Provider**, and **Referred To Doctor** drop-down menus. You may also type dates in the **Referral Date**, **Expected Return Date**, and **Actual Return Date** fields, and the report will only display results from those dates forward.

1/8/2009 9:03:52AM		Refer To Dr. Tracking			
		Location = [5] Fullerton Store			
Referring Provider	Patient	Referred To	Referral Date	Expected Return	Actual Return
Fullerton Store					
Watson, John	Patient, Sally J	Lane, Ian	12/1/2008	12/11/2009	1/8/2009
Doctor, Johnny	Maugham, W. Somerset	Cat, Cammy	9/14/2008	11/21/2008	

Referrals

The Referrals report lists all referrals to your office and who referred them. Eyefinity suggests creating this report on a yearly basis.

- ❖ To create the Referrals report, select the month the patient was added to OfficeMate from the **Month Patient Added** drop-down menu and select a sort order from the **By** drop-down menu.

05/12/2005 10:31:53AM Referrals by Referring Patient			
Month Patient Added = May			
Referring Patient	Month Referred Patients	Year To Date Referred Patients	Last Year Referred Patients
Ressler, Marqaret		Cole, Harper	
Underwood, Jennifer		Davis, Steven	
Total Referred	0	2	0

Referring Physician Listing

The Referring Physician Listing report lists all of the referring physicians recorded in the Business Names window and their contact information.

8/4/2008 2:19:14PM Referring Physician Listing							
Last Name	First Name	Address	City	State	Zip	Phone	Fax
Bell	Tinker	12345	city	CA	92691		
Carpenter	Kari		Bryantsville	AL			
Chung	Randall	1025 Randolph Blvd	San Jose	CA	94111	(800) 333-4444	(800) 333-4445
Ferguson	Lance						
Kao, M.D.	Wayne	75 Vine Blvd.Suite 100	Los Angeles	CA	91111		
Kobayashi, O.D.	Arthur	960 Center St.Suite 301	Wahiawa	HI	96786	(808) 622-4121	(123) 456-7890
Maggard	Makisha						
Mattson	Clay						
Pate	Rena						
Rich	Richie	789 Fallbrook Rd	Los Angeles	CA	98989	(201) 458-6565	(988) 451-2020
Rich	Suzannah						
Scott	William	789 Medical Center Dr, Building L	Costa Mesa	CA	98777	(949) 785-6565	(949) 785-9699
Velasco, PsyD	Amee	11111 Atlantic Blvd, Suite 321	Alhambra	CA	91111	(800) 333-3333	(800) 777-7777
Wilson	Carrie	45 Medical Dr	Costa Mesa	CA	98898		
xyz	abc						

Returns And Refunds

The Returns And Refunds report lists all returns and refunds by product type, fee slip date, or provider. Eyefinity suggests creating this report on demand.

- ❖ To create the Returns And Refunds report, set the return date parameters, select the **By Provider** check box if you want to sort the report by providers,

select a provider from the **Provider** drop-down menu, and select a product type from the **Product Type** drop-down menu.

05/12/2005 10:50:50AM		Returns And Refunds										
Return Date >= 05/12/2004												
Return Date <= 05/12/2005												
Fee Slip No	Fee Slip Date	Patient Name	Product Returned	Qty	Return Type	Date of Return	Product Return	Refund/Credit	Non-Ref Amount	Refund Method	Recorded By	
65	02/12/2002	Sally Carter	92014	1	Damaged	05/04/2005	75.00	75.00		Discover	Franklin, Helen	
Report Totals							75.00	75.00	0.00			
Refund Total							75.00					
Credit Total							0.00					

NOTES

- The Product Return column total matches the Total Patient Return amount on the Day Sheet report and the Returns amount on the Fee Slip Detail report.
- The Refund Total amount matches the Refund Total amount on the Production Summary by Provider on Fee Slip and Production reports.

Sales Tax

The Sales Tax report lists each item on which sales tax was collected for the selected posting date range. This report includes fee slip numbers, dates, products, amounts charged, tax 1, tax 2, and total tax. Eyefinity suggests creating this report on a daily basis.

- ❖ To create the Sales Tax report, set the posting date parameters and select the **Combine Pat and Ins Tax** to display the combined total of taxes collected on patient payments and taxes collected on insurance payments.

11/12/2008 11:20:13AM		Sales Tax Register										
Posting Date >= 11/12/2008												
Posting Date <= 11/12/2008												
For location: All												
Fee Slip	Date	Product	Patient					Insurance				
			Charge	State	County	Local	Total Tax	Charge	State	County	Local	Total Tax
Covington Eye Designs												
Services												
475	11/12/2008	92014	0.00	0.00	0.00	0.00	0.00	100.00	10.00	0.00	0.00	10.00
Total for 11/12/2008			0.00	0.00	0.00	0.00	0.00	100.00	10.00	0.00	0.00	10.00
Total Services			0.00	0.00	0.00	0.00	0.00	100.00	10.00	0.00	0.00	10.00
Total Covington Eye Designs			0.00	0.00	0.00	0.00	0.00	100.00	10.00	0.00	0.00	10.00
Report Total			0.00	0.00	0.00	0.00	0.00	100.00	10.00	0.00	0.00	10.00

Service Listing

The Service Listing report lists all services and includes names descriptions, CPT codes, fees, costs, and gross profit percentages. Eyefinity suggests creating this report on demand.

- ❖ To create the Service Listing report, select the **Inactive only** check box if you only want to display inactive services.

05/30/2006 1:05:01PM		Services Listing				
Name	Description	CPT	Fee	Cost	GP %	Active
11441	Excision, Benign 0.6-1.0 CM	11441				True
11442	Excision, Benign 1.1-2.0 CM	11442				True
11443	Excision, Benign 2.1-3.0 CM	11443				True
11444	Excision, Benign 3.1-4.0 CM	11444				True
11640	Excision, Malignant 0.5 CM-Less	11640				True
11641	Excision, Malignant 0.6-1.0 CM	11641				True
11642	Excision, Malignant 1.1-2.0 CM	11642				True
11643	Excision, Malignant 2.1-3.0 Cm	11643	150.00	100.00	33.3	True
11643	Excision, Malignant 2.1-3.0 Cm	11643	150.00	100.00	33.3	True
11644	Excision, Malignant 3.1-4.0 CM	11644				True
11646	Excision, Malignant Over 4.0 CM	11646				True
11780	Eye Exam + Refraction	11780				True
12001	Eye Exam / Wears Glasses	12001				True
12011	Repair Wound, Simple 2.5 CM-Less	12011				True
12013	Repair Wound, Simple 2.6-5.0 CM	12013				True
12051	Repair Wound, Inter. 2.5 CM-Less	12051				True
12052	Repair Wound, Inter. 2.6-5.0 CM	12052				True
12053	Repair Wound, Inter. 5.1-7.5 CM	12053				True

Source & Referral Effectiveness

The Source & Referral Effectiveness report shows the number of leads generated by a given marketing category and quantifies the progression of patients from the initial screening through surgery. This report allows you to compare the costs of a given marketing category against the number of services provided to patients associated with that marketing category. The report draws upon the marketing groups that are selected on the Patient Demographic window, the CPT codes billed on the patients' fee slips between the specified dates, and the marketing cost information that is recorded in the Customization window.

- ❖ To create the Source & Referral Effectiveness report, set the order date parameters, select a location, marketing group, screening CPT code, exam

CPT code, and surgery code as needed, and select the **Details** check box to list the patients that were assigned to each marketing category.

NOTE

The beginning and ending entry dates must fall within the same calendar month.

2/10/2008 10:48:31AM		Source & Referral Effectiveness Report										
		Entry Date from 12/01/2008 to 12/31/2008										
		Location:										
		Report Type: Detail										
Marketing Group: Hobbies												
Name	Cost	%	# Leads	%	# Screenings	%	# Exams	%	# Surgeries	%	# Eyes Treated	Cost Per Eye %
Jessica Simpson (949.502.1025)			1		1		1		0		0	
Golf	\$200	26	1	25	1	25	1	25	0	0	0	\$200
Kirstie Pang (888.555.4444)			1		1		1		1		1	
Needpoint	\$50	6	1	25	1	25	1	25	1	33	1	\$50
Diane Clark (800.942.5353)			1		1		1		1		1	
Racquetball	\$200	26	1	25	1	25	1	25	1	33	1	\$200
Kirstie Pang (888.555.4444)			1		1		1		1		1	
Tennis	\$300	40	1	25	1	25	1	25	1	33	1	\$300
Totals	\$750	90	4	100	4	100	4	100	3	99	3	\$750

Statements

The Statements report prints statements for all patients with outstanding balances. Select to print the information on a 30, 60, or 90+ day delinquent statement. This report lists all charges that are still open. A payment coupon is printed on the last page. Eyefinity suggests creating this report on demand.

To create the Statements report, follow the instructions below:

1. Click in the **Patient Name** text box to find and select a patient.
2. Type the **Last Name** selection parameters.
3. Select the **By Family** check box if you want to sort the report by family.

NOTE

If the By Family check box is *deselected*, the following layout changes are displayed in the Statements report:

- All charges, payments, and adjustments related to a fee slip at a specific location are combined under the original fee slip.
- Transfers to and from patients are on a single line.
- Transfer to and from insurance carriers are on two lines.
- Payments split across multiple charges are combined into one payment. Also, the payment method and date are displayed for payments split across multiple charges.
- Insurance carrier abbreviations are used in the description of the insurance carrier.
- An entire fee slip and its associated transactions are displayed before another fee slip is displayed.
- If a fee slip is void, that fee slip and the corresponding credit fee slip are displayed.
- The Credit Card # line now includes a line for the SEC #.

4. Set the **Period end** date parameter, most likely, to the date on which you are printing the Statements (today's date).

NOTE If the Period end date parameter is prior to the date on which you are printing the Statements (today's date), you will most likely be missing payments and new balances on the Statements.

5. Type the dollar amount at which you want to begin displaying balances in the **Display if balance** text box.
6. Type the number of days for which you want to display details in the **Display details (# days)** text box.

NOTE The Statements report can display up to 3650 days of details. If you do not want to display details, type 0.

7. Select the **Print Ins charges/payment** check box if you want to print insurance and patient payment and charge responsibilities.
8. Select the **Print reason for Ins denial** check box if you want to print the reason for an insurance denial.

NOTE Select the Print reason for Ins denial check box if you recorded a transfer from an insurance carrier to a patient.

9. Select a location from the **Location** drop-down menu, as needed.
10. Type a date range in the **Starting Fee Slip Date** text boxes to limit statements to fee slips created within that date range.

11. Select the appropriate **Patient Name** and **ZIP Code** sort order options.

OfficeMate Software Solutions 15375 Barranca Pkwy, Bldg L Irvine, CA 92618		Page: 1	
Statement of Account			
To: Henry A. Mitchell 663 Tressle Way Lake Forest, CA 92630		Date Printed	04/22/2005
		Period Ending	04/22/2005
		Provider Name	Michael Miller, O.D.
		Phone Number	949 727 7080
		License	4646-89
		Tax ID	66-456872
		TPA Number	345-454-234

Fee Slip No	Transaction Date	Qty	Description	Fee Amount	-----Responsible Party-----	
					Insurance	Patient
Henry A. Mitchell						
2	09/20/1998	1	Comprehensive Exam - Est	68.00	54.40	13.60
	05/19/1999		Late Charge	5.00		5.00
14	05/19/1999	1	Exam - Comp New Patient	68.00	54.40	13.60
	05/19/1999	1	Acouflex 225	201.79		201.79
	05/21/1999		Finance Charge			2.60
	05/21/1999		Late Charge	5.00		5.00
20	05/21/1999	1	Comprehensive Exam - Est	68.00	54.40	13.60
	05/21/1999	1	Multipack Acuvue Lenses	32.00	25.60	6.40
24	05/21/1999	1	Comprehensive Exam - Est	75.00		75.00
26	05/22/1999	1	Comprehensive Exam - Est	68.00	54.40	13.60
	05/22/1999	1	F74	237.40	189.92	47.48
	05/22/1999	1	Varilux Progressive	199.34	159.47	39.87
	05/02/1999	1	Anti-reflective Coating	50.00		50.00
	06/02/1999	1	Adjustment: Product Return			(50.00)
28	06/02/1999	1	Comprehensive Exam - Est	75.00		75.00
	06/02/1999	1	Multipack Acuvue Lenses	32.00		32.00
	08/29/1999		Late Charge	3.00		3.00

Statements report created after typing a positive number in the Display details (# days) selection criteria item box and selecting the **Print Ins charges/payment** selection criteria item.

OfficeMate Software Solutions 15375 Barranca Pkwy, Bldg L Irvine, CA 92618	Page: 1	Statement of Account
To: Harper Cole 990 Pleasant Valley Run Laguna Niguel, CA 92653	Date Printed 04/21/2005 Period Ending 04/21/2005 Provider Name Michael Miller, O.D. Phone Number 949 727 7080 License 4646-89 Tax ID 66-456872 TPA Number 345-454-234	

Fee Slip No	Transaction Date	Qty	Description	Fee Amount	-----Responsible Party----- Insurance	Patient
			Harper Cole			
			Previous Balance thru 04/21/2005		432.00	3,821.79
				Total Due:	432.00	3,821.79

Thank you for your confidence and trust.

Patient Aging:	Current	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
	379.32				

Total Due	379.32	Check #		Credit Card #		Code#	
Amount Enclosed		Type		Exp Date		Signature	
Patient/Guarantor Name	Harper Cole		Payment Due	08/21/2002	Patient #	10	

OfficeMate Software Solutions 15375 Barranca Pkwy Building L Irvine, CA 92618	Harper Cole 990 Pleasant Valley Run Laguna Niguel, CA 92653
--	---

Statements report created after typing 0 in the Display details (# days) selection criteria item box.

Stock Status

NOTE

This report is replaced with the new Stock Status custom report, located on the Custom tab. The Stock Status custom report offers more flexible and, therefore, accurate reporting. For more information, go to [To create and print custom inventory reports on page 608](#).

Top Selling Frames - Detail

The Top Selling Frames - Detail report lists the top selling frames. This report includes names, colors, sizes, numbers sold during the period, usual fees, actual

fees charged, costs, profits, and gross profits. Eyefinity suggests creating this report on a monthly basis.

- ❖ To create the Top Selling Frames - Detail report, set the fee slip date parameters and select a manufacturer from the **Manufacturer** drop-down menu.

05/12/2005 12:18:42PM									
Top Selling Frames - Detail									
Fee Slip Date >= 04/12/2005 Fee Slip Date <= 05/12/2005									
Designer	Name	Color	Size	Fee	Actual	Cost	Profit	GP%	Units
Marchon Eyewear, Inc.									
Coach	101 Coach Astor	BLACK	52 140	178.99	178.99	59.95	119.04	66.51	1
Marchon® Collecti	\rlock 760/1	GUNMETAL	53 140	214.99	214.99	89.95	125.04	58.16	1
Total for Marchon Eyewear, Inc.									2
Grand Total					<u>393.98</u>	<u>393.98</u>	<u>149.90</u>	<u>244.08</u>	<u>2</u>

Top Selling Frames - Summary

The Top Selling Frames - Summary report lists the top ten selling frames. This report includes names, numbers sold during the period, usual fees, actual fees charged, costs, profits, and gross profits. Eyefinity suggests creating this report on a monthly basis.

- ❖ To create the Top Selling Frames - Summary report, set the fee slip date parameters and select a manufacturer from the **Manufacturer** drop-down menu.

05/12/2005 12:22:11PM							
Top Selling Frames - Summary							
Fee Slip Date >= 04/12/2005 Fee Slip Date <= 05/12/2005							
Designer	Name	Fee	Actual	Cost	Profit	GP%	Units
Marchon Eyewear, Inc.							
Coach	101 Coach Astor	178.99	178.99	59.95	119.04	66.51	1
Marchon® Collection	\rlock 760/1	214.99	214.99	89.95	125.04	58.16	1
Total for: Marchon Eyewear, Inc.							2
Grand Total			<u>393.98</u>	<u>393.98</u>	<u>149.90</u>	<u>244.08</u>	<u>2</u>

Transfer Ticket

The Transfer Ticker report allows you to reprint the ticket for a specified transfer.

12/24/2007 12:56:11PM		Transfer Ticket							
Transfer Ticket Number : 1118			Date Transferred: 12/07/2007						
Office Phone: (562) 920-3562			Recorded By : Jessica Nguyen						
<table border="1"> <tr><td>Transfer From:</td></tr> <tr><td>Alyssa's Optical 7654 Barranca Pkwy Irvine, CA 92618</td></tr> </table>			Transfer From:	Alyssa's Optical 7654 Barranca Pkwy Irvine, CA 92618	<table border="1"> <tr><td>Transfer To :</td></tr> <tr><td>Aliso's DC 15375 Barranca Pkwy Building L Irvine, CA 94501 Phone: (944) 501-3222</td></tr> </table>			Transfer To :	Aliso's DC 15375 Barranca Pkwy Building L Irvine, CA 94501 Phone: (944) 501-3222
Transfer From:									
Alyssa's Optical 7654 Barranca Pkwy Irvine, CA 92618									
Transfer To :									
Aliso's DC 15375 Barranca Pkwy Building L Irvine, CA 94501 Phone: (944) 501-3222									
Transfer Item No.	Product	Product Code	Size	Color	Reason	Quantity			
19226	aa accessory1111	12341234567890		Wine/Matte Black	Defective Returns	-1			
Received By Signature: _____				Received By Date: _____					

Transferred Unapplied Ins. Amount

The Transferred Unapplied Ins. Amount report displays insurance unapplied amounts and patient credit transfers. You can transfer any insurance unapplied amount to a patient that belongs to that insurance. Eyefinity suggests creating this report on demand.

- ❖ To create the Transferred Unapplied Ins. Amount report, set the transfer date parameters and select an insurance carrier from the **Insurance Co.** drop-down menu.

05/12/2005 12:30:40PM		Transferred Unapplied Insurance Amounts			
Transfer Date >= 01/01/2001 Transfer Date <= 05/12/2005					
Transfer Date	Patient Name	Ins Dep no	Trans Amount	Recorded By	
Medical Eye Services 05/12/2005	Michelle Radmore	16	\$111.00	Franklin Helen	

Unapplied Amounts

NOTE

This report is replaced with the new Unapplied Amounts custom report, located on the Custom tab. The Unapplied Amounts custom report offers more flexible and, therefore, accurate reporting. For more information, go to [Creating & Printing Custom Reports on page 570](#).

Vendor Listing

The Vendor Listing report lists all vendors. This report includes names, addresses, phone numbers, fax numbers, account numbers, and types. Eyefinity suggests creating this report on demand.

- ❖ To create the Vendor Listing report, select a vendor from the **Vendor** drop-down menu and choose appropriate **Vendor** sort order options.

05/12/2005 2:24:56PM		Vendor List	
Name	Alcon 6201 S. Freeway Fort Worth, Texas 76134	Account No	Solutions Manufacturer/vendor
Contact		Type	
Phone 1	800-451-Eyes	Frames?	No
Phone 2		Contact lens?	No
Fax		Blank lens?	No
		Other?	Yes
		Lab?	No
Name	Bausch & Lomb 1400 N. Goodman Street Rochester, New York 14692	Account No	Contact Lens Manufacturer/vendor
Contact		Type	
Phone 1	800-828-9030	Frames?	No
Phone 2		Contact lens?	Yes
Fax		Blank lens?	No
		Other?	Yes
		Lab?	No
Name	Benedict Optical 341 Bennett Lane Lewisville, Texas 75057	Account No	Lens Laboratory
Contact		Type	
Phone 1	800-823-2361	Frames?	No
Phone 2		Contact lens?	No
Fax		Blank lens?	Yes
		Other?	No
		Lab?	Yes

Void Fee Slip Register

The Void Fee Slip Register report lists details from voided fee slips. The details of the report are arranged by the date(s) the fee slips were voided and do not reflect the original sale date(s). Eyefinity suggests creating this report on demand.

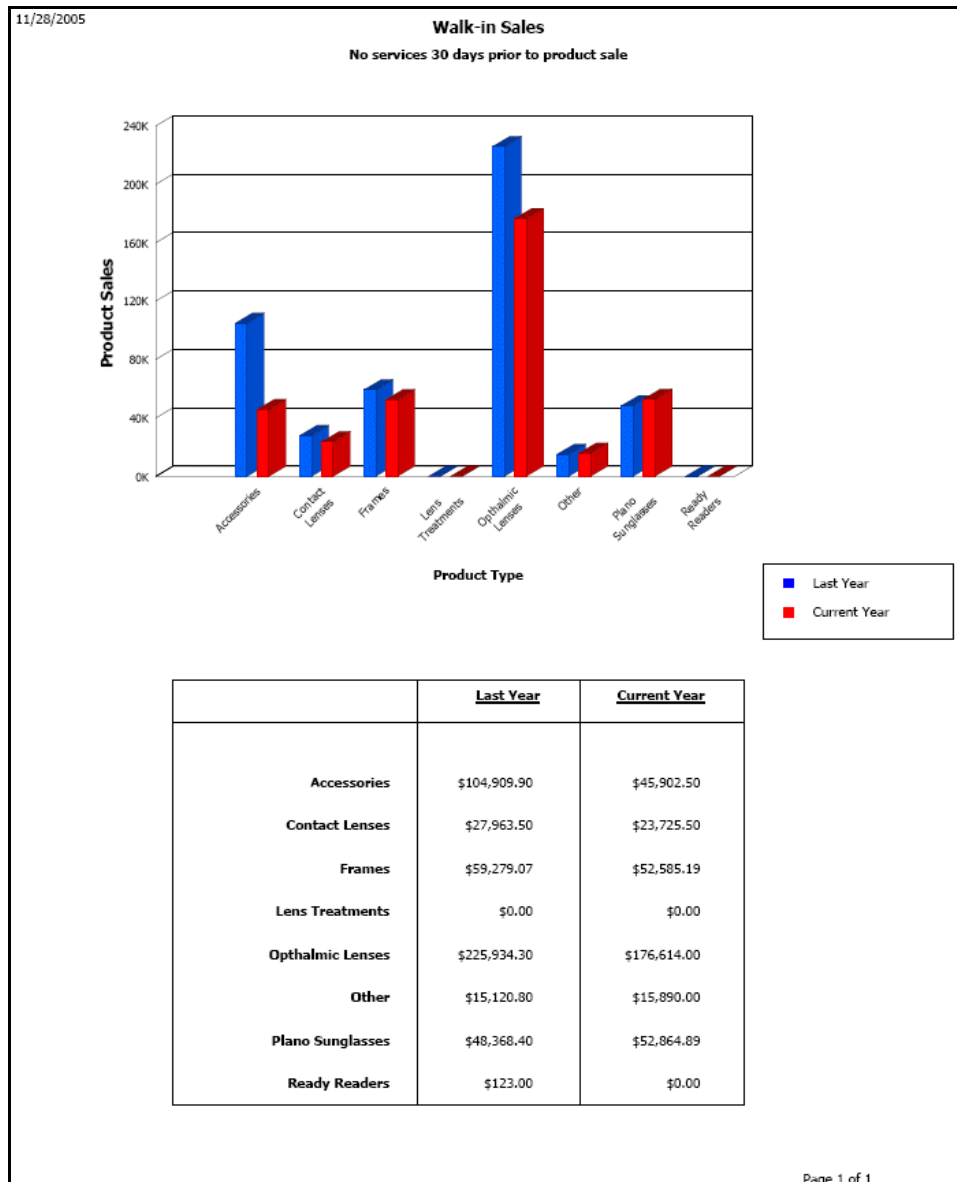
- ❖ To create the Void Fee Slip Register report, set the date voided parameters.

8/13/2008 10:26:22AM		Voided Fee Slip Register				
		Date Voided >= 07/01/2008				
		Date Voided <= 07/31/2008				
Fee Slip	Fee Slip Date	Patient	Date Voided	Amount	Recorded By	Type
Location: Edith's Store						
8774	07/08/2008	Brown, Sally	07/08/2008	50.01	Santiago, Edith	Void
8806	07/09/2008	Shields, Brook	07/09/2008	60.00	Santiago, Edith	Void
8889	07/17/2008	Arias, Sally R.	07/17/2008	100.00	Santiago, Edith	Void
8901	07/17/2008	Lee, Jason A	07/17/2008	145.49	Santiago, Edith	Void
8902	07/17/2008	Lee, Jason A	07/17/2008	145.49	Santiago, Edith	Void
8987	07/23/2008	Shaw, Paul W	07/24/2008	285.00	Brookter, Anita	Void
8988	07/24/2008	Shaw, Paul W	07/24/2008	218.98	Brookter, Anita	Void
8989	07/24/2008	Shaw, Paul W	07/24/2008	-285.00	Brookter, Anita	Credit Memo
9030	07/28/2008	Ferrel, William A	07/28/2008	18.00	Santiago, Edith	Void
9032	07/28/2008	Ferrel, William A	07/28/2008	220.49	Santiago, Edith	Void

Walk-in Sales

The Walk-in Sales report displays a count of retail sales only. A sale is a retail sale if there were no services for the patient within a given number of days.

- ❖ To create the Walk-in Sales report, type the number of days for which no service was provided in the **No Services for (# days)** text box and select a time period from the **Period for Comparison** drop-down menu.



In this chapter:

- [Understanding the Terminology, 720](#)
- [Setting up the Secure Messaging Portal, 721](#)
- [Logging into the Secure Messaging Portal, 729](#)
- [Giving Patients Access to their Clinical Data, 729](#)
- [Understanding Patient Access, 734](#)
- [Sending Clinical Information to another Provider, 740](#)
- [Managing Your Own Provider Portal Account, 743](#)
- [Managing Other Provider Portal Accounts, 746](#)
- [Managing Patient Portal Accounts, 751](#)

For more information on sending secure messages, watch the “[Secure Messaging/Patient Portal](#)” video.

The secure messaging portal enables you to give patients secure access to their health records, send patient data to a receiving provider during a transition of care, and send and receive secure messages.

The secure messaging portal also allows you to set up a secure mailbox for each provider in your practice. The mailbox, or provider portal, is similar to many web-based email programs. Messages look like email messages and patient records look like email attachments. The closed architecture of the system makes it secure and HIPAA compliant; however, messages that you receive from patients are not completely private; any provider in your practice may see them.

Under- standing the Terminology

While secure messages bear a resemblance to email, the two are not compatible. Understanding the technical differences between the two is not necessary, but it is important to understand some of the terminology used to distinguish secure messages. Use the table below to learn a few important terms.

Term	Definition
direct	<i>The protocol used to send secure messages. You may sometimes see secure messages referred to as direct messages.</i>
patient portal	<i>The patient's inbox. The patient portal is a web application that allows the patient to view his or her latest clinical summary, download the summary or send the summary via secure message to another provider. The patient can also send secure messages to and receive secure messages from the practice provider.</i>
provider portal	<i>The provider's inbox. The provider portal is a web application allows the provider to send secure messages to patients and other providers, see any message sent by a patient to the practice, and see any secure message sent directly to the provider.</i>
secure message	<i>An encrypted message sent from a person with a verified security certificate. The message may contain a health-related question or a clinical summary.</i>
security certificate	<i>An invisible electronic certificate that shows that a message came from a verified source. Obtaining a security certificate is a one-time process that verifies your practice account was established by a real person.</i>

Setting up the Secure Messaging Portal

The secure messaging portal enables you to set up a secure mailbox address for each provider in your practice. The secure mailbox addresses are significantly different than the insecure email addresses your providers already have.

You can set up the secure messaging portal directly within OfficeMate. There are three basic steps required to set up the portal:

1. Configure the portal.
2. Register users.
3. Register the practice.

The portal is set up for your entire practice regardless of how many offices operate within your practice. This section tells you how to set up the secure messaging portal, including how

- [To open the Secure Messaging Portal Setup window, 721](#)
- [To edit practice portal information, 722](#)
- [To edit practice hours, 724](#)
- [To edit provider portal settings, 724](#)
- [To save the portal settings and register, 725](#)
- [To establish provider direct mailbox passwords, 727](#)
- [To establish a direct messaging security certificate, 728](#)

NOTE

Here are some tips to help you configure the portal and add provider accounts. These tips also appear throughout the instructions in this section.

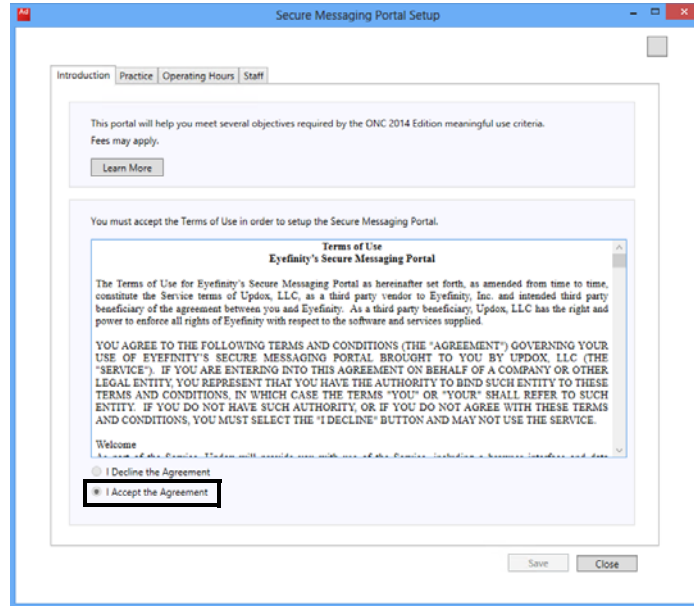
- Choose a standard naming convention for the Direct Mailbox that identifies the provider. Here are some suggestions:
 - First initial, last name (e.g., *jdoctor*)
 - First name, period, last name (e.g., *johnny.doctor*)
- Use your email address as your temporary administrator user name. If you forget your administrator password, instructions on how to reset it will be sent to your email address. You can also open the Secure Messaging Portal Setup window and click on the Staff tab to view your administrator password.
- Choose a standard temporary password for all providers and staff.
- Send an email to each provider detailing the URL of the provider portal, and their username, temporary password, and direct mail address.

► To open the Secure Messaging Portal Setup window

1. In OfficeMate Administration, click **Setup**.
2. Select **ExamWRITER** and select **Setup Secure Messaging Portal**.

The Secure Messaging Portal Setup window opens and displays important information about the costs associated with the portal.

3. Click **Learn More** to find out about the different pricing options for secure messaging.
4. Click the **I Accept the Agreement** radio button.



► To edit practice portal information

1. Open the Secure Messaging Portal Setup window. For more information, go to [To open the Secure Messaging Portal Setup window on page 721](#).
2. Click the **Practice** tab.
The first time the Practice tab opens, it displays the practice information that appears on the Business Names window.
3. Edit the practice information as needed.

NOTES

- Fields marked in red contain errors. You need to correct these errors before you can save the practice information.
- The practice information appears on the portal page for your patients to see.
- Editing the information on this window does not change the information on the Business Names window. To change the information on the Business Names window, contact Eyefinity at 800.942.5353.
- If you are part of a multilocation practice, enter the information for the home office.

4. Type the first 5 digits of the practice's **ZIP Code**.
5. Type the practice's 10-digit **Phone Number** and **Fax Number** without dashes, parentheses, spaces, or other characters.
6. Type the practice's general-purpose **Email Address**. This email address appears on the portal page with the practice's contact information.
7. Select the **Time Zone** of the practice's home office.

8. Type a brief description of your practice in the **About Us Text** field.
9. Type a **Direct Subdomain** that identifies your practice.

NOTES

- The direct mail address consists of a mailbox, a subdomain, and a domain. Your direct mail addresses will look similar to this:

johnnydoctor@joeseyecare.eyefinitydirect.com

mailbox
subdomain
domain

- The mailbox portion of the address is setup on the Staff tab. The mailbox identifies the individual provider. Once this is set, you cannot change it, even if the provider's name changes.
- The subdomain identifies your practice. Once this is set, you cannot change it, even if the practice name changes.
- The domain identifies the secure messaging platform. This cannot be customized.
- The subdomain may contain alphanumeric characters only and is not case sensitive. Do not use spaces. After you establish the subdomain, do *not* change it, as changing it will adversely affect your meaningful use counts.
- The direct mail address is long; however, patients will not need to type it to send you secure messages.

Secure Messaging Portal Setup

Introduction | Practice | Operating Hours | Staff

This information appears on the portal page for your patients. If you are a multilocation practice, enter the info for the home office.

Practice Name:

Address1:

Address2:

City: State:

Zip Code:

Phone Number:

Fax Number:

Email Address:

Time Zone:

About Us Text:

Direct Subdomain:

Note: The Direct Subdomain name will be used as part of the direct email address, immediately following the @.
For example, in the direct email address jsmith@familyoptics.eyefinitydirect.com, "familyoptics" is the subdomain.

- Select a subdomain name that reflects the name of your practice.
- Type the subdomain name as one word with no spaces or special characters.
- Once saved, the subdomain name cannot be changed.

Save Close

10. Continue to [To edit practice hours on page 724](#).

► **To edit practice hours**

NOTE

The hours of operation appear on the practice's portal page. The hours are informational only and are not required to use the secure messaging portal.

1. Open the Secure Messaging Portal Setup window. For more information, go to [To open the Secure Messaging Portal Setup window on page 721](#).
2. Click the **Operating Hours** tab.
3. Select the **Start** and **End** times for each day the practice is open.

	Start	End
Monday Hours	08:00 AM	05:00 PM
Tuesday Hours	08:00 AM	05:00 PM
Wednesday Hours	08:00 AM	05:00 PM
Thursday Hours	08:00 AM	05:00 PM
Friday Hours	08:00 AM	12:00 PM
Saturday Hours		
Sunday Hours		

Operating hours for the practice appear on the patient portal web pag

Save Close

4. Continue to [To edit provider portal settings on page 724](#).

► **To edit provider portal settings**

1. Open the Secure Messaging Portal Setup window. For more information, go to [To open the Secure Messaging Portal Setup window on page 721](#).
2. Click the **Staff** tab.

The tab displays providers listed in the Resources Setup window.

NOTES

- Once you save a provider's First Name, Last Name, and Direct Mailbox, you should not edit this information in the portal.
- Set up a direct mail box for each provider in the practice. Multiple providers cannot share a direct mailbox.

3. Select the **Direct Enabled** check box for each provider who needs a secure mailbox. Deselect the check box for any provider who has left the practice.

4. Type a **Direct Mailbox** name for each provider for whom the Direct Enabled check box is selected.

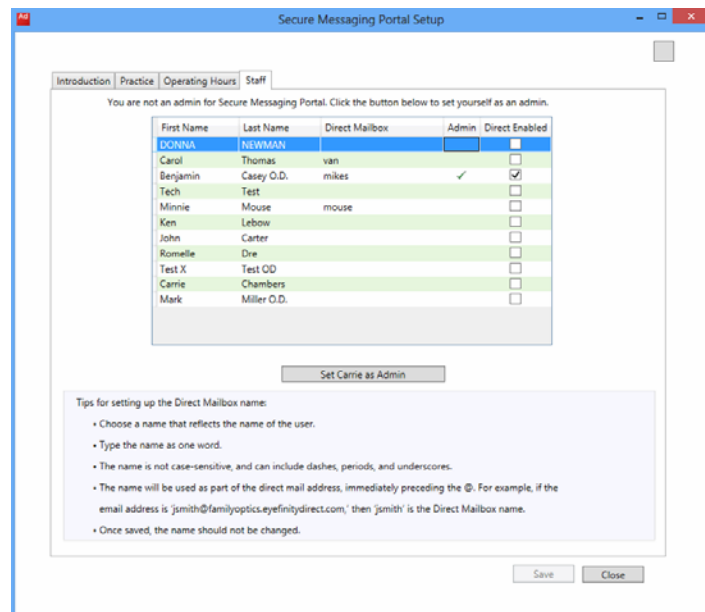
NOTE

- Choose a standard naming convention for the Direct Mailbox that identifies the provider. Here are some suggestions:
 - First initial, last name (e.g., *jdoctor*)
 - First name, period, last name (e.g., *johnny.doctor*)
- Direct Mailbox names are not case sensitive and can include underscores, dashes, and periods. Do not use spaces.
- Once this is set, you should not change it.

5. If you are not already set up as an administrator and want to set yourself up as someone who will have administrative rights to change the portal settings, click the **Set 'User' as Admin** button.

NOTES

- Assign admin rights to the people who will be setting up and maintaining the portal settings. Most likely, this will be the office managers.
- If you are already assigned administrator rights and you no longer want to be an administrator, click the **Set 'User' as Regular User** button to remove your administrative rights.



6. Continue to [To save the portal settings and register on page 725](#).

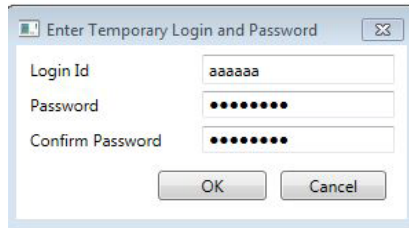
► **To save the portal settings and register**

1. Open the Secure Messaging Portal Setup window. For more information, go to [To open the Secure Messaging Portal Setup window on page 721](#).
2. Edit or update the information on the Practice, Operating Hours, and Staff tabs as needed.

3. Click **Save**.

If you have previously saved your portal settings and established an administrator user name and password, go to [To establish provider direct mailbox passwords on page 727](#).

If this is the first time you have saved your portal settings, you're prompted to enter an email address as a temporary admin username and a password.

4. Type your **Email Address**.**NOTE**

Your email address will be used as your username to log in and set up the provider portal. This email address may also be used to recover your admin password.

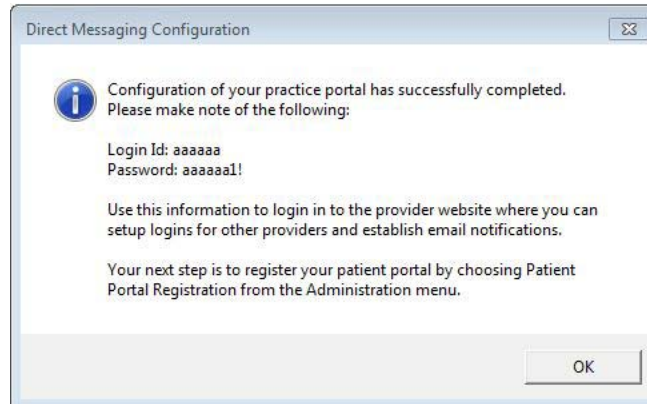
5. Choose a **Password**. Re-enter the password and click **OK**.**NOTES**

- The password you enter here will be used to log in and set up the provider portal, and is not the password to your email account.
- The email address and password are used to create an administrator account for the secure messaging portal. You will use this account to create initial passwords for each of your providers.

The information is transmitted to the portal. The portal checks to see if your subdomain is available and sets up your practice's account. If your subdomain is already taken you will need to choose another one.

- Note the username and password that you entered. You will need this information to initiate the providers' passwords.

NOTE If you forget the username and password, you can open the Secure Messaging Portal Setup window and click on the Staff tab to view this information.



- Continue to [To establish provider direct mailbox passwords on page 727](#).

► To establish provider direct mailbox passwords

Whether you're setting up your practice for the first time or adding a provider to your staff, you need to establish an initial password for the provider's account.

- Open your web browser and go to <https://eyefinityew.com>.
- Log in with an administrator's username and password.

NOTE The administrator usernames and passwords were established when the portal was initially setup. After the providers' passwords are initiated, the providers selected as admins will also be able to administer the portal. If you forget your username and password, you can open the Secure Messaging Portal Setup window and click on the Staff tab to view this information.

- Click **Configure** (gear icon) and select **Manage Users**.
- Follow the on-screen instructions to establish the providers' logins and passwords.

NOTES

- Passwords must be at least 8 characters and contain at least one number and one special character.
- Choose a common temporary password to make communicating account information with providers easier.

- Notify the providers individually of their user names and passwords.
- If this is the first time you have setup the secure messaging portal, continue to [To establish a direct messaging security certificate on page 728](#).

► **To establish a direct messaging security certificate**

Obtaining a security certificate is a one-time process for your entire practice that verifies your account was established by a real person.

1. Log into Administration as a person who is assigned the admin role.

NOTE

You can verify which people are assigned the admin role on the Staff tab of the Secure Messaging Portal Setup window.

2. Click **Setup**, select **ExamWRITER**, and select **Launch Practice Registration**.

The Practice Registration page opens.

3. Follow the on-screen instructions to verify your practice's identity.

NOTE

The certificate process requires that you authenticate the identity of a provider in your practice.

- Enter your Individual Provider NPI number *or* SSN in the Government ID section.
- Enter a home or cell phone number for an automatic call back with a confirmation code, answer knowledge questions, *or* enter a valid personal credit card number in the Financial/Utility ID section. If you enter a credit card number, the name on the credit card must be the same as the provider name associated with the government ID. The credit card will not be charged; it is used only to establish the provider's identity.

This authentication helps the system establish that you are a real person before issuing a secure certificate.

The certificate should take only a few minutes to process. While the certificate is processing, providers can send messages to patients within the practice, but they cannot send messages to providers outside of it.

► **Checking the security certificate status**

Usually, the system processes your security certificate in a matter of minutes. Occasionally, the process may take a few hours. While the certificate is processing, providers can send messages to patients within the practice, but they cannot send messages to providers outside of it. To check the status of your practice's security certificate, perform the following steps:

1. In Administration, click **Setup**, select **ExamWRITER**, and select **Check Practice Vetted Status**.

The Direct Messaging Status dialog box opens and displays the status of your practice's security certificate.

2. Click **OK**.

Logging into the Secure Messaging Portal

The secure messaging provider portal looks like many web-based email programs. There are, however, some notable differences:

- You will see the messages sent to all providers in your practice. While the message you send are secure, they are not private. Other providers in your practice will see your messages.
- You can send messages only to other providers who have a secure direct messaging account. These accounts are different than their standard email addresses. You cannot send a secure message to a insecure email address.

To log in, perform the following steps:

1. Open your web browser and go to <https://eyefinityew.com>.
2. Log in with your username and password.

NOTES

- Your initial password was established by the person who initiated your account. If you forget your username and password, you can open the Secure Messaging Portal Setup window and click on the Staff tab to view this information. You can change your password by logging into the portal, clicking **Menu, Tools**, and then selecting **Change Password**.
- For more information about managing your account, go to [Managing Your Own Provider Portal Account on page 743](#).

The screenshot shows a login form with the following elements:

- Username:** A text input field with a person icon on the left and a small asterisk icon on the right.
- Password:** A text input field with a lock icon on the left, a small asterisk icon on the right, and a "Forgot password" link to the right of the field.
- LOGIN:** A dark rectangular button centered below the input fields.

Once you are logged in, you can review and send secure messages.

Giving Patients Access to their Clinical Data

You can give patients access to their clinical summary information through the secure messaging portal. In most cases, you will want to provide patients access to their clinical summary immediately to satisfy meaningful use requirements. Additionally, inform your patients that they will receive an email with instructions for accessing their clinical summary and encourage them to do so.

This section tells you how to give a patient access to his or her clinical data, including how

- [To create a clinical summary document, 730](#)
- [To preview the clinical summary document, 732](#)
- [To send the clinical summary to the patient, 733](#)

NOTE

You can also send .RTF (rich text format) files through the secure messaging portal that patients can view in their portals. Sending these file types, however, will not satisfy meaningful use requirements.

► To create a clinical summary document

1. Open the patient's exam.
2. Click **Patient Hx**.
3. Click the **Demographics** tab and verify the patient's **Name, Date of Birth,** and **E-Mail Address**.

NOTE

Patients are not required to have e-mail addresses recorded in the Patient Demographics window in order for you to send them secure messages and for them to view the in the patient portal. If the patient does not have an e-mail address, you will have to go to the provider portal and print out the patient's portal access information to give to them.

4. Click the **eDocuments** tab.
5. Select the **Clinical Summary (open exam)** radio button.
6. Select the **Patient Requested** check box.

7. Click **Create CDA**.

The screenshot shows the 'EW Patient Information Center' window for 'Patient, John', age 34. The 'eDocuments' tab is active. Below the navigation tabs, there are options to 'Send To' (Patient or Provider) and 'Display Documents from' (All Exams or This Exam Only). A 'Secure Send' button is visible. The main area contains a table titled 'Patient Electronic Documents' with columns: Date, Entered By, Type, Notes/Source, Exam No, Link, and IR Link. At the bottom, the 'Clinical Document Exchange [HU]' section is expanded, showing 'Clinical Summary (open exam)' selected and 'Patient Requested' checked. The 'Create CCR' button is highlighted with a red box. The 'Create CDA' button is also highlighted with a red box. The 'Encrypt Document' section includes 'Save to' and 'Encryption Key' fields, and an 'Upload to HIE' button. An 'Exit' button is at the very bottom.

The Edit Clinical Summary window opens. The Original Document section reflects all of the data in the clinical summary that is capable of being shared with the patient. The Final Document section reflects only the data that you have selected to share with the patient. By default, all of the data is selected.

8. To exclude certain data, deselect the appropriate check boxes in the **Original Document** section.

NOTE

You may also deselect the check boxes in the Final Document section, but if you need to reselect them, you will need to select the check boxes in the Original Document section.

The screenshot shows the 'Edit Clinical Summary' window. It is divided into two main sections: 'ORIGINAL DOCUMENT' and 'FINAL DOCUMENT'. Both sections contain the same patient information and exam details. In the 'ORIGINAL DOCUMENT' section, the 'PROBLEMS' section has a checkbox for 'Problem: Diphtheritic conjunctivitis' which is unchecked. In the 'FINAL DOCUMENT' section, the 'PROBLEMS' section is not visible, indicating it was deselected. The 'MEDICATION ALLERGIES' section in both has a checked checkbox for 'Allergen: Ability | Rx Norm | Reaction: DRY THROAT | Status: Active'. The 'PROCEEDURES' section in the final document has a checked checkbox for 'Procedure: Photography-External | CPT: 92285 | Snomed Code | Recorded Date: 1/21/2014'. The 'RECOMMENDED PATIENT DECISION AIDS' section in the final document has two decision aids, both with checked checkboxes.

Figure 14-6: The Edit Clinical Summary window enables you to select which clinical data you want to include in the file. Notice that Problems is deselected in the Original Document, so it no longer appears in the Final Document.

9. Once you have selected only the data that you want to send the patient, click **Save**.
10. Click **OK** to dismiss the success message.

The Patient Electronic Documents list refreshes and displays the clinical summary document that you created at the top.

► **To preview the clinical summary document**

1. Double-click the clinical summary document in the Patient Electronic Documents list.

The eDocuments Information window opens.

2. Click **View**.

The CDA Viewer window opens and displays the clinical summary as the patient would see it.

- Click the links in the **Table of Contents** to navigate the clinical summary as needed.

Clinical Visit Summary

Patient	John Patient		
Date of birth	January 13, 1980	Sex	Male
Race		Ethnicity	Not Hispanic or Latino
Language	eng	Patient IDs	
Contact info	Irvine, CA 92606 Telecom information not available.		
Document Id	0896b207-57ac-432a-84bb-7622e3f4fd2a		
Document Created:	January 28, 2014, 10:56:10		
Author	Johnny Doctor, OfficeMate Software Solutions		
Contact info	38 Discovery Irvine, CA 92618 Tel: (949) 390-8320		
Encounter Id	45447c0e-0e28-46c6-b14c-f088904c50d		
Encounter Date	From January 21, 2014		
Encounter Location	OfficeMate Software Solutions 38 Discovery Irvine, CA 92618 Telecom information not available.		
Document maintained by	OfficeMate Software Solutions		
Contact info	38 Discovery Irvine, CA 92618 Tel: (949) 390-8320		

Table of Contents

- Chief Complaint / Reason for Visit
- Social History
- Active Medications
- Allergies, Adverse Reactions, Alerts
- Immunizations
- Clinical Instructions and Patient Decision Aids
- Vital Signs
- Problem List
- Laboratory Tests and Values / Results
- Procedures
- Administered Medications
- Functional and Cognitive Status
- Plan of Care

- Click the **x** to close the window when you're finished.

► **To send the clinical summary to the patient**

- Select the clinical summary from the **Patient Electronic Documents** list.
- Select **Patient** from the **Send To** radio buttons.
- Click **Secure Send**.

EW Patient Information Center

Patient: **John Patient** Age: **34** Patient last dilated on: [Enter Lab Results] [Immunization]

Demographics Exam Hx Glaucoma Elements Med/Surgical Hx Spectacle Rx Contact Lens Rx eDocuments Correspondence Hx Vital Signs

Send To: Patient Provider

Display Documents from: All Exams This Exam Only [Show eDocs]

Import CDA - Lab Results [Secure Send] [View] [Print List] [Add] [Delete]

Date	Entered By	Type	Notes/Source	Exam No	Link	IR Link
01/28/2014 10:56 am	Doctor Johnny	CDA Export - Clinical Summary		56	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
01/27/2014 2:24 pm	Doctor Johnny	Patient Health History CCR	Patient Health History CCR Export (Patient Requested)	56	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
01/21/2014 1:38 pm	Doctor Johnny	Anterior Seg pictures		56	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Clinical Document Exchange [MU]
 Clinical Summary (open exam) Patient Requested [Create CCR]
 Patient Health History Provider: Doctor, Johnny [Create CDA]

Encrypt Document
 Save to: [...]
 Encryption Key: [Encrypt] [Upload to HIT]

[Exit]

Under- standing Patient Access

4. Click **OK** to dismiss the message confirmation.
The patient will receive an email explaining that new records are available from your practice. If the patient has not logged into the secure messaging portal before, he or she will receive a second email explaining how to log in for the first time. If the patient does not have an e-mail address, go to the provider portal and print out the patient's portal access information to give to them.
5. Encourage the patient to log into the portal and review the clinical summary.

This section is intended to help you understand what the patient sees when he or she receives a clinical summary or secure message from you. Because meaningful use Stage 2 measures count whether a patient actually views the clinical summary, you will need to encourage patients to view their records within a few days.

Refer to the following topics if a patient asks a question about the secure messaging portal:

- [Activating the Patient Account, 734](#)
- [Changing Patient Account Settings, 736](#)
- [Viewing Clinical Summaries, 736](#)
- [Sending Clinical Summaries to Other Providers, 738](#)
- [Downloading Clinical Summaries, 739](#)
- [Sending Secure Messages, 739](#)

NOTE

If the patient does not receive the activation email or is locked out of the patient portal, you may reset the patient's password and send a new activation. For more information, go to [Managing Patient Portal Accounts on page 751](#).

Activating the Patient Account

OfficeMate uses the patient's name, date of birth, and email address to create the secure messaging account. Verify this information on the Demographics tab before sending a clinical summary. To create a patient's account, you must send a clinical summary.

NOTE

Patients are not required to have e-mail addresses recorded in the Patient Demographics window in order for you to send them secure messages and for them to view the in the patient portal. If the patient does not have an e-mail address, you will have to go to the provider portal and print out the patient's portal access information to give to them.

The first time you send a patient a clinical summary, the patient will receive two emails: the first email notifies the patient that a document is available to review, and the second tells the patient how to activate an account.

To activate the account, the patient must complete the following steps:

1. Click the link in the activation email.

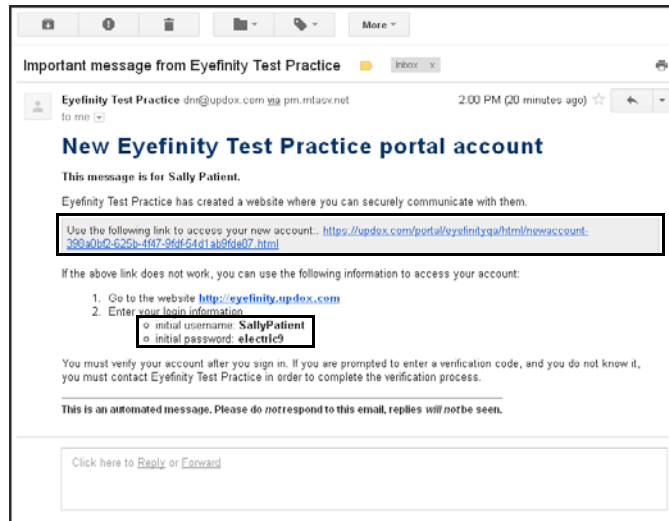
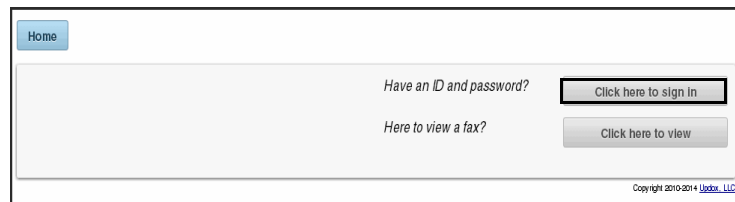
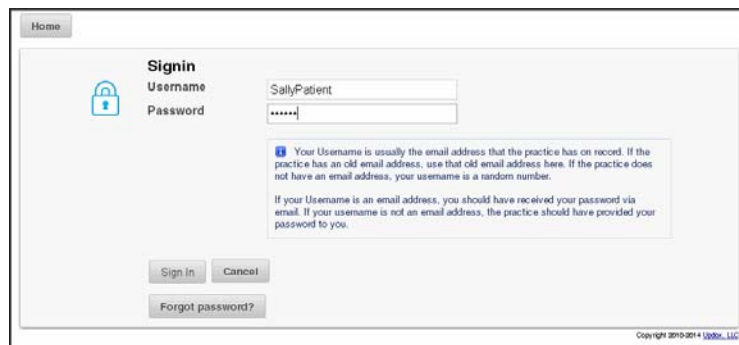


Figure 14-7: The activation email includes a unique link for the patient to activate a secure messaging account. The email also includes a username and initial password.

2. Click **Click Here to sign In**.



3. Type the **Username** and **Password** that were indicated on the activation email and click **Sign In**.



- For added security, type your **Date of Birth** and click **Verify**.

Changing Patient Account Settings

The first thing the patient should do when after activating the account is change the settings under My Profile.

- Click **My Profile**.
- Edit the **User Name**, **Email Address**, and **Password** as needed.
- Click **Update**.

Figure 14-8: Changing the settings under My Profile is not required, but patients can enhance the security of their own records by changing their usernames and passwords.

Viewing Clinical Summaries

Patients may view clinical summaries under the Records tab. When a patient views a clinical summary, it is reflected in the provider's meaningful use Stage 2 report. To view the clinical summary, the patient must perform the following steps:

- Click the **Records** tab.
The Records tab displays the most recent clinical summaries.

- Click **View**.

Home Messages **Records** Sally Patient
Send Message | My Profile | Sign Out

My Records

Continuity of Care Documents (CCD) and Continuity of Care Records (CCR) are two different file formats for representing patient health data. They are often used when transferring patient information from one computer system to another.

Your records are typically available in 2 formats:

- as a data file (in XML format), which you can download and provide to other practices or upload to a personal health record (such as Microsoft HealthVault)
- as a human readable report (in HTML format), which you can read yourself

Message from your doctor:
Please find attached the Clinical Summary for your latest exam

Continuity of Care Document (CCD) Eyefinity Test Practice has not yet provided a CCD record for you.

Continuity of Care Record (CCR) Eyefinity Test Practice has not yet provided a CCR record for you.

Consolidated Clinical Document Architecture (CCDA) **View** Download text Download data Transmit
from 2014-02-13 2:00:19 pm

Continuity of Care Document - C32 Standard (C32) Eyefinity Test Practice has not yet provided a C32 record for you.

[Display audit trail](#)

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The clinical summary opens in a new tab.

Clinical Visit Summary

Created On: February 13, 2014

Patient: Sally Patient	MRN:
Birthdate: September 14, 1982	Sex: Female
Guardian:	Next of Kin:

Table of Contents

- [Chief Complaint / Reason for Visit](#)
- [Social History](#)
- [Active Medications](#)
- [Allergies, Adverse Reactions, Alerts](#)
- [Immunizations](#)
- [Clinical Instructions and Patient Decision Aids](#)
- [Vital Signs](#)
- [Problem List](#)
- [Laboratory Tests and Values / Results](#)
- [Procedures](#)
- [Administered Medications](#)
- [Functional and Cognitive Status](#)
- [Plan of Care](#)

Chief Complaint / Reason for Visit
No chief complaints / reasons for visit to show.

Social History
No social history to report.

Active Medications
No medications to show.

Allergies, Adverse Reactions, Alerts
No medical allergies to show.

Immunizations

- Click the links in the table of contents as needed to jump to different sections of the clinical summary.

Sending Clinical Summaries to Other Providers

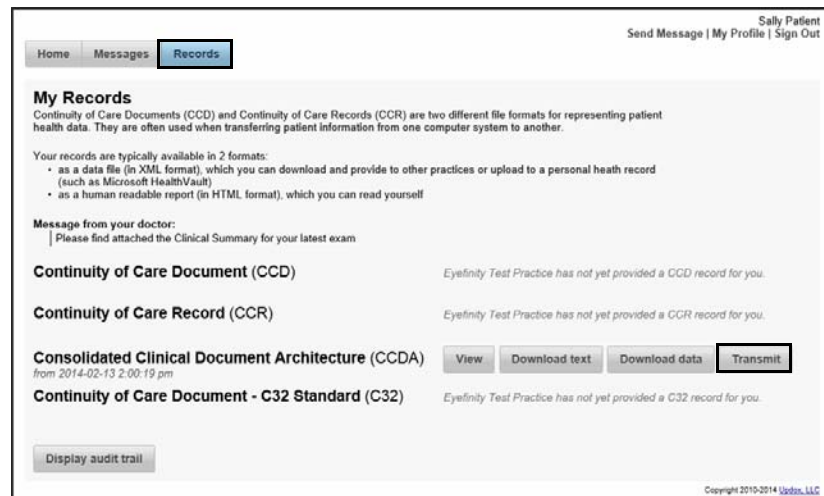
Patients may transmit their clinical summaries to other providers. When a patient transmits a clinical summary, it is reflected in the provider's meaningful use Stage 2 report.

NOTES

- The recipient must have a direct email address. The clinical summary cannot be sent to conventional email addresses.
- Your practice must have established a security certificate before the patient will be able to transmit clinical summaries to other providers. For more information about this one-time process, go to [To establish a direct messaging security certificate on page 728](#)

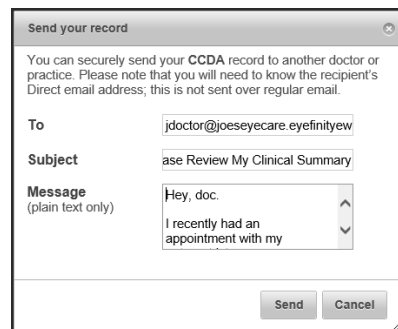
To transmit the clinical summary, the patient must perform the following steps:

1. Click the **Records** tab.
2. Click **Transmit**.



The Send Your Record window opens.

3. Type the recipient's direct email address in the **To** field. If the recipient does not have a direct email address, the clinical summary will not be sent.
4. Type a **Subject** and a **Message** and click **Send**.



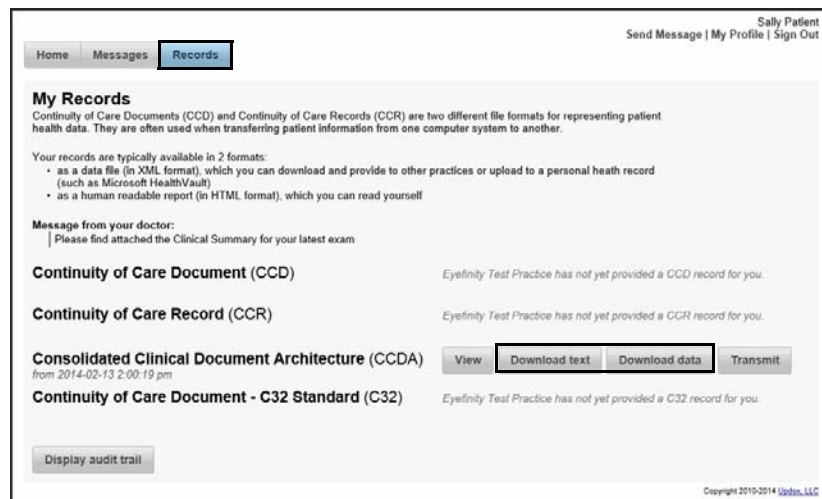
Downloading Clinical Summaries

Patients download their clinical summaries to their computer. When a patient downloads a clinical summary, it is reflected in the provider's meaningful use Stage 2 report. To download the clinical summary, the patient must perform the following steps:

1. Click the **Records** tab.
2. Click **Download Text** to download a styled clinical summary that looks like the clinical summary you see when you click View.

OR

Click **Download Data** to download an unstyled data file.



Sending Secure Messages

1. Click **Send Message**.
2. Type the **Subject** and the **Message** and click **Send**.



The message is sent to the provider.

Sending Clinical Information to another Provider

You can send clinical information via direct message to providers to whom you refer a patient. There are two steps in this procedure:

1. Create the transition of care document in ExamWRITER.
2. Securely send it from ExamWRITER.

This section explains how.

NOTES

- Your practice must establish a security certificate before you will be able to exchange direct messages with a provider outside of your practice. For more information, go to [To establish a direct messaging security certificate on page 728](#).
- You may send a direct message to a provider with a direct messaging address. The provider's direct messaging address must be supported by a DirectTrust accredited agent. For example, the OfficeMate secure messaging portal is supported by Updox. For a list of DirectTrust accredited agents, go to <http://www.directtrust.org/accreditation-status>.

► To create the transition of care document

1. Open the patient's exam.
2. Click **Patient Hx**.
3. Click the **Exam Hx** tab.
4. Click **New Referral**.

The Patient Referral window opens.

5. Select a **Referring Provider** and a **Refer To Provider**.

NOTE

Click **Maintain** to verify that the referred provider has a valid email address recorded.

6. Select a **SNOMED** that best explains the reason for the referral.
7. Select an **Expected Return Date** if needed.
8. Click **Save**.

9. Click **Create CDA Transition of Care**.
10. Click **Exit** to close the Patient Referral window.

11. Continue by sending the transition of care document. For more information, go to [To send the transition of care document on page 741](#).

► **To send the transition of care document**

1. Create the referral and transition of care document. For more information, go to [To create the transition of care document on page 740](#).
2. Click the **eDocuments** tab.
3. Click **Show eDocs**.
4. Select the CDA transition of care from the list of eDocuments.
5. Select **Provider** from the **Send To** radio buttons and click **Secure Send**.

The screenshot shows the 'Patient Information Center' window for 'Patient, Miss Sally J'. The 'eDocuments' tab is active. A 'Send To' dialog box is open, showing 'Patient' and 'Provider' radio buttons, with 'Provider' selected. Below the dialog is a table of 'Patient Electronic Documents'.

Date	Received By	Title	Index/Source	Exam No.	Link	Link
05/03/2014 5:47 am	Doctor Johnny	CDA Export - Transition of Care		26	✓	...
05/22/2014 1:09 pm	Doctor Johnny	Exam Print		25	✓	...
05/22/2014 1:09 pm	Doctor Johnny	Auto Letter	Auto Letter	25	✓	...
05/19/2014 1:42 am	Doctor Johnny	Auto Letter	Auto Letter to: GP Practitioner	27	✓	...
05/19/2014 1:42 am	Doctor Johnny	Exam Print		27	✓	...
05/19/2014 1:34 am	Doctor Johnny	Exam Print		26	✓	...
05/19/2014 1:34 am	Doctor Johnny	Auto Letter	Auto Letter to: GP Practitioner	26	✓	...
05/02/2014 2:37 pm	Doctor Johnny	Exam Print		22	✓	...
05/02/2014 2:37 pm	Doctor Johnny	Auto Letter	Auto Letter	22	✓	...
05/02/2014 12:43 pm	Doctor Johnny	Exam Print		16	✓	...
04/24/2014 1:32 pm	Doctor Johnny	Exam Print		14	✓	...
03/20/2014 6:43 pm	Doctor Johnny	Lab Results Import CDA			✓	...
03/20/2014 11:22 am	Doctor Johnny	Exam Print		2	✓	...
03/20/2014 11:22 am	Doctor Johnny	Auto Letter	Auto Letter	2	✓	...

At the bottom of the window, there are sections for 'Clinical Document Exchange (MDI)' and 'Encrypt Document'. The 'Send To' dialog is also visible, showing 'Secure Send' and 'Import Lab Results' buttons.

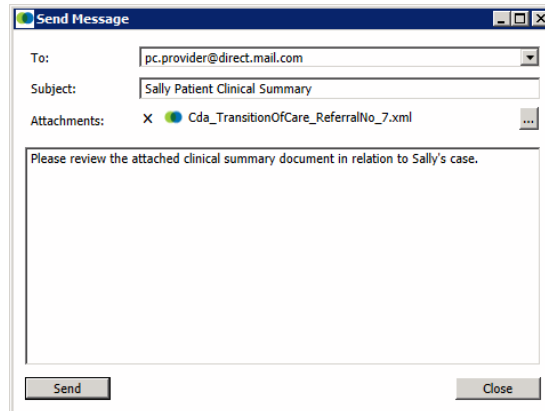
The Secure Message window opens.

6. Type the provider's direct mail address or select it from the drop-down menu.

NOTE

The provider's direct message address must be supported by a DirectTrust accredited agent. For example, the OfficeMate secure messaging portal is supported by Updox. For a list of DirectTrust accredited agents, go to <http://www.directtrust.org/accreditation-status>.

7. Type a **Subject**, type a short message, and click **Send**.



Your message and the patient's CDA are sent securely.

Managing Your Own Provider Portal Account

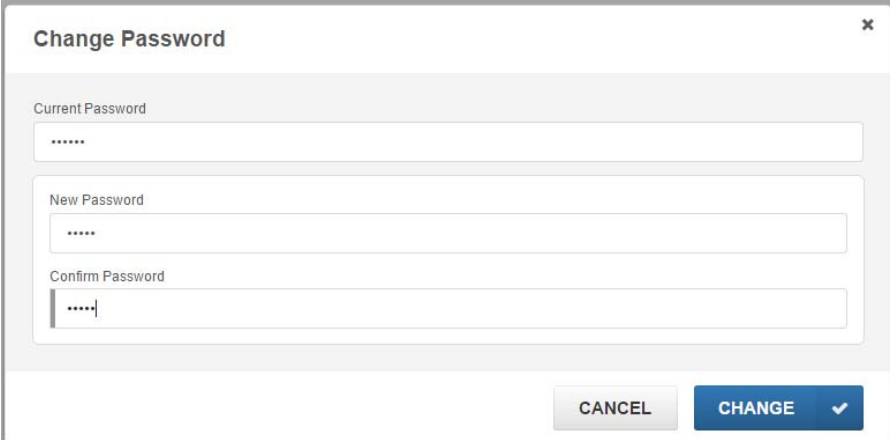
You can manage various aspects of your provider portal account. This section tells you how to manage your account, including how

- [To change your password, 743](#)
- [To change your display name, 743](#)
- [To change your message signature, 744](#)
- [To change your provider portal settings, 745](#)
- [To change your email and text message notifications, 745](#)

► To change your password

NOTE If you modify your username or password in your portal account, then it will not match what is displayed on the Staff tab in the Secure Messaging Portal Setup window in OfficeMate/ExamWRITER.

1. Log into the provider portal.
2. Click **Menu**.
3. Click **Tools** and select **Change Password**.
4. Type your **Current Password**.
5. Type your **New Password**.
6. Type your new password again in the **Confirm Password** field.
7. Click **Change**.



The screenshot shows a 'Change Password' dialog box. It has a title bar with the text 'Change Password' and a close button (X). Below the title bar, there are three input fields: 'Current Password', 'New Password', and 'Confirm Password'. Each field contains a password mask (dots). At the bottom right of the dialog, there are two buttons: 'CANCEL' and 'CHANGE' with a checkmark.

► To change your display name

1. Log into the provider portal.
2. Click **Menu**.
3. Click **Profile** at the bottom of the menu.

4. Type your name as you want it to display in messages that you send in the **First Name**, **Middle Name**, and **Last Name** text boxes.

My Profile
Manage your profile information.

Salutation
Salutation

First Name	Middle Name	Last Name
Ralph	Middle Name	Petersen

Address
300 S. Main
Address 2

City State Zip Code
Bakersfield CALIFORNIA 90001

Message Signature

5. Click **Save**.

► **To change your message signature**

1. Log into the provider portal.
2. Click **Menu**.
3. Click **Profile** at the bottom of the menu.
4. Type the signature that you want to display at the bottom of all of your outbound secure messages in the **Message Signature** text box.

My Profile
Manage your profile information.

Salutation
Salutation

First Name	Middle Name	Last Name
Ralph	Middle Name	Petersen

Address
300 S. Main
Address 2

City State Zip Code
Bakersfield CALIFORNIA 90001

Message Signature

5. Click **Save**.

► **To change your provider portal settings**

1. Log into the provider portal.
2. Click **Menu**.
3. Click **Profile** at the bottom of the menu.
4. Click **Settings**.

NOTE

Eyefinity recommends that you not change the Direct Address.

5. Change the viewing items settings to adjust the number of messages that appear on each page and the size and contrast of text.

6. Click **Save**.

► **To change your email and text message notifications**

1. Log into the provider portal.
2. Click **Menu**.
3. Click **Profile** at the bottom of the menu.
4. Click **Settings**.

5. Select the **Secure Messages** check box to receive notifications about messages sent to your mailbox.
6. If you wish to receive notifications by email, type your **Email Address**.
7. If you wish to receive notifications by text message, type your **Text Number**.

NOTE

Check with your carrier to determine your text message and data rates.

8. Click **Save**.

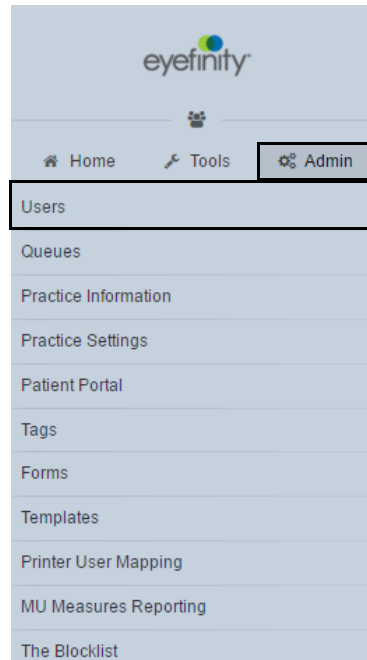
Managing Other Provider Portal Accounts

As an administrator, you can manage the portal accounts of the providers in your practice. This section tells you how to manage provider accounts, including how

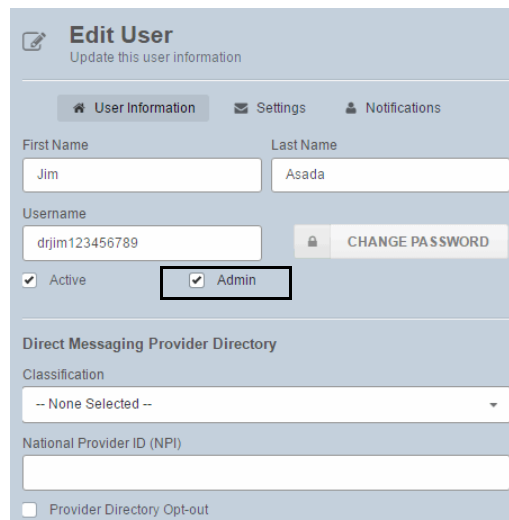
- [To assign admin rights to another provider, 747](#)
- [To change a provider's display name, 748](#)
- [To change a provider's username and password, 749](#)
- [To manage the practice portal profile, 751](#)

► **To assign admin rights to another provider**

1. Log into the provider portal.
2. Click **Menu**.
3. Click **Admin** and select **Users**.



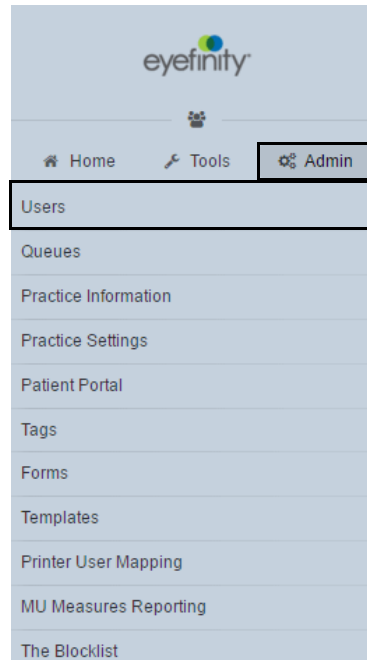
4. Select the user you want to edit.
5. Select the **Admin** check box to enable the provider to administer portal settings and other provider accounts.

A screenshot of the 'Edit User' form in the eyefinity provider portal. The form title is 'Edit User' with the subtitle 'Update this user information'. There are three tabs: 'User Information', 'Settings', and 'Notifications'. The 'User Information' tab is active. The form contains several input fields: 'First Name' (Jim), 'Last Name' (Asada), 'Username' (drjim123456789), and a 'CHANGE PASSWORD' button. There are two checkboxes: 'Active' (checked) and 'Admin' (checked). The 'Admin' checkbox is highlighted with a black box. Below the checkboxes is a section titled 'Direct Messaging Provider Directory' with a 'Classification' dropdown menu (set to '-- None Selected --') and a 'National Provider ID (NPI)' input field. At the bottom, there is a 'Provider Directory Opt-out' checkbox.

6. Click **Save**.

► **To change a provider's display name**

1. Log into the provider portal.
2. Click **Menu**.
3. Click **Admin** and select **Users**.



4. Select the user you want to edit.
5. Type the provider's name as it should appear in messages the provider sends in the **First Name** and **Last Name** text boxes.

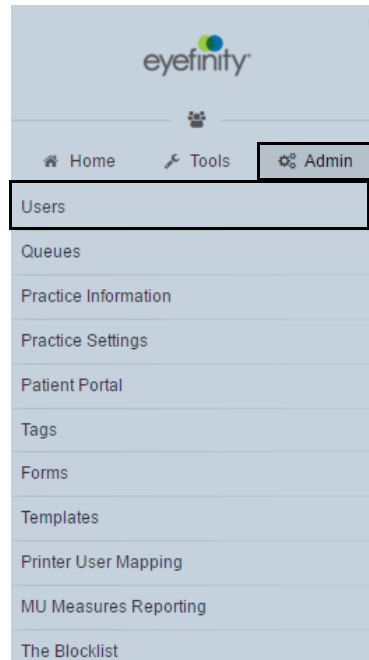
 A screenshot of the 'Edit User' form in the provider portal. The form title is 'Edit User' with the subtitle 'Update this user information'. There are three tabs: 'User Information', 'Settings', and 'Notifications'. The 'User Information' tab is active. The form contains several fields: 'First Name' (containing 'Jim'), 'Last Name' (containing 'Asada'), 'Username' (containing 'drjim123456789'), and a 'CHANGE PASSWORD' button. There are also two checked checkboxes: 'Active' and 'Admin'. Below these is a section for 'Direct Messaging Provider Directory' with a 'Classification' dropdown menu (set to '-- None Selected --'), a 'National Provider ID (NPI)' text box, and a 'Provider Directory Opt-out' checkbox.

6. Click **Save**.

► To change a provider's username and password

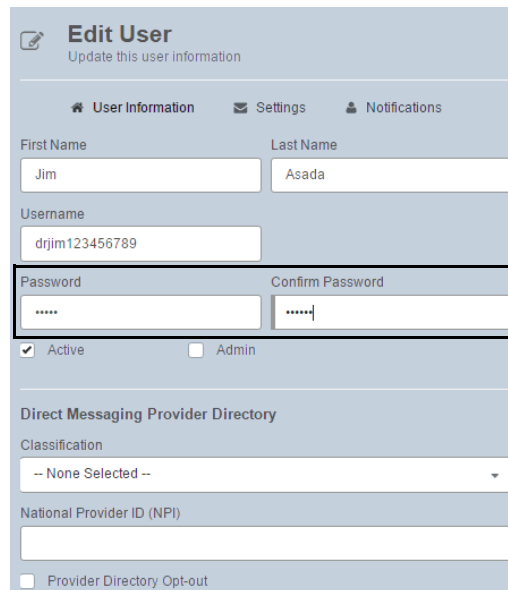
NOTE If you modify a username or password in your portal account, then it will not match what is displayed on the Staff tab in the Secure Messaging Portal Setup window in OfficeMate/ExamWRITER.

1. Log into the provider portal.
2. Click **Menu**.
3. Click **Admin** and select **Users**.



4. Select the user you want to edit.
5. Type a new **Username**, if needed.
6. Click **Change Password**, if needed.

7. Type a new, temporary password in the **Password** and **Confirm Password** text boxes.



The screenshot shows the 'Edit User' form with the following fields and options:

- Edit User** (Update this user information)
- Navigation: User Information (selected), Settings, Notifications
- First Name: Jim
- Last Name: Asada
- Username: drjim123456789
- Password**: [Redacted]
- Confirm Password**: [Redacted]
- Active: Admin:
- Direct Messaging Provider Directory
- Classification: -- None Selected --
- National Provider ID (NPI): [Empty]
- Provider Directory Opt-out:

8. Click **Save**.

► To manage the practice portal profile

NOTES

- Do *not* change the settings on the Patient Portal window's General tab. Changing these settings will adversely affect your meaningful use counts.
- You can update the about, hours, and portal accounts information through the Secure Messaging Portal Setup window in OfficeMate Administration.

Managing Patient Portal Accounts

As a provider, you can manage the portal accounts of patients in your practice. This section tells you how to manage patient accounts, including how

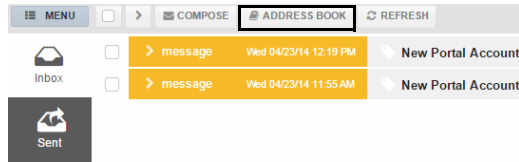
- [To update a patient's email address, 752](#)
- [To reset a patient's password, 753](#)
- [To resend a patient's account information, 753](#)

► To update a patient's email address

NOTE

You must also update the patient's address in the Patient Demographic window in OfficeMate/ExamWRITER.

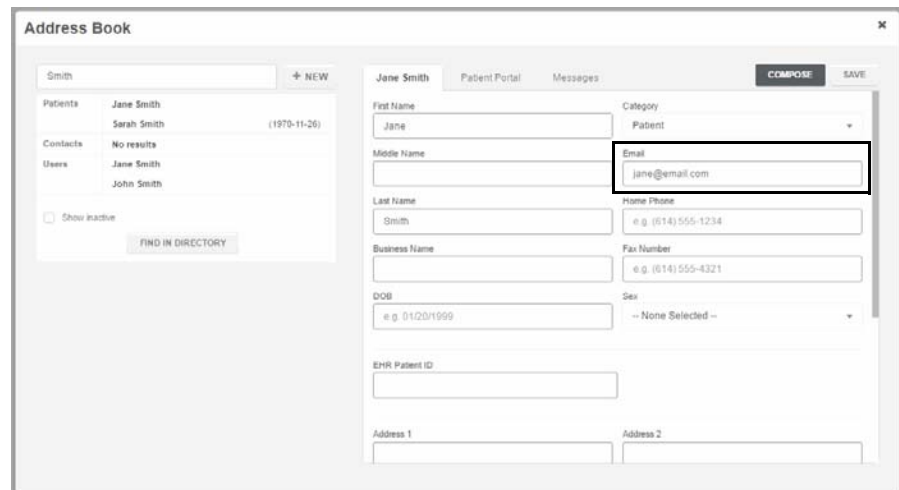
1. Log into the provider portal.
2. Click **Address Book**.



3. Search for and select the patient you want to edit.



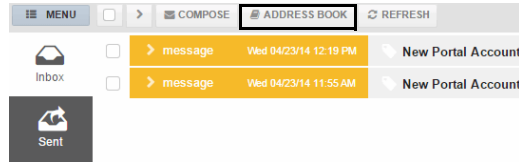
4. Type the patient's new email address in the **Email** text box.



5. Click **Save**.

► **To reset a patient's password**

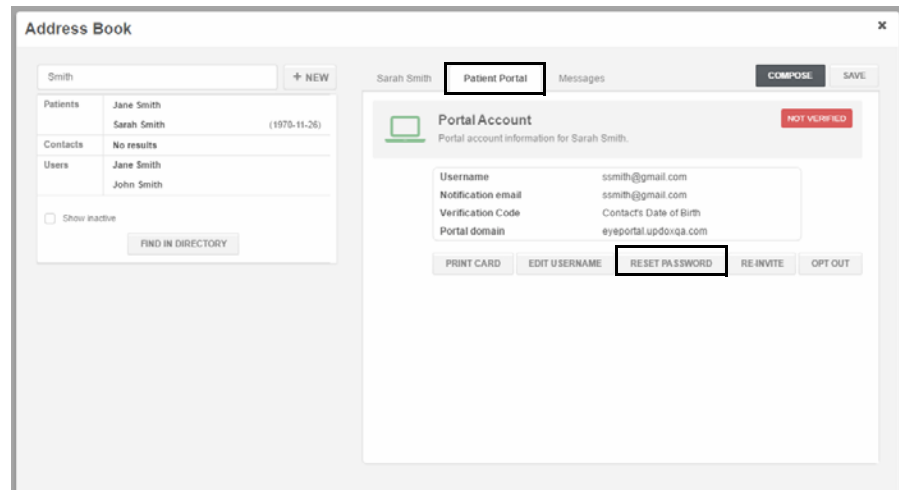
1. Log into the provider portal.
2. Click **Address Book**.



3. Search for and select the patient you want to edit.



4. Verify the patient's email address is correct.
5. Click the **Patient Portal** tab.
6. Click **Reset Password** to reset the patient's password and resend account activation instructions to the patient.



7. Click **Save**.

► **To resend a patient's account information**

If a patient did not receive or accidentally deleted the portal activation email, you can resend the activation from within the provider portal. To resend the

activation email, you must reset the patient's password. For more information, go to [To reset a patient's password on page 753](#).

Reporting Immunization, Public Health, & Meaningful Use

15

In this chapter:

- [Generating Immunization Registry Files, 755](#)
- [Generating Public Health Files, 756](#)
- [Reporting MIPS Information, 757](#)
- [Reporting Medicaid Meaningful Use, 760](#)
- [Reporting Medicaid Quality Measures, 762](#)

These reporting features are related to such CMS incentive programs as MIPS and meaningful use, so that you can receive incentive payments or avoid payment penalties.

For more information about...	Go to...
MIPS	qpp.cms.gov/learn/qpp
Medicaid meaningful use	www.cms.gov/EHRIncentivePrograms

You must have both OfficeMate and ExamWRITER to meet CMS incentive program requirements. If you are using the standalone version of ExamWRITER (without OfficeMate), you will not satisfy the requirements.

Generating Immunization Registry Files

For information on managing and viewing immunizations for a patient in ExamWRITER, refer to the *ExamWRITER User's Guide*, which is available from the Help menu within ExamWRITER.

Submitting electronic data to an immunization registry helps your practice meet MIPS Advancing Care Information and Medicaid meaningful use criteria. OfficeMate gives you the ability to generate and electronically submit CVX-coded immunization information to an immunization registry.

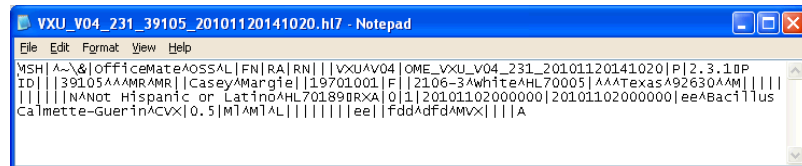
1. From the OfficeMate Administration or ExamWRITER main window, click the **Reports** menu and select **Immunization Registry [MU]**.
2. Record the sending and receiving facility information, the receiving application, and the reporting date range.
3. Click **Generate HL7 V2.3.1 Immunization Files** to generate and send the files to the specified receiving facility.

OfficeMate Administration creates a separate file for each immunization in the DATA\Documents\ImmunizationRegistry folder. You can print the files or

view them in Notepad. File names follow the format: VXU_V04_231_Patient ID_date.

Files include the following information:

- Summary of immunizations
- History of all immunizations received including: immunization, date given, patient name, patient identifier, and patient demographic information.



Generating Public Health Files

Submitting syndromic surveillance data (protected health information and the ICD-10 codes) to public health agencies helps your practice meet meaningful use criteria. OfficeMate provides you with the ability to generate files and electronically submit syndromic surveillance data to a public health agency.

1. From the OfficeMate Administration or ExamWRITER main window, click the **Reports** menu and select **Public Health Surveillance [MU]**.
2. Record the sending and receiving facility information, receiving application, reporting date range, and ICD-10 code being reported (the health agency requesting the file will send you this information).
3. Click **Generate HL7 V2.3.1 Public Health Files** to generate and send the files to the specified receiving facility.

OfficeMate Administration creates a separate file for each patient for the date range entered in the DATA\eDocuments\PublicHealth folder. Files are similar to immunization files, except they contain ICD-10 codes. You can

print the files or view them in Notepad. Files names follow the format: ADT_A28_231_Patient ID_date.

Reporting MIPS Information

You can gather and prepare to report on measures that are part of the MIPS (Merit-Based Incentive Payment System) program beginning in 2017. This program consists of the following three components:

- [Reporting Clinical Practice Improvement Activities, 757](#)
- [Reporting Advancing Care Improvement, 758](#)
- [Reporting Quality Measures, 759](#)

NOTES

- To set up MIPS reporting options, including your pace, submission type, and reporting mechanisms, go to [Setting Up MIPS Reporting Options on page 148](#).
- In OfficeMate 12.0.3 SP10, you can no longer access the Merit-Based Incentive Payment System (MIPS) menu options in OfficeMate Administration. You can, however, still access all MIPS menu options in ExamWRITER. In OfficeMate 14.0, you will once again be able to access MIPS menu options in OfficeMate Administration.

For more information on MIPS, go to the [Eyefinity MIPS Resource Center](#).

Reporting Clinical Practice Improvement Activities

In this new performance category for 2017, you're rewarded for care focused on care coordination, beneficiary engagement, and patient safety. The Improvement Activities category is worth 15% of your total MIPS score.

You may select activities that match your practice's goals from a list of more than 90 options. Medium weighted activities are worth 10 points, and heavily weighted activities are worth 20 points. You must select different activities every year.

- ❖ From the OfficeMate Administration or ExamWRITER main window, click the **Reports** menu, select **Merit-Based Incentive Payment System (MIPS)**, and then select **Clinical Practice Improvement Activities**.

The [2017 MIPS Improvement Activities](#) document opens and details the activities most applicable to eyecare practices.

Reporting Advancing Care Improvement

Information that you record in OfficeMate and ExamWRITER, specifically in fields that display [MU], is tied to meaningful use criteria and is reported in the MIPS Advancing Care Improvement Reporting window.

The MIPS Advancing Care Improvement Reporting window shows you how you are using your certified software. This window helps you see where you have met meaningful use (MU) requirements and where you have not, and helps ensure you qualify for the incentive payments. This window lists the percentage-based objectives.

NOTE A permissible exclusion can count as having met an objective.

You can use the MIPS Advancing Care Improvement Reporting window to do the following:

- Keep track of the core objectives and their meaningful use criteria.
- Calculate the percentage of a criteria that you meet so that you can report the data in your attestation application.
- Generate a meaningful use report that you can send to the government.

To better understand advancing care information and its criteria, go to <https://app.cms.gov/measures/aci>.

NOTE Both the MIPS Advancing Care Improvement Reporting window and the CMS MIPS Quality window can help you gather meaningful use information and determine if you qualify for stimulus money. For more information on CMS MIPS quality reporting, go to the [Reporting Quality Measures on page 759](#).

1. From the OfficeMate Administration or ExamWRITER main window, click the **Reports** menu, select **Merit-Based Incentive Payment System (MIPS)**, select **Advancing Care Information**, and then select Medicare if you are participating in the **Medicare** program or select Medicaid if you are participating in the **Medicaid** program.

NOTES

- In 2017 and 2018, there are slightly different objectives for reporting advancing care improvement information in the Medicare and Medicaid programs.
- To access your Stage 1 - 2011 Edition, Stage 1 - 2014 Edition, and Stage 2 - 2014 Edition meaningful use reports for historical or auditing purposes, from the OfficeMate Administration or ExamWRITER main window, click the **Reports** menu, select **CMS Meaningful Use Reporting - Hx**, and then select the appropriate stage and edition.

2. Select a line from the **Meaningful Use Criteria**.
The description appears in the right column.
3. Select a date range from the **Reporting From Date** and **Reporting Through Date** fields.
4. Select a provider from the **Provider** drop-down menu.

- Click **Calculate** to populate the Calculated Values fields.

The calculated values are displayed in the Numerator, Denominator, and Percentage fields.

- Click **Generate MU Report** to generate the Meaningful Use report.

The report, an XML-based file, is placed in your DATA\Documents folder.

Reporting Quality Measures

If you plan to participate in the MIPS program for the full year in 2017, then you must start documenting the NQF and CMS Quality measures in January 2017.

The CMS MIPS Quality window gathers data about measures that can help you achieve Advancing Care Information and Quality categories. The CMS MIPS Quality window calculates the numerator, denominator, exclusions, performance rate, and reporting rate for each measures.

Each reporting criteria requires a different procedure and/or diagnosis code or Rx Norm code to be present within one or more patient exams. Data that you record in OfficeMate Administration and ExamWRITER that displays [QRM] next to it are quality reporting measures that are reported in the CMS Quality Reporting window.

To better understand quality reporting and its criteria, go to <https://app.cms.gov/measures/quality>.

For more information on documenting MIPS quality measures, see the MIPS 2017 Quality Measures documents at www.eyefinity.com/education-and-support/OM-EW-Documentation.html.

- From the OfficeMate Administration or ExamWRITER main window, click the **Reports** menu, select **Merit-Based Incentive Payment System (MIPS)**, and then select **Quality**.
- Select the extent of reporting criteria that you want to view.
- Select a line in **Reporting Criteria**.
The related reporting criteria description is displayed in the right side of the window.
- Select a date range from the **Reporting From Date** and **Reporting Through Date** fields.
- Select a provider from the **Provider** drop-down menu.
- Click **Calculate** to populate the Calculated Meaningful Use Metrics fields.
The Generate button is enabled.

- To view the details of each measure that you calculated, including dates, exam numbers, patient names, CPT codes, and ICD-10 codes, select **Measure Details** from the drop-down menu next to the Generate button, and then click **Generate**.

#130 Documentation of Current Medications in the Medical Record							
Date	Exam No	Patient Name	Exam CPT	Numerator	Denominator	Exclusion	Diagnoses
2017-09-05	13473	Archie Ahrens	92004,3284F,4177F,2027F,2022F,2019F,38397,5010E,38785,38427,1036F	1	1	0	H40.1131,E11.9,H35.30,H35.3231,H47.20
2017-08-31	13472	Michael Gregg	92014,4004F,3044F,G8952	0	1	0	H47.293,H31.013,H35.50

- To generate CAT III files, select **QRDA Documents** from the drop-down menu next to the Generate button, and then click **Generate**.
- To generate the data for a MIPS report and save it to a file, select **MIPS Report** from the drop-down menu next to the **Generate** button, and then click Generate.

The XML file is created. The XML report opens in a browser. An XML-based report file is placed in the DATA\Documents folder.

- To clear the metrics and description for the selected reporting criteria, click **Reset** or select another criteria.

Reporting Criteria

Outcome Measures:
 #1 Diabetes - Hemoglobin A1c Poor Control
 #141 POAG - Reduction of IOP or documented plan
 #236 Controlling High Blood Pressure
 Process Measures:
 #12 POAG: Optic Nerve Evaluation
 #14 AMD: Dilated Macular Examination
 #18 Diabetic Retinopathy: Documentation of ME and Severity of Retinopathy
 #19 Diabetic Retinopathy: Communication with Physician Managing Diabetes
 #117 Diabetes: Eye Exam
 #123 Preventive Care: BMI Screening and Follow-up Documented
 #130 Documentation of Current Medications in the Medical Record
 #140 AMD: Counseling on Antioxidant Supplement
 #226 Preventative Care: Tobacco Use Screening and Cessation Intervention
 #317 Preventative Care: Screening for HBP and Follow-up Documented
 #374 Closing the Referral Loop: Receipt of Specialist Report

Reporting Criteria Description

Patients aged 18 years and older for which the eligible clinician attests to documenting, updating or reviewing a list of current medications using all immediate resources available on the date of the encounter. This list must include all known prescriptions, over-the-counters, herbals, and vitamin/mineral/dietary (nutritional) supplements and must contain the medications' name, dosage, frequency and route of administration.

REPORTING METHODS:
 Claims, Registry

DENOMINATOR
 Patients 18 years or older on date of encounter who had a visit during the measurement period:
 92002, 92004, 92012, 92014, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215

NUMERATOR
 Eligible clinician attests to documenting, updating or reviewing a patient's current medications using all immediate resources available on the date of encounter. This list must include all known prescriptions, over-the counters, herbals, and vitamin/mineral/dietary (nutritional) supplements and must contain the medications' name,

Reporting From Date: 03/05/2016
 Reporting Through Date: 03/05/2017
 Provider: Sallie OD, Stev

Calculate Generate Measure Details QRDA Documents MIPS Report Reset Exit

Calculated Meaningful Use Metrics

Performance Rate	50.0	Numerator	1	Denominator	2	Exclusions	0	Not Met	1	Reporting Rate	50.0
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- To close the window, click **Exit**.

Reporting Medicaid Meaningful Use

Information that you record in OfficeMate and ExamWRITER, specifically in fields that display [MU], is tied to meaningful use criteria and is reported in the CMS Meaningful Use Reporting window.

For information about how to meet the measures and achieve and report meaningful use in OfficeMate/ExamWRITER, go to the applicable “Achieving Meaningful Use” document.

For more information on CMS Reporting, see the “CMS Reporting” recorded video tutorial.

To better understand meaningful use and its criteria, go to www.cms.gov/EHRIncentivePrograms/.

The CMS Meaningful Use Reporting window shows you how you are using your certified software. This window helps you see where you have met meaningful use (MU) requirements and where you have not, and helps ensure you qualify for the incentive payments. This window lists the percentage-based objectives.

NOTE A permissible exclusion can count as having met an objective.

You can use the CMS Meaningful Use Reporting window to do the following:

- Keep track of the core objectives and their meaningful use criteria.
- Calculate the percentage of a criteria that you meet so that you can report the data in your attestation application.
- Generate a meaningful use report that you can send to the government.

NOTE Both the CMS Meaningful Use Reporting window and the CMS Quality Reporting window can help you gather meaningful use information and determine if you qualify for stimulus money. For more information on CMS quality reporting, go to the [Reporting Medicaid Quality Measures on page 762](#).

1. From the OfficeMate Administration or ExamWRITER main window, click the **Reports** menu and select **Stage 2 2015 CMS Meaningful Use Reporting**.

NOTE To access your Stage 1 - 2011 Edition, Stage 1 - 2014 Edition, or Stage 2 - 2014 Edition meaningful use reports for historical or auditing purposes, from the OfficeMate Administration or ExamWRITER main window, click the **Reports** menu, select **CMS Meaningful Use Reporting - Hx**, and then select the appropriate stage and edition.

2. Select a line from the **Meaningful Use Criteria**.
The description appears in the right column.
3. Select a date range from the **Reporting From Date** and **Reporting Through Date** fields.
4. Select a provider from the **Provider** drop-down menu.

- Click **Calculate Percentage** to populate the Calculated Values fields. The calculated values are displayed in the Numerator, Denominator, and Percentage fields.

- Click **Generate MU Report** to generate the Meaningful Use report. The report, an XML-based file, is placed in your DATA\Documents folder.

Reporting Medicaid Quality Measures

For more information on CMS Reporting, see the "[CMS Reporting](#)" recorded video tutorial.

The CMS Quality Reporting window gathers data about quality measures that can help you achieve meaningful use and participate in the Physician Quality Reporting System (PQRS). The CMS Quality Reporting window calculates the numerator, denominator, exclusions, performance rate, and reporting rate for quality measures.

The percentages displayed in the window are required for reporting purposes only. The actual value of the percentage reported will not affect the incentive dollars for the Medicaid Incentive Program. If the value is zero, report it as zero.

Each reporting criteria requires a different procedure and/or diagnosis code or Rx Norm code to be present within one or more patient exams. Data that you record in OfficeMate Administration and ExamWRITER that displays [QRM] next to it are quality reporting measures that are reported in the CMS Quality Reporting window.

NOTE Both the CMS Quality Reporting window and the CMS Meaningful Use Reporting window can help you gather Medicaid meaningful use information and determine if you qualify for stimulus money. For more information on CMS meaningful use, go to the [Reporting Medicaid Meaningful Use on page 760](#).

To better understand quality reporting and its criteria, go to www.cms.gov/EHRIncentivePrograms/.

- From the OfficeMate Administration or ExamWRITER main window, click the **Reports** menu and select **2016 Edition - CMS Quality Reporting**.

NOTE

To access your 2011 Edition, 2014 Edition, or 2015 Edition CMS quality reports for historical or auditing purposes, from the OfficeMate Administration or ExamWRITER main window, click the **Reports** menu, select **CMS Quality Reporting - Hx**, and then select the appropriate edition.

- Select the extent of reporting criteria that you want to view.
- Select a line in **Reporting Criteria**.
The related reporting criteria description is displayed in the right side of the window.
- Select a date range from the **Reporting From Date** and **Reporting Through Date** fields.
- Select a provider from the **Provider** drop-down menu.
- Click **Calculate** to populate the Calculated Meaningful Use Metrics fields.
The Create QRDA Documents button is enabled.
- Click **Create QRDA Documents** to generate the data and save it to a file.
The XML file is created. The XML report opens in a browser. An XML-based report file is placed in the DATA\Documents folder.
- To clear the metrics and description for the selected reporting criteria, click **Reset** or select another criteria.

- To close the window, click **Exit**.

In this chapter:

- [Setting Up the General Ledger Interface, 766](#)
- [Using the General Ledger Interface to Export Transactions, 785](#)
- [Understanding Inventory Valuation Methods, 793](#)
- [Understanding Individual Transaction Postings, 796](#)

The General Ledger Interface, a feature of OfficeMate Administration, allows you to export general ledger (G/L) transactions to such external, business-grade accounting systems as Sage Software MAS 90 and MAS 200. The General Ledger Interface also enables you to export journal entries into Intuit QuickBooks 2005–2010. After setting up the General Ledger Interface, you will be able to export general ledger transactions from OfficeMate Administration periodically and import them into your accounting system.

Eyefinity supports setting up and using the General Ledger Interface, but does not support setting up or using QuickBooks, MAS 90, or MAS 200. Contact Intuit

for information on setting up and using QuickBooks or Sage Software for information on setting up and using MAS 90 or MAS 200.

NOTES

- This chapter assumes that you are familiar with your accounting system and with standard accounting practices. If you are unsure about how to set up your accounting system, contact your certified public accountant, or, if you need help selecting an accountant, contact your state's board of accountancy.
- If you are using the QuickBooks interface, you should ensure that finance and late charges are posted at each location and not from the administrative location. Posting late and finance charges at locations avoids discrepancies that would otherwise occur between OfficeMate reports and QuickBooks journal entry postings. OfficeMate reports fee slip adjustments made at the administrative location on the location's Aging report where the fee slip was recorded. The General Ledger Interface posts the fee slip adjustments made at the administrative location to the main QuickBooks company not the fee slip recorded location.
- Use the Custom Aging Reports in OfficeMate rather than the Accounts Receivable reports in QuickBooks. For more information about Custom Aging Reports, go to [To create and print custom aging reports on page 576](#).
- The General Ledger Interface is disabled if your preferences allow fee slips to be edited after the end-of-day process. For information about changing the fee slip editing preferences, go to [To set up financial preferences on page 62](#).

Setting Up the General Ledger Interface

This section describes how to set up the General Ledger Interface, including how

- [To prepare for setting up the General Ledger Interface, 766](#)
- [To open the General Ledger Setup window, 767](#)
- [To set up basic General Ledger settings, 767](#)
- [To set up General Ledger accounts for MAS 90/MAS 200, 770](#)
- [To set up General Ledger accounts for QuickBooks, 773](#)
- [To correlate general ledger accounts to system accounts, 775](#)
- [To assign general ledger accounts to financial groups, 776](#)
- [To assign general ledger accounts to insurance carriers, 779](#)
- [To assign general ledger accounts to transaction adjustments, 781](#)
- [To view the General Ledger Setup Check List, 783](#)

► To prepare for setting up the General Ledger Interface

1. Ensure that the General Ledger Interface is enabled in the Finance tab of the System Preferences window. For more information on enabling the General Ledger Interface, go to [To set up financial preferences on page 62](#).
2. Ensure that you have added financial report group names to the list box selections in the Customization window. For more information on adding financial report group names, go to [To add list box selections on page 37](#).

For more information on setting up the General Ledger interface, watch the "General Ledger" video.

3. Ensure that a financial report group is assigned to every product and service. For information about assigning financial groups to products and services, go to [Recording Product Information on page 263](#).

NOTE

Products sold that do not have a financial reporting group assigned will be credited to a default general ledger account. Ensure that a default general ledger account is set up in your accounting system to catch any products that do not have a financial reporting group assigned.

An article on our Knowledge Base explains how to print a list of products that do not have a financial group assigned. For information on printing this list, go to <http://www.officemate.net/omkb/article.aspx?id=23868>.

4. MAS 90/MAS 200 users, ensure that every location is assigned a G/L Location ID. For information on assigning G/L Location IDs to locations, go to [Maintaining Locations on page 24](#).

NOTE

If you are using OfficeMate in a single-location practice with an administrative location, enter the same G/L Location ID for the location and the administrative location.

5. If you are interfacing OfficeMate with Intuit QuickBooks, ensure that QuickBooks is installed on the computer on which you will be setting up the General Ledger Interface. If QuickBooks is installed, open QuickBooks before setting up the General Ledger Interface.

► **To open the General Ledger Setup window**

- ❖ From the OfficeMate Administration main window, click **Setup** and select **General Ledger Setup**.

NOTE

The General Ledger Interface is disabled if your preferences allow fee slips to be edited after the end-of-day process. For information about changing the fee slip editing preferences, go to [To set up financial preferences on page 62](#).

► **To set up basic General Ledger settings**

1. From the OfficeMate Administration main window, click **Setup** and select **General Ledger Setup**.
2. Select an accounting system from the **Accounting System** drop-down menu.
3. Type the location where your exported transactions will be saved in the **Interface Export Folder**.

NOTE

The default location for this folder is OfficeMate\Data\GL.

4. Select the inventory valuation method that you want to use to price inventory item transactions that are exported from the **Inventory Valuation Method**

drop-down menu. For more information about inventory valuation methods, go to [Understanding Inventory Valuation Methods on page 793](#).

NOTE If you are using the Standard Cost inventory valuation method and you change to use the Average Cost inventory valuation method, call Eyefinity at 800.942.5353.

5. If you selected Intuit QuickBooks as the accounting system in step 2, perform the following steps; otherwise, go to step 6:
 - a. From the **Export QuickBooks To** drop-down menu, select Single QuickBooks Company or Multiple QuickBooks Companies.

NOTES

- If QuickBooks is not already open on the computer on which you are setting up the General Ledger Interface, open QuickBooks now.
- If you are using OfficeMate for a single location with an administrative location, select **Single QuickBooks Company**.
- While you can export general ledger transactions to multiple QuickBooks companies, Eyefinity does not recommend it. If you are running a multilocation practice, we suggest using MAS 90/MAS 200 accounting systems.
- If you selected Multiple QuickBooks Companies, open the main QuickBooks company. The main company's chart of accounts must represent the same accounts used by the other QuickBooks companies. OfficeMate Administration uses the QuickBooks main company's Chart of Accounts for all locations. If you later add an account to a company in QuickBooks, you must add the account to all of your QuickBooks companies.

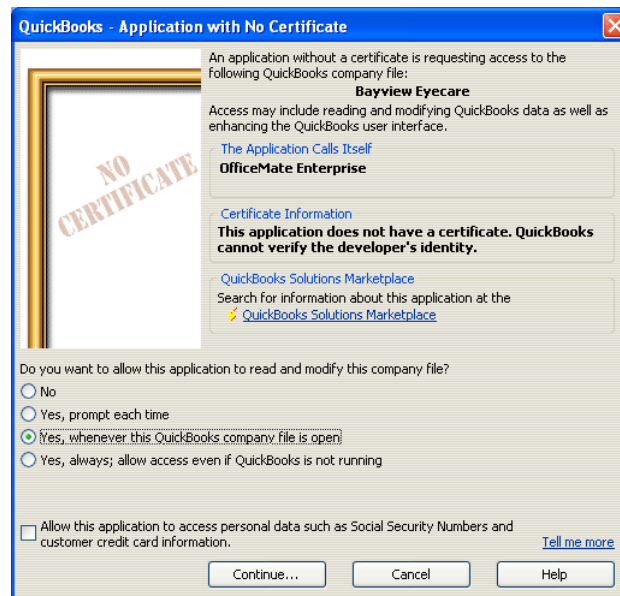
- b. Click **Get Company** to select the QuickBooks company that you want to associate with the General Ledger Interface.

NOTE If you receive the error, "Unable to Connect to QuickBooks," while importing the company name or chart of accounts, ensure that your QuickBooks software is running in Single-User Mode. For information about Single-User Mode, refer to the QuickBooks documentation supplied by Intuit.

If this is the first time OfficeMate has attempted to import QuickBooks accounts, the **QuickBooks - Application with No Certificate** window

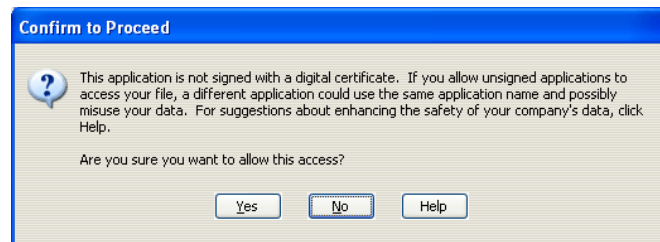
opens. If you previously imported QuickBooks accounts into OfficeMate, skip to step 6.

- c. Select the **Yes, whenever this QuickBooks company file is open** radio button.



- d. Click **Continue**.

The Confirm to Proceed Window opens to confirm that you want to allow OfficeMate to access the QuickBooks company accounts.



- e. Click **Yes**.

The Access Confirmation window opens to display the access settings.

- f. Click **Done**.

- From the **General Ledger Interface Transaction Components** check boxes, select the check boxes that correspond to the information you want to export from OfficeMate. to your accounting system.

General Ledger Setup

GL Setup | Account Setup | System Accounts | Financial Groups | Insurance | Transactions | Check List

General Ledger Settings:

Accounting System: Sage MAS 90 / MAS 200

Interface Export Folder: C:\OfficeMate\DATA\GL

Inventory Valuation Method: Standard Cost

General Ledger Interface Transaction Components:

Select the transactions to export to your General Ledger.

Inventory, Purchases and Cost of Goods Sold

Patient Receivables

Insurance Receivables

Sales, Returns and Adjustments

Deposits

End of Day Reconciliation

OK Cancel

- Click **OK** when you are finished.

OR

Continue setting up general ledger accounts. For information about setting up general ledger accounts, go to [To set up General Ledger accounts for MAS 90/MAS 200 on page 770](#) or [To set up General Ledger accounts for QuickBooks on page 773](#).

► To set up General Ledger accounts for MAS 90/MAS 200

NOTE Prior to setting up general ledger accounts, ensure that you have set up the basic general ledger settings. For more information about general ledger settings, go to [To set up basic General Ledger settings on page 767](#).

- From the OfficeMate Administration main window, click **Setup** and select **General Ledger Setup**.
- Click the **Account Setup** tab.
- Select **Rigid Account Number Structure** from the **Account Number Structure** drop-down menu.

NOTE You must select Rigid Account Number Structure if you are using MAS 90/MAS 200.

4. Complete the General Ledger Account Number Format.
 - a. For each of the segments in your account numbers, select Alpha or Numeric from the drop-down menu
 - b. Select the number of characters for the segment.
 - c. If a segment of your account numbers is reserved for a location identifier, select the segment from the **Segment for Location ID** drop-down menu.

NOTES

- For example, if the location number precedes the account number, select **1** from the Segment for Location ID drop-down menu. If the location number succeeds the account number, select **2**.
- The location identifier segment must be set to the same number of characters entered in the G/L Location ID text box on the Location Maintenance window. The G/L Location ID may be any number of letters or numbers, but you must be consistent from location to location. For more information about entering the G/L Location ID, go to [Maintaining Locations on page 24](#).
- The Sample Account Number field is for display purposes only. The field updates to visually display the segment selections you have made.

5. The default character that separates segments is a hyphen (-), but if your accounting system uses a different character, type that character in the **Segment Separator Character** text box.
6. Add, edit, or delete general ledger accounts as needed:
 - To add an account, click **New**. Type the account number and account name. Tab out of the Account Name field when you are finished.
 - To edit an account, select an account from the **Current Accounts** drop-down menu. Type your changes in the **Account Number** and

Account Name fields. Tab out of the Account Name field when you are finished.

- To delete an account, select an account from the **Current Accounts** drop-down menu and click **Delete**. Tab out of the Account Name field when you are finished.

NOTE

Select the **Sort by Name** check box to list accounts by name rather than by number.

Changes are automatically saved when you click **New**, select another account from the Current Accounts drop-down menu, or click to another tab.

7. Click **OK** when you are finished

OR

Continue setting up system accounts. For information about setting up system accounts, go to [To correlate general ledger accounts to system accounts on page 775](#).

► **To set up General Ledger accounts for QuickBooks**

NOTES

- Prior to setting up general ledger accounts, ensure that you have set up the basic general ledger settings. For more information about general ledger settings, go to [To set up basic General Ledger settings on page 767](#).
- Prior to setting up general ledger accounts, you must have already have set up account names and numbers in QuickBooks.
- If QuickBooks is not already open on the computer on which you are setting up the General Ledger Interface, open QuickBooks now. Open the main QuickBooks company.
- Each time an account is added, changed, or deleted, you must Import the accounts again using the main QuickBooks company to get the new accounts. Importing accounts is described in this section.

1. From the OfficeMate Administration main window, click **Setup** and select **General Ledger Setup**.
2. Click the **Account Setup** tab.
3. Select a structure from the Account Number Structure drop-down menu:
 - Select **Rigid Account Number Structure** if your QuickBooks account numbers follow a standard length and format.
 - Select **Free Form Account Numbers** if your account numbers vary in length and format.
4. Click **Import Accounts** to import accounts from QuickBooks.

The QuickBooks Chart of Accounts window opens.

QuickBooks Chart of Accounts Import

This process will synchronize all G/L account numbers and names from QuickBooks.
QuickBooks must be already running on this system and open to the proper company.

QuickBooks Data Company: **Bayview Eyecare**

Accounts Status		
	Active Accounts	Inactive Accounts
Accounts Before Import:	0	0
Accounts After Import:	59	0

Accounts Modified: 0

New Accounts Created: 59

Existing Accounts set to Inactive: 0

Inactive Accounts re-activated: 0

Accounts Unchanged: 0

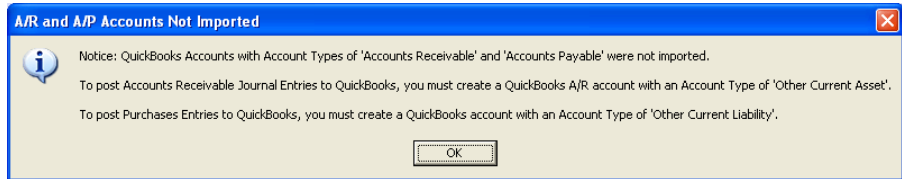
QuickBooks Accounts Not Imported: 1

Import Completed!

Import Close

5. Click **Import**.

If any of your QuickBooks accounts are categorized as accounts receivable or accounts payable, the **A/R and A/P Accounts Not Imported** dialog box opens.



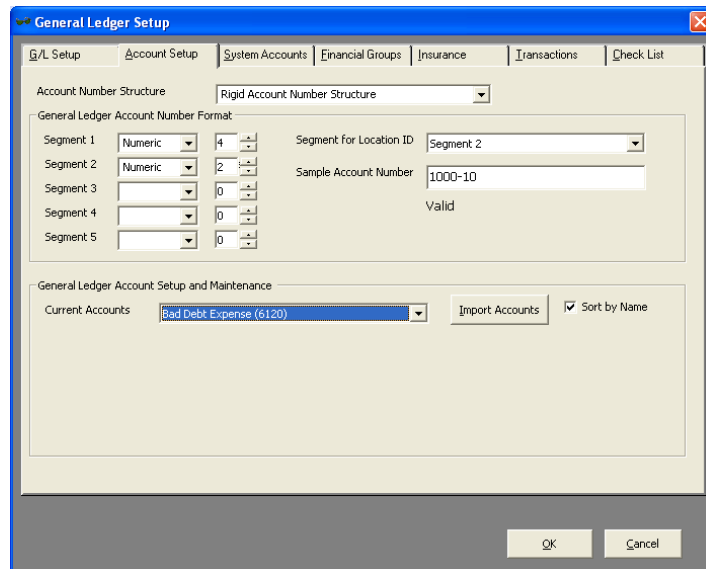
6. Click **OK**.

7. Click **Close** on the **QuickBooks Chart of Accounts** window.

The accounts that you imported are listed in the Current Accounts drop-down menu.

NOTE

To sort the accounts by name rather than by account number, select the **Sort by Name** check box.



8. Click **OK** when you are finished

OR

Continue by setting up system accounts. For information about setting up system accounts, go to [To correlate general ledger accounts to system accounts on page 775](#).

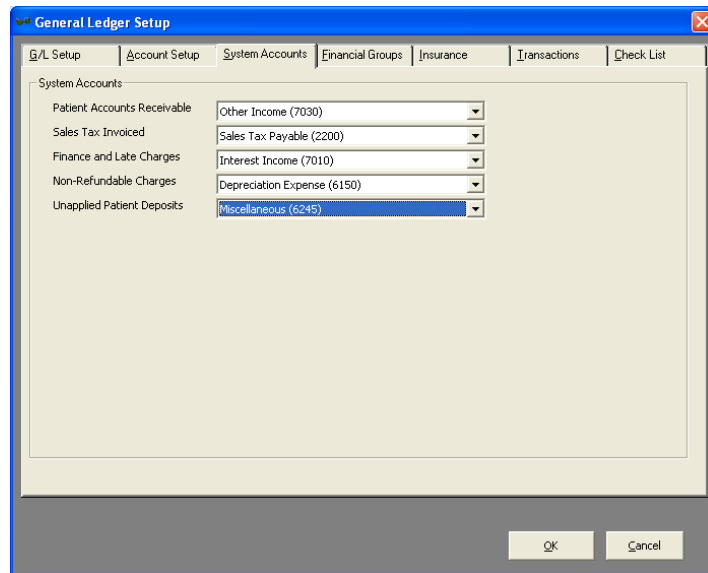
► **To correlate general ledger accounts to system accounts**

NOTE Prior to correlating general ledger accounts to system accounts, ensure that you have set up general ledger accounts. For information about setting up general ledger accounts, go to [To set up General Ledger accounts for MAS 90/MAS 200 on page 770](#) or [To set up General Ledger accounts for QuickBooks on page 773](#).

1. From the OfficeMate Administration main window, click **Setup** and select **General Ledger Setup**.
2. Click the **System Accounts** tab.
3. For each system account, select a corresponding general ledger account from the drop-down menus. Refer to the following table for information about each account.

This Account...	Represents...
Patient Accounts Receivable	<p>All money owed by patients.</p> <ul style="list-style-type: none"> • When a fee slip is created, the amount of the sale is debited to this account. • When a payment is applied to a fee slip for the patient, the amount is credited to this account. • When fee slip adjustments are made, the balance of this account is affected. • The sum of all debits and credits posted to this account match the total increase or decrease in the patient's balance.
Sales Tax Invoiced	<p>The total amount of tax charged on fee slips (regardless of whether that tax has been collected).</p> <p>QuickBooks users cannot use the Sales Tax Payable account. You must setup a new sales tax payable account with an Account Type of Other Current Liability.</p>
Finance and Late Charges	<p>The total amount of all finance charges, late charges, and service charges assessed to patients.</p> <p>QuickBooks users must post Finance and Late Charges only from each location. Do not post late charges from OfficeMate Administration.</p>
Non-refundable Charges	<p>The patient charges when a product is returned. For example, restocking fees, handling charges.</p>

This Account...	Represents...
Unapplied Patient Deposits	The total of all patient deposits collected that have not yet been applied to a specific fee slip balance. If a sale is made the entry is debited from the Unapplied Patient Deposits account. When the payment is made, the entry is credited to the Unapplied Patient Deposits accounts.



- Click **OK** when you are finished.

OR

Continue by assigning general ledger accounts to financial groups. For more information about assigning general ledger accounts to financial groups, go to [To assign general ledger accounts to financial groups on page 776](#).

► To assign general ledger accounts to financial groups

NOTE

Prior to assigning general ledger accounts to financial groups, ensure that you have set up general ledger accounts. For information about setting up general ledger accounts, go to [To set up General Ledger accounts for MAS 90/MAS 200 on page 770](#) or [To set up General Ledger accounts for QuickBooks on page 773](#).

- From the OfficeMate Administration main window, click **Setup** and select **General Ledger Setup**.
- Click the **Financial Groups** tab.

3. Select a financial group from the **Financial Report Group** drop-down menu.

NOTE	If you want to assign general ledger accounts to inactive financial groups, select the Include Removed Groups check boxes.
-------------	---

4. Select a general ledger account from the drop-down menus for each account type in the Sales Accounts group.

NOTE	The drop-down menus that are highlighted in yellow are required.
-------------	--

This Account...	Represents...
Sales	The total of the selling price for each product sold. The account is credited for the sales amount of each product sold. If a discount account is not selected, the Sale is credited net of discounts.
Returns	The total selling price for each product returned as a fee slip adjustment. The account is debited for the sales amount of the returned items. The return is debited net of discounts.
Discounts	The total amount of discounts applied to sales items. The amount include package discounts, discounts and insurance discounts before and after allotments. The exported entry is a debit to the Discount account and a credit to the Gross Sales account. If the field is left blank, the entry is a credit to the Sales account, which is the gross amount less the discounts.

5. Select a general ledger account from the drop-down menus for each account type in the Inventory Accounts group.

NOTE	The drop-down menus that are highlighted in yellow are required.
-------------	--

This Account...	Represents...
Inventory	The total value of on-hand inventory for all products in the Financial Report group. This accounts gets debited whenever on-hand quantity gets increased (e.g., purchase order receipt) and credited whenever on-hand quantity is decreased (e.g., sold on a Fee Slip). This inventory amount will be based on the inventory valuation method specified in the G/L Setup tab. For more information about inventory valuation methods, go to Understanding Inventory Valuation Methods on page 793 .

This Account...	Represents...
Cost of Goods Sold	The value of the products sold based on the inventory valuation method and the items' purchase cost (not selling price) of all products sold on fee slips. This account is debited whenever products are sold and credited on product returns.
Inventory in Transit	The inventory value of items that are transferred from one location to another. If you are using QuickBooks with multiple companies, this account will never be zero.
Inventory Adjustments	The change in inventory value when product adjustment transactions are posted. This account is credited by the inventory adjustment value for positive inventory adjustment transactions and debited for negative adjustments. This account number serves as a default adjustment account, but may be overridden by an adjustment account associated with the adjustment reason used on the transaction. Adjustment examples are inventory returned to vendors, items added to inventory, etc.
Purchases	The cost value of all inventory received through purchase order or inventory adjustment receipt transactions. This account may be used for accounts payable or a purchases clearing. This account gets credited for the amount of the receipt. The entry is a debit to inventory and a credit to purchases.

- Repeat steps 3–5 for each Financial Report Group.

- Click **OK** when you are finished

OR

Continue by assigning general ledger accounts to insurance carriers. For information about assigning general ledger accounts to insurance carriers, go to [To assign general ledger accounts to insurance carriers on page 779](#).

► To assign general ledger accounts to insurance carriers

NOTE

Prior to assigning general ledger accounts to insurance carriers, ensure that you have set up general ledger accounts. For information about setting up general ledger accounts, go to [To set up General Ledger accounts for MAS 90/MAS 200 on page 770](#) or [To set up General Ledger accounts for QuickBooks on page 773](#).

- From the OfficeMate Administration main window, click **Setup** and select **General Ledger Setup**.
- Click the **Insurance** tab.
- Select **Default Insurance Accounts** from the **Insurance** drop-down menu to assign default general ledger accounts to *all* insurance carriers

OR

Select a specific insurance carrier from the **Insurance** drop-down menu to set a general ledger account that deviates from the default general ledger accounts.

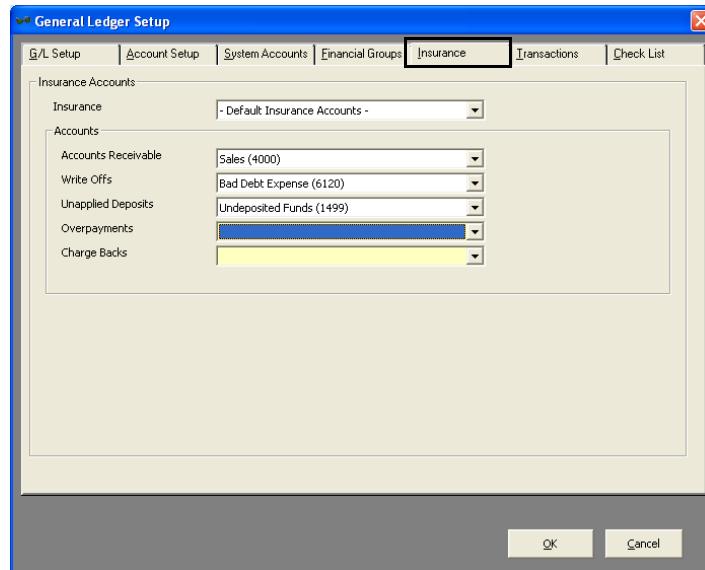
4. Select a general ledger account from the drop-down menus for each account type in the Accounts group. Refer to the following table for information about each account.

This Account...	Represents...
Accounts Receivable	<p>All amounts owed by all insurance companies except those specifically allocated to a different account.</p> <ul style="list-style-type: none"> • When a specific insurance carrier is selected and a general ledger account is selected, this account represents all money owed by the specified insurance carrier. • When a fee slip is created, the amount of the sale charged to this insurance company is debited from this account. • When fee slip adjustments are made, the balance of this account is affected. • The sum of all debits and credits posted to this account match the total balance increase or decrease for this insurance company or all insurance companies if the account is set as the default.
Write Offs	The total of all amounts written off.
Unapplied Deposits	The total of all insurance deposits collected that have not yet been applied to specific insurance charges. Posting corrections also affect this account.
Overpayments	The total of all insurance company overpayments that have not yet been applied.
Chargebacks	The total of all chargebacks.

NOTE

The drop-down menus that are highlighted in yellow are required.

- Repeat steps 3–4 for each insurance carrier if you are assigning different general ledger accounts for specific insurance carriers.



- Click **OK** when you are finished
OR

Continue by assigning general ledger accounts to insurance carriers. For information about assigning general ledger accounts to insurance carriers, go to [To assign general ledger accounts to transaction adjustments on page 781](#).

► To assign general ledger accounts to transaction adjustments

NOTE

Prior to assigning general ledger accounts to transaction adjustment accounts, ensure that you have set up general ledger accounts. For information about setting up general ledger accounts, go to [To set up General Ledger accounts for MAS 90/MAS 200 on page 770](#) or [To set up General Ledger accounts for QuickBooks on page 773](#).

- From the OfficeMate Administration main window, click **Setup** and select **General Ledger Setup**.
- Click the **Transactions** tab.

3. Select a transaction type from the **Payment/Adjustment Type** drop-down menu. Refer to the following table for information about each transaction type.

This Transaction Type...	Represents...
End of Day Variance Reasons	Overages and shortages of cash drawer reconciliation. Variances that are short are debited from this account and credited to the Cash Account specified on the System Accounts tab. The debits and credits are reversed for variances that are overages.
Fee Slip Adjustment Types	User-defined Fee Slip Adjustment types. Fee slip balance reductions are debited from this account and credited to the Patient Account receivable Account specified on the System Accounts tab. Debits and credits are reversed for fee slip balance increases.
Inventory Adjustment Reasons	Inventory adjustments. Transactions that reduce inventory are debited from the Inventory account specified on the Financial Groups tab and credited to this account. Debits and credits are reversed for transactions that increase inventory.
Credit Card, Debit Card, and Other payment Types	Patient payment transactions. Payments are credited to the Patient Accounts Receivable account specified on the System Accounts tab and debited from this account.

4. Select the specific transaction from the **Description** drop-down menu.

NOTE Select the **Include Removed Descriptions** check box to assign general ledger accounts to inactive transactions.

5. Select the general ledger account that you want to associate with the transaction that you selected in step 4 from the **Payment/Adjustment Account** drop-down menu.

- Repeat steps 3–5 for each transaction type and each transaction.

The screenshot shows the 'General Ledger Setup' dialog box with the 'Transactions' tab selected. The 'Payment and Adjustment Accounts' section contains the following fields:

- Payment/Adjustment Type:** End of Day Variance Reasons
- Description:** Over/Short
- Include Removed Descriptions:**

The 'Accounts' section contains the following field:

- Payment/Adjustment Account:** Miscellaneous (6245)

At the bottom of the dialog box are 'OK' and 'Cancel' buttons.

- Click **OK** when you are finished

OR

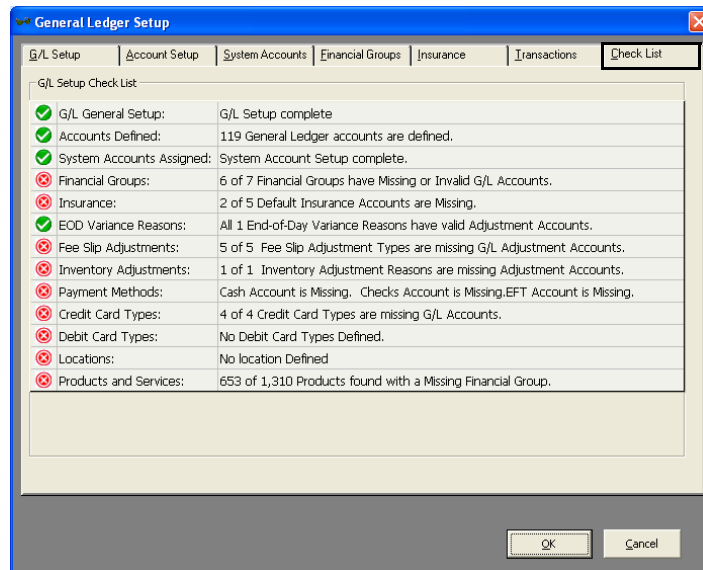
Continue by verifying that your general ledger setup is complete. For information about verifying that your general ledger setup is complete, go to [To view the General Ledger Setup Check List on page 783](#).

► **To view the General Ledger Setup Check List**

- From the OfficeMate Administration main window, click **Setup** and select **General Ledger Setup**.
- Click the **Check List** tab.

The check list is a summary of areas of the General Ledger Interface that have been setup, items that still need to be setup, and items that have invalid accounts.

3. Review the items listed under G/L Setup Check List.
 - If the item appears with a green check mark, the item has been completed.
 - If the item appears with a red X, you must return to the item to complete the general ledger setup.
 - If an item appears with a yellow warning icon, the item uses an invalid account, and you must return to the item to select a valid account.



NOTES

- To view a list of a general ledger setup parameters, run the General Ledger Setup Listing report. For information on running this report, go to [General Ledger Setup Listing on page 662](#).
- If an account is listed as invalid, return to the appropriate General Ledger Setup tab. You may need to select the Include Removed Descriptions check box to see the invalid account. Return to the Check List tab to ensure the accounts are valid.
- If Financial Groups are missing in the Products and Services area, transactions will be exported using the default accounts.

4. Click **OK** when you are finished.

Using the General Ledger Interface to Export Transactions

The General Ledger Export Process collects OfficeMate transactions and creates the General Ledger postings necessary to keep the accounting system in sync with OfficeMate activity.

NOTE Protect your practice! Back up your QuickBooks or MAS 90/MAS 200 data before importing the OfficeMate journal entries into the accounting system.

This section describes how to set up the General Ledger Interface, including how

- To open the General Ledger Export window, 785
- To export transactions to MAS 90/MAS 200, 786
- To set up MAS general ledger exchange settings, 788
- To import transactions into MAS 90/MAS 200, 789
- To post transactions to the MAS 90/MAS 200 ledger, 789
- To export journal entries to QuickBooks, 790
- To research exported transactions, 792

► To open the General Ledger Export window

1. From the OfficeMate Administration main window, click **Tasks**.
2. Select **General Ledger Export**.

The General Ledger Export window opens.

General Ledger Export

From: 6/9/2009 To: 6/30/2009 Include Previously Exported

Process Transactions

Location	06/09/09	06/10/09	06/11/09	06/12/09	06/13/09	06/14/09	06/15/09	06/16/09	06/17/09	06/18/09	06/19/09
1 Arvi Optical Store	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK
2 AV Store	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK
3 Costa Mesa Store	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD
4 Fullerton Store	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD
5 glsdagf's	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD
6 Grapevine Boutique Store	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK
7 Home Office Irvine	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK
8 Jessica's Store	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK
9 Lab	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK
10 Laguna Beach Store	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD
11 Lake Forest Store	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD	No EOD
12 Long Beach DC	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK
13 DSS Store	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK
14 Pacific Park Store	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

Status of Transactions
End of Days to Process: 264 Clean Transactions: Errors: Show Errors

Processed Transactions Summary

Date	Source	Trans #	Transaction Comment	Trans ID
------	--------	---------	---------------------	----------

Export Transactions to Ledger View Export File Research Close

► **To export transactions to MAS 90/MAS 200**

NOTE Protect your practice! Back up your MAS 90/MAS 200 data before importing the OfficeMate journal entries into the accounting system.

1. Open the General Ledger Export window. For more information about opening the General Ledger Export window, go to [To open the General Ledger Export window on page 785](#).
2. Select the beginning and ending posting dates from the **From** and **To** fields.

NOTES

- The To date can be no later than one day prior to the current posting date.
- To export a single day's transactions, select a posting date from the From field and click the = button.
- A maximum of 31 days can be exported at one time.

3. Review the Location End-of-Day Status table.

This status...	Means this...
OK	The location has performed the end-of-day process for this date. Transactions are ready to be exported as general ledger postings.
No EOD	The location has not performed the end-of-day process for this date. Transactions may not be exported as general ledger postings until the end-of-day process is complete.
Exported	The transactions for this date and location have already been exported. To export them again, click the Include Previously Exported check box.
No Prior EOD	The location has performed the end-of-day process for this date; however, this day may not be exported until the prior day has been exported for this location.
OK-Redo	The transactions for this date and location have already been exported but will be included again in the current export session. This only occurs when the Include Previously Exported check box is selected.

4. If you need to include previously exported transactions or export a prior period because changes were made, select the **Include Previously Exported** check box.
5. Click **Process Transactions** to create the general ledger export file.
OfficeMate processes the transactions for export. When the process is finished, OfficeMate displays a list of transactions that were processed successfully and a list of errors. No transactions are exported if errors are displayed.
6. If no errors are displayed, go to step 7. If any errors are displayed, note the errors, correct the errors in the **General Ledger Setup** window or **Products**

window as needed, and reprocess the transactions in the **General Ledger Export** window. For information about setting up the General Ledger Interface, go to [Setting Up the General Ledger Interface on page 766](#). For information about maintaining product information, go to [Recording Product Information on page 263](#).

7. Click **Export Transactions to Ledger** to export the transactions into the accounting system file, which is in the OfficeMate\DATA\GL folder (if you are a new user or were an OfficeMate Enterprise user who upgraded to OfficeMate 9.0 or above) or OMATE32\DATA\GL folder (if you were an OfficeMate user who upgraded to OfficeMate 9.0 or above).
8. To view exported general ledger transactions, click **View Export File**.

NOTE

The export file is in CSV format. The exported general ledger transactions opens in the program your computer associates with CSV files. Often, CSV files are opened in Notepad or Excel

9. To research the detailed data that composes each exported general ledger transaction, click **Research**. For more information about researching general ledger transactions, go to [To research exported transactions on page 792](#).

10. Click **Close** when you are finished.

The general ledger transactions are now ready to be imported into MAS 90 or MAS 200. For more information about importing transactions into MAS 90 or MAS 200, go to [To set up MAS general ledger exchange settings on page 788](#).

► **To set up MAS general ledger exchange settings**

NOTE This section provides a high-level overview of setting up the MAS General Ledger Exchange to import OfficeMate general ledger transactions. For more information about importing transactions into MAS 90 or MAS 200, refer to the documentation provided by Sage Business Solutions.

1. Open MAS 90 or MAS 200.
2. Click **Modules**, select **General Ledger**, select, **Utilities**, and select **General Ledger Exchange**.
The General Ledger Exchange Settings Wizard opens.
3. Click **Next** to continue.
4. Select the **Import Data** radio button and click **Next**.
5. Select **Transactions** from the **What Type of Data Do You Want to Import** drop-down menu and click **Next**.
6. Type a name for these exchange settings in the text field provided. For example, "OfficeMate Import."
7. Type a description for these exchange settings in the text field provided. For example, "Import OfficeMate Journal Entries."
8. Click **Next**.
9. Deselect the **Allow Out-of-Balance Transactions** check box.
10. Select the **Create Source Journals as Needed** check box.
11. Select **Import entry using the next journal number** from the **Duplicate Transaction Procedure** drop-down menu.
12. Click **Next**.
13. Select the **Create Main Accounts as Needed** check box.
14. Select the **Create Sub Accounts as Needed** check box.
15. Click **Next**.
16. Select **All from the Opened** column drop-down menus for each item listed in the Select Field column and click **Next**.
17. Select **CSV** from the **Exchange File Type** drop-down menu.
18. Type the path and filename of the OfficeMate export file in the **Exchange File Name** text field.

NOTES

- The default location is C:\OfficeMate\GL\GIIImport.csv.
- The file cannot be imported while it is open in Excel.
- Never modify the CSV file using Excel or other spreadsheet application. Modifying the file corrupts the necessary MAS parameters.

19. Click **Next**.
20. Select the **Standard File Format** radio button and click **Next**.
21. Deselect the **Execute the exchange when clicking Finish** check box.
22. Click **Finish** to save the exchange settings.

23. Continue by importing transactions into MAS 90/MAS 200. For more information, go to [To import transactions into MAS 90/MAS 200 on page 789](#).

► To import transactions into MAS 90/MAS 200

NOTES

This section provides a high-level overview of importing OfficeMate general ledger transactions. For more information about importing transactions into MAS 90 or MAS 200, refer to the documentation provided by Sage Business Solutions.

Prior to performing these steps, ensure that you have set up the MAS general ledger exchange settings. For more information, go to [To set up MAS general ledger exchange settings on page 788](#).

1. Open MAS 90 or MAS 200.
2. Click **Modules**, select **General Ledger**, select, **Utilities**, and select **General Ledger Exchange**.

The General Ledger Exchange window opens.

3. Select the OfficeMate exchange setting and click Proceed. If an OfficeMate exchange setting is not listed, go to [To set up MAS general ledger exchange settings on page 788](#) for information on setting up the exchange.
4. Continue by posting transactions to the MAS 90/MAS 200 ledger. For more information, go to [To post transactions to the MAS 90/MAS 200 ledger on page 789](#).

► To post transactions to the MAS 90/MAS 200 ledger

NOTES

This section provides a high-level overview of importing OfficeMate general ledger transactions. For more information about importing transactions into MAS 90 or MAS 200, refer to the documentation provided by Sage Business Solutions.

Prior to performing these steps, ensure that you have imported OfficeMate transactions into MAS 90/Mas 200. For more information, go to [To import transactions into MAS 90/MAS 200 on page 789](#).

1. Open MAS 90 or MAS 200.
2. Click **Modules**, select **General Ledger**, select, **Main**, and select **General Journal**.
The General Journal window opens.
3. Click **Preview** to preview the journal entries as needed.
4. Click **Print** to print the journal.
5. When prompted, click **Yes** to update the general journal.
6. Click **Proceed**.
7. When prompted click **Yes** to test the exchange settings. If errors are encountered contact Sage or review the documentation provided by Sage Business Solutions.

8. Click **Yes** to post the transactions to the general journal.

► **To export journal entries to QuickBooks**

NOTE Protect your practice! Back up your QuickBooks data before importing the OfficeMate journal entries into the accounting system.

1. Open the General Ledger Export window. For more information about opening the General Ledger Export window, go to [To open the General Ledger Export window on page 785](#).

NOTE If QuickBooks is not already open on the computer on which you are exporting general ledger transactions, open QuickBooks now.

2. Select the beginning and ending transaction dates from the **From** and **To** fields.

NOTE The To date can be no later than one day prior to the current processing date.

3. Review the Location End-of-Day Status table.

This status...	Means this...
OK	The location has performed the end-of-day process for this date. Transactions are ready to be exported as general ledger postings.
No EOD	The location has not performed the end-of-day process for this date. Transactions may not be exported as general ledger postings until the end-of-day process is complete.
Exported	The transactions for this date and location have already been exported. To export them again, click the Include Previously Exported check box.
No Prior EOD	The location has performed the end-of-day process for this date; however, this day may not be exported until the prior day has been exported for this location.
OK-Redo	The transactions for this date and location have already been exported but will be included again in the current export session. This only occurs when the Include Previously Exported check box is selected.

4. If you need to include previously exported transactions, select the **Include Previously Exported** check box.

NOTE If you are reprocessing previously exported transactions, delete the previously exported journal entries from QuickBooks.

5. Click **Process Transactions** to create the general ledger export file.
OfficeMate processes the transactions for export. When the process is finished, OfficeMate displays a list of transactions that were processed successfully and a list of errors. No transactions are exported if errors are displayed.
6. If no errors are displayed, go to step 7. If any errors are displayed, note the errors, correct the errors in the General Ledger Setup window or Products window as needed, and reprocess the transactions in the General Ledger Export window. For information about setting up the General Ledger Interface, go to [Setting Up the General Ledger Interface on page 766](#). For information about maintaining product information, go to [Recording Product Information on page 263](#).
7. If you are exporting general ledger transactions to multiple QuickBooks companies, select a location from the **Export To QuickBooks Location** drop-down menu; otherwise, skip to step 8.

NOTE Ensure that the QuickBooks company associated with the location you select is open in QuickBooks.

8. Click **Export Transactions to Ledger** to export the transactions QuickBooks.

The Export Complete dialog box confirms that the export file was created.

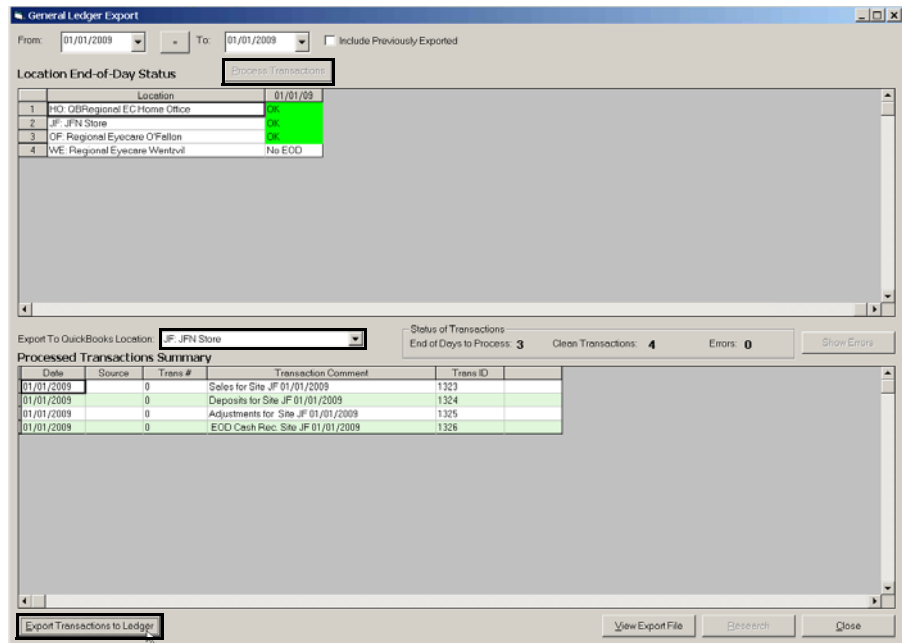
NOTE If, you receive an export error referring to a document number or account, there may be missing accounts. Go to the Check List tab of the General Ledger Setup window to see if there are any missing accounts. Correct the errors and export the transactions again. For information about the Check List tab, go to [To view the General Ledger Setup Check List on page 783](#). If no invalid accounts are listed, verify that the account number in the error message is in the QuickBooks location's Chart of Accounts.

9. Click **OK**.
10. To view exported general ledger transactions, click **View Export File**.

NOTE The export file is in CSV format. The exported general ledger transactions opens in the program your computer associates with CSV files. Often, CSV files are opened in Notepad or Excel

11. To research the detailed data that composes each exported general ledger transaction, click **Research**. For more information about researching

general ledger transactions, go to [To research exported transactions on page 792](#).



12. If you are exporting general ledger transactions to multiple QuickBooks companies, open the next company in QuickBooks and repeat steps 7–11.
13. Click **Close** when you are finished.

► **To research exported transactions**

NOTE Use the research tool to view individual OfficeMate transactions or locate fee slip numbers, adjustment transaction numbers, or patient numbers.

1. Open the General Ledger Export window. For more information about opening the General Ledger Export window, go to [To open the General Ledger Export window on page 785](#).
2. Click **Research**.
The G/L Export Research Tool window opens.
3. Type or select a date from the **Transaction Date** field.
4. Select a location from the **Location** drop-down menu.
5. Click **Find**.
OfficeMate displays general ledger transactions that match your search criteria.
6. Select a transaction from the list to display the general ledger transaction details.
OR
Type a transaction number in the **Transaction No.** field.

7. Click the **By Account** tab to view general ledger transactions by general ledger account number.

OR

Click the **By Document** tab to view general ledger transactions by fee slip number or adjustment number.

NOTES

- Document numbers are the same as either the fee slip number, inventory adjustment number, deposit number, or purchase order batch number, depending on the type of transaction. Use the document number to find individual transactions in OfficeMate.
- Numbers in parentheses that follow patient names are OfficeMate patient numbers.
- Numbers in parentheses that follow product names are OfficeMate product numbers.

8. Review the transaction details as needed.

The screenshot displays the 'G/L Export Research Tool' window. At the top, there are fields for 'Transaction Date' (6/11/2009) and 'Location' (All Locations-), with an 'Find' button. Below this is a table titled 'General Ledger Transactions' with columns for 'Trans. No.', 'Location', and 'Comment'. The table lists several transactions, with transaction 35 selected. Below the table, there is a 'Transaction No.' field containing '35' and a 'Find' button. The bottom section is titled 'Transaction Details' and has two tabs: 'By Account' (selected) and 'By Document'. The 'By Account' tab shows a table titled 'Transaction Details by G/L Account' with columns for 'Trans. No.', 'Account', 'Account Name', 'Debit', and 'Credit'. The table shows a credit of 35.00 to the '1000-00-X) Petty Cash' account. Below this, there is a sub-table with columns for 'Detail #', 'Document', 'Detail Comment', 'Debit', and 'Credit', listing various items with their respective debit and credit amounts. A 'Close' button is located at the bottom right of the window.

9. Click **Close** when you are finished.

Under- standing Inventory Valuation Methods

The value of inventory is maintained in the accounting system by one or more inventory general ledger accounts. Accountants and auditors may verify this value against the Inventory Valuation report in OfficeMate.

The Inventory Valuation report calculates the total inventory value, for one or all locations, by multiplying the quantity on hand by the valuation cost for each product and adding the sum total. The Inventory Valuation report may be run for one or more financial groups. The value of individual products depends on the valuation method (or costing method) as prescribed by company policy and

specified in the G/L Setup tab of the General Ledger Setup window. Two inventory valuation methods are supported in OfficeMate:

- [Standard Costing on page 794](#)
- [Average Costing on page 794](#)

Additional valuation methods may be added in future versions of OfficeMate.

Standard Costing

Standard costing is the simplest inventory valuation method. When Standard Costing is selected, the value of each item is set in the Product Cost text box on the Product window in OfficeMate. This cost value may be changed manually or updated automatically whenever product is received. The major disadvantage of standard costing is that when the cost of an item is changed and there is quantity on hand, the total inventory value as reported on the Inventory Valuation report is also changed. However, because no actual transaction is taking place, the change in cost is not reflected in the accounting system. Therefore, the value of inventory in the accounting system can not be accurately verified against the production system.

NOTE

For information about setting your inventory valuation method in OfficeMate, go to [To set up basic General Ledger settings on page 767](#).

Average Costing

Average costing is somewhat more complex, but provides for a much more auditable inventory value, consistent with the value exported to the accounting system. When Average Costing is selected, OfficeMate calculates each product's average cost such that the total inventory value matches the value of inventory as exported to the accounting system.

The average cost of each product is calculated whenever the product is received into inventory, according to the following formula:

$$\text{Average Cost} = \frac{((\text{Prior Qty on Hand} \times \text{Prior Avg Cost}) + (\text{Received Qty} \times \text{Received Cost}))}{(\text{Prior Qty on Hand} + \text{Received Qty})}$$

For example, if a initial quantity of 10 of a given product is received at a cost of \$100 each, the average cost for the product is calculated as

$$\frac{(0 \times \$0) + (10 \times \$100)}{0 + 10} = \$100$$

When the item receipt transaction is posted to the accounting system, the inventory value reported is $10 \times \$100 = \1000 . This is the same value reported by the Inventory Valuation report.

Next, if 2 more units of that same product are received, but at a new cost of \$130 each, the system will export the additional \$260 inventory value (2 × \$130) to the accounting system. The product's new average cost is calculated as

$$\frac{(10 \times \$100) + (2 \times \$130)}{10 + 2} = \frac{\$1,260}{12} = \$105$$

This value is stored with the product and used on the Inventory Valuation report. The report would show an inventory value of 12 (on hand) × \$105 (average cost) for an inventory value of \$1,260.

This is the same as the total inventory value exported to the accounting system: \$1,000 (first receipt) + \$260 (second receipt) = \$1,260.

When that product is sold, the value of inventory is reduced by the quantity sold multiplied by the average cost. A new average cost is not recalculated when the product is sold or otherwise reduced.

Because the total inventory value reported in the Valuation Report is the same as the net inventory value exported to the accounting system, auditors can verify the inventory value in the accounting system by using reports from OfficeMate. This level of auditability is not possible when using Standard Cost as an Inventory Valuation Method.

NOTE

For information about setting your inventory valuation method in OfficeMate, go to [To set up basic General Ledger settings on page 767](#).

Understanding Individual Transaction Postings

Refer to the following tables for information about OfficeMate account debits and credits when setting up the General Ledger Interface:

- Receipt of Goods from Purchase Order or Inventory Adjustment (Receipt), 796
- Return of Goods (to Vendor), 796
- Inventory Adjustment, 797
- Inventory Transfer from One Location to Another (Not Yet Received), 797
- Inventory Receipt of Transfer, 797
- Sales of Products to Customer (Fee Slip), 797
- Sales Return/Refund Transaction, 798
- Patient Payment Transaction (Applied to a Fee Slip), 798
- Application of Prior Patient Deposit to a Fee Slip, 799
- Insurance Claim, 799
- Insurance Deposit, 799
- Application of Insurance Deposit to Claims, 799
- Insurance Denial (Transfer of Charges to Patient), 800
- Insurance Write-Off, 800
- User Defined Fee Slip Adjustment, 800
- Finance Charge, 801
- End of Day Cash Drawer Reconciliation, 801

Receipt of Goods from Purchase Order or Inventory Adjustment (Receipt)

Account (Source)	Debit	Credit
Inventory (financial group)	(Quantity) × (Cost Received)	
Purchases (financial group)		(Quantity) × (Cost Received)

Return of Goods (to Vendor)

Account (Source)	Debit	Credit
Purchases (financial group)	(Quantity) × (Cost Used when Returned)	
Inventory (financial group)		(Quantity) × (Cost of Inventory from Item's Valuation)
Inventory Adjustments (financial group)	Variance between returned cost and valuation cost.	

Inventory Adjustment

Account (Source)	Debit	Credit
Inventory (financial group)	(Quantity Adjusted) × (Cost of Items Adjusted)	
Inventory Adjustments (financial group or adjustment reason)		(Quantity Adjusted) × (Cost of Items Adjusted)

Inventory Transfer from One Location to Another (Not Yet Received)

Account (Source)	Debit	Credit
Inventory in Transit (financial group) for destination site	(Quantity) × (Cost of Items Transferred)	
Inventory (financial group) for source site		(Quantity) × (Cost of Items Transferred)

Inventory Receipt of Transfer

Account (Source)	Debit	Credit
Inventory (financial group) for destination site	(Quantity) × (Cost of Items Transferred)	
Inventory in Transit (financial group) for destination site		(Quantity) × (Cost of Items Transferred)

Sales of Products to Customer (Fee Slip)

Account (Source)	Debit	Credit
Patient Accounts Receivable (system accounts)	Price of Merchandise Sold	
Sales (financial group)		Price of Merchandise Sold
Inventory COGS (financial group)	Cost of Merchandise Sold	
Inventory (financial group)		Cost of Merchandise Sold

NOTE Cost is based on the valuation method (Standard or Average) of the item sold at the time of the fee slip creation.

Sales Return/Refund Transaction

Account (Source)	Debit	Credit
Sales Refunds (system accounts)	Price of Merchandise Returned less the Nonrefundable Amount	
Restocking Charges (system accounts)	Nonrefundable Amount	
Patient Accounts Receivable (system accounts)		Price of Merchandise Returned
Inventory COGS (financial group)		Cost of Merchandise Returned
Inventory (financial group)	Cost of Merchandise Returned	

NOTE Cost of returned goods is based on the cost used when the item was sold.

Patient Payment Transaction (Applied to a Fee Slip)

Account (Source)	Debit	Credit
Cash, Check, Credit Card, Other (system accounts)	Payment Amount	
Patient Accounts Receivable (system accounts)		Payment Amount

NOTE For "Other" payments, the Debit Account is determined by "Other Payment Methods" account.

Patient Deposit (Not Applied to a Fee Slip)

Account (Source)	Debit	Credit
Cash, Check, Credit Card, Other (system accounts)	Payment Amount	

Account (Source)	Debit	Credit
Unapplied Patient Deposits (system accounts)		Payment Amount

Application of Prior Patient Deposit to a Fee Slip

Account (Source)	Debit	Credit
Unapplied Patient Deposits (system accounts)	Payment Amount	
Patient Accounts Receivable (system accounts)		Payment Amount

Insurance Claim

Account (Source)	Debit	Credit
Insurance Accounts Receivable (system accounts or insurance override)	Claim Amount	
Patient Accounts Receivable (system accounts)		Claim Amount

Insurance Deposit

Account (Source)	Debit	Credit
Cash, Checks, Credit Cards (system accounts for payment method)	Insurance Deposit Amount	
Insurance Deposits (system accounts or insurance override)		Insurance Deposit Amount

Application of Insurance Deposit to Claims

Account (Source)	Debit	Credit
Insurance Deposits (system accounts or insurance override)	Amount Applied to Claims	

Account (Source)	Debit	Credit
Insurance Accounts Receivable (system accounts or insurance override)		Amount Applied to Claims (not to exceed amount claimed)
Insurance Overpayments (system accounts or insurance override)		Insurance Payment Amount (in excess of amount claimed.)

Insurance Denial (Transfer of Charges to Patient)

Account (Source)	Debit	Credit
Patient Accounts Receivable (system accounts)	Insurance Denial Amount	
Insurance Accounts Receivable (system accounts or insurance override)		Insurance Denial Amount

Insurance Write-Off

Account (Source)	Debit	Credit
Insurance Write-Offs (system accounts or insurance override)	Write-off Amount	
Insurance Accounts Receivable (system accounts or insurance override)		Write-off Amount

User Defined Fee Slip Adjustment

Account (Source)	Debit	Credit
Transaction Account (transaction type)	Adjustment Amount	
Patient Accounts Receivable (location of fee slip being paid)		Adjustment Amount

Finance Charge

Account (Source)	Debit	Credit
Patient Accounts Receivable (system account)	Finance Charge Amount Assessed	
Finance Charges (system account)		Finance Charge Amount Assessed

End of Day Cash Drawer Reconciliation

Account (Source)	Debit	Credit
Reconciliation Reason Account (transaction accounts)	Variance Amount	
Cash, Check, Credit Card, Debit Card, Other (system accounts)		Variance Amount

Using the Task Manager & Internal Bulletins

17

In this chapter:

- [Using the Task Manager, 803](#)
- [Creating & Viewing Internal Bulletins, 807](#)

Using the Task Manager

You can create, track, and assign tasks to specific providers and staff members in OfficeMate. If you record an exam with surgery, examination, test, consult, or laboratory orders and schedule an examination in ExamWRITER, the scheduled orders are displayed in the Orders To Be Scheduled window, which you can then post to the Task Manager. This section tells you how to use the Task Manager, including how

- [To open the Task Manager, 803](#)
- [To add new tasks, 803](#)
- [To post scheduling tasks recorded in ExamWRITER, 804](#)
- [To update tasks, 805](#)
- [To change the date of tasks, 805](#)
- [To record completed tasks, 805](#)
- [To record open tasks, 806](#)
- [To delete tasks, 807](#)
- [To print the task list, 807](#)

► To open the Task Manager

- ❖ On the OfficeMate main window, click Task Manager.
The Task Manager window opens.

NOTES

- Click **Refresh** to refresh the Task Manager.
- To sort the columns in the Task Manager, click the column headings.

► To add new tasks

1. Open the Task Manager window. For more information on opening the Task Manager, go to [To open the Task Manager on page 803](#).
2. Click **New Task**.
The New Task window opens.

For information on using the Task Manager, watch the "Task Manager" video.

3. Select a provider or staff member to whom you want to assign and send the task from the **Send To** drop-down menu.
4. Type or select a date for the task from the **Action date** field.
5. Type a task in the **Subject** text box.
6. Select a priority from the **Priority** drop-down menu.
7. Select the status (open or completed) of the task from the **Task Status Group** drop-down menu.
8. Type notes in the **Notes** text box, if necessary.

9. Click **Save**.

After a task is assigned to a specific provider or staff member, the task is visible in the Task Manager window when the provider or staff member logs into OfficeMate.

NOTE

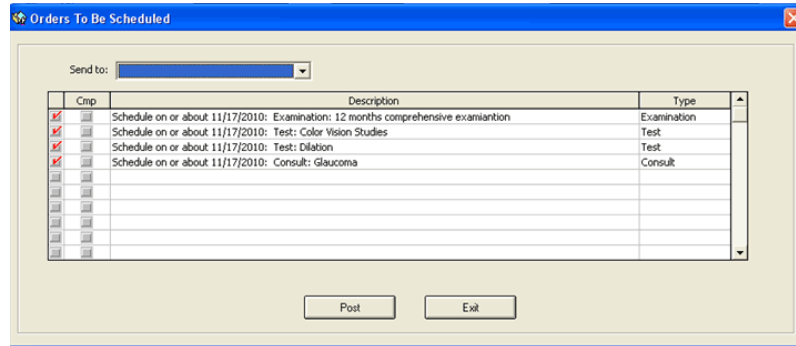
To refresh the Task Manager after creating a task, click **Refresh**.

► **To post scheduling tasks recorded in ExamWRITER**

If you record an exam with surgery, examination, test, consult, or laboratory orders and schedule an examination in ExamWRITER, the scheduled orders are displayed in the Orders To Be Scheduled window in the OfficeMate Task Manager.

1. Open the Task Manager window. For more information on opening the Task Manager, go to [To open the Task Manager on page 803](#).
2. Select the provider or staff member who you want to schedule the orders from the **Send to** drop-down menu.
3. Select the orders to schedule.

- Click **Post**.



► To update tasks

- Open the Task Manager window. For more information on opening the Task Manager, go to [To open the Task Manager on page 803](#).
- Select a task and click **Edit**.
- Click **Forward** to forward the task to a new user, if desired.
The From field displays the current user and the Send To field is blank.
- Edit the task using steps 4–9 in [To add new tasks on page 803](#).

NOTE

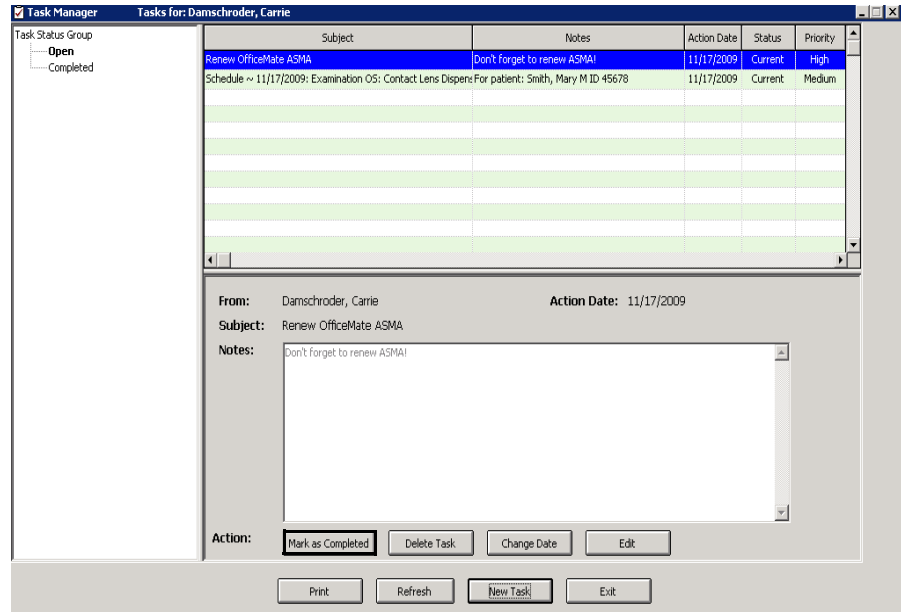
To refresh the Task Manager after updating a task, click Refresh.

► To change the date of tasks

- Open the Task Manager window. For more information on opening the Task Manager, go to [To open the Task Manager on page 803](#).
- Select a task.
- Click **Change Date**.
- Select a new date from the calendar and click **OK**.

► To record completed tasks

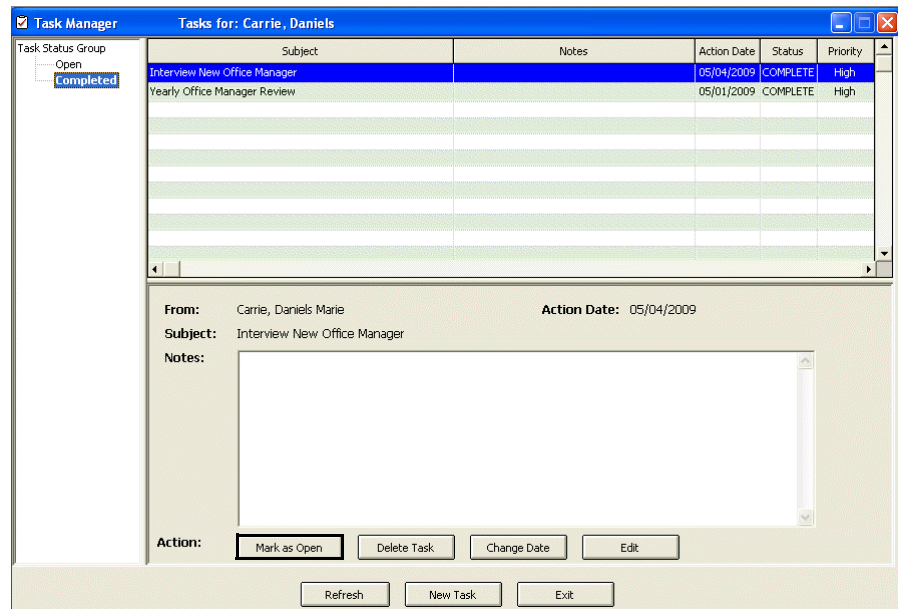
- Open the Task Manager window. For more information on opening the Task Manager, go to [To open the Task Manager on page 803](#).
- Ensure that you are viewing the Open tasks.
- Select an open task in the table.

4. Click **Mark as Completed**.

The task is moved from the Open tasks table to the Completed tasks table.

► **To record open tasks**

1. Open the Task Manager window. For more information on opening the Task Manager, go to [To open the Task Manager on page 803](#).
2. Ensure that you are viewing the Completed tasks.
3. Select a completed task in the table.
4. Click **Mark as Open**.



The task is moved from the Completed tasks table to the Open tasks table.

► **To delete tasks**

1. Open the Task Manager window. For more information on opening the Task Manager, go to [To open the Task Manager on page 803](#).
2. Select a task.
3. Click **Delete Task**.
The Confirm Delete window opens.
4. Click **Yes**.

► **To print the task list**

1. Open the Task Manager window. For more information on opening the Task Manager, go to [To open the Task Manager on page 803](#).
2. Click **Print**.

NOTE To add list box selections on page 37

Creating & Viewing Internal Bulletins

The internal bulletins feature allows you to link to, organize, and view electronic documents and to disseminate information (e.g., policies, procedures, memos) to all locations. Follow the instructions below to store and organize links to electronic documents in OfficeMate. If you are scanning documents and saving them on your computer so that you can link them to insurance carriers and plans, select a standard naming convention to use when naming the documents and save the documents in your OfficeMate\DATA\eDocuments folder (if you are a new user or were an OfficeMate Enterprise user who upgraded to OfficeMate 9.0 or above) or OMATE32\DATA\eDocuments folder (if you were an OfficeMate user who upgraded to OfficeMate 9.0 or above).

This section describes how to use the internal bulletin feature, including how

- [To open the Internal Bulletin window, 807](#)
- [To create internal bulletins, 808](#)
- [To view internal bulletins, 809](#)

► **To open the Internal Bulletin window**

1. Click **Tasks**.
2. Select **Internal Bulletin**.
The Internal Bulletin window opens.

For information on creating internal bulletins, watch the "Internal Bulletin" video.

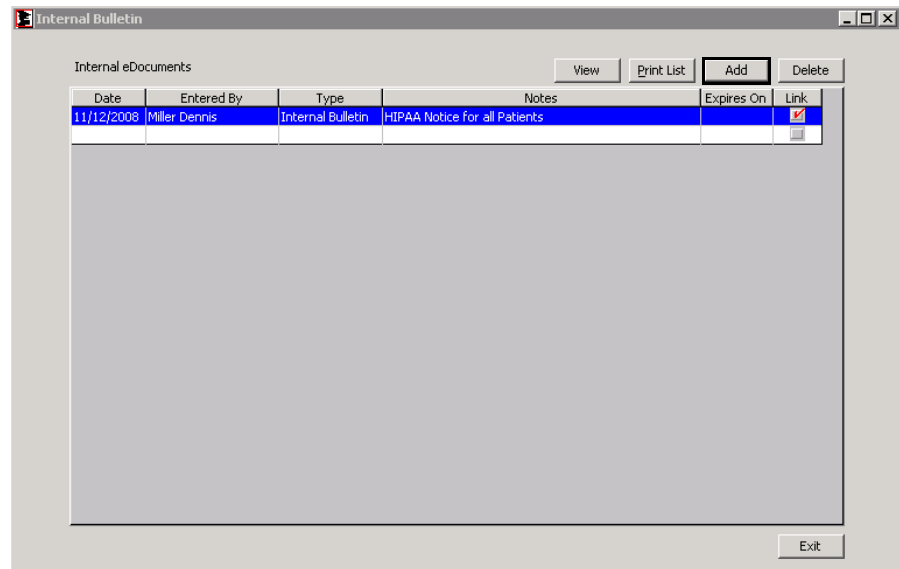
► **To create internal bulletins**

1. Open the Internal Bulletin window. For more information on opening the Internal Bulletin window, go to [To open the Internal Bulletin window on page 807](#).

NOTES

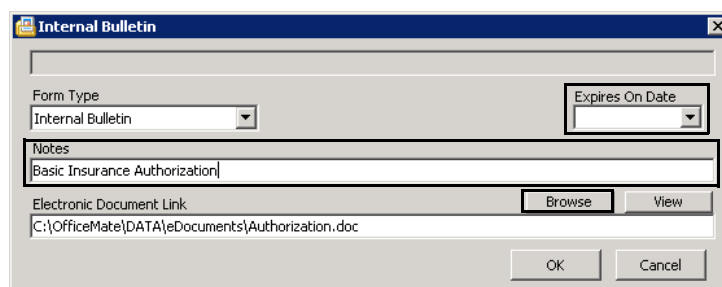
- You must be logged in to OfficeMate Administration to create internal bulletins.
- To view an electronic document, select the document and click **View**.
- To delete an electronic document, select it and then click **Delete**.
- To print a list of the internal bulletin electronic documents, click **Print List**.

2. Click **Add** to add a new document or double-click an existing document to edit it.



The Internal Bulletin Information window opens.

3. Type or select an expiration date in the **Expires on Date** text box as needed.
4. If you want to add notes to the bulletin, type them in the **Notes** text box.



5. Click **Browse** to navigate to and select an electronic document to link to the internal bulletin.
6. Click **OK** to save the internal bulletin.

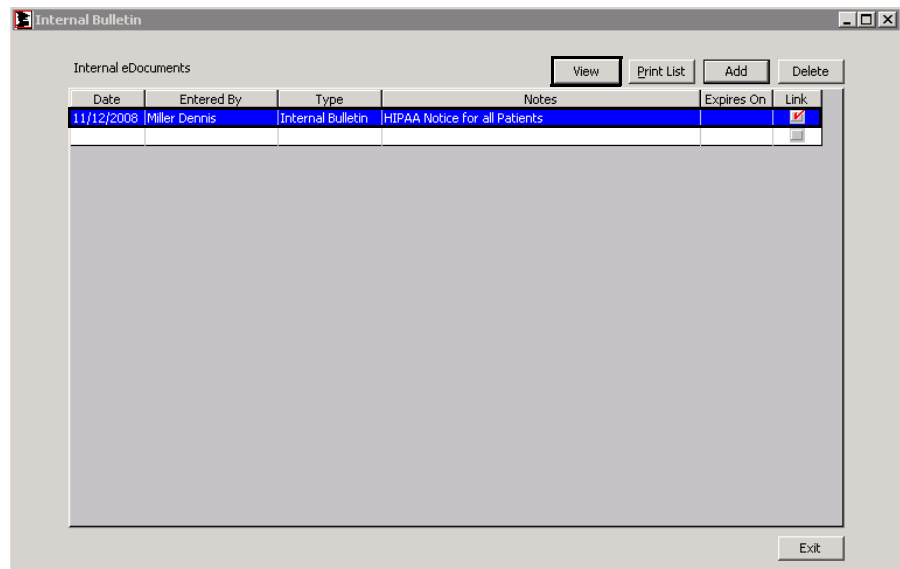
► To view internal bulletins

1. Open the Internal Bulletin window. For more information on opening the Internal Bulletin window, go to [To open the Internal Bulletin window on page 807](#).
2. Select an internal bulletin from the list.
3. Click **View**.

The internal bulletin opens.

NOTE

When you open an eDocument in OfficeMate, the eDocument opens in the application associated with that file type. For example, a PDF opens in Adobe Reader. If you do not have the application associated with that file type installed on your computer, you will not be able to open the file.



4. If you want to print a list of the internal bulletin electronic documents, click **Print List**.
5. Click **Exit** when you are finished.

In this chapter:

- [Getting Started with Commissions, 811](#)
- [Opening the Commission Calculation and Reporting Window, 812](#)
- [Setting Commission Parameters, 812](#)
- [Calculating Commissions, 813](#)
- [Viewing, Printing, & Exporting Commission Reports, 815](#)

OfficeMate includes robust commission calculation and reporting features. The Commission Calculation and Reporting window allows you calculate commissions for all providers and staff, groups based on region or location, or individuals. You can also control various conditions, such as payment status, that determine when commissions are allocated.

Getting Started with Commissions

Before calculating and reporting commissions, there are a few areas of OfficeMate that must be set up. Perform the following steps to prepare OfficeMate to calculate provider and staff commissions:

1. Ensure that you have indicated which providers and staff are eligible to receive commissions. For more information about indicating providers as commissionable, go to [To modify or add provider information on page 51](#). For more information about indicating staff as commissionable, go to [To modify or add staff information on page 55](#).
2. Ensure that, for providers and staff with special commission requirements, the Commission Override settings are complete. For information about provider Commission Override settings, go to [To modify or add provider information on page 51](#). For information about staff Commission Override settings, go to [To modify or add staff information on page 55](#).
3. Ensure that you have established which product types are commissionable and what the commission percentage and spiff amounts are. For more information about setting up product commission information, go to [To set up product types on page 249](#).
4. Ensure that you have set up product commission classes. For information on setting up commission classes go to [To set up commission classes on page 254](#).

Opening the Commission Calculation and Reporting Window

To open the Commission Calculation and Reporting window, perform the following steps:

1. Click **Tasks**.
2. Select **Calculate-Print Commissions**.

The Commission Calculation and Reporting window opens.

Setting Commission Parameters

To set up commission classes, perform the following steps:

1. Open the Commission Calculation and Reporting window. For more information, go to [Opening the Commission Calculation and Reporting Window on page 812](#).
2. Select **Calculate Commission** from the **Action** drop-down menu.
3. Click **Commission Setup**.
The Commission Setup window opens.
4. Select the Commission Calculation Options, as needed.
 - a. Select the **Calculate Commissions only on Fee Slip Line Items with no Charges to Insurance** check box if commission is not to be calculated on items with partial or full charges to an insurance company.
 - b. Select the **Calculate Commissions Net of Returns** check box if commission is to be calculated taking into account returned products. Unchecked means a commission is calculated whether or not the product is returned.
5. Select a Commission Eligibility option.
 - Select the **Patient portion is paid in full** radio button if the commission should be calculated after the patient has paid their portion in full. If a copay is paid in full, and there are no other patient charges, the commission is calculated.
 - Select the **Both patient and insurance portions are paid in full** radio button to calculate commission after the entire fee slip amount owed is paid in full.
 - Select the **The fee slip is recorded (no payment is required)** radio button if the commission should be calculated upon recording the fee slip whether payment is made or not.
6. Select the Commissionable Amount Reductions, as needed.
 - a. Select the **Patient Discounts and Package Discounts** check box to reduce the commissionable amount by these discounts.
 - b. Select the **Insurance Discounts Before and After Allotments** check box to reduce the commissionable amount by these discounts.
 - c. Select the **Amount Charged to Insurance** check box to reduce the commissionable amount by the amount charged to insurance.
 - d. Select the **Dispensing Fees** check box to reduce the commissionable amount by the amount charged in dispensing fees. This check box does

- not affect the commission calculations for providers who have a commission override set up in the Resource Setup window.
- e. Select the **Handwritten Items** check box to reduce the commissionable amount by the amount charged for items manually typed on the fee slip. This check box does not affect the commission calculations for providers who have a commission override set up in the Resource Setup window.
 - f. Select the **Patient Insurance Co-Pay Amount** check box to reduce the commissionable amount by the copay amount.
7. In the **Other Adjustment Types** list box, select and click the right arrow or double-click the adjustment types that should be excluded from the commissionable amounts.

Commission Setup

Commission Calculation Options

Calculate Commissions only on Fee Slip Items with no Charges to Insurance
 Calculate Commissions Net of Returns

Commission Eligibility

A Fee slip becomes eligible for commission when:

Patient portion is paid in full.
 Both patient and insurance portions are paid in full.
 The fee slip is recorded (no payment is required).

Commissionable Amount Reductions

Gross Commissionable Amount is reduced by the following:

Patient Discounts and Package Discounts
 Insurance Discounts Before and After Allotments
 Amount Charged to Insurance
 Dispensing Fees (commission calculated using the Provider Override only)
 Handwritten Items (commission calculated using the Provider Override only)
 Patient Insurance Co-Pay Amount

Other Adjustment Types

Select all adjustment types which change the commissionable amount.

Available	Selected
Double Charge	Refund
Employee Discount	Return Adjustment
Eyemed Adjustment	Returned Check
Getting contacts elsewhere	Returned Contact Lenses
Global Insurance Write-off	Returned Frame
Insurance Adjustment	Returned Spectacle Lenses
Insurance Denial	
Insurance Refund	
Insurance Reimbursement Write-Off	
Medicare Adjustment	
Over 120 days	
Patient Write-Off	
Sales Tax	
Spectera Adjustment	
Superior Adjustment	
VSP - Insurance Charge Adj.	
VSP - Lab Charge Adjustment	

OK Cancel

8. Click **OK** to save your changes.

Calculating Commissions

To calculate commissions, perform the following steps:

1. Open the Commission Calculation and Reporting window. For more information, go to [Opening the Commission Calculation and Reporting Window on page 812](#).
2. Select **Calculate Commission** from the **Action** drop-down menu.

3. Select a date range from which to calculate commissions:
 - Select a range from the **Span** drop down menu and use the left and right arrows to advance the time period.

OR

- Enter beginning and ending dates in the date range fields.

NOTES

- Only fee slips paid in full during the date range are included in the commission calculation. Fee slips recorded but not paid are not included.
- The Last Commission Date reflects the last day of business (the last day on which all locations have processed the End of Day) during the date range selected.

4. Limit commission calculations by selecting the regions you want to include, as needed:
 - a. Click the **Region** tab.
 - b. Double-click the regions listed in the Available column that you want to include in the calculations. The regions you double-click move to the Selected column.
5. Limit commission calculations by selecting the locations you want to include, as needed:
 - a. Click the **Location** tab.
 - b. Double-click the locations listed in the Available column that you want to include in the calculations. The locations you double-click move to the Selected column.
6. Limit commission calculations by selecting the providers you want to include, as needed:
 - a. Click the **Providers** tab.
 - b. Double-click the providers listed in the Available column that you want to include in the calculations. The providers you double-click move to the Selected column.

7. Limit commission calculations by selecting the staff you want to include, as needed:
 - a. Click the **Staff** tab.
 - b. Double-click the staff listed in the Available column that you want to include in the calculations. The staff you double-click move to the Selected column.

8. Click **Calculate**.

Viewing, Printing, & Exporting Commission Reports

To print commission reports, perform the following steps:

1. Open the Commission Calculation and Reporting window. For more information, go to [Opening the Commission Calculation and Reporting Window on page 812](#).
2. Select **a report type** from the **Action** drop-down menu.
 - Commission Report
 - Commission Pie Chart
 - Commission Bar Graph

3. Select the level of detail you want in the report from the Report Detail drop-down menu.
 - *Region*. Combines and lists Commissioned Fees, Commission Amount, Spiffs, and Total Commissions into a summary amount listed by Region.
 - *Location*. Combines and lists Commissioned Fees, Commission Amount, Spiffs, and Total Commissions into a summary amount listed by Location.
 - *Provider/Staff Type*. Combines and lists Commissioned Fees, Commission Amount, Spiffs, and Total Commissions into a summary amount listed by the provider and staff type.
 - *Provider/Staff*. Combines and lists Commissioned Fees, Commission Amount, Spiffs, and Total Commissions into a summary amount listed by the provider and staff names.
 - *Commission Class*. Combines and lists Commissioned Fees, Commission Amount, Spiffs, and Total Commissions into a summary amount listed by the commission class.
 - *Product Detail*. Details and lists Commissioned Fees, Commission Amount, Spiffs, and a Total Commissions by the detail of the product names recorded and product commission calculations. This is the product detail that makes up the commission calculations and includes the patient name and comments.
4. Select a range from the **Span** drop down menu and use the left and right arrows to advance the time period.
OR
Enter beginning and ending dates in the date range fields.
5. Refine the report results by selecting the regions you want to include, as needed:
 - a. Click the **Regions** tab.
 - b. Select only the regions that you want to include in the report in the **Selected** box.

NOTE	To select more than one region, press and hold the Ctrl key and then select multiple regions.
-------------	--

- c. Click the left arrow (<) to move the region to the **Available** box.
6. Refine the report results by selecting the locations you want to include, as needed:
 - a. Click the **Locations** tab.
 - b. Select only the locations that you want to include in the report in the **Selected** box.

NOTE	To select more than one locations, press and hold the Ctrl key and then select multiple locations.
-------------	---

- c. Click the left arrow (<) to move the locations to the **Available** box.

7. Refine the report results by selecting the providers you want to include, as needed:
 - a. Click the **Providers** tab.
 - b. Select only the providers that you want to include in the report in the **Selected** box.

NOTE To select more than one provider, press and hold the **Ctrl** key and then select multiple providers.

- c. Click the left arrow (<) to move the provider to the **Available** box.
8. Refine the report results by selecting the staff you want to include, as needed:
 - a. Click the **Staff** tab.
 - b. Select only the staff that you want to include in the report in the **Selected** box.

NOTE To select more than one staff member, press and hold the **Ctrl** key and then select multiple staff.

- c. Click the left arrow (<) to move the staff to the **Available** box.
9. Select the **Report Grouping** check boxes to sort the report results into groups, as needed. You can select any number of the check boxes that are available. Not all check boxes are available for all reports.

The screenshot shows the 'Commission Calculation and Reporting' application window. It is divided into several functional sections:

- Action:** Includes a dropdown menu set to 'Commission Report' and another dropdown set to 'Location'.
- Data Selection:** Features date pickers for 'Span: Quarter' and 'Q1 2009', along with a 'Last Commission Calculation Date: 12/31/2008'. Below this are tabs for 'Regions - ALL', 'Locations - ALL', 'Providers - ALL', and 'Staff - ALL'. A list of 'Available' items is on the left, and a list of 'Selected' items (019 Irvine Store, 022 Lake Forest Store) is on the right, with navigation arrows between them.
- Report Grouping:** Contains checkboxes for 'Region', 'Location', 'Type (Provider/Staff)', 'Provider/Staff', and 'Commission Class'. The 'Region' checkbox is checked.
- Output:** Includes a checked 'Printer' checkbox, a dropdown for the printer name ('Adobe PDF (from MOPSTEEGH) in session 4(Terminal S)'), a 'Folder' field with the path 'C:\OfficeMate\Export', and a 'File Name' field with 'Commissions.csv'.

At the bottom of the window are three buttons: 'Print Report', 'Commission Setup', and 'Close'.

10. To print the commission report, chart or graph, perform the following steps:
 - a. Select the **Printer** check box.
 - b. Select a printer from the drop-down menu.

The Report Viewer window opens and displays a preview of the report, chart, or graph.

- c. Click the Print icon.
 - d. Close the Report Viewer window when finished.
11. To export the commission details to a CSV file, perform the following steps:
 - a. Select the **CSV File** check box.
 - b. Type a new location in the **Folder** text box to change the destination for the file, as needed.
 - c. Type a new file name in the **File Name** text box, as needed.
 - d. Click **Print Report**.

The Export Complete dialog box opens to confirm that the report was created successfully.

- e. Click **OK**.
 - f. Click **View File** to open the commission export file.

NOTE

You must have a spreadsheet program, like Microsoft Excel, installed on your computer to view the CSV file in a tabular format.

In this chapter:

- [Printing Welcome & Thank-You Correspondences, 819](#)
- [Printing Referral Correspondences, 821](#)
- [Printing Recall Correspondences, 822](#)
- [Printing Birthday Correspondences, 824](#)
- [Printing Appointment Reminders, 826](#)
- [Printing Delinquent Correspondences, 829](#)
- [Printing Service Agreement Renewals, 830](#)

For information on printing correspondence, watch the "Processing Documents" videos.

NOTES

- Print letters and lists using 8½" × 11" paper stock or office letterhead.
- Print labels using Avery 5260 compatible white rectangular labels.
- Print postcards using postcard stock with four cards on 8½" × 11" sheets.
- For information on maintaining correspondences, go to [Maintaining Documents on page 833](#).

Printing Welcome & Thank-You Correspondences

1. Click **Tasks** on the main window toolbar, select **Correspondence [MU]**, and then select **Welcome**.

The Welcome/Thank You Processing window opens.

NOTES

- If you have a default welcome/thank you letter selected for a patient in the Patient Demographic>Letters window, the patient, along with all new patients, are automatically added to your welcome correspondence list. To select a default referral welcome letter or send a different welcome letter, go to [To select letters to send to a patient on page 233](#). To modify your default letter preferences, go to [To set up one-click document preferences on page 71](#).
- Click **History** to view the welcome/thank you correspondence printing history.
- Click **Clear All** to clear all patients from the welcome/thank you correspondence list.

2. Select a location for which you want to print welcome/thank you correspondences from the **Location** drop-down menu.

3. Select a communication preference for the welcome/thank you correspondences from the **Communication Preference** drop-down menu. To select communication preferences for patients, go to [To record demographic information on page 208](#).
4. Select or deselect patients by clicking the check box in the **Print** column.

NOTE You can also click **Select All** to select all patients or **Unselect All** to deselect all patients.

5. If you want to print labels and lists in addition to the letters/postcards, select the **Print Labels** and **Print Listing** check boxes and select the **Last Name** or **ZIP Code** Order Letters and Listings By radio button to sort the welcome/thank you correspondences that you are printing by last name or ZIP code.
6. If you do not want to print letters or postcards, select the **Do Not Print Letters/Postcards** check box; if you do want to print letters or postcards, select the **Last Name** or **ZIP Code** Order Letters/Postcards By radio button to sort the welcome/thank you correspondences that you are printing by last name or ZIP code.

The screenshot shows the 'Welcome/Thank You Processing' window. At the top, there are fields for 'Location' (Irvine Store) and 'Print Date' (7/21/2011). Below these are checkboxes for 'Select all names' and 'Starting Lastname'. A 'Filter By' section has radio buttons for 'Last Name' and 'ZIP Code', and a 'Start Selection' button. A 'Communication Preference' dropdown menu is visible. Below that are 'Select All' and 'Unselect All' buttons, and a 'Total Selected: 1' indicator. A table with the following data is shown:

Print	Patient Name	Print Letter/Postcard	Location
<input checked="" type="checkbox"/>	Patient, Sally	Welcome New Patient	Irvine Store

At the bottom, there is a 'Printing Options' section with checkboxes for 'Do Not Print Letters / Postcards', 'Print Labels', and 'Print Listing'. Below these are radio buttons for 'Order Letters/Postcards By' (Last Name selected) and 'Order Labels and Listings By' (Last Name selected). At the very bottom are buttons for 'Print', 'Cancel', 'History', 'Printer Setup', and 'Clear All'.

7. If you need to set up your printer, click **Printer Setup** to open the Print Setup window. For more information on setting up your printer, go to [Setting Up the Printer on page 21](#).

8. Click **Print** to print the welcome/thank you correspondences.

If you are printing labels or lists, the Report Printer Selection window opens. Click one of the following buttons:

- **Print** to print the welcome/thank you correspondences for the selected patients.
- **Skip** to skip the current print selection and go to the next print selection.
- **Test Print** to print a sample welcome correspondence.
- **Printer Setup** to set up the printer. For more information on setting up the printer, see [Setting Up the Printer on page 21](#).

The Correspondence Printing Window opens.

9. Click **Yes** to clear all of the patients from the Welcome/Thank You Processing window and update the correspondence history.

Printing Referral Correspondences

1. Click **Tasks** on the main window toolbar, select **Correspondence [MU]**, and then select **Referrals**.

The Referrals Processing window opens.

NOTES

- If you have a default referral thank you letter selected for a patient in the Patient Demographic>Letters window, the patient is automatically added to your referrals correspondence list. To select a default referral thank you letter or send a different type of referral letter, go to [To select letters to send to a patient on page 233](#).
- Click **History** to view the referral correspondence printing history.
- Click **Clear All** to clear all patients from the referral correspondence list.

2. Select a location for which you want to print referral correspondences from the **Location** drop-down menu.
3. Select a communication preference for the referral correspondences from the **Communication Preference** drop-down menu. To select communication preferences for patients, go to [To record demographic information on page 208](#).
4. Select or deselect patients by clicking the check box in the **Print** column.

NOTE

You can also click **Select All** to select all patients or **Unselect All** to deselect all patients.

5. If you want to print labels and lists in addition to the letters/postcards, select the **Print Labels** and **Print Listing** check boxes and select the **Last Name** or **ZIP Code** Order Labels and Listings By radio button to sort the referral correspondences that you are printing by last name or ZIP code.
6. If you do not want to print letters or postcards, select the **Do Not Print Letters/Postcards** check box; if you do want to print letters or postcards, select the **Last Name** or **ZIP Code** Order Letters/Postcards By radio button

to sort the referral correspondences that you are printing by last name or ZIP code.

7. If you need to set up your printer, click **Printer Setup** to open the Print Setup window. For more information on setting up your printer, go to [Setting Up the Printer on page 21](#).
8. Click **Print** to print the referral correspondences.
 If you are printing labels or lists, the Report Printer Selection window opens. Click one of the following buttons:
 - **Print** to print the referral correspondences for the selected patients.
 - **Skip** to skip the current print selection and go to the next print selection.
 - **Test Print** to print a sample referral correspondence.
 - **Printer Setup** to set up the printer. For more information on setting up the printer, see [Setting Up the Printer on page 21](#).
 The Correspondence Printing Window opens.
9. Click **Yes** to clear all of the patients from the Referrals Processing window and update the correspondence history.

Printing Recall Correspondences

NOTE For more information on creating and printing recalls, go to [Recalling Patients on page 297](#).

1. Click **Tasks** on the main window toolbar, select **Correspondence [MU]**, and then select **Recall [MU]**.
 The Process Recalls window opens.

NOTE Click **History** to view the recall correspondence printing history.

2. Select a location for which you want to print recall correspondences from the **Location** drop-down menu.
3. Select a communication preference for the recall correspondences from the **Communication Preference** drop-down menu. To select communication preferences for patients, go to [To record demographic information on page 208](#).
4. Type or select dates in the **Selection Range From** and **To** boxes and click **Start Selection** to find patients in the selected date range to whom you can send recall correspondences.

NOTE

To further narrow your selection, deselect the **Select all names** check box, select a filter option from the **Filter By** radio buttons, and type a letter (if you are filtering patients by last name) or number (if you are filtering patients by ZIP code) in the **Starting Last Name** or **Starting Zip Code** text box to print recall correspondence for patients meeting your selection criteria. For example, if you type "G" in the Starting Last Name text box, OfficeMate will print recall correspondences for patients with last names that begin with G–Z.

A list of patients meeting your selection criteria is displayed.

5. Select or deselect patients by clicking the check box in the **Print** column.

NOTE

You can also click **Select All** to select all patients or **Unselect All** to deselect all patients.

6. If you want to print labels and lists in addition to the letters/postcards, select the **Print Labels** and **Print Listing** check boxes and select the **Last Name** or **ZIP Code** Order Labels and Listings By radio button to sort the recall correspondences that you are printing by last name or ZIP code.
7. If you do not want to print letters or postcards, select the **Do Not Print Letters/Postcards** check box; if you do want to print letters or postcards,

select the **Last Name** or **ZIP Code** Order Letters/Postcards By radio button to sort the recall correspondences that you are printing by last name or ZIP code.

8. If you need to set up your printer, click **Printer Setup** to open the Print Setup window. For more information on setting up your printer, go to [Setting Up the Printer on page 21](#).

9. Click **Print** to print the recall correspondences.

If you are printing labels or lists, the Report Printer Selection window opens. Click one of the following buttons:

- **Print** to print the recall correspondences for the selected patients.
- **Skip** to skip the current print selection and go to the next print selection.
- **Test Print** to print a sample recall correspondence.
- **Printer Setup** to set up the printer. For more information on setting up the printer, see [Setting Up the Printer on page 21](#).

The Correspondence Printing Window opens.

10. Click **Yes** to clear all of the patients from the Process Recalls window and update the correspondence history.

Printing Birthday Correspondences

NOTE You must have patients' dates of birth recorded in their records in order to print birthday correspondences.

1. Click **Tasks** on the main window toolbar, select **Correspondence [MU]**, and then select **Birthday**.

The Process Birthday Correspondence window opens.

NOTE Click **History** to view the birthday correspondence printing history.

2. Select a location for which you want to print birthday correspondences from the **Location** drop-down menu.
3. Select a communication preference for the birthday correspondences from the **Communication Preference** drop-down menu. To select communication preferences for patients, go to [To record demographic information on page 208](#).
4. Type or select dates in the **Selection Range From** and **To** boxes and click **Start Selection** to find patients in the selected date range to whom you can send birthday correspondences.

NOTE

To further narrow your selection, deselect the **Select all names** check box, select a filter option from the **Filter By** radio buttons, and type a letter (if you are filtering patients by last name) or number (if you are filtering patients by ZIP code) in the **Starting Last Name** or **Starting Zip Code** text box to print birthday correspondence for patients meeting your selection criteria. For example, if you type "G" in the Starting Last Name text box, OfficeMate will print birthday correspondences for patients with last names that begin with G–Z.

A list of patients meeting your selection criteria is displayed.

5. Select or deselect patients by clicking the check box in the **Print** column.

NOTE

You can also click **Select All** to select all patients or **Unselect All** to deselect all patients.

6. If you want to print labels and lists in addition to the letters/postcards, select the **Print Labels** and **Print Listing** check boxes and select the **Last Name** or **ZIP Code** Order Labels and Listings By radio button to sort the birthday correspondences that you are printing by last name or ZIP code.
7. If you do not want to print letters or postcards, select the **Do Not Print Letters/Postcards** check box; if you do want to print letters or postcards,

select the **Last Name** or **ZIP Code** Order Letters/Postcards By radio button to sort the birthday correspondences that you are printing by last name or ZIP code.

The screenshot shows the 'Process Birthday Correspondence' window. At the top, there are fields for 'Location' (Irvine Store), 'Birth Month/Day' (From 07/22 To 07/25), and a 'Filter By' section with radio buttons for 'Last Name' and 'ZIP Code'. Below this is a table with columns: 'Print', 'Patient Name', 'Print Letter/Postcard', and 'Location'. The table contains 14 rows of patient data, all with 'Happy Birthday' in the 'Print Letter/Postcard' column and 'Irvine Store' in the 'Location' column. At the bottom, there is a 'Printing Options' section with checkboxes for 'Do Not Print Letters / Postcards', 'Print Labels', and 'Print Listing', and radio buttons for 'Order Letters/Postcards By' and 'Order Labels and Listings By', both set to 'Last Name'.

Print	Patient Name	Print Letter/Postcard	Location
<input checked="" type="checkbox"/>	votiRto, adBerrn	Happy Birthday	Irvine Store
<input checked="" type="checkbox"/>	vVehselinr, inCdy	Happy Birthday	Irvine Store
<input checked="" type="checkbox"/>	vWhny, aeDv	Happy Birthday	Irvine Store
<input checked="" type="checkbox"/>	vWodso, iMessa	Happy Birthday	Irvine Store
<input checked="" type="checkbox"/>	vWghti, nDa	Happy Birthday	Irvine Store
<input checked="" type="checkbox"/>	xanoM, omty7h	Happy Birthday	Irvine Store
<input checked="" type="checkbox"/>	yaccMr, Diraryl	Happy Birthday	Irvine Store
<input checked="" type="checkbox"/>	ysehIA, ihSea	Happy Birthday	Irvine Store
<input checked="" type="checkbox"/>	yuVhailte, taFnhapaoen	Happy Birthday	Irvine Store
<input checked="" type="checkbox"/>	zcShmt, eraTse	Happy Birthday	Irvine Store
<input checked="" type="checkbox"/>	zeMnde, lamiaA	Happy Birthday	Irvine Store
<input checked="" type="checkbox"/>	Zkule, renLewca	Happy Birthday	Irvine Store
<input checked="" type="checkbox"/>	Zmnrimema, irhsC	Happy Birthday	Irvine Store

8. If you need to set up your printer, click **Printer Setup** to open the Print Setup window. For more information on setting up your printer, go to [Setting Up the Printer on page 21](#).
9. Click **Print** to print the birthday correspondences.

If you are printing labels or lists, the Report Printer Selection window opens. Click one of the following buttons:

- **Print** to print the birthday correspondences for the selected patients.
- **Skip** to skip the current print selection and go to the next print selection.
- **Test Print** to print a sample birthday correspondence.
- **Printer Setup** to set up the printer. For more information on setting up the printer, see [Setting Up the Printer on page 21](#).

The Correspondence Printing Window opens.

10. Click **Yes** to clear all of the patients from the Process Birthday Correspondence window and update the correspondence history.

Printing Appointment Reminders

NOTE For information on scheduling appointments, go to [Scheduling Appointments on page 313](#).

1. Click **Tasks** on the main window toolbar, select **Correspondence [MU]**, and then select **Appointments**.

The Appointment Reminders window opens.

NOTE Click **History** to view the appointment correspondence printing history.

2. Select a location for which you want to print appointment reminder correspondences from the **Location** drop-down menu.
3. Select a communication preference for the appointment reminder correspondences from the **Communication Preference** drop-down menu. To select communication preferences for patients, go to [To record demographic information on page 208](#).
4. Type or select dates in the **Selection Range From** and **To** boxes and click **Start Selection** to find patients in the selected date range to whom you can send appointment reminder correspondences.

NOTE To further narrow your selection, deselect the **Select all names** check box, select a filter option from the **Filter By** radio buttons, and type a letter (if you are filtering patients by last name) or number (if you are filtering patients by ZIP code) in the **Starting Last Name** or **Starting Zip Code** text box to print appointment reminder correspondence for patients meeting your selection criteria. For example, if you type "G" in the Starting Last Name text box, OfficeMate will print appointment reminder correspondences for patients with last names that begin with G–Z.

A list of patients meeting your selection criteria is displayed.

5. Select or deselect patients by clicking the check box in the **Print** column.

NOTE You can also click **Select All** to select all patients or **Unselect All** to deselect all patients.

6. If you want to print labels and lists in addition to the letters/postcards, select the **Print Labels** and **Print Listing** check boxes and select the **Last Name** or **ZIP Code** Order Labels and Listings By radio button to sort the appointment reminder correspondences that you are printing by last name or ZIP code.

7. If you do not want to print letters or postcards, select the **Do Not Print Letters/Postcards** check box; if you do want to print letters or postcards, select the **Last Name** or **ZIP Code** Order Letters/Postcards By radio button to sort the appointment reminder correspondences that you are printing by last name or ZIP code.

The screenshot shows the 'Appointment Reminders' window. At the top, there are fields for 'Location' (Irvine Store), 'Selection Range' (From 05/22/2011 to 06/22/2011), and a 'Start Selection' button. Below this is a 'Filter By' section with radio buttons for 'Last Name' (selected) and 'ZIP Code', and a 'Communication Preference' dropdown set to 'Postal'. A table with columns 'Print', 'Patient Name', 'Print Letter/Postcard', and 'Location' is shown. The table contains five rows, all with the 'Print' checkbox checked. Below the table is a 'Printing Options' section with a 'Do Not Print Letters / Postcards' checkbox (unchecked), 'Print Labels' and 'Print Listing' checkboxes (unchecked), and two 'Order Letters/Postcards By' radio buttons: 'Last Name' (selected) and 'ZIP Code'. At the bottom are 'Print', 'Cancel', 'History', and 'Printer Setup' buttons.

Print	Patient Name	Print Letter/Postcard	Location
<input checked="" type="checkbox"/>	bAbtct, Tmi	Appointment - App date: 5/27/2011	Irvine Store
<input checked="" type="checkbox"/>	Patient, Sally	Appointment - App date: 6/17/2011	Irvine Store
<input checked="" type="checkbox"/>	Patient, Sally	Appointment - App date: 6/17/2011	Irvine Store
<input checked="" type="checkbox"/>	Patient, Sally	Appointment - App date: 7/5/2011	Irvine Store
<input checked="" type="checkbox"/>	Patient, Sally	Appointment - App date: 7/21/2011	Irvine Store

8. If you need to set up your printer, click **Printer Setup** to open the Print Setup window. For more information on setting up your printer, go to [Setting Up the Printer on page 21](#).

9. Click **Print** to print the appointment reminder correspondences.

If you are printing labels or lists, the Report Printer Selection window opens. Click one of the following buttons:

- **Print** to print the appointment reminders for the selected patients.
- **Skip** to skip the current print selection and go to the next print selection.
- **Test Print** to print a sample appointment reminder.
- **Printer Setup** to set up the printer. For more information on setting up the printer, see [Setting Up the Printer on page 21](#).

The Correspondence Printing Window opens.

10. Click **Yes** to clear all of the patients from the Appointment Reminders window and update the correspondence history.

Printing Delinquent Correspondences

For information on printing delinquent correspondence, watch the “Delinquent Notices & Service Agreements” video.

Printing delinquent correspondences prints letters, labels, or lists for all open balances over 31 days.

1. Click **Tasks** on the main window toolbar, select **Correspondence [MU]**, and then select **Delinquent**.

The Delinquent Processing window opens.

NOTE Click **History** to view the delinquent correspondence printing history.

2. Select a location for which you want to print delinquent correspondences from the **Location** drop-down menu.
3. Select a communication preference for the delinquent correspondences from the **Communication Preference** drop-down menu. To select communication preferences for patients, go to [To record demographic information on page 208](#).
4. Click **Start Selection** to find patients with open balances over 31 days to whom you can send delinquent correspondences.

A list of patients meeting your selection criteria is displayed.

NOTE To further narrow your selection, deselect the **Select all names** check box, select a filter option from the **Filter By** radio buttons, and type a letter (if you are filtering patients by last name) or number (if you are filtering patients by ZIP code) in the **Starting Last Name** or **Starting Zip Code** text box to print delinquent correspondence for patients meeting your selection criteria. For example, if you type “G” in the Starting Last Name text box, OfficeMate will print delinquent correspondences for patients with last names that begin with G–Z.

5. Select or deselect patients by clicking the check box in the **Print** column.

NOTE You can also click **Select All** to select all patients or **Unselect All** to deselect all patients.

6. If you want to print labels and lists in addition to the letters/postcards, select the **Print Labels** and **Print Listing** check boxes and select the **Last Name** or **ZIP Code** Order Labels and Listings By radio button to sort the delinquent correspondences that you are printing by last name or ZIP code.
7. If you do not want to print letters or postcards, select the **Do Not Print Letters/Postcards** check box; if you do want to print letters or postcards, select the **Last Name** or **ZIP Code** Order Letters/Postcards By radio button

to sort the delinquent correspondences that you are printing by last name or ZIP code.

Print	Patient Name	Print Letter/Postcard	Location
<input checked="" type="checkbox"/>	wAsdarn, sMulea	120 Days Delinquent	Irvine Store
<input checked="" type="checkbox"/>	wGallaoy, rLary	120 Days Delinquent	Irvine Store
<input checked="" type="checkbox"/>	vWgreinnei, eRny	120 Days Delinquent	Irvine Store
<input checked="" type="checkbox"/>	wLnoas, cRik	120 Days Delinquent	Irvine Store
<input checked="" type="checkbox"/>	wneoM, ahrRcid	120 Days Delinquent	Irvine Store
<input checked="" type="checkbox"/>	wonBlig, naRy	120 Days Delinquent	Irvine Store
<input checked="" type="checkbox"/>	wrEno, toearbR	120 Days Delinquent	Irvine Store
<input checked="" type="checkbox"/>	yaTlor, Aaeatr	120 Days Delinquent	Irvine Store
<input checked="" type="checkbox"/>	Yenokr, yGar	120 Days Delinquent	Irvine Store
<input checked="" type="checkbox"/>	yerPr, ehmrtaeK	120 Days Delinquent	Irvine Store
<input checked="" type="checkbox"/>	yeSarc, veSte	120 Days Delinquent	Irvine Store
<input checked="" type="checkbox"/>	yKceimrk, Leis	120 Days Delinquent	Irvine Store
<input checked="" type="checkbox"/>	Zhnga, Lni nOag	120 Days Delinquent	Irvine Store

8. If you need to set up your printer, click **Printer Setup** to open the Print Setup window. For more information on setting up your printer, go to [Setting Up the Printer on page 21](#).
9. Click **Print** to print the delinquent correspondences.

If you are printing labels or lists, the Report Printer Selection window opens. Click one of the following buttons:

- **Print** to print the delinquent correspondences for the selected patients.
- **Skip** to skip the current print selection and go to the next print selection.
- **Test Print** to print a sample delinquent correspondence.
- **Printer Setup** to set up the printer. For more information on setting up the printer, see [Setting Up the Printer on page 21](#).

The Correspondence Printing Window opens.

10. Click **Yes** to clear all of the patients from the Delinquent Processing window and update the correspondence history.

Printing Service Agreement Renewals

NOTE

For information on creating service agreements, go to [To create new service agreement renewal plans on page 45](#). For information on selecting service agreements for patients, go to [To record marketing information on page 222](#).

For information on printing service agreement renewals, watch the "Delinquent Notices & Service Agreements" video.

1. Click **Tasks** on the main window toolbar, select **Correspondence [MU]**, and then select **Service Agreement**.

The Service Agreement Renewal Processing window opens.

NOTE Click **History** to view the service agreement renewal printing history.

2. Select a location for which you want to print service agreement renewal correspondences from the **Location** drop-down menu.
3. Select a communication preference for the service agreement renewal correspondences from the **Communication Preference** drop-down menu. To select communication preferences for patients, go to [To record demographic information on page 208](#).
4. Type or select dates in the **Selection Range From** and **To** boxes and click **Start Selection** to find patients in the selected date range to whom you can send service agreement renewal correspondences.

NOTE To further narrow your selection, deselect the **Select all names** check box, select a filter option from the **Filter By** radio buttons, and type a letter (if you are filtering patients by last name) or number (if you are filtering patients by ZIP code) in the **Starting Last Name** or **Starting Zip Code** text box to print service agreement renewal correspondence for patients meeting your selection criteria. For example, if you type "G" in the Starting Last Name text box, OfficeMate will print service agreement renewal correspondences for patients with last names that begin with G–Z.

A list of patients meeting your selection criteria is displayed.

5. Select or deselect patients by clicking the check box in the **Print** column.

NOTE	You can also click Select All to select all patients or Unselect All to deselect all patients.
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6. If you want to print labels and lists in addition to the letters/postcards, select the **Print Labels** and **Print Listing** check boxes and select the **Last Name** or **ZIP Code** Order Labels and Listings By radio button to sort the service agreement renewal correspondences that you are printing by last name or ZIP code.
7. If you do not want to print letters or postcards, select the **Do Not Print Letters/Postcards** check box; if you do want to print letters or postcards, select the **Last Name** or **ZIP Code** Order Letters/Postcards By radio button to sort the service agreement renewal correspondences that you are printing by last name or ZIP code.
8. If you need to set up your printer, click **Printer Setup** to open the Print Setup window. For more information on setting up your printer, go to [Setting Up the Printer on page 21](#).
9. Click **Print** to print the service agreement renewal correspondences.
If you are printing labels or lists, the Report Printer Selection window opens. Click one of the following buttons:
 - **Print** to print the service agreement renewals for the selected patients.
 - **Skip** to skip the current print selection and go to the next print selection.
 - **Test Print** to print a sample service agreement renewal.
 - **Printer Setup** to set up the printer. For more information on setting up the printer, see [Setting Up the Printer on page 21](#).The Correspondence Printing Window opens.
10. Click **Yes** to clear all of the patients from the Service Agreement Renewal Processing window and update the correspondence history.

For information on maintaining documents, watch the "Maintaining Documents" video.

Creating & Modifying Letters

In this chapter:

- [Creating & Modifying Letters, 833](#)
- [Creating & Modifying Postcards, 840](#)

You can create and print letters for appointment reminders, birthday greetings, delinquent notices, exam forms, routing slips, marketing communications, recall notices, referral thank you notes, service agreement renewal notices, welcome greetings, and thank you notes. Letters are organized in folders by subject. This section tells you how to create and modify letters, including how

- [To create letters, 834](#)
- [To merge letters, 835](#)
- [To modify letters, 837](#)
- [To print letters, 838](#)
- [To rename letters, 838](#)
- [To delete letters, 839](#)

NOTE

All letters are created with the following default specifications:

- Page size: 8.5 inches x 11 inches
- Margins: 1 inch on the left and right sides of the page and 1 inch on the top and bottom sides of the page
- Font: Arial, 12 point
- Tabs: .75 inch tab stop

To modify the page size, margins, and tabs, click **File** on the toolbar while you are working with a letter and select **Page Setup**. Record modifications in the Page Setup window and click **OK**.

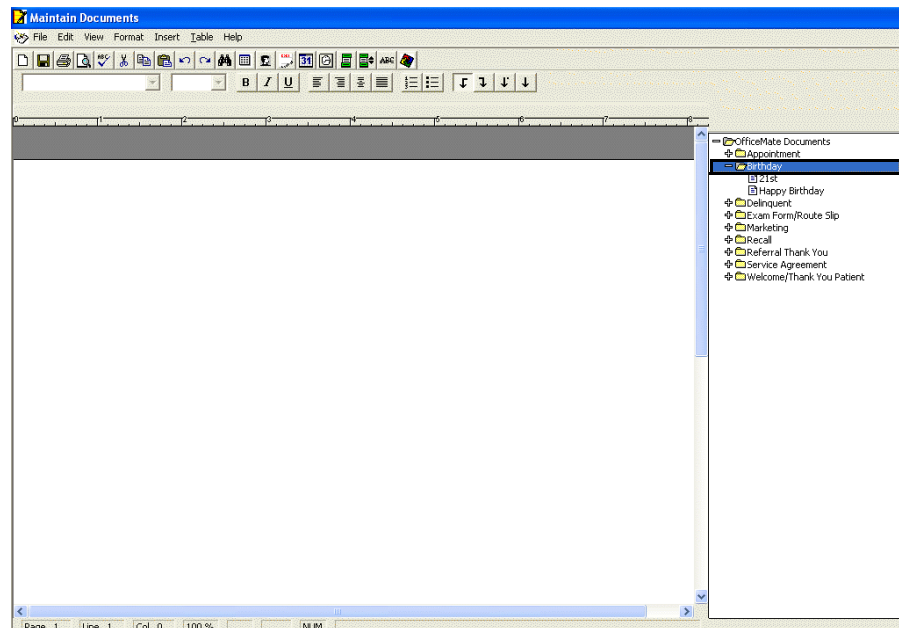
To modify the font style and size, click the icons, select new options from the font style and size drop-down menus, or click **Format** on the toolbar and select **Font**. Record modifications in the Font window and click **OK**.

► **To create letters**

1. Click **Tasks** on the main window toolbar and select **Maintain Documents**. The Maintain Documents window open.
2. Click **Setup** and select **Letters**.
3. Click on the **OfficeMate Documents** folder on the right side of the window.
4. Click on the name of the folder where you want to store your new letter.

NOTE

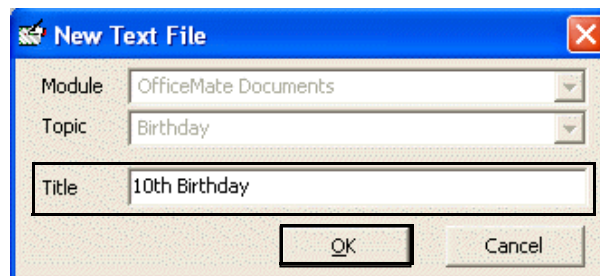
You cannot create new letters in the Delinquent folder.



5. Click **File** on the Maintain Documents window toolbar and select **New** or left-click on a letter in the folder you selected above and then right-click and select **New**.

The New Text File window opens.

6. Type a title for the new text file in the **Title** box.
7. Click **OK**.



8. Type the letter in the word processing window.

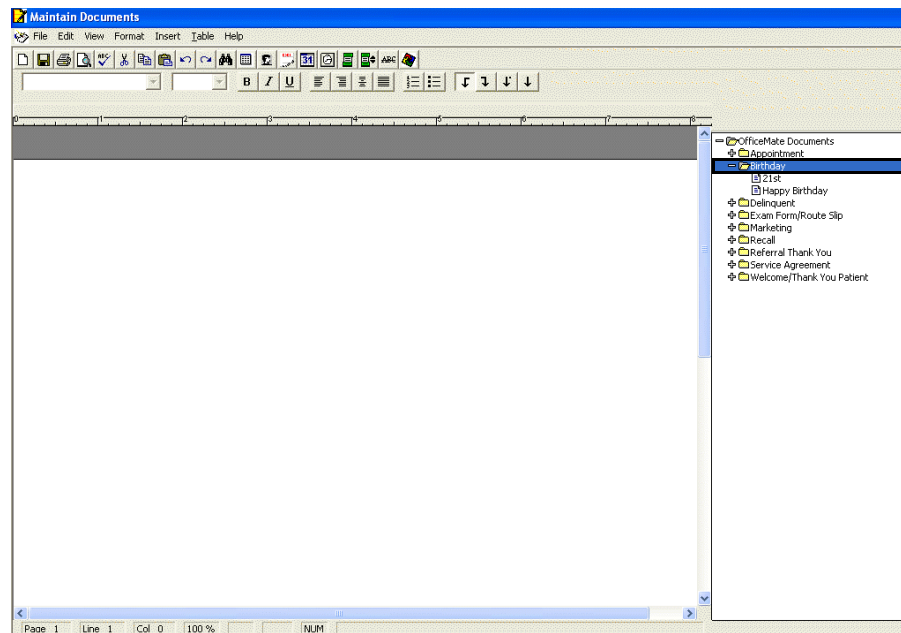
NOTES

- To format text, click on the icons or click **Format** on the toolbar and select appropriate font, paragraph, and color options.
- To insert page breaks, dates, times, and pictures, click **Insert** on the toolbar and select an appropriate option.
- To insert tables or table objects into your file, click the **Table** icon or click **Table** on the toolbar and select an appropriate option.
- To insert merge fields into your file, click **Insert** on the toolbar and select **Merge Fields**. Select a field from the Merge Fields window and click **Insert**.
- To insert tab stops into your file, click the arrow icons on the toolbar.

9. Click **File** on the Maintain Documents window toolbar and select **Save** or click the **Save** icon.

► **To merge letters**

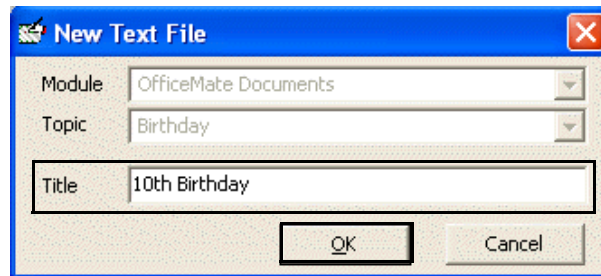
1. Click **Tasks** on the main window toolbar and select **Maintain Documents**. The Maintain Documents window open.
2. Click **Setup** and select **Letters**.
3. Click on the **OfficeMate Documents** folder on the right side of the window.
4. Click on the name of the folder where you want to store your merged letter.



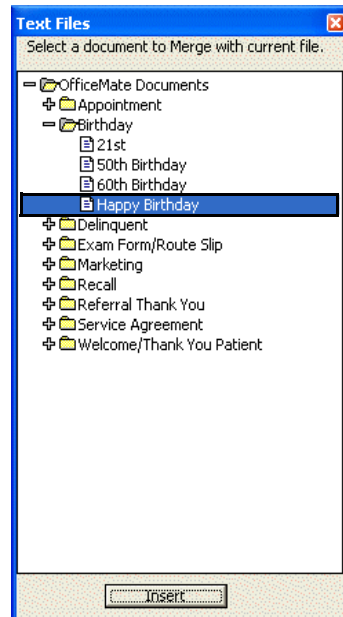
- Click **File** on the Maintain Documents window toolbar and select **New** or left-click on a letter in the folder you selected above and then right-click and select **New**.

The New Text File window opens.

- Type a title for the merged letter in the **Title** box.
- Click **OK**.



- Click **Insert** on the toolbar and select **Existing Document**.
- Click on the name of the letter that you want to merge into the letter that is already open.



- Click **Insert**.

11. Edit the text in the word processing window, if necessary.

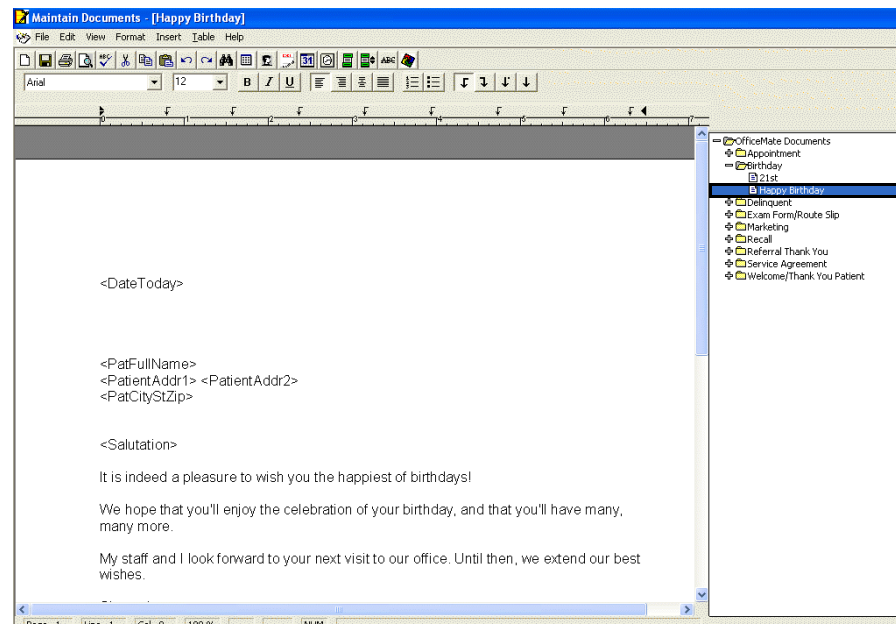
NOTES

- To format text, click on the icons or click **Format** on the toolbar and select appropriate font, paragraph, and color options.
- To insert page breaks, dates, times, and pictures, click **Insert** on the toolbar and select an appropriate option.
- To insert tables or table objects into your file, click the **Table** icon or click **Table** on the toolbar and select an appropriate option.
- To insert merge fields into your file, click **Insert** on the toolbar and select **Merge Fields**. Select a field from the Merge Fields window and click **Insert**.
- To insert tab stops into your file, click the arrow icons on the toolbar.

12. Click **File** on the Maintain Documents window toolbar and select **Save** or click the **Save** icon to save the file and refresh the list of folders and letters.

► **To modify letters**

1. Click **Tasks** on the main window toolbar and select **Maintain Documents**. The Maintain Documents window opens.
2. Click **Setup** and select **Letters**.
3. Click on the **OfficeMate Documents** folder on the right side of the window.
4. Click on a folder that contains a text file that you want to modify.
5. Click on the name of the text file that you want to modify.



The letter opens in the word processing window.

6. Edit the text in the word processing window.

NOTES

- To format text, click on the icons or click **Format** on the toolbar and select appropriate font, paragraph, and color options.
- To insert page breaks, dates, times, and pictures, click **Insert** on the toolbar and select an appropriate option.
- To insert tables or table objects into your file, click the **Table** icon or click **Table** on the toolbar and select an appropriate option.
- To insert merge fields into your file, click **Insert** on the toolbar and select **Merge Fields**. Select a field from the Merge Fields window and click **Insert**.
- To insert tab stops into your file, click the arrow icons on the toolbar.

7. Click **File** on the Maintain Documents window toolbar and select **Save** or click the **Save** icon.

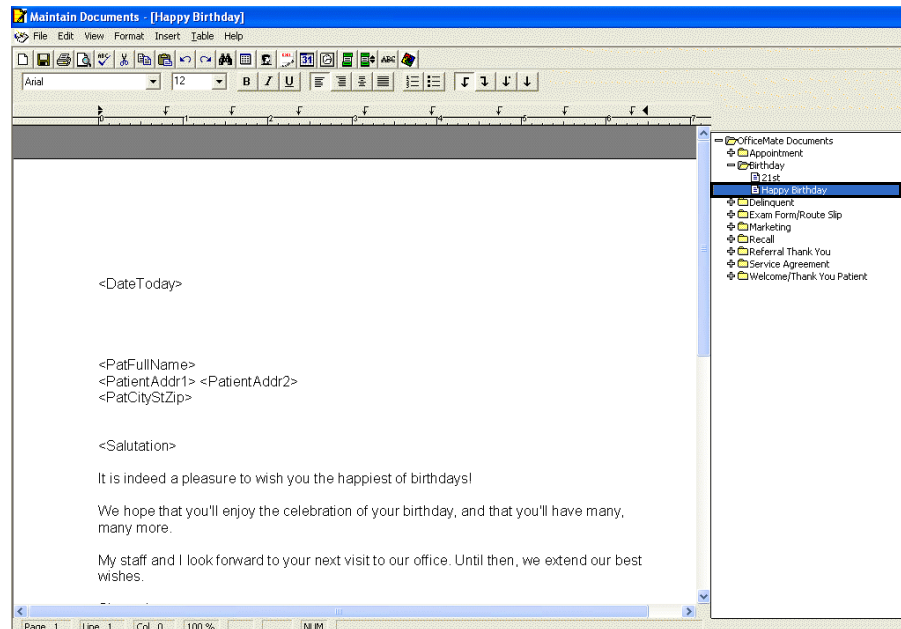
► To print letters

- To preview letters that you want to print, create a letter, click **File**, and select **Print Preview**. For more information on creating letters, go to [To create letters on page 834](#).
- To print letters that you have created or modified, go to [Printing Correspondences on page 819](#).

► To rename letters

1. Click **Tasks** on the main window toolbar and select **Maintain Documents**. The Maintain Documents window opens.
2. Click **Setup** and select **Letters**.
3. Click on the **OfficeMate Documents** folder on the right side of the window.
4. Click on a folder that contains a text file that you want to rename.

- Click on the name of the text file that you want to rename.

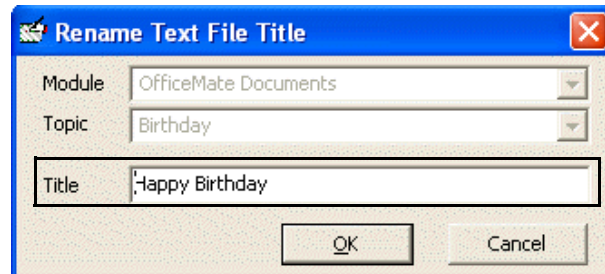


The letter opens in the word processing window.

- Click **File** on the Maintain Documents window toolbar and select **Rename Title** or left-click on a letter in the folder you selected above and then right-click and select **Rename Title**.

The Rename Text File Title window opens.

- Type the new text file title in the **Title** text box.



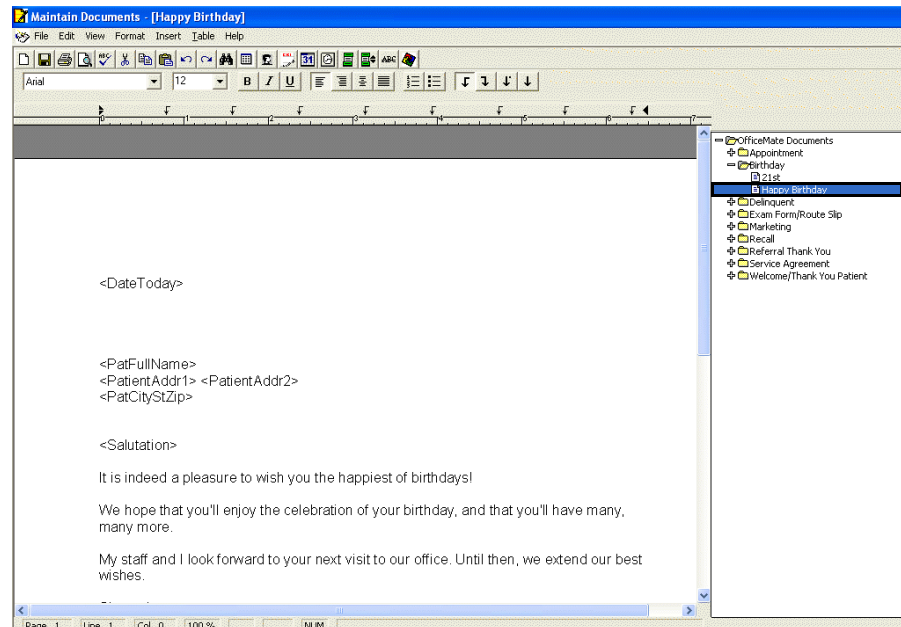
- Click **OK**.

► To delete letters

NOTE You cannot delete letters that are assigned to a recall mailing schedule, letters assigned to a service agreement renewal notice, letters selected for correspondence printing, and delinquent letters.

- Click **Tasks** on the main window toolbar and select **Maintain Documents**. The Maintain Documents window opens.
- Click **Setup** and select **Letters**.
- Click on the **OfficeMate Documents** folder on the right side of the window.

- Click on a folder that contains a text file that you want to delete.
- Click on the name of the text file that you want to delete.



The letter opens in the word processing window.

- Click **File** on the Maintain Documents window toolbar and select **Delete** or left-click on a letter in the folder you selected above and then right-click and select **Delete**.

The Delete Document Warning window opens.

- Click **Yes** to delete the text file.

Creating & Modifying Postcards

You can create and print postcards for appointment reminders, birthday greetings, recall notices, referral thank you notes, service agreement renewal notices, welcome greetings, and thank you notes. Postcards are organized in folders by subject. This section tells you how to create and modify postcards, including how

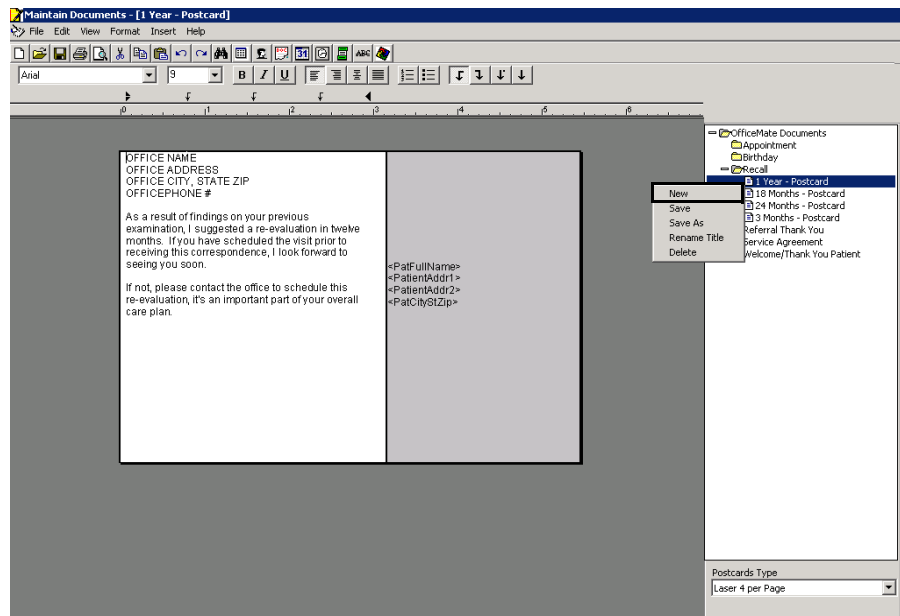
- To create postcards, 840
- To modify postcards, 842
- To print postcards, 843
- To rename postcards, 843
- To delete postcards, 844

NOTE To create postcards for mass mailings, go to [Post Card on page 692](#) and create and print the postcards through the Reports & Statements window.

► To create postcards

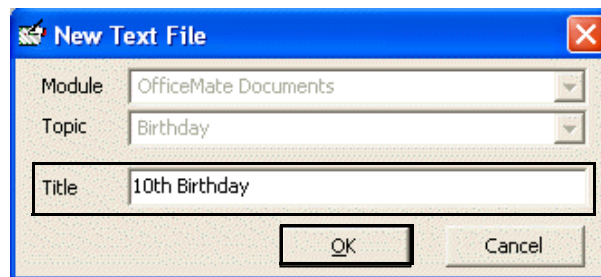
- Click **Tasks** on the main window toolbar and select **Maintain Documents**. The Maintain Documents window open.

2. Click **Setup** and select **Postcards**.
3. Click on the **OfficeMate Documents** folder on the right side of the window.
4. Click on the name of the folder where you want to store your new postcard.
5. Click **File** on the Maintain Documents window toolbar and select **New** or left-click on a postcard in the folder you selected above and then right-click and select **New**.



The New Text File window opens.

6. Type a title for the new postcard in the **Title** box.
7. Click **OK**.



8. Select one of six types of postcards from the **Postcards Type** drop-down menu.

9. Type the postcard text in the word processing window.

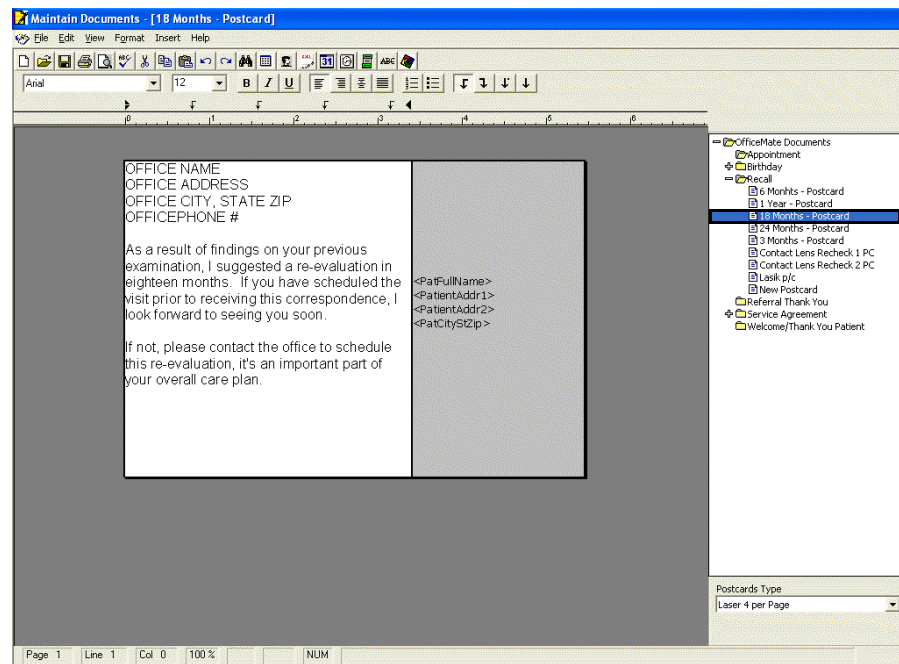
NOTES

- To format text, click on the icons or click **Format** on the toolbar and select appropriate font, paragraph, and color options.
- To insert dates, times, and pictures, click **Insert** on the toolbar and select an appropriate option.
- To insert merge fields into your file, click **Insert** on the toolbar and select **Merge Fields**. Select a field from the Merge Fields window and click **Insert**.
- To insert tab stops into your file, click the arrow icons on the toolbar.

10. If you want to print a test page of the postcard that you just created, click **File** on the Maintain Documents toolbar and select **Print**.
11. Click **File** on the Maintain Documents window toolbar and select **Save** or click the **Save** icon.

► To modify postcards

1. Click **Tasks** on the main window toolbar and select **Maintain Documents**. The Maintain Documents window open.
2. Click **Setup** and select **Postcards**.
3. Click on the **OfficeMate Documents** folder on the right side of the window.
4. Click on a folder that contains a postcard that you want to modify.
5. Click on the name of the postcard that you want to modify.



6. Select one of six types of postcards from the **Postcards Type** drop-down menu.

7. Edit the postcard text in the word processing window.

NOTES

- To format text, click on the icons or click **Format** on the toolbar and select appropriate font, paragraph, and color options.
- To insert dates, times, and pictures, click **Insert** on the toolbar and select an appropriate option.
- To insert merge fields into your file, click **Insert** on the toolbar and select **Merge Fields**. Select a field from the Merge Fields window and click **Insert**.
- To insert tab stops into your file, click the arrow icons on the toolbar.

8. If you want to print a test page of the postcard that you just modified, click **File** on the Maintain Documents toolbar and select **Print**.
9. Click **File** on the Maintain Documents window toolbar and select **Save** or click the **Save** icon.

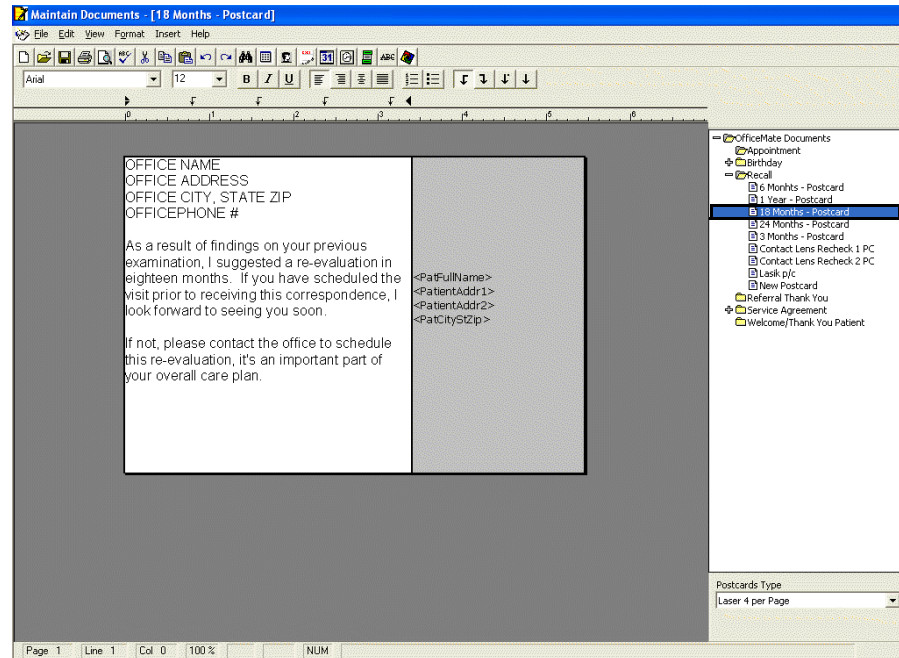
► To print postcards

- ❖ To print postcards that you have created or modified, go to [Printing Correspondences on page 819](#).

► To rename postcards

1. Click **Tasks** on the main window toolbar and select **Maintain Documents**. The Maintain Documents window open.
2. Click **Setup** and select **Postcards**.
3. Click on the **OfficeMate Documents** folder on the right side of the window.
4. Click on a folder that contains a postcard that you want to rename.

- Click on the name of the postcard that you want to rename.

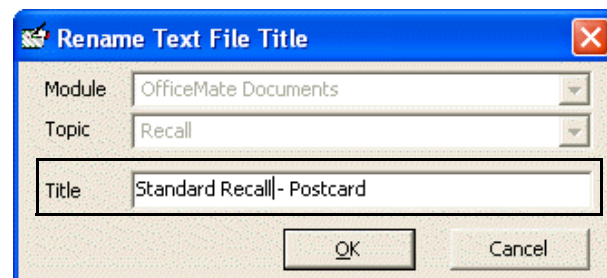


The postcard opens in the word processing window.

- Click **File** on the Maintain Documents window toolbar and select **Rename Title** or right-click on a postcard in the folder you selected above and select **Rename Title**.

The Rename Text File Title window opens.

- Type the new text file title in the **Title** text box.



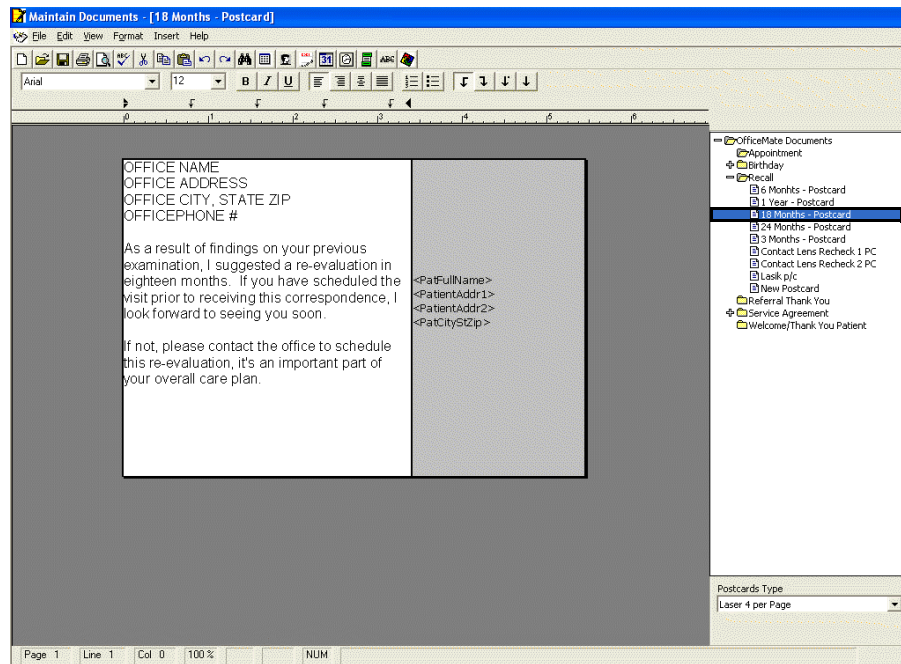
- Click **OK**.

► To delete postcards

NOTE You cannot delete postcards that are assigned to a recall mailing schedule, postcards assigned to a service agreement renewal notice, or postcards selected for correspondence printing.

- Click **Tasks** on the main window toolbar and select **Maintain Documents**. The Maintain Documents window open.
- Click **Setup** and select **Postcards**.
- Click on the **OfficeMate Documents** folder on the right side of the window.

4. Click on a folder that contains a postcard that you want to delete.
5. Click on the name of the postcard that you want to delete.



6. Click **File** on the Maintain Documents window toolbar and select **Delete** or left-click on a postcard in the folder you selected above and then right-click and select **Delete**.
The Delete Document Warning window opens.
7. Click **Yes** to delete the postcard.

In this chapter:

- [Determining Your SQL Database Server & Name, 848](#)
- [Determining the Location of Your DATA Folder, 848](#)
- [Automatically Backing Up Databases, 849](#)
- [Manually Backing Up Databases, 852](#)
- [Restoring Databases, 853](#)

Back up your OfficeMate/ExamWRITER database files on a regular basis! A full database backup is the best way to make sure that you can recover your OfficeMate/ExamWRITER database files in the event of a database corruption, hardware or software failure, computer virus attack, fire, theft, or natural disaster.

Share this information with your backup service provider or your certified operating system and network technician.

NOTES

- Eyefinity limits the support it provides exclusively to its own products and, therefore, does *not* provide assistance or support for any issues related to the backup and restoration of data. Eyefinity does not guarantee nor validate the integrity of backup files.
- Eyefinity highly recommends employing a certified operating system and network technician to advise you on recommended data backup procedures.
- Eyefinity recommends backing up your OfficeMate data *every day*.
- Eyefinity recommends using *multiple* back up methods and backing up your data to *multiple* files in case one backup file is lost or corrupt.
- The OfficeMate/ExamWRITER programs do *not* provide backup functions.

Read this document carefully to ensure a successful backup and recovery plan.

There are two areas that must be backed up to ensure a successful recovery plan:

- **The database.**
- **The DATA folder.** For more information, go to [Determining the Location of Your DATA Folder on page 848](#).

Determining Your SQL Database Server & Name

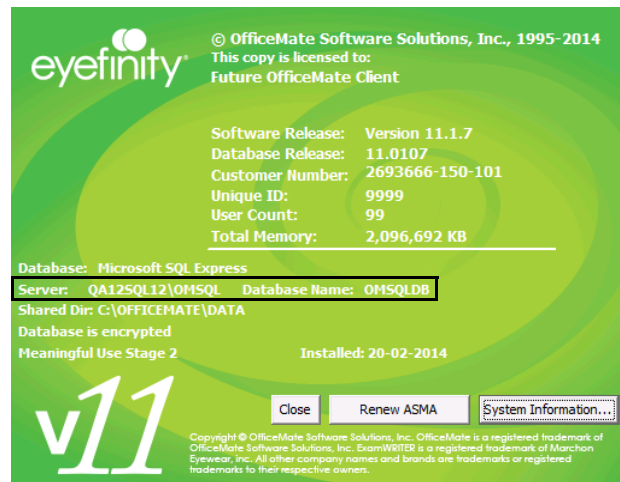
Your data backup provider or certified operating system and networking technician will need to know the SQL server instance and database name to be able to properly set up the backup system.

To determine your SQL server instance and database name, perform the following steps:

1. Open OfficeMate or ExamWRITER.
2. Click **Help**.
3. Click **About OfficeMate**, **About ExamWRITER**, or **About Administration**, depending upon which software you have open.

The About window opens.

4. Look for the *Server* and *Database Name* information.



5. Tell your data backup provider or certified operating system and networking technician the SQL server instance and database name.

Determining the Location of Your DATA Folder

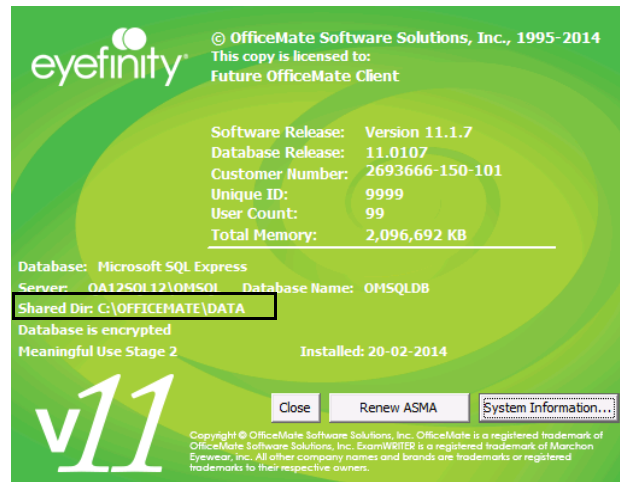
In addition to backing up your database, you must also back up critical files that are stored in your DATA folder. The DATA folder contains such files as eDocuments, electronic claims, etc. Your data backup provider or certified operating system and networking technician will need to know the location of your DATA folder to be able to properly set up the backup system.

To determine the location of your DATA folder, perform the following steps:

1. Open OfficeMate or ExamWRITER.
2. Click **Help**.
3. Click **About OfficeMate**, **About ExamWRITER**, or **About Administration**, depending upon which software you have open.

The About window opens.

- Look for the *Shared Dir* or *Data Dir* information to determine the location of the DATA folder.

**NOTE**

The DATA folder is usually located at \\Server\OfficeMate\DATA.

- Tell your data backup provider or certified operating system and networking technician where your DATA folder is located.

Automatically Backing Up Databases

This section tells you how to automatically back up your database and includes the following topics:

- [Choosing an Automatic Backup Method, 849](#)
- [Automatically Backing Up a SQL Database, 851](#)

Choosing an Automatic Backup Method

Eyefinity recommends using *multiple* back up methods and backing up your data to *multiple* files in case one backup file is corrupt. Work with your data backup provider or certified operating system and networking technician to determine which solution is best for you.

Use the following table to help you decide which backup method(s) are best suited for your practice.

Backup Method	Advantages	Disadvantages	Recommended Solution
Online	<ul style="list-style-type: none"> Provider installs, sets up, and maintains the backup software Backups are automated Easy restoration process Off-site backup, not susceptible to local disasters or theft Low cost to set up and maintain 	<ul style="list-style-type: none"> Backup times vary depending on the speed and reliability of your internet connection Backups are subject to the bandwidth and data transfer limitations set by your internet service provider 	<p>DataHEALTH 800.269.3666 or sales@eyefinity.com</p> <p>Practice Shadow by Think Smart Group, Inc. 800.941.4913.</p>
Local	<ul style="list-style-type: none"> Ideal for large practices with in-house IT No need to worry about data limitations or service interruptions 	<ul style="list-style-type: none"> Requires more technical knowledge to install, backup, and restore Requires investment in backup software and hardware Additional expenses for off-site, secure, physical storage Unsecured backups are susceptible to theft, fire, or natural disaster 	<p>For SQL databases: Veritas Backup Exec with Agent for Applications and Databases www.veritas.com</p>

Although there are many types of backup media that you can use to back up your database files (for example, CD-R, DVD-R, USB flash drives, and external hard drives), Eyefinity recommends using DataHEALTH for data backup and off-site storage. DataHEALTH protects your practice by automatically backing up, encrypting, and storing your data in a secure, off-site data center. If you

experience a data loss, all of your lost files are recoverable anytime with the click of a button. DataHEALTH also offers the following benefits:

- Provides a level of service that exceeds industry standards for your data storage and recovery needs.
- Automatically backs up and verifies your OfficeMate/ExamWRITER database files.
- DataHEALTH is the only cloud backup company to be URAC HIPAA Security Business Accredited along with FIPS 140-2 encryption validated.
- DataHEALTH's cloud backup service is powered by Asigra: an enterprise-level, awarding-winning cloud backup software.
- DataHEALTH's cloud backup powered by Asigra goes through five key checks to ensure that your data is always restorable.
- DataHEALTH's Backup Support professionals have restored data expediently for thousands of customers.
- Cloud backup with DataHEALTH is cost effective. Pricing starts at \$20.00/month, which is less than \$1/day.
- DataHEALTH has certified advanced cloud backup professionals on staff.
- DataHEALTH's technical support and customer service staff are based in the United States. In a time of emergency, you want support that is stateside. No worries of dealing with language barriers!

DataHEALTH offers a free 30-day, obligation-free trial. For more information on this offer and DataHEALTH, contact Eyefinity at 800.269.3666 or www.eyefinity.com/strategic-partners/CertifiedPartners.html.

Automatically Backing Up a SQL Database

1. Review the documentation and recommendations provided by your backup provider or backup solution.
2. Tell your data backup provider or certified operating system and networking technician the SQL server instance and database name. For information about finding your SQL server instance and database name, go to [Determining Your SQL Database Server & Name on page 848](#).

NOTE

SQL databases cannot be treated like other files within Windows. SQL databases require such specialized software as SQL Server Management Studio or Veritas Backup Exec with Agent for Applications and Databases to ensure a complete and valid backup. Copying a SQL database without using specialized SQL database management software will cause irreparable damage to the database.

3. Tell your data backup provider or certified operating system and networking technician where your DATA folder is located. For information about finding

your DATA folder, go to [Determining the Location of Your DATA Folder on page 848](#).

NOTE

- The DATA folder contains such files as eDocuments, electronic claims, etc. These files reside outside of your SQL databases and do not require specialized software to perform a backup.
- If you are storing eDocuments or electronic claims in a location other than the DATA folder, ensure that you also navigate to the location of these documents and back them up.

Manually Backing Up Databases

Eyefinity recommends manual backups only as a temporary measure before upgrading or applying patches to the OfficeMate/ExamWRITER software. Manual backups are not intended to replace automatic backups.

This section tells you how to manually back up your database and includes the following topics:

- [Preparing for a Manual Backup, 852](#)
- [Manually Backing Up a SQL Database, 852](#)

Preparing for a Manual Backup

1. Review your backup device and media manufacturer's replacement recommendations and ensure that your backup device and media are within their useful product lifecycle.
2. Clearly label the backup media that you are using for each day of the week that your office is open for business.
3. Review the HIPAA security and privacy requirements and ensure that your backup procedures are compliant.

Manually Backing Up a SQL Database

NOTE

Eyefinity highly recommends employing a certified operating system and network technician to advise you on recommended data backup procedures.

1. Close OfficeMate and ExamWRITER on all of your computers.

NOTE

The integrity of your backup is severely compromised, and in some cases invalidated, if you perform a backup while OfficeMate and ExamWRITER are open.

2. Tell your certified operating system and networking technician the SQL server instance and database name. For information about finding your SQL

server instance and database name, go to [Determining Your SQL Database Server & Name on page 848](#).

NOTE SQL databases cannot be treated like other files within Windows. SQL databases require such specialized software as SQL Server Management Studio or Veritas Backup Exec with Agent for Applications and Databases to ensure a complete and valid backup. Copying a SQL database without using specialized SQL database management software will cause irreparable damage to the database.

3. Tell your certified operating system and networking technician where your DATA folder is located. For information about finding your DATA folder, go to [Determining the Location of Your DATA Folder on page 848](#).

NOTE

- The DATA folder contains such files as eDocuments, electronic claims, etc. These files reside outside of your SQL databases and do not require specialized software to perform a backup.
- If you are storing eDocuments or electronic claims in a location other than the DATA folder, ensure that you also navigate to the location of these documents and back them up.

Restoring Databases

NOTE If you need to restore data from a backup, ensure that your staff is properly trained to restore data. If you are not familiar with your restoration procedures, contact your certified operating system and networking technician or the manufacturer of your backup media.

1. Close OfficeMate and ExamWRITER on all of your computers.
2. Follow the instructions in your backup program to restore the SQL server instance and database name. For information about finding your SQL server instance and database name, go to [Determining Your SQL Database Server & Name on page 848](#).

NOTE SQL databases cannot be treated like other files within Windows. SQL databases require such specialized software as SQL Server Management Studio or Veritas Backup Exec with Agent for Applications and Databases to ensure a complete and valid restoration. Copying a SQL database without using specialized SQL database management software will cause irreparable damage to the database.

3. Follow the instructions in your backup program to restore your DATA folder to its proper location. For information about finding the proper location of

your DATA folder, go to [Determining the Location of Your DATA Folder on page 848](#).

NOTE

- The DATA folder contains the Access databases and such files as eDocuments, electronic claims, etc.
- If you are storing eDocuments or electronic claims in a location other than the DATA folder, ensure that you restore those files to their proper locations.

In this chapter:

- [Phone Support, 855](#)
- [Online Support, 855](#)
- [Terms of Support, 855](#)

Eyefinity considers our Customer Care department the backbone of a successful, positive relationship between our company and you, our client. Our goal is to continually enhance the level of service provided by our Customer Care department. Eyefinity offers reasonable annual software maintenance agreement fees and, simultaneously, must establish and enforce our service guidelines in order to retain these fees. This chapter outlines our service guidelines and policies.

Phone Support

Eyefinity offers toll-free customer care from 6:00am to 5:00pm Pacific Time. Dial 800.942.5353 and choose option 1 to reach our Customer Care team.

Your calls are answered live by our knowledgeable Customer Care team who will assist you with your support issues. Eyefinity's service levels are equal to or better than the best service levels provided by any competitive help desk service in our industry today.

Online Support

For more support information on OfficeMate or any of the OfficeMate Suite products, go to the Eyefinity support web page at <http://www.eyefinity.com> You can email your support questions to the Eyefinity Customer Care department at officematesupport@eyefinity.com.

We highly encourage you to seek out answers to your questions in our online support community where you can create and update support cases, access our growing knowledge base of information, ask questions and get answers from your peers, and contribute your ideas to improving Eyefinity products. Go to www.eyefinity.com/training-and-support/Support-Community.html to access the new Eyefinity Support Community.

Terms of Support

The Maintenance & Support is a mandatory agreement all clients must maintain each year through the payment of an annual fee for each software product licensed from Eyefinity. This Maintenance & Support includes the annual OfficeMate/Report WRITER/ExamWRITER license, all software upgrades, and toll-free help desk services for our software applications.

The Eyefinity business model requires us to amortize our annual investment in software application development and customer care across our broad base of clients using Eyefinity's software. By requiring that everyone invest by paying this low annual fee each year, we can retain lower fees. If fewer clients participate, the result would be substantially higher fees to amortize these services across fewer clients.

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